

2019

Community Health Needs Assessment



Steering Committee Members

Aaron Boettcher

Director of Budget and Decision Support

Sue Goulding

Marketing Coordinator

Lisa Hanusin

Coordinator of Stroke and Chest Pain

Dale Hocking

Vice President and Chief Financial Officer

David Jones

Controller

Joanne Miller

Co-Interim Chief Executive Officer

Joann Moretti

Director of Quality and Compliance

Deb Mueller

Director of Cardiology and Clinical Support

April Okerson

Director of Pediatrics

Angela Palahniuk

Executive Director, Oncology Services

Steven Seeley

Co-Interim Chief Executive Officer

Jennifer Suess

Director of Obstetrics and Neonatal Intensive Care Unit

Michelle Wilson

Director of Strategic Planning

Table of Contents

| | |
|----------------------------------------------------------------------------|-----------|
| Acknowledgements..... | 4 |
| Executive Summary | 5 |
| How the Assessment was Conducted..... | 7 |
| Evaluation of the Impact of Actions Taken Since the Last CHNA | 8 |
| Community Served by Jupiter Medical Center | 9 |
| Community Profile..... | 10 |
| Socioeconomic Characteristics of the Community | 13 |
| Physical Environment..... | 18 |
| Health Status of the Community-Leading Health Indicators..... | 20 |
| Health Status of the Community-Health Outcomes | 30 |
| Health Status of the Community-Mortality..... | 34 |
| Primary Data Assessment | 35 |
| Community Resources | 46 |
| Prioritization of Identified Health Needs | 49 |

Acknowledgements

The Community Health Needs Assessment (CHNA) for Jupiter Medical Center supports the organization's mission:

"To deliver excellent and compassionate health care advancing the well-being of the people we serve."

This health assessment was made possible because of the commitment toward addressing the health needs in Palm Beach and Martin Counties. Many individuals across the organization devoted time and resources to the completion of this assessment.

Jupiter Medical Center would also like to thank leaders from the following community organizations who participated in one-on-one interviews and provided valuable information to be used in the assessment:

- El Sol Neighborhood Resource Center
- Florida Department of Health in Palm Beach
- Health Care District of Palm Beach County
- Healthier Jupiter
- Jupiter Medical Center's Medical Staff
- MyClinic
- Palm Beach Schools
- Pediatric Associates
- Town of Jupiter

This Community Health Needs Assessment has been facilitated by Crowe LLP ("Crowe"). Crowe is one of the largest public accounting, consulting, and technology firms in the United States. Crowe has significant healthcare experience including providing services to hundreds of large healthcare organizations across the country. For more information about Crowe's healthcare expertise visit www.crowe.com/industries/healthcare.

Written comments regarding the health needs that have been identified in the current CHNA should be directed to:

Sue Goulding
Marketing Coordinator
Jupiter Medical Center
SGoulding@jupitermed.com
(561) 263-3861

Executive Summary

Jupiter Medical Center (hereinafter referred to as “JMC” or Jupiter Medical Center) is an independent not-for-profit 327-bed regional medical center. Jupiter Medical Center is the first and only hospital in Palm Beach, Martin, St. Lucie, Indian River, Dade and Broward counties to receive a five-star rating for patient safety and quality of care—the highest ranking awarded by the Centers for Medicare and Medicaid Services (CMS). The ranking places the hospital in the top 7 percent of the nation’s hospitals. In addition, the Leapfrog Group, a national health care watchdog organization, recognized Jupiter Medical Center as a Top Hospital and awarded the hospital an ‘A’ in overall patient safety and quality care. World-class physicians, strategic partnerships, and innovative techniques and technology enable Jupiter Medical Center to provide a broad range of services with specialty concentrations in neurosciences and stroke care; cardiac and vascular care; oncology; women’s and children’s services; orthopedics and spine care; urgent care; and other key areas. Founded in 1979, Jupiter Medical Center has approximately 1,689 team members, 650 physicians, 593 nurses and 640 volunteers.

JMC’s mission is to deliver excellent and compassionate healthcare advancing the well-being of the people it services. JMC fulfills its mission by focusing on the following core values in order to be recognized as the leading health care organization in the region: Respect, Integrity, Excellence, Accountability, Teamwork and Courage.

JMC desires to continue providing clinical programs and services to meet community needs, while also pursuing continuous improvement in existing and future programs to improve the overall health of the community it serves. As such, JMC has conducted a Community Health Needs Assessment (CHNA) from October 2018 through July 2019, using primary and secondary data, to ensure community benefit programs and resources are focused on significant health needs as perceived by the community at large, as well as alignment with JMC’s mission, services and strategic priorities.

The community served by JMC is defined primarily by four zip codes and secondarily by five zip codes within Palm Beach and Martin Counties. Defining the CHNA community similarly to its primary and secondary service areas will allow Jupiter Medical Center to more effectively focus its resources to address identified significant health needs, targeting areas of greatest need and health disparities.

JMC obtained input from 12 leaders representing public health, public schools, social services, and local government, Jupiter Medical Center’s medical staff and the community at-large through one-on-one interviews. Primary input was also obtained by conducting a community health survey distributed to members of the community.

Secondary data was assessed including:

- Demographics (population, age, sex, race)
- Socioeconomic indicators (household income, poverty, unemployment, educational attainment)
- Health access indicators
- Community health status indicators (causes of death, chronic conditions, health behaviors, etc.)
- Availability of healthcare facilities and resources

Information gathered in the above steps was reviewed and analyzed to identify health issues in the community.

The process identified the following health needs:

Identified Health Needs (in alphabetical order)

- Access to Healthcare
- Access to Pediatric Healthcare Services
- Affordability of Healthcare
- Cancer
- Chronic Lower Respiratory Disease
- Elder Care Services
- Heart Disease
- High Blood Pressure/Stroke
- Mental Health/Behavioral Health
- Need for Health Education
- Nutrition & Exercise/Diabetes
- Substance Abuse

Health needs were prioritized with input from a broad base of members of Jupiter Medical Center's Leadership Team and the Community Health & Benefit Committee of the Board of Directors.

A review of existing community benefit and outreach programs was also conducted as part of this process and opportunities for increased community collaboration were explored.

Based on the information gathered through this Community Health Needs Assessment and the prioritization process described above, JMC prioritized the needs below to address over the next three years.

- Access to Pediatric Healthcare Services
- Cancer
- Heart Disease
- High Blood Pressure/Stroke

Opportunities for health improvement exist in each area. JMC will work to identify areas where JMC can most effectively focus its resources to have significant impact and develop an Implementation Strategy for 2020-2022.

How the Assessment was Conducted

JMC conducted a community health needs assessment to support its mission responding to the needs in the community it serves and to comply with the Patient Protection and Affordable Care Act of 2010 and federal tax-exemption requirements. Identified health needs were prioritized in order to facilitate the effective allocation of hospital resources to respond to the identified health needs. Based on current literature and other guidance from the Treasury and the IRS, the following steps were conducted as part of JMC's CHNA:

- Community benefit initiatives implemented over the course of the last three years and progress on the prior implementation strategy were evaluated. See Evaluation of Impact of Actions Taken Since the Last CHNA.
- The “community” served by JMC was defined as the primary and secondary service areas served by JMC. The CHNA community was determined by geography and is inclusive of medically underserved, low-income, minority populations and people with limited English proficiency.
- Population demographics and socioeconomic characteristics of the community were gathered and assessed utilizing various third parties.
- The health status of the community was assessed by reviewing community health status indicators from multiple sources. Health indicators with significant opportunity for improvement were noted. Information on the leading causes of death and morbidity information was analyzed in conjunction with social determinants of health.
- Community input was obtained through one-on-one interviews with 12 key stakeholders. Stakeholders provided input on behalf of public health, medically underserved and minority populations and the community as a whole.
- Community input was also obtained through an electronic survey distributed to the community. Findings are described in Primary Data Assessment.
- An inventory of healthcare facilities and other community resources potentially available to address the significant health needs identified through the CHNA was prepared.
- Identified health needs were then prioritized taking into account community perception regarding the significance of each identified need as well as the ability for JMC to impact overall health based on alignment with JMC's mission and services provided. JMC's Leadership participated in identifying and prioritizing significant health needs.

Evaluation of the Impact of Actions Taken Since the Last CHNA

Jupiter Medical Center provides a broad array of services that provide benefit to the community. Below is a summary of some of JMC's significant community benefit initiatives taken since the last CHNA.

Cancer

- JMC continues to expand oncology services including the addition of state-of-the-art equipment such as the TrueBeam® Linear Accelerator.
- Construction is nearly complete on the Anderson Family Cancer Institute which is scheduled to open in late 2019.
- JMC had added a Gastrointestinal Surgical Oncology Program, which includes complex surgical procedures and advanced treatments, including hyperthermic intraperitoneal chemotherapy (HIPEC).
- Expansion of support groups (Living with Cancer, Living with Breast Cancer, Living with Lung Cancer, Caregivers Support Group, Gynecologic Cancer Support Group).
- JMC supports MyClinic by providing screenings, diagnostic imaging and biopsies.

Heart Disease

- JMC has added a third cardiac cath lab which includes electrophysiology services.
- The Jupiter Heart Club is hosted by JMC and averages 60 to 100 participants monthly. Physicians and allied health professionals address topics including:
 - Heart Healthy Lifestyle Changes
 - Understanding Atrial Fibrillation
 - The Heart-Brain Connection in Stroke
 - Vascular Disease
 - Cooking Demo & Nutrition
 - Sleep Issues and Heart Health
 - Stress Management and Heart Health
 - Cardiac Rehabilitation
- JMC conducts monthly heart health screenings as well as Heart and Stroke Health Fairs at JMC as well as in Martin County.

Nutrition, Exercise and Diabetes

- Monthly educational programs are conducted at El Sol and MyClinic.
- Participation in Juvenile Diabetes Research Fund (JDRF) annual walk and the Diabetes Coalition county-wide screening program.
- JMC participates in Pop-Up Pantries throughout the community which is a program coordinated through a collaboration with Healthier Jupiter, MyClinic, Health Care Tax District and Jupiter Medical Center's Diabetes Education Program. This program provides health food at no cost to underserved populations along with monitoring of physical activity, weight loss and blood glucose levels.

Community Served by Jupiter Medical Center

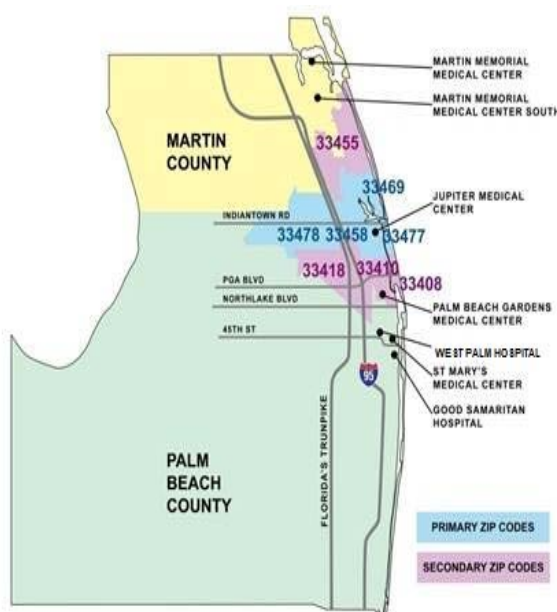
JMC is located in Jupiter, Florida. A majority of the patients served by the hospital reside in northern Palm Beach County and southeast Martin County. Palm Beach County makes up 1,970 square miles and Martin County makes up 543 square miles. Palm Beach County is the state’s third largest county by population while Martin County is the 31st largest county out of 67 counties in the state of Florida.

According to the most recent available U.S. Census data dated July 1, 2017, the population for both counties has experienced significant growth since 2010 with reported population percentage increases of 11.5% for Palm Beach County and 8.9% for Martin County from April 1, 2010 to July 1, 2017.

The community served by JMC is defined primarily by four zip codes and secondarily by five zip codes within Palm Beach and Martin Counties; therefore, demographic and health indicators are presented for these two counties.

Within the data presented in the CHNA, zip code level data is used to report information for the primary and secondary service area, where available, and county level data is presented where zip code level data is unavailable.

| Zip Code | Community |
|-------------------------------|--------------------|
| Primary Service Area | |
| 33458 | Jupiter |
| 33477 | Jupiter |
| 33478 | Jupiter |
| 33469 | Tequesta |
| Secondary Service Area | |
| 33455 | Hobe Sound |
| 33410 | Palm Beach Gardens |
| 33418 | Palm Beach Gardens |
| 33408 | North Palm Beach |
| 33403 | West Palm Beach |



Community Profile

The U.S. Bureau of Census has compiled population and demographic data. Table 1 below shows the total population of the community by age and gender. The elderly population (Age 65+) makes up 23.1% of JMC’s Primary Service Area and 28.2% of JMC’s Secondary Service Area. These percentages are consistent with the populations in Palm Beach and Martin Counties, but they are significantly higher than state and national percentages.

Table 1
Jupiter Medical Center
Population by Age and Gender

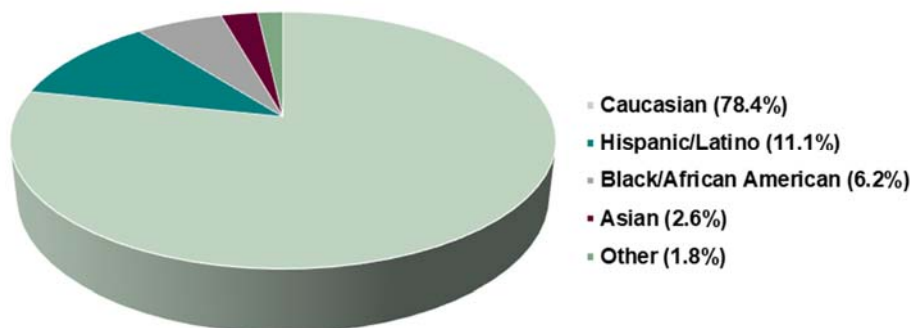
| | Age 0-17 | Age 18-34 | Age 35-54 | Age 55-64 | Age 65+ | Total | Male | Female |
|----------------------------|---------------|---------------|---------------|---------------|---------------|----------------|---------------|---------------|
| JMC Primary Service Area | 18,119 | 15,512 | 26,253 | 15,158 | 22,495 | 97,537 | 48,076 | 49,461 |
| JMC Secondary Service Area | <u>20,303</u> | <u>21,111</u> | <u>31,280</u> | <u>19,452</u> | <u>36,167</u> | <u>128,313</u> | <u>61,017</u> | <u>67,296</u> |
| JMC CHNA Community | 38,422 | 36,623 | 57,533 | 34,610 | 58,662 | 225,850 | 109,093 | 116,757 |
| Palm Beach County | 278,119 | 279,267 | 358,245 | 182,634 | 328,507 | 1,426,772 | 691,154 | 735,618 |
| Martin County | 26,155 | 24,110 | 35,516 | 23,747 | 46,191 | 155,719 | 77,098 | 78,621 |
| Florida | 4,111,582 | 4,373,366 | 5,218,038 | 2,648,572 | 3,926,889 | 20,278,447 | 9,914,361 | 10,364,086 |
| United States | 73,601,279 | 75,175,657 | 83,747,562 | 40,747,520 | 47,732,389 | 321,004,407 | 158,018,753 | 162,985,654 |

| | Age 0-17 | Age 18-34 | Age 35-54 | Age 55-64 | Age 65+ | Total | Male | Female |
|----------------------------|----------|-----------|-----------|-----------|---------|--------|-------|--------|
| JMC Primary Service Area | 18.6% | 15.9% | 26.9% | 15.5% | 23.1% | 100.0% | 49.3% | 50.7% |
| JMC Secondary Service Area | 15.8% | 16.5% | 24.4% | 15.2% | 28.2% | 100.0% | 47.6% | 52.4% |
| JMC CHNA Community | 17.0% | 16.2% | 25.5% | 15.3% | 26.0% | 100.0% | 48.3% | 51.7% |
| Palm Beach County | 19.5% | 19.6% | 25.1% | 12.8% | 23.0% | 100.0% | 48.4% | 51.6% |
| Martin County | 16.8% | 15.5% | 22.8% | 15.2% | 29.7% | 100.0% | 49.5% | 50.5% |
| Florida | 20.3% | 21.6% | 25.7% | 13.1% | 19.4% | 100.0% | 48.9% | 51.1% |
| United States | 22.9% | 23.4% | 26.1% | 12.7% | 14.9% | 100.0% | 49.2% | 50.8% |

Data Source: US Census Bureau, American Community Survey, 2013-17. Source geography: Tract

While the relative age of the population can impact community health needs, so can the ethnicity and race of a population. The following figure shows the racial demographics of the JMC service area. The Caucasian population makes up 78.4% of the population, with Hispanic/Latino population accounting for 11.1%, Black/African American 6.2%, and all others at less than 5%.

Racial Demographics of the JMC CHNA Community



Population with any Disability

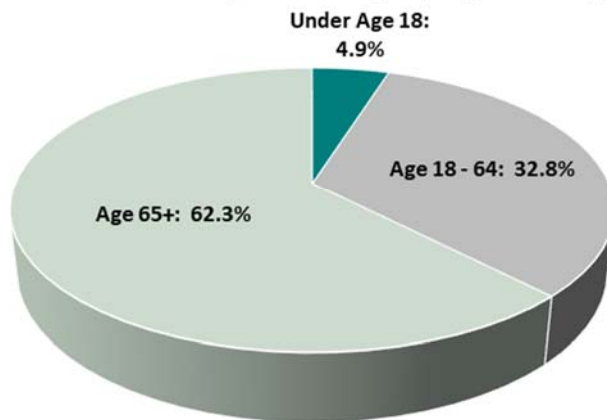
This indicator reports the percentage of the total civilian non-institutionalized population with a disability. This indicator is relevant because disabled individuals comprise a vulnerable population that requires targeted services and outreach by providers. Approximately 11% of individuals in the JMC CHNA Community have a disability. The percent of population with a disability is favorable to county, state and national rates. Disabilities impact individuals age 65+ at higher rates than other age groups.

Table 2
Jupiter Medical Center
Population with a Disability

| | Total Population with a Disability | Total Population (For Whom Disability Status is Determined) | Percent Population with a Disability |
|-----------------------------------|------------------------------------|-------------------------------------------------------------|--------------------------------------|
| JMC Primary Service Area | 9,048 | 97,270 | 9.3% |
| JMC Secondary Service Area | 15,146 | 127,677 | 11.9% |
| JMC CHNA Community | 24,194 | 224,947 | 10.8% |
| Palm Beach County | 174,474 | 1,414,266 | 12.3% |
| Martin County | 22,676 | 152,694 | 14.9% |
| Florida | 2,673,685 | 19,967,931 | 13.4% |
| United States | 39,792,082 | 316,027,641 | 12.6% |

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract

JMC CHNA Community
Population with Any Disability by Age Group, Total



Population in Limited English Households

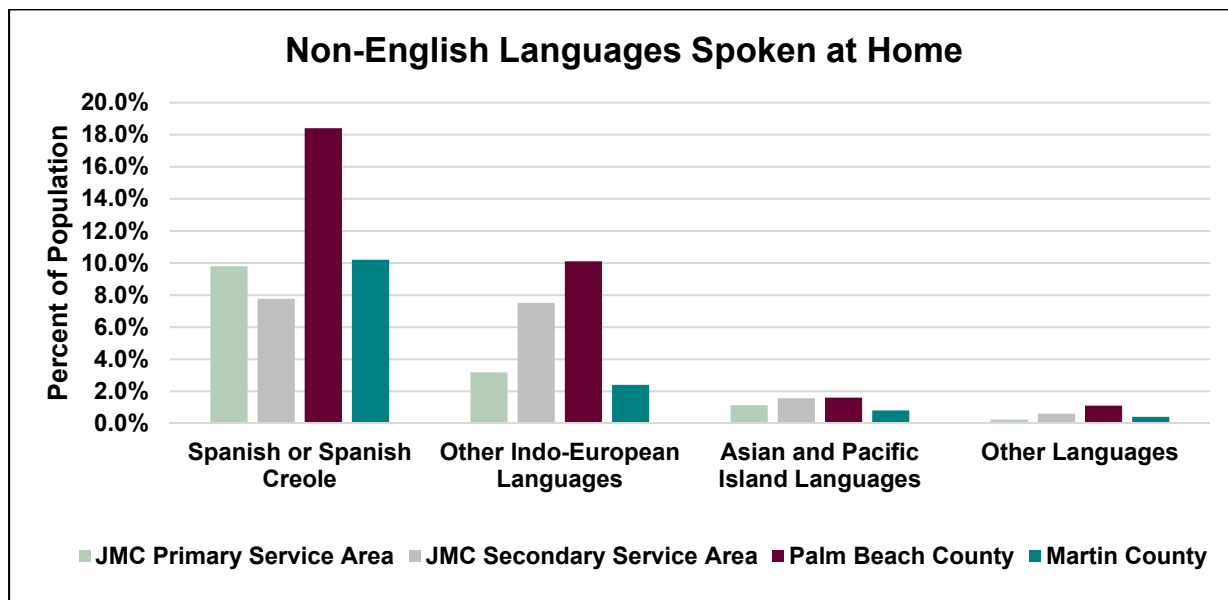
The percentage of the population aged five and older living in Limited English speaking households is reported in Table 3 below. This indicator is significant as it identifies households and populations that may need English-language assistance. Language deficiencies have a large impact on the household’s ability not only to understand and comprehend diagnosis information received in English, but also to communicate with healthcare professionals while receiving or trying to receive care.

Table 3
Jupiter Medical Center
Population in Limited English Households

| | Total Population Age 5+ | Linguistically Isolated Population | Percent Linguistically Isolated Population |
|-----------------------------------|-------------------------|------------------------------------|--------------------------------------------|
| JMC Primary Service Area | 93,035 | 3,173 | 3.4% |
| JMC Secondary Service Area | 122,980 | 3,910 | 3.2% |
| JMC CHNA Community | 216,015 | 7,083 | 3.3% |
| Palm Beach County | 1,353,509 | 98,362 | 7.3% |
| Martin County | 149,370 | 5,891 | 3.9% |
| Florida | 19,173,085 | 1,241,864 | 6.5% |
| United States | 301,150,892 | 13,323,495 | 4.4% |

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract

The diversity of languages spoken within the population creates a need for multilingual health education and services. The figure below shows the languages other than English spoken in the home with Spanish as the most common. “Other Indo-European Languages” most prominently feature French and Italian speakers.



Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract:

Socioeconomic Characteristics of the Community

The socioeconomic characteristics of a geographic area influence the way residents access healthcare services and perceive the need for healthcare services within society. The economic status of an area may be assessed by examining multiple variables within the community. Those variables also have an impact on community health, including household income and poverty, employment, uninsured population and educational attainment for the community. These standard measures will be used to compare the socioeconomic status of the service area to the state of Florida as well as the United States.

Household Income and Poverty

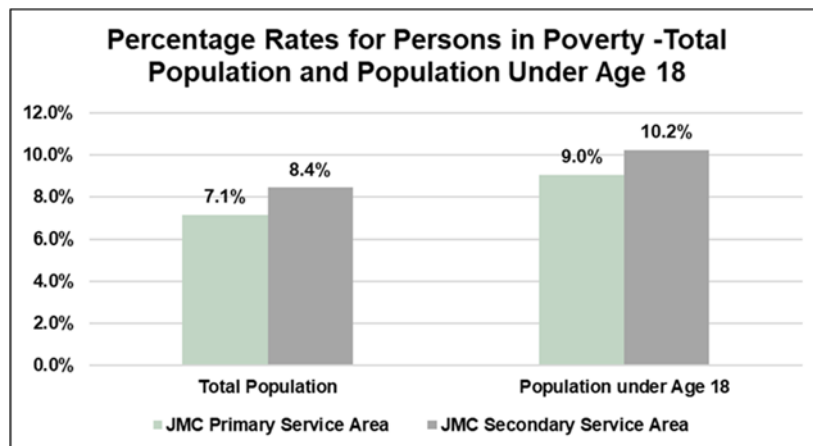
Table 4 presents household income statistics for the CHNA community. Average household income for the CHNA community exceeds state and national rates. The percentage of individuals in the JMC CHNA Community living below 100% Federal Poverty Level (“FPL”) is also favorable to state and national averages.

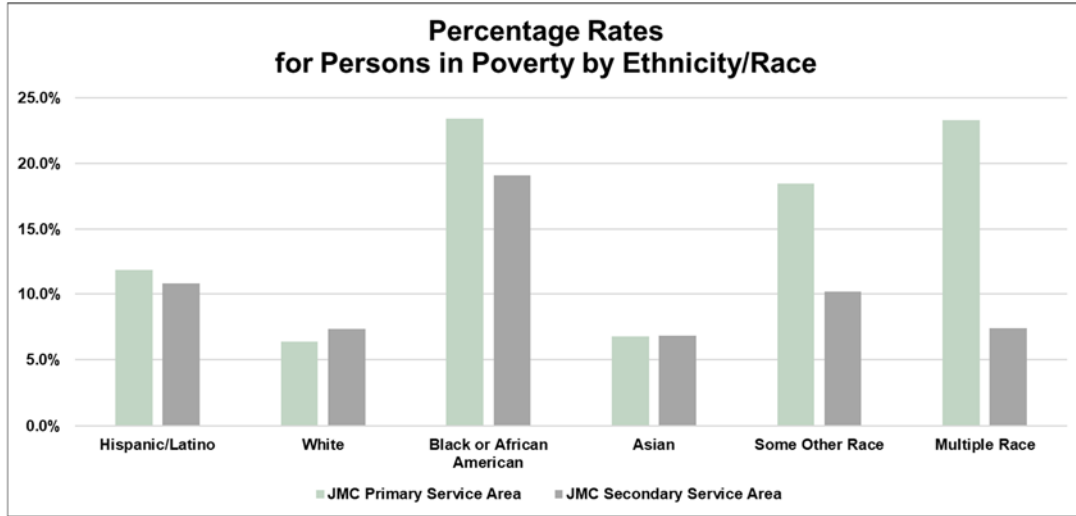
Table 4
Jupiter Medical Center
Household Income and Poverty

| | Average Household Income | Percentage of Population Living below 100% Federal Poverty Level | Percentage of Population under Age 18 in Poverty | Percentage of Children Eligible for Free/Reduced Price Lunch |
|-----------------------------------|--------------------------|------------------------------------------------------------------|--------------------------------------------------|--------------------------------------------------------------|
| JMC Primary Service Area | \$120,354 | 7.1% | 9.0% | 35.6% |
| JMC Secondary Service Area | \$110,555 | 8.4% | 10.2% | 58.2% |
| JMC CHNA Community | \$114,669 | 7.9% | 9.7% | 51.0% |
| Palm Beach County | \$89,827 | 13.4% | 20.3% | 58.9% |
| Martin County | \$88,405 | 10.9% | 15.6% | 43.3% |
| Florida | \$72,993 | 15.5% | 22.3% | 58.9% |
| United States | \$81,283 | 14.6% | 20.3% | 52.6% |

Data Source: US Census Bureau, American Community Survey, 2013-17. Source geography: Tract
National Center for Education Statistics, NECS-Common Core of Data, 2015-16. Source geography: Address.

Poverty is a key driver of health status and is relevant because poverty creates barriers to access, including health services, healthy food choices and other factors that contribute to poor health. Poverty rates are higher for children and the highest rates are among Black/African Americans and persons of multiple races.





Within the JMC CHNA Community, 20,065 students, or 51.0% of public school students, are eligible for free/reduced price lunches out of 39,364 total students enrolled. This indicator is relevant because it assesses populations which are more likely to have multiple health access, health status, and social support needs. Additionally, when combined with poverty data, providers can use this measure to identify gaps in eligibility and enrollment.

Unemployment Rate

The unemployment rate for the JMC CHNA Community is consistent with state and national rates.

Table 5
Jupiter Medical Center
Unemployment Rate

| | Labor Force | Number Employed | Number Unemployed | Unemployment Rate |
|-----------------------------------|----------------|-----------------|-------------------|-------------------|
| JMC Primary Service Area | 48,710 | 46,797 | 1,913 | 3.9% |
| JMC Secondary Service Area | 63,295 | 60,814 | 2,481 | 3.9% |
| JMC CHNA Community | 112,005 | 107,611 | 4,394 | 3.9% |
| Palm Beach County | 721,916 | 693,531 | 28,385 | 3.9% |
| Martin County | 72,859 | 70,049 | 2,810 | 3.9% |
| Florida | 10,191,327 | 9,807,910 | 383,417 | 3.8% |
| United States | 162,996,774 | 156,527,318 | 6,469,456 | 4.0% |

Data Source: US Department of Labor, Bureau of Labor Statistics. 2018 - August. Source geography: County.

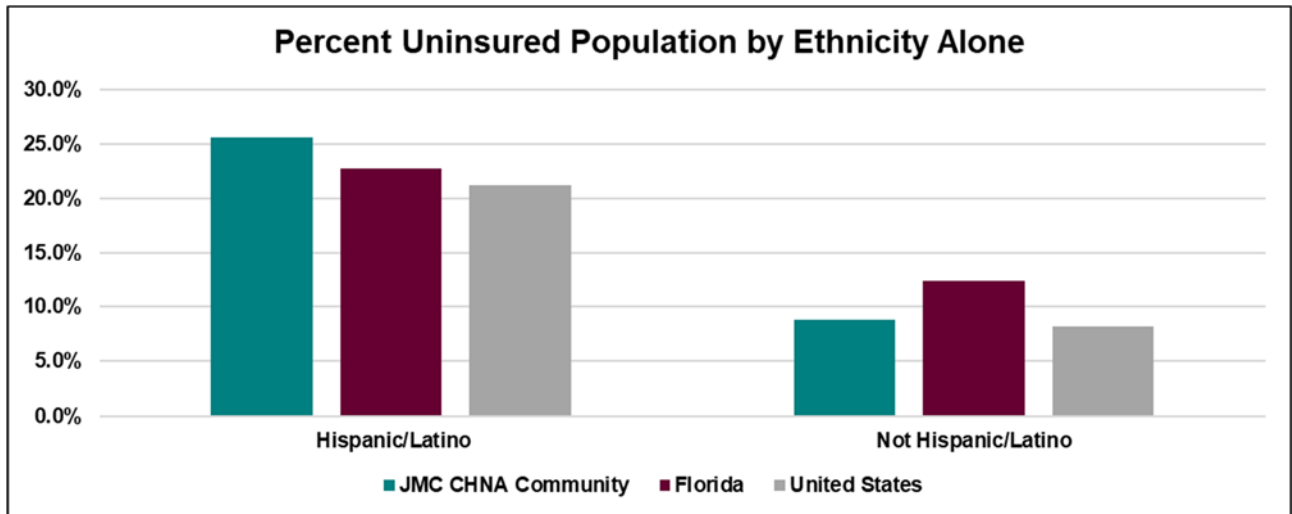
Uninsured Population

Table 6 reports the percentage of the total civilian noninstitutionalized population without health insurance. The uninsured population is relevant because lack of insurance is a primary barrier to healthcare access, including regular primary care, specialty care and other health services that contribute to poor health status. Within the JMC CHNA Community, 23,945 persons are uninsured. The percentages of individuals who are uninsured in the JMC service area are slightly higher than national percentages. The percentage of uninsured adults across the state of Florida still remains one of the highest rates among the 50 states and is ranked 46th of 50 states behind Texas, Oklahoma, Alaska and Georgia.

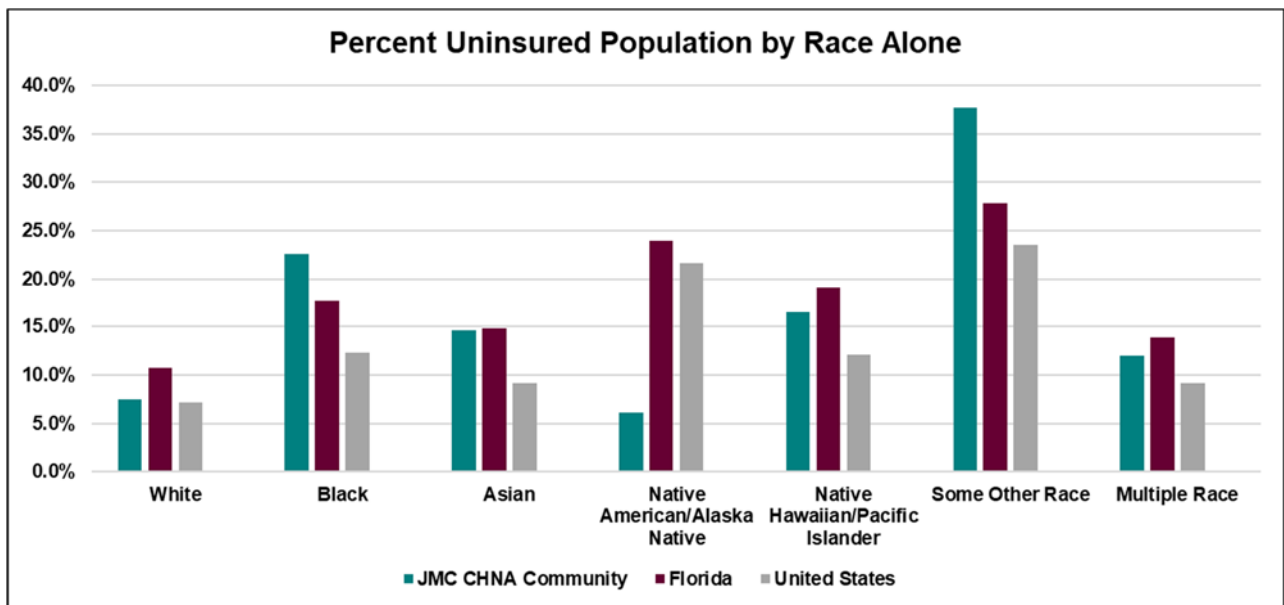
Table 6
Jupiter Medical Center
Insurance Coverage

| | Total Population (For Whom Insurance Status is Determined) | Total Uninsured Population | Percent Uninsured Population |
|-----------------------------------|------------------------------------------------------------------|-------------------------------|---------------------------------|
| JMC Primary Service Area | 92,270 | 10,334 | 11.2% |
| JMC Secondary Service Area | 127,677 | 13,611 | 10.7% |
| JMC CHNA Community | 219,947 | 23,945 | 10.9% |
| Palm Beach County | 1,414,266 | 209,909 | 14.8% |
| Martin County | 152,694 | 18,829 | 12.3% |
| Florida | 19,967,931 | 2,982,945 | 14.9% |
| United States | 316,027,641 | 33,177,146 | 10.5% |

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract



Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract



Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract

Educational Attainment

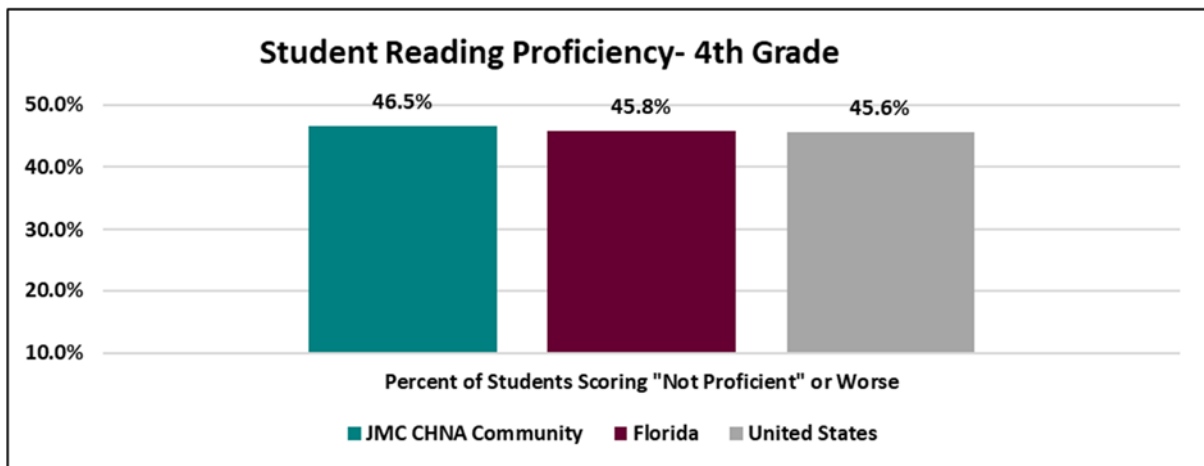
Linkages exist between education, economy and quality of life. Education often plays a key role in career success and economic self-sufficiency. Within the CHNA Community, 43% of individuals, over 25 years old, have a bachelor’s degree or higher. However, within the CHNA community there are 12,162 persons aged 25 and older without a high school diploma (or equivalency) or higher. This represents 7% of the total population aged 25 and older and affects household income levels, insured population and levels of insurance coverage of the community.

**Table 7
Jupiter Medical Center
Educational Attainment**

| | Total Population Age 25+ | Population Age 25+ with No High School Diploma | Percent Population Age 25+ with No High School Diploma | Percent Population Age 25+ with Bachelor’s Degree or Higher |
|-----------------------------------|--------------------------|------------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------|
| JMC Primary Service Area | 74,022 | 4,464 | 6.0% | 45.4% |
| JMC Secondary Service Area | 100,915 | 7,698 | 7.6% | 41.3% |
| JMC CHNA Community | 174,937 | 12,162 | 7.0% | 43.0% |
| Palm Beach County | 1,037,150 | 123,896 | 11.9% | 34.8% |
| Martin County | 119,437 | 11,596 | 9.7% | 32.3% |
| Florida | 14,396,066 | 1,787,348 | 12.4% | 28.5% |
| United States | 216,271,644 | 27,437,114 | 12.7% | 30.9% |

Data Source: US Census Bureau, American Community Survey, 2013-17. Source geography: Tract

The inability to read English well is linked to poverty, unemployment, and barriers to healthcare access, provider communications and health literacy. Within JMC’s CHNA Community, the percentage of students in grade four whose reading skills tested below the “proficient” level for the English Language Arts portion of the Florida standardized test was 46.5% or roughly 900 students.



Data Source: US Department of Education, ED Facts. Accessed via DATA.GOV. 2014-15. Source geography: School District.

Physical Environment

Food Environment – Fast Food Restaurants

This indicator reports the number of fast food restaurants per 100,000 population. Fast food restaurants are defined as limited-service establishments primarily engaged in providing food services (except snack and non-alcoholic beverage bars) where patrons generally order or select items and pay before eating. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors. Rates for JMC's CHNA Community are favorable to state and national rates.

| | Total Population | Number of Establishments | Establishments, Rate per 100,000 Population |
|-----------------------------------|------------------|--------------------------|---------------------------------------------|
| JMC Primary Service Area | 89,623 | 54 | 60.3 |
| JMC Secondary Service Area | 117,530 | 80 | 68.1 |
| JMC CHNA Community | 207,153 | 134 | 64.7 |
| Palm Beach County | 1,320,134 | 937 | 71.0 |
| Martin County | 146,318 | 107 | 73.1 |
| Florida | 18,801,310 | 12,793 | 68.0 |
| United States | 308,745,538 | 237,922 | 77.1 |

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2016. Source geography: ZCTA

Food Environment – Grocery Stores

This indicator reports the number of grocery stores per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Included are delicatessen-type establishments. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores are excluded. This indicator is relevant because it provides a measure of health food access and environmental influences on dietary behaviors. The number of grocery stores per 100,000 population is slightly lower than the national average.

| | Total Population | Number of Establishments | Establishments, Rate per 100,000 Population |
|-----------------------------------|------------------|--------------------------|---------------------------------------------|
| JMC Primary Service Area | 89,623 | 16 | 17.9 |
| JMC Secondary Service Area | 117,530 | 23 | 19.6 |
| JMC CHNA Community | 207,153 | 39 | 18.8 |
| Palm Beach County | 1,320,134 | 264 | 20.0 |
| Martin County | 146,318 | 34 | 23.2 |
| Florida | 18,801,310 | 3,598 | 19.1 |
| United States | 308,745,538 | 65,399 | 21.2 |

Data Source: US Census Bureau, County Business Patterns. Additional data analysis by CARES. 2016. Source geography: ZCTA and U.S Department of Agriculture, Economic Research Service, USDA-Food Access Research Atlas. 2015. Source geography: Tract.

Housing - Housing Cost Burden (30%)

This indicator reports the percentage of the households where housing costs exceed 30% of total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. JMC's CHNA Community's percentage of cost-burdened households is consistent with state and national percentages with 32,792 households in the JMC CHNA Community having housing costs exceeding 30% of income.

| | Total Households | Cost Burdened Households (Housing Costs Exceed 30% of Income) | Percentage of Cost Burdened Households |
|-----------------------------------|------------------|---------------------------------------------------------------|----------------------------------------|
| JMC Primary Service Area | 39,656 | 14,323 | 36.1% |
| JMC Secondary Service Area | 54,784 | 18,469 | 33.7% |
| JMC CHNA Community | 94,440 | 32,792 | 34.7% |
| Palm Beach County | 543,591 | 212,377 | 39.1% |
| Martin County | 63,497 | 20,173 | 31.8% |
| Florida | 7,510,882 | 2,712,928 | 36.1% |
| United States | 118,825,921 | 38,077,410 | 32.0% |

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract

Housing – Substandard Housing

This indicator reports the number and percentage of owner- and renter-occupied housing units having at least one of the following conditions: 1) lacking complete plumbing facilities, 2) lacking complete kitchen facilities, 3) with 1.01 or more occupants per room, 4) selected monthly owner costs as a percentage of household income greater than 30%, and 5) gross rent as a percentage of household income greater than 30%. Selected conditions provide information in assessing the quality of the housing inventory and its occupants.

This data is used to easily identify homes where the quality of living and housing can be considered substandard. The percentage of substandard housing in JMC's CHNA Community is consistent with state and national percentages.

| | Total Occupied Housing Units | Occupied Housing Units with One or More Substandard Conditions | Percent Occupied Housing Units with One or More Substandard Conditions |
|-----------------------------------|------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------|
| JMC Primary Service Area | 39,656 | 14,127 | 35.6% |
| JMC Secondary Service Area | 54,784 | 18,325 | 33.5% |
| JMC CHNA Community | 94,440 | 32,452 | 34.4% |
| Palm Beach County | 543,591 | 215,744 | 39.7% |
| Martin County | 63,497 | 20,298 | 32.0% |
| Florida | 7,510,882 | 2,752,464 | 36.7% |
| United States | 118,825,921 | 39,200,876 | 33.0% |

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract

Health Status of the Community-Leading Health Indicators

Healthy People 2020 provides a comprehensive set of 10-year, national goals and objectives for improving the health of all Americans. Healthy People 2020 contains 42 topic areas with more than 1,200 objectives. A smaller set of Healthy People 2020 objectives, called Leading Health Indicators (LHIs), are reported below to communicate high-priority health issues. When available, indicators are reported for JMC's primary and secondary service areas. In some cases, aggregated data is not available for primary and secondary service areas and is only reported for Palm Beach and Martin Counties, Florida and the United States.

Access to Health Services

Access to Primary Care

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include the following specialties: General Family Medicine, General Practice, General Internal Medicine, and General Pediatrics. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. As reported in the table below, the number of primary care physicians per 100,000 population for the JMC CHNA Community is favorable to the rate for Florida and slightly lower than the national rate.

| | Total Population, 2014 | Primary Care Physicians, 2014 | Primary Care Physicians, Rate per 100,000 Pop. |
|-----------------------------------|---------------------------|-------------------------------------|---------------------------------------------------|
| JMC Primary Service Area | 94,825 | 81 | 85.8 |
| JMC Secondary Service Area | 124,229 | 104 | 84.3 |
| JMC CHNA Community | 219,054 | 185 | 84.9 |
| Palm Beach County | 1,397,710 | 1,215 | 86.9 |
| Martin County | 153,392 | 109 | 71.1 |
| Florida | 19,893,297 | 15,869 | 79.8 |
| United States | 318,857,056 | 279,871 | 87.8 |

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2014. Source geography: County

Preventable Hospital Events

This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (“ACS”). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. The discharge rate for ACS conditions is favorable to state and national averages for the JMC CHNA Community.

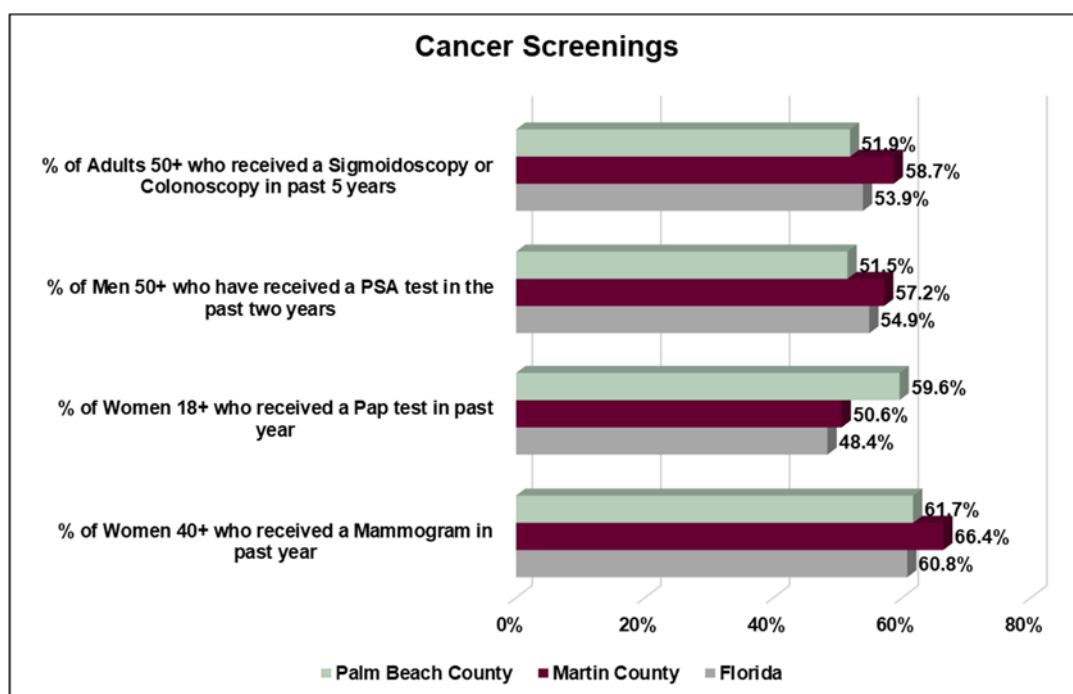
| | Total Medicare Part A Enrollees | Ambulatory Care Sensitive Condition Hospital Discharges | Ambulatory Care Sensitive Condition Discharge Rate |
|-----------------------------------|---------------------------------|---------------------------------------------------------|----------------------------------------------------|
| JMC Primary Service Area | 8,391 | 390 | 46.5 |
| JMC Secondary Service Area | 13,979 | 646 | 46.2 |
| JMC CHNA Community | 22,370 | 1,036 | 46.3 |
| Palm Beach County | 126,314 | 5,923 | 46.9 |
| Martin County | 21,852 | 973 | 44.5 |
| Florida | 1,506,764 | 80,828 | 53.6 |
| United States | 22,488,201 | 1,112,019 | 49.4 |

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: County

Clinical Preventive Services

Cancer Screenings

Select cancer screening rates are reported below. Cancer screening rates for Palm Beach and Martin Counties are generally favorable to the rates for the State of Florida.



Source: Department of Health State of Florida. Bureau of Community Health Assessment. Chronic Disease Profiles-2017 by County.

Diabetes Management

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test that measures blood sugar levels, administered by a healthcare professional in the past year. In JMC's CHNA Community, 1,746 Medicare enrollees with diabetes have had an annual exam out of 1,991 Medicare enrollees in the report area with diabetes, or 87.7%.

| | Total Medicare Enrollees | Medicare Enrollees with Diabetes | Medicare Enrollees with Diabetes with Annual Exam | Percent Medicare Enrollees with Diabetes with Annual Exam |
|-----------------------------------|--------------------------|----------------------------------|---------------------------------------------------|-----------------------------------------------------------|
| JMC Primary Service Area | 10,408 | 749 | 657 | 87.7% |
| JMC Secondary Service Area | 17,403 | 1,242 | 1,089 | 87.7% |
| JMC CHNA Community | 27,811 | 1,991 | 1,746 | 87.7% |
| Palm Beach County | 156,062 | 11,349 | 9,961 | 87.8% |
| Martin County | 27,737 | 1,886 | 1,652 | 87.6% |
| Florida | 1,861,794 | 190,229 | 163,708 | 86.1% |
| United States | 26,937,083 | 2,919,457 | 2,501,671 | 85.7% |

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: Count

Environmental Quality

Asthma Prevalence

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. The percentages of adults with asthma for Palm Beach and Martin County are significantly lower than state and national percentages.

| | Survey Population (Adults Age 18+) | Total Adults with Asthma | Percent Adults with Asthma |
|-------------------|------------------------------------|--------------------------|----------------------------|
| Palm Beach County | 736,367 | 62,734 | 8.5% |
| Martin County | 106,133 | 5,693 | 5.4% |
| Florida | 14,756,311 | 1,841,437 | 12.5% |
| United States | 237,197,465 | 31,697,608 | 13.4% |

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County

Injury and Violence

Homicides

This indicator reports the rate of death due to assault (homicide) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. The rate for homicides in Palm Beach County is higher than state and national rates while the rate for Martin County is lower than state and national rates.

| | Total Population | Average Annual Deaths, 2010-2014 | Crude Death Rate (Per 100,000 Pop.) | Age-Adjusted Death Rate (Per 100,000 Pop.) |
|-----------------------|------------------|----------------------------------|-------------------------------------|--------------------------------------------|
| Palm Beach County, IL | 1,398,605 | 91 | 6.5 | 7.4 |
| Martin County, IL | 153,691 | 5 | 3.4 | 3.7 |
| Florida | 19,929,487 | 1,202 | 6.0 | 6.4 |
| United States | 318,689,254 | 17,167 | 5.4 | 5.5 |

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County

Unintentional Injuries-Mortality

This indicator reports the rate of death due to unintentional injury (accident) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. This indicator is relevant because accidents are a leading cause of death in the U.S. The death rate due to unintentional injuries in Palm Beach and Martin County is higher than state and national rates.

| | Total Population | Average Annual Deaths, 2010-2014 | Crude Death Rate (Per 100,000 Pop.) | Age-Adjusted Death Rate (Per 100,000 Pop.) |
|-------------------|------------------|----------------------------------|-------------------------------------|--------------------------------------------|
| Palm Beach County | 1,398,605 | 728 | 52.0 | 45.6 |
| Martin County | 153,691 | 87 | 56.6 | 46.3 |
| Florida | 19,929,487 | 10,015 | 50.3 | 44.4 |
| United States | 318,689,254 | 140,444 | 44.1 | 41.9 |

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County

Maternal, Infant and Child Health

Infant Mortality

This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health. The rate of infant mortality for Palm Beach and Martin Counties is favorable to state and national rates.

| | Total Births | Total Infant Deaths | Infant Mortality Rate (Per 1,000 Births) |
|-------------------|--------------|---------------------|------------------------------------------|
| Palm Beach County | 73,440 | 433 | 5.9 |
| Martin County | 6,300 | 26 | 4.2 |
| Florida | 1,133,160 | 7,932 | 7.0 |
| United States | 20,913,535 | 136,369 | 6.5 |

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2006-10. Source geography: County

Low Birth Weight

This indicator reports the percentage of total births that are low birth weight (under 2500g). This indicator is relevant because low birth weight infants are at high risk for health problems. This indicator can also highlight the existence of health disparities. The rate for low weight births in Palm Beach is slightly higher than the rate for the state of Florida and the United States, while the rate for Martin County is lower than the state and national rate.

| | Total Live Births | Low Birth Weight (Under 2500g) | Low Weight Births, Percent of Total |
|-------------------|-------------------|--------------------------------|-------------------------------------|
| Palm Beach County | 105,693 | 9,618 | 9.1% |
| Martin County | 8,953 | 671 | 7.5% |
| Florida | 1,585,346 | 137,925 | 8.7% |
| United States | 29,300,495 | 2,402,641 | 8.2% |

Data Source: US Department of Health & Human Services. Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System, CDC Wonder. 2006-12. Source geography: County

Mental Health

Suicides

This indicator reports the rate of death due to intentional self-harm (suicide) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Suicide rates for Palm Beach and Martin County are higher than rates for Florida and the United States.

| Report Area | Total Population | Average Annual Deaths, 2010-2014 | Crude Death Rate (Per 100,000 Pop.) | Age-Adjusted Death Rate (Per 100,000 Pop.) |
|-------------------|------------------|----------------------------------|-------------------------------------|--------------------------------------------|
| Palm Beach County | 1,398,605 | 226 | 16.2 | 14.7 |
| Martin County | 153,691 | 29 | 19.1 | 16.8 |
| Florida | 19,929,487 | 3,063 | 15.4 | 14.1 |
| United States | 318,689,254 | 42,747 | 13.4 | 13.0 |

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County

Mental Health Providers (ratio of population to provider)

Mental Health Providers is the ratio of the population to mental health providers. Mental health providers are defined as psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists, and mental health providers that treat alcohol and other drug abuse, as well as advanced practice nurses specializing in mental healthcare. The ratio represents the number of individuals served by one mental health provider in a county. Palm Beach and Martin Counties have favorable ratios of mental health providers compared to the State of Florida. However, top U.S. performers have ratios that are significantly lower than Palm Beach and Martin Counties.

| | Ratio of Population to Mental Health Providers |
|-----------------------|------------------------------------------------|
| Palm Beach County, IL | 570:1 |
| Martin County, IL | 650:1 |
| Florida | 700:1 |
| Top U.S. Performers | 330:1 |

Data Source: University of Wisconsin Population Health Institute 2018 County Health Rankings

Nutrition, Physical Activity and Obesity

Food Environment - Food Desert Census Tracts

This indicator reports the number of neighborhoods in the report area that are within food deserts. A food desert is a geographic area where affordable and nutritious food is hard to obtain, particularly for those without an automobile. Approximately 54%% of total census tracts in the JMC CHNA Community are designated as food desert census tracts with approximately 69,000 individuals in JMC's CHNA Community living with low food access.

| | Total Population (2010) | Food Desert Census Tracts | Population with Low Food Access | Percent Population with Low Food Access |
|-----------------------------------|----------------------------|---------------------------------|---------------------------------------|--------------------------------------------------|
| JMC Primary Service Area | 89,623 | 12 | 32,255 | 36.0% |
| JMC Secondary Service Area | 117,530 | 17 | 36,643 | 31.2% |
| JMC CHNA Community | 207,153 | 29 | 68,898 | 33.3% |
| Palm Beach County | 1,320,134 | 118 | 259,699 | 19.7% |
| Martin County | 146,318 | 22 | 52,027 | 35.6% |
| Florida | 18,801,310 | 1,833 | 4,831,135 | 25.7% |
| United States | 308,745,538 | 27,527 | 69,266,771 | 22.4% |

Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2015. Source geography: Tract.

Physical Inactivity

Physical inactivity is relevant because current behaviors are determinants of future health and this indicator may be linked as a cause of significant health issues, such as obesity and poor cardiovascular health. The table below reports the percentage of adults who are sedentary and who are inactive or insufficiently active for Palm Beach and Martin Counties.

| | Palm Beach County | County Quartile- Palm Beach County <small>1=most favorable 4=least favorable</small> | Martin County | County Quartile- Martin County <small>1=most favorable 4=least favorable</small> | Florida |
|-----------------------------------------------------|-------------------------|------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------|---------|
| Adults who are sedentary | 31.8% | 2 | 22.7% | 1 | 29.8% |
| Adults who are inactive or insufficiently active | 58.5% | 3 | 49.7% | 1 | 56.7% |

Data Source: Department of Health State of Florida. Bureau of Community Health Assessment. Chronic Disease Profiles-2017 by County.

Obesity

Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for health issues. The percentage of adults who are overweight for Palm Beach and Martin Counties is 32.1% and 40.8% respectively. Obesity rates for both counties are significantly less than the rate for the State of Florida.

| | Palm Beach County | County Quartile-Palm Beach County 1=most favorable 4=least favorable | Martin County | County Quartile-Martin County 1=most favorable 4=least favorable | Florida |
|---------------------------|-------------------|----------------------------------------------------------------------------|---------------|------------------------------------------------------------------------|---------|
| Adults who are overweight | 32.1% | 1 | 40.8% | 4 | 35.8% |
| Adults who are obese | 20.8% | 1 | 15.3% | 1 | 27.4% |

Source: Department of Health State of Florida. Bureau of Community Health Assessment. Chronic Disease Profiles-2017 by County.

Oral Health

Access to Dentists

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license. The rate for dentists to total population JMC's CHNA Community is favorable to state and national rates.

| | Total Population, 2015 | Dentists, 2015 | Dentists, Rate per 100,000 Pop. |
|-----------------------------------|------------------------|----------------|---------------------------------|
| JMC Primary Service Area | 96,532 | 68 | 71.1 |
| JMC Secondary Service Area | 126,476 | 90 | 71.2 |
| JMC CHNA Community | 223,008 | 158 | 71.2 |
| Palm Beach County | 1,422,789 | 1,010 | 71.0 |
| Martin County | 156,283 | 113 | 72.3 |
| Florida | 20,271,272 | 11,304 | 55.8 |
| United States | 321,418,820 | 210,832 | 65.6 |

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2015. Source geography: County

Poor Dental Health

This indicator reports the percentage of adults age 18 and older who self-report that six or more of their permanent teeth have been removed due to tooth decay, gum disease, or infection. The percentage of adults with poor dental health for Palm Beach and Martin Counties is consistent with state and national percentages.

| | Total Population (Age 18+) | Total Adults with Poor Dental Health | Percent Adults with Poor Dental Health |
|-------------------|-------------------------------|--------------------------------------------|-------------------------------------------|
| Palm Beach County | 1,031,474 | 183,889 | 17.8% |
| Martin County | 118,397 | 17,132 | 14.5% |
| Florida | 14,682,954 | 2,635,605 | 18.0% |
| United States | 235,375,690 | 36,842,620 | 15.7% |

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2006-10. Source geography: County

Substance Abuse

Rates for substance abuse for Palm Beach and Martin Counties are reported below. The percentage of adults who engage in heavy or binge drinking is consistent with the rates for the State of Florida. Marijuana use in Martin County exceeds the rate for the State of Florida while Palm Beach County's rate is lower than the state rate.

| | Percentage of Adults who Engage in Heavy or Binge Drinking | Percentage of Adults who used Marijuana or Hashish During the Past 30 Days |
|-------------------|------------------------------------------------------------------|----------------------------------------------------------------------------------|
| Palm Beach County | 17.8% | 5.7% |
| Martin County | 17.9% | 8.9% |
| Florida | 17.5% | 7.4% |

Data Source: 2016 Florida Behavioral Risk Surveillance System (BRFSS) Data Report by County.

Tobacco

Tobacco Usage – Adult Smoking

This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease. The smoking rate for Palm Beach and Martin Counties is favorable to state and national rates and is better than the top U.S. performers reported by 2018 County Health Rankings.

| Percentage of Adults who are Current Smokers | |
|-----------------------------------------------------|-------|
| Palm Beach County | 13.0% |
| Martin County | 13.0% |
| Florida | 15.0% |
| Top U.S. Performers | 14.0% |

Data Source: Data Source: University of Wisconsin Population Health Institute 2018 County Health Rankings

Health Status of the Community-Health Outcomes

Cancer Rates

Indicators below report the age adjusted incidence rates for various types of cancer (cases per 100,000 population per year) as well as the annual averages of new cases for each type of cancer.

| | <u>Cancer Incidence Rate Per 100,000 Population</u> | | | |
|-----------------------------------|-----------------------------------------------------|--------------------------------------------------------|--------------------------------------|--------------------------------------------|
| | Breast Cancer (Female Population) | Colon and Rectum Cancer (Total Population) | Lung Cancer (Total Population) | Prostate Cancer (Male Population) |
| JMC Primary Service Area | 120.1 | 31.7 | 52.4 | 102.8 |
| JMC Secondary Service Area | 120.9 | 31.8 | 52.7 | 102.5 |
| JMC CHNA Community | 121.2 | 31.8 | 52.6 | 102.6 |
| Palm Beach County | 119.3 | 31.6 | 52.3 | 103.9 |
| Martin County | 130.9 | 32.0 | 54.1 | 97.6 |
| Florida | 116.0 | 36.9 | 59.7 | 97.4 |
| United States | 124.7 | 39.2 | 60.2 | 109.0 |

Data Source: State Cancer Profiles. 2011-15. Source geography: County

| | <u>New Cases (Annual Average)</u> | | | |
|-----------------------------------|-----------------------------------|---------------------|------------|------------|
| | Breast Cancer | Colon and Rectum | Lung | Prostate |
| JMC Primary Service Area | 84 | 47 | 83 | 69 |
| JMC Secondary Service Area | 112 | 63 | 112 | 93 |
| JMC CHNA Community | 196 | 110 | 195 | 162 |
| Palm Beach County | 1,221 | 681 | 1,201 | 1,006 |
| Martin County | 163 | 91 | 169 | 137 |
| Florida | 15,430 | 9,790 | 16,548 | 12,667 |
| United States | 234,445 | 139,950 | 217,545 | 190,639 |

Data Source: State Cancer Profiles. 2011-15. Source geography: County

County Chronic Disease Profiles

The table below is a summary of the chronic disease profiles compiled by the Florida Department of Health in 2017. Rates for various health indicators are reported below as well as the quartile ranking for each indicator for Palm Beach and Martin County.

| | Palm Beach County | County Quartile-Palm Beach County <small>1=most favorable 4=least favorable</small> | Martin County | County Quartile- Martin County <small>1=most favorable 4=least favorable</small> | Florida |
|--------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------|---------------|
| Cardiovascular Disease | | | | | |
| Adults who have ever been told they had angina or coronary heart disease | 6.1% | 2 | 8.6% | 4 | 4.7% |
| Adults who have ever been told they have had a heart attack | 5.4% | 2 | 9.3% | 4 | 5.2% |
| Heart Attack Hospitalizations-Age-adjusted hospitalization rate per 100,000 from AMI | 127.2 | 1 | 122.2 | 1 | 169.9 |
| Adults who have ever been told they have had a stroke | 3.1% | 1 | 3.8% | 1 | 3.5% |
| Cancer | | | | | |
| Breast Cancer Age-adjusted incidence rate per 100,000 population - County Number | 3,731 | 3 | 499 | 4 | Not Available |
| Cervical Cancer Age-adjusted incidence rate per 100,000 population - County Number | 174 | 2 | 20 | 3 | Not Available |
| Colorectal Cancer Age-adjusted incidence rate per 100,000 population | 31.1 | 1 | 33.2 | 1 | 36.6 |
| Lung Cancer Age-adjusted incidence rate per 100,000 population | 52.5 | 1 | 54.3 | 1 | 58.9 |
| Melanoma Age-adjusted incidence rate per 100,000 population | 24.5 | 3 | 44.3 | 4 | 24.0 |
| Prostate Cancer Age-adjusted incidence rate per 100,000 population - County Number | 2,738 | 4 | 389 | 4 | Not Available |
| Diabetes | | | | | |
| Adults who have ever been told they have diabetes | 10.8% | 1 | 10.5% | 1 | 11.8% |
| Respiratory Diseases | | | | | |
| Adults who currently have asthma | 4.1% | 1 | 4.0% | 1 | 6.7% |
| Chronic Lower Respiratory Disease Hospitalizations: Age-adjusted hospitalization rate per 100,000 total population | 339.5 | 2 | 337.8 | 2 | 353.2 |

Source: Department of Health State of Florida. Bureau of Community Health Assessment. Chronic Disease Profiles-2017 by County.

Diabetes

This indicator reports the percentage of adult (adults age 20+) and Medicare populations with diabetes. Over 10% of the adult population has been diagnosed with diabetes. The Medicare population in JMC's CHNA Community has 8,100 Medicare beneficiaries who require treatment for diabetes.

| Adult | | Medicare Population | |
|-----------------------------------|------------------------------|-----------------------------|-------------------------------------|
| | Percent Adults with Diabetes | Beneficiaries with Diabetes | Percent Beneficiaries with Diabetes |
| JMC Primary Service Area | Not Available | 3,107 | 26.5% |
| JMC Secondary Service Area | Not Available | 4,993 | 25.5% |
| JMC CHNA Community | Not Available | 8,100 | 25.9% |
| Palm Beach County | 10.8% | 48,627 | 27.5% |
| Martin County | 10.5% | 6,227 | 20.4% |
| Florida | 11.8% | 631,405 | 28.0% |
| United States | Not Available | 9,057,809 | 26.6% |

Data Source: Florida Department of Health, Bureau of Vital Statistics 2016 Florida Behavioral Risk Factor Surveillance System State and County Data Summary (Adult) and Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2015. Source geography: County and Centers for Medicare and Medicaid Services. 2015. Source geography: County (Medicare Population).

Heart Disease

This indicator report the percentage of adult who have ever had coronary heart disease and Medicare population with heart disease. The Medicare population in JMC's CHNA Community has 11,736 Medicare beneficiaries who require treatment for heart disease.

| Adult | | Medicare Population | |
|-----------------------------------|-----------------------------------|----------------------------------|------------------------------------------|
| | Percent Adults with Heart Disease | Beneficiaries with Heart Disease | Percent Beneficiaries with Heart Disease |
| JMC Primary Service Area | Not Available | 4,461 | 38.0% |
| JMC Secondary Service Area | Not Available | 7,275 | 37.2% |
| JMC CHNA Community | Not Available | 11,736 | 37.5% |
| Palm Beach County | 6.1% | 68,729 | 38.9% |
| Martin County | 8.6% | 10,027 | 32.9% |
| Florida | 4.7% | 766,724 | 34.0% |
| United States | Not Available | 9,028,604 | 26.5% |

Data Source: Florida Department of Health, Bureau of Vital Statistics 2016 Florida Behavioral Risk Factor Surveillance System State and County Data Summary (Adult) and Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2015. Source geography: County and Centers for Medicare and Medicaid Services. 2015. Source geography: County (Medicare Population).

High Blood Pressure

This indicator reports the percentage of Medicare fee-for-service population with hypertension (high blood pressure). Over 18,500 Medicare Beneficiaries have high blood pressure in the JMC CHNA Community.

| | Beneficiaries with High Blood Pressure | Percent Beneficiaries with High Blood Pressure |
|-----------------------------------|----------------------------------------|------------------------------------------------|
| JMC Primary Service Area | 7,020 | 59.8% |
| JMC Secondary Service Area | 11,631 | 59.5% |
| JMC CHNA Community | 18,651 | 59.6% |
| Palm Beach County | 106,330 | 60.2% |
| Martin County | 17,624 | 57.8% |
| Florida | 1,363,821 | 60.5% |
| United States | 18,761,681 | 55.0% |

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County and Data Source: Centers for Medicare and Medicaid Services. 2015. Source geography: County

Health Status of the Community-Mortality

Death counts by county and state as well as JMC's service areas are reported below. The two leading causes of death in both the primary and secondary service areas are cancer and heart disease.

| | JMC Primary Service Area | JMC Secondary Service Area | Palm Beach County | Martin County | Florida |
|-----------------------------------------------------|-----------------------------|-------------------------------|----------------------|---------------|---------|
| Heart Diseases | 59 | 336 | 3,073 | 438 | 46,159 |
| Malignant Neoplasm (Cancer) | 92 | 517 | 5,023 | 672 | 44,862 |
| Unintentional Injury | 16 | 124 | 1,107 | 124 | 12,812 |
| Chronic Lower Respiratory Disease | 18 | 73 | 720 | 135 | 12,590 |
| Cerebrovascular Diseases | 10 | 49 | 409 | 118 | 12,557 |
| Alzheimers Disease | 19 | 96 | 1,050 | 102 | 6,956 |
| Diabetes Mellitus | 3 | 26 | 317 | 39 | 6,151 |
| Suicide | - | - | 199 | 26 | 3,187 |
| Nephritis, Nephrotic Syndrome, Nephrosis | 1 | 12 | 253 | 36 | 3,157 |
| Chronic Liver Disease & Cirrhosis | 5 | 21 | 173 | 35 | 3,080 |
| Influenza & Pneumonia | 5 | 35 | 268 | 36 | 3,040 |

Data Source: Florida Department of Health, Bureau of Vital Statistics. Death Counts by Year by County (2017)

Primary Data Assessment

Primary data was obtained through key stakeholder interviews and an online community survey described on the following pages.

One-on-one interviews, via telephone, were conducted with 12 key stakeholders between November 26, 2018 and December 19, 2018. In addition, surveys were distributed electronically to over 16,000 individuals representing a broad range of persons in the community served by Jupiter Medical Center.

Key Stakeholder Interviews

Community leaders were selected for interviews based on their expertise in the health of the community and the minority, low-income, medically underserved, or other vulnerable populations they represent. Each leader represented a unique and different segment of the population, giving JMC broad insight into the health needs of the community. The community leaders who were interviewed, as well as the populations represented by their respective organizations, are listed below:

| Person Interviewed | Organization providing input | Medically underserved, low-income or minority population represented by organization |
|-----------------------|---------------------------------------------------|--------------------------------------------------------------------------------------|
| Dr. Alina Alonso, MD | Florida Department of Health in Palm Beach County | Community at-large |
| Samuel Barsky, M.D. | Pediatric Associates | Children, adolescents and families |
| Dr. Jennifer Buczyner | Jupiter Medical Center's Medical Staff | Community at-large |
| Tom Cleare | Health Care District of Palm Beach County | Community at-large |
| Suzanne Cordero | El Sol Neighborhood Resource Center | Hispanic population |
| Dr. Kelly Easterling | Palm Beach Schools | Children, adolescents and families |
| Lynn Hayes | Healthier Jupiter | Community at-large |
| K. Adam Lee, M.D. | Jupiter Medical Center's Medical Staff | Community at-large |
| Satu Oksanen | Town of Jupiter | Community at-large |
| Dr. Ron Surowitz | MyClinic | Low-income, uninsured and underserved families and children |
| Dr. Nancy Taft | Jupiter Medical Center's Medical Staff | Community at-large |

The interview questions for each key stakeholder were identical and are grouped into four major categories for discussion. A summary of the stakeholders' responses by each of the categories follows. Paraphrased quotes are included to reflect some commonly held opinions and direct quotes are employed to emphasize strong feelings associated with the statements. This section of the report summarizes what the key stakeholders said without assessing the credibility of their comments.

1. General opinions regarding health and quality of life in the community

The key stakeholders were asked to rate the health and quality of life in the community (Palm Beach and Martin Counties). They were also asked to provide their opinion whether the health and quality of life had improved, declined or stayed the same over the past few years. Lastly, key stakeholders were asked to provide support for their answers.

Over 90% of the key stakeholders rated the health and quality of life in their community as above average or excellent. It was noted by several stakeholders, however, that it is difficult to provide one overall rating for the entire community because the quality of life is so diverse. Specifically, many areas have a lot of “well-to-do” patients who have access to the best of care, while there are pockets of areas from which patients have no insurance.

When asked whether the health and quality of life had improved, declined or stayed the same, over 90% of the stakeholders responded they felt the health and quality of life had improved over the last three years. When asked *why* health and quality of life had improved, key stakeholders noted that there has been community growth (more people moving into the area), more community resources to reach the underserved (such as My Clinic and El Sol), and abundant recreational opportunities that are accessible year-round due to the climate (such as gyms, parks, trails, and green and blue areas). Furthermore, stakeholders mentioned that there are more advanced medical treatments for children and families, more hospital service lines, more emphasis on awareness of health issues (such as through community lectures), and a general increased interest in healthier lifestyles and improved quality of life (consistent with Healthier Jupiter initiatives). It was also mentioned that the Palm Beach School District has a wellness program that not only targets students, but includes families and staff as well.

Stakeholders believed that the community generally takes ownership in personal wellness and healthy living. Among those with resources to participate, health club and spa memberships are popular, and wellness activities are plentiful—people use them to look and feel good. Among the less wealthy population, however, it takes more of an effort to get people involved (although the Healthier Jupiter initiative is a good example of such an effort). Regardless of personal resources, however, stakeholders emphasized the importance of getting people to understand that even small lifestyle modifications can help them avoid long-term medical visits and costs. Recognizing the challenges, however, stakeholders noted that it takes a constant effort to educate and make people aware of health issues and engage them in such a way that they feel personally invested in their health.

Notwithstanding general agreement as to favorable health and quality of life in the community, stakeholders noted that there are pockets of needs within the community, such as lower income, homeless and migrant individuals. While there have certainly been some concerted efforts to reach the underserved members of the community, stakeholders acknowledged that continued efforts are needed to reach the most vulnerable individuals and bring services to them.

“Jupiter Medical Center has been a great partner.”

“The community continues to grow and be a desirable place to move to and live.”

“There is an overall societal interest in prevention and health.”

“Incredible school district—targets not just services and programs for children, but also for the families and staff.”

“There are pockets of needs, but they are small and workable.”

“Jupiter Medical Center has grown a lot and is offering more.”

2. Underserved populations and communities of need

Key stakeholders were asked to provide their opinions regarding specific populations or groups of people whose health or quality of life may not be as good as others. Crowe also asked the key stakeholders to provide their opinions as to *why* they thought these populations were underserved or in need.

Uninsured

Stakeholders revealed that one group of people whose health and quality of life may not be as good as others is the uninsured population. This population may lack the necessary resources or education to recognize health problems and seek help in a timely manner. Stakeholders acknowledged the significant contributions made by Jupiter Medical Center, including its support of MyClinic and the opening of urgent care centers. They suggested that continual efforts are needed to get the word out about the resources available at Jupiter Medical Center and other available community outreach programs to the uninsured population.

Working Poor

Stakeholders mentioned the “working poor” as another underserved population within the community. This population may not be able to afford healthy food, quality healthcare, or other resources that affect their ability to achieve and maintain optimal health. As the mainstay of the workforce, this population includes such positions as mechanics, medical office workers, grocery store employees, etc. Generally, individuals within this population make too much money to qualify for free healthcare (which would typically require an income level at or below 200% of the Federal Poverty Guidelines), but their income is not high enough for them to afford medical care or health insurance. One stakeholder also noted that, even if children of the working poor have insurance through a state program, the parents may be uninsured or underinsured and may lack the resources to achieve and maintain a healthy living environment.

Migrant Community

Another group of underserved persons noted by stakeholders was the migrant community. One stakeholder noted that MyClinic is a “godsend,” but that the community needs more education, health fairs, and pop-up health clinics for the migrant population where people can get a physical. Another stakeholder noted that, even though the community has parks, playgrounds and significant green and blue space, there are still people within the migrant community who do not feel welcome in those spaces or feel that they can take advantage of those resources. The stakeholder suggested that marketing and awareness campaigns should be more inclusive so that people know the resources are available, that they are free, and that they are available for everyone to enjoy.

Low-Income Elderly

Stakeholders also identified the low-income elderly as an underserved population within the community. This population may be struggling financially (due to the high cost of living in the area) and socially (due to isolation), and they sometimes lack the ability to carry out activities of daily living. For example, an elderly person may move into the area with no family to assist them, and they may have trouble getting transportation to medical appointments or even remembering the appointments. While Jupiter Medical Center currently provides transportation resources, stakeholders expressed the need for more resources in the community to connect the dots, such as establishing a route where people can travel to a medical village, community center, library, lighthouse, or other places where seniors can gather and socialize.

Children in Need of Pediatric Specialty Care

A final population with unmet healthcare needs described by one stakeholder is the subset of pediatric patients who are chronic, complex, and medically fragile or with congenital syndromes, who require a lot of assistance. These individuals see a lot of specialists and therapists and constantly travel to medical appointments, tests, etc. This population would greatly benefit from a multi-disciplinary medical center where they can go and see all specialists in the same day and not have to worry about running from appointment to appointment. Several stakeholders believed that this population would benefit from access to certain pediatric specialists, such as pediatric surgeons, pediatric radiologists, pediatric cardiologists, pediatric oncologists, and pediatric nephrologists.

“MyClinic is a godsend.”

“Lower-middle class people are not able to get the kind of care that would help them be healthier.”

“The community needs education, health fairs, and pop-up health clinics where people can get a physical.”

3. Barriers

Stakeholders were asked what barriers or problems exist to improving the health and quality of life in the community.

Several stakeholders noted that public education on health and wellness issues was a barrier to improving health and quality of life in the community. Generally, people need to learn more about what medical resources are available to them, and they need easier access to see a physician. Health literacy is an issue in many communities. While the community overall is affluent, there are pockets of individuals with language barriers and health literacy issues.

Stakeholders also noted a lack of insurance as a barrier to improving health and quality of life in the community. There is no Medicaid expansion in Florida, so choices are limited. Stakeholders described a huge gap between the point where Medicaid covers people and people can afford health insurance.

Stakeholders also mentioned that access to good quality, inexpensive food and produce is a barrier to improving health and quality of life in the community. Local supermarkets tend to be very expensive, and farmer's markets are seasonal (maybe only once a week). Even though there are free- and reduced-cost lunch programs for students from low-income families, one stakeholder suggested that those programs might be underutilized, because there is a stigma attached to getting a free meal in a community that is generally affluent.

Another stakeholder noted that a lack of commitment on the part of individuals to lead a healthy lifestyle is a barrier to improving health and quality of life in the community. Medical professionals must communicate to patients in a way that they understand how important a lifestyle change is to their health.

One stakeholder pointed out that access to health services is only part of the equation and that the bigger problem is social determinants of health—jobs, safe neighborhoods, crime, access to food, access to care, etc. Assistance should target the specific needs of communities within high-risk zip codes.

Most stakeholders indicated that access to healthcare services has *improved* over the past several years. Stakeholders generally felt that more resources are available, especially as Jupiter Medical Center has grown. For example, stakeholders cited the addition of MyClinic, the addition of urgent care centers, and the expansion of Jupiter Medical Center service lines, such as pediatrics, cardiac health, and stroke intervention. The status of Jupiter Medical Center as a world-class healthcare facility was noted by stakeholders.

Several stakeholders indicated that access to health services has either *stayed the same* or *declined* because of the aging population and fewer physicians (with many physicians ready to retire), long wait times to see a physician (although physician assistants are helping), and lack of transportation among the elderly population.

Stakeholders indicated that the top reasons why people are not able to access health services include lack of health insurance (no Medicaid expansion in Florida); inability to afford co-pays and deductibles; lack of transportation; fear of financial consequences (especially for the elderly on a fixed income); and language barriers.

“Health literacy is an issue in many communities”

“Social determinants of health is the problem—jobs, safe neighborhoods, crime, access to food, access to care.”

“There are wonderful doctors coming into the community, but pediatric specialists are needed. The community is no longer a retirement community—more families have moved to the area.”

“MyClinic is a volunteer clinic that shows that the private sector can add to the health of the community.”

4. Most important health and quality of life issues

Key stakeholders were asked to provide their opinion as to the most critical health and quality of life issues facing the community. The key stakeholders were also asked to provide suggestions on what should be done to address the most critical issues. Responses included:

- Lack of healthcare for the uninsured, especially for chronic health issues or cancer. While the care provided by MyClinic is certainly important to address the lack of healthcare for the uninsured, some people are still not aware of MyClinic. Furthermore, if a MyClinic physician diagnoses a patient with a chronic health issue or cancer, additional healthcare services that the patient needs may be limited. For example, stakeholders noted that surgery and chemotherapy are virtually impossible for the uninsured to afford. In light of this reality, stakeholders reinforced the need to expand Medicaid within the State of Florida or institute some other alternative that provides low-income populations with insurance.
- Need for education about the importance of health issues and available resources. Stakeholders noted a need for education about the importance of health issues, including stroke awareness. One stakeholder noted that, in some situations people are simply not aware of the specialists available within the community, and that communication and education are needed in order to make patients aware of the resources that are available to them. Furthermore, stakeholders suggested a need to provide more education and community outreach around maintaining a healthy lifestyle, including the importance maintaining a healthy weight and eating a healthy diet (perhaps even removing unhealthy food options from schools).
- Need to adjust healthcare resources to accommodate a broader depth of coverage on a year-round basis. Stakeholders noted that, because of the influx of people into the community, the area is no longer a community just for “snowbirds” but rather a desirable place to live full-time. Thus, there is a need to accommodate a broader depth of coverage on a year-round basis. Along with the growth in the community, Jupiter Medical Center has grown from a community hospital to a regional hospital. As Jupiter Medical Center continues to grow and serve as a “center of excellence” for medical care from birth through the end of life, stakeholders believe that continued investments in technology and specialists (pediatric, geriatric, and others) will allow Jupiter Medical Center to fulfill the promise of becoming a “world class” hospital.

In closing, stakeholders were asked to recommend the most important issue Jupiter Medical Center should address over the next three to five years. Responses included:

- Continuing to provide a broader depth of coverage for all clinical conditions and having the clinical teams to back them up.
- Providing outreach to migrants and low-income seniors; creating low-cost ways for seniors to get together and socialize and build networks, connections, and friendships.
- Staying focused on taking care of patients from birth to end of life.
- Providing more programs that allow a broader part of the community to afford to participate.

- Coming up with local solutions to overcome lack of insurance to make healthcare accessible to everyone, given the fact that Florida has not expanded Medicaid.
- Teaching parents how to create healthy environments for children.
- Focusing on patients and the consumerization of healthcare, such as by assuring accessibility to services on evenings and Saturdays for the working class.
- Participating in disaster planning.

Key Findings

A summary of themes and key findings provided by the key stakeholders follows:

- Over 90% of the stakeholders rated the health and quality of life in their community as above average or excellent, and over 90% of the stakeholders responded they felt the health and quality of life had improved over the last three years.
- Notwithstanding general agreement as to favorable health and quality of life in the community, stakeholders noted that there are pockets of needs within the community, such as lower income, homeless and migrant individuals.
- Stakeholders described the populations with the most serious unmet healthcare needs as the uninsured, the working poor, the migrant community, the low-income elderly, and children in need of pediatric specialty care.
- Stakeholders described the barriers to improving the health and quality of life in the community as including the need for public education on health and wellness issues; a lack of health insurance; a lack of access to good quality, inexpensive food and produce; and a lack of commitment on the part of individuals to lead a healthy lifestyle.
- Stakeholders recognized expanding healthcare resources in the community, including the addition of MyClinic, the addition of urgent care centers, and the expansion of Jupiter Medical Center service lines, such as pediatrics, cardiac health, and stroke intervention.
- The most critical health and quality of life issues facing the community described by stakeholders were lack of healthcare for the uninsured (especially for chronic health issues or cancer), the need for education about the importance of health issues and available resources, and the need to adjust healthcare resources to accommodate a broader depth of coverage a year-round basis.
- Stakeholders stressed the importance of Jupiter Medical Center staying focused on taking care of patients from birth to end of life, and continuing to provide a broader depth of coverage for all clinical conditions.

Community Health Survey

In order to develop a broad understanding of community health needs, Jupiter conducted a community survey in December 2018. A link to the survey was distributed via e-mail, social media and word of mouth to the community at-large. A total of 269 surveys were completed

The majority of respondents, 93%, were White/Caucasian, 3% of the respondents identified as Black or African American, 3% identified as Hispanic and 1% identified as Asian.

Respondents by age group were as follows:

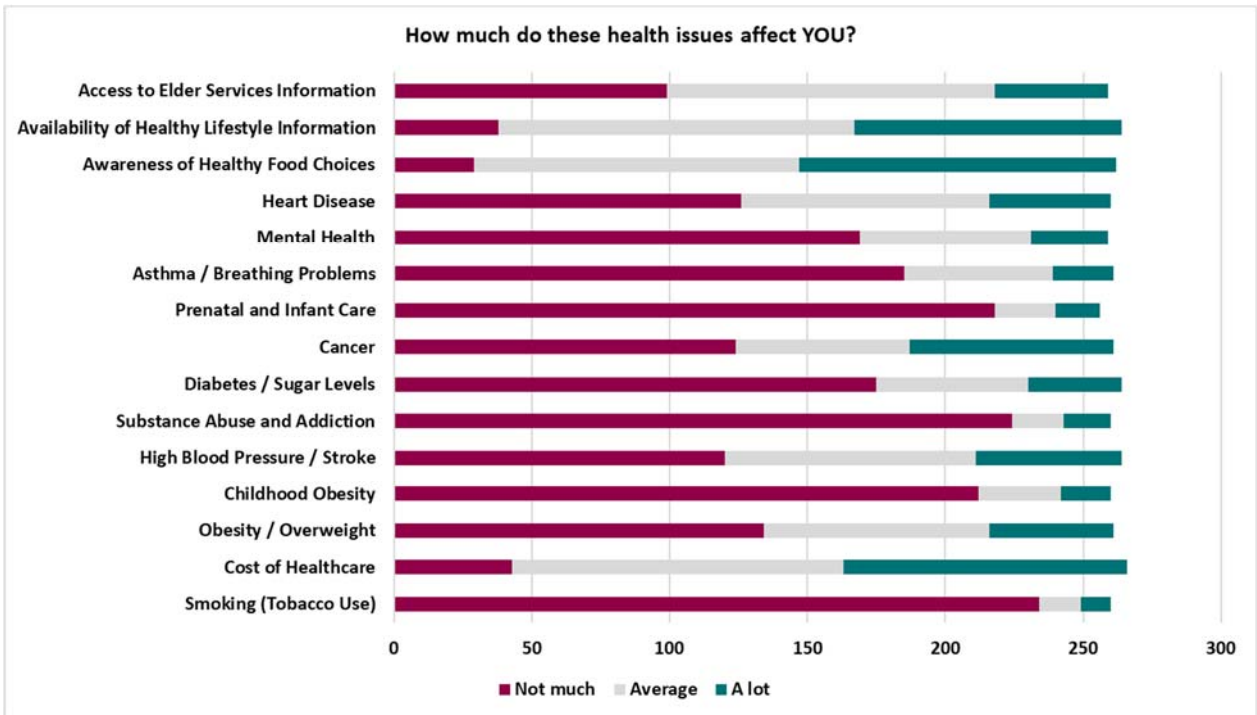
| Age Group | Percent of Total Respondents |
|-----------|------------------------------|
| 18-35 | 4% |
| 36-45 | 8% |
| 46-55 | 13% |
| 56-65 | 25% |
| 65+ | 49% |

Persons who identify as female represented 72% of the respondents while persons who identify as male represented 28%.

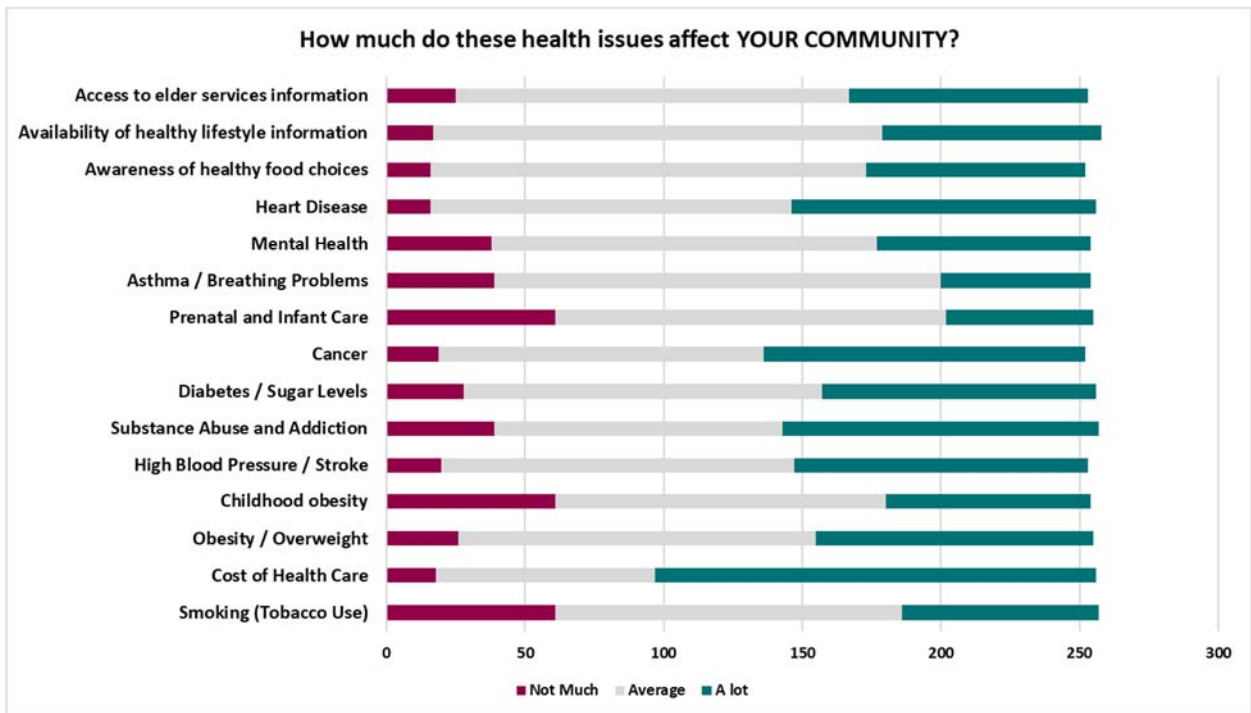
The other demographics of survey respondents varied with a variety of household income levels, education and household size.

Given the reported demographics above, care should be taken with interpreting the survey results. The ethnicities, ages and gender of survey respondents do not match demographics for the CHNA Community. Specifically, the survey reached more whites and more females compared to demographic information reported earlier in this report. Additionally older adults, aged 55+, completed the survey at higher rates compared to the demographics for the CHNA Community.

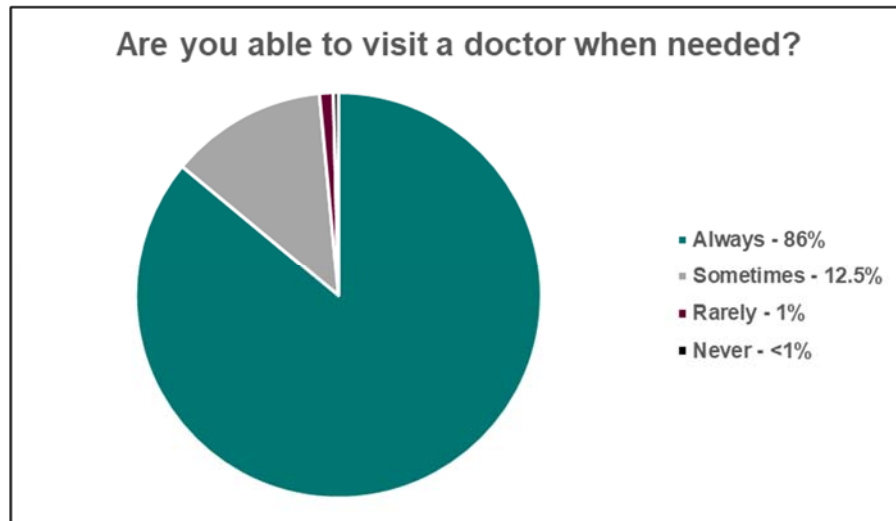
When asked “How much do these health issues affect YOU?” awareness of healthy food choices, cost of healthcare, availability of healthy lifestyle information, cancer, high blood pressure/stroke and heart disease were the issues that affected respondents most. Responses to this question are summarized on the following page.



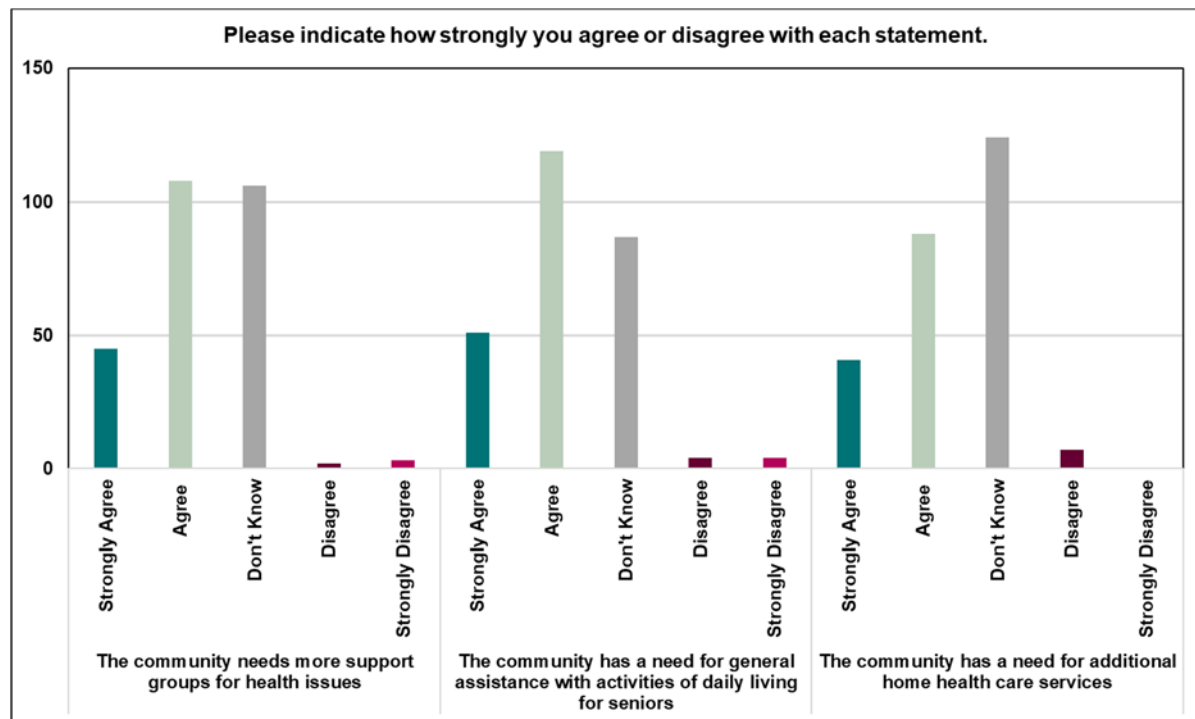
When asked to rate how the same issues impacted the community, respondents identified cost of healthcare, cancer, heart disease, high blood pressure/stroke and substance abuse and addiction as the issues that affected the community most.



Respondents were asked, "Are you able to visit a doctor when needed?" A large majority of individuals responded that they were always able to see a doctor when needed. The results are shown in the chart below:



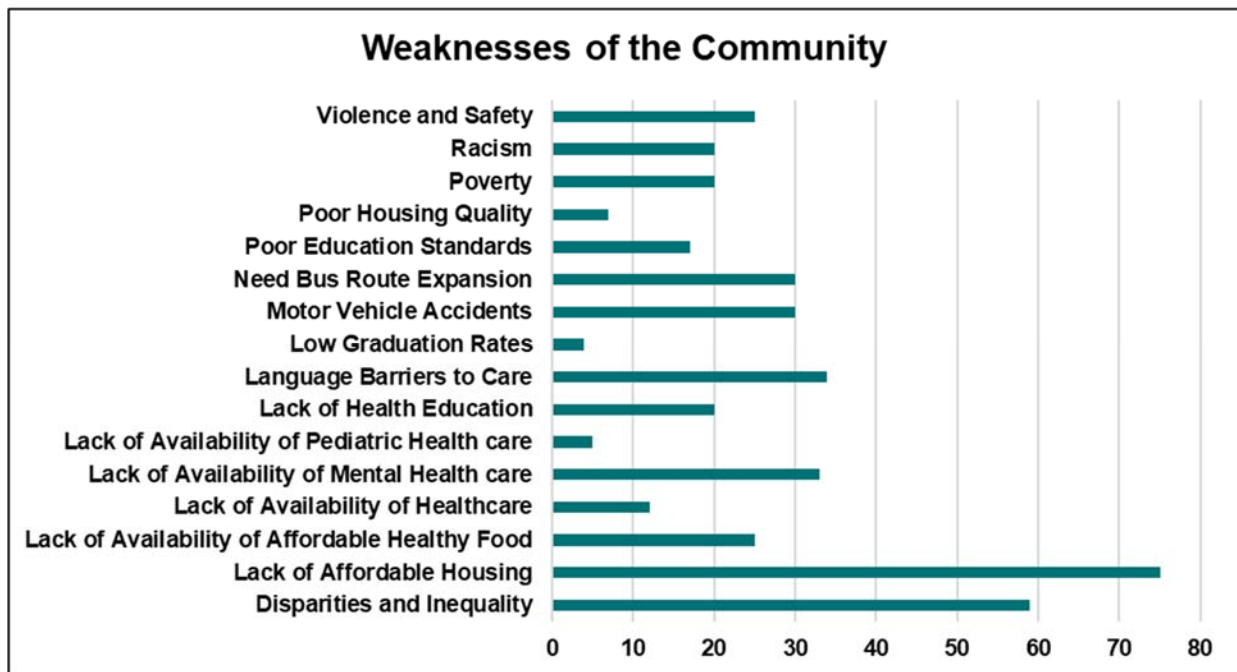
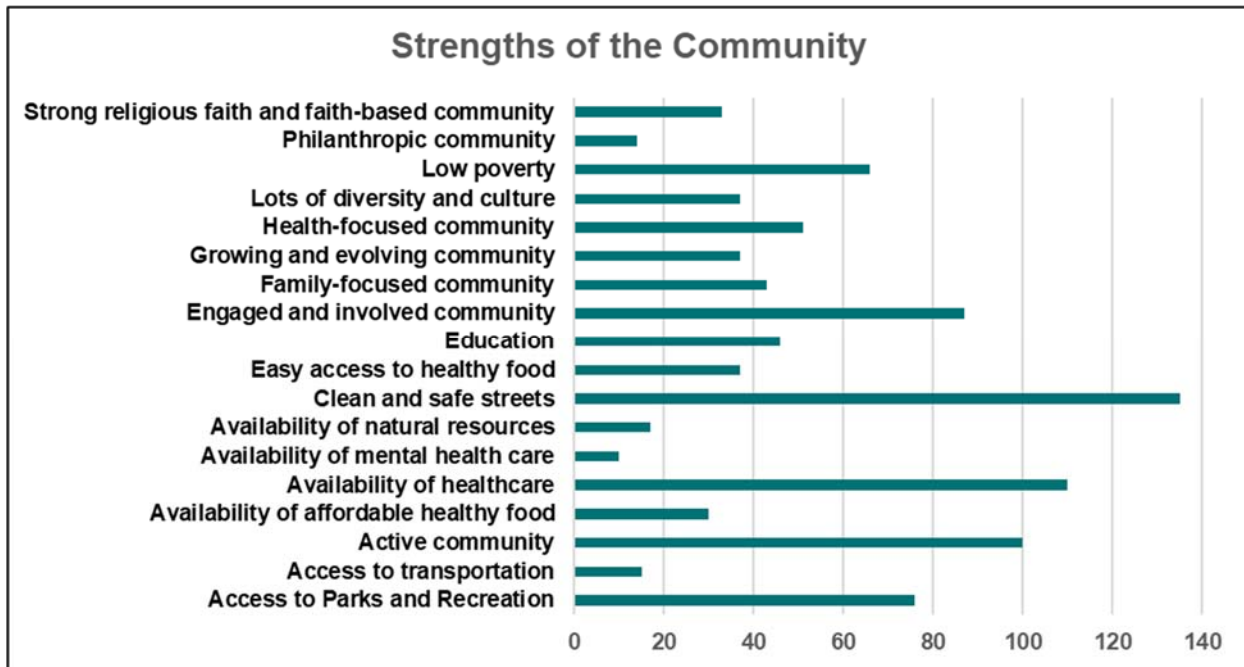
Among many questions asked in the survey, a majority of the respondents agreed that the community has need for additional support groups for health issues, assistance with activities of daily living for seniors and additional home health services. Results for questions surrounding these services are shown in the figure below.



The survey asked the following two questions:

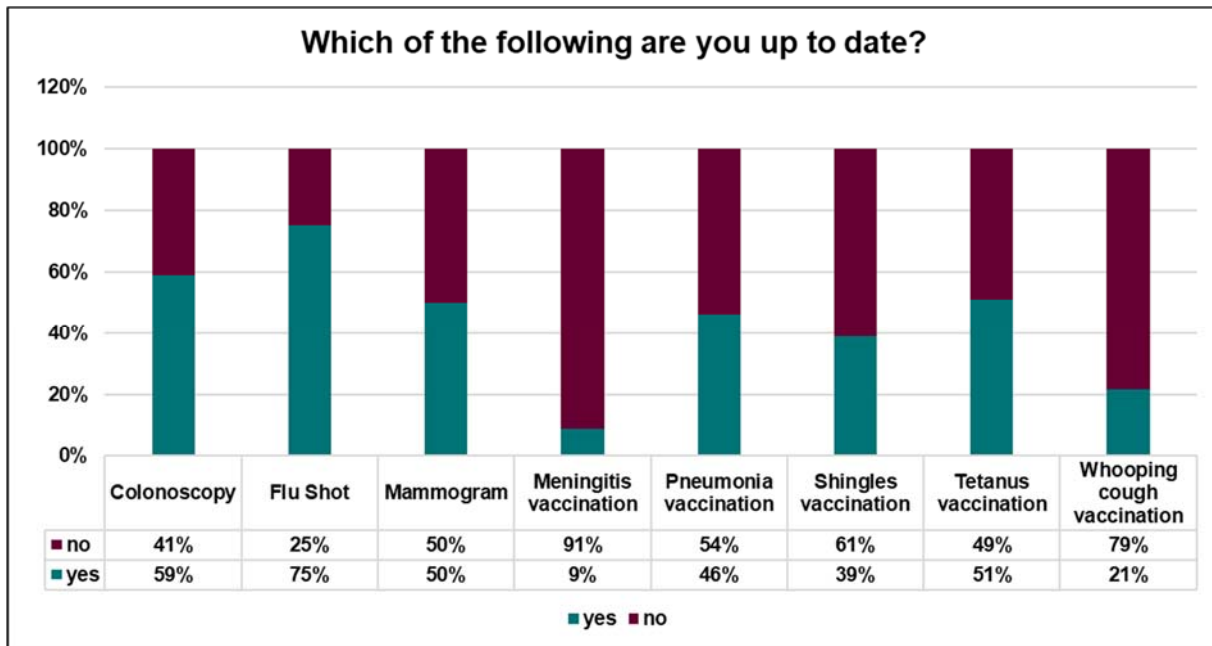
- What do you believe are the current STRENGTHS of your community?
- What do you believe are the WEAKNESSES in your community?

The survey provided predetermined responses that could be selected from the list. Respondents were instructed to mark up to five selections. Below is a summary of strengths and weaknesses identified.



A series of survey questions were focused on gathering information regarding the community's health

behaviors related to preventive vaccinations and screenings. The following chart summarizes information for these questions. As reflected in the chart below, a high percentage of respondents are not up to date on certain vaccinations, particularly for Meningitis, Shingles and Whooping Cough.



Community Resources

The availability of healthcare resources is a critical component to the health of a community's residents and a measure of the soundness of the area's healthcare delivery system. An adequate number of healthcare facilities and healthcare providers are vital for sustaining a community's health status. Below is a summary of potentially available resources within the CHNA Community to address the health needs identified in this assessment.

| Jupiter Medical Center Prioritized Health Needs | |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Identified Health Need | Community Resources |
| <ul style="list-style-type: none"> • Access to Pediatric Healthcare Services | <p>Hospitals: Jupiter Medical Center</p> <p>Health Centers and Clinics: MyClinic El Sol Neighborhood Resource Center C.L Brumback Primary Care Clinic</p> <p>Health Departments: Florida Department of Health-Palm Beach County Health Care District of Palm Beach County</p> <p>Other: Primary Care Physicians Pediatricians</p> |
| <ul style="list-style-type: none"> • Cancer | <p>Hospitals: Jupiter Medical Center – Anderson Family Cancer Institute Palm Beach Garden Medical Center JFK Medical Center Sandy Pines Hospital Martin Memorial Hospital</p> <p>Other: Oncologists Cancer Alliance of Help and Hope American Cancer Society Hearing Ovarian Cancer Whisper American Lung Association Leukemia & Lymphoma Foundation Richard David Kahn Melanoma Foundation</p> |
| <ul style="list-style-type: none"> • Heart Disease | <p>Hospitals: Jupiter Medical Center Palm Beach Garden Medical Center JFK Medical Center Sandy Pines Hospital Martin Memorial Hospital</p> <p>Health Centers and Clinics: MyClinic El Sol Neighborhood Resource Center</p> <p>Other: Cardiologists American Heart Association</p> |

| | |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • High Blood Pressure/Stroke | <p>Hospitals: Jupiter Medical Center Palm Beach Garden Medical Center JFK Medical Center Sandy Pines Hospital Martin Memorial Hospital</p> <p>Health Centers and Clinics: Neurologists MyClinic El Sol Neighborhood Resource Center</p> |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Other Identified Health Needs-JMC CHNA

| Identified Health Need | Community Resources |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Access to Expanded Healthcare Services* • Affordability of HealthCare* • Chronic Lower Respiratory Disease* • Need for Increased Health Education* • Nutrition, Exercise and Diabetes* | <p>Hospitals: Jupiter Medical Center Palm Beach Garden Medical Center JFK Medical Center Sandy Pines Hospital Martin Memorial Hospital</p> <p>Health Centers and Clinics: MyClinic El Sol Neighborhood Resource Center C.L Brumback Primary Care Clinic Palm Beach County Medical Society Project</p> <p>Health Departments: Florida Department of Health-Palm Beach County Health Care District of Palm Beach County</p> <p>Other: Primary Care Physicians Pulmonologists American Lung Association Diabetes Coalition of Palm Beach County Healthier Jupiter Juvenile Diabetes Research Foundation Area fitness facilities State and local parks</p> |
| <ul style="list-style-type: none"> • Elder Care Services/Aging Population* | <p>Hospitals: Jupiter Medical Center Palm Beach Garden Medical Center JFK Medical Center Sandy Pines Hospital Martin Memorial Hospital</p> <p>Other: Geriatricians Encompass Home Health Town of Jupiter</p> |

| | |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> • Access to Mental Health Services* • Substance Abuse* | <p>Other:</p> <ul style="list-style-type: none"> Mental Health Providers Mental Health Association of Palm Beach County Substance Abuse Treatment Facilities |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

*Jupiter Medical Center will continue to address the identified need through existing services and programs and will look for ways to partner with other organizations within the community to address these identified health needs.

Prioritization of Identified Health Needs

Priority setting is a required step in the community benefit planning process. The IRS regulations indicate that the CHNA must provide a prioritized description of the community health needs identified through the CHNA and include a description of the process and criteria used in prioritizing significant health needs.

The following data was assessed to identify health needs for the community:

Socioeconomic Indicators

- Household Income and Poverty
- Employment
- Insurance Coverage
- Educational Attainment

Community Health Status Indicators

- Leading Causes of Death
- Community Health Status Indicators

Primary Data

- Community Leader Interviews
- Community Health Survey

As a result, the following summary list of needs was identified:

Identified Health Needs (in alphabetical order)

- Access to Healthcare
- Access to Pediatric Healthcare Services
- Affordability of Healthcare
- Cancer
- Chronic Lower Respiratory Disease
- Elder Care Services
- Heart Disease
- High Blood Pressure/Stroke
- Mental Health/Behavioral Health
- Need for Health Education
- Nutrition & Exercise/Diabetes
- Substance Abuse

Health needs were prioritized with input from a broad base of members of JMC's Leadership Team. Based on the information gathered through this Community Health Needs Assessment, Jupiter chose the needs below to address over the next three years.

- Access to Pediatric Healthcare Services
- Cancer
- Heart Disease
- High Blood Pressure/Stroke

Opportunities for health improvement exist in each area. Jupiter Medical Center will work to identify areas where Jupiter can most effectively focus its resources to have significant impact and develop an Implementation Strategy for 2020-2022.