

AdventHealth Connerton

2020-2022

COMMUNITY HEALTH PLAN



University Community Hospital, Inc.
d/b/a AdventHealth Connerton

Approved by Hospital Board on: May 5, 2020

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Extending the Healing
Ministry of Christ


Advent Health

2020-2022 COMMUNITY HEALTH PLAN

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Acknowledgements

This report was prepared by Kimberly Williams and Nicole Hecht, with contributions from members of the AdventHealth Connerton Community Health Needs Assessment Committee representing health leaders in our community and AdventHealth Connerton leaders.

We are especially grateful for the internal and external partners who helped guide the development of the community health plan, which will enable our teams to continue fulfilling our mission of *Extending the Healing Ministry of Christ*.

OVERVIEW

University Community Hospital, Inc. d/b/a AdventHealth Connerton will be referred to in this document as AdventHealth Connerton or the “Hospital.”

Community Health Needs Assessment Process

AdventHealth Connerton in Land O Lakes, Florida, conducted a community health needs assessment in 2019. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations.

In order to ensure broad community input, AdventHealth Connerton created a Community Health Needs Assessment Committee (CHNAC) to help guide the Hospital through the assessment process. The CHNAC included representation from the Hospital, public health experts and the broad community. This included intentional representation from low-income, minority and other underserved populations.

The CHNAC met throughout 2018-2019. The members reviewed the primary and secondary data, helped define the priority issues to be addressed by the Hospital, and helped develop the Community Health Plan (CHP) to address the priority issues.

The CHP lists targeted interventions and measurable outcomes for each priority issue noted below. It includes resources the Hospital will commit and notes any planned collaborations between the Hospital and other community organizations and hospitals.

Priority Issues to be Addressed

The priority issues to be addressed include:

1. Heart Disease
2. Substance Misuse (Alcohol & Drug Abuse)
3. Tobacco Use

See Section 3 for goals, objectives and next steps for each priority selected to be addressed.

Priority Issues not to be Addressed

The priority issues that will not be addressed include:

1. Lack of Social or Emotional Support, Suicide, Depression
2. Poor Dental
3. Population with Low Food Access
4. Asthma
5. Physical Inactivity, Obesity, Overweight
6. Diabetes
7. Cancer

See Section 4 for an explanation of why the Hospital is not addressing these issues.

Board Approval

On May 5, 2020, the AdventHealth Connerton Board approved the Community Health Plan goals, objectives and next steps. A link to the 2020 Community Health Plan was posted on the Hospital's website prior to May 15, 2020. The Community Health Plan can be found at <https://www.adventhealth.com/community-health-needs-assessments>.

Ongoing Evaluation

AdventHealth Connerton's fiscal year is January – December. Implementation of the 2020 CHP begins upon its approval by the Board. The first annual evaluation will begin from the date of implementation through the end of the calendar year. Evaluation results will be attached to the Hospital's IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

For More Information

Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Connerton at <https://www.adventhealth.com/community-health-needs-assessments>.

CHP PRIORITY 1

Heart Disease

Heart disease is the leading cause of death in the United States. The major risk factors for heart disease are high blood pressure, high cholesterol, diabetes, being overweight/obese and having an unhealthy diet. One in four deaths in the U.S. are due to heart disease. By managing blood pressure and cholesterol, eating a healthy diet and incorporating physical activity daily, the risk of developing heart disease could be greatly reduced. In the AdventHealth Connerton Primary Service Area (PSA), the rate of death due to heart disease per 100,000 of the population is 160, which is higher than the state rate of 150. The percentage of adults in the PSA that have high blood pressure is 30% and 45% of adults have high cholesterol. Additionally, 10% of the PSA has been diagnosed with diabetes and 29% of adults are obese with a body mass index (BMI) greater than 30.

The Hospital is committed to working together with local community organizations and stakeholders to implement effective strategies to reduce the burden of heart disease by providing health education in the community and connecting community members to resources to help manage blood pressure and cholesterol. The Hospital will address this priority through AdventHealth's Food is Health® program. The Food is Health® program is a regional initiative, which appears on multiple Community Health Plans. However, the projected and reported numbers are specific to AdventHealth Connerton. The Food is Health® program is provided at no cost for community members who do not have the means or transportation to include fresh vegetables and fruits in their diet. Food is Health® reaches into communities to improve the overall health and wellness of adults living in food deserts or low-income/low-access areas.

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| Goal | To increase access to health education, early intervention programs and resources related to heart disease |
| Objective | Increase the number of Hospital-sponsored American Heart Association (AHA) community CPR out-of-hospital bystander classes for adults and youth from a baseline of zero to three by the end of year three (December 31, 2022). |
| Objective | Increase access to blood pressure management education among underinsured/uninsured community members by sponsoring and implementing two local community health fair events from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | Increase the amount of paid staff time for Hospital staff/team members to volunteer with community organizations addressing heart disease and stroke from a baseline of zero hours to 100 hours by the end of year three (December 31, 2022). |

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| Goal | To increase healthy eating and physical activity among adults and youth in the primary service area |
| Objective | Provide the Food is Health® program to low income families in the PSA by offering three nutrition education class series from a baseline of zero classes by the end of year three (December 31, 2022). |
| Objective | Increase access to culturally appropriate nutritious food options among Food is Health® program participants through 120 produce vouchers distributed from a baseline of zero produce vouchers by the end of year three (December 31, 2022). |
| Objective | Increase new partnerships with local community organizations in the Food is Health® program to four partners from a baseline of zero partners by the end of year three (December 31, 2022). |
| Objective | Increase participation in the Food is Health® program among low-income individuals and families in the Hospital's PSA to 30 participants from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | Through the Food is Health® program increase access to health screenings among adults living in food deserts or low-income/low-access communities to 45 screenings from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | The Food is Health® community employee volunteer initiative will increase Hospital staff/team volunteer participation efforts with organizations addressing food security from a baseline of zero hours to 200 hours by the end of year three (December 31, 2022). |

Hospital Contributions

- Provide community benefit staff to manage, implement and evaluate community strategies and partnerships.
- Community outreach nurse teams to provide free biometric screenings for Food is Health® program participants.
- Contribute to the costs to provide free produce for Food is Health® program participants.
- Collaborate with community partners to provide education and biometric screenings for community members participating in the Pioneer Medical mobile clinic events.
- Collaborate with community partners to host and staff time to implement community health fair events that aim to increase access to blood pressure management education for uninsured/underinsured community members.

- Community benefit staff to strategically align with internal Hospital case management teams and AdventHealth Care 360 Transition¹ teams to connect community members with resources to address heart disease.
- Community benefit staff to actively participate in community meetings with partners addressing heart disease.
- Offer Hospital staff volunteer time to participate in volunteer activities addressing heart disease.
- Community benefit staff and Hospital cardiopulmonary leadership teams to actively serve on community boards associated with addressing heart disease.

Community Partners

- American Heart Association to expand community benefit strategies to increase community awareness of access to health education to better understand blood pressure and how to make health behavior changes to improve overall heart health.
- Pioneer Medical Group to provide linkages to follow up care for blood pressure management for uninsured/underused community members at community health fair events.
- The University of Florida/Institute of Food and Agricultural Sciences (UF/IFAS) Extension Pasco County to provide nutrition education for Food is Health[®] class participants.
- Dube's Mobile Market, a local produce vendor, to provide culturally appropriate nutritious food options among Food is Health[®] program participants.
- Collaborative relationships with local sites (churches, community centers, schools) to host free community education and training opportunities.

¹ AdventHealth's Care 360 Transition teams assist the patient by conveniently connecting the patient with health care resources and services needed for a successful recovery before leaving our hospital.

CHP PRIORITY 2

Substance Misuse

Substance misuse is the repeated use of harmful mind-altering substances such as drugs and alcohol. In 2016, drug overdoses killed more than 63,000 people in the United States. The misuse of prescription drugs has risen in recent years especially the misuse of opioid pain relievers. On average, 130 people die every day in the U.S. from an opioid overdose. Excessive use of alcohol can have immediate health effects, including unintentional injury, violence, alcohol poisoning, risky sexual behaviors and miscarriage among pregnant women. It can also have long-term health effects, including high blood pressure, heart disease, liver disease, dementia, depression and cancer. Underage drinking, or alcohol consumption by those under the age of 21, has been linked to death from alcohol poisoning, suicide, unintentional injury and alcohol dependence later in life. In the U.S., excessive alcohol use was the cause of 1 in 10 deaths among adults between the ages of 20-64. In 2010, people under the age of 21 accounted for 189,000 ER visits for injuries and other conditions related to alcohol use. In the AdventHealth Connerton Primary Service Area (PSA), 20% of adults aged 18 and above drank excessively, which is higher than the state average of 17%.

AdventHealth Connerton recognizes the importance of partnering with local community organizations and stakeholders to strengthen efforts to increase community member access to care and services that aim to prevent the misuse of alcohol and other substances.

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| Goal | To increase knowledge and awareness of existing community resources related to the prevention and treatment of substance misuse. |
| Objective | Increase the reach of the Pasco County Substance Abuse Taskforce (PCSAT) into West Pasco communities by co-hosting at least three meetings in West Pasco from a baseline of zero by end of year three (December 31, 2022). |
| Objective | Increase the current reach of the Pasco County Substance Abuse Taskforce (PCSAT) into West Pasco communities by co-hosting at least one community forum in West Pasco from a baseline of zero by end of year three (December 31, 2022). |
| Objective | Increase the number of Mental Health First Aid USA certification training classes provided for free to community members residing in the Hospital's PSA to three certification classes from a baseline of zero certification classes by the end of year three (December 31, 2022). |

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| Goal | To identify community partners addressing substance abuse or offering support groups/classes in the community |
| Objective | Increase access to community support groups for adults residing in the Hospital's PSA who are recovering from misuse of alcohol and other substances by sponsoring two on-going support groups from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | Increase the number of Pasco County NAMI Ending the Silence presentations provided for free to middle and high school-aged youth residing in the Hospital's PSA by three classes from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | Increase the amount of paid time for Hospital staff/team members to volunteer with community organizations addressing the misuse of alcohol, tobacco and other substances from a baseline of zero hours to 300 hours by the end of year three (December 31, 2022). |

Hospital Contributions

- Expand partnership with the Pasco County Substance Abuse Task Force to reach into West Pasco County (host meetings, host forum, share resources, contribute to the costs of community resource tool kits).
- Collaborate with community partners to sponsor at least two alcohol related on-going support groups in community locations (churches, community centers).
- Collaborate with community partners to sponsor printing costs for printing Substance Abuse Task Force community resource guides (substance misuse and mental health resources).
- Offer hospital staff volunteer time to participate in volunteer activities addressing substance misuse.
- Community benefit staff and the Hospital's leadership teams paid time and associated travel cost expenses to actively serve on community boards associated with addressing substance misuse.
- Community benefit paid staff hours and associated travel cost expenses to actively participate in community meetings with partners addressing substance misuse.

Community Partners

- NAMI Pasco and Alcohol Anonymous to explore and expand additional community benefit partnerships to increase awareness of and access to suicide/depression/mental health resources, training opportunities and services.
- Pasco County Substance Abuse Task Force membership
- Strengthen collaborative relationships with local sites (churches, community centers, schools) to support community efforts to address suicide/depression/mental health.
- All4HealthFL Collaborative (a coalition of local hospitals and Florida Department of Health teams) working together to address behavioral health in Pasco County.

CHP PRIORITY 3

Tobacco Use

Tobacco use is the leading preventable cause of death in the United States. Since 1964, 20 million people in the U.S. have died from smoking-related illnesses.² Tobacco use can cause a wide range of health issues including cancer, heart disease, diabetes, oral health diseases and harmful reproductive effects. More than 30 million adults in the U.S. smoke cigarettes and more than 50 million are exposed to secondhand smoke, which is just as harmful as smoking. Secondhand smoke can cause heart disease and lung cancer in nonsmokers and as well as asthma, Sudden Infant Death Syndrome (SIDS) and other respiratory infections in infants and children. In the AdventHealth Connerton Primary Service Area (PSA), 22% of adults aged 18 and above smoke cigarettes, which is higher than the state average of 19%.

AdventHealth Connerton is committed to partnering with local community organizations and stakeholders to strengthen community access to tobacco prevention and treatment resources to quit smoking and reduce the prevalence of tobacco use among adults.

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| Goal | To decrease tobacco use among adults and youth in the community. |
| Objective | Partner with Gulf Coast Area Health Education Center (AHEC) to increase community awareness of free programs and resources available for tobacco cessation by providing three community lunch and learn sessions from a baseline of zero by the end of year three (December 31, 2022). |
| Objective | Increase knowledge of free tobacco cessation programs and tobacco prevention/treatment resources for patients at discharge by partnering with AHEC to provide continuing education classes to 75 team members (treating patients with tobacco use) from a baseline of zero by the end of year three (December 31, 2022). |
| Goal | To increase access to smoking cessation classes for adults by partnering with local community organizations. |
| Objective | Provide community referrals to enroll in free AHEC tobacco cessation programs and receive free intervention therapies to quit smoking tobacco. Through a partnership with AHEC, create |

² smoking related illnesses includes non-smoking tobacco

Objective | a community referral system to link adults residing in the Hospital's PSA, providing resources for 50 community members from a baseline of zero by end of year three (December 31, 2022).
Increase access to tobacco cessation classes in adults residing in the Hospital's PSA by six classes from a baseline of zero by the end of year three (December 31, 2022).

Hospital Contributions

- Community benefit staff to work with AHEC staff to track and report referrals from the community to smoking cessation classes.
- Community benefit staff to actively participate in community meetings with partners addressing tobacco use.
- Community benefit staff and the Hospital leadership teams to actively serve on community boards associated with addressing tobacco use.
- Offer hospital staff volunteer time to participate in volunteer activities addressing tobacco use.

Community Partners

- American Heart Association to expand community benefit strategies to increase community awareness of the negative impacts of tobacco use on heart health (youth vaping crisis initiative and advocacy efforts).
- Pasco County Substance Abuse Task Force to reach into West Pasco County (host meetings, share resources and contribute to the costs of community resource tool kits).
- Strengthen collaborative relationships with local sites (churches, community centers, schools) to support community efforts to address tobacco use.
- Gulf Coast Area Health Education Center (AHEC) Tobacco Free Florida Smoking Cessation Program to provide free education and resources (patches and other quit aids) for smoking cessation.

PRIORITIES THAT WILL NOT BE ADDRESSED

The Community Health Needs Assessment also identified the following priority health needs that will not be addressed. These specific issues and an explanation of why the Hospital is not addressing them, are listed below.

The following four issues **WILL NOT** be addressed for the following reasons below:
Potential challenges or barriers to addressing the need such as:

(1) The issue should not be addressed as an individual problem but can be indirectly impacted positively by first addressing multiple issues selected above by the Hospital CHNAC.

(2) CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.

1. Lack of Social or Emotional Support, Suicide, Depression

In the AdventHealth Connerton PSA, 21% of adults aged 18 and above lack social and emotional support. About 22% of the Medicare population in the PSA has depression while the rate of death due to suicide is 16 (per 100,000). A lack of social and emotional support can contribute to the development of depression which affects an individual's ability to cope with daily stressors and lead a healthy life. In 2014, 43,000 people in the U.S. committed suicide.

The CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.

2. Poor Dental

Many oral diseases can be prevented with routine care and regular dental checkups. The health of the teeth, the mouth, and the surrounding craniofacial (skull and face) structures is central to a person's overall health and well-being. Lack of access to dental care for all ages remains a public health challenge. In the AdventHealth Connerton PSA, the access to dentists' rate (per 100,000 pop.) is 45 (in 2015 year), as compared to the state rate of 56.

The CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.

3. Population with Low Food Access

In the AdventHealth Connerton PSA, 15% of the population is food insecure meaning they lack reliable access to nutritious and affordable food. Different factors can account for low food access including

affordability, transportation options, and availability of grocery stores. Low food access has been linked to an increased risk for developing negative health outcomes.

The CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.

4. Asthma

Asthma is a chronic condition when the airways in the lungs are always inflamed. The inflammation causes coughing, wheezing, chest tightness, and shortness of breath. In the AdventHealth Connerton PSA, 14% of adults aged 18 and above have asthma.

The CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.

5. Physical Inactivity, Obesity, Overweight

Obesity occurs when an individual's weight is higher than what is considered healthy. Obesity can be caused by behavioral and genetic factors. Other factors that contribute to obesity is the built environment, for example where you live and if you have access to healthy food and the ability to exercise outside. Obesity can cause serious health complications including high blood pressure, high cholesterol, heart disease, osteoarthritis and some cancers. From 2015 – 2016, obesity affected about 93 million adults and 13 million children in the U.S. In the AdventHealth Connerton PSA, 29% of adults are obese (BMI greater than 30), which is higher than the state average of 27%. Additionally, 36% of adults in the PSA are considered overweight (BMI between 25 and 30).

The issue should not be addressed as an individual problem but can be indirectly impacted positively by first addressing heart disease selected above by the Hospital CHNAC.

6. Diabetes

Diabetes is the seventh leading cause of death in the U.S. affecting 29 million people. More than 80 million people in the U.S. are pre-diabetic meaning they're at an increased risk of developing diabetes in the next few years. When diabetes goes untreated it can lead to more serious health issues such as vision loss, heart disease, stroke, nerve and kidney diseases. In the AdventHealth Connerton PSA, 10% of adults have been diagnosed with diabetes, which is higher than the state average of 9%.

The issue should not be addressed as an individual problem but can be indirectly impacted positively by first addressing heart disease selected above by the Hospital CHNAC.

7. Cancer

Cancer is the second leading cause of death in the U.S. with more than 100 types. Many are preventable and research advances in detection and treatment have greatly improved survival rates. In the AdventHealth Connerton PSA, the rate of death due to cancer is 166 per 100,000 population.

The CHNAC did not perceive the ability to have a measurable impact on the issue within the three years allotted for the Community Health Plan with the current resources available to the community and the Hospital at this time.