



KentuckyOne Health®
Flaget Memorial Hospital

Community Health Needs Assessment FY 2017-19



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Introduction

Forward

During 2015-2016, Flaget Memorial Hospital conducted a community health needs assessment (CHNA) to support its mission to enhance the health of people in the communities it serves by identifying health needs in these communities and prioritizing the allocation of hospital resources to meet those needs. Additionally, the completion of this report and subsequent approval and adoption by the KentuckyOne Health Board of Directors complies with CHNA requirements mandated by the *Patient Protection and Affordable Care Act of 2010* and federal tax-exemption requirements. Special CHNA requirements from Catholic Health Initiatives (CHI) are also reflected in this report.

Executive Summary

The community health needs assessment process involved the following steps:

- The “community served” was defined utilizing inpatient data on patient county of residence.
- Secondary data in the form of population demographics and socioeconomic characteristics of the community was gathered and reported using various sources.
- Primary data was solicited from the following groups:
 - Lincoln Trail District Health Department (LTDHD)
 - Residents of the community served by Flaget Memorial Hospital, including individuals representing the senior population and the medically-underserved
 - KentuckyOne Health Strategy and Business Development representatives
 - Comments on Flaget Memorial Hospital’s previous CHNA
- Health needs were prioritized according to a weighted ranking system using the aforementioned data sources.
- Flaget Memorial Hospital convened its leadership team to formally identify the priority health needs based on the data and hospital resources. These needs have been identified as:
 - Tobacco Use
 - Alcohol and Drug Use
 - Community Safety
- An inventory of health care facilities and resources was prepared.
- These findings were presented to the KentuckyOne Health Board of Directors for approval and adoption for July 1, 2016-June 30, 2019 (FY 2017-19).
- This final report will be made public and widely-available on or before June 30, 2016.

Organization Description

Flaget Memorial Hospital opened in 1951 as a result of the determination of the Sisters of Charity of Nazareth who pioneered the development of health care institutions in Kentucky. In 2005, Flaget Memorial Hospital moved into its current facility on a large campus so as to allow its expansion for many years to come. Today, it is a 52-bed hospital located in Bardstown, KY offering a full range of services including cancer care, orthopedics, women’s care, weight loss surgery and primary care.

In 2010, the hospital opened the Flaget Cancer Center to better serve local residents. The center offers state-of-the-art radiation and medical oncology from professional, compassionate physicians and full support team. Additionally, the

hospital's second and newest medical office building is houses Flaget Center for Orthopedics, Frazier Rehab at Flaget Memorial and primary care offices.

Flaget Memorial Hospital is part of KentuckyOne Health, one of the largest health systems in Kentucky with more than 200 locations including hospitals, outpatient facilities and physician offices, and more than 3,100 licensed beds. An 18-member volunteer board of directors governs KentuckyOne Health, its facilities and operations, including Flaget Memorial Hospital, with this mission:

- **Our Purpose:** To bring wellness, healing and hope to all, including the underserved.
- **Our Future:** To transform the health of communities, care delivery and health care professions so that individuals and families can enjoy the best of health and wellbeing.
- **Our Values:**
 - **Reverence:** Respecting those we serve and those who serve.
 - **Integrity:** Doing the right things in the right way for the right reason.
 - **Compassion:** Sharing in others' joys and sorrows.
 - **Excellence:** Living up to the highest standards.

Community Served by the Hospital

Defined Community

For the purposes of our community health needs assessment, the community served by Flaget Memorial Hospital is defined as the geographic area from which a significant number of the patients utilizing hospital services reside. Inpatient discharge data for Flaget Memorial Hospital from July 1, 2014-June 30, 2015 (the latest fiscal year available as of data collection for this writing) shows that Nelson County was the county of residence for the largest concentration of patients, with 68.2% of patients living in Nelson County. Therefore, the service area for this community health needs assessment is defined as Nelson County. The chart below shows residence information by county and zip code:

FY15 Inpatient Discharges County of Residence—Flaget Memorial Hospital				
<i>Zip Code</i>	<i>City</i>	<i>County, State</i>	<i>Discharges</i>	<i>Percent of Total</i>
40004	Bardstown	Nelson - KY	1,070	54.0%
40069	Springfield	Washington - KY	134	6.8%
40008	Bloomfield	Nelson - KY	95	4.8%
40051	New Haven	Nelson - KY	95	4.8%
40013	Coxs Creek	Nelson - KY	92	4.6%
Other			496	25.0%
FY15 Total Discharges			1,982	100.0%
Source: KentuckyOne Health strategy				

Identification and Description of Geographical Community

Nelson County is home to the county seat of Bardstown, KY. Bardstown is located approximately 42 miles south of Louisville, which is Kentucky's largest city, in north-central Kentucky. The 2014 population estimate in Nelson County was 44,812. Counties boarding Nelson County include Anderson, Bullitt, Hardin, Larue, Marion, Spencer and Washington.

Nelson County Population Demographics

Understanding the population demographics of the community served by Flaget Memorial Hospital helped the hospital team understand characteristics unique to their community and can impact the identification of health needs. Notable for Nelson County in comparison to the Kentucky overall is the rate of population growth from 2010 to 2014, which is higher than the average growth rate for Kentucky.

2014 Nelson County Community Demographics			
	<i>Community Metric</i>	<i>Nelson County</i>	<i>Kentucky</i>
Population	Population, 2014 Estimate	44,812	4,413,457
	Population, Percent Change – April 1, 2010 to July 1, 2014	3.2%	1.7%
Age	Persons Under 5 Years	6.7%	6.3%
	Persons Under 18 Years	25.0%	22.9%
	Persons 65 years and Over	13.5%	14.8%
Gender	Female Persons	50.8%	50.8%
Race	White (alone)	95.3%	88.3%
	Black or African American (alone)	5.3%	8.2%
	American Indian and Alaska Native (alone)	0.2%	0.3%
	Asian (alone)	0.6%	1.4%
	Native Hawaiian and Other Pacific Islander (alone)	0.1%	0.1%
	Two or More Races	1.5%	1.8%
	Hispanic or Latino	2.1%	3.4%
Source: U.S. Census Bureau: State and County QuickFacts			

Health Data for Nelson County Residents

Health Outcomes

Health outcomes detail how healthy a community is and are measured by the Robert Wood Johnson Foundation *County Health Rankings* population health model as length of life (mortality) and quality of life (morbidity).

Mortality

Mortality is described in this county by two data sets: 1) the leading causes of death and 2) premature death.

1. Leading Causes of Death

The 2014 leading causes of death data for this community (the most recent year available as of this writing) shows that cancer and heart disease are the major causes of death in this community and outweigh the third leading cause of mortality by more than two times as many deaths.

Health Outcomes: Mortality			
Nelson County, KY Leading Causes of Death 2014			
#	Leading Causes of Death	Deaths	Crude Rate Per 100,000 Residents
1	Cancer	73	162.9
2	Diseases of the Heart	65	145.1
3	Chronic Lower Respiratory Disease	32	71.4
4	Cerebrovascular Disease	20	44.6
5	Accidents	19	Unreliable
6	Alzheimer's Disease	17	Unreliable
7	Kidney Diseases	13	Unreliable
8	Septicemia	12	Unreliable
9	Diabetes	11	Unreliable
10	Influenza and Pneumonia	10	Unreliable
Source: Centers for Disease Control and Prevention, National Center for Health Statistics (2015)			

2. Premature Death

Premature death is another mortality measure, but more heavily reflects attention on preventable deaths by reviewing the years of potential life lost before age 75 (YPLL-75). For example, a death at age 50 contributes 25 years of life lost. The most recent data available for this measure is from 2010-2012 and is expressed as a rate per 100,000 Nelson County residents. The Nelson County rate shows that Nelson County residents have slightly fewer years of life lost compared to Kentucky residents overall but experience more years of life lost as compared to top U.S. counties in this performance area.

Health Outcomes: Mortality			
Premature Death			
<i>Years of Life Lost Before Age 75 Per 100,000 Residents (Data from 2010-2012)</i>	<i>Nelson County</i>	<i>Kentucky Average</i>	<i>Top U.S. Performer</i>
	7,793	8,900	5,200
Source: County Health Rankings and Roadmaps (2015)			

Morbidity

Morbidity is described in this county by two data sets: 1) the top ten diagnosis groups responsible for inpatient hospital discharges in Nelson County and 2) self-reported quality of health metrics.

1. Top Ten Diagnosis Groups Responsible for Inpatient Hospital Discharges

The 2014 Nelson County inpatient hospital discharges (the most recent year available as of this writing) show diagnoses related to the circulatory and musculoskeletal systems are the most common diagnosis groups responsible for making patients sick enough to be admitted to the hospital.

Health Outcomes: Morbidity			
Nelson County, KY Top Ten Diagnosis Groups Responsible for Inpatient Hospital Discharges			
#	Top Diagnosis Groups for Hospital Discharges	CY 2014 Discharges	Percent of Total
1	Circulatory System	680	13.59%
2	Musculoskeletal System/ Connective Tissue	564	11.27%
3	Respiratory System	522	10.43%
4	Digestive System	402	8.03%
5	Infectious and Parasitic Diseases	392	7.83%
6	Nervous System	327	6.53%
7	Mental Diseases/Disorders	272	5.43%
8	Kidney and Urinary Tract	234	4.68%
9	Metabolic Diseases/Disorders	147	2.94%
10	Hepatobiliary System and Pancreas	100	2.00%
Source: Kentucky Hospital Association InfoSuite CY2014 Discharges (excluding Normal Newborn)			

2. Self-Reported Quality of Health Metrics

The self-reported health metrics show the perception that Nelson County residents have about their own health. Nelson County residents perceive their own health to be better than the general population perceives their health to be in Kentucky overall, noting fewer days of poor physical and mental health, but Nelson County residents still report poorer health than national benchmarks.

Health Outcomes: Morbidity			
Quality of Life Metrics			
Self-Reported Health Metric	Nelson County	Kentucky	Top U.S. Performers
Poor or Fair Health	19%	21%	10%
# of Poor Physical Health Days in 30 Days	4.1	4.8	2.5
# of Poor Mental Days in 30 Days	3.5	4.3	2.3
Source: County Health Rankings and Roadmaps (2015)			

Health Factors

Health factors influence the health of a community and are measured by four different factors: health behaviors, clinical care, social and economic factors, and the physical environment. Each of these factors encompasses several measures, all adding up to what is known as the social determinants of health. The World Health Organization defines social determinants of health as “the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.”

Health Behaviors

Health behaviors describe the individual choices community members make that impact their overall health. Behaviors related to tobacco use, diet and exercise, alcohol and drug use, and sexual activity are measured against Kentucky and national rates. Notable for Nelson County is a high rate of excessive drinking compared with both state and national averages. Although on par with the state averages for health behaviors, Nelson County exhibits high rates of adult smoking, physical inactivity and obesity as compared to national benchmarks. *Health behaviors are responsible for 30% of overall health outcomes.*

Health Factors: Health Behaviors			
Health Behaviors Related to Alcohol and Drug Use			
Health Behaviors	Nelson County	Kentucky	Top U.S. Performers
Adult Smoking Rate ¹	30%	26%	14%
Excessive Drinking Rate ¹	21%	12%	10%
Drug Overdose Deaths Per 100,000 Residents ²	13.39	24.63	13.5
Health Behaviors Related to Sexual Activity			
Chlamydia Incidence Per 100,000 Residents ¹	589	394	138
Teen Births Per 1,000 Female Residents Ages 15-19 ¹	45	48	20
Health Behaviors Related to Diet and Exercise			
Physical Inactivity Rate ¹	29%	29%	20%
Adult Obesity Rate ¹	32%	32%	25%
Sources: County Health Rankings and Road (2015) ¹ and 2014 Overdose and Fatality Report ²			

Clinical Care

Clinical care refers to access to care (measured by the uninsured rate and the ratio of community residents to providers) and quality of care (measured by preventable hospital stays). Notable for Nelson County is the low rate of preventable hospital stays, which is lower than the Kentucky average, potentially indicating that in Nelson County there is increased accessibility to primary care services and more effective hospital services than in other parts of Kentucky. However, contradicting this is the higher than state and national averages for ratios of both residents to primary care providers and residents to mental health providers to residents. *Clinical care factors are responsible for 20% of overall health outcomes.*

Health Factors: Clinical Care			
<i>Clinical Care Measures</i>	<i>Nelson County</i>	<i>Kentucky</i>	<i>Top U.S. Performers</i>
Uninsured Rate	16%	16%	11%
Preventable Hospital Stays Per 1,000 Medicare Enrollees	56	94	41
Ratio of Residents to One Primary Care Physician	2, 216: 1	1,551: 1	1,045: 1
Ratio of Residents to One Mental Health Provider	795: 1	621: 1	386: 1
Source: County Health Rankings and Roadmaps (2015)			

Social and Economic Factors

Social and economic factors encompass education, employment, income, family and social support, and community safety. There are relatively low numbers of social associations in both Nelson County and in the state overall as compared to national benchmarks. This indicates the potential for low levels of social support among Nelson County residents. *Social and economic factors are responsible for 40% of overall health outcomes.*

Health Factors: Social and Economic Factors			
<i>Social and Economic Measures</i>	<i>Nelson County</i>	<i>Kentucky</i>	<i>Top U.S. Performers</i>
High School Graduation	87%	86%	NA
Some College	49.6%	58.1%	71%
Unemployment	6.8%	8.3%	4%
Children in Poverty	20%	26%	13%
Income Inequality (the ratio of household income at the 80th percentile to that at the 20th percentile)	4.3	5.1	3.7
Social Associations (the number of associations per 10,000 residents)	11.1	10.8	22.0
Violent Crimes Per 100,000 Residents	118	235	59
Source: County Health Rankings and Roadmaps (2015)			

Physical Environment

Physical environment factors include air and water quality, as well as housing and transit. Transportation is often not considered when measuring housing affordability, so it is included here to better understand the overall affordability of life in Nelson County. Nelson County residents experience high costs of combined housing and transportation costs, owing in part to the lack of transit access in the community. As far as environmental conditions, particulate matter in Nelson County is higher than national benchmarks, but at the state average. Drinking water is safe with no indicated drinking water violations, which is better than the Kentucky average. *Physical environment factors account for 10% of overall health outcomes.*

Health Factors: Physical Environment			
<i>Physical Environment Health Factors</i>	<i>Nelson County</i>	<i>Kentucky</i>	<i>Top U.S. Performers</i>
Air Pollution—Particulate Matter ¹	13.4	13.5	9.5
% of Residents Affected By Drinking Water Violations ¹	0	9%	0%
% of Residents With Severe Housing Problems ¹	12%	14%	9%
% of Household Income Spent On Housing and Transportation ²	60%	NA	≤45%
Transit Ridership % of Workers ²	0%	NA	NA
Transit Access ²	0	NA	10
Source: County Health Rankings and Roadmaps (2015) ¹ , Housing and Transportation Affordability Index (2015) ²			

Community Input, Data Sources and Collaborators

Data Sources

Data sources used in this report include:

- Center for Neighborhood Technology
 - The *Housing and Affordability Transportation Index* was used to determine the potential impact of housing and transportation costs on the health outcomes in the community.
- Centers for Disease Control and Prevention
 - The *Community Health Status Indicators (CHSI 2015)* were used to provide comparative health data between this community and other like communities.
 - The *Underlying Causes of Death (2014)* were used to determine the mortality in the community served.
- Kentucky Cabinet for Health and Family Services
 - The *March 2016 Inventory of Health Facilities and Services* was used to identify other community resources potentially-available to address health needs.
- Kentucky Hospital Association
 - The *Top Ten Diagnostic Categories Responsible for Inpatient Hospitalizations (2014)* report was used to determine the morbidity in the community served.
- Kentucky Office of Drug Control Policy (Commonwealth of Kentucky Justice & Public Safety Cabinet)
 - The *2014 Overdose Fatality Report* was used to determine the effect of substance abuse on the community.
- Robert Wood Johnson Foundation
 - The *2015 County Health Rankings and Roadmaps* were used to determine the varying measures of health in the community served.
- United States Census Bureau
 - The *2014 Nelson County Quick Facts* were used to illustrate community demographics.

Primary Data: Community and Organizational Input

- Community Input
 - Primary data from the community served by the hospital was solicited by Flaget Memorial Hospital and the Lincoln Trail District Health Department between December 2015 and February 2016. Both organizations shared a Survey Monkey link with patients and community members to provide feedback about their perception of health and safety in the community. The survey link was also made available on Flaget Memorial Hospital's section of the KentuckyOne Health website when the survey was active: <http://www.kentuckyonehealth.org/flaget>. Paper copies of the survey were also made available at Flaget Memorial Hospital in admissions and waiting areas. The Lincoln Trail District Health Department also made paper copies of the survey available at community events and to patients utilizing health services at the health department.
 - The anonymous survey asked community members to prioritize their health needs, identify barriers to good health and rate risky health behaviors in the community. The survey asked about perceptions of community safety and where community members access health information. The survey also asked basic demographic questions to cross-walk specific needs to certain populations.

- Soliciting input from this group satisfies the IRS requirement to take into account input from leaders, representatives or members of medically-underserved populations in the community served by the hospital. Additionally, the system used to prioritize health needs with input from those representing the broad interests of the community meets new IRS requirements to do this.
- Soliciting this input regarding community safety and soliciting input from those representing the senior population satisfies the CHI requirement to include this input.
- Physician and Community Leader Feedback
 - Physician and community leader feedback was solicited between December 2015 and February 2016. Flaget Memorial Hospital shared a Survey Monkey link asking health care providers and those with special expertise on health in Nelson County (including the health department) to provide their feedback about the perception of health and safety in the community. In addition to basic demographic information, this survey asked about patient populations served by the survey-taker's organization.
 - Soliciting input from this group satisfies the IRS requirement to take into account input from leaders, representatives or members of medically-underserved populations in the community served by the hospital. Additionally, the system used to prioritize health needs with input from those representing the broad interests of the community meets new IRS requirements to do this.
- Lincoln Trail District Health Department (LTDHD)
 - Primary data collection was completed in conjunction with the LTDHD. Although the LTDHD represents a community beyond just Nelson County, their staff dedicated to work in Nelson County provided feedback on the community health status and community needs through the community leader survey mentioned above.
 - Representatives of Flaget Memorial Hospital also held a focus group with the LTDHD to understand their concerns about health in Nelson County in July 2015.
 - Soliciting the LTDHD's input satisfies the IRS requirement to take into account feedback from local health departments with expertise relevant to the needs of the community served by the hospital. Additionally, feedback from the LTDHD further represents feedback from the underserved, including the senior population, in Nelson County due to the special knowledge of local health departments.
- Regional Strategy Representative
 - Michael Spine, Senior Vice President, Strategy and Business Development for KentuckyOne Health, provided feedback for this report in the form of prioritizing 13 health measures for each KentuckyOne Health hospital, including Flaget Memorial Hospital in January 2016. Mr. Spine considered county-level data in conjunction with each measure's potential link to KentuckyOne Health's strategic alignment and the likelihood of building sustainable strategies to address those efforts related to each health measure.
 - Soliciting Mr. Spine's input satisfies the CHI requirement for a representative from KentuckyOne Health's regional strategy and business development department to be engaged in the CHNA process.

Third Party Collaboration

No third-party organizations were involved in the writing of this report outside of the collaborating parties, and their specific involvement efforts detailed on the lists above. KentuckyOne Health is wholly responsible for the data gathering and needs analysis in this report.

Information Gaps

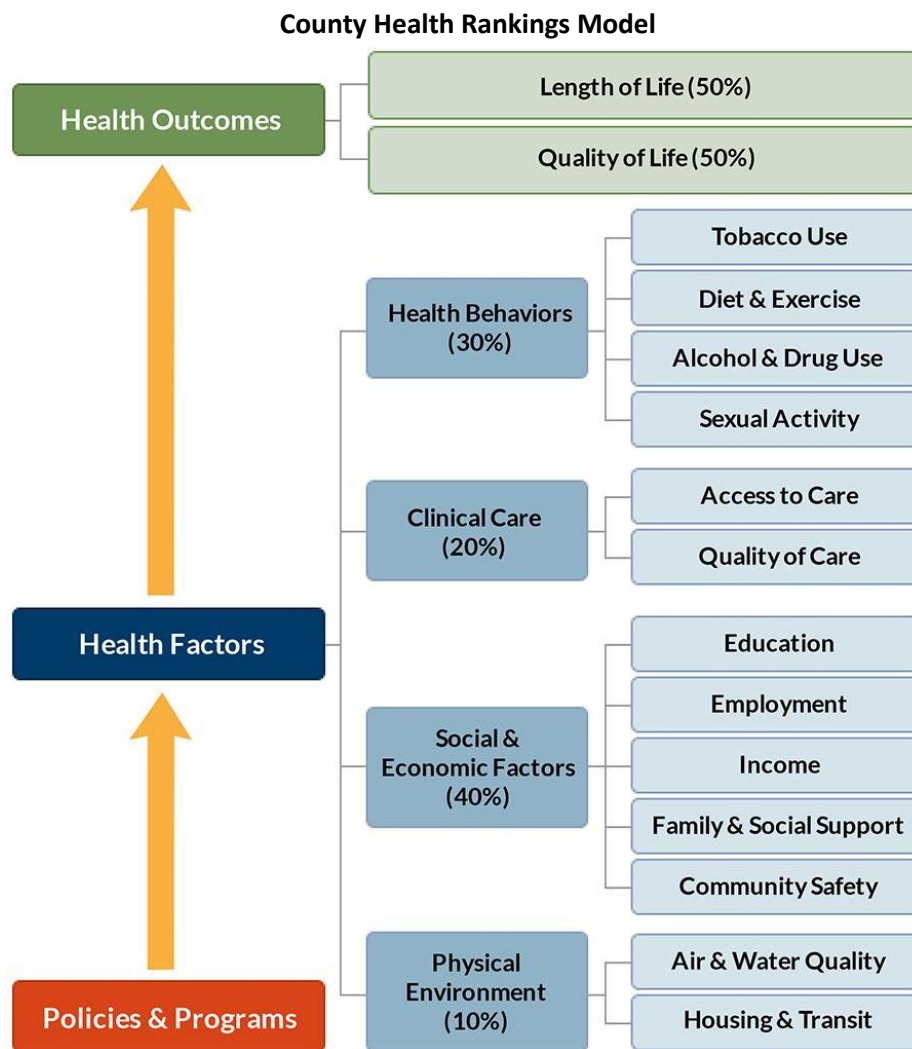
As is often the case with data collection, the data collected for this report contained some data that was two to four years old. In the interest of maintaining consistent reporting sources across all KentuckyOne Health hospitals for this CHNA process, some data, for example the uninsured rate reported by the *County Health Rankings* data, had multiple options for source material that may have reflected differently than the data we chose due to differences in those sources' reporting methods.

Community Health Needs Assessment Process

County Health Rankings Population Health Model

As described earlier in this report, our main data source, the *County Health Rankings*, is based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places. This model tells us that the vast majority of health outcomes—measured by both length of life and quality of life—are determined by the health factors in these categories: social and economic factors, health behaviors, clinical care and the physical environment.

These health factors represent what is commonly referred to as social determinants of health. The model shows that 40% of our health outcomes are determined by social and economic factors, 30% are determined by health behaviors, 20% are determined by clinical care, and 10% are determined by our physical environment. Each factor has multiple measures associated with it. A fifth set of health factors, genetics, is not included in these rankings because these variables cannot be impacted by community-level intervention.



County Health Rankings model © 2014 UWPHI

Purpose-Focused Prioritization of Health Needs

An analysis of various health outcomes and factors can illustrate opportunities for our hospitals to address our community's health needs. By prioritizing which opportunities to address health needs are the most effective and applicable for the hospital's resources, we best understand how to be a community leader who can actively participate in improving the community's habits, culture, and environment. In our effort to address the most influential health factors that can be impacted by community-level intervention, we have included a weighted measure of the health needs to give additional emphasis to health needs that more heavily influence health outcomes. Using a ranking system to acknowledge this impact on health illustrates KentuckyOne's commitment to bringing wellness, healing and hope to all as we recognize the disproportionately negative impact of these social determinants on the health of the poor, vulnerable and underserved in our communities.

Process for Collecting and Analyzing Data

Data was collected between June 2015-March 2016 according to the descriptions in the "Data Sources" section, and website links to these resources can be found in the "References" section of this report.

In order to prioritize the health needs of our community, we developed a ranking system. Health needs were assessed on eight prioritization factors: magnitude, impact on mortality, impact on morbidity, trends, community input, strategic alignment, comparison to peer communities and common identification. Each factor received a score of zero to four, with a four indicating the greatest need possible for that particular factor. The total score is the sum of all prioritization factors for that particular measure, and the possible total score is 32.

Additionally, we included a weighted scale to account for the measure of influence of each set of health factors. The measure of influence is the percentage of effect that this category of health factors has on health outcomes. The weighted score was created by multiplying the total score for each health measure by the percentage of their influence on overall health. For example, tobacco use is a health behavior. If all eight categories added up to a total score of 21, we then multiplied this total score by 30%—the measure of influence for a health behavior according the *County Health Rankings* model. This weighted score was compared against the other categories. The factors with the highest weighted scores were identified as community health needs for the community served.

The descriptions on the following pages provide the methods used to score each health need according to the eight prioritization factors.

1. Magnitude: How many people are personally affected by this health need?

Rankings for this factor were based on the magnitude of the health need, or how many residents in the community served were personally affected by this health need. Each health need was correlated with a measurable health behavior or factor. The percentage of the population whose personal health was impacted by that behavior or factor was ranked according to the percent of the community personally affected.

A score of 0-4 was given to each of the 16 health measures as follows:

- 0= none of the residents in the community served are affected by health need
- 1= Health measure ranked thirteen-sixteen by number of residents affected
- 2= Health measure ranked nine-twelve by number of residents affected
- 3= Health measure ranked five-eight by number of residents affected
- 4= Health measure ranked one-four by number of residents affected

Percent of Nelson County Residents Impacted by Health Needs				
<i>Ranking</i>	<i>Health Behavior/Factor</i>	<i>% of Population</i>	<i>Correlating Health Measure</i>	<i>Score</i>
1	Adult Smokers ¹	30%	Tobacco Use	4
2	Physical Inactivity ¹	29%	Diet and Exercise	4
3	Excessive Drinking ¹	21%	Alcohol and Drug Use	4
4	Inadequate Social Support ⁴	17%	Family and Social Support	4
5	Living in Poverty ⁴	17%	Income	3
6	Uninsured ¹	16%	Access to Care	3
7	Did Not Graduate High School ¹	13%	Education	3
8	Severe Housing Problems ¹	12%	Housing and Transit	3
9	Unemployment Rate ¹	8.1%	Employment	2
10	Preventable Hospital Stays ⁴	5.6%	Quality of Care	2
11	Do Not Live Close to Grocery Store ⁴	4.5%	Diet and Exercise	2
12	% of Deaths Due to Drug Use ²	1.6%	Alcohol and Drug Use	2
13	Chlamydia Rate ¹	0.59%	Sexual Activity	1
14	Violent Crime ¹	0.19%	Community Safety	1
15	Drinking Water Violations ¹	0%	Air & Water Quality	0
16	Transit Ridership % Workers ³	0%	Housing and Transit	0
Sources: County Health Rankings ¹ , 2014 Overdose Fatality Report ² , Housing and Transportation Affordability Index ³ , Centers for Disease Control and Prevention ⁴				

2. Impact on Mortality (Length of Life): How is this health need related to the leading causes of death in this community?

Rankings for this factor were based on risk of mortality associated with this health need by reviewing the Centers for Disease Control and Prevention's *15 Underlying Causes of Death* in the community for the most recent year available as of this writing (2014). The leading causes of death were ranked in order at the top of the chart and given an "X" as they related to the health measures listed on the side of the chart. For our purposes, a health measure was defined as being related to a leading cause of death if there is an established causal and/or correlating relationship between the two. The number of linkages to the leading causes of death (indicated by the number of "X's") was totaled for each health measure.

A score of 0-4 was given to each of the 13 health measures as follows:

- 0= health measure does not correlate to any leading causes of death
- 1= health measure correlates to one leading cause of death
- 2= health measure correlates to two leading causes of death
- 3= health measure correlates to three leading causes of death
- 4= health measure correlates to four or more leading causes of death

Leading Causes of Death: Nelson County (2014)											
Measures	#1: Cancer	#2: Diseases of the Heart	#3: Chronic Lower Respiratory Diseases	#4: Cerebrovascular Diseases	#5: Accidents	#6: Alzheimer's Disease	#7: Kidney Diseases	#8: Septicemia	#9: Diabetes	#10: Influenza and Pneumonia	Score
Tobacco Use	X	X	X		X		X			X	4
Diet and Exercise	X	X	X				X		X		4
Alcohol and Drug Use	X	X	X	X	X		X			X	4
Sexual Activity	X										1
Access to Care	X	X	X		X		X	X	X	X	4
Quality of Care		X	X		X		X	X	X	X	4
Education		X									1
Employment											0
Income	X	X			X		X	X		X	4
Family & Social Support		X									1
Community Safety				X							1
Air & Water Quality	X				X					X	3
Housing & Transit	X	X	X	X	X		X			X	4
Source: Centers for Disease Control and Prevention, National Center for Health Statistics (2015)											

3. Impact on Morbidity (Quality of Life): How does this need relate to this hospital community's discharge data and indicate what makes this community sick?

Rankings for this factor were determined by the impact that this health need can have on quality of life by assessing underlying reasons for inpatient hospitalization in the community served. The Kentucky Hospital Association provided the top ten diagnosis groups responsible for all of Nelson County hospital discharges. The diagnosis groups are listed on the chart in the order of the greatest to least number of discharges. Each health measure was assessed for its relation to the diagnosis group. For our purposes, a health measure was defined as being related to a diagnosis group if there was an established causal and/or correlating relationship between the measure and the diagnosis group.

A score of 0-4 was given to each of the 13 health measures as follows:

- 0= this health measure does not correlate with any diagnosis groups
- 1= this health measure directly correlates with the diagnosis group responsible for inpatient hospitalizations in the top four-ten diagnosis groups (#4-#10)
- 2= this health measure directly correlates with the diagnosis group responsible for the third-highest (#3) inpatient hospitalizations
- 3= this health measure directly correlates with the diagnosis group responsible for the second-highest (#2) inpatient hospitalizations
- 4= this health measure directly correlates with the diagnosis group responsible for the highest (#1) inpatient hospitalizations

Nelson County, KY Top Ten Diagnosis Groups Responsible for Inpatient Hospital Discharges (2014)

Measures	#1: Circulatory System	#2: Musculoskeletal System/Connective Tissue	#3: Respiratory System	#4: Digestive System	#5: Infectious and Parasitic Diseases	#6: Nervous System	#7: Mental Disease/Disorders	#8: Kidney and Urinary Tract	#9: Metabolic Diseases/Disorders	#10: Hepatobiliary System and Pancreas	Score
Tobacco Use	X		X						X		4
Diet and Exercise	X	X	X	X			X	X	X		4
Alcohol and Drug Use	X						X	X	X	X	4
Sexual Activity								X		X	1
Access to Care	X	X	X	X	X	X	X	X	X	X	4
Quality of Care	X	X	X	X	X	X	X	X	X	X	4
Education											0
Employment											0
Income	X	X	X	X	X	X	X	X	X	X	4
Family & Social Support							X				1
Community Safety		X									3
Air & Water Quality			X								2
Housing & Transit			X								2

Source: Kentucky Hospital Association InfoSuite CY2014 Discharges (excluding Normal Newborn)

4. Trends: How does the measure of this need compare to previous years?

Rankings for this factor reflected the need to assess progress made toward improved community health since the previous CHNA. Data was collected from the Robert Wood Johnson Foundation *County Health Rankings* to compare the community's 2015 health rankings to its 2012 health rankings (when this community data was last gathered for the previous CHNA). Areas that are worsening, or are improving but are still comparatively unhealthy outcomes as compared to other communities (considered an "Area to Explore"), were recognized in the ranking of these measures.

A score of 0-4 was given to each of the 13 health measure as follows:

- 0= health measure is currently trending towards improved health
- 1= health measure is trending the same as in previous years
- 2= health measure is trending the same as or better than in previous years AND is an Area to Explore in the *County Health Rankings* (marked in red)
- 3= health measure is trending towards worse health
- 4= health measure is trending towards worse health AND is an Area to Explore in the *County Health Rankings* (marked in red)

Nelson County Health Trends: County Health Rankings Trends 2012 to 2015					
Measures	Data Used	2012 CHR Data	2015 CHR Data	Trend	Score
Tobacco Use	Adult Smoking ¹	29%	30%	Worse	4
Diet and Exercise	Physical Inactivity ¹	29%	29%	Same	1
Alcohol and Drug Use	Excessive Drinking ¹	19%	21%	Worse	4
Sexual Activity	Sexually-Transmitted Infections Per 100,000 Residents ¹	436	589	Worse	4
Access to Care	Uninsured ¹	15%	16%	Worse	3
Quality of Care	Preventable Hospital Stays Per 1,000 Medicare Enrollees ¹	62	56	Better	0
Education	High School Graduation ¹	100%	87%	Worse	3
Employment	Unemployment ¹	11.7%	8.1%	Better	0
Income	Children in Poverty ¹	22%	20%	Better	0
Family & Social Support	Inadequate Social Support ²	18%	17%	Better	0
Community Safety	Violent Crime Rate Per 100,000 Residents ¹	145	118	Better	0
Air & Water Quality	Air Pollution—Particulate Matter ¹	12.9 (2013 data)	13.4	Worse	3
Housing & Transit	Severe Housing Problems ¹	11% (2014 data)	12%	Worse	3
Source: County Health Rankings and Roadmaps (2015) ¹ , Centers for Disease Control and Prevention Community Health Status Indicators (2015) ²					

5. Importance to the Community: Was this need identified as a priority by the community served?

Rankings for this factor were based on the primary data collected for community input. In cases where communities were not asked to rate the specific health measures in this report, their responses were grouped as they related to the established measure. The total number of related responses applicable to that measure was summed and then each health need was ranked according to the number of responses.

A score of 0-4 was given to each of the 13 health measure as follows:

- 0= health need not identified as health need by the community
- 1= health need identified as a health need, but not in top ten community-identified health needs
- 2= health need identified as sixth through tenth most important community-identified health needs
- 3= health need identified as fourth or fifth most important community-identified health needs
- 4= health need identified in top three community-identified health needs

2015-2016 Nelson County Community Input: Primary Data							
Measures	Frequency of Response	Sum of Factors	Score	Measures	Frequency of Response	Sum of Factors	Score
Tobacco Use	18	40	3	Education	0	0	0
Cancers	22			Employment	0	0	0
Diet and Exercise	21	76	4	Income	0	0	0
Obesity	30			Family & Social Support	0	0	0
Heart Disease/ Stroke	14			Community Safety		52	4
High Blood Pressure	5			Violent Crimes	0		
Diabetes	6			Motor Vehicle Injuries	3		
Alcohol and Drug Use		170	4	Child Abuse/Neglect	9		
Alcohol/Drugs	125			Domestic Violence	13		
Mental Health Problems	45			Homicide	0		
Sexual Activity		14	2	Injuries Caused by Guns	2		
Teenage Pregnancy	9			Suicide	1		
HIV/AIDS	0			Rape/Sexual Assault			
Sexually-Transmitted Diseases	5			Violence in Schools/ Bullying	24		
Access to Care	25	38	3	Air & Water Quality		4	2
Aging Population	11			Respiratory/Lung Diseases	4		
Dental Problems	2			Housing & Transit		9	2
Infant Death	0			Homeless	9		
Quality of Care		2	2				
Infectious diseases	2						

Source: primary data solicited by Flaget Memorial Hospital and the Lincoln Trail District Health Department

6. Alignment and Sustainability: How closely does this need match with state-wide strategic efforts by KentuckyOne Health?

Rankings for this factor were determined by representatives from KentuckyOne Health's strategy and business development team according to strategic vision. Michael Spine, Senior Vice President for Strategy and Business Development assigned these values to each of the health needs in January 2016.

A score of 0-4 was given to each of the 13 health measure as follows:

- 0= health need not aligned with strategic efforts
- 1= health need aligned with system strategic efforts, but not this hospital's strategic efforts
- 2= health need aligned with this hospital's local strategic efforts, but not system's strategic efforts
- 3= health need aligned with system and this hospital's strategic efforts
- 4= health need aligned with system and this hospital's strategic efforts AND has sustainability plan/option

Health Measures Related to Strategic Alignment	
<i>Measures</i>	<i>Score</i>
Tobacco Use	4
Diet and Exercise	4
Alcohol and Drug Use	4
Sexual Activity	4
Access to Care	4
Quality of Care	4
Education	0
Employment	4
Income	0
Family & Social Support	0
Community Safety	4
Air & Water Quality	0
Housing & Transit	0
Source: KentuckyOne Health Strategy	

7. Comparison to Peer Communities: What are the community's health needs compared to peer communities?

Rankings for this factor were determined by identifying how this community compares to peer communities elsewhere in Kentucky and the United States to provide a broader view of the health outcomes in this community. The Centers for Disease Control and Prevention's county-level Community Health Status Indicators (CHSIs) provided such a comparison. Each health measure has a related data point found in the CHSI and that metric is compared to the data point in other communities. The quartile this health measure fell into was described as better, moderate or worse as compared to other peer communities.

A score of 0-4 was given to each of the 13 health measure as follows:

- 0 = this health need is not identified with peer county values
- 1 = this health need is in the first quartile (the "Better" category as compared to peer communities)
- 2 = this health need is in the second quartile (the "Moderate" category as compared to peer communities)
- 3 = this health need is in the third quartile (the "Moderate" category as compared to peer communities)
- 4 = this health need is in the fourth quartile (the "Worse" category as compared to peer communities)

Nelson County Comparison to Peer United States Communities			
<i>Measures</i>	<i>Data Point from CHSI for Improving Community Health</i>	<i>Comparison to Peer Counties (Quartile)</i>	<i>Score</i>
Tobacco Use	Adult Smoking	Worse-Q4	4
Diet and Exercise	Limited Access to Healthy Foods	Moderate-Q3	3
Alcohol and Drug Use	Adult Binge Drinking	Worse-Q4	4
Sexual Activity	Gonorrhea Rate	Moderate-Q3	3
Access to Care	Uninsured	Moderate-Q3	3
Quality of Care	Older Adult Preventable Hospitalizations	Better-Q1	1
Education	No High School Diploma	Moderate-Q3	3
Employment	Unemployment	Worse-Q4	4
Income	Poverty	Worse-Q4	4
Family & Social Support	Inadequate Social Support	Moderate-Q2	2
Community Safety	Violent Crime	Moderate-Q2	2
Air & Water Quality	Annual Average PM2.5 Concentration	Moderate-Q3	3
Housing & Transit	Housing Stress	Moderate-Q2	2
Source: Centers for Disease Control and Prevention			

8. Commonly Identified: How many data sources identified this as a need?

Ratings for this factor are based on the alignment of all major sources of data identifying this as a health need. A common alignment represents opportunities for synergistic efforts to address these needs. The scores for each health measure were listed with their score for each prioritization factor described on the previous pages of this report. These factors were then averaged and rounded, resulting in a final score 0-4.

A score of 0-4 was given to each of the 13 health measure as follows:

- 0= health need not identified in any of the sources of data
- 1= health need identified by few sources of data
- 2= health need identified by some sources of data
- 3= health need identified by most sources of data
- 4= health need identified by all sources of data

Commonly Identified Health Needs									
<i>Measures</i>	Identified in Magnitude	Identified in Mortality	Identified in Morbidity	Identified in Trends	Identified in Community Input	Identified in Alignment	Identified in Comparison	Average	Score
Tobacco Use	4	4	4	4	3	4	4	3.86	4
Diet and Exercise	4	4	4	1	4	4	3	3.43	3
Alcohol and Drug Use	4	4	4	4	4	4	4	4.00	4
Sexual Activity	1	1	1	4	2	4	3	2.29	2
Access to Care	3	4	4	3	3	4	3	3.43	3
Quality of Care	2	4	4	0	2	4	1	2.43	2
Education	3	1	0	3	0	0	3	1.43	1
Employment	2	0	0	0	0	4	4	1.43	1
Income	3	4	4	0	0	0	4	2.14	2
Family & Social Support	4	1	1	0	0	0	2	1.14	1
Community Safety	1	1	3	0	4	4	2	2.14	2
Air & Water Quality	0	3	2	3	2	0	3	1.86	2
Housing & Transit	3	4	2	3	2	0	2	2.29	2
Source: see original tables with data									

Prioritized Significant Community Health Needs

Prioritization of Community Health Needs According to Data

Below is the chart of each health measure's ranking according to each priority. The total score, as indicated on the previous charts, is listed here. The weighted score is the multiplication for the total score by the measure of influence on overall health outcomes, as described by the Robert Wood Johnson *County Health Rankings* model. A total score and a weighted score are both provided. The health needs with the top three highest weighted scores are highlighted in red.

Prioritization of Community Health Needs: Flaget Memorial Hospital												
Community: Nelson County												
Health Factors	Measures	Prioritization Factors								Total Score	Measure of Influence	Weighted Score
		Magnitude	Mortality	Morbidity	Trend	Importance to the Community	Alignment	Comparison to Peers	Commonly Identified			
Health Behaviors	Tobacco Use	4	4	4	4	3	4	4	4	31	30%	9.3
	Diet and Exercise	4	4	4	1	4	4	3	3	27	30%	8.1
	Alcohol and Drug Use	4	4	4	4	4	4	4	4	32	30%	9.6
	Sexual Activity	1	1	1	4	2	4	3	2	18	30%	5.4
Clinical Care	Access to Care	3	4	4	3	3	4	3	3	27	20%	5.4
	Quality of Care	2	4	4	0	2	4	1	2	19	20%	3.8
Social and Economic Factors	Education	3	1	0		0	0	3	1	8	40%	3.2
	Employment	2	0	0	0	0	4	4	1	11	40%	4.4
	Income	3	4	4	0	0	0	4	2	17	40%	6.8
	Family & Social Support	4	1	1	0	0	0	2	1	9	40%	3.6
	Community Safety	1	1	3	0	4	4	2	2	17	40%	6.8
Physical Environment	Air & Water Quality	0	3	2	3	2	0	3	2	15	10%	1.5
	Housing & Transit	3	4	2	3	2	0	2	2	18	10%	1.8

Final Priorities Identified by Hospital Leadership

To achieve consistency across the KentuckyOne Health system and to identify opportunities for cross-hospital collaboration, we have chosen to identify our priorities as named in the Robert Wood Johnson *County Health Rankings* measures.

In March 2016, the leadership team at Flaget Memorial Hospital gathered to review the Nelson County data and the aforementioned prioritization chart. The team discussed each of the health measures in the chart and where they believed the hospital had the greatest capacity to make the most marked improvement. The areas below were chosen as the FY2017-2019 community health needs assessment priority areas:

- **Tobacco Use**
 - The data in the health needs prioritization chart showed tobacco use to have the second highest total score and the second highest weighted score of all health measures assessed. The leadership team concluded that this issue continues to present itself as a major concern in the community and that the hospital had the capacity to address this health need.
- **Alcohol and Drug Use**
 - The data in the health needs prioritization chart showed alcohol and drug use to have the highest total score and the highest weighted score of all health measures assessed. As this issue continues to have increasing impact in Nelson County, the leadership team discussed the need to respond.
- **Community Safety**
 - The data in the health needs prioritization chart showed community safety to have the fourth highest weighted score of all the health measures assessed. The leadership team discussed this health need in relation to the violence prevention work in which Flaget Memorial Hospital will be involved as increasing efforts for the KentuckyOne Health system focus on violence prevention work and as a recipient of a CHI Mission and Ministry Fund grant. The leadership team decided that community safety should be an area of focus due to the opportunity for effort as a result of this grant funding.

Needs Not Addressed

One health need appeared in the data analysis which the Flaget Memorial Hospital leadership team chose not to select as a priority area for this community health needs assessment:

- **Diet and Exercise**
 - The data in the health needs prioritization chart showed diet and exercise to be in the top three highest weighted scores of all the health measures assessed. The leadership team chose not to address this area due to capacity concerns. With three complex and multifaceted priorities already selected, the leadership team was concerned about scarcity of resources in addressing such a variety of health needs. However, the team did commit to continued support of programs related to diet and exercise that are already in place, such as Walk with a Doc.

Potentially Available Resources in Community

The availability of health care resources is critical to the health of a county's residents and addressing health needs, including those identified in this assessment. A limited supply of health resources, especially providers, results in poorer health status of the community. The sections below briefly describe potentially available resources to address the health needs of Flaget Memorial Hospital's community. The Kentucky Cabinet for Health and Family Services updates the list of these resources monthly in their report "Inventory of Kentucky Health Facilities, Health Services and Major Medical Equipment" at this link: <http://chfs.ky.gov/ohp/con/inventory.htm>.

Hospitals and Ambulatory Care Clinics

According to the Kentucky Cabinet for Health and Family Services, Flaget Memorial Hospital is the only licensed hospital in Nelson County. There are no ambulatory care clinics in Nelson County.

Other Licensed Facilities

According to the Kentucky Cabinet for Health and Family Services, the facilities below offered services to Nelson County residents as of March 2016:

- **Long Term Care Beds:** Colonial Health & Rehab Center, Flaget Memorial Hospital, Life Care Center of Bardstown, Windsor Gardens
- **Home Health services:** Caretenders, Intrepid USA Healthcare Services, Personal Touch Home Care, VNA Health at Home,
- **Hospice:** Hospice of Nelson County
- **Adult Day Program:** Active Day of Bardstown
- **Rehabilitation Agencies:** HMM—Therapy & Sports Medical Center, KORT—Bardstown Physical Therapy, Life Care Center of Bardstown
- **Private Duty Nursing:** Malone Healthcare Solutions, Maxim Healthcare Services, Inc., VNA Nazareth Home Care
- **Limited Service Clinic:** Little Clinic

Health Care Provider Ratios

According to the 2015 Robert Wood Johnson *County Health Rankings*, Nelson County had a higher ratio of residents to health care providers than the Kentucky state average and almost doubled the ratio as compared to the national benchmark, which indicates a potential for access issues for the community. Nelson County had 2,216 residents for every one primary care physician as compared to a state average of 1,551 residents to one primary care physician. Nelson County had 795 residents for every one mental health provider as compared to a Kentucky state average of 621 residents to one mental health provider. The ratio for mental health providers to residents in Nelson County was more than double the national benchmark for this ratio.

Health Departments

Flaget Memorial Hospital collaborated with the Lincoln Trail District Health Department (LTDHD) to conduct its community health needs assessment as the majority of patients originate in Nelson County. The LTDHD is the only such agency that serves Nelson County to provide health promotion and education to Nelson County residents. The LTDHD also serves Hardin, Larue, Marion, Meade and Washington counties in Kentucky. Clinical services offered in Nelson

County include: cancer screenings, comprehensive pre-natal care, diabetes education, family planning, HIV testing and education, medical nutrition therapy, newborn screenings, school nursing, sexually-transmitted infections, tuberculosis testing, vaccinations, well child visits and WIC. The LTDHD also has an environmental services division. More information about the LTDHD can be found here: <http://lincolntailhealthdepartment.com/>.

Evaluation of Impact

The following section describes the evaluation of impact of the previous community health needs assessment conducted by Flaget Memorial Hospital in 2013 to cover FY2014-16.

Needs Identified in 2013-2016 CHNA and Impact of Actions

The health needs addressed in Flaget Memorial Hospital's FY2014-2016 CHNA included: cancer, physical inactivity/ adult obesity and adult smoking. The hospital's actions toward improving these health needs over the previous CHNA coverage period are described below.

- Cancer
 - Offered and promoted low-cost CT lung scans.
 - Offered cancer screenings (lung, breast, colorectal, prostate and skin) at the Flaget Cancer Center.
 - Offered select cancer screenings at the annual Flaget Memorial Hospital health fair.
 - Collaborated with the Lincoln Trail District Health Department (LTDHD) to ensure Nelson County residents have access to cancer screenings.
 - Partnered with local dermatologists to ensure Nelson County residents have access to a yearly skin cancer screening.
 - Engaged and educated the community about cancer through literature and events.
 - Continued to promote and support "Relay for Life" as part of the hospital's community benefit.
- Physical Inactivity/Adult Obesity
 - Hosted Walk with a Doc events throughout Nelson County to provide free opportunities for residents to exercise with the support of a physician and supportive walking community.
 - Supported local walking/running events in Nelson County.
 - Promoted Flaget Memorial Hospital's Center for Weight Loss Surgery, including bariatric surgery and the weight loss center support group.
 - Continued sponsorship and expansion of "Trim Down, Bardstown," an annual community-wide weight loss drive.
 - Provided healthy cafeteria options in the hospital.
 - Continued to provide nutritional education to hospital patients.
 - Provided community-based wellness services (health screenings and lifestyle education) in non-traditional settings (e.g., churches, community events, etc.).
 - Provided health screenings and lifestyle education at the hospital's annual health fair.
 - Partnered with Nelson County's "Health and Wellness Coalition."
 - Supported physical activity and healthy lifestyles in the local high schools by offering speakers and resources.
 - Collaborated with the LTDHD and other agencies to promote community education.
- Adult Smoking
 - Continued to sponsor smoking cessation classes in Nelson County.
 - Supported anti-smoking programming in the local high schools by offering speakers and resources.
 - Implemented and enforced hospital policy to educate each patient regarding the dangers of first and second-hand smoking and to provide information on smoking cessation if applicable.

- Disseminated educational literature on the dangers of smoking via hospital waiting rooms.
- Enforced the hospital's "smoke free campus" policy.

Evaluation of Written Comments

Feedback on the most recently-conducted CHNA and implementation strategy was solicited via a link on the KentuckyOne Health website: <http://www.kentuckyonehealth.org/healthy-community-contact-us>. Although the link has been accessed, none of the information shared through this link have been related to the previous CHNA or Implementation Strategies reports. So, Flaget Memorial Hospital has solicited feedback with a readily-accessible tool, but has not received any written comments and thus has no opportunity to evaluate those comments.

Learning from Previous CHNA

This second cycle of the CHNA process lends itself as a learning opportunity to improve the CHNA process. Across the KentuckyOne Health system, discussions at the executive and hospital leadership levels indicated the need to concentrate resources to most effectively address community health needs, which led to the conclusion that fewer priorities should be of focus in the 2017-2019 CHNAs.

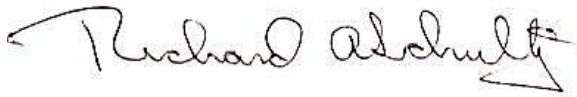
In the interest of further unifying our state-wide health system and leveraging system expertise, KentuckyOne Health decided to use consistent reporting resources across all hospital CHNAs and identify health needs with consistent naming conventions. This will allow for greater synergies among our hospitals and a greater potential to positively impact the health of citizens in our communities across the Commonwealth of Kentucky.

Next Steps

Flaget Memorial Hospital will use the findings in this community health needs assessment to guide the coordinated efforts in addressing the identified health priorities. This community health needs assessment will be made public and widely available no later than June 30, 2016. The efforts to address these identified health priorities will be described in an accompaniment to this document known as the Flaget Memorial Hospital's Implementation Strategies. This will be made public and widely available no later than November 15, 2016.

Adoption/Approval

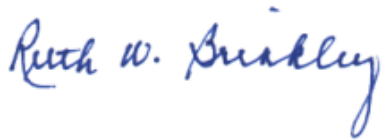
KentuckyOne Health's Board of Directors includes representation across the state and support the work that each facility completes to improve the health of their community. The Board of Directors approves Flaget Memorial Hospital's community health needs assessment and the methods used to identify priority areas of need in this hospital's community.



4/27/2016

Chair, KentuckyOne Health Board of Directors

Date



4/27/2016

President & Chief Executive Officer, KentuckyOne Health

Date

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