

2013
COMMUNITY HEALTH NEEDS ASSESSMENT
Summary

Introduction

Florida Hospital conducted its 2013 Community Health Needs Assessment in two parts: a regional needs assessment for the three counties in Central Florida followed by Assessments focused on and tailored to our seven hospital facilities in the Tri-County area of Orange, Seminole and Osceola Counties.

The larger Assessment is posted on our web site.

This document is specific to Florida Hospital Kissimmee.

Executive Summary

In Central Florida, there is a well-established tradition of healthcare organizations, providers, community partners, and individuals committed to meeting our local health needs. The region is home to several respected hospitals that are ranked in the nation's top 100, a Level One Trauma Center, nine designated teaching hospitals and the University of Central Florida, College of Medicine. Even with the current economic challenges and healthcare's changing landscape, these organizations remain committed to serving Central Florida.

In spite of this dedication to meeting local health needs, there is still work to be done. In the center of the Sunshine State, over 1.8 million people live in Orange, Osceola, and Seminole Counties. Of these 1.8 million residents, approximately 8.8% are unemployed; housing affordability remains a challenge; poverty rates for children, families, and the elderly are up to three times higher among racial and ethnic minorities; over one-third of children are raised in single-parent households; crime rates are above the national average; cancer is the leading cause of death; public transportation and carpooling are underutilized to the point where noise and traffic pollute the urban landscape; and in some zip codes, less than 20% of residents hold a bachelor's degree or higher.

These societal challenges often prevent Central Floridians from achieving the level of social, physical, environmental, and spiritual well-being that is necessary for maintaining health and quality of life. Community health needs assessments take into account these four areas of well-being, serve as a baseline of health status in a given community, and are used to plan social and medical interventions relevant to the population.

Three not-for-profit clinical hospitals – Florida Hospital, Orlando Health, and Lakeside Behavioral Health – alongside the Florida Department of Health in Orange County collaborated in 2012 and 2013 to create a Community Health Needs Assessment for Orange, Osceola, and Seminole Counties. The "CHNA" would describe the health of Central Floridians for the purpose of planning interventions relevant to the community. These four groups also collaborated with other community agencies under the umbrellas of "Healthy Orange Florida" in Orange County, "Healthy Seminole" in Seminole County, and "Community Vision" in Osceola County.(A list of the Community Vision Osceola County Health Leadership Council members (who provide services to the Kissimmee community) can be found in Attachment 1).

Community Vision contracted with the Health Council of East Central Florida, Inc. (Health Council) to use the Healthy Measures for East Central Florida online Health Community Network (HCN) tool. This customizable webbased community dashboard, designed by Healthy Communities Institute (HCI), delivers access to high-quality

data and decision support. The HCN provides health indicator tracking, best practice sharing, and community development to help improve the health and environmental sustainability of Kissimmee and surrounding communities. This tool was jointly funded by the collaboration and is publicly available to the community as a resource.

Over 100 health indicators were collected and analyzed for this report; health indicators were then categorized and ranked using the Assessment Protocol for Excellence in Public Health (APEXPH) modified Hanlon Method. This method considered three criteria: the magnitude of the problem, as measured in terms of the percent of the population with the health problem; the severity of the program in terms of mortality, morbidity, hospitalizations, economic loss or community impact; and the predicated effectiveness of the intervention in preventing the health problem.

Data sources included:

- Over 70 key stakeholder interviews with people representing the broad interests of the community 2013
- The Health Department MAPP assessments 2012
- The Florida Department of Health State Health Improvement Plan (2012-2015)
- The 2012 National Prevention Strategy
- Healthy People 2020

These data were used to identify the top health priorities in each county. The **tri-county needs assessment conducted in Orange, Osceola, and Seminole Counties** can be found on the Florida Hospital and Orlando Health websites. Utilizing this tri-county assessment data as a foundation, Florida Hospital conducted individual assessments for each of the seven Florida Hospital campuses located in the Central Florida tri-county region:

- Florida Hospital Altamonte Seminole County
- Florida Hospital Apopka Orange County
- Florida Hospital Celebration Health Osceola County
- Florida Hospital East Orlando Orange County
- Florida Hospital Kissimmee Osceola County
- Florida Hospital Orlando including Florida Hospital for Children Orange County
- Winter Park Memorial Hospital, a Florida Hospital Orange County

This document is a campus-specific Community Health Needs Assessment for Florida Hospital Kissimmee and the community it serves.

Florida Hospital Needs Assessment Process

The campus assessment used four process steps:

A. The tri-county assessment was conducted by the Community Vision partners, which includes Florida Hospital.

B. Florida Hospital formed a **Community Health Needs Assessment Committee** (CHNAC). The CHNAC is a sub-committee of the Florida Hospital Board of Trustees and meets quarterly. The CHNAC's role was to review and analyze the data in the tri-county assessment, support the individual campus needs assessments, and approve the community health priorities.

The CHNAC is comprised of external community members/stakeholders and senior hospital leaders. The community members in particular provide strong representation of low-income, minority and underserved populations. (Attachment 2)

C. **Hospital Health Needs Assessment Committees** (HHNAC) were convened on each campus and included case management, nursing, medical staff, administration, community advisory/foundation board representatives, and other clinical and non-clinical strategy individuals (Attachment 3).

The HHNAC on each campus reviewed the primary and secondary data in the tri-county assessment. They also analyzed hospital inpatient and emergency department utilization data to determine the top reasons for inpatient admissions and ED use.

The HHNAC used a "Decision Tree" (Attachment 4) to determine campus priorities based on the intensity of need, current community initiatives addressing the issue, Florida Hospital's capacity to impact these issues, and the opportunity for collaboration with other hospitals and community partners.

The Apopka Health Needs Assessment Committee identified two top priorities to address:

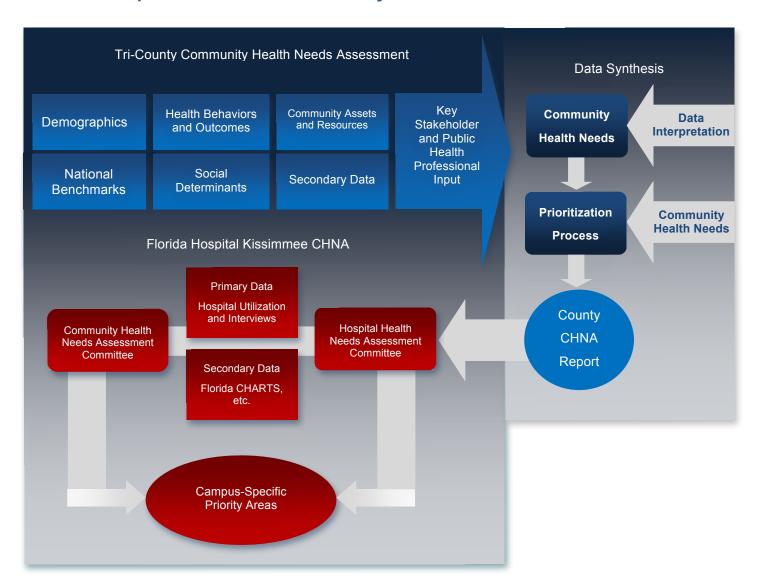
- 1. Obesity
- 2. Chronic Disease Management
- D. These priorities were presented to the **Community Health Needs Assessment Committee** (CHNAC). The CHNAC approved the campus-specific and global Community Health Needs Assessments, as well as the campus-specific priorities, on October 30, 2013.
- E. The **Florida Hospital Board** approved the campus-specific and global Community Health Assessments on December 4, 2013.

This document describes the process that led to the identification of campus-specific priorities for future development of interventions that address and improve the health status of Apopka residents. The Community Health Needs Assessment process for Florida Hospital Apopka is visually represented in the figure below.

While other needs were identified for the broader Osceola County community, Florida Hospital Kissimmee chose priorities based on the hospital's ability to meet those needs in this three-year assessment period. This document describes the process that led to the identification of campus-specific priorities for planning interventions that holistically address and improve the health status of Kissimmee residents.

The Community Health Needs Assessment process for Florida Hospital Kissimmee is visually represented in the figure on the next page.

Florida Hospital Kissimmee Community Health Needs Assessment Process



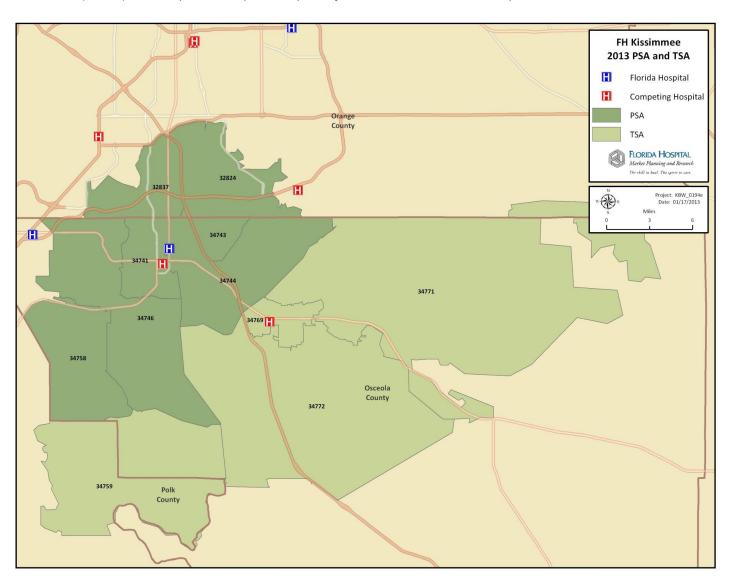
Hospital Description

Florida Hospital Kissimmee is a not-for-profit hospital with 83 acute care beds and an emergency department and has been part of the Florida Hospital system since 1993. It is one of the seven campuses in the tri-county area. Florida Hospital Kissimmee offers comprehensive inpatient and outpatient services including emergency care; cancer treatment including radiation therapy; imaging services including PET, MRI, CT, nuclear, mammography, and ultrasound; a designated primary stroke center; digestive health; and surgical specialties to Osceola County residents. In 2012, Florida Hospital Kissimmee saw 43,067 patients in the emergency department; 26,336 patients for outpatient treatment; admitted 5,188 patients; and performed 2,124 surgeries. Florida Hospital Kissimmee

provides holistic care – body, mind and spirit – and is committed to providing a personalized patient experience for all patients.

Hospital Service Area

Florida Hospital Kissimmee is committed to improving the health, wellness, and quality of life to Osceola County residents. The primary service areas include the Meadow Woods Census Designated Place (32824); the Hunters Creek Census Designated Place (32837); Kissimmee zip codes 34741, 34743, 34744, 34746; and portions of Poinciana (34758). The map below depicts the primary service area for Florida Hospital Kissimmee.

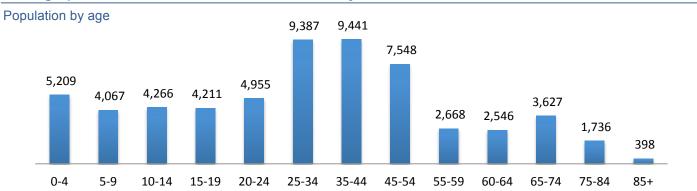


Community Description

Incorporated in 1883, the City of Kissimmee is the seat of Osceola County, Florida. Kissimmee and St. Could are the only two incorporated cities in Osceola County. The county is home to parts of Walt Disney World, Gatorland and other tourist destinations. Osceola is a blend of suburban and semi-rural landscapes; while there are many housing developments and shopping plazas in Kissimmee, there are still cattle grazing in fields. Many workers are employed by small businesses and tourist attractions who hire part-time workers; as a result, the uninsured rate tops 35%. There are high numbers of homeless families, especially in mom-and-pop motels near Disney.

The City of Kissimmee has the largest Hispanic population in Central Florida with 59.2% of residents self-identifying as Hispanic or Latino. The majority of residents are between the ages of 25 and 54. There is strong community leadership, such as Community Vision whose mission is to bring people and resources together to solve community issues. The Council on Aging provides most of the county's social services to elderly and non-elderly alike.

Demographic Profile of the Kissimmee Community



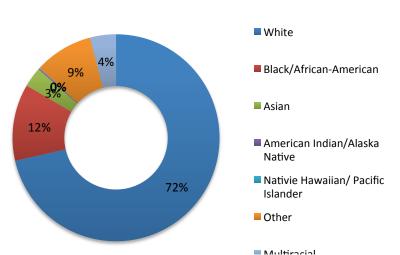
Population by sex

Males: 49.0% (29,432)

Females: 51.0% (30,627)

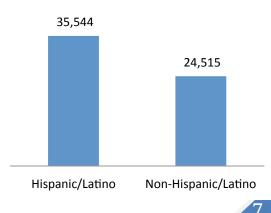
Population by race

City of Kissimmee



Population by ethnicity

City of Kissimmee



Stakeholder Input Process

Conducting interviews is a powerful method for collecting community data. Interviews facilitated by an unbiased moderator can uncover information that people may be reluctant to share in a more public setting. These data reveal the thoughts and perceptions of key stakeholders and provide an understanding of the pressing issues facing the community. The Health Council of East Central Florida, Inc. conducted the stakeholder interviews.

Key stakeholders for this assessment included individuals with special knowledge of or interest in public health (i.e., health departments); individuals/organizations serving or representing the interests of medically underserved, low-income, and minority populations; persons who represent the broad interests of residents served by the hospitals; and individuals representing large employers and employee interests.

A total of 72 stakeholders representing 44 social service and health care organizations were interviewed and completed a questionnaire aimed at identifying health barriers, assets, resources, and needs within the region. At least 70% of the Osceola County stakeholders represented and/or provided services to the Kissimmee Community. The complete key stakeholder questionnaire and a demographic description and organizational affiliation of each stakeholder who participated can be found in Appendices C and D, respectively, beginning on page 151 of the main tri-county community health needs assessment.

A lack of health literacy was cited as a major barriers to attaining improved community health. Regardless of health insurance status, residents are not able to navigate the healthcare system. The Central Florida community was cited as lacking a centralized navigation and eligibility portal to direct people to appropriate, timely and affordable health resources. When asked to describe barriers to health and healthcare in the tri-county region, key stakeholders cited the following: limited resources in the fields of mental health, substance abuse, and dental care; the availability of healthcare resources to the growing population; transportation to and from appointments; and disability status.

Stakeholders said that integration of services is needed to improve the effectiveness and efficiency of the fragmented system of care in Osceola County. Stakeholders also asserted that service organizations tend to operate in silos that result in a duplication of some services and does not maximize appropriate utilization. A need for community-wide collaboration for attaining better health outcomes for all residents was identified.

The Florida Hospital Kissimmee Health Needs Assessment Committees reviewed the key stakeholder interviews and the secondary data. These data were also reviewed with inpatient hospitalists, community physicians, and key physician leaders in emergency medicine. After considering the tri-county identified needs assessment primary and secondary data, the Kissimmee team then evaluated internal hospital inpatient and emergency department utilization data and used this information to determine and recommend campus-specific priorities.

Community Health Needs Assessment Committee (CHNAC)

The members of the Florida Hospital Community Health Impact Council (CHiC) comprise the Florida Hospital Community Health Needs Assessment Committee (CHNAC).

The CHiC serves as a subcommittee of the Florida Hospital Board and provides oversight for Florida Hospital's community benefit direction, activities and investments. The CHiC/CHNAC represents the broad community as well as low-income, uninsured and minority populations (including African Americans and Hispanics).

The Community Health Impact Council (CHiC) also reviews and approves strategic community benefit initiatives funded by Florida Hospital. These strategic initiatives are innovative pilots designed to improve the health of the Central Florida community, including Apopka, and reduce preventable medical costs and interventions. The CHIC/CHNAC members are dedicated to identifying, develop, funding, and sustaining community benefit programs that address community needs and strategically align with Florida Hospital's ongoing commitment to improving the health of our community

Public Health

Public health is represented in this needs assessment via CHNAC membership (including a former U.S. Surgeon General) and key stakeholder interviews conducted throughout the tri-county area. The directors of the Department of Health In Osceola and Seminole Counties also participated in the assessment process for their respective counties.

In addition, the Florida Department of Health in Orange, Seminole and Osceola Counties were strategic partners in the creation of this needs assessment.

- Osceola County: Belinda Johnson-Cornett, MD, Director was a leader in the Osceola County Health Leadership Council, which served as the needs assessment committee in that county.
- Orange County: Kevin Sherin, MD, Director, and Lesli Ahonkhai, Chief of the Health Protection Bureau, actively participated in this assessment and are leaders in Healthy Orange.
- Seminole County: former director Mike Napier and Swannie Jett, DrPH, current Director, participated in Healthy Seminole, the needs assessment committee for Seminole County.

All of these public health leaders have experience in community health assessment processes, and conducted MAPP (Mobilizing for Action through Planning and Partnerships) assessments in 2012.

Data Sources

Primary data sources included:

- Top 10 reasons for inpatient admissions at Florida Hospital Kissimmee 2012
- Top 10 reasons for emergency department visits at Florida Hospital Kissimmee 2012
- Key stakeholder interviews with people who understand the needs of the community, including the Kissimmee area and low-income, minority and underserved populations – 2012

Secondary data sources included:

- Agency for Health Care Administration 2010-2012
- Behavioral Risk Factor Surveillance System Survey 2010
- County Health Rankings, University of Wisconsin Population Health Institute & RWJF 2012
- Florida Community Health Assessment Resource Tool Set (CHARTS) 2010-2012
- Florida Department of Children and Families 2010-2012
- Florida Department of Education, National Center for Education Statistics 2012
- Florida Department of Health, Bureau of Community Environmental Health 2012
- Florida Department of Health, Bureau of Epidemiology 2012
- Florida Department of Health, Bureau of HIV/AIDS 2012
- Florida Department of Health, Bureau of STD Prevention and Control 2012
- Florida Department of Health, Bureau of Vital Statistics 2010-2012
- Florida Department of Health, Office of Planning, Evaluation, and Data Analysis 2010
- Florida Department of Highway Safety and Motor Vehicles 2012
- Florida Department of Juvenile Justice 2012
- Florida Youth Substance Abuse Survey 2010
- Florida Youth Tobacco Survey 2010
- United States Census Bureau American Community Survey 2010-2012
- United States Department of Agriculture 2010-2012
- United States Department of Health and Human Services, Healthy People 2020 2010
- United States Environmental Protection Agency 2012

Data Collection and Analysis

Our data collection process included both primary and secondary research.

For primary research, key stakeholder interviews were conducted by the Health Council of East Central Florida Inc. at various community events. Interview questions were delivered either on a one-on-one basis or in a focus group setting depending on the needs of the key stakeholders. The complete key stakeholder questionnaire and a demographic description and organizational affiliation of each stakeholder who participated can be found in Appendices C and D, respectively, beginning on page 151 of the main tri-county community health needs assessment.

In addition to the stakeholder input, in order to assess help seeking behavior and estimate service utilization for the Kissimmee community, we gathered primary data detailing the top 10 reasons for inpatient admissions and emergency department visits at Florida Hospital Kissimmee. These reasons are as follows:

Top ten reasons for emergency department visits at Florida Hospital Kissimmee

1	. Chest Pain	2.	Abdominal	3.	Fever	4.	Disorder of	5.	Cellulitis
			Pain				the Back		
6	. Head and neck	7.	Nausea and	8.	Asthma	9.	Disorders of	10	. Strains and Sprains
	symptoms		Vomiting				the Urethra		of the Back

Top ten reasons for **inpatient admissions** at Florida Hospital Kissimmee:

1.	Chest Pain	2.	Other	3.	Cellulitis	4.	Diabetes	5 .	Asthma
			Pneumonia						
6.	Bronchitis	7.	Gallstone	8.	Diverticula of	9.	Heart Failure	10.	. Disorders of
					Intestine				the Urethra

Secondary data, as opposed to primary data, are information that have been collected and compiled by someone other than the user. For the purpose of this assessment, secondary data were collected and compiled by the agencies listed in the previous section, such as the U.S. Census Bureau, and was accessed and compiled by the Health Council of East Central Florida and Florida Hospital and Orlando Health Community Benefit staff members.

Secondary data were gathered using the Healthy Measures for East Central Florida online Health Community Network (HCN) tool. This customizable web-based community dashboard, designed by Healthy Communities Institute (HCI), delivers access to high-quality data and decision support. The HCN provides health indicator tracking, best practice sharing, and community development to help improve the health and environmental sustainability of Kissimmee and surrounding communities. This tool was jointly funded by the collaboration and is publicly available to the community as a resource.

As data specific to the city, or Census Designated Place (CDP), are not available for most variables, this CHNA includes county-level indicators for mortality, morbidity, years potential life lost, access to care issues, behavioral risk factors, health screenings, and health conditions. Nevertheless, over 100 indicators were collected and analyzed for this report. Data were provided by race/ethnicity and age when available. Zip code level data were provided for preterm and low birth weight infants. When applicable, Healthy People 2020 targets were included to provide a national benchmark for community health. Grades and recommendations from the U.S. Preventive Services Task Force (USPSTF) to assess the merits of preventive measures, including screening tests and counseling, were also included where appropriate. Grades and recommendations are defined in Appendix B on page 150 of the complete Central Florida needs assessment.

Additional data were collected from Florida Community Health Assessment Resource Tool Set (CHARTS) and the Florida Youth Substance Abuse Survey to supplement health status data on Kissimmee youth.

This tri-county community health needs assessment process included the broad community as well as underserved populations. The assessment highlights health disparities in the region served by the hospital. Indicators for the social determinants of health were also gathered from Healthy Measures and CHARTS. These define the community conditions in which people are born, live, work, and play. A review of these indicators can help identify inequities that can affect health status.

The tri-county data, the hospital utilization data and stakeholder interviews were reviewed and analyzed by the campus committees and the CHNAC. The CHNAC reviewed and approved the top 12 health issues identified in the tri-county assessment and the Florida Hospital Kissimmee HHNAC narrowed those issues down to two. The CHNAC and the Florida Hospital Board approved these recommendations.

Asset Inventory

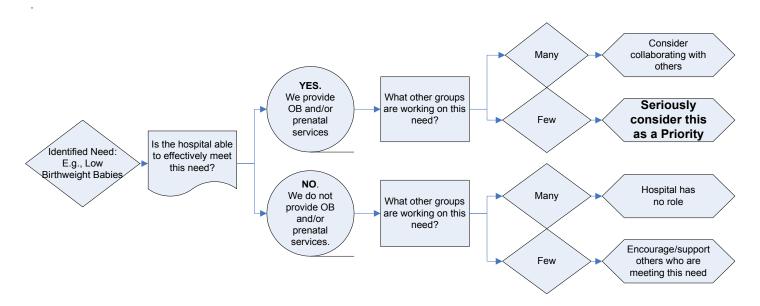
Step one in the process to completing the prioritization of community needs was an asset inventory for the Florida Hospital Kissimmee primary service area and surrounding zip codes. This asset inventory includes services and programs provided in the community – many are provided by community organizations dedicated to improving the health and wellness of the Kissimmee community - including low-income, minority and other underserved populations. A list of assets in the community was provided to the Community Health Needs Assessment Committee.

A complete list of these assets is included in Appendix E, beginning on page 159, of the tri-county needs assessment; an example of this list is found in the table below:

Chronic Disease							
Asthma	Cancer	Diabetes					
Hispanic Health Initiatives	100 Black Men of Orlando, Inc.	American Diabetes Association					
Center for Multicultural Wellness	Central Florida Black Nurses	Center for Change					
and Prevention	Association of Florida						
Community Health Centers	Debbie Turner Cancer Resource	Center for Multicultural Wellness and					
	Center	Prevention					
Grace Medical Home	Center for Change	Central Florida Family Health					
		Centers					
Health Care Center for the	Center for Multicultural Wellness and	Central Florida Partnership on					
Homeless	Prevention	Health Disparities					
American Lung Association	American Cancer Society	Central Florida YMCA					

Priority-setting Process

In order to move from assets to priorities, the CHNAC and HHNAC used decision trees to review each aggregated priority identified for the county. This priority selection process took into account primary and secondary data as well as hospital and community assets. The figure below is an example of the decision tree that was used to narrow campus priorities.



Data Summary

The data collection process described in the previous pages yielded 14 areas of concern in Osceola County,

Florida. They are:

- 1. Heart Disease
- 2. Obesity
- 3. Cancer
- 4. Diabetes
- 5. Asthma
- 6. Maternal and Child Health
- 7. Mental Health
- 8. Substance Abuse
- 9. Dental Care
- 10. Affordable Health Care
- 11. Housing Affordability
- 12. Homelessness
- 13. High Unemployment
- 14. Single Parent Households

A full review and explanation can be found in section 14 of the tri-county assessment.

The Hospital Health Needs Assessment Committee (HHNAC) recognized that while all 14 issues impact the health of Kissimmee residents and the surrounding communities, it is important to focus on specific areas of impact over a defined period of time if sustainable change is to be accomplished. It is also important that the hospital be equipped to address these issues, that programs are not duplicative, and that there is opportunity for community partnerships to address the issues. As such, the HHNAC selected obesity and chronic disease management as the key priorities for Florida Hospital Kissimmee.

The rationale is as follows. Two county-wide priorities identified based on hospital utilization, incidence, prevalence, and death rates were **cancer** and **asthma**. Obesity is a contributing factor to these two chronic diseases, thus a reduction in obesity should contribute to a reduction in complications due to these chronic diseases; obesity interventions also have the potential to delay or eradicate the onset of diabetes, heart disease, asthma, or cancer. Diabetes and heart disease are two of the most common chronic conditions in the United States as a whole. Both have very similar risk factors and both are often poorly controlled; cancer is the leading cause of death in the county and is now ranked among the most common chronic conditions as well.

Asthma is among the leading causes of illness in Osceola County teens and pre-teens. Chronic disease self management focuses health education efforts on exercise, nutrition, and personal accountability; these three processes are vital to the control of diabetes, heart disease, cancer, asthma and the various comorbidities that often accompany these diseases – including obesity. For these reasons, we believe that Florida Hospital Kissimmee has the appropriate resources to address cancer, asthma, and their risk factors while specifically addressing obesity, diabetes, and heart disease. Additionally, Florida Hospital Kissimmee is dedicated to developing partnerships with social justice organization that are dedicated to reducing social causes and consequences of cancer and asthma.

Florida Hospital Kissimmee does not have service lines for **dental care**, **substance abuse**, **or mental health**. However, we will continue to work with the Florida Department of Health in Osceola County, faith-based organizations (FBOs), community-based organizations (CBOs), and other not-for-profit systems to promote healthy families, and we will also continue to seek opportunities for innovative collaborations for the betterment of our community. Additionally, the Florida Hospital Community Health Impact Council board has already and will continue to evaluate funding mechanisms for innovative and best practice progrms centered on addressing mental health, substance abuse, dental health and other issues in the community. The same holds true for the priority of **maternal and child health**. Additionally, Florida Hospital Community Impact staff are actively engaged in maternal and child health initiatives in Osceola County. Other Florida Hospital campuses with an obstetrics service line also work with parents to ensure that children have safe, appropriate car seats.

The community issues of **housing affordability**, **homelessness**, **high unemployment**, and **single parent households** are not core competencies of Florida Hospital Kissimmee. However, we will continue to support the efforts of local law enforcement agencies, organizations like Harbor House of Central Florida, and other CBOs and FBOs that are committed to community mobilization, education, and support services. Florida Hospital is also

working with Healthy Central Florida on a pilot program aimed at safe walking and biking practices in other communities and as successful initiatives are identified, they will be evaluated by the Florida Hospital CHNAC. Florida Hospital Community Health Impact also has community partnerships in an effort to impact social determinants of health.

The last community concern that has been identified is **affordable healthcare**. Although this issue has not been specifically prioritized to be addressed by the Kissimmee campus, Florida Hospital Kissimmee is an active supporter of health care for the uninsured in Osceola County. We were among the founders of the four-facility network of Federally Qualified Health Centers in the county, financially support the Council on Aging Chronic Care Medical Clinic for uninsured people, fund a diabetes programs targeting uninsured people, fund a Secondary Care referral service, and are leaders in a new homeless center that has a medical clinic. Further, the principle of affordable healthcare is embedded into our multiple Florida Hospital programs and efforts as we seek to educate our community on health resources and offer care at a reduced cost or no cost where possible. We also aim to strengthen the relationship with organizations that offer primary care, dental, and obstetric services. Florida Hospital is also working internally to ensure comprehensive discharge education.

Priority Selection

A comprehensive analysis of health indicators provides an increased understanding of the community's health problems. Prioritizing health issues ensures that resources allocated to address community health needs are used effectively and efficiently in an effort to achieve optimal outcomes. To accomplish the task of prioritizing health needs, the Assessment Protocol for Excellence in Public Health (APEXPH) modified Hanlon Method was used to categorize and rank health indicators to identify key needs in the tri-county area. This method considered three criteria: the magnitude of the problem, as measured in terms of the percent of the population with the health problem; the severity of the problem in terms of mortality, morbidity, hospitalizations, economic loss or community impact; and the predicted effectiveness of the intervention in preventing the health problem.

In addition to the above-mentioned criteria, health indicator rates were compared to national benchmark targets (where available) to define the gap between the current and potential health of the community. Indicator rates were also trended to highlight improvement or decline from the previous time measurement. Finally, a six-step process was utilized to solidify priorities in each county and each step is described in detail in the complete assessments located on the Orlando Health and Florida Hospital websites. The top 14 indicators identified by the assessment for Osceola County are described in Table I.

Table I. Priorities

Osceola County

- 1. Heart Disease
- 2. Obesity
- 3. Cancer
- 4. Diabetes
- 5. Asthma
- 6. Maternal and Child Health
- 7. Mental Health
- 8. Substance Abuse
- 9. Dental Care

- 10. Affordable Healthcare
- 11. Housing Affordability
- 12. Homelessness
- 13. High Unemployment
- 14. Single Parent Households

While the above-mentioned 14 needs were identified for the broader Osceola County community, Florida Hospital Kissimmee chose to prioritize needs based on the hospital's ability to meet those needs in this 3-year assessment period. As previously mentioned, upon completion of asset inventory, a decision tree process was utilized to a) identify the highest needs, b) evaluate whether or not there were existing resources to meet this need, and c) rank our ability as a hospital organization to create partnerships or continue collaborations to address this need.

As a result of the efforts of the Kissimmee campus Community Health Needs Assessment Committee, the following three areas were selected as priorities for the 2013 needs assessment year:

- 1. Obesity There is scientific evidence indicating that obesity is linked to metabolic disorders and other chronic diseases. As such, efforts to reduce, control, and prevent obesity have great potential to positively impact other chronic conditions and lifestyle factors that have been prioritized.
- 2. Diabetes Heart disease, diabetic retinopathy, kidney disease, nerve damage, and gum disease are just a few of the health complications due to diabetes. Diabetes was also the fourth leading cause of hospital admissions on the Kissimmee campus in 2012. As such, an intervention aimed at reducing the incidence and decreasing the prevalence of diabetes has the potential to positively impact the entire community.
- 3. Heart Disease In 2012, the leading cause of emergency room visits on the Kissimmee campus was chest pain. Two of the top ten causes of hospital admissions that same year revolved around heart disease. There is a wealth of evidence in the scientific to suggest that heart disease is preventable, reduces the ability to perform activities of daily living, and quickly decreases quality of life. There is a wealth of evidence in our hospital data alone to suggest that Kissimmee residents can attest to these facts. As such, reducing heart disease is an important priority for the Kissimmee campus.

Next Steps

The CHNAC and Community Impact staff will work with community organizations, agencies, and medical staff to create a Community Health Plan (Implementation Strategy) that will build capacity for obesity and chronic disease management through partnership enhancement in Kissimmee and the surrounding Osceola County community.

The Kissimmee campus HHNAC will develop the Community Health Plan with measurable outcome goals; it will be published by May 15, 2014 at which time implementation and scheduled evaluation will begin. We will measure the efficacy and effectiveness of our plans throughout the intervention process to determine if we have been successful in reducing obesity, improving the management of chronic diseases, and enhancing the quality of life of all Apopka residents – regardless of the income levels and ethnic backgrounds.



OSCEOLA HEALTH LEADERSHIP COUNCIL COLLABORATION ROSTER

Representing the needs of and serving the interests of: Orange, Osceola, and Seminole Counties

Year: 2013

Community Benefit Manager: Verbelee Nielsen-Swanson

	Name	Organization
1	Donna Sines	Community Vision
2	Dorie Croissant	Florida Hospital
3	Amanda Kraft	Osceola County Public Schools
4	Angel Walbero	Nemours Children's Hospital
5	Anna Baznik	Intervention Services
6	Barbara Meeks	Nemours Children's Hospital
7	Belinda Johnson-Cornett	Florida Department of Health - Osceola County
8	Beverly Hougland	Osceola Council on Aging
9	Cathryn Dececco	Blue Cross/Blue Shield Florida
10	Celestia McCloud	Osceola County Government
11	Jim Shanks	Park Place Behavioral Healthcare
12	Joanna Conley	Osceola Regional Hospital
13	John Quinones	Osceola County Government
14	Josephine Mercado	Hispanic Health Initiatives
15	Karen Beary	Catholic Charities
16	Ken Peach	Health Council of East Central Florida
17	Lisa Barkley	UCF College of Medicine
18	Mariobyn Jones	Health Management Associates

19	Natalia Cabrero	Florida Hospital
20	Niki Whisler	Osceola County Government
21	Robert Brooks	Health Management Associates
22	Robert Sorenson	Osceola County Government
23	Robert Krieger	Osceola Regional Hospital
24	Tom Griffin	The Transition House
25	Kerrian Linville	Healthy Start
26	Patty McWhirter	Healthy Start
27	Lisa Houpt	Healthy Start
28	Gwendolyn Winkfield	Florida Department of Health – Osceola County
29	Linda Clark	Florida Department of Health – Osceola County
30	Sue Ring	Community Vision

2013 Florida Hospital

Community Health Needs Assessment Committee (CHNAC) Roster

Note: The Community Health Needs Assessment Committee (CHNAC) also serves as the Community Health Impact Council (CHiC), the community benefit subcommittee of the Florida Hospital Board. The Committee meets quarterly.

Name	Entity/Agency Represented	Title	Expertise
Lars Houmann	Florida Hospital	President &	Chairs the Committee. Active in community and economic
		CEO CHNAC	development.
		Chairman	
Brian Paradis	Florida Hospital	COO	Board member for Frontline Outreach (for African American
			children) and Grace Medical Home (uninsured patients with
			chronic diseases)
Eddie Soler	Florida Hospital	CFO	Member, Central Florida Hispanic Chamber of Commerce
Sy Saliba	Florida Hospital	SVP,	Oversees community benefit and community relations
		Community	
		Impact	
Verbelee	Florida Hospital	VP,	Community Benefit VP and Needs Assessment author. Leads FH
Nielsen-Swanson		Community	effort in the Bithlo Transformation Effort (healthy community
		Impact	effort for very low income community)
Sheryl Dodds	Florida Hospital	SVP/CNO	Nursing for patients of all income levels and ethnicities
Ed Hodge	Florida Hospital	SVP, Human	Leads FH's Diversity & Inclusion department. Keenly aware of
		Resources &	issues around health disparities.
		Diversity	
Rich Morrison	Florida Hospital	SVP,	Health policy expert. Co-founder of community initiatives
		Government	including Jail Oversight Commission, Human Trafficking Task
		& Public Policy	Force, Central Receiving Center (police/community mental
			health agency), Early Childhood Coalition
Ross Edmundson,	Florida Hospital	VP, Case	Discharge planning for all patients including the elderly,
MD		Management	uninsured, low-income and minority patients
Antonia Novello,	Florida Hospital	Director,	Former US Surgeon General (first woman and first Hispanic).
MD		Public Health	Strong Public Health experience and expertise.
		Policy	
Roniece Weaver	Hebni Nutrition	President	Nutritionist who works in African American community. Author
	Consultants		of the Healthy Soul Food Pyramid.
Linda Ewing	Massey Services	Senior Leader	Community leader. Massey supports many community entities
			including those serving low-income and minority populations.
John Crossman	Crossman & Co.	Principal	Strongly involved in faith-based organizations that do

Name	Entity/Agency Represented	Title	Expertise
			community outreach
Clem Bezold	Center for	President &	Health futurist. One current project is Disparity Reducing
	Alternative	CEO	Alternatives, which bring health technology to low-income and
	Futures		underserved people.
Ralph Carauna	UCF School of	Dean	UCF Medical School is in its third year of offering primary care
	Medicine		physician training.
Shawn Bartlett	WFTV Ch. 9	General	Heads ABC television news outlet
		Manager	
Jim Jardon	JHT, Inc.	Founder	Former Hispanic Chamber president, Board member for
			Economic Development Commission, Florida Hospital, and
			Sanford Burnham Medical Research Institute.
Dick Batchelor	DBM, Inc.	Principal	Political consultant and well-known children's advocate
Debbie Watson	Winter Park	VP	WPHF develops and funds school health and older adult
	Health		programs. Founder of Healthy Central Florida. Chair of Orange
	Foundation		Co. School Wellness Committee.
Steve Homan	Florida Citrus	VP	Leader in healthy community project in the Parramore area
	Sports		(low-income, mainly African American community)
Barbara Jenkins	Orange County	Superintende	Services children of all ages and ethnicities, including those who
	Schools	nt	are homeless and/or eligible for free/reduced lunch program
Chris Gent	Kissimmee	VP	Longtime community volunteer. Services on boards including
	Utilities		Community Vision (community capacity building). Council on
	Authority		Aging, etc. that serve low-income and Hispanic clients.
Tom Warlow	Gracia Andersen	President	Community foundation that funds social service projects
	Foundation		
Sabine Patel	Forest Lake	Youth Pastor	Works with children of all incomes and ethnicities. Expert in
	Church		wellness, prevention and health promotion.
Maureen	Adventist Health	Community	Oversees community benefit/CHNAs for 44 hospitals. Chairs
Kersmarki	System (parent	Benefit	Orange County Primary Care Access Network (PCAN) that cares
	organization)	Director	for 100,000 uninsured people.

2013 Florida Hospital Kissimmee

Hospital Health Needs Assessment Committee (HHNAC) Roster

	Name	Position	Expertise
1	Ademola Adewale, MD	Physician	
2	Atalie Ashley	Community Impact Project Manager- Florida Hospital	Public Health and Community Benefit
3	Dick Batchelor	President DBMG (political consulting)	Community Advocate, especially for children. Understanding of community needs of low-income and minority populations.
4	Richard Brannon	Financial Planning – Florida Hospital	Financial Analysis
5	Laura Guitar	Edelman – Senior Vice President	Community Advocate
6	Rob Herzog	Admin Director – Florida Hospital	Behavioral Health. Has established mental health programs for uninsured residents.
7	Penny Jones	Executive Director, Community Relations – Florida Hospital	Community Relations / Partnerships. Expert in foster care issues.
8	Lauren Josephs	Executive VP & CEO – Visionary Vanguard Group	Diversity and Disparities Consulting
9	Maureen Kersmarki	Community Benefit Director – Adventist Health System	CHNA oversight for 44 AHS hospitals. Community health and health access leadership. Understands needs of low-income and minority populations.
10	Linda Moffa	Foundation	Grant development for Florida Hospital facilities in the tri-county area. Understanding of community needs of low-income and minority populations.
11	Verbelee Nielsen- Swanson	Vice President, Community Impact – Florida Hospital	Community Benefit, CHIC. Understanding of needs of low-income and minority populations.
12	Sam Olenick	Executive Director Community Partnerships – Florida Hospital	Media, Partnerships. Community Development for tri- county area including Osceola County.
13	Ross Edmundson, MD	Physician, VP for Case Management	Oversees discharge planning for Florida Hospital. Background in disease management. Understanding of needs of low-income and minority populations.
14	Sy Saliba	Senior Vice President	Strategic Planning
15	Jill Slaff	Manager Community Health Impact – Florida Hospital	Community Health and Wellness. Understanding of needs of low-income and minority populations.
16	Jordan Williams	Market & Planning	Data