



FLORIDA HOSPITAL TAMPA

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Approved by the Hospital Board on: November 8, 2016

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1. Executive Summary: The Community Health Needs Assessment Process

Goals

Florida Hospital Tampa (FHT) in Tampa, Florida conducted a Community Health Needs Assessment in 2016.

The goals of the assessment were to:

- Engage public health and community stakeholders including low-income, minority and other underserved populations
- Assess and understand the community's health issues and needs
- Understand the health behaviors, risk factors and social determinants that impact health
- Identify community resources and collaborate with community partners
- Publish this Community Health Needs Assessment
- Use Assessment findings to develop and implement a 2016-2019 Community Health Plan (implementation strategy) based on the Hospital's prioritized issues

Methods for Engaging the Community in the Assessment

The 2016 Community Health Needs Assessment was built on input from people representing the broad community, as well as low-income, minority and other medically underserved populations. This input was solicited throughout 2016, and was gathered and considered in multiple ways:

1. The Hospital formed a Community Health Needs Assessment Committee (CHNAC) that included representatives of the hospital and community (*see Section 5*) with a special focus on underserved populations within the hospital community/service area. Those members of the Committee who serve members of minority, low-income and other medically underserved populations are indicated in the listing. The Committee's role was to guide the Assessment process and select the priority issues for the hospital's community. Specific Committee functions include:
 - a. Review of all primary and secondary data
 - b. Prioritization of key issues identified in the Assessment
 - c. Selection of Priority Issues to be addressed by the hospital
 - d. Assistance with the development of a Community Asset Inventory (*see Section 9*)
 - e. Participation in community stakeholder surveys
 - f. Development of the Community Health Plan (implementation strategies) to address the Priority Issues identified in the Assessment
2. Community stakeholder surveys
3. Public Health input and expertise
 - a. Membership on the CHNAC
 - b. Reliance on Public Health input and expertise throughout the Assessment process (*see Section 6*)
 - c. Use of Public Health data (*see Section 7*)

Community Health Needs Assessment Committee (CHNAC)

In order to assure broad community input, Florida Hospital Tampa Hospital created a Community Health Needs Assessment Committee (CHNAC) to help guide the hospital through the Assessment process. The Community Health Needs Assessment Committee included representation not only from the hospital, public health and the broad community, but from low-income, minority and other underserved populations.

The Committee met twice in 2016. They reviewed the primary and secondary data, helped define the Priority Issues to be addressed by the hospital, and helped develop the Community Health Plan (implementation strategies) to address the Priority Issues. *See Section 5 for a list of CHNAC members.*

Data

Florida Hospital Tampa collected both primary and secondary data. The primary data included stakeholder interviews, community surveys, and internal hospital utilization data (inpatient and emergency department). This utilization data showed the top reasons for visits to Florida Hospital Tampa over the past year.

Much of the secondary data report was compiled by Community Commons/chna.org and the Healthy Hillsborough collaboration. Overall, secondary data sources included publicly available from state and nationally recognized data sources. *See Section 7 for a list of data sources.*

Asset Inventory

The next step was a Community Asset Inventory. This Inventory was designed to help Florida Hospital Tampa and the Community Health Needs Assessment Committee (1) understand existing community efforts to address these particular issues and (2) prevent duplication of efforts as appropriate. *See Section 12 for the Asset Inventory.*

Selection Criteria

Using the data findings and the Community Asset Inventory, the Community Health Needs Assessment Committee narrowed the list of 8-12 issues to five Priority Health and Health Behavior/Risk Factor Issues (determinants of health).

Next, the Community Health Needs Assessment Committee used a Decision Tree tool that uses clearly defined criteria to select the top Health and Health Behavior/Risk Factor Issues. *See Section 14 for the Decision Tree.*

The Decision Tree criteria included:

- A. How **acute** is the need? (based on data and community concern)
- B. What is the **trend**? Is the need getting worse?
- C. Does the hospital **provide services** that relate to the priority?
- D. Is someone else – or multiple groups – in the community **already working** on this issue?
- E. If the hospital were to address this issue, are there opportunities to **work with community partners**?

Priority Issues

The Priority Issues selected by the Community Health Needs Assessment Committee were:

1. Obesity
2. Diabetes
3. Low Food Access/Nutrition
4. Mental Health Disorders /Substance Abuse (Drugs and Alcohol)
5. Access to Care (Primary and Dental)

See Section 15 for an explanation of the issues chosen and not chosen – and the reasons why or why not.

Approvals

The Community Health Needs Assessment findings and selected Priority Issues were approved by the Florida Hospital Tampa Board on November 8, 2016. The final Needs Assessment was posted on the hospital's web site prior to December 31, 2016.

Next Steps

Next, the Community Health Needs Assessment Committee will work with Florida Hospital Tampa to develop a measurable 2017-2019 Community Health Plan (implementation strategy) to address the priority issues. The Plan will be completed and posted on the hospital's web site prior to May 15, 2017.

2. Hospital Description

Florida Hospital Tampa is a not-for-profit 517-bed tertiary hospital specializing in cardiovascular medicine, neuroscience, orthopedics, women's services, pediatrics, oncology, endocrinology, bariatrics, wound healing, sleep medicine and general surgery including minimally invasive and robotic-assisted procedures. Also located at Florida Hospital Tampa is the renowned Florida Hospital Pepin Heart Institute, a recognized leader in cardiovascular disease prevention, diagnosis, treatment and leading-edge research. The recent addition of the Doc1st ERSM shows that Florida Hospital Tampa is committed to providing compassionate and quality healthcare. Part of the Adventist Health System, Florida Hospital is a leading health network comprised of 26 hospitals throughout the state. Part of the Adventist Health System, Florida Hospital is a leading health network comprised of 26 hospitals throughout the state.

Florida Hospital Tampa is part of Adventist Health System (AHS), which has 44 hospitals in 10 states. AHS is a national leader in quality, safety and patient satisfaction. Although separated in geography, our facilities are united by the common values of Christian mission, community wellness, quality and service excellence, high ethical standards, compassion and cultural diversity. Our facilities practice the tradition of whole-person care in all that we do.

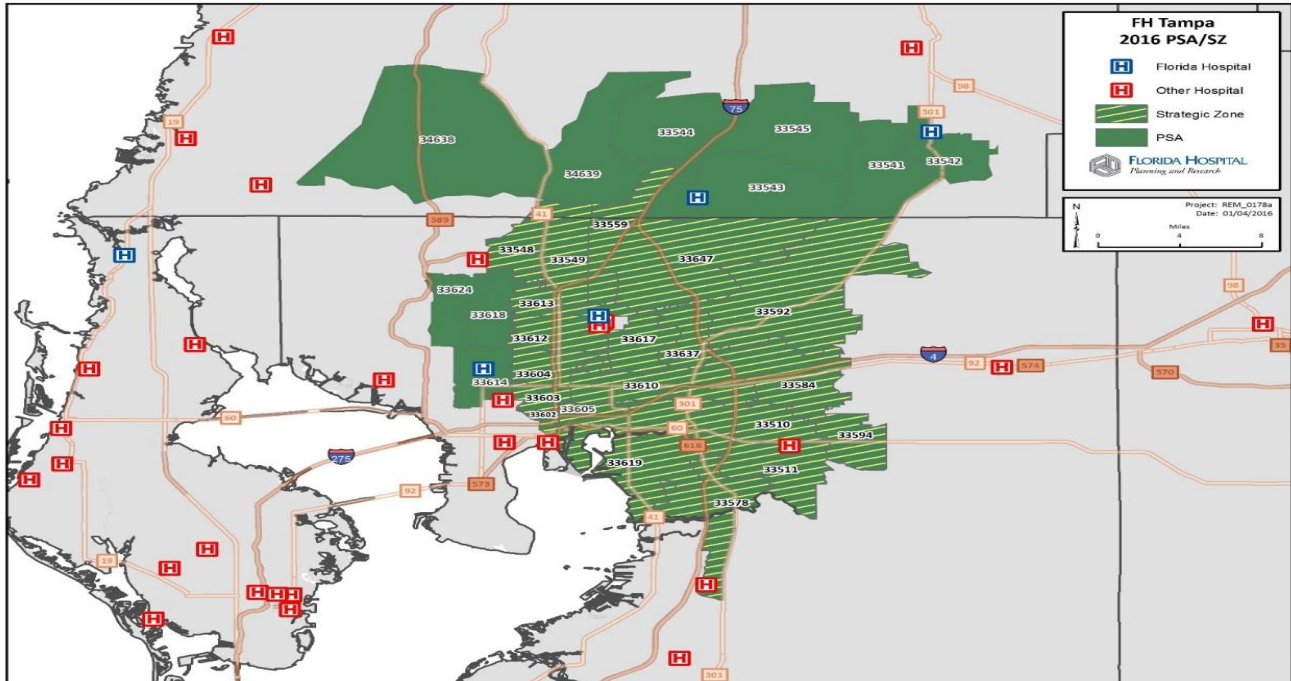
3. Choosing the Community

Florida Hospital Tampa defined its "community" as its Primary Service Area (PSA) from which 75-80% of its patients come.

4. Community Description & Demographics

Description and Demographics

Florida Hospital Tampa's community/Primary Service Area includes zip codes in Hillsborough and Pasco Counties.



Population and Percent Change for Hillsborough County, Hillsborough County, and the State of Florida

	Populations			2010 Uninsured	% Change '00 to '10	% Change '10 to '13*	% Uninsured 2010
	2000 Census	2010 Census	2013* Census				
33604	36,785	38,290		14,445	41%		38%
33610 Nuccio	32,397	38,944		15,283	20.2%		39%
33612 University	42,961	46,643		18,756	8.6%		40%
33613 University	29,424	32,900		14,614	11.8%		44%
33617 Nuccio	42,281	43,557		4,199	3.0%		10%
33637 Temple Terrace	12,534	13,601		3,542	8.5%		26%
33647 New Tampa	26,290	55,335		7,612	110.5%		14%
FHT CHNA	222,672	269,270		78,451	20.9%		29%
Hillsborough County	998,948	1,229,224	1,291,578	273,869	23.1%	5.1%	22%
State of Florida	15,982,378	18,802,690	19,552,860		17.6%	4.0%	

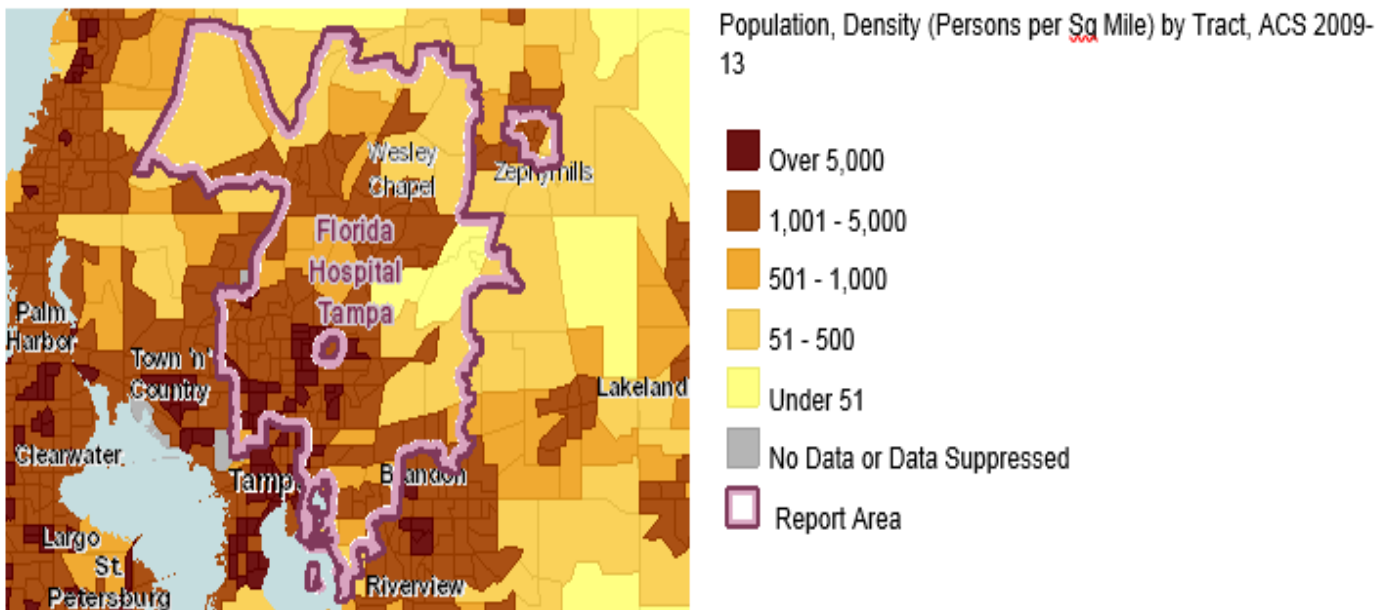
SOURCE: 2010 and 2013 Census populations, U.S. Census Bureau (www.census.gov).

NA = not available.

*estimated

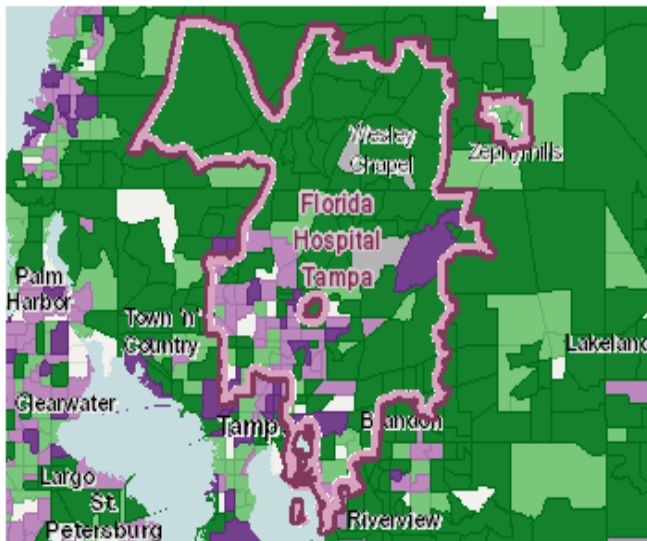
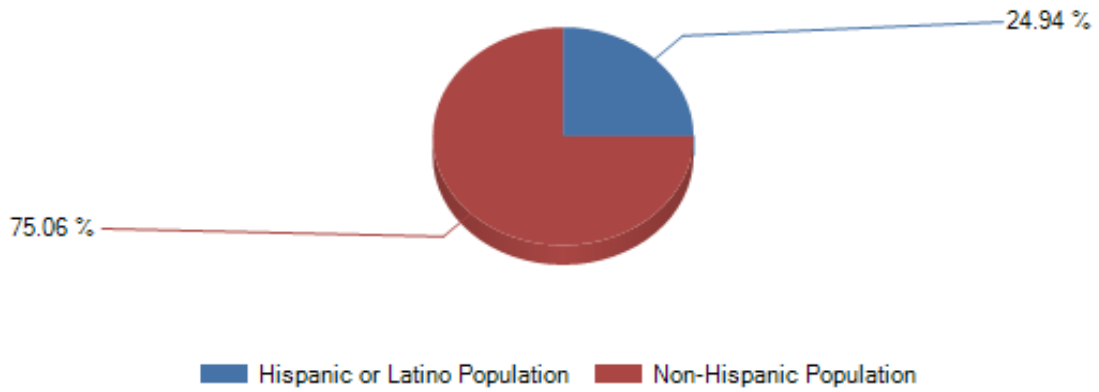
Five of the seven zip codes in our immediate primary service area host more uninsured, underserved and impoverished when compared to the rest of the county. This is correlated to a number of systemic, structural and behavioral factors.

A total of 639,976 people live in the 426 square mile provider service area according to the U.S. Census Bureau American Community Survey 5 year estimates. 51.74% of the population are female and 48.26% are male. 6.56% of the population is ages 0-4, 17.44% are ages 5-17, 10.86% are 18-24, 14.39% are ages 25-34, 13.93% are ages 35-44, 14.2% are ages 45-54, 11.14% are ages 55-64, and 11.48% are 65 and older. The race percentages are as follows: 68.01% White, 21.08% Black, 3.97% Asian, 0.68% Native American/Alaskan Native, 0.08% Native Hawaiian/Pacific Islander, 3.29% Some Other Race, and 2.88% Multiple Races. Of the total ethnic population, 24.94% are Hispanic or Latino. Between 2000 and 2010 the population in the PSA increased by 26.19%. For that same time period, the Hispanic population increased 78.16%. By race, the White population increased 18.37%, the Black population increased 38.72%, the American Indian/Alaskan Native population increased 21.65%, the Asian population increased 109.02%, the Native Hawaiian/Pacific Islander population increased 34.64%, the Other Race population category increased 44.44%, and the Multiple Race population increased 46.15% (Statistics and supporting graphs and charts below are sourced from Florida Hospital Tampa's Secondary Data Report, 2016 which is also published on the hospital's website along with the this Report).



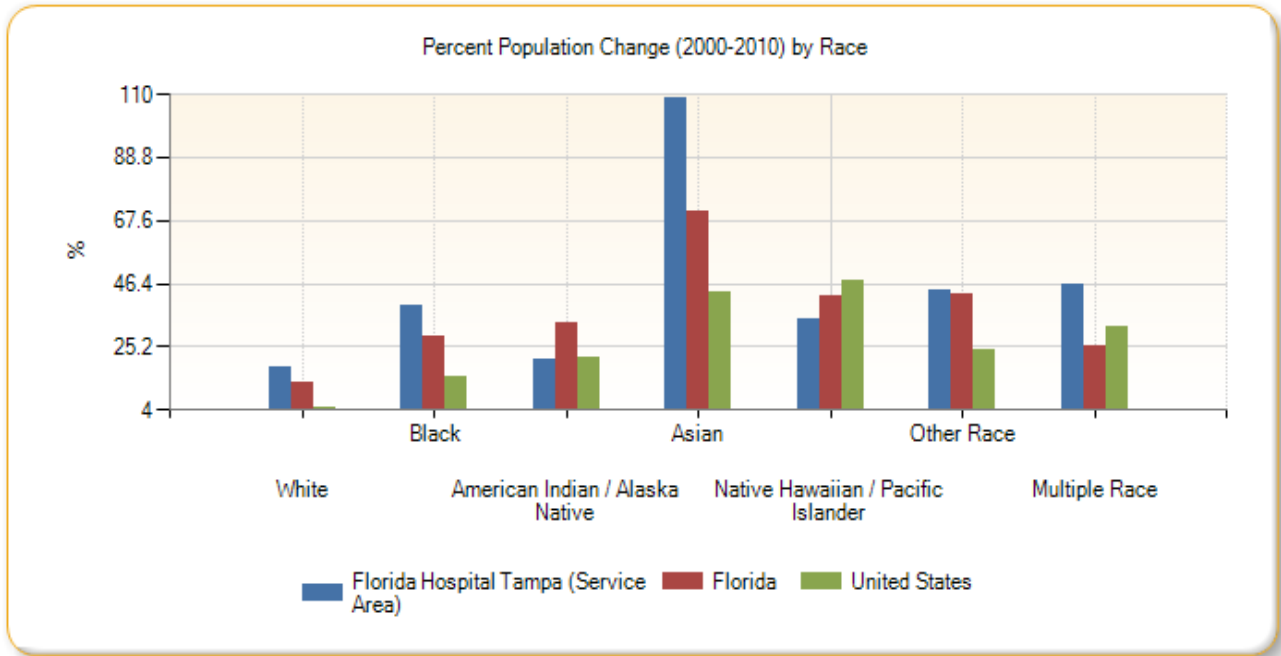
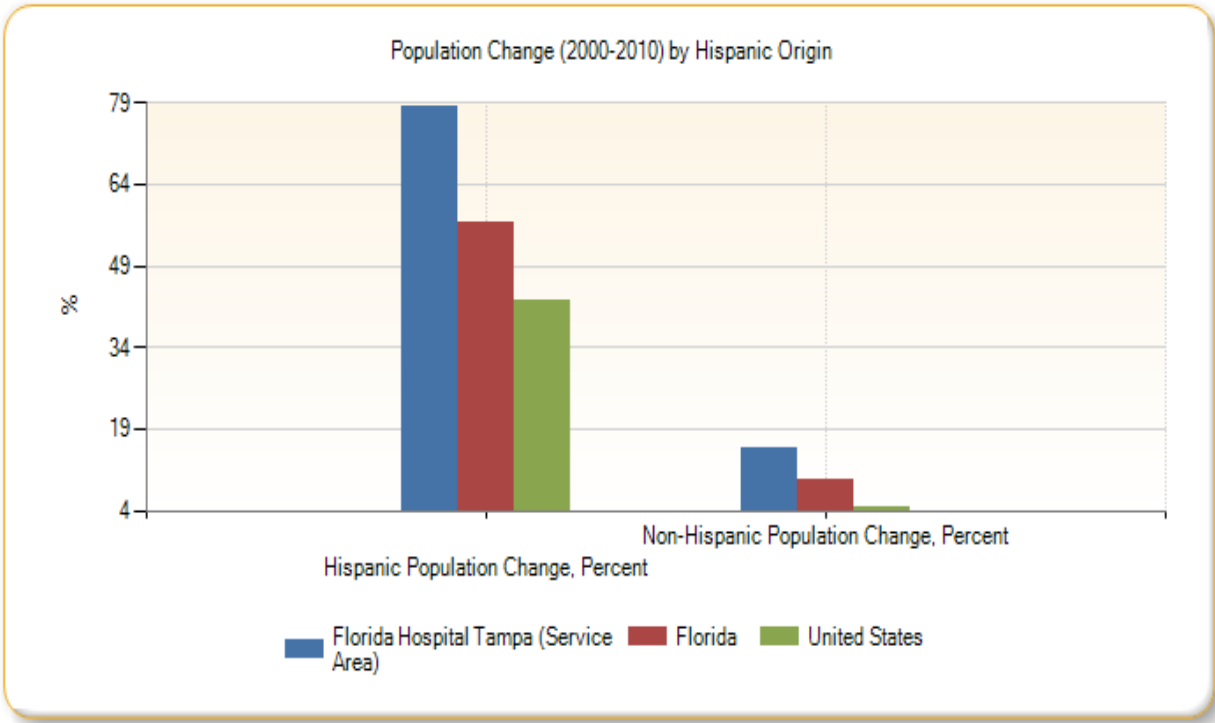
Total Population by Ethnicity Alone

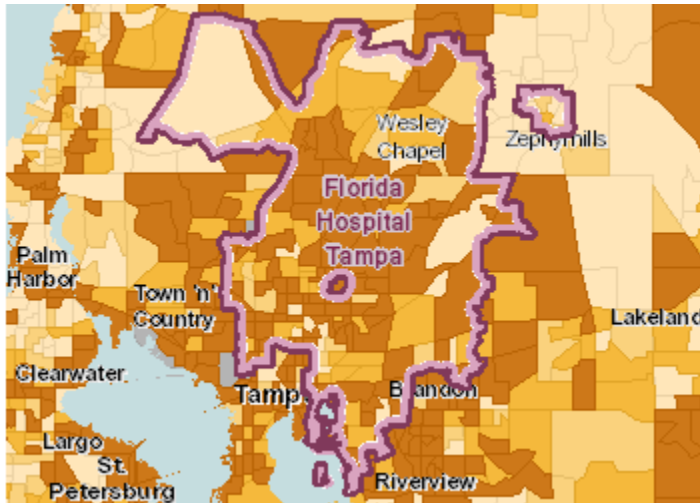
Florida Hospital Tampa (Service Area)



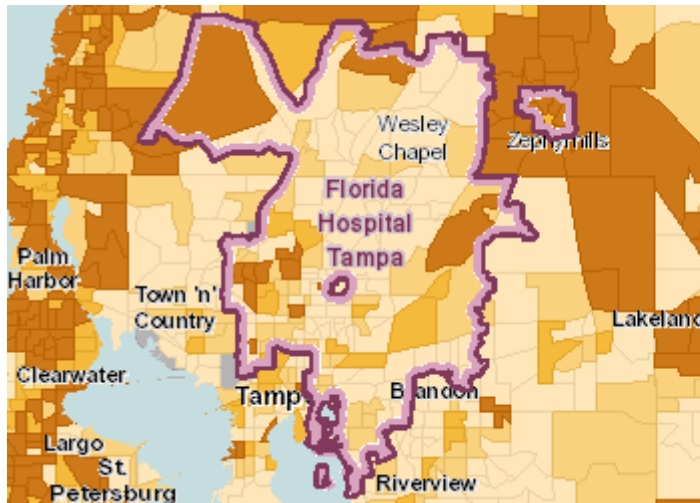
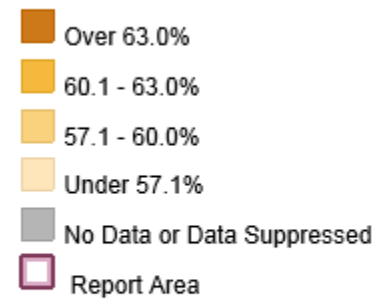
Population Change, Percent by Tract, US Census 2000 - 2010

- Over 10.0% Increase ()
- 1.0 - 10.0% Increase ()
- Less Than 1.0% Change (/ -)
- 1.0 - 10.0% Decrease (-)
- Over 10.0% Decrease (-)
- No Population or No Data
- Report Area

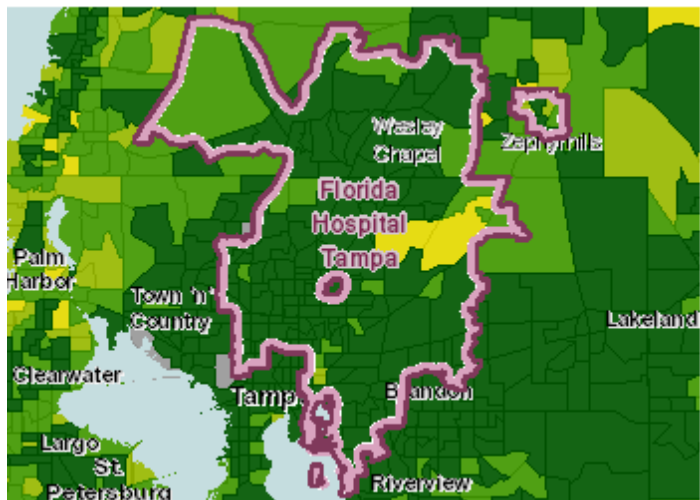
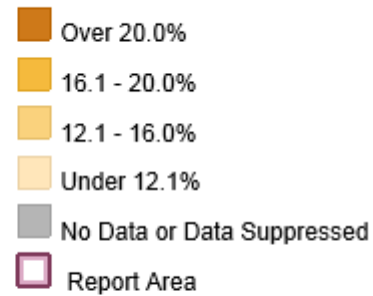




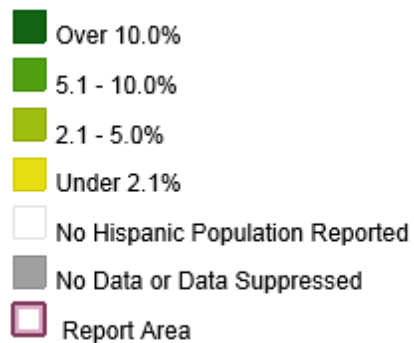
Population Age 18-64, Percent by Tract, ACS 2009-13



Population Age 65+, Percent by Tract, ACS 2009-13

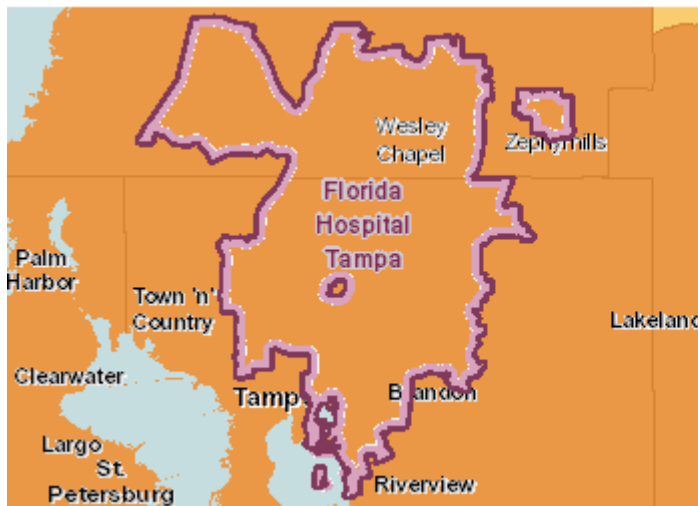


Population, Hispanic or Latino, Percent by Tract, ACS 2009-13



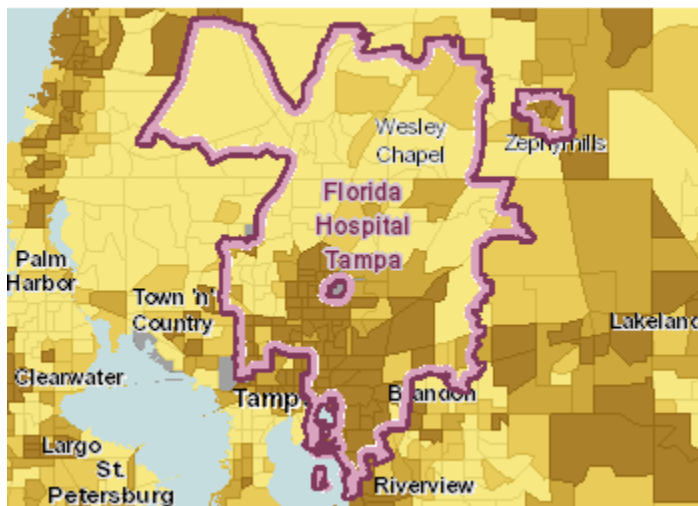
Social and Economic Factors

An estimated 15.18% of the population experienced food insecurity at some point during the report year. 19.4% of the population are living in households with income below the Federal Poverty Level. Of this population, 23.73% are Hispanic/Latino, 15.62% are White, 31.07% are Black or African American, 24.46% are Native American/Alaskan Native, 14.55% are Asian, 8.49% are Native Hawaiian/Pacific Islander, 26.9% are Some Other Race, and 20.61% identify as Multiple Race. The unemployment rate is 5.9% (ages 16 and older). The average income per capita is \$27,148 in Hillsborough County and \$23,736 for Pasco County. In the PSA, of the 416,890 persons aged 25 and older, 14% are without a high school diploma (or equivalency) or higher (Statistics and supporting graphs and charts below are sourced from Florida Hospital Tampa Secondary Data Report published on the Florida Hospital Tampa website).



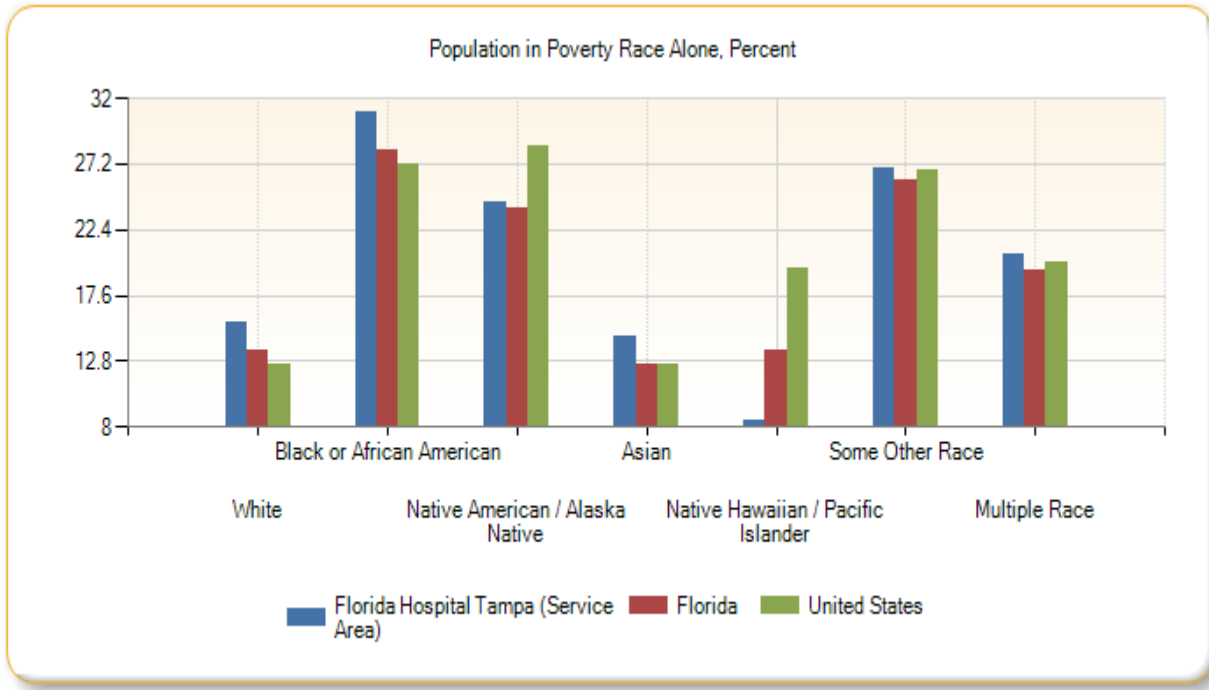
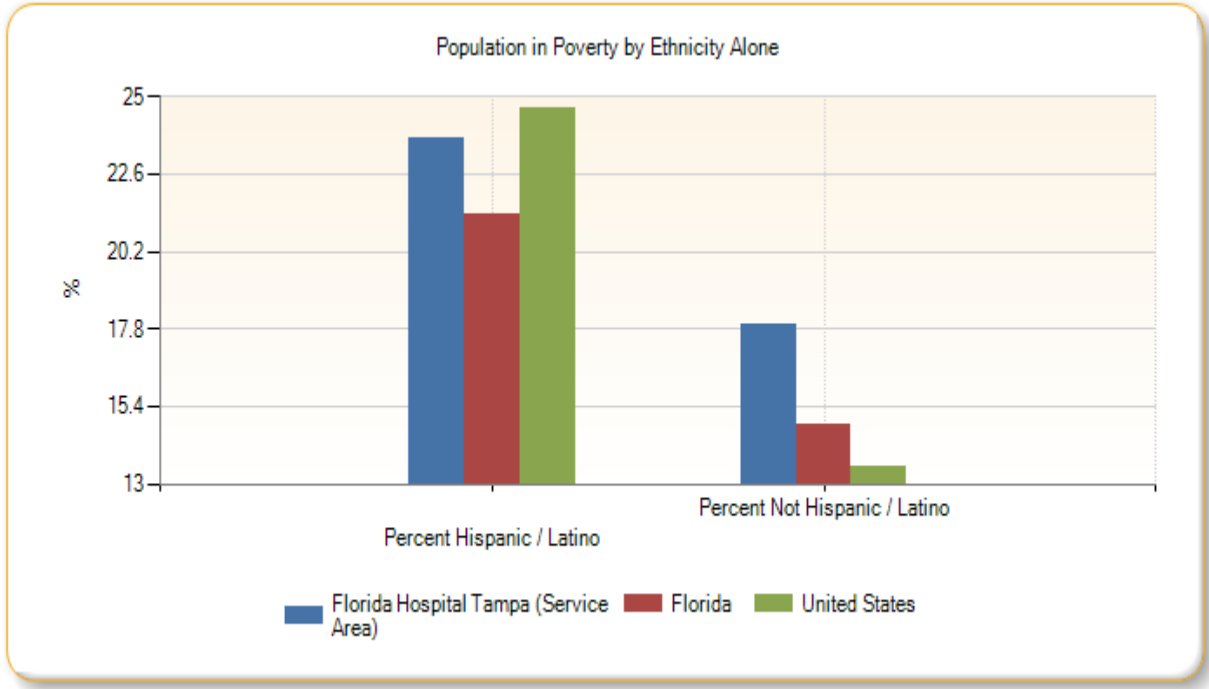
Food Insecure Population, Percent by County, Feeding America 2013

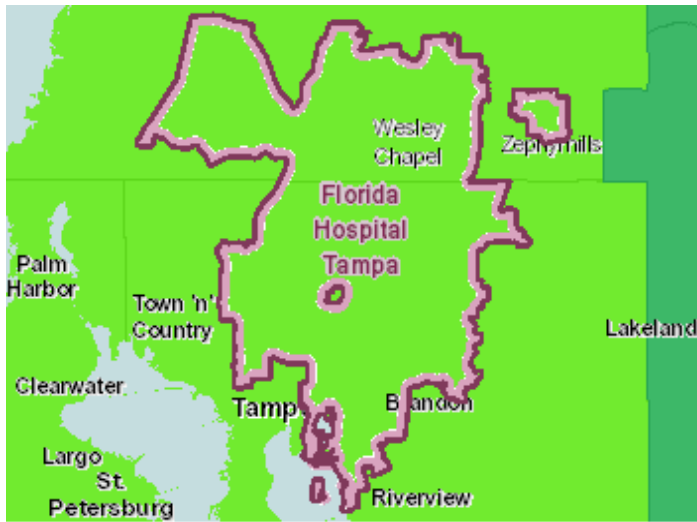
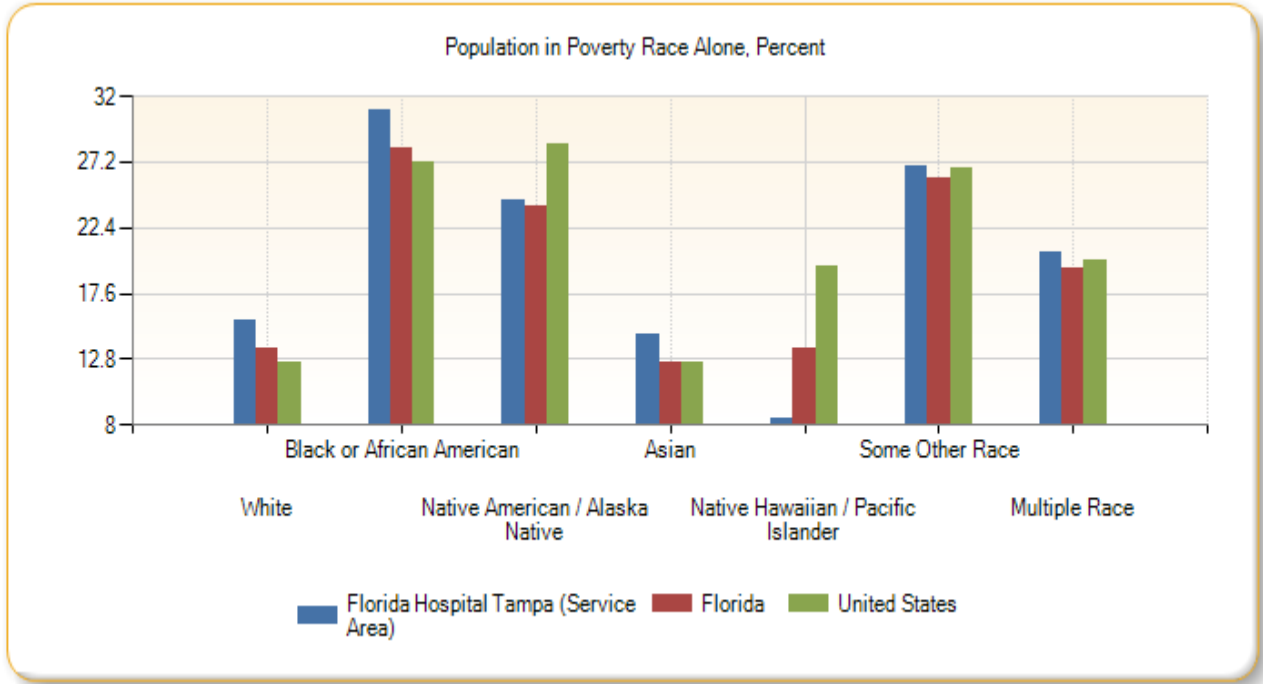
- Over 18.0%
- 15.1 - 18.0%
- 12.1 - 15.0%
- Under 12.1%
- Report Area



Population Below the Poverty Level, Percent by Tract, ACS 2009-13

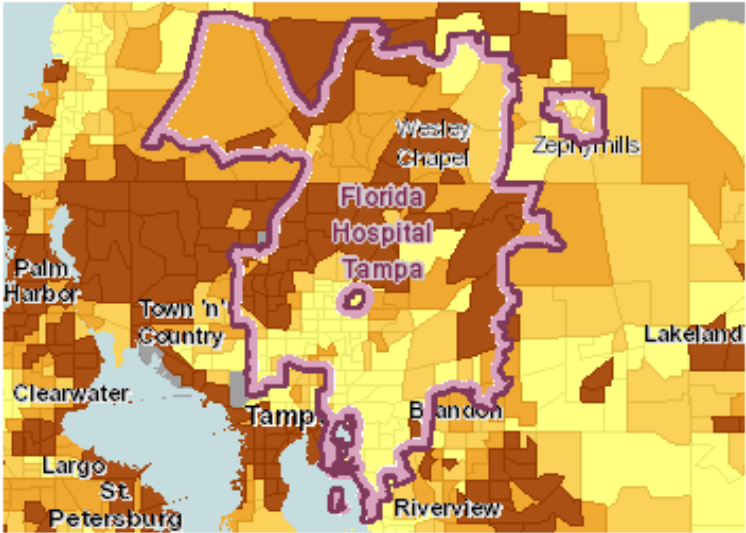
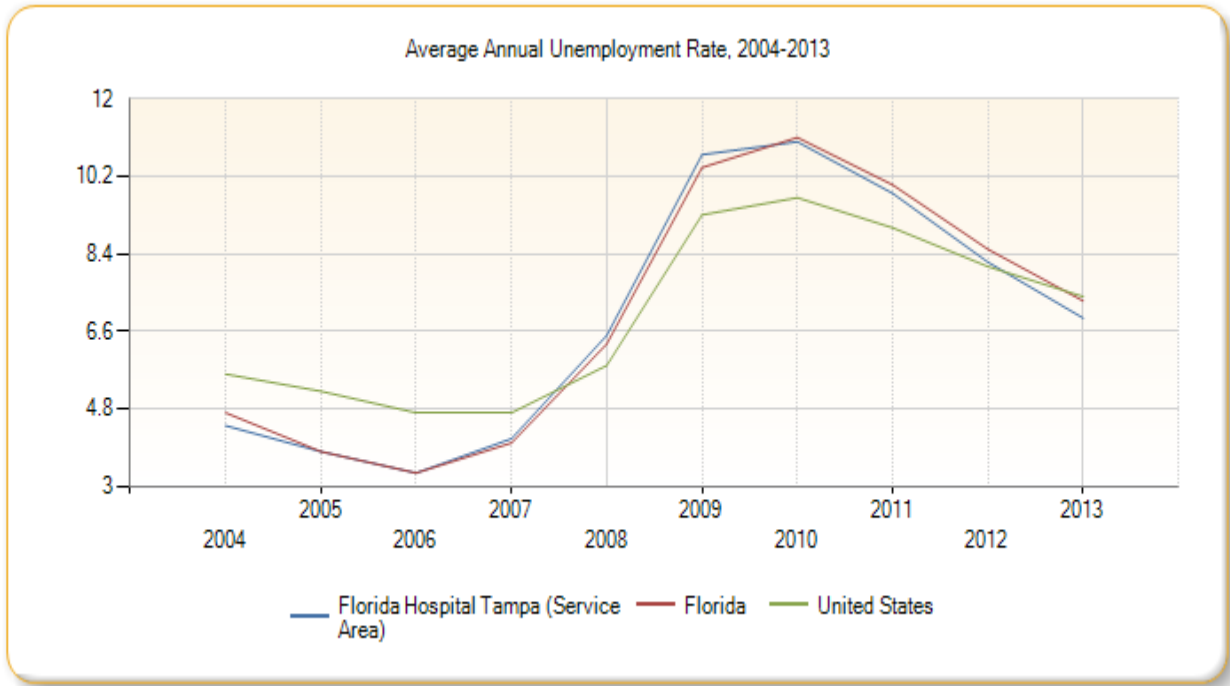
- Over 20.0%
- 15.1 - 20.0%
- 10.1 - 15.0%
- Under 10.1%
- No Data or Data Suppressed
- Report Area





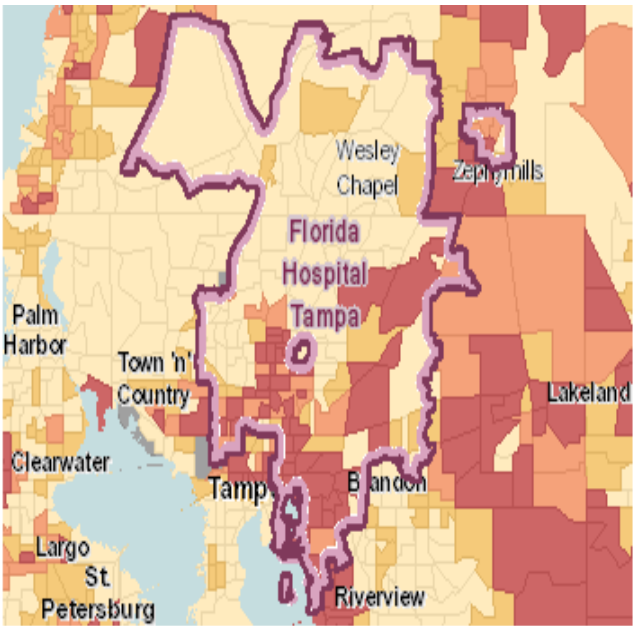
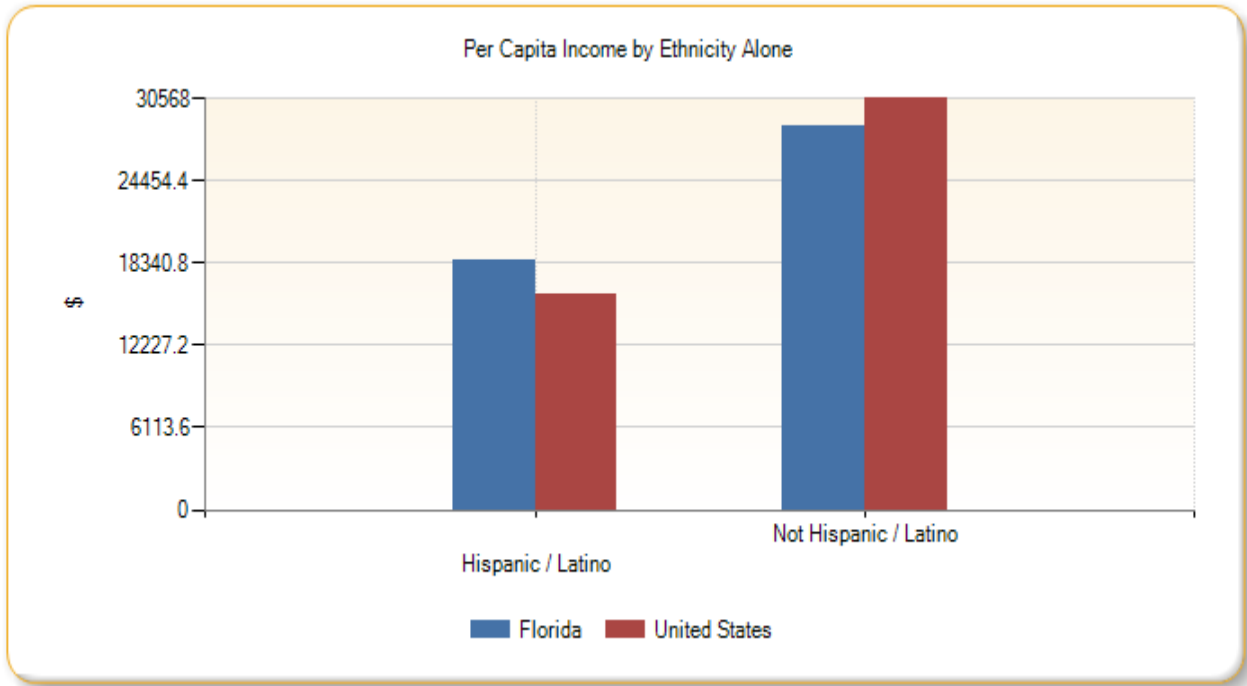
Unemployment, Rate by County, BLS 2015 - September

- Over 12.0%
- 9.1 - 12.0%
- 6.1 - 9.0%
- 3.1 - 6.0%
- Under 3.1%
- Report Area



Per Capita Income by Tract, ACS 2009-13

- Over 30,000
- 25,001 - 30,000
- 20,001 - 25,000
- Under 20,001
- No Data or Data Suppressed
- Report Area



Population with No High School Diploma (Age 25), Percent by Tract, ACS 2009-13

- Over 21.0%
- 16.1 - 21.0%
- 11.1 - 16.0%
- Under 11.1%
- No Data or Data Suppressed
- Report Area

Hillsborough County Demographics

Hillsborough County is an ethnically diverse county that is home to 1.35 million people. Hillsborough’s county seat is Tampa; the Tampa area has multiple suburbs and a few small cities. Some communities have large numbers of winter residents, or snowbirds.



Hillsborough County is far more diverse than Pasco County. It is 75% White, 17.7% Black, 27.0% Hispanic, and 4.1% Asian. The Asian population is mostly concentrated in the City of Tampa.

Hillsborough County residents are, on average, younger than Pasco County residents are. 13.4% of Hillsborough residents are 65 or older, another 23.1% are under age 18. Overall, 51.3% of residents are Female.

Of persons age 25 or older, 87.1% of residents have at least a high school education and 29.8% of people have Bachelor’s degrees or higher. The median household income is \$50,122. 16.8% of people have incomes below the Federal Poverty Level.

The source for the demographics of Hillsborough County is the US Census Quick Facts retrieved 6/29/16 from: <http://www.census.gov/quickfacts/table/PST045215/12057>.

Pasco County Demographic

Pasco County is located in west central Florida directly north of Hillsborough County (home of the city of Tampa). It is considered a rural county but has larger cities on its far left side.

As of July 1, 2015 Pasco County is estimated to have had 497,909 residents.

89.1% of the Pasco County population is White, 5.8% is Black, 14% is Hispanic, and 2.5% is Asian.

22.7% of residents are ages 65 or older, another 20.4% are under age 18. Overall, residents are 51.5% Female and 48.5% are Male. Pasco County has large numbers of winter residents, or “snowbirds.”

87.5% of Pasco residents have at least a high school diploma, but just 21.1% have a Bachelor’s degree or higher. The median household income is \$44,518. 14.7% of the residents of Pasco County have incomes below the Federal Poverty Level.



Land O’Lakes is the home of Florida Hospital Connerton LTAC. Wesley Chapel and Zephyrhills are the two closest cities; both have Florida Hospital facilities. Pasco’s county seat is Dade City, and its largest city is New Port Richey.

The source for the demographics of Pasco county is the US Census Quick Facts retrieved 6/29/16 from: <http://www.census.gov/quickfacts/table/PST045215/12101>.

Florida Hospital Tampa Patient Demographics for 2015

Description	Statistic
Discharges	21,991
Average Patient Age	55
Medicare Patients	47.15% (includes Managed Care)
Medicaid Patients	16.32% (includes Managed Care)
Self-Pay Patients	7.64%
Race	63.96% Caucasian, 21.39% African American, 0.04% Multicultural, 0.90% Asian, and 13.7% Other
Gender Distribution	43.82% Male, and 56.18% Female

5. Community Health Needs Assessment Committee (CHNAC)

A Community Health Needs Assessment Committee was formed to help Florida Hospital Tampa conduct a comprehensive assessment of the community. The Committee included representation from the broad-community; public health; and low-income, minority and other underserved populations. The Committee met regularly throughout 2016.

Name	Entity/Agency Represented	Title	The Stakeholder represents:			
			Minority	Low-income	Public Health	Other Medically Underserved
Carla Sparks	Hillsborough County Public Schools – public school system	Dr. Carla Sparks, Supervisor Single Gender Programs, Gender Differentiated Instruction, Choice Curriculum, Florida Hospital Tampa & Carrollwood Partnerships	x	x		x
Dr. Dexter Frederick	Brain Expansion Scholastic Training (BEST) program – not-for-profit dedicated to creating a long-lasting positive impact in the lives of under-represented and disadvantaged youth. Encouragement and exposure to health related fields.	Founder	x	x		
Leslene Gordon	Florida Department of Health – Hillsborough County – public health services	Community Health Director	x	x	x	

Name	Entity/Agency Represented	Title	The Stakeholder represents:			
			Minority	Low-income	Public Health	Other Medically Underserved
Mark Sharpe	Tampa Innovation Alliance – a district where institutions that drive the economy work together to revitalize the transient area into a health community	Executive Director	x	x		
Parnell Dickenson	Parnell Dickinson & Associates – marketing services	Principal				x
Brad Cassell	Tampa 1 st Seventh Day Adventist Church – serves a low income/low access area; support public health programs	Pastor	x	x		x
Sarah Combs	University Area Community Development Center – economic, education, and public services in the University Area Community where 95% of the population are below the poverty level	Executive Director & CEO	x	x		x
Gina Clark	Florida Hospital Tampa – Corporate Wellness Services	Corporate Wellness Manager				x
Hui Saldana, MD	Florida Hospital Tampa	Chief Operating Officer				x
Janice Shirley	Florida Hospital Tampa – Cardiac Health Services	Research Administrative Director		x		x
Jenni Lash	Florida Hospital Tampa – Women’s Services	Assistant Vice President		x		x
Tammy Long	Florida Hospital Tampa – Nursing Services	Assistant Vice President		x		x
Jennifer Packing – Ebuon, MD	Florida Hospital Physician’s Group – employed physicians	Primary Care Physician		x		x
Carissa Stone, MD	Gulf to Bay, Integrative Pain Medicine & Rehabilitation – medical services	Pain Management Physician				x

6. Public Health

Public Health was represented in the Needs Assessment process through representation on the Community Health Needs Committee.

Leslene Gordon, PhD, RD, LD, Community Health Director, Florida Department of Health – Hillsborough County. Responsibilities include leadership of the agency’s Breast and Cervical Cancer Program, Sterilization Program, Health Promotion and Education, Lead Poisoning Prevention Program, Office of Health Equity, School Health, Epidemiology, Family Planning and School Based Sealant Program. Her work in public health has included completing community health assessments for two local county health departments over the last 15 yrs. and participating as a site reviewer for the Public Health Accreditation Board. Dr. Gordon holds an affiliate faculty position at the University of South Florida (USF) College of Public Health and sits on a number of community and institutional boards and committees. Dr. Gordon is a gubernatorial appointee to the State Diabetes Advisory Council.

7. Primary & Secondary Data Sources

Primary, Secondary and Hospital Utilization data were used in this Needs Assessment.

Primary Data

- a. Community Health Needs Assessment Committee (CHNAC)
- b. Hospital Utilization Data (Top 10 In-patient and Emergency Department diagnoses by payer source)
- c. Stakeholder Surveys – members of the community and Needs Assessment Committee. *See Appendix A for a copy of the survey and Appendix B for the aggregated results.*

Secondary Data

- a. Cardiac Arrest Registry to Enhance Survival (CARES), 2011-2012
- b. Centers for Disease Control & Prevention (CDC), Behavioral Risk Factor Surveillance System (BRFSS)
- c. Centers for Disease Control & Prevention (CDC), National Center for Chronic Disease Prevention & Health Promotion, 2012
- d. Centers for Disease Control & Prevention (CDC), National Vital Statistics System
- e. Centers for Disease Control (CDC), Wide-Ranging Online Data for Epidemiologic Research, 2006-2010
- f. Dartmouth Atlas of Health Care, Clinical Practice, 2012
- g. Dartmouth College Institute for Health Policy
- h. Federal Bureau of Investigation (FBI), FBI Uniform Crime Reports with additional analysis by the National Archive of Criminal Justice Data
- i. Healthy People 2020
- j. National Institutes of Health (NIH); National Cancer Institute (NCI); Surveillance, Epidemiology and End Results Program; State Cancer Profiles; 2007-2011
- k. University of Wisconsin Population Health Institute, County Health Rankings, 2015
- l. US Census Bureau, American Community Survey (ACS), 2009-2013
- m. US Census Bureau, Quick Facts, 2015 estimates
- n. US Census Bureau, Small Area Health Insurance Estimates, 2013
- o. US Dept. of Agriculture (USDA), Economic Research Service, USDA Food Access Research Atlas, 2010

- p. US Dept. of Health & Human Services (HHS), Center for Medicare & Medicaid Services (CMS), Provider of Services File, Sept. 2015
- q. US Dept. of Health & Human Services (HHS), Health Indicators Warehouse
- r. US Dept. of Health & Human Services (HHS), Health Resources & Services Administration (HRSA), Area Health Resource File, 2013
- s. US Dept. of Labor (DOL), Bureau of Labor Statistics, Sept. 2015

8. Community Collaboration

Healthy Hillsborough was formed in October, 2015 as a collaboration between the Florida Department of Health Hillsborough, Florida Hospital Tampa, Florida Hospital Carrollwood, Moffitt Cancer Center, St. Joseph's Hospitals and South Florida Baptist Hospital, Shriners' Hospital for Children-Tampa, Suncoast Community Health Centers, Tampa Family Health Centers and Tampa General Hospital. Healthy Hillsborough was established to complete a comprehensive Community Health Needs Assessment (CHNA) and to identify opportunities to potentially collaborate to improve the health of the community.

The key findings from Healthy Hillsborough's county-wide community health needs assessment were utilized to identify key areas of focus. The Healthy Hillsborough Steering Committee considered detail from the assessment findings and the stakeholder feedback to designate the following three areas of focus for potential collaboration across the county for the next five years:

- Obesity
- Mental Health / Substance Abuse
- Access to Care (to specifically focus on transportation, screenings / prevention, health literacy)

See section 10 for a list of their top 10 health indicator priorities.

9. Data Summary

The Community Health Needs Assessment Committee for Florida Hospital Tampa reviewed the data from each of the data primary and secondary sources described above. They aggregated those findings into a list (Section 11) that reflected all data sources.

The Committee then looked at the acuity of each issue, determined who in the community was working on the issue, and discussed the "fit" with hospital services. Based on those criteria, they narrowed the list to the Florida Hospital Tampa's community's top needs. Those needs will be addressed in the Florida Hospital Tampa Community Health Plan (Implementation Strategies) also posted on this website.

10. Preliminary Data – High Level Findings regarding Top Health Issues

Note: The health priorities for all sources are ranking in random, not priority, order.

<i>Primary Data</i>
Top 8-10 health priorities determined by CHNAC & Stakeholder Interviews
<ol style="list-style-type: none">1. High Blood Pressure/Cholesterol2. Diabetes3. Mental Health Disorders4. Obesity5. Lack of Exercise6. Substance Abuse – Drugs/Alcohol7. Poor Nutrition8. Smoking9. Low-Income Families/Poverty10. Lack of Health Insurance/Access to Care

<i>Primary Data</i>
Top 8-10 health priorities determined by FHT In-patient Patient Data (by zip code)
<ol style="list-style-type: none">1. SEPTICEMIA NOS2. CRNRY ATHRSCL NATVE VESSL3. LOC OSTEOARTH NOS L/LEG4. PNEUMONIA, ORANISM NOS5. ATRIAL FIB6. OBS CHR BRONC W(AC) EXAC7. ACUTE KIDNEY FAILURE NOS8. CRBL ART OCL NOS W INFARC9. URIN TRACT INFECTION NOS10. SUBENDO INFARCT, INITIAL

<i>Primary Data</i>
Top 8-10 health priorities determined by FHT Emergency Department (ED) Patient Data 2015 (by zip code)
<ol style="list-style-type: none">1. HEADACHE2. URIN TRACT INFECTION NOS3. ACUTE URINOS4. CHEST PAIN NOS5. ACUTE BRONCHITIS6. ACUTE PHARYNGITIS7. ABDMMAL PAIN OTH SOCF ST8. LUMBAGO9. ABDOMNAL PAIN UNSPCF SITE10. NAUSEA WITH VOMITTING

Primary Data

**Top 8-10 health priorities determined by FHT In-patient Patient Data 2015
(Self-Pay/Medicaid Payer Source)**

1. URINARY TRACT INFECTION NOS
2. SCRN FETAL ANATMC SURVEY
3. OTH CURR COND-ANTEPARTUM
4. HEADACHE
5. CHEST PAIN NOS
6. CHEST PAIN NEC
7. ACUTE URI NOS
8. ACUTE PHARYNGITIS
9. ACUTE BRONCHITIS
10. ABDOMINAL PAIN UNSPECF SITE

Primary Data

**Top 8-10 health priorities determined by FHT ED Patient Data 2015
(Self-Pay/Medicaid Payer Source)**

1. URINARY TRACT INFECTION
2. NAUSEA WITH VOMITING
3. LUMBAGO
4. HEADACHE
5. CHEST PAIN NOS
6. ACUTE URI NOS
7. ACUTE PHARYNGITIS
8. ACUTE BRONCHITIS
9. ABDOMINAL PAIN USPCF SITE
10. ABDOMINAL PAIN OTH SPECF ST

Secondary Data

**Top 8-10 health priorities determined by
Healthy Hillsborough Community Collaboration**

1. Encourage Health Behaviors
2. Address Social, Behavioral, Environmental Determinants of Health
3. Early Screening & Access to Care for Mental Health/Substance Abuse
4. Improve Collaboration in Health Care
5. Racial/Ethnic Health Disparities
6. Obesity
7. Access to Services
8. Diet-Related Diseases
9. Access to Health Care
10. Health Education/Literacy

**Health Indicators where the PSA average is greater than the Florida State Average
taken from the Florida Hospital Tampa Community Health Needs Assessment
Secondary Data Report**

**See Florida Hospital Tampa Secondary Report Published on the Hospital Website*

1. Population with No High School Diploma
2. Population with Low Food Access
3. Use of Public Transportation for Commute to Work
4. Heavy Alcohol Consumption
5. Tobacco Usage-Current Smokers
6. Cancer Mortality Rate
7. Breast Cancer Screening (Mammogram) and Breast Cancer Incidence Rate
8. Colon Cancer Screening (Sigmoid/Colonoscopy) and Colon and Rectum Cancer Incidence
9. Cervical Cancer Incidence
10. Prostate Cancer Incidence
11. Lung Cancer Incidence
12. Lung Disease Mortality
13. Premature Death
14. Stroke Mortality
15. Accident Mortality
16. Asthma Prevalence
17. Depression – Medicare Population
18. Heart Disease Mortality (All)
19. Facilities Designated as Health Professional Shortage Areas
20. Lack of Consistent Source of Primary Care
21. Access to Dentist and Poor Dental Health
22. Preventable Hospital Events
23. Physical Inactivity (Adult)
24. Obesity (Adult)
25. Diabetes Prevalence
26. Poor/Fair General Health

**Top 8-10 health priorities determined by Florida CHARTS –
Pasco County Health Status Summary**

1. Adults who are current smokers
2. Adults who have ever been told they had high blood cholesterol
3. Women 18 years of age and older who received a Pap test in the past year
4. Asthma (age-adjusted hospitalization rate)
5. Infectious Diseases
 - a. Cryptosporidiosis
 - b. Hepatitis A
 - c. Hepatitis B, acute
 - d. Hepatitis B, chronic
 - e. Listeriosis
 - f. Meningococcal disease in people <24⁹

Top 8-10 health priorities determined by Florida CHARTS – Hillsborough County Health Status Summary

1. Lower than state average median income
2. Population over 25 without high school diploma or equivalency
3. Adults who are overweight
4. Prostate Cancer incidence rate
5. Cervical Cancer incidence rate
6. Asthma (age-adjusted hospitalization rate)
7. Infectious Diseases
 - a. AIDS cases
 - b. Chlamydia Cases
 - c. Cryptosporidiosis
 - d. Cyclosporiasis
 - e. Gonorrhea cases
 - f. Haemophilus influenza in people <5⁹
 - g. Hepatitis B, acute
 - h. Hepatitis B, chronic
 - i. HIV cases
 - j. Infectious syphilis cases
 - k. Pertussis
 - l. Streptococcus pneumoniae
 - m. Tuberculosis cases
8. Repeat births to mothers 15-19
9. Neonatal death rate
10. Kindergarten children fully immunized

11. Aggregated Service Area Priorities based on the Issues listed above

Florida Hospital Tampa staff aggregated the above priorities into the following list. The Community Health Needs Assessment Committee reviewed the list to determine its accuracy, and then prioritized Florida Hospital Tampa’s top community priorities.

Top 8-10 aggregated health priorities determined by the Community Health Needs Assessment Committee

1. Access to Care (Primary and Dental)
2. Cancer
3. Diabetes
4. Heart Disease
5. Low Food Access/Nutrition
6. Mental Health Disorders/Substance Abuse (Drug and Alcohol)
7. Obesity
8. Preventable Hospital Events
9. Smoking

12. Asset Inventory

The following Asset Inventory (in alphabetical order to match the list above) includes the top health priorities for FHT community, and shows the services related to these areas of concern both in the community and at Florida Hospital. An Asset Inventory can help prevent the duplication of services and was therefore important to the Community Health Needs Assessment Committee and FHT staff in determining the hospital's top health priorities.

Top 8-10 Areas of Focus defined by Primary/Secondary Data	Current Community Programs	Current Hospital Programs
Access to affordable care (primary and dental)	Tampa Family Health Clinic - Federally Qualified Health Center (FQHC) -12 sites, Premiere Community Healthcare Group (FQHC) - 5 sites, Department of Health (DOH) - Pediatric dental services and mobile dental clinic, Florida Care Kid, Hillsborough County Health Plan, Hospital Medicaid enrollment specialists, Mt. Calvary SDA Church Clinic, Bridges Clinic	Hospitalist/Case Management/Social Worker referral to Tampa Family Clinic, Tampa Family Clinic representative in the Emergency Department, Medicaid enrollment at all Florida Hospitals
Cancer	Palliative Care Services, American Cancer Society, Life Path Hospice, Moffit Cancer Center, DOH Breast and Cervical Cancer Screening for women over 50, FQHC Screenings and tests, DOH Immunization programs	Palliative Care Program, Life Path Hospice, Mammography program for patients with low-income/uninsured/underinsured persons
Diabetes	YMCA and Tampa General Hospital's Diabetes Prevention Programs, American Diabetes Association; Pasco DOH and Hillsborough DOH Diabetes programs, University Area Community Development Center's (UACDC) Get Moving Program, FL State Diabetes Advisory Counsel	Diabetes education- outpatient education program, CHIP program in the Hillsborough County School District and at the Hillsborough County Department, Florida Hospital Foundation
Heart Disease	American Heart Association, American Stroke Association	Heart Failure Program- Transitional Care, Tampa First Seventh-day Adventist Church's Complete Health Program (CHIP), Community CHIP programs
Low Food Access/Nutrition	DOH Programs: WIC, SNAP; Community Food Banks; Metropolitan Ministries; UACDC Harvest Hope program; Trinity Café; School summer food programs	Dietitian education
Mental Health Disorders	Grace Point, Tampa Behavioral Health, Crisis Center Adult and Children's programs, The Department of Veteran's Affairs	Internal referral system to the community resources
Obesity	YMCA, American Diabetes Association, Chapters of the Let's Move.gov, DOH GIFT program, UACDC Get Moving Program	Nursing education
Preventable hospital events	Elder Affairs services, Meals on Wheels, Life Line, Home Health Agencies, Assisted Living Facility	Transitional Care program for Chronic Obstructive Pulmonary Disease, Pneumonia, Heart Failure and Myocardial Infarction
Smoking Cessation	Tobacco Free Florida, Hillsborough DOH AHEC programs	Nursing/ Social Worker education
Substance Abuse (Alcohol and Drugs)	DACCQ, Alcoholics Anonymous, The Salvation Army, Agency for Community Treatment Centers –ACTS, Grace Point, All Children's Hospital has a research program focused on opioid addicted pregnant women	Nursing/Social Worker education

13. Priority Selection

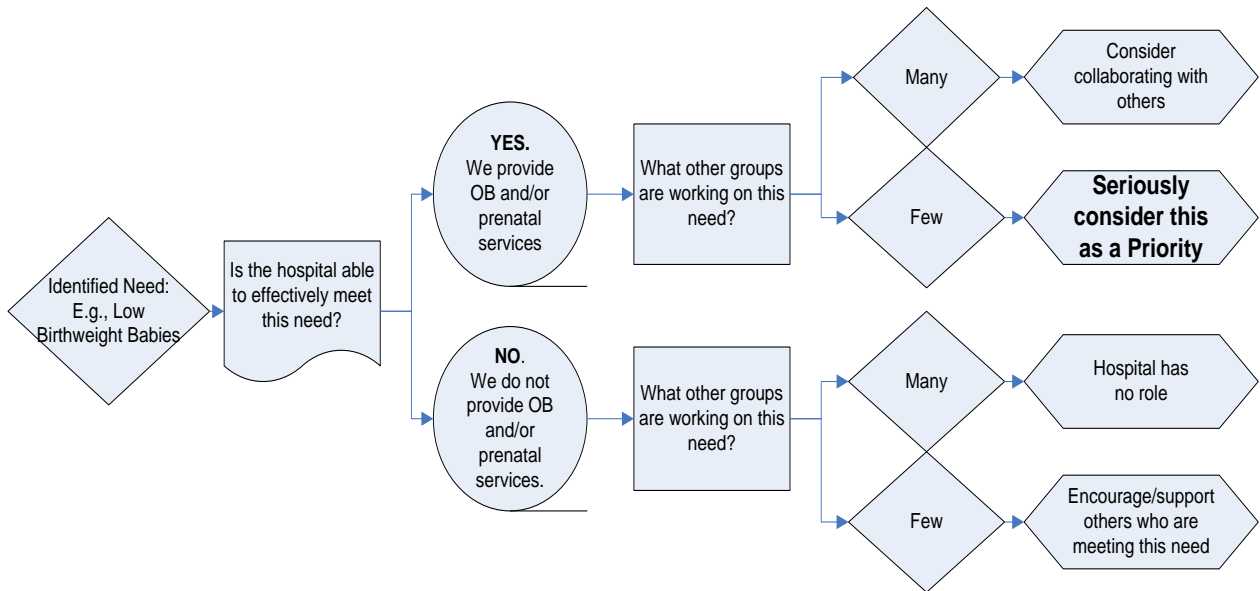
As noted in the DATA SUMMARY section above, the primary and secondary data, along with the ASSET INVENTORY, were used to narrow down the top areas of significant community health need for Florida Hospital Tampa. This discussion and decisions took place at the FHT Community Health Needs Assessment Committee in July, 2016.

The Committee used a “decision tree” format to prioritize the top needs down that the hospital will address in its Community Health Plan.

14. Decision Tree

The Community Health Needs Assessment Committee used the decision tree to narrow down the aggregated priorities (above) into three priority areas. The decision tree Criteria for inclusion included:

1. How acute is the identified issue in the region?
2. How acute is the identified issue in the primary service area, the immediate area around FHT?
3. Are other community resources/organizations already addressing the need? (see 13 Asset Inventory)
4. Can FHT effectively influence the issue?
 - a. Does FHT offer related services?
 - b. Does FHT have the ability to influence the issue through the implementation/expansion of programs, services, and other actions?



15. Key Issues to be Addressed or Not to be Addressed (worksheet)

The Community Health Needs Assessment Committee used the primary and secondary data, the Asset Inventory and the Decision Tree (above) to select priorities for the Florida Hospital Tampa Community.

(high, medium, or low)							
Health Issue	Acuity Level in PSA	Acuity Level in Pasco County	Acuity Level in Hillsborough County	Addressed by other Community Groups?	FHT Capacity to Impact?	Issue Selected Yes or No	Rationale Yes or No
Access to Care	H	H	M	Y	Y	Y	Insufficient use of community resources, opportunity to collaborate and link services
Cancer	H	H	H	Y	Y	N	Community Resources and Internal Hospital Resources in place
Diabetes	H	H	M	Y	Y	Y	Significant health priority for PSA
Heart Disease	H	H	M	Y	Y	N	Significant health priority for PSA
Low Food Access/ Nutrition	H	H	M	Y	Y	Y	Insufficient Resources in the community
Mental Health Disorders/ Substance Abuse (Drug and Alcohol)	H	H	H	Y	Y	Y	Insufficient resources and referral pathways in the community
Obesity/ Overweight	H	H	H	Y	Y	Y	Impact will affect overall health of patient and community
Preventable Hospital Events	H	H	H	Y	Y	N	By addressing other priority areas, a correlating decrease in Preventable Hospital events will follow
Smoking	H	H	M	Y	Y	N	Community Resources and internal Hospital Resources in place

16. Next Steps: Florida Hospital Tampa Community Health Plan

After identifying the priority issues for Florida Hospital Tampa, the Community Health Needs Assessment Committee will assist to develop a Community Health Plan (implementation strategies) to address the top priorities defined in the Needs Assessment. The Community Health Plan will be posted on the hospital's web site before May 15, 2017.

17. Public Comments on 2013 Assessments

FHT did not receive any written comments from the public regarding the 2013 Community Health Needs Assessment or Community Health Plan (Implementation Strategies).

18. Evaluation of the Strategies Undertaken in the 2013 Community Health Plan

The Hospital conducts an annual Evaluation of the progress made on its Community Health Plan (Implementation Strategies). The Evaluation is reported to the IRS in the hospital's Form 990. The following narrative is a copy of the 2015 Community Health Plan Evaluation as noted in Form 990, Schedule H, Part V, Section B, Line 11.

Florida Hospital Tampa (FHT) is a 493-bed community hospital located in Tampa, FL. It is one of six Florida Hospital facilities in the greater Tampa area. Florida Hospital Tampa's service area includes most of Hillsborough County, which encompasses 21 zip codes. The Community Health Needs Assessment was conducted in the seven zip codes surrounding FHT which contribute to 74% of our patient visits: 33604, 33610, 33612, 33613, 33617, 33637, and 33647. These areas were included based on proximity to FHT and high volume of patient visits. Several are fundamentally underserved. There are large numbers of homeless and precariously housed residents in FHT's immediate vicinity which is called the University Area Community Development area.

In 2013, Florida Hospital Tampa was part of a regional community health needs assessment process called OneBay. In addition, FHT formed a Community Health Needs Assessment Committee (the Committee) (comprised of FHT and community members including representatives from low-income, minority and other underserved populations). The Committee chose four priority areas on which FHT would work: Access to Affordable Care, Diabetes, Obesity and Lack of Health Education/Awareness of Available Services.

Priority: Access to Affordable Health Care

2013 Description of the Issue: Four zip codes (33604, 33610, 33612 and 22613) in Florida Hospital Tampa's primary service have uninsured rates ranging from 37-44% compared to an overall county rate of about 24%. Median Household Incomes in these zip codes ranged from \$29,100 to \$35,500 compared to the county average of \$48,600. As a result, access to timely and affordable health care is an issue for the residents of these communities.

2015 Update: Florida Hospital Tampa's efforts around health care access focused on expanding the safety net for uninsured residents of the four zip codes noted above, with a special focus on the University Area Community Development neighborhoods.

In 2015, Florida Hospital Tampa renovated 8,000/sf of hospital space for use by the Tampa Community Health Center, a federally qualified health center (FQHC). FQHCs see uninsured patients on a sliding fee scale basis and accept Medicaid, Medicare and private insurance. Besides housing the Center, FHT works with them to enroll appropriate FHT patients (post-discharge) in the FQHC so that they can receive timely post-discharge care and have a permanent medical home. FQHC enrollment is also expected to minimize uninsured and Medicaid ER visits for non-urgent conditions.

Florida Hospital Tampa worked with the University of South Florida Medical School's free Bridge Clinic (the Clinic), which is located less than a mile from FHT. FHT recruited five additional providers valued at \$45,000; this allowed the Clinic to open two additional days per month. FHT is working on plans to establish primary care services in the low-income Nuccio Community (at the Family Service Center or Mt. Calvary Church).

FHT donated \$42,000 (the goal was \$5,000) in imaging services to the Judeo Christian Center free clinic. FHT also donated 85 free mammograms to uninsured women.

Two new primary care practices established by Florida Hospital Tampa saw 5,000 new patients in 2015. Because transportation is an issue for many patients, FHT partnered with the Hillsborough Area Regional Transit Authority (HART) to use FHT vans to transport patients to and from FHT, particularly wound care patients.

Florida Hospital Tampa established a Congregational Health Network to improve access to care for congregants. In 2015, 500 members participated in various health events.

Priority: Lack of Health Education & Awareness of Services

2013 Description of the Issue: Florida Hospital Tampa's 2013 Community Health Needs Assessment showed that community residents, particularly those with lower income, were unaware of the available health education and services available to them.

2015 Update: Interventions included the training and deployment of Community Health Workers in the very low-income University Area Community Development Center neighborhoods (in which FHT is located). FHT also offered educational workshops and programming in cooperation with the Alliance to Benefit the Whole Child at partner school locations including Robles Elementary. As noted above, health education programming was integrated into FHT's Congregational Health Network. This community education focused on both physical and mental health resources.

FHT support groups included Parkinson's Disease, Lymphedema, Yoga, playing for Time (memory program for seniors), and the Tools to Quit smoking cessation classes. All groups were free or very low cost. As noted earlier in this document, FHT provided space for a Federally Qualified Health Center. FHT helped the center generate awareness of its presence in the community.

Priorities: Diabetes & Obesity

2013 Description of the Issue: When compared with the state of Florida, a lower percentage of the population in Hillsborough County has diabetes - 8.2 % and 6.3%, respectively. The number of diabetes-related hospitalizations in the county is comparable to the statewide level; however, both rates are on the rise. Black females had the highest rates of diabetes. Obesity is a major cause of diabetes.

2015 Update: Florida Hospital Tampa held 10 Community Diabetes Education programs that reached over 900 uninsured people. Half of the participants lowered their A1c (blood sugar) levels. FHT held community diabetes screenings in targeted low-income zip codes, implemented educational programming within the Congregational Health Network, and held grocery store tours as part of educational programming on healthy eating.

Florida Hospital Tampa offered scholarships (to low-income people) for its medical weight loss program, and worked with its Congregation Health Network to sponsor community physical fitness challenges. FHT also arranged transportation as needed for education and screenings related to obesity.

Issues Considered but Not Addressed by Florida Hospital Tampa

Mental Health: Florida Hospital Tampa works with Gracepoint and other mental health providers to create awareness of and access to a mental health network. Over 800 people were referred from FHT's ED to mental health providers in 2015.

Maternal and Child Health: Florida Hospital Tampa provides OB and maternal-infant services as well as many new-mother and parent support programs. FHT is working with the FQHCs to increase the number of low-income women who receive early prenatal care, and is working with the ABC and Healthy Start programs to increase the number of women who attend prepared childbirth classes. In addition, the Needs Assessment Committee determined that multiple community partners are already working on this issue, including the Health Department, the federal Healthy Start Coalition and Maternal & Child Health Program at the University of South Florida, and the Tampa Bay Doula program.

Teen Pregnancy: Teen pregnancy prevention is not a core competency of Florida Hospital Tampa or other area hospitals. FHT does provide and support the services noted above.

Respiratory Diseases/Asthma: The Needs Assessment Committee determined that, while these are important health issues, FHT does not have the outreach capacity to build a new program around respiratory diseases.

Heart Disease: The Pepin Heart Institute at Florida Hospital Tampa already provides heart disease treatment as well as screenings and support groups such as Mended Hearts.

Appendix A: Survey Questions

Primary Data Collection

Sample Questions for Stakeholder Interviews, Focus Groups or Surveys

1. How would you rate the following?

	Excellent	Good	Fair	Poor	Very Poor
Overall community health status					
Your personal health status					
Community understanding of health risks					
Your own understanding of health risks					
Community quality of life					
Your own quality of life					

2. What do you see as the greatest **health problems/conditions** in our community? (*circle 3*)

- | | |
|---|---|
| <ul style="list-style-type: none"> Cancer Heart disease High blood pressure / cholesterol Respiratory disease – adults Asthma – children Diabetes | <ul style="list-style-type: none"> Mental Health disorders Immunizations – children Immunizations – adults Teen pregnancy rates / low birth-weight babies Other (describe) |
|---|---|

3. Which health **behaviors/risk factors** are the most common in our community? (*circle 3*)

- | | |
|---|--|
| <ul style="list-style-type: none"> Obesity Lack of exercise Smoking Poor nutrition Seatbelt use Firearms in homes | <ul style="list-style-type: none"> Substance abuse – alcohol Substance abuse – drugs Lack of family / religious support systems Risky sexual behaviors Aging population Other (describe) |
|---|--|

4. Which **community conditions** most impact the health of people in our community? (*circle 3*)

- | | |
|---|---|
| <ul style="list-style-type: none"> Unemployment Low-income families / poverty Crime / violence Homelessness Low education levels/literacy Inadequate transportation | <ul style="list-style-type: none"> Lack of grocery stores / access to healthy food Lack of health insurance / affordable care Access to dental care Air & water quality Other (describe) |
|---|---|

5. Who in our community promotes good health?

6. What are one or two things that they do that are effective?

7. If you were in charge of promoting good health, what would you do first?

8. Who else should we talk to?

Appendix B: Survey Results

In addition to gathering input from the Community Health Needs Assessment Committee (CHNAC), Florida Hospital Tampa conducted structured surveys with stakeholders representing the broad community as well as low-income, minority, and other underserved populations.

Below are the aggregated results of those surveys.

Name (optional)	Agency or Affiliation (as appropriate)	Who does Stakeholder represent?				Minority Low-Income Public Health		
		Minority	Low-Income	Public Health	Other Medically Under-served	Top 3 Health Conditions	Top 3 Health Behaviors	Top 3 Community Conditions
Carla Sparks	Hillsborough County Public Schools – public school system	x	x		x	High Blood Pressure/Cholesterol, Diabetes, Mental Health Disorders	Obesity, Lack of Exercise, Substance Abuse - Drugs	Low Income Families/Poverty, Low Education Levels/Literacy, Inadequate Transportation
Dr. Dexter Frederick	Founder of Brain Expansion Scholastic Training (BEST) program – not-for-profit serving underrepresented and disadvantaged youth. Exposure to health related fields.	x	x			Cancer, Diabetes, Mental Health Disorders	Lack of Exercise, Poor Nutrition, Aging Population	Low Income Families/Poverty, Lack of Health Insurance/Affordable Care, Access to Dental Care
Leslene Gordon	Community Health Director, Florida Department of Health, Hillsborough County – public health services and education	x	x	x	x	Cancer, Heart Disease, Diabetes	Lack of Exercise, Smoking, Poor Nutrition	Low -Income Families/Poverty
Roaya Tyson	COO, Gracepoint Wellness - mental health services	x	x		x	Cancer, Heart Disease, Mental Health Disorders	Obesity, Substance Abuse, Aging Population	Low Income Families /Poverty, Low Education Levels/Literacy, Inadequate Transportation
Gina Clark	Corporate Wellness Manager, Florida Hospital Tampa – corporate wellness services				x	High Blood Pressure/Cholesterol, Diabetes, Mental Health Disorders	Obesity, Lack of Exercise, Smoking	Low Income Families/Poverty, Low Education Levels/Literacy Lack of Health Insurance/Affordable Care

Name (optional)	Agency or Affiliation (as appropriate)	Who does Stakeholder represent?				Minority Low-Income Public Health		
		Minority	Low-Income	Public Health	Other Medically Under-served	Top 3 Health Conditions	Top 3 Health Behaviors	Top 3 Community Conditions
Tammy Long	Assistant VP, Nursing Services, Florida Hospital Tampa				x	Heart Disease, High Blood Pressure/Cholesterol, Diabetes	Obesity, Smoking, Aging Population	Low-Income Families/Poverty, Inadequate Transportation, Lack of Health Insurance/Affordable Care
Jennifer Packing-Ebuen, MD	Primary Care Physician, Florida Hospital Physician's Group			x	x	High Blood Pressure/Cholesterol, Asthma-Children, Mental Health Disorders	Smoking, Poor Nutrition, Substance Abuse - Alcohol	Low-Income Families /Poverty, Lack of Health Insurance/Affordable Care, Access to Dental Care
Shanel Reed	Community Member	x	x			Cancer, High Blood Pressure/Cholesterol, Diabetes	Obesity, Poor Nutrition, Risky Sexual Behaviors	Low-Income Families/Poverty, Lack of Grocery Stores/Access to Healthy Food, Lack of Health Insurance/Affordable Care
Heidi-Marie A. Kellock, MD	Florida Hospital Tampa, Medical Director, Pediatric Emergency Medicine			x	x	Asthma-Children, Mental Health Disorders, Teen Pregnancy Rates/Low Birth Weight Babies	Obesity, Smoking, Substance Abuse-Drugs	Low-Income Families/Poverty, Low Education Levels/Literacy, Access to Dental Care
Carissa Stone, MD	Gulf to Bay, Integrative Pain Medicine & Rehabilitation – medical services			x	x	Obesity and Its Complications	Obesity, Smoking, Poor Nutrition	Low-Income Families/Poverty, Healthy Food Affordability