

A group of diverse elderly people walking outdoors and smiling. The group includes a woman with glasses, a woman with braids, and a woman with short grey hair. They are dressed in casual, comfortable clothing. The background is a soft-focus outdoor setting with trees and a building.

2023-2025
AdventHealth
Wauchula
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 Wauchula’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 Wauchula will be referred to in this document as AdventHealth Wauchula or the “Hospital”.

Community Health Needs Assessment Process

AdventHealth Wauchula in Wauchula, 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 Wauchula 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 Wauchula is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to all we serve.



Executive Summary

Priorities Addressed

The priorities addressed include:

1. Access to Healthy Foods
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. Children's Health
2. Economy
3. Older Adult Health
4. Diabetes

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.

I Executive Summary

Board Approval

On April 20, 2023, the AdventHealth Wauchula 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 Wauchula'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 Wauchula at <https://www.adventhealth.com/community-health-needs-assessments>.



ABOUT ADVENTHEALTH



■ About AdventHealth

AdventHealth Wauchula 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 Wauchula

AdventHealth Wauchula is a 25-bed full-service hospital that was built in 1968. In 1994, the facility was acquired by AdventHealth and went on to build their current location in 2017. The Hospital contains the only ER in Hardee County and saw 14,168 ER visits in 2021. AdventHealth Wauchula offers many inpatient and outpatient services, including physical & occupational therapy, a transitional care unit, which saw 526 patients in 2021, medical surgical swing unit and the only mammography unit in Hardee County, the Linda Adler Mammography Center. In 2019, AdventHealth Wauchula opened a Wellness Center to better meet the health needs of Hardee County. The Hospital has been recognized as a Top Rural Hospital by The Leapfrog Group and best hospital for patient safety. For more information, visit www.AdventHealthWauchula.com.

PRIORITIES ADDRESSED



Access to Healthy Foods

Access to quality healthy food was a top need prioritized during the assessment. In Hardee County, one-quarter 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. Almost one-fifth (20%) of community survey respondents reported that within the past 12 months, the food they had purchased from the store did not last and they did not have the money to purchase more. Also, more than a quarter (28.6%) 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.

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 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 Burgin Farms- vendor will accept vouchers from participants in exchange for fruits and vegetables Partner with organizations to host classes at their locations (DOH-Hardee) Low-income housing complex (such as Valencia Gardens) as a host site for classes Faith community locations to host classes	X	X	X

Access to Healthy Foods

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 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 provide 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- Hardee) Faith community churches to host classes Central Florida Health Care (CFHC) offers free Diabetes Self-Management Education classes for uninsured and underinsured Central Florida Health Care (CFHC) offers one on one visits with dietitians for uninsured and underinsured	X	X	X

Access to Quality Health Care

More than one-third (39%) of community survey respondents reported accessing care in the emergency department for non-emergency needs. While 14.5% of respondents shared that they needed medical care in the last 12 months, but they did not receive it. Some of the top barriers that prevented care included cost, inability to schedule an appointment, inability to take time off work, transportation barriers, lack of health insurance coverage, lack of trust in providers and an inability to find a doctor who accepts certain types of health insurance. 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. 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. Hardee County falls within the lower 25% of counties in both the state of Florida and in the US for adults who do not have any kind of health insurance coverage. Hardee County also has a lower rate of primary care providers (11 per 100,000) compared to the state, 57 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	<p>Division community benefit team coordinates classes with community partners and community members</p> <p>Hospital will pay for Hands-Only CPR kits for participants</p> <p>Hospital to provide training room space to host classes</p>	<p>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.</p> <p>Partner with community partners to host classes at their organizations</p> <p>Hardee County Schools</p> <p>Faith community</p> <p>Senior living centers</p> <p>Low-income housing complexes</p>	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 Hardee County (DOH- Hardee).	<p># of paid staff hours</p> <p>Cost of medical/educational supplies and in-kind donations</p> <p>Cost of cash donations/sponsorships</p> <p># of referrals to access to care organizations</p> <p># of participants or people served</p>	<p>Division community benefit team – staff time to coordinate classes with locations and instructors</p> <p>Hospital- \$1,000 to cover donations/ sponsorships to support access to care programs</p> <p>Hospital leadership participation on community boards on paid staff time</p> <p>Hospital staff time to participate at events and serve as educators and/or subject matter expert speakers</p> <p>Hospital to refer patients to community partners for follow-up care and specialist care utilizing Care 360 and the Whole Health Hub</p> <p>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)</p>	<p>Florida Department of Health Hardee County (DOH – Hardee)</p> <p>Faith community</p> <p>Community Health Worker Program through the Heartland Rural Health Network</p> <p>Central Florida Health Care (CFHC) offers medical, dental, behavioral health, and pharmacy services in Wauchula for uninsured/underinsured</p>	X	X	X

Behavioral Health (Mental Health & Substance Misuse)

In Hardee County, secondary data showed the age-adjusted death rate due to suicide is 19.9 per 100,000. This is almost one and a half times the state (13.1/100,000) and the US (13.5/100,000). The assessment also found more than ten percent (11.5%) 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, stigma associated with mental health issues and lack of knowledge on how to access a mental health doctor or counselor. Substance misuse also emerged as a top concern, reflected in both primary and secondary data sources. Binge drinking in teens was cited as a specific concern in the primary data. Secondary data showed just over 12% of teens reported binge drinking, higher than the state rate of 9.2%. The assessment also found in secondary data a higher percentage of teens who have used methamphetamines in Hardee County (2.6%), than the state rate (0.8%).

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 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 – Hardee, Hardee Help Center, and faith-based organizations)</p>	X	X	X

Behavioral Health (Mental Health & 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
Sponsor 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 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 patients 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 community locations to host classes Partner with DOH Hardee for their substance use and prevention symposium Central Florida Health Care (CFHC) offers behavioral health and pharmacy services in Wauchula for uninsured/underinsured Tri-County Human Services offers substance abuse programs	X	X	X

PRIORITIES NOT ADDRESSED



I Priorities Not Addressed

AdventHealth Wauchula 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 Hardee County 17.1% 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.

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.

Children's Health

In Hardee County, a key indicator of concern regarding children's health is the Child Food Insecurity Rate. This rate in Hardee County is 21.9, which is higher than the rate for the state of Florida at 17.1, and the US at 14.6.

While Children's Health was identified as a significant health need in secondary data analysis and was a trending topic of concern expressed through focus group conversations, it was ranked fifth out of eight significant health needs. Primary data results showed 27.6% of respondents expressed inability to access the healthcare their children needed in the last year and 6.9% shared they were not able to access the needed mental and/or behavioral health care their children needed.

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



I Priorities Not Addressed

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 Hardee 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.

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.

Diabetes

Diabetes was one of the top important health issues identified by community survey respondents. Nineteen percent of survey respondents reported being told by their doctor they had diabetes. Focus group participants did not identify diabetes as a top health issue. Participants stated that sometimes individuals with diabetes may be asymptomatic, and it can be too late by the time they seek care.

Secondary data for Hardee County showed diabetes among the Medicare population is at 39%, higher than the state of Florida average of 27.8% and the US value of 27%. The non-Medicare eligible adult population in Hardee County also has a higher rate (16.5%) than the state's value of 11.7%. Diabetes was not selected as a priority by the Hospital as there are other community partners who are addressing this need. The Hospital will support these efforts where possible and hopes to address diabetes indirectly through the access to healthy foods priority.



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

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

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