

2012 Community Health Needs Assessment *Strategic Planning*

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Why Conduct CHNA?

- Build upon 2010 study
- Direct Backus Hospital community health improvement activities
- Identify and engage partners to help in addressing community needs
- Establish benchmarks and monitor health trends for all of New London and Windham Counties
- Improve quality of life for residents in region
- Meet new IRS requirements under ACA

Purpose of Today's Meeting

- To review the key findings from CHNA;
- To prioritize the identified needs based on available resources, ability to impact, scope of the issue, etc.;
- To identify community assets to address needs.

Eastern Connecticut

- Primary Service Area
- Secondary Service Area
- Ancillary Service Area
- ★ The William W. Backus Hospital
- ✚ Backus Service Centers
- ✚ Other Service Centers



Backus

The Community Health Needs Assessment

2012 data collection to augment 2010 study. The updated CHNA now includes:

- Secondary Data for New London/Windham Counties
- 1,570 households surveyed New London/Windham Counties
 - 461 in 2012 Ancillary Service Area
 - 1,109 in 2010 Primary & Secondary Service Area
- Key Informant Interviews with 49 leaders
- Three Focus Groups

Secondary Data

- Household & Demographic Information
- Public safety and social environment
- Maternal health statistics
- Communicable disease
- Social determinants of health
- Cancer statistics
- Mortality rates

Primary Data Collection

Primary data:

- 2010 study of 1,109 residents in primary & secondary SA
- 2012 study of 461 adults in ancillary service area
- Provides data for region, Windham & New London Counties

- Access to care
- Screenings & preventive health
- Tobacco
- Alcohol consumption
- Weight, nutrition & exercise
- Chronic health conditions
- Diabetes
- Disability
- Women's health
- Caregiving
- Mental health
- Domestic violence



Key Informant Interviews

- Face to face interviews with 49 community leaders
- Provide qualitative feedback on community needs and assets
- Identify needs for special/underserved populations
- Make recommendations to improve community health/quality of life

Focus Groups

- Three focus groups
 - Representatives of Diverse Cultures
 - WWBH Patient Family Advisory Council
 - Health Care Consumers
- Qualitative data about health disparities
- Access to care
- Awareness of health education/information
- Best channels for communication

Comprehensive Results

Service Area Comparisons

- Primary service area less favorable when different
 - Less likely to get health screenings
 - More likely to binge drink, less likely to wear seat belts
- Ancillary service area more favorable when different
 - Except smoking stats
 - Less obese 21% compared to 30% in PSA/SSA
 - More likely to get health screenings
- Less variation for Secondary Service Area
 - Except ED visits for asthma

Areas of Strength

- Self-reported health status
- Health insurance coverage
- Physical activity
- Ability to pay for care
- Routine checkups
- Diabetes or pre-Diabetes diagnosis
- Incidence rates for all sexually transmitted illnesses
- Incidence rates for colorectal cancer and prostate cancer
- Infant mortality, birth weight & prenatal care



Areas of Strength

- More likely to have health screenings, flu shot, HIV test
- More likely for child to have HPV vaccine
- Percentage of single-mother households
- Lead screenings
- Poverty rates for individuals and families
- Overall crime rate
- Reputation, perception of health care entities
- Education/communication, support groups
- Community organizations
- Air and water quality



Areas of Opportunity



- Mortality rates due to top three leading causes of death: heart disease, cancer, Chronic Lower Respiratory Disease
- Lung cancer incidence rate and mortality rate
- Asthma
- Incidence rates for Acute Hepatitis C and Lyme disease
- Percent of obese adults
- Percent of adult smokers
- Less likely than CT to have one healthcare provider
- Diabetes Management

Areas of Opportunity, con't

- Mental Health 1-2 days less favorable than US*
- Anxiety 1-2 days less favorable than US*
- Depression diagnosis
- Less likely to get mammogram, pneumonia shot
- Oral health
- Annual hospitalization rates for adults and children
- Access to a primary care physician (Physician density per 100,000 population)
- Rate of preventable hospital stays



Areas of Opportunity, con't

- Binge drinking less favorable than CT
- Less likely to always wear seatbelt than CT
- Educational attainment (college degree)
- Transportation to access health care
- Cultural competency, bi-lingual providers
- Access to specialists
- Indoor physical activity



Secondary Data Results

Race/Ethnicity

	US.	CT	WWBH
White	72.4%	77.6%	84.3%
Black/ African American	12.6%	10.0%	4.8%
American Indian/ Alaska Native	0.9%	0.3%	0.8%
Asian	4.8%	3.8%	3.3%
Native Hawaiian or Other Pacific Islander	0.2%	0.0%	0.1%
Two or more races	2.9%	2.6%	3.3%
Hispanic or Latino	16.3%	13.4%	8.9%

Source: US Census 2010

Education Statistics

	US.	CT	WWBH
Less than 9th grade	6.2%	4.7%	4.0%
9th to 12th grade, no diploma	8.7%	7.0%	7.8%
High school graduate (includes equivalency)	29.0%	28.6%	33.2%
Some college, no degree	20.6%	17.3%	19.5%
Associate's degree	7.5%	7.3%	7.9%
Bachelor's degree	17.6%	19.9%	15.4%
Graduate or professional degree	10.3%	15.3%	12.2%
Percent high school graduate or higher	85.0%	88.4%	88.2%
Percent bachelor's degree or higher	27.9%	35.2%	27.6%

Top Ten Leading Causes of Disease

	U.S.	CT	WWBH
The following are the top 10 leading causes of death in ranking order of the United States.			
Diseases of heart	24.6%	25.1%	26.1%
Malignant neoplasms (Cancer)	23.3%	23.6%	23.8%
Chronic lower respiratory diseases	5.6%	5.0%	6.1%
Cerebrovascular diseases (Stroke)	5.3%	5.0%	4.9%
Accidents (Unintentional injuries)	4.8%	4.6%	4.8%
Alzheimer's disease	3.2%	2.8%	3.4%
Diabetes Mellitus	2.8%	2.2%	2.1%
Influenza and pneumonia	2.2%	2.5%	2.3%
Nephritis, nephrotic syndrome and nephrosis	2.0%	2.0%	1.8%
Intentional self-harm (Suicide)	1.5%	1.0%	1.2%

Sources: Center for Disease Control and Prevention, 2009
Connecticut Department of Public Health, 2007 - 2009

Lyme Disease

	U.S ^b	Connecticut	Total Service Area	Primary Service Area	Secondary Service Area	Ancillary Service Area
Number of cases	22,561	2,006	320	131	75	114
Crude rate	7.3	56.0	82.2	97.9	54.9	95.9

Hepatitis C

	Healthy People 2020	U.S ^b		Connecticut		Total Service Area	
	Rate	n	Rate	n	Rate	n	Rate
Acute Hepatitis A	0.3	1,670	0.5	18	0.5	2	*
Acute Hepatitis B	N/A	3,350	1.1	19	0.5	2	*
Chronic Hepatitis B	N/A	N/A	N/A	351	9.8	36	9.2
Acute Hepatitis C	0.2	850	0.3	47	1.3	11	2.8

Lung Cancer

	U.S.		CT		WWBH	
	n	Rate	n	Rate	n	Rate
Female breast	207,017	135.3	2,854	155.6 ^b	2,854	150.2 ^b
Colorectal	146,040	48.4	1,795	51.3	173	45.2
Lung	209,969	69.6	2,602	74.3	299	78.2
Prostate	230,979	155.4	3,015	173.3 ^b	278	143.1 ^b
All Sites	1,497,926	496.7	19,669	561.6	2,009	525.5

Health Statistics

	National Benchmark ^c	CT	New London County	Windham County
Adult smoking	14.0%	16.0%	19.0%	20.0%
Adult obesity	25.0%	23.0%	24.0%	30.0%
Physical inactivity	21.0%	23.0%	23.0%	26.0%
Excessive drinking	8.0%	18.0%	18.0%	17.0%
Motor vehicle crash death rate ^a	12.0	9.0	11.0	17.0
Chlamydia rate ^a	84.0	346.0	244.0	229.0
Teen birth rate ^b	22.0	24.0	26.0	29.0

Source: County Health Rankings, 2012

^a Rates per 100,000 population

^b Rates per 1,000 population

^c National Benchmark represents the 90th percentile and is not an average

Clinical Care

	National Benchmark ^a	CT	New London County	Windham County
Uninsured adults	12.0%	10.0%	9.0%	11.0%
Patient to primary care physician ratio	631:1	729:1	1,098:1	1,333:1
Preventable hospital stays ^b	49.0	63.0	70.0	75.0
Diabetic screening ^c	89.0%	83.0%	84.0%	85.0%
Mammography screening ^c	74.0%	71.0%	76.0%	71.0%

Source: County Health Rankings, 2012

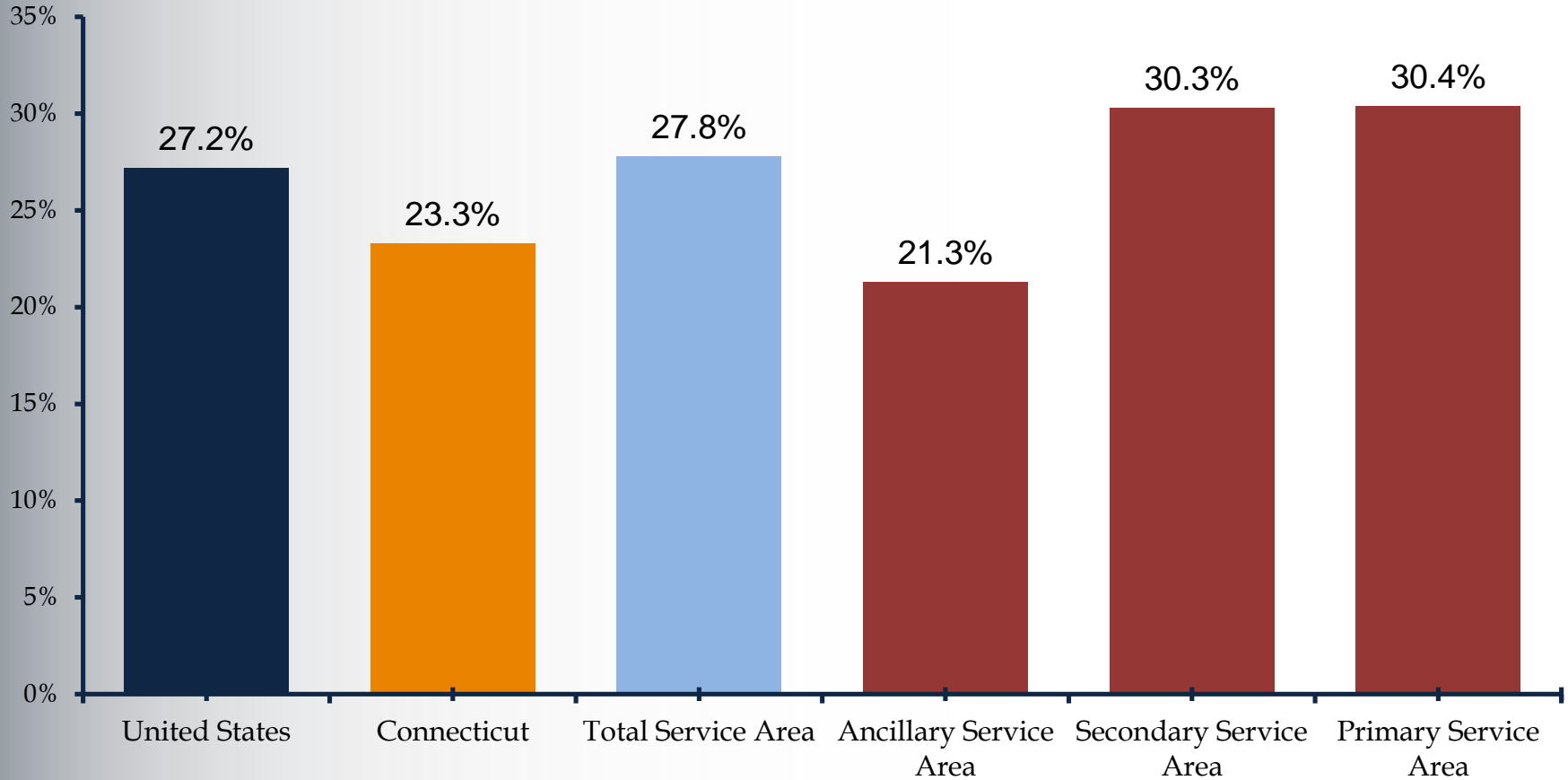
^a National Benchmark represents the 90th percentile and is not an average

^b Hospitalization rate for ambulatory-care sensitive conditions per 1,000 Medicare enrollees

^c Percent of Medicare enrollees receiving screenings

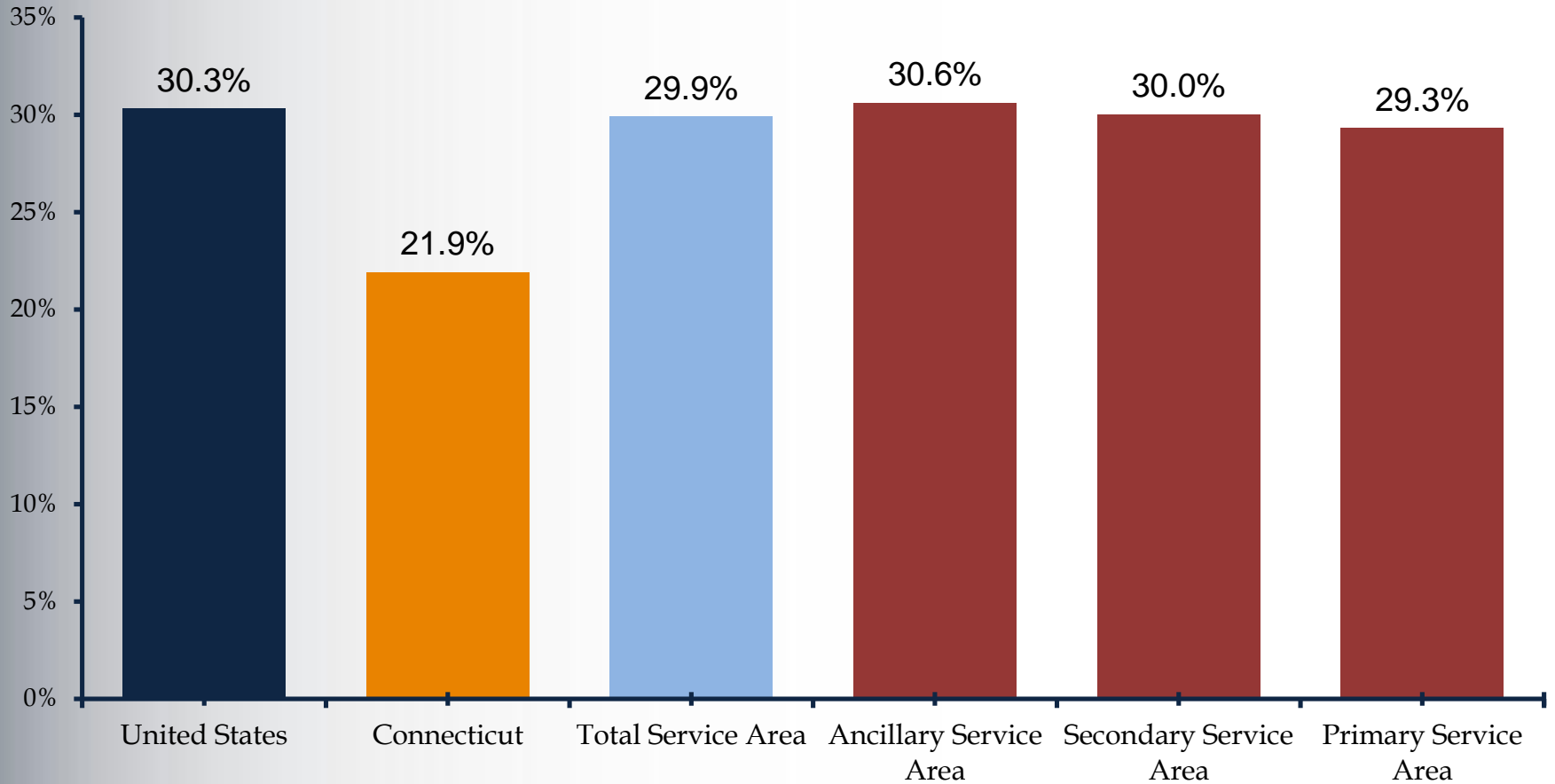
Primary Data Results

Calculated BMI: Percentage of obese respondents



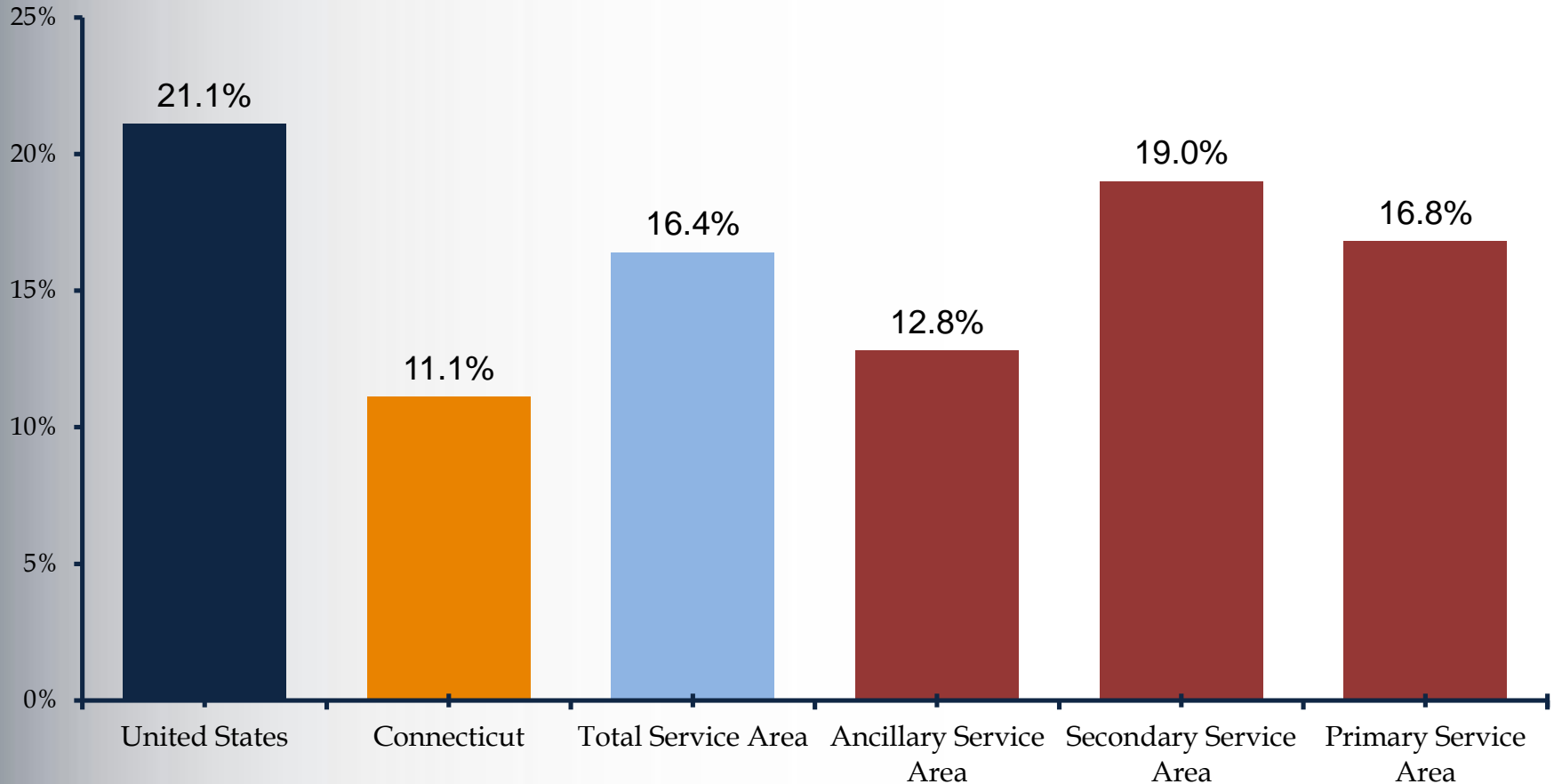
- The Total Service Area is significantly different than Connecticut.
- The Ancillary Service Area is significantly different than the Primary and Secondary Service Areas and the United States.
- The Primary and Secondary Service Areas are significantly different than Connecticut.

Respondents who currently smoke cigarettes every day



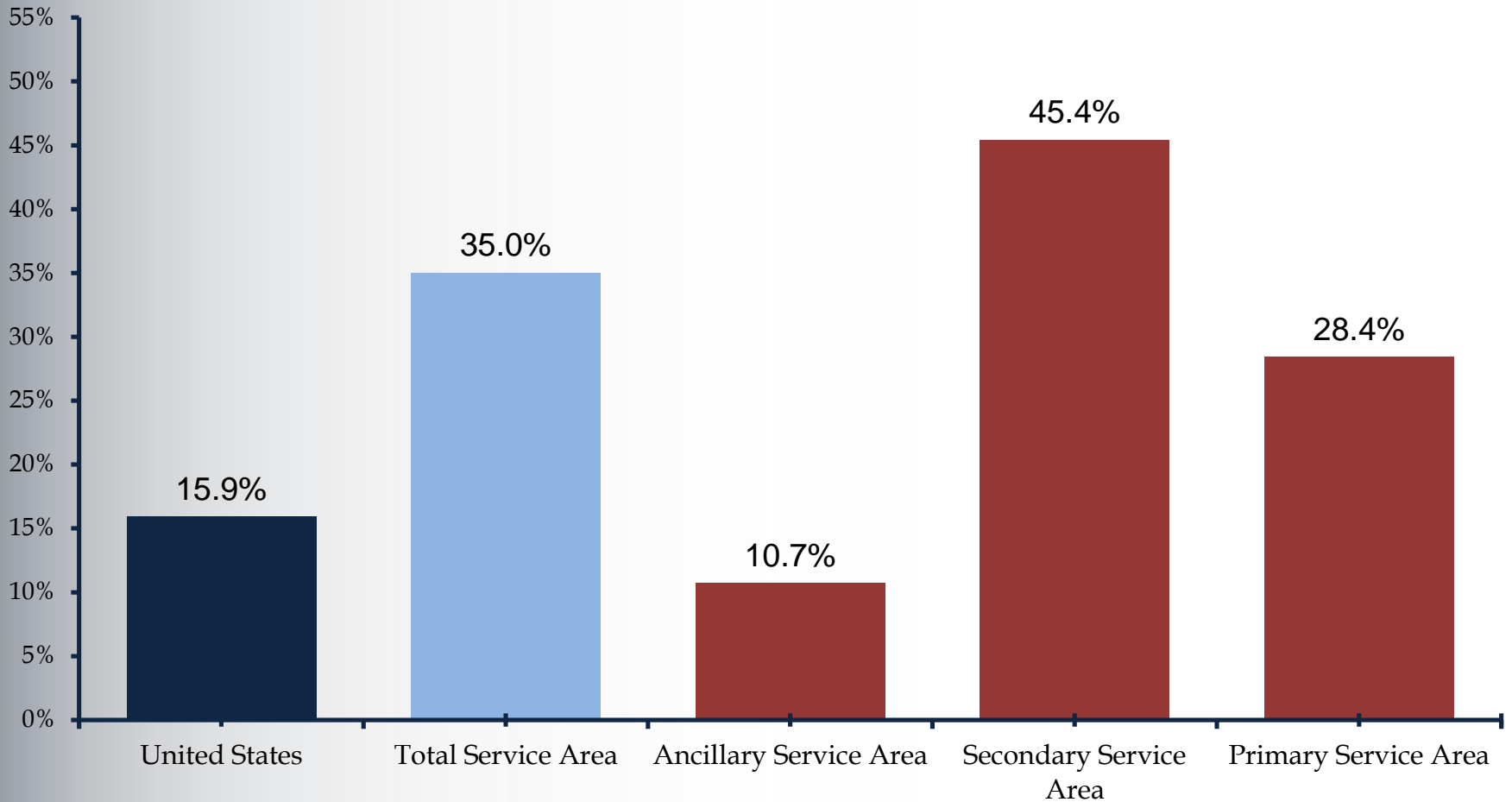
-All service areas are significantly different than Connecticut.

Respondents without one personal doctor or health care provider



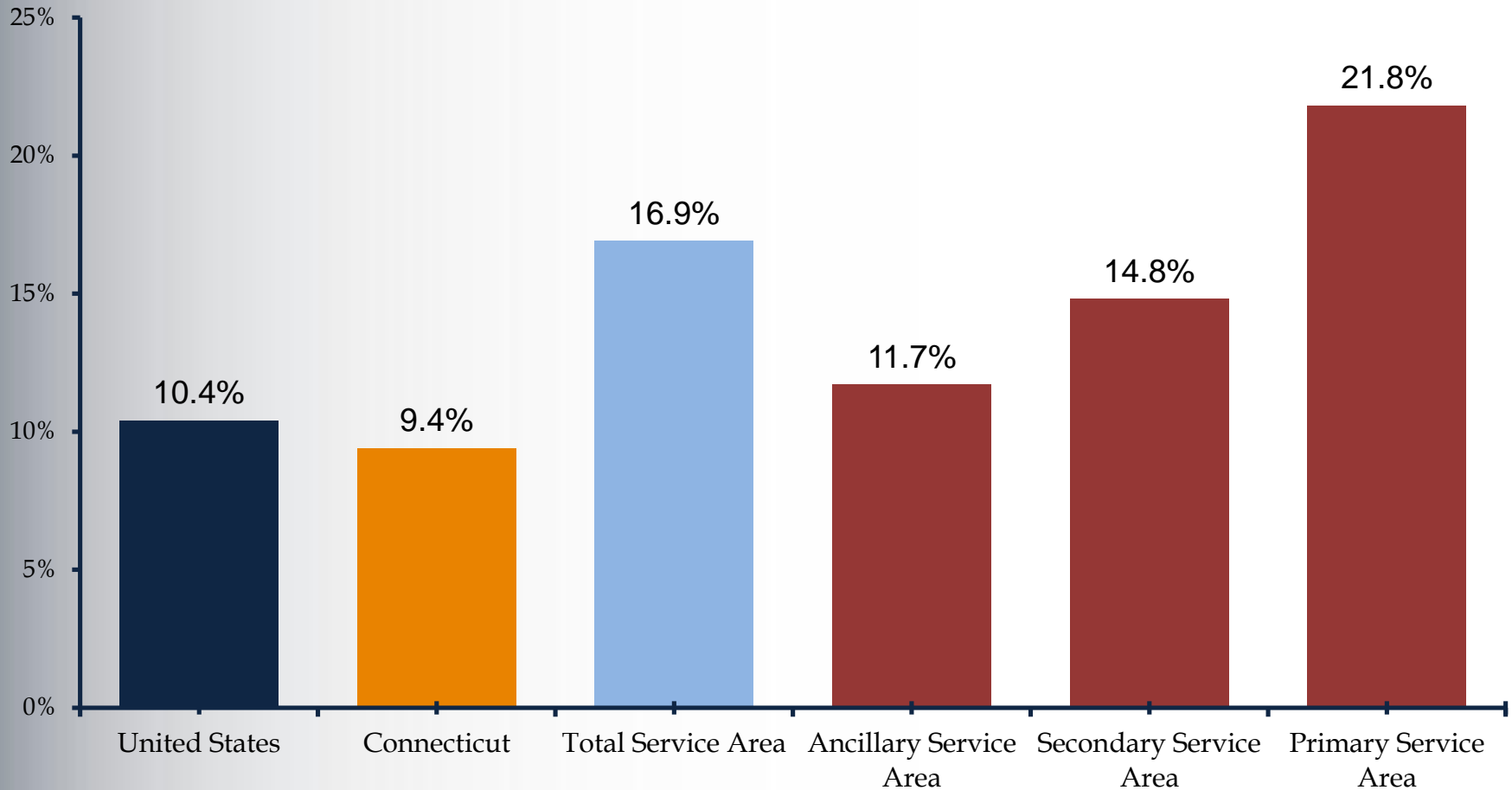
- The Total Service Area is significantly different than Connecticut and the United States.
- The Ancillary Service Area is significantly different than the Secondary Service Area and the United States.
- The Primary and Secondary Service Areas are significantly different than Connecticut.

Respondents who have visited an emergency room or urgent care center because of their asthma in the past 12 months



-The Total Service Area and Secondary Service Area are significantly different than the United States.

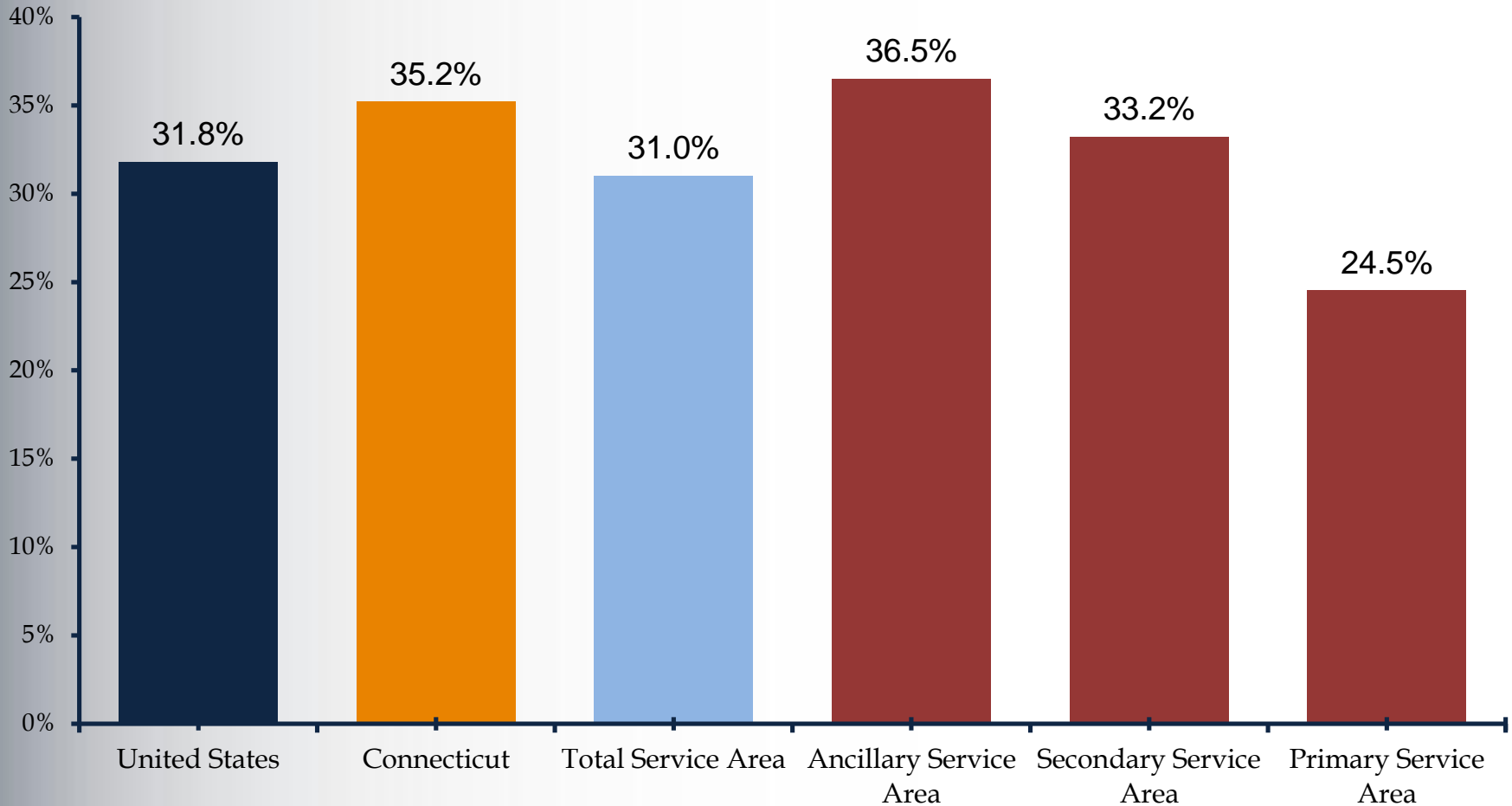
Respondents who have not seen a health professional for their diabetes within the past 12 months



-The Total Service Area is significantly different than Connecticut.

-The Primary Service Areas is significantly different than Connecticut and the United States.

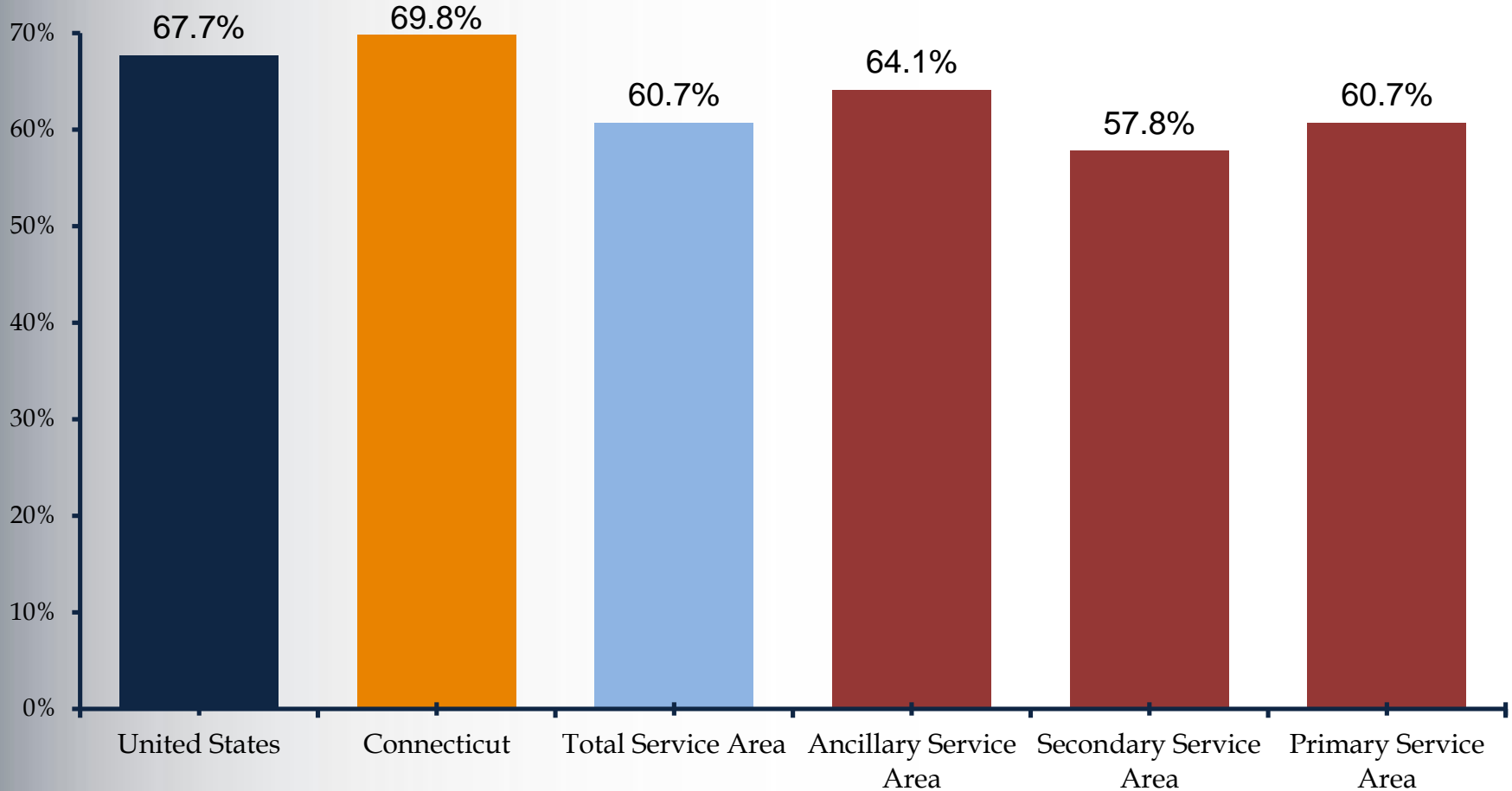
Respondents who have ever had a pneumonia shot



-The Total Service Area is significantly different than Connecticut.

-The Primary Service Area is significantly different than the Secondary Service Area, Ancillary Service Area, Connecticut, and the United States.

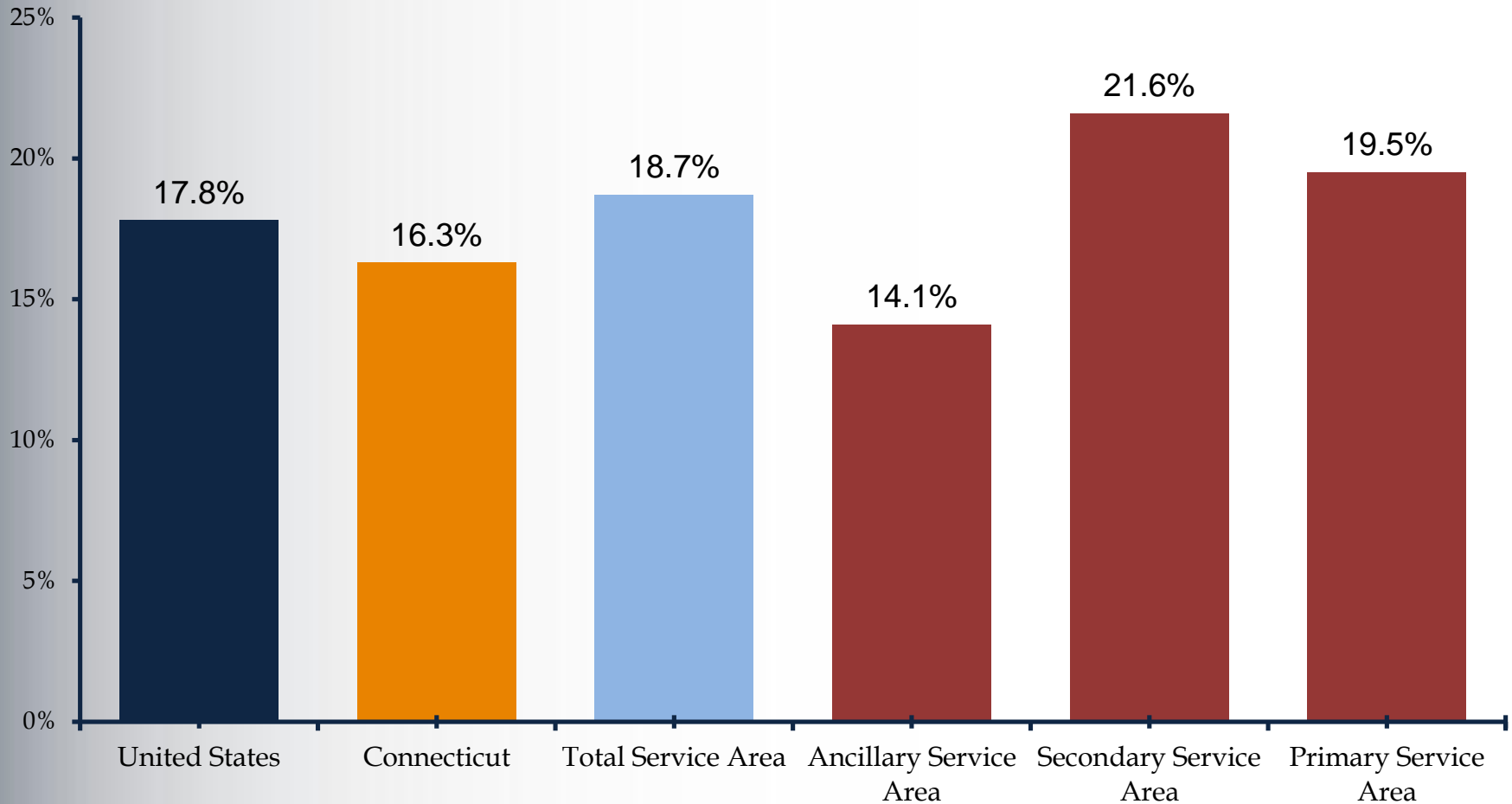
Female respondents who have had a mammogram



-The Total Service Area and Secondary Service Area are significantly different than Connecticut and the United States.

-The Primary Service Area is significantly different than Connecticut.

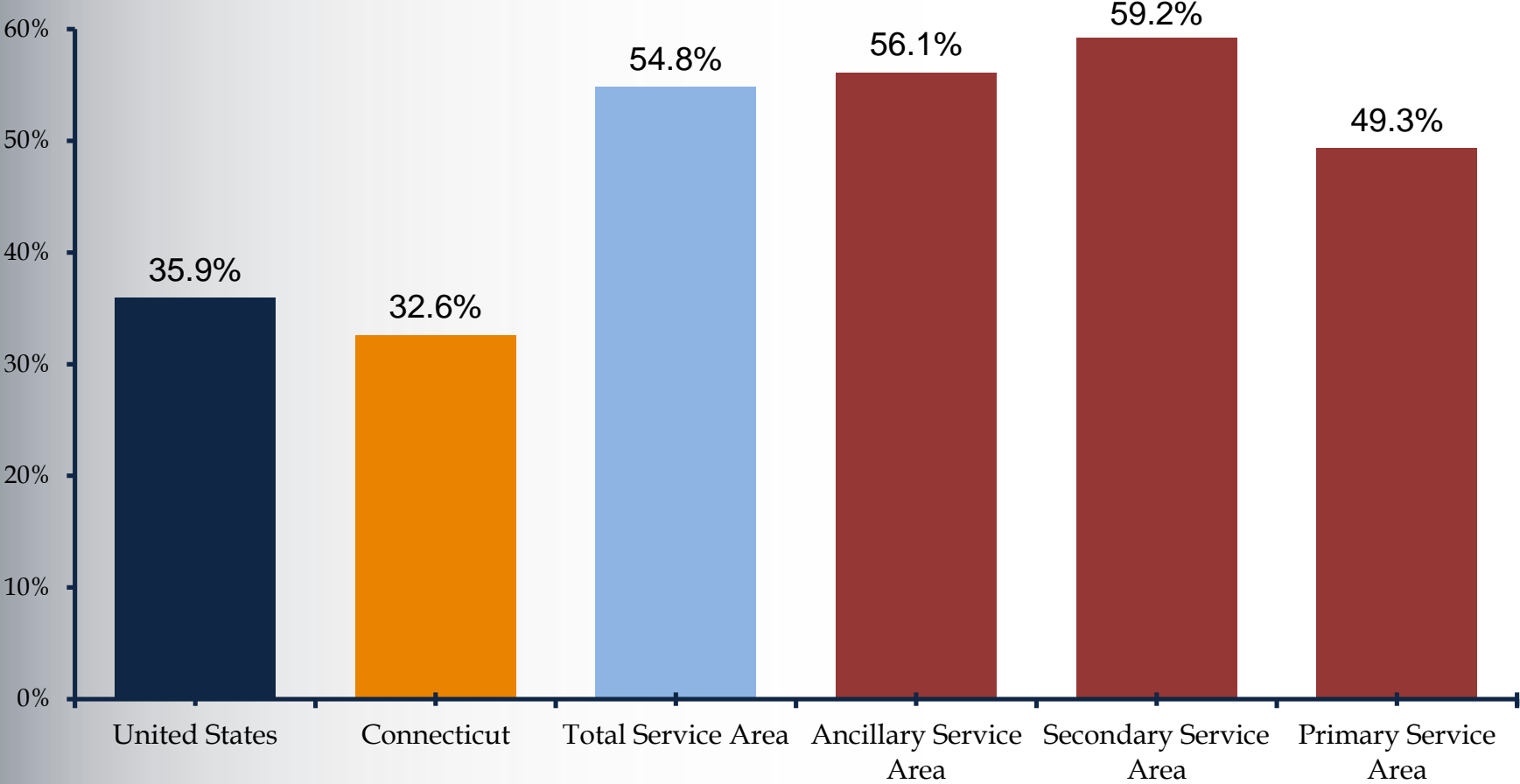
Respondents who have been diagnosed with a depressive disorder



-The Total Service Area is significantly different than Connecticut.

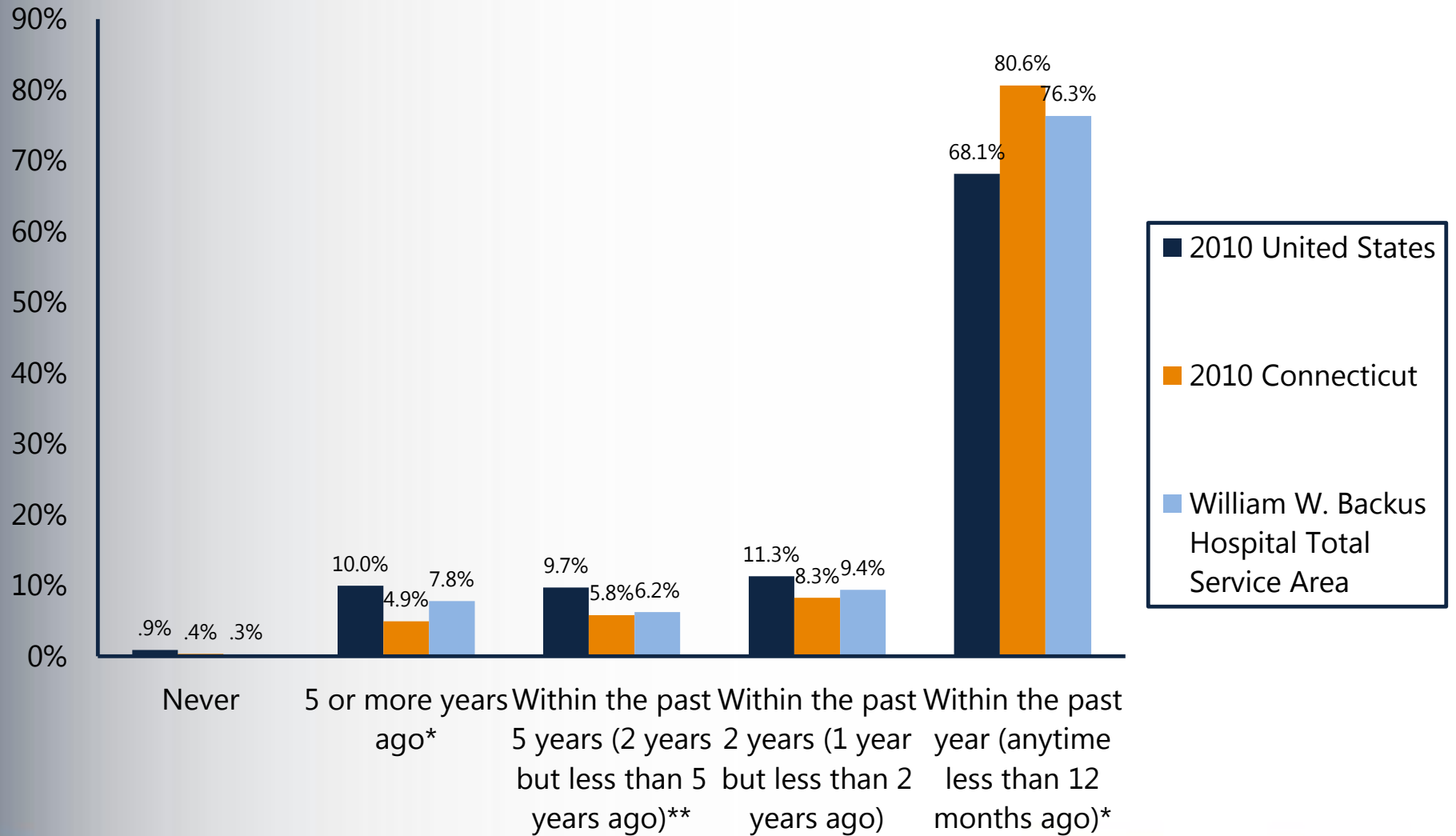
-The Secondary Service Area is significantly different than the Ancillary Service Area and Connecticut.

Respondents who have been tested for HIV



-All service areas are significantly different than Connecticut and the United States.
-The Primary Service Area is significantly different than the Secondary Service Area.

How long has it been since you last visited a dentist or dental clinic for any reason?
 Include visits to dental specialists, such as orthodontists.

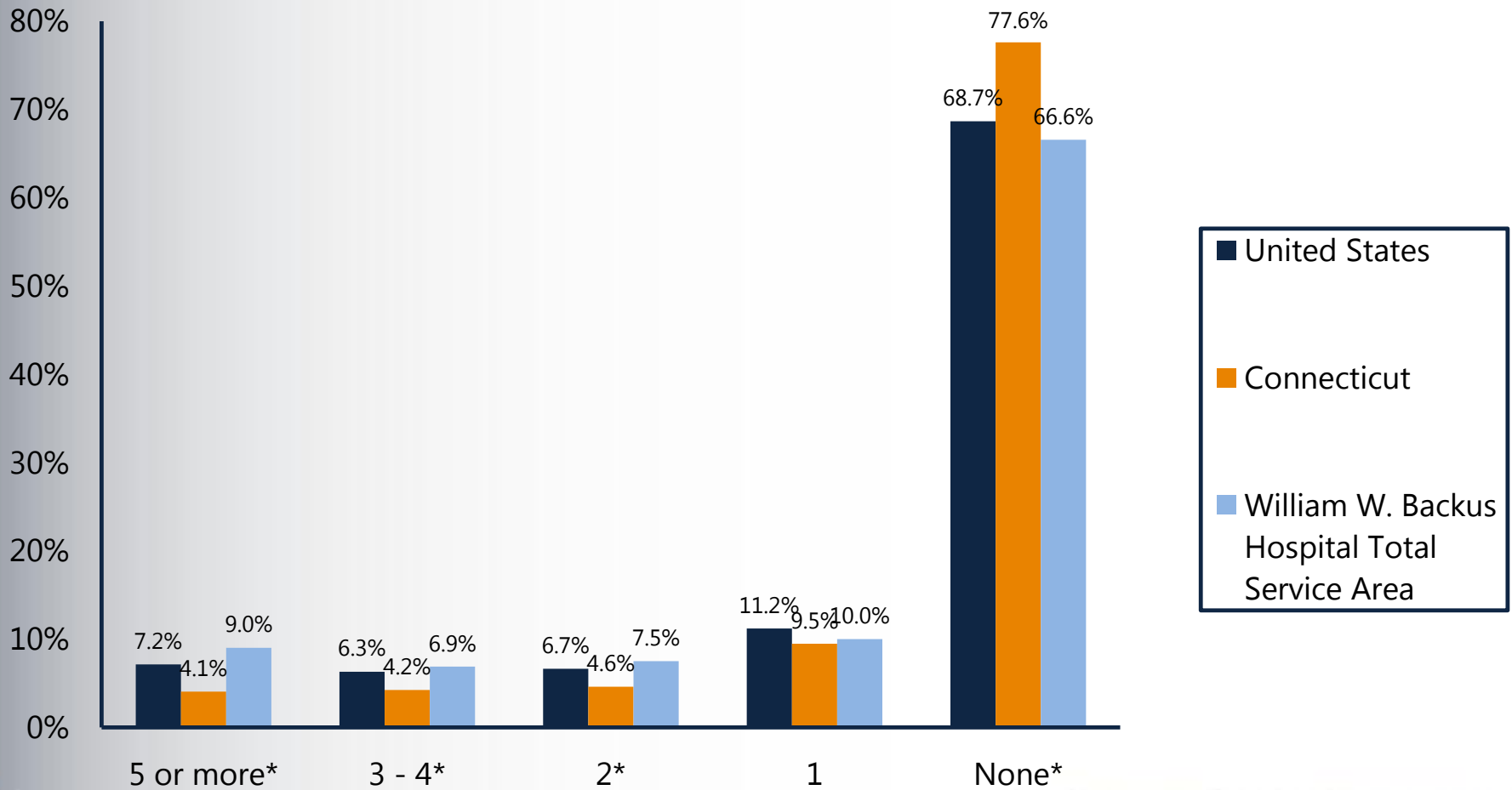


*Significantly different than the United States and Connecticut.

**Significantly different than the United States.

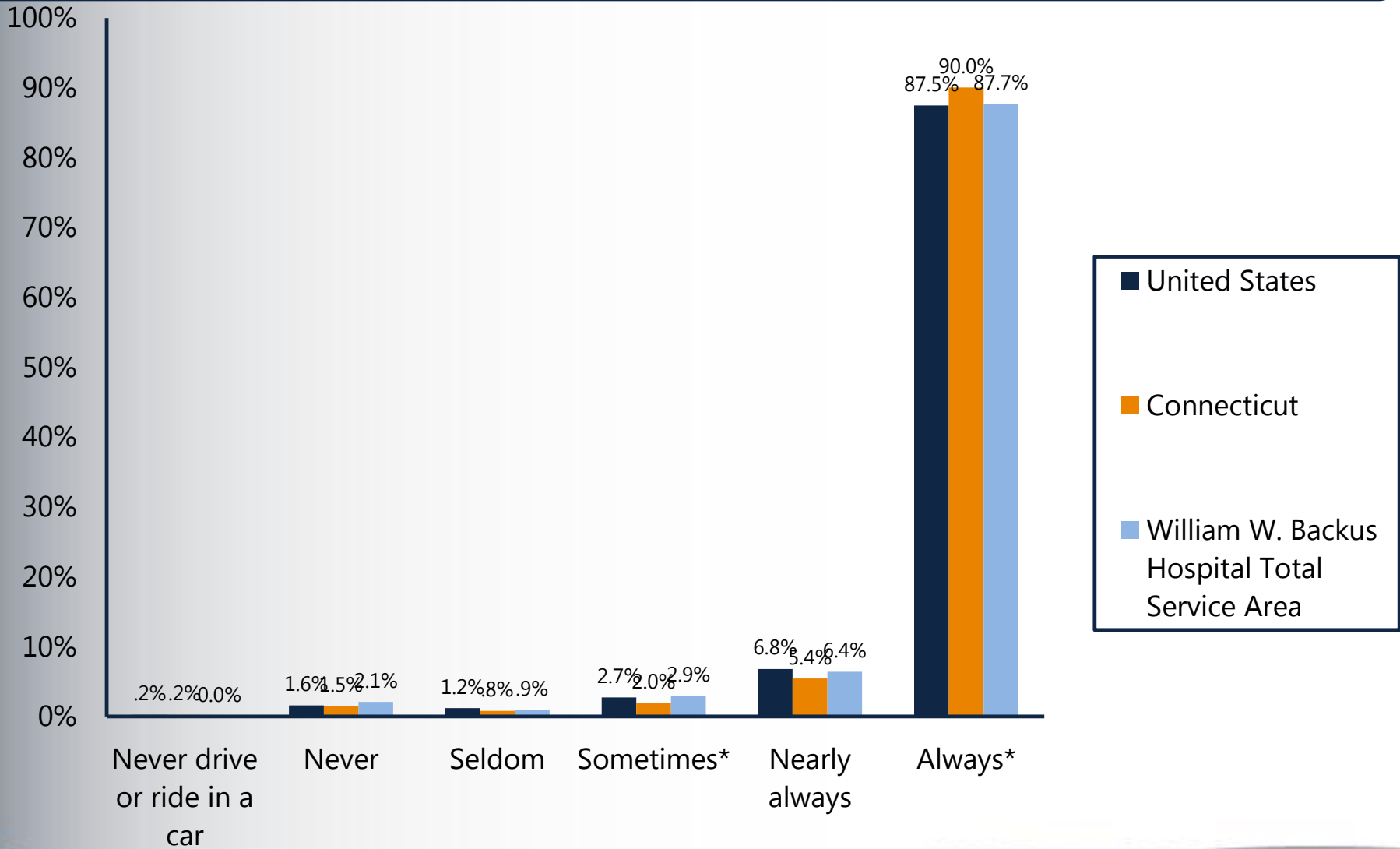
Considering all types of alcoholic beverages, how many times during the past 30 days did you have (5 for men, 4 for women) or more drinks on an occasion?

Respondents who drank at least one drink in the past 30 days



*Significantly different than Connecticut.

How often do you use seat belts when you drive or ride in a car?



*Significantly different than Connecticut.

Overall Summary of Findings: Key Informant

- Face to face interviews conducted with 49 community leaders
- Strengths:
 - William W. Backus Hospital seen as strong community partner
 - Dedicated community-based agencies
 - Air and water quality
- Opportunities:
 - Access to care (Cost, transportation, health insurance, culturally competent providers)
 - Chronic conditions (Obesity, mental illness, heart disease)
- Recommendations:
 - Build infrastructure around healthy lifestyles
 - Opportunity for community collaboration

Overall Summary of Findings: Focus Groups

■ Strengths:

- Health care providers
- Support groups and programs
- Healthcare communication

■ Opportunities:

- Culturally competent /multi-lingual providers
- Access to care (Pediatricians, primary care providers, specialists)
- Numerous underserved populations: Homeless, veterans, foreign-born, military families, mental health patients, etc.
- Availability of indoor physical activity

Master List of Needs for Consideration

- Obesity & Related Chronic Conditions (diabetes mgmt)
- Respiratory Disease: Asthma/Lung cancer (Smoking)
- Access to care (physician ratio/insurance, cultural comp, other barriers, hospitalizations)
- Mental Health: Depression & Anxiety
- Preventative Health (Mammograms, Pneumonia Shots, oral health, seatbelts)
- Substance Abuse
- Built Environment
- Infectious Disease