

Community Health Needs Assessment 2022



Letter from the President & CEO



I'm Matt Troup, President, and CEO of Conway Regional Health System. It is my sincere pleasure to share this report outlining our plans to address the health needs of our community.

As a not-for-profit health system, it is our duty and honor to identify and address the health needs of those living within the communities we serve. The issues surrounding health care impact each of us, and the Community Health Needs Assessment is an opportunity for us to highlight the difference we've made and our plans for the future. From improving healthcare access in a

post-COVID world to empowering patients with chronic disease, we are committed to meeting the needs of our community with high-quality, compassionate care.

We are proud to work with exceptional physicians who help guide our future initiatives, engaged staff who provide patient-centered care, and a community-focused board of directors who advocate for us within the community.

At Conway Regional, we are one team with one promise to our community. We will be bold, we will be exceptional, and we will answer the call.

Sincerely,

A handwritten signature in black ink that reads "Matt Troup".

Matt Troup, President & CEO





Conway Regional Health System recognizes the importance of partnerships in building healthy communities. We want to thank the many individuals and agencies who contributed to the creation of the 2022 Community Health Needs Assessment.

We look forward to continuing our work to improve the health of the citizens in the communities we serve.



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How the Assessment was Conducted

The County Health Rankings Model (CHRM) will guide the Conway Regional Health System 2022 CHNA. The County Health Rankings are based on a population health model that includes both health outcomes (length and quality of life) and health factors. The CHRM health factors are divided into four categories: physical environment, social and economic factors, clinical care, and health behaviors. The CHRM includes 30 measures across the four categories that defines the overall health of the county. The research team will utilize both primary and secondary data sources to gather information for the CHNA.

Primary Data Review

The research team further refined the potential community health focus areas through two subsequent research methodologies:

- 1) Community survey research (Appendix B) and
- 2) Community focus groups. These approaches allowed the researchers to engage with and receive feedback from a broad range of stakeholders as per the IRS requirements for non-profit hospitals.

Stakeholder Survey

The Stakeholder Survey, hosted on the Survey Monkey online platform, was designed based on findings from the secondary data review. See Appendix D for a copy of the survey. The final instrument consisted of 10 questions designed to identify stakeholders' view of the greatest community needs, most at risk populations, and possible solutions. The format consisted of multiple choice, ranking, and open-ended format.



The survey link was distributed by email to more than 150 community stakeholders including physicians, hospital officials, churches, schools, community agencies, public safety, and public health representatives across Faulkner County. Incomplete or abandoned surveys were excluded from the data set. At the conclusion of the survey ending July 10, 2022, 37 stakeholders completed the survey for a response rate of 24.6%.

Key findings included the top five most prevalent community health issues by county, the top five most influential socioeconomic factors, and the most vulnerable populations.

Focus Groups

Focus groups were held in July and August 2022 and were designed to allow for direct engagement with community members across a range of demographics. Sessions were held at community centers and Conway Regional Medical Center with a total of 40 participants.

Secondary Data Review

Secondary data review was selected as the launch point for project research. This approach allowed researchers to compare population health trends among a variety of demographics over a wide range of time periods, and create an overall analytical overview of the community health needs. A comprehensive review of secondary data from publicly available sources at the county, state, and national levels was conducted in May and June of 2022.

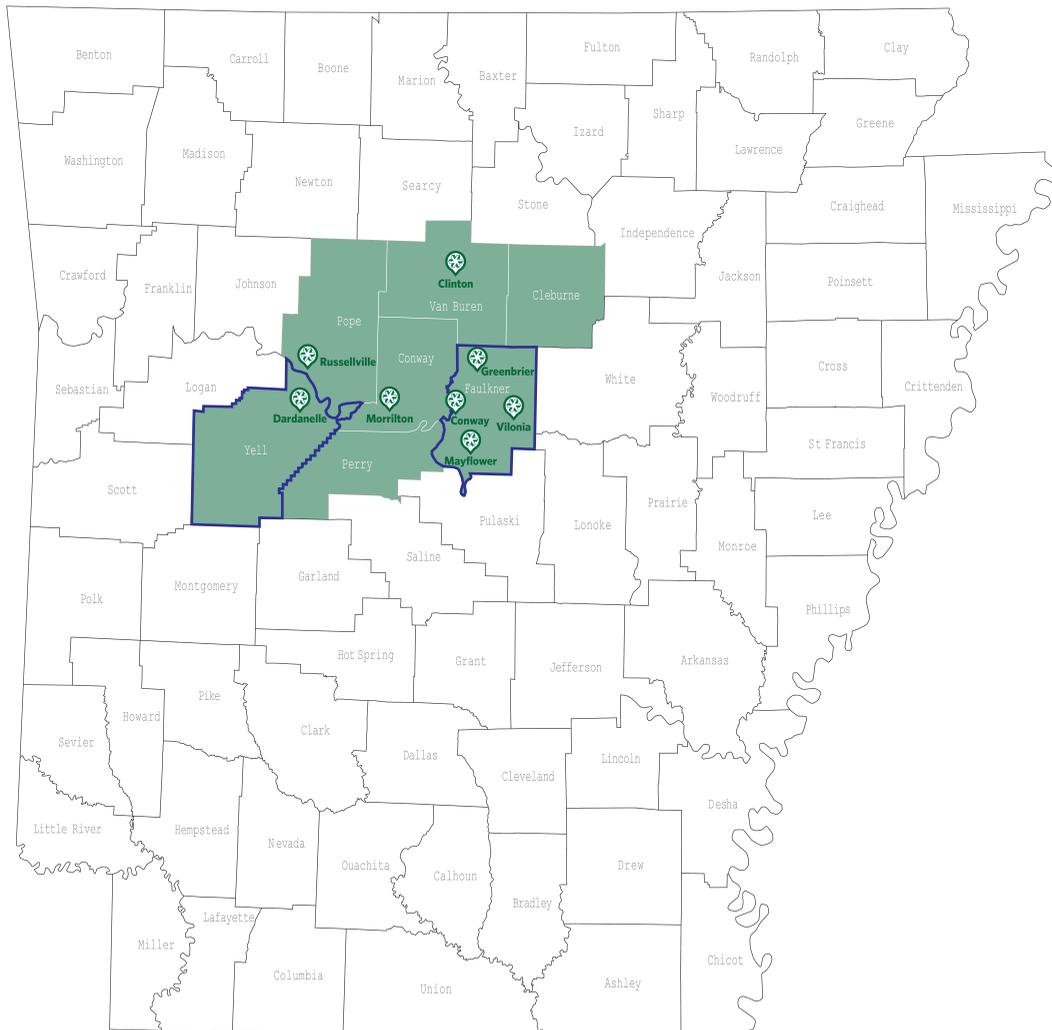
Community Served



This needs assessment is focused on our primary service areas of Faulkner County and Yell County, which includes both urban and rural areas.

Hospital Facility	Primary Commitment Area	Secondary Commitment Area
Conway Regional Medical Center	Faulkner County	Cleburne, Conway, Perry, Pope, Van Buren, and Yell Counties
Dardanelle Regional Medical Center	Yell County	

Established in 1921, Conway Regional Medical Center provides complete health care services to a 7-county area of North Central Arkansas.



Faulkner County Demographics



In 2022: the population of Faulkner County is 128,614 – a 3.0% increase since the last CHNA in 2019.

The median age of Faulkner County is 33.3, which is 4.8 years younger than the national median age of 38.1.

The median household income in Faulkner County is \$54,191. This is higher than the Arkansas average of \$49,475.

Faulkner County is ranked the 4th healthiest county in Arkansas out of 75 total counties.

Faulkner County Demographic Profile

Faulkner County Demographic Profile				
Measurement	Faulkner County		Benchmarks	
	Health Indicator	% Differ from U.S. Average	Arkansas	United States
Median Household Income	\$54,191	\$-12.51%	49,475	\$61,937
Population Below Poverty Line	15.70%	37.72%	16.10%	11.40%
Persons Without Health Coverage	9%	-11.67%	11%	10.20%
High School Degree	92%	3.95%	87%	88.50%
Bachelor's Degree of Higher	32.10%	-2.34%	23.80%	32.09%
Race & Ethnicity				
White	83.00%	9.50%	78.60%	75.80%
Black or African America	12.50%	-8.09%	15.70%	13.60%
American Indian/Alaskan Native	0.70%	-46.15%	1.10%	1.30%
Asian	1.30%	-78.69%	1.80%	6.10%
Hawaiian/Other Pacific Islander	0.01%	-99.97%	0.40%	30.00%
Two or More Races	2.40%	-17.24%	0.40%	30.00%
Hispanic or Latino	4.50%	-76.19%	8.30%	18.90%
White Alone, not Hispanic or Latino	79.00%	33.22%	71.30%	59.30%
Age				
Children/Youth (Under 18 Years Old)	22.80%	2.70%	23.30%	22.20%
Adults (19-64 Years Old)	64.00%	4.92%	59.30%	61.00%
Seniors (65+ Years Old)	13.20%	-21.43%	17.50%	16.80%

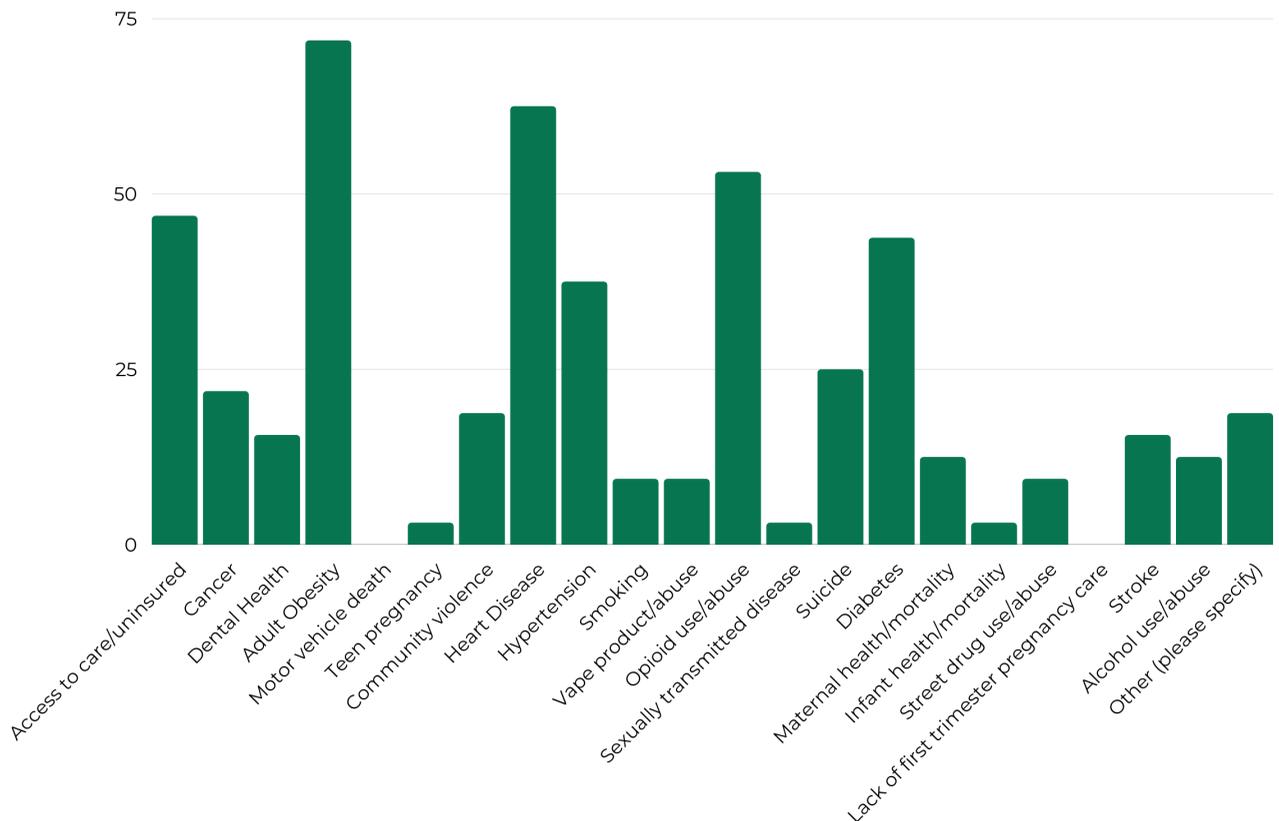


Faulkner County – Assessed Needs by the Numbers

	US AVG				AR AVG				Faulkner County			
	2016	2018	2020	2022	2016	2018	2020	2022	2016	2018	2020	2022
Binge Drinking	17%	13%	18%	19%	14%	16%	16%	16%	16%	17%	18%	16%
20 and older with diabetes	11%	12%	12%	11%	12%	14%	13%	12%	9%	11%	10%	11%
Adults current smoker	18%	14%	17%	20%	25%	24%	22%	21%	22%	18%	21%	20%
Adults report BMI over 30	31%	26%	33%	36%	33%	35%	34%	38%	29%	36%	35%	37%
Adults over 20 with no leisure time physical activity	27%	19%	27%	30%	32%	31%	32%	30%	30%	29%	30%	33%
Live birth with low birth weight	8%	6%	8%	8%	9%	9%	9%	9%	8%	7%	7%	8%

CRMC Stakeholder Feedback

Of the following community health issues in Arkansas, which are the top five (5) MOST prevalent? (Choose 5)





CRMC Stakeholders Focus Group

Based upon the results collected in the Stakeholder Survey, a focus group was conducted. Stakeholders were invited to share concerns, discuss resources currently available, and provide feedback on potential solutions. See Appendix D for detailed results from the Stakeholder Focus Group meeting.

CRMC Community Health Needs

Five major areas were identified as the primary health needs for our community:

- Obesity
- Access to care
- Heart disease
- Substance abuse
- Chronic disease management and diabetes

Faulkner County Goals



Below lists the areas of focus identified through various survey results and community feedback sessions, the goals set by Conway Regional Health System, and several action items set to impact the set goals.

Conway

1. Obesity

a. Increase Awareness for Obesity Management Options

- i.** Bariatric Services: Increase patient engagement in bariatric surgery for obesity management.
- ii.** Obesity Management: Partner with primary care providers to refer patients for medical nutritional therapy with dx of obesity. In addition, educate and prescribe patient pharmacological approaches.
- iii.** Script to Fit: Expand script to fit offerings.

2. Access to Care

a. Enhance Access Points for Patient to Receive Care

- i.** Telehealth: Continue to make this a focus and expand services throughout the organization.
- ii.** Mobile Health Unit: Provide care outside of our primary care and specialty care clinics.
- iii.** Remote Patient Monitoring: Utilize technology to enable monitoring of patients outside of clinical settings.
- iv.** Continue to promote and enhance Patient Navigation Center; one call for healthcare navigation.

b. Continued Focus on Provider Recruitment

- i.** Recruitment: Recruit providers for areas identified as community needs.
- ii.** Graduate Medical Education: Since 2020, Conway Regional has welcomed twelve family medicine residents, five internal medicine residents, and two rural track family medicine residents. We will continue to support and engage with our GME programs which when filled there will be a total of 33 residents.

3. Substance Abuse

a. Increase Access to Tobacco Cessation Programs

- i.** Provide opportunities for tobacco treatment with tobacco treatment specialists at Conway Regional.
- ii.** Increase public health information regarding risks associated with tobacco usage and tobacco treatment.



4. Management of Chronic Diseases (heart disease) & Diabetes

a. *Improve Chronic Disease Management and Diabetes Management*

- i.** Increase availability for heart and health wellness screenings
- ii.** Increase attendance rates of diabetes self-management program
- iii.** Increase referrals to script to fit – diabetes track & heart disease track
- iv.** Add nutritional components to script to fit
- v.** Create and implement community health education lectures

Yell County Demographics



In 2022: the population of Yell County is 20,978 – a 1.7% decrease since 2019.

The median age of Yell County is 40, which is 1.9 years older than the national median age of 38.1.

The median household income in Yell County is \$47,981. This is lower than the Arkansas average of \$49,475.

Yell County is ranked the 25th healthiest county in Arkansas out of 75 total counties.

Yell County Demographic Profile

Yell County Demographic Profile				
Measurement	Yell County		Benchmarks	
	Health Indicator	% Differ from U.S. Average	Arkansas	United States
Median Household Income	\$47,981	-22.53%	\$49,475	\$61,937
Population Below Poverty Line	14.81%	29.91%	16.10%	11.40%
Persons Without Health Coverage	7.20%	-29.41%	11%	10.20%
High School Degree	78.00%	-11.86%	87%	88.50%
Bachelor's Degree of Higher	13.30%	-59.57%	23.80%	32.90%
Race & Ethnicity				
White	93.00%	22.69%	78.60%	75.80%
Black or African America	2.50%	-81.62%	15.70%	13.60%
American Indian/Alaskan Native	1.30%	0.00%	1.10%	1.30%
Asian	1.60%	-73.77%	1.80%	6.10%
Hawaiian/Other Pacific Islander	0.01%	-99.97%	0.40%	30.00%
Two or More Races	1.50%	-48.28%	2.30%	2.90%
Hispanic or Latino	21.20%	12.17%	8.30%	18.90%
White Alone, not Hispanic or Latino	73.50%	23.95%	71.30%	59.30%
Age				
Children/Youth (Under 18 Years Old)	24.10%	8.56%	23.20%	22.20%
Adults (19-64 Years Old)	57.80%	-5.25%	59.30%	61.00%
Seniors (65+ Years Old)	18.10%	7.74%	17.50%	16.80%

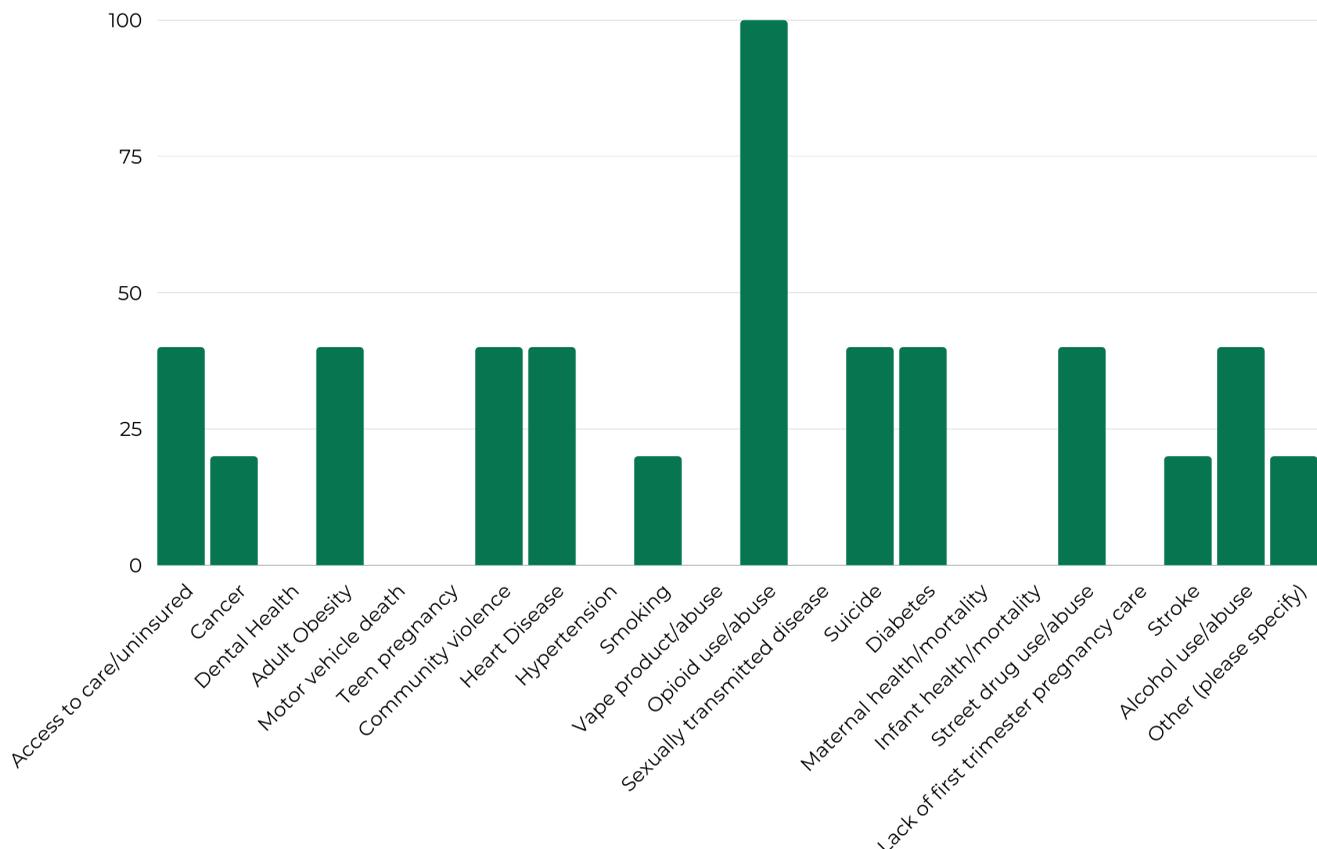


Yell County – Assessed Needs by the Numbers

	US AVG				AR AVG				Yell County			
	2016	2018	2020	2022	2016	2018	2020	2022	2016	2018	2020	2022
Binge Drinking	17%	13%	18%	19%	14%	16%	16%	16%	14%	14%	14%	14%
20 and older with diabetes	11%	12%	12%	11%	12%	14%	13%	12%	12%	13%	14%	13%
Adults' current smoker	18%	14%	17%	20%	25%	24%	22%	21%	23%	21%	21%	23%
Adults report BMI over 30	31%	26%	33%	36%	33%	35%	34%	38%	35%	37%	38%	40%
Adults over 20 with no leisure time physical activity	27%	19%	27%	30%	32%	31%	32%	30%	37%	35%	35%	38%
Live birth with low birth weight	8%	6%	8%	8%	9%	9%	9%	9%	8%	8%	8%	8%

DRMC Stakeholder Feedback

Of the following community health issues in Arkansas, which are the top five (5) MOST prevalent (Choose 5)





DRMC Stakeholders Focus Group

Based upon the results collected in the Stakeholder Survey a focus group was conducted. Stakeholders were invited to share concerns, discuss resources currently available, and provide feedback on potential solutions. See Appendix E for detailed results from the Stakeholder Focus Group meeting.

DRMC Community Health Needs

Five major areas emerged from the qualitative and quantitative data as the primary health needs for our community:

- Obesity
- Access to care
- Mental health
- Substance abuse
- Chronic disease management and diabetes



Dardanelle

Obesity

a. Increase Awareness for Obesity Management Options

- i.** Bariatric Services: Increase patient engagement in bariatric surgery for obesity management.
- ii.** Obesity Management: Partner with primary care providers to refer patients for medical nutritional therapy with dx of obesity. In addition, educate and prescribe patient pharmacological approaches.

2. Access to Care

a. Enhance Access Points for Patient to Receive Care

- i.** Telehealth: Continue to make this a focus and expand services throughout the organization.
- ii.** Mobile Health Unit: Provide care outside of our primary care and specialty care clinics.
- iii.** Remote Patient Monitoring: Utilize technology to enable monitoring of patients outside of clinical settings.
- iv.** Continue to promote and enhance Patient Navigation Center; one call for healthcare navigation.
- v.** Satellite Clinics: Provide various specialty care services through satellite clinics.

b. Continued Focus on Provider Recruitment

- i.** Recruitment: Recruit providers for areas identified as community needs.
- ii.** Graduate Medical Education: Since 2020, Conway Regional has welcomed twelve family medicine residents, five internal medicine residents, and two rural track family medicine residents. We will continue to support and engage with our GME programs which when filled there will be a total of 33 residents.

3. Substance Abuse

a. Increase Access to Tobacco Cessation Programs

- i.** Provide opportunities for tobacco treatment with tobacco treatment specialists at Dardanelle Regional.
- ii.** Increase public health information regarding risks associated with tobacco usage and tobacco treatment.

b. Increase Access to Mental Health Care

- i.** Telehealth: Provide more access to telehealth mental health services.
- ii.** Mobile Health Unit: Provide mental health care to rural areas.



4. Management of Chronic Diseases & Diabetes

a. *Improve Chronic Disease Management and Diabetes Management*

- i. Increase availability for heart and health wellness screenings
- ii. Create and implement community health education lectures
- iii. Increase availability of medical nutrition therapy and diabetes care management in Yell County



Overall Gaps and Limitations

Gaps and limitations in the Conway Regional Health System's 2022 CHNA process are summarized below:

- At times county, state, and national data had to be pulled from separate sources. A comprehensive list of sources is contained in Appendix A.
- Time and resource constraints limited the number of focus groups facilitated in each hospital service area.
- Focus group participants and key informant survey respondents did not include representation from the adolescent population. However, education professionals who interact with adolescents were included.

Thank you Participants!



Aimee Prince, Conway Public Schools
Alan Finley, Conway Regional Health System
Avis Cotton, Dardanelle
Barrett Troup, Conway Regional Health System
Bryan Gibbs, Conway Regional Health System
Carter Dodd, Conway Regional Health System
Celia Carter, Dardanelle Chamber of Commerce
Chris Grace, Dardanelle Public Schools
Corey Parks, Conway Chamber of Commerce
David Merritt, Dardanelle Business Community
Duncan Troup, Conway Regional Health System
E.C. Maltbia, True Holiness Saints Center
Frances Cross, City of Dardanelle
James Reed, Conway Regional Health System
Jami Kendrick, Dardanelle Public Schools
Jamie Burris, Dardanelle Public Schools
Jeff Gilkey, Yell County Judge
John David Keeling, Dardanelle Public Schools
Josh Buchanan, Dardanelle Business Community
Julie Stokes, Dardanelle Public Schools
Katie DeLaune, Conway Regional Health System
Kathy Haston-Hulsey, Dardanelle Regional Medical Center
Keith Kelly, Conway Regional Health System
Lauren Norris, Conway Regional Health System
Leon Lane, City of Dardanelle
Leslie Mann, Conway Regional Health System
Dr. Mark Gotcher, Dardanelle Public Schools
Mark Thone, Yell County Judge
Mary Rose Musil, Dardanelle
Matt Troup, Conway Regional Health System
Melissa Troup, Conway Regional Health System
Paul Bradley, Conway Regional Health System
Rashad Woods, Dardanelle City Council
Rebekah Fincher, Conway Regional Health System
Richard Tyler, Conway Regional Health System
Scott Waniewski, Park Superintendent State of Arkansas
Shakenia Tate, Conway Regional Health System
Shawna Hettinga, Dardanelle Public Schools
Shara Dudley, Dardanelle
Stacey Daughtery, Dardanelle Chamber of Commerce
Terry Kimbrow, Central Baptist College



Resource List

U.S. Demographics

<https://www.census.gov/quickfacts/fact/table/US/PST045221>

Faulkner County Demographics

<https://data.census.gov/cedsci/profile?g=0500000US05045>

<https://datausa.io/profile/geo/faulkner-county-ar#housing>

<https://www.countyhealthrankings.org/app/arkansas/2022/rankings/faulkner/county/outcomes/overall/snapshot>

<https://worldpopulationreview.com/us-counties/ar/faulkner-county-population>

<https://www.arkansas-demographics.com/faulkner-county-demographics>

Arkansas Demographics

<https://www.census.gov/quickfacts/AR>

Yell County Demographics

<https://censusreporter.org/profiles/05000US05149-yell-county-ar/>

<https://datausa.io/profile/geo/yell-county-ar#health>

<https://data.census.gov/cedsci/profile?g=0500000US05149>

<https://www.census.gov/quickfacts/yellcountyarkansas>

<https://www.countyhealthrankings.org/app/arkansas/2022/rankings/yell/county/outcomes/overall/snapshot>

<https://www.arkansas-demographics.com/yell-county-demographics>

<https://worldpopulationreview.com/us-counties/ar/yell-county-population>



Data gathered for chronic disease

<https://nccd.cdc.gov/DHDSPAtlas/Default.aspx>

<https://statecancerprofiles.cancer.gov/incidencerates/index-.php?stateFIPS=05&areatype=county&cancer=001&race=00&sex=0&age=001&stage=99&year=0&type=incd&sortVariableName=rate&sortOrder=default&output=0#results>

<https://datausa.io/profile/geo/faulkner-county-ar?compare=yell-county-ar>

<https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm>

<https://stateofchildhoodobesity.org/diabetes/>

<https://stateofchildhoodobesity.org/adult-obesity/>

<https://worldpopulationreview.com/state-rankings/cancer-rates-by-state>

https://www.cdc.gov/nchs/pressroom/sosmap/heart_disease_mortality/heart_disease.htm

<https://stateofchildhoodobesity.org/hypertension/>

https://www.cdc.gov/nchs/pressroom/sosmap/stroke_mortality/stroke.htm

<https://www.singlecare.com/blog/news/heart-disease-statistics/>

<https://www.cdc.gov/heartdisease/facts.htm>

<https://www.usnews.com/news/healthiest-communities/slideshows/stroke-death-rates-are-highest-in-these-states>

<https://www.cdc.gov/nchs/fastats/heart-disease.htm>

[https://www.cancer.gov/about-cancer/understanding/statistics#:~:text=The%20cancer%20death%20rate%20\(cancer,and%20135.7%20per%20100%2C000%20women\).](https://www.cancer.gov/about-cancer/understanding/statistics#:~:text=The%20cancer%20death%20rate%20(cancer,and%20135.7%20per%20100%2C000%20women).)



CHNA Public Survey 2022

1. What is your age?

- 18-29
- 30-49
- 50-64
- 65+

2. What is your gender?

- Male
- Female

3. What is your race and/or ethnicity?

- Asian or Asian American
- Black or African American
- Hispanic or Latino
- Middle Eastern or North African
- Multiracial or Multiethnic
- Native American or Alaska Native
- Hawaiian or other Pacific Islander
- White or Caucasian
- Prefer not to disclose
- Another race or ethnicity, please list below:

4. What county do you live in?

- Cleburne
- Conway
- Faulkner
- Perry
- Pope
- Van Buren
- Yell
- Other, please list below:

5. How would you describe your community setting?

- Urban
- Suburban
- Rural



6. What is your median household income before taxes?

- \$30,000 or less
- \$30,001-\$50,000
- \$50,001-\$80,000
- \$80,001-\$100,000
- \$100,001+

7. What is your highest level of education?

- No education completed
- Less than high school
- Some high school
- High school diploma
- GED or alternative credential
- Associate degree
- Bachelor's degree
- Master's degree or above

8. On a typical day, how many servings of fruits and/or vegetables do you eat?

- 0 servings
- 1-2 servings
- 3-4 servings
- 5+ servings

9. If you eat less than 5 servings of fruits/vegetables, what challenges do you face that prevent you from eating fruits and/or vegetables?

- Access
- Transportation
- Convenience
- Cost
- Spoils before I can eat it
- Lack of knowledge on preparing/cooking
- Lack of available options at local restaurants and food venues
- Other, please list below:

10. How often do you exercise for at least 30 minutes or more?

- 0 days of the week
- 1-3 days of the week
- 4-6 days of the week
- Every day of the week



11. If you exercise less than 150 minutes per week, what challenges do you face that prevent you from exercising?

- Access
- Transportation
- Cost
- Motivation
- Time
- Childcare
- Safety
- Physical disability
- Cultural barriers
- Lack of awareness of available programs and resources
- Other, please list below:

12. What kinds of things do you find helpful when striving to be physically fit?

- Creating a plan and establishing goals
- Cooking simple meals
- Cutting out soda and junk food
- Trying to be a role model for children/family
- Having a buddy/mentor/accountability partner to help with motivation
- Group/team based physical activity
- Working toward a reward

13. How many days of the week do you have more than two alcoholic beverages?

- 0 days of the week
- 1-3 days of the week
- 4-6 days of the week
- Every day of the week

14. Do you use nicotine?

- Yes
- No

15. How would you rate your overall physical health over the past 30 days?

- Good health
- Average health
- Poor health 1-7 days
- Poor health 8-15 days
- Poor health 16-30 days



16. How would you rate your overall mental health over the past 30 days?

- Good health
- Average health
- Poor health 1-7 days
- Poor health 8-15 days
- Poor health 16-30 days

17. When you get sick, where do you go?

- Clinic/Doctor's Office
- Urgent Care
- Emergency Department
- Health Department
- I don't seek medical attention
- Other, please list below:

18. How long has it been since you have been to the doctor to get a regular checkup when you were well (not because you were already sick)?

- Within the last year
- 1-2 years ago
- 3-5 years ago
- 6 or more years ago
- I have never been to a doctor for a checkup

19. What challenges do you face when seeking health care?

- Access
- Transportation
- Cost
- Motivation
- Time
- Safety
- Cultural barriers
- Lack of awareness of available programs and resources
- None
- Other, please list below:

20. If you are age 35 or over, have you been screened for diabetes?

- Yes
- No
- I am 34 or under



21. If you are age 50 or over, have you had a mammogram screening?

Yes

No

I am 49 or under

22. If you are male and age 50 or over, have you had a prostate screening?

Yes

No

I am not male and/or I am 49 or under

23. Have you been diagnosed with any of the following chronic diseases?

Stroke

Heart disease

Cancer

Asthma

Chronic lung disease

Chronic kidney disease

Alzheimer's disease

Cancer

Diabetes

Obesity

Hypertension

Chronic pain

Mental health such as anxiety, depression, anger, etc.

Other, please list below:

24. In the last year, was there a time when you needed prescription medicine, but were not able to get it?

Yes

No

25. If you answered "yes" to the previous question, why weren't you able to get prescription medication?

Access

Transportation

Cost

Motivation

Time

Safety

Cultural barriers

Lack of awareness of available programs and resources

Other, please list below:



26. What challenges do you face when seeking mental health counseling?

- Access
- Transportation
- Cost
- Motivation
- Time
- Safety
- Cultural barriers
- Lack of awareness of available programs and resources
- None
- Other, please list below:

27. What top 3 areas of healthcare do you feel are most important to our community?

- Stroke
- Heart disease
- Cancer
- Asthma
- Chronic lung disease
- Chronic kidney disease
- Alzheimer's disease
- Cancer
- Diabetes
- Obesity
- Hypertension
- Chronic pain
- Mental health such as anxiety, depression, anger, etc.
- Fitness
- Nutrition
- Stress reduction methods
- Nicotine Cessation
- Substance abuse
- Sexual health
- STDs
- HIV/AIDS
- Dental health
- Aging issues, such as Alzheimer's disease, Dementia, memory loss, hearing loss, arthritis, etc.
- Other, please list below:

28. Please list any health initiatives you are aware of in the community.

29. What do you feel could be done in the community to improve health and quality of life?

Appendix C



Conway Regional Health System is in the midst of its triannual Community Health Needs Assessment (CHNA) process. You are invited to participate in a survey that will help identify the key areas of focus for our community health improvement efforts over the next three years. The survey consists of 10 multi-part questions and will take approximately 10 minutes to complete.

Survey results are shared in aggregate form in the final assessment report, and relevant quotes from your survey may be used to solidify data points. However, information that could reveal your individual identity will not be shared in association with any data points or quotes included in the final report.

At the conclusion of the survey, space is provided for any additional feedback you would like to share about Conway Regional Health System community health improvement efforts. Thank you for taking the time to complete this survey.

1. Which of the following best represents your community affiliation? (CHOOSE 1)

- Public Health
- Public Safety (fire, police, emergency services)
- Military
- Mental/Behavioral Health
- Non-Profit/Social Services
- Elder Care
- Faith-Based/Church/Parish Services
- Youth Education (Grades K-12)
- Higher Education
- Youth Services
- Business
- Community Partner
- Physician
- Health Fitness Center
- Foundation

2. How long have you been in your current community position?

- 1 to 5 years
- 6 to 9 years
- 10 to 19 years
- 20 + years



3. Of the following community health issues in Arkansas, which are the top five (5) MOST prevalent? (CHOOSE 5)

Access to care/uninsured	Heart disease	Diabetes
Cancer	Hypertension	Maternal health / Mortality
Dental Health	Smoking	Infant health / Mortality
Adult Obesity	Vape products use / Abuse	Street drugs use / Abuse
Motor vehicle death	Opioid use / Abuse	Lack of 1 st trimester pregnancy care
Teen pregnancy	Sexually transmitted disease	Stroke
Community Violence	Suicide	Alcohol use / Abuse
Other (please list):		

4. Of the top five MOST prevalent health issues you identified, which is the MOST significant contributor to poor health in your community? (CHOOSE 1)

Access to care/uninsured	Heart disease	Diabetes
Cancer	Hypertension	Maternal health / Mortality
Dental Health	Smoking	Infant health / Mortality
Adult Obesity	Vape products use / Abuse	Street drugs use / Abuse
Motor vehicle death	Opioid use / Abuse	Lack of 1 st trimester pregnancy care
Teen pregnancy	Sexually transmitted disease	Stroke
Community Violence	Suicide	Alcohol use / Abuse
Other (please list):		

5. Of the following socioeconomic factors, which has the MOST significant negative impact on the health of YOUR community? (CHOOSE 3)

Lack of community resources for healthy food	Limited transportation options	Poverty-level household income
Lack of personal resources for healthy food	Housing costs	Housing problems (infestations, building, conditions, etc. ...)
Poverty rate	Income inequality	Unemployment
Lack of healthcare converge	Inadequate education	Other (please list):



6. Of the three socioeconomic factors you selected, please rank them in the order in which they influence the health of YOUR community (1 = most significant; 3 = least significant):

Lack of community resources for healthy food	Limited transportation options	Poverty-level household income
Lack of personal resources for healthy food	Housing costs	Housing problems (infestations, building, conditions, etc. ...)
Poverty rate	Income inequality	Unemployment
Lack of healthcare converge	Inadequate education	Other (please list):

7. Which of the following populations are the MOST vulnerable for poor health in YOUR community?

Uninsured / Underinsured	Hispanic / Latino	Black / African American
Low-income	Immigrant / Refugee	Disabled
Children / Youth	Young adults	Seniors / Elderly
Homeless	White / Caucasian	Asian
Pacific Islanders	Europeans	None of these
LGBTQ	Veterans	Other (please list):

8. For the populations you selected, please list two key health needs that most influence the health and wellbeing of the people in those populations:

9. For the populations you selected, please list two key interventions that would help to address their health needs:

10. Is there anything additional you would like to share?

Appendix D

CRMC Focus Group Results



Problems & Concerns	More Info on Problems/Concerns	Resources Currently Available	Solutions
Mental Health Care	Lack of physicians that can address mental health		
	All ages impacted		
	In patient		
Men's Health	Preventative care desired	Duck Derby	Increase formats similar to Duck Derby
	Make access to men's healthcare more accessible		Men's healthcare truck goes to more sites
	Education on men's health		Look at programs that already exist and see how CRMC can help or add on to existing program
Obesity	Access to healthy food options	CRMC Fitness Center	Education about healthy foods
	Lack of education regarding food and exercise choices	Kids Fun Run	Work with schools to promote childhood programs to increase movement
	Lack of movement in population	Clubs	Activities at parks
	This is a large problem in youth age group – too many children do not move and spend too much time on electronics		Family activities that increase movement
			Look at programs that already exist and see how CRMC can help or add on to existing program
Substance Abuse	Meth and opioids	Conway Police	
	Impacts all ages and socioeconomic levels		
	Substance abuse after hospitalization		

Appendix E

DRMC Focus Group Results



Problems & Concerns	More Info on Problems/Concerns	Resources Currently Available	Solutions
Drugs	Meth	Lake Pointe – Head Start program and on-site daycare	Narcan in ER – available free through state program – do we need to get word out about this?
	Opioids	Teen Challenge Program	
	Fentanyl	NA/AA groups	
	Impacts all ages and socioeconomic levels	CSI – involved with school	
	Huge problem	Edgenuity – school district education program	
Lack of physicians	Large wait times to get an appointment		FP Residency program coming
	Preventative care for lower socioeconomic peoples		
	Transportation to care is a problem		
Urgent Care Access			Primary care extended hours or days
Mental health care	Lack of physicians that can address mental health	Willow Springs	
	All ages impacted	Counseling services	
		River Valley AVA – in school district	
		Child Advocacy Center	



Problems & Concerns	More Info on Problems/Concerns	Resources Currently Available	Solutions
Pediatric care inadequate	70% on free and reduced lunch in Dardanelle School District		Add clinic at school – possible partnership
Women’s services	Most with transportation travel to Conway for care but many do not have transportation		
	Mammography, OB, Gynecology		
Normalize discussions about all problems			
Lack of trust with Hispanic population	Build relationship with Tyson		Make sure brochures are in right language and dialect
Obesity	Access to healthy food options		
	Lack of education regarding food exercise and choices		Exercise facility similar to CRMC Fitness Center
	Lack of movement in population despite many outdoor activities		



Problems & Concerns	More Info on Problems/Concerns	Resources Currently Available	Solutions
Indoor exercise facility needed		Pickleball at community center	Exercise facility similar to Fitness Center
Pathway to citizenship		Maryanne Collins – aide's residents in area on gaining citizenship	
Language barrier	Population of Spanish speaking persons in Yell County from 3 groups: El Salvador, Mexico, Puerto Rico	AR River Valley – language classes – evening classes – need a place to meet	Utilize portion of hospital?
		Library has a translator	Use Spanish language for advertisements and brochures
		Sept. 24 2-7 pm Hispanic Heritage Health Fair	DRMC have presence at Health Fair
Lack of access to internet	People cannot access internet to gain education or make an appointment for care		Bright Speed highspeed internet coming – Mayor Witt working on this, and it is coming soon
Social worker access	Need to help families fill out paperwork to gain assistance		



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