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BAPTIST HEALTH[®] COMMUNITY HEALTH NEEDS ASSESSMENT

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LOUISVILLE

2022 - 2024

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2022-2024

Baptist Health Louisville Community Health Needs Assessment



Contents

| Community Health Needs Assessment Committee |
|---|
| Introduction |
| Organization Description4 |
| Service Area5 |
| Mission, Vision, and Values7 |
| Purpose7 |
| Executive Summary8 |
| Framework |
| Profile of the Community9 |
| Demographics and Socioeconomics9 |
| Mortality12 |
| Cancer Incidence Rates13 |
| Health Statistics and Rankings13 |
| Primary Data14 |
| Community Healthcare Resources15 |
| Committee Discussion |
| Prioritized Health Issues18 |
| Communications Plan 19 |
| Conclusions |
| Strategic Implementation Plan |
| Mental Health Services |
| Health Equity – Heart Disease |
| Preventative Health Screenings25 |
| Opioid Reduction27 |
| Maternal and Child Health29 |
| Appendix A – Data Sources |
| Health Departments |
| National Sources |
| State Sources |
| Appendix B – 2021 Baptist Health Louisville Public Survey Instrument 33 |
| Appendix C – 2018-2021 SIP Results |
| Appendix D – Baptist Health Louisville 2018 and 2021 CHNA Survey Response |
| Comparison |



Community Health Needs Assessment Committee

| Name | Title |
|-------------------------|--|
| Larry Gray | President, Baptist Health Louisville |
| Gretchen Leiterman | Chief Operating Officer, Baptist Health Louisville |
| Kenneth C. Anderson, MD | Chief Medical Officer, Louisville |
| Karen Higdon | Chief Nursing Officer, Louisville |
| Alex Kerns | Executive Director, Operations |
| Randall Caldwell | Director, Patient Experience |
| Gayle Dickerson | Director, Case Management |
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3



Introduction

This Community Health Needs Assessment provides the foundation for Baptist Health Louisville and other local organizations to strategically plan services and improve the health of the community we serve. This document builds on Baptist Health Louisville's third Community Health Needs Assessment, published in August 2018.

Organization Description

Baptist Health Louisville

Baptist Health Louisville, a 519-bed tertiary acute care hospital located in the eastern part of Jefferson County, is a wholly owned subsidiary of Baptist Health. Baptist Health Louisville opened in 1975 and expanded in 1989 when Baptist Hospital Highlands closed, and its services and beds merged with Baptist Health Louisville. A significant addition of beds occurred in September 2008 when Baptist Health Louisville added the Park Tower, with 25 percent more licensed beds and 25 percent more surgery suites. Baptist Health Louisville provides virtually all inpatient services with the exception of transplantation and burn care. Baptist Health Louisville has 19 physical rehab beds, and 500 general medical/surgical acute care beds, included 12 Neonatal Intensive care beds. Baptist Health Louisville has a 24-hour Emergency Department that is one of the busiest in the state; laboratory; full imaging capabilities, including three MRIs; physical, speech, and occupational therapy; five cardiac catheterization labs; open heart surgery; chemotherapy infusion; and radiation therapy with three linear accelerators.

Baptist Health

Baptist Health Louisville is part of Baptist Health, a not-for-profit, 501(c)(3) healthcare corporation that owns and operates nine hospitals with 2,770 licensed beds located in Paducah, Madisonville, Louisville, La Grange, Lexington, Richmond, Corbin, and Hardin in the commonwealth of Kentucky and in New Albany, Indiana. In addition, Baptist Health Medical Group (BHMG), a wholly owned subsidiary of Baptist Health, employs over 1,556 primary care physicians, specialty physicians, and mid-level providers and operates occupational health, physical therapy services, sports medicine, Express Care Clinics, hospice and home care services, and urgent care facilities. Baptist Health Home Care (BHHC) provides home health services in 40 counties in Kentucky, six in southern Indiana, and six in southern Illinois.



Service Area

Baptist Health Louisville defines its service area for this Community Health Needs Assessment looking at where the majority of its inpatients reside. In CY 2020, seventy-five (75%) of Baptist Health Louisville's inpatients came from the eastern half of Jefferson, Bullitt, Oldham, Shelby, and Spencer Counties. While Baptist Health Louisville does serve some residents of the western portion of Jefferson County, it has relatively few resources in that part of the county. Oldham County is a shared service area between Baptist Health Louisville and Baptist Health La Grange, which is located in that county.

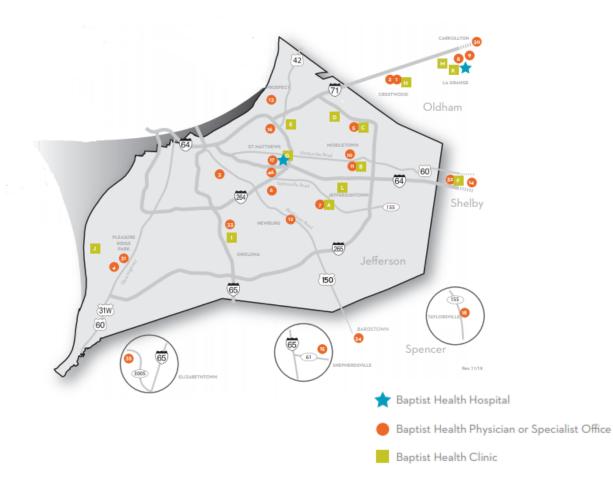




| Total Discharges Pa | | |
|-----------------------------|------------|------------|
| County | Discharges | % of Total |
| Eastern Jefferson County | 14,426 | 59.81% |
| Bullitt county | 1,421 | 5.89% |
| Oldham County | 860 | 3.57% |
| Shelby County | 844 | 3.50% |
| Spencer County | 545 | 2.26% |
| Total CHNA Service Area | 18,096 | 75.02% |
| * Other Areas | 6,025 | 24.98% |
| Total Baptist Health Louis، | 24,121 | 100.00% |

*Other includes 196 other counties and Jefferson County SSA Service Area Source: Qlik Data Exports discharges excluding normal newborns

Baptist Health Locations in Baptist Health Louisville Service Area





Mission, Vision, and Values

All Baptist Health Louisville employees are expected to help fulfill the mission, vision, and value statements adopted by the system.

Mission

Baptist Health demonstrates the love of Christ by providing and coordinating care and improving health in our communities.

Vision

Baptist Health will lead in clinical excellence, compassionate care, and growth to meet the needs of our patients.

Faith-based Values

Integrity, Respect, Compassion, Excellence, Collaboration and Joy.

Purpose

The Patient Protection and Affordable Care Act enacted March 23, 2010, added new requirements that hospital organizations must satisfy in order to be described in section 501(c)(3). Two of these requirements for hospitals are to assess the health needs of their communities and adopt implementation strategies to address identified needs.

This Community Health Needs Assessment is performed for a variety of reasons, including:

- To help meet the hospital's mission to demonstrate the love of Christ by providing and coordinating care and improving health in our communities.
- To comply with the Patient Protection and Affordable Care Act of 2010 and maintain the hospital's tax-exempt status.
- To establish community health needs for the hospital's service area to help prioritize resource allocation.
- To gather data that can be used in other efforts to obtain grants and qualify for awards and certifications.
- To determine available resources in the hospital's service area and how the hospital can coordinate activities with other agencies.
- To involve appropriate individuals and groups in the process to ensure needs are identified, efforts are not duplicated, and the correct agencies to handle specific issues are identified in the strategic implementation plan.
- To create a sustainable process for conducting a Community Health Needs Assessment that can be replicated and continued for future assessments.



Executive Summary

The Patient Protection and Affordable Care Act of 2010 includes a provision that requires every taxexempt, non-governmental hospital to:

- Conduct a Community Health Needs Assessment (CHNA) at least every three years
- Adopt a Strategic Implementation Plan (SIP) that identifies how the needs identified in the assessment will be met and by whom
- Report to the Internal Revenue Service via its 990 tax form how it is meeting its implementation plan

The CHNA must show how broad input from the community served by the hospital was collected and must be made widely available to the public.

This report details the process used to gather, disseminate, and prioritize the information used in the assessment. Baptist Health Louisville worked closely with numerous institutions, agencies, and individuals representing public health, other hospitals, and community members.

Framework

Baptist Health Louisville determined its service area for the project using the most recent patient origin data (CY 2020), including over 75 percent of its discharges in the ZIP codes chosen. Further information about this area is found in the section headed *Service Area*, on page five.

A wide variety of community resources were consulted during this update. There are four health departments responsible for the counties Baptist Health Louisville serves: Louisville Metro Public Health & Wellness (Jefferson County); the Bullitt County Health Department; the Oldham County Public Health Department; and the North Central District Health Department, which serves both Shelby and Spencer Counties. Louisville Metro Public Health & Wellness keeps health status data available and up to date through the vital statistics report. Oldham County health department is currently seeking public feedback via Survey monkey and does not anticipate having analyzed data before August 2020. Through these contacts, and data sources, Baptist Health Louisville is soliciting primary feedback on the updated health issues confronting its service area today.

Secondary data from demographic and socioeconomic sources, Kentucky vital statistics, disease prevalence, and health indicators and statistics were updated. National, state, and local resources were used. This data will be shared in the next section.

Finally, the Community Health Needs Assessment Committee met to consider all the updated information. They discussed the data presented and created a revised list of the health issues that were identified in both primary and secondary data sources. After robust interaction, the committee prioritized the list and discussed various ways the hospital could help to meet these needs. This



report was written and sent to all committee members for additional comments and suggestions. After these were incorporated, the CHNA was approved by the hospital and system boards.

Profile of the Community

Demographics and Socioeconomics

Baptist Health Louisville serves ZIP codes in Jefferson, Bullitt, Oldham, Shelby, and Spencer Counties in Kentucky. The following table shows the demographics and socioeconomic characteristics of Baptist Health Louisville's service area for the most recent period available.

| | | | | 2019 De | emographic Sn | apshot | | | |
|------------------------------|---------|------------|------------------|-------------|------------------------|------------------------------------|----------|--------------|-------------------|
| | | | | Ar | ea:BHLouisvi | le | | | |
| | | | Level of | Geography | : Primary Servi | ce Area by ZIP Code | | | |
| DEMOGRAPHIC CHARACTERISTIC | s | | | | | | | | |
| | | : | Selected Area | USA | | | 2019 | 2024 | % Change |
| 2010 Total Population | | | | 308,745,538 | | Total Male Population | 440,017 | 498,841 | 13.4% |
| 2019 Total Population | | | 901,616 | 329,236,175 | | Total Female Population | 461,599 | 521,184 | 12.9% |
| 2024 Total Population | | | 1,020,025 | 340,950,101 | | Females, Child Bearing Age (14-44) | 179,918 | 199,071 | 10.6% |
| % Change 2019 - 2024 | | | 13.1% | 3.6% | | | | | |
| Average Household Income | | | \$98,600 | \$89,646 | | | | | |
| POPULATION DISTRIBUTION | | | | | | HOUSEHOLD INCOME DISTRIBUTION | | | |
| | | Age | Distribut | tion | | | Inco | ome Distribu | ition |
| -Age Group | 2019 | % of Total | 2024 | % of Total | USA 2019 % of Total | 2019 Household Income | HH Count | % of Total | USA % of Total |
| 0-13 | 156,549 | 17.4% | 172,030 | 16.9% | 18.6% | <\$15K | 19,950 | 7.0% | 11.2% |
| 14-20 | 79,520 | 8.8% | 91,095 | 8.9% | 3.9% | \$15-25K | 20,864 | 7.3% | 9.6% |
| 21-24 | 44,335 | 4.9% | 50,861 | 5.0% | 9.6% | \$25-50K | 60,848 | 21.3% | 22.6% |
| 25-34 | 123,072 | 13.7% | 126,341 | 12.4% | 13.5% | \$50-75K | 50,985 | 17.9% | 17.4% |
| 35-54 | 230,982 | 25.6% | 258,752 | 25.4% | 25.3% | \$75-100K | 39,542 | 13.9% | 12.4% |
| 55-64 | 120,510 | 13.4% | 131,591 | 12.9% | 12.9% | Over \$100K | 93,210 | 32.7% | 26.9% |
| 65+ | 146,648 | 16.3% | 189,355 | 18.6% | 16.2% | | | | |
| Total | 901,616 | 100.0% | 1,020,025 | 100.0% | 100.0% | Total | 285,399 | 100.0% | 100.0% |
| EDUCATION LEVEL | | | | | | RACE/ETHNICITY | | | |
| | | | | | | | Race/E | hnicity Dist | |
| 2019 Adult Education Level | | Po | op Age 25 | % of Total | USA % of Total | Race/Ethnicity | 2019 Pop | % of Total | USA % of Total |
| Less than High School | | | 12,699 | 2.6% | 5.4% | White Non-Hispanic | 567,144 | 79.9% | 60.0% |
| Some High School | | | 26,772 | 5.4% | 7.3% | Black Non-Hispanic | 71,309 | 10.0% | 12.4% |
| High School Degree | | | 122,240 | 24.7% | 27.3% | Hispanic | 35,815 | 5.0% | 18.4% |
| Some College/Assoc. Degree | | | 151,913 | 30.7% | 29.0% | Asian & Pacific Is. Non-Hispanic | 18,859 | 2.7% | 5.9% |
| Bachelor's Degree or Greater | | | 180,962 | 36.6% | 31.0% | All Others | 16,838 | 2.4% | 3.3% |
| Total | | | 494,586 | 100.0% | 100.0% | Total | 709,965 | 100.0% | 100.0% |

Service Area Defined: Bullitt, Jefferson, Oldham, Shelby and Spencer Counties in Kentucky

Removed Louisville Zip Codes: 40202, 40203, 40208, 40209, 40210, 40211, 40214, 40215, 40216, 40218, 40258. 40272

There are approximately 571,143 persons in the previously defined adult population (16+) with a labor force of 380,561. Residents are slightly wealthier and less racially and ethnically homogenous than the U.S. as a whole. Most are employed with lower than state average unemployment.

Labor Force Characteristics Area: BH Corbin Service Area 2019 ZIP Code Report

| | | | | Rank | | ⊴P Code Re∣ Γotal Popula | tion 16+ (De | sc) | | | | | |
|-------------------|----------|----------------|-------|---------|---------|-----------------------------|--------------|--------------|---------|-------------|----------|-------------|---------|
| | | 2019 T | otal | Total | | Employed i | • | Emplo | yed in | Unemp | loyed in | Fema | ales in |
| | | Population 16+ | | Force | | Labor Force | | Armed Forces | | Labor Force | | Labor Force | |
| ZIP Code ZIP City | Name | Count | %Down | Count | %Across | Count | %Across | Count | %Across | Count | %Across | Count | %Across |
| 40299 Louisville | | 34,020 | 6.0% | 23,785 | 69.9% | 22,998 | 67.6% | 7 | 0.0% | 780 | 2.3% | 11,592 | 65.4% |
| 40291 Louisville | | 31,696 | 5.5% | 21,980 | 69.3% | 21,287 | 67.2% | 20 | 0.1% | 673 | 2.1% | 11,077 | 66.4% |
| 40229 Louisville | | 31,665 | 5.5% | 21,351 | 67.4% | 20,078 | 63.4% | 32 | 0.1% | 1,241 | 3.9% | 10,046 | 61.8% |
| 40219 Louisville | | 30,371 | 5.3% | 20,154 | 66.4% | 18,805 | 61.9% | 17 | 0.1% | 1,332 | 4.4% | 9,955 | 62.5% |
| 40165 Shepherds | ville | 28,502 | 5.0% | 18,858 | 66.2% | 17,687 | 62.1% | 49 | 0.2% | 1,122 | 3.9% | 8,976 | 61.9% |
| 40245 Louisville | | 27,969 | 4.9% | 19,376 | 69.3% | 18,773 | 67.1% | 3 | 0.0% | 600 | 2.1% | 9,132 | 61.8% |
| 40220 Louisville | | 27,546 | 4.8% | 18,636 | 67.7% | 18,070 | 65.6% | 4 | 0.0% | 562 | 2.0% | 8,989 | 61.5% |
| 40241 Louisville | | 25,655 | 4.5% | 17,139 | 66.8% | 16,627 | 64.8% | 27 | 0.1% | 485 | 1.9% | 8,228 | 60.9% |
| 40065 Shelbyville |) | 25,027 | 4.4% | 16,582 | 66.3% | 15,721 | 62.8% | 19 | 0.1% | 842 | 3.4% | 8,207 | 62.8% |
| 40207 Louisville | | 24,435 | 4.3% | 16,452 | 67.3% | 16,055 | 65.7% | 0 | 0.0% | 397 | 1.6% | 7,796 | 59.7% |
| 40031 La Grange | | 21,178 | 3.7% | 11,052 | 52.2% | 10,607 | 50.1% | 87 | 0.4% | 358 | 1.7% | 4,936 | 58.7% |
| 40205 Louisville | | 19,745 | 3.5% | 13,372 | 67.7% | 12,931 | 65.5% | 27 | 0.1% | 414 | 2.1% | 6,491 | 62.1% |
| 40223 Louisville | | 19,742 | 3.5% | 13,231 | 67.0% | 12,683 | 64.2% | 37 | 0.2% | 511 | 2.6% | 6,351 | 60.2% |
| 40222 Louisville | | 18,257 | 3.2% | 11,828 | 64.8% | 11,445 | 62.7% | 19 | 0.1% | 364 | 2.0% | 5,558 | 57.1% |
| 40047 Mount Was | shington | 18,053 | 3.2% | 12,094 | 67.0% | 11,408 | 63.2% | 13 | 0.1% | 673 | 3.7% | 5,864 | 62.9% |
| 40014 Crestwood | | 17,790 | 3.1% | 12,465 | 70.1% | 11,935 | 67.1% | 104 | 0.6% | 426 | 2.4% | 5,736 | 63.2% |
| 40206 Louisville | | 16,614 | 2.9% | 11,458 | 69.0% | 10,965 | 66.0% | 0 | 0.0% | 493 | 3.0% | 5,771 | 67.3% |
| 40059 Prospect | | 16,253 | 2.8% | 10,754 | 66.2% | 10,371 | 63.8% | 12 | 0.1% | 371 | 2.3% | 4,939 | 58.9% |
| 40228 Louisville | | 15,262 | 2.7% | 10,656 | 69.8% | 10,241 | 67.1% | 0 | 0.0% | 415 | 2.7% | 5,319 | 66.4% |
| 40213 Louisville | | 13,435 | 2.4% | 9,053 | 67.4% | 8,375 | 62.3% | 1 | 0.0% | 677 | 5.0% | 4,451 | 64.7% |
| 40212 Louisville | | 13,407 | 2.3% | 7,321 | 54.6% | 6,149 | 45.9% | 0 | 0.0% | 1,172 | 8.7% | 4,108 | 58.0% |
| 40071 Taylorsvill | e l | 12,409 | 2.2% | 8,125 | 65.5% | 7,663 | 61.8% | 0 | 0.0% | 462 | 3.7% | 3,759 | 60.6% |
| 40204 Louisville | | 12,227 | 2.1% | 8,708 | 71.2% | 8,402 | 68.7% | 13 | 0.1% | 293 | 2.4% | 4,092 | 67.5% |
| 40217 Louisville | | 10,776 | 1.9% | 7,236 | 67.1% | 6,854 | 63.6% | 13 | 0.1% | 369 | 3.4% | 3,341 | 62.4% |
| 40243 Louisville | | 9,397 | 1.6% | 6,152 | 65.5% | 6,006 | 63.9% | 6 | 0.1% | 140 | 1.5% | 3,150 | 62.4% |
| 40242 Louisville | | 8,554 | 1.5% | 5,832 | 68.2% | 5,595 | 65.4% | 10 | 0.1% | 227 | 2.7% | 2,845 | 62.6% |
| 40118 Fairdale | | 7,878 | 1.4% | 4,927 | 62.5% | 4,678 | 59.4% | 0 | 0.0% | 249 | 3.2% | 2,291 | 56.5% |
| 40067 Simpsonvi | lle | 4,832 | 0.8% | 2,868 | 59.4% | 2,757 | 57.1% | 0 | 0.0% | 111 | 2.3% | 1,248 | 48.7% |
| 40026 Goshen | | 4,330 | 0.8% | 3,272 | 75.6% | 3,212 | 74.2% | 5 | 0.1% | 55 | 1.3% | 1,530 | 69.7% |
| 40023 Fisherville | | 4,293 | 0.8% | 2,862 | 66.7% | 2,758 | 64.2% | 0 | 0.0% | 104 | 2.4% | 1,272 | 59.7% |
| 40150 Lebanon J | unction | 3,691 | 0.6% | 2,270 | 61.5% | 2,178 | 59.0% | 1 | 0.0% | 91 | 2.5% | 1,032 | 56.1% |
| 40057 Pleasurevi | lle | 2,653 | 0.5% | 1,774 | 66.9% | 1,684 | 63.5% | 0 | 0.0% | 90 | 3.4% | 884 | 66.6% |
| 40056 Pewee Va | ley | 2,608 | 0.5% | 1,816 | 69.6% | 1,733 | 66.4% | 6 | 0.2% | 77 | 3.0% | 895 | 65.0% |
| 40076 Waddy | | 2,542 | 0.4% | 1,705 | 67.1% | 1,657 | 65.2% | 0 | 0.0% | 48 | 1.9% | 780 | 61.7% |
| 40109 Brooks | | 2,340 | 0.4% | 1,441 | 61.6% | 1,331 | 56.9% | 0 | 0.0% | 110 | 4.7% | 723 | 61.8% |
| 40046 Mount Ede | n | 1,641 | 0.3% | 1,129 | 68.8% | 1,028 | 62.6% | 0 | 0.0% | 101 | 6.2% | 529 | 65.6% |
| 40003 Bagdad | | 1,640 | 0.3% | 1,104 | 67.3% | 1,064 | 64.9% | 0 | 0.0% | 40 | 2.4% | 552 | 68.3% |
| 40022 Finchville | | 745 | 0.1% | 472 | 63.4% | 457 | 61.3% | 0 | 0.0% | 15 | 2.0% | 209 | 56.2% |
| 40077 Westport | | 659 | 0.1% | 443 | 67.2% | 427 | 64.8% | 0 | 0.0% | 16 | 2.4% | 217 | 64.4% |
| 40292 Louisville | | 598 | 0.1% | 371 | 62.0% | 342 | 57.2% | 0 | 0.0% | 29 | 4.8% | 177 | 62.1% |
| 40010 Buckner | | 465 | 0.1% | 324 | 69.7% | 317 | 68.2% | 2 | | 5 | 1.1% | 131 | 58.2% |
| 40041 Masonic H | ome | 243 | 0.0% | 133 | 54.7% | 131 | 53.9% | 0 | 0.0% | 2 | 0.8% | 61 | 45.2% |
| Total | | 571,143 | 49.8% | 380,561 | 66.6% | 363,485 | 63.6% | 534 | 0.1% | 16,542 | 2.9% | 183,240 | |

Source: Truven Health Analytics

Service Area Defined: Bullitt, Jefferson, Oldham, Shelby and Spencer Counties in Kentucky

Removed Louisville Zip Codes: 40202, 40203, 40208, 40209, 40210, 40211, 40214, 40215, 40216, 40218, 40258. 40272

The north portion of Jefferson County is above average in household income and home value. Shelby County and the central portion of Jefferson County are all below average socioeconomically. The rest of the service area falls into the average categories for household income and home value. The % down column represents what proportion each ZIP code is of the whole.



Households by Socioeconomic Characteristics Area: Licensed Area 7-6-15 2019 ZIP Code Report

| Ranked on 2019 Households (Desc) | | | | | | | | | |
|----------------------------------|------------------|---------|-------|-----------|------------|-----------|--|--|--|
| | | | | 2019 | Median | | | | |
| | | 2019 | Total | Median | Age of | Median | | | |
| | | House | holds | нн | Total | Home | | | |
| ZIP Code | ZIP City Name | Count | %Down | Income | Population | Value | | | |
| 40299 | Louisville | 16,750 | 5.9% | \$81,850 | 40.8 | \$240,568 | | | |
| 40291 | Louisville | 15,744 | 5.5% | \$74,115 | 39.2 | \$201,014 | | | |
| 40219 | Louisville | 15,552 | 5.5% | \$47,874 | 38.0 | \$139,695 | | | |
| 40229 | Louisville | 15,071 | 5.3% | \$60,617 | 37.3 | \$149,889 | | | |
| 40220 | Louisville | 14,885 | 5.2% | \$63,506 | 40.9 | \$186,317 | | | |
| 40207 | Louisville | 14,188 | 5.0% | \$82,071 | 42.9 | \$323,671 | | | |
| 40165 | Shepherdsville | 13,262 | 4.7% | \$66,930 | 40.4 | \$181,797 | | | |
| 40241 | Louisville | 13,226 | 4.6% | \$85,136 | 41.2 | \$284,759 | | | |
| 40245 | Louisville | 12,826 | 4.5% | \$115,085 | 39.4 | \$364,283 | | | |
| 40065 | Shelbyville | 11,946 | 4.2% | \$61,635 | 38.3 | \$188,847 | | | |
| 40205 | Louisville | 10,512 | 3.7% | \$81,733 | 42.5 | \$305,610 | | | |
| 40223 | Louisville | 10,401 | 3.7% | \$84,337 | 42.3 | \$292,026 | | | |
| 40222 | Louisville | 10,150 | 3.6% | \$72,533 | 42.6 | \$284,362 | | | |
| 40206 | Louisville | 9,781 | 3.4% | \$52,100 | 40.3 | \$249,911 | | | |
| 40047 | Mount Washington | 8,560 | 3.0% | \$74,122 | 40.2 | \$196,817 | | | |
| 40014 | Crestwood | 7,699 | 2.7% | \$101,902 | 40.8 | \$290,749 | | | |
| 40031 | La Grange | 7,570 | 2.7% | \$72,814 | 38.8 | \$236,751 | | | |
| 40228 | Louisville | 7,525 | 2.6% | \$67,484 | 39.3 | \$174,007 | | | |
| 40204 | Louisville | 7,522 | 2.6% | \$54,356 | 40.3 | \$222,416 | | | |
| 40213 | Louisville | 7,431 | 2.6% | \$45,689 | 37.7 | \$144,149 | | | |
| 40059 | Prospect | 7,299 | 2.6% | \$138,405 | 44.9 | \$467,226 | | | |
| 40212 | Louisville | 6,821 | 2.4% | \$29,653 | 35.2 | \$70,908 | | | |
| 40217 | Louisville | 6,095 | 2.1% | \$51,301 | 38.4 | \$155,647 | | | |
| 40071 | Taylorsville | 5,541 | 1.9% | \$73,717 | 42.7 | \$232,488 | | | |
| 40243 | Louisville | 5,015 | 1.8% | \$74,523 | 45.5 | \$246,674 | | | |
| 40242 | Louisville | 4,653 | 1.6% | \$66,066 | 39.8 | \$220,187 | | | |
| 40118 | Fairdale | 3,936 | 1.4% | \$52,165 | 36.7 | \$126,730 | | | |
| 40067 | Simpsonville | 2,056 | 0.7% | \$85,891 | 37.5 | \$280,600 | | | |
| 40023 | Fisherville | 1,895 | 0.7% | \$98,295 | 44.3 | \$320,984 | | | |
| 40026 | Goshen | 1,879 | 0.7% | \$114,736 | 41.1 | \$288,986 | | | |
| 40150 | Lebanon Junction | 1,722 | 0.6% | \$60,890 | 45.1 | \$158,759 | | | |
| 40057 | Pleasureville | 1,274 | 0.4% | \$56,838 | 42.2 | \$140,625 | | | |
| 40056 | Pewee Valley | 1,201 | 0.4% | \$83,422 | 42.5 | \$276,042 | | | |
| | Waddy | 1,196 | 0.4% | | 43.7 | \$199,871 | | | |
| | Brooks | 1,119 | 0.4% | \$60,523 | | \$173,640 | | | |
| 40003 | Bagdad | 746 | 0.3% | \$71,857 | 43.6 | \$190,179 | | | |
| 40046 | Mount Eden | 745 | 0.3% | \$66,442 | 42.3 | \$187,175 | | | |
| 40022 | Finchville | 340 | 0.1% | | | \$295,977 | | | |
| | Westport | 305 | 0.1% | \$74,224 | | \$254,598 | | | |
| | Buckner | 190 | | \$120,238 | | \$392,553 | | | |
| 40041 | Masonic Home | 126 | 0.0% | \$58,000 | | \$500,000 | | | |
| 40292 | Louisville | 23 | 0.0% | | 19.2 | \$0 | | | |
| Total | | 284,778 | | \$73,760 | | \$234,226 | | | |
| | | | | | | | | | |

Source: Truven Health Analytics

Service Area Defined: Bullitt, Jefferson, Oldham, Shelby and Spencer Counties in Kentucky

Removed Louisville Zip Codes: 40202, 40203, 40208, 40209, 40210, 40211, 40214, 40215, 40216, 40218, 40258, 40272



Mortality

The following table shows mortality rates by several leading causes of death in each county:

| BH Louisville | | | | | | | |
|--|---------|-----------|--------|--------|---------|-------|-------|
| Age Adjusted Mortality Rates 2015-2019 | Bullitt | Jefferson | Oldham | Shelby | Spencer | КҮ | USA |
| Total | 767.5 | 881.7 | 711.2 | 754.6 | 854.7 | 924.7 | 726.3 |
| Coronary Heart Disease | 187.7 | 225.2 | 184.9 | 193.8 | 247 | 255.4 | 218.6 |
| Cancer | 167.2 | 174.6 | 151.1 | 171.8 | 163.8 | 190.9 | 156.4 |
| COPD & Pneumonia | 88.1 | 86.6 | 66.3 | 79 | 110.5 | 104.4 | 70.2 |
| Accidents | 87 | 102.1 | 56.9 | 77 | 85.8 | 95.7 | 70.2 |
| Stroke | 58.8 | 68.9 | 66.3 | 57.2 | 53.4 | 62.7 | 55.1 |
| Mental and behavioural disorders | 49.7 | 61.5 | 64.1 | 53.9 | 65.1 | 51.2 | 34.5 |
| Diabetes | 34.2 | 38.3 | 33.1 | 29.6 | 34.4 | 43.5 | 33.0 |
| All Other Causes | 81.5 | 124.5 | 76.7 | 78.9 | 48.1 | 120.8 | 88.2 |
| Significantly Below KY Rates | | | | | | | |
| Significantly Above KY Rates | | | | | | | |
| Source: wonder.cdc.gov CDC Mortality Rates for 201 | 5-2019 | | | | | | |

These rates are age-adjusted and signify the number of persons who expired per 100,000 population. The numbers in green are significantly below the Kentucky rates, while the numbers shown in red are significantly higher. These may indicate areas that are doing better (or worse) in the care of specific conditions. Jefferson County's death rate has declined compared to the CY 2018 CHNA, while the Coronary Heart Disease rate has increased compared to the CY 2015 CHNA.

The most troubling area seems to Coronary Heart Disease and Mental and behavioral disorders in Jefferson County. All other counties in the region except Bullitt have seen significant reductions in the death rates for previous problem areas. Overall, though, in most death rate causes, the service area is average or better than average in death rates.



Cancer Incidence Rates

Cancer incidence rates are from the Kentucky Cancer Registry and cover a five-year span. Jefferson, Oldham, and Spencer Counties have higher than average incidence rates for prostate cancer, while Bullitt County has a higher than average incidence rate for breast cancer. These are two cancer sites that can be screened easily, thus the higher rates may be a function of access. On the other hand, there may actually be higher numbers of people contracting cancer in these sites due to poor health behaviors or environmental hazards.

| Age Adjusted Cancer Incidence | КҮ | Jefferson | Bullitt | Oldham | Shelby | Spencer |
|-------------------------------|--------------|----------------|---------|--------|--------|---------|
| All Cancers | 519.6 | 525.5 | 550.0 | 525.5 | 516.2 | 522.6 |
| Prostate | 104.1 | 126.4 | 108.4 | 132.9 | 103.7 | 132.3 |
| Lung | 91.0 | 84.0 | 98.1 | 64.8 | 86.6 | 82.8 |
| Breast | 67.7 | 74.8 | 67.5 | 68.1 | 71.7 | 62.4 |
| Female Genitalia | 54.4 | 53.3 | 59.5 | 39.5 | 42.8 | 32.9 |
| Skin | 27.3 | 24.9 | 32.6 | 38.1 | 30.3 | 42.0 |
| Pancreas | 13.5 | 15.3 | 13.9 | 16.0 | 15.1 | 6.3 |
| All Other Causes | 161.6 | 146.8 | 170.0 | 166.1 | 166.0 | 163.9 |
| | Significantl | y Below KY Rat | es | | | |

Significantly Above KY Rates

Source: Ky Cancer Registry, cancer-rates.info/ky 2013-2017

Health Statistics and Rankings

Baptist Health Louisville collected health statistics and outcome measures from a wide variety of sources. The most recent data came from the Robert Wood Johnson County Health rankings published in 2020. The following two tables show health outcomes, health behaviors, clinical care availability, socioeconomic factors, and physical environment risks for each county in Baptist Health Louisville's service area. The rankings are based on the 120 counties in Kentucky. Oldham County has the highest overall rankings in the Commonwealth, except in its physical environment rank which is ranked at 79th in Kentucky. Bullitt, Shelby and Spencer Counties also rank very high except in physical environment related categories. Access to mental health providers is an issue in every county of the service area outside of Jefferson County. Most counties have a high teen birth rate as well as high low birth weight rankings. Jefferson County has very high rates in Premature death, sexually transmitted infections, and Violent Crime.



| | Kentucky | Jefferson (JE) | Bullitt (BI) | Oldham (OL) | | Spencer (SP) |
|---|-------------------|----------------|--------------|-------------|-------------|--------------|
| Health Outcomes | | 37 | 6 | 1 | 7 | |
| Length of Life | | 48 | 11 | 1 | 5 | |
| Premature death | 9,700 | 9,990 | 7,900 | 5,600 | 7,400 | 7,77 |
| Quality of Life | | 28 | 5 | 1 | 13 | |
| Poor or fair health | 24% | 21% | 18% | 15% | 19% | 159 |
| Poor physical health days | 5.1 | 4.4 | 4.2 | 3.7 | 4.4 | 3. |
| Poor mental health days | 5.0 | 4.3 | 4.4 | 3.9 | 4.4 | 3. |
| Low birthweight | 9% | 9% | 8% | 7% | 8% | 79 |
| Health Factors | | 47 | 21 | 1 | 14 | |
| Health Behaviors | | 47 | 18 | 1 | 4 | |
| Adult smoking | 25% | 20% | 20% | 16% | 19% | 169 |
| Adult obesity | 34% | 32% | 35% | 22% | 31% | 22 |
| Food environment index | 7.0 | 7.4 | 8.0 | 8.6 | 8.3 | 8. |
| Physical inactivity | 29% | 25% | 28% | 20% | 27% | 209 |
| Access to exercise opportunities | 71% | 91% | 74% | 94% | 74% | 949 |
| Excessive drinking | 17% | 20% | 18% | 19% | 17% | 19 |
| Alcohol-impaired driving deaths | 26% | 26% | 26% | 20% | 26% | 20' |
| Sexually transmitted infections | 433.7 | 706.1 | 214% | 170.1 | 381.7 | 170 |
| Teen births | 34 | 28 | 25 | 9 | 24 | |
| Clinical Care | 01 | -0 | 27 | 1 | 53 | 1 |
| Uninsured | 6% | 6% | 5% | 4% | 8% | 4 |
| Primary care physicians | 1,520:1 | 1,060:1 | 5,350:1 | | | 1,660 |
| Dentists | 1,540:1 | 960:1 | 3,000:1 | 2,560:1 | 2,700:1 | 2,560 |
| Mental health providers | 440:1 | 330:1 | 1,130:1 | 1,090:1 | 700:1 | 1,090 |
| Preventable hospital stays | 5,949 | 5,562 | 6.584 | | 4,683 | 3,53 |
| Mammography screening | 40% | 46% | 43% | 49% | 42% | 49 |
| Flu vaccinations | 45% | 51% | 50% | | 50% | 52 |
| Social & Economic Factors | 4370 | 86 | 22 | 1 | | |
| High school graduation | 90% | 88% | 91% | 98% | 94% | 98 |
| Some college | 62% | 69% | 58% | 76% | 57% | 76 |
| Unemployment | 4.3% | 4.1% | 4.1% | 3.3% | 3.5% | 3.5 |
| Children in poverty | 4.3% | 4.1% | 4.1% | 5% | 3.3% 14% | 5.5 |
| | 5.1 | 4.9 | 3.7 | 3.9 | 4.6 | 3 |
| Income inequality | 34% | 4.9 | 31% | 5.9 17% | 4.6 26% | 5 17 |
| Children in single-parent households Social associations | 54% 10.7 | 10.0 | 6.4 | 6.3 | 20% 9.5 | 6 |
| Violent crime | 222 | 10.0 | 122 | 82 | 9.5 118 | |
| | 93 | | | | - | 3 |
| Injury deaths | 93 | 98 | 86 | 47 | 72 | 4 |
| Physical Environment | 40.7 | 104 | 105 | 79 | 80 | 3 |
| Air pollution - particulate matter | 10.7 | 12.9 | 12.4 | 11.9 | 11.5 | 11 |
| Drinking water violations | | No | No | No | No | No |
| Severe housing problems | 14% | 15% | 11% | 8% | 14% | 80 |
| Driving alone to work | 82% | 80% | 85% | 85% | 85% | 85 |
| Long commute - driving alone | 30% | 25% | 49% | 47% | 43% | 47 |
| Source: Robert Wood Johnson, CountyHealthRankings.or | g 2020 County Ran | kings | Significan | tly Below K | Y Rate | |
| | | | 0 | | | |

Primary Data

There are four health departments responsible for the counties Baptist Health Louisville serves: Louisville Metro Public Health & Wellness (Jefferson County); the Bullitt County Health Department; the Oldham County Public Health Department; and the North Central District Health Department, which serves both Shelby and Spencer counties. The Louisville Metro Public Health & Wellness Health Equity Report 2017 proved to be valuable primary data for the committee. Oldham County health department is currently updating primary data for the 2021 CHNA report. Several members of BH Louisville leadership serve on various committees and boards throughout the community including Hospice/Hosparus, Center for Women and Families, Leadership Louisville, and various



educational school boards. Through these contacts, data resources, and public surveys, Baptist Health Louisville is soliciting primary feedback on the updated health issues confronting its service area today.

Community Healthcare Resources

There are a large number of healthcare resources in Baptist Health Louisville's service area, but they are not distributed evenly. The Baptist Health Planning Department catalogued the various types and locations of these resources.

Hospitals

There are a large number of hospitals in the service area, with 3,950 licensed acute care beds, 955 psychiatric beds, 24 chemical dependency beds, and 164 rehab beds. The table below lists all of the non-government hospitals in the service area.

| Hospital | Туре | icensed Bed Location |
|--|-------|----------------------|
| Norton Hospital/Norton Medical Pavilion/Norton Children's Hospital | ACUTE | 905 Louisville |
| Baptist Health Louisville | ACUTE | 519 Louisville |
| UofL Health - Jewish Hospital | ACUTE | 462 Louisville |
| Norton Audubon Hospital | ACUTE | 432 Louisville |
| University of Louisville Hospital | ACUTE | 404 Louisville |
| UofL Health - Peace Hospital | PSY | 396 Louisville |
| Norton Women's and Children's Hospital | ACUTE | 373 Louisville |
| Kindred Hospital Louisville | ACUTE | 337 Louisville |
| UofL Health - Mary and Elizabeth Hospital | ACUTE | 298 Louisville |
| Norton Brownsboro Hospital | ACUTE | 197 Louisville |
| Central State Hospital | PSY | 192 Louisville |
| UofL Health - Frazier Rehabilitation Institute | REHAB | 135 Louisville |
| The Brook Hospital - KMI | PSY | 98 Louisville |
| The Brook - Dupont | PSY | 88 Louisville |
| Baptist Health La Grange | ACUTE | 90 Lagrange |
| Kentucky Correctional Psychiatric Center | PSY | 97 Lagrange |
| UofL Health - Shelbyville Hospital | ACUTE | 70 Shelbyville |

Source: Kentucky Office of the Inspector General, Hospital Directory, as of 2/9/21

The University of Louisville(U of L) purchased KentuckyOne Health in November of 2020. U of L purchased Jewish Hospital, St. Mary & Elizabeth Hospital, Jewish Hospital Shelbyville, and Our Lady of Peace Psychiatric Hospital. The facility names have been changed to reflect the new ownership. Jewish held a 60-bed acute care hospital CON in Bullitt County that transferred to UoL Health. UofL Health announced plans for UofL Medical Center South to be located in Bullitt County.

Norton Healthcare has four hospitals in Jefferson County. As such, it is the largest system in the Louisville area in number of beds. It also has the only children's hospital in the state (Norton Hospital and Norton Children's Hospital are part of the same license, and its licensed beds are counted together). Norton Brownsboro Hospital opened 80 of its 197 licensed beds in August 2009 in the



northeast portion of Jefferson County. Norton has also opened a pediatric outpatient center near Norton Brownsboro, capitalizing on its Norton Children's Hospital name recognition; this center houses a 24-hour emergency department for children and a four-operating room Ambulatory Surgery Center that is supposed to be for children, but is not so limited by its CON or license. Norton also operates a cancer center on its downtown campus. Norton Healthcare also has 17 immediate care facilities located throughout Jefferson and Bullitt County as well as southern Indiana. Norton employs the most physicians of any hospital-based system in the area.

Other Licensed Facilities

According to the Kentucky Office of the Inspector General, there are now 303 (versus 294 in 2018) licensed facilities other than hospitals in Jefferson County. They include ambulatory care facilities, adult day care centers, dialysis centers, rehabilitation agencies and special medical technology clinics. There are 15 licensed facilities in Bullitt County, 16 in Oldham County, 12 in Shelby County, and 1 in Spencer County.

Health Departments

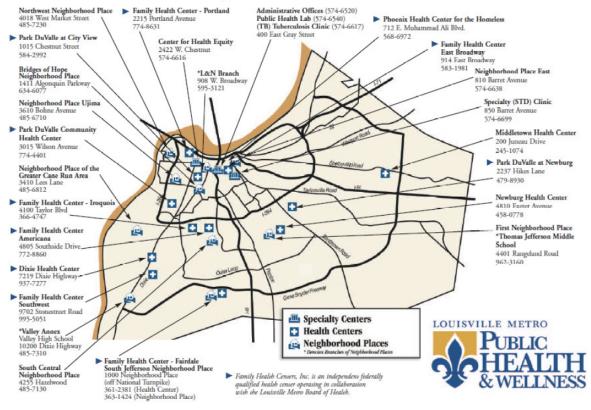
As stated earlier in this document, there are four separate health departments located in Baptist Health Louisville's CHNA service area: Louisville Metro Public Health & Wellness; Bullitt County Health Department; Oldham County Health Department; and North Central District Health Department, which serves Shelby, Spencer, Henry, and Trimble counties.

Louisville Metro Public Health & Wellness (LMPHW) provides a wide range of services to the people of Louisville, including offering health clinics across the community, providing information about Louisville's health policies and programs, inspecting eating establishments, preventing communicable diseases, and helping improve children's health. Although Louisville Metro Public Health & Wellness does not provide direct prenatal or primary care services, the department partners with community experts in the field to assure access to these services for the entire community.

The map shows the locations of the LMPHW public health clinics. Three health centers are located in Baptist Health Louisville's CHNA service area.



Public Health & Wellness Department, Family Health Center and Neighborhood Place Sites



The Oldham County Health Department's mission is to protect and promote a healthy community through education, enforcement, and empowerment. To accomplish this, they control communicable disease, encourage healthy lifestyles, provide preventative screenings, and reduce hazards in the environment. The clinic provides adult health vaccinations, cancer screenings, a cardiovascular disease program, a dental program, diabetes care, family planning services, a new parent visitation program called HANDS, immunizations, nutrition counseling, prenatal care, smoking cessation, sexually transmitted disease prevention, teen pregnancy and sexual disease counseling, tuberculosis screening, and well child exams, and administers the Women/Infant/Children (WIC) nutrition program for the county.

The North Central District Health Department and the Bullitt County Health Department provide similar services.



Physicians

Baptist Health conducted a primary care strategic plan in 2018, including a physician manpower study that counts the number of physicians in its service area as defined by Stark II regulations, which is slightly different from the CHNA service area. This plan guides Baptist Health Louisville to recruit and/or employ primary care to the area. The plan will be adjusted over time as strategic plans are implemented and patient access locations are opened throughout the service area.

Committee Discussion

During the Community Health Needs Assessment Committee meeting, members expressed their thoughts about several health concerns in the area and where Baptist Health Louisville should concentrate its resources over the next three years. The committee included senior hospital leadership and specific department directors.

After studying the primary and secondary data, the committee discussed the issues. The committee agreed that the results of primary data along with data collected by community partners would be beneficial in highlighting the most pressing needs of the community. Comparing primary data from the survey conducted in 2018 to the results of the survey in 2021 did highlight areas of concern. There were noted increases in the number of people who have been directly impacted individually or family members, friends by mental health issues as well as opioid use. Obesity ranked high as in the last assessment in both primary and secondary data sources. Cancer rates for prostate remain high in the service area as well.

The committee members briefly discussed the services Baptist Health Louisville already provides as well as goals to improve access for outpatient mental health wellness programs. Secondary data sources supported the issues of mental health and opioid abuse. The committee agree that both obesity and cancer are areas of concern that can be addressed through preventative screenings and other support services.

Prioritized Health Issues

The committee identified a total of six community health issues. Using a voting methodology, the team then identified the top four the hospital will focus on over the next three years. They are:

- Mental Health Services
- Health Equity Heart Disease
- Preventative Health Screenings
- Opioid Reduction
- Maternal Child Health



The other two issues identified are obesity and diabetes. The consensus of the team that the focus on Preventative screenings will have an impact on both obesity and diabetes.

Mental Health Services was the top community need according to the final tally of committee votes. Mental Health issues and access to care has become a top need in the community as a well as nationally. Mental Health has a significant impact on other health issues, such as obesity, substance abuse disorders including alcohol and drugs as well as many other social determinates of health. The combined efforts of medical professionals, schools, churches and government agencies we will be successful in educating and engaging individuals in caring for themselves. Kentucky has a higher suicide rate than the United States, the suicide rate for Jefferson County is almost equal to that of the state.

Preventable Health Screenings will be made available online as well as through community partners. In review the data there were several health needs that the committee agreed can be identified early to prevent long term health issues such as: high blood pressure/heart disease, lung screenings and colorectal screenings.

Opioid abuse has become an epidemic across the country. The committee chose opioid abuse as a community need in 2018. Building on the work that has been done in the past 3 years BH Louisville will continue to focus on ways to prevent further opioid use as well as support services for individuals experiencing addiction. Similar to mental health issues, opioid abuse has an impact on overall health and can lead to other co-morbidities. Locally the percentage of individuals responding to the survey who have been or know someone who has been impacted by opioid abuse rose by over 20% compared to the last CHNA survey. In addition, the service area is not experiencing a decrease in drug-addicted newborns who must be sent to neonatal intensive care units to treat withdrawal symptoms.

Looking at secondary data as well as data from Louisville Metro Public Health and Wellness, Maternal Child Health was identified as a high priority need. Low birth weight, teen births, and children in single parent households, along with high infant mortality rates are issues effecting the primary service area.

Both Cancer and Obesity were identified as needs during the previous assessment. BH Louisville implemented Cancer screenings, online screening tools and nutrition services through diabetes management to combat these issues. The work that has been implemented in the past three years will continue and grow over the next three years.

Communications Plan

The IRS guidelines for a Community Health Needs Assessment call for making the results of the process widely available. To meet this requirement, Baptist Health Louisville will publish this



document on its website and make hard copies available to the public upon request. These results will be incorporated into Baptist Health's annual IRS tax form 990 submission.

Conclusions

Baptist Health Louisville will continue to use this Community Health Needs Assessment to allocate resources to improve the health of its service area. The committee will be working over the next three years to implement the action items outlined in the Strategic Implementation Plan and assess, via the identified key measures, our success.

Strategic Implementation Plan

The strategic implementation plan is outlined by each prioritized health need, with a goal(s) for each need, and specific strategies to meet those goals.



Mental Health Services

| Identified Health Need: Mental Health Services | | | | | | | | | | | | |
|--|--|---|--|------------------------|--|--|--|--|--|--|--|--|
| Goal 1: Impr | Goal 1: Improve access to behavioral health services. | | | | | | | | | | | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) | | | | | | | | |
| 1.1 Expand In- Person Services | For those patients not comfortable receiving behavioral health services virtually or who do not have the option to access virtual care, expand in-person behavioral health services by: 1. Adding behavioral health providers (like social workers) to existing primary care practices. 2. Designing freestanding behavioral health clinics with a psychiatrist/psychologist, advanced care provider, and social worker. 3. Offering service line specific support groups, including groups focused on new mothers and patients with cardiac conditions. | For each action item, the evaluation plan is: 1. Onboard behavioral health staff for primary care offices by end fiscal year 2022. Track the number of patients seen by these staff. 2. Identify locations for freestanding clinics, allocate expenses for space renovation, and begin seeing patients. Track the number of patients seen at freestanding clinics. 3. Provide the space for support groups and staff to support and led groups. Track for participation in groups. | Baptist Health Medical Group System Behavioral Health Service Line Leaders | TBD | | | | | | | | |
| 1.2 Expand Virtual Health | When in-person behavioral health services are not available, provide access to behavioral health through virtual care. | Track the number of number of patients receiving behavioral health services through virtual care. | Baptist Health Medical Group System Behavioral Health | TBD | | | | | | | | |



| 1.3 Develop Community Partnerships | Recognizing that community behavioral health needs extend beyond current patients, partner with community organizations that can provide different/additional resources to the community. | Evaluation plans will be flexible to depend on services offered by the community partner. This may include providing materials, expert speakers, space for support groups, physician privileges at Baptist Health hospitals to allow for consults, etc. Track outcomes of partnerships. | System Behavioral Health Hospital Behavioral Health | TBD |
|--|--|---|--|------------------------|
| Goal 2: Increa | se education on mental hea | Ith to reduce stigma. | | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 2.1 Add Behavioral Health Online Risk Assessments | Add behavioral health risk assessments for anxiety and depression on hospital website. Presenting these risk assessments for mental health in the same manner as physical health conditions improves perception that mental health is as important as physical health. Add phone number for National Suicide Hotline on the landing page for the behavioral health assessments. | Track the number of assessments completed, including those who are contacted by a BH Health provider as follow-up. | Digital Marketing System Behavioral Health | (none) |



| 2.2 Suicide Awareness | To cultivate dialogue on suicide awareness, continue messaging and campaigns every September during national Suicide Prevention Awareness month. Where possible, work with in-person teams to implement initiatives like "Chalk the Walk" to raise awareness and reduce stigma. | Track the types of communication on suicide awareness. | Digital Marketing System Behavioral Health Marketing | National Alliance on mental illness (NAMI) |
|--|---|---|---|--|
| 2.3 Community Education at Events | Provide education to community about behavioral health influences, like stress and anxiety. At community events, present mental health as important as physical health by providing materials and talking to community members. | Track the number of events where information on behavioral health is provided. | Hospital Behavioral Health | TBD |
| 2.4 Internal Education | Educate providers and staff (including those outside behavioral health) on behavioral health services provided by the system and what community resources available to patients. | Track the number of practices educated on behavioral health resources and develop a plan for ongoing education on resources. | System Behavioral Health Hospital Behavioral Health | (none) |



Health Equity – Heart Disease

| Identified Health Need: Heart Disease |
|---------------------------------------|
|---------------------------------------|

| Goal 1: Partne patients. | er with community based or | ganization Have a Heart Clir | ic to provide services t | o underserved |
|----------------------------|--|---|--|---------------------|
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 1.1 Clinical Support | Identify clinical support needs for cardiovascular care clinic that provides care regardless of a patient's ability to pay or their insurance coverage. | Hire a nurse practitioner to work with cardiologist at Have a Heart Clinic. Track the number of patients seen at clinic. | Baptist Health Louisville Administration | Have a Heart Clinic |
| 1.2 Screenings | Offer in-person cardiovascular screenings in partnership with Have a Heart Clinic. Events will be held in underserved communities. Provide focused education on healthy eating habits & cardiovascular health and provide community members information on options available to them for access to care and transportation. | Track number of events held, total number of assessments completed, including total number of high risk assessments, and total number of community members that received any form of education on the social determinants of health. | Baptist Health Louisville Administration | Have a Heart Clinic |
| | | | | |
| | de education on heart healt | | | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 2.1 | Offer heart health | Track the number of | Digital Marketing | (none) |
| Online Risk Assessments | assessment on the hospital website to provide information about a patient's risk of developing cardiovascular disease. | assessments completed, including the percentage scoring as high-risk who are contacted by a BH Health provider. | | |



| Goal 3: Provi | de education and care arou | nd heart disease through a | lens of improving healt | h equity. |
|---|---|--|--|---------------------|
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 3.1 Community Education & Events | Offer Heart Failure Winterization Clinic in Fall 2022. Focused on disease management during times where inclement weather and road conditions could prevent patients from making it to provider visits and other entities for care. | Conduct a community event at the hospital and track participation. | Baptist Health Louisville Cardiovascular Team and Supporting Departments | Various vendors |

Preventative Health Screenings

| Ider | ntified Health N | leed: Preventat | ive Health Sc | reenings |
|---------------------------------------|---|---|-------------------------|---|
| | | | | |
| Goal 1: Increa | ase the number of screenin | gs obtained for early cancer | detection. | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 1.1 Lung Cancer Screenings | Increase the number of low-dose CT scans. | Track the number of screenings and report annually, using data from Baptist Health hospitals and the CIN. | Decision Support CIN | American College of Surgeons' Commission on Cancer |
| 1.2 Breast Cancer Screenings | Increase the number of mammograms. | Track the number of screenings and report annually, using data from Baptist Health hospitals and the CIN. | Decision Support CIN | American College of Surgeons' Commission on Cancer |
| 1.3 Colon Cancer Screenings | Increase the number of colonoscopies. | Track the number of screenings and report annually, using data from Baptist Health hospitals and the CIN. | Decision Support CIN | (none) |



| Goal 2: Educa | ite community members on | relative health risks that m | ay indicate need for fu | rther screening(s). |
|--|--|--|--|---------------------|
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 2.1 Online Risk Assessments | Offer health risk assessments on the hospital website to provide information about a patient's risk of certain health conditions. Health assessments that may lead to further screenings that are not already mentioned in the SIP include: acid reflux, joint pain, healthy weight, stroke, and weight loss surgery. | Track the number of assessments scored as high-risk. These are the patients who are contacted by a BH Health provider and may receive recommendations for further preventable health conditions screenings. | Digital Marketing | (none) |
| 2.2 Add Behavioral Health Online Risk Assessments (also listed as a strategy for Mental Health) | Add behavioral health risk assessments for anxiety and depression on hospital website. Presenting these risk assessments for mental health in the same manner as physical health conditions improves perception that mental health is as important as physical health. Add phone number for National Suicide Hotline on the landing page for the behavioral health assessments. | Track the number of assessments completed, including those who are contacted by a BH Health provider as follow-up. | Digital Marketing System Behavioral Health | (none) |
| 2.3 Online Risk Assessments for Heart Health (also listed as a strategy for Heart Disease) | Offer heart health assessment on the hospital website to provide information about a patient's risk of developing cardiovascular disease. | Track the number of assessments completed, including the percentage scoring as high-risk who are contacted by a BH Health provider. | Digital Marketing | (none) |



| Goal 3: Impro | ove efficiency of patient-fac | ing processes to expedite so | creenings. | |
|---|---|---|------------------------------|------------------------------------|
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 3.1 Electronic Patient Packets | Offer patients the opportunity to complete an electronic patient packet for colonoscopies | Track the patients who complete their forms electronically. This speeds up the process of | Gastroenterology Practice | (none) |
| | instead of mailing the forms. | receiving a colonoscopy by about three weeks. | | |
| Goal 4: Supp | ort organizations that prom | ote early detection of cance | er. | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 4.1 Colon Cancer Prevention Project | Partner with local nonprofit dedicated to eliminating preventable colon cancer death by promoting timely screenings. | Track efforts of partnership, including support of and engagement with their community efforts. | Gastroenterology Practice | Colon Cancer Prevention Project |

Opioid Reduction

| | Identified H | ealth Need: Op | ioid Reductic | n |
|--------------------------|--|--|--|---------------------|
| Goal 1: Reduc | e the number of opioids re | aching the streets. | | - |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 1.1 Opioid | Align work of the Louisville Opioid | Track for continued alignment with system- | Baptist Health Louisville Opioid | (none) |
| Stewardship Committee | Stewardship Committee with the system | level committees. | Stewardship Committee | |
| Alignment | committee, ultimately reporting to the system | | Baptist Health | |
| | Pharmacy and Therapeutics Committee | | System Opioid Stewardship | |
| | for greatest impact of efforts. | | Committee | |
| | | | System Pharmacy and Therapeutics Committee | |



| 1.2 | Track and monitor trends | Continue to monitor | Opioid Stewardship | (none) |
|---|--|--|---|---------------------|
| Track and | in the Emergency | trends to ensure | Committee | |
| Monitor | Department and for | compliance with best | | |
| Opioid | select surgical | practices for opioid | | |
| Prescriptions | procedures. | prescription that | | |
| - | | discourage overuse. | | |
| 1.3 | List a goal on the Clinical | Comply with <18% as a | Opioid Stewardship | (none) |
| Clinical | Impact Scorecard. | goal for Discharge Opiate | Committee | |
| Outcomes | | Prescriptions per Month. | | |
| Impact | | | | |
| 1.4 | Offer a prescription drop | Track for utilization of | Opioid Stewardship | (none) |
| Prescription | box in the Retail | drop box. | Committee | (none) |
| Take Back | | | Committee | |
| TAKE DACK | Pharmacy lobby for | | Dharmaou | |
| | anyone to drop off | | Pharmacy | |
| | unused and expired | | | |
| | prescription medications. | | | |
| | | | | |
| Goal 2: Provid | e patient and provider educ | cation on opioids. | | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| | | | | |
| 2.1 | Provide Baptist Health- | Track for compliance | Opioid Stewardship | (none) |
| 2.1 Patient | Provide Baptist Health- branded brochure to all | Track for compliance providing this education | Opioid Stewardship Prescription | |
| | | | | |
| Patient | branded brochure to all | providing this education | | |
| Patient Education | branded brochure to all patients receiving an | providing this education to all patients receiving | Prescription | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from | providing this education to all patients receiving an opioid prescription | Prescription Pharmacy | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription Pharmacy Emergency | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription Pharmacy Emergency | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription Pharmacy Emergency | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription Pharmacy Emergency | |
| Patient Education | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address | providing this education to all patients receiving an opioid prescription from Baptist Health | Prescription Pharmacy Emergency | |
| Patient Education Brochure 2.2 | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |
| Patient Education Brochure | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. | Prescription Pharmacy Emergency Department | (none) |
| Patient Education Brochure 2.2 Provider | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they become available. | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |
| Patient Education Brochure 2.2 Provider | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they become available. Encourage activities that | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |
| Patient Education Brochure 2.2 Provider | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they become available. Encourage activities that count toward credit for | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |
| Patient Education Brochure 2.2 Provider | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they become available. Encourage activities that count toward credit for HB 1 education that | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |
| Patient Education Brochure 2.2 Provider | branded brochure to all patients receiving an opioid prescription from Baptist Health. Brochure includes information on opioid overdoses, Good Samaritan laws, and naloxone use to prevent, recognize, and address overdoses. Offer educational opportunities as they become available. Encourage activities that count toward credit for | providing this education to all patients receiving an opioid prescription from Baptist Health Louisville. Track educational | Prescription Pharmacy Emergency Department Opioid Stewardship | (none) |



| Goal 3: Provi | de alternatives for patient p | oan control to reduce use of | f opioids. | |
|-------------------|--|---|--|---------------------|
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| 3.1 TENS Units | Make TENS units available for use in the Emergency Department to reduce dependence on opioids for patient pain control. | Track for use of TENS units and connection to reduction in opioid prescriptions. | Emergency Department Opioid Stewardship Committee | (none) |

Maternal and Child Health

Identified Health Need: Maternal/Child Health

Goal 1: Provide education to mothers and other infant caregivers to influence factors that will reduce infant morbidity and mortality.

| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
|------------|---------------------------|--|----------------------|---------------------|
| 1.1 | Use discharge | Ensure 100% of new | Motherhood | Louisville Metro |
| Safe Sleep | instructions to educate | mothers are provided | Connection | Department for |
| - | mothers and other | with safe sleep | | Public Health and |
| | caregivers on safe infant | recommendations in | Labor/Delivery | Wellness (LMPHW) |
| | sleep practices. | discharge instructions. | nurses | |
| | | | | Cribs for Kids |
| | Work with LMPHW to | Nurses in appropriate | Mother/Baby nurses | |
| | provide pack & plays to | areas will receive annual | | Health insurance |
| | mothers needing a safe | education module to | NICU nurses | companies |
| | place for their babies to | ensure understanding of | | |
| | sleep. | recommendations. | | |
| | | Dovious wove to tast for | | |
| | | Review ways to test for efficacy of safe sleep | | |
| | | education for infant | | |
| | | caregivers. | | |
| 1.2 | During pre-natal office | Track the number of | Motherhood | StrongWell |
| Smoking | visits, providers | patients for whom | Connection Program | |
| Cessation | document smoking | smoking cessation | | |
| | status in the chart. | information is provided. | Baptist Health | |
| | Providers educate | | Medical Group | |
| | mothers on effect of | | Providers | |
| | smoking on infant health | | | |
| | and provide smoking | | | |
| | cessation information via | | | |
| | the after-visit summary. | | | |



| 1.3 SUD Bundle | Develop substance use disorder bundle to establish a uniform process of identification and intervention for mothers with SUD and their newborns who have been exposed. | Track the number of patients for whom the bundle will direct care. | Labor/Delivery, Mother/Baby, and NICU nursing leadership | Kentucky Perinatal Quality Collaborative (KyPQC) Alliance for Innovation on Maternal Health |
|--|---|---|--|---|
| | Begin the process to incorporate a universal validated Opioid Use Disorder (OUD) screening tool for all patients prenatally and admitted to Labor/Delivery. | Track the percentage of patients screened for OUD. | | findhelpnowKY.org |
| | | | | |
| | | | | |
| | ment post-partum hospital | | | |
| Strategy | Action Plan | Evaluation Plan | Internal Resource(s) | External Partner(s) |
| Strategy 2.1 | Action Plan Improve rates of | Evaluation Plan Track the rates of | Internal Resource(s) Lactation | External Partner(s) Mommy Express |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding | Internal Resource(s) | |
| Strategy 2.1 | Action Plan Improve rates of | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding | Internal Resource(s) Lactation Consultants NICU nurses and | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants NICU nurses and providers | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants NICU nurses and providers | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses | |
| Strategy 2.1 Breast | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. | <i>Evaluation Plan</i> Track the rates of exclusive breast-feeding in subsequent years | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses and providers | Mommy Express |
| Strategy 2.1 Breast Feeding | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses | |
| Strategy 2.1 Breast Feeding 2.2 | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. Implement ERAS | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. Track reduced utilization | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses and providers | Mommy Express |
| Strategy 2.1 Breast Feeding 2.2 ERAS Post | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. Implement ERAS (Enhanced Recovery | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. Track reduced utilization | Internal Resource(s) Lactation Consultants NICU nurses and providers Mother/Baby nurses and providers Pharmacy | Mommy Express |
| Strategy 2.1 Breast Feeding 2.2 ERAS Post | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. Implement ERAS (Enhanced Recovery After Surgery) for | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. Track reduced utilization | Internal Resource(s)LactationConsultantsNICU nurses andprovidersMother/Baby nursesand providersPharmacyMother/Baby nurses | Mommy Express |
| Strategy 2.1 Breast Feeding 2.2 ERAS Post | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. Implement ERAS (Enhanced Recovery After Surgery) for mothers who undergo | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. Track reduced utilization | Internal Resource(s)LactationConsultantsNICU nurses andprovidersMother/Baby nursesand providersPharmacyMother/Baby nurses | Mommy Express |
| Strategy 2.1 Breast Feeding 2.2 ERAS Post | Action Plan Improve rates of mothers who exclusively breast feed. Educate nurses on charting to clarify when infants are supplemented with breast milk versus formula. Implement ERAS (Enhanced Recovery After Surgery) for mothers who undergo caesarian sections to | Evaluation Plan Track the rates of exclusive breast-feeding in subsequent years versus baseline. Track reduced utilization | Internal Resource(s)LactationConsultantsNICU nurses andprovidersMother/Baby nursesand providersPharmacyMother/Baby nursesand providers | Mommy Express |

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Appendix A – Data Sources

Health Departments

Louisville Metro Public Health & Wellness http://www.louisvilleky.gov/health/

Bullitt County Public Health Department http://www.bullittcountyhealthdept.com/

Oldham County Public Health Department http://oldhamcountyhealthdepartment.org/

North Central District Health Department (Shelby and Spencer counties) http://www.ncdhd.com/

Kentucky Department of Public Health http://chfs.ky.gov/dph/

National Sources

Robert Wood Johnson Foundation County Health Ranking and Roadmap <u>http://www.countyhealthrankings.org</u>

Centers for Disease Control and Prevention http://www.cdc.gov/

Rural Assistance Center http://www.raconline.org/states/kentucky.php

U.S. Department of Health and Human Services – *Healthy People 2020* <u>http://healthypeople.gov/2020/</u>

U.S. Department of Health and Human Services – Community Health Status Indicators <u>http://www.communityhealth.hhs.gov/homepage.aspx</u>



State Sources

CEDIK – Community & Economic Development Initiative of Kentucky <u>http://www2.ca.uky.edu/CEDIK/CountyDataProfiles</u>

Foundation for a Healthy Kentucky's Kentucky Health Facts http://www.kentuckyhealthfacts.org/

Kentucky Department of Public Health's Center for Performance Management <u>http://chfs.ky.gov/dph/CenterforPerformanceManagement.htm</u>

Kentucky Public Health Association http://www.kpha-ky.org/

Kentucky Hospital Association http://www.kyha.com/

Kentucky Office of the Inspector General <u>http://chfs.ky.gov/os/oig/</u>

Kentucky State Data Center http://ksdc.louisville.edu/

LMPHW's Policy Planning and Evaluation Services <u>http://www.louisvilleky.gov/Health/policyandplanning.htm</u>



Appendix B – 2021 Baptist Health Louisville Public Survey Instrument

1. In which county do you live?

- Bullitt
- Carroll
- Henry
- Jefferson
- Oldham
- Shelby
- Spencer
- Trimble

Other

- 2. Do you have a primary care provider?
 - Yes
 - 🔵 No
- 3. Where do you receive your medical care (select all that apply)?
 - Emergency Room
 - Health Department
 - Primary care Provider's office
 - Urgent or Express Care Clinic
 - Virtual care/Telemedicine

4. How would you describe your overall health?

- Excellent
- Good
- 🔵 Fair
- Poor



| 5. Please choose the health challenges you | face (please select all that apply). |
|--|--------------------------------------|
|--|--------------------------------------|

Alcohol overuse

Cancer

Drug addiction

Diabetes

Lung disease

Heart disease

High blood pressure

Joint pain or back pain

Mental health issues

Overweight/obesity

Stroke

I do not have any health challenges

Other

6. Are you receiving the medical care you need?

Yes

🔘 No

7. What issues prevent you from accessing the care you need (select all that apply)?

No issues prevent me from accessing the care I need

Cultural/religious beliefs

Don't know how to find doctors

Don't understand the need to see a doctor

Fear (e.g., not ready to face/discuss health problem)

Lack of availability of doctors

Language barriers

No insurance and unable to pay for the care

Transportation

____ F

Unable to pay co-pays/deductibles

| | Other | | | |
|--|-------|--|--|--|
|--|-------|--|--|--|



8. Do you have access to fresh fruits and vegetables?

| \sim | - | - | |
|--------|---|----|--|
| | e | з. | |
| | | | |

No No

- 9. Which of the following preventative procedures have you had in the past 12 months (select all that apply)?
 - Blood pressure check
 - Blood sugar check
 - Bone density test
 - Cardiovascular screening
 - Cholesterol screening
 - Colon/rectal exam
 - Dental cleaning/X-rays
 - Flu Shot
 - COVID 19 vaccine
 - Hearing screening
 - Mammogram (if female)
 - Pap smear (if female)
 - Physical exam
 - Prostate cancer screening (if male)
 - Skin cancer screening
 - Vision screening
 - None of the above
- 10. Within the last three years, have you or someone you know been affected by opioid substance abuse?
 - Yes
 - O No
- 11. Have you been diagnosed with COVID 19?
 - Yes
 - No No



12. Do you see housing as an issue in your area?

- Yes
- O No

13. What is your regular source of transportation?

| Bicycle |
|-----------------------|
| Car |
| Motorcycle |
| Public transportation |
| Walk |

| | ther |
|-------|------|
| - 1 * | ther |

14. Have either you or an immediate family member (spouse, parent grandparent, child, brother, or sister been diagnosed with any of the following health conditions (select all that apply)?

| Alcoholism |
|----------------------------|
| Anxiety |
| Arthritis |
| Autism |
| Breast Cancer |
| Cervical cancer |
| Colon cancer |
| COPD |
| COVID 19 |
| Depression |
| Diabetes |
| Drug addiction |
| Emphysema |
| Heart disease/heart attack |
| Heart failure |
| High blood pressure |
| High cholesterol |
| Liver disease |
| Lung cancer |



| LOU | ISVI | LLE |
|-----|------|-----|
|-----|------|-----|

Obesity

- Peripheral artery disease
- Prostate cancer
- Skin cancer
- Stroke

| Mana | |
|------|--|
| None | |

| | Other | | |
|--|-------|--|--|
|--|-------|--|--|

15. What type of insurance do members of your household have (select all that apply)?

- Insurance provided through your employer
- Medicare
- Medicaid
- No insurance coverage (uninsured)
- Private insurance

Other

| What is needed to | improve the health | of your family and neigh | bors (select all that apply)? |
|-------------------------------------|--------------------|--------------------------|-------------------------------|

- Free or affordable health screenings
- Healthier food
- Job opportunities
- Mental health services
- Recreation facilities
- Safe places to walk/play
- Specialty physicians
- Primary care providers
- Safe/adequate housing
- Internet access
- Insurance
- Substance abuse rehabilitation services
- Transportation
- Wellness services
- I don't know

| | Other | | | | |
|--|-------|--|--|--|--|
|--|-------|--|--|--|--|



17. Please choose all the statements that apply to you

I abuse or overuse prescription drugs

I have access to a wellness program through my employer

I eat at least five servings of fruit or vegetables per day

- I eat fast food more than once per week
- I exercise at least three times per week
- I have more than two alcoholic drinks per day
- I get a flu shot every year
- I have been vaccinated for COVID 19
- I smoke cigarettes, e cigarettes, vape or use other nicotine products
- I use illegal drugs
- I use sunscreen or protective clothing for planned time in the sun
- None of the above apply to me

18. What is your age?

0 – 14

- 0 15 17
- 0 18 24
- 25 34
- 0 35 54
- 55 -64
- 65+

19. What is your sex?

- 🔵 a. Male
- 🔵 b. Female



20. What is your annual household income?

- Less than \$15,000
- \$15,000 \$25,000
- \$25,000 \$ 50,000
- \$50,000 \$75,000
- \$75,000 \$100,000
- Over \$100,000
- 21. What is the highest level of education you have attained?
 - Less than high school
 - Some high school
 - High school degree
 - Some college/Associates degree
 - Bachelor's degree or higher

22. How would you describe your race?

- White non-Hispanic
- Black non-Hispanic
- Hispanic
- Asian & Pacific islander non-Hispanic

| Other | |
|-------|--|
| | |



Appendix C – 2018-2021 SIP Results

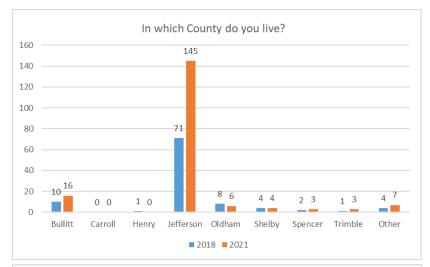
Baptist Health Louisville Strategic Implementation Plan 2018-2021

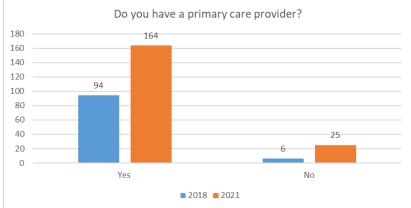
| Identified Health Needs | Goals | Results |
|-------------------------|--|--|
| Obesity | Enhance public understanding of their own obesity risk with a focus on the importance of lifestyle changes to improve health outcomes | Implemented Health Weight Survey Online Implemented Referral Program to the Diabetes Prevention program BHMG implemented assessment program for patients with a BMG >25 Attended Community Health fairs to promote health weight |
| Opioid Abuse | Equip providers with knowledge, skills, tools and attitudes to safely prescribe opioids for analgesia | Utilize Baptist Health Louisville and Baptist Health Opioid Measurement Committee to evaluate and educate providers. |
| Cancer | Enhance education and screening opportunities | Promoted BH Louisville website containing education tools and videos. Community Health Fairs promoting screens and providing education. Provided online Cancer assessment risk tool BHMG Cancer screening and referral program |

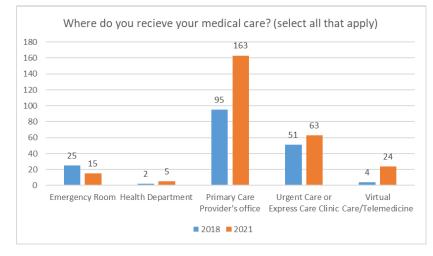
| | | 2019 | | | 2020 | | | 2021 | | | Total | |
|----------------|---------|--------|-------------------|---------|---------|-------------------|---------|--------|-------------------|---------|---------|-------------------|
| Screenings | Screens | Visits | % Pts Screened | Screens | Visits | % Pts Screened | Screens | Visits | % Pts Screened | Screens | Visits | % Pts Screened |
| BMI > 25 | 62,416 | 87,037 | 72% | 117,986 | 158,204 | 75% | 67,538 | 99,637 | 68% | 247,940 | 344,878 | 72% |
| Colonoscopy | 30,531 | 43,010 | 71% | 55,062 | 80,278 | 69% | 33,500 | 48,107 | 70% | 119,093 | 171,395 | 69% |
| Lung Screening | 5,615 | 17,656 | 32% | 9,588 | 34,074 | 28% | 6,019 | 19,819 | 30% | 21,222 | 71,549 | 30% |
| Mammogram | 14,837 | 24,339 | 61% | 32,363 | 46,933 | 69% | 16,915 | 26,435 | 64% | 64,115 | 97,707 | 66% |

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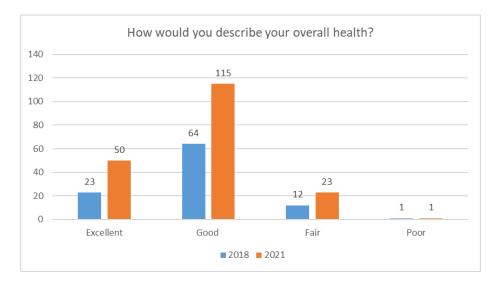
Appendix D – Baptist Health Louisville 2018 and 2021 CHNA Survey Response Comparison

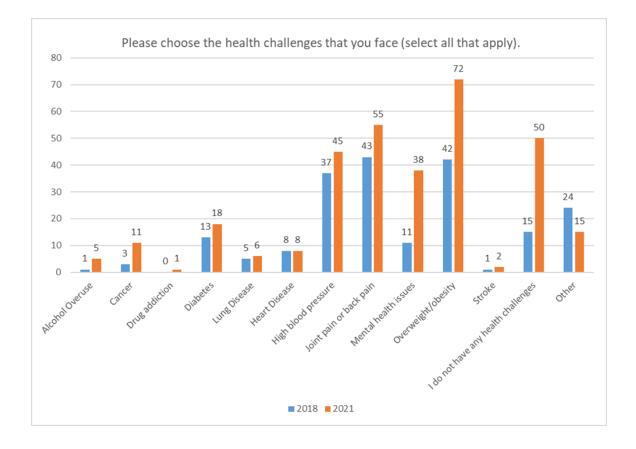




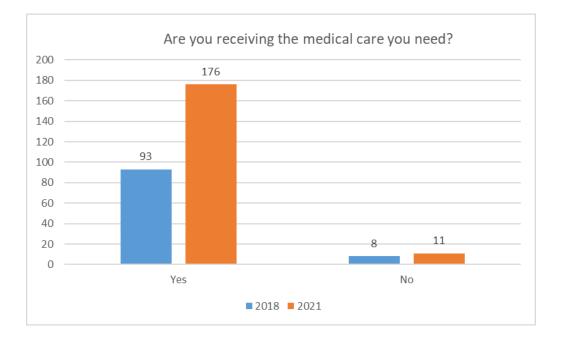


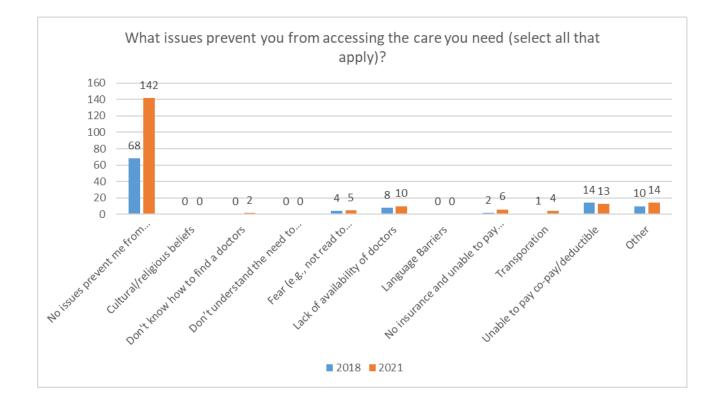












43



