



Lakeland Regional Health™

2014 COMMUNITY HEALTH NEEDS

ASSESSMENT

2014-2017 STRATEGIES FOR

CHANGE



Strengthening the
Healthiest Community
in Florida

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PREFACE FROM PRESIDENT/CEO



Since our beginnings as Morrell Memorial Hospital, Lakeland Regional Health System, Inc., (Lakeland Regional Health) has dedicated nearly 100 years of service to the people of Polk County and surrounding communities across Central Florida with the most effective, safe and compassionate care possible.

We know that to best care for our patients, families and neighbors, we must deliver nationally recognized healthcare, strengthen the healthiest community in Florida and advance the future of healthcare. These three core directives are at the heart of our transformed focus to not only heal the sick, but serve as a catalyst to fortify the health of our community.

Lakeland Regional Health wishes to thank the community residents and public health leaders who gave us their time and expertise in the preparation of this assessment.

The approach we took to begin our shared path to community wellness was created to perform a thorough and complete assessment using quantifiable data and subjective and qualitative input from a broad array of sources and community partners.

Upon review and prioritization, the following areas of need were selected:

1. Disparities of health outcomes within the black community
2. Access to quality, coordinated care
3. Cancer screening and prevention
4. Obesity
5. Pre-conceptual and perinatal health
6. Injury prevention

It is only by changing and improving health inside our walls and expanding our scope beyond those walls that we will be able to strengthen the healthiest community in Florida.

Our team is inspired and energized to help people make positive, lasting improvements in their health. We are ready to begin the transformation.

Will you join us on the journey?

Sincerely,

Elaine C. Thompson, PhD, FACHE
President/CEO



2014
COMMUNITY
HEALTH NEEDS
ASSESSMENT

PART I



BACKGROUND

The Patient Protection and Affordable Care Act (ACA), enacted on March 23, 2010, added new requirements which not-for-profit hospital organizations must satisfy to maintain their tax-exempt status under section 501(c)(3) of the Internal Revenue Service Code. One such requirement added by ACA, Section 501(r) of the Code, requires not-for-profit hospitals to conduct a community health needs assessment (CHNA) at least once every three years. As part of the CHNA, each hospital is required to collect input from designated individuals in the community, including public health experts, as well as members, representatives or leaders of low income, minority and medically underserved populations and individuals with chronic conditions.

Lakeland Regional Health has conducted assessments in the past to identify needs and resources in our community to guide our community health efforts. This new legislation provides a welcome opportunity to enhance our needs assessment and strategic planning processes. The CHNA process undertaken and described in this report was conducted in compliance with these new federal requirements.

ABOUT LAKELAND REGIONAL HEALTH

Lakeland Regional Health is a not-for-profit, community-based organization committed to providing nationally recognized, effective, safe, timely, efficient and equitable healthcare to the community it serves.

Lakeland Regional Health places the value of caring at the center of daily activity for the entire organization. This culture of relationships and caring uses a simple framework of Promises to treasure, nurture and inspire ourselves, our peers, our patients and their families, and our community as a whole, to guide interpersonal relations and care.

Lakeland Regional Medical Center is the largest single component of Lakeland Regional Health. It has served Lakeland and surrounding communities since 1916. In 2013, our 851-bed hospital had more than 36,000 admissions and more than 187,000 Emergency Department visits.

Lakeland Regional Medical Center is the fifth largest hospital in Florida, encompassing:

- // The busiest single-site Emergency Department in the state.
- // A level II Trauma Center providing initial trauma care, regardless of the injury, with physician subspecialists. (Level I is the highest possible designation for a trauma care center.)
- // The only primary stroke center in the area with advanced technology to treat strokes beyond three hours.
- // Neurosurgeons specializing in the diagnosis and treatment of brain, spinal and neck injuries and illness.
- // The only Hybrid Operating Room in Polk County.
- // A level II Neonatal Intensive Care Unit providing sophisticated and nurturing care for newborns. (Level III is highest possible designation for a NICU.)

DEFINITION OF COMMUNITY SERVED

Lakeland Regional Health's primary, secondary and tertiary market extends throughout Polk County and to a lesser degree into the surrounding counties (Highlands, Hardee, Hillsborough, and Pasco). The majority of patients served live in Polk County. Therefore, for the purposes of this report, Lakeland Regional Health defined its service area as Polk County.

Geographic Location

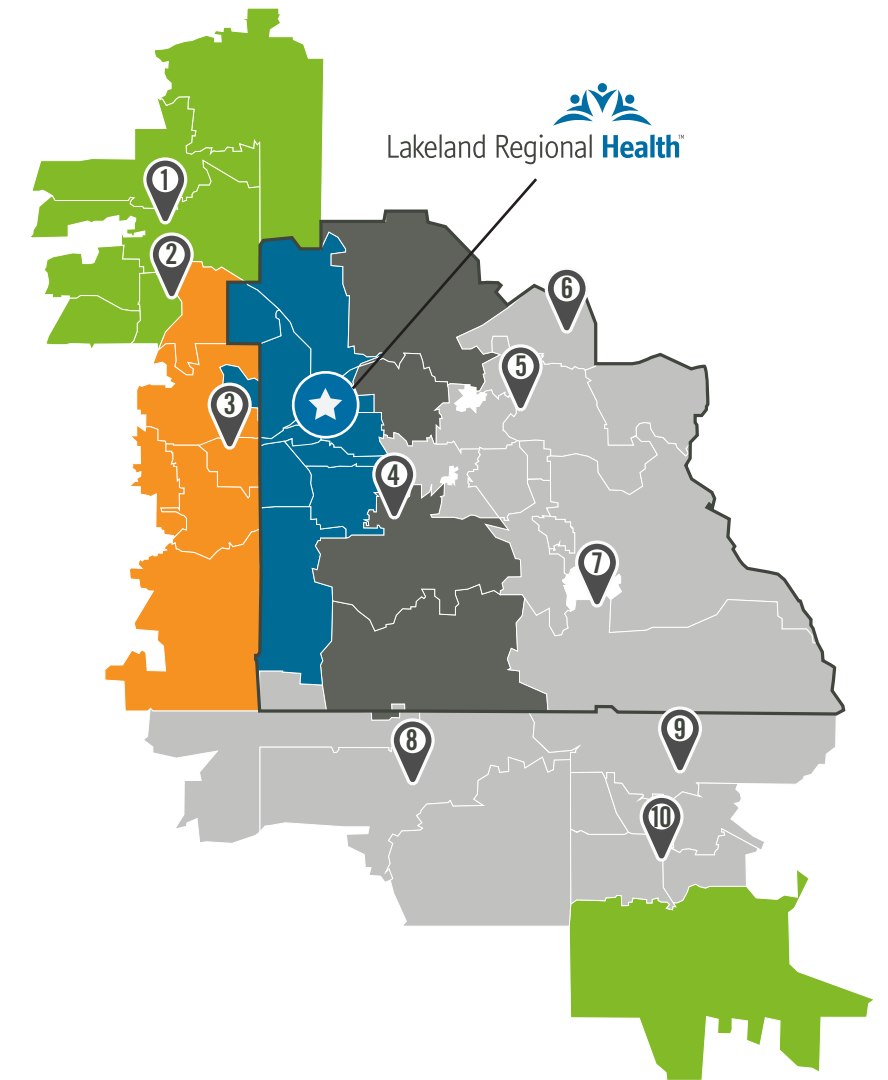
Lakeland Regional Health is located in Florida's Polk County, in the City of Lakeland. Polk County is geographically larger than the state of Rhode Island and equal in size to Delaware. The total area of the County is approximately 2,010 square miles, which makes it the fourth largest county in Florida, exceeded only by Miami-Dade, Palm Beach and Collier Counties.

Population Demographics

All demographic data contained in this report is from the US Census Bureau unless otherwise noted.

The population of Polk County in 2013 was 623,009. Polk County is home to 17 municipalities, with Lakeland as its largest city with a population of 100,710 residents.

The demographic characteristics of a population can impact a variety of health outcomes through differences in health behaviors, healthcare access and utilization.



SERVICE AREA

- PRIMARY
- SECONDARY
- TERTIARY WEST
- TERTIARY EAST/ SOUTHEAST
- MONITORED

AREA HOSPITALS

- | | |
|---|--|
| 1. Pasco Regional Medical Center | 8. Florida Hospital Wauchula |
| 2. East Pasco Medical Center | 9. Florida Hospital Heartland Medical Center |
| 3. South Florida Baptist Hospital | 10. Highlands Regional Medical Center |
| 4. Bartow Regional Medical Center | |
| 5. Winter Haven Hospital | |
| 6. Heart of Florida Regional Medical Center | |
| 7. Lake Wales Hospital | |

DEFINITION OF COMMUNITY SERVED

POLK COUNTY HAS THE FOLLOWING RESIDENT PROFILE:

Age and Gender

The median age in Polk County is 39.8, which is slightly below the median age of Florida, 40.7 years.

Women comprise 51.0% of the population of Polk County. There are nearly 112,000 women of childbearing age (generally ages 15-44).

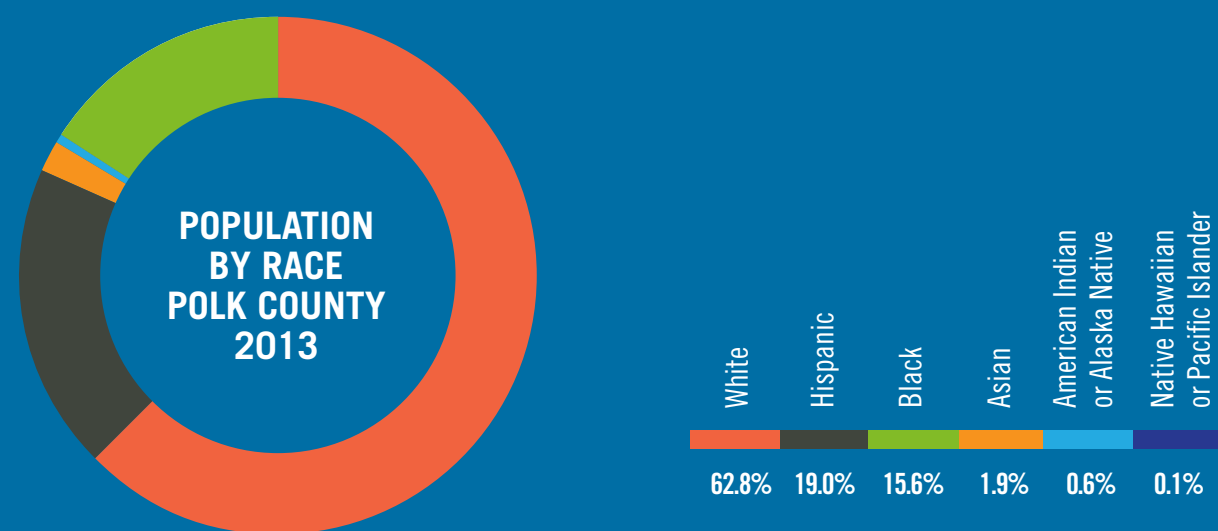
Senior adults (ages 65 and above) represent a considerable portion of the community and also present distinctive healthcare needs. In Polk County, seniors comprise 18.1% of the population. Polk County also has a proportionately large percentage of members of the senior community who are considered “snow birds” visiting from October – April every year. This residency pattern seasonally increases the population in healthcare facilities across the County.

Children under 5 years of age comprise 6.4% of the population, while children 6-18 comprise 23.0% of the population. 27.9% of children live below the poverty level in Polk County.

Race and Ethnicity

Among Polk County residents, 62.8% are white, 19.0% are identified as Hispanic or Latino and 15.6% are black. Asian residents comprise 1.9% of the population, American Indian/Alaskan Natives comprise 0.6% and Native Hawaiian and other Pacific Islanders comprise 0.1%.

Language proficiency can impact everything from an individual’s educational and employment success to the ability to communicate with healthcare providers. In Polk County, 10.5% of the population is foreign born, with 19.0% of the population using a language other than English in the home.



Socioeconomic Factors: Education

Educational achievement is an important predictor of health outcomes. Shown below are the levels of education attained in Polk County and the State of Florida for adults 25 years of age and older. In Polk County, 17.9% of this population has less than a high school diploma, while only 18.2% of this population holds a Bachelor’s degree or higher.

Education Level Attained	Polk County	Florida
Less than High School Graduate	17.9%	14.2%
High School Graduate or Higher	82.1%	85.8%
Bachelor’s Degree or Higher	18.2%	26.2%

The Polk County School Board is the eighth largest educational district in Florida and thirty-first largest in the United States. Polk has 163 school sites and centers including 66 elementary, 4 elementary/middle, 7 elementary/middle/high, 18 middle, 3 middle/high, 18 high, 2 technical career centers, 2 adult, 11 alternative education, 24 charters, 5 Department of Juvenile Justice sites and 3 off-campus Head Start sites. More than 94,000 students are enrolled within this diverse student body. Per the Polk County School Board, the District is the largest employer in Polk County with over 13,000 employees.

Polk County is home to secondary educational institutions including Polk State College, Florida Southern College, Florida Polytechnic University, Southeastern University, Webster University, Everest University, Keiser University, Warner University, Webber International University, Barry University, Fortis Institute and Traviss Career Center.

Research shows that earning a post-secondary degree can lead to better opportunities and advantages not only for individual students, but for their families and their communities.

Socioeconomic Factors: Employment

Polk County is home to a broad range of industries. Formerly, Polk had a largely agriculturally focused economy, but it has since diversified to include industries such as government, education, health services, professional and business services, retail, leisure and hospitality, manufacturing and financial activities.

Polk County’s major employers include the Polk County School Board, Publix Super Markets, Inc., Lakeland Regional Health, the City of Lakeland, GEICO, WellDyne, Mosaic and SaddleCreek Logistics.

Following a lengthy and difficult economic downturn, Polk County has slowly increased its rate of job growth. As of March 2014, the unemployment rate in Polk County, per the US Department of Labor, is 7.1%. In 2010, the rate was closer to 9.0%, showing marked improvement over the last several years. Regionally the unemployment rate is lower at 6.6%.

Socioeconomic Factors: Income and Poverty

High poverty rates indicate that local employment is not sufficient. Poverty depresses the economic viability of a community by decreasing spending, buying power and tax revenue. Poverty can often lead to lower quality schools and poor health outcomes.

The median household income in Polk County is \$43,606. 13.4% of families live below the poverty level, with 58.3% of children eligible for free and reduced lunch. 17.5% of all people in Polk County live below the poverty level, including single individuals and senior adults on fixed incomes.

PROCESS AND METHODS USED TO CONDUCT THE CHNA

The Community Health Needs Assessment was conducted as a collaborative multi-stage process that combined broad subjective and qualitative community input, a complete assessment using quantifiable data, consultation with government leaders with current data and/or other information relevant to the health needs of the community served by Lakeland Regional Health, and consultation with those with special knowledge or expertise in public health to determine and subsequently prioritize community health needs.

The community groups collectively examined a broad scope of factors ranging from demographic and socioeconomic characteristics to health resource availability. The process additionally examined strengths and risks in our community that contribute to or detract from health and wellness, including quality of life, behavioral risk factors and environmental health indicators. Further, our Board of Directors and invited guests provided input and guidance during our organization's Annual Retreat.

The processes providing input relevant to the CHNA and data sources used for analysis included:

MOBILIZING FOR ACTION THROUGH PLANNING AND PARTNERSHIP (MAPP)

This nationally used model for community assessment and action consists of four components:

// Community Themes and Strengths: A mixture of survey, focus group and community leadership engagement to gauge what the broader community understands to be the key issues affecting health.

The State of Florida Department of Health in Polk County and Polk Vision hosted workgroup meetings to complete the Community Themes and Strengths assessment. This group's work answered questions addressing community healthcare perceptions.

// Forces of Change: A review of issues such as legislation, technology, education and employment that may impact the community and its public health system.

Forces of Change also includes engagement and careful consideration by the Lakeland Regional Health Executive Leadership Council on these same issues.

// Community Health Status: A data assessment performed to better understand the local impact of common diseases and healthy and unhealthy behaviors. Community data is compared to regional and national averages along with any local racial or ethnic disparities.

This assessment is performed by reviewing data from sources including:

1. United States Census Bureau
2. Centers for Disease Control and Prevention
3. Florida Health Assessment Resource Tool Set (CHARTS)
4. Florida Behavioral Risk Factor Surveillance System (BRFSS)
5. Robert Wood Johnson Foundation County Health Rankings

Local Public Health System Assessment: A detailed examination of how our community health system's capacity is providing and performing essential public health services.

ONE BAY HEALTH COMMUNITY, AN INITIATIVE OF THE TAMPA BAY PARTNERSHIP

// A clearing house of health data for the Tampa Bay Region.

LAKELAND REGIONAL HEALTH DECISION SUPPORT SERVICES

// Market data analysis inclusive of payor mix and locale.

// Low Income Pool reports from the Lakeland Regional Family Health Center, providing a deeper understanding of the health outcomes of a target population.

// Trauma data from the Trauma Registry.

DATA LIMITATIONS AND INFORMATION GAPS

The data sources used in this analysis provide a thorough and detailed understanding of the current health status of our community. However, there are some limitations with this data, as is true with any available secondary data. Some gaps exist with comparative national data which is derived on schedules that lag behind state or local data. Additionally, data is not always collected on a yearly basis, meaning that some data is several years old.

Based on the experience of the expert stakeholders involved in our CHNA process, we are confident that the community health needs we have identified have a significant impact on vulnerable populations.



COLLABORATIVE PARTNER ORGANIZATIONS 2014-2017 COMMUNITY HEALTH ADVISORY GROUP

The Community Health Advisory Group Collaborative Partner Organizations were selected to provide input from persons who represent the broad interests of the community served by Lakeland Regional Health. The Community Health Advisory Group meets four times per year. Additionally, sub-committees meet eight times per year.

Careful attention was paid to ensure that stakeholders and representatives of government agencies with current information relevant to the health needs of the community and representatives or members of medically underserved, low-income and minority populations and populations with chronic disease needs in the community were included in the CHNA process.

Collaborative Partner Organizations represented on the Community Health Advisory Group include:

Healthcare

Florida Department of Health in Polk County
Lakeland Volunteers in Medicine
Central Florida Healthcare
Healthy Start Coalition
Polk County Government Health Plan
Peace River Behavioral Health Services
Tri-County Human Services

Government

City of Lakeland
Polk County Board of County Commissioners

Business

CareerSource Polk
Lakeland Area Chamber of Commerce
Central Florida Development Council
Lakeland Economic Development Council

Education

Polk County School Board
Florida Polytechnic University
Florida Southern College
Polk State College
Southeastern University
University of South Florida

Social Service

Faith in Action
Lighthouse Ministries
Parker Street Ministries
Rath Senior ConNEXTions & Education Center
Salvation Army
Talbot House Ministries
United Way of Central Florida
Volunteers In Service To The Elderly
YMCA of West Central Florida

Strategic Planning

Lakeland Vision
Polk Vision

PUBLIC AND COMMUNITY HEALTH EXPERTS CONSULTED

The following individuals with specific knowledge of or expertise in public health and those consulted from federal, regional, state or local health departments or other departments or agencies with current data or other relevant information were actively engaged during the CHNA process through MAPP activities.

These experts were convened in collaboration with Lakeland Regional Health's Community Health Advisory Group and Polk Vision, a broad, community-led partnership of organizations, businesses, government and individuals acting collectively to ensure implementation of Polk County's community vision. Additional consultation was conducted as needed during the CHNA process.

NAME	AGENCY REPRESENTED	TITLE	AREA OF EXPERTISE
Bill Gardam	Peace River Center Behavioral Health Services	Executive Director	Behavioral Health
Nelda Jackson	Tri-County Human Services	Program Supervisor	Behavioral Health
Kathleen Munson	Lakeland Area Chamber of Commerce	President	Business
Tim Mitchell	Parker Street Ministries	Executive Director	Community Restoration, Reconciliation and Revitalization Services
Spiros Baltas	Central Florida Development Council	Senior Planner	Economic Development & Planning
Steve Scruggs	Lakeland Economic Development Council	Executive Director	Economic Development/ Entrepreneurship
Dr. Steve Warner	Florida Polytechnic University	Director of Student Affairs	Education
Dr. Anne Kerr or Designee	Florida Southern College	President	Education
Debbie Zimmerman	Polk County School Board	Wellness Manager	Education
Dr. Eileen Holden or Designee	Polk State College	President	Education
Whitney Fung	University of Florida/IFAS Extension, Polk County	Family and Consumer Sciences Extension Agent	Education/Food and Agricultural Sciences
Mariely Rivera	East Coast Migrant Head Start Program	Health Disabilities Services Specialist	Education/Migrant Population
Dora Sanders	East Coast Migrant Head Start Program	Head Start Administrator	Education/Migrant Population
Erik Eich	YMCA of West Central Florida	Executive Director	Health and Wellness Services for Children and Adults
Linda Pilkington	Heart of Florida Regional Medical Center	Director of Community and Government Relations	Healthcare
Cauney Bamberg	Watson Clinic Foundation	Executive Director	Healthcare
Joan Fitchett	Watson Clinic	Director of Laboratory Services	Healthcare

NAME	AGENCY REPRESENTED	TITLE	AREA OF EXPERTISE
Tony Fusaro	Talbot House Ministries	Executive Director	Housing and Workforce Services
Connie Morris	Salvation Army	Major Officer	Housing and Homeless Services
Judy Snow	Talbot House Ministries	Nursing Coordinator	Housing and Workforce Services
Joy Johnson	Polk County Government Health Plan	Executive Director	Indigent Health Care Services
Ben Stevenson	Lakeland Housing Authority	Executive Director	Low Income Housing
Ann Claussen	Central Florida Healthcare	Executive Director	Primary and Specialty Care for Low Income Populations
Bobby Yates	Lakeland Volunteers in Medicine	Executive Director	Primary and Specialty Care for Low Income Populations
Dr. Ulyee Choe	Florida Department of Health in Polk County	Director	Public Health
Linda Hawbaker	Florida Department of Health in Polk County	Health Education Program Manager	Public Health
Colleen Mangan	Florida Department of Health in Polk County	Community Health Improvement Planner	Public Health
Grace Hardy	Valencia Hills Health and Rehabilitation Center	Director of Marketing and Public Relations/Community Advocate	Rehabilitation and Physical Health
Jane Hammond	Elder Point Ministries	Executive Director	Senior Services
Mildred McMillan	Faith in Action	Executive Director	Senior Services
Rosemarie Lamm	Rath Senior ConNEXTions & Education Center	Executive Director	Senior Services
Alice O'Reilly	Volunteers in Service to the Elderly	Executive Director	Senior Services
Brenda Reddout	Catholic Charities	Executive Director	Social Services
Rob Quam	Lake Wales Care Center	Executive Director	Social Services
Terry Worthington	United Way of Central Florida	President	Social Services
Tom Deardorff	Polk County Board of County Commissioners	Director/Planning and Executive Director, Polk County TPO	Transportation/ Development/Planning
Sara Roberts	Polk Vision	Executive Director	Visioning and County Strategic Planning
Laura Rodriguez	Lakeland Vision	Executive Director	Visioning and City Strategic Planning
Mary Jo Plews	Healthy Start Coalition	Executive Director	Women & Children's Health
Stacy Campbell-Domineck	CareerSource Polk	Executive Director	Workforce Development

GENERAL FINDINGS

Red denotes where Polk performance is worse than corresponding data for the region and state. Red is used in the Polk-White demographic only when performance is worse than either Polk-Black or Polk-Hispanic, and when performance is worse than Polk-Overall demographic. Red is used in Polk minority demographics only when performance is worse than the Polk-Overall demographic.

Yellow denotes where cautionary interpretation of data should be applied due to potential low representation of underserved populations as a result of limited access to healthcare.

The Tampa Bay Region refers to the eight counties of Polk, Pinellas, Hillsborough, Pasco, Manatee, Sarasota, Hernando and Citrus.

* Data displayed is for comparative purposes to determine if our community deviates from other similarly measured populations. Certain national and regional data is not readily available to compare exactly with local measurements for a particular year, range or method.

** Sample size too small to report. A red highlighted cell denotes that a disparity exists within the state.

*** The metric, although not higher than Polk-Overall, still displays a clear disparity between race/ethnicity within the county.

ECONOMY/DEMOGRAPHICS	US	FL	TAMPA BAY	POLK
2014 Unemployment (March 2014) (Source: BLS, HealthyTampaBay)	6.7%	6.3%	6.6%	7.1%
2012 High School Graduation Rate (Source: HealthyPeople, HealthyTampaBay, FDOE)	74.9% (2007)	75.6%	73.7%	69.4%
2012 College Graduation Rate (Bachelor's Degree) (Source: HealthyTampaBay)	28.5%	26.2%	25.0%	18.2%
2008-12 Persons Living in Poverty (Source: US Census; HealthyTampaBay)	14.9%	15.6%	14.9%	17.5%
2008-12 Children Living in Poverty (Source: US Census; HealthyTampaBay)	20.8%	22.5%	22.4%	27.9%

HEALTH DISPARITIES

HEALTH OUTCOMES	US	FL	TAMPA BAY	POLK	FLORIDA-WHITE	FLORIDA-BLACK	FLORIDA-HISPANIC	POLK-WHITE	POLK-BLACK	POLK-HISPANIC
Cardiovascular										
2013 Age-Adjusted Major Cardiovascular Diseases Death Rate Per 100,000 (Source: FloridaCharts, NCHS Health, US 2013)	179.1 (2010)	199.5	199.7	229.9	194.8	236.2	169.0	225.1	270.0	144.5
2013 Age-Adjusted Stroke Death Rate Per 100,000 (Source: HealthyPeople, FloridaCharts)	39.1 (2010)	31.3	31.3	34.2	29.4	46.0	27.0	33.0	44.3	24.2
2010 High Cholesterol Prevalence (Source: HealthyTampaBay, FloridaCharts)	27.8% (2009-12)	38.6%	40.8%	35.8%	41.2%	33.3%	30.3%	39.3%	31.5%	14.3%
2010 High Blood Pressure Prevalence (Source: HealthyTampaBay, FloridaCharts, MMWR 2012;61(35): 703-9)	30.4% (2003-2010)	34.3%	35.0%	36.0%	35.4%	41.7%	24.8%	39.5%	28.9%	13.0%
2012 Age-Adjusted Hospitalizations from or with Coronary Heart Disease Rate Per 100,000 (Source: FloridaCharts)	* See Note	338.0	* See Note	409.4	318.5	306.4	301.3	375.7	404.5***	357.2
2012 Age-Adjusted Hospitalizations from Congestive Heart Failure Rate Per 100,000 (Source: FloridaCharts)	* See Note	90.7	* See Note	86.7	72.0	180.2	112.0	69.8	154.5	115.5
Respiratory										
2013 Age-Adjusted Chronic Lower Respiratory Disease (CLRD) Death Rate Per 100,000 (Source: FloridaCharts)	* See Note	41.0	45.4	51.2	43.1	24.4	24.0	52.9	34.9	23.0
2013 Age-Adjusted Asthma Death Rate Per 100,000 (Source: FloridaCharts)	* See Note	0.8	0.6	0.6	0.7	1.8	0.7	0.3	2.3	0.0
2012 Age-Adjusted Hospitalizations from or with Asthma Rate Per 100,000 (Source: FloridaCharts)	* See Note	789.2	* See Note	1025.4	645.4	1245.0	703.1	825.2	1437.8	1048.3

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	TAMPA BAY	POLK	FLORIDA-WHITE	FLORIDA-BLACK	FLORIDA-HISPANIC	POLK-WHITE	POLK-BLACK	POLK-HISPANIC
Cancer										
2013 Age-Adjusted Cancer Death Rate Per 100,000 (Source: HealthyPeople, FloridaCharts)	172.8 (2010)	158.7	162.7	165.1	159.9	157.9	118.5	166.1	188.2	104.5
2013 Age-Adjusted Lung Cancer Death Rate Per 100,000 (Source: HealthyPeople, FloridaCharts)	47.6 (2010)	43.6	47.5	45.7	45.2	34.3	22.9	46.5	43.9	17.1
2013 Age-Adjusted Breast Cancer Death Rate Per 100,000 Females (Source: HealthyPeople FloridaCharts)	22.1 (2010)	19.8	20.3	20.1	19.1	24.6	21.0	18.5	29.5	0.0
2013 Age-Adjusted Colorectal Cancer Death Rate per 100,000 (Source: HealthyPeople, FloridaCharts)	15.9 (2010)	13.9	13.8	15.9	13.7	16.7	13.2	15.7	23.0	13.4
2013 Age-Adjusted Cervical Cancer Death Rate Per 100,000 Females (Source: HealthyPeople, FloridaCharts)	2.3 (2010)	2.9	3.1	4.2	2.7	4.5	2.3	4.1	7.8	4.1
2013 Age-Adjusted Prostate Cancer Death Rate Per 100,000 Males (Source: HealthyPeople, FloridaCharts)	21.9 (2010)	17.8	15.7	14.4	16.2	35.6	17.6	13.0	34.3	5.7
2011 Age-Adjusted Melanoma Incidence Rate Per 100,000 (Source: FloridaCharts)	* See Note	21.5	* See Note	27.9	19.3	1.0	3.8	30.6	0.0	4.5
Diabetes										
2013 Age-Adjusted Diabetes Death Rate Per 100,000 (Source: FloridaCharts, KFF.ORG)	20.8 (2010)	19.6	20.0	20.4	17.2	40.5	17.6	15.5	38.3	20.3
2010 Percentage of Adults with Diagnosed Diabetes (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	8.6%	10.4%	11.4%	14.2%	10.1%	13.1%	9.6%	15.7%	4.5%	12.1%
2012 Age-Adjusted Hospitalization from or with Diabetes Rate Per 100,000 (Source: FloridaCharts)	* See Note	2305.2	* See Note	2993.5	1885.5	4116.2	2387.5	2481.3	4963.4	3379.3
Prenatal and Perinatal Health										
2013 Infant Deaths from 0-364 days from Birth Per 1,000 Live Births (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	6.4 (2009)	6.1	6.6	6.8	4.6	10.6	4.4	5.8	11.1	7.8

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	TAMPA BAY	POLK	FLORIDA-WHITE	FLORIDA-BLACK	FLORIDA-HISPANIC	POLK-WHITE	POLK-BLACK	POLK-HISPANIC
Prenatal and Perinatal Health (cont.)										
2013 Percentage of Births with Low Birth Weight <2500grams - Per 1000 Live Births (Source: HealthyPeople, FloridaCharts)	8.1% (2010)	8.5%	8.6%	8.7%	7.2%	12.9%	7.1%	8.0%	11.5%	7.8%
2013 Teen Birth Rate Mothers Age 15-19 Birth Rate Per 1,000 Females (Source: CDC National Vital Statistics Report, FloridaCharts)	29.4 (2012)	23.8	26.9	37.6	20.8	35.3	24.3	36.7	43.1	46.5
2013 Resident Live Births to Mothers Who Smoked During Pregnancy Percent of Total Births (Source: FloridaCharts)	* See Note	6.6%	9.4%	8.9%	7.8%	3.6%	1.6%	10.3%	4.4%	3.2%
Behavioral/Mental Health										
2013 Age-Adjusted Deaths Due to Suicide Death Rate per 100,000 (Source: HealthyPeople, FloridaCharts)	12.1 (2010)	13.8	15.9	13.2	15.7	4.9	6.9	14.9	4.9	4.8
Injuries										
2013 Motor Vehicle Deaths Death Rate Per 100,000 (Source: CDC FastStats, FloridaCharts)	10.9 (2010)	12.1	12.2	16.5	12.5	11.5	10.0	17.6	12.8	15.1
2012 Violent Crimes - Aggravated Assault Rate Per 100,000 (Source: FloridaCharts, FBI)	241.1 (2011)	309.6	260.5	232.7	DATA NOT AVAILABLE BY RACE/ETHNICITY					
2013 Age-Adjusted Deaths Due to Unintentional Injuries Death Rate Per 100,000 (Source: FloridaCharts)	* See Note	38.8	53.5	45.0	41.7	26.5	24.0	48.9	33.4	28.1
Infectious/Communicable Diseases										
2013 Age-Adjusted Pneumonia/Influenza Death Rate Per 100,000 (Source: CDC NVSS, FloridaCharts)	15.1 (2010)	9.7	10.0	16.4	9.3	12.7	7.4	15.7	22.5	17.0
2013 AIDS Cases Rate Per 100,000 (Source: HealthyPeople, FloridaCharts)	13.0 (2010)	13.9	12.3	12.8	7.6	56.3	17.5	5.2	47.0	13.7
2013 HIV Cases Rate Per 100,000 (Source: CDC HIV Surveillance Report Vol. 23, FloridaCharts)	19.1 (2011)	30.7	20.9	18.0	16.2	85.4	29.9	8.5	57.1	22.2

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	TAMPA BAY	POLK	FLORIDA-WHITE	FLORIDA-BLACK	FLORIDA-HISPANIC	POLK-WHITE	POLK-BLACK	POLK-HISPANIC
Infectious/Communicable Diseases (cont.)										
2012 Gonorrhea, Chlamydia and Infectious Syphilis Rate Per 100,000 (Source: FloridaCharts)	* See Note	518.7	520.2	479.8	DATA NOT AVAILABLE BY RACE/ETHNICITY					
Weight/Nutrition/Activity										
2010 Overweight and Obese Adults % of Adults with BMI >25.0 (Source: HealthyTampaBay, FloridaCharts)	69.2% (2009-2010)	65.0%	65.1%	71.5%	63.1%	79.1%	66.4%	69.8%	86.9%	67.2%
2012 Middle School and High School Students Who are Obese (Source: Florida Charts)	* See Note	11.5%	* See Note	14.5%	DATA NOT AVAILABLE BY RACE/ETHNICITY					
Substance Use										
2010 Adults Who Are Current Cigarette Smokers (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	19.0% (2011)	17.1%	19.7%	21.2%	18.4%	13.7%	13.8%	22.3%	14.6%	23.9%
2010 Consumption of Alcohol Binge Drinking -% of Adult Males Having 5 or More Drinks, or Females Having 4 or More Drinks on 1 Occasion, 1 or More Times in the Past 30 Days (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	26.7% (2011)	15.0%	16.4%	13.9%	16.4%	8.2%	15.3%	12.6%	5.8%	30.2%
Screening and Vaccination										
2010 Influenza Immunizations 65 Years and Older Who Received Vaccine in 2009 (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	66.6% (2008)	65.3%	66.1%	62.1%	69.6%	41.3%	44.5%	63.6%	** See Note	** See Note
2010 Pneumonia Immunizations 65 Years and Older Who Ever Received Vaccine (Source: HealthyPeople, HealthyTampaBay, FloridaCharts)	60.1% (2008)	69.9%	71.5%	68.8%	72.9%	49.1%	57.5%	69.4%	** See Note	** See Note
2010 Women 40+ Who Received Mammogram in Past Year (Source: HealthyTampaBay, FloridaCharts)	* See Note	61.9%	61.2%	59.9%	61.8%	66.6%	59.8%	60.3%	** See Note	** See Note
2010 Women 18+ Who Have Had a Pap Smear in the Past Year (Source: HealthyTampaBay, FloridaCharts)	* See Note	57.1%	54.9%	52.1%	56.4%	62.0%	61.3%	56.4%	** See Note	** See Note
2010 Adults Age 50+ Who Received a Sigmoidoscopy or Colonoscopy in the Past 5 Years (Source: FloridaCharts)	* See Note	56.4%	* See Note	62.7%	57.6%	57.3%	48.8%	62.2%	** See Note	** See Note

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	TAMPA BAY	POLK	FLORIDA-WHITE	FLORIDA-BLACK	FLORIDA-HISPANIC	POLK-WHITE	POLK-BLACK	POLK-HISPANIC
Screening and Vaccination (cont.)										
2010 Men Age 50+ Who Received a Digital Rectal Exam in the Past Year (Source: FloridaCharts)	* See Note	48.5%	Not Available	50.4%	50.4%	41.9%	39.8%	47.3%	** See Note	** See Note
2010 Men Age 50+ Who Received a PSA Test in the Past 2 Years (Source: FloridaCharts)	* See Note	72.6%	Not Available	69.50%	74.7%	67.0%	60.7%	68.7%	** See Note	** See Note
Health Systems/Access										
2012 Adults (age 18-64) with Medical Insurance (Source: KFF.ORG [American Community Survey], HealthyTampaBay)	79.4%	71.2%	74.0%	72.8%	DATA NOT AVAILABLE			78.6%	66.7%	57.6%
2011 Primary Care Providers Rate Per 100,000 (Source: AAMC State Physician Workforce Data Book 2013, CountyHealthRankings, HealthyTampaBay)	80.7 (2012)	69.5	70.0	47.9	NOT APPLICABLE					
2010 Adults Who Could Not See a Doctor At Least Once in the Past Year Due to Cost (Source: FloridaCharts)	* See Note	17.3%	* See Note	21.2%	13.6%	21.8%	29.5%	15.8%	39.2%	38.0%
2013 Mental Health Providers Rate Per 100,000 (Source: CountyHealthRankings)	* See Note	109.9	* See Note	54.2	NOT APPLICABLE					
2012 Dentists Rate Per 100,000 (Source: America's Health Rankings, FloridaCharts)	61.3	54.8	50.8	25.4	NOT APPLICABLE					
2007 Adults Who Did Not Visit a Dentist Due to Cost (Source: HealthyTampaBay, FloridaCharts)	* See Note	19.2%	19.1%	20.2%	15.7%	23.7%	28.3%	17.0%	26.7%	32.8%

PRIORITIZED DESCRIPTION OF COMMUNITY HEALTH NEEDS

While Polk County is slowly seeing improvements in health outcomes, our findings also revealed the need for significant improvement that can and should be made in the health of the community.

In nearly all measures, Polk County continues to perform worse than national, state and other regional counties. In addition, in nearly all reported metrics that were analyzed by race and ethnicity, black residents had poorer core health outcomes than did white residents or residents of Hispanic or Latino ethnicity.

UPON REVIEW AND PRIORITIZATION, THE FOLLOWING AREAS OF NEED WERE SELECTED:

1. Disparities of health outcomes within the black community
2. Access to quality, coordinated care
3. Cancer screening and prevention
4. Obesity
5. Pre-conceptual and perinatal health
6. Injury prevention

EXISTING AVAILABLE HEALTHCARE FACILITIES AND RESOURCES

The following existing healthcare facilities (other than Lakeland Regional Health) are located within the community and respond to the health needs of Polk County.

ACUTE CARE HOSPITALS

PROVIDER	SERVICES	TARGETED POPULATION/FEES
Bartow Regional Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Heart of Florida Regional Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Lake Wales Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Winter Haven Hospital	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing

PHYSICIAN CARE PROVIDERS

PROVIDER	SERVICES	TARGETED POPULATION/FEES
Florida Department of Health Clinics 10 CLINICS	Primary Care Family Planning Specialty Services (HIV/TB) Obstetrics/GYN Dental Care	Uninsured-Sliding Scale Medicaid-Cost Sharing
Federally Qualified Health Centers 1 AGENCY, 6 SITES	Primary Care Obstetrics/GYN Dental Care	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Free Clinics 5 CLINICS	Primary Care Screening Limited Specialty Care Care Coordination	Uninsured/\$0 fees
Polk Healthcare Plan	Primary Care Specialty Care Inpatient Care	Uninsured-Cost Sharing
We Care Polk County (Volunteer physicians providing no cost services to uninsured)	Coordination of specialty care within the community	Uninsured/\$0 fees

URGENT CARE CENTERS

PROVIDER	SERVICES	TARGETED POPULATION/FEES
6 accept Medicaid patients 1 accepts sliding scale	Walk-in Urgent Care Primary Care Services	Uninsured-Sliding Scale fees or Full Fee Scale in most cases Medicaid-Cost Sharing Medicare-Cost Sharing

BEHAVIORAL HEALTH SERVICES

PROVIDER	SERVICES	TARGETED POPULATION/FEES
PEACE RIVER CENTER	24 hour Crisis Intervention Short-Term Behavioral Residential Care Outpatient Behavioral Health Services Substance Abuse Treatment	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
TRI-COUNTY HUMAN SERVICES	Substance Abuse Treatment Rehabilitation Services Residential Long-Term Treatment Services Target programs for groups (HIV/AIDS)	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
WINTER HAVEN HOSPITAL- MENTAL HEALTH SERVICES	Outpatient Mental Health Inpatient Psychiatric Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing

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2014 – 2017
STRATEGIES FOR CHANGE

STRENGTHENING
THE HEALTHIEST
COMMUNITY IN FLORIDA

PART II





OVERVIEW

The statements of rationale, initiatives and anticipated outcomes contained within our Strategies for Change document were developed following performance of a Community Health Needs Assessment (CHNA).

The CHNA was conducted as a collaborative multi-stage process that combined broad subjective and qualitative community input, a complete assessment using quantifiable data, consultation with government leaders with current data and/or other information relevant to the health needs of the community served by Lakeland Regional Health, and consultation with those with special knowledge or expertise in public health to determine and subsequently prioritize community health needs.

We then looked at successful evidence-based initiatives used across the country to select programs that would best meet our community's areas of need.

Upon review and prioritization, the following areas of need were selected:

1. Disparities of health outcomes within the black community
2. Access to quality, coordinated care
3. Cancer screening and prevention
4. Obesity
5. Pre-conceptual and perinatal health
6. Injury prevention

DISPARITIES OF HEALTH OUTCOMES WITHIN THE BLACK COMMUNITY

RATIONALE

According to *Healthy People 2020*, a disparity exists “if a health outcome is seen in a greater or lesser extent between populations.” The black demographic of the community served by Lakeland Regional Health experiences significantly worse health outcomes than those of other minorities or white residents. Polk County’s largest city, Lakeland, has a larger proportion of residents who are black as compared to the total Polk County population, further impacting this critical area of need.

Health disparities in Polk County are demonstrated by the prevalence of chronic and infectious diseases, poor maternal and child health, and are particularly well documented for cardiovascular disease. Low prevalence of diabetes diagnosis and high levels of deaths due to diabetes are evident, indicating a lack of screening and knowledge about diabetes.

The underlying causes of health disparities are complex and include a variety of issues such as socioeconomic status, poverty, and poor access to healthcare and community resources.

INITIATIVES

// Partner with faith-based organizations to implement the Congregational Health Network model. This nationally proven care model uses a navigator/liaison network including trained Lakeland Regional Health employees, church congregants and clergy to assist patients with the transition from hospital to home. To specifically assist the black community, this program will proactively address disparities that exist in cardiopulmonary conditions and diabetes.

REFERENCE

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// This area of need is so great in the community served by Lakeland Regional Health that subsequent initiatives in these Strategies for Change specifically address disparities of health outcomes within the black community whenever possible.

ANTICIPATED OUTCOMES

// Reduced disparities in health outcomes within the black community through increased efforts to prevent disease, promote health and deliver appropriate care.



ACCESS TO QUALITY, COORDINATED CARE

RATIONALE

Lack of access to quality, coordinated care affects both preventive healthcare and treatment of chronic conditions. Further, lack of access to quality, coordinated care prevents patients from most effectively receiving prevention education, early detection, early treatment and referral to other needed health and social services in a primary care setting. Of particular note is the amount of coordinated care required to successfully manage diabetes.

Polk County is facing a critical shortage of primary care physicians as compared to our region and state. According to the Healthy Tampa Bay database, in 2011 Polk County had 47.9 primary care physicians per 100,000 lives compared to the Florida average of 69.5 and the Tampa Bay average of 70.0.

Lakeland Regional Medical Center's Emergency Department had more than 187,000 patient visits during FY 2013, making it the busiest in the State of Florida. The high cost of providing care in the Emergency Department, coupled with a lack of follow-up care and preventive medicine, makes planning programs that enhance the well-being of our community essential.

Lack of access to quality primary and preventative healthcare stems primarily from risk factors associated with limited financial resources and/or lack of a healthcare insurance plan. According to the 2012 U.S. Census American Community Survey, 27.2% of the population in Polk County is without healthcare coverage.

Access to quality, coordinated care is also impeded by insufficient knowledge, apathy, or denial regarding the importance of routine or primary healthcare services; transportation challenges reaching the practices of primary care physicians; and providers unwilling to care for certain individuals. These factors can further complicate care for chronic conditions affecting residents in the community served by Lakeland Regional Health.

INITIATIVES

PROVIDER ACCESS

- // Continue work with the Centers for Medicaid and Medicare Services (CMS) to gain approval for Graduate Medical Education (GME) programs by increasing the level of Federal advocacy both within Congress and with healthcare agencies.
- // Collaborate with community partners, physicians and providers to increase the level of primary care available within the community served by Lakeland Regional Health.
- // Continue to recruit physician providers to Lakeland Regional Health, paying specific attention to seek providers in primary care and behavioral health.

COORDINATION OF CARE

- // Implement innovative and evidence-based care management programs that help patients to activate and engage in their own healthcare.

Specific programs selected include:

Care Transition Intervention

Working collaboratively with our teams, we will recruit two coaches to implement the Care Transition Intervention self-management model for patients transitioning from hospital to home. This nationally proven program empowers patients to engage in their own healthcare and gives them the tools and skills to successfully manage their conditions. We will initially focus on patients with congestive heart failure and will evaluate expansion of the program to address additional high risk diagnoses such as chronic obstructive pulmonary disease, acute myocardial infarction and stroke.

REFERENCE

Coleman E.A., Parry C., Chalmers S., et al. *The Care Transitions Intervention: Results of a Randomized Controlled Trial.* Arch Intern Med. 2006;166:1822-8. [PubMed] Available at: <http://www.caretransitions.org/documents/RCT.pdf>.

Clinical Pharmacy Resource

Add a full-time Clinical Pharmacist to the multi-disciplinary care team at the Lakeland Regional Family Health Center to provide medication management support. The addition of a Clinical Pharmacist with the expertise to make therapeutic adjustments as needed and provide patient education on medications is nationally proven to improve patient outcomes.

REFERENCES

Altowajri A., Phillips C.J., Fitzsimmons D. *A Systematic Review of the Clinical and Economical Effectiveness of Clinical Pharmacist Intervention in Secondary Prevention of Cardiovascular Disease.* JMCP.2013;19(5):408-16.

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Integrated Behavioral Health

Continue to integrate both behavioral and physical health within our Family Health Center using a nationally proven program to work with our behavioral health partners for the continued presence of a full-time, onsite Licensed Mental Health Therapist on staff.

REFERENCE

Collins, Chris, Hewson, Denise, Munger, Richard, and Wade, Torlen. *Evolving Models of Behavioral Health Integration in Primary Care. Milbank Memorial Fund.* 2010. [PubMed] Available at: <http://www.milbank.org/uploads/documents/10430EvolvingCare/EvolvingCare.pdf>.

The National Pre-Diabetes Prevention Grant

Continue the current Centers for Disease Control (CDC) National Diabetes Prevention Grant and increase participation in the program by members of the black community. This 16-week evidence-based intensive program teaches participants strategies to incorporate physical activity and healthy eating into daily life. Lifestyle coaches work with participants to identify emotions and situations that can sabotage their success, and the group process encourages participants to share strategies for dealing with challenging situations.

- // Maximize the digital environment for enhanced coordination of care efficiencies. Continue ongoing development of a health information exchange to appropriately provide access and securely share a patient's vital medical information electronically between our partners and community providers, improving the speed, quality, safety and cost of patient care.
- // Work with community partners to ensure that at risk populations are receiving the vaccinations necessary to improve health. Collaborate with local pharmacies, primary care providers and Low Income Pool Grant partners to expand the provision of influenza vaccinations to those most in need. Continue educating our staff, patients and community on the importance of vaccination.

ANTICIPATED OUTCOMES

- // Increased provider access for patients through support of a well trained, culturally competent and diverse healthcare workforce to ensure access to quality care.
- // Improved care management and reduced barriers to preventive screening, primary care and specialty care by deploying a wide range of strategies including programs, outreach, training and policies to further minimize the negative impact of health conditions.

CANCER SCREENING AND PREVENTION

RATIONALE

In Polk County, the overall rate of death due to cancer is 165.1 per 100,000 lives. This statistic is higher than the Tampa Bay region's rate of 162.7 and state rate of 158.7. Polk County also has a higher prevalence of death from cervical and colon cancer and incidence of melanoma, all of which can often be detected early with proper screening.

INITIATIVES

- // Solicit charitable contributions to the Lakeland Regional Medical Center Foundation to fund anesthesiology services required during colorectal screenings performed for patients of the Lakeland Regional Family Health Center and Lakeland Volunteers in Medicine. This initiative will help address disparities of health outcomes in the black community.
- // Collaborate with the Polk County School Board and YMCA of West Central Florida to explore funding sources available to expand community education for parents, students and teachers about skin cancer protection. These efforts will include organizing resources to build sun shade over playgrounds, exercise areas and bus stops.
- // Expand educational programs offered at the Lakeland Regional Cancer Center by our clinicians in collaboration with area cancer awareness organizations. Two or more new colorectal, breast and prostate cancer education, prevention and/or early detection programs will be offered at a newly constructed education center planned for the Cancer Center campus.
- // Continue to offer smoking education and cessation programs in partnership with our physician providers and groups such as the Tobacco Free Alliance. Engage our team, patients and families, and community to provide smoke-free campuses at Lakeland Regional.

ANTICIPATED OUTCOMES

- // Increased patient access to cancer screening services.
- // Increased community participation in educational programs that highlight resources available for early cancer detection and treatment.
- // Decreased rate of new cancer cases and deaths.



OBESITY

RATIONALE

Obesity is a contributing risk factor for chronic diseases such as heart disease, stroke and diabetes, all of which are major causes of death and preventable hospital stays for the residents of Polk County.

The Healthy People 2020 national health target is to reduce the proportion of adults who are obese to 15.0%. A body mass index (BMI) ≥ 30 is considered obese; a BMI ≥ 40 is considered extremely obese.

According to the Building a Healthier Polk Coalition, Polk County's obesity rate is higher than the state, and ranks high when compared to other counties in the state. In 2011, the Lakeland/Winter Haven metropolitan areas were named the 7th most obese metropolitan service areas in the United States by the Gallup-Healthways Well-Being Index.

During the past several decades, obesity rates for all population groups - regardless of age, sex, race, ethnicity, socioeconomic status, education level or geographic region - have significantly increased.

INITIATIVES

- // Maximize support and increase engagement and leadership in the Polk Vision "Building a Healthier Polk" initiative, a three year plan to reduce obesity based on six key strategy areas:
 - **School based** - Increase overall wellness among youth in Polk County.
 - **Neighborhood/Community** – Increase access to and participation in physical activity for all members of our community and improve community design.
 - **Physicians** - Engage clinical practices to address Body Mass Index (BMI).
 - **Work based** – Support the use of evidence-based employee health promotion/wellness programs to encourage healthy behavior.
 - **Higher education** – Support college wellness programs that address unhealthy dietary patterns and inadequate physical activity.
 - **Communication** – Raise awareness using an ongoing community-wide campaign supporting the initiative's activities and sharing progress toward the goal.

ANTICIPATED OUTCOMES

- // Increased collaboration with local governments, community organizations, employers, education institutions and physician providers to lower the obesity rate in Polk County.



PRE-CONCEPTUAL AND PERINATAL HEALTH

RATIONALE

Pregnancy and childbirth have a lasting impact on the physical, mental, emotional and socioeconomic health of women and their families. Pregnancy related health outcomes are influenced by a woman's health, access to prenatal care and other factors like race, ethnicity, age and income.

In Polk County, pre-conceptual and perinatal health issues are prevalent as a result of factors such as high unemployment, lack of insurance and lack of providers caring for the underserved and uninsured.

According to the Florida Department of Health, Bureau of Vital Statistics, Polk County's teen pregnancy rate of 37.6 births per 1,000 females aged 15-19 is above the state average of 23.8. Additionally, the rate of 6.8 infant deaths per 1,000 live births in Polk County is also higher than that of both the 6.6 Tampa Bay region and 6.1 state rates.

Low birth weights increase the risk of infant mortality. The causes of low birth weight include socio-economic, psychological, behavioral and environmental factors. Populations at risk, including black, Hispanic and teen women, often do not receive needed pre-conceptual care and perinatal care for their infants due to lack of access and insufficient education about the importance of such care.

INITIATIVES

- // Increase support and leadership in the Healthy Start Coalition of Hardee, Highlands and Polk Counties' Teen Pregnancy Prevention Alliance (TPPA). TPPA is an organized group of social service providers, educators, faith leaders, healthcare professionals, business partners, parents and teens working to lower the rate of teen pregnancy and create an environment that supports parents and empowers youth to maximize their potential without the limitations imposed by pregnancy, childbearing and parenting.
- // Actively participate in the Polk County School Board's Parent University initiative. Parent University is a partnership with community agencies and organizations offering free courses, family events and activities at sites across Polk County designed to equip families with new or additional skills, knowledge and resources. Our team of physicians and nurses will offer education and screening programs to engage parents in innovative and meaningful ways, while providing them with access to skilled providers and health education.
- // Use the Congregational Health Network model to reduce teen pregnancies and advance interventional strategies within these faith-based communities.
- // Seek partners to educate our community on the importance of the HPV vaccine for prevention of certain cancers including cervical cancer and cancers of the reproductive system.

ANTICIPATED OUTCOMES

- // Increased birth weights to within state levels.
- // Decreased teen pregnancy rate to within state levels.
- // Decreased rate of infant deaths to within state levels.



INJURY PREVENTION

RATIONALE

According to the Health Resources and Services Administration, injuries leading to disability and death are a leading public health threat facing people 1- 44 years of age. The major categories of injury are unintentional (accidental) and intentional.

Unintentional injuries include those that result from motor vehicle accidents, fires, drowning, falls, poisonings, suffocation, animal bites, recreational and sports-related activities. Intentional injuries are categorized by interpersonal or self-inflicted violence, and include homicide, assaults, suicide, child abuse and neglect, elder abuse and sexual assault.

Injuries are the fourth leading cause of death overall after cancer, heart disease and chronic lower respiratory diseases in the state, according to the Florida Vital Statistics Annual Report. In that report, injuries claimed 13,017 lives and accounted for 6.8% of all resident deaths.

The CDC estimates that injuries cost an estimated \$406 billion per year in healthcare expenses and lost productivity. Nearly 50 million injuries occur each year, placing a staggering burden on the US healthcare system.

In Polk County, the rate of deaths due to motor vehicle accidents is much higher than those of the region and state.

INITIATIVES

// Enhance and expand our Trauma Center's participation in community outreach programs focused on injury prevention.

Programs selected for participation include:

- Coalition for Injury Prevention: The Coalition provides injury prevention education and activities by leveraging partnerships, communication efforts, support networks and community events. The Coalition is a joint effort between Lakeland Regional's Trauma Services and the Polk County Health Department and is comprised of injury prevention professionals from various fields.
- WalkSafe: An elementary school based pediatric pedestrian injury prevention program designed to reduce injuries and fatalities. The WalkSafe program is complimented by National Walk to School Day, SafeKids' "Walk This Way" and the "Safe Routes to School" programs.
- SafeKids: The Polk County Council of the Suncoast Coalition of SafeKids conducts injury prevention events throughout the year focusing on bike helmet fittings and child passenger safety seat checks.



- Certified Child Passenger Safety Services: Provides the services of a Certified Child Passenger Safety Technician employed by Lakeland Regional Health to parents wanting to ensure their child's safety in a motor vehicle.
- Waterproof Florida: A water safety campaign developed by the Florida Department of Health using three main layers of protection: supervision, barriers and emergency preparedness. Major stakeholders in drowning prevention, including Florida Safe Pools, support this campaign with educational events and printed materials.
- Collaboratively implement the Care Transition Intervention Model into our trauma services to assist patients healing from traumatic injuries with an appropriate transition from hospital to rehabilitation facility to home.

ANTICIPATED OUTCOMES

// Increased patient and community participation in injury education and community outreach services provided by our Trauma Center.



HEALTH NEEDS LAKELAND REGIONAL HEALTH DOES NOT INTEND TO ADDRESS

Dental Care

A total of seven significant community health needs were identified through the CHNA process. It was determined that dental care would not be addressed in our Strategies for Change because Lakeland Volunteers in Medicine and the State of Florida Department of Health in Polk County are actively working to meet this area of need within our community.

EVALUATION PLANS

Lakeland Regional Health will monitor and evaluate our Strategies for Change progress for the purpose of tracking implementation and documenting impact on the selected community health needs. Evaluation plans used will be specific to each initiative and will include the collection and documentation of tracking measures.



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