2022 Community Health Needs Assessment

JUPITER MEDICAL CENTER



Jupiter Medical Center 2022 CHNA

Jupiter Medical Center (hereinafter referred to as "JMC" or "Jupiter") 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. 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 2021 through June 2022, 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.

Jupiter obtained input from 9 leaders representing public health, healthcare organizations, social services, and community leaders through key stakeholder interviews. Primary input was also obtained by conducting an online 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)
- Key health indicators

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

Appendices

Jupiter Medical Center 2022 CHNA

The process identified the following health issues listed in alphabetical order:

- Access to Medical Specialists
- Access to Primary Care Providers
- Adult Mental Health
- Affordability of Health Care
- Asthma in Children
- Chronic Diseases
- Food Insecurity/Low Food Access
- Health Equity/Racism
- Obesity

- Pedestrian/Biker Safety
- Pediatric Mental Health
- Poverty Among Children
- Preventative Care
- Substance Use
- Transportation
- Unintentional Injuries
- Youth Vaping

Health needs were prioritized with input from a broad base of members of JMC's Leadership Team by utilizing a scoring guide.

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 chose the needs below to address over the next three years. Opportunities for health improvement exist in each area. JMC will work to identify areas where it can most effectively focus its resources to have significant impact and develop an Implementation Strategy for fiscal years ending 2023-2025.

Access to Services On Our Campus and in Our Region Access to Primary Care Providers

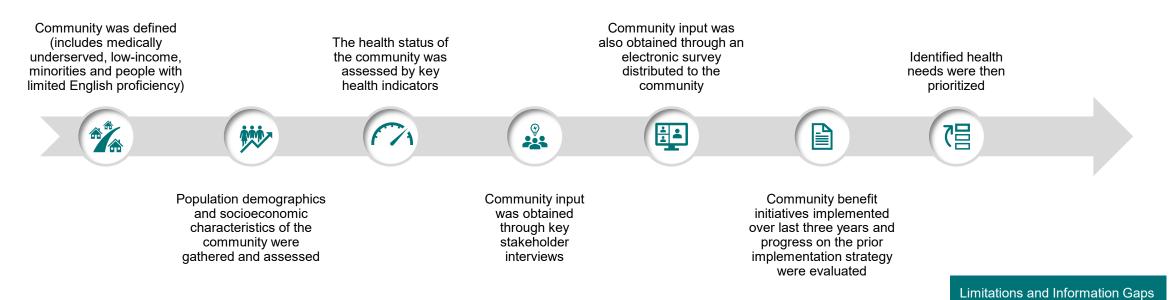
Chronic Diseases Expand Offerings on Chronic Diseases Such as Cancer and Heart Disease

How the Assessment was Conducted

Jupiter conducted a community health needs assessment (CHNA) to support its mission responding to the needs in the community it serves and to fulfill the requirements established by the Patient Protection and Affordable Care Act of 2010 and comply with federal tax-exemption requirements. This is the fourth CHNA conducted by Jupiter. The goals were to:

- ✓ Identify and prioritize health issues in Jupiter's service area, particularly for vulnerable and under-represented populations.
- ✓ Ensure that programs and services closely match the priorities and needs of the community.
- ✓ Strategically address those needs to improve the health of the communities served by Jupiter facilities.

Based on current literature and other guidance from the United States Department of the Treasury, the following steps were conducted as part of Jupiter's CHNA:



Appendices

Acknowledgements

The community health needs assessment for Jupiter Medical Center supports the organization's mission to *"deliver excellent and compassionate healthcare advancing the well-being of the people it serves."* This community health needs assessment was made possible because of the commitment toward addressing the health needs in the community. Many individuals across the organization devoted time and resources to the completion of this assessment.

Jupiter would like to thank leaders from the following community organizations who participated in focus groups and interviews and provided valuable information to be used in the assessment:

- FoundCare, Inc.
- Health District of Palm Beach County
- Healthier Jupiter
- Limestone Creek Community
- MyClinic
- Palm Beach County Health Department
- Palm Health Foundation
- 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 community health needs assessment should be directed to:

Sue Goulding Marketing Manager Sgoulding@jupiter.com About Our Community

Key Health Indicators

Comprehensive Stroke Center – Opened in March 2020

General Description of Jupiter Medical Center

Since our founding in 1979, we have flourished to become one of South Florida's most respected and preferred hospitals, consistently performing in the top 10 percent of hospitals for patient quality and satisfaction. Recognized as the region's only independent, not-for-profit hospital, JMC consists of 248 private acute care hospital beds, provides a broad range of services with specialty concentrations in cancer care, orthopedic/spine, emergency services, cardiac services, women's and children's services, minimally invasive surgical procedures, including a robotic surgery program, advanced diagnostics and rehabilitation. JMC is affiliated with the University of Miami Miller School of Medicine.

Building for the Future: Jupiter Medical Center is entering a new era of health care as we continue to grow and expand our services in key medical specialties - all with the goal of making world-class care available right here in our community. JMC continues to expand health services to meet the needs of the community. Below are some of the recent expansions that are now open for care:

Anderson Family Cancer Institute – Opened in March 2020



Timothy and Jayne Donahue Cardiac Surgery Program





Neonatal Intensive Care Unit



Mastroianni Family Pediatric Emergency Department



James J. Felcyn & Louise Brien Felcyn Observation Unit

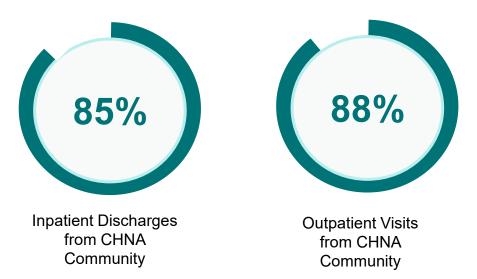


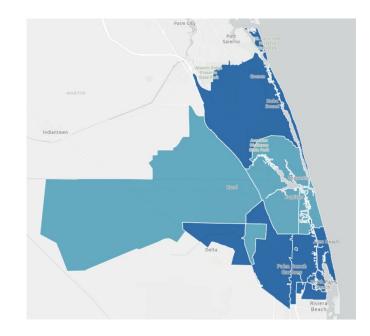
Who We Serve

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.

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.

CHNA Community





Jupiter Medical Center CHNA Community

Primary Service Area	
Zip Code	Community
33458	Jupiter
33477	Jupiter
33478	Jupiter
33469	Tequesta

Secondary Service	Area	
	Zip Code	Community
	33455	Hobe Sound
	33410	Palm Beach Gardens
	33418	Palm Beach Gardens
	33408	North Palm Beach
	33403	West Palm Beach

Community Overview

Demographic Data

To understand the profile of Jupiter's CHNA community, the demographic and health indicator data were analyzed for the population within the defined service area. Data was analyzed for the CHNA Community as a whole as well the primary and secondary service areas. Information was analyzed for Palm Beach and Martin Counties when data was unavailable at the zip code level.

The CHNA community has a total population of 229,529 according to the U.S. Census Bureau American Community Survey 2015-2019 5-year estimates. The percentage of population by combined race and ethnicity is made up of 77.25% Non-Hispanic White, 11.65% Hispanic or Latino, 6.14% Non-Hispanic Black, 2.77% Non-Hispanic Asian and 2.19% Non-Hispanic some other race. The demographic makeup of the CHNA community is as follows:



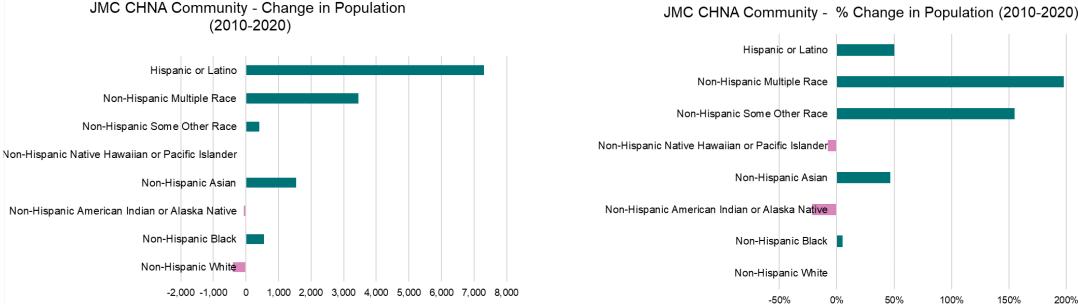
Growing Diversity

According to the Florida Legislature, Office of Economic and Demographic Research, the population for both Palm Beach and Martin Counties has experienced significant growth since 2010 with reported population percentage increases of 11.33% for Palm Beach County and 9.96% for Martin County.

Most of the increase in net migration is primarily among the Hispanic population which experienced a 35.99% and 27.12% increase in population from 2010 to 2020 in Palm Beach County and Martin County, respectively.

		Palm Bea	ch County		Martin County						
	2020 Population	2010 Population	Population Change	% Change	2020 Population	2010 Population	Population Change	% Change			
Race											
White	1,097,263	1,024,203	73,060	7.13%	145,018	133,307	11,711	8.78%			
Black	291,463	234,287	57,176	24.40%	9,151	8,089	1,062	13.13%			
Other	81,178	61,819	19,359	31.32%	6,848	5,038	1,810	35.93%			
	1,469,904	1,320,309	149,595	11.33%	161,017	146,434	14,583	9.96%			
Ethnicity											
Hispanic	343,313	252,456	90,857	35.99%	22,844	17,970	4,874	27.12%			
Non-Hispanic	1,126,591	1,067,853	58,738	5.50%	138,173	128,464	9,709	7.56%			
	1,469,904	1,320,309	149,595	11.33%	161,017	146,434	14,583	9.96%			

Data Source: The Florida Legislature, Office of Economic and Demographic Research.



JMC CHNA Community - % Change in Population (2010-2020)

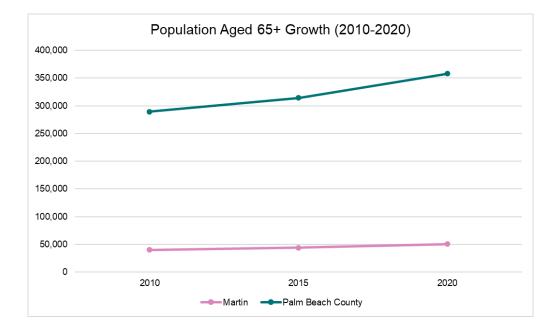
9

250%

Aging Population

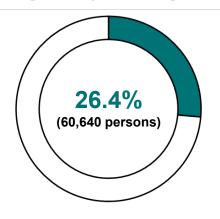
The Florida Legislature, Office of Economic and Demographic Research, also reports a significant increase in population for persons 65 and older in Palm Beach and Martin Counties. As shown in the table below, the age groups for persons 65+ increased by 68, 631 and 10,437 from 2010 to 2020 for Palm Beach County and Martin County, respectively. Within JMC's CHNA Community, this age group increased by 25.5%, or 60,640 seniors.

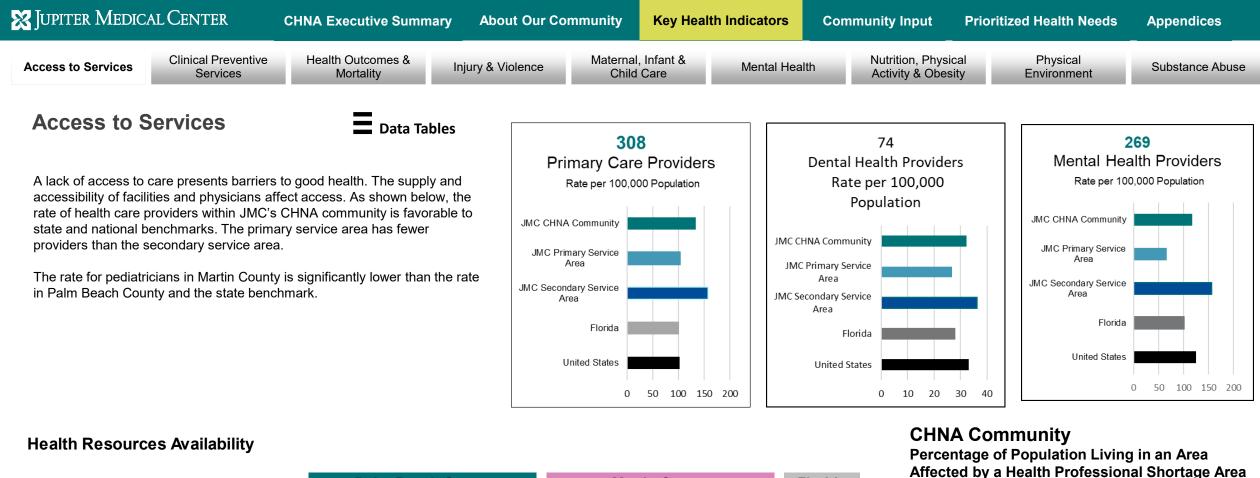
As of 2020, the population represents nearly 25% of the total population for Palm Beach County and over 31% of the total population for Martin County.



		Palm Bead	ch County			Martin	County	
	2020 Population	2010 Population	Population Change	% Change	2020 Population	2010 Population	Population Change	% Change
Age Group								
< 5	74,932	69,555	5,377	7.73%	6,606	6,052	554	9.15%
5-14	155,263	149,111	6,152	4.13%	14,643	14,569	74	0.51%
15-24	157,702	151,977	5,725	3.77%	14,421	14,067	354	2.52%
25-44	343,818	308,847	34,971	11.32%	30,019	27,526	2,493	9.06%
45-64	380,187	351,448	28,739	8.18%	44,558	43,887	671	1.53%
65-74	173,438	132,983	40,455	30.42%	24,722	19,699	5,023	25.50%
> 74	184,564	156,388	28,176	18.02%	26,048	20,634	5,414	26.24%
	1,469,904	1,320,309	149,595	11.33%	161,017	146,434	14,583	9.96%
Population Aged 65+ Percentage of Total Population	358,002 24.36%				50,770 31.53%	40,333 27.54%		

CHNA Community Percentage of Population Aged 65+

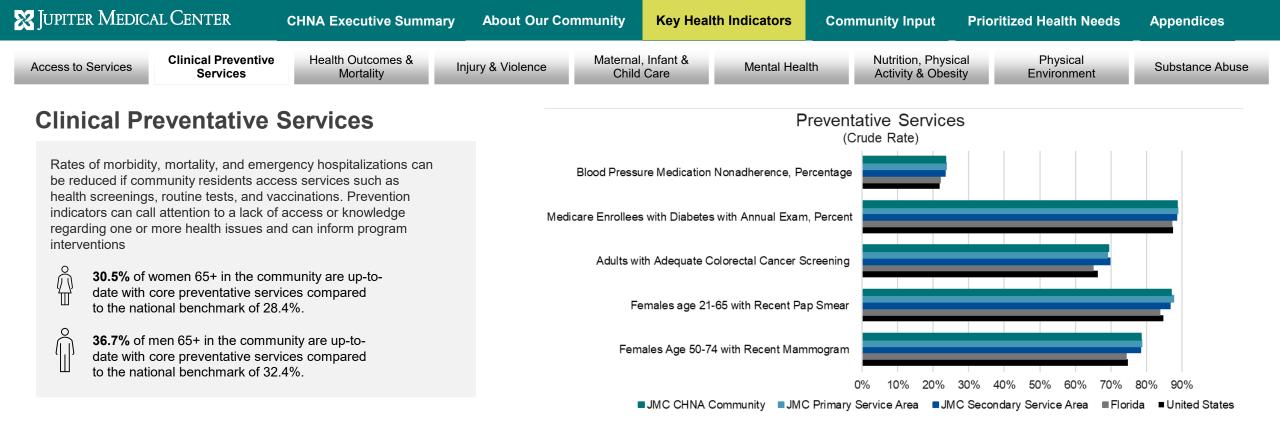


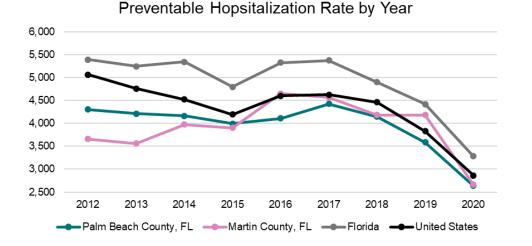


	Palm	Beach Cou	unty		Ma	rtin County	,	Florida
	County	County	Rate Per	Count	ty	County	Rate Per	Rate Per
	Quartile	Number	100,000	Quarti	le	Number	100,000	100,000
Total Licensed Family Practice Physicians	2	223	15.2		2	24	14.9	19.2
Total Licensed Internists	1	895	60.9		1	89	55.3	47.3
Total Licensed OB/GYN	1	189	12.9		1	16	9.9	9.2
Total Licensed Pediatricians	1	315	21.4		3	12	7.5	21.9

Data Source: Florida Department of Health, Division of Medical Quality Assurance, Agency for Health Care Administration

2.56% (5,872 persons)



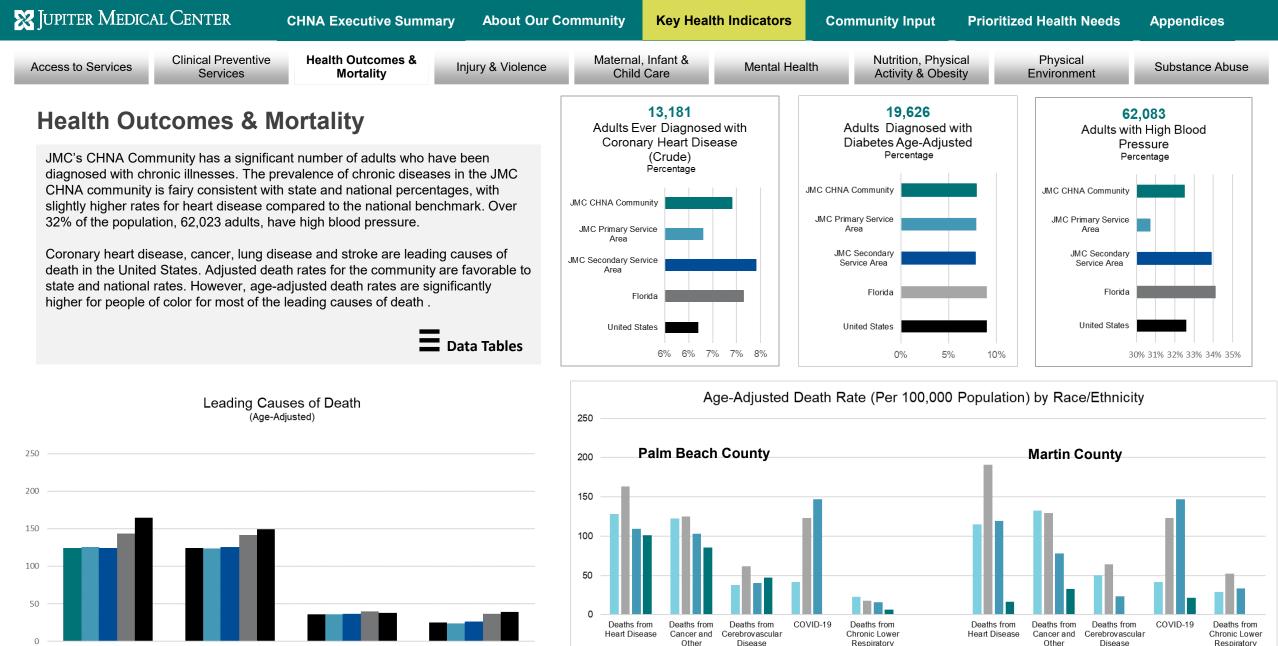


Preventable hospitalizations include hospital admissions for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection.

- The rate for preventable hospitalizations in the CHNA Community is favorable to state and national rates and the rate has significantly improved since 2018.
- Preventable hospitalizations are significantly higher for Black and African American residents compared to Non-Hispanic White and Hispanic or Latino residents.



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Neoplasms

(Stroke)

Deaths from Heart Disease Deaths from Cancer and Deaths from Cerebrovascular Deaths from Chronic Lower Other Neoplasms Disease (Stroke) Respiratory Disease

■ JMC CHNA Community ■ JMC Primary Service Area ■ JMC Secondary Service Area ■ Florida ■ United States

Data Source: https://www.flhealthcharts.gov/ChartsReports/rdPage.aspx?rdReport=ChartsProfiles.HealthEquityMergeMHProfile

■ White ■ Black ■ Hispanic ■ Other

Neoplasms

(Stroke)

Disease

Disease

X Jupiter Medic	al Center	CHNA Executive Summ	ary About Our Cor	nmunity Key He	Key Health Indicators		mmunity Input	Prioritized Health Needs		Appendices
Access to Services	Clinical Preventive Services	Health Outcomes & Mortality	Injury & Violence	Maternal, Infant & Child Care	Mental Heal	lth	Nutrition, Physic Activity & Obesi		hysical ⁄ironment	Substance Abuse

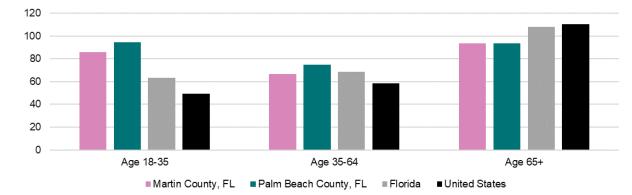
Injury and Violence

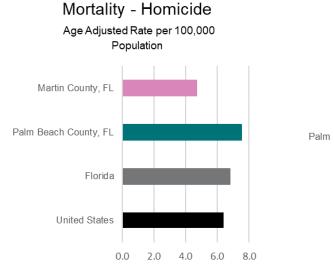
Crime rates for Martin County are favorable state and national rates, whereas, crime rates for Palm Beach County are slightly unfavorable to state and national rates.

The unintentional death rate related to unintentional injury for both Martin and Palm Beach Counties is slightly higher than state and national benchmarks. As shown in the chart to the right, deaths from unintentional injury for persons aged 18-35 are significantly higher than state and national benchmarks.

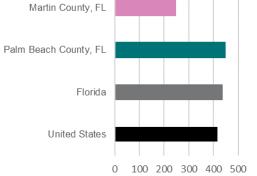


Unintentional Injury (Accident) Mortality, Age-Adjusted Rate (Per 100,000 Population by Age











2000

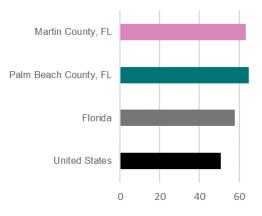
1000

3000

Florida

United States

Unintentional Injury, Age-Adjusted Death Rate Rate per 100,000 Population



X Jupiter Medic.	al Center	CHNA Executive Summa	ry About Our Co	About Our Community		Key Health Indicators		Community Input		ritized Health Needs	Appendices
Access to Services	Clinical Preventive Services	Health Outcomes & Mortality	Injury & Violence	Maternal, Child	•	Mental Health	h	Nutrition, Physic Activity & Obes		Physical Environment	Substance Abuse

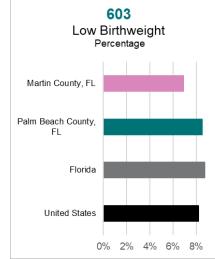
Maternal, Infant and Child Health

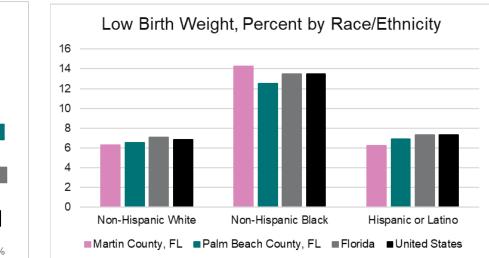
Engaging in prenatal care decreases the likelihood of maternal and infant health risks such as low birth weight. Rates for low birth weight and infant mortality indicate significantly higher rates for Non-Hispanic Black population.

Selected indicators from the Pregnancy and Young Child Profile maintained by the Florida Department of Health are provided in the table below for Martin and Palm Beach Counties. The profile indicates needs in the following areas:

- · Births to overweight mothers at the time pregnancy occurred
- Children ages 1-5 receiving mental health treatment services
- Asthmas hospitalizations ages 1-5
- Kindergarten children fully immunized

Data Tables





Pregnancy and Young Child Profile- 2020 (Selected Indicators)

		Mar	tin County		Palm B	Palm Beach County			
		County	County	Rate Per	County	County	Rate Per	Rate Per	
Health Indicator	Rate Type	Quartile	Number	100,000	Quartile	Number	100,000	100,000	
Births to teen mothers ages 15-19	Per 1,000 females 15-19 (2018-20)	1	146	13.3	1	1,679	14.3	16.0	
Births to mothers >35	Per 1,000 females > 35 (2018-20)	2	573	3.4	4	8,297	5.9	5.1	
Births to overweight mothers at time pregnancy occurred	Percent of births (2018-20)	4	1,027	28.2	4	11,802	28.4	27.5	
Births with late or no prenatal care	status (2018-20)	2	224	6.3	3	3,362	8.5	7.2	
Infant deaths (0-364 days)	Per 1,000 live births (2018-20)	1	18	4.9	1	196	4.5	6.0	
Children ages 1-5 receiving mental health treatment services	Per 1,000 population 1-5 (2016-18)	4	133	6.9	4	1,122	5.1	2.7	
Emergency room visits 0-5	Per 100,000 population 0-5 (2018-20)	1	9,649	40,781.6	1	127,773	47,604.9	58,854.7	
Asthma hospitalizations ages 1-5	Per 100,000 population 1-5 (2018-20)	3	77	384.2	4	1,267	563.0	423.3	
Preventable Pediatric Hospitalizations from Asthma under 5	Per 100,000 population under 5 (2020)	1	16	242.2	4	408	544.5	435.9	
Kindergarten children fully immunized	Percent of KG students (2020)	4	1,354	90.8	4	14,135	92.1	93.5	

Data Source: https://www.flhealthcharts.gov/ChartsReports/rdPage.aspx?rdReport=ChartsProfiles.PregnancyandYoungChild

X Jupiter Medic	al Center	CHNA Executive Summ	ary About Our Co	mmunity	Key Hea	Ith Indicators	Corr	nmunity Input	Prior	itized Health Needs	Appendices
Access to Services	Clinical Preventive Services	Health Outcomes & Mortality	Injury & Violence	Maternal, I Child C		Mental Heal	th	Nutrition, Physic Activity & Obesi		Physical Environment	Substance Abuse

Mental Health

The 2020 reported hospitalizations attributable to mental disorders indicates higher rates for persons 18-21 and 22-24 in Martin County.

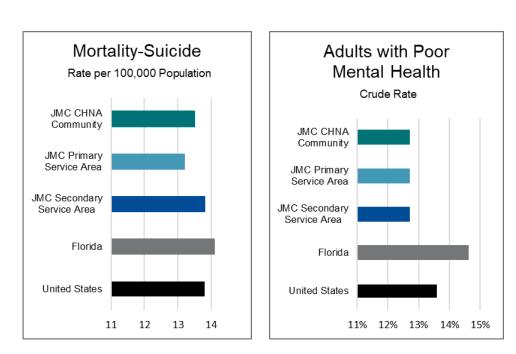
The number of adjusts with poor mental health in the JMC CHNA Community is favorable to state and national benchmarks. The map to the left reports the percentage of adults (ages 18 years and older) reporting 14 days or more of poor mental health per month. Zip codes with the highest percentages reported are 33403 and 33408.



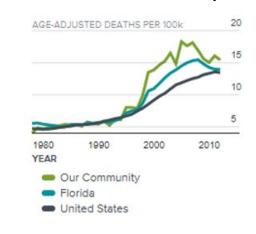
Hospitalizations Attributable to Mental Disorders - 2020

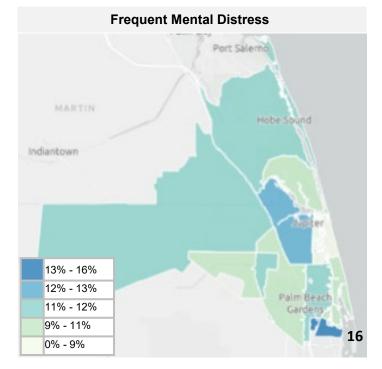
	Palm Beach	County	Martin Co	ounty	Florida		
Age Group	Count	Rate	Count	Rate	Count	Rate	
Under age 18	2,065	737.8	170	653.8	25,690	599.9	
18-21	799	1,299.80	87	1,576.40	12,367	1,262.30	
22-24	597	1,283.00	66	1,591.40	9,380	1,230.90	
25-44	4,476	1,301.90	397	1,322.50	68,502	1,256.70	
45-64	3,795	998.2	457	1,025.60	61,814	1,093.90	
65-74	893	514.9	142	574.4	14,700	593.7	
75 or older	557	301.8	89	341.7	8,422	413	
Total	13,182	896.8	1,408	874.4	200,907	928.4	

Data Source: Florida Agency for Health Care Administration



Mortality Trends for Mental and Substance Use Disorders in the JMC CNHA Community





WITTER MEDICAL CENTER **CHNA Executive Summary About Our Community Key Health Indicators Community Input Prioritized Health Needs Appendices** Clinical Preventive Health Outcomes & Maternal. Infant & Nutrition, Physical Physical Injury & Violence Access to Services Mental Health Substance Abuse Activity & Obesity Services Mortality Child Care Environment

Nutrition, Physical Activity and Obesity

Healthy diets and physical activity contribute to healthy lifestyles and overall well-being. These factors are relevant because current behaviors are determinants of future health and well-being and these indicators may be linked to significant health issues, such as obesity and poor cardiovascular health.

- Over 50% of the census tracts are designated as food deserts, meaning the census tract lacks healthy food sources due to income level, distance to supermarkets, or vehicle access. Over 12% of the population (28,398 persons) live with food insecurity in the JMC CHNA Community.
- Over 42,000 persons, or 22% of adults, are obese in the JMC CHNA Community. Obesity rates for Palm Beach and Martin Counties has steadily been increasing since 2013.
- 23% of adults, age 20 and older, self-report no active leisure time physical activity.
- Approximately 55.10% of public-school students in the JMC CHNA Community are eligible for free or reduced-price lunch program, which is higher than the state average for Florida of 54.43%

The map to the right reports the percentage of the low-income population with low food access. Low food access is defined as living more than $\frac{1}{2}$ mile from the nearest supermarket or large grocery store. The low- income population with low food access in the community is 11,086 with the following zip codes reporting the highest percentages: 33418, 33455, 33478.



28,398

Food Insecure Population





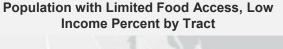
Adults with BMI>30 (Obese)

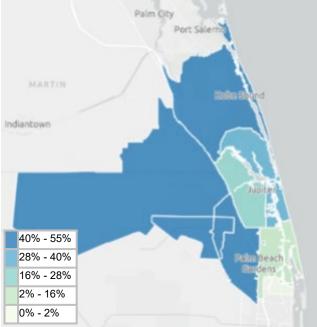


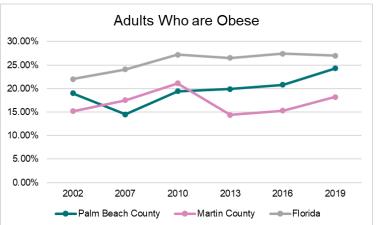
7,820

Students Eligible for Free or Reduced- Price Lunch

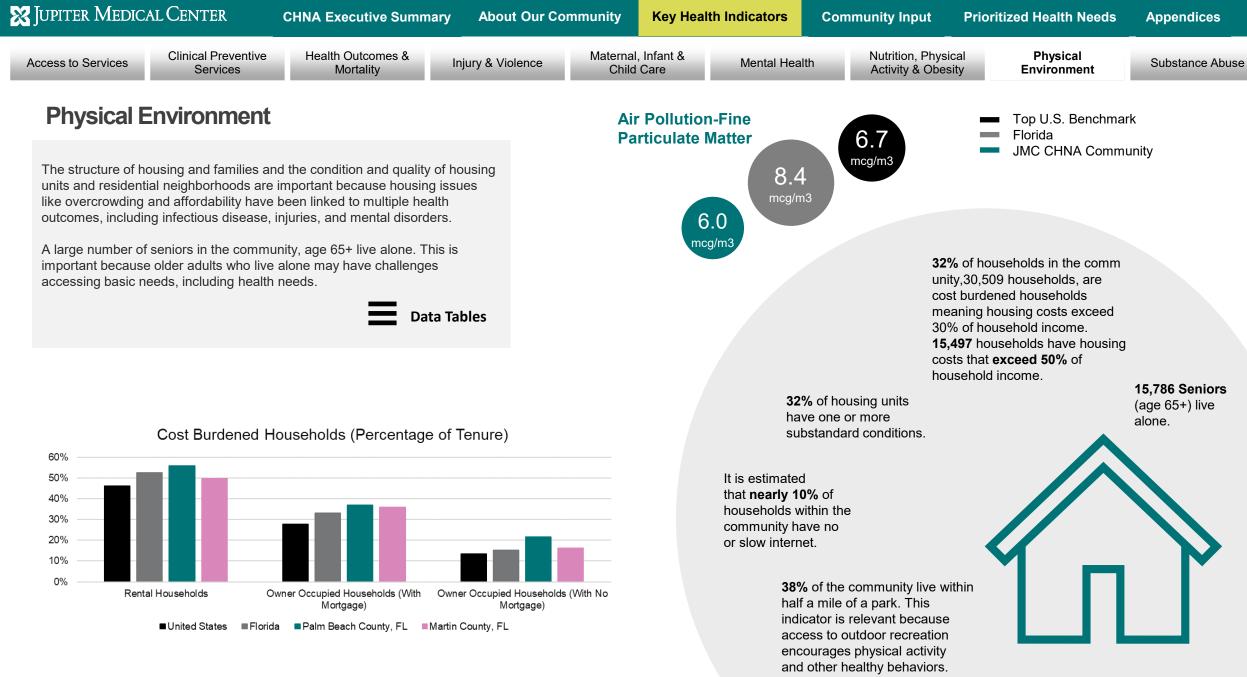








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W JUPITER MEDICAL CENTER **CHNA Executive Summary About Our Community Key Health Indicators Community Input Prioritized Health Needs Appendices** Clinical Preventive Health Outcomes & Maternal. Infant & Nutrition, Physical Physical Injury & Violence Access to Services Mental Health Substance Abuse Child Care Activity & Obesity Services Mortality Environment

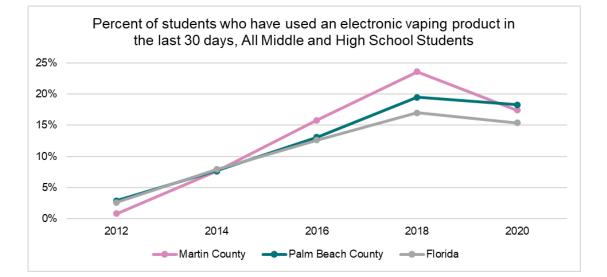
Substance Abuse

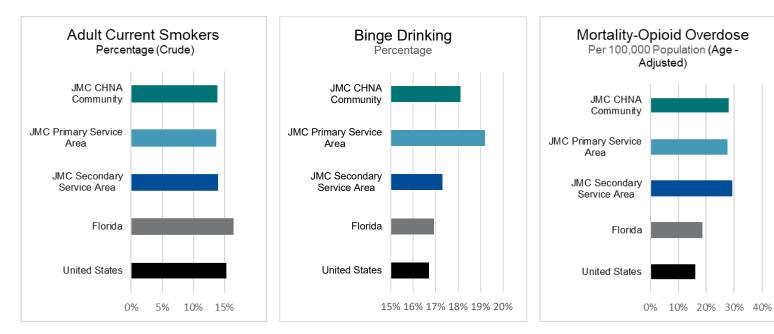
The percentage of adults in the JMC CHNA Community who currently smoke is 13.8% and is favorable to state and national benchmarks.

Binge drinking, having five or more drinks (men) and four or more drinks (women) on an occasion in the past 30 days is significantly higher in the primary service area compared to the national rate of 16.7%.

Among the youth population in the JMC CHNA Community, vaping of electronic products has significantly increased over the last ten years. Over 20% of middle and high school students reported vaping in the last 30 days according to the 2020 Florida Youth Tobacco Survey.

Data Tables





About Our Community

Key Health Indicators Community Input

Key Stakeholder Interviews

Jupiter Medical Center obtained input from 9 leaders representing public health, healthcare providers, social services and local government leaders through key stakeholder interviews. Interviews were conducted on November 18th and 19th of 2021.



Health Disparities

Stakeholders described somewhat of a "split community" – meaning that the middle- and upper-class can have a good life, whereas the working poor and generational poor experience accelerated health issues.

Barriers

The barriers or problems that keep community residents from obtaining necessary health services and improving health in their community include challenges with access to services related to language and transportation issues, lack of access to medical specialists and treatment once a person is diagnosed, lack of affordable housing and healthy food and the increasing lack of trust in the medical community.



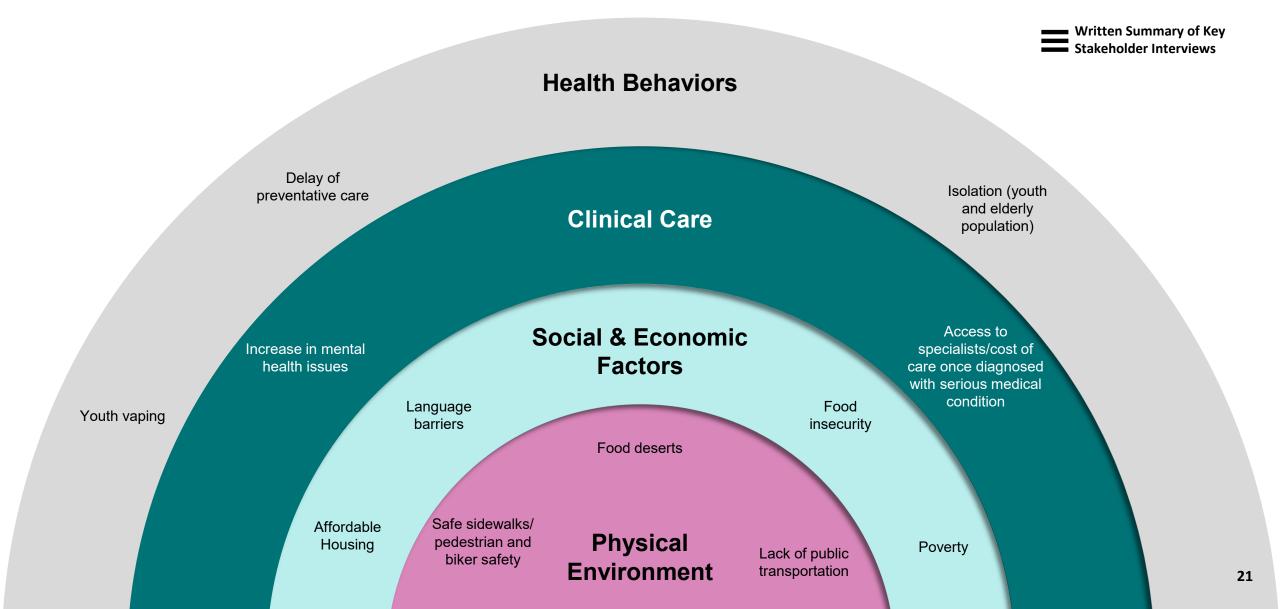
Most Underserved Populations

Populations with the most serious unmet healthcare needs include low-income/uninsured individuals, Black and Hispanic populations, migrant workers and workers in service industries.

Most Important Health and Quality of Life Issues

- Mental health
- Lack of healthy food
- Lack of affordable housing
- Access to medical specialists
- Pedestrian and biker safety

Key Stakeholder Interviews– Factors Impacting Health in the Community



Key Health Indicators

Key Stakeholder Interviews

What should be done to address the most critical issues?

To address mental health needs a trauma informed approach to the delivery of care could be adopted. Organizations throughout the community could become trained in Mental Health First Aid.

To increase access to healthy food, community resources should go out into communities to educate and sign people up for available resources such as SNAP. Individuals need to be trained on how to use certain benefits to provide access to healthy food.

To increase the availability of affordable housing in the community, it was suggested that the strategic plan for the Town of Jupiter should be revisited and overcrowding in some neighborhoods should be addressed.

To address access to specialty services funding may be required to be set aside to assist those who are truly in need of medical treatments, diagnostics and surgeries. Another suggestion was to expand preventative screening services and equipment in free clinics and federally qualified health centers to identify health issues earlier among persons who may not have insurance or access to specialty medical services.

What should Jupiter Medical Center address over the next three to five years?

Key stakeholders were asked to recommend the most important issue that Jupiter should address over the next three to five years.



Access to medical services for those who can't afford it.



Focus on retention and building JMC's workforce/providers.



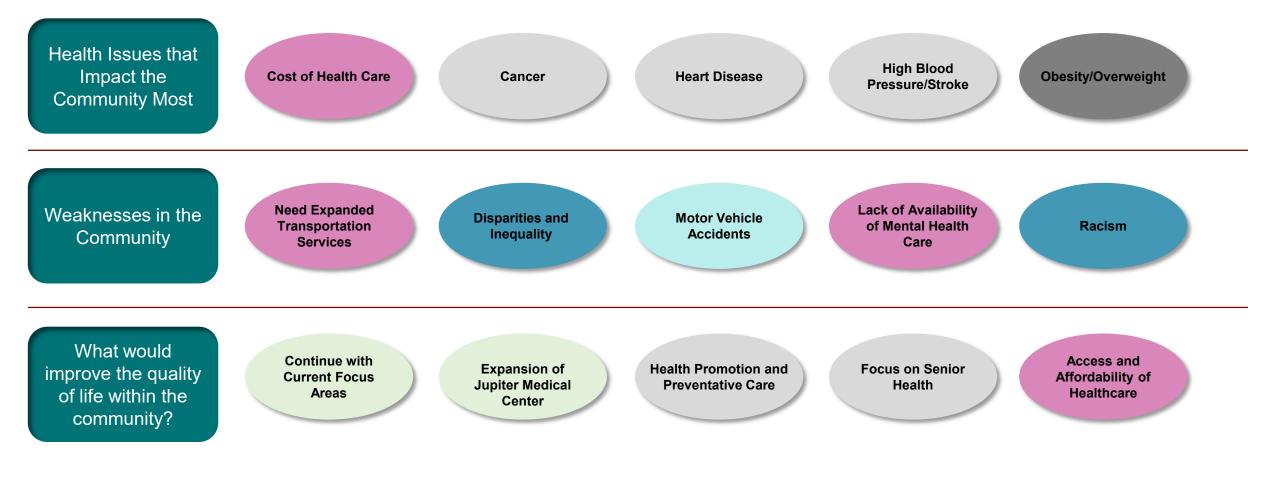
Addressing mental health needs of community members.

About Our Community Key Health Indicators

Community Survey

In order to develop a broad understanding of community health needs, JMC conducted a community survey during January and February of 2022. A link to the survey was distributed via e-mail, social media and word of mouth to the community at-large. A total of 2,111 surveys were completed.

Link to Community Survey Summary

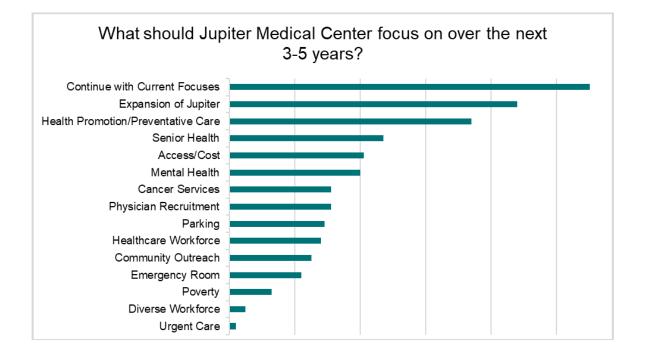


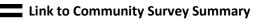
Community Survey

Community Resources and Health Behaviors – Key Findings

- Less than 20% of the respondents eat five fruits and vegetables each day.
- Approximately 25% of respondents, exercise at least 30 minutes a day, five days a week.
- 90% of survey respondents feel they and their family are treated equitably when they visit a healthcare provider.
- The majority of respondents, over 92%, have had a routine physical in the last year.
- Respondents indicated the biggest source of stress in their daily life was financial stability and relationships.
- Respondents indicated the biggest challenges related to the COVID-19 pandemic are complying with social distancing and mask mandates and mental health and social isolation.

What should Jupiter Medical Center focus on over the next 3-5 years?





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.

Access to Pediatric Health Care Services

- Opened a Level 2 NICU in December of 2019.
- Contracted with Nicklaus Children's Hospital to provide physician coverage for the NICU, Pediatric ED and the Inpatient unit.
- Pediatric Mental Health Resources were requested, list developed and provided to pediatric team.
- Pediatric sleep studies for children ages 3 and older were offered until the summer of 2021. The building the sleep center was housed in was taken down in preparation for the Surgical Institute construction project. The sleep center was moved into the hospital, they are currently able to provide sleep studies for those aged 16 and older.
- Lox Farms This program has been managed by Healthier Jupiter through a grant provided by Palm Health Foundation. Report for their pilot year and second year (2019- summer of 2021) indicate 43 pediatric patients/families participated. Survey results showed an increase in consumption of fruits and vegetables and decrease in carbohydrates. Increase in physical and mental wellness and memory. Barriers were cost, time to prepare meals and taste. Data for 2021 -2022 will not be available until July or August.
- Vaping an annual vaping lecture has been given to Jupiter High School students. During the COVID pandemic the lecture was given live via Zoom and recorded to be shown to additional classes. K. Adam Lee, MD, Medical Director of the Thoracic Surgery & Lung Center of Excellence provides these lectures.

Expand Resources for Outpatient Services

- JMC has begun providing ongoing lectures to the City of Stuart employees, Village of North Palm Beach employees and City of Riviera Beach employees. Topics include: stroke awareness, heart health, diabetes prevention and awareness, sleep disorders, nutrition and mindfulness.
- Increase educational outreach and screenings: with COVID essentially halting community outreach for two years we have just begun to offer services again. As of March 2022, JMC is participating in community health fairs and is offering blood pressure and blood glucose screenings. One health fair held in March with 150 participants, one in April with 125 participants.
- JMC has an active partnership with the American Heart/American Stroke Association and utilizes their educational fliers at health fairs and lectures. We recommend them as a resource as well.
- JMC has partnered with Palm Beach County EMS for Hands Only CPR training for the community, two classes were held: January 2019 and January 2020. In discussion to offer this class again in the fall.

Evaluation of the Impact of Actions Taken Since the Last CHNA

Cancer

- Opened the Anderson Family Cancer Center in February 2020 which has physician offices, 31 private infusion bays, a Publix pharmacy, a café, and beauty boutique.
- Varian TrueBeam linear accelerator was added to the radiation oncology department, expanding the radiation treatment options available to cancer patients.
- Hired Dr. Debra Brandt in January 2021 as Medical Director of Oncology who specializes in Breast and Gynecologic Cancers, Head & Neck Cancers and Hematology.
- Hired Dr. Adam Kotkiewicz in October 2021 as a Medical Oncologist who specializes in GU, Lung and Hematology.
- Hired Dr. Boris Naraev in Feb 2022 who specializes in GI cancer and rare Neuroendocrine cancers.
- Multidisciplinary Clinics were suspended during the two years of the COVID pandemic. Plans are underway to resume Lung and Breast MDC's and implement GI and GYN clinics in the coming months.
- Lox Farms This program has been managed by Healthier Jupiter through a grant provided by Palm Health Foundation. Report for their pilot year and second year (2019- summer of 2021) indicate 40 cancer patients/families participated. Survey results showed an increase in consumption of fruits and vegetables and decrease in carbohydrates. Increase in physical and mental wellness and memory. Barriers were cost, time to prepare meals and taste. Data for 2021 -2022 will not be available until July or August.
- Outreach and Supportive Services
 - Transportation we have been unable to increase access to transportation, particularly during the COVID pandemic. JMC suspended its MotorAid service and has
 not resumed it. The American Cancer Society suspended its Road to Recovery program and is testing it in specific markets. The cancer program implemented a gift
 card assistance program, patients can apply and if approved will receive a \$50 gift card (either Publix or a gas card)
 - Financial Resources a list of local and national financial resources specific to cancer has been compiled by the oncology social worker and distributed to the cancer patient navigation team. JMC has a financial counselor to assist patients with JMC resources, qualifying patients for Medicaid and Health Care Tax District.
- CT Lung Screenings:
 - 10/1/19 9/30/20 312 screenings performed, cancer detection rate of 4.50%
 - 10/1/20 9/30/21 445 screenings performed, cancer detection rate of 9.62%
 - o 10/1/21 4/22/22 341 screenings performed, cancer detection rate 5.87%, may increase pending results of two biopsies
- Cancer Wellness Program to assist patients in managing fatigue, exercise/rehabilitation, nutrition collaboration between the Anderson Family Cancer Institute team and Cary Grossman Health & Wellness Center team.
 - The program was scheduled to start on March 9, 2020, one class was held and COVID caused a shutdown of any in-person events/classes.
 - Fall 0f 2020 a virtual version of the Cancer Wellness Program was launched.
 - Virtual program has been ongoing since that time, considering offering in-person in summer of 2022.

Evaluation of the Impact of Actions Taken Since the Last CHNA

Heart Disease

Expansion of Cardiac Services

- Cardiac Surgery Program started in early 2020.
- First open-heart surgery performed in April 2020.
- Cardiovascular Intensive Care Unit opened in April 2020.
- Electrophysiology program expanded to include more complex procedures.
- Structural Heart Program started in June 2021.
- Valve Clinic started November 2021.

Access to Preventive Screenings

- In 2016 JMC started Jupiter Heart Club, monthly educational lectures specific to heart health.
- Lectures were suspended in March of 2020 due to COVID pandemic.
- A small number of virtual lectures were held in 2021.
- In-person lectures resumed in April and May of 2022, will pause during the summer months and resume in October. Heart health lectures will be offered monthly beginning in October.
- Heart Health Screenings were suspended in March of 2020 due to COVID pandemic, discussions are underway regarding how and when to resume these screenings.
- Lox Farms This program has been managed by Healthier Jupiter through a grant provided by Palm Health Foundation. Report for their pilot year and second year (2019-summer of 2021) indicate 5 cardiac patients/families participated. Survey results showed an increase in consumption of fruits and vegetables and decrease in carbohydrates. Increase in physical and mental wellness and memory. Barriers were cost, time to prepare meals and taste. Goal to increase utilization of program by cardiac patients. Data for 2021 -2022 will not be available until July or August.

High Blood Pressure/Neuroscience/Stroke

- Achieved Acute Thrombectomy Certification through Joint Commission in 2021.
- Started a Neuro-intensivist program in the ICU to care for critically ill neuro patients.
- Added VizAi technology to send CT of Brain images directly as soon as scan is completed to stoke team via a mobile app to improve time to treatment.
- Stroke lectures are normally held each year in May during Stroke Awareness Month. Due to the COVID pandemic, lecture was not held in 2020 and virtual lecture was held in 2021. The next lecture will be held on May 3, 2022.
- Stroke awareness educational article is published every year in local newspapers: Palm Beach Post and Florida Weekly.
- Stroke Awareness table is included in all health fairs, information on the warning signs of stroke, BEFAST information, high blood pressure, healthy lifestyle and risk reduction is provided to participants.

Prioritization of Identified Health Needs

Primary and secondary data was gathered and compiled from October 2021 to March 2022. Based on the information gathered through the CHNA process, the following summary list of needs was identified. Identified health needs are listed in alphabetical order.

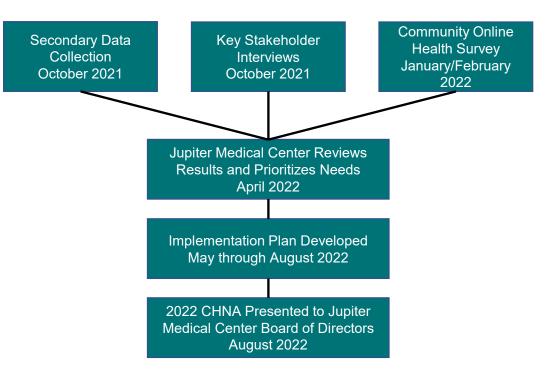
- · Access to Medical Specialists
- Access to Primary Care Providers
- Adult Mental Health
- Asthma in Children
- Chronic Diseases
- Food Insecurity/Low Food Access
- Health Equity/Racism
- Obesity

- Pedestrian/Biker Safety
- Pediatric Mental Health
- Poverty Among Children
- Preventative Care
- Substance Use
- Transportation
- Unintentional Injuries
- Youth Vaping

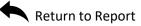
Health needs were prioritized with input from a broad base of members of Jupiter Medical Center's Leadership Team by utilizing a scoring guide.

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

- Access to Services On Our Campus and in Our Region
- Access to Primary Care Providers
- Chronic Diseases Expand Offerings on Chronic Diseases Such as Cancer and Heart Disease



Appendix A



Population by Age & Gender

	Age 0-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+	Total		Male	Female
Jupiter CHNA Community	39,424	13,339	23,958	25,194	31,536	35,438	60,640	229,529	Jupiter CHNA Community	111,169	118,360
Jupiter Primary Service Area	18,896	6,358	9,689	11,615	14,654	15,485	23,616	100,313	Jupiter Primary Service Area	49,503	50,810
Jupiter Secondary Service Area	20,528	6,981	14,269	13,579	16,882	19,953	37,024	129,216	Jupiter Secondary Service Area	61,666	67,550
Jupiter Counties	308,050	121,418	188,950	183,073	211,149	216,734	394,718	1,624,092	Jupiter Counties	788,948	835,144
Martin County, FL	26,275	10,160	14,484	14,563	20,225	24,684	48,674	159,065	Martin County, FL	78,707	80,358
Palm Beach County, FL	281,775	111,258	174,466	168,510	190,924	192,050	346,044	1,465,027	Palm Beach County, FL	710,241	754,786
State / National Benchmark									State / National Benchmark		
Florida	4,182,462	1,753,429	2,716,853	2,525,283	2,742,034	2,776,147	4,205,428	20,901,636	Florida	10,220,813	10,680,823
United States	73,429,392	30,646,327	45,030,415	40,978,831	42,072,620	41,756,414	50,783,796	324,697,795	United States	159,886,919	164,810,876

	Age 0-17	Age 18-24	Age 25-34	Age 35-44	Age 45-54	Age 55-64	Age 65+	Total		Male	Female
Jupiter CHNA Community	17.2%	5.8%	10.4%	11.0%	13.7%	15.4%	26.4%	100.0%	Jupiter CHNA Community	48.4%	51.6%
Jupiter Primary Service Area	18.8%	6.3%	9.7%	11.6%	14.6%	15.4%	23.5%	100.0%	Jupiter Primary Service Area	49.3%	50.7%
Jupiter Secondary Service Area	15.9%	5.4%	11.0%	10.5%	13.1%	15.4%	28.7%	100.0%	Jupiter Secondary Service Area	47.7%	52.3%
Jupiter Counties	19.0%	7.5%	11.6%	11.3%	13.0%	13.3%	24.3%	100.0%	Jupiter Counties	48.6%	51.4%
Martin County, FL	16.5%	6.4%	9.1%	9.2%	12.7%	15.5%	30.6%	100.0%	Martin County, FL	49.5%	50.5%
Palm Beach County, FL	19.2%	7.6%	11.9%	11.5%	13.0%	13.1%	23.6%	100.0%	Palm Beach County, FL	48.5%	51.5%
State / National Benchmark									State / National Benchmark		
Florida	20.0%	8.4%	13.0%	12.1%	13.1%	13.3%	20.1%	100.0%	Florida	48.9%	51.1%
United States	22.6%	9.4%	13.9%	12.6%	13.0%	12.9%	15.6%	100.0%	United States	49.2%	50.8%

Key Health Indicators Co



Population by Ethnicity & Race

	Non-Hispanic/ Latino	Hispanic/ Latino	Total	White	Black	Asian	Other Race	Multiple Races	Total
Jupiter CHNA Community	202,782	26,747	229,529	199,099	14,444	6,451	4,214	5,321	229,529
Jupiter Primary Service Area	87,076	13,237	100,313	90,845	2,407	2,333	2,406	2,322	100,313
Jupiter Secondary Service Area	115,706	13,510	129,216	108,254	12,037	4,118	1,808	2,999	129,216
Jupiter Counties	1,274,485	349,607	1,624,092	1,217,532	282,390	41,649	46,197	36,324	1,624,092
Martin County, FL	137,398	21,667	159,065	140,110	9,006	2,226	5,063	2,660	159,065
Palm Beach County, FL	1,137,087	327,940	1,465,027	1,077,422	273,384	39,423	41,134	33,664	1,465,027
State / National Benchmark									
Florida	15,554,952	5,346,684	20,901,636	15,702,256	3,359,031	571,276	697,052	572,021	20,901,636
United States	266,218,425	58,479,370	324,697,795	235,377,662	41,234,642	17,924,209	19,397,380	10,763,902	324,697,795

	Non-Hispanic/ Latino	Hispanic/ Latino	Total	White	Black	Asian	Other Race	Multiple Races	Total
Jupiter CHNA Community	88.3%	11.7%	100.0%	86.7%	6.3%	2.8%	1.8%	2.3%	100.0%
Jupiter Primary Service Area	86.8%	13.2%	100.0%	90.6%	2.4%	2.3%	2.4%	2.3%	100.0%
Jupiter Secondary Service Area	89.5%	10.5%	100.0%	83.8%	9.3%	3.2%	1.4%	2.3%	100.0%
Jupiter Counties	78.5%	21.5%	100.0%	75.0%	17.4%	2.6%	2.8%	2.2%	100.0%
Martin County, FL	86.4%	13.6%	100.0%	88.1%	5.7%	1.4%	3.2%	1.7%	100.0%
Palm Beach County, FL	77.6%	22.4%	100.0%	73.5%	18.7%	2.7%	2.8%	2.3%	100.0%
State / National Benchmark									
Florida	74.4%	25.6%	100.0%	75.1%	16.1%	2.7%	3.3%	2.7%	100.0%
United States	82.0%	18.0%	100.0%	72.5%	12.7%	5.5%	6.0%	3.3%	100.0%

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Household Income and Poverty

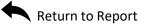
Average Family Income

This indicator reports average family income based on the latest 5-year American Community Survey estimates. A family household is any housing unit in which the householder is living with one or more individuals related to him or her by birth, marriage, or adoption. Family income includes the incomes of all family members age 15 and older.

Children Eligible for Free/Reduced Price Lunch

Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130% (free lunch) of the US federal poverty threshold as part of the federal National School Lunch Program (NSLP).

	Population Below 100% FPL	Percentage of Population Below 100% FPL	Percentage of Population under Age 18 in Poverty	Average Family Income	Percentage of Children Eligible for Free/Reduced Price Lunch
Jupiter CHNA Community	17,695	7.76%	7.90%	\$152,082	48.43%
Jupiter Primary Service Area	7,235	7.26%	8.20%	\$155,355	33.60%
Jupiter Secondary Service Area	10,460	8.16%	7.62%	\$149,502	56.90%
Jupiter Counties					
Martin County, FL	15,367	9.86%	13.63%	\$118,140	42.34%
Palm Beach County, FL	175,742	12.17%	18.05%	\$117,097	58.24%
State / National Benchmark					
Florida	2,870,487	14.02%	20.15%	\$93,531	53.89%
United States	42,510,843	13.42%	18.52%	\$103,863	49.63%



Uninsured Adults

Uninsured Population

This indicator reports the percentage of adults age 18 to 64 without health insurance coverage. This indicator is relevant because lack of insurance is a primary barrier to healthcare access including regular primary care, specialty care, and other health services that contributes to poor health status.

	Total Population (For Whom Insurance Status is Determined)	Uninsured Adults	Uninsured Population, Percent
Jupiter CHNA Community	228,582	20,798	9.1%
Jupiter Primary Service Area	100,017	9,120	9.1%
Jupiter Secondary Service Area	128,565	11,678	9.1%
Jupiter Counties	1,607,902	205,567	12.8%
Martin County, FL	155,929	16,287	10.4%
Palm Beach County, FL	1,451,973	189,280	13.0%
State / National Benchmark			
Florida	20,588,432	2,637,268	12.8%
United States	319,706,872	28,248,613	8.8%

Data Source: US Census Bureau, Small Area Health Insurance Estimates. 2019. Source geography: County

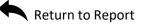
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Population in Limited English Households

Limited English Households

This indicator reports the percentage of the population aged 5 years and older living in Limited English speaking households. A limited English speaking household is one in which no household member 14 years old and over speaks only English at home, or no household member speaks a language other than English at home and speaks English "very well".

	Total Population Age 5+	Population in Limited English Households	Percentage of Population in Limited English Household
Jupiter CHNA Community	219,169	6,747	3.1%
Jupiter Primary Service Area	95,409	2,687	2.8%
Jupiter Secondary Service Area	123,760	4,060	3.3%
Jupiter Counties	1,542,437	106,788	6.9%
Martin County, FL	152,612	4,552	3.0%
Palm Beach County, FL	1,389,825	102,236	7.4%
State / National Benchmark			
Florida	19,773,422	1,261,650	6.4%
United States	304,930,125	12,982,993	4.3%



Educational Attainment

Education

Education metrics can be used to describe variation in population access, proficiency, and attainment throughout the education system, from access to pre-kindergarten through advanced degree attainment. These indicators are important because education is closely tied to health outcomes and economic opportunity.

	F Population Age 25+ with No High School Diploma	Population Age 25+ with No High School Diploma, Percent	Population Age 25+ with Bachelor's Degree or Higher, Percent
Jupiter CHNA Community	10,841	6.1%	45.6%
Jupiter Primary Service Area	4,146	5.5%	47.1%
Jupiter Secondary Service Area	6,695	6.6%	44.5%
Jupiter Counties	134,477	11.3%	36.4%
Martin County, FL	11,083	9.0%	34.1%
Palm Beach County, FL	123,394	11.5%	36.7%
State / National Benchmark			
Florida	1,767,583	11.8%	29.9%
United States	26,472,261	12.0%	32.1%

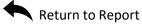
Areas Affected by a Health Professional Shortage Area (HPSA)

Areas Affected by a Health Professional Shortage Area

This indicator reports the percentage of the population that is living in a geographic area designated as a "Health Professional Shortage Area" (HPSA), defined as having a shortage of primary medical care, dental or mental health professionals. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

	Population Living in an Area Affected by a HPSA	Total Population (5 year estimate)	Percentage of Population Living in an Area Affected by a HPSA
Jupiter CHNA Community	5,872	229,661	2.6%
Jupiter Primary Service Area	-	100,178	0.0%
Jupiter Secondary Service Area	5,872	129,483	4.5%
Jupiter Counties	263,057	1,624,092	16.2%
Martin County, FL	18,763	159,065	11.8%
Palm Beach County, FL	244,294	1,465,027	16.7%
State / National Benchmark	79,429,162	345,599,431	23.0%
Florida	5,935,489	20,901,636	28.4%
United States	73,493,673	324,697,795	22.6%

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Health Professional Shortage Areas Database. May 2021. Source geography: HPSA



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Access to Healthcare Services

	Dental Care		Mental Care		Primary Care	
	Providers per 100,000 Population	Dental Health Providers	Providers per 100,000 Population	Mental Health Providers	Providers per 100,000 Population	Primary Care Providers
Jupiter CHNA Community		74		269		308
Jupiter Primary Service Area	35.77	27	66.70	67	103.66	104
Jupiter Secondary Service Area	71.21	47	156.32	202	157.87	204
Jupiter Counties						
Martin County, FL	27.14	43	94.05	149	104.41	183
Palm Beach County, FL	30.36	453	121.30	1,810	115.51	1,588
State / National Benchmark						
Florida	27.80	5,988	101.13	21,782	101.80	21,926
United States	33.09	110,751	124.85	417,923	102.27	342,350

Dental Care Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), 2021. Source geography: Address

Mental Care Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), May 2021. Source geography: County

Primary Care Data Source: Centers for Medicare and Medicaid Services, CMS - National Plan and Provider Enumeration System (NPPES), May 2021. Source geography: County

Dental Care

This indicator reports the number of oral health care providers with a CMS National Provider Identifier (NPI). Providers included in this summary are those who list "dentist", "general practice dentist", or "pediatric dentistry" as their primary practice classification, regardless of sub-specialty. Data are from the latest Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file.

Mental Care

This indicator reports the number of mental health providers in the report area as a rate per 100,000 total area population. Mental health providers include psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care. Data from the 2020 Centers for Medicare and Medicaid Services (CMS) National Provider Identifier (NPI) downloadable file are used in the 2021 County Health Rankings.

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 General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians aged 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues. Key Health Indicators

Return to Report

Preventative Services – Core Preventable Services	
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	Percentage of Males age 65+ Up to Date on Core Preventative Services	Percentage of Females age 65+ Up to Date on Core Preventative Services
Jupiter CHNA Community	36.7%	30.5%
Jupiter Primary Service Area	37.0%	30.8%
Jupiter Secondary Service Area	36.5%	30.2%
Jupiter Counties		
Martin County, FL	31.2%	32.7%
Palm Beach County, FL	32.8%	30.6%
State / National Benchmark		
Florida	30.5%	29.4%
United States	32.4%	28.4%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2018. Source geography: Tract

Male Preventative Services

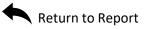
This indicator reports the percentage of males age 65 years and older who report that they are up to date on a core set of clinical preventive services. Services include: an influenza vaccination in the past year; a PPV ever; and either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past 5 years and a FOBT within the past 3 years, or a colonoscopy within the past 10 years.

Female Preventative Services

This indicator reports the percentage of females age 65 years and older who report that they are up to date on a core set of clinical preventive services. Services include: an influenza vaccination in the past year; a pneumococcal vaccination (PPV) ever; either a fecal occult blood test (FOBT) within the past year, a sigmoidoscopy within the past 5 years and a FOBT within the past 3 years, or a colonoscopy within the previous 10 years; and a mammogram in the past 2 years. About Our Community

Key Health Indicators

Preventative Services – Blood Pressure, Diabetes, and Preventable Hospitalizations



	Blood Pressure Medication Nonadherence	Medicare Enrollees with Diabetes with Annual Exam	Preventable Hospitalizations per 100,000 Beneficiaries
Jupiter CHNA Community	23.4%	88.7%	2,644
Jupiter Primary Service Area	23.7%	88.9%	2,643
Jupiter Secondary Service Area	23.3%	88.5%	2,645
Jupiter Counties			
Martin County, FL	20.9%	86.3%	2,660
Palm Beach County, FL	22.4%	89.3%	2,640
State / National Benchmark			
Florida	21.9%	87.1%	3,283
United States	21.8%	87.5%	2,865

Blood Pressure Medication Nonadherence Data Source: Centers for Disease Control and Prevention, CDC - Atlas of Heart Disease and Stroke. 2018. Source geography: County

Diabetes Annual Exam Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2017. Source geography: County

Preventable Hospitalizations Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool. 2020. Source geography: County

Blood Pressure

This indicator reports the number and percentage of Medicare beneficiaries not adhering to blood pressure medication schedules. Nonadherence is defined having medication coverage days at less than 80%.

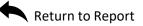
Diabetes Annual Exam

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Preventable Hospitalizations

This indicator reports the preventable hospitalization rate among Medicare beneficiaries for the latest reporting period. Preventable hospitalizations include hospital admissions for one or more of the following conditions: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection. Rates are presented per 100,000 beneficiaries. About Our Community

Key Health Indicators



Preventative Services – Cancer Screenings

	Adults with Adequate Colorectal Cancer Screening	Females Age 21-65 with Recent Pap Smear	Females Age 50-74 with Recent Mammogram
Jupiter CHNA Community	69.4%	87.0%	78.5%
Jupiter Primary Service Area	69.1%	87.6%	78.6%
Jupiter Secondary Service Area	69.7%	86.6%	78.3%
Jupiter Counties			
Martin County, FL	66.4%	84.9%	73.0%
Palm Beach County, FL	64.5%	86.2%	76.2%
State / National Benchmark			
Florida	63.1%	84.3%	74.4%
United States	65.0%	85.5%	77.8%

Colorectal Cancer Screening

This indicator reports the percentage of adults with adequate colorectal cancer screening.

Pap Smear Screening

This indicator reports the percentage of females age 21–65 years who report having had a Papanicolaou (Pap) smear within the previous 3 years.

Mammogram Screening

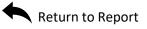
This indicator reports the percentage of females age 50-74 years who report having had a mammogram within the previous 2 years.

Colorectal Cancer Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2018.

Pap Smear Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2018.

Mammogram Screening Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2018.

Health Outcomes and Mortality – Cancer Incidence Rates



Cancer Incidence Rates

These indicators report the age adjusted incidence rate (cases per 100,000 population per year) of individuals with cancer adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older).

	Breast Cancer Incidence Rate (Per 100,000 Population)	Colorectal Cancer Incidence Rate (Per 100,000 Population)	Lung Cancer Incidence Rate (Per 100,000 Population)	Prostate Cancer Incidence Rate (Per 100,000 Population)
Jupiter CHNA Community	123.7	31.1	48.9	94.0
Jupiter Primary Service Area	124.8	30.9	48.5	95.0
Jupiter Secondary Service Area	124.0	31.2	49.1	94.2
Jupiter Counties				
Martin County, FL	120.5	32.8	52.8	90.4
Palm Beach County, FL	124.3	30.8	48.3	94.7
State / National Benchmark				
Florida	120.4	36.2	56.9	95.2
United States	126.8	38.0	57.3	106.2

	Breast Cancer New Cases Annual Average	Colorectal Cancer New Cases Annual Average	Lung Cancer New Cases Annual Average	Prostate Cancer New Cases Annual Average
Jupiter CHNA Community	211	111	195	162
Jupiter Primary Service Area	91	47	82	69
Jupiter Secondary Service Area	121	64	113	94
Jupiter Counties	1,496	785	1,381	1,150
Martin County, FL	161	95	178	137
Palm Beach County, FL	1,335	690	1,203	1,013
State / National Benchmark				
Florida	17,130	10,299	17,343	13,622
United States	249,261	143,200	222,811	200,677

Data Source: State Cancer Profiles. 2014-18. Source geography: County

Return to Report

Health Outcomes and Mortality – Chronic Conditions

	Percentage of Adults with Diagnosed Diabetes	Percentage of Adults Ever Diagnosed with Coronary Heart Disease	Percentage of Adults with High Blood Pressure
Jupiter CHNA Community	7.9%	6.9%	32.5%
Jupiter Primary Service Area	7.9%	6.3%	30.7%
Jupiter Secondary Service Area	7.8%	7.4%	33.9%
Jupiter Counties			
Martin County, FL	7.1%	8.7%	35.7%
Palm Beach County, FL	8.0%	7.4%	34.0%
State / National Benchmark			
Florida	9.0%	7.1%	34.1%
United States	9.0%	6.2%	32.6%

Diabetes Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2019. Source geography: County

Coronary Heart Disease and High Blood Pressure Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2019

Diabetes

This indicator reports the number and percentage of adults age 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Coronary Heart Disease

This indicator reports the percentage of adults age 18 and older who report ever having been told by a doctor, nurse, or other health professional that they had angina or coronary heart disease.

High Blood Pressure

This indicator reports the percentage of adults age 18 who report ever having been told by a doctor, nurse, or other health professional that they have high blood pressure. Women who were told high blood pressure only during pregnancy and those who were told they had borderline hypertension were not included.

Health Outcomes and Mortality – Mortality

Cancer Deaths

This indicator reports the 2016-2020 five-year average rate of death due to malignant neoplasm (cancer) per 100,000 population.

Heart Disease Deaths

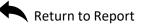
This indicator reports the 2016-2020 five-year average rate of death due to heart disease (ICD10 Codes I00-I09, I11, I13, I20-I151) per 100,000 population.

Lung Disease Deaths

This indicator reports the 2016-2020 five-year average rate of death due to chronic lower respiratory disease per 100,000 population.

		Heart Disease Death Rate		
		(Per 100,000 Population)		
Jupiter CHNA Community	124.2	. 124.5	24.8	36.1
Jupiter Primary Service Area	123.6	i 125.3	24.0	36.1
Jupiter Secondary Service Area	124.6	6 123.9	25.4	36.0
Jupiter Counties				
Martin County, FL	129.7	, 116.6	32.2	35.9
Palm Beach County, FL	123.6	5 125.3	24.0	36.1
State / National Benchmark				
Florida	141.8	3 143.6	36.4	40.0
United States	149.4	164.8	39.1	37.6

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2016-2020. Source geography: County



Return to Report

Injury and Violence – Unintentional Injuries

Death due to Unintentional Injury (Accident)

This indicator reports the 2016-2020 five-year average rate of death due to unintentional injury (accident) per 100,000 population.

	Unintentional Injury Death Rate (Per 100,000 Population)	Unintentional Injury Five Year Total Deaths, 2016-2020 Total
Jupiter CHNA Community	64.3	815.0
Jupiter Primary Service Area	64.5	354.0
Jupiter Secondary Service Area	64.2	461.0
Jupiter Counties		
Martin County, FL	63.0	555.0
Palm Beach County, FL	64.5	5,214.0
State / National Benchmark		
Florida	57.5	67,773.0
United States	50.4	872,432.0

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2016-2020. Source geography: County

Injury and Violence – Violent Crime and Property Crime

Violent Crime

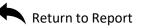
Violent crime includes homicide, rape, robbery, and aggravated assault.

Property Crime

This indicator reports the rate of property crime offenses reported by law enforcement per 100,000 residents. Property crimes include burglary, larceny-theft, motor vehicle theft, and arson. This indicator is relevant because it assesses community safety.

	Violent Crimes, Annual Rate (Per 100,000 Pop.)	Violent Crimes, 3-year Total	Property Crimes, Annual Rate (Per 100,000 Pop.)	Property Crimes, Annual Average
Jupiter Counties				
Martin County, FL	245.3	1,167	1,646.2	2,570.0
Palm Beach County, FL	446.3	19,383	2,924.1	41,549.0
State / National Benchmark				
Florida	433.9	270,212	2,801.0	567,275.0
United States	416.0	4,579,031	2,466.1	7,915,583.0

Data Source: Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research. 2014; 2016. Source geography: County



Key Health Indicators

Return to Report

Maternal, Infant, and Child Care – Infant Deaths, Low Weight Births, Birth Care

	Number of Infant Deaths	Infant Deaths per 1,000 Live Births	Number of Low L Birthweight Births	ow Birthweight. Births, Percentage	Number of Births with Late/No Care	Births with Late/No Care, Percentage
Jupiter Counties						
Martin County, FL	52	6.00	603	6.9%	295	7.9%
Palm Beach County, FL	481	4.70	8,776	8.5%	295	7.9%
State / National Benchmark						
Florida	18,737	6.10	268,814	8.7%	49,447	7.4%
United States	301,832	5.80	4,440,508	8.2%	697,581	6.1%

Infant Deaths and Low Birthweight Births Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2013-2019. Source geography: County

Births with Late/No Care Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. Centers for Disease Control and Prevention, Wide-Ranging Online Data for Epidemiologic Research. 2019. Source geography: County

Infant Deaths

This indicator reports information about infant mortality, which is defined as the number of all infant deaths (within 1 year) per 1,000 live births.

Low Birthweight Births

This indicator reports the percentage of live births where the infant weighed less than 2,500 grams (approximately 5 lbs., 8 oz.). These data are reported for a 7-year aggregated time period.

Births with Late/No Care

This indicator reports the percentage of women who did not obtain prenatal care until the 7th month (or later) of pregnancy or who didn't have any prenatal care, as of all who gave birth during the three-year period from 2017 to 2019. This indicator is relevant because engaging in prenatal care decreases the likelihood of maternal and infant health risks. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Return to Report

Mental Health – Adult Mental Health

	Adults with Poor Mental Health (Percentage)	Suicide Rate (Per 100,000 Population)	Suicide Five Year Total, 2016-2020
Jupiter CHNA Community	12.7%	15.2	177
Jupiter Primary Service Area	12.7%	14.7	74
Jupiter Secondary Service Area	12.7%	15.6	103
Jupiter Counties			
Martin County, FL	12.8%	20.2	162
Palm Beach County, FL	13.2%	14.7	1,091
State / National Benchmark			
Florida	14.6%	15.6	16,537
United States	13.6%	14.3	233,972

Poor Mental Health

This indicator reports the percentage of adults age 18 and older who report 14 or more days during the past 30 days during which their mental health was not good.

Suicides

This indicator reports the 2016-2020 five-year average rate of death due to intentional self-harm (suicide) per 100,000 population.

Poor Mental Health Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2019. Source geography: Tract

Suicide Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2016-2020. Source geography: County

Return to Report

Nutrition, Physical Inactivity Obesity – Food Environment

Food Deserts

This indicator reports the number of neighborhoods in the report area that are within food deserts. The USDA Food Access Research Atlas defines a food desert as any neighborhood that lacks healthy food sources due to income level, distance to supermarkets, or vehicle access.

Low Food Access

This indicator reports the percentage of the population with low food access. Low food access is defined as living more than ½ mile from the nearest supermarket, supercenter, or large grocery store.

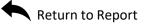
SNAP Authorized Retailers

This indicator reports the number of SNAP-authorized food stores as a rate per 10,000 population. SNAP-authorized stores include grocery stores as well as supercenters, specialty food stores, and convenience stores that are authorized to accept SNAP (Supplemental Nutrition Assistance Program) benefits.

	Total Population (2010)	Food Desert Population	Food Desert Population, Percent	Population with Low Food Access	Population with Low Food Access, Percent	Total SNAP- Authorized Retailers	SNAP- Authorized Retailers per 10,000 Population
Jupiter CHNA Community	207,153	117,248	56.6%	70,354	34.0%	107	4.44
Jupiter Primary Service Area	89,623	60,855	67.9%	34,048	38.0%	36	3.41
Jupiter Secondary Service Area	117,530	56,393	48.0%	36,307	30.9%	71	5.24
Jupiter Counties	1,466,452	77,742	5.3%	300,932	20.5%	919	5.50
Martin County, FL	146,318	21,293	14.6%	55,488	37.9%	123	7.59
Palm Beach County, FL	1,320,134	56,449	4.3%	245,444	18.6%	796	5.28
State / National Benchmark							
Florida	18,801,310	2,546,335	13.5%	4,712,762	25.1%	15,113	6.95
United States	308,745,538	39,074,974	12.7%	68,611,398	22.2%	248,526	7.47

Food Desert and Low Food Access Data Source: US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas. 2019. Source geography: Tract

SNAP Authorized Retailers Data Source: US Department of Agriculture, Food and Nutrition Service, USDA - SNAP Retailer Locator. Additional data analysis by CARES. 2021. Source geography: Tract



Nutrition, Physical Inactivity Obesity – Obesity and Physical Activity

	Population Age 20+	Adults with BMI > 30.0	Adults with BMI > 30.0, Percent	Adults with No Leisure Time Physical ∣ Activity	Adults with No Leisure Time Physical Activity, Percent
Jupiter CHNA Community	190,790	42,670	22.36%	44,149	23.14%
Jupiter Primary Service Area	81,131	18,377	22.65%	18,782	23.15%
Jupiter Secondary Service Area	109,659	24,293	22.15%	25,353	23.12%
Jupiter Counties	1,313,859	295,712	22.51%	304,191	23.17%
Martin County, FL	132,155	23,920	18.10%	31,439	23.80%
Palm Beach County, FL	1,181,704	271,792	23.00%	272,752	23.10%
State / National Benchmark					
Florida	16,765,140	4,628,741	27.61%	4,116,180	24.56%
United States	243,082,729	67,624,774	27.82%	54,200,862	22.60%

Obesity Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2019. Source geography: County

Physical Activity Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2019. Source geography: County

Obesity

This indicator reports the number and percentage of adults aged 20 and older self-report having a Body Mass Index (BMI) greater than 30.0 (obese). Body mass index (weight [kg]/height [m]2) was derived from self-report of height and weight. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

Physical Activity

This indicator is based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?" This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Physical Environment – Cost Burdened Households

Return to Report

Cost Burdened Households

This indicator reports the percentage of the households where housing costs are 30% or more of the total household income. This indicator provides information on the cost of monthly housing expenses for owners and renters. The information offers a measure of housing affordability and excessive shelter costs. The data also serves to aid in the development of housing programs to meet the needs of people at different economic levels. The following zip codes have the highest percentage of households with severe cost burden of housing.

	Total Households	Cost Burdened Households (30%)	Percentage of Cost Burdened Households
Jupiter CHNA Community	94,137	30,509	32.4%
Jupiter Primary Service Area	39,852	13,247	33.2%
Jupiter Secondary Service Area	54,285	17,262	31.8%
Jupiter Counties	618,623	229,711	37.1%
Martin County, FL	64,528	19,796	30.7%
Palm Beach County, FL	554,095	209,915	37.9%
State / National Benchmark			
Florida	7,736,311	2,690,637	34.8%
United States	120,756,048	37,249,895	30.8%

Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract

Key Health Indicators

Return to Report

Physical Environment – Housing

	No or Slow Internet,	ubstandard Housing itions, Percent
Jupiter CHNA Community	9.8%	31.9%
Jupiter Primary Service Area	10.1%	32.0%
Jupiter Secondary Service Area	9.7%	31.8%
Jupiter Counties	15.0%	37.7%
Martin County, FL	14.4%	30.7%
Palm Beach County, FL	15.0%	38.5%
State / National Benchmark		
Florida	17.0%	35.4%
United States	17.3%	31.9%

Internet Access Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract

Substandard Housing Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract

Internet Access

This indicator reports the percentage of households who either use dial-up as their only way of internet connection or have internet access but don't pay for the service, or have no internet access in their home, based on the 2014-2019 American Community Survey estimates.

Substandard Housing

This indicator reports the 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 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.

Return to Report

Physical Environment – Environment and Housing

	P Percent Population within 1/2 Mile of a Park	ercent Population Using Public Transit for Commute to Work
Jupiter CHNA Community	38.00%	0.56%
Jupiter Primary Service Area	46.00%	0.23%
Jupiter Secondary Service Area	31.00%	0.82%
Jupiter Counties		
Martin County, FL	41.00%	0.22%
Palm Beach County, FL	30.00%	1.63%
State / National Benchmark		
Florida	39.00%	1.82%
United States	46.00%	5.00%

Living Near a Park Data Source: Centers for Disease Control and Prevention, CDC - National Environmental Public Health Tracking Network. 2015. Source geography: Tract

Public Transit Data Source: US Census Bureau, American Community Survey. 2015-19. Source geography: Tract

Living Near a Park

This indicator reports the percentage of population living within 1/2 mile of a park. This indicator is relevant because access to outdoor recreation encourages physical activity and other healthy behaviors.

Public Transit

This indicator reports the percentage of population using public transportation as their primary means of commuting to work. Public transportation includes buses or trolley buses, streetcars or trolley cars, subway or elevated rails, and ferryboats.



Substance Abuse – Adult Alcohol and Tobacco Use

	Percentage of Adults Binge Drinking in the Past 30 Days	Percentage of Adult Current Smokers
Jupiter CHNA Community	18.1%	13.8%
Jupiter Primary Service Area	19.2%	13.6%
Jupiter Secondary Service Area	17.3%	13.9%
Jupiter Counties		
Martin County, FL	16.4%	15.2%
Palm Beach County, FL	16.7%	14.0%
State / National Benchmark		
Florida	16.9%	16.4%
United States	16.7%	15.3%

Alcohol Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2019. Source geography: Tract

Tobacco Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the 500 Cities Data Portal. 2019. Source geography: Tract



Adult Alcohol Use

This indicator reports the percentage of adults age 18 and older who report having five or more drinks (men) or four or more drinks (women) on an occasion in the past 30 days.

Adult Tobacco Use

This indicator reports the percentage of adults age 18 and older who report having smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days.

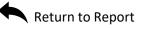
Substance Abuse – Opioid Overdose

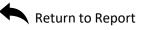
Opioid Overdose

This indicator reports the 2016-2020 five-year average rate of death due to opioid drug overdose per 100,000 population. Rates are resummarized for report areas from county level data, only where data is available. This indicator is relevant because opioid drug overdose is the leading cause of injury deaths in the United States, and they have increased dramatically in recent years.

	Five Year Total Deaths, 2016-2020 Total	Age-Adjusted Death Rate (Per 100,000 Population)
Jupiter Counties		
Martin County, FL	118	18.7
Palm Beach County, FL	1,913	18.7
State / National Benchmark		
Florida	18,505	18.5
United States	256,428	16.0

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2016-2020. Source geography: County





Appendix B – Key Stakeholder Interview Summary

The questions on the interview instrument are grouped into four major categories for discussion. The interview questions for each key stakeholder were identical. 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. They were also asked to provide their opinion regarding 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.

Most of the key stakeholders rated the health and quality of life in the community as very good noting that Greater Jupiter is one of the healthiest areas of the country. Positive factors included many resources to help persons access healthcare such as My Clinic, El sol and Seal Bromback Clinic, many individuals who are generous and give back to the community, and expansion of available health services which are available in Jupiter, specifically pediatric and cancer services. However, stakeholders described somewhat of a "split community" – meaning that the middle- and upper-class can have a good life, whereas the working poor and generational poor experience accelerated health issues. The "split community" concept was also referred to as "the haves and the have-nots." Furthermore, it was noted that last year COVID prevented circumstances from getting better because it became the priority.

When asked whether the health and quality of life had improved, declined or stayed the same, most of the stakeholders responded that they felt the health and quality of life had improved over the last three years. Positive factors included better access for individuals with lower incomes and efforts of Healthier Jupiter where the community is working on identified health priorities together. In addition, many community organizations are working to improve health for specific populations such as low-income, senior, and immigrant populations.

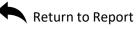
Factors mentioned by stakeholders that had a negative impact on the health and quality of life in the community included increasing mental health issues and social isolation which have been exacerbated by COVID-19, the lack of affordable housing, and safety issues for persons who walk or ride bikes. Another issue that was highlighted was the increasing cost of healthy food.

Stakeholders believed that, while the community is generally interested in wellness and many individuals take ownership in personal wellness and healthy living, the community could do better. While the message about personal wellness and healthy living is communicated throughout the community, many people don't see the urgency around preventative care.

"A lot of people are on the fringe. They live paycheck to paycheck. Meal to meal."

"The increase in population makes it difficult to access things."

"My clinic has shifted to addressing the social determinants of health- food, transportation, housing. Their nutrition program is wonderful."



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. Stakeholders were also asked to provide their opinions as to why they thought the populations were underserved or in need. Each stakeholder was asked to consider the specific populations they serve or those with which they usually work.

Low-income/uninsured individuals were identified as an underserved population. There are various sub-populations of low-income individuals that were mentioned by the stakeholders. First, the low-income population generally has unmet healthcare needs because of the high costs of healthcare and the knowledge needed to access services. Suggestions made to assist this population providing education about health. Second, low- or fixed-income seniors often face high medical bills and high prescription medicine costs as well. Suggestions made to assist this population include making sure that bills are explained upfront, advertising financial assistance policies, and potentially sending a nurse along with Meals on Wheels deliveries to identify issues.

<u>Black and Hispanic populations/Migrant workers</u> were identified as an underserved population. There are many different cultures within these populations and many individuals do not speak English. For many of these individuals there is little to no opportunity for them to access health services until their medical condition becomes an emergency. In addition, non-U.S. citizens are afraid to get care if they are undocumented.

Workers in the service industry was identified as an underserved population. Not only does this population need access to healthcare providers, but also transportation to healthcare services, time off work to get to appointments. Service providers generally don't have health insurance.

"People in the service industry don't have health insurance."

"People are afraid of getting care if they are undocumented. There is not an opportunity for them to access services."

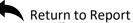
"Education needs to be done to alleviate fear for immigrants."

3. Barriers

The key stakeholders were asked what barriers or problems keep community residents from obtaining necessary health services and improving health in their community. The responses addressed a wide array of issues.

Language barriers are present within the immigrant population and it can be challenging to effectively communicate with them regarding available health and community resources. In addition, efforts to promote health literacy can be ineffective with the immigrant population unless efforts are made to remove language barriers and ensure information is being provided in a culturally appropriate manner.

🔀 Jupiter Medical Center



Appendices

The lack of available public transportation options was also noted as a barrier. Stakeholders shared that sidewalks do not connect neighborhoods throughout the community and the increase in traffic in the community makes sidewalks and intersections unsafe in some areas. It was noted that senior town halls indicated that transportation was the number one issue for seniors.

A new barrier that was identified by stakeholders is the political divide and shift in our country. The pandemic has highlighted the political divide and there is an increasing lack of trust in the medical community.

Many stakeholders conveyed the community had a great deal of resources to provide preventative and primary care services for low-income and uninsured individuals. However, they also noted that once a person is diagnosed with a medical condition, it is extremely challenging to access medical services (diagnostics, surgery, treatment) to treat the patient. Free clinics and health centers try to keep people out of the hospitals by providing basic primary and preventative care, but additional access to specialty services is needed.

Concern was communicated regarding the lack of affordable housing and the inability for service workers and low-income individuals to afford to live in the community.

Poverty was frequently mentioned by stakeholders as a barrier to improving health in the community. Stakeholders pointed to a lack of living wage jobs, the current attitude toward working (people do not want to work), an increased cost of living, and a lack of available affordable housing. Also, people have difficulty accessing Medicaid or obtaining other insurance.

"Our public transportation is nonexistent. We don't have a regular bus system."

"Cost is bigger barrier for healthy food and healthcare."

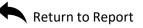
"The community needs affordable housing."

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 issues identified most frequently were:

- Mental health
- Food insecurity
- Housing
- Access to specialty services
- Pedestrian and biker safety

The key stakeholders were also asked to provide suggestions on what should be done to address the most critical issues. Responses included:



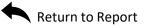
- To address mental health needs a trauma informed approach to the delivery of care could be adopted. Organizations throughout the community could become trained in Mental Health First Aid.
- To increase access to healthy food, community resources should go out into communities to educate and sign people up for available resources such as SNAP. Individuals need to be trained on how to use certain benefits to provide access to healthy food.
- To increase the availability of affordable housing in the community, it was suggested that the strategic plan for the Town of Jupiter should be revisited and overcrowding in some neighborhoods should be addressed.
- To address access to specialty services funding may be required to be set aside to assist those who are truly in need of medical treatments, diagnostics and surgeries. Another suggestion was to expand preventative screening services and equipment in free clinics and federally qualified health centers to identify health issues earlier among persons who may not have insurance or access to specialty medical services.
- To address pedestrian and biker safety, neighborhoods could come together, along with the Town of Jupiter, to join sidewalks and crosswalks together. Health Jupiter could lead this charge. Another suggestion was to expand current trails to have safe exercise options for the community.

"Mental health is a huge thing for many individuals."

"Access to specialty services is critical."

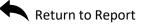
"Jupiter Medical Center has come a long way in Ortho, Cardiac and Oncology."

Key Findings



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

- The most critical health and quality of life issues facing the community were identified as:
 - Mental health
 - Food insecurity
 - Housing
 - Access to specialty services
 - Pedestrian and biker safety
- The overall health and quality of life in the community was rated very good, but stakeholders described somewhat of a "split community" meaning that the middle- and upper-class can have a good life, whereas the working poor and generational poor experience accelerated health issues.
- Stakeholders believed that the health and quality of life in the community had *improved* over the last three years. Populations with the most serious unmet healthcare needs include low-income/uninsured individuals, Black and Hispanic populations, migrant workers and workers in service industries.
- The barriers or problems that keep community residents from obtaining necessary health services and improving health in their community include challenges with access to services related to language and transportation issues, lack of access to medical specialists and treatment once a person is diagnosed, lack of affordable housing and healthy food and the increasing lack of trust in the medical community.
- The most prevalent suggestion made by stakeholders for Jupiter Medical Center to address over the next three to five years was to focus on retention and building JMC's workforce, treatment options for those who can't afford it, mental health, increased outreach and transportation options for seniors and work with others to build a walkable community.



In order to develop a broad understanding of community health needs, JMC conducted a community survey during January and February of 2022. A link to the survey was distributed via e-mail, social media and word of mouth to the community at-large. A total of 2,111 surveys were completed.

The majority of respondents were White/Caucasian (93%), 1% of the respondents identified as Black or African American and 2% identified as Hispanic or Latino. The remaining 5% identified with other racial or ethnic identities or chose not to answer.

Respondents by age group were as follows:

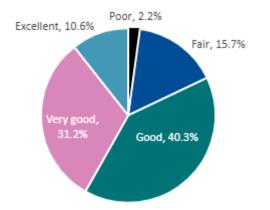
<u>Age Group</u>	Percent of Total Respondents
18-35	1%
36-45	1%
46-55	4%
56-65	15%
Over 65	79%

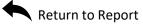
Females represented 63% of the respondents while males represented 36%. The remaining 1% of respondents identified as other genders or chose not to answer.

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 for the community. Additionally, fewer older adults, under 56 years old, completed the survey compared to the demographics for the CHNA Community.

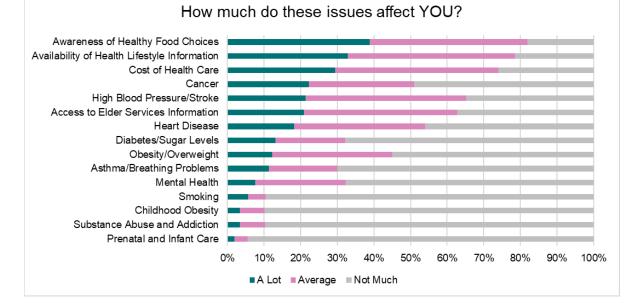
Survey respondents were asked to rate the current status of their health. The majority of the respondents indicated the status of their health was good.

How would you rate the current status of your health?

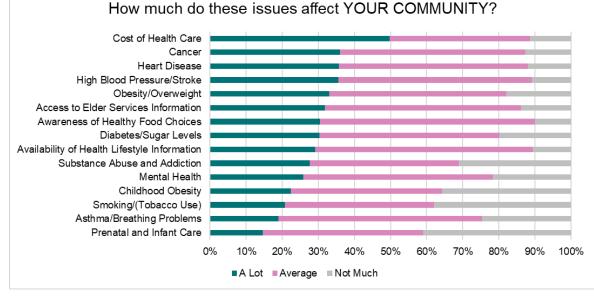




When asked "How much do these health issues affect YOU?" awareness of healthy food choices, availability of health lifestyle information, cost of health care and cancer were the issues that affected respondents most. The chart below summarizes all of the responses to this question.



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

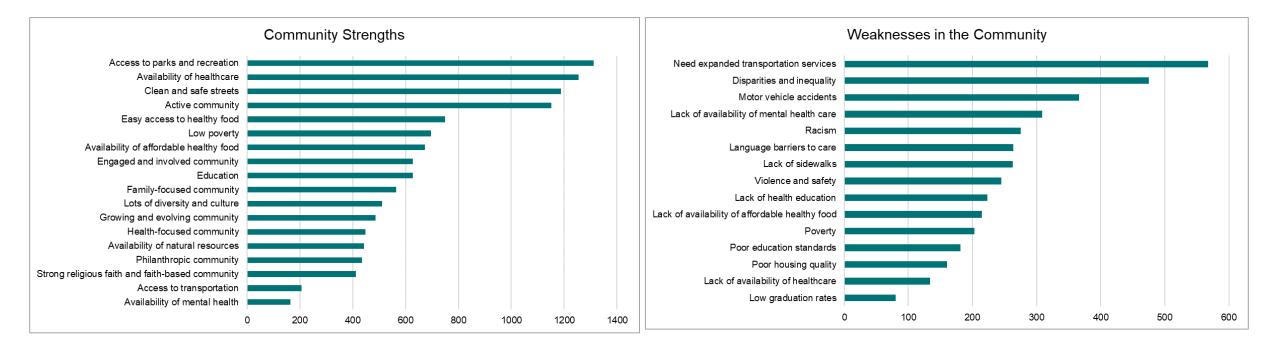


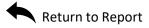
Return to Report

The survey asked the following two questions:

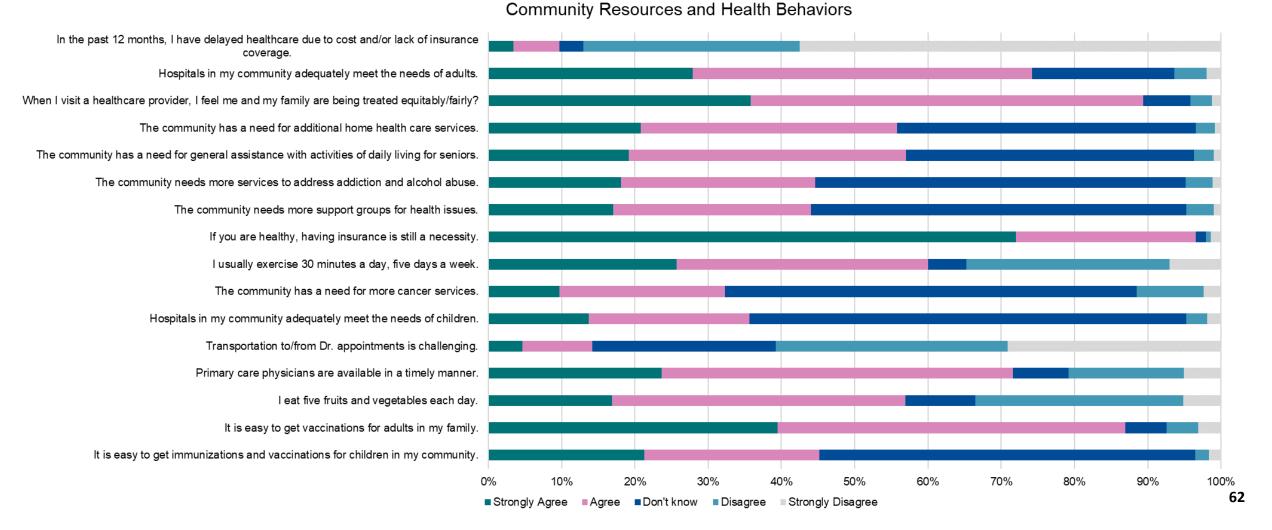
- What do you believe are the current STRENGTHS of your community?
- What do you believe are the WEAKNESSES in your community?

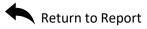
The survey provided predetermined responses that could be selected from the list. Respondents were instructed to mark up to five selections. Below is a summary of strengths and weaknesses identified.





Below is summary of the survey results regarding specific statements regarding community resources and health behaviors. Key findings are summarized on the following page.





Community Resources and Health Behaviors – Key Findings

- Less than ${\bf 20\%}$ of the respondents eat five fruits and vegetables each day.
- Approximately 25% of survey respondents exercise 30 minutes a day, five days a week.
- Less than **5%** of the survey respondents indicated transportation to and from doctor appointments is challenging.
- **90%** of survey respondents feel they and their family are treated equitably when they visit a healthcare provider.

Additional survey results:

- Almost 88% of the survey respondents indicated they are always able to visit a doctor when needed. When asked for about the reasons why they are unable to visit a doctor when needed, respondents indicated that some doctors are not taking new patients, it was too expensive to visit the doctor or they lacked transportation as primary reasons why they could not visit the doctor when needed.
- The majority of respondents, over 92%, have had a routine physical in the last year.
- 99% of the respondents indicated they had medical/health insurance. Over 77% of the respondents indicated they had Medicare.
- Respondents indicated the biggest source of stress in their daily life was financial stability and relationships.
- The biggest challenges related to the COVID-19 pandemic are complying with social distancing and mask mandates and mental health and social isolation.

Appendix D – 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.

Hospitals:

- Jupiter Medical Center
- Palm Beach Garden Medical Center
- JFK Medical Center
- Sandy Pines Hospital
- Cleveland Clinic Martin Health

Health Centers and Clinics:

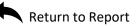
- MyClinic
- El Sol Neighborhood Resource Center
- C.L Brumback Primary Care Clinic

Health Departments

- Florida Department of Health-Palm Beach County
- Health Care District of Palm Beach County

Other:

- Primary Care Physicians
- 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
- Cardiologists
- American Heart Association
- Neurologists
- Pulmonologists
- American Lung Association
- · Diabetes Coalition of Palm Beach County
- Juvenile Diabetes Research Foundation
- Area fitness facilities
- State and local parks
- Town of Jupiter
- Mental Health Providers
- · Mental Health Association of Palm Beach County
- Substance Abuse Treatment Facilities



Limitations and Information Gaps

As with all data collection efforts, there are several limitations related to the assessment's research methods that should be acknowledged. Years of the most current data available differ by data source. In some instances, 2021 may be the most current year available for data, while 2014 may be the most current year for other sources. Likewise, survey data based on self-reports, such as the Behavioral Risk Factor Surveillance Survey (BRFSS), should be interpreted with particular caution. In some instances, respondents may over or under report behaviors and illnesses based on fear of social stigma or misunderstanding the question being asked.

In addition, respondents may be prone to recall bias – that is, they may attempt to answer accurately, but they remember incorrectly. In some surveys, reporting and recall bias may differ according to a risk factor or health outcome of interest. Despite these limitations, most of the self-report surveys analyzed in this CHNA benefit from large sample sizes and repeated administrations, enabling comparison over time. Similarly, while the qualitative data collected for this study provide valuable insights, results are not statistically representative of a larger population due to nonrandom recruiting techniques and a small sample size. Data was collected at one point in time and among a limited number of individuals.

Therefore, findings, while directional and descriptive, should not be interpreted as definitive.