



Jackson Hospital 2025 Community Health Needs Assessment

Approved by Board: *October 29th, 2025*



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Executive Summary

Jackson Hospital (or the "Hospital") performed a Community Health Needs Assessment (CHNA) together in partnership with Ovation Healthcare ("Ovation") to assist in determining the health needs of the local community and an accompanying implementation plan to address the identified health needs. This CHNA report consists of the following information:

- 1) a definition of the community served by the Hospital and a description of how the community was determined;
- 2) a description of the process and methods used to conduct the CHNA;
- 3) a description of how the Hospital solicited and considered input received from persons who represent the broad interests of the community it serves;
- 4) commentary on the 2022 CHNA Assessment and Implementation Strategy efforts;
- 5) a prioritized description of the significant health needs of the community identified through the CHNA along with a description of the process and criteria used in identifying certain health needs as significant and prioritizing those significant health needs; and
- 6) a description of resources potentially available to address the significant health needs identified through the CHNA.

Data was gathered from multiple well-respected secondary sources to help build an accurate picture of the current community and its health needs. A broad community survey was performed to review and provide feedback on the prior CHNA and to support the determination of the Significant Health Needs of the community in 2025.

The health priorities identified by Jackson Hospital from this assessment are:



Access to
Specialty Care



Chronic Disease
Management



Mental
Health

In the Implementation Strategy section of the report, the Hospital addresses these areas through identified programs and resources with intended impacts included for each health need to track progress towards improved community health outcomes.

Community Health Needs Assessment

Overview

CHNA Purpose

A CHNA is part of the required documentation of "Community Benefit" under the Affordable Care Act for 501(c)(3) hospitals and fulfills requirements for accreditation for many health and public health entities. However, regardless of status, a CHNA provides many benefits to an organization. This assessment provides comprehensive information about the community's current health status, needs, and disparities and offers a targeted action plan to address these areas, including programmatic development and partnerships.

Organizational Benefits

- Identify health disparities and social drivers to inform future outreach strategies
- Identify key service delivery gaps
- Develop an understanding of community member's perceptions of healthcare in the region
- Support community organizations for collaborations

CHNA Process



Process & Methods

This assessment takes a comprehensive approach to determining community health needs and includes the following methodology:

- Several independent data analyses based on secondary source data
- Augmentation of data with community opinions through a community-wide survey
- Resolution of any data inconsistency or discrepancies by reviewing the combined opinions formed by local expert advisors and community members

Data Collection and Analysis

This assessment relies on secondary source data, which primarily uses the county as the smallest unit of analysis. Most data used in the analysis is available from public internet sources and proprietary data. Any critical data needed to address specific regulations or developed by the community members cooperating in this study are displayed in the CHNA report appendix.

All data sources are detailed in the appendix of this report with the majority of the data used in this assessment coming from:

- County Health Rankings 2025 Report
- Centers for Medicare & Medicaid Services – CMS
- Centers for Disease Control and Prevention – CDC
- Health Resources & Services Administration – HRSA
- Florida Department of Health – FLHealthCharts

A standard process of gathering community input was utilized. In addition to gathering data from the above sources, a CHNA survey was deployed to local expert advisors and the general public to gain input on local health needs and the needs of priority populations. Local expert advisors were local individuals selected according to criteria required by the Federal guidelines and regulations and the Hospital's desire to represent the region's economic, racial, and geographically diverse population. One hundred forty-eight (148) survey responses from community members were gathered between June and July 2025.

Community Input

Input was requested from the required three minimum federally required sources and expanded to include other representative groups. The Hospital asked all those participating in the written comment solicitation process to self-identify into representative classifications, which are detailed in the appendix to this report. Additionally, survey respondents were asked to identify their age, race/ethnicity, and income level to ensure a diverse range of responses were collected.

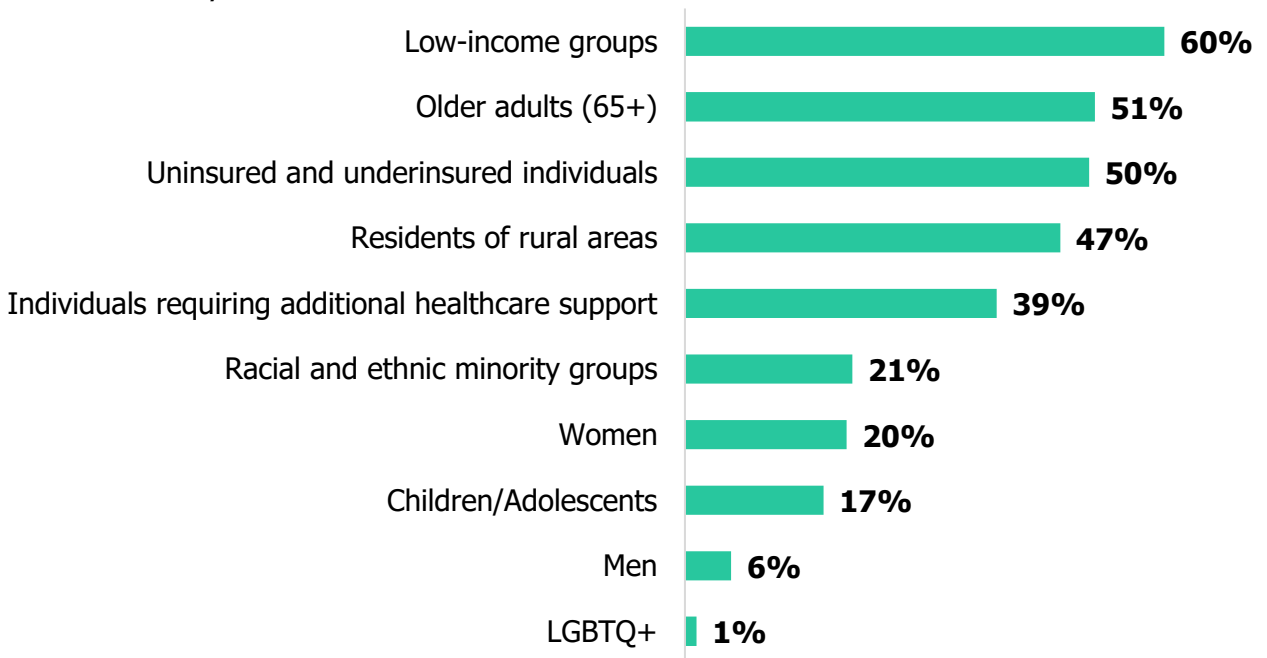
The following local experts and organizations, and well as the broad community, were asked to participate and provide input in the CHNA survey:

- Chipola College
- Emerald Coast Regional Council
- Family Network on Disabilities of Florida
- Florida Agency for Persons with Disabilities
- Florida Health
- Jackson Hospital
- Jackson County School District
- Jackson County Government
- Local Churches
- Marianna City Government
- Mariana Health and Wellness
- United Way of Northwest Florida
- University of Florida

Priority Populations

Medically underserved populations are those who experience health disparities or face barriers to receiving adequate medical care because of income, geography, language, etc. The Hospital assessed what population groups in the community (“Priority Populations”) would benefit from additional focus and asked survey respondents to elaborate on the key health challenges these groups face.

Survey Question: Which groups would you consider to have the greatest health needs (rates of illness, trouble accessing healthcare, etc.) in your community?



Local opinions of the needs of Priority Populations, while presented in their entirety in the appendix, were abstracted into the following key themes:

- The top three priority populations identified were low-income groups, older adults (65+), and uninsured and underinsured individuals.
- Summary of unique or pressing needs of the priority groups identified by the respondents:

Cost of Healthcare Services

Lack of Transportation

Access to Specialists

Input on 2022 CHNA

The Hospital considered written comments received on the prior CHNA and Implementation Strategy as a component of the development of the 2025 CHNA and Implementation Strategy. Comments were solicited from community members to provide feedback on any efforts and actions taken by Jackson Hospital since the 2022 CHNA and Implementation Plan were conducted. These comments informed the development of the 2025 CHNA and Implementation Plan and are presented in full in the appendix of this report. The health priorities identified in the 2022 CHNA are listed below with a selection of survey responses.

Behavioral Health

"Jackson has been proactive in providing classes and information to assist on site and providing references to supporting agencies."

Chronic Disease Management

"Jackson Hospital has chronic care management offered through the primary care offices. There are two quick care locations for walk-ins or those without a primary care provider."

Affordability of Healthcare

"Jackson Hospital has been instrumental in assisting patients with their healthcare needs through guidance/assistance from our Case Management/Social Worker."

"Community-wide free classes teaching healthy eating, exercise, and answering questions on health issues."

Impact of Actions to Address the 2022 Significant Health Needs

- Participation in the Florida Perinatal Quality Collaborative: Postpartum Access & Continuity of Care Initiative, Pregnancy-Related Optimal Management of Hypertension Initiative.
- Monthly cancer awareness campaigns including breast cancer awareness each Oct.
- Awarded Baby Friendly Designation.
- Diabetic Annual Dinner for community to promote healthy eating and diabetes education.
- Collaboration with new Colleges for Clinical Rotations.
- Physician Recruitment and service expansion: General Surgery, OB/GYN, Urology.
- Addition of the De Vinci Surgery Robot.
- Certified as an American Heart Association Training Site Center
- Hosted Community Baby Shower 2025 providing education/resources, gift bags, diapers.

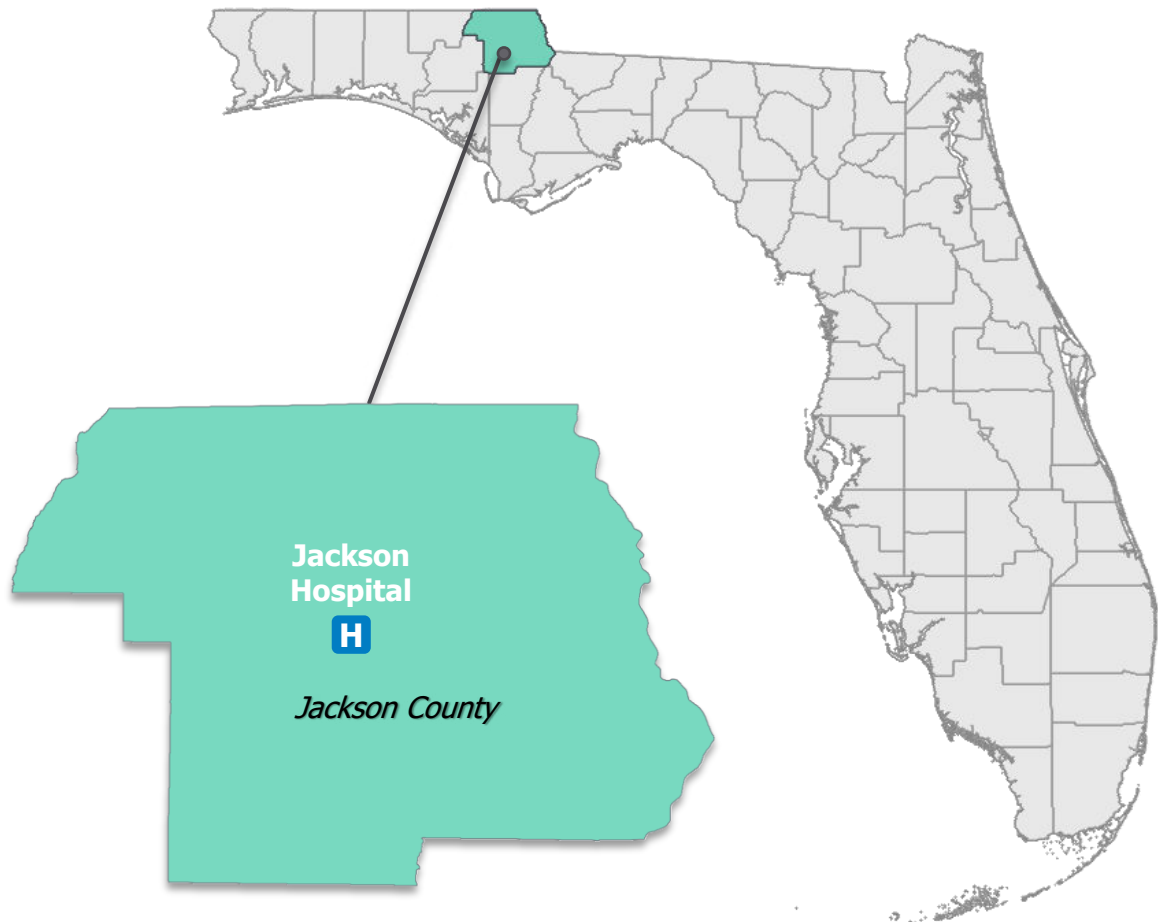
Community Served

For the purpose of this study, the service area is defined as Jackson County in Florida. The data presented in this report is based on this county-level service area and compared to state averages. Geographically, Jackson Hospital is centrally located in Jackson County and serves as the county's only hospital.

Service Area

Jackson County

Total Population: **48,622**



Source: County Health Rankings 2025 Report, ArcGIS

Service Area Demographics

	Jackson	Florida
Demographics		
Total Population	48,622	22,610,726
Age		
Below 18 Years of Age	19.1%	19.4%
Ages 19 to 64	59.8%	58.9%
65 and Older	21.1%	21.7%
Race & Ethnicity		
Non-Hispanic White	65.5%	51.9%
Non-Hispanic Black	25.2%	15.4%
American Indian or Alaska Native	0.9%	0.6%
Asian	0.7%	3.2%
Native Hawaiian or Other Pacific Islander	0.2%	0.1%
Hispanic	5.6%	27.4%
Gender		
Female	45.5%	50.9%
Male	54.5%	49.1%
Geography		
Rural	88.2%	8.5%
Urban*	11.8%	91.5%
Income		
Median Household Income	\$50,923	\$73,283

Notes: *Urban is defined by the US Census Bureau as census blocks that encompass at least 5,000 people or at least 2,000 housing units

Source: County Health Rankings 2025 Report

Methods of Identifying Health Needs

Collect & Analyze

Analyze existing data and collect new data



737 indicators collected from data sources



148 surveys completed by community members

Evaluate

Evaluate indicators based on the following factors:



Worse than benchmark



Identified by the community



Impact on health disparities



Feasibility of being addressed

Select

Select priority health needs for implementation plan



Prioritizing Significant Health Needs

The survey respondents participated in a structured communication technique called the "Wisdom of Crowds" method. This approach relies on the assumption that the collective wisdom of participants is superior to the opinion of any one individual, regardless of their professional credentials.

In the Hospital's process, each survey respondent had the opportunity to prioritize community health needs. The survey respondents then ranked the importance of addressing each health need on a scale of 1 (not at all) to 5 (extremely), including the opportunity to list additional needs that were not identified.

The ranked needs were divided into "Significant Needs" and "Other Identified Needs." The determination of the breakpoint — "Significant" as opposed to "Other" — was a qualitative interpretation where a reasonable breakpoint in rank order occurred. The Hospital analyzed the health issues that received the most responses and established a plan for addressing them.

Ranked Survey Health Priorities

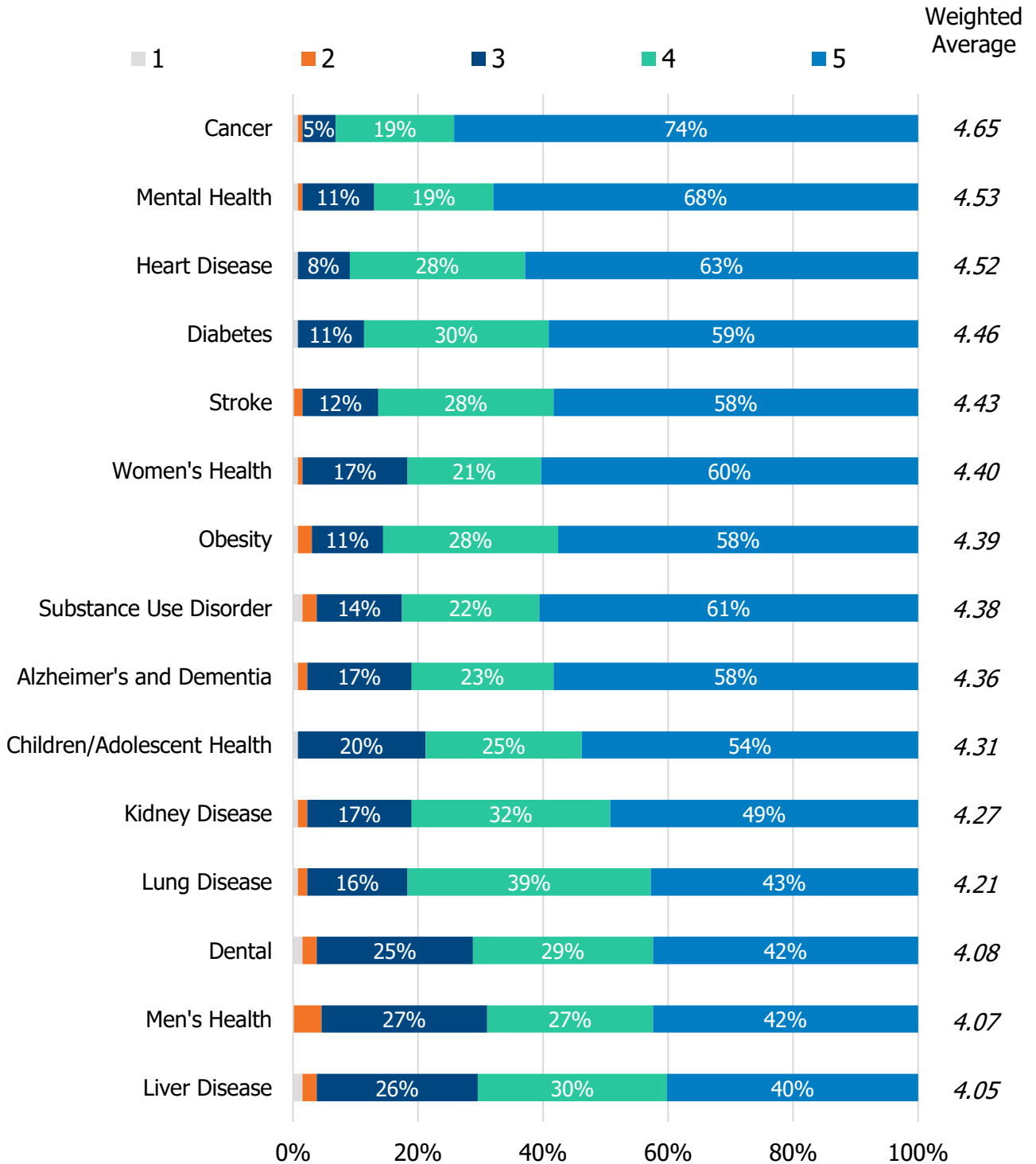
The health priority ranking process included an evaluation of health factors, community factors, and personal factors, given they each uniquely impact the overall health and health outcomes of a community:

- Health factors include chronic diseases, health conditions, and the physical health of the population.
- Community factors are the social drivers that influence community health and health equity.
- Behavioral factors are the individual actions that affect health outcomes.

In our community survey, each broad factor was broken out into more detailed components, and respondents rated the importance of addressing each component in the community on a scale from 1 to 5. The results of the health priority rankings are outlined below:

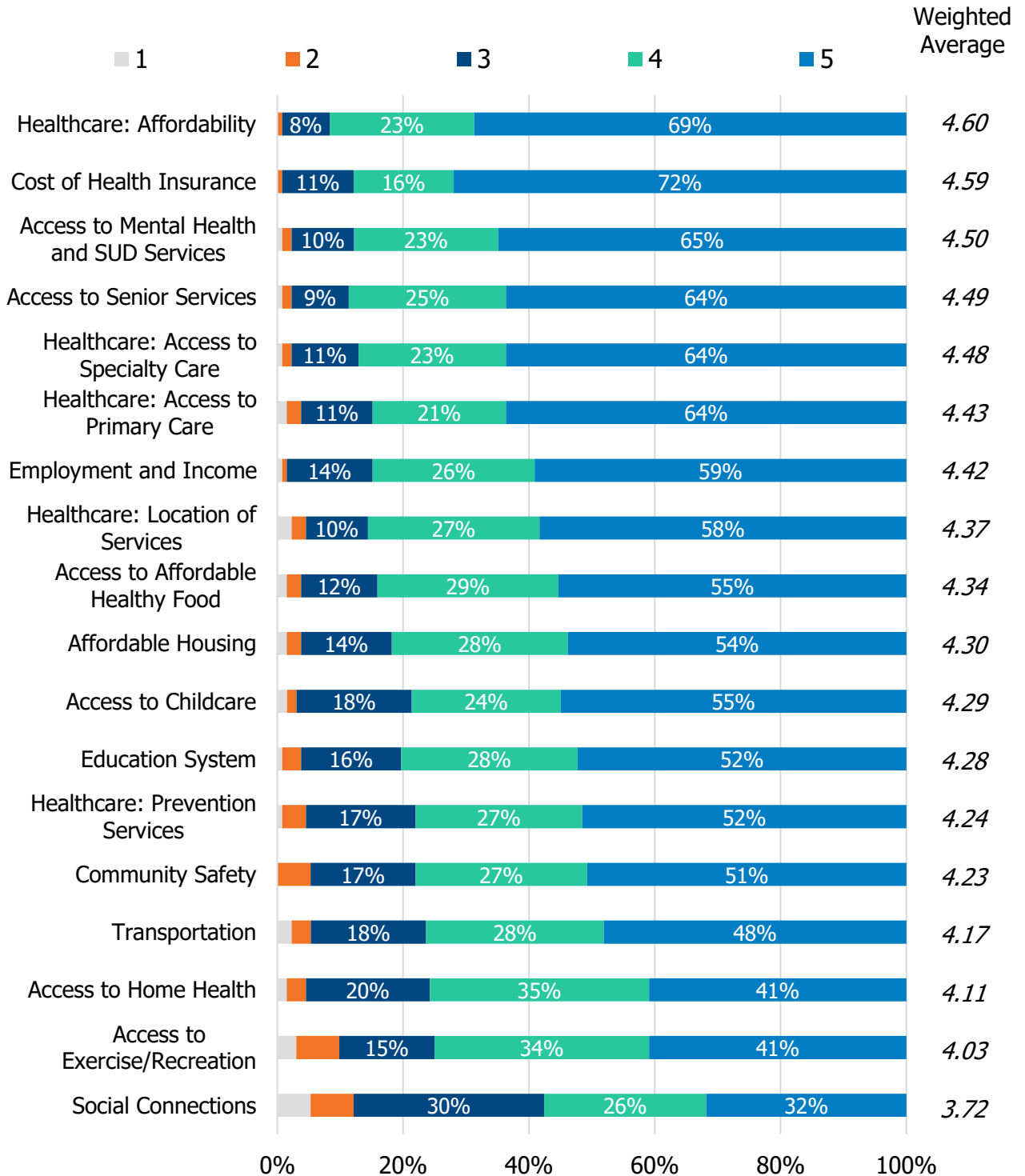
Health Factors

Survey Question: Please rate the importance of addressing each health factor on a scale of 1 (Not at all) to 5 (Extremely).



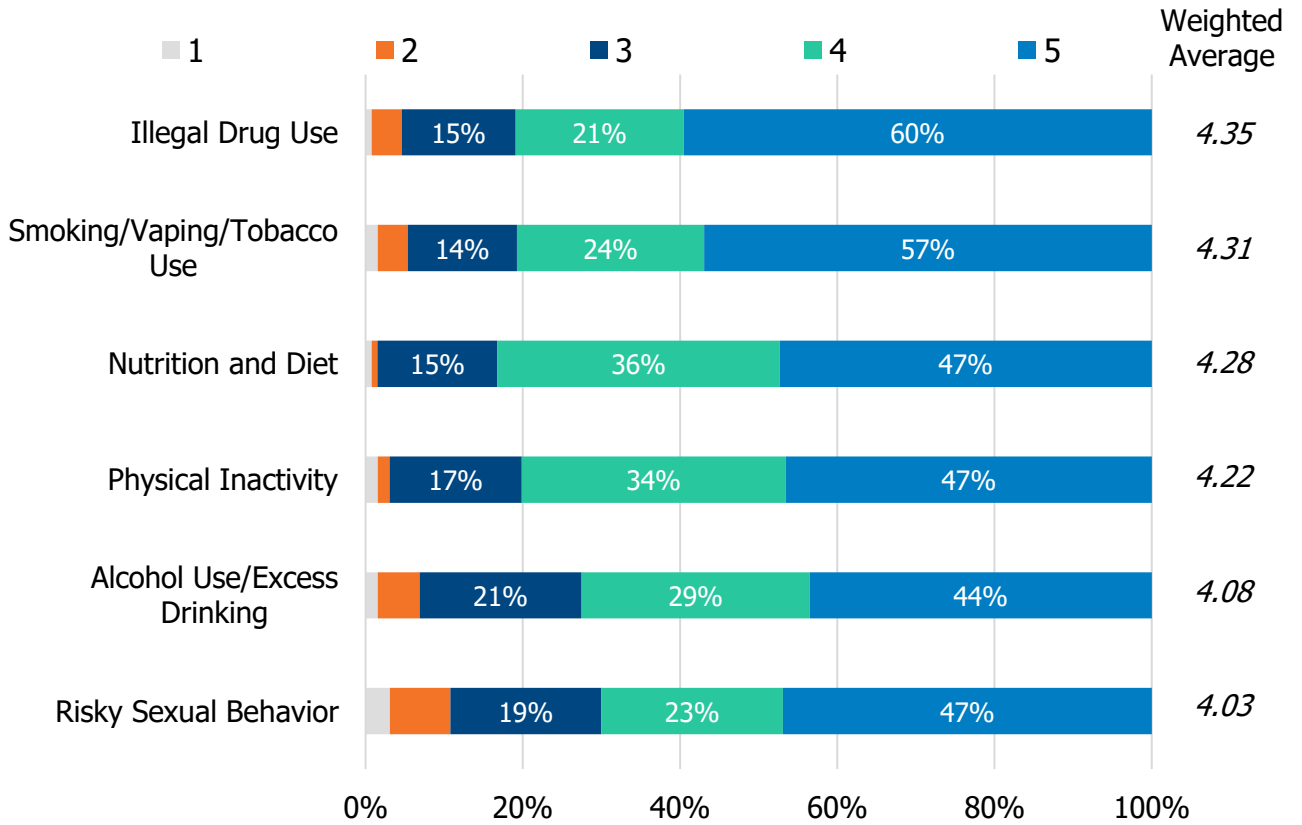
Community Factors

Survey Question: Please rate the importance of addressing each community factor on a scale of 1 (Not at all) to 5 (Extremely).



Behavioral Factors

Survey Question: Please rate the importance of addressing each behavioral factor in your community on a scale of 1 (Not at all) to 5 (Extremely).



Overall Health Priority Ranking from Community Survey

Health Issue	Weighted Average (out of 5)	Combined 4 (Important) and 5 (Extremely Important) Rating
Cancer	4.65	93%
Healthcare: Affordability	4.60	92%
Cost of Health Insurance	4.59	88%
Mental Health	4.53	87%
Heart Disease	4.52	91%
Access to Mental Health and SUD Services	4.50	88%
Access to Senior Services	4.49	89%
Healthcare: Access to Specialty Care	4.48	87%
Diabetes	4.46	89%
Stroke	4.43	86%
Healthcare: Access to Primary Care	4.43	85%
Employment and Income	4.42	85%
Women's Health	4.40	82%
Obesity	4.39	86%
Substance Use Disorder	4.38	83%
Healthcare: Location of Services	4.37	86%
Alzheimer's and Dementia	4.36	81%
Illegal Drug Use	4.35	81%
Access to Affordable Healthy Food	4.34	84%
Children/Adolescent Health	4.31	79%
Smoking/Vaping/Tobacco Use	4.31	81%
Affordable Housing	4.30	82%
Access to Childcare	4.29	79%
Education System	4.28	80%
Nutrition and Diet	4.28	83%
Kidney Disease	4.27	81%
Healthcare: Prevention Services	4.24	78%
Community Safety	4.23	78%
Physical Inactivity	4.22	80%
Lung Disease	4.21	82%
Transportation	4.17	76%
Access to Home Health	4.11	76%
Dental	4.08	71%
Alcohol Use/Excess Drinking	4.08	73%
Men's Health	4.07	69%
Liver Disease	4.05	70%
Access to Exercise/Recreation	4.03	75%
Risky Sexual Behavior	4.03	70%
Social Connections	3.72	58%

Survey Ranking Comparison from 2022 to 2025

The 2025 Jackson Hospital CHNA survey showed significant progress in community engagement, with nearly 50% more responses than in 2022. Between 2022 and 2025, the community shifted from behavioral health, social, and economic determinants (substance use, livable wage, housing) to healthcare access and chronic disease management (cancer, heart disease, insurance costs). Mental health remains a constant top priority, but with more emphasis on access to services. This reflects both perceived rising healthcare costs and growing concerns about long-term health conditions.

2025 Jackson Hospital Survey (n=148)	
Top 10 Health Priorities	Rank
Cancer	4.65
Healthcare: Affordability	4.60
Cost of Health Insurance	4.59
Mental Health	4.53
Heart Disease	4.52
Access to Mental Health and SUD Services	4.50
Access to Senior Services	4.49
Healthcare: Access to Specialty Care	4.48
Diabetes	4.46
Stroke	4.43

2022 Jackson Hospital Survey (n=100)	
Top 10 Health Priorities	Rank
Drug/Substance Abuse	4.48
Mental Health	4.46
Livable Wage	4.41
Diabetes	4.38
Cancer	4.32
Healthcare Services: Affordability	4.31
Education System	4.29
Heart Disease	4.25
Obesity	4.21
Affordable Housing	4.16

Community Health Characteristics

This section highlights health status indicators, outcomes, and relevant data on the health needs in Jackson County. The data at the county level is supplemented with benchmark comparisons to the state data. The most recently available data is used throughout this report with trended data included where available. A scorecard that compares the population health data of the service area county to that of Florida can be found in the report appendix.

Behavioral Health

Mental Health

Mental health was the #4 community-identified health priority with 87% of respondents rating it as important to be addressed in the community (important is categorized as a 4 or 5 rating on the community survey). The suicide mortality rate in Jackson County is 17.6 per 100,000 which is higher than the Florida average (CDC Final Deaths).

Poor mental health disproportionately affects people in priority populations like racial and ethnic minority groups, residents of rural areas, and LGBTQ+ communities due to a lack of access to providers and an inclusive behavioral health workforce (NAMI).

While it's difficult to measure the true rate of mental illness in the community, the following data points give insight into the health priority:

	Jackson	Florida
Suicide Mortality Rate per 100,000 (2022)	17.6	14.0
Poor Mental Health Days past 30 days (2021)	6.5	5.1
Population per 1 Mental Health Provider (2023)	631:1	459:1
Adults Who Have Ever Been Told They Had Depression (2022)	24.6%	17.8%

Source: CDC Final Deaths, County Health Rankings 2025 Report, FLHealthCharts

Drug, Substance, and Alcohol Use

Substance use disorder was identified as the #15 priority with 83% of survey respondents rating it as an important factor to address in the community. Additionally, 73% of respondents think excessive drinking and 81% think that smoking and tobacco use are major issues in the community.

Jackson County has a lower rate of drug overdose deaths compared to the state. The county's rate of excessive drinking is the same as Florida's (18%), but its smoking rate is significantly higher than the state's (27% and 11% respectively).

	Jackson	Florida
Drug-Related Overdose Deaths per 100,000 (2020-2022)	23.2	34.4
Excessive Drinking (2022)	18.0%	18.3%
Alcohol-Impaired Driving Deaths (2017-2021)	16.3%	21.1%
Adults Who are Current Smokers (2022)	26.8%	11.3%

Source: County Health Rankings 2025 Report, FLHealthCharts

Chronic Diseases

Cancer

Cancer was identified as the #1 community health issue with 93% of survey respondents rating it as important to address in the community. Cancer is the 2nd leading cause of death in Jackson County (CDC). Additionally, 29% of survey respondents said they would like to see additional access to cancer care in Jackson County.

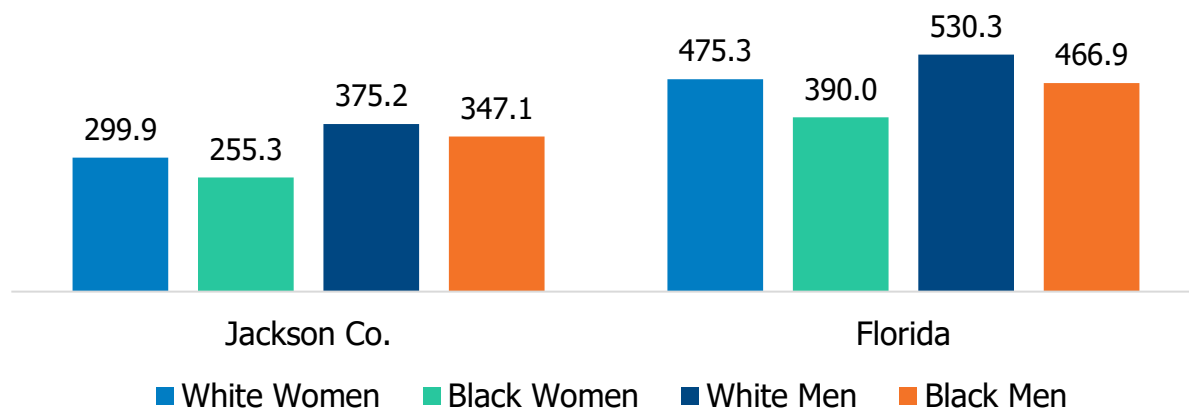
While Jackson County has a higher cancer mortality rate than Florida, the cancer incidence rate is lower compared to the state. A higher cancer mortality rate with a lower incidence rate suggests late diagnoses or limited access to quality care. This pattern often indicates barriers to early detection and treatment, particularly in underserved communities.

When evaluating health disparities across race and gender, men have higher incidence rates of cancer compared to women in Jackson County, with White Men having the highest incidence rates for cancer in the county and the state (National Cancer Institute). This disparity can be due to a multitude of factors, including behavioral factors like tobacco use and diet, as well as healthcare utilization like preventative care and screening (CDC).

	Jackson	Florida
Cancer Incidence Rate Age-Adjusted per 100,000 (2017-2021)	318.6	464.0
Cancer Mortality Rate per 100,000 (2022)	188.4	138.3

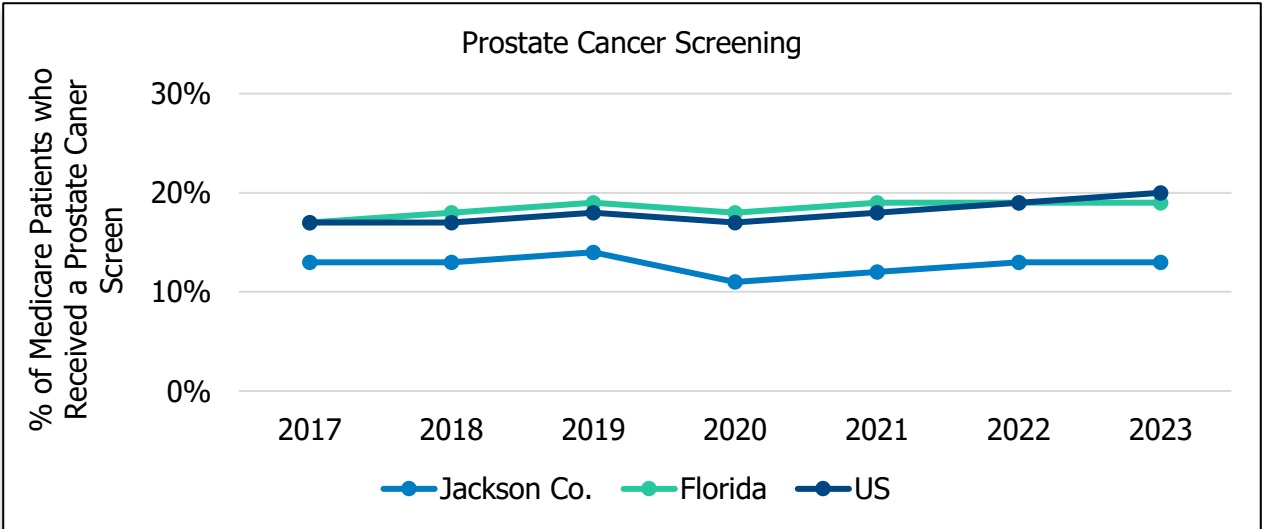
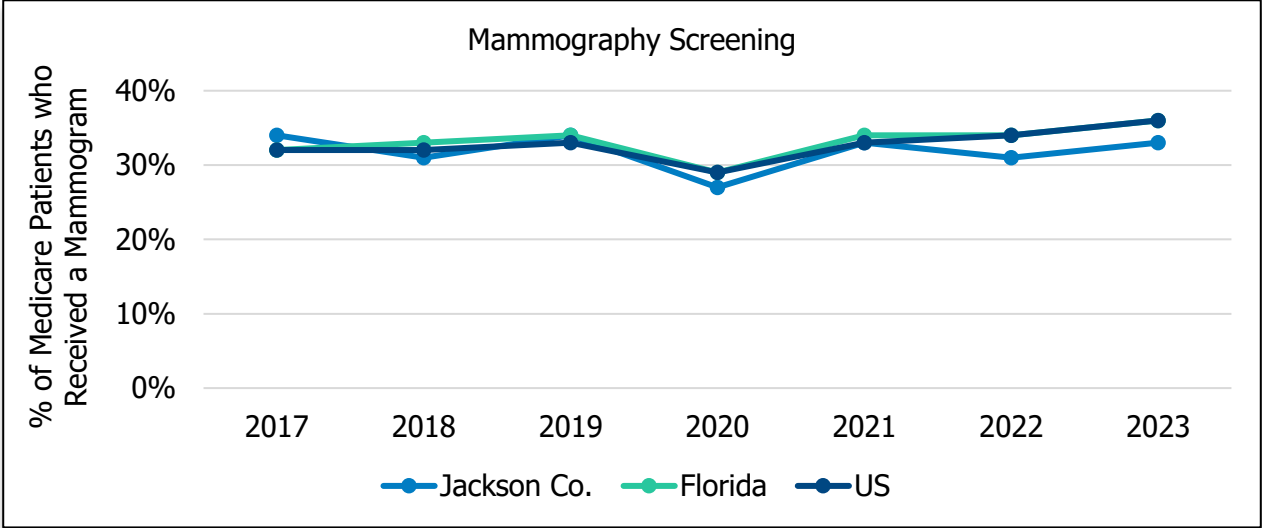
Source: CDC, National Cancer Institute

Cancer Incidence Rates by Race and Gender (*per 100,000*)



Source: data.hrsa.gov

The rate of Medicare enrollees (women age 65+) who have received a mammogram in the past year is lower in Jackson County compared to the state (33% compared to 36% respectively). These rates have increased in recent years after a dip downward in 2020 during the COVID-19 pandemic. Among Medicare enrollees (men age 65+), Jackson County has lower rates of prostate cancer screening compared to both the state and the US averages (13% compared to 19% respectively).

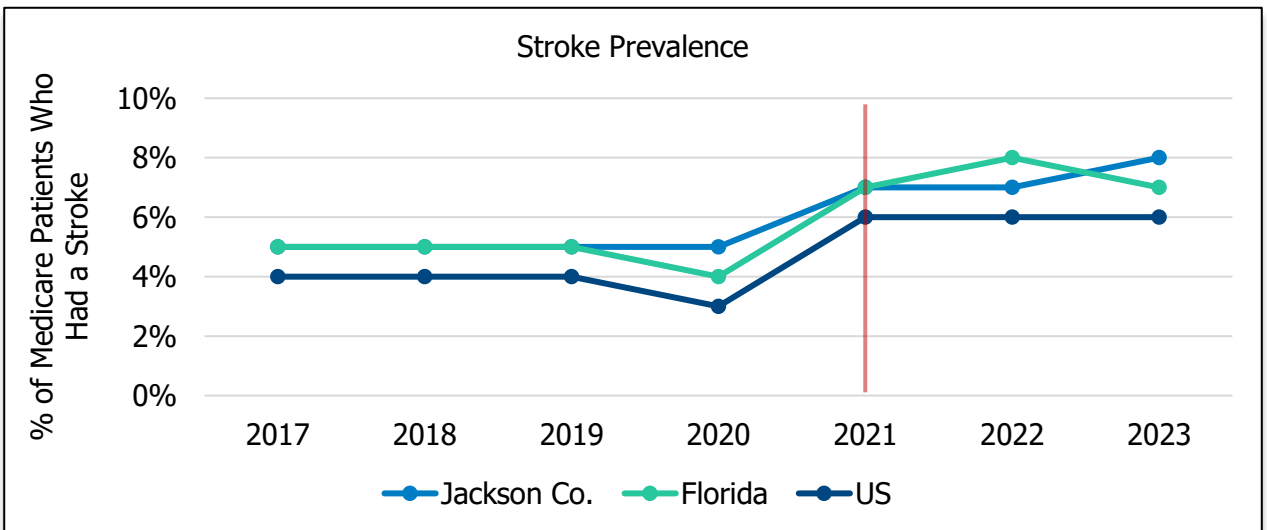
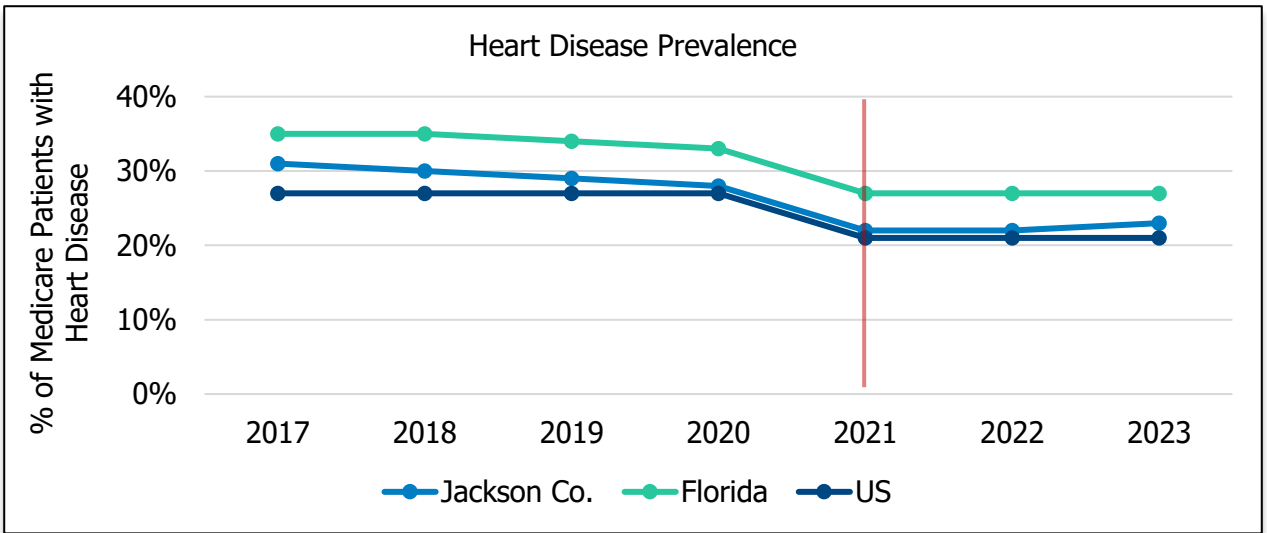


Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

Cardiovascular Health

Heart disease is the leading cause of death in Jackson County, and the county has a mortality rate higher than Florida (206.6 compared to 144.6 per 100,000, respectively) (CDC). Alternatively, the county has a lower cerebrovascular disease (stroke) mortality rate compared to the state (42.0 compared to 45.0 per 100,000, respectively) (CDC).

In the Medicare population, Jackson County has a lower prevalence of heart disease and a higher prevalence of stroke compared to Florida averages.



*Note: There was a change in the algorithm of reported data in 2021 noted by a red bar
Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population*

More people in Jackson County have been told they had a stroke compared to Florida, whereas fewer adults have been told they had a heart attack in Jackson County compared to Florida.

	Jackson	Florida
Adults Who Have Ever Been Told They Had a Stroke (2022)	5.8%	3.6%
Adults Who Have Ever Been Told They Had a Heart Attack (2022)	3.3%	4.7%

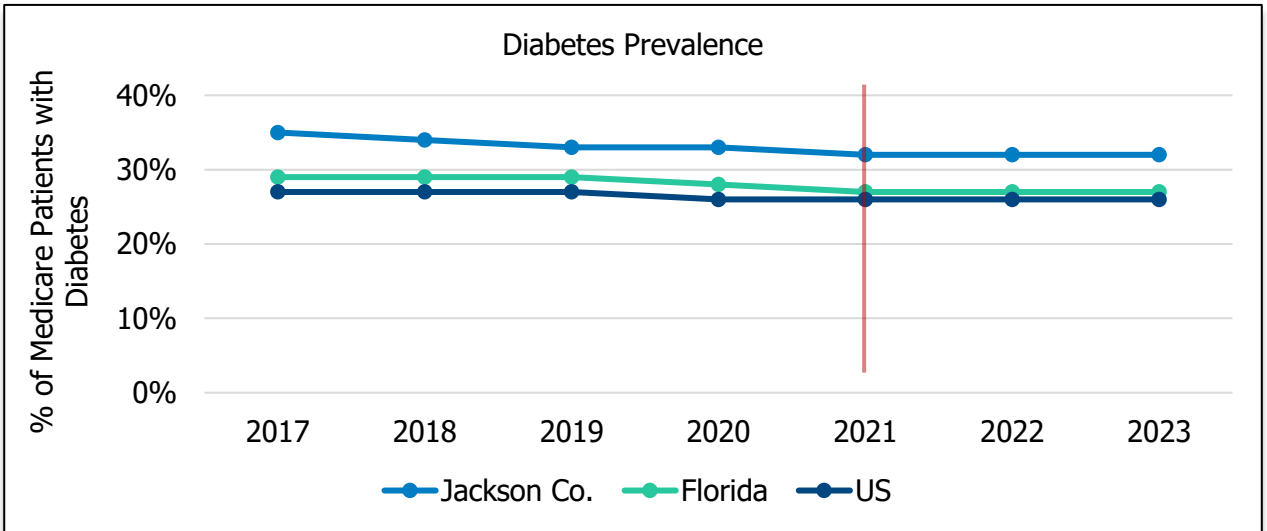
Source: FLHealthCharts

Diabetes

The prevalence of diabetes in Jackson County is higher than in Florida, and the county sees a diabetes mortality rate higher than the state (CDC Final Deaths). When evaluating the Medicare population, Jackson County has a higher prevalence of diabetes compared to the state, though rates have remained stable over the past decade.

	Jackson	Florida
Diabetes Mortality Rate per 100,000 (2022)	35.2	22.2
Diabetes Prevalence (2022)	15.9%	12.2%
Adults Who Have Been Told They Had Pre-Diabetes (2019)	8.9%	9.1%

Source: CDC, FLHealthCharts



Note: There was a change in the algorithm of reported data in 2021 noted by a red bar
 Sources: Centers for Medicare & Medicaid Services; Mapping Medicare Disparities by Population

Obesity and Unhealthy Eating

In Jackson County, adults have higher rates of obesity than in Florida on average. Additionally, the county sees higher rates of physical inactivity than the state, as well as lower access to exercise opportunities (proximity to a park or recreation facility). This combination contributes to an increased risk of chronic diseases and further exacerbates health disparities, especially in low-income and rural communities. Additionally, obesity, physical inactivity, and diet are well-established risk factors for type 2 diabetes development (American Diabetes Association).

	Jackson	Florida
Adults Who are Overweight (2022)	34.8%	34.5%
Adults Who are Obese (2022)	38.4%	31.6%
Limited Access to Healthy Foods (2019)	5.4%	7.6%
Physical Inactivity (2022)	30.4%	23.5%
Access to Exercise Opportunities (2023)	25.3%	87.8%

Source: County Health Rankings 2025 Report, FLHealthCharts

Healthcare Access

Access & Affordability

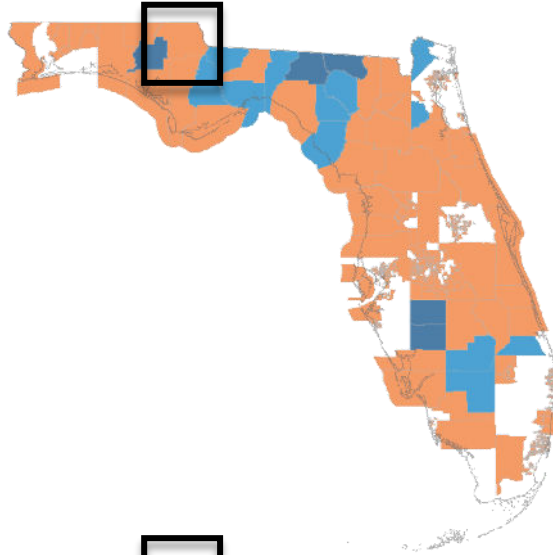
Access to affordable and quality healthcare services is a key driver of improved health outcomes, economic stability, and health equity. In the community survey, 28% of respondents said they would like to see additional primary care availability in the county. Jackson County has a lower household income than the Florida average and also has a lower uninsured population than the state. Additionally, Jackson County has less access to primary care physicians, mental health providers, and dentists, as shown in the following provider ratios and health professional shortage areas (HPSA).

	Jackson	Florida
Uninsured Population (2021)	13.7%	16.2%
Doctor Visit for Routine Checkup in the Past Year (2024)	78.1%	78.9%
Population per 1 Primary Care Physician (2021)	3,180:1	1,370:1
Population per 1 Primary Care Provider (APP) (2021)	600:1	590:1
Population per 1 Dentist (2022)	3,444:1	1,563:1
Adults Who Could Not See a Doctor in the Past Year Due to Cost (2019)	16.9%	16.0%
Adults Who Have a Personal Doctor	76.2%	72.0%

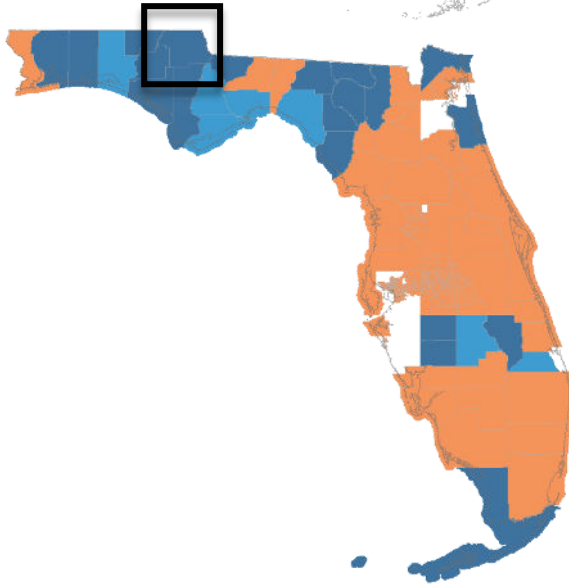
Source: County Health Rankings 2025 Report, PLACES: Local Data for Better Health, FLHealthCharts




Florida Health Professional Shortage Areas (HPSA)

Primary Care



Mental Health

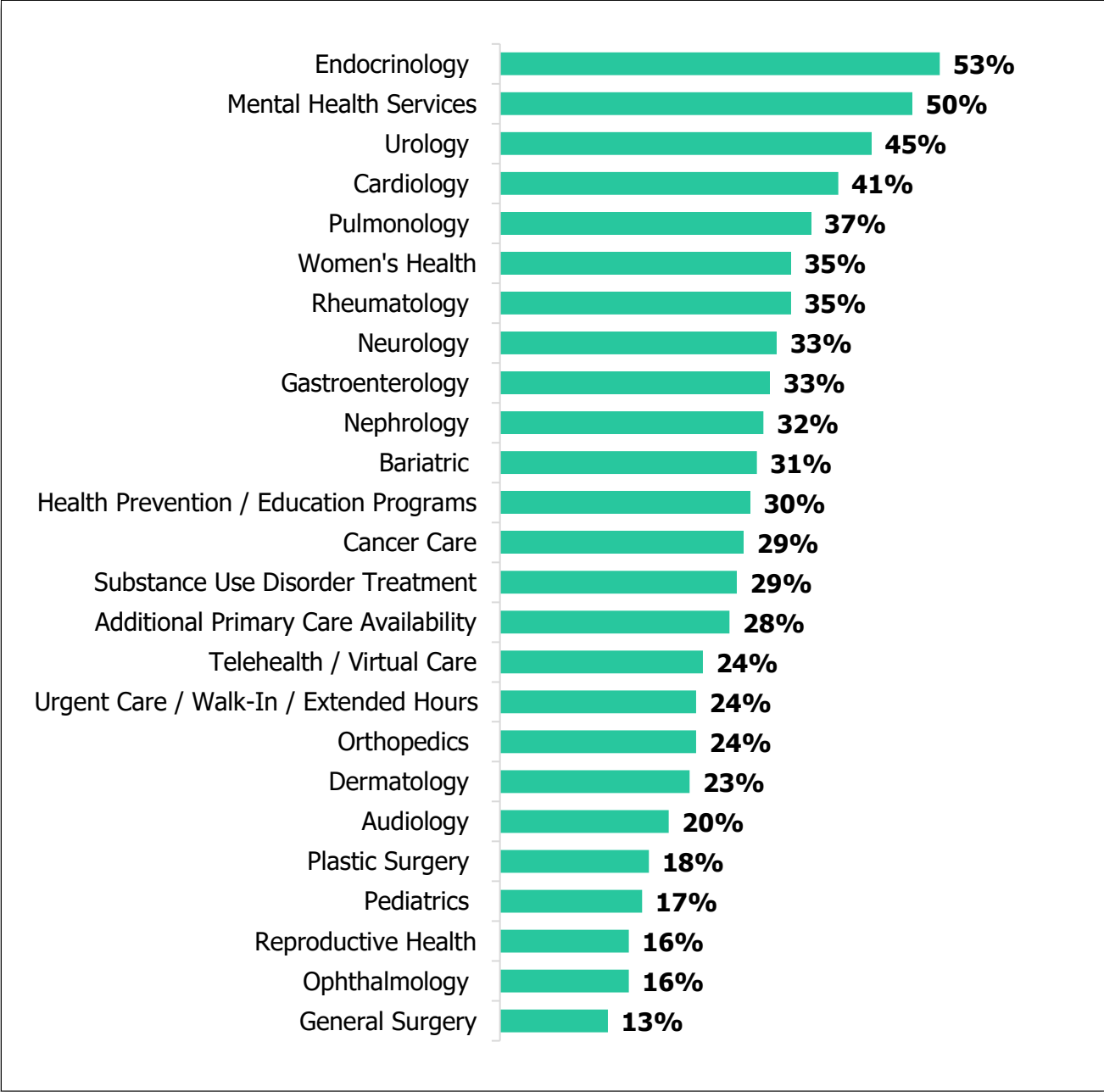


-  HPSA Population: *a shortage of services for a specific population subset within an established geographic area*
-  Geographic HPSA: *a shortage of services for the entire population within an established geographic area*
-  High Needs Geographic HPSA: *a Geographic HPSA in an area with unusually high needs based on criteria like income and death rates*

Source: data.hrsa.gov

In the community survey, respondents were asked to identify what healthcare services and programs they would like to see available in their community. Endocrinology was the top identified service need, with 53% of respondents saying they would like to see it available in their community, followed by mental health services (50%) and urology (45%).

Survey Question: What additional services/offerings would you like to see available locally? (select all that apply)



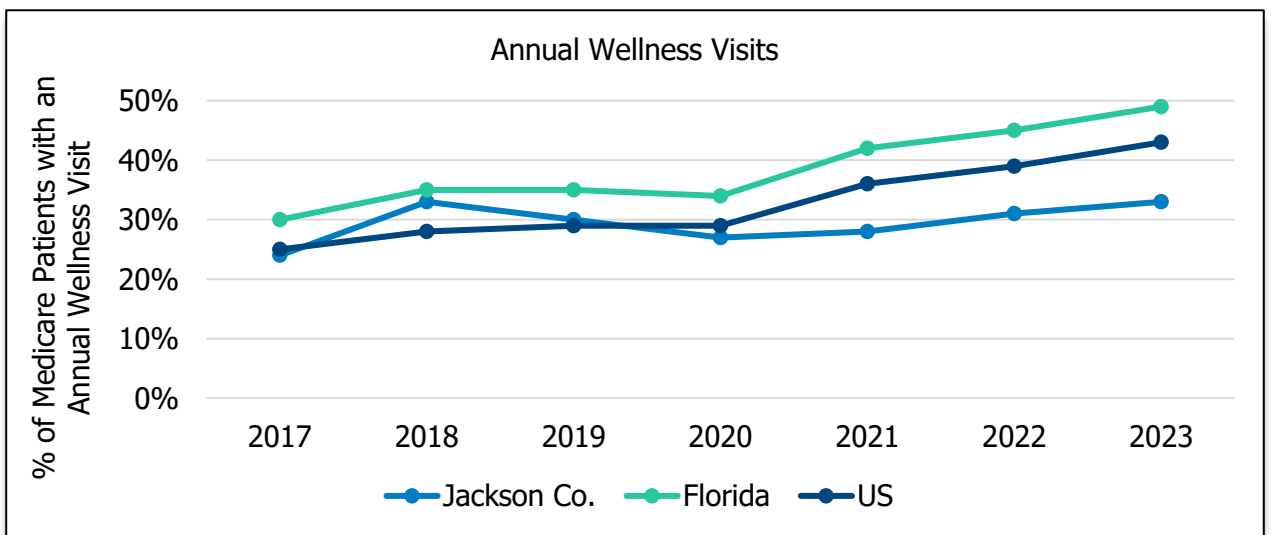
Prevention Services

Prevention services, including routine check-ups, health screenings, and education, can help prevent or detect diseases early when they are easier to treat. Preventive care reduces the burden on healthcare systems by preventing unnecessary hospital stays and costly care. In the community survey, 30% of respondents said they would like to see additional health prevention and education programs available in the community.

Jackson County has a higher annual mammography screening rate but a lower flu vaccine adherence rate than Florida. The county also sees higher rates of preventable hospital stays (hospital stays for ambulatory-care sensitive conditions). This rate represents the effectiveness of preventive care in a community, reflecting how well primary care services manage chronic conditions and prevent avoidable hospital admissions. Additionally, the rate of annual wellness visits in the Medicare population is lower in Jackson County than in Florida, with rates increasing in recent years.

	Jackson	Florida
Preventable Hospital Stays per 100,000 (2022)	4,182	3,074
Mammography Screening Women 40+ (2022)	67.9%	55.5%
Flu Vaccination (2022)	32.0%	44.0%

Source: County Health Rankings 2025 Report, FLHealthCharts



Source: Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population

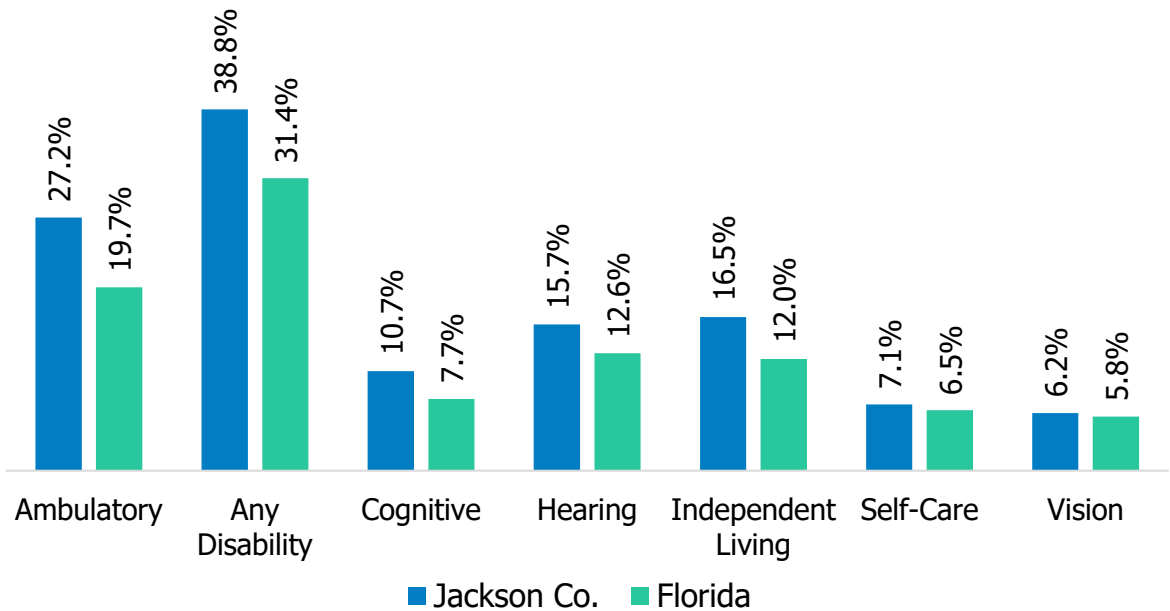
Access to Senior Services

Access to senior services was identified as the #7 priority with 89% of survey respondents rating it as an important factor to address in the community. Older adults were identified as a top priority population, further reinforcing the importance of adequate senior services. In Jackson County, over 12% of residents aged 65+ live below the poverty line, and over 32% of residents aged 65+ live alone (compared to 24.7% in Florida).

	Jackson	Florida
Individuals Below 100% of Poverty Line, Aged 65+ (2023)	12.6%	11.4%
Individuals Living Alone, Aged 65+ (2023)	32.3%	24.7%

Source: FLHealthCharts

Disability Status, Percent of Population Aged 65+ (2023)



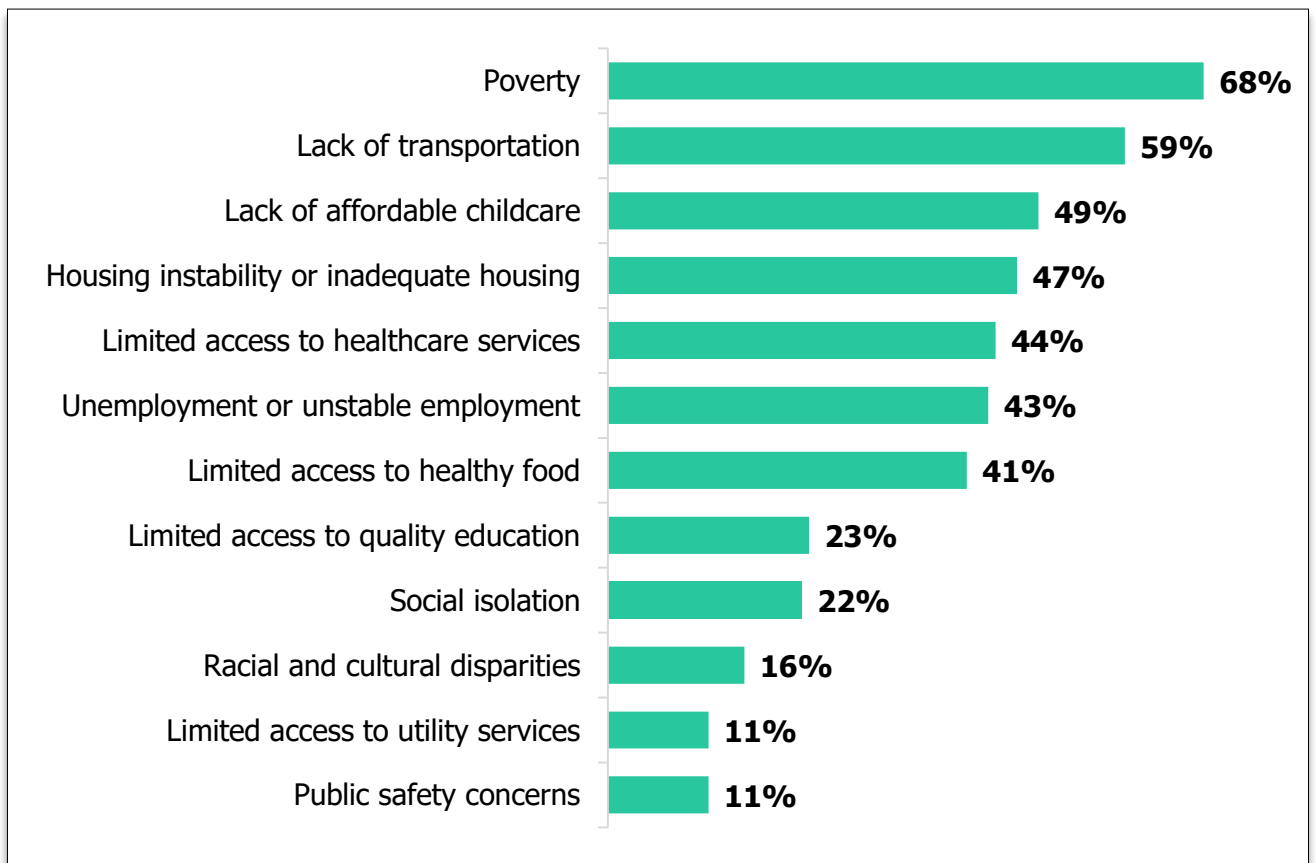
Source: FLHealthCharts

Social Drivers of Health

Social drivers of health, such as economic stability, education, and access to healthcare, significantly influence health outcomes by shaping individuals' living conditions, behaviors, and access to resources necessary for maintaining good health. These factors can lead to health disparities, with marginalized groups often experiencing worse health outcomes due to these determinants.

Survey respondents were asked to identify the key social conditions that negatively impact the community. The top social condition identified was poverty, with 68% of survey respondents reporting it as negatively impacting the community's health, followed by lack of transportation and affordable childcare.

Survey Question: Please select the key social determinants that negatively impact the health of you or your community (select all that apply):



Housing

Access to affordable and safe housing influences a wide range of factors that contribute to physical and mental well-being. There is evidence that a lack of access to affordable and stable housing can lead to negative health outcomes such as mental illnesses and stress, exposure to environmental hazards, and financial instability (Center for Housing Policy). Less Jackson County residents experience severe housing problems (overcrowding, high housing costs, lack of plumbing) than the state average. Additionally, 11% of Jackson County residents spend 50% or more of their household income on housing.

	Jackson	Florida
Severe Housing Problems (2016-2020)	12.3%	19.0%
Severe Housing Cost Burden (2018-2022)	11.4%	17.6%
Broadband Access (2018-2022)	80.5%	90.2%
Housing Insecurity (2024)	19.9%	N/A

Source: County Health Rankings 2025 Report, PLACES: Local Data for Better Health

Transportation

Access to transportation plays a critical role in health outcomes, particularly in rural and underserved communities. Reliable transportation enables individuals to attend medical appointments, access preventive care, obtain medications, and reach grocery stores with healthy food options. Transportation barriers disproportionately affect vulnerable populations, including older adults, low-income individuals, and those living in remote areas, ultimately contributing to health disparities and poorer overall community health. Over 13% of Jackson County households lack reliable transportation.

	Jackson	Florida
Commute Over 30 Minutes - Driving Alone (2023)	46.6%	42.9%
Lack of Reliable Transportation (2024)	13.4%	7.9%

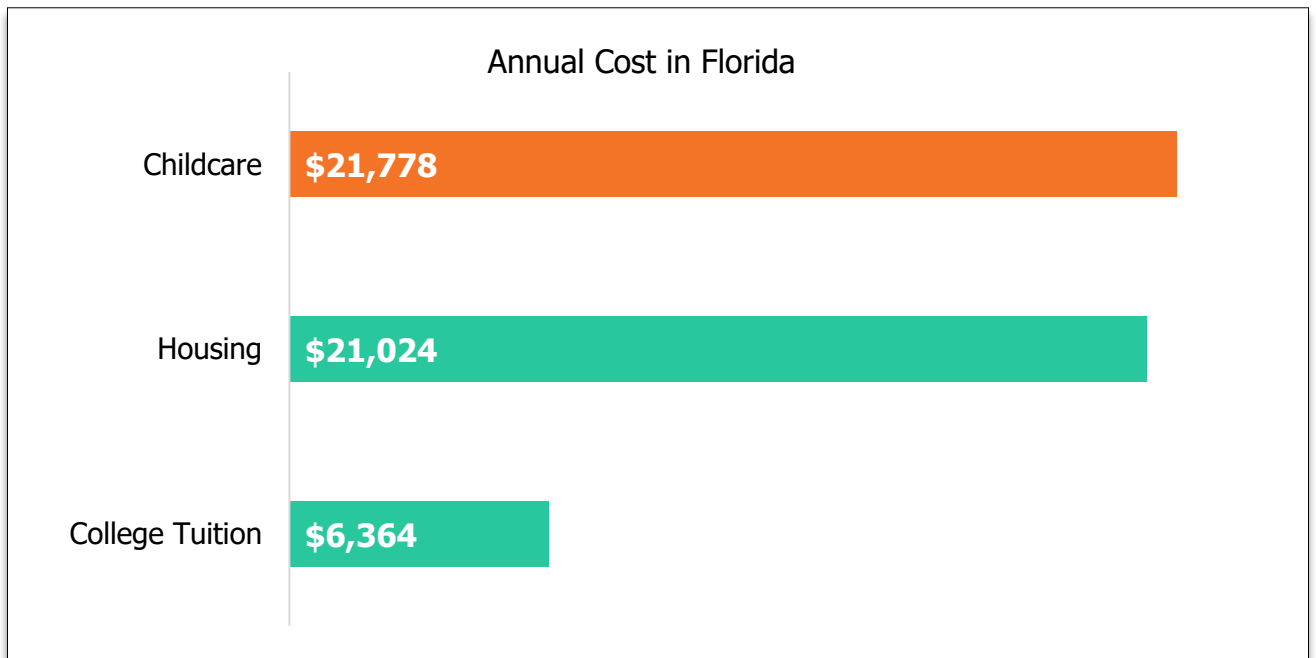
Source: County Health Rankings 2025 Report, PLACES: Local Data for Better Health, FLHealthCharts

Access to Childcare

The average yearly cost of infant care in Florida is \$12,639. The U.S. Department of Health and Human Services defines affordable childcare as being no more than 7% of a family's income (Economic Policy Institute). In Jackson County, 34% of household income is required for childcare expenses, and there are 5 childcare centers for every 1,000 children under age 5 in the county, compared to roughly 6 in the state.

	Jackson	Florida
Children in Single-Parent Households (2018-2022)	35.3%	27.4%
Child Care Cost Burden - % of HHI used for childcare (2023)	34.2%	25.9%
Child Care Centers per 1,000 Under Age 5 (2010-2022)	4.9	5.7

Source: County Health Rankings 2025 Report



Note: Annual childcare price for 2 children (an infant and 4-year-old) in a center
 Source: Child Care Aware (2023)

Income, Employment, and Education

Income, employment, and education play a role in the community’s ability to afford healthcare and impact health outcomes through health literacy and access to health insurance. Educational attainment and employment impact mental health through poverty and unstable work environments, health behaviors like smoking, diet, and exercise, and access to health insurance (HealthAffairs). Additionally, these factors impact people’s ability to afford services to live healthy and happy lives like safe housing, transportation, childcare, and healthy food.

	Jackson	Florida
Median Household Income	\$50,923	\$73,283
High School Completion (2018-2022)	83.2%	89.6%
Some College – Includes Those Who Had and Had Not Attained Degrees (2023)	40.4%	65.0%
Unemployment (2023)	3.4%	2.9%
Children in Poverty (2022)	26.7%	16.0%

Source: County Health Rankings 2025 Report

Evaluation Process

<p>Worse than Benchmark Measure</p>  <p>Health needs were deemed “worse than the benchmark” if the supported county data was worse than the state and/or U.S. averages</p>	<p>Identified by the Community</p>  <p>Health needs expressed in the online survey and/or mentioned frequently by community members</p>	<p>Feasibility of Being Addressed</p>  <p>Growing health needs where interventions are feasible, and the Hospital could make an impact</p>	<p>Impact on Health Equity</p>  <p>Health needs that disproportionately affect vulnerable populations and can impact health equity if addressed</p>
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Health Need Evaluation	Worse than Benchmark	Identified by the Community	Feasibility	Impact on Health Equity
Cancer	✓	✓	✓	✓
Healthcare: Affordability	✓	✓		✓
Cost of Health Insurance	✓	✓		✓
Mental Health	✓	✓	✓	✓
Heart Disease	✓	✓	✓	✓
Access to Mental Health and SUD Services	✓	✓	✓	✓
Access to Senior Services		✓	✓	✓
Healthcare: Access to Specialty Care	✓	✓	✓	✓
Diabetes	✓	✓	✓	✓
Stroke		✓	✓	✓

Implementation Plan

Health Priority Selection Process

To determine the top health priorities for the community, a structured evaluation and selection process was conducted, where Hospital leaders reviewed and discussed both community survey findings and key secondary data indicators, comparing local health outcomes to state benchmarks to identify areas of concern. Each potential priority was assessed based on several criteria: the level of community concern (as reflected in survey responses), whether the issue showed worse-than-average performance compared to the state, the hospital's capacity and resources to meaningfully address the need, and the potential impact on advancing health equity and improving access to care. This collaborative, data-informed process ensured that the selected priorities were both grounded in evidence and aligned with the hospital's mission and capabilities.

The top 3 health priorities identified by Jackson Hospital with the development of implementation strategies are:



Access to
Specialty Care



Chronic Disease
Management



Mental
Health

Health Needs Not Addressed

Jackson Hospital acknowledges the significance of all health priorities identified through the community survey and overall assessment. While many of these needs are currently being addressed through existing programs, resources, and strategies led by other community organizations and the Hospital, Jackson Hospital has chosen to focus its future efforts on three top-priority areas where it can make the most meaningful impact. By concentrating attention and resources on these key issues, the Hospital aims to strengthen outcomes through targeted programming and strategic collaboration with local partners.

Access to Specialty Care

Jackson Hospital Services and Programs Committed to Respond to This Need

- Oncology & Infusion: Hematology/Medical Oncology clinic with infusion services (chemo and non-oncology infusions).
- Cardiovascular & Vascular: Non-invasive cardiology/vascular diagnostics; stress testing, echocardiogram, EEG, and more.
- ENT/Sinus & Allergy specialty clinic.
- Women's Health/OB-GYN, prenatal through postpartum; screening services.
- Pediatrics clinic.
- Primary Care/Quick Care network (Panhandle Family Care; Quick Care/Alford) supporting chronic disease management and preventive care.
- Surgical services with advanced minimally invasive capability (da Vinci 5 surgical system).
- Wound Healing & Hyperbaric Medicine center.
- Emergency Department with FastTrack.

Future Goals and Objectives to Address this Significant Health Need

Goal: Expand access to specialty care services locally to reduce the need for community members to travel for care.

Objectives:

- Increase the availability of specialty providers through continuous recruitment.
- Explore expanding the physical capacity for specialty services that are outgrowing their current space.
- Enhance partnerships with regional specialty groups (e.g., cardiology, urology) to provide consistent local clinic days.
- Continue strengthening women's health and pediatric care to retain patients who might otherwise travel for care.

Metrics to Track the Impact of Actions and Access to Resources

- Increase local availability of specialty services:
 - Number of providers recruited
 - Time to 3rd-next-available appointment by specialty
 - ED transfers out by specialty

Other Local Organizations Available to Respond to This Need

- Chipola Surgical and Medical Specialties

Chronic Disease Management

Jackson Hospital Services and Programs Committed to Respond to This Need

- Chronic Care Management (CCM) team supports primary-care practices to track and address patients' ongoing chronic care needs.
- Diabetes education offered by an in-house nurse educator and dietitian.
- Community education events (Senior Center, churches) and health fair participation.
- Wound Healing & Hyperbaric Medicine (for complex diabetic/vascular wounds).
- Cancer services including a full-field digital mammography system.
- Patient portals offer access to clinical records, lab results, and communication with providers.

Future Goals and Objectives to Address this Significant Health Need

Goal: Strengthen chronic disease management and prevention to improve health outcomes and reduce hospital readmissions.

Objectives:

- Continue to build out the existing CCM program by focusing on improving measurable patient outcomes.
- Improve coordination between CCM and internal case management teams to close care gaps.
- Expand education and support for patients with diabetes, hypertension, and heart disease, including nutrition counseling and disease-specific education.
- Increase cancer prevention and screening outreach in the community, especially for prostate, breast, and colorectal cancers.
- Collaborate with the county health department and community organizations to provide preventive screenings, smoking cessation support, and wellness initiatives.

Metrics to Track the Impact of Actions and Access to Resources

- Reduce chronic disease burden in the community:
 - Cancer screening utilization (breast, prostate, lung)
 - Diabetes control (A1c, diabetes-related readmission rate)
 - Participation in education events

Other Local Organizations Available to Respond to This Need

- Florida DOH – Jackson County
- Jackson County School District
- Jackson County Senior Citizens

Mental Health

Jackson Hospital Services and Programs Committed to Respond to This Need

- Depression screening (PHQ-9) conducted at routine primary care visits.
- Primary care providers offer basic mental health services and medication management.
- Behavioral health screening & assessments conducted in the ED with telepsychiatry available for patients needing a higher level of care.
- Jackson Hospital has a formal partnership with Baptist Health in Pensacola to provide access to pediatric behavioral health services.
- Staff are available to connect patients with the United Way 2-1-1 referral and information helpline.

Future Goals and Objectives to Address this Significant Health Need

Goal: Improve access to mental health services and strengthen community partnerships to address behavioral health needs.

Objectives:

- Promote access to mental health support in primary care settings.
- Strengthen partnerships with external organizations to improve access to mental health services, including education, stigma reduction, and inpatient beds.
- Work to reduce behavioral health hold times in the ED by exploring transfer agreements with regional mental health facilities.
- Explore substance use treatment and recovery through partnerships and ED-based initiatives (e.g., Project Save Lives, naloxone distribution, peer recovery programs).

Metrics to Track the Impact of Actions and Access to Resources

- Reduce community mental health burden:
 - Number of positive depression screenings with primary care follow-up
 - Average ED psychiatric hold time
 - Opioid overdose mortality

Other Local Organizations Available to Respond to This Need

- Baptists Health Care – Pensacola
- Blue Springs Outpatient Center
- Florida DOH – Jackson County
- Hope Springs Counseling Group
- Jackson County School District
- Life Management Center of NW Florida

Appendix

Community Data Tables

Leading Cause of Death

The Leading Causes of Death are determined by the official Centers for Disease Control and Prevention (CDC) final death total. The Leading Causes of Death are listed in the tables below in U.S. rank order. Jackson County's mortality rates are compared to the Florida state average, and whether the death rate was higher (red), or lower (green) compared to the state average.

	Jackson	Florida	U.S.
Heart Disease	206.6	144.6	168.9
Cancer	188.4	138.3	145.4
Accidents	79.4	66.8	59.7
Alzheimer's	65.4	18.6	30.8
Chronic Lower Respiratory Disease	47.7	32.6	35.9
Cerebrovascular Diseases (Stroke)	42.0	45.0	39.8
Diabetes	35.2	22.2	23.9
Kidney	19.5	10.2	13.4
Suicide	17.6	14.0	13.9
Liver	17.5	12.4	13.1
Pneumonia	15.2	7.9	10.7
Blood Poisoning (Septicemia)	14.3	8.2	10.0
Homicide	10.0	7.3	7.6

Source: NIH: HDPulse, CDC (2019-2023)

County Health Rankings

	Jackson	Florida	US Overall
Length of Life			
Premature Death*	● 13,579	8,553	8,400
Life Expectancy*	● 72	78	77
Quality of Life			
Poor or Fair Health	● 24%	16%	17%
Poor Physical Health Days	● 5.0	3.7	3.9
Poor Mental Health Days	● 6.5	5.1	5.1
Low Birthweight*	● 10%	9%	8%
Health Behaviors			
Adult Smoking	● 23%	12%	13%
Adult Obesity	● 43%	32%	34%
Limited Access to Healthy Foods	● 5%	8%	6%
Physical Inactivity	● 30%	24%	23%
Access to Exercise Opportunities	● 25%	88%	84%
Excessive Drinking	● 18%	18%	19%
Alcohol-Impaired Driving Deaths	● 16%	21%	26%
Drug Overdose Deaths*	● 23	34	31
Sexually Transmitted Infections*	● 608	480	495
Teen Births (<i>per 1,000 females ages 15-19</i>)	● 30	15	16
Clinical Care			
Uninsured	● 14%	16%	10%
Primary Care Physicians (MDs & DOs)	3180:1	1370:1	1,330:1
Other Primary Care Providers (APPs)	600:1	590:1	710:1
Dentists	3444:1	1563:1	1,360:1
Mental Health Providers	631:1	459:1	300:1
Preventable Hospital Stays*	● 4,182	3,074	2,666
Flu Vaccinations	● 32%	44%	48%
Social & Economic Factors			
High School Completion	● 83%	90%	89%
Some College	● 40%	65%	68%
Unemployment	● 3%	3%	3.6%
Children in Poverty	● 27%	16%	16%
Children in Single-Parent Households	● 35%	27%	25%
Injury Deaths*	● 118.7	94.1	84
Child Care Cost Burden (<i>% of HHI used for childcare</i>)	● 34%	26%	28%
Child Care Centers (<i>per 1,000 under age 5</i>)	● 5	6	7
Physical Environment			
Severe Housing Problems	● 12%	19%	17%
Long Commute - Driving Alone (<i>> 30 min. commute</i>)	● 47%	43%	37%
Severe Housing Cost Burden (<i>50% or more of HHI</i>)	● 11%	18%	15%
Broadband Access	● 80%	90%	90%

*Per 100,000 Population

Key (Legend)

● Better than FL ● Same as FL ● Worse than FL

Source: County Health Rankings 2025 Report

Data and Inputs

Data Limitations

Rural communities and those with low population sizes face several data limitations including but not limited to:

- Small sample sizes: small populations reduce the statistical power and do not capture the full diversity of the community
- Data privacy: to ensure the confidentiality of individuals in small communities, data may be aggregated or withheld
- Data gaps: some events may happen less frequently in small populations leading to limited data and gaps in time
- Resource constraints: rural areas often have less funding for data collection and access to data collection technologies
- Underrepresentation in national surveys: many national level data sources focus on urban areas due to the higher population making access to data in small communities more limited

This assessment is meant to capture the health status of the service area at a specific point in time, combining both qualitative data from the local community through survey collection and quantitative data from multiple sources where the county is available as the smallest unit of analysis.

Local Expert Groups

Survey Respondents self-identify themselves into any of the following representative classifications:

- 1) **Public Health Official** – Persons with special knowledge of or expertise in public health
- 2) **Government Employee or Representative** – Federal, tribal, regional, State, or local health or other departments or agencies, with current data or other information relevant to the health needs of the community served by the organizations
- 3) **Chronic Disease Groups** – Representative of or member of Chronic Disease Group or Organization, including mental and oral health
- 4) **Community Resident** – Individuals, volunteers, civic leaders, medical personnel, and others to fulfill the spirit of broad input required by the federal regulations
- 5) **Priority Population** – Persons who identify as medically underserved, low-income, racial and ethnic minority, rural resident, or LGBTQ+
- 6) **Healthcare Professional** – Individuals who provide healthcare services or work in the healthcare field with an understanding / education on health services and needs.
- 7) **Other** (please specify)

Data Sources

Source	Data Element	Date Accessed	Data Date
County Health Rankings 2025 Report	Assessment of health needs of the county compared to all counties in the state; County demographic data	August 2025	2014-2023
NIH: HDPulse, CDC	Leading causes of death, median household income	August 2025	2019-2023
Florida Department of Public Health – FLHealthCharts	County level public health data dashboards	September 2025	2019-2023
PLACES: Local Data for Better Health	County level health, socioeconomic, and environmental data	August 2025	2024
National Alliance on Mental Illness – NAMI	Statistics on mental health rates and services	August 2025	2022
NIH National Cancer Institute	State cancer profiles; incidence rates	August 2025	2017-2021
Centers for Medicare & Medicaid Services: Mapping Medicare Disparities by Population	Prevalence and prevention services data for the Medicare Population	August 2025	2017-2022
American Diabetes Association	Type 2 diabetes risk factors	August 2025	2005
Centers for Disease Control and Prevention – CDC	Racial and ethnic disparities in heart disease	August 2025	2019
Health Resources & Services Administration – data.hrsa.gov	HPSA designated areas	August 2025	2023
Center for Housing Policy	Impacts of affordable housing on health	August 2025	2015
Child Care Aware	Childcare costs	September 2025	2023
Health Affairs: Leigh, Du	Effects of low wages on health	August 2025	2022

Survey Results

Based on 148 survey responses gathered between June and July 2025.

Due to a high volume of survey responses, not all comments are provided in this report. All included comments are unedited and are contained in this report in the format they were received.

Q1: Your role in the community (select all that apply)

Answer Choices	Responses	
Healthcare Professional	65.3%	96
Community Resident	44.9%	66
Priority Population	4.8%	7
Government Employee or Representative	2.0%	3
Public Health Official	0.0%	0
Representative of Chronic Disease Group or Advocacy Organization	0.0%	0
	Answered	147
	Skipped	1

Q2: Race/ethnicity (select all that apply)

Answer Choices	Responses	
White or Caucasian	91.8%	135
Black or African American	5.4%	8
Hispanic or Latino	1.4%	2
Asian or Asian American	0.7%	1
American Indian or Alaska Native	0.0%	0
Native Hawaiian or other Pacific Islander	0.0%	0
Other	2.0%	3
	Answered	147
	Skipped	1

Q3: Age group

Answer Choices	Responses	
18-24	3.4%	5
25-34	12.3%	18
35-44	24.7%	36
45-54	27.4%	40
55-64	15.1%	22
65+	17.1%	25
	Answered	146
	Skipped	2

Q4: What ZIP code do you primarily live in?

Answer Choices	Responses	
32446	40.3%	56
32448	18.0%	25
32442	5.8%	8
32443	5.0%	7
32431	4.3%	6
32420	3.6%	5
32421	3.6%	5
32460	2.9%	4
32428	2.9%	4
32423	2.9%	4
32321	2.2%	3
32440	2.2%	3
32424	1.4%	2
32438	0.7%	1
36370	0.7%	1
32426	0.7%	1
36310	0.7%	1
32462	0.7%	1
33445	0.7%	1
32430	0.7%	1
	Answered	139
	Skipped	9

Q5: Which groups would you consider to have the greatest health needs (rates of illness, trouble accessing healthcare, etc.) In your community? (Please select your top 3 responses if possible)

Answer Choices	Responses	
Low-income groups	59.7%	83
Older adults (65+)	51.1%	71
Uninsured and underinsured individuals	50.4%	70
Residents of rural areas	46.8%	65
Individuals requiring additional healthcare support	38.9%	54
Racial and ethnic minority groups	20.9%	29
Women	20.1%	28
Children/Adolescents	17.3%	24
Men	5.8%	8
LGBTQ+	1.4%	2
	Answered	139
	Skipped	9

What do you believe to be some of the specific needs of the groups selected above?

- Not enough natural approaches to medicine.
- Endometriosis, high blood pressure, and diabetes
- Unable to get insurance, transportation.
- Local specialty providers that will see regardless of insurance plan or lack of coverage.
- Additional health care for over 65. Additional medical test.
- Affordable healthcare.
- Insurance takes so much financial stress off families as they receive healthcare.
- transportation assistance to appointments, assistance with drug coverage and/or co-pay costs, ability to complete telehealth visits instead of in person visits if can't get to appointments periodically.
- Transportation availability, mobile healthcare hubs within the rural areas, home wellness checks for the rural people.
- Preventive care for low income and uninsured under insured.
- Educate to recognize need for early treatment and not wait until illness is severe.
- Affordable, quality healthcare.

Q6: Please rate the importance of addressing each health factor on a scale of 1 (Not at all) to 5 (Extremely)

	1	2	3	4	5	Total	Weighted Average
Cancer	1	1	7	25	98	132	4.65
Mental Health	1	1	15	25	89	131	4.53
Heart Disease	1	0	11	37	83	132	4.52
Diabetes	1	0	14	39	78	132	4.46
Stroke	0	2	16	37	77	132	4.43
Women's Health	1	1	22	28	79	131	4.40
Obesity	1	3	15	37	76	132	4.39
Substance Use Disorder	2	3	18	29	80	132	4.38
Alzheimer's and Dementia	1	2	22	30	77	132	4.36
Children/Adolescent Health	1	0	27	33	71	132	4.31
Kidney Disease	1	2	22	42	65	132	4.27
Lung Disease	1	2	21	51	56	131	4.21
Dental	2	3	33	38	56	132	4.08
Men's Health	0	6	35	35	56	132	4.07
Liver Disease	2	3	34	40	53	132	4.05
Other (please specify)						5	
						Answered	132
						Skipped	16

Comments:

- Nutritional health.
- Emotional health
- Chronic conditions and the proper screening to addresses the root cause instead of treating symptoms as they emerge
- We need specialist such as endocrinology and pulmonologist in our area to keep residents from traveling to Dothan Tallahassee Panama City. They can not afford public transportation and many do not drive.
- Behavioral health

Q7: Please rate the importance of addressing each community factor on a scale of 1 (Not at all) to 5 (Extremely)

	1	2	3	4	5	Total	Weighted Average
Healthcare: Affordability	0	1	10	30	90	131	4.60
Cost of Health Insurance	0	1	15	21	95	132	4.59
Access to Mental Health and SUD Services	1	2	13	30	85	131	4.50
Access to Senior Services	1	2	12	33	84	132	4.49
Access to Specialty Care	1	2	14	31	84	132	4.48
Access to Primary Care	2	3	15	28	84	132	4.43
Employment and Income	1	1	18	34	78	132	4.42
Healthcare: Location of Services	3	3	13	36	77	132	4.37
Access to Affordable Healthy Food	2	3	16	38	73	132	4.34
Affordable Housing	2	3	19	37	71	132	4.30
Access to Childcare	2	2	24	31	72	131	4.29
Education System	1	4	21	37	69	132	4.28
Healthcare: Prevention Services	1	5	23	35	68	132	4.24
Community Safety	0	7	22	36	67	132	4.23
Transportation	3	4	24	37	63	131	4.17
Access to Home Health	2	4	26	46	54	132	4.11
Access to Exercise	4	9	20	45	54	132	4.03
Social Connections	7	9	40	34	42	132	3.72
Other (please specify)	5						
	Answered						132
	Skipped						16

Comments:

- Need transportation that is affordable for necessities from rural areas.
- Water quality, environmental factors, family dysfunction and at-risk families/children
- Preventive care and the steps necessary to diagnosing conditions needs to be more efficient. Having to fight for testing but met with referrals and hesitation is frustrating time consuming and often causes people to give up and they only show back up for care when it's turned into an emergency then the issue at hand is addressed leaving the cause ignored and postponed to repeat the pattern
- We need more outlying clinics and more specialists willing to come to our area to see patients.

Q8: Please rate the importance of addressing each behavioral factor in your community on a scale of 1 (Not at all) to 5 (Extremely)

	1	2	3	4	5	Total	Weighted Average
Illegal Drug Use	1	5	19	28	78	131	4.35
Smoking/Vaping/Tobacco Use	2	5	18	31	74	130	4.31
Nutrition and Diet	1	1	20	47	62	131	4.28
Physical Inactivity	2	2	22	44	61	131	4.22
Alcohol Use/Excess Drinking	2	7	27	38	57	131	4.08
Risky Sexual Behavior	4	10	25	30	61	130	4.03
Other (please specify)						4	
						Answered	131
						Skipped	17

Comments:

- Anxiety or depression
- Smoking cessation, mostly vaping dangers!
- Access to farmers market or public gardens. Seniors need more options for group home or staying home with a sitter
- Drug use will happen the police should be responsible health care needs to treat the patient and meet them where they are and treat the pain the patient says they're in because what they say is what their pain level is not what employees think it should be

Q9: Please provide feedback on any actions you've seen taken by Jackson Hospital to address the significant health needs in your community and what additional actions you would like to see.

- Need local offices for frequently used specialty providers — urology, ENT (if current provider retires), ortho. But above all need IN HOUSE radiologist.
- I know the hospital is adding additional capabilities in the near future that will greatly benefit the community. I know the hospital is continuing to recruit new Dr's., and maintain adequate nursing staff. I hope the hospital continues to grow in it's efforts to provide new advanced health care opportunities so that individuals do not have travel to receive proper testing and treatment.
- They have classes for diabetes and other health concerns. I don't know how many behavioral classes they have. We need more large employers in the area, so workers can have insurance available. We have been fortunate as a family to have the state Blue Cross and Blue Shield of Florida; my spouse was employed by the state.
- Would encourage more use of social media platforms to help provide education to the community on bp, diabetes, cancer care, obesity, mental health. Offer more community education opportunities monthly using providers in community who are willing to assist with providing education. Jackson does the Breast Cancer symposium.
- Jackson Hospital appears to constantly strive to meet community needs and is always recruiting for specialty care. Our community hospital now offers MRI services, mammograms, cancer care including infusion therapy and a wide variety of specialty care clinics. The hospital and CEO makes so many efforts to provide as much to our rural community as larger close by hospitals. I am proud of the hospital that serves our community
- The need for extra activities for youth and elderly for mental health.
- Community Education lunches on different health topics. Speakers at Community Services Clubs. Health Fairs at local College, Madison Park, Veterans. Annual Breast Cancer seminar. Seminars for diabetic diet in conjunction with County Agriculture Dept. And Home Ec.
- Jackson has been proactive in providing classes and information to assist on site and providing references to supporting agencies
- I've seen the hospital take action with providing access to healthcare on site in addition to others. I'd like to see more outreach in providing education in healthy lifestyle or disease prevention, exercise, nutrition, family counseling for at-risk families and children, and wholistic health.
- Periodically provide gas gift cards to assist pts

Q10: Social determinants of health (SDoH) are conditions in the environments in which people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes. Please select the key social determinants that negatively impact the health of you or your community (select all that apply):

Answer Choices	Responses	
Poverty	68.0%	83
Lack of transportation	59.0%	72
Lack of affordable childcare	49.2%	60
Housing instability or inadequate housing	46.7%	57
Limited access to healthcare services	44.3%	54
Unemployment or unstable employment	43.4%	53
Limited access to healthy food	41.0%	50
Limited access to quality education	23.0%	28
Social isolation	22.1%	27
Racial and cultural disparities	15.6%	19
Public safety concerns	11.5%	14
Limited access to utility services	11.5%	14
Other (please specify)	8.20%	10
	Answered	122
	Skipped	26

Comments:

- Mental health service
- Steady employment at a decent salary to be able to live.
- Apathy towards healthy lifestyle
- Low wages
- Limited access to health education in the community
- The cost of health care even with insurance is currently hindering my households ability to receive some services while health issues also are causing our home to deal with the loss of an income. The bills don't stop the medical needs don't stop but without the appts and tests and treatment there will be now progress on the condition. Eventually the bills won't be allowed to be billed and the payment plan won't be sufficient for the drs appointments so treatment will stop and I hope before that happens we find out a treatment plan that works.

Q11: What barriers keep you or anyone in your household from receiving local healthcare services? (select all that apply)

Answer Choices	Responses	
High cost of services	49.5%	54
Limited availability of services or specialties	36.7%	40
Out-of-network for insurance plans	28.4%	31
Underinsured/no insurance	28.4%	31
Billing issues or lack of clarity in billing statements	23.9%	26
Limited facility hours (inconvenient for working individuals)	22.0%	24
Difficulty getting an appointment (long wait times)	19.3%	21
Not aware of the local healthcare services or programs	16.5%	18
Poor communication from providers or staff	15.6%	17
Perception of low-quality care	14.7%	16
Unhappy with previous experience with providers or staff	12.8%	14
Facilities are too far from home	12.8%	14
Language or cultural barriers	5.5%	6
Other (please specify)	11.9%	13
	Answered	109
	Skipped	39

Comments:

- Belief that if I'm not dying, I don't require healthcare
- We are very pleased with our health providers in our community!! They are knowledgeable and professional.
- No barriers
- No barriers for me or my family.
- Need more alternative therapies offered in the community, health spa that offers more than medication for treatment
- Transportation
- None at this time.
- Specialties not offered
- None
- I do not have this problem

Q12: What services / offerings would you like to see available locally? (select all that apply)

Answer Choices	Responses	
Endocrinology	52.9%	65
Mental Health Services	49.6%	61
Urology	44.7%	55
Cardiology	40.7%	50
Pulmonology	37.4%	46
Rheumatology	35.0%	43
Women's Health	35.0%	43
Neurology	33.3%	41
Gastroenterology	32.5%	40
Nephrology	31.7%	39
Bariatric	30.9%	38
Health Prevention / Education Programs	30.1%	37
Cancer Care	29.3%	36
Substance Use Disorder Treatment	28.5%	35
Additional Primary Care Availability	27.6%	34
Telehealth / Virtual Care	24.4%	30
Orthopedics	23.6%	29
Urgent Care / Walk-In / Extended Hours	23.6%	29
Dermatology	22.8%	28
Audiology	20.3%	25
Plastic Surgery	17.9%	22
Pediatrics	17.1%	21
Ophthalmology	15.5%	19
Reproductive Health	15.5%	19
General Surgery	13.0%	16
Other (please specify)	4.1%	5
	Answered	123
	Skipped	25

Comments

- Extremely happy with the specialties we have here.
- Family counseling for at risk families/ dysfunctional families
- A dedicated outpatient center that allows more ease of priority of hospital and ER patients without the burnout of hospital staff. We are too busy!
- Pain management for chronic pain conditions as well as drs locally who can identify or are at least knowledgeable about connective tissue disorders and other disorders that should be identified sooner to help prevent damage to joints and all over health
- Midwifery Care

Q15: Where do you typically get most of your health information (advice about managing health conditions, wellness tips, information about treatment options, recommendations for preventive care)? (select all that apply)

Answer Choices	Responses	
Doctor/Healthcare Provider	86.1%	105
Websites/Internet (Google, WebMD, Mayo Clinic)	48.4%	59
Hospital or Clinic	37.7%	46
Family or Friends	35.3%	43
Workplace	24.6%	30
Word of Mouth	23.8%	29
Social Media (Facebook, Twitter, Instagram, TikTok)	22.1%	27
Podcasts/YouTube Videos	14.8%	18
Public Health Agencies (Local Health Department, CDC, etc.)	13.9%	17
AI Platform (ChatGPT)	9.8%	12
Newspaper/Magazine (Online Publications)	8.2%	10
Television	6.6%	8
School/College	5.7%	7
Newspaper/Magazine (Print Publications)	3.3%	4
Radio	2.5%	3
Other (please specify)	3.3%	4
	Answered	122
	Skipped	26

Comments:

- UpToDate
- Nurse
- Books
- Research on alternative health options