Baptist Hospital East Community Health Needs Assessment & Strategic Implementation Plan

Baptist Hospital East
Community Health Needs Assessment Committee

August 2012

Baptist Hospital East
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Community Health Needs Assessment Committee

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Introduction

This document is the Community Health Needs Assessment and Strategic Implementation Plan for Baptist Hospital East (BHE) in Louisville, Kentucky.

Organization Description

Baptist Hospital East, a five hundred and nineteen (519) bed tertiary acute care hospital located in the eastern part of Jefferson County, is a wholly owned subsidiary of Baptist Healthcare System. BHE opened in 1975 and expanded in 1989 when Baptist Hospital Highlands was closed and its services and beds merged with BHE. A significant addition of beds occurred in September 2008 when BHE added the Park Tower with 25% more licensed beds and 25% more surgery suites. Baptist Hospital East provides virtually all inpatient services with the exception of transplantation and burn care. BHE has twenty-two (22) psychiatric beds and twenty-nine (29) rehabilitation beds, as well as obstetrics, eight (8) neonatal level II beds, and four hundred-sixty (460) general medical/surgical acute care beds. BHE has a 24-hour emergency department that is one of the busiest in the state; laboratory; full imaging capabilities, including three MRIs; physical, speech, and occupational therapy; six cardiac catheterization labs; open heart surgery; chemotherapy infusion; and radiation therapy with three linear accelerators.

However, Baptist Hospital East is more than just a hospital (see map on page 5). It also has home health in the Louisville and Western Kentucky markets, two diagnostic imaging centers, eight urgent care facilities, four BaptistWorx occupational wellness sites, and is co-owner of a fitness center, a positron emission (PET/CT) scanning service, two ambulatory surgery centers, and a rehabilitation facility. Baptist Eastpoint, a full-service ambulatory care center, opened in January 2009. It has diagnostic imaging, urgent care, a women's diagnostic center, physical therapy, radiation therapy, and a joint-ventured ambulatory surgery center. Baptist Physicians Lexington (a wholly-owned affiliate of BHS) manages six (6) Express Care Clinics located in Walmarts throughout Louisville and in LaGrange.

Baptist Healthcare System, Inc. ("BHS") and Baptist Healthcare Affiliates, Inc. ("BHA"), a wholly controlled affiliate of BHS, own and operate all five of the Baptist affiliated hospitals located in the Commonwealth of Kentucky. BHS and BHA own more than 1,600 licensed acute care hospital beds in Louisville, LaGrange, Lexington, Paducah and Corbin and manage the 300 bed Hardin Memorial Hospital in Elizabethtown, KY and the 105 bed Pattie A. Clay Regional Medical Center in Richmond, KY. In addition, Baptist Hospital East is responsible for Baptist Medical Associates (BMA) that employs over 110 primary care and specialty physicians, Baptist Community Health Services (BCHS) that operates occupational health, physical therapy services, sports medicine, and urgent care facilities, and Baptist Hospital East Home Health Agency (BHEHHA) that provides home health services in the Greater Louisville and Western Kentucky markets.
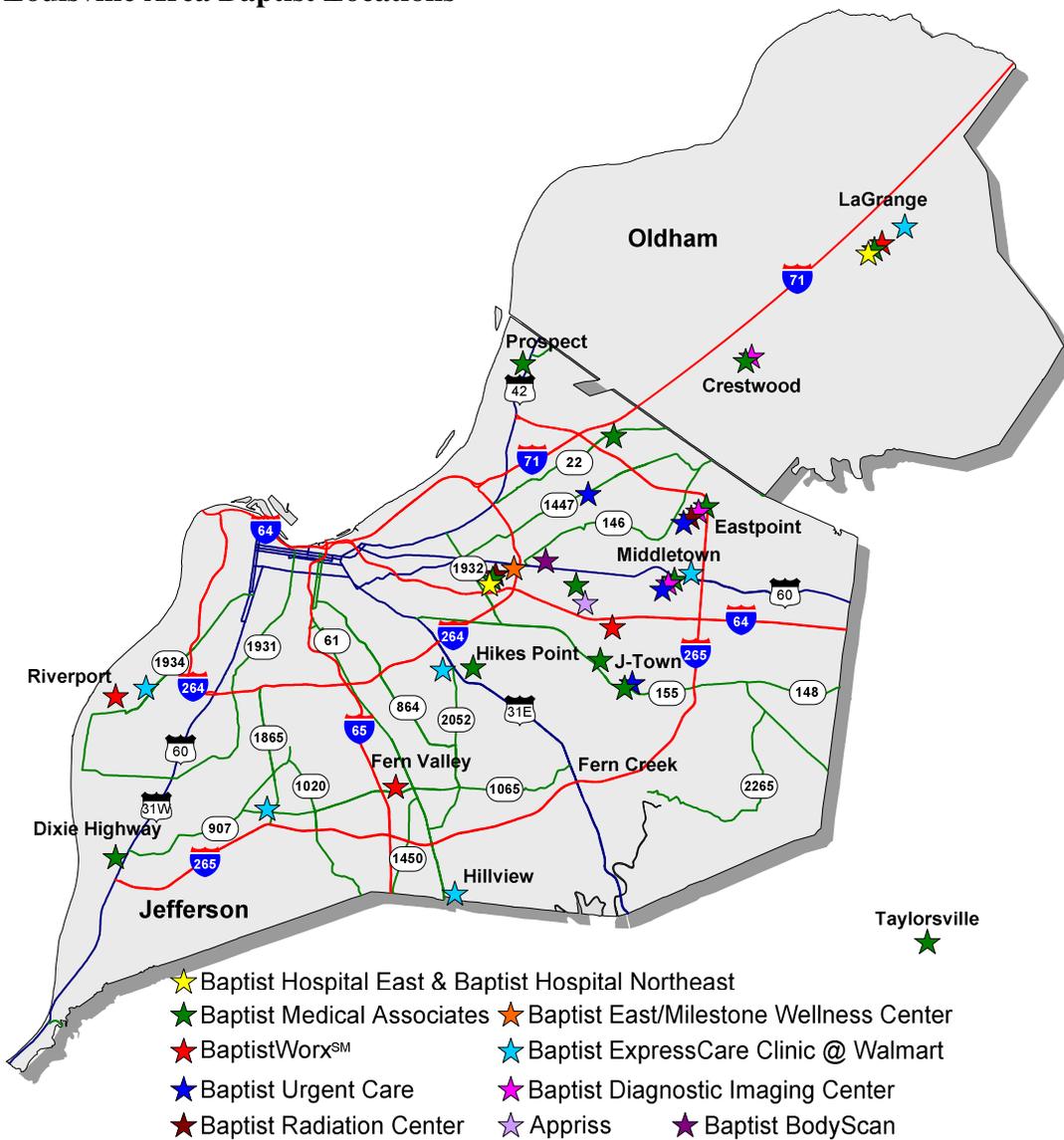
Service Area

BHE defines its service area for this Community Health Needs Assessment looking at where the majority of its inpatients reside. In CY 2011, over eighty percent of BHE's inpatients came from the eastern half of Jefferson, Bullitt, Oldham, Shelby, and Spencer Counties (see zip code map below). While BHE does serve some residents of the western portion of Jefferson County, it has relatively few resources in that part of the county. It is also telling that BHE has a 34.4% market share of inpatients in eastern Jefferson County vs. only 5.7% in the western zip codes. Oldham County is a shared service area between BHE and Baptist Hospital Northeast, which is located in that county.

Baptist Hospital East's CHNA Service Area
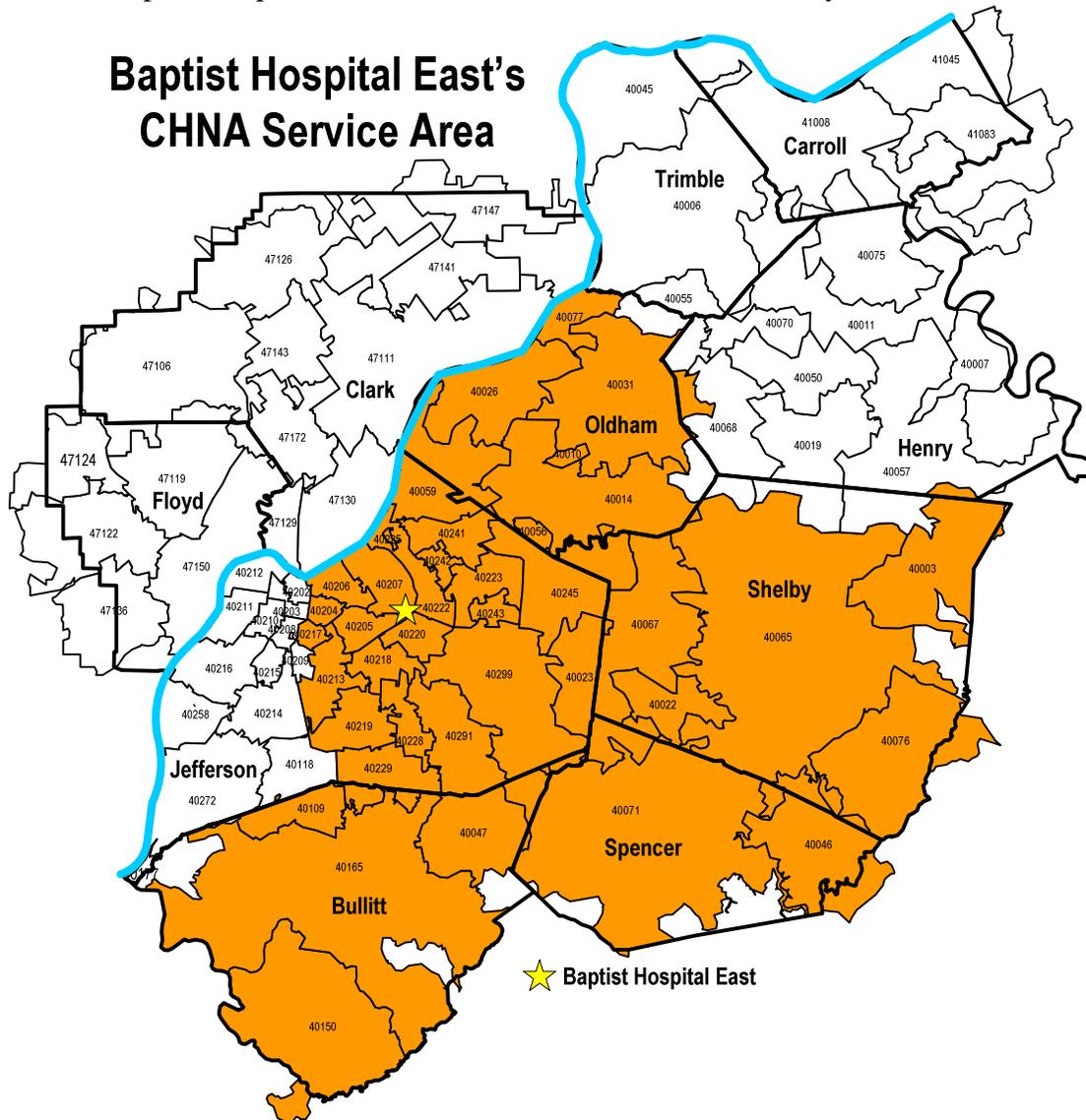
	CY 2011 BHE Discharges	% of Total
Eastern Jefferson County	19,064	67.2%
Bullitt County	1,370	4.8%
Oldham County	1,002	3.5%
Shelby County	905	3.2%
Spencer County	579	2.0%
Total CHNA Service Area	22,920	80.8%
* Other Areas	5,454	19.2%
Total BHE Discharges	28,374	100.0%
* Other includes 210 counties plus the western half of Jefferson County		
Source: KHA InfoSuite, CY 2011 discharges excluding normal newborns		

Louisville Area Baptist Locations

★ Baptist Hospital East & Baptist Hospital Northeast
★ Baptist Medical Associates   ★ Baptist East/Milestone Wellness Center
★ BaptistWorxSM   ★ Baptist ExpressCare Clinic @ Walmart
★ Baptist Urgent Care   ★ Baptist Diagnostic Imaging Center
★ Baptist Radiation Center   ★ Appriss   ★ Baptist BodyScan

Mission, Vision, and Values

Mission
The mission of Baptist Hospital East is to exemplify our Christian heritage of providing quality healthcare services by enhancing the health of the people and communities we serve.

Vision
The vision of Baptist Hospital East is to be recognized as the leading provider of quality healthcare, where patients want to receive their care, employees want to work, and physicians want to practice.

Values
Baptist Hospital East will live out its Christ-centered mission to others and achieve its vision guided by the values of integrity, respect, stewardship, excellence and collaboration.

A BHE employee group developed the following list of definitions for each value:

Value	Definition
Respect	Honoring and holding in high regard the dignity and worth of our patients and their families, our co-workers, and the health system of which we are a part.
Integrity	Doing the right thing, adhering to our policies and being honest with each other, our patients and their families.
Collaboration	Communicating and working together for the overall good of the team, organization, patients, and community while recognizing strength in our diversity.
Excellence	Continuous commitment in excelling in what we do.
Stewardship	Preserving and protecting our human and financial resources in a manner that ensures the future expansion and development of superior healthcare services that benefit our community.

Purpose

This Community Health Needs Assessment has been done for a variety of reasons, chief among them being:

- To help meet the hospital's mission of enhancing the health of the people and communities it serves.
- To comply with the Patient Protection and Affordable Care Act of 2010 and maintain the hospital's tax-exempt status.

- To establish community health needs for the hospital's service area to help prioritize resource allocation.
- To gather data that can be used in other efforts to obtain grants and qualify for awards and certifications.
- To determine what resources are available within BHE's service area and how the hospital can coordinate activities with other agencies.
- To involve appropriate individuals and groups in the process to ensure needs are identified, efforts are not duplicated, and the correct agencies to handle specific issues are identified in the strategic implementation plan.
- To create a sustainable process for conducting Community Health Needs Assessment that can be replicated and continued for future assessments.

Executive Summary

The Patient Protection and Affordable Care Act of 2010 includes a provision that requires every tax-exempt, non-governmental hospital to:

- Conduct a Community Health Needs Assessment (CHNA) at least every three years
- Adopt a Strategic Implementation Plan (SIP) that identifies how the needs identified in the assessment will be met and by whom
- Report to the Internal Revenue Service via its 990 tax form how it is meeting its implementation plan

The CHNA must show how broad input from the community served by the hospital was collected and must be made widely available to the public.

This report details the process used to gather, disseminate, and prioritize the information used in the assessment. BHE worked closely with numerous institutions, agencies, and individuals representing public health, other hospitals, and community members.

Framework

Early in the process, BHE and the other hospitals in the Baptist Healthcare System decided to use a strategic planning model as the framework by which this report would be constructed. It is similar to the method used for the hospital's strategic plan; data is gathered about the hospital and its community, areas of opportunity and need are identified, and strategies for meeting these needs are formulated. Because the focus of this report is more external, more time was spent examining factors in the community.

A wide variety of community resources were consulted during this process. It began with meetings between the BHS hospitals. During these meetings, an outline of the types of information to be collected and the order of their presentation was determined to allow greater consistency of reporting among the hospitals.

BHE determined its service area for the project using the most recent patient origin data (CY 2011), including over 80% of its discharges in the zip codes chosen. Further information about this area is found in the section headed *Service Area*, on page 4.

Next, contacts were made with the Health Departments responsible for the counties in the service area. There are four health departments responsible for the counties BHE serves: Louisville Metro Public Health & Wellness (Jefferson County); the Bullitt County Health

Department; the Oldham County Public Health Department; and the North Central District Health Department, which serves both Shelby and Spencer Counties. Louisville Metro Public Health & Wellness brought all the Louisville-based hospitals, hospital systems, and the Kentucky Hospital Association (KHA) together for joint meetings to assist them in the CHNA process. This may help avoid duplication of efforts in data collection and resource allocation. In Oldham and Shelby Counties, the Health Departments were in the process of developing their Mobilizing for Action through Partnerships and Planning (MAPP) documents; BHE had representation on the steering committees and served on other subsidiary committees that gathered data. Bullitt and Spencer Counties have not yet begun their MAPP processes; on their Web site, Dr. Swannie Jett, Executive Director of BCPHD, says Bullitt County is losing ground in obesity, nutrition, physical activity, adult smoking, and physical environment (includes access to recreational facilities). Through these contacts, the public meetings that were held, and public surveys conducted in Jefferson and Oldham Counties, BHE solicited primary feedback on the health issues confronting its service area.

Throughout this time, secondary data from demographics and socioeconomic sources, Kentucky vital statistics, disease prevalence, and health indicators and statistics were collected. National, state, and local sources were used. This data will be shared in the next section.

Finally, the Community Health Needs Assessment Committee met to consider all the information. They discussed the data presented and created a list of the health issues that were identified in both primary and secondary data sources. After robust interaction, the committee prioritized the list and discussed various ways the hospital could help to meet these needs. This report was written and sent to all committee members for additional comments and suggestions. After these were incorporated, the final document was sent to the hospital and system Boards for approval.

Profile of the Community

Demographics and Socioeconomics

BHE serves zip codes in Jefferson, Bullitt, Oldham, Shelby, and Spencer Counties in Kentucky (see map on page 4). The following table shows the demographics and socioeconomic characteristics of BHE's primary service area for the most recent period available.

Demographics Expert 2.7
2012 Demographic Snapshot
Area: BHE CHNA Service Area 7-6-12
Level of Geography: ZIP Code

DEMOGRAPHIC CHARACTERISTICS

	Selected Area	USA			2012	2017	% Change
2000 Total Population	566,913	281,421,906		Total Male Population	327,075	346,186	5.8%
2012 Total Population	668,943	313,095,504		Total Female Population	341,868	361,373	5.7%
2017 Total Population	707,559	325,256,835		Females, Child Bearing Age (15-44)	131,566	132,493	0.7%
% Change 2012 - 2017	5.8%	3.9%					
Average Household Income	$71,745	$67,315					

POPULATION DISTRIBUTION

	Age Distribution				
Age Group	2012	% of Total	2017	% of Total	USA 2012 % of Total
0-14	130,072	19.4%	136,904	19.3%	20.2%
15-17	27,116	4.1%	27,759	3.9%	4.3%
18-24	53,196	8.0%	59,774	8.4%	9.7%
25-34	91,997	13.8%	87,897	12.4%	13.5%
35-54	199,992	29.9%	196,499	27.8%	28.1%
55-64	82,507	12.3%	96,987	13.7%	11.4%
65+	84,063	12.6%	101,739	14.4%	12.9%
Total	668,943	100.0%	707,559	100.0%	100.0%

HOUSEHOLD INCOME DISTRIBUTION

	Income Distribution		
2012 Household Income	HH Count	% of Total	USA % of Total
<$15K	26,708	9.9%	13.0%
$15-25K	26,095	9.6%	10.8%
$25-50K	72,469	26.8%	26.7%
$50-75K	56,160	20.7%	19.5%
$75-100K	35,414	13.1%	11.9%
Over $100K	54,063	20.0%	18.2%
Total	270,909	100.0%	100.0%

EDUCATION LEVEL

	Education Level Distribution		
2012 Adult Education Level	Pop Age 25+	% of Total	USA % of Total
Less than High School	15,903	3.5%	6.3%
Some High School	28,518	6.2%	8.6%
High School Degree	123,333	26.9%	28.7%
Some College/Assoc. Degree	134,467	29.3%	28.5%
Bachelor's Degree or Greater	156,338	34.1%	27.8%
Total	458,559	100.0%	100.0%

RACE/ETHNICITY

	Race/Ethnicity Distribution		
Race/Ethnicity	2012 Pop	% of Total	USA % of Total
White Non-Hispanic	543,581	81.3%	62.8%
Black Non-Hispanic	64,306	9.6%	12.3%
Hispanic	32,236	4.8%	17.0%
Asian & Pacific Is. Non-Hispanic	14,916	2.2%	5.0%
All Others	13,904	2.1%	2.9%
Total	668,943	100.0%	100.0%

There are approximately 530,000 persons in the adult population (16+) with a labor force of 360,000. Residents are slightly wealthier and more racially and ethnically homogenous than the US as a whole. Most are employed with lower than State average unemployment (see table on the following page).

			2012 Total Population 16+		Total Labor Force		Unemployed in Labor Force		Females in Labor Force	
ZIP Code	ZIP City Name	County	Count	%Down	Count	%Across	Count	%Across	Count	%Across
	Labor Force Characteristics									
	Area: BHE CHNA Service Area 7-6-12									
	2012 ZIP Code Report									
	Ranked on 2012 Total Population 16+ (Desc)									
40047	Mount Washington	Bullitt	14,938	2.8%	10,252	68.6%	1,107	7.4%	4,737	62.1%
40109	Brooks	Bullitt	2,432	0.5%	1,490	61.3%	275	11.3%	697	56.9%
40150	Lebanon Junction	Bullitt	3,685	0.7%	2,298	62.4%	324	8.8%	1,079	58.9%
40165	Shepherdsville	Bullitt	27,195	5.1%	17,676	65.0%	2,170	8.0%	8,317	60.5%
40023	Fisherville	Jefferson	3,413	0.6%	2,429	71.2%	189	5.5%	1,116	64.9%
40025	Glenview	Jefferson	151	0.0%	84	55.6%	1	0.7%	35	44.9%
40059	Prospect	Jefferson	13,605	2.6%	9,060	66.6%	358	2.6%	3,817	55.1%
40204	Louisville	Jefferson	11,890	2.2%	8,568	72.1%	687	5.8%	4,158	68.2%
40205	Louisville	Jefferson	19,878	3.8%	14,096	70.9%	716	3.6%	6,999	65.1%
40206	Louisville	Jefferson	16,427	3.1%	11,733	71.4%	969	5.9%	5,913	67.0%
40207	Louisville	Jefferson	24,540	4.6%	15,938	64.9%	865	3.5%	7,542	57.3%
40213	Louisville	Jefferson	13,524	2.6%	9,004	66.6%	714	5.3%	4,439	62.0%
40217	Louisville	Jefferson	10,259	1.9%	6,497	63.3%	606	5.9%	3,183	59.7%
40218	Louisville	Jefferson	24,664	4.7%	16,279	66.0%	1,803	7.3%	8,296	62.3%
40219	Louisville	Jefferson	28,789	5.4%	18,631	64.7%	1,768	6.1%	9,185	60.2%
40220	Louisville	Jefferson	26,738	5.0%	17,640	66.0%	866	3.2%	8,680	60.7%
40222	Louisville	Jefferson	17,913	3.4%	11,737	65.5%	583	3.3%	5,603	58.3%
40223	Louisville	Jefferson	18,069	3.4%	12,639	69.9%	950	5.3%	6,210	64.6%
40228	Louisville	Jefferson	14,401	2.7%	10,093	70.1%	745	5.2%	4,933	66.1%
40229	Louisville	Jefferson	28,838	5.4%	19,966	69.2%	1,861	6.5%	9,608	65.4%
40241	Louisville	Jefferson	22,419	4.2%	15,710	70.1%	973	4.3%	7,194	62.0%
40242	Louisville	Jefferson	8,472	1.6%	5,877	69.4%	417	4.9%	2,815	63.0%
40243	Louisville	Jefferson	8,349	1.6%	5,770	69.1%	287	3.4%	2,699	62.0%
40245	Louisville	Jefferson	24,031	4.5%	17,322	72.1%	903	3.8%	7,480	60.6%
40291	Louisville	Jefferson	29,024	5.5%	20,865	71.9%	1,489	5.1%	10,075	67.1%
40299	Louisville	Jefferson	30,452	5.7%	21,778	71.5%	1,010	3.3%	10,351	65.3%
40010	Buckner	Oldham	541	0.1%	381	70.4%	12	2.2%	164	61.2%
40014	Crestwood	Oldham	15,198	2.9%	11,008	72.4%	465	3.1%	4,956	64.7%
40026	Goshen	Oldham	3,852	0.7%	2,939	76.3%	86	2.2%	1,387	71.1%
40031	La Grange	Oldham	18,849	3.6%	10,276	54.5%	706	3.7%	4,780	63.8%
40056	Pewee Valley	Oldham	2,427	0.5%	1,832	75.5%	101	4.2%	860	68.4%
40077	Westport	Oldham	556	0.1%	354	63.7%	25	4.5%	152	55.3%
40003	Bagdad	Shelby	1,558	0.3%	1,029	66.0%	42	2.7%	482	64.4%
40022	Finchville	Shelby	663	0.1%	413	62.3%	30	4.5%	169	51.7%
40065	Shelbyville	Shelby	22,027	4.2%	15,767	71.6%	900	4.1%	7,256	66.1%
40067	Simpsonville	Shelby	4,318	0.8%	2,643	61.2%	189	4.4%	1,201	51.5%
40076	Waddy	Shelby	2,200	0.4%	1,460	66.4%	70	3.2%	695	64.6%
40046	Mount Eden	Spencer	1,566	0.3%	970	61.9%	115	7.3%	421	56.1%
40071	Taylorsville	Spencer	11,990	2.3%	8,328	69.5%	921	7.7%	3,779	62.7%
Total			529,841	100.0%	360,832	68.1%	26,298	5.0%	171,463	62.7%

Demographics Expert 2.7

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The northeastern portion of Jefferson County and all of Oldham County are above average in household income and home value. Bullitt County and the central portion of Jefferson County are all below average socioeconomically. The rest of the service area falls into the average categories for household income and home value.

Households by Socioeconomic Characteristics
Area: BHE CHNA Service Area 7-6-12
2012 ZIP Code Report
Ranked on 2012 Households (Desc)

ZIP Code	City Name	2012 Total Households		2012 Median HH Income	Median Age of Total Population	Median Home Value
		Count	%Down			
40025	Glenview	81	0.0%	$110,417	51.7	$412,500
40059	Prospect	6,364	2.3%	$108,847	41.6	$339,553
40245	Louisville	11,385	4.2%	$97,015	35.9	$294,579
40010	Buckner	223	0.1%	$91,964	41.2	$238,953
40026	Goshen	1,768	0.7%	$88,142	38.6	$212,079
40014	Crestwood	6,936	2.6%	$78,597	39.1	$231,443
40022	Finchville	303	0.1%	$75,260	43.9	$261,607
40241	Louisville	12,186	4.5%	$74,302	36.2	$218,473
40023	Fisherville	1,542	0.6%	$72,054	40.9	$226,175
40056	Pewee Valley	1,166	0.4%	$69,787	40.3	$183,438
40067	Simpsonville	1,842	0.7%	$68,151	36.7	$214,912
40299	Louisville	15,480	5.7%	$62,995	37.6	$173,982
40223	Louisville	9,661	3.6%	$62,815	40.1	$207,598
40243	Louisville	4,536	1.7%	$61,947	40.5	$183,230
40291	Louisville	14,600	5.4%	$61,423	37.3	$157,994
40077	Westport	259	0.1%	$60,643	43.1	$203,571
40031	La Grange	7,008	2.6%	$60,056	38.7	$180,198
40071	Taylorsville	5,471	2.0%	$59,672	38.4	$164,729
40205	Louisville	10,669	3.9%	$57,972	42.5	$207,002
40207	Louisville	14,182	5.2%	$57,966	42.0	$216,431
40242	Louisville	4,672	1.7%	$56,492	39.0	$174,658
40046	Mount Eden	720	0.3%	$54,388	38.7	$145,183
40222	Louisville	10,060	3.7%	$54,179	42.3	$211,372
40047	Mount Washington	7,154	2.6%	$51,890	38.0	$158,770
40076	Waddy	1,053	0.4%	$51,318	39.2	$142,308
40228	Louisville	7,247	2.7%	$51,308	37.5	$148,361
40229	Louisville	13,925	5.1%	$50,258	35.6	$123,985
40220	Louisville	14,644	5.4%	$50,101	40.2	$157,007
40065	Shelbyville	10,640	3.9%	$50,082	37.5	$156,378
40165	Shepherdsville	12,714	4.7%	$48,418	37.8	$140,378
40003	Bagdad	721	0.3%	$44,740	39.8	$135,969
40109	Brooks	1,181	0.4%	$44,575	40.1	$109,375
40150	Lebanon Junction	1,690	0.6%	$42,805	39.9	$113,576
40219	Louisville	14,849	5.5%	$38,997	36.9	$121,683
40206	Louisville	9,622	3.6%	$37,788	40.2	$146,004
40217	Louisville	5,879	2.2%	$37,780	39.3	$112,347
40204	Louisville	7,515	2.8%	$37,557	39.2	$140,993
40218	Louisville	13,557	5.0%	$35,580	36.8	$115,842
40213	Louisville	7,404	2.7%	$34,874	37.6	$109,162
Total		270,909	100.0%	$56,511	38.5	$178,057

Demographics Expert 2.7

Mortality

The following table shows mortality rates by several leading causes of death in each county:

Age Adjusted Death Rates	Jefferson	Bullitt	Oldham	Shelby	Spencer	KY	USA
Total	**881.2**	**825.1**	**965.8**	**765.4**	**790.7**	**920.5**	**825.9**
Coronary Heart Disease	216.7	204.9	288.5	209.4	221.8	246.4	220.0
Cancer	216.4	153.3	209.7	169.8	177.9	214.5	188.7
COPD & Pneumonia	59.5	76.7	74.1	24.2	11.8	59.5	44.2
Accidents	39.8	40.5	36.5	32.2	59.0	53.7	39.7
Stroke	48.1	45.9	92.9	77.6	37.1	47.0	48.4
Diabetes	32.9	25.5	25.5	14.9	20.8	27.0	25.3
Suicide	11.8	15.1	13.7	4.4	0.0	12.9	11.9
Homicide	9.7	1.3	0.0	0.0	0.0	5.1	6.1
Motor Vechicle/100 M Miles	0.5	0.6	0.4	1.7	1.2	2.1	nr
All Other Causes	246.3		224.9	232.9	262.3	254.4	241.6
		Significantly Below KY Rate					
		Significantly Above KY Rate					
Source: KY Vital Statistics, KY State Data Center							
Motor vehicle rate is based on deaths per 100 million miles driven							

These rates are age-adjusted and signify the number of persons who expired per 100,000 population. The numbers in green are significantly below the Kentucky rates while the numbers shown in red are significantly higher. These may indicate areas that are doing better (or worse) in the care of specific conditions. Thus, Jefferson County's low death rate due to coronary heart disease may show that residents are seeking and receiving care quickly for cardiac-related events or they may be doing a better job of caring for themselves, thus reducing the number of cardiac-related events overall.

The most troubling areas seem to be in COPD & pneumonia in Bullitt and Oldham Counties and in cerebrovascular events (stroke) in Oldham and Shelby Counties. Overall, though, in most causes, the service area is average or better than average in death rates.

Cancer Incidence Rates

Cancer incidence rates are from the Kentucky Cancer Registry and cover a five-year span. Jefferson, Oldham, and Shelby Counties have higher than average incidence rates for prostate and breast cancer. These are two cancer sites that can be screened for the disease fairly easily, thus the higher rates may be a function of better detection. On the other hand, there may actually be higher numbers of people contracting cancer in these sites due to poor health behaviors or environmental hazards.

Age Adjusted Cancer Incidence	Jefferson	Bullitt	Oldham	Shelby	Spencer	KY
All Cancers	540.44	512.04	544.99	500.36	537.23	523.07
Prostate	155.16	117.61	170.23	147.97	134.74	138.96
Lung	95.56	91.57	93.92	87.79	91.94	100.41
Breast	76.98	66.34	69.27	70.19	62.05	65.84
Female Genitalia	47.48	44.57	40.43	45.49	34.47	49.53
Skin	18.43	25.29	20.04	30.42	23.65	19.76
Pancreas	15.98	17.90	13.47	8.43	8.68	13.52
All Other Causes	130.85	148.76	137.63	110.07	181.70	135.05
	Significantly Below KY Rate					
	Significantly Above KY Rate					
Source: KY Cancer Registry, 2005-2009 Data						

Health Statistics and Rankings

BHE collected health statistics and outcome measures from a wide variety of sources. The most recent data came from the Robert Wood Johnson County Health rankings which were published in 2012. The tables on the following two pages show health outcomes, health behaviors, clinical care availability, socioeconomic factors, and physical environment risks for each county in BHE's service area. The numbers highlighted in green are more favorable than the Kentucky average and the ones in red less favorable. The rankings are based on the one hundred-twenty (120) counties in Kentucky. Oldham County has almost the highest rankings in the Commonwealth, except in its physical environment rank which is the lowest in Kentucky. Shelby and Spencer Counties also rank very high except in food and nutrition-related categories. Obesity and excessive drinking are issues in most areas, while access to primary care is an issue in the areas outside of Jefferson County. Jefferson County has the highest violent crime rate in Kentucky.

	Jefferson	Bullitt	Oldham	Shelby	Spencer	Kentucky
Health Outcomes	**33**	**17**	**1**	**9**	**4**	
Mortality	33	4	1	8	5	
Premature death	8,405	6,382	5,209	6,628	6,418	8,781
Morbidity	36	54	5	21	8	
Poor or fair health	17%	20%	7%	17%	16%	22%
Poor physical health days	4.0	5.5	2.4	4.5	2.6	4.7
Poor mental health days	3.8	4.9	3.9	3.2	3.3	4.3
Low birthweight	9.40%	8.40%	8.20%	8.60%	7.90%	9.00%
Health Factors	**55**	**31**	**2**	**15**	**24**	
Health Behaviors	28	47	2	29	67	
Adult smoking	24%	31%	20%	25%		27%
Adult obesity	34%	34%	30%	35%	37%	33%
Physical inactivity	29%	34%	28%	28%	30%	31%
Excessive drinking	14%	8%	16%	11%	18%	11%
Motor vehicle crash death rate	13	17	12	20		22
Sexually transmitted infections	568	173	104	321	109	311
Teen birth rate	51	35	17	49	26	52
Clinical Care	2	33	3	27	23	
Uninsured	14%	15%	10%	17%	14%	17%
Primary care physicians	608:1	3,249:1	1,283:1	1,335:1	1,344:1	922:1
Preventable hospital stays	70	82	88	79	90	104
Diabetic screening	85%	82%	86%	82%	81%	82%
Mammography screening	70%	68%	74%	71%	62%	63%

Health Factors (cont.)	Jefferson	Bullitt	Oldham	Shelby	Spencer	Kentucky
Social & Economic Factors	83	16	1	8	4	
High school graduation	71%	81%	94%	76%		78%
Some college	66%	53%	69%	56%	58%	55%
Unemployment	10.60%	10.80%	8.50%	9.10%	10.40%	10.50%
Children in poverty	24%	15%	9%	18%	13%	26%
Inadequate social support	19%	21.00%	8%	13%	16%	20%
Children in single-parent households	41%	30%	18%	27%	20%	32%
Violent crime rate	646	130	81	191	55	288
Physical Environment	119	102	120	87	112	
Air pollution-particulate matter days	8	1	6	0	0	2
Air pollution-ozone days	7	1	10	0	0	2
Access to recreational facilities	10	9	3	5	6	8
Limited access to healthy foods	5%	0.17	9%	15%	21%	7%
Fast food restaurants	55%	0.7	59%	63%	89%	54%
Source: Robert Wood Johnson County Health Rankings						
http://www.countyhealthrankings.org/						

Primary Data

Public surveys were only done by two of the five county Health Departments. Shelby County is beginning its public survey on August 1, 2012, and will finish on August 31, too late for inclusion in this report.

Louisville Metro Public Health & Wellness conducted public surveys in April 2012 to gauge public sentiment about various healthcare-related issues. The LMPHW even conducted public meetings in five different venues, inviting the public to four of them and business leaders and medical professionals to the fifth. The four public meetings were conducted in the four quadrants of Jefferson County: northwest (The TAPP Center at 26th and Broadway); southwest (Southwest Government Center on Dixie Highway); northeast (Norton Commons Fire Station on Chamberlain Lane); and southeast (Okolona Public Library on Preston Highway). The business leader and medical professional meeting was held at the Greater Louisville Medical Society offices (1st and Chestnut Streets) in downtown Louisville. Turnout at these meetings was small, but the attendees were very vocal. Forty-five persons came to the four meetings and about 40 attended the meeting at the Medical Society. Because the turnout was limited, the LMPHW began conducting online surveys through Survey Monkey (see Appendix A for a copy of the survey). Over a two month period, over 1,800 persons took the survey from throughout Jefferson County. The following charts reflect the responses for pertinent questions.

LMPHD Survey Respondents by Zip Code

Community Health Needs Assessment Survey Responses by Zip Code, 2012

Source: Community Health Needs Assessment Survey, 2012
Louisville Metro Department of Public Health and Wellness
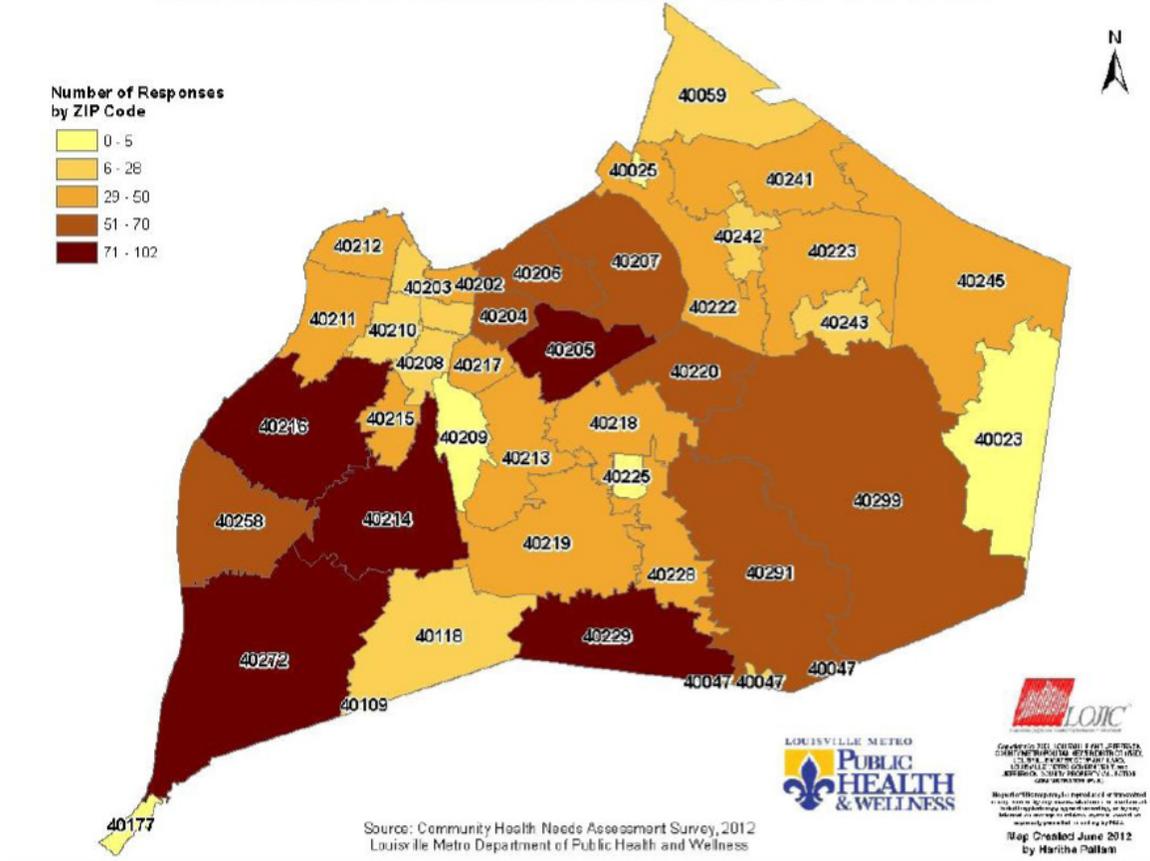
This map shows the number of surveys from residents in each of the zip codes in Jefferson County. There was no significant variation in responses based on where respondents lived.

The chart on the next page shows where respondents said they sought care when their primary care physicians were not available. Most said they went to an urgent care facility, a retail clinic, or an emergency room.

Where Patients Seek Care When Their Primary Care Physician Isn't Available
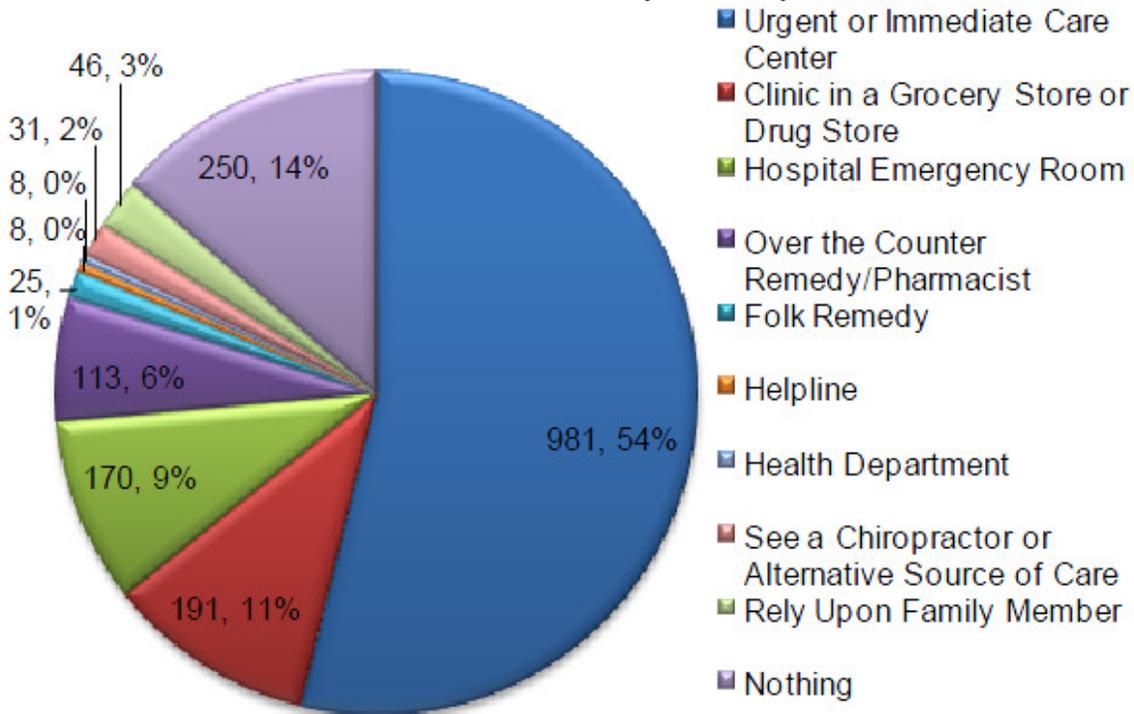
The LMPHW questionnaire was developed to facilitate electronic voting mechanisms for use during the public meetings. These devices allowed participants to register their choices anonymously with their responses automatically collected by the computer system. While this made the meetings flow more easily, collected the data more efficiently, and probably made the participants feel their privacy was more protected, it limited how the questions were asked. Rather than allowing a ranking of the most important health issues, the individual health issues were put in separate questions. This showed relative differences between one or two related issues in a particular question, but did not allow any comparison between questions. The chart on page 19 shows a sample question about two emerging health issues, obesity and HIV/AIDS. It shows most people don't know or have no opinion on these issues. The second highest percentage says obesity is the most important issue. One explanation for the high percentage of "No opinion/I don't know" answers could be that respondents felt other health issues were more important, but without comparative questions, it is impossible to know.

Which of these emerging health issues is most important?
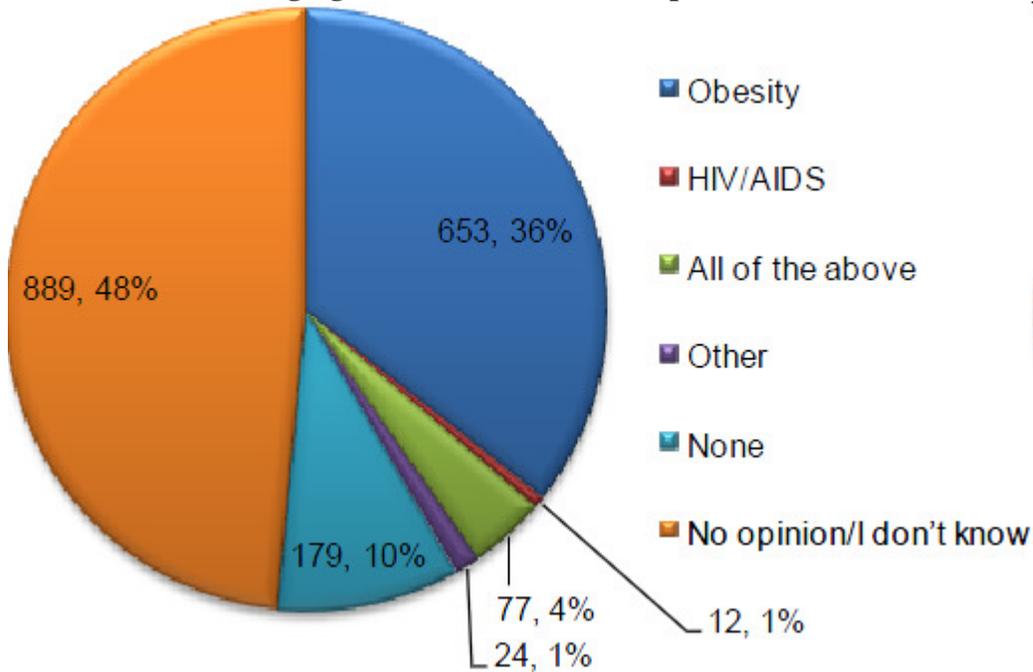
The final LMPHW chart on page 20 shows the respondents' ideas about the best way to address health concerns. While the largest group believes lowering healthcare costs is the best solution, large numbers believe more access to health screenings and to primary care physicians would improve healthcare the most.
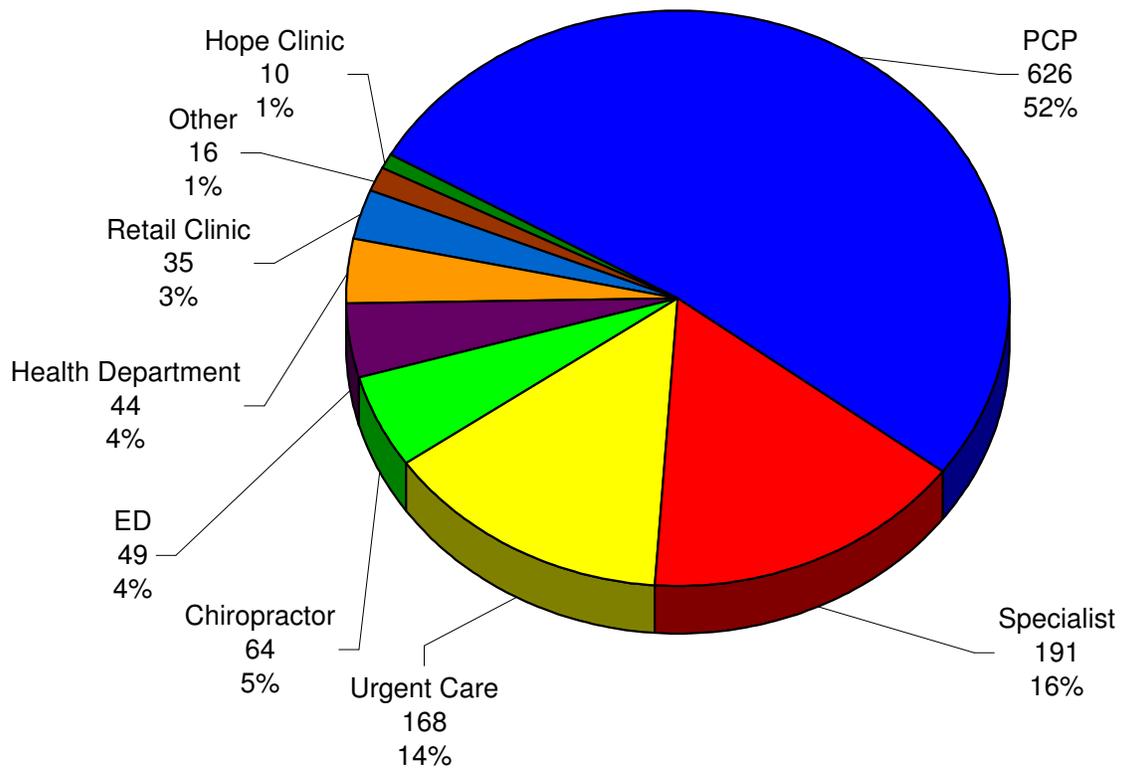
What are the best ways to address health concerns?
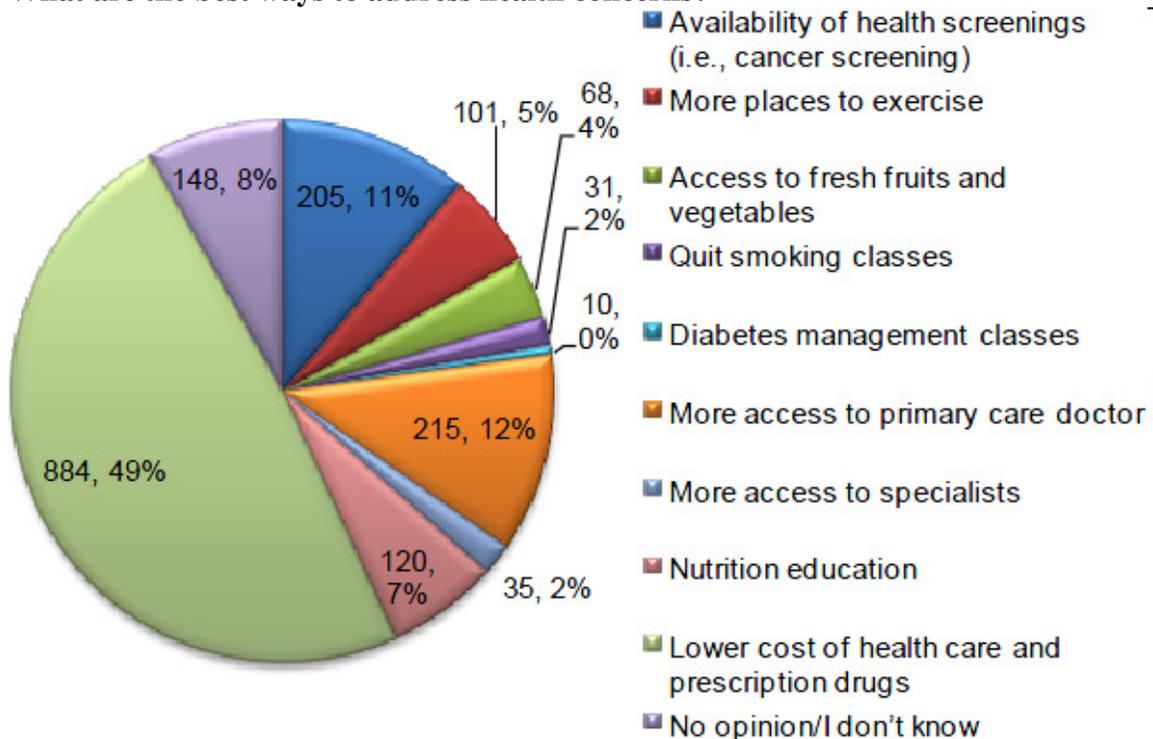
The Oldham County Health Department also conducted a public survey to determine what the health concerns were in their county. A committee of the Oldham County MAPP including members from Baptist Hospital East and Baptist Hospital Northeast created the survey (see Appendix B for a copy of the survey). They handed out surveys at a variety of public locations and special events over a two-week period. They also publicized a Web address where Oldham County residents could complete the survey online. They had 738 responses, with just over 500 being paper-based and the rest coming from the online survey. The planning department at BHE ran crosstabs of the survey data against various demographic measures of the respondents. The only significant variation was by residents above age 65 who thought almost 50% of the time that aging issues were the top health concern vs. 4.7% in the entire survey population. The following charts reflect the responses for pertinent questions.

What Are The Top Health Problems in Oldham County?

Diabetes 84 3.9%
Blood Pressure 96 4.5%
Aging 101 4.7%
Child Abuse 112 5.3%
Cancers 129 6.1%
Motor Vehicle Crash Injuries 138 6.5%
Heart Disease & Stroke 165 7.8%
Alcohol/Drugs 405 19.0%
Obesity 546 25.6%
Other 353 16.6%
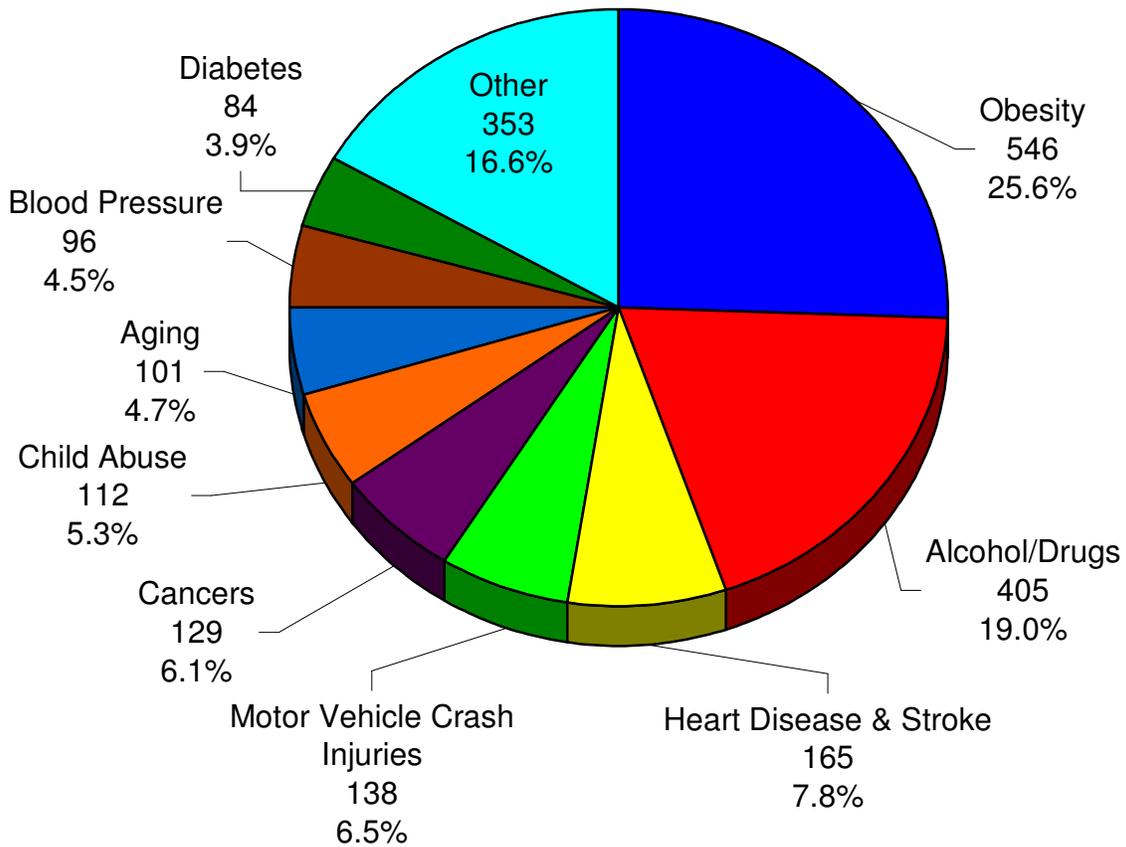
The OCPHD survey asked fewer questions than the LMPHD survey and allowed ranking of responses. Respondents could give up to three choices for what the top health problems are. The pie chart above shows that obesity, alcohol and drugs, heart disease and stroke, motor vehicle crashes, and cancer are the leading health problems in Oldham County.

Where Do Oldham County Residents Seek Care?

Hope Clinic
10
1%

Other
16
1%

Retail Clinic
35
3%

Health Department
44
4%

ED
49
4%

Chiropractor
64
5%

Urgent Care
168
14%

PCP
626
52%

Specialist
191
16%

Another question asked where Oldham County residents seek care. Most said they go to their primary care physician (although another question asked where they went for care and many responded they left the county for a wide variety of reasons including that certain specialties were not available in Oldham County).

Hospital	Type	Licensed Beds	Location
Baptist Hospital East	Acute, Psychiatric, & Rehab	519	Eastern Louisville
Baptist Hospital Northeast	Acute & Long-term Care	120	Oldham County
Jewish Hospital	Acute & Psychiatric	462	Downtown Louisville
St. Mary & Elizabeth Hospital	Acute	298	Southwest Louisville
Jewish Hospital Shelbyville	Acute	70	Shelby County
Frazier Rehab Hospital	Rehabilitation	135	Downtown Louisville
Our Lady of Peace	Psychiatric	396	Central Louisville
University Hospital	Acute & Psychiatric	404	Downtown Louisville
The Brooke – DuPont	Psychiatric	88	Eastern Louisville
The Brooke Hospital KMI	Psychiatric	86	Eastern Louisville
Kindred Hospital - Louisville	Rehabilitation	337	
Norton Hospital	Acute	905	Downtown Louisville
Norton Kosair Children's Hospital	Acute		Downtown Louisville
Norton Audubon Hospital	Acute	432	Central Louisville
Norton Suburban Hospital	Acute	373	Eastern Louisville
Norton Brownsboro Hospital	Acute	127	Northeast Louisville

Source: Kentucky Office of the Inspector General, Hospital Directory, as of 7/2/12

The KentuckyOne Health system includes Jewish Hospital, St. Mary & Elizabeth Hospital, Jewish Hospital Shelbyville, Frazier Rehab Hospital, and Our Lady of Peace Psychiatric Hospital. There are seven other Catholic Health Initiative (CHI) hospitals in Kentucky that now comprise KentuckyOne Health. Jewish Hospital holds a 40-bed rehab hospital CON and license in Jefferson County and holds a 60-bed acute care hospital CON in Bullitt County, neither of which has been built. Jewish Hospital also has four (4) outpatient medical centers that have a large number of diagnostic and therapeutic services with three (3) in Jefferson County and one (1) in north-central Bullitt County.

Norton Healthcare System has five hospitals in Jefferson County. As such, it is the largest system in the Louisville area in number of beds. It also has the only children's' hospital in the state (Norton Hospital and Kosair Children's Hospital are part of the same license and its licensed beds are counted together). Norton Brownsboro Hospital opened 80 of its 127 licensed beds in August 2009 in the northeast portion of Jefferson County. Norton has also opened a pediatric outpatient center near Norton Brownsboro, capitalizing on its Kosair Children's Hospital name recognition; this center houses a 24-hour emergency department for children and a four-operating room Ambulatory Surgery Center that is supposed to be for children, but is not so limited by its CON or license. Norton Healthcare has announced that it will be converting Norton Suburban to a Women's and Children's hospital, although they have indicated they will still serve men there, too. Norton recently opened a cancer center on their downtown campus. Norton Healthcare also has fourteen (14) urgent care facilities located throughout Jefferson and Bullitt County as well as southern Indiana. Norton employs the most physicians of any system in the area.

Other Licensed Facilities

According to the Kentucky Office of the Inspector General, there are 268 licensed facilities other than hospitals in Jefferson County. They run the gamut from ambulatory care facilities to adult day care to dialysis centers to rehabilitation agencies to special medical technology clinics. There are 17 licensed facilities in Bullitt County, 14 in Oldham County, 9 in Shelby County, and 2 in Spencer County.
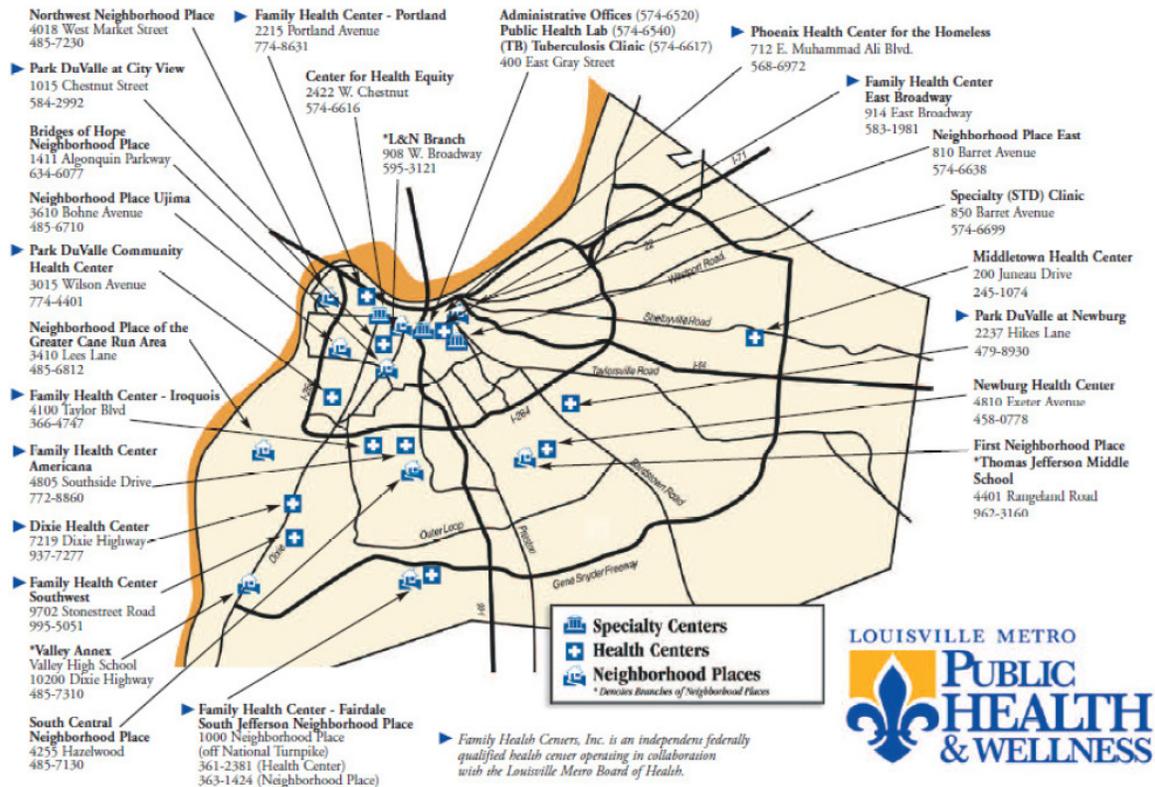
Health Departments

As stated earlier in this document, there are four separate Health Departments located in BHE's CHNA service area: Louisville Metro Public Health & Wellness; Bullitt County Health Department; Oldham County Health Department; and North Central District Health Department which serves Shelby, Spencer, Henry, and Trimble Counties. The Health Departments seem to be doing an excellent job of handling public heath issues, such as immunizations, monitoring environmental health issues, and providing education.

Louisville Metro Public Health & Wellness has 350 highly-trained employees providing a wide range of services to the people of Louisville, including offering health clinics across the community, information about Louisville's health policies and programs, inspection of eating establishments, preventing communicable diseases, and helping improve children's health. Although LMPHW does not provide direct prenatal or primary care services, the department partners with community experts in the field to assure access to these services for the whole community. Primary partner agencies include Family Health Centers, Inc., the University of Louisville, and Park DuValle Community Health Center.
Dr. LaQuandra Nesbitt, the director of LMPHW, has been instrumental in bringing the hospitals together to work on their respective Community Health Needs Assessments; in her first year in the position, Dr. Nesbitt has been very vocal about creating partnerships to improve the health of the community.

The map on the following page shows the locations of the LMPHW public health clinics. Three health centers are located in BHE's CHNA service area.

Public Health & Wellness Department, Family Health Center and Neighborhood Place Sites

Northwest Neighborhood Place
4018 West Market Street
485-7230

▶ **Park DuValle at City View**
1015 Chestnut Street
584-2992

Bridges of Hope Neighborhood Place
1411 Algonquin Parkway
634-6077

Neighborhood Place Ujima
3610 Bohne Avenue
485-6710

▶ **Park DuValle Community Health Center**
3015 Wilson Avenue
774-4401

Neighborhood Place of the Greater Cane Run Area
3410 Lees Lane
485-6812

▶ **Family Health Center - Iroquois**
4100 Taylor Blvd
366-4747

▶ **Family Health Center Americana**
4805 Southside Drive
772-8860

▶ **Dixie Health Center**
7219 Dixie Highway
937-7277

▶ **Family Health Center Southwest**
9702 Stonestreet Road
995-5051

***Valley Annex**
Valley High School
10200 Dixie Highway
485-7310

South Central Neighborhood Place
4255 Hazelwood
485-7130

▶ **Family Health Center - Portland**
2215 Portland Avenue
774-8631

Center for Health Equity
2422 W. Chestnut
574-6616

***L&N Branch**
908 W. Broadway
595-3121

▶ **Family Health Center - Fairdale South Jefferson Neighborhood Place**
1000 Neighborhood Place
(off National Turnpike)
361-2381 (Health Center)
363-1424 (Neighborhood Place)

Administrative Offices (574-6520)
Public Health Lab (574-6540)
(TB) Tuberculosis Clinic (574-6617)
400 East Gray Street

▶ **Phoenix Health Center for the Homeless**
712 E. Muhammad Ali Blvd.
568-6972

▶ **Family Health Center East Broadway**
914 East Broadway
583-1981

Neighborhood Place East
810 Barret Avenue
574-6638

Specialty (STD) Clinic
850 Barret Avenue
574-6699

Middletown Health Center
200 Juneau Drive
245-1074

▶ **Park DuValle at Newburg**
2237 Hikes Lane
479-8930

Newburg Health Center
4810 Exeter Avenue
458-0778

First Neighborhood Place
*Thomas Jefferson Middle School
4401 Rangeland Road
962-3160

🏛 **Specialty Centers**
✚ **Health Centers**
🏢 **Neighborhood Places**
* Denotes Branches of Neighborhood Places

LOUISVILLE METRO
PUBLIC HEALTH & WELLNESS

▶ *Family Health Centers, Inc. is an independent federally qualified health center operating in collaboration with the Louisville Metro Board of Health.*

The Oldham County Health Department mission is to protect, and promote a healthy community through education, enforcement and empowerment. In order to accomplish this, they control communicable disease, encourage healthy lifestyles, provide preventative screenings and reduce hazards in the environment. Their clinic provides adult health vaccinations, cancer screening, a cardiovascular disease program, a dental program, diabetes care, family planning services, a new parent visitation program called HANDS, immunizations, nutrition counseling, prenatal care, smoking cessation, sexually transmitted disease prevention, teen pregnancy and sexual disease counseling, tuberculosis screening, well child exams, and administers the Women/Infant/Children (WIC) nutrition program for the county.

The North Central District Health Department and the Bullitt County Health Department provide similar services.

Physicians

In November 2010, BHE conducted a physician manpower analysis that counted the number of physicians by specialty in its service area as defined by Stark II regulations, which is slightly different than the CHNA service area. Using three different

physician-to-population ratios, it was determined that there were physician shortages in the following specialties:

Physician Need Summary by Model — BHE Service Area

Specialty	GMENAC	Medstat	Managed Care
Family/General Medicine	7.3	10.7	51.4
General Surgery	46.0	4.7	14.6
Geriatrics	18.8	-	-
Cardiovascular Surgery	5.8	3.9	-
Rheumatology	1.7	-	0.9
Hand Surgery	2.0	-	-
OB/GYN	5.5	(21.2)	18.9

A dash indicates that model does not calculate a ratio for that specialty & parentheses indicate a surplus in that category.

There were surpluses in almost all other specialties in the service area. This is due primarily to the fact that Jefferson County is a densely populated area with numerous healthcare facilities and one of the three medical schools in Kentucky. Physicians tend to congregate around such sites.

Despite the seeming plethora of physicians and medical facilities in BHE's service area, there are still areas that are underserved. BHN also conducted a physician manpower analysis in July 2012; it showed physician shortages in almost every specialty in its service area. Spencer County has only one licensed primary care physician and is considered a Health Professional Shortage Area (HPSA) for primary care. Even within Jefferson County, there are still areas that do not have enough physicians that have offices close to where people live.

Committee Discussion

During the Community Health Needs Assessment Committee meeting, members expressed their thoughts about several health concerns in the area and where BHE should concentrate its resources over the next three years. The committee included Board members, physicians, senior hospital leadership, and some department directors.

After studying the primary and secondary data, the committee began discussing the issues. There was consensus that present health patterns resulting in higher healthcare costs are unsustainable and that efforts need to be made to engender more personal responsibility in individuals. Physician members said that electronic health records, more medical home model primary care physician practices, and wellness management with electronic reporting by patients would help foster a higher awareness of what individuals' choices would mean for their long-term wellbeing. They said that creating a higher level of health literacy would come about through improved access to care, more education about wellness, and a combination of communities, health industry members, and government creating incentives for people to take better care of themselves.

The committee members also discussed the services BHE already provides that are detailed in the annual Community Benefit Report (see Appendix D for the FY 2011 BHE summary report). They asked if the implementation plan would supplement or replace the Community Benefit activities previously done by the hospital. The intent of the Community Health Needs Assessment and Strategic Implementation Plan does not seem to be to change anything the hospital already does; instead, it is to ensure that the activities being offered help meet the identified needs of the community served.

The committee discussed the pending primary care physician shortage and ways to help alleviate some of the access to care gaps that will likely occur due to smaller patient panels in medical homes, more current primary care physicians retiring, fewer medical school students choosing primary care as a specialty, and physicians opting out of government-based programs as reimbursement from that source declines. The group pointed to increasing the use of physician-extenders such as Advanced Registered Nurse Practitioners (ARNPs) and Physician Assistants (PAs) as well as having extended hours in owned practices, urgent care facilities, and retail health clinics as possible solutions.

Prioritized Health Issues

The committee then turned to identifying and prioritizing the health issues in the service area. The following list was developed, in decreasing order of priority:

1. Lack of Health Literacy
2. Access to Care

3. The Aging Population
4. Heart Disease
5. Cancer
6. Hypertension
7. Diabetes
8. Obesity
9. Smoking

Committee members noted that several of these issues are related and efforts to combat one would result in improvements in one or more others.

Health literacy was defined as an increased awareness of the public to their overall healthcare environment, including knowledge of how and when to access care, understanding about their personal health status, and the necessity of compliance to medicine and lifestyle regimens assigned by their physicians. This cannot be accomplished solely by hospitals. Instead, it needs to be a continued and general effort by medical professionals, schools, churches, and government agencies to educate and engage individuals in caring for themselves. Kentucky has some of the highest rates in the nation for preventable health conditions and for behaviors that have been identified as unhealthy. The committee felt that increasing health literacy and personal responsibility would improve the general health of the population more than any other activity.

Access to care included all potential barriers to receiving necessary healthcare services. There are financial issues, lack of knowledge, transportation difficulties, physician shortages in some areas, service distribution, and scheduling issues (e.g., when physician office hours conflict with work schedules). Baptist Hospital East has the potential to affect all these areas.

America's population (and the one in BHE's service area) is aging. Older adults are among the fastest growing age groups, and the first "baby boomers" (adults born between 1946 and 1964) turned 65 in 2011. According to the American Hospital Association, more than 37 million people in this group (60 percent) will manage more than 1 chronic condition by 2030. Older adults are at high risk for developing chronic illnesses and related disabilities. These chronic conditions include diabetes, arthritis, congestive heart failure, and dementia. In addition, older adults are also more likely to fall, resulting in injury. However, participation in physical activity, self-management of chronic diseases, and use of preventive health services can improve their health outcomes. Home health care will become increasingly important as seniors want to remain in their homes; this will also lower healthcare costs and improve older adults' quality of life.

The next four issues – heart disease, cancer, hypertension, and diabetes – were of similar weight. These disease states are all major causes of death, result in numerous hospitalizations, emergency department trips, physician visits, and readmissions, and can

be controlled and sometimes prevented with early intervention and patient management. The CDC shows that over 10.5% of all adults in the BHE service area have been diagnosed as having diabetes.

The committee recognized that obesity is an epidemic in Kentucky and in the BHE CHNA service area. Obesity-related conditions include heart disease, stroke, type 2 diabetes, hypertension, osteoarthritis, sleep apnea and respiratory problems, and certain types of cancer (including pancreatic, kidney, prostate, endometrial, breast, and colon). Over 33% of the adult population in the BHE CHNA service area is considered obese and an additional 34% are considered overweight. Despite a *Healthy People 2010* goal to reduce obesity to 15% of the adult population, no state has met that goal and instead there are 12 states that exceed 30%, including Kentucky.

Smoking has been known for years to cause a wide variety of diseases and death. The CDC ranks Kentucky as having the worst smoking-attributable adult mortality and the highest percentage of 12-17 year-old smokers in the entire US. Among adults aged 35+ years, over 7,800 die as a result of tobacco use per year. This represents a smoking-attributable mortality rate of 370.6/100,000. Kentucky Medicaid does not cover smoking cessation counseling programs or medicines and Kentucky only spends 6% of what the CDC recommends on a tobacco control program. On the other hand, quitting smoking reduces the risk for a heart attack after just 1 year; stroke risk can fall to about the same as a nonsmoker's after 2-5 years; risks for cancer of the mouth, throat, esophagus, and bladder are cut in half after 5 years; and the risk for dying of lung cancer drops by half after 10 years. Although tobacco use has been declining across all demographics, it is still a major health issue, especially in Kentucky, a leading tobacco-producing state.

Strategic Implementation Plan

Baptist Hospital East Strategic Implementation Plan August 2012-2014

Identified Health Needs	Strategies	Action Items	Actor	Measures *
1. Lack of Health Literacy	Provide educational opportunities and wellness activities to better inform the public of the benefits of healthier lifestyles	Continue employee speaking engagements, health fairs, and community educational programs	BHE Community Relations	
		Provide patient education at discharge and in physician offices on the importance of compliance with medication usage	BHE Community Relations	
		Promote wellness programs	BHE Community Relations	
		Publish general and preventive health articles in newsletters that are mailed to homes in the BHE service area.	BHE Community Relations	
2. Access to Care	Provide information about physicians and services in the community	Operate a telephone referral line to help the public find physicians and community resources	BHE Community Relations	
	Reduce the cost of obtaining healthcare services	Follow the BHS Charity Care policy	BHE Patient Accounting, Financial Counselors	
		Assist individuals who qualify to apply for Medicaid	BHE Financial Counselors	
	Improve the availability of physicians and healthcare facilities in the service area	Recruit and employ physicians to alleviate shortages in key specialties and geographies	BMA & BHE Administration	
		Increase the number of physician extenders employed by BMA	BMA	
		Review schedules of operation of outpatient and physician offices to provide access outside of normal business hours	BHE & BMA	
		Offer alternatives (such as extended physician office hours, urgent care facilities, and Express Care Clinics in Walmarts) to emergency department visits for urgent and routine patient needs	BHE, BMA, BCHS, BPL	
		Research feasibility of locating healthcare services in underserved areas	BHE Planning	

Need	Goal	Strategy/Action	Responsible Party
3. The Aging Population	Provide education and wellness activities geared toward senior needs	Offer a wide range of programs to help seniors deal with the health challenges and lead healthier lifestyles	Baptist Hospital East/Milestone Wellness Center
		Educate hospital staff and physicians about the differences in caring for the elderly.	BHE Education
	Allow seniors to remain in the homes longer to improve their quality of life	Provide in-home nursing; home health aides; physical, occupational and speech therapy; social services; and pastoral care in a seven-county area. Provide information to seniors and their families regarding available community resources to support independent living.	Baptist Hospital East Home Health Agency; BHE Cooperative Care Staff
4. Heart Disease	Provide education to improve heart health	Publish monthly e-publication, Your Health Heart	BHE Community Relations
	Provide a full-range of inpatient and outpatient cardiac-related services	Ensure that high quality medical and surgical cardiac services are available to our patients	BMA & BHE Administration
5. Hypertension	Make persons aware of pre-hypertension and hypertension so they can better care for themselves	Provide blood pressure screenings at all health fairs	BHE Community Relations
		Have BMA primary care physicians counsel patients about high blood pressure, its ramifications on their health, and the necessity to follow physician orders	BMA Physicians & Extenders
6. Cancer	Ensure sufficient resources are available to care for oncology patients	Develop a Cancer Center to incorporate cancer services in a central location.	BHE Administration
	Provide education and screening services to diagnose cancer early and to assist those with cancer lead higher quality lives	Continue supporting the Cancer Resource Center; Implement Cancer Survivorship Clinic.	
		Provide free screening events for certain types of cancer	
		Publish monthly e-publication, Be Cancer Free	BHE Community Relations
7. Diabetes	Help improve the quality of life for persons with diabetes	Provide comprehensive wound care program to include inpatient and outpatient services and state of the art therapies.	BHE Wound Care Center; BHE Wound/Ostomy Nurses
		Publish monthly e-publication, Diabetes Management Notebook	BHE Community Relations
	Help reduce the number of persons who become diabetic	Continue NEED program (Nutrition, Exercise and Education to Deter Diabetes) to delay or prevent the onset of Type 2 diabetes	Baptist Hospital East/Milestone Wellness Center

8. Obesity	Provide services and education to reduce obesity	Continue providing bariatric services	
		Continue designation as an American Society for Metabolic and Bariatric Surgery (ASMBS) Bariatric Surgery Center of Excellence®	BHE Bariatric Program
		Provide healthy recipes on the hospital's Web site	BHE Community Relations
		Publish weekly e-publications: On Fitness and Exercise, Healthy Helpings (Recipes), and Healthy Kids, Happy Kids	BHE Community Relations
9. Smoking	Create incentives to reduce smoking in the service area	Provide smoking cessation classes	BHE Education
		Advocate for stronger regulations limiting smoking & raising cigarette taxes in Kentucky	BHE Administration

* Measures will be established early in FY 2013 in conjunction with the affected areas

Baptist Hospital East understands that it alone cannot affect each of these issues in a significant way. Moving the needle on any of these health concerns will take a coordinated and intensive effort by multiple parties. Working with the local health departments and other hospitals in the service area will have to continue to adequately meet the healthcare needs of the population. Additionally, the people who live and work in the service area must be partners in their own health before lasting change can take place.

Communications Plan

The IRS guidelines for Community Health Needs Assessment call for making the results of the process widely available. To meet this requirement, BHE will publish this document on its Web site and make hard copies available to the public upon request. These results will be incorporated into Baptist Healthcare System's annual IRS tax form 990 submission.

Conclusions

Baptist Hospital East will continue to use this Community Health Needs Assessment and Strategic Implementation Plan to allocate resources to improve the health of its service area. This is in keeping with its mission and is in its best interest because improving population health will reduce healthcare costs.

One major outcome of this process is that BHE is working more closely with local government agencies to determine what the health needs of the community are and how the groups can work together to improve them. Representatives of Baptist Hospital East and Baptist Hospital Northeast are working directly with Louisville Metro Public Health and Wellness, the Oldham County Public Health Department, and the North Central District Health Department to help them assess their respective counties' health status and to coordinate with other health entities (such as other hospitals) to determine the best allocation of scarce resources.

Appendix A – LMPHW Public Survey

LOUISVILLE METRO
PUBLIC HEALTH & WELLNESS

2012 COMMUNITY HEALTH NEEDS ASSESSMENT
GENERAL POPULATION SURVEY

The purpose of this survey is to collect information regarding the health care needs of our community. All information is confidential and will be used to assist the health department to make program decisions and identify health priorities.

Instructions: For each question below, please circle the answer that you feel is most applicable to you and/or your family.

A. DEMOGRAPHICS

What is your Zip code? _____

1. What is your gender?
a) Male
b) Female
c) Other/Transgender

2. What is your race?

a) White
b) Black/African American
c) Asian
d) Native Hawaiian/Other Pacific Islander

e) American Indian/Alaska Native
f) Other
g) Two or more races

3. Are you Hispanic?
a) Yes
b) No

4. What language do you speak at home?

a) English
b) Spanish
c) German
d) French
e) Vietnamese

f) Korean
g) Chinese
h) Amharic
i) Maay Maay
j) Other

5. What is your age group?

a)   18-24 years
b)   25-34 years
c)   35-44 years
d)   45-54 years

e)   55-64 years
f)   More than 65 years

B. ACCESS TO HEALTH CARE
1. Have you seen a primary care provider in the past 12 months?
a)   Yes
b)   No

2. Have you used the emergency room in the past 12 months for yourself or another adult in your household?
a)   1 to 2 times
b)   3 to 5 times
c)   6 or more times
d)   None
e)   I don't know

3. Have you used the emergency room in the past 12 months for a child under your care?
a)   1 to 2 times
b)   3 to 5 times
c)   6 or more times
d)   None
e)   I don't know
f)   Not applicable

4. The last time you had to use the emergency room, what was the reason?
a)   Non-emergency issue (rash, prescription refill, etc.)
b)   Urgent issue (cut, injury to joint, fever, etc.)
c)   Emergency (difficulty breathing, chest pain, seizures)
d)   Not applicable

5. Where do you go when you can't see your regular healthcare provider?
a)   Urgent or Immediate Care Center
b)   Clinic in a grocery store or drug store
c)   Hospital Emergency Room
d)   Over the Counter/Pharmacist
e)   Folk Remedy
f)   Helpline
g)   Health Department
h)   See a Chiropractor or alternative source of care
i)   Rely upon family member
j)   Nothing

6. When you need to travel for health services, how do you get there?
a)   TARC
b)   Personal Vehicle (car, motorcycle, bike)
c)   Walking
d)   Car Pool/Taxi/Share Ride
e)   Other

7. Using the scale below, please check the box for each issue that you think is a big barrier(s) to health care in Louisville Metro/Jefferson County.

a) Strongly Agree	b) Agree	c) Neither Agree or Disagree	d) Disagree	e) Strongly Disagree	f) No Opinion

1.   Doctor's Office Hours
2.   Transportation
3.   Knowing Where to Go
          in a Healthcare Facility
4.   Cost or Expenses
5.   Discrimination/Bias
6.   Health Knowledge
7.   Health Beliefs
8.   Insurance Issues
9.   Stigma
10.   Culture and Language
11.   Medicaid Rules
12.   Fear of Deportation

8. When I need health information, most often I rely upon the following source:
a)   Family and Friends
b)   Media (i.e., TV, radio, newspaper)
c)   Internet
d)   Health Department
e)   Hospital Staff
f)   Doctor or Personal Physician
g)   Nurse, Nurse Practitioner, Physician Assistant
h)   Other

9. Do you have access to preventive health services (i.e., vaccination/shots, family planning, mammography or any other screenings, etc.)?
a)   Yes
b)   No
c)   I don't know

C. PERCEPTION OF QUALITY OF HEALTH CARE

10. When you visit a health care facility for services do you feel you have enough information to know what to expect?
a)   Yes
b)   No
c)   Not applicable
d)   I don't know

11. The last time you came home from a healthcare facility, did you feel that discharge instructions were clear enough for you and your family to help you recover?
a)   Yes
b)   No
c)   Not applicable
d)   I don't know

12. Do you feel that health providers provide you with the education and resources you may need?
a)   Yes
b)   No
c)   Not applicable
d)   I don't know

13. How often do you feel that when you have a medical appointment (i.e. diagnostic test, medical exam, doctor's visit) you are seen in a timely manner during your visit?
a)   Always
b)   Usually
c)   Sometimes
d)   Rarely
e)   Never
f)   No Opinion

D. COMMUNITY HEALTH NEEDS

14.   What are the biggest health problems in your neighborhood?

Addiction:
a)   Smoking/Tobacco Use
b)   Drug Abuse
c)   Alcoholism
d)   a and b
e)   b and c
f)   a and c
g)   All of the above
h)   None
i)   No opinion/I don't know

Mental Illness:
a)   Anxiety
b)   Depression
c)   Bipolar Disorder
d)   a and b
e)   b and c
f)   a and c
g)   All of the above
h)   None
i)   No opinion/I don't know

Respiratory Illness:
a)   Asthma
b)   COPD (Chronic Obstructive Pulmonary Disease)
c)   Emphysema
d)   a and b
e)   b and c
f)   a and c
g)   All of the above
h)   None
i)   No opinion/I don't know

Cancer Types:
a)   Lung
b)   Breast
c)   Prostate
d)   a and b
e)   b and c
f)   a and c
g)   All of the above
h)   Other type of cancer
i)   None
j)   No opinion/I don't know

Other Chronic Diseases:
a)   Diabetes/High Blood Sugar
b)   Heart Disease (High Blood Pressure, Heart Attack)
c)   Stroke
d)   a and b
e)   b and c
f)   a and c
g)   All of the above
h)   None
i)   No opinion/I don't know

Emerging Issues:
a)   Obesity
b)   HIV/AIDS
c)   All of the above
d)   Other
e)   None
f)   No opinion/I don't know

15. Do you feel the various health organizations in your community are meeting the health and wellness needs of your community?
a)   Yes
b)   No
c)   Not applicable
d)   I don't know

16. Do you think there are people in your community that need care but cannot get it?
a)   Yes
b)   No
c)   Not applicable
d)   I don't know

17. In your opinion, what is the best way to address the health needs of people in your community? Please choose one option.
a)   Availability of health screenings (i.e., cancer screenings)
b)   More places to exercise
c)   Access to fresh fruit and vegetables
d)   Quit smoking classes
e)   Diabetes management classes
f)   More access to primary care physicians
g)   More access to specialists
h)   Nutrition education
i)   Lower cost of health care and prescription drugs
j)   No opinion/I don't know

18. How can community/business leaders and heath care organizations work together to meet wellness goals? Please choose one option.
a)   Provide more education or prevention programs
b)   Provide more health care facilities or doctor/physician's offices
c)   Provide more doctors/physicians
d)   Easier access to health care services
e)   More funding for reduced cost or free services
f)   Provide health coach or navigators
g)   Advocate for better health policy
h)   No opinion/I don't know

19. Which group do you feel needs the most help with access to health care?
a)   Children and Teens
b)   Young Adults
c)   Immigrant and Refugees
d)   Minority Groups (i.e., African-American, Hispanic)
e)   Elderly
f)   Lesbian, Gay, Bisexual and Transgender (LGBT)
g)   Physically or Mentally Disabled
h)   Low-Income Families

20. In order to improve children's health in Louisville Metro/Jefferson County what do we need to do?
a)   Increase access to oral health services
b)   Increase opportunities for more exercise
c)   Increase access to fresh fruit and vegetables
d)   Increase availability of special health care needs
e)   Increase access to mental and emotional health services
f)   More school nurses or school-based health centers
g)   Increase access to immunization services
h)   Increase health insurance coverage
i)   No opinion/I don't know

21. What did we miss or not ask you about health related issues in our county?
WRITE ON COMMENT CARD

Thank you for your participation!

Appendix B – Oldham County Public Survey
Oldham County Community Health Survey

WE'RE ALL EARS!

Your opinion is important! If you are a resident of Oldham County and at least 18 years old, please take a few short minutes to complete this 20 question survey. Enter your phone number at the end of the survey for a chance to win one of several prizes, including a Kindle, Family of 4 Summer Pool Pass to the John Black Aquatic Center, an individual 3 month pass to the Oldham County YMCA, and many more.

The purpose of this survey is to get your opinions about community health issues in Oldham County. The Coalition for a Healthy Oldham County will use the results of this survey and other information to identify the most pressing problems which can be addressed through community action. Remember… your opinion is important! Thank you and if you have any questions, please contact us (see contact information on back).

1. In the following list, what do you think are **the three most important factors for a "Healthy Oldham County?"**
    (Those factors which most improve the quality of life in a community.)

Check up to three (label: 1, 2, 3):

___ Good place to raise children	___ Excellent race/ethnic relations
___ Low crime / safe neighborhoods	___ Good jobs and healthy economy
___ Low level of child abuse	___ Strong family life
___ Good schools	___ Healthy behaviors and lifestyles
___ Access to health care (e.g., family doctor)	___ Low adult death and disease rates
___ Parks and recreation	___ Low infant deaths
___ Clean environment	___ Religious or spiritual values
___ Affordable housing	___ Emergency preparedness
___ Arts and cultural events	___ Other_____

2. In the following list, what do you think are **the three most important "health problems"** in Oldham County?
    (Those problems which have the greatest impact on overall community health.)

Check up to three (label: 1, 2, 3):

___ Aging problems (e.g., arthritis, hearing/vision loss, etc.)	___ Heart disease and stroke	___ Obesity
___ Alcohol/Drugs	___ High blood pressure	___ Poor Diet
___ Cancers	___ HIV / AIDS	___ Rape / sexual assault
___ Child abuse / neglect	___ Homicide	___ Respiratory / lung disease
___ Dental problems	___ Infant Death	___ Sexually Transmitted Diseases (STDs)
___ Diabetes	___ Infectious Diseases (e.g., hepatitis, TB, etc.)	___ Suicide
___ Domestic Violence	___ Mental health problems	___ Teenage pregnancy
___ Firearm-related injuries	___ Motor vehicle crash injuries	___ Terrorist activities
		___ Other _____

3. In the following list, what do you think are **the three most important "risky behaviors"** in Oldham County?
(Those behaviors which have the greatest impact on overall community health.)

Check up to three (label: 1, 2, 3):

___ Alcohol abuse	___ Racism
___ Being overweight	___ Tobacco use
___ Dropping out of school	___ Not using birth control
___ Drug abuse	___ Not using seat belts / child safety seats
___ Lack of exercise	___ Unsafe sex
___ Lack of maternity care	___ Unsecured firearms
___ Poor eating habits	___ Other_____
___ Not getting "shots" to prevent disease	

4. In the following list, what do you think are **the three most serious "safety problems"** in Oldham County?

Check up to three (label: 1, 2, 3):

___ Unsafe Driving	___ Manufacturing of methamphetamines
___ Alcohol and Drug Use	___ Growing Marijuana
___ Racism and intolerance	___ School Violence (including bullying)
___ Not using seat belts and safety seats, helmets	___ Child abuse and neglect
___ Unsafe/unprotected sex	___ Domestic violence
___ Unsafe roads/sidewalk conditions	___ Gang-related activity
___ Access to firearms by children	___ Other_____

5. How would you rate the overall health of Oldham County?

___ Very unhealthy   ___ Unhealthy   ___ Somewhat healthy   ___ Healthy   ___ Very healthy

6. How would you rate your own personal health?

___ Very unhealthy   ___ Unhealthy   ___ Somewhat healthy   ___ Healthy   ___ Very healthy

7. Where do you seek health care most often?

Check up to two (label: 1, 2):

___ Primary Care Provider	___ Chiropractor
___ Specialist	___ Hope Health Clinic
___ Urgent Care	___ Oldham County Health Department
___ Drug/Grocery Store Clinic	___ Other_____
___ Emergency Room	

8. If you seek health care **outside** of Oldham County, circle **one** answer that **best** matches why:
   a. My doctor of choice is in another city.
   b. No providers for services I need.
   c. My insurance only covers doctors in another area.
   d. No appropriate doctors accept Medicare/Medicaid.
   e. Convenience
   f. Other_____

9. How do you pay for your health care? (check all that apply)
   ___ No insurance
   ___ Health insurance (e.g., private insurance, Humana, Anthem, etc.)
   ___ Medicaid (Passport)
   ___ Medicare or Medicare Advantage
   ___ Veterans' Administration
   ___ Don't go to a Doctor because I can't pay
   ___ Other _____

10. When was your last preventative health exam?
   ___ In the last year
   ___ In the last 2-5 years
   ___ Over 5 years ago

11. When was your last dental checkup?
   ___ In the last year
   ___ In the last 2-5 years
   ___ Over 5 years ago

12. Approximately how many hours per month do you volunteer your time to community service? (e.g., schools, voluntary organizations, churches, hospitals, etc.)

___ None   ___ 1 – 5 hours   ___ 6 – 10 hours   ___ Over 10 hours

Please answer questions #13-20 so we can see how different types of people feel about local health issues.

13. Zip code where you live: _____

14. Age: ___ 18 - 25
           ___ 26 - 39
           ___ 40 - 54
           ___ 55 - 64
           ___ 65 or over

15. Sex:___ Male___ Female

16. Ethnic group you most identify with:
    ___ African American / Black
    ___ Asian / Pacific Islander
    ___ Hispanic / Latino
    ___ Native American
    ___ White / Caucasian
    ___ Other _____

17. Marital Status:
    ___ Married
    ___ Not married

18. Education
    ___ Less than high school
    ___ High school diploma or GED
    ___ College degree or higher
    ___ Other_____

19. Household income
    ___ Less than $20,000
    ___ $20,000 to $39,999
    ___ $40,000 to $59,999
    ___ $60,000 to $79,999
    ___ Over $80,000

20. Where / how you got this survey: (check one)
    ___ Church
    ___ Community Meeting
    ___ Grocery Store / Shopping Mall
    ___ Survey Monkey
    ___ Newspaper
    ___ Bank
    ___ Doctor's office
    ___ Library
    ___ Personal Contact
    ___ Workplace
    ___ Other _____

Please write your phone number here for a chance to win several different prizes:
_____

Please return completed surveys to the address below or go online to complete at:
https://www.surveymonkey.com/s/Oldham_County_Community_Health_Survey_2012 by April 5, 2012. If you would like more information about this community project, please contact us at the number below:

Anna Young-Hobbs
Oldham County Health Department
1786 Commerce Parkway
LaGrange, KY 40031
502-222-3516 x 154

Thank you very much for your response!

Appendix C – Data Sources

Health Departments

Louisville Metro Public Health & Wellness
http://www.louisvilleky.gov/health/

Bullitt County Public Health Department
http://www.bullittcountyhealthdept.com/

Oldham County Public Health Department
http://oldhamcountyhealthdepartment.org/

North Central District Health Department (Shelby and Spencer Counties)
http://www.ncdhd.com/

Kentucky Department of Public Health
http://chfs.ky.gov/dph/

National Sources

Robert Wood Johnson Foundation County Health Ranking and Roadmap
http://www.countyhealthrankings.org

Centers for Disease Control and Prevention
http://www.cdc.gov/

Rural Assistance Center
http://www.raconline.org/states/kentucky.php

U.S. Department of Health and Human Services – *Healthy People 2020*
http://healthypeople.gov/2020/

U.S. Department of Health and Human Services – Community Health Status Indicators
http://www.communityhealth.hhs.gov/homepage.aspx

State Sources

CEDIK – Community & Economic Development Initiative of Kentucky
http://www2.ca.uky.edu/CEDIK/CountyDataProfiles

Foundation for a Healthy Kentucky's Kentucky Health Facts
http://www.kentuckyhealthfacts.org/

Kentucky Department of Public Health's Center for Performance Management
http://chfs.ky.gov/dph/CenterforPerformanceManagement.htm

Kentucky Public Health Association
http://www.kpha-ky.org/

Kentucky Hospital Association
http://www.kyha.com/

Kentucky Office of the Inspector General
http://chfs.ky.gov/os/oig/

Kentucky State Data Center
http://ksdc.louisville.edu/

LMPHW's Policy Planning and Evaluation Services
http://www.louisvilleky.gov/Health/policyandplanning.htm

Appendix D – BHE FY 2011 Community Benefit Report Summary

Baptist Hospital East

Community Benefits Report

Fiscal Year 2011 Highlights

<u>Summary</u>
Baptist Hospital East provided over $17,838,395 million in community benefits during fiscal year 2011:

Provider Tax	$ 7,306,000
Charity Care (Inclusive of Net Medicaid Charity)	9,952,774
Direct Expenses for Participation in Community Service Projects	486,768
Estimated Value of Hospital Space for	
Community Education, Support Groups & Outside Organizations	30,860
In-kind Donations (estimated value)	48,750
Cash Donations	66,450
Cancer Resource Center Operations	4,980
Salary Expense for Participation in Community Service Projects	163,606
Total	$17,838,395

BHE provided over 131 health fairs with over 291,000 in attendance, 59 speaking engagements for over 2,500 people, and educational programs for over 7,700 people.