

Florida Hospital Orlando

2016 Community Health Needs Assessment



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Introduction

Community engagement is the process of working collaboratively with and through groups of people affiliated by geographic proximity, special interest or similar situations to address issues affecting their well-being. It is a powerful vehicle for bringing about environmental, cultural, health and behavioral changes that will improve the quality of life of the community. It often involves partnerships and coalitions that help mobilize resources and influence systems, change relationships among partners, and serve as catalysts for changing policies, programs and practices.

Florida Hospital and its community partners engaged Impact Partners, LLC to conduct its 2016 Community Health Needs Assessment. Impact Partners conducts community engagement/assessment projects across the United States. Since each community is unique, the approach to better understanding a community's need is aligned with the Social-Ecological Model. The Social-Ecological Model is a comprehensive approach to health and urban planning that not only addresses a community's or individual's risk factors, but also the norms, beliefs, and social and economic systems that create the conditions for poor community health outcomes.

Impact Partners subscribes to the notion that social, natural and physical environments in which people live, as well as their lifestyles and behaviors, can influence their quality of life and health outcomes. Communities can achieve long-term quality of life improvements, prosperous economies, and happy and healthy neighborhoods when ordinary citizens become involved and work together to affect change and can influence the direction of a community, not just people who already have power.

The new economy is simply this: when communities invest in quality of life assets and infrastructure, their economies grow and people prosper. Period.

Florida Hospital conducted its 2016 Community Health Needs Assessment (CHNA) in two parts: a regional needs assessment for four counties in Central Florida (Lake, Orange, Osceola and Seminole Counties) followed by assessments focused on and tailored to the nine hospital facilities in these counties.

Impact Partners worked to build on top of the first CHNA conducted by the Central Florida Community Benefit Collaboration ("the Collaboration") in 2013 in order to maintain the integrity of the original benchmark data, to evaluate the progress of the previous priorities by comparing historical benchmark data and to measure long-term progress.

The content that follows includes data from a number of sources about Orange County and Florida Hospital Orlando's primary service area (PSA), as well as a description of the process of choosing the top health priorities based on this data. This report does not include all of the indicators analyzed in the multi-county CHNA; rather, it offers a condensed and consolidated picture of the concerns of this specific campus of Florida Hospital. This data was used by a group of Florida Hospital administrators to determine feasible and impactful priorities for the community that Florida Hospital Orlando serve. The priorities chosen and the process that was followed is outlined in this report. Further, a separate report reflecting the work of the larger, multi-county CHNA will be disseminated to each of the Collaboration partners, including Florida Hospital, Orlando Health, South Lake Hospital, in affiliation with Orlando Health, Aspire Health Partners and multiple county health departments.

This document is specific to **Florida Hospital Orlando**.

Executive Summary

In Central Florida, there is a well-established tradition of healthcare organizations, providers, community partners and individuals committed to meeting local health needs. The region is home to several respected hospitals that are ranked in the nation's top 100, a Level One Trauma Center, nine designated teaching hospitals and the University of Central Florida College of Medicine. Even with the current economic challenges and healthcare's changing landscape, these organizations remain committed to serving Central Florida.

In spite of the region's dedication to meeting local health needs, there is still work to be done. In the center of the Sunshine State, more than 2.3 million people live in Lake, Orange, Osceola and Seminole Counties. Of these residents, approximately 6.2 percent are unemployed; poverty rates have increased by 64 percent since 2000; childhood poverty is up 51 percent over the same period; the cost of housing is a burden for many; emergency rooms (ERs) continue to be over-utilized; access to healthy, nutritious food is not guaranteed; and homelessness persists.

These societal challenges often prevent Central Floridians from achieving the level of social, physical, environmental and spiritual well-being that is necessary for maintaining health and quality of life. CHNAs take into account these four areas of well-being, serve as a baseline of health status in a given community, and are used to plan social and medical interventions relevant to the population.

Four not-for-profit hospitals — Florida Hospital, Orlando Health, South Lake Hospital, in affiliation with Orlando Health and Aspire Health Partners — alongside the Florida Department of Health in Lake, Orange, Osceola and Seminole Counties collaborated in 2015 and 2016 to create a CHNA for Lake, Orange, Osceola and Seminole Counties. The CHNA describes the health of Central Floridians for the purpose of planning interventions relevant to the community and to fulfill the IRS Community Benefit requirements for all licensed not-for-profit hospitals.

A number of indicators about physical, behavioral and mental health; built environment; as well as healthcare access, utilization and insurance coverage were evaluated using both secondary and primary data including hospital claims data. Secondary data were gathered on the county level from the U.S. Census Bureau, including the American Community Survey; Florida Community Health Assessment Resource Tool Set (CHARTS); the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS) Data; County Health Rankings; The Central Florida Cares Health System (CFCHS) 2015 Behavioral Health Needs Assessment*; and hospital utilization data. More geographically specific data about hospital utilization were gathered by claims data and visually represented with hot spotting techniques. Primary data included hospital claims data, surveys distributed to both providers and consumers, in-depth interviews with community stakeholders, and community conversations within Orange County and Florida Hospital's PSA.

*Central Florida Cares Health System, Inc. (CFCHS) is the managing entity overseeing state-funded mental health and substance abuse treatment services in four counties in Central Florida: Brevard, Orange, Osceola and Seminole. Three of those counties fall within the purview of the Central Florida Health Needs Assessment (CHNA): Orange, Osceola and Seminole. Basic conclusions from the 2015 Behavioral Health Needs Assessment were included in the CHNA reports to supplement the secondary and primary mental health data gathered by Impact Partners.

County Health Rankings are published by the University of Wisconsin Population Health Institute and The Robert Wood Johnson Foundation to help counties understand what influences how healthy residents are now (Health Outcomes) and how healthy a county will be in the future (Health Factors). Health Outcomes weigh Length of Life and Quality of Life equally and Health Factors are comprised of Health Behaviors (weighted at 30 percent), Clinical Care (20 percent), Social and Economic Factors (40 percent) and Physical Environment (10 percent). This results in a number of rankings given to each county in a state. Thus, decision-makers in said counties can see how they stack up relative to the other counties in their state on each of the aforementioned eight measures. They can also help these same decision-makers pinpoint areas of focus to improve the health and well-being of the residents. All 67 counties in Florida receive rankings. Orange County’s health rankings are listed below.

Orange County Health Rankings (2015)

HEALTH OUTCOMES	HEALTH FACTORS	LENGTH OF LIFE	QUALITY OF LIFE	HEALTH BEHAVIOR	CLINICAL CARE	SOCIAL & ECONOMIC FACTORS	PHYSICAL ENVIRONMENT
13	18	9	24	10	33	20	33

Source: County Health Rankings and Roadmap - The Robert Wood Johnson Foundation Program

All of these data were used to identify the top health priorities in each county. Utilizing this larger assessment data as a foundation, Florida Hospital conducted individual assessments for each of the nine Florida Hospital campuses located in this Central Florida region:

- Florida Hospital Altamonte – Seminole County
- Florida Hospital Apopka – Orange County
- Florida Hospital Celebration Health – Osceola County
- Florida Hospital East Orlando – Orange County
- Florida Hospital Kissimmee – Osceola County
- Florida Hospital Orlando – Orange County
- Florida Hospital for Children – Orange County
- Florida Hospital Waterman – Lake County
- Winter Park Memorial Hospital, a Florida Hospital – Orange County

This document is a campus-specific CHNA for Florida Hospital Orlando and the community it serves.

Methods for Engaging the Community in the Assessment

The 2016 Community Health Needs Assessment for the Central Florida region and the seven Florida Hospital campuses in Orange, Osceola and Seminole Counties was built on input from people representing the broad (and local) community, as well as low-income, minority and other medically underserved populations. This input was solicited throughout 2016, and was gathered and considered in multiple ways:

1. Each hospital campus had a Community Health Needs Assessment Committee/Task Force (CHNAC) that included representatives of the hospital and community with a special focus on underserved populations within the hospital community/service area. Those members of the Committee who serve members of minority, low-income and other medically underserved populations are indicated in the listing. The Committee met twice in 2016, and also participated in an online survey to confirm the priority issues discussed in the first meeting.

The Committee's role was to guide the Assessment process and select the priority issues for the hospital's community. Specific Committee functions include:

- a. Review of all primary and secondary data
 - b. Prioritization of key issues identified in the Assessment
 - c. Selection of Priority Issues to be addressed by the hospital
 - d. Assistance with the development of a Community Asset Inventory (see Section 9)
 - e. Participation in community stakeholder surveys
 - f. Development of the Community Health Plan (implementation strategies) to address the Priority Issues identified in the Assessment
2. Consumer surveys
 3. Provider surveys
 4. Community conversations
 5. In-depth community stakeholder interviews
 6. Public Health input and expertise
 - a. Membership on the Community Health Needs Assessment Committee
 - b. Reliance on Public Health input and expertise throughout the Assessment process
 - c. Use of Public Health data
 7. Participation in other community health collaborations representing a broad cross-section of the community

Florida Hospital Community Health Needs Assessment Process

Multi-county Assessment

The multi-county assessment that covered Lake, Orange, Osceola and Seminole Counties was conducted by the Central Florida Community Benefit Collaboration. This Collaboration includes Florida Hospital, Orlando Health, Aspire Health Partners, and the Florida Department of Health in Lake, Orange, Osceola and Seminole Counties. The Collaboration engaged Impact Partners to collect and compile the assessment data.

County- and PSA-level Common Concerns

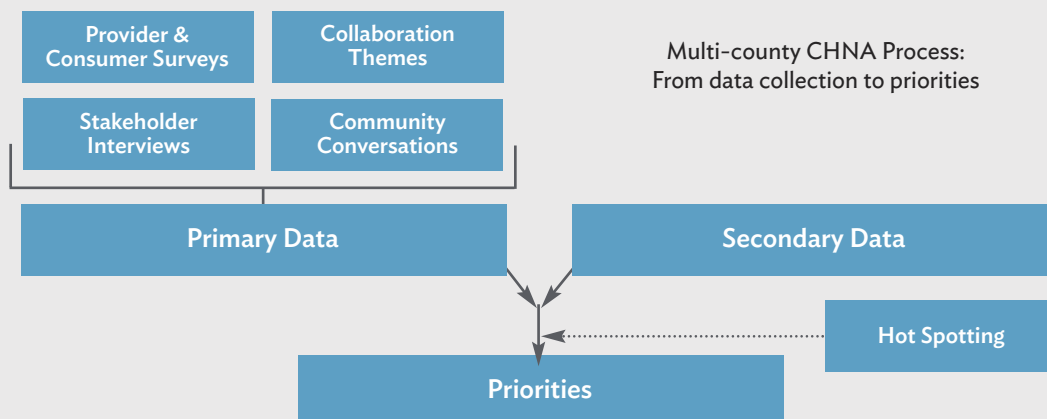
The multi-county assessment integrated a number of secondary and primary data and claims data to generate lists of common concerns for the region as a whole, as well as for each county. County-, ZIP code- and neighborhood-level data were then combined with demographic indicators and built environment (social determinants) for the PSAs of each of the Florida Hospital campuses.

Campus Priorities

Florida Hospital also created campus-specific CHNA taskforces that considered the county- and PSA-level concerns and worked to select a top priority for the hospital to address. These taskforces were comprised of hospital campus leadership, public health experts and community stakeholders that represented low-income, minority and other underserved populations from each campus PSA. The Collaboration’s CHNA data findings were reviewed with each taskforce, as well as the campus-specific hot spot. The taskforces then discussed and deliberated which health concern was the top priority to the hospital based on the following questions:

1. How acute is the need? (based on data and community concern)
2. What is the trend? Is the need getting worse?
3. Does the hospital provide services that relate to the priority?
4. Is someone else — or multiple groups — in the community already working on this issue?
5. If the hospital were to address this issue, are there opportunities to work with community partners?

Based on the similar topics that emerged from these discussions, as well as post-surveys collected from community stakeholders after the meetings, Florida Hospital chose a three-part, primary Priority Issue for all campuses: **Access to Care – Preventative, Primary and Mental Health.**



Hospital Description

Florida Hospital Orlando is the flagship campus of the Florida Hospital System. With 1,289 beds, the Orlando campus serves as a major tertiary facility for much of the Southeast and serves as the home for many of the Florida Hospital Institutes including Florida Hospital Cancer Institute, Florida Hospital Cardiovascular Institute, Florida Hospital Neuroscience Institute, Florida Hospital Transplant Institute and the Florida Hospital Research Institute. In addition to our acute and critical care facility, Florida Hospital Orlando houses the Translational Research Institute — a 54,000 square-foot facility devoted to the study of obesity and metabolic origins of cardiovascular disease, strategic partnerships will aid in the development of new treatments to battle diabetes and obesity.

Florida Hospital Orlando also serves as a teaching hospital for family medicine, allopathic and osteopathic tracts, emergency medicine, neuromusculoskeletal medicine, general surgery, podiatric medicine and surgery, and internal medicine. As one of the premier health systems in the nation, Florida Hospital Orlando sets the standard for innovation, quality and comprehensive care.

Hospital Service Area

ZIP Codes

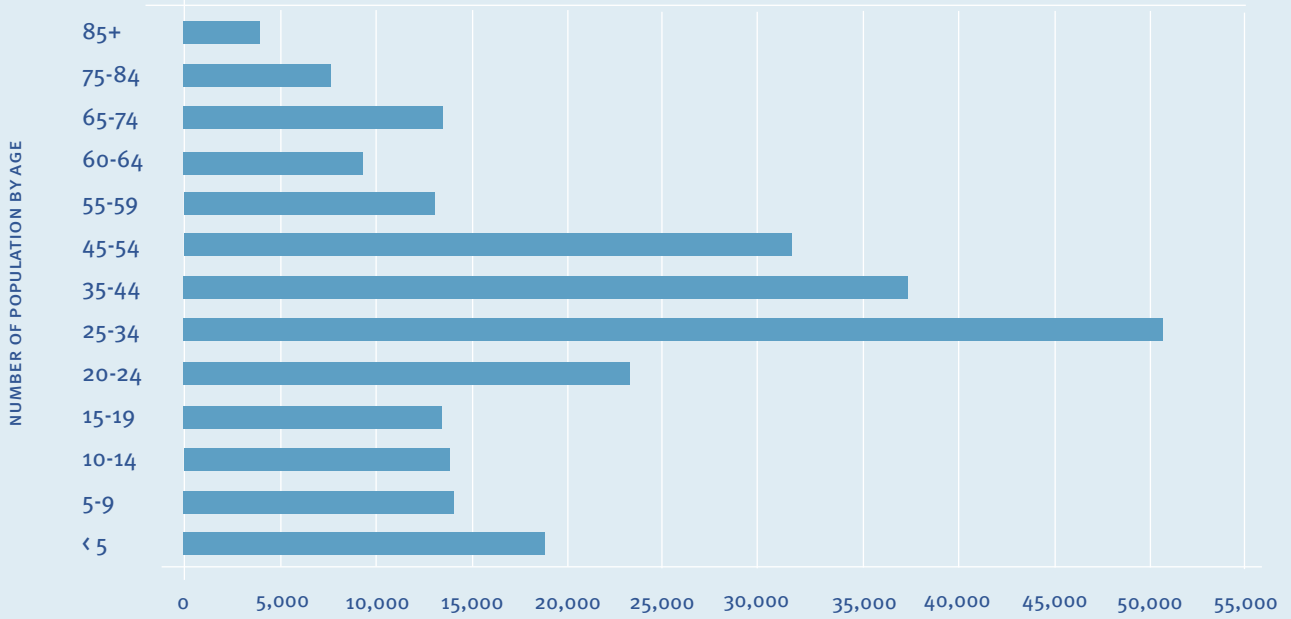
Florida Hospital Orlando has become one of the most trusted and comprehensive hospitals in the region; as a result, the PSA of the Orlando campus includes all of Orange, Osceola and Seminole Counties.

Community Description

Orange County, Florida, is part of the Orlando-Kissimmee-Sanford Metropolitan Statistical Area (MSA). The county is approximately 150 miles from the Florida/Georgia border, in an area surrounded by numerous citrus growers and 1,200 lakes. Orlando is the county seat and lies about 50 miles from the Atlantic Ocean to the east, 75 miles from the Gulf Coast to the west, and about 375 miles from the tip of the Florida Keys. More than 90 parks, trails and facilities offer activities for just about anyone. The county's MSA also includes portions of Seminole, Lake and Osceola Counties. The City of Orlando, known as "The City Beautiful" and sometimes as "The Theme Park Capital of the World," is one of the top five tourist destinations in America and attracts more than 51 million tourists annually. In recent years, Orlando has become a center for digital media and biomedicine industries. Florida Hospital Health Village, a healthcare and life sciences discovery-oriented, mixed-use urban community, is located on 172 acres within vibrant Downtown Orlando. Offering a wide spectrum of powerfully aligned resources, Health Village supports rapid translation of products and services to accelerate market entry. Orlando is also home to the University of Central Florida, which is the second-largest campus in terms of enrollment as of 2012, based upon recent surveys, and the hub of the High-Tech Corridor with International Corporate Park, Innovation Way and Central Florida Research Park. As of 2012, approximately 250,000 people reside in the City of Orlando. Nearly half of the residents are between the ages of 25-64. A majority of residents identify as White and nearly one-third are Hispanic.

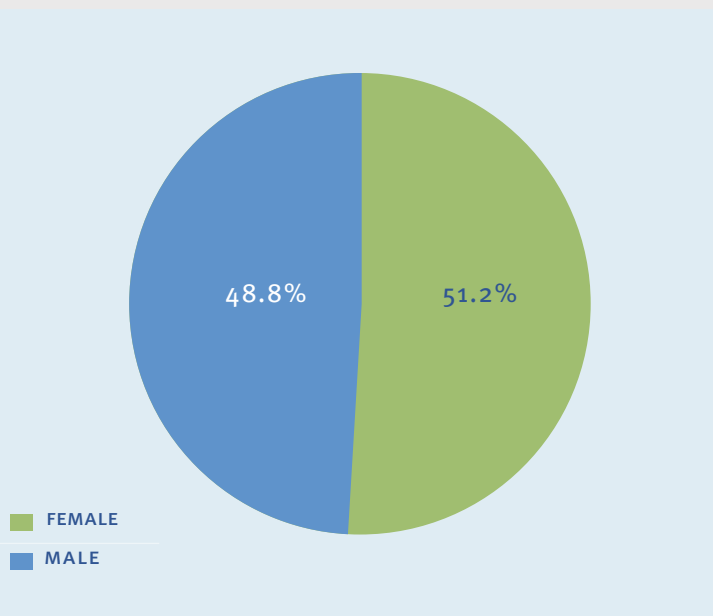
Demographic Profile: Orlando

Population by Age (2010-2014)



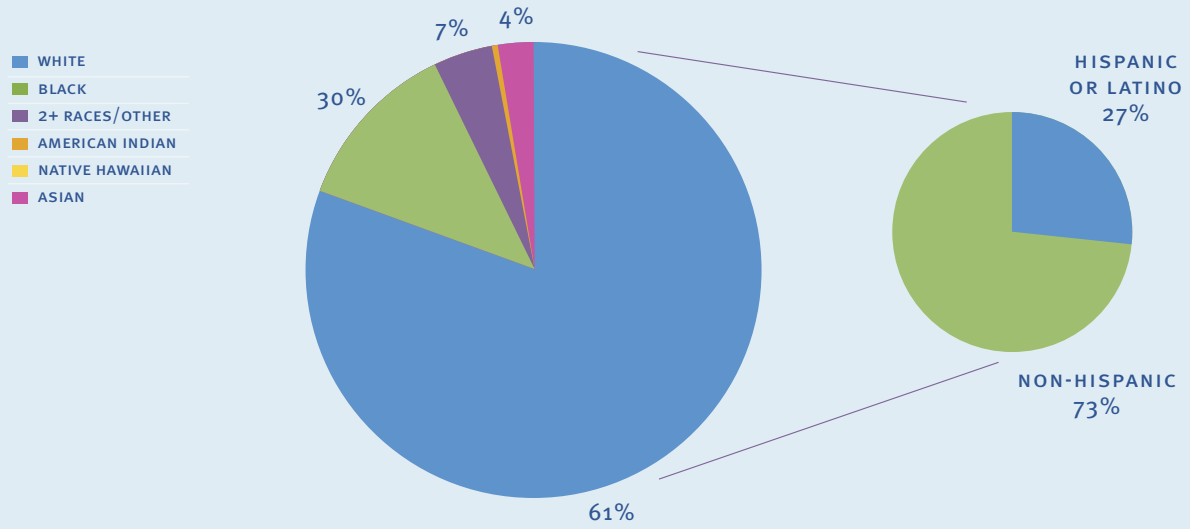
Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

Population by Gender (2010-2014)



Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

Population by Race/Ethnicity (2010-2014)



Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

Multi-county Assessment Methodology

The multi-county assessment covering Lake, Orange, Osceola and Seminole Counties integrated secondary and primary data to generate common themes and issues for the region as a whole and on the county level. Secondary data about health indicators, healthcare utilization and insurance coverage were gathered from sources including the U.S. Census, Florida CHARTS, BRFSS Data, County Health Rankings and the American Community Survey. Primary data sources included a consumer survey, a provider survey, in-depth interviews with community stakeholders and community conversations.

Secondary Data

Existing data collected by other entities were utilized in the assessment. These data sources included the U.S. Census Bureau, including the American Community Survey; Florida Community Health Assessment Resource Tool Set (CHARTS); the CDC's BRFSS Data; County Health Rankings; and hospital utilization data. These resources provide data related to specific health indicators, built environment, healthcare access and utilization, and health insurance coverage.

Hot Spotting

Patients who frequently over-utilize healthcare services typically suffer from multiple chronic conditions, requiring frequent care provided by a number of different providers. Many also have complicated social situations that directly impact their ability to get and stay well. Too often, high-utilizer patients experience inefficient, poorly coordinated care that results in multiple trips to ERs and costly hospital admissions. Using open-source data and health insurance claims data from Florida Hospital standardized to the population across census tract, this method allows you to locate “hot spots” for patients over-utilizing the healthcare system and map where they live — down to the city block.

In addition to the standard health insurance claims data in most hot spotting projects, the hot spotting in this assessment includes economic variables and conditions, and the insertion of sophisticated geospatial environmental data to analyze the correlation among healthcare utilization, health disparities, mortality rates/life expectancy, socio-economics and the environmental conditions in which people live. Such data includes, where available, data sets such as street grids, traffic signalization and counts, location of bus stops, commuter rail stations, bike lanes and multi-use trails; land use and zoning; parks/open space, schools, landfills, brownfields, etc.; parcel data to determine locations of fast food, supermarkets, tobacco shops, liquor stores, convenience stores, etc.; crime and pedestrian crash data; and water/sewer districts.

Primary Data

Consumer Survey

The survey was distributed both in hard copy (1,407) and electronically via SurveyMonkey (291) with a total of 1,698 responses. While most respondents completed the survey in English, 331 were completed in Spanish, six in French and three in Creole. Data screening measures ensured that the surveys analyzed were valid and provided useful data. First, survey responses were screened based on answers to two conflicting items from the public safety subscale. Responses that had similar answers to these two opposing questions were assumed to be invalid and dismissed. Second, rather than discard an entire survey if it was incomplete, these cases were scanned for any subscales of the survey that were complete. The responses to completed subscales were included in the analysis. Finally, surveys with unidentified ZIP codes were not included in the final analysis. After data screening, 1,235 responses were analyzed.

Provider Survey

This survey, distributed electronically, included responses from 145 participants. The questions were mostly open-ended and explored respondents' views on the community's deficits given a holistic definition of a healthy community, issues related to healthcare services and forces of change in the community.

Stakeholder In-depth Interviews

Interviews were conducted with 16 community stakeholders. Each interview lasted an average of 65 minutes. After each interview was fully transcribed, they were analyzed using qualitative analysis principles from NVivo 11. First, a basic word frequency was run for each question and related set of questions. Then, this word frequency was expanded to include words similar to those with the highest frequency. Finally, the context of the most frequently-used words and phrases were examined to generate themes.

The structured interviews asked questions about the following topics:

- Community Health & Wellness Subscale
 - Physical
 - Mental and Behavioral Health
 - Environmental Health
 - Social Health
- Risk Factors Subscale
 - Health-promoting Behaviors
 - Sickness and Death Behaviors

- Healthcare Access Subscale
 - Primary Healthcare
 - Specialty Healthcare
 - ER and Urgent Care
 - Mental and Behavioral Healthcare
 - Dental Care
- Forces of Change Subscale

Basic information for each stakeholder is outlined below:

Demographic Info for Stakeholder Participants from In-depth Interviews

SECTOR	SELF-ID RACE/ETHNICITY	GENDER
ER PHYSICIAN/GOVERNMENT	WHITE/LATINO	M
FOOD SECURITY	WHITE	F
HISPANIC HEALTH	LATINO	F
DEPARTMENT OF CHILDREN & FAMILIES	WHITE	M
HEALTHCARE	BLACK/AFRICAN AMERICAN	M
LAW ENFORCEMENT	BLACK/AFRICAN AMERICAN	M
FEDERALLY QUALIFIED HEALTH CENTER	BLACK HAITIAN	F
HOMELESS COALITION	WHITE	F
BEHAVIORAL HEALTH	WHITE	M
FAITH COMMUNITY/ INTERFAITH COMMUNITY	WHITE	M
URBAN LEAGUE	BLACK	M
SPECIALTY CARE	WHITE	F
EDUCATION	WHITE	F
COMMUNITY CONVENER	WHITE	F
AGING	WHITE	F
BUSINESS	WHITE/LATINO	F
ER PHYSICIAN	WHITE	M

Community Conversations

Six community conversation sessions took place with a total of 102 participants. These conversations employed the World Café/Cross Pollination method. Each participant was seated at a table with other participants. Each table engaged in conversation, writing down key thoughts and ideas on cards or sketching them out on paper. After 20-30 minutes, participants were asked to change tables, carrying thoughts from their previous table to their new group. Throughout the process, a “table host” stayed behind at each table to share the insights of their previous discussion with the new arrivals. After these small-group rounds, all participants convened for a large-group conversation and collective knowledge was harvested.

Retrospective Data Evaluation

The Collaboration conducted a retrospective data evaluation by looking backward and examining the priorities selected during the last CHNA and evaluated their relevancy to date. The Collaboration also reviewed and evaluated the progress of the Strategic Implementation Plans addressing these previously agreed upon priority areas.

Collaboration County-level Themes

Members of the Collaboration developed a distilled list of county-level areas of concern based on the knowledge that each of them brought to the group about the needs of the residents in each county. Initially, any area of concern was heard and added to a list. Then the group worked together in multiple rounds of voting to drill down from dozens of topics to 15 areas of concern for Orange County.

Campus-level Themes

Because Florida Hospital has nine campuses in the greater Orlando area, Florida Hospital created campus-specific Community Health Needs Assessment Taskforces that considered the county- and PSA-level concerns and worked to select a top priority for each hospital to address. The goal was to ensure that Florida Hospital addressed the unique community needs of each campus facility. These taskforces were comprised of hospital campus leadership, public health experts and community stakeholders who represented low-income, minority and other underserved populations from each campus PSA. Each taskforce reviewed the Collaboration’s CHNA data findings, as well as the campus-specific hot spots.

Data Summary

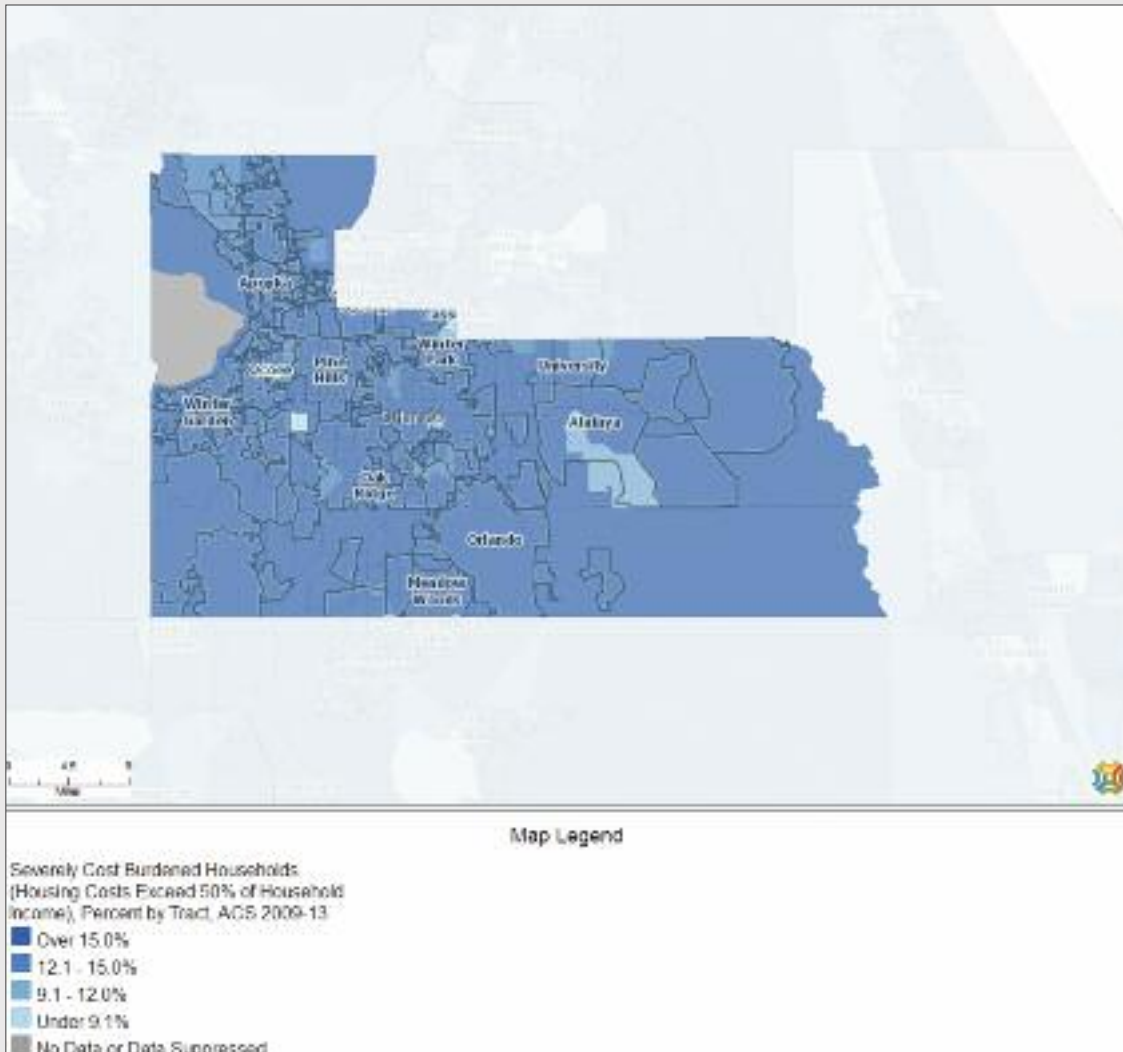
Secondary Data

Because data on the indicators examined for this assessment are measured on the county level, the data that follow reflect statistics and figures for Orange County, Florida.

County Economic Demographics

Orange County’s median income was below the state level in 2015 for the first year since 2000. The county has also seen a 50 percent increase in the poverty level between 2000 and 2014. A similar increase in children living below the poverty level has taken place — a 42 percent increase between 2000 and 2013. It should be noted that this area’s population is heavily employed within the tourism industry in Central Florida contributing to individuals who are underemployed or holding multiple part-time jobs versus full-time employment. In 2014, 72 percent of Orange County residents spent 30 percent or more of their income on rent and 47 percent reported being cost burdened or severely cost burdened by the cost of their housing. The number of homeless individuals in Orange County has fluctuated significantly since 2008 (see table on next page). Further, four percent of Orange County’s student population is homeless.

Severely Cost Burdened by Census Tract ACS (2009–2013) – Orange County



Orange County Homeless Count

2008	2009	2010	2011	2012	2013	2014	2015	2016
1,962	1,279	1,494	2,872	2,281	2,937	1,701	1,396	1,228

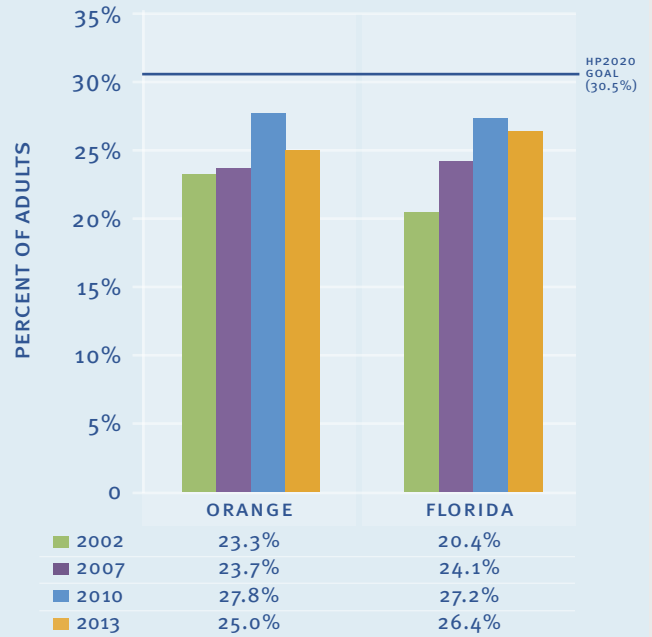
Source: 2015 Point-in-Time County, Homeless Services Network of Central Florida

Chronic Diseases

Overall, the most recent data on chronic diseases for Orange County reflect data that are in stride with or more positive than the statewide level. However, there is still room to improve on many indicators relative to the U.S. Department of Health & Human Services' Healthy People 2020 (HP2020) goals.

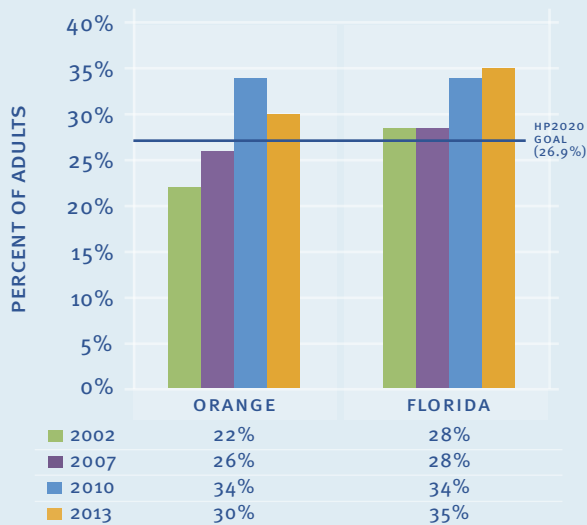
While the percent of obese adults in Orange County has increased from 23.3 percent in 2002 to 25.0 percent in 2013, the county is still below the HP2020 goal of 30.5 percent and only marginally below the state-level figure.

Adults Who Are Obese (2002-2013)



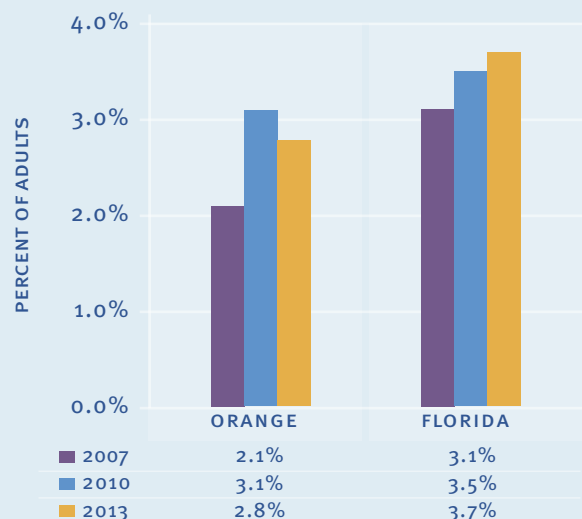
Source: Florida Charts, 2016: Florida Behavioral Risk Factor Surveillance System
This chart reflects the most current open-sourced data available at the time the report was printed.

High Blood Pressure Prevalence - Adults (2002-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Adults Who Have Ever Been Told They Had a Stroke (2007-2013)

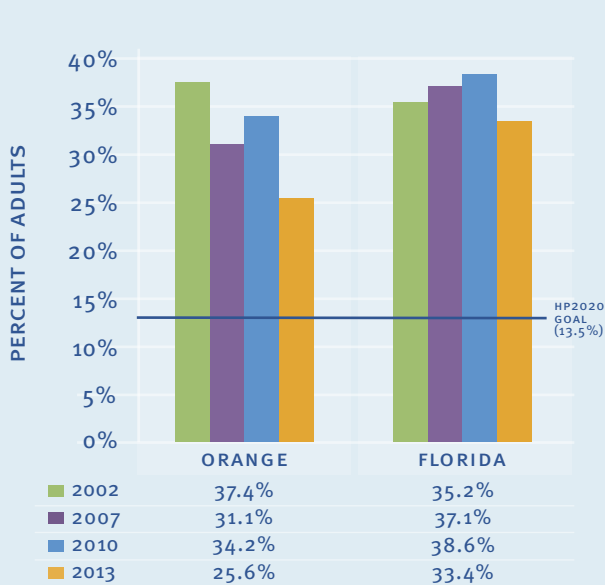


Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

In 2013, the percent of people in Orange County with high blood pressure, stroke, cholesterol and diabetes is below the state average. However, the percent of adults with high cholesterol is nearly double the HP2020 goal of 13.5 percent.

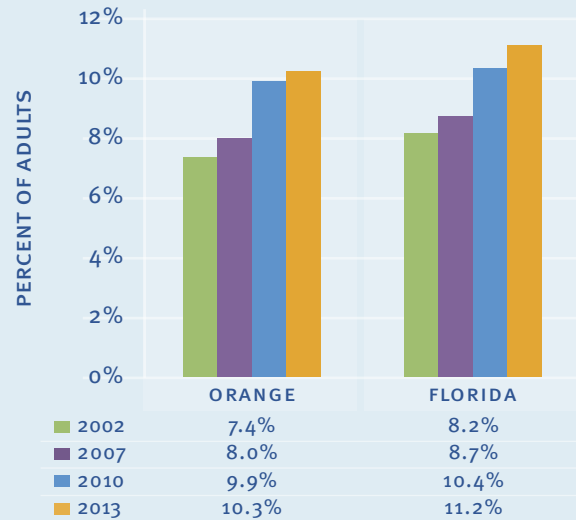
The percent of adults with diagnosed diabetes has steadily increased since 2002. The most recent data put Orange County residents slightly under the state average for diabetes diagnoses.

Adults Who Have Even Been Told They Had High Cholesterol (2002-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Adults With Diagnosed Diabetes (2002-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Top Causes of Death - Orange County (Rate per 100,000) (2008-2014)

CAUSE OF DEATH	2008	2010	2012	2014	HP2020 GOALS	
CANCER	170.5	159.7	164.5	150.4	161.4	BELOW HP2020 GOAL
HEART DISEASE	167.2	155.7	153.9	150.6	103.4	ABOVE HP2020 GOAL
UNINTENTIONAL INJURY	34.0	34.5	34.6	37.7	36.4	ABOVE HP2020 GOAL
CHRONIC LOWER RESPIRATORY DISEASE	42.1	39.8	37.8	33.3	N/A	
CEREBROVASCULAR DISEASE	37.1	30.7	34.8	35.7	34.8	ABOVE HP2020 GOAL
DIABETES	26.1	23.4	24.7	23.1	65.8	BELOW HP2020 GOAL
ALZHEIMER'S DISEASE	22.3	20.1	20.4	20.3	N/A	

Source: Florida Charts, 2015: Florida BRFSS. N/A = no data reported in source. Causes of death are sorted from highest to lowest for each county based on the average age-adjusted death rate over the four years measured. This table reflects the most current open-sourced data available at the time the report was printed.

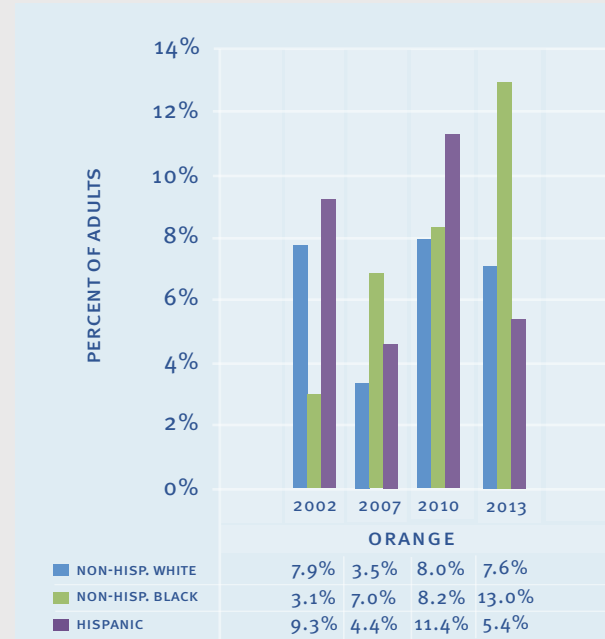
Health Disparities

Orange County benefits from having data on the racial disparities for a number of indicators. Compared to 2002, Non-Hispanic White adults had approximately the same level of asthma in 2013. However, the percent for Non-Hispanic Black adults rose drastically and the percent for Hispanic residents has fluctuated over time.

While the age-adjusted death rate for cancer in Orange County dropped across all races/ethnicities, rates remain highest among White adults and significantly lower for Hispanic adults.

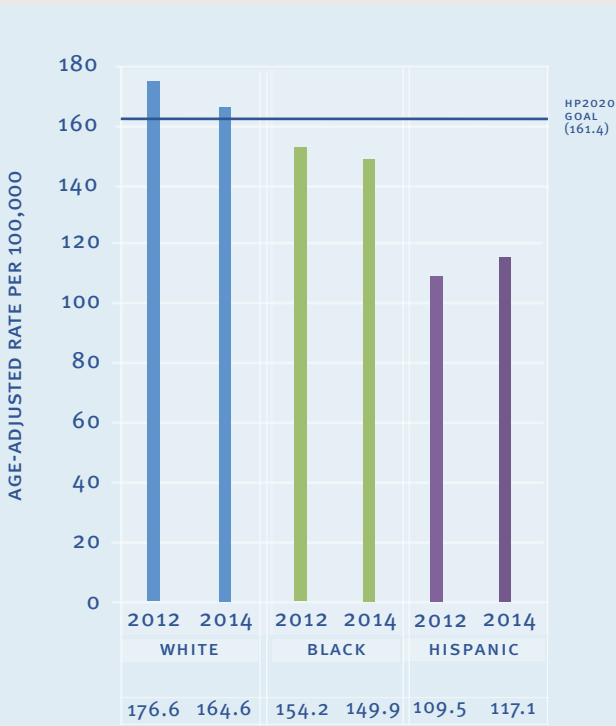
The death rate for cerebrovascular disease has gone down for White and Black adults, while remaining nearly constant for Hispanic residents remains above the HP2020 goal.

Adults Currently With Asthma by Race/Ethnicity (2002-2013)



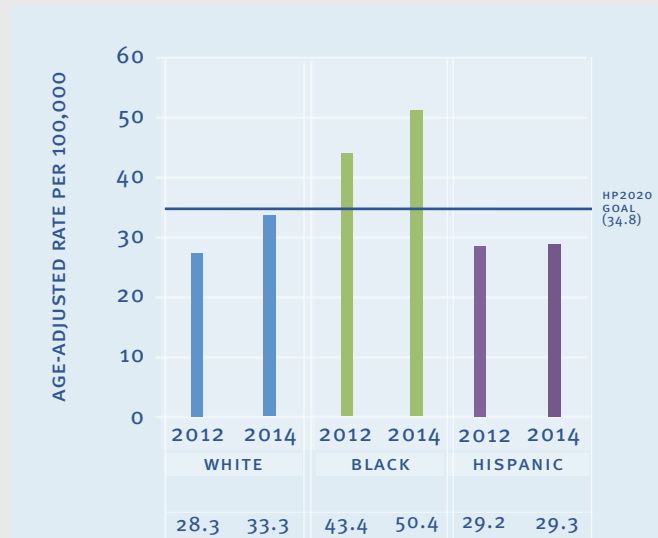
Source: Florida Charts, 2015: BRFSS. N/A = No data reported by the source. This chart reflects the most current open-sourced data available at the time the report was printed.

Age-Adjusted Death Rate for Cancer by Race/Ethnicity (per 100,000) (2012-2014)



Source: Florida Charts, 2015: Death Query. This chart reflects the most current open-sourced data available at the time the report was printed.

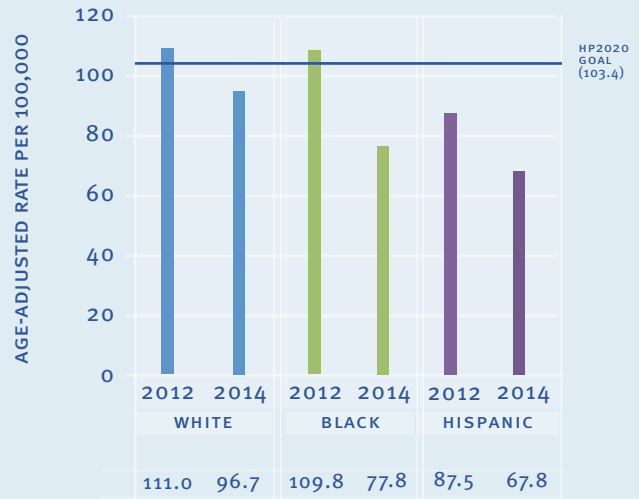
Age-Adjusted Death Rate for Cerebrovascular Disease (per 100,000) by Race/Ethnicity (2012-2014)



Source: Florida Charts, 2015: Death Query. This chart reflects the most current open-sourced data available at the time the report was printed.

The death rate for coronary heart disease has decreased for every racial/ethnic group from 2012-2014. All three groups now meet the HP2020 goal.

Age-Adjusted Death Rate for Coronary Heart Disease by Race/Ethnicity (2012-2014)

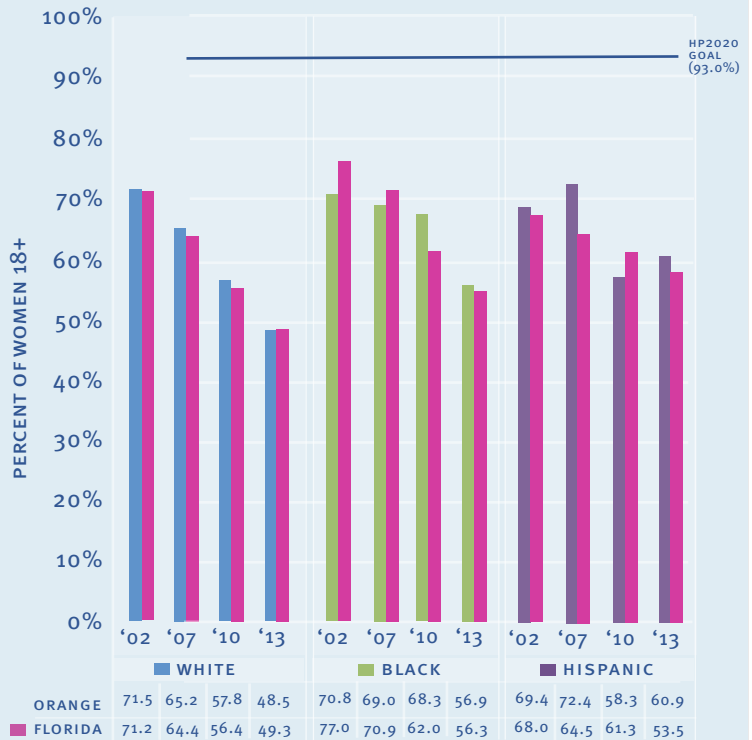


Source: Florida Charts, 2015: Death Query. This chart reflects the most current open-sourced data available at the time the report was printed.

Preventative Care

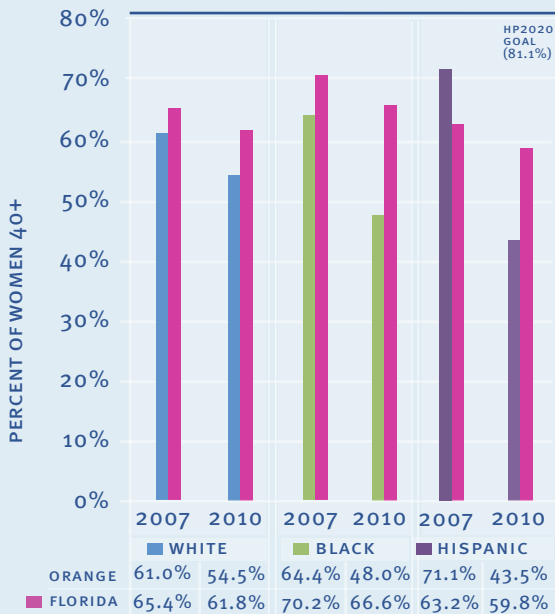
Generally speaking, at both the county- and state-level, preventative care percentages have dropped. Between 2007 and 2010, the number of women aged 40 years and older who had received a mammogram in the past year in Orange County dropped by more than 10 percent. Mammogram percentages for Orange County women, and women throughout the state of Florida, are well below the HP2020 goal of 81.1 percent.

Women 18+ Who Received a Pap Test in the Past Year (2002-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

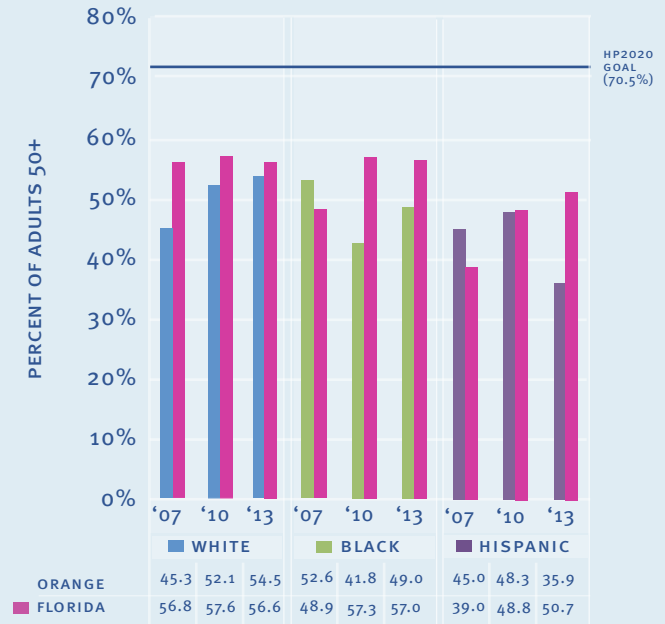
Women 40+ Who Received a Mammogram in the Past Year (2002-2010)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Both Florida and Orange County are below the HP2020 goal for adults aged 50 years and older who received a sigmoidoscopy or colonoscopy in the past five years.

Adults 50+ Who Received a Sigmoidoscopy or Colonoscopy in the Past 5 Years (2002-2013)



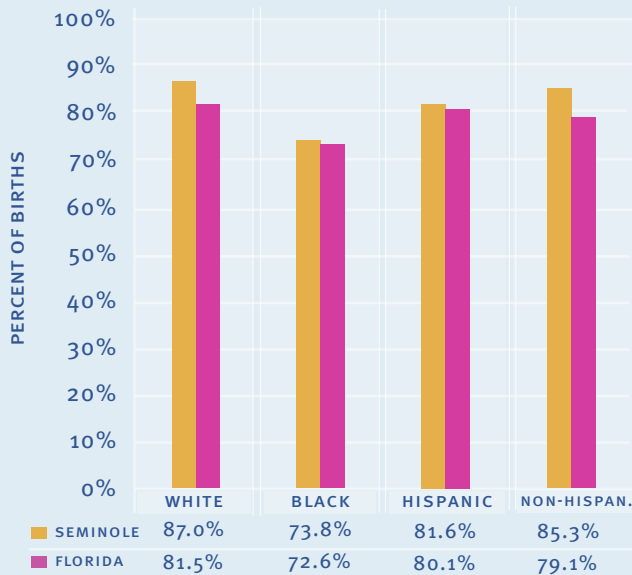
Source: Florida Charts, 2015; Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Maternal and Child Health

Orange County mothers are more likely to have first trimester prenatal care than the average Floridian woman. However, Black mothers have the lowest numbers for prenatal care.

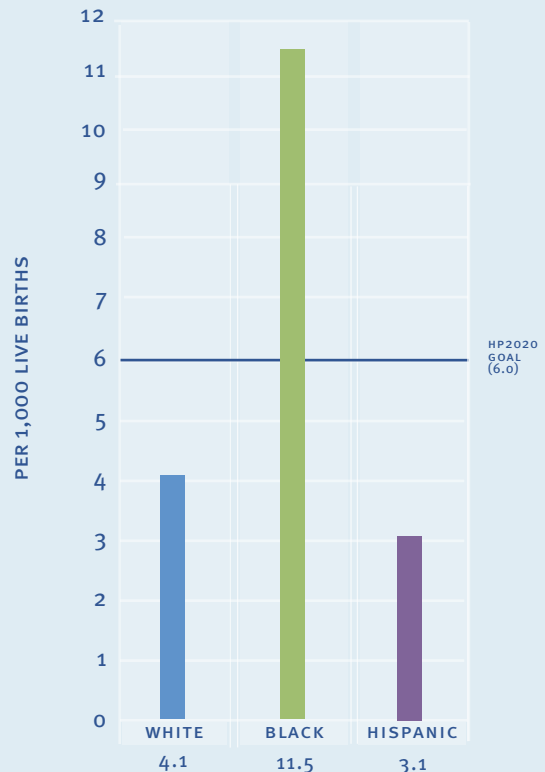
Infant mortality in the state has hovered around the HP2020 goal of 6.0, while Orange County's infant mortality rate has dropped since 2012 to 5.2. However, the infant mortality rate among the Black population in the county remains significantly high at 8.4.

Births to Mothers With 1st Trimester Prenatal Care by Race/Ethnicity (2014)



Source: Florida Charts, 2015; Florida DOH, Bureau of Vital Stats. This chart reflects the most current open-sourced data available at the time the report was printed.

Infant Mortality by Race/Ethnicity per 1,000 Live Births (2014)



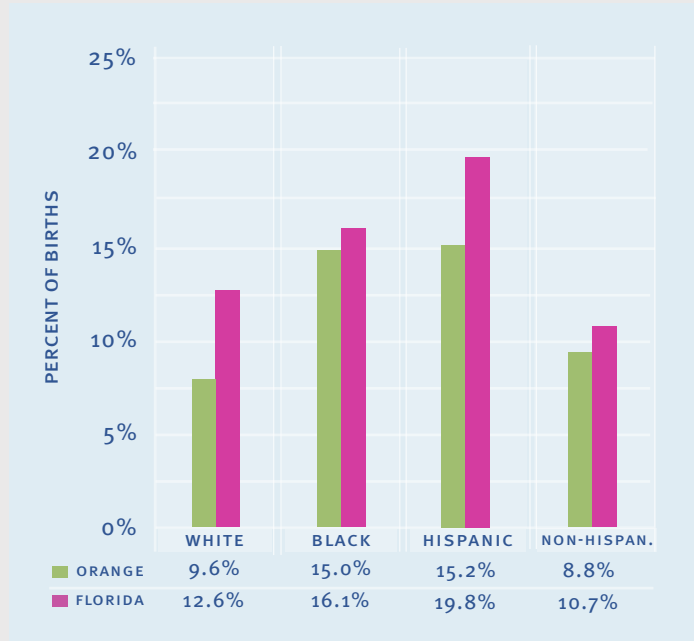
Source: Florida Charts, 2015; Florida DOH, Bureau of Vital Stats. This chart reflects the most current open-sourced data available at the time the report was printed.

In Orange County, the percent of children born to mothers with less than a high school education has consistently been less than the state average. Within the county, Black and Hispanic mothers with less than a high school education are more likely than other racial/ethnic groups to have a child.

The preterm birth rate in 2014 for Orange County was higher than the state of Florida. Once again, the Black population has the highest rate for preterm birth than any other racial/ethnic group.

The rate of children being born with low birth weight is marginally lower in Orange County than in the state overall. Black residents are more likely to give birth to a baby weighing less than 2,550 grams in both Orange County and the state of Florida.

Births to Mothers With Less Than a High School Education by Race/Ethnicity (2014)



Source: Florida Charts, 2015: Florida DOH, Bureau of Vital Stats. This chart reflects the most current open-sourced data available at the time the report was printed.

Preterm Birth Rate (<37 Weeks) by Race/Ethnicity (2014)



Source: Florida Charts, 2015: Florida DOH, Bureau of Vital Stats. This chart reflects the most current open-sourced data available at the time the report was printed.

Low Birth Weight (<2,550 grams) by Race/Ethnicity (2014)

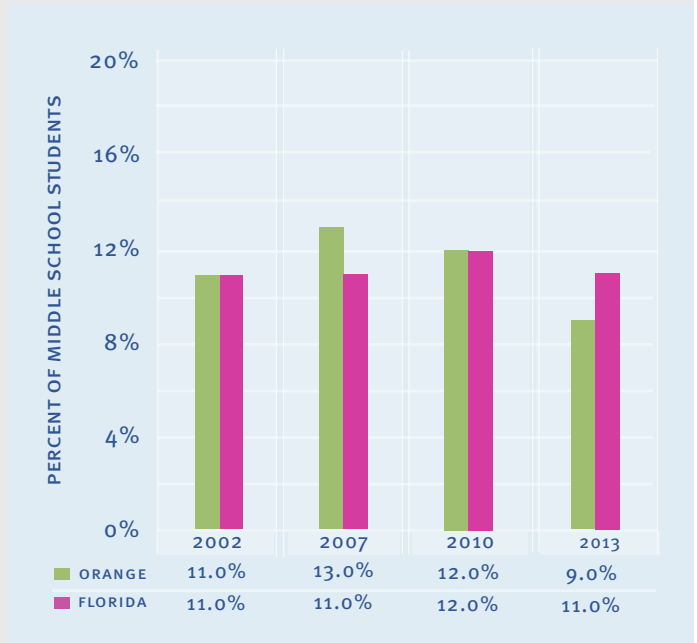


Source: Florida Charts, 2015: Florida DOH, Bureau of Vital Stats. This chart reflects the most current open-sourced data available at the time the report was printed.

Childhood obesity is a topic of interest in the state and is part of the nation’s public health conversation. In 2002 and 2010, Orange County had the same percentage of middle school students with a BMI at or above the 95th percentile when compared to the state. In 2013, the percentage was lower. The percentage of high school students in Orange County with a BMI at or above the 95th percentile stayed below the state level until an increase in 2013.

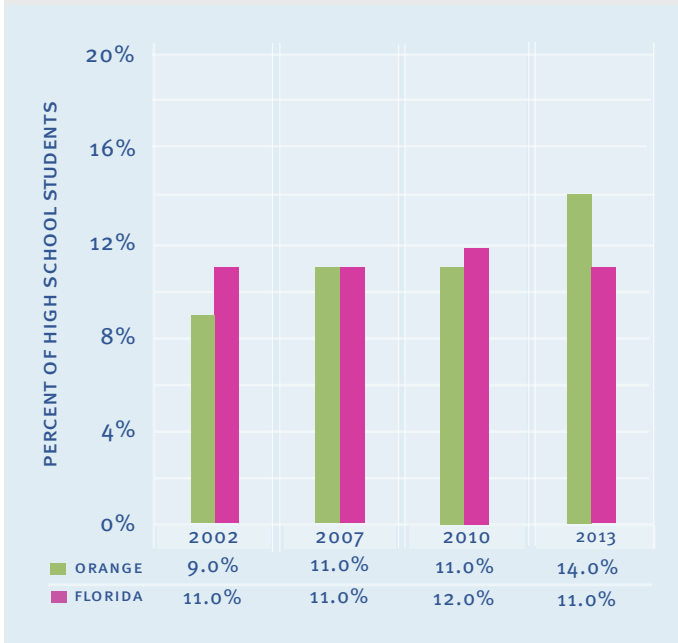
Level of childhood physical activity, a related indicator, may provide some insight into the issue of childhood obesity. While Orange County’s children appear to get about as much vigorous physical activity as the average Floridian child, more than a quarter of middle school students and one-third of high school students reported not getting enough of this kind of activity in 2013.

Middle School Students Reporting BMI at or Above 95th Percentile (2002-2013)



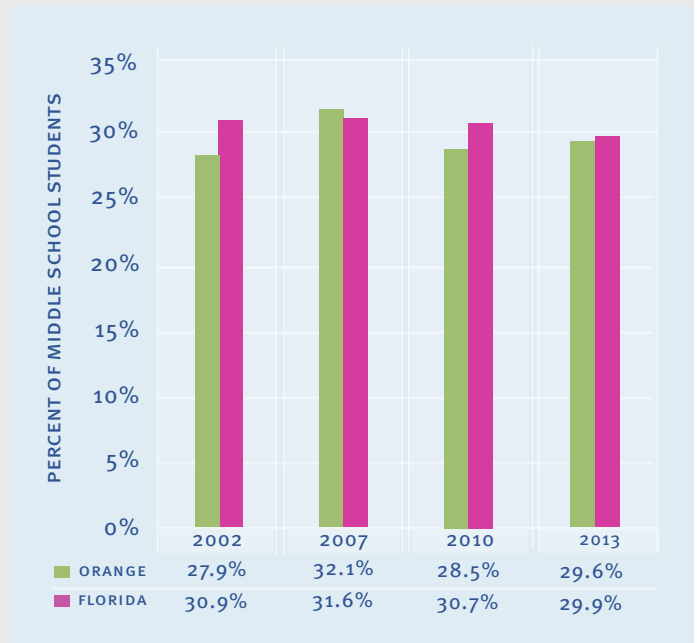
Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

High School Students Reporting BMI at or Above 95th Percentile (2002-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

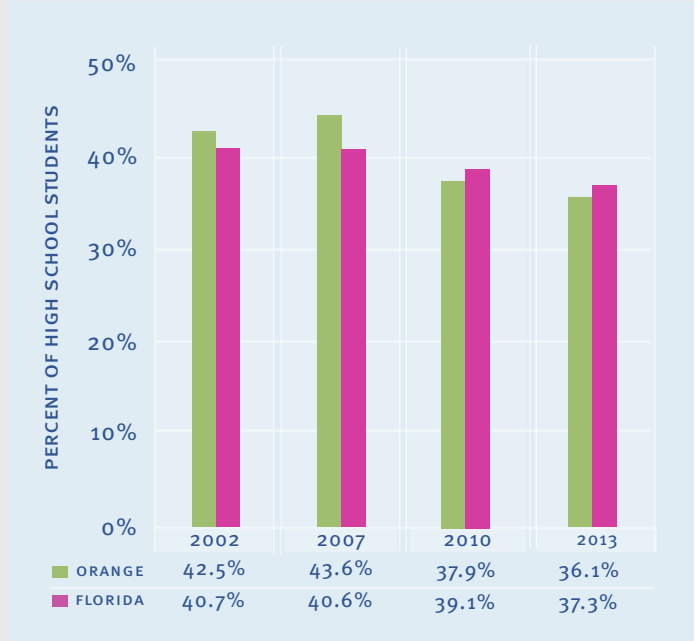
Middle School Students Without Sufficient Vigorous Physical Activity (2002-2013)



Source: Florida Charts, 2015: Florida DOH, Bureau of Epidemiology. This chart reflects the most current open-sourced data available at the time the report was printed.

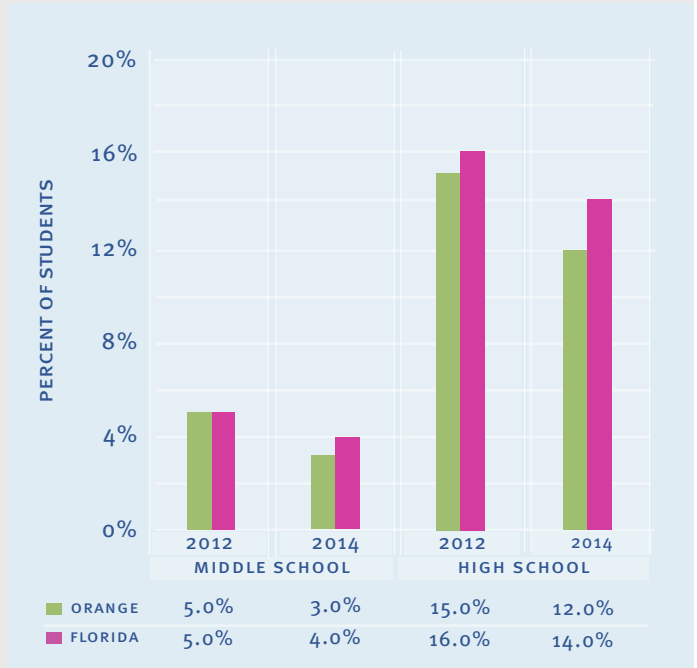
The percent of middle and high school students who report binge drinking is lower than the state level but still of concern. In 2014, three percent of middle school students and 12 percent of high school students self-reported binge drinking.

High School Students Without Sufficient Vigorous Physical Activity (2002-2013)



Source: Florida Charts, 2015: Florida DOH, Bureau of Epidemiology. This chart reflects the most current open-sourced data available at the time the report was printed.

Middle and High School Students Reporting Binge Drinking (2012-2014)



Source: Florida Charts, 2015: Florida BRFS. This chart reflects the most current open-sourced data available at the time the report was printed.

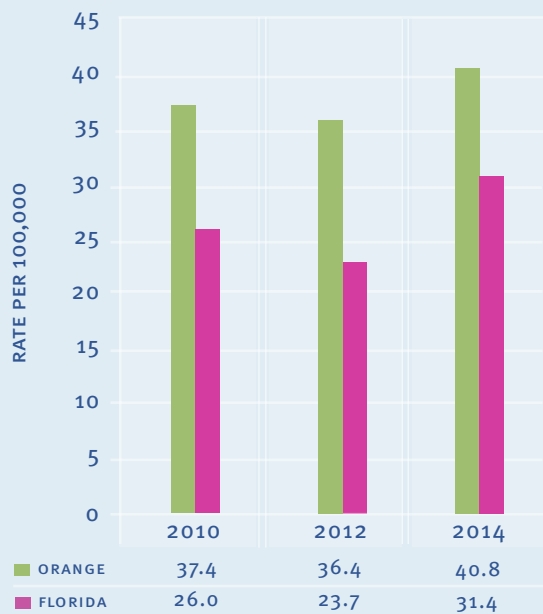
Quality of Life and Mental Health

The most opportunities for recreation and fitness facilities exist in the ZIP codes in the western portion of Orange County. These opportunities become more sparse or are not measured the farther east one goes. In the central portion of Orange County, there are both a number of people within one-half mile of a park as well as a number of ZIP codes in which there are no parks or data. The eastern portion of the county provides little access to parks.

The HIV rate in Orange County has increased since 2010 and has consistently remained higher than the state-level rate.

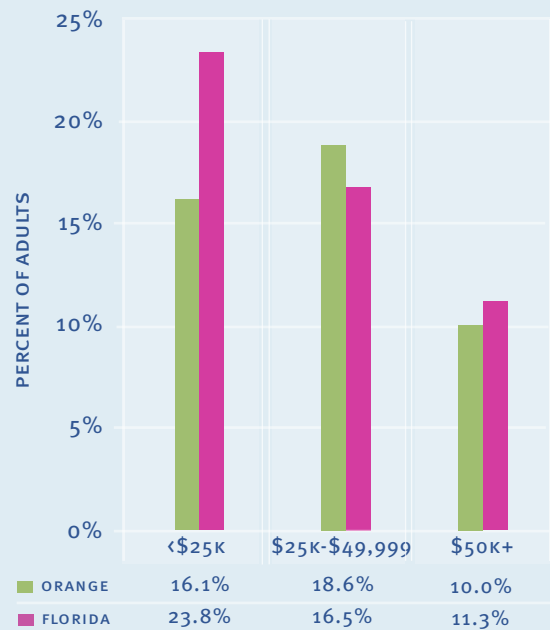
Orange County has a slightly lower percentage of adults with a depressive disorder than the state. The percentage of adults with a depressive disorder decreases significantly as income increases, and increases as residents get older.

HIV Cases (Rate per 100,000) (2010 -2014)



Source: Florida Charts, 2015: Florida DOH, Bureau of HIV/AIDS. This chart reflects the most current open-sourced data available at the time the report was printed.

Adults With a Depressive Disorder by Income (2014)

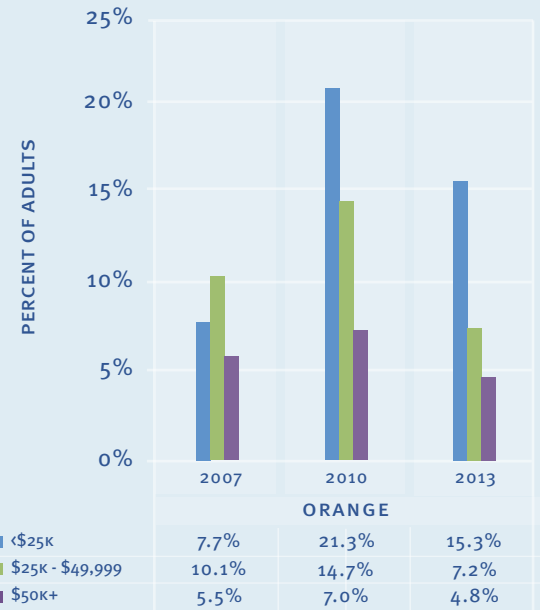


Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

A similar trend is true for adults who report having poor mental health on 14 or more of the past 30 days. Higher income consistently appears to be associated with having fewer poor mental health days. Education appears to be related to mental health in a similar fashion. While there does not appear to be a significant racial/ethnic difference, according to the 2015 CFCHS Behavioral Health Needs Assessment, the overwhelming majority of those receiving mental health and substance abuse treatment, adults and children, are White (81 percent).

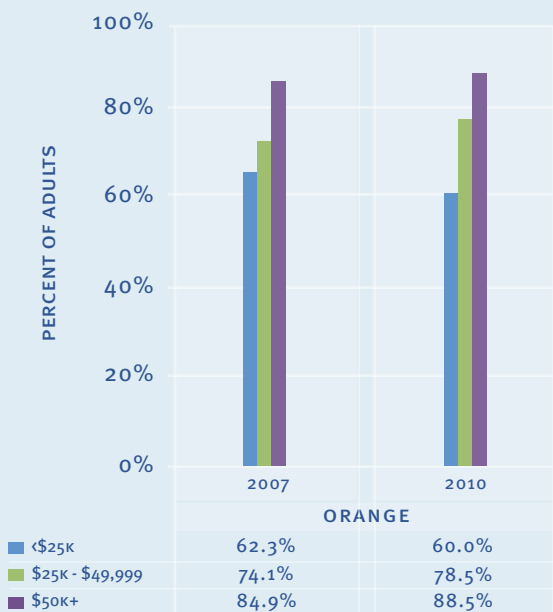
Social and emotional support appears to follow the same trend along income lines over time. Additionally, the percent of people who believed they received the support they needed decreased over time only for those making \$25k or less.

Adults Who Had Poor Mental Health on 14 or More of the Past 30 Days by Income (2007-2013)



Source: Florida Charts, 2015: BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

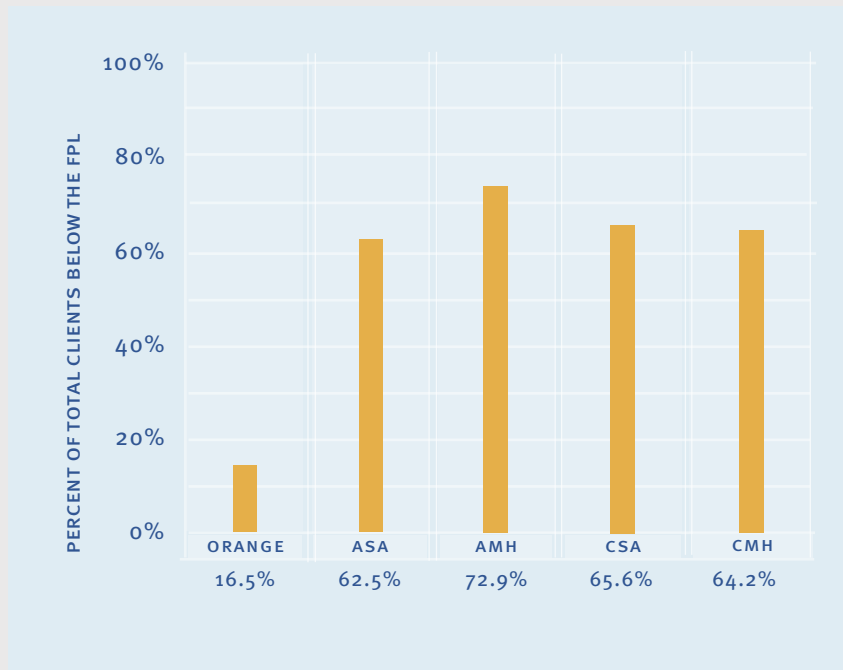
Adults Who Always/Usually Receive Social and Emotional Support They Need by Income (2007-2010)



Source: Florida Charts, 2015: BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

The relationship between those aforementioned mental health indicators and income/poverty is supported in the 2015 CFCHS Behavioral Health Needs Assessment. While 16.5 percent of the population in Orange County lives at or below the federal poverty line, the percent of clients living in poverty who receive treatment was at or above 80 percent regardless of family size and treatment program. It is unclear in which direction this relationship works but it is likely bi-directional: mental health and substance abuse affect ability to earn wages, and poverty exacerbates mental health and substance abuse issues.

Mental Health and Substance Abuse Clients at or Below Federal Poverty Line (FY14/15)



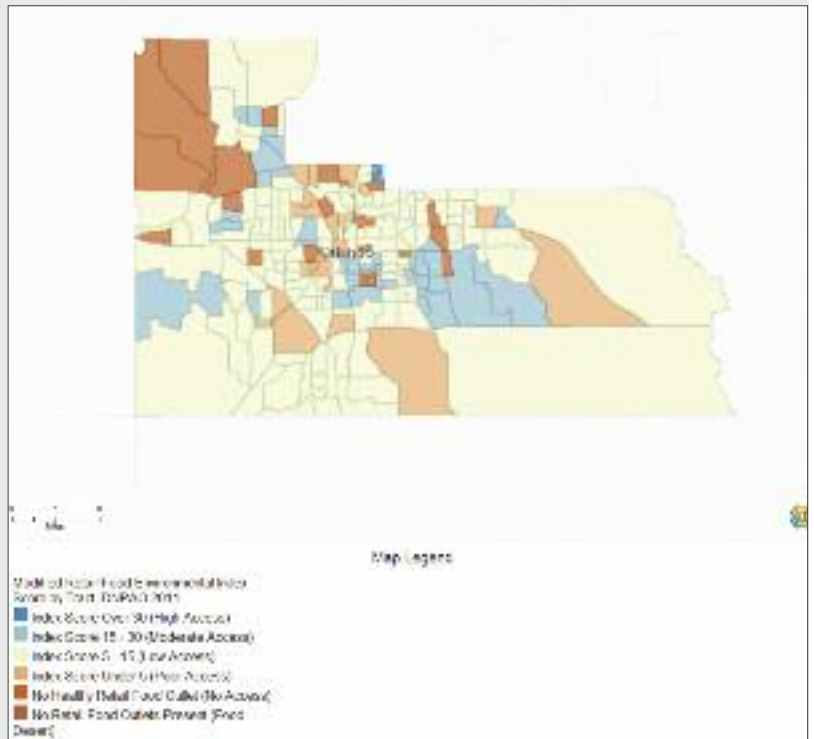
ASA = Substance Abuse; AMH = Adult Mental Health; CSA = Child Substance Abuse; CMH = Child Mental Health
Source: 2015 Central Florida Cares Health System Behavioral Health Needs Assessment

Food Access

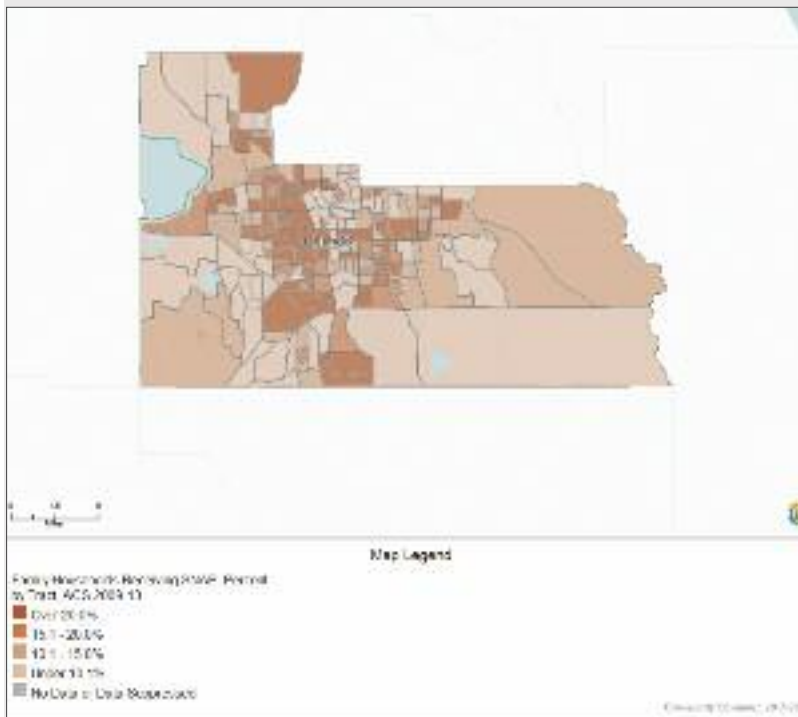
Food access appears to be an issue for Orange County census tracts. Most of the county has a modified retail food environmental score below 15 (low access, poor access or no access to healthy retail food outlets). Additionally, only two census tracts on the northern central edge of the county (near Maitland) have a score over 30. (Score of 30+ indicate high access.)

A number of residents in Orange County receive Supplemental Nutrition Assistance Program (SNAP) benefits, mostly located in the center of the county. There are also a number of food deserts dispersed around the county, a number of which overlap with high levels of SNAP beneficiaries.

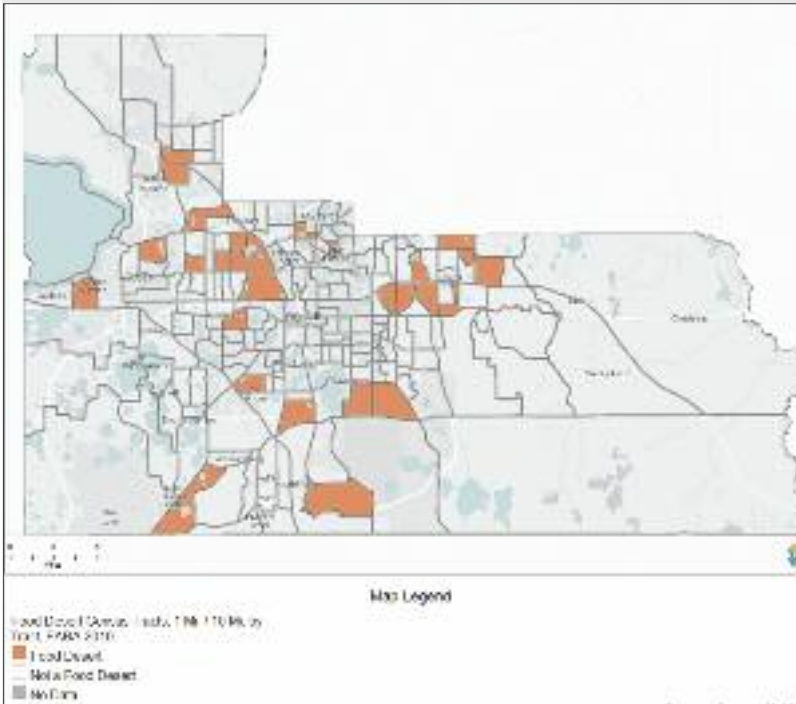
Modified Retail Food Environmental Index Score by Census Tract - Orange County (2016)



Family Households Receiving SNAP - Orange County (2016)



Food Deserts by Census Tract - Orange County (2016)

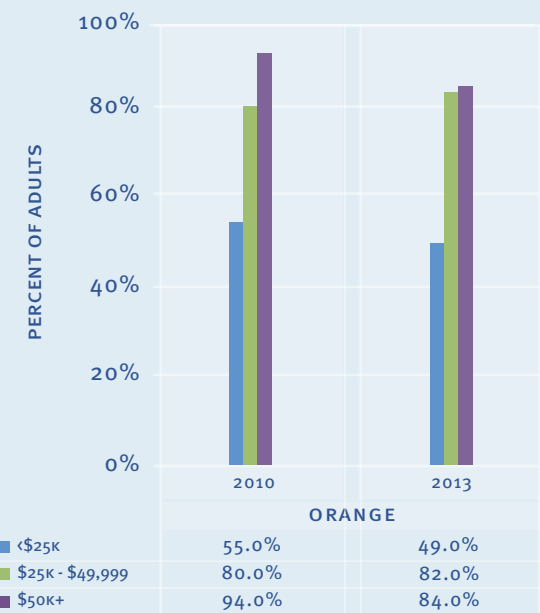
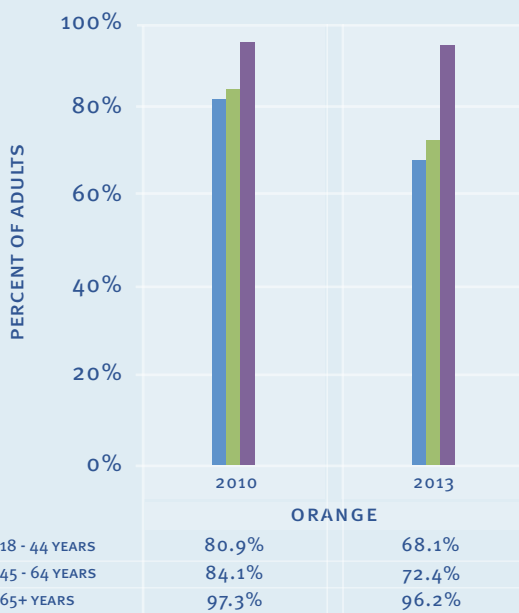


Healthcare Access and Utilization

Both the state and Orange County have seen a small decrease in health insurance coverage since 2010. From 2010 - 2013, residents ages 18-44 continue to be the lowest covered age group. Similar to data for the state, higher income in Orange County is associated with much higher rates of insurance coverage.

Insurance Coverage by Age (2010-2013)

Insurance Coverage by Income (2010-2013)



Source: Florida Charts, 2015: BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

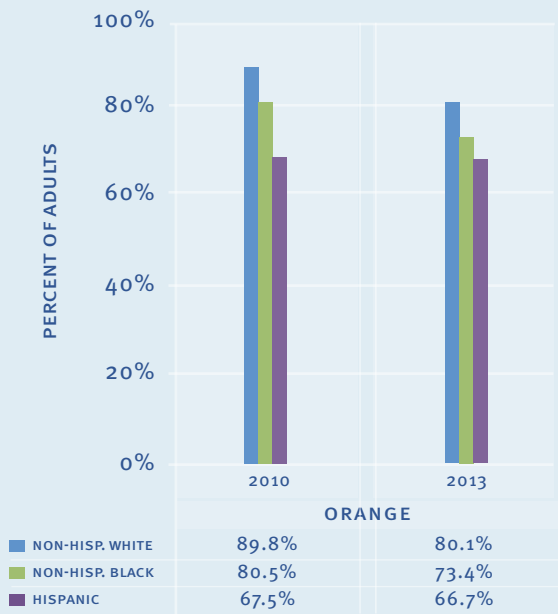
Source: Florida Charts, 2015: BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Health insurance coverage across racial and ethnic groups is more equitable in Orange County than in the state as a whole. However, Hispanic residents show the lowest percent of covered adults.

According to the 2015 CFCHS Behavioral Health Assessment, a number of Central Florida residents traveled to Orange County to receive mental health services, substance abuse services or both.

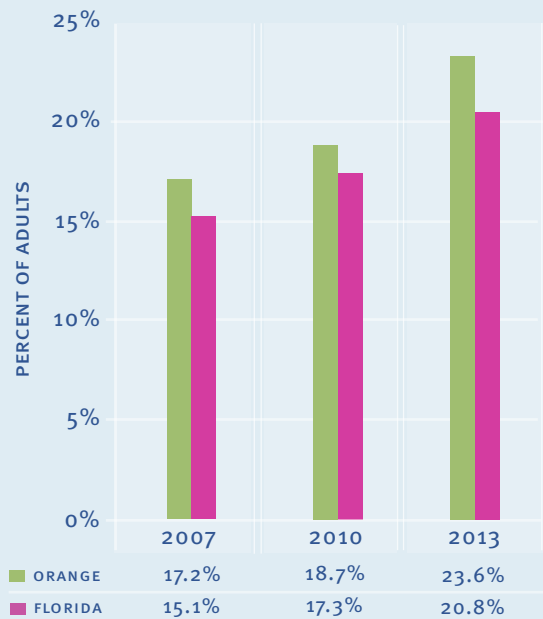
Additionally, an increasing number of Orange County residents, and Floridians as a whole, have skipped a trip to the doctor due to cost.

Insurance Coverage by Race/Ethnicity (2010-2013)



Source: Florida Charts, 2015: BRFSS. N/A = No data in source. This chart reflects the most current open-sourced data available at the time the report was printed.

Adults Who Could Not See a Doctor at Least Once in the Past Year Due to Cost (2007-2013)



Source: Florida Charts, 2015: Florida BRFSS. This chart reflects the most current open-sourced data available at the time the report was printed.

Florida’s healthcare landscape continues to evolve since the passing of the Affordable Care Act (ACA) in 2010. Thirty states plus D.C. expanded Medicaid under the ACA. Florida did not and as of January 2015, just under 300,000 Floridians had enrolled into Medicaid or Children’s Health Insurance Program (CHIP) since the beginning of the Health Insurance Marketplace’s first open enrollment period. Across the nation, approximately 11.2 million more Americans are now enrolled in Medicaid and CHIP (Health & Human Services, 2015). If Florida had expanded Medicaid, close to 850,000 uninsured people would have gained coverage.

Despite the decision not to expand Medicaid, the ACA is working to make healthcare more affordable, accessible and high quality for the people of Florida (Health & Human Services, 2015). Lake, Osceola, Orange and Seminole Counties reduced their uninsured rate by a combined average of five percent. Nationwide, approximately 16.4 million uninsured people have gained health insurance coverage — the largest reduction in the uninsured in four decades (Enroll America, 2015).

Top 10 Diagnoses for Inpatient Admissions at Florida Hospital Orlando (2015)

TOP 10 DIAGNOSES FOR INPATIENT ADMISSIONS (2015)	
#1 CORONARY ARTEROSCLEROSIS (1.9%)	#6 UNSPECIFIED SEPTICEMIA (1.0%)
#2 CELLULITIS AND ABSCESS OF LEG (1.5%)	#7 ACUTE PANCREATITIS (0.9%)
#3 OTHER CHEST PAIN (1.3%)	#8 UNSPECIFIED CEREBRAL ARTERY OCCLUSION WITH INFARCTION (0.9%)
#4 ACUTE SUBENDOCARDIAL INFARCTION (1.3%)	#9 ACUTE KIDNEY FAILURE (0.8%)
#5 UNCONTROLLED TYPE I DIABETES WITH KETOACIDOSIS (1.5%)	#10 OTHER CLOSED FRACTURES OF DISTAL END OF RADIUS (0.7%)

Top 10 Diagnoses for ER Visits at Florida Hospital Orlando (2015)

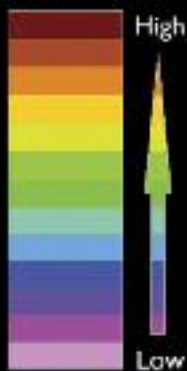
TOP 10 DIAGNOSES FOR ER VISITS (2015)	
#1 CHEST PAIN (3.0%)	#6 LUMBAGO (1.3%)
#2 OTHER SYMPTOMS INVOLVING ABDOMEN/PELVIS (1.9%)	#7 PAIN IN SOFT TISSUES OF LIMB (1.2%)
#3 SYMPTOMS INVOLVING HEAD AND NECK (1.7%)	#8 ACUTE PHARYNGITIS (1.2%)
#4 OTHER CHEST PAIN (1.6%)	#9 NONDEPENDENT ABUSE OF DRUGS (1.1%)
#5 OTHER DISORDERS OF URETHRA/URINARY TRACT (1.4%)	#10 UNSPECIFIED ESSENTIAL HYPERTENSION (0.9%)

Hot Spot Map (Inpatient)

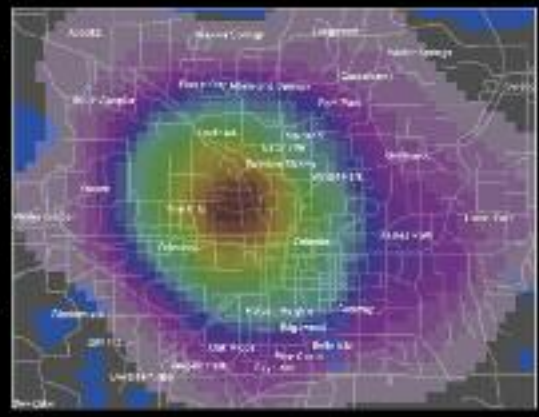
Florida Hospital Orlando: Uninsured Inpatient Hot Spot



Patient Density



This hot spot is proximity-based on a regional level, and is centered around one of the poorest areas of Orange County. Many resources, including shelters and community health centers, are located in close proximity to this hot spot. With the exception of one census tract represented in the hot spot, average household incomes are as low as \$24,350, poverty rates reach 37.4% and unemployment rates go as high as 20.8%. There are a number of recreational parks in this area.



Florida Hospital Orlando: Uninsured Inpatient Hot Spot, cont'd.

In this inpatient specific hot spot analysis for Florida Hospital Orlando, there is a 13 percent average unemployment rate and nearly 25 percent of the population is living in poverty. The average annual median household income is just over \$42,000. The 576 uninsured visits cost more than \$21 million and accounted for six percent of all uninsured inpatient visits between 2012-2015. Visits by White patients accounted for 48 percent followed by Black/African American patients. Patients aged 50-59 accounted for 39 percent of visits. Other chest pain was the most frequent primary diagnosis code of inpatient visits within this hot spot. Approximately 32 percent of visits were diagnosed with unspecified essential hypertension outside the primary diagnoses, followed by tobacco use disorder. Visits with a primary diagnosis of subendocardial infarction, initial episode of care accounted for the highest costs to the hospital at over \$640,000. To protect privacy, any analysis less than two percent has been removed.

Comparison: Hot Spot Visits to All Visits

CRITERIA	HOT SPOT
TOTAL UNINSURED VISITS	576
TOTAL UNINSURED COST	\$21,027,004
PERCENT TO ALL INPATIENT UNINSURED VISITS	6%
PERCENT TO ALL INPATIENT UNINSURED COST	5.7%
HOMELESS-SHELTER VISITS (%)*	0.2%
HOMELESS-SHELTER VISITS COST*	\$159,322

*Includes those listed as homeless, unknown or address of homeless shelter/service facility

Top 5 Primary Diagnoses and Costs

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
786.59 - OTHER CHEST PAIN	\$381,185	3%	\$22,423
250.13 - DIABETES WITH KETOACIDOSIS, TYPE I (JUVENILE TYPE), UNCONTROLLED	\$342,580	3%	\$21,411
682.6 - CELLULITIS AND ABSCESS OF LEG, EXCEPT FOOT	\$397,737	2%	\$36,158
558.9 - OTHER AND UNSPECIFIED NONINFECTIOUS GASTROENTERITIS AND COLITIS	\$222,755	2%	\$22,275
491.21 - OBSTRUCTIVE CHRONIC BRONCHITIS WITH (ACUTE) EXACERBATION	\$167,837	2%	\$18,649
786.5 - CHEST PAIN	\$225,312	2%	\$25,035

**In some instances, multiple diagnoses had the same percent of hot spot visits that fell into the top five; in these instances, all diagnoses were included in the Top 5 table.

Florida Hospital Orlando: Uninsured Inpatient Hot Spot, cont'd.

Top 5 Secondary Diagnoses and Costs

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
401.9 - UNSPECIFIED ESSENTIAL HYPERTENSION	\$7,295,050	32%	\$39,647
305.1 - TOBACCO USE DISORDER	\$5,783,561	30%	\$34,021
272.4 - OTHER AND UNSPECIFIED HYPERLIPIDEMIA	\$3,199,272	13%	\$42,657
276.8 - HYPOPOTASSEMIA	\$1,926,986	9%	\$36,358
250 - DIABETES MELLITUS	\$4,144,533	8%	\$92,101

Top 5 Highest Cost Primary Diagnoses

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
410.71 - SUBENDOCARDIAL INFARCTION, INITIAL EPISODE OF CARE	\$647,860	N/A	\$80,983
410.41 - ACUTE MYOCARDIAL INFARCTION OF OTHER INFERIOR WALL, INITIAL EPISODE OF CARE	\$472,908	N/A	\$157,636
434.91 - CEREBRAL ARTERY OCCLUSION, UNSPECIFIED WITH CEREBRAL INFARCTION	\$447,412	N/A	\$55,927
414.01 - CORONARY ATHEROSCLEROSIS OF NATIVE CORONARY ARTERY	\$442,115	N/A	\$73,686
682.6 - CELLULITIS AND ABSCESS OF LEG, EXCEPT FOOT	\$397,737	2%	\$36,158

Hospital Visitors by Race/Ethnicity

RACE/ETHNICITY	PERCENT
WHITE	48%
BLACK/AFRICAN AMERICAN	35%
HISPANIC	8%
UNKNOWN	5%
OTHER	2%
ASIAN/PACIFIC ISLANDER	1%
AMERICAN INDIAN/AK NATIVE	0%

Hospital Visitors by Age

AGE	PERCENT
0-18	1.4%
19-29	10.6%
30-39	13.9%
40-49	22.9%
50-59	38.5%
60-69	11.1%
70-79	1.0%
80+	0.5%

Florida Hospital Orlando: Uninsured Inpatient Hot Spot, cont'd.

Census Tract Summaries

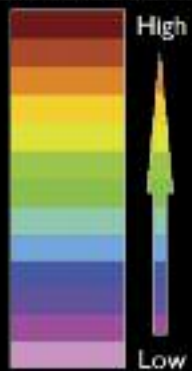
CENSUS TRACT	% UNEMPLOYED	MED. HH INCOME	% BELOW POVERTY
12-095-012403	12.4%	\$33,680	21.4%
12-095-012000	18.6%	\$32,980	36.2%
12-095-012600	4.9%	\$75,190	11.6%
12-095-012500	9.1%	\$47,250	16.8%
12-095-018700	20.8%	\$24,350	37.4%
AVERAGE	13.0%	\$42,690	24.7%

Hot Spot Map (Outpatient)

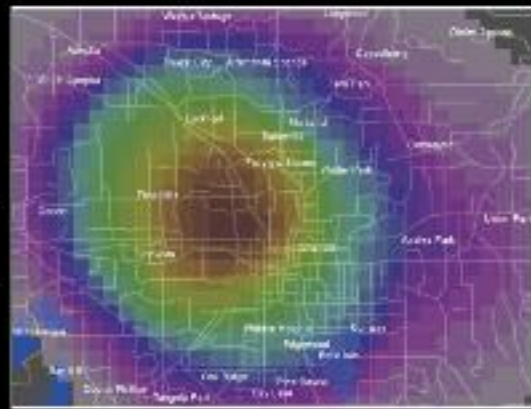
Florida Hospital Orlando: Uninsured ER/Outpatient Hot Spot



Patient Density



Similar to the inpatient hot spot for this hospital, this hot spot is proximity-based and focuses within the Pine Hills area of Orlando. A number of resources are available within this hot spot, including homeless shelters and health centers for families and children. This hot spot is also larger-than-average, as the distribution of uninsured patients was dense within the Pine Hills area but also in Parramore and the neighborhoods located near the Citrus Bowl in Orlando.



Florida Hospital Orlando: Uninsured ER/Outpatient Hot Spot, cont'd.

In this outpatient specific hot spot analysis for Florida Hospital Orlando, more than 37 percent of the population is living in poverty and there is an unemployment rate of more than 20 percent. The mean household annual income is just under \$25,000. The 617 uninsured visits cost more than \$2.1 million and accounted for one percent of all uninsured outpatient visits between 2012-2015. Black/African American patients made up nearly 80 percent of the visits in this area and patients aged 19-39 made up more than 65 percent of visits. Chest pain was the most frequent primary diagnosis code in outpatient visits within this hot spot. Approximately 11 percent of visits were diagnosed with unspecified essential hypertension outside the primary diagnoses. Visits with a primary diagnosis of chest pain resulted in highest costs to the hospital at more than \$260,000 and accounted for more than three percent of the visits between 2012-2015. To protect privacy, any analysis less than two percent has been removed.

Comparison: Hot Spot Visits to All Visits

CRITERIA	HOT SPOT
TOTAL UNINSURED VISITS	617
TOTAL UNINSURED COST	\$2,120,411
PERCENT TO ALL ER OUTPATIENT UNINSURED VISITS	1%
PERCENT TO ALL ER OUTPATIENT UNINSURED COST	1%
HOMELESS SHELTER VISITS (%)*	0%
HOMELESS SHELTER VISITS COST*	—

*Includes those listed as homeless, unknown or address of homeless shelter/service facility

Top 5 Primary Diagnoses and Costs

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
786.5 - CHEST PAIN	\$267,647	3.4%	\$12,745
462 - ACUTE PHARYNGITIS	\$18,335	2.9%	\$873
401.9 - UNSPECIFIED ESSENTIAL HYPERTENSION	\$44,902	2.6%	\$2,138
625.9 - UNSPECIFIED SYMPTOM ASSOCIATED WITH FEMALE GENITAL ORGANS	\$45,198	2.3%	\$2,152
789 - OTHER SYMPTOMS INVOLVING ABDOMEN AND PELVIS	\$64,045	2.1%	\$3,050

Florida Hospital Orlando: Uninsured ER/Outpatient Hot Spot, cont'd.

Top 5 Secondary Diagnoses and Costs

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
401.9 - UNSPECIFIED ESSENTIAL HYPERTENSION	\$496,970	11.0%	\$7,308
305.1 - TOBACCO USE DISORDER	\$171,206	6.0%	\$4,627
250 - DIABETES MELLITUS	\$41,227	4.1%	\$1,649
625.9 - UNSPECIFIED SYMPTOM ASSOCIATED WITH FEMALE GENITAL ORGANS	\$78,347	3.6%	\$3,561
599 - URINARY TRACT INFECTION, SITE NOT SPECIFIED	\$76,951	3.1%	\$4,050

Top 5 Highest Cost Primary Diagnoses

DIAGNOSIS	TOTAL COST	% OF ALL VISITS IN HOT SPOT	AVG. COST PER VISIT
786.5 - CHEST PAIN	\$267,647	3.4%	\$12,745
786.59 - OTHER CHEST PAIN	\$72,431	1.0%	\$3,449
789 - OTHER SYMPTOMS INVOLVING ABDOMEN AND PELVIS	\$64,045	2.1%	\$3,050
789.09 - ABDOMINAL PAIN, OTHER SPECIFIED SITE	\$53,731	1.1%	\$2,559
466 - ACUTE BRONCHITIS AND BRONCHIOLITIS	\$48,762	1.3%	\$2,322

Hospital Visitors by Race/Ethnicity

RACE/ETHNICITY	PERCENT
BLACK/AFRICAN AMERICAN	78.9%
WHITE	7.1%
UNKNOWN	6.5%
HISPANIC	5.8%
OTHER	1.1%
AMERICAN INDIAN/AK NATIVE	0.3%
ASIAN/PACIFIC ISLANDER	0.2%

Hospital Visitors by Age

AGE	PERCENT
0-18	3.1%
19-29	32.3%
30-39	33.2%
40-49	13.1%
50-59	11.2%
60-69	6.6%
70-79	0.3%
80+	0.2%

Florida Hospital Orlando: Uninsured ER/Outpatient Hot Spot, cont'd.

Census Tract Summaries

CENSUS TRACT	% UNEMPLOYED	MED. HH INCOME	% BELOW POVERTY
12-095-018700	20.8%	\$24,350	37.4%
AVERAGE	20.8%	\$24,350	37.4%

Primary Data

Consumer Survey

Consumer survey data was scanned for themes based only on the responses of those from the ZIP codes included in Florida Hospital Orlando's PSA (see page 7). Themes from the 1,037 PSA respondents included:

- Physical and emotional problems each kept about 20 percent of respondents from fully engaging in their regular activities.
- Nearly 90 percent were satisfied with their life as a whole.
- Most people were neutral regarding neighborhood satisfaction and connectivity.
- Approximately 60 percent say they can easily walk to stores; this may have to do with the relatively quiet streets. About 75 percent of respondents say there are sidewalks on most of their neighborhood streets and believe that they are well maintained.
- Nearly 60 percent of respondents say it is easy to walk to a transit stop from their home.
- May need better biking/pedestrian infrastructure; more than 42 percent say no easy access to trails and nearly 55 percent note lack of facilities for biking. However, more than 70 percent believe it is safe to ride a bike in the neighborhood.
- General satisfaction with neighborhood aesthetics.
- Not very concerned about the speed of traffic, business of streets or safety of crosswalks.
- High perceived sense of safety/low crime.

Provider Survey Themes

Providers in Orange County noted the following as important issues:

- Poverty
- Homelessness
- Access to quality and nutritious foods
- Affordability of healthcare
- Wages
- Behavioral health services
- Need for cultural competency and equity

The most prominent Forces of Change noted by providers in Orange County included:

- Fast population growth
- Vaping/e-cigarettes
- Political divisiveness
- Medicaid expansion

Stakeholder Interviews

Region-wide themes for stakeholder interviews are reported below since respondents often served more than one county. Common concerns included:

- Diabetes/obesity
 - Poor nutrition
 - Depression/anxiety/bipolar
 - Substance abuse
 - Vaping/e-cigarettes
 - Inappropriate use of ERs
 - Inappropriate use of ERs and jails for mental health services
 - No Medicaid expansion
 - Need more funding and support from the state for mental health services
 - Influence of factors that aren't traditionally thought of as health issues (beginning to think of these things as laying the foundation for better physical health and overall wellness)
 - Employment/wages
 - Lack of affordable housing
 - Food insecurity
- } Viewed as major contributing factors to level of homelessness
- There is a noticeable disparity between the strengths and assets/individual priorities of privileged communities and impoverished ones
 - Emphasis on the importance of education and prevention

Community Conversations

- Poverty
- Unaffordable health insurance and pharmaceuticals
- Undocumented status
- Stress
- Substance/alcohol abuse
- Smoking
- Lack of family support
- Nutrition/food
- Lack of resource knowledge
- Faith-based services are important especially for behavioral and mental health needs
- Drugs
- Pollution

Collaboration County-level Themes

While the Collaboration identified dozens of areas of concern for Orange County, they worked together to select the 15 most pressing and feasible issues to tackle. They are as follows:

- Heart disease
- Diabetes
- STI/HIV
- Substance abuse (heroin)
- Mental health
- Maternal and child health
- Uninsured rates
- Housing security
- Food security
- Disability/injury prevention
- Access to care
- Poor transportation
- Cancer
- Obesity
- Senior mobility/falls

2013 CHNA Priorities

Based on the CHNA conducted in 2013, Florida Hospital Orlando reported 14 areas of concern. These areas of concern were used previously as a starting point for generating campus-specific priorities. The inclusion of these areas of concern in this report allow all involved to understand the persistent nature of some problems, and possible the emergence of new ones.

- | | |
|---------------------------------|------------------------------|
| • Diabetes | • Mental health |
| • Heart disease | • Chronic disease management |
| • Obesity | • Violent crime |
| • Maternal and child health | • Health literacy |
| • Cancer | • Single-parent households |
| • Sexually transmitted diseases | • Motor vehicle collisions |
| • Substance abuse | • Access to healthcare |

CHNA Process at Florida Hospital Orlando

The **CHNA Taskforce for Florida Hospital Orlando** included representation from public health and low-income, minority and other underserved populations. Members included:

- **Karen Broussard, Vice President, Agency Relations & Program, Second Harvest Food Bank** - Second Harvest Food Bank is a nonprofit with targeted efforts around food insecurity. As a food bank Second Harvest distributes food throughout the six counties that make up most of Central Florida and provides workforce development opportunities for populations at risk for food insecurity
- **Jerry Kassab, President, Aspire Health Partners** - Aspire Health Partners is a nonprofit health provider that works to provide behavioral health care services to individuals experiencing mental illness and issues of substance abuse within Orange and Seminole Counties
- **Yolanda Martinez, Chief, Office of Performance and Quality Improvement, Orange County Public Health Department** - The Orange County Health Department is tasked by the State of Florida to work to protect the communities within Orange County from disease, promote healthy behavior, and improve the quality of life within Orange County
- **Swannie Jett, Director, Seminole County Health Department** - The Seminole County Department of Health is tasked by the State of Florida to work to protect the communities of Seminole County from disease, promote healthy behavior and improve quality of life within Seminole County
- **Stephanie Garris, Executive Director, Grace Medical Home** - Grace Medical Home is a patient centered medical home that focuses on serving the clinically underserved through the provision of continuous and comprehensive primary care
- **Maureen Kersmarki, Director of Community Benefit and Public Policy, Primary Care Access Network/Adventist Health System** - The Primary Care Access Network is a coalition of primary care centers and hospitals that work to improve access to primary care services for the underinsured, uninsured and underserved within Orange County

The Florida Hospital staff that were on the Florida Hospital Orlando Community Health Needs Assessment Task Force were:

- **Eric Stevens, Senior Executive Officer and Administrator, Florida Hospital Orlando**
- **Carl Ricketts, Jr., Director of Pastoral Care, Florida Hospital Orlando**
- **Meghan Curren, Community Partnerships Manager, Florida Hospital Central Region**
- **Penny Jones, Director of Corporate Relations and Partnerships, Florida Hospital Central Region**
- **JB Boonstra, Director of Community Health and Advocacy, Florida Hospital Central Region**
- **Anwar Georges-Abeyie, Community Impact Project Manager, Florida Hospital Central Region**

Top Priorities Chosen

After reviewing the Collaboration CHNA data findings and the hot spot for the Orlando campus, the Taskforce discussed and deliberated which health concern was a top priority to be addressed by the hospital, based on the following questions:

1. How acute is the need? (Based on data and community concern)
2. What is the trend? Is the need getting worse?

3. Does the hospital provide services that relate to the priority?
4. Is someone else — or multiple groups — in the community already working on this issue?
5. If the hospital were to address this issue, are there opportunities to work with community partners?

Based on the discussion that emerged from the Orlando Taskforce and similar discussion points that emerged from each of the campus-specific Taskforces, as well as post-surveys collected from community stakeholders after the meeting, **Florida Hospital chose a three-part, primary Priority Issue for all campuses: Access to Care – Preventative, Primary and Mental Health.**

1. **Access to Care – Preventative** includes food insecurity and obesity, and maternal and child health
2. **Access to Care – Primary and Mental Health** includes affordability of care and access to appropriate-level care utilizing care navigation and coordination.

The issue of chronic disease — cancer, diabetes and heart disease — relates to each of the categories.

After the CHNA Committee meeting, the hospital sent out an electronic survey (via Survey Monkey) to the Committee members. The goal of the electronic survey was to confirm that the hospital's write-up of the Florida Hospital Priority Issue reflected the discussion in the meeting. The survey results indicated that this was the case.

The Taskforce did not select the following issues as a top priority for Florida Hospital Orlando:

1. High rates of substance abuse: This issue was not chosen because addiction is understood to be a component of poor mental health. If Florida Hospital can positively affect access to mental health services, a component of the top priority chosen, this may also affect rates of substance abuse.
2. Homelessness: While homelessness is a serious issue in Central Florida, the issue was not chosen because Florida Hospital is already working with community partners, including the Regional Commission on Homelessness, on this issue. In late 2014, the hospital donated \$6 million to the Commission's Housing First initiative.
3. Lack of affordable housing: This issue was not chosen because the hospital does not have the resources to effectively meet this need.
4. Poverty: This issue was not chosen because the hospital does not have the resources to effectively meet this need.
5. Asthma: While asthma did emerge as a serious health concern in the area assessed, the hospital did not choose this as a top priority because if the community has access to preventative and primary care, a component of the top priority chosen, this may also affect the rates of asthma.
6. Sexually transmitted infections (STIs): This issue was not chosen as a top priority because while the hospital has means to treat STIs, it does not have the resources to effectively prevent them. Additionally, if the community has access to preventative and primary care, a component of the top priority chosen, this may affect rates of STIs.
7. Diabetes in specific populations: This issue was not chosen specifically because it falls in the category of chronic disease, which relates to the top priority chosen. As Florida Hospital develops its Community Health Plan, it will factor in the higher prevalence of diabetes in minority populations.
8. Infant mortality in specific populations: This issue was not chosen specifically because it falls in the category of maternal and child health, which relates to the top priority chosen. As Florida Hospital develops its Community Health Plan, it will factor in the higher prevalence of infant mortality in minority populations.

Priority Approval

The three part, primary Priority Issue of **Access to Care – Preventative, Primary and Mental Health** was approved on August 3, 2016 by the Community Health Impact Council (CHIC), a sub-committee of the Florida Hospital Board of Trustees. The CHIC serves as the governing body for Florida Hospital's community benefit activities. The CHIC approves, funds and measures initiatives to improve the health of Central Floridians, especially the underserved and marginalized, and is also responsible for approving the CHNA priorities chosen by Florida Hospital. The priority is slated to be approved on October 19, 2016 by the Florida Hospital Board of Trustees with recommendation from the CHIC.

Next Steps

Next, the Community Health Plans with measurable goals will be developed to address the top priority issues. The plan will be completed and posted on the hospital's website prior to May 15, 2017.

Public Health Representation

The Florida Hospital Orlando Taskforce included representation from the public health community. The Taskforce's primary public health representative was Dr. Swannie Jett, DrPH, MSc, Health Officer, Florida Department of Health - Seminole County. Dr. Jett serves as President for the National Association of County and City Health Officials (NACCHO). Since 2001, he has worked in numerous leadership positions for the United States Army and Air Force National Guard. In 2014, Dr. Jett deployed to Senegal, Africa to assist with the Ebola virus outbreak. Presently, Dr. Jett is a Major and Public Health Officer for the Air Force National Guard.

Additional public health representation was provided by Yolanda Martinez, Ed, PhD, Chief of the Office of Performance and Quality Improvement and the Population Health for Orange County's Health Department. Dr. Martinez oversees the quality improvement, performance management and population health activities at the Department of Health - Orange County. Dr. Martinez has been involved in the community health assessment (CHA) efforts and her office conducted a Local Public Health System Assessment. She has worked on needs assessment efforts over the last 19 years at DOH Orange and prior to coming to the department.

Synthesized Themes

The following table provides a synthesis of the areas of concern across all of the data sources. Each data collection method was scanned for themes and significant disparities across various demographic items (race, education, income, etc.). The most common themes and indicators with the starkest disparities were marked as areas of concern for each data collection method. Those areas are then marked below to give the reader a visual representation of how often each theme appeared across data collection methods. The areas of concern are organized from most frequently discussed to least frequently discussed.

It is important to note during prioritization that some themes may be noted as important by decision-makers, but not viewed as priorities by the residents and vice-versa. For example, asthma was listed as a priority in 2013 and included in this assessment's areas of concern generated by the Collaboration. However, none of the other primary data sources noted asthma as a pressing concern. This does not mean asthma is not a problem; it simply means that there are likely other issues that are more severely impacting this community. Similarly, the top two causes of death are farther down the list of themes than one might expect. This is due to the social determinant approach taken in this assessment. While cause of death is important, the strategies put in place as a result of this report should focus on the root cause that lead to these deaths. Across the board, access and affordability of services, both physical and mental health, continue to be the biggest obstacle to overall health and well-being.

Synthesized Themes

Synthesized Themes

	SECONDARY DATA				PRIMARY DATA		
	2016 DATA	2013 PRIORITIES	COLLABORATION THEMES	CONSUMER SURVEYS	PROVIDER SURVEYS	STAKEHOLDER INTERVIEWS	COMMUNITY CONVERSATIONS
NEED FOR/ACCESS TO MENTAL HEALTH SERVICES	X	X	X	X	X	X	X
AFFORDABILITY OF HEALTHCARE	X	X	X		X		X
ACCESS TO QUALITY/ NUTRITIOUS FOODS	X				X	X	X
SUBSTANCE ABUSE		X	X			X	X
DIABETES		X	X			X	
POVERTY	X				X		X
HEART DISEASE	X	X	X				
MATERNAL & CHILD HEALTH	X	X	X				
STI/HIV	X	X	X				
OBESITY			X			X	
INACTIVITY	X			X			
HOMELESSNESS	X				X		
AFFORDABLE HOUSING			X			X	
LOW WAGES					X	X	
FOOD INSECURITY			X			X	
CANCER		X	X				
VAPING/E-CIGARETTES					X	X	
MEDICAID EXPANSION					X	X	
NEED FOR CULTURAL COMPETENCY/EQUITY					X		
POPULATION GROWTH					X		

Synthesized Themes

Synthesized Themes

	SECONDARY DATA				PRIMARY DATA		
	2016 DATA	2013 PRIORITIES	COLLABORATION THEMES	CONSUMER SURVEYS	PROVIDER SURVEYS	STAKEHOLDER INTERVIEWS	COMMUNITY CONVERSATIONS
POLITICAL DIVISIVENESS					X		
INAPPROPRIATE USE OF THE ER						X	
BIKE- /PEDESTRIAN-FRIENDLY INFRASTRUCTURE				X			
MOTOR VEHICLE COLLISIONS		X					
VIOLENT CRIME		X					
SINGLE-PARENT HOUSEHOLDS		X					
HEALTH LITERACY		X					
CHRONIC DISEASE MANAGEMENT		X					
UNINSURED RATES			X				
DISABILITY/INJURY PREVENTION			X				
TRANSPORTATION			X				
SENIOR MOBILITY/ FALLS			X				
UNDOCUMENTED STATUS							X
STRESS							X
SMOKING							X
LACK OF FAMILY SUPPORT							X
POLLUTION							X
LOW PREVENTATIVE CARE		X					
BIKING/PEDESTRIAN INFRASTRUCTURE				X			

Community Assets to Address the Needs

In addition to the hospitals and healthcare systems in the four-county assessment region, the following organizations were identified as service providers dedicated to the health and well-being of Lake, Orange, Osceola and Seminole Counties' residents. The following lists are not intended to be exhaustive, but rather representative of organizations that make services available.

Community Assets by County - Chronic Disease: Asthma

ASTHMA	LAKE	ORANGE	OSCEOLA	SEMINOLE
AMERICAN LUNG ASSOCIATION	X	X	X	X
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
GRACE MEDICAL HOME		X		
HISPANIC HEALTH INITIATIVES		X	X	X
ORANGE BLOSSOM FAMILY HEALTH		X		X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
TRUE HEALTH		X		X
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Chronic Disease: Cancer

CANCER	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
AMERICAN CANCER SOCIETY	X	X	X	X
AMERICAN HEART ASSOCIATION	X	X	X	X
AMERICAN LUNG ASSOCIATION	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA BLACK NURSES ASSOC. OF FLORIDA		X	X	X
COMPASSIONATE HANDS & HEARTS		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
CONCERNED CITIZENS COMBATING CANCER		X	X	X
DEBBIE TURNER CANCER CARE & RESOURCE CENTER		X		
FLORIDA BREAST CANCER FOUNDATION	X	X	X	X
HISPANIC HEALTH INITIATIVES		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
LIBBY'S LEGACY	X	X	X	
ORANGE BLOSSOM FAMILY HEALTH		X		
ORANGE COUNTY HEALTH DEPARTMENT		X		
ORLANDO SUPPORT		X	X	X
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
OVARIAN CANCER ALLIANCE OF FLORIDA		X	X	X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SISTERS NETWORK, INC.		X	X	X
SUSAN G. KOMEN CENTRAL FLORIDA AFFILIATE	X	X	X	X
TAVARES VA COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE CENTER FOR CHANGE				X
THE CENTER ORLANDO		X	X	X
THE LEUKEMIA & LYMPHOMA SOCIETY		X		X

Community Assets by County - Chronic Disease: Cancer, Cont'd.

CANCER, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
TRUE HEALTH		X	X	X
UNITED WAY 2-1-1	X	X	X	X
WOMEN PLAYING FOR T.I.M.E.		X	X	X

Community Assets by County - Chronic Disease: Diabetes

DIABETES	LAKE	ORANGE	OSCEOLA	SEMINOLE
AMERICAN DIABETES ASSOCIATION	X	X	X	X
AMERICAN HEART ASSOCIATION	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA DIABETES EDUCATION CENTER				X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
CENTRAL FLORIDA PHARMACY COUNCIL		X	X	X
CENTRAL FLORIDA YMCA	X	X	X	X
COMMUNITY HEALTH CENTERS	X	X		
ELDER OPTIONS	X			
GOLDEN TRIANGLE YMCA	X			
GRACE MEDICAL HOME		X		
HARVEST TIME INTERNATIONAL, INC.	X	X	X	X
HEALTHY ORANGE COLLABORATIVE		X		
HEBNI NUTRITION CONSULTANTS, INC.		X	X	X
HISPANIC HEALTH INITIATIVES	X	X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
LIFELINE SCREENINGS FOR DIABETES	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		X
SECOND HARVEST FOOD BANK	X	X	X	X
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
TAVARES VA COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	

Community Assets by County - Chronic Disease: Diabetes, Cont'd.

DIABETES, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
TRUE HEALTH		X	X	X
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Chronic Disease: Heart Disease

HEART DISEASE	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
AMERICAN HEART ASSOCIATION	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
CENTRAL FLORIDA YMCA		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
GRACE MEDICAL HOME		X		
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HEBNI NUTRITION CONSULTANTS, INC.		X	X	
HISPANIC HEALTH INITIATIVES	X	X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
MENDED HEARTS OF OSCEOLA			X	
ORANGE BLOSSOM FAMILY HEALTH		X		
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
TRUE HEALTH		X		X
UNITED WAY 2-1-1		X	X	X

Community Assets by County - Chronic Disease: Obesity

OBESITY	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
AMERICAN DIABETES ASSOCIATION	X	X	X	X
AMERICAN HEART ASSOCIATION	X	X	X	X
BOYS AND GIRLS CLUB OF CENTRAL FLORIDA		X	X	X
BOYS AND GIRLS CLUB OF LAKE & SUMTER COUNTIES	X			
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTER STREET KITCHEN, FIRST PRESBYTERIAN CHURCH	X			
CENTRAL FLORIDA DREAMPLEX	X			
CENTRAL FLORIDA YMCA		X	X	X
CITY OF ORLANDO PARKS & RECREATION		X		
COMMUNITY HEALTH CENTERS	X	X		
COMMUNITY VISION			X	
GET ACTIVE ORLANDO	X	X		
GET FIT LAKE	X			
GRACE MEDICAL HOME		X		
HEALTHY 100 KIDS		X	X	X
HEALTHY CENTRAL FLORIDA		X		
HEALTHY KIDS TODAY		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HEBNI NUTRITION CONSULTANTS, INC.		X	X	X
HISPANIC HEALTH INITIATIVES	X	X	X	X
LAKE COMMUNITY ACTION AGENCY	X			
LAKE COUNTY HEALTH DEPARTMENT	X			
LAKE COUNTY SCHOOLS	X			
LOCAL CITY PARKS & RECREATION	X			

Community Assets by County - Chronic Disease: Obesity, Cont'd.

OBESITY, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
MEALS ON WHEELS	X			
MISSION FIT KIDS		X	X	X
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
ORANGE COUNTY PARKS & RECREATION		X		
ORANGE COUNTY PUBLIC SCHOOL SYSTEM		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
OSCEOLA COUNTY PARKS & RECREATION			X	
OSCEOLA COUNTY SCHOOL DISTRICT WELLNESS PROGRAM			X	
OVEREATERS ANONYMOUS	X	X	X	X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
REDUCE OBESITY IN CENTRAL FLORIDA KIDS (ROCK)		X	X	X
SDA CHURCH OF UMATILLA	X			
SECOND HARVEST FOOD BANK OF CENTRAL FLORIDA	X	X	X	X
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SEMINOLE COUNTY PARKS & RECREATION				X
SEMINOLE COUNTY PUBLIC SCHOOL SYSTEM				X
SHEPHERD'S HOPE		X		X
TAVARES VA COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE COLLABORATIVE OBESITY PREVENTION PROGRAM		X		
THE HARMONY INSTITUTE			X	
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
TRUE HEALTH		X	X	X
UNITED WAY 2-1-1		X	X	X
USA DANCE		X		X
WEIGHT WATCHERS	X			
WINTER PARK HEALTH FOUNDATION		X		

Community Assets by County - Chronic Disease: Stroke

STROKE	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
AMERICAN HEART ASSOCIATION	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
CENTRAL FLORIDA YMCA		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
GOLDEN TRIANGLE YMCA	X			
GRACE MEDICAL HOME		X		
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HEBNI NUTRITION CONSULTANTS, INC.		X	X	
HISPANIC HEALTH INITIATIVES		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
MENDED HEARTS, LAKE COUNTY	X			
MENDED HEARTS OF OSCEOLA			X	
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
TAVARES VA COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
TRUE HEALTH		X	X	X
UNITED WAY 2-1-1		X	X	X

Community Assets by County - Healthcare: Services - Chronic Disease Management

CHRONIC DISEASE MANAGEMENT	LAKE	ORANGE	OSCEOLA	SEMINOLE
AMERICAN CANCER SOCIETY	X	X	X	X
AMERICAN DIABETES ASSOCIATION	X	X	X	X
AMERICAN HEART ASSOCIATION	X	X	X	X
AMERICAN LUNG ASSOCIATION	X	X	X	X
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
ELDER OPTIONS	X			
GRACE MEDICAL HOME		X		
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HISPANIC HEALTH INITIATIVES		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
THE NATIONAL KIDNEY FOUNDATION		X	X	X
TRUE HEALTH		X		
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Healthcare: Services - Dental Care

DENTAL CARE	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA FAMILY MEDICINE		X		X
COMMUNITY HEALTH CENTERS	X	X		X
DENTAL CARE ACCESS FOUNDATION		X	X	X
GRACE MEDICAL HOME		X		
HARVEST TIME INTERNATIONAL				X
LAKE COUNTY HEALTH DEPARTMENT	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA CHRISTIAN MINISTRY CENTER			X	
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE				X
ST. LUKE FREE MEDICAL AND DENTAL CLINIC	X			
TAVARES COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE ORLANDO VA MEDICAL CENTER		X	X	X
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Healthcare: Services - Health Literacy

HEALTH LITERACY	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
APOPKA FAMILY LEARNING CENTER		X		
BOYS & GIRLS CLUB OF CENTRAL FLORIDA	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
COMMUNITY VISION			X	
ELDER AFFAIRS	X			
FLORIDA NURSES ASSOCIATION		X	X	X
GRACE MEDICAL HOME		X		
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HISPANIC HEALTH INITIATIVES		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
LAKE COUNTY PUBLIC LIBRARIES	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
ORANGE COUNTY PUBLIC LIBRARIES		X		
ORANGE COUNTY PUBLIC SCHOOL SYSTEM		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
OSCEOLA COUNTY PUBLIC LIBRARIES			X	
OSCEOLA COUNTY SCHOOL DISTRICT			X	
PRIMARY CARE ACCESS NETWORK (PCAN)		X		

Community Assets by County - Healthcare: Services - Health Literacy, Cont'd.

HEALTH LITERACY, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SEMINOLE COUNTY PUBLIC LIBRARIES				X
SEMINOLE COUNTY PUBLIC SCHOOL SYSTEM				X
SENIOR RESOURCE ALLIANCE		X	X	X
SHEPHERD'S HOPE		X		X
UNITED WAY 2-1-1	X	X	X	X
WINTER PARK HEALTH FOUNDATION		X		

Community Assets by County - Healthcare: Services - Mental Health

MENTAL HEALTH	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
ASPIRE HEALTH PARTNERS		X	X	X
CHILDREN'S HOME SOCIETY OF FLORIDA	X	X	X	X
COMMUNITY HEALTH CENTERS	X	X		
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
IMPOWER		X	X	X
LA AMISTAD RESIDENTIAL TREATMENT CENTER		X		
LIFESTREAM BEHAVIORAL SERVICES	X			
NATIONAL ALLIANCE ON MENTAL ILLNESS		X	X	X
OMEGA ALPHA NU MINISTRIES MENTAL HEALTH			X	
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH & FAMILY SERVICES		X		
ORLANDO BEHAVIORAL HEALTH		X	X	X
PARK PLACE BEHAVIORAL HEALTHCARE		X	X	
PATHWAYS DROP-IN CENTER, INC.	X	X	X	X
SEMINOLE COMMUNITY MENTAL HEALTH CENTER				X
THE CENTER ORLANDO		X	X	X
THE CHRYSALIS CENTER, INC.		X		
THE GROVE COUNSELING CENTER		X	X	X
THE MENTAL ASSOCIATION OF CENTRAL FLORIDA		X	X	X
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
THE TRANSITION HOUSE		X		
TRUE HEALTH				X
UNITED AGAINST POVERTY	X	X		

Community Assets by County - Healthcare: Services - Mental Health, Cont'd.

MENTAL HEALTH, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
UNITED WAY 2-1-1		X	X	X
UNIVERSITY BEHAVIORAL CENTER		X		
VISIONARY VANGUARD GROUP		X		
WAYNE DENSCH CENTER		X	X	X
WRAPAROUND ORANGE		X		

Community Assets by County - Healthcare: Services - Substance Abuse

SUBSTANCE ABUSE	LAKE	ORANGE	OSCEOLA	SEMINOLE
ALA TEEN		X	X	X
AL-NON		X	X	X
ALCOHOLICS ANONYMOUS	X	X	X	X
ASPIRE HEALTH PARTNERS		X	X	X
BE FREE LAKE	X			
CENTRAL CARE MISSION OF ORLANDO, INC.		X		
COMMUNITY FOOD & OUTREACH CENTER		X		
FLORIDA ALCOHOL & DRUG ABUSE ASSOCIATION		X	X	X
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
FRESH START MINISTRIES OF CENTRAL FLORIDA, INC.		X	X	X
HOUSE OF FREEDOM, INC.			X	
LA AMISTAD RESIDENTIAL TREATMENT CENTER		X		
LIFESTREAM BEHAVIORAL SERVICES	X			
MULTICULTURAL ADDICTION SERVICES		X		
NARCOTICS ANONYMOUS	X	X	X	X
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORLANDO BEHAVIORAL HEALTHCARE		X	X	X
PARK PLACE BEHAVIORAL HEALTHCARE			X	
SPECIALIZED TREATMENT, EDUCATION AND PREVENTION SERVICES, INC.		X		X
THE CENTER ORLANDO		X	X	X
THE CHRYSALIS CENTER, INC.				
THE GROVE COUNSELING CENTER				X
THE TURNING POINT		X	X	X
UNITED WAY 2-1-1	X	X	X	X
UNIVERSITY BEHAVIORAL HEALTH CENTER		X		

Community Assets by County - Healthcare: Barriers - Access to Care

ACCESS TO CARE	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
COMMUNITY MEDICAL CARE CENTER, LEESBURG (FREE CLINIC)	X			
COMMUNITY VISION			X	
ELDER CARE	X			
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
FLORIDA HEALTH CARE COALITION	X	X	X	X
GRACE MEDICAL HOME		X		
HARVEST TIME INTERNATIONAL, INC.		X	X	X
HEALTHY ORANGE COLLABORATION		X		
HEALTHY SEMINOLE COLLABORATION				X
HISPANIC HEALTH INITIATIVES		X	X	X
HOPE AND HELP CENTER OF CENTRAL FLORIDA		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
LIFE'S CHOICES OF LAKE COUNTY, EUSTIS	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA CHRISTIAN MINISTRY CENTER			X	
OSCEOLA COUNCIL ON AGING			X	
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PARTNERSHIP FOR PRESCRIPTION ASSISTANCE	X			
PATHWAYS TO CARE				X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		

Community Assets by County - Healthcare: Barriers - Access to Care, Cont'd.

ACCESS TO CARE, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X
ST. LUKE MEDICAL AND DENTAL CLINIC	X			
TAVARES VA COMMUNITY-BASED OUTPATIENT CLINIC	X			
THE CENTER ORLANDO		X		X
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
THE SHARING CENTER				X
TRUE HEALTH				X
UNITED AGAINST POVERTY		X		
UNITED WAY 2-1-1	X	X	X	X
UNITED WAY FREE AND REDUCED PRESCRIPTIONS	X			
UNIVERSITY BEHAVIORAL HEALTH CENTER		X		
VETERAN'S AFFAIRS, LEESBURG	X			
WE CARE OF LAKE COUNTY	X			

Community Assets by County - Healthcare: Barriers - Affordable Healthcare

AFFORDABLE HEALTHCARE	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
ASPIRE HEALTH PARTNERS		X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
COMMUNITY HEALTH CENTERS		X		
COMMUNITY VISION			X	
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
FLORIDA HEALTH CARE COALITION	X	X	X	X
GRACE MEDICAL HOME		X		
HARVEST TIME INTERNATIONAL, INC.		X	X	X
HEALTHY ORANGE COLLABORATION		X		
HEALTHY SEMINOLE COLLABORATION				X
HISPANIC HEALTH INITIATIVES		X	X	X
HOPE AND HELP CENTER OF CENTRAL FLORIDA		X	X	X
LAKE COUNTY HEALTH DEPARTMENT	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA CHRISTIAN MINISTRY CENTER			X	
OSCEOLA COUNCIL ON AGING			X	
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PATHWAYS TO CARE		X	X	X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SHEPHERD'S HOPE		X		X

Community Assets by County - Healthcare: Barriers - Affordable Healthcare, Cont'd.

AFFORDABLE HEALTHCARE, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
THE CENTER ORLANDO		X	X	X
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE ORLANDO VA MEDICAL CENTER - KISSIMMEE COMMUNITY-BASED OUTPATIENT CLINIC			X	
THE SHARING CENTER				X
TRUE HEALTH		X		X
UNITED AGAINST POVERTY		X		
UNITED WAY 2-1-1	X	X	X	X
UNIVERSITY BEHAVIORAL CENTER		X		

Community Assets by County - Reproductive Health: Maternal and Child Health

MATERNAL AND CHILD HEALTH	LAKE	ORANGE	OSCEOLA	SEMINOLE
APOPKA FAMILY LEARNING CENTER		X		
BETA CENTER		X	X	X
BOYS & GIRLS CLUB OF CENTRAL FLORIDA	X	X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
CHRISTIAN CARE CENTER	X			
COMMUNITY HEALTH CENTERS	X	X		
COMMUNITY VISION		X		
CONDUCTIVE EDUCATION CENTER OF ORLANDO		X		
EARLY LEARNING COALITION OF LAKE COUNTY	X			
EARLY LEARNING COALITION OF ORANGE COUNTY		X		
EARLY LEARNING COALITION OF OSCEOLA COUNTY			X	
EARLY LEARNING COALITION OF SEMINOLE COUNTY				X
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
FLORIDA NETWORK OF CHILDRENS ADVOCACY CENTERS		X	X	X
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY START COALITION OF ORANGE COUNTY		X		
HEALTHY START COALITION OF OSCEOLA COUNTY			X	
HEALTHY START COALITION OF SEMINOLE COUNTY				X
HEART OF FLORIDA UNITED WAY		X	X	X
KIDS HOUSE				X
KINDER CONSULTING & PARENTS, TOO		X		

Community Assets by County - Reproductive Health: Maternal and Child Health, Cont'd.

MATERNAL AND CHILD HEALTH, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
LAKE COUNTY BREASTFEEDING TASK FORCE	X			
LIFE CHOICES	X			
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PLANNED PARENTHOOD		X	X	X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
SANFORD CRISIS PREGNANCY CENTER				X
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SOUTH LAKE PREGNANCY CENTER	X			X
THE CHRYSALIS CENTER, INC.		X		
TRUE HEALTH		X	X	X
UNITED AGAINST POVERTY		X		
UNITED WAY 2-1-1	X	X	X	X
UNITED WAY OF LAKE SUMTER COUNTIES	X			

Community Assets by County - Reproductive Health: Sexually Transmitted Diseases

SEXUALLY TRANSMITTED DISEASES	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
ASPIRE HEALTH PARTNERS		X	X	X
APOPKA FAMILY LEARNING CENTER		X		
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA PARTNERSHIP ON HEALTH DISPARITIES		X	X	X
COMMUNITY HEALTH CENTERS	X	X		
COMMUNITY VISION			X	
GRACE MEDICAL HOME		X		
HOPE AND HELP CENTER OF CENTRAL FLORIDA		X	X	X
MIRACLE OF LOVE		X	X	X
MULTICULTURAL ADDICTION SERVICES, LLC		X		
LAKE COUNTY HEALTH DEPARTMENT	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORANGE COUNTY HEALTH DEPARTMENT		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
PLANNED PARENTHOOD				
SEMINOLE COUNTY HEALTH DEPARTMENT		X	X	X
SHEPHERD'S HOPE		X		X
TAVARES VA MEDICAL CENTER	X			
THE CENTER ORLANDO		X	X	X
THE ORLANDO VA MEDICAL CENTER		X	X	X
THE PLACE OF COMFORT		X	X	X
TRUE HEALTH		X		X
TURNING POINT		X	X	X
UNITED AGAINST POVERTY		X		
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Adolescent Health: Marijuana Use Among Youth

MARIJUANA USE AMONG YOUTH	LAKE	ORANGE	OSCEOLA	SEMINOLE
ASPIRE HEALTH PARTNERS		X	X	X
BE FREE LAKE	X			
BOYS & GIRLS CLUB OF CENTRAL FLORIDA		X	X	X
BOYS & GIRLS CLUB OF LAKE & SUMTER COUNTIES	X			
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
LA AMISTAD RESIDENTIAL TREATMENT CENTER		X		
LAKE COUNTY PUBLIC SCHOOLS	X			
LIFESTREAM	X			
MULTICULTURAL ADDICTION SERVICES		X	X	X
NARCOTICS ANONYMOUS		X	X	X
ORANGE COUNTY PUBLIC SCHOOL SYSTEM		X		
ORLANDO BEHAVIORAL HEALTHCARE		X	X	X
OSCEOLA COUNTY PUBLIC SCHOOL SYSTEM			X	
SEMINOLE BEHAVIORAL HEALTHCARE				X
SEMINOLE COUNTY PUBLIC SCHOOL SYSTEM				X
SEMINOLE PREVENTION COALITION				X
SPECIALIZED TREATMENT, EDUCATION AND PREVENTION SERVICES, INC.		X		
THE CHRYSALIS CENTER, INC.		X	X	X
UNITED AGAINST POVERTY		X		
UNITED WAY 2-1-1	X	X	X	X
UNIVERSITY BEHAVIORAL CENTER		X		

Community Assets by County - Adolescent Health: Physical Activity Among Youth

PHYSICAL ACTIVITY AMONG YOUTH	LAKE	ORANGE	OSCEOLA	SEMINOLE
100 BLACK MEN OF ORLANDO, INC.		X		
AMERICAN DIABETES ASSOCIATION	X	X	X	X
AMERICAN HEART ASSOCIATION	X	X	X	X
ASPIRE HEALTH PARTNERS		X	X	X
BOYS & GIRLS CLUB OF CENTRAL FLORIDA		X	X	X
BOYS & GIRLS CLUB LAKE & SUMTER COUNTIES	X			
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA YMCA		X	X	X
CITY OF ORLANDO PARKS & RECREATION		X		
CLERMONT ARTS AND RECREATIONAL CENTERS	X			
COMMUNITY HEALTH CENTERS	X	X		
F.I.T. SPORTS				X
FUN 4 LAKE KIDS	X			
GET ACTIVE ORLANDO		X		
GET FIT LAKE	X			
HEALTHY 100 KIDS		X		
HEALTHY CENTRAL FLORIDA		X		
HEALTHY ORANGE COLLABORATIVE		X		
HEALTHY SEMINOLE COLLABORATIVE				X
HEBNI NUTRITION CONSULTANTS, INC.		X	X	X
HISPANIC HEALTH INITIATIVES		X	X	X
JEWISH COMMUNITY CENTER		X		
LAKE COUNTY CHILDREN'S SERVICES	X			
LAKE COUNTY HEALTH DEPARTMENT	X			
LAKE COUNTY PARKS & RECREATION	X			
LAKE COUNTY PUBLIC LIBRARY SYSTEM	X			

Community Assets by County - Adolescent Health: Physical Activity Among Youth, Cont'd.

PHYSICAL ACTIVITY AMONG YOUTH, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
LAKE COUNTY SCHOOLS	X			
LAKE COUNTY SHARED SERVICES	X			
LIVE WELL CENTERS/NATIONAL TRAINING CENTER	X			
MISSION FIT KIDS		X		
ORANGE COUNTY HEALTH DEPARTMENT		X		
ORANGE COUNTY PARKS & RECREATION		X		
ORANGE COUNTY PUBLIC SCHOOL SYSTEM		X		
OSCEOLA COUNTY HEALTH DEPARTMENT			X	
OSCEOLA COUNTY PARKS & RECREATION			X	
OSCEOLA COUNTY SCHOOL DISTRICT WELLNESS PROGRAM			X	
OVEREATERS ANONYMOUS	X	X	X	X
PRIMARY CARE ACCESS NETWORK (PCAN)		X		
REDUCE OBESITY IN CENTRAL FLORIDA KIDS (ROCK)		X	X	X
SEMINOLE COUNTY HEALTH DEPARTMENT				X
SEMINOLE COUNTY PARKS & RECREATION				X
SEMINOLE COUNTY PUBLIC SCHOOL SYSTEM				X
THE COLLABORATIVE OBESITY PREVENTION PROGRAM		X		
THE HARMONY INSTITUTE			X	
TRUE HEALTH		X		X
UNITED WAY 2-1-1	X	X	X	X
WINTER PARK HEALTH FOUNDATION		X		
YMCA	X	X	X	X

Community Assets by County - Social Determinants of Health: Financial Barriers - Homelessness

HOMELESSNESS	LAKE	ORANGE	OSCEOLA	SEMINOLE
ASPIRE HEALTH PARTNERS		X	X	X
BETA CENTER		X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA COMMISSION ON HOMELESSNESS		X		
CHRISTIAN CARE CENTER	X			
CHRISTIAN SERVICE CENTER OF CENTRAL FLORIDA		X	X	X
COALITION FOR THE HOMELESS OF CENTRAL FLORIDA		X		
COMMUNITY VISION		X		
FAMILIES IN TRANSITION - SEMINOLE COUNTY PUBLIC SCHOOLS				X
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X	X	X
FORWARD PATHS	X			
GOODWILL	X	X	X	X
HEART HANDS MINISTRY	X			
HEART OF FLORIDA UNITED WAY		X	X	X
HELPING OTHERS MAKE THE EFFORT			X	
HOMELESS SERVICES NETWORK OF CENTRAL FLORIDA		X	X	X
HOUSE OF FREEDOM, INC.			X	
INTERFAITH HOSPITALITY NETWORK ORLANDO		X		
LAKE COMMUNITY ACTION AGENCY	X			
LAKE CARES PANTRY	X			
MEN'S RESCUE MISSION LEESBURG	X			
MID-FLORIDA HOMELESS COALITION	X			
NEW BEGINNINGS	X			
ORANGE BLOSSOM FAMILY HEALTH		X	X	X
ORLANDO UNION RESCUE MISSION MEN'S DIVISION		X		
OSCEOLA CHRISTIAN MINISTRY CENTER			X	

Community Assets by County - Social Determinants of Health: Financial Barriers - Homelessness, Cont'd.

HOMELESSNESS, CONT'D.	LAKE	ORANGE	OSCEOLA	SEMINOLE
OSCEOLA COUNCIL ON AGING			X	
OSCEOLA COUNTY HOUSING AGENCY KISSIMMEE			X	
PATHWAYS TO HOME				X
RESCUE OUTREACH MISSION OF SANFORD				X
THE CENTER FOR AFFORDABLE HOUSING, INC.				X
THE OPEN DOOR	X			
THE ORLANDO VA MEDICAL CENTER		X		X
THE SALVATION ARMY		X	X	X
THE TRANSITION HOUSE		X		
UNITED AGAINST POVERTY		X	X	X
UNITED WAY 2-1-1	X	X	X	X
UNITED WAY OF LAKE AND SUMTER COUNTIES	X			
WAYNE DENSCH CENTER		X	X	X

Community Assets by County - Social Determinants of Health: Financial Barriers - Housing Affordability

HOUSING AFFORDABILITY	LAKE	ORANGE	OSCEOLA	SEMINOLE
ASPIRE HEALTH PARTNERS		X	X	X
CENTER FOR CHANGE		X		
CENTER FOR MULTICULTURAL WELLNESS & PREVENTION		X	X	X
CENTRAL FLORIDA URBAN LEAGUE		X	X	X
CITY OF ORLANDO HOUSING & COMMUNITY DEVELOPMENT		X		
COMMUNITY VISION		X		
EUSTIS HOUSING AUTHORITY	X			
HABITAT FOR HUMANITY	X	X	X	X
HOUSING & NEIGHBORHOOD DEVELOPMENT SERVICES OF CENTRAL FLORIDA (HANDS OF CENTRAL FLORIDA)	X	X	X	X
HOUSING FOR PERSONS LIVING WITH AIDS (HOPWA)		X	X	
LAKE COUNTY COUNCIL ON AGING	X			
LAKE COUNTY GOVERNMENT	X			
LAKE COUNTY HOUSING & COMMUNITY DEVELOPMENT	X			
LAKE COUNTY HOUSING FINANCE AUTHORITY	X			
ORANGE COUNTY GOVERNMENT		X		
ORANGE COUNTY HOUSING FINANCE AUTHORITY		X		
OSCEOLA COUNCIL ON AGING			X	
OSCEOLA COUNTY GOVERNMENT			X	
OSCEOLA COUNTY HOUSING AUTHORITY			X	
PATHWAYS TO HOME				X
RESCUE OUTREACH MISSION OF SANFORD				X
SEMINOLE COUNTY GOVERNMENT				X
SEMINOLE COUNTY HOUSING AUTHORITY				X
THE CENTER FOR AFFORDABLE HOUSING, INC.				X
UNITED AGAINST POVERTY		X	X	X
U.S. DEPARTMENT OF HOUSING & URBAN DEVELOPMENT		X	X	X
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Social Determinants of Health: Financial Barriers - High Unemployment

HIGH UNEMPLOYMENT	LAKE	ORANGE	OSCEOLA	SEMINOLE
ASPIRE HEALTH PARTNERS - WOMEN'S RESIDENTIAL SEMINOLE				X
CENTER FOR CHANGE		X		
CENTRAL FLORIDA EMPLOYMENT COUNCIL		X	X	X
CENTRAL FLORIDA PARTNERSHIP		X	X	X
CENTRAL FLORIDA URBAN LEAGUE		X	X	X
COUNTY CHAMBERS OF COMMERCE	X	X	X	X
CHOOSE OSCEOLA - OSCEOLA COUNTY ECONOMIC DEVELOPMENT DEPARTMENT			X	
COALITION FOR THE HOMELESS OF CENTRAL FLORIDA		X		
COMMUNITY VISION		X		
DOWNTOWN ORLANDO PARTNERSHIP		X		
GOODWILL	X	X	X	X
LAKE COUNTY ECONOMIC DEPARTMENT	X			
LEADERSHIP LAKE COUNTY	X			
LEADERSHIP ORLANDO		X		
LEADERSHIP OSCEOLA			X	
LEADERSHIP SEMINOLE				X
METRO ORLANDO ECONOMIC DEVELOPMENT COMMISSION		X		
ORLANDO UNION RESCUE MISSION MEN'S DIVISION		X		
OSCEOLA CHRISTIAN MINISTRY CENTER			X	
OSCEOLA COUNCIL ON AGING			X	
RESCUE OUTREACH MISSION OF SANFORD				X
SEMINOLE COUNTY ECONOMIC DEVELOPMENT				X
THE ORLANDO VA MEDICAL CENTER		X	X	X
UNITED AGAINST POVERTY		X	X	X
UNITED WAY 2-1-1	X	X	X	X
WORKFORCE CENTRAL FLORIDA	X	X	X	X

Community Assets by County - Social Determinants of Health: Criminal Justice - Motor Vehicle Accidents/Collisions

MOTOR VEHICLE ACCIDENTS/COLLISIONS	LAKE	ORANGE	OSCEOLA	SEMINOLE
DEPARTMENT OF JUVENILE JUSTICE	X			
FLORIDA DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES	X	X	X	X
FLORIDA SAFETY COUNCIL, INC.	X	X	X	X
HEALTH CENTRAL HOSPITAL		X		
LAKE COUNTY PUBLIC SCHOOL SYSTEM	X			
MOTHERS AGAINST DRUNK DRIVING (MADD)		X	X	X
ORANGE COUNTY PUBLIC SCHOOL SYSTEM		X		
OSCEOLA COUNTY PUBLIC SCHOOL SYSTEM			X	
SEMINOLE COUNTY PUBLIC SCHOOL SYSTEM				X
UNITED WAY 2-1-1	X	X	X	X

Community Assets by County - Social Determinants of Health: Criminal Justice - Violent Crime

VIOLENT CRIME	LAKE	ORANGE	OSCEOLA	SEMINOLE
ASPIRE HEALTH PARTNERS		X	X	X
CENTRAL FLORIDA REGIONAL HOSPITAL				X
CENTRAL FLORIDA URBAN LEAGUE		X	X	X
FLORIDA DEPARTMENT OF CHILDREN & FAMILIES	X	X		
HARBOR HOUSE OF CENTRAL FLORIDA		X	X	X
HAVEN LAKE COUNTY	X			
HELP NOW DOMESTIC VIOLENCE SHELTER			X	
LAKE COUNTY GOVERNMENT	X			
LAKE COUNTY SHERIFF'S OFFICE	X			
ORANGE COUNTY GOVERNMENT		X		
ORANGE COUNTY SHERIFF'S OFFICE		X		
OSCEOLA COUNTY GOVERNMENT			X	X
OSCEOLA COUNTY SHERIFF'S OFFICE				
POLICE DEPARTMENTS	X	X	X	X
RUTH HOUSE	X			
SEMINOLE COUNTY GOVERNMENT				X
SEMINOLE COUNTY SHERIFF'S OFFICE				X
UNITED WAY 2-1-1	X	X	X	X
UNIVERSITY BEHAVIORAL CENTER		X		

Written Comments from the 2013 Community Health Needs Assessment

The hospital did not receive any written comments from the public regarding our 2013 Community Health Needs Assessment or Community Health Plan.

Review of the Strategies Undertaken in the 2013 Community Health Plan

The Hospital conducts an annual Evaluation of the progress made on its Community Health Plan (Implementation Strategies). The Evaluation is reported to the IRS in the hospital's Form 990. The following narrative is a copy of the 2015 Community Health Plan Evaluation as noted in Form 990, Schedule H, Part V, Section B, Line 11.

Community Needs Being Addressed by Florida Hospital Orlando

Florida Hospital (FH) has seven acute-care hospital facilities in Orange, Seminole and Osceola Counties, FL. The tri-county area is often referred to as Central Florida. The seven Florida Hospital facilities operate under one license but, due to the diverse communities served, Florida Hospital conducted separate Community Health Needs Assessments and Community Health Plans (implementation strategies) for each Florida Hospital campus.

This narrative describes the Community Health Plan for Florida Hospital Orlando (FHO), a tertiary medical center in downtown Orlando in Orange County, Florida. Florida Hospital Orlando chose three areas of focus for its 2013-16 Community Health Plan: Access to Care, Mental Health and Heart Disease/Obesity. This narrative also addresses efforts in Diabetes and Obesity/Disease Prevention.

Access to Affordable Health Care

2013 Description of the Issue: Over 24% of people in Central Florida do not have health insurance, and the State of Florida has not accepted federal Medicaid expansion dollars. A number of Florida Hospital Orlando initiatives linked uninsured and underinsured residents with free or affordable health care.

2015 Update: Florida Hospital Orlando provided \$6 million in financial support for the Primary Care Access Network (PCAN) of Orange County, a dynamic collaborative of 22 safety net providers: Orange County Government, FQHC medical homes, the Health Department, free clinics, community agencies, hospitals and social service entities. PCAN's mission is to improve the access, quality and coordination of health care services to the underinsured and uninsured populations of Orange County. Since 2001, the collaboration has grown from one FQHC medical home with 5,000 patients to 13 FQHCs with 92,000 uninsured patients. Uninsured patients are seen on a sliding fee scale basis (the FQHCs also accept Medicaid, Medicare and private insurance). In addition, 10,300 people with incomes below 125% of the federal poverty level received secondary care at the Orange County Medical Clinic.

Florida Hospital Orlando also provided \$100,000 in financial support to (both) Grace Medical Home (for chronic conditions) and the Health Care Center for the Homeless. Florida Hospital Orlando operated a no-cost Community After Hours Clinic that saw 3,000 uninsured patients. Florida Hospital Orlando financially supported the operations of Shepherd's Hope free clinics (that saw 15,000 uninsured patients), provided funding for an electronic medical record system, and recruited

over 150 different Florida Hospital employees to volunteer at Shepherd's Hope clinics. Florida Hospital Orlando also provided financial support to start up the school health clinic at nearby Edgewater High School.

Florida Hospital Orlando provided a funding match for the Healthy Start Coalition of Orange County that serves mothers and infants. Florida Hospital's mobile mammogram unit provided 1,400 free or very low-cost mammograms to uninsured women.

In order to help build the local health care workforce (and ensure that Central Florida has providers in the future), Florida Hospital Orlando provided funding for the professional development and education of medical and nursing students from Valencia College, Seminole State College, Adventist University, the University of Central Florida (UCF), and the UCF School of Medicine. These entities also rotate students through multiple clinical departments at Florida Hospital Orlando.

Mental Health

2013 Description of the Issue: While there are strong mental health and substance abuse providers in the Orange County community, funding for these services is very limited (as is the case throughout Florida). Florida Hospital Orlando has medical-psychiatric beds, and is the Baker Act Receiving Center for Orange County.

2015 Update: The Florida Hospital Outlook Clinic for Depression & Anxiety provided free comprehensive behavioral evaluation, treatment and case management for uninsured residents of Orange County. In 2015, 816 patients received services (the goal was 650). The Outlook Clinic is a partnership with Orange County Government Health Services, the Mental Health Association of Orange County, the University of Central Florida College of Social Work, and others.

Florida Hospital Orlando was a founder of, and provides major funding for, the Orange County Central Receiving Center (CRC). The CRC provides an alternative to jail or to the Baker Act Receiving Center. Law enforcement officers can bring non-dangerous arrestees to the CRC, a short-term treatment setting for alcohol or drug-impaired arrestees. The County mental health provider, Aspire Behavioral Health Partners (Aspire), operates the CRC.

Florida Hospital Orlando also provided other major funding for Aspire as well as financial support for the Mental Health Association of Central Florida. Florida Hospital Orlando has representatives working on the Orange County Government SAMHSA Wrap-Around effort to coordinate preventive mental health services for children.

Heart Disease / Obesity

2013 Description of the Issue: Heart disease is a leading cause of death in Central Florida and across the nation. Risk factors for heart disease include obesity, lack of exercise and smoking. The Florida Heart Institute at Florida Hospital Orlando offers heart transplantation, surgical and interventional cardiology programs, and a full range of pre- and post-treatment services.

2015 Update: Florida Hospital Orlando continued to fund and operate a Congestive Heart Failure (CHF) clinic serving uninsured patients. It is staffed by Florida Hospital ARNPs and is co-located with the Orlando County Medical Clinic (specialty care) noted above. In 2015, the clinic served 850 patients at no cost.

Florida Hospital Orlando offered many free screenings and community lectures on disease prevention and recognizing the warning signs of heart disease. Cardiac education and support programs included (but were not limited to) the Mended Hearts Cardiac Support Group, Caring for Your Heart When You Have Diabetes, Get Your Heart in Rhythm, and Do Women with Endometriosis Have a Higher Risk of Heart Disease? Florida Hospital also offers free Quit Smoking Now smoking cessation classes and a free online Heart Disease Risk Assessment. These programs were all open to the public.

Florida Hospital Orlando was a major funder of research and education sponsored by the American Heart Association, and sponsored the AHA and other 5K Runs.

Diabetes in the Town of Eatonville

2013 Description of the Issue: Florida Hospital Orlando's 2013 Needs Assessment showed that Diabetes is among the most prevalent chronic diseases in Orange County. Diabetes can lead to the development of serious and disabling complications if not properly treated. Complications include heart disease and stroke, high blood pressure, blindness, kidney disease and limb amputation.

The town of Eatonville, just three miles from Florida Hospital Orlando, is the nation's oldest African-American community. The community has a 24% rate of diabetes (compared to 7.1% for the rest of Orange County).

2015 Update: "Healthy Eatonville Place" targeted the primarily African-American residents of the town of Eatonville. The program offered screenings, diabetic health risk assessments and treatment to help Eatonville residents better control their diabetes. Diabetic and pre-diabetic residents participated in the no-cost effort, and the program's retention rate was 85%. For 2015, other outcomes included:

- Pre-diabetic participants who did not become diabetic: 66%
- Pre-diabetic participants who met their weight loss goal of >7%: 50%
- Pre-diabetic participants who reported nutrition and exercise changes: 60%
- Patients with poorly controlled diabetes who reached their blood pressure goal: 80%
- Patients with poorly controlled diabetes who finished diabetes education and understood their personal goals: 90%
- Patients "graduates" with poorly controlled diabetes who continued with the program's interventions and support programs: 75%.

Florida Hospital Orlando also supports the American Diabetes Association Annual 5k and other walks that provide opportunities for leisure time activity.

Obesity / Disease Prevention

2013 Description of the Issue: Obesity increases the risk for developing health conditions such as heart disease, stroke, diabetes and cancer. Additionally, being overweight or obese increases the risk of adverse health outcomes and has significant economic impacts on individuals and the community. These impacts can include a rise in health care spending over time as well as lost earnings and productivity due to illness.

2015 Update: CREATION Health lifestyle seminars and expanded programs were offered at Florida Hospital Orlando and in community settings. CREATION Health is a faith-based wellness plan that focuses on eight principles: Choice, Rest, Environment, Activity, Trust, Interpersonal Relationships, Outlook and Nutrition. CREATION Kids is a child-friendly wellness program that stresses healthy eating and exercise in church and school settings; it reached 350 children and their parents.

With community partners, Florida Hospital served 4,200 people in identified food deserts with a Mobile Farmers Market that offered fresh fruits and vegetables, cooking demos and nutritional educational opportunities. Florida Hospital Orlando also provided financial support to three public and private school-based gardens in the Orlando community.

Social Determinants of Health and Health Disparities

2013 Description of the Issue: Although specific health determinants and poverty were not selected as priorities in Florida Hospital Orlando's Community Health Needs Assessment, Florida Hospital Orlando supports "place-based" community transformation efforts that address health determinants in geographically specific areas.

2015 Update: Florida Hospital Orlando continued to be the anchor partner for the City of Bithlo Transformation Effort led by the nonprofit agency United Global Outreach (UGO). UGO and its partners are working to address multiple conditions in this very low-income community (census tract 166.22) of 8,200 people: Education, Housing, Transportation, Health Care, Environment, Basic Needs and Sense of Community. Florida Hospital Orlando provided \$150,000 in direct funding. Florida Hospital Orlando also engaged community partners (colleges, businesses, community organizations, etc.) and recruited its vendors and employees to help in the effort. These efforts were valued at more than \$400,000 in 2015.

Florida Hospital Orlando was also a partner in LIFT Orlando, a nonprofit organization of business leaders collaborating with residents to accelerate community transformation in the primarily low-income, African-American community of Parramore in downtown Orlando. Focus areas include cradle-to-career education, mixed income housing, community health and wellness, and long-term economic viability.

Florida Hospital Orlando provides funding to IDignity, a nonprofit agency that helps homeless, precariously housed and other low-income people get identification items: birth certificates, social security numbers or cards, drivers' licenses, state IDs and other personal identification.

Community Needs Not Chosen by Florida Hospital Orlando

Violent Crime

2015 Update: Hospitals lack the ability to directly address violent crimes but, given the high crime rates, Florida Hospital Orlando views its active involvement in issues of awareness and prevention as especially crucial. Florida Hospital Orlando provided major funding to the Harbor House Domestic Violence Center, and provided office and (off-site) treatment space for the Orange County Victims' Services Center (VSC) and the Sexual Assault Treatment Center (SATC) of Orange County. Approximately 10 nurses were trained as Sexual Assault Nurse Examiners and are on-call for the SATC. Florida Hospital Orlando staff, particularly in the ED, were trained to screen patients for domestic violence issues.

Health Literacy

2015 Update: Health Literacy was not selected as a priority issue by Florida Hospital Orlando. The Adult Literacy League and others organizations including Hispanic Health Initiatives and the Center for Multicultural Wellness & Prevention provide literacy services for the community. In addition, Florida Hospital Orlando provides full translation services that assists patients for whom English is not the primary language.

Motor Vehicle Accidents

2015 Update: The issue of motor vehicle collision is not within the purview of community hospitals. Florida Hospital Orlando does promote and fund safe pedestrianism through its partnership with Healthy Central Florida.

Single-Parent Households

2015 Update: The issue of single-parent households is not within the purview of Florida Hospital Orlando.

Maternal and Child Health

2015 Update: Because of its existing support of the Healthy Start Coalition and other maternal infant initiatives, Florida Hospital Orlando did not choose Maternal and Child Health as a priority area. Florida Hospital facilities (Winter Park, Orlando and Celebration) provide obstetrics services, and the new Florida Women's Hospital opened in 2015.

Sexually Transmitted Diseases

2015 Update: Florida Hospital Orlando provides inpatient care but does not provide wrap-around services for HIV/AIDS or STD patients. The Health Department has STD and HIV/AIDS Clinics, and the Center for Multicultural Wellness and Prevention provides programs that screen for and treat sexually transmitted diseases. In addition, Orange County Government Health Services operates the Ryan White HIV/AIDS Program that provides services to people without sufficient health coverage or financial resources to cope with HIV/AIDS.

Diabetes

2015 Update: Diabetes is a major health concern in Central Florida, and the Florida Hospital Diabetes Institute provides treatment, education and research for the community. Rather than a global focus on diabetes, Florida Hospital Orlando is focusing on obesity because it is a risk factor for diabetes, heart disease and cancer.

Cancer

2015 Update: Cancer is a major cause of death in Central Florida and the U.S. as a whole. Florida Hospital Orlando is not focusing on cancer and cancer prevention as a priority because of the many hospital and community resources already available. Groups like the American Cancer and Leukemia Societies provide outreach and education throughout the community - and in partnership with the hospitals. Florida Hospital Orlando receives Susan G. Komen dollars to help fund free mammograms for low-income women, and uses its mobile mammogram unit to reach out to this audience.