

Community Health Needs Assessment

December 2015

Presented by

crescendo

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Executive Summary

Background - History of Boca Raton Regional Hospital

Born out of compelling community need in 1967, Boca Raton Regional Hospital is a not-for-profit, advanced tertiary medical center with 400 beds, over 2,100 employees and more than 800 primary and specialty physicians on staff. The Hospital is a recognized leader in Cardiovascular Care, Oncology, Women's Health, Orthopedics, Emergency Medicine and the Neurosciences, all

of which offer state-of-the-art diagnostic and imaging capabilities. Boca Raton Regional Hospital is accredited by The Joint Commission and is one of only four hospitals in Palm Beach County to be designated by the Florida Agency for Healthcare Administration (AHCA) as a Comprehensive Stroke Center.



Our Mission:

Boca Raton Regional Hospital delivers the highest quality patient care with unrelenting attention to clinical excellence, patient satisfaction and patient safety. Our team of professionals demonstrates unparalleled compassion and commitment to those we serve.

Our Vision:

To be the preeminent regional leader in healthcare delivery and the hospital of choice for patients, physicians, employees and volunteers.

History:

In 1962, Gloria and Robert Drummond's children, Debbie and James Randall, were tragically poisoned and died before reaching medical attention 30 minutes away. The small community rallied to build a hospital "of its own" to ensure that area residents would have access to quality healthcare and life-saving emergency care when they needed it the most. Eighteen passionate and dedicated women joined with Gloria, who led the effort to raise funds, and formed the Debbie-Rand Memorial Service League. From bake sales and fiestas to a black-tie Ball, the community raised the funds to build a Hospital that would develop into a nationally ranked medical center. The overriding principle that guided the creation of Boca Raton Regional Hospital to provide quality healthcare to the community it serves, resides with us today.

Recognizing the importance of reaching out to the community, the Boca Raton "Community" Hospital Board of Trustees launched the Community Outreach Program in July 1998. Today, coupled with support from the Boca Raton Regional Hospital Foundation, Boca Raton Regional

Community Outreach provides grants, sponsorships and educational and wellness programs to

fill local unmet needs.
Initiatives addressing the
Community's Health
Needs such as Fall
Prevention & Medical
Management are offered to
the community free of
charge. Our Community
Health Van provides free
screenings & connects high



risk patients back into Primary Care at the FAU Residency clinic. These programs also give Boca Raton Regional Hospital a significant way to become a collaborative partner with are non-profits to build a strong, healthy and productive community.



While our physicians, nurses, staff and volunteers have a profound impact on the lives and health of the community we serve on a daily basis, our Community Outreach programs provide essential tools for our employees to go beyond the brick-and-mortar Hospital building to not only educate and take care of our neighbors, but to act as ambassadors for this great institution.



Summary of the Research Approach and Results

The research analysis of the BRRH service area tells an interesting story. The community health needs are framed by the area demographics and growth trends, influenced by social and physical environment factors, and further impacted by risky or protective lifestyle behaviors. The CHNA report presents key data that provide insight to each of these areas. Highlight summary bullet points appear below:

- **CHNA Leadership**: Boca Raton Regional Hospital developed a community-driven CHNA leadership team that provided project oversight, feedback regarding perceptions of area health needs, data evaluation, and other guidance throughout the CHNA process. These individuals provided a breadth of community health vision, knowledge, and power to impact the well-being of the service area. See page 7.
- Methodology: The Boca Raton Regional Hospital CHNA methodology includes a combination of quantitative and qualitative research methods designed to evaluate perspectives and opinions of area stakeholders and healthcare consumers including those from underserved populations. The methodology used helps prioritize the needs and establish a basis for continued community engagement. It include modalities such as leadership and community group discussions, quantitative community survey, secondary data analysis, and the modified Delphi Method (for prioritization). See page 8.
- Description of the community: The BRRH service area includes over 1.2 million people and spans two counties Palm Beach and Broward. The Primary Service Area (PSA) and Secondary Service Area (SSA) are defined by a group of zip codes 23 in the PSA, and 16 in the SSA. Many of the tables shown in the secondary research sections provide insight on the demographic and risk profile characteristics of each county and, where possible, the specific service areas. See page 12.
- **Demographics:** The BRRH service area is characterized by relatively high levels of affluence, a high median age (especially in the PSA), and rapid population growth especially among seniors (expected to increase by nearly 100,000 between 2010 and 2020). In an offestting way, the higher median income in the PSA may tend to reduce the need for services while the older median age tends to increase the need for services.
 - Community health is impacted by several factors demographic and otherwise. The BRRH demographics provide a framework within which health needs data can be better understood. See page 14.
- <u>Health status profile and disease burden</u>: The population of the BRRH service area exhibits better health outcomes than the state as a whole. For many measures, Palm Beach County rates tend to be slightly better than for Broward County though there are many notable exceptions. See page 20
- <u>Leading causes of death</u>: The causes of death in Palm Beach and Broward Counties are ones commonly found elsewhere, as the leading causes of death across the U.S. as in the service area counties cancer, heart disease, stroke, unintentional injuries,

- and chronic lower respiratory disease. However, there are some interesting variations between Broward and Palm Beach Counties. See page 21.
- Chronic disease burden: The U.S. Centers for Disease Control and Prevention (CDC) has said that chronic diseases are the most common and costly of all health problems, but they are also the most preventable. Hundreds of thousands of people in Palm Beach and Broward Counties are afflicted with chronic diseases, such as diabetes or asthma or other conditions that often precipitate serious health events, such as high cholesterol, hypertension, and obesity. There is an ongoing opportunity to impact this aspect of health in the community. See page 50.
- Social and physical environment factors: The southeast Florida environment Broward and Palm Beach Counties, in particular afford residents with a large array positive environmental and lifestyle opportunities. As such, the measures that reflect the quality of the physical environment are generally better in the two county service area than the state as a whole. Social factors such as poverty and violent crime are also favorable when compared to the Florida average. See page 52.
- Risk and protective lifestyle behaviors: The BRRH service area has a relatively high number of healthcare providers positively impacting access (relative to the state as a whole). However, even though the Palm Beach County population exhibits healthy behaviors (e.g., regular pap testing, colon screening, properly taking blood pressure medication) somewhat better than the state, Broward County residents do not do so and are typically less likely to have healthy behaviors better than the Florida average. See page 59.
- Leadership group discussions: Four focus groups were held with the Leadership Group (3) and Community stakeholders (1). At the outset of the project, participants provided feedback on the project methodology and the strategic purpose of the community assessment, offered their insights regarding effective ways to gather pertinent information (quantitative and qualitative), and helped generate an initial list of community needs, available resources, and potential service gaps. Typically, the discussion group perceptions of community health needs were similar to the needs reflected in the secondary data and identified in the community survey. See page 71.
- <u>Community survey</u>: Boca Raton Regional Hospital and Crescendo conducted an online community survey in 2015 in order to collect direct consumer opinion regarding community needs. The survey was administered by telephone to 300 area residents. Survey respondents indicated that the highest priority needs community needs include coordination of care between providers, access to affordable care, screening for chronic conditions, mental health, and substance abuse. There were, however, variations among age groups. See page 67.

- Community needs prioritization process (the Modified Delphi Method):
 - Leadership group members participated in a prioritization process in order to rate and rank 50 community needs identified in research conducted earlier in the BRRH CHNA project secondary research, leadership and community group discussions, and consumer surveys. Leadership Group members rated each of the needs on a 5-point scale (with 1 = the greatest need for more focus and attention) during the prioritization process in order to develop a ranked list. See page 72.
- List of prioritized community health needs: Several methodologies were combined to develop a comprehensive and prioritized list of community needs. The needs tend to focus around five core themes: behavioral health services, care coordination services, senior services, obesity, and access to care. Note that the area has a physician concentration better than the Florida and U.S. average, so "access" often refers to issues such as wait times, transportation, patient support services, education, and others.

The prioritized needs may also be segmented by operational category: (1) needs within service lines (e.g., behavioral health, senior services, obesity) and (2) needs that cut across service lines service lines such as care coordination and access to care. These are explored later in the document.

• The BRRH developed a prioritized list of community health needs summarized below and as seen on page 74.

<u>Rank</u>	Health Need
1	Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse
2	Care coordination for people with multiple co-morbid conditions
3	Access to primary care physician services
4	Seniors' health services – Care coordination
5	Substance abuse – Education and prevention
6	Nutrition and healthy eating education
7	Obesity – Care coordination
8	Obesity – Education and prevention
9	Affordable healthcare services including prescription medications
10	Substance abuse – Care coordination
11	Access to specialty care physician services
12	Substance abuse – Intervention and treatment
13	Obesity – Programs to help with self-management
14	Dementia spectrum services for Alzheimer's, Parkinson's Disease, Lewy Body, and others

• <u>Implementation plan considerations</u>: The Community Leadership members (with the guidance and support of Melissa Whelchel, Manager, Population & Corporate Health of BRRH) indicated that ongoing strategies that address high priority community health issues effectively encourage continued engagement of diverse community leaders while simultaneously addressing several needs identified in the CHNA.

In addition, several newer areas were identified for additional focus and attention. When considering moving forward with the Implementation Plan (to be developed by BRRH after the CHNA is approved), the following general strategies may help support the hospital's efforts to improve community health. See page 75.

• <u>Improving access to care</u>:

• Implementation strategies

The Community Leadership members indicated that ongoing strategies that address high priority community health issues may effectively encourage continued engagement of diverse community leaders while simultaneously addressing several needs identified in the CHNA. In addition, several newer areas were identified for additional focus and attention. See page 75.

When considering moving forward with the Implementation Plan (to be developed by Boca Raton Regional Hospital after the CHNA is approved), the following general strategies have the ability to simultaneously address several of the Prioritized Community Needs.

- Improving access to care, which includes integrated behavioral health (including substance abuse) services and medical care.
- Providing education, communications, and enhanced information exchange among providers
- Expanding care coordination services for a broad range of seniors' chronic conditions and other health issues that may benefit from a higher level of personal contact.
- Addressing chronic diseases, obesity, and related issues
- Supporting wellness and preventive services

Implementation Plan strategies will be developed and communicated under separate cover.

CHNA Community Participants

Boca Raton Regional Hospital developed a community-driven CHNA leadership team that provided project oversight, feedback regarding perceptions of area health needs, data evaluation, and other guidance throughout the CHNA process. These individuals provide a breadth of community health visions, knowledge, and power to impact the well-being of the service area. The Leadership Group included the following members:

- Dr. Alina Alonzo, Palm Beach County Health Department, Medical Director
- Nelsy Andros, Dixie Manor/Housing Authority, Executive Director
- James S. Gavrilos, Boca Helping Hands, Executive Director
- Dr. Allan Goldstein, Community Representative, Physician
- Abby Goodwin, Palm Healthcare Foundation, VP of Community Investments
- Patricia Gustafsson, Volen Center, Director of Clinical Services
- Vicki Katz, Faulk Center For Counseling, CEO
- Fire Chief Daniel Millstone, Palm Beach County Fire Rescue, Chief of EMS, Palm Beach County Fire Rescue
- Dick Pollack, YMCA, CEO & President
- Fire Chief John Treanor, City of Boca Raton Fire Rescue, Chief of EMS, City of Boca Raton Fire Rescue
- Rita Thrasher, Boca Raton's Promise, President and CEO
- DeAnna Warren, Genesis, CEO
- Tenna Wiles, Palm Beach County Medical Society / Project Access, CEO

Boca Raton Regional Hospital Leaders (P = Project Leadership Team)

- Jerry Fedele, President and CEO
- Dan Sacco, Vice President, Strategic Affairs and Payer Relations (P)
- Dawn Javersack, Chief Financial Officer (P)
- Mark Larkin, President, Foundation (P)
- Dana Preston, Health Navigator, Population & Corporate Health (P)
- Melissa Whelchel, Director of Strategic Development (P)
- Rudy Bracilli, Executive Director, Revenue Cycles Services
- Melissa Durbin, Vice President and Chief Nursing Officer
- Gwen Collins, Director, Pharmacy
- Jan Dymtrow, Community Services Coordinator
- Genie Leiberman, Director, Outpatient Rehabilitation Services
- Dr. Joseph Ouslander, Prof. of Clinical Biomedical Science / Chair, Dept of Integrated Medical Science
- Dr. Charles Posternack, Chief Medical Officer
- Donna Ruckers, Case Manager, Resource
- Mindy Shikiar, Vice President, Ambulatory Services & Bus. Developmnt.
- Dr. Alan Stern, Medical Director of Community Outreach
- Judie Tippett, Director, Emergency Services
- Jenny Watts, Director, Home Health

Assessment Methodology

The Boca Raton Regional Hospital CHNA methodology includes a combination of quantitative and qualitative research methods designed to evaluate perspectives and opinions of area stakeholders and healthcare consumers – including those from underserved populations. The methodology used helps prioritize the needs and establish a basis for continued community engagement.

The major sections of the methodology include the following:

- Strategic secondary research
- Qualitative discussion groups with Leadership Team members
- Community surveys
- Needs prioritization using a modified Delphi process

Each of the components of the CHNA methodology is described below.

Strategic secondary research. This type of research includes a thorough analysis of previously published materials that provide insight regarding the community profile and health-related measures. The "data source examples" table is shown below while others follow or are included in the appendices of this report.

Data Source Examples

Standard Demographics

- O U.S. Census
- O Census Data and State Health Databases
- O National Cancer Institute.

• Social and Physical Environment

 State of Florida, Department of Health, Division of Public Health Statistics and Performance Management, FloridaCharts.com database.

Health Status Profile

- O National Cancer Institute.
- Community Commons database (University of Missouri).
- Behavioral Risk Factor Surveillance System Survey (BRFSS)

Risk and Protective Lifestyle Behaviors

- O Community Commons database.
- Robert Wood John Foundation

Data Goal

Strategic secondary research data goals include properly framing the service area in terms of core domains: demographics, social and physical factors, health status profile, and risk and protective lifestyle behaviors. Combined, the data helps construct a framework for understanding and evaluating community needs.

In addition, goals include developing a better understanding of community health, morbidity and mortality data, key health-related factors that impact the BRRH service area, and disease-based incidence levels that exceed the Florida or national averages.

Qualitative discussion groups with Leadership Team members included healthcare consumers, service providers, and other community opinion leaders. The discussion groups represent a span of healthcare consumers in the BRRH service area, as well as expert leaders from within the BRRH system. Although not all groups were represented at each meeting, information and insights were gathered either from their direct participation in a group setting or electronically.

A sample of the community groups who were represented on the Leadership Group (noted above) and contacted in the research include: Boca Raton Regional Hospital Boca Helping Hands Boca Raton's Promise City of Boca Raton Fire Rescue City of Boca Raton Police District of Deerfield Beach Fire Rescue Dixie Manor/Housing Authority Faulk Center For Counseling Florida Atlantic University Genesis Palm Beach County Fire Rescue Palm Beach County Medical Society/Project Access Palm Healthcare Foundation Volen Center YMCA	Data Source	Data Goal
	A sample of the community groups who were represented on the Leadership Group (noted above) and contacted in the research include: Boca Raton Regional Hospital Boca Helping Hands Boca Raton's Promise City of Boca Raton Fire Rescue City of Boca Raton Police District of Deerfield Beach Fire Rescue Dixie Manor/Housing Authority Faulk Center For Counseling Florida Atlantic University Genesis Palm Beach County Fire Rescue Palm Beach County Health Department Palm Beach County Medical Society/Project Access Palm Healthcare Foundation	Discussion group goals involve creating a broad list of community health needs. To thoroughly do so, the research includes extensive input from community groups, all in an effort to "cast a broad net" across the service area, especially among the

Community surveys. A large sample (N=300) telephone survey of Community Health Needs was conducted in BRRH's primary service area (PSA) and secondary service area (SSA) using a random digit dialing technique – stratified by age group to better reflect the actual mix of healthcare consumers in the area. The survey respondents included 18% age 18 to 44, 47% age 45 to 64, and 35% age 65 and older.

Data Source	Data Goal
The community survey was conducted in October 2015 among PSA and SSA adult residents. A copy of the survey is included in Appendix A.	The goal of the survey was to engage healthcare consumers – especially those who may be higher-risk for health care services. The results of the surveys were integrated with the results from the data-driven secondary research, qualitative interviews and group discussions, and other research to help form the comprehensive list of community health needs.

Based on the breadth of quantitative and qualitative research techniques described above, an extensive list of 50 community needs was identified. As per the requirements of the Affordable Care Act, BRRH prioritized the list. The methodology used to prioritize the list is described below.

<u>Needs prioritization using a modified Delphi process.</u> The Delphi Method was pioneered by the RAND Corporation in the 1950s and 1960s. It is a quantitative and qualitative survey method that is used to collect, distill, and reach prioritized consensus around creative ideas and/or qualitative issues and questions.

In this phase of the prioritization research, Leadership Group members rated health initiatives and provided qualitative feedback. The modified Delphi method included three steps.

- Crescendo aggregated the lists of needs identified in the community survey, Leadership Group meetings, and secondary data sources.
- Leadership Group members were asked to complete a survey in which they were asked to quantitatively and qualitatively evaluate each of the 50 community needs identified in earlier research and to submit their responses to Crescendo. They were also asked to provide feedback regarding the rationale for their rating.
- Crescendo rank-ordered the needs based on the average score and qualitative comments.
- The results were presented to Boca Raton Regional Hospital leadership in order to conduct a final review.

Data Source	Data Goal
Modified Delphi process as described above.	The goal of the modified Delphi process was to prioritize the community health needs and to build consensus among the Leadership Group.

Research Results

The research results associated with the methods above are represented in the following sections. This summary includes the prioritized list of community health needs for the Boca Raton Regional Hospital service area.

Secondary Research Data

"Boca [Raton] is a great place to live. We have a healthy community here. We have a lot of resources that many other areas do not. However, it is important for us to realize that even in our own service area, there are people who really need some added focus. The hospital truly has a heart to help all people — especially those most needy — in the region."

- Leadership Group member

Population, age, and other demographic measures, as well as social, environmental, and risk / lifestyle factors impact the health status of a community. The following analysis highlights the growing need for healthcare services in the area, as well as identifies structural causes of health care service usage.

As identified in the most recent 2010 U.S. Census (and 2015 estimates), service area residents tend to have several characteristics that heighten the urgency of developing a clear, proactive approach to meeting the health needs in their service area (e.g., high median age, diverse median household income, and a broad degree of educational attainment). In order to analyze these and other characteristics, the domains included in the Boca Raton Regional Hospital secondary research include the following:

- Definition and mapping of the service area
- Demographics of service area
- Health status profile and disease burden
- Social and physical environment factors
- Risk and protective lifestyle behaviors

The tables and discussion in the following sections present key data reflecting these summary points and some of the impact on community needs and the prioritization of issues. The appendices contain additional data tables and other resources, where helpful.

Description of the Community Served

The BRRH service area contains over 1.2 million people and is contained within two counties – Palm Beach and Broward. Many of the following tables provide insight on the demographic and risk profile characteristics of each county and, where possible, the specific service areas.

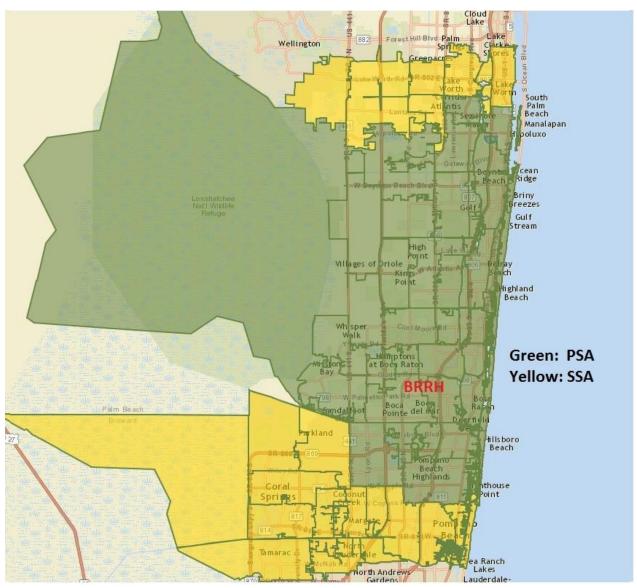
The PSA and SSA are defined by a group of zip codes – 23 in the PSA, and 16 in the SSA.

PSA	SSA
(Dark green)	(Yellow)
33433	33467
33496	33067
33434	33062
33432	33076
33446	33063
33487	33463
33486	33066
33437	33071
33484	33065
33431	33069
33428	33060
33442	33321
33445	33449
33498	33068
33441	33460
33436	33461
33483	
33064	
33444	
33472	
33435	
33073	
33462	
33426	
33473	



BRRH Primary and Secondary Service Area Detailed Map

The PSA and SSA (combined) include 1,258,835 people (2015 U.S. Census Bureau estimate).



^{*}Note: In the map above, the Boca Raton Regional Hospital PSA is shaded in the green shaded area and the SSA is shaded in the yellow area.

Demographics of the Service Area

The BRRH service area is characterized by relatively high levels of affluence, a high median age (especially in the PSA), and rapid population growth.

The following BRRH service area demographics provide a framework within which health needs data can be better understood. Three core factors that frame community health include population, household income, and age. Age and income can be surrogates for education and economic stability, and they may also impact access to healthcare.

Boca Raton Regional Hospital's service area has substantial socioeconomic and demographic diversity is rapidly changing. From 2000 to 2015 the population grew nearly 14%.

Core Summary Demographics								
Area	Median Age							
Primary Service Area	684,119	14.23%	\$52,457	49.0				
Secondary Service Area	574,716	13.75%	\$50,602	40.9				
Total	1,258,835	14.01% \$51,610		45.3				
Broward County	1,869,2351	15.17%	\$51,5742	39.8				
Palm Beach County	1,397,710 ³	23.57%	\$52,878 ⁴	43.7				
Total	3,266,945	18.62%	\$52,132	41.5				

Sources: U.S. Census Bureau, 2015; ESRI, 2015.

- The PSA has a slightly higher median income and much higher median age than the SSA. Both factors (i.e., age and income) typically have a large impact on the demand for healthcare services. In this case, the higher income in the PSA may tend to reduce the need for services while the older median age would tend to increase the need for services.
- The county-level population change is smaller than in the service area comparison, as much of the growth in Palm Beach County is outside of the BRRH service area.
- The Palm Beach County population has increased by approximately 24% between 2000 and 2015; Broward County increased at a slower pace (15%).
- Falling death rates result in people living longer, and the growth in the seniors segment is, in part, due to this positive trend.

¹ 2014 Population estimate, http://quickfacts.census.gov/qfd/states/12/12011.html

² 2014 Population estimate,

http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk

³ 2014 Population estimate, http://quickfacts.census.gov/qfd/states/12/12099.html

⁴ 2014 Population estimate,

http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk

Age Groups

The BRRH PSA is characterized by similar percentages of people across several age groups (15 to 44, 31%; 45 to 64, 26%; and, 65 and over, 28%) suggesting a need for a broad range of services. The secondary service area is more heavily concentrated in the younger age groups.

Service Area Age Breakdown							
			Age G	roup			
Area	2015 Population	Under 15	15 to 44	45 to 64	65 and over	Median Age	
Primary Service Area	684,119	14.0%	31.2%	26.2%	28.2%	49.0	
Secondary Service Area	574,716	17.7%	37.7%	27.0%	17.7%	40.9	
Total	1,258,835	15.7%	34.2%	26.6%	23.4%	45.3	
Broward County ⁵	1,869,235	18.0%	39.5%	27.8%	14.8%	39.8	
Palm Beach County	1,397,710	16.4%	35.2%	26.5%	22.2%	43.7	
Total	3,266,945	17.3%	37.7%	27.2%	18.0%	41.5	

- A high percentage of people (28%) in the PSA are over 65 years old.
- The broader Broward County / Palm Beach County region includes more than three million people with a median age of about 41 years.

Seniors Population Trends

The number of seniors – the highest healthcare utilization group – is projected to increase by nearly 100,000 people between 2010 and 2020. The rapid growth of this high need segment of the population is likely to drive service needs in many segments.

Number of Senior (65 and older) ⁶									
	2010 2015 2020 Change 2010 from 2020								
Primary Service Area	161,702	194,974	220,665	36.5%					
Secondary Service Area	87,921	101,725	121,602	38.3%					
Total	249,624	269,699	342,266	37.1%					
Broward County	244,514	268,660							
Palm Beach County	278,062	301,714							
Total	522,576	570,374							

Source: U.S. Census Bureau, 2015.

• Between 2010 and 2020, the seniors' percentage of the total PSA population is expected to increase 36.5% (nearly 60,000 seniors) -- an additional 92,000 seniors in the PSA and SSA.

⁵ U.S. Census Bureau, http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF

⁶ Ibid.

Few (approximately 10%) Palm Beach and Broward County seniors live below 100% of the FPL; however, the percentage still represents nearly 60,000 people.

Core Measures of Seniors								
Population Mean Percent in Poverty Percent with Percent vide Area 65+ Earnings (below 100% FPL) College Degree Disabil								
Broward County	268,660	\$50,117	12.7%	23.7%	36.8%			
Palm Beach County	301,714	\$59,241	8.8%	33.1%	31.4%			
Total	570,374	\$54,946	10.6%	28.7%	33.9%			

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

- There are over 500,000 seniors in the two-county area—approximately half of which are in the BRRH PSA or SSA.
- Income and educational attainment levels among seniors are similar to those in the counties as a whole.
- Approximately one in three seniors live with a disability.

Income

The BRRH service area is an affluent region with median household income is over \$50,000, yet approximately one in three service area residents have household income below \$35,000. Income levels in the PSA are similar to those in the total Palm Beach County area; SSA income levels are similar to those in Broward County.

Income Breakdown									
			House	hold Income	Group				
Area	<\$15,000	\$15,000 - \$25,000 - \$35,000 - \$50,000 - \$75,000 - \$15,000 - \$34,999 \$49,999 \$74,999 \$99,999 \$100,000+							
PSA	11.8%	11.6%	10.4%	13.8%	17.1%	11.2%	24.1%	\$52,457	
SSA	11.8%	12.4%	10.6%	14.6%	18.6%	11.4%	20.7%	\$50,602	
Total	11.8%	12.0%	10.5%	14.2%	17.8%	11.3%	22.5%	\$51,610	
Broward County	12.6%	11.1%	10.8%	14.1%	17.6%	11.6%	22.1%	\$51,574	
Palm Beach	11.6%	11.0%	10.7%	14.1%	17.3%	11.4%	23.8%	\$52,878	
Total	12.2%	11.1%	10.8%	14.1%	17.5%	11.5%	22.8%	\$52,132	

Source: U.S. Census Bureau, American FactFinder, 2015.

- Nearly one in four (24%, 165,000) PSA residents have income over \$100,000.
- Although the SSA has a slightly lower percentage of the population with incomes over \$100,000, otherwise, the income distribution is fairly similar to that of the PSA.
- The median household income and the distribution per income group in Palm Beach County and the PSA are very similar.

Educational Attainment

Consistent with higher household income, one in three service area residents over age 25 have earned a Bachelor's Degree of higher (PSA, 36.4%; SSA, 28.9%).

Educational Attainment ⁷									
	Less than 9th	High	Some College,	Bachelor's	Master's				
Area	Grade	School/Equivalent	no degree	Degree	Degree or Higher				
PSA	3.8%	25.5%	20.4%	22.9%	13.5%				
SSA	6.5%	28.2%	20.7%	19.5%	9.4%				
	0.5%	20.270	20.7%	19.5%	9.4%				
Total	5.0%	26.7%	20.5%	21.3%	11.6%				
Broward County	5.2%	27.8%	20.5%	19.4%	10.8%				
Palm Beach County	5.9%	26.2%	20.4%	20.4%	12.3%				
Total	5.5%	27.1%	20.5%	19.8%	11.4%				

Source: U.S. Census Bureau, American FactFinder, 2015.

- Most (95%) of service area people over age 25 have earned a high school diploma or complete college work.
- More than one in ten have completed a Masters' Degree of higher.
- Palm Beach County residents tend to have more education than those in Broward County.

Race, Ethnicity, and Gender

Although the PSA, SSA, and both represented counties have a majority of white residents, at least one in four residents are of other races. Hispanics represent a sizeable portion of Broward County (27.6%) and a smaller percentage (15.7%) in Palm Beach County.

Race and Ethnicity, and Gender									
Race / Ethnicity							Gender		
Area	White	Black or African American	Asian	All others	More than one race	Hispanic	Male	Female	
PSA	75.8%	15.7%	2.6%	5.9%	2.4%	15.7%	47.5%	52.5%	
SSA	63.8%	23.1%	3.5%	9.6%	3.4%	27.6%	48.5%	51.5%	
Total	70.3%	19.1%	3.0%	7.6%	2.9%	21.1%	48.0%	52.0%	
Broward County	63.2%	27.5%	3.4%	5.9%	2.7%	26.4%	48.5%	51.5%	
Palm Beach County	75.5%	17.7%	2.5%	4.3%	2.0%	20.0%	48.4%	51.6%	
Total	68.5%	23.3%	3.0%	5.2%	2.4%	23.7%	48.5%	51.5%	

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

Crescendo Consulting Group

⁷ Ibid.

- Approximately one in six people (15.7%) in the PSA are African American; another roughly 10% represent other groups.
- More than one in three people in the SSA are African American, Asian, or other races (36.9%).
- Hispanics represent more than one in five residents of the combined service area (PSA and SSA).
- The Palm Beach County ethnic breakdown is very similar to the PSA, and the Broward County breakdown is similar to the SSA across all ethnic groups.
- There are slightly more females than males in both service areas and both counties.

Additional Secondary Research Domains

One of the core research approaches included in the BRRH CHNA is secondary research that reviews established data regarding the most common causes of death, chronic disease incidence including mental health, and related issues. Some of the highlights reflected in the following sections include the points noted below:

- Current BRRH community health and outreach program are currently focused on many of the community needs identified through the secondary research (and other modalities).
- Broward and Palm Beach Counties are relatively affluent areas in which the list of the
 most common causes of death are similar to U.S. rankings, yet the incidence rates tend to
 be lower. Palm Beach County rates tend to be lower than for Broward County on many
 but not all measures.
- There are opportunities to provide additional attention and focus within select demographic groups or for disease specific conditions. For example, thyroid and Non-Hodgkin Lymphoma, NHL (in Palm Beach County) and thyroid, stomach, prostate, NHL, and liver (in Broward). Details provided in the following sections.
- There are high rates of people with chronic diseases areas in which enhanced care coordination services have positively impact outcomes with other health conditions.
- Medical and behavioral health issues are included in the list of higher priority community needs. Comorbidity of medical and behavioral health conditions may benefit from wraparound services that provide integrated care.

The following sections provide data that illustrates health status and outcomes in Broward and Palm Beach Counties.

Health Status Profile and Disease Burden

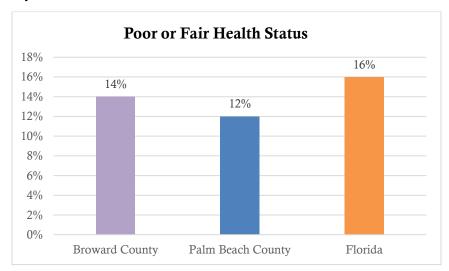
The population of the BRRH service area exhibits better health status than the state as a whole. For many measures, Palm Beach County rates tend to be slightly better than for Broward County though there are many notable exceptions.

Broward and Palm Beach County residents report fewer poor health outcomes in each of the four Health and Lifestyle indicators compared to the state.

Population Health and Lifestyle Indicators ⁸								
Poor or Fair Poor Physical Poor Mental Health Preventable Hospital Stays								
Broward County	14%	3.4	3.4	59				
Palm Beach County	12%	3.3	3.4	49				
Florida	16%	3.7	3.8	59				

- Although slightly better than the state rates on most measures, Broward County preventable hospital stays are on par with the state.
- All Palm Beach County rates are slightly better than the Broward County and Florida rates.

Fewer residents in Palm Beach County report "fair or poor" health status compared to Broward County and the state in total.



⁸ Metric Definitions and Sources:

[•] Poor or Fair Health Status; Poor physical health days (average number in past 30 days), Poor mental health days (average number in past 30 days) Community Commons, 2013,

[•] U.S. Centers for Disease Control, Community Health Status Indicators, wwwn.cdc.gov/CommunityHealth/homepage.aspx; Preventable hospital stays (per 1,000 Medicare enrollees); Medicare claims/Dartmouth Atlas; https://www.countyhealthrankings.org/health-factors/quality-care.

Most Common Causes of Death

In nearly all cases, the most common causes of death in Palm Beach and Broward Counties are below those of the U.S. as a whole. Rates also tend to be lower in Palm Beach County than Broward County (e.g., five of the top six; eight of the top 12). The list of the most common causes of death in the two county region is similar to the U.S.

However, due to the very low rates of heart disease, the order of the most common causes of death is different. In addition, there are further variations between Broward and Palm Beach Counties.

Most Frequent Causes of Death, 2014 ⁹ (Age-adjusted death rate per 100,000)									
Broward Palm Beach County County US									
Cancer	148.3	140.7	185.0						
Heart Diseases	147.5	124.4	193.3						
Stroke	44.2	29.7	40.8						
Unintentional Injury	32.4	39.1	41.3						
Chronic Lower Respiratory Disease	30.1	26.3	47.2						
Diabetes	14.4	12.5	23.9						
Alzheimer's Disease	13.9	21.1	26.8						
Kidney Disease	12.9	9.3	14.9						
Suicide	10.6	15.0	13.0						
Chronic Liver Disease	9.2	10.6	11.5						
Influenza & Pneumonia	8.3	7.3	18.0						
Septicemia Septicemia	7.5	6.7	12.1						

Source: FloridaCharts.com, http://www.floridacharts.com/FLQUERY/Death/DeathRate.aspx;

- In the U.S., heart disease is the leading cause of death. The national rate is approximately 55% higher than the Palm Beach County rate (31% higher than in Broward County).
- Cancer rates are also lower than national averages. In both service area counties, cancer causes more deaths than heart disease. Heart disease and cancer cause the death of more than five times as many people as the third most common cause of death (i.e., stroke).
- Cancer, heart disease, stroke, chronic lower respiratory disease, unintentional injuries, and diabetes are the six most common causes of death in Broward and Palm Beach counties with similar, but slightly different rank orders.

⁹ U.S. data is for 2013, http://www.cdc.gov/nchs/data/dvs/LCWK9 2013.pdf.

Rates among demographic groups vary – highlighting the opportunity to develop highly focused community health improvement strategies.

In Broward County, death rates for non-whites and whites are similar for cancer and heart diseases. However, they vary to a greater degree for several other causes of death such as stroke (non-whites rates are about 50% higher than for whites), diabetes (nearly twice as high for non-whites as whites), and CLRD (which is more than twice as high for whites compared to non-whites).

Causes of Death by Select Demographic Categories, Broward County, 2014 (Age-adjusted deaths per 100,000)									
	Total	Age under 45	Age 45 to 64	Age 65 and older	White	Non- white	Hispanic		
Cancer	148.3	9.4	178.4	848.4	149.5	140.8	115.0		
Heart disease	147.5	23.9	178.4	1,110.5	144.9	142.4	103.9		
Stroke	44.2	1.6	20.1	352.6	39.4	61.6	40.1		
Unintentional Injury	36.9	28.3	44.8	73.9	38.4	30.9	19.8		
Poisoning	10.3	9.6	16.1	3.9	13.9	3.6	4.7		
Motor Vehicle Accidents	9.8	8.5	11.9	12.7	9.2	11.0	8.3		
Falls	4.7	0.6	2.6	34.0	5.2	2.5	2.2		
Homicide	4.6	5.1	4.6	2.5	2.7	7.2	2.3		
All Other Unintentional Injuries	7.5	4.5	9.6	20.8	7.4	6.6	2.3		
Chronic Lower Respiratory Disease	30.1	1.2	13.7	226.0	39.2	18.2	19.7		
Diabetes	14.4	0.6	17.1	85.6	12.1	23.2	9.3		
Pneumonia and Influenza	8.3	1.2	7.8	52.7	8.0	8.5	7.4		

Source: Florida Department of Health (FDH), Division of Public Health Statistics & Performance Management, Florida Charts.com database.

- Age-adjusted death rates for Hispanics tend to be lower than for other races and ethnic groups.
- Unintentional injuries (primarily substance abuse related or motor vehicle related) are the leading cause of death for people under 45 years of age.
- Although the death rates due to unintentional injury are similar between whites and non-whites, the sub-components differ. Non-whites dying from unintentional injury are most likely to die from motor vehicle accidents or homicide where whites are more likely to die from poisoning (which includes substance abuse) or motor vehicle accidents.
- In relation to total deaths within an age group, unintentional injuries among people age 45 to 64 are also much higher than for older residents.
- Deaths due to falls is a major risk among people over age 64.

Variations in the death rate by race are similar in Palm Beach and Broward Counties.

Causes of Death by Select Demographic Categories, Palm Beach County, 2014

(Age-adjusted deaths per 100,000)

Cause	Total	Age under 45	Age 45 to 64	Age 65 and older	White	Non- white	Hispanic
Cancer	140.7	10.2	179.4	828.2	138.1	143.5	109.6
Heart disease	124.4	32.8	179.4	976.4	121.4	142.7	100.0
Stroke	29.7	1.3	27.0	224.2	26.8	49.8	31.2
Unintentional Injury	47.1	43.6	44.1	85.5	46.8	46.4	25.0
Poisoning	15.3	16.5	19.6	1.0	19.3	4.3	7.1
Motor Vehicle Accidents	9.6	9.3	10.7	12.5	9.8	9.3	10.1
Falls	7.0	0.6	4.4	51.9	7.1	5.5	4.1
Homicide	8.2	11.5	3.6	1.3	3.9	19.0	3.9
All Other Unintentional Injuries	7.0	5.7	5.8	18.8	6.7	8.3	3.7
Chronic Lower Respiratory Disease	26.3	0.1	14.6	210.7	27.2	14.9	19.8
Diabetes	12.5	1.3	17.9	67.4	10.2	30.0	12.6
Pneumonia and Influenza	7.3	0.7	5.8	51.6	6.7	9.8	3.7

Source: FDH, FloridaCharts, http://www.floridacharts.com/FLQUERY/Death/DeathRate.aspx.

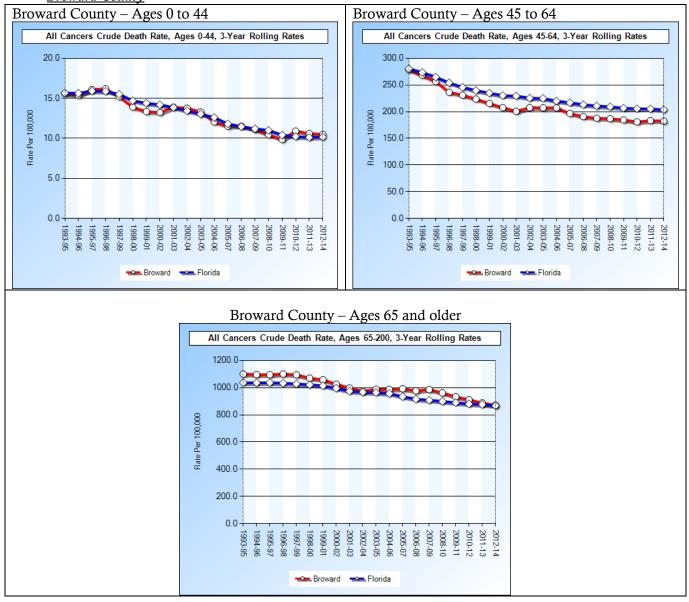
- Whites are more likely than non-whites and others to die from poisoning and from lower respiratory disease while non-whites and others are more likely to die from stroke, diabetes, and homicide.
- Heart disease death rates are about ten percent lower in Palm Beach County than Broward County.
- Deaths due to chronic lower respiratory disease are more common in Broward County than in Palm Beach County.
- Unintentional injury deaths (excluding motor vehicle accidents) more often cause death in Palm Beach County than Broward. See below.

In the following section, each of the causes of death identified in the table above are further analyzed. For each major category, due to data limitations death rates are reviewed for age groups, racial segments ("African American" includes other non-white races), and genders (by county). Charts for each are also shown that identify long-term trends. For the four sub-categories within the Unintentional Injury, additional detail is provided, where helpful. Note that all "20-year trend" charts are derived from the Florida Department of Health, Division of Public Health Statistics & Performance Management, FloridaCharts.com database.

Cancer

Cancer is the leading cause of death in Broward County (and Palm Beach County) – unlike the total U.S. where heart disease is the most common cause. The plateauing of the cancer-related death rates is seen in all age groups (as well as by race and gender). For example, the crude death rate for cancer in Broward County for people under 45 years old has declined about 30% since the mid-1990's and currently is stable at about 10 deaths per 100,000 population.

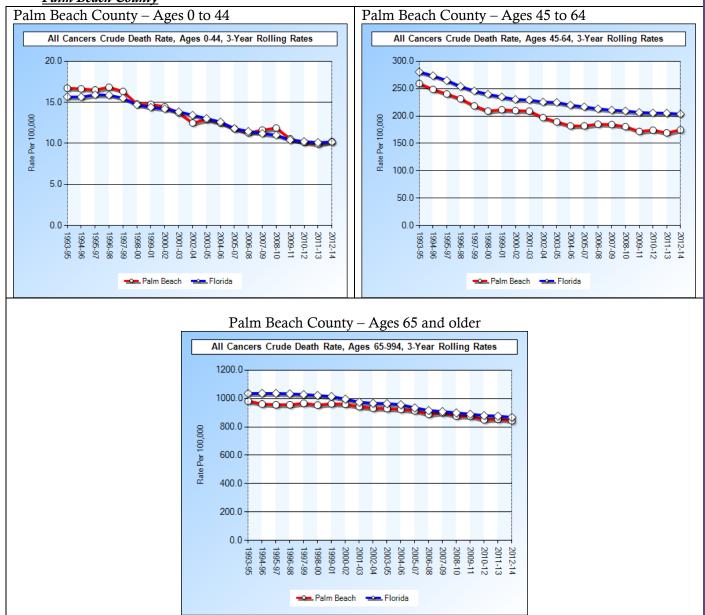




- Among other age groups over 45 and older, cancer death rates have steadily declined 20% to 30% over the past 20 years.
- Among seniors, cancer death rate trends are approximately equal to the Florida statewide trend.

Trends (steady incidence decline since the mid-1990s) in Palm Beach County are similar to those in Broward County except that cancer deaths among people 45 to 64 and among seniors is lower than in Broward County.

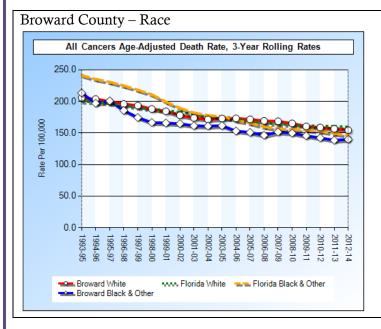


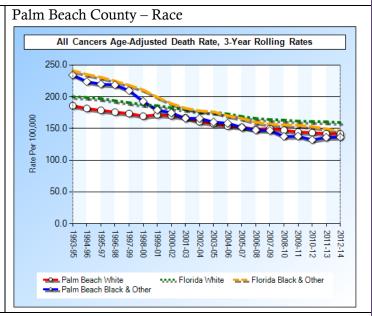


• The Palm Beach County rate of deaths due to cancer among seniors has paralleled the state of Florida rate for more than 20 years – currently about 820 deaths per 100,000 people in the most recent data period (2012/2014).

The following table (and similar tables for other disease states) compare whites to non-whites. Since that demographic data shows that non-whites comprise the large majority of non-white population in Broward and Palm Beach Counties, the aggregated term simplifies the data presentation.

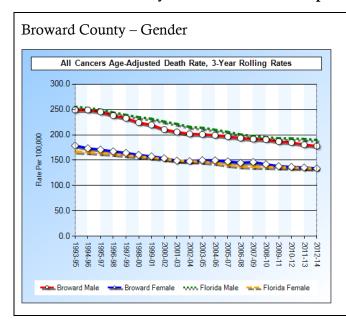
Cancer death rates among non-whites is only slightly higher than the rate for whites in Broward and Palm Beach Counties.

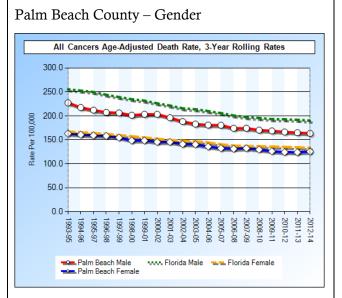




- Cancer death rates in Palm Beach County among non-whites were much higher than for whites until about 2000 when the gap narrowed.
- Broward and Palm Beach County rates are slightly lower than the Florida averages.

The most common cause of death in Palm Beach and Broward Counties is cancer. The mortality rates in each county have declined over the past 20 years, yet disparities by gender exist.



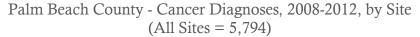


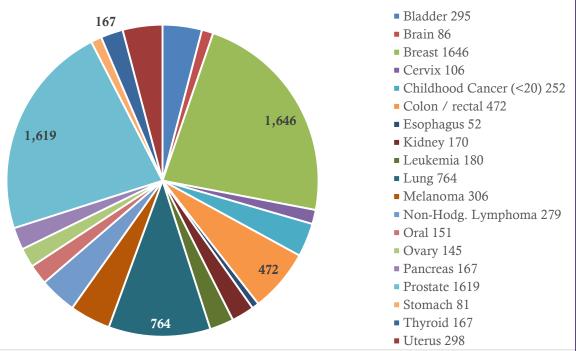
- In Palm Beach County, cancer death rates have declined about 20% since 1993/1995, and the cancer rate gap between men and women has slightly narrowed.
- Rates have declined only slightly or plateaued over the past five years.

Broward County cancer death rates are slightly higher than Palm Beach County though the 20-year trend is similar.

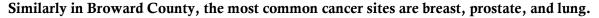
• The same trends are seen in Broward County, as cancer-related death rates have declined; both counties have cancer death rates below the Florida average for each gender.

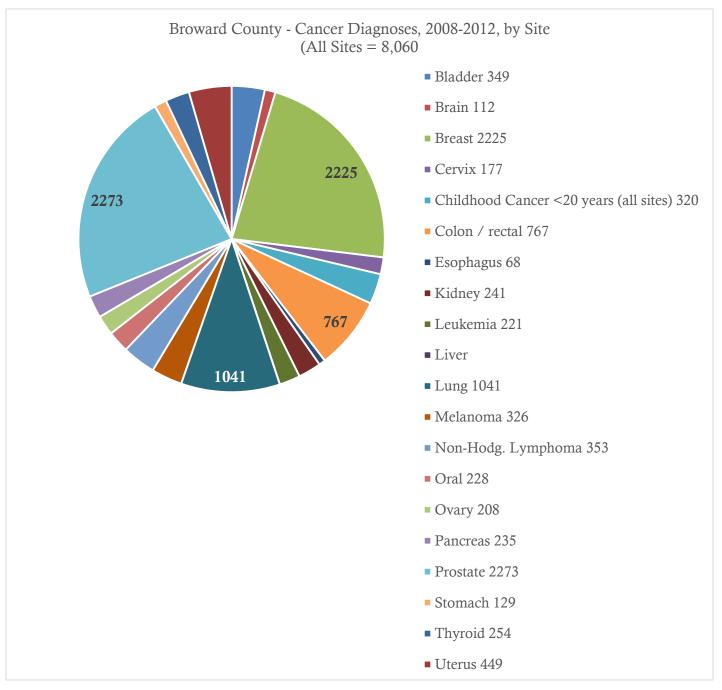
The most commonly diagnosed cancer site diagnoses (2008-2012) in Palm Beach County were breast, prostate, and lung.





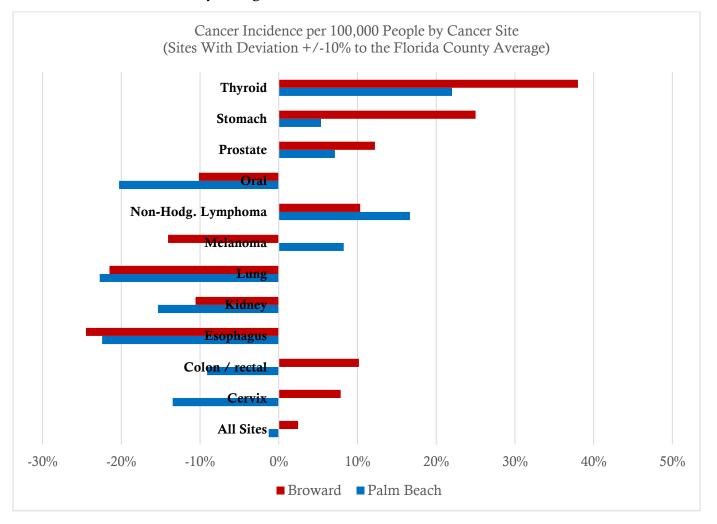
Source: National Cancer Institute, www.statecancerprofiles.cancer.gov.





Source: National Cancer Institute.

The incidence rates for most cancer sites in Broward and Palm Beach Counties are similar to the state of Florida county average. However, several sites differ by more (or less) than 10% from the Florida county average.



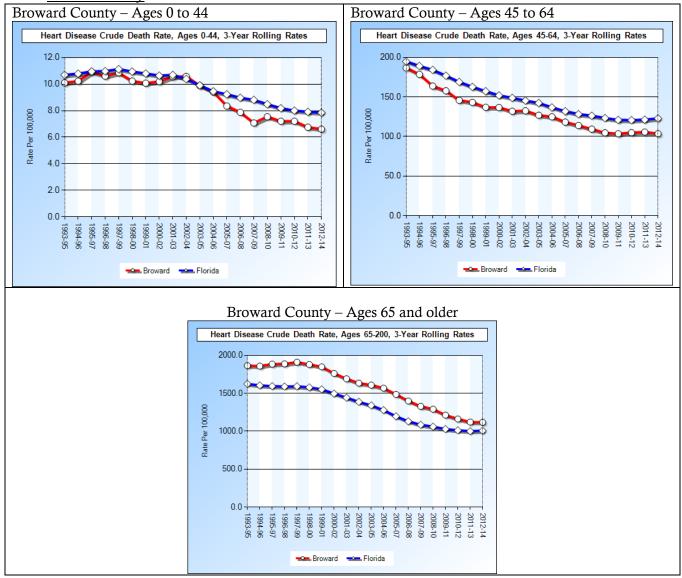
Source: National Cancer Institute.

- Although there are relatively few thyroid cancer cases in Broward and Palm Beach Counties, the incidence rate is more than 20% above the Florida county average.
- Cancer of the stomach, prostate, colon, as well as non-Hodgkin lymphoma are at least 10% above the Florida averages in Broward County.
- Rates in Broward County for oral, skin, lung, kidney, and esophagus are more than 10% below the Florida county average.
- Rates in Palm Beach County for oral, lung, kidney, esophagus, and cervix are more than 10% below the Florida county average.

Heart Disease

As shown in the three charts below, heart disease deaths in Broward County have declined in each age group by 30% to 40% from 1993/1993 to 2012/2014. Among all but those over age 65, Broward County rates are better than the Florida average.

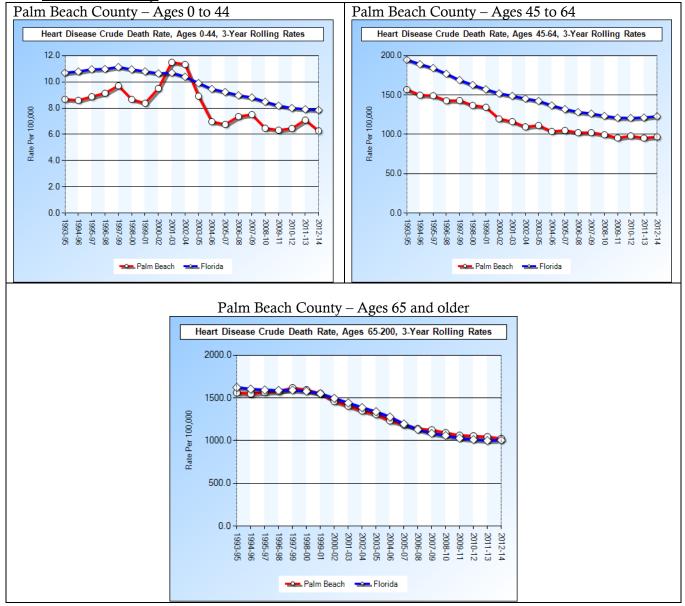




- Deaths due to heart disease among seniors have declined from approximately 1,900 per 100,000 people in the mid- to late-1990s to slightly over 1,000 per 100,000 people in the most recent data period (2012/2014).
- Among younger age groups in Broward County, county rates have steadily declined and remain 10% to 15% below Florida averages.

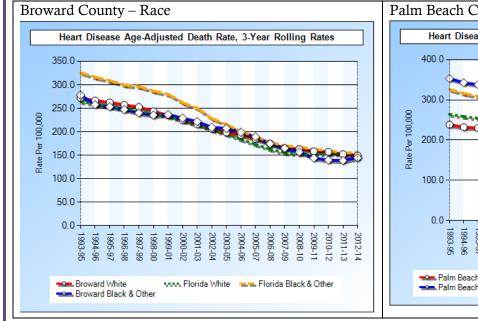
Trends in Palm Beach County are similar to those in Broward County except that heart disease deaths among seniors is lower than in Broward County and approximately equal to Florida rates.

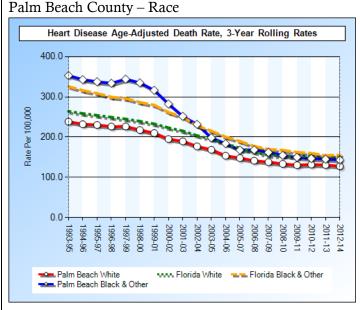




• The Palm Beach County rate of deaths due to heart disease among seniors has paralleled the state of Florida rate for more than 20 years – currently, at approximately 1,000 deaths per 100,000 people in the most recent data period (2012/2014).

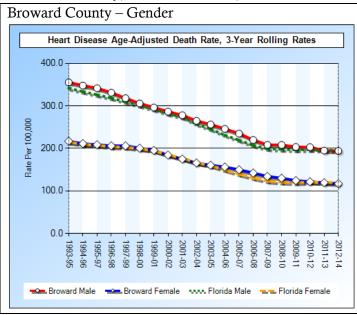
Palm Beach County heart disease death rates among non-whites is only slightly higher than the rate for whites – a large change compared to the 1993/1995 to 2000/2002 period in which death rates among non-whites were 30% to 40% higher than for whites.

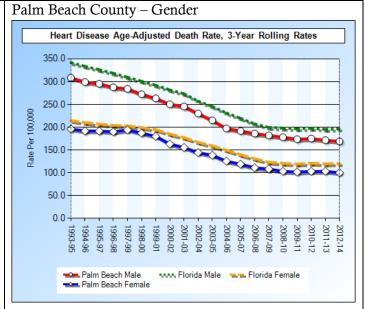




- Heart disease death rates are slightly lower in Palm Beach among all races than in Broward.
- Broward and Palm Beach County rates are slightly lower than the Florida averages.

Heart disease death rates are generally slightly lower in Palm Beach County than in Broward County, but in both areas, heart disease deaths are much more common among men than women.



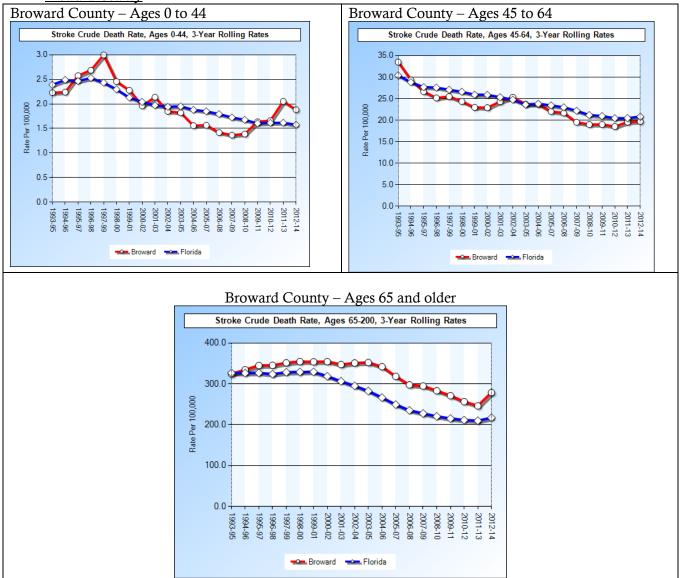


• Heart disease death rates are 60% to 70% higher among men than women in Palm Beach and Broward Counties.

Stroke

Incidence of stroke in Broward and in Palm Beach County declined by approximately 50% for people under 65 years of age and by about 20% for seniors from 1993/1995 to 2008/2010. However, rates have stabilized or increased since that time.

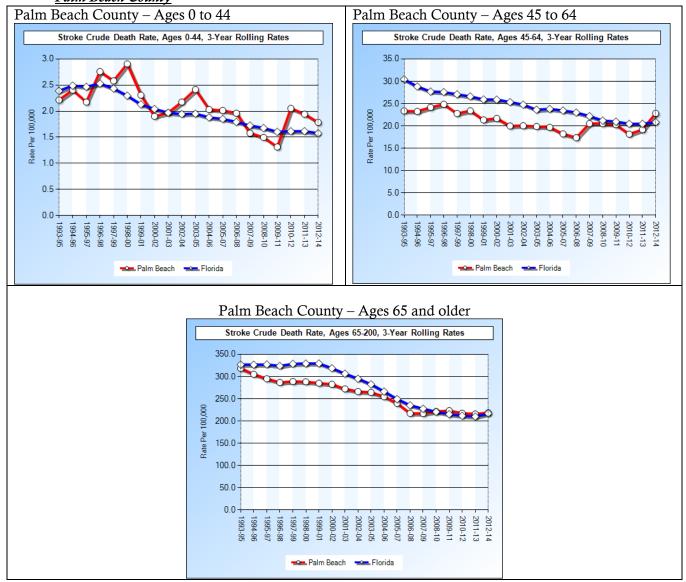




- Deaths due to stroke among seniors have declined from approximately 320 per 100,000 people in the mid- to late-1990s to about 290 per 100,000 people in the most recent data period (2012/2014).
- Among seniors, the gap between the Broward County rate and the Florida rate increased around 2000 and remains wide.

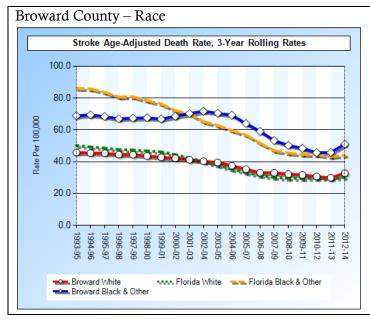
In Palm Beach County, death rates due to stroke among seniors has been stable for nearly ten years – down from rates in the 1990s.

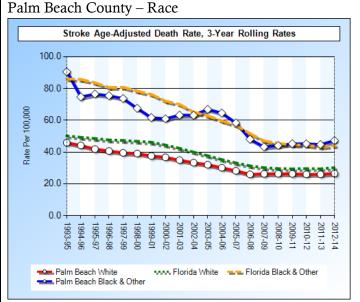
Palm Beach County



- Since 2006/2008, stroke rates among people age 45 to 64 has increased slightly.
- The rate of deaths from stroke in Palm Beach County has been equal to, or slightly lower than the Florida rate since 2003/2005.

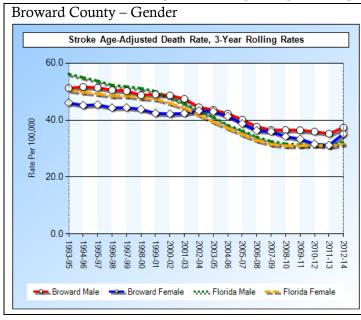
In Palm Beach County and Broward County the incidence of death from stroke is much higher (approximately 50% higher) among non-whites compared to whites.

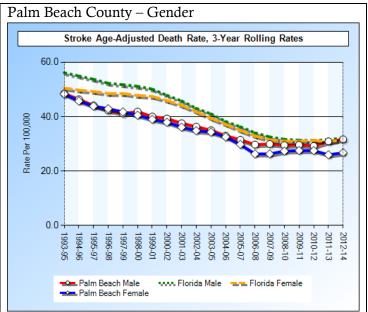




- Rates among residents of Broward County are slightly higher than in Palm Beach County for all races.
- Palm Beach County rates are slightly lower than the Florida averages; Broward County rates are similar to Florida averages.

Since about 2000/2002, stroke rates among Broward County have been higher than the Florida average – reversing a long-standing trend.





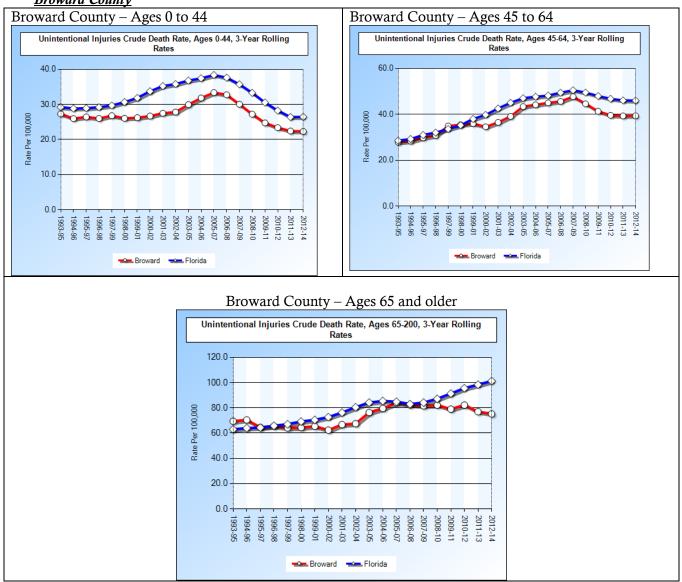
• There is very little difference in the rates of deaths due to stroke between men and women.

Unintentional Injury

Unintentional injuries include several diverse categories of causes such as death by drowning, falls, homicide, poisoning (e.g., overdose of medicine), and others. Following the standard charts below, information is presented that provides greater analysis of the most common sub-causes of unintentional injury.

Broward County rates of death due to unintentional injury are historically lower than Florida averages.

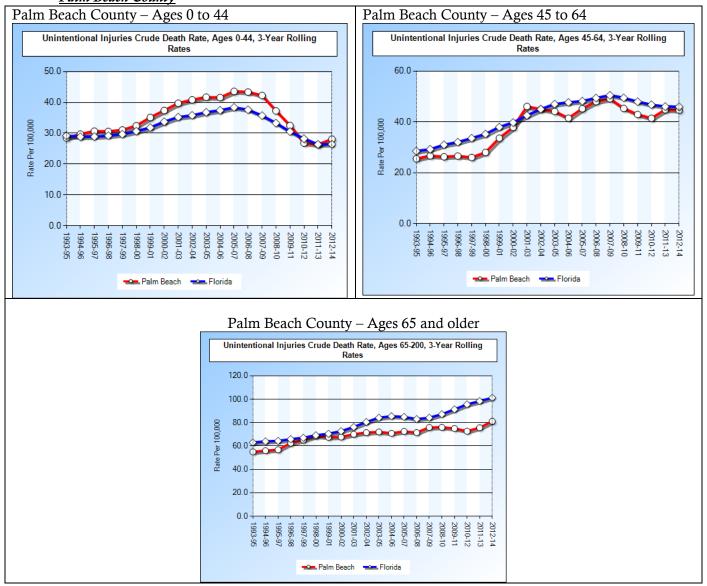




- Death rates have declined or been stable for each age group since about 2005/2007.
- Unintentional injury death rates in Florida have steadily increased since 2007/2009 creating a gap with Broward County rates.

Trends of deaths due to unintentional injury in Palm Beach County among seniors have slowly and steadily increased over the past 20 years.

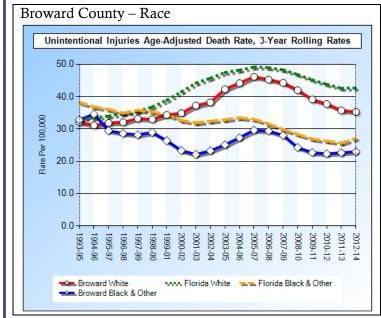


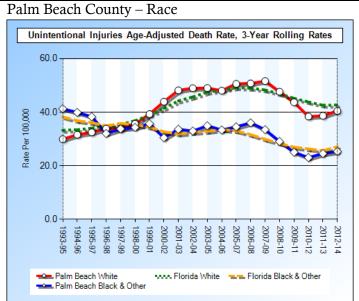


• The Palm Beach County rate of deaths due to unintentional injury among people under age 65 has declined or been stable since about 2002/2004.

The increase in deaths due to unintentional injury among seniors is largely due to increase in deaths due to falls (more than doubled over 20 years). Deaths due to unintentional poisoning increased from 1993/1995, but have been stable for ten years. Deaths due to homicide and due to motor vehicle crashes (i.e., the remaining two of the four leading sub-causes of death due to unintentional injury) have decreased over the same time period. See tables on page 39.

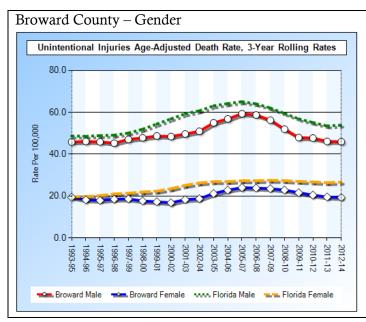
Among non-whites, deaths due to unintentional injury rates are more than 50% lower than for whites – Broward and Palm Beach Counties.

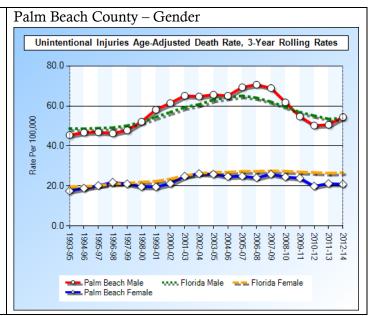




- Unintentional injury death rates are about equal in Palm Beach and Broward Counties.
- Broward and Palm Beach County rates are about equal to the Florida averages.

Males are more than twice as likely as females to die from unintentional injury.

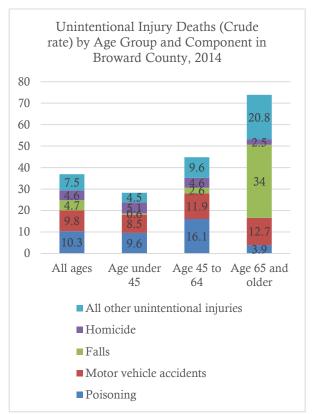


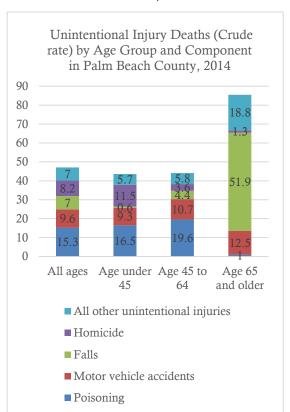


• Unintentional injury death rates are similar in Palm Beach and Broward Counties based on gender.

Given that "Unintentional injuries" includes several, dissimilar sub-categories, the following tables and notes identify trends and observations for the four most common sub-categories – poisoning, motor vehicle accidents, falls, and homicide.

The death rate for seniors due to unintentional injury is higher in Palm Beach County than Broward (85.5 per 100,000 for Palm Beach compared to 73.9 for Broward).





	Age under 45		Age 45 to 64		Age 65 and older	
	Broward	Palm Beach	Broward	Palm Beach	Broward	Palm Beach
Unintentional Injury	28.3	43.6	44.8	44.1	73.9	85.5
Poisoning	9.6	16.5	16.1	19.6	3.9	1.0
Motor Vehicle Accident	8.5	9.3	11.9	10.7	12.7	12.5
Falls	0.6	0.6	2.6	4.4	34.0	51.9
Homicide	5.1	11.5	4.6	3.6	2.5	1.3
Other Injuries	4.5	5.7	9.6	5.8	20.8	18.8

Source: http://www.floridacharts.com/FLQUERY/Death/DeathRate.aspx

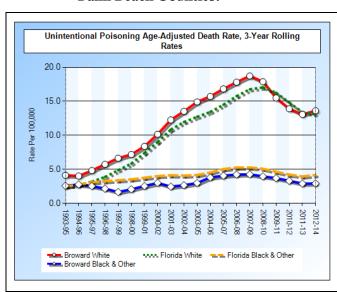
- Deaths from falls is the leading cause of unintentional injury death among seniors while poisoning is most common among younger age groups.
- Deaths due to falls are more than ten times more likely among seniors (in both counties) than other age groups.
- When combining all age groups, poisoning (including drug overdose) is the leading component of unintentional injury deaths in both counties in BRRH's service area.
- Motor vehicle deaths in each county are slightly more common among seniors.

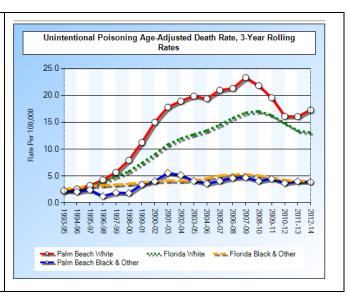
Although the overall rate is comparable in Palm Beach County, unintentional injury death rates are higher for whites in some sub-categories (i.e., poisoning, falls) and higher for non-whites – homicide, motor vehicle accidents (Broward County only).

Causes of Death by Select Demographic Categories, by Race 3-Year Trend 2012/2014						
(Age	-adjusted deaths	per 100,000)				
Non-whites White						
	Broward Palm Beach Broward Palm Beach					
Unintentional Injury	30.9	46.4	38.4	46.8		
Poisoning	3.6	4.3	13.9	19.3		
Motor Vehicle Accidents	11.0	9.3	9.2	9.8		
Falls	2.5	5.5	5.2	7.1		
Homicide	7.2	19.0	2.7	3.9		
Other Injuries	6.6	8.3	7.4	6.7		

• Among non-whites, unintentional injury death rates are higher in Palm Beach County than in Broward for all sub-categories except motor vehicle accidents.

Unintentional poisoning death rates are far higher for whites than others in Broward and Palm Beach Counties.



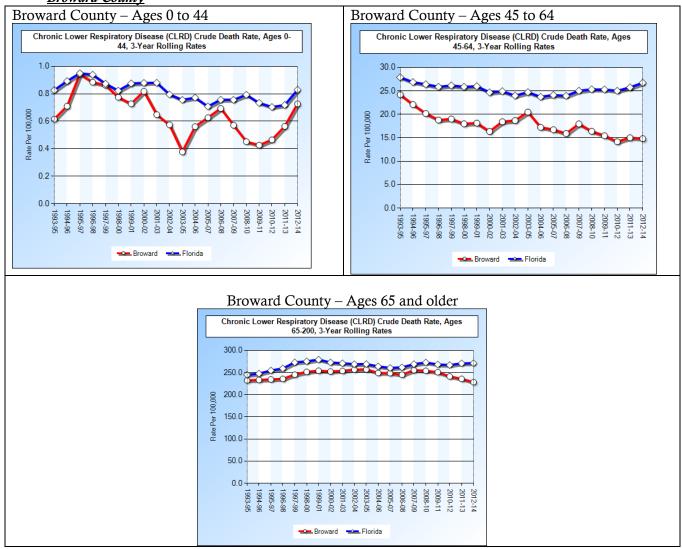


- Death rates among whites rose sharply in both counties between the mid-1990's and about 2007/2009 decreasing somewhat since then but remaining much higher than for African Americans (which have remained stable).
- Poisoning deaths are much more common among people 45 to 64 than seniors (about 20 per 100,000 population compared to about four or fewer per 100,000 population, respectively, in both counties).

Chronic lower respiratory disease

Chronic lower respiratory disease (CLRD) kills few people under age 45 and modest numbers between ages 45 and 64. However, it is a leading cause of death for seniors – causing the death of nearly as many people as stroke. This category includes chronic obstructive pulmonary disease (COPD).

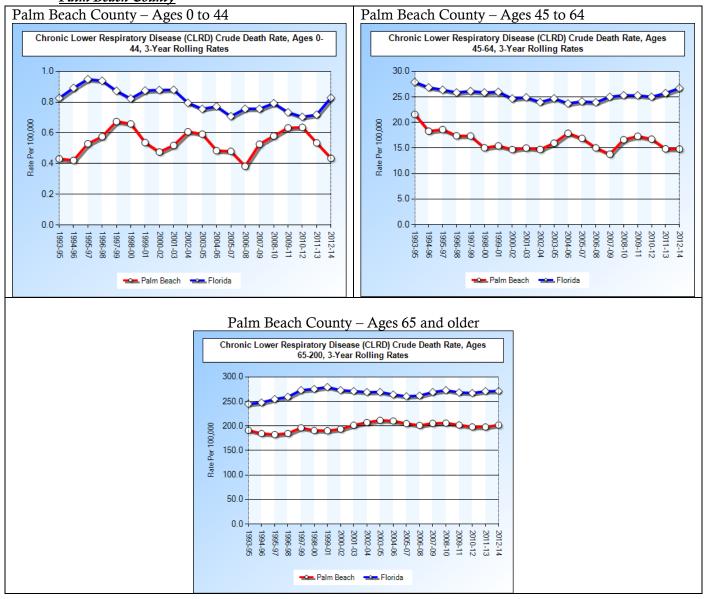




- Unlike most major disease categories, CLRD death rates have been stable in Florida and Broward County for 20 years.
- Broward County rates are lower than the Florida averages.

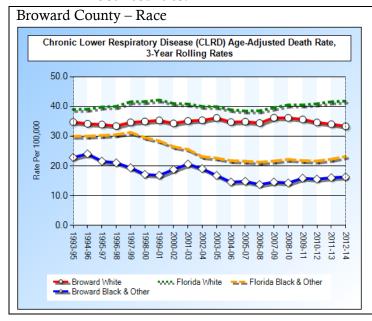
Trends in Palm Beach County are similar to those in Broward County in that CLRD death rates are lower than the Florida averages.

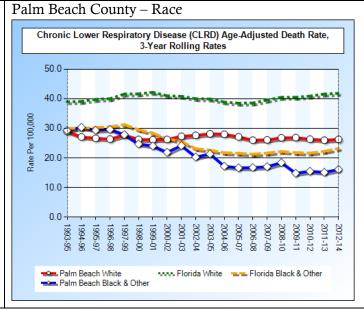




• The Palm Beach County rate of deaths due to CLRD among seniors (and other age groups) has maintained an advantageous gap – less than, but paralleling, the state of Florida rate for 20 years.

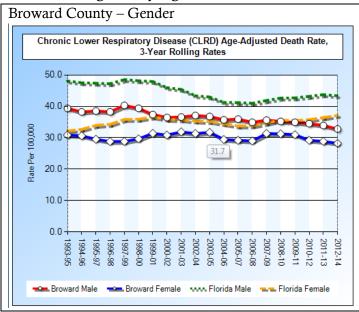
In Palm Beach County, CLRD death rates among non-whites is much lower than for whites – in both counties.

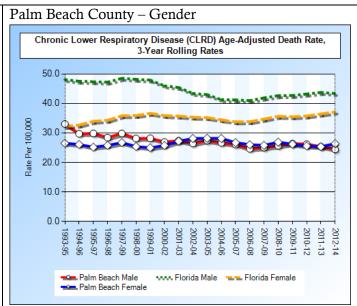




- The gap between whites and African Americans and Other Races for CLRD death rate in Palm Beach County has steadily widened since 1997/1999.
- In Broward County, the racial gap has widened to a lesser degree.
- Among whites and among African Americans and Other Races in both counties, rates are below the Florida averages.

CLRD death rates are better in both counties than in Florida (total), death rates among men are generally higher than women.



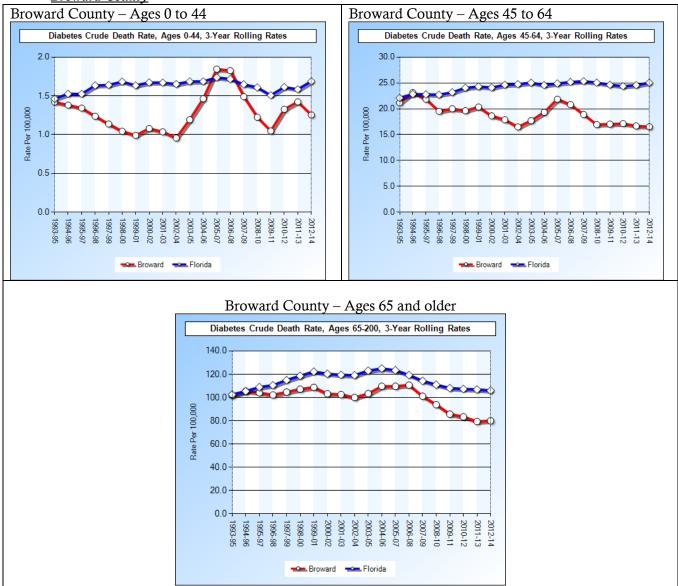


• Palm Beach County rates are slightly lower than for Broward Counties.

Diabetes

As shown in the three charts below, diabetes deaths in Broward County have been fairly stable for people under age 65 but have declined for those over age 65.

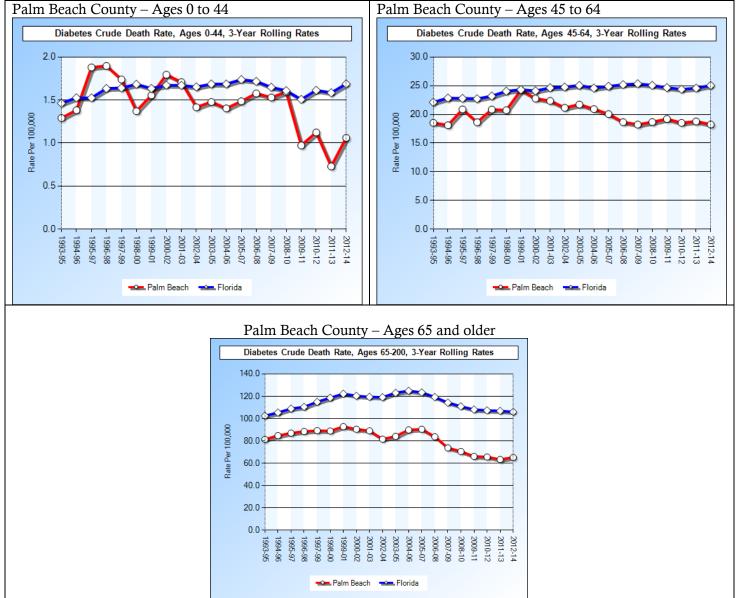




- Broward County rates are better than the Florida average.
- Among seniors, diabetes death rates are declining and are better than the Florida state average.

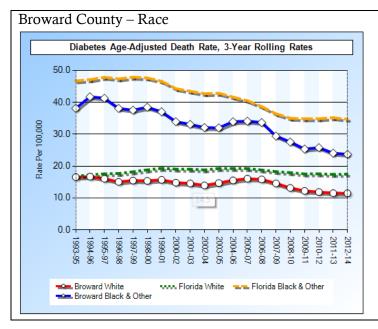
Trends in Palm Beach County are similar to those in Broward County except that diabetes deaths among seniors is lower than in Broward County.

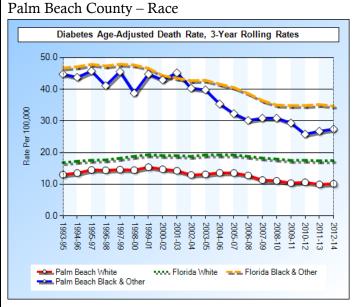




- The Palm Beach County rate of deaths due to diabetes among seniors has improved compared to the state of Florida rate.
- Death rates for people 45 to 64 and for seniors have been stable since about 2007/2009.

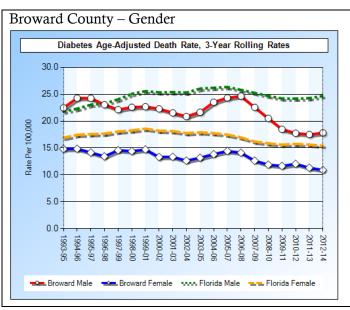
Diabetes death rates among non-whites is much higher than for whites.

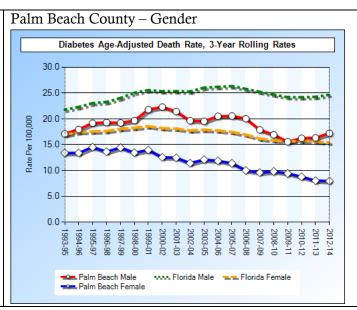




- Diabetes deaths among non-whites has decreased by about 40% over the past 20 years in Palm Beach County and Broward County. There has been a smaller, steady decline among whites. Rates for all have been stable for about five years.
- Broward and Palm Beach County rates are slightly lower than the Florida averages.

Diabetes death rates are generally slightly lower in Palm Beach County than in Broward County, but in both counties, diabetes deaths are more common among men than women.





• Diabetes death rates are 60% to 70% higher among men than women in Palm Beach and Broward Counties.

Pneumonia and Influenza

Deaths due to influenza and pneumonia in Broward County have been stable since 2006/2008 after a roughly 50% decline in the previous ten years.

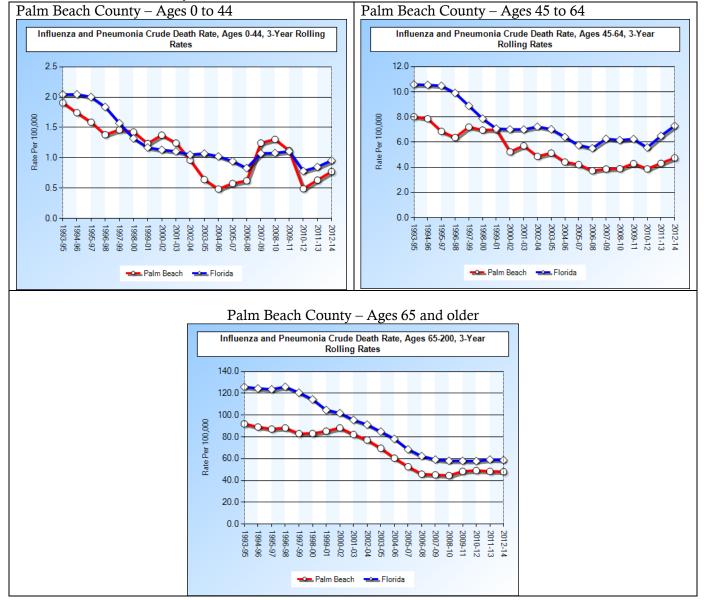




- The death rate among people under age 65 is small, but even among them, incidence is low and trends are stable.
- Among people 45 to 64, death rates have increased slightly over the past five years.

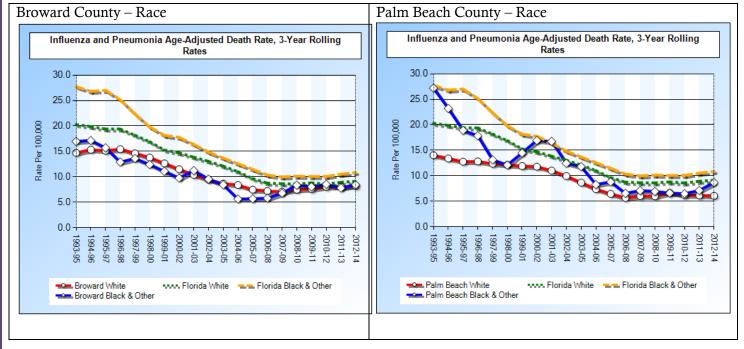
Palm Beach County residents are less likely to die from influenza and pneumonia than other Florida residents on average.





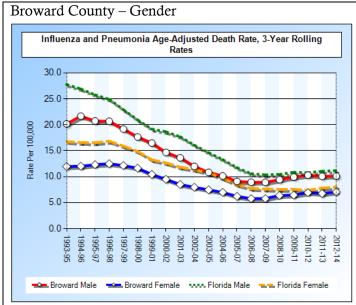
- Fewer people (per 100,000) in Palm Beach County die from influenza and pneumonia than in Broward County.
- Death rates among seniors has been stable for approximately ten years.

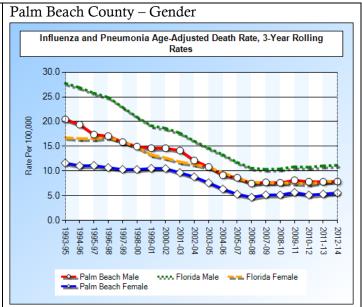
Regarding death from influenza and pneumonia there is little variation between races in either county.



- Heart disease death rates are lower in Palm Beach County among all races than in Broward County.
- Broward and Palm Beach County rates are slightly lower than the Florida averages.

In both counties, men are more likely to die from influenza and pneumonia than women, as rates for men are approximately 30% higher.





• Overall, rates for men and for women are slightly lower in Palm Beach County.

Chronic Disease Incidence

The CDC states that chronic diseases are the most common and costly of all health problems, but they are also the most preventable. Hundreds of thousands of people in Palm Beach and Broward Counties are afflicted with chronic diseases such as diabetes, asthma or other conditions that often precipitate serious health events such as high cholesterol, hypertension, and obesity.

Incidence rates for Broward and Palm Beach Counties are below the U.S. average for body weight measures (overweight and obesity), but similar to the U.S. average on most others. In addition to the mortality material presented in the prior section, the chronic disease data below illustrates the prevalence of various, common health conditions.

Chronic Disease Incidence and Afflicted Population							
County	High cholesterol ¹⁰	Hypertension ¹¹	Overweight ¹²	Obese $(BMI > 30)^{13}$	Diabetes ¹⁴	Asthma ¹⁵	
Broward	28.4%	27.4%	34.8%	25.8%	10.7%	11.3%	
Palm Beach	38.4%	34.4%	40.2%	19.9%	11.0%	10.4%	
U.S.	38.4%	31.4%	69.0%	29.6%	10.0%	8.0%	
Broward	510,153	492,190	625,117	463,449	192,206	202,983	
Palm Beach	523,155	468,660	547,678	271,114	149,862	141,668	

Source: United Health Foundation, "Health Rankings 2015", http://www.americashealthrankings.org/;

U.S. CDC, http://www.cdc.gov/nchs/fastats/asthma.htm Florida Charts, 2015;

U.S. CDC, (Overweight data) http://www.cdc.gov/nchs/fastats/obesity-overweight.htm

Florida Agency for Health Care Administration (AHCA); Broward County,

http://www.floridacharts.com/charts/DisplayHTML.aspx?ReportType=7244&County=6&year=2014&tn=32; Palm Beach County,

http://www.floridacharts.com/charts/DisplayHTML.aspx?ReportType=7244&County=50&year=2014&tn=32

- More than one million people in the two county area have high cholesterol.
- More than one in ten people (11%% in each county) have diabetes; about the same number have asthma. The percentages equate to over 300,000 people with diabetes in the two county area.
- One on four (Broward, 27.4%; Palm Beach, 34.4%) have high blood pressure nearly one-half million people.
- Slightly more than one of three people in Broward County (34.8%) and Palm Beach County (40.2%) are overweight over 1.1 million people. Approximately one in four are obese (about 26% in Broward County and 20% in Palm Beach County).

¹⁰ Adults who have ever been told they had high blood cholesterol

¹¹ Adults who have ever been told they had hypertension

¹² Adults who are overweight

¹³ Adults who are obese

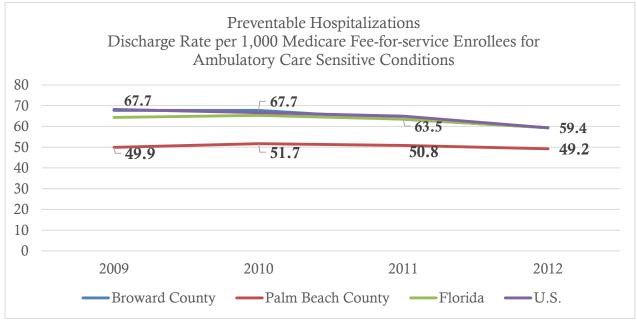
¹⁴ Adults who have ever been told they had diabetes

¹⁵ Adults who have ever been told they had asthma

- In Broward County, there is little variation in the percent of people overweight based on race or ethnicity (33.6% African Americans; 35.8% non-Hispanic white; 35.0% Hispanic). However, in Palm Beach County, the differences are greater (55.4% African Americans; 35.8% non-Hispanic white; 49.9% Hispanic).
- Most of the conditions above may be positively impacted by care coordination activities (discussed later in this report as a major opportunity to improve community health and address needs).

Preventable Hospitalizations

Broward County preventable Medicare hospitalization rates are similar to the Florida and U.S. average, but the Palm Beach County rates are much better (nearly 20% lower) than the Broward County / Florida / U.S. rates.



Source: Dartmouth Atlas of Health Care (Dartmouth).

- Palm Beach County has historically had favorable rates of preventable Medicare hospitalizations, and they were stable 2009 to 2012.
- The gap between the Broward / Florida / U.S. and Palm Beach County rates has been reduced by nearly 50% between 2009 and 2012.

Social and Physical Environment Factors

The southeast Florida environment – Broward and Palm Beach Counties, in particular – afford residents with a large array positive environmental and lifestyle opportunities. As such, the measures that reflect the quality of the physical environment are generally better in the two county service area than the state as a whole. Social factors such as poverty and violent crime are also favorable compared to the Florida average.

Environmental Quality and Health

The environment – air and water quality, healthful food related issues, and others – are strengths in Broward and Palm Beach Counties. However, access to healthful food is below the U.S. average.

Physical Environment						
Report Area	Average Daily Density of Fine Particulate Matter Per Cubic Meter (PM2.5) ¹⁶	Population Potentially Exposed Water Exceeding a Violation Limit ¹⁷	Population with Limited Access to Healthy Food			
Broward County	10.7	15%	8.3%			
Palm Beach County	10.6	6%	11.7%			
Florida	11.4	6%	10.4%			

Source: County Health Rankings, 2015; www.countyhealthrankings.org.; Community Commons, 2015 sourced from: Centers for Disease Control and Prevention, Division of Nutrition, Physical Activity, and Obesity. 2011.

 Broward County has a higher percentage of people potentially exposed to hazardous water than the state as a whole.

¹⁶ Air Pollution - Particulate Matter is the average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) in a county. Fine particulate matter is defined as particles of air pollutants with an aerodynamic diameter less than 2.5 micrometers. These particles can be directly emitted from sources such as forest fires, or they can form when gases emitted from power plants, industries and automobiles react in the air.

¹⁷ Drinking Water Violations is the annual average percentage of the population served by community water systems who receive drinking water that does not meet all applicable health-based drinking water standards. Health-based violations include Maximum Contaminant Level, Maximum Residual Disinfectant Level and Treatment Technique violations.

Broward and Palm Beach County residents tend to be somewhat more physically active than the Florida average, somewhat less obese, and have healthier lifestyles.

Population Lifestyle Indicators ¹⁸						
County Adult Obesity Physically Inactive Heavy or Binge Drinking Percent Tobac (Past 30 days) Users						
Broward County	25%	23%	15%	14%		
Palm Beach County	22%	22%	15%	14%		
Florida	26%	23%	16%	18%		

Source: Community Commons, 2015; www.communitycommons.org.

- One in four Broward County residents (25%) is obese better than the Florida average. Fewer residents (22%) in Palm Beach County are obese.
- Only one in seven (14%) uses tobacco (Broward and Palm Beach Counties) lower than the state average (18%) and U.S. average (17%)¹⁹.

Poverty

Social and environmental factors include "poverty status" and others correlated with it. Shown below, Broward County and Palm County poverty indicators tend to be slightly better than the Florida averages.

Poverty Related Factors (2013 unless otherwise indicated)							
Report Area	Percent with No High Report Area Percent with No High School Diploma Report Area Percent in Poverty (below 100% FPL) Report Area Percent Under Age (below 100% FPL)						
Broward County	12.2%	4.5%	14.3%	18.9%			
Palm Beach County	12.5%	4.6%	14.5%	22.4%			
Florida	13.9%	5.0%	16.3%	23.6%			

Source: Community Commons, 2015; US Census Bureau, American Community Survey. 2009-13.

- Although the Broward County and Palm Beach County jobless rates are low (4.5% and 4.6%, respectively), substantial numbers of residents live below the Federal Poverty Level (more than 10%) and/or live in inadequate housing.
- Children in Palm Beach and Broward Counties are affected (as a percentage) by poverty more than the population as a whole (18.9% compared to 22.4%, respectively).

- Adult obesity (percent of adults that report a BMI >= 30), National Center for Chronic Disease Prevention and Health Promotion, calculated from BRFSS, 2013.
- Physical inactivity (percent of adults that report no leisure time physical activity), National Center for Chronic Disease Prevention and Health Promotion, calculated from BRFSS, 2009.
- Excessive drinking (percent of adults who report heavy or binge drinking), BRFSS, 2004-2010.
- Percent tobacco users (percent of adults who report using tobacco in the last 30 days), U.S. Centers for Disease Control and Prevention

http://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm#use

¹⁸ Metric Definitions and Sources:

¹⁹ U.S. Centers for Disease Control and Prevention, "Fast Facts", 2015,

²⁰ U.S. Bureau of Labor Statistics, Metropolitan Area Employment and Unemployment, 2015.

Even though slightly lower than the Florida average, the percent of people living in poverty in Broward and Palm Beach Counties represents approximately one in seven residents. Poverty is concentrated in the western side of Palm Beach County (out of the BRRH PSA and SSA).

Poverty Core Measures						
Population in Population in Area Poverty Children in Poverty housing						
Broward County	14.5%	22.4%	25.0%			
Palm Beach County	14.3%	18.9%	27.0%			
Florida	16.3%	23.6%	22.0%			

As shown below, the most highly concentrated poverty in the PSA is the neighborhood occupied by Florida Atlantic University (and resident students).



Source: ESRI, Business Analyst Online, 2015.

Violent Crimes

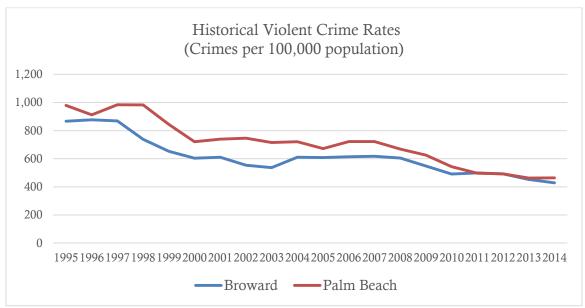
Even though BRRH's service area is fairly affluent, crime rate in the two counties is nearly as high as the Florida average and well above the U.S. rate. In 2014, there were more than 7,000 violent crimes in Broward County and 6,000 in Palm Beach County. The rates per 100,000 (428.7 and 463.4, respectively) are above the U.S. rate of 367.9²¹

Violent Crime Rate, 2013					
Report Area	Total Population	Violent Crimes	Violent Crime Rate (Per 100,000 Pop.)		
Broward County	1,869,235 ²²	7,734	428.7		
Palm Beach County	1,397,710 ²³	6,304	463.4		
Florida	3,266,945	91,065	466.8		

Source: Community Commons, 2015; www.communitycommons.org.

- Violent crimes include murder, forcible sex assault, aggravated assault, and robbery.
- The violent crime rates for Broward and Palm Beach Counties are both slightly lower than the Florida average.

The violent crime rate has decreased by approximately 50% since 1995.



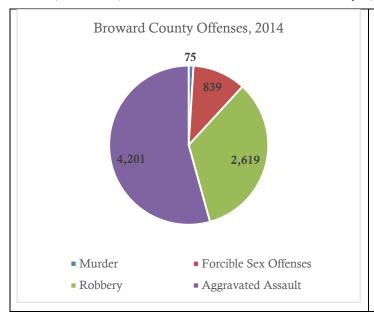
• The violent crime rate has been fairly stable since 2011.

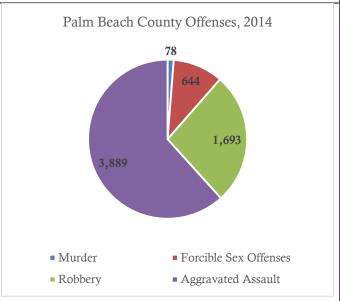
²¹ Florida Department of Law Enforcement, https://www.fdle.state.fl.us/Content/FSAC/Menu/County-Profiles.aspx; U.S. Federal Bureau of Investigation, https://www.fbi.gov/about-us/cjis/ucr/crime-in-the-u.s/2013/crime-in-the-u.s.-2013/violent-crime-violent-crime-topic-page/violentcrimemain_final, 2013.

²² 2014 Population estimate, http://quickfacts.census.gov/qfd/states/12/12011.html

²³ 2014 Population estimate, http://quickfacts.census.gov/qfd/states/12/12099.html

In 2014, there were more than 14,000 violent crimes in Broward and Palm Beach Counties (combined). There were 153 murders and nearly 1,500 forcible sex offenses.

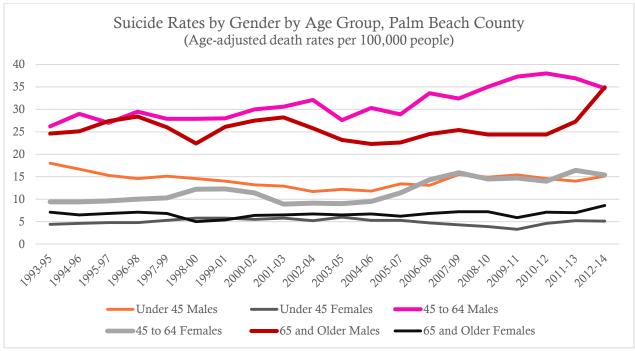




- In Broward County, the majority of violent crime (62%, N=4,201) was aggravated assault. Robbery accounted for 27% of violent crimes (N=2,619).
- Similarly, in Palm Beach County, the majority were aggravated assault (54%, N=3,889).

Suicide

Suicide rates often reflect the mental health of a community. Suicide rates for males age 45 and older have increased over the past 20 years – with rates among males 65 and older spiking since 2009.



Source: FloridaCharts.com.

- Suicide rates among women ages 45 to 64 have increased about 50% over the last ten years. Rates for women of other ages has been relatively stable.
- Suicide rates for men in each age group are two to three times higher than for women.
- Rates for men ages 45 to 64 and ages 65 and older increased about 40% since 1995.

Healthcare for the Homeless

There were 2,624²⁴ homeless people in Broward County and 1,421 in Palm Beach County. However, some Leadership Group members anecdotally noted that numbers may be far higher and that the problem is growing. The 168 shelters in Broward (86) and Palm Beach (82) Counties include shelters, half-way houses, and substance abuse recovery centers.²⁵ This segment of the population is among the least likely to exhibit positive health behaviors and outcomes.

Additional Health Status charts are contained in Appendix C.

²⁴ Homeless Initiative Partnership, http://www.sun-sentinel.com/news/fl-broward-homeless-count-20150521-story.html, January, 2015; Palm Beach County Public Affairs Department, http://www.sun-sentinel.com/local/palm-beach/fl-palm-beach-homeless-count-results-20150423-story.html. Represents Point-in-Time homeless.

²⁵ The Appendix B includes a listing of all shelters and contact information.

Hospital Discharge Data

The BRRH discharge data reflects current needs in the community that align with their services. In 2014, the leading four principal discharge diagnoses (in percent of total patient days) comprised over half (51.5%) of all discharges: diseases of the circulatory system (such as heart disease), digestive system (e.g., intestines, esophagus, stomach), respiratory system, and injury / poisonings.

Boca Raton Regional Hospital Discharges ²⁶ , 2014						
Principal Diagnosis Group	Percent of discharges	Percent of total patient days	Percent of total charges			
Total discharges, 2014 = 19,940						
Diseases of the Circulatory System	17.5%	18.1%	27.9%			
Diseases of the Digestive System	12.2%	12.9%	12.0%			
Pregnancy, Childbirth, and the Puerperium	11.6%	7.2%	5.3%			
Supplementary Factors Influencing Health Status and Contact with Health Services (primarily newborn infants)	11.6%	7.9%	2.3%			
Diseases of the Respiratory System	8.6%	11.6%	8.6%			
Injury and Poisoning	7.5%	8.9%	10.1%			
Diseases of the Genitourinary System	5.4%	5.2%	4.3%			
Neoplasms	4.4%	6.1%	6.7%			
Musculoskeletal System and Connective Tissue	4.4%	3.6%	6.9%			
Infectious and Parasitic Diseases	4.3%	7.5%	6.6%			
Symptoms, Signs, and Ill-Defined Conditions	3.7%	2.3%	2.4%			
Endocrine, Nutritional and Metabolic Diseases, and Immunity Disorders	2.4%	2.6%	2.1%			
Diseases of the Skin And Subcutaneous Tissue	2.2%	2.3%	1.4%			
Diseases of the Blood and Blood-Forming Organs	1.8%	1.7%	1.4%			
Diseases of the Nervous System and Sense Organs	1.7%	1.6%	1.5%			
Mental, Behavioral and Neurodevelopmental Disorders	0.6%	0.6%	0.4%			
Total patient days, 2014 = 87,832						

Source: Florida Agency for Healthcare, 2014 data, http://www.floridahealthfinder.gov/QueryTool/QTResults.aspx?T=I.

- The most common discharge diagnoses align with the leading causes of death and chronic disease incidence data presented earlier in this assessment.
- Pregnancy, childbirth, and in-patient stays for newborns comprise 15.1% of patient days and represent nearly one in four discharges (23.2%)

²⁶ Including all BRRH discharges for which the principal diagnosis group included 30 or more occasions.

Risk and Protective Lifestyle Behaviors

The BRRH service area has a relatively high number of healthcare providers – positively impacting access (relative to the state as a whole). However, even though the Palm Beach County population exhibits healthy behaviors (e.g., regular pap testing, colon screening, properly taking blood pressure medication) somewhat better than the state, Broward County residents do not do so and are typically less likely to have healthy behaviors better than the Florida average.

Access to Care

Provider Concentrations

Broward and Palm Beach Counties have relatively high numbers of healthcare providers, as there are more primary care physicians (PCPs) and dentists in the BRRH service area counties than in the state as a whole.

Providers (Per 100,000 People)					
Area	Primary Care Physicians	Dentists	Mental Health Providers		
Broward County	74.2	74.2	151.5		
Palm Beach County	77.0	69.0	167.5		
Florida	70.3	53.4	129.2		

Source: Community Commons, 2015; www.communitycommons.org based on 2012 data sets.

- The concentration of dentists is more than 30% higher in Broward and Palm Beach Counties than in the state. The concentration of PCPs is slightly higher than the state average.
- Broward County has about 40% more dentists and nearly 20% more mental health providers than the Florida average. Palm Beach County has about 30% more dentists and mental health providers.
- Both counties have more primary care physicians (PCPs), dentists, and mental health providers than the Florida average, so "access needs" may tend to refer to something other than the number of providers cost, availability, transportation, etc.

Cost Barriers and Insured Rates

Low health insurance coverage is an important issue in the BRRH service area. The state of Florida ranks 46th in the percentage of uninsured residents (1st = best; 50th = worst). Palm Beach County is among the counties with the highest levels of uninsured children.

Health Insurance Coverage – Adults and Children					
Adults				Chil	dren
Report Area	Percent Population With Medical Insurance	Percent Population Without Medical Insurance		Percent Population With Medical Insurance	Percent Population Without Medical Insurance
Broward County	82.0%	18.0%		89.8%	10.2%
Palm Beach County	83.7%	16.3%		89.5%	10.5%
Florida	83.4%	16.6%		90.7%	9.3%

Source: U.S. Census Bureau, "Health Insurance Coverage in the United States, 2014". Georgetown University Center for Children and Families and KidsWell Florida, http://www.bizjournals.com/southflorida/news/2015/10/29/palm-beach-county-has-the-highest-percentage-of.html

- Between 15% and 20% of Palm Beach and Broward County residents are without health insurance²⁷ -- most of whom are under age 65.
- One in ten children (each county) is without health insurance among the highest in the state.
- The percentage of uninsured people decreased by more than three percentage points from 2013 to 2014.

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 $^{^{\}rm 27}$ Reported in October 2015 based on December 2014 summaries.

Medical Expenditures

Households in the Primary Service Area tend to spend more on medical care and health insurance than the U.S. average even though they tend to be healthier. They spend about the same as the state of Florida on average.

Medical Expenditures Annual Household Expenditures						
	Average Annual Amount Spent					
	PSA	SSA	Florida	U.S.		
Medical Care	\$2,331	\$2,009	\$2,349	\$2,086		
Physician Services	\$290	\$257	\$300	\$266		
Dental Services	\$436	\$376	\$443	\$386		
Eye care Services	\$61	\$53	\$62	\$55		
Hospital Room and Hospital Services	\$212	\$191	\$220	\$203		
Nursing Home Care	\$36	\$29	\$34	\$31		
Nonprescription Drugs	\$141	\$123	\$143	\$130		
Prescription Drugs	\$559	\$473	\$555	\$497		
Medicare Prescription Drug Premium	\$111	\$87	\$97	\$89		
Health Insurance	\$2,932	\$2,524	\$2,982	\$2,643		
Blue Cross/Blue Shield	\$894	\$794	\$969	\$859		
Commercial Health Insurance	\$529	\$478	\$563	\$500		
Health Maintenance Organization	\$475	\$428	\$502	\$448		
Medicare Payments	\$662	\$521	\$581	\$525		

Source: US Census, ESRI 2010.

- PSA residents annually spend about 10% more than the than the U.S. average on medical care in total and on the sub-measures noted above.
- The Florida total tends to be slightly above the U.S. total more similar to the PSA total and slightly higher than the SSA averages.

Healthy Behaviors

Palm Beach County residents exhibit positive preventive health behaviors. Preventive health behaviors include activities that people can take in order to maintain good health or identify conditions that could lead to illness. Residents of Palm Beach County tend to exhibit healthy behaviors generally better than the Florida average while those in Broward County are more similar to, or worse than, the Florida average.

Health Behaviors						
Area	Percent Female Medicare Enrollees with Mammogram in Past 2 Year	Regular Pap Testing (Age-Adjusted)	Colon Screenings (Age- Adjusted)	Pneumonia Vaccinations (Age-Adjusted)	Percent Adults Not Taking Required Blood Pressure Medication	Percent Adults with No Recent Dental Exam
Broward County	60.5%	79.7%	59.1%	54.1%	21.8%	28.3%
Palm Beach County	72.9%	76.0%	63.2%	67.6%	13.9%	24.0%
Florida	67.7%	78.8%	61.5%	65.9%	19.5%	32.0%

Source: Community Commons.

- Palm Beach County residents healthy behaviors are better than the Florida average on five of the six key scales.
- Fewer Broward County Medicare recipients receive regular mammograms, and fewer total residents receive pneumonia vaccinations, than the Florida average.

Broward and Palm Beach County residents exhibit positive lifestyle and physical activity attributes. Fewer people are obese (i.e., BMI over 30) than the Florida average and nearly all have access to locations for physical activity.

Healthy Lifestyles / Physical Activity				
Report Area	Percentage of adults reporting BMI of 30 or more	Percentage of adults aged 20 and over reporting no leisure- time	Percentage of population with adequate access to locations for physical activity	Number of membership associations per 10,000 population
Broward County	25%	23%	100%	5.4
Palm Beach County	22%	22%	98%	6.3
Florida	26%	23%	93%	7.3

Source: Community Commons.

- The number of membership associations tends to be positively correlated with healthy behaviors. Residents (both counties) have fewer associations than the Florida average.
- The Florida environment affords residents great access to locations for physical activity.

Substance Abuse and Mental Health

Substance abuse is slightly higher in Palm Beach County than Broward County.

Select Substance Abuse Measures 28						
Measure	Measure Broward County Palm Beach County				nty	
Within the past year	Ages 12-17	Ages 18-25	Ages 26+	Ages 12-17	Ages 18- 25	Ages 26+
Used illicit drugs	6.1%	16.5%	5.6%	5.5%	17.4%	5.9%
Used cocaine	0.6%	5.3%	1.2%	0.7%	6.3%	1.2%
Used marijuana	12.8%	27.4%	6.7%	11.7%	29.0%	6.8%

Source: National Drug Early Warning System, "Southeastern FL (Miami Area) SCS Profile, 2015", Table AT4, http://ndews.umd.edu/Substance Abuse Article;.

- About one in six people in Broward and Palm Beach Counties (16.5% and 17.4%, respectively) indicate that they used illicit drugs at least once during the last year.
- Nearly three of ten (27.4% and 29.0%, respectively) have used marijuana.

Leading causes of substance abuse-related hospital admissions in Palm Beach County include alcohol, opioids, marijuana, and heroin.

Treatment Admissions in Palm Beach County, 2014		
Substance	Admissions	
Alcohol	1,926	
Opioids (Rx)	1,225	
Marijuana	1,105	
Heroin	571	
Cocaine	295	
Benzos	143	
MDMA	80	
Methamphetamines	12	
Other	421	

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 $^{^{28}}$ National Survey on Drug Use and Health: 10-Year Substate R-DAS (2002 to 2011). Analysis ran on 2015-07-16 (10:26 AM EDT) using SDA 3.5: Tables.

Broward County has less use of alcohol and tobacco compared to the Florida average.

Substance Use			
Report Area	Percentage of adults who are current smokers	Percentage of adults reporting binge or heavy drinking	Percentage of driving deaths with alcohol involvement
Broward County	14%	15%	21%
Palm Beach County	14%	15%	31%
Florida	18%	16%	29%

Source: Community Commons.

- Slightly more driving deaths in Palm Beach County than the state (average) involve alcohol.
- Fewer adults are smokers in both counties than in the state as a whole -14% compared to 18%, respectively.

Mental health is an important issue in the BRRH service area counties. Nearly one in four people (23.0%) people in Broward County indicate that they do not have adequate social and emotional support – higher than the Florida average. Somewhat fewer people in Palm Beach County (18.1%) report the lack of support.

Mental Health				
Report Area	Average Number of mentally unhealthy days in the past 30 days ²⁹	Percentage of Population Without Adequate Social / Emotional Support		
Broward County	3.4	23.0%		
Palm Beach County	3.4	18.1%		
Florida	3.8	21.2%		

Source: Community Commons, 2015; www.communitycommons.org.

• Anecdotally, continuity of care / integrated care is noted by consumers and community leaders as an important aspect to improve community health (to be covered later in this report).

²⁹ This measure is based on survey responses to the question: "Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?"

Depression and other mental health conditions are common in the BRRH service area counties. About one in seven people in the BRRH service area counties have been told that they have had a depressive episode.³⁰

Population Having Been Told That They have had a Depressive Episode by County and Gender			
County	Males	Females	
Broward County	11.3%	17.6%	
Palm Beach County 11.5% 15.9%			
Florida	12.1%	21.2%	

- Males in both counties tend to be less prone to depression than females.
- Palm Beach County has a slightly lower percentage of females with depression than Broward County, but both are well below the Florida average.
- About one in nine males (each county) have been told that they have had a depressive episode slightly less than the Florida average.

In the state of Florida, African Americans are slightly less likely than whites to have had a depressive episode, but in Palm Beach County the incidence among African Americans is about half of the white level (7.8% and 15.8%, respectively).

Population Having Been Told That They have had a Depressive Episode by County and Race				
County	White	African American		
Broward County	15.5%	16.7%		
Palm Beach County	15.8%	7.8%		
Florida	18.6%	14.0%		

• Across the state, whites are slightly more likely to have had a depressive episode; in Broward County, the opposite is true.

People less than 45 are slightly more likely to have had a depressive episode; there is little difference between people age 45 to 64 and seniors.

Population Having Been Told That They have had a Depressive Episode by County and Age Group			
County	Under 45	45 to 64	65 and older
Broward County	16.6%	14.5%	14.9%
Palm Beach County	14.3%	12.4%	11.7%
Florida	15.8%	19.6%	14.6%

Crescendo Consulting Group

³⁰ Behavioral Risk Factor Surveillance Survey (BRFSS) as noted in FloridaCharts.com http://www.floridacharts.com/charts/Brfss.aspx

Teen Birth Rates

Teen birth rates in the BRRH service area are relatively low.

Teen Birth Rates (per 1,000 females) by County			
County	2014 Population	Teen Birth Rate	
Broward County	1,869,235	27	
Palm Beach County	1,397,710	30	
Florida	18,801,310	36	

Source: Community Commons, 2015; www.communitycommons.org.

• The Broward and Palm Beach County teen birth rate is well below the Florida rate.

Community Survey

BRRH and Crescendo Consulting Group conducted an online community survey in late 2015 in order to collect direct consumer opinion regarding community needs. The survey was administered by telephone to 300 area residents. Survey respondents indicated that the highest priority needs community needs include coordination of care between providers, access to affordable care, screening for chronic conditions, mental health, and substance abuse. There were, however, variations among age groups.

Participant Profile

The survey included a wide representation of community members – including participants among underserved populations.

Community Survey Income Profile		
Household Income Range Less than \$25,000	Percent of Respondents 9.8%	
\$25,000 to \$54,999	14.5%	
\$55,000 to \$79,999	18.0%	
\$80,000 or more	57.6%	

- More than half of respondents (57.6%) say that they have household income above \$80,000 somewhat higher than the PSA and SSA aggregately.
- Although only about one in four (24.4%) respondents have household income under \$55,000, analysis of the survey responses by income group showed few differences.

The survey included a percentage of older people and seniors that better reflects healthcare service use than the general population.

Community Survey Age Group Representation		
Household Income Range 18 to 44 years	Percent of Respondents	
45 to 64 years	46.8%	
65 and older	34.9%	

- Slightly more than one of three respondents were seniors.
- Nearly half of respondents (46.8%) were 45 to 64 years old.

The survey sample closely reflected the educational attainment levels in the community.

Community Survey Education Profile				
Less than high school	3.7%			
Graduated high school	13.7%			
Some college or vocational training	22.3%			
Graduated college (4-year Bachelor Degree)	37.3%			
Completed Graduate or Professional school (Masters, PhD, Lawyer)	23.0%			

- About one in seven adults attained only a high school diploma or less.
- More than half of survey respondents are college graduates.

Responses

The survey asked participants to evaluate 13 needs commonly found in similar communities. It also asked them to identify additional needs not on the list and indicate ones that needed more focus and attention. The original 13 needs rated by respondents included those listed in the following table.

Community Survey Needs Evaluated						
Category of Need	Community Health Need					
Medical / Health Status Issues	Health services for seniors					
	Coordination of care between different doctors or other service providers					
	Support to help people to better manage chronic conditions such as diabetes, asthma, obesity, heart disease, high cholesterol, high blood pressure, or similar conditions					
	Screening for cancer, diabetes, heart disease, stroke, or other chronic conditions					
	Services for depression, anxiety, or other mental health conditions other than substance abuse (which we will ask about later)					
	Support to help people stay healthy – wellness programs					
Social, Economic, and Physical Environment Issues	Transportation services for people needing to go to doctor's appointments or the hospital					
	Affordable healthcare services for people or families with low income					
Risk and Protective Lifestyle Behaviors	Primary care services from a family doctor or pediatrician					
	Publically available education about wellness and ways to stay healthy – exercise, nutrition					
	Publically available education about ways to manage obesity					
	Substance abuse education					
	Substance abuse intervention and treatment					
	Youth oriented health programs					

The survey results were analyzed in total and by several demographic stratifications. The results were determined and ranked based on the percentage of respondents indicating that "Much more focus and attention" was required in the community to address the need. A summary of the ranking by age group is shown below.

Community Survey Results by Age Group (Top five or six needs per age group are highlighted)

Needs Requiring "Much More Focus"

Treeds requiring Truck Profes Cods						
	Age group					
Community Needs	18 to 44	45 to 64	65 and older	Total		
Affordable healthcare services	52.0%	66.9%	61.9%	62.5%		
Coordination of care between providers	52.0%	63.1%	57.7%	59.2%		
Health services for seniors	46.0%	47.7%	47.4%	47.3%		
Primary care services	40.0%	38.5%	39.2%	39.0%		
Publically available education about ways to manage obesity	44.0%	49.2%	43.3%	46.2%		
Publically available education about ways to stay healthy	44.0%	49.2%	43.3%	46.2%		
Screening for chronic conditions	38.0%	60.8%	53.6%	54.2%		
Services formental health conditions other than substance abuse	58.0%	65.4%	54.6%	60.3%		
Substance abuse education	46.0%	56.2%	47.4%	51.3%		
Substance abuse intervention and treatment	46.0%	62.3%	53.6%	56.3%		
Support to help people stay healthy	44.0%	48.5%	38.1%	44.0%		
Support to help people to better manage chronic	54.0%	54.6%	46.4%	51.6%		
Transportation services	52.0%	54.6%	44.3%	50.5%		
Youth oriented health programs	62.0%	51.5%	40.2%	49.5%		

- The data indicates that behavioral health, access to care, and substance abuse (including prescription drug abuse) are leading community priorities.
- Access to care (e.g., affordability), coordination of care, and services for mental health conditions other than substance abuse are leading needs, as indicated by community members across all age groups.
- Seniors and people ages 45 to 64 align with others regarding the top five needs requiring much more attention. They also tend to indicate that chronic disease screening and substance abuse intervention and treatment are more urgently needed than do younger respondents.
- Younger people (under 45) indicate that transportation, youth-oriented programs, and support to help people to better manage chronic conditions are among the highest community health needs.

There are important variations regarding needs prioritization based on household income levels.

Community Survey Results by Income Group (Top five or six needs per age group are highlighted)

Needs Requiring "Much More Focus"

	Annual Household Income			
Community Needs	Less than \$25,000	\$25,000 to \$54,999	\$55,000 to \$79,999	\$80,000 or more
Affordable healthcare services	62.5%	77.8%	63.6%	58.8%
Coordination of care between providers	58.3%	61.1%	63.6%	56.6%
Health services for seniors	66.7%	63.9%	50.0%	41.2%
Primary care services	54.2%	47.2%	40.9%	32.4%
Publically available education about ways to manage obesity	66.7%	58.3%	47.7%	45.6%
Publically available education about ways to stay healthy	66.7%	52.8%	50.0%	38.2%
Screening for chronic conditions	66.7%	61.1%	52.3%	47.8%
Services formental health conditions other than substance abuse	66.7%	72.2%	63.6%	54.4%
Substance abuse education	54.2%	47.2%	52.3%	54.4%
Substance abuse intervention and treatment	58.3%	63.9%	56.8%	55.1%
Support to help people stay healthy	50.0%	44.4%	52.3%	41.9%
Support to help people to better manage chronic	58.3%	58.3%	63.6%	41.9%
Transportation services	66.7%	63.9%	50.0%	42.6%
Youth oriented health programs	50.0%	58.3%	54.5%	44.9%

- Lower income households were more interested in publically available sources of information about ways to manage obesity and ways to stay healthy in addition to transportation.
- More affluent households (income \$80,000 or more) tend to indicate that services for mental health, substance abuse, and care coordination (in addition to affordable healthcare) are more needed in the community. They are also the least likely group to say that there is a need for much more focus on publically available education about ways to manage obesity and ways to stay healthy.

Discussion Groups with Key Stakeholders

Background

Four focus groups were held with the Leadership Group (3) and Community stakeholders (1). The moderator's guides – PowerPoint presentations – are attached in a separate appendix (see Appendices D, E, and F). At the outset of the project, participants provided feedback on the project methodology and the strategic purpose of the community assessment, offered their insights regarding effective ways to gather pertinent information (quantitative and qualitative), and helped generate an initial list of community needs, available resources, and potential service gaps.

Group members in the first Leadership Group meeting and the Community meeting highlighted the need for additional care coordination between providers. Others noted that additional care coordination with higher-risk patients is needed – along with greater focus and attention on chronic disease management and several other community health needs. Some of the paraphrased comments are listed below.

"We [BRRH] currently provide care coordination, but I think there is an opportunity to reach a lot more people – people who most need the help"

"The area has great providers and a lot of services. Sometime there is a need to better coordinate between providers; they benefit from knowing what someone else [i.e., another provider] is doing."

"There is a big problem with diabetes and other chronic illnesses. Seems like being an affluent area helps but doesn't inoculate anyone [i.e., any community] from these problems entirely."

During the second meeting, Leadership Group participants reviewed initial secondary research data and a topline summary of the community survey. In the meeting, participants indicated that BRRH strategies designed to facilitate collaboration between the hospital and community service groups may be very attractive and generate continued support from the existing group of leaders assembled for the meeting, as well as several others. They also indicated an interest in learning more about cancer incidence and other chronic disease foci.

The third and final Leadership Group meeting was held in later November and reviewed all secondary research, the results of the community survey, and other materials. Also, members were provided insight regarding the needs prioritization process.

Community Needs Prioritization / Modified Delphi Method

With secondary data and community survey results in hand, leadership group members participated in a prioritization process in order to rate and rank 50 community needs identified in research conducted earlier in the BRRH CHNA. Leadership Group members rated each of the needs on a 5-point scale (with 1 = the greatest need for more focus). The community needs evaluated are contained in the table below in alphabetical order. A <u>prioritized</u> list of needs – the results of the research – is shown afterwards.

Health Issues Evaluated in the Modified Delphi Method **Community Need** Access to primary care physician services Access to specialty care physician services Affordable healthcare services Affordable prescription medications Autism spectrum and other learning disabilities - early detection and treatment Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse Cancer - Care coordination Cancer - Diagnosis and treatment Cancer - Education and prevention Cancer - Screening Care coordination for people with multiple co-morbid conditions Children's health - behavioral health services Children's health – primary care services Children's health – specialized care services Dementia spectrum services for Alzheimer's, Parkinson's Disease, Lewy Body dementia, and others Dental health services for children and adults Diabetes - Care coordination Diabetes - Diagnosis and treatment Diabetes - Education and prevention Diabetes - Screening Domestic or intimate partner violence counseling or intervention End of life issues (including palliative care) Heart disease - Care coordination

Health Issues Evaluated in the Modified Delphi Method

Community Need

Heart disease – Diagnosis and treatment

Heart disease – Education and prevention

Heart disease – Screening

Home health services such as Visiting Nurses or other in-home care

Homeless services (healthcare for the homeless)

Hypertension treatment and related services

Nutrition and healthy eating education

Obesity - Care coordination

Obesity – Diagnosis and treatment

Obesity – Education and prevention

Obesity – Programs to help with self-management

Pain management services

Respiratory health / pulmonology education and services

Rheumatology and other arthritis services

Seniors' health services – Care coordination

Seniors' health services – Diagnostic and treatment

Sexually transmitted disease education, screening, and treatment

Smoking cessation services

Stroke prevention and care

Substance abuse – Care coordination

Substance abuse – Education and prevention

Substance abuse – Intervention and treatment

Substance abuse – Screening

Transportation services for people needing to go to doctor's appointments or the hospital

Wellness initiatives for adults - exercise and nutrition

Wellness initiatives for children – exercise and nutrition

Women's health – comprehensive gynecology and reproductive care for women in all stages of life

Delphi process results were combined with secondary data analyses, community survey results, and information from the discussion groups to develop a prioritized list of community health needs. Appendix G contains the Delphi Prioritization Survey.

Prioritized Needs

Based on input from the Leadership Group meetings; analysis of local, State of Florida, and federal quantitative data; community input; and, the needs evaluation process, the prioritized list of community needs is shown in the table below.

	Leading, Prioritized Community Needs			
<u>Rank</u>	<u>Health Need</u>			
1	Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse			
2	Care coordination for people with multiple co-morbid conditions			
3	Access to primary care physician services			
4	Seniors' health services – Care coordination			
5	Substance abuse – Education and prevention			
6	Nutrition and healthy eating education			
7	Obesity – Care coordination			
8	Obesity – Education and prevention			
9	Affordable healthcare services including prescription medications			
10	Substance abuse – Care coordination			
11	Access to specialty care physician services			
12	Substance abuse – Intervention and treatment			
13	Obesity – Programs to help with self-management			
14	Dementia spectrum services for Alzheimer's, Parkinson's Disease, Lewy Body dementia, and others			

For the comprehensive list of community needs included in the Prioritization Process, see Appendix F.

Implementation Strategies

As noted above, the Community Leadership members (with the guidance and support of Melissa Whelchel, Manager, Population & Corporate Health of Boca Raton Regional Hospital) indicated that ongoing strategies that address high priority community health issues may effectively encourage continued engagement of diverse community leaders while simultaneously addressing several needs identified in the CHNA. In addition, several newer areas were identified for additional focus and attention.

When considering moving forward with the Implementation Plan (to be developed by Boca Raton Regional Hospital after the CHNA is approved), the following general strategies have the ability to simultaneously address several of the Prioritized Community Needs shown in the prior page.

- Improving access to care, which includes integrated behavioral health (including substance abuse) services and medical care.
- Providing education, communications, and enhanced information exchange among providers
- Expanding care coordination services for a broad range of seniors' chronic conditions and other health issues that may benefit from a higher level of personal contact.
- Addressing chronic diseases, obesity, and related issues
- Supporting wellness and preventive services

Implementation Plan strategies will be developed and communicated under separate cover. The document will identify which community the medical center will not address (and state why not) and the ones that it will address (and strategies for doing so).

Appendix A: Community Health Needs Assessment Survey, 2015

Boca Raton Regional Hospital

Community Health Needs Assessment Survey, 2015

Introduction Hello, my name is (caller name). I am conducting a very brief survey on behalf of Boca Raton Regional Hospital for the purpose to better understand your perceptions of health needs and services in the area.

We have just a few short questions, and would really value your input.

Screening

- 1. To begin, in what year were you born? [ENTER 4 DIGIT YEAR] [CODE REFUSE=9999 but terminate] *If "1996" or later, will thank and terminate.*
- 2. Gender [MARK RESPONSE BASED ON VOICE RECOGNITION; DO NOT ASK]
 - o Male
 - o Female

a healthy community or a healthy people.

[INTERVIEWER READ] A healthy community can include different things such as the availability of healthcare services including behavioral health to social, economic, and environmental factors to lifestyle topics such as obesity, smoking, substance abuse, and healthy living issues.

	OPEN ENDED
4.	For the next questions, I 'm going to ask you about a number of possible things in these
	areas that the community may or may not need to pay more focus and attention to. For
	each, please let me know on a scale of 1 to 3 where 1 means that No More Focus is
	needed, 2 is Somewhat More Focus Needed, and, 3 is Much More Focus Needed
	[INTERVIEWER REPEAT SCALE AS NEEDED]

3. Thinking broadly about health, please tell me what comes to mind when you think about

$[PROGRAMMING\ ROTATE\ CATEGORIES,\ KEEP\ "MEASURES"\ IN\ CONSISTENT\ ORDER\ WITHIN\ DOMAIN]$

DOMAIN	MEASURE	Don't Know (0)	No More Focus Needed (1)	Somewhat More Focus Needed (2)	Much More Focus Needed (3)
Medical / Health Status Issues	Health services for seniors	0	1	3	4
	Coordination of care between different doctors or other service providers	0	1	3	4
	Support to help people to better manage chronic conditions such as diabetes, asthma, obesity, heart disease, high cholesterol, high blood pressure, or similar conditions	0	1	3	4
	Screening for cancer, diabetes, heart disease, stroke, or other chronic conditions	0	1	3	4
	Services for depression, anxiety, or other mental health conditions other than substance abuse (which we will ask about later)	0	1	3	4
	Support to help people stay healthy – wellness programs	0	1	3	4
Social, Economic, and Physical Environment Issues	Transportation services for people needing to go to doctor's appointments or the hospital	0	1	3	4
	Affordable healthcare services for people or families with low income				
Risk and Protective Lifestyle Behaviors	Primary care services from a family doctor or pediatrician	0	1	3	4
	Publically available education about wellness and ways to stay healthy – exercise, nutrition	0	1	3	4
	Publically available education about ways to manage obesity	0	1	3	4
	Substance abuse education	0	1	3	4
	Substance abuse intervention and treatment	0	1	3	4
	Youth oriented health programs	0	1	3	4

^{5.} Regardless of the issues that I mentioned, what do you think are the three greatest community health issues in the area?

Now with the following statements, please indicate if you Strongly Agree, Agree, Disagree, or Strongly Disagree with each Statement

agi	· · ·	of Strongry Disagree with each Statement
6.	Wł	nen all is said and done, I am the person who is responsible for managing my health.
		Strongly Agree
		Agree
		Disagree
		Strongly Disagree

7.	Taking an active role in my own healthcare is the most important factor in	
	determining my health and ability to function.	
	□ Strongly Agree	
	□ Agree	
	□ Disagree	
	☐ Strongly Disagree	
8.	What is the highest grade or year in school you completed?	Check one
	Less than high school	
	Graduated high school	
	Some college or vocational training	
	Graduated college (4-year Bachelor Degree)	
	Completed Graduate or Professional school (Masters, PhD, Lawyer)	
9.	Which of the following ranges best describes your total annual household in	ncome last year?
	Less than \$25,000	
	\$25,000 to \$54,999	
	\$55,000 to \$79,999	
	\$80,000 or more	

Appendix B: Homeless Shelter Directory

Source: Palm Beach County Homeless Coalition, 2015.

Palm Beach County

Palm Beach County Homeless Coalition

West Palm Beach, FL 33401 (561) 355-4663

Homeless Coalition

http://www.shelterlistings.org/details/22445/



Firehouse Recovery Margate

Margate, FL 33063 (954) 651-2154

Sober Housing

http://www.shelterlistings.org/details/38210/



Pat Reeves Village

West Palm Beach, FL 33401

561-514-0564

Continuum of care for the homeless and homeless at-risk in Palm Beach County

http://www.shelterlistings.org/details/38360/



St. Laurence Chapel A Caring Place for Homeless People Day Shelter

Pompano Beach, FL 33069

(954) 972-2958



Adopt-a-family West Palm Beach

West Palm Beach, FL 33409 (561) 253-1361

Transitional Housing, Permanent Supportive Housing http://www.shelterlistings.org/details/30791/



http://www.shelterlistings.org/details/22477/

Women in Distress of Broward County - Shelter, Outreach

Fort Lauderdale, FL 33302

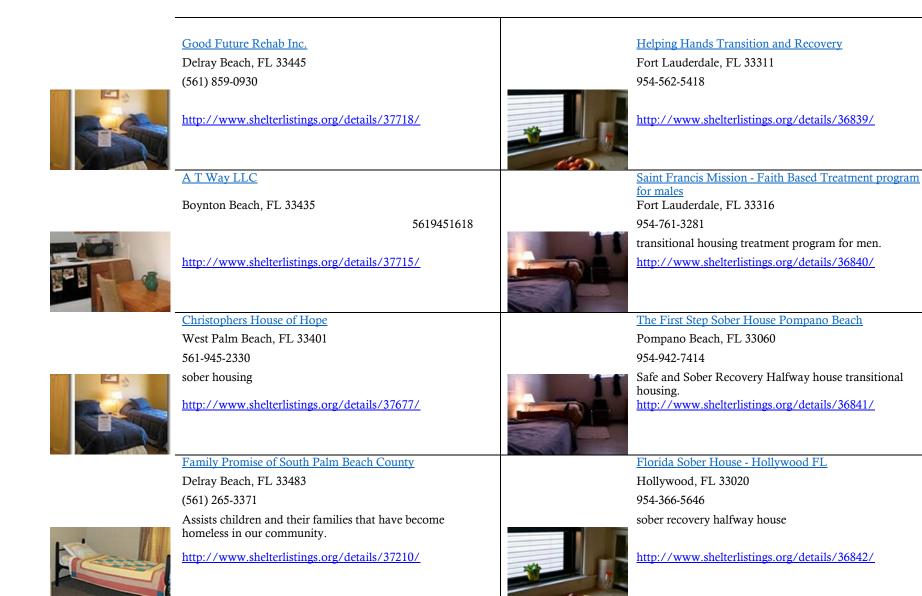
(954) 761-1133

Women's shelter and outreach.

http://www.shelterlistings.org/details/31780/



	Faith-hope-love-charity Inc+ Palm Springs Palm Springs, FL 33461 (561)968-1612 Housing Assistance, Supportive Housing for veterans. http://www.shelterlistings.org/details/24061/		Recovery Workz Pompano Beach, FL 33064 419-689-2130 Christian based sober living house http://www.shelterlistings.org/details/37701/
	Holy Ground Shelter for Homeless		Internatonal Kingdom Empowerment Alliance (The House That Love Built)
	Riviera Beach, FL 33404		Hollywood, FL 33020
	(561) 355-5040		(561) 255-9459
	Shelter for homeless, pregnant or parenting teen girls ages 17 to 21 years old.		Transitional housing and services.
No. of the last of	http://www.shelterlistings.org/details/38021/		http://www.shelterlistings.org/details/37640/
	Drug Abuse Foundation of Palm Beach County Halfway House		Sanctuary House of S. Florida, Inc.
	Delray Beach, FL 33444		Wilton Manors, FL 33311
	(561) 732-0800		954-882-8363
2	Halfway House, Substance Abuse Treatment		Recover home for men.
	http://www.shelterlistings.org/details/22601/		http://www.shelterlistings.org/details/37320/
	Wayside House Halfway House		Lamb of God Transitional Housing For Men
	Delray Beach, FL 33483		Pompano Beach, FL 33060
	(561) 278-0055		954-946-7332
	Halfway House, Substance Abuse Treatment	4 22	transitional housing program for men.
	http://www.shelterlistings.org/details/22602/		http://www.shelterlistings.org/details/36838/



	The Go House - Christian Sober House		Foundations Residential House
	Boynton Beach, FL 33436		Oakland Park, FL 33309
	561-880-1066		(954) 776-8036
	Christian Sober House		Halfway House, sober recovery house
	http://www.shelterlistings.org/details/36965/		http://www.shelterlistings.org/details/36843/
THE SECTION			
	Oakwood Center of the Palm Beaches Inc Panda		Recovery House 54 Dania Beach
	Program		
	Belle Glade, FL 33430		Dania Beach, FL 33004
	(561) 993-8082		954-394-6309
	Substance Abuse Treatment. Residential long-term		affordable recovery homes
	treatment (more than 30 days)		
	http://www.shelterlistings.org/details/36432/		http://www.shelterlistings.org/details/36846/
		VA BURNEY	
	West Palm Beach Housing Authority West Palm Beach		Dania Beach Housing Authority Dania Beach
	West Palm Beach, FL 33407		Dania Beach, FL 33004
	(561) 655-8530		(954) 924-6800
	Housing Authority, Public Housing, Section 8 (HCV),		Housing Authority, Low Income Affordable Housing,
	Portable Housing Choice Voucher, Section 8 Veterans Housing Voucher, Low Income Housing Programs		Public Housing
	flousing voucher, Low income flousing frograms	A STATE OF THE STA	
	http://www.shelterlistings.org/details/32244/		http://www.shelterlistings.org/details/31968/
		Mar II	
	Housing Partnership Inc Riviera Beach		Deerfield Beach Housing Authority Deerfield Beach
	Riviera Beach, FL 33404		Deerfield Beach, FL 33441
	(561) 841-3500		(954) 425-8449
	Housing Authority, Low Income Affordable Housing,	4 931	Housing Authority, Low Income Affordable Housing,
	Public Housing	THE LO A	Public Housing
de la	http://www.shelterlistings.org/details/32308/		http://www.shelterlistings.org/details/32666/



Riviera Beach Housing Authority Riviera Beach

Riviera Beach, FL 33404

(561) 845-7450

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32321/



Fort Lauderdale Housing Authority Fort Lauderdale

Fort Lauderdale, FL 33315

(954) 525-6444

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32677/



Palm Beach County Housing Authority West Palm Beach

West Palm Beach, FL 33407

(561) 684-2160

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32571/



Broward County Housing Authority Lauderdale Lakes

Lauderdale Lakes, FL 33319

(954) 497-4178

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32694/



Delray Beach Housing Authority Delray Beach

Delray Beach, FL 33445

(561) 272-6766

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32815/



Hollywood Housing Authority Hollywood

Hollywood, FL 33024

(954) 989-4691

Housing Authority, Low Income Affordable Housing, Public Housing

http://www.shelterlistings.org/details/32923/



Belle Glade Housing Authority Belle Glade

Belle Glade, FL 33430 561-996-2140



Catholic Charities - Link Up To Permanent Housing Wilton Manors Wilton Manors

Wilton Manors, FL 33305

(954) 568-6610

Housing Authority, Low Income Affordable Housing, Public Housing		Transitional Housing
http://www.shelterlistings.org/details/33426/		http://www.shelterlistings.org/details/31158/
Boca Raton Housing Authority Boca Raton		Aloha House - Halfway House Hollywood
Boca Raton, FL 33431		Hollywood, FL 33020
561.206.6200		(954) 923-8536
Housing Authority, Low Income Affordable Housing,		Transitional Housing
Public Housing		Transitional Troubing
http://www.shelterlistings.org/details/33434/		http://www.shelterlistings.org/details/31157/
Boca Raton Housing Authority Palmetto Park Rd Boca Raton		Eckerd Youth Alternatives - Juvenile Offender Aftercare Lauderhill
Boca Raton, FL 33432		Lauderhill, FL 33313
(561) 393-7785		(954) 714-5227
Housing Authority, Low Income Affordable Housing,		Transitional Housing
Public Housing http://www.shelterlistings.org/details/33467/		http://www.shelterlistings.org/details/31155/
 Florida Housing Corp Supportive Housing Wellington		Dan Marino Foundation - Kids At Home Program
Wellington, FL 33414		Weston, FL 33326
(843) 437-7575	2	(954) 389-4445
Supportive Housing and Services		Transitional Housing
http://www.shelterlistings.org/details/31676/		http://www.shelterlistings.org/details/31154/
The Haven Group Home Boca Raton		Camelot Community Care - Youth Transition Program
		Fort Lauderdale



Boca Raton, FL 33433 (561) 483-0962 Transitional Housing http://www.shelterlistings.org/details/31156/



Fort Lauderdale, FL 33309 (954) 958-3527 Transitional Housing http://www.shelterlistings.org/details/31153/



Children's Home Society - Transitions Home Lantana Lantana, FL 33462 (561) 547-0884 Transitional Housing http://www.shelterlistings.org/details/30792/



Covenant House - Transitional Housing Fort Lauderdale
Fort Lauderdale, FL 33304
(954) 561-5559
Transitional Housing
http://www.shelterlistings.org/details/31152/



Lake Park, FL 33403 (561) 845-0373 Transitional Housing http://www.shelterlistings.org/details/30789/

Freedom House Of Palm Beaches Lake Park



Hollywood, FL 33020 (954) 964-0123 Transitional Housing http://www.shelterlistings.org/details/30913/

Helping People In America / Cosac Hollywood



Project Success Lake Worth Transitional Housing
Lake Worth, FL 33460
(561) 540-4267
Transitional Housing
http://www.shelterlistings.org/details/30790/



Sunrise, FL 33351 (954)749-7230 Transitional Housing, Non Profit Organization http://www.shelterlistings.org/details/30624/

Jewish Adoption And Foster Care Options Sunrise



Florida Housing Corporation West Palm Beach West Palm Beach, FL 33401 (561) 659-9330 Transitional Housing



Jewish Family - Domestic Abuse Program Plantation
Plantation, FL 33324
(954) 370-2140
Transitional Housing

http://www.shelterlistings.org/details/30788/	http://www.shelterlistings.org/details/31160/
Faith Farm Ministries Boynton Beach Boynton Beach, FL 33437 (561) 737-2222 Transitional Housing http://www.shelterlistings.org/details/30786/	Sos Childrens Village - Woodside Gardens Coconut Creek Coconut Creek, FL 33073 (954) 420-5030 Transitional Housing http://www.shelterlistings.org/details/31164/
Fern House Center West Palm Beach West Palm Beach, FL 33409 (561) 471-0430 Transitional Housing http://www.shelterlistings.org/details/30787/	Salvation Army - Plymouth Colony Hollywood Hollywood, FL 33320 (954) 524-6991 Transitional Housing http://www.shelterlistings.org/details/31165/
Sistah To Sistah Recovery House West Palm Beach West Palm Beach, FL 33407 (561) 837-9997 Transitional Housing http://www.shelterlistings.org/details/30785/	Salvation Army Red Shield Lodge Fort Lauderdale Fort Lauderdale, FL 33311 (954) 524-6991 Transitional Housing http://www.shelterlistings.org/details/31166/
Phoenix House Lake Worth Lake Worth, FL 33460 (561) 585-2508 Transitional Housing	Susan B. Anthony - Residential Transitional Housing Pembroke Pines Pembroke Pines, FL 33025 (954) 733-6068 Transitional Housing
http://www.shelterlistings.org/details/30784/	http://www.shelterlistings.org/details/31169/

Oakwood Center Of The Palm Beaches West Palm Beach West Palm Beach, FL 33407 (561) 383-5777 Transitional Housing http://www.shelterlistings.org/details/30783/		Turning Point Bridge Transitional Housing Pompano Beach Pompano Beach, FL 33060 (954) 781-1400 Transitional Housing http://www.shelterlistings.org/details/31170/
Hope House Of The Palm Beaches West Palm Beach West Palm Beach, FL 33409	-	Covenant House Florida Fort Lauderdale Fort Lauderdale Fort Lauderdale, FL 33304
(561) 697-2600 Transitional Housing http://www.shelterlistings.org/details/30781/		(954) 561-5559 Transitional Housing http://www.shelterlistings.org/details/31376/
Housing Partnership West Palm Beach West Palm Beach, FL 33401		Housing Opportunities Mortgage Assistance And Effective Neighborhoo Fort Lauderdale Fort Lauderdale, FL 33304
(561) 841-3500 Transitional Housing http://www.shelterlistings.org/details/30782/		Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/22787/
Stand Down House (veterans Only) Lake Worth Lake Worth, FL 33461 (561) 649-9919		Covenant House Florida, Inc. Fort Lauderdale Fort Lauderdale, FL 33304 (800)683-8338
Transitional Housing http://www.shelterlistings.org/details/30779/		Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/24044/

	Turtle Nest Village Lake Worth		Senior Citizens Housing Development Corporation Of Fontana Sunrise
	Lake Worth, FL 33460		Sunrise, FL 33323
	(561) 586-8520		954-835-9200
	Transitional Housing		Non Profit Organization that provides housing assistance
No. of the last of	http://www.shelterlistings.org/details/30777/		http://www.shelterlistings.org/details/24045/
	The Salvation Army - Center Of Hope Transitional Housing West Palm Beach		Housing Foundation Of America Inc Pembroke Pines
	West Palm Beach, FL 33409		Pembroke Pines, FL 33024
	(561) 682-1118		
	Transitional Housing	The state of the s	Non Profit Organization that provides housing assistance
	http://www.shelterlistings.org/details/30778/	D-	http://www.shelterlistings.org/details/24066/
	Engagement Center Transitional Housing West Palm Beach		Cosac Homeless Assistance Center Davie
	West Palm Beach, FL 33402		Davie, FL 33329
	(561) 494-0125		
	Transitional Housing		Non Profit Organization that provides housing assistance
	http://www.shelterlistings.org/details/30776/		http://www.shelterlistings.org/details/24087/
	The Lord's Place Boynton Beach Family Shelter Boynton Beach		Haven Economic Development, Inc. Davie
	Boynton Beach, FL 33435		Davie, FL 33324
A STATE OF THE STA	(561) 736-7006		(954)423-1637
	Transitional Housing		Non Profit Organization that provides housing assistance
See	http://www.shelterlistings.org/details/30775/	TAMES OF	http://www.shelterlistings.org/details/24089/

7	V		



4kids Of South Florida Inc Ft Lauderdale

Fort Lauderdale, FL 33309 (954)977-9673

Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/24093/



http://www.shelterlistings.org/details/30771/

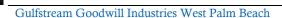
Lake Worth, FL 33460 (561)253-1361
Transitional Housing, Non Profit Organization http://www.shelterlistings.org/details/30750/



Broward Partnership For The Homeless Inc. Fort Lauderdale

Fort Lauderdale, FL 33311 (954)779-3990

Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/24094/



West Palm Beach, FL 33407 (561) 848-7200 Transitional Housing http://www.shelterlistings.org/details/31377/



Broward County Minority Builders Coalition Inc Ft Lauderdale

Fort Lauderdale, FL 33312 (954)792-1121

Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/24117/



Homes With Assistance Royal Palm Beach Royal Palm Beach

Royal Palm Beach, FL 33411 (561) 227-1503 Transitional Housing

Transitional Housing http://www.shelterlistings.org/details/31378/



Neighbors Assisting Neighbors Tamarac

Tamarac, FL 33321 (954)720-5150

Non Profit Organization that provides housing assistance http://www.shelterlistings.org/details/24119/



Ywca Harmony House West Belle Glade		Peer Center Inc Oakland Park
Belle Glade, FL 33430		Oakland Park, FL 33309
(561) 993-2204		(954)202-7867
Transitional Housing	The state of the s	Non Profit Organization that provides housing assistance
http://www.shelterlistings.org/details/31381/		http://www.shelterlistings.org/details/24124/
Housing Partnership Inc Riviera Beach		Citizens For Pets In Condos Inc Tamarac
Riviera Beach, FL 33404		Tamarac, FL 33320
(561)841-3500		(954)366-4555
Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
http://www.shelterlistings.org/details/23116/		http://www.shelterlistings.org/details/24125/
Adopt-a-family Of The Palm Beaches, Inc. Lake Worth		Food For The Poor, Inc. Coconut Creek
Lake Worth, FL 33460		Coconut Creek, FL 33073
		(954)427-2222
Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
http://www.shelterlistings.org/details/24058/		http://www.shelterlistings.org/details/24138/
Under One Roof Ministries, Inc. Tequesta		Broward Coalition For The Homeless, Inc. Sunrise
Tequesta, FL 33469		Sunrise, FL 33313
(561)799-9411		
 Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
http://www.shelterlistings.org/details/24070/	FEB	http://www.shelterlistings.org/details/24150/

	Hispanic Human Resources Council, Inc. West Palm		Sunrise Opportunities Inc Davie
	Beach		
	West Palm Beach, FL 33406		Davie, FL 33314
	(561)641-7400		
	Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
	http://www.shelterlistings.org/details/24076/	SUESTED STATES	http://www.shelterlistings.org/details/24151/
		5-5	
The same of the sa	Comprehensive Aids Program Of Palm Beach County,		God's Gift Inc Fort Lauderdale
	Inc. West Palm Beach		
	West Palm Beach, FL 33406		Fort Lauderdale, FL 33319
	Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
	http://www.shelterlistings.org/details/24107/		http://www.shelterlistings.org/details/24169/
	Howard E Hill Foundation Inc Belle Glade	>	Urban League Of Broward County, Inc. Fort Lauderdale
	Belle Glade, FL 33430		Fort Lauderdale, FL 33311
	561-996-4524		(954)584-0777
	Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
	http://www.shelterlistings.org/details/24110/	4 12	http://www.shelterlistings.org/details/24205/
-			
W II	Envision America Incorporated West Palm Beach West Palm Beach, FL 33402		Rebuilding Together Broward County Inc Oakland Park Oakland Park, FL 33334
	Non Profit Organization that provides housing assistance		Non Profit Organization that provides housing assistance
	ron Front Organization that provides housing assistance		tion from Organization that provides housing assistance
	http://www.shelterlistings.org/details/24116/		http://www.shelterlistings.org/details/24224/

Farmworkers Coordinating Council Of Palm Beach County, Inc. Lake Worth

Lake Worth, FL 33460 (561)533-7227

Non Profit Organization that provides housing assistance

http://www.shelterlistings.org/details/24128/

Hawkins Homes Inc Pompano Beach

Pompano Beach, FL 33060 (954)781-8537

Non Profit Organization that provides housing assistance

http://www.shelterlistings.org/details/24230/

We Help Community Development Corp Inc Belle Glade

Belle Glade, FL 33430

Non Profit Organization that provides housing assistance

Safety Net Foundation, Inc. Fort Lauderdale

Fort Lauderdale, FL 33311

(954)524-0800

Non Profit Organization that provides housing assistance

http://www.shelterlistings.org/details/24148/

http://www.shelterlistings.org/details/24244/

Crisis Housing Solutions, Inc. Davie

Comprehensive Community Care Network Inc W Palm Beach

West Palm Beach, FL 33406

561-472-9160

Non Profit Organization that provides housing assistance

954-587-0160

Agency that provides HUD Approved Housing Assistance Programs

Davie, FL 33314

http://www.shelterlistings.org/details/25821/

http://www.shelterlistings.org/details/24179/

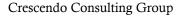
Mission Project Inc Palm Beach

Palm Beach, FL 33480



Deerfield Beach Housing Authority Deerfield Beach

Deerfield Beach, FL 33441



(561)358-1863	954-425-8449-11
Non Profit Organization that provides housing assistance	Agency that provides HUD Approved Housing Assistance Programs
http://www.shelterlistings.org/details/24188/	http://www.shelterlistings.org/details/25827/
Bridge To Life Inc Boynton Beach	Consolidated Credit Counseling Services, Inc. Fort
Boynton Beach, FL 33436	<u>Lauderdale</u> Fort Lauderdale, FL 33313
(561)734-7476	866-435-1876
Non Profit Organization that provides housing assistance	Agency that provides HUD Approved Housing Assistance Programs
http://www.shelterlistings.org/details/24210/	http://www.shelterlistings.org/details/25834/
Children's Case Management Organization, Inc. West Palm Beach	<u>Urban League Of Broward County (branch Office) Fort</u> <u>Lauderdale</u>
West Palm Beach, FL 33406	Fort Lauderdale, FL 33312
·	954-625-2574
Non Profit Organization that provides housing assistance	Agency that provides HUD Approved Housing Assistance Programs
http://www.shelterlistings.org/details/24215/	http://www.shelterlistings.org/details/25835/
United Way Of Palm Beach County Inc Boynton Beach	Urban League Of Broward County - Main Office Fort
Boynton Beach, FL 33426	<u>Lauderdale</u> Fort Lauderdale, FL 33311
(561)375-6600	954-584-0777
Non Profit Organization that provides housing assistance	Agency that provides HUD Approved Housing Assistance Programs
http://www.shelterlistings.org/details/24241/	http://www.shelterlistings.org/details/25836/

Association For Abused Women And Children, Inc. West Palm Beach

West Palm Beach, FL 33405 (561)586-1888 Non Profit Organization that provides housing assistance

http://www.shelterlistings.org/details/24252/

We Help Community Development Corporation Belle Glade

Belle Glade, FL 33430 561-992-5854

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25801/



Boynton Beach Faith Based Cdc Boynton Beach

Boynton Beach, FL 33435

561-752-0303

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25805/



Real Estate Education And Community Housing, Inc Palm Beach Gardens

Palm Beach Gardens, FL 33410 561-491-1670



Hollywood, FL 33020

305-826-9343

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25848/



Hope Human Resources Development Hollywood

Hollywood, FL 33023

954-342-8470

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25849/



Broward County Housing Authority Lauderdale Lakes

Lauderdale Lakes, FL 33319

954-497-4583

Agency that provides HUD Approved Housing

Assistance Programs

http://www.shelterlistings.org/details/25869/



Consumer Credit Counseling Services Of The Midwest Lighthouse Point

Lighthouse Point, FL 33064

800-355-2227

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25907/

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25873/



Housing Partnership, Inc. Riviera Beach - Supportive Housing

Riviera Beach, FL 33404 561-841-3500-10 HUD Approved Housing Assistance Programs,

Supportive housing

http://www.shelterlistings.org/details/25918/



<u>Housing Foundation Of America Pembroke Pines</u>

Pembroke Pines, FL 33024

954-923-5001

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25910/



Riviera Beach, FL 33404 561-845-1147

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25919/



Plantation, FL 33324

800-355-2227

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25914/



Credability - West Palm Beach Branch West Palm Beach

West Palm Beach, FL 33401 800-251-2227

Agency that provides HUD Approved Housing Assistance Programs

http://www.shelterlistings.org/details/25949/



Catholic Charities Angelica House

Pompano Beach, FL 33062

954-568-6610

Transitional Housing for families.



http://www.shelterlistings.org/details/22722/

Lorida Cooperative Extension - Palm Beach County Cooperative Extension Service West Palm Beach West Palm Beach, FL 33415 561-233-1700 Agency that provides HUD Approved Housing Assistance Programs http://www.shelterlistings.org/details/25951/	The Lippman Family Center Oakland Park, FL 33309 954-568-2801 Runaway Shelter for Youth http://www.shelterlistings.org/details/22723/
Life Improvement For Tomorrow, Inc. West Palm Beach	Ease Foundation Davie
West Palm Beach, FL 33409 877-868-7026 Agency that provides HUD Approved Housing Assistance Programs	Davie, FL 33317 (954)-797-1077 Social Services
http://www.shelterlistings.org/details/25952/	http://www.shelterlistings.org/details/22726/
Urban League Of Palm Beach County, Inc. West Palm Beach West Palm Beach, FL 33407 561-833-1461-30 Agency that provides HUD Approved Housing Assistance Programs	Sunlight Recovery Residential Treatment Center Deerfield Beach, FL 33441 (954) 421-6242 Residential Treatment Center
http://www.shelterlistings.org/details/25953/ Caron Renaissance Halfway House Boca Raton, FL 33487 (561) 241-7977 Halfway House, Detox, Treatment Center http://www.shelterlistings.org/details/22598/	http://www.shelterlistings.org/details/22597/ Dr Carmine J Pecoraro Psy D and Assoc Halfway House Wilton Manors, FL 33305 (954) 463-2723 Halfway House, substance abuse treatment http://www.shelterlistings.org/details/22603/

	Wellness Resource Center Halfway House		House of Hope Halfway House - Stepping Stones
	Boca Raton, FL 33487		Residential Fort Lauderdale, FL 33305
	(561) 995-7388		(954) 524-8989
	Halfway House, Substance Abuse Treatment		
	http://www.shelterlistings.org/details/22599/		http://www.shelterlistings.org/details/22604/
3 4		3 5	
	Palm Partners Recovery Centers Halfway House		3rd Step Mental Health Program Halfway House
	Delray Beach, FL 33444		Fort Lauderdale, FL 33311
	(561) 278-5800		(954) 462-4599
*	Substance abuse treatment, Detoxification, Halfway		Halfway House, Substance Abuse Treatment
	house, Buprenorphine Services	11	
1 21	http://www.shelterlistings.org/details/22600/		http://www.shelterlistings.org/details/22605/
	Faith Farm Residential Program		Susan B Anthony Recovery Center Halfway House
	Boynton Beach, FL 33437		Pembroke Pines, FL 33025
	(561)737-2222		(954) 733-6068
	Residential Program, Drug Addiction Recovery		Halfway House, Transitional Housing, Treatment
	http://www.shelterlistings.org/details/22592/		Centers http://www.shelterlistings.org/details/22606/
建型	mtp.//www.sickeristings.org/details/22072/		http://www.shetternstnigs.org/ details/ 22000/
	Clean Time Inn Halfway House		Cosac Foundation Hollywood FL
	Lake Worth, FL 33460		Hollywood, FL 33328
	(561) 547-4357	BECKE IN	954-964-0123
	Halfway house	w wat	Supportive Housing, Homeless Services
	http://www.shelterlistings.org/details/22400/		http://www.shelterlistings.org/details/22438/

	Jerome Golden Center Supportive Housing		Salvation Army Red Shield Lodge Fort Lauderdale
	West Palm Beach, FL 33407		Fort Lauderdale, FL 33302
	(561) 383-8000		954-524-6991
	Supportive Housing		Homeless Shelter, Transitional housing
	http://www.shelterlistings.org/details/22316/		http://www.shelterlistings.org/details/22439/
	Recovery Outreach Housing For Men		BARC Lauderhill Supportive Housing
	Riviera Beach, FL 33404		Lauderhill, FL 33311
	(561) 804-4559		954-535-2375
	Halfway House, Transitional Housing	- 2 ·	Supportive Housing
	http://www.shelterlistings.org/details/22321/		http://www.shelterlistings.org/details/22440/
elso.		Value	
	Catholic Charities Samaritan Center Long Term		Agape Love Inc/Let Go, Let God Inc / Men\'s
	Transitional Housing		Homeless Shelter
	Palm Beach Gardens, FL 33410		Plantation, FL 33312
	(561) 775-9500		954-792-4964
	Transitional Housing, Supportive Housing, Halfway		Homeless Shelter
2	Housing		
	http://www.shelterlistings.org/details/22328/	Dec St.	http://www.shelterlistings.org/details/22436/
		Real Real Property of the Party	
	Palm Beach County Homeless Services		Broward Partnership for the Homeless, Inc / Central
			Homeless Assistance Center
	West Palm Beach, FL 33407		Fort Lauderdale, FL 33301
No.	800-493-5902		954-779-3990
w South	Emergency Shelter, Halfway House, Transitional		Emergency Shelter
	Housing		
	http://www.shelterlistings.org/details/22300/	(42)	http://www.shelterlistings.org/details/22437/

	PATH Project Supportive Housing		Broward County Outreach Center Pompano Beach
	West Palm Beach, FL 33407		Pompano Beach, FL 33069
	561-383-8000		(954) 979-6365
	Supportive Housing		Supportive Housing, Transitional Housing, Halfway
			Housing
THE REAL PROPERTY AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS	http://www.shelterlistings.org/details/22301/	STATE OF THE STATE	http://www.shelterlistings.org/details/22326/
E - E		E - E	
	Stand Down Help For Homeless Veterans		Broward County Homeless Services
	Palm Springs, FL 33461		Fort Lauderdale, FL 33301
	(561) 968-1612		954-357-6101
	halfway house		Supportive Housing, Transitional Housing, Halfway
	http://www.shelterlistings.org/details/22202/		Housing http://www.shelterlistings.org/details/22329/
	http://www.sheiternstings.org/details/22202/	AND THE RESERVE OF THE PERSON	http://www.shelternstings.org/detans/22329/
	T		D 10 + H ' 0 + D
	Fern House Halfway House		Broward County Housing Options Program
	West Palm Beach, FL 33409		Fort Lauderdale, FL 33311
	561-471-0430		954-357-5099
The state of the s	halfway house	1 A A	Supportive Housing, Transitional Housing, Substance Abuse Treatment, Halfway House
			•
	http://www.shelterlistings.org/details/22196/		http://www.shelterlistings.org/details/22330/
	Sunset House Extended Care Recovery For Men		Miami Rescue Mission - Broward Outreach Center
	Palm Beach Gardens, FL 33410		Hollywood, FL 33022
	561-627-9701	W III	954-926-7417
	halfway house		7J4-720-7417
	http://www.shelterlistings.org/details/22195/		http://www.shelterlistings.org/details/19452/
	nttp://www.sneiternstings.org/details/22195/		nttp://www.sneiterlistings.org/details/19452/



The Lord's Place - Family Housing Programs

West Palm Beach, FL 33402 561-494-0125 Emergency Housing, Supportive Housing, Education Assistance, Employment Assistance

http://www.shelterlistings.org/details/20475/



Miami Rescue Mission - Broward Outreach Center For Women And Children Hollywood (for Women And Children)

Hollywood, FL 33022 954-926-7417

http://www.shelterlistings.org/details/19453/



The Lord's Place - Joshua House (for Men)

Boynton Beach, FL 33435 561-736-7006



Miami Rescue Mission - Broward Outreach Center Pompano Beach

Pompano Beach, FL 33069

954-979-6365

Emergency Housing, Transitional Housing, Halfway House

http://www.shelterlistings.org/details/19454/



Covenant House Florida Of Orlando - Ft. Lauderdale Community Service Center (for Youth)

Fort Lauderdale, FL 33304 954-561-5559



http://www.shelterlistings.org/details/20209/



<u>Covenant House Florida Of Ft. Lauderdale - Ft.</u> Lauderdale Shelter Care (for Youth)

Fort Lauderdale, FL 33304 954-561-5559

http://www.shelterlistings.org/details/20211/



Covenant House Florida Of Fort Lauderdale - Fort Lauderdale Rights Of Passage (for Older Teens)

Fort Lauderdale, FL 33304 954-561-5559

http://www.shelterlistings.org/details/20218/



Homeless Voice Shelter Hollywood, FL 33020 954-964-0123

Appendix C: Additional Demographic and Health Status Tables

Education and Poverty Status by Select Town

Education Attainment Population 25 years and over							
Primary and Secondary Service Area							
Attainment Level	PSA	SSA		Broward County	Palm Beach County		Florida
Less than 9th grade	3.8%	6.5%		5.2%	5.9%		5.4%
9th to 12th grade, no dipl.	5.3%	6.7%		6.9%	6.5%		8.1%
High school graduate	22.9%	24.9%		27.8%	26.2%		29.7%
Some college, no degree	20.4%	20.7%		20.5%	20.4%		20.9%
Associate's degree	8.7%	9.0%		9.5%	8.3%		9.2%
Bachelor's degree	22.9%	19.5%		19.4%	20.4%		17.1%
Graduate or professional degree	13.5%	9.4%		10.8%	12.3%		9.6%
Percent high school graduate or higher	91.0%	86.8%		88.0%	87.6%		86.5%
Percent bachelor's degree or higher	36.4%	28.9%		30.2%	32.7%		26.7%

Source: 2009-2013 American Community Survey 5-Year Estimates

Total Population and Trends

Total Population							
Service Area 2000 2010 2015 2020 % Change % C 2010							
PSA	598,897	659,584	684,119	718,777	10%	9%	
SSA	505,230	556,465	574,716	604,983	10%	10%	

Source: US Census, ESRI 2010, 2020 projections.

Gender

Gender							
Service Area Males Females							
PSA	47.5%	52.5%					
SSA	48.5%	51.5%					
Florida	48.9	51.1					

Source: US Census, ESRI 2010.

Age Group Breakdown

Age Breakdown							
							Median Age
PSA	14.0%	10.0%	21.2%	26.2%	13.0%	15.2%	49.0
SSA	17.7%	12.4%	25.3%	27.0%	9.2%	8.5%	40.9
Florida	17.2%	12.9%	24.9%	26.9%	9.8%	8.4%	41.2

Source: US Census, ESRI 2010.

Senior Population Trends

Senior Citizen Population Breakdown									
	2010		2015			2020			
	65 - 74	75 - 84	85+	65 - 74	75 - 84	85+	65 - 74	75 - 84	85+
Primary Service Area	11.5%	10.4%	5.1%	13.0%	9.7%	5.8%	14.4%	10.5%	5.8%
Secondary Service Area	7.4%	5.4%	3.0%	9.2%	5.3%	3.2%	10.7%	6.2%	3.2%
Broward County	6.8%	4.9%	2.4%	7.8%	4.7%	2.3%			
Palm Beach County	9.5%	8.3%	3.6%	10.4%	7.8%	4.0%			

Source: US Census, ESRI 2010, 2020 projections.

Household Income

Household Income								
Service Area	<\$15,000	\$15,000 - \$24,999	\$25,000 - \$34,999	\$35,000 - \$49,999	\$50,000 - \$74,999	\$75,000 - \$99,999	\$100,000+	Median Household Income
PSA	11.8%	11.6%	10.4%	13.8%	17.1%	11.2%	24.1%	\$52,457
SSA	11.8%	12.4%	10.6%	14.6%	18.6%	11.4%	20.7%	\$50,602
Florida	13.5%	12.1%	11.7%	15.1%	18.1%	11.1%	18.3%	\$47,212

Source: US Census, ESRI 2010.

Social and Environmental Factors

Educational Deficits

Population With No High School Diploma						
Total Percent with No High School Report Area Age 25 Diploma Race Black or African White American						
Broward County	1,238,034	12.19%	9.50%	19.97%		
Palm Beach	961,003	12.50%	9.93%	23.67%		

Source: Community Commons, 2015; www.communitycommons.org.

Unemployment

Unemployment						
Report Area	Labor Force	Number Employed	Number Unemployed	Unemployment Rate		
Broward County	1,001,172	938,301	62,871	6.3		
Palm Beach	689,066	647,451	41,615	6		

Source: Community Commons, 2015; www.communitycommons.org.

Poverty and Inadequate Housing

Poverty and Households with Public Assistance Income						
Report Area	Percent Population in Poverty (below 100% FPL)	Percent Under Age 18 in Poverty	Percent living in inadequate housing	Percent Households with Public Assistance Income		
Broward County	14.3%	18.9%	27.0%	1.7%		
Palm Beach	14.5%	22.4%	25.0%	1.6%		

Source: US Census Bureau, American Community Survey. 2009-13

Mental Health

Mental Health					
Report Area	Average Number of mentally unhealthy days in the past 30 days ³¹	Percentage of Population Without Adequate Social / Emotional Support			
Broward County	3.4	23.0%			
Palm Beach	3.4	18.1%			

Source: Community Commons, 2015; www.communitycommons.org.

³¹ This measure is based on survey responses to the question: "Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?"

Oral Health

Oral Health						
Report Area	Total Population (Age 18)	Total Adults with Poor Dental Health	Percent Adults with Poor Dental Health			
Broward County	1,339,076	169,656	12.7%			
Palm Beach	1,031,474	183,889	17.8%			

Source: Community Commons, 2015; www.communitycommons.org.

Maternal and Child Health

Maternal and Child Health							
Report Area	Percentage of live births with low birthweight	Number of infant deaths (within 1 year) per 1,000 live births	Number of deaths among children under age 18 per 100,000	Teen Birth rate per 1,000 female population, ages 15-19			
Broward County	9.30%	6.1	49.8	27			
Palm Beach	9.10%	6.1	47.8	30			

Source: Community Commons, 2015; www.communitycommons.org.

Suicide Rates – Historical by Gender and Age Group

Suicide (All Means) Age-Adjusted Death Rate, 3-Year Rolling Rates

	•				· ·			
Palm Beach County						Stat	te	
	Mal	le	Fema	ıle	Mal	e	Fema	ıle
Years	Count	Rate	Count	Rate	Count	Rate	Count	Rate
1993-95	296	20.8	93	5.8	4,956	23.8	1,351	5.9
1994-96	304	20.7	95	5.8	5,061	23.8	1,283	5.5
1995-97	302	19.6	101	6.1	5,057	23.1	1,322	5.6
1996-98	315	19.6	106	6.2	4,996	22.2	1,401	5.9
1997-99	314	19.3	113	6.6	4,881	21.1	1,440	5.8
1998-00	306	18.6	119	7.0	4,938	20.9	1,422	5.6
1999-01	323	18.7	126	7.0	5,080	21.0	1,413	5.5
2000-02	339	18.8	128	6.7	5,292	21.3	1,464	5.6
2001-03	350	18.7	124	6.4	5,395	21.3	1,519	5.7
2002-04	346	18.0	124	6.2	5,403	20.8	1,604	5.9
2003-05	329	16.9	134	6.7	5,340	20.1	1,644	5.9
2004-06	340	17.2	131	6.4	5,403	19.8	1,697	5.9
2005-07	356	18.0	140	6.8	5,600	20.0	1,688	5.8
2006-08	385	19.1	151	7.1	5,964	20.9	1,739	5.9
2007-09	410	20.7	160	7.3	6,339	22.1	1,808	6.1
2008-10	414	20.8	152	6.7	6,490	22.3	1,839	6.1
2009-11	435	21.5	143	6.2	6,556	22.3	1,815	5.9
2010-12	435	21.0	157	7.0	6,533	21.9	1,906	6.1
2011-13	441	20.9	176	7.9	6,599	21.9	1,980	6.4
2012-14	475	22.0	180	7.8	6,696	22.0	2,079	6.6

Suicide (All Means) Crude Death Rate Ages 0-44, 3-Year Rolling Rates

		Palm E	Beach			Sta	te	
	Mal	le	Fema	ale	Mal	le	Female	
Years	Count	Rate	Count	Rate	Count	Rate	Count	Rate
1993-95	148	18.0	35	4.4	2,337	17.7	609	4.7
1994-96	141	16.7	38	4.6	2,413	18.0	592	4.5
1995-97	132	15.3	40	4.8	2,354	17.3	603	4.5
1996-98	129	14.6	41	4.8	2,289	16.5	640	4.8
1997-99	136	15.1	47	5.3	2,190	15.6	644	4.7
1998-00	135	14.6	52	5.8	2,184	15.3	611	4.4
1999-01	132	14.0	53	5.8	2,180	15.0	610	4.3
2000-02	127	13.2	51	5.5	2,211	15.0	618	4.3
2001-03	126	12.9	55	5.8	2,269	15.2	643	4.4
2002-04	117	11.7	51	5.2	2,277	15.0	645	4.4
2003-05	125	12.2	60	6.0	2,260	14.6	647	4.3
2004-06	123	11.8	54	5.3	2,206	14.0	639	4.2
2005-07	142	13.4	55	5.3	2,214	13.8	641	4.1
2006-08	139	13.1	49	4.7	2,278	14.1	660	4.2
2007-09	164	15.5	44	4.3	2,423	15.0	699	4.5
2008-10	156	14.9	40	3.9	2,403	15.0	686	4.4
2009-11	160	15.4	34	3.3	2,377	15.0	657	4.2
2010-12	151	14.6	46	4.6	2,301	14.5	672	4.3
2011-13	146	14.0	53	5.2	2,331	14.6	701	4.5
2012-14	158	15.1	52	5.1	2,372	14.8	723	4.6

Suicide (All Means) Crude Death Rate Ages 45-64, 3-Year Rolling Rates

		Palm Be	each			State	•	
	Male		Female	e	Male		Femal	e
Years	Count	Rate	Count	Rate	Count	Rate	Count	Rate
1993-95	69	26.2	28	9.4	1,211	29.9	368	8.2
1994-96	80	29.0	29	9.4	1,245	29.6	354	7.7
1995-97	78	27.0	31	9.6	1,283	29.3	395	8.2
1996-98	90	29.5	34	10.0	1,325	29.0	436	8.7
1997-99	90	27.9	37	10.3	1,330	27.8	461	8.8
1998-00	95	27.9	46	12.2	1,394	27.7	491	9.0
1999-01	101	28.0	49	12.3	1,513	28.7	516	9.0
2000-02	115	30.0	48	11.4	1,696	30.7	567	9.5
2001-03	123	30.6	39	8.9	1,755	30.6	610	9.8
2002-04	136	32.1	42	9.1	1,815	30.3	679	10.5
2003-05	121	27.6	43	9.0	1,806	29.1	725	10.8
2004-06	138	30.3	47	9.5	1,927	29.8	758	10.9
2005-07	134	28.9	58	11.4	2,055	30.8	766	10.7
2006-08	159	33.6	74	14.3	2,281	33.3	797	10.8
2007-09	156	32.4	84	15.9	2,473	35.4	808	10.8
2008-10	172	35.0	78	14.5	2,643	36.9	833	10.8
2009-11	187	37.3	80	14.7	2,710	37.1	838	10.7
2010-12	193	38.0	77	14.0	2,702	36.4	912	11.4
2011-13	189	36.9	91	16.4	2,623	35.1	938	11.7
2012-14	179	34.7	86	15.4	2,580	34.2	972	12.0

Suicide (All Means) Crude Death Rate Ages 64 and Over 3-Year Rolling Rates

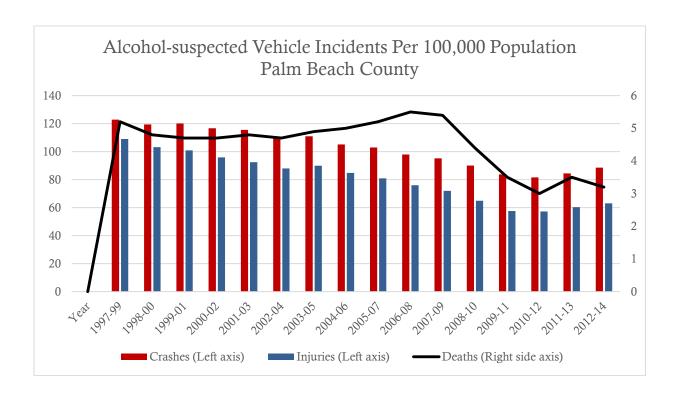
		Palm F	Beach			Sta	te	
	Mal	e	Fema	ıle	Mal	e	Fema	ıle
Years	Count	Rate	Count	Rate	Count	Rate	Count	Rate
1993-95	79	24.6	30	7.1	1,459	41.5	391	8.4
1994-96	83	25.1	28	6.5	1,444	40.2	352	7.4
1995-97	93	27.4	30	6.8	1,471	40.2	338	7.0
1996-98	98	28.4	32	7.1	1,431	38.5	335	6.9
1997-99	91	26.0	31	6.8	1,415	37.6	344	7.0
1998-00	79	22.4	23	5.0	1,403	36.8	331	6.7
1999-01	93	26.1	25	5.4	1,434	37.1	301	6.0
2000-02	99	27.5	30	6.4	1,430	36.2	294	5.7
2001-03	103	28.2	31	6.5	1,420	35.2	280	5.4
2002-04	95	25.8	32	6.7	1,357	33.1	296	5.6
2003-05	86	23.2	31	6.5	1,327	32.0	289	5.5
2004-06	83	22.3	32	6.7	1,328	31.5	321	6.0
2005-07	85	22.6	30	6.2	1,401	32.5	303	5.5
2006-08	93	24.5	33	6.8	1,481	33.5	307	5.5
2007-09	97	25.4	35	7.2	1,515	33.7	324	5.7
2008-10	95	24.4	36	7.2	1,515	32.9	344	5.9
2009-11	97	24.4	30	5.9	1,547	32.7	342	5.8
2010-12	99	24.4	37	7.1	1,616	33.4	353	5.9
2011-13	112	27.3	37	7.0	1,740	35.2	371	6.1
2012-14	145	34.9	46	8.6	1,839	36.5	417	6.7

Physical Environment

Physical Environment								
Report Area	Total Population	Average Daily Density of Fine Particulate Matter Per Cubic Meter (PM2.5)	Percentage of Population Potentially Exposed Water Exceeding a Violation Limit	Percentage of the Workforce That Drives Alone to Work ³²	Percentage of Workforce Commuting More than 30 Minutes ³³			
Broward County	1,869,235	10.7	15%	80%	43%			
Palm Beach	1,397,710	10.6	6%	79%	33%			

Source: County Health Rankings, 2015; www.countyhealthrankings.org.

Alcohol-suspected Vehicle Accidents



³² The transportation choices that communities and individuals make have important impacts on health through active living, air quality, and traffic crashes. The choices for commuting to work can include walking, biking, taking public transit, or carpooling, the most damaging to the health of communities is individuals commuting alone.

³³ A 2012 study in the American Journal of Preventive Medicine found that the farther people commute by vehicle, the higher their blood pressure and body mass index. Also, the farther they commute, the less physical activity the individual participated in.

Appendix D: Leadership Group Presentations	
Crescendo Consulting Group	112



Community Health Needs Assessment

Community Meeting
September 29, 2015



Goal and Agenda

- ▶ Goal ... Engage you in the Community Health Needs Assessment process
 - Define a "healthy community"
 - Identify service gaps
 - Develop a project "line of sight"

Agenda

- Discuss the background of the project
- Review the requirements
- Present and discuss some initial findings the emerging story
- Discuss perceptions of community needs
- Discuss the implications for next steps



Background of the Project

- ▶ The Affordable Care Act (ACA) requires not-forprofit hospitals to conduct a Community Health Needs Assessment (CHNA) every three years.
- The goal: clearly identify and prioritize service gaps and ways to help improve community health

 in addition to meeting state and federal regulations.

Requirements

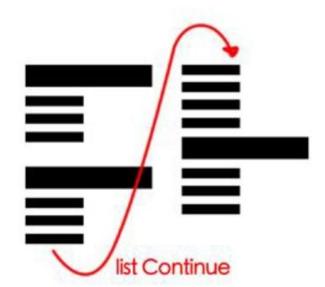
- Close definition of the community served
- Methodology
 - Data review
 - Quantitative survey
 - Qualitative discussion groups





Prioritized List of Community Health Needs

- Prioritized list of community health needs
- List of community health or health-related resources
- Evaluation of progress previous CHNA



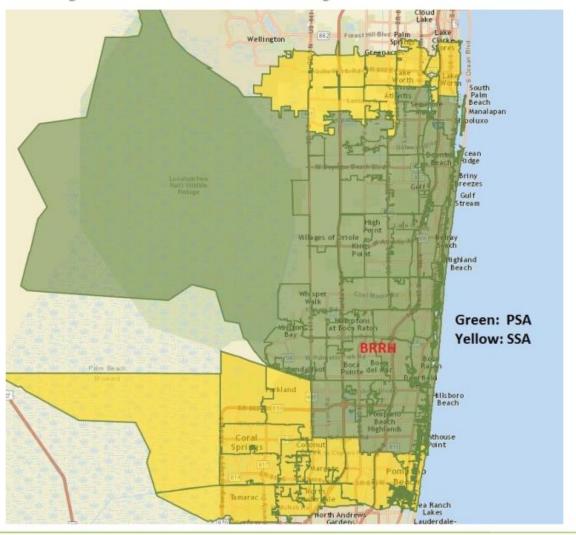


Total County Map - Broward and Palm Beach

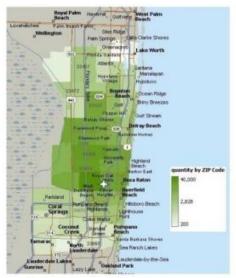




Primary and Secondary Service Areas



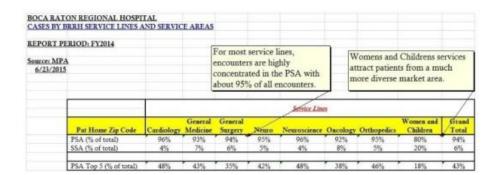
Boca Raton Regional Hospital Map of encounters by zip code



Boyal Palm Payerial Outside Palm Roach Reach Rea

Encounters - All Service Lines

Women and Children's Encounters





Preview of Select Data Sets

Parts of the emerging story...

- Demographics impact the health of the community (pro and con)
- Leading causes of death and hospitalization are similar to other comparable locations
- Some chronic conditions are elevated in the area, but care for conditions is very good
- ▶ There are some clear areas for focus efforts



Demographic Profile Summary

- Approximately 1.25 MM people live in the combined service area.
- The number of seniors will increase by approximately 100,000 in 2020 (versus 2010)
- Age and income health service use drivers – impact community health, especially in the PSA

ce		health needs	
Y Tends to health ne	INCREASE eds		

Tanda to LOWED

	Demographics								
Service Area	Total Population - 2015	% of Population 65+	# Senior Increase 2010 - 2020	Median Age	Median Income				
PSA	684,119	28.5%	58,962	* 49.0	\$52,457				
SSA	574,716	17.7%	41,775	40.9	\$50,602				



Leading Causes of Death

Leading Causes of Death, Palm Beach County	, 2013
Cause of Death	Percent of Total Deaths
ALL CAUSES	100
HEART DISEASE	25.6
CANCER	23.8
STROKE	5.6
CHRONIC LOWER RESPIRATORY DISEASE	4.9
UNINTENTIONAL INJURIES	4.7
ALZHEIMER'S DISEASE	3.3
DIABETES MELLITUS	2.0
KIDNEY DISEASE	1.8
SUICIDE	1.6
PARKINSON'S DISEASE	1.5

Leading Causes of Death, Broward County,	2013
Cause of Death	Percent of Total Deaths
ALL CAUSES	100
HEART DISEASE	25.9
CANCER	23.9
STROKE	5.4
CHRONIC LOWER RESPIRATORY DISEASE	5.1
UNINTENTIONAL INJURIES	4.1
ALZHEIMER'S DISEASE	2.6
KIDNEY DISEASE	2.2
DIABETES MELLITUS	2.0
SUICIDE	1.5
PNEUMONIA/INFLUENZA	1.4

Chronic Disease Prevalence

- Heart disease and cholesterol rates are high in Palm Beach County
- Mortality is relatively low; indicating better than average disease management

Chronic Diseases							
Report Area	Percent Adults with Heart Disease	Percent Adults with High Cholesterol	Percent Adults with BMI > 30.0 (Obese)	Major Cardiovascular Diseases Death Rate per 100,000			
Palm Beach	6.75%	43.39%	22.90%	165.9			
Broward	3.65%	37.10%	23.30%	205.0			
Florida	5.60%	41.90%	25.39%	202.9			

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Community Health Means ...???

Asthma Alcohol Neurology Access
Education DrugAbuse CommunityRelations
CareCoordination WomensHealth
Cancer HighRisk Navigation
Intervention BehavioralHealth
FinancialIssues Chronic Disease
Diabetes Collaboration
Smoking

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Discuss Perceptions of Community Needs

- Discussion topics ...
 - What defines a "healthy" community?
 - What are the needs or "service gaps" in this area?
 - Which impact the largest numbers of people? Which needs are growing?
 - How important is it to engage other community service providers? How do you do it? Challenges? ...and solutions?
 - If you could only address two or three community health issues, what would they be, and why?



Keys to Success

- Community engagement
- ▶ A CHNA that dovetails with the Strategic Plan, honors the hospital's mission, meets internal goals, improves community health to the greatest degree possible
- Prioritize initiatives based on...
 - The degree of need within the community
 - Resource requirements
 - Long-term versus short-term objectives



Practical Requirements for Success

- Supportive hospital executives
- Highly engaged Leadership Group
- Clearly recognized needs
- Moderate or large number of community groups serving underserved populations willing to collaborate
- Incorporation with strategic objectives
- \$ome funding

"Can't Boil the Ocean"



Implications for Next Steps

- Cast a broad net quantitative survey, additional interviews, data analysis
- Meet again next month to discuss progress



Questions?

Scott Good, (207) 774-2345 ext-115 scottg@crescendocg.com





Community Health Needs Assessment

Community Meeting
October 29, 2015



Goal and Agenda

- Goal ... Update you about the CHNA process and get additional insight – especially about mental health / SA, care coordination, senior services
- Agenda
 - Progress of the project
 - Review the "Story"
 - Update on the community survey
 - Care coordination models
 - Senior services
 - Identify any related strategic issues
- Discuss the implications for next steps



Project Progress

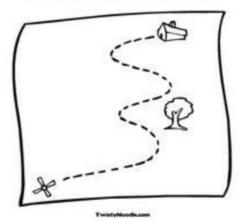
- Secondary data is largely collected
- Community survey finishing today (we have early results!)
- Leadership Group insight has been excellent
- Prioritization ... Next steps



The "Story"

- Emerging around a select number of actionable areas of focus
- Need to refine some areas
 - Review progress
 - Look at interim results
 - Discuss, in detail, a few key areas

story map





Project Progress: Secondary Data Review

- Standard demographics
- Social and Physical Environment (Education, Unemployment, Poverty, Crime, the Environment)
- ▶ Health Status Profile (Death, Chronic Disease, MH/BH, General Health, Oral Health)
- Risk and Protective Lifestyle Behaviors (Access, Nutrition, Obesity, SA)



Demographic Profile Summary

- Approximately 1.25 MM people live in the combined service area.
- The number of seniors will increase by approximately 100,000 in 2020 (versus 2010)
- Age and income health service use drivers – impact community health, especially in the PSA

e	health needs	
Tends to INCREASE health needs		

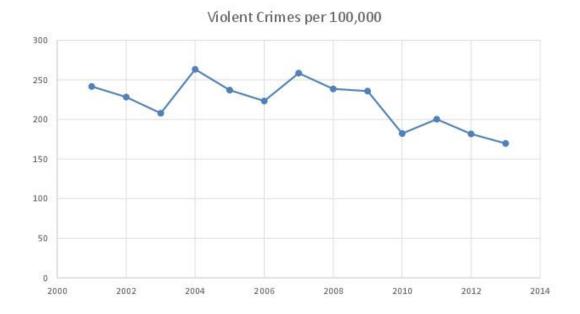
Tonds to LOWER

	Demographics							
Service Area	Total Population - 2015	% of Population 65+	# Senior Increase 2010 - 2020	Median Age	Median Income			
PSA	684,119	28.5%	58,962	* 49.0	\$52,457			
SSA	574,716	17.7%	41,775	40.9	\$50,602			



Social and Physical Environment

Violent crime shows a good trend



Social and Physical Environment Poverty in Boca Raton

▶ Shaded area – over 50% of residents have income below 100% FPL.

But

They are all likely to be FAU students



Health Status Chronic Disease Prevalence

- Heart disease and cholesterol rates are high in Palm Beach County
- Mortality is relatively low; indicating better than average disease management

Chronic Diseases							
Report Area	Percent Adults with Heart Disease	Percent Adults with High Cholesterol	Percent Adults with BMI > 30.0 (Obese)	Major Cardiovascular Diseases Death Rate per 100,000			
Palm Beach	6.75%	43.39%	22.90%	165.9			
Broward	3.65%	37.10%	23.30%	205.0			
Florida	5.60%	41.90%	25.39%	202.9			

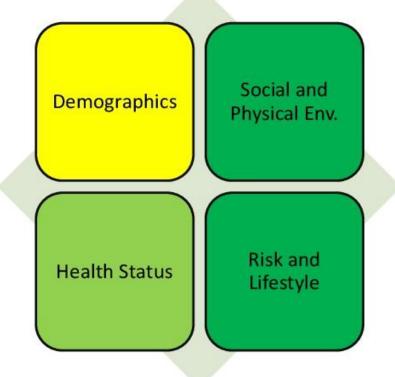
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Risk and Protective Lifestyle Behaviors

- ▶ Access More providers per capita than the state and U.S. average (Primary care, dental, mental health)
- Unemployment (August 2015)
 - 4.2 Boca Raton
 - 5.4 Florida



The Community Story ...



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Community Survey

- N = 300
- Telephone survey
- ▶ PSA and SSA
- Stratified by age group to somewhat reflect service use
- Community residents' perceptions of key service needs in the area



Community Survey Core Measures

DOMAIN	MEASURE
Medical / Health Status	Health services for seniors
	Coordination of care between different doctors or other service providers
	Support to help people to better manage conditions such as diabetes, asthma,
	obesity, heart disease, high cholesterol, high blood pressure, or others
	Screening for cancer, diabetes, heart disease, stroke, or other chronic conditions
	Services for depression, anxiety, or other mental health conditions other than
	substance abuse (which we will ask about later)
	Support to help people stay healthy – wellness programs
Social, Economic, and	Transportation services for people needing to go to doctor's appointments or the
Physical Environment	hospital
	Affordable healthcare services for people or families with low income
Risk and Lifest yle	Primary care services from a family doctor or pediatrician
	Publically available education about wellness and ways to stay healthy –
	exercise, nutrition
	Publically available education about ways to manage obesity
	Substance abuse education
	Substance abuse intervention and treatment
	Youth oriented health programs



Community Survey Core Measures

"Possible things in these areas that the community may or may not need more focus and attention. For each, please [rate] on a scale of 1 to 3 where 1 means that No More Focus is needed, 2 is Somewhat More Focus Needed, and, 3 is Much More Focus Needed"

Medical / Health	He alth services for seniors		
	Coordination of care between different doctors or other service providers		
	Support to help people to better manage conditions such as diabetes, asthma, obesity, heart disease, high cholesterol, high blood pressure, or others		
	Screening for cancer, diabetes, heart disease, stroke, or other chronic conditions		
	Services for depression, anxiety, or other mental health conditions other than substance abuse (which we will ask about later)		
	Support to help people stay healthy – wellness programs		
Social, Economic, and Physical Environment	Transportation services for people needing to go to doctor's appointments or the hospital		
	Affordable healthcare services for people or families with low income		
Risk and Lifestyle	Primary care services from a family doctor or pediatrician		
	Publically available education about wellness and ways to stay healthy - exercise, nutrition		
	Publically available education about ways to manage obesity		
	Substance abuse education		
	Substance abuse intervention and treatment		
	Youth oriented health programs		

Most Commonly Mentioned Needs (Interim Results)

Community Needs

Healthcare services for seniors

Coordination of care between different doctors or other service providers

Support to help people to better manage [chronic] conditions

Substance abuse intervention and treatment

Publically available education about ways to manage obesity

Affordable healthcare services for people or families with low income

Source: BRRH Community CHNA Survey, October 2015.



Care Coordination Models

- Condition-specific (e.g., diabetes) vs. wider spectrum (chronic disease)
- Model type
 - Community resource connection (Social work model)
 - Transitions of care (Nurse-based model)
 - Patient-focused (Motivational model)
- Pros / Cons of each



Care Coordination Examples

- Care Oregon Medicaid focus, complex / comorbid conditions, multi-disciplinary, broad-based case management, TCOC savings \$5,000 per patient per year
- Genesys Health System Primary care / limited provider group focus; promote care coordination, wellness, and specialized care; TCOC savings 26% average per patient per year
- Local ones??



Mental Health and Substance Abuse

- Mental Health
 - Organic conditions (major depression, bi-polar disorder, etc.
 - General health
- Substance abuse
 - Abuse of prescription medications / Pain management
 - Illegal drug use
 - Deaths by unintentional poisoning
 - Heroin
- ▶ Education? Intervention? Treatment? Collaboration?



Substance Abuse Admissions

Leading causes for admissions in Palm Beach County include alcohol, opioids, marijuana, and

heroin.

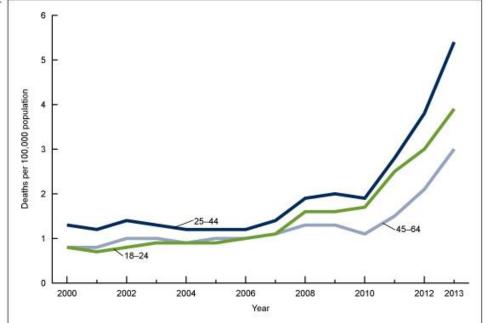
Treatment Admissions in Palm Beach County, 2014				
Alcohol	1,926			
Opioids (Rx)	1,225			
Marijuana	1,105			
Heroin	571			
Cocaine	295			
Benzos	143			
MDMA	80			
Methamphetamines	12			
Other	421			



National Trends for Heroin Deaths by Age

National trends show increasing trends for <u>all</u> age

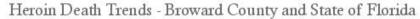
groups.

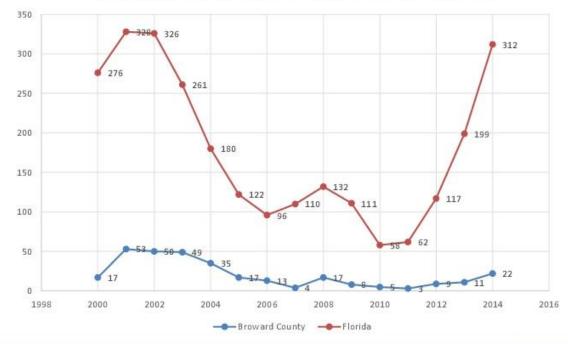




Local Heroin Deaths Rates

Heroin deaths rates are increasing – mirroring national trends





Senior Services

- Additional 100,000 seniors: 2010 to 2020
- What are the additional opportunities to reach out proactively?
 - Mental health support
 - Wellness
 - Chronic care management
 - Others?



Discussion of Other Related Issues

Did we miss anything?





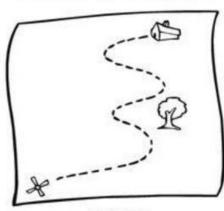




The "Story" ...

Demographics provide a good framework for understanding the area – there are some age related needs that will expand

story map



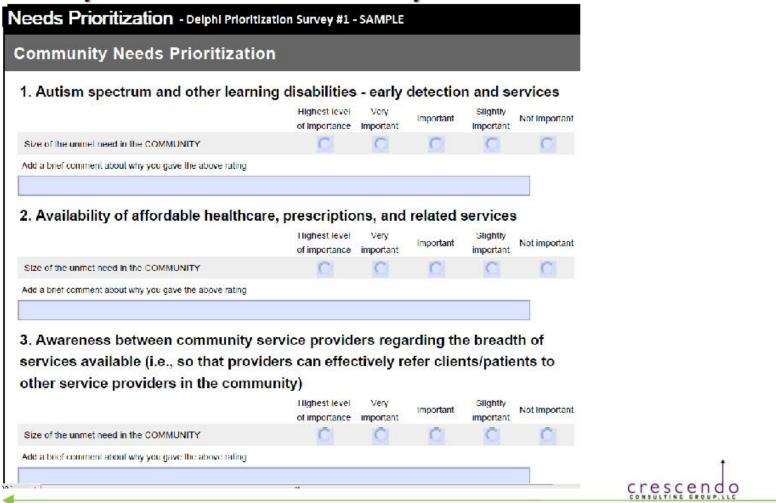
- Lifestyle / access to care is favorable
- Opportunity to be proactive around <u>substance</u>
 <u>abuse</u> (especially heroin)
- Mental health needs exist in all age groups
- ▶ <u>Collaboration and care coordination</u> often mentioned as potential assets to build and deploy

Prioritization Process

- ▶ The ACA requires needs PRIORITIZATION
- Delphi Process
 - Rand Corporation, circa 1950
 - Quantitative and qualitative way to prioritize sensitive issues or ones that generate strong opinions
- ▶ Survey #1 rating and comments
- ▶ Survey #2 review of "round 1" comments, rating



Delphi Process Example



CHNA Next Steps

- Prioritize the needs
- Draft the report
- Review and post on the website

Develop the Implementation Plan



To Reiterate from the Prior Meeting ... Practical Requirements for Success

- Supportive hospital executives
- ▶ Highly engaged Leadership Group ➤
- Clearly recognized needs
- Moderate or large number of community groups serving underserved populations willing to collaborate
- Incorporation with strategic objectives

"Can't Boil the Ocean"

Questions?

▶ Jim Kupel, (207) 774-2345 ext-111 jimk@crescendocg.com



Scott Good, (207) 774-2345 ext-115 scottg@crescendocg.com





Community Health Needs Assessment

Community Meeting

November 19, 2015



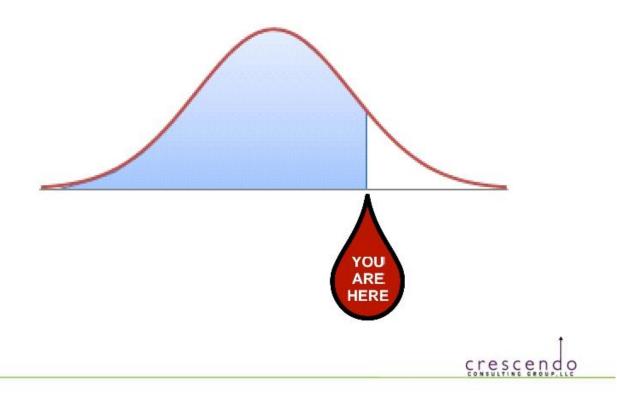
Goal and Agenda

Goal ... Affirm the group of the leading community needs. Update you about the CHNA process and next steps.

Agenda

- Progress of the project
- Research summary
 - Demographic profile
 - Secondary research profile
 - Community survey
 - Prioritization summary
 - Review the "story"
- Discuss next steps and the Implementation Plan process

Project Progress: Home Stretch!



Research Methodology Nearly Complete



Demographics and Secondary Research



Quantitative Community Survey



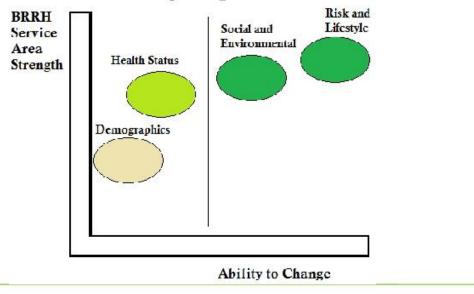
Qualitative Discussion Groups



Prioritized List of Community
Health Needs

Demographics and Lifestyle Reflect Strength

- ▶ 1.25 MM people in the service area
- ▶ Additional 100,000 seniors (2010 2020)
- Median age in the PSA is high but so is income
- Many social and risk / lifestyle factors are already positive and are ones more easily impacted



Demographic Profile Summary

- ▶ Approximately 1.25 MM people in the service area.
- Seniors will increase by approximately 100,000 (2020 vs 2010)

▶ Age and income – health service use drivers – impact community health, especially in the PSA

Tends to LOWER health needs

Tends to INCREASE health needs

	Demographics						
Service Area	Total Population - 2015	% of Population 65+	# Senior Increase 2010 - 2020	Median Age	Median Income		
PSA	684,119	28.5%	58,962	* 49.0	\$52,457		
SSA	574,716	17.7%	41,775	40.9	\$50,602		

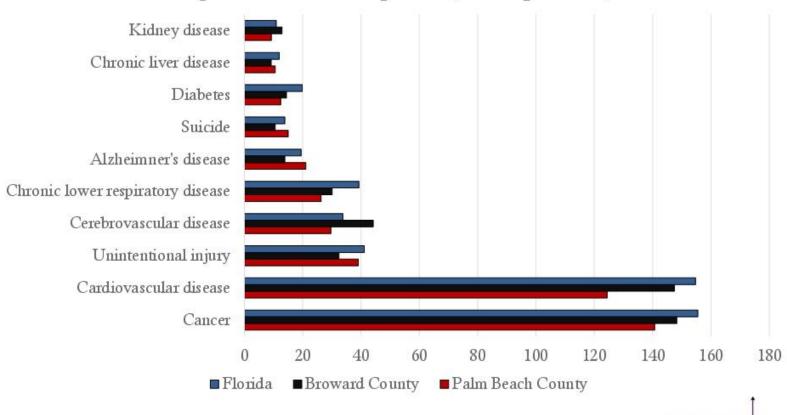


Secondary Research Profile



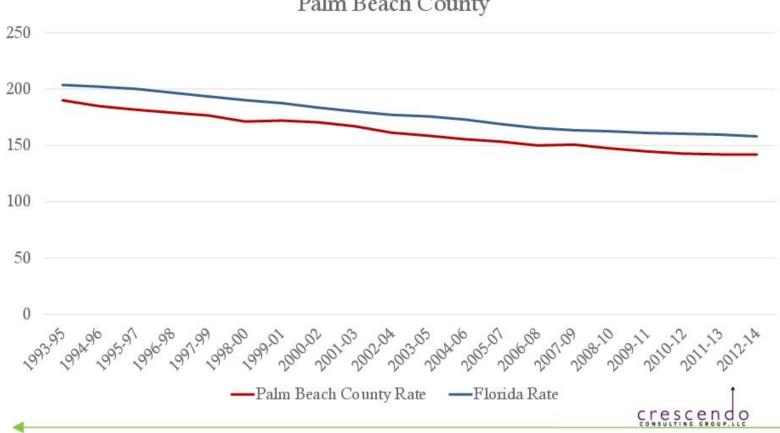
Mortality

Leading Causes of Death per 100,000 Population, 2014

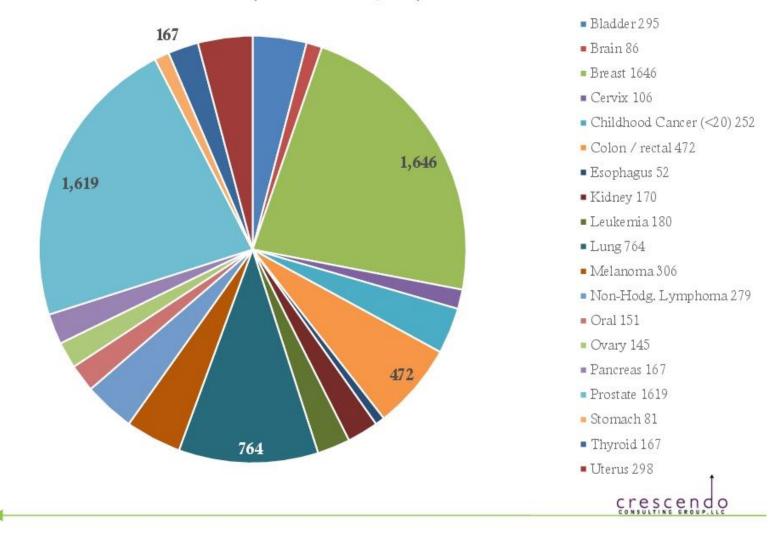


Cancer Data

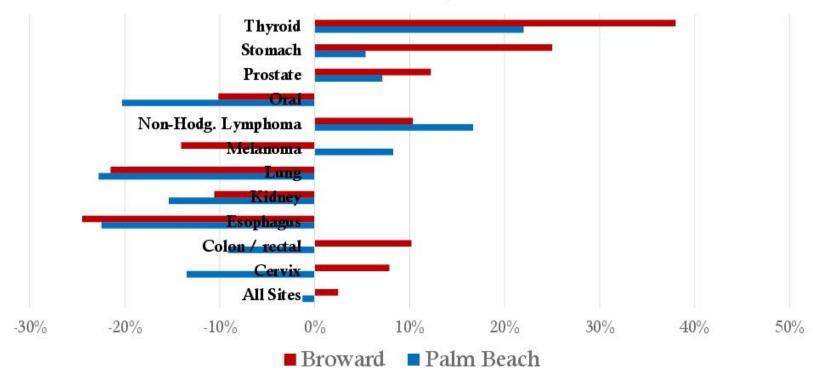
Cancer Death Rate Trends Palm Beach County



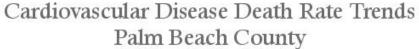
Palm Beach County - Cancer Diagnoses, 2008-2012, by Site (All Sites = 5,794)

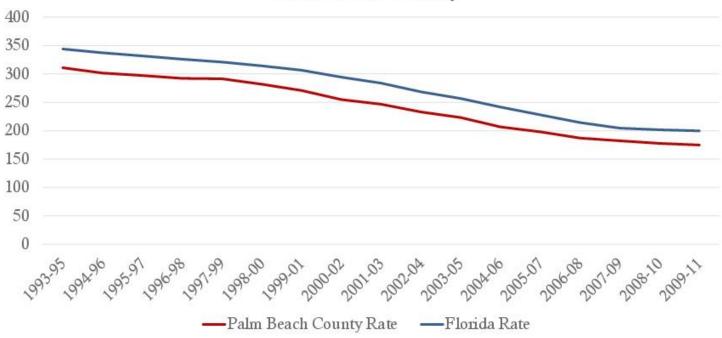


Cancer Incidence per 100,000 People by Cancer Site (Sites With Deviation +/-10% to the Florida County, Median)

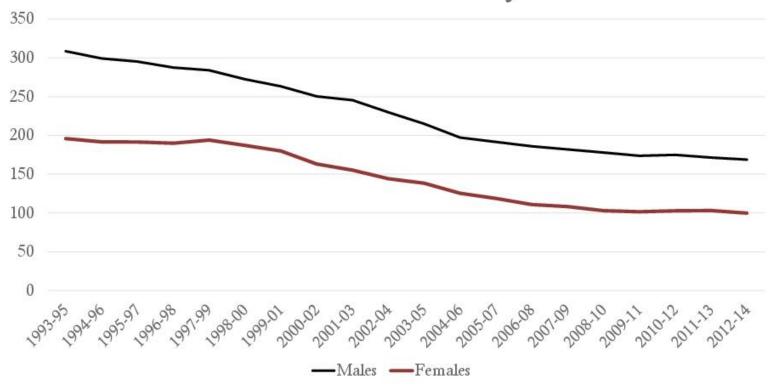


Cardiovascular Disease Data

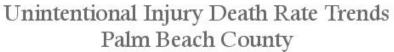


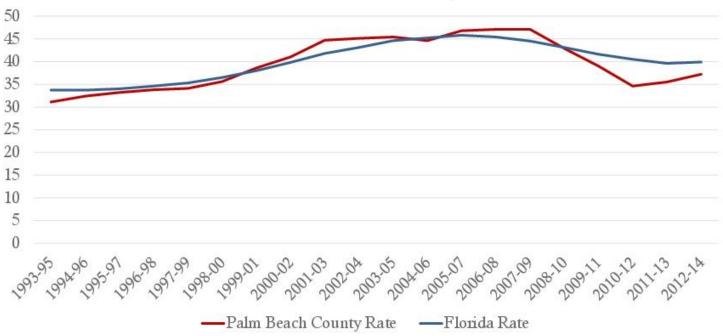


Cardiovascular Deaths Trends by Gender Palm Beach County



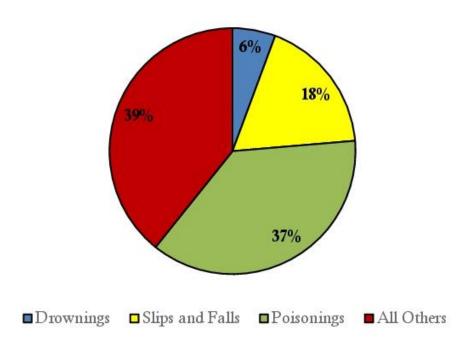
Unintentional Injury Data





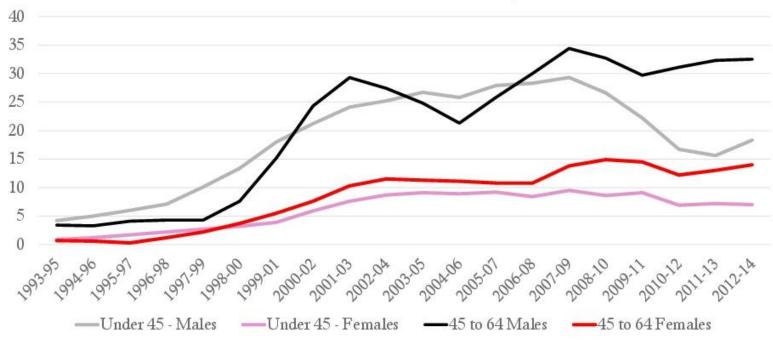
Unintentional Injury Details

Unintentional Injury Death Rate Causes Palm Beach County, 2014



"Others" includes auto accidents, assaults, fires, and additional unintended harm.

Unintentional Poisoning** Death Trends by Gender and Age Group Palm Beach County



** Unintentional Poisoning Death includes drug abuse overdoses

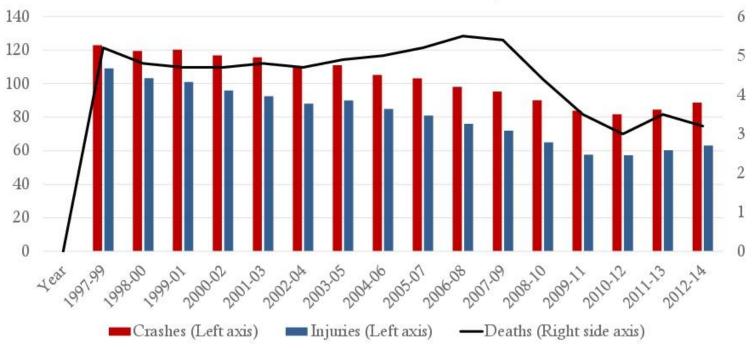
Substance Abuse Indicator

Leading causes of substance abuse-related hospital admissions in Palm Beach County include alcohol, opioids, marijuana, and heroin.

Treatment Admissions in					
Palm Beach County, 2014					
Substance	Admissions				
Alcohol		1,926			
Opioids (Rx)		1,225			
Marijuana		1,105			
Heroin		571			
Cocaine		295			
Benzos		143			
MDMA		80			
Methamphetamines		12			
Other		421			

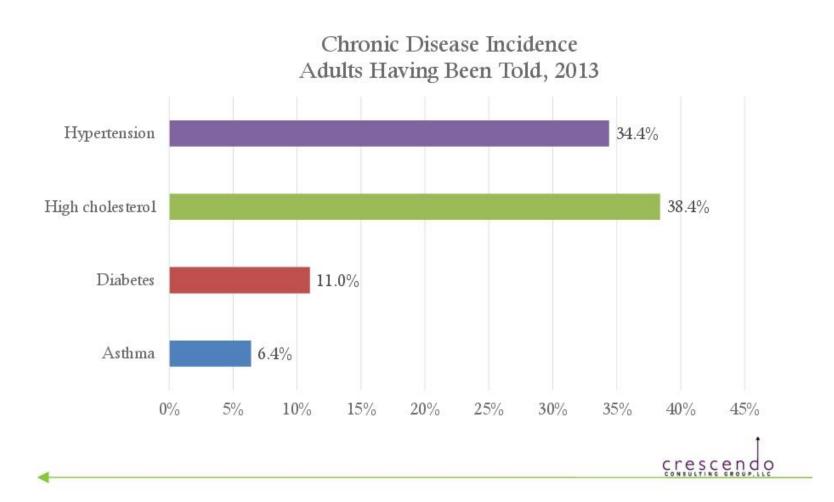


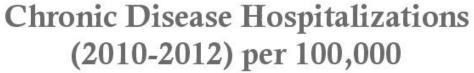
Alcohol-suspected Vehicle Incidents Per 100,000 Population Palm Beach County

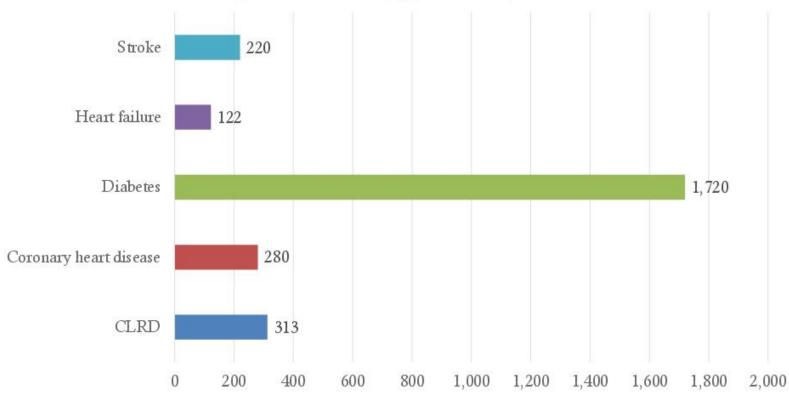




Identified Need to Better Manage Chronic Diseases

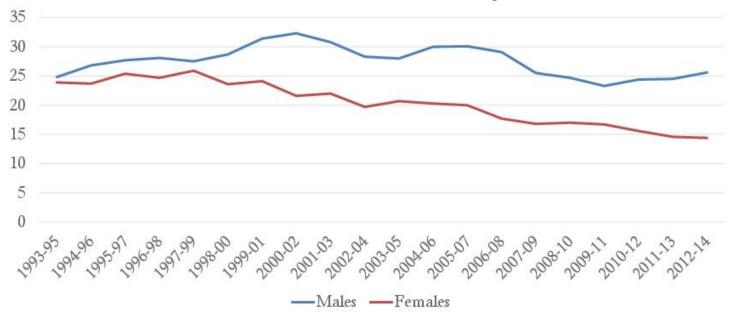






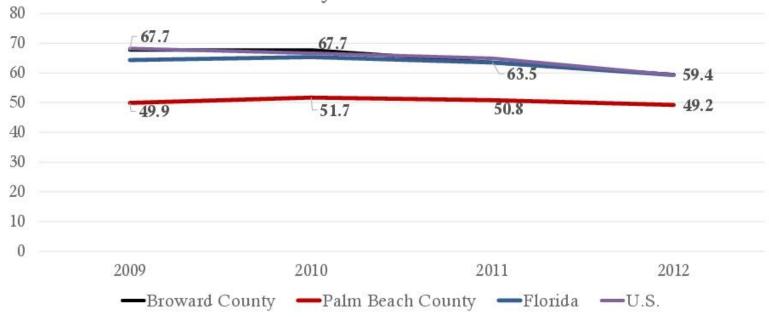
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Diabetes Death Rate Trends by Gender Palm Beach County





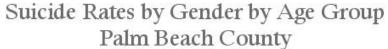
Preventable Hospitalizations Discharge Rate per 1,000 Medicare Fee-for-service Enrollees for Ambulatory Care Sensitive Conditions

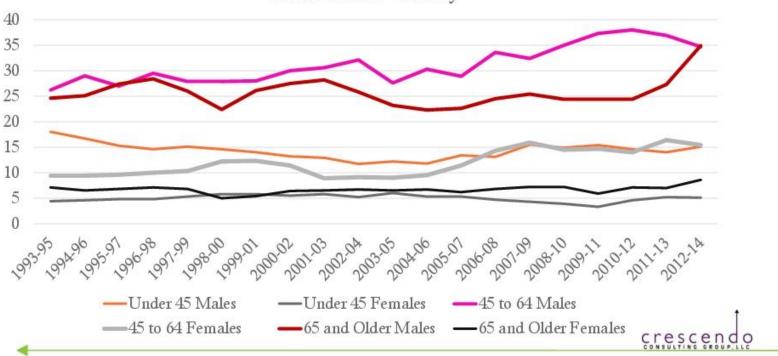




Mental Health Indicator

Older males' risk of suicide shows an increasing trend.





Secondary Research Summary

Cancer care opportunities

- Service area rates better than the Florida average with some exceptions
 - Thyroid and Non-Hodgkin Lymphoma, NHL (Palm Beach County)
 - Thyroid, stomach, prostate, NHL, and liver (Broward)

Care coordination

- Chronic disease mortality rates among males are often high
- ▶ High rates: diabetes (11%), high cholesterol (34%), or hypertension (38%).

Wrap-around care - Medical and Behavioral

- Unintentional poisoning (drug overdose) rates increasing
- ▶ Suicide rates among males (especially ages 65 +) are increasing.

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Community Survey

Built off of insights from the Leadership Group

- N = 300, telephone survey in the PSA and SSA − stratified by age group
- Results largely sync with secondary data: Leading needs (not in priority order)
 - Care coordination
 - Chronic diseases
 - Mental health and substance abuse
 - Obesity
 - Senior services



Community Survey Top Needs by Age Group

Needs	Requiring	"Much More Focus"	
			_

	. 8	Age grou	p	
20 2 20 2	18 to	45 to	65 and	200 30
Community Needs	44	64	older	Total
Affordable healthcare services	49.1%	64.4%	59.4%	59.9%
Coordination of care between providers	52.0%	59.4%	55.4%	56.7%
Health services for seniors	44.2%	46.3%	46.0%	45.8%
Primary care services	37.7%	36.8%	38.0%	37.4%
Publically available education about ways to manage obesity	48.1%	50.7%	43.0%	47.6%
Publically available education about ways to stay healthy	40.7%	46.4%	41.6%	43.7%
Screening for chronic conditions	35.2%	57.2%	51.0%	51.0%
Services for mental health conditions other than substance abuse	53.7%	62.5%	54.1%	58.0%
Substance abuse education	42.6%	53.3%	46.9%	49.1%
Substance abuse intervention and treatment	42.6%	59.6%	52.5%	54.0%
Support to help people stay healthy	40.7%	45.7%	37.0%	41.8%
Support to help people to better manage chronic	51.9%	51.8%	45.0%	49.5%
Transportation services	49.1%	53.8%	42.6%	49.0%
Youth oriented health programs	57.4%	49.3%	40.6%	47.9%



Open-ended Question Responses Support the Quantitative Results

Community Health Needs Assessment

Community Survey, Open-ended Question Responses

"... What do you think are the three greatest community health issues in the area?"

Rank	Community Need	
1	Substance abuse	
2	Obesity	
3	Senior services	
4	Access - Affordability	
5	Mental health	
6	Diabetes - Prevention, diagnosis, and treatment	
7	Cancer - Prevention, diagnosis, and treatment	
8	Health education	
9	Transportation	
10	Nutrition	
11	Care coordination (among providers and/or patient navigation)	

Community Survey Summary

- Access to care
- Care coordination
 - Between providers
 - Patient support / navigation
- Chronic disease care
- Mental health
- Senior services *
- Substance abuse

^{*} Senior services are an issue across multiple health domains.



Prioritization

- Currently in the field
- Early indicators show that responses are similar to other research
- The "Round 2" survey is very short but more interesting!





The "Story" ...

- Demographics and access to services positively impact area residents
- Data, professional insight, and consumers define the needs
- Shorter-term strategies may impact specific disease state needs
- ▶ There may be ways to implement programs that address multiple needs simultaneously
- Integrated care (Medical / BH) may help in some areas





Prioritized Needs: Disease States and Services



Within service lines

- Diabetes
- · Heart disease
- Cancer
- Mental health and substance abuse



ross service lines

- Coordination of care between providers
- Care coordination in the community
- Senior services
- · Men's health

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CHNA Next Steps

- Draft the report
 - Narrative and appendices
 - Progress since previous CHNA
 - Resource guide
- Finalize the CHNA and post on the website
- Develop the Implementation Plan
 - Strategically identify longer-term and shorter-term needs to address.
 - Construct an operational framework to "implement"
 Implementation Plan strategies



Questions?

▶ Jim Kupel, (207) 774-2345 ext-111 jimk@crescendocg.com



Scott Good, (207) 774-2345 ext-115 scottg@crescendocg.com



Appendix E: Delphi Survey



Needs Prioritization (Boca Raton Regional Hospital)

Community Needs Prioritization - Round 1 Survey

Dear Leadership Group Member,

With your help, and based on our work over the past few weeks, we have identified 50 Community Health Needs. Please rate each of the 50 needs based on your perceptions of the "the magnitude of the need for more focus and attention". We understand that all of the needs listed below are important, but your insight will help prioritize them.

Also, after each question, you will see a small box for comments. Please add a short sentence or phrase regarding why you rated the question as you did.

The survey is expected to take less than 30 minutes.

Please keep the following in mind:

- The response deadline is noon on FRIDAY, NOVEMBER 27, 2015.

If you have questions or need assistance, please contact Scott Good at (207) 774 2345 ext-115, or scottg@crescendocg.com.

Thank you.



1. Access to primary care physician services No more needed Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating 2. Access to specialty care physician services No more needed Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating		 O	0	0	0	Much more needed	NA O
Add a brief comment about why you gave the above rating 2. Access to specialty care physician services No more needed Magnitude of the need for more focus and attention		0	0	0	0	0	0
2. Access to specialty care physician services No more needed Magnitude of the need for more focus and attention							
No more needed Magnitude of the need for more focus and attention							
Magnitude of the need for more focus and attention	0					Much more needed	NA
Add a brief comment about why you gave the above rating		0	0	0	0	0	0
3. Affordable healthcare services No more needed	77	949	2111	4444		Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating							

Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating 6. Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse No Much more needed	Add a brief comment about why you gave the above rating 5. Autism spectrum and other learning disabilities – early detection and tree No more needed Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating 6. Behavioral health services for adults for depression, anxiety, or other methan substance abuse No more needed Magnitude of the need for more focus and attention	0 0	0 0	0
5. Autism spectrum and other learning disabilities – early detection and treatment No Much more needed	5. Autism spectrum and other learning disabilities – early detection and trees. No more needed Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating. 6. Behavioral health services for adults for depression, anxiety, or other methan substance abuse. No more needed Magnitude of the need for more focus and attention			
No more needed	No more needed Magnitude of the need for more focus and attention Add a brief comment about why you gave the above rating 6. Behavioral health services for adults for depression, anxiety, or other methan substance abuse No more needed Magnitude of the need for more focus and attention			
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Add a brief comment about why you gave the above rating 6. Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse No	Add a brief comment about why you gave the above rating 6. Behavioral health services for adults for depression, anxiety, or other mathan substance abuse No more needed Magnitude of the need for more focus and attention	****	more	1
S. Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse No	5. Behavioral health services for adults for depression, anxiety, or other michan substance abuse No more needed Magnitude of the need for more focus and attention	00	0 0	0
than substance abuse No	than substance abuse No more needed Magnitude of the need for more focus and attention			
Add a brief comment about why you gave the above rating 7. Cancer – Education and prevention No No Much more needed			more	1
No more needed		0 0	0 0	0
more needed more needed NA Magnitude of the need for more focus and attention	enamication of the control of the second of the control of the co		Much	.
Magnitude of the need for more focus and attention	more		more	1
Add a brief comment about why you gave the above rating		0 0	0 0	0
	Add a brief comment about why you gave the above rating			

	No more needed	27	222	****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
9. Cancer – Diagnosis and treatment	No more needed			****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
10. Cancer – Care coordination	No more needed	w	2012	****		TALL.	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
11. Care coordination for people with multiple co-	-morbid cond No more needed		S				Much more needed	NA
Magnitude of the need for more focus and attention	O	0	0	0	0	0	O	

Crescendo Consulting Group

		No more needed	e	222		1512		Much more needed	NA
Magn	itude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a b	orief comment about why you gave the above rating								
13. Ch	nildren's health – primary care services	No more ne eded		***		****	*****	Much more needed	NA
Magn	itude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a b	orief comment about why you gave the above rating								
14. Cł	nildren's health – specialized care services	No more needed	W	9272				Much more needed	NA
Magn	itude of the need for more focus and attention	0	0	0	0	0	0	0	0
	orief comment about why you gave the above rating	arkinson's	Dise	ase L	ewy B	ody de	ementi	a and o	thers
	,	No			,	,		Much	
		more ne eded						more needed	NA
14	itude of the need for more focus and attention	0	0	0	0	0	0	0	0
wagn									
eranelia de	orief comment about why you gave the above rating								

	No more needed	25	222	****		2222	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
17. Diabetes – Education and prevention	No more needed		***	****		*****	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
18. Diabetes – Screening	No more needed	W.	2000				Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
19. Diabetes – Diagnosis and treatment	No more needed	211		****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0
ing or inter	ventio	n					
No more needed		***	****	6900	*****	Much more needed	NA
0	0	0	0	0	0	0	0
						venue v	
No more						Much more	
needed					~	needed	NA
0	U	0	0	U	U	0	U
N-							
more						more	NA
0	0	0	0	0	0	0	0
	No more needed No more needed No more needed	No more needed No more needed No more needed	No more needed	No more needed	No more needed	No more needed	No Much more needed

	No						Much	
	more						more needed	NIA
Magnitude of the need for more focus and attention	needed	0	0	0	0	0	needed	NA
	100							
Add a brief comment about why you gave the above rating								
25. Heart disease – Diagnosis and treatment								
	No						Much	
	more ne eded			****			more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
26. Heart disease – Care coordination								
	No						Much	
	more needed	W.	1000				more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
27. Home health services such as Visiting Nurses	or other in	-home	e care					
	No						Much	
	more needed						more needed	NA
Magnitude of the need for more focus and attention	()	0	()	0	0	0	0	0
Add a brief comment about why you gave the above rating								
ad a bitel confinent about wily you gave the above rating								

-

	No more needed	25	222	****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
29. Hypertension treatment and related services	No more needed		***	****	*****	*****	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
30. Nutrition and healthy eating education	No more needed	W.	3912				Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
31. Obesity – Education and prevention	No more needed	244	2***	****	****		Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0

	No more needed	e	***	****	1000		Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
33. Obesity – Programs to help with self-manager	ment No						Much	
	more needed			****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
34. Obesity – Care coordination								
	No more needed	n.	2112				Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
35. Pain management services	ON ESS						141	
	No more needed						Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0

	No more needed	25	222	****	1512		Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
37. Rheumatology and other arthritis services	No more needed		***	****		*****	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
38. Seniors' health services – Diagnostic and tre	atment No more needed	W.	3500			THE STATE OF THE S	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	\circ	0	0	0	0
Add a brief comment about why you gave the above rating								
39. Seniors' health services – Care coordination	No more needed	211		****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0

	No more needed	g.**		****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
41. Smoking cessation services	No more needed			****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
42. Stroke prevention and care	No more needed	W.	200				Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
Add a brief comment about why you gave the above rating								
43. Substance abuse – Education and prevention	No more needed	,,,	***	****			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0

	No more ne eded		***				Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
oldd a brief comment about why you gave the above rating								
5. Substance abuse – Intervention and treatment	No more needed		***	****		*****	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
add a brief comment about why you gave the above rating								
6. Substance abuse – Care coordination	No more needed	W	222	200			Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
add a brief comment about why you gave the above rating								
 Transportation services for people needing to ξ 	go to docto No more needed	or's ap	pointn	nents o	or the	nospit	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
add a brief comment about why you gave the above rating								

	No more						Much more	
	needed		***	****	*****		needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
ld a brief comment about why you gave the above rating								
). Wellness initiatives for children – exercise an	d nutrition							
	No more needed		***	****		*****	Much more needed	NA
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	0
ld a brief comment about why you gave the above rating								
). Women's health – comprehensive gynecolog	y and repro	ductiv	e care	for wo	men i	n all s	ages of	life
	more needed	Si.			*****		more needed	NA
								-
Magnitude of the need for more focus and attention	0	0	0	0	0	0	0	U
-	0	0	0		0	0	0	
-	0	0	0	0	0		0	
-	0	0	0				0	
-	0	0	0			0	0	
-	0	0	0				0	
-	0	0			0		0	
-	0	0	0		0		0	
-	0	0			0		0	
-	0	0	0		0	0	0	
-	0				0			



Needs Prioriti	zation (Boca Ra	ton Regional H	ospital)	
Name				
	ses will be kept ano n order to know whe			

Appendix F: Lists of Prioritized Needs

Note that the Prioritized List represents perceived service <u>gaps</u> – variations between the magnitude of the need in the service area and the available services. A low ranking means that even though the need may be very important, there are some perceived services available to partially address the need. Higher ranking needs are thought more likely to require additional attention.

Priority Rank Sort	
	D 1'
Community Need	Ranking
Behavioral health services for adults for depression, anxiety, or other mental health conditions other than substance abuse	1
Care coordination for people with multiple co-morbid conditions	2
Access to primary care physician services	3
Seniors' health services – Care coordination	4
Substance abuse – Education and prevention	4
Nutrition and healthy eating education	6
Obesity – Care coordination	6
Obesity – Education and prevention	8
Affordable healthcare services	9
Affordable prescription medications	9
Substance abuse – Care coordination	9
Access to specialty care physician services	12
Substance abuse – Intervention and treatment	12
Obesity – Programs to help with self-management	14
Dementia spectrum services for Alzheimer's, Parkinson's Disease, Lewy	15
Body dementia, and others Diabetes – Care coordination	15
Wellness initiatives for adults – exercise and nutrition	15
End of life issues (including palliative care)	18
Pain management services	19
Transportation services for people needing to go to doctor's appointments	19
or the hospital	
Diabetes – Screening	21
Obesity – Diagnosis and treatment	21
Substance abuse – Screening	23
Diabetes – Diagnosis and treatment	24
Diabetes – Education and prevention Dental health services for children and adults	24
	26
Home health services such as Visiting Nurses or other in-home care	26
Wellness initiatives for children – exercise and nutrition	26
Homeless services (healthcare for the homeless)	29
Rheumatology and other arthritis services	30
Seniors' health services – Diagnostic and treatment	30
Stroke prevention and care	30
Respiratory health / pulmonology education and services	33
Cancer – Care coordination	34
Children's health – behavioral health services	34
Smoking cessation services	36

Priority Rank Sort	
Domestic or intimate partner violence counseling or intervention	37
Heart disease – Education and prevention	38
Heart disease – Screening	38
Sexually transmitted disease education, screening, and treatment	40
Heart disease – Care coordination	41
Women's health – comprehensive gynecology and reproductive care for women in all stages of life	42
Hypertension treatment and related services	43
Children's health – primary care services	44
Children's health – specialized care services	44
Heart disease – Diagnosis and treatment	44
Cancer – Diagnosis and treatment	47
Cancer – Screening	48
Cancer – Education and prevention	49
Autism spectrum and other learning disabilities – early detection and treatment	50

Alphabetical Listing Sort

Community Need	Ranking
Access to primary care physician services	3
Access to specialty care physician services	12
Affordable healthcare services	9
Affordable prescription medications	9
Autism spectrum and other learning disabilities - early detection and treatment	50
Behavioral health services for adults for depression, anxiety, or other mental	
health conditions other than substance abuse	1
Cancer - Education and prevention	49
Cancer - Screening	48
Cancer - Diagnosis and treatment	47
Cancer - Care coordination	34
Care coordination for people with multiple co-morbid conditions	2
Children's health - behavioral health services	34
Children's health - primary care services	44
Children's health - specialized care services	44
Dementia spectrum services for Alzheimer's, Parkinson's Disease, Lewy Body	16
dementia, and others	15
Dental health services for children and adults	26
Diabetes - Education and prevention	24
Diabetes - Screening	21
Diabetes - Diagnosis and treatment	24
Diabetes - Care coordination	15
Domestic or intimate partner violence counseling or intervention	37
End of life issues (including palliative care)	18
Heart disease - Education and prevention	38
Heart disease - Screening	38
Heart disease - Diagnosis and treatment	44
Heart disease - Care coordination	41
Home health services such as Visiting Nurses or other in-home care	26
Homeless services (healthcare for the homeless)	29
Hypertension treatment and related services	43
Nutrition and healthy eating education	6
Obesity - Education and prevention	8
Obesity - Diagnosis and treatment	21
Obesity - Programs to help with self-management	14
Obesity - Care coordination	6
Pain management services	19
Respiratory health / pulmonology education and services	33
Rheumatology and other arthritis services	30
Seniors' health services - Diagnostic and treatment	30
Seniors' health services - Care coordination	4
Sexually transmitted disease education, screening, and treatment	40
Smoking cessation services	36
Stroke prevention and care	30
Substance abuse - Education and prevention	4

Alphabetical Listing Sort	
Substance abuse - Screening	23
Substance abuse - Intervention and treatment	12
Substance abuse - Care coordination	9
Transportation services for people needing to go to doctor's appointments or the hospital	19
Wellness initiatives for adults - exercise and nutrition	15
Wellness initiatives for children - exercise and nutrition	26
Women's health - comprehensive gynecology and reproductive care for women in all stages of life	42

Appendix G: Activities Conducted to Address Prioritized Community Health Needs Since the Previous CHNA

Since the 2012 BRRH CHNA and Implementation Plan were conducted, the hospital engaged in several activities designed to improve community health and responded to the prioritized needs identified. The activities are summarized and outlined below.

- Fall Prevention
 - o Area of concern: Tripling of the death rate for Seniors in PBC & doubling in Broward (within 1 year of fall)
 - o Boca Regional Program: "Matter of Balance" & in-home Fall Assessments
- Medication Management
 - o Area of concern: Quadrupling of the death rate for Seniors of unintentional poisoning deaths (65+)
 - o Boca Regional Program: Medication Education booklet at the bedside; Community Education
- Improved Emergency Department Utilization
 - o Area of concern: High volume of low acuity events alongside "Preventable/Avoidable" visits
 - o Boca Regional Program: Health Van & FAU Residency Clinic; Heart Failure Nurse Navigator

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Appendix H: Current Community Health Needs Activities

Current BRRH CHNA and Implementation Plan activities are summarized and outlined below.

Identified area of concern

- 1. Lack of resources for our community's Seniors
 - a. Care coordination & community navigation
 - i. Fall Prevention, Medication Management, care coordination at discharge
 - ii. Appointment scheduling & follow up care for patients at discharge (INP/ED)
 - iii. Transportation, Meal, respite care services
 - iv. Emergency Alert systems
 - v. Task Force: Dana, Gwen, Genie

Lack of navigation for Substance Abuse & Behavioral Health Referrals

- a. Social Worker in ED
- b. Explore Tele psychiatry
- b. Task Force: Judie, Maureen Moore/Donna Rucker, Sandi Savia
- 2. Lack of population health and specialty resources to underserved
 - a. Telemedicine to connect our BocaCare specialist to Medicaid population, back to Residency clinic
 - b. Connection to Project Access
 - c. Task Force: Pua, Ivan, Dr. Acquino, Darren/Steve/Heidi, Rudy

Group Dynamics

- 1. Annual Chairs recommended
- 2. Collaboration encouraged: 1 student & 1 Community Expert assigned to each group
- A. Group Responsibilities
 - a. Further define issue & resources in our community
 - b. Establish Goals & Initiatives
 - i. Long Term
 - ii. Quarterly / Annual
 - iii. Measurement of success
 - c. Report quarterly back to Leadership Committee
 - d. Manage finances: Annual Budget, apply for Grants

Crescendo Consulting Group 213

Appendix I: Existing Healthcare Resources and Facilities

<u>Community Resource List</u>
(agencies listed are for informational purposes only and not endorsed in any way)

Call 211 or www.21	1.org or 211palmb	each.org - Connects people with addition	nal community sen	icas and valuntaes annuativ	-745
			iai community serv	Shelter	nities.
Abuse, Neglect or Exploitation-Rep		3 Salvation Army	561-682-1118		1-800-493-5902
FL Dept. of Health	www.doh.state.fl.us/		561-863-6611	Homeless Assessment	Center 844-6400 >
Palm Beach County Health Dept. Shots & Immunizations (see Van S	www.pbchd.com	No-cost Helmets-Epilepsy Fdtn.	561-478-6515	VA Homeless Trailer	561-422-8223
Comprehensive AIDS Program	561-844-1266	Food		VA 24hr Call Center	1-877-424-3838
Women, Infants & Children (WIC)	561-681-2524	America's Second Harvest	800-771-2303	12	
www.pbchd.com/wic/wic services.t		Supplemental Nutrition (food stamps)	Emergency Financial A	ssistance for
Dental	-	Dept. of Children & Families		Housing Program	1-877-891-6445
Medicaid Dentist	561-616-5255	www.myflorida.com/accessflorida/	561-837-5078	Family Promise, Delray	Booch EC4 OCE 22
Atlantic Coast Dental Assn.	561-968-7714	Café Joshua - Lord's Place	Call 211	West Palm Beach 561-	318-8864
	561-366-1147	to request a Homeless Outreach Te First Presbyterian Church		Center for Family Servi	nes Pat Regues
Caridad Dental Clinic	561-853-1623	(Hot meals, Mon. evenings)	561-655-1707	Shelter for Homeless fa	milies 561-514-056
PB County Health Dept.	561-514-5310	Meals on Wheels	561-379-8631		
PB Community College	561-868-3747	St. Ann Place (bag lunches)	561-805-7708	The Lord's Place	561-494-0125
St. Mary's Free Clinic, Pahokee	561-929-2892	Women, Infants & Children (WIC)	561-514-5350	Administration	
Veterans Admin Dental Clinic Main VA #	561-422-5675	Character market account to \$2 Mark	800-342-3556	S	
Main VA#	561-422-8262	Check with local churches-many have	tood pantries and	Samaritan Center,	772-770-3039
Disability		almost 20 sources are listed at 211	palmbeach.org	Facility for homeless far	nilles, Vero Beach
Coalition for Independent Living	561-966-4288	St. Ann Place (bag lunch, showers, etc.	2.) 561-805-7708	Support Groups & Res	nite Care
Healthcare Services		844-6400 x121		Alpert Jewish Family & 0	hildren's
Healthcare District	866-930-0035	Human Trafficking Help Line	866-443-0106	Services	561-684-1991
Community Health Center	561-840-8681	The Institute for Universal Human Rig	hts 954-534-4694		001 004 1001
Caridad Clinic-Boynton Beach	561-369-0832	Catholic Charitles Hot Line	877-707-4012	Alzheimer Community C	are helpline
FAU Diabetes Educatio		Immigration & Refugee		(24 hr. hotline)	800-272-3900
Mental Health America	800-969-6642	Catholic Charities	561-494-0928	100000000000000000000000000000000000000	
Shriners Kids Hospital	800-237-5055	Youth Co-Op- Refugee Employment	561-964-1693	American Assn. of Care	
St. Mary's Wound Care Center	561-881-2960	US Immigration Service	800-375-5283		561-391-7401
Hearing		Farm Worker Council of Palm Beach	800-727-6224	Boss Bossite Valuate	FO4 FO4 7404
No Cost Amplified Phones	561-802-3353	Legal Aid	561-655-8944	Boca Respite Volunteers	561-391-7401
Hear Now - Starkey Foundation	800-328-8602			Catholic Charities	561-775-9567
Deaf Service Center of PBC	561-802-3353	Medicald	888-367-6554	Counseling Programs	301-113-8301
VA Hearing & Visual	561-422-6838	www.dcf.state.fl.us/ess/	*****	3.103.0	
Insurance		Federal government Program, adminis provide health care services to low-inc	tered by states to	Caregiver Magazine & st	ipport groups
Florida KidCare floridakidcare.org	888-540-5437	22.02.00.000000	ome marviquais.	caregiver.com/regionalresou	rces/states/FL/index.
www.healthykids.org/apply/		Medicare Hotline	800-633-4227		
State's children's health insurance pro	ogram	Health Insurance Program for: people	65 years of age	Family Caregiver Coalitio	
for uninsured children under age 19	2 52460	and older, some disabilities under age	65, people with	www.familycaregiverpbc.	org
VITA Health	866-930-0035	End-Stage Renal Disease Medicare Prescription Program	000 770 4040	FAU Memory & Wellness	Contes
Palm Beach County Shared Cost Affordable Health Plan			800-772-1213	Boca Raton (Adult Day C	ore) 561-207.050
		Rent or Utility Help		Dood Halon pradit boy C	are) 501-257-050
Medical equipment, supplies & Fina	ancial Support	PB County Human Services	561-845-4644	Hospice By the Sea	561-848-5200
Clinics Can Help	561-876-3183	(north of 45th St. 845-4670) (south of 45th Adopt-A-Family	5" St. 355-4792)	Jeses Progression Wilderston	
www.clinicscanhelp.org Palm Healthcare		CCCnet (HIV/AIDS)	561-842-4338 561-472-9160	Hospice of PB County	561-467-7423
		Center for Family Services	561-514-0564		
Pregnancy & Parenting Help		Community Caring of Boynton	561-364-9501	Mae Volen Senior Center	
Birthline Catholic Charities	561-278-0880	Emergency Energy (60+age)	561-355-4746		561-395-8920
provides slathles (561-842-5301	Farm Workers	561-533-7227	St. Mary's Memory Disord West Palm Beach	er Center 561-882-6363
provides clothing (maternity, baby thro	ugh toddler)	PBC Community Action (electric help)	561-355-4792	vvest railii beacii	001-002-0303
infant car seats, strollers, formula, crib	s, etc.	Palm Beach Human Services	561-845-4644	Parkinson	561-791-9885
Safe Kids PBC, Car Seats	561-801-1300	Salvation Army	561-682-1118		001101-0000
PBC Fire Rescue (low cost car seat)	561-616-7033	Salvation Army (Lake Worth)	561-968-8189	St. Mary's Stroke support	561-882-9100
Safety Council /Traffic School \$25 car	seat) 561-689-	St. Vincent de Paul (check with local pour Urban League			
4733	****		561-833-1461 -800-540-7039	Center for Group Counsel	ng- Support Group
Healthy Mothers/Healthy Bables Head Start	561-804-9441		-877-891-6445	for caregivers	61-483-5300
Child development & family counseling	561-233-1600		-011-001-0440	Man Inner World	
		Senior Help		Vitas Innovative Hospice 8	00-938-4827
St. Mary's Medical Center:		CARES-Comprehensive Assessment & Long-term care services	Review for	Transportation	
Boot Camp Class for Dads	561-882-9100	State of FL, Dept of Elder Affairs	1	The same of the sa	-877-870-9849
Maternity-Siblings Class Newborn baby care class (St. Mary's)	1	PB County	561-840-3150	Alpert Jewish Family & Ch	
Infant/Child CPR		Martin, St. Lucie, Indian River	772-460-3692		61-684-1991
Safe Sitter Course (St. Mary's Med Ctr)		Area Agency On Aging	561-684-5885	Mae Volen Senior Center	
	301-002-2709	Elder Hotline (toll free) 1	-866-684-5885	(south of Hypoluxo) 5	61-395-8920
Prescription Help		Indian River, Martin, Okeechobee, Palm E			
Patient Assistance Programs Community Caring of Boyton			561-842-2406	Veterans Services	84 488 8868
		Diocese of Palm Beach affordable housing		Veterans Hospital 5 Veteran Services of Palm E	61-422-8262
	-000-709-3880	for low-income seniors	561-775-9571		seach 61-355-4761
Vision			211	Þ	01-333-4761
Community Health Center Lighthouse for the Blind (eyeglasses)		free daily phone call to seniors, the home	ebound	Vital Statistics 5	61-837-5847
	561-586-5600 -800-766-4466	or disabled (between 7:30am-5:00pm).			
	-800-393-2873	Social Security www.ssa.gov/ 1-	800-772-1213	Workforce Locations 5	51-616-5200

