# AdventHealth Fish Memorial\* 2019 COMMUNITY HEALTH NEEDS ASSESSMENT



Approved by the Hospital Board on: October 17, 2019

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Extending the Healing Ministry of Christ



## 2019 Community Health Needs Assessment

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#### **Acknowledgements**

This report was prepared by Debi McNabb, Director Community
Benefit, Central Florida Division –
North Region, with contributions
from members of the
AdventHealth Fish Memorial
Community Health Needs
Assessment Committee
representing health leaders in
our community and
AdventHealth Fish Memorial
leaders.

A special thanks to the Florida
Department of Health in Volusia
County and Flagler Cares for
their expertise and support in the
collection and analysis of the
data.

We are especially grateful to all those who participated in our household surveys and key informant interviews. Their contributions made this report possible and lay the groundwork as we continue to fulfill our mission of Extending the Healing Ministry of Christ.

## 1. EXECUTIVE SUMMARY

#### Goals

Southwest Volusia Healthcare Corporation d/b/a AdventHealth Fish Memorial will be referred to in this document as AdventHealth Fish Memorial or "The Hospital". AdventHealth Fish Memorial in Orange City, FL, conducted a community health needs assessment in 2019. The goals of the assessment were to:

- Engage public health and community stakeholders including low-income, minority and other underserved populations
- Assess and understand the community's health issues and needs
- Understand the health behaviors, risk factors and social determinants that impact health
- Identify community resources and collaborate with community partners
- Publish the Community Health Needs Assessment
- Use assessment findings to develop and implement a 2020-2022 Community Health Plan based on AdventHealth Fish Memorial's prioritized issues

#### **Community Health Needs Assessment Committee**

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

The CHNAC met two times in 2018-2019. They reviewed the primary and secondary data, helped define the priority issues to be addressed by the Hospital, and helped develop the Community Health Plan to address the priority issues. See Section 5 for a list of CHNAC members.

#### **Data**

AdventHealth Fish Memorial collected both primary and secondary data. The primary data included a county health survey and focus groups.

Secondary data sources included internal Hospital utilization data (inpatient and emergency department). This utilization data showed the top reasons for visits to AdventHealth Fish Memorial over the past year. In addition, we utilized publicly available data from state and nationally recognized data sources. See Section 7 for a list of data sources.

Primary and secondary data was then compiled and analyzed in order to identify the top 8-12 aggregate issues from the various sources of data.

## **Community Asset Inventory**

The next step was a Community Asset Inventory. This inventory was designed to help AdventHealth Fish Memorial and the CHNAC to:

- Understand existing community efforts to address the 8-12 identified issues from aggregate primary and secondary data;
- o Prevent duplication of efforts as appropriate. See Section 9 for the Community Asset Inventory.

#### **Selection Criteria**

Once the data findings and the Community Asset Inventory were completed, the CHNAC narrowed the list of 11 issues to five priority issues. The CHNAC participated in a priority selection process that uses clearly defined criteria to select the top issues to address. See Section 10 for the Priority Selection Report.

The priority selection criteria included:

#### A. Health Priority Considerations

- Magnitude
- Severity
- Impact on Vulnerable Populations
- Trend Direction
- Comparison
- Relationship to other Issues
- Importance of the Issue

#### **B.** Solution Considerations

- Efficacious Intervention
- Community Readiness
- Current Capacity
- Economic Impact

#### **Priority Issues to be Addressed**

The priority issues to be addressed include:

- 1. Adult and Youth Behavioral Health
- 2. Cardiovascular Diseases and Diabetes
- 3. Barriers to Accessing Health Care Services
- 4. Healthy Eating and Physical Activity
- 5. Social and Economic Issues (Social Determinants of Health)

See Section 11-12 for an explanation of priority issues which were chosen as well as those not chosen.

## **Approvals**

On October 17, 2019, the AdventHealth Fish Memorial Board approved the Community Health Needs Assessment findings, priority issues and final report. A link to the 2019 Community Health Needs Assessment was posted on the Hospital's website as well as <a href="https://www.adventhealth.com/community-health-needs-assessments">https://www.adventhealth.com/community-health-needs-assessments</a> prior to December 31, 2019.

### **Next Steps**

The CHNAC will work with AdventHealth Fish Memorial to develop a measurable 2020-2022 Community Health Plan to address the priority issues. The plan will be completed and posted on the Hospital's website prior to May 15, 2020.

## 2. ABOUT: ADVENTHEALTH FISH MEMORIAL

#### TRANSITION TO ADVENTHEALTH

In January of 2019, every wholly-owned entity across our organization adopted the AdventHealth system brand. Our identity has been unified to represent the full continuum of care our system offers. Throughout this report, we will refer to our facility by AdventHealth Fish Memorial. Any reference to our 2016 Community Health Needs Assessment in this document will utilize our new name for consistency.

AdventHealth Fish Memorial in Orange City, FI is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth is a connected system of care for every stage of life and health. More than 80,000 skilled and compassionate caregivers in physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers provide individualized, wholistic care. A Christian mission, shared vision, common values and service standards focus on whole-person health, and commitment to making communities healthier.

#### **About AdventHealth Fish Memorial**

AdventHealth Fish Memorial is part of AdventHealth, one of the nation's largest not-for-profit health care organizations with a mission of extending the healing ministry of Christ with skill and compassion. AdventHealth Fish Memorial is a 175-bed full-service hospital providing inpatient and outpatient services as well as 24-hour emergency and critical care at the local facility.

AdventHealth Fish Memorial provides the following services for the community:

- Cancer Care
- Diabetes Care
- Heart and Vascular Care
- Home Care
- Hospice Care
- Imaging Services
- Lab Services
- Orthopedic Care
- Sports and Rehab Care
- Surgical Care
- Urgent and Emergency Care
- Wound Care.

In addition to the main hospital campus, AdventHealth Medical Plaza Deltona currently offers laboratory service, full imaging services and continues to grow with the community. A 12-bed freestanding emergency department, AdventHealth Deltona ER is planned to open late 2019. A new four-story tower at AdventHealth Fish Memorial is scheduled to open in 2020 to meet community needs, including a delivery unit as well as enhanced cardiac, intensive care and surgical services.

## 3. CHOOSING THE COMMUNITY

AdventHealth Fish Memorial defined its community as its Primary Service Area (PSA) from which 77% of its patients come. This includes Volusia County and the zip codes 32713, 32725, 32738 and 32763.

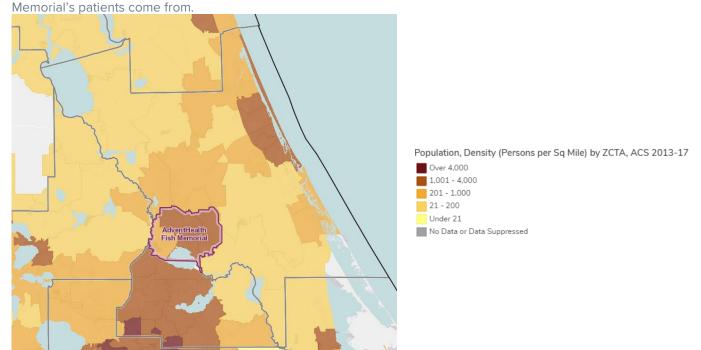
## 4. COMMUNITY DESCRIPTION AND DEMOGRAPHICS

In order to understand our community and the challenges faced, AdventHealth Fish Memorial looked at both demographic information for the service area population, as well as available data on social determinants of health. According to the Center for Disease Control and Prevention, social determinants of health include conditions in the places where people live, learn, work, and play which affect a wide range of health risks and outcomes. A snapshot of our community demographics and characteristics is included below. Secondary report data and methodology can be found in Appendix B.

### **Community Description**

Stretching along 47 miles of the Atlantic Coast and west to the St. Johns River lies Volusia County, Florida. Located at the intersection of the I-4 and I-95 corridors, Volusia County is roughly the size of Rhode Island and sits about 50-miles northeast of Orlando, 60 miles north of the Kennedy Space Center, and 90 miles south of Jacksonville. Volusia County is geographically separated into east and west, and in some areas almost literally divided by wetlands. Volusia County has 16 cities—the city of Deltona, on the west, is the largest in population and Daytona Beach, on the east, ranks second, while unincorporated Volusia County makes up about one-fifth of the population.

A total of 135,869 people live in the 103 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2013-17 5-year estimates. The population density for this area, estimated at 1,312.34 persons per square mile, is greater than the national average population density of 90.88 persons per square mile. The map below represents the service area where 77% of AdventHealth Fish



Source: US Census Bureau, American Community Survey. 2013-17.

Volusia County was home to 538,692 individuals in 2017. The largest city, Deltona, had a 2017 population of 90,746 and an estimated 120,000 individuals lived in unincorporated Volusia County.

## **2017 Population**

2017 POPULATION BY CITY					
City	Estimate	%			
Daytona Beach	68,055	12.6%			
Daytona Beach Shores	4,514	0.8%			
DeBary	20,784	3.9%			
DeLand	32,506	6.0%			
Deltona	90,746	16.8%			
Edgewater	22,399	4.2%			
Holly Hill	12,218	2.3%			
Lake Helen	2,780	0.5%			
New Smyrna Beach	26,470	4.9%			
Oak Hill	2,127	0.4%			
Orange City	11,697	2.2%			
Ormond Beach	42,816	7.9%			
Pierson	1,883	0.3%			
Ponce Inlet	3,241	0.6%			
Port Orange	63,203	11.7%			
South Daytona	12,936	2.4%			
Unincorporated Volusia County*	120,317	22.3%			
TOTAL Volusia County	538,692	100.0%			
	-	•			

Source: US Bureau of the Census

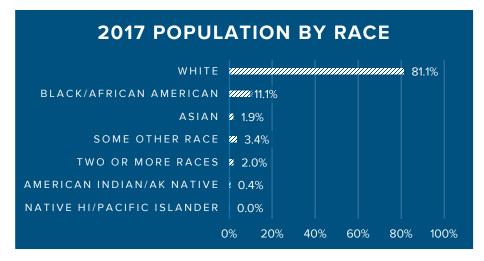
## **Community Demographics**

2017 POPULATION BY GENDER					
Gender Estimate Percent					
Male	263,063	48.8%			
Female	275,629	51.2%			
Total	538,692	100.0%			

Source: US Bureau of the Census, 2017 American Community Survey 1-Year Estimates

2017 POPULATION BY ETHNICITY									
Ethnicity Estimate Percent									
Hispanic/Latino	74,582	13.8%							
Not Hispanic/Latino	464,110	86.2%							
Total	538,692	100.0%							

Source: US Bureau of the Census, 2017 American Community Survey 1-Year Estimates



Source: US Bureau of the Census, 2017 American Community Survey 1-Year Estimates

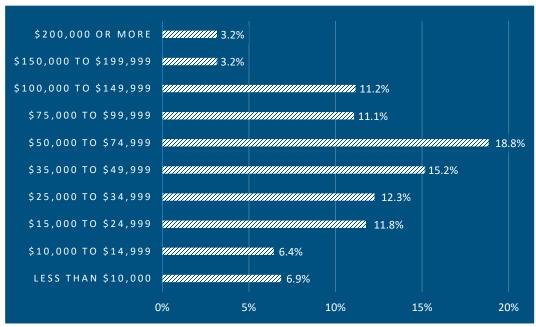
<sup>\*</sup>Calculated by subtracting total of city populations from county population

## 2017 Population by Age Group



Source: US Bureau of the Census, 2017 American Community Survey 1-Year Estimates

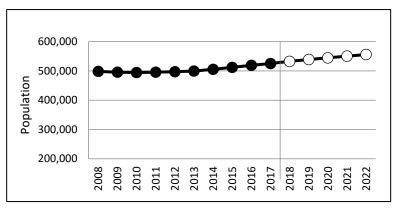
#### **2017 Household Income Brackets**



Source: US Bureau of the Census, 2017 American Community Survey 1-Year Estimates

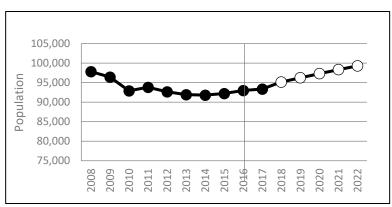
## **Population Trends**

## **Volusia General Population**



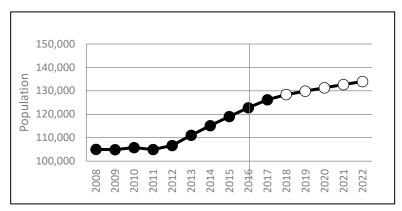
Source: Florida Health CHARTS, The Florida Legislature, Office of Economic and Demographic Research

#### **Volusia Population Under 18**



Source: Florida Health CHARTS, The Florida Legislature, Office of Economic and Demographic Research

### **Volusia Population 65 and Over**



 $Source:\ Florida\ Health\ CHARTS,\ The\ Florida\ Legislature,\ Office\ of\ Economic\ and\ Demographic\ Research$ 

DATA INDICATOR	DESCRIPTION	AdventHealth Fish Memorial SERVICE AREA	FLORIDA AVERAGE
Poverty <sup>1</sup>	% Population in Poverty (Below 100% FPL)	14.5%	15.46%
Unemployment Rate <sup>2</sup>	Unemployment Rate	7.10%	3.3%
Violent Crime <sup>3</sup>	Violent Crime Rate (Per 100,000 Pop.)	426.5	472.1
Population with No High School Diploma <sup>1</sup>	% Population Age 25+ with No High School Diploma	10.7%	12.42%
Insurance <sup>4</sup>	Uninsured Adults-% Without Medical Insurance	17.71%	18.44%
Insurance <sup>4</sup>	Uninsured Children-% Without Medical Insurance	5.95%	6.58%
Food Insecurity Rate <sup>5</sup>	Food Insecurity Rate	16.2%	16.2%
Population with Low Food Access <sup>6</sup>	% Population with Low Food Access	36.02%	25.7%
Use of Public Transportation <sup>1</sup>	% Population Using Public Transit for Commute to Work (Age 16+)	0.55%	2.0%
Alcohol Consumption <sup>7</sup>	Estimated Adults Drinking Excessively (Age-Adjusted Percentage)	18.6%	17.10%
Tobacco Usage <sup>7</sup>	% Population Smoking Cigarettes (Age-Adjusted)	24.3%	18.9%

**Data Indicator Sources:** <sup>1</sup>US Census Bureau, <u>American Community Survey</u>. 2013-17. <sup>2</sup>US Department of Labor, <u>Bureau of Labor Statistics</u>. 2019 - June. <sup>3</sup> Federal Bureau of Investigation, <u>FBI Uniform Crime Reports</u>. Additional analysis by the <u>National Archive of Criminal Justice Data</u>. Accessed via the <u>Inter-university Consortium for Political and Social Research</u>. 2019. <sup>4</sup> US Census Bureau, <u>Small Area Health Insurance Estimates</u>. 2016. <sup>5</sup> <u>Feeding America</u>. 2017. <sup>6</sup> US Department of Agriculture, Economic Research Service, <u>USDA - Food Access Research Atlas</u>. 2015. <sup>7</sup> Centers for Disease Control and Prevention, <u>Behavioral Risk Factor Surveillance System</u>. Accessed via the <u>Health Indicators Warehouse</u>. US Department of Health & Human Services, <u>Health Indicators Warehouse</u>. 2006-12.

## 5. COMMUNITY HEALTH NEEDS ASSESSMENT COMMITTEE

A Community Health Needs Assessment Committee (CHNAC or the Committee) was formed to help AdventHealth Fish Memorial conduct a comprehensive assessment of the community. A Steering Committee of the CHNAC met regularly throughout 2018-2019 and the full CHNAC met twice.

#### Representation

The Committee included representation from the Hospital, public health officials and the broad community as well as representation from low-income, minority and other underserved populations. Members were strategically chosen, who represented organizations that serve low income, minority, and underserved populations. Each organization also has specific strategies in place to create access for vulnerable populations. Current CHNAC members are listed below.

Name	Title	Organization	Description of Services	Low-Income	Minority	Other Underserved Populations
Laura Spencer	CEO	Azalea Health, Federally Qualified Health Center	Affordable, high quality health care including medical, dental, and mental health as well as prescriptions	Х	Х	Х
Deanna Wathington	Executive Dean, College of Health Sciences	Bethune Cookman University	Historically black university providing a faith-based environment of academic excellence and transformative experiences	Х	Х	Х
Mark Jones	CEO	Community Partnership for Children	Family preservation services, case management, foster care, many therapeutic services, adoption, and mentoring	Х	Х	Х
Dona Butler	Director of Community Services	County of Volusia	Facilitates access to and delivery of health, agricultural extension, library, veterans, community assistance, transportation, parks, recreation and culture	Х	×	Х
Billie Wheeler	County Council member	County of Volusia	County elected official, representing all members of Volusia County	×	Х	Х

Name	Title	Organization	Description of Services	Low-Income	Minority	Other Underserved Populations
Joe Pozzo	Public Protection Director	County of Volusia, Public Protection Director	Overseeing public protection services including EMS, 911, County Jail	Х	Х	Х
Nancy Keefer	President and CEO	Daytona Beach Chamber	Represents members and helps to build a fair and equitable environment through advocacy, collaboration, engagement, leadership and professionalism	х	х	Х
Chuck Puckett	Circuit 7 Community Development Administrator	Department of Children and Families	Child protection, food stamps, Medicaid	Х	Х	Х
DJ Lebo	CEO	Early Learning Coalition of Flagler & Volusia	Early learning programs, VPK, school readiness	×	Х	Х
Laurie Asbury	CEO	Family Health Source Medical Centers	Medical home providing services for adults, pediatrics and veterans.	Х	Х	х
Patricia Boswell	Health Officer	Florida Department of Health in Volusia County	Public Health; Works to protect, promote and improve the health of all people in Volusia through integrated state, county and community efforts.	×	Х	Х
Thomas Bryant III	Director of Planning and Performance Management	Florida Department of Health in Volusia County	CQI, Data collection and analysis; Works to protect, promote and improve the health of all people in Volusia through integrated state, county and community efforts.	х	Х	х

Name	Title	Organization	Description of Services	Low-Income	Minority	Other Underserved Populations
Lynn Kennedy	Community Health	Florida Department of Health in Volusia County	Facilitation of community health activities; Works to protect, promote and improve the health of all people in Volusia through integrated state, county and community efforts.	Х	х	х
Bill Griffin	Director for Strategic Planning	Halifax Health	Community hospital serving members of Volusia County since 1928	Х	Х	х
Sharon Warriner	Grant Writer, Business Development	Halifax Health	Community hospital serving members of Volusia County since 1928	Х	Х	х
Bob Williams	Vice President Population Health Business Development	Halifax Health	Community hospital serving members of Volusia County since 1928	Х	Х	х
Dixie Morgese	Executive Director	Healthy Start Coalition of Flagler/Volusia	Maternal and child health	Х	×	Х
Dusty Pye	Chief Integration Officer	LSF Health Systems, Inc	One of seven behavioral health Managing Entities (ME) contracted by the Florida Department of Children and Families to manage the statefunded system of behavioral health care for people who face poverty and are without insurance.	х	х	Х
Heather Shubirg	Executive Vice President	Team Volusia	Strategic economic development activities and business recruitment initiatives for Volusia County.	×	×	Х

Name	Title	Organization	Description of Services	Low-Income	Minority	Other Underserved Populations
Courtney Edgcomb	President	United Way of Volusia-Flagler	Partners with community to invest in the building blocks for a better life by supporting education, financial stability, and healthy lives	Х	Х	Х
Kelly Amy	Manager of Strategic Partnerships	Volusia County Schools	K12 education; Ensuring all students receive a superior 21 <sup>st</sup> century education	×	Х	Х
Ivan Cosimi	Chair	Volusia/Flagler Behavioral Health Consortium (Chair)	help increase access to behavioral health services for children, adults and families	Х	Х	Х
Jeff White	Executive Director	Volusia/Flagler Coalition for the Homeless	Partners and provides oversight for community agencies who provide direct services to the homeless and those at risk of homelessness.	Х	Х	×

#### **ADVENTHEALTH FISH MEMORIAL MEMBERS**

In addition to community members, the CHNAC included representation from the AdventHealth Central Florida Division-North. The below Hospital team members were part of the Leadership team.

The following individuals provided leadership and expertise throughout the process:

- **Deborah McNabb**, Community Benefits Director, AdventHealth Central Florida Division. Leads community benefit activities in region
- Russell Mariott, Executive Director of Marketing, AdventHealth Central Florida Division.

  Regional marketing
- **Steven Jenkins**, Vice President of Strategy & Marketing, AdventHealth Central Florida Division-North Regional strategy and marketing
- Clarissa Moholick, Regional Director of Oncology Quality, Accreditation and Data Services, AdventHealth Central Florida Division-North Regional oncology

## 6. PUBLIC HEALTH

Public health was represented throughout the Community Health Needs Assessment. Leaders from the Florida Department of Health in Volusia County actively participated on both the Steering Committee and the CHNAC. Their Office of Planning and Performance Management staff were responsible for administering the County Health Survey, collecting secondary data and creating data graphs, tables and maps for the countywide CHNA document. They also facilitated and reported on the focus groups that were conducted.

The following individuals provided leadership and expertise throughout the process:

- Patricia Boswell, Health Officer, chaired the Steering Committee
- **Dr. Thomas Bryant III,** Director of Planning and Performance Management, oversaw the primary and second data collection
- Marisol Bahena, Human Services Analyst, prepared secondary data for publication
- Lynn Kennedy, Community Health, assisted with the review of all secondary data
- Dr. Laureen Husband, Director, Health Equity & Community Engagement, facilitated focus groups

## 7. PRIMARY AND SECONDARY DATA SOURCES

## **Primary Data**

- a. <u>Community surveys</u>: A primarily Internet-based county health survey was implemented that included 31 questions about quality of life, community health concerns, and social determinants of health. In Volusia and Flagler counties, 3,692 individuals completed the survey, including 2,608 Volusia residents.
- b. <u>Focus groups</u>: Sixteen focus groups were conducted across Volusia County focused on seven populations: youth, college students, older adults, impoverished communities/neighborhoods, Spanish speakers, maternal and child health groups and professional groups. The 1 to 2-hour focus groups were professionally facilitated, transcribed and summarized.

## **Secondary Data**

- a. <u>Hospital Utilization Data</u>: Top 10 inpatient and Emergency Department diagnoses by payer. This information was provided by Regional Accounting, AdventHealth Central Florida Division North Region. See Appendix C for utilization data.
- b. <u>Collaboration Data</u>: Publicly available population-level health data was collected and organized into 12 health issues with assistance from the Florida Department of Health in Volusia County Office of Planning and Performance Management. The data was analyzed, and a summary of the data was presented as Indicators of Concern for each health issue. This summary included a review of data trends, county and state comparison and magnitude of impact.
- c. The Engagement Network: In addition to the local data collection process, data was sourced from the Engagement Network. This is a national platform produced by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri. The Engagement Network hosts a national Map Room with 15,000+ data layers, a Community Health Needs Assessment reporting tool with 80+ health-related indicators and a hub network with 30+ partner organizations using CARES technology.

#### **Data Sources**

The majority of the CHNA data was pulled directly from the Florida Department of Health **Florida Health CHARTS** system that is an assemblage of data from over 25 programs and agencies. The specific sources listed below were included in the CHNA process.

SOURCE	LINK(S)
American Health Resource Files	https://data.hrsa.gov/topics/health-workforce/ahrf
Baker Act Reporting Center, University of South Florida	https://www.usf.edu/cbcs/baker-act/
Centers for Disease Control (CDC)	http://www.cdc.gov/
Dartmouth Atlas Project	https://www.dartmouthatlas.org/
Feeding America, Map the Meal Gap	https://map.feedingamerica.org/
Florida Agency for Health Care Administration	www.ahca.myflorida.com
Florida Department of Children and Families	www.myflfamilies.com, http://centerforchildwelfare.fmhi.usf.edu/ Florida Safe Families Network Data Mart/Data Registry Florida Youth Substance Abuse Survey https://www.myflfamilies.com/service- programs/samh/prevention/fysas/
Florida Department of Education	www.fldoe.org Education Information & Accountability Services; Office of Early Learning; Office of Safe Schools
Florida Department of Elder Affairs	http://elderaffairs.state.fl.us/
Florida Department of Health	www.floridahealth.gov, http://www.flhealthcharts.com Bureau of Epidemiology; Bureau of HIV/AIDS; Bureau of Immunization; Bureau of STD Prevention and Control; Bureau of TB & Refugee Health; Bureau of Vital Statistics; Division of Medical Quality Assurance; Florida Behavioral Risk Factor Surveillance System; Florida Department of Health Physician Workforce Surveys; Florida Youth Tobacco Survey; Office of Injury Prevention; WIC and Nutritional Services
Florida Department of Highway Safety and Motor Vehicles	www.flhsmv.gov
Florida Department of Juvenile Justice	www.djj.state.fl.us
Florida Department of Law Enforcement	www.fdle.state.fl.us
Merlin, Florida's Web-Based Reportable Disease Surveillance System	http://www.floridahealth.gov
Shimberg Center for Housing Studies, Florida Housing Data Clearinghouse	http://flhousingdata.shimberg.ufl.edu/

SMA Healthcare	https://smahealthcare.org/
University of Florida, Drug-Related Outcomes Surveillance and Tracking System (FROST)	https://frost.med.ufl.edu/
University of Miami (FL) Medical School, Florida Cancer Data System	https://fcds.med.miami.edu/inc/welcome.shtml
University of South Florida, Baker Act Reporting Center	https://www.usf.edu/cbcs/baker-act/
U.S. Bureau of the Census	http://www.census.gov American Community Survey, American Community Survey 1-year estimates, American Community Survey 5-year estimates; County Business Patterns
U.S. Department of Labor, Bureau of Labor Statistics	http://www.bls.gov
Volusia County Schools	http://myvolusiaschools.org
Volusia/Flagler County Coalition for the Homeless	http://www.vfcch.org/

## 8. COMMUNITY COLLABORATION

The Volusia County Community Health Needs Assessment is the product of a countywide collaborative process. This included AdventHealth Fish Memorial, AdventHealth New Smyrna Beach, AdventHealth DeLand, AdventHealth Daytona Beach, the County of Volusia, the Florida Department of Health in Volusia County and Halifax Health. Each organization provided financial resources for the CHNA process and served as a Steering Committee throughout 2018-2019. In addition to the Steering Committee, a Leadership Team (serving as the CHNAC) was formed and included leaders from key community organizations. Nearly all the Leadership team members represented low-income, minority and underserved populations.

The Leadership Team reviewed all the data and prioritized the key issues according to intensity of the need, current initiatives around the issue, and the potential for future collaboration. See CHNAC membership list in Section 5.

#### **Funders**

- AdventHealth Deland, Advent Health Daytona Beach, AdventHealth Fish Memorial and AdventHealth
   New Smyrna Beach, operating a hospital system in Volusia County
- County of Volusia, local government
- Florida Department of Health in Volusia County, the county's public health department
- Halifax Health, operating a hospital system in Volusia County

#### **Other Coalition Partners**

• Flagler Cares, a nonprofit organization, facilitated the Community Health Needs Assessment process in Volusia County through a consulting contract funded by the four CHNA partners

## 9. DATA SUMMARY

## **Primary and Secondary Data: High Level Findings**

Once all primary and secondary data was collected, this was then analyzed and categorized into top 8-10 priorities per source of data. These results are listed by source in the tables below.

Тор	Top 8-10 Priorities determined from Community Surveys					
1	Addiction	5	Child Abuse/Neglect	9	Heart Disease & Stroke	
2	Homelessness	6	Violence	10	High blood pressure	
3	Mental Health problems	7	Cancer			
4	Unemployment	8	Adult Obesity			

Тор	Top 8-10 Priorities determined from Hospital Emergency Department Data					
1	Acute bronchitis, unspecified	5	Fever, unspecified	9	Noninfective gastroenteritis and colitis, unspecified	
2	Unspecified abdominal pain	6	Other chest pain	10	Acute pharyngitis, unspecified	
3	Headache	7	Urinary tract infection, site not specified			
4	Acute upper respiratory infection, unspecified	8	Low back pain			

Top	Top 8-10 Priorities determined from Hospital Inpatient Admission Data				
1	Sepsis, unspecified organism	5	Pneumonia, unspecified organism	9	Other chest pain
2	Chronic obstructive pulmonary disease w (acute) exacerbation	6	Acute kidney failure, unspecified	10	Unspecified atrial fibrillation
3	Hypertensive heart and chronic kidney disease with heart failure and stage 1-4 chronic kidney disease, or unspecified chronic kidney disease	7	Urinary tract infection, site not specified		
4	Hypertensive heart disease with heart failure	8	Other pulmonary embolism without acute coronary pulmonale		

	Top 8-10 Priorities determined from Secondary Data provided by Volusia County Collaborative CHNA					
1	1 Adult Behavioral Health 5 Access to Health Care Services 9					
2	Youth Behavioral Health	6	Healthy Eating and Physical Activity	10		
3	3 Cardiovascular Diseases 7 Social and Economic Issues					
4	Diabetes	8				

## **Primary and Secondary Data: Aggregate Community Health Needs**

The Volusia County CHNA Leadership Team utilized an action-oriented decision framework to review information and data collected and to guide their dialogue leading to the identification of Priority Health Issues for action during the 2020-2022 implementation cycle. The framework included considerations for data review and analysis, potential implementation strategies for short and long-term action. Prioritization decisions were made through facilitated dialogue and group consensus.

Through group dialogue individual items were aggregated as reflected below prior to completing the Community Asset Inventory:

<u>Adult and Youth Behavioral Health</u>: Mental Health was highlighted in both general, as well as age-specific capacity in both the community surveys, as well as secondary data provided by the Collaborative.

<u>Cardiovascular Disease & Diabetes</u>: Community survey respondents highlighted their concern over heart disease and stroke as well as high blood pressure. Inpatient Hospital data demonstrated two of the top eight inpatient admissions were due to heart related issues, as well as secondary data which identified both cardiovascular and diabetes as top issues. Due to the nature of these two conditions, and the nature of interventions, it was decided to combine both into one category for the Community Asset Inventory.

Agg	Aggregate Community Health Needs					
	Priority Issue	Ethnic Group	Age Group	Specific Geographic Area		
1	Adult & Youth Behavioral Health	all	Adults, youth	All of Volusia County		
2	Cardiovascular Disease & Diabetes	All, minority overrepresentation	all	All of Volusia County, high poverty neighborhoods		
3	Crime, Domestic Violence & Child Abuse		all			
4	Healthy Eating and Physical Activity	All	all	All of Volusia County, high poverty neighborhoods		
5	Access to Health Care Services	All, uninsured	all	All of Volusia County, high poverty neighborhoods		
6	Social and Economic Issues	All, working poor and below poverty	all	All of Volusia County, high poverty neighborhoods		
7	Women's Health, Prenatal Care and Birth Outcomes	All, minority overrepresentation	all	All of Volusia County, high poverty neighborhoods		
8	Aging Related Issues	All	Older adults	All of Volusia County		
9	Child & Adolescent Issues	All	Child, adolescent	All of Volusia County		
10	Communicable & Infectious Diseases	All	all	All of Volusia County		
11	Early Childhood	All	Early childhood	All of Volusia County		

## 10. COMMUNITY ASSET INVENTORY

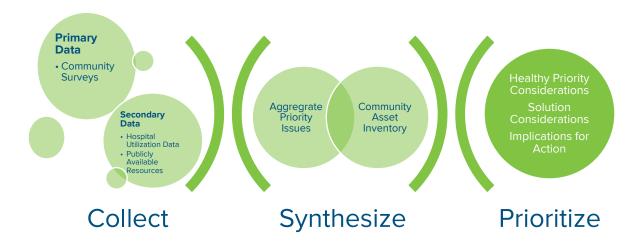
In order to help AdventHealth Fish Memorial's CHNAC determine the community health priorities where they could make a meaningful difference, the Hospital conducted a Community Asset Inventory related to the 11 identified community health needs. The inventory was designed to help the CHNAC narrow the 11 needs to the top five priority issues. Appendix C includes the full Community Asset Inventory.

COMMUNITY ASSET	COMMUNITY ASSET INVENTORY					
Issues	Current Community Programs	Current Hospital Programs				
Adult and Youth Behavioral Health	Behavioral Health Consortium Council on Aging Counseling Inpatient and outpatient SAMH (Substance abuse and mental health) programs Psychiatric programs	CREATION Health Lung Cancer screenings Morning Mile Smoking Cessation Classes-Tools to Quit				
Cardiovascular Diseases & Diabetes	Laugh Your Heart Out	Laugh Your Heart Out Diabetes Education Classes				
Barriers to Accessing Health Care Services	Azalea Health Florida Department of Health-Volusia (Multiple programs) Family Health Source FQHC primary and specialty care Good Samaritan Clinic Jesus Clinic Kidcare Volusia Volunteers in Medicine Clinic West Volusia Health Card	Cancer & Survivorship Support Group Colon Cancer Awareness Community Care Newly Diagnosed Cancer Support Group Men's Cancer Support Group Ostomy Support Group Quilt Your Way Sleep Apnea/CPAP Group The Art of Healing; Stroke Support Group Weekly Gentle Yoga				
Women's Health, Prenatal Care, and Birth Outcomes	FDOH Volusia-WIC Healthy Start Coalition of Flagler and Volusia Counties-women's health, case management	Lactation education and tours Newborn education Women's Cancer Support Group				
Healthy Eating & Physical Activity	5-2-1-0 Parks Playgrounds School Health Advisory Committee Trails Volusia Flagler YMCA health programs	Morning Mile CREATION Health Classes				

Social & Economic Issues	Department of Children and Families Early Learning Coalition Multiple, family self-sufficiency, financial programs Medicaid SHIP housing programs SNAP Volusia/Flagler Coalition for the	
	Homeless	
Aging-Related Issues	Council on Aging	
Communicable & Infectious Diseases	FDOH-Volusia: HIV Clinic, TB Control, Immunization, Surveillance and Investigation	
Crime, Domestic Violence & Child Abuse	Beacon Center Community Partnership for Children Department of Children and Families Healthy Start Coalition of Flagler and Volusia Counties	
Early Childhood	Early Learning Coalition of Flagler and Volusia Counties Mid Florida Community Services Kidcare	
Child & Adolescent Issues	Department of Juvenile Justice Volusia County Schools	

## 11. PRIORITY SELECTION

The Volusia County CHNA Leadership Team utilized an action-oriented decision framework to review information and data collected and to guide their dialogue leading to the identification of Priority Health Issues for action during the 2020-2022 implementation cycle.



## **Prioritizing the Data**

The framework included considerations for data review and analysis, and potential implementation strategies for short and long-term action. Prioritization decisions were made through facilitated dialogue and group consensus utilizing the below criteria.

PRIORITIZATION CRITERIA					
Health Priority Considerations					
Magnitude	What is the number of people affected by the issue?				
Severity	What is the risk of morbidity and mortality associated with the issue?				
Impact on Vulnerable Populations	Does the issue particularly impact vulnerable populations?				
Trend Direction	Has the trend improved or worsened in the last five years?				

Comparison	How does the county status compare to the state?		
Relationship to the other issues	Does the issue affect other problems?		
Importance of the Issue	How important is the issue to the community?		
Solution Considerations			
Efficacious Interventions	Are there successful strategies to address this issue? Is there a positive cost- benefit to addressing the issue? How resource intensive are strategies to address the issue?		
Community Readiness	How likely is the community to support strategies to address the issue?		
Current Capacity	Does the community have existing resources and capacity to address the issue?		
Economic Impact	What is the cost of NOT addressing the issue?		
Implications for Action			
Issues with Technical Fixes	Issues that can be addressed by relatively straightforward policy or practice changes supported by a strong evidence base. Examples: vaccinations, trauma informed care approaches		
Complex Problems Requiring Complex Solutions	Issues that call for long-term, complex, multi-sector interventions. <i>Examples:</i> mental illness and substance abuse, interpersonal violence		
Root Causes	Issues that interact with each other in a vicious cycle, within and across generations and contribute to high-risk environments, unhealthy behaviors, injury, illness, and death. <i>Examples: poverty, crime</i>		
System-Level Barriers to Effective Action	Issues that hinder effective action to improve health outcomes and the environment in which health outcomes develop. Example: working ineffectively across sectors, systemic underfunding of interventions targeting social determinants of health		

## 12. PRIORITY ISSUES TO BE ADDRESSED

#### **Adult & Youth Behavioral Health**

#### **Alcohol Use**

- Heavy/Binge drinking has increased slightly from 2010 to 2016. The percent is highest for white individuals.
- Volusia alcohol-suspected motor vehicle crashes and traffic crash injuries rates have decreased since 2014 but are slightly higher than Florida.
- Alcohol-suspected traffic crash deaths increased between 2015 and 2016 in Volusia and the Volusia rate is higher than Florida.
- The percent of student alcohol use has been decreasing since 2008 but remains slightly higher than Florida.

#### **Smoking and Substance Misuse**

- Volusia's rate of Opioid-involved overdose hospitalizations increased from 2015 to 2017 and is higher than Florida's. The rate of death from Opioid overdoses increased in the last year and now exceeds the Florida rate.
- The percent of Volusia adults who smoke is higher than Florida. (the difference is statistically significant)
- The percent of Volusia middle and high school students using marijuana decreased between 2016 and 2018 but remains higher than Florida.
- Reported cigarette use among Volusia middle and high school students has declined, but both rates remain higher than Florida.

#### **Mental Health**

- The percent of Volusia adults who had 14 or more poor mental health days in the last month is higher than Florida. (the difference is statistically significant)
- The percent of Volusia adults with a depressive disorder is higher than Florida. (the difference is statistically significant for Hispanic population)
- Volusia's suicide rate is increasing and is higher than Florida's.
- Volusia's age 19-21 rate of hospitalizations for self-inflicted injuries has increased but is lower than Florida's.

#### Cardiovascular Diseases & Diabetes

#### Cardiovascular Diseases

- The Years of Potential Life Lost (YPLL) rate for Volusia County increased from 2014 to 2017 and is higher than Florida.
- The Volusia death rate for heart failure is higher than Florida.
- Volusia's hospitalization rate for Congestive Heart Failure is higher than Florida's and the rate for Black individuals is much higher.
- The Volusia hospitalization rate for coronary heart disease is higher than Florida and the rate for Black individuals is higher than the rate for all.
- The Volusia death rate for coronary heart disease is higher than Florida.
- The Volusia hospitalization rate for stroke is higher than Florida and the rate for Black individuals is higher than other groups.
- The Volusia death rate for stroke is higher than Florida and the rate for Black individuals is higher than other groups.

#### **Diabetes**

• The death rate from diabetes increased between 2016 and 2017 and is higher in Volusia than in Florida. The rate is highest for Black individuals.

• The rate of preventable hospitalizations for adults under 65 from diabetes is increasing and higher than Florida.

#### **Barriers to Health Care Services**

- Volusia rate of health resources per population are lower than Florida in the categories of: physicians, internists, OB/GYN and pediatricians.
- Volusia has a higher percentage of births covered by Medicaid than Florida. Rates for Black and Hispanic individuals are higher.
- The percent of Volusia adults with a personal doctor is lower than Florida.
- Volusia has a lower ratio of primary care physicians, dentists and mental health providers to population than Florida.

## **Healthy Eating & Physical Activity**

- Over 70% of Volusia middle and high school students lack vigorous physical activity and the percent increased from 2014 to 2016. The percent is better than Florida.
- The percent of Volusia adults who are sedentary increased from 2007 to 2016 and is now higher than Florida.
- The percent of Volusia middle and high schoolers who were obese increased significantly from 2014 to 2016.
- The percent of Volusia adults who are obese increased between 2013 and 2016 and the percent is now higher than Florida.
- Injury deaths are increasing and higher than Florida.

#### Social & Economic Issues

- Volusia's median household income is lower than Florida's.
- Volusia's percent of individuals and individuals below age 18 below poverty are both slightly higher than Florida's.
- The Volusia percent of elementary and middle school students eligible for free/reduced price lunches is higher than Florida. (a proxy measure for low income)
- The Volusia high school graduation rate is lower than Florida.
- The Volusia percent of adults limited by physical, mental or emotional problems is higher than Florida. (difference is statistically significant)
- Volusia's food insecurity rate is higher than Florida's.
- Volusia's per capita income is lower than Florida's.
- Over 30% of Volusia households spend more than 30% of their income on housing and workers in 8
  of the top 20 industries in Volusia are estimated to be housing burdened based on average hourly
  wage.
- The Volusia number of individuals counted during the Point-In-Time count was higher in 2019 than in 2018
- The Volusia number of homeless students has been increasing since 2016.
- Volusia's percent of single parent households is higher than Florida's.

See Volusia County Community Health Needs Assessment for additional priority issue data,  $\underline{www.flaglercares.org/Volusia\_CHNA.pdf}$ 

## 13. PRIORITY ISSUES THAT WILL NOT BE ADDRESSED

#### A. The Years of Potential Aging-related issues

The data collected for individuals 65 and older did not demonstrate significant negative trends or negative comparison to state data. The only indicator of concern noted was suicide rate for individuals over 65 which will be addressed through the prioritization of adult behavioral health. There are numerous initiatives in place to provide services to this target population.

#### B. Child & Adolescent Issues

The most significant childhood issues are addressed through other priority issues (behavioral health, access to services, healthy eating and physical activity)

#### C. Communicable & Infectious Diseases

The data collected did not demonstrated significant negative trends or comparison data. Many issues noted in the indicators of concern will be address through the prioritization of Access to Health Care Services.

#### D. Crime, Domestic Violence & Child Abuse

The data collected did not demonstrate significant negative trends or negative comparison to state data. Many issues noted in the indicators of concern will be address through the prioritization of Social and Economic Issues.

#### E. Early Childhood

There are significant efforts already in place to address this target population.

#### F. Women's Health, Prenatal Care & Birth Outcomes

There are significant efforts already in place to address this target population. Many of the indicators of concern will be addressed through the prioritization of Access to Health Care Services.

## 14. NEXT STEPS

The CHNAC will work with AdventHealth Fish Memorial and other community partners to develop a measurable Community Health Plan for 2020-2022 to address the priority issues. For each priority, specific goals will be developed including measurable outcomes, intervention strategies and the resources necessary for successful implementation.

Evidence based strategies will be reviewed to determine the most impactful and effective interventions. For each goal, a review of policies that can support or deter progress will be completed with consideration of opportunities to make an impact. The plan will be reviewed quarterly with an annual assessment of progress. A presentation of progress on the plan will also be presented to the Hospital board annually.

A link to the Community Health Plan will be posted on AdventHealth.com prior to May 15, 2020.

## 15. WRITTEN COMMENTS REGARDING 2016 NEEDS ASSESSMENT

We posted a link to the most recently conducted 2016 CHNA and most recently adopted 2017-2019 implementation strategy on our Hospital website as well as AdventHealth.com prior to May 15, 2017 and have not received any written comments.

## 16. REVIEW OF STRATEGIES UNDERTAKEN IN THE 2017 COMMUNITY HEALTH PLAN

AdventHealth Fish Memorial conducts an annual evaluation of the progress made from the implementation strategies from the Community Health Plan. The evaluation is reported to the IRS in Form 990. The following is a summary of progress made on our most recently adopted plan.

#### **Priority 1: Adult Behavioral Health**

**2016 Description of the Issue:** Injuries and deaths from alcohol-suspected motor vehicle crashes were higher than the Florida rates. Death rates from chronic liver disease and cirrhosis have increased for all Volusia residents (15.4 per 100,000 in 2012-14). The percentage of Volusia residents who self-reported being current smokers was 10.7% higher than the Florida percentage. The highest percentage of smokers were adults with less than a high school education and the lowest was adults aged 65 and older.

**2019 Update:** AdventHealth Fish Memorial implemented two strategies focused on Adult Behavioral Health: Smoking Cessation Classes and Low Dose CT screenings for Lung Cancer. Since 2017, 227 adults completed smoking cessation education classes and 196 individuals were screened through the Low Dose CT program.

### **Priority 2: Youth Behavioral Health**

2016 Description of the Issue: In 2012-14 the Volusia suicide rate was 8.5 per 100,000—higher than the state rate of 4.9. Despite a decline in high school students using alcohol in the last 30 days, Volusia's rate has been consistently higher than the state rate with 29.6% of high schoolers reporting alcohol use. Volusia County rates for smoking and marijuana use are also consistently higher than the state rate.

**2019 Update:** AdventHealth Fish Memorial implemented one prevention-oriented strategy focused on school-aged youth in partnership with the American Diabetes Association. Morning Mile, a program designed to encourage physical activity among youth, was initiated during the 2017-18 school year. Increased physical activity is a proven strategy to improve both physical and mental health and 179 students participated in the program to date.

## Priority 3 & 4: Cardiovascular Diseases/Diabetes & Healthy Eating & Physical Activity

**2016 Description of the Issue:** In 2013, the percentage of Volusia adults self-reporting that they had ever been told they had high blood cholesterol was higher than the Florida percentage. The Volusia rate for hospitalizations from strokes (274.0 per 100,000) decreased slightly over the last five years reported but rates for Blacks remained high. The age-adjusted diabetes death rate for Volusia County (27.4 per 100,000) increased over the reported year and was consistently higher than the Florida rate.

**2019 Update:** AdventHealth Fish Memorial implemented several distinct strategies focused on these priorities. CREATION Health, an eight-week, faith-based wellness plan with lifestyle seminars and training based on 8 principles: choice, rest, environment, activity, trust, interpersonal relations, outlook and nutrition, was provided to 336 individuals since 2017. Educational seminars were provided to 1,548 individuals and outreach events reached over 56,000. Free health screenings were provided to 2,060 individuals since 2017. Community Care, a community-based care coordination program for high risk patients with a history of preventable ED visits and inpatient admissions, served 180 individuals.

## **Priority 5: Access to Health Care Services**

**2016 Description of the Issue:** According the Volusia/Flagler Community Health Survey, the top 3 barriers to getting health care were: Lack of evening and/or weekend services (22.6%); Can't pay for doctor/hospital visits (21.8%); and Long waits for appointments (21.3%). In 2013, only 79.8% of Volusia adults had some type of health care coverage and only 74.8% reported having a personal doctor.

**2019 Update:** To address access to health care services, AdventHealth Fish Memorial implemented several strategies focused on individual's residing in the Hospital's at-risk ZIP codes. The Hospital also provided free meeting space to support groups and partnered with United Way of Volusia and Flagler Counties to increase access to health resource information through promotion of the 2-1-1 call center/website resource.

# APPENDIX A: PRIMARY DATA SURVEY & PRIMARY DATA RESULTS

## **County Health Survey 2019**

#### Methodology

The 2019 County Health Survey in Volusia and Flagler Counties relied primarily on an Internet-based survey (which was collected using SurveyMonkey) to reach as many respondents as possible within the limits of the project budget. The online survey was available in English and Spanish via www.countyhealthsurvey.com. Paper surveys, also available in Spanish and English, were utilized to reach individuals without convenient access to the Internet and were manually entered. The survey was open from January to March 2019. There were 3,692 completed surveys: 2,722 Internet surveys and 970 paper surveys.



The online and paper surveys were promoted and distributed through email communication, community meetings, postings on various websites, social media posts and promotional items and paper surveys made available at partners' places of business.

The 31-question survey included questions regarding perceived quality of life and health of the community, health concerns, barriers to health care, use of health care, health care needs and demographic information.

Survey respondents were asked "where is your permanent residence?" and of the 3,668 completed surveys:

- 2,608 reported they lived in Volusia County (70.5%)
- 966 reported they lived in Flagler County (26.3%)
- 102 reported they lived in another Florida County (2.8%)
- 7 reported they lived outside of Florida and 9 provided no response to the question (0.4%)

Only the 2,608 Volusia respondents are included in this presentation of survey results.

#### Limitations

**Convenience Sampling:** A convenience sampling methodology was used for the 2019 County Health Survey. The convenience sampling process is a non-probability sampling technique that relies on the collection of data from populations within easy reach of the researcher. In this case, community agencies were asked to promote the survey with their customers, staff and other stakeholders. This method was selected for ease and budget restrictions. Convenience sampling is much different from a random sampling methodology where the survey population is randomly sampled to gain responses from every population subset.

Limitations and Cautions with Convenience Sampling: Convenience sampling can lead to the under-representation or over-representation of particular groups within the sample. This was the case with the 2019 County Health Survey for several subsets of the Volusia County population including males and individuals ages 18-24 who were underrepresented. It is important to understand that convenience samples do not produce representative results because of the inherent biases. The results presented here cannot be considered representative of the entire population.

**Limitations of Internet Surveys:** Although paper surveys were made available, the survey process relied primarily on the Internet survey. Internet surveys tend to underrepresent lower-income, less educated and minority households.

## **County Health Survey Respondent Demographics**

Age	Volusia		
7.90	Number	Percent	
Less than 18	18	0.7	
18-24	169	6.5	
25-34	425	16.3	
35-44	385	14.8	
45-54	457	17.5	
55-64	596	22.9	
65+	386	14.8	
No response	172	6.6	
Total	2,608	100	

Race Identification  Race: Which group do you most identify with?	Volusia		
(Check ONE selection)	Number	Percent	
Asia	31	1.2	
Black/African American	307	11.8	
Hawaiian Native/ Pacific Islander	2	0.1	
Mixed Race	100	3.8	
Native American/ Alaskan Native	8	0.3	
Other Race	142	5.4	
White/Caucasian	1,800	69.0	
No response	218	8.4	
Total	2,608	100	

Ethnic Identification  Ethnicity: Which group do you most identify with?  (Check ONE selection)	Volusia		
	Number	Percent	
Hispanic/Latino	319	12.2	
Not Hispanic/Latino	1,971	75.6	
No response	318	12.2	
Total	2,608	100	

Gender	Volusia		
	Number	Percent	
Female	1,963	75.3	
Male	451	17.3	
No response	194	7.4	
Total	2,608	100	

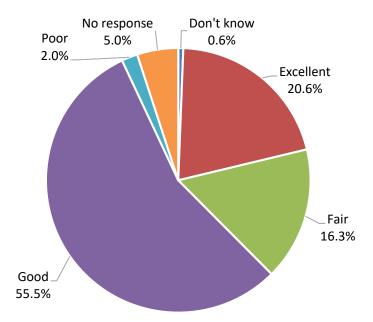
Marital Status	Volusia		
	Number	Percent	
Single	722	27.7	
Married	1,284	49.2	
Divorced	303	11.6	
Widowed	117	4.5	
No response	182	7.0	
Total	2,608	100	

Education  Education: Please check the highest level completed: (Check ONE selection)	Volusia	
	Number	Percent
Elementary/Middle School	72	2.8
High School Diploma or GED	320	12.3
Technical/Community College	352	13.5
4-year College/Bachelor's degree	596	22.9
Graduate/Advanced degree	518	19.9
Some college	561	21.5
No response	189	7.2
Total	2,608	100

Employment Status	Volusia	
	Number	Percent
Employed full-time	1,402	53.8
Employed part-time	209	8.0
Unemployed	161	6.2
Self-employed	93	3.6
Not seeking work	15	0.6
Retired	319	12.2
Homemaker	89	3.4
Student	40	1.5
Other	98	3.8
No response	182	7.0
Total	2,608	100

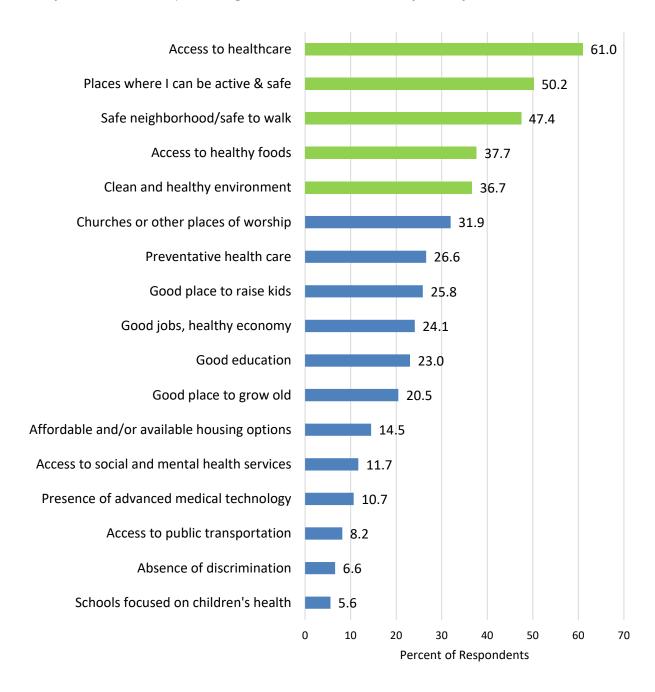
Annual Household Income	Volusia	
	Number	Percent
Less than \$10,000	215	8.2
\$10,000 to \$19,999	222	8.5
\$20,000 to \$29,999	305	11.7
\$30,000 to \$49,999	467	17.9
\$50,000 to \$74,999	488	18.7
\$75,000 to \$99,999	280	10.7
\$100,000 or more	372	14.3
No response	259	9.9
Total	2,608	100

## **Overall Health**



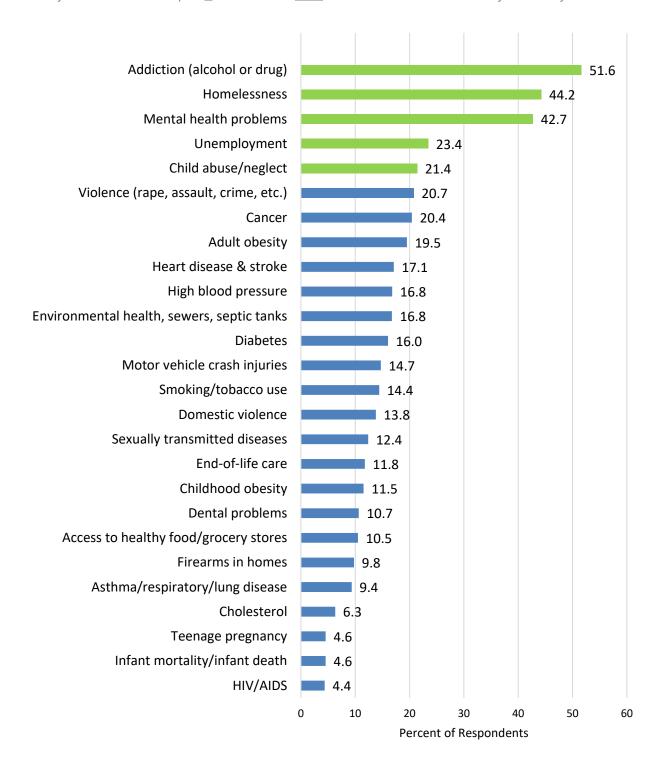
## Things that Allow YOU to be Healthy Where You Live

Survey Question: Check up to 5 things that allow YOU to be healthy where you live.



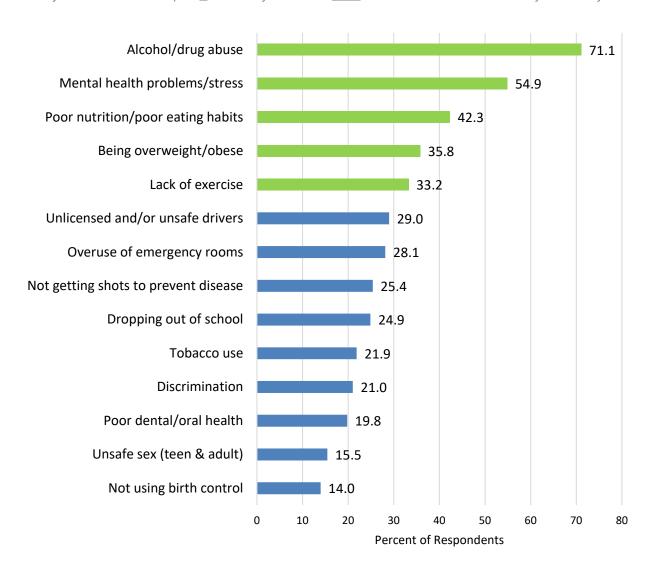
#### **Health Issues YOU are Most Concerned About**

Survey Question: Check up to 5 health issues YOU are most concerned about in your county.



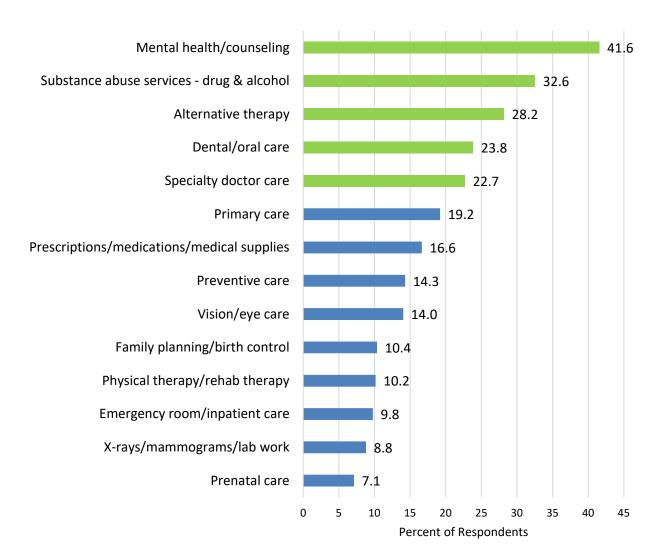
## **Unhealthy Behaviors YOU are Most Concerned About**

Survey Question: Check up to  $\underline{5}$  unhealthy behaviors  $\underline{YOU}$  are most concerned about in your county.



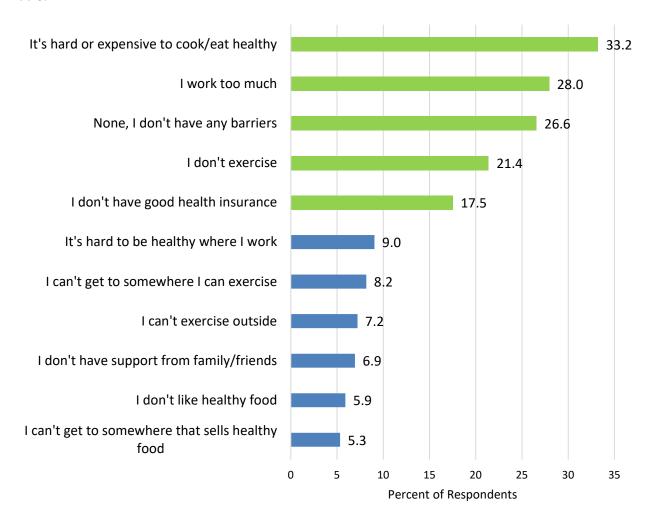
## **Health Services that Are Difficult to Obtain**

Survey Question: What health care services are difficult to obtain in your community? (Check ALL that apply)



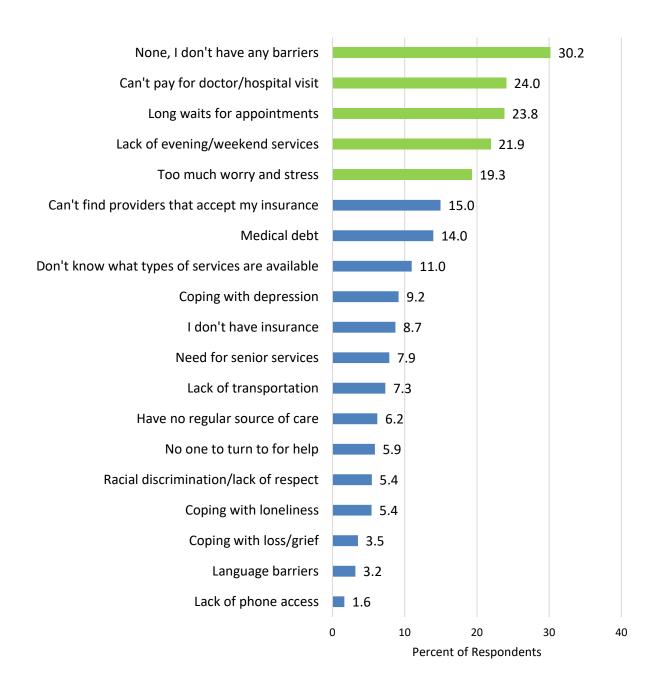
## **Barriers for YOU to Get or Stay Healthy**

Survey Question: What do you feel are barriers for <u>YOU</u> getting or staying healthy in your county? (Check ALL that apply):



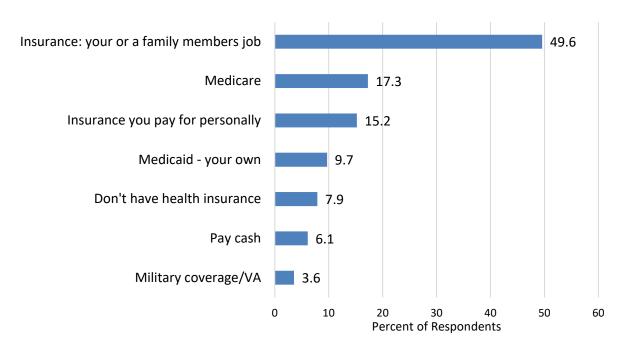
## **Barriers for YOU to get Health Care**

Survey Question: What do you feel are barriers for <u>YOU</u> getting health care in your county? (Check ALL that apply)



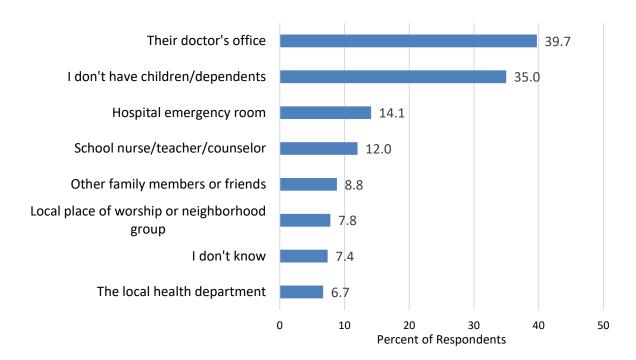
## **Health Coverage**

Survey Question: How is your health care covered? (Check ALL that apply)



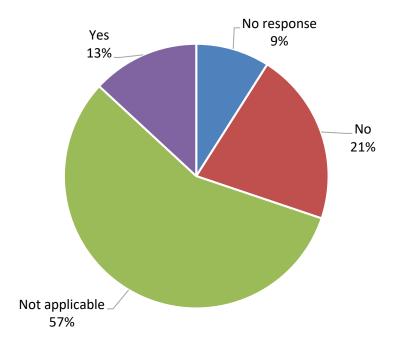
#### Where You Would Go if You Were Concerned about Your Child

Survey Question: Where would you go if you were worried about your child's mental, physical or social health? (Check ALL that apply



#### **Child Care**

Survey Question: Do problems getting child care make it difficult for you to work or study?

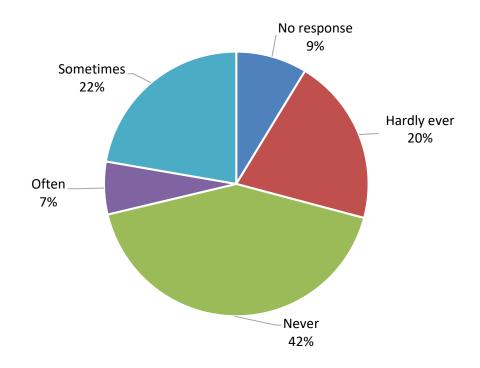


Survey Questions	Yes	No	Don't Know/ Not Sure	No response
<b>Safety:</b> Are you afraid you might be hurt in your apartment building or house?	5.4%	78.5%	9.8%	6.4%
<b>Safety:</b> Do you have a safe place or is there someplace where you feel safe?	86.3%	4.0%	2.7%	7.0%
Stable Housing: Are you worried or concerned that in the next 2 months you may not have stable housing that you own, rent, or stay in as part of a household?	8.8%	78.6%	5.8%	6.9%

Survey Question: Within the last 12 months:	Yes	No	Don't Know/ Not Sure	No response
Utilities: Has the utility company shut off your services for not paying your bills?	6.3%	86.1%	0.9%	6.7%
<b>Food Insecurity:</b> Did you ever eat less because there wasn't enough money for food?	19.1%	73.2%	0.7%	7.0%
Food Insecurity: Did you worry if your food would run out before you got money to buy more?	21.5%	68.2%	1.4%	8.9%
Healthcare Costs: Was there a time you needed to see a doctor but could not because of cost?	30.1%	59.7%	1.1%	9.2%
<b>Transportation:</b> Ever had to go without health care because you didn't have a way to get there?	8.7%	81.0%	1.4%	9.0%

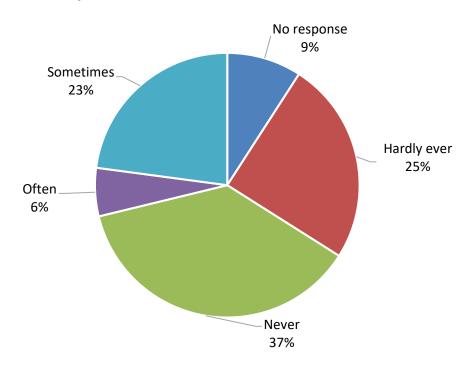
# **Social Isolation**

Survey Question: How often do you feel that you lack companionship?



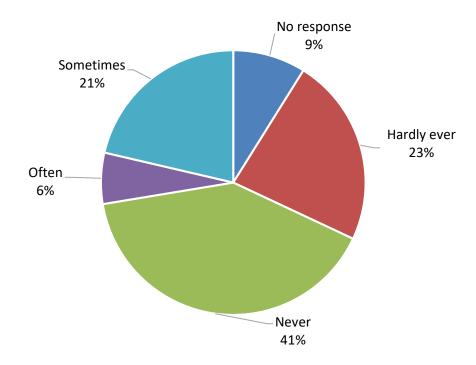
## **Social Isolation**

Survey Question: How often do you feel left out?



## **Social Isolation**

Survey Question: How often do you feel isolated from others?



Creating a Healthier Flagler & Volusia: 2019 Community Survey
We need your assistance to better understand the health of Volusia & Flagler counties. You can help by completing this health survey. The survey results will be used to compile the community health needs assessment. Thank you!
1. Where do you live? Thagler Volusia Another Florida County Outside of Florida 2. Zip code:
3. How do you rate your overall health? (Check ONE)
Check up to 5 things that allow YOU to be healthy where you live:      Churches or other places of worship
5. Check up to 5 health issues YOU are most concerned about in your county:  Asthma/respiratory/lung disease  Addiction – alcohol or drug  End of life care  Mental health problems  Teenage pregnancy  HIV/AIDS  Heart disease & stroke  Infant mortality/infant death  Sexually transmitted diseases  Firearms in homes  High blood pressure  Dental problems  Violence (rape, assault, crime, etc)  Unemployment  Child abuse/neglect  Teenage pregnancy  HIV/AIDS  Domestic violence  Adult obesity  Childhood obesity  Violence (rape, assault, crime, etc)  Access to healthy food/grocery stores  Other  Child abuse/neglect  Teenage pregnancy  HIV/AIDS  Domestic violence  Domestic violence  Childhood obesity  Violence (rape, assault, crime, etc)  Access to healthy food/grocery stores
6. Check up to 5 unhealthy behaviors YOU are most concerned about in your county:  Alcohol/drug abuse
7. What health care services are difficult to obtain in your community? (Check ALL that apply):  Alternative therapy Dental/oral care Preventive care (i.e. annual check ups) Primary care (i.e. family doctor or walk-in clinic) Family planning/birth control Specialty doctor care (i.e. heart doctor) Vision/eye care Other
8. What do you feel are barriers for YOU getting or staying healthy in your county? (Check ALL that apply):    I work too much
9. What do you feel are barriers for YOU getting health care in your county? (Check ALL that apply):    Lack of transportation
Can't find providers that accept my insurance Don't know what types of services are available Too much worry and stress Language barriers No end for senior services  Long waits for appointments No one to turn to for help Lack of daily needs for survival Coping with loneliness None, I don't have any barriers Other Other
Please continue to page 2.

Creating a Healthier Flagler & Volusia: 2019 Community Survey			
10. How is your health care covered? (Check ALL that apply):  Insurance: your or a family member's job Insurance you pay for personally  Medicare Medicaid – your own Pay cash  Other Other			
11. Where would you go if you were worried about your child's mental, physical or social health? (Check ALL that apply):  I don't have children/dependents Their doctor's office Hospital emergency room Other family members or friends  Could place of worship or neighborhood group  Other			
12. Do problems getting child care make it difficult for you to work or study?  13. Are you afraid you might be hurt in your apartment building or house?  14. Do problems getting child care make it difficult for you to work or study?  15. Are you afraid you might be hurt in your apartment building or house?  16. Do problems getting child care make it difficult for you to work or study?  17. Do problems getting child care make it difficult for you to work or study?  18. Are you afraid you might be hurt in your apartment building or house?  19. Do problems getting child care make it difficult for you to work or study?  19. Do problems getting child care make it difficult for you to work or study?			
14. Are you worried or concerned that in the next 2 months you may not have stable housing that you own, rent, or stay in as part of a household?			
Within the last 12 months:  16. Has the utility company shut off your services for not paying your bills?			
26. Gender: Female Male  27. Race: With which group do you most identify? (Check ONE selection)    Black/African American   Mixed Race   Asian   Hawaiian Native/Pacific Islander    White/Caucasian   Native American/Alaskan Native   Other    28. With which ethnic group do you most identify? (Check ONE selection)   Not Hispanic/Latino   Hispanic/Latino    29. Education: Please check the highest level completed: (Check ONE selection)     Elementary/Middle School   Some College   4-year College/Bachelor's Degree     High School Diploma or GED   Technical/Community College   Graduate/Advanced Degree    30. Employment Status: (Check ONE selection):     Employed full-time   Self-employed   Not seeking work   Home maker   Student     Employed part-time   Unemployed   Retired   Other    31. Annual Household Income: (Check ONE selection)     Less than \$10,000   \$20,000 to \$29,999   \$50,000 to \$74,999   \$100,000 or more     \$10,000 to \$19,999   \$30,000 to \$49,999   \$75,000 to \$99,999   \$100,000 or more			
Thank you for taking the time to complete this survey! If you have any questions or would like to participate in the community health needs assessment process, email Laureen Husband at <a href="Laureen-Husband@fihealth.qov">Laureen-Husband@fihealth.qov</a> . Mail completed surveys to Community Health Survey, Department of Health-Volusia, 1845 Holsonback Drive, Bin #126, Daytona Beach, FL 32117.			

# **Focus Group Summary**

April 2019. The goal was to conduct focus groups in seven populations – youth, college students, older adults, impoverished communities/neighborhoods, Spanish speakers, maternal and child health groups and professional groups. The focus groups were one to two hours in length, digitally recorded and transcribed verbatim. Focus group participants discussed concerns about health, community, and access to healthcare and other resources that promote optimal health. A summary of the focus groups is below:

Volusia County conducted 16 focus groups across the county from March to

A **focus group** is a confidential gathering of deliberately selected people assembled to participate in a guided discussion about a particular topic in a non-threatening environment.

Affordable **Housing** – Participants, from students to the elderly, discussed their inability to afford or obtain housing in the county. Poverty and availability of housing were mentioned to be a problem. One participant said they do not qualify for food stamps but cannot make it, and their check doesn't cover a place to live. Housing was a major point of concern for Bethune-Cookman University students. They could not afford to live off campus nor could they afford the higher cost of living on campus.

**Healthcare and Social Services** – Participants cited a lack of knowledge concerning resources, difficulty accessing mental health services, high cost for care, and lack of insurance as barriers to health care and social services. The burden of expensive medication was a primary concern for the 55 and over population. Bethune-Cookman University students identified the lack of health services on campus as a concern.

**Mental Health Services** – Participants stated they had difficulty obtaining mental health services for adults and children. The groups felt that trauma must be identified and addressed earlier to prevent mental health issues later in life.

**Homelessness** – Many participants who experienced housing challenges also reported homelessness to be a major burden. They expressed the need to expand resources to the homeless population as well.

**Sense of Community** – Participants explicitly described "no sense of community" where they lived. Lack of community trust and safety and inability to depend on neighbors were specified as contributing factors. Bethune-Cookman University students expressed a sense of disconnect from the Daytona Beach community. The crime and violence surrounding them fosters their disengagement.

**Diminishing Responsibility to Youth** – Participants expressed a need for more youth programs, community centers, male role models and a better criminal justice system. They also mentioned that families needed places to gather, exercise and play.

**Community Improvements** – Participants identified the need for Votran routes in the Pierson area, more employment opportunities, improved street lighting, more community resources, and crime interventions.

**Social Media** – Students expressed their concerns about the negative impact of social media among school aged children. Some teens use social media (texting, blogs, social networking, etc.) to harass, threaten, or embarrass a peer. Some compare themselves to unrealistic body images. Some students are addicted to electronics.

**Substance Abuse** – University Students reported many of their peers are experimenting with drugs on and off campus while unaware of the dangers. Parents are not always of aware of the experimentation.

**School Readiness** – University Students expressed not feeling prepared for college, stressed to past the test, and not being taught life skills.

**School Safety** – University Students expressed their concerns about feeling safe on campus. School administration does not listen to them and the mock drills are scary.

**Criminal History** –Participants who had felonies on their record faced a particularly hard time securing gainful employment and housing.

#### **Focus Group Questions**

- A. What makes you most proud of our community?
- B. What is the most important issue impacting you and other people you know? Why? In other words, what keeps you up at night?
- C. What would success or improvement look like for you and other people in your age group? Why?
- D. If you had unlimited resources and power and were granted 3 wishes for <u>Yourself</u> what would they be?
- E. If you had unlimited resources and power and were granted 3 wishes for your <u>Community</u> what would they be?
- F. What do you believe are 2 to 3 most important characteristics of a community?
- G. What are the <u>most significant</u> concerns in the community that may impact the way you live, learn, work, and play?
- H. What are the main reasons why these concerns are present?
- I. What **assets/resources** does your community or neighborhood have that can be used to improve where you live, learn, work, and play?
- J. Is your community or neighborhood a good one to raise children and grow old in? Is there a difference between the two? If so, what's the difference?
  - i. Prompts: What makes it good or bad? What can make it better?
- K. What do you believe are the <u>top 5</u> issues that <u>must be addressed to improve the quality of life in</u> your community or neighborhood?

# APPENDIX B: SECONDARY DATA REPORT

The Volusia County Community Health Needs Assessment document can be found at www.flaglercares.org/Volusia\_CHNA.pdf

Additional Secondary data collected and analyzed is noted below.

# AdventHealth Fish Memorial Needs Assessment Report - Quick Facts

### Location

AdventHealth Fish Memorial Service Area

**Demographics** 

Data Indicator	Indicator Variable	Location Summary	State Average
Population Age 65+	Total Population	135,870	20,278,447
	Population Age 65+	24,764	3,926,889
	Percent Population Age 65+	18.23%	19.36%
Population Age 0-18	Total Population	135,870	20,278,447
	Population Age 0-17	29,696	4,111,582
	Percent Population Age 0-17	21.86%	20.28%
Population Age 18-64	Total Population	135,870	20,278,447
	Population Age 18-64	81,410	12,239,976
	Percent Population Age 18-64	59.92%	60.36%
Total Population	Total Population	135,869	20,278,447
	Total Land Area (Square Miles)	103	53,634
	Population Density (Per Square Mile)	1,312	378.09
Change in Total Population	Total Population, 2000 Census	104,231	15,982,378
	Total Population, 2010 Census	129,489	18,801,310
	Total Population Change, 2000-2010	25,258	2,818,932
	Percent Population Change, 2000-2010	24.23%	17.64%
Female Population	Total Population	135,870	20,278,447

	Female Population	69,760	10,364,086
	Percent Female Population	51.34%	51.11%
Hispanic Population	Total Population	135,869	20,278,447
	Non-Hispanic Population	99,284	15,263,432
	Percent Population Non-Hispanic	73.07%	75.27%
	Hispanic or Latino Population	36,585	5,015,015
	Percent Population Hispanic or Latino	26.93%	24.73%
Male Population	Total Population	135,870	20,278,447
	Male Population	66,110	9,914,361
	Percent Male Population	48.66%	48.89%

# **Social & Economic Factors**

Data Indicator	Indicator Variable	Location Summary	State Average
Violent Crime	Total Population	135,870	19,536,492
	Violent Crimes	24,764	92,236
	Violent Crime Rate (Per 100,000 Pop.)	18.23%	472
Population with No	Total Population Age 25+	135,870	14,396,066
High School Diploma	Population Age 25+ with No High School Diploma	29,696	1,787,348
	Percent Population Age 25+ with No High School Diploma	21.86%	12.42%
Poverty - Population Below 100% FPL	Total Population	135,870	19,858,469
Below 100% FPL	Population in Poverty	81,410	3,070,972
	Percent Population in Poverty	59.92%	15.46%
Insurance - Uninsured Adults	Total Population Age 18 - 64	135,869	12,071,750
Oninsured Adults	Population with Medical Insurance	103	9,845,200
	Percent Population with Medical Insurance	1,312	81.56%
	Population Without Medical Insurance	104,231	2,226,550
	Percent Population Without Medical Insurance	129,489	18.44%
Insurance - Uninsured Children	Total Population Under Age 19	25,258	4,291,510
Olinisuled Clindfen	Population with Medical Insurance	24.23%	4,009,046
	Percent Population with Medical Insurance	135,870	93.42%

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	Population Without Medical Insurance	69,760	282,464
	Percent Population Without Medical Insurance	51.34%	6.58%
Income - Per Capita	Total Population	135,869	20,278,447
income	Total Income (\$)	99,284	\$583,486,218,200.00
	Per Capita Income (\$)	73.07%	\$28,773.00
Unemployment Rate	Labor Force	36,585	10,314,179
	Number Employed	26.93%	9,976,217
	Number Unemployed	135,870	337,962
	Unemployment Rate	66,110	3.30%
Lack of Social or	Total Population Age 18+		
Emotional Support	Estimated Population Without Adequate Social / Emotional Support	48.66% 135.870	14,682,954 3,127,469
	Crude Percentage	24,764	21.30%
	Age-Adjusted Percentage	18.23%	21.20%
Teen Births	Female Population Age 15 - 19	135,870	597,095
	Births to Mothers Age 15 - 19	29,696	21,555
	Teen Birth Rate (Per 1,000 Population)	21.86%	36.1
Food Insecurity Rate	Total Population	135,870	19,893,297
	Food Insecure Population, Total	81,410	3,227,600
	Food Insecurity Rate		
Poverty - Children	Total Population	59.92%	16.20%
Below 100% FPL	Population Under Age 18	135,869	19,858,469 4,044,879
	Population Under Age 18 in Poverty	1,312	901,772
	Percent Population Under Age 18 in Poverty	104,231	22.29%

**Physical Environment** 

Data Indicator	Indicator Variable	Location Summary	State Average
Use of Public Transportation	Total Population Employed Age 16+	135,870	8,907,171
Transportation	Population Using Public Transit for Commute to Work	24,764	180,231
	Percent Population Using Public Transit for Commute to Work	18.23%	2.00%
Population with Low	Total Population	135,870	18,801,310

Food Access	Population with Low Food Access	29,696	4,831,135
	Percent Population with Low Food Access	21.86%	25.70%

# **Clinical Care**

Data Indicator	Indicator Variable	Location Summary	State Average
Access to Dentists	Total Population, 2015	135,870	20,271,272
	Dentists, 2015	24,764	11,304
	Dentists, Rate per 100,000 Pop.	18.23%	55.8
Cancer Screening - Sigmoidoscopy or	Total Population Age 50+	135,870	5,497,252
Colonoscopy	Estimated Population Ever Screened for Colon Cancer	29,696	3,628,186
	Crude Percentage	21.86%	66.00%
	Age-Adjusted Percentage	135,870	61.50%
Cancer Screening - Mammogram	Total Medicare Enrollees	81,410	1,861,794
	Female Medicare Enrollees Age 67-69	59.92%	161,850
	Female Medicare Enrollees with Mammogram in Past 2 Years	135,869	109,429
	Percent Female Medicare Enrollees with Mammogram in Past 2 Year	103	67.60%
Cancer Screening - Pap Test	Female Population Age 18+	1,312	11,566,352
	Estimated Number with Regular Pap Test	104,231	8,894,525
	Crude Percentage	129,489	76.90%
	Age-Adjusted Percentage	25,258	78.80%
Facilities Designated as Health Professional	Primary Care Facilities	24.23%	138
Shortage Areas	Mental Health Care Facilities	135,870	125
	Dental Health Care Facilities	69,760	127
	Total HPSA Facility Designations	51.34%	390
Lack of Prenatal Care	Total Births	135,869	906,594
	Mothers Starting Prenatal Care in First Semester	99,284	603,986
	Mothers with Late or No Prenatal Care	73.07%	250,800
	Prenatal Care Not Reported	36,585	51,808
	Percentage Mothers with Late or No Prenatal Care	26.93%	27.70%

Federally Qualified Health Centers	Total Population	135,870	18,801,310
	Number of Federally Qualified Health Centers	66,110	406
	Rate of Federally Qualified Health Centers per 100,000 Population	48.66%	2.16
Lack of a Consistent Source of Primary	Survey Population (Adults Age 18+)	135,870	14,671,272
Care	Total Adults Without Any Regular Doctor	24,764	3,638,104
	Percent Adults Without Any Regular Doctor	18.23%	24.80%
Preventable Hospital	Total Medicare Part A Enrollees	135,870	1,506,764
	Ambulatory Care Sensitive Condition Hospital Discharges	29,696	80,828
	Ambulatory Care Sensitive Condition Discharge Rate	21.86%	53.6

# **Health Behaviors**

Data Indicator	Indicator Variable	Location Summary	State Average
Alcohol Consumption	Total Population Age 18+	135,870	14,682,954
	Estimated Adults Drinking Excessively	24,764	2,334,590
	Estimated Adults Drinking Excessively (Crude Percentage)	18.23%	15.90%
	Estimated Adults Drinking Excessively (Age-Adjusted Percentage)	135,870	17.10%
Physical Inactivity	Total Population Age 20+	29,696	15,678,149
	Population with no Leisure Time Physical Activity	21.86%	3,874,964
	Percent Population with no Leisure Time Physical Activity	135,870	23.60%
Tobacco Usage - Current Smokers	Total Population Age 18+	81,410	14,682,954
Current Smokers	Total Adults Regularly Smoking Cigarettes	59.92%	2,642,932
	Percent Population Smoking Cigarettes (Crude)	135,869	18.00%
	Percent Population Smoking Cigarettes (Age-Adjusted)	103	18.90%

# **Health Outcomes**

Data Indicator	a Indicator Indicator Variable		State Average
Mortality - Lung Disease	Total Population	135,870	19,929,487
J.Scasc	Average Annual Deaths, 2007-2011	24,764	11,363
	Crude Death Rate (Per 100,000 Pop.)	18.23%	57.02

	Age-Adjusted Death Rate (Per 100,000 Pop.)	135,870	38.55
Mortality - Unintentional Injury	Total Population	29,696	19,929,487
Offinteritional injury	Average Annual Deaths, 2010-2014	21.86%	10,015
	Crude Death Rate (Per 100,000 Pop.)	135,870	50.25
	Age-Adjusted Death Rate (Per 100,000 Pop.)	81,410	44.43
Mortality - Heart Disease	Total Population	59.92%	19,929,487
Disease	Average Annual Deaths, 2010-2014	135,869	44,078
	Crude Death Rate (Per 100,000 Pop.)	103	221.17
	Age-Adjusted Death Rate (Per 100,000 Pop.)	1,312	149.9
High Blood Pressure (Adult)	Total Population (Age 18+)	104,231	14,682,954
(Addit)	Total Adults with High Blood Pressure	129,489	4,155,276
	Percent Adults with High Blood Pressure	25,258	28.30%
Cancer Incidence - Lung	Estimated Total Population	24.23%	2,771,859
Lung	New Cases (Annual Average)	135,870	16548
	Cancer Incidence Rate (Per 100,000 Pop.)	69,760	59.7
Mortality - Premature Death	Total Population	51.34%	56,417,393
Death	Total Premature Death, 2014-2016	135,869	256,433
	Total Years of Potential Life Lost,2014-2016 Average	99,284	4,112,576
	Years of Potential Life Lost, Rate per 100,000 Population	73.07%	7,290
Cancer Incidence - Prostate	Estimated Total Population (Male)	36,585	1,300,513
- Tostate	New Cases (Annual Average)	26.93%	12,667
	Cancer Incidence Rate (Per 100,000 Pop.)	135,870	97.4
Cancer Incidence - Breast	Estimated Total Population (Female)	66,110	1,330,172
	New Cases (Annual Average)	48.66%	15,430
	Cancer Incidence Rate (Per 100,000 Pop.)	135,870	116
	Estimated Total Population (Female)	24,764	1,048,314
Cancer Incidence - Cervix	New Cases (Annual Average)	18.23%	933
	Cancer Incidence Rate (Per 100,000 Pop.)	135,870	8.9
Cancer Incidence -	Estimated Total Population	29,696	2,653,116

Center Incidence Rate (Per 100,000 Pop.)         135,870         36.9           Obesity         Total Population Age 201         81,410         15,687,277           Adults with BMI > 30.0 (Obese)         59,92%         4,162,381           Percent Adults with BMI > 30.0 (Obese)         135,869         26,60%           Overweight         10tal Adults Overweight         1,312         5,146,693           Percent Adults Overweight         104,231         36,70%           Diabetes (Adult)         Total Population Age 201         129,489         15,705,775           Population with Diagnosed Diabetes         25,258         1,715,434           Population with Diagnosed Diabetes, Age-Adjusted Rate         24,23%         9,22%           Poor General Health         104,623,954         135,870         14,682,954           Estimated Population Age 181         135,870         14,682,954         17,20%           Age-Adjusted Percentage         51,34%         17,20%         15,90%           Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73,07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         48,66%	Colon and Rectum	New Cases (Annual Average)	21.86%	9,790
Obesity         Total Population Age 201         81,410         15,887,277           Adults with BMI > 30.0 (Obese)         59,92%         4,162,381           Percent Adults with BMI > 30.0 (Obese)         135,869         26,60%           Overweight         135,869         26,60%           Overweight         103         14,014,811           Total Adults Overweight         104,231         36,70%           Percent Adults Overweight         104,231         36,70%           Percent Adults Overweight         104,231         36,70%           Population with Diagnosed Diabetes         25,258         1,715,434           Population with Diagnosed Diabetes         25,258,488         135,870         14,682,954           Estimated Population with Poor or Fair Health         69,760         2,525,488		Cancer Incidence Rate (Per 100,000 Pop.)		
Adults with BMI > 30.0 (Obese)   59.92%   4,162,381     Percent Adults with BMI > 30.0 (Obese)   135,869   26.60%     Percent Adults with BMI > 30.0 (Obese)   135,869   26.60%     Survey Population (Adults Age 18+)   103   14,014,811     Total Adults Overweight   104,231   36.70%     Percent Adults Overweight   104,231   36.70%     Diabetes (Adult)   Total Population Age 20+   129,489   15,705,775     Population with Diagnosed Diabetes   25,258   1,715,434     Population with Diagnosed Diabetes   25,258   1,715,434     Population with Diagnosed Diabetes   24,23%   9.22%     Poor General Health   135,870   14,682,954     Estimated Population Age 181   135,870   14,682,954     Estimated Population with Poor or Fair Health   69,760   2,525,468     Crude Percentage   135,869   15,90%     Age-Adjusted Percentage   135,869   15,90%     Average Annual Deaths, 2010-2014   73,07%   3,063     Crude Death Rate (Per 100,000 Pop.)   36,585   15,37     Age-Adjusted Death Rate (Per 100,000 Pop.)   26,93%   14,09     Mortality - Homicide   Total Population   135,870   19,929,487     Average Annual Deaths, 2010-2014   66,110   1,202     Crude Death Rate (Per 100,000 Pop.)   135,870   6,39     Mortality - Cancer   Total Population   24,764   19,929,487     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217,19     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217,19     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217,19     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217,19     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   29,696   152,86     Mortality - Stroke   Total Population   24,764   29,929,487     Average Annual Deaths, 2010-2014   24,764   29,929,487     Average Annual Deaths, 2010-2014   24,764   29,929,487     Average Annual Deaths, 2010-2014	Obesity	Total Population Age 20+		
Percent Adults with BMI > 30.0 (Obese)   135,869   26.60%		Adults with BMI > 30.0 (Obese)		
Overweight         Survey Population (Adults Age 18+)         103         14,014.811           Total Adults Overweight         1,312         5,146,693           Percent Adults Overweight         104,231         36,70%           Diabetes (Adult)         Total Population Age 20+         129,489         15,705,775           Population with Diagnosed Diabetes         25,258         1,715,434           Population with Diagnosed Diabetes, Age-Adjusted Rate         24,23%         9,22%           Poor General Health         Total Population Age 18+         135,870         14,682,954           Estimated Population with Poor or Fair Health         69,760         2,525,468           Crude Percentage         135,869         15,30%           Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73,07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         26,93%         14,09           Mortality - Homicide         Total Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         135,870         6,39		Percent Adults with BMI > 30.0 (Obese)		
Total Adults Overweight	Overweight	Survey Population (Adults Age 18+)		
Diabetes (Adult)         Total Population Age 20+         129,488         15,705,775           Population with Diagnosed Diabetes         25,258         1,715,434           Population with Diagnosed Diabetes, Age-Adjusted Rate         24,23%         9,22%           Poor General Health         Total Population Age 18+         135,870         14,682,954           Estimated Population with Poor or Fair Health         69,760         2,525,468           Crude Percentage         51,34%         17,20%           Age-Adjusted Percentage         135,869         15,90%           Mortality - Suicide         70 tal Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73,07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         36,585         15,37           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         48,66%         6,03           Age-Adjusted Death Rate (Per 100,000 Pop.)         48,66%         19,929,487           Average Annual Deaths, 2010-2014         18,23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217,79           Age-Adjusted D		Total Adults Overweight		, ,
Diabetes (Adult)         Total Population Age 20+         129,489         15,705,775           Population with Diagnosed Diabetes         25,258         1,715,434           Population with Diagnosed Diabetes, Age-Adjusted Rate         24,23%         9,22%           Poor General Health         135,870         14,682,954           Estimated Population Age 18+         135,870         14,682,954           Estimated Population with Poor or Fair Health         69,760         2,525,468           Crude Percentage         51,34%         17,20%           Age-Adjusted Percentage         135,869         15,90%           Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73.07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15.37           Age-Adjusted Death Rate (Per 100,000 Pop.)         26,93%         14.09           Mortality - Homicide         104 Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         135,870         6,39           Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 20		Percent Adults Overweight		
Population with Diagnosed Diabetes   25,258   1,715,434     Population with Diagnosed Diabetes, Age-Adjusted Rate   24,23%   9,22%     Poor General Health   Total Population Age 18+   135,870   14,682,954     Estimated Population with Poor or Fair Health   69,760   2,525,468     Crude Percentage   51,34%   17,20%     Age-Adjusted Percentage   135,869   15,90%     Mortality - Suicide   Total Population   99,284   19,929,487     Average Annual Deaths, 2010-2014   73,07%   3,063     Crude Death Rate (Per 100,000 Pop.)   36,585   15,37     Age-Adjusted Death Rate (Per 100,000 Pop.)   26,93%   14,09     Mortality - Homicide   Total Population   135,870   19,929,487     Average Annual Deaths, 2010-2014   66,110   1,202     Crude Death Rate (Per 100,000 Pop.)   48,66%   6,03     Age-Adjusted Death Rate (Per 100,000 Pop.)   135,870   6,39     Mortality - Cancer   Total Population   24,764   19,929,487     Average Annual Deaths, 2010-2014   18,23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217,19     Age-Adjusted Death Rate (Per 100,000 Pop.)   29,696   152,86     Mortality - Stroke   Total Population   21,86%   19,929,487     Average Annual Deaths, 2010-2014   21,86%   19,929,487     Avera	Diabetes (Adult)	Total Population Age 20+		
Population with Diagnosed Diabetes, Age-Adjusted Rate   24.23%   9.22%		Population with Diagnosed Diabetes		
Poor General Health         Total Population Age 18+         135,870         14,682,954           Estimated Population with Poor or Fair Health         69,760         2,525,468           Crude Percentage         51,34%         17,20%           Age-Adjusted Percentage         135,869         15,90%           Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73,07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         26,93%         14,09           Mortality - Homicide         Total Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         48,66%         6,03           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         6,39           Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 2010-2014         18,23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217.19           Age-Adjusted Death Rate (Per 100,000 Pop.)         29,696         152.86           Mortality - Stro		Population with Diagnosed Diabetes, Age-Adjusted Rate		
Estimated Population with Poor or Fair Health   69,760   2,525,468   Crude Percentage   51.34%   17.20%   Age-Adjusted Percentage   135,869   15.90%   15.90%	Poor General Health	Total Population Age 18+		
Crude Percentage   51.34%   17.20%		Estimated Population with Poor or Fair Health		
Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73.07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         26,93%         14,09           Mortality - Homicide         Total Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         48.66%         6,03           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         6,39           Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 2010-2014         18,23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217,19           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         217,19           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         217,19           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         152,86           Mortality - Stroke         Total Population         21,86%         19,929,487		Crude Percentage		
Mortality - Suicide         Total Population         99,284         19,929,487           Average Annual Deaths, 2010-2014         73.07%         3,063           Crude Death Rate (Per 100,000 Pop.)         36,585         15,37           Age-Adjusted Death Rate (Per 100,000 Pop.)         26,93%         14,09           Mortality - Homicide         Total Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         48,66%         6,03           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         6,39           Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 2010-2014         18,23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217,19           Age-Adjusted Death Rate (Per 100,000 Pop.)         29,696         152,86           Mortality - Stroke         Total Population         21,86%         19,929,487		Age-Adjusted Percentage		
Average Annual Deaths, 2010-2014   73.07%   3,063	Mortality - Suicide	Total Population		
Crude Death Rate (Per 100,000 Pop.)   36,585   15.37     Age-Adjusted Death Rate (Per 100,000 Pop.)   26.93%   14.09     Mortality - Homicide		Average Annual Deaths, 2010-2014		
Mortality - Homicide       Total Population       135,870       19,929,487         Average Annual Deaths, 2010-2014       66,110       1,202         Crude Death Rate (Per 100,000 Pop.)       48.66%       6.03         Age-Adjusted Death Rate (Per 100,000 Pop.)       135,870       6.39         Mortality - Cancer       Total Population       24,764       19,929,487         Average Annual Deaths, 2010-2014       18.23%       43,286         Crude Death Rate (Per 100,000 Pop.)       135,870       217.19         Age-Adjusted Death Rate (Per 100,000 Pop.)       29,696       152.86         Mortality - Stroke       Total Population       21.86%       19,929,487		Crude Death Rate (Per 100,000 Pop.)		
Mortality - Homicide         Total Population         135,870         19,929,487           Average Annual Deaths, 2010-2014         66,110         1,202           Crude Death Rate (Per 100,000 Pop.)         48.66%         6.03           Age-Adjusted Death Rate (Per 100,000 Pop.)         135,870         6.39           Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 2010-2014         18.23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217.19           Age-Adjusted Death Rate (Per 100,000 Pop.)         29,696         152.86           Mortality - Stroke         Total Population         21.86%         19,929,487		Age-Adjusted Death Rate (Per 100,000 Pop.)		
Average Annual Deaths, 2010-2014  Crude Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Mortality - Cancer  Total Population  Average Annual Deaths, 2010-2014  Average Annual Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Total Population  Average Annual Deaths, 2010-2014  Average Annual Deaths, 2010-2014	Mortality - Homicide	Total Population		
Crude Death Rate (Per 100,000 Pop.)   48.66%   6.03     Age-Adjusted Death Rate (Per 100,000 Pop.)   135,870   6.39     Mortality - Cancer   Total Population   24,764   19,929,487     Average Annual Deaths, 2010-2014   18.23%   43,286     Crude Death Rate (Per 100,000 Pop.)   135,870   217.19     Age-Adjusted Death Rate (Per 100,000 Pop.)   29,696   152.86     Mortality - Stroke   Total Population   21.86%   19,929,487     Average Annual Deaths, 2010-2014   21.86%   21.86		Average Annual Deaths, 2010-2014		
Age-Adjusted Death Rate (Per 100,000 Pop.)       135,870       6.39         Mortality - Cancer       Total Population       24,764       19,929,487         Average Annual Deaths, 2010-2014       18.23%       43,286         Crude Death Rate (Per 100,000 Pop.)       135,870       217.19         Age-Adjusted Death Rate (Per 100,000 Pop.)       29,696       152.86         Mortality - Stroke       Total Population       21.86%       19,929,487		Crude Death Rate (Per 100,000 Pop.)		
Mortality - Cancer         Total Population         24,764         19,929,487           Average Annual Deaths, 2010-2014         18.23%         43,286           Crude Death Rate (Per 100,000 Pop.)         135,870         217.19           Age-Adjusted Death Rate (Per 100,000 Pop.)         29,696         152.86           Mortality - Stroke         Total Population         21.86%         19,929,487		Age-Adjusted Death Rate (Per 100,000 Pop.)		
Average Annual Deaths, 2010-2014  Crude Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Age-Adjusted Death Rate (Per 100,000 Pop.)  Total Population  Average Annual Deaths, 2010-2014	Mortality - Cancer	Total Population		
Crude Death Rate (Per 100,000 Pop.)         135,870         217.19           Age-Adjusted Death Rate (Per 100,000 Pop.)         29,696         152.86           Mortality - Stroke         Total Population         21.86%         19,929,487		Average Annual Deaths, 2010-2014		
Age-Adjusted Death Rate (Per 100,000 Pop.)  29,696  152.86  Mortality - Stroke  Total Population  21.86%  Average Annual Deaths, 2010-2014		Crude Death Rate (Per 100,000 Pop.)		
Mortality - Stroke         Total Population         21.86%         19,929,487		Age-Adjusted Death Rate (Per 100,000 Pop.)		
Average Annual Deaths, 2010-2014	Mortality - Stroke	Total Population		
1 155 A / U 1 11 11 11 11 11 11 11 11 11 11 11 11		Average Annual Deaths, 2010-2014	135,870	10,042

	Crude Death Rate (Per 100,000 Pop.)	81,410	50.39
	Age-Adjusted Death Rate (Per 100,000 Pop.)	59.92%	33.87
High Cholesterol	Survey Population (Adults Age 18+)	135,869	11,691,020
(Adult)	Total Adults with High Cholesterol	103	4,898,256
	Percent Adults with High Cholesterol	1,312	41.90%
Heart Disease (Adult)	Survey Population (Adults Age 18+)	104,231	14,681,551
	Total Adults with Heart Disease	129,489	822,348
	Percent Adults with Heart Disease	25,258	5.60%
Depression (Medicare	Total Medicare Fee-for-Service Beneficiaries	24.23%	2,222,669
Population)	Beneficiaries with Depression	135,870	420,851
	Percent with Depression	69,760	18.90%
Poor Dental Health	Total Population (Age 18+)	51.34%	14,682,954
	Total Adults with Poor Dental Health	135,869	2,635,605
	Percent Adults with Poor Dental Health	99,284	18.00%
	Total Births	73.07%	1,133,160
Infont Montolity	Total Infant Deaths	36,585	7,932
Infant Mortality	Infant Mortality Rate (Per 1,000 Births)		
	Total Live Births	26.93%	4505.246
Laur Binth Weiter	Low Weight Births (Under 2500g)	135,870	1,585,346
Low Birth Weight	Low Weight Births, Percent of Total	66,110	137,925
	Survey Population (Adults Age 18+)	48.66%	8.70%
	Total Adults with Asthma	135,870	14,756,311
Asthma Prevalence	Percent Adults with Asthma	24,764	1,841,437
	. 5.55.17 Iddito Willi / John Id	18.23%	12.50%

https://ahs.engagementnetwork.org, 1/9/2019

# APPENDIX C: HOSPITAL UTILIZATION & EMERGENCY ROOM DATA

Below are the top 10 diagnoses for AdventHealth Fish Memorial in 2018.

# **Emergency Department**

- 1. Acute bronchitis, unspecified
- 2. Unspecified abdominal pain
- 3. Headache
- 4. Acute upper respiratory infection, unspecified
- 5. Fever, unspecified
- 6. Other chest pain
- 7. Urinary tract infection, site not specified
- 8. Low back pain
- 9. Noninfective gastroenteritis and colitis, unspecified
- 10. Acute pharyngitis, unspecified

# **Inpatient Admissions**

- 1. Sepsis, unspecified organism
- 2. Chronic obstructive pulmonary disease w (acute) exacerbation
- 3. Hypertensive heart and chronic kidney disease with heart failure and stage 1-4 chronic kidney disease, or unspecified chronic kidney disease
- 4. Hypertensive heart disease with heart failure
- 5. Pneumonia, unspecified organism
- 6. Acute kidney failure, unspecified
- 7. Urinary tract infection, site not specified
- 8. Other pulmonary embolism without acute coronary pulmonale
- 9. Other chest pain
- 10. Unspecified atrial fibrillation

# APPENDIX D: COMMUNITY ASSET INVENTORY

Location: Hospital or Community	Organization	Program Title	Target Population	Counties Served	Program Point of Contact
ISSUE 1: AD	ULT & YOUTH BEI	HAVIORAL HE	ALTH		
Community	Multiple	Behavioral Health Consortium	Collaborative of BH leaders	Volusia/ Flagler	icosimi@smahealthcare.org
Community	SMA Healthcare	Inpatient and outpatient SAMH programs	Individuals with mental health of substance use challenges	Circuit 7	800-539-4228 Smahealthcare.org
Community	Halifax Health	Psychiatric programs	Individuals with mental illness	Volusia/ Flagler	877-842-5432 Halifaxhealth.org
Community	Children's Home Society	Counseling	Individuals/ Families with MH needs	Volusia/ Flagler	386-304-7605 Chsfl.org
Hospital	AdventHealth Fish Memorial	Lung Cancer screenings	Screen adults for Lung cancer	Volusia	CLARISSA.MOHOLICK@Adv entHealth.com
Hospital	AdventHealth Fish Memorial	CREATION Health	At risk community	Volusia	Ida.Babazadeh@Adventhealt h.com
Hospital	AdventHealth Fish Memorial	Smoking Cessation classes- Tools to Quit	Adult smokers	Volusia	Vicki Evans, AHEC vevans@northfloridaahec.or g
ISSUE 2: CA	ARDIOVASCULAF	R DISEASES &	DIABETES		
Hospital and community	AdventHealth Fish Memorial	Laugh Your Heart Out	Adults with interest in heart health	Volusia	Ida.Babazadeh@Adventhealt h.com
ISSUE 3: BA	ARRIERS TO ACC	ESSING HEAI	LTH CARE SERVICE	CES	
Community	Family Health Source	FQHC primary and specialty care	All residents (focused on individuals with Medicaid)	Volusia	386-202-6025 Familyhealthsource.org
Community	Azalea Health	FQHC primary and specialty	All residents (focused on individuals with	Volusia	386-323-9600 Azahealth.org

		care	Medicaid)		
Community	FDOH-Volusia	Multiple	All residents	Volusia	386-274.0500 volusia.floridahealth.gov
Community	Good Samaritan Clinic	Free Clinic, primary care	Uninsured, working poor	Volusia	386-738-6990 Gsdld.org
Community	Jesus Clinic	Free Clinic, primary care	Uninsured	Volusia	386-253-6959
Community	Volusia Volunteers in Medicine Clinic	Free Clinic, primary care	Uninsured	Volusia	386-316-2771 Volusiavolunteersinmedicine.com
Community	West Volusia Health Card	Health coverage	Uninsured	Volusia	386-202-6025 Familyhealthsource.org
Community	Kidcare	Health coverage	Low income families	Volusia/ Flagler	877-842-5432 Halifaxhealth.org
Hospital	AdventHealth Fish Memorial	Community Care	Care coordination services for high risk adults Underserved community in Hospital PSA	Volusia	Meghan.Budvarson@Advent Health.com
Hospital and community	AdventHealth Fish Memorial	Colon Cancer Awareness	At Risk adults in community	East Volusia	Michelle.Rosato@AdventHea Ith.com
Hospital	AdventHealth Fish Memorial	Newborn education & Lactation education and tours	Expecting moms and new parents	Volusia	Rebecca.Vernon@AdventHe alth.com
Hospital	AdventHealth Fish Memorial	Cancer Survivor Day Celebrating Cancer survivors	Underserved community Cancer survivors	Volusia	Michelle.Rosato@AdventHea Ith.com
Hospital	AdventHealth Fish Memorial	Caregiver Support Group  Cancer & Survivorship Support	Support Groups for people with interest in topics offered by the Hospital	Volusia	Maybelline.Ferguson@AdventHealth.com  Shawn.Zaicek@AdventHealth.com

		Craun		1	
		Group			Shawn.Zaicek@AdventHealt h.com
		Breast & GYN Cancer Support Group			Shawn.Zaicek@AdventHealt h.com
		Lung Cancer Support Group			Shawn.Zaicek@AdventHealt h.com
		Look Good Feel Better Cancer Support Group			
					Debra.Allison@AdventHealth .com
		COPD Support Group			Maybelline.Ferguson@Adve ntHealth.com
		Pre-Surgery class: support group for patients undergoing Total Joint & Spine Surgery			Joyce.Parrillo@AdventHealth .com
		Diabetes Support Group			
ISSUE 4: HE	ALTHY EATING	& PHYSICAL	ACTIVITY		
Community	Early Learning Coalition of Flagler and Volusia	5-2-1-0 (healthy eating & physical activity program)	0-5 Children and families	Volusia/ Flagler	386-323-2400 Elcfv.org

Community	Volusia County Schools	School Health Advisory Committee	K12 children and families	Volusia	386-734-7190 Vcsedu.org
Community	Volusia Flagler Family YMCA	Multiple health programs	Children and Adults near sites	Volusia	Vfymca.org
Community	County of Volusia	Parks, playgrounds and trails	All citizens	Volusia	386-736-2700 Volusia.org
ISSUE 5: SC	CIAL & ECONON	/IC ISSUES			
Community	County of Volusia	Multiple, family self- sufficiency, financial programs	All residents	Volusia	386-736-2700 Volusia.org
Community	Department of Children and Families	SNAP, Medicaid	At risk families	Circuit 7	904-723-2000 Myflfamilies.com
Community	Volusia/ Flagler Coalition for the Homeless	Homelessne ss prevention and housing programs	At risk families and individuals	Volusia/ Flagler	386-279-0029 Vfcch.org
Community	County and Cities	SHIP housing programs, other	At risk families and individuals	Volusia	multiple
ISSUE 6: AG	GING-RELATED IS	SUES			
Community	Council on Aging	Multiple	Low income seniors	Volusia	386-253-4700 Coavolusia.org
ISSUE 7: CF	IILD & ADOLESC	ENT ISSUES			
Community	Volusia County Schools	Multiple	K12 children	Volusia	386-734-7190 Vcsedu.org
Community	Department of Juvenile Justice	Delinquency programs	At risk children	Circuit 7	386-947-3500 Djj.state.fl.us
ISSUE 8: CO	OMMUNICABLE &	RINFECTIOUS	S DISEASES		
Community	FDOH-Volusia	HIV clinic, TB control, Immunizatio n, surveillance and investigation	All residents	Volusia	386-274.0500 volusia.floridahealth.gov

ISSUE 9: CF	RIME, DOMESTIC	VIOLENCE &	CHILD ABUSE		
Community	Beacon Center	Domestic Violence programs	Victims, perpetrators, children	Volusia	386-257-2297 Mybeaconcenter.com
Community	Community Partnership for Children	Child welfare, foster care	At risk families and children	Volusia, Flagler, Putnam	386-238-4900 Communitypartnershipforchildren.or
Community	Department of Children and Families	Child protection investigation s	At risk families	Circuit 7	904-723-2000 Myflfamilies.com
Community	Healthy Start Coalition of Flagler and Volusia Counties	Healthy Families	At risk families	Volusia/ Flagler	386-252-4277 Healthystartvf.org
ISSUE 10: E	ARLY CHILDHO	OD			
Community	Early Learning Coalition of Flagler and Volusia Counties	Multiple, school readiness, VPK	Low income families, all families/ children	Volusia/ Flagler	386-323-2400 Elcfv.org
Community	Mid Florida Community Services	Headstart	Low income families	Volusia	800-227-0010 Midfloridaheadstart.com
Community	Kidcare	Health coverage	Low income families	Volusia/ Flagler	877-842-5432 Halifaxhealth.org
ISSUE 11: W	OMEN'S HEALT	H, PRENATAL	CARE & BIRTH O	UTCOMES	
Community	Healthy Start Coalition of Flagler and Volusia Counties	Multiple, women's health, case managemen t	Low income or at-risk families	Volusia/ Flagler	386-252-4277 Healthystartvf.org
Community	FDOH-Volusia	Multiple, WIC	Low income or at-risk families	Volusia	386-274.0500 volusia.floridahealth.gov

# APPENDIX E: PRIORITY SELECTION REPORT

# A. Primary & Secondary Data – high-level findings

List	List the 8-10 health priorities determined by Primary Data from the County Health Survey				
1	Addiction	6	Violence		
2	Homelessness	7	Cancer		
3	Mental Health problems	8	Adult Obesity		
4	Unemployment	9	Heart Disease & Stroke		
5	Child Abuse/Neglect	10	High blood pressure		

List	List the 8-10 health priorities determined by Primary Data from the Focus Groups					
1	Affordable Housing/Homelessness	6	Community Improvements			
2	Access to Health Care and Social Services	7	Substance Abuse			
3	Mental Health Services	8	Social Media			
4	Sense of Community	9	School Readiness			
5	Diminishing Responsibility to Youth	10	School Safety			

List the 8-10 health priorities determined by Secondary Data from <u>Hospital Utilization</u> data (ED by top conditions by zip code by payer)				
1	Acute bronchitis, unspecified	6	Other chest pain	
2	Unspecified abdominal pain	7	Urinary tract infection, site not specified	
3	Headache	8	Low back pain	
4	Acute upper respiratory infection, unspecified	9	Noninfective gastroenteritis and colitis, unspecified	
5	Fever, unspecified	10	Acute pharyngitis, unspecified	

List the 8-10 health priorities determined by Secondary Data from <u>Hospital Utilization</u> data (Inpatient by top conditions by zip code by payer)				
1	Sepsis, unspecified organism	6	Acute kidney failure, unspecified	
2	Chronic obstructive pulmonary disease w (acute) exacerbation	7	Urinary tract infection, site not specified	
3	Hypertensive heart and chronic kidney disease with heart failure and stage 1-4 chronic kidney disease, or unspecified chronic kidney disease	8	Other pulmonary embolism without acute coronary pulmonale	
4	Hypertensive heart disease with heart failure	9	Other chest pain	
5	Pneumonia, unspecified organism	10	Unspecified atrial fibrillation	

Top 8-10 Priorities determined from Secondary Data provided by Volusia County Collaborative CHNA				
1	Adult Behavioral Health	6	Healthy Eating and Physical Activity	
2	Youth Behavioral Health	7	Social and Economic Issues	
3	Cardiovascular Diseases	8		
4	Diabetes	9		
5	Access to Health Care Services	10		

# **B.** Primary & Secondary Data – Aggregated Priority Issues

Aggregate Community Health Needs					
	Priority Issue	Ethnic Group	Age Group	Specific Geographic Area	
1	Adult & Youth Behavioral Health	all	adults	All of Volusia County	
2	Cardiovascular Disease	All, minority overrepresentation	all	All of Volusia County, high poverty neighborhoods	
3	Diabetes	All, minority overrepresentation	all	All of Volusia County, high poverty neighborhoods	
4	Healthy Eating and Physical Activity	All	all	All of Volusia County, high poverty neighborhoods	
5	Access to Health Care Services	All, uninsured	all	All of Volusia County, high poverty neighborhoods	

6	Social and Economic Issues	All, working poor and below poverty	all	All of Volusia County, high poverty neighborhoods
7	Women's Health, Prenatal Care and Birth Outcomes	All, minority overrepresentation	all	All of Volusia County, high poverty neighborhoods
8	Aging Related Issues	All	Older adults	All of Volusia County
9	Child & Adolescent Issues	All	Child, adolescent	All of Volusia County
10	Communicable & Infectious Diseases	All	all	All of Volusia County
11	Early Childhood	All	Early childhood	All of Volusia County

# C. Community Priority Issues that the Hospital Will Address

#### **Adult & Youth Behavioral Health**

- Heavy/Binge drinking has increased slightly from 2010 to 2016. The percent is highest for white individuals.
- Volusia alcohol-suspected motor vehicle crashes and traffic crash injuries rates have decreased since 2014 but are slightly higher than Florida.
- Alcohol-suspected traffic crash deaths increased between 2015 and 2016 in Volusia and the Volusia rate is higher than Florida.
- Volusia's rate of Opioid-involved overdose hospitalizations increased from 2015 to 2017 and is higher than Florida's. The rate of death from Opioid overdoses increased in the last year and now exceeds the Florida rate.
- The percent of Volusia adults who smoke is higher than Florida. (the difference is statistically significant)
- The percent of Volusia adults who had 14 or more poor mental health days in the last month is higher than Florida. (the difference is statistically significant)
- The percent of Volusia adults with a depressive disorder is higher than Florida. (the difference is statistically significant for Hispanic population)
- Volusia's suicide rate is increasing and is higher than Florida's.
- Volusia's age 19-21 rate of hospitalizations for self-inflicted injuries has increased but is lower than Florida's.
- The percent of student alcohol use has been decreasing since 2008 but remains slightly higher than Florida.
- The percent of Volusia middle and high school students using marijuana decreased between 2016 and 2018 but remains higher than Florida.
- Reported cigarette use among Volusia middle and high school students has declined, but both rates remain higher than Florida.

#### **Cardiovascular Diseases & Diabetes**

- The Years of Potential Life Lost (YPLL) rate for Volusia County increased from 2014 to 2017 and is higher than Florida.
- The Volusia death rate for heart failure is higher than Florida.
- Volusia's hospitalization rate for Congestive Heart Failure is higher than Florida's and the rate for Black individuals is much higher.
- The Volusia hospitalization rate for coronary heart disease is higher than Florida and the rate for Black individuals is higher than the rate for all.
- The Volusia death rate for coronary heart disease is higher than Florida.

- The Volusia hospitalization rate for stroke is higher than Florida and the rate for Black individuals is higher than other groups.
- The Volusia death rate for stroke is higher than Florida and the rate for Black individuals is higher than other groups.
- The death rate from diabetes increased between 2016 and 2017 and is higher in Volusia than in Florida. The rate is highest for Black individuals.
- The rate of preventable hospitalizations for adults under 65 from diabetes is increasing and higher than Florida.

#### **Barriers to Health Care Services**

- Volusia rate of health resources per population are lower than Florida in the categories of: physicians, internists, OB/GYN, and pediatricians.
- Volusia has a higher percentage of births covered by Medicaid than Florida. Rates for Black and Hispanic individuals are higher.
- The percent of Volusia adults with a personal doctor is lower than Florida.
- Volusia has a lower ratio of primary care physicians, dentists and mental health providers to population than Florida.

#### **Healthy Eating & Physical Activity**

- Over 70% of Volusia middle and high school students lack vigorous physical activity and the percent increased from 2014 to 2016. The percent is better than Florida.
- The percent of Volusia adults who are sedentary increased from 2007 to 2016 and is now higher than Florida.
- The percent of Volusia middle and high schoolers who were obese increased significantly from 2014 to 2016.
- The percent of Volusia adults who are obese increased between 2013 and 2016 and the percent is now higher than Florida.
- Injury deaths are increasing and higher than Florida.

#### Social & Economic Issues

- Volusia's median household income is lower than Florida's.
- Volusia's percent of individuals and individuals below age 18 below poverty are both slightly higher than Florida's.
- The Volusia percent of elementary and middle school students eligible for free/reduced price lunches is higher than Florida. (a proxy measure for low income)
- The Volusia high school graduation rate is lower than Florida.
- The Volusia percent of adults limited by physical, mental or emotional problems is higher than Florida. (difference is statistically significant)
- Volusia's food insecurity rate is higher than Florida's.
- Volusia's per capita income is lower than Florida's.
- Over 30% of Volusia households spend more than 30% of their income on housing and workers in 8 of the top 20 industries in Volusia are estimated to be housing burdened based on average hourly wage.
- The Volusia number of individuals counted during the Point-In-Time count was higher in 2019 than in 2018.
- The Volusia number of homeless students has been increasing since 2016.
- Volusia's percent of single parent households is higher than Florida's.

# D. Community Issues that the Hospital Did Not Choose

#### **Aging-related Issues**

• The data collected for individuals 65 and older did not demonstrate significant negative trends or negative comparison to state data. The only indicator of concern noted was suicide rate for individuals over 65 which will be addressed through the prioritization of adult behavioral health. There are numerous initiatives in place to provide services to this target population.

#### **Child & Adolescent Issues**

• The most significant childhood issues are addressed through other priority issues (behavioral health, access to services, healthy eating and physical activity)

#### **Communicable & Infectious Diseases**

• The data collected did not demonstrate significant negative trends or comparison data. Many issues noted in the indicators of concern will be address through the prioritization of Access to Health Care Services.

#### Crime, Domestic Violence & Child Abuse

The data collected did not demonstrate significant negative trends or negative comparison to state data.
 Many issues noted in the indicators of concern will be address through the prioritization of Social and Economic Issues.

#### **Early Childhood**

• There are significant efforts already in place to address this target population.

#### Women's Health, Prenatal Care & Birth Outcomes

• There are significant efforts already in place to address this target population. Many of the indicators of concern will be addressed through the prioritization of Access to Health Care Services.