Requirements	Completed
Description of the Community Include a description of the community served and how it was determined (the hospital's service area). The community served determination is generally expected to be a geographic location. It may also take into account the target populations served (e.g., children) and principal functions (e.g., cancer center, long-term acute care). The community **cannot exclude** medically underserved (i.e., populations with health disparities, at-risk of not receiving care because of barriers to care due to lack of insurance, language, geography, finances or other barriers), low-income or minority groups who are part of the hospital's patient populations. These populations include patients who receive care regardless of insurance coverage or financial assistance status.	
Assessment Process and Methods Description of the process and methods used to conduct the assessment: • Sources and dates of data collected by the hospital facility and by other organizations • Methods used for collecting and analyzing the data The hospital facility may base the CHNA on data information collected by other organizations, such as a public health agency or a nonprofit organization. The needs assessment should describe the demographics of the community; health needs of the community; primary and chronic diseases and other health issues of uninsured people, low-income people and minority groups (Schedule H).	
Required Input A description of how the hospital included input from people who represent the broad interests of the community served by the hospital facility. It includes a description of when and how the organization consulted with these people (meetings, focus groups, interviews, surveys, written correspondence, etc.). At a minimum, the CHNA must include input from the following: • Public health - tribal, regional, state, local health or other department or agency that has knowledge, information or expertise relevant to the health needs of the community served by the hospital facility. • Leaders, representatives or members of medically underserved, low-income, minority and chronic disease populations in the community served by the hospital. Members of medically underserved populations or individuals or organizations serving those populations that experience health disparities "… or at risk of not receiving adequate medical care as a result of being uninsured or underinsured or due to geographic, language, financial or other barriers." • People representing the broad interests of the community who can address financial or other barriers to accessing care. • In addition, people located in or serving the hospital community are possible contacts, including health care consumers, consumer advocates, academic experts, local government officials, members of community-based organizations, school district employees, other health care providers, labor and workforce representatives, private business employees and insurers. Summarize the input of all these people, how the input was obtained and the time period. If the hospital considers input from another organization, the written report should identify the organization, provide the name and title of at least one individual with whom the hospital consulted and summarize the extent of the input. The report must identify the individual(s) providing input who have special knowledge and/or expertise in public health by name, title and affiliation, and provide a brief description of the special knowledge or expertise. The report also must describe the medically underserved, low-income and minority groups represented by organizations or individual input. Note: The report does not need to name focus group participants or people participating in other group input. Written comments from the public on the hospital's most recently conducted CHNA and Implementation Strategy should be considered as input.	

Significant Health Needs	Completed
Identify the significant health needs in the community. Significance is determined by the hospital based on the "facts and circumstances" present in the community. Include a prioritized description of the significant community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing the health needs. The hospital may use any criteria deemed appropriate to prioritize the significant health needs. Describe potential measures and resources identified through the CHNA to address the significant health needs.	
Assessment Distribution he CHNA must be widely distributed and follow the requirements below: • A complete version of the CHNA report is conspicuously posted on the facility website. • If the facility does not have its own website, the report should be posted visibly on the website for the hospital organization that operates it. • Instructions for accessing the CHNA report must be clear. • Posted reports must reproduce an exact image of the printed report. • Individuals with Internet access can access and print reports without special software and without payment of a fee. Persons wishing to view the report online are not required to create an account or provide personal information. • Anyone requesting a copy of the report is provided the direct website address or URL where document can be Accessed. • A print copy is available for public review, free of charge. • Reports remain widely available until two subsequent CHNA reports are made available.	