2022 Community Health Needs Assessment
Overview and Purpose

Overview

Founded in 1926, Johns Hopkins All Children's Hospital (JHACH) started as a beacon of hope during the Polio Epidemic serving children regardless of race or ability to pay. Nearly a hundred years later, we are still providing care to our community's children but with state-of-the-art technology and top healthcare providers delivering advanced, specialized care for children of all ages with some of the most complex medical problems.

Purpose of This Assessment

Johns Hopkins, All Children's Hospital, welcomes the opportunity to engage with our community to better understand their needs and concerns so that we can design responsive programs and partnerships that create meaningful impact. The Community Health Needs Assessment (CHNA) is conducted every three years to satisfy the requirements of the Affordable Care Act of 2010, following guidelines laid out by the I.R.S.

We will use the information collected during the CHNA to:

1. The results of this analysis will inform our Community Health Needs Assessment Implementation Plan for addressing the community-identified health needs
2. The findings from this CHNA will also be used to guide JHACH in developing community health programs that address the needs of the people we serve, intending to close gaps in disparities.

CHNA Progress Report

Since its adoption in 2019, the Community Health Needs Assessment (CHNA) with Johns Hopkins All Children's Hospital has collaborated with community stakeholders to reduce or eliminate community significant health needs. These collaborations have permitted us to achieve 90% of the objectives outlined and approved by the hospital's Board of Trustees in the 2019 Community Benefit Strategic Implementation Plan (CBSIP).

The CHNA identified six community priorities, including:

- Asthma/allergies
- Birth outcomes/infant mortality
- Exercise, nutrition, and weight
- Injury prevention
- Mental Health
- Substance use and alcohol abuse

Outstanding 2019 objectives represent activities like placing nebulizers in each Pinellas County School and training school nurses on the utilization of the machine. While we have procured the nebulizers, our annual meeting and training with Pinellas County School nurses occur each fall at the start of the school year. Additionally, several mental health first aide trainings have been held to provide skills-based training regarding identifying, understanding and responding to mental and behavioral health issues in an effort to assist law enforcement, educators and families. While we have been able to complete those trainings, we committed to perform, we have been asked to offer at least one more, if possible, prior to the close of 2022. Finally, with the national inflation rate on the rise and the Tampa Bay area experiencing a 1.2% higher rate than the rest of the country food insecurity remains an issue, which will continue to fight for families over the summer school break by hosting the Summer Food Service Program and offering two additional food community distributions.
Communities Served by JHACH

The efforts of a multi-entity collaboration allowed for five counties to be evaluated during the CHNA process, including Pinellas, Hillsborough, Polk, and Sarasota). While Johns Hopkins, All Children’s Hospital, identifies the City of St. Petersburg as the primary Community Benefits Service Area based on the usage of the emergency center and the community members receiving community benefits and programming. Johns Hopkins All Children’s Hospital provides services to a 17-county catchment area. Recognizing the other areas that benefit from the hospital services, we decided to include Pinellas and Hillsborough Counties data. Including both regions will allow the evaluation of community priorities to represent the larger population who will experience community benefits and for more equitable approaches to addressing the selected preferences.
Demographics - Pinellas County

PINELLS COUNTY DEMOGRAPHICS

982,142 People

Median Age 49.0

48.0% Male
52.0% Female

Population Age 5+ by Language Spoken at Home

Level of Education, Age 25+

<table>
<thead>
<tr>
<th>Pinellas County</th>
<th>Florida</th>
<th>U.S.</th>
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</thead>
<tbody>
<tr>
<td>Less than 9th Grade</td>
<td>2.8%</td>
<td>4.1%</td>
</tr>
<tr>
<td>9 to 12th Grade, No Diploma</td>
<td>6.6%</td>
<td>14%</td>
</tr>
<tr>
<td>High School Graduate or GED</td>
<td>23.8%</td>
<td>29.5%</td>
</tr>
<tr>
<td>Some College, No Degree</td>
<td>20.8%</td>
<td>19.3%</td>
</tr>
<tr>
<td>Associate's Degree</td>
<td>9.8%</td>
<td>9.9%</td>
</tr>
<tr>
<td>Bachelor's Degree</td>
<td>21.4%</td>
<td>12.9%</td>
</tr>
<tr>
<td>Graduate or Professional Degree</td>
<td>11.4%</td>
<td>11.3%</td>
</tr>
</tbody>
</table>

Race & Ethnicity

- Hispanic or Latino: 11.3%
- Other: 6.3%
- Two or More Races: 2.9%
- Native Hawaiian and Other Pacific Islander: 0.1%
- Asian: 5.6%
- American Indian and Alaska Native: 0.4%
- Black or African American: 10.9%
- White: 79.5%

9.7% Of the Population are Veterans

12.1% of the Population Foreign Born

PINELLS COUNTY ECONOMIC BREAKDOWN

Median Household Income
$64,959 With a $24,89 Mean Hourly Wage, 2020

Unemployment Rate
5.1% Age 16+, 2022

Inflation Rate
85.9% Have Internet Subscriptions

13.0% Of Individuals are Below Poverty Level

70.4% Of the total number of survey respondents experienced one or more losses due to COVID

Some of the top losses include:
- Recreation or entertainment
- Sense of well-being, security, or hope
- Death of family or friend
- Exercise opportunities
- Income

7.2% Population Change 2010-2022

7.2% Population Change 2010-2022

Median Property Value
16.8% Growth 2010-2021

66%

18%

16%

18%
Demographics-Hillsborough County

HILLSBOROUGH COUNTY DEMOGRAPHICS

1,519,364 People

Median Age
38.5

48.9% Male    51.1% Female

Population Age 5+ by Language Spoken at Home
- Speak Only English: 68%
- Speak Spanish: 25%
- Speak Asian/Pacific Islander Lang: 2%
- Speak Indo-European Lang: 1%
- Speak Other Lang: 1%

Level of Education, Age 25+
- Hilsborough County: 4.4%
- Florida: 4.2%
- U.S.: 4.1%

Race & Ethnicity
- White: 67.6%
- Hispanic or Latino: 31.4%
- Other: 5.2%
- Two or More Races: 4.6%
- Native Hawaiian and Other Pacific Islander: 0.1%
- Asian: 4.5%
- American Indian and Alaska Native: 0.4%
- Black or African American: 17.3%

17.6% of the Population Foreign Born

7.6% Of the Population are Veterans

HILLSBOROUGH COUNTY ECONOMIC BREAKDOWN

Median Household Income
$67,683

Workers by Means of Transportation to Work, 2022
- Hilsborough County: 7.7%
- Florida: 6.6%

- Worked at Home: 7.7%
- Walked: 1.8%
- Bicycle: 0.4%
- Carpool: 9.2%
- Drove Alone: 78.3%
- Public Transport: 1.2%
- Other: 1.4%

71.7%
Of the total number of survey respondents experienced one or more losses due to COVID

Some of the top losses include:
- Recreation or entertainment
- Sense of well-being, security, or hope
- Death of family or friend
- Exercise opportunities
- Income

23.6%
Population Change 2010-2022

$262,584
Median Property Value
20.1% Growth 2010-2021

HILLSBOROUGH EMPLOYED CIVILIANS
16+ BY OCCUPATION GROUP
- White Collar: 63%
- Blue Collar: 19%
- Service and Farming Industries: 18%

89.5%
Have Internet Subscriptions

Inflation Rate
9.6%
12-month percentage change
Tampa-St. Petersburg-Clearwater Data

15.2%
Of Individuals are Below Poverty Level

Sources: All4HealthFL.org, Florida Census, U.S. Bureau of Labor Statistics
Process Overview

To fulfill the 2022 IRS CHNA requirement and assess our community’s health priorities, Johns Hopkins All Children’s Hospital contracted with Healthy Communities Institute (HCI) to gather community input and assist with prioritizing health issues. The goal of the CHNA is to compile data from primary and secondary sources to capture a robust understanding of the community’s significant health priorities. Insights on the community’s significant health needs priorities were columnated through local and state secondary data and primary sources, including community surveys and focus groups. The prioritization of these community significant health needs occurred through convening community partners, community leaders and citizens who outline how they would prioritize based on their ongoing community experience. The All4Health Collaboration in compiling this information included Johns Hopkins All Children’s Hospital, Bayfront Hospital, Tampa General Hospital (T.G.H.), Moffitt Cancer, Advent Hospital, Pinellas, and Hillsborough County Health Departments facilitated by the Tampa Bay Healthcare Collaborative (TBHC). The results of this collective effort are summarized in this report.

Survey and Focus Groups

HCI conducted a community survey that included 1,268 individuals with children in Pinellas County and 1,496 individuals with children in Hillsborough County. The survey was delivered electronically in English, Spanish, and Haitian Creole. The survey was designed as a convenience sample, a snowball survey. As such, it was not intended to be statistically significant but has the potential to be a representative sample of the community served including, but not limited to medically underserved, low-income and minority populations through targeted marketing and solicitation at community gathering locations like community centers. Weekly, we received a report on the demographic breakdown of our survey respondents. We benchmarked the results to the national census and American Community Survey data to ensure we matched our survey’s demographics to our community’s.

Our qualitative data includes five focus groups in Pinellas County and five focus groups in Hillsborough County. The purpose of the focus groups was to gain experiences, perceptions, and identification of strengths and weaknesses in the community and lived experience. In accordance with 501 (r) regulations we have
solicited and taken into account input, in identifying and prioritizing significant health needs and resources available to meet those needs. External government entities which played a role include City Commissioners, Pinellas County Commission, the Juvenile Welfare Board and Pinellas County Health Department, which is an active participant in the All4Health Collaborative through solicitation of surveys and feedback through their events, community areas of engagement and facilities. These government resources and other in the community have been identify and are being referred through a community specific app called Aunt Bertha. Secondary data from national, state and local sources was collected and is included in this report.

**Prioritized Community Health Needs**

Through the collective efforts of the organizations involved in the CHNA process and the community members who responded to the survey and participated in the focus groups, Johns Hopkins All Children's Hospital, along with a working group including Advent Hospital, Moffit Cancer Center, Bayfront Hospital, and TGA identified the top six children's health needs for our community and the population we serve.

**Prioritization and justification**

The All4Helath Collaborative and community participants prioritized the most pressing health concerns. JHACH has identified, in addition to the four significant community health needs decided to integrate the final two health issues that were identified by the community into the Access to Health and Social Services category.

**Top Health Priorities**

<table>
<thead>
<tr>
<th>Access to Health and Social Services</th>
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<tbody>
<tr>
<td>Behavioral Health (Mental Health and Substance Misuse)</td>
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<tr>
<td>Maternal, Fetal, and Infant Health</td>
</tr>
<tr>
<td>Exercise, Nutrition, and Weight</td>
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<tr>
<td>Immunization and Infectious Disease</td>
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<tr>
<td>Respiratory Diseases</td>
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**Access to Health and Social Services**: The CHNA identified access to health and social services as a top health priority for Pinellas and Hillsborough Counties. 22% and 25% of the community survey participants ranked access to health benefits (Medicaid, W.I.C., SNAP/Food Stamps) as an essential and pressing health issue in Pinellas and Hillsborough counties. This issue has been persistent in the community and exacerbated by the COVID-19 pandemic. The top five reasons that prevented parents from getting medical or dental care for their child identified by survey respondents and focus group participants included the cost of insurance and healthcare services; knowledge or navigation of health services; language; fear, stigma, and trust in the health system; the need for more culturally competent care; health behaviors; and transportation.

**Health Equity in Pinellas County**: A racial disparity exists for people trying to access quality medical care for their children in Pinellas County. Individuals identifying as Hispanic/Latino or Black/African American were almost twice as likely as their white counterparts to report an inability to access medical care for their children in the last year. Those who identify as more than one race are more than three times as likely to report an issue with access to medical care when compared to their white counterparts. Similar to access to medical care, those who identify as more than one race were twice as likely to report issues accessing dental care for their children in the last year. Using the Health Equity Index that measures social and economic determinants correlated with preventable hospitalization and premature death. Out of Pinellas County, 33714, 33711, and
33755 are the zip codes with the highest scores. Therefore, they are expected to experience the most significant burden of preventable health issues.

**Health Equity in Hillsborough County:** Comparable to Pinellas county, a racial disparity in access to child healthcare exist. Those who identify as Hispanic/Latino or more than one race are much more likely to report an inability to access medical care for their children in the last year. Those who identify as black/African American or more than one race were more than twice as likely to report an inability to access dental care for their children in the last year than their white counterparts. Utilizing the Health Equity Index profile of Hillsborough County, those who live in zip codes 33605, 33610, and 33612 are more likely to experience worse health.
Behavioral Health (Mental Health and Substance Misuse): Behavioral Health was the next health priority identified by community survey respondents and focus group participants. Of the survey respondents, 45% in Pinellas and 40% in Hillsborough ranked behavioral health (mental health and substance misuse) as a leading health concern. Focus group participants identified barriers to accessing mental health services for their children, including the cost of service, issues navigating the mental health system, and the inability to find an appointment that works with their schedule. The CHNA collaborative also identified the impact of COVID-19 on behavioral health and discussed the pandemic, how it had worsened behavioral health due to the trauma of the pandemic, and the additional stress it has caused.

**Notable focus group participant quote(s)**

“Adults belittle feelings of mental health/stress then, therefore, you don’t want to open up and share feelings”

“Kids need to be taught tools about how to deal with emotions and talk openly about and normalize mental health.”

Mental Health Equity in Pinellas County: Using the Mental Health Index developed by HCI, the collaboration assessed the need for mental health services in Pinellas county. Individuals are living in zip codes 33711, 33712, and 33756 experience the most significant demand for quality mental health services.
**Mental Health Equity in Hillsborough County:** The Mental Health Index profile completed for Hillsborough County identified zip codes 33605, 33573, 33610, and 33612 have the most significant risk of poor mental health outcomes.

Maternal, Fetal, and Infant Health: Maternal, fetal, and infant health was the next priority based on survey responses and community connector groups prioritization in Pinellas and Hillsborough Counties. Disparities in this area are pervasive, with black/African American women and infants facing the highest burden of adverse outcomes. In Pinellas County, black/African American infants are almost twice as likely to be born with a low birth weight when compared to white infants. In Hillsborough County, mothers receiving early prenatal care have decreased, falling from 87.4% in 2016 to 78.4% in 2019. About 74% of black/African American mothers received early prenatal care compared to 80.2% of white mothers. Black infant mortality is more than twice as high as white infant mortality in both counties.

Exercise, Nutrition, and Weight: Community participants in the CHNA process identified Exercise, Nutrition, and Weight as the final pressing health priority for Pinellas and Hillsborough counties. Of the community survey respondents, 33% in Pinellas and 22% in Hillsborough mentioned healthy food, nutrition, obesity, and physical activity an essential health issue that needs to be addressed. These respondents also indicated their food insecurity; 16% in Pinellas and 27% in Hillsborough of families worried about whether their food would run out between paydays, and 14% in Pinellas and 17% in Hillsborough families received emergency food from shelters, and churches, etc.

Food and Nutrition Equity in Pinellas County: Black/African American families are more than twice as likely to report food insecurity in the last year than their white counterparts. This disparity is similar for families identifying as more than one race. Using the Food Insecurity Index developed by HCI, areas with low access to food in the county are identified. Using the Food Insecurity index developed by HCI, we see that those in zip codes 33712, 33755, and 33714 experience higher levels of food insecurity and more significant social and economic hardship.
Food and Nutrition Equity in Hillsborough County: Black/African American families are more than three times as likely to report food insecurity in the last year when compared to white families. Families identifying as Hispanic/ Latino or as more than twice as likely as white families to report food insecurity in the last year. According to the Food Insecurity Index profile of Hillsborough County, families living in zip codes 33610, 33605, and 33612 experience the highest levels of food insecurity and social and economic hardship.

Immunization and Infectious Disease: Immunizations and infectious diseases were not selected as health priorities but were identified by Pinellas and Hillsborough communities as pressing health concerns. Childhood immunization rates have been decreasing since 2017. Kindergarteners with required immunization fell from 94.7% in 2017 to 92.2% in 2021. This same rate for fully vaccinated children has fluctuated over the last few years, from 90% in 2017 to 84.7% in 2019, higher than 75% in 2018. Like Pinellas County, childhood
immunization rates in Hillsborough County have decreased. However, childhood immunization rose from 2016 to 2018 but decreased from 90.8% in 2018 to 86.2% in 2019. The rate of immunized kindergartners has been rising since 2019 and grew from 94.2 in 2019 to 95.8 in 2021.

**Respiratory Diseases:** Respiratory diseases were the last community-identified health concern that was not chosen as a top priority. In both Pinellas and Hillsborough counties, Asthma is a top concern. The hospitalization rate of children aged 5-11 with asthma in 2016 was 397.9 hospitalizations per 100,000 population in Pinellas and 483.7 hospitalizations per 100,000 population in Hillsborough. This rate has decreased over the years and fell to 187.5 hospitalizations per 100,000 population in Pinellas and 198.2 hospitalizations per 100,000 population in Hillsborough in 2020.

**Resources**

The potential resources available for JHACH to address these significant health needs identified through the CHNA are heavily reliant on the JHACH Community Health team’s ability to secure external private grants, public grants or funding through the Johns Hopkins All Children’s Foundation. The JHACH Community Health team is innovative and resourcefully collaborates to find ways to meet the community significant health needs identified.