



**2023-2025**  
**AdventHealth**  
**Sebring**  
**Community**  
**Health Plan**

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## Acknowledgements

This community health plan was prepared by Alison Grooms, West Florida Division Community Health Coordinator, with contributions from members of AdventHealth Sebring’s Community Health Needs Assessment Committee representing health leaders in the community and hospital leaders.

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



# EXECUTIVE SUMMARY



# I Executive Summary

Adventist Health System/Sunbelt, Inc. d/b/a AdventHealth Sebring will be referred to in this document as AdventHealth Sebring or the “Hospital”.

## Community Health Needs Assessment Process

AdventHealth Sebring in Sebring, Florida, conducted a community health needs assessment in 2022. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. This assessment process was the most comprehensive to date and included survey questions related to diversity, equity and inclusion. In addition, the priorities were defined, when possible, in alignment with Healthy People 2030, national public health priorities to improve health and well-being.

In order to ensure broad community input, AdventHealth Sebring created a Community Health Needs Assessment Committee (CHNAC) to help guide the Hospital through the assessment process. The CHNAC included representation from the Hospital, public health experts and the broad community. This included intentional representation from low-income, minority and other underserved populations. The prioritization process sought to balance our ability to impact the greatest number of people who are facing the greatest disparities.

The CHNAC met throughout 2021-2022. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan to address those priorities. Learn more about Healthy People 2030 at <https://health.gov/healthypeople>.

## Community Health Plan Process

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

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

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



# I Executive Summary

## Priorities Addressed

The priorities addressed include:

1. Access to Healthy Foods (and Diabetes Prevention)
2. Access to Quality Health Care
3. Behavioral Health (Mental Health & Substance Misuse)

*See page 9 for goals, objectives and next steps for each priority selected to be addressed.*

## Priorities Not Addressed

The priorities not addressed include:

1. Economy
2. Older Adult Health
3. Prevention and Safety
4. Children's Health

*See page 16 for an explanation of why the Hospital is not addressing these issues.*



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

# Executive Summary

## Board Approval

On April 20, 2023, the AdventHealth Sebring Board approved the Community Health Plan goals, objectives and next steps. A link to the 2023 Community Health Plan was posted on the Hospital's website prior to May 15, 2023.

## Ongoing Evaluation

AdventHealth Sebring's fiscal year is January – December. For 2023, the Community Health Plan will be deployed beginning May 15, 2023, and evaluated at the end of the calendar year. In 2024 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital's IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

## For More Information

Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Sebring at <https://www.adventhealth.com/community-health-needs-assessments>.



# ABOUT ADVENTHEALTH



## **| About AdventHealth**

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

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



### **About AdventHealth Sebring**

AdventHealth Sebring is a 171-bed full-service hospital that was opened to serve the Florida Heartland region in 1998. The Heartland region is a part of Florida located to the north and west of Lake Okeechobee, composed of six inland, non-metropolitan counties- DeSoto, Glades, Hardee, Hendry, Highlands and Okeechobee. In 2021, the Hospital saw 35,914 total Emergency Department visits, performed 6,653 Coronary Interventional procedures and had 989 OB deliveries. AdventHealth Sebring has key service lines, including a heart & vascular center, Cancer Institute, Breast Care Center, Blessed Beginnings Birthing Center and Emergency Services. Most recently, the Hospital has established a retail pharmacy and Orthopedic unit. AdventHealth Sebring is on the cutting edge of technology in Highlands County, being the only Orthopedic program to use the MAKOpasty® Robot and only Surgical Services Program to use the da Vinci® Robot. The Hospital has received recognition for its patient safety, orthopedics, heart care and as a breast imaging center of excellence. The Hospital has been recognized and received an “A” from the Leapfrog Group in patient safety. For more information, visit [www.AdventHealthSebring.com](http://www.AdventHealthSebring.com).

# PRIORITIES ADDRESSED



# Access to Healthy Foods (and Diabetes Prevention)

In Highlands County, one-third of residents live in an area where there is low access to a grocery store, which can make having a healthy, nutrient-dense diet more challenging. Also, almost a fifth (17.9%) of community survey respondents shared they were worried that they would run out of food before they had money to buy more. Respondents also expressed concern about increasing food prices and the lack of healthy food options in local neighborhoods. During the prioritization process, the decision was made to address diabetes through the access to healthy foods priority. An individual’s quality of life when living with diabetes is heavily influenced by how well they can manage their blood sugar and eating well is key to blood sugar management. According to secondary data, diabetes in the Medicare population in Highlands County is at 30%, which is slightly higher than the state (27.8%) and the US (27%).

**Goal 1:** Increase access to nutritious foods, resources, and nutrition education to help promote diabetes prevention and healthy living

**Objective 1.1:** By December 31, 2025, increase the percentage of adults in the AdventHealth Food is Health® program who report redeeming at least five produce vouchers to access nutritious foods for their families from a baseline of 57% to 68% (Division-wide).

The AdventHealth Food is Health® program provides series-based nutrition education and culturally appropriate, nutritious foods to participants in low income/low access areas in hospital’s community. The program involves collaborations from a variety of community partners, including subject matter experts providing education, mobile produce vendors, and sites in the community where classes are held. AdventHealth sponsors the cost of produce for participants and assists with coordinating classes.

**Target Population:** Low-income and uninsured and underinsured adults residing within the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support AdventHealth Food is Health® classes	# of nutrition education classes supported # of participants attending nutrition classes # of participants redeeming at least 5 produce vouchers	Division community benefit team – staff time to coordinate classes with locations and instructors  Hospital - \$2,700 to cover incentives for participants (free vouchers to buy fruits and vegetables)	Feeding Tampa Bay to provide produce and health education classes  Partner with organizations to host classes at their locations (Healthy Families Highlands via Highlands County Board of County Commissioners)  Partner with food pantry sites to host classes (Nu-Hope Elder Care, Heartland Food Reservoir, Samaritan’s Touch Care Center)  Faith community locations to host classes	X	X	X

# Access to Healthy Foods (and Diabetes Prevention)

**Goal 1 continued:** Increase access to nutritious foods, resources, and nutrition education to help promote diabetes prevention and healthy living

**Objective 1.2:** By December 31, 2025, increase the number of participants in Hospital-sponsored diabetes prevention and wellness programs from a baseline of 68 participants to 235 participants.

**Target Population:** Low-income and uninsured and underinsured adults residing within the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Hospital-sponsored and community programs addressing diabetes and wellness	Cost of food, educational supplies, and in-kind donations Cost of cash donations/sponsorships # of paid staff hours # of participants or people served	Hospital- \$1,000 to cover donations/ sponsorships to support health/nutrition/diabetes education programs and access to healthy foods Hospital provides meeting space to host classes Hospital leadership participation on community boards on paid staff time Hospital staff time to participate at events and serve as educators and/or subject matter expert speakers Hospital team to deliver nutrition and health education class series (such as Dr. Roquiz’ Reversing Diabetes class)	Partner with organizations to host classes at their locations (DOH- Highlands) Florida Department of Health Highlands (DOH- Highlands) offers Diabetes Self-Management Education Classes Senior Connection Center offers chronic disease and diabetes programs Faith community locations to host classes	X	X	X

# Access to Quality Health Care

Community members cited barriers to accessing quality health care such as cost or financial concerns, lack of trust in the providers, lack of insurance or limited coverage, inability to take time off work for appointments, lack of awareness or difficulty navigating the healthcare system and language barriers for non-English speakers when trying to sign up for insurance or complete paperwork. More than half (60%) of community survey respondents reported accessing care in the emergency department for non-emergency needs. Inadequate health insurance coverage is one of the largest barriers to health care access and the unequal distribution of coverage contributes to disparities in health. Highlands County falls within the lower 25% of counties in both the state and in the US for adults who do not have any kind of health insurance coverage. Out-of-pocket medical care costs may lead individuals to delay or forgo needed care (such as doctor visits, dental care and medications), and medical debt is common among both insured and uninsured individuals. Highlands County also has a lower rate of primary care providers in the area compared to the state, 57 providers per 100,000 versus 73 providers per 100,000.

**Goal 1:** Promote the attainment and maintenance of health through health education and access to care

**Objective 1.1:** By December 31, 2025, increase the number of community members trained in Hospital-sponsored American Heart Association (AHA) Hands-Only CPR classes for adults and youth from a baseline of 573 to 4,200 people trained (Division-wide).

**Target Population:** Low-income and uninsured or underinsured adults and senior adults residing within the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
American Heart Association Hands-Only CPR Classes	# of participants trained in Hands-Only CPR	Division Community Benefit team coordinates classes with community partners and community members  Hospital will pay for Hands-Only CPR kits for participants  Hospital to provide training room space to host classes	American Heart Association (AHA) to provide Hands-Only CPR coordination of classes and instruction. Division-wide sponsorship in the amount of \$40k has been allotted to AHA to provide classes in CPR to the community.  Partner with community partners to host classes at their organizations.  Highlands County Schools  Faith Community  Senior Living Centers  Low-income housing complexes	X	X	X

# Access to Quality Health Care

**Goal 1 continued:** Promote the attainment and maintenance of health through health education and access to care

**Objective 1.2:** By December 31, 2025, increase the number of participants in Hospital-sponsored access to care programs from a baseline of 20 participants to 100 participants.

**Target Population:** Low-income and uninsured or underinsured adults and senior adults residing within the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Hospital-sponsored and community programs addressing access to care and health promotion events in partnership with faith communities and the Florida Department of Health in Highlands County (DOH-Highlands).	# of paid staff hours Cost of medical/educational supplies and in-kind donations Cost of cash donations/sponsorships # of referrals to access to care organizations # of participants or people served	Division community benefit team – staff time to coordinate classes with locations and instructors Hospital- \$1,000 to cover donations/sponsorships to support access to care programs Hospital leadership participation on community boards on paid staff time Hospital staff time to participate at events and serve as educators and/or subject matter expert speakers Hospital to refer patients to community partners for follow-up care and specialist care utilizing Care 360 and the Whole Health Hub Hospital team to plan and deliver health education classes and events at local faith community sites (such a Dr. Roquiz’ Lifestyle and Longevity class series)	Florida Department of Health Highlands County (DOH – Highlands) Faith community Community Health Worker Program through the Heartland Rural Health Network Samaritan’s Touch Care Center offers free medical services to uninsured and low-income individuals and families Central Florida Health Care (CFHC) will be adding their services in Sebring soon for medical, dental, behavioral health and pharmacy services for uninsured and underinsured	X	X	X

# Behavioral Health (Mental Health and Substance Misuse)

In Highlands County, 27% of community survey respondents reported having been diagnosed with a depressive disorder or anxiety disorder. In Highlands County the age-adjusted death rate due to suicide is 25.2 per 100,000 which is twice that of the state (13.1 per 100,000) and the US (13.5 per 100,000). More than ten percent (12.1%) of community survey respondents were unable to access mental health resources when needed in the last 12 months. The top reasons cited were inability to pay for care, to schedule an appointment when needed and to take time off work for appointments. Substance misuse also emerged as a top concern, reflected in both primary and secondary data. Teen vaping was cited as the highest area of concern for tobacco use in the county from primary data. Secondary data showed the rate of drug and opioid-involved deaths as 35.4 per 100,000 in Highlands County, higher than both the state (26.7 per 100,000) and the nation (23 per 100,000).

**Goal 1:** Reduce the impact of mental, emotional, and behavioral health disorders

**Objective 1.1:** By December 31, 2025, increase the number of participants who attend Hospital-sponsored Mental Health First Aid certification classes from a baseline of 258 participants to 700 participants (Division-wide).

**Target Population:** Adults who are low-income, underinsured, or uninsured residing in the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Mental Health First Aid (MHFA)	<p># of participants trained in Mental Health First Aid USA</p> <p># of participants who indicate they are very likely to use the ALGEE (MHFA) Action Plan to connect an adult experiencing a mental health/substance use challenge to appropriate help and resources (data source from MHFA course evaluation)</p>	<p>Division community benefit team coordinates classes for community organizations and community members</p> <p>Hospital will pay for enrollment fee for participants enrolled in each class, as well as breakfast and lunch served in each class</p> <p>Hospital staff time to promote program to the community</p> <p>Hospital marketing team staff time spent in promoting MHFA classes</p> <p>Hospital chaplain/spiritual team to promote program to community</p> <p>Hospital to provide meeting space to host classes</p>	<p>Partner with community partners who teach MHFA to deliver instruction (such as Peace River Center)</p> <p>Partner with community partners who want to host classes at their organizations</p> <p>Partner with organizations to promote MHFA classes (such as DOH – Highlands, Heartland Core Wellness, Healthy Families Highlands, Highlands County Board of County Commissioners)</p>	X	X	X

# Behavioral Health (Mental Health and Substance Misuse)

**Goal 1 continued:** Reduce the impact of mental, emotional, and behavioral health disorders

**Objective 1.2:** By December 31, 2025, increase the number of participants in Hospital-sponsored behavioral health education programs from a baseline of 40 participants to 140 participants.

**Target Population:** Adults who are low-income, underinsured, or uninsured residing in the Hospital’s primary service area

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Hospital-sponsored and community behavioral health education programs	# of paid staff hours Cost of educational supplies and in-kind donations Cost of cash donations/sponsorships # of referrals to behavioral health care organizations # of participants	Division community benefit team – staff time to coordinate classes with locations and instructors Hospital provide meeting space, marketing and food for classes Hospital leadership participation on community boards on paid staff time Hospital staff time to participate at events and serve as educators and/or subject matter expert speakers Hospital- \$1,000 to cover donations/sponsorships to support mental health programs Hospital to screen patients for tobacco use and refer to AHEC tobacco cessation programs via CARE 360 and the Whole Health Hub Hospital team to deliver mental health education class series (such as Dr. Roquiz’ Nedley Depression and Anxiety Recovery and Optimize your Brain programs)	Partner with organizations to provide behavioral health education [Central Florida Area Health Education Center (AHEC)] Partner with faith communities to host classes Tri-County Human Services offers substance abuse programs Heartland Core Wellness Volunteers of America	X	X	X

# PRIORITIES NOT ADDRESSED



# I Priorities Not Addressed

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

## Economy

In Highlands County 12.9% of families reported living below the poverty level in the primary data findings. This percentage is higher than both the state (9.3%) and national (9.1%) values. Seven percent of respondents reported being worried that they may not have stable housing in the next two months. Community respondents shared that job availability is scarce and low wage jobs are not appealing. They also expressed concern for rising food prices and housing costs and limited social security funds.

While a strong economy is important in the overall health needs of the community, the CHNAC did not perceive this priority area as one that could be easily addressed within the three-year CHP cycle. It was voted the lowest in the ability to impact category in the prioritization meeting. Therefore, the Hospital will not work to address this priority area in the upcoming CHP.

## Older Adult Health

The primary data collection revealed that respondents felt aging problems, such as difficulty getting around, dementia and arthritis, was a top concern. They also shared that there were no specialists, such as neurologists, in rural areas that encompass Highlands County and that specialists such as these are needed as individuals age. Transportation challenges were also shared as areas of concern for this population, specifically those who are mobility challenged. Respondents also expressed a concern for common stereotypes faced by older adults and inequalities they experience when accessing care.

Older Adult Health ranked seventh among the other topic areas in the secondary data analysis with a score of 1.97 but was ultimately not selected as one of the top three priority areas to address in the next three-year plan. Participants in the prioritization selection meeting felt the top three priority areas chosen were significant and easier to address with the resources available and therefore, the Hospital will not be addressing Older Adult Health directly in the upcoming CHP.



# I Priorities Not Addressed

## Children's Health

Children's Health ranked third out of the nine topic areas of health concern. The areas of concern under this topic included child food insecurity, health insurance coverage and medical care and mental health care. The rate of food insecurity among children in Highlands County (24.3%) is higher than that of the state (17.1%) and US (14.6%). Highlands also shows a lower percentage of children with health insurance at 91.7% compared to 92.4% in the state and 94.3% in the US. Over 16% of caregivers of children responded not being able to access mental or behavioral health for their children when needed. From the primary data findings many caregivers expressed concern for lack of pediatric providers available, especially specialists, in the area. They also shared a need for increased education and communication for parents and cultural competency among healthcare workers.

Children's health is of utmost importance, but the Collaborative decided that instead of focusing on it as a stand-alone priority area, instead children would be a target population group to focus on among all the priority areas.

## Prevention and Safety

Prevention and Safety was identified as a significant health need in the secondary data analysis but scored as one of the lowest out of all the topic areas. Primary data collection results determined Highlands County residents were particularly concerned with distracted driving (including texting, eating and talking on the phone while driving). This activity was noted as a risky behavior that is harmful to the overall health of the community.

Prevention and Safety ranked eighth out of nine total significant health needs identified from both primary and secondary data sources and was not voted as a top priority to address by the CHNAC in the upcoming three-year Community Health Plan.



**Adventist Health System/Sunbelt, Inc. d/b/a  
AdventHealth Sebring**

CHP Approved by the Hospital Board on: April 20, 2023

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