



**Community Health Needs Assessment**  
SGMC Health Lanier

Prepared by:  
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## Acknowledgements

We would like to express our appreciation to the Lanier County community for participating in the 2023 Community Health Needs Assessment (CHNA) study, particularly the community survey. We would also like to thank the SGMC Health Lanier Campus organization, and all parties involved with this study; their input was essential to completing this assessment plan.

### 2023 CHNA Project Participants

- Kara Hope Hanson, Marketing Manager, SGMC Health
- Erika Bennett, Director of Marketing and Brand Experience, SGMC Health
- Darrell Moore, Director of VSU's Center for South Georgia Regional Impact
- Keith Lee, Coordinator of VSU's Public Administration and Organizational Leadership Program, Department of Political Science
- Joseph Robbins, Head of VSU's Department of Political Science

### 2023 Focus Group Participants

- Michael Clarke
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*Photo courtesy of SGMC Health*

## Executive Summary

SGMC Health is pleased to present this 2023 Community Health Needs Assessment (CHNA) for the Lanier Campus in Lakeland, Georgia. The plan was developed by SGMC staff in conjunction with Dr. Keith Lee and Dr. Joseph Robbins, Valdosta State University faculty, and Valdosta State University's Center for South Georgia Regional Impact, led by Darrell Moore. Lee, Robbins, and Moore have extensive consulting experience, having worked with numerous public and private organizations.

This CHNA is based on information gathered from a variety of sources, including:

1. Focus group interviews with community advocates and stakeholders who are knowledgeable about public health and healthcare issues;
2. A community survey of Lanier County residents; and,
3. Secondary data compiled from national, state, and local agencies and organizations.

### Focus Group Interviews

The primary social and behavioral risk factors emphasized as having a negative impact on Lanier County are:

- Alcohol and illegal substance abuse
- Tobacco use
- Healthcare literacy
- Mental and behavioral health issues
- Reluctance to utilize preventive medical care
- Unhealthy lifestyles (proper nutrition, physical activity, etc.)
- Under or uninsured families
- Staff shortages at SGMC Lanier Campus

Healthcare services that could improve the access and quality of care available to local residents are:

- Urgent care, walk-in clinics, etc.
- Pharmacy with after-hour services
- Pediatric care
- Dentistry
- Healthcare services for women, especially pregnant women
- Mental health
- MRIs, mammography, and obstetrics
- Various medical specialists

Additional factors that impact overall community health and well-being include:

- Improved transportation and expanded ambulatory services
- Limited number of specialists in Lanier County
- Expanded care facilities such as urgent care, after-hour, or walk-in clinics
- Limited understanding of health insurance, healthy healthcare practices, available medical resources
- Limited number of affordable gyms and exercise facilities
- Lack of nutritional food options and quasi-food desert

#### Community Survey

The primary social and behavioral risk factors emphasized as having a negative impact on Lanier County are:

- Illegal substance and alcohol abuse
- Mental and behavioral health issues
- Under or uninsured families
- Adult obesity
- Lack of physical exercise

Healthcare services that could improve the quality of care available to local residents are:

- Expanded access to primary and urgent care
- Additional mental health services
- Greater access to pediatric care
- Expanded access to emergency care
- Cancer treatment

Healthcare services not readily available in the community include:

- Cardiology services
- Cancer care
- Elder care services
- Prenatal care
- Primary and urgent care facilities

## Community Indicators

- Healthcare access remains a challenge for Lanier County. The county falls below the Georgia rates when it comes to primary care physicians, dentists, and mental health providers per capita.
- Lanier County economic metrics are behind state averages as well. Median household income, child poverty, and people 65+ living below poverty line measures all show that Lanier residents are below state averages.
- The uninsured population rates (16%) are consistent with Georgia county averages (15%) but higher than the national average (10%).
- The following measures exceed state and/or national benchmarks:
  - Cancer disease death rates
  - Age-adjusted death rate to stroke
  - Child abuse
  - Emergency room visit rates
  - Physical inactivity and adult obesity
  - Smoking and tobacco use
  - Teen birth rate
- Between 2017 and 2021, Georgia's Online Analytical Statistical Information System (OASIS) reports that Lanier County's leading causes of death are ischemic heart and vascular disease, Alzheimer's disease, all chronic obstructive pulmonary disease (COPD) except asthma, diabetes mellitus, and hypertension and hypertensive renal and heart disease.
- Lanier County generally ranks in the lower 50% of Georgia counties for county health rankings such as clinical care (122 out of 159) and health outcomes quality of life (139).

## Overall health concerns

- The focus group listed diabetes, hypertension, and kidney disease as major long-term health concerns. Diabetes, hypertension, heart disease, and cancer were long-term health concerns shared via the community survey. Likewise, the OASIS dashboard reports cerebrovascular disease, heart disease, and COPD as the county's primary threats.
- Mental and behavioral health challenges were identified as major concerns across all three information sources.
- Cost, the limited number of available physicians, and issues with insurance coverage remain major impediments to Lanier County residents having access to preventive or regular healthcare. Around 16% of residents (and around 7% of children under 19 years old) are without healthcare insurance.
- Overall health and physical activity are regularly noted as challenges for county residents. According to the County Health Rankings & Roadmaps database, around 34% of Lanier residents reported no leisure-time physical activity on a regular basis and around 41% of the population reportedly have higher-than-average BMI indices. Both metrics are above Georgia means.

## Introduction and Background

The Patient Protection and Affordable Care Act (ACA) mandates that non-profit hospitals conduct a Community Health Needs Assessment at least once every three years to retain tax-exempt status. Input from community stakeholders, including those with special knowledge or expertise in public health, is required. The assessment report must be made available to the public and should also include an implementation plan, which describes how the organization will address a given community's health needs.

The primary objective of CHNAs is to identify those factors that influence community health and to identify the availability of or need to pursue resources to address the primary challenges. The CHNA objectives:

- Report on the current state of the area's healthcare market, access to care of various services, and which needs are currently unmet.
- Ascertain health status and risk factors present that shape a community's overall health.
- Compare and contrast local indicators with state and/or national measures to identify areas of concern.
- Compile an inventory of healthcare facilities, providers, and services available in the community.
- Use qualitative and quantitative data to identify and prioritize community needs.
- Create an action plan with specific tactics to describe how the organization can address community health needs.

## Project Methodology

To comply with regulatory requirements, the steps below summarize the process used to develop this CHNA for SGMC's Lanier Campus. The steps involved are:

**Step 1: Establish the SGMC Lanier County CHNA Team.** A CHNA team was formed to provide guidance on this project, promote the community survey, select members for the community task force interviews, and prepare the Community Health Action Plan and healthcare provider inventory.

**Step 2: Collect community feedback.** The second phase of the project consisted of quantitative and qualitative feedback that was used to gather information on the community's local healthcare needs, a summary of available care and preventive services, social and behavioral community risks, and healthcare needs not currently present in the immediate area. The information for this phase was compiled through interviews with community representatives who possess appropriate knowledge regarding the county's health situation and a survey of Lanier County citizens.

**Step 3: Gather community measures for health status, demographics, economics, etc.** The third phase of this project entailed gathering secondary data from various agencies and organizations to produce a comparison of Lanier County’s demographic, socioeconomic, and environmental status vis-à-vis state and national benchmarks. These indicators are useful for identifying areas of concern or attention for the Community Health Action Plan.

**Step 4: Assemble an inventory of healthcare services in the community.** In cooperation with SGMC officials, an inventory of healthcare facilities, services, and programs was produced to better promote these assets to the broader community.

**Step 5: Identify primary health issues in Lanier County.** The team next prioritized the most pressing health issues gleaned from the interviews, surveys, and indicator assessment. Identifying the top priorities makes for a more manageable action plan.

**Step 6: Create a Community Health Action Plan.** After reviewing the key health issues to be addressed, the CHNA team sought to identify specific actions to address these areas of need while remaining mindful of the available resources. Timelines, goals, objectives, and assessment benchmarks were also developed.

**Step 7: Publicize CHNA to the community.** The final phase in this project was to publicize the entire plan to the local community. This includes all components of the CHNA, including the community overview, prioritized healthcare needs, Community Health Action Plan, and implementation strategy.



*Photo courtesy of SGMC Health*



## Organizational Profile

SGMC Health is the most comprehensive medical system in South Georgia. Supported by more than 3,000 healthcare workers who care for 400,000 patients across 15 counties annually, SGMC operates four hospitals, an ambulance service, 28 medical office locations, a cancer center, a hospice facility, a retirement center, a skilled nursing facility, an imaging center, and an urgent care center.

The SGMC Health Lanier, in Lakeland, Georgia, has been part of the SGMC community since 2014. The Lanier facility includes both the SGMC Health Lanier hospital and the SGMC Health Villa, which is a 62-bed nursing care center.

SGMC Health Lanier (formally the Louis Smith Memorial Hospital, founded in 1950) is a 25-bed facility, with critical access designation since 2002. It provides acute and sub-acute care and is an important contributor to the state's rural healthcare efforts, as it is a participant in the Rural Hospital Tax Credit program. It is currently the largest economic generator and employer in Lakeland, Georgia. Services provided by SGMC Health Lanier include:

- Acute inpatient care
- 24-hour Emergency Room
- 24-hour Ambulatory Service
- Hospital-Based Rehabilitation
- Laboratory Services
- Outpatient Rehabilitation
- Radiology Services
- Sleep Study
- Electrocardiogram (ECG) and Respiratory Services
- Physical, Speech, and Occupational Therapy
- Swing Bed

## Community Profile & Health Rankings

Lanier County is in South Georgia, northeast of Lowndes County (Georgia). The county was founded in 1920 after obtaining territory from surrounding Berrien, Clinch, and Lowndes counties. It was named after poet Sidney Lanier and is home to Banks Lake, a National Wildlife Refuge, and other area lakes. The original county seat, named Milltown, was renamed Lakeland—an homage to the area’s many lakes—in 1925.<sup>1</sup>

### Lanier County Map



Source: *Maps of the World*<sup>2</sup>

According to 2022 Census estimates (Table 1), around 10,171 people call Lanier County home. The population has increased 2.9% since the 2020 Census, which is up from around 9,880 in 2020.<sup>3</sup> Lanier County’s racial composition consists of Whites (65.4%), Black or African American (22.7%), Hispanic or Latin-Americans (8.4%), Asian Americans (1.3%), American Indian or Native American (0.1%), and others. Meanwhile, approximately 15% of the county’s population is 65 years old and over. Economically, Lanier County generally falls below the state average when it comes to various indicators such as per capita income (\$18,981), median house value (\$125,800), education level (17.3% with bachelor's degree or higher).<sup>4</sup> The county surpasses state averages when it comes to the poverty rate (19.8%).

<sup>1</sup> <https://www.lakelandchamber.org/history>

<sup>2</sup> <https://www.mapsofworld.com/usa/states/georgia/counties/lanier-county-map.html>

<sup>3</sup> <https://www.census.gov/quickfacts/fact/table/laniercountygeorgia/PST045222>

<sup>4</sup> <https://www.census.gov/quickfacts/fact/table/laniercountygeorgia/PST045222>

## Lanier County Community Profile (2022)

Profile	Lanier County	Georgia Average
<b>Population</b>		
• Population	10,171	10,912,876
• Percent change (2020-2022)	2.9%	1.9%
<b>Age and Sex</b>		
• Persons under 5 years	6.4%	5.8%
• Persons under 18 years	23.5%	23.0%
• Persons 65 years and over	15.2%	15.1%
• Females	49.6%	51.2%
<b>Race and Hispanic Origin</b>		
• White	65.4%	50.4%
• Black or African American	22.7%	33.1%
• Hispanic or Latino	8.4%	10.5%
<b>Housing</b>		
• Housing Units	4,174	4,539,156
• Homeownership	64.9%	64.5%
• Median Housing Value	\$125,800	\$206,700
<b>Families &amp; Living Arrangements</b>		
• Households	3,529	3,885,371
• Persons per household	2.72	2.67
<b>Education</b>		
• High school graduate or higher	85.3%	88.2%
• Bachelor's degree or higher	17.3%	33.0%
<b>Health</b>		
• Persons with a disability (under age 65)	8.6%	8.9%
• Persons without health insurance (under age 65)	14.6%	14.7%
<b>Economy</b>		
• Labor force participation age 16 years and over	45.3%	62.9%
<b>Income &amp; Poverty</b>		
• Median household income	\$33,956	\$65,030
• Per capita income	\$18,981	\$34,516

*Source: U.S. Census Bureau American Community Survey (2022)<sup>5</sup>*

<sup>5</sup> <https://www.census.gov/quickfacts/fact/table/laniercountygeorgia/PST045222>

## Community Indicators

The Community Health Rankings & Roadmaps annual report shows Lanier County outperforming state county averages in three areas while having below average ratings elsewhere. The county's physical environment (ranked 29<sup>th</sup> out of 159 counties), social and economic factors (65<sup>th</sup>), and length of life (67<sup>th</sup>) ratings show that Lanier does better than the average Georgia county in these areas. Conversely, Lanier County is in the bottom 50% of Georgia counties when it comes to its clinical care (139<sup>th</sup>) and health behaviors (78<sup>th</sup>) benchmarks. The table below shows Lanier County's health rankings across a range of indicators.

### Lanier County Health Rankings

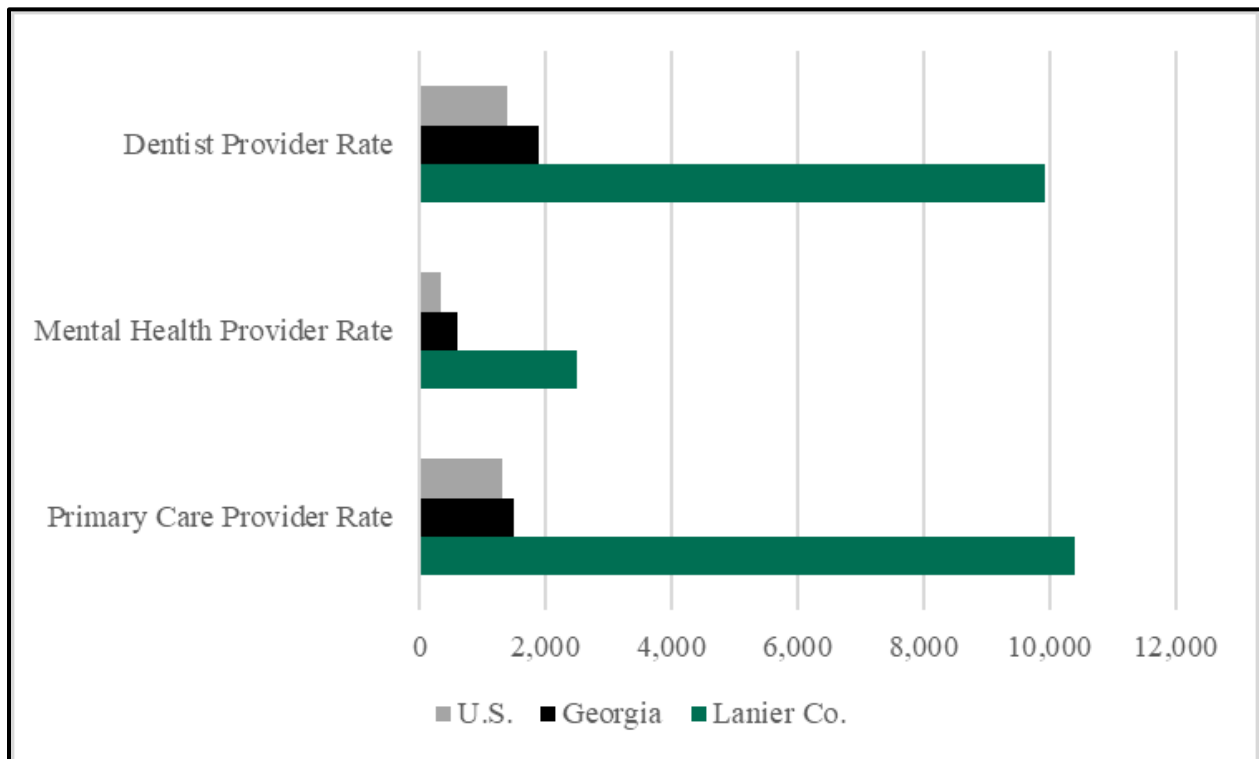
Indicator	Lanier County Rank	Percentile
Clinical Care	139	87%
Health Behaviors	78	49%
Length of Life	67	42%
Physical Environment	29	18%
Quality of Life	71	45%
Social & Economic Factors	65	41%

Source: *Community Health Rankings & Roadmaps Annual Report (2022)*<sup>6</sup>

<sup>6</sup> <https://www.countyhealthrankings.org/explore-health-rankings/georgia/lanier?year=2022>

The clinical care ratings are based on a variety of indicators, some of which are reported in the figure below. The data clearly reinforce the survey and focus group feedback on the limited number of providers. Indeed, the ratio between Lanier residents and the number of mental health providers and dentists shows a disparity that is larger than the ones seen at the state or national levels. Similarly, the number of residents per provider is also much higher than state and national averages.

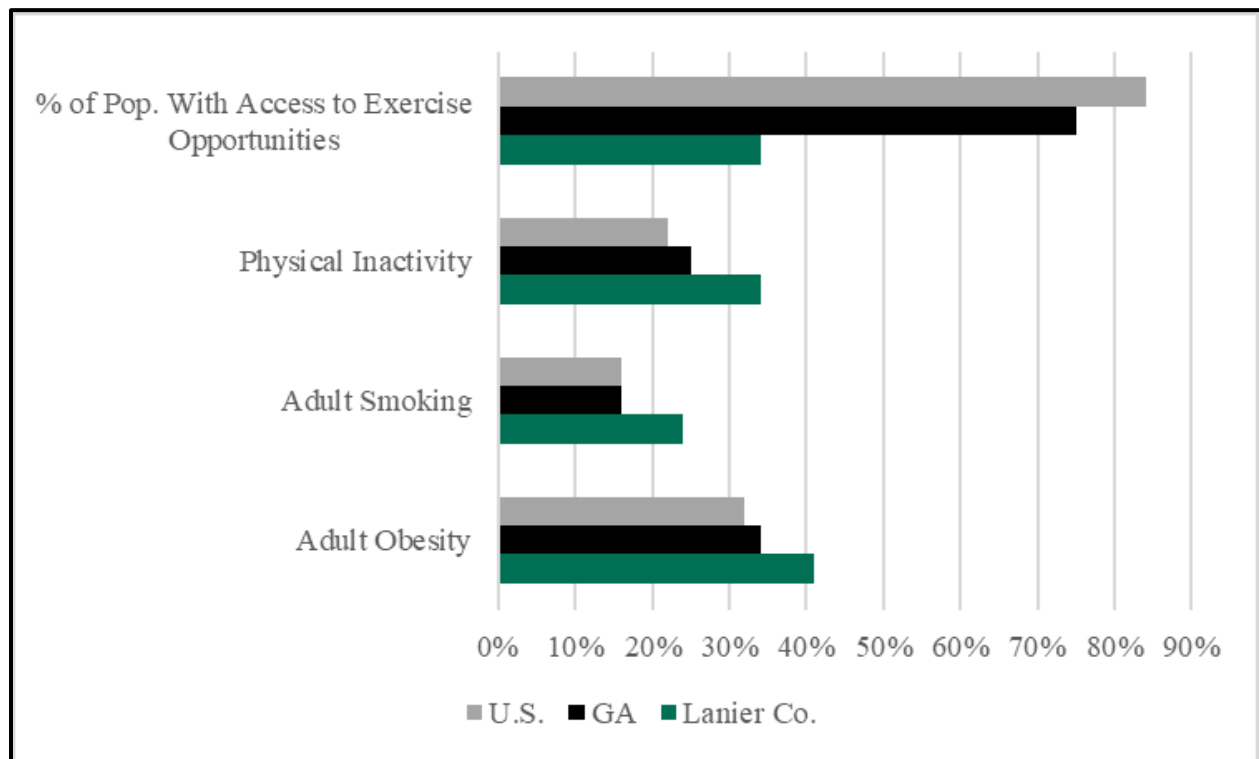
### Lanier County: Clinical Care Ratings Health Care Providers Per Capita (Number of Residents Per Provider)



Source: *Community Health Rankings & Roadmaps Annual Report (2022)*

The Health Behaviors Rankings speak to the personal health and activity levels among county residents. When it comes to exercise opportunities, Lanier County residents have limited access to (affordable) facilities where they could regularly exercise. The Community Health Rankings echo this, as the rankings indicate that just over 30% of the population has access to exercise opportunities, which is lower than the state (75%) and national (84%) averages for this measure. The Physical Activity rating tells a similar story, with around 34% of Lanier residents reportedly spending no leisure-time physical activity regularly versus 25% and 22% for the Georgia and U.S. populations, respectively. Smoking and Adult Obesity are also areas of concern for local residents.

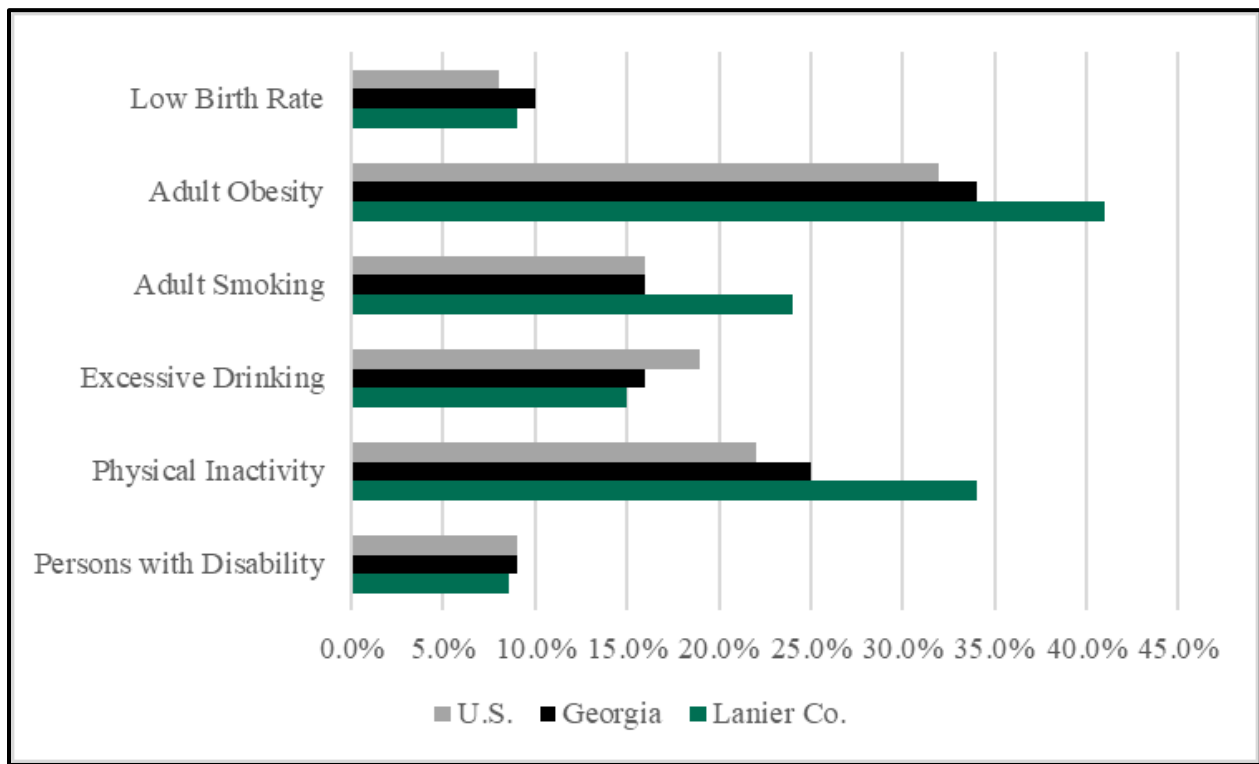
## Lanier County: Health Behaviors Rankings



*Source: Community Health Rankings & Roadmaps Annual Report (2022)*

Lanier County’s social and economic factors data speaks to the county’s impressive educational base but also some of the economic challenges present. The school system is responsible for a high school graduation rate that surpasses state and national averages. Similarly, reading and math scores on standardized tests are slightly above state averages (see appendix). Economically, Lanier’s economic base is smaller than the Georgia mean. Median household income, living wage, and the percentage of the population living below the poverty line all point to a smaller economic base for this county (see appendix). The figure below shows the aforementioned poverty and graduation rate comparisons, among other factors.

### Lanier County: Social & Economic Factors

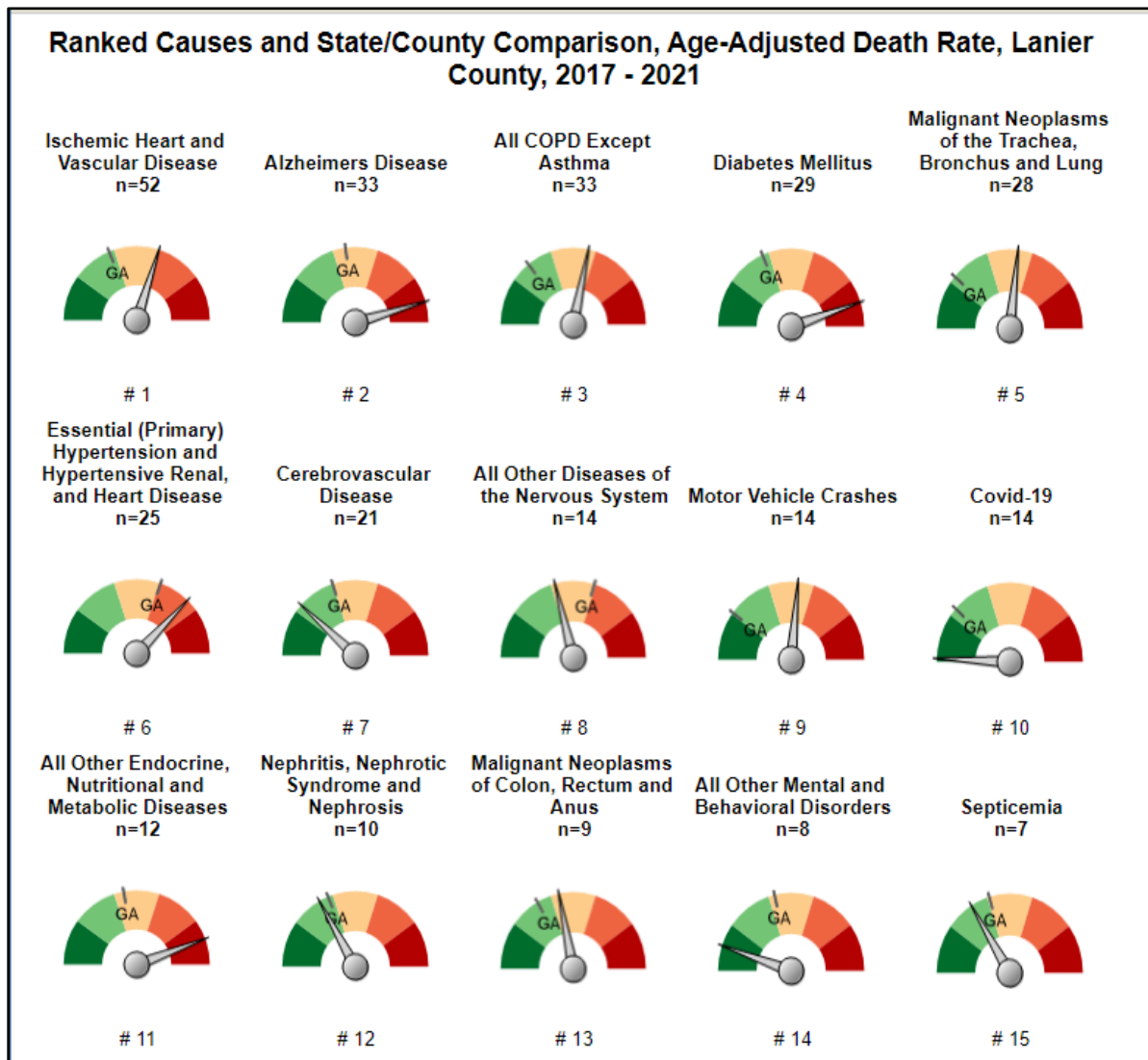


Source: Community Health Rankings & Roadmaps Annual Report (2022)

Community indicators can also provide much information about an area’s leading health and healthcare challenges. The findings in this section report data from various sources to summarize the overall, cardiovascular, and cancer-related statistics for the county.

Using OASIS data, the leading causes of death for Lanier County residents were heart and vascular disease, Alzheimer’s disease, diabetes, and hypertension. Lanier residents have a slightly elevated death rate from factors such as COPD, endocrine/metabolic diseases, malignant neoplasms, and motor vehicle crashes.

## Lanier County: Leading Mortality Factors



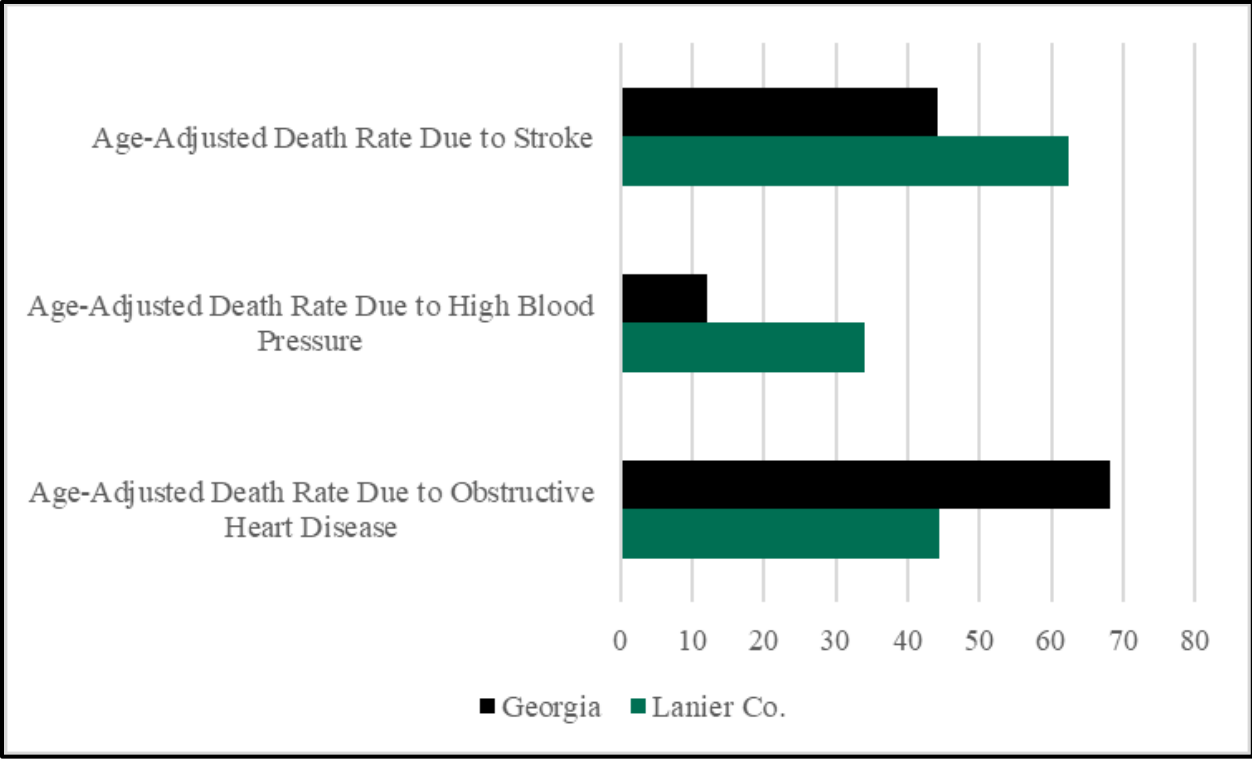
Source: *Online Analytical Statistical Information System (OASIS)*<sup>7</sup>

<sup>7</sup> <https://oasis.state.ga.us/CHNADashboard/Default.aspx>



The State of Georgia’s OASIS Trending Tool was used to compile information on Lanier County’s cancer and heart/vascular disease profiles. The county’s age-adjusted death rate due to stroke and high blood pressure both surpass the state and national averages. Conversely, the county’s age-adjusted death rate due to obstructive heart disease was reportedly lower than the state average but appears more concerning than Lanier County’s rates for high blood pressure death rate (see below).

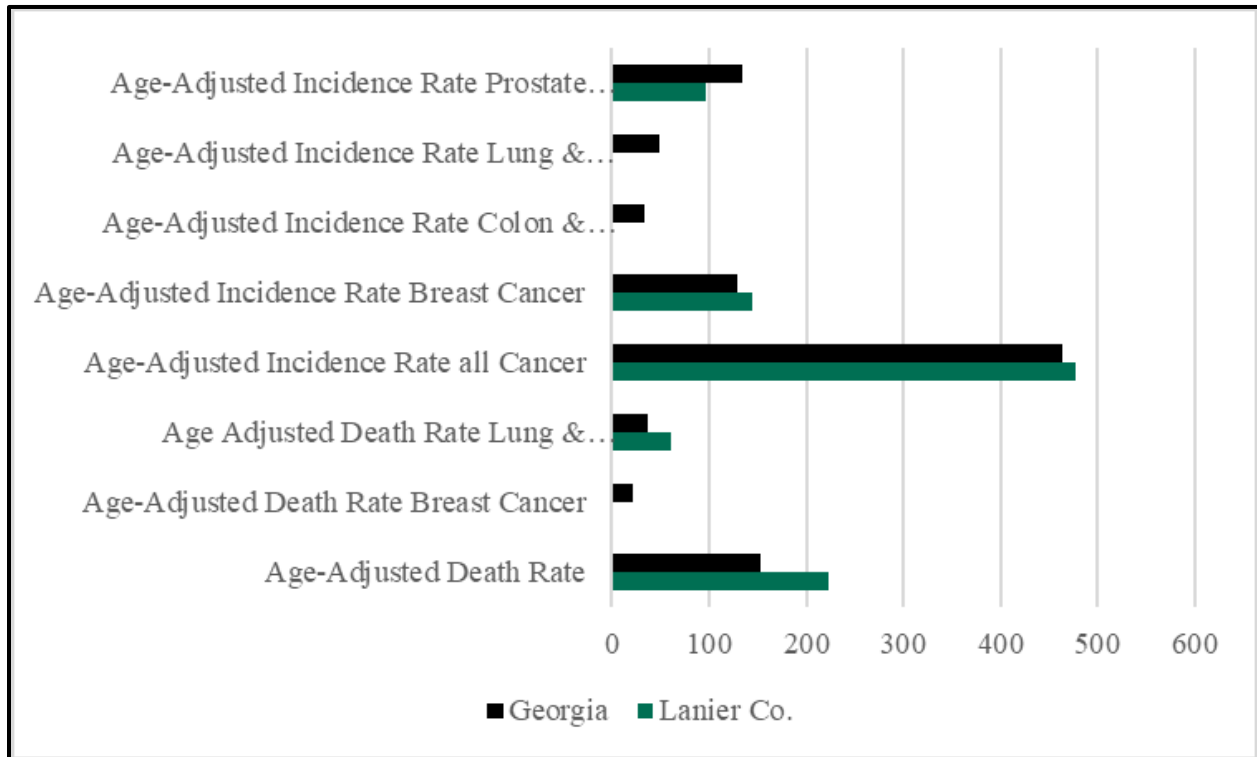
### Lanier County: Heart and Vascular Disease Profile



Source: OASIS Trending Tool

The cancer disease rates for Lanier County were quite low compared to other counties, which is why several of the measures in the figure below either weren't reported or were from previous years. The age-adjusted death rate and age-adjusted incidence rate due to all cancer types were higher than the state's averages. Breast cancer incidence rates were also higher than the Georgia mean. By contrast, the county's cancer rates in several other categories surpassed state metrics.

### Lanier County: Cancer Disease Profile



Source: National Cancer Institute

## Focus Group Discussion

On Tuesday, October 3, 2023, Dr. Lee and Dr. Robbins conducted a focus group meeting with several knowledgeable stakeholders representing Lanier County (a list of participant names is in the appendix). The session was conducted at the SGMC Lanier Campus Magnolia Cafe and guided by a script prepared by the researchers with help from SGMC staff. The discussions focused on gathering feedback regarding:

- Social and behavioral factors negatively impacting health in the community
- Identifying those services that the SGMC Lanier Campus does well and what growth opportunities are available
- The barriers or challenges associated with healthcare in the community
- What healthcare services or facilities, which are currently absent, would residents like to have available to them.

### Social & Behavioral Risk Factors

Social and behavioral risk factors can lead to or exacerbate existing health conditions in a community. During the focus group session, the primary social and behavioral risk factors emphasized as having a negative impact on Lanier County were:

- Illegal substance and alcohol abuse
- Mental and behavioral health issues
- Under or uninsured families
- Healthcare literacy
- Staffing shortages at the SGMC Lanier Campus

### Healthcare Access

Having access to healthcare services is vitally important to a community's well-being. During the focus group session, participants shared which healthcare services are needed, though not currently available. Addressing this need is important, as the absence of such services may lead residents to pursue healthcare outside of the county. Participants listed the items below as those services most sought after or needed by residents in the community:

- Pediatric care
- Dentistry
- Healthcare services for women, especially pregnant women
- Family support services
- Mental health
- Cardiology, nephrology, neurology, etc.

### Other Considerations

The focus group session also yielded multiple, other notable considerations. These include:

- Lanier County does not have enough specialists in the area. Specifically, the community would benefit from having oncologists, cardiologists, pediatricians, etc.
- Improved transportation and expanded ambulatory services. Plans were shared for how the community was addressing (and expanding) this service, but there were issues with this in the past, which were exacerbated by COVID-19 and Hurricane Idalia.
- Transportation is an issue for many residents as several of them cannot regularly make it to their appointments or pursue medical care at local clinics. The result of this challenge is that it places additional strain on ambulatory services and the ER.
- There is a paucity of after-hours and weekend care, which further strains the ER services.
- Similarly, the community lacks an after-working-hours pharmacy, which impedes treatment in many cases.
- Mental health issues were noted as a concern by many individuals during the session. Indeed, depression, anxiety, and suicide prevention among community members of all ages are growing challenges facing the community.



*Picture provided by SGMC Health*

# Community Survey Results

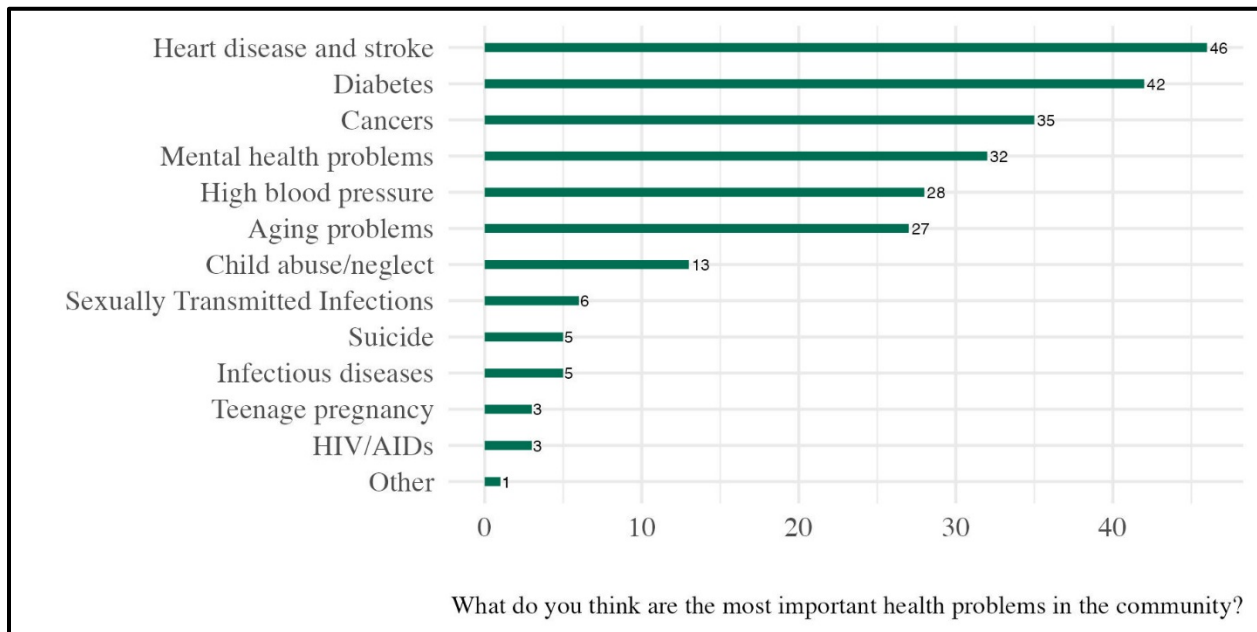
A community survey was conducted from July 2023 through the end of October 2023. The survey was promoted by hospital administration and disseminated through social media and posted flyers. In total, 87 surveys were completed and submitted by community members.

The demographic breakdown of survey respondents is presented below. The information in the adjacent table indicates that women were more likely to complete the survey than men. Beyond this category, more college-educated, married, and white individuals completed this survey than other groups.

Gender				
Females		Males		
84%		14%		
Marital Status				
Married	Divorced	Never Married	Other	
68%	9%	15%	8%	
Age				
18-29 Yrs.	30-39 Yrs.	40-49 Yrs.	50-59 Yrs.	60+
20%	17%	20%	21%	22%
Household Income				
<\$30,000	\$30,001-\$50,000	\$50,001-\$70,000	\$70,001-\$90,000	>\$90,000
16%	21%	22%	15%	26%
Education Attainment Level				
Some HS	HS Diploma	Some College	College Degree	Advanced Degree
3%	16%	32%	44%	5%
Race				
White	Black	Other		
84%	14%	2%		

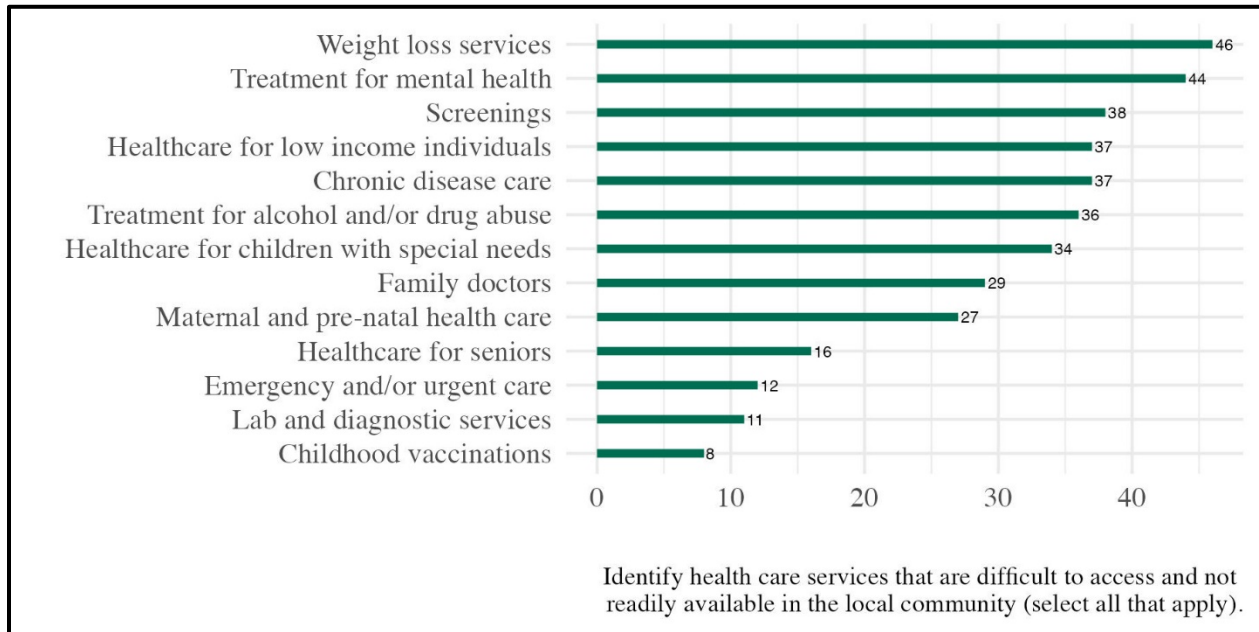
The first portion of the survey asked respondents to share their thoughts on the leading health challenges. The figure below presents the responses to this question. The top five leading reported concerns were heart disease and stroke, diabetes, cancers, mental health problems, high blood pressure, and aging. Suicide, teen pregnancy, and child abuse/neglect were also listed as concerns.

### Lanier County: Leading Health Challenges



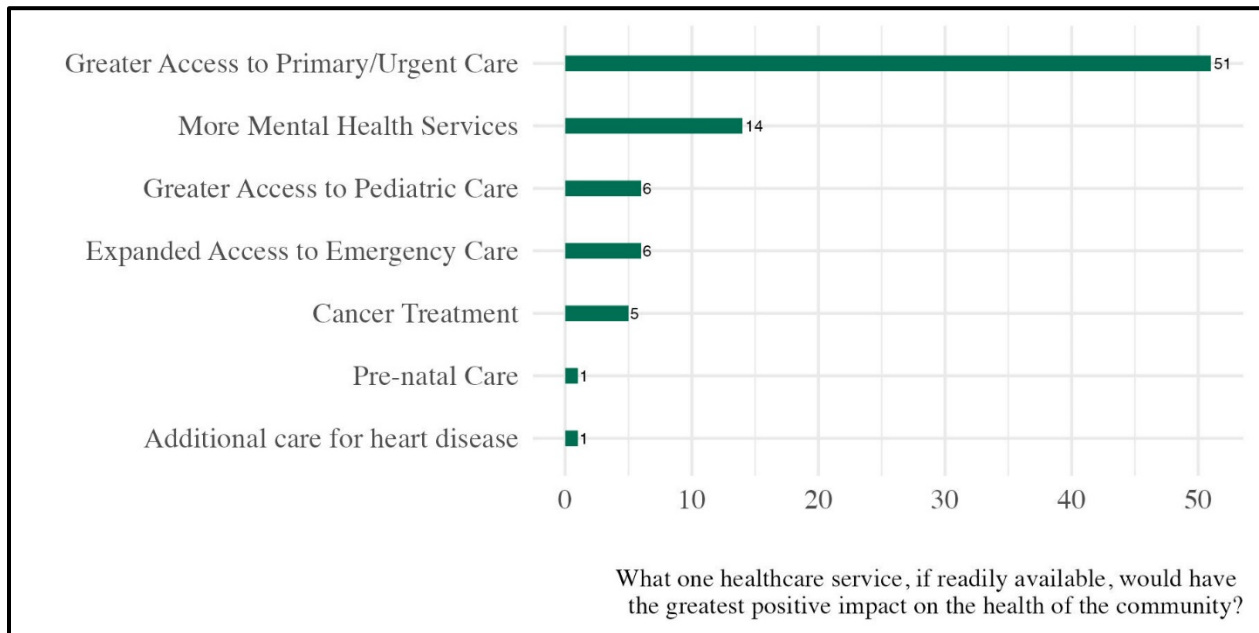
Respondents were next asked which services are difficult to obtain locally. The graph below shows that weight loss services, mental health treatment, regular health screenings, chronic disease care, drug and alcohol abuse treatment, and maternal and pre-natal care were those services that were needed but difficult to attain. Healthcare for low-income individuals and for special needs children was also mentioned by several respondents.

### Lanier County: Difficult to Access Healthcare Services



The next survey question asked respondents which services would most help Lanier County residents. Expanded access to primary or urgent care received the most responses in the survey. The second-most common response was for the community to bring in more mental health services. Beyond these two responses, residents also listed pediatric services, cancer treatment, and expanded ER care as other services that could have the greatest impact on the community.

### Lanier County: Which Healthcare Service Would Have Greatest Impact on Community





## Implementation Plan

SGMC Health Lanier currently provides many services and programs to meet the needs of Lanier County residents, and while no single medical facility can meet all of the challenges facing a community, opportunities exist to continue to meet the community's needs. The primary objective of this CHNA's Implementation Plan is to ensure that the pieces are in place to help all community members to achieve their optimum health and well-being.

The next section discusses the Implementation and Action Plan for the next CHNA cycle. In the section, we discuss:

- Description of Need
- Objectives for Addressing Need
- SGMC's Ongoing Programs/Services Related to Need
- Progress in Addressing Need

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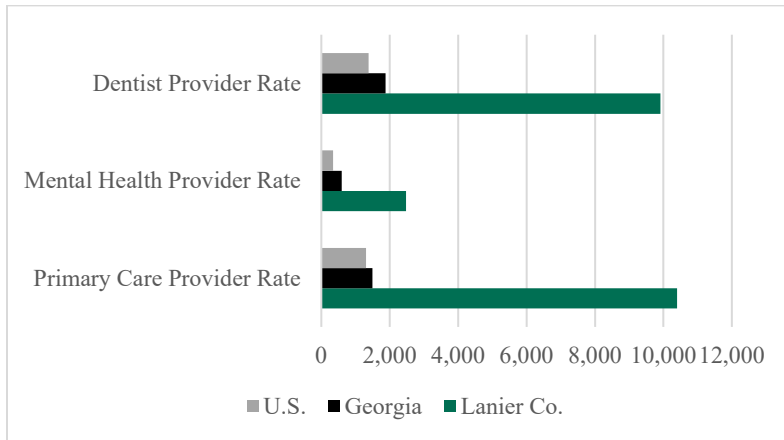
**1. Need for enhanced access to primary care services for uninsured, underinsured, and Medicaid recipients to reduce the inappropriate use of emergency services for common illnesses and minor injuries.**

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### Description of Need

There continues to be a serious need in the county for primary care providers, especially for those who are uninsured, underinsured (or those with high deductibles), or reliant upon Medicaid. The limited number of physicians, coupled with the paucity of after-hours facilities, concomitantly places greater strain upon the county's ER services.

## Lanier County: Providers per capita



The community's need for additional healthcare providers is well-established by the data. The focus group session referenced this challenge, and this was echoed by the community survey. The secondary data sources (utilized in the figure above) also speak to this need.

## Objectives for Addressing Need

- SGMC Health will continue to provide funding for the provision of free and low-cost primary care services through the Partnership Health Center.
- Continue to identify appropriate opportunities for nurse practitioners and physician's assistants to extend primary care access options within the community.
- Continue to facilitate recruitment efforts to attract new primary care physicians to the service area, particularly physicians willing to accept Medicaid patients.

## Ongoing Programs & Services Related to Need

- SGMC Health provides more than \$1.3 million in grant funds to the Partnership Health Center, for the provision of primary care services to uninsured individuals between the ages of 18 and 64.
- SGMC Health has grown its Physician Network to include 10 primary care locations in Lowndes, Berrien, and Lanier counties with 19 physicians specializing in Family Medicine or Internal Medicine. SGMC Health also utilizes three Nurse Practitioners at its clinics.

- SGMC Health, in affiliation with Mercer University School of Medicine, provides graduate medical education opportunities for physicians through residency training programs and medical student clinical site rotations. Fostering a culture of continuous learning and innovation while helping to attract and retain healthcare professionals to South Georgia, this partnership aims to expand the number of high-quality physicians interested in providing healthcare in our region. In addition to inpatient coverage, the residency program includes a continuity clinic. This serves as a low-cost primary care clinic and is an integral portion of internal medicine training as it allows residents to learn how to manage both common and complicated outpatient conditions and to follow patients over time.

## **Progress in Addressing Need**

SGMC Health continues to make significant progress in addressing the need to expand access to primary care services for uninsured, underinsured, and Medicaid recipients. SGMC Health welcomed 2 family medicine physicians and 2 internal medicine physicians in 2023.

While there continues to be a need to expand access to primary care services, substantial progress has been achieved in addressing this community health need over the past three years.

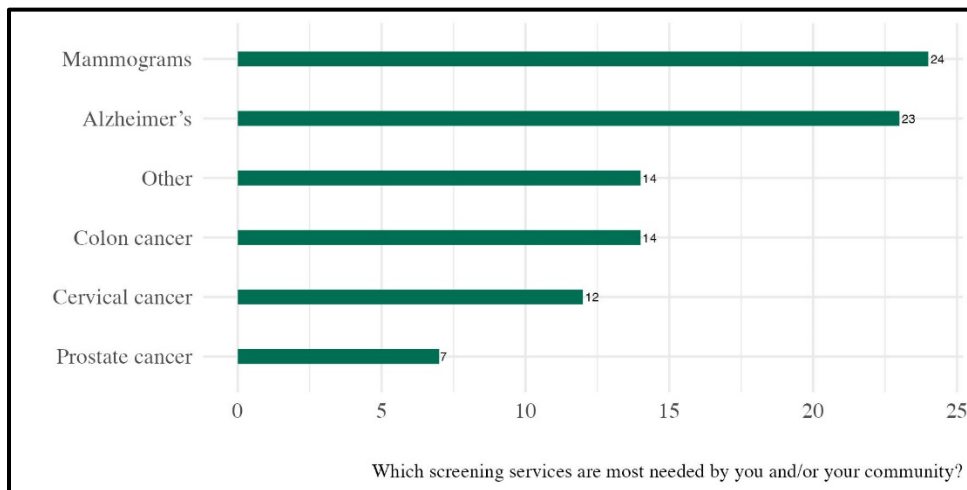
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## 2. Need for enhanced timely access to select medical subspecialty services

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### Description of Need

The second area of need lies with the number of specialists in the community. The figure below provides a summary of the community survey responses for which services are most needed in Lanier County. Five of the six leading categories all require specialist or specialist services in order to meet the community's needs. The figure in the preceding section also speaks to this need, as it alludes to the small number of dentists and mental health providers in the area.



### Objectives for Addressing Need

- Continue to monitor the demand for and the time it takes to obtain a medical subspecialty appointment within SGMC Health's service area and quantify the magnitude of unmet sub-specialty demand within the community.
- Identify options for addressing quantifiable unmet demand for medical sub-specialties

## Ongoing Programs & Services Related to Need

SGMC Health has more than 300 physicians with admitting privileges. The SGMC Health Physician Network includes more than 40 specialists to decrease the number of patients who leave the region for care. SGMC Health has an ongoing program to recruit physicians but continues to experience challenges in attracting selected medical sub-specialists to maintain open and active practices within the community.

The South Health District through the Children's Medical Services Telemedicine Program is equipped for pediatric patients to be seen by physicians that are not located in Valdosta via telemedicine. Pediatric patients can potentially see more than 20 specialists, such as cardiologists, dermatologists, endocrinologists, neurologists, pediatricians, psychiatrists, and Others.

In October of 2023, in recognition of Breast Cancer Awareness month and women's health, SGMC's Breast Center offered 50 free 3-D mammogram screenings to women who were uninsured and exhibited a demonstrated financial need for their annual screen at the SGMC Berrien Campus in Nashville. Additionally, SGMC's Breast Center, which opened in March of 2022 allows women to receive an order and screening mammogram without a primary care provider.

## Progress in Addressing Need

Over the past three years, SGMC Health has recruited an endocrinologist and neurosurgeon to address specific previously identified medical sub-specialist needs. In addition, SGMC Health has recruited a cardiologist who can perform electrophysiology procedures, a colorectal surgeon, two infectious disease specialists, and instituted an OB hospitalist program. SGMC Health has also added two gastroenterologists and three OB/GYNs in 2023. While there continues to be a need to enhance timely access to medical sub-specialty services, significant progress has been achieved over the past three years.

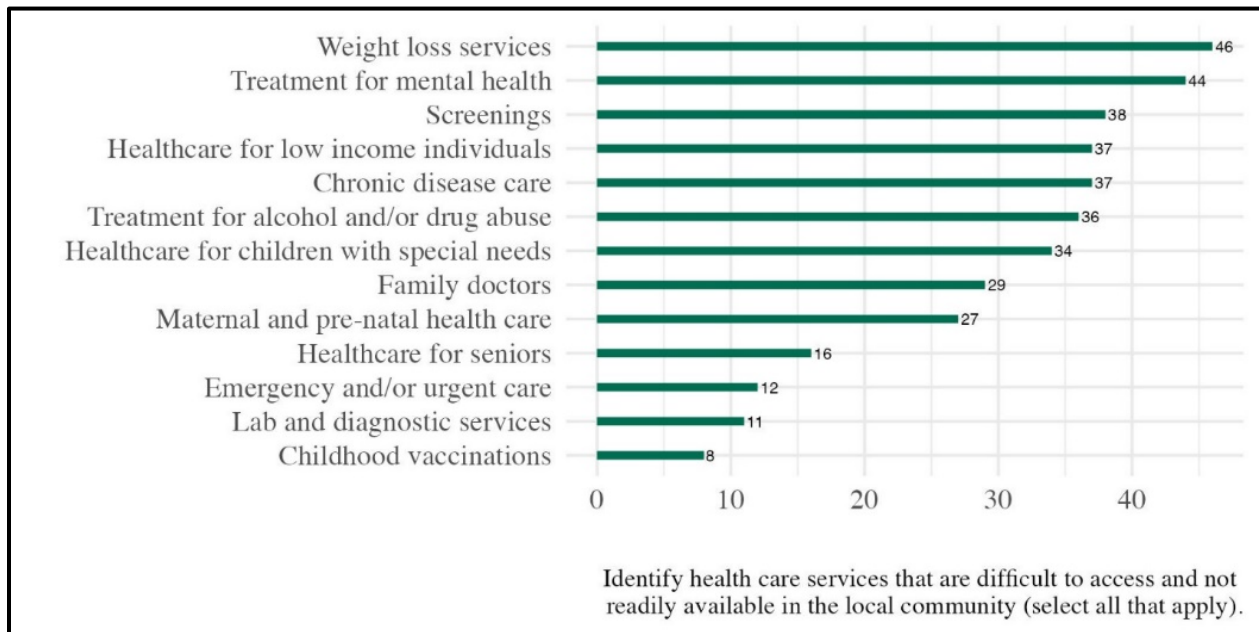
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### 3. Need for enhanced access to behavioral health services for uninsured, underinsured, and Medicaid recipients.

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#### Description of Need

Mental health is a growing concern across the U.S. and this study shows that Lanier County is hardly immune from this trend. The focus group session included an extended discussion of this issue, particularly in the school system. A member of the focus group alluded to the need for a crisis therapy provider who could provide immediate mental support for students undergoing challenges.



Lanier County's youth are just one piece to this puzzle though. The Community Health Rankings showed that there is a dearth of mental health providers (2,480 providers per Lanier resident) and the number of poor mental health days experienced by Lanier residents outpaces the state and national averages (see Appendix). The mental health need was also one of the leading concerns expressed in the community survey.

## Objectives for Addressing Need

- SGMC Health does not provide inpatient or outpatient treatment services for patients with behavioral health issues at its facilities in Valdosta or Lakeland. However, SGMC Health does provide emergency stabilization services as necessary to ensure patient safety when individuals with acute psychiatric and/or substance abuse issues present in the emergency department.
- SGMC Health provides inpatient treatment for geriatric psychiatric patients at its SGMC Health Berrien location.
- SGMC Health will continue to meet with behavioral health advocates to discuss the need for increasing access to behavioral health services for the target populations identified.

## Ongoing Programs & Services Related to Need

Other than its inpatient geriatric psychiatry program at SGMC Health Berrien, SGMC does not provide inpatient or outpatient behavioral health services. SGMC Health Main accepts patients within its emergency department in Valdosta who are in need of stabilization, pending transfer to an appropriate behavioral health facility.

## Progress in Addressing Need

SGMC Health continues to provide psychiatric and substance abuse stabilization services in the Emergency Department at its Main campus in Valdosta. SGMC is planning a dedicated behavioral treatment area with 11 behavioral health stations within its proposed Emergency Department expansion; projected to be completed by July 2025. Currently, SGMC Health does not plan to begin providing inpatient or additional outpatient behavioral health services.

SGMC Health works with the United Way and United2Prevent, a local task force focusing on preventing suicide, increasing awareness of suicide, and destigmatizing mental illness. United2Prevent's Mission is to increase the community's awareness, understanding, and knowledge of suicide so that people contemplating taking their own lives can be helped before they choose it as a solution to their suffering.

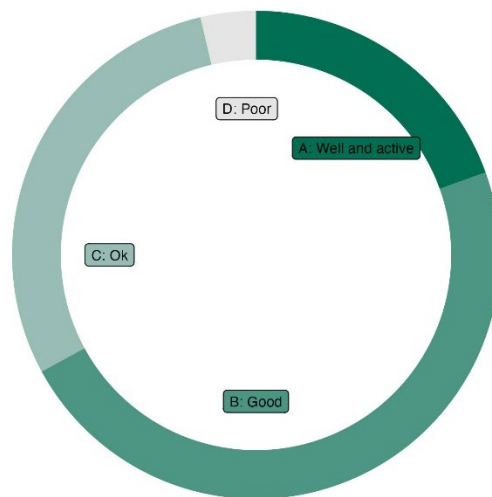
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#### 4. Need for partnerships to enhance education and promotion of healthy nutrition, lifestyle, and exercise to reduce the prevalence of diabetes, hypertension, heart disease, overweight, obesity, and cancer.

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### Description of Need

Lifestyle issues are another leading community concern. The challenge here is multi-faceted, which speaks to the complex nature of this issue. There should be efforts to address the need for healthier lifestyles. This is spurred on by low physical activity levels, higher tobacco use, drug and alcohol use, low health literacy, and unhealthy eating habits. When asked to grade their health, respondents answered “Ok” or better, with a near even split between “Well and Active”, “Good,” and “Ok.” A small fraction of respondents selected “Poor” or “Failing.”



Respondents were also asked about their exercise habits and more than half reported exercising less than twice per week.

Response	Count	Percentage
0-1 days per week	38	46.34
2-3 days per week	28	34.15
4-5 days per week	12	14.63
6-7 days per week	4	4.88



The focus group session provided an extended discussion of the community’s struggles with tobacco, drug, and alcohol use, and these concerns were reinforced by the survey feedback. Additionally, the focus group sessions raised concerns with health and healthcare literacy and nutrition. Several focus group attendees shared that many residents are unaware of what services are available. There is also a perception among some that residents are not actively taking steps to manage their own health and well-being. Similarly, it was shared that access to quality, nutritional foods is both scant and expensive. Consequently, this makes it more difficult for citizens to eat healthy.

## **Objectives for Addressing Need**

- Continue to support existing initiatives within the community that promote healthy nutrition, lifestyle, exercise, and smoking cessation programs.
- Continue to identify opportunities to enhance communication channels and social support networks to promote healthy nutrition, lifestyle, and exercise choices.

## **Ongoing Programs & Services Related to Need**

SGMC Health has multiple programs and activities to promote healthy nutrition, lifestyle and exercise to reduce the prevalence of cancer, diabetes, hypertension, heart disease, obesity and overweight. In addition, SGMC Health works collaboratively with local community partners to support healthy nutrition, lifestyle and exercise choices. Specific programs that SGMC sponsors and supports in collaboration with local community partners include:

Healthy Lifestyle: SGMC Health provides speakers for local civic organizations, clubs, and hospital sponsored “Lunch & Learn” programs.

Cancer Awareness: SGMC Health promotes and sponsors cancer awareness programs and events throughout the year including mammogram screening events, 5K run/walk, and the Relay for Life.

## **Progress in Addressing Need**

There continues to be a need for partnerships to enhance education and promotion of healthy nutrition, lifestyle, and exercise to reduce the prevalence of diabetes, hypertension, heart disease, overweight, obesity, and cancer.

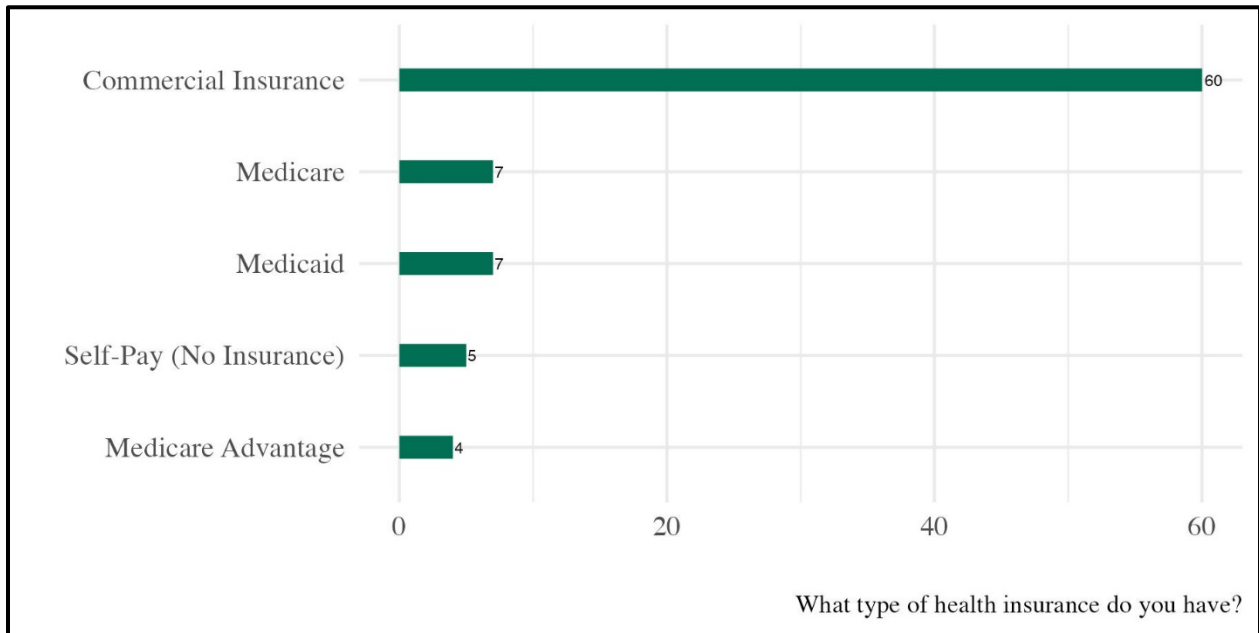
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## 5. Need for enhanced access for low-income families, including uninsured, underinsured, and Medicaid recipients

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### Description of Need

The final substantive challenge facing residents is the support for low-income families. This is illustrated from multiple sources. The uninsured population was estimated to be around 16%, which is notably higher than the national average (10%). There are also slightly more uninsured children in Lanier County (7%) compared to the national average (5%). Similarly, the community survey revealed that while most participants used commercial insurance, several other participants depend on Medicare, Medicare Advantage, or Medicaid for healthcare coverage.



The survey and focus group also conveyed that numerous individuals would benefit greatly from low-cost healthcare options for Lanier residents. Indeed, healthcare for low-income individuals received some of the most responses when respondents were asked which services are needed, though not readily available.

## **Objectives for Addressing Need**

- SGMC Health will continue to provide funding for the provision of free and low-cost primary care services through the Partnership Health Center.

## **Ongoing Programs & Services Related to Need**

- SGMC Health provides more than \$1.3 million in grant funds to the Partnership Health Center, for the provision of primary care services to uninsured individuals between the ages of 18 and 64.

## **Progress in Addressing Need**

There continues to be a need for healthcare access for low-income families.

## Appendix:

### Focus Group Participants

Name	Title
Michael Clarke	Chief Sales Officer, Georgia Print Company
Marta Hardy	Sales Specialist Affinity Building Systems
Stryde Jones	Chief Deputy, Lanier County Sheriff's Office
Diane Westberry	City Clerk, City of Lakeland
Geoff Hardy	Campus Administrator, SGMC Health Lanier

### Appendix B: Additional Survey Results

Table B.1: Which choice best describes the community's perception of the local hospital's services?

Response	Count	Percentage
Very favorable	19	22.62
Favorable	25	29.76
Neutral	17	20.24
Unfavorable	20	23.81
Very unfavorable	3	3.57

Table B.2: What type of health insurance coverage do you have?

Response	Count	Percentage
Commercial Insurance	60	72.29
Medicare	7	8.43
Medicare Advantage	4	4.82
Medicaid	7	8.43
Self-Pay (No Insurance)	5	6.02

Table B.3: When you need medical care, where do you typically receive care?

Response	Count	Percentage
Urgent Care or Walk-in clinic	12	14.29
Primary care physician	61	72.62
Public health department	0	0.00
Emergency room	10	11.90
Other	1	1.19

Table B.4: In the past 12 months, have you sought medical care outside of the local community or county in which you live?

Response	Count	Percentage
Yes	45	53.57
No	39	46.43

Table B.5: Where did you seek treatment?

Response	Count	Percentage
Valdosta	27	60.00
Tifton	4	8.89
Other	14	31.11

Table B.6: Do you have a primary care physician (PCP)?

Response	Count	Percentage
Yes	76	91.57
No	7	8.43

Table B.7: What is your experience with appointment wait times for primary care providers?

Response	Count	Percentage
Less than 1 week	32	42.11
Between 1 and 2 weeks	30	39.47
Between 3 and 4 weeks	3	3.95
4 weeks or longer	11	14.47

Table B.8: Have you seen a healthcare specialist in the past 2 years (e.g., cardiologist, OBGYN, dermatologist, gastroenterologist, psychiatrist, etc.)?

Response	Count	Percentage
Yes	68	80.95
No	16	19.05

Table B.9: Which statement best describes your willingness to use telehealth or telemedicine services (telehealth is defined as the use of electronic information or use of phones or computers to support long-distance clinical health care)?

Response	Count	Percentage
Very interested	27	32.14
Somewhat interested	35	41.67
Not interested	21	25.00
Opposed to using either service	1	1.19

Table B.10: If you have utilized hospital services or facilities in the past 3 years, how would you rate your experience(s)?

Response	Count	Percentage
Very favorable	17	20.48
Favorable	34	40.96
Neutral	21	25.30
Unfavorable	8	9.64
Very unfavorable	3	3.61