TARRANT COUNTY HOSPITAL DISTRICT/JPS HEALTH NETWORK 2017 CHNA EXECUTIVE SUMMARY May 4, 2017





BACKGROUND

JPS Health Network is the county's public hospital system that provides medical services to Tarrant County residents, including underserved residents. The network includes John Peter Smith Hospital, the county's only Level I Trauma Center and only Psychiatric Emergency Center. JPS also operates over 40 outpatient clinics and school-based health centers across the county, providing 1.7 million patient encounters annually. In 2017, JPS Health Network partnered with Health Resources in Action (HRiA), a non-profit public health organization, to conduct a community health needs assessment (CHNA) to gain a greater understanding of the health issues facing Tarrant County residents, how those needs are currently being addressed, and where there are opportunities to address these needs in the future.

Previous CHNA

In 2013, JPS Health Network conducted a CHNA to identify and prioritize health issues. The 2013 CHNA informed the hospital's program planning and provided a foundation for the development of an implementation strategy. As a result of the key findings from the 2013 CHNA, JPS Health Network identified the following three priority areas, each of which aligned with identified community health needs: behavioral health and palliative care, community focused and care coordination, and specialized services.

Purpose and Geographic Scope

The 2017 CHNA builds upon the 2013 CHNA to further advance JPS Health Network's community efforts and priority topic areas. This report describes the process and findings from the 2017 CHNA, which aimed to:

- Examine the current health status of Tarrant County and its sub-populations, and compare these rates to state indicators
- Explore current health priorities—as well as new and emerging health concerns—among residents within the social context of their communities
- Identify community strengths, resources, and gaps in services to guide planning and direction

For this CHNA, the community served by JPS was defined as Tarrant County, with a focus on populations residing in Arlington, Fort Worth, and Haltom City; these three incorporated areas have the largest populations in Tarrant County and the highest percent of residents living below poverty.

PROCESS AND METHODS

The CHNA employed a participatory approach so that the process was informed by diverse perspectives and used a social determinants of health framework, recognizing that multiple factors affect a community's health. As part of this effort, JPS sought input from a 30-member Advisory Committee at several stages of the assessment.

• To develop a social, economic, and health portrait of the community served by JPS Health Network, existing quantitative data were drawn from national, state, county, and local sources (e.g., U.S. Census, Texas Department of State Health Services, JPS Health Network, etc.). Quantitative data was supplemented by three focus groups and eleven interviews conducted with 40 individuals from Tarrant County in February 2017 to understand participants' perceptions of their communities, health needs and assets, and suggestions for future programming and services to address these issues. Additionally, a review of programs was done to assess the existing health services landscape in Tarrant County.

• In addition to the qualitative data collected and analyzed by HRiA for this CHNA, the report integrates relevant qualitative findings from the Tarrant County Long-Range Planning Process.

FINDINGS

The following provides a brief overview of key findings that emerged from this assessment:

Demographics: Who Lives in Tarrant County?

The health of a community is associated with numerous factors including the demographic distribution of age, race/ethnicity, educational attainment, income, and employment status, among others. Who lives in a community is significantly related to the rates of health behaviors and outcomes of the area.

- Population: According to the U.S. Census, Tarrant County had a population of nearly 2 million between 2011 and 2015; by 2030, the county's population is projected to increase by nearly 40%.
 Focus group and interview participants also shared personal observations of population growth.
- Age Distribution: Residents 45 years of age and older comprised about one-third of the countywide population. Comparing 2006-2010 and 2011-2015 American Community Survey data indicates that the aging adult population (65 years and older) has increased by 13.8%. Participants specifically mentioned the region has a growing and vibrant population of aging adults; concerns about meeting the needs of this rapidly growing population also emerged.

"I am not sure our system is ready for the need [as the boomer population ages]. The sheer numbers are overwhelming – the resources aren't there."

—Interview participant

- Racial and Ethnic Diversity: Interview and focus group participants also stated that Tarrant County has a diverse population, including Asians, African Americans, and Hispanics. Quantitative data shows approximately half of Tarrant County residents identified as White and slightly over a quarter identified as Hispanic. Numerous participants noted the region has a growing number of refugees and large number of undocumented residents. Nativity data shows Tarrant County had a similar proportion of foreign born residents as the state (16.9% and 17.8%, respectively), while nearly a quarter of Haltom City residents were foreign born (25.4%). Providers shared the diversity of immigrant and refugee groups in the community creates challenges in reaching everyone effectively.
- Educational Attainment: Educational attainment in Tarrant County was higher than that of Texas; a majority (61.4%) of county residents had at least some college or an associate's degree.

 A few interview participants noted more needs to be done to enhance opportunities for the region's students. These participants cited low reading levels, and heavy administrative staffing as barriers.
- Income, Poverty, and Employment: Tarrant County's median household income was \$58,711, which was above that of Texas. County residents were also less likely to live 100% below the federal poverty level (12.5%) compared to residents statewide (14.5%), though nearly one in five Fort Worth residents were living below the poverty level. Some participants raised concerns about rising rates of poverty as evidenced by a high number of school-aged children who receive free or reduced lunch and a large homeless population. While several participants pointed to economic growth in the region, some expressed concern about the distribution of economic opportunity.

Social and Physical Environment: What is it like to live in Tarrant County?

In addition to who lives in a community, a community's health is associated with what resources and services are available (e.g., safe green space, access to healthy foods). The section below provides an overview of Tarrant County's social and physical environment to provide greater context when discussing the community's health.

- *Transportation:* Concerns about transportation were discussed in nearly every focus group and interview. Transportation was also identified as a community concern in interviews, focus groups, and community listening sessions conducted for the Tarrant County Long Range Planning Process. The majority of Tarrant County residents used a car alone to commute to work (82.9%); the same is true for residents of Arlington, Fort Worth, and Haltom City. Less than 1% of county residents used public transportation.
- Housing: Lack of affordable housing emerged as a prominent theme in interviews and focus groups. According to participants, housing costs comprise a large part of spending for lower income households, leaving few resources for other needs, such as health care, medicines, or nutritious food. Quantitative data show that approximately one in five homeowners in Tarrant County spent 35% or more of their income on their mortgage (19.4%); in contrast,

"People are spending so much on housing—the primary driving source of income spending."

Interview Participant

- nearly twice as many renters spent 35% or more of their income on their rent (39.6%).
- Access to Healthy Food: Focus group and interview participants expressed concern about limited
 healthy food options in lower income communities of Tarrant County, reporting a lack of grocery
 stores and prevalence of convenience stores and fast food in these communities. Quantitative data
 support these observations; from 2012 to 2014 the rate of convenience stores and fast food
 restaurants increased and were higher than the statewide rates. Additionally, in 2015, more than
 one in four low-income residents of Tarrant County reported low food access (25.7%).
- Crime and Safety: Few participants spoke about crime in the community. Tarrant County's violent crime rate (391.9 violent crimes per 100,000 population) is below that of Texas (410.5 violent crimes per 100,000 population). However, Fort Worth and Arlington experienced violent and property crime rates above those of the county and state. While a couple shared that the crime rate seems to be low and the community feels safe, a few

"The social agencies [in Tarrant and Fort Worth] work well together and government officials also work well."

Interview Participant

participants shared that sexual and interpersonal violence, including child abuse and neglect was reported to be high in the region. The sexual assault incidence rate in Tarrant County was above that of Texas and increased from 77 incidents per 100,000 population in 2013 to 83 incidents per 100,000 population in 2015.

Community Strengths and Resources

When asked about community strengths, participants identified several assets including **health care** resources, generous residents, collaborative organizations, supportive local officials, and a resilient population.

• Environmental Scan of External Programs: A review of existing programs and services reveals numerous organizations already working on key health issues in Tarrant County. The topic areas of

aging, health care resources, and homelessness are well represented in the service landscape of Tarrant County. Areas where there appears to be limited programming include obesity, substance abuse, and communicable disease.

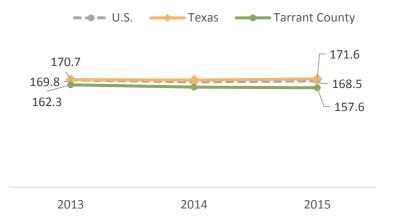
Health Conditions

This section of the report provides an overview of leading health conditions in Tarrant County examining incidence and mortality data as well as discussing the pressing concerns that community stakeholders identified during in-depth conversations.

- Mortality: From 2013 through 2015, the two leading causes of death in Tarrant County were heart disease and cancer (all-sites). At a rate of 46.2 deaths per 100,000 population, cerebrovascular disease became the third leading cause of death in 2015. In 2014, Alzheimer's became the fifth leading cause of death in Tarrant County. According to 2017 County Health Rankings, Tarrant County ranks 33rd in length of life among 243 counties statewide.
- *Chronic Diseases and Related Risk Factors:* Similar to the 2013 CHNA results, chronic diseases and their risk factors—specifically obesity, diabetes, cardiovascular disease, and cancer— were mentioned in the majority of focus groups and interviews.
 - Obesity: Obesity was identified by several participants as a concern for the region, particularly childhood obesity. Quantitative data shows that in 2015, 61.4% of Tarrant County Adults were reported to be overweight or obese and nearly one in five (18.9%) Fort Worth Independent School District high school students were reported to be overweight; Black and Hispanic students were more likely to be overweight than White students.
 - Diabetes: Diabetes in the region was also mentioned as a particular concern among participants because of its high prevalence, its impact on comorbidities, and the costs associated with the disease. In 2015, 9.6% of Tarrant County adults reported to be diagnosed with diabetes compared to 11.4% statewide.
 - Healthy Eating and Physical Activity: Focus group and interview participants reported that exercise and healthy eating were ways to prevent chronic diseases such as obesity and cancer. However, residents described competing priorities, such as work, child care, and cultural norms as barriers to maintain a healthy lifestyle. In 2013, 13.5% of Tarrant County adults reported consuming fruits and vegetables five or more times a day compared to 19.2% in 2015, surpassing the statewide proportion that year. Between 2013 and 2015, the proportion of Tarrant County adults reported to have met aerobic recommendations also increased, from 36.0% to 46.7%, again surpassing the statewide average.

- Heart Disease: Heart disease is the leading cause of death in the U.S. The heart disease mortality rate among the Tarrant County population was 157.6 deaths per 100,000 population in 2015, below the statewide and nationwide rate. However, Black residents in Tarrant County are disproportionately affected by heart disease (198.9 deaths per 100,000 population).
- Hypertension: In 2015, 27.2% of Tarrant County adults were reported to have had high blood pressure.
 When this data is stratified by race/ethnicity, disparities emerge. In

Heart Disease Mortality Rate per 100,000 Population, by U.S., Texas, and Tarrant County, 2013-2015



When this data is stratified by Center for Health Statistics, Underlying Cause of Death 1999-2015 on CDC race/ethnicity, disparities emerge. In 2015 the proportion of Black adults reported to have had

Behavioral Health: Consistent with 2013 CHNA findings, assessment participants discussed mental health, especially depression, stress, and substance abuse, as a significant concern facing the community. Behavioral health concerns for aging adults were identified as a critical and growing health need in Tarrant County; participants mentioned rising rates of dementia and Alzheimer's as the county's population ages.

high blood pressure (34.4%) was greater than the 2013 countywide average (32.4%).

Mental Health: Quantitative data show that nearly one in five Tarrant County adults reported a depressive disorder diagnosis (18%), which was slightly higher than adults statewide.

According to Fort Worth Independent School District data, more than a quarter of high school students reported persistent sadness (29%) in 2015.

"We still aren't where we should be in recognizing the impact of mental illness in Tarrant."

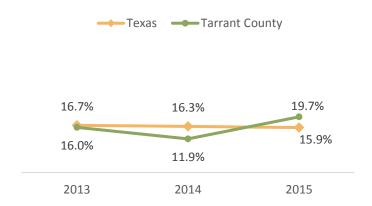
Focus group participant

- As mentioned previously, in 2014, Alzheimer's disease became the fifth leading cause of mortality in Tarrant County; the county and state Alzheimer's mortality rate steadily increased between 2013 and 2015, with a slightly higher mortality rate in Tarrant County in 2015 (41.2 deaths per 100,000 population).
- There was also a gradual upward trend in the suicide mortality rate in Tarrant County, from 11.1 suicide deaths per 100,000 population in 2013 to 11.8 suicide deaths per 100,000 population in 2015; however, the countywide suicide mortality rate remained below that of the state (12.1 suicide deaths per 100,000 population). Among Fort Worth ISD high school youth, Black students reported the highest prevalence of attempted suicide in 2015 (11.2%).
- Substance Abuse: Stakeholders raised substance abuse as being an important health issue in the
 community, especially in the context of mental health. Participants shared concerns about
 depression, suicide, and increased use of substances among elders in the community.
 Specifically, participants stated Tarrant County experiences high rates of alcohol, opioids,

marijuana, and prescription drug use. In rural areas, use of methamphetamines was reported to be prevalent.

Risk Factor Surveillance Survey and Youth Behavioral Risk Factor Surveillance Survey and Youth Behavioral Risk Factor Surveillance Survey, there has been an overall upward trend in alcohol consumption at the county level from 2013 to 2015 (44.9% to 59.3%, respectively). Additionally, Texas has seen a gradual decrease in self-reported binge drinking since 2013, while Tarrant County has seen an increase; in 2015, approximately 20% of Tarrant County residents reported consuming five or more drinks on

Percent Adults Reported Binge Drinking in Past Month, by Texas and Tarrant County, 2013-2015



DATA SOURCE: Texas Behavioral Risk Factor Surveillance Survey, 2013-2015

- any one occasion in the past month—up from 16% in 2013.
- Less than 2% of Fort Worth ISD high school students reported to have ever used heroin in 2015. Though quantitative data show that prescription drug use is more common in Tarrant County, with approximately 14% of high school students reporting to have ever taken prescription drugs without a doctor's prescription.
- Cancer: In addition to identifying broad health issues facing residents, the 2017 CHNA examined health behaviors and outcomes across the cancer continuum of care, including prevention, screening, treatment/health care utilization, and survivorship. While cancer did not emerge as a community concern unprompted, when participants were asked about cancer, several reported that they viewed cancer as a concern for residents of Tarrant County.

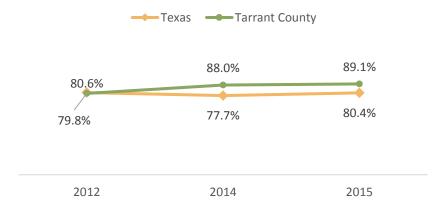
It's abstract until you have it [cancer]. Until you have someone in your life who has it. Then you're entering the freeway in a fast lane, because it's coming fast and furious."

Focus Group Participant

- Cancer Prevention and Screening: Focus group participants noted that while Tarrant County has good resources for cancer screening, lower income residents are less likely to be screened because they lack insurance or face other barriers.
 - Quantitative data show that over 70% of women across the state ages 40 and older reported having had a mammogram within the past two years. These screening rates have improved across the state of Texas, from 68.4% in 2012 to 71% in 2014. In contrast, breast cancer screening rates have declined in Tarrant County, from 76.4% in 2012 to 70.9% in 2014. This data represents the most current mammography rates available for the county.

rates were generally high across Texas and Tarrant County. Among women 21-65 years old, 80% of Texas women reported receiving a pap test to screen for cervical cancer in the past three years. Percentages were even higher in Tarrant County where approximately 89% of women were screened in 2015—a steady increase since 2012.

Percent Female Adults (Ages 21-65) Reported to Have Had Pap Test Within Past Three Years, by Texas and Tarrant County, 2012, 2014 and 2015

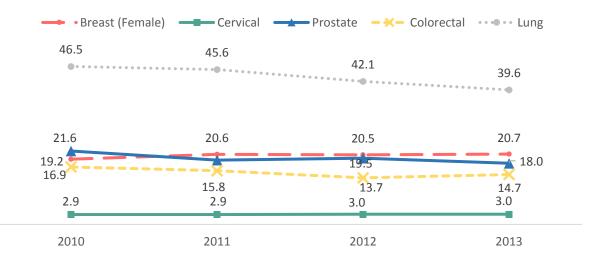


DATA SOURCE: Texas Behavioral Risk Factor Surveillance Survey, 2012, 2014, and 2015

- The proportion of adult men 40 and older in Tarrant County who have had a Prostate Specific Antigen (PSA) test within the past two years (47%) is higher than the proportion of men in Texas overall (44%).
- Adults age 50 and older who reported to have ever had a colonoscopy or sigmoidoscopy in Tarrant County increased from 65% in 2012 to 79% in 2014. Screening rates across the state during these years remained relatively stable at approximately 63%.
- Cancer Incidence and Mortality: Cancer is among the top two leading causes of death in Tarrant County—similar to statewide and national trends. Since 2010 there has been an overall downward trend in cancer incidence and mortality across the state of Texas and Tarrant County. Tarrant County experienced a decrease in overall cancer mortality from 171.4 deaths per 100,000 population in 2012, to 156.3 deaths per 100,000 in 2013. Lung, female breast, prostate, and colon cancers were the leading types of cancer deaths in Tarrant County from 2010-2013.
 - The rate of lung cancer incidence in Tarrant County has declined from 62.4 cases per 100,000 residents in 2012 to 56.2 cases per 100,000 population in 2013. This downward trend is also observed for lung cancer mortality; in 2013, the state of Texas and Tarrant County experienced 39.6 and 38.6 lung cancer deaths per 100,000 population, respectively —a steady decline from 2010.
 - Breast cancer incidence and mortality rates remained relatively stable from 2010 to 2013; Latinas experienced the lowest rate of breast cancer deaths in Tarrant County with 15.9 deaths per 100,000 population in 2013. Conversely, White and Black residents experienced the highest breast cancer mortality rates (21.6 deaths per 100,000 population and 21.1 per 100,000 population, respectively).
 - Cervical cancer incidence rates have steadily declined in Tarrant County from 10.6 cases per 100,000 population in 2010 to 7.0 cases per 100,000 in 2013. Mortality rates have remained

- stable over time throughout Texas and Tarrant County, though data should be interpreted with caution given the small number of cases that comprise these rates.
- While Tarrant County experienced a decrease in its prostate incidence rate, the incidence of prostate cancer was above that of the state (117.0 cases per 100,000 population in 2010 and 104.2 cases per 100,000 population in 2013). A downward trend was also observed for prostate cancer mortality rates at both the state and county level though there continues to be great disparity in prostate cancer mortality for Black men compared to all other racial and ethnic groups.
- In 2010, Tarrant County had a rate of 41.4 cases of colorectal cancer per 100,000 population, slightly higher than the 2013 incidence rate of 33.8 cases per 100,000 population. Similar to prostate cancer, Black residents are disparately affected by colorectal cancer. In 2013, Black residents experienced 20.9 colorectal cancer deaths per 100,000 population, nearly three times the rate of Hispanic/Latino residents.

Age-adjusted Cancer Mortality Rate per 100,000 Population in Tarrant County, by Cancer Type, 2010-2013



Cancer Survivorship: Survivor care—healthy living during and after cancer care – was also mentioned as an area needing attention. According to providers, few programs exist to help those living with cancer to learn about and be supported to engage in healthy behaviors such as healthy eating and physical activity. According to quantitative data, prostate cancer had a 96% five-year survival rate, while only 15.9% of those diagnosed with lung cancer survived after five years. When stratified by race, Black residents had lower survival rates across all leading cancers compared to all other racial and ethnic categories.

Maternal and Child
Health: Several
participants reported that
infant mortality in the
region is high, especially
among lower income and
African American women.
Providers saw a need for
more education around
STI prevention as well as
infant care for young
mothers (including
prevention of sudden
infant death syndrome
and smoking in the home).

Infant Mortality Rate per 1,000 Live Births, by U.S., Texas, and Tarrant County, 2010-2014



DATA SOURCE: Texas Department of State Health Services, Center for Health Statistics, Texas Health Data, Vital Statistics Annual Report, 2010, 2011, 2012, 2013, and 2014 and for U.S. data, Centers for Disease Control and Prevention, National Center for Health Statistics, as cited by Annie E. Casey Foundation, Kids Count Data Center, 2010-2014

- o *Infant Mortality:* Tarrant County had a higher infant mortality rate than Texas and the U.S. (7.2 and 5.8 deaths per 1,000 live births, respectively). Additionally, Black women experienced the highest rates of infant mortality compared to all other race/ethnicities in 2014 (13.6 deaths per 1,000 live births); while the infant mortality rate among Black women has decreased since 2010, it was nearly double the countywide rate in 2014 (7.2 deaths per 1,000 live births).
- Prenatal Care. According to the Texas Department of State Health Services, 57.7% of live births in Tarrant County in 2014 occurred to mothers who received prenatal care in their first trimester compared to 61.6% of all live births statewide.
- Smoking During Pregnancy. The percent of mothers smoking during pregnancy slightly decreased between 2012 and 2014 for Tarrant County, which was similar for Texas statewide.
- o *Birth Outcomes*. In 2014, approximately one in ten babies born in Tarrant County were premature, meaning born before 37 weeks' gestation—slightly lower than the state average of 12.3%. Approximately 8% of babies born each year in Texas and Tarrant County are born low birthweight, although this varied greatly by race/ethnicity; babies who are Black were more than twice as likely to be born low birthweight compared to other races and ethnicities (14%).
- o *Teen Births*. In Tarrant County, Hispanic/Latina girls were more likely to be teen mothers (3.9%), compared to Black (2.4%) and White mothers (1%).
- **Communicable Diseases:** Communicable diseases are not as prevalent as chronic diseases in the region, but they do disproportionately affect vulnerable population groups. Focus group and interview participants had few concerns or comments about communicable disease apart from the perceived increase in sexually transmitted infections, including HIV.

o Sexually Transmitted Infections. Rates of chlamydia and syphilis have remained relatively stable countywide, while gradually increasing statewide. In 2015, there were 444.9 cases of chlamydia per 100,000 population in Tarrant County, compared to 487.3 cases per 100,000 in the state of Texas. A similar difference is observed with syphilis rates, with 23.6

"STIs are a growing problem in Tarrant County and surrounding areas."

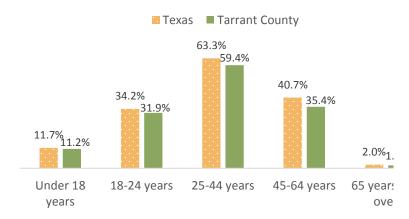
Interview Participant

- cases per 100,000 population in Tarrant County compared to 30.6 per 100,000 population across the state. There is a growing number of residents living with HIV in Tarrant County; the rate increased from 236.4 cases per 100,000 population in 2013 to 254.1 cases per 100,000 population in 2015. However, the HIV mortality rate in Tarrant County decreased from 2.2 HIV deaths per 100,000 population in 2012 to 1.3 HIV deaths per 100,000 population 2015
- Vaccine-Preventable Diseases: Tarrant County Public Health reports that in 2015, there were 308 cases of pertussis (15.7 cases per 100,000 population), 122 cases of streptococcus pneumoniae, invasive (6.2 cases per 100,000 population), and 118 cases of varicella (6.0 cases per 100,000 population). The proportion of children ages 19-35 months not receiving the recommended set of immunizations was similar between the state and county at 38% in 2014. For influenza, there has been a downward trend in the proportion of adults aged 65 years or older who did not receive a flu shot in the past year. The mortality rate for influenza and pneumonia hovered at approximately 12 deaths per 100,000 population in Tarrant County.
- **Oral Health:** Participants shared concerns about dental care, especially access for lower income residents. The percent of adults that reported a dental visit in the past year has remained close to 60% at both the state and county levels since 2012. White adults were more likely to report a dental visit in the past year (70.9%) than Tarrant County adults overall (60.8%), while Black and Hispanic adults were less likely to visit a dentist (45.8% and 48.6%, respectively).
- Violence, Injury, and Trauma: Quantitative data show that homicide mortality is relatively low across the Texas and Tarrant County, with around 5 deaths per 100,000 population in 2015. Deaths from unintentional injuries are more common than homicide; from 2013-2015, there were 37.2 unintentional deaths per 100,000 population statewide, slightly higher than the 29.7 deaths per 100,000 population for Tarrant County. According to JPS Health Network's 2016 Annual Trauma Report, the top five mechanisms of injury were by motor vehicle/motorcycle crashes, falls, assault, gunshot wounds, and auto-pedestrian crashes.

Information and Coordination

- Health Care Access: Focus group and interview participants reported that although Tarrant County
 has substantial health resources, these services are more difficult for lower income individuals to
 - access. A variety of reasons were cited, including health insurance, cost, transportation, and language barriers.
 - Aggregated U.S. Census data for 2011-2015, shows 19.3% of the Tarrant County population had no health insurance, compared to 20.6% statewide. Obtaining health insurance was identified as a challenge for some individuals due to lack of awareness and the burden of completing paperwork. The cost of healthcare – including co-pays

Percent Population with No Health Insurance, by Age, by Texas and Tarrant County, 2011-2015



DATA SOURCE: U.S. Census Bureau, American Community Survey 5-Year Estimates, 2011-2015

- and deductibles for those with insurance, and the high cost of medications was also reported by participants to be a challenge for some residents.
- Navigating the Health System: Numerous participants stated that navigating health insurance and the health system can be challenging for individuals. Aging adults again were singled out by participants as facing substantial challenges in navigating enrollment deadlines, understanding all the components of Medicare, and negotiating paperwork to get equipment like a walker or apply for home health care.
- Language and Transportation: Transportation and language barriers were also cited as challenges to accessing health care in Tarrant County. Participants described how the lack of public transportation options often means long trips to make health appointments.
 Communication challenges identified included the lack of bilingual providers and translated documents as well as a need for enhanced cultural competency among providers.
- Healthcare Utilization. While in 2013 one in four Tarrant County adults reported having no personal health care provider, reports of limited provider access increased in 2014 and 2015.
 Hispanic/Latino adults were more likely to report not having a provider than adults countywide.
 The majority of behavioral health, dental, and specialty providers are located in or near Fort Worth, which reflects population density; those providers located outside of Fort Worth are not accessible via the public transportation system, which supports qualitative findings.

Community Suggestions for Services and Programs

When asked about suggested services and programs in the community, several themes emerged among focus group and interview participants. These included: address the social determinants of health, expand behavioral health services, emphasize wellness to address chronic disease, enhance access to services, improve coordination across agencies, and increase attention to aging adults and diverse populations in the county.

Health Needs of the Community

Through a review of secondary data and discussions with community stakeholders, this assessment report provides an overview of the social and economic environment of the community served by JPS Health Network, health conditions and behaviors that most affect the population, and perceived strengths and gaps in the current environment. The following table presents the identified health needs of the community that emerged from this synthesis of quantitative and qualitative data.

Area of Need	Identified Needs
Health Conditions/Service Lines	Diabetes & Obesity: Prevention and Management
	Heart Disease & Stroke: Prevention and Management
	Cancer: Education & Screening
	Behavioral Health
	Maternal & Child Health
	Aging Adults
Information and Coordination	Access to Health Care
	Navigation of Health Care System
	Lack of Awareness of Services
	Care Coordination
Social Determinants of Health	Poverty
	Access to Healthy Food
	Housing
	Transportation

Please address written comments on the Implementation Plan and requests for a copy of the plan to:

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