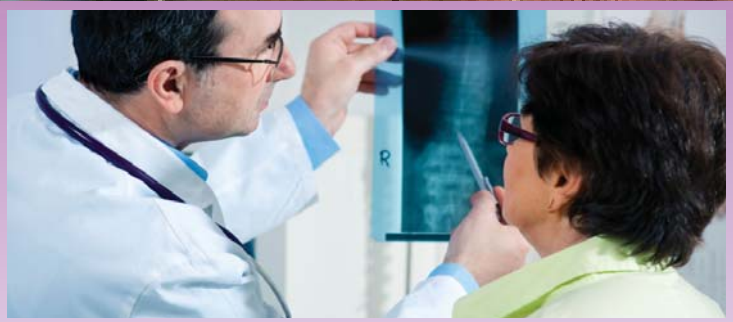
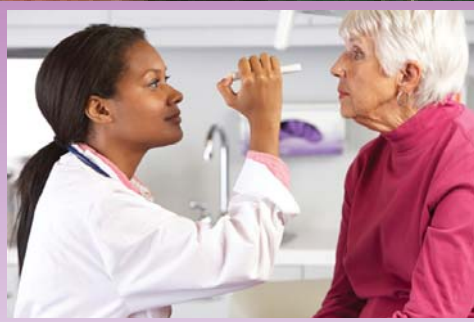




Community Health Needs Assessment

2012

St. Vincent's Birmingham Hospital | 810 St. Vincent's Drive | Birmingham, AL 35205

MISSION | VISION | VALUES

Our Mission, Vision, and Values provide a strong foundation and guidance for the work we do in transforming healthcare in the United States. It serves as a framework that expresses our priorities in responding to the care of those most in need.

Our promise is to provide Healthcare That Works, Healthcare That is Safe and Healthcare That Leaves No One Behind.

Mission

Rooted in the loving ministry of Jesus as healer, we commit ourselves to serving all persons with special attention to those who are poor and vulnerable. Our Catholic health ministry is dedicated to spiritually centered, holistic care, which sustains and improves the health of individuals and communities. We are advocates for a compassionate and just society through our actions and our words.

Vision

We envision a strong, vibrant Catholic health ministry in the United States which will lead to the transformation of healthcare. We will ensure service that is committed to health and well-being for our communities and that responds to the needs of individuals throughout the life cycle. We will expand the role of laity, in both leadership and sponsorship, to ensure a Catholic health ministry of the future.

Values

We share a common vision and are called to act upon the following ideas and beliefs:

- **Service of the Poor** — Generosity of spirit, especially for persons most in need
- **Reverence** — Respect and compassion for the dignity and diversity of life
- **Integrity** — Inspiring trust through personal leadership
- **Wisdom** — Integrating excellence and stewardship
- **Creativity** — Courageous innovation
- **Dedication** — Affirming the hope and joy of our ministry

TABLE OF CONTENTS

Executive Summary

Executive Summary 1

Methodology

Methodology 2

Community Description

Geographic Area Defined 3
Demographics 4
Community Resource List 11

Comparison Community

Comparison Community 12

Data Aggregation

Behavioral Risk Factors 13
County Health Rankings 17
Community Health Status Indicators 19
Surveys/Interviews 20

Results

Findings 21

Appendices

Graph 1. U.S. Census – 2011 Population Estimate 22
Graph 2. U. S. Census – Land Area 22
Graph 3. U. S. Census – Persons per Square Mile 23
Graph 4. U. S. Census – Persons under 18 years 23
Graph 5. U. S. Census – Persons 65 years and over 24
Graph 6. U. S. Census – Race 24
Graph 7. U. S. Census – Ethnicity 25
Graph 8. U. S. Census – High School Graduate or Higher 25
Graph 9. U. S. Census – Bachelor's degree or Higher 26
Graph 10. U. S. Census – Median household income 26
Graph 11. U. S. Census – Persons below poverty level 27

Executive Summary

The Patient Protection and Affordable Care Act (ACA), signed into law on March 23, 2010, created new requirements for not-for-profit hospitals including a requirement for a Community Health Needs Assessment (CHNA) to be completed every three years. This report was prepared by Alabama Quality Assurance Foundation (AQAF) in conjunction with St. Vincent's Health System to meet the CHNA requirement for fiscal year 2012-2013. Alabama Quality Assurance Foundation (AQAF) is the Quality Improvement Organization (QIO) for the state of Alabama. AQAF has over three decades of experience in identifying and addressing community health needs.

To prepare this CHNA report data was gathered from multiple sources in an effort to construct a current and accurate snapshot of the health issues in Jefferson County, Alabama. Data was obtained from multiple public data bases and opinions were solicited from public health experts, community leaders and patients within the community served by St. Vincent's Birmingham Hospital. This information was summarized for final consideration by a CHNA team consisting of hospital and system personnel as well as community members. Using rank order balloting, this team prioritized the community health needs as follows:

1. Good Nutrition/Obesity Prevention
2. Cardiac Health Education
3. Care for the Uninsured
4. Decreased Unemployment
5. Hypertension/Stroke Prevention

An implementation strategy that will address each of these issues is currently in development. The strategy will seek to leverage valuable partnerships that currently exist, identify novel opportunities for synergy and maximize legacy programs while deploying specific interventions within the community. The outcomes and results of these interventions will be followed and reexamined in preparation for the next CHNA scheduled for completion in Spring 2016.

Methodology

The needs assessment process was initiated by assembling an internal team responsible for shepherding the entire project. The internal team was comprised of representatives from hospital management, nursing services, patient services, the community and AQAF. This team met initially to review the requirements of the Community Health Needs Assessment as established by the Affordable Care Act and further defined by IRS Notice 2011-52 and to establish the roles and responsibilities for the team members. These decisions were memorialized in a project plan and incorporated into a project dashboard. A secure, web-based portal was established to provide reliable communication among the team members and ready access to the project plan and dashboard. With the infrastructure created and the purpose and scope of the project identified, the team set about its primary task of gathering data.

The first step in the data gathering process was to obtain several de-identified data sets from the hospital. The initial task was to obtain zip code specific discharges for up to three years. These data were then analyzed to compile zip code maps defining the hospital's service area. Additional data were requested from the hospital including admission data stratified by age, race, ethnicity and payer mix and discharge diagnoses. With the service area of the hospital determined, a best fit county was selected for data collection from secondary (public) sources and for the purposes of comparison. Secondary sources utilized for this report include:

- Behavioral Risk Factor Surveillance Survey
- Youth Risk Factor Behavior Surveillance Survey
- Alabama Department of Public Health, Center for Health Statistics
- Alabama Department of Public Health, Immunization Division
- Alabama Department of Public Health, Cancer Registry
- U.S. Census Bureau
- U.S. Bureau of Labor Statistics
- County Health Rankings and Roadmaps
- Community Health Status Indicators

The second step was to gather information from various representatives of the community. The elements of this step required answers to the following questions:

- Who would provide input?
- What questions would be asked?
- What format would be utilized?

The CHNA team met to establish a list of key informants that included individuals with public health expertise, state and local officials, community leaders and patients. The CHNA team also developed a consistent list of health issues that would be used to query the key informants. These issues were established with a private ballot after an open discussion. The ballot contained 42 high-priority health issues identified as Healthy People 2020 Health Indicators. The participants were instructed to select up to 20 of the issues that they felt were of significance in their community. A frequency calculation was

used to establish the topic areas of concern for that community. These topic areas were then used to develop a survey that was distributed to the key informants via Survey Monkey. The topic areas were also used to create a survey that was distributed to several patient groups and to inform the face to face interviews held with the public health experts. The results of these surveys and interviews were then compiled.

Distillation of these data into a prioritized list was the final step of the Community Health Needs Assessment. The CHNA coalition committee (the CHNA team plus multiple community members) met to complete this final task. AQAF staff presented the data collected. The coalition committee members then completed a private, rank ordered ballot identifying the most significant health care priorities for the community. A frequency weighted, Borda type tabulation was then used to arrive at the final prioritized list. The information presented to the CHNA coalition committee and the final prioritized list of care needs is summarized in this report.

Community Description

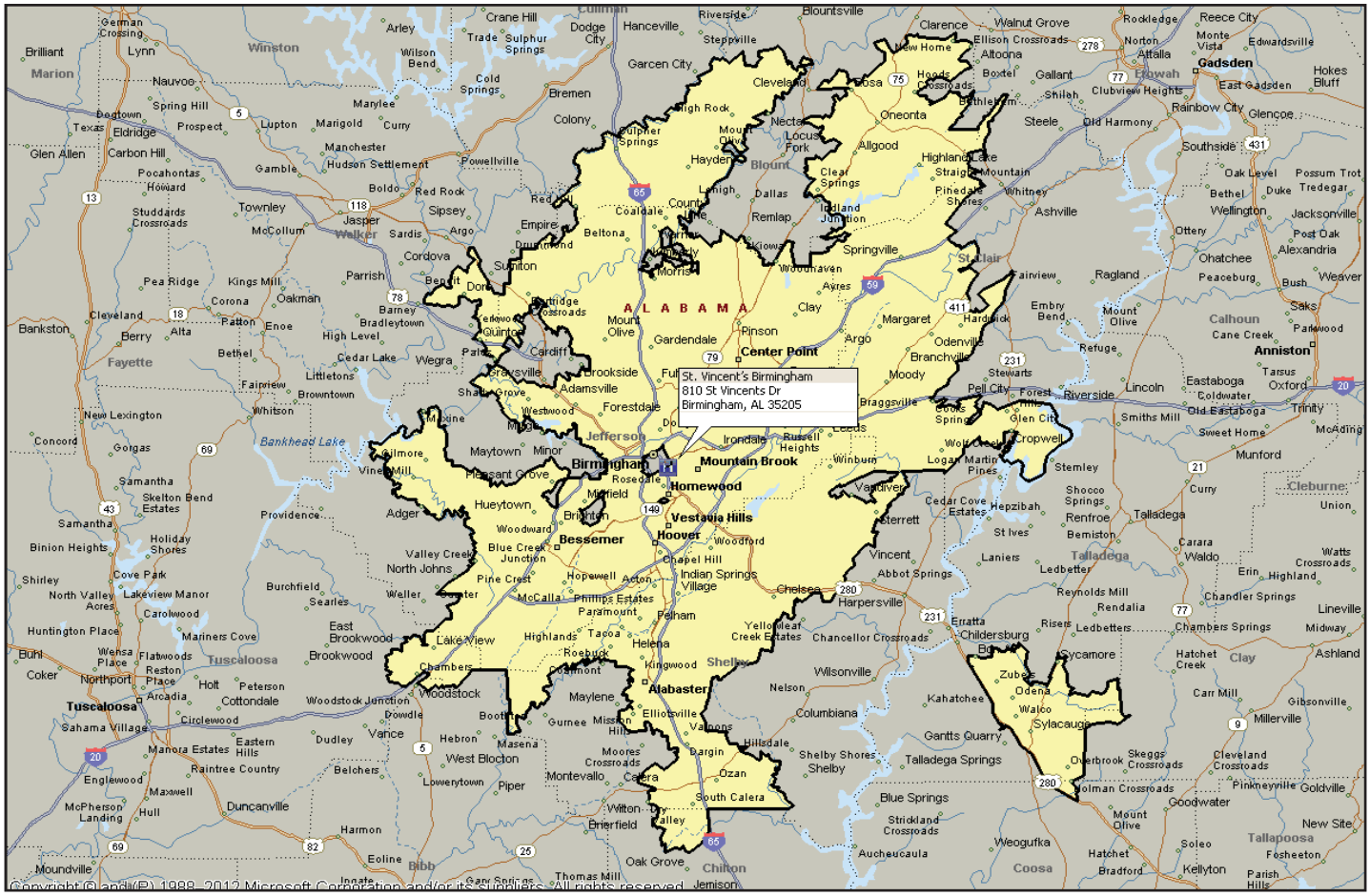
Geographic Area Defined

The St. Vincent's Birmingham Community is defined using the 51 zip codes derived from 75% of the hospital's inpatient discharges. The zip codes encompass the entire county of Jefferson and small portions of Blount, St Clair and Shelby counties. For the purpose of this study, St. Vincent's Birmingham community is defined as Jefferson County Alabama. The zip codes are as follows:

35004	35064	35120	35173	35211	35226
35005	35068	35121	35180	35212	35228
35007	35071	35124	35204	35213	35235
35020	35079	35126	35205	35214	35242
35022	35080	35127	35206	35215	35243
35023	35094	35128	35207	35216	35244
35040	35111	35146	35208	35217	
35043	35116	35147	35209	35222	
35062	35117	35150	35210	35223	

The county has a total area of 1,122.3 square miles of which 1,111 square miles is land and 11.2 square miles is water. (Graph 2) Birmingham is the county seat for Jefferson County. The neighboring counties are Bibb, Blount, St. Clair, Shelby, Tuscaloosa and Walker. Birmingham, the state's largest city, and 33 other municipalities are located within Jefferson county. The county, situated in the piedmont area of the Appalachian Mountains, is characterized by rolling hills and valleys.

Illustration 1. St. Vincent's Birmingham Hospital's Service Area



Demographics

Population

Located in central Alabama, Jefferson County is a mix of urban, suburban and rural environments. It is the largest county in the state in both land mass and population. There are 67 communities within the county, 35 of which are incorporated municipalities. According to the U. S. Census Bureau, the most recent population estimate for Jefferson County is 658,931. (Graph 1, Graph 3, Graph 4, and Graph 5) The dominant language is English, with 5.8% speaking another language in the home.

Race/Ethnicity

The population of Jefferson County is 54.7% white, 42.3% black and 1.9% other. (Graph 6) The U.S. Census Bureau considers Hispanic/Latino heritage an ethnicity and not a race. Of Jefferson County residents responding to the most recent census, 4% consider themselves to be of Hispanic/Latino origin. (Graph 7) Persons of Hispanics/Latino origin may be of any race, and are included in the applicable race categories above. Persons of Hispanics/Latino origin may be of any race, and are included in the applicable race categories above. The Hispanic/Latino population of Jefferson County is equal the state average of 4%.

Education

There are 12 school systems operating in Jefferson County, 11 city systems and the county system. The Jefferson County School System, located in the greater metropolitan area of Birmingham, is Alabama's second largest school district. With 52 schools, 2,564 teachers, and 35,843 students, the system offers a multitude of academic, technical and extracurricular opportunities for students. The Birmingham City School System serves students in the City of Birmingham with 49 schools, 21 elementary schools, 11 middle schools, nine K-8 schools, seven high schools and one alternative school. Three new schools opened for the 2012-2013 school year, including a new Huffman High School. There are 116 private schools offering Pre-K- 8 and 39 offering grades 9-12. Birmingham has been the location of the University of Alabama School of Medicine and University of Alabama School of Dentistry since 1947. The University of Alabama Birmingham, Birmingham Southern and Samford University provide the area with major colleges of medicine, dentistry, optometry, pharmacy, law, engineering and nursing. Birmingham is also home to three of the state's five law schools. Birmingham is also headquarters of the Southeastern Conference, one of the major US collegiate athletic conferences. Of the county's residents, 86.7% graduate from High School and 29% hold a Bachelor's degree or higher. (Graph 8 and Graph 9) The percentage of people lacking basic literacy skills in Jefferson County is 13%. The population under 18 years is 23.5 %. (Graph 4)

Employment

Jefferson County is an economic catalyst for the state. Birmingham is the corporate home of several national companies as well as a regional hub for medical care. The University of Alabama at Birmingham, with its extensive health care complex, is the 2nd largest employer in the state. The Per Capita Income of a Jefferson County resident is $26,962 the Median Family Income is $45,750 and the percentage of residents living below the poverty level is 16.2%. (Graph 10 and Graph 11) The unemployment rate for the county is 6.2% which is slightly less than the state's 6.5% average. Jefferson County had a 3.4% wage growth from 2011-2012. The largest employers in Jefferson County are:

1. University of Alabama at Birmingham (21,550)
2. Regions Final Cooperation (6,000)
3. AT&T (5,750)
4. St. Vincent's Health Systems (4,703)
5. Baptist Health Systems, Inc (4,000)

Of the 13 health care services companies in the county, 10 have 1,000 or more employees. St. Vincent's Health System is the second largest healthcare provider with 4,703 employees. Blue Cross Blue Shield of Alabama is the major health insurance carrier in the state, with corporate headquarters in Birmingham. In addition to Regions, the other major financial institutions in the area are BBVA/Compass and Wells Fargo. Honda Manufacturing and Mercedes-Benz with 4,000 employees each are located in adjacent counties which are within driving distance of Birmingham. U.S. Steel, American Cast Iron and Pipe, and Marshall Durbin are the major manufacturing employers.

Roads and Transportation

The roadway system in Jefferson County provides residents and companies transportation access to all major cities in the southeast and throughout the United States. The 5 major interstates located throughout the county are I-20, I-22, I-59, I-65 and I-459.

Public transportation is limited in Jefferson County. The Birmingham Transit system is the only public transportation system for the county. Bus service runs regularly, along fixed routes, from the transportation center to multiple points in Birmingham, Bessemer, Fairfield, Homewood, Mountain Brook, Hoover and Vestavia Hills. The downtown natural gas trolley service maintains three routes through the City Center. Greyhound provides intercity bus transportation to cities across the United States.

The Birmingham Shuttlesworth International Airport offers 110 daily flights to 36 cities throughout the US. Terminal modernization is in progress with the first phase completed in spring of 2013. There is one private airport in the county. Several of the local hospitals have heliports including St Vincent's Birmingham.

The Birmingham region has rail transportation for both passenger and freight cargo. There are daily Amtrak stops connecting to most major cities in the U.S. Metropolitan Birmingham has three rail hubs: Norfolk Southern, CSX and BSNF.

The State of Alabama contains an extensive waterway system. Port Birmingham located in the western part of the county on the Warrior River, is the largest inland commodities center on the Tennessee-Tombigbee Waterway. Served by seven barge lines, it offers access to inland, as well as international ports.

Health Care

Jefferson County residents are well served by an abundance of hospitals in the area. A small area of west central Jefferson County is currently designated as a Medically Underserved Area/Population (MUA/P) according to criteria developed by the Department of Health and Human Services (Illustration 2). This designation is based on an index of four variables; the ratio of primary care physicians per 1,000 populations, the infant mortality rate, population living below the poverty line, population over the age of 65. Jefferson County is considered a Health Professional Shortage Area (HPSA) for low-income residents in areas of primary care, dental care and mental health care.

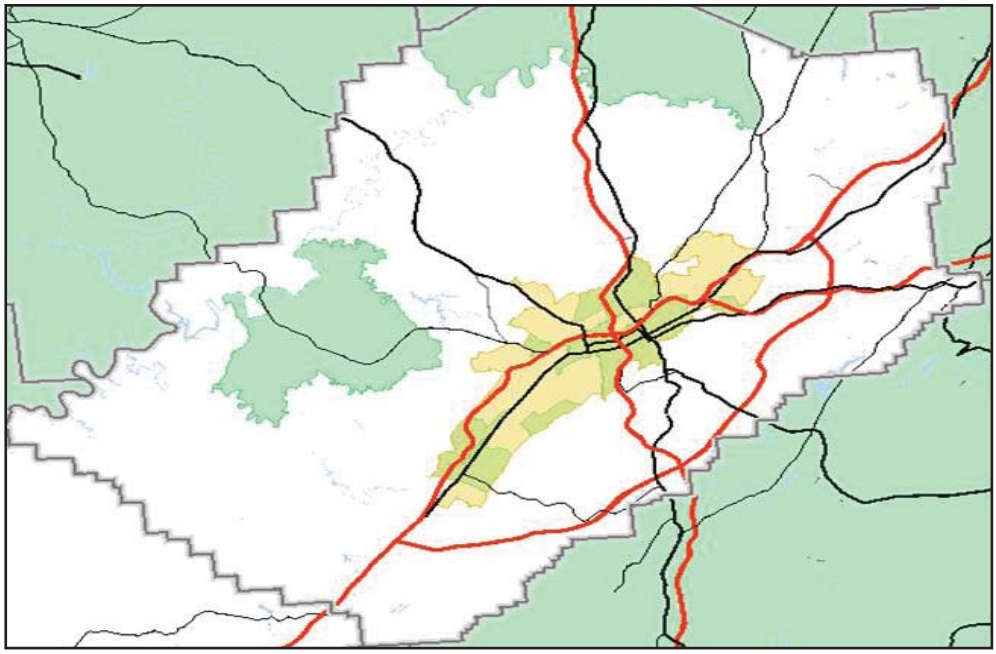


Illustration 2. Jefferson County - Medically Underserved Areas/Populations (MUA/P) Map

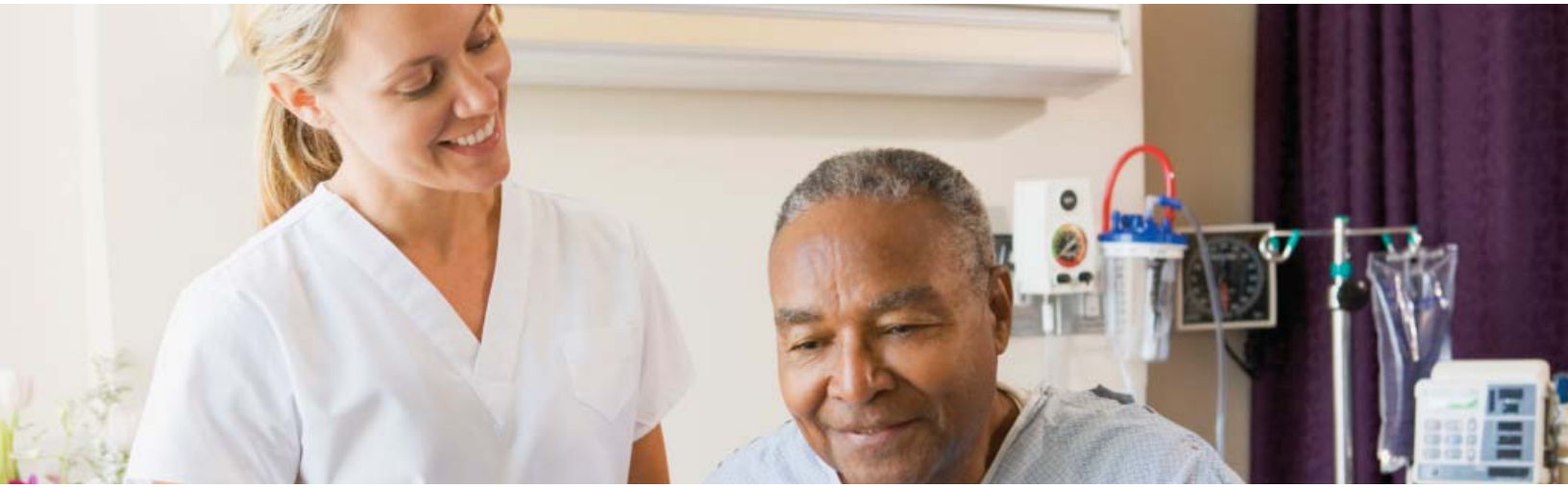
Low income residents of Jefferson County are able to utilize the county's charity healthcare system, Cooper Green Mercy Hospital. Due to financial concerns, the inpatient services were discontinued in late 2012, but the facility continues to provide chronic and urgent care to those in need of free or subsidized healthcare. Although many in the community have the needed healthcare services, St Vincent Birmingham, in accordance with their Mission and Values, is committed to caring for all people, with special attention to those who are poor and vulnerable.

St. Vincent's Birmingham, a teaching, non-profit hospital, is one of 13 hospitals in the county. It is located at 810 St. Vincent's Drive Birmingham Alabama 35209. The hospital employs over 850 Registered Nurses (RN) and is a Level III trauma center. St Vincent's Health Systems oversees four hospital facilities in Jefferson and adjacent counties; St. Vincent's Birmingham, St. Vincent's East, St. Vincent's Blount and St. Vincent's St. Clair.

St Vincent's Birmingham provides basic, primary care through inpatient care, ancillary services, clinics and specialty clinics to residents of an urban community. Hospital inpatient and outpatient services include:

Hospital Inpatient Services

- 439 in- patient beds
- Intensive Care (ICU)
    - Cardio Vascular ICU (16)
    - Medical ICU (16)
    - Surgical ICU (16)
    - Neonatal ICU (30)
- Birthing Suites (2,000 plus deliveries per year)
- 24-hour Emergency Department (46,00 visits per year)
- Surgery Department (10,162 cases per year)
    - De Vinci Robotic surgery
- Cardiac
- Gynecologic
- Urologic



Outpatient Services

- Bruno Caner Center
- Bruno Conference Center
- Bruno Rehabilitation Center
- Cardiac Rehabilitation Center
- Centennial Lodge
- Child Care Center
- Clinical Laboratory and Pathology
- Comprehensive Breast Center
- Corporate Wellness
- Dial- A- Nurse
- Fitness and Wellness Center
- Heart Valve Clinic
- Industrial Rehabilitation
- Maternity Services
- Multi-Specialty Outpatient Clinic with specialists in :
    - Cancer
    - Cardiology
    - Diabetes
    - Ear, Nose and Throat
    - Gastroenterology
    - Geriatrics
    - Gynecology
    - Nephrology
    - Neurology
    - Orthopedics
    - Pulmonary
    - Urology
- NeuroSpine Center
- Occupational Health
- Outpatient Surgery (19,00 cases/year)
    - Two Surgery Centers
- Ambulatory Surgery Main Hospital
- Outpatient Surgery Center North Tower
- Radiology Services, including CT Scanning, advanced diagnostic imaging, certified mammography, ultrasound and nuclear medicine
- Dialysis Center
- Physical Therapy Department
- Sports Medicine
- Pain Rehabilitation and Treatment
- Pulmonary Rehabilitation
- Silver Advantage
- Sleep Disorders Center
- Wellness Services

Congruent with the Voice of the Voiceless Plan and Annual Priorities, St Vincent's Birmingham sponsors and supports many community activities:

Community Outreach Programs

- Access to Care Program
- Dispensary of Hope
- Hispanic Outreach
- Jeremiah's Hope Academy
- Wellness Services Outreach Events

Sponsored Community Programs
(Encourages participation by associates, financial support and broad publicity)

- Alabama Office of Women's Health
- American Cancer Society
- American Diabetic Association
- American Heart Association
- Beacons of Hope School
- Cristo Rey
- Kings Home
- Leukemia and Lymphoma Society
- March of Dimes
- St. Louise Fund (United Way)
- St. Vincent's Christmas Store
- The Healthy Hope
- Tot Shots

Supported Community Programs
(Possible financial support, volunteer opportunities, limited publicity)

- Cahaba Valley Healthcare
- Camp Bluebird
- Center for Celiac Disease Research
- The Exceptional Foundation
- First Light Shelter for Women and Children
- Habitat for Humanity
- Jack and Jill
- KidOne
- Ladies of Charity
- Magic City Harvest
- M-Power Ministries
- Oasis Counseling for Women and Children
- Pathway
- Red Cross Blood Drives
- Royal Family Kids Camp
- Sickle Cell Foundation
- The Nest
- YMCA

Patient data for St. Vincent's Birmingham Hospital for FY 2012 are detailed below and includes principal discharge diagnoses , payor source, inpatient demographics, and discharge disposition.

Inpatient FY2012		
Principal Diagnosis Code	Cases	%
Osteoarthosis – Lower Leg	1027	4.82%
Previous Cesarean Delivery	507	2.38%
Single Birth – Non Cesarean	458	2.15%
Coronary Atherosclerosis	444	2.08%
Cesarean Section Birth	391	1.83%
Pneumonia	367	1.72%
Osteoarthosis – Pelvic Region	354	1.66%
Normal Delivery	333	1.56%
Other	329	1.54%
Puncture of Vessel	279	1.31%
Top 10 Total	4489	21.06%
Grand Total	21,320	100%

Outpatient FY2012		
Principal Diagnosis Code	Cases	%
Mammogram	17141	8.99%
Abdominal Pain	4333	2.27%
Chest Pain	3456	1.81%
Joint Pain – Lower Leg	3203	1.68%
Back Pain	2909	1.53%
Chronic Pain	2784	1.46%
Lump or Mass in Breast	2768	1.45%
Symptoms Involving Head/ Neck	2514	1.32%
Physical Therapy	2291	1.20%
Colon Screening	2135	1.12%
Top 10 Total	43534	22.84%
Grand Total	190,573	100%

Inpatient Payor Source FY2012		
	Cases	%
Insured	12451	58.40%
Medicare	6578	30.85%
Non-Insured	858	4.02%
Medicaid	857	4.02%
Dual Eligible	533	2.50%
All Kids	43	0.20%
Inpatient Total	21,320	100%

Outpatient Payor Source FY2012		
	Cases	%
Insured	134904	70.79%
Medicare	36985	19.41%
Non-Insured	10626	5.58%
Medicaid	5232	2.75%
Dual Eligible	2172	1.14%
All Kids	654	0.34%
Outpatient Total	190,573	100%

Race Distribution FY2012	
	%
White/Caucasian	76.99%
African-American	21.55%
Asian	0.27%
Hawaii/Pacific Isle	0.01%
American Indian/Alaskan	0.05%
Other	0.41%
Pt. Declined	0.01%
Unknown	0.71%

Age Distribution FY 2012	
	%
18-24	5.33%
25-34	11.92%
35-44	13.17%
45-54	18.12%
55-65	21.54%
65-69	9.22%
70 Years & Older	20.71%

Inpatient Discharge Disposition FY2012		
	Cases	%
HOME, SELF-CARE	15110	70.87%
HOME HEALTH SERV	2637	12.37%
SNF	1503	7.05%
TO ANOTHER REHAB	995	4.67%
EXPIRED	452	2.12%
HOSPICE, HOME	213	1.00%
SHORT-TERM HOSPI	101	0.47%
INTERMEDIATE CARE	73	0.34%
TO A PSYCHIATRIC FACILITY	64	0.30%
AGAINST MEDICAL ADVICE	62	0.29%
TO LONG TERM CARE	48	0.23%
HOSPICE, MEDICAL	43	0.20%
TO ANOTHER TYPE	9	0.04%
CANCER CTR/CHILD	8	0.04%
TO MEDICAID CERT	2	0.01%
Grand Total	21,320	100%

Community Resource List

Alabama Legal Help

Alabama Lions Sight Conservation Association

Aletheia House

Bessemer Rescue Mission

Brother Bryan Mission

Catholic Center of Concern

Churches (702)

Community Kitchens of Birmingham

Children's Aid Society

Firehouse Shelter

Food Banks (25+)

Greater Birmingham Ministry

Hope House

Jefferson County Chamber of Commerce

Jefferson County Court and Family Services

Jefferson County Department of Disabilities

Jefferson County Department of Health
- Bessemer • Central • Eastern • Morris
- West End • Western

Specialty Clinics
- International Travel • Sexually Transmitted Diseases • Tuberculosis • Tot Shots

Community Health (CH)
- CH Nurses • Nutrition Education
- Tobacco Prevention

Jefferson County Department of Veterans Affairs
- Birmingham Center • Clay Center
- St. Benedict's Center

Jefferson County Senior Citizens Center

Jefferson County Sheriff Department

Jessie's Place

Jimmy Hale Mission

Parks and Recreation
- Public Parks(95+) • Walking Trails (12+)
- Bike Trails (10+)

Salvation Army

The Foundry Rescue Mission and Recovery Center

The Lighthouse Recovery Mission

COMPARISON COMMUNITY

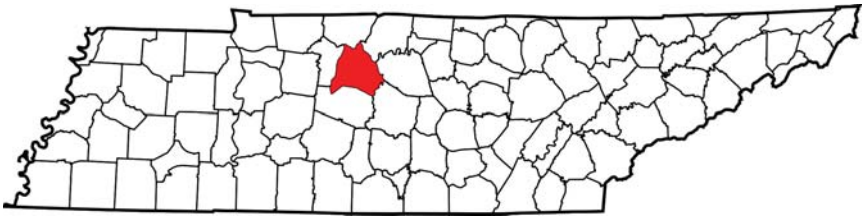
Comparison Community – Davidson County, Tennessee

In an effort to measure how the St. Vincent's Birmingham community compared to a peer county, the Department of Health & Human Services' 2009 Community Health Status Indicators (CHSI) report was utilized. CHSI uses population size, poverty level, age distribution, population density and other demographic data to establish comparison communities across the United States. Of the 39 counties considered to be peer counties to Jefferson County, Davidson County, Tennessee was selected for this CHNA based on its' similar location in the southeastern section of the United States.

Illustration 3. Jefferson County, Alabama and comparison Davidson County Tennessee

Jefferson County, Alabama

Davidson County, Tennessee



Comparison Demographics

	Jefferson County, Alabama	Davidson County, TN
Population (Graph 1)	658,931	635,475
Density (per square mile) (Graph 2 and Graph 3)	593	1,243
Poverty Level (% below)	16.2%	17.1%
Age Distribution (Graph 4 and Graph 5)	Under 18 (23.5%) 19 to 64 (54.2%) 65 and older (13.3%)	Under 18 (21.8%) 19 to 64 (67.7%) 65 and older (10.5%)
Race	White (54.7%) Black (42.3%) Other (1.9%)	White (66.2%) Black (27.9%) Other (7.3%)
Hispanic or Latino Origin	4% (4.0% state average)	9.9%
High School Graduates	86.7%	85.3%
Bachelor's Degree or Higher	29%	34.4%
Median Household Income	$45,750	$46,737

DATA AGGREGATION

Data from primary and secondary sources were analyzed. Secondary source data were aggregated at the smallest unit available - the county. Secondary data reports and other resources were carefully reviewed for this CHNA in order to provide points of comparison for the information and opinions gathered through the primary information collection process. Information from primary sources was obtained via electronic surveys, face-to-face surveys and phone and in-person interviews.

Behavioral Risk Factors

The Behavioral Risk Factor Surveillance System (BRFSS) is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States. Currently, data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. It is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. For many states, the BRFSS is the only available source of timely, accurate data on health-related behaviors.

Table 1. Health Risk Factors – Cardiovascular Disease identified with BRFSS data

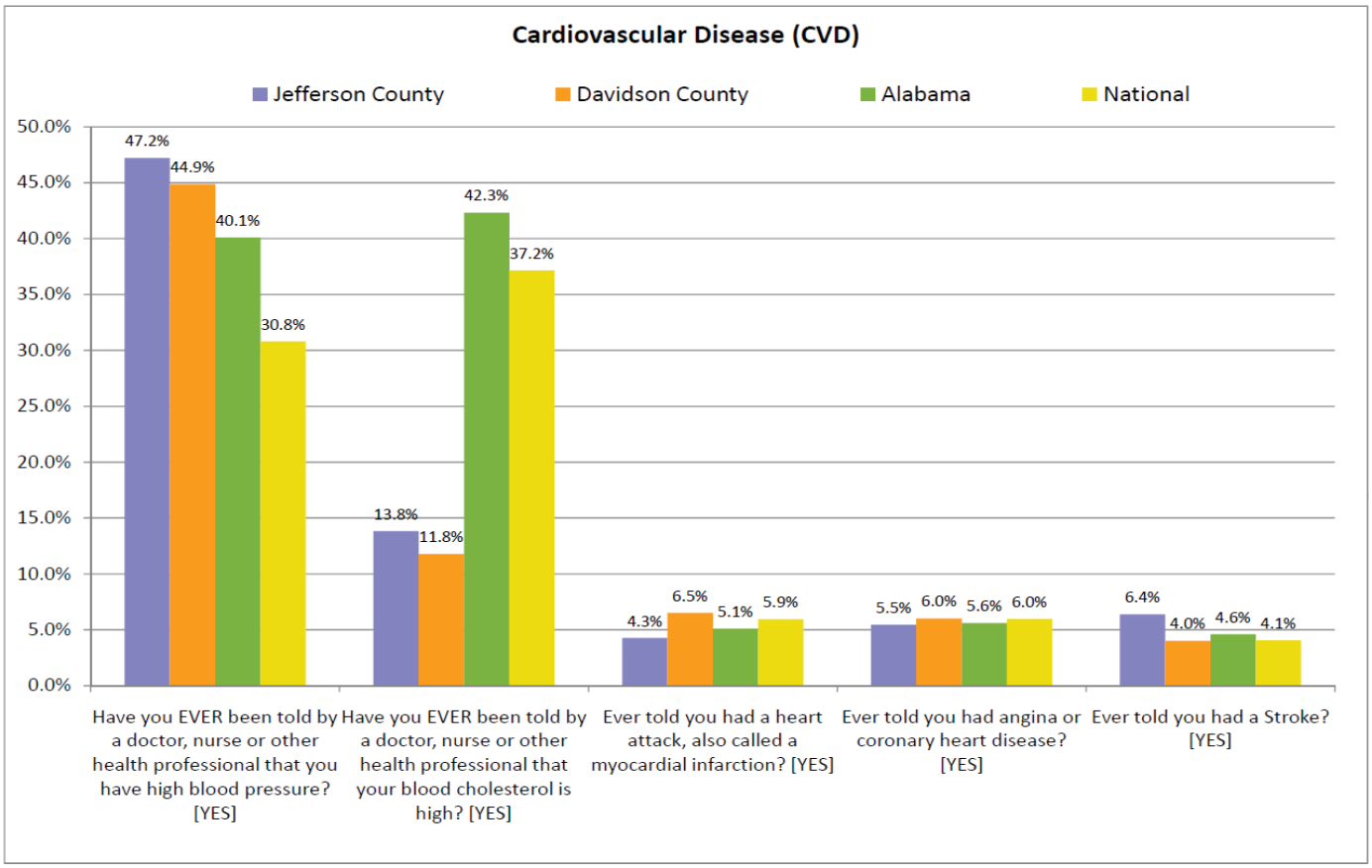


Table 2. Health Risk Factors – Chronic Conditions identified with BRFSS data

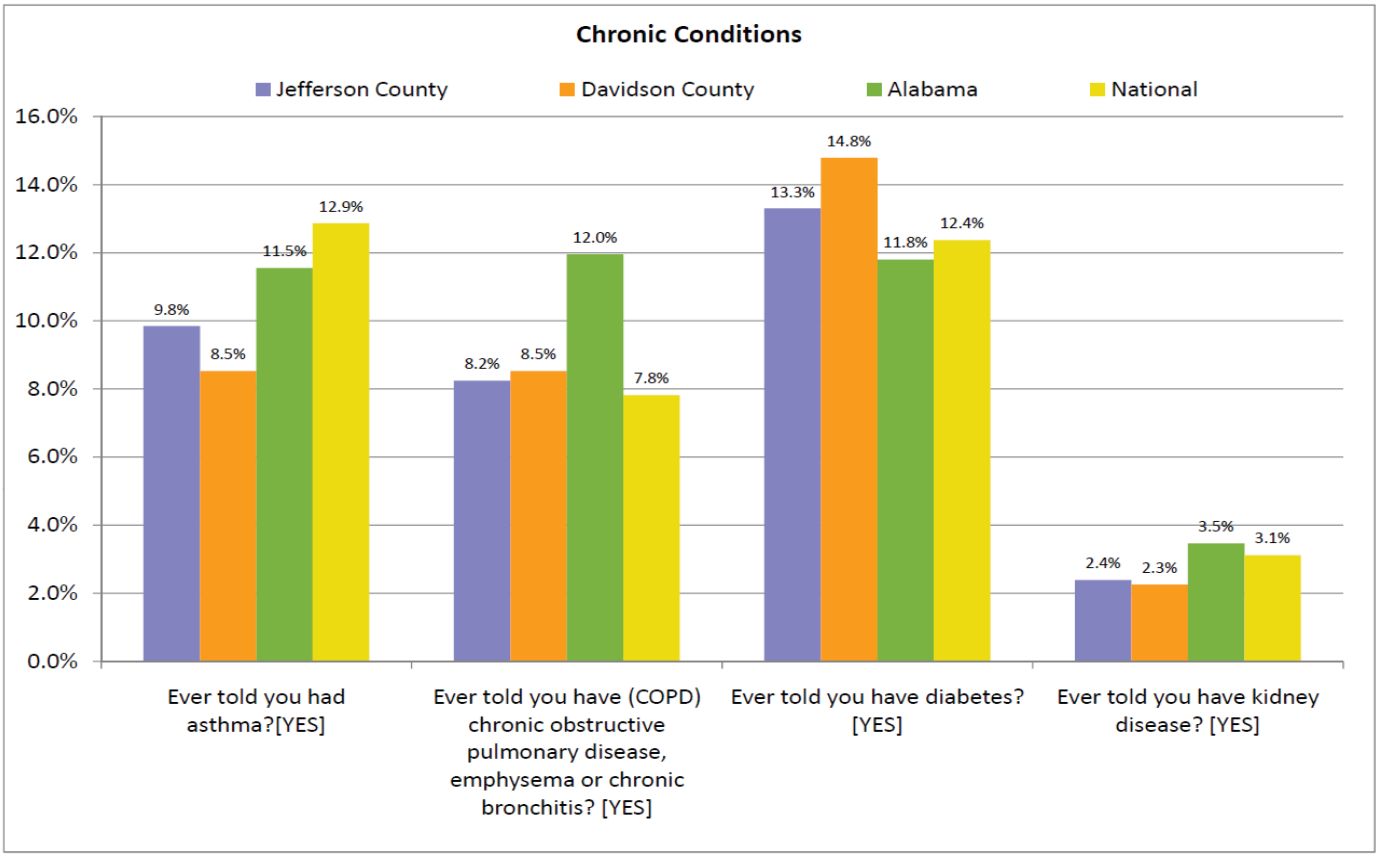


Table 3. Health Risk Factors – Cancer identified with BRFSS data

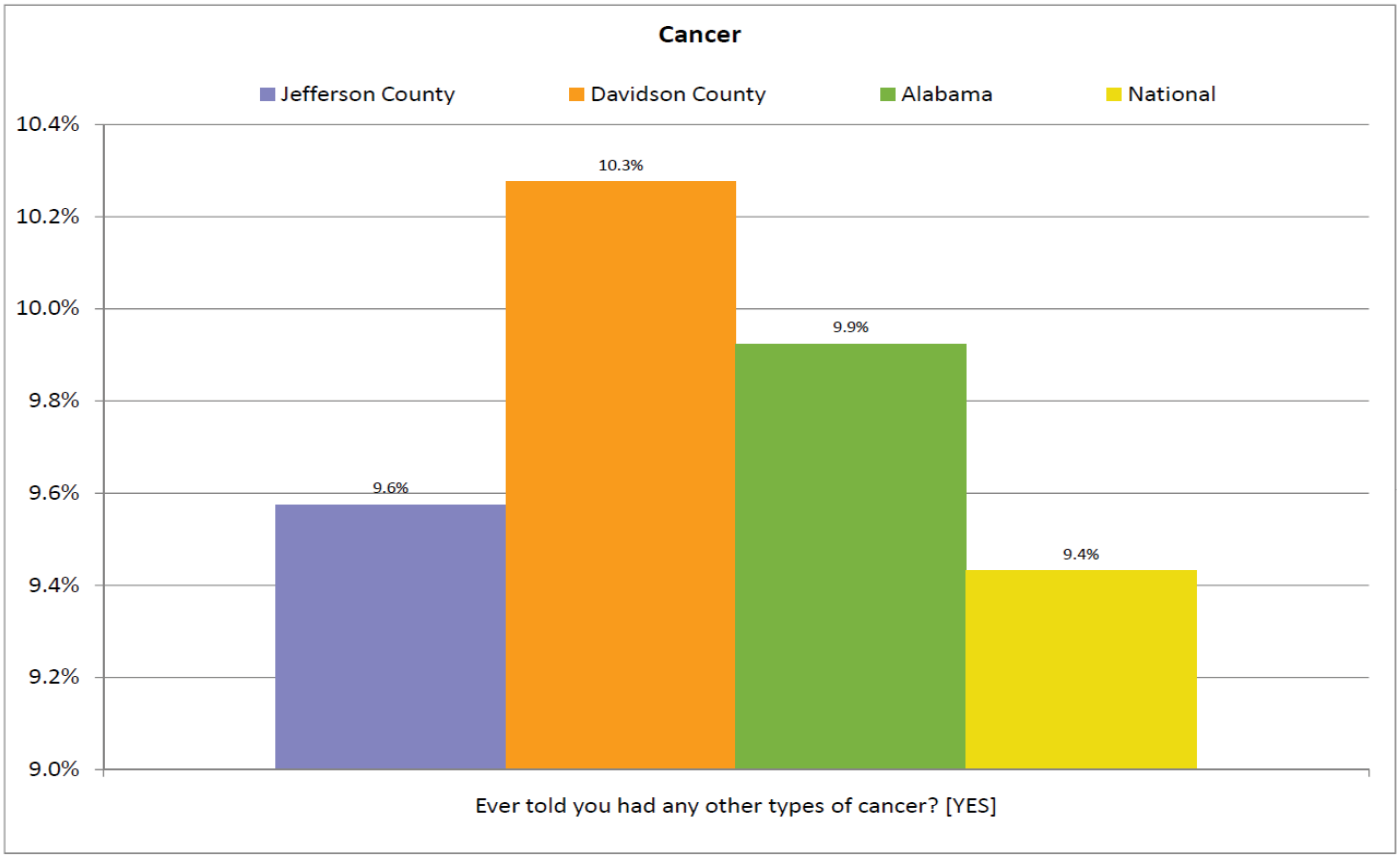


Table 4. Health Risk Factors – Mental Health identified with BRFSS data

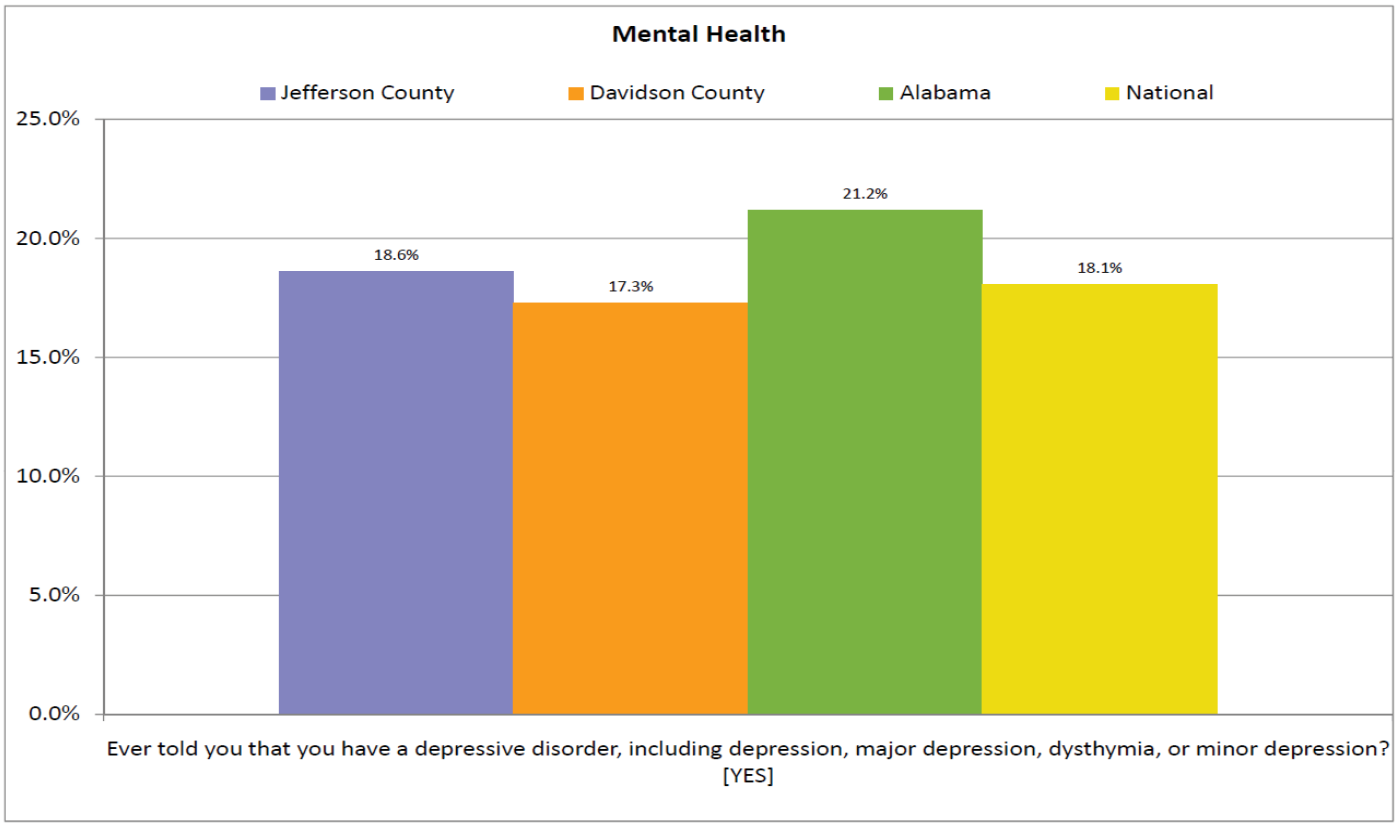


Table 5. Health Risk Factors – Behavioral issues identified with BRFSS data

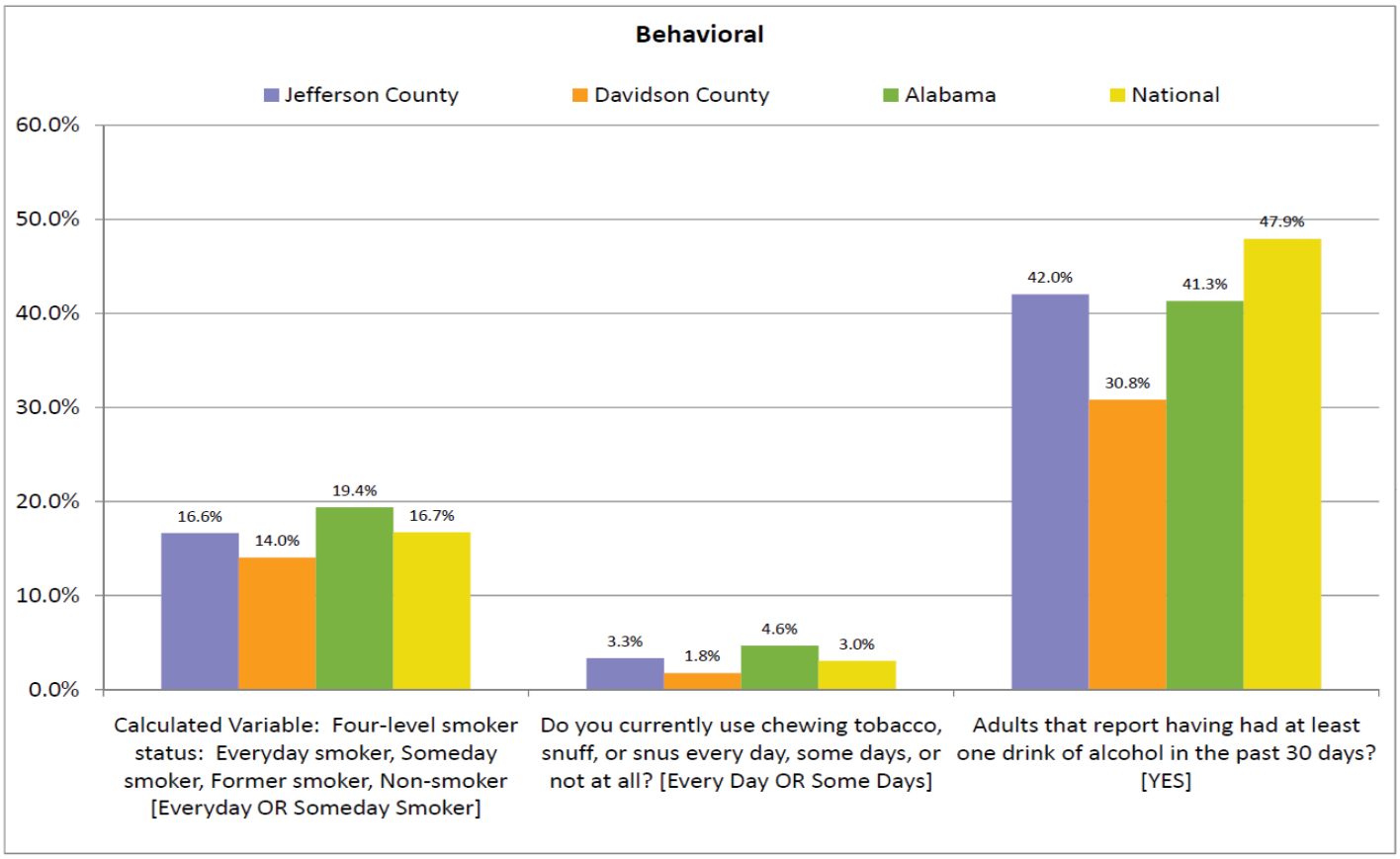


Table 6. Health Risk Factors – Obesity identified with BRFSS data

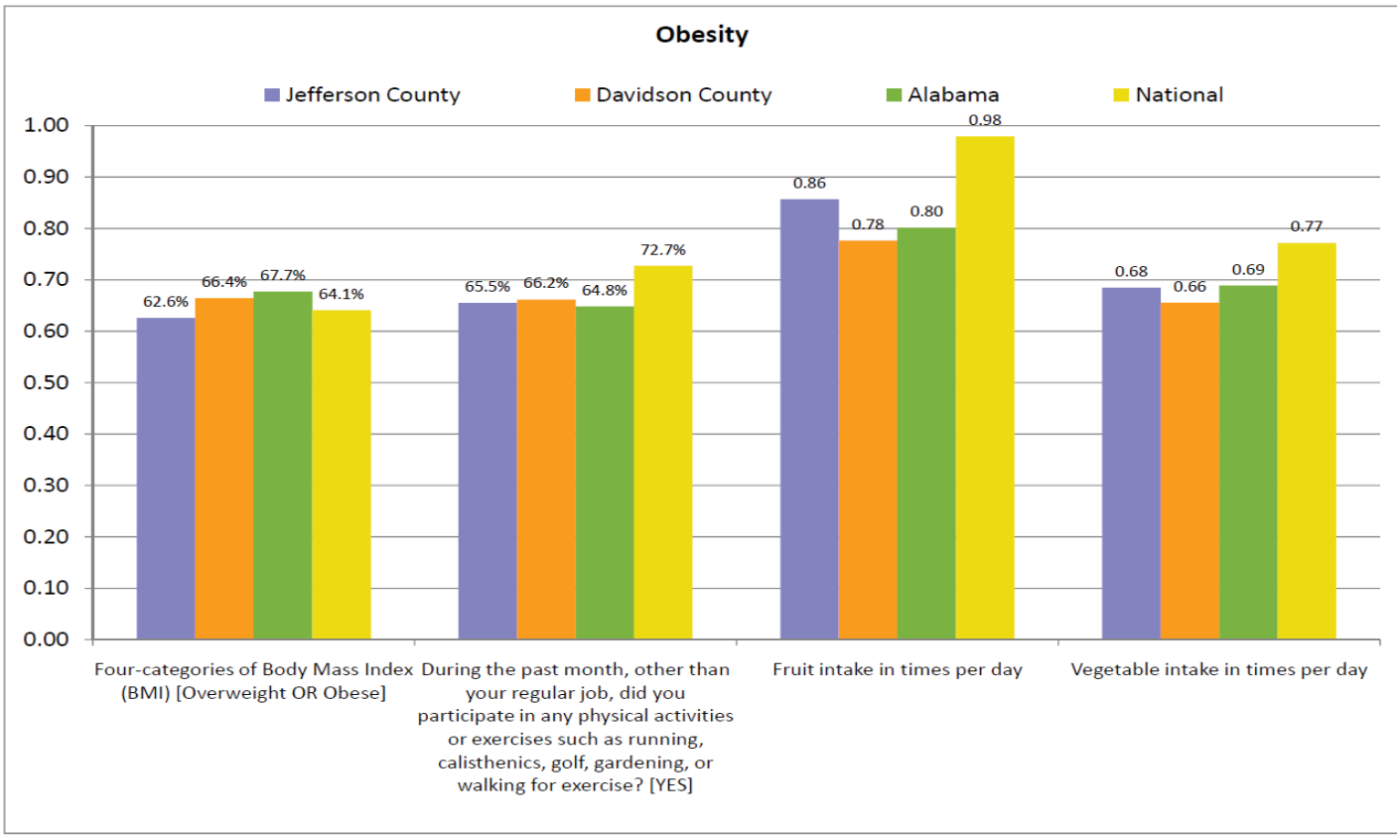
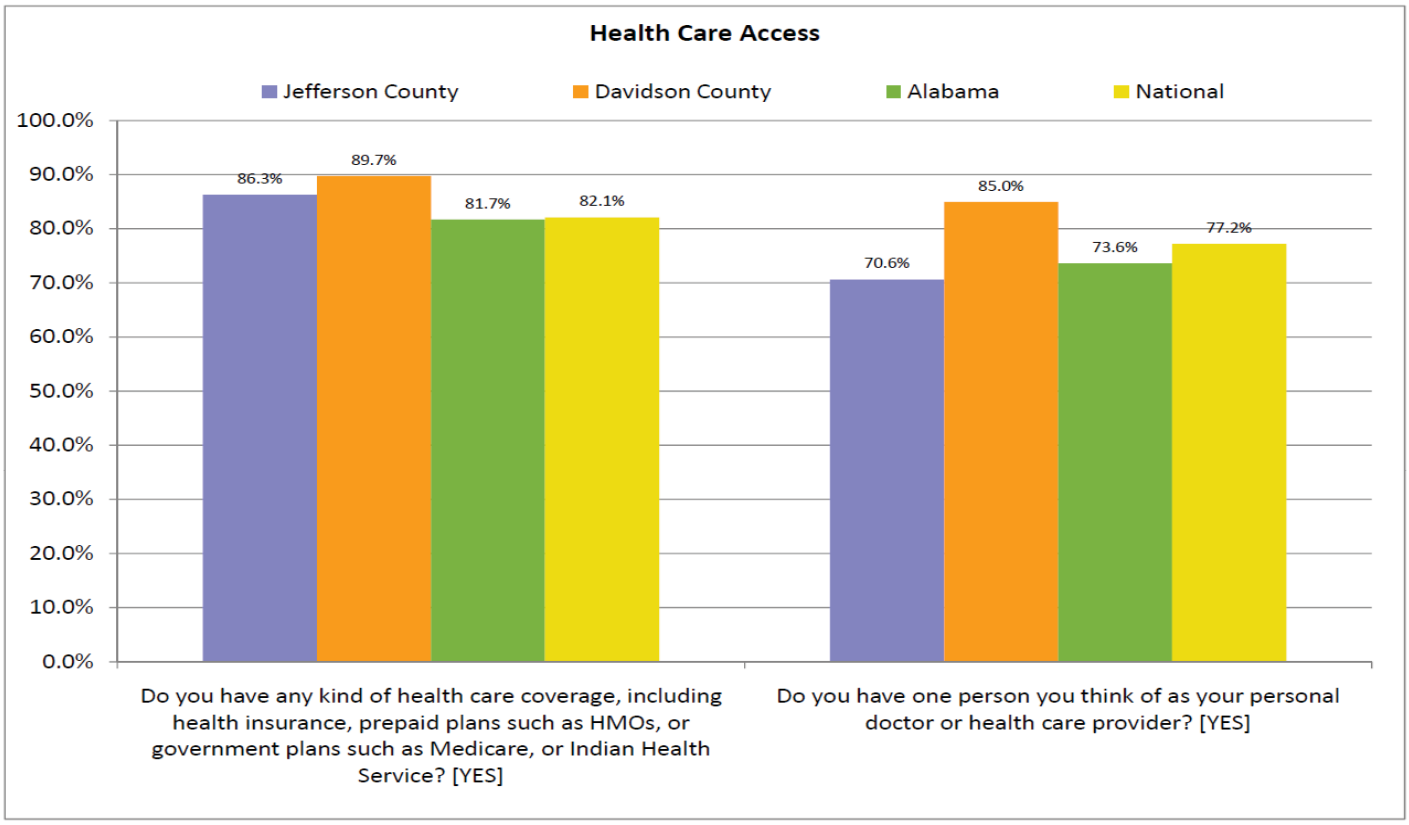


Table 7. Health Care Access identified with BRFSS data



County Health Rankings

Secondary data available on Jefferson County and all counties in the nation are available at www.countyhealthranking.org. This annually updated site establishes a benchmark using Health Outcomes and Health Factors. The County Health Rankings are a key component of the Mobilizing Action Toward Community Health (MATCH) project. MATCH is the collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The rankings identify the multiple health factors that determine a county's health status. Each county receives a summary rank for its health outcomes and health factors - the four types of health factors include: health behaviors, clinical care, social and economic factors and the physical environment.

Table 8. County Health Rankings March 2013

County Health Ranking
Health Outcomes and Factors

	Jefferson County	Davidson County	Alabama	National Benchmark
Mortality				
Premature death	10,485	8,401	9,609	5,317
Health Behaviors				
Adult smoking	21%	18%	23%	13%
Adult obesity	32%	30%	33%	25%
Physical inactivity	29%	27%	31%	21%
Excessive drinking	15%	12%	12%	7%
Motor vehicle crash death rate	18	14	0.23	0.1
Sexually transmitted infections	800	558	562	92
Low birthweight	11.60%	9.20%	10.40%	6.00%
Teen birth rate	49	50	49	21
Clinical Care				
Uninsured	16%	20%	17%	11%
Primary care physicians	1,029:1	1,085:1	1,641:1	1,067:1
Dentists	1,466:1	1,493:1	2,488:1	1,516:1
Preventable hospital stays	56	65	80	47
Diabetic screening	85%	87%	84%	90%
Mammography screening	69%	64%	65%	73%
Social & Economic Factors				
High school graduation	73%	76%	72%	
Unemployment	8.70%	8.20%	9.00%	5.00%
Children in poverty	27%	29%	28%	14%
Children in single-parent households	42%	43%	37%	20%
Violent crime rate	727	1202	427	66
Physical Environment				
Daily fine particulate matter	13.3	14.4	12.9	8.8
Access to recreational facilities	10	9	7	16
Limited access to healthy foods	11%	8%	8%	1%

Community Health Status Indicators

Community Health Status Indicators (CHSI) provides data on over 200 key health indicators for each of the 3,141 United States counties. The data are provided to assist community leaders and public health professionals as they identify, compare and address the most pressing issues for their community.

Table 9. Infant Mortality and Low Birth Weight

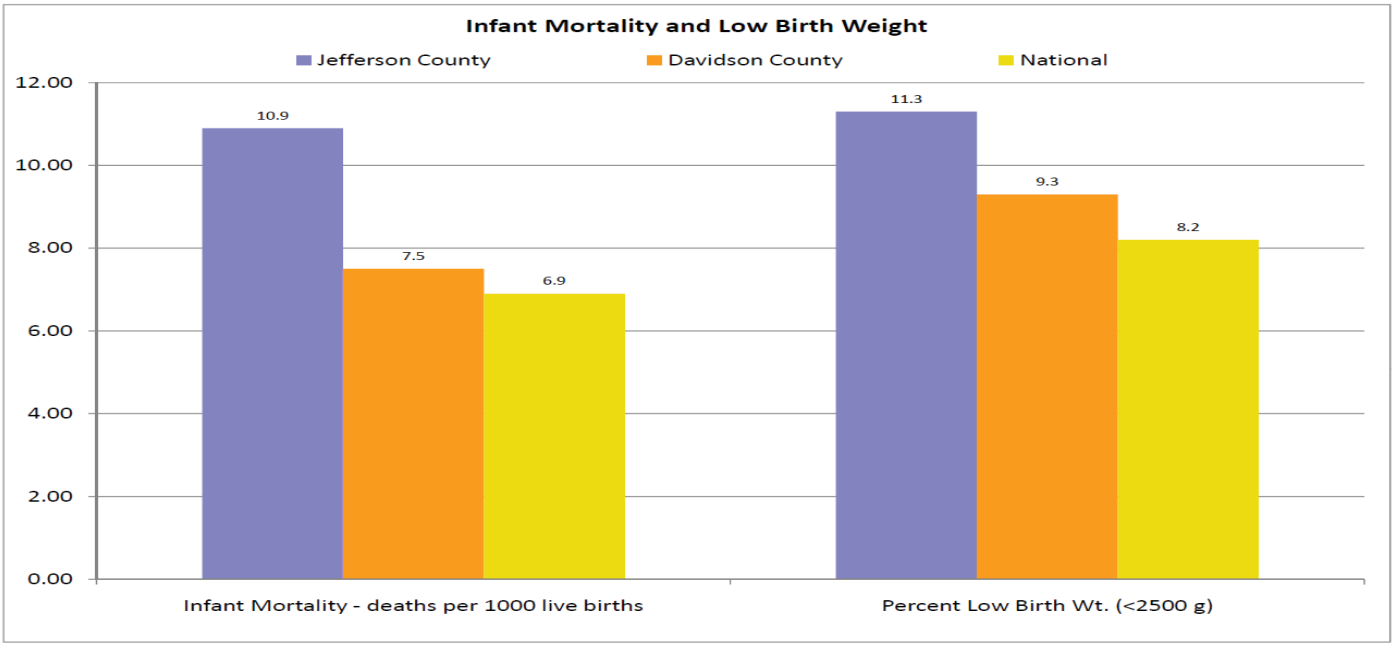
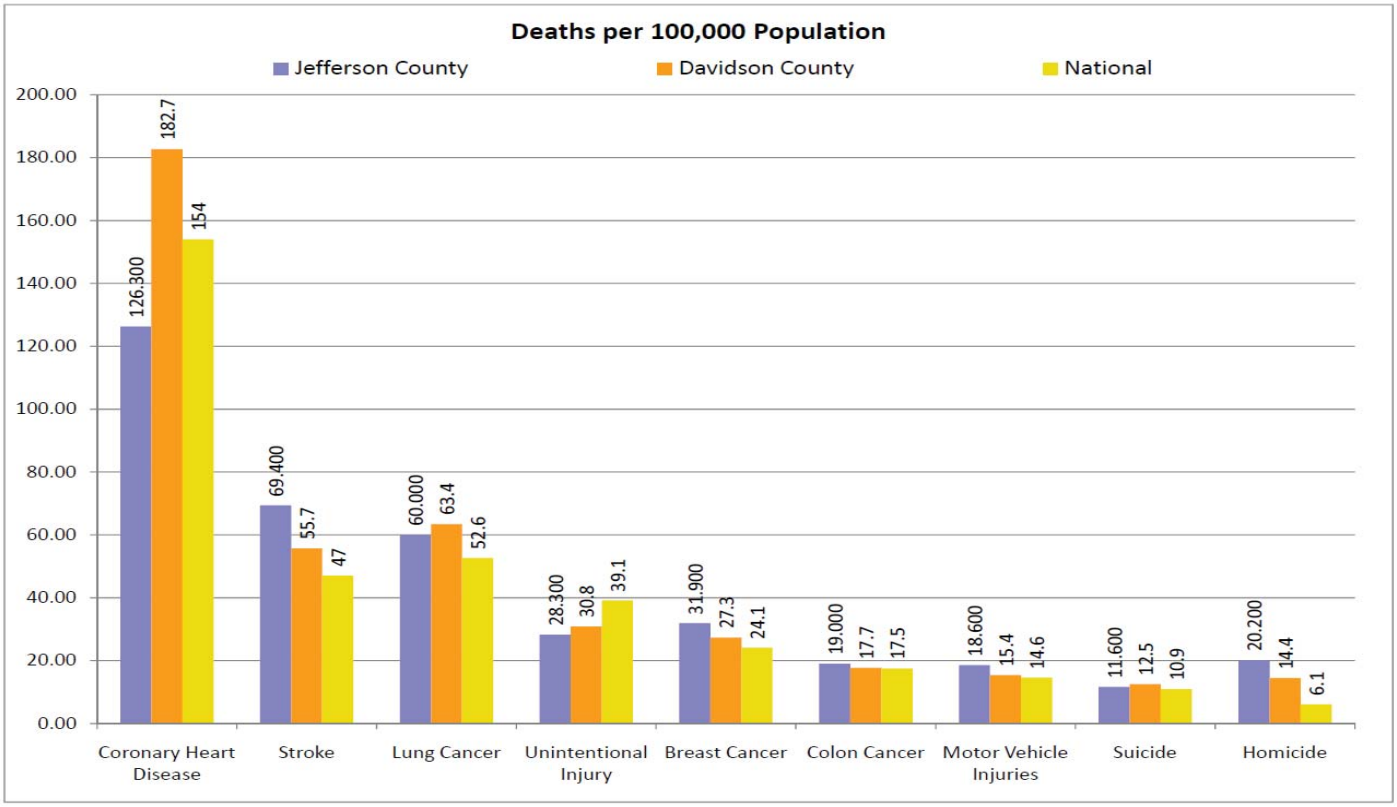


Table 10. Deaths per 100,000 Population



Surveys/Interviews

To formulate a comprehensive list of the greatest health needs within the St. Vincent's Birmingham Hospital community, survey and interview questions were developed as previously described. Using the guidance provided in IRS Notice 2011-52 on Community Health Needs Assessments for tax-exempt hospitals, the CHNA team identified key informants. The list of key informants included health experts at the state and community levels, local civic leaders, patients and patient advocates. These key informants were queried using a variety of techniques including electronic survey, telephone and in-person interviews. Below is a list of the survey questions and the weighted responses:

Where do You Receive the Majority of your Health Information?	• Physician/Provider • Internet • TV
What are the Biggest Problems for You or Your Family?	• Lack of Exercise • Stress • Unemployment
Biggest Health Issue/Concern in Your Community?	• Nutrition & Weight Status • Heart Disease • Lack of Physical Activity • Cancer • Access to Healthcare
What Does Your Community Need In Order to Improve Your Health and Others?	• Affordable Health Insurance • Affordable Medications • Healthier Food Choices • Job Opportunities
What Health Screenings or Education is Needed In Your Community?	• Diabetes • Blood Pressure • Heart Disease • Exercise/Physical Activity
What Events/Initiatives are Most Beneficial to Your Community	• St. Vincent's Health Screenings • St. Vincent's Provided Fitness & Wellness Programs • Jeremiah's Hope • Scale Back Alabama Teams
Most Important Problems Facing Community?	• Poor health habits-Obesity & Conditions that follow (DM, HTN, etc) • Cost and lack of health insurance • Transportation • Cost of Prescription Medicines
What Can Hospitals Do To Improve the Quality of Life in Your Community?	• Education & Screening Programs/Events • Transportation Services • Subsidized Medications • Walking Trails/Fitness related Programs

RESULTS

Summary of Findings

The CHNA Coalition Committee, consisting of representatives from hospital senior management, board members and multiple community leaders, completed a private ballot to determine the top issues of the community. The ballot prompted each committee member to rank order a list of community concerns.

The results demonstrated the committee member's healthcare priorities, as well as the voting frequency of each item on the ballot. A Borda type methodology was used to tabulate the results. The issues considered to be of greatest need in the community were as follows:

1. Good Nutrition/Obesity Prevention
2. Cardiac Health Education
3. Care for the Uninsured
4. Decreased Unemployment
5. Hypertension/Stroke Prevention

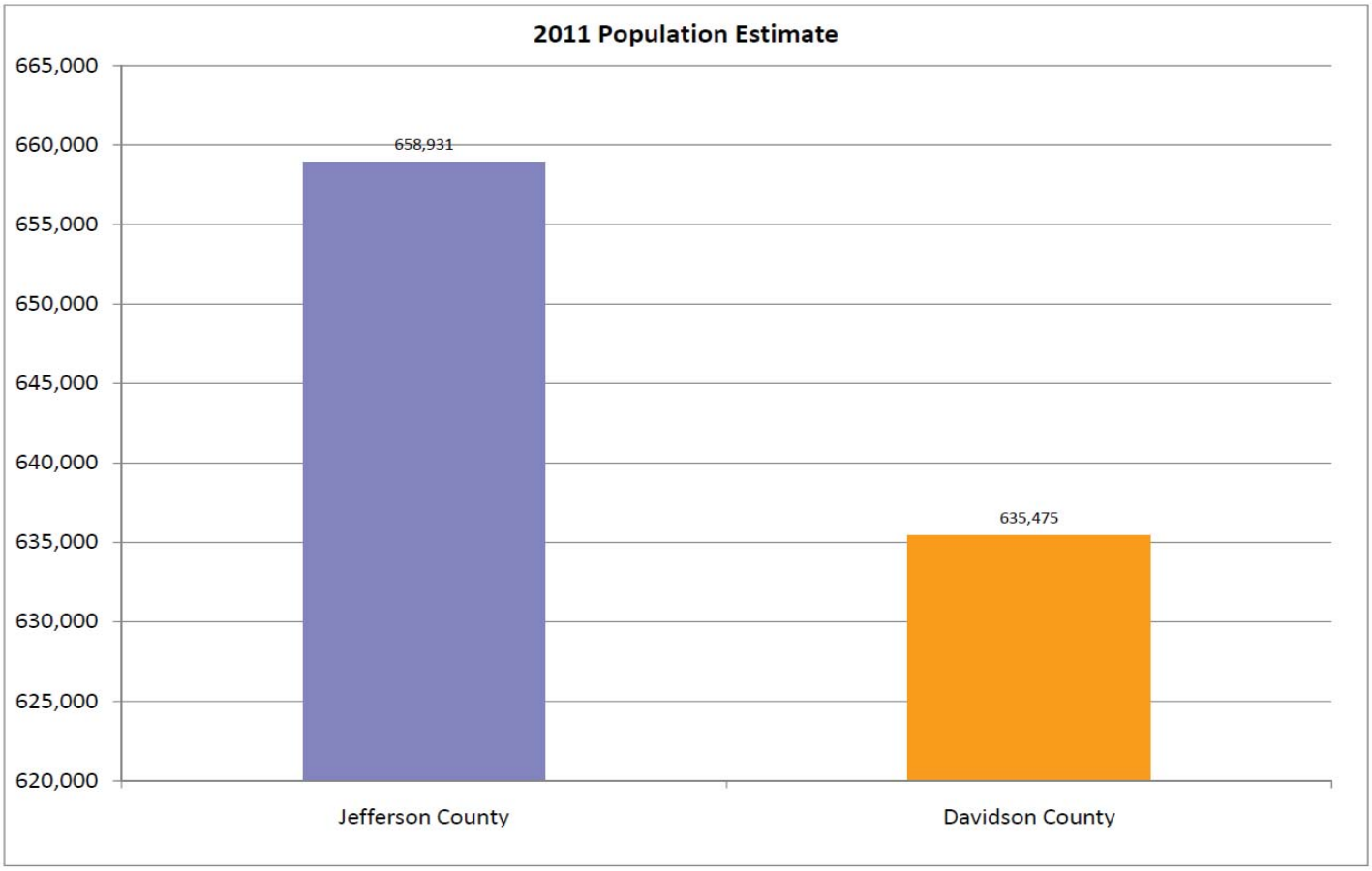
Identifying the needs of the community provides St. Vincent's Birmingham Hospital the opportunity and the knowledge to better align existing programs and to design future efforts to best meet the needs of their community. St. Vincent's Birmingham Hospital is part of a health system committed to community outreach and "health care that leaves no one behind".

APPENDICES

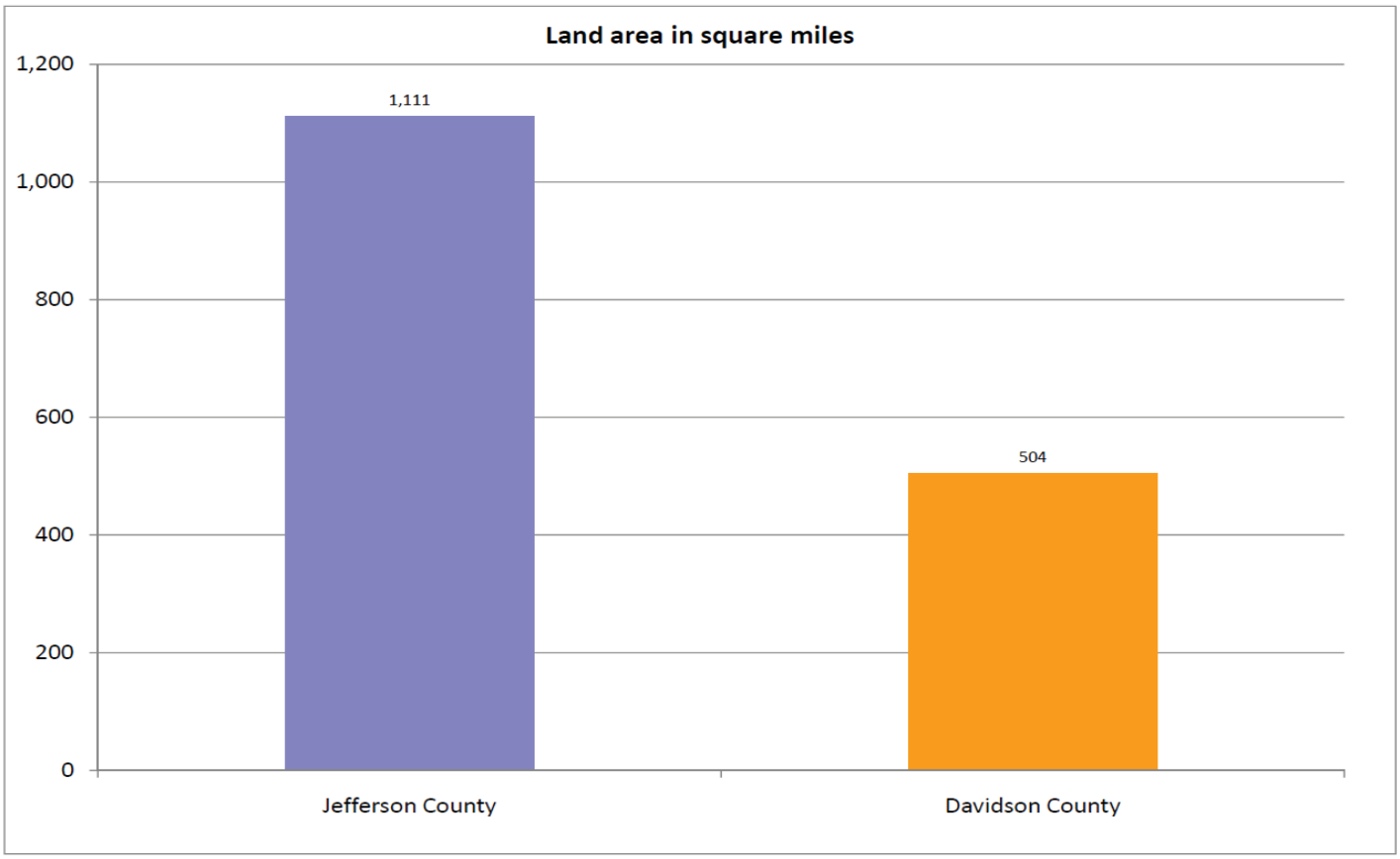
Graphs

Graph 1. U.S. Census – 2011 Population Estimate
Graph 2. U. S. Census – Land Area
Graph 3. U. S. Census – Persons per Square Mile
Graph 4. U. S. Census – Persons under 18 years
Graph 5. U. S. Census – Persons 65 years and over
Graph 6. U. S. Census – Race
Graph 7. U. S. Census – Ethnicity
Graph 8. U. S. Census – High School Graduate or Higher
Graph 9. U. S. Census – Bachelor's degree or higher
Graph 10. U. S. Census – Median household income
Graph 11. U. S. Census – Persons below poverty level

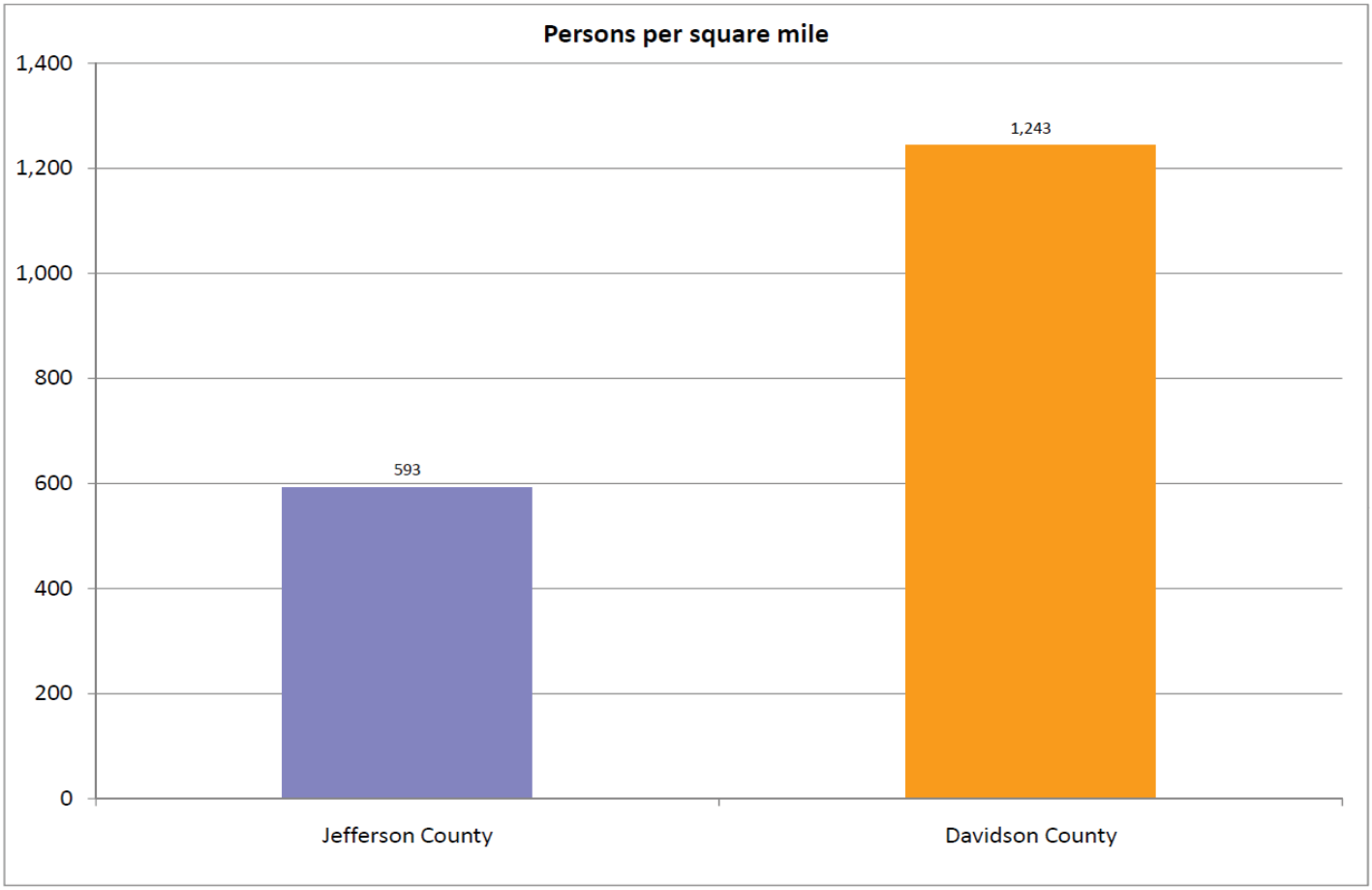
Graph 1. U.S. Census – 2011 Population Estimate



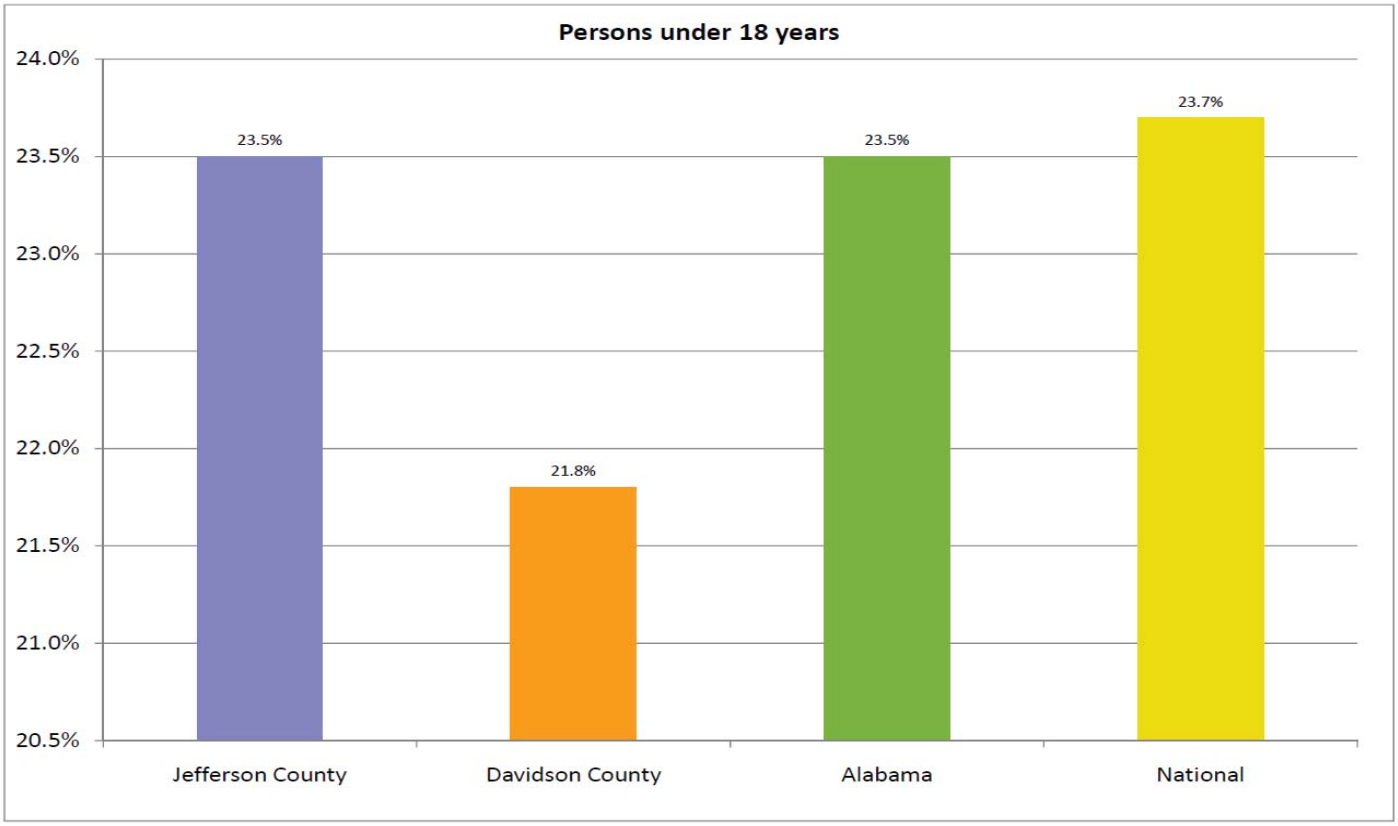
Graph 2. U. S. Census – Land Area



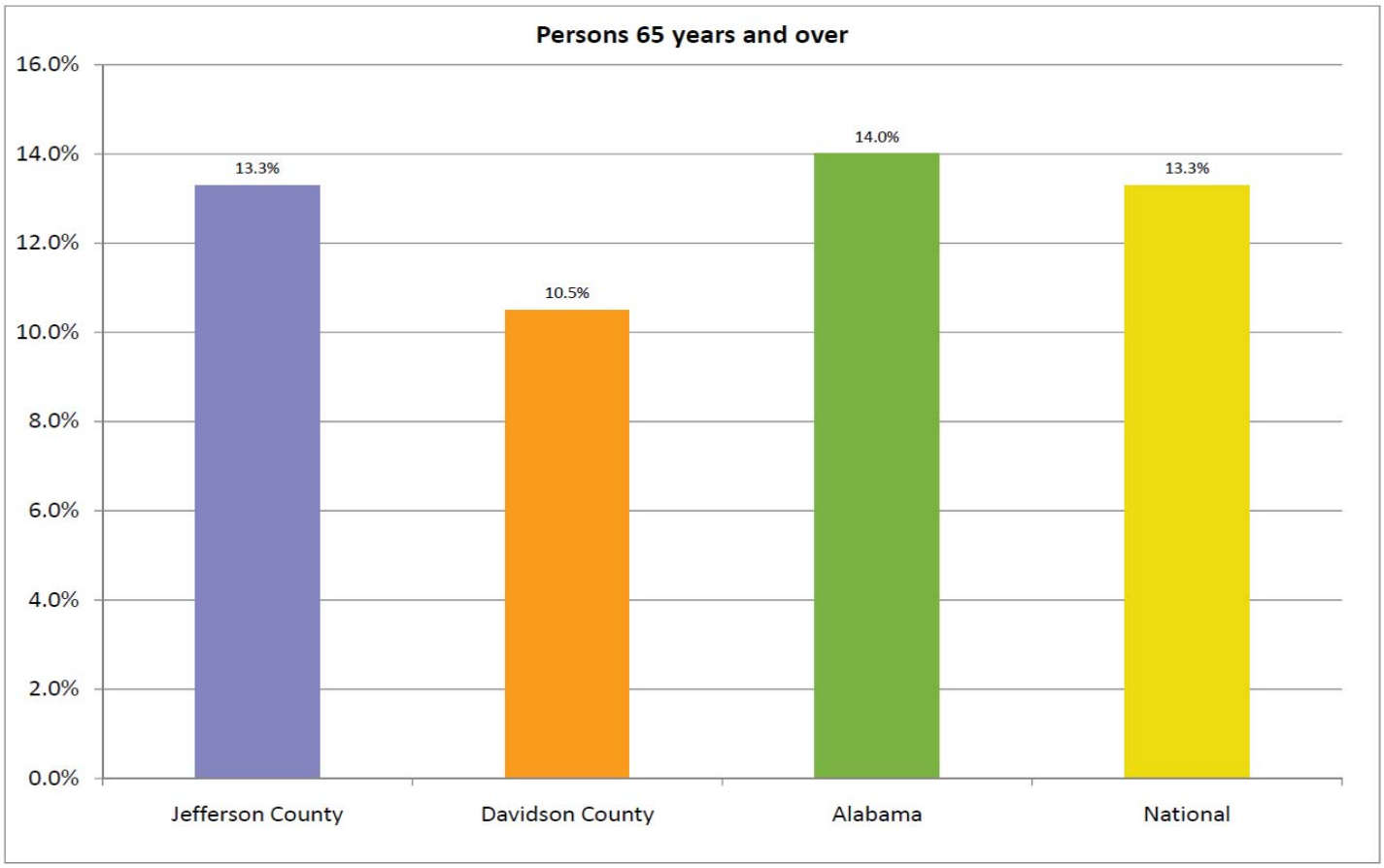
Graph 3. U. S. Census – Persons per Square Mile



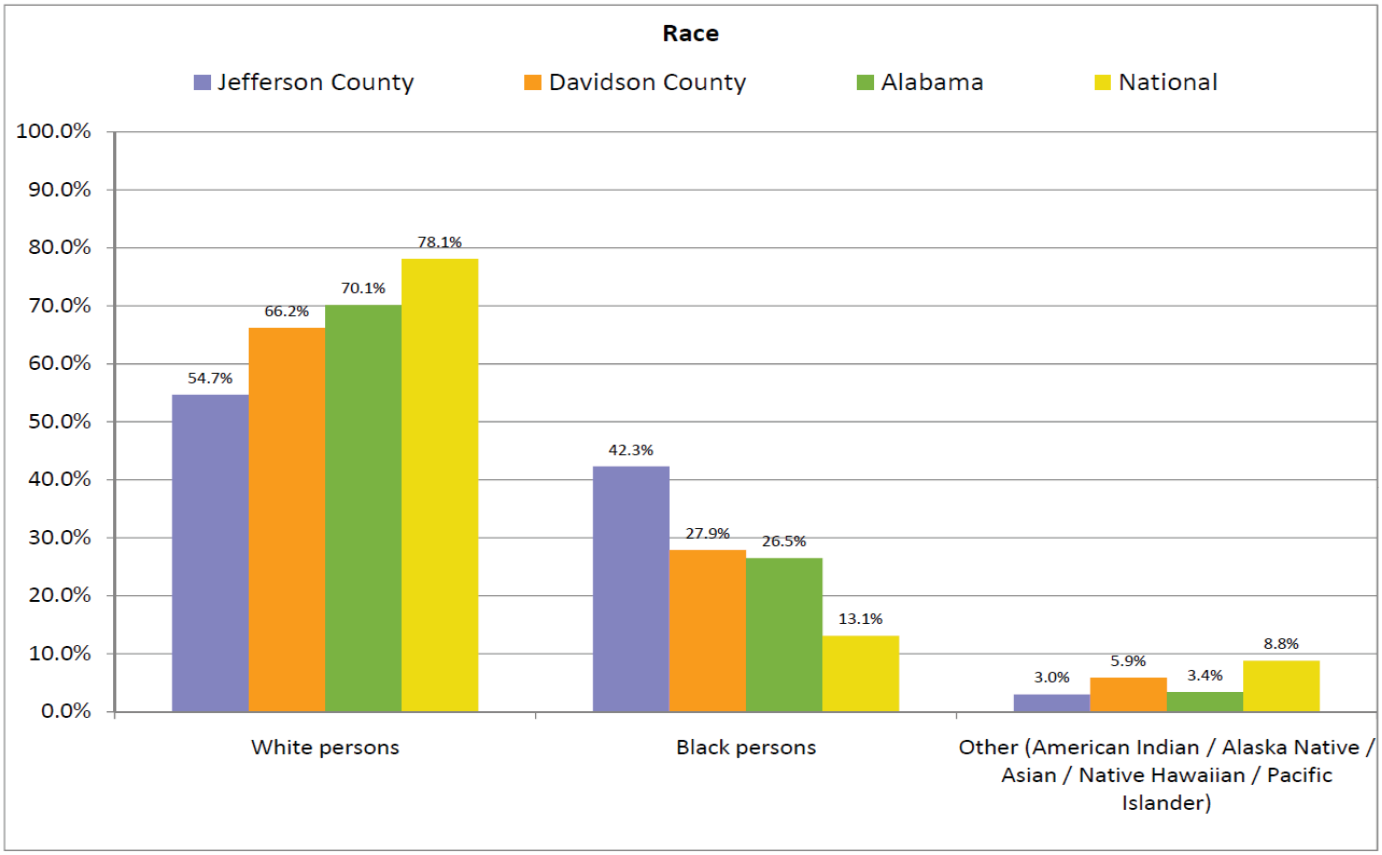
Graph 4. U. S. Census – Persons under 18 years



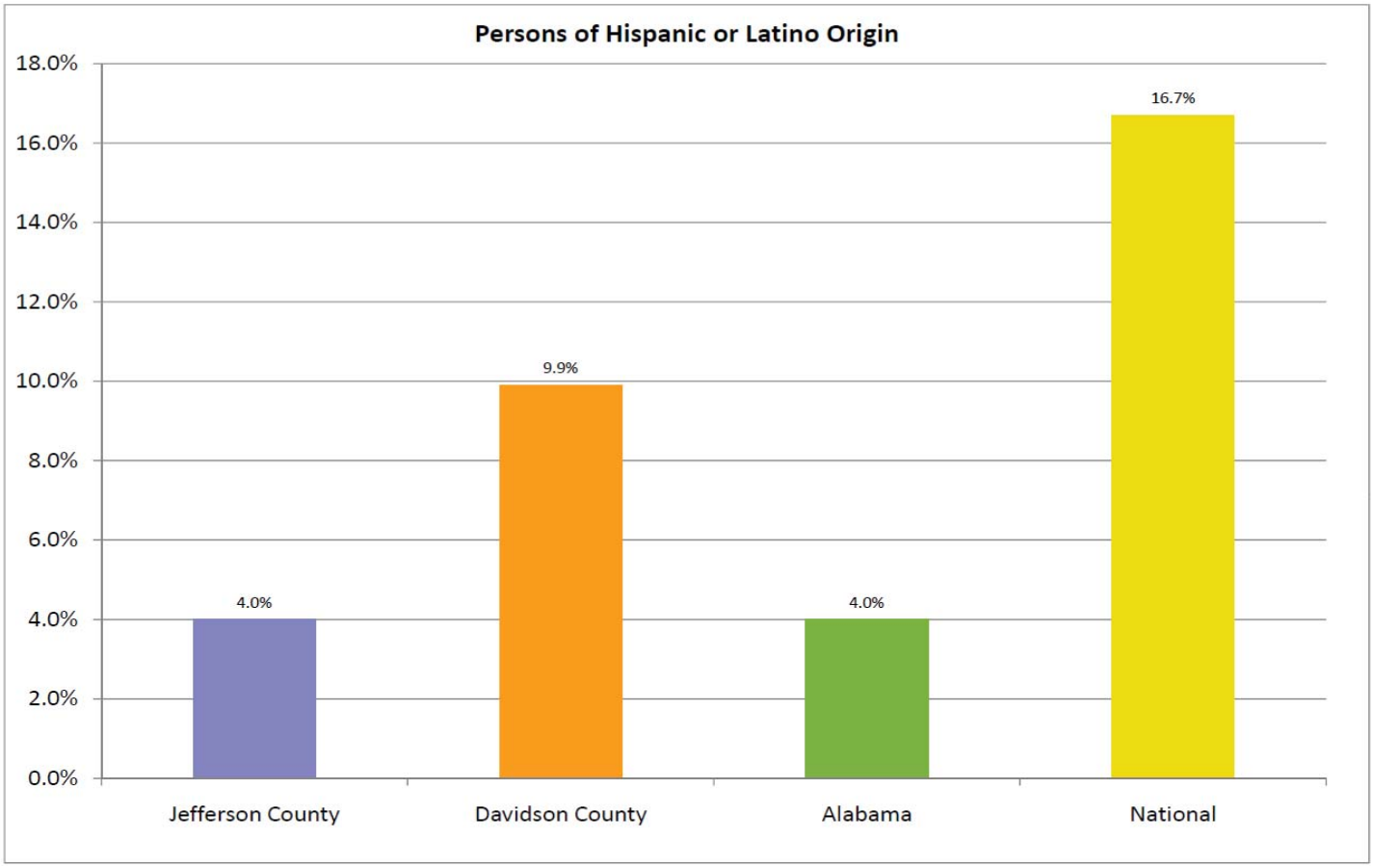
Graph 5. U. S. Census – Persons 65 years and over



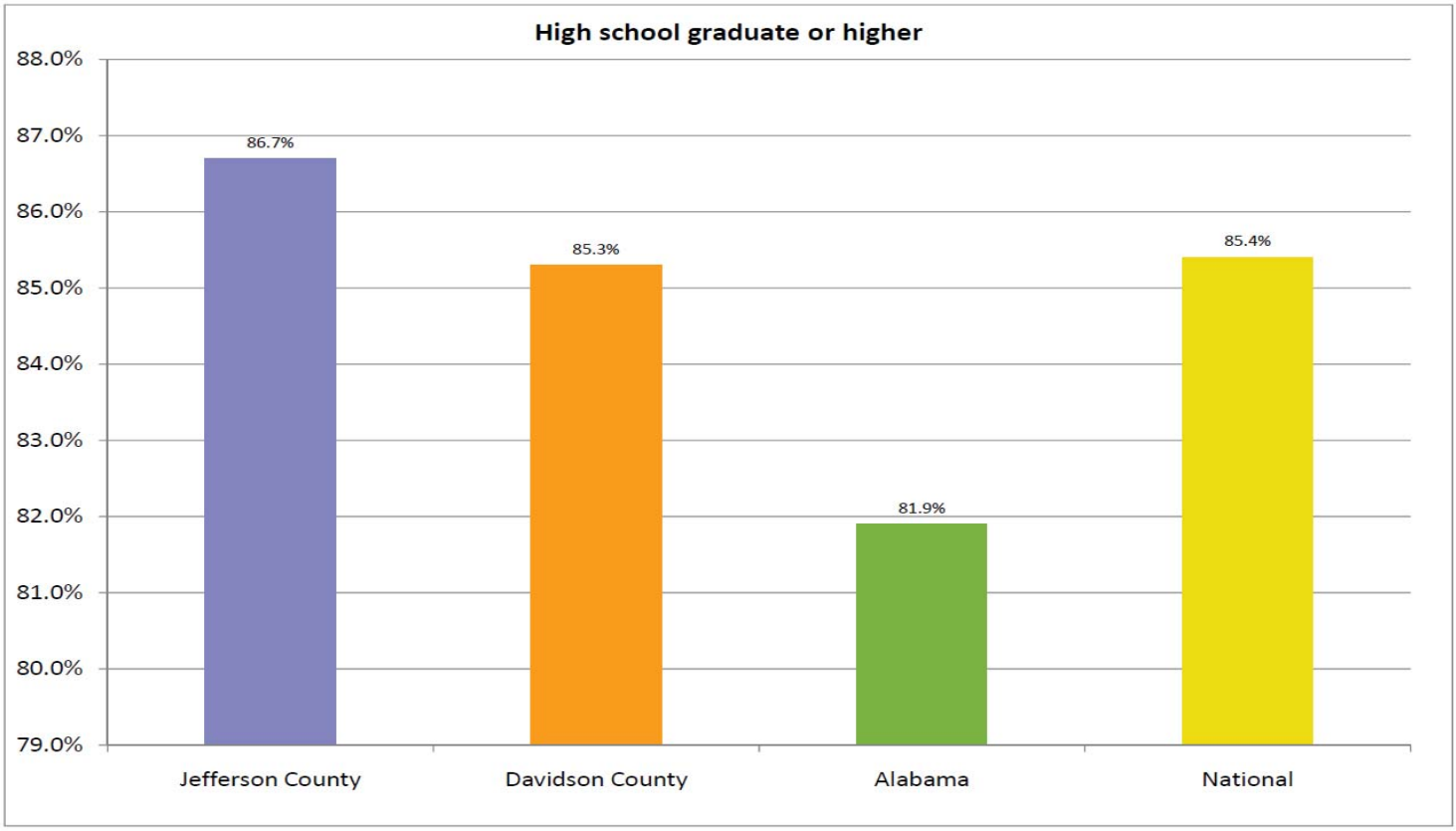
Graph 6. U. S. Census – Race



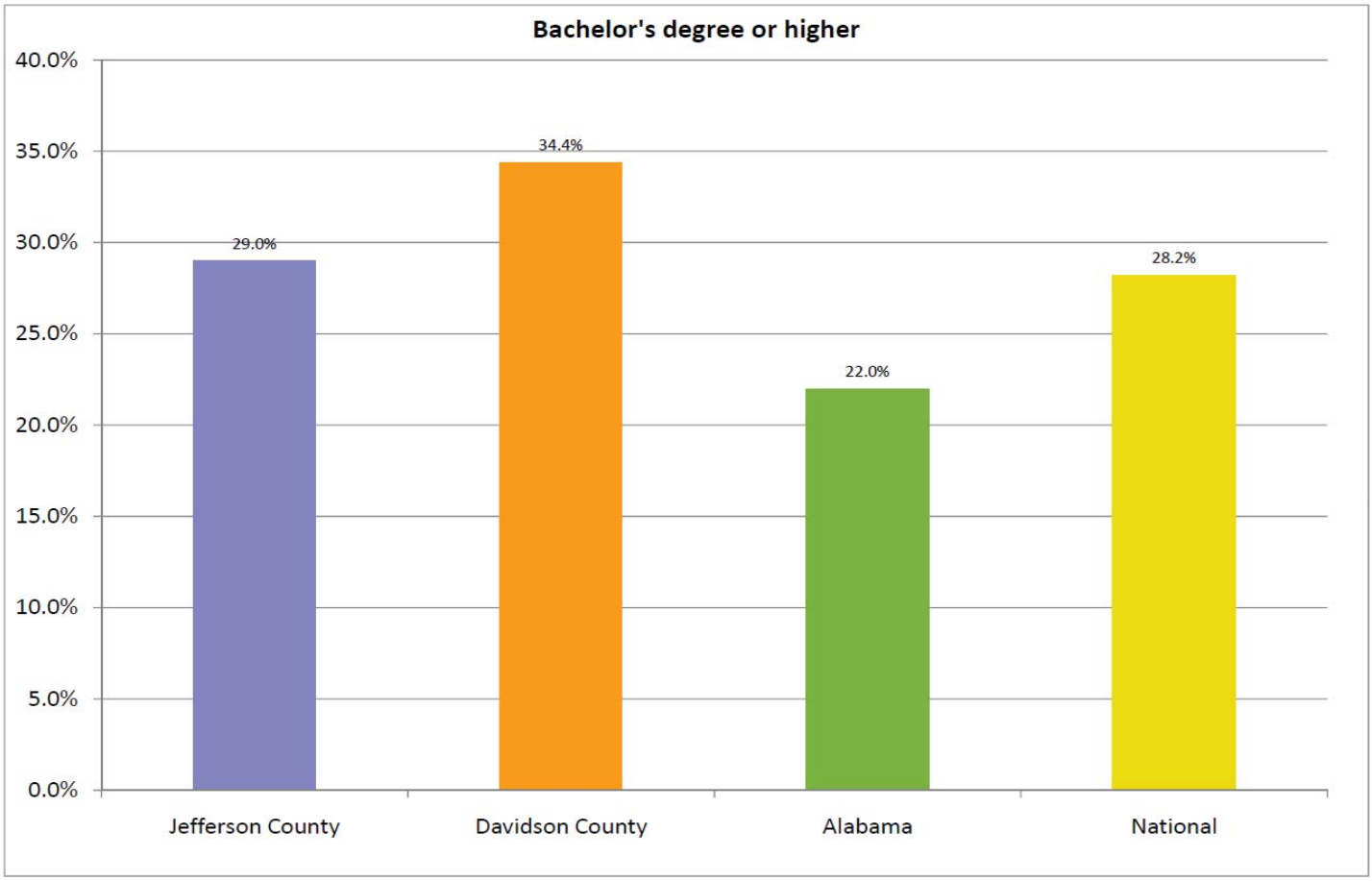
Graph 7. U. S. Census – Ethnicity



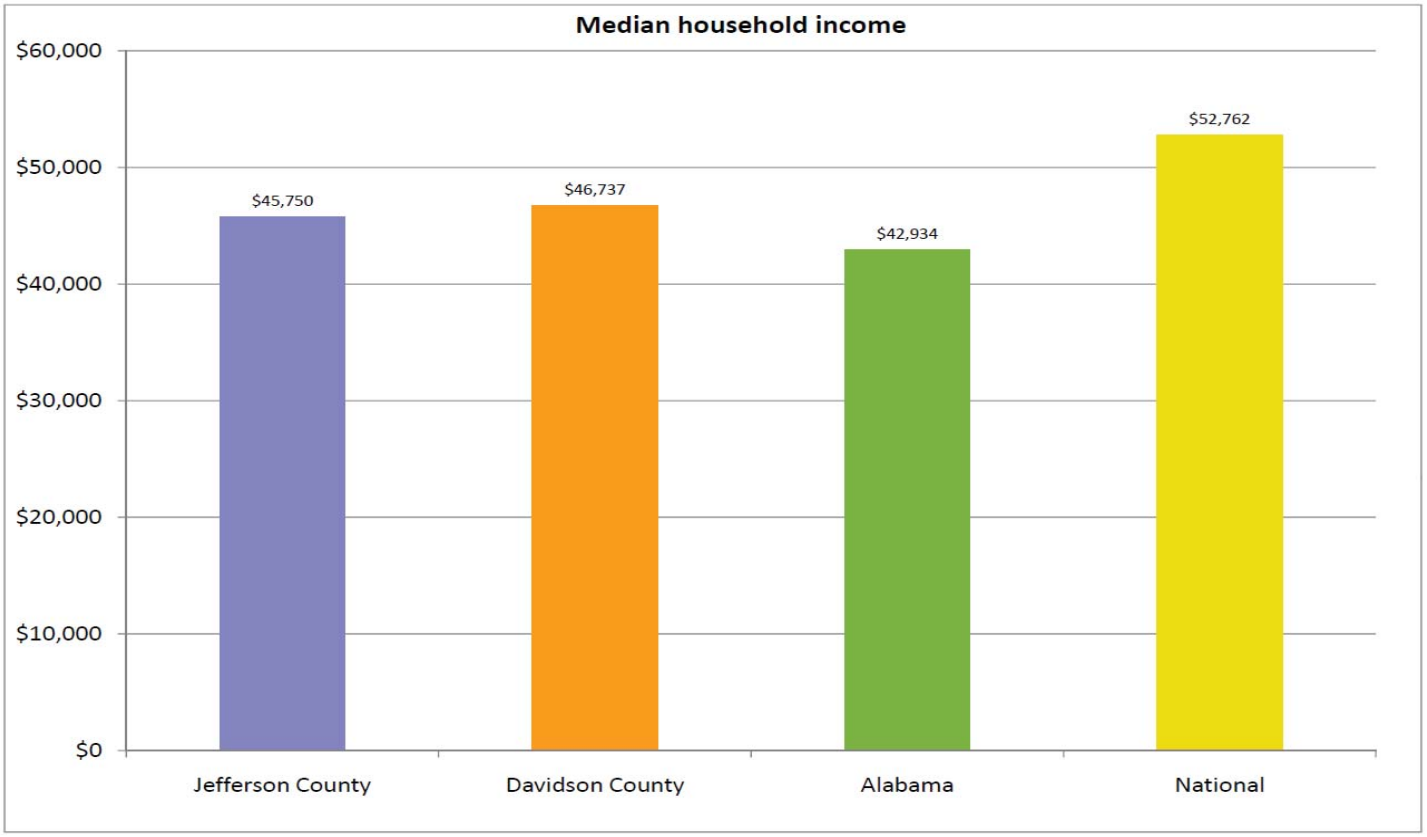
Graph 8. U. S. Census – High School Graduate or Higher



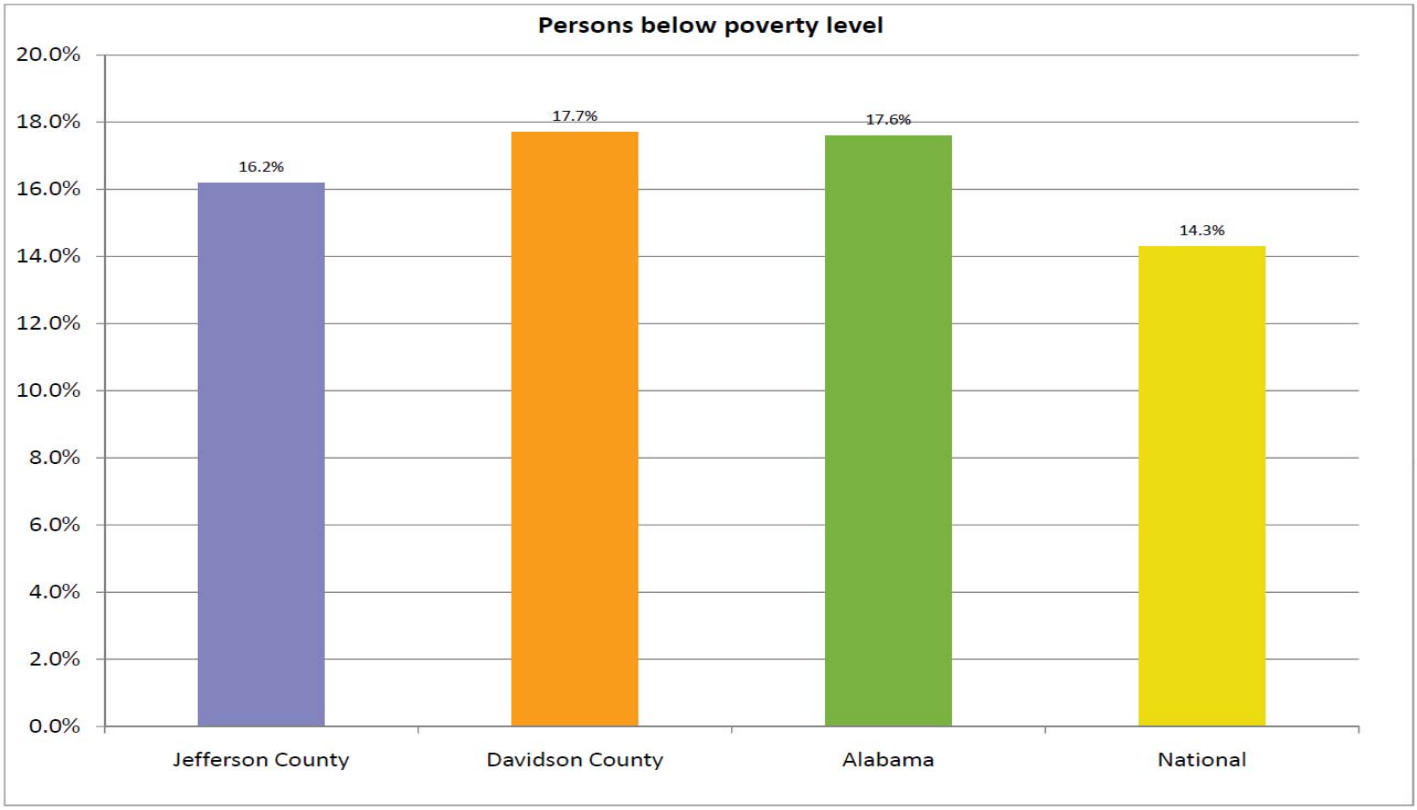
Graph 9. U. S. Census – Bachelor's degree or higher

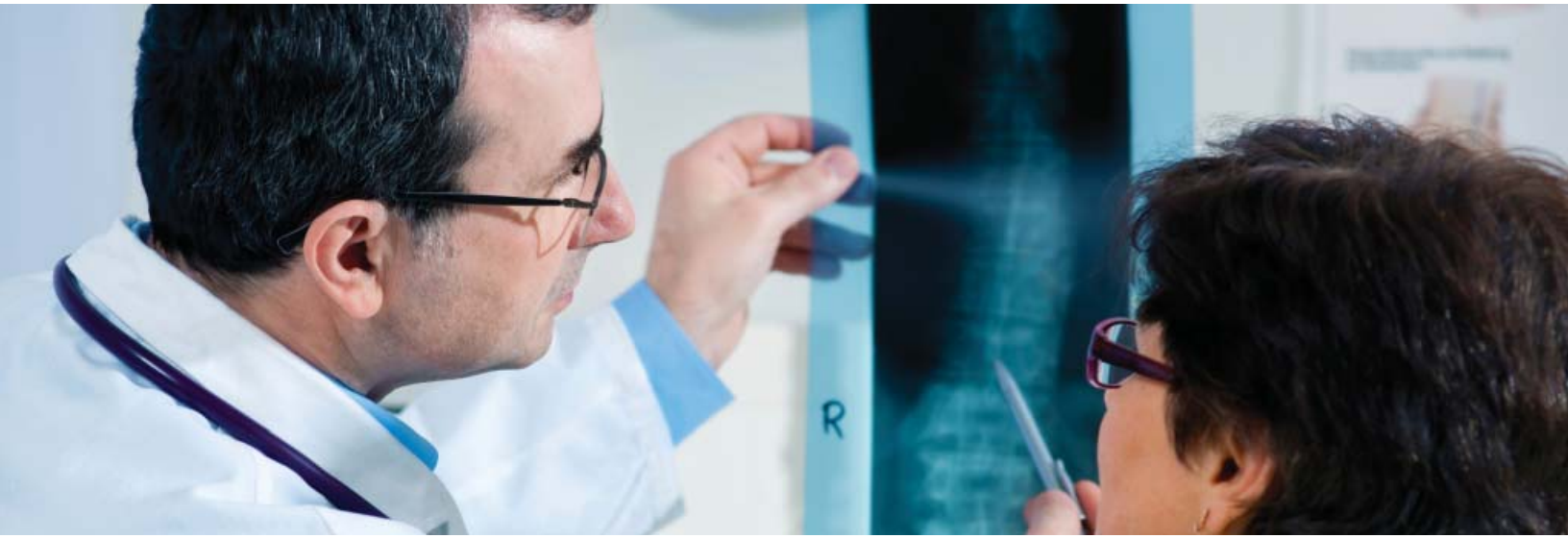


Graph 10. U. S. Census – Median household income



Graph 11. U. S. Census – Persons below poverty level





Community Health
Needs Assessment

2012