COMMUNITY HEALTH NEEDS ASSESSMENT

Final Report-2013





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Introduction:

Florida Hospital Wesley Chapel, an Adventist Health System hospital, is a brand new hospital (opened October 2012) that primarily serves eastern Pasco and northeastern Hillsborough Counties (including Wesley Chapel, New Tampa (northeast Tampa), Land O'Lakes and portions of San Antonio, Lutz and Zephyrhills). The hospital is located in between two Adventist Health System facilities (Florida Hospital Tampa- 15 miles, Florida Hospital Zephyrhills- 16 miles) in a suburb just north of Tampa. The largest hospital system in the Tampa Bay Market is Baycare, a Catholic health system. There are two Baycare hospitals near Florida Hospital Wesley Chapel (St. Joseph's Hospital (also has a children's hospital and a women's hospital) and St. Joseph's North (a community hospital that opened two years before FHWC).

For years, Wesley Chapel was a bedroom community with the majority of the population commuting to Tampa or other cities for work. Even today, the average commute for residents of Wesley Chapel is 33 minutes. Over the last few years, more businesses have come into the community including a major mall, the Shops at Wiregrass, which opened in 2008. The Shops at Wiregrass is a main-street style, pedestrian-friendly, outdoor lifestyle village that encompasses 800,000 square feet of retail, restaurants and entertainment on 67 acres of land.

In October 2012, a new inpatient/outpatient mental health facility opened in Wesley Chapel. In January, the new Pasco Hernando Community College-Porter Campus will open. Raymond James Financial has purchased land to build a 1 million sq ft. office building the county is building the Fields at Wiregrass, a multi-use field facility for sports and tournaments. All of this development is within a 5 sq. mile radius of the hospital.

The opening of the hospital has also stimulated the opening of new restaurants, physician offices and other businesses who want to serve the hospital's staff, patients and visitors.

Executive Summary:

Pasco County, FL has a population of 470,397 and a land mass of 747 square miles (according to the US Census Bureau, 2012). It is located in West Central Florida directly north of Hillsborough County (main city: Tampa) and Pinellas (main city St. Petersburg) counties. The land, demographics and industries across the county are quite varied. For a breakdown of population by age and demographics, see attachment.



Wesley Chapel (consists of 3 zip codes around the hospital) is a young, active community with a higher income and education level than Tampa. 82% of the population is 54 or younger (59% are under 40). The portion of Land O'Lakes (zip 34639) in the hospital PSA also follows these demographics. However, two of the zip codes in the hospital PSA are very different. Zephyrhills zip code 33541 is primarily an older community with many retirees and a heavy population of snow birds who reside here only in the winter. San Antonio (33576) is a rural community with a lot of farm land. This area has a few large communities and a Catholic University. Both Zephyrhills and San Antonio have older populations, lower household incomes and a lower employment rate. The 33541 zip code also falls in the PSA of FH Zephyrhills.

As the hospital is new, there is limited data for patients served. In order to get a thorough picture of the needs of the community, a community health survey and focus group were conducted. Data was analyzed along with secondary data and inpatient data.

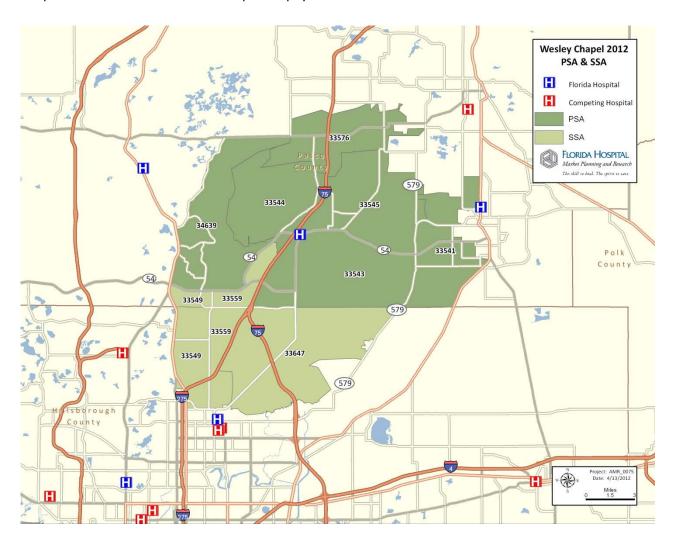
The Community Health Needs Assessment (CHNA) took place in spring and summer of 2013. Because we serve only portions of the county, secondary data was gathered from sources where information could be identified at the zip code level. This included information from Healthy Tampa Bay (http://www.healthytampabay.com/) and 2010 US Census data. A survey was conducted to get community input with 272 responses received. A focus group was held with key community groups (particularly those representing underserved populations) to ensure representation across socio-economic groups. The Pasco Health Department was involved on our Community Health Needs Assessment committee along with representatives of our federally qualified health center and Healthy Start.

The results were reviewed by both the Hospital Health Needs Assessment Committee and the Community Health Needs Assessment Committee and the Board of Directors. Each group also had a discussion about the recommended focus areas for the hospital.

Hospital description: Florida Hospital Wesley Chapel is a new hospital, wholly owned by Adventist Health System, which opened in October 2012. The hospital was originally planned as a partnership between AHS and University Community Hospital (UCH) until Adventist Health System acquired the UCH system and re-branded the UCH owned hospitals in the market as Florida Hospitals in September 2011. The 200,000 sq. ft. Wesley Chapel hospital opened with 83 inpatient beds (all private rooms) on a 52 acre campus as a full service, community hospital after 22 months of construction. The hospital opened with state-of-the –art technology much of it first in the area including a patient education/entertainment system that is tied in with real time location services that tracks hourly rounding and hand sanitation, among other things. The hospital achieved Primary Stroke Certification within two months of opening.

Soon after, the hospital opened a 50,000 sq. ft. health and wellness center featuring 4 group fitness studios, state-of-the-art TechnoGym fitness equipment (tied in with member SmartKeys allowing for personalized goal creation and tracking), an aquatics center and a kids club. The center, which is open to the community for membership, partners with the hospital to offer health and wellness education programs for members and non-members. As of August 2013, the center has 4000 members. In March 2013, the a hospital opened a Center for Women's Health, Outpatient Rehabilitation and physician office space in the medical office building housing the Health & Wellness Center, known as Wellness Plaza.

Choosing the community: Explain how you defined the boundaries of your community. Was it based on primary service area or chosen another way? Florida Hospital Wesley Chapel's primary service area (PSA) was chosen to represent the community served by the hospital (as shown below on the map in dark green). This covers the following zip codes: 33541, 33543, 33544, 33545, 33576, 34639). This covers Wesley Chapel, Land O'Lakes, San Antonio and the western part of Zephyrhills in Pasco County and portions of Lutz and northeast Tampa in Hillsborough County. The hospital's secondary service areas are also served by Florida Hospital Tampa, Florida Hospital Carrollwood and Florida Hospital Zephyrhills.



Defined community: Provide a geographic description of the community. Give a demographic description of the community: income, education, race/ethnicity, age, gender, etc. If the primary service area is very diverse or has distinct population pockets, describe each one. Use maps and charts as appropriate.

The area closest to the hospital consists of 3 zip codes designated as Wesley Chapel and 1 zip in Land O'Lakes are young, active communities with higher income and education levels than Tampa and surrounding areas. In Wesley Chapel, 82% of the population is 54 or younger (59% are under 40), 75% are white, 11% are black, 6% Asian, 4% report two more races and 4% other. Eighteen percent of the community is Hispanic. The mean household income is \$80,000. Seventy-three percent of the population above 16 is employed.

The portion of Land O'Lakes (zip 34639) in the hospital PSA has similar demographics. The majority of the population above 16 works 70%. 78% of the population is 54 or younger (52% are under 40), 87% are white, 5% are black, 3 % report two more races and 5% other. Sixteen (16) percent of the community is Hispanic. The mean household income is \$77,000 per year.

The community has long been a bedroom community with the majority of working folks commuting to Tampa, Brandon, St. Petersburg and other surrounding areas. The average commute is 30 minutes. With the addition of the Shops at Wiregrass five years ago, new physician offices, the hospital and new development projects in process (Pasco Hernando Community College, Raymond James Financial (1 million sq. ft. of office space) and the Fields at Wiregrass (multi use sport fields for tournaments and local sports), this is changing somewhat but the average commute (as of 2010 Census Data) was still 30 minutes.

The hospital is one of the largest employers in the community along with a high end resort, Saddlebrook Resort which features owned homes and villas as well as resort hotel rooms and amenities. The campus also has an elite private school featuring a tennis and golf academy.



In contract, two of the zip codes in the hospital PSA are very different. Zephyrhills zip code 33541 is primarily an older community with many retirees and a heavy population of snow birds who reside here only in the winter. The 33541 zip code also falls in the PSA of FH Zephyrhills. San Antonio (33576) is a rural community with a lot of farm land. This area has a few large housing communities and a Catholic university. Both Zephyrhills and San Antonio have older populations, lower household incomes and a lower employment rate than Wesley Chapel.

In Zephyrhills, the median age is 59.2. 93% of residents are white with 2% black and 3% other. Less than 1% of the population in Hispanic. The mean income is \$45,000 per year.

In San Antonio, the median age is 59.4. 95% of residents are white with 4% black and 3% other/multiple races. Eight (8) percent of the population in Hispanic. The mean income is \$57,000 per year.

The population in the combined primary service area is expected to grow +16.2% between 2012 and 2017. The Hispanic Population is expected to grow +41.7% from 2012 to 2017 in the Primary Service Area. Medicaid is expected to grow at the fastest rate (55.5%) as means of insurance between 2012 and 2017 within the PSA and the Uninsured population is expected to decline from 10.4% to 4.2% during the same period.

Stakeholder Input Process:

To get input from the community at large, we conducted a survey (available online or printed). We also brought together the hospital social worker and representatives from Premier Community Health Group, a federally qualified health center, (including the CEO and CMO), Pasco County Healthy Start Coalition and the Pasco County Health Department. We chose these groups because of their knowledge of health needs in the community, particularly those who are underserved and/or might be underrepresented in our community survey.

Hospital Health Needs Assessment Committee (HHNAC):

Brian Adams	CEO and board member
Mike Lukens	CFO
Mary Brady	CNO
Joyce Nelson	AVP HR and Wellness
Tracy Clouser	Director of Marketing

Community Health Needs Assessment Committee (CHNAC):

CEO and board member
CFO
CNO
AVP HR and Wellness
Director of Marketing
Social Worker
CEO, Premier Community Health Group
Pasco Co. Public Health Dept.
Director, Health and Wellness Center
Pasco County Public School District

The data and focus areas were reviewed with the Board of Directors and the Medical Executive Committee of the hospital with an opportunity for discussion and feedback.

Board of Directors

Andre Landreville, MD	Retired physician
Brian Adams	Florida Hospital Wesley Chapel
Brian Phillpotts, MD	St. Luke's Cataract and Laser Institute
Fred Edmister	National Realty Commercial
Joe Johnson	Florida Hospital Carrollwood
Michael Mewhirter	Florida Hospital North Pinellas
Michael Schultz – Chairman	Florida Division of Adventist Health Systen
Norm Stein	retired hospital CEO
Roberta Cove	Sunshine Radiology
Ted Cardoso, MD	Sunshine Radiology
Todd Johnson	Strategic Business Associates

Medical Executive Committee

Chief of Staff Ted Cardoso, MD Sunshine Radiology

Vice-Chief of Staff Santo Paniello, MD Florida Medical Clinic

Chief of Surgery Bertram Lewis, MD Medical Group of Tampa Bay

Chief of Medicine Secretary/Treasurer

Martin Britos-Bray, MD Michael Longley, MD

Pulmonary & Sleep of Tampa Bay Tampa Bay Emergency Physicians

Member-At Large

Muhammad Nawaz, MD

Public Health: How was Public Health represented in the Needs Assessment process?

The public health department participated in our focus group and shared the survey with their constituents. They were included in the CHNAC and were also part of a group of providers with whom we reviewed the survey results and secondary data along with our recommendations for focus areas.

Data Sources: List each of the data sources used.

Healthy People 2020 US Census Data. Florida 2009 BRFSS report Healthy Tampa Bay



Hospital Data: Inpatient and ER Discharge Data

Data Collection & Analysis:

The collection of data took place during the spring and summer of 2013. Secondary and primary data were collected during this time period. Primary Data was collected through a focus group and a survey. The focus group was held on June 5, 2013 and included the hospital social worker and representatives from Premier Community Health Group (including the CEO and CMO), Healthy Start Coalition and the Pasco County Health Department.

A community survey was posted online and emailed to a community email list of 2,800 people. It was also printed and distributed through the groups in our focus group. The survey was live from May 30th to June 17th. We received 272 responses.

Asset Inventory: Summarize the Asset Inventory you conducted, listing hospital and community activities currently related to the priorities you identified in your Asset Inventory.

Healthy Happenings, a series of physician and expert lectures on a variety of health and wellness topics. This series launched in July utilizing the initial feedback received from our data collection.

Data Summary: List the Top 10 issues identified in the data process (use aggregated Top 10 from Preliminary Data Findings 3.2). Explain any significant challenges you addressed in coming to these Top 10 issues. Include charts, maps, etc. as appropriate.

The following six health issues were identified across all data collection points and community input.

- Obesity
- Diabetes



- COPD
- **Heart Disease**
- Pneumonia

Asthma

The largest challenge was data sources. Since we serve a limited geographic area, we were limited to data sources that could provide zip code level (and not county wide data). Additionally, the hospital had only been open for five months when the initial data was pulled on inpatient and ER discharges. Also, the providers who serve underserved



Priority Selection: What were the Top 4-5 issues that you chose as priorities? Explain how you chose your priorities (reference the AHS Priority Selection Report [PSR] template. Discuss any significant challenges you faced in defining the Top 10 issues.

The issues we chose as priorities were chosen because they appeared across multiple data sets. The major challenges related to data as discussed above in the Data Summary section.

Next Steps: How will you address these Priorities in your Community Health Plan (CHP)? What are your next steps?

With the CHNAC, we are reviewing 3-5 ideas for consideration. se ideas were shared with our board of directors at a strategic planning retreat for feedback and discussion. The next step is to follow develop the ideas presented and create the implementation plan.

Attachments	
Attachment 1	Community Health Needs Assessment Survey
Attachment 2	Community Health Needs Assessment Focus Group Discussion Guide
Attachment 3	Community Health Needs Survey Results
Attachment 4	Primary Data Collection Log
Attachment 5	Asset Inventory
Attachment 6	Priority Selection Report
Attachment 7	Final Priorities
Attachment 8	Demographic Data

Community Health Survey

Wesley Chapel, Land O'Lakes, New Tampa

- 1. How could you rate our community's overall <u>health status</u>? Choose one: excellent, good, fair, poor or very poor.
- 2. How would you rate your own health status? Choose one: excellent, good, fair, poor or very poor.
- 3. How would you rate our community's overall quality of life? Choose one: excellent, good, fair, poor or very poor.
- 4. How would you rate your own quality of life? Choose one: excellent, good, fair, poor or very poor.
- 5. What do you see as the greatest health problems in our community?
- 6. Which four diseases/conditions do you believe are the most common in our community:

Cancer – generalObesityBreast cancerSmokingRespiratory diseases – adultsStroke

Asthma – children

Diabetes

Heart disease

Substance abuse – alcohol

Substance abuse – drugs

Mental Health disorders

High blood pressure Dental problems

Poor Nutrition Immunizations – children Lack of physical activity Immunizations – adults

Other (describe)

7. Which three behavioral risk factors are the most common in our community?

Access to affordable health care Lack of safe places for physical activity
Access to physicians High number of uninsured people

Inadequate transportation Poverty

Lack of grocery stores Unemployment

Access to fresh, healthy food Illiteracy

Wearing seatbelts Other (describe)

- 8. Who in our community does a good job of promoting health?
- 9. Who in our community does not promote good health?
- 10. How well does this hospital promote good health? Chose one: excellent, good, fair, poor or very poor.
- 11. What could the hospital do better to promote good health?
- 12. If you were in charge of improving health in our community, what would you do first?
- 13. Who else should we talk to?

Community Health Needs- Focus Group Discussion

Wesley Chapel, Land O'Lakes, New Tampa

- 1. How could you rate our community's overall <u>health status</u>?
- 2. How would you rate our community's overall quality of life?
- 3. What do you see as the greatest health problems in our community?
- 4. Which **four diseases/conditions** do you believe are the most common in our community:

Cancer – generalObesityBreast cancerSmokingRespiratory diseases – adultsStroke

Asthma – children Substance abuse – alcohol Diabetes Substance abuse – drugs Heart disease Mental Health disorders

High blood pressure Dental problems

Poor Nutrition Immunizations – children Lack of physical activity Immunizations – adults

Other (describe)

5. Which three behavioral risk factors are the most common in our community?

Access to affordable health care

Lack of safe places for physical activity

Access to physicians

Lack of safe places for physical activity

High number of uninsured people

Inadequate transportation Poverty

Lack of grocery stores Unemployment

Access to fresh, healthy food Illiteracy

Wearing seatbelts Other (describe)

- 6. What could the hospital do better to promote good health?
- 7. Who else should we talk to?

Community Health Needs Assessment 2013

Summary Prepared on 07/18/13

This report summarizes 272 of 272 total responses.

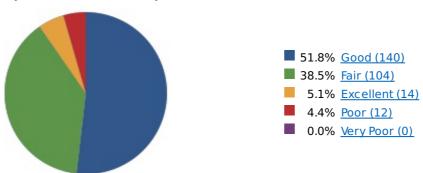
Summary for the results with the following restrictions:

Response Filters

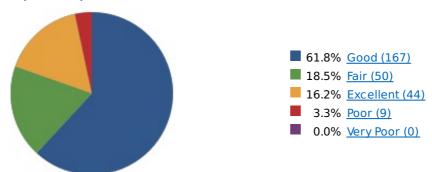
Invitation Type: all Status: all Alerts: Email Contains:

Community Health Needs Assessment 2013

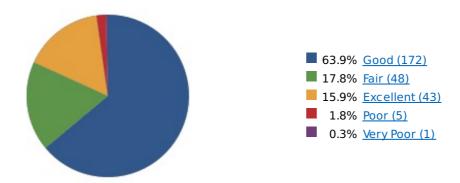
1. How could you rate our community's overall health status?



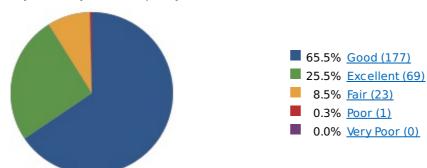
2. How would you rate your own health status?



3. How would you rate our community's overall quality of life?

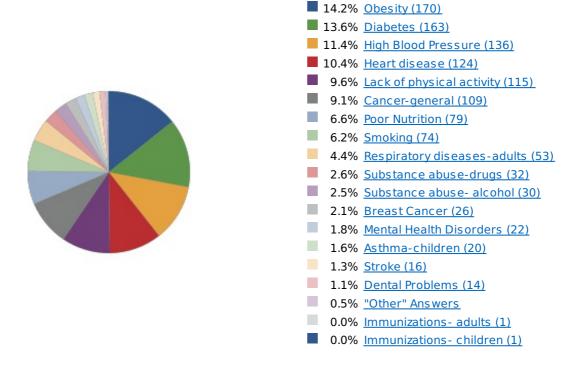


4. How would you rate your own quality of life?



5. What do you see as the greatest health problems in our community? You may browse freeform responses online or download the CSV.

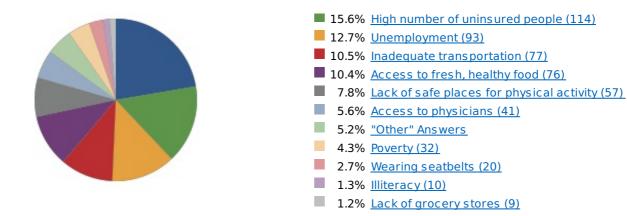
6. Which four diseases/conditions do you believe are the most common in our community



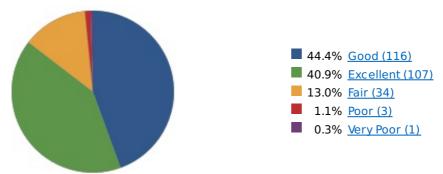
7. 7. Which three behavioral risk factors are the most common in our community?

22.3% Access to affordable health care (163)

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- **8.** Who in our community does a good job of promoting health? You may browse freeform responses online or download the CSV.
- **9.** Who in our community does not promote good health? You may browse freeform responses online or download the CSV.
- 10. How well does Florida Hospital Wesley Chapel promote good health



- **11.** What could the hospital do better to promote good health? You may browse freeform responses online or download the CSV.
- **12.** If you were in charge of improving health in our community, what would you do first? You may browse freeform responses online or download the CSV.

End of Survey Page 2



Primary Data Collection

Florida Hospital Wesley Chapel

Hospital Name: Florida Hospital Wesley Chapel

Community Benefit Manager: Tracy Clouser Year: 2014

	Name of Informant	What community or group does the Stakeholder represent?
Focus Group	Kim Schuknecht	Premier Community Health Group (FQHC), CEO
Focus Group	Dr. Marlene Hart	Premier Community Health Group, Interim CMO
Focus Group	Deanna Krautner	Pasco County Health Department
Focus Group	Gabby Flores	Healthy Start Coalition, Pasco
Focus Group	Lindsey Curtis	Premier Community Health Group, nurse practitioner
Focus Group	Sheila Hammond	FHWC, Social Worker
Community Survey	Various- 272 responses	General community



Asset Inventory

Hospital Name: CB Manager: Year:

Area of Focus defined by	Current Community Programs	Current Hospital	Potential Projects
Primary/Secondary Data		Programs	(optional but helpful for guiding the HHNAC and CHNAC)
Age-adjusted Hospitalizations due to heart disease	✓ 1 Federally Qualified Health Centers (FQHC)- Dade City ✓	✓ Health & Wellness Center✓ Smoking Cessation Classes	 ✓ Screenings & education programs onsite and in conjunction with county Mobile Medical Care Unit ✓ Conduct screenings ✓ Stanford Chronic Disease Self Mgmt Program ✓ Education and screening at Senior Health Fair ✓ Work with PCP's to become HeartCaring sites educating women about heart risks
Obesity	√	 ✓ Health & Wellness Center ✓ Physician and registered dietician lectures on eating healthy, exercise, etc. 	 ✓ KidShape 2.0 – family weight management program ✓ Weight Management program at the HWC
Hospitalizations due to Diabetes	✓	✓ Diabetes Education Classes ✓ Health & Wellness Center ✓	 ✓ CREATION Health Investment Fund project (in current proposal cycle) ✓ Take hospital diabetes program out into the community ✓ Scholarships to diabetes program for uninsured, underinsured, self pay who can't afford



PRIORITY SELECTION REPORT (PSR)

Part 1: Preliminary Data Template

Hospital Name: Florida Hospital Wesley Chapel CB Manager: Tracy Clouser Year: 2013

Part A: Preliminary Data – high-level findings (Attach charts and background materials as appropriate)

List the top 8-10 health priorities determined by Primary (local) Data collected from local community /multi-hospital health assessments, interviews, surveys, etc.					
1	Obesity	6	Cancer-general		
2	Diabetes	7	Poor nutrition		
3	High Blood Pressure	8	Smoking		
4	Heart Disease	9	Substance		
5	Lack of physical activity	10	Mental Health		
List the 8-10 health priorities determined by Secondary Data from AHS, Health Department and other publicly available sources.					
1	Low birth weight/pre-term birth	6	CHF		
2	Asthma	7	Dehydration		
3	Diabetes	8			
4	Pneumonia	9			
5	COPD	10			
List the 8-10 health priorities determined by internal Hospital Data - hospital only had 5 months of data when pulled					
1	Esophagitisi/GI	6	Pneumonia		
2	Septicemia/Sepsis	7	Bronchitis		
3	COPD	8	Asthma		
4	Cardiac Arrhythmia	9	Nutrition/Metabolism disorders		
5	Heart Failure	10			

Part B: Aggregated Priorities

What 8-10 aggregated Priorities emerged as a result of the above data? (Answers below are examples only)

	Condition	Ethnic Group	Age Group	State (or National or County) Variation	Selection Rationale
1	Diabetes				 Ranked high on both primary and secondary data Impact on overall health is high Related to multiple health issues noted on
2	Obesity				community survey
3	Heart Disease				•
4	High Blood Pressure				•
5	Pneumonia				
6	Asthma				•

Issue	Focus Group	Survey	Hospital	Secondary Data
Obesity	X	x	X	
Diabetes	x	X	x	x
Heart Disease		x	x	x
High Blood Pressure		Х		
Asthma			х	Х
Pneumonia			X	X

Attachment 7

Defining the Final Priorities

The following top three health issues were determined by the HHNAC and CHNAC to be the final priority issues for the Community Health Plan.

Priority 1: Heart Disease

Priority 2: Obesity

Priority 3: Diabetes

Α	g	e

	Population	Pop 0-19	Pop 20-39	% under	Pop 40-54	% under
33543, 33544, 33545	44,092	13,453	12,556	59%	9,961	82%
34639	24,092	6,951	5,571	52%	6,215	78%
33541	19,759	2,879	2,805	29%	3,246	45%
33576	3,784	545	497	28%	591	43%
TOTAL PSA	91,727	23,828	21,429	49%	20,013	71%

Race/Ethnicity

	white	black	Asian	Other	Two or Mo	Hispanic
33543, 33544, 33545	75%	11%	6%	4%	4%	20%
34639	87%	5%	3%	2%	3%	16%
33541	92.53%	3.55%	1.13%	2%	0.01%	0.06%
33576	94.48%	1.93%	0.98%	1.61%	0.82%	8%
TOTAL PSA	84%	8%	4%	3%	3%	15%

Households above 16 in min.

	household	ave HH siz€	owner occi e	employed Sa	ave commut	е
33543, 33544, 33545	15,745	2.8	77%	73%	33	
34639	8519	2.81	84%	70%	31.5	
33541	8,972	2.13	71%	38%	28	
33576	1749	2.15	86%	47%	26.8	
TOTAL PSA	34,985	2.4725	80%	57%	29.825	

Income	median		mean			
	HH income		HH income under \$25K			% HH >\$75k income
33543, 33544, 33545	\$	71,408	\$ 80,685	1786	0.113433	47%
34639	\$	67,366	\$ 77,259	841	0.098721	46%
33541	\$	37,631	\$ 45,137	2726	0.303834	16%
33576	\$	44,007	\$ 56,866	490	0.28016	25%
TOTAL PSA			\$ 64,987	5843		33%

Pop 55+	Median age			
8,122	34.5			
5,355	38.9			
10,829	59.2			
2,151	59.4			
26,457				