

Sacred Heart Hospital on the Gulf Implementation Strategy 2017 - 2019

Overview

In 2015, Sacred Heart Health System (“SHHS”) and the Florida Department of Health - Gulf County (“DOH-GULF”) worked together, in collaboration with the DOH-Gulf’s Community Health Improvement Partnership (CHIP) and numerous other community organizations and agencies, to conduct a community health needs assessment (“assessment”) for the approximately 16,000 residents of Gulf County, Florida. The CHNA provides a snapshot in time of the community strengths, needs, and priorities. Guided by the Mobilization for Action through Planning and Partnerships (MAPP) process, the report is a result of a collaborative and participatory approach to community health planning and improvement. Improving the health of the community is critical to enhancing Gulf County residents’ quality of life and supporting its future prosperity and well-being.

The area for the purposes of the assessment was defined as the population of Gulf County. Gulf County has a total area of 745 square miles, of which 25% is water. There are two population centers in Gulf County - Wewahitchka in the northeast part of the County and Port St. Joe, the County seat and largest city, on the coast.

The population in Gulf County increased by 7.0% between 2000 and 2010, although the growth rate was less than the State of Florida over the same period. Between 2010 and 2014, the Gulf County population grew only 2.5%, compared to total population growth in the State of 5.8% during that period. Minorities represent about 23% of the total population, comparable to the composition of the State.

The median household income in Gulf County is \$40,455, significantly below that of the State. In 2013, the poverty rate was 30.8%, compared to 29.0% statewide. The unemployment rate as of August 2015 was 4.9%, lower than statewide and a significant improvement from the 10.3% rate reported for 2010.

The assessment process included CHIP meetings and workshops and a community survey distributed both on-line and in paper format. More than 25 people representing more than 15 different community agencies and organizations and the general public participated in various meetings throughout the process. In addition, 240 Gulf County residents completed the community survey. Particular focus was placed on obtaining input from vulnerable population groups. Quantitative data were obtained from county, state, and national sources. Qualitative information was obtained through regular CHIP meetings and workshops and the community survey. The data review was followed by a decision matrix and ended with selection of health priorities based on the following criteria:

- Broad applicability of solution set
- Time frame required to support efforts
- Potential to reduce health disparities
- Alignment with vision (To enhance health for all generations in Gulf County)
- Community support for the problem
- Resource availability to address problem

The 2015-16 Community Health Needs Assessment - Gulf County, Florida (CHNA) report (available on-line at www.sacred-heart.org/CHNA) details the processes and data used to identify the following the top priority health issues identified for Gulf County:

- Access to Care
- Mental Health and Substance Abuse
- Healthy Weight

Implementation Strategy

ACCESS TO CARE	
GOAL:	Reduce unnecessary admissions and emergency department visits by increasing access to primary care in Gulf / Franklin County
STRATEGY/ ACTIONS:	Increase activation for underserved living with diabetes, hypertension, heart failure, and COPD through coaching, care management, and medical home coordination.
BACKGROUND:	<ul style="list-style-type: none"> • The target population is underserved living in Gulf and Franklin counties. • MyGulfCare (MGC) is a program of SHHG in partnership with the Florida Department of Health in Gulf County (DOH-Gulf) that targets low-income Gulf County residents with chronic disease management challenges. MyGulf Care employs a non-traditional, individualized approach by providing chronic care nurse coaching assistance and education to address both health care and social services needs. • During the fourth quarter of FY 2016, the program expanded to include COPD and heart failure disease conditions. • Disease management stop light tools have been developed for COPD and heart failure, but not yet for diabetes. • The strategy will be developed using evidence based disease management information from sources such as American Association of Diabetes Educators (AADE) and Insignia Health's <i>Coaching for Activation</i>.
RESOURCES:	MyGulf Care (MGC) Social Worker (SW), Nurse Care Managers (CM), and Pharmacy Assistance Program Coordinator (PAP), Gulf County Health Department, Franklin County Health Department, Sacred Heart Medical Group, Sacred Heart Hospital Care Coordination Department, SHHG Emergency Department
OUTCOMES/ ANTICIPATED IMPACT:	<ol style="list-style-type: none"> I. By June 2017, at least 50% of program participants will have a documented Patient Activation Measurement (PAM) level of at least 3 II. By Jun 2017, at least 75% of participants will be scheduling their own primary care visits. III. By June 2017, at least 75% of participants enrolled for 12 months will show improvement in biometric data (A1c levels, blood pressure, weight) IV. By 2018, reduce Gulf County Emergency Department visit rate for ambulatory sensitive conditions by 3%

MENTAL HEALTH AND SUBSTANCE ABUSE	
GOAL:	Increase awareness of mental health services in Gulf County
STRATEGY/ ACTIONS:	Provide education to the community to increase awareness of services available and reduce the stigma associated with mental health and mental illnesses.
BACKGROUND:	<ul style="list-style-type: none"> • Average number of adult poor mental health days in Gulf County (last 30 days- Count): 7.5 vs. State: 5.1. • More than 1 in 5 of the general population respondents and 15% (n=) of the vulnerable population respondents feel that mental health is one of the most important health issues in the county. (Community Survey, 2015) • 37% of both general and vulnerable population respondents indicated that they think mental health services are difficult to obtain within Gulf County. (Community Survey, 2015) • 30% of the general population respondents and 26% of vulnerable respondents did not know where to go to receive mental health care. (Community Survey, 2015)
RESOURCES:	Sacred Heart on the Gulf (SHHG) staff, meeting space, printing and distribution. MyGulfCare, Gulf 211, Florida Department of Health in Gulf County (FDOH-G), Gulf Community Health Improvement Plan (CHIP) Partners.
OUTCOMES/ ANTICIPATED IMPACT:	I. By April 2018, the percentage of the general Gulf County population who are aware of mental health resources will increase from 60% to 65%
HEALTHY WEIGHT	
GOAL:	Reduce the impact of obesity (BMI greater than 30.0) and diabetes in Gulf County.
STRATEGY/ ACTIONS:	Improve MyGulfCare client self-management of weight and blood glucose levels through education and counselling.
BACKGROUND:	<ul style="list-style-type: none"> • According to the Florida Department of Health, the number one public health threat to Florida's future is unhealthy weight. The estimated annual medical cost for people who are obese is \$1,429 higher than that for people of healthy weight (BMI = 18.5-24.0) • Currently, only 36 percent of Floridians are at healthy weight, and only 33% of Gulf County adults are at a healthy weight. • Obesity is a major contributor to many preventable chronic diseases and other poor health outcomes, including Type 2 Diabetes. • 13.6% of Gulf County residents are known to have Diabetes, which is up from 7.6% during the prior reporting period and exceeds the state rate of 11.2%. • Target population is MyGulfCare (MGC) clients. MGC is a program of SHHG in partnership with the Florida Department of Health in Gulf County (DOH-Gulf) that targets low-income Gulf County residents with chronic disease management challenges. MyGulf Care employs a non-traditional, individualized approach by providing chronic care nurse coaching to address both health care and social services needs. • National Standards for DSME - http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2797385/
RESOURCES:	Diabetes educator (DE), SHHEC/SHHP CDE mentors, DSMT course materials, American Association of Diabetic Educators (AADE) patient education DVDs, Diabetic Self-Management Education (DSME) Education Grant, MyGulfCare, Pharmacies, Health Dept.
OUTCOMES/ ANTICIPATED IMPACT:	I. By June of 2017, 50% of MyGulfCare clients participating in Diabetic Self-Management Education will have a minimum of 3% total weight loss at 6 month check-in.