# AdventHealth Wesley Chapel 2020-2022 COMMUNITY HEALTH PLAN

Pasco-Pinellas Hillsborough Community Health System, Inc.
d/b/a AdventHealth Wesley Chapel
Approved by the Hospital Board on: May 6, 2020
Director of Community Benefit:
Kimberly Williams, MPH, MS
Kimberly.R.Williams@AdventHealth.com
Community Benefit Manager:
Barbara J. Morris DHSc, LAT, ATC, CSCS
Barbara.Morris@AdventHealth.com



Extending the Healing Ministry of Christ

## 2020-2022 COMMUNITY HEALTH PLAN

### **Table of Contents**

Sections	Page
Overview	3
Priority Issues to be Addressed	
Mental Health & Mental Disorders	5
Substance Misuse	8
Diabetes	11
Heart Disease/Stroke/High Blood Pressure	14
Respiratory Disease	16
Priority Issues that will not be Addressed	18

#### Acknowledgements

This community health plan was prepared by Kimberly Williams and Barbara Morris, with contributions from members of the AdventHealth Wesley Chapel Community Health Needs Assessment Committee representing health leaders in the community and AdventHealth Wesley Chapel leaders.

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

## **OVERVIEW**

Pasco-Pinellas Hillsborough Community Health System, Inc. d/b/a AdventHealth Wesley Chapel will be referred to in this document as AdventHealth Wesley Chapel or the "Hospital."

#### **Community Health Needs Assessment Process**

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

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

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

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

#### **Priority Issues to be Addressed**

The priority issues to be addressed include:

- 1. Mental Health & Mental Disorders
- 2. Substance Misuse
- 3. Diabetes
- 4. Heart Disease/Stroke/High Blood Pressure
- 5. Respiratory Disease

See Section 3 for goals, objectives and next steps for each priority selected to be addressed.

#### **Priority Issues not to be Addressed**

The priority issues that will not be addressed include:

- 1. Unintentional Injury
- 2. Exercise, Nutrition & Weight (Physical Inactivity, Obesity/Overweight)
- 3. Cancer Mortality
- 4. Oral Health (Poor Dental Health)
- 5. Maternal, Fetal & Infant Health (High Teen Births)
- 6. High Unemployment Rates

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

#### **Board Approval**

On May 6, 2020, the AdventHealth Wesley Chapel Board approved the Community Health Plan goals, objectives and next steps. A link to the 2020 Community Health Plan was posted on the Hospital's website prior to May 15, 2020. The Community Health Plan can be found at <a href="https://www.adventhealth.com/community-health-needs-assessments">https://www.adventhealth.com/community-health-needs-assessments</a>.

### **Ongoing Evaluation**

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

### **For More Information**

Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Wesley Chapel at <a href="https://www.adventhealth.com/community-health-needs-assessments">https://www.adventhealth.com/community-health-needs-assessments</a>.

### **Mental Health/Mental Disorders**

The burden of mental illness in the United States is among the highest of all diseases. Moreover, mental disorders are among the most common causes of disability for adults, children and adolescents. When mental health disorders are untreated, those affected are at high risk for many unhealthy and unsafe behaviors, including alcohol or drug misuse, violent or self-destructive behavior and suicide. Suicide is the 11<sup>th</sup> leading cause of death in the United States for all age groups and the second leading cause of death among people age 25 to 34. In the AdventHealth Wesley Chapel Primary Service Area (PSA), 22% of the PSA Medicare population is experiencing depression, which is higher than the overall state percentage of depression (18.9%). Illnesses such as, heart attack, heart disease (coronary artery disease), stroke, diabetes and cancer can lead to depression.

AdventHealth Wesley Chapel aims to establish new community partnerships with local community organizations, local leaders and stakeholders to implement strategies that will reduce the stigma associated with mental health by increasing public awareness with mental health education and training opportunities.

Goal	Reduce the stigma associated with mental illness in youth and adults by providing access to health education to help communities better understand and respond to signs of mental illness and substance use disorders.
Objective	Increase hospital support of local advocacy groups that provide resources, interventions and support to adults and youth who are affected by mental illness in the Hospital's PSA by supporting three advocacy groups from a baseline of zero advocacy groups by the end of year three (December 31, 2022).
Objective	Increase the number of Mental Health First Aid USA certification training classes provided for free to community members residing in the Hospital's PSA by three certification classes from a baseline of zero certification classes by the end of year three (December 31, 2022).
Objective	Increase the amount of paid staff time for Hospital staff/team members to volunteer with community organizations addressing mental health from a baseline of zero hours to 300 hours by the end of year three (December 31, 2022).

Goal	Increase community-level partnerships to enhance current efforts addressing transportation barriers (social determinants of health) impacting access to mental health care for adults.
Objective	Decrease transportation challenges (barriers) among vulnerable adults residing in the Hospital's PSA by creating three new collaborative strategies from a baseline of zero strategies by the end of year three (December 31, 2022).
Objective	Increase the number of Pasco County NAMI <i>Ending the Silence</i> presentations provided for free to middle and high school-aged youth residing in the Hospital's PSA by six classes from a baseline of zero by the end of year three (December 31, 2022).

- Community benefit staff to manage, implement and evaluate community suicide/depression/mental health strategies to reduce stigma and increase community awareness.
- Provide financial assistance to sponsor printing costs for printing community resource tool kit resource guides on mental illness and substance misuse.
- Provide free Mental Health First Aid certification classes to Pasco County community members (cover cost of training materials, certifications, meals, staff training, etc.).
- Cover costs associated with training community benefit staff as Mental Health First Aid USA instructors.
- Community benefit staff to work with the AdventHealth Care 360 Transition Specialist to track and report referrals to internal and external resources to address suicide/depression/mental health.
- Community benefit staff to actively participate in community meetings with partners addressing suicide/depression/mental health.
- Community benefit staff and members of the Hospital leadership teams to actively serve on community boards associated with addressing suicide/depression/mental health.
- Provide the Hospital staff paid time of four hours per quarter to participate in volunteer activities addressing mental health.

- NAMI Pasco to explore and expand additional community benefit partnerships to increase awareness of and access to suicide/depression/mental health resources, training opportunities and services.
- Gracepoint Wellness to provide linkages to patient care for mental health and substance use disorders for patients seen in the Hospital's emergency department (provide space in emergency room, financial support per patient, etc.).
- Strengthen collaborative relationships with local sites (churches, community centers, schools) to support community efforts to address suicide/depression/mental health.
   All4HealthFL Collaborative (a coalition of local hospitals and Florida Department of Health teams) working together to address behavioral health in Pinellas County.

### **Substance Misuse**

Tobacco use can lead to tobacco/nicotine dependence and serious health problems. Quitting smoking greatly reduces the risk of developing smoking-related diseases such as lung disease. Twenty-Five percent of the adults (aged 18 and older) population in the AdventHealth Wesley Chapel Primary Service Area (PSA) are current cigarette smokers (tobacco usage). An estimated 20.3% of adults (aged 18 and older) self-reported heavy alcohol consumption in the AdventHealth Wesley Chapel PSA. Heavy alcohol consumption is defined as more than two drinks per day on average for men and one drink per day on average for women. Excessive drinking behavior patterns are determinants of future health and may be the cause of significant health issues, such as cirrhosis, cancers and untreated mental and behavioral health needs.

AdventHealth Wesley Chapel recognizes the importance of partnering with local community organizations and stakeholders to strengthen efforts to increase community member access to care and services that aim to prevent the misuse of alcohol, tobacco and other substances.

Goal	Decrease the misuse of alcohol, tobacco and other substances among adults and youth residing in the Hospital's PSA.
Objective	Increase hospital support of local community organizations in the Hospital's PSA that provide resources, interventions and support to adults and youth who are affected by the misuse of alcohol, tobacco and other substances by supporting three advocacy groups from a baseline of zero advocacy groups by the end of year three (December 31, 2022).
Objective	Increase access to community support groups for adults residing in the Hospital's PSA who are recovering from misuse of alcohol, tobacco and other substances by sponsoring three on-going support groups from a baseline of zero by the end of year three (December 31, 2022).
Goal	Increase local collaborations with community organizations to develop to create new strategies that prevent the misuse of alcohol, tobacco and other substances in youth and adults.
Objective	Increase the reach of the Pasco County Substance Abuse Taskforce (PCSAT) into West Pasco communities by co-hosting at least three meetings in West Pasco from a baseline of zero by end of year three (December 31, 2022).

Objective	Increase the current reach of the Pasco County Substance Abuse Taskforce (PCSAT) into West Pasco communities by co-hosting at least one community forum in West Pasco from a baseline of zero by end of year three (December 31, 2022).
Objective	Increase the amount of paid time for Hospital staff/team members to volunteer with community organizations addressing the misuse of alcohol, tobacco and other substances from a baseline of zero hours to 200 hours by the end of year three (December 31, 2022).

- Expand partnership with the Pasco County Substance Abuse Task Force to reach into West Pasco County (host meetings, host forum, share resources, contribute to the costs of community resource tool kits).
- Sponsor at least three alcohol related on-going support groups in community locations (churches, community centers).
- Sponsor printing costs for printing Substance Abuse Task Force community resource guides (substance misuse and mental health resources).
- Provide the Hospital staff paid time of four hours per quarter to participate in volunteer activities addressing substance misuse.
- Community benefit staff and the Hospital's leadership teams paid time and associated travel cost expenses to actively serve on community boards associated with addressing substance misuse.
- Community benefit paid staff hours and associated travel cost expenses to actively participate in community meetings with partners addressing substance misuse.

- NAMI Pasco and Alcohol Anonymous to explore and expand additional community benefit partnerships to increase awareness of and access to suicide/depression/mental health resources, training opportunities and services.
- Pasco County Substance Abuse Taskforce members
- Gracepoint Wellness to provide linkages to patient care for mental health and substance use disorders for patients seen in the Hospital's emergency department (provide space in emergency room, financial support per patient, etc.).

- Strengthen collaborative relationships with local sites (churches, community centers, schools) to support community efforts to address suicide/depression/mental health.
- All4HealthFL Collaborative (a coalition of local hospitals and Florida Department of Health teams) working together to address behavioral health in Pinellas County.

# CHP PRIORITY 3 Diabetes

Diabetes is a prevalent problem in the United States and obesity is the leading risk factor for type 2 diabetes. In the AdventHealth Wesley Chapel Primary Service Area (PSA), 38.2% of adults aged 18 and older self-report that they have a Body Mass Index (BMI) between 25.0 and 30.0, which is considered overweight. Additionally, 10.5% of adults aged 18 and older in the Hospital's PSA have been diagnosed with diabetes, which is greater than the state average of 9.22%. Food insecurity is the household-level economic and social condition of limited or uncertain access to adequate food. In the AdventHealth Wesley Chapel PSA, a total of 39,201 households are food insecure, which represents an estimated 29% of the total population and 24.8% the population under age 18 that experienced food insecurity at some point during in 2014 but are ineligible for state or federal nutrition assistance. Food insecurity increases the risk for obesity. Obesity/Overweight increases the chances of developing type 2 diabetes, high blood pressure, heart disease and stroke.

AdventHealth Wesley Chapel will address this priority through the AdventHealth Food is Health® signature program. The Food is Health® program is a regional initiative, which appears on multiple Community Health Plans, however the projected and reported numbers noted below are specific to AdventHealth Wesley Chapel. The Food is Health® program is provided at no cost for community members who do not have the means or transportation to include fresh vegetables and fruits in their diet. Food is Health® reaches into communities to improve the overall health and wellness of adults living in food deserts or low-income/low-access areas. AdventHealth Wesley Chapel is committed to working together with local community organizations and stakeholders to implement effective strategies to address obesity and access to healthy food in communities.

Goal	Implement strategies that support existing community health education initiatives aimed to address the problem of diabetes in the Hospital's PSA.
Objective	The Food is Health® program will support a series of five nutrition education class series among low income families in the PSA from a baseline of zero by the end of Year 3 (December 31, 2022).

Goal	Increase access to culturally appropriate nutritious food options in food desert or low income/low access areas
Objective	The Food is Health <sup>®</sup> program will distribute 200 produce vouchers (valued at \$10 each) to program participants from a baseline of zero by the end of Year 3 (December 31, 2022).
Objective	The Food is Health <sup>®</sup> program will build and maintain partnerships with local community organizations serving low income/low access communities by engaging four community partners from a baseline of zero by the end of Year 3 (December 21, 2022).
Objective	The Food is Health <sup>®</sup> program will increase the number of participants among low-income families in the PSA by 50 from a baseline of zero by the end of Year 3 (December 31, 2022).
Objective	The Food is Health® program will increase the number of health screenings among adults living in food deserts or low income/low access communities by 75 from a baseline of zero by the end of Year 3 (December 31, 2022).
Objective	The Food is Health <sup>®</sup> community employee volunteer initiative will increase the Hospital's staff/team volunteer participation efforts with organizations addressing food security from a baseline of zero hours to 600 hours by the end of year three (December 31, 2022).

- Provide community benefit staff to manage, implement and evaluate the Food is Health<sup>®</sup> program.
- Community outreach nurse teams to provide free biometric screenings for Food is Health® program participants.
- Cover costs to provide free produce for Food is Health® program participants.
- Community benefit staff to actively participate in community meetings with partners addressing food security.
- Community benefit staff and Hospital leadership teams to actively serve on community boards associated with addressing food security.
- Community benefit staff to strategically align with the Hospital's internal case management teams and Care 360 teams to connect community members with resources to address food security.
- Provide the Hospital staff paid time of four hours per quarter to participate in volunteer activities addressing food security.

- Dube's Mobile Market, a local produce vendor, to provide culturally appropriate nutritious food options among program participants.
- The University of Florida/ Institute of Food and Agricultural Sciences (UF/IFAS) Extension Pinellas County Family Nutrition Program to provide nutrition education for Food is Health® class participants.
- Collaborative relationships with local sites (churches, community centers, schools) to host Food is Health® classes.

### Heart Disease/Stroke/High Blood Pressure

Heart disease and stroke are largely preventable, yet they remain leading causes of death, disability and health care spending in the United States. In the AdventHealth Wesley Chapel Primary Service Area (PSA), 16,255, or 7.6%, of adults aged 18 and older have been told by a doctor that they have coronary heart disease or angina. Additionally, 47.07% have high cholesterol and 29.45% have high blood pressure. High blood pressure and high cholesterol are risk factors of heart disease and stroke.

AdventHealth Wesley Chapel is committed to working together with local community organizations and stakeholders to implement effective strategies to reduce the burden of heart disease and stroke by providing health education in the community, increasing access to community health screenings and connecting community members to resources to help manage blood pressure and cholesterol.

Goal	Improve access to health education, early intervention programs and resources related to prevention of heart disease.
Objective	Increase the number of Hospital-sponsored American Heart Association (AHA) community CPR out-of-hospital bystander classes for adults and youth from a baseline of zero to five by the end of year three (December 31, 2022).
Objective	Increase the amount of paid time for the Hospital staff/team members to volunteer with community organizations addressing heart disease and stroke from a baseline of zero hours to 300 hours by the end of year three (December 31, 2022).
Goal	Enhance community to clinical linkages between community organizations and stakeholders to promote coordinated patient care strategies to control high blood pressure and high cholesterol.
Objective	Increase the number of underinsured/uninsured community members receiving linkages to follow up clinical care at Pioneer Medical Group by providing free biometric screenings and health education at a minimum of three Pioneer Medical Group free mobile clinic events for 150 patients from a baseline of zero patients by the end of year three (December 31, 2022).

- Provide community benefit staff to manage, implement and evaluate community strategies and partnerships.
- Community outreach nurse teams are paid for volunteer hours to provide education and free biometric screenings for community members participating in the Pioneer Medical mobile clinic events.
- Provide medication assistance to uninsured/underinsured community members receiving primary care from Pioneer Medical Clinic.
- Provide community benefit staff to work with the AdventHealth Care 360 Transition Specialist to track and report referrals to resources from the Hospital and the community addressing heart disease (food security programs, nutrition education, medication assistance, transportation to appointments, etc.).
- Community benefit staff to actively participate in community meetings with partners addressing heart disease.
- Provide the Hospital staff paid time of four hours per quarter to participate in volunteer activities addressing heart disease.
- Community benefit staff and the Hospital cardiopulmonary leadership teams to actively serve on community boards associated with addressing heart disease.

- American Heart Association to expand community benefit programs aimed to increase community access to heart disease education and training opportunities (community CPR training classes, CPR home kits and train-the-trainer education series).
- Pioneer Medical Group to provide uninsured/underused patient referrals for access to primary care services.
- Collaborative relationships with local sites (churches, community centers, schools) to host free community education and training opportunities.

### **Respiratory Disease**

Tobacco use can lead to tobacco/nicotine dependence and serious health problems. Quitting smoking greatly reduces the risk of developing smoking-related diseases such as lung disease. Asthma is a respiratory disease that is often exacerbated by poor environmental conditions such as seasonal patterns, cigarette smoke, etc.). Twenty-Five percent of the adults (aged 18 and older) population in the AdventHealth Wesley Chapel Primary Service Area (PSA) are current cigarette smokers (tobacco usage), 15.7% of adults have asthma and 53% of the PSA population (per 100,000) die from lung disease.

AdventHealth Wesley Chapel is partnering with local community organizations and stakeholders to strengthen access to tobacco prevention and treatment resources to quit smoking and reduce respiratory diseases.

Goal	Decrease tobacco use among adults and youth residing in the Hospital's PSA.
Objective	Partner with Gulf Coast Area Health Education Center (AHEC) to increase community awareness of free programs and resources available for tobacco cessation by providing nine community lunch and learn sessions from a baseline of zero by the end of year three (December 31, 2022).
Objective	Increase knowledge of free tobacco cessation programs and tobacco prevention/treatment resources for patients at discharge by partnering with AHEC to provide continuing education classes to 200 team members (treating patients with tobacco use) from a baseline of zero by the end of year three (December 31, 2022).
Goal	Increase access to smoking cessation classes for adults by partnering with local community organizations to provide linkages to care.
Objective	Provide patient referrals at discharge to enroll in free AHEC tobacco cessation programs and receive free intervention therapies to quit smoking tobacco. Through a partnership with AHEC, create an internal referral system to link adults residing in the Hospital's PSA, providing resources for 50 patients from a baseline of zero by end of year three (December 31, 2022).
Objective	Increase access to tobacco cessation classes in adults residing in the Hospital's PSA by 10 classes from a baseline of zero by the end of year three (December 31, 2022).

- Community benefit staff to work with the AdventHealth Care 360 Transition Specialist, Case Management Department and AHEC staff to track and report referrals from Hospital to smoking cessation classes.
- Community benefit staff to actively participate in community meetings with partners addressing tobacco use.
- Community benefit staff and the Hospital leadership teams to actively serve on community boards associated with addressing tobacco use.
- Provide the Hospital staff paid time of four hours per quarter to participate in volunteer activities addressing tobacco use.

- American Heart Association to expand community benefit strategies to increase community awareness of the negative impacts of tobacco use on heart health (youth vaping crisis initiative and advocacy efforts).
- Pasco County Substance Abuse Task Force to reach into West Pasco County (host meetings, share resources and contribute to the costs of community resource tool kits).
- Strengthen collaborative relationships with local sites (churches, community centers, schools) to support community efforts to address tobacco use.
- Gulf Coast Area Health Education Center (AHEC) Tobacco Free Florida Smoking Cessation Program to provide free education and resources (patches and other quit aids) for smoking cessation.

# **PRIORITIES THAT WILL NOT BE ADDRESSED**

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

Potential challenges or barriers to addressing the need exist such as:

(1) The issue should not be addressed as an individual problem but can be indirectly impacted positively by first addressing multiple issues selected above by the Hospital CHNAC.

(2) CHNAC's did not perceive the ability to have a measurable impact on the issue with the current resources available to the community and the Hospital.

#### **1. Unintentional Injury**

Accidents are the leading cause of death in the United States. In the AdventHealth Wesley Chapel Primary Service Areas (PSAs) the age-adjusted rate of death due to unintentional injury (accident) per 100,000 population is 55.1, which is higher than the state rate of 44.4.

#### 2. Exercise, Nutrition & Weight (Physical Inactivity, Obesity/Overweight)

In the AdventHealth Wesley Chapel PSA, approximately 57,264 or 25.8% of adults aged 20 and older self-report no leisure time for activity, which may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health. In the AdventHealth Wesley Chapel PSA, a total of 39,201 households are food insecure, which represents an estimated 29% of the total population that experienced food insecurity at some point during 2014 but are ineligible for State or Federal nutrition assistance. Food insecurity increases risks for obesity. Furthermore, 38.2% of adults aged 18 and older self-report that they have a Body Mass Index (BMI) between 25.0 and 30.0, which is considered overweight. This is slightly higher than the state percentages. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

#### **3. Cancer Mortality**

Cancer is a leading cause of death and it is important to identify cancers separately to better target interventions. In the AdventHealth PSAs, the cancer incidence rate (new cases) for lung, prostate, cervical and colon and rectum cancers are higher than the state rate. Furthermore, the rate of death due to malignant neoplasm (cancer) per 100,000 population is 168.8, which is higher than the state rate of 152.9.

#### 4. Oral Health (Poor Dental Health)

In the AdventHealth PSA, the rate of qualified dentists per 100,000 population is 38 and is lower than the state rate. This has a negative effect on access to dental care.

#### 5. Maternal, Fetal & Infant Health (High Teen Births)

In the AdventHealth Wesley Chapel PSAs, deaths to infants less than one year of age per 1,000 births is 6.7 (7.0 is the state rate). This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health. Furthermore, the rate of total births to women aged 15 to 19 per 1,000 (for the female population aged 15-19) is 36.85, which is higher than the state rate of 36.1. This indicator is relevant because, in many cases, teen parents require unique social, economic and health support services. Additionally, high rates of teen pregnancy may indicate the prevalence of unsafe sex practices.

#### 6. High Unemployment Rates

In the AdventHealth Wesley Chapel PSAs, the unemployment rate is 6.3% compared to state average of 3.8%. This is a contributing factor to uninsured rates as well as poverty. Unemployment may negatively impact psychological wellbeing of community members as well.