



JOHNSON MEMORIAL HEALTH SERVICES

2025 Community Health Needs Assessment

OVERVIEW

In the summer of 2025, Johnson Memorial Health Services (JMHS) conducted a Community Health Needs Assessment (CHNA) for the residents of City of Dawson and several townships: Baxter, Cerro Gordo, Hamlin, Lac qui Parle, Maxwell, Providence, and Riverside.

The CHNA was conducted with assistance from Eide Bailly LLP, an accounting and consulting firm specialized in financial, operational, and strategic consulting with healthcare organizations.

A CHNA is a tool used to help communities assess their strengths as well as their weaknesses when it comes to the health of the community. It is also the foundation for improving and promoting the health of the community. The process helps to identify factors that affect a population's health and determines the availability of resources within the community to adequately address these factors and any additional health needs.



OVERVIEW CONTINUED

Although JMHS, as a governmental hospital, is not required to complete a Community Health Needs Assessment (CHNA), the executive team views this process as an important opportunity to gather feedback from the community on health needs and to inform the organization's strategic planning efforts.

The CHNA process fulfills the requirements set forth by Internal Revenue Code 501(r)(3), a statute established within the Patient Protection and Affordable Care Act, which requires not-for-profit hospitals to conduct a CHNA every three years. This report incorporates both qualitative and quantitative information from local, state, and federal sources. In addition, input was gathered from individuals representing a broad range of community interests, including those with public health expertise and those serving medically underserved and vulnerable populations.

No public feedback was received on the 2020 CHNA, but any input would have been considered in the development of this report. Following completion of the CHNA, JMHS will develop an implementation plan to outline how it and other community partners will address the identified needs.

JOHNSON MEMORIAL HEALTH SERVICES OVERVIEW

- Johnson Memorial Health Services is a hospital district consisting of the City of Dawson and seven townships: Baxter, Cerro Gordo, Hamlin, Lac qui Parle, Maxwell, Providence, and Riverside.
- JMHS consists of a 15-bed Critical Access Hospital, 2 Rural Health Clinics (Dawson and Boyd), a 14-room Assisted Living, and a 56-bed Care Center.
- JMHS has 218 employees and is the largest employer in Dawson.
- **Our Mission** - To provide high-quality, compassionate healthcare, close to home
- **Our Vision** - We inspire change and make a healthy difference in people's lives
- **Our Values** - Together. Kindness. Trust.

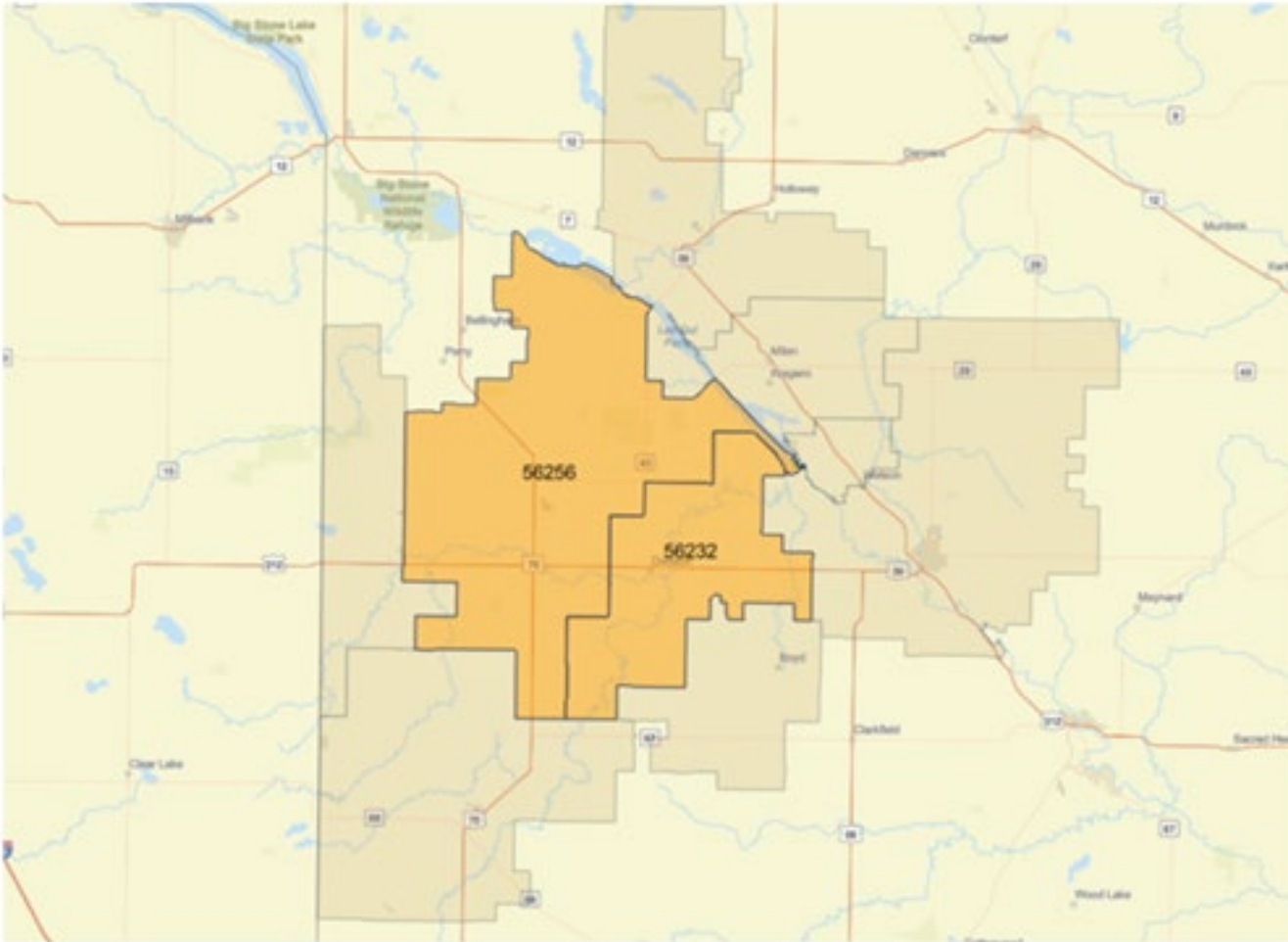
JOHNSON MEMORIAL HEALTH SERVICES OVERVIEW CONTINUED

Johnson Memorial Health Services provides the following services:

Ambulance	Annual Exams	Assisted Living	Medical Weight Loss
Wound Care	Cardiac Rehabilitation	Cardiology	Care Center
Cataracts	Chronic Care	Clinic	Dermatology
Endocrinology	ENT	Hospice	Hospital
Immunizations	Infectious Disease	General Surgery	Laboratory Services
Mammography	Massage Therapy	MedSafe	Mental Health Services
OB/GYN	Occupational Therapy	Oncology & Hematology	Orthopedics
Ophthalmology	Outreach Services	Physical Therapy	Pulmonary Rehab
Radiology	Sleep Disorders	Speech Therapy	Sports Physicals
Surgical Procedures	Swing Bed	Telehealth	Ultrasound



COMMUNITY OVERVIEW



- For this needs assessment, the primary service area (PSA) of the “community” is defined as the residents of the City of Dawson and Lac qui Parle County, noted in dark yellows on the map.
- The secondary service area (SSA), highlighted in lighter yellow, consists of residents from Yellow Medicine, Chippewa, and Swift Counties
- The service areas were determined based on JMHS discharge volume data.
- All residents of this region are considered members of the community, including low-income, medically underserved, and all races and ethnicities, regardless of ability to pay and/or whether they are eligible for financial assistance.

Source: Johnson Memorial discharge volume

COMMUNITY SERVED

	PSA		SSA		Minnesota		National	
	2024	2029	2024	2029	2024	2029	2024	2029
Total Population	2,708	2,645	16,268	15,801	5,767,691	5,860,625	336,661,764	344,877,902
Household Count	1,159	1,102	6,928	6,563	2,325,324	2,367,558	131,553,905	134,796,390
Male Population Count	1,488	1,467	8,655	8,562	2,947,967	2,989,828	169,171,827	172,953,611
Female Population Count	1,220	1,178	7,613	7,237	2,819,724	2,870,797	167,489,918	171,924,291
Median Age	42.6	42.0	41.4	40.0	38.2	38.9	38.2	38.6
Median Household Income	\$ 76,983	\$ 77,874	\$ 60,234	\$ 60,698	\$ 88,237	\$ 90,326	\$ 80,417	\$ 81,977
Unemployment	6.6%	3.4%	3.9%	3.8%	3.9%	3.9%	4.5%	5.2%

Source: Advisory Board

- **Population Trends** – PSA and SSA populations are projected to decline slightly by 2029 (-2.3% and -2.9%, respectively), while Minnesota and the U.S. are expected to see modest growth (+1.6% and +2.4%).
- **Median Age** – PSA and SSA median ages will remain higher than state and national averages, with slight decreases by 2029, compared to Minnesota and national median ages that are projected to increase slightly.
- **Median Household Income** – PSA income will grow modestly and remain below Minnesota but above SSA and national averages; SSA income will stay significantly lower, while Minnesota will continue to have the highest median income of all geographies.

COMMUNITY SERVED CONTINUED

Age Cohorts	2020	2024	2029
Total PSA Population	2,608	2,708	2,645
65+	341	368	339
75+	199	201	219
85+	141	123	130
Females 15-44	380	405	409
Adults 18-64	1,368	1,420	1,374

Income (Households)	2024(#)	2024(%)	2029(#)	2029(%)
Less than \$25,000	144	12%	138	13%
\$25,001-\$75,000	419	36%	394	36%
\$75,001-\$150,000	420	36%	393	36%
\$150,000-\$250,000	105	9%	108	10%
\$250,001+	69	6%	71	6%

Source: Advisory Board

- Within the PSA, seniors aged 65+ are declining 7.9% with 75+ and 85+ are projected to increase 8.9% and 5.7% respectively. Females aged 15-44, often considered those of childbearing age, are expected to remain relatively steady with overall adults aged 18-64 declining -3.2%.
 - A shifting age mix, fewer 65+ but more 75+, may signal the rising need of geriatric and chronic care.
 - Stable maternal/child health demand, and a slightly smaller working-age base can affect long term volumes.
- Household income distribution in the PSA is projected to remain stable between 2024 and 2029, with the majority (72%) of households earning between \$25,001 and \$150,000 annually.
 - Income levels influence access to healthcare, preventive services, and healthy living conditions. Lower-income households may face greater barriers to care, higher rates of certain health conditions, and increased reliance on community support programs.

COMMUNITY SERVED CONTINUED

- Lac qui Parle County, has a poverty rate of 9.5%, which is slightly above the Minnesota average (9.2%) but lower than the national average (11.1%).
- Within the SSA, poverty levels vary more widely: Chippewa County has a higher rate (13.5%) compared to both state and national averages, while Yellow Medicine (9.7%) and Swift (10.5%) have higher rates than Lac qui Parle and therefore the state and national average.

PSA	% of Persons in Poverty
Lac qui Parle	9.5%

SSA	
Chippewa	13.5%
Yellow Medicine	9.7%
Swift	10.5%

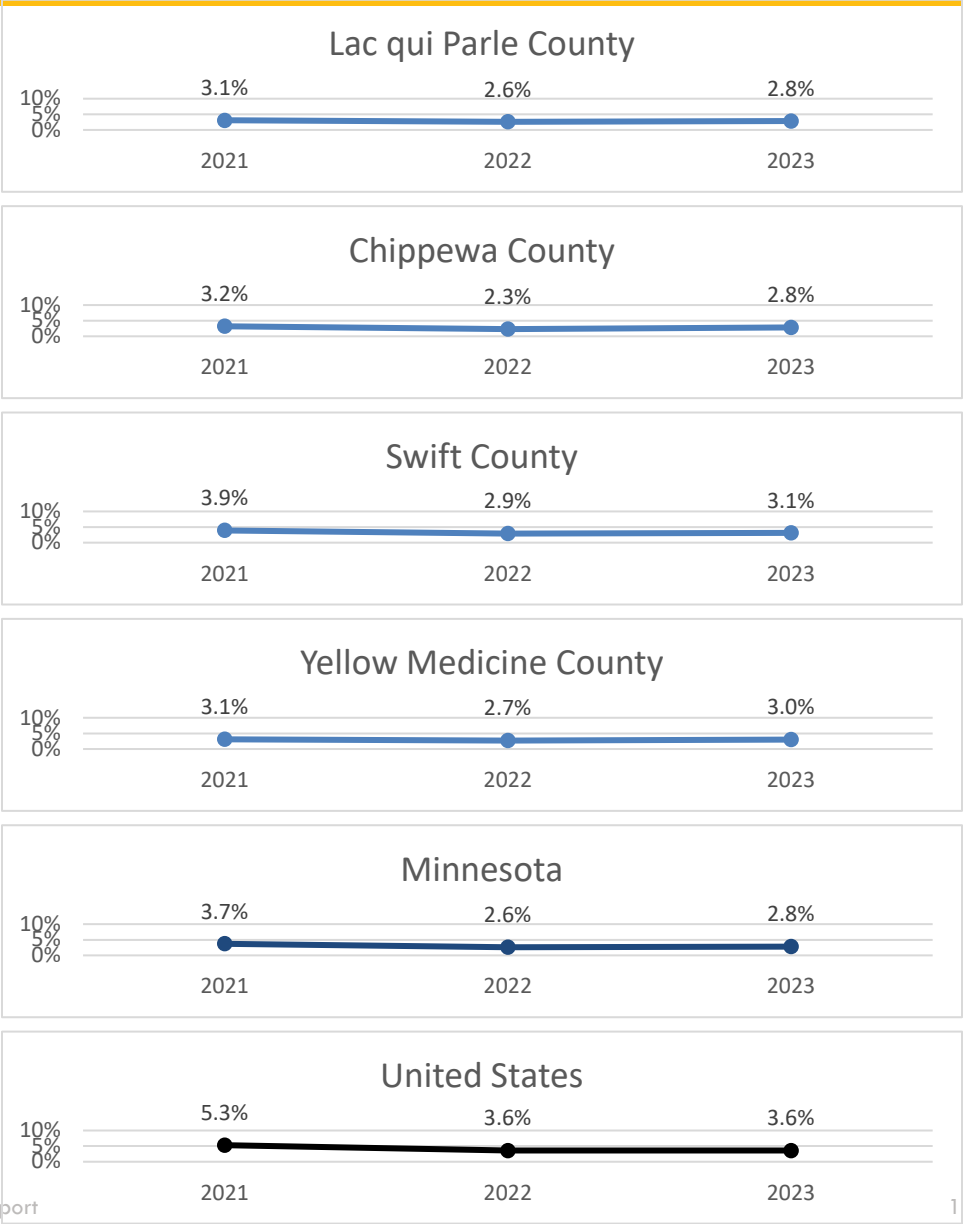
Minnesota	9.2%
United States	11.1%

SOURCE: US Census

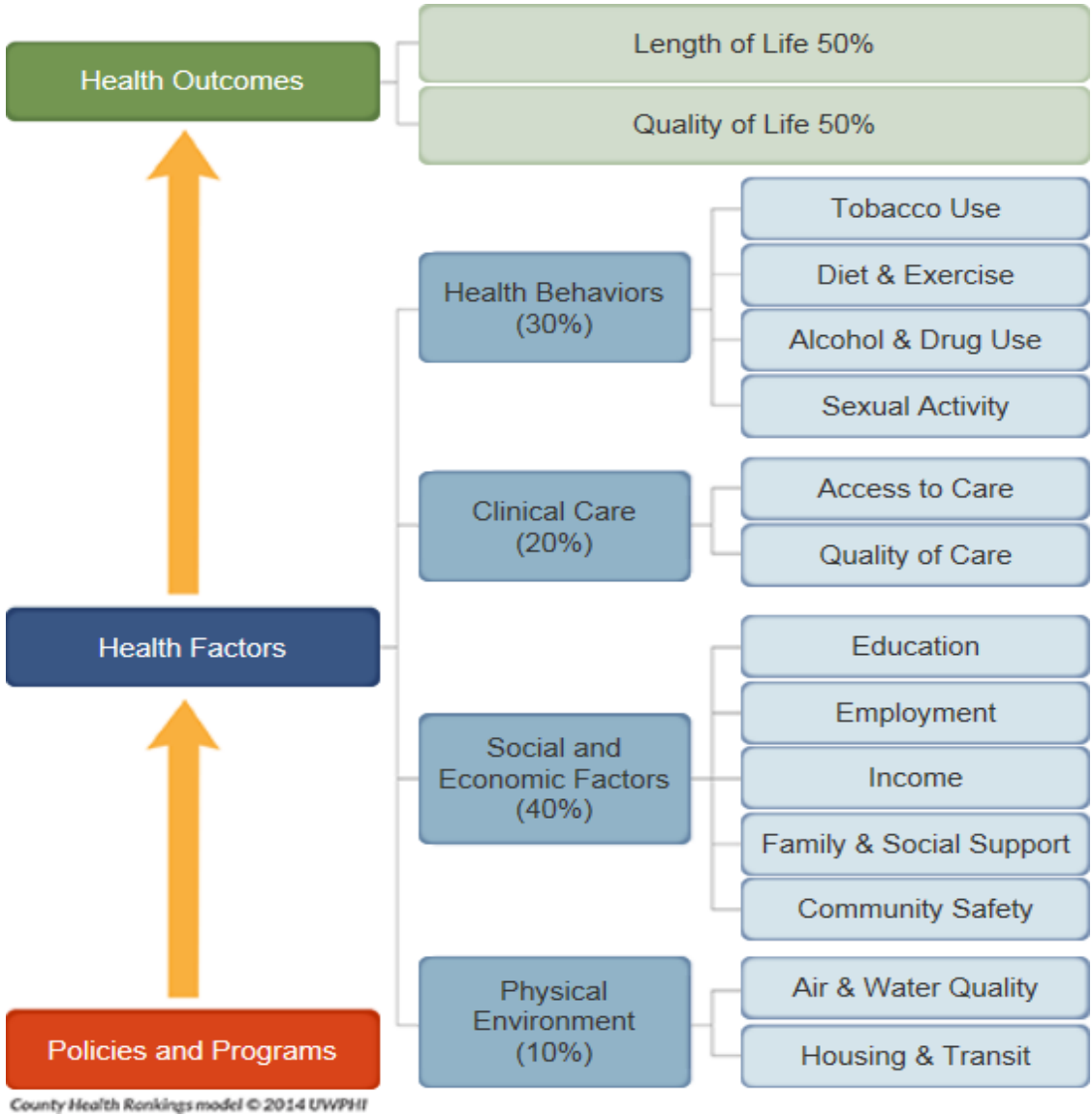
COMMUNITY SERVED

Unemployment Rate	2021	2022	2023
PSA			
Lac qui Parle County, MN	3.1%	2.6%	2.8%
SSA			
Chippewa County, MN	3.2%	2.3%	2.8%
Swift County, MN	3.9%	2.9%	3.1%
Yellow Medicine County, MN	3.1%	2.7%	3.0%
Minnesota	3.7%	2.6%	2.8%
United States	5.3%	3.6%	3.6%

- Lac qui Parle County consistently reported poverty rates similar to the Minnesota average (2.6–2.8% in 2022–2023) and notably lower than the U.S. rate (3.6%).
- SSA counties show slight variation, with Swift County generally reporting the highest unemployment rates (3.1% in 2023), while Chippewa and Yellow Medicine Counties are more in line with Lac qui Parle and state averages.



COUNTY HEALTH RANKINGS



County Health
Rankings & Roadmaps
A Healthier Nation, County by County

The County Health Rankings are based on a model of community health that emphasizes the many factors that influence how long and how well we live.

The Rankings use more than 30 measures that help communities understand how healthy their residents are today (**health outcomes**) and what will impact their health in the future (**health factors**).



COUNTY HEALTH RANKINGS – HEALTH OUTCOMES

This *heat map* shows county health rankings for health outcomes in 2024 (the lower the better).

Health outcomes tell us how long people live on average within a community, and how much physical and mental health people experience in a community where they live.

Rankings out of 87 Minnesota Counties

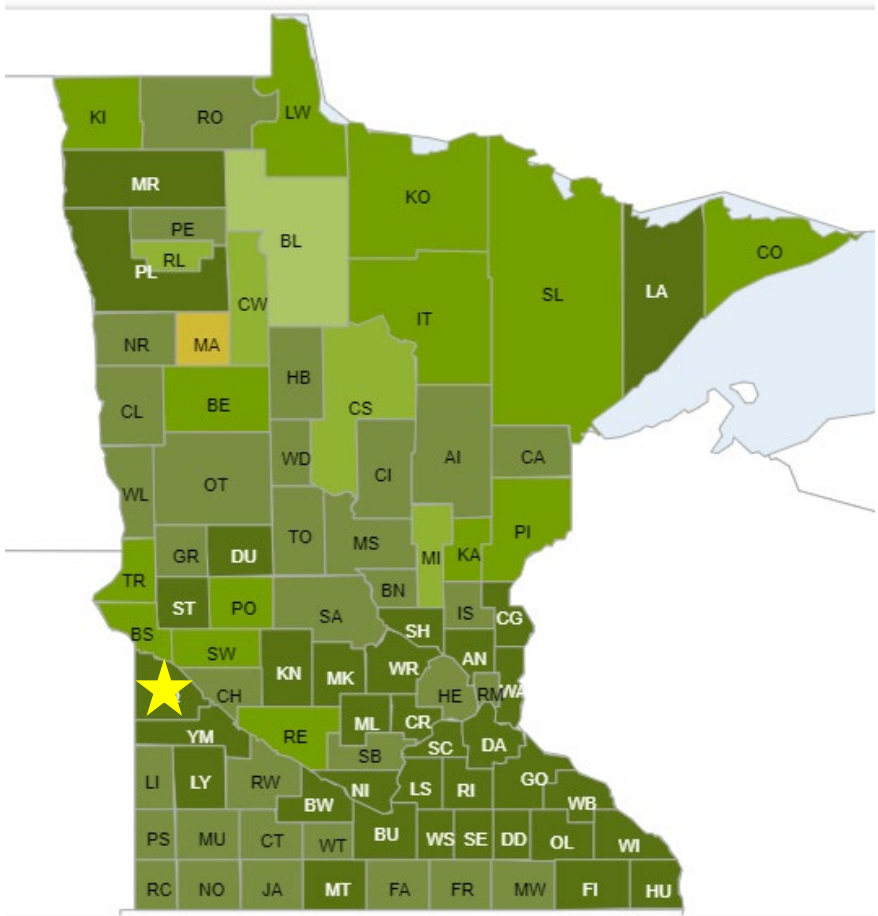
PSA	
Lac qui Parle	19

SSA	
Chippewa	66
Yellow Medicine	25
Swift	77



County Health Rankings & Roadmaps

2024 Health Outcomes - Minnesota



COUNTY HEALTH RANKINGS – HEALTH FACTORS

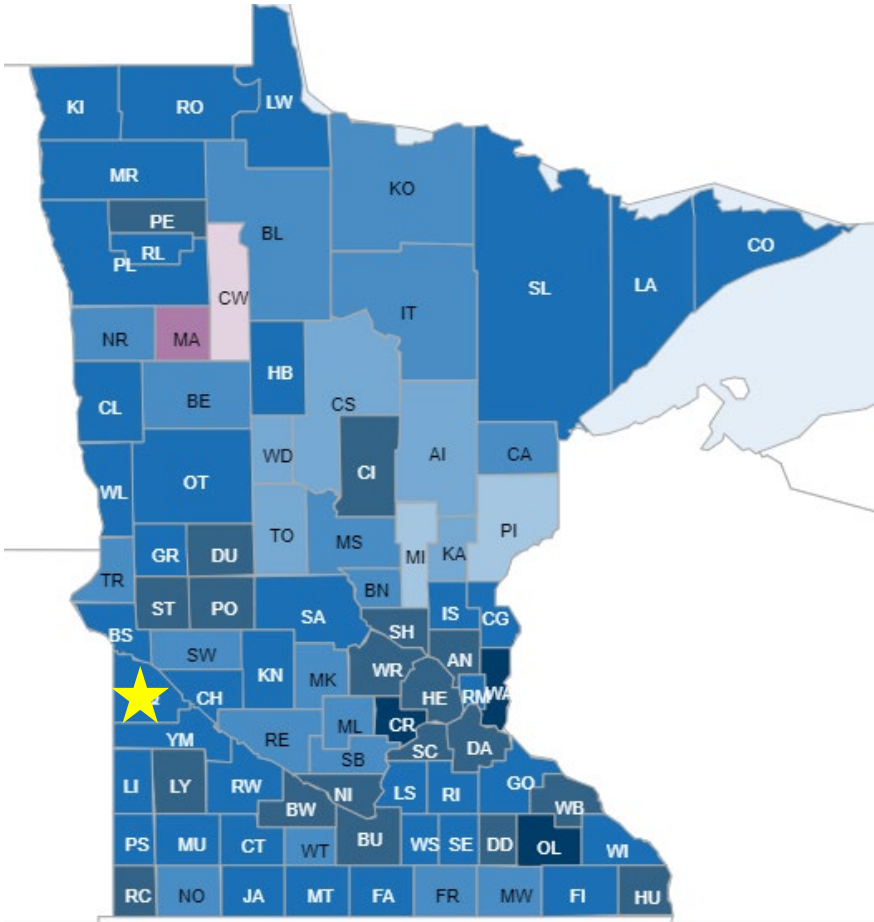
This *heat map* shows county health rankings for health factors in 2024 (the lower the better).

Health factors represent the things that influence how well and how long we live. These are things that we can improve to live a longer and healthier lives, and indicators of the future health of a community.



County Health
Rankings & Roadmaps

2024 Health Factors - Minnesota



Rankings out of 87 Minnesota Counties

PSA

Lac qui Parle	17
---------------	----

SSA

Chippewa	67
Yellow Medicine	68
Swift	70

HEALTH DATASET RESULTS

County Health Rankings uses a variety of techniques to identify the health factors for each county that seem to have the greatest potential opportunity for improvement, or assets a community may want to build on while also accounting for the relative influence of each measure on health outcomes.

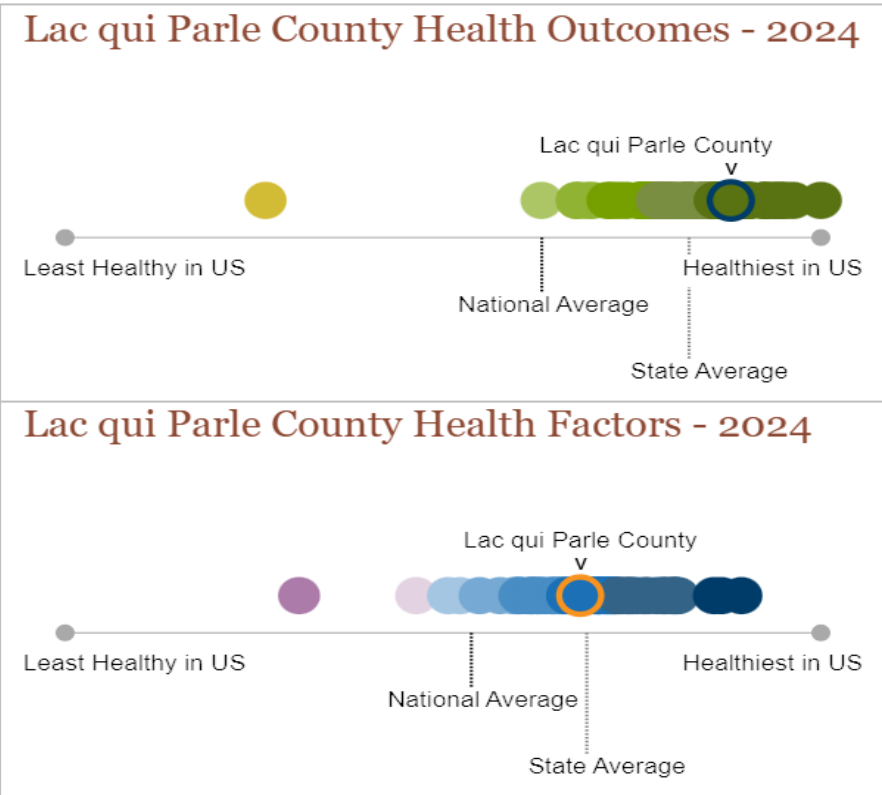
The County Health Rankings identify measures where there are meaningful differences versus your county's values and either your state average, the national average, or the state average in the best state through the "Areas to Explore" and "Areas of Strengths".



HEALTH DATA RESULTS – LAC QUI PARLE

Lac qui Parle County is fairing slightly better than the average county in Minnesota and better than the average county in the country for Health Outcomes. Lac qui Parle is fairing about the same as the average county in Minnesota for Health Factors, and better than the average county in the nation.

Lac qui Parle County has six areas of strength, where it is performing meaningfully better than the state and national averages, with two areas to explore for potential areas of opportunity or investment.

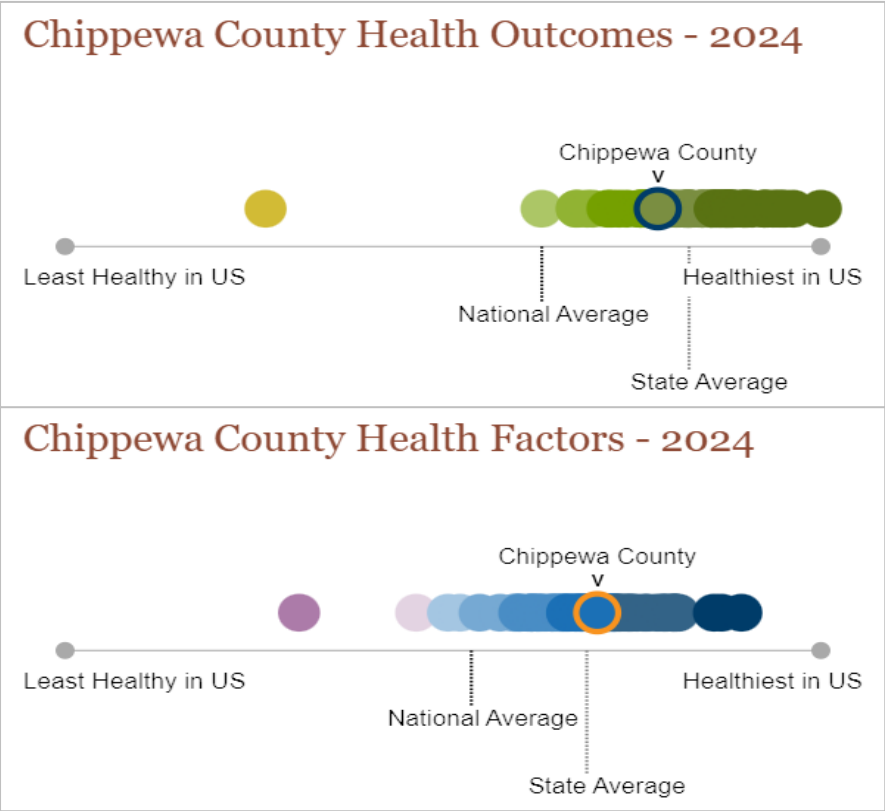


Lac qui Parle County	
Areas of Strength	Areas to Explore
Child Care Cost Burden	Access to Exercise Opportunities
Mammography Screening	Flu Vaccinations
Primary Care Physicians	
Severe Housing Problems	
Social Associations	
High School Completion	

HEALTH DATA RESULTS – CHIPPEWA

Chippewa County is fairing about the same as the average county in Minnesota and better than the average county in the nation for Health Outcomes and Health Factors.

Chippewa County has seven areas of strength, where it is performing meaningfully better than the state and national averages, with one area to explore for potential areas of opportunity or investment.

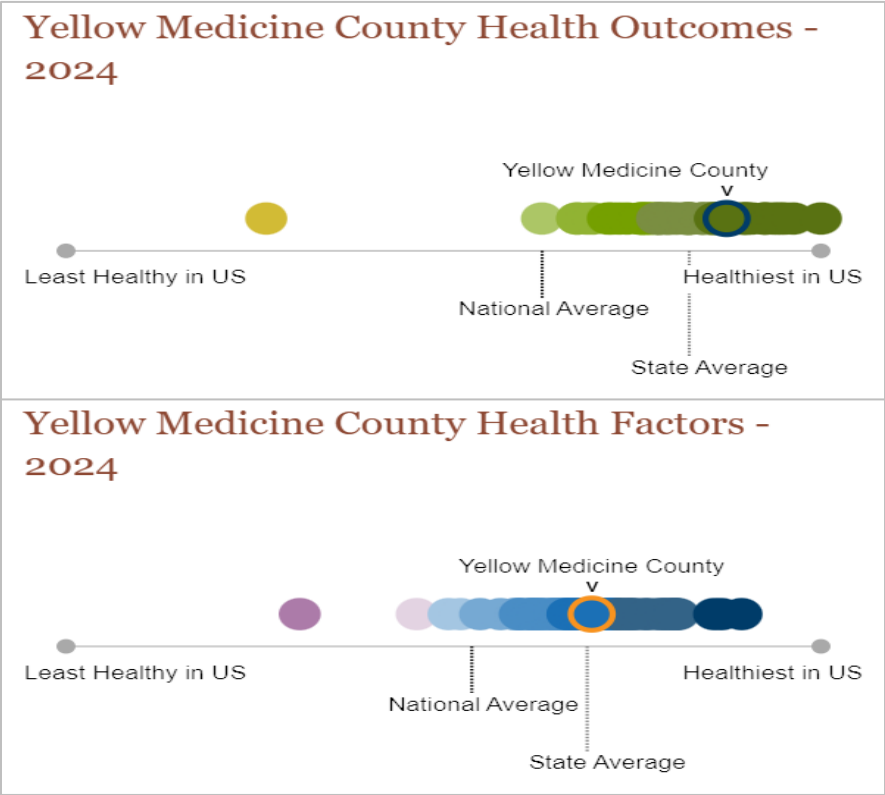


Chippewa County	
Areas of Strength	Areas to Explore
High School Completion	Access to Exercise Opportunities
Mammography Screening	
Preventable Hospital Stays	
Primary Care Physicians	
Some College	
Uninsured	
Child Care Cost Burden	

HEALTH DATA RESULTS – YELLOW MEDICINE

Yellow Medicine County is fairing about the same as the average county in Minnesota and better than the average county in the nation for Health Outcomes and Health Factors.

Yellow Medicine County has five areas of strength, where it is performing meaningfully better than the state and national averages, with two areas to explore for potential areas of opportunity or investment.

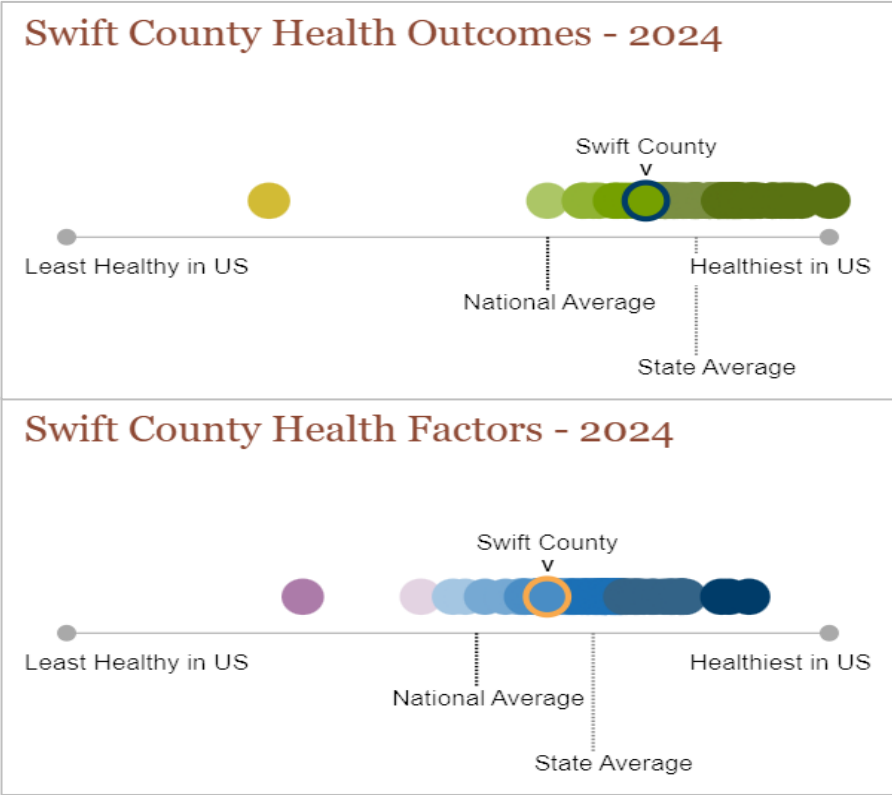


Yellow Medicine County	
Areas of Strength	Areas to Explore
Income Inequality	Access to Exercise Opportunities
Severe Housing Problems	Flu Vaccinations
Social Associations	
Some College	
Uninsured	

HEALTH DATA RESULTS – SWIFT

Swift County is fairing about the same as the average county in Minnesota and better than the average county in the nation for Health Outcomes and Health Factors.

Swift County has five areas of strength, where it is performing meaningfully better than the state and national averages, with two areas to explore for potential areas of opportunity or investment.



Swift County	
Areas of Strength	Areas to Explore
Child Care Cost Burden	Access to Exercise Opportunities
Mammography Screening	Flu Vaccinations
Preventable Hospital Stays	
Social Associations	
Uninsured	



HEALTH DATA RESULTS - SUMMARY

Primary and Secondary Service Area

The following is a list of areas to explore for the combined PSA and SSA. The number is a count of the occurrences for that health area. For example, “Access to Exercise Opportunities” came up as areas to explore across all four counties.

Areas to Explore	Primary Service Area	Secondary Service Area			Count
	Lac qui Parle	Chippewa	Yellow Medicine	Swift	
Access to Exercise Opportunities	X	X	X	X	4
Flu Vaccinations	X		X	X	3
Grand Total	2	1	2	2	7



COMMUNITY FOCUS GROUPS

JMHS held two focus groups with community stakeholders to facilitate discussion and get input around the health needs and resources in the community. These were held on July 21st, 2025. The invitees included over 23 individuals in the community including those from or representing medically underserved and low-income communities.

Individuals/organizations represented are as follows, noting that individuals may represent multiple community groups:

County Commissioner	Dawson-Boyd Public Schools	Johnson Memorial Health Services
Countryside Public Health	Dawson Chamber of Commerce	Lac qui Parle Family Services
Southwest Minnesota EMS	Community Members	

COMMUNITY FOCUS GROUPS

The following slides highlight the themes across the individual questions, identifying both strengths and opportunities within the community. As you will see, some areas of opportunity also emerge as strengths. For example, “Small town feel” was highlighted as both an area of “Opportunity” and a “Strength”.

The answer themes were developed by categorizing the question responses into common groupings for analysis and comparison.

COMMUNITY FOCUS GROUPS

What do you like most about living in this community?

Response	Strength	Opportunity
Community support for youth (schools, sports, arts, church groups)	5	
Small-town feel, knowing everyone, strong connections	4	1
Accessible healthcare and hospital presence	4	
Walkability and access to recreation	3	
Safe community / low crime	3	
Support for elderly	2	
Partnerships between organizations	2	
Active business community and local ownership	2	
Telehealth and EHR data sharing	2	
Arts and cultural activities	1	
Grand Total	28	1

- The most frequently mentioned strength of the community was “Community support for youth”, with five counts across both focus groups, signaling strong investment in youth development and community involvement.
- The second most mentioned strengths were “Small town feel” and “Accessible healthcare and hospital presence”, highlighting strong personal connections and a community that supports overall health.
- “Small town feel” was also mentioned as an “Opportunity”, noting that although this is a strength in the community it also may limit new perspectives and personal privacy.

What are your biggest concerns living in this community?

Response	Opportunity
Limited transportation / public transit	4
Mental health services access	4
Affordable childcare	3
Affordable housing	3
Cost of living challenges for elderly	3
Limited home health / in-home care services	3
Access to healthy food	3
Health literacy gaps	3
Risk of hospital closure	2
Staffing and recruitment	1
Access to specialty care	1
Grand Total	30

- “Limited transportation/public transit” and “Mental health services access” were the most frequently mentioned areas of opportunity, signaling access issues for those without reliable transportation and gaps in mental health support.
- Concerns around “Affordable childcare”, “Affordable housing”, “Access to healthy food”, and “Cost of living challenges for elderly” indicate that strains on household budgets are impacting quality of life, making it hard for residents to meet basic needs.
- “Limited home health/in-home care services” and “Health literacy” were also frequently mentioned opportunities.

COMMUNITY FOCUS GROUPS

What are the most serious health issues facing the community?

Response	Opportunity
Mental health education and stigma reduction	4
Access to mental health services (long wait times)	3
Nutrition and affordability of healthy food	3
Chronic disease (diabetes, heart disease, respiratory issues)	3
Cancer prevalence	2
Dialysis access (long travel times)	2
Need for hospice services locally	2
Youth Vaping	1
Lack of evening physical activity options	1
Lack of participation in preventative screenings	1

Grand Total **22**

- “Mental Health education and stigma reduction” was mentioned 4 times, followed by “Access to mental health services” at three times, identifying a strong need for mental health education and improved access to services.
- Issues such as “Chronic disease” (mentioned 3 times) and “Cancer prevalence” (mentioned 2 times”, highlight ongoing demands for specialized care and disease management resources.
- “Nutrition and affordability of healthy food”, mentioned 3 times, indicates barriers related to healthy food options and affordability.

What issues are facing the medically underserved/low-income community?

Response	Opportunity
Transportation barriers	3
Affordability of healthcare (competing priorities like food/heat vs. care)	3
Delayed or avoided care due to cost	3
Access to mental health	2
Low-income seniors in the benefits gap	2
Chemical dependency	1
Vaccination rates	1
Access to specialty care	1

Grand Total **16**

- “Transportation barriers”, “Affordability of healthcare”, “Delayed or avoided care due to cost” were the most frequently cited challenges for the medically underserved/low-income community, which can result in worsening health conditions and more expensive care due postponing or not being able to afford care.
- “Access to mental health” and “Low-income seniors in the benefit gap”, each mentioned twice, can exacerbate health disparities in the community.



COMMUNITY FOCUS GROUPS

What is your vision for a healthy community?

Response	Opportunity
Increased population and return of young families	2
More after-hours activities and restaurants	2
Healthy ways to address conflict, reduce stress/misinformation	2
Affordable healthy food	2
Affordable housing	1
Community garden/farmer's market expansion	1
Expanded bike/walk culture	1
Affordable childcare	1
Health literacy	1
Transportation for individuals with mobility limitations	1
Grand Total	14

- “Increased population and return of young families”, “More after-hours activities and restaurants”, “Healthy ways to address conflict...”, and “Affordable healthy food” were the most frequently mentioned elements, each cited twice. This indicates a vision for a community with strong population growth with a healthy social and living environment.
- A wide range of additional priorities, including “Affordable housing”, “Community garden/farmer’s market expansion”, “Transportation”, and “Health Literacy”, were each mentioned once, indicating that community members also envision a healthy, accessible, and holistically supportive community.

What are the most beneficial health resources in the community?

Response	Strength
Johnson Memorial Health Services	4
Ruby's Pantry	2
EMS	2
Mental health resources in schools	2
Prairie 5 (meals, transportation)	2
Senior center and activities	2
Faith-based organizations	2
Mobile mental health unit	1
Public health crisis support	1
Local dental care access	1
Backpack program	1
Substance abuse prevention education	1
Self care/healthy living education	1
Local pharmacy	1
Local wellness options	1
Community fundraising/support programs (e.g., Walk of Hope)	1
Grand Total	25

- “Johnson Memorial Health Services” was the most frequently mentioned resource, underscoring its central role in delivering healthcare services to the community.
- Multiple resources were cited twice, including “Ruby’s Pantry”, “EMS”, “Mental health resources in schools”, and “Prairie 5”, highlighting the importance of emergency response services and wrap around support programs within the community.

COMMUNITY FOCUS GROUPS SUMMARY

Response	Opportunity
Mental Health	13
Transportation	8
Affordable Healthy Food	6
Affordable Healthcare	6
Cost of living for elderly	5
Affordable housing	4
Affordable childcare	4
Health Literacy	4
Chronic Disease	3
Home Health	3
Access to Healthy Food	3
Evening activities	3
Conflict Resolution	2
Access to Specialty Care	2
Increased population	2
Hospice	2
Cancer Prevalence	2
Risk of Hospital Closure	2
Dialysis Access	2
All Others	7
Grand Total	83

- Over the six questions, there were 26 opportunities identified over 83 inputs received. The table to the left represents the areas of “Opportunity” that had more than one response.
- Responses were grouped together by high-level theme, for example “Community Garden” and “Affordable Healthy Food” were condensed together into “Affordable Healthy Food.”
- “Mental Health” was the highest reported opportunity, accounting for over 15% of the responses, emphasizing a strong community concern around access to mental health services and the growing impact of mental-well being on overall health.
- “Transportation” was the next highest cited opportunity, with 8 responses. Transportation barriers limit access to medical care, healthy food, and community resources, leading to delayed treatment, poor chronic disease management, increased isolation, and overall poorer health outcomes, especially for residents without reliable transit options.
- “Affordable Healthy Food” and “Affordable Healthcare” were also noted as high need. Affordability of healthcare and healthy food is critical to preventing poor health outcomes; when costs are high, residents may delay care and choose less nutritious options, increasing the risk of chronic disease and worsening existing conditions.

COMMUNITY HEALTH SURVEY

Johnson Memorial Health Services also conducted a 2025 Community Health Needs Assessment Community Survey, that was publicly available from June – July of 2025. It was available on Johnson Memorial Health Services' website, social media platforms, and posted in registration and high-volume traffic areas. The survey was available in locations designed to specifically solicit feedback from medically underserved and low-income community members.

The survey was completed by 95 individuals and covered a variety of public health topics.

The subsequent slides detail the identified health needs and areas of concern from the survey.

COMMUNITY HEALTH SURVEY

How do you view the following topics in your community?

Response	I don't know	Not a Concern at all	Minor Concern	Crisis Level of Concern	Weighted Average
Mental/behavioral health	8	11	35	40	2.14
Healthcare workforce shortage	5	10	47	32	2.13
Obesity/lack of physical activity/lack of access to exercise opportunities	4	11	51	29	2.11
Bullying	11	9	45	28	1.97
Lack of specialty care	4	19	47	23	1.96
Access to nutritious food	5	24	42	22	1.87
Children in poverty	12	11	49	22	1.86
Care/programs for older adults	13	11	46	24	1.86
Poverty/unemployment	8	17	55	14	1.80
Pollution/water quality	8	26	37	23	1.80
Income/job opportunities	8	15	62	8	1.75
Women's health	13	16	48	15	1.71
Smoking/tobacco/vaping	13	17	50	14	1.69
Chronic disease	16	13	47	16	1.68
Drug use	19	9	49	17	1.68
Alcohol use	12	22	50	11	1.63
Uninsured/underinsured	22	15	34	22	1.60
Availability of preventive care/health education/health literacy	10	31	40	12	1.58
Diabetes	21	14	47	11	1.52
Domestic violence/abuse	19	17	50	8	1.50
Homelessness/housing instability	21	23	36	13	1.44
Violent crime	10	43	33	9	1.43
Teen births	25	39	26	4	1.10
Grand Total	287	423	1026	417	1.73

- “Mental/behavioral health” was identified as the highest area of concern within the community, with a weighted average of 2.14.
- “Healthcare workforce shortage” and “Obesity/lack of physical activity/lack of access to exercise opportunities” followed closely behind at 2.13 and 2.11.

COMMUNITY HEALTH SURVEY

How do you view the following healthcare topics in your community?

Response	Needs Improvement	Average	Above Average	I don't know	Weighted Average
Access to mental health services	36	33	17	7	2.05
Access to urgent care services	28	37	27	1	1.99
Access to specialty services	22	43	24	4	1.89
Access to optometry services	14	54	20	5	1.83
Hours the physicians/provider offices are open	13	50	29	1	1.81
Access to substance abuse treatment	35	27	6	25	1.77
Access to dental services	16	43	27	6	1.75
Access to long term care	7	48	32	6	1.60
Quality of physician/provider care	5	40	46	0	1.55
Number of physicians/providers	8	40	40	5	1.55
Access to emergency care services	6	42	42	3	1.55
Quality of hospital/clinic care	6	36	51	0	1.52
Closeness/convenience of services	6	35	51	1	1.49
Access to telehealth services	13	41	14	24	1.47
Grand Total	215	569	426	88	1.30

- “Access to mental health services” was identified as the highest area of concern within the community, with a weighted average of 2.05.
- “Access to urgent care services” and “Access to specialty care services” followed closely behind at 1.99 and 1.89, indicating high need in the community.
- For those that submitted free text responses, “Extended and weekend hours”, “Mental health access”, and “Urgent care/walk-in clinics” were the most frequently cited need.

COMMUNITY SURVEY

In your opinion, what social determinants of health are unaddressed or inadequately address in our community?

(Check all that apply)

Response	% of Responses	Count
Job & income opportunities	47%	35
Polluted air and water	35%	26
Transportation	31%	23
Food insecurity	29%	22
Physical activity opportunities	28%	21
Education	23%	17
Language and literacy skills	23%	17
Safe housing & neighborhoods	20%	15
Racism and/or discrimination	15%	11
Other (please specify)	4%	3
Grand Total		155

- Almost half of respondents identified “Job & income opportunities” as the largest social determinant of health that is inadequately addressed.
- “Polluted air and water” and “transportation” followed closely, with 35% and 31% of the responses.

What prevents you, if anything, from receiving healthcare services?

(Check all that apply)

Response	% of Responses	Count
I have insurance, but can't afford the costs (copays/deductibles, etc.)	53%	26
I have insurance, but it doesn't cover what I need	31%	15
I've had a bad experience with care in my community	18%	9
I'm afraid to deal with a health issue	16%	8
Other (please specify)	12%	6
I've had a bad experience with care elsewhere	10%	5
My family or I usually don't go to the doctor	8%	4
I can't find providers who understand or reflect my background	8%	4
Language barriers	2%	1
Grand Total		78

- Over half of respondents selected “I have insurance, but can't afford the costs...” as what prevents them from receiving healthcare services.
- This is followed by “I have insurance, but it doesn't cover what I need” with almost of 1/3 respondents selecting this answer. These top two responses highlight that cost insurance coverage gaps are significant barrier within the community.



COMMUNITY SURVEY

Which of the following services, if any, are you accessing outside of Johnson Memorial Health Services?
(Check all that apply)

Top 10 Services	% of Responses	Count
Dermatology	32%	23
OB/GYN	29%	21
Massage therapy	28%	20
Annual physicals	26%	19
Clinic services	21%	15
General surgery	19%	14
Surgical services	18%	13
Ear, Nose, and Throat	17%	12
Immunizations	17%	12
Mammography	17%	12
All Other (23 total services)		132
Grand Total		72

- Over 1 /3rd of respondents selected “Dermatology” as the most frequent service accessed outside of JMHS.
- “OB/GYN” and “Massage Therapy” were the next highest services accessed outside of JMHS at 29% and 28%, indicating a potential areas for investment within the community.

For the services selected, please share why you’re accessing these services outside of JMHS.
(Check all that apply)

Response	% of Responses	Count
Good relationship and/or satisfied with provider(s) outside of this community	37%	26
Availability of services in this area	29%	20
The type of care I need is not available	29%	20
Availability of appointments/scheduling	20%	14
Dissatisfied with services in this area	20%	14
Unsure if the services are offered in this area	10%	7
Can't find a healthcare provider I would prefer to see	9%	6
I work in another location and prefer to receive healthcare services there	3%	2
Grand Total		70

- Almost 40% of respondents reported having a good relationship with a provider outside of the community as to why they are access care outside of JMHS.
- “Availability of services in this area” and “The type of care I need is not available” were the second and third highest reason, suggesting that access to care is an issue for specific services.

COMMUNITY SURVEY

What other healthcare services would you like to see in our community?
(Free text)

Responses with more than 1 submission	% of Responses	Count
Urgent Care	9%	4
Cancer Care	7%	3
Mental Health	7%	3
Urology	5%	2
Orthopedic Surgery	5%	2
OB/GYN	5%	2
Dermatology	5%	2
Dietary	5%	2
Exercise Opportunities	5%	2
All Other	49%	21
Grand Total	100%	43

- Almost 10% of respondents requested “Urgent Care” services within the community, highlighting the desire for these services locally.
- “Cancer Care” and “Mental Health” were the next highest requested services, each with three responses.

What additional recommendations for addressing community health needs do you have for JMHS?
(Free text)

Response	Count
Affordable Healthcare	2
Hospice	1
Additional resources for the elderly	1
Partnerships/Outreach providers	1
Transportation	1
Additional Physicians	1
Home Care	1
Chronic Disease management	1
Organizational follow through	1
Clean Water	1
Social Media Outreach	1
Compassionate Leadership	1
Women's Health	1
Expanded hours	1
Health living opportunities	1
Grand Total	16

- The highest recommendation for addressing community health need for JMHS is “Affordable Healthcare”, signaling affordability concerns.



COMMUNITY HEALTH SURVEY SUMMARY

The table on the following slide highlights the top areas of need identified in the eight community survey questions.

- In several questions, respondents could select multiple answers; therefore, the top five highest-ranked responses from each question are shown.
- The top five answers from each question were given a weight from 1-5, with a weight of 5 indicating the highest need/priority within a question. If multiple answers had the same rank, all were included.
- Additionally, high-level themes were created since survey respondents had the ability to enter free text responses, for example “Mental/Behavioral Health” and “Access to mental health services” were grouped together as “Mental Health”.

COMMUNITY HEALTH SURVEY SUMMARY

Response	Number of Questions Answer Appeared	Total Score Answer	Average Answer Score Across 8 Questions
Mental Health	3	13	1.63
Urgent Care	2	9	1.13
Insurance Coverage	2	9	1.13
Dermatology	2	7	0.88
Access to Care	2	7	0.88
OB/GYN	2	6	0.75
Access to Physical Exercise	3	6	0.75
Air & Water Pollution	2	5	0.63
Relationship with non-JMHS provider	1	5	0.63
Specialty Care	3	5	0.63
Affordable Healthcare	1	5	0.63
Job & Income Opportunities	1	5	0.63
Transportation	2	4	0.50
Cancer Care	1	4	0.50
Hours of Operation	3	4	0.50
Patient Experience	2	4	0.50
Healthcare Workforce Shortage	1	4	0.50
Massage	1	3	0.38
Bullying	1	2	0.25
Orthopedic Surgery	1	2	0.25
Optometry Services	1	2	0.25
Afraid to deal with health issue	1	2	0.25
Dietary	1	2	0.25
Annual Physicals	1	2	0.25
Food Insecurity	1	2	0.25
Urology	1	2	0.25
Home Care	1	1	0.13
Social Media Outreach	1	1	0.13
Hospice	1	1	0.13
Chronic Disease	1	1	0.13
Elderly Resources	1	1	0.13
Organizational Processes	1	1	0.13
Women's Health	1	1	0.13
Clinic Services	1	1	0.13
Compassionate Leadership	1	1	0.13
Additional Physicians	1	1	0.13
Healthy Living Opportunities	1	1	0.13
Grand Total	53	132	16.5

- “Mental Health” was consistently ranked as the highest need in the community, appearing in three questions with an average score weight of 1.63, signaling a need for increased services in the community.
- “Urgent Care” and “Insurance Coverage” followed closely behind, suggesting gaps in timely, accessible treatment options for non-emergency situations and barriers to care despite having coverage.
- Lowered-ranked issues such as “Dermatology”, “Access to Care”, and “OB/GYN” services point to unmet needs in both specialty and general healthcare areas. Addressing these gaps could improve early detection and enhance health outcomes.

DATA TRIANGULATION PROCESS

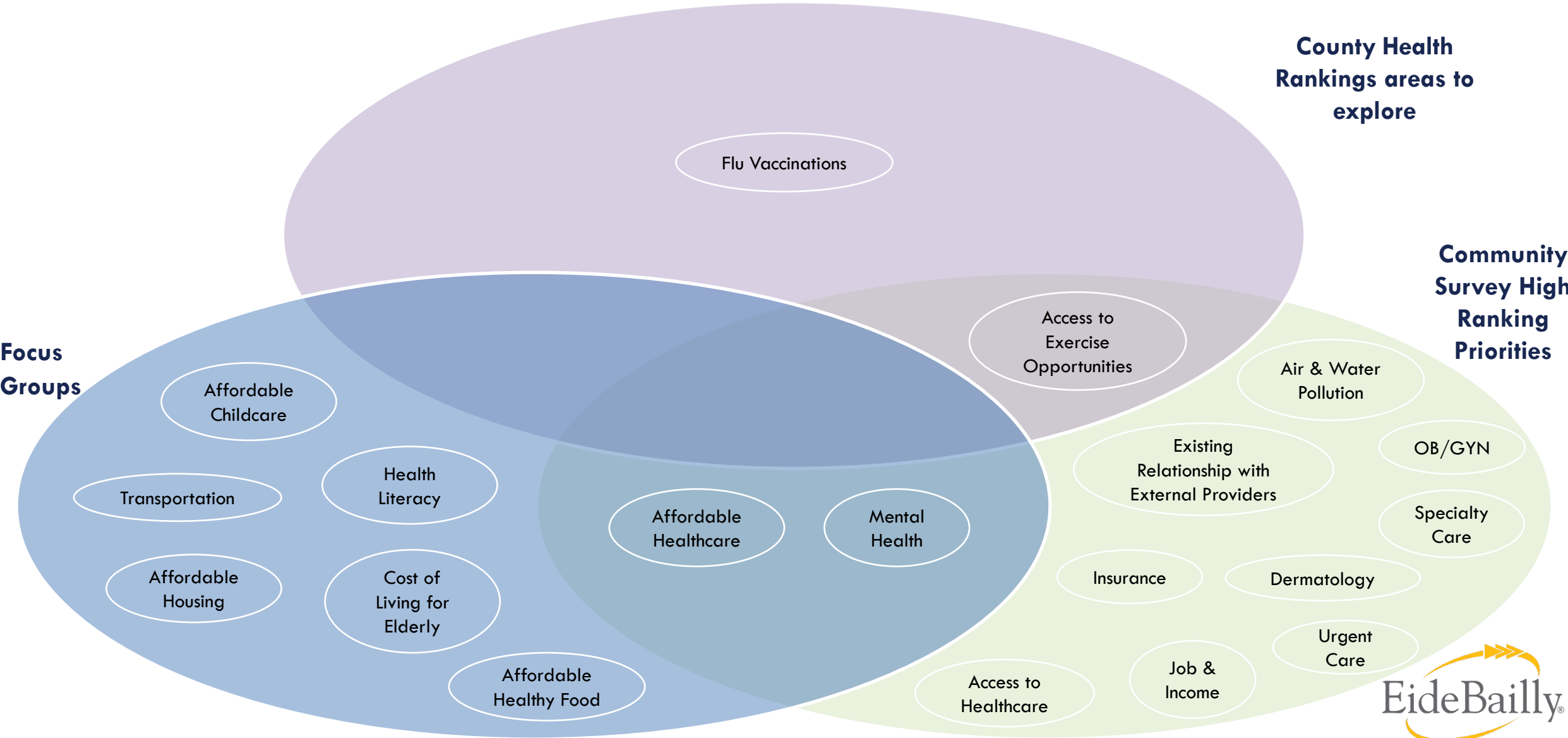
To identify areas of overlap and common themes between the three data sources: County Health Rankings, Focus Groups, and Community Survey responses, a crosswalk analysis was performed.

This crosswalk was necessary because the areas of opportunity, survey results, and focus group responses did not align on a one-to-one basis.

For instance, similar responses such as “Access to Physical Exercise” and “Access to Physical Exercise Opportunities” were grouped into a single category of “Access to Physical Exercise Opportunities” to facilitate data triangulation. Similarly, for display purposes, names were shorted from “Access to Specialty Care” to “Specialty Care”.

The following slides display the overlapping themes across the top five areas of opportunity within the three data sources for the community. If multiple responses had the same ranking within a dataset, all responses within that rank were included.

DATA TRIANGULATION – PSA & SSA



COMMUNITY RESOURCES

Access to health care facilities, providers, and other resources are essential to community health and reflects the strength of the local community. The table below details the health and social resources available within the community to assist in addressing needs identified:

Johnson Memorial Health Services	EMS	Ruby’s Pantry	Prairie 5
Public Health	Law Enforcement	Public Schools	Blackjack Babies
Senior Citizen Center	City of Dawson and Boyd	Economic Development Authority	Farmer’s Market
Local Faith Based Organizations	Senior Linkage Line	Woodland Crisis	Gnometown Grounds
Meals on Wheels	Crisis Mobile Unit	Recreation Center	Backpacks for Jacks
Public Library	Wager Chiropractic		



CONTACT INFORMATION

Community members who would like to provide comments on the needs identified or provide input on the next CHNA process are encouraged to contact JMHS with their inquiries, suggestions or comments.

Jake Redepenning, MBA, LNHA, LALD
CEO
Johnson Memorial Health Services
1282 Walnut Street
Dawson, MN 56232
jredepenning@jmhsmn.org

