



COMMUNITY HEALTH

Needs Assessment

2015



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LOUISVILLE



Community Health Needs Assessment 2015

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Community Health Needs Assessment Committee

Name	Title
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Chris Roty	President, Baptist Health LaGrange
Chuck Anderson, MD	Chief Medical Officer
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Beth Haraden	Community Nurse Educator
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Introduction

This document is an update to the 2012 Community Health Needs Assessment and Strategic Implementation Plan for Baptist Health Louisville (BHL) in Louisville, Kentucky.

Organization Description

Baptist Health Louisville, a five hundred and nineteen (519) bed tertiary acute care hospital located in the eastern part of Jefferson County, is a wholly owned subsidiary of Baptist Healthcare System. BHL opened in 1975 and expanded in 1989 when Baptist Hospital Highlands was closed and its services and beds merged with BHL. A significant addition of beds occurred in September 2008 when BHL added the Park Tower with 25% more licensed beds and 25% more surgery suites. Baptist Health Louisville provides virtually all inpatient services with the exception of transplantation and burn care. BHL has twenty-two (22) psychiatric beds and twenty-nine (29) rehabilitation beds, as well as obstetrics, eight (8) neonatal level II beds, and four hundred-sixty (460) general medical/surgical acute care beds. BHL 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; six cardiac catheterization labs; open heart surgery; chemotherapy infusion; and radiation therapy with three linear accelerators.

Baptist Healthcare System, Inc. ("BHS") owns and operates all seven of the Baptist affiliated hospitals located in the Commonwealth of Kentucky. BHS owns 1,937 licensed acute care hospital beds in Louisville, LaGrange, Lexington, Richmond, Paducah, Madisonville and Corbin and manages the 285 bed Hardin Memorial Hospital in Elizabethtown, KY. In 2015, BHS initiated an internal corporate restructure to more strategically align services. As a result, all Baptist Health employed physicians were merged under a single corporate entity reporting to BHS. Other services were also moved from the purview of the hospitals to BHS.

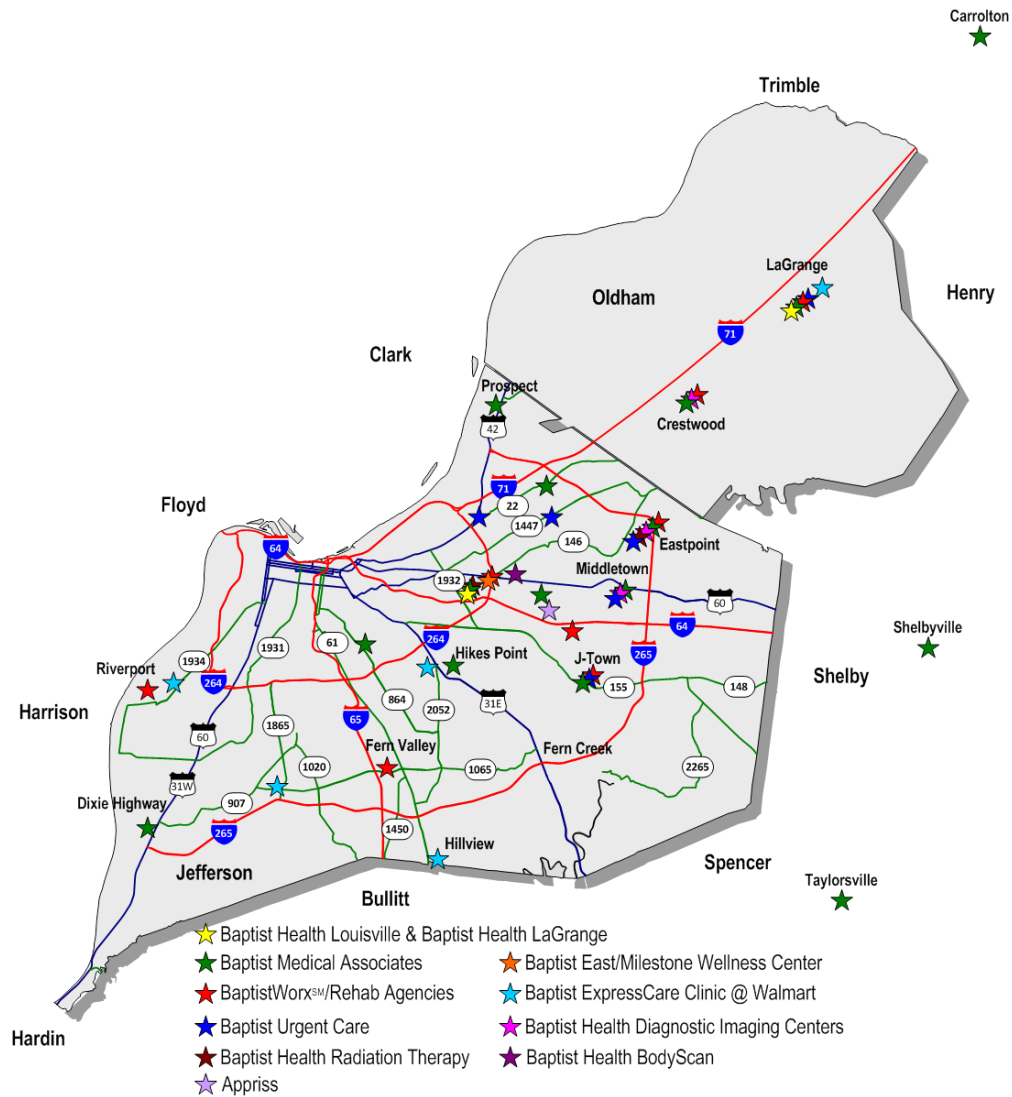


	10/1/2013 - 9/30/2014	% of Total
Eastern Jefferson County	16,011	62.8%
Bullitt County	676	2.7%
Oldham County	943	3.7%
Shelby County	924	3.6%
Spencer County	640	2.5%
Total CHNA Service Area	19,194	75.3%
* Other Areas	6,296	24.7%
Total BHE Discharges	25,490	100.0%

*Other includes over 200 counties plus the western half of Jefferson County

Source: KHA InfoSuite, 10/1/13 - 9/30/14 Discharges excluding normal newborns

Louisville Area Baptist Locations



Mission, Vision, and Values

Mission

The mission of Baptist Health Louisville is to exemplify our Christian heritage of providing quality healthcare services by enhancing the health of the people and communities we serve.

Vision

The vision of Baptist Health Louisville is to be recognized as the leading provider of quality healthcare, where patients want to receive their care, employees want to work, and physicians want to practice.

Values

Baptist Health Louisville will live out its Christ-centered mission to others and achieve its vision guided by the values of integrity, respect, stewardship, excellence and collaboration.

A BHL employee group developed the following list of definitions for each value:

Value	Definition
Respect	Honoring and holding in high regard the dignity and worth of our patients and their families, our co-workers, and the health system of which we are a part.
Integrity	Doing the right thing, adhering to our policies and being honest with each other, our patients and their families.
Collaboration	Communicating and working together for the overall good of the team, organization, patients, and community while recognizing strength in our diversity.
Excellence	Continuous commitment in excelling in what we do.
Stewardship	Preserving and protecting our human and financial resources in a manner that ensures the future expansion and development of superior healthcare services that benefit our community.

Purpose

This Community Health Needs Assessment has been done for a variety of reasons, chief among them being:

- To help meet the hospital’s mission of enhancing the health of the people and communities it serves.
- 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 what resources are available within BHL’s service area and how the hospital can coordinate activities with other agencies.



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- 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 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 tax-exempt, 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. BHL worked closely with numerous institutions, agencies, and individuals representing public health, other hospitals, and community members.

Framework

A wide variety of community resources were consulted during this update. It began with meetings between the BHS hospitals. During these meetings, updates to the 2012 CHNA were discussed.

BHL determined its service area for the project using the most recent patient origin data (CY 2014), including over 75% of its discharges in the zip codes chosen. Further information about this area is found in the section headed *Service Area*, on page 5.

There are four health departments responsible for the counties BHL 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. As in 2012, Louisville Metro Public Health & Wellness brought all the Louisville-based hospitals, hospital systems, and the Kentucky Hospital Association (KHA) together for joint meetings to assist them in the update of the public survey included in the CHNA. Both the Jefferson and Oldham County Health Departments are currently seeking public feedback via SurveyMonkey. Both Health Departments do not anticipate having analyzed data before August 2015. The Bullitt County Health Department is in the process of updating their Mobilizing for Action through Partnerships and Planning (MAPP) documents and are looking to have everything updated by March 2016. The North Central District Health Department has a detailed MAPP on their website. Through these contacts, public meetings, and public surveys BHL is soliciting primary feedback on the updated health issues confronting its service area today.



Secondary data from demographics and socioeconomic sources, Kentucky vital statistics, disease prevalence, and health indicators and statistics were updated. National, state, and local sources 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 final document was sent to the hospital and system Boards for approval.

Profile of the Community

Demographics and Socioeconomics

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

Demographics Expert 2.7
2014 Demographic Snapshot
Area: BH Lou CHNA Service Area 7-6-12
Level of Geography: ZIP Code

DEMOGRAPHIC CHARACTERISTICS									
	Selected Area		USA			2014	2019	% Change	
	Area	USA	Area	USA					
2010 Total Population	654,530	308,745,538			Total Male Population	329,462	341,056	3.5%	
2014 Total Population	674,672	317,199,353			Total Female Population	345,210	356,740	3.3%	
2019 Total Population	697,796	328,309,464			Females, Child Bearing Age (15-44)	129,114	129,494	0.3%	
% Change 2014 - 2019	3.4%	3.5%							
Average Household Income	\$78,581	\$71,320							

POPULATION DISTRIBUTION						HOUSEHOLD INCOME DISTRIBUTION					
Age Group	Age Distribution			USA 2014			2014 Household Income	Income Distribution			USA
	2014	% of Total	2019	% of Total	% of Total	HH Count		% of Total	% of Total		
0-14	127,383	18.9%	127,619	18.3%	19.3%	<\$15K	25,733	9.4%	13.3%		
15-17	26,170	3.9%	27,629	4.0%	4.1%	\$15-25K	26,787	9.8%	11.2%		
18-24	55,902	8.3%	60,376	8.7%	10.0%	\$25-50K	67,478	24.7%	24.4%		
25-34	87,728	13.0%	83,504	12.0%	13.2%	\$50-75K	50,160	18.4%	17.9%		
35-54	187,988	27.9%	183,542	26.3%	26.6%	\$75-100K	35,801	13.1%	11.9%		
55-64	90,793	13.5%	95,810	13.7%	12.6%	Over \$100K	66,937	24.5%	21.3%		
65+	98,708	14.6%	119,316	17.1%	14.2%						
Total	674,672	100.0%	697,796	100.0%	100.0%	Total	272,896	100.0%	100.0%		

EDUCATION LEVEL				RACE/ETHNICITY			
2014 Adult Education Level	Education Level Distribution			Race/Ethnicity	Race/Ethnicity Distribution		
	Pop Age 25+	% of Total	USA		2014 Pop	% of Total	USA
Less than High School	14,239	3.1%	6.0%	White Non-Hispanic	548,872	81.4%	62.1%
Some High School	28,523	6.1%	8.2%	Black Non-Hispanic	63,686	9.4%	12.3%
High School Degree	121,484	26.1%	28.4%	Hispanic	33,257	4.9%	17.6%
Some College/Assoc. Degree	138,909	29.9%	29.0%	Asian & Pacific Is. Non-Hispanic	14,600	2.2%	5.1%
Bachelor's Degree or Greater	162,062	34.8%	28.4%	All Others	14,257	2.1%	3.0%
Total	465,217	100.0%	100.0%	Total	674,672	100.0%	100.0%

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There are approximately 538,700 persons in the previously defined adult population (16+) with a labor force of 363,000. Residents are slightly wealthier and more racially and ethnically homogenous than the US as a whole. Most are employed with lower than State average unemployment (see table on the following page).



Labor Force Characteristics
Area: BH Lou CHNA Service Area 7-6-12
2014 ZIP Code Report
Ranked on 2014 Total Population 16+ (Desc)

ZIP Code	ZIP City Name	County	2014 Total Population 16+		Total Labor Force		Unemployed in Labor Force		Females in Labor Force	
			Count	%Down	Count	%Across	Count	%Across	Count	%Across
40047	Mount Washington	Bullitt	16,084	3.0%	10,762	66.9%	1,014	6.3%	5,131	61.7%
40109	Brooks	Bullitt	2,446	0.5%	1,419	58.0%	235	9.6%	648	53.0%
40150	Lebanon Junction	Bullitt	3,519	0.7%	2,181	62.0%	242	6.9%	1,022	58.9%
40165	Shepherdsville	Bullitt	26,390	4.9%	17,567	66.6%	1,613	6.1%	8,540	63.6%
40023	Fisherville	Jefferson	3,686	0.7%	2,622	71.1%	207	5.6%	1,179	64.8%
40025	Glenview	Jefferson	130	0.0%	67	51.5%	1	0.8%	27	39.7%
40059	Prospect	Jefferson	13,887	2.6%	9,050	65.2%	463	3.3%	3,918	55.0%
40204	Louisville	Jefferson	12,333	2.3%	8,816	71.5%	738	6.0%	4,060	66.7%
40205	Louisville	Jefferson	19,703	3.7%	13,678	69.4%	781	4.0%	6,585	63.2%
40206	Louisville	Jefferson	16,395	3.0%	11,180	68.2%	1,080	6.6%	5,543	65.2%
40207	Louisville	Jefferson	24,727	4.6%	16,092	65.1%	1,013	4.1%	7,569	57.1%
40213	Louisville	Jefferson	13,444	2.5%	8,859	65.9%	1,088	8.1%	4,265	61.9%
40217	Louisville	Jefferson	10,697	2.0%	6,799	63.6%	806	7.5%	3,233	60.6%
40218	Louisville	Jefferson	24,138	4.5%	15,293	63.4%	2,096	8.7%	7,703	59.7%
40219	Louisville	Jefferson	29,410	5.5%	18,882	64.2%	2,832	9.6%	8,995	58.5%
40220	Louisville	Jefferson	27,284	5.1%	18,101	66.3%	1,316	4.8%	8,861	61.1%
40222	Louisville	Jefferson	17,868	3.3%	11,550	64.6%	669	3.7%	5,539	58.0%
40223	Louisville	Jefferson	18,529	3.4%	12,383	66.8%	972	5.2%	6,178	62.3%
40228	Louisville	Jefferson	14,421	2.7%	9,991	69.3%	1,027	7.1%	4,946	65.1%
40229	Louisville	Jefferson	28,900	5.4%	20,567	71.2%	2,455	8.5%	10,016	67.6%
40241	Louisville	Jefferson	23,910	4.4%	16,725	69.9%	1,048	4.4%	8,044	63.7%
40242	Louisville	Jefferson	8,582	1.6%	5,982	69.7%	442	5.2%	2,984	65.4%
40243	Louisville	Jefferson	8,787	1.6%	5,723	65.1%	308	3.5%	2,796	59.0%
40245	Louisville	Jefferson	25,080	4.7%	17,650	70.4%	1,122	4.5%	7,946	60.1%
40291	Louisville	Jefferson	29,893	5.5%	21,354	71.4%	2,051	6.9%	10,685	68.1%
40299	Louisville	Jefferson	31,538	5.9%	22,572	71.6%	1,547	4.9%	10,664	65.1%
40010	Buckner	Oldham	464	0.1%	326	70.3%	10	2.2%	148	63.2%
40014	Crestwood	Oldham	15,867	2.9%	11,344	71.5%	618	3.9%	5,436	66.8%
40026	Goshen	Oldham	3,956	0.7%	2,952	74.6%	124	3.1%	1,415	70.4%
40031	La Grange	Oldham	18,830	3.5%	10,251	54.4%	970	5.2%	5,004	65.8%
40056	Pewee Valley	Oldham	2,496	0.5%	1,728	69.2%	184	7.4%	829	63.3%
40077	Westport	Oldham	678	0.1%	440	64.9%	39	5.8%	212	62.2%
40003	Bagdad	Shelby	1,585	0.3%	1,010	63.7%	98	6.2%	447	57.1%
40022	Finchville	Shelby	660	0.1%	346	52.4%	21	3.2%	104	31.6%
40065	Shelbyville	Shelby	22,758	4.2%	15,515	68.2%	1,309	5.8%	7,126	59.6%
40067	Simpsonville	Shelby	4,377	0.8%	2,616	59.8%	216	4.9%	1,170	50.1%
40076	Waddy	Shelby	2,279	0.4%	1,482	65.0%	151	6.6%	657	58.0%
40046	Mount Eden	Spencer	1,526	0.3%	964	63.2%	116	7.6%	425	56.7%
40071	Taylorsville	Spencer	11,443	2.1%	8,050	70.3%	746	6.5%	3,701	64.6%
Total			538,700	100.0%	362,889	67.4%	31,768	5.9%	173,751	62.3%

Demographics Expert 2.7

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The northeastern portion of Jefferson County and all of Oldham County are above average in household income and home value. Bullitt 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.



**Households by Socioeconomic Characteristics
Area: BH Lou CHNA Service Area 7-6-12
2014 ZIP Code Report
Ranked on 2014 Households (Desc)**

ZIP Code	ZIP City Name	County	2014 Total Households		2014 Median HH Income	Median Age of Total Population	Median Home Value
			Count	%Down			
40059	Prospect	Jefferson	6,355	2.3%	\$109,397	44.3	\$366,191
40025	Glenview	Jefferson	68	0.0%	\$108,333	56.6	\$437,500
40010	Buckner	Oldham	195	0.1%	\$107,986	39.3	\$321,429
40026	Goshen	Oldham	1,761	0.6%	\$97,682	40.8	\$240,190
40245	Louisville	Jefferson	11,670	4.3%	\$94,030	38.7	\$299,860
40014	Crestwood	Oldham	7,076	2.6%	\$86,836	40.8	\$252,399
40023	Fisherville	Jefferson	1,659	0.6%	\$85,926	42.8	\$241,056
40022	Finchville	Shelby	312	0.1%	\$83,696	46.9	\$230,769
40056	Pewee Valley	Oldham	1,158	0.4%	\$81,676	42.6	\$219,400
40241	Louisville	Jefferson	12,404	4.5%	\$80,503	40.8	\$251,963
40299	Louisville	Jefferson	15,723	5.8%	\$72,474	40.1	\$197,786
40223	Louisville	Jefferson	9,780	3.6%	\$70,457	42.7	\$254,190
40071	Taylorsville	Spencer	5,232	1.9%	\$68,575	40.8	\$171,865
40243	Louisville	Jefferson	4,726	1.7%	\$67,289	45.1	\$217,977
40067	Simpsonville	Shelby	1,877	0.7%	\$66,292	38.0	\$175,625
40205	Louisville	Jefferson	10,613	3.9%	\$65,816	42.3	\$240,943
40031	La Grange	Oldham	6,872	2.5%	\$64,461	38.8	\$214,807
40076	Waddy	Shelby	1,083	0.4%	\$64,432	42.9	\$166,984
40207	Louisville	Jefferson	14,304	5.2%	\$63,142	42.9	\$255,016
40003	Bagdad	Shelby	735	0.3%	\$61,645	42.5	\$151,225
40046	Mount Eden	Spencer	707	0.3%	\$61,370	40.5	\$143,902
40077	Westport	Oldham	329	0.1%	\$61,117	44.9	\$239,904
40291	Louisville	Jefferson	14,897	5.5%	\$60,855	38.6	\$169,729
40228	Louisville	Jefferson	7,159	2.6%	\$58,717	38.6	\$152,110
40242	Louisville	Jefferson	4,682	1.7%	\$58,456	39.8	\$189,812
40222	Louisville	Jefferson	10,012	3.7%	\$57,551	42.2	\$243,511
40047	Mount Washing	Bullitt	7,785	2.9%	\$57,310	38.6	\$167,731
40229	Louisville	Jefferson	13,930	5.1%	\$52,587	36.0	\$134,698
40065	Shelbyville	Shelby	10,950	4.0%	\$51,571	37.5	\$152,845
40220	Louisville	Jefferson	14,756	5.4%	\$50,519	40.6	\$171,390
40165	Shepherdsville	Bullitt	12,393	4.5%	\$47,028	39.0	\$144,240
40150	Lebanon Juncti	Bullitt	1,624	0.6%	\$45,506	43.4	\$125,295
40204	Louisville	Jefferson	7,558	2.8%	\$44,360	38.5	\$162,166
40206	Louisville	Jefferson	9,601	3.5%	\$44,311	39.1	\$187,837
40217	Louisville	Jefferson	5,981	2.2%	\$41,034	37.0	\$123,846
40109	Brooks	Bullitt	1,158	0.4%	\$40,071	45.2	\$123,347
40219	Louisville	Jefferson	15,085	5.5%	\$39,323	37.6	\$128,492
40213	Louisville	Jefferson	7,393	2.7%	\$36,721	37.1	\$121,972
40218	Louisville	Jefferson	13,293	4.9%	\$33,969	35.8	\$130,266
Total			272,896	100.0%	\$60,145	39.6	\$197,269

Demographics Expert 2.7
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Mortality

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

Age Adjusted Death Rates	Jefferson	Bullitt	Oldham	Shelby	Spencer	KY	USA
Total	966.8	661.5	555.5	759.9	712.4	984.1	809.7
Coronary Heart Disease	81	86.3	86	195.7	129.9	121.6	105.4
Cancer	193.7	177.4	162.3	168.1	192	203.5	169.3
COPD & Pneumonia	20.9	15.4	12.8	15.4	*	23.1	18.2
Accidents	34.6	30.2	26.3	17.7	33.9	42.5	27.7
Stroke	38	32.6	31.4	65.3	48.8	44.4	38
Diabetes	27.7	24.7	16.9	14.3	29	28.8	21.2
Suicide	14.6	13.6	10.5	8.9	11.6	15.2	12.8
Homicide	8.3	*	*	*	*	4.8	5.4
Motor Vehicle/100 K Miles	11.3	13.1	9.9	9.8	17.4	16.9	10.9
All Other Causes	536.7	268.2	199.4	264.7	249.8	483.3	400.8
	Significantly Below KY Rate						
	Significantly Above Ky Rate						

Source: wonder.cdc.gov CDC Compressed Mortality for 2009-2013

* Per CDC, Data is Statistically Unreliable

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. Thus, Jefferson County’s low death rate due to coronary heart disease may show that residents are seeking and receiving care quickly for cardiac-related events or they may be doing a better job of caring for themselves, thus reducing the number of cardiac-related events overall. This trend is also apparent in Bullitt and Oldham counties. When compared to the previous CHNA survey report, some of the data in this chart has undergone some significant changes. This is because the data source has changed. Previous sources were not updated past CY 2011, and so CDC data was used as it was the only source with current information.

The most troubling areas seem to be in Coronary Heart Disease in Shelby County and in cerebrovascular events (stroke) in Shelby County. All other counties in the region 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 and Oldham Counties have higher than average incidence rates for prostate cancer, while Jefferson and Bullitt Counties have higher than average incidence rates for Breast Cancer. These are two cancer sites that can be screened for the disease fairly easily, thus the higher rates may be a function of better detection. 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	Jefferson	Bullitt	Oldham	Shelby	Spencer	KY
All Cancers	531.1	552.6	530.1	498.8	543	520.4
Prostate	135.2	112.1	157.5	119.6	105.2	122.6
Lung	88.9	89.5	78.7	83.6	98.2	97.5
Breast	76.7	73.8	71.5	66	60.7	65.3
Female Genitalia	47.5	43.8	39.9	48.4	44.1	49.8
Skin	23.2	29.6	34.7	38.1	29.5	25.6
Pancreas	12.9	16.2	17.1	12.8	6.1	12.2
All Other Causes	146.7	187.6	130.7	130.3	199.2	147.4
	Significantly Below KY Rates					
	Significantly Above KY Rates					

Source: Ky Cancer Registry, cancer-rates.info/ky 2008 - 2012

Health Statistics and Rankings

BHL 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 which were published in 2015. The tables on the following two pages show health outcomes, health behaviors, clinical care availability, socioeconomic factors, and physical environment risks for each county in BHL’s service area. The rankings are based on the one hundred-twenty (120) counties in Kentucky. Oldham County has the highest overall rankings in the Commonwealth, except in its physical environment rank which is ranked at 52nd in Kentucky. Shelby and Spencer Counties also rank very high except in physical environment related categories. Obesity and excessive drinking are issues in most areas, while access to primary care is an issue in the areas outside of Jefferson County. Jefferson County has the highest violent crime rate in Kentucky.



	Kentucky	Jefferson (JE)x	Bullitt (BI)x	Oldham (OL)x	Shelby (SH)x	Spencer (SP)x
Health Outcomes			28	25	1	3
Length of Life			35	5	1	3
<u>Premature death</u>	8,768	8,250	6,615	5,430	6,097	6,820
Quality of Life			39	61	4	5
<u>Poor or fair health</u>	21%	17%	21%	9%	14%	18%
<u>Poor physical health days</u>	4.8	4.3	6.2	2.4	3.8	4
<u>Poor mental health days</u>	4.3	3.8	4.9	3.8	3.3	
<u>Low birthweight</u>	9.10%	9.50%	8.70%	8.40%	7.70%	7.90%
Health Factors			37	24	1	8
Health Behaviors			38	39	1	23
<u>Adult smoking</u>	26%	23%	28%	14%	27%	32%
<u>Adult obesity</u>	33%	33%	34%	29%	33%	34%
<u>Food environment index</u>	7.4	7.1	7.8	8.6	8.2	9
<u>Physical inactivity</u>	31%	29%	37%	26%	27%	31%
<u>Access to exercise opportunities</u>	62%	90%	59%	83%	50%	20%
<u>Excessive drinking</u>	12%	15%	11%	14%	12%	24%
<u>Alcohol-impaired driving deaths</u>	28%	32%	23%	36%	8%	10%
<u>Sexually transmitted infections</u>	381	686	222	107	488	144
<u>Teen births</u>	49	47	32	15	45	30
Clinical Care		5	22	1	21	17
<u>Uninsured</u>	17%	17%	14%	11%	17%	15%
<u>Primary care physicians</u>	1,560:1	1,100:1	5,778:1	1,956:1	2,267:1	1,931:1
<u>Dentists</u>	1,731:1	1,085:1	3,300:1	2,456:1	2,566:1	4,354:1
<u>Mental health providers</u>	852:01:00	531:01:00	1,807:1	1,365:1	1,363:1	3,483:1
<u>Preventable hospital stays</u>	103	73	92	79	64	74
<u>Diabetic screening</u>	84%	86%	88%	90%	87%	83%
<u>Mammography screening</u>	59%	65%	62%	68%	64%	61%
Social & Economic Factors		78	21	1	5	4
<u>High school graduation</u>	79%	69%	77%	86%	85%	81%
<u>Some college</u>	57%	68%	55%	71%	58%	59%
<u>Unemployment</u>	8.20%	8.60%	8.50%	6.60%	6.60%	7.60%
<u>Children in poverty</u>	27%	26%	16%	8%	19%	14%
<u>Inadequate social support</u>	20%	19%	21%	8%	13%	16%
<u>Children in single-parent households</u>	34%	42%	32%	18%	30%	21%
<u>Violent crime</u>	247	580	120	89	139	34
<u>Injury deaths</u>	79	67	55	41	50	66
Physical Environment		61	80	52	23	76
<u>Air pollution - particulate matter</u>	13.5	13.5	13.5	13.5	13.4	13.4
<u>Drinking water violations</u>	7%	0%	0%	0%	0%	0%
<u>Severe housing problems</u>	14%	15%	12%	11%	13%	8%
<u>Driving alone to work</u>	82%	82%	86%	84%	78%	87%
<u>Long commute - driving alone</u>	28%	23%	43%	42%	40%	63%

Source: Robert Wood Johnson, CountyHealthRankings.org 2015 County Rankings

Primary Data

There are four health departments responsible for the counties BHL 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. As in 2012, Louisville Metro Public Health & Wellness brought all the Louisville-based hospitals, hospital systems, and the Kentucky Hospital Association (KHA) together for joint meetings to assist them in the update of the public survey included in the CHNA. Both the Jefferson and Oldham County Health Departments are currently seeking public feedback via SurveyMonkey. Both Health Departments do not anticipate having analyzed data before August 2015. The Bullitt County Health Department is in the process of updating their Mobilizing for Action through Partnerships and Planning (MAPP) documents and are looking to have everything updated by March 2016. The North Central District Health Department has a detailed MAPP on their website. Through these contacts, public meetings, and public surveys BHL is soliciting primary feedback on the updated health issues confronting its service area today.

Community Health Care Resources

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

Hospitals

There are a large number of hospitals in the service area, with 3,880 licensed acute care beds, 666 psychiatric beds, 164 rehab beds, and 24 chemical dependency beds. The table below lists all of the non-government hospitals in the service area.

Hospital	Type	Licensed Beds	Location
Baptist Health Louisville	ACUTE	519	Louisville
Central State Hospital	PSY	192	Louisville
Frazier Rehab Institute	REHAB	135	Louisville
Jewish Hospital & St. Mary's Healthcare	ACUTE	462	Louisville
Norton Audubon Hospital	ACUTE	432	Louisville
Norton Brownsboro Hospital	ACUTE	127	Louisville
Norton Hospital/Norton Medical Pavilions/Kosair Children's Hospital	ACUTE	905	Louisville
Norton Women's and Kosair Children's Hospital	ACUTE	373	Louisville
Our Lady of Peace	PSY	396	Louisville
Saints Mary & Elizabeth Hospital	ACUTE	298	Louisville
The Brook - Dupont	PSY	88	Louisville
The Brook Hospital - KMI	PSY	98	Louisville
University Of Louisville Hospital	ACUTE	404	Louisville
Baptist Health La Grange	ACUTE	90	Lagrange
Kentucky Correctional Psychiatric Center	PSY	97	Lagrange
Jewish Hospital Shelbyville	ACUTE	70	Shelbyville

Source: Kentucky Office of the Inspector General, Hospital Directory, as of 2/24/2015

The KentuckyOne Health system includes Jewish Hospital, St. Mary & Elizabeth Hospital, Jewish Hospital Shelbyville, Frazier Rehab Hospital, and Our Lady of Peace Psychiatric Hospital. There are seven other Catholic Health Initiative (CHI) hospitals in Kentucky that now comprise KentuckyOne Health. Jewish Hospital holds a 40-bed rehab hospital CON and license in Jefferson County and holds a 60-bed acute care hospital CON in Bullitt County, neither of which has been built. Jewish Hospital also has four (4) outpatient medical centers that have a large number of diagnostic and therapeutic services with three (3) in Jefferson County and one (1) in north-central Bullitt County.

Norton Healthcare System has five 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 Kosair Children's Hospital are part of the same license and its licensed beds are counted together). Norton Brownsboro Hospital opened 80 of its 127 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 Kosair 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 Healthcare has announced that it will be converting Norton Suburban to a Women's and Children's hospital, although they have indicated they will still serve men there, too. Norton recently opened a cancer center on their downtown campus.

Norton

Healthcare also has fourteen (14) urgent care facilities located throughout Jefferson and Bullitt County as well as southern Indiana. Norton employs the most physicians of any system in the area.

Other Licensed Facilities

According to the Kentucky Office of the Inspector General, there are now 282 (versus 268 in 2012) licensed facilities other than hospitals in Jefferson County. They run the gamut from ambulatory care facilities to adult day care to dialysis centers to rehabilitation agencies to special medical technology clinics. There are 18 licensed facilities in Bullitt County, 16 in Oldham County, 9 in Shelby County, and 2 in Spencer County.

Health Departments

As stated earlier in this document, there are four separate Health Departments located in BHL'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. The Health Departments seem to be doing an excellent job of handling public health issues, such as immunizations, monitoring environmental health issues, and providing education.

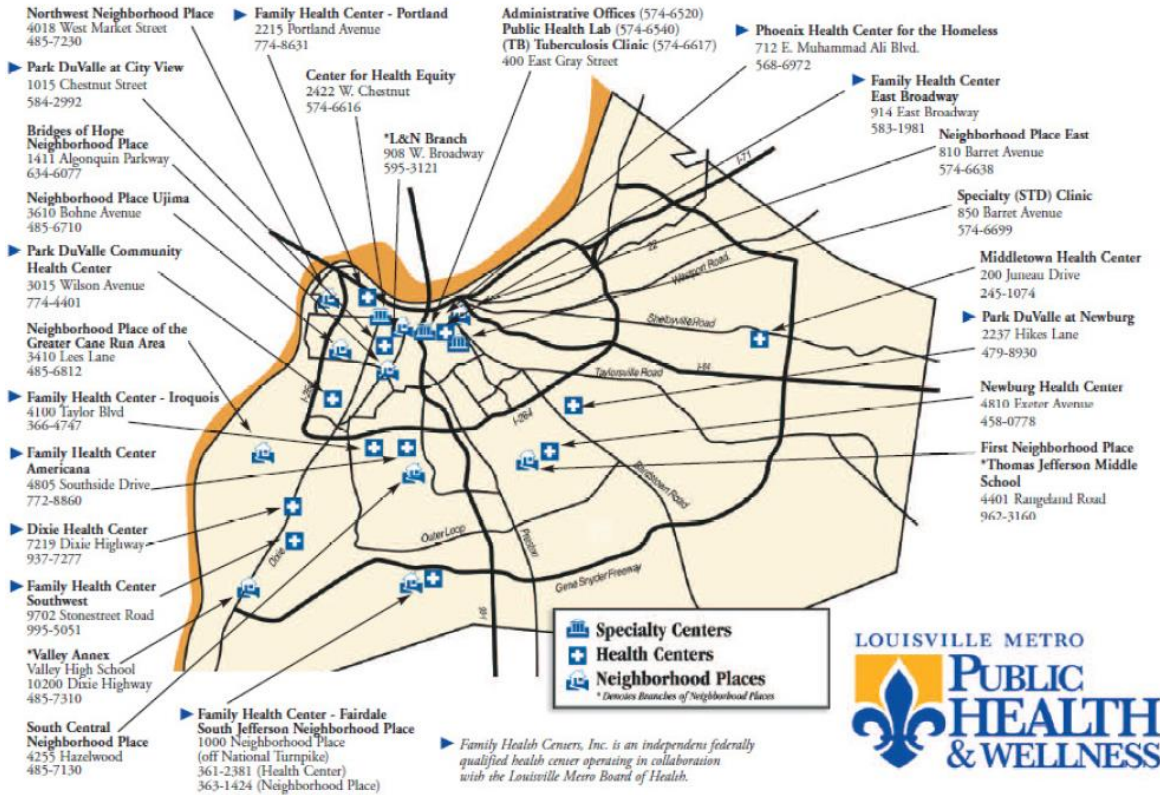
Louisville Metro Public Health & Wellness provides a wide range of services to the people of Louisville, including offering health clinics across the community, information about Louisville's health policies and programs, inspection of eating establishments, preventing communicable diseases, and helping improve children's health. Although LMPHW 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



whole community. Primary partner agencies include Family Health Centers, Inc., the University of Louisville, and Park DuValle Community Health Center. Ma’isah Burks, Regional Epidemiologist for LMPHW, has been instrumental in bringing the hospitals together to work on updating their respective Community Health Needs Assessments.

The map on the following page shows the locations of the LMPHW public health clinics. Three health centers are located in BHL’s CHNA service area.

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



The Oldham County Health Department mission is to protect, and promote a healthy community through education, enforcement and empowerment. In order to accomplish this, they control communicable disease, encourage healthy lifestyles, provide preventative screenings and reduce hazards in the environment. Their clinic provides adult health vaccinations, cancer screening, 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, 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

In March 2014, BHS engaged Healthcare Strategy Group (HSG) to conduct a primary care physician manpower analysis. HSG completed the analysis and presented recommendations, by hospital, relative to primary care physician manpower deficits.

HSG presented the following presentation to BHL indicating a projected deficit of primary care physicians over the next few years.

Specialty	As of 2014						In 2017	
	#	Avg. Age	40 & Under	41-55	56-60	>60	>60	% >60
Adult Primary Care (FM & IM)	196	53.5	10	89	22	75	88*	45%
Pediatrics	120	50.4	15	54	18	33	48**	40%

Methodology: Medical staff rosters (as presented by each BH facility) were assessed for physician age, with a focus on physicians who will be over 60 in 2017.

*58 Adult Primary Care Physicians over age 65 (see following PCP age slides for details)

**26 Pediatricians over age 65 (see following PCP age slides for details)

- Adult primary care succession planning issues are severe, with 45% of FM and IM over age 60 by 2017
- Need aggressive recruitment strategy to address
- Pediatrics also an issue; how aggressively needs are addressed are a strategic question

As a result of this analysis, Valada Sinclair, Baptist Health Medical Group (BHMGM) Executive Director, Physician Recruitment and Alignment is actively engaged in addressing this anticipated manpower deficit. In February 2015, HSG was engaged again to do a similar manpower analysis of specialty providers. Final results and recommendations are not available at the time of this update.

Committee Discussion

During the Community Health Needs Assessment Committee meeting, members expressed their thoughts about several health concerns in the area and where BHL 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. First and foremost the team unanimously agreed that a lack of health literacy continues to be an ongoing issue. And while BHL has spent the last three years executing the identified strategies to address this issue, it appears there is still much work to do. The committee agreed that creating a higher level of health literacy would come about through improved access to care, more education about wellness, and a combination of communities, health industry members, and government creating incentives for people to take better care of themselves. The committee members briefly discussed the services BHL already provides that are detailed in the annual Community Benefit Report (see Appendix D for the FY 2014 BHL summary report).

Prioritized Health Issues

The committee started off with a list of eight (8) issues. For the purpose of this assessment the team then identified their top three the hospital will focus on over the next three years. They are:

- Health Literacy
- Cancer
- Cardiovascular Disease

The other five (5) are the aging population, mental health, substance abuse, obesity and diabetes. The consensus of the team is many of these issues are related and efforts to combat one will result in improvements in one or more of the others.

Health literacy was defined as an increased awareness of the public to their overall healthcare environment, including knowledge of how and when to access care, understanding their personal health status, and the necessity of compliance to medicine and lifestyle regimens assigned by their physicians. Only through the combined efforts of medical professionals, schools, churches and government agencies will we be successful in educating and engaging individuals in caring for themselves. Kentucky has some of the highest rates in the nation for preventable health conditions and for behaviors that have been identified as unhealthy. The committee felt that continued focus on health literacy and personal responsibility would improve the general health of the population more than any other activity.

As cancer continues to be a leading cause of death in this service area, the committee ranked it as their second priority in terms of public health issues. Although Jefferson county mortality levels are better than the state average they are still higher than the national average. The committee acknowledged the continued need for board certified oncologists and easy access to cancer related services such as chemotherapy and radiation therapy.

Cardiovascular disease ranked as the committee’s third priority and encompasses coronary artery disease, heart attack, arrhythmias, heart failure, cardiomyopathy and vascular disease. The discussion focused on education, prevention and treatment. The goal is to expand public awareness of disease root causes and common associated conditions to increase compliance with standard of care protocols.

Strategic Implementation Plan

2015 – 2018 Initiatives

Identified Health Needs	Goals	Action Item(s)	Measures
Health Literacy	<ul style="list-style-type: none"> Increase public awareness of the overall healthcare environment (what is available, where, when, etc.) 	Promote types of services available and locations of those services	1) # of hits to location on our website
		Promote MyChart signup and usage beginning in April 2016	2) # of patients registering for MyChart
	<ul style="list-style-type: none"> Educate public to better understand how, when and where to access appropriate levels of care 	Distribute tear out card defining appropriate settings of care	1) # of cards distributed
		Promote Baptist Health Express & Urgent Care Clinics as well as link to "What's the Difference?"	2) # of hits to this location on our website
<ul style="list-style-type: none"> Enhance public understanding of their own personal health status with a focus on medication management and the impact of lifestyle choices 	Targeted distribution of Health Magazine Health Fairs	1) # distributed 2) # of health fairs 3) # of attendees 4) # of hits to this location on our website	
	Promote "Baptist Health For You" and "Health & Wellness"		



Cancer			
	<ul style="list-style-type: none"> Assess strategies for access to care to ensure patient care services are convenient and close to home 	<p>Kentuckiana Region President, David Gray, to send letter with personal testimony to the importance of colon cancer screenings</p>	<ol style="list-style-type: none"> # of letters distributed to employees # of eligible employees and # of employees who actually had a colonoscopy
	<ul style="list-style-type: none"> Enhance cancer education and screening opportunities 	<p>Year 1 - Use eligible Baptist Health employees to increase colon cancer screening rates Year 2 - Expand the scope to include existing patient population Promote online cancer risk assessment as well as Health Talks and educational videos with oncologists Membership and participation in the American Commission on Cancer, Kentucky Cancer Consortium and Kentucky Cancer Link</p> <p>Coordinate with regional public health departments and the American Cancer Society to promote public education on importance of colon cancer screenings</p>	<ol style="list-style-type: none"> # of eligible employees and # of employees who actually had a colonoscopy # of hits to these locations on our website # of memberships and participation events <ol style="list-style-type: none"> # of initiatives # partnerships
	<ul style="list-style-type: none"> Participate in cutting edge research trials to facilitate development of cancer fighting medications 	<p>Create a consolidated National Research Group network of oncology trials to ensure the availability of all trials across the community footprint</p>	<ol style="list-style-type: none"> # of clinical trials available # of patients enrolled



Cardiovascular Disease	<ul style="list-style-type: none"> Expand public awareness of disease root causes and common associated conditions to increase public awareness of healthier lifestyle and cardiovascular disease prevention 	Promote advanced heart care (September campaign)	1) # of hits to these locations on our website
		Promote healthier lifestyle by increasing patient referrals to cardiac rehab (Phase II)	1) Increase patient referral to cardiac rehab by 5% from baseline
		Health fairs, screenings (vascular, blood pressure, cholesterol) for the general public	1) # of health fairs and screenings
		Employer Solutions (Wellness Programs) health fair and screenings	1) # of Employer health fairs and screenings

Communications Plan

The IRS guidelines for Community Health Needs Assessment call for making the results of the process widely available. To meet this requirement, BHL will publish this document on its Web site and make hard copies available to the public upon request. These results will be incorporated into Baptist Healthcare System’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 few months to develop specific action items relative to the prioritized issues and complete an updated Strategic Implementation Plan.

Appendix A – LMPHW Public Survey



2015 COMMUNITY HEALTH NEEDS ASSESSMENT GENERAL POPULATION QUESTIONNAIRE

We are collecting information about what people living in Louisville think they need to be healthy. Your individual answers are confidential but we will share the overall results of the survey with local hospitals after we analyze them. Those results will be used to help Louisville’s hospitals, the health department and other healthcare providers decide what kinds of programs and services are important to help people live healthier lives. It will also help us decide where we need to put those programs and services.

Instructions: For each question, please circle the answer that you feel describes you most.

A. TELL US ABOUT YOURSELF

What is your zip code? _____

1. What is your gender?

- a) Male
- b) Female
- c) Other/Transgender

2. What is your race?

- a) White
- b) Black/African American
- c) Asian
- d) Native Hawaiian/Other Pacific Islander
- e) American Indian/Alaska Native
- f) Other
- g) Two or more races

3. Are you Hispanic or Latino?

- a) Yes
- b) No

4. What language do you speak at home?

- a) English
- b) Spanish
- c) Somali
- d) Nepalese
- e) Arabic
- f) Karen-Burmese
- g) French
- h) Swahili
- i) Burmese
- j) Other _____

5. What is your age group?

- a) 18-24 years
- b) 25-34 years
- c) 35-44 years
- d) 45-54 years
- e) 55-64 years
- f) 65 years or older



B. GETTING HEALTH CARE

1. When was your last visit to your regular doctor or health care professional?

- a) In the past year
- b) In the past 2-5 years
- c) Over 5 years ago
- d) I don't have a regular doctor or healthcare professional

2. Do you think it is important to have a regular doctor or health care professional?

- a) Yes
- b) No

3. Where do you go most often when you have a health problem?

Check up to 2:

- Chiropractor or alternative health professional
- My doctor or healthcare professional
- Drug/grocery store clinic
- Emergency room
- Health Clinic (Family Health Center, Shawnee Christian Health Center, Park DuValle, other clinic)
- Specialist
- Urgent Care/ Immediate Care
- Other _____

4. Do you have health insurance?

- a) Yes
- b) No

5. Did you know that you may be able to get free or low-cost health insurance at Kynect (Obamacare)?

- a) Yes
- b) No

6. Have you used the emergency room in the past 12 months for yourself or another adult in your household?

- a) No
- b) Yes, 1 to 2 times

- c) Yes, 3 to 5 times
- d) Yes, 6 or more times

I don't know

7. In the past year have you taken a child to the emergency room?

- a) Yes, 1 to 2 times
- b) Yes, 3 to 5 times
- c) Yes, 6 or more times
- d) I don't know
- e) No, I did not take a child to the emergency room
- f) No, I don't have children

8. If you had to use a hospital emergency room in the past year, why did you go?

- a) I did not go to the emergency room
- b) The problem was too serious for the doctor's office
- c) My doctor or healthcare professional said to go
- d) I was taken by an ambulance or other emergency vehicle
- e) My regular doctor's office was not open
- f) I had no other place to go
- g) The emergency room was the closest provider
- h) I get most of my regular care in the emergency room

9. Where do you go when you can't see your regular doctor or healthcare professional?

- a) Chiropractor or alternative health professional
- b) Drug/grocery store clinic
- c) Emergency Room
- d) Health Clinic (Family Health Center, Shawnee Christian, Park DuValle, other clinic)
- e) Pharmacist
- f) Urgent Care or Immediate Care Center
- g) I call a Helpline



- h) I treat myself at home or use over the counter medicine
- i) I rely upon a family member
- j) I do not have a regular doctor or healthcare professional
- k) I do not go anywhere else when I cannot see my regular healthcare professional

10. When you go to the doctor or another health professional, how do you get there?

- a) TARC
- b) Car, motorcycle, bicycle, scooter
- c) Walk
- d) Car pool, taxi, Ride Share
- e) Medical Transportation

Other _____



Appendix B – OCDH Survey

Oldham County Community Health Survey 2015



Your opinion is important! If you are a resident of Oldham County and at least 18 years old, please take a few short minutes to complete this 20 question survey. Enter your phone number at the end of the survey for a chance to win one of many \$50 gift certificates.

The purpose of this survey is to get your opinions about community health issues in Oldham County. The Coalition for a Healthy Oldham County will use the results of this survey and other information to identify the most pressing problems which can be addressed through community action. Remember... your opinion is important! Thank you and if you have any questions, please contact us (see contact information at the bottom).

1. In the following list, what do you think are the top THREE factors that most improve the quality of life in Oldham County?

Please check the top THREE:

- | | |
|--|--|
| <input type="checkbox"/> Access to health care (e.g., family doctor) | <input type="checkbox"/> Healthy behaviors and lifestyles |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Low adult death and disease rates |
| <input type="checkbox"/> Arts and cultural events | <input type="checkbox"/> Low crime / safe neighborhoods |
| <input type="checkbox"/> Clean environment | <input type="checkbox"/> Low infant deaths |
| <input type="checkbox"/> Emergency preparedness | <input type="checkbox"/> Low level of child abuse |
| <input type="checkbox"/> Excellent race/ethnic relations | <input type="checkbox"/> Parks and recreation |
| <input type="checkbox"/> Good jobs and healthy economy | <input type="checkbox"/> Religious or spiritual values |
| <input type="checkbox"/> Good place to raise children | <input type="checkbox"/> Strong family life |
| <input type="checkbox"/> Good schools | <input type="checkbox"/> Other (please specify) |

2. In the following list, what do you think are the top THREE problems that have the greatest impact on overall community health in Oldham County?

Please check the top THREE:

- | | | |
|--|--|---|
| <input type="checkbox"/> Aging problems (e.g., arthritis, hearing/visions loss etc.) | <input type="checkbox"/> Heart disease and stroke | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> Alcohol/Drugs | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Poor Diet |
| <input type="checkbox"/> Cancers | <input type="checkbox"/> HIV / AIDS | <input type="checkbox"/> Rape / sexual assault |
| <input type="checkbox"/> Child abuse / neglect | <input type="checkbox"/> Homicide | <input type="checkbox"/> Respiratory / lung disease |
| <input type="checkbox"/> Dental problems | <input type="checkbox"/> Infant Death | <input type="checkbox"/> Sexually Transmitted Diseases (STDs) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Infectious Diseases (e.g., hepatitis, TB, etc.) | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Mental health problems | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Firearm-related injuries | <input type="checkbox"/> Motor vehicle crash injuries | <input type="checkbox"/> Terrorist activities |
| <input type="checkbox"/> Other (please specify) | | |

3. In the following list, what do you think are the top THREE behaviors that have the greatest impact on overall community health in Oldham County?

Please check the top THREE:

- | | |
|---|--|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Not using birth control |
| <input type="checkbox"/> Being overweight | <input type="checkbox"/> Not using seat belts / child safety seats |
| <input type="checkbox"/> Dropping out of school | <input type="checkbox"/> Poor eating habits |
| <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Racism |
| <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> Lack of maternity care | <input type="checkbox"/> Unsafe sex |
| <input type="checkbox"/> Not getting "shots" to prevent disease | <input type="checkbox"/> Unsecured firearms |
| <input type="checkbox"/> Other (please specify) | |



4. In the following list, what do you think are the top THREE safety concerns in Oldham County?

Please check the top THREE:

- Access to firearms by children
- Alcohol and Drug Use
- Child abuse and neglect
- Domestic violence
- Gang-related activity
- Growing Marijuana
- Manufacturing of methamphetamines
- Other (please specify)
- Not using seat belts and safety seats, helmets
- Racism and intolerance
- School Violence (including bullying)
- Unsafe Driving
- Unsafe roads/sidewalk conditions
- Unsafe/unprotected sex

5. Where do you seek health care most often?

- Primary Care Provider
- Specialist
- Urgent Care
- Clinics located in Drug/Grocery Store
- Emergency Room
- Chiropractor
- Hope Health Clinic
- Oldham County Health Department
- Other (please specify)

6. If you seek health care outside of Oldham County, choose one answer that best matches why:

- My doctor of choice is in another city.
- No providers in Oldham County for services I need.
- My insurance only covers doctors in another area.
- No appropriate doctors accept Medicare/Medicaid.
- Convenience
- Other (please specify)

7. How do you pay for your health care? (Please choose all that apply)

- Self pay (No insurance)
- Health insurance (e.g., private insurance, Humana, Anthem, Kynect, etc.)
- Medicaid (CareSource, CoventryCares, Passport, WellCare)
- Medicare or Medicare Advantage
- Veterans Administration
- Don't go to a Doctor because I can't pay
- Other (please specify)

8. How much do you think ADULTS risk harming themselves (physically or in other ways) if they smoke marijuana once or twice a week?

- No risk
- Slight risk
- Moderate risk
- Great risk

9. How much do you think YOUNG PEOPLE risk harming themselves (physically or in other ways) if they smoke marijuana once or twice a week?

- No risk
- Slight risk
- Moderate risk
- Great risk

10. How much do you think YOUNG PEOPLE risk harming themselves (physically or in other ways) if they drink alcohol once or twice a week?

- No risk
- Slight risk
- Moderate risk
- Great risk



11. How concerned are you by UNDERAGE drinking in Oldham County?

- Very concerned
- Somewhat concerned
- Not very concerned
- Not sure

12. Do you agree or disagree with the following statement: It is okay for youth under the age of 21 to drink if they are at a home and supervised by an adult.

- Agree
- Disagree

13. A 'social host' is anyone who knowingly hosts or allows underage drinking at parties on property that they own, lease or otherwise control. A Social Host Ordinance holds adults criminally responsible for any underage drinking occurring on their property. Are you aware that such an ordinance exists in Oldham County?

- Yes
- No

14. Are safe walking paths important to you?

- Yes
- No

15. The Greenways Project is a recreational trail that will connect LaGrange to Pewee Valley. Do you think completion of the Greenways Project should be a community priority?

- Yes
- No

16. In what ZIP code is your home located? (enter 5-digit ZIP code; for example, 40031 or 40014)

17. Your Age:

- 18 - 25
- 26 - 39
- 40 - 54
- 55 - 64
- 65 or over

18. Your Sex:

- Male
- Female

19. What is the highest level of school you have completed or the highest degree you have received?

- Less than high school degree
- High school degree or equivalent (e.g., GED)
- College degree or higher
- Other (please specify)

20. Household income:

- Less than \$20,000
- \$20,000 to \$39,999
- \$40,000 to \$59,999
- \$60,000 to \$79,999
- \$80,000 to \$99,999
- Over \$100,000

21. Please enter your phone number (area code first) here for a chance to win several different gift certificates. Your phone number will not be linked to your responses or used for any further communication:

If you would like more information about this community project, please contact us at the number below:

Anna Hobbs
Coalition for a Healthy Oldham County
Oldham County Health Department
1786 Commerce Parkway
LaGrange, KY 40031
502-222-3516 x 140

Thank you very much for your response!
Powered by SurveyMonkey

Appendix C – 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
<http://www.countyhealthrankings.org>

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*
<http://healthypeople.gov/2020/>

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

State Sources

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

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

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

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

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

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

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

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

Appendix D – BHL FY 2014 Community Benefit Report Summary

**Baptist Health Louisville
Community Benefits Report
Fiscal Year 2014 Highlights**

Unreimbursed cost of charity care	20,678,680
Unreimbursed cost of Medicaid	2,090,248
Subsidized health services	3,280,871
Health improvements and other contrib**	53,800
Total Community Benefit	<u>26,103,599</u>
Unreimbursed cost of Medicare	820,067
Unreimbursed cost of Uncollectibles	2,901,169
Total	<u>29,824,835</u>

Summary

Baptist Health Louisville provided over \$29,800,000 million in community benefits during fiscal year 2014.