

Owensboro Health Regional Hospital

2016 Community Health Needs Assessment for Daviess County incorporating the findings of the 2015 Green River District Health Department CHA, CHIP, and Vulnerable Populations Addendum

Executive Summary

Owensboro Health Regional Hospital (OHRH) is pleased to present its 2015-2018 Community Health Needs Assessment (CHNA). This CHNA report builds on existing community health assessment and planning efforts in Daviess County and its surrounding areas and provides an overview of the health needs and priorities within the county. OHRH partnered with Xerox Community Health Solutions to synthesize findings relevant to Daviess County from the Green River District Health Department's (GRDHD's) Mobilizing for Action through Planning and Partnerships (MAPP) assessments, along with additional Daviess County primary data collected through key informant interviews. Special attention has been given to the needs of vulnerable populations, unmet health needs or gaps in services and input from the community. The goal of this report is to equip readers with a deeper understanding of the health needs in their community, as well as help guide OHRH in its community benefit planning efforts and development of an implementation strategy to address prioritized needs. The Owensboro Health, Inc. Board of Directors approved this CHNA on May 19, 2016.

Summary of Findings

Methodology

GRDHD engaged OHRH and Daviess County community members in completing the 2015 GRDHD Community Health Assessment (CHA), 2015 Vulnerable Communities Addendum, and 2015-2018 Community Health Improvement Plan (CHIP), which are available at http://www.healthdepartment.org/CHACHIP.htm.

While GRDHD'S MAPP assessment and planning process produced many findings on community health in Daviess County, additional insights into the county's health needs and strengths were collected to provide a better understanding of the local context. Xerox Community Health Solutions conducted eight key informant interviews to probe more deeply into health and quality of life themes within the county. Community resources were also identified in these interviews.

This CHNA report synthesizes key informant interview data with findings from the GRDHD CHA, Vulnerable Communities Addendum and CHIP reports.



MAPP Assessments

Visioning: Daviess County community members described their ideal community as one in which the environment is respected and its impacts on personal, community and mental health are acknowledged. In addition, the community wished to see better access to affordable healthcare and more awareness of healthcare resources.

Community Health Status Assessment: Secondary data from state and national sources were assessed to identify concerns in the following areas:

- Access to Health Services
- Clinical Preventative Services
- Environmental Quality
- Injury & Violence
- Maternal, Infant, and Child Health
- Mental Health
- Nutrition, Physical Activity, Obesity
- Oral Health
- Reproductive and Sexual Health
- Social Determinants
- Substance Abuse
- Tobacco

Community Themes and Strengths: Through a Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis, Daviess County residents identified common themes in their community. Strengths included both healthcare assets (health department, hospital and free dental clinics) and community assets (faith-based community, physical activity offerings, and parks and recreation centers). The prevalence of fast food outlets and challenges faced by new residents when moving into the community were identified as weaknesses. A number of opportunities were highlighted, including economic and job opportunities, access to care, partnerships and resources. Threats were centered on language and cultural barriers, the rise of poverty and homelessness and other financial and economic concerns.

Forces of Change: Community members identified the following forces of change impacting community health, with economic and social factors exerting the greatest influence:

- Cultural diversity (Burmese, Hispanic)
- Aggressive/Innovative to keep business
- Affordable Care Act
- Aging population base
- Natural disasters (ice storm, windstorm, tornado)
- Loss of coal
- · Increase in single parent family home
- E-Cigarettes
- Brain drain



Local Public Health System Assessment: The Core Public Health Steering Committee developed the 10 Essential Public Health Services (EPHS) in 1994 as a framework of health activities that should be undertaken in all communities. The 10 EPHS serve as a guideline for what is commonly described as the "Public Health System" of a community. Of the 10 EPHS, four stood out as strengths within Daviess County:

- EPHS #3: Inform/Educate and Empower People about Health
- EPHS #4: Mobilize Community Partnerships
- EPHS #7: Link to Health
- EPHS #9: Evaluate

Two of the 10 EPHS were cited as weaknesses:

- EPHS #2: Diagnose and Investigate Health Problems
- EPHS #10: Research

Vulnerable Population Focus Groups

The GRDHD conducted focus groups with identified vulnerable populations in Daviess County to deepen the understanding of their health challenges. Focus group discussions and surveys revealed unmet needs across the low-income, homeless, refugee/immigrant and Hispanic/Latino populations. Common concerns across the vulnerable populations include access to healthcare and jobs, affordability of activities and resources and transportation. Most participants did not have a primary care provider. The language and health literacy barriers facing the refugee/immigrant populations are especially concerning. When asked to self-assess their general health, the homeless and refugee groups reported much poorer health status than the other vulnerable groups and the county as a whole.

Key Informant Testimony

OHRH and Xerox Community Health Solutions obtained additional primary data through eight supplemental interviews with individuals knowledgeable about health and quality of life needs in Daviess County. These key informants identified a number of concerns in the community:

Language/Culture
Exercise, Nutrition, & Weight Substance Abuse
Mental Health & Mental Disorders
Heart Disease & Stroke
Social Environment
Environmental & Occupational Health Refugee Health Transportation Hispanic/Latino Population
Diabetes

Language/Culture
Burmese Population
Mental Health & Mental Disorders
Heart Disease & Stroke
Prevention & Safety Low-Income/Underserved Population
Free & Adolescent Health
Fend & Adolescent Health
Fend & Adolescent Health
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The following issues were identified as the greatest health challenges:

- Access to health services, encompassing language and cultural barriers
- Substance abuse



- Low-income/underserved populations and economy
- Exercise, nutrition, and weight
- Mental health and mental disorders
- Transportation
- Health education

Prioritized Areas

To select health areas to prioritize, Daviess County community members reviewed primary and secondary data, considered existing state and national priorities, conducted open discussion and voted on specific strategic initiatives for the county.

Daviess County selected the following priority areas for action:

- Substance abuse
- Obesity
- Access to care

In addition, mental health and oral health were identified as growing concerns. The community decided to incorporate methods of addressing these two areas into ongoing initiatives, rather than focus on them separately.

A plan for addressing these priority areas will be described in OHRH's 2016 Implementation Strategy report.

