



FLORIDA HOSPITAL
AT CONNERTON
Long Term Acute Care

Florida Hospital at Connerton Long-Term Acute Care 2016 Community Health Needs Assessment



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1. EXECUTIVE SUMMARY

Florida Hospital Connerton at LTAC (Connerton LTAC) is located in Land O' Lakes in Pasco County, Florida. Connerton LTAC is a long-term acute care hospital to which patients are referred from other facilities in Florida and out-of-state.

Connerton LTAC conducted this Community Health Needs Assessment in 2016.

The goals of the assessment are to:

- Assess the community's health needs and interests
- Engage community stakeholders to participate in the Needs Assessment process
- Identify resources and collaborate with community partners including Public Health
- Publish this Community Health Needs Assessment
- Develop and implement a Community Health Plan based on the Hospital's prioritized needs

This Assessment was based on primary data from stakeholder interviews and other input. Secondary data came from local, regional and national health-related data sources. Florida Hospital Connerton LTAC made a particular effort to define the needs of low-income, minority and underserved populations in our service area. We did this through the members of our Community Health Needs Assessment who represented low-income, minority and other vulnerable populations and through Stakeholder Interviews with community members.

Connerton LTAC's primary service area (from which 80% of its patients come) consists of Hillsborough and Pasco Counties. Because of our unique patient mix, we are also giving special consideration to people over 65 and to the south central area of Pasco County where Connerton LTAC is located.

The Community Health Needs Assessment identified the top needs in our primary service area:

1. Obesity
2. Diabetes
3. Respiratory Diseases
4. Lack of Access to Healthcare
5. Heart Disease/Stroke
6. Smokers (Adult)
7. Health Literacy
8. Access to Dental Care
9. Low income/poverty
10. Access to Healthy Food

Based on the acuity of the needs and the ability of the hospital to influence them, Florida Hospital at Connerton LTAC will address the following needs:

1. Obesity
2. Respiratory Diseases
3. Smokers (Adult)
4. Health Education

Methods for Engaging the Community in the Assessment

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

1. The Hospital formed a Community Health Needs Assessment Committee (CHNAC) that included representatives of the hospital and community (see Section 5) with a special focus on underserved populations within the hospital community/service area. The Committee's role was to guide the Assessment process (see Section 5) and select the priority issues for the hospital community. Those members of the Committee who serve members of minority, low-income and medically underserved populations are indicated in the listing. Specific Committee functions include:
 - a. Review of all primary and secondary data
 - b. Prioritization of key issues identified in the Assessment
 - c. Selection of Priority Issues to be addressed by the hospital
 - d. Assistance with the development of a Community Asset Inventory (see Section 13)
 - e. Participation in community stakeholder surveys
 - f. Development of the Community Health Plan (implementation strategies) to address the Priority Issues identified in the Assessment
2. Community stakeholder interviews (see Section 6 for the questions and Section 9 for the survey results)
3. Public Health input and expertise
 - a. Membership on the CHNAC
 - b. Reliance on Public Health input and expertise throughout the Assessment process (see Section 6)
 - c. Use of Public Health data (see Section 7)

2. FLORIDA HOSPITAL AT CONNERTON LONG TERM ACUTE CARE

Florida Hospital at Connerton Long Term Acute Care became part of Adventist Health System in September 2010. At that time, Adventist Health System purchased five Tampa Bay-area hospitals from University Community Hospital (UCH). Connerton LTAC facility opened on March 17, 2009.

Today, Connerton LTAC is a 50-bed long-term care hospital for patients with medically complex conditions that require additional weeks of specialized hospital care. LTAC patients are referred in from 25 different hospitals. Patients come from 52 different counties in and out of Florida.

To be transferred in and admitted to Connerton LTAC, patients must require medically necessary treatments or interventions, a continued acute level of care (following a hospitalization), have a history of failed treatment in a lower level of care, or have a high rate of recidivism.

Internal hospital data for 2015 shows:

- Connerton LTAC discharged 671 patients in 2015
- The average patient age was 68 years' old
- 81.31% of patients were covered by Medicare
- 87.38% of patients were Caucasian, 8.75% were African American, 0.45% Multicultural, 0.30% Asian, and 3.12% Other
- The gender distribution was 51.34% Male, and 48.66% Female
- Connerton LTAC runs at 98.60% capacity because there are no other LTACs in the region

Connerton LTAC's trained staff delivers expert care and helps patients progress to the next stage of recovery through:

Specialized medical care

- ✓ Ventilator weaning
- ✓ Complex respiratory conditions
- ✓ Infectious diseases
- ✓ Complex wound care
- ✓ Heart failure
- ✓ Medically complex conditions
- ✓ Neurological disorders
- ✓ Post-trauma care
- ✓ Renal disorders
- ✓ Bariatric care
- ✓ Surgical complications

Clinical services

- ✓ Nursing Units: critical care unit and medical/surgical units
- ✓ Imaging: X-ray or ultrasound scans
- ✓ Surgical Suite: minor inpatient procedures
- ✓ Laboratory: dedicated on-site laboratory
- ✓ Pharmacy: inpatient Pharmacy for drugs ordered by a patient's physician
- ✓ Respiratory: Level 5 therapy with expertise in critical care ventilator support, ventilator weaning and acute respiratory therapy
- ✓ Therapy Services: physical, occupational, speech and nutritional therapy
- ✓ Case Management: Insurance, discharge planning and special service needs such as home health care or medical equipment

In addition, the Connerton LTAC Chaplain meets the spiritual needs of the patients and staff.

Adventist Health System Mission

Adventist Health System (AHS) is part of the Seventh-day Adventist Church's world-wide network of health care facilities. AHS is comprised of 45 hospital campuses and is a national leader in quality, safety and patient satisfaction.

Although separated by geography, each of our facilities is united by the mission of Extending the Healing Ministry of Christ. Our values include Christian Mission, Community Wellness, Quality and Service Excellence, Ethical Standards, Compassion and Cultural Diversity. We practice the tradition of whole-person care in all that we do.

3. CHOOSING THE COMMUNITY

Florida Hospital at Connerton LTAC is located in the south central part of Pasco County, FL, a bedroom community to the greater Tampa Bay area. Patients are referred to Connerton LTAC by 25 other hospitals in Florida. Florida Hospital also operates community hospitals in Tampa, Carrollwood, Wesley Chapel and Zephyrhills.

The map shows most of the counties in “Central Florida” from which Connerton LTAC patients are referred. Central Florida is divided into several regions:

- Greater Tampa Bay (pink)
- Southwest (blue)
- Greater Orlando area (green)
- Southeast (orange)
- North Central Florida (purple) is also included on this map, but no Connerton LTAC patients came from these counties.



Connerton LTAC defines its Primary Service Area (PSA) as the area in which 75 - 80% of its patients live. In 2015, of Connerton LTAC patients lived in two counties.

- 39.46% of patients lived in Hillsborough County
- 37.24% of patients lived Pasco County

Another 22.11% hail from other Florida Counties and 1.19% are from out of state.

4. COMMUNITY DESCRIPTION AND DEMOGRAPHICS

For the purposes of this Community Health Needs Assessment, we used three criteria to define the Connerton LTAC “community”:

1. The Primary Service Area (PSA) from which at least 80% of our patients come (Hillsborough and Pasco Counties)
2. Our facility location in the south central part of Pasco County (Land O’ Lakes area), including the eight zip codes closest to the facility (Lacoochee-33537, Zephyrhills-33539, 33540, 33541, 33543 and 33544, Spring Hill-34610 and Land O’ Lakes-34639)
3. People over 65 (the Connerton LTAC average patient age is 68 years)



Description of The Community Served

This section of the Florida Hospital at Connerton LTAC Community Health Needs Assessment describes the two counties in the Primary Service Area as well as a number of cities within the counties. All data is based on 2015 U.S. Census population estimates.

Demographics: Pasco County

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

As of July 1, 2015 Pasco County is estimated to have had 497,909 residents in the following zip codes:



33523 Dade City	33539 Zephyrhills	34639 Land O’ Lakes	34667 Hudson
33524 Crystal Springs	33540 Zephyrhills	34652 New Port Richey	34668 Port Richey
33525 Dade City	33541 Zephyrhills	34653 New Port Richey	34674 Hudson
33526 Dade City	33543 Zephyrhills	34654 New Port Richey	34679 Aripeka
33533 Wesley Chapel	33544 Zephyrhills	34655 New Port Richey	34690 Holiday
33534 Wesley Chapel	33574 Saint Leo	34556 New Port Richey	34691 Holiday
33537 Lacoochee	34610 Spring Hill		

***Boldface** indicates zip codes in closest proximity to Connerton LTAC*

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

22.7% of residents – are ages 65 or older, another 20.4% are under age 18. Overall, residents are 51.5% Female and 48.5% are male. Pasco County has large numbers of winter residents, of “snowbirds.” 87.5% of Pasco residents have at least a high school diploma, but just 21.1% have a Bachelor’s degree or higher. The median household income is \$44,518. 14.7% of residents of Pasco County residents have incomes below the poverty level.

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

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

Demographics: Hillsborough County

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

In the 2010 U.S. Census, Hillsborough County listed 1,349,050 residents.

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

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

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

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

5. COMMUNITY HEALTH NEEDS ASSESSMENT COMMITTEE (CHNAC)

Florida Hospital at Connerton LTAC created a Community Health Needs Assessment Committee (CHNAC) that included community and hospital leaders who represented the broad community as well as low-income, minority, elderly and underserved populations. CHNAC members included patients / families, community members, community caregivers, first responders, public health, experts on aging populations, and health care providers.

The Committee worked on the needs assessment, guided the selection of priority needs, and helped develop Connerton LTAC’s Community Health Needs Plan (implementation strategy) that addresses the top needs identified in the Assessment.

Name	Entity/Agency Represented	Title	Expertise
Debora Martoccio	Connerton LTAC	CEO	Long-term Care, Nursing Leadership
Moses Brown	Connerton LTAC	LTAC Chaplain, Founder of Feed Our Children Ministries, a non-profit supporting Greater Tampa Community social services	Low-income, Minority and Underserved, Patients and Families Including the Elderly
Chief Timothy Reardon	Pasco County Fire & Rescue	Emergency Medical Services Chief	First Responders, Community Health, Elderly
Galo Eduardo Alav, MD	St. Leo College - School of HealthCare Management	Assistant Professor	Community Health; Low-income, Minority and Underserved; Elderly
Miguelina Batista, RN	FH Connerton & Community	Community Pastor, LTAC Staff, Spiritual Ambassador	Community and Minority Groups, Faith Community, Caring for LTAC Patients
Christine Abarca	Pasco County Health Dept.	Assistant Director	Public Health, Needs Assessments (10 Years with State for All Florida Counties), Elderly
Deanna Krautner	Pasco County Health Dept.	Health Educator	Public Health; Chronic Disease; Low-Income, Minority and Underserved

6. STAKEHOLDER INPUT PROCESS

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

The interviewees were chosen based on:

- Connerton LTAC patient/family experience
- Caregiver expertise (family and/or first responders)
- Public Health expertise
- Faith community leadership
- Elderly population expertise
- Knowledge of the health needs of low-income, minority and other underserved populations

Stakeholder Interview Questions

We asked community stakeholders the following questions:

1. *How would you rate the following?*

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

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

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

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

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

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

- | | |
|-------------------------------|---|
| Unemployment | Lack of grocery stores / access to healthy food |
| Low-income families / poverty | Lack of health insurance / affordable care |
| Crime / violence | Access to dental care |
| Homelessness | Air & water quality |
| Low education levels/literacy | Other (describe) |
| Inadequate transportation | |

5. Who in our community promotes good health?

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

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

8. Who else should we talk to?

The responses to this Stakeholder Survey can be found in Section 9 DATA FINDINGS & ANALYSIS” of this document.

7. PUBLIC HEALTH

Public Health was represented by the following individuals on the Community Health Needs Assessment Committee and participation completing the Stakeholder Survey:

Christine Abarca, MPH, MCHES, the Assistant Director of the Pasco County Department of Health (DOH), is a member of the Community Health Needs Assessment Committee. Prior to working in Pasco County, Ms. Abarca was with the state DOH office in Tallahassee, where she was responsible for DOH Community Health Needs Assessments in Florida’s 67 counties.

Deanna Krautner, M.Ed., CHES, is the Health Education Program Manager and Public Information Officer for the Pasco County Department of Health. Ms. Krautner is a Certified Health Education Specialist and serves as the agencies Public Information Officer. Her work includes health assessment and improvement planning, agency strategic planning and performance management, as well as community collaboration.

8. PRIMARY AND SECONDARY DATA

Primary Data

- Hospital utilization data including Primary Service Area, demographics and Top 10 diagnoses
- Stakeholder Surveys
- Community Health Needs Assessment Committee input

Secondary Data

- a. Cardiac Arrest Registry to Enhance Survival (CARES), 2011-2012
- b. Centers for Disease Control & Prevention (CDC), Behavioral Risk Factor Surveillance System (BRFSS)
- c. Centers for Disease Control & Prevention (CDC), National Center for Chronic Disease Prevention & Health Promotion, 2012
- d. Centers for Disease Control & Prevention (CDC), National Vital Statistics System
- e. Centers for Disease Control (CDC), Wide-Ranging Online Data for Epidemiologic Research, 2006-2010
- f. Dartmouth Atlas of Health Care, Clinical Practice, 2012
- g. Dartmouth College Institute for Health Policy
- h. Federal Bureau of Investigation (FBI), FBI Uniform Crime Reports with additional analysis by the National Archive of Criminal Justice Data
- i. Florida CHARTS, County Health Status Summary, 2012-2014
- j. Healthy People 2020
- k. National Institutes of Health (NIH); National Cancer Institute (NCI); Surveillance, Epidemiology and End Results Program; State Cancer Profiles; 2007-2011
- l. University of Wisconsin Population Health Institute, County Health Rankings, 2015
- m. US Census Bureau, American Community Survey (ACS), 2009-2013
- n. US Census Bureau, Quick Facts for Hillsborough and Pasco Counties, 2016
- o. US Census Bureau, Small Area Health Insurance Estimates, 2013
- p. US Dept. of Agriculture (USDA), Economic Research Service, USDA Food Access Research Atlas, 2010
- q. US Dept. of Health & Human Services (HHS), Center for Medicare & Medicaid Services (CMS), Provider of Services File, Sept. 2015
- r. US Dept. of Health & Human Services (HHS), Health Indicators Warehouse
- s. US Dept. of Health & Human Services (HHS), Health Resources & Services Administration (HRSA), Area Health Resource File, 2013
- t. US Dept. of Labor (DOL), Bureau of Labor Statistics, Sept. 2015

9. DATA FINDINGS & ANALYSIS

Section 9 of the 2016 Community Health Needs Assessment explains the Primary and Secondary data findings for Florida Hospital at Connerton LTAC.

The section also explains the process that the Community Health Needs Assessment Committee used to determine the priorities that Connerton LTAC would address in its Community Health Plan (Implementation Strategies).

Primary Data: Findings from Hospital Utilization Data

LTAC Patient Origins

The list below details the top 10 reasons for patient admission in 2015:

1. ACUTE & CHRONIC RESP FAIL
2. ACUTE RESPIRATORY FAILURE
3. CHRONIC RESPIRATORY FAIL
4. AC/CHR RSP FLR FOL TR/SG
5. OBS CHR BRONC W(AC) EXAC
6. FOOD/VOMIT PNEUMONITIS
7. PRESSURE ULCER, LOW BACK
8. DMII OTH NT ST UNCNTRLD
9. CELLULITIS OF LEG
10. PNEUMONIA, ORGANISM NOS

LTAC Gender and Ethnicity

In 2015, Florida Hospital at Connerton LTAC discharged 671 patients.

- 51.34% were men and 48.66% were women.
- 87.38% were Caucasian, 8.75% were Black, 0.45% were Multicultural, 0.30% were Asian, and 3.12% identified as Other race.

LTAC Age

The average patient age in 2015 was 68 years.

Primary Data: Findings from Stakeholder Surveys

The Stakeholder Interview findings below note the interviewees' role in the community; how they represented public health and/or low-income, minority, and other underserved populations, and their perception of the three greatest health needs in the LTAC service area. Members of the CHNAC were interviewed as well as members of the geographical immediate community (see section 4 for a list of the CHNA members). The aggregated major finds were Heart disease, Respiratory Disease, Diabetes, Obesity, Smoking, Aging Population, Low-income families/poverty, Lack of health insurance/affordable care, Low education/literacy, and Access to dental care.

The following chart shows the results of the Stakeholder surveys.

Date	Entity Represented (Minority, Low-Income, Public Health)	Top 3 Health Conditions	Top 3 Health Behaviors	Top 3 Community Conditions
6/14/16	Low-income, Public Health	Respiratory Disease, Diabetes, Renal Failure	Obesity, Smoking, Aging Population	Unemployment, Low-Income Families/Poverty, Inadequate Transportation
6/14/16	Public Health	High Blood Pressure/Cholesterol, Diabetes, Mental Health Disorders	Obesity, Lack of Exercise, Substance Abuse -Drugs	Crime/Violence, Lack of Grocery Store/Access to Healthy Food, Access to Dental Care
6/14/16	Minority, Low-income, Public Health	Heart Disease, Diabetes, Immunizations - Children	Obesity, Smoking, Aging Population	Low-Income Families/Poverty, Inadequate Transportation, Lack of Health Insurance/ Affordable Care
6/14/16	Public Health	Cancer, Heart Disease, Injuries	Obesity, Smoking, Aging Population	Low Education Levels/Literacy, Access to Dental Care, Lack of Health Insurance/ Affordable Care
6/14/16	Public Health	Cancer, Heart Disease, Mental Health Disorders	Obesity, Smoking, Substance Abuse	Low-income Families/Poverty, Low Education Levels/Literacy, Social Support
6/14/16	Public Health	Heart Disease, Respiratory Disease, Diabetes	Obesity, Poor Nutrition, Aging Population	Low-income Families/Poverty, Homelessness, Low Education Levels/Literacy
6/14/16	Public Health	Cancer, Respiratory Disease, Mental Health Disorders	Obesity, Smoking, Substance Abuse - Drugs	Low-income Families/Poverty, Homelessness, Lack of Grocery Stores/Access to Healthy Food
6/14/16	Public Health	Heart Disease, Respiratory Disease, Diabetes	Obesity, Smoking, Aging Population	Unemployment, Low-income Families/Poverty, Low Education Levels/Literacy
6/14/16	Public Health	Heart Disease, Respiratory Disease, Diabetes	Obesity, Smoking, Poor Nutrition	Low-income Families/Poverty, Inadequate Transportation, Lack of Health Insurance/ Affordable Care
6/14/16	Public Health	High Blood Pressure/Cholesterol, Diabetes, Respiratory Disease	Obesity, Lack of Exercise, Smoking	Homelessness, Low Education Levels, Aging Population
6/14/16	Healthcare	Cancer, Respiratory Disease, Mental Health Disorders	Smoking, Poor Nutrition, Substance Abuse- Drugs	Low-income Families/Poverty, Low Education Levels/Literacy, Lack of Health Insurance/Affordable Care
6/14/16	Healthcare	High Blood Pressure/Cholesterol, Diabetes, Mental Health Disorders	Obesity, Smoking, Substance Abuse-Drugs	Low-income Families/Poverty, Lack of Health Insurance/ Affordable Care, Access to Dental Care
6/14/16	Healthcare	Heart Disease, Respiratory Disease, Diabetes	Obesity, Poor Nutrition, Aging Population	Homelessness, Low Education Levels, Lack of Health Insurance/ Affordable Care
6/14/16	Healthcare	Heart Disease, Diabetes, Mental Health Disorders	Obesity, Smoking, Aging Population	Low-income Families/Poverty, Low Education Levels/Literacy, Lack of Health Insurance/ Affordable Care

Date	Entity Represented (Minority, Low-Income, Public Health)	Top 3 Health Conditions	Top 3 Health Behaviors	Top 3 Community Conditions
6/14/16	Healthcare	Heart Disease, Diabetes, Mental Health Disorders	Obesity, Smoking, Aging Population	Low-income Families/Poverty, Low Education Levels/Literacy, Lack of Health Insurance/ Affordable Care
6/14/16	Healthcare	Cancer, Diabetes, Mental Health Disorders	Obesity, Lack of Exercise, Smoking	Inadequate Transportation, Lack of Grocery Stores/Access to Healthy Food, Access to Dental Care
6/14/16	Healthcare	Respiratory Disease, Diabetes, Immunizations	Obesity, Poor Nutrition, Aging Population	Low Education Levels/Literacy, Lack of Grocery Stores/Access to Healthy Food, Lack of Health Insurance/ Affordable Care
6/14/16	Healthcare	Heart Disease, Respiratory Disease, Diabetes	Obesity, Smoking, Aging Population	Unemployment, Low-Income Families/Poverty, Access to Dental Care
6/14/16	Healthcare	Heart Disease, High Blood Pressure/ Cholesterol, Diabetes	Smoking, Poor Nutrition, Substance Abuse- Drugs	Crime/Violence, Lack of Grocery Store/Access to Healthy Food, Lack of Health Insurance/ Affordable Care
6/14/16	Healthcare	Heart Disease, Respiratory Disease, Diabetes	Obesity, Smoking, Aging Population	Low Education Levels/Literacy, Access to Dental Care, Lack of Health Insurance/Affordable Care
6/14/16	Healthcare	Heart Disease, Respiratory Disease, Diabetes	Obesity, Smoking, Substance Abuse	Low-income Families/Poverty, Low Education Levels/Literacy, Lack of Health Insurance/Affordable Care

Secondary Data: Florida CHARTS Community Health Status Summary - Pasco County

The CHARTS web site provides 2012-2014 statewide public health statistics by county, including births, deaths, communicable and chronic diseases, and more.

The key issues identified in the Pasco County CHARTS assessment were:

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

Secondary Data: Florida Charts Community Health Status Summary – Hillsborough County

The CHARTS web site provides 2012-2014 statewide public health statistics by county, including births, deaths, communicable and chronic diseases, and more.

The key issues identified in the Hillsborough County CHARTS assessment were:

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

10. DATA SUMMARY

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

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

While the data for the Primary Service Area was readily available and understandable, the definition of the Connerton LTAC service area was very broad because Florida Hospital at Connerton LTAC accepts patients from 52 counties in Florida and other states. For example, even Hillsborough County, in which 46.3% of Connerton LTAC patients live, is some distance from the hospital. Further, Connerton LTAC does not offer the services – surgery, an Emergency Department, health education, etc. – found in a “regular” community hospital. These factors challenged the Community Health Needs Assessment Committee to determine workable priorities and manageable interventions.

11. PRELIMINARY DATA – HIGH-LEVEL FINDINGS RE TOP HEALTH ISSUES

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

<i>Primary Data</i>	
Top 8-10 health priorities determined by CHNAC & Stakeholder Interviews	
1.	HEART DISEASE
2.	RESPIRATORY DISEASE
3.	DIABETES
4.	OBESITY
5.	SMOKING
6.	AGING POPULATION
7.	LOW-INCOMEFAMILIES/POVERTY
8.	LACK OF HEALTH INSURANCE/AFFORDABLE CARE
9.	LOW EDUCATION/LITERACY
10.	ACCESS TO DENTAL CARE

<i>Primary Data</i>	
Top health priorities determined by Connerton LTAC Patient Data	
1.	ACUTE & CHRONIC RESP FAIL
2.	ACUTE RESPIRATORY FAILURE
3.	CHRONIC RESPIRATORY FAIL
4.	AC/CHR RSP FLR FOL TR/SG
5.	OBS CHR BRONC W(AC) EXAC
6.	FOOD/VOMIT PNEUMONITIS
7.	PRESSURE ULCER, LOW BACK
8.	DMII OTH NT ST UNCNTRLD
9.	CELLULITIS OF LEG
10.	PNEUMONIA, ORGANISM NOS

Top health priorities determined by Florida Hospital at Connerton LTAC
Secondary Data Report (Published on the Connerton LTAC website along with the
2016 CHNA Report)

1. Food Insecurity Rate
2. Teen Birth Rate
3. Poverty Rate
4. Population with Low Food Access
5. Breast Cancer Screening (Mammogram)
6. Facilities Designated as Health Professional Shortage Areas
7. Need for Federally Qualified Health Centers
8. Access to Dentists
9. Preventable Hospital Events
10. Heavy Alcohol Consumption
11. Physical Inactivity (Adult)
12. Breast Cancer Incidence
13. Cervical Cancer Incidence
14. Colon Cancer Incidence
15. Heart Disease Prevalence
16. High Cholesterol
17. Infant Mortality
18. Low Birth Weight
19. Poor Dental Health
20. Prostate Cancer Incidence
21. Stroke Mortality
22. Suicide
23. Accident Mortality
24. Asthma Prevalence
25. Cancer Mortality
26. Depression-Medicare Population
27. Diabetes Prevalence
28. Heart Disease Mortality (ALL)
29. High blood Pressure Prevalence
30. Lung Cancer Incidence
31. Lung Disease Mortality
32. Poor/Fair General Health
33. Premature Death

Top health priorities determined by Florida Charts - Hillsborough County
Community Health Status Summary 2012-2014

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

Top health priorities determined by Florida Charts – Pasco County
Community Health Status Summary 2012-2014

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

12. AGGREGATED SERVICE AREA PRIORITIES BASED ON THE ISSUES LISTED ABOVE

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

<i>Secondary Data</i>
Aggregated Service Area Priorities based on the Issues listed above
1. Obesity
2. Diabetes
3. Respiratory Diseases
4. Lack of Access to Healthcare
5. Heart Disease/Stroke
6. Smokers (Adult)
7. Low education/Literacy Rates
8. Access to Dental Care
9. Low income/poverty
10. Access to Healthy Food

13. ASSET INVENTORY

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

Health Issue	Community Assets & Programs	Florida Hospital Assets & Programs
Access to health care/uninsured	Marketplace Enrollment Navigators in hospitals and community Hospital Medicaid enrollment specialists Good Samaritan Clinic Premier Community Healthcare Group (FQHC) – 5 sites Tampa Family Health Centers (FQHC) – 12 sites Mobile Medical Unit Funded by Public Defenders’ office Oasis and St. Andres health clinics for the uninsured	Navigators at Florida Hospital Tampa and Carrollwood Medicaid enrollment at all Florida Hospitals
Access to dental care	Tampa FQHCs Pasco FQHCs	N/A
Caregiver burnout & compassion fatigue	Pasco-Pinellas & Hillsborough Area Agencies on Aging fund some counseling, training & support Community respite care programs (fee-based) CARES Florida services to keep 65+ at home	Connerton LTAC has a Community, Family and Staff Caregiver support program
Cancer	American Cancer Society FQHC screenings and testing DOH screenings and testing	N/A
Cancer – melanoma	American Cancer Society FQHC screenings and testing	N/A
Chronic disease – Diabetes	American Diabetes Association Pasco DOH diabetes programs Hillsborough DOH diabetes programs	The 4 other FH facilities have Diabetes Education. FH Wesley Chapel has a Fitness Center program for people with diabetes
Chronic disease – respiratory conditions	American Lung Association School system has asthma educational classes for youth	Connerton LTAC has expertise in respiratory failure, pneumonia and ventilator therapy.
Communicable diseases – reporting	Hillsborough DOH Pasco DOH	N/A
Communicable diseases – immunizations all	Hillsborough DOH Pasco DOH	N/A
Communicable diseases – immunizations pre-K	Hillsborough DOH Pasco DOH	N/A
Health Education	Hillsborough DOH Pasco DOH Premiere Community Healthcare Group has Health Navigators	LTAC educators for patients LTAC translation services
Heart disease & stroke	American Heart Association American Stroke Association	Cardiac programs at nearly all Tampa area hospitals including Florida Hospitals

Health Issue	Community Assets & Programs	Florida Hospital Assets & Programs
Infant death & low birth weight babies	Healthy Start Coalition of Hillsborough County Healthy Start Coalition of Pasco County Federal Healthy Start at USF Healthy Families Hillsborough Healthy Families Pasco Hillsborough DOH: prenatal care & WIC Pasco DOH: prenatal care & WIC Tampa Bay Doula program Community parent education programs, e.g. Baby Bungalow	OB services at Florida Hospitals Tampa and Wesley Chapel Associated parent education at Florida Hospitals Tampa and Wesley Chapel NICU at Florida Hospital Tampa
Injury & violence – unintentional injuries	Top focus of Healthy Tampa Bay Tampa Area Safety Council serves 10 counties Abuse hotline Safe Kids Coalition Sunrise for domestic and sexual violence	N/A
Injury & violence – motor vehicle accidents	Top focus of Healthy Tampa Bay Tampa Area Safety Council serves 10 counties DMV Accident Prevention Course	N/A
Lodging – LTAC families	Economic Development Commission	LTAC has reached out to local community partners to negotiate lower room rates and each patient room has a pull-out couch
Motor vehicle deaths	Top focus of Healthy Tampa Bay Committee Tampa Area Safety Council programs DMV Accident Prevention Course	N/A
Obesity	YMCA American Diabetes Association Chapters of Letsmove.gov	4 Florida Hospitals (Wesley Chapel, Zephyrhills, Tampa & Carrollwood) healthy lifestyle programs Florida Hospital Wesley Chapel Fitness Center CREATION Health lifestyle programs
Smoking cessation programs	Tobacco Free Partnerships of Hillsborough and Pasco Counties Hillsborough County DOH “FreshStart” Pasco DOH “Tools to Quit” Area Health Education Center (AHEC) Cessation classes and specialists American Lung Assn. “Freedom from Smoking” Florida Tobacco-Free Quit Line TAP (Youth Tobacco Awareness Program) SWAT (Students Working Against Tobacco)	“Tools to Quit” programs at Florida Hospital Wesley Chapel and Zephyrhills Florida Hospital Tampa AHEC classes
Social & mental health – substance abuse (not-for-profit centers only)	North Tampa Behavioral Health – inpatient and outpatient substance abuse programs Drug Abuse Comprehensive Coordinating Office (DACCOC) – inpatient and outpatient services Agency for Community Treatment Centers (ACTS) – inpatient and outpatient Crisis Center of Tampa Bay BayCare has an in-patient unit	Florida Hospitals in this region do not have psychiatric or substance abuse services
Heart disease & stroke	American Heart Association American Stroke Association	Cardiac programs at nearly all Tampa area hospitals including Florida Hospitals

Health Issue	Community Assets & Programs	Florida Hospital Assets & Programs
Social & mental health – suicide (not-for-profit centers only)	Memorial Hospital of Tampa – inpatient St. Joseph’s Hospital Behavioral Health Center – inpatient and Baker Act center Morton Plant North Bay Hospital Recovery Center – inpatient and Baker Act center Tampa Community Behavioral Health – inpatient Northside Mental Health Center – outpatient Agency for Community Treatment Centers (ACTS) – inpatient and outpatient Trinity Behavioral Health Center West Pasco Campus Crisis Center of Tampa Bay Crisis Center suicide prevention services including teen programs & 211 American Foundation for Suicide Prevention – Tampa Bay chapter Tampa Bay Suicide Prevention Task Force Florida Suicide Hotlines – www.Suicide.org	Florida Hospitals in this region do not have psychiatric services
Transportation – LTAC families	N/A	Connerton LTAC provides shuttle service from hotels to LTAC for patient families
Transportation – general	Pasco County Public Transportation Hillsborough Area Regional Transportation (HART)	N/A
Low Education/Literacy Rate		
Low-income /Poverty	DOH	
Food Insecurity/Access to healthy Food	SNAP YMCA food van	

14. PRIORITY SELECTION

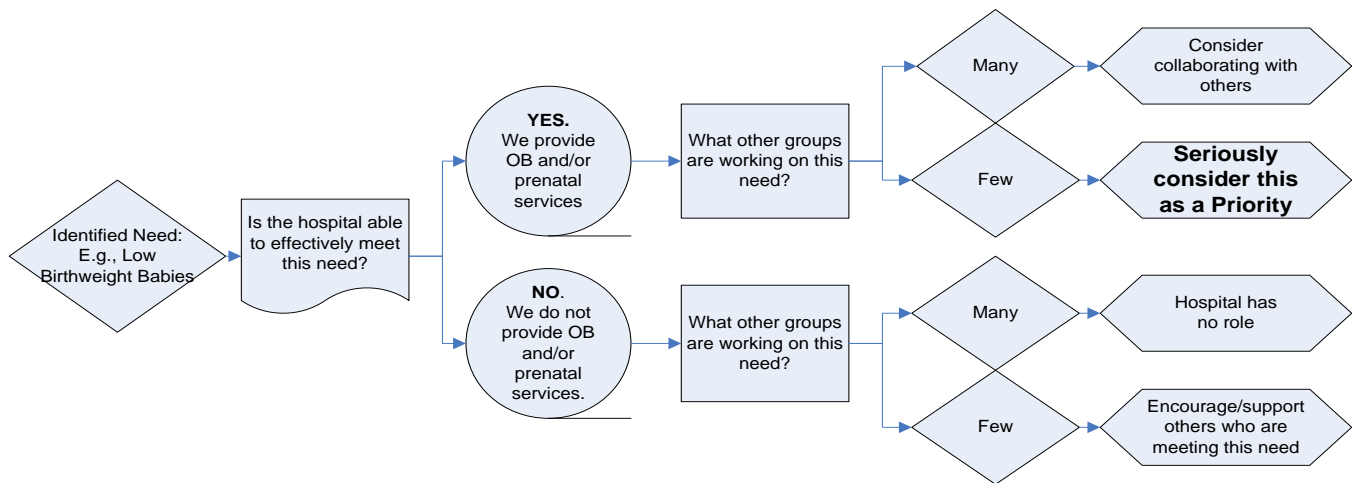
As noted in the DATA SUMMARY section above, the primary and secondary data, along with the ASSET INVENTORY, were used to narrow down the top areas of significant community health need for the Connerton LTAC community. This discussion and decisions took place at the Connerton LTAC Community Health Needs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

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

15. DECISION TREE

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

1. How acute is the identified issue in the region?
2. How acute is the identified issue in the primary service area, the immediate area around Connerton LTAC, and the over-65 population?
3. Are other community resources/organizations already addressing the need? (see section 13 Asset Inventory)
4. Can Connerton LTAC effectively influence the issue?
 - a. Does Connerton LTAC offer related services?
 - b. Does Connerton LTAC have the ability to influence the issue through the implementation/expansion of programs, services, and other actions?



16. PRIORITIES DETERMINED BY THE COMMUNITY HEALTH NEEDS ASSESSMENT COMMITTEE

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

While not noted in the table below, the Committee had a lengthy discussion about the unique nature of the facility. They noted that Connerton LTAC is not a “community” hospital with a defined geographical service area. This created challenges in determining who, other than the hospital’s patients, the “community” really was. They also said Connerton LTAC is the only such facility in the service area and has a 95% occupancy rate – and cited access to LTAC care as a major issue.

The following chart/worksheet reflects the Committee’s effort and recommendations.

(High, Medium or Low)							
Health Issue	Acuity Level in PSA	Acuity Level in Pasco County	Acuity Level in Hillsborough County	Addressed by other Community Groups?	FHCN-LTAC Capacity to Impact?	Issue Selected Yes or No	Rationale Yes or No
Obesity - Diabetes	H	H	H	Y	Y	Y	LTAC can refer to other FH facilities, LTAC may address in Community Benefit programs such as Complete Health Improvement program, and Creation Health
Respiratory Diseases	H	H	H	Y	Y	Y	LTAC may partner with community agencies
Lack of Access to Healthcare	H	M	M	Y	N	N	No LTAC capacity
Heart Disease/Stroke	H	H	M	Y	N	N	LTAC can refer to other FH facilities
Smokers (Adult)	H	H	M	Y	Y	Y	LTAC may partner with and refer patients to multiple community resources for cessation
Low education/Literacy rates	H	H	M	N	Y	Y	Connerton LTAC has the opportunity to partner with community agencies to increase health literacy
Access to Dental Care	M	H	M	Y	N	N	No LTAC capacity, not a patient need.
Low-income/poverty	M	M	M	Y	N	N	No LTAC capacity
Access to Healthy Food	M	M	M	Y	N	N	LTAC does not provide similar lines of services

17. COMMUNITY HEALTH PRIORITIES FOR CONNERTON LTAC

The Community Health Needs Assessment Committee's top priorities for Florida Hospital at Connerton LTAC are:

1. Obesity/Diabetes
2. Respiratory Diseases
3. Smoking Cessation
4. Health Education

18. CONNERTON LTAC COMMUNITY HEALTH PLAN

After identifying the priority issues for Florida Hospital at Connerton Long Term Care facility, the Community Health Needs Assessment Committee will develop a Community Health Plan (implementation strategies) to address the top priorities defined in the Needs Assessment. The Community Health Plan (CHP) will be published on the hospital's website along with the 2016 CHNA Report.

19. WRITTEN COMMENTS

Connerton LTAC did not receive any **written comments** regarding the 2014 CHNA Report nor CHP.

20. EVALUATION OF THE STRATEGIES UNDERTAKEN IN THE 2013 COMMUNITY HEALTH PLAN

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

Florida Hospital Connerton LTAC (FHC or Connerton LTAC) is a long-term acute care hospital located in rural Pasco County, Florida. When FHC conducted its most recent Community Health Needs Assessment, its Community Advisory Committee noted the unique nature of the Connerton LTAC facility. FHC does not have an Emergency Department and is not a "community" hospital with a defined geographic service area. In 2013, patient referrals came from 25 other hospitals; patients themselves came from 48 zip codes mostly in, but not limited to, Florida. This remained the case in 2015.

Florida Hospital has two acute care hospitals close to Connerton LTAC: Florida Hospital Wesley Chapel (16 miles) and Florida Hospital Zephyrhills (29 miles).

Priority: Family/caregiver Burnout and Compassion Fatigue

Because the majority of Connerton LTAC patients have undergone traumatic events (such as car accidents, brain injuries, multiple organ failures and the like), Connerton LTAC's average patient stay is nearly a month. This leads to a higher-than-average rate of patient frustration, family/caregiver burnout and family/staff compassion fatigue.

2015 Update: FHC's leadership team has been trained in Critical Incident Debriefing, and now works with patients, families and employees. The Critical Incident Debriefing service will be expanded to community caregivers and first responders in 2016. Connerton LTAC also implemented a Caring for Caregivers program for patient families, community, first responders and staff. The goals are to help LTAC families reduce their

stress levels. Program components include screening for stressors, counseling and support, and an updated reporting system for families who have concerns about their loved ones. Chaplains and other staff have had enhanced training for working with families, and the staff has created a new healing environment (music, art, etc.) that will also enhance patient and family care. The CREATION Health wellness and lifestyle program is offered to family members and staff. It focuses on eight principles: Choice, Rest, Environment, Activity, Trust in God, Interpersonal Relationships, Outlook and Nutrition.

Priority: Community Support and Referrals for Chronic Disease - Diabetes

2015 Update: While many LTAC patients have diabetes, the condition is not their primary reason for being at Connerton LTAC, so such patients are linked with other community resources at discharge. Patients and family members with diabetes are referred to community resources such as the American Diabetes Association and to other Florida Hospital locations that offer diabetes education and treatment. Employees and leadership provide financial support to the American Diabetes Association and support their 5K Walk.

Priority: Community Support and Referrals for Chronic Disease - Respiratory/Asthma

2015 Update: Patients and family members with respiratory diseases are referred to community resources such as the American Lung Association and to other Florida Hospital locations that offer smoking cessation and education. Employees and leadership provide financial support to the American Lung Association and support their "Fight for Air" Climb.

Priority: Transportation and Lodging for LTAC Families

Some family members of patients come from long distances in Florida or from out-of-state. They may not have rental cars, and the nearest lodging is 13 miles away.

2015 Update: Connerton LTAC provides family transportation to LTAC families without automobiles. FHC is also working with the Pasco Economic Development Commission to find lodging solutions (for families) that are closer to Connerton LTAC.

Priorities Considered but Not Selected

The following issues were noted in other Community Health Needs Assessments in the greater Tampa area. For most of these issues, Connerton LTAC does not have operational capacity or patient need.

- Access to primary care / un- and underinsured: no LTAC capacity; not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources;
- Access to dental care: no LTAC capacity; not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources;
- Cancer: no LTAC capacity, not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources;

- Communicable diseases and communicable diseases reporting: Health Department and acute care hospital responsibility; not a patient need and community resources;
- Immunizations for pre-K and general public: no LTAC capacity; not a patient need;
- Health literacy & education: no LTAC capacity; not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources;
- Heart disease & stroke: no LTAC capacity; not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources;
- Infant death & low birth weight babies: no LTAC capacity; not a patient need;
- Injury, violence and motor vehicle accidents: no LTAC capacity for prevention;
- Obesity: no LTAC capacity; LTAC can make referrals to other Florida Hospital facilities and community resources;
- Substance abuse: no LTAC capacity; not a patient need; LTAC can make referrals to other Florida Hospital facilities and community resources; and
- Suicide: no LTAC capacity; not a patient need.