

Community Health Improvement Planning - Polk County

Forces of Change Assessment July, 2014

Mobilizing for Action through Planning and Partnerships (MAPP) is a community-wide strategic planning tool for improving community health. This tool helps communities prioritize public health issues and identify resources for addressing them. Conducting MAPP should create a sustained community initiative that ultimately leads to community health improvement.

Assessments

A community health assessment is used to better understand the needs and assets within the community, and to collaborate to make measurable improvements in community health and well-being.

MAPP is a data and information driven process that includes the following four assessments:

- **Community Themes and Strengths Assessment**—identifies issues that interest the community, perceptions about quality of life, and community assets.
- **Local Public Health System Assessment**—measures capacity and performance of the local public health system—all organizations and entities that contribute to the public’s health.
- **Community Health Status Assessment**—assesses data about health status, quality of life and risk factors in the community.
- **Forces of Change Assessment**—identifies forces that are or will be affecting the community or local public health system.

The Forces of Change Assessment is one of the four MAPP assessments and seeks to identify factors that can affect health in a community. Areas to consider include political, economic, social, technological, environmental, scientific, legal, and ethical. This assessment seeks to answer these two main questions:

- What is occurring or might occur that affects the health of our community or the local public health system?
- What specific threats or opportunities are generated by these occurrences?

The results can be used to assist the community in preparing how to respond to or capitalize on these factors and events.



METHOD

The *Forces of Change* MAPP assessment was conducted with two community groups. Both meetings consisted of an hour of open discussion facilitated by staff from the Florida Department of Health in Polk County (FDOH-Polk). After the meeting, the facilitators compiled a Threats and Opportunities worksheet based on the discussions from the two groups.

The first meeting was with the Community Health Advisory Group of Lakeland Regional Health System which was established to advise on the development and implementation of the medical system's Community Benefit Plan. Twenty-five attendees participated in this assessment on May 1, 2014.

The second facilitated discussion was conducted with ten of members Polk Vision's Quality of Life Task Force on June 17, 2014. Polk Vision is a broad, community-led partnership of organizations, businesses, government and individuals.

FINDINGS

Eight major forces of change were identified by the groups. Each force and associated threats and opportunities is summarized in the following pages.

CONCLUSION

Several themes arose during discussion of the threats to and opportunities for the health system in Polk County. Changes in health care management brought about by managed care and the Affordable Care Act brings challenges and opportunities as does the advances in technology. The socio-economic status of our population has major implications for health. It was noted, however, that there are many resources in Polk working to improve health in Polk County.

As stated on the first page, *Forces of Change* is one of four MAPP assessments that are part of a comprehensive community health assessment. As the MAPP planning group moves forward with completing the remaining assessments and formulating a health improvement plan, these findings should be revisited for relevancy as some of the factors and accompanying threats and opportunities may be very different. This assessment should be on-going and reflect what is happening around us at each stage of the process to serve as a useful tool for planning and change.

This assessment reflects a broader view of health and highlights greater community resources than the previous assessment completed in 2010. This may indicate a greater collaboration across additional disciplines in addition to the health care profession.

**Forces of Change - Threats and Opportunities
Completed for Polk County in July, 2014**

Forces (Trend, Events, Factors)	Threats Posed	Opportunities Created
<p>Education – Linkages to Services</p> <ul style="list-style-type: none"> • Health care literacy • Healthcare access • High migrant population 	<ul style="list-style-type: none"> • Poor health care literacy impedes good outcomes. • Lack of communication on services available and eligibility. (Where to go for health care services.) • Language barriers exist due to populations with low literacy and /or English as a second language. • Complex health care system access is not well understood by all. • Populations with different cultures, practices and/or languages may not understand or be receptive to important health care messages. • Not all health resources on the internet are reliable. 	<ul style="list-style-type: none"> • Opportunity for health care professionals to learn cultures, practices and terms to best reach and educate. • Coordination of care can improve communication between patient and healthcare provider. • Carescope • Healthy Start addresses cultural barriers. • Encourage more use of United Way 211. • Navigators create opportunities for health literacy and access to care for indigent; United Way, Polk Healthcare Plan, large hospitals and clinics have navigators. • Success by 6 addresses children’s literacy and school readiness. READ Polk has 4 councils in the county addressing adult literacy and teaching English to adults speaking other languages. • Two networks bridge health and literacy- Read Polk and collaboration between Lake Wales Care Clinic and Lake Wales Literacy Council. Help of Ft. Meade has something similar. • Communications and social marketing can change perceptions and behavior.

Forces (Trend, Events, Factors) cont.

Quality of Care

- Coordination of care (integration) throughout community to improve quality of care and reduce re-admissions.
- Transition from hospital discharge to medical home/primary care
- Industry move towards Pay-for-Performance

Threats Posed cont.

- Insufficient care coordination/communication in discharge post treatment in clinic and hospital settings can result in lesser quality of care and/or re-admissions.
- Social services in hospitals and clinics have been reduced. With fewer social workers and discharge planners there is less interaction with patients to assist with transition to post treatment options:
 - Seniors – transitions to a nursing home/assisted living facility to reduce re-admissions.
 - Mothers/Babies – discharge process to include family planning options.
 - Homeless – transition to include assistance with stability of income, housing, safety and sanitary conditions to reduce re-admissions.
- Medical non-compliance in patients taking multiple medications.
- Patients change doctors but communication in transition is lacking.
- Movement away from fee for service to pay-for-performance models and attaching financial incentives to clinical care objectives, at times with factors outside of the provider’s control, put provider compensation at risk.
- Limited broadband access for electronic medical records and remote treatment/diagnosis.
- Drug resistant bacteria.

Opportunities Created cont.

- Electronic Medical Records can assist in making smoother transitions
- Federal mandates in place to improve transition from hospital discharge to medical home/primary care
- Pharmacies are useful in identifying contraindicated and/or duplicate medications.
- Lakeland Regional Health System’s new women & children’s pavilion is expanding level of services available in the community.
- Opportunity for remote treatment/diagnosis through telemedicine and electronic medical records.
- Pay-for-Performance models strive to provide better care for patients in healthcare settings by improving transparency and accountability.
- WHO (World Health Organization) and others are addressing drug resistant bacteria; protocols may be developed.

Forces (Trend, Events, Factors) cont.

Access to Care

- Medicaid Managed Care in Florida (MMC)
- Affordable Care Act (ACA)
- Paradigm shift of the primary care model
- Use of extenders
- Potential Florida Medicaid Expansion
- Persistent challenge of access to transit

Threats Posed cont.

- Use of Emergency Room for primary care.
- Low and uncoordinated use of services.
- Lack of access to care including: primary care, dental, mental health, pediatric specialists and GYN and high risk prenatal, especially for those under/uninsured.
- With MMC there are greater administrative burden/costs for providers. Cost cutting measures could affect access by vulnerable populations.
- ACA Insurance –People do not understand basic terms related to insurance coverage and their responsibility for incurred costs. (i.e. the difference between out-of-pocket expenses vs. deductible).
- Even with ACA, high costs of premiums, deductibles and out-of-pocket are barriers.
- Paradigm shift puts more responsibility/work on the patient to manage their care rather than the primary care physician (PCP). Creates more complexity in the PCP/patient relationship.
- Future of current funding: i.e. Low Income Pool (LIP) grant ends; ½ cent surtax for indigent health care expires in 2019 and United Way funding fluctuates.
- Florida may not expand Medicaid, resulting in:
 - Potential shortages of federal funding for hospitals.
 - Shortage of medical care for uninsured low income individuals.
- Medicaid Expansion could add another level of bureaucracy and more confusion.
- Access to public transportation limited by routes and frequency of service.

Opportunities Created cont.

- Polk HealthCare Plan (PHP) and 6 volunteer health clinics serve uninsured/underinsured. Indigent HealthCare ½ cent surtax provides funding.
- Lakeland Family Health Clinic, Department of Health in Polk County, and Peace River Center receive funding through Low Income Pool Grant (LIP) to provide integrated Primary Care and behavioral healthcare to uninsured/underinsured.
- Lakeland Regional Health System proposed teaching/residency program.
- Polk County Indigent Health Care Surtax Extension in 2019.
- Lakeland Regional Health System’s new women & children’s pavilion is expanding level of services available in the community.
- MMC plans must develop incentive program to encourage healthy behaviors.
- Navigators for ACA are provided through many local health care providers.
- Opportunity for individuals to own and learn more about their health, health care options and costs.
- Medical & dental extenders may help reduce costs for patients and save time for doctors /dentists
- Health care coverage for significant percentage of population paid through federal government if Florida expands Medicaid.
- Transit Referendum on November 2104 ballot for additional 1 cent sales tax would expand transit services into rural communities; expand services and hours of operation. Within 3/4 mile of stop would offer door to door pick up for disabled.

<u>Forces (Trend, Events, Factors) cont.</u>	<u>Threats Posed cont.</u>	<u>Opportunities Created cont.</u>
<p>Political/Legislative</p> <ul style="list-style-type: none"> • State and federal legislative priorities change funding to providers. • Food Regulations 	<ul style="list-style-type: none"> • Roadblocks to Lakeland Regional Medical Center residency program. • Uncertainty of funding for many programs currently providing services for homeless, under/un-insured and other at risk populations. • Ever changing state and federal legislation with no “plan” for long term improvement. • Politicization of the Affordable Care Act (politically driven attitudes about ACA) could impede solutions to improve implementation. • Food Regulations – different standards regarding imported food vs. US grown foods. 	<ul style="list-style-type: none"> • Key Stakeholders could collaborate on tracking important legislation and developing an advocacy network.
<p>Physical Environment</p> <ul style="list-style-type: none"> • Clean Water and Air • Walkable communities • Biker and Pedestrian Safety 	<ul style="list-style-type: none"> • Pesticide use • Air and water pollution • Long commuter times; rural communities; lack of sidewalks; lack of or lack of access to safe neighborhood resources for physical activity. • Changes in attitude/action need to be addressed to influence new behaviors. 	<ul style="list-style-type: none"> • Regional Planning Councils assist smaller communities with planning and assessments. • County and city planning and development policies that incorporate Healthy Community planning. • County and city visioning and needs assessment resulted in the Transit Referendum on November 2014 ballot for additional 1 cent sales tax that will also provide for improved road construction (sidewalks, traffic calming, bike lanes.) • Communications and social marketing can change perceptions and behavior.

<u>Forces (Trend, Events, Factors) cont.</u>	<u>Threats Posed cont.</u>	<u>Opportunities Created cont.</u>
<p>Technology</p> <ul style="list-style-type: none"> • Telemedicine/Telehealth (ability to access medical assistance through various media devices (I-Pads, phones, the potential includes more.) • Electronic Health Records(EHR)/Electronic Medical Records (EMR) • Health Information Exchange (HIE) 	<ul style="list-style-type: none"> • Need broadband access for newer technology. • Broadband access can impact rural areas ability to access newer technology. • Hospitals and other large intuitions need to share information with smaller and volunteer clinics on how technology infrastructures were built. • Cost of planning and implementation of EHR/EMR can prove inaccessible to smaller not-for-profit providers • HIE requires more time for data collection and reduces time to listen to/ build rapport with patient. Could increase appointment time, reducing the number of patients that can be seen. • High provider cost to plan, develop, and implement HIE. 	<ul style="list-style-type: none"> • Telemedicine/Telehealth payer requirements and funding for services is still being developed and is necessary to expand the use of services. Ethical and other unique issues need to addressed and resolved. • New technology can provide access to those in rural areas, with limited transportation and with specialized needs. • EHR/EMR provides quick access between providers. Easier access to personal health records enables greater patient engagement in their personal health care. • Some incentives through ACA to implement EHR/EMR. United Way is funding direct secure messaging (DSM). • Local, regional and national health information exchange can enable improved health outcomes through better care coordination, reduction in medical errors, and increased patient safety and care.

Forces (Trend, Events, Factors) cont.

Social and Economic

- High migrant population (language barrier)
- High poverty level
- High unemployment
- Widening income disparities
- High homeless population (especially children)
- Higher number of residents with no high school diploma
- Access to and cost of healthy (fresh) food
- Aging US population – in 2056 more elderly than children for the 1st time

Threats Posed cont.

- Social and economic status of Polk increases burden on safety net providers.
- Increased family stress due to underemployment and high unemployment.
- Common belief that Affordable Care Act will take care of all of our uninsured/underinsured health care issues.
- Sunset of ½ cent health care surtax that funds Polk Health Care Plan and other safety net programs in 2019.
- Funding for Lakeland Regional Medical Center’s residency program.
- Changes to homeless regulations – moving to require rapid re-housing.
- Lack of retirement preparation.
- Increased resources needed to address elderly population issues such as social and physical isolation; grieving services; combined health problems (medical and mental health); and substance abuse.

Opportunities Created cont.

- Polk County Indigent Health Care Surtax Extension in 2019.
- Catholic Charities has increased food sites and is offering more fresh foods/produce.
- Food programs for hungry children.
- Women Infant and Children (WIC) program changes to encourage more fresh fruits and vegetables.
- Increased interest in and funding for community gardens.
- Polk Vision and other community visioning groups are working on local initiatives to improve the quality of life and economic status of residents.
- Polk graduation data shows improvement.
- Early Warning Response system – schools use this to identify and intervene with students at risk for dropping out. Watching for ABC warning signs: attendance, behavior, course grades.
- Head Start in Polk works with families to help their small children prepare for school and engage in their children’s learning.
- East Coat Migrant Head Start and Redlands Christian Migrant Association provide services to migrant families.
- Parent Universities offer workshops currently at four sites for all parents in the area. Starting with education on finances and then addressing school rules, etc. Perhaps future opportunity to provide health education.
- Community volunteer groups can assist. Viste has developed a health checklist, funded by the United Way, for use by volunteers when delivering meals to the elderly.

<u>Forces (Trend, Events, Factors) cont.</u>	<u>Threats Posed cont.</u>	<u>Opportunities Created cont.</u>
<p>Health Behaviors</p> <ul style="list-style-type: none"> • Personal Responsibility (lifestyle choices, behavior change.) • Health Awareness – proactive education • School based health/health education (medical care, mental health care, etc.) • Teen pregnancy and teen parenting still a persistent problem. • Infant Mortality 	<ul style="list-style-type: none"> • Teen smoking and drug use. • E-cigarettes and hookah lounge/bar popularity. • Increase in sexually transmitted infections (STIs) among all population groups. • Increase in maternal genitourinary infections and STIs. • High adult and childhood obesity rates with associated conditions. • Increase in maternal obesity. • Need for prenatal, breastfeeding, maternal and child health education. • Maternal post-partum depression. • Substance abuse in pregnancy and substance-exposed newborns. 	<ul style="list-style-type: none"> • Tobacco Free Partnership, Students Working Against Tobacco, Inner Act Alliance are active in Polk. • Drug Court helps mitigate issues with those abusing substances and help re-acclimate. • Growing interest in health. • Schools have a captive audience for school based programs to change behavior. • <i>Building a Healthier Polk</i> and other initiatives have been developed to address health issues locally. • School Board is pursuing a grant for identification of behavioral health issues within the schools. • Human milk bank soon to be located in Florida.