



Lakeland Regional Health®

2018 - 2021

**COMMUNITY HEALTH
NEEDS ASSESSMENT**



Strengthening
the Healthiest
Community
in Florida

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For more than 100 years
Lakeland Regional Health
has been dedicated to
improving the health
of Polk County and
surrounding communities
across Central Florida.

Impacting the health of our community is no small undertaking. We recognize the great potential our community has thanks to the many devoted community members and organizations who make improving the health of Polk County their life's work. We are inspired by the innovative initiatives and collaborations that are transforming the way in which we deliver care, making high quality care easier to access and ensuring that community wellness is a key measure of our organization's success.

Completion of this 2018-2021 Community Health Needs Assessment (CHNA) enables Lakeland Regional Health to take an in-depth look at the status of health in our community and focus on understanding barriers to care so that we may best meet the needs of our community.

Healthcare is an essential resource that we are privileged and honored to provide to the community we serve. We understand that this resource can be, at times, unattainable. As a result and upon review of our County's current health status, we have identified the following areas of need:

1. Reduce Obesity
2. Enhance Maternal and Infant Care
3. Increase Access to Quality, Coordinated Care
4. Expand Mental Healthcare Initiatives
5. Increase Cancer Screening and Prevention
6. Target Heart Disease and Stroke Screening and Prevention
7. Promote Injury Prevention

Lakeland Regional Health thanks the community residents and public health leaders who devoted their energy, passion and time in the preparation of this assessment. Through ongoing dialogue and a commitment to work together, we will be able to strengthen the healthiest community in Florida.

Sincerely,

Elaine C. Thompson, PhD, FACHE
President/CEO

The State of Our Health

The Community Health Needs Assessment provides an overview of the health status of those who live in Polk County. In 2010, the Patient Protection and Affordable Care Act (ACA) added requirements that not-for-profit hospitals must satisfy to maintain their tax-exempt status under section 501(c)(3) of the Internal Revenue Service Code. One such requirement added by ACA, Section 501(r) of the Code, requires not-for-profit hospitals to conduct a community health needs assessment (CHNA) at least once every three years. As part of the CHNA, each hospital is required to collect input from designated individuals in the community, including public health experts, as well as members, representatives or leaders of low income, minority and medically underserved populations and individuals with chronic conditions.

Lakeland Regional Health has conducted assessments in the past to identify community needs and resources in an effort to guide our community health initiatives. With the information provided in this assessment, health system leaders and community partners are able to develop plans that address health priorities and further build capacity of existing programs, resources and partnerships, ensuring that resources are directed toward activities and initiatives that address important community health needs. The CHNA process undertaken and described in this report was conducted in compliance with the federal requirements established by the Patient Protection and Affordable Care Act.



About Lakeland Regional Health

Lakeland Regional Health offers a comprehensive array of inpatient and outpatient diagnostic and treatment services at its Medical Center, Hollis Cancer Center and ambulatory care locations.

LRH's use of technology is redefining medicine, advancing safe and quality patient care, and promoting health and wellness. Lakeland Regional Health has been named a Most Wired hospital four times, twice earning Most Wired Advanced status, from the American Hospital Association's Health Forum. This designation recognizes dedication to creating an exceptional infrastructure and advanced clinical processes guided by technology.

Lakeland Regional Health's **Hollis Cancer Center** opened in 2003. In 2016, Lakeland Regional Health was named one of 101 Hospitals and Health Systems with Great Oncology Programs by Becker's Hospital Review. Its cancer program is accredited with commendation by the American College of Surgeons' Commission on Cancer, and its Breast Cancer Program is accredited through the National Accreditation Program for Breast Centers.

The **Lakeland Regional Health Physician Group** provides primary care, urgent care and practice in over 20 specialties at 14 convenient locations. All primary care locations are recognized by the National Committee for Quality Assurance's Patient-Centered Medical Home Program.

Lakeland Regional Health is an award winning workplace, ranked on Becker's Hospital Review's lists of "150 Great Places to Work in Healthcare" in 2017, 2016 and 2015. In addition, Forbes and Gallup have each twice recognized LRH's outstanding workplace.

Lakeland Regional Health Medical Center is the largest single component of Lakeland Regional Health. The 849-bed hospital is the fifth largest hospital in Florida. With more than 40,000 admissions and over 217,000 Emergency Department visits in 2016, the Medical Center encompasses:

- The nation's busiest single-site Emergency Department, garnering international and national recognition, and Polk County's only Pediatric Emergency Department
- Three state-of-the-art hybrid operating rooms, the only such facilities in the County
- Comprehensive Trauma Center with physician subspecialists
- The only Primary Stroke Center in the area with advanced technology and accreditation to treat strokes beyond three hours
- Neurosurgery services specialized in diagnosis and treatment of brain, spinal and neck injuries and illness
- Nationally accredited Chest Pain Center and Echocardiography Lab
- The **Bannasch Institute for Advanced Rehabilitation Medicine** providing leading-edge, inpatient medical physical rehabilitation services to maximize clinical outcomes for those with conditions such as stroke, brain injury, spinal cord injury, major multiple traumas and neurological issues
- An advanced Level II Neonatal Intensive Care Unit
- In 2018, the eight story, state-of-the-art **Carol Jenkins Barnett Pavilion for Women and Children** will open on the south side of the Medical Center Campus. Services offered will include a dedicated Pediatric Emergency Department, surgical suites, private suites for labor and delivery, Polk County's only Level III Neonatal Intensive Care Unit, units dedicated to pediatric and women's care.

Definition of Community Served

Lakeland Regional Health’s primary, secondary and tertiary market extends throughout Polk County and to a lesser degree into the surrounding counties (Highlands, Hardee, Hillsborough, and Pasco). The majority of patients served live in Polk County. Therefore, for the purposes of this report, Lakeland Regional Health defines its service area as Polk County.

GEOGRAPHIC LOCATION

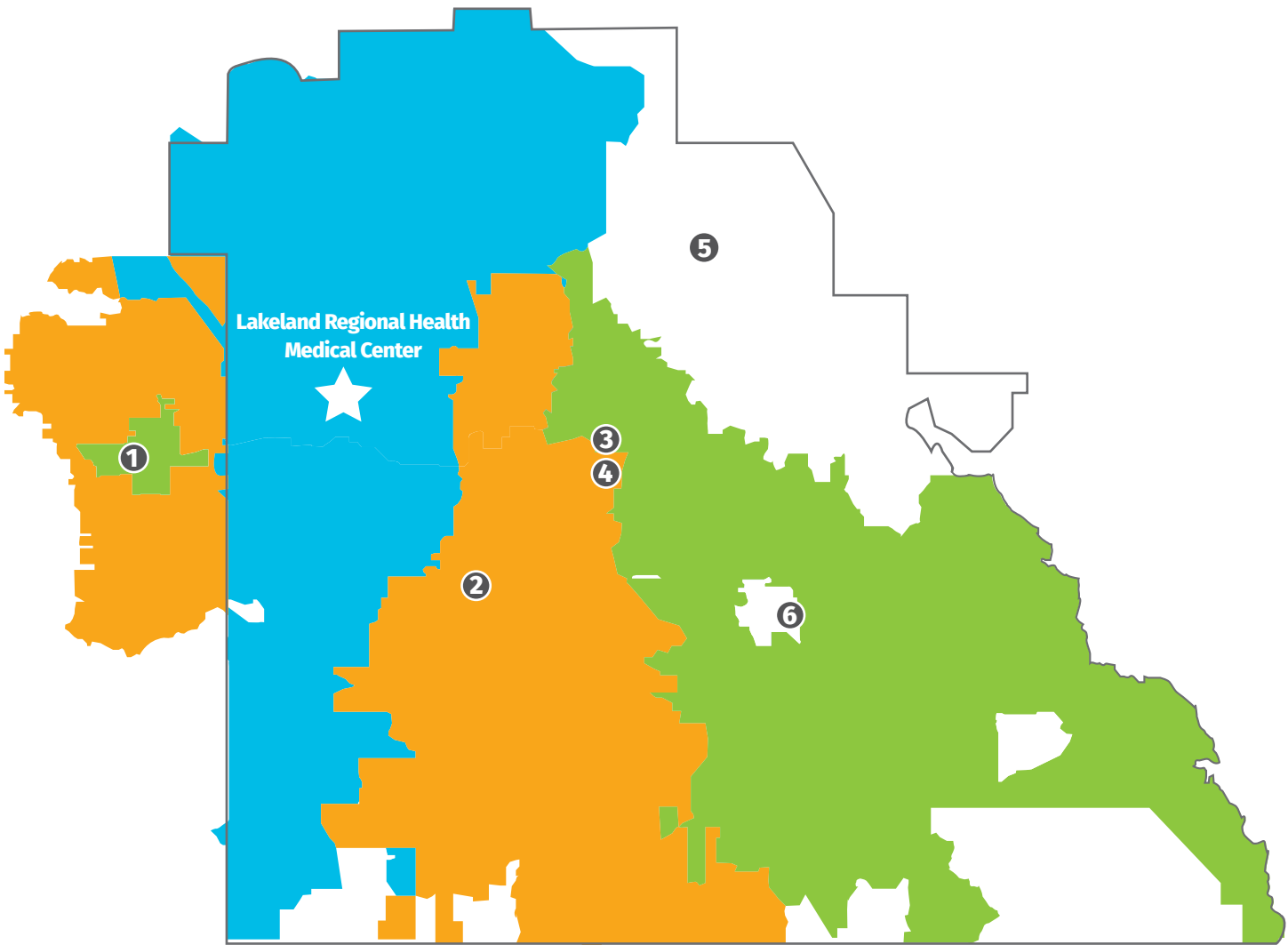
Lakeland Regional Health is located in Florida’s Polk County, in the City of Lakeland. Polk County is geographically larger than the state of Rhode Island and equal in size to Delaware. The total area of the County is approximately 2,010 square miles, which makes it the fourth largest county in Florida, exceeded only by Miami-Dade, Palm Beach and Collier counties.

POPULATION DEMOGRAPHICS

All demographic data contained in this report are from the US Census Bureau unless otherwise noted. The population estimate for Polk County in 2016 was 666,149. Polk County is home to 17 municipalities, with Lakeland as its largest city having a population of 102,507 residents (September 2016).

AREA HOSPITALS

- 1. South Florida Baptist Hospital
- 2. Bartow Regional Medical Center
- 3. Winter Haven Hospital
- 4. Winter Haven Women’s Hospital
- 5. Heart of Florida Regional Medical Center
- 6. Lake Wales Medical Center



SERVICE AREA

- Primary Service Area
- Secondary Service Area
- Tertiary Service Area

Definition of Community Served



POLK COUNTY HAS THE FOLLOWING RESIDENT PROFILE:

AGE AND GENDER

The median age in Polk County is 40.3, which is slightly below the median age of Florida, 40.7 years.

Women comprise 51.0% of the population of Polk County. There are nearly 114,422 women of childbearing age (generally ages 15-44).

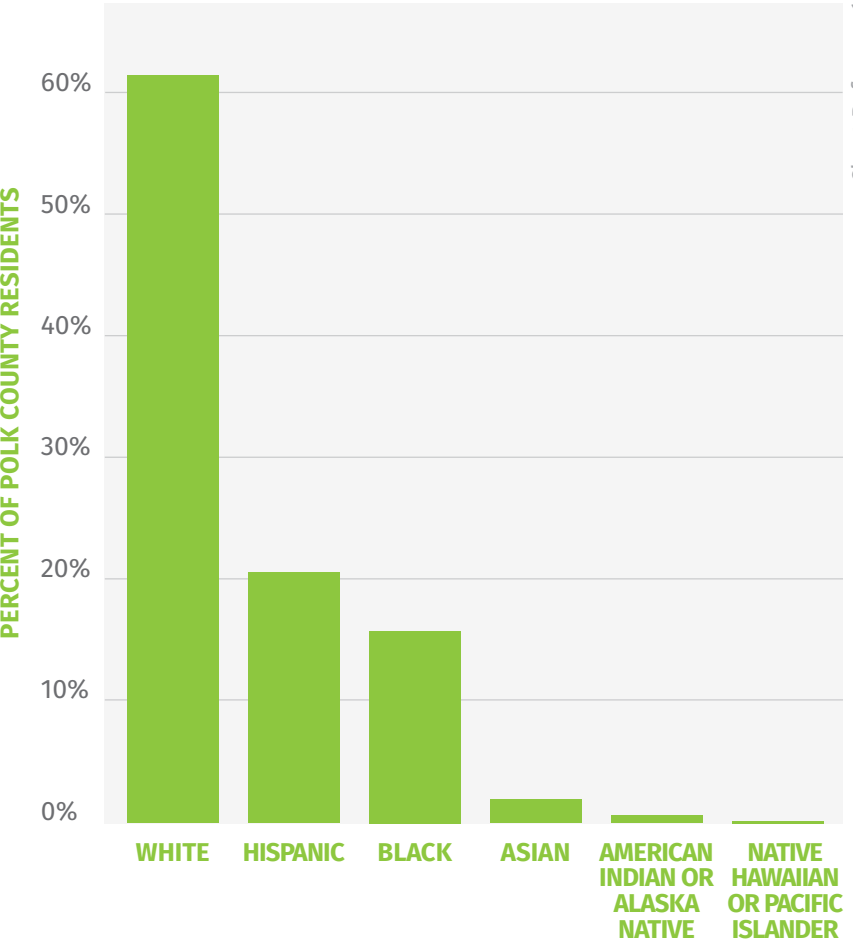
Senior adults (ages 65 and above) represent a considerable portion of the community and also present distinct healthcare needs.

In Polk County, seniors comprise 19.7% of the population. Polk County also has a proportionately large percentage of members of the senior community who are considered “snowbirds,” visiting from October – April every year. This residency pattern seasonally increases the population in healthcare facilities across the County.

Children under 5 years of age comprise 5.8% of the population, while children 6-18 comprise 22.7% of the population. In addition, 28.7% of children live below the poverty level in Polk County.

RACE AND ETHNICITY

Among Polk County residents, 61.3% are white, 20.5% are Hispanic or Latino and 15.7% are black. Asian residents comprise 1.9% of the population, American Indian/Alaskan Natives comprise 0.6% and Native Hawaiian and other Pacific Islanders comprise 0.1%.



Language proficiency can impact everything from an individual’s educational and employment success to the ability to communicate with healthcare providers. In Polk County, 9.9%² of the population is foreign born, with 19.7% of the population using a language other than English in the home.

¹US Census Bureau. (2015). Quick Facts. Retrieved from <https://www.census.gov/quickfacts/table/PST045216/12105,12>

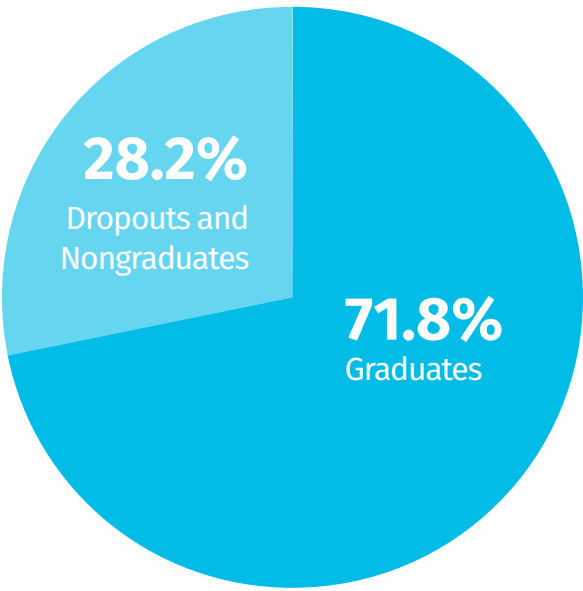
²Florida Office of Economic and Demographic Research. (2016). Retrieved from <http://edr.state.fl.us/content/area-profiles/county/polk.pdf>

Definition of Community Served

SOCIOECONOMIC FACTORS: EDUCATION

Educational achievement is an important predictor of health outcomes. Shown below are the levels of education attained in Polk County and the State of Florida for adults 25 years of age and older. In Polk County, 16.5% of this population has less than a high school diploma, while only 18.9% of the population holds a Bachelor's degree or higher.^{3,4}

POLK COUNTY GRADUATION RATE
2015-2016



Note: Nongraduates include special diplomas, certificates of completion, GED recipients and students who are still enrolled.

2015-16 Florida Department of Education (FDOE) cohort graduation data as of 12/12/16

The Polk County School Board is the eighth largest educational district in Florida and thirtieth largest in the United States.

Polk County has 163 school sites and centers including 66 elementary, 4 elementary/middle, 7 elementary/middle/high, 18 middle, 3 middle/high, 18 high, 2 technical career centers, 2 adult, 11 alternative education, 24 charters, 5 Department of Juvenile Justice sites and 3 off-campus Head Start sites. More than 97,900 students are enrolled within this diverse student body. Per the Polk County School Board, the District is the largest employer in Polk County with over 13,000 employees.

Polk County is home to secondary educational institutions including Polk State College, Florida Southern College, Florida Polytechnic University, Southeastern University, Webster University, Everest University, Keiser University, Warner University, Webber International University, Barry University, Fortis Institute and Traviss Technical College.

Research shows that earning a post-secondary degree can lead to better opportunities and advantages not only for individual students, but for their families and their communities. Additionally, having a college education can lead to an overall healthier lifestyle, reducing healthcare costs.⁵

³US Census Bureau. (2015). Quick Facts. Retrieved from <https://www.census.gov/quickfacts/table/PST045216/12105,12>

⁴Community Commons. (2015). Health Indicators Report. Retrieved from <https://assessment.communitycommons.org/CHNA/report?page=2&id=764&reporttype=libraryCHNA>

⁵College Board. (2013). Education Pays. Retrieved from <https://trends.collegeboard.org/sites/default/files/education-pays-2013-full-report.pdf>



Definition of Community Served

SOCIOECONOMIC FACTORS: EMPLOYMENT

Polk County is home to a broad range of industries. Formerly, Polk had a largely agriculture focused economy, but it has since diversified to include industries such as government, education, health services, professional and business services, retail, leisure and hospitality, manufacturing and financial activities.

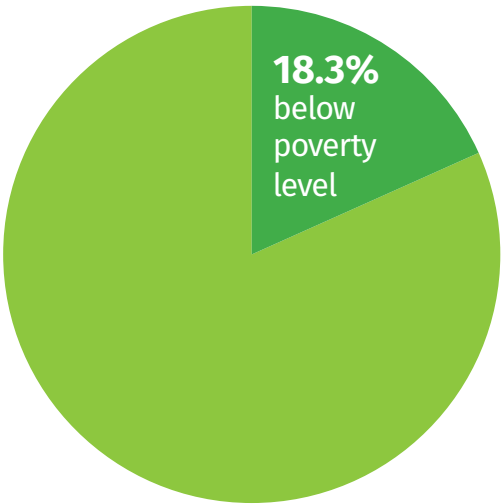
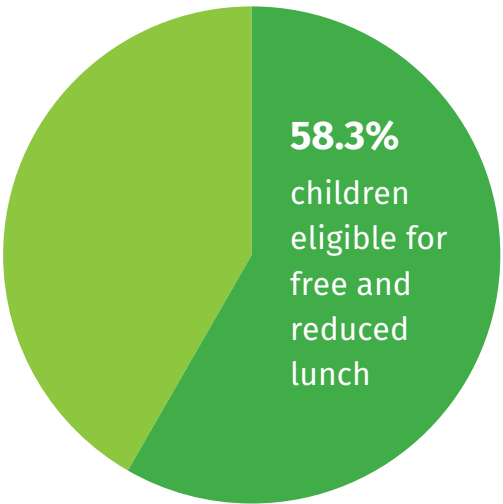
Polk County’s major employers include the Polk County School Board, Publix Super Markets, Inc., Walmart, Lakeland Regional Health, the City of Lakeland, GEICO, WellDyne, Mosaic, Amazon and SaddleCreek Logistics.

As of June 2017, the unemployment rate in Polk County, per the US Department of Labor, is 4.9%. In 2010, the rate was closer to 12.0%, showing marked improvement over the last several years. The unemployment rate in Florida is lower at 4.1%.



SOCIOECONOMIC FACTORS: INCOME AND POVERTY

The median household income in Polk County is \$43,162. 12% of families live below the poverty level, with 58.3% of children eligible for free and reduced lunch. 18.3% of all people in Polk County live below the poverty level, including single individuals and senior adults on fixed incomes.



The median household income in Polk County is **\$43,162.**

What We Found

A woman with dark curly hair, wearing a white lab coat, is looking through a black telescope. She is in a laboratory setting, with a man in a white lab coat visible in the background. The image is partially covered by a blue and green geometric overlay on the right side.

We recognize the great potential our community has thanks to the many devoted community members and organizations who make improving the health of Polk County their life's work.

Facts and Findings

KEY ISSUES AFFECTING THE HEALTH AND WELL-BEING OF POLK COUNTY RESIDENTS:

\$43,162

median household income

71.5%

considered overweight or obese

51%

of the population are women

Barriers to access include:

health literacy, transportation and lack of insurance

1,950:1

Ratio of Polk County residents to primary care physicians

18.3%

of people live below the poverty level

97,900

Students in grades K-12

15.4%

Residents under 65 without health insurance

Cancer and heart disease

are the leading causes of death

Process and Methods Used to Conduct the CHNA

THE PROCESS

The health of Polk County residents is influenced by many factors. In order to gain a broad perspective of these factors, the potential barriers they may create and to determine the priorities for the 2018-2021 Community Health Needs Assessment, Lakeland Regional Health utilized a process that included the review of existing secondary data and collection of primary data through a community dialogue session. During the community dialogue session, we looked to our community partners to represent their respective communities and provide feedback on how the health system could most effectively address specific areas of need.

DATA REVIEW

The first phase of the Community Health Needs Assessment process began with gathering existing health-related data. This assessment considered multiple data sources, including secondary data (regarding demographics, health status indicators, and measures of health care access), feedback from previous assessments and assessments prepared by other organizations in recent years, including the Florida Department of Health in Polk County's most recent assessment.

This assessment was performed by reviewing data from sources including:

1. United States Census Bureau
2. Centers for Disease Control and Prevention
3. Florida Health Assessment Resource Tool Set (CHARTS)
4. Florida Behavioral Risk Factor Surveillance System (BRFSS)
5. Community Commons
6. Robert Wood Johnson Foundation County Health Rankings



Process and Methods Used to Conduct the CHNA

COMMUNITY DIALOGUE

Approximately 45 stakeholders representing broad interests of the community served by Lakeland Regional Health attended the May 2017 dialogue session to review current data trends and discuss relevant and widespread issues in Polk County as well as suggest ways the health system could address community disparities. Organizations represented at this meeting included:

- American Cancer Society
- CareerSource Polk
- Early Learning Coalition of Polk County
- Florida Department of Health Polk County
- Florida Southern College
- Healthy Start Coalition
- Heartland for Children
- InnerAct Alliance
- Lakeland Housing Authority
- New Life Outreach Ministry
- Parker Street Ministries
- Peace River Center
- Polk Health Care Plan
- Polk State College
- Polk Vision
- Talbot House
- United Way of Central Florida
- VISTE

Following the community dialogue session, the data review process involved the formal prioritization method known as the Prioritization Matrix, which included ranking health priorities based on the six primary criteria: alignment with the health system’s mission; existing programs; ability to impact within three years; financial resources required; human resources required and the availability of measurable outcomes to assess effectiveness of the intervention/plan.

In an effort to align community health improvement efforts and resources with our community partners, the following areas of need were selected:

1. Reduce Obesity
2. Enhance Maternal and Infant Care
3. Increase Access to Quality, Coordinated Care
4. Expand Mental Healthcare Initiatives
5. Increase Cancer Screening and Prevention
6. Target Heart Disease and Stroke Screening and Prevention
7. Promote Injury Prevention

Health education and literacy will be addressed throughout all priorities and strategies.

DATA LIMITATIONS AND INFORMATION GAPS

The data sources used in this analysis provide a thorough and detailed understanding of the current health status of our community. However, there are some limitations with this data, as is true with any available secondary data. Some gaps exist with comparative national data derived on schedules that lag behind state or local data. Additionally, data is not always collected on a yearly basis, meaning that some data is several years old.

Based on the experience of the expert stakeholders involved in our CHNA process, we are confident that the community health needs we have identified have a significant impact on vulnerable populations.

Public and Community Health Experts Consulted

The following individuals with specific knowledge of or expertise in public health and those consulted from regional, state/local health departments and other agencies with current data as well as other relevant information were actively engaged during the CHNA process through the community dialogue session and a series of individual interviews:

NAME	AGENCY REPRESENTED	TITLE	AREA OF EXPERTISE
Angela Padgett Ellison	InnerAct Alliance	Executive Director	Substance Abuse Prevention
Bill Gardam	Peace River Center Behavioral Health Services	Executive Director	Behavioral Health
Carrie Ann Hall	Florida Southern College	Director	Education
Charlene Edwards	Healthy Start Coalition	Executive Director	Women and Children’s Services
Cheryl Kelly	Early Learning Coalition of Polk County	Vice President of Programs	Education
Colleen Mangan	Florida Department of Health Polk County	Community Health Program Manager	Public Health
Cory Skeates	Lakeland Area Chamber of Commerce	President	Business
Donna Swygert	InnerAct Alliance	Coalition Coordinator	Substance Abuse Prevention
Dr. Eileen Holden	Polk State College	President	Education
Earl Haynes	Lakeland Housing Authority	Director of Resident Services	Low Income Housing
Jenna Levine	Florida Department of Health Polk County	Community Health Improvement Planner	Public Health
Dr. Joy Jackson	Florida Department of Health Polk County	Director	Public Health
Joy Johnson	Polk Health Care Plan	Director	Indigent Health Care Services
Judy Snow	Talbot House/Good Samaritan Free Clinic	Director	Housing and Workforce Services
Kim Long	Polk Vision	Executive Director	Visioning and County Strategic Planning
Kim Daugherty	Heartland for Children	Chief Community Relations Officer	Children’s Services
Larry Mitchell	New Life Outreach Ministry	Founder	Community Restoration, Reconciliation and Revitalization Services
Linda Comer	Florida Southern College	Dean and Professor School of Nursing and Health Sciences	Education

NAME	AGENCY REPRESENTED	TITLE	AREA OF EXPERTISE
Lisandra Sanchez-Crespo	Florida Department of Health Polk County	HIV/AIDS Program Coordinator	Public Health
Penny Borgia	United Way of Central Florida	Chief Impact Officer	Social Services
Rachel Boynton			
Sara Pomponio	Healthy Start Coalition of Hardee, Highlands & Polk Counties, Inc.	Youth Program Specialist	Women and Children’s Services
Stacy Campbell -Domineck	CareerSource Polk	Executive Director	Workforce Development
Stephanie McLean	American Cancer Society	Health Systems Manager, Hospitals	Cancer Prevention
Steve Bissonnette	Volunteers in Service to the Elderly	Executive Director	Senior Services
Teresa Lyle	Florida Southern College	Professor	Education
Teri Saunders	Heartland for Children	Chief Executive Officer	Children’s Services
Tim Mitchell	Parker Street Ministries	Executive Director	Community Restoration, Reconciliation and Revitalization Services



General Findings

RED denotes where Polk performance is worse than corresponding data for the region and state.

RED is used in the Polk-White demographic only when performance is worse than either Polk-Black or Polk-Hispanic and when performance is worse than Polk-Overall demographic.

RED is used in Polk minority demographics only when performance is worse than Polk-Overall demographic.

YELLOW denotes where cautionary interpretation should be applied due to potential low representation of

underserved populations as a result of limited access to healthcare.

* Data displayed is for comparative purposes to determine if our community deviates from other similarly measured populations. Certain national and regional data is not readily available to compare exactly with local measurements for a particular year, range or method.

** Sample size is too small to report. A red highlighted cell denotes that a disparity exists within the state.

***The metric, although not higher than Polk-Overall, still displays a clear disparity between race/ethnicity within the county.

^ Indicates the county rate is statistically significantly different from the statewide rate.

^^ To keep abreast of medical knowledge, the International Classification of Diseases (ICD) is revised periodically. Large increases or decreases in hospitalizations are typically indicative of such changes. Effective October 1, 2015, the ICD 9th Revision Clinical Modification (ICD-9-CM) transitioned to ICD 10th Revision Clinical Modification (ICD-10-CM). Hospitalization data before October 2015 use ICD-9-CM; starting in October 2015, hospitalization data use ICD-10-CM. Consequently increases or decreases starting in 2015 may not be due to changes in disease trends but due to changes in coding.

ECONOMY/DEMOGRAPHICS	US	FL	HILLSBOROUGH	POLK
2017 Unemployment Rate (June 2017) (Source: BLS)	4.4%	4.1% (seasonally adjusted)	4%	4.9%
2015 -2016 High School Graduation Rate (Source: FloridaCharts, Healthy People, FDOE)	82.0%	80.7%	79.1%	71.8%
2011-2015 Population Over 25 with Bachelor's Degree or higher (Source: US Census)	29.8%	27.3%	30.6%	18.9%
2015 Estimate Persons in Poverty (Source: US Census)	13.5%	15.7%	15.8%	17.3%
2011-2015 Children Below Poverty Level (in the past 12 months, under 18 years) (Source: ACS - US Census)	21.7%	24.1%	23.2%	28.7%

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	HILLSBOROUGH	POLK	FLORIDA WHITE	FLORIDA BLACK	FLORIDA HISPANIC	POLK WHITE	POLK BLACK	POLK HISPANIC
Cardiovascular										
2016 Age-Adjusted Major Cardiovascular Diseases Death Rate Per 100,000 (Source: FloridaCharts, NCHS Health)	218.6 (CDC, 2015)	209.8	222	238.2	202.6	245.2	159.1	231.3	306	122.2
2016 Age-Adjusted Stroke Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	37.6 (CDC, 2015)	39.7	35.3	47.8	37.4	53	34.3	46	65.1	25.6
2013 High Cholesterol Prevalence (Source: FloridaCharts, America Health Rankings)	38.4%	33.4%	33.2%	34.6%	39.0%	24.5%	27.5%	39.1%	34.6%	22.6%
2013 Adults who have ever been told they had Hypertension (Source: FloridaCharts, America Health Rankings)	30.8%	34.6%	36.3%	41.6%	38.4%	33.7%	28.3%	45.5%	42.2%	24.6%
2015 Age-Adjusted Hospitalizations from or with Coronary Heart Disease Rate Per 100,000 (Source: FloridaCharts)^^	* See Note	252.1	258.8	315.3	641.8	706.4	577.4	809.5	875.2	719.2
2015 Age-Adjusted Hospitalizations from Congestive Heart Failure Rate Per 100,000 (Source: FloridaCharts)^^	* See Note	99.1	237	117.5	81.8	188.8	99.6	100.8	216.5	97.1
Respiratory										
2016 Age Adjusted Chronic Lower Respiratory Disease Death Rate Per 100,000 (Source: FloridaCharts)	41.6 (CDC, 2015)	40.5	43.1	54.9	42.1	26	20.5	54.8	58.4	6.4
2016 Age Adjusted Asthma Death Rate Per 100,000 (Source: FloridaCharts)	* See Note	0.8	0.8	1.1	0.6	1.7	0.7	0.7	3.9	0.0
2016 Age Adjusted Hospitalizations from or with Asthma Single Year Rates (Source: FloridaCharts)	* See Note	840.3	1097.6	1261.8	678.4	1311.9	641.6	1109.8	1768.8	943.3

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	HILLSBOR- OUGH	POLK	FLORIDA WHITE	FLORIDA BLACK	FLORIDA HISPANIC	POLK WHITE	POLK BLACK	POLK HISPANIC
Cancer										
2016 Age Adjusted Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	158.5 (CDC, 2015)	155.4	165.3	163.7	154.4	151.7	106.3	162.5	181.2	80.5
2016 Age Adjusted Lung Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	42.1 (CDC, 2014)	38.6	40.3	44.6	39.8	27.5	20	45.4	35.8	11.9
2016 Age Adjusted Breast Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	20.6 (CDC, 2014)	19.8	19.4	23.6	18.6	24.4	13.3	23.4	21.7	13.4
2016 Age Adjusted Colorectal Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	14.3 (CDC, 2014)	14	16.7	12.3	13.4	17.4	11.3	11.8	17.9	10.4
2016 Age Adjusted Cervical Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	2.3 (CDC, 2014)	2.7	2.6	2.7	2.6	3.4	2.1	2.9	1.9	1.3
2016 Age Adjusted Prostate Cancer Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	19 (CDC, 2014)	17.4	20.2	14.6	16	32.3	15.2	12.4	45.9	7.5
2016 Age Adjusted Melanoma Death Rate Per 100,000 (Source: FloridaCharts)	2.6 (CDC, 2014)	2.3	2.1	3.1	2.6	0.3	0.6	3.5	0	0.7
Diabetes										
2016 Age Adjusted Diabetes Death Rate Per 100,000 (Source: FloridaCharts)	21.3 (CDC, 2015)	20.6	19.6	25.7	18.2	36.7	16.6	22.7	51	18
2013 Adults with diagnosed Diabetes (Source: FloridaCharts, CDC)	9.3% (2012)	11.2%	12.4%	16.1%	11.4%	12.3%	10.8%	18.8%	12.4%	8.9%
2016 Age Adjusted hospitalizations from or with diabetes Rate Per 100,000 (Source: FloridaCharts)	* See Note	2392.6	2843.2	3345.4	1992.5	4039.8	2089.4	2935.2	5409.4	2601.4

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	HILLSBOR- OUGH	POLK	FLORIDA WHITE	FLORIDA BLACK	FLORIDA HISPANIC	POLK WHITE	POLK BLACK	POLK HISPANIC
Prenatal and Perinatal Health										
2016 Infant deaths from 0-364 days from birth Per 1,000 Births (Source: FloridaCharts, Healthy People)	5.9 (CDC, 2015)	6.1	7.4^	7	4.3	11.6	5.4	3.7	19.5^	3.3
2016 Percentage of births with low birth weight <2500grams - Per 1,000 Live Births (Source: FloridaCharts, Healthy People)	8.1% (CDC, 2015)	8.7%	8.9%	8.2%	7.2%	13.8%	7.2%	6.9%	13.1%	6.7%
2016 Teen birth rate mothers 15-19 Birth Rate Per 1,000 Females (Source: FloridaCharts, Healthy People)	22.3 (CDC, 2015)	18.7	18.5	27.5^	16.2	28.5 (2015)	20.8 (2015)	24.7^	37.2 (2015)	31.2 (2015)
2016 Resident live births to mothers who smoked during pregnancy Percentage of total Births (Source: FloridaCharts)	* See Note	5.1%	3.0%	6.8%^	6.0%	3.1%	1.1%	7.8%^	3.4%	2.4%
Behavioral/Mental										
2016 Age-Adjusted deaths due to suicide Death Rate Per 100,000 (Source: FloridaCharts, Healthy People)	13.3 (CDC, 2015)	14.2	11.7	13	15.8	5	6.4	13.6	4.6	6.5
Injuries										
2016 Motor Vehicle Deaths Death Rate Per 100,000 (Source: FloridaCharts, CDC FastStats)	11.1 (2014)	15.4	16.9	24.1	15.3	15.3	11.5	23.9	23.3	19.3
2016 Violent Crimes-Aggravated Assault Rate Per 100,000 (Source: FloridaCharts, FBI)	229.6 (2013)	295.3	210.5	242	DATA NOT AVAILABLE BY RACE/ETHNICITY					
2016 Age-Adjusted Deaths Due to Unintentional Injuries Death Rate Per 100,000 (Source: FloridaCharts, CDC FastStats)	43.2 (CDC, 2015)	56.3	55.6	58.9	59.9	37.8	30.6	59.5	53.5	29.8
Infectious/Communicable Diseases										
2015 Age Adjusted Pneumonia/Influenza Death Rate Per 100,000 (Source: FloridaCharts, CDC NVSS)	15.2 (2010)	9.8	13.6	16.2	9.5	12.1	7.2	16.4	16.5	8.7
2016 AIDS Cases Rate Per 100,000 (Source: FloridaCharts, Healthy People)	13.0 (2010)	10.5	11.1	10.7	4.5	34	8.8	4.1	49.6^	5.5

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	HILLSBOR- OUGH	POLK	FLORIDA WHITE	FLORIDA BLACK	FLORIDA HISPANIC	POLK WHITE	POLK BLACK	POLK HISPANIC
Infectious/Communicable Diseases (Continued)										
2016 HIV Cases Rate Per 100,000 (Source: FloridaCharts, CDC)	19.1 (2011)	24.6	23.9	19.2	11.1	67	27.3	8.5	71	14.9
2015 Total Gonorrhea, Chlamydia, and infectious Syphilis Cases Rate Per 100,000 (Source: FloridaCharts)	* See Note	588.7	740.3^	630	DATA NOT AVAILABLE BY RACE/ETHNICITY					
Weight/Nutrition/Activity										
2013 Overweight and Obese Adults % of Adults with BMI >25.0 (Source: CDC, FloridaCharts)	70.7% (2013- 2014)	62.8%	67.4%	71.5%	60.9%	71.1%	64.9%	72.8%	57.6%	76.5%
2012 Middle School and High School Students who are obese (Source: FloridaCharts)	* See Note	11.5%	12%	14.5%	DATA NOT AVAILABLE BY RACE/ETHNICITY					
2012 Percent of middle school students with BMI at or above 95th percentile (Source: FloridaCharts)	* See Note	11.1%	11.4%	14.3%						
Substance Use										
2013 Adults who are current Cigarette Smokers (Source: FloridaCharts, Healthy People)	15.1% (CDC, 2015)	16.8%	18.2%	14.3%	18.6%	14.4%	13.9%	16.6%	14.7%	7.6%
2013 Adults who engage in heavy or binge drinking % of Adult Males having 5 or more drinks, or Females having 4 or more drinks on 1 occasion, 1 or more times in the past 30 days (Source: FloridaCharts, Healthy People)	27% (2014)	17.6%	15.3%	13.7%	17.6%	14.0%	19.6%	16.1%	3.7%	16.5%
Screening and Vaccination										
2013 Influenza Immunizations 65 years and older who received vaccine (Source: Healthy People, FloridaCharts)	63.4% (CDC, 2015- 2016)	54.6%	51.7%	44.4%	58.5%	34.3%	46.6%	48.0%	** See Note	** See Note
2013 Adults 65 years of age and older who have ever received a pneumococcal vaccination (Source: FloridaCharts)	No Longer Tracked	66.2%	68.7%	70.3%	71%	49.1%	47.4%	71.7%	** See Note	** See Note
2013 Women 40+ who had a clinical breast exam in the past year (Source: FloridaCharts)	* See Note	58.8%	50.9%	44.2%	58.6%	62.8%	56.6%	44.8%	** See Note	** See Note

					HEALTH DISPARITIES					
HEALTH OUTCOMES	US	FL	HILLSBOR- OUGH	POLK	FLORIDA WHITE	FLORIDA BLACK	FLORIDA HISPANIC	POLK WHITE	POLK BLACK	POLK HISPANIC
Screening and Vaccination (continued)										
2013 Women 18+ who have had a Pap Smear in the past year (Source: FloridaCharts)	* See Note	51.4%	47%	51.4%	49.3%	56.3%	53.5%	44.1%	** See Note	** See Note
2013 Adults 50+ who received a Sigmoidoscopy or Colonoscopy in the past 5 years (Source: FloridaCharts)	* See Note	55.3%	53.4%	59.4%	56.6%	57.1%	50.7%	57.2%	** See Note	** See Note
2010 Men Age 50+ who received a digital rectal exam in the past year (Source: FloridaCharts)	* See Note	48.5%	44.7%	50.4%	50.4%	41.9%	39.8%	47.3%	** See Note	** See Note
2010 Men Age 50+ who received a PSA test in the past 2 years (Source: FloridaCharts)	* See Note	72.6%	67.9%	69.5%	74.7%	67.0%	60.7%	68.7%	** See Note	** See Note
Health Systems/Access										
2013 Adults with any type of health care insurance coverage (Source: FloridaCharts, Healthy People)	83.3%	77.1%	80.9%	76.6%	85.5%	69.2%	64%	84.2%	68.6%	58.9%
2014 Primary Care Providers Rate Per 100,000 (Source: Community Commons)	87.8	79.8	92.23	51.37	NOT APPLICABLE					
FY 15-16 OB/GYN Rate Per 100,000 (Source: FloridaCharts)	* See Note	9.8	13.6	7.1						
2013 Adults who could not see a doctor at least once in the past year due to cost (Source: FloridaCharts)	* See Note	20.8%	17.3%	20.3%	14.7%	25.1%	30.9%	16.8%	24.2%	30.8%
2016 Access to Mental Health Providers Rate Per 100,000 (Source: Community Commons)	202.8	145.1	157.2	72.9	NOT APPLICABLE					
FY 15-16 Dentists Rate Per 100,000 (Source: AMR, FloridaCharts)	60.9 (2015)	55.3	60	25.7						
2007 Adults who could not see a dentist due to cost (Source: FloridaCharts)	* See Note	19.2%	18.5%	20.2%	15.7%	23.7%	28.3%	17%	26.7%	32.8%

Existing Available Healthcare Facilities and Resources

The following lists represent existing facilities and resources available to address the significant health needs identified in this report through charitable and low-to-no cost care. This list is not exhaustive, but rather it outlines those resources identified in the course of conducting this Community Health Needs Assessment.

ACUTE CARE HOSPITALS

PROVIDER	SERVICES	TARGETED POPULATIONS
Bartow Regional Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Heart of Florida Regional Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Lake Wales Medical Center	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Winter Haven Hospital	Emergency Services Inpatient Services Specialty Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing

PHYSICIAN CARE PROVIDERS

PROVIDER	SERVICES	TARGETED POPULATIONS
Florida Department of Health Clinics 7 Clinics	Primary Care Family Planning Specialty Services (HIV/TB) Obstetrics/GYN Dental Care	Uninsured-Sliding Scale Medicaid-Cost Sharing
Federally Qualified Health Centers 10 sites	Primary Care Obstetrics Dental Care	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Free Clinics 6 Clinics	Primary Care Screening Limited Specialty Care Care Coordination	Uninsured-Sliding Scale/ \$0 fees
Polk Healthcare Plan	Primary Care Inpatient Care Specialty Services	Uninsured-Cost Sharing
We Care Polk County (Volunteer physicians providing no cost services to uninsured)	Coordination of specialty care within in the community	Uninsured-Sliding Scale/ \$0 fees

BEHAVIORAL HEALTH SERVICES

PROVIDER	SERVICES	TARGETED POPULATIONS
Peace River Center	24 hour Crisis Intervention Short-Term Behavioral Resident Care Outpatient Behavioral Health Services Substance Abuse Treatment	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Tri-County Human Services	Substance Abuse Treatment Rehabilitation Services Residential Long-Term Treatment Services Target program for groups (HIV/AIDS)	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing
Winter Haven Hospital- Mental Health Services	Outpatient Mental Health Inpatient Psychiatric Services	Uninsured-Sliding Scale Medicaid-Cost Sharing Medicare-Cost Sharing



Barriers to Care

A critical component of the CHNA process is identifying barriers and disparities on the path to obtaining quality healthcare and living a healthier lifestyle.

The identification of barriers and disparities helps pinpoint strategies for addressing the prioritized health needs. Through the review of secondary data and the community dialogue session, the following barriers and disparities were identified as pertinent to Lakeland Regional Health’s service area:

SHORTAGE OF PROVIDERS

Community dialogue participants reported an overwhelming need for access to care, specifically mental health services. Long wait lists and the unavailability of appointments when community members need them the most continue to be a major barrier to maintaining wellness.

HEALTHCARE NAVIGATION AND LITERACY

The ability to understand health information as it relates to navigating the healthcare system and familiarity with preventative health screenings and care was also addressed by the group. Participants suggested that the lack of health literacy could be attributed to the community’s limited knowledge of local resources available and lack of an up-to-date single destination where information could be accessed regarding available community resources.

TRANSPORTATION

Throughout the community dialogue, a common discussion emerged in small group sessions related to the lack of access to public transportation. Individuals who do not have access to a vehicle face difficulties obtaining healthcare, education and employment opportunities or participating in community programs that promote health and well-being.

Priorities and Initiatives

We deliver the best outcomes and safest care by placing people at the heart of all we do. We improve lives every day by promoting wellness, education and discovery.

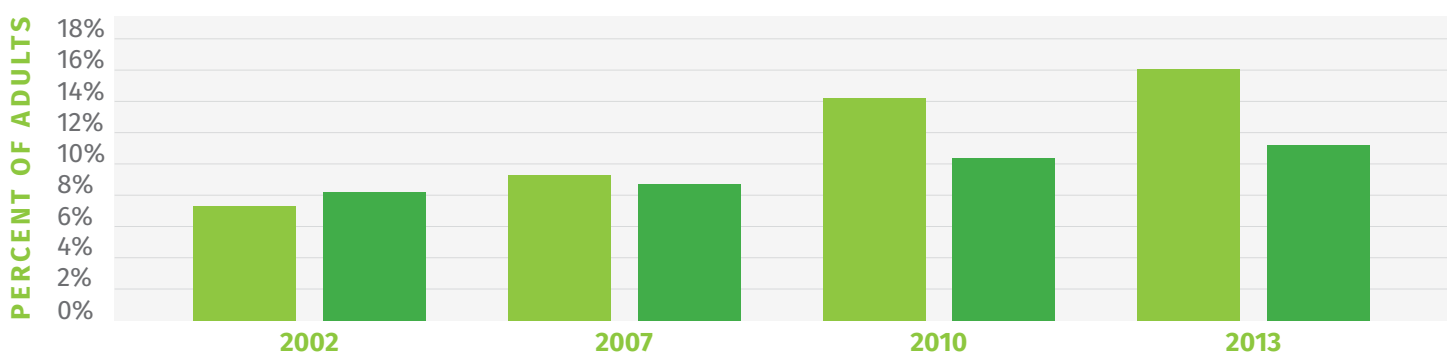
Obesity

Approximately 71.5% of Polk County’s population was considered overweight or obese.

As the data in the Community Health Needs Assessment indicates, obesity continues to be a concern among youth and adults in our community. Obesity is a contributing risk factor for chronic diseases such as heart disease, hypertension, stroke and diabetes, all of which are major causes of death and preventable hospital stays for the residents of Polk County.

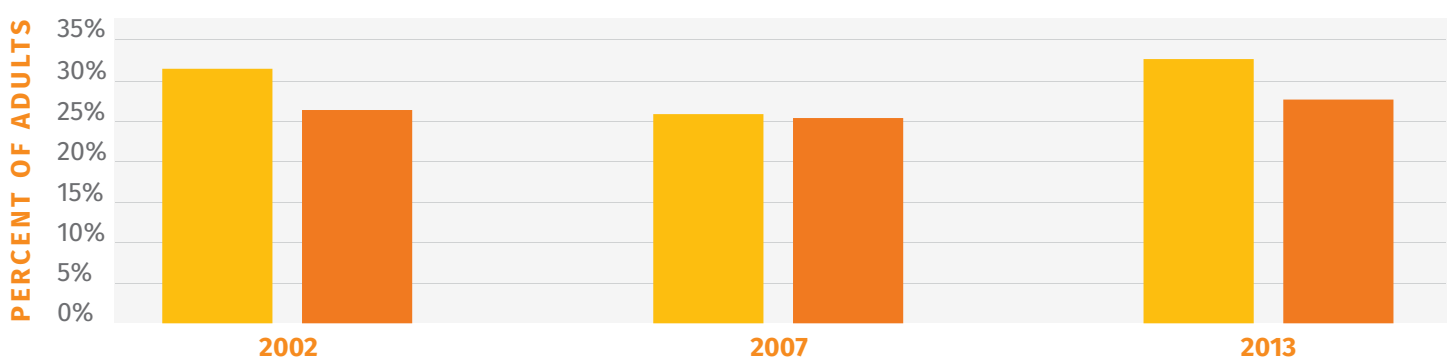
In 2013, approximately 71.5% of Polk County’s population was considered overweight or obese. Poor diet and a lack of physical activity are two of the major predictors of obesity and diabetes. According to Feeding America, 100,470 Polk County residents experienced food insecurity at some point during the report year. The U.S. Department of Agriculture (USDA) defines food insecurity as the lack of access, at times, to enough food for an active, healthy life for all household members and limited or uncertain availability of nutritionally adequate foods.

ADULTS WITH DIAGNOSED DIABETES (2002-2013)



Source: Florida Charts, 2017: Florida Behavioral Risk Factor Surveillance System

ADULTS WHO ARE SEDENTARY (2002-2013)



Source: Florida Charts, 2017: Florida Behavioral Risk Factor Surveillance System

KEY: ■ POLK COUNTY ■ FLORIDA

INITIATIVES

- Continued implementation of the Congregational Health Partnership – this program is designed to empower faith communities to address the unique health needs of their congregation and proactively addresses disparities that exist, specifically: general wellness and preventative care awareness, obesity, diabetes and nutrition
- Develop Community Wellness Programs that promote healthy eating, active living and life balance
- Explore the feasibility of implementation of the Blue Zones Project as a well-being improvement initiative in Polk County
- Explore partnerships with local food banks to identify food deserts and regions of food insecurity that could result in opportunities for mobile markets/pantries
- Create Healthy Kids Programming that supports and provides opportunities including nutrition education and physical activity in school settings
- Reduce the number of readmissions of diabetic patients to the emergency department and hospital by increasing education and early intervention opportunities

ANTICIPATED OUTCOMES

- Increased collaboration with local governments, community organizations, employers, education institutions and physician providers to lower the obesity rate in Polk County
- The development of programming that directly impacts community member awareness and knowledge as it relates to nutrition and living an active lifestyle leading to a decrease in the obesity rate

Maternal and Infant Care

In 2016, Lakeland Regional Health delivered approximately 3,000 babies and provided care to thousands of women needing obstetrical, routine and advanced gynecological care.

Improving the well-being of mothers, infants and children is important to ensuring the overall health of the community. Their well-being determines the health of the next generation and can help predict future public health challenges for families, communities, and the healthcare system.⁶

Pregnancy-related health outcomes are influenced by a woman’s health, access to prenatal care and other factors like race, ethnicity, age and income.

In Polk County, pre-conceptual and perinatal health issues are prevalent as a result of factors such as unemployment, lack of insurance and lack of providers caring for the underserved and uninsured.

⁶Office of Disease Prevention and Health Promotion, Healthy People 2020. (2014). Maternal, Infant, and Child Health. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health>

INITIATIVES

ENHANCE AND EXPAND SERVICES FOR WOMEN IN POLK COUNTY THROUGH THE FOLLOWING INITIATIVES:

- Expand the number of OB/GYN providers in the Lakeland Regional Health Physician Group
- Partner with Nemours to add Maternal/Fetal Medicine physicians at the Medical Center and in outpatient LRH facilities
- Increase the number of antepartum beds for high risk expectant moms

ENHANCE AND EXPAND SERVICES FOR CHILDREN IN POLK COUNTY THROUGH THE FOLLOWING INITIATIVES:

- Expand the number of pediatricians in the Lakeland Regional Health Physician Group
- Partner with Nemours to add pediatric specialists at LRH and in LRH sites in cardiology, gastroenterology, ophthalmology, pulmonology, nephrology, urology, general surgery, endocrinology and orthopedics
- Expand the capacity of the pediatric unit by increasing the number of beds and utilizing acuity adaptable beds
- Expand the capacity of the Pediatric Emergency Department by increasing the size, and enhancing the services for children and parents by locating it within a pediatric designated space
- Create a child-friendly surgical area by creating a pediatric-specific surgical suite

PROVIDE ADDITIONAL EDUCATION AND SUPPORT TO WOMEN WHO ARE PREGNANT, PLANNING TO BECOME PREGNANT AND HAVE RECENTLY GIVEN BIRTH

INCREASE PATIENT AND PARENT EDUCATION REGARDING CARE OF INFANTS

ANTICIPATED OUTCOMES

- Increased access resulting in a greater number of women and children receiving care and staying in Polk County to receive care
- Increased number of families participating in support and education programs provided by Lakeland Regional Health





Healthy People 2020 states that access to comprehensive healthcare services is important for achieving health equity and improving quality of life for everyone. Lack of access to quality, coordinated care affects both preventive healthcare and treatment of chronic conditions. Further, lack of access to quality, coordinated care prevents people from most effectively receiving prevention education, early detection, early treatment and referral to other needed health and social services in a primary care setting. Of particular note is the amount of coordinated care required to successfully manage diabetes and other chronic diseases.

Polk County continues to face a critical shortage of primary care physicians as compared to our region and state. According to the Robert Wood Johnson Foundation’s County Health Rankings, in 2016 Polk County had 1 primary care physician per 1,950 lives compared to the Florida average ratio of 1:1,390 and the top United States performing average of 1:2015.

Lakeland Regional Health Medical Center’s Emergency Department had more than 217,000

patient visits during FY 2016 making it the busiest single site location in the nation. The high cost of providing care in the Emergency Department, coupled with a lack of follow-up care and preventive medicine, makes planning programs that enhance access to care and the well-being of our community essential.

Lack of access to quality primary and preventative healthcare is also impacted by risk factors associated with limited financial resources and/or lack of a healthcare insurance plan. According to the 2016 U.S. Census Population Estimates, 15.4% of the population in Polk County, under the age of 65, is without healthcare coverage.

Access to quality, coordinated care is additionally impeded by insufficient knowledge, apathy, or denial regarding the importance of routine or primary healthcare services; transportation challenges reaching the practices of primary care physicians; and providers unwilling to care for certain individuals. These factors can further complicate care for chronic conditions affecting residents in the community served by Lakeland Regional Health.

INITIATIVES

Provider Access

- Continue work with the Centers for Medicaid and Medicare Services (CMS) to gain approval for Graduate Medical Education (GME) programs by increasing the level of Federal advocacy both within Congress and with healthcare agencies
- Collaborate with community partners, physicians and providers to increase the level of primary and specialty care providers available within the community served by Lakeland Regional Health
- Continue to recruit physician providers into the Lakeland Regional Health Physician Group
- Expand the role of advanced practice providers in the healthcare system to expand our capacity to care for more people
- Enhance initiatives to improve care across the continuum, including the use of evidence-based strategies in social work, case management, pharmacy, the integrated care team and ambulatory settings
- Explore creation of a Dental Residency program to improve access to dental care and education around preventative measures

Community Access

- Enhance internal communication of existing resources and programs to equip providers and team members with the knowledge necessary to educate patients on available resources

ANTICIPATED OUTCOMES

- Increased provider access for patients through support of a well-trained, culturally competent and diverse healthcare workforce to ensure access to quality care
- Improved care management and reduced barriers to preventive screening, primary care and specialty care by deploying a wide range of strategies including programs, outreach, training and policies to further minimize the negative impact of health conditions

Mental Healthcare

Overall health is determined by both physical and mental well-being. As defined by Healthy People 2020, mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges.⁷ Mental disorders are among the most common causes of disability.

In Polk County, the ratio of the population to mental health providers is 1,400:1.

The lack of sufficient providers to meet patient needs continues to impact the ability to access healthcare and acquire much needed treatment.

INITIATIVES

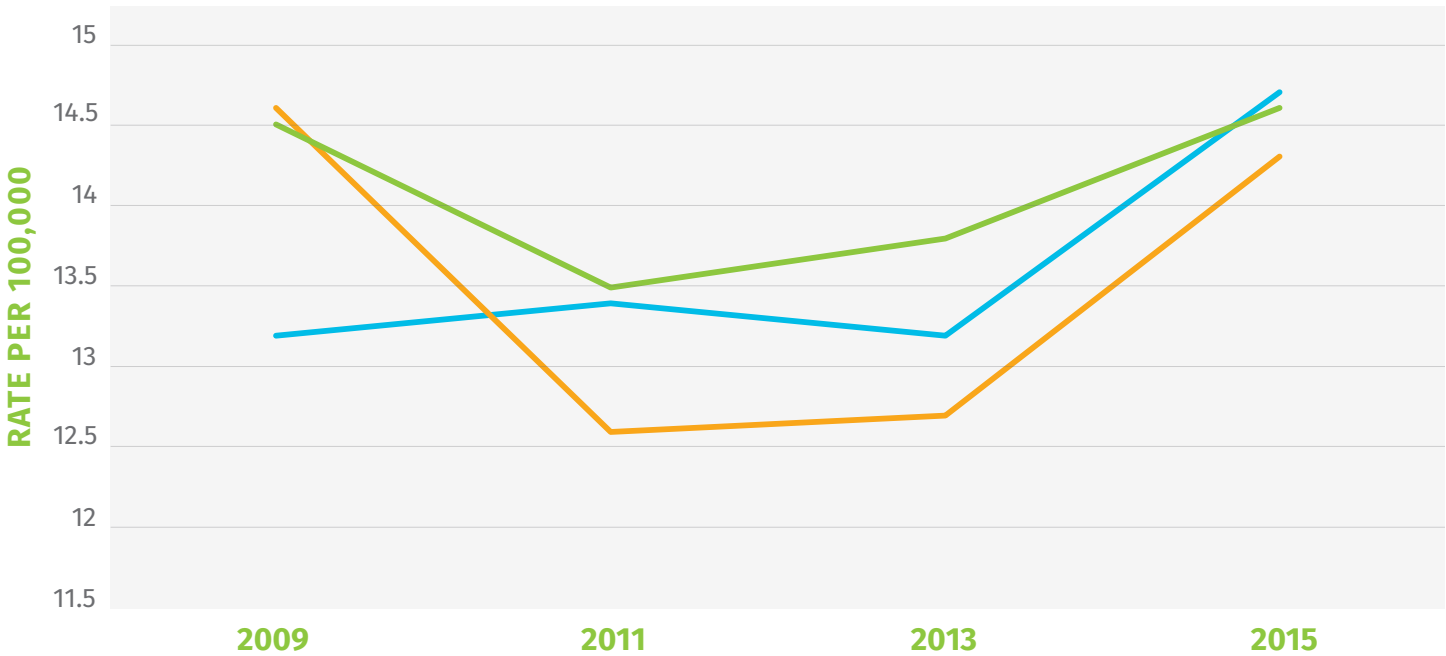
- Propose and gain support internally and externally to build a new behavioral health hospital and outpatient center
- Develop strategy to improve mental and behavioral healthcare access and partner with community stakeholders to develop additional capacity to address health needs impacting behavioral health patients
- Increase the number of primary care patients who are screened for depression and, when appropriate, referred to the proper resources
- Participate in mental health forums and education opportunities with community partners

ANTICIPATED OUTCOMES

- Increased community access to mental and behavioral healthcare
- Reduced stigma surrounding mental health as a result of increased education opportunities

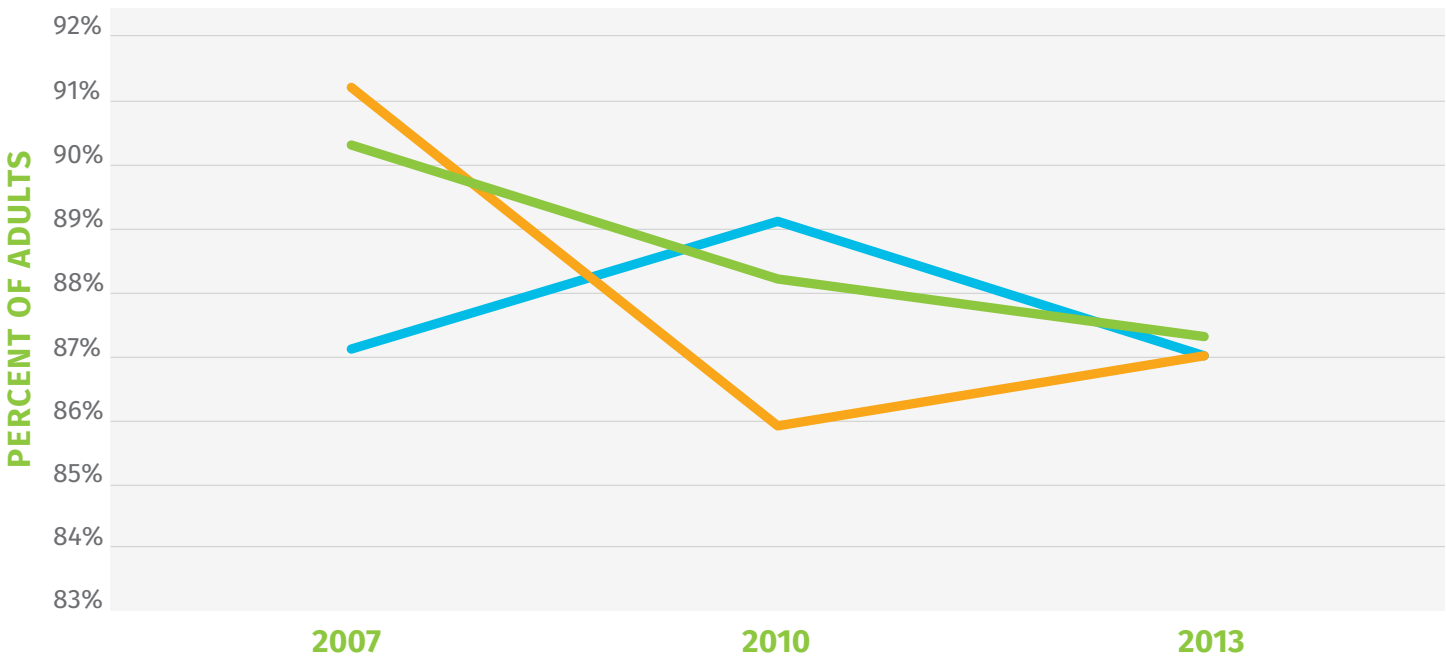
⁷ Office of Disease Prevention and Health Promotion, Healthy People 2020. (2014). Mental Health and Mental Disorders. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders>

SUICIDE RATE (2009-2015)



Source: Florida Charts, 2017: Florida Department of Health Bureau of Vital Statistics

ADULTS WITH GOOD MENTAL HEALTH (2007-2013)



Source: Florida Charts, 2017: Florida Behavioral Risk Factor Surveillance System

KEY: POLK COUNTY HILLSBOROUGH COUNTY FLORIDA

Cancer Screening and Prevention

In 2017, more than 1.6 million people will be diagnosed with cancer in the United States.⁸

Cancer is the second leading cause of death in Polk County. The overall rate of death due to cancer is 163.7 per 100,000 lives.

The causes of cancer vary, with certain types having more known risk factors than others. Early detection, education and regular screenings can improve treatment outcomes. Research shows patients cite a recommendation from a healthcare provider as the most important reason for having cancer screening tests.⁹



INITIATIVES

- Continue to conduct skin cancer education and prevention screenings through the Community Wellness Program
- Continue to offer Smoking Cessation Programs in partnership with our physician providers and groups such as the Tobacco Free Alliance to help encourage participants to work on the process and problems of quitting, both individually and as part of a group
- Expand cervical cancer awareness and education
- Expand colon cancer screening initiatives by increasing the screening procedures performed at the Hollis Cancer Center
- Evaluate the feasibility of implementing the American Cancer Society’s FluFIT program at Lakeland Regional Health Primary Care sites
- Continue to provide education sessions and symposiums on cancer prevention, screening and early detection

ANTICIPATED OUTCOMES

- Increased patient access to cancer screening services
- Increased community participation in educational programs that highlight resources available for early cancer detection and treatment
- Decreased rate of new cancer cases and deaths

⁸National Cancer Institute. (2017). Cancer Prevention Overview. Retrieved from <https://www.cancer.gov/about-cancer/causes-prevention/patient-prevention-overview-pdq>

⁹Schueler KM, Chu PW, Smith-Bindman R. Factors associated with mammography utilization: A systematic quantitative review of the literature. J Womens Health. 2008 Nov;17(9):1477–98.





Heart Disease and Stroke

Heart disease accounts for 3 out of 10 deaths in Florida and in 2014 there were 42,835 heart attack hospitalizations, or an average of 117 heart attack hospitalizations each day.^{10,11}

Heart Disease and stroke fall under the umbrella of cardiovascular disease (CVD). Early detection and intervention for individuals at risk for heart and cerebrovascular disease can lead to prevention of complications from chronic conditions.

In Polk County, heart disease is the leading cause of death and stroke is ranked as the fourth leading cause of death.¹²

HEALTHCARE NAVIGATION AND LITERACY

- Increase the number of individuals who “know their numbers” and are aware of

risk factors for heart disease by utilizing the Community Wellness Program health screenings events

- Continue to engage congregations through the Congregational Health Partnership and promote education and workshops that focus on risk factors for cardiovascular disease including: 1) heart health education; 2) nutrition and diet education; and 3) importance of physical activity and exercise
- Continued implementation of the STEMI¹³ direct to cath lab initiative which reduces the time between arrival of the patient to the hospital and initial contact with treatment team and door to balloon time

ANTICIPATED OUTCOMES

- Increased percentage of adults who are aware of signs and symptoms of Cardiovascular Disease
- Decrease in the time it takes to identify and treat patients who present with ST Elevation Myocardial Infarction

¹⁰Florida Department of Health. Heart Disease. Retrieved from <http://www.floridahealth.gov/diseases-and-conditions/heart-disease/>

¹¹ Florida Department of Health. Retrieved from <https://www.floridatracking.com/healthtracking/>

¹²Florida Department of Health. (2015).Florida Charts (County Health Profile: 3 Year Age Adjusted Resident Death Rates). Retrieved from <http://www.flhealthcharts.com/ChartsReports/rdPage.aspx?rdReport=ChartsProfiles.CountyHealthProfile>

¹³ STEMI - ST Elevation Myocardial Infarction – a severe heart attack caused by clotting of one or more arteries

Injury Prevention



Injuries and violence affect everyone, regardless of age, race, or economic status.¹⁴ According to the Health Resources and Services Administration, injuries leading to disability and death are a leading public health threat facing people 1-44 years of age. The major categories of injury are unintentional (accidental) and intentional.

Unintentional injuries include those that result from motor vehicle accidents, fires, drownings, falls, poisonings, suffocation, animal bites, recreational and sports-related activities. Intentional injuries are categorized by interpersonal or self-inflicted violence, and include homicide, assaults, suicide, child abuse and neglect, elder abuse and sexual assault.

Injuries are the fifth leading cause of death overall in the state after cancer, heart disease and chronic lower respiratory diseases, according to the *Florida Vital Statistics Annual Report*.

In that report, injuries claimed 10,346 lives (2015).¹⁵

In Polk County, the rate of deaths due to motor vehicle accidents is much higher than those of the region and state. In 2016 there were 24.1 deaths per 100,000 lives in Polk County in comparison to Florida's rate of 14.2 and the US's rate of 13.3.

INITIATIVES

- Continued participation in the Coalition on Injury Prevention. The Coalition provides injury prevention education and activities by leveraging partnerships, communication effort, support networks and community events. The Coalition is a joint effort between Lakeland Regional Health's Trauma Services and the Polk County Health Department and is comprised of injury prevention professionals from various fields
- Reduce unintentional fatal and nonfatal injury by improving the health, safety and knowledge of our community by continuing to address priority injury areas:
 - Provide evidence-based tools and training to prevent drowning and near drowning of 1 to 4 year olds (swimming lessons)
 - Increase community awareness of bicycle safety for adults ages 19+ by expanding the knowledge of safety equipment and rules of the road to cyclists and drivers
 - Promote balance and strength improvement evidence-based classes to reduce the risk of falling in older adults (Matter of Balance, Tai Chi Moving for Better Balance (TCMBB) and Tai Chi for Arthritis (TCA))
 - Provide caregivers Certified Child Passenger Safety services to ensure optimal safety of a child in a motor vehicle

ANTICIPATED OUTCOMES

- Increased patient and community participation in injury education and community outreach services provided by our Trauma Center.

¹⁴ Centers for Disease Control and Prevention.(2017). Key Injury and Violence Data. Retrieved from https://www.cdc.gov/injury/wisqars/overview/key_data.html

¹⁵ Florida Department of Health.(2015).Florida Vital Statistics Annual Report. Retrieved from <http://www.flpublichealth.com/VBOOK/pdf/2015/Deaths.pdf>

EVALUATION PLAN

Each community priority and initiative has a set of measurable objectives and is aligned with the health system’s strategic plan and mission. Evaluation and progress on the implementation of community initiatives will be reported annually to the community and health system board of directors in addition to being included in each year’s Community Benefit Report.

LOOKING TO THE FUTURE

**HEALTH NEEDS
LAKELAND REGIONAL HEALTH
DOES NOT INTEND TO ADDRESS**

Transportation
While we recognize lack of access to public transportation creates a significant barrier to obtaining healthcare, Lakeland Regional Health, as a healthcare organization, lacks the resources and expertise to address the community need. Lakeland Regional Health will continue to support ongoing initiatives related to improving transportation across the county and work to ensure care is easier to access by increasing the level of primary and specialty care providers available within the community.

Lakeland Regional Health is dedicated to making a positive impact on the health of the community we serve, particularly on the health of those economically-disadvantaged and underserved. The important research that has been completed during this assessment will guide the system in not only strengthening the health of Polk County but will aid in making higher and safer quality care easier to access.

As we look to the future, we will continue to plan how to strategically use our resources to take action in each of the identified priority areas. By working with our partners across Polk County, we will make our community a healthier place for all.



WE PROMISE:

To **treasure** all people as
uniquely created

To **nurture, educate** and **guide**
with integrity

To **inspire** each and every one of
us to do our very best



Lakeland Regional Health[®]
Together, Our Promise is **YOUR HEALTH.**[®]

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