Community Health Needs Assessment

2025 - 2027

THE MEDICAL CENTER AT CAVERNA

Med Center Health®

Table of Contents

Mission, Vision, and Values 3

Purpose & Executive Summary 4

Organizational Description 5

Results for 2022-2024 CHNA 10

Community Demographics 11

Process 16

Areas Prioritized for 2025-2027 33

Survey Priorities Which Will Not Be An Area Of Focus 34

Partnerships 36

Implementation Strategies 37

Communication Plan 40

Survey 40

Data Collected Through Previous Cycle 48

Activities Completed for 2022-2024 Cycle 55

Mission, Vision, and Values

Mission

The Medical Center at Caverna's mission is to care for people and improve the quality of life in the communities we serve.

Vision

The Medical Center at Caverna will be an innovative leader in healthcare delivery and outcomes.

What We Value

Quality

We are committed to providing the highest level of care and service at every opportunity.

People

People are our most valuable resource. We work together to achieve our organization's goals. We treat everyone with honor, dignity and respect.

Accountability

Each of us is responsible for managing our resources ethically and wisely.

Purpose

The Community Health Needs Assessment has been completed for the following reasons:

· To help the Hospital meet its mission to care for people and improve the quality of life in the communities we serve;

· To comply with the Patient Protection and Affordable Care Act of 2010 and maintain the Hospital's tax-exempt status;

· To establish community health needs for the Hospital's service area, determine areas of greatest need, and develop a strategic plan to address those needs;

· To involve internal and external resources to ensure that the needs of individuals are met and reduce duplication of collective efforts;

· To create a sustainable process for conducting a community health needs assessment that can be continued for future assessments.

Executive Summary

The Patient Protection and Affordable Care Act of 2010 includes a provision that requires every tax exempt, non-governmental hospital to:

· Conduct a Community Health Needs Assessment (CHNA) at least every three years.

· Adopt a Strategic Implementation Plan that includes how the needs identified in the assessment will be met.

· Report to the Internal Revenue Service via its 990-tax form how it is meeting its implementation plan.

The Community Health Needs Assessment Report details the process used to collect, disseminate and prioritize the information in the assessment. Med Center Health used primary data obtained from a community survey in partnership with the BRIGHT Coalition and Barren River Health Department. A secondary survey to community leadership was used as well as secondary market research.

The end result of the assessment process was the development by the hospital of a strategic plan to address the major needs identified.

Organizational Description

Bowling Green-Warren County Hospital Corporation (the "Corporation"), is a non-stock, nonprofit Kentucky corporation that operates a 373 bed hospital facility in Bowling Green, Kentucky under the name "The Medical Center at Bowling Green" and since October 1996, a 25 bed critical access hospital and 110 bed nursing home facility in Scottsville, Kentucky under the name "The Medical Center at Scottsville." In addition, since January 2016, the Corporation has operated a 25 bed critical access acute care hospital in Horse Cave, Kentucky under the name “The Medical Center at Caverna.” Also, “The Medical Center at Albany”, a 25 bed critical access hospital, and “The Medical Center at Franklin”, a 25 bed critical access hospital became part of the Corporation on April 1, 2024. “The Medical Center at Russellville”, a 75 bed acute care hospital became part of the Corporation on July 1, 2024.The six (6) facilities are part of one corporation, but are separately licensed by the State of Kentucky. References herein to “The Medical Center” refer to the combined facilities.

The Corporation has been determined by the Internal Revenue Service (the “IRS”) to be a charitable organization as described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the “Code”) and is exempt from federal income taxation by virtue of Sections 501(a) and 501(c)(3) of the Code.

Together, with another area non-profit acute care hospital corporation, the Corporation is an equal owner of the Barren River Regional Cancer Center Inc., (Center) an outpatient radiation therapy care service in Southcentral Kentucky organized as a charitable organization as described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the “Code”) and is exempt from federal income taxation by virtue of Sections 501(a) and 501(c)(3) of the Code.

The Corporation is the sole member of Medical Center EMS, LLC (EMS), Medical Center Pharmacy of Bowling Green, LLC (Riverside) and Med Center Health Partners. EMS provides ambulance services in Warren County, Kentucky. Riverside offers retail pharmacy services in Bowling Green, Kentucky. Med Center Health Partners is a Clinically Integrated Network of healthcare providers, working together under a physician-led structure to improve population health, improve patient experience and reduce the cost of healthcare. The Corporation is both the limited partner and a general partner in the Medical Plaza Partners, LLP which provides on-campus space for hospital departments and other non-affiliate medical-related services.

The Corporation is owned and controlled by Commonwealth Health Corporation, Inc., a non-stock, nonprofit Kentucky corporation (“CHC”), under a holding company arrangement which was established in 1984. CHC has been determined by the IRS to be

a charitable organization as described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code") as is exempt from federal income taxation by virtue of Sections 501(a) and 501(c)(3) of the Code.

The Medical Center at Bowling Green was originally founded as the City Hospital in 1926. In 1949, the city hospital became jointly owned by the City of Bowling Green, Kentucky and the County of Warren, Kentucky and was operated by the Bowling Green-Warren County Hospital Commission (the "Commission") as a public hospital. In 1977, the Corporation became the successor to the Commission with a stated purpose of leasing and operating the existing Commission facilities and financing, constructing and operating a new hospital facility.

The Medical Center at Bowling Green has undergone a series of expansions and has grown to be the largest and most comprehensive hospital facility in Southcentral Kentucky, offering a wide range of acute care and specialty services.

In 1980, The Medical Center at Bowling Green moved into a new six-story, state-of-the-art facility occupying 298,000 square feet on a 17-acre campus. Since 1980, because of an expanding demand for inpatient and outpatient services, several additions to The Medical Center at Bowling Green have been made and both clinical and patient areas have been renovated and modernized.

In 1982, a cancer treatment center was added. In 1984 and again in 1990, the outpatient service area was expanded.

In 1985, the Corporation assisted an affiliate, Commonwealth Medical Plaza Corp., in developing a 29,156 square foot medical office building adjacent to The Medical Center at Bowling Green. Today, the Corporation holds a 92% equity interest in the limited partnership that owns the building.

In 1992, a magnetic resonance imaging facility was acquired adjacent to The Medical Center at Bowling Green campus. In 1997, the Corporation built a 50,000 square foot medical office building adjacent to its outpatient service area.

In 1996, the Corporation acquired the hospital and nursing facility in Scottsville, Kentucky now known as The Medical Center at Scottsville from Health Endowment Properties. The building is located on an approximately 13-acre campus and now totals approximately 106,500 square feet.

In 2000, the hospital in Franklin, Kentucky was acquired, and is now known as The Medical Center at Franklin. The facility has 49,795 square feet,

In 2004, The Medical Center at Bowling Green completed new construction of approximately 59,500 square feet to house an expanded new ambulatory surgical area and an expanded emergency department. The two floor structure was constructed across High Street and is connected to the main hospital via an elevated floor housing the post

anesthesia care unit. In addition, renovation of 23,000 square feet of the existing facility was completed to relocate and serve the growing needs of the Diagnostic Imaging Center and surgical areas.

In 2004, the Commonwealth Regional Specialty Hospital (CRSH), a 16 bed long-term acute care hospital, was opened on the sixth floor of The Medical Center at Bowling Green. CRSH has been determined by the Internal Revenue Service (the "IRS") to be a charitable organization as described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code") and is exempt from federal income taxation by virtue of Sections 501(a) and 501(c)(3) of the Code.

In 2009, The Medical Center at Bowling Green completed new construction consisting of two additional floors above the existing Emergency Department and Ambulatory Surgery wing of The Medical Center at Bowling Green. The new additional floors are supported by ancillary services across the connected bridge way. The project includes construction of a new egress stairwell to serve the new third and fourth floors only. The existing second floor is augmented with approximately 953 square feet of new infill construction adjacent to the new stairwell. The new third and fourth floors each contain approximately 23,238 square feet of space and accommodate 24 acute inpatient beds each. This expansion provided space to allow The Medical Center at Bowling Green to bring on-line its entire complement of 337 licensed beds.

In 2012, The Medical Center acquired Western Kentucky Diagnostic Imaging ("WKDI") to expand the hospital's diagnostic imaging capacity.

In August 2013, The Medical Center completed and opened an approximately 73,471 square foot, three story building known as The Medical Center - WKU Health Sciences Complex. Approximately 80% of the building is leased to Western Kentucky University under a 25 year "triple net" lease. The building houses the University's School of Nursing and Doctor of Physical Therapy programs. The Medical Center uses the remainder of the building for staff education purposes, including bed labs with state-of-the-art equipment such as patient simulators, including an iStan virtual patient.

In 2015, the hospital in Albany, Kentucky was acquired, and is now known as The Medical Center at Albany. The facility has 101,000 square feet.

In 2016, the Corporation acquired the hospital in Horse Cave, Kentucky, now known as The Medical Center at Caverna. The buildings located on the approximately 37-acre campus total approximately 41,000 square feet.

In October 2018, The Medical Center opened a new two story building with 48,000 square feet of office space adjacent to a five-level, 832-space parking structure. The building includes ground floor office space for The Medical Center and 24,000-square-feet on the second floor for the newly opened University of Kentucky College of Medicine-Bowling Green campus. The medical school provides a home to faculty, staff and a full class of 120 students. Amenities of the second floor include a computer lab, two large classrooms,

four multi-purpose rooms, six small group rooms and eight simulation and standardized patient rooms.

In October 2020, The Medical Center opened their Hybrid OR. This new surgery suite combines an operating room with state-of-the-art imaging equipment, including an ARTIS *pheno* robotic imaging system Siemens. With this system, patients can undergo both endovascular and open surgical procedures in the same setting. The floor-mounted robotic C-arm system allows for individualized preprocedural planning, intraoperative guidance, and immediate checkup — regardless of patient condition or procedure complexity. The hybrid OR is used primarily for heart and vascular patients.

In June 2024, the Saheyta Medical Institute in Bowling Green, Kentucky was acquired, and is known as Med Center Health Primary Care Bowling Green. The building contains 33,672 square feet.

As mentioned earlier, in July 2024, the Corporation acquired the hospital in Russellville, Kentucky, now known as The Medical Center at Russellville. The building contains 81,000 square feet. The acquisition also includes medical office buildings on the main campus as well as rural health clinics located in Russellville, Auburn, and Elkton.

In August 2024, the Western Kentucky Heart & Lung in Bowling Green, Kentucky was acquired, and is known as Med Center Health Western Kentucky Heart & Lung. The building contains 61,018 square feet.

Today, The Medical Center at Bowling Green's buildings have expanded to contain a total of approximately 672,690 square feet of space. In June 2024 The Medical Center at Bowling Green broke ground to construct a new five story addition, totaling 180,000 square feet, and is scheduled to open in July 2026. The addition, High Street Tower, will provide a new location for Women's & Children's, which includes one of the largest obstetrics units in Kentucky. The space will also house the region's only Level III neonatal intensive care unit (NICU).

Lastly, in December 2024 The Medical Center at Bowling Green added a state of the art surgical robot, the da Vinci 5. It is only one of three in the state of Kentucky. Med Center Health is also the only hospital in the state with a teaching console used for teaching residents and for collaboration with other surgeons. The da Vinci 5 will be used in a variety of surgeries in the general surgery, urology, thoracic and gynecologic specialties.

The Medical Center at Caverna

The Medical Center at Caverna offers residents of Hart County and the surrounding area convenient access to experienced doctors, quality healthcare services and health information.

On January 1, 2016, the Corporation purchased the assets and liabilities of Caverna Memorial Hospital (which opened its doors in June, 1967) and has operated the facility as a separately licensed hospital under the name “The Medical Center at Caverna” (Hospital). The hospital provides community members with high quality inpatient and outpatient services including a 24-hour full-service emergency room.

The hospital also provides laboratory, x-ray, CT Scanning, ultrasound, digital mammography, mobile MRI, respiratory therapy and rehabilitation services. The facility is licensed as a 25-bed Critical Access Hospital and has two provider-based Rural Health Clinics: one in Horse Cave, KY and one in Munfordville, KY. The hospital currently employs a board-certified internist, a board-certified Family Medicine practitioner and three APRNs for the two Rural Health Clinics. It utilizes several specialists through its Specialty Clinic.

Endoscopies and surgeries are available at the facility as scheduled procedures. Chemotherapy services have been available since late 2018. Recent services staffed at the specialty clinic include cardiology, pulmonology, general surgery, oncology, hematology, OB/GYN and orthopedics. The hospital also operates an outpatient geriatric mental health service program under the name “Senior Perspectives Caverna”.

Results for 2022-2024 CHNA

The priority issues for our previous cycle included addressing lung disease, substance abuse and enhancing our stroke readiness. We began providing low-dose lung cancer screenings for the first time in Hart County and have scanned 625 patients over the past three years. Some of these scans detected lung cancer at a much earlier point in time than would have otherwise occurred, and allowed some patients to have a greater projected life expectancy and quality of life.

Our focus on a medication-assisted treatment program in our Med Center Health Primary Care Munfordville rural health clinic made a significant difference in the lives of dozens of patients who were previously addicted to opioids. Over 55 patients have been helped in this program over the past three years.

We became an Acute Stroke Ready Hospital as certified by the Joint Commission in 2024. Our focus in this area has helped improve our success rate in meeting a 45-minute goal for CT results from 23% of the time in 2022 to 93% of the time in 2024.

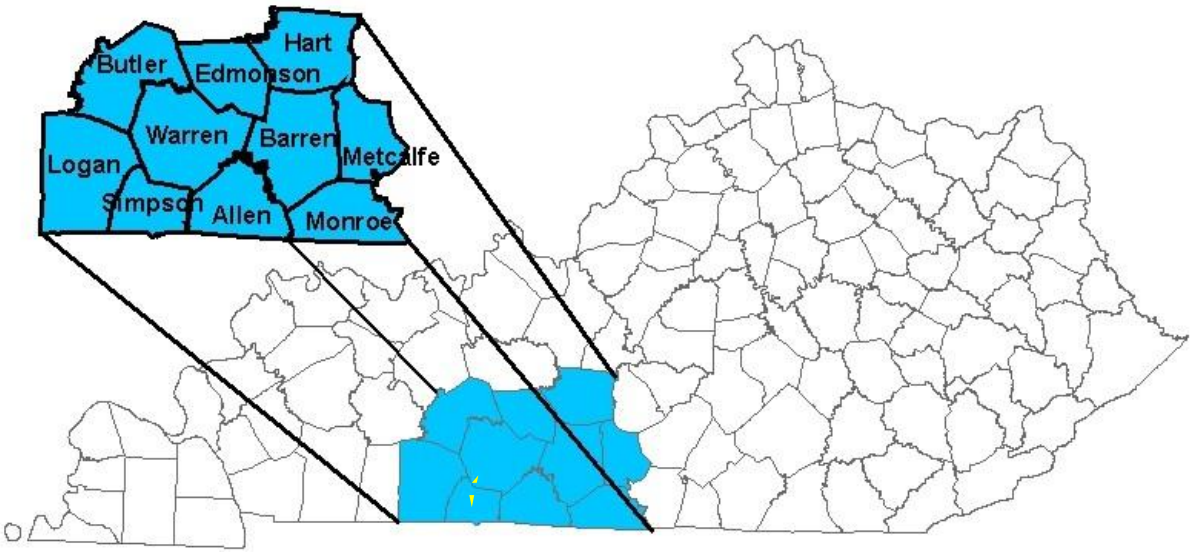
In addition to the above priorities, Med Center Health as a system offers ongoing programming to our partners that includes nutrition, eating healthy on a budget, overall health, physical activity, prediabetes & diabetes, heart health, stroke prevention, dangers of vaping/smoking & tobacco use. We also offer blood pressure and blood sugar screening.

We added a one-on-one smoking cessation program with a Breathe certified coach. This program is open to the public and can be completed in person or via telehealth. Med Center Health as a system, and The Medical Center at Caverna as a hospital, participated with other health systems around the country in National Lung Cancer Screening Day to hold lung cancer screenings on a Saturday in November 2023 and November 2024. Low dose CT scans were offered for those who met the criteria for the lung cancer screening. Patients who reported they were still smoking were provided smoking cessation information after their screening. The intent of the event was to offer the community increased access to lung cancer screening on a day most facilities are normally closed.

Community Demographics

Service Area Description

The Medical Center at Caverna is located in South-central Kentucky off Interstate 65, between exits 58 and 53. The facility provides inpatient and outpatient services for residents in Hart County, as well as patients from Barren, Metcalfe and Edmonson Counties. The hospital also serves patients traveling on I-65.



Hart County, Kentucky Demographics

	Hart County	Kentucky
Population	19,600*	4,512,310*
% Below 18 Years of Age	24.3%	22.3%
% 65 and Older	17.3%	17.6%
% Non-Hispanic Black	4.1%	8.4%

% American Indian or Alaska Native	0.3%	0.3%
% Asian	0.5%	1.8%
% Native Hawaiian or Other Pacific Islander	0.1%	0.1%
% Hispanic	2.2%	4.3%
% Non-Hispanic White	91.3%	83.2%
% Not Proficient in English	0%	1%
% Female	50.3%	50.30%
% Rural	88.3%	41.3%

*Census estimate as of July 1, 2023 per census.gov

Hart County Social and Economic Factors

	Hart County	Kentucky
High School Completion	78%	88%
Some College	36%	63%
Unemployment	3.9%	3.9%
Children in Poverty	24%	21%
Income Inequality	5.3	4.9
Children in Single-Parent Households	20%	25%

Social Associations	10.8	10.2
Injury Deaths	87	106

Hart County Health Factors and Behaviors

	Hart County	Kentucky
Uninsured	8%	7%
Primary Care Physicians	3,890:1	1,600:1
Dentists	3,920:1	1,500:1
Mental Health Providers	980:1	340:1
Preventable Hospital Stays	3,211	3,457
Mammography Screening	32%	42%
Flu Vaccinations	37%	44%

	Hart County	Kentucky
Adult Smoking	27%	20%
Adult Obesity	39%	41%
Food Environment Index	7.3	6.8
Physical Inactivity	34%	30%

Access to Exercise Opportunities	29%	70%
Excessive Drinking	13%	15%
Alcohol-Impaired Driving Deaths	19%	26%
Sexually Transmitted Infections	200.4	410.3
Teen Births	33	26
Food Insecurity	14%	13%
Limited Access to Healthy Foods	5%	6%
Drug Overdose Deaths (per 100,000 population)	23	43
Insufficient Sleep	41%	39%

Kentucky Data

This data was collected in the Kentucky Department for Public Health Assessment 2023

· In 2021, 30.5% (32.3% females and 28.7% of males) of Kentucky adults reported no leisure time physical activity

· ~22.6% of Kentucky adults reported fair or poor health

· In 2021, an estimated 6.1% of Kentucky adults reported ever being told by a doctor they have coronary artery disease (U.S. median is 3.8%)

· ~13.8% of Kentucky adults reported being told by a doctor that they have diabetes (U.S. median 10.9%)

· In 2021, an estimated 40.3% of Kentucky adults were classified as being obese (U.S.median 33.9%)

- In 2021, Kentucky youth obesity was 19.6% (U.S. average 16.3%)

From the Kentucky Department for Public Health Assessment 2023, the Our Healthy Kentucky Home, One Year to Wellness initiative was established for 2025. This campaign is meant to engage and inspire Kentuckians to embark on a personal journey of achievable health and wellness improvement through physical activity, improved nutritional health, and decreased social isolation through targeted interventions.

The University of Kentucky Cooperative Extension conducts a needs assessment as well. Their assessment echoes these health priorities. Included in their 2024 Top 15 Issues were:

- Minimizing youth substance abuse
- Reducing youth obesity through nutrition education and/or exercise
- Ensuring individuals and families have access to affordable nutritious food
- Improving access to mental health and wellbeing resources

Obesity, lack of physical activity, poor nutrition and smoking all contribute to chronic disease development including diabetes, hypertension and cardiovascular disease.

The leading cause of death in Kentucky is heart disease. Data from Kentucky.gov shows in 2022, heart disease deaths in Kentucky were 23.3% higher than the national average. Kentucky also has a high rate of stroke than the national average. High blood pressure, physical inactivity and obesity are the primary risk factors for heart disease and stroke.

The American Diabetes Association reports that ~13.8% of the adult population have diagnosed diabetes with about 20,700 adults in Kentucky are diagnosed with diabetes annually.

The cost of diabetes and obesity is expensive. The American Diabetes Association estimates Americans with diabetes have 2.6 times higher medical expenses than those who do not have diabetes. And that having obesity more than doubles an individual’s health care costs for care.

Tobacco use remains the leading cause of preventable death and disease in Kentucky. Kentucky still has a high percentage of cigarette smokers with the latest statistic of 20%

of adult Kentuckians reporting they smoke. The national average is 15%. Per County Health Rankings, the adult smoking rate in Kentucky is trending down from 22% in 2023 and 25% in 2022. In Hart County, 27% of adults are current smokers. Hart County continues to have a significantly higher smoking rate than Kentucky and the U.S.

In 2023, about 4.9% of high school students in Kentucky smoked cigarettes per the Truth Initiative. In 2024, the national average of youths smoking cigarettes dropped significantly with a reported 1.7% of high school students and 1.1% of middle school students per the 2024 National Youth Tobacco Survey. E-cigarettes remain the most commonly used tobacco product among U.S. youths. In Kentucky, 19.7% of high school students and 10.6% of middle school students reported using electronic vapor products. These rates have trended down since 2021.

As discussed above, most chronic diseases are preventable through lifestyle adjustments including healthy diet, physical activity and smoking cessation. Reducing preventable disease requires ongoing effort and community education by many community partners. While there is no “one size fits all” solution, there are, realistic, evidenced based steps that can be taken by most individuals and parents to reduce their overall risk as well as their family’s risk for chronic disease as well as to ensure a healthier community.

Process

Med Center Health continues to play an active role with the BRIGHT Coalition. The BRIGHT Coalition is a non-profit coalition made up of multiple entities serving the ten county Barren River region. The BRIGHT Coalition wants every resident in the Barren River Area Development District (BRADD) to have the best quality of life possible by ensuring a safe place to live, work, and play. Healthy individuals, families, and communities are the cornerstone of this vision. BRIGHT strives to create equal opportunities to be healthy with an emphasis on personal responsibility for health and wellness through collaboration among all stakeholders.

From the previous community health assessment, the BRIGHT Coalition had determined five areas of focus including nutrition, diabetes, substance use (including tobacco), physical activity and mental health. The current survey was designed to understand the community’s strengths and barriers as well as community members’ thoughts related to those five priorities.

The BRIGHT Coalition board approved to bring on Dr. Lauren McClain with Grantibly to help with survey development, dissemination and analysis of the data collected. In

addition, a data committee was formed from membership within the BRIGHT Coalition to help guide the development of the survey, aid with individual interviews, focus groups, dissemination, etc.

The data committee consisted of the following BRIGHT members:

Amanda Reckard	Barren River District Health Department
Dr. Kim Link	Western Kentucky University
Dr. Susan Eagle	Western Kentucky University
Sarah Widener	Med Center Health
Annette Runyon	Med Center Health
Susan Willis	Barren River District Health Department
Olivia McGhee	Barren River District Health Department
Ashli McCarty	Barren River Health Department
Dr. Qingfang Song	Western Kentucky University
Lynn Blankenship	UK Extension Office
Dr. Lauren McClain	Grantibly

The data committee chose to use the Community Health Assessment Toolkit (https://www.healthycommunities.org/resources/community-health-assessment-toolkit) as a guide to executing the survey. The goal with this survey was to reach as many people and populations as possible within our communities while being intentional with the data we gathered and voices we heard. We wanted to not only increase the number of surveys completed, but more importantly, ensure the survey responses represented the diversity of our community.

The survey committee reviewed several surveys used by other health departments across the state and used some of the questions from those surveys in addition to questions determined by the data committee based on the end goal. Alchemer was used to create and administer the survey.

Methodology

The survey was created and administered in Alchemer, an online survey platform used by health departments around the country. While the Data Committee reviewed similar surveys by other health departments around the state and used some questions, most of the questions in this survey were created by Dr. Lauren McClain in consultation with the Data Committee. The goal of the survey is to learn about community members' thoughts and experiences related to the priorities of BRIGHT, namely Physical Health, Nutrition, Diabetes, Tobacco Use, Substance Use, Mental Health, and Other Community Health Needs. We focused on both community strengths and barriers to good health as well as respondents' attitudes and knowledge of certain health issues

and sociodemographic background indicators. Questions were written at an 8th grade reading level. All questions were closed-ended. Data analysis was conducted in SAS and Excel.

The survey launched on August 15, 2024 and closed on November 13, 2024. The survey link was shared in a variety of ways: through the BRIGHT Coalition membership who shared it on their social media pages and with their networks, the BRIGHT social media pages, through email listservs of community nonprofits, at community events, on table tents or small flyers at Graves Gilbert and Med Center locations and at a few local businesses, as stickers on pizza boxes at Papa John's in Bowling Green, and through the local newspapers. Direct mailing invitations were sent to a random selection of 50 addresses in the 10 counties (350+ invitations) to encourage participation. Not all efforts to share the survey were successful or have unknown levels of success. We asked a number of school districts to send announcements to their families but that was not permitted. We reached out to a number of organizations specifically to increase participation of hard-to-reach groups and asked them to send the survey invitation out, but we are not sure if that happened consistently.

During the survey window, Med Center Health had the survey posted as a pop on their website, displayed on Visix boards in the hospital and physician offices, on table tents in the cafeteria and on social media pages. The table tents were used at other events including as displays on tables at the pasta party for the MCH 10K Classic. Flyers with a QR code were included in race packets for the MCH 10K Classic participants.

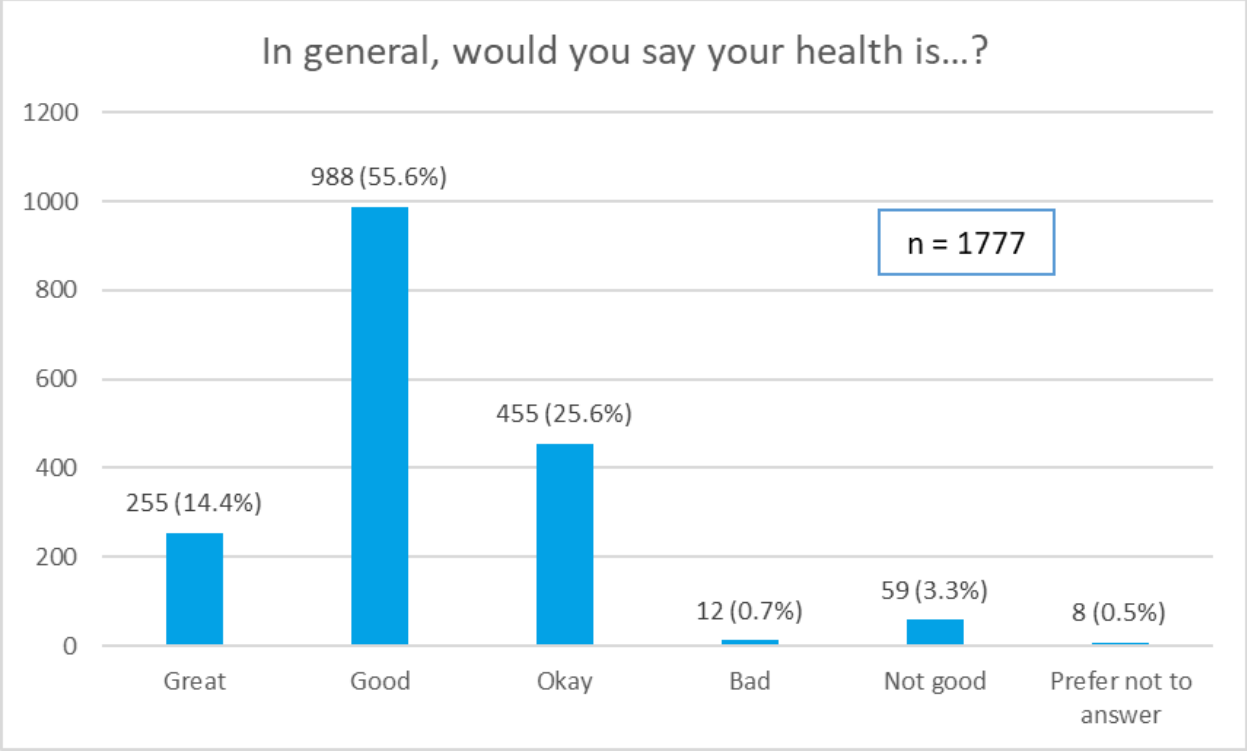
In addition to the above efforts, numerous events, including industry health fairs, were attended by MCH staff where the survey QR code and/or paper versions of the survey were available. The BRIGHT Coalition also attended numerous events throughout the BRADD region to distribute the survey.

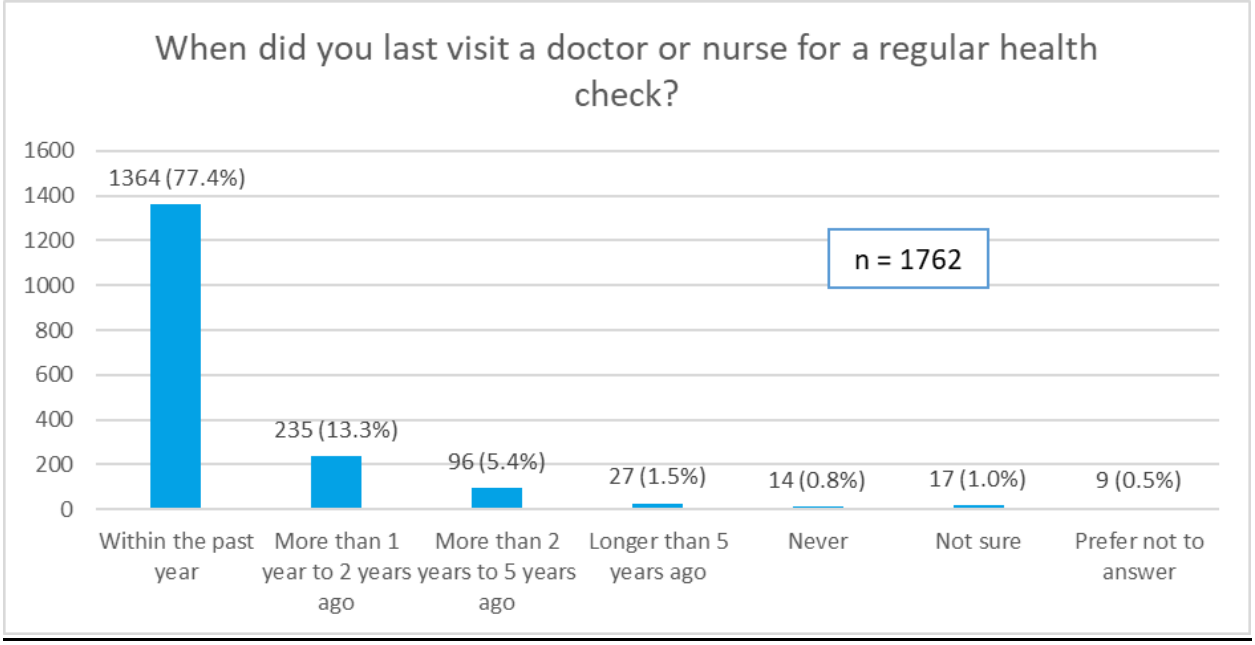
Survey Respondent Demographics

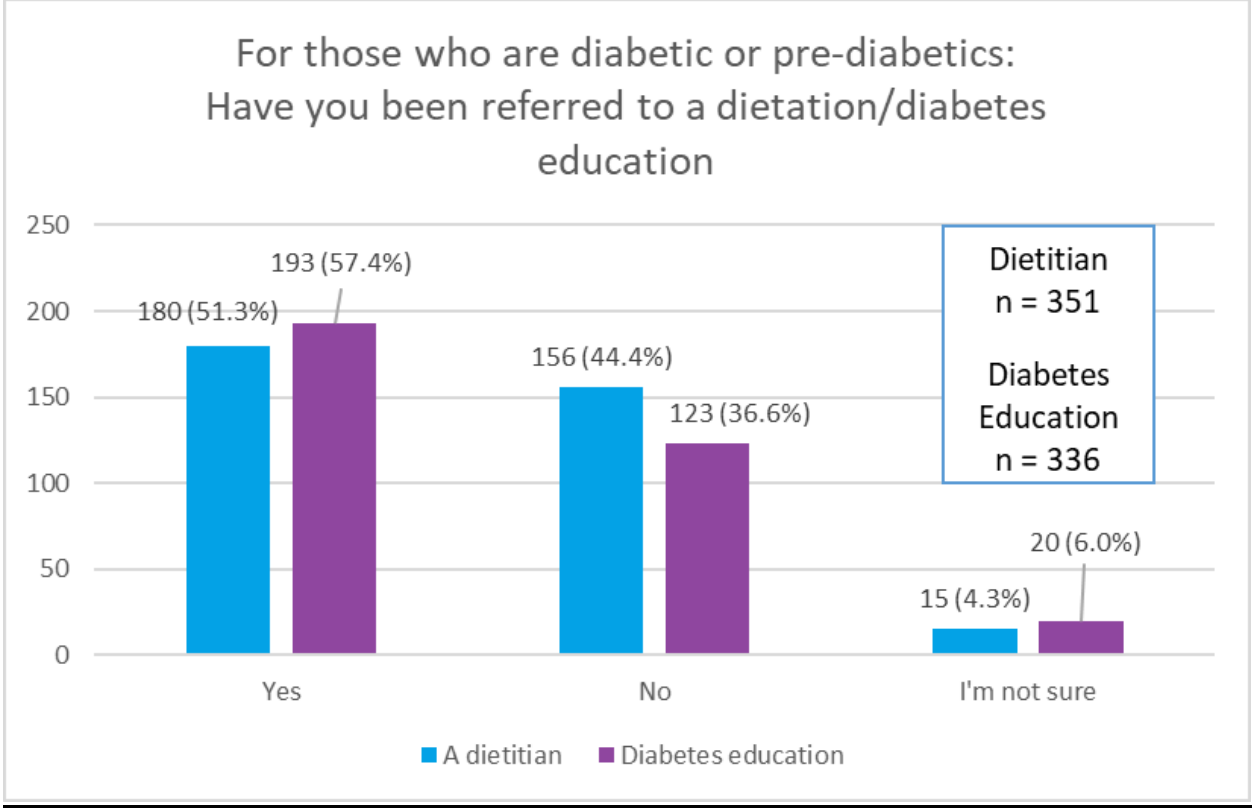
A total of 1783 surveys were completed and analyzed. The average age of those completing the survey was 43 years old, with 74.7% of those identifying as female and 23.3% identifying as male. Of the surveys collected, 80.4% identified their race as white, 9.6% identified their race as black or African American, 2.6% American Indian, 2.9% as Hispanic, Latino or Spanish, 1.2% as Asian and 0.6% as Native Hawaiian or other Pacific Islander.

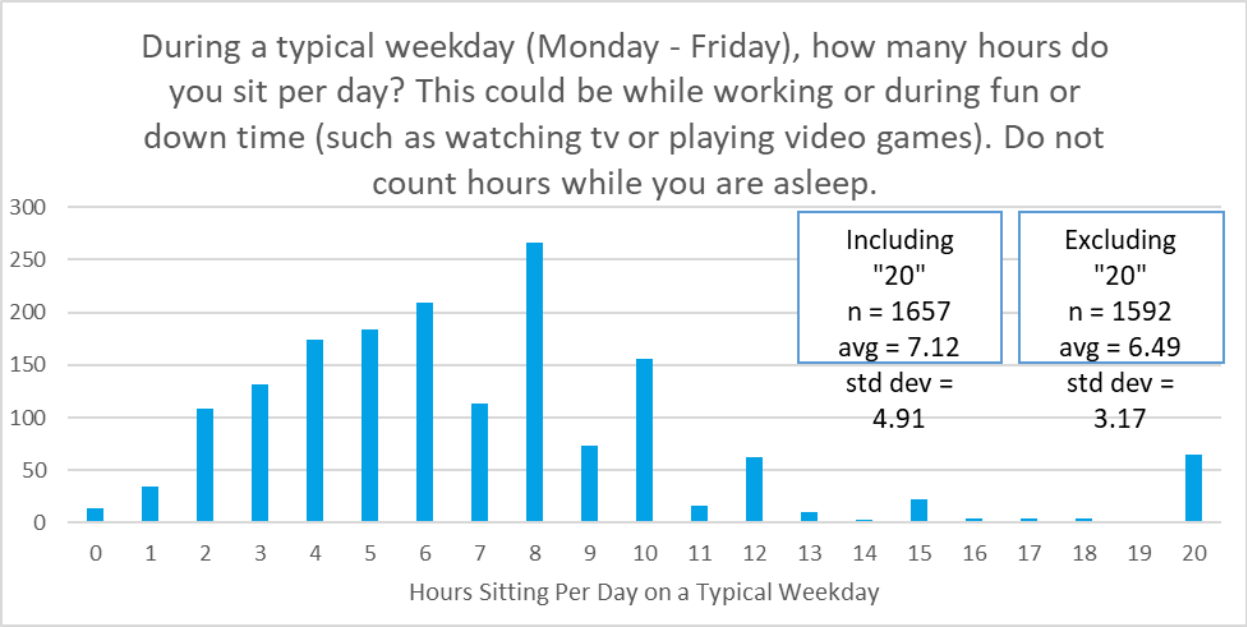
Survey Results

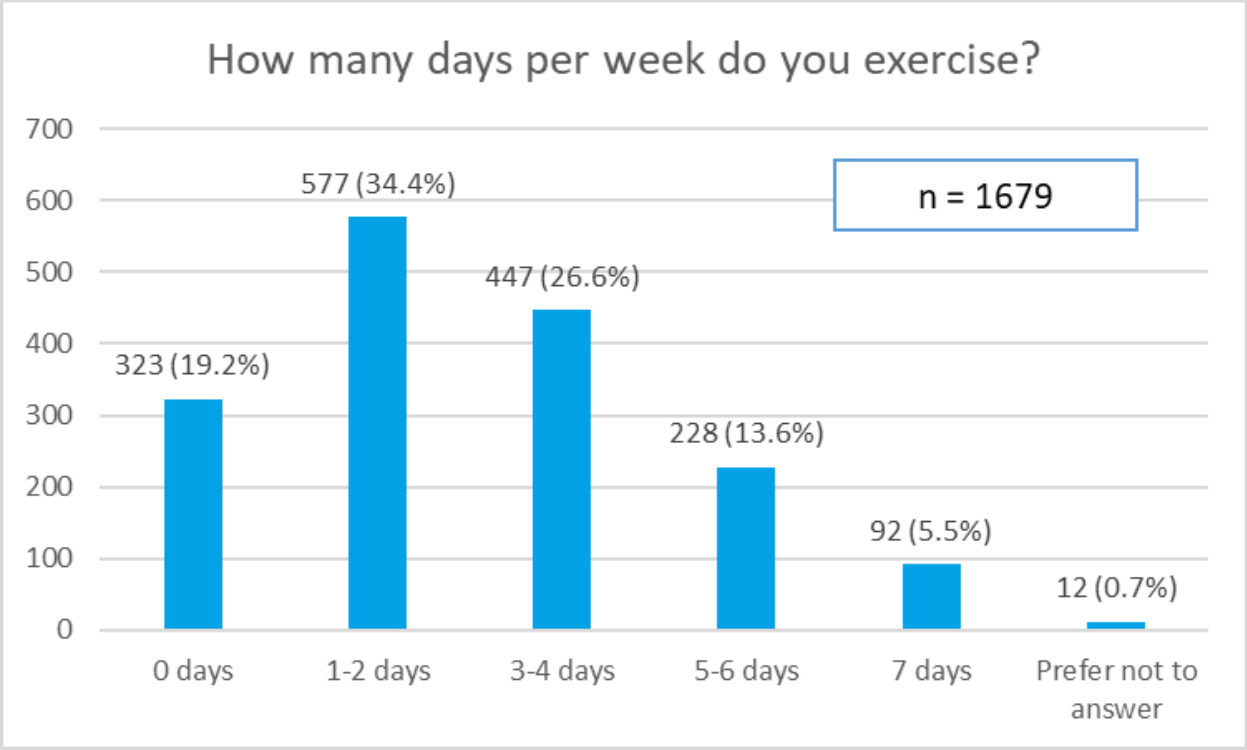
The following graphs and charts represent the overall responses to the survey questions.

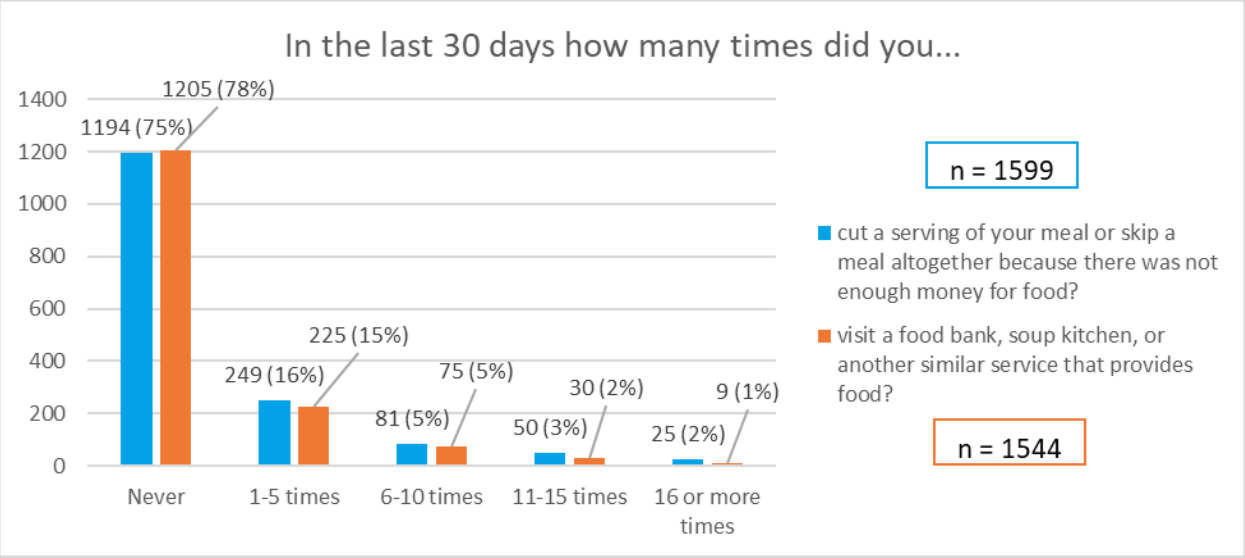


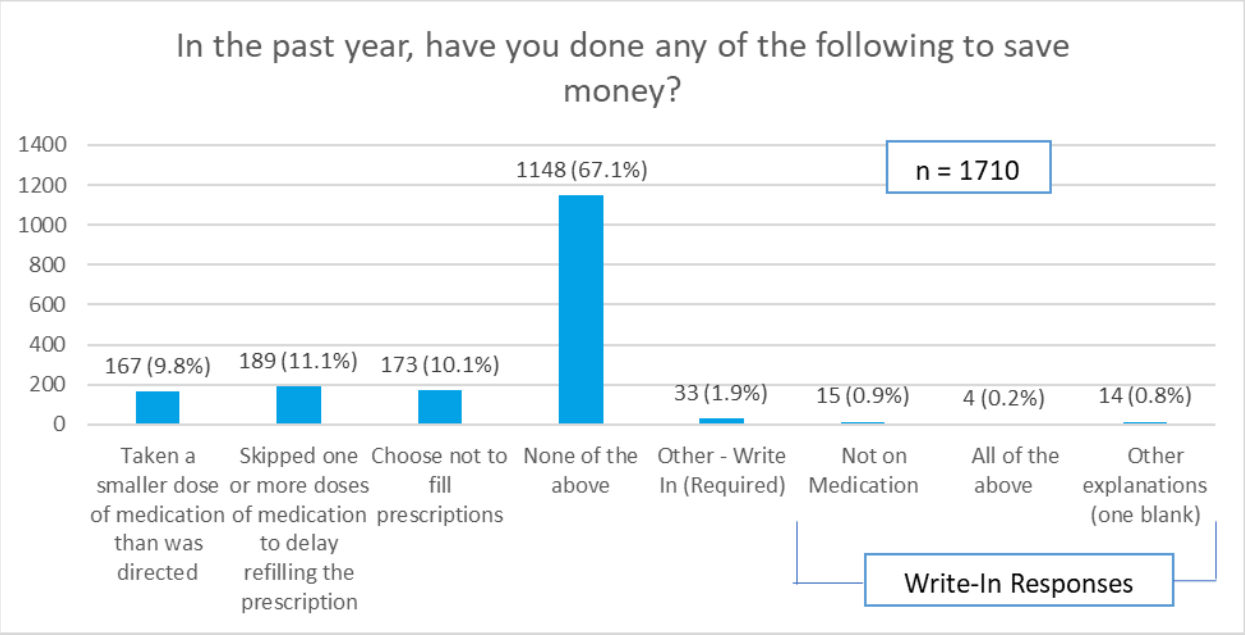

When did you last visit a doctor or nurse for a regular health check?
1600
1400
1200
1000
800
600
400
200
0
1364 (77.4%)
235 (13.3%)
96 (5.4%)
27 (1.5%)
14 (0.8%)
17 (1.0%)
9 (0.5%)
n = 1762
Within the past year
More than 1 year to 2 years ago
More than 2 years to 5 years ago
Longer than 5 years ago
Never
Not sure
Prefer not to answer


For those who are diabetic or pre-diabetics: Have you been referred to a dietation/diabetes education
250
200
150
100
50
0
180 (51.3%)
193 (57.4%)
156 (44.4%)
123 (36.6%)
15 (4.3%)
20 (6.0%)
Dietitian n = 351
Diabetes Education n = 336
Yes
No
I'm not sure
A dietitian
Diabetes education

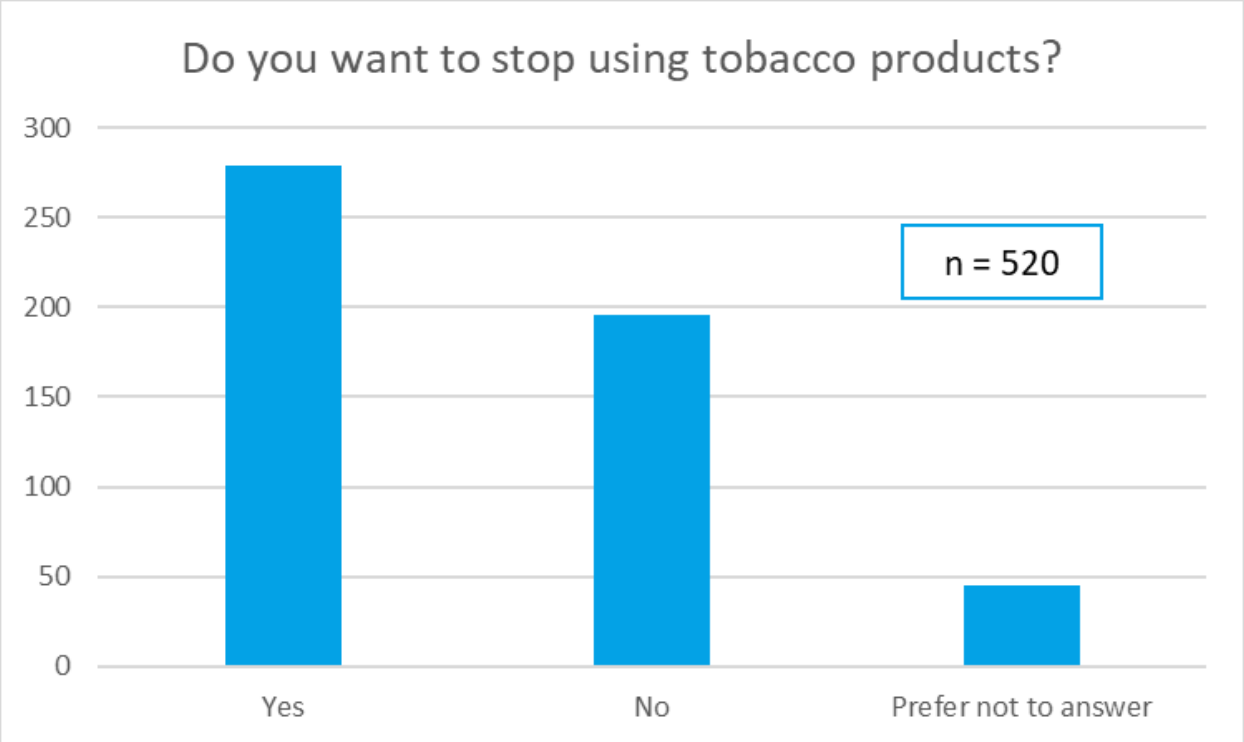

During a typical weekday (Monday - Friday), how many hours do you sit per day? This could be while working or during fun or down time (such as watching tv or playing video games). Do not count hours while you are asleep.
300
250
200
150
100
50
0
0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20
Hours Sitting Per Day on a Typical Weekday
Including "20" n = 1657 avg = 7.12 std dev = 4.91
Excluding "20" n = 1592 avg = 6.49 std dev = 3.17

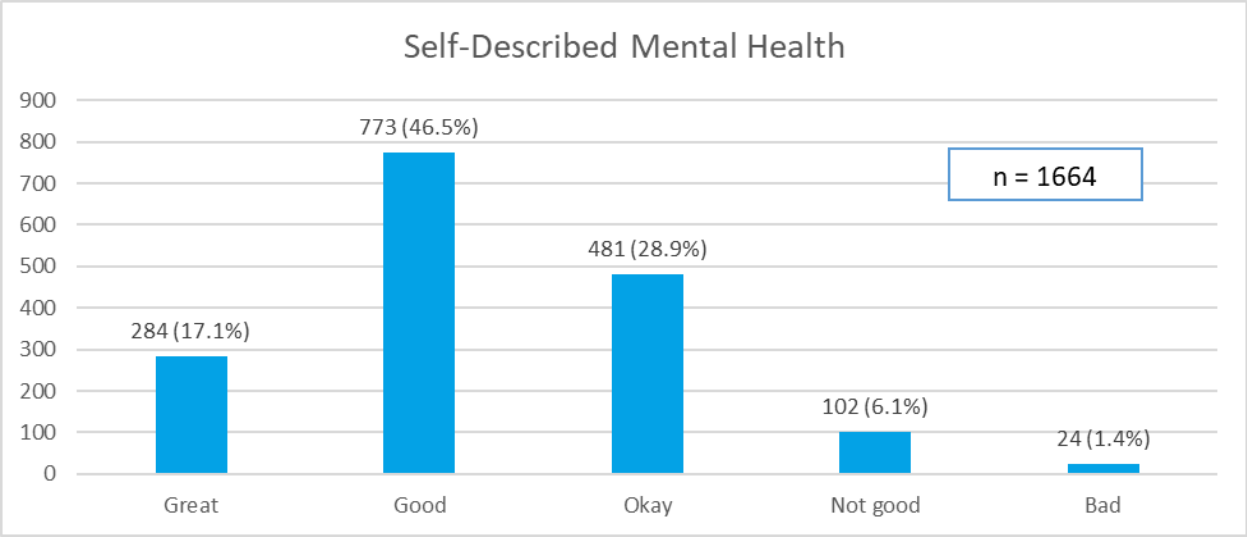

How many days per week do you exercise?
700
600
500
400
300
200
100
0
323 (19.2%)
577 (34.4%)
447 (26.6%)
228 (13.6%)
92 (5.5%)
12 (0.7%)
n = 1679
0 days
1-2 days
3-4 days
5-6 days
7 days
Prefer not to answer

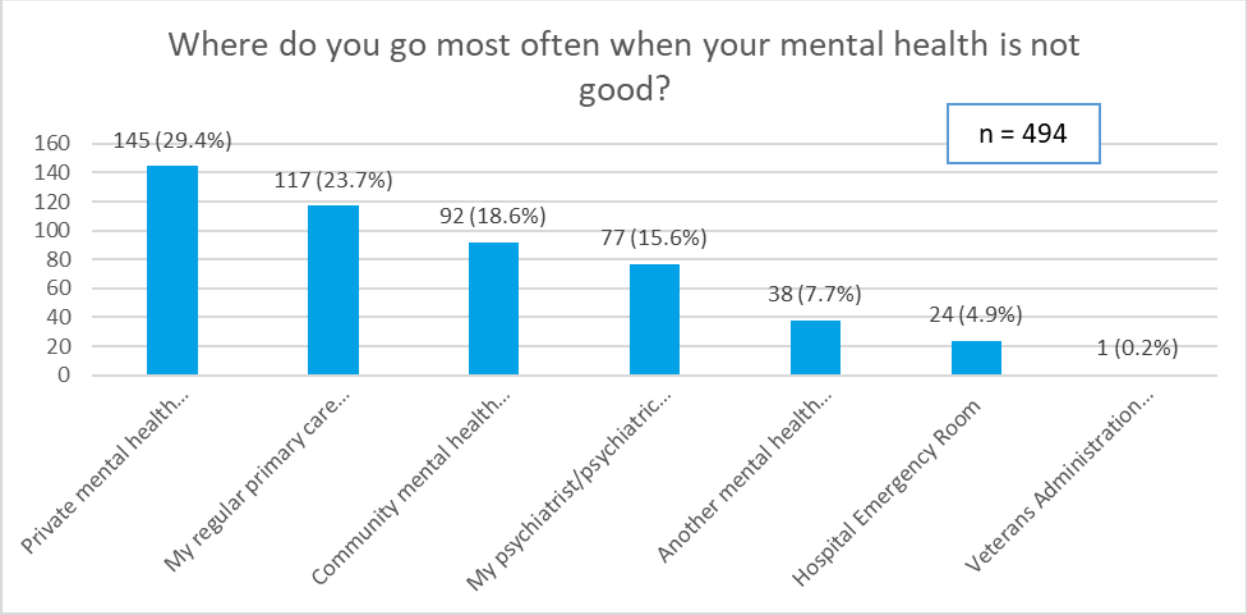

In the last 30 days how many times did you...
1400
1200
1000
800
600
400
200
0
1205 (78%)
1194 (75%)
225 (15%)
249 (16%)
75 (5%)
81 (5%)
30 (2%)
50 (3%)
9 (1%)
25 (2%)
Never
1-5 times
6-10 times
11-15 times
16 or more times
n = 1599
cut a serving of your meal or skip a meal altogether because there was not enough money for food?
visit a food bank, soup kitchen, or another similar service that provides food?
n = 1544


In the past year, have you done any of the following to save money?
1400
1200
1000
800
600
400
200
0
167 (9.8%)
189 (11.1%)
173 (10.1%)
1148 (67.1%)
33 (1.9%)
15 (0.9%)
4 (0.2%)
14 (0.8%)
n = 1710
Taken a smaller dose of medication than was directed
Skipped one or more doses of medication to delay refilling the prescription
Choose not to fill prescriptions
None of the above
Other - Write In (Required)
Not on Medication
All of the above
Other explanations (one blank)
Write-In Responses

How often do you use each of the following? (Count/%)					
	Everyday	Some Days	Not at All	Prefer not to Answer	Total
Smoke cigarettes	224 (13.7%)	186 (11.4%)	1199 (73.4%)	25 (1.5%)	1634 (100%)
Use chewing tobacco or snuff	47 (2.9%)	99 (6.1%)	1453 (89.5%)	25 (1.5%)	1624 (100%)
Use e-cigarettes or other electronic vaping products	109 (6.7%)	176 (10.8%)	1318 (80.9%)	26 (1.6%)	1629 (100%)




Self-Described Mental Health
900
800
700
600
500
400
300
200
100
0
773 (46.5%)
481 (28.9%)
284 (17.1%)
102 (6.1%)
24 (1.4%)
n = 1664
Great
Good
Okay
Not good
Bad


Where do you go most often when your mental health is not good?
160
140
120
100
80
60
40
20
0
145 (29.4%)
117 (23.7%)
92 (18.6%)
77 (15.6%)
38 (7.7%)
24 (4.9%)
1 (0.2%)
n = 494
Private mental health...
My regular primary care...
Community mental health...
My psychiatrist/psychiatric...
Another mental health...
Hospital Emergency Room
Veterans Administration...

Survey Results Specific to Hart County

Access to medical care is not the only determinant of a person's health outcomes. The economic and social needs of people affect their overall health. Social drivers of health (SDOH) are the environments people are born, work, live, learn and play and these areas of life affect a person's health outcomes and quality of life.

The survey responses reflect the importance of keeping the SDOH in mind as evidenced by the top three significant issues or barriers they believe have a negative impact on health were poor eating habits, lack of exercise and lack of a livable wage.

The following three charts outline housing, financial wellbeing and insurance by county.

The chart below shows housing stability per county. Within Hart County, 69.23% of responses indicated stable housing.

Housing Stability by County

County	Stable housing	Insecure housing	No housing	Total
Allen	136	30	7	173
	78.6	17.3	4.1	100%
Barren	129	27	5	161
	80.12	16.77	3.11	100%
Butler	52	8	2	62
	83.9	12.9	3.2	100%
Edmonson	88	14	9	111
	79.3	12.6	8.1	100%
Hart	36	10	6	52

	69.23	19.23	11.54	100%
Logan	133	12	3	148
	89.9	8.1	2.0	100%
Metcalfe	43	13	5	61
	70.5	21.3	8.2	100%
Monroe	27	9	5	41
	65.9	22.0	12.2	100%
Simpson	87	4	5	96
	90.6	4.2	5.2	100%
Warren	548	45	10	603
	90.9	7.5	1.7	100%
Total	1279	172	57	1508

This chart shows financial wellbeing per county. In Hart County, 29.09 of respondents answered “living comfortably” while 47.27% of respondents answered “getting by” as far as their financial health.

Financial Wellbeing by County										
	Allen	**Barren**	**Butler**	**Edmonson**	**Hart**	**Logan**	**Metcalfe**	**Monroe**	**Simpson**	**Warren**
Living comfortably	52	60	13	32	16	63	7	11	31	239
	30.06	37.74	20.63	28.32	29.09	42.86	11.67	26.19	33.33	39.37
Getting by	76	73	41	59	26	65	40	25	42	270
	43.93	45.91	65.08	52.21	47.27	44.22	66.67	59.52	45.16	44.48
Finding it difficult to get by	28	15	7	18	6	15	10	3	15	67
	16.18	9.43	11.11	15.93	10.91	10.2	16.67	7.14	16.13	11.04
Finding it very difficult to get by	17	11	2	4	7	4	3	3	5	31
	9.83	6.92	3.17	3.54	12.73	2.72	5	7.14	5.38	5.11
Total	173	159	63	113	55	147	60	42	93	607
	11.44	10.52	4.17	7.47	3.64	9.72	3.97	2.78	6.15	40.15

The following chart shows respondent insurance coverage by county. In Hart County, 34.55% of the responses were “insurance through an employer”. Only 7.27% of the responses were “no insurance” and 14.55% were “self-pay”. The low number of respondents may not appropriately reflect the actual breakdown of insurance coverage in Hart County.

Insurance by County

Count % of County	Insurance through an employer	Insurance through the government	Self-pay insurance	No insurance	Total
Allen	86	61	15	10	172
	50	35.47	8.72	5.81	100%
Barren	75	59	12	17	163
	46.01	36.2	7.36	10.43	100%
Butler	32	16	9	7	64
	50	25	14.06	10.94	100%
Edmonson	44	39	16	15	114
	38.6	34.21	14.04	13.16	100%
Hart	19	24	8	4	55
	34.55	43.64	14.55	7.27	100%
Logan	92	48	11	2	153
	60.13	31.37	7.19	1.31	100%
Metcalfe	25	23	7	5	60

	41.67	38.33	11.67	8.33	100%
Monroe	21	15	2	4	42
	50	35.71	4.76	9.52	100%
Simpson	46	34	4	5	89
	51.69	38.2	4.49	5.62	100%
Warren	432	130	24	19	605
	71.4	21.49	3.97	3.14	100%
Total	872	449	108	88	1517
	57.48	29.6	7.12	5.8	100%

As outlined in the chart below, the Top Five healthy community factors in Hart County were identified as low crime, access to healthcare, healthy behaviors strong families and good jobs.

Top 5 Healthy Community Factors by County

County	1st Factor (% Selected)	2nd Factor (% Selected)	3rd Factor (% Selected)	4th Factor (% Selected)	5th Factor (% Selected)
Allen	Access to Healthcare (41.12%)	Healthy Behaviors (28.93%)	Strong Families (24.37%)	Good Jobs (23.35%)	Low Crime (20.81%)
Barren	Access to Healthcare (40.86%)	Healthy Behaviors (34.41%)	Strong Families (17.74%)	Good Schools (16.67%)	Low Crime (24.19%)
Butler	Access to Healthcare (32.88%)	Belonging (26.03%)	Low Crime (28.77%)	Healthy Behaviors (24.66%)	Good Jobs (23.29%)
Edmonson	Access to Healthcare (29.92%)	Good Place to Raise Kids (29.13%)	Belonging (26.77%)	Low Crime (25.98%)	Healthy Behaviors (23.62%)
Hart	Low Crime (35.0%)	Access to Healthcare (33.33%)	Healthy Behaviors (26.67%)	Strong Families (25.00%)	Good Jobs (23.33%)

Logan	Access to Healthcare (42.37%)	Healthy Behaviors (27.68%)	Belonging (27.12%)	Good Place to Raise Kids (24.29%)	Low Crime (22.60%)
Metcalfe	Access to Healthcare (41.67%)	Healthy Behaviors (33.33%)	Belonging (29.17%)	Farmers' Market (23.61%)	Affordable Housing (Tied, Clean Environment) (20.83%)
Monroe	Belonging (31.11%)	Access to Healthcare (31.11%)	Healthy Behaviors (28.89%)	Low Crime (24.44%)	Good Schools (24.44%)
Simpson	Access to Healthcare (50.00%)	Healthy Behavior (27.87%)	Low Crime (30.33%)	Good Jobs (22.95%)	Community Parks (22.13%)
Warren	Access to Healthcare (49.86%)	Healthy Behaviors (35.91%)	Good Jobs (28.18%)	Clean Environment (20.99%)	Community Parks (19.34%)

Identified Needs

This survey asked participants to identify the top three factors they believe help people stay healthy in their community. The most frequently selected factor was access to healthcare, chosen by 43.8% (780 participants), emphasizing the importance of readily available medical services. The second most chosen factor was healthy behaviors and lifestyles, with 31.7% (565 participants) pointing to the role of diet, exercise, and other habits in maintaining health. The third most common response was good jobs and a healthy economy, selected by 23.9% (426 participants), reflecting the link between financial stability and access to health-promoting resources.

Respondents were invited to identify up to three significant issues or barriers within their community that they believed had a negative impact on their health. The top five concerns highlighted by participants were poor eating habits, lack of exercise, lack of a livable wage, substance misuse, and limited access to healthcare. While additional issues were noted, these five emerged as the most pressing among respondents. Other significant challenges included homelessness or housing insecurity, limited access to healthy foods, excessive social media use and limited access to medications, underscoring the complex interplay of factors affecting community health.

5 Factors Positively Impacting Health	5 Issues or Barriers Impacting Health
Access to Healthcare	Poor Eating Habits
Healthy Behaviors and Lifestyle	Lack of Exercise
Good Jobs & a Healthy Economy	Lack of Livable Wage
Low Crime/Safe Neighborhoods	Substance Misuse
Clean Environment	Limited Access to Healthcare

As noted in the full survey results, it is unclear if the factors positively impacting health are present in the community or it is the opinion of the survey participants that these are factors that contribute to an overall healthy community.

Areas Prioritized for 2025-2027

After taking into consideration survey responses, secondary community data, state initiatives, momentum from this past cycle's efforts and hospital resources, the following priorities will be our focus for the 2025-2027 cycle:

- **Lung Disease**
- **Substance Abuse**
- **Stroke Readiness**

These areas were also our areas of focus for the 2022-2024 cycle. We will focus on those areas again for the following reasons.

- None of these areas have become less important for facilitating overall community health than they were three years ago.
- We have spent considerable time and effort creating momentum for progress, and have developed infrastructure, protocols and resources in place, to advance these vital health priorities even further.
- We are uniquely positioned as a hospital to impact these areas. While other entities in our community can provide education and perform other healthy living activities, we are the only organization that operates a CT scanner. This puts us in a uniquely responsible position to affect the diagnosis of lung cancer at the earliest possible time and diagnosing strokes, thereby increasing life expectancy and/or quality of life in some situations.

Our overarching goal is to improve the overall health of our community members, improve their quality of life, and increase life expectancy in some individuals. This fits beautifully within our mission of caring for patients and improving the quality of life in the communities we serve.

Survey Priorities Which Will Not Be An Area Of Hospital Focus At This Time

Access to care is identified as having a positive impact on health as well as one of the top five barriers that negatively impacts health. The chart below outlines the top five barriers to health services identified specifically in Hart County.

Top Five Barriers to Health Services Hart County	
Barrier	Percent
I don't have any barriers	28.3
Costs too much for appointments, procedures, or medications	25.0
I don’t have a car or can’t afford gas for my car/truck	18.3
Can’t take time off work	13.7
I don’t have insurance	15.0
Worried the doctor doesn't like caring for or treating people like me	13.3

Med Center Health has ongoing programs to address the barriers to health services in the counties it serves. The Med Center Health Community Clinic currently operates two programs that ease the financial burden to patients in need of basic medical and dental care. The Community Clinic coordinates basic medical and referral services for eligible patients while The Dental Clinic offers a low-cost alternative for those in need of basic dental care. Basic medical services for eligible patients are provided by Medical Center Primary Care located on The Medical Center campus. Guidelines for these services are outlined on the Med Center Health website: https://medcenterhealth.org/location/community-clinic/.

Through the WorkLife program, Med Center Health places registered nurses and advanced practice registered nurses in schools and industry throughout the BRADD region. The WorkLife Primary Care Program offers primary care services to meet both sick/sudden onset illnesses as well as preventive and wellness screenings.

Med Center Health is building the region's first combination urgent care and emergency department in Warren County. The goal is to alleviate pressure on the hospitals' current emergency departments and improve care response time for patients.

The Medical Center at Bowling Green and The Medical Center at Albany were certified as Sexual Assault Nurse Examiner (SANE)-ready hospitals. The two hospitals now maintain a Sexual Assault Nurse Examiner on call at every moment. The Medical Center at Bowling Green has more than tripled its credentialed SANE nurses in the past two years, giving the hospital the capacity to provide 24/7 SANE coverage in its Emergency Department.

Med Center Health has not only added providers to existing practices, we have added multiple physician practices including cardiology and pulmonology, urology, gastroenterology, neurology, gynecologic oncology as well as inpatient pediatric hospitalists.

Lack of livable wage was identified as an issue that impacts health. In Hart County, minimum wage is $7.25 per hour.

Mental health and substance use are ongoing issues in the BRADD region. While these will not be direct priorities focused on in this community health plan, they are ongoing issues that MCH continues to address. Med Center Health has partnered with the Barren River District Health Department, Barren River Area Development District and LifeSkills to execute the Anchor Project. A regional office of Drug Control Policy will be established for the entire region. The office will serve as point guard for all projects within the region and help local decision makers maximize the use of federal, state and local dollars. A mental health crisis intake center will be established. The center will house a 24/7 triage service that will be located within LifeSkills umbrella of services. The center will mitigate countless expenses in man-hours and create thousands of dollars in savings to communities experiencing substance misuse and mental health crises.

THE MEDICAL CENTER AT CAVERNA IMPLEMENTATION STRATEGIES FOR ADDRESSING COMMUNITY HEALTH NEEDS

2025-2027

Through the research and recommendations from the Community Health Needs Assessment, hospital staff, Administration and Board of Directors, the following strategies will guide The Medical Center at Caverna leadership in addressing our community's health needs over the next three years.

Partnerships with Key Community Health Providers & Organizations

Key Partners:

- National Stroke Association
- Kentucky Heart Disease and Stroke Prevention Task Force
- American Lung Association
- American Heart Association
- UK Markey Cancer Center
- Norton Healthcare & UK Healthcare Stoke Care Network
- Barren River District Health Department
- Kentucky Cancer Program
- American College of Radiology
- Hart County Schools
- Caverna Independent Schools
- UK Extension Office
- LifeSkills, Inc.

Implementation Strategies

Identified Priority: Lung Disease

Partners:

- American College of Radiology
- Med Center Health Primary Care Caverna
- Med Center Health Primary Care Munfordville
- Other primary care practices in the community

Goals:

- Promote the availability of low-dose lung cancer screenings to providers and the community
- Increase the number of low-dose lung cancer screenings performed in Hart County
- Reduce the number of lung cancer diagnoses in Hart County and thereby prolong the lives and increase the quality of life of some people in our community

Plan:

1. Promote the availability of low-dose lung cancer screenings to the local primary care practices.

2. Advertise the availability of low-dose lung cancer screenings through appropriate media venues.

3. Maintain status as a Designated Lung Cancer Screening Center through the American College of Radiology.

4. Provide low-dose lung cancer screenings to patients.

5. Collect data on cancer diagnoses in the coming years and compare to prior years.

Identified Priority: Substance Abuse

Partners:

- Med Center Health Primary Care Munfordville
- Med Center Health Primary Care Caverna
- Kentucky Christian Recovery
- Hart County Jail
- Barren River District Health Department

Goals:

- Reduce the incidence of drug related overdoses and deaths
- Utilize Med Center Health Primary Care Munfordville (a department of The Medical Center at Caverna) as a facility that treats patients addicted to opioids
- Increase the quality of life for those battling addiction and their loved ones by helping them abstain from opioid misuse

Plan:

1. Promote awareness of treatment options available to those struggling with chemical addiction.

2. Provide opioid abuse treatment options at Med Center Health Primary Care Munfordville.

3. Collect data on patients in the opioid addiction treatment program at Med Center Health Primary Care Munfordville in order to ascertain the effectiveness of the program by measuring the number who experience a higher quality of life.

Identified Priority: Stroke Readiness

Partners:

· American Cancer Society

· The Joint Commission

· Q-Centrix, LLC

· Norton/UK Stoke Care Network

· Other Med Center Health hospitals

Goals:

- Maintain status as a Certified Acute Stroke Ready Hospital
- Continue to reduce “Door to CT Results”
- Continue to reduce “Door to Lab Results”
- Continue to reduce “Door to Decision to Transfer Results”
- Continue to reduce ‘Door In to Door Out (Throughput) Results”
- Save lives and reduce disabilities from strokes in the community

Plan:

1. Promote “BE FAST” tool to the community through social media and other marketing venues so that community members can identify a stroke as early as possible.

2. Review all stroke patient charts to find areas for improvement and follow up with appropriate action.

3. Continue to work with The Joint Commission and implement best practices for stroke care.

Communication Plan

The Medical Center at Caverna will publish the Community Health Needs Assessment inclusive of the survey results and strategic plan on its website and make hard copies available to the public upon request. In addition, the results will be added in the hospital's annual IRS tax form 990 submission.

FULL BRIGHT SURVEY

Community Health Needs Assessment

1) Which county do you live in? *
( ) Allen
( ) Barren
( ) Butler
( ) Edmonson
( ) Hart
( ) Logan
( ) Metcalfe
( ) Monroe
( ) Simpson
( ) Warren
( ) Another county or state - **Please do not complete the survey if you live in another county or state**

2) What is the ZIP code where you live (or where you most often stay)?
_____

3) What helps people stay healthy in your community? **Pick the top 3.**
[ ] Good place to raise children
[ ] Low crime / safe neighborhoods
[ ] Good schools
[ ] Access to health care (e.g., family doctor)
[ ] Parks and recreation
[ ] Clean environment
[ ] Affordable housing
[ ] Arts and cultural events
[ ] Inclusive community (in other words, people are accepted for who they are)
[ ] Good jobs and healthy economy
[ ] Strong family life
[ ] Healthy behaviors and lifestyles
[ ] Farmer's markets
[ ] Local leaders (such as government or school leaders) who prioritize health
[ ] Sense of community belonging (for example: religious participation, welcoming community events and places)
[ ] Other - Write In (Required):
_____
[ ] Prefer not to answer

4) Where do you usually get information about staying healthy? **Check all the places you use.**
[ ] Healthcare provider
[ ] Public health officials (such as your local health department or the CDC)
[ ] Friends/family
[ ] Social media (such as TikTok, Facebook, Instagram, YouTube)
[ ] Internet sources other than social media (sources such as Google or WebMD)
[ ] Television (news programs)
[ ] Radio
[ ] Community Events (such as health fairs or events for particular health concerns)
[ ] Other - Write In (Required):
_____

5) In general, would you say your health is…?*
( ) Great
( ) Good
( ) Okay
( ) Not good
( ) Bad
( ) Prefer not to answer

6) In the last month, how many days did being sick, ill, or hurt stop you from your usual activities like taking care of yourself, working, or having fun?*

7) When did you last visit a doctor or nurse for a regular health check?*
( ) Within the past year **– Skip to # 9**
( ) More than 1 year to 2 years ago
( ) More than 2 years to 5 years ago
( ) Longer than 5 years ago
( ) Never
( ) Not sure
( ) Prefer not to answer

8) If you haven't seen a doctor in the last year, why not? **Check all the reasons.**
[ ] Cost of the visit
[ ] Transportation
[ ] Unable to take time off work
[ ] Cost of the treatment
[ ] Don't have health insurance
[ ] Lack of child care
[ ] Lack of available doctors
[ ] Could not find a doctor that accepts my insurance
[ ] I don't like or trust doctors
[ ] Other - Write In (Required):
_____

9) Do you have diabetes?*
( ) Yes, I am diabetic
( ) I am pre-diabetic
( ) No, I am not diabetic - Skip to #11
( ) I do not know - Skip to #11
( ) Prefer not to answer - Skip to #11

10) Have you been referred to

	Yes	**No**	**I'm not sure**
a dietitian (someone who helps you learn what foods to eat and what foods to avoid)			
diabetes education (to help you learn more about your condition and how to care for yourself)			

11) In the past year, have you done any of the following to save money?
( ) Skipped one or more doses of medication to delay refilling the prescription
( ) Choose not to fill prescriptions
( ) Taken a smaller dose of medication than was directed
( ) Other – Write In (Required):
_____
( ) None of the above

12) In the last year, was there anything you or your family needed but couldn't get? **Check all the boxes that apply.***
[ ] Addiction Services
[ ] Mental health care services
[ ] Child Care
[ ] Clothing
[ ] Domestic Violence Assistance
[ ] Elder Care
[ ] Employment
[ ] Food
[ ] Health Care
[ ] Housing
[ ] Adult educational services
[ ] Transportation
[ ] Utilities
[ ] None of the above
[ ] Other - Write In (Required):
_____
[ ] Prefer not to answer

13) What makes it hard for you to get health services? **Check any problems you face.** *
[ ] I don't have any barriers
[ ] Costs too much for appointments, procedures, or medications
[ ] I don't have a car or can't afford gas for my car/truck
[ ] Don't have someone to give me a ride
[ ] Can't take time off work
[ ] Disability (mental/physical)
[ ] Worried the doctor won't take me seriously
[ ] Worried the doctor doesn't like caring for or treating with people like me

[ ] Don't know where to obtain services
[ ] Can't get an appointment that works for my schedule
[ ] No doctors available
[ ] I don't have insurance
[ ] Don't have child care
[ ] Language barriers
[ ] Other - Write In (Required):
_____
[ ] Prefer not to answer

14) During a typical weekday (Monday - Friday), how many hours do you sit per day? This could be while working or during fun or down time (such as watching tv or playing video games). Do not count hours while you are asleep.*
15) How many hours do you sleep on a normal week night? *

16) How many **days per week** do you exercise? This could include walking, running, riding a bike, lifting weights, doing yoga or Pilates, playing a sport, or any other activity that you do to work out your body. Do NOT include physical activity that is part of your job. *
( ) 0 days
( ) 1-2 days
( ) 3-4 days
( ) 5-6 days
( ) 7 days
( ) Prefer not to answer
17) On days you exercise, how many minutes per day do you usually exercise for?

18) How would you describe your overall mental health?*
( ) Great
( ) Good
( ) Okay
( ) Not good
( ) Bad

19) Now thinking about your mental health, which includes stress, depression, and problems with emotions, how many days during the past 30 days was your mental health **not** good?*

20) People can get counseling, treatment, or medicine for many different reasons, such as:
For feeling depressed, anxious, or "stressed out"
Personal problems (like when a loved one dies or when there are problems at work)
Family problems (like marriage problems or when parents and children have trouble getting along)
Needing help with drug or alcohol use
For mental or emotional illness

In the last 12 months, did you get counseling, treatment, or medicine for any of these reasons?*
( ) Yes **– Skip to #23**
( ) No – **Continue to #21 & #22 but skip #23**
( ) Prefer not to answer

21) In the last 12 months, did you **want to** get counseling, treatment, or medicine but were unable to?
( ) Yes, I wanted to but couldn't
( ) No, I did not want counseling, treatment, or medicine

22) What stops you from getting mental health services when you need them? **Check all that apply.**
[ ] I am ashamed or uncomfortable talking about personal issues
[ ] I do not have internet access to find a provider
[ ] I can't get in to see a mental health provider
[ ] Don't have a ride or a way to get there
[ ] Language/cultural
[ ] The times they are open do not work with my schedule
[ ] I don't have insurance
[ ] I have insurance but it doesn't cover mental health
[ ] Services cost too much
[ ] Tried before, it didn't work
[ ] Tried before, takes too long to get an appointment
[ ] Other - Write In (Required):

23) Where do you go most often when your mental health is not good?
( ) Community mental health center (ex: LifeSkills)
( ) Private mental health practice (ex: a therapist with their own place or with a small group of other therapists)
( ) My psychiatrist/psychiatric nurse practitioner
( ) Hospital Emergency Room
( ) My regular primary care doctor
( ) Veterans Administration Hospital (VA)

( ) Another mental health service (please specify):_____

24) How often do you feel lonely or like you are by yourself?
( ) Always
( ) A lot
( ) Often
( ) Sometimes
( ) Never

5) How often do you use each of the following?*

	Every day	**Some days**	**Not at all**	**Prefer not to answer**
Smoke cigarettes				
Use chewing tobacco or snuff				
Use e-cigarettes or other electronic vaping products				

If you use any cigarettes, chewing tobacco, snuff, e-cigarettes, or other electronic vaping products, please answer #26. If not, please skip to #27
26) Do you want to stop using tobacco products?*
( ) Yes
( ) No
( ) Prefer not to answer

27) Which of the following options for quitting smoking are available in your community? Check all that apply.
[ ] Nicotine patch
[ ] Nicotine gum or lozenges
[ ] Prescription medication
[ ] Counseling, support groups, or help line
[ ] Switching to electronic or e-cigarettes (vaping)
[ ] Cold turkey or stopping without any other substitute or intervention
[ ] Other - Write In (Required):
_____

28) During the past 30 days, how many days per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage or liquor?

29) Have you ever felt you should cut down on your drinking?
( ) Yes
( ) No

30) In the last 30 days how, many times did you... cut a serving of your meal or skip a meal altogether because there was not enough money for food?
( ) Never
( ) 1-5 times
( ) 6-10 times
( ) 11-15 times
( ) 16 or more times

visit a food bank, soup kitchen, or another similar service that provides food?
( ) Never
( ) 1-5 times
( ) 6-10 times
( ) 11-15 times
( ) 16 or more times

31) Which of the following caregiving responsibilities do you have on a regular basis? **Check all the boxes that are true for you.***
[ ] One or more children under age 5
[ ] One or more children between the ages of 5 and 11
[ ] One or more children between the ages of 12 and 18
[ ] One or more family members (including children) with disabilities
[ ] One or more family members (including children) with significant health care issues
[ ] Aging parents who live with me
[ ] Aging parents who do not live with me but who I care for regularly
[ ] Other - Write In (Required):
_____
[ ] I do not have caregiving responsibilities

If you do not have caregiving responsibilities, skip to #33.
32) Have you had difficulties with any of the following? **Check all the boxes that are true for you.**

[ ] Finding childcare options
[ ] The cost of childcare
[ ] Finding preschools
[ ] The availability of preschool spots
[ ] Afterschool care for children
[ ] Finding doctors for those I care for
[ ] Affording health care costs for those I care for
[ ] Finding someone to help care for aging parents
[ ] Difficulty affording help to care for aging parents
[ ] Finding support for disabled family member
[ ] My own mental health or stress for providing care
[ ] I don't have time for myself due to caregiving responsibilities
[ ] I do not have caregiving difficulties
[ ] Other - Write In (Required):
_____

33) To what extent do you agree or disagree with the following statement:
The community has adequate mental health services for people who need them.
( ) Strongly Disagree
( ) Disagree
( ) Neither Agree nor Disagree
( ) Agree
( ) Strongly Agree

34) To what extent do you agree or disagree with the following statement:
All income groups have access to mental health services.
( ) Strongly Disagree
( ) Disagree
( ) Neither Agree nor Disagree
( ) Agree
( ) Strongly Agree

35) Overall, what are the **top three** mental health needs in the community that should be addressed? *
[ ] Addressing the stigmatization of those with mental health issues
[ ] Affordable health insurance that includes mental health care
[ ] Affordable mental health services
[ ] Affordable prescriptions
[ ] Availability of transportation to mental health services
[ ] Care for Caregivers
[ ] Children's mental health services
[ ] High quality mental health services
[ ] More mental health education
[ ] More number of mental health care providers
[ ] Substance abuse prevention/treatment
[ ] Suicide prevention
[ ] Another mental health need (please specify):
_____
[ ] I don't know

36) In your opinion, what are the **issues in our community** that have the greatest **negative** impact on our health? **Please select the top 3.**
[ ] Limited access to healthcare
[ ] Limited access to medications
[ ] Not getting vaccines
[ ] Limited access to healthy foods
[ ] Poor eating habits
[ ] Lack of exercise
[ ] Lack of a livable wage
[ ] Homelessness or housing insecurity
[ ] Distracted driving
[ ] Not using seat belts/child safety seats
[ ] Dropping out of school
[ ] Excessive social media use
[ ] Bullying
[ ] Substance misuse (for example, alcohol, opioids, meth)
[ ] Tobacco use
[ ] E-cigarette use (vaping, JUULS)
[ ] Racism
[ ] Child abuse or neglect
[ ] Adult or senior abuse or neglect
[ ] Domestic violence/intimate partner violence
[ ] Community violence
[ ] Unsafe sex
[ ] Human trafficking
[ ] Rape/sexual assault
[ ] Other - Write In (Required):
_____

37) What help is available in your community for people who want to stop using drugs or drinking too much alcohol? (Check all that apply)
[ ] Talking to a counselor or therapist
[ ] Going to a place where they help you stop (rehabilitation or treatment centers)
[ ] Meeting groups where people support each other (ex: Alcoholics Anonymous, Narcotics Anonymous)

[ ] Learning programs about not using drugs or drinking
[ ] Doctors who help with stopping
[ ] Programs for exchanging used needles safely
[ ] Help with laws and rules about using drugs (legal aid services related to substance use)
[ ] Outreach and community support services
[ ] None that I am aware of
[ ] Other - Write In (Required):
_____
[ ] I don't know

38) To what extent do you agree with the following statement: "Vaccines are important for the health of the community."*
( ) Strongly disagree
( ) Disagree
( ) Neither agree nor disagree
( ) Agree
( ) Strongly agree
( ) Prefer not to answer

39) For each vaccine below, please select the statement that is true for you.
Flu shot
( ) I have gotten this shot – Skip #40
( ) I have not gotten this shot – Got to # 40
( ) I don't know if I've gotten this shot – Skip #40
40) Why didn't you get **the flu shot**?
[ ] I didn't know where to go to get it
[ ] The times to get it didn't work with my schedule
[ ] I couldn't afford it
[ ] I did not have transportation to get it
[ ] I didn't know I needed it or I don't know what it is
[ ] I wanted it but it wasn't available
[ ] I was concerned about the risk
[ ] I don't want to get it
[ ] Other - Write In (Required):
_____

TDAP (tetanus, diphtheria, pertussis)
( ) I have gotten this shot – Skip #41
( ) I have not gotten this shot – Got to # 41
( ) I don't know if I've gotten this shot – Skip #41

41) Why didn't you get **the TDAP shot**?
[ ] I didn't know where to go to get it
[ ] The times to get it didn't work with my schedule
[ ] I couldn't afford it
[ ] I did not have transportation to get it
[ ] I didn't know I needed it or I don't know what it is
[ ] I wanted it but it wasn't available
[ ] I was concerned about the risk
[ ] I don't want to get it
[ ] Other - Write In (Required):
_____

COVID-19 Vaccine
( ) I have gotten this shot – Skip #42
( ) I have not gotten this shot – Got to # 42
( ) I don't know if I've gotten this shot – Skip #42

42) Why didn't you get **the COVID-19 vaccine**?
[ ] I didn't know where to go to get it
[ ] The times to get it didn't work with my schedule
[ ] I couldn't afford it
[ ] I did not have transportation to get it
[ ] I didn't know I needed it or I don't know what it is
[ ] I wanted it but it wasn't available
[ ] I was concerned about the risk
[ ] I don't want to get it
[ ] Other - Write In (Required):
_____
COVID-19 Boosters
( ) I have gotten this shot – Skip #43
( ) I have not gotten this shot – Got to # 43
( ) I don't know if I've gotten this shot – Skip #43

43) Why didn't you get **the COVID-19 booster**?
[ ] I didn't know where to go to get it
[ ] The times to get it didn't work with my schedule
[ ] I couldn't afford it
[ ] I did not have transportation to get it
[ ] I didn't know I needed it or I don't know what it is
[ ] I wanted it but it wasn't available
[ ] I was concerned about the risk
[ ] I don't want to get it
[ ] Other - Write In (Required):
_____

44) What kind of health care insurance do you currently have?*
( ) Health insurance through an employer (my own, my spouse's, or my parents)

( ) Health insurance through the government (such as Medicare, Medicaid, or Indian Health Service)
( ) Health insurance I or my spouse pays for on my/our own (such as Cobra or a health plan on the state or federal marketplace such as KYNECT)
( ) I do not have health insurance
( ) Not sure
( ) Prefer not to answer
45) What is your age*

46) Are you...?*
( ) Female
( ) Male
( ) Trans female/Transwoman
( ) Trans male/Transman
( ) Genderqueer/Gender nonconforming
( ) I prefer to describe my identity as... (write in):
_____
( ) Prefer not to answer

47) Do you think of yourself as…?*
( ) Straight or heterosexual
( ) Lesbian, gay, or homosexual
( ) Bisexual
( ) Another identity (please specify):
_____
( ) Not sure
( ) Prefer not to answer

48) What is your race/ethnicity? **Please select all that are true for you.***
[ ] White
[ ] Black or African American
[ ] American Indian or Alaska Native
[ ] Hispanic, Latino(a), or Spanish
[ ] Asian
[ ] Native Hawaiian or other Pacific Islander
[ ] Other - Write In (Required):
_____
[ ] Prefer not to answer
49) What is your marital status?*
( ) Married
( ) Divorced
( ) Widowed
( ) Separated
( ) Never been married
( ) Living with a partner
( ) Prefer not to answer

50) What is the highest grade or year of school you completed?*
( ) Never attended school or only attended kindergarten
( ) Grades 1 through 8 (Elementary)
( ) Grades 9 through 11 (Some high school)
( ) High school graduate
( ) GED or alternative high school credential
( ) Some college credit but no degree
( ) Associates degree
( ) Bachelor's degree (for example, BA, BS)
( ) Master's degree (for example, MA, MS, MBA)
( ) Professional or doctoral degree (for example, MD, JD, PhD)
( ) Prefer not to answer

51) Are you currently…? **Please select all that apply.***
[ ] A Student
[ ] Employed for wages
[ ] Self-Employed
[ ] A stay-at-home parent
[ ] Unemployed and looking for work
[ ] Unemployed and not looking for work (BUT NOT a stay-at-home parent or retired)
[ ] Retired
[ ] Unable to Work
[ ] Prefer not to answer

52) What was your total household income last year before taxes?*
( ) Less than $10,000
( ) $10,001 to $15,000
( ) $15,001 to $20,000
( ) $20,001 to $35,000
( ) $35,001 to $50,000
( ) $50,001 to $65,000
( ) $65,001 to $80,000
( ) $80,001 to $100,000
( ) $100,001 to $120,000
( ) $120,001 to $150,00
( ) More than $150,000
( ) Prefer not to answer

53) How would you describe your financial well-being? *
( ) Living comfortably
( ) Getting by
( ) Finding it difficult to get by
( ) Finding it very difficult to get by
( ) Prefer not to answer

54) What is your housing situation today? *
( ) I have housing
( ) I have housing today, but I am worried about losing housing in the future
( ) I do not have permanent housing (staying with others, in a hotel, in a shelter, living outside on the street, on a beach, in a car, or in a park)
( ) Prefer not to answer

55) How many people, including you, live with you most of the time?
_____

Discrimination
56) How often have you been discriminated against or treated unfairly for any of the following?

	Never	**Sometimes**	**Regularly**
Race/Ethnicity			
Religion			
Age			
Gender			
Sexual Orientation			

Data Collected during the 2022-2024 Survey Cycle

A Day Just for Women

The chart below outlines data collected by the BRIGHT Coalition at Med Center Health's "A Day Just for Women" event surveying women on how often they get a routine mammogram and how often they see their gynecology for routine visits.

Age	Routine Mammogram	How often?	Routine Gynecology?	How often?
58	Yes	Annually	Yes	Annually
56	Yes	Annually	Yes	Annually
56	Yes	Annually	Yes	As Needed
47	Yes	Annually	Yes	Annually
59	Yes	Annually	Yes	Annually
59	Yes	Annually	Yes	Annually
38	Yes	Annually	Yes	Annually
28	No		Yes	Every 3 Years
27	Yes	Annually	Yes	Annually
63	Yes	Annually	Yes	Annually
36	No		Yes	Annually
33	No		Yes	Annually
57	No		No	

30	No		Yes	Annually
42	Yes	Annually	Yes	Annually
37	Yes	Annually	Yes	Annually
29	No		Yes	Annually
44	Yes	Annually	Yes	Annually
39	No		Yes	Annually
56	Yes	Every 2 Years	No	As Needed
23	No		Yes	Annually
23	No		No	
64	Yes	Annually	No	
42	Yes	Annually	Yes	Annually
53	Yes	Annually	No	
48	Yes	Annually	Yes	Annually
60	Yes	Annually	Yes	Annually
63	Yes	Annually	No	
51	Yes	Annually	Yes	Annually

53	Yes	Annually	No	
40	Yes	Annually	Yes	Annually
46	No		No	
42	Yes	Annually	Yes	Annually
53	Yes	Annually	Yes	Annually
65	Yes	Annually	No	
40	Yes	Every 6 months	Yes	Annually
56	Yes	Annually	Yes	Annually
54	Yes	Annually	Yes	Annually
44	Yes	Every 3 Years	Yes	Every 2 years
50	Yes	Annually	Yes	Annually
35	Yes	Every 4 Months	Yes	Annually
40	No		Yes	Annually
43	Yes	Annually	Yes	Annually
33	No		Yes	Annually
29	No		Yes	Annually

65	Yes	Annually	Yes	Annually
38	Yes	Annually	Yes	Annually
49	Yes		Yes	Annually
53	Yes	Annually	No	
50	Yes	Annually	Yes	Every 6 Months
57	Yes	Annually	Yes	Annually
34	No		Yes	Annually
29			Yes	Annually
50	Yes	Annually	Yes	Annually
48	Yes	Annually	Yes	Annually
29	No		Yes	Annually
23	No		Yes	Annually
43	Yes	Annually	Yes	Annually
60	Yes	Annually	Yes	Annually
63	Yes	Annually	Yes	Annually
65	Yes	Annually	Yes	Annually
53	Yes	Annually	Yes	Annually

52	Yes	Annually	Yes	Annually
32	No		Yes	Annually
41	Yes	Annually	Yes	Annually
57	Yes	Annually	Yes	Annually
65	Yes	Annually	No	
35	No		Yes	Annually
34	No		Yes	Annually
49	Yes	Annually	Yes	Annually
42	Yes	Annually	Yes	Annually
71	Yes		Yes	Annually
66	Yes	Annually	Yes	Annually
66	Yes	Every 2 years	Yes	Every 2 Years
75	Yes	Annually	Yes	Annually
69	Yes	Annually	No	
69	Yes	Annually	Yes	Annually
79	Yes	Annually	No	
87	No		Yes	Every 2 Years

PRIDE Festival

The Medical Center set up a vendor table at the annual PRIDE Festival in 2023. The attendees were asked to share their barriers to healthcare as well as their healthcare needs. Responses outlined below.

What are your barriers to healthcare?

- Accessibility
- Not enough effort diagnosing the symptoms they can't figure out
- Money
- High Deductibles
- Affordable mental health care
- Costs are always high
- Stigmatization
- Money
- Low income; anxious to advocate for myself
- Mental health
- Doctors who dismiss all issues as obesity or anxiety
- Doctors not believing women (esp. fat women)
- Awareness
- Not being believed
- Insurance cost

What are your healthcare needs?

- PTSD
- Love is Love
- Someone who listens
- PTSD, Heart Problems, Joint issues
- Psychiatry & controlled medicine
- Depression
- Vulvodynia
- A Dr. who knows what PCOS is and how to actually help!
- Nobody believes my symptoms are real
- Gender affirming care
- Mental Health
- POTS, ADHD, AUTISM, EDS, DID
- $200 to get tested & told not sick

- Weight loss
- Undiagnosed stomach issues
- Psychiatric care w/kind professionals
- Eating disorder
- Mental Health Issues
- Mental Health Insurance benefits with GGC
- Weight loss care
- Mental health, weight loss
- Long appt. wait for specialists
- Mental health services
- High deductibles
- High-deductibles, no help paying the bills for medical
- Mental health
- Mental health testing & my medical needs being taken seriously as a plus sized woman
- Bipolar I (you aren't alone)
- Less stigma against BPD
- ADHD

Med Center Health -Health & Wellness Expo

At the Med Center Health Annual Health & Wellness Expo in 2024, the MCH outpatient diabetes coordinator wanted to know why attendees diagnosed with diabetes had not attended a Diabetes Self-Management and Education program.

These were the responses:

Insurance doesn't cover	2
I didn't know about the program	54
A1C at target goal	9
No time	2
No transportation	0
I know all I need to know	0

Activities Completed for 2022-2024 Cycle

The Medical Center at Caverna

2022-2024 Community Health Needs Assessment Activities

Priority Issues:

Lung Cancer Screenings

- Became a Designated Lung Cancer Screening Center by the American College of Radiology
- Utilized Facebook and the hospital's digital sign to promote the availability of low-dose lung cancer screenings
- Completed 625 low-dose lung cancer screenings during the three years ending 12/31/24

Substance Abuse

- Treated 55 patients who were battling opioid addiction in our Med Center Health Primary Care Munfordville clinic
- Promoted the availability of our Medication-assisted treatment program to providers in the community

Stroke Readiness

- Became an Acute Stroke Ready Hospital as certified by The Joint Commission
- Increased compliance of "Door to CT Results" within 45 minutes from 23% in 2022 to 93% in 2024
- Increased compliance of "Door to Lab Results" within 45 minutes from 23% in 2022 to 100% in 2024

Other Activities:

- Improved community wellness by seeing over 3,000 patients for wellness visits in our two rural health clinics

- Provided school health assistants to 6 schools in the community thereby caring for more than 2,200 students and positively impacting the health of those students plus school employees
- Provided on-site nursing services for T. Marzetti and Sister Schubert, two of the community's three largest industrial employers
- Provided stroke screenings and blood pressure screenings to 165 individuals at the annual Horse Cave Heritage Festival
- Provided information about our Senior Perspectives program (outpatient senior mental health program) to the Horse Cave Rotary Club and various other health and community events
- Participated in "Truth or Consequences" program at Hart County High School and educated around 300 students on the importance and cost of health care in their lives
- Provided CPR training to Hart County Family Resource Center staff
- Participated in "Pipeline to Workforce" presentation to parents, Board members and other community members at Hart County Schools Board meeting, explaining the partnership between the school system and the hospital for increasing the local health care workforce
- Participated in the "Dollars & Cents" program at Caverna Elementary School, providing education about the importance and cost of healthcare to students
- Provided a Hart County Community Health Fair including various health screenings and information from more than 20 community health partners; all services were free and included balance screenings, blood pressure checks, body fat analysis, depression screening, glucose checks, lipid panels, oral screening stroke risk assessment and others
- Provided a random drug testing program for Hart County Schools that included more 400 students over three years
- Participated in Caverna High School's Career Fair by showcasing hospital employment opportunities to more than 100 students
- Participated in Hart County High School's Career Fair by showcasing hospital employment opportunities to 225 students