FLORIDA HOSPITAL
East Orlando

2014-16 Community Health Plan

May 15, 2014

Florida Hospital East Orlando conducted a tri-county Community Health Needs Assessment (CHNA) in 2013 in collaboration with Orlando Health, Aspire Health Partners (formerly Lakeside Behavioral Health Center), the Orange County Department of Health, and the Health Council of East Central Florida. With oversight by a community-inclusive Community Health Impact Council that served as the hospital's Community Health Needs Assessment Committee, the Assessment looked at the health-related needs of our broad community as well as those of low-income, minority, and underserved populations[i]. The Assessment includes both primary and secondary data.

The community collaborative first reviewed and approved the Community Health Needs Assessment. Next, the Community Needs Assessment Committee, hospital leadership, and the hospital board reviewed the needs identified in the Assessment. Using the Priority Selection processes described in the Assessment, hospital leadership and the Council identified the following issues as those most important to the communities served by Florida Hospital East Orlando. The hospital Board approved the priorities and the full Assessment.

1. Obesity
2. Diabetes

With a particular focus on these priorities, the Council helped Florida Hospital East Orlando develop this Community Health Plan (CHP) or "implementation strategy[ii]." The Plan lists targeted interventions and measurable outcome statements for each effort. Many of the interventions engage multiple community partners. The Plan was posted by May 15, 2014 at the same web location noted below.

Florida Hospital East Orlando's fiscal year is January – December. For 2014, the Community Health Plan will be deployed beginning May 15 and evaluated at the end of the calendar year. In 2015 and beyond, the Plan will be implemented and evaluated annually for the 12-month period beginning January 1 and ending December 31. Evaluation results will be posted annually and attached to our IRS Form 990.

If you have questions regarding this Community Health Plan or Community Health Needs Assessment, please contact Verbelee Nielsen-Swanson, Vice President of Community Impact, at Verbelee.Nielsen-Swanson@flhosp.org.

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[i] The full Community Health Needs Assessment can be found at www.floridahospital.com under the Community Benefit heading.

[ii] It is important to note that the Community Health Plan does not include all Community Benefit efforts. Those activities are included on Schedule H of our Form 990.

Outcome statements marked with a "**" are system initiatives. Funds are distributed to one central program rather than to each campus

OUTCOME GOALS						OUTCOME MEASUREMENTS								
CHNA Priority	**Outcome Statement**	**Target Population**	**Strategies/Outputs**	**Outcome Metric**	**Current Year Baseline**	**Year 1 Outcome Goal - #**	**Year 1 Actual**	**Year 2 Outcome Goal - #**	**Year 2 Actual**	**Year 3 Outcome Goal - #**	**Year 3 Actual**	**Hospital $**	**Matching $**	**Comments**
Obesity	Engage FHMG providers to continue meaningful use measures and create CERNER automation to refer obese patients into weight management practice	Patients of the 5 Florida Hospital Medical Group (FHMG) primary care practices in the primary service area (PSA)	Build an automated flag into the medical record that prompts referral into weight management program for all patients with BMI over 30	Proportion of patient encounters that include a referral into weight management	0	10% increase from baseline		10% increase from year 1		10% increase from year 2				
	Increase and track the proportion of physician office visits (made by adult patients who are obese) that include counseling or education related to weight reduction, nutrition, or physical activity	Pilot with two Florida Hospital Medical Group Primary Care Physicians serving residents of East Orlando	Peer physician education	% of primary care encounters with obese adult patients that include charting on counseling or education	Baseline pending	5% increase		5% increase		5% increase		In-Kind		Dr. Constant-Peter, Michelle Francos, and Dr. Hartman
	Pilot program that encourage an increase the percentage of program participants who maintain a healthy weight	Florida Hospital East Orlando employees and families	Personalized health coaching on nutrition, exercise, and stress management	# of participants who maintain a healthy weight 6, 9 and 12 months post intervention	To get from H100 team based on HRA	70%		80%		90%		Master of Public Health (MPH) students from UF and USF		Dr. Constant-Peter and Michelle Francos
	**Increase the availability of fruits to the diets of the population aged 2 and older	Residents of East Orlando	Deploy Mobile Farmer's Market to provide fresh fruits and vegetables alongside education opportunities	Report of increased consumption by persons aged 2 and older	0-0.5 cup equivalent per 1,000 calories	0.5 cup equivalent per 1,000 calories		0.7 cup equivalent per 1,000 calories		0.9 cup equivalent per 1,000 calories		$329,050 over 2 years	$550,000 over 3 years	Hebni Nutrition Consultants
	**Increase the availability of total vegetables to the diets of the population aged 2 and older	Residents of East Orlando	Mobile Farmer's Market offering food and education to stop at 2 sites in East Orlando once per week	Report of cup equivalent total vegetables consumed by persons aged 2 and older	0-0.8 cup equivalent per 1,000 calories	0.8 cup equivalent per 1,000 calories		1.0 cup equivalent per 1,000 calories		1.1 cup equivalent per 1,000 calories				Hebni Nutrition Consultants

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	**Reduce household food insecurity by introducing low cost, SNAP eligible, fresh fruit and vegetable options to the community	Residents of defined communities in East Orlando	Mobile Farmer's Market to stop at 2 sites in East Orlando once per week	# of individuals who purchase produce from Mobile Farmer's Market	0	2,000		4,000		6,000				Hebni Nutrition Consultants
				Value of support donated to operate the Mobile Farmer's Market	0	$218,850		$110,200		TBD			$550,000 over 3 years	Hebni Nutrition Consultants
	**Increase the availability of fruits to the diets of the population aged 2 and older	Residents of East Orlando	Deploy Mobile Farmer's Market to provide fresh fruits and vegetables alongside education opportunities	Report of increased consumption by persons aged 2 and older	0-0.5 cup equivalent per 1,000 calories	0.5 cup equivalent per 1,000 calories		0.7 cup equivalent per 1,000 calories		0.9 cup equivalent per 1,000 calories		$329,050 over 2 years	$550,000 over 3 years	Hebni Nutrition Consultants
	**Increase the availability of total vegetables to the diets of the population aged 2 and older	Residents of East Orlando	Mobile Farmer's Market offering food and education to stop at 2 sites in East Orlando once per week	Report of cup equivalent total vegetables consumed by persons aged 2 and older	0-0.8 cup equivalent per 1,000 calories	0.8 cup equivalent per 1,000 calories		1.0 cup equivalent per 1,000 calories		1.1 cup equivalent per 1,000 calories				Hebni Nutrition Consultants
	**Increase opportunities for leisure time physical activity in a social setting	Residents of the primary service area	Annual Healthy 100 sponsored community Run for Rescues, SPCA 5k	Participation in 5k	0	300		350		400		In-kind support		Staffing and promotion
	** Provide education to increase knowledge of and positive behaviors toward healthy eating and exercise	Children in the primary service area (PSA) in defined schools	Mission FIT Possible Program for children	Number of children who have completed program	3,461	3,600		3,650		3,700		$130,000	$170,00	Staffing and operational support
	**Offer education program aimed at increasing energy via nutrition, stress management, and exercise	Spouses of Florida Hospital Employees (who are not also employed by the system)	Energy for Performance 4-hour workshop	Number of non-employees who attend class	173	TBD		TBD		TBD		In-kind staff support and materials		
	** Provide education and clinical care to increase knowledge of and positive behaviors toward healthy eating and exercise	Families in the PSA with children who are overweight or obese	Healthy 100 Kids service line and education program	Number of children who have participated in the program	429	430		430		430		$130,000	$170,000	

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	** Provide education and clinical care to increase knowledge of and positive behaviors toward healthy eating and exercise	Families in the PSA with children who are overweight or obese	Healthy 100 Kids service line and education program	Number of children who have participated in the program	429	430		430		430		$130,000	$170,000	
	Continue to offer health education and strategies in the area of chronic disease management to East Orlando residents	Insured and uninsured residents of East Orlando who have a chronic condition or care for someone with a chronic condition	Maintain and continue to offer Chronic Disease Self-Management classes to the East Orlando Community	# of East Orlando residents who complete chronic disease self-management classes	527	500		500		500		$190,000		
	Increase the likelihood of medication adherence among uninsured patients	Uninsured and underinsured patients	Provide prescription medications at little to no cost to the patient	Total cost of prescription medications disbursed to patients	$30,656	$30,700		TBD		TBD				
	**Assist patients with accessing resources that can improve health by increasing the potential for compliance with discharge orders, reducing preventable hospital visits	Insured and uninsured emergency department (ED) and inpatients, with chronic diseases, who have had 3+ hospital encounters during the past 12 months	Continuation of the Bridge Program / Care Management Team	Patients enrolled	203	200		200		200		$135,000		
			Bridge Program vouchers for first two visits to a Primary Care Access Network (PCAN)/ Federally Qualified Health Center (FQHC) medical home	Patients established in PCAN as medical home	173	170		170		170		$6,800 for vouchers		
				**Referrals to Heart Failure Clinic and Apopka Lung Clinic	80	75		75		75		$195,000: Apopka Lung Clinic; $203,337 Heart Failure Clinic		

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				Mental health referrals	54	50		50		50		$135,500: East Orlando Collaborative		
	**Support efforts to reduce heart related conditions through the funding of research and programs	Residents of the primary service area (PSA)	Provide support and board membership to the American Heart Association	Value of support	$100,000	$100,000		$100,000		$100,000		$100,000		
			Encourage emplo9yee participation in the annual Heart Walk	Number of FH walkers	500	600		650		675				
Access to Care	Support enhanced behavioral health services in East Orlando	Residents of East Orlando with behavioral health needs	East Orlando Health Collaborative with FQHC, Aspire, and other community providers	Number of patients seen at FQHCs (Federally Qualified Health Centers) in Alafaya, Hoffner, and Lake Underhill	800	800		TBD		TBD		$135,500		
	**Support services that provide care to the uninsured and underinsured	Uninsured and underinsured residents of Orange County	After Hours Clinic	Value of Support	$95,000	$103,000		TBD		TBD			$65,000 Orange County Health Services	
	**Increase the availability of free or low-cost mammograms	Uninsured and underinsured women in PSA	Women's mobile coach sites and diagnostic centers	Number of women who are screened	3,906	3,980		4,056		4,133		TBD		Staffing and operations
	**Support and expand the PCAN integrated system of care for the medically underserved	Uninsured and Underinsured residents of Orange County	Continue leadership of PCAN (Primary Care Access Network) integrated leadership for uninsured and underinsured	Serve as board chair								Low-Income Pool funds	21 PCAN partners	Maureen Kersmarki and Verbelee Nielsen-Swanson
			Support the capacity and network expansion of Federally Qualified Health Centers	Number of FQHC primary care medical homes	13	13		14		15		$3 million/ year in Low-Income Pool funds	FQHCs	

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			Support the capacity and network expansion of Federally Qualified Health Centers	Number of FQHC primary care patients	92,000	95,000		97,000		98,000		$3 million/ year in Low-Income Pool funds	FQHCs	Maureen Kersmarki
			Support the capacity and network expansion of Orange County Medical Clinic	Number of secondary care patients	10,000	10,200		10,300		10,400		$3 million/ year in Low-Income Pool funds	Orange County Medical Clinic	Maureen Kersmarki
			Continue to provide donated medical services to the Orange County Medical Clinic	Value of support										
	**Encourage medical home enrollment	Uninsured and underinsured residents of East Orlando	Refer uninsured and underinsured emergency department (ED) and inpatients to new Federally Qualified Health Center (FQHC) operated by the Health Care Center for the Homeless (HCCH)	Total number of uninsured and underinsured patients enrolled in the new FQHC	0	300		500		650			HCCH $325,000 Health Resources & Services Administration (HRSA) Grant split between East Orlando and Altamonte	
			Refer uninsured and underinsured emergency department (ED) and inpatients to the five FQHCs operated by Central Florida Family Health Centers	Total number of uninsured and underinsured patients enrolled in the FQHC	30,000	33,000		36,000		40,000			Alafaya & 50, Lake Underhill, Lake Ellenor, Hoffner and Cheney Elementary	
	**Continue to support access to primary care for uninsured and underinsured residents of Orange County	Uninsured and underinsured patients	Provide financial support for operations and case management to Grace Medical Home	Financial Support	$100,000	$100,000		$100,000		$100,000			Grace Medical Orlando Health	

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	** Support capacity expansion for secondary care services and maintain primary urgent care	Uninsured and underinsured residents	Provide financial support to aid in recruitment of secondary care providers and case management at Shepherd's Hope Clinics	Financial support provided	$100,000	$100,000		$100,000		$100,000		$100,000 annually	Physician, nursing, and clerical operations are donated annually via volunteer providers	
		Provide access to services in the form of volunteer physician recruitment to Shepherd's Hope	Focus East Orlando efforts on Dr. Don Diebel Clink	Number of physicians recruited	18	20		30		40	In-kind			
		Provide employee support in the form of volunteer recruitment to Shepherd's Hope	Number of employees who volunteer time	118	130		140		150	In-kind				
		Support efforts to begin and continue electronic medical records integration and information sharing with Shepherd's Hope	Number of sites that have established an electronic medical record system	0	1		4		4					
		Continue to donate clinical services to Shepherd's Hope Patients	Amount of in-kind support donated in clinical services	$345,870	Support to continue as appropriate		Support to continue as appropriate		Support to continue as appropriate					
		Continue to donate clinical services to Shepherd's Hope Patients	Value of donated diagnostic services	$2,382,355	Support to continue as appropriate		Support to continue as appropriate		Support to continue as appropriate					
	**Support services that provide care to the uninsured and underinsured	Uninsured and underinsured residents of Orange County	Florida Hospital Community After Hours Clinic	Value of Support	$95,000	$103,000		TBD		TBD		$65,000 /year from Orange County Health Services		

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	**Support the education and training of medical practitioners in the tri-county region	Nursing and medical students of Valencia College, Seminole State College, University of Central Florida, Florida State University, and Adventist University of Health Sciences	Financially support the professional development and education of medical and nursing students	Value of support	$28 million	$28 million		TBD		TBD		TBD		
	**Support the education and training of medical practitioners in the tri-county region	Nursing and medical students of Valencia College, Seminole State College, University of Central Florida, Florida State University, and Adventist University of Health Sciences	Financially support the professional development and education of medical and nursing students	Value of support	$28 million	$28 million		TBD		TBD		TBD		
	**Support the education and training of medical practitioners in the tri-county region	UCF, VC, SSC, Vo-Tech, Technical Education Center of Osceola County (TECO) and additional schools	Provide sites for clinical rotations and residency sites for graduates of medical education programs	Number of sites	100 academic contracts	100 academic contracts		TBD		TBD		TBD		
	**Continue to support access to primary care for uninsured and underinsured residents of Orange County	Uninsured and underinsured patients	Provide financial support for operations and case management to Health Care Center for the Homeless	Financial Support	$100,000	$100,000		$100,000		$100,000		Value of charity for all homeless causes in the system: $34,492,612		
	Increase the proportion of physician office visits made by adult patients with a diagnosis of diabetes or pre-diabetes that include counseling or education related to diet or nutrition	Florida Hospital Medical Group Primary Care Physicians serving residents of East Orlando	Peer physician education	% of primary care encounters with obese adult patients that include charting on counseling or education	Baseline pending	5% increase		5% increase		5% increase				Dr. Constant-Peter and Michelle Francos

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	**Offer comprehensive evaluation, treatment, and case management to improve quality of life for residents with mental health diagnoses	Uninsured residents of the tri-county region with depression, anxiety, and co-morbid medical conditions	Outlook Clinic	Number of patients seen at the Outlook Clinic	640	650		650		650		$193,340	Space donated by Orange Co. Govt. Health Services	
	**Decrease inpatient and emergency department utilization by the target population	Uninsured residents of the tri-county region with depression, anxiety, and co-morbid medical conditions	Outlook Clinic	Emergency department visits by Outlook Clinic patients	600	432		400		400			Space donated by Orange Co. Govt. Health Services	
				Inpatient admissions from the emergency department by Outlook Clinic patients	191	118		95		95				
	**Increase capacity for accessing services for congestive heart failure	Uninsured and underinsured residents with congestive heart failure	Continue to fund and improve congestive Florida Hospital heart failure clinic at Orange County Medical Clinic	Number of patients seen	757	800		850		850	$203,337	$203,337	Space donated by Orange County Governmen t Health Services	
Mental Health	**Offer comprehensive evaluation, treatment, and case management to improve quality of life for residents with mental health diagnoses	Uninsured residents of the tri-county region with depression, anxiety, and co-morbid medical conditions	Outlook Clinic for Depression & Anxiety – partnership with Mental Health Assn., FH Behavioral Health, Orange County Medical Clinic, UCF School of Social Work and Walgreens	Number of patients seen at the Outlook Clinic	640	700		750		800				
	**Decrease inpatient and emergency department utilization by the target population	Uninsured residents of the tri-county region with depression, anxiety, and co-morbid medical conditions	Outlook Clinic for Depression & Anxiety – partnership with Mental Health Assn., FH Behavioral Health, Orange County Medical Clinic, UCF School of Social Work and Walgreens	Emergency department (ED) visits by Outlook Clinic patients	600	432		400		400				

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		Uninsured residents of the tri-county region with depression, anxiety, and co-morbid medical conditions	Outlook Clinic for Depression & Anxiety – partnership with Mental Health Assn., FH Behavioral Health, Orange County Medical Clinic, UCF School of Social Work and Walgreens	Inpatient admissions from the emergency department (ED) by Outlook Clinic patients	191	118		95		95				
	Actively participate in health planning efforts in Orange County	Uninsured and underinsured residents of Orange County	Continue leadership role with Healthy Orange Florida	Meeting attendance	8 meetings	8 meetings		8 meetings		8 meetings				
			Health Summit	Attendance and support	0	1		TBD		TBD				Health Summit every other year
			Other activities/events developed by the Health Leadership Council	Number of activities/events	0	1		1		1				
****Violent Crime**	Increase access to and awareness of domestic violence resources in the county	Residents of Orange County	Screen for domestic violence and offer resources	# of employees trained to recognize signs of abuse	0	300		1,000		5,000		$50,000		Staff training
	Continue to support domestic violence initiatives in Orange County	Residents of Orange County	Support Harbor House through board membership and donations	Value of support donated to Harbor House	$5,000	$5,000		$5,000		$5,000		In-kind support		Board membership; physician serving in advisory capacity; and donations
			Provide space for the Sexual Assault Treatment Center for Orange County	Value of donated space	$39,892	$39,892		$39,892		$39,892				

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Continuum of Care/ Care Management	Care Management/ Continuum of Care	Establish case management nursing and social work teams to enhance care coordination and community referrals	For identified patients	Increase RN ratios in units	Number of RNs hired to achieve 60% RN /40% SW team ratio	0	60% SW / 40% RN		TBD		TBD		TBD	
		Pilot new model of care coordination in the emergency department	Patients seen in the emergency department	Integrate case management team including social work and nursing dedicated to the ED via engaging and educating ED physicians, RNs, and social workers	Length of stay and time to see patient from ED admission	TBD	TBD		TBD		TBD		TBD	
		Establish a more succinct method for tracking and recording resources	All patients	Develop Resource Center to assist patients with discharge planning needs	Number of patients assisted	0	TBD		TBD		TBD		TBD	
		Develop CCN (Community Care Network) Team	Specific diagnosis-related groups (DRGs)/ Readmissions Conditions	Focus on specific DRGs related to CHF and pneumonia	Reduce readmissions rate	TBD	TBD		TBD		TBD		TBD	
			Patients identified by CCN Team	Implement Health Coaches program	Number of patients seen, evaluated and followed by Health Coaches	0	TBD		TBD		TBD		TBD	
	Support efforts to provide IDs for individuals who do not have identification	Homeless and precariously housed residents of Central Florida	iDignity	Financial support	$25,000	$25,000		TBD		TBD		$25,000		
	**Work with community partners to address/improve the broad health of underserved communities	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Support United Global Outreach (UGO) and other partners in the Bithlo Transformation Effort (in cooperation with Florida Hospital Orlando)	Organizational commitment by Florida Hospital	$100,000	$100,000		$100,000		$100,000				Does not include in-kind

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Social Determinants of Health & Health Disparities			Provide in-kind support such as staff time and printing	Value of in-kind	$50,000	$50,000		$50,000		$50,000				Includes in-kind
	Help UGO build infrastructure and community support	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Engage stakeholders through a Community Advisory Board	Florida Hospital to host 6 meetings per year	6	6		6		6				
				Number of members	35	35		35		35				
	Help UGO build partnerships with vendors and the community	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Number of UGO partners	Number of UGO partners	60	65		70		72				
			Number of Florida Hospital vendors who help in Bithlo	Number of vendors per year	3	4		4		4				
	Help Bithlo receive national recognition as a best practice	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Build UGO relationship with *Stakeholder Health*	Number of touches/ presentations	2	2		2		2				
			Build UGO relationship with *The Advisory Board*	Number of touches/ presentations	1	2		2		2				
			Build UGO relationship with Robert Wood Johnson Foundation NewPublicHealth.org	Number of touches/ presentations	1	1		1		1				
			Association for Community Health Improvement	Number of touches/ presentations	1	1		1		1				

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	Support UGO efforts to improve education in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Provide in-kind and vendor support to grow capacity at Orange County Academy private school	Number of students	60	65		80		100			Value of vendor services	
			Apply influence as needed to ensure the success of the GED program	Number of graduates	5	10		15		25				
			Supply school uniforms	Value of uniforms	210 shirts and matching donations for pants	300 shirts and matching donations for pants		TBD		TBD		$1,379	$500 in-kind for uniforms from Florida Emergency Physicians	
			Supply new shoes for school	Pairs of shoes donated	42 pairs	60 pairs		TBD		TBD		$1,952		
	Support UGO efforts to improve transportation in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Continue to help UGO engage elected officials in the transportation solution	Number of elected officials	$5	$5		5		5				
				Maintain/expand LYNX operations in Bithlo	Pick-up Line	Pick-up Line		Pick-up Line						
	Supports UGO efforts to improve housing in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Work with UGO to identify potential housing partners	Number of potential partner links (such as Democracy Collaborative at University of Maryland)	0	1		2		2				

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			Ask Florida Hospital employees to participate in housing repairs	Number of volunteers	0	25		25		30				
	Support UGO efforts to offer permanent Health Care services in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Work with UGO and other partners to provide quality health care services in Bithlo	Number of health partners	4	5		5		5				
	Provide free, onsite, preventative dental services. Increase dental literacy and access for underserved and insured	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Bithlo Dental services	Number of unique patients served	530	530		TBD		TBD		$100,000	$50,00	
				Monetary Value of dental services	$438,000	TBD		TBD		TBD				
			Work with UGO to provide affordable dental services	Number of dental partners	4	3		3		3				
				Number of dental events	8	8		TBD		TBD				
				Number of toothbrushes and dental care items distributed	414	450		TBD		TBD				
				Number of sealants	207	250		TBD		TBD				
			Help establish permanent dental services in Bithlo through donation of a 5,700sq. ft. modular building	Donation of the modular by Florida Hospital	1	1		1		1		Building value		

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			Support behavioral health with Aspire Health Partners & University of Central Florida	Permanent location for the modular	0	1		1		1				
			Support vision services with Central Florida Association of Optometrists through the donation of a 5,700 sq. ft. modular building	Permanent location for the modular	0	1		1		1				
			Strongly encourage Community Health Centers (CHC) to maintain the Federally Qualified Health Center (FQHC) in Bithlo	FQHC presence in Bithlo	1	1		1		1				
	Support UGO efforts to improve the environment in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Support efforts to bring county water to Bithlo	Number of contacts/discussions with policy makers	0	3		3		3				
			Support UGO efforts to clean up A-Z Landfill	Number of contacts/discussions with policy makers	0	3		3		3				
			Support UGO efforts to clean up benzene from gas station leak	Number of contacts/discussions with policy makers	0	3		3		3				
			Support UGO efforts with the state Super Act	Number of contacts/discussions with policy makers	0	3		3		3				
	Support UGO efforts to build a sense of community in Bithlo	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Support UGO Community Festivals and Back to School Bash	Number of events	1	2		2		2				In-kind volunteers and donated services

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CHNA Priority	Outcome Statement	Target Population	Strategies/Outputs	Outcome Metric	Current Year Baseline	Year 1 Outcome Goal - #	Year 1 Actual	Year 2 Outcome Goal - #	Year 2 Actual	Year 3 Outcome Goal - #	Year 3 Actual	Hospital $	Matching $	CHNA Priority
				Number of children's physicals	92	TBD		TBD		TBD				In-kind volunteers and donated services
				Number of backpacks donated	780	TBD		TBD		TBD				In-kind volunteers and donated services
				Number of child vision screenings	59	TBD		TBD		TBD				In-kind volunteers and donated services
				Haircuts	55	TBD		TBD		TBD				In-kind volunteers and donated services
				Immunizations	51	TBD		TBD		TBD				In-kind volunteers and donated services
	Support UGO efforts to provide for basic needs	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Support UGO food pantry through renovations	Number of renovations	1	0		1		0				
			Support UGO clothing boutique	Number of clothing items donated	20	50		50		100				
	Support UGO efforts around economic opportunity	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Support Brasfield & Gorrie *Hire Local Bithlo*	Number of jobs	0	15		20		25				
			Consider the feasibility of expanded Florida Hospital employment of qualified Bithlo residents	Number of jobs	0	10		15		25				
	Support UGO development of Transformation Village	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Help with land purchase	Number of land purchases	1	0		1		1		$120,000	$60,000	

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CHNA Priority	Outcome Statement	Target Population	Strategies/Outputs	Outcome Metric	Current Year Baseline	Year 1 Outcome Goal - #	Year 1 Actual	Year 2 Outcome Goal - #	Year 2 Actual	Year 3 Outcome Goal - #	Year 3 Actual	Hospital $	Matching $	CHNA Priority
			Develop a system to use fresh produce from the FarmDaddy garden system	Value of produce	0	TBD		TBD		TBD				
	Offer health education and strategies in the area of chronic disease management to Bithlo residents	Bithlo community - census tract 166.22, zip codes 32820 & 32833	Expand Stanford Chronic Disease Self-Management program to Bithlo	# of Bithlo residents who complete chronic disease self-management classes	0	10		20		30		$500		Staff time and material

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