

# AdventHealth DeLand 2020-2022 COMMUNITY HEALTH PLAN



Memorial Hospital - West Volusia, Inc. d/b/a AdventHealth DeLand

**Approved by the Hospital Board on: March 3, 2020**

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# 2020-2022 COMMUNITY HEALTH PLAN

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## Acknowledgements

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

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

## OVERVIEW

Memorial Hospital - West Volusia, Inc. d/b/a AdventHealth DeLand will be referred to in this document as AdventHealth Deland or the “Hospital.”

### Community Health Needs Assessment Process

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

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

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

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

### Priority Issues to be Addressed

The priority issues to be addressed include:

1. 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 3 for goals, objectives and next steps for each priority selected to be addressed.*

### Priority Issues not to be Addressed

The priority issues that will not be addressed include:

1. The Years of Potential Aging-related issues
2. Child and Adolescent Issues
3. Communicable and Infectious Diseases
4. Crime, Domestic Violence and Child Abuse
5. Early Childhood
6. Women’s Health, Prenatal Care and Birth Outcomes

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

## **Board Approval**

On March 3, 2020, the AdventHealth DeLand Board approved the Community Health Plan (CHP) goals, objectives and next steps. A link to the 2020 Community Health Plan was posted on the Hospital's website prior to May 15, 2020. The Community Health Plan can be found at <https://www.adventhealth.com/community-health-needs-assessments>.

## **Ongoing Evaluation**

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

## **For More Information**

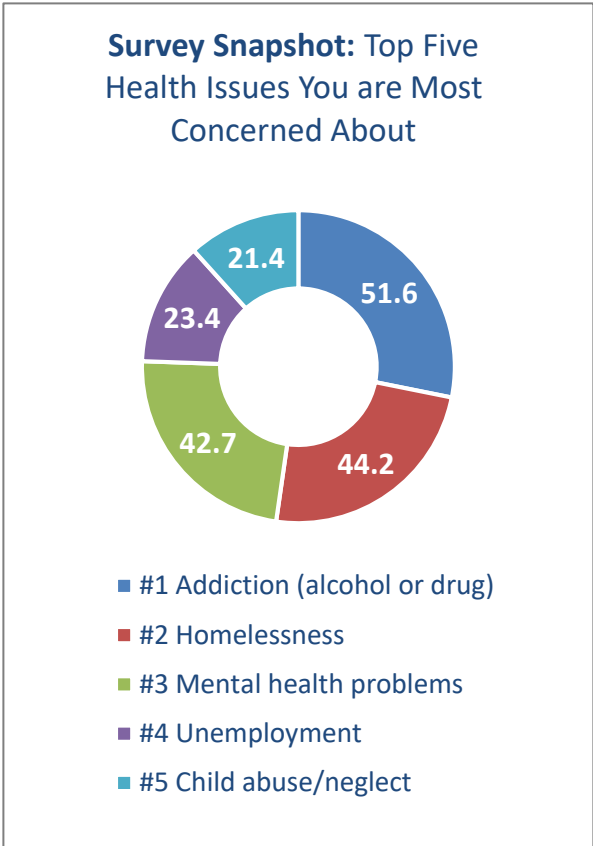
Learn more about the Community Health Needs Assessment and CHP for AdventHealth DeLand at <https://www.adventhealth.com/community-health-needs-assessments>.

# CHP PRIORITY 1

## Adult & Youth Behavioral Health

Behavioral health includes mental health as well as substance use disorders and other addictive behaviors. Currently, the percent of Volusia County adults who have had 14 or more poor mental health days in the last month is statistically significantly higher than the state average.<sup>1</sup> The Volusia County percent of adults limited by mental or emotional problems is higher than the state average.<sup>2</sup> The percentage of Volusia County adults with depressive disorder is higher than the state average and the suicide rate is increasing and higher than the state average.<sup>3</sup> Volusia County adult heavy/binge drinking has increased among white individuals. Alcohol suspected traffic crash deaths increased in Volusia County at a rate that is higher than the state of Florida. The earlier youth start using substances, the greater their chances of continuing to use substances and developing substance use problems later in life. The percent of student alcohol use is higher than the state average. Volusia County's rate of opioid-involved overdose hospitalizations increased and is higher than the state average. The rate of death from opioid overdoses increased in the last year and exceeds the Florida rate. The percent of Volusia County adults who smoke is significantly higher than the state average. Cigarette use among Volusia County middle and high school students is higher than that of Florida. The percent of Volusia County middle and high school students using marijuana is higher than that of Florida.

AdventHealth DeLand recognizes the important link between good mental health and good overall health. Fifty percent of all lifetime cases of mental illness begin by age 14 and 75% by age 24. Mental health disorders can disrupt school performance, harm relationships and lead to suicide (the third leading cause of death among adolescents).



<sup>1</sup> 2016 Florida Behavioral Risk Factor Surveillance System  
<sup>2</sup> 2016 Florida Behavioral Risk Factor Surveillance System  
<sup>3</sup> 2016 Florida Behavioral Risk Factor Surveillance System

Barriers such as not recognizing the symptoms early on, or fear of labeling and stigma regarding mental health disorders, inhibit some adolescents and families from seeking help. Addressing this issue will help community members enjoy good mental health, which is essential to overall health and personal well-being.

|                  |  |
|------------------|--|
| <b>Goal</b>      | <b>Establish a Healthy Equity Zone (HEZ)<sup>4</sup> in the Spring Hill neighborhood of DeLand to reduce health inequities and provide access to mental health and substance abuse services.</b>   |
| <b>Objective</b> | Work with community residents and community organizations to identify specific mental health and substance abuse service needs within the community through an engagement process by the end of year one.  |
| <b>Objective</b> | Work with community partners to increase access for 15% of HEZ neighborhood residents to obtain identified services (in home or in the neighborhood) by the end of year three.   |
| <b>Goal</b>      | <b>Establish a multi-agency referral and communication management system in Volusia/Flagler County to effectively connect individuals in need to behavioral health care services.</b>  |
| <b>Objective</b> | Support the development of a pilot project to connect health and behavioral health systems through utilization of a referral and communication management technology launched by the end of year two.  |
| <b>Goal</b>      | Provide special programs for at risk students in the DeLand area.  |
| <b>Objective</b> | Support before school club with a faculty sponsor to focus on providing youth opportunities for self-development, inspire youth to grow into healthy well-balanced adults. The before school club serves 30 at risk middle school young men annually at Southwest Middle School. |

## Hospital Contributions

- Allocate resources for a project manager to facilitate the development and implementation of the Health Equity Zone
- Assign AdventHealth Hospital C-Suite leader to participate on the Health Equity Zone Steering Committee
- Provide financial resources to support the development of a pilot multi-agency referral and communication management system in Volusia/Flagler County
- Provide financial support for targeted youth programming

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<sup>4</sup> See Appendix A

## Community Partners

- Health Equity Zone partners will include resident leaders, AdventHealth DeLand Foundation, Department of Health in Volusia County, City of DeLand, County of Volusia, Healthy Start of Flagler and Volusia Counties and Volusia County Schools
- The referral and communication management system will be launched by a collaborative of community organizations including hospitals and health care providers, county government, public schools and behavioral health care providers
- C.A.T.A.L.Y.S.T. Global Youth Initiatives

# CHP PRIORITY 2

## Cardiovascular Diseases & Diabetes

Cardiovascular diseases and diabetes is a priority because heart disease, stroke and diabetes are three of eight leading causes of death in Volusia County and account for more than 30% of all deaths. Volusia County’s hospitalization rate for coronary heart disease, congestive heart failure and stroke are higher than the state of Florida with the highest rate among the Black population. The death rate for coronary heart disease and heart failure in Volusia County are both higher than the state average. The death rate from diabetes has increased and Volusia County is higher than the state average with the rate highest among Black populations. The rate of preventable hospitalizations for adults under 65-years old from diabetes is increasing and is higher than the state average. The Years of Potential Life Lost rate for Volusia County increased and is higher than that of the state. Four health risk behaviors contribute significantly to the high risk of chronic diseases: lack of exercise or physical activity, poor nutrition, tobacco use and drinking too much alcohol. These health risks cause much of the illness and early deaths related to cardiovascular disease and diabetes. Addressing this issue in Volusia County will lengthen lives and improve quality of life.

| Leading Causes of Death |                                   | #     | %    |
|-------------------------|-----------------------------------|-------|------|
| 1                       | Heart disease                     | 1,734 | 23.3 |
| 2                       | Cancer                            | 1,560 | 21.0 |
| 3                       | Chronic lower respiratory disease | 554   | 7.4  |
| 4                       | Stroke                            | 457   | 6.1  |
| 5                       | Unintentional injury              | 377   | 5.1  |
| 6                       | Alzheimer's Disease               | 309   | 4.2  |
| 7                       | Diabetes                          | 240   | 3.2  |
| 8                       | Septicemia                        | 132   | 1.8  |

Source: Florida Health Charts

|                  |   |
|------------------|---|
| <b>Goal</b>      | <b>Establish a Healthy Equity Zone (HEZ) in the Spring Hill neighborhood of DeLand to reduce health inequities and provide health services to reduce cardiovascular diseases and diabetes.</b>    |
| <b>Objective</b> | Work with community residents and community organizations to screen 20% of identified HEZ residents for pre-diabetes/diabetes, high blood pressure and other risk factors for chronic conditions. |
| <b>Objective</b> | Promote AdventHealth DeLand diabetes education resources to HEZ residents and engage 50 residents in educational opportunities by the end of year one.  |
| <b>Goal</b>      | <b>Reduce the onset of diabetes among youth.</b>  |



**Objective** | Implement a diabetes education program for 75% of third graders in identified elementary schools during the 2020-2021 school year.

### **Hospital Contributions**

- Allocate resources for a project manager to facilitate the development and implementation of the Health Equity Zone
- Assign AdventHealth DeLand C-Suite leader to participate on the Health Equity Zone Steering Committee
- Assign staff to facilitate health screenings
- Provide a curriculum, materials and trainers for diabetes education program

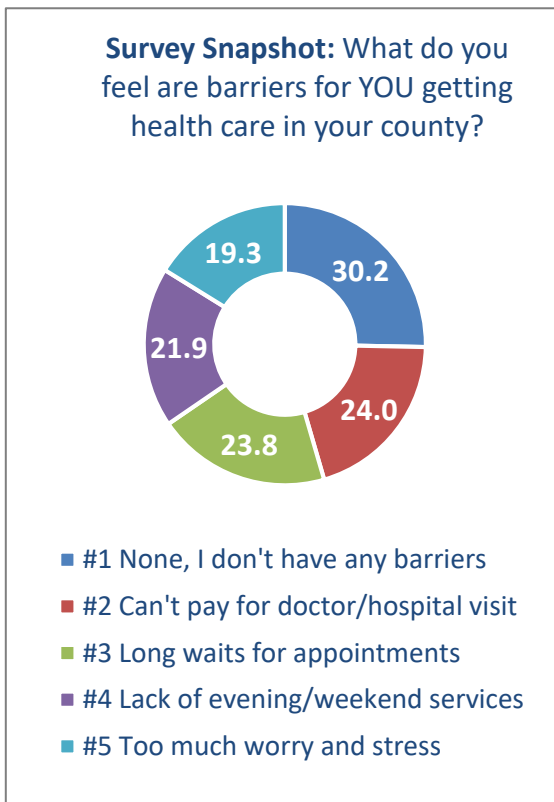
### **Community Partners**

- Health Equity Zone partners will include resident leaders, AdventHealth DeLand Foundation, Department of Health in Volusia County, City of DeLand, County of Volusia, Healthy Start of Flagler and Volusia Counties and Volusia County Schools
- Volusia County Schools

# CHP PRIORITY 3

## Barriers to Health Care Services

Barriers to accessing health care services include the lack of availability, high cost and lack of insurance coverage. This is a priority because Volusia County has a lower rate of primary care physicians, dentists and mental health providers to the population than the state average. The percent of Volusia County adults with a personal doctor is lower than the state average. Volusia County has a higher percentage of births covered by Medicaid compared to the state average. Within this population in Volusia County, rates for Black and Hispanic births covered by Medicaid are higher than other groups. Volusia County health resources per 100,000 population are lower than the state average in the categories of physicians, internists, OB/GYNs and pediatricians. In Volusia County there are barriers to access for individuals who: live in poverty; experience homelessness; are from certain racial/ethnic groups; who live in certain areas of the county; and those without health insurance. Increasing access to health care will impact Volusia County residents' ability to reach their full potential, positively affecting their quality of life and the overall well-being of the community.



|                  |  |
|------------------|--|
| <b>Goal</b>      | <b>Establish a Healthy Equity Zone in the Spring Hill neighborhood of DeLand to reduce health inequities and provide access to resident identified health and social services.</b>   |
| <b>Objective</b> | Work with at least 100 community residents and community organizations to identify three specific access barriers to health services by the end of year one.   |
| <b>Objective</b> | Work with partners to establish needed health services in the neighborhood or address barriers identified by community residents during the assessment process and provide service access to 25% of identified residents by the end of year three. |
| <b>Goal</b>      | <b>Increase the number of individuals who have access to necessary health care services.</b>   |

|                  |   |
|------------------|---|
| <b>Objective</b> | Expand operating hours to include evening and weekend hours at West Volusia Medical Associates to increase access to care.                        |
|                  | Increase the number of individuals participating in free Tools to Quit tobacco cessation programs by 10% over the number of participants in 2019. |
| <b>Goal</b>      | <b>Create new access to health screenings for at risk populations in the DeLand area.</b>   |
| <b>Objective</b> | Provide access to vision screenings for 75% of youth club members annually at the Lacey Family/ Spring Hill Boys & Girls Club.                    |

## Hospital Contributions

- Allocate resources for a project manager to facilitate the development and implementation of the Health Equity Zone
- Assign AdventHealth DeLand C-Suite leader to participate on the Health Equity Zone Steering Committee
- Assign staff and financial resources to establish a Whole Care Clinic
- Expand operating hours of West Volusia Medical Associates
- Partner with Northeast Florida Area Health Education Center (AHEC) to provide Tools to Quit programs
- Provide hospital staff to conduct youth vision screenings

## Community Partners

- Health Equity Zone partners will include resident leaders, AdventHealth DeLand Foundation, Department of Health in Volusia County, City of DeLand, County of Volusia, Healthy Start of Flagler and Volusia Counties and Volusia County Schools
- Good Samaritan Clinic

# CHP PRIORITY 4

## Healthy Eating & Physical Activity

Healthy eating and physical activity includes nutrition, activity and injury-related deaths. This is a priority because the percent of Volusia County adults who are sedentary has increased since 2007 and is higher than the state average. The percent of Volusia County adults who are obese has increased and is higher than the state average. The percent of Volusia County middle and high schoolers who are obese increased and is higher than the state average. More than 70% of Volusia County middle and high school students lack vigorous physical activity. Moreover, injury deaths are increasing and higher than the state average. The availability of healthy, affordable foods contributes to a person’s diet and risk of related chronic disease. According to the CDC, fewer than one in 10 children and adults eat the recommended daily amount of vegetables. Inactivity during childhood and adolescence increases the likelihood of being inactive as an adult. Adults who are less active are at greater risk of dying of heart disease and developing diabetes, colon cancer and high blood pressure. Half of American youth age 12-21 are not vigorously active on a regular basis and 14% of young people report no recent physical activity. Participation in all types of physical activity declines with both age and grade in school. Addressing this issue will help the community achieve and maintain a healthy weight, which is critical to overall health and is only achieved through a lifestyle that includes healthy eating and physical activity.

### Middle School and High School Students Without Sufficient Vigorous Physical Activity

| Students Without Sufficient Vigorous Physical Activity | Volusia 2014 | Volusia 2016 |
|--|--------------|--------------|
|  | Percent      | Percent      |
| Middle School Students                                 | 70.7         | 75.6         |
| High School Students                                   | 76.7         | 77.5         |

Source: Florida Department of Health, Florida Youth Tobacco Survey (FYTS)

**Goal** | Establish a Healthy Equity Zone in the Spring Hill neighborhood of DeLand to reduce health inequities and provide access to healthy foods and opportunities for physical activity.

**Objective** | Work with at least 100 community residents and five community organizations to ascertain current access to healthy foods and opportunities for physical activity through an assessment process. Identify gaps and missing resources by the end of year one.

|                  |   |
|------------------|---|
| <b>Objective</b> | Implement strategies to increase access to healthy foods and create new opportunities for physical activity, based on the gaps identified during the community assessment, for 30% of residents by the end of year three. |
| <b>Goal</b>      | <b>Increase physical activity and healthy eating among vulnerable residents.</b>  |
| <b>Objective</b> | Provide education about healthy eating and physical activity to 75% of Boys & Girls Clubs members four times annually.  |
| <b>Objective</b> | Provide annual \$4,000 financial support to Boys & Girls Clubs to provide daily fresh fruit and whole grain snacks to club members.   |

## Hospital Contributions

- Allocate resources for a project manager to facilitate the development and implementation of the Health Equity Zone
- Assign AdventHealth DeLand C-Suite leader to participate on the Health Equity Zone Steering Committee
- Explore the utilization of the AdventHealth bus to deliver fresh fruit and vegetables to the neighborhood
- Utilize staff to provide physical activity options such as organized walks, programming utilizing parks and recreation resources and other staff-led activities
- Provide financial support to Boys & Girls Club to provide healthy snacks
- Assign staff to implement education in the Boys & Girls Club and facilitate physical activities in the Health Equity Zone neighborhood

## Community Partners

- Health Equity Zone partners will include resident leaders, AdventHealth DeLand Foundation, Department of Health in Volusia County, City of DeLand, County of Volusia, Healthy Start of Flagler and Volusia Counties and Volusia County Schools

# CHP PRIORITY 5

## Social & Economic Issues

Healthy People 2020 highlights the importance of addressing the social determinants of health by including them in one of the four overarching goals for the decade. According to the National County Health Rankings, “Social and Economic Factors” account for more than 40% of what affects one’s health. As a result of this information AdventHealth DeLand has selected social and economic issues as a priority. Moreover, Volusia County’s median household income and per capita income is lower than the state average. The percent of Volusia County

individuals living in poverty is slightly higher than the state percent. More than 30% of Volusia County households spend more than 30% of their income on housing and workers in eight of the top 20 industries in Volusia County are estimated to be housing burdened based on average hourly wage. The number of individuals in Volusia County counted during the Point-in-Time count was higher in 2019 than 2018. Volusia County’s percent of single parent households is higher than the state average. The number of homeless students in Volusia County has been increasing since 2016. The percentage of elementary and middle school students eligible for free/reduced price lunches in Volusia County is higher than the state average.



Eligibility for free/reduced price lunches is a proxy measure for low income. Volusia County high school graduation rate is lower than the state average. The Volusia County high school graduation rate is lower than the state average.

**Goal** | Establish a Healthy Equity Zone in the Spring Hill neighborhood of DeLand to reduce health inequities and provide access to resident identified supports to improve the economic conditions of the neighborhood.

**Objective** | Work with community residents and community organizations to identify housing, employment and other financial stability barriers by the end of year one.

**Objective** | Work with community partners to develop a long-range plan to increase resident’s financial stability by the end of year three.

## **Hospital Contributions**

- Allocate resources for a project manager to facilitate the development and implementation of the Health Equity Zone
- Assign AdventHealth DeLand C-Suite leader to participate on the Health Equity Zone Steering Committee
- AdventHealth DeLand C-Suite leader will participate in Health Equity Zone long range planning

## **Community Partners**

- Health Equity Zone partners will include resident leaders, AdventHealth DeLand Foundation, Department of Health in Volusia County, City of DeLand, County of Volusia, Healthy Start of Flagler and Volusia Counties and Volusia County Schools

## **PRIORITIES THAT WILL NOT BE ADDRESSED**

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

### **1. 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. In order to avoid duplicating efforts, our Hospital opted not to address this issue.

### **2. Child and Adolescent Issues**

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

### **3. Communicable and Infectious Diseases**

- The data collected did not demonstrate significant negative trends or comparison data. Many issues noted in the indicators of concern will be addressed through the prioritization of access to health care services.

### **4. Crime, Domestic Violence and Child Abuse**

- The data collected did not demonstrate significant negative trends or a negative comparison to state data. Many issues noted in the indicators of concern will be addressed through the prioritization of social and economic issues.

### **5. Early Childhood**

- There are significant efforts already in place to address this target population. In order to avoid duplicating efforts, our Hospital opted not to address this issue.

### **6. 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. In order to avoid duplicating efforts, our Hospital opted not to address this issue.



# APPENDIX A: Spring Hill Health Equity Zone

**Health Equity Zones** involve an innovative, place-based approach that brings communities together to build the infrastructure needed to achieve healthy, systemic changes at the local level. Health Equity Zones are geographic areas where existing opportunities emerge and investments are made to address differences in health outcomes. Through a collaborative, community-led process, each Health Equity Zone conducts a needs assessment and implements a data-driven plan of action to address the unique social, economic and environmental factors that are preventing people from being as healthy as possible. *From Health.ri.gov*

## Proposed Spring Hill Equity Zone Steering Committee

- Spring Hill Community Redevelopment Agency designee
- Spring Hill Resource Center Administrator, Shilretha Dixon
- Resident Initiative Council designee
- City of DeLand designee
- County of Volusia designee
- DeLand Police department designee
- AdventHealth DeLand C-Suite Leader designee
- AdventHealth Community Care designee
- AdventHealth Deland Foundation
- Healthy Start of Flagler and Volusia Counties
- Early Learning Coalition of Flagler and Volusia Counties
- Lacey Family/ Spring Hill Boys & Girls Club designee
- Family Health Source
- State House of Representative District 26 Elizabeth Fetterhoff
- Department of Health in Volusia County, Patricia Boswell, Administrator
- Good Samaritan Clinic (free clinic) designee
- Stetson University designee
- DeLand Housing Authority designee
- Neighborhood Center, Susan Clark, Executive Director
- The House Next Door, Jen Nadelkov, CEO
- Joyce Cusack, Volusia County Children and Families Advisory Board
- African American Museum of Art designee
- Other neighborhood resident leaders
- Leaders from business in or near the neighborhood
- Leaders from houses of faith in or near the neighborhood
- *Project Manager (project facilitation, communication, outreach, data collection, fundraising and grant writing)*

# APPENDIX B: Referral and Communication Management System

## THE APPROACH

Referrals are limited in scope. Referrals are only made

Implement a referral and communication engagement system, using a web-based technology platform that complies with all privacy, confidentiality and security protocols, to automate the referral process and facilitate interagency communication and care coordination. The framework shall be compliant with the Health Insurance Portability and Accountability Act (HIPAA), the Children's Online Privacy Protection Act (COPPA), the Family Educational Rights and Privacy Act (FERPA), and other critical national privacy requirements for Personally Identifiable Information (PII). The system will be encrypted and secured to best industry standards, allowing for secure submission and communication for all referrals.

## PROBLEM TO ADDRESS

Service providers often connect individuals, including their own customers, to other agencies that provide services outside of their scope of services. This is most often done in two ways:

1. Customer is given information about other services and the customer is responsible for accessing those services
2. The agency completes a referral (often a paper form that is emailed or faxed to the agency) to make a referral for services

With either process, the customer is left to navigate through a complicated system in order to receive the services they need. Often times their failure to connect with critical services creates a crisis situation resulting in the need for more costly interventions.

These current referral practices have many limitations:

- Referral resolution is unknown. In most cases, there is no intentional follow-up made on referrals. Organizations that make referrals don't know if individuals are able to successfully access services.
- Referrals are unidirectional and there is very little care coordination. Communication and coordination between service agencies is not common or easy. When more than one service agency is concurrently serving the same customer, all agencies may not know about each other and they rarely communicate or collaborate. Agency policies regarding confidentiality, release of information practices, and protocols for sharing client information via email are often in conflict. Communication via email or phone rarely becomes part of the customer's case record. None of the typical options for communication are real time, nor are the case records typically kept up to date in real time.
- Referral networks are incomplete and informal. The types of referrals made are limited by each person's knowledge of available services. These referrals are also often limited to the referrer's knowledge of the other agency's personnel, preferring a direct connection.
- Referrals are limited in scope. Referrals are only made for services that are identified by the customer or the service provider as a need without a formal needs' assessment or screening process prior to the referral completion.