

Community Health Needs Assessment

Final Report



FLORIDA HOSPITAL
NORTH PINELLAS

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Year: 2013

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Executive Summary

Florida Hospital North Pinellas (FHNP) is the newest member of Adventist Health System (AHS). The hospital facility, however, has served the community for over 85 years.

The hospital resides in Northern Pinellas county and serves both north Pinellas and South western Pasco county. With more than 310,000 permanent residents, the community is considered a bedroom community for both Tampa and St. Petersburg. Additionally, with more than 50 percent of full-time residents age 65 and older, the health needs are more focused and more targeted than in other areas with a broader distribution of ages.

FHNP set out to better understand the health needs of the community through the community health needs assessment process. The review of Stakeholder interviews and both internal and external data was conducted by the community health needs assessment community (CHNAC). We had members from both the Pinellas and Pasco health departments, area service organizations, hospital representation, and community volunteers. They represented people from all segments of the community. Their input, advice, and insights were vital to better understanding the needs of our community.

Ultimately, the CHNAC chose four priority areas because of their implications in our community and the hospital's ability to influence and positively impact.

- Cancer screening because of the communities lower than the state and national adherence to national cancer screening criteria.
- Heart Disease was the second area of focus because of the higher than average prevalence in our community.
- Flu Shot Compliance was area that many physician and staff felt that the hospital should and could make a positive impact.
- The lack of physical exercise in the “sunshine state” that surprised us. With the great physical environment, we expected to see a much higher rate of physical exercise. This was not the case. Pinellas and Pasco counties were well below state, national, and Healthy People 2020 goals.

These four priorities will serve as the framework for the hospital as we create the community health plan (CHP) to address and impact the above four priorities. FHNP is positioned as a leader in community and serve as a catalyst to positively influence the health of our community.

Hospital Description:

Florida Hospital North Pinellas (FHNP) is a full-service, 168-bed facility located in beautiful Tarpon Springs, Florida. As a regional medical center, we offer a comprehensive list of services, testing and education opportunities focused on meeting the needs of the residents of the North Pinellas community. Florida Hospital North Pinellas has an 80-year tradition of care as a community-based, not-for-profit health care provider. With a medical staff of more than 300 physicians, including primary care and specialists, our physicians bring a tremendous resource of medical expertise to our hospital and the communities we serve.

Prior to joining Adventist Health System, the hospital was community owned and operated. Throughout the years, it has served as the regional medical center and was a leader in medical advancements and quality. Over the past 15 years, the physical facility was not invested in because of a lack of access to capital. The impact of changing reimbursement hit the hospital hard, and other hospitals began to erode our market share. The hospital also pulled back in community outreach and support. For over ten years, the hospital lost money and the balance sheet continued to erode. The reputation and image of the hospital suffered.

In 2000, the hospital joined a three-hospital system called University Community Hospital (UCH). In 2010, UCH joined Adventist Health System (AHS). The AHS merger brought a much-needed capital infusion of 45 million dollars, new services, vision, and focus. Since 2010, the financial position of the hospital has shown a 200% increase and is poised to turn its first profit in over ten years.

During the last three years, AHS has deployed over 45 million dollars to improve the quality, enhance the number of services, and strengthen the hospital. Without the vital infusion of capital and support of AHS, the hospital would likely have closed its doors and left a healthcare void in the community. As one of the area's largest employers, a safety net for healthcare for the residents of the area and a leader in health promotion and screening, FHNP is vital to physical, emotional, spiritual, and economic health of the community.

With 44 hospitals in the United States, Adventist Health System provides care for more than four million patients each year.

Community Description:

FHNP is located in northern Pinellas County. Our core service area spans both northern Pinellas and Western Pasco Counties. The counties have a total combined population in excess of 1.3 million residents. In 2013, 310,336 people reside in our core service area. The largest population for our core zip code is that of Tarpon Springs with a combined residence of 35,950.

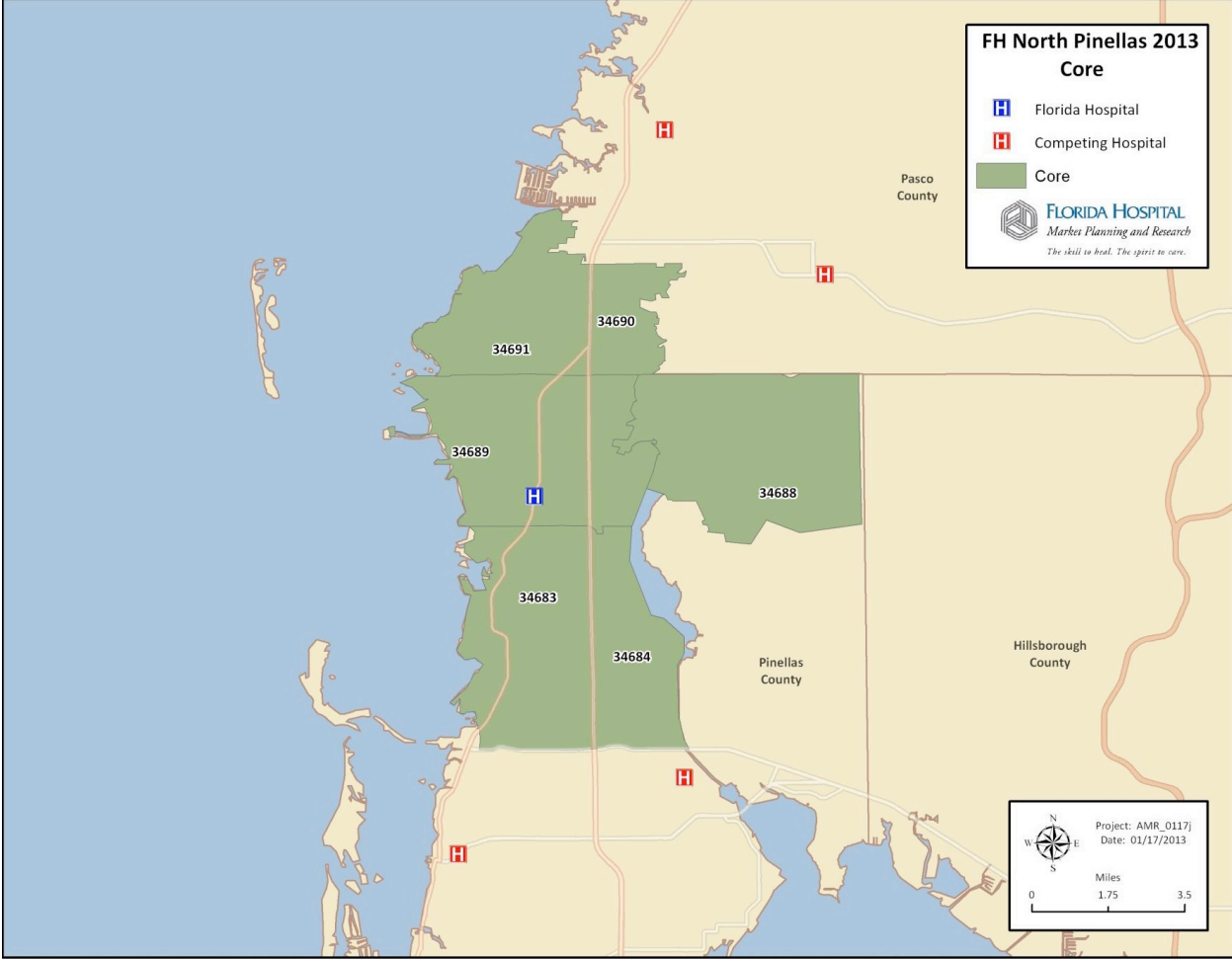
Tarpon Springs and the surrounding communities see an influx of seasonal, mostly retired residents each year. Estimates put the seasonal influx equal 10-12% of core community residents each year. During November through April, we see the greatest demand for hospital services.

Over 52% of the permanent residents are over the age of 65. This is twice the state and national rate of people over the age of 65. There is equal distribution between both male and female. The primary ethnicity is Caucasian with over 83%. Tarpon Springs has been a large community consisting of people of Greek origin. Some put it as the largest population of people of Greek origin outside of Greece.

See attached Chart labeled "Demographic Profile" located in the appendix.

FHNP resides in the northern part of Pinellas County but our core market area also spans to western Pasco County for the Holiday community. FHNP's primary service area includes three distinct communities comprised of six zip codes. The three communities are Tarpon Springs: 34689 and 34688, Holiday: 34691 and 34690, and Palm Harbor: 34683 and 34684. The great majority of our admissions, ER visits, clinic visits, and screenings come from these zip codes, which have comprised the hospital's core service area for the past 75 years.

The Core Market (Community): Florida Hospital North Pinellas is denoted by the blue "H" on the map below.



Data Collection and Analysis:

During 2013, FHNP collected primary and secondary data from a number of sources. We did interviews with our Community Health Needs Assessment Committee (CHNAC) members and others who represented the broad community as well as low-income and underserved populations. We also used internal hospital utilization data to determine what conditions brought people to our hospital. For secondary data, we used publicly available data and data from other community organizations. A full list of data sources can be found later in this document.

All data from these sources were reviewed during the Hospital Health Needs Assessment (HHNAC) and Community Health Needs Assessment Committee (CHNAC) meetings. These committees were vital in helping us in determining areas where the hospital was meeting the needs and areas where the hospital could do more.

Stakeholder Input Process:

We solicited community leaders, physicians, and health professionals to get their insight and input on the health needs of our community. The list included a group of leaders in the community who, with their knowledge of the community, would be able to assist in FHNP assess the needs of the community. Interviews were conducted with hospital staff, physicians, community members, and other organizations. These included surveys with a list of questions to help guide the discussions with participants.

Each stakeholder brings a unique perspective to our community and has knowledge of resources, data, and community needs. The HHNAC and the CHNAC selected two distinct committees to serve and provide input to the community health needs assessment process

In 2012, FHNP launched a community outreach program. This program collaborates with local businesses, physicians, and community organizations to provide screenings, lectures, and other needed health services for little to no cost to participants. This is a vital part of our stakeholder input process. The feedback, input, and participation guides what events we hold/host.

Hospital Health Needs Assessment Committee

This Committee worked hand-in-hand with the hospital's Community Benefit Manager and the Community Health Needs Assessment Committee.

Name		Position	Expertise
1	Bruce Bergherm	President & CEO	Hospital leader and active in local community – Has detailed knowledge of hospital operations, services, and expertise.
2	Karen Owensby	CNO/COO	Operational knowledge and oversight of ancillary services at hospital
3	Christine Longley	Community Outreach Coordinator	Plans screenings, lectures, and community education in and around service area. Also is connected with a number of community resource providers in community.
4	Scott Garrett	Compliance – Director & Privacy	Extensive knowledge of compliance requirements and regulations.
5	Jennifer DeCurtis	Marketing and Public Relations - Director	Has oversight of communication and marketing for hospital services. Understands the community's population and demographics.
6	Larry Black	Pastoral Care – Chaplin	Interacts with many church leaders and community providers in and around service area. These people serve people of all backgrounds, including vulnerable populations.
7	Francine Baja	Director Quality Management	Experience in data collection, summary, and reporting.
8	Debbie Nieves	Case Management Director	Understanding of health issues impacting the community through social work and discharge planning of all patients including the underserved.
9	Paul Hoover	VP – Business Development and Community Benefit Manager	The Community Benefit Manager for FHNP also oversees the auxiliary, community health outreach and marketing.

Community Health Needs Assessment Committee (CHNAC):

The Community Health Needs Assessment Committee (CHNAC) reviewed and analyzed the primary and secondary data, and selected priorities for the hospital. Two public health departments were part of the CHNAC. Several members of the CHNAC were selected for their ability to represent the needs of the medically underserved, low-income and minority populations in the community served by the hospital. Their names are in boldface below.

Name		Origination	Expertise
1	Robin Wikle	Pinellas County School Board	Knowledge of children’s health and needs in our community, including children who are low-income, minorities or otherwise underserved.
2	Ron Haddad	Shephard Center in Tarpon Springs	Community service agency with local knowledge of needs of community members with physical, emotional, and financial needs. They provide programs and services, including health services, a food pantry, and other outreach activities to the local homeless and other underserved community members.
3	David Jonson, MD	Pasco County Health Department	Knowledge of broad community health status and needs. Health Department serves low-income and minority populations. They conducted a community health needs assessment of their own and many of the needs of Pasco county overlap with that of our PSA.
4	Susan Traylor	Community Volunteer and Activist	Very involved in community serving the needs of indigent and underserved community. She volunteers her time serving at the local free dental clinics and serving the homeless in a variety of ways. She can often be found taking clothes to a family in need, feeding the homeless at the local soup kitchen, and advocating for the health needs of the underserved community. She serves on various community boards and is broadly recognized for her work with disenfranchised people.
5	Deana Krautner	Pasco County Health Department	Health Department serves low-income and minority populations. Works to compile the local community health reports and is a liaison to community organizations.
6	Melissa Vanbruggen	Pinellas County Health Department	Health Department serves low-income and minority populations. Works to compile the local community health reports and is a liaison to community organizations.
7	Paul Hoover	Florida Hospital North Pinellas	Community Benefit Manager who knows hospital services and areas of hospital outreach.
8	Bruce Bergherm	Florida Hospital North Pinellas	Hospital CEO with extensive community involvement.

Public Health:

We asked both the Pinellas and Pasco County Health Departments to serve on the Community Health Needs Assessment Committee (because the hospitals service area lies in both counties). Both entities provided feedback and assistance to the hospital, including data gathering and data analysis. We also utilized data that both health departments had compiled for each of their respective communities as we evaluated the community needs.

Data Sources:

Data Sources are also included in the Appendix for reference as well.

Secondary Data

- Demographic Profile – Healthy People data compiled by Adventist Health System – 2012 data
- Healthy Tampa Bay: Indicator Comparison Report (FHNP Community) – August 2012 Data
- Population Data – Florida Hospital Marketing and Research – 2011 Report
- Market Profile – Florida Hospital Marketing and Research - – 2011 Report
- Hospital Service Line Details – Florida Hospital Marketing and Research – Q2 2011-Q1 2012 Data
- Pasco County Health Assessment – Pasco County Health Department – 2007 Report
- Pinellas County Health Assessment – Pinellas County Health Department – August 2012 Report
- Healthy Communities Report – One Bay Healthy Communities – 2011 report

Primary Data

- Florida Hospital North Pinellas – Top 20 DRG Report – 2012 data
- Florida Hospital North Pinellas – Top 20 ER Diagnosis – 2012 data
- Interviews conducted using telephone and face-to-face interviews with community stakeholders
- Community Health Needs Assessment Committee Input

Data Summary:

The Community Health Needs Assessment Committee reviewed the stakeholder surveys, interviews, and secondary data. Through their analysis, they identified eight areas of focus for the Florida Hospital North Pinellas community. These were recurring issues throughout the community and physicians interviews. They are also frequent and re-occurring events with-in the hospital.

The data from the external (secondary) sources also further supported the local finding of the interviews. The list below includes the reasons for their selection as one of the top eight issues.

- Lack of health insurance
 - Both Pinellas and Pasco: 5+% below state levels for coverage and 8+% below national levels for coverage
- Cancer Screening
 - Pinellas & Pasco are less 30-40% than state and national averages and goal (Breast, Colon, Cervical)
- Heart Disease
 - -2x the state and national levels for 20 y/o with high total blood cholesterol levels (240 mg or greater)
 - -10% above state and national levels for 18 y/o with hypertension
- Flu Shot Compliance
 - Florida has a lower than national average flu-shot compliance.
 - Pinellas – 22% less than HP2020 goal
 - Pasco – 26% less than HP 2020 goal
- Pneumococcus Vaccine
 - While above state averages Pinellas and Pasco are 19-20% below HP2020 goal
- Mental Health Disorders
 - 7-8% above state and national levels for suicide deaths.
- Age Adjusted Diabetes Deaths
 - Pasco county diabetes age adjusted deaths is 5% above HP 2020 goal.
- Lack of physical exercise
 - 10-12% less than state and national levels.

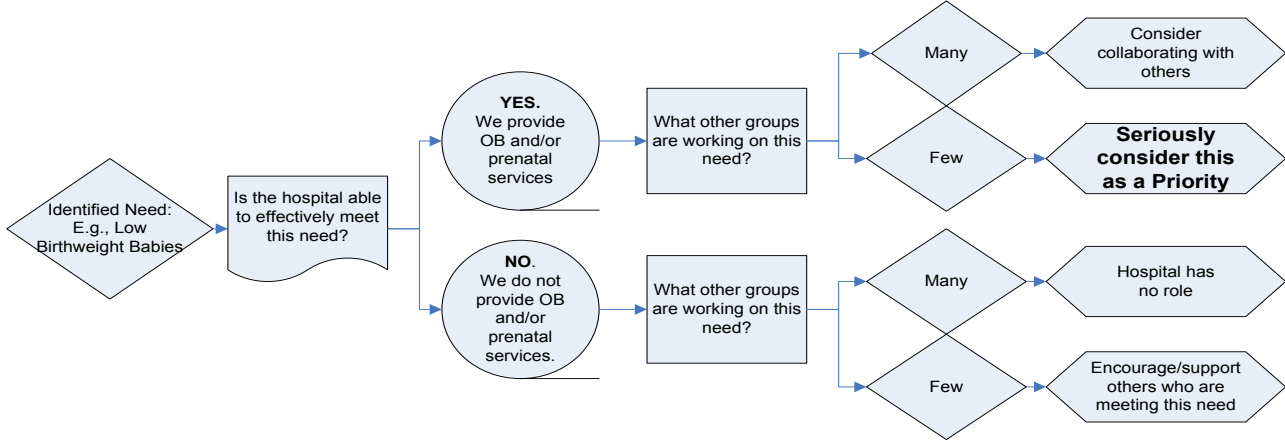
Hospital Asset Inventory:

During 2012, FHNP held 76 events, lectures, or screenings. These served over 11,000 members all for little to no expense. These health events are structured around the community needs (cardiac, diabetes, cancer, and the like).

These programs were continued through 2013.

Priority Selection:

The CHNAC used a decision tree process to set priorities for the Florida Hospital North Pinellas community. This allowed the CHNAC to select areas of focus that could be best served by the hospital.



Upon reviewing the top aggregated priorities, the Community Health Needs Assessment Committee found a number of health issues that were interrelated and learned that many were much larger than what existed in the state. We chose four priorities that matched our core services, had lower than state and national adherence to goals/guidelines, and priorities that when improved up the community would have an increased level of community health.

The four priorities that were chosen were top-of-mind in the community interviews were high in disparities in our service area, and ones that the hospital was equipped to positively impact. These priorities also bring opportunities for collaborative community partnerships in addressing them.

Priority 1: Cancer Screening

- Pinellas and Pasco Counties are much lower than the state averages for compliance with current cancer screening guidelines.
 - Pinellas & Pasco are less than state and national averages and goal.
 - Breast – 28-31% less than state
 - Colon – 35-45% less than state
 - Cervical – 19-21% less than state
- Screening tests can help find cancer at an early stage, before symptoms appear. When abnormal tissue or cancer is found early, it is easier to treat or cure. By the time symptoms appear, the cancer may have grown and spread. This can make the cancer harder to treat or cure. By increasing compliance with cancer screenings, we hope to reduce stage at which cancer is detected, improve long-term survival, improve quality of life, and reduce the cost/burden of care for cancer in our community. While there are many factors that influence whether an individual is screened for cancer we want to make a meaningful impact in our community.
- FHNP has the ability to increase cancer screenings in the future.

- We can work with the American Cancer Society, Susan G. Komen Foundation (mammograms) and others to provide additional health screenings services for all members of the community.

Priority 2: Heart Disease

- In Pinellas and Pasco counties, we are 2x the state and national levels for 20+ year olds with high total blood cholesterol levels (240 mg or greater) and 10% above state and national levels for 18+ y/o with hypertension.
- These higher-than-average rates of heart disease lead to a higher incidence of cardiac-related ER visits, cardiac complications, and cardiac-related deaths. Over the past 2 years, the market for cardiac-related services continues to increase at a faster rate than that of the market. For example, at our hospital, the inpatient interventional cath rate has grown 18.1%, six times the overall market growth. The observed growth, input from stakeholders, and physicians input all point to a larger issue in our market.
- FHNP's community health outreach activities around cardiac conditions can be enhanced.
- We can also work with community partners such as the American Heart Association on these initiatives.

Priority 3: Flu Shot Compliance

- While there have been increases over the years in the number of individuals who get the flu vaccine, the number of individuals in Pinellas and Pasco county still falls below state and national averages. There are also a higher number of hospitalizations and deaths related to influenza in our area. Blacks are nearly two times as likely in our area to die from complications of the flu.
- FHNP can work with the local Health Departments to increase the number of flu shot events, and provide communication tools to enhance compliance.

Priority 4: Lack of Physical Exercise

- In both Pinellas and Pasco Counties, the lack of moderate-to-vigorous exercise at 75 minutes per week is significantly less than that of the nation and far below the HP 2020 goal. The lack of physical exercise has been shown to have a high degree of correlation with the increase in other diseases such as diabetes, heart disease, and some cancers. By increasing the number of active individuals in our community, we believe that we can positively impact other disease categories.
- FHNP has wellness programs that can be expanded to serve more community members.

Issues Not Selected:

The CHNAC did not select the following issues as priorities:

Lack of Health Insurance

- This was a top concern of virtually all parties, but the stakeholders and the CHNAC acknowledged that this was a larger issue than the local hospital could meaningfully impact. The group believes enrollment health insurance will go up with the Affordable Care Act mandate, even though Florida did not expand Medicaid. In addition, other community partners are working on ACA enrollment.

Pneumococcus Vaccine

- Both Pinellas and Pasco Counties are 19-20% below HP2020 goal but are above state averages for this vaccine. Because of this and because the flu can lead to pneumonia, the Committee decided it was more important to concentrate on flu vaccines for the next three years.

Mental Health Disorders

- Pinellas and Pasco Counties are 7-8% above state and national levels for suicide deaths. Because the hospital does not offer mental health services, the Committee believed this was less of a priority for the hospital than the four above. In addition, mental health's frequency and intensity is not as high as some of the other issues.

Age Adjusted Diabetes Deaths

- Pasco County's diabetes age-adjusted death rate is 5% above HP 2020 goal. Because over half of diabetes patients have cardiac issues, and because community screening events can already pick up high blood sugar levels, the Committee chose to concentrate first on the cardiac conditions.

Next Steps:

These four priorities will serve as the framework for Florida Hospital North Pinellas' community health plan (CHP). The plan will be developed by the CHNAC and posted before May 15, 2014. The priorities will also drive the hospital's sponsorships, education, and outreach activities conducted in the community. The outreach activities will be focused on the identified priorities, and we will track the people served and define measures of improvement.

It is our desire to see a meaningful and improved health status in not only the four priorities but across other areas of focus that the hospital is involved in over the course of the next three years. By doing so, we can do good for the health of the community and do well as a vital member of the Pinellas and Pasco communities.