

Johnson Memorial Health Community Health Needs Assessment – 2023

I. Executive Summary

Johnson Memorial Hospital, a division of Johnson Memorial Health, brings a longstanding record of commitment and achievement in identifying community health needs, implementing community-based solutions to those needs and encouraging ongoing advocacy for continued improvements in community health and wellness to the Community Health Needs Assessment (CHNA) process. The hospital has a successful history of forming partnerships to meet the health care needs of its community, including the establishment of the St. Thomas Clinic and Federally Qualified Health Clinics (FQHC) in Trafalgar and Edinburgh, the predecessors of Windrose Health Network. This CHNA was conducted in collaboration with Windrose Health Network.

Most recently, the hospital has entered new partnerships with Mayo Clinic Care Network to expand clinical resources available to health care providers and their patients, and with Johnson County government to build a much-needed inpatient mental health hospital.

As in the past, hospital staff will use the data from this Community Health Needs Assessment to identify areas of need and work to apply solutions.

II. Description of Johnson Memorial Hospital

Johnson Memorial Hospital opened on June 29, 1947, as an ongoing memorial to those who had served in the armed services, past and present. It has been a county-owned hospital since its inception and operates under the county hospital laws of the State of Indiana. As such, it is a common asset of the people of Johnson County and the core of its mission is providing quality healthcare services to the community, regardless of the patient's needs or ability to pay.

The Hospital is licensed for 125 beds and staffs 65 with a staff of approximately 900 employees. The Hospital now generates the majority of its revenue from a wide range of ambulatory services at its:

- Main campus in Franklin, Indiana which includes the Rehabilitation and Orthopedic Center
- Franklin Primary Care Center and Immediate Care and Occupational Health Clinic on the north side of Franklin (which also houses the Graduate Health Science Center for Franklin College's Master of Science in Athletic Training and Master of Science in Physician Assistant Studies programs) and
- Satellite physician offices at the Greenwood Primary Care Center, Stones Crossing Health Pavilion, and Whiteland Primary Care Center in Johnson County.

In addition to medical/surgical inpatient services, the hospital operates a 24/7 Emergency Department and Surgical Service, a comprehensive Cancer Care Center, a Cardiovascular Care Center, a Wound Care Center, Breast Care Center, Sleep Center, home care, maternity services, pain relief services, and provides space for an independently operated renal dialysis service.

The Hospital enjoys the support of a wide range of specialists including cardiology, dermatology, emergency medicine, ENT, family medicine, general surgery, gastroenterology,

hand surgery, infectious diseases, internal medicine, nephrology, neurology, OB/GYN, oncology/hematology, ophthalmology, orthopedic spine surgery, orthopedics and sports medicine, pathology, pain management, pediatrics, plastic surgery, psychiatry, podiatry, pulmonology, radiology, radiation oncology, urology, vascular surgery, and wound care.

Johnson Memorial Health is an owner / member in the Suburban Health Organization, www.suburbanhealth.com, an organization composed of 13 central Indiana hospitals working together to promote quality, efficiency and patient access in the communities they serve. Suburban Health Organization supports its hospitals, physicians and the communities they serve through the development of strategic initiatives and shared services. From quality initiatives and physician recruitment, to managed care contracting, and a risk retention group, the strength and diversity of these services help make the member hospitals and physicians one of the leading provider networks in central Indiana.

In August 2013 the Hospital joined with Community Health Network in opening the Stones Crossing Health Pavilion, replacing the Hospital's Center Grove Professional Office Building. The Pavilion is a joint project of both organizations and provides northwest Johnson County residents access to comprehensive medical imaging and physical rehabilitation, lab services and a wide range of medical specialists.

In 2016, the Johnson Memorial Health Board of Trustees approved a \$47 million project, the largest in the Hospital's history, which has completely reshaped the Hospital's main campus in Franklin.

Originally scheduled to open in January 2020, construction issues delayed the completion of the facility until April, when the global Coronavirus pandemic caused the hospital to quickly again change its plans. The Emergency Department was converted to a dedicated COVID unit to treat patients at the beginning of the pandemic. When the immediate need decreased, COVID patients were admitted to regular Intensive Care Unit, allowing for the opening of the new facility in July 2020.

The construction includes a new, state-of-the-art emergency/outpatient services facility on the east side of the Franklin campus and the new, comprehensive rehabilitation center on the campus' undeveloped west side which opened in late 2016. No local or county tax dollars were used to fund the project.

To accommodate the new emergency/outpatient services facility, the oldest part of the Johnson Memorial Health campus was demolished in 2018. Built as the original Johnson County Memorial Hospital in 1947, the aging structure housed Hospital administrative offices and other non-clinical departments.

Project Highlights

- The new emergency/outpatient services addition features:
 - A 17,400 square-foot emergency department with a new ambulance drive and bay
 - More than 33,000 square feet of space for outpatient services including radiology, laboratory, and other outpatient services on the ground level of the building.
 - A wellness suite and other services, located on the second level of the new addition, with room for future expansion.
 - A separate, canopy-covered entrance allows for easy and safe patient access.
- The Rehabilitation and Orthopedic Center contains 20,400 square feet of space for orthopedic care, and physical, occupational and speech therapy/rehabilitation and pain relief services.

Mayo Clinic Care Network

In August 2022, JMH joined the Mayo Clinic Care Network, a group of carefully vetted, independent health care organizations which have special access to Mayo Clinic's knowledge and expertise. Through this network, JMH physicians have access to Mayo Clinic clinical solutions and services, including: AskMayoExpert, eConsults, eBoards, and Health Care Consulting. Additionally, JMH Staff can use Mayo Clinic educational materials designed for patients and can access opportunities for professional development and continuous medical education. Created in 2011, the Mayo Clinic Care Network has more than 45 member organizations across the U.S., and in Asia, India, Mexico, and the Middle East.

Quality Care

JMH has been certified or has received special recognition from the following health care organizations:

- PRC Excellence in Healthcare 5-Star Award – Maternity Care Center (2023)
- PRC Excellence in Healthcare 4-Star Award – Emergency Department (2023)
- Women’s Choice Award – America’s Best Hospitals Emergency Care (2023)
- Women’s Choice Award – America’s Best Hospitals Maternity Care (2023)
- Healthcare Facilities Accreditation Program (HFAP) Accreditation (2019)
- Healthcare Facilities Accreditation Program (HFAP) Stroke-Ready Certification
- Leapfrog Hospital Safety Grade A (Fall 2018)

III. Financial Information

Five-Year Comparison of Net Income to Charity Allowances					
	2018	2019	2020	2021	2022
Net Patient Revenue¹	\$74,171,102	\$84,826,217	\$85,451,946	\$105,944,585	\$114,184,246
Net Operating Income²	\$(11,234,251)	\$(3,401,171)	\$(7,167,002)	\$211,2118	\$102,316
Net Operating Income as a % of Net Patient Revenue	-15.15%	- 4.01%	-8.39%	1.99%	0.09%
Patient Revenue Total Charity Care Allowance³	\$1,416,785	\$2,544,235	\$138,829	\$1,159,174	\$957,301
Charity Care as a % of Net Revenue	1.91%	3.00%	1.58%	1.09%	0.84%

Since 1957 the Hospital has operated solely on its patient services revenue and has not used any taxpayer subsidies, as allowed in Indiana law, to support the operation of the Hospital. Fiscally, the hospital is still recovering from the COVID-19 pandemic but remains financially independent.

¹ Audited F/ S's

² ibid

³ Trial Balance

IV. Description of Johnson Memorial Hospital's Service Area

As the only full-service hospital physically located in Johnson County, JMH has always considered its service area to be the county and the border areas to the west, south and east of the county's boundary lines. These areas outside Johnson County are largely rural and have significant socio-economic connection to Johnson County and the Franklin area.

Johnson County has an estimated population of 165,782 (2022 Estimate, US Census Bureau), up 18.2% from the 140,269 who lived there in 2010. For comparison, the US population grew 7.7% and Indiana's population grew 5.3% during that period. The largest annual population increase was 2.5% between 2019 and 2020.

The primary service area of the Hospital, where approximately 80% of its patient volume comes from, includes the southern two-thirds of the county, and includes the communities of Bargersville, Edinburgh, Franklin, New Whiteland, Nineveh, Trafalgar, and Whiteland. Total population in this area is approximately 71,000.

The Hospital's secondary service area where about 20% of its volume originates has a population of about 81,000 and covers Greenwood, the suburban area of northwest Johnson County that is generally referred to as Center Grove and communities outside of Johnson County including Columbus, Martinsville, Morgantown, Morristown, Nashville and Shelbyville.

V. Johnson County Demographics

Johnson County has experienced strong population and economic growth over the past 20 years. Johnson County ranks 6th in the State of Indiana in net domestic migration⁴ (down from 3rd in 2017 and 5th in 2020).

Key Demographics⁵:

- The county's estimated population in July 2022 was 165,782, a 2.5% increase over 2020 and a 19% increase since 2010.
- 24% of the population is under 18 years (no change from 2019)
- 15% are age 65 and older (no change from 2019)
- 89% of county residents are white (2 percentage points lower than 2019)

VI. Data Collection

Primary Research – A community survey was conducted in the fourth quarter of 2023 in collaboration with Windrose Health, a Federally Qualified Health Center which serves Johnson and surrounding counties. This primary data collection used the same Community Survey which was used for JMH's 2017 and the JMH/Windrose 2021 CHNA so comparisons could be made. Additional demographic questions on respondents' education level, respondents' language, and languages spoken in communities were added to the 2023 survey.

The survey was sent via email to key informants / community constituents (staff and physicians, social service professionals, community volunteers, school nurses, and other public health and area health care providers).

⁴ https://www.hoosierdata.in.gov/profiles.asp?scope_choice=a&county_changer=18081&id=2&page_path=Area+Profiles&path_id=11&menu_level=smenu1&panel_number=1

⁵ <https://www.census.gov/quickfacts/fact/table>

The survey was sent to people in Johnson County as well as Windrose constituents in areas outside of Johnson County including southern Marion County, Bartholomew County and one ZIP Code Hendricks County. The complete survey responses are included in this port as Appendix A.

Secondary Research – Secondary data from the following sources were used in this assessment:

- US Census data⁶
- Healthy People 2030⁷
- 2023 County Health Rankings National Findings Report conducted by the University of Wisconsin Population Health Institute with support from the Robert Wood Johnson Foundation⁸
- United Health Foundation’s America’s Health Ranking 2022⁹
- Indiana Indicators Dashboard¹⁰
- Johnson County Health Department Annual Report 2022¹¹
- Aunt Bertha¹²

VII. Social Determinants of Health

The World Health Organization defines the social determinants of health as “the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, live, work and age and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies, and political systems.”¹³

These determinants include: income and social protection, education, unemployment and job insecurity, working life conditions, food insecurity, basic amenities of housing and the environment, early childhood development, social inclusion and non-discrimination, structural conflict and access to affordable health services of decent quality.

According to the WHO, “Research shows that the social determinants can be more important than healthcare or lifestyle choices in influencing health.

We used Healthy People 2030’s *Social Determinants of Health*¹⁴ to guide the research gathered for this report.

- Economic Stability
- Education Access and Quality
- Health Care Access and Quality
- Neighborhood and Built Environment
- Social and Community Context

⁶ <https://www.census.gov/quickfacts/fact/table>

⁷ <https://health.gov/healthypeople>

⁸ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

⁹ <https://www.americashealthrankings.org/>

¹⁰ <http://indianaindicators.org/dash/overview.aspx>

¹¹ https://co.johnson.in.us/egov/documents/1677072366_7263.pdf

¹² <https://hpp.findhelp.com/>

¹³ https://www.who.int/health-topics/social-determinants-of-health#tab=tab_1

¹⁴ <https://health.gov/healthypeople/priority-areas/social-determinants-health>

Economic Stability – People with steady employment are less likely to live in poverty and more likely to be healthy, but many people have trouble finding and keeping a job. People with disabilities, injuries, or conditions like arthritis may be especially limited in their ability to work. In addition, many people with steady work still don’t earn enough to afford the things they need to stay healthy. Employment programs, career counseling, and high-quality childcare opportunities can help more people find and keep jobs. In addition, policies to help people pay for food, housing, health care, and education can reduce poverty and improve health and well-being.

Green indicates positive change. Red indicates negative change.

Economic Stability	Johnson County		Indiana
	2023 CHNA	2020 CHNA	
Median household income (2019) ¹⁵	\$77,977	\$68,712	\$61,944
Per capita personal income (2021) ¹⁶	\$56,808		\$32,537
Percent population living in poverty (2019 data) ¹⁷	7.5%	7.7%	12%
Percentage of people under age 18 living in poverty (2021) ¹⁸	9%	10%	16%
Percentage of children who qualify for free and reduced lunches (2020) ¹⁹	37%	n/a	47%
Unemployment Rate (October 2023 not seasonally adjusted) ²⁰	2.7%	4.6%	3.5%
Percentage of residents under the age of 65 who had a disability ²¹	7.4%	7%	9.9%
Income Inequality – Ratio of household income at the 80 th percentile to income at the 20 th percentile (2017-21) ²²	3.9	3.8	4.3
Childcare cost burden (2021-22) ²³	20%	n/a	20%

Significant Trends or Clarification

- **Median household income** – a 13% increase over the four-year period, 2019-23²⁴
- **Children in poverty** – a 25% decrease over the four-year period, 2019-23²⁵
- **Free and Reduced Lunch** – Johnson County ranks 9th in the state²⁶ in number of children who qualify for free and reduced lunches. The county average is 36.6%,²⁷ although the

¹⁵ <https://www.census.gov/quickfacts/fact/table>

¹⁶ ibid

¹⁷ ibid

¹⁸ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

¹⁹ <https://datacenter.aecf.org/data/tables/5187-public-school-students-receiving-free-or-reduced-price-lunches?loc=16&loct=5#detailed/5/2292>

²⁰ <https://www.hoosierdata.in.gov>

²¹ <https://www.census.gov/quickfacts/fact/table>

²² <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

²³ ibid

²⁴ <http://indianaindicators.org/dash/overview.aspx>

²⁵ ibid

percentage varies at each of the six school corporations as well as within schools in each corporation. The four-year (2019-23) trend shows there has been no change in the percentage of students eligible for free / reduced lunch.²⁸ Highs and lows for 2021 for each corporation are listed below:²⁹

- Center Grove – 8.2% to 28.1%
- Clark-Pleasant – 39.9% to 53.9%
- Edinburgh – 41.4% to 69.1%
- Franklin – 32.9% to 58.5%
- Greenwood – 33.5% to 71.0%
- Nineveh-Hensley-Jackson (Indian Creek) – 28.4% to 32.7%
- In 2022, the national unemployment rate for persons with disabilities (7.6%) was more than twice as high as that of persons without a disability (3.5%).³⁰
- The childcare cost burden measures the percentage of household income needed to pay for childcare. When childcare is affordable and accessible, it can support parents’ and guardians’ ability to participate in paid work and can provide lifelong benefits to children. The U.S. Department of Health and Human Services’ benchmark suggests childcare is no longer affordable if it exceeds 7% of a household’s income. This measure of childcare cost burden reflects the experience of a household with two children³¹.

Education Access and Quality – People with higher levels of education are more likely to be healthier and live longer.

Green indicates positive change. Red indicates negative change.

Education Access and Quality	Johnson County		Indiana
	2023 CHNA	2020 CHNA	
Residents age 25+ with a high school or higher degree (2017-2021) ³²	93%	92%	90%
Residents age 25+ with a B.A. or higher degree (2017-2021) ³³	33%	32%	28%
Households with a computer (2017-21) ³⁴	95%	92%	92%
Households with broadband internet subscription (2017-2021) ³⁵	90%	84%	85%

²⁶ https://www.hoosierdata.in.gov/profiles.asp?scope_choice=a&county_changer=18081&id=2&page_path=Area+Profiles&path_id=11&menu_level=smenu1&panel_number=1

²⁷ <https://datacenter.aecf.org/data/tables/5187-public-school-students-receiving-free-or-reduced-price-lunches?loc=16&loct=5#detailed/5/2292-2383/false/574,871,870,573,869,36,868,867,133,38/1279,1280,1281/13762,11655>

²⁸ <http://indianaindicators.org/dash/overview.aspx>

²⁹ <https://www.in.gov/doe/files/2021-school-fr-data.pdf>

³⁰ <https://www.bls.gov/news.release/disabl.nr0.htm#:~:text=Unemployment%20The%20unemployment%20rate%20for,for%20those%20without%20a%20disability>

³¹ <https://www.countyhealthrankings.org/explore-health-rankings/indiana/data-and-resources> - 2022 Indiana Summary Report

³² <https://www.census.gov/quickfacts/fact/table>

³³ ibid

³⁴ ibid

³⁵ ibid

Significant Trends or Clarification

- The percentage of households in the county with a computer increased from 92% to 95% and the percentage of households with a broadband connection increased from 84% to 90% since the last CHNA. This is consistent with the state as a whole.³⁶

Health Care Access and Quality – People without insurance are less likely to have a primary care provider, and they may not be able to afford the health care services and medications they need.

Green indicates positive change. Red indicates negative change.

Health Care Access and Quality	Johnson		State
	2023 CHNA	2020 CHNA	
Uninsured under age 65 (2020) ³⁷	7%	9%	9%
Uninsured under age 18 (2022) ³⁸	5%	6%	6%
Ratio of primary care physicians to population (2020) ³⁹	1:1,220	1:1,270	1:1,500
Ratio of dentists to population (2020) ⁴⁰	1:1,520	1:1,580	1,700:1
Ratio of mental health providers to population (2020) ⁴¹	1:930	1:1,150	1:530

Significant Trends or Clarification

- The trend of uninsured adults had been improving. There was a 11% decrease in the uninsured over the four-year period 2019-2023.⁴²
- However, this positive trend is expected to change. It is expected that a significant number of Indiana residents have lost or will lose their Medicaid coverage as a result of the expiration of the pandemic-era policy in which enrollees were not required to complete the annual renewal process and update their eligibility information. According to an *Indiana Capital Chronicle* article from July 25, 2023, “Combined, Medicaid shed 142,264 Hoosiers over the first three months of a yearlong process that stakeholders initially estimated would total between 300,000-400,000.”⁴³
- The trend of uninsured children is stable over the same four-year period.⁴⁴
- The ratio of primary care providers, dentists and mental health providers to residents has improved since the last CHNA. The greatest improvement is in the ratio of mental health providers to population, from 1:1,150 to 1:930.

Neighborhood and Built Environment – The neighborhoods people live in have a major impact on their health and well-being. The physical environment is where individuals live,

³⁶ Current data compared with 2020 CHNA data

³⁷ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

³⁸ <https://infogram.com/iyi-county-dashboard>; Indiana Youth Institute Kids Count Data Book

³⁹ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

⁴⁰ *ibid*

⁴¹ *ibid*

⁴² <http://indianaindicators.org/dash/overview.aspx>

⁴³ <https://indianacapitalchronicle.com/2023/07/25/36k-hoosiers-lost-medicaid-coverage-under-unwinding-down-from-previous-months/>

⁴⁴ *ibid*

learn, work, and play. People interact with their physical environment through the air they breathe, water they drink, houses they live in, and the transportation they access to travel to work and school. Poor physical environment can affect our ability and that of our families and neighbors to live long and healthy lives.

Green indicates positive change. Red indicates negative change.

Neighborhood and Built Environment	Johnson		State
	2023 CHNA	2020 CHNA	
Housing units (2022) ⁴⁵	66,057	62,521	2,977,293
Owner-occupied housing units (2017-21) ⁴⁶	74%	72%	70%
Median value owner-occupied housing units (2017-21) ⁴⁷	\$196,200	\$158,200	\$158,500
Average daily density of fine particulate matter in micrograms per cubic meter (2019) ⁴⁸	9.8	12.1	8.8
Indicator of the presence of health-related drinking water violations (2021) ⁴⁹	No	No	n/a
Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities. (2015-19) ⁵⁰	9%	12%	12%
Percentage of the workforce that drives alone to work (2017-21) ⁵¹	82%	86%	80%
Percentage of workers who commute alone who commute more than 30 minutes (2017-21) ⁵²	42%	42%	32%
Index of factors that contribute to a healthy food environment, from 0 (worst) to 10 (best) (2019-20) ⁵³	8.3	7.6	6.5
Food Insecurity – Percentage of population who lack adequate access to food (2020) ⁵⁴	9%	13%	11%
Limited access to healthy foods - Percentage of population who are low-income and do not live close to a grocery store, limiting their ability to access healthy foods (2019) ⁵⁵	6%	7%	9%

⁴⁵ <https://www.census.gov/quickfacts/fact/table>

⁴⁶ ibid

⁴⁷ ibid

⁴⁸ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

⁴⁹ ibid

⁵⁰ ibid

⁵¹ ibid

⁵² ibid

⁵³ ibid

⁵⁴ ibid

⁵⁵ ibid

Neighborhood and Built Environment	Johnson		State
	2023 CHNA	2020 CHNA	
Percentage of population with adequate access to locations for physical activity (2020, 2022) ⁵⁶	89%	80%	77%

Significant Trends or Clarification

- The value of homes in the county has increased dramatically in recent years, following the national trend.
- The northern third of the county is more densely populated with the middle section a mix of suburban / rural and the southern third mostly rural. 13.9% of the population lives in a low population density area, defined as 500 or fewer people per square mile and less than 2,500 people⁵⁷.
 - Access to exercise opportunities⁵⁸ – increased to 89% from 80%
- Incorporated communities have made a concerted effort in the last few years to build extensive trail systems. There is a group currently working to build connections between these trails which would serve unincorporated areas of the county.
- According to Indy Partnership, Johnson County’s implied resident labor force (the number of people who live in Johnson County and work) in 2020 was 106,219⁵⁹
 - Of those, 69,292 (65%) live **and** work in the county
 - 36,927 (35%) live in Johnson County but work outside the county. 75% of these work in Marion County.
 - There are 13,603 people who work in Johnson County but live outside the county, 13% of the Johnson County workforce. Marion County accounts for more than half of the non-county residents who work in Johnson County.

Social and Community Context – People’s relationships and interactions with family, friends, co-workers, and community members can have a major impact on their health and well-being. Positive relationships at home, at work and in the community can help reduce negative impacts of unsafe neighborhoods, discrimination or trouble affording the things they need.

Green indicates positive change. Red indicates negative change.

Social and Community Context	Johnson		State
	2023 CHNA	2020 CHNA	
Children in a single-parent household (2017-21) ⁶⁰	18%	29%	25%
Membership / Social associations (civic, political, religious, sports and professional organizations) per 10,000 population (2020) ⁶¹	9	8.8	11.9

⁵⁶ ibid

⁵⁷ <https://www.countyhealthrankings.org/reports/2022-county-health-rankings-national-findings-report>

⁵⁸ ibid. Percentage of population with adequate access to locations for physical activity, 2020-22

⁵⁹ <https://indychamber.wpenginepowered.com/wp-content/uploads/2021/03/Commuting-Patterns-Johnson-County.pdf>

⁶⁰ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

⁶¹ ibid

Social and Community Context	Johnson		State
	2023 CHNA	2020 CHNA	
Injury deaths per 100,000 population (homicides, suicides, motor vehicle crashes and poisonings) (2016-2020) ⁶²	65	58	85
Deaths due to suicide per 100,000 population (2016-20) ⁶³	14	13	15

Significant Trends or Clarification

- While the above data from the 2023 County Health Rankings show a slight difference between 20217 and 2020, the four-year (2016-20) trend in suicide deaths from Indiana Indicators shows a 6.7% increase.⁶⁴

VIII. Health Care Indicators

According to the *Robert Wood Johnson 2023 County Health Rankings*, Johnson County ranks 7th in the state of Indiana out of 92 counties⁶⁵. In 2020, the last year the Community Health Needs Assessment was done, the county ranked 12th. The following statistics from the 2023 County Health Rankings provide the 2023 statistics for the County and the State of Indiana⁶⁶ and 2020 statistic⁶⁷ for comparison.

Health Outcomes	State	Johnson 2023	Johnson 2020
Premature death – years of potential life lost before age 75 per 100,000 population (2018-2020)	8,600	6,700	6,800
Percentage of adults reporting fair or poor health (2020)	15%	13%	16%
Average number of physically unhealthy days reported in the last 30 days (2017)	3.3	3.1	3.6
Average number of mentally unhealthy days reported in the last 30 days (2017)	4.9	4.9	4.4
Percentage of live births with low birthweight (2012-18)	8%	7%	7%

⁶² ibid

⁶³ ibid

⁶⁴ <http://indianaindicators.org/dash/overview.aspx>

⁶⁵ <https://www.countyhealthrankings.org/reports/2023-county-health-rankings-national-findings-report>

⁶⁶ ibid

⁶⁷ 2020 Johnson Memorial Health Community Health Needs Assessment

Health Factors	State	Johnson 2023	Johnson 2020
Adult Smoking: Percentage of adults who are current smokers (2020) ⁶⁸	20%	18%	18%
Adult Obesity: Percent of 18+ population that reports a BMI equal or greater than 30 (2020)	37%	33%	31%
Physical inactivity: Percentage of 18+ population reporting no leisure-time physical activity (2020)	26%	22%	24%
Alcohol-impaired driving deaths: Percentage of driving deaths with alcohol involvement (2016-2020)	19%	8%	8%
Sexually transmitted diseases: Number of newly diagnosed chlamydia cases per 100,000 population (2020)	495.7	328.8	306.7
Teen births: Number of births per 100,000 female population 15-19 (2014-2020)	23%	17	21

- 18% adults who smoke (5.9% increase, 2019-23)⁶⁹
- 19% Adults reporting excessive drinking (5.6% increase, 2019-23)⁷⁰
- 12.5% births where mother smoked during pregnancy (7.3% decrease, 2013-17)⁷¹

Health Care Access and Quality	State	Johnson 2023	Johnson 2020
Preventable Hospital Stays: Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees (2020)	3,174	2,773	4,480
Mammography Screening: Percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening (2020)	39%	42%	44%
Flu Vaccinations: Percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination (2020)	54%	60%	54%

⁶⁸ ibid

⁶⁹ ibid

⁷⁰ ibid

⁷¹ ibid

Indiana Indicators Health Dashboard⁷²

Cancer	Johnson County	Trend
New cancer cases per 100,000 population, 2011-16	471.2	.2% decrease
New colorectal cancer cases per 100,000 population, 2011-16	39.7	13.5% decrease
Colorectal cancer deaths per 100,000 population, 2016-20	14.0	4.5% increase
New female breast cancer cases per 100,000 population, 2011-16	119.2	4.4% increase
Female breast cancer deaths per 100,000 population, 2016-20	13.5	1.8% increase
New lung cancer cases per 100,000 population, 2011-16	69.7	4.8% decrease
Lung cancer deaths per 100,000 population, 2016-20	32.7	7.5% decrease
Female Medicare enrollees age 67-69 who had at least one mammogram over a two-year period, 2019-23	42%	5% increase
New prostate cancer cases per 100,000 population, 2011-16	81.2	11% decrease
Prostate cancer deaths per 100,000 population, 2016-20	7.9	No Change
Cancer deaths per 100,000, 2016-20	151.2	.8% decrease

Chronic Diseases and Conditions	Johnson County	Trend
Alzheimer's Disease Deaths per 100,000 population, 2016-20	41.4	1.6% decrease
Arthritis Hospitalizations per 10,000 population, 2016-19	32.3	9.5% decrease
Asthma Emergency Department visits per 10,000 population, 2017-21	15.1	21.2% decrease
Asthma hospitalizations per 10,000 population, 2017-21	1.5	12.8% decrease
Child Asthma Emergency Department visits per 10,000 population, 2017-21	18.5	12.3% decrease
Child Asthma hospitalizations per 10,000 population, 2017-21	3.7	No change

⁷² ibid

Chronic Diseases and Conditions	Johnson County	Trend
Adults with Diabetes, 2019-23	9%	10% decrease
Heart Disease deaths per 100,000 population, 2016-20	177.3	.8% increase
Kidney Disease deaths per 100,000 population, 2016-20	10.0	No change
Stroke Deaths per 100,000 population, 2016-20	38.8	3.3% increase

Substance Use / Mental Health	Johnson County	Trend
Non-fatal opioid emergency department visits per 100,000 population, 2016-19	74	23.5% decrease
Opioid drug overdose deaths per 100,000 population, 2016-20	35.5	No change

Mortality	Johnson County	Trend
Firearm deaths per 100,000 population, 2016-20	13.5	No change

Natality	Johnson County	Trend
Mothers who breastfeed, 2017-20	81.8%	.7% decrease
Newborns with low birth weight, 2017-21	7.8%	No change
Premature births, 2017-21	11%	4.2% increase

Maternal Mortality in Indiana and the rest of the country has been getting significant attention recently. A July 2023 article in JAMA covered a University of Washington study⁷³ suggesting that maternal mortality has increased nationally since 1999 and that the maternal mortality ratio – maternal deaths to live births – has grown larger in every state including Indiana.⁷⁴ According to the World Fact Book⁷⁵ the US ranks 62nd in the world in maternal mortality with 21 maternal deaths per 100,000 live births (2020).

IX. Indiana State Health Ranking

While Johnson County is among the healthiest counties in the state, we must also consider the state’s overall ranking nationally. According to the *United Health Foundation’s America’s Health Ranking 2022 Annual Report*⁷⁶ Indiana ranked 35th of the 50 states. In 2019, Indiana ranked 41st and in 2016, ranked 39th. According to this report:

- Strengths
 - Low income inequality
 - Low prevalence of high-risk HIV behaviors
 - Low percentage of households experiencing severe housing problems

⁷³ <https://jamanetwork.com/journals/jama/article-abstract/2806661>

⁷⁴ While recent study explores maternal mortality, what does Indiana’s review committee say? | Politics | thestatehousefile.com

⁷⁵ Maternal mortality ratio - The World Factbook (cia.gov)

⁷⁶ <https://www.americashealthrankings.org/learn/reports/2022-annual-report>

- Challenges
 - High prevalence of multiple chronic conditions
 - High occupational fatality rate
 - High prevalence of cigarette smoking
- Highlights
 - 63% increase in non-medical drug use – from 9.9% to 16.1% of adults between 2021 and 2022
 - 36% decrease in food insecurity – from 15.2% to 9.7% of households between 2014-16 and 2019-21
 - 14% decrease in uninsured population – from 8.7% to 7.5% between 2019 and 2021

Notable Indiana performance in each of the measures:

- Social and Economic Factors
 - Community and Family Safety
 - Ranks 44th in the country for occupational fatalities (6.9 deaths per 100,000 workers, compared to 3.9 nationally)
 - Ranks 45th in Public Health Funding (\$76 per person, compared to the US average of \$116)
 - Economic Resources
 - Ranks 7th in Income Inequality
 - Social Support and Engagement
 - Ranks 36th in children 0-17 having Adverse Childhood Experiences (ACE)
 - While more than 91% of households have high speed internet access, Indiana still ranks 31st in the country
- Physical Environment
 - Air and Water Quality
 - Ranks 46th in micrograms to fine particles per cubic meter
 - Housing and Transit
 - Ranks 42nd in percentage of workers over 16 who drive alone to work
 - Ranks 34th in housing with lead risks
 - Ranks 7th in percentage of occupied housing units with severe housing problems
- Clinical Care
 - Despite recent increases in the number of primary care, mental health and dental providers, the state still ranks 33rd, 43rd and 41st in those categories, respectively
 - Preventive Clinical Services
 - 36th in percentage of persons age 50-75 receiving colorectal screening (71% compared with 74% nationally)
 - 40th and 44th in childhood immunization and HPV vaccination rates
- Behaviors
 - Nutrition and Physical Activity
 - 34th in percentage of persons 18+ who exercise
 - 37th in percentage of persons 18+ who are physically inactive
 - Sexual Health
 - 37th in teen births (18.7 births per 1,000 females ages 15-19)
 - Smoking and Tobacco Use
 - 43rd and 41st in e-cigarette and smoking use, respectively of persons age 18+

- Health Outcomes
 - Behavioral Health
 - 38th in drug deaths (35.2 death per 100,000 population, compared with 27.9 nationally)
 - Mortality
 - 39th in premature death (years lost before age 75 –10,155 per 100,000 population compared to 8,659 nationally)
 - Physical Health
 - 38th in multiple chronic conditions – 11.9% of persons age 18+, compared to 9.6% nationally
 - 38th in obesity – 36.3% of persons age 18+, compared to 33.9% nationally

X. Death Statistics: Johnson County Health Department⁷⁷

In 2022 there were 91 more deaths in Johnson County than in 2018, the last available data available for the 2020 CHNA. In each year, the same four causes of death accounted for 65% of all deaths, although the order changed slightly: coronary artery disease dropped from first to third.

Green indicates positive change. Red indicates negative change.

Cause of Death	2022		2018	
	Number	Percentage	Number	Percentage
Cancer/Carcinoma/Neoplasms	247	22.7%	187	18.7%
Alzheimer’s/dementia/senility	227	20.8%	185	18.5%
Coronary artery disease	163	15%	201	20.1%
COPD/respiratory/pulmonary embolism	113	10.4%	112	11.2%
Total Deaths	1,089		998	

Of some of the remaining causes of death, accounting for 17% of all deaths in 2022, there were some significant changes

Cause of Death	2022		2018	
	Number	Percentage	Number	Percentage
Drug intoxication	38	3.5%	20	2.0%
Kidney disease	35	3.2%	15	1.5%
Cerebral hemorrhage / aneurysm	29	2.7%	20	2.0%
Gunshot wounds	22	2.0%	4	0.4%
Stroke	20	1.8%	11	1.1%
Malnutrition	19	1.7%	3	0.3%
Sepsis	16	1.5%	25	2.5%
Adult Failure to Thrive / Debility	12	1.1%	43	4.3%
Total Deaths	191	17.5%	141	14.1%

XI. Community Health Survey

The community health survey was sent to key stakeholders in the JMH and Windrose service areas. For the most part, the service areas of the two organizations overlap, with some areas

⁷⁷ <https://co.johnson.in.us/department/index.php?structureid=27>

of Windrose’s service area falling within JMH’s secondary service area. The only exception to this is one zip code in Hendricks County. Only 2% of the respondents were within this zip code and were not removed from the data below.

Respondents were asked to provide their opinion on the severity of Health Issues, Public Health and Safety, Access and Community Issues. The scale for each was:

- 5 = Definitely a Problem
- 4 = Somewhat of a problem
- 3 = Neutral/I do not know
- 2 = Not a significant problem
- 1 = Definitely NOT a problem

Only issues which rated a 3.5 or higher are included here. For the full results, see Appendix A.

1. Please indicate below how serious you think the following **Health issues** are in **your community (zip code)**.

Issue	2023 Score	2021 Score	2017 Score
Mental Health	4.63	4.61	4.51
Drugs	4.56	4.54	4.79
Obesity/Overweight	4.51	4.55	4.64
Diabetes	4.27	4.25	4.30
Tobacco/Smoking	4.20	4.25	4.23
Nutrition	4.19	4.17	4.07
High Blood Pressure	4.13	4.00	4.10
Cancer	4.12	3.92	4.21
Physical Activity	4.07	4.11	4.29
Alcohol	3.99	3.93	4.01
Heart Disease and Stroke	3.94	3.95	4.04
Elderly Wellness	3.89	3.94	4.01
Oral Health	3.69	3.47	3.48
Arthritis	3.63	3.38	3.40
Asthma	3.60	3.45	3.56
Family Planning	3.52	3.30	3.33

- Mental health not only continues to be considered a major issue in the community, it is viewed as a growing problem, especially when substance use disorder (drugs, alcohol and tobacco / smoking) are included. All of these issues were scored at 4 or higher on the 5-point scale.
- Additionally, obesity / overweight, nutrition, and physical activity are considered problem areas, along with related conditions such as diabetes, high blood pressure and heart disease / stroke and cancer.
- Elderly Wellness, Oral Health, Arthritis and Family Planning, scored over 3.5, which was not the case in previous years’ surveys.
- In this survey, 16 of the 19 issues listed were scored at 3.5 or higher. Only HIV/AIDS (2.88), Sexually Transmitted Diseases (3.28) and Pregnancy and Birth (3.31) scored under 3.5.

2. Please indicate below how serious you think the following **Public Health and Safety issues** are in **your community (zip code)**.

Issue	2023 Score	2021 Score	2017 Score
Affordable post-high school education ⁷⁸	3.83	n/a	n/a
Child abuse	3.63	3.72	3.88

- As stated earlier, people with higher levels of education are more likely to be healthier and live longer. The issue of affordable post-high school education was added as an issue in this year’s survey and scored high. Child abuse was the only other issue rated as a problem.

3. Please indicate below how serious you think the following **Access issues** are in **your community (zip code)**.

Issue	2023 Score	2021 Score	2017 Score
Mental Health Services	4.51	4.37	n/a
Affordability	4.14	3.99	n/a
Health insurance	3.90	3.94	4.0
Transportation	3.87	3.94	3.63
Availability of health care provider	3.68	3.32	3.27
Workforce Development	3.59	3.54	3.37
Language barriers	3.58	3.57	3.34
Access to primary health services	3.50	3.33	3.45

- For 2023, access to mental health services was again the most problematic (and growing) issue in this category along with affordability, health insurance and transportation also being issues. Access to mental health services and affordability were not included as options in the 2017 survey.
- Access to Health Insurance and Transportation were ranked lower in 2023 than in 2020, however the recent purging of Medicaid recipients may alter that perception in the future.
- Availability of health care provider and access to primary health services appear to be growing issues. Neither were rated above 3.5 in previous surveys.

4. Please indicate below how serious you think the following **Community issues** are in **your community (zip code)**.

Issue	2023 Score	2021 Score	2017 Score
Access to public transportation	3.96	3.82	3.47
Affordable post-high school education ⁷⁹	3.83	n/a	n/a

- Affordable post-high school education was also included in this category and was rated high. Access to public transportation was the only other issue in this category rated above 3.5.

XII. Priority of Community Needs

To establish the priority of community needs research was reviewed based on the following criteria:

⁷⁸ This issue was not included in previous surveys.

⁷⁹ This issue was not included in previous surveys.

- the Hospital's ability to impact the issue
- availability of local resources to address the need
- past involvement by the Hospital
- perceived importance placed on that category by the community served

While Johnson County is among the healthiest communities in Indiana, the state as a whole ranks 35th out of the 50 states in overall health. In analyzing the data studied in this CHNA, the same four areas of health needs emerged in 2023 as dominant over all others as they did in 2020 and 2017. The areas of need are listed below in alphabetical order, not in order of importance.

- Access to Care
 - While the ratio of health care providers (primary care, mental health and dentists) has increased since 2020, the community perception is that access to services and availability of providers continues to be an issue.
 - The following Access issues were rated as significant problems in the Community Survey (scale of 1 – definitely not a problem to 5 – definitely a problem):
 - Access to mental health services – 4.51
 - Affordability – 4.14
 - Health insurance – 3.90
 - Transportation – 3.87
 - Availability of a health care provider – 3.68
 - Language barriers – 3.58
- Cancer
 - Cancer is the leading cause of death of county residents and has increased from 18.7% (2018) to 22.7% (2022)
 - Positive trends in new cancer cases, new colorectal cancer cases, new prostate cancer cases and deaths, and new lung cancer cases continue, while colorectal cancer deaths, new female breast cancer cases and deaths show a continued negative trend
 - Rated at 4.12 (out of 5) on the Community Survey, compared with 3.92 in 2021
- Mental Health and Substance Abuse / Tobacco
 - High number of poor mental health days per month; slight increase from 2017 CHNA
 - The four-year (2016-20) trend in suicide deaths from Indiana Indicators shows a 6.7% increase
 - High prevalence of smoking
 - Mental Health was rated as the most significant health issue in the Community Survey (4.63 out of 5). Drugs (4.56), tobacco / smoking (4.20) and alcohol (3.99) were also rated as significant issues.
- Obesity / Diabetes / Nutrition / Physical Activity / Cardiovascular Disease
 - Coronary Artery Disease was the third leading causes of death in 2022
 - Heart Disease indicators are trending positively; however, stroke deaths continue trending negatively
 - Adult Obesity continues a negative trend, with 33% of county residents reporting a BMI equal or greater than 30 in 2023, compared with 31% in 2020.
 - Diabetes deaths per 100,000 population (2016-20) have increase by 12.1%
 - These issues were also rated as significant issues in the Community Survey
 - Obesity / Overweight – 4.51
 - Diabetes – 4.27

- Nutrition – 4.19
- Physical Activity – 4.07
- Heart Disease and Stroke – 3.94

Also of note is the increase in deaths due to Alzheimer’s/dementia/senility. In 2018, deaths from these causes accounted for 18.5% of deaths in Johnson County, compared with 20.8% in 2022.

Based on this review, the interventions that would yield the greatest results and benefits for the community as a whole were determined to be:

- education regarding, and access to, mental health services, substance abuse prevention and treatment, and tobacco cessation
- further expansion of outreach to address healthy nutrition, weight reduction, exercise
- expanding access to primary care services for diabetes control, cardiovascular disease and cancer

XIII. Community Resources

Partnership for a Healthier Johnson County was formed in 1995 as a community health initiative lead and funded by JMH, Community Hospitals and St. Francis Hospital (now Franciscan) with Action Teams addressing Access to Care / Behavioral Health, Maternal and Child Health, Tobacco Free Johnson County and Wellness. Partnership is no longer funded by the health organizations, but the Johnson Memorial Hospital Foundation maintains the funds previously allocated to the Partnership for use by community organizations which continue the work of Partnership’s four Action Teams.

However, other community agencies have continued some of the work of Partnership’s initiatives. WIC (Women Infants and Children) continues the Maternal and Child Health Committee and Upstream works in the areas of youth substance misuse / substance use disorder, prevention, suicide prevention and improved mental health in the community.

The **Maternal & Child Health Committee** is composed approximately 40 community members representing such organizations as Johnson County WIC Program, Johnson Memorial Health, Windrose Health Network, Goodwill Industries’ Nurse Family Partnership, Community Health Network, Caresource, Turning Point Domestic Violence, Healthy Families, Human Services (Head Start / Early Head Start), Assist Indiana, Angel Care House, Bridges Alliance of Johnson County, Great Harvest Food Pantry / Indiana Diaper Source, Covering Kids & Families, Valle Vista, CASY, Clarity, Firefly, Embrace Grace, ASPIN Health Insurance Navigator, Franciscan, Earlywood Learning, YMCA and First Steps.

2020-2023 Maternal & Child Health Committee Accomplishments

- Reduction of Maternal Smoking
 - We have collaborated with community partners such as Empower, JMH, Franciscan Health, Community Health Network, Windrose Health Network, Adult & Child, physician offices and other community entities to help increase outside referrals.
 - A QR code and new promotional materials were made and distributed.
 - In October of 2020, an out-in-the-field individual was hired to help build referral base with physicians. This was made possible due to additional funding and sponsorship from Upstream Prevention.
 - Upstream Prevention will continue to pursue social media outlets for program awareness (Websites, Daily Journal Articles, TV news coverage and Korn radio).

Increase referrals from outside care providers and continue referral & facilitator relationship with local WIC office.

- Promotion and Facilitation of Breastfeeding
 - Hosted the lactation station at the Johnson County Health Fair
 - Yard signs posted on fairgrounds to help locate station
 - Lactation station marked on the fair map
 - Capture attendance through tally sheets, feedback cards and volunteers the station
 - A total of 26 breastfeeding friendly establishment decals have been distributed
- Building Relationship with Johnson County Jail
 - Build relationships with the Johnson County Jail staff that promotes optimal health outcomes for mom & baby
 - Assess the need of prenatal education for jail staff & for prenatal inmates
 - 2019-2023 Correspondence put on hold due to the pandemic
- Increase Awareness of Established Certified Car Seat Technicians in Johnson County
 - Maintained certification of car seat technicians from Johnson County WIC office by paying certification fee
 - Gave and installed 20 car seats each year to those in need at annual community baby showers in 2021 and 2022
 - In 2023 four MCH events (Baby Shower & Convoy of Care) provided 20 car seat installs at each event, equaling a total of 80 car seats distributed
 - Partnered with Firefly which was able to provide car seats for events and individuals in need
 - In October 2023, Johnson County WIC became a permanent car fitting station. Awaiting car seats shipment from the State.
- Safe Haven Infant Boxes
 - Bus wrap to promote boxes in Johnson County
 - Franklin Safe Haven Box installed
- Community Resource Binder
 - 25 binders have been distributed
- Annual Baby Shower
 - Drive through baby shower event in 2021 and Inside event in 2022
 - 85 cars showed up for 2021 drive thru event and 117 for 2022 inside event. Everyone received gifts and outreach items from vendors.
 - 16 cribs were given (safe sleep video was watched) in 2021 & 18 cribs in 2022 event with over 30 individual names collected and given cribs at a different date.
 - 20 Car Seats were installed for each event in 2021 & 2022
 - 12 vendors participated in 2021 event & 16 Vendors for 2022 event
 - Used QR code & Event Brite for registration
 - Annual Baby Shower 2023
 - Total Registrations: 230
 - Individuals in attendance: 126
 - Car Seats Installed: 19 plus 10 more families outside of the event went to Firefly later for car seats
 - High Back Booster Seats Installed: 11

- Pack & Plays Issued: 63 (Ran out of cribs at the event so additional 22 pack & plays were given out after the event back at the Healthy Families office) so a total of 85
 - *Johnson County Daily Journal* featured the event in the paper.
- Fatherhood Engagement Program
 - Gathered curriculum, sponsors and leaders for monthly meeting
 - Promoted via flyers, social media posts to community partners
 - Community Partner, Dawn Underwood- (Earlywood) received a three-year grant of \$10,000 per year to secure future fatherhood program needs
 - December 14, 2023 – Holiday Family Fest to kick off the Fatherhood Engagement Program
- Convoy of Care Events (community resource fair)
 - Three events held at the Clark Pleasant, Trafalgar and Franklin branches of the Johnson County Public Library
 - Attendance – 250-280 individuals
 - 37 car seats installed
 - 5 high back boosters installed
 - 17 pack & play cribs distributed
 - 67 vaccinations administered
 - 17-20 vendors at each event
- “Mom’s M.E.E.T. Here” Support Group Facebook Page
 - The pandemic isolated moms and families and it was identified initially that moms needed to connect again – in person. The MCH committee pursued social media to help connect moms in Johnson County to help nurture in person activities and encourage attendance in community activities

Upstream Prevention

Upstream Prevention is a nonprofit focused on systems-level changes to promote public health. This work is done through community coalitions, including Empower Johnson County (focused on youth substance use prevention) and the Suicide Prevention Coalition of Johnson County (focused on suicide prevention and mental health promotion). Upstream Prevention has collaborated with JMH in the following ways:

- Mental Health awareness and suicide prevention messages rotated weekly at JMH Franklin campus on three monitors and also ran on one monitor at the Greenwood Pediatrics office, rotating messages every couple of weeks. (Late December 2020 to early March 2022)
- Messaging ran again on both monitors for Suicide Prevention Month (September 2021)
- Messaging at JMH Franklin campus only for Suicide Prevention Month (September 2022)
- Johnson Memorial Hospital Foundation sponsored Motivational Interviewing Training (September / October 2022)
- Partnership with JMH Emergency Department to support initiation of treatment for Opioid Use Disorder and collaboration with Upstream's Peer Recovery Coach. (January 2023 – Present)
- JMH Staff serve on Upstream’s Overdose Fatality Review Team, Suicide Prevention Coalition, and the IN CARES ECHO Spoke Team.

St. Thomas Clinic

St. Thomas Clinic, an outreach ministry of Saint Thomas Episcopal Church, is supported by volunteers, community churches and organizations. Located on the north side of Franklin, the clinic provides medical services, non-narcotic medications, social services referrals, prescription assistance enrollment, respiratory services, diabetes education, and dental referral services for uninsured, low income, Johnson County residents age 18+. Patients are seen by appointment only from 9:00 a.m. to noon on Wednesdays and select Saturdays. The Clinic cooperates with JMH, Windrose Health, Adult & Child and other service providers in the area.

Windrose Health Network

In 1996 JMH worked with leaders in the Trafalgar area of southern Johnson County and secured funding to establish a Federally Qualified Health Center (FQHC) there. The Hospital committed significant resources to make the clinic operational and for several years provided operational loans and subsidies. In 1999, using the same model as developed for the Trafalgar FQHC, the hospital worked with community leaders in Edinburgh to secure partial funding and establish a clinic. This clinic was also subsidized and supported by the Hospital for several years.

In 2005, in order to formalize the operational structure of the two clinics, the leadership, ownership and operation of both facilities was transferred to a newly created organization, Windrose Health Network. Operational subsidies from JMH eventually ended with this transition, and the remaining loan indebtedness to the Hospital was forgiven. JMH continues to provide hospital services and other clinical support to Windrose clinics.

Since then, Windrose has been able to expand its reach of services to several other areas. Windrose Health currently has clinics in Franklin, Whiteland and Trafalgar (Johnson County), Hope (Bartholomew County) and Indianapolis (Marion County). Often, Windrose clients who reside in Johnson County receive services at clinics located outside the county. The Edinburgh clinic has closed.

Health Partners Plans (Aunt Bertha)

Health Partners Plan, a Pennsylvania based not-for-profit health maintenance organization operates a comprehensive website⁸⁰ listing resources in the areas of social determinants of health and other categories for communities around the country:

- Food
- Housing
- Goods (clothing, home goods, medical supplies)
- Transportation
- Health care
- Finance (financial education, government benefits, loans, tax preparation)
- Mental health and other forms of care
- Education
- Work
- Legal

⁸⁰ <https://hpp.findhelp.com>

Johnson Memorial Hospital Resources

JMH Wellness Services offers surgical weight loss and bariatric surgery; nonsurgical weight loss classes, seminars and support groups; corporate wellness programs; health coaching and dietitian packages, and a meal planning program.

Dana Lindsay, M.D., Medical Director of JMH Wellness Services, is a board-certified Surgical Specialist and a member of the Johnson Memorial Physician Network. She has performed thousands of bariatric procedures and works with patients who seek both surgical and non-surgical weight loss options. Working alongside Dr. Lindsay is Wellness Services Coordinator Eileen Williams, RN, who meets with businesses involved in corporate wellness and works with each patient throughout their screenings. She assesses the health of each member of the corporate wellness program, identifying their specific area of need.

The Johnson Memorial Hospital Foundation has been instrumental in assisting the Hospital to better address the healthcare needs through its financial support of the St. Thomas Clinic, Partnership for A Healthier Johnson County, Fast Track, and other initiatives over the years. Beginning in 2016, the Foundation placed a mission focus on increasing access to behavioral health services in the county. An inaugural Gala event occurred in February 2017 and raised funds dedicated to this new mission. This now-annual event continues to raise additional funds. Proceeds from the inaugural Gala resulted in the funding of a social worker who works directly with local primary care physicians to help navigate their patients in need of behavioral health services to the proper specialists.

Fundraising efforts continue to be dedicated to enhancing access for both outpatient and inpatient behavioral health services through collaboration agreements with external parties or direct services development by the Hospital. In addition, various awareness and education campaigns targeted toward elimination of the negative stigma that surrounds those impacted with a behavioral health disorder will also be funded.

The Hospital's **Diabetes Care Center's** education program is accredited by the Association of Diabetes Care and Education Specialists (ADCES) and meets the National Standards for Diabetes Self-Management Education. The program is tailored to the patient's schedule and lifestyle. It allows the diabetes educator to educate the patient on eating habits, medications, exercise and blood-glucose monitoring. Patients can meet with a certified diabetes educator to develop a customized treatment plan that combines medical, dietary, and behavioral components of diabetes management, attend classes and receive additional counseling when treatment plans change. Medicare patients are eligible for Diabetes Self-Management Training and Medical Nutrition Therapy.

The Johnson Memorial Health **Cancer Care Center** brings together oncologists, pathologists, radiologists and surgeons to ensure comprehensive and timely cancer care. The team is complemented by cancer navigation services for guidance, support and education throughout the course of care. Patients at the Cancer Care Center have access to state of the art, multi-specialty care and access to ongoing clinical trials, new treatment options and support networks. As a member of the Mayo Clinic Care Network, patients benefit from Mayo's expertise while remaining close to home for their care. The team also consists of a cancer registrar for the collection of data on types, stages and treatment results of all cancer patients in the healthcare system.

The **Cardiovascular Care Center** continues to expand as a nationally accredited program. The program earned a three-year accreditation by the IAC (Intersocietal Accreditation Commission) in 2017. The intensive application and review process along with ongoing performance improvement initiatives complement the diagnostic cardiology services offered by the team of cardiovascular professionals. Johnson Memorial Health partners with IU Health to complement a strong cardiovascular service-line and to build upon the momentum for continued future growth in diagnostic and interventional cardiovascular services.

XIV. Implementation Plan

To insure that the CHNA does not become a static document, the Hospital will make a concerted effort to keep access to the plan open to the public and to encourage ongoing comment and public input on the plan.

To accomplish this, the plan will be placed on the hospital's website, www.johnsonmemorial.org and will also be accessible via a link on the hospital's Facebook page, providing adequate opportunity for the public to comment on the CHNA and provide continuous input for use in future updates.

JMH staff will continually refer to this CHNA to address the issues identified.

Mental Health

Addressing the mental health needs of the community has been a priority for JMH for many years and work has now begun in earnest to address this need. JMH and Johnson County government announced a joint venture in July 2023 to build a 17,400 square foot behavioral psychology wing at Johnson Memorial Hospital in Franklin. A groundbreaking ceremony was held on October 11, 2023 with completion expected in the third quarter of 2024.

Funding for this partnership with the county will come from funds the county received from the American Rescue Plan Act (ARPA). The county is taking on the bulk of the construction expenses and will own and maintain the building. JMH will operate the facility, which will have 29 inpatient beds. Care will be provided by JMH and Horizon Health, a behavioral health managed provider JMH partners with.

Maternal and Child Health Committee (WIC) – 2024 and Future Goals

- Reduction of Maternal Smoking
 - Empower / Upstream Prevention is now the fiscal agent of the Baby & Me Tobacco Free Program in Johnson County
 - Support program participation & continue partner referral process for increased enrollment.
- Promotion and Facilitation of Breastfeeding
 - Partner with Discover Downtown and Aspire to have a place for mom to nurse at events/festivals
 - Continue to distribute breastfeeding friendly decals in Johnson County
 - Continue to host Lactation Station at Johnson County Fair
- Building Relationship with Johnson County Jail
 - Pick up where we left off in 2019
 - Revisit Goal – connect with Jail Matron to start up correspondence again
 - Increase access to breastfeeding resources/pumps during incarceration
 - Provide updated Community Resource Binder

- Propose a plan that identifies types of collaborations
- Increase Awareness of Established Certified Car Seat Technicians in Johnson County
 - Continue to partner with Firefly for procurement of car seats
 - Keep up certification of three car seat technicians at WIC program
 - Find a way to fund car seat technicians for car seat installs since WIC grant funds are unable to cover the time spent on installs
- Safe Haven Infant Boxes
 - Promote awareness of Safe Haven in schools, local hospital and health care clinics with volunteers, Safe Haven Video and flyers
- Community Resource Binder
 - Increase resource knowledge to organizations that people reach out to for help
 - Reduce resource silos. Provide additional community resource binders to community partners
- Annual Baby Shower
 - Host annual baby shower event
 - Increase vendor participation and number of individuals in attendance
- Fatherhood Engagement Program
 - Build program
- Convoy of Care Events (community resource fair)
 - Expand health services and vendors at these events
 - Include all libraries in Johnson County to increase access to resources and health services to those in need
- “Mom’s M.E.E.T. Here” Support Group Facebook Page
 - Maintain Facebook page and promote events
- Great Expectations Pregnancy Program [NEW Goal]
 - Work with Johnson Memorial Hospital to bring back the Great Expectations program

Upstream Prevention

JMH is committed to continue to collaborate with Upstream in areas that both organizations find beneficial

Appendix A – Community Health Needs Assessment Responses

Number of Persons Invited to Participate (JMH and Windrose constituents) = 675

Emails Bounced Back = 124

Net Persons Invited to Participate = 551

Overall # Completing Survey = 84

Overall Response Rate = 15.2%

1. The questions in this survey pertain to the primary service areas for Johnson Memorial Health and Windrose Health Centers: Johnson County, southern Marion County, northern Bartholomew County and Hendricks County (ZIP code 46123) Please indicate what ZIP code is the community you represent.

Response	Number	Percent
46106 – Bargersville	6	6.9%
46123 – Hendricks County	1	1.1%
46124 – Edinburgh	1	1.1%
46131 – Franklin	37	42.5%
46142 – Greenwood	3	3.4%
46143 – Greenwood	16	18.4%
46160 – Morgantown	1	1.1%
46164 - Nineveh	2	2.3%
46181 - Trafalgar	3	3.4%
46184 – New / Whiteland	5	5.7%
46217 – Indianapolis	1	1.1%
46227 – Indianapolis	9	10.3%
47246 – Hope	2	2.3%

2. Indicate the answer which best describes your race.

Response	Number	Percent
White	76	90.5%
Black or African American	1	1.2%
Hispanic or Latino	1	1.2%
Asian or Asian American	5	6.0%
American Indian or Alaska Native	0	0%
Native Hawaiian or other Pacific Islander	0	0%
Multiracial	1	1.2%
Other	0	0%

3. Please indicate which category below includes your age:

Response	Number	Percent
Under 18	0	0%
18-24	1	1.2%
25-39	12	14.3%
40-54	34	40.5%
55-64	16	19.0%

65+	21	25.0%
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4. Please tell us your affiliations. (Check all that apply)

Response	Number	Percent
JMH Board of Trustees	3	3.6%
Windrose Board of Trustees	0	0%
Physician	10	11.9%
Employee	14	16.7%
Person with special knowledge of or expertise in public health	16	19.0%
Representative of a federal, regional, state or local health department	3	3.6%
Representative of a social or human services agency	8	9.5%
Community leader or representative	21	25.0%
Other community member	11	13.1%
Health care consumer	28	33.3%
Member or representative of a medically underserved, low income or minority population	4	4.8%
Community resident	39	46.4%
Other (please specify)	7	8.3%

- APRN provider
- County Commissioner
- Firefighter Paramedic
- Franklin City Council President
- Nurse Practitioner
- School health leader
- Work for the Baxer YMCA

5. Please indicate your highest level of educational attainment.

Response	Number	Percent
Less than a high school diploma	0	0%
High school diploma or equivalent	10	11.9%
2-year degree or specialty certification	15	17.9%
Bachelor's degree	23	27.4%
Master's degree	20	23.8%
Doctorate	13	15.5%
Other (please specify)	3	3.6%

- 2 years college
- About 2 years of college
- Some college

6. Please indicate which language(s) you speak fluently. (Check all that apply)

Response	Number	Percent
English	84	100%

Spanish	2	2.4%
Punjabi	0	0%
Burmese	3	3.6%
Other (please specify)	2	2.4%

- Cantonese
- German

7. Please indicate the language(s) which are spoken in the community you represent. (Check all that apply)

Response	Number	Percent
English	83	98.8%
Spanish	43	51.2%
Punjabi	29	34.5%
Burmese	33	39.3%
Other (please specify)	5	6.0%

- ASL
- Dutch
- Haitian-Creole
- Hatian Creole, Swahili, Arabic, Kinyarwanda
- Japanese

8. Health

Please indicate below how serious you think the following **Health issues** are in **your community (zip code)**.

- 5 = Definitely a Problem
- 4 = Somewhat of a problem
- 3 = Neutral/I do not know
- 2 = Not a significant problem
- 1 = Definitely NOT a problem

Alcohol	3.99
Arthritis	3.63
Asthma	3.60
Cancer	4.12
Diabetes	4.27
Drugs	4.56
Elderly Wellness	3.89
Family Planning	3.52
Heart Disease and Stroke	3.94
High Blood Pressure	4.13
HIV/AIDs	2.88
Mental Health	4.63
Nutrition	4.19
Obesity/Overweight	4.51
Oral Health	3.69
Physical Activity	4.07

Pregnancy and Birth	3.31
Sexually Transmitted Disease	3.28
Tobacco/Smoking	4.20
Other (please specify)	None

9. Public Health and Safety

Please indicate below how serious you think the following **Public Health and Safety issues** are in **your community (zip code)**.

- 5 = Definitely a Problem
- 4 = Somewhat of a problem
- 3 = Neutral/I do not know
- 2 = Not a significant problem
- 1 = Definitely NOT a problem

Child abuse	3.63
Drinking Water	2.86
Fire, police and emergency protection	2.46
Food Safety	2.73
Gun Safety	3.14
Hazardous Materials	2.80
Hazardous Waste	2.90
Healthy Homes	3.37
Lead Poisoning	2.71
Personal Safety	2.93
Radon Control	2.70
Traffic Safety	3.13
Violent Crimes	3.01
Other (Please specify)	None

10. Access

Please indicate below how serious you think the following **Access issues** are in **your community (zip code)**.

- 5 = Definitely a Problem
- 4 = Somewhat of a problem
- 3 = Neutral/I do not know
- 2 = Not a significant problem
- 1 = Definitely NOT a problem

Access to primary health services	3.50
Affordability	4.14
Availability of a physician / health care provider	3.68
Health insurance	3.90
Language barriers	3.58
Mental Health Services	4.51
Transportation	3.87
Workforce Development	3.59

Other (Please specify)

- Access to food in general, but healthy food choices is definitely a problem

11. Community

Please indicate below how serious you think the following **Community issues** are in **your community (zip code)**.

5 = Definitely a Problem

4 = Somewhat of a problem

3 = Neutral/I do not know

2 = Not a significant problem

1 = Definitely NOT a problem

Access to public transportation	3.96
Affordable post-high school education	3.83
After school youth programs	3.35
Civic centers and/or churches	2.59
Farmers markets	2.46
Job opportunities	2.95
Parks & recreational facilities	2.33
Racism / Discrimination	3.35
Safe Housing	3.36
Senior outreach programs	3.31
Other (Please specify)	

- Farmers Markets are not affordable, and focus more on crafts

12. Additional Comments

- The Perry Township area has changed considerably with diversity. Having documentation in different languages would be helpful. The crime in our area has made so many places unsafe now. Offering life lesson classes to our teen population could be helpful. More support for teens will help them when they become adults.
- We need to focus on more healthy eating establishments!
- Transportation is a problem in our rural communities. I find people have public health insurance but can't get to an appointment and the language barrier is another factor.
- We live in an awesome community
- Would like to know more about plans for community awareness
- Need more OUTPATIENT mental health
- Thanks
- No taxi service or reliable EMS service to transport patients after hours or on the weekend
- Johnson County's three largest health problems are: 1. Childhood Obesity 2. Prompt access to EMS, police, and fire services 3. Drug Abuse, loss of employment and socialization, suicide
- Lack of healthcare and mental healthcare (especially mental healthcare) are a large problem in our area.