COMMUNITY HEALTH NEEDS ASSESSMENT

2025-2027

TEAM UP
A Public Health Academic Practice Collaborative

Acknowledgements

This Community Health Needs Assessment (CHNA) report was prepared for Hazard ARH by Team Up: A Public Health Academic Practice Collaborative at the University of Kentucky College of Public Health. Team Up works with a variety of health organizations across Kentucky and Appalachia to bridge the gap between academia and practice by forming, encouraging, and sustaining collaborative partnerships. Team Up members Dr. Angela Carman and Mary Elizabeth Pendergrass, MPH contributed to the information in this final report. If you have questions about the assessment process or data collection methodology, contact Mary Elizabeth Pendergrass, Team Up Public Health Policy & Practice Apprentice: mepe242@uky.edu .

This CHNA report was commissioned and directed by Appalachian Regional Healthcare's Community Development Department. The Community Development Department exists to further the mission of ARH by creating new educational programs, funding opportunities, partnerships and coalitions that better the health and well-being of Appalachians. This department organizes awareness events, educational classes, free health screenings, health-related sponsorships, support groups, presentations, and more each year and tracks all these programs in community benefit.

Letter to the Community Member

Dear Community Members, Partners, and Stakeholders,

I am honored to present the 2025-2027 Community Health Needs Assessment (CHNA) report for Appalachian Regional Healthcare (ARH).

As the leading healthcare provider in Eastern Kentucky and southern West Virginia, ARH remains deeply committed to improving the health and well-being of our communities. Understanding the most pressing health challenges in our region is critical to our mission, and this report reflects our dedication to addressing these challenges through collaboration, innovation, and action.

This CHNA is the result of extensive research, data collection, and direct community engagement. Through surveys, focus groups, and partnerships with local organizations, we have identified key health priorities affecting individuals and families. These insights drive our strategic initiatives, ensuring that we provide accessible, high-quality care tailored to the evolving needs of our population.

Rural communities face unique healthcare challenges, particularly in access to services. ARH is committed to expanding medical services, removing barriers to care, and ensuring every community has equal access to quality healthcare.

This report highlights critical health concerns and outlines our strategies for 2025-2027. Real change happens when we work together. We are grateful to everyone who contributed to this assessment—your voices and perspectives are essential in shaping a healthier, better future.

I encourage you to explore this report and join us in our mission to make a lasting impact on the health of our region. Together, we can build a stronger, healthier future — one where every rural community has the access and care it deserves.

Sincerely,

Hollie P. Harris

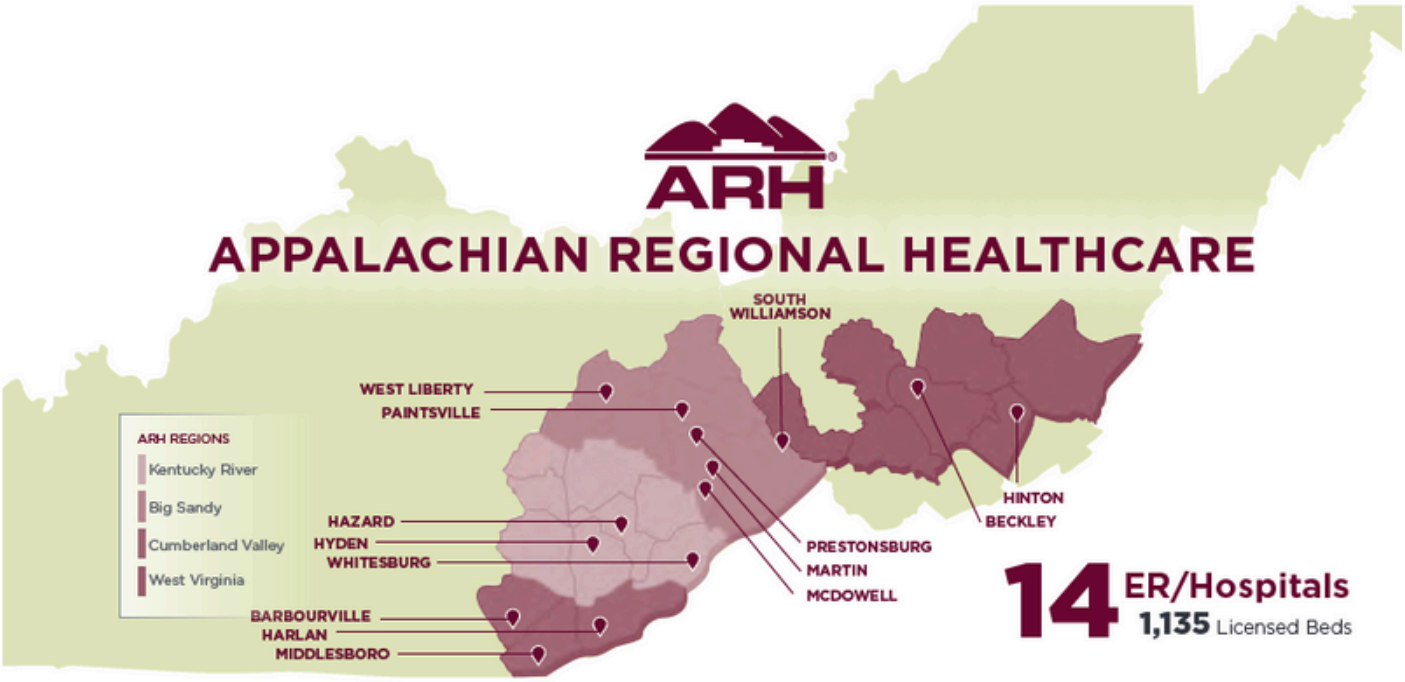
Hollie Harris, MHA
President and CEO Appalachian Regional Healthcare, Inc.

Table of Contents

Introduction

Appalachian Regional Healthcare (ARH) is a not-for-profit health system operating 14 hospitals in Barbourville, Hazard, Harlan, Hyden, Martin, McDowell, Middlesboro, Paintsville, Prestonsburg, West Liberty, Whitesburg, and South Williamson in Kentucky and Beckley and Hinton in West Virginia, as well as multi-specialty physician practices, home health agencies, home medical equipment stores, retail pharmacies, and medical spas. ARH employs around 6,700 people with an annual payroll and benefits of $474 million generated into our local economies. ARH also has a network of more than 1,300 providers on staff across its multi-state system. ARH is the largest provider of care, the single largest employer in southeastern Kentucky, and the third-largest private employer in southern West Virginia.

ARH has always responded to the changing demands of rural healthcare. From building and acquiring new facilities, investing in medical technology, providing health education and support, and creating innovative community partnerships, we continue to meet the health needs of our Appalachian communities. As an ARH hospital, Hazard ARH is committed to these same goals for our service area. This CHNA report will outline the facility's efforts in meeting health improvement objectives from the last CHNA cycle, assessing current health needs, and creating new implementation plans for 2025-2027.



ARH Mission

To improve health and promote well-being of all people in Central Appalachia in partnership with our communities.

ARH Vision

ARH will be the premier destination for quality care, a driver of advancement and development, and a leader in health for the communities we serve.

ARH Values

· Trust
· Innovation
· Collaboration
· Compassion
· Service

Culture Statement

At Appalachian Regional Healthcare our culture is defined by who we are – our history, our family, our traditions, and our story. A culture that embodies the resilient spirit of Appalachia.

SERVICE is our foundation; we honor our communities everyday by delivering healthcare that changes lives and an environment that promotes well-being for all.

TRUST is our core; every action is rooted in honesty, empathy, and integrity; fostering connections with one another, with our patients, and with our communities.

COMPASSION drives our purpose; It's not just treating people but how we treat each other that sets us apart. Enriching the collective strength of our team by bringing together a global workforce to provide local care.

COLLABORATION is our strength; we are one family taking care of all families. Committed to fostering an inclusive team full of unique perspectives, experiences, and talents at every level that enhances our service.

INNOVATION is our compass; we adapt the way we work and advance the way we care. Providing unique solutions to exceed the healthcare needs of the patients of our region.

Community Health Needs Assessment Process

Introduction to CHNA

Provisions in the Affordable Care Act (ACA) of 2010 require tax-exempt (non-profit) hospitals to conduct a Community Health Needs Assessment (CHNA) and develop a CHNA Implementation Plan at least every three years. The regulations for the CHNA include defining the hospital's service area, compiling demographics and analysis of health indicators; taking into account input from the broader community as served by the hospital facility.

The ACA requires that the CHNA must be made available to the public and must include input from individuals with special knowledge or expertise in public health. Accordingly, ARH contracted with experts from the UK College of Public Health to ensure equitable stakeholder representation and public health expertise throughout the CHNA process and final report.

Process

The Community Health Needs Assessment is a cyclical process that involves creating community steering committees, collecting primary and secondary health data, creating community profiles, prioritizing the greatest health needs for a geographical area, and creating a plan to meet those needs.

Over a three-year span, hospital facilities work to create healthier communities through programs and initiatives as guided by the CHNA. Prior to the start of a new CHNA cycle, facilities track and report on implementation successes (new health and wellness programs created, health care access improved, community members engaged, etc.).

Primary Data

Collecting primary data, or new data collected directly from the community, is a key part of the CHNA process. This type of data provides two valuable contributions:

1. Self-reported data about the health needs and strengths of community members
2. More engagement of the community in the process

Perhaps as important as a thorough data set, gathering local data provides opportunities for the community to be engaged through the community health needs assessment process and to ensure that the community members' voices are heard. Engagement at this stage can lead to stronger community support and involvement throughout the community health improvement efforts.

Primary data was collected in this CHNA through community surveys, focus groups, and key informant interviews.

Method	Description
Community Surveys	A traditional approach to gathering community input. Can include: written, telephone, web-based, or in-person.
Focus Groups	A traditional approach to gathering community input. Can include: written, telephone, web-based, or in-person.
Key Informant Interviews	In-depth one-on-one discussions to gather input from representative community members. Can be done with key community leaders or residents representing specific sub-populations.

Secondary Data

Secondary data is data that is collected by other entities and provides information on health status and demographics. Examples include vital statistics, censuses, reports from government agencies (such as the CDC), or information collected through studies and other organizations (such as County Health Rankings).

Steering Committees

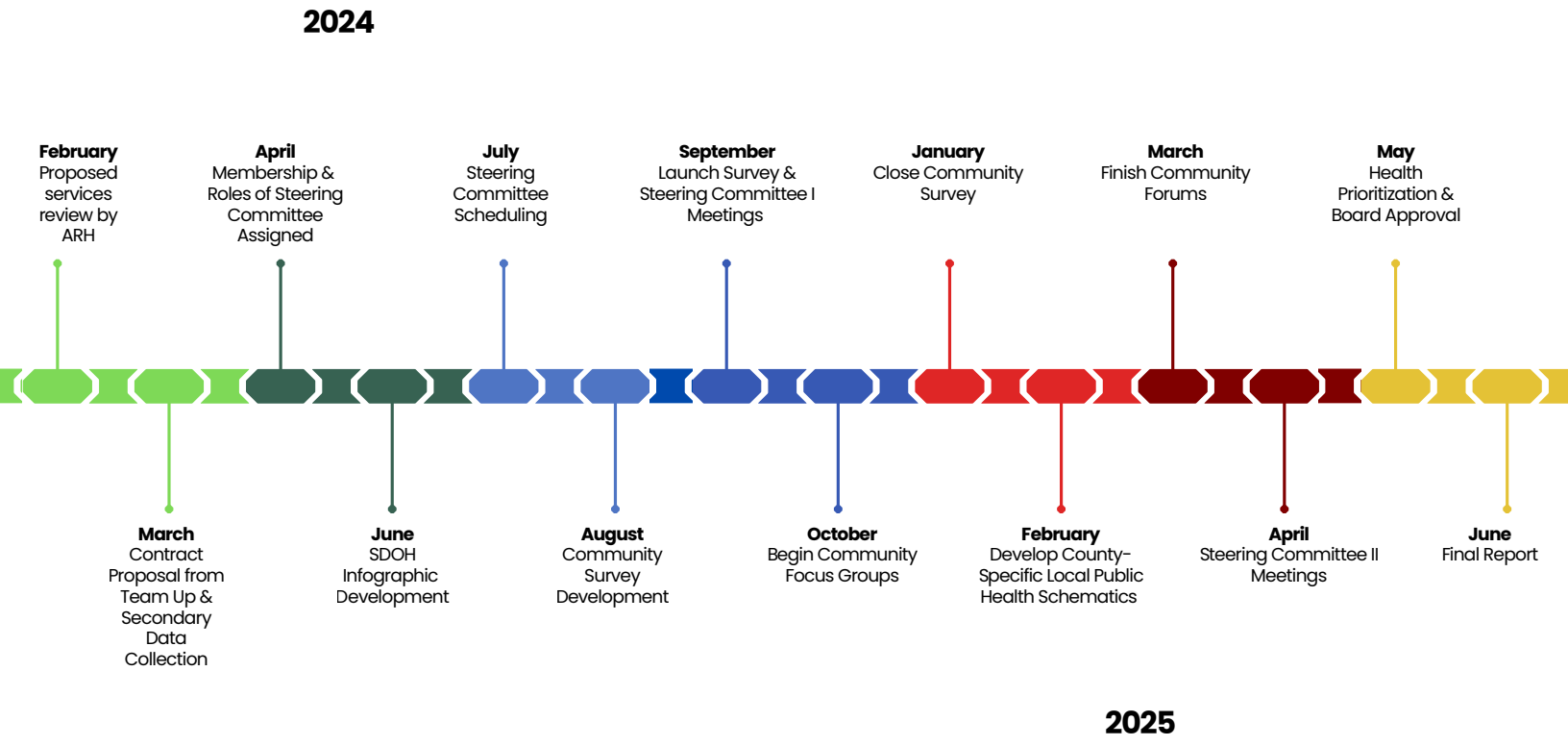
Community Health Needs Assessment (CHNA) steering committees are groups of key stakeholders assembled to guide the planning, development, and implementation of the CHNA process for non-profit hospitals. These committees typically include representatives from public health agencies, local government, community organizations, healthcare providers, academic institutions, and members of the community, especially those who serve or represent medically underserved, low-income, or minority populations.

CHNA Timeline

Appalachian Regional Healthcare collaborated with Team Up at the University of Kentucky (UK) College of Public Health in the Summer of 2024 to begin conducting the 2025-2027 Community Health Needs Assessment (CHNA) for Perry County

See the CHNA process timeline below.

CHNA Timeline



2022-2024 Implementation Successes

During the 2022 CHNA process, the Perry County Steering Committee identified the following health needs:

1. Mental Health
2. Substance Use Disorder/ Addition
3. Healthy Lifestyle Education
4. Build and Expand Capacity of Health Consortium

Hazard ARH set forth goals and strategies to address each of the identified health needs, see these as well as successes below.

Goal 1

Improve the mental health of our community members and reduce stigma associated with seeking treatment

Since 2022, Hazard ARH has **expanded and promoted mental health in our community** by:

- Onboarding Kaitlyn Warfield, LCSW to provide **therapeutic services** to patients in the Hazard community
- Completing renovations and opened Hazard Psychiatric Center's Treatment Mall in Dec. 2023
- The ARH Behavioral Health team created a video series for social media with 9 **educational videos** that garnered **over 3,000 views on YouTube**. These videos feature ARH staff and providers that are local to the area discussing relevant mental health topics like suicide prevention, PTSD, seasonal affective disorder, and postpartum depression.
- **Mental health education and awareness events** have also been a focus of the Community Development and Behavioral Health teams since 2022. Over this three-year span, community programming includes:
  - A Suicide, Depression, and Anxiety presentation to Knott County Central High School students
  - A partnership with with KY River Health Consortium to host a "You Are Worth It" event focusing on staff and students of Robinson Elementary and Buckhorn to promote self-care and building resiliency. This event was in response to natural disaster trauma, as both schools were totally lost during the 2022 flooding

- Sponsored and attended two community events with a suicide prevention focus, the Suicide Awareness Community Painting and the Suicide Awareness 5k
- Provided Positive Affirmations Sidewalk Chalk events throughout the community on numerous occasions, especially those targeting children
- Organized an ARH Lunch and Learn at the Perry County Senior Citizens Center focusing on mental health and coping skills in the aftermath of the COVID-19 pandemic

Goal 2

Address drug, tobacco, and alcohol addiction through new services, community partnerships, and education

Since 2022, Hazard ARH has **addressed drug, tobacco, and alcohol addiction** by:

- In 2020, Hazard ARH launched the **Peer Support Program**, employing Certified Peer Support Coaches to work in our Emergency Department and throughout the community. Peer support coaches are people who have been successful in the SUD recovery process and can help others that are still in active addiction. Our coaches often respond to overdoses in our ED, refer people to treatment, provide resources for social needs, educate the community on SUD and overdose awareness, and more. Since 2022 Hazard ARH Peer Recovery Coaches have:
  - Engaged **2157** patients
  - Referred **491** patients to treatment
  - Provided **323** Linkages to treatment
  - Assisted **54** individuals with attaining housing or employment

- Peer Recovery Coaches have worked with community partners to host many community events over the past three years
  - Peers have taught "To Good For Drugs Classes at local elementary schools
  - Attend Child Abuse Awareness events with KRCC
  - Active participation in Operation Unite Coalition in Perry and Leslie Counties

- Peers **distribute Naloxone** to local businesses and neighborhoods

Goal 3

Provide community education about healthy behaviors in an effort to improve decision making skills

Since 2022, Hazard ARH has **educated our community to engage in healthy behaviors** by:

- **Cancer prevention and early detection**
  - Since 2022, Hazard ARH has hosted 20 events that specifically promote cancer awareness, teach about early detection, and encourage preventative lifestyles

        - **7** colon cancer screening events where take-home colon cancer screening kits (FIT kits) were offered in partnership with Kentucky Cancer Link. Many were held at local schools, targeting teachers during their work day
        - **7** community presentations about the early detection of lung cancer and low dose CT screenings provided by the ARH Lung Cancer Screening Program Manager
        - **4** breast cancer awareness luncheons or dinners provided free of cost to the community with breast cancer survivors and ARH provider speakers
        - **1** Mamms Day Out mammogram screening event held on a Saturday outside of usual business hours
        - **1** oral cancer screening event in partnership with UK School of Dentistry
- **Diabetes Prevention and Management**
    - Hazard ARH focused on diabetes prevention and management by:
        - Implementing monthly **diabetes support groups** in Perry County with diabetes-related topics and healthy cooking demonstrations each month (13 held since 2023 start)
        - Partnering with the **Perry County Diabetes Coalition** and other organizations to host World Diabetes Day events annually. These events provide participants with free screenings, physical activity programming, speaker presentations, and diabetic-friendly lunch
        - Hosing annual **Diabetes Alert Day** events throughout the community at our Med mall and in retail stores, where visitors or shoppers can receive a free A1C and diabetes education
- **Stroke and Heart Health**
    - Since 2022, our stroke and community development teams have excelled in community stroke education and screenings
        - Provided **Brain Protectors programming to 662 elementary school children** in **6 schools.** This program trains students to recognize the signs and symptoms of a stroke
        - In 2024, implemented **"Strike Out Stroke"** in partnership with our local little league and "Lets TACO-bout Stroke" cooking classes
        - Provided stroke risk assessments/screening events **12** times throughout our community, including events at grocery stores, farmer's markets, and senior centers
- **Nutrition and Food Insecurity**
    - Hazard ARH has addressed food insecurity and the need for nutrition education by:
        - Providing 3 free cooking classes with in partnership with the Perry County UK Extension Service or Sodexo

        - Attending the Perry County Farmers Market on 12 occasions, providing nutrition and heart health education
        - Collaborating with God's Pantry Food Bank to provide nonperishable food boxes to patients identified as having a need in both the hospital and clinic environment; Distributing on average 20 boxes per month
        - Partnering with the Hazard-Perry County Farmer's Market to host on-campus pop-up markets at Hazard ARH. These markets included healthy recipe demonstrations. One such event, the Fall Fun Fest, incorporated a community cooking challenge, healthy recipe taste testing, and healthy recipe cards. ARH has also provided healthy meals to community members during farmer's market events focused on diabetes health

- **Health Fairs for Local Employers and Faith-Based Community**
    - The facility partnered with many local employers and churches to provide education and screening opportunities to their employees and parishioners
        - Provided stroke risk assessments, BPs, and free cholesterol checks for employees of Knott County Schools, Passport Health Plan, Kentucky Power, and Hazard Community and Technical College
        - ARH's Prayer and Prevention program visited area churches 4 times to provide health screenings and educate members on stroke, proper nutrition, heart health and diabetes

- **School-Based Programs**
    - ARH organizes many school-based programs that provide students with the knowledge and skills they need to make informed decisions about their health
        - Love Your Lungs, a program that teaches the dangers associated with smoking and vaping, was taught in area schools 2 times since 2022. This program is a partnership with Kentucky Cancer Program
        - ARH School Fitness Fairs were held 4 times throughout the past three years. These events teach children the importance of healthy habits and screen them for high blood pressure, BMI, grip strength, and physical fitness
        - A new program, ReThink Your Drink, was created to educate students on the harmful effects of sugary, overly caffeinated drinks (such as energy drinks). Community Development staff have presented this program 4 times in the community

- **Speakers Bureau Presentations**
  - ARH staff regularly visit local schools, businesses, chambers of commerce, and civic organizations to discuss a variety of health topics. Since 2022, these have included heart health, suicide, colon cancer, diabetes, women's health, breast cancer detection, stroke, and more. In total, Hazard ARH has presented to the community 32 times since 2022.

- **Community Vaccine Events**
  - **370 vaccines** have been administered at community vaccine events including drive-thru clinics each fall at the Community Pharmacy, City of Hazard employee flu clinics, senior health fairs, school district employees, HOSA sponsored food box distribution sites, and World Diabetes Day health fairs

- **Physical Activity Programming**
  - ARH has increased opportunities for physical activity in Perry County and surrounding communities by:
    - Sponsoring bi-weekly yoga classes offered at Appalachian Arts Alliance.
    - Sponsoring Appalachian Arts Alliance's Limitless Movement classes for students with Profound and Multiple Learning Disabilities and Autism Spectrum Conditions to help empower them and create inclusivity.
    - Sponsoring the annual "Kiss the Goat" bicycle race held in Perry County Park Trails system.
    - Contracting with certified instructor Kelli Hansel to provide physical activity classes monthly for participants of diabetes connections workshops and at the ARH/Perry Co. Diabetes Coaliton's annual "Diabetes Alert Day"

- **Health Screening Events**
  - ARH has organized health screening events broadly throughout the community since 2022. In total, over 1400 free health screenings have been provided at health fairs, retail stores, area festivals, workplaces, etc.
    - **907** stroke risk screenings and blood pressure checks completed.
    - **92** cardiac risk assessments completed
    - **65** cholesterol tests completed
    - **391** A1C tests completed
    - **27** FIT Kit referrals (colon cancer screenings)

Goal 5

Better communication and collaboration among community partners

Since 2022, Hazard ARH has **improved communication and collaboration** by:

- In order to break down silos, meet community health needs, and foster partnerships between health care organizations, ARH has **actively participated in 12 councils, coalitions, and boards** in Perry County since 2022. These groups work to better the health and wellness of Appalachians, but may also have community betterment and economic development goals
  - Perry County Senior Citizen's Board
  - CASA of Eastern KY
  - Hazard Rotary Club
  - AppalTrust Community Advisory Board
  - Perry County ASAP and UNITE councils
  - KY River District Cancer Council
  - Perry County Extension Office Advisory Council
  - Passport Quarterly QMAC
  - Perry County Diabetes Coalition
  - Perry County Wellness Coalition
  - KY River Health Consortium
  - Hazard Perry County Chamber of Commerce

Community Served by Hazard ARH

Hazard ARH defined its service area for this Community Health Needs Assessment by reviewing inpatient hospital discharge data for county of residence. From January 2022-September 2024, the majority of hospital discharges were residents of Perry (45.4%) and Knott (11.8%) Counties.

Secondary data for Perry County are presented in this section. Data are presented at the County, State, and National level (where possible). These data come from a variety of sources listed below each table, and serve as indicators for social, economic, and health conditions in Perry County. An infographic containing data on the Social Determinants of Health can be located in Appendix A.

Population

Population	Perry Co	Kentucky	US Overall
Population, 2024	26,739	4,588,372	340,110,988
Percent of Population Under 18 Years	23.4%	22.5%	21.7%
Percent of Population 65 Years+	18.5%	17.8%	17.7%
Percent of Population White	96.0%	86.7%	75.3%
Percent of Population Non-Hispanic Black	1.7%	8.8%	13.7%
Percent of Population American Indian & Alaska Native	0.2%	0.3%	1.3%
Percent of Population Asian	0.8%	1.8%	6.4%
Percent of Population Native Hawaiian/Other Pacific Islander	*	0.1%	0.3%
Percent of Population Hispanic or Latino	1.0%	5.0%	19.5%
Two or More Races	1.2%	2.3%	3.1%
Percent of Population Female	50.3%	50.4%	50.5%

Source: US Census, 2024 QuickFacts

Social and Economic Factors

Social and Economic Factors	Perry Co	Kentucky	US Overall
Percent Completed High School	79.5%	89%	89%
Bachelor's Degree or Higher	14%	27%	35%
Percent Unemployed	5.6%	4.2%	3.6%
Percent of People in Poverty	29.7%	16.4%	11.1%
Children in Poverty	37%	20%	16%
Number of Children in Single Parent Households	30%	25%	25%
Median Household Income	$42,500	$61,100	$77,700
Violent Crime Rate (per 100,000)	63.4	225.6	255.2
Child Care Cost Burden	30%	25%	28%
Food Insecurity Rate	21%	16%	14%

Source: US Census, 2024 QuickFacts, County Health Rankings (2025), U.S. News and World Report

Health Behaviors

Heath Behaviors	Perry Co	Kentucky	US Overall
Percent Adult Smoking	22%	18%	13%
Percent Adults with Obesity	41%	38%	34%
Percent of Physically Inactive Adults	29%	25%	23%
Adults (>65) with all Teeth Lost	27.8%		12.6%
Percent of Adults Receiving Flu Vaccination in the Last Year	25%	46%	48%
Teen Birth Rate (per 1,000)	39	24	16
Sexually Transmitted Infections per 100,000	109.6	406.8	495.0
Percent Excessive Drinking	15%	15%	19%
Number of Child Victims of Substantiated Abuse	206	17,917	-
Births to Mother who Smoked During Pregnancy	27.7%	12.6%	5%
Percent Driving Deaths with Alcohol Involvement	26%	26%	26%
Suicides Per 100,000 Population	10	18	14

Source: County Health Rankings (2025), CDC Places: Local Data for Better Health, KIDS Count Data Center (2020-2022) (2013)

Health Outcomes

Heath Outcomes	Perry Co	Kentucky	US Overall
Life Expectancy (years)	65.7	73	77
Percent Adults with Diabetes	13%	13%	10%
Percent Adults with Hypertension	39.8%	-	29.6%
Adults with current Asthma	12.0%	-	9.9%
Percent Fair to Poor Health	26%	20%	17%
Avg Number of Physically Unhealthy Days	5.5	4.5	3.9
Avg Number of Mentally Unhealthy Days	6.2	5.0	5.1
Percent Low Birth Weight	9%	9%	8%
Percent with a Disability, under Age 65	25%	13%	9%

Source: US Census, 2024 QuickFacts, County Health Rankings (2025), CDC Places Local Data for Better Health

Access to Care

Access to Care	Perry Co	Kentucky	US Overall
Primary Care Physicians	870:1	1,600:1	1,330:1
Mental Health Providers	120:1	320:1	300:1
Dentists	1,370:1	1,500:1	1,360:1
Preventable Hospital Stays per 100,000	4,986	3,336	2,666
Mammography Screening Rates	28%	43%	44%
Percent Uninsured	7%	7%	10%

Source: County Health Rankings (2025)

Physical Environment

Physical Environment	Perry Co	Kentucky	US Overall
Severe Housing Problems	9%	13%	17%
Severe Housing Cost Burden	9%	12%	15%
Driving Alone to Work	73%	78%	70%
Long Commute to Work – Driving Alone	28%	31%	37%
Broadband Access	87%	87%	90%
Access to Parks	12%	29%	51%
Homeownership	72%	68%	65%
Air Pollution – Particulate Matter	7.3	8.0	7.3

Source: County Health Rankings (2025)

Invasive Cancer Incidence Rates

Age-Adjusted Rate	Perry Co	Kentucky	US Overall
Total all sites (2017-2021)	538.1	513.7	444.4
Lung and Bronchus	124.3	84.5	53.1
Breast (Female)	117.0	129.2	129.8
Colon and Rectum	56.6	45.9	36.4
Urinary Bladder	24.0	21.7	18.8
Kidney and Renal Pelvis	18.2	21.4	17.3
Melanoma of the Skin	20.7	28.2	22.7

Source: National Cancer Institute: State Cancer Profiles

Hospital Utilization Data

The following data demonstrates the county of residence and payer mix of Hazard ARH inpatient hospital discharges from January 2022- September 2024.

Inpatient Hospital Discharges- Patient Origin*

Patient County	Inpatient Discharges	% of Total
Perry-KY	9,040	45.4%
Knott-KY	2,345	11.8%
Leslie-KY	1,513	7.6%
Breathitt-KY	1,431	7.2%
Letcher-KY	1,092	5.5%
Floyd-KY	987	5.0%
Harlan-KY	590	3.0%
Clay-KY	379	1.9%
Pike-KY	298	1.5%
Wolfe-KY	250	1.3%
Johnson-KY	233	1.2%
Owsley-KY	231	1.2%
Bell-KY	200	1.0%
Laurel-KY	199	1.0%
Lee-KY	179	0.9%
Knox-KY	150	0.8%
Morgan-KY	118	0.6%
Whitley-KY	97	0.5%
Magoffin-KY	90	0.5%
Mingo-WV	81	0.4%
Rockcastle-KY	72	0.4%
Jackson-KY	68	0.3%
Martin-KY	45	0.2%
Buchanan-VA	22	0.1%
Wise-VA	20	0.1%
Madison-KY	16	0.1%
Lawrence-KY	16	0.1%
Dickenson-VA	15	0.1%

Elliott-KY	14	0.1%
Claiborne-TN	13	0.1%
Estill-KY	10	0.1%
Montgomery-KY	10	0.1%
Total	**19,898**	**100%**

**Counties of residence accounting for >0.01% of the total are not listed. Numbers are still included in the total.*

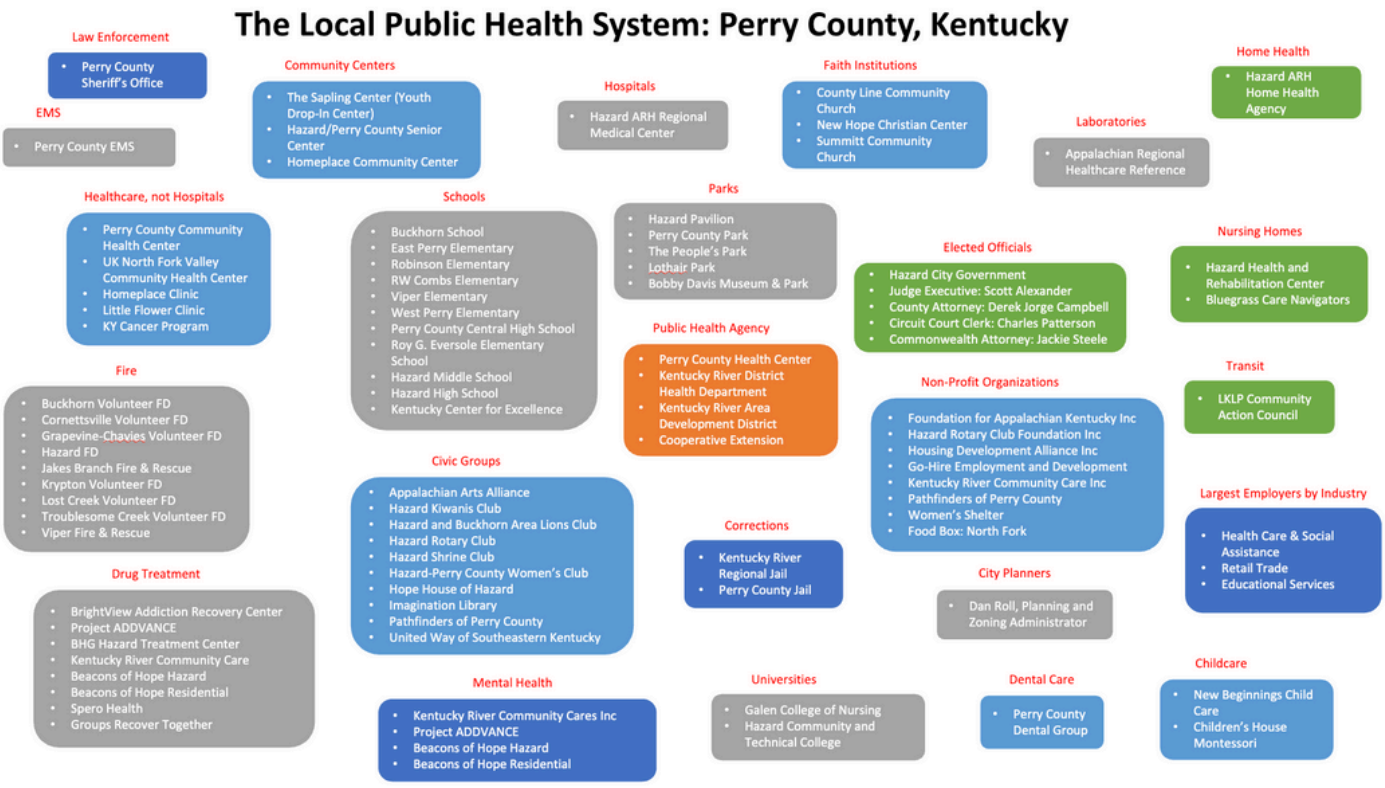
Inpatient Hospital Discharges- Payer Mix

Payer Type	Inpatient Discharges	% of Total
Medicare (Excluding Medicare Managed Care)	4,322	21.7%
WellCare of Kentucky Medicaid Managed Care	4,265	21.4%
Medicare Managed Care	3,376	17.0%
Commercial- Anthem Health Plans of KY HMO Plan	1,765	8.9%
Commercial- Anthem Health Plans of KY PPO Plan	1,239	6.2%
Humana Medicaid Managed Care	657	3.3%
Other Facility	575	2.9%
Anthem Medicaid Managed Care	573	2.9%
Passport Medicaid Managed Care	525	2.6%
Aetna Better Health of KY Medicaid Managed Care	521	2.6%
Tricare (Champus)	495	2.5%
In State Medicaid	479	2.4%
United Healthcare Medicaid Managed Care	350	1.8%
Self Pay	180	0.9%
Commercial-Other	102	0.5%
Out of State Medicaid	95	0.5%
Black Lung	90	0.5%
Workers Compensation	70	0.4%
Commercial- Aetna Health HMO Plan	68	0.3%
Commercial- United Healthcare POS Plan	53	0.3%

Auto Insurance	37	0.2%
Commercial- Aetna Health PPO Plan	19	0.1%
Commercial- Cigna Health & Life FFS Plan	15	0.1%
ChampVA	9	0.0%
VA	7	0.0%
Care Source KY Commercial Plan	6	0.0%
Commercial- Humana PPO Plan	5	0.0%
Total	**19,898**	**100%**

Organizing Community Partners

Collaboration among organizations is an essential component of the CHNA process and community health improvement plan. One tool that can be utilized to map organizations that may influence health in the community is the Local Public Health Schematic. The Team Up team collaborated with local residents and members of the Steering Committee to produce a local public health schematic, custom to Perry County. An overview of this schematic can be seen below, see Appendix B for a larger font version.



Perry County CHNA Steering Committee

Community Health Needs Assessment (CHNA) steering committees typically include representatives from public health agencies, local government, community organizations, healthcare providers, academic institutions, and members of the community, especially those who serve or represent medically underserved, low-income, or minority populations. The steering committee plays an essential role in the CHNA process by providing expert input, aiding in community survey and focus group data collection, interpreting community results, and formulating an effective implementation plan.

Steering committee members were recruited by Hazard ARH leadership in late summer of 2024. On September 4, 2024, the group gathered to discuss the CHNA process, provide their view of health needs for clients they serve, and plan survey dissemination and focus groups. On April 2, 2025 and after months of data collection, the Steering Committee met again for their final meeting (image below). The group reviewed data and collaboratively recommended priority health needs for Hazard ARH to address.

Perry County CHNA Steering Committee

Steering Committee Members

Name	Organization Represented
Melissa Slone	KY River District Health Department
Nicole Smith	ARH
Kathy Hall	KY River District Health Department
Sherrie Stidham	KY River District Health Department
Jennifer Weeber	Community Farm Alliance
Ashley Teague	Kentucky Cancer Program
Jenny Combs	Celebrate Recovery
Kelsey Sebastian	Perry Co. Extension Office FCS Agent
Zack Hall	Perry Co. Foundation
Chad Conway	Knott Co. Extension Office Ag Agent
Jenny Williams	Professor, HCTC
Tonnie Walters	Passport by Molina Health
Ruby Adams	KRCC Sapling Center
Carole Frazier	KY Homeplace
Emily Ison	LMU
Anita Shepherd	Perry Co. Schools FRYSC
Pam Cornett	UK Dental Outreach Team
Holly Wooten	Gear UP
Kelly Dean	Spark Ministries/ Celebrate Recovery
Sheila Leason	Spark Ministries/ Celebrate Recovery

Community Focus Groups

After the initial steering committee meeting, 4 focus groups were held to gain valuable feedback from community members and residents. Community members were asked questions regarding health challenges, barriers to accessing healthcare, health behaviors, and community highlights. Discussion in focus groups is fairly free flowing and open-ended, with Team Up staff noting recurring themes and the most pressing issues brought forth by participants.

Hazard ARH hosted forums with:

- Domestic Violence Shelter Staff and Program Participants
- Perry County Wellness Coalition
- Hazard LKLP Staff and Headstart Parents
- Kentucky River Health Consortium

Sample Focus Group Discussion Questions

"What are your community's biggest health challenges?"

"Why do you think people in your community don't go to the doctor?"

"Are there barriers to accessing healthcare in your community?"

"What health behaviors do you see in your community that concern you?"

"What other concerns do you have?"

Focus Group Results

A qualitative thematic analysis was performed utilizing community forum responses. Recurring challenges and themes were isolated by each forum question (see table 2) and the resulting key findings are presented below:

QUESTION 1: COMMUNITY HEALTH CHALLENGES

Finding 1.1: Basic Needs

- Lack of transportation
- Cost of insurance
- Cost of living
- Poverty
- Food insecurity
- Low access to healthy foods
- Low high school graduation rates
- Lack of living wage jobs
- Lack of social activities
- Low literacy rates

Finding 1.2: Mental & Physical Conditions

- Poor mental health
- Flood - impacts of disaster
- Diabetes
- Cancer
- Obesity
- Tooth loss

"Life is expensive for all of us, no matter how much we make."

QUESTION 2: BARRIERS TO HEALTHCARE

Finding 2.1: Quality of Care

- Fear of provider discrimination
- Poor quality EMS
- Lack of compassionate caregivers
- Behavioral health stigma
- Cultural attitudes
- Lack of emphasis on prevention

Finding 2.1: Resource Shortages

- Long wait times
- Transportation
- Lack of WIFI for telehealth
- Working hours vs. clinic hours
- Travel distance
- Lack of specialists (vision, dental)

Focus Group Results

QUESTION 3: HEALTH BEHAVIORS

Finding 3.1: Substance Use

- Substance use
  - Drugs
  - Alcohol
- Tobacco use
- Nicotine addiction, including vaping
- Community reprecussions of SUD (grandparents raising grandkids, lack of workforce)

Finding 3.2: Impacts of Resource Shortages

- Stress
- Lack of well-paying jobs
- Lack of SDOH resources
- Lack of exercise opportunities
- Lack of behavioral health resources
- Feelings of apathy or hopelessness

QUESTION 4: ADDITIONAL CONCERNS

Finding 4.1: Additional Resources Needed

- Childcare
- Activities for kids
- Autism and special needs services
- Foster care
- Affordable vet care
- Legal representation
- Education
- Dementia & Alzheimer's services
- Self-sufficiency taught in schools
- Diversity in mental health care
- Flood resources
- Broadband
- Cancer screenings
- Fresher, affordable produce

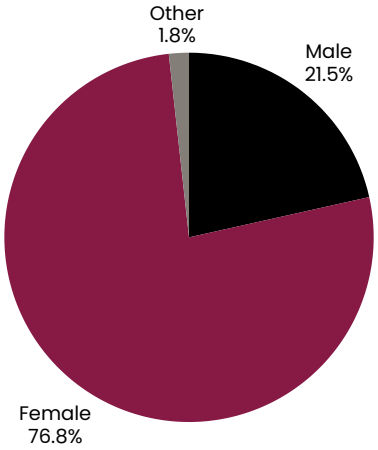
Community Survey Results

The community survey was developed and distributed online and via paper at various community events from October 2024-January 2025. Responses are anonymous. For the full survey instrument, see Appendix C.

Respondent Demographics

n=423

Gender



Education

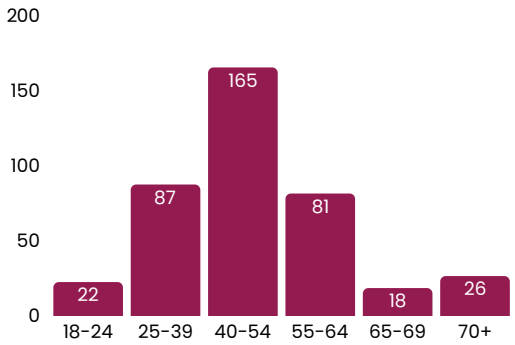
22% High School

5% Technical School

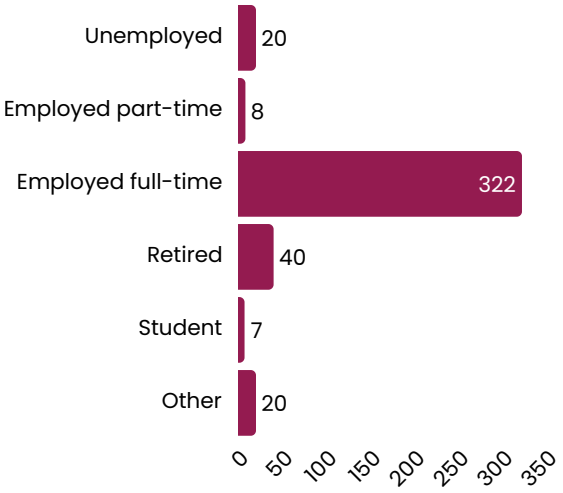
68% College or Above

6% Other

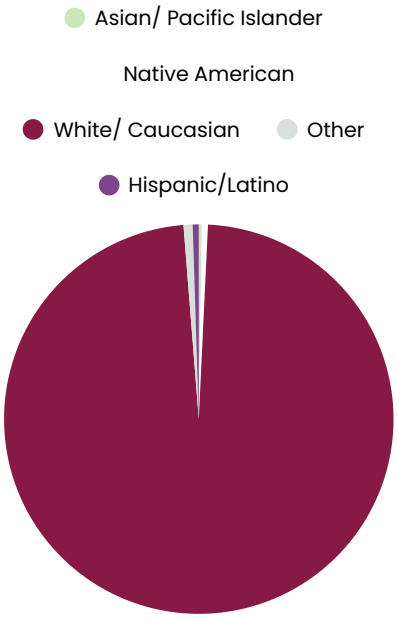
Age



Employment Status

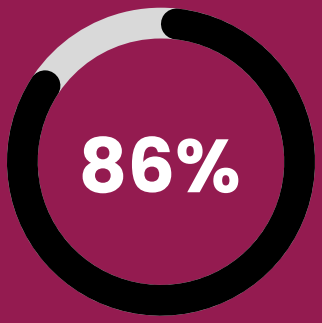


Race/ Ethnicity

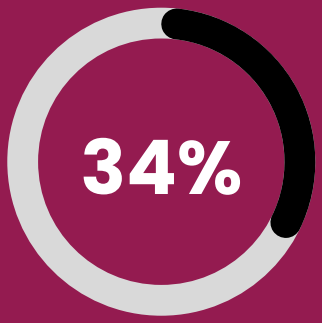


Community Survey Results

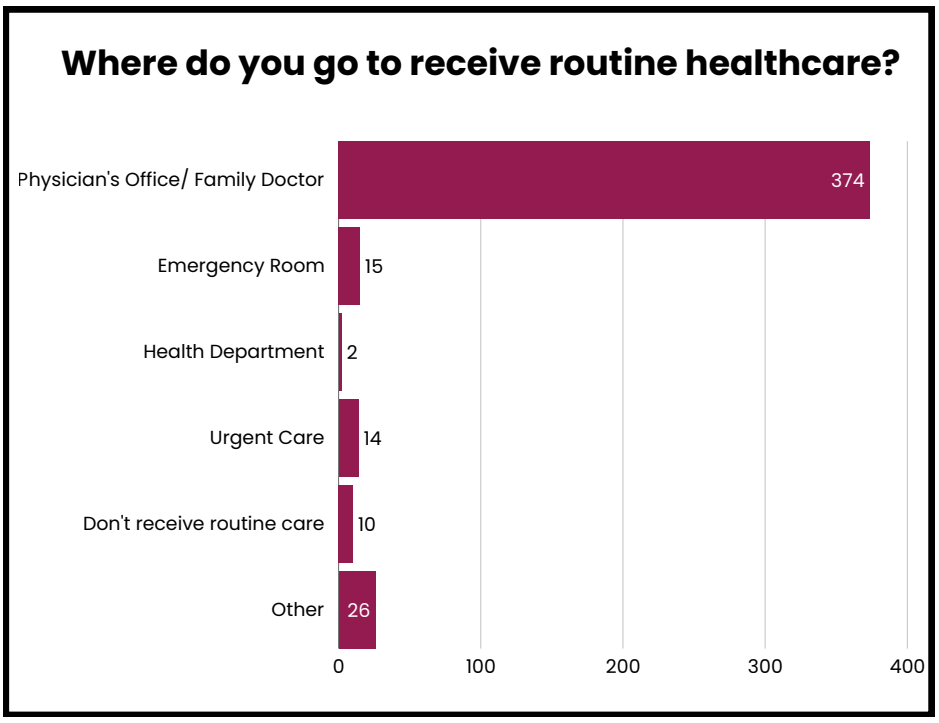
Are satisfied with the ability to access healthcare services in Perry County.



Regularly receive preventive services such as vaccinations, screenings, and checkups.



Have delayed healthcare due to lack of money or insurance.

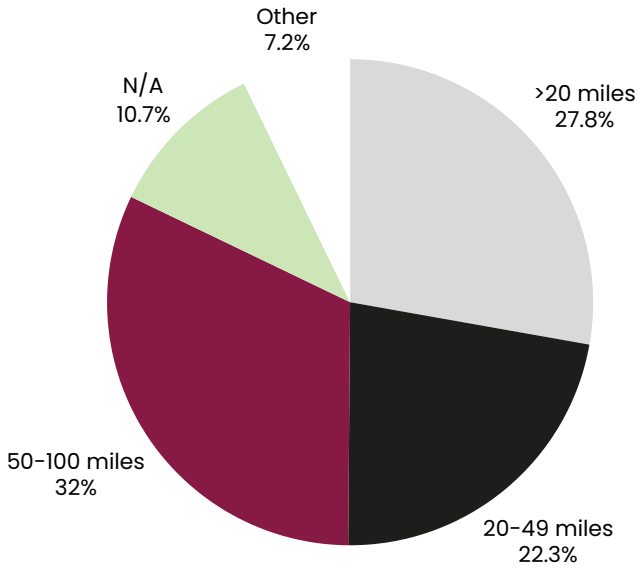


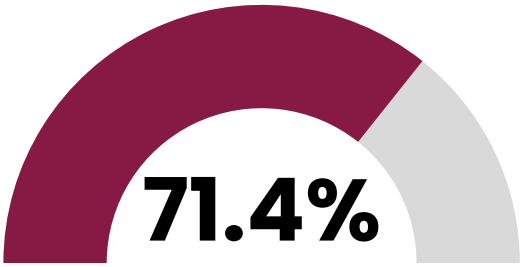
Top 5 barriers to receiving routine healthcare:

1. No barriers
2. Only visit the doctor when something is seriously wrong
3. Cannot take off work
4. Physician hours of operations
5. Months long wait times

Community Survey Results

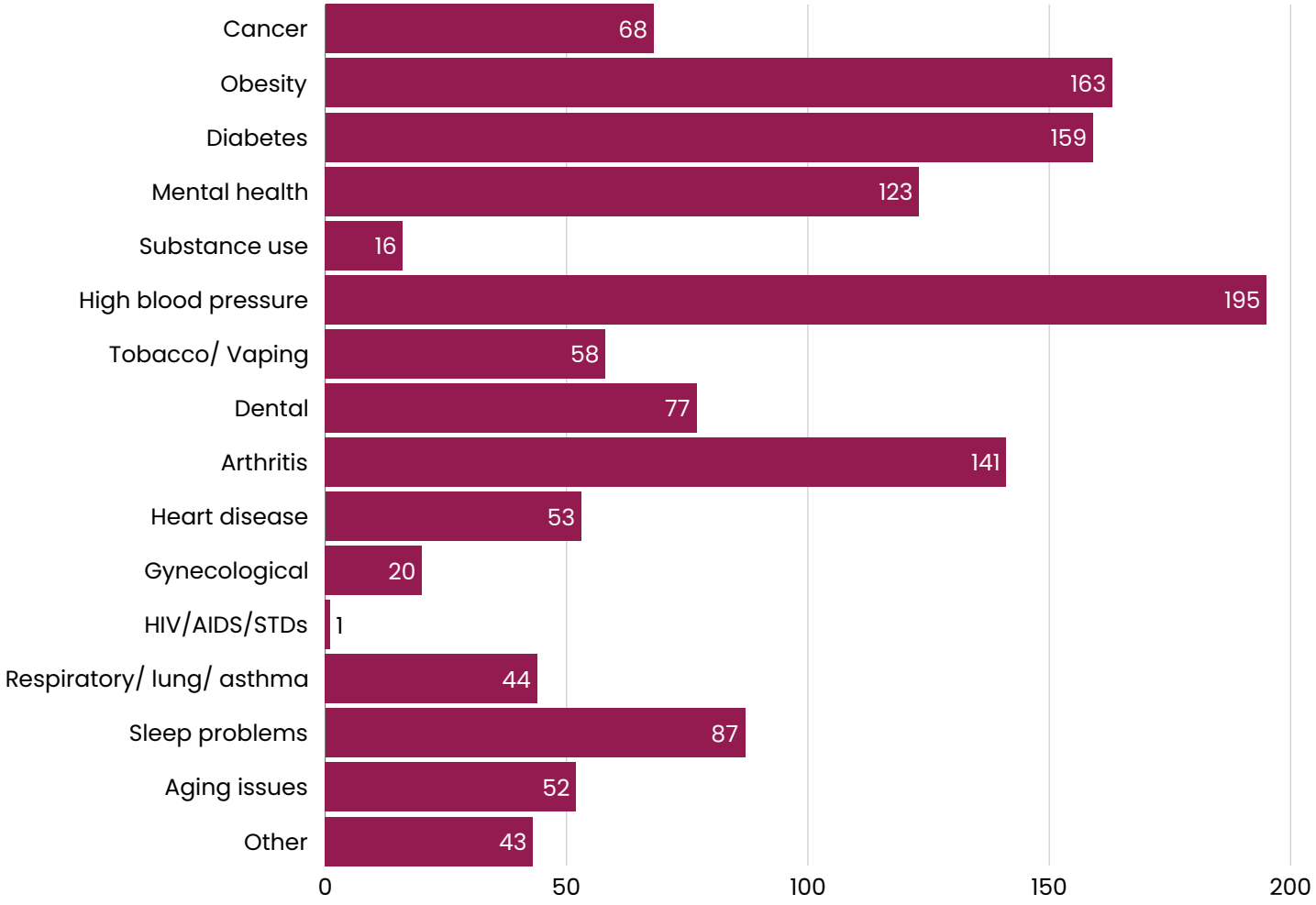
How far do you or your household travel to see a specialist?





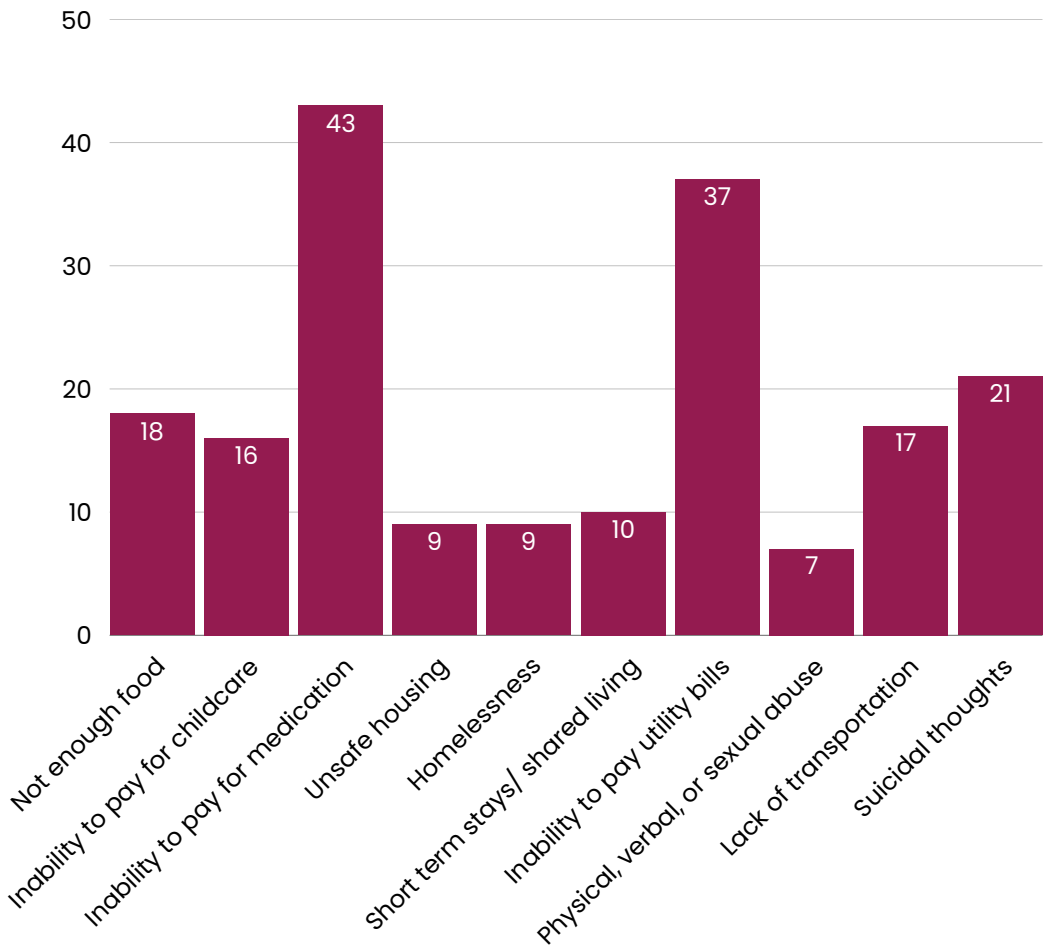
Are satisfied with the availability of mental health services in Perry County.

Top 3 health challenges you/ your household face:

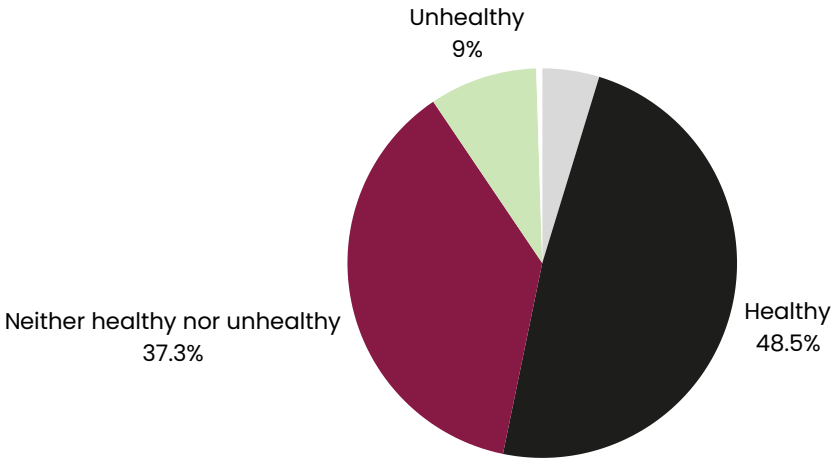


Community Survey Results

Have you or your household faced any of these issues in the past year?



How would you rate your overall health?

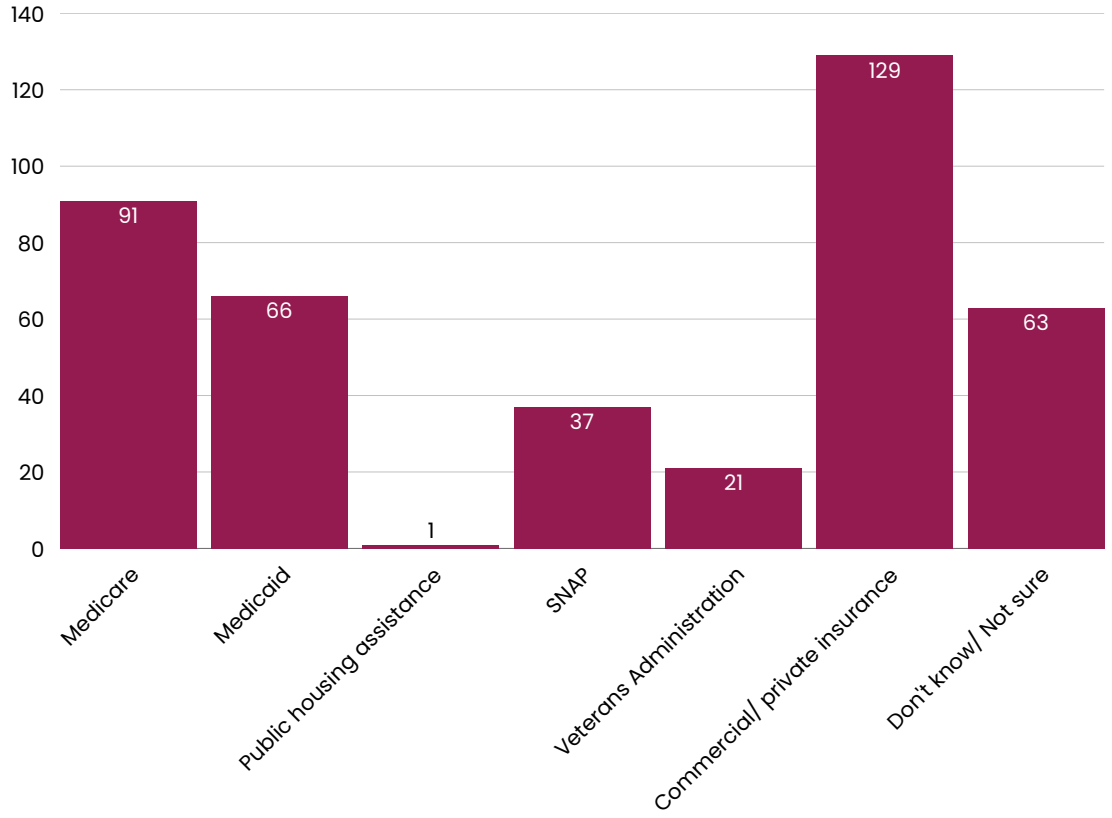


Top 3 risky behaviors you see in your community:

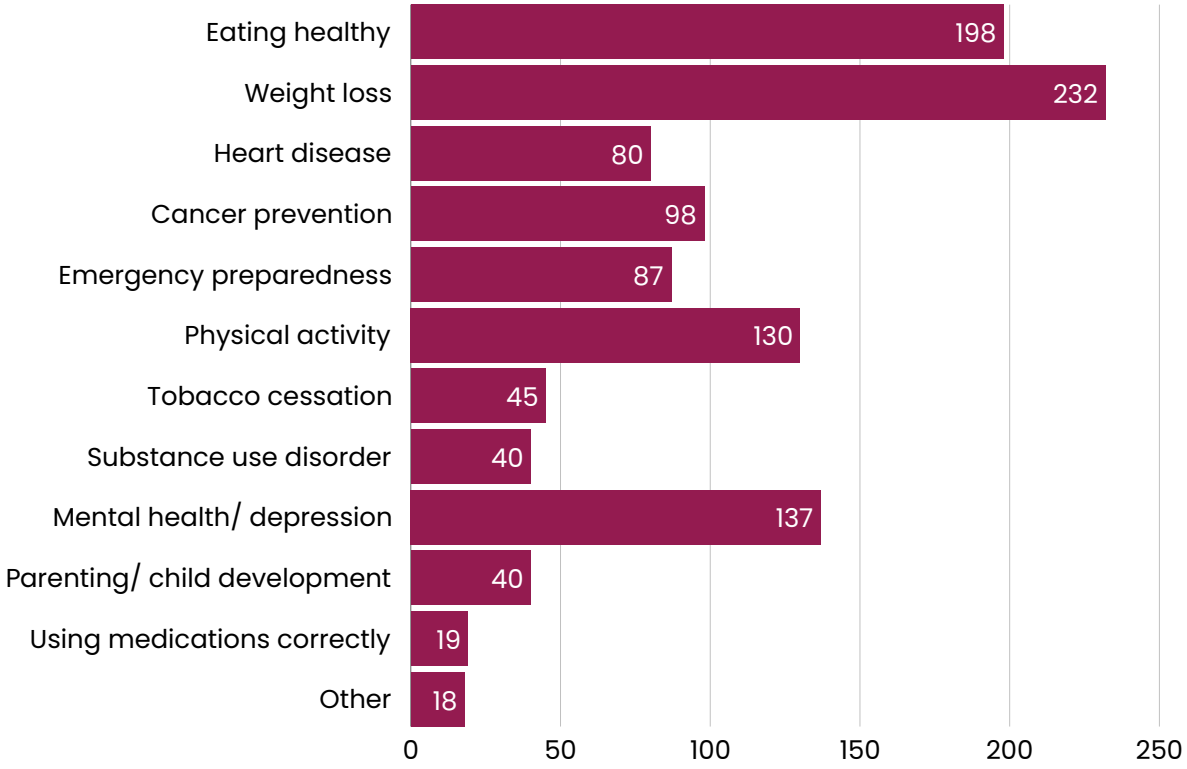
1. Drug use (281)
2. Poor eating habits (217)
3. Tobacco or vaping use (215)

Community Survey Results

Are you or members of your household currently eligible for any of the following services?

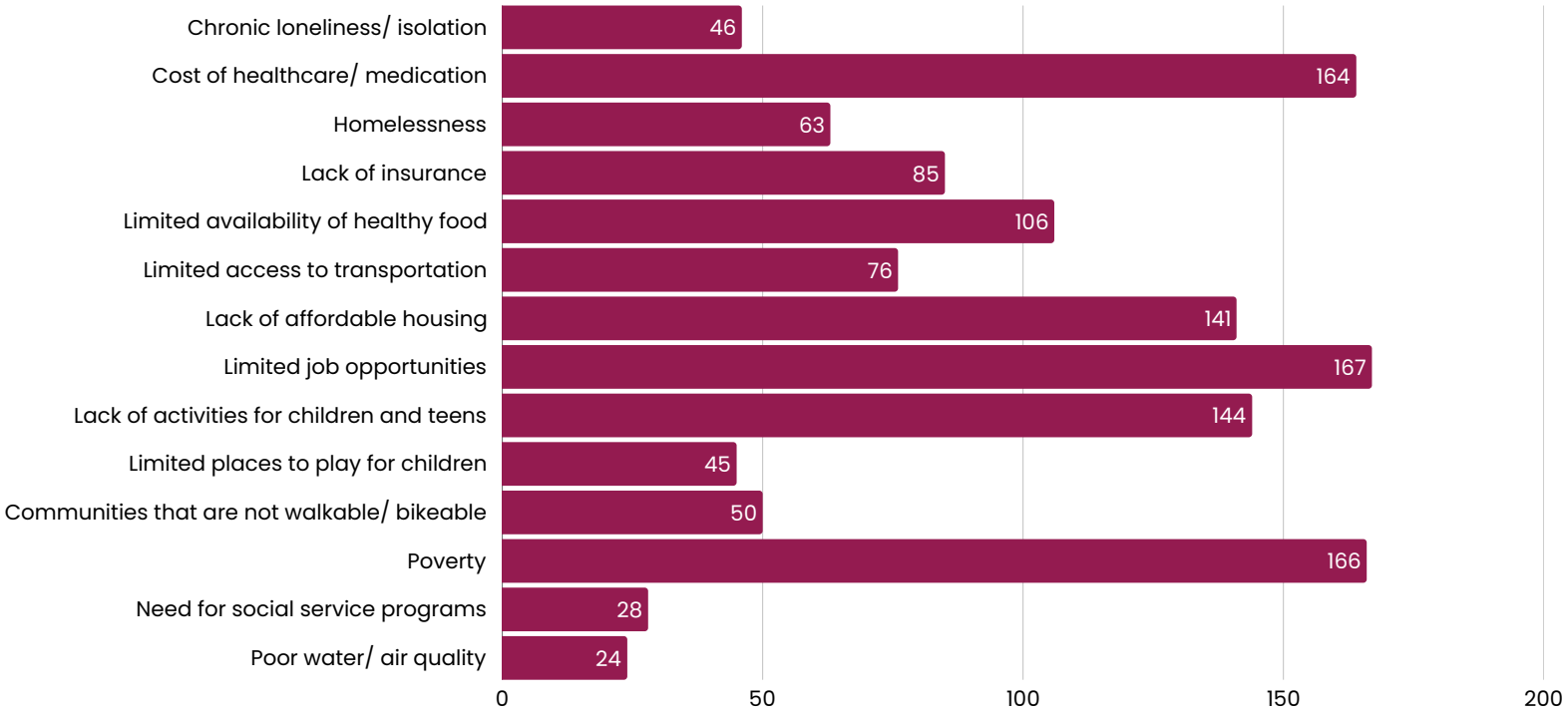


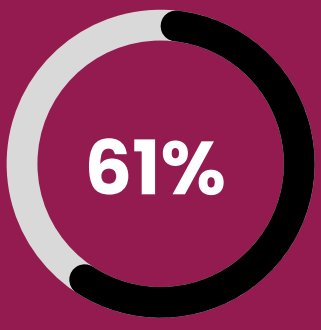
Health related topics respondents are interested in learning more about:



Community Survey Results

Most important problems related to quality of life & environment in Perry County:





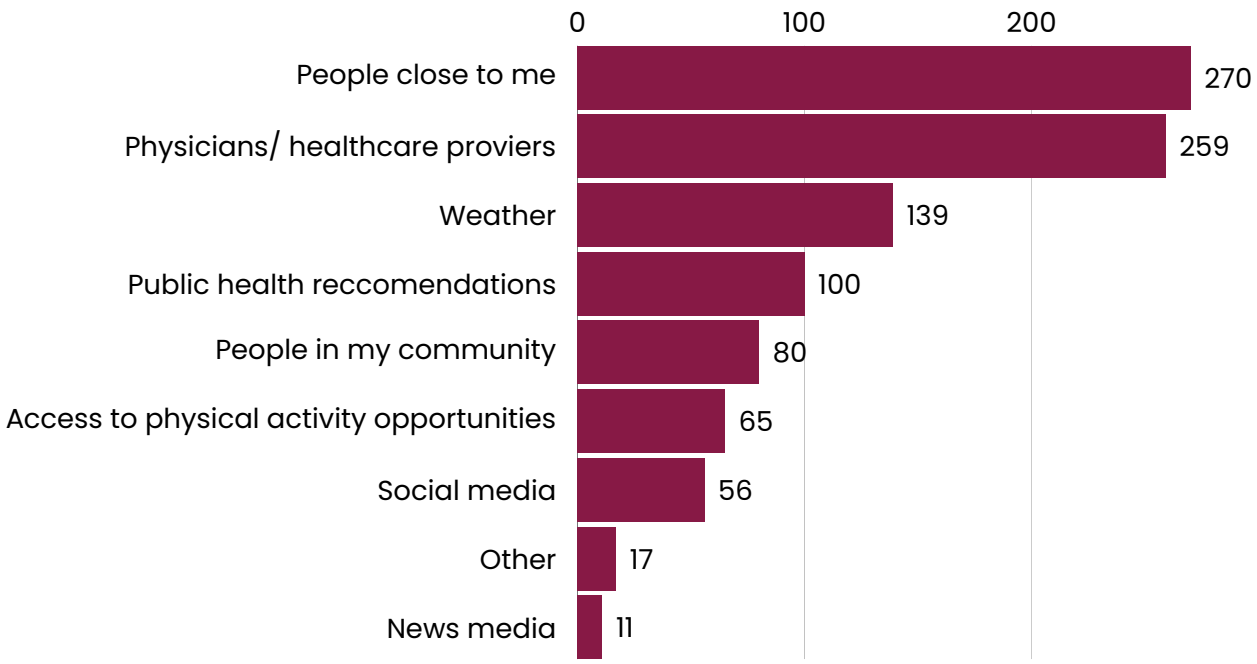
Have had a dental exam in the past year.

Have had a routine checkup in the past year.

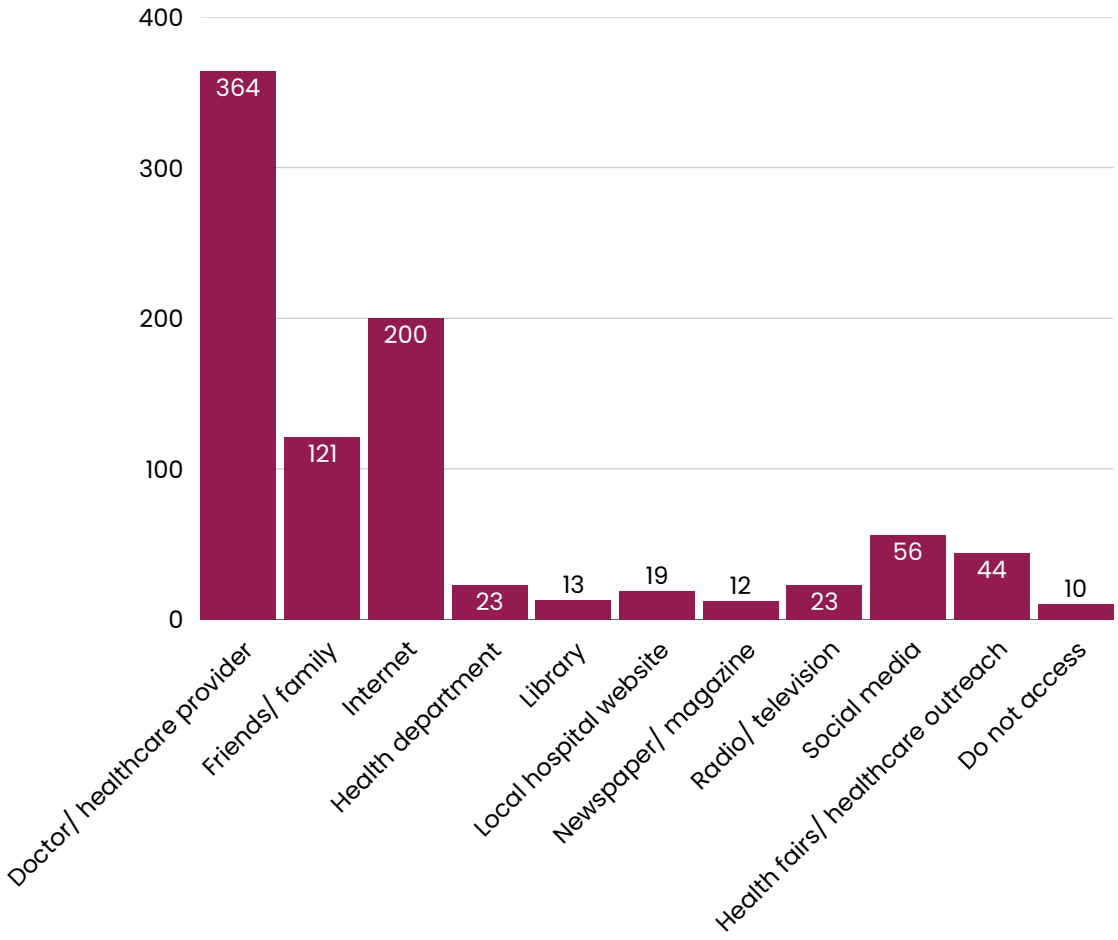
Believe mental illness is a medical condition.

Community Survey Results

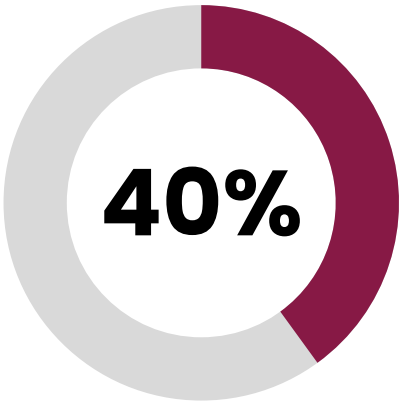
What factors influence your health choices?



Where do you get most of your healthcare information?

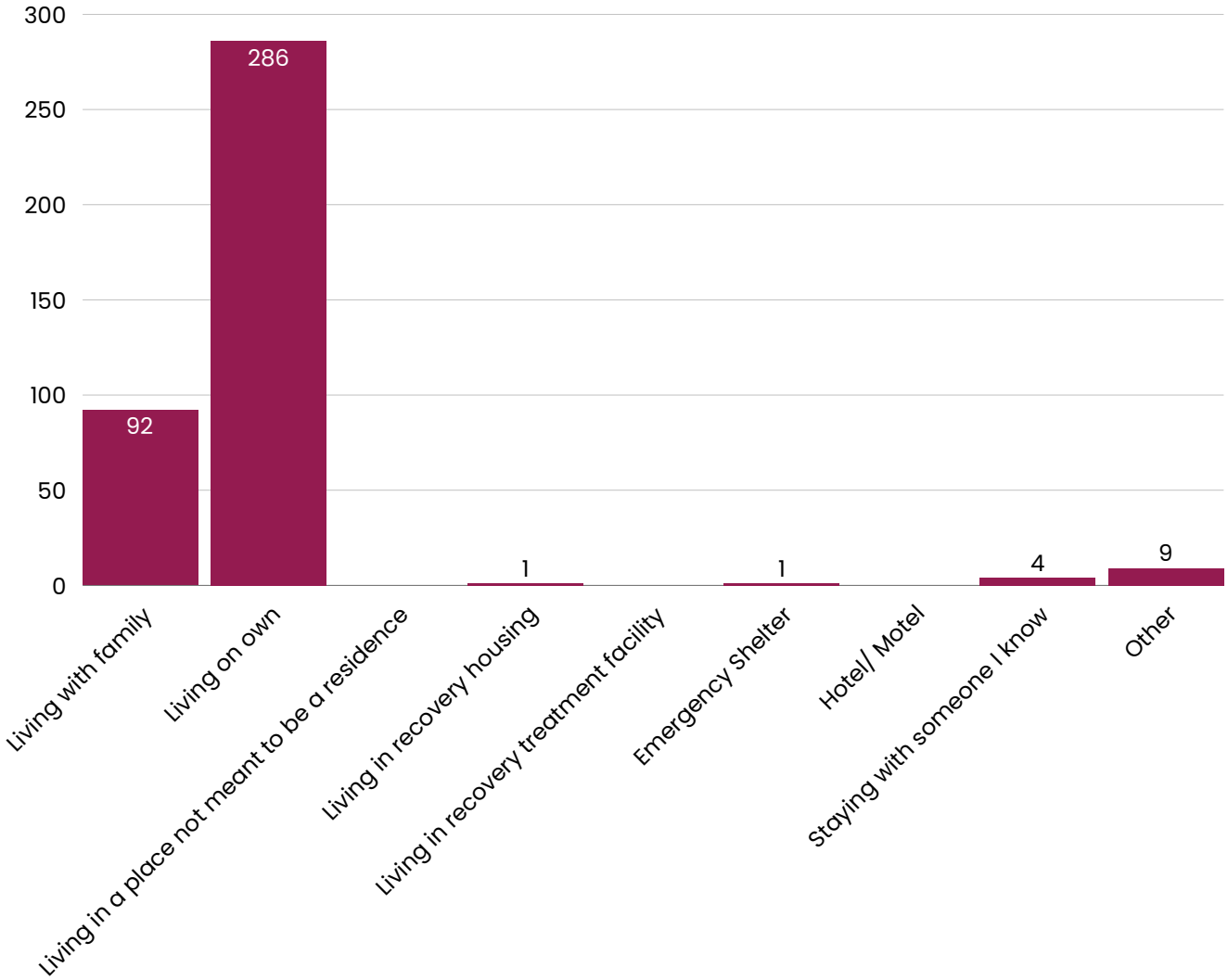


Community Survey Results



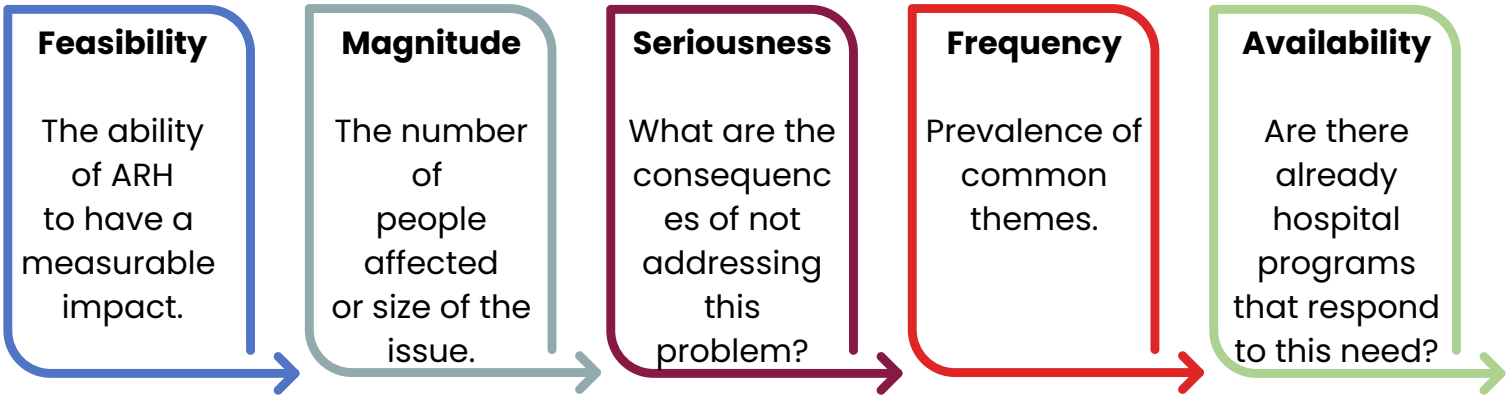
Have been told by a healthcare professional that they have high cholesterol.

What is your current living situation?



Health Needs Prioritization

After primary and secondary data were presented to the CHNA Steering Committee, the group set to prioritizing the top needs using the criteria below.



Through this process, the Steering Committee synthesized and identified the top 5 health needs facing their community to be:

1. **Poverty and Meeting Basic Needs**
2. **Mental Health**
3. **Healthy Lifestyles and Preventive Health**
4. **Access to Healthcare**

Implementation Plan

Hazard ARH leadership collaborated with the Community Development Department to define the following goals and strategies to address the identified health needs.

Goal: Assist patients, employees, and community in meeting thier basic needs and escaping poverty

Key Strategies

- Grow the number of patients screened in social drivers of health (homelessness, food insecurity, abuse) upon intake
- Continuing the in-facility food pantry program, which provides boxes of shelf-stable food to patients that screen as food insecure in our hospital or clinics
- Supporting community organizations that work to meet social or emergent needs, such as Red Cross, homeless shelters, domestic violence shelters
- Provide basic needs during disaster relief
- Promoting ARH workplace initiatives meant to assist employees and build communities from within:
  - Employee Assistance Program
  - Career pathway and training programs
- Refer patients to community and social services that can assist them with homelessness, utility assistance, food, etc. Creation of referral guides where they are lacking
- Hosting employee-led food drives, coat drives, and animal shelter donation drives
- Provide primary care in outlying communities with use of ARH Mobile Clinic, thereby assisting patients with transportation barriers
- Consider employing Community Health Worker to assist patients with basic needs and decrease readmissions

Goal: Address mental health issues through increased services, community education, and reduction of stigma

Key Strategies

- Grow behavioral health services, including:
  - Recruitment of additional therapists
  - Growth of recovery clinic
  - Consider the addition of an intensive outpatient treatment program
  - Renovate and expand 1st and 3rd floors of behavioral health unit, increasing number of inpatient beds
- Provide mental health programming targeting youth and parents/caregivers, such as:

Key Strategies	- Alcohol and SUD prevention - Suicide prevention and warning signs - Depression, anxiety, and coping strategies - Youth Mental Health First Aid - Social media impact - Targeted programs for grandparents raising grandchildren / relative care - Continue Mental Health First Aid trainings on-site for staff and community to include law enforcement and first responders - Provide resources and mental health services for staff to include: - Online counseling services - Workplace stress events - Renovate break rooms to wellness rooms, incorporating stress relief activities and welcoming, restful environments - Provide mental health-related community screenings and events such as: - Positive affirmation events targeting children and employees. Participants at facilities and on walking paths use sidewalk chalk to write encouragement and raise awareness of the importance of mental health - Anxiety and depression screenings - Educational events for area employers with mental health topics - Potential partnership with Kentucky River Health Department to provide mental health community programming

Goal: Reduce the incidence and impact of disease by enhancing preventive care and offering healthy lifestyle education

Key Strategies	- Host events that specifically promote cancer awareness, teach about early detection, and encourage preventative lifestyles. Examples include: - Colon cancer educational or screening events where take-home colon cancer screening kits (FIT kits) were offered in partnership with Kentucky Cancer Link

Key Strategies	◦ Community presentations about early detection of lung cancer and low dose CT screenings provided by the ARH Lung Cancer Screening Program Manager. Include annual Lung Cancer Screening Days ◦ Events educating about the early detection of breast cancer and importance of mammograms ◦ Targeted skin cancer events and screenings • Nutrition education ◦ Expand in-school programming to include education about nutrition, especially on sugary and overly-caffeinated drinks (ReThink Your Drink) ◦ Grow partnership with UK Extension Service, expanding cooking classes to outlying communities, perhaps within faith-based community ◦ Promote healthy cooking with ARH dietitian approved recipes at local farmer's markets and community events ◦ Provide individual and group-based prevention and education efforts through ARH Diabetes Education • Physical activity opportunities ◦ Partner with local fitness instructors and community organizations to host health and wellness events, free fitness classes, and experiences that promote healthy families ◦ Offer gentle chair yoga classes throughout community ◦ Partner with Perry County Farmers Market to implement an incentivized walking program providing FM vouchers for participants ◦ Monetarily support events that encourage physical activity – bike races, community health and wellness days, 5k events. ◦ Provide Free Swim Days at the local public pool, encouraging physical activity and providing health education at each session ◦ Explore opportunities for physical activity programming in partnership with the City of Hazard's indoor pavilion (walking track, fitness center, pool, pickle ball) • Screenings and education about obesity-related diseases ◦ Educate about/provide screenings related to obesity-related diseases broadly throughout the community – heart disease, stroke, type 2 diabetes ▪ Explore a partnership with LKLP to provide educational programming and free screening opportunities for parents of children enrolled in Head Start ▪ Stroke Programming – Strike Out Stroke, TACO-bout stroke cooking classes, Brain Protector programs ▪ Cardiac education and cardiac risk assessments ▪ Free screenings as possible throughout the community to include A1C, cholesterol, BP, stroke risk, etc.

Goal: Grow services to better provide care and limit patient travel

Key Strategies	• Pilot a Lifestyle Medicine Service Line in the Hazard Community. Lifestyle medicine is a medical specialty that uses therapeutic lifestyle interventions as a primary modality to treat chronic conditions including cardiovascular diseases, type 2 diabetes, and obesity. Lifestyle medicine applies evidence-based, whole-person, prescriptive lifestyle change to treat and often reverse such conditions. The six pillars of lifestyle medicine are a whole-food, plant-predominant eating pattern, physical activity, restorative sleep, stress management, avoidance of risky substances and positive social connections
	• Expand Robotic Surgery program with new equipment to include:
	  ◦ Implementation of DiVanci DV5 robot
	  ◦ Implementation of Ion Robotic Bronchoscopy
	• Add women's health services / OBGYN to include 1 additional provider and two APRNs
	• Renovate hospital departments to increase number of beds and provide better patient care:
	  ◦ Labor and Delivery
	  ◦ Operating Room
	  ◦ Med/Surg – 20 additional beds
	  ◦ Inpatient Behavioral Health
	• Explore recruitment for needed service lines including psychiatry, ENT, interventional cardiology, medical cardiology, hematology/oncology, dermatology, endocrinology, rheumatology, family medicine, and neurospine.

Communication and Distribution Plan

Nonprofit hospitals are required by the IRS to both communicate about and publicly distribute their Community Health Needs Assessments (CHNAs) and related Implementation Strategies (IS) to ensure transparency, community engagement, and compliance with federal regulations. To meet best practices and go beyond minimum requirements, ARH will focus on accessibility, outreach, and engagement. Here's how:

- Posting prominently on our ARH website
- Sharing with community partners
- Sharing with members of the steering committee and focus group participants
- Presenting implementation plans in area coalitions, councils, and boards
- Promoting on social media and hospital communications
- Incorporating CHNA in grant proposals and reports
- Providing progress reports and annual updates to the IRS and ARh Board of Trustees

Appendix A

Social Determinants of Health Infographic

PERRY COUNTY, KENTUCKY

POPULATION: 27,133

HEALTHY PEOPLE 2030 GOALS AND SOCIAL DETERMINANTS OF HEALTH METRICS

ECONOMIC STABILITY: HELP PEOPLE EARN STEADY INCOMES THAT ALLOW THEM TO MEET THEIR HEALTH NEEDS

1	Idle Youth: Perry County 0% | Kentucky 3% | United States 2.4%
2	**Poverty Rate:** Perry County 27% | Kentucky 16.5% | United States 11.5%
3	**Population 16+ in Labor Force:** Perry County 48.8% | Kentucky 59.2 % | United States 63%
4	Single Parent Households: Perry County 30.42% | Kentucky 31%
5	Households Spending at Least 30% Of Income on Housing: Perry County 19% | Kentucky 23.9% | United States 22.8%
6	Population Without Access to Large Grocery Store: Perry County 1.1% | Kentucky 19.8% | United States 21.7%
7	**Children Living in Food Insecure Households:** Perry County 20.8% | Kentucky 15.2% | United States 16%

EDUCATION ACCESS AND QUALITY: INCREASE EDUCATIONAL OPPORTUNITIES AND HELP CHILDREN AND ADOLESCENT DO WELL IN SCHOOL

1	Students Graduating High School In 4 Years: Perry County 91% | Hazard Independent 95.5% | Kentucky 91.4%
2	High School Graduates Enrolled in Post-Secondary Education Within 6 Months of Graduation: Perry County 65.03% | Hazard Independent 65.65% | Kentucky 45.33%
3	8th Grade Students with Proficient or Distinguished on Reading State Assessment: Perry County 43% | Hazard Independent 54% | Kentucky 45%
4	**8th Grade Students with Proficient or Distinguished on Math State Assessment:** Perry County 29% | Kentucky 37%
5	**Kindergarteners Ready to Learn:** Perry County 34% | Kentucky 44%
6	**Students With an Individualized Education Plan (IEP):** Perry County 26% | Kentucky 15%
7	**4th Grade Students with Proficient or Distinguished on Reading State Assessment:** Perry County 45% | Kentucky 47%
8	4th Grade Students with Proficient or Distinguished on Math State Assessment: Perry County 49% | Kentucky 42%

HEALTH CARE ACCESS AND QUALITY: INCREASE ACCESS TO COMPREHENSIVE HIGH QUALITY HEALTH CARE SERVICES

1	Adults with Recent Doctor Visit for Routine Checkup: Perry County 73.9% | United States 71.8%
2	Children Under 19 with Health Insurance Coverage: Perry County 96% | Kentucky 96.1%
3	Number of TBI Emergency Department Cases: Perry County 37 | Kentucky 11,249
4	Adults With Recent Preventative Care Visit: Perry County 81% | Kentucky 80.7% | United States 74.6%
5	Lung and Bronchus Incidence per 100,000 Population: Perry County 127.7 | Kentucky 84.4 | United States 54

6	**Mammography Use Among Women Aged 50-74:** Perry County 67% | United States 77.8%
7	STIs per 100,000: Perry County 146.8 | Kentucky 410.3 | United States 495.5
8	Colon and Rectum Cancer Incidence per 100,000: Perry County 65.1 | Kentucky 194.4 | United States 156.6
9	Children Enrolled in Medicaid or KY Children's Health Insurance Program Who Received Dental Services in Kentucky: Perry County 56% | Kentucky 51%
10	Population Under 65 Without Health Insurance: Perry County 6.4% | Kentucky 6.7% | United States 9.3%
11	Population With Limited English Proficiency: Perry County 0-3.6% | Kentucky 2.1% | United States 9%

NEIGHBORHOOD AND BUILT ENVIRONMENT: CREATE NEIGHBORHOODS AND ENVIRONMENTS THAT PROMOTE HEALTH AND SAFETY

1	**Violent Crime Rate per 100,000 Population:** Perry County 63.4 | Kentucky 225.6 | United States 204.5
2	Population with Access to Broadband: Perry County 97.8% | Kentucky 97% | United States 96.7%
3	**Percent of County Using SNAP:** Perry County 25.8% | Kentucky 16.3
4	**Air Quality Hazard:** Perry County 0.54 | Kentucky 0.44 | United States 0.34
5	Vehicle Crash Fatality Rate per 100,000: Perry County 36 | Kentucky 51.5 | United States 17.5
6	**Population Within ½ Mile of Walkable Destinations:** Perry County 11.4% | Kentucky 33.9% | United States 34%
7	Walkability Index Score: Perry County 5.6 | Kentucky 7.2 | United States 6.1
8	Asthma Prevalence Among Adults 18+: Perry County 12.1% | Kentucky 11.5% | United States 9.7%
9	**Adult Smoking Rate:** Perry County 29.4% | Kentucky 23.9% | United States 24.3%
10	Deaf and Hard of Hearing Population: Perry County 4,241 | Kentucky 705,533
11	**Prevalence of People with Disabilities:** Perry County 31.3% | Kentucky 21.1%

SOCIAL AND COMMUNITY CONTEXT: INCREASE SOCIAL AND COMMUNITY SUPPORT

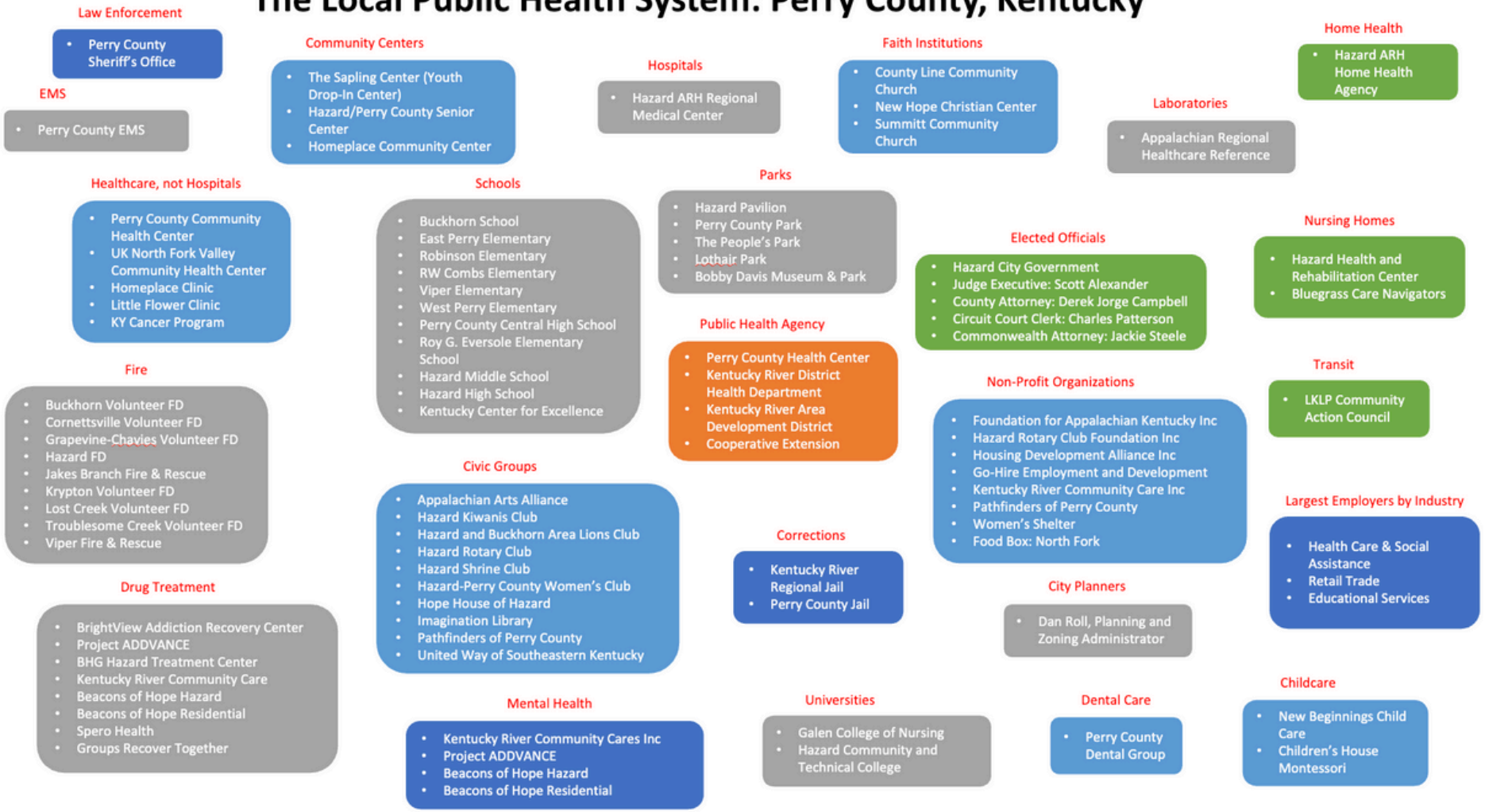
1	Youth Incarcerated in the Juvenile Justice System per 1,000 Youth: Perry County 2.3 | Kentucky 13.2
2	**Census Self- Response Rate:** Perry County 56.7% | Kentucky 63.5% | United States 65.8%
3	Households With a Computer: Perry County 89.6% | Kentucky 90.2% | United States 93.1%

TEAM UP
A Public Health Academic Practice Collaborative

Appendix B

Local Public Health Schematic

The Local Public Health System: Perry County, Kentucky



Appendix C

Survey Instrument

Appalachian Regional Healthcare

ARH 2024 CHNA Survey

Please take 10-15 minutes to complete this survey. Please do not include your name anywhere. All responses will remain anonymous.

Q1. Please select the ARH facility closest to your home:

- ☐ ARH Our Lady of the Way Hospital, Floyd Co. KY (1)
- ☐ Highlands ARH Regional Medical Center, Floyd Co. KY (2)
- ☐ McDowell ARH Hospital, Floyd Co. KY (3)
- ☐ Morgan County ARH Hospital, Morgan Co. KY (4)
- ☐ Paintsville ARH Hospital, Johnson Co. KY (5)
- ☐ Tug Valley ARH Regional Medical Center, Pike Co. KY (6)
- ☐ Barbourville ARH Hospital, Knox Co. (7)
- ☐ Harlan ARH Hospital, Harlan Co. KY (8)
- ☐ Middlesboro ARH Hospital, Bell Co, KY (9)
- ☐ Hazard ARH Regional Medical Center, Perry Co. KY (10)
- ☐ Mary Breckinridge ARH Hospital, Leslie Co. KY (11)
- ☐ Whitesburg ARH Hospital, Letcher Co. KY (12)
- ☐ Beckley ARH Hospital, Raleigh Co. WV (13)
- ☐ Summers County ARH, Summers Co. WV (14)

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

- ☐ Yes
- ☐ No

Q3. Do you regularly receive preventative services such as vaccinations, screenings, and annual checkups?

- ☐ Yes
- ☐ No

Q4. Where do you go to receive routine healthcare? Select all that apply.

- ☐ Physician's office/my family doctor
- ☐ Emergency room
- ☐ Health department
- ☐ Urgent care
- ☐ I do not receive routine healthcare
- ☐ Other. Please specify below:

  _____

Q5. Are there barriers that keep you from receiving routine healthcare? Select all that apply.

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

Q6. How far do you or anyone in your household travel to see a specialist?

- ☐ Less than 20 miles
- ☐ 20-49 miles
- ☐ 50-100 miles
- ☐ I do not receive routine healthcare
- ☐ Other: _____

Q7. Please select the TOP THREE **health challenges** you or anyone in your household face. Select only three.

- ☐ Cancer
- ☐ Obesity
- ☐ Diabetes
- ☐ Mental health issues
- ☐ Substance use disorder (alcohol/drugs)
- ☐ High blood pressure
- ☐ Tobacco use/vaping
- ☐ Dental issues
- ☐ Arthritis/joint pain
- ☐ Heart disease and stroke
- ☐ Gynecological issues
- ☐ HIV/AIDS/STDs
- ☐ Respiratory/lung disease/asthma
- ☐ Sleep problems
- ☐ Aging issues
- ☐ Other. Please specify below:

  _____

Q8. Have you or anyone in your household faced any of these issues in the past year?

- ☐ Not enough food to feed your family
- ☐ Inability to pay for childcare
- ☐ Inability to pay for medications
- ☐ Unsafe housing
- ☐ Homelessness
- ☐ Shared Living / Short term stays with friends/others
- ☐ Inability to pay utility bills
- ☐ Physical, verbal, or sexual abuse
- ☐ Lack of transportation
- ☐ Suicidal thoughts
- ☐ None of the above

Q9. Please select the TOP THREE **risky behaviors related to personal choices** you see <u>most</u> in your community. Select only three.

- ☐ Excessive alcohol use
- ☐ Poor eating habits
- ☐ Lack of exercise
- ☐ Child abuse and neglect
- ☐ Tobacco or vaping use
- ☐ Unsafe sex
- ☐ Drug use
- ☐ Distracted driving
- ☐ Domestic violence
- ☐ Other. Please specify below:

  _____

  _____

Q10. Have you or someone in your household delayed healthcare because of lack of money and/or insurance?

- ☐ Yes
- ☐ No

Q11. Are you or members of your household currently eligible for any of the following services? Select all that apply.

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

Q12. How would you rate your **overall health**?

- ☐ Very healthy / In excellent health
- ☐ Healthy
- ☐ Neither healthy nor unhealthy / Fair
- ☐ Unhealthy
- ☐ Very unhealthy

Q13. Are you satisfied with the availability of mental health services in your area (example: counselors, psychiatrists, etc.)?

- ☐ Yes
- ☐ No

  If no, why? _____

Q14. What could be done in your County to better meet your health needs?

Q15. Which health related topics would you be interested in learning more about? Select all that apply.

- ☐ Eating healthy
- ☐ Weight loss
- ☐ Heart disease
- ☐ Cancer prevention
- ☐ Emergency preparedness
- ☐ Physical activity
- ☐ Tobacco cessation
- ☐ Substance use disorder (alcohol and/or drugs)
- ☐ Mental health/Depression
- ☐ Parenting / Child development
- ☐ Using my medications correctly
- ☐ Other. Please specify below:

_____

Q16. From the following list, which do you think are the 3 most important problems related to quality of life and environment in your county? Please choose ONLY 3

- ☐ Chronic loneliness or isolation
- ☐ Cost of health care and/or medications
- ☐ Homelessness
- ☐ Lack of health insurance or poor coverage
- ☐ Limited ability to get healthy food or enough food
- ☐ Limited access to transportation
- ☐ Lack of affordable housing
- ☐ Limited job opportunities
- ☐ Lack of activities for children and teens
- ☐ Limited places to play for children
- ☐ Communities that are not walkable/bikeable
- ☐ Poverty
- ☐ Need for social service programs
- ☐ Poor water or air quality

Q17. Have you had a dental exam in the past year?

- ☐ Yes
- ☐ No

Q18. Have you had a routine checkup in the past year?

- ☐ Yes
- ☐ No

Q19. Do you believe mental illness is a medical condition?

- ☐ Yes
- ☐ No

Q20. Have you been told by a healthcare professional that you have high cholesterol?

- ☐ Yes
- ☐ No

Q21. Have you or anyone in your household used ARH hospital services in the past 12 months?

- ☐ Yes
- ☐ No

Q22. If you used a hospital other than ARH in the past 12 months, why? Select all that apply.

- ☐ Service I needed was not available
- ☐ My doctor referred me to another hospital
- ☐ My insurance required me to go somewhere else
- ☐ I prefer larger hospitals
- ☐ Other. Please specify below:

  _____

Q23. How would you rank ARH on a scale of 1 to 10, where 1 is *not very good* and 10 is *very*

good? Please circle a number below.

1 2 3 4 5 6 7 8 9 10

Q24. What factors influence your health choices? Select all that apply.

- ☐ People close to me (friends, family, spouse)
- ☐ People in my community
- ☐ Listening to physicians and other healthcare providers
- ☐ Public health recommendations/guidelines (example: CDC)
- ☐ Social media (Facebook, Instagram, etc.)
- ☐ Whether or not I have access to physical activity opportunities
- ☐ Weather (seasons: Spring, Summer, Fall, Winter)
- ☐ News media
- ☐ Other

Q25. Where do you get most of your healthcare information? Select all that apply.

- ☐ Doctor/healthcare provider
- ☐ Friends/family
- ☐ Internet
- ☐ Health department
- ☐ Library
- ☐ Local hospital website
- ☐ Newspaper/magazines
- ☐ Radio/television
- ☐ Social media (Facebook, Instagram, etc.)
- ☐ Health fairs or other healthcare outreach
- ☐ I do not access health information

Q26. What is your current living situation?

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

Q27. What is your age?

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

Q28. What is your gender?

- ☐ Male
- ☐ Female
- ☐ Other _____
- ☐ Prefer not to answer

Q29. What ethnic group do you identify with?

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

Q30. What is the highest level of education you have completed?

- ☐ High School
- ☐ Technical school
- ☐ College or above
- ☐ Other. Please specify below:

  _____

Q31. What is your current employment status?

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

THANK YOU!

We would like to extend our most sincere gratitude to the Perry County community for your input and contributions to this Community Health Needs Assessment process. Because of your participation in this process, we were able to not only understand the health challenges that Perry County residents face, but also the complex systems and context you operate within. With this information, we are able to create a more effective and comprehensive implementation plan to address these issues. Thanks to your dedication, we are able to work towards improving your selected health priority issues to create lasting, positive change.

TEAM UP
A Public Health Academic Practice Collaborative

ARH®
Appalachian Regional Healthcare

Approval

This Community Health Needs Assessment and attached Implementation Plan was approved by the ARH Board of Trustees on May 9, 2025.

BOT Chairperson Signature

7/28/25

Date