Marion General Hospital

CHNA Report

CHNA Report and Implementation Plan

Approved September 23, 2025



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Executive Summary

The purpose of this Community Health Needs Assessment (CHNA) report is to provide Marion General Hospital ("MGH") with a functional tool to guide its efforts in improving the health of the community it serves. Additionally, this report meets the requirements set by the Internal Revenue Service.

The findings of the CHNA will shape the development of Marion General Hospital's community health improvement initiatives and implementation strategies. This report is also intended as a resource for many of the Hospital's collaborative partners in the community.

The assessment was conducted by the Community Health Needs Assessment Steering Committee, with support from HORNE, between March and May 2025. Input was gathered from former patients, hospital employees, and community representatives. Broader community input was encouraged through a publicly accessible survey, word-of-mouth outreach, and information from public databases and published state and national reports.

The response section to this report highlights how the Hospital and its partners have addressed community health needs over the past three years. It also outlines the health priorities that will guide efforts over the next three years. The CHNA report is available online at https://www.forresthealth.org/our-locations/marion-general-hospital/ or as a printed copy from the Hospital's administrative office.

As part of our commitment to reducing the burden of breast cancer in Marion County, Marion General Hospital has expanded its women's health services. We now offer enhanced breast cancer prevention initiatives and have implemented advanced 3-D mammography technology to improve early detection rates. These services aim to increase access to screenings, particularly for underserved populations, and ensure timely follow-up care. Educational outreach programs will also promote awareness and the importance of regular screenings, empowering women to take proactive steps toward their health.

We are proud to continue serving this community and remain dedicated to improving the overall health and well-being of all residents in Marion County. We thank you for your continued support and partnership.

Tomaz McCarty, MPH
Administrator
Marion General Hospital

About the Hospital

Marion General Hospital

Marion General Hospital proudly serves the residents of Marion County and the city of Columbia with a comprehensive range of healthcare services. Our facility features a 10-bed Level IV Trauma-designated Emergency Department, a 6-bed Intensive Care Unit (ICU) for critical care patients, a 49-bed inpatient and transitional (swing-bed) unit, and a full array of outpatient ancillary services.

Additionally, we operate a Rural Health Clinic to ensure accessible care for our local community. Our committed team comprises approximately 130 dedicated employees, and our expert Medical Staff strives to deliver exceptional, patient-centered care to everyone who comes through our doors. We are excited to offer an advanced tele-stroke program through our partnership with Servaro, enabling our providers to consult with neurologists in real-time for timely and accurate stroke care. This is just one example of how we leverage innovation to enhance patient outcomes.

Our Outpatient Services continue to expand, making it easier for patients to receive top tier care close to home. Our Radiology Department now offers mammography and is equipped with state-of-the-art technologies, including CT (Computed Tomography), MRI (Magnetic Resonance Imaging), digital X-ray, echocardiography, nuclear stress testing, and head and neck CTA (Computed Tomography Angiography). Bone densitometry (DEXA) scans have also been added to assess bone health better. Our Respiratory Department offers comprehensive diagnostic services, including Pulmonary Function Testing (PFT), Electroencephalograms (EEG), and Electrocardiograms (EKG). Additionally, our nursing staff is trained to administer medication infusions and blood product transfusions. In collaboration with MidSouth Rehab Services, Inc., we provide expert physical, occupational, and speech therapy services designed to support recovery and improve quality of life. We take great pride in our transitional care (swing-bed) program, which is a cornerstone of our inpatient services. With therapy provided seven days a week, our goal is to help patients regain independence quickly and return home as soon as possible. Our entire team, from nursing to dietary, works collaboratively to support every patient's journey back to wellness.



Our Rural Health Clinic providers are known not only for their clinical excellence but also for their genuine commitment to the well-being of their patients. We also provide financial assistance through our services to ensure that no one goes without the care they need. Marion General Hospital is honored to participate in the Centers for Medicare & Medicaid Services (CMS) Rural Community Hospital Demonstration Project, an initiative exploring alternative reimbursement models for rural hospitals that are too large to qualify as Critical Access Hospitals.

The Community Health Needs Assessment

We are proud to be one of only 30 hospitals in the nation selected for this critical program. At Marion General Hospital, we believe we are more than just a healthcare provider; we are a vital partner in building a healthier, stronger community.

The Community Health Needs Assessment identifies opportunities for healthcare improvement, fosters a collaborative community environment that engages multiple change agents, and is an open and transparent process that listens to and truly understands the health needs of Marion County. It also provides an opportunity for the Hospital to identify valuable collaborative partners as we try to serve the community better and improve the health of our citizens.

The federal government now requires nonprofit hospitals to conduct a community health assessment. These collaborative studies enable healthcare providers to build stronger relationships with their communities, identify local needs, and allocate funding and other resources to programs that directly benefit residents.

Community Engagement and Transparency

We are pleased to share the results of our Community Health Needs Assessment with our community. The following pages provide a review of the strategic activities we undertook over the last three years in response to specific health needs identified in our community.

The report also highlights the updated key findings of the assessment. We hope you will take time to review the health needs of our community, as the findings impact each and every citizen of our rural Mississippi community. Also, review our activities that were in response to the needs identified in 2022. Later in this Community Health Needs Assessment, we highlight the success achieved with our 2022 Strategic Initiatives in the Strategic Action Responses section.

The Community Health Needs Assessment, Continued

Data Collection

Primary and secondary data were gathered, reviewed, and analyzed so that the most accurate information was available in determining the community's health needs and the appropriate implementation process.

Primary Data: collected by the assessment team directly from the community through conversations, telephone interviews, focus groups, and community forums; the most current information available.

Secondary Data: collected from sources outside the community and sources other than the assessment team; information that has already been collected, collated, and analyzed; provides an accurate look at the overall status of the community.

Secondary Data Sources

- The United States Census Bureau
- U.S. Department of Health and Human Services
- Centers for Disease Control and Prevention
- American Heart Association
- Marion General Hospital Medical Records Department
- Mississippi State Department of Health, Office of Health Data and Research
- ESRI Demographic Research

About The Community

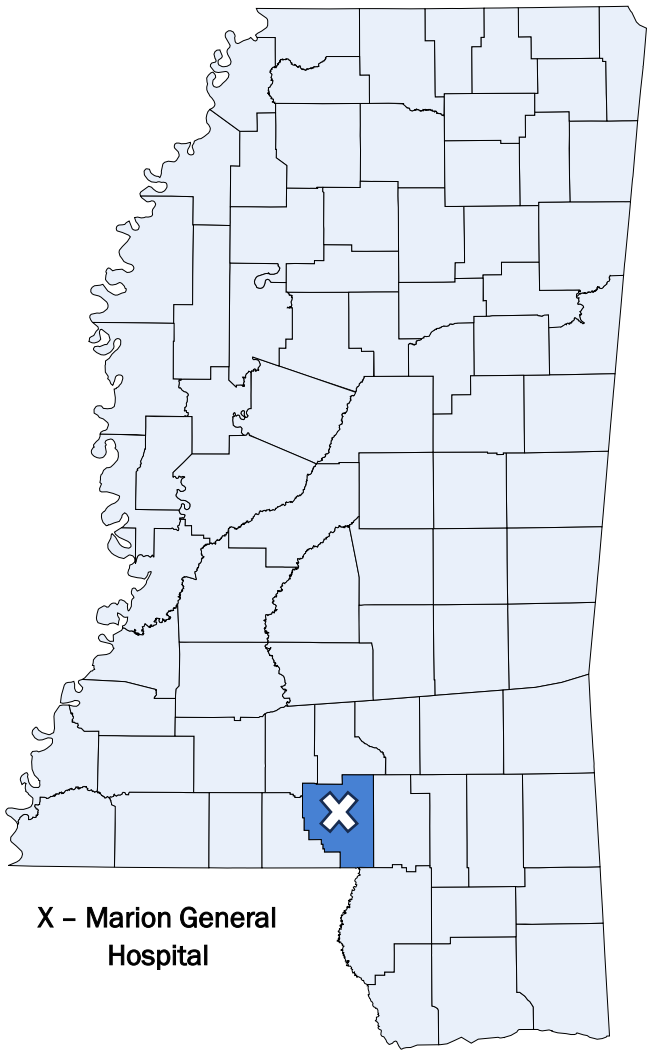
Service Area

Primary: Marion County

The County

Marion County is located in the geographical center of South Mississippi. Halfway between the coastal waters of the Gulf of Mexico and New Orleans to the south and Jackson, the population and governmental center of Mississippi to the north, this area has accepted the best influences from these destinations while independently forging its own culture and history.

The county has a total area of 549 square miles, of which 542 square miles is land.



X – Marion General Hospital

Communities

Cities and Towns in Marion County

- Columbia
- Foxworth
- Kokomo

Unincorporated Communities

- Bunker Hill
- Cheraw
- Darbun
- East Columbia
- Goss
- Hub
- Improve
- Jamestown
- Kokomo
- Morgantown
- New Hope
- Pickwick
- Pine Burr
- Popetown
- Rosehill
- Sandy Hook
- White Bluff

About the Community, Continued

Demographics

Marion County 2024

Population:	23,729
Racial Mix:	
White	63.9%
African American	31.7%
Native American	0.2%
Asian	0.4%
Two or More Races	2.8%
Other	1.0%
Hispanic*	1.8%
Non-Hispanic	98.2%

Marion County 2022

Population:	24,441
Racial Mix:	
White	64.7%
African American	31.2%
Native American	0.2%
Asian	0.3%
Two or More Races	2.7%
Other	0.9%
Hispanic*	1.7%
Non-Hispanic	98.3%

		Marion County
Population:		23,729
Racial Mix:	White	15,174
	African American	7,512
	Asian	88
	American Indian	52
	2 or more	669
	Other	234
	Hispanic*	423
Median Household Income:		$42,320

*Hispanics may be of any race, so also are included in applicable race categories

About the Community, Continued

Mississippi, Marion County, and the United States

	Mississippi	Marion County	United States
Median Age	39.6	42.0	38.9
Median Household Income	$55,017	$42,320	$77,540
Poverty Level	19.4%	21.0%	11.5%

SOURCES:
U.S. Census Bureau, 2020
U.S. Census Bureau, American Community
ESRI Community Profile

Marion County	
Percent of residents who do not have access to broadband:	12.0%
Households receiving food stamps/SNAP:	12.0%
Households with 1+ persons with a disability:	45.1%
Households without a vehicle:	2.0%
Percent of adults who didn't finish high school:	17.2%
Percent of Unemployment as of 11/2024 ** :	5.0%
Percent living alone:	28.0%

SOURCES**
US Bureau of Labor Statistics
Source: U.S. Census Bureau, 2020
Source: U.S. Census Bureau, American Community
Source: ESRI Community Profile

About the Community, Continued

Marion County	
The percentage of adults who report fair to poor health	25.9%
Obesity Prevalence	44.0%
Diabetes Prevalence	14.1%
Excessive Drinking	16.0%
Smoking	24.8%
Life Expectancy	70.3
Percent of households with at least 1 – 4 housing problems (overcrowding, high costs, lack of kitchen/plumbing)	17.4%

SOURCES:
U.S. Census Bureau, American Community
University of Wisconsin Population Health Institute
County Health Rankings & Roadmaps
National Findings Report 2024

www.countyhealthrankings.org

Community Input

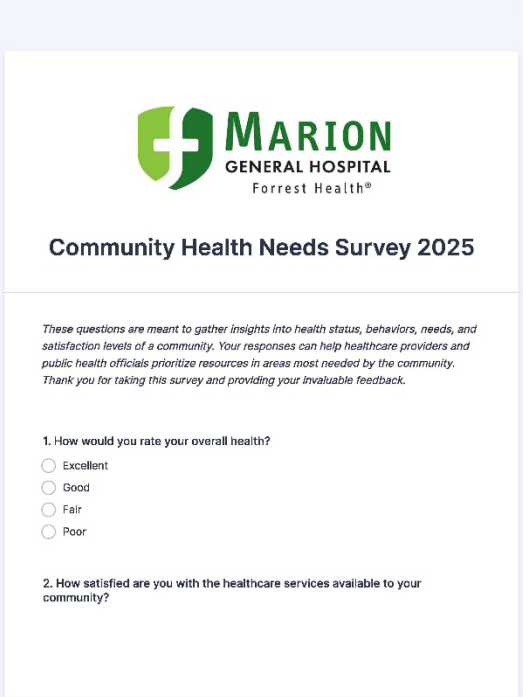
Community health needs were identified through the collection and analysis of data from a variety of quantitative and qualitative sources. Using multiple sources is essential to ensure the assessment reflects a comprehensive range of facts, trends, and community perspectives. This multifaceted approach helps identify the most pressing health priorities. Among these sources, one of the most valuable is direct input from the individuals and communities we serve.

To gather community input, the Hospital developed and distributed an online survey. Members of the general public were invited to participate, with the survey promoted across multiple channels to ensure broad reach. Marion General Hospital dispersed the CHNA survey via hospital social media platforms. It was also mentioned in the local newspaper while discussing the need for mammography in Marion County. Lastly, the survey was distributed via a link to employees and community members through mass email. The responses were analyzed and used to help determine key health priorities and inform the development of new initiatives.



Community Input, Continued

2025 CHNA Community Survey:



MARION GENERAL HOSPITAL
Forrest Health®

Community Health Needs Survey 2025

These questions are meant to gather insights into health status, behaviors, needs, and satisfaction levels of a community. Your responses can help healthcare providers and public health officials prioritize resources in areas most needed by the community. Thank you for taking this survey and providing your invaluable feedback.

1. How would you rate your overall health?
- ○ Excellent
- ○ Good
- ○ Fair
- ○ Poor

2. How satisfied are you with the healthcare services available to your community?
- ○ Very satisfied
- ○ Satisfied
- ○ Natural
- ○ Dissatisfied
- ○ Very dissatisfied

3. In the past year, have you had difficulty accessing medical care?
- ○ Yes
- ○ No

4. Are there any barriers to receiving medical care in your area? (check all that apply)
- ☐ Cost
- ☐ Lack of transportation
- ☐ Availability of healthcare providers
- ☐ Language
- ☐ Cultural barriers
- ☐ Insurance coverage
- ☐ Other

5. How often do you get a health checkup?
- ○ Annually (each year)
- ○ Every 2-5 years
- ○ Only when a problem occurs

6. Do you smoke, vape, or use tobacco products?
- ○ Yes
- ○ No

7. How often do you engage in physical activity?
- ○ Daily
- ○ 3-4 times a week
- ○ Occasionally
- ○ Never

8. How would you describe your typical diet?
- ○ Healthy
- ○ Somewhat healthy
- ○ Unhealthy

9. Do you drink alcohol?
- ○ Yes, regularly
- ○ Yes, occasionally
- ○ No

10. How often do you experience high levels of stress?
- ○ Often
- ○ Sometimes
- ○ Rarely
- ○ Never

11. Have you ever been diagnosed with any of the following conditions? (check all that apply)
- ☐ Hypertension (high blood pressure)
- ☐ Diabetes
- ☐ Asthma
- ☐ Heart disease
- ☐ Obesity
- ☐ Cancer
- ☐ Mental health conditions
- ☐ None of the above

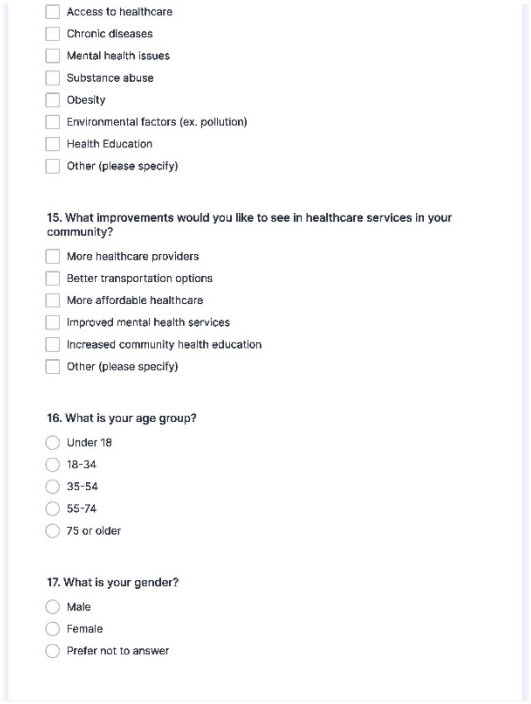
12. Do you receive recommended screenings or preventive care services? (ex: mammograms, colonoscopies, immunizations)
- ○ Yes, regularly
- ○ Sometimes
- ○ No

13. How easy is it to get an appointment with a healthcare provider in your community?
- ○ Very easy
- ○ Somewhat easy
- ○ Difficult
- ○ Very difficult

14. What are the biggest health challenges facing your community?

Community Input, Continued

2025 CHNA Community Survey:



- [ ] Access to healthcare
- [ ] Chronic diseases
- [ ] Mental health issues
- [ ] Substance abuse
- [ ] Obesity
- [ ] Environmental factors (ex. pollution)
- [ ] Health Education
- [ ] Other (please specify)

15. What improvements would you like to see in healthcare services in your community?

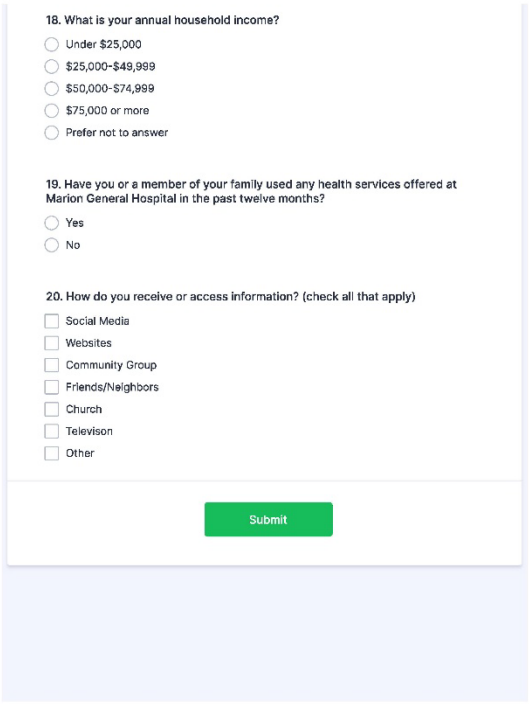
- [ ] More healthcare providers
- [ ] Better transportation options
- [ ] More affordable healthcare
- [ ] Improved mental health services
- [ ] Increased community health education
- [ ] Other (please specify)

16. What is your age group?

- ○ Under 18
- ○ 18-34
- ○ 35-54
- ○ 55-74
- ○ 75 or older

17. What is your gender?

- ○ Male
- ○ Female
- ○ Prefer not to answer



18. What is your annual household income?

- ○ Under $25,000
- ○ $25,000-$49,999
- ○ $50,000-$74,999
- ○ $75,000 or more
- ○ Prefer not to answer

19. Have you or a member of your family used any health services offered at Marion General Hospital in the past twelve months?

- ○ Yes
- ○ No

20. How do you receive or access information? (check all that apply)

- [ ] Social Media
- [ ] Websites
- [ ] Community Group
- [ ] Friends/Neighbors
- [ ] Church
- [ ] Televison
- [ ] Other

Submit

Community Input, Continued

Community Health Needs Assessment Steering Committee



Hospital Steering Committee

Karen Barnes, Homeless/Parent Liaison, Marion County School District

Adrian Fortenberry, Chief of Police, Columbia, MS

Berkley Hall, Sheriff, Marion County

Lisa Hibley, Executive Secretary, Marion General Hospital

Ashley Holmes, Radiology Team Lead, Marion General Hospital

Tomaz McCarty, Administrator, Marion General Hospital

Calvin Newsome, Board of Supervisors/Pastor

Brandon Rowell, RN, Marion General Hospital

Jackie Stuckey, Family Nurse Practitioner, Marion General Hospital

Community Input, Continued

Community Focus Group



Participants in the Community Forum

Kimberly Cruz, CEO, Vital Nutrition Counseling

Adrian Fortenberry, Chief of Police, Columbia, MS

Jessie Graham, Coroner, Marion County

Lisa Hibley, Executive Secretary, Marion General Hospital

Ashley Holmes, Radiology Team Lead, Marion General Hospital

Lil Johnson, Marion County School Board, Volunteer Fire Dept., Marion County Fire Dept.

Sarah McCain, RN, Marion General, Mississippi Department of Health

Tomaz McCarty, Administrator, Marion General Hospital

Calvin Newsome, Board of Supervisors/Pastor, Marion County Hospital

Social Determinants of Health

Social Determinants of Health: Definition and Impact

The concept of social determinants of health ("SDOH") refers to the broad range of nonmedical factors that significantly influence individual and community health outcomes. According to the World Health Organization, SDOH are "the conditions in which people are born, grow, live, work and age," encompassing a vast array of influences that extend well beyond clinical care. These determinants are typically grouped into six domains:

- **Economic Stability**: Employment, income, expenses, medical bills, and financial support.
- **Neighborhood and Physical Environment**: Housing, transportation, safety, parks, playgrounds, walkability, and geography.
- **Education**: Literacy, language, early childhood education, vocational training, and higher education.
- **Nutrition**: Hunger and access to healthy food options.
- **Community and Social Context**: Social integration, support systems, community engagement, discrimination, and stress.
- **Health Care Access**: Health coverage, provider availability, cultural competency, and quality of care.

These social determinants have a measurable impact on both medical outcomes and the total cost of care. For example, food insecurity alone is associated with approximately $155 billion in annual healthcare costs in the U.S., and nearly 80 percent of emergency department visits by homeless patients are preventable with reliable access to primary care. Research indicates that 60 percent of a patient's overall health is shaped by SDOH and individual behavior, compared to 30 percent by genetics and only 10 percent by the care they receive.

The Role of Marion General: Convener and Organizer

Hospitals are uniquely positioned to serve as conveners and organizers of community-wide efforts to address SDOH. While addressing these determinants often extend beyond the traditional scope of medical care, hospitals encounter the consequences of unaddressed social needs daily. As such, they have both a vested interest and a responsibility to lead collaborative initiatives that drive meaningful change.

Social Determinants of Health, Continued

Five Critical Steps for Hospital-Led SDOH Initiatives:

1. **Articulate the Hospital's Unique Role**

   Marion General will clearly define their role in collaboratively tackling SDOH. This involves understanding their "impact advantage, " the specific resources, relationships, and expertise that position them to drive change and communicate this role to partners and stakeholders.

2. **Leverage Community Partnerships**

   Effective SDOH interventions require collaboration with a diverse range of stakeholders, including community-based organizations, public health agencies, payers, and local government. Marion General will act as a convener, bringing these groups together to align efforts, share data, and coordinate resources.

3. **Address Root Causes, Not Just Symptoms**

   Successful strategies go beyond addressing the immediate consequences of social needs (such as providing transportation or food) and instead target the underlying causes, like poverty, housing instability, and systemic inequities. This requires engaging directly with affected populations to understand their lived experiences and priorities.

4. **Prioritize Trust-Building with Patients and Communities**

   There is often deep mistrust between marginalized populations and the healthcare system, rooted in historical discrimination and inequity. Marion General will prioritize earning trust by involving patients in program design, ensuring cultural competence, and demonstrating sustained commitment to community well-being.

5. **Integrate SDOH Efforts Across the Organization**

   Addressing SDOH is not solely the responsibility of community outreach teams; it must be embedded throughout the organization, from the C-suite to the front lines. Hospital leadership will champion SDOH as a strategic priority, while clinical and nonclinical staff are empowered to identify social needs and connect patients with appropriate resources.

Overview of Social Determinants of Health for Marion General's Population

The social determinants of health ("SDOH") are the nonmedical factors that influence health outcomes. For Marion General Hospital's service area, which includes Marion and surrounding counties in Mississippi, recent community health needs assessment ("CHNA") survey data and demographic profiles reveal several key SDOH impacting the population.

Social Determinants of Health, Continued

Key Types of Social Determinants Identified

Economic Stability

- **Income Distribution:** 30 percent of respondents reported household incomes between $25,000–$49,999, another 30 percent reported $75,000 or more, 22 percent were under $25,000, and 15 percent fell in the $50,000–$74,999 range.
- **Cost as a Barrier:** 42 percent cited cost as a barrier to care, reinforcing its impact on healthcare access.

Access to Health Care

- **Barriers Identified:** Cost was the most reported barrier (42 percent), followed by availability of healthcare providers (26 percent), insurance coverage (26 percent), and lack of transportation (6 percent).
- **Difficulty Accessing Care:** 89 percent of respondents (24 out of 27) reported no difficulty accessing medical care in the past year; 11 percent (three respondents) did report difficulty.
- **Appointment Accessibility:** 92 percent described getting an appointment as "somewhat easy" or "very easy," while only 7 percent found it "difficult."

Social and Community Context

- **Health Challenges Identified:** Top concerns include obesity (29 percent), chronic diseases (16 percent), mental health issues (14 percent), substance abuse (14 percent), and lack of health education (14 percent).
- **Community Improvements Desired:** 41 percent called for increased community health education. Other key desires included more healthcare providers (20 percent), more affordable healthcare (20 percent), improved mental health services (14 percent), and better transportation options (4 percent).

Transportation and Infrastructure

- **Transportation as a Barrier:** Though only 6 percent identified it as a barrier, transportation remains a challenge for specific community members and affects their ability to access care.

Community Perspective

- The community recognizes that health outcomes are affected by an interplay of cost, access, education, and lifestyle factors.
- There is an apparent demand for expanded services, better affordability, and more health education to address both immediate and long-term health needs.

Social Determinants of Health, Continued

Impacts of Social Determinants on Health Outcomes

Limited Access to Healthcare Services Contributes to Delayed or Avoided Care

- 42 percent of respondents reported cost as a barrier, while 26 percent cited lack of insurance and 26 percent cited provider availability.
- Although 89 percent reported no issues accessing care, the 11 percent who did may represent individuals experiencing significant unmet health needs.

Economic Inequities Influence Preventive Care and Chronic Disease Risks

- Nearly a quarter (22 percent) of respondents have annual household incomes under $25,000, which can affect the affordability of medications, healthy food, and consistent care.
- Only 59 percent regularly receive recommended preventive services, and 41 percent delay care until a problem arises.

Lifestyle Behaviors and Community Health Education Gaps Exacerbate Chronic Conditions

- Obesity (29 percent), hypertension (24 percent), and diabetes (16 percent) were among the most frequently reported diagnosed conditions.
- 41 percent of respondents want more community health education, highlighting a gap in proactive disease prevention and health literacy.

Social Determinants of Health, Continued

Summary Table: Key SDOH for Marion General's Population

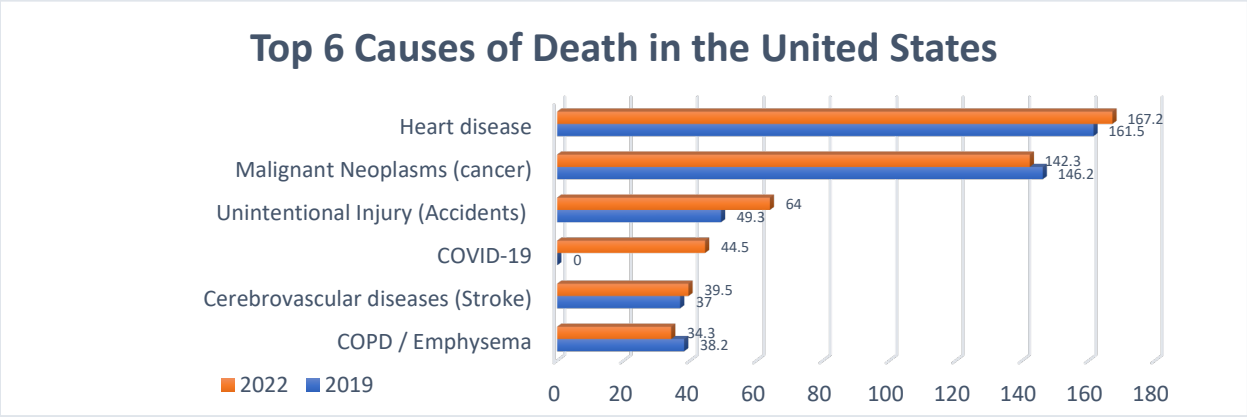
Determinant Type	Main Issues Identified	Impact on Health Outcomes
Economic Stability	Cost, insurance, income disparities, and employment	Delayed care, chronic disease management issues
Access to Health Care	Provider shortages, long wait times, and transportation	Reduced preventive care, delayed treatment
Neighborhood/Environment	Rurality, lack of exercise facilities	Lower physical activity, higher chronic disease
Education/Health Literacy	Low health education, limited awareness	Poor self-management, late disease detection
Social/Community Context	Caregiver support, cultural/language barriers	Navigation challenges, disparities in care
Health Behaviors	Diet, physical inactivity, tobacco/alcohol use	Elevated chronic disease rates

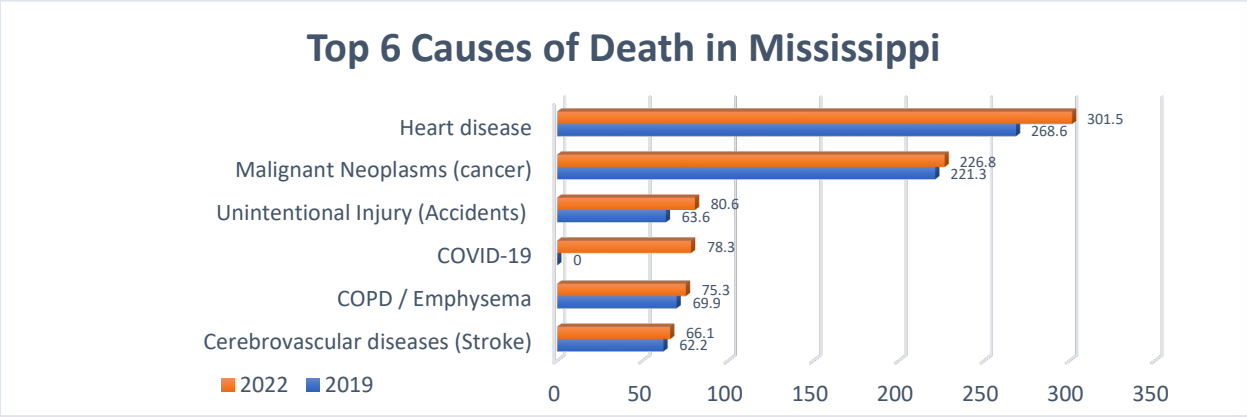
Conclusion

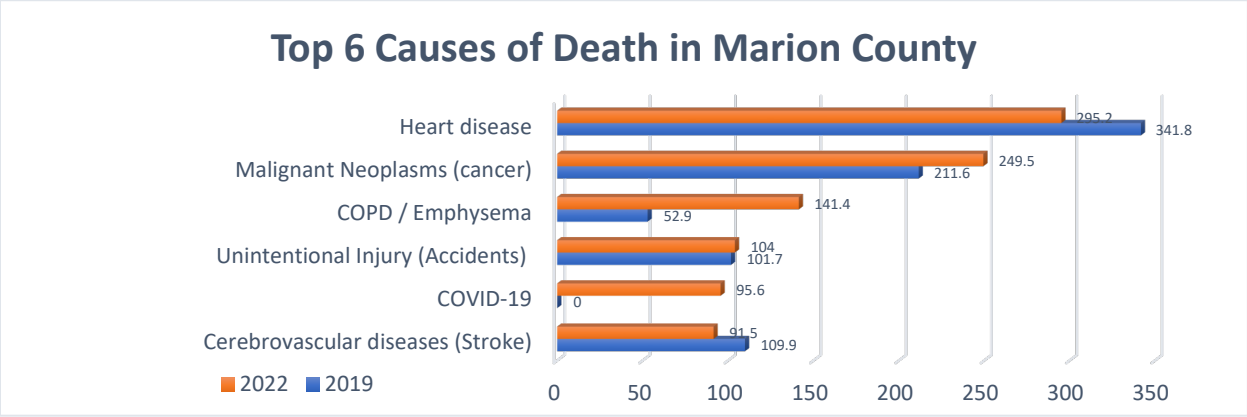
Marion General's population faces a combination of economic, access, educational, and environmental barriers that shape health outcomes. Addressing these SDOH, especially affordability, provider access, transportation, and health education, will be critical to improving overall community health and reducing health disparities in the region.

Causes of Death Analytics

Cause of Death Comparison (based on per 100,000)



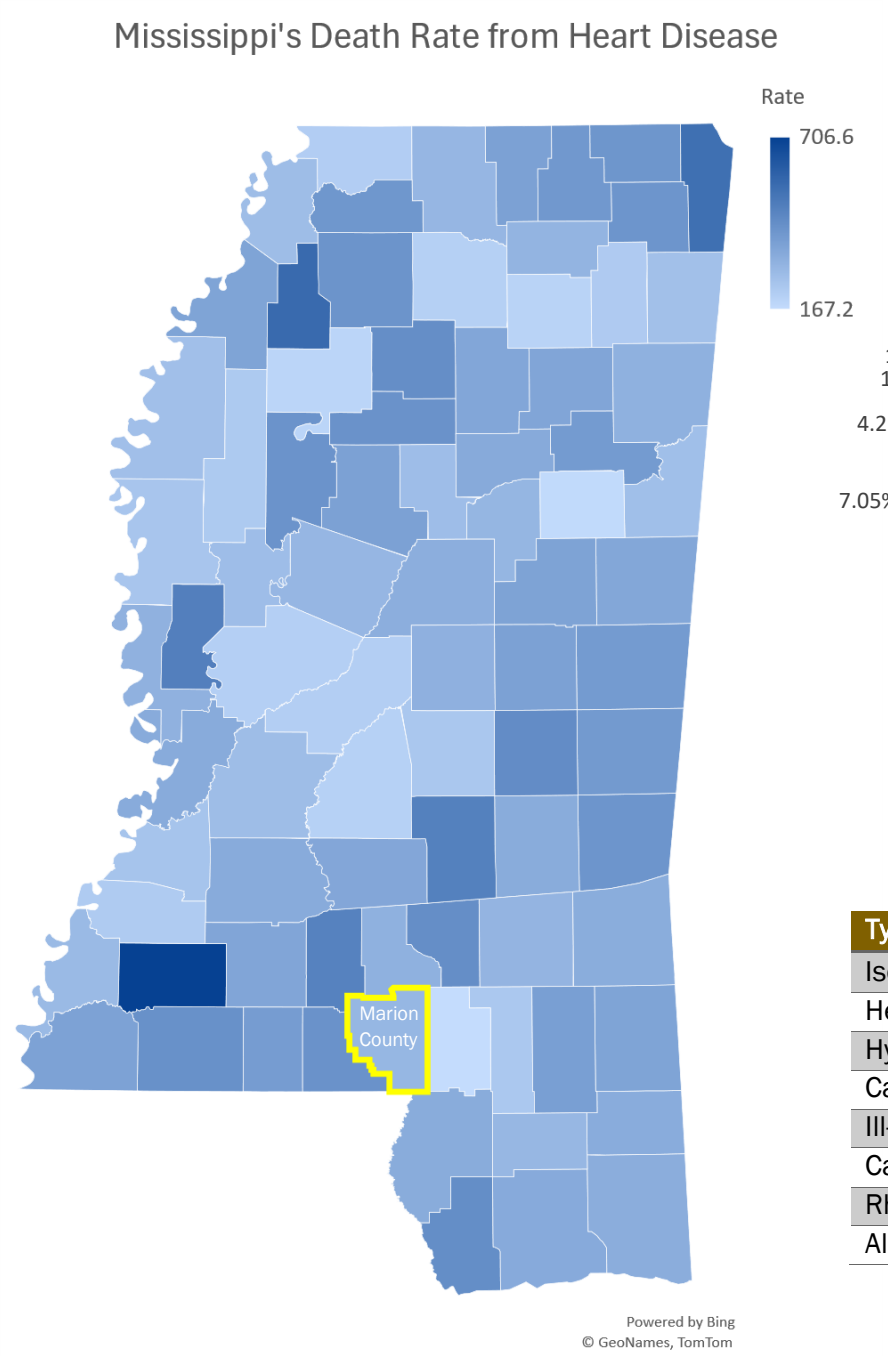


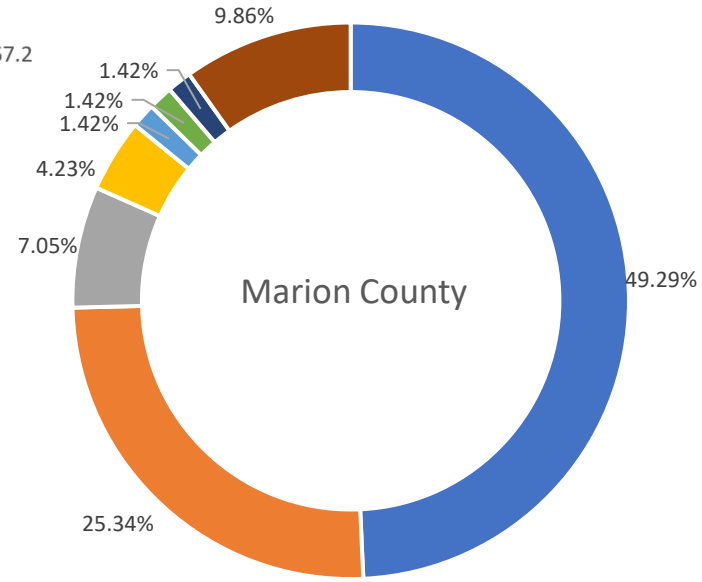


Causes of Death Analytics, Continued

Heart Disease Death Analytics (based on per 100,000)

Below is a heat map showing heart disease-related deaths across Mississippi by county, with darker shades indicating higher death counts. HORNE conducted a focused review of the specific types of heart disease contributing to deaths in Marion County to identify key trends and areas for targeted intervention.



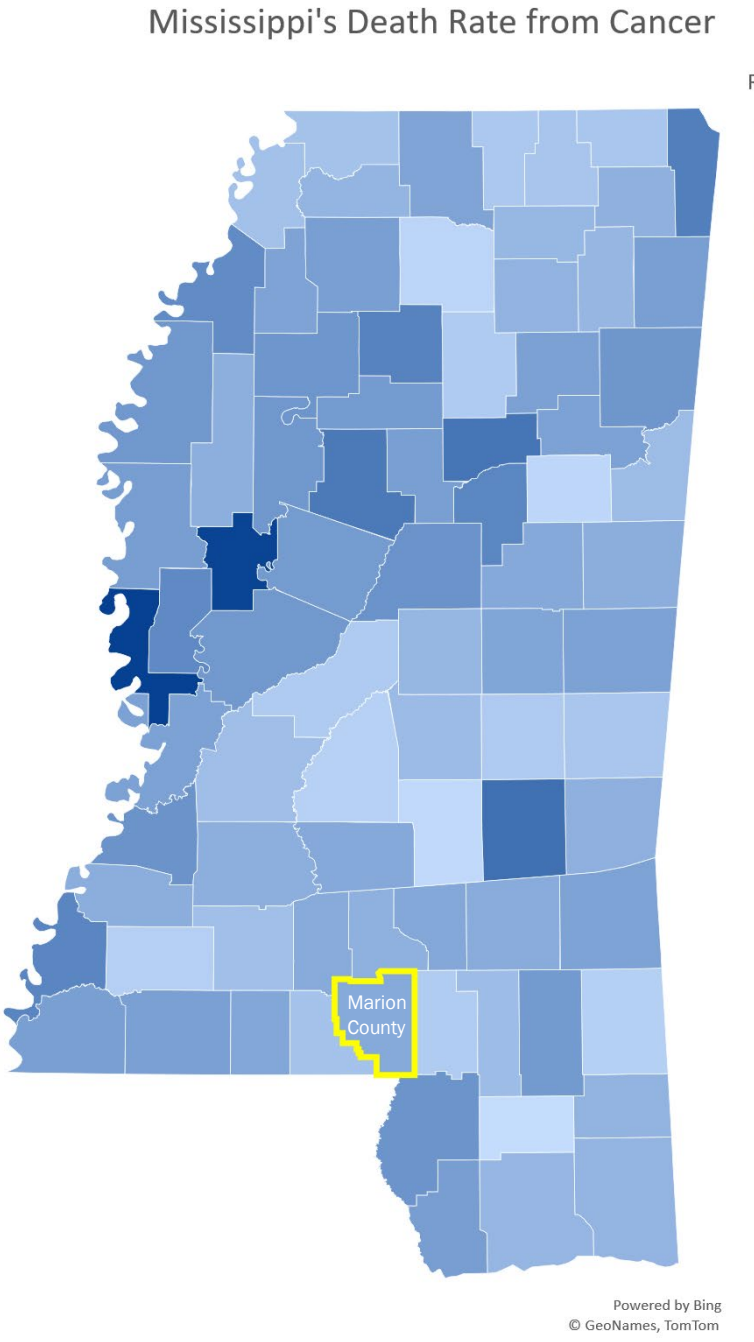


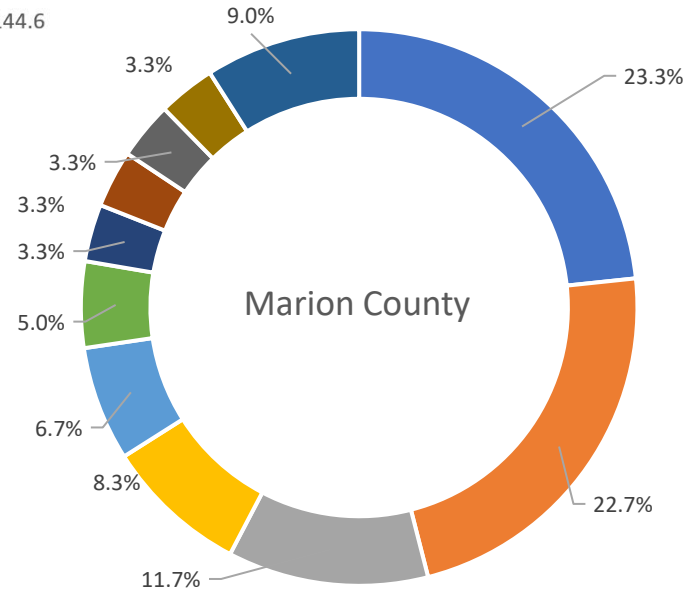
Type of Heart Disease	Percentage
Ischemic Heart Disease	49.29%
Heart Failure	25.34%
Hypertensive Heart Disease	7.05%
Cardiac Dysrhythmias	4.23%
Ill-Defined Heart Diseases	1.42%
Cardiomyopathy	1.42%
Rheumatic Heart Disease	1.42%
All Other Heart Diseases	9.86%

Causes of Death Analytics, Continued

Cancer Death Analytics (based on per 100,000)

Below is a heat map showing cancer-related deaths across Mississippi by county, with darker shades indicating higher death counts. HORNE conducted a focused review of the specific types of cancer contributing to deaths in Marion County to identify key trends and areas for targeted intervention.



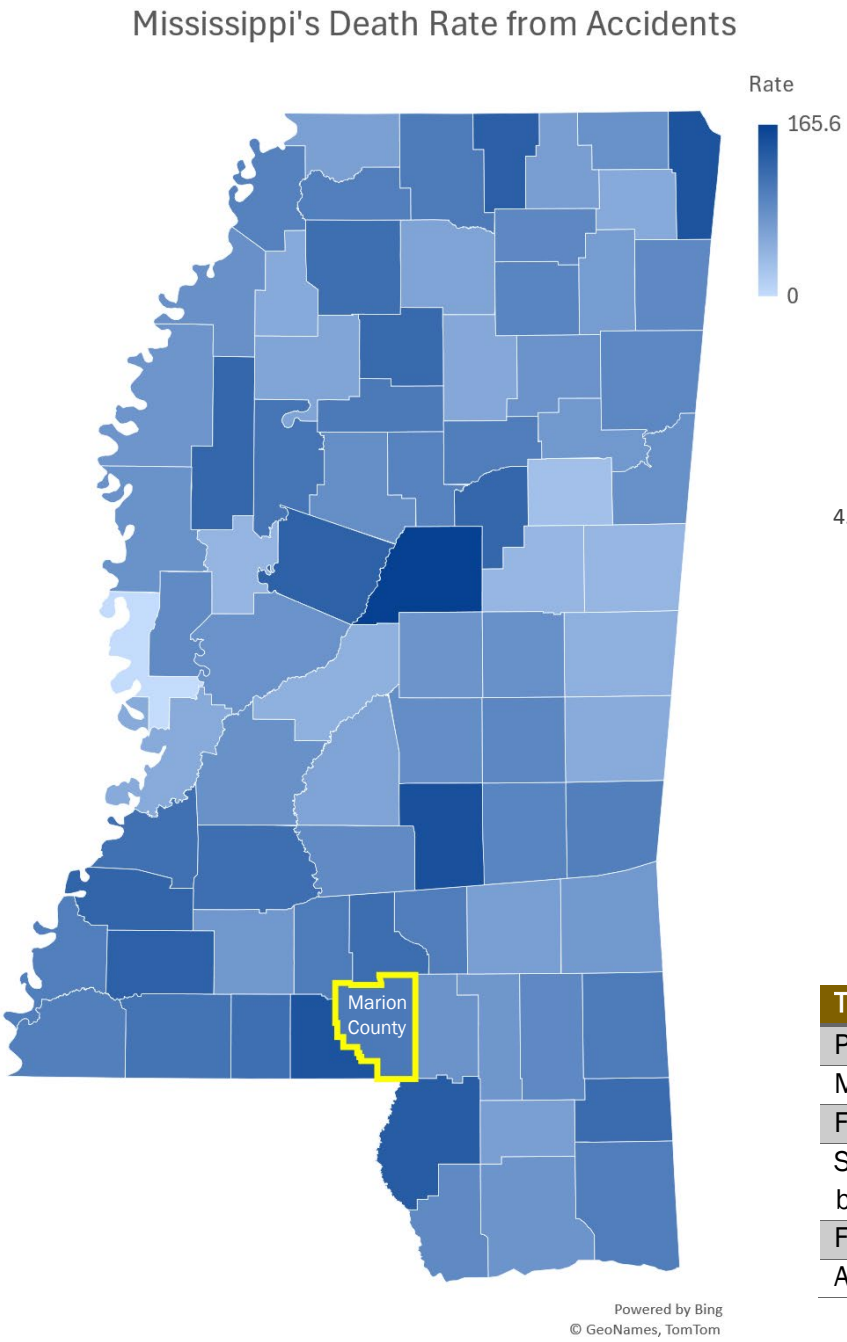


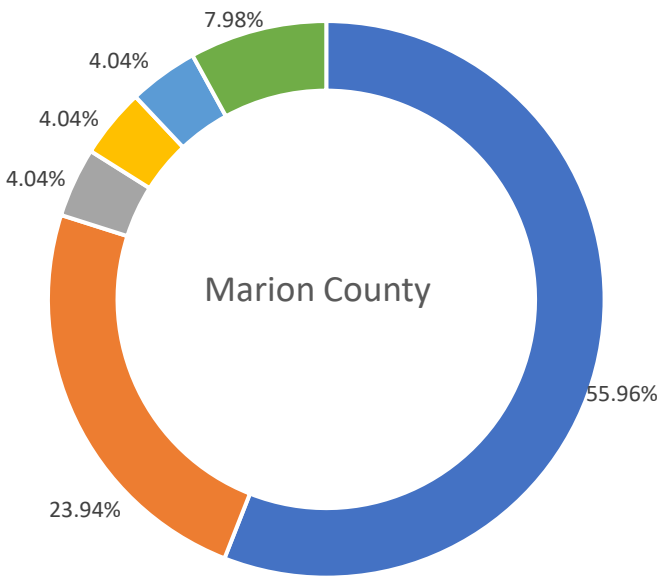
Type of Cancer	Percentage
Trachea, bronchus, and Lung	23.33%
Female breast	22.69%
Colorectal	11.66%
Prostate	8.34%
Liver and intrahepatic bile ducts	6.65%
Leukemia	5.01%
Stomach	3.33%
Bladder	3.33%
Brain	3.33%
Kidney and other urinary organs	3.33%
All Other Cancers	9.02%

Causes of Death Analytics, Continued

Accidental Death Analytics (based on per 100,000)

Below is a heat map showing accident-related deaths across Mississippi by county, with darker shades indicating higher death counts. HORNE conducted a focused review of the specific types of accidents contributing to deaths in Marion County to identify key trends and areas for targeted intervention.





Type of Accident	Percentage
Poisoning-drugs	55.96%
Motor vehicle	23.94%
Falls	4.04%
Submersion, suffocation, and foreign bodies	4.04%
Fires, flames, and smoke	4.04%
All Other Unintentional Injuries	7.98%

Our Response to the 2022 Needs

Summary of Impact of the 2022 CHNA Implementation Plan and Strategic Actions

An essential element of the three-year Community Health Needs Assessment ("CHNA") cycle is revisiting the progress made on the priority needs identified in the previous assessment. By reviewing the actions taken to address the needs identified by our communities and prioritized by the CHNA Steering Committee, it is possible to better target resources and efforts during the upcoming CHNA cycle. This review also provides the collaborative partners with the affirmation that the joint efforts to improve the overall health of our community have been successful.

Prioritization

The information gathered from the community was uniform and consistent with the quantitative data. The most common needs mentioned by the community members were related to chronic diseases, health education, lifestyle improvement, and access to care.

Being aware of this lifestyle disparity, the Steering Committee was diligent in addressing these chronic illnesses, which led to a disproportionate number of deaths. Additionally, the quality of life in our state is negatively impacted by these conditions that deprive our citizens of the opportunity to enjoy good health daily.

Hypertension, heart disease, diabetes, weight loss/obesity, and nutrition were all health needs identified by both the community members and healthcare professionals. In addition, deaths from female breast cancer and trachea, bronchus, and lung cancer were identified as disproportionate for the county. Community members saw a need for increased education and preventive care to eliminate the path to chronic disease and cancer.

Prevention can be cost effective compared to the catastrophic treatment needed when a chronic disease is unmanaged and leads to significant health problems. Education related to nutrition was emphasized because of the link between obesity and so many chronic health conditions. Other community health needs that were expressed included a need for increased health literacy and decreased health disparities among socioeconomic and racial groups.

Community Health Improvement Plan

Based on the community's input and the knowledge of the patient population we serve, the CHNA Steering Committee prioritized these needs. It developed a Community Health Improvement Plan (CHIP) to address them. The Strategic Actions and the activities implemented to improve the health and well-being of our community, along with the positive impact of these activities, are detailed on the following pages.

Our Response to the 2022 Needs, Continued

2022 Strategic Action Response: Expansion of Breast Cancer Services and Awareness

Puttin' On the Pink and Mammography Service Line Implementation

Target Population

Women aged 40 and older residing in Marion County, with a particular focus on individuals with limited access to preventative care due to financial, transportation, or geographic barriers.

Goals and Desired Outcomes

- Increase access to breast cancer screenings and early detection resources.
- Reduce disparities in breast cancer diagnosis and treatment by focusing on at-risk and underserved groups.
- Enhance community awareness through ongoing education, outreach, and fundraising initiatives.
- Establish a self-sustaining department that integrates clinical excellence with community engagement.

Process/Time Frame/Location

- Equipment acquisition, department setup, and initial community launch events.
- Expanded outreach and screening coordination.
- Program evaluation, refinement, and sustainability planning.

Measures of Success

- 24 individuals attended and engaged in *Puttin' on the Pink* events and educational sessions
- 100-plus individuals within the community initially, with the growth of the social media following of the *Puttin' on the Pink* Facebook page
- Partnerships and donations generated through community outreach
- Acquirement of Mammography Device

Our Response to the 2022 Needs, Continued

Collaborative Partners

This initiative thrives on the strength of community partnerships. Marion General Hospital is honored to collaborate with:

- *Puttin' on the Pink* Marion County Chapter – spearheading awareness, fundraising, and outreach
- Forrest General Hospital – clinical coordination and strategic support
- City Officials of Columbia and Marion County – logistical and public engagement support
- Walthall General Hospital and Jefferson Davis Community Hospital – cross-county screening referrals and coordination
- Local Community Leaders – ambassadors for education, equity, and access

Our Response to the 2022 Needs, Continued

2022 Strategic Action Response: Heart Disease and Cancer

Community Health Fair Participation

Target Population

Community members who are unhealthy, at-risk for cancer or heart disease, or have a family history of cancer and/or heart disease.

Goals and Desired Outcomes

Our goal was to address preventative measures relating to heart disease and cancer, which are the leading causes of death in the Hospital's primary service area, as well as in the state of Mississippi.

Process/Time Frame/Location

Marion General Hospital collaborated with local organizations to educate community members participating in a community health fair about measures to take to prevent cardiovascular disease and cancer. Educators also provided information on the harmfulness of smokeless tobacco to teens and young adults. Participants were also educated on the importance of scheduling appointments for regular medical check-ups for early detection.

Measures of Success

- An estimated 200 individuals attended the community health fair
- Increased partnerships within the community
- Participated in more than three community-led events.
- Participated in cancer education and awareness campaigns

Collaborative Partners

This initiative thrived on the strength of community partnerships. Marion General Hospital is honored to collaborate with:

- City Officials of Columbia and Marion County Development Partners
- Community Events
- Newspaper
- American Cancer Society
- Local Healthcare Professionals

Our Response to the 2022 Needs, Continued

Heart Disease Education and Cancer Awareness

Target Population

Community members who are unhealthy, at-risk for cancer or heart disease, or have a family history of cancer and/or heart disease.

Goals and Desired Outcomes

Our goal was to address preventative measures relating to heart disease and cancer, which are the leading causes of death in the Hospital's primary service area, as well as in the state of Mississippi.

Process/Time Frame/Location

Marion General Hospital collaborated with the local newspaper and radio. Additionally, it utilized social media to provide educational material and facts about the prevention of cardiovascular disease, tobacco cessation, the harmfulness of vaping, and the importance of regular check-ups with the target population's primary care provider.

Measures of Success

- Provided 120 individuals with complementary blood pressure checks, healthy informational material, and bone density scans
- Increased health literacy by providing information.
- Increased Primary Care Provider visits.
- Participated in cancer education and awareness campaigns.

Collaborative Partners

This initiative thrived on the strength of community partnerships. Marion General Hospital is honored to collaborate with:

- City Officials of Columbia and Marion County Development Partners
- Community Events
- Newspaper
- American Heart Association
- Local Healthcare Professionals

Our Response to the 2022 Needs, Continued

2022 Strategic Action Response: Healthy Eating

Healthy Eating Education

Target Population

School-age students and their parents

Goals and Desired Outcomes

Educate students about the impact healthy eating and exercise have on heart disease, cancer, and diabetes.

Process/Time Frame/Location

Marion General Hospital participated in health fairs within the local school system, educating students about the importance of healthy diets. The participants received food charts and informational materials about food nutrition.

Measures of Success

- Participated in 2 local school health activities.
- Educated 100+ students on healthy diets.

Collaborative Partners

- Local Schools in Marion County

Prioritizing Our Needs for 2025

Southern Rural Health at a Disadvantage

According to research conducted by the National Institutes of Health, some rural areas of America experience better health outcomes compared to people residing in urban areas. Individuals living in rural areas in the Northeast, and some parts of the Midwest and West in the US, tend to have lower rates of death and disease compared to both the US in general and to their urban counterparts.

However, those living in the rural South, especially in Appalachia and the Mississippi Delta region, have the lowest life expectancy in the country, and the highest mortality rates due to heart, lung, blood, and sleep disorders; stroke; and cancer. Individuals residing in the rural South experience higher mortality rates compared to both their urban counterparts and other populations living in different rural regions across the US. The disparity in mortality rates between rural regions is stark, with people living in rural communities in the East South Central Region (Kentucky, Tennessee, Mississippi, and Alabama) experiencing more than 1,000 deaths per 100,000 from 2013 to 2015, compared to 850 deaths per 100,000 in all other rural areas of the US.

Prioritizing Future Efforts for Healthier Rural Communities

The traditional Southern lifestyle is greatly influenced by a less than healthy diet highlighted by fried foods, organ meats, processed meats, eggs and egg dishes, sugar-sweetened beverages, and bread products. Poor diet, along with a lack of consistent aerobic activity and the widespread use of tobacco products, are major contributing lifestyle factors that can explain the prevalence of chronic conditions like high blood pressure, obesity, diabetes, and some cancers.

The awareness of the Southern rural health disadvantage, along with the mortality statistics for the population of our service area, made establishing our need for healthy changes a priority for the next three years. In addition to education for a healthier lifestyle for our residents, we will focus many of our strategic actions on reducing the prevalence of cancer, heart disease, stroke, and substance abuse.

Community Health Implementation Plan 2025

Marion General Hospital's Leadership, in collaboration with the CHNA Steering Committee, and a diverse group of collaborative partners, analyzed varied data indicators for Marion County, along with state and national health comparison and community input to identify the health and social needs in Marion County. Following the completion of the Community Health Needs Assessment (CHNA), Marion General Hospital selected a subset of the research findings as the prioritized needs around which the Hospital has developed a Community Health Implementation Plan (CHIP) - a three-year implementation plan and strategies. Although the Hospital may respond to many needs, the prioritized needs will be at the center of a formal CHNA implementation plan and corresponding tracking and reporting.

2025 Strategic Initiatives

Initiative 1: Breast Cancer Awareness

Marion General Hospital recognizes the critical need to address the high incidence and mortality rates associated with breast cancer. As part of our ongoing commitment to enhancing community health, we aim to expand access to early detection and prevention efforts throughout Marion County.

Target Population

Women aged 40 and older residing in Marion County.

Goals/Desired Outcome

Our goal is to increase accessibility to breast cancer education and preventative screenings, particularly for underserved and at-risk populations in our community.

Timeline

This is an ongoing initiative that will leverage existing community engagement efforts, such as *Puttin' on the Pink*, and introduce new awareness and fundraising events over the next three years.

Success Metrics

Program success will be measured by the number of mammography screenings completed and community participation in educational outreach events.

Resources and Funding

Marion General Hospital will utilize its internal resources and established partnerships to implement this initiative. Costs will vary based on staffing needs, educational materials, and expenses related to providing screenings. Funding will be supplemented through in-kind contributions from partner organizations and event sponsorships where possible.

Collaborative Partners

- *Puttin' on the Pink* Marion County Chapter
- Walthall General Hospital
- Forrest General Hospital
- Jefferson Davis Community Hospital

2025 Strategic Initiatives, Continued

Initiative 2: Promoting Healthy Lifestyles

The Community Health Needs Assessment identified a significant prevalence of chronic diseases such as obesity, hypertension, and diabetes within Marion County. These conditions are closely linked to lifestyle factors, including poor nutrition, physical inactivity, and limited access to wellness education and preventive services.

Target Population

- Adults and families throughout Marion County
- Focus on underserved, rural, and high-risk populations

Goals/Desired Outcome

Our goal is to reduce the incidence of lifestyle-related chronic diseases by promoting healthy behaviors and improving access to education, physical activity opportunities, and preventive health services.

Timeline: 2025–2028 (Ongoing implementation and evaluation over the next three years)

Measures of Impact

- Number of participants in wellness programs and educational events
- Number of preventive screenings conducted (e.g., blood pressure, glucose, BMI)
- Pre/post self-reported behavior change and knowledge improvement surveys
- Health outcome tracking in collaboration with local healthcare providers
- Resources and Funding:
- Internal hospital staff and clinical teams
- Printed educational materials and screening supplies
- Funding through the Hospital budget, grant opportunities, and community sponsorships
- In-kind support from partners and volunteers

Collaborative Partners:

- Local schools, churches, and civic organizations
- Local Marion County nutrition-related businesses

2025 Strategic Initiatives, Continued

Initiative 3: Advancing Health Literacy and Building a Community Coalition for Coordinated Care

The CHNA process revealed that low health literacy contributes to poor health outcomes, limited access to care, and avoidable hospital visits in Marion County. Additionally, fragmented communication among service providers creates barriers for individuals navigating the healthcare system, especially vulnerable populations.

Target Population:

- Underserved populations in Marion County
- Individuals with chronic conditions, limited education, or low health literacy
- Families facing barriers to accessing coordinated care and support services

Goals and Desired Outcomes:

Our goal is to enhance health outcomes by promoting health literacy and establishing a unified, community-based coalition that focuses on coordinated care, education, and resource navigation.

Timeline: 2025–2028 (Coalition development and education program rollout with ongoing evaluation and adjustments)

Measures of Impact:

- Number of individuals reached through health literacy programs
- Increase in appropriate healthcare utilization (e.g., primary care vs. emergency room visits)
- Improved care coordination and referral tracking among coalition partners
- Participant feedback and knowledge gains from pre- and post-education assessments

Resources and Funding:

- Hospital staff (educators, case managers, care coordinators)
- Coalition partner contributions (meeting space, staffing, program support)
- Funding through hospital budget, local grants, and public health initiatives
- In-kind contributions from community-based organizations

Collaborative Partners:

- Local schools, churches, libraries, public health agencies, and nonprofits

Thank You

This thorough evaluation will deepen our understanding of the needs and concerns within our community. Marion General Hospital is proud to be a vital part of the Forrest Health System, where we truly embrace the philosophy of being "our brother's keeper." Our unwavering commitment to compassionate, mission-driven healthcare enables us to collaborate closely with our community partners, delivering exceptional care and fostering a healthier future for the residents of Marion County and its surrounding areas.

We extend our heartfelt gratitude to everyone who contributed to this process. A special acknowledgment goes to the members of the Forrest General Board of Trustees and the leadership of the health system; their guidance enables us to continue our mission in the beautiful, rural backdrop of Mississippi.

We would also like to express our sincere appreciation to our CHNA Steering Committee members and all participants in our Community Focus Group, whether through their presence at the Forum or through meaningful conversations. Your time, support, and insights have been truly invaluable.

Lastly, and perhaps most importantly, we thank the general public for recognizing the significance of their voices. Your participation in our Community Health Survey, your engagement with our latest Community Health Needs Assessment, and your support of our mission in Marion County are deeply appreciated.

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