Perry County General Hospital

CHNA Report

CHNA Report and Implementation Plan

Approved September 23, 2025



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Executive Summary

The Community Health Needs Assessment ("CHNA") is used to identify community health priorities and assist Perry County General Hospital to make decisions on where to commit resources that can most effectively improve the health and wellness of community members. This report also meets the guidelines and federal requirements of the Affordable Care Act (ACA) and the Internal Revenue Service (IRS) as acting compliance agent. In accordance with federal requirements, this report will be made widely available to the public on our website. A paper copy will also be available in the Hospital's administrative office. In partnership with HORNE, secondary data will be accessed regarding the health in our nation, state, and county.

The assessment was conducted April through June 2025. The CHNA steering committee with assistance from HORNE was able to implement strategies specifically tailored to the vulnerable populations such as minorities, low-income populations, and the medically ignored. This collaborative CHNA provides a summary of the most prevailing health conditions or situations in our community for which people most commonly did not receive access to in the past.

The main input was provided by previous patients, employees, and community representatives. The health needs identified will be shared in detail via this document and an implementation strategy is also articulated so as to keep Perry County focused during the next coming years.

It is a great honor to be a part of our community and we look forward to joining forces with community partners for a healthier and stronger Mississippi and improving the overall health of Richton and Perry County.

Shenika Russell, RN, MSN-MBA
Administrator/DON
Perry County General Hospital

About the Hospital

Perry County General Hospital

Perry County General Hospital is the county's only hospital. A recently converted Rural Emergency Hospital (REH) from a Critical Access Hospital, it is designated to serve the residents of Perry County and the city of Richton. Our top priority is to provide exceptional care to everyone who visits our Hospital. The Hospital is a Level IV trauma and stroke designated hospital offering a six-bed Emergency Department (ED). We also provide a variety of outpatient services including radiology, laboratory, therapy and infusion.

Recent improvements to Perry County General Hospital are an updated helipad with an illuminated transport walkway, a remodeled nursing station and breakroom in the ED, and a new trauma suite.

Updated Helipad



About the Hospital, continued

Updated ED Nursing station



About the Hospital, continued

Updated ED Breakroom:



About the Hospital, continued

Updated ED Trauma Suite:



About the Hospital, continued

Adjacent to the Hospital is our own rural health clinic, The Doctor's Clinic. It is a family medicine clinic that provides wellness visits, preventative care, chronic disease management, acute illness treatment, primary care services and immunizations. It recently added a new medical doctor to join the two nurse practitioners.

When you step into Perry County General Hospital, we want our philosophy of 'do what is best for the patient' to be conveyed through the care we give and attitude we show. From the registration staff to the providers, our top priority is you.



The Community Health Needs Assessment

The Community Health Needs Assessment ("CHNA") defines opportunities for healthcare improvement, creates a collaborative community environment to engage multiple change agents, and is an open and transparent process to listen and truly understand the health needs of Perry County. It also provides an opportunity for the Hospital to identify valuable collaborative partners as we try to better serve the community and improve the health of our citizens.

The federal government now requires that nonprofit hospitals conduct a community health assessment. These collaborative studies help healthcare providers build stronger relationships with their communities, identify needs, and dedicate funding and other resources toward programs that clearly benefit local residents. CHNAs can be powerful tools with the potential to be catalysts for outstanding community change.

Increasing Health Equity

Health Equity is the state in which everyone has a fair and just opportunity to attain their highest level of health. Progress toward achieving health equity can be measured by reducing health disparities. Health disparities are particular health differences closely linked with economic, social, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced obstacles to health based on their race or ethnicity, religion, socioeconomic status, gender identity, sexual orientation, age, and other personal characteristics which might create more challenging access to healthcare.

Looking closely at all aspects of our communities' overall health, allows Perry County Hospital and its collaborative partners to focus on the root causes that are perpetuating the differences which contribute to struggles in ensuring health equity. By identifying the conditions, practices, and policies that allow the continuation of these differences in health outcomes, we can better identify the changes needed to create a healthier community for all our citizens.

Community Engagement and Transparency

We are pleased to share with our community the results of our CHNA. The following pages offer a review of the strategic activities we have undertaken over the last three years, as we responded to specific health needs we identified in our community. Although the major impact of the COVID-19 pandemic is behind us, it has taken extra effort and time to regain the momentum in creating a mentality of health and wellness education and prevention.

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 every citizen of our rural Mississippi community. Also, review our activities that were in response to the needs identified in 2022.

The Community Health Needs Assessment, Continued

Data Collection

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

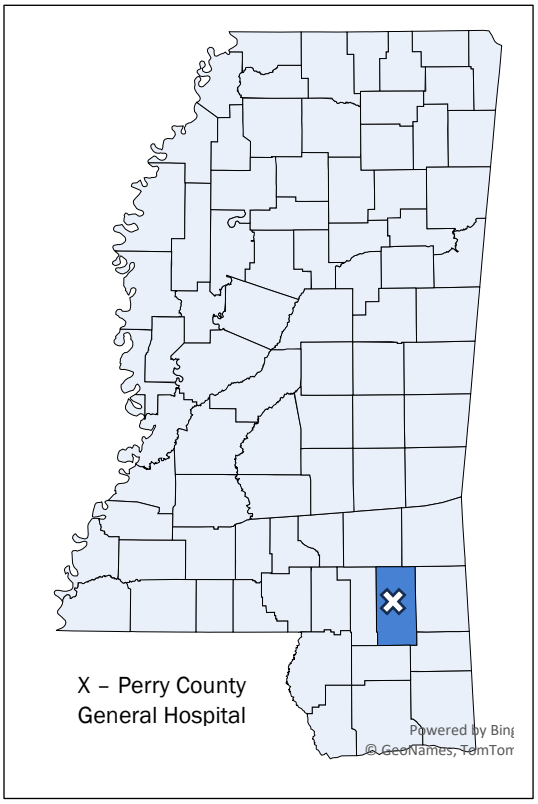
Secondary Data Sources

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

About The Community

Service Area

Primary: Perry County



The County

Perry County is located in south Mississippi, one county west of Alabama and only two counties north of the Gulf of Mexico. The county has a total area of 650 square miles, of which 647 square miles is land and 3.0 square miles (0.5 percent) is water. The county has a declining population. The greatest decrease in recent years was between 2019-2020, when the population declined 4.4 percent.

Communities

Towns

- Beaumont
- New Augusta (County Seat)
- Richton

About the Community, Continued

Demographics

Perry County 2024

Population:	11,268
Racial Mix:	
White	77%
African American	19%
Native American	0%
Asian	0%
Other	1%
Hispanic	2%
Non-Hispanic	98%

Perry County 2022

Population:	11,511
Racial Mix:	
White	77.70%
African American	18.20%
Native American	0.40%
Asian	0.30%
Other	0.50%
Hispanic	1.30%
Non-Hispanic	98.70%

Perry County		
Population		**11,268**
Racial Mix	White	8,648
	African American	2,096
	Hispanic	200
	Asian	29
	American Indian	47
	Pacific Islander	4
	2 or more	377
	Other	67
Median Household Income		**$49,641**

	Mississippi	Perry County	United States
Median Age	39.6	44.4	38.9
Median Household Income	$55,017	$49,641	$77,540
Poverty Level	19.40%	18%	11.50%

For the above 3 charts, SOURCES Source: U.S. Census Bureau, 2020 Source: U.S. Census Bureau, American Community Source: ESRI Community Profile

About the Community, Continued

More about the Residents of Perry County

Percent of residents who do not have access to broadband:	13%
Households receiving food stamps/SNAP:	882
Households with 1+ persons with a disability:	2,393
Households without a vehicle:	89
Percent of unemployment as of 11/2024 ** :	6%
Percent living alone:	28%

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

Population:	11,268
Percent of adults that report fair to poor health	23.80%
Adults who didn't finish high school	14.06%
Unemployment	4.80%
Obesity prevalence	42.00%
Diabetes prevalence	12.70%
Excessive drinking	13.89%
Smoking	23.60%
Life expectancy	71.01
Percent of households with at least 1-4 housing problems (overcrowding, high costs, lack of kitchen/plumbing)	8.16%

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. Additional outreach included boosted posts on the Hospital's social media platforms, and targeted outreach to local stakeholders. Hospital employees also received the survey through an internal mass email. The responses were analyzed and used to help determine key health priorities and inform the development of new initiatives.

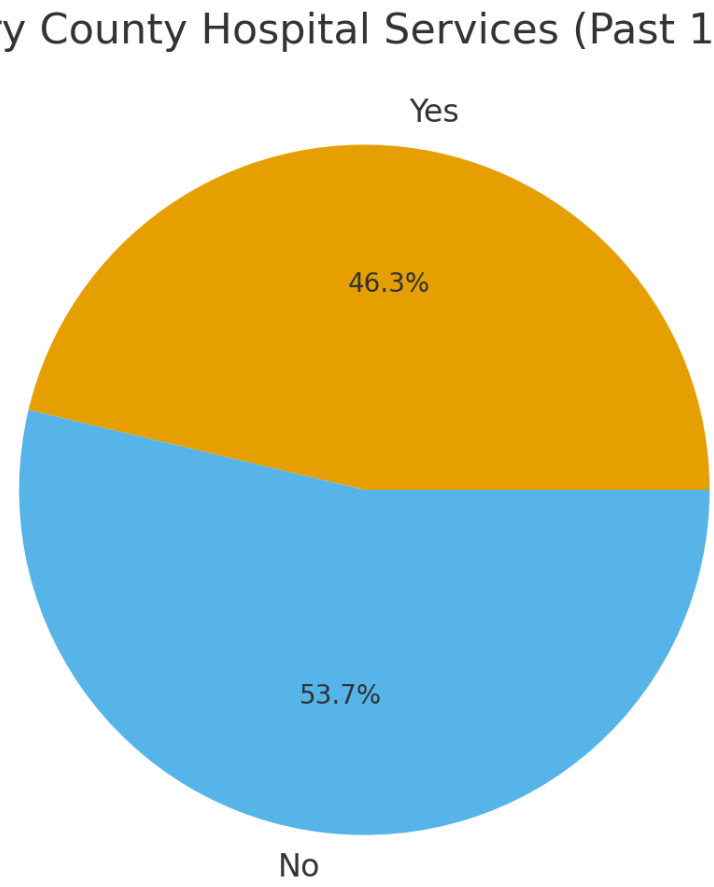
These questions are meant to gather insights into health status, behaviors, needs, and satisfaction levels of a community. The twenty-three responses can help healthcare providers and public health officials prioritize resources in areas most needed by the community. Thank you for taking this survey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



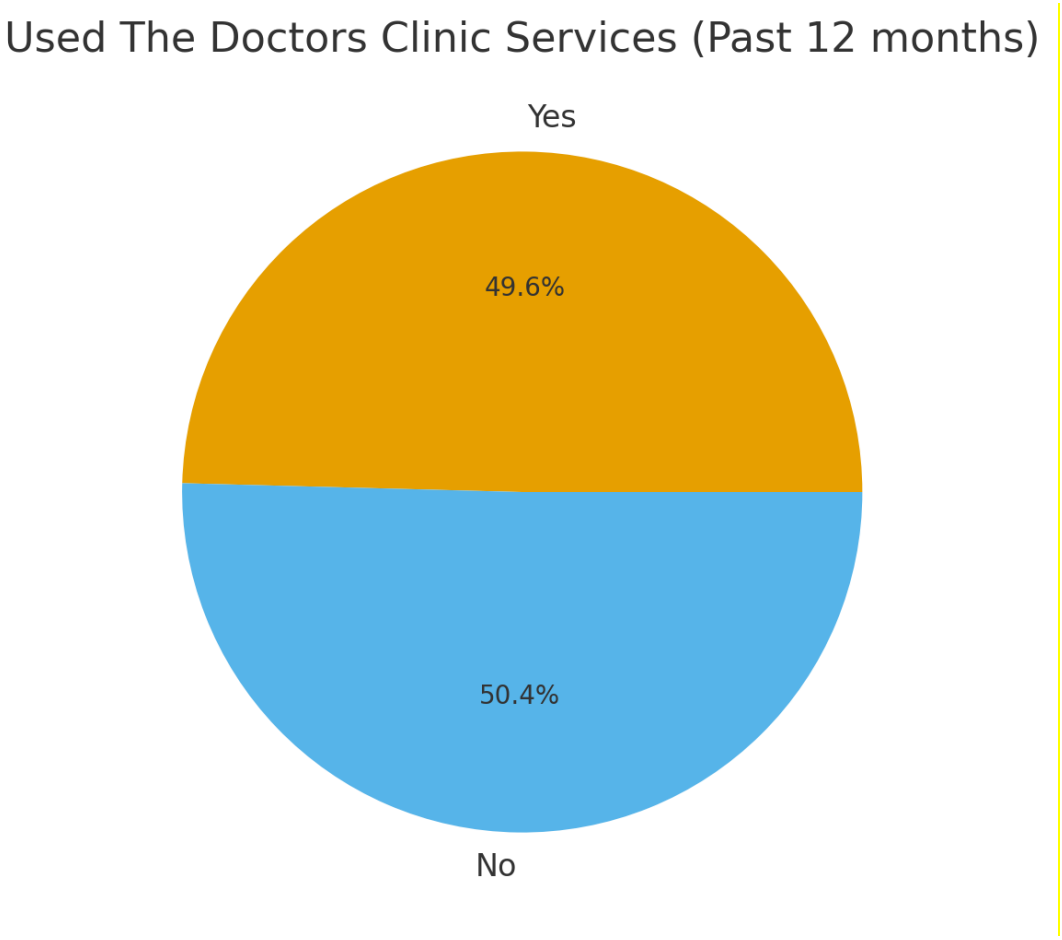
Community Input, Continued

Perry County General Hospital Community Survey 2025:

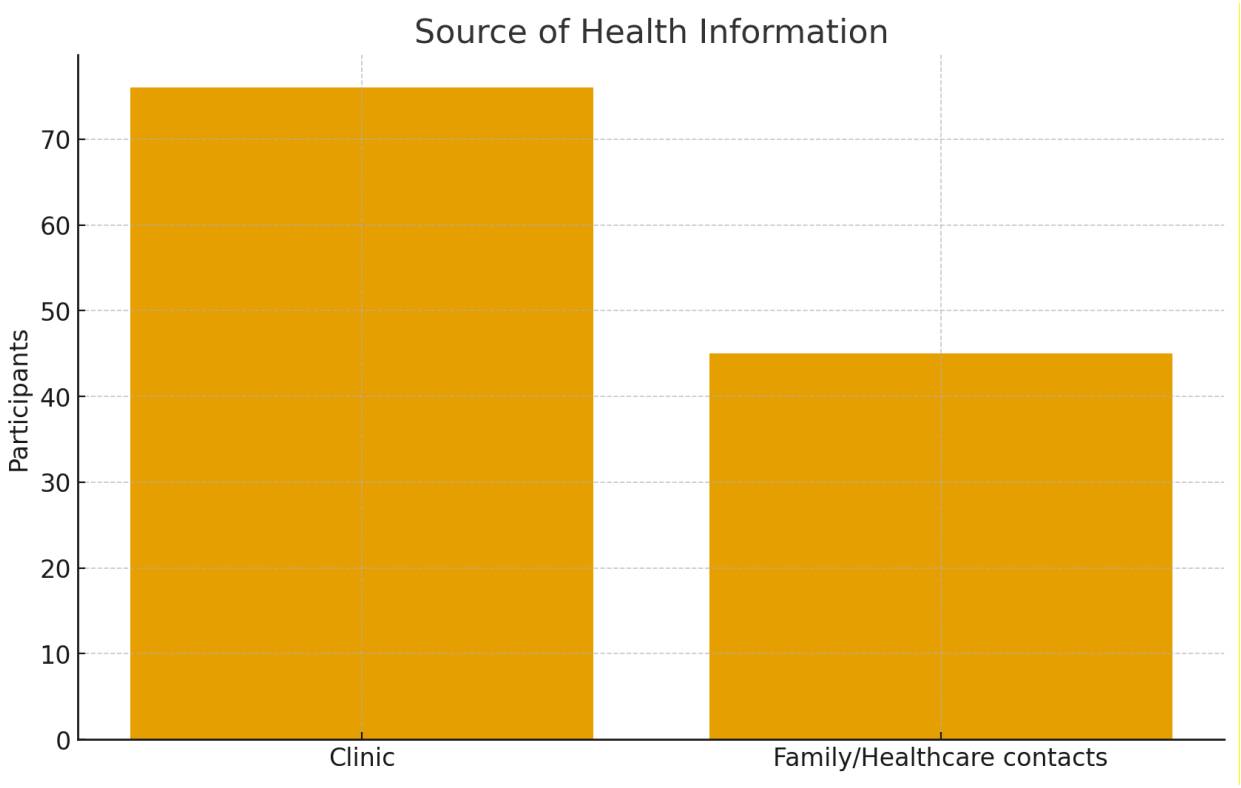
A total of 121 community members participated in the survey. The results provide insights into healthcare usage, self-reported health status, identified needs, and health-related behaviors in the county.



Community Input, Continued



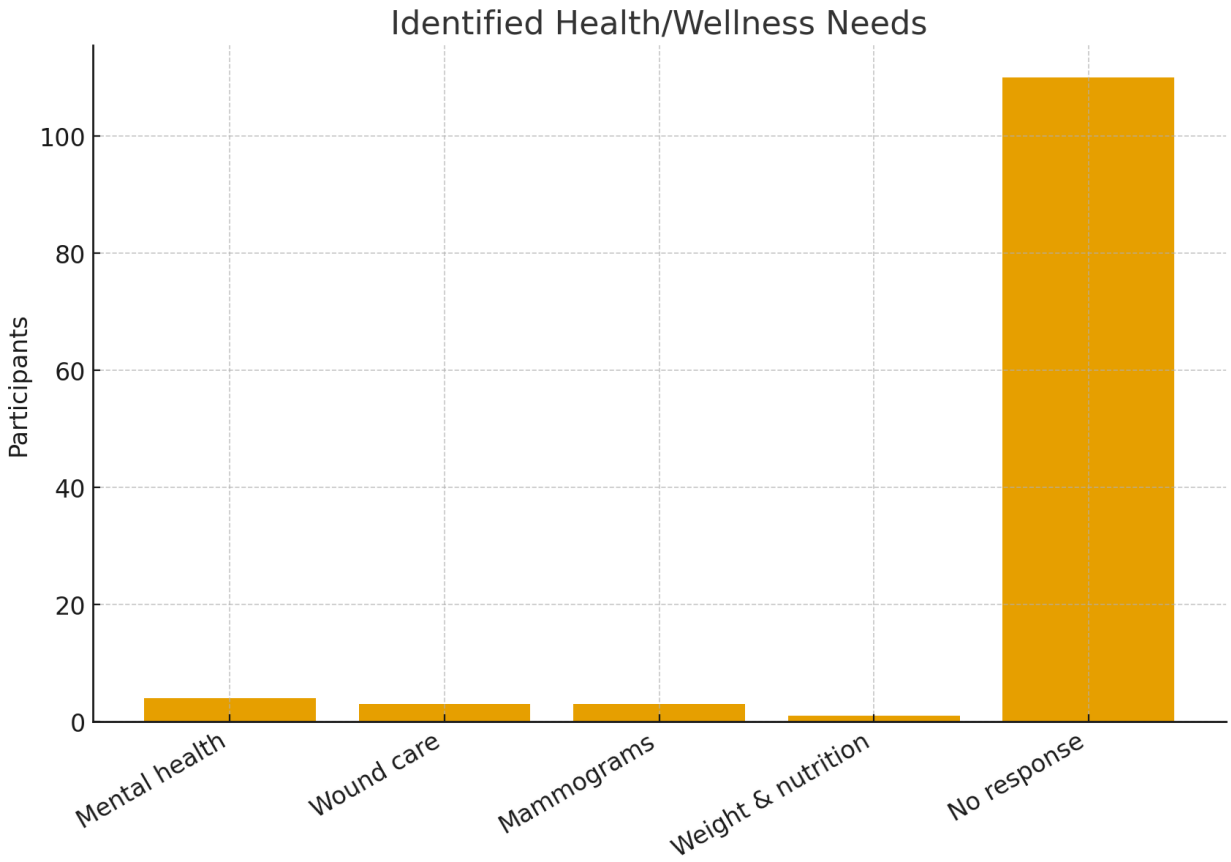
Community Input, Continued



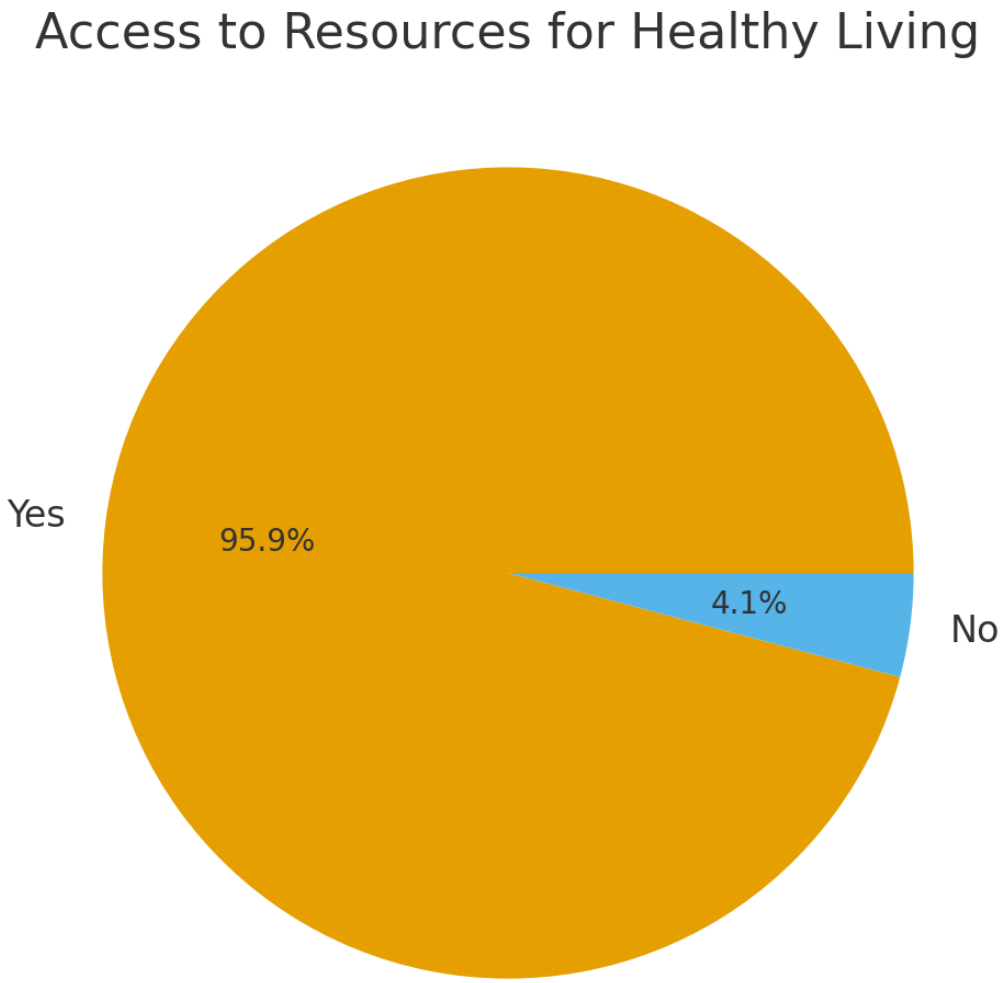
Community Input, Continued



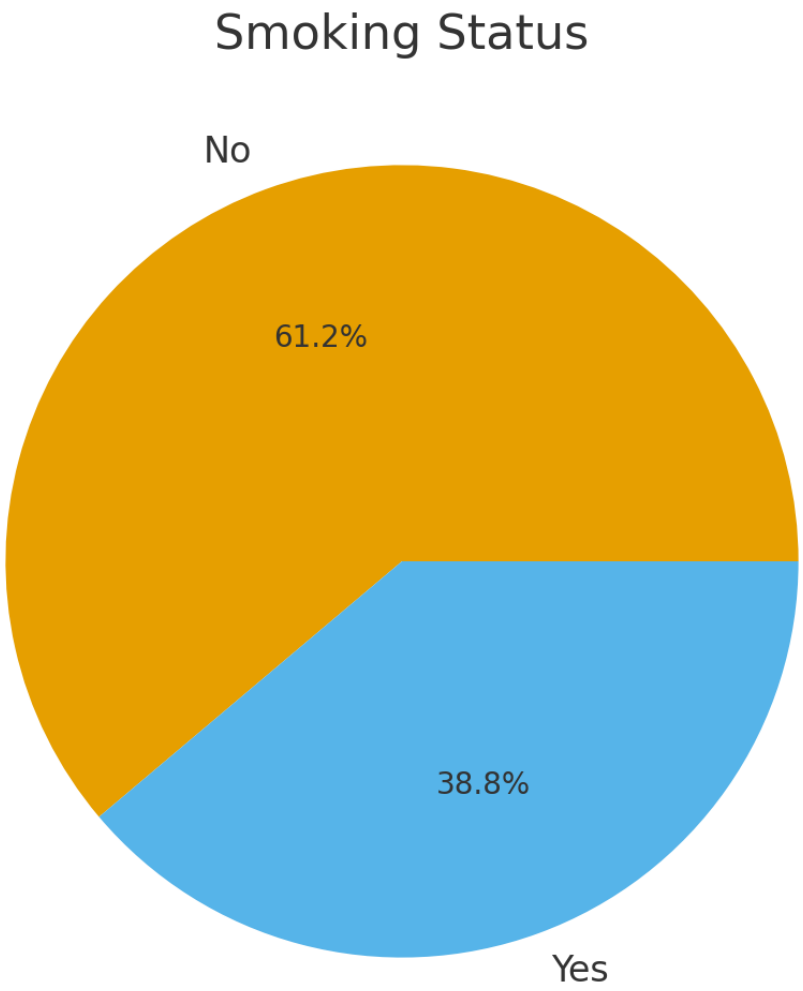
Community Input, Continued



Community Input, Continued



Community Input, Continued



Key Findings

- 46 percent used Hospital services in the past 12 months, while 54 percent did not.
- 50 percent used The Doctors Clinic services in the past 12 months.
- The Clinic is the primary source of health information (63 percent).
- 96 percent rated their health as good or great, only 4 percent rated poor.
- Mental health, wound care, and mammograms were the most mentioned needs.
- 96 percent feel they have access to needed resources for healthy living.
- 61 percent are nonsmokers, while 39 percent report smoking.

Community Input, Continued

Community Health Needs Assessment Steering Committee

- **Dr. Mary Andrews,** Medical Doctor/*Family Medicine*
- **Kaneesha Green,** Staff Development-Quality Coordinator
- **Shenika Russell,** Perry County General Hospital-DON/Administrator
- **Jamie Taylor,** Administrative Secretary



Community Input, Continued

Participants in the CHNA Focus Group

- **Dr. Mary Andrews,** The Doctor's Clinic-Medical Doctor/*Family Medicine*
- **Shana Barnes,** Perry County General Hospital – E.R. & Trauma Nurse
- **Chase Dewitt,** EMA Director Perry County
- **Kaneesha Green,** Perry County General Hospital – Staff Development – Quality Coordinator
- **Oma Hibler,** Founder/CEO Community Development, Inc.
- **Author Mitchell,** Community Development, Inc. Behavioral Health & Marketing Manager
- **Brittany Peirce,** Perry County General Hospital – Infection Prevention Nurse
- **Shenika Russell,** Perry County General Hospital – DON/Administrator
- **Brandi Stanford,** Mississippi Dept. of Human Services – Community Health Director
- **Jamie Taylor,** Perry County General Hospital – Administrative Secretary

Invited but Unable to Attend

- **Brittany Laird,** Clinic Director – The Doctor's Clinic
- **Mike Malone,** Perry County Coroner
- **Scott Morris,** Pastor – First Assembly of Richton
- **Bo Ruffin,** Mayor of Richton, Mississippi



Social Determinants of Health

Social Determinates 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.
- **Healthcare 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 Perry County General Hospital: 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 extends 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**

   Hospitals must 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 communicating 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.

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. Hospitals must 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 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.

6. Hospitals can act as conveners, bringing these groups together to align efforts, share data and coordinate resources.

Social Determinants of Health, Continued

Based on demographic data and feedback from community groups and stakeholders, Perry County faces several important social determinants of health that influence population outcomes, including education, income, social composition, healthcare access, and housing.

Social determinants of health in Perry County are shaped by low income, educational gaps, deficient housing and broadband infrastructure, elevated rates of poverty and chronic disease, and limited access for certain groups to health resources. These factors create vulnerabilities, especially for older adults, low-income populations, and those facing transportation or information barriers.

Key Types of Social Determinants Identified

Education

- School district ratings in Perry County improved from C to B between 2019-2024, but challenges remain.
- About 7 – 14 percent of adults did not finish high school, indicating persistent educational gaps that can affect employment and health literacy.
- Education strongly affects health behaviors, access to information, and employment opportunities in the community.

Income and Poverty

- The median household income is $49,641, lower than state ($55,017) and national ($77,540) averages.
- Around 18 percent of residents live below the poverty line—higher than the national rate but slightly below the Mississippi average.
- Poverty increases risk for poor health due to limited access to nutritious food, transportation, and healthcare services.

Demographics

- The population is predominantly White (77 percent) and African American (19 percent), with small percentages of other racial groups.
- The median age is higher than the state and national averages, indicating an older population potentially more susceptible to chronic diseases.

Housing and Infrastructure

- 8.16 percent of households have at least one significant housing problem such as overcrowding, high costs, or insufficient kitchen/plumbing.
- 28 percent of residents live alone, increasing risks of social isolation.
- 13 percent of residents lack access to broadband internet, posing challenges for telehealth and health information dissemination.
- 89 households do not have a vehicle, limiting access to services and healthy food options.

Social Determinants of Health, Continued

Health Behaviors

- Smoking prevalence in Perry County is 23.6 percent, much higher than the local survey's self-report of 39 percent indicating likely under-reporting in wider datasets.
- Obesity (42 percent) and diabetes (12.7 percent) rates are very high, reflecting poor health behaviors driven by environmental and economic factors.
- Excessive drinking is reported by 13.89 percent of adults.

Access to Healthcare and Healthy Resources

- 46 percent of residents used Hospital services, and 50 percent used local clinic services in the past 12 months.
- The primary source of health information is local clinics and family healthcare contacts (63 percent).
- Most residents (96 percent) reported having access to resources for healthy living, but the remaining 4 percent represent pockets of unmet need.

Food Security

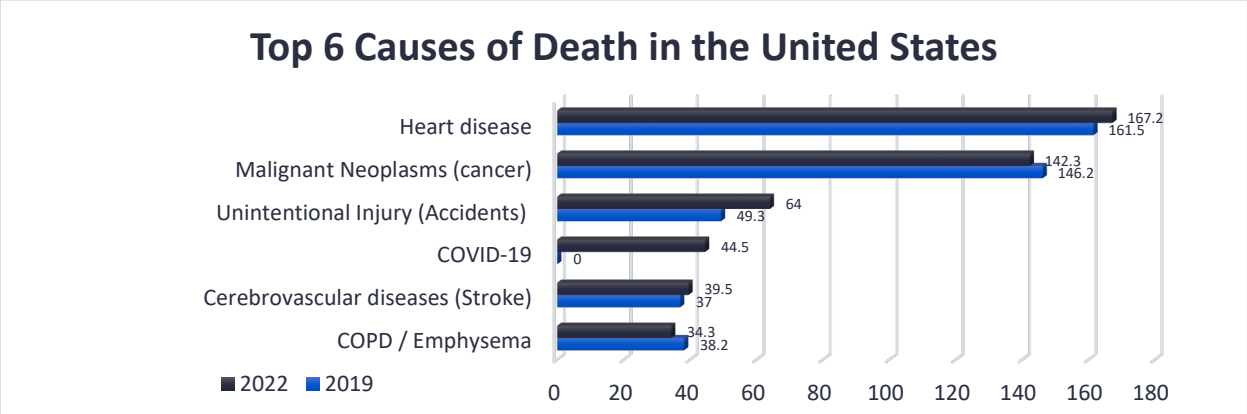
- 882 households receive food stamps/SNAP, underlining ongoing challenges in food access and nutrition especially for vulnerable populations.

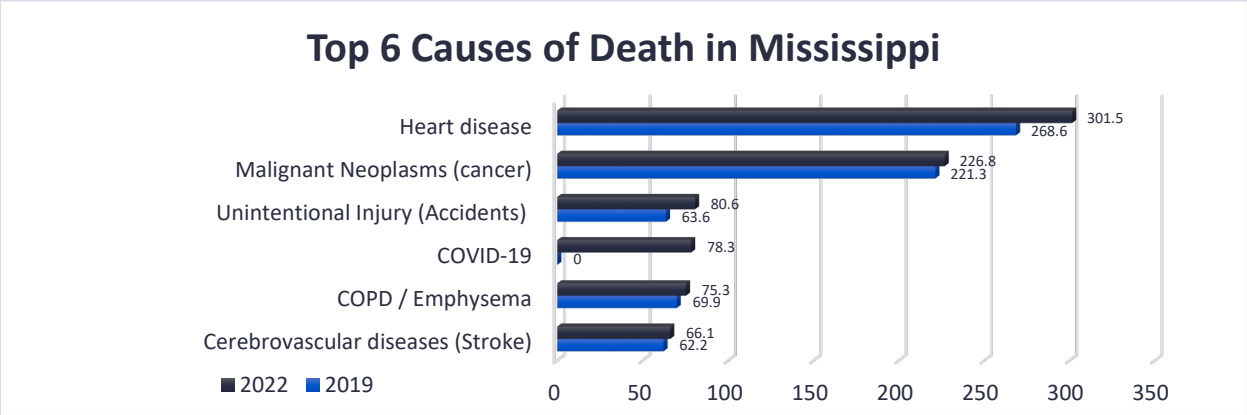
Community Health Status

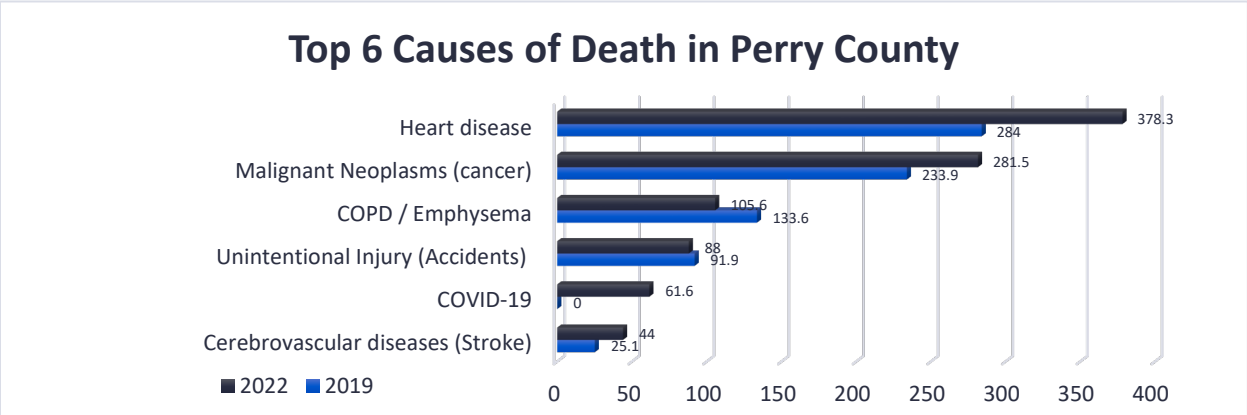
- Life expectancy is 71.01 years — lower than national averages, reflecting the cumulative impact of these social determinants.
- 23.8 percent of adults rate their health as fair to poor, matching survey self-ratings where 4 percent report poor health.
- Mental health, wound care, and mammograms emerged as major wellness needs in the local survey.

Causes of Death Analytics

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







Causes of Death Analytics, Continued

Heart Disease, Cancer, and Accidental Deaths Breakdown

(based on per 100,000)

Heart Disease

Death Rate:	378.3
Ischemic heart disease	76.74%
Cardiomyopathy	6.98%
Heart failure	4.65%
Hypertensive heart disease with or without renal disease	2.33%
Diseases of pulmonary circulation	2.33%
All other heart diseases	6.98%

Cancer

Death Rate:	306.9
Trachea, bronchus, and lung	45.85%
Female breast	11.24%
Leukemia	8.60%
Pancreas	5.73%
Cervix uteri	5.64%
Colorectal	2.87%
Melanoma of skin	2.87%
Bladder	2.87%
Kidney and other unspecified urinary organs	2.87%
Brain	2.87%
All other cancers	8.60%

Accidental

Death Rate:	88.0
Motor vehicle	50.00%
Poisoning-drugs	20.00%
Falls	10.00%
Other accidents	20.00%

2022 Needs

Our Response to the 2022 Needs

Initiatives

Heart Disease is the leading cause of death in Perry County. Perry County Hospital along with the Heart Association in an effort to improve Heart Health in Perry County will provide education to the community and surrounding areas that Perry County Hospital serves.

Target Population

Those residents at greatest risk of developing Heart Disease, and low income, medically underserved, uninsured in Perry County

Goals/Outcome

To decrease the instances of death due to Heart Disease and improve awareness by educating on the preventable risk factors.

Process/Time Frame/Location

We plan to continue with our annual Health/screening fair as an outreach to educate the community about Heart Health. We are also getting involved with the community including the schools to educate and promote Heart Health and start better habits for residents of our community at an early age. Social media posts that encourage residents to come by the Hospital or the clinic to get blood cholesterol levels checked and take steps to lower it if a risk. Over the next three years, we plan to be a part of the Great American Heart Walk sponsored by the American Heart Association by coordinating a Heart Walk right here in Perry County.

Measure of Success

Five percent decrease of diagnosis among residents, annually. Reach more than 90 percent of residents and dependents via health fair, heart walk, education, and Hospital/Clinic visits.

Collaborating Partners

- The Doctors Clinic
- Hattiesburg Clinic in Richton
- Perry County Sheriff's office
- Perry County Schools
- Richton School
- American Heart Association
- Keith Evans (Alderman for Richton)

Our Response to the 2022 Needs, Continued

Response

Over the past three years, PCGH staff have been actively involved in the community by educating on preventable measures to heart disease. Heart Healthy fairs were held to promote heart healthy lifestyles including exercise, healthy diet and regular checkups. The local clinics assisted by providing health screenings which included blood pressure checks, blood sugar checks and physical activity levels. PCGH also partnered with statewide entities to host health fairs that reached hundreds of county and noncounty residents. Staff were able to visit local schools and tailor education to the youth to instill heart healthy habits. Social media posts and hand delivered flyers attributed to the success of reaching community residents.

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2025 Needs

Responding to Our Community

2025 Strategic Initiatives

Perry County General Hospital is committed to improving the health and well-being of our residents. Based on community feedback and identified needs, Perry County General will focus on the following initiatives in 2025:

Initiative 1: Collaboration with Mississippi State Department of Health

During a CHNA meeting, we identified that a significant contributing factor to the health challenges faced in our rural communities is the insufficient awareness of available information, resources, and healthcare services.

Target Population

This initiative will specifically target underserved populations within our community, including low-income families, seniors, and individuals facing transportation challenges. By focusing on these groups, we can tailor our services to address their unique barriers and ensure that they receive the care they need.

Goals/Desired Outcome

Our goal is to expand access to healthcare services throughout our community, utilizing the MDHS's resources and expertise. We aim to increase the number of residents utilizing health services over the next year. Specifically, we will provide avenues for residents to engage with healthcare through phone consultations, walk-in services, scheduled appointments, and counseling sessions. Success will be measured through participation rates, patient satisfaction surveys, and improvements in health outcomes among participants.

Measure of Success:

Success will be evaluated through a range of metrics, including the number of residents accessing services, appointment frequency, and overall patient satisfaction. Additionally, we will track our progress through a consistent open line of communication between Perry County General Hospital and MDHS to ensure we are collectively making progress and exchanging ideas.

Collaborating Partners:

Our collaboration with the Mississippi Department of Health is pivotal to the success of this initiative. Their expertise in public health policy, resources, and community health strategies will guide our efforts and ensure that we provide effective services that reach all areas of our community.

The Heart Health Initiative is a vital program designed to address the increasing prevalence of cardiovascular diseases within our community. Recent data indicates that local rates of heart disease continue to increase, highlighting the urgent need for preventive measures. In response, the steering committee has prioritized this initiative to promote heart health through routine check-ups, education, and community engagement.

Responding to Our Community, Continued

Initiative 2: Healthy Heart Initiative

Target Population

This initiative will specifically target as many residents as possible, but specifically those at higher risk due to factors such as obesity, family history, or sedentary lifestyles. By narrowing our focus, we can tailor our educational materials and workshops to address the unique challenges faced by this portion of our community, ensuring more effective outcomes.

Goals/Desired Outcome

Our primary goal of the Heart Health Initiative is to foster a culture of preventive health care, particularly focusing on heart health. We aim to achieve an increase in the number of residents participating in routine check-ups over the next year. By hosting heart health fairs, we will not only provide screenings but also deliver educational resources on nutrition, exercise, and overall wellness.

Process/Timeframe/Location

We will hold a series of heart health fairs held annually at Perry County General Hospital and other accessible community locations, including libraries and schools. These fairs will provide free health screenings, nutritional workshops, and exercise demonstrations, making it easy for residents to engage in their health actively. Additionally, we will offer ongoing services via phone consultations, walk-in appointments, and counseling sessions to ensure that all residents have equal access to health resources.

Measure of Success

Success will be measured by the number of residents attending check-ups and health fairs, engagement levels in educational sessions, and follow-up assessments showing improved health outcomes. We anticipate that within the years, not only will we see increased participation in routine health checks, but also a notable reduction in the number of residents reporting high blood pressure and cholesterol levels.

Collaborating Partners:

It is important to give credit to community partners that contributed to the success of the initiative.

Thank You

This comprehensive assessment will allow us to better understand the needs and concerns of our community. Perry County Hospital is proud to be part of the Forrest Health System where we truly believe we are "our brother's keeper." As always, through this commitment to compassionate and mission-focused healthcare, we are honored to work closely with our collaborative partners in our community to provide outstanding healthcare and create a healthier world for the residents of Perry County and surrounding areas.

Our sincere thanks go to all those who took part in this process. We are especially grateful to the members of the Forrest General Board of Trustees and the health system's leadership. Through their guidance we are able to continue our mission in our wonderful rural community in Mississippi.

Our CHNA Steering Committee members and all those who participated in our Community Focus Group, either by their attendance at the Forum or by conversations, deserve a special thanks for their time, support, and insight. Their input has been invaluable.

And last, but perhaps most importantly, to the general public who realizes their voice does matter. Thank you for completing our Community Health Survey, reading our latest Community Health Needs Assessment, and for supporting our mission of care in Perry County.

References

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