### Second Summary of Key Findings

PARTNERSHIP FOR A HEALTHY COMMUNITY

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Seagulls at Sanders Beach courtesy of Jenea Wood

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Every three years, Escambia County and Santa Rosa County work collaboratively on a two-step process to understand and respond to health problems within our community. The first phase of this process involves identifying local health issues and resources through a Community Health Needs Assessment (CHNA). The second phase, which will launch in early 2019, will outline the actions that the community will take to improve the health status of residents.

A CHNA examines the health of community residents and answers the questions:

- What are the major causes of illness, injury, and death in the community
- What health issues and behaviors are most concerning to local citizens and community leaders
- What barriers and resources exist for residents to achieve better health

The CHNA is a year-long community-wide undertaking. Health, business, social service, education, and faith organizations across Escambia and Santa Rosa provided guidance and input by serving on a CHNA Steering Committee. Community residents participated through online and paper surveys as well as through solicitation of public comments on the CHNA findings posted on the websites of Live Well Partnership and its community partners. The culmination of this first phase is the publication and distribution of this 2019 CHNA report.

This report concludes the following:

1. Public and community leaders agree on the most important health issues:

- Overweight and Obesity
- Mental Health
- Diabetes

2. Public and community leaders agree on the most concerning unhealthy behaviors:

- Poor Eating Habits
- Lack of Exercise
- Drug Abuse

3. Forces in the community that are promising approaches to health improvement:

- Community Schools Providing On-Site Health Services for Neighborhood
- Faith Community Engaging Members on Health Issues

4. Forces in the Community that hinder health Improvement:

- Low Health Literacy
- Drug and Alcohol Abuse
- Poor Access to Health Care at the Lowest Appropriate Level of Care

5. Local public health systems in both counties are best at:

Diagnosing and Investigating Health
 Problems and Hazards

6. Local Public Health System in both counties have room to improve:

• Research for Innovative Solutions to Health Problems

### 7. Top Health Priorities in Escambia and Santa Rosa:

- Diabetes
- Infant Health
- Mental Health

### 8. County-Specific Health Priority:

- Escambia Child (age 1 5) Health
- Santa Rosa Drug Abuse

7 Top Health Priorities in Escambia

Active Story Time at Spring Street Branch ourtesy of West Florida Public Library

### Community Health Needs Assessment (CHNA) Defined

If you have ever wondered about the health of people living in our community, then a CHNA has the answers you are looking for. A CHNA examines disease and death statistics for the community and then compares the health of our community to Florida and the nation. The CHNA also explores resources available to residents and perceptions about health and health services. Finally, a CHNA identifies major health problems within the community and, with input from community leaders, narrows those health issues to a manageable set of priorities. The goal of a CHNA is to identify key health problems and community assets.

Many organizations, such as non-profit hospitals and health departments, are required to conduct community health assessments. In most communities, the assessment is conducted with limited involvement from the public or other organizations. Through Live Well Partnership, the health of our community is assessed through a collaborative, community-wide process. A collaborative CHNA with broad community representation not only reduces duplicative efforts, but also ensures the entire community has a voice in identifying and addressing important health issues. This collaborative process is also used to develop communitywide goals and strategies to address the health priorities identified by the CHNA. This CHNA was sponsored by and complies with the regulatory or accreditation requirements for the following organizations: Baptist Hospital, Gulf Breeze Hospital, Jay Hospital, Sacred Heart Hospital, Florida Department of Health in Escambia County, Florida Department of Health in Santa Rosa County, and Community Health Northwest Florida.

The following pages summarize the findings of a year-long process to investigate the health of people residing in Escambia and Santa Rosa counties and the underlying demographic, social, economic and environmental factors that impact health. We encourage individuals and organizations to use this information to work together to reduce premature death and illness and to make our community a healthier place to live, work, and play.

### **Live Well Partnership**

Partnership for a Healthy Community, Inc. (DBA Live Well Partnership for a Healthy Community) was founded in 1994 as a not-forprofit 501(c)3 organization by Baptist Health Care and Sacred Heart Health System. Baptist and Sacred Heart have continued to provide financial and leadership support throughout the organization's 24-year history.

Since its inception, the mission of Partnership for a Healthy Community (hereafter referred to as Live Well Partnership) has been to measure the health of Escambia and Santa Rosa County residents and to identify community health problems. CHNAs were conducted in 1995, 2000, and 2005. Beginning in 2013, Live Well Partnership changed the frequency of needs assessments to every three years with CHNAs completed in 2013 and 2016. The 2019 CHNA marks the sixth health assessment conducted by the organization.

To fulfill its mission, Live Well Partnership works collaboratively with health departments, hospitals, community health organizations, social service agencies, and area businesses. Its 2018 Board of Directors is comprised of the following organizations:

### UNIVERSITY of WEST FLORIDA













Sacred Heart Health System

Sacred Heart Hospital Pensacola







United Way of Escambia County













Navarre Beach Bridge courtesy of Kimberly Pace

### **Community Definition**

A Metropolitan Statistical Area (MSA) is defined by the US Census Bureau as a geographical area that has a central urban core with economic ties to the surrounding area. The Pensacola MSA is comprised of Escambia County and Santa Rosa County with Pensacola designated as the urban core. While each county and the cities or towns within each has its own unique characteristics, the two counties are intertwined. It is common for residents from one county to flow to and from the other county for jobs, entertainment, education, and health care. For this reason, the entire Pensacola MSA was selected as the "community" covered by the CHNA.

Although this assessment covers the Pensacola MSA, individual collaborating partners may serve subareas of the MSA as noted in the table:

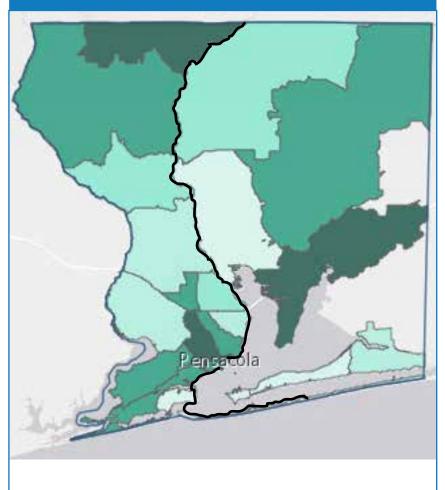
Collaborating Partner	Communities Served	
Baptist Health Care		
Baptist Hospital	.Escambia County and Santa Rosa County	
Gulf Breeze Hospital	Gulf Breeze, Santa Rosa County	
Jay Hospital	Jay, Santa Rosa County	
Community Health Northwest Florida	Escambia County and Santa Rosa County	
Florida Department of Health in Escambia CountyEscambia County		
Florida Department of Health in Santa Rosa CountySanta Rosa County		
Sacred Heart Hospital, Pensacola	Escambia County and Santa Rosa County	
University of West Florida	"Escambia County and Santa Rosa County	

### **SocioNeeds Index**

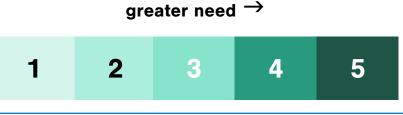
Although this CHNA covers a two-county area, we understand that counties are not homogeneous. Some neighborhoods are more affluent while others struggle with poverty, have low educational attainment, or have low access to food. As we seek to understand the health of our residents, we must identify areas that are socioeconomically vulnerable.

The **2018 SocioNeeds Index**, created by Conduent Healthy Communities Institute (Conduent HCI), is a measure of socioeconomic need that is correlated with poor health outcomes. Those with the highest values have the highest socioeconomic need, which is correlated with preventable hospitalizations and premature death. To illuminate the areas of highest need in our community, the selected locations are ranked from 1 (low need) to 5 (high need) based on their Index Value.

### 2018 SocioNeeds Index Map

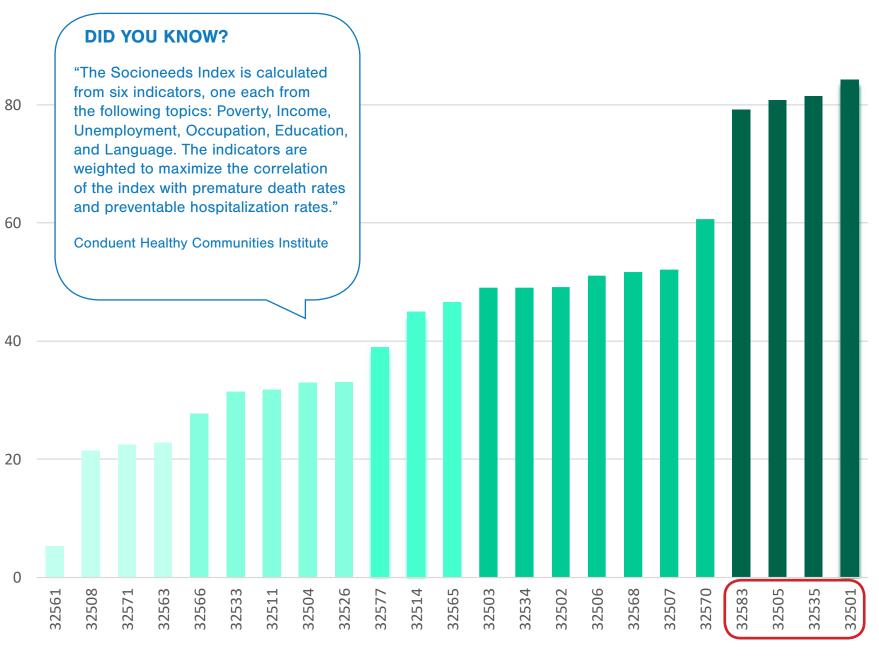






### 2018 SocioNeeds Index by Zip Code





The highest need zip codes are 32501, 32505, and 32535 in Escambia and 32583 in Santa Rosa.

### POPULATION

### **Community Profile**

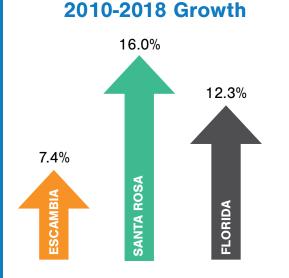
Northwest Florida's population is distinctive from the rest of Florida. Our racial and ethnic composition, age, demographics, income, educational attainment, military presence, and occupation stand apart from typical Florida communities. These factors impact the health of community residents. The following pages help us to better understand who we are as a community, and the influence of socioeconomic and demographic variables on our health. Throughout this report, Escambia data will always be depicted in **orange** and Santa Rosa in **green**.

### Compared to Florida...

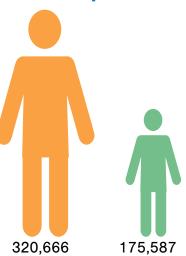
...Escambia County's rate of growth is slower, and the county has fewer Hispanics; however, Escambia's population is more racially diverse with a stronger military presence.

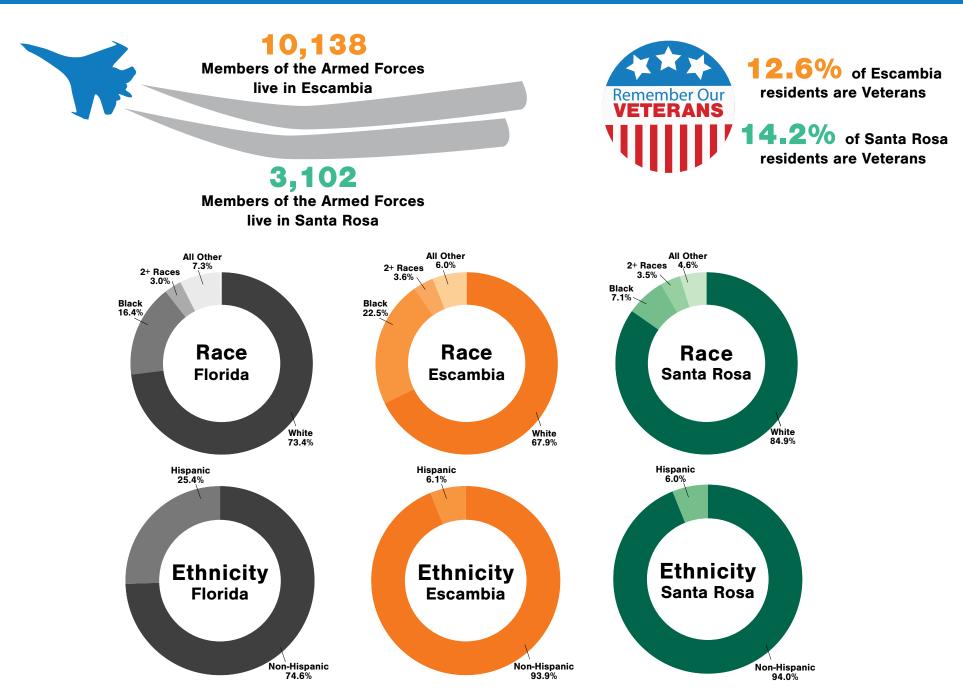
### Compared to Florida...

...Santa Rosa County is growing at a much faster rate and is not as racially diverse; the county also has a strong military presence from the surrounding armed forces bases.

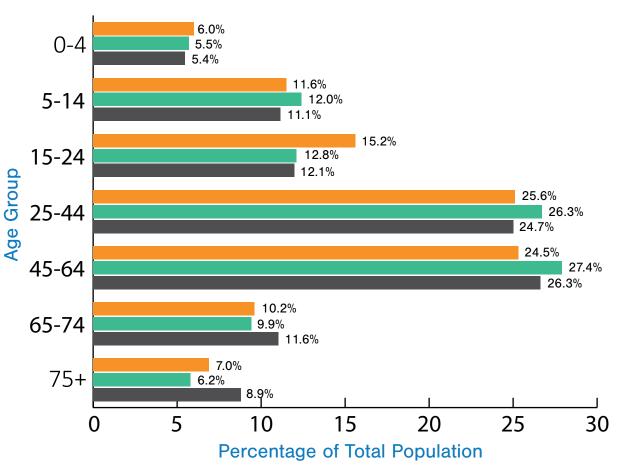


### **2018 Population**





### AGE



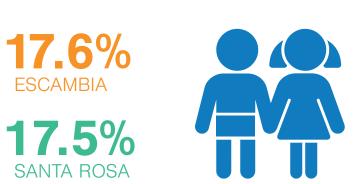
### Percentage of Population by Age Group

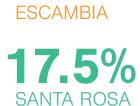
### Compared to Florida...

...Escambia County has more children and fewer seniors, smaller households and a lower median age by four years in 2016.

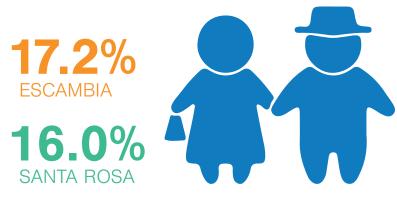
Compared to Florida...

...Santa Rosa County has more children and fewer seniors, slightly larger families, and a lower median age by two years in 2016.





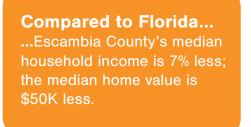
of total population are children (0-14 years)



of population are 65+

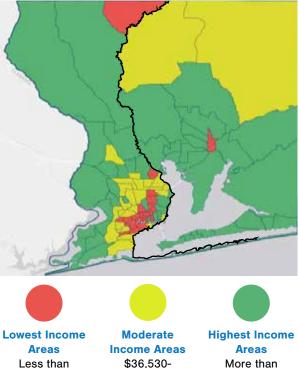
5-2-1-0 celebrates with young runners at the Pensacola Seafood Run courtesy of Marie Mott

### INCOME



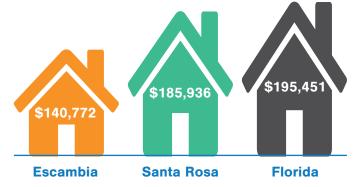
Compared to Florida... ...Santa Rosa County's median household income is 20% greater; the median home value is only \$10K less.

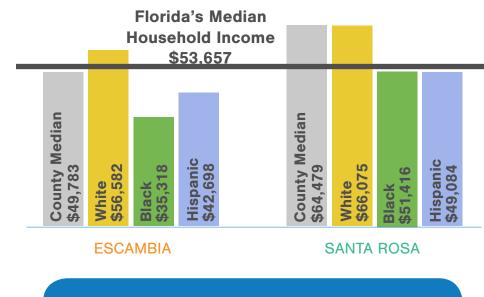
### **Median Household Income**





**Median Home Value** 



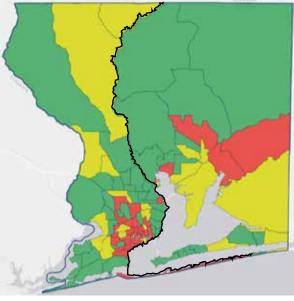


Santa Rosa's median household income is almost 30% greater than Escambia's.

### POVERTY



### **Children Living in Poverty** 2012-2016



### **QUICK FACT**

Federal Poverty Level (FPL) is an economic measure that is used to decide whether the income level of an individual or family gualifies them for certain federal benefits and programs. The FPL for a family of three is a household income of \$20,420.

DISPARITY

2.5 times greater than the white poverty rate.



**Highest Rates** 

More than 34.3%



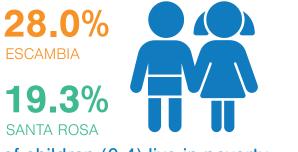
18.9% - 34.3%

Lowest Rate Less than 18.9%

Compared to Florida... ...the poverty rate in Santa Rosa County is significantly less than Escambia's.



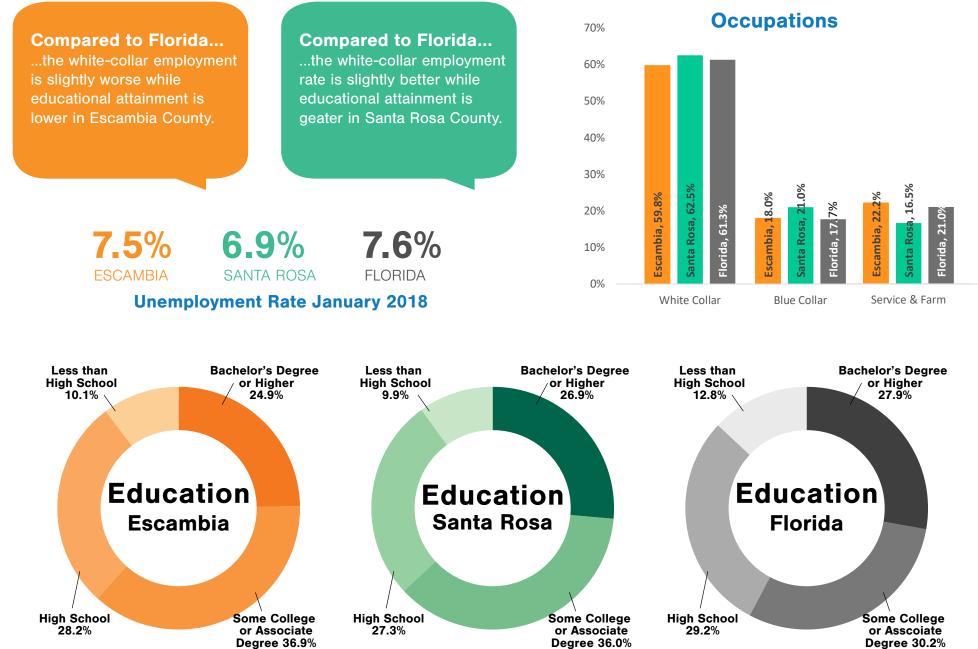
in SANTA ROSA, the black poverty rate is **1.7 times greater** than the white poverty rate.



of children (0-4) live in poverty



### **EMPLOYMENT AND EDUCATION**



Public Art Mural in Downtown Milton courtesy of Jenea Wood

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# **CHNA Methodology**

Pensacola Beach Pier courtesy of Jenea Wood

### Framework

Many health and community organizations in our area are required by accrediting bodies or regulatory agencies to conduct periodic community health assessments. For example, to retain accreditation, the Florida Department of Health must assess health status within each county every five years, while the Internal Revenue Service requires not-for-profit hospitals to identify and address community health needs every three years. In most communities, these assessments overlap each other in time, people involved, and content. This duplication results in the creation of narrowly-focused assessments and unaligned health improvement efforts.

In 2015, the Centers for Disease Control and Prevention (CDC) recommended communities adopt a "unified community health improvement framework supporting multiple stakeholders." The CDC's approach encourages hospitals, health departments and other community organizations, to work together to identify and address community health needs. This approach was embraced by Live Well Partnership in the current 2019 CHNA as well as all previous assessments.

To achieve a unified community health improvement framework, it was necessary to adopt a methodology that would meet the accrediting and/or regulatory requirements of all participants. The methodology adopted for the 2019 CHNA melds components from leading health industry experts into a cohesive process that participating organizations could embrace. The methodology adopted by Live Well Partnership is based on processes recommended by:

- Mobilizing for Action through Planning and Partnerships (MAPP) recommended by the National Association of County and City Health Officials (NACCHO) and used by local health departments
- Engaging Patients and Communities in Community Health Assessments from the Association for Community Health Improvement (ACHI) and the American Hospital Association (AHA) followed by many non-profit hospitals such as Baptist Health Care
- Assessing and Addressing Community Health Needs (2015 Edition II) from the Catholic Health Association (CHA) adopted by Ascension and Sacred Heart Health System
- HCI Community Health Needs
   Assessment Guide from Conduent/ Healthy Communities Institute (HCI)

### 2019 CHNA Methodology

**Community Health Improvement** Navigator from the Centers for Disease Control and Prevention (CDC)

The graphic and steps identified at the right illustrate the methodology adopted for the 2019 Escambia - Santa Rosa Community Health Needs Assessment. Steps 1 through Step 5 are discussed in this report. Step 6 and Step 7 are "Next Steps" which will be undertaken in 2019. Evaluation of progress (Step 8) will occur throughout the next three years and culminate with the development of the next CHNA in 2022.



### Step 1: Organize and Plan

- Select Methodology
- **Develop time line**

### Step 2: Identify and Engage Partners and **Stakeholders**

Form CHNA Steering Committee

### Step 3: Collect and Analyze Data:

- Define and Describe the Community
- Assess Community Themes & Strengths:
  - Community Survey
  - Community Leader Survey & Interviews
  - Resource Mapping
- Assess Forces of Change

- Assess Local Public Health System
- **Assess Community Health Status** 
  - **HCI/Conduent Health Data**
  - Florida Charts Data •

### **Step 4: Prioritize Issues**

- Review leading causes of death and illness
- Review social determinants of health
- Narrow to 3 or 4 priority health issues

### **Step 5: Communicate Results**

- Publicize results of data analysis
- Publicize priority health issues
- Solicit community feedback .
- **Issue CHNA Report** ۲



The Community Health Needs Assessment (CHNA) Steering Committee

### **Partners and Stakeholders**

An effort was made to involve individuals from many different sectors of the local economy in developing this CHNA. The Live Well Partnership Board, which includes health providers, social service organizations and business interests formed the backbone of the CHNA process. A Steering Committee, consisting of the Live Well Board and other community organizations, was established to provide guidance and input throughout data gathering and analysis. The Steering Committee provided input on their perceptions of health and health services, reviewed health outcomes, narrowed the focus to the top four priorities in each county, and approved this report.

### **Public Communication**

Local hospitals and county health departments participating in the CHNA are required to share the results of the assessment with the public and respond to comments. The prior CHNA (2016 – 2019) was placed on the websites of Live Well Partnership, Florida Department of Health in Escambia and Santa Rosa counties, Baptist Health Care, Sacred Heart Hospital, and Community Health Northwest Florida. During the 2016 – 2019 period, no comments or questions were submitted to any of the partners.

The preliminary findings of this CHNA report were communicated in September 2018 through a Pensacola News Journal article and an interview on WUWF radio. Additionally, a document describing the major causes of disease and death, perceptions discovered through surveys, and the selection of the top health priorities were placed on the websites of Live Well Partnership, Community Health Northwest Florida, Florida Department of Health in Escambia, Florida Department of Health in

Santa Rosa, Baptist Health Care, and Sacred Heart Hospital. This final CHNA report will also be posted on these websites. The public was invited to provide comments to or ask questions of any of these partners.

### Report: Escambia/Santa Rosa residents at high risk of diabetes, mental health and infant health concerns

Kerin Robinson, Pennarala News Journal Published 3 (4 p.m. CT Sept. 11, 2018). Updated 8:18 p.m. CT Sept. 12, 2018



Poor infant health, poor mental health, poor shid health, dialostes and drug use are the live major h challenges plaguing our area, according to the findings in a recent community survey

Every three years, Live Well Partnership for a Healthy Community and numerous community partners undertake a yearlong study of the health of Escandula and Santa Rosa residents called the Community lealth Needs Assessment. The findings are based on surveys of area residents, take with convirunity leaders and analysis of the leading causes of death and poor health in our two-county area.

Photo Grego installing and a second second second

among citizens

in preliminary findings released this month. Live Well highlighted 13 of the area's biggest health issues which include a prevalence of poor dental health, heart attacks, strokes and poor detary and exercise habits

The goal of Live Well Partnership's work is not just to identify problems, but also to help address them, so the organization n of the most pressing

We needed is namiw that down is a manageable group of priorities," Balley said. "Three across both county areas, and one for each county that is unique to that area."

Diabetes, infant health and mental health are shared issues.

About 12 percent of all Floridians have been diagnosed with diabetes, according to the report. The rates are closer to 14 percent and 16 percent in Santo Rosa and Escambia counters respectively, Between 2015-2017, dialeters has claimed 404 lives in our area and caused more than 1,700 energe room visits, the report save

Regarding mental health, there were more than 0.000 hospitalizations related to mental health disorders in 2017 alone. There were approximental-health related emergency rooms visits in the same time traine

Moren: Free worksul al Permacola Fitness Court unveiled al Maritme Park (bichare galleruhress/2018/04/27/free worksul al permacola fitness court) unvertied at maritime.com/24330985/)

Concerning intert mortality rates -- deaths of children before they reach 12 months -- the rate for all Florida children is about six deaths out of every 1,000 live birthe. That is slightly higher than the total U.S. ratio 5.8, which in turn is among the worst of any major, developed nation

https://www.pre.com/story/news/2016/9/11/secantica-sarita-ross-health-concerns-include-diabetes-mental-health/126661002/

1/2

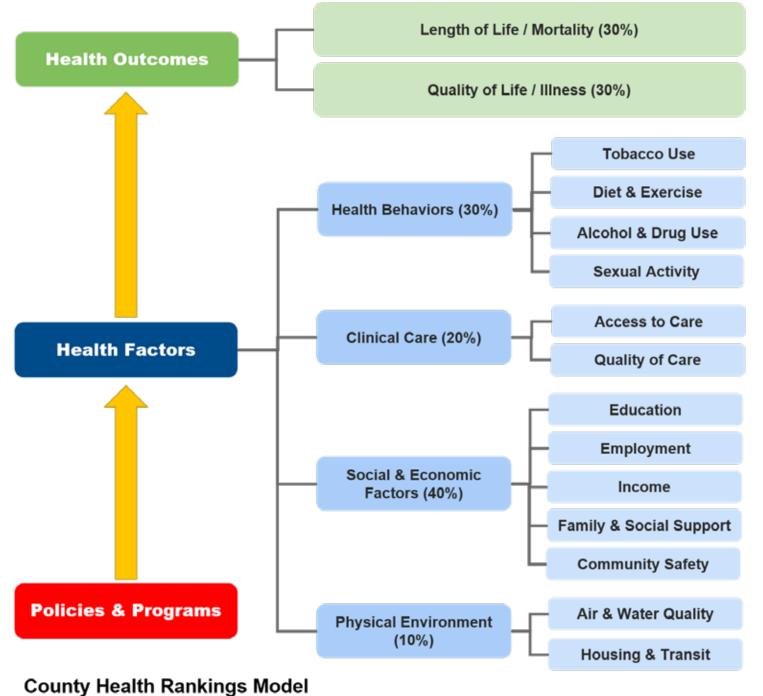
### **Community Health Framework**

Health is more than the care you receive from your doctor, treatment at a hospital, or even the medicines you take. Health is affected not only by healthcare services, but also by the environment we live in, by social and economic factors, and by our own behaviors. Factors such as education level, safety of the neighborhood, quality of the air, housing conditions, poverty and employment all affect our health, for either good or bad. These factors are called **social** determinants of health. A collaborative effort between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute (UWPHI) developed County Health Ranking and Roadmaps as a way to measure health within a community by looking at social determinants of health, access to and quality of health care, and personal health behaviors. The framework, shown on next page, illustrates the strong influence that **Health** Factors have on illness and death, otherwise known as Health Outcomes. Policies and Programs, such as the federal Clean Air Act, which limits the amount of harmful cancer-causing agents in our air, or a diabetes prevention program hosted by a hospital or health department, can improve Health Factors, and thus lead to lower rates of disease and better Health Outcomes.

Live Well Partnership has adopted the County Health Rankings framework. This CHNA looks first at **Health Outcomes** within our community to understand the causes of death, disease and disability. The next step after the CHNA will be to examine the **Health Factors** contributing to poor **Health Outcomes** and **Policies and Programs** that could be changed to improve our health. These issues will be addressed in the 2019 Community Health Improvement Plans.

### FREEDOM

Veteran's Memorial Park in Milton Florida courtesy of Jenea Wood



© 2014 UWPHI

### Data Analysis Sources and Methodology

A comprehensive CHNA includes detailed examination of health and socioeconomic data. The primary source of data for this CHNA was Conduent Healthy Communities Institute (Conduent HCI). Conduent HCI provided approximately 200 key health, economic, and quality-of-life indicators for each county. Additionally, many indicators were available at a zip code or census tract level allowing for a more in-depth view. These indicators were continuously updated ensuring access to the most up to date information.

Conduent HCI compares each indicator to other Florida counties, the Florida average, national average, and when available, Healthy People 2020 targets; it also indicates whether the indicator is improving, worsening, or is unchanged.

In addition to Conduent HCI data, data was pulled from other sources, including but not limited to:

- Florida Department of Health, FloridaHealthCHARTS.com
- Agency for Health Care Administration
- Claritas

The challenge in dealing with thousands of points of data is to turn the data into useful information. That is, what does the data tell us about the health of our community? And, what are the most important health problems to address? Conduent HCI's Data Scoring Tool helped Live Well Partnership make sense of the indicators. The Data Scoring Tool assigned a score for each indicator from one to three along six dimensions:

- Value compared to Florida
- Value compared to the United States,
- Distribution within Florida
- Distribution within the United States
- Trend over time

Next, the HCI Scoring Tool generated an overall, or Composite Score, for each indicator. Guided by the Composite Score generated by Conduent HCI's Data Scoring Tool, Live Well Partnership identified 24 leading causes of death and illness/disability in Escambia and Santa Rosa counties. The 24 leading causes of death and illness fell into five major categories: chronic disease, maternal/child health, behavioral health, infectious disease, and unintentional injury. The 24 leading causes of death, illness, and disability were then further analyzed using a Criteria Weighting Methodology to find the 10 health outcomes of greatest concern within the community. The steps of the Criteria Weighting Methodology were:

- Priority-setting criteria were established (see table on the following page)
- Based on secondary or primary data, each health condition was rated 0 to 4 on each criterion, with 0 indicating the condition performed well on that criterion, while a 4 signaled the health condition performed poorly on that criterion
- Ratings were entered on a matrix
- Each rating was multiplied by the corresponding criterion weight.
   Secondary data criteria were weighted as a group at 0.75, while primary data criteria were weighted at 0.25
- The final score for each health condition was summed, and the top 10 health needs for each county were identified based on the final score

### Health Outcomes -24 Leading Causes of Death, Illness, & Disability

### Chronic Disease

### **Behavioral Health**

4 Heart Diseases 

2 Lung Diseases

**Priority Setting Criterion** 

- Mental Disorders 6 Types of Cancer Drug Abuse
  - Alcohol Abuse

    - Alzheimer's Disease

Stroke

Oral Health

Diabetes

- Injury
- Suicide
- Motor Vehicle Accidents
- Unintentional Injury

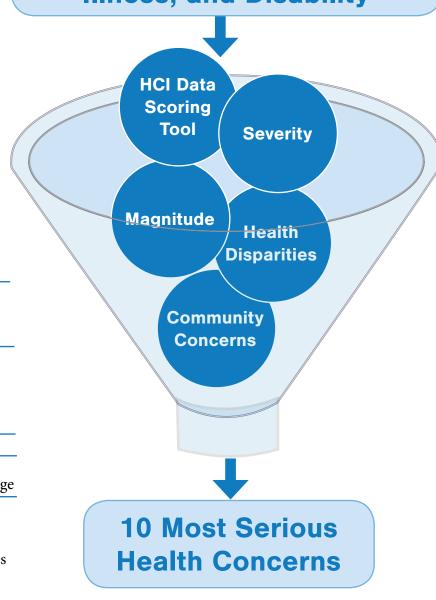
### Maternal/Child Health

- ► Maternal Care
- Infant Care
- Child Health (1-5)

### Infectious Disease

Sexually Transmitted Diseases including HIV/AIDS

### 24 Leading Causes of Death, **Illness, and Disability**



Thome offering	Description
HCI Composite Score	• Trend
	Comparison to Florida and US rates
	Comparison to Healthy People 2020
Magnitude	• Number of newly diagnosed cases,
	• Number of deaths
	• Number of hospital admissions, or
	• Number of emergency department visits
Severity (death before 75)	• Years of potential life lost (YPLL)
Health disparities	<ul> <li>Incidence rates compared to county and Florida average by race, ethnicity and/or ag</li> </ul>
Community Concerns	• Perceptions of the most important health issues as revealed through the community survey

Description

• Perceptions of most important health issues from the key leader survey

### **Health Outcomes**

By applying the weighted priority selection criteria, the 24 leading causes of death and illness were narrowed to top 10 health outcomes of greatest concern in each community. Seven of these outcomes are the same for Escambia and Santa Rosa. Each county also has three health outcomes that are unique to that community.

### **Top 10 Most Serious Health Concerns Health Concerns in Health Concerns in** Santa Rosa County **Escambia County** Heart Disease Heart Disease Diabetes Diabetes Heart Attack Heart Attack Infant Health Infant Health Lung Cancer Lung Cancer

Mental Health Stroke **Child Health** Sexually-Transmitted Disease **Unintentional Injury** 

**Mental Health** Stroke **Alcohol Abuse Drug Abuse Prostate Cancer** 

### **Data Analysis Sources**

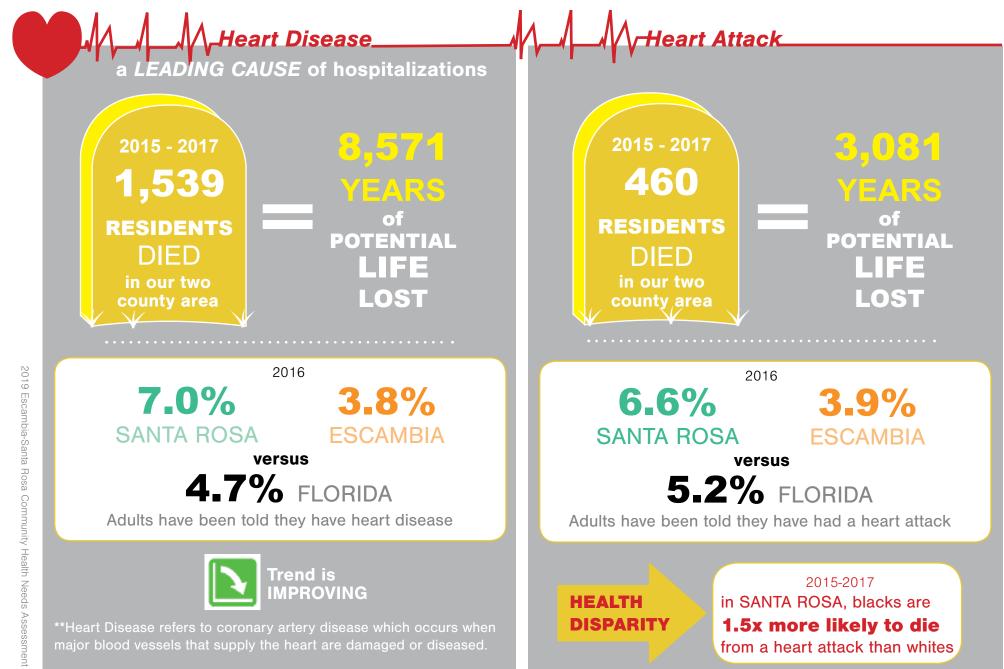
The following pages summarize the results of the data analysis process. Data was collected from the following sources:

- Florida Department of Health, FLHealthCHARTS, <u>flhealthcharts.com/charts/Default.aspx</u>
- Florida Department of Health, FLHealthCHARTS, 2016 Behavioral Risk Factor Surveillance
   Survey, <u>flhealthcharts.com/charts/Brfss.aspx</u>
- Florida Agency for Health Care Administration, Quarter 4 2016 Quarter 3, 2017, inpatient and outpatient ED data, Escambia County and Santa Rosa County
- HCI/Conduent Community Dashboard, <a href="https://www.liven.org/the-data?hcn=CommunityDashboard">https://www.liven.org/the-data?hcn=CommunityDashboard</a>
- Years Productive Life Lost calculated based on an average life span of 74.5 years
- Florida Department of Health, FLHealthCHARTS, Florida Death Query, <u>flhealthcharts.com/</u> <u>FLQUERY/Death/DeathRate.aspx</u>
- Florida Department of Health, FLHealthCHARTS, 2016 Florida Youth Substance Abuse Survey, <u>flhealthcharts.com/charts/Default.aspx</u>

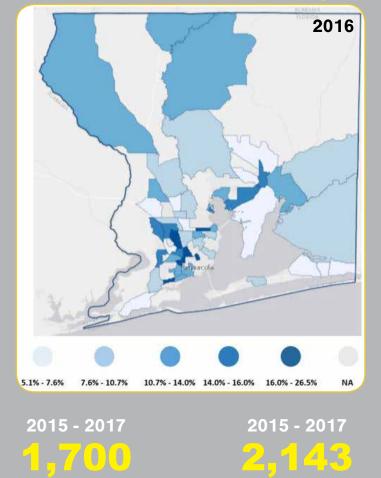


River Walk in Downtown Milton courtesy of Jenea Wood

### **Top 10 Health Concerns in both Escambia and Santa Rosa**







PRETERN

**BIRTHS** 

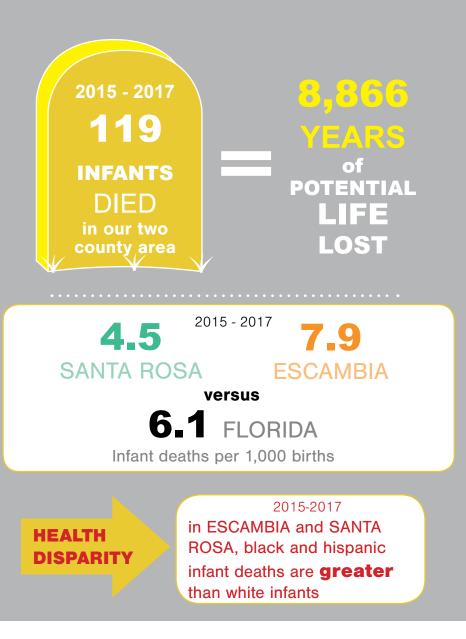
before 37 weeks

low

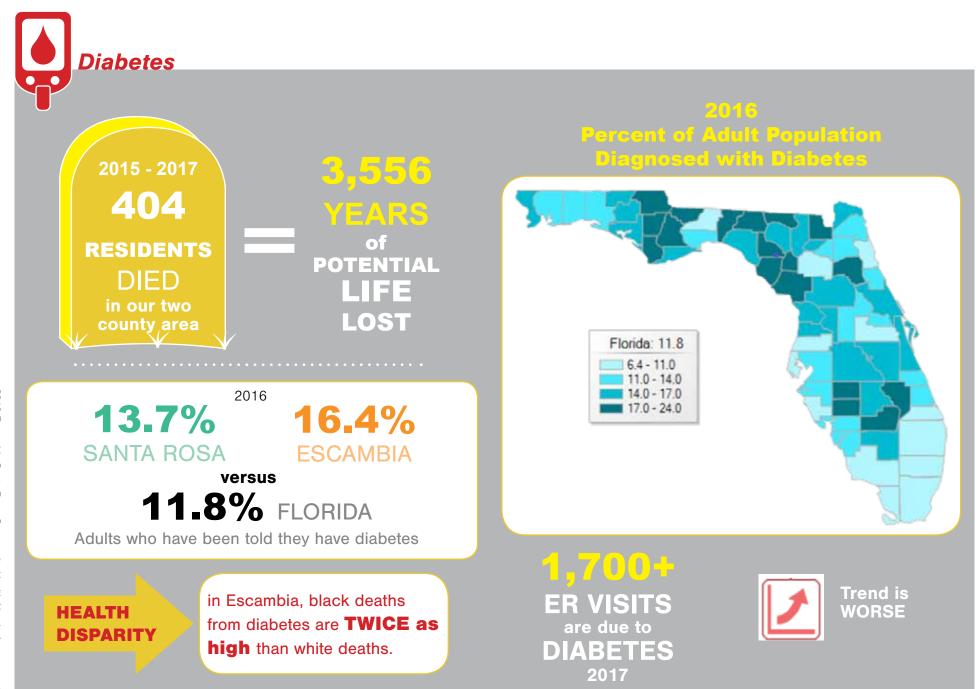
**BIRTHWEIGHT** 

BIRTHS

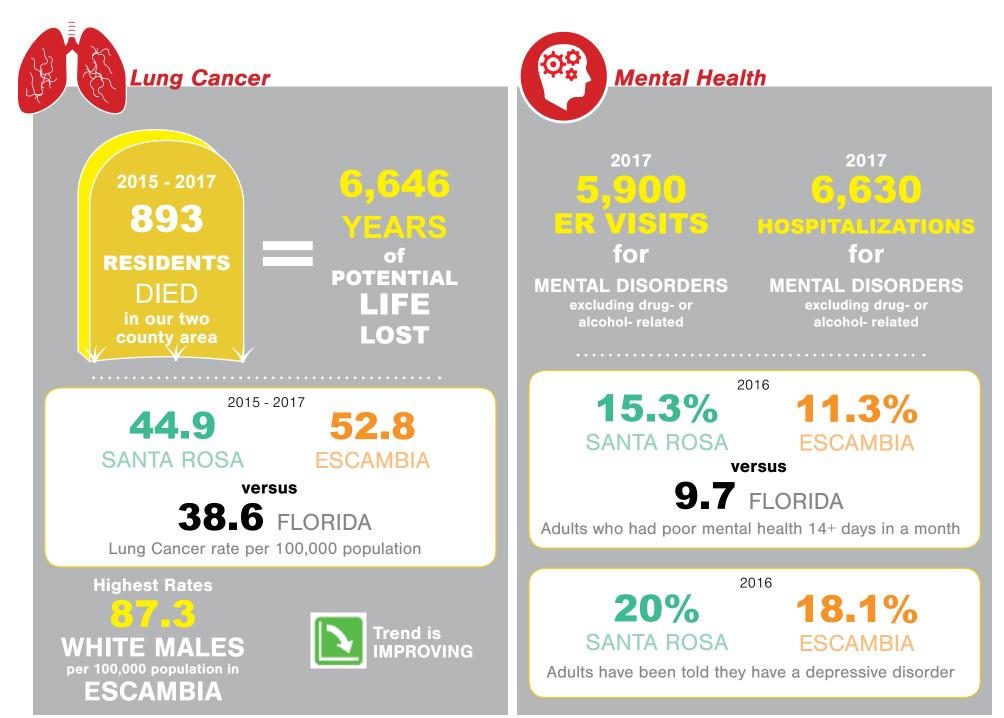
under 5 lbs, 8 oz.

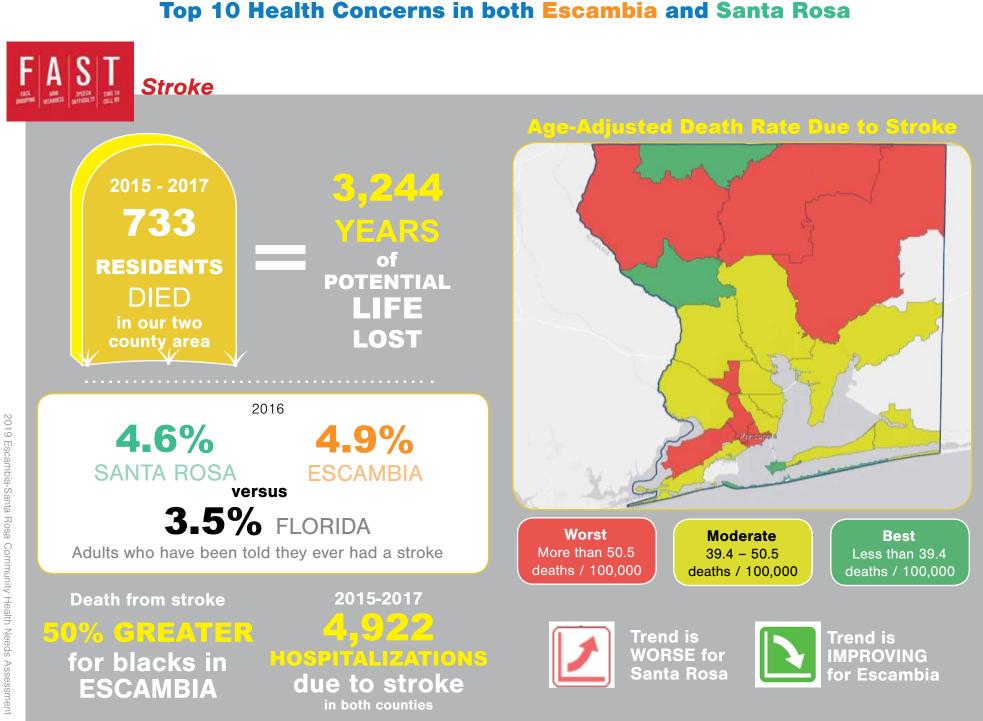


## 2019 Escambia-Santa Rosa Community Health Needs Assessment 27



### **Top 10 Health Concerns in both Escambia and Santa Rosa**







### **Top 10 Health Concerns in Escambia only**







2019 Escambia-Santa Rosa Community Health Needs Assessment

# **Top 10 Health Concerns in Escambia only**



One of the Tall Ships in Escambia Bay courtesy of Jenea Wood

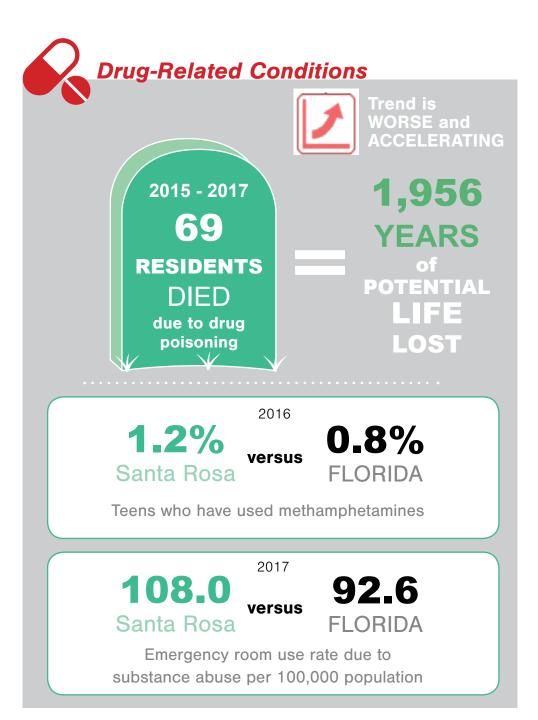
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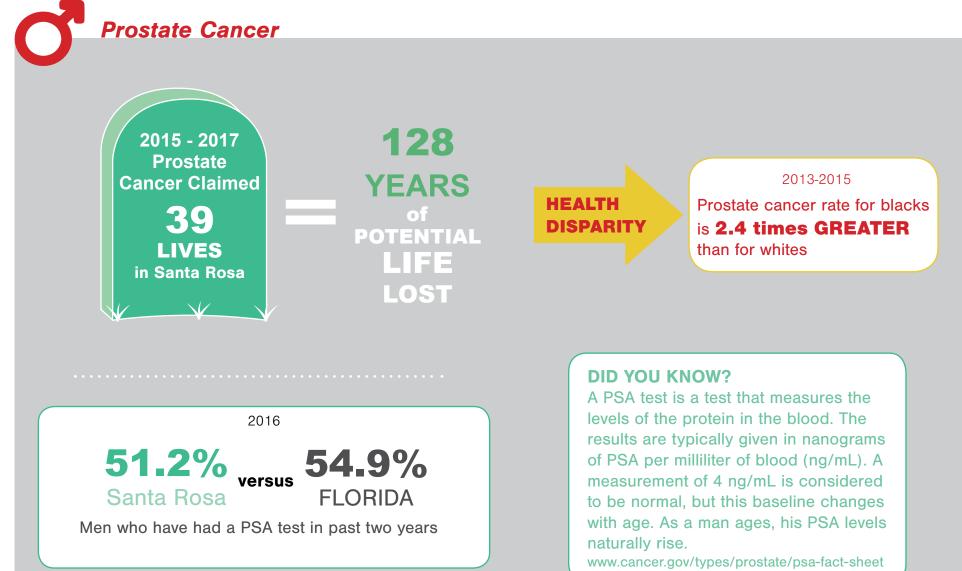
# **Top 10 Health Concerns in Santa Rosa only Alcohol-Use-Related Conditions** 903 2015 - 2017 71 YEARS RESIDENTS POTENTIAL DIED 비기가 due to liver disease/cirrhosis LOST 2016 35.3% 25.5% versus **FI ORIDA** Santa Rosa Percent of high school students who have used alcohol in past 30 days 2012 - 2016 36.0% versus 26.4% Santa Rosa FLORIDA

Percent of motor vehicle crash deaths with alcohol involvement





# **Top 10 Health Concerns in Santa Rosa only**



Public Art by James Priddy across from the Historic Imogene Theater in Downtown Milton courtesy of Jenea Wood

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#### **Community Survey**

More than 2,200 residents of Escambia and Santa Rosa counties were surveyed in the spring of 2018 about their perceptions of health and health care services. The survey was conducted online as well as by paper. A concerted effort was made to include individuals from a broad cross-section of the population. This included outreach efforts to obtain the perceptions of vulnerable populations, such as low income, minority, and health care insecure residents (shown in the table below).

Vulnerable Populations	Escambia	Santa Rosa	Total
Less than High School Education	6.3%	9.5%	7.6%
Income less than \$15,000	20.8%	22.3%	21.4%
Uninsured	20.5%	36.9%	27.3%
Black or African American	31.5%	4.9%	20.5%
Hispanic	4.8%	6.2%	5.4%
Disabled	5.6%	4.3%	5.1%
Unemployed	5.4%	9.6%	7.2%

Responses were remarkably consistent across the two counties and between all respondents. This was particularly true for the questions regarding important health issues and unhealthy behaviors. Obesity, mental health, and heart disease/stroke were important issues within both counties. Drug abuse, poor eating habits, and not seeing a doctor or dentist were unhealthy habits of high concern for all respondents. Vulnerable populations differed from other respondents in two ways. First, vulnerable respondents were concerned with dental health, while for all respondents, diabetes fell into the top four most important health issues. This may reflect the difficulty that the uninsured or under-insured have in accessing physician and dental services. Vulnerable respondents ranked child abuse in the top four unhealthy behaviors, while overall responses included lack of exercise among the top four.

#### **Most Important** Most Concerning **Health Problems Unhealthy Behaviors Vulnerable Vulnerable All Respondents All Respondents Population Population** • Overweight/ • Overweight/ • Drug Abuse • Drug Abuse Obesity Obesitv • Poor Eating Habits • Poor Eating Habits Mental Health Mental Health Lack of Exercise Not seeing a Problems **Problems** Doctor/Dentist Not seeing a • Heart Disease/ Heart Disease/ Doctor/Dentist Child Abuse Stroke Stroke Dental Problems • Diabetes Question: "What do you think are the most important health issues

in your county? (That is, what are the problems that have the greatest

impact on overall health?) Select 4."

Question: "Which of the following unhealthy behavior in the community concern you the most? (That is, which behaviors have the greatest impact on health within the community?) Select 4."

2019 Escambia-Santa Rosa Community Health Needs Assessment

# 33 Community Leaders

24% Healthcare 24% Business 21% Social Service or Charitable 15% Government 12% Education 3% Faith-based

65% serve both Escambia and Santa Rosa

21% Escambia only

**15% Santa Rosa only** 

#### **Community Leader Survey**

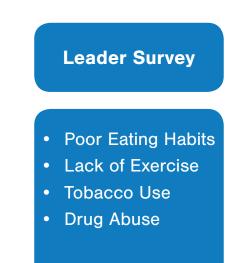
Community leaders were also surveyed using a similar questionnaire to the community survey. A total of 33 leaders participated in the online survey. The leaders shared many of the same concerns as voiced in the community survey. As with the community survey, leaders identified obesity, mental health, and diabetes as the most important health issues. Leaders also shared the community's concern that poor eating habits, lack of exercise, and drug abuse were unhealthy behaviors. Leaders, however, differed from the community in ranking drug abuse in the top four most important health issues facing residents and in ranking tobacco use among the top unhealthy behaviors.

## Most Important Health Problems

Leader Survey

- Mental Health
   Problems
- Overweight/ Obesity
- Drug Abuse
- Diabetes

## Most Concerning Unhealthy Behaviors



City of Milton Downtown Fountain courtesy of Jenea Wood

#### **Forces of Change Assessment**

The CHNA Steering Committee participated in a process to identify the forces of change at work within our community. The purpose of this assessment was to answer two questions:

- What is occurring or might occur that affects the health within Escambia and Santa Rosa counties
- What specific threats or opportunities are generated by these occurrences

Through a facilitated consensus building methodology, the Steering Committee identified the five most compelling forces at work in our two-county community. The themes of community schools and the faith community represent promising approaches to health improvement, while the other three forces reflect issues of grave concern that should be addressed.

## **Community School**

Health-related services for students, their families and surrounding neighborhoods are made available within a school. C.A. Weis Elementary in Escambia is a local example.

## **Health Literacy**

Health literacy is the ability to understand basic health information and services needed to make appropriate health decisions, such as following doctor's orders, taking medicine as prescribed, or knowing how to access services.

## **Drug Abuse**

Drug abuse is the overindulgence in or dependence on drugs or alcohol. It does not necessarily mean addiction to the substance.

## Access to Appropriate Level of Care

The ability to obtain health care in a timely manner at lowest appropriate level. Access may be limited due to no or inadequate insurance, few close-by providers, transportation difficulties, or high out-of-pocket deductibles.

## Faith Community

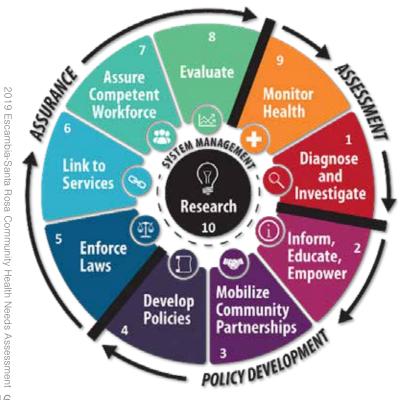
Many faith-based organizations actively engage their members on health issues or health screening and are an asset in improving community health. After identifying the five major forces of change, the CHNA Steering Committee explored the threats and opportunities posed by each.

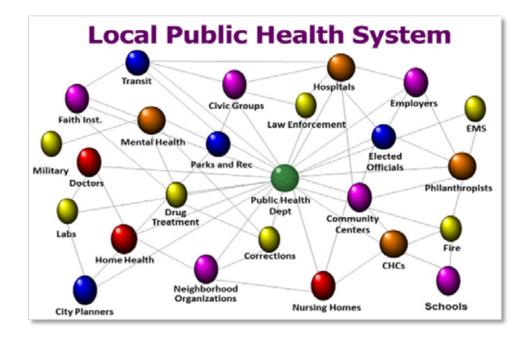
Community School	Health Literacy	Substance Abuse	Access to Appropriate Care	Faith Community
<ul> <li>THREATS</li> <li>Building trust within neighborhoods</li> <li>Financial sustainability</li> <li>Resistance to change from faculty and parents</li> <li>Preference for status quo in education and healthcare</li> <li>Lack of space</li> <li>Not scalable, lack of adequate staff</li> </ul>	<ul> <li>THREATS</li> <li>Health system complexity</li> <li>Cultural literacy of providers</li> <li>Fear and mistrust</li> <li>Use of Internet for self-diagnosis</li> <li>Miscommunication between provider and patient</li> <li>Generational influence on behavior</li> </ul>	<ul> <li>THREATS</li> <li>Increasing social acceptance</li> <li>Limited treatment options, particularly for low income or under-insured</li> <li>Stigma</li> <li>Denial or commitment to change</li> <li>Mental health co-morbidity</li> <li>Peer pressure</li> <li>Dysfunctional families</li> </ul>	<ul> <li>THREATS</li> <li>Poverty</li> <li>Transportation issues</li> <li>Poor geographic dispersion of providers</li> <li>Transactional care</li> <li>Misuse of emergency ER and ambulances</li> <li>Low health literacy</li> <li>High deductibles</li> <li>Medicaid reductions</li> <li>Mixed messages from hospitals that advertise short wait times</li> </ul>	<ul> <li>THREATS</li> <li>Volunteer led <ul> <li>Too few volunteers</li> <li>Limited time</li> </ul> </li> <li>Limited resources</li> <li>Communication and information sharing</li> <li>Duplication of services</li> <li>Lack of coordination between churches</li> </ul>
<ul> <li>OPPORTUNITIES</li> <li>Pilot provides model to follow</li> <li>Better health leads to better educational outcomes</li> <li>Access to appropriate level of care for low income, transportation disadvantaged families</li> <li>Address behavioral health issues</li> <li>Faculty and parental support/engagement</li> </ul>	<ul> <li>OPPORTUNITIES</li> <li>Provider training on culture and appropriate communication</li> <li>Patient education</li> <li>Partnership with faithbased organizations to educate members</li> <li>Use of navigators</li> <li>Use internet, social media, and mobile devices to educate</li> <li>Medical home</li> <li>Telemedicine</li> </ul>	<ul> <li>OPPORTUNITIES</li> <li>Public awareness of opioid crises</li> <li>Improved screening, intervention and treatment (SBIRT)</li> <li>Potential for increased funding</li> <li>Range of treatment options</li> <li>Early education (K-2)</li> <li>Better community education</li> </ul>	<ul> <li>OPPORTUNITIES</li> <li>Medical homes</li> <li>Taking services into communities of need</li> <li>Dental van</li> <li>Better transportation</li> <li>Education on resource availability</li> <li>Improved health literacy</li> <li>Better coordination of care and information sharing</li> <li>Telemedicine</li> <li>Education and prevention</li> </ul>	<ul> <li>OPPORTUNITIES</li> <li>Know and have trust of the community</li> <li>Faith models available to follow</li> <li>Provide them with education and training to meet health needs of parishioners</li> <li>Do a pilot with a congregation</li> </ul>

## **Forces of Change Assessment**

The Local Public Health System (LPHS) includes all entities that contribute to the delivery of public or personal health. Public health departments are typically at the center of this system as seen in the graphic to the right. This system includes, but is not limited to: county health departments, hospitals, community clinics, federally qualified health centers, elected officials, schools, non-profit organizations, faith institutions, public transit, civic and neighborhood groups, and the military.

# 10 Essential Health Services





To assess our local public health system, the Florida Department of Health in each county uses the 10 **Essential Public Health Services** framework developed by the National Association of County and City Health Officials. This framework includes a self-assessment rating scale: No Activity, Moderate Activity, Significant Activity, and Optimal Activity. Scores on the self-assessment are used to implement continuous quality improvement activities by identifying strengths, weaknesses, opportunities, and threats within each of the 10 essential health services.

For this process, the Florida Department of Health in Escambia and Santa Rosa counties asked partner entities to score at least one of the 10 essential services using the rating scale above. In addition, partners were asked to give examples of strengths, weaknesses and opportunities for improvement. A panel of our partners and subject matter experts then met to discuss and vote on the current capabilities of the LPHS. This process was conducted separately in Escambia and Santa Rosa counties, and scores cannot be compared across the two counties.

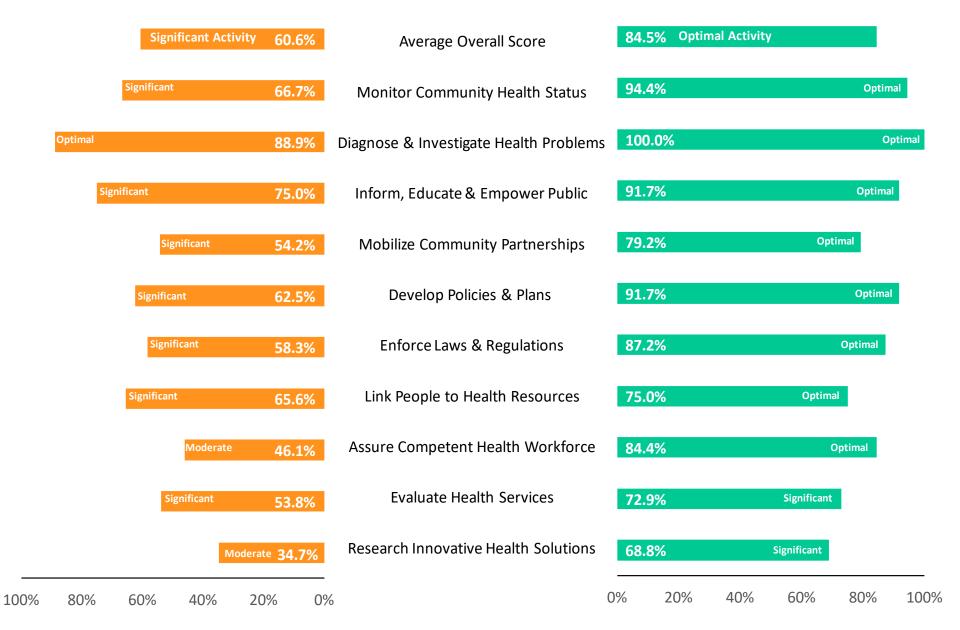
Blackwater State Park courtesy of Deborah Stilphen

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# **Average Essential Public Health Service Self-Assessment Scores**

# Escambia

# Santa Rosa



# **Escambia - Strongest Performance**

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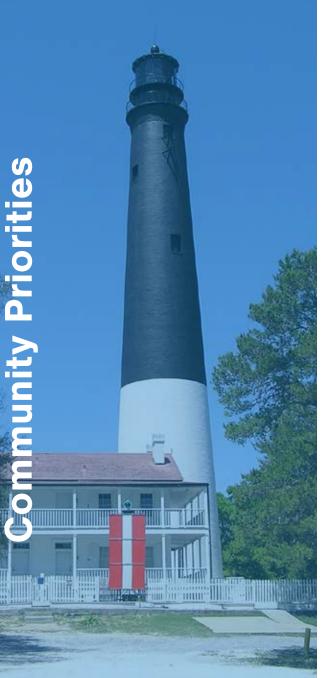
This Essential Public Health Service is all about public health preparedness; Escambia has a great response plan when it comes to dealing with public health threats. County officials work closely with the Department of Health in Escambia County to monitor and respond timely to a potential incident. The Local Public Health System uses several training events and emergency notification systems to ensure the proper and timely response. The partners involved are county management, local hospitals and laboratories. The lack of a large laboratory that is within an hour limits our ability to respond to emerging chemical and biological threats.

# **Escambia - Weakest Performance**

# Santa Rosa - Strongest Performance

ES 2: Diagnose and Investigate.....100.0% Santa Rosa County utilizes multiple surveillance systems to detect and monitor emerging health threats, including a syndromic surveillance system (ESSENCE), a statewide reportable disease database which includes data from Florida's Poison Control Center, a statewide epidemiologic communication network (EpiCom), and CDC's nationwide epidemiologic exchange (Epi-X). All reportable diseases are submitted to the state within 14 business days. In addition to maintaining written instructions for handling communicable disease outbreaks and toxic exposures in various facilities, Santa Rosa County's Public Health Preparedness unit develops and maintains protocols for responding to natural and manmade disasters. The County works closely with the jurisdictional Emergency Response Coordinator to plan for biological, chemical and nuclear emergencies. Emergency response exercises are conducted throughout the year and include community partners. Santa Rosa County only utilizes licensed or credentialed laboratories which can meet public health needs during emergencies 24/7. Santa Rosa County maintains written protocols for handling, transporting and delivering lab specimens.

# Santa Rosa - Weakest Performance



Pensacola Lighthouse courtesy of Elaine Co

#### **Priority Selection Methodology**

It would be impossible to tackle all 10 health issues at the same time across two counties and attain measurable improvement. Addressing a small number of health issues in a coordinated, rigorous manner is more effective than uncoordinated efforts aimed at multiple problems. As the saying goes, "if everything is important, then nothing is."

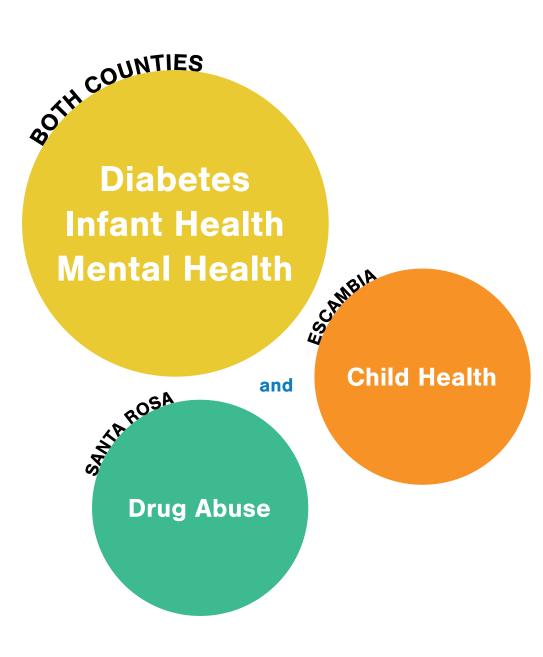
Identifying a few priorities will allow our community to concentrate limited resources to achieve the greatest impact on what is most important. A Relative Worth Methodology was used to select the top three health issues that jointly effect both counties and an additional issue in each county that is unique to it. The CHNA Steering Committee, which is comprised of 38 health, social service, business and governmental entities, participated in the prioritization process. The Steering Committee represents a cross-section of organizations and individuals with experience and knowledge of the health problems across our two-county community. The steps in the Relative Worth Method are as follows:

 Prior to voting, the Steering Committee received a detailed presentation on the results from the community survey, key leader survey, and data analysis and discussed the findings

- Participants were initially given three votes
- Criteria for consideration during voting included magnitude of the problem and existence of health disparities
- Participants distributed their votes among the seven health conditions that impact both counties
- Participants were next given two additional votes and were instructed to vote for one health need that is unique to Escambia and one health need unique to Santa Rosa
- The health concerns with the greatest number of votes were selected as the top priorities for the community
- This was followed by discussion and consensus building around the priorities

#### **Priorities – Focusing on What's Important**

The prioritization process gives clear direction on what health outcomes are most important for our community to address over the next three years. Diabetes, infant health, and mental health are priorities for both Escambia and Santa Rosa, while child health is a priority for Escambia and drug abuse is an urgent concern in Santa Rosa.





North Santa Rosa County courtesy of Deborah Stilphen

#### Conclusions

The County Health Rankings framework, which depicts how health factors within a community determine the quality and length of life of residents, guided this CHNA process and helped to organize our findings. Through analysis of statistical data and the collection of primary data, the CHNA:

- Identified the top 10 causes of disease, disability and death within Escambia and Santa Rosa counties
- Found that behaviors that lead to obesity or that involve use of drugs and tobacco are of high concern among residents
- Ascertained that mental health, dental care, elderly services and drug abuse treatment are difficult to obtain due primarily to poor geographic distribution of services and affordability
- Confirmed that vulnerable populations seek routine care from hospital emergency rooms
- Mapped local health resources related to health priority areas
- Identified the top four zip codes with highest rates of poverty and other socioeconomic needs that are associated with poor health outcomes; and
- Discovered that a lack of adequate transportation is a barrier to health care throughout the two-county area

These conclusions and other information informed the selection of the top health priorities, which are:

- Diabetes (both counties)
- Infant Health with a focus on infant mortality (both counties)
- Mental Health (both counties)
- Child Health (in Escambia)
- Drug Abuse (in Santa Rosa)

Pace High School NJROTC on the flightline at Whiting Field courtesy of NAS Whiting Field Public Affairs Office

onclusions

		MAJOR FINDINGS	HEALTH PRIORITIES	
HEALTH TOP 10 Health OUTCOMES Outcomes	Heart Disease			
		Diabetes		
		Heart Attack		
		Infant Health	Both Counties Diabetes	
	Lung Cancer	Infant Health		
	Mental Health Conditions	Mental Health		
		Child Health (only Escambia)	<u>Escambia</u>	
		STD's (only Escambia)	Child Health	
		Unintentional Injuries (only Escambia)	<u>Santa Rosa</u> Drug Abuse	
		Alcohol-Related Disease/Deaths (only Santa Rosa)		
		Drug Use-Releated Disease/Deaths (only Santa Rosa)		
		Prostrate Cancer (only Santa Rosa)		

	Health Behaviors	Poor Eating Habits		
		Lack of Exercise		
		Drug Use		
		Tobacco Use		
HEALTH	Clinical Care	Not Seeing a Doctor or Dentist		
		Access to Appropriate Level of Care/ Use of ER for Basic Care		
		Availability of Mental Health Services		
		Availability and Affordability of Substance Abuse Care		
		Availability of Dental Care		
		Availability of Services for Seniors		
		Identification of Community Health Resources		
FACTORS				
	Social & Economic Factors	Areas with Highest Socioeconomic Need that Impacts Health: 32501 32505 32535 32583		
		Lack of Health Insurance/Health Insurance Affordability		
		Low Health Literacy		
		Affordability of Healthy Food/Food Insecurity		
	Physical Environment	Transportation to Services		





Veteran's Memorial Park in Milton Florida courtesy of Jenea Wood

#### **Community Health Improvement Plan**

Identification of community health priorities is the final step in the development of this CHNA report to the community. However, it is the beginning of a community-wide, collaborative effort to improve the health of Escambia and Santa Rosa residents. In early 2019, Work Groups will be formed for each health priority to develop a Community Health Improvement Plan (CHIP). Each CHIP Work Group will be responsible for:

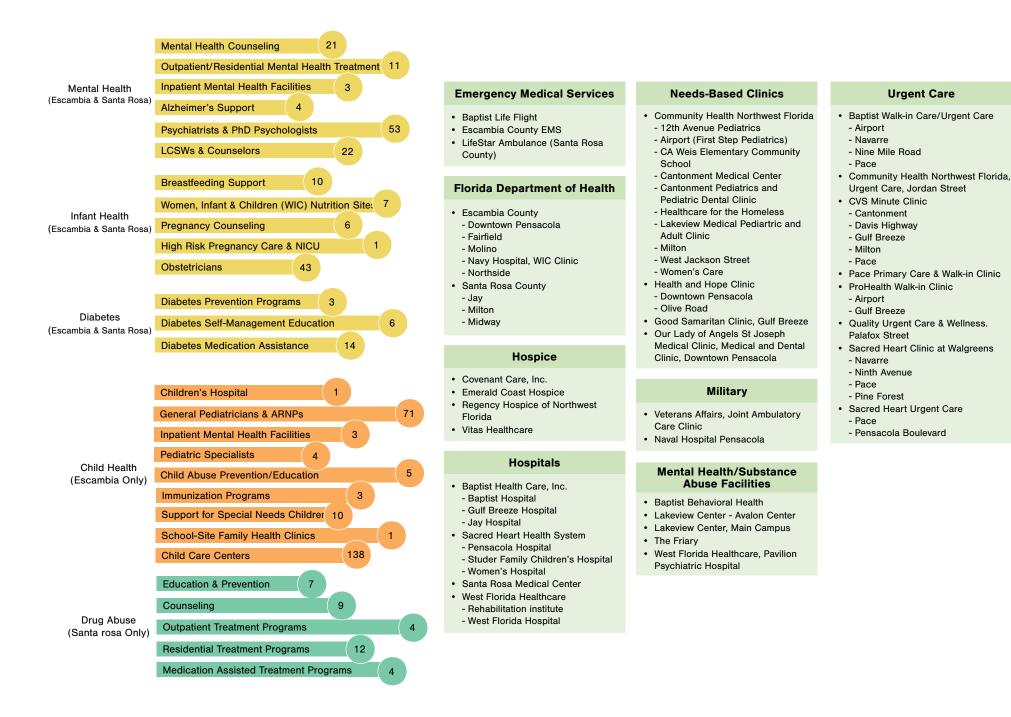
- Exploring in greater depth the Health Factors contributing to increased rates of death and disease
- Establishing the desired goals and the strategies for reaching the goals
- Creating action plans detailing the specific action steps that will occur over the next three years
- At least annually, evaluating progress and adjust action steps as needed



#### **Community Resources**

Many extraordinary healthcare providers and service organizations serve Escambia and Santa Rosa residents. These organizations form the backbone of our local public health system and are crucial partners in addressing priority health issues. Many of these organizations will be asked to participate in developing goals and strategies and implementing the action plans. To get a sense of what organizations exist as potential community health partners in the next phase, Live Well Partnership has identified healthcare and community resources. This preliminary asset inventory will be expanded upon during the next step.

## **Escambia and Santa Rosa Health Care Facilities**



# Acknowledgements

Pace High School NJROTC future pilot in a T-6B Flight simulator at Whiting Field courtesy of NAS Whiting Field Public Affairs Office

#### **Partners and Stakeholders**

The 2019 Escambia – Santa Rosa CHNA is the result of a collaborative community-wide effort involving a variety of organizations serving both counties. Live Well Partnership thanks the following for their participation.

#### CHNA Planning Committee / CHNA Sponsors - responsible for planning, data collection/analysis, communication and report writing

- Brett Aldridge, Baptist Health Care
- Myesha Arrington, Community Health Northwest Florida
- Amy Barron, Sacred Heart Health System
- Nora Bailey, Live Well Partnership
- Paula Bides, Ascension Florida
- John Clark, Council on Aging of Northwest Florida
- Carter Craddock, Baptist Health Care
- Denice Curtis, University of West Florida, Usha Kundu, MD, College of Health •
- Matt Dobson, Florida Department of Health Santa Rosa
- Krystle Fernandez, Baptist Health Care
- John Hartman, University of West Florida, Usha Kundu, MD, College of Health •

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- Versilla Turner, Florida Department of Health Escambia
- Debra Vinci, University of West Florida, Usha Kundu, MD, College of Health

## CHNA Steering Committee - responsible for guiding CHNA process, reviewing data, providing feedback and setting priorities

- Achieve Escambia
- Ascension Florida
- Baptist Health Care
- Baptist Hospital
- Children's Home Society of Florida
- Community Clinics Northwest Florida
- Community Drug & Alcohol Council
- Council on Aging of Northwest Florida
- Covenant Care
- Emerald Coast Utility Authority
- Escambia County School District
- Ever'man Cooperative Grocery & Café
- Feeding the Gulf Coast

- Florida Dept. of Children and Families
- Florida Department of Health Escambia
- Florida Department of Health Santa Rosa
- Good Samaritan Clinic
- Gulf Breeze Hospital
- Gulf Coast African American Chamber
- Health & Hope Clinic
- Jay Hospital
- J L Maygarden Company
- Lakeview Center
- Live Well Partnership for a Healthy Community
- Manna Food Pantries

- Opening Doors Northwest Florida
- Pensacola Bay Baptist Association
- Pensacola News Journal
- Sacred Heart Hospital
- Santa Rosa County
- Santa Rosa County School District
- Santa Rosa Medical Center
- Town of Century
- United Way of Escambia
- University of West Florida
- Walmart
- Waterfront Mission
- YMCA of Northwest Florida

Blue Angel's Air Show courtesy of Elaine Cox

