2015 Community Health Needs Assessment
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EXECUTIVE SUMMARY

Background

Holy Cross Hospital is located in Broward County, Florida. Broward County is the second most populous county in Florida. In 2009, Broward become the third most racially diverse county in Florida. These two key characteristics combine to create a complex set of problems and opportunities in addressing Broward’s health care challenges.

Holy Cross Hospital has consistently been recognized as a longtime community partner working actively with local healthcare, business, and community based organizations to effectively address the unmet health needs of Broward’s underserved and at-risk populations. Recent IRS regulations require hospital organizations to conduct a community health needs assessment which utilize and integrate information gleaned within its strategic planning process. Addressing unmet community needs and gaps in services are at the core of Holy Cross Hospital’s mission.

This 2015 (FY2016–FY2018) Community Health Needs Assessment and its resultant Implementation Strategy have been conducted in compliance within the guidelines of the IRS regulations and highlights Holy Cross Hospital’s fundamental belief that quality healthcare services should be made available to all within the communities it serves.

W Mack and Associates, Inc., was engaged as an external consultant to facilitate this assessment in partnership with Holy Cross Hospital’s Community Advisory Council. Methods used included: quantitative and qualitative research and survey data, key informant interviews, and community focus group sessions. Data and responses were used to identify and prioritize health problems and risk factors within the Holy Cross Hospital service area. These findings form the basis of this 2015 / FY 2016 – FY 2018 Community Health Needs Assessment.

Significant Community Health Needs

• Access to Affordable Care for Vulnerable Populations
• Health and Well Being/Health Education and Wellness
• Homelessness/Food Insecurity/Poverty
• Mental Health
• Alcohol and Substance Abuse
Implementation Strategy:

After reviewing data results and prioritizing outstanding community health needs, Holy Cross Hospital identified, aligned, and engaged local community partners to assist them in formulating action strategies, metrics and outcomes to address these needs. The Executive Committee of the Board of Directors approved the FY2016 - 2018 Community Health Needs Assessment and Implementation Plan at their Executive Committee Meeting on November 11, 2015. The Holy Cross Board of Directors approved the FY2016 - 2018 Community Health Needs Assessment and Implementation Plan on November 16, 2015 at their annual Board of Directors Meeting.

The healthcare needs identified in the Implementation Plan were considered for inclusion based on the following factors: scope, feasibility, effectiveness of possible interventions, health disparities associated with each need and the importance the community and hospital placed on addressing it.

Holy Cross Hospital actively engaged and solicited input from its community partners to create regular and ongoing dialogue to ensure their involvement and garner their support to work in cooperation with them to actively achieve positive outcomes.

The final approved version of the FY2016 - 2018 CHNA and Implementation Plan are available on the Holy Cross Hospital website at www.holy-cross.com. Printed copies are also available at the Hospital and from Holy Cross Hospital’s Community Outreach Department, 4725 North Federal Highway, Fort Lauderdale, Florida 33308 or by calling 954-771-8000.
I. Introduction

Holy Cross Hospital, Inc. (HCH) located in Fort Lauderdale, Florida is a full-service, non-profit Catholic Hospital, and is part of Trinity Health. Since 1955, Holy Cross Hospital has provided high-quality medical care to the Broward County community while upholding the ethical and moral teachings of the Catholic Church in its policies and practices. Today, Holy Cross Hospital is licensed for 557 beds and the Holy Cross Medical staff consists of more than 600 highly skilled physicians and represents a wide array of medical specialties. In addition, the Holy Cross Physician Partners, an Accountable Care Organization (ACO), is comprised of more than 300 primary care and specialty physicians.

Holy Cross Hospital’s mission is “We, Holy Cross Hospital and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.” Holy Cross Hospital conducted a Community Health Needs Assessment (CHNA) in 2012. Our FY2016 - 2018 CHNA builds on its results and incorporates new and updated data and input from Federal, State, and local community partners and key stakeholders. This CHNA represents a strategic, collaborative effort among representatives from a wide variety of local businesses, for profit and non-profit organizations and agencies, funders and foundations, community groups and residents. The goal of our assessment was to identify common, core, unmet health needs present and pervasive within our service area that Holy Cross Hospital could effectively and efficiently commit to address utilizing its resources in combination with other community partners. This process was led by W Mack and Associates, Inc. in partnership with the Holy Cross Hospital Community Health Needs Assessment Steering Committee.
II. Summary and Impact of 2013 Community Health Needs Assessment and Implementation Strategy

Holy Cross Hospital conducted a Community Health Needs Assessment (CHNA) in 2012 for FY2013 - 2015. The full report, including Implementation Strategy was approved by the Mission and Planning Committee of the Hospital’s Board of Trustees in July, 2012, and is available at www.holy-cross.com as well as on-site at the Hospital location.

The 2013 CHNA included Quantitative Data from:

- U.S. Census Bureau
- American Community Survey
- Florida Charts
- Broward Regional Health Planning Council Health Data Warehouse
  - Florida, Broward and Holy Cross Hospital data
  - Hospital Utilization
  - Chronic Disease
  - Prevention Quality Indicators (PQI)
  - Diagnosis Related Groupings (DRG)

Qualitative Data from:

- Youth Risk Behavior Surveillance System (YRBSS)
- Professional Research Consultants, Inc. PRC Community Quality of Life Survey
- Behavioral Risk Factor Surveillance System
- Community Health Survey
- Community Health Needs Assessment Advisory Council

The prioritized needs established by the 2012 CHNA process and transferred to the 2013 (FY 2013 - 2015) Implementation Plan included:

1. Navigating the Healthcare System: Defined as a lack of access to care based on (but not limited to) a compendium of reasons related to:
   - Lack of healthcare coverage
   - Transportation issues
o Language/culture
o Immigration status
o Continuity of care
o Discharge planning

2. **Wellness:** *Defined as a lack of:*
   o Health and Wellness Promotion
   o Prevention Education
   o Health Self-Management in the community

The Community Outreach Department developed a multi-prong approach to effectively respond and address these needs. In order to accomplish outcomes, initiatives and strategies were formulated and it was determined which needs Holy Cross Hospital would take the lead, partner directly with community partners or provide in-kind, financial or organizational services or support.

Holy Cross Hospital has evaluated the impact and outcomes of its 2013 (FY2013 - 2015) Implementation Strategy and incorporated these results into the formulation of its 2015 (FY2016 - 2018) Implementation Strategy. A description of the 2013 (FY2013 – 2015) Implementation Strategy, initiatives and outcomes taken to address the two health priorities are summarized as follows:

**Priority 1. Navigating the Healthcare System**

*Strategy:* Assess families’ health eligibility for healthcare and link them with an appropriate medical home provider within the community (i.e. Medicaid, Florida KidCare, and Affordable Healthcare Insurance).

*Outcome:*
  - Partner, participate, support, and assist Affordable Healthcare Act Enrollment activities
  - Holy Cross is a partner site and participant of the Broward County Florida KidCare Taskforce
- Holy Cross Hospital entered into agreements with Advanced Patient Advocacy (APA) Services in 2013/2014 and the Epilepsy Foundation in 2014/2015 which provided on-site navigators and enrollment specialists for the community.

- 35 Enrollment ACA sessions/fairs were held with community partners in 2013/2014.

- 3,126 income-eligible persons attended the ACA fairs and 1,975 applications were completed for ACA, Medicaid, and/or Florida Healthy Kids. 2013/2014.

- A link to Holy Cross Hospital’s website was established and contained educational information and direct links to the government website for application. 2,337 hits to the web-link were recorded.

**Strategy:** The Mobile Health Unit is dedicated to providing access to health screening services for the homeless and minority populations in targeted areas.

**Outcome:**

- FY2013 - 2015: Mobile Health provided 1,385 individuals with on-board health assessment and screening services, care management; linkage to specialty services and affordable health care, and health navigation.

**Strategy:** Increase independence and optimal physical, mental and emotional health.

**Outcome:**

- Increased access to homeless population: Hope Wellness Center in conjunction with HOPE South Florida (a leading homeless family provider).

- 2013 - 2014: Provided on-site nursing care services to more than 500 homeless individuals visiting a community day shelter, many of whom experience mental and emotional health problems, substance abuse, and compromised physical health.
2015: Established a new partnership with leading soup kitchen and day shelter provider. On-site nursing care provided to more than 60 homeless individuals per month many of whom experience mental and emotional health problems, substance abuse, and compromised physical health.

**Strategy:** Link clients who test positive for HIV and Hepatitis C into the healthcare system.

**Outcome:**

- 11,254 community members were provided with a Rapid HIV test. 100% of the 20 individuals who tested positive for HIV were linked into the healthcare continuum.
- 2,199 Hepatitis-C Rapid tests were administered in targeted communities with a 2% positivity rate.
- 78% of positive clients were linked into the health care system.
- 63% of all clients served accessed services aboard the Mobile Health Unit.

**Strategy:** Decrease late stage breast cancer diagnosis.

**Outcome:**

- The Partners in Breast Health (PIBH) program provided financially eligible uninsured individuals residing in Broward County with access to screening and diagnostic breast health services in the hope of decreasing late stage breast cancer diagnosis and death in minority communities.
- 2,888 screening and diagnostic breast health services were provided to financially eligible (less than 200% of the Federal Poverty Level) uninsured and/or undocumented individuals.
- 100% of new diagnosed breast cancer patients, 31 individuals were linked to healthcare services and treatment.
Priority 2: Wellness

**Strategy:** Increase knowledge and instill good health behaviors

**Outcome:**
- 5,221 children attending Goodstart targeted childcare centers have received childhood immunizations in accordance with FL State guidelines.

**Strategy:** Improve health to promote student health learning

**Outcome:**
- 3,204 of parochial elementary schools surveyed by the School Nurse were found to be 100% in compliance with the compulsory school immunization law
- 433 babies born at Holy Cross Hospital who received their first dosage of Hepatitis-B vaccine in the hospital were entered into the FL Shots system by the School Nurse. Beginning in 2013, Holy Cross Hospital was the first hospital in Broward County to ensure that all newborn Hepatitis-B vaccines were entered into the Florida State database.
- 10,890 eligible and participating parochial elementary school students were screened for vision, hearing and scoliosis by the School Nurse.

**Strategy:** Improve nutritional, physical and emotional well-being

**Outcome:**
- A 50% increase in knowledge was demonstrated by 3,282 students who participated in the Health Rocks healthy life series.
- 100% of 35 youth and teacher/principal participants in the 3 month pilot Pilates for Girls program completed the program with a 2% decrease in body fat.
- 100% of previously Growing Health Kids National School Lunch program sponsored schools have maintained their independent sponsorship and continued to provide 322,256 lunch meals per
year through this federally funded program to their student and families.

- In conjunction with Broward County Public Virtual Schools, the 2015 Pilates for Youth program was broadcast live to elementary schools. More than 40 classrooms and 931 students and 85 teachers participated in live Pilates classes. The innovative program was recognized by the Broward County School Board as well as invited to provide the keynote address at the 2015 Annual International Pilates Conference.

**Strategy:** Maintain independence and optimal physical, mental and emotional health.

**Outcome:**

- 5,249 individuals were provided with chronic disease management, Faith Community Nursing, and homeless healthcare services. Services included health education and screening and monitoring of chronic diseases (hypertension, diabetes, and congestive heart failure).

- 85% of the aforementioned population demonstrated improved health as measured by medication adherence, medical appointment attendance, A1c number improvement, weight loss and anecdotal responses.

- 100% of 35 identified pregnancies in the homeless population were monitored to ensure that women remained linked with their prenatal provider and to reduce the risk of low birth weight babies.

**Strategy:** Improve health and wellness in patients with chronic disease.

**Outcome:**

- 2,647 diabetic clients received community based health coaching and self-management classes at scattered site community locations.
• 75% of clients who consistently visited the nurse demonstrated decreases in their weight and A1c levels.

**Strategy:** Provide HIV and Hepatitis C Counseling, Testing and Referral Services

**Outcome:**

• 11,254 community members were provided with a Rapid HIV test.
• 100% of the 20 individuals who tested positive for HIV were linked into the healthcare system.
• 2,199 Hepatitis-C Rapid tests were administered in targeted communities with a 2% positivity rate.
• 78% of positive clients were linked into the health care system.

**Strategy:** Assess families’ health, eligibility for healthcare and link them with an appropriate medical home provider within the community (i.e. Medicaid, Florida KidCare, and Affordable Healthcare Insurance).

**Outcome:**

• Renovated space at Hope Central for Wellness Center provided 110 individuals with non-emergent, well primary health screening and intervention; access to immunizations; and health education (especially pregnancy and chronic diseases, e.g., diabetes).
• Mobile Health Unit’s onboard van services included Rapid HIV and OraSure testing; Rapid Hepatitis-C testing; Health exams by a physician or Advanced Registered Nurse Practitioner (ARNP); Health screenings (cholesterol, diabetes, and blood pressure) and Childhood immunizations and flu shots to 1,385 individuals.
• Holy Cross Hospital entered into agreements with Advanced Patient Advocacy (APA) Services in 2013/2014 and the Epilepsy Foundation in 2014/2015 which provided on-site navigators and enrollment specialists for the community.
• 35 Enrollment ACA sessions/fairs were held with community partners in 2013/2014.
• 3,126 income-eligible persons attended the ACA fairs and 1,975 applications were completed for ACA, Medicaid, and/or Florida Healthy Kids. 2013/2014.

• A link to Holy Cross Hospital’s website was established and contained educational information and direct links to the government website for application. 2,337 hits to the web-link were recorded.
III. Service Area and Population

Holy Cross Hospital is located at 4725 North Federal Highway, Fort Lauderdale, Florida 33308. The Hospital’s service area is defined as the geographic area encompassing zip codes in the following primary service areas (PSA) and secondary service areas (SSA).

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<tr>
<th>Primary Service Area</th>
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<td>33060 33062 33064 33066</td>
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1. Broward County, according to the U.S. Bureau of Census, State and County Quick facts for 2014:
   - is the second most populous county in Florida and the 18th most populous county in the United States.
   - Racial make-up is 65.4% white, 28.5% African-American, 0.4% American Indian or Alaskan Native, 0.1% Native Hawaiian or other Pacific Islander, and 2% listing two or more races; 26.9% Hispanic or Latino and 40.8% listing white alone, not Hispanic or Latino.
   - Total population is 1.8 million residents and the average age is 39.7 and 15% of the population is over the age of 65 (v2014). Females comprise 51.4% of the population.
   - 83% have lived in the same house for over one year.
   - 38% speak a language other than English in the home
   - 88% are high school or higher graduates.
   - 26% under age 65 do not have health insurance.
   - The mean income (in 2013 dollars), 2009 – 2013 is $51,300
   - 15% of the population fall below the poverty level
   - 43.1% of children fall within the 200% FPL
   - 30.5% of adults (18-64) are uninsured

2. U.S. Department of Health Human Services, Health Indicators Warehouse. Center for Disease Control and Prevention, National Centers for Disease Control and Prevention, 2010 cites Broward County as having an HIV prevalence (rate per 100,000) as 1,078.8 vs 340.37 for the United States.

3. Homeless in Broward County, 2013 Point-In-Time Report reported:
   - Single, unattached adult males make up 70% of adult homeless
   - 80% of all homeless families are headed by solitary women
   - One-third of homeless adults have spent time in a mental institution
   - About one-third or more of homeless adults suffer chronic alcohol problems
   - 10 – 20% of homeless adults have other drug dependency problems
   - More than 25% of the homeless population is too disabled to work
• 40% of the homeless adult population report themselves in poor health

• General demographics of a Broward homeless person is Black, male, 25-54 years old, presenting with either a mental health or substance abuse issue

4. According to YCharts, Broward County’s unemployment rate for August, 2015 was 5.3%

5. The Broward County Public School District is the sixth largest public school system in the nation with over 260,000 students in more than 310 schools and education centers. According to Mark Mills, Finance Manager for the Broward County Public Schools the school system served an average of 48,327 free or reduced breakfasts and 108,960 free or reduced lunches per day and a total of 918,218 free or reduced breakfasts and 2,070,236 free or reduced lunches for the month of September, 2015.
IV. Community Health Needs Assessment Partners

A. Community Health Needs Assessment Steering Committee
   The mission of the Steering Committee is to:
   - Guide in the assessment process
   - Act as a sounding board and assist in obtaining community input
   - Participate with the Council in evaluating health issues and priorities once the assessment is completed
   - Engage in collaborative action planning on an ongoing basis
   - Conduct and formulate the Implementation Strategy
   A list of its members can be found in Appendix I.

B. Community Health Needs Assessment Advisory Council
   Holy Cross Hospital’s Community Health Needs Assessment Advisory Council is made up of a diverse group of Holy Cross Hospital employees and stakeholders representing various hospital disciplines, professions and services. It is comprised of Holy Cross Hospital clinicians, department directors, physicians and administrators with the background knowledge and interest in addressing the priorities identified in the CHNA. A list of committee members can be found in Appendix II.

C. Florida Department of Health-Broward County
   The Florida Department of Health in Broward County (DOH- Broward) utilized the Coordinating Council of Broward County’s existing community-based planning structure to assist in the development of their Community Health Improvement Plan. Broward County has a long history of collaboratively planning across multiple state, county, and local entities from the public and private sectors to ensure the highest quality of care that also reduce redundancies and duplication within the system of care. A complete listing of all agencies can be found in Appendix III.
D. Community Partner Forums

Holy Cross Hospital has long standing partnerships, associations and representations on a variety of local business and community groups. Community members from varied community based service agencies, funding entities, the Department of Health-Broward County, and representatives from law enforcement provided valuable dialogue, input and knowledge on our community and its outstanding needs. The community partners participated in a prioritization process that contributed towards identifying the priorities for the FY 2016- FY2018 CHNA.

A listing of these organizations can be found in Appendix IV.
V. Community Health Needs Assessment Methodology and Process

A. Quality of Life Assessment Survey
   The 2011 Quality of Life Assessment data developed by Professional Research Consultants, Inc. was used as part of the 2012 CHNA process. As there was no updated Quality of Life Assessment Survey data available the 2011 data was utilized.

B. Youth Risk Behavior Surveillance System (YRBSS)
   The YRBSS was developed in 1990, by the Centers for Disease Control, to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States. These behaviors, often established during childhood and early adolescence include: behaviors that contribute to unintentional injuries and violence; sexual behaviors that contribute to unintended pregnancy and sexually transmitted infections, including HIV infection; alcohol and other drug use; tobacco use; unhealthy dietary behaviors and inadequate physical activity. It also monitors the prevalence of obesity and asthma. From 1991 through 2013 YRBSS has collected data from more than 2.6 million high school students in more than 1,100 separate surveys. The CHNA includes data from the Broward County, Florida 2013 results.

C. Websites-CommunityCommons.org and CountyHealthRankings.org
   These web-based resources compile available data from multiple sources and make them available to the public. Communitycommons.org/chna has users select a geographic area and generate a report on many different health and behavior indicators. For this CHNA, Holy Cross Hospital selected Broward County and generated a full health indicators report. Countyhealthrankings.org also uses data from multiple sources to score and rank counties by health behaviors and outcomes. Holy Cross Hospital again chose Broward County and utilized data from this website. Broward County Health Rankings for 2014 are included in Appendix V.
D. 2015 Holy Cross Hospital Community Health Needs Assessment Survey

This on-line survey collected information on health outcomes, behaviors and beliefs among adults living in Broward County. The survey link was posted on the Hospital’s website and distributed by email to at over 400 community based agencies, social service employees and individuals affiliated with the Broward County Public Health department, distributed among local partner organizations and schools. The survey was also delivered by hand to local community partners, organizations, individuals, businesses and schools and administered at outreach site locations and events. The survey was conducted from August, 2015 - September, 2015. A copy of the survey and participating organizations are listed in Appendix VI.

E. Community Healthcare Initiatives

As the second most populous county in Florida, with more than 1.8 million residents, and the 18th most populous county in the United States, Broward County’s healthcare needs, challenges and opportunities are as diverse as its population. In an effort to affectively address these needs and with a goal of eliminating redundancy and duplication of healthcare services and resources, Broward County leaders have created a network of organizations, committees and taskforces. Holy Cross Hospital is an active participant on a number of these committees. A listing of the boards of directors, committees and taskforces on which a Community Outreach staff participates is listed in Appendix VII.

F. Key Informant Interviews

To ensure parity, inclusion, and representation, data and input was acquired from groups, organizations, and individuals representing Broward’s medically underserved, low-income and minority populations. W Mack and Associates, Inc. and members of the Holy Cross Hospital Community Health Needs Assessment Steering Committee identified community leaders and representatives with whom to conduct key informant interviews. Interviews were conducted by telephone between August and October, 2015.
A complete list of individuals interviewed and their organizational affiliation and Key Informant Interview Questions are included in Appendix VIII.

G. Community Forum
Holy Cross Hospital hosted a community forum on September 9, 2015. The purpose of the forum was to share with community leaders, stakeholders, agencies, organizations and partners the results of our 2013 CHNA Implementation Strategy, updated healthcare research and solicit from them their assessment of the results, identify new or ongoing health needs in the community they are experiencing, discuss potential strategies to address them and solicit their support. A total of 30 participants representing 22 organizations which directly or indirectly serve or interact with the underserved or at risk residents of our community attended the session. A listing of individuals and their associated organizations can be found in Appendix IX.

H. Florida Department of Health-Broward County
On May 20, 2013, a joint meeting of the Coordinating Council of Broward’s Steering and Quality of Life Committees met and identified health challenges and priority areas. Holy Cross Hospital has been a long standing member and active participant on these committees.

I. Information Gaps and Limitations
Surveys by their very nature include certain limitations which may affect their results. Some of the most common limitations are education level of participants, sample bias, familiarity with electronic equipment, time, and perceived importance/impact of their responses and anonymity. The YRBSS survey was conducted on-line only and the Holy Cross Hospital Community surveys were conducted on-line and paper and pencil. The on- line survey process, as with any online survey, created a challenge with regard to access, time, sample bias, familiarity with electronic equipment and perceived importance/impact of their response and anonymity. The Key Informant interviews were conducted by telephone and also share many of the above mentioned limitations.
VI. Identified Community Health Needs

A. Needs Identified

57% of the 247 respondents to the 2015 Holy Cross Hospital Community Health Needs Assessment Survey rated the Overall Health status of the community as Excellent or Good and 213 or 86% rated their personal health status as Excellent or Very Good.

Broward needs identified through the Holy Cross Hospital Advisory Council, Holy Cross Hospital Community Health Surveys, Key Informant interviews, and input from community members include the following:

1. Access to Healthcare/Primary Care Services

The 2013 Holy Cross Hospital community health needs assessment cited Access to Care as a priority. In a 2011 Coordinating Council of Broward Quality of Life Assessment Report, Access to Health Services, Broward County received a “Worse” rating among residents aged 18 - 64 who lacked insurance. The 2015 Holy Cross Hospital Community Health Needs Assessment Survey yielded a 24 % top 3 selection rate for lack of health insurance/affordable care as a condition which most impacts the health of our community. The 2013 Florida Department of Health, Broward County includes increased access to health services as one of its finalized priorities.

2. Health and Well Being/Health Education and Wellness

Florida Charts lists Heart Failure, Breast and Cervical Cancers as indicators receiving a Least Favorable score of 4 (25%). The 2013 YRBS (Youth Risk Behavior Survey) lists Obesity and Overweight among male students among its Indicators showing a lack of improvement from the previous survey year. On the 2015 Holy Cross Hospital Community Needs Survey participants selected Diabetes, High Blood Pressure and Cancer as the three top health problems/conditions in the community. Key Informants cited Diabetes and Hypertension as key health related trends. In its 2013 Florida Department of Health, Health Improvement Plan Priorities, Enhanced Preventive Care Activities (Cervical Cancer Screening and Obesity/Food Security/Hunger/Nutrition); Reduce the Incidence of Communicable and Infectious Disease (HIV/AIDS) and Sexually Transmitted Diseases (Including Infectious and Congenital Syphilis) and Improve Maternal, Infant and Child Health
3. **Mental Health**

The Holy Cross Hospital Advisory Council and members of the Community Forums cited mental health issues as a key concern for the community. This group felt that while this is not an area Holy Cross Hospital provides direct services it is impacted because these individuals enter the facility in crisis and when they are discharged into the community they are not provided continuity of treatment. Mental health was selected by 27% of the 2015 Holy Cross Hospital Community Needs Survey participants as one of their top 3 greatest health problems, and several of the Key Informant participants cited mental health as a concern.

4. **Homelessness/Food Insecurity/Poverty**

Broward received a worse ranking in the 2015 County Health Rankings for Children in Poverty. Homelessness and Food Insecurity were social determinants discussed at great length by members at the Holy Cross Hospital Advisory Council and Community Forum. On the 2015 Holy Cross Hospital Community Needs Survey – Homelessness and Poverty received 29% and 47% top three selection rating.

5. **Alcohol/Substance Abuse**

The 2013 Youth Risk Behavior Survey showed a lack of improvement from previous survey year for males in the categories of Current Marijuana Use and Offered, Sold or Given an Illegal Drug by Someone on School property (during 12 months before survey). On the 2015 Holy Cross Hospital Community Needs Survey, 35% of the participant responded affirmatively to the question “*Which health behaviors/risk factors are the most common in our community for Substance Abuse-Alcohol?*” 38% responded affirmatively to the question “*Which health behaviors/risk factors are the most common in our community?*” Substance Abuse-Drugs was identified as one of their top three selections. This was also an area of need identified by the Holy Cross Hospital Advisory Council.
B. Process for Prioritizing

Members of the Holy Cross Hospital Community Health Needs Assessment Advisory Council reviewed the results of the Hospital’s 2013 Implementation Strategy, and current health needs research data presented by W Mack and Associates, and the Director of Community Outreach & Community Benefit Ministry Officer during their August 13, 2015 meeting. Following this presentation all Advisory Council participants were asked to individually complete their initial identification and scoring of community health needs based upon the information presented, and their personal/professional knowledge of the community. Each Council member was asked to use the following scoring scale of 1 - 5 (5=highest and 1=lowest) as an assessment of each of their identified need.

- Severity
- Feasibility and effectiveness of possible interventions
- Potential impact on greatest number of people; health disparities
- Importance community places on addressing need
- Outcomes within 3 years are measurable and achievable
- Other important criteria

After each participant completed their individual scoring, they were asked to rank order each need starting with their highest scoring need as one through to their lowest score. Participants were then instructed to place their top five highest scoring needs on five separate flip charts placing one need on each numbered chart. Groups then shared their rationale behind their scorings. A final composite listing was created based upon the group’s discussion and agreement on priority listing.

On September 9th, Holy Cross Hospital held its Community Health Needs Assessment Forum. During this forum members of the Advisory Council met with key community leaders, stakeholders, community partners and organizations that routinely provide services to or engage with residents from the underserved or at risk communities in Broward. The group was engaged in a facilitated process to garner their perceptions and identification of community health needs among the people they serve.
The Consultant followed essentially the same process which was used in the session with the Advisory Council. Community Forum participants were broken into small groups to discuss their individual results and reach consensus of their top five health needs. Each individual small group was given an opportunity to share with the other groups their results and rationale. Each individual group was asked to place their small group needs sheets on the wall with all of the #1 priority together, all of the #2 priorities together through priority #5. Each participant was given 5 dots and asked to place one dot identifying the health need they felt best represented their perception of the key need under each priority. A list in priority order was created based upon those receiving the highest number of dots.

On September 29th, the Holy Cross Hospital Community Health Needs Assessment Advisory Council met to compare and contrast the results from their meeting on August 13 with those of the September 9th Community Forum Session, Community Health Needs Assessment and Key Informant Survey results in an effort to determine HCH 2015 Community Health Needs. The Consultant presented these results along with a review of the quantitative and qualitative data from their first meeting. Council members were then asked to review the information provided and identify the top 7 needs based upon the research data and their individual personal/professional knowledge of the community. After identifying their individual top 7 community health needs each member was asked to rank order those needs based upon severity, long-term impact, available resources and our ability as a hospital to impact the need using a scoring scale of 1 - 5 for each criteria (5=highest and 1=lowest). Their individual results were shared with the group. The group as a whole discussed their individual findings and decided on the top 5 needs.

**The Top Five Health Needs identified were (in priority order):**

1. Access to Affordable Care for Vulnerable Populations
2. Health and Well Being/Health Education and Wellness
3. Mental Health
4. Homelessness/Food Insecurity/Poverty
5. Alcohol and Substance Abuse
Upon reviewing the top 5 needs, Council Members were then asked to prioritize those needs they felt were within Holy Cross Hospital’s scope of services, resources and ability to have a sustained impact. Three needs were selected.

In priority order, the three significant health needs were:

1. **Access to Affordable Care for Vulnerable Populations**
2. **Health and Well Being/Health Education and Wellness**
3. **Homelessness/Food Insecurity/Poverty**

Upon final adoption of the top 3 community health needs, the Council identified community agencies and resources it could contact and partner with to assist in addressing the outstanding identified needs: Mental Health and Alcohol and Substance Abuse.

1. **Florida Department of Health, Broward County**
   Data from the Florida Department of Health was captured and utilized in several formats. The results of the June, 2013 Florida Department of Health, Broward County Health Improvement Plan Priorities were shared with the HCH Advisory Council and during the Community Health Forum as part of the quantitative and qualitative research data presentation. Summative results, representing the Florida Department of Health, Broward County participation at the September 9, 2015 Community Health Needs Forum and the Community Health Needs survey, were included in the Holy Cross Hospital Advisory Council’s data review in determining Significant Community Health Needs during their September 28, 2015 meeting.

**September 9, 2015 - Community Health Needs Forum**
The results of the June, 2013 Florida Department of Health, Broward County, Health Improvement Plan Priorities were shared during this forum. The Community Health Director from the Florida Department of Health was an active participant in this Community Health Forum.

After engaging in small and large group discussions, this group identified the following as the top 5 prioritized Significant Health Needs in Broward County:
1. Access to Healthcare Services
2. Mental Health/Wellness
3. Homelessness
4. Preventive Care
5. Hunger/Nutrition/Food

Participant Organizations are listed in Appendix IX.

**August - September, 2015 - Community Health Needs Survey**

Over 400 surveys were emailed to vendors, employees, within the Broward County Public Health Department, local partner organizations and schools. Ten surveys from the Broward County Health Department were returned. The results of these surveys were included in the summative survey results report which was included in the Community Health Needs Forum and the September 28, Holy Cross Hospital Advisory Council’s meeting to determine its Significant Health Needs.

Survey and survey participants are listed in Appendix VI.

2. **Members or representatives of medically underserved, low-income, and minority populations, and who they represent.**

**August – September, 2015 Key Informant Interviews**

Dr. Wilhelmena Mack, Consultant for this project, conducted Key Informant telephone interviews with a representative cross section of individuals representing this population. The results of their interviews were shared with the Advisory Council during their Health Needs Prioritization meeting on September 28. The top five health needs identified among this group were:

1. Hypertension
2. Obesity/Overweight
3. Substance Abuse (tobacco, illegal drug use including marijuana)
4. Alcohol Abuse
5. Poverty
They noted access to health care and health literacy as key health trends among this group.

Interview questions, participants and a description of their organization are listed in Appendix VIII.

**September 9, 2015 - Community Health Forum**

Community health related quantitative and qualitative research data was presented to this group representing twenty-two non-profit agencies and organizations which provide services to the medically underserved, low-income and minority populations of Broward County by Dr. Wilhelmena Mack, Consultant to the project. Following the research presentation, the group was divided into small groups to discuss the data presented and identify their top five significant health needs. Small group presentations were then made to the group at large. Following the small group presentations participants were given five dots and asked to identify their top five significant health needs. In priority order, the following is a result of their selection:

1. Access to Healthcare Services
2. Mental Health/Wellness
3. Homelessness
4. Preventive Care
5. Hunger/Nutrition/Food

The results from the Community Health Forum were included in the Holy Cross Hospital Advisory Council’s deliberation in determining Significant Community Health Needs.

Participant Organizations are listed in Appendix IX.

**August – September, 2015 Community Health Needs Survey**

A total of 237 individuals from a variety of community organizations, schools, agencies and the community at large participated in the survey. It was administered both on line and paper and pencil.
The top five community health needs identified in the survey, in priority order, were:

1. High Blood Pressure/Cholesterol
2. Diabetes
3. Heart Disease
4. Cancer
5. Mental Health Disorders

This result from the Community Health Needs Survey was included in the Holy Cross Hospital Advisory Council’s deliberation in determining Significant Community Health Needs. Participant Organizations are listed in Appendix VI.

3. **Written comments received on prior CHNA & Implementation Strategy**

There were no written comments received on prior CHNA & Implementation Strategy.

**D. Prioritized Needs**

Listed in order of priority, are the following needs identified by the Council:

1. **Access to care, including primary care**
   **Risk Factors:** access, hours, coordination, continuum of care, insurance, affordability, transportation, timeliness, language/culture barriers

2. **Health and Well Being/Health Education and Wellness**
   **Risk Factors:** comprehensive screenings; navigating the system; health self-management; targeted and simple health messages and interventions;
   Mental Health First AID; comprehensive screening and integration of results into Community Education and Referral

3. **Homelessness/Food Insecurity/Poverty**
   **Risk Factors:** asset limited income constrained earnings, housing evictions, job loss, single parent head of household.
The Holy Cross Hospital Advisory Council identified health priorities in areas it could sustain the greatest impact, utilizing and leveraging current resources. The above priorities are consistent with current initiatives underway which are yielding positive initial results. These initiatives also address healthcare issues which the community identified as priorities which should be continued.

As a leading healthcare provider, Council members and community experts identified the Hospital’s lack of appropriate expertise and resources to adequately address these outstanding needs on their own. Community experts recommended that Holy Cross Hospital continue to engage and partner with them in community coalitions and committees to support and assist with these outstanding needs.

- Mental Health
- Alcohol and Substance Abuse
VIII. Emerging Community Health Needs

While trying to resolve long-standing health issues we must also be prepared to address new concerns. The most reliable guide to predicting future developments in health is a careful examination of current trends in society and progress in research. Essential public health services include the monitoring of health status and health services while searching for innovative solutions to health problems. The Institute of Medicine states that the approach to public health in the U.S. has too often been driven by crisis; a more costly approach than instituting preventive measures before the crisis breaks. Such an approach also ignores the contribution prevention can make to the public’s overall health, quality of life, and productivity.

Emerging health issues are those that pose either a threat or relief from threat to the overall health of the population. An emerging issue can be a disease or injury that has either increased incidence or prevalence in the past decade or threatens to increase in the near future. It can also be a “horizon issue” that has just begun to develop in our society and the future public health effects of which are uncertain. Finally, it can be an increased visibility in a long-standing health issue that continues to obstruct the public health goal of reducing death and disability. The emerging issues affecting health status reflect the dramatic changes in our society and environment. Personal and population health status are broadly defined to include the physical environment (e.g. air and water); the socio-economic environment (e.g. poverty, age); the personal health habits of the population (e.g. smoking, use of seat belts); and the presence of disease and injury. Each of these areas evolves and affects the overall health status of the population.

The popularity of e-cigarettes is exploding and is a worrisome trend. Use of these devices among middle and high school students tripled from 2013 to 2014, according to recent figures from the Centers for Disease Control and Prevention. Findings from the National Youth Tobacco Survey show that current e-cigarette use among high school students increased from 4.5 percent in 2013 to 13.4 percent in 2014, rising from approximately 660,000 students to 2 million. Among middle school students, current e-cigarette use more than tripled from 1.1 per cent in 2013 to 3.9 percent. *The Wall Street Journal* recently estimated the market to be worth about $300 million per year; analysts expect the number to skyrocket to $1 billion in the next year or two.
In addition to health risks e-cigarettes pose, there is the additional emergence of a secondary use for e-cigarettes.

Emergency rooms in South Florida are filling up with patients suffering from synthetic drug overdoses, and the problem is getting worse due to a device that’s ostensibly supposed to help people quit smoking. Vaporizer pens are becoming the new way for drug users to not only get high but do it discreetly—at times right under the noses of police, parents and teachers.

Broward County is seeing tremendous increases in the use of a new synthetic drug, Flakka, or Alpha-PVP, in all age populations and especially amongst lower income populations. In 2014, there were 200 reported cases in the Broward Sheriff’s Office Crime Lab for Flakka for the entire year. In 2015, between the months of January and March, the Crime Lab has seen more than 300 cases and local hospitals are seeing up to 20 Flakka emergency room admissions per day. Police are finding more of the new designer drug Flakka in Broward County than anywhere else in the nation according to records obtained by the Sun Sentinel. Crimes labs analyzed 477 cases of Flakka confiscated in Broward in 2014, according to statistics from the U.S. Drug Enforcement Agency. When adjusted for population, Broward’s rate of Flakka cases outpaced all major urban counties. With a population of 1.8 million, Broward had a rate of 27 cases per 100,000 residents.
VII. Community Resources to Address Needs

A. Holy Cross Hospital Internal and External Resources

Holy Cross Hospital currently addresses these health needs through both hospitals and community-based programs. Many staff members provide services at community partner sites. Programming includes providing access to primary medical home providers for the homeless, uninsured/underinsured and undocumented families/individuals working in tandem.
VIII. Conclusion

Holy Cross Hospital has developed an Implementation Strategy to address the priority health needs identified in this assessment. This is a separate document and is available on the Hospital’s website, www.holy-cross.com. Printed copies are available at the Hospital in our Community Outreach Department, 4725 North Federal Highway, Fort Lauderdale, Florida 33308 or by calling 954-771-8000. Questions, comments and feedback regarding this CHNA or the Implementation Strategy is encouraged by logging onto our website or calling Kim Saiswick, Ed. D, RN, LMHC, Director of Community Outreach & Community Benefit Ministry Officer, (954) 771-8640.

By completing this Community Health Needs Assessment (CHNA) and Implementation Strategy in 2015, Holy Cross Hospital is scheduled to repeat this process in 2018. Holy Cross Hospital is committed to continuing its ongoing partnerships and involvement within the Broward County community in an effort to improve the health status of our residents. We believe in so doing we make Broward County and ideal place to live and work while furthering the mission of our hospital. We believe through strong community engagement, effective alignment of resources and an ongoing relationship with our residents we will be successful in our efforts.
Appendix I: Community Health Needs Assessment Steering Committee

Mark Dissette, SVP, and Administrator, HCH HealthPlex

Sister Rita Levasseur, RSM, Committee, Chair
Vice President of Mission

Kim Saiswick RN, Ed.D., LMHC, Committee, Co-Chair
Director of Community Outreach & Community Benefit

Adrian Parker, FACHE, Director, Strategic Planning
Appendix II: Community Health Needs Assessment Advisory Council

Mark Dissette, SVP, and Administrator, Holy Cross Hospital HealthPlex

Sister Rita Levasseur, RSM, Committee, Chair
Vice President of Mission

Kim Saiswick RN, Ed.D., LMHC, Committee, Co-Chair
Director of Community Outreach & Community Benefit

Natalie Dimitrouleas, BSN, RN, CCM, Director, Clinical Care Coordination Department

Terri Hammond, RN, Director, Emergency Department

Adrian Parker, FACHE, Director, Strategic Planning

Virginia Smith, Business Development Coordinator

Christine Walker, Public Relations Director

Sherelle Washington, FACHE, MBA
Executive Director, Ambulatory Care Centers
Appendix III: Florida Department of Health-Broward County

<table>
<thead>
<tr>
<th>Agency Name</th>
<th>Coordinating Council of Broward County</th>
<th>Quality of Life Committee</th>
<th>Steering Committee of Broward (CCB)</th>
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<td>Nova Southeastern University</td>
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<td>South Florida Regional Planning Council</td>
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<td>United Way of Broward County</td>
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<td>Urban Health Solutions</td>
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<td>WorkForce One</td>
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<tr>
<td>YMCA of Broward</td>
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Appendix IV: Community Partners

Archdiocese of Miami-Department of Schools
Blessed Sacrament Catholic Church
Broward County Farm Bureau
Broward County Public Schools
Broward Outreach Centers-North & South
Broward Regional Health Planning Council
Broward Regional Juvenile Detention Center
Broward Sheriff’s Office Re-Entry Program
Children’s Services Council
Florida Agriculture in the Classroom
Florida Department of Health-Broward County
Florida State Farm Bureau
Hope Outreach Center
Hope South Florida
Second Chance Society
St. Gabriel Catholic Church
St. Laurence Chapel Day Program
St. Vincent Catholic Church
St. Vincent de Paul, North District Council
St. Isidro-Catholic Church
South Florida Hunger Coalition
United Way of Broward County
University of Florida Extension 4H
### Appendix V: County Health Rankings

#### Broward (BW)

<table>
<thead>
<tr>
<th>Health Outcomes</th>
<th>Broward County</th>
<th>Error Margin</th>
<th>Top U.S. Performers*</th>
<th>Florida</th>
<th>Rank (of 67)</th>
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<tr>
<td>Length of Life</td>
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<tr>
<td>Premature death</td>
<td>6.155</td>
<td>5.023-6.287</td>
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<td>Quality of Life</td>
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<tr>
<td>Poor or fair health</td>
<td>14%</td>
<td>12-16%</td>
<td>10%</td>
<td>16%</td>
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<tr>
<td>Poor physical health days</td>
<td>3.4</td>
<td>3.0-3.9</td>
<td>2.5</td>
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<tr>
<td>Poor mental health days</td>
<td>3.4</td>
<td>2.9-3.8</td>
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<tr>
<td>Low birthweight</td>
<td>9.3%</td>
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#### Health Factors

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<th>Health Behaviors</th>
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<tbody>
<tr>
<td>Adult smoking</td>
<td>14%</td>
<td>12-16%</td>
<td>14%</td>
<td>18%</td>
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<tr>
<td>Adult obesity</td>
<td>25%</td>
<td>22-27%</td>
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<tr>
<td>Food environment index</td>
<td>7.5</td>
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<td>8.4</td>
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<td>Physical inactivity</td>
<td>23%</td>
<td>21-25%</td>
<td>20%</td>
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<tr>
<td>Access to exercise opportunities</td>
<td>100%</td>
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<td>92%</td>
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<tr>
<td>Excessive drinking</td>
<td>15%</td>
<td>13-17%</td>
<td>10%</td>
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<td>Alcohol-impaired driving deaths</td>
<td>21%</td>
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<td>14%</td>
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<tr>
<td>Sexually transmitted infections</td>
<td>407</td>
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<td>138</td>
<td>402</td>
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<tr>
<td>Teen births</td>
<td>27</td>
<td>27-28%</td>
<td>20</td>
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<td>Clinical Care</td>
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<td>Uninsured</td>
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<td>Primary care physicians</td>
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<td>1,045:1</td>
<td>1,483:1</td>
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<td>Dentists</td>
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<td>1,874:1</td>
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<td>Mental health providers</td>
<td>660:1</td>
<td>386:1</td>
<td>744:1</td>
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<tr>
<td>Preventable hospital stays</td>
<td>59</td>
<td>58-61</td>
<td>41</td>
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<tr>
<td>Diabetic monitoring</td>
<td>86%</td>
<td>84-88%</td>
<td>90%</td>
<td>85%</td>
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<tr>
<td>Mammmography screening</td>
<td>60.5%</td>
<td>58.7-62.4%</td>
<td>70.7%</td>
<td>67.7%</td>
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</table>

#### Social & Economic Factors

| High school graduation         | 76%            |              |                      |         | 73%         |
| Some college                   | 66.1%          | 65.1-67.1%   | 71.0%                | 60.1%   |             |
| Unemployment                   | 6.1%           |              | 4.0%                 | 7.2%    |             |
| Children in poverty            | 20%            | 17-22%       | 13%                  | 25%     |             |
| Income inequality              | 4.8            | 4.8-4.9      | 4.0                  | 4.6     |             |
| Children in single-parent households | 38%        | 37-39%       | 20%                  | 38%     |             |
| Social associations            | 5.4            |              | 22.0                 | 7.3     |             |
| Violent crime                  | 485            |              | 59                   | 514     |             |
| Injury deaths                  | 59             | 58-61        | 59                   | 69      |             |

#### Physical Environment

| Air pollution - particulate matter | 10.7 |              | 9.5                  | 11.4    | 51          |
| Drinking water violations        | 15%  |              | 0%                   | 6%      |             |
| Severe housing problems          | 27%  | 27-28%       | 9%                   | 22%     |             |
| Driving alone to work            | 80%  | 70-80%       | 71%                  | 80%     |             |
| Long commute - driving alone     | 43%  | 42-44%       | 15%                  | 38%     |             |

* 90th percentile, i.e., only 10% are better.
Note: Blank values reflect unreliable or missing data
Appendix VI: 2015 Holy Cross Community Health Needs Participants and Surveys

The following individuals or organizations completed our Community Health Survey which was distributed both on line and administered paper and pencil.

Community Health Survey Participants

Broward College

Broward Re-Entry Program

Carver Ranches Library

Community Residents

Davie Fire Department

Dignity Memorial

First United Methodist Church

Florida Department of Health

Gillespie Bankruptcy Professionals

Greater Fort Lauderdale Baptist Church

HCH Love Fellowship Ministries

Precious Kids II

St Anthony Catholic School

St Helen Catholic School

St Jerome Catholic School

Southwest Focal Point

Thurgood Marshall Elementary School
Community Health Survey

Dear Community Partner,
Holy Cross Hospital is in the process of collecting community input regarding health needs for their needs assessment. If you could please take a few moments to fill out the survey either below or attached and return to us by email to kim.saiswick@holycross.com or by fax (954-771-7952). Please be sure to include your agency name or indicate ‘community member.’ Thank you in advance for partnering with us in our earnest attempts to improve the health of our community.

Indicate the name of your agency or check off individual if you are not associated with an agency.

<table>
<thead>
<tr>
<th>Community</th>
<th>Agency _______________________________</th>
<th>or</th>
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1. How would you rate the following?

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<td>Your own understanding of health risks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Community quality of Life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your own quality of life</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. What do you see as the greatest health problems/conditions in our community (indicate up to 3 items)

<table>
<thead>
<tr>
<th>Cancer</th>
<th>Mental health disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>Immunizations – children</td>
</tr>
<tr>
<td>High blood pressure / Cholesterol</td>
<td>Immunizations – adults</td>
</tr>
<tr>
<td>Respiratory disease – Adults</td>
<td>Teen pregnancy rates / low birth-weight babies</td>
</tr>
<tr>
<td>Asthma – children</td>
<td>Other (describe)</td>
</tr>
<tr>
<td>Diabetes</td>
<td></td>
</tr>
</tbody>
</table>
3. Which health behaviors/risk factors are the most common in our community (indicate up to 3)

<table>
<thead>
<tr>
<th>Obesity</th>
<th>Substance abuse – alcohol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of exercise</td>
<td>Substance abuse – drugs</td>
</tr>
<tr>
<td>Smoking</td>
<td>Lack of family / religious support systems</td>
</tr>
<tr>
<td>Poor Nutrition</td>
<td>Risky sexual behaviors</td>
</tr>
<tr>
<td>Seatbelt use</td>
<td>Aging populations</td>
</tr>
<tr>
<td>Firearms in homes</td>
<td>Other (describe)</td>
</tr>
</tbody>
</table>

4. Which community conditions most impact the health of people in our community? (indicate up to 3)

<table>
<thead>
<tr>
<th>Unemployment</th>
<th>Lack of grocery stores / access to healthy food</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low-income families / Poverty</td>
<td>Lack of health insurance / affordable care</td>
</tr>
<tr>
<td>Crime / violence</td>
<td>Access to dental care</td>
</tr>
<tr>
<td>Homelessness</td>
<td>Air and Water safety</td>
</tr>
<tr>
<td>Low education levels / Literacy</td>
<td>Other (describe)</td>
</tr>
<tr>
<td>Inadequate Transportation</td>
<td></td>
</tr>
</tbody>
</table>

5. Who in our community promotes good health?

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

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

8. Who else should we talk to?

Kim Saiswick

Director, Community Outreach & Community Benefit Ministry Officer

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Appendix VII: Community Healthcare Initiatives
The following is a listing of Boards of Directors*, Committees and Taskforces a Holy Cross Hospital Community Outreach staff member participates on:

Broward County Comprehensive School Health Advisory Committee
Broward County Human Trafficking Coalition
Broward County Schools Nutrition Committee
Broward County Schools Wellness and Learning Supports Committee
Community Gardening of South Florida Community
School Health Advisory Council Department of Health
Nutrition and Fitness Taskforce Department of Health
Outreach Planning Group
Florida HIV/AIDS Community Planning Network: Patient Care Section
Florida KidCare
Florida Viral Hepatitis Council
Healthy Families Advisory Council
HIV Health Services Council: Executive & Joint Planning Committee
Homeless Providers Group
HOPE South Florida*
Immunization Action Coalition
Love Thy Neighbor*
Pompano Providers Group
Public Schools: Nutrition and Wellness Committees
Second Chance Society* South
Florida AIDS Network South
Florida Hunger Coalition*
United Way of Broward County: Health Impact Committee*
University of FL Extension Advisory Board*
Appendix VIII: Key Informant Interview Summary

Key Informant Interviews addressed issues of healthcare access, greatest health related problems; behaviors and risk problems and community conditions among medically and economically underserved, low-income and minority populations. Our Key Informant population was identified as businesses and organizations whose mission or a core business practice addressed or provided these services. These interviews were conducted by the consultant August, 2015 – September, 2015.

Key Stakeholder Interview Questions:

1. What is your organization’s primary mission?
2. What is your role with your organization
3. What are the greatest health-related trends, challenges and issues you are seeing in the people you serve?
4. What are the greatest health-related needs you are seeing among the people you serve?

Key Stakeholders Interviewed, the organization they represent and the population they serve and services they provide:

**American Diabetes Association**- leads the fight against deadly consequences of diabetes; conducts research to prevent, cure and manage the disease; delivers services to communities and provides objective and credible diabetic information.
Dawn Seay, Executive Director (interviewed by telephone).

**Big Brothers/Big Sisters**- provides children facing adversity with strong and enduring professional support, one-to-one mentoring relationships that change their lives for the better. Serves approximately 1,700 children and siblings.
Ana Cedano, President/CEO (interviewed by telephone).

**Broward County Medical Association**- secures access to healthcare of the highest quality for residents of Broward County; maintains integrity of medical practice and care delivery for the citizens of Broward County and advocates in the legislative, regulatory and economic forums.
Cynthia Peterson, Executive Vice President (completed emailed survey).
**Broward Partnership for the Homeless**-provides a safe and nurturing environment designed to highlight alternatives to living on the street and provide each resident with the means to acquire health, housing and a sustaining income.

Michael Long, Chief Development Officer (interviewed by telephone).

**Children’s Services Council**- provides leadership, advocacy and resources necessary to enhance children’s lives and empower them to become responsible, productive adults through collaborative planning and funding of a continuum of quality care.

Sandra Bastien, Chief Communications Officer (interviewed by telephone).

**City of Lauderdale Lakes, Parks and Human Services Department**-focuses on enriching the quality of life for seniors, children and families while promoting social interactions, health awareness and educational experiences.

Tresa Brown-Stubbs, Director, Parks & Human Services (interviewed by telephone).

**Greater Fort Lauderdale Chamber of Commerce**-brings businesses, organizations and individuals together to help develop a vibrant community by working diligently on the resolution of affordable/workforce/attainable housing, partnering with other organizations on regional transportation initiatives, beach nourishment as well as other business related issues. Serves approximately 1,400 members.

Carolyn Michaels, Executive Vice President (interviewed by telephone).

**Hispanic Unity**-empowers Hispanics and other members of the community to become self-sufficient, and civically engaged to lead productive lives.

Josie Bacallo, President/CEO

**Women in Distress**-provide victims of domestic abuse with safe shelter, crisis intervention and resources and educate the community.

Mary Riedel, President, CEO (interviewed by telephone).
Appendix IX: Community Forum Participants

Holy Cross Hospital Community Health Needs Assessment-September 9, 2015
2015 Community Forum Participants

ADRC of Broward
American Diabetes Association
Broward Chamber of Non-Profit Organizations
Broward County Commission-Elderly and Veteran’s Services Division
Broward Healthy Start Coalition
Community Home Health Service
Crisis Housing Solutions
Florida Department of Health
Gateway Community Outreach
HOPE South Florida
Jack and Jill Children’s Center
Leadership Broward Foundation
LifeNet 4 Families
Light of the World Clinic
March of Dimes
NOVA Southeastern University
PACE Center for Girls
South Florida Hunger Coalition
The Jim Moran Foundation
United Way of Broward County
Urban League of Broward County

Holy Cross Hospital Representatives:
  HealthPlex Physician
  Community Outreach
  Strategic Planning

Holy Cross Hospital | 2015 Community Health Needs Assessment