2023-2025
AdventHealth Redmond Community Health Plan
# Table of Contents

- Executive Summary ................................................................. 3
- About AdventHealth ................................................................. 7
- Priorities Addressed ................................................................. 9
  - Mental Health ........................................................................ 10
  - Heart Disease ......................................................................... 12
  - Cancer .................................................................................. 14
- Priorities Not Addressed ......................................................... 15

---

**Acknowledgements**

This community health plan was prepared by Rika Meyer, Marketing and Communications Manager, and Denise Rustad, Community Wellness Coordinator with contributions from members of AdventHealth Redmond’s Community Health Needs Assessment Committee and Hospital Health Needs Assessment Committee both representing health leaders in the community and hospital 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.
Executive Summary
Redmond Park Hospital, LLC. d/b/a AdventHealth Redmond will be referred to in this document as AdventHealth Redmond or the “Hospital”.

Community Health Needs Assessment Process
AdventHealth Redmond in Rome, Georgia conducted a community health needs assessment in 2023. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. This assessment process was comprehensive and included survey questions related to diversity, equity and inclusion. In addition, the priorities were defined, when possible, in alignment with Healthy People 2030, national public health priorities to improve health and well-being.

In order to ensure broad community input, AdventHealth Redmond 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 prioritization process sought to balance our ability to impact the greatest number of people who are facing the greatest disparities.

AdventHealth Redmond also convened a Hospital Health Needs Assessment Committee (HHNAC) to help select the needs the Hospital could most effectively address to support the community. The HHNAC made decisions by reviewing the priorities selected by the CHNAC and the internal Hospital resources available.

The CHNAC and HHNAC met throughout 2022-2023. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan to address those priorities. Learn more about Healthy People 2030 at https://health.gov/healthypeople.

Community Health Plan Process
The Community Health Plan (CHP), or implementation strategy, is the Hospital’s action plan to address the priorities identified from the CHNA. The plan was developed by the CHNAC, HHNAC and input received from stakeholders across sectors including public health, faith-based, business and individuals directly impacted.

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

The identified goals and objectives were carefully crafted, considering evidence-based interventions and AdventHealth’s Diversity, Equity, and Inclusion and Faith Accountability strategies. AdventHealth Redmond is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to all we serve.
Executive Summary

Priorities Addressed
The priorities addressed include:
1. Mental Health
2. Heart Disease
3. Cancer

See page 10 for goals, objectives and next steps for each priority selected to be addressed.

Priorities Not Addressed
The priorities not addressed include:
1. Asthma
2. Neighborhood & Build Environment: Food Security
3. Diabetes
4. Drug Misuse
5. Tobacco Use
6. Education Access & Quality
7. Economic Stability
8. Health Care Access & Quality

See page 15 for an explanation of why the Hospital is not addressing these issues.

The Community Health Plan is a three-year strategic plan and may be updated during implementation based on changing community needs or availability of resources. AdventHealth recognizes community health is not static and high priority needs can arise or existing needs can become less pressing. The Hospital may pivot and refocus efforts and resources to best serve the community.
Executive Summary

Board Approval
On August 17, 2023, the AdventHealth Redmond Board approved the Community Health Plan goals, objectives and next steps. A link to the 2023 Community Health Plan was posted on the Hospital's website prior to May 15, 2024.

Ongoing Evaluation
AdventHealth Redmond’s fiscal year is January – December. For 2023, the Community Health Plan will be deployed beginning August 17, 2023, and evaluated at the end of the calendar year. In 2024 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital’s IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

For More Information
Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Redmond at https://www.adventhealth.com/community-health-needs-assessments.
ABOUT
ADVENTHEALTH
About AdventHealth

AdventHealth Redmond is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth strives to heal and restore the body, mind and spirit through our connected system of care. More than 80,000 skilled and compassionate caregivers serve 4.7 million patients annually. From physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, wholistic care at nearly 50 hospital campuses and hundreds of care sites throughout nine states.

Committed to your care today and tomorrow, AdventHealth is investing in research, new technologies and the people behind them to redefine medicine and create healthier communities.

About AdventHealth Redmond

AdventHealth Redmond is a 230-bed medical, surgical and rehab facility serving Rome, Floyd County and surrounding counties. Built in 1972, the hospital has expanded and evolved over the following decades to become a flagship health care institution in Northwest Georgia and Northeast Alabama. AdventHealth Redmond opened the region’s first diagnostic cardiac catheterization lab in 1975, and doctors performed the region’s first open-heart surgery in 1986. Since 2016, its Structural Heart Program has overseen over 400 transcatheter aortic valve replacement procedures and now offers MitraClip. Today, the hospital offers minimally invasive robotic-assisted surgery. Serving as the heart hospital for Northwest Georgia, AdventHealth Redmond offers cardiac services and is the only dedicated chest pain center in the region. AdventHealth Redmond was named as one of the nation’s 50 top performing cardiovascular hospitals, top teaching hospital and top 100 hospitals by Fortune/Merative. AdventHealth Redmond offers many services including emergency care, cancer care, orthopedics, vascular care, surgical care, women’s care and inpatient and outpatient rehabilitation services. Some of the surgeries the hospital offers includes coronary artery bypass surgery, heart attack care, knee surgery, total and partial hip joint replacement, metabolic and bariatric surgery and hip fracture surgery.
PRIORITIES
ADDRESSED
Mental Health

In the Hospital’s community, 22.3% of residents have a prevalence of depression, while 19% of the residents report poor mental health. According to community survey respondents 20.7% have been diagnosed with a depressive order and more than 23.1% have been diagnosed with an anxiety disorder. Awareness and the need to address mental health disorders has been growing in the country.

**Goal 1:** To bring awareness to the growing mental health issues in Floyd County and provide resources to aid in improving mental health conditions among people of all ages.

**Objective 1.1:** Host monthly mental health support groups for those suffering with breast cancer.

**Objective 1.2:** Host monthly mental health support groups for persons with general cancer diagnosis.

**Target Population:** Adults and youth living in Floyd County.

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
<th>Hospital Contributions</th>
<th>Community Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Host Bosom Buddies, a breast cancer support group</td>
<td>Occurs monthly reaching an average of 12-15 people per meeting</td>
<td>Host support group at Hospital Led by cancer specialist/counselors</td>
<td>Northwest GA Cancer Coalition to share flyers of monthly group meetings</td>
<td>X</td>
</tr>
<tr>
<td>Host Cancer Support Group</td>
<td>Occurs monthly reaching an average 12 people per meeting</td>
<td>Host support group at Hospital Led by cancer specialist/counselors</td>
<td>Northwest GA Cancer Coalition to share flyers of monthly group meetings</td>
<td>X</td>
</tr>
</tbody>
</table>
Mental Health

Goal 1 continued: To bring awareness to the growing mental health issues in Floyd County and provide resources to aid in improving mental health conditions among people of all ages.

Objective 1.3: In year two, launch Mental Health First Aid (MHFA) training for educators, clergy, and other community members. Once a baseline is established in year two, train 40 individuals by year three.

Objective 1.4: By year three, identify a mental health agency and establish a partnership to fund and support community-based mental health programming.

Target Population: Adults and youth living in Floyd County.

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
<th>Hospital Contributions</th>
<th>Community Partnerships</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health First Aid (MHFA) training for teachers, clergy, volunteers and other community partners</td>
<td>40 participants</td>
<td>Hospital is sponsoring the cost of this initiative and hosting the training</td>
<td>Georgia State University, Center of Excellence for Children’s Behavioral Health</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Continue to fund one staff person from Willow Brook (psychiatric center) to provide mobile assessment services (triage patients in crisis) at ER</td>
<td>One-staff person</td>
<td>Fund and host one 24-hour staff from Willow Brook (psychiatric center) in Hospital ER to assess immediate mental health needs of walk-in patients</td>
<td>Willow Brook, at Tanner Medical Center Inc.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify mental health agencies in the community and understand what community-based programming is conducted</td>
<td>Establish a partnership</td>
<td>Hospital to provide funding for community-based mental health programming</td>
<td></td>
</tr>
</tbody>
</table>

Timeline:
- Y1
- Y2
- Y3
Heart Disease

According to secondary data, individuals in the Hospital’s community have higher rates of coronary heart disease and of heart disease mortality per 100,000 than elsewhere in Georgia and the nation. Almost 13.5% of community survey respondents report having coronary heart disease. Also, 34% of individuals living in the community have been told they have high cholesterol which can be a contributing factor to heart disease as well. There are several heart disease and heart related health indicators where the community is faring more poorly than others in the state and the nation.

**Goal 1:** Increase the number of individuals receiving preventative education and screenings for heart disease.

**Objective 1.1:** By year three, provide 400 heart disease screenings (including blood pressure checks and calcium screenings) to low-income adults in Floyd County.

**Target Population:** Low-Income residents of Floyd County.

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
<th>Hospital Contributions</th>
<th>Community Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood pressure and health screenings at community events (Kellogg’s Snack Division, Health Initiative Men &amp; Women, Public Health Dept. event)</td>
<td>100 screenings</td>
<td>Cardiac education table with blood pressure checks</td>
<td>EMS</td>
<td>X X X</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Comprehensive health screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Staff to provide blood pressure checks, body fat/BMI, cholesterol, heart failure education, Hands Only CPR training, and labs to test Prostate-Specific Antigen levels</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Heart Disease

**Goal 1 continued:** Increase the number of individuals receiving preventative education and screenings for heart disease.

**Objective 1.2:** By year three, educate 1,200 residents in Floyd County of all ages about heart disease prevention through health education programming and free information.

**Target Population:** Low-Income residents of Floyd County.

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
<th>Hospital Contributions</th>
<th>Community Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Offer CREATION Life principles seminars which teach healthy lifestyle choices to reduce risk of heart disease and increase longevity</strong></td>
<td>Average 6-15 attendees per session for 8 sessions</td>
<td>AdventHealth Sports and Rehab Facility facilitates CREATION Life principles seminars</td>
<td></td>
<td>X  X  X</td>
</tr>
<tr>
<td><strong>Heart Disease Lecture</strong></td>
<td>25 participants</td>
<td>Dr. Julie Barnes, Chief Medical Officer will facilitate lecture</td>
<td>YMCA</td>
<td>X  X</td>
</tr>
<tr>
<td><strong>Public educational campaign on heart disease prevention (February Heart Month)</strong></td>
<td>Social media campaign, radio interviews, videos and newspaper stories emphasizing heart disease prevention</td>
<td>Marketing Team will create and share resources to promote screening events and educational resources</td>
<td>Local churches, community centers, senior centers, YMCA</td>
<td>X  X  X</td>
</tr>
<tr>
<td><strong>Participate in Strike out Stroke at Rome Braves Stadium</strong></td>
<td>150 attendees 500 people engaged</td>
<td>Hospital team members distribute stroke prevention materials at event and make announcements about Stroke Month and early recognition</td>
<td>Rome Braves</td>
<td>X  X</td>
</tr>
<tr>
<td><strong>Participate in Heart of the Community’s Heart Walk which brings awareness to heart risks and concerns and Art from the HeArt</strong></td>
<td>300 attendees</td>
<td>Hospital team members participate in community walk and provide basic heart screenings and cardiac education. Local artists create heart-inspired art pieces for display</td>
<td>Rome Area Council for the Arts (RACA)</td>
<td>X  X</td>
</tr>
</tbody>
</table>
In the Hospital’s community 6.86% of the residents have had cancer according to secondary data which is higher than the state rate of 6.16%. All counties except Floyd have new cancer diagnosis rates slightly higher than the state average. According to the community survey, 17% of residents had been diagnosed with cancer.

**Goal 1:** Educate Floyd County community members about cancer care and prevention.

**Objective 1.1:** Provide free screenings for colon cancer for early detection to 40 community members.

**Objective 1.2:** By year three, increase cancer awareness for Floyd residents through 10 education events and prevention campaigns.

**Objective 1.3:** By year three, provide support for 100 cancer patients and caretakers through food distributions.

**Target Population:** Low income and/or non-English speakers in Floyd County, men and women over 40 years of age.

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
<th>Hospital Contributions</th>
<th>Community Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide colorectal screenings and provide kits to community members</td>
<td>40 community members</td>
<td>Host, staff, and promote the event</td>
<td>Public Health and Northwest GA Cancer Coalition</td>
<td>Y1 Y2 X</td>
</tr>
<tr>
<td>Increase cancer awareness through educational events (Skin Cancer Awareness Event, Pink Out, Kellogg’s Health Fair, Health Initiative Men and Women) and campaigns (Pink Porch Breast Cancer)</td>
<td>Participate or host 10 events and campaigns Distribute educational materials at events and health fairs with reminders to check for signs of cancer (English and Spanish) One story-telling campaign (Pink Porch Breast Cancer)</td>
<td>Marketing, Breast Center team, Mammogram team, Oncology Rehab Services Hospital team members volunteer at community events providing screenings (blood pressure, cancer, heart health) as well as information on cancer prevention and early detection</td>
<td>Local schools, media, Chamber of Commerce, area businesses, Rome Braves, EMS, Northwest GA Cancer Coalition, 100 Black Men of Rome-Northwest GA</td>
<td>X X X</td>
</tr>
<tr>
<td>Provide food to families affected by cancer</td>
<td>Serve 100 families of cancer patients with healthy food boxes. (Patients identified by cancer services and Summit Quest)</td>
<td>Financial assistance of food boxes, organization and volunteers for distribution event</td>
<td>Summit Quest, Northwest GA Cancer Coalition, UGA Extension, Helping Hands Ending Hunger</td>
<td>X X</td>
</tr>
</tbody>
</table>
PRIORITIES NOT ADDRESSED
Priorities Not Addressed

AdventHealth Redmond also identified the following priorities during the CHNA process. In reviewing the CHNA data, available resources, and ability to impact the specific identified health need, the Hospital determined these priorities will not be addressed.

Neighborhood & Build Environment: Food Security
Approximately 16.7% of the residents in the Hospital’s community are food insecure according to Feeding America and 45% live in a low food access area. According to community survey respondents, 13.75% received SNAP benefits last year, while 42% felt they ate less than they should have due to cost. The Hospital believes that other organizations are better positioned in the community to address this need directly and will support those efforts when able.

Asthma
According to secondary data, asthma impacts almost 10% of residents. Community survey data included a higher rate of 36% residents diagnosed with asthma. While survey respondents reported a higher rate of asthma than secondary data, the priority was not selected as an overall focus area based on potential to impact and resources available.

Diabetes
Diabetes is shown to impact 12.4% of residents in the Hospital’s community according to public data, while 23.3% of community survey respondents report having diabetes. Stakeholders also identified diabetes as a top health condition. The Hospital did not select diabetes as a priority, as it is not positioned to directly address this in the community at large.

Drug Misuse
All counties except Gordon are above the State average for drug overdose mortality. Of community survey respondents, 38.2% reported taking prescription medication for non-medical reasons. The rate was found to be 49% for minority groups. The Hospital believes that other organizations are better positioned in the community to address this need directly and will support those efforts when able.
Priorities Not Addressed

**Tobacco Use**
According to secondary data, 22% of residents currently smoke cigarettes which is higher than the state average of 17%. Community survey respondents shared higher rates of smoking with 62% overall, and 73% of Hispanic residents. The Hospital did not select tobacco use as a priority as it is not resourced to directly address this in the community but will support other community partners where possible in their efforts.

**Education Access & Quality**
According to secondary data, pre-school enrollment, high school graduation rates and higher degree graduation rates are all lower than the state averages. The high school graduation rate is in the bottom quartile for the nation. Community survey respondents identified education access and quality as an important issue, along with stakeholders. While the importance of education was recognized, prioritization results confirmed the need to prioritize other issues.

**Economic Stability**
The Redmond PSA and all counties within are worse than the state average for health insurance coverage, as well as mental health providers per capital. While insurance coverage and sufficient providers are important issues, the Hospital did not feel resourced to directly address this issue.

**Health Care Access and Quality**
The Redmond PSA and all counties within are worse than the state average for income, poverty rate, and evictions. The eviction rate and low-income jobs lost due to COVID were amongst the top 5 nationally. While economic stability is an important issue and integral to health, the Hospital did not select this priority as it is not resourced to directly address this issue.
Redmond Park Hospital, LLC d/b/a AdventHealth Redmond

CHP Approved by the Hospital Board on: August 17, 2023

For questions or comments please contact:
corp.communitybenefit@adventhealth.com