



2018

Community Health Needs Assessment

East Baton Rouge Parish

A Joint Assessment of the following organizations:

Baton Rouge General Medical Center

Lane Regional Medical Center

Ochsner Medical Center Baton Rouge

Our Lady of the Lake Regional Medical Center

Surgical Specialty Center of Baton Rouge

Woman's Hospital



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Letter from Mayor Broome

On my first day as Mayor-President, I committed to continuing the great work of the Mayor's Healthy City Initiative. Formed in 2008, the initiative (now called HealthyBR) is now in a pivotal position to improve the health and well-being of residents through a renewed focus on the key drivers of population health in the great city of Baton Rouge. My former appointments with the East Baton Rouge Parish Metro Council, the Louisiana House of Representatives, and Louisiana State Senate have afforded extraordinary opportunities to experience how health disparities directly impact our communities, our cities and our state. It is only by focusing on a holistic approach to root causes like poverty, education, housing and access to healthy food and medical care that we can begin to attack the key drivers of health issues within our community. Together, we can improve the overall quality of life for all residents.

HealthyBR's unique approach brings together more than 90 hospitals, non-profit organizations, local businesses, schools, and governmental institutions that collaborate to significantly impact our city's health priorities. Our success in bringing together key stakeholders to work toward common goals designed to make Baton Rouge a healthier city for all is a shining example of population health management. HealthyBR serves as a best practice model for other cities, has been recognized with the American Hospital Association's prestigious NOVA award and participates in the National League of Cities' Learning Collaborative on Health Disparities.

We are excited to continue our journey through this 2018-2021 Community Health Needs Assessment. The needs assessment includes a joint implementation plan that incorporates shared goals to significantly target the social determinants of health in our city, and state, which serve as the tipping point for systemic change. Working together, we will continue to make our community a better place.

Thank you for supporting our efforts to make Baton Rouge a healthier place of peace, prosperity and progress for all.

Sincerely,

A handwritten signature in blue ink that reads "Sharon Weston Broome".

Sharon Weston Broome
Mayor-President

Introduction

Baton Rouge Mayor President Sharon Weston Broome believes in the power of equity in all aspects of life to make Baton Rouge a place of peace, prosperity and progress. HealthyBR serves as the conduit through which healthcare organizations, city and state agencies, for-profit businesses, educational institutions, faith-based organizations, and nonprofit agencies join forces to positively impact the health of our community.

The Healthy BR Board of Directors oversees the Med BR advisory board as well as anchor strategies.

Anchor Strategies will be a function of the HealthyBR Board of Directors where leadership will look at the concepts of local and inclusive hiring, purchasing and investments in the seven priority zip codes identified in this CHNA.

MedBR oversees the four working groups that align to the four significant community health needs identified in the 2018 CHNA.

- Live Healthy BR focuses on eating well, being active, not smoking and preventing childhood obesity.
- Mayor Broome's Behavioral Health Task Force focuses on the coordination and collective community support needed for organizations currently providing services in this area of work. The task force is also tasked with identify gaps in services and providing recommendations to address the gaps.
- Mayor Broome's Ending the HIV Epidemic Commission will focus on implementing the Population Health work of the HIV continuum of care by supporting the outcomes of the Region 2 HIV task force, the Ryan White Advisory Board and other key HIV stakeholders in the community.
- Access to Care Commission will focus on how

structures and processes to create more equitable access to healthcare for all residents of East Baton Rouge Parish.

(See Appendix A)

While priorities of the groups may differ, meetings and status updates are reported to Med BR quarterly by each working group chair. The purpose of Med BR is to serve as the primary venue for sharing and identifying resources, programs, initiatives and opportunities to collaborate. This process is called organizational asset mapping.

A Community Health Needs Assessment (CHNA) work group combined and analyzed local, state and national data sources, assessed current programs, and identified gaps. Live Healthy BR and MedBR Advisory Boards, along with community members, supported the process. This inclusionary process identified emerging trends not visible in historical data. Consultation with partner organizations, healthcare providers and community members shaped the top 10 list of health priorities and reaffirmed the four significant community needs of HealthyBR.

This Community Health Needs Assessment (CHNA) is the result, and has been adopted by Baton Rouge General Medical Center, Lane Regional Medical Center, Our Lady of the Lake Regional Medical Center, Surgical Specialty Center of Baton Rouge and Woman's Hospital.

For the purposes of this community health needs assessment, the boards of the individual hospitals have defined East Baton Rouge Parish (EBRP) as their community and we have not excluded medically underserved, low-income, or minority populations who live in EBRP. This assessment does not exclude any patient populations based on their eligibility for insurance or whether they are eligible for financial assistance. No independent contractors were used in the preparation of this report.

"The efforts our team makes to preserve and restore the health of our community would be much harder without the unique collaboration we have among our local healthcare providers in Baton Rouge. We are honored to contribute with other local hospital systems to make projects like the CHNA a reality – projects where our city and state are not only making a difference, but also leading the nation."

Edgardo Tenreiro, President/CEO, Baton Rouge General Medical Center

"Ochsner Baton Rouge supports the city-wide Community Health Needs Assessment process and places strong value on participating in the analysis and utilization of the data as a result of these assessments. Due to our calendar fiscal year, Ochsner Baton Rouge participated in a system-wide CHNA effort with other Ochsner facilities and plans to do the same again in 2018. We will be taking the local Baton Rouge information identified in 2017 into account as we review our own implementation plans."

Eric McMillen, CEO, Ochsner Medical Center, Baton Rouge Region

"Many factors contribute to community well-being, and improving health is everyone's shared interest. As providers, none of us can do this alone so joining with our healthcare colleagues, the Mayor-President and agency leaders to probe deeply on needs is smart. Then actually implementing solutions collaboratively maximizes every organization's resources to make the greatest impact. I can't think of a better way to define the word 'community.'"

**Scott Wester, President /CEO,
Our Lady of the Lake Regional Medical Center**

"At Lane Regional Medical Center, our mission is to provide exceptional healthcare services to every patient, every time. We have a proud history of investing in community health programs and partnering with other organizations to identify and address the most urgent health needs in the communities we serve. We are pleased to be part of such a collaborative effort that will benefit the entire region."

**Larry Meese, CEO,
Lane Regional Medical Center**

"The synergy created by the Community Health Needs Assessment process is exciting, and the results demonstrate that collaboration among healthcare providers and nonprofit agencies can positively affect population health outcomes. Working together to address our community's most urgent health priorities supports Woman's mission and values, and has a meaningful impact on the lives of those we serve. We are pleased to be a part of this partnership that truly makes a difference".

**Teri G. Fontenot, President/CEO,
Woman's Hospital**

East Baton Rouge Parish Demographic Analysis

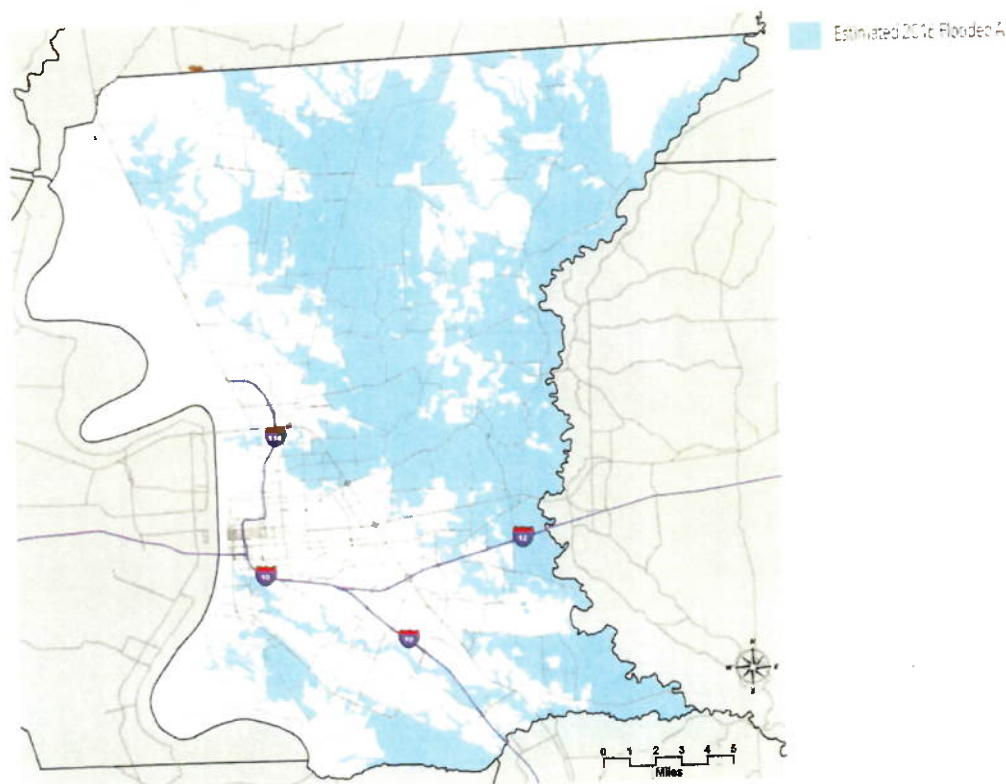
East Baton Rouge Parish (EBRP) is home to 445,337 residents. The ethnic composition is 45.5% Caucasian, 45.5% African American, 3.2% Asian, 3.9% Hispanic, and 1.9% American Indian, Alaskan Native, Native Hawaiian or two or more races. EBRP has a relatively young population, with a median age of 33. Only 12.4% of residents are over age of 65. Females account for 52.9% of the parish population. ⁽¹⁾

Although the EBRP economy continues to improve, health disparities between zip codes and communities continue to grow. In August 2016, severe flooding in the region impacted the economy.

- The unemployment rate was 3.6% in October 2017 compared to 6.0% in October 2014. ⁽²⁾
- The median household income in 2016 was \$49,942; \$4,290 higher than the state average and \$5,380 less than the national average.
- In 2016, 19.5% of the EBRP population lived below the poverty level; 0.2% lower than the

state average and 4.4% higher than the national average.

- In 2016, 26.8% of children were living below the poverty level; 1% lower than the state average and 5.6% higher than the national average. ⁽¹⁾
- Following massive flooding in 2016, 24,255 homeowners and 12,684 renters registered for federal assistance.
 - From the 36,939 affected families, 76% did not have flood insurance.
 - Approximately 48,383 structures in East Baton Rouge Parish were affected. This equates to a total value of over \$589 million in residential, commercial and institutional property loss and damage.





Conducting the Assessment: Identifying Community Needs

Healthy BR began the planning process for the 2018 CHNA through the use of an interactive process. This resulted in a commitment by all participating hospitals to focus on the social determinants of health as evidenced through zip code disparities in EBRP. The CHNA work group consisted of representatives from Baton Rouge General Medical Center, Lane Regional Medical Center, Ochsner Baton Rouge, Our Lady of the Lake Regional Medical Center, Woman's Hospital, Pennington Biomedical Research Center, Baton Rouge Area Chamber, Baton Rouge Health District, Louisiana Public Health Institute, East Baton Rouge Parish Library and the HIV/AIDS Alliance for Region 2 (HAART). The group was supported by a clinical psychologist who also works with AARP.

Data Collection and Analysis

The work group compiled information from more than 30 sources of local and national community

data (Appendix B). Additional data was supplied by various external agencies. This information was analyzed to identify areas of need, deficiencies in services or access to care, and duplicative efforts to provide baseline measures for action planning. The following key data sources were used to identify the top health priorities for EBRP.

County Health Rankings

The County Health Rankings (CHR) Report measures how long people live (mortality) and quality of life (morbidity). These outcomes are the result of a collection of health risk factors. The Robert Wood Johnson Foundation works with the National Center for Health Statistics, the Centers for Disease Control and Prevention, and the Dartmouth Institute to calculate the data for each state's counties (parishes). EBRP ranks 26th of 64 parishes in Louisiana in health outcomes and 5th of 64 in health factors.

| | EBR | Louisiana | Top U.S. Performance (90th percentile) |
|---------------------------------------|-------|-----------|--|
| Health Outcomes (Ranked 26/64) | | | |
| Length of Life (Ranked 26/64) | | | |
| Premature death | 9,800 | 9,400 | 5,300 |
| Quality of Life (Ranked 25/64) | | | |
| Poor or fair health | 20% | 21% | 12% |
| Poor physical health days | 3.8 | 4.1 | 3.1 |
| Poor mental health days | 4.0 | 4.2 | 2.3 |
| Low birthweight | 12% | 11% | 6% |
| Health Factors (Ranked 5/64) | | | |
| Health Behaviors (Ranked 3/64) | | | |
| Adult smoking | 17% | 23% | 14% |
| Adult obesity | 32% | 35% | 26% |
| Food environment index | 6.5 | 5.4 | 8.1 |

| | EBR | Louisiana | Top U.S. Performers (90th percentile) |
|---|---------|-----------|---------------------------------------|
| Health Behaviors (Ranked 3/64) continued | | | |
| Physical inactivity | 27% | 30% | 20% |
| Access to exercise opportunities | 97% | 74% | 91% |
| Excessive drinking | 18% | 18% | 13% |
| Alcohol-impaired driving deaths | 30% | 34% | 13% |
| Sexually transmitted diseases | 758.7 | 695.2 | 145.1 |
| Teen births | 31 | 50 | 15 |
| Clinical Care (Ranked 1/64) | | | |
| Uninsured | 12% | 14% | 6% |
| Primary care physicians | 1,110:1 | 1,530:1 | 1,030:1 |
| Dentists | 1,455:1 | 1,880:1 | 1,280:1 |
| Mental health providers | 644:1 | 420:1 | 330:1 |
| Preventable hospital stays | 44 | 66 | 35 |
| Diabetic monitoring | 82% | 83% | 91% |
| Mammography screening | 65.4% | 61% | 71% |
| Social & Economic Factors (Ranked 18/64) | | | |
| High school graduation | 71% | 73% | 95% |
| Some college | 68% | 54.8% | 72% |
| Unemployment | 5.1% | 6.2% | 3.2% |
| Children in poverty | 29% | 28% | 12% |
| Income inequality | 5.5 | 5.5 | 3.7 |
| Children in single-parent households | 47% | 43% | 20% |
| Social associations | 12.5 | 9.9 | 22.1 |
| Violent crime | 607 | 536 | 62 |
| Injury deaths | 77 | 81 | 55 |
| Physical Environment (Ranked 32/64) | | | |
| Air pollution – particulate matter | 9.8 | 9.5 | 6.7 |
| Drinking water violations | No | - | - |
| Severe housing problems | 19% | 17% | 9% |
| Driving alone to work | 83% | 83% | 71% |
| Long commute – driving alone | 30% | 32% | 15% |

<http://www.countyhealthrankings.org/app/louisiana/2018/rankings/east-baton-rouge/county/outcomes/overall/snapshott>

Asset Limited, Income Constrained, Employed (ALICE)

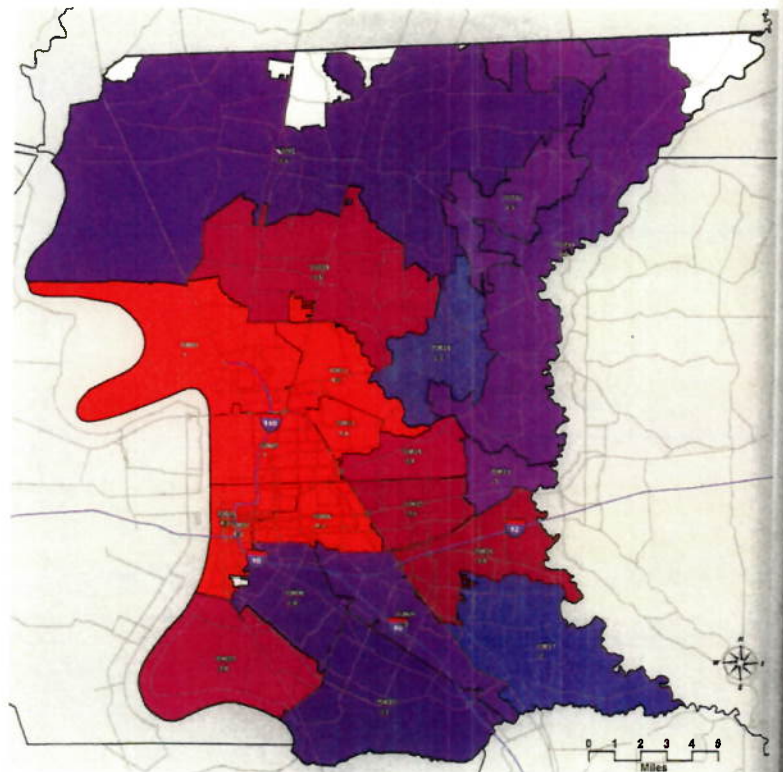
The ALICE Report is produced by United Way as a method for analyzing the portion of the population earning more than the federal poverty level (\$11,670 for a single adult and \$23,850 for a family of four), but less than the basic cost of living.

CNI score is an average of five barrier scores that measure socioeconomic indicators of each community: income, culture, education, insurance, and housing. A score of 1.0 indicates a zip code with the least need, while a score of 5.0 represents a zip code with the most immediate need. Unless these needs are addressed, they present a threat to the overall health of the population within a community.

Community Needs Index

The Community Needs Index (CNI) uses data compiled by Thompson Reuters to identify the severity of health disparities for every zip code in the nation. It demonstrates the link between community need, access to care and preventable hospitalizations. The

- Lowest Need - 1.0 to 2.5
- Lesser Need - 2.6 to 3.3
- Greater Need - 3.4 to 4.1
- Highest Need - 4.2 to 5



Weighted CNI average for EBR is 3.5; 33% of zip codes in EBR are based in the "highest need" areas.

Social Determinants of Health

The Center for Disease Control defines social determinants of health (SDOH) as: "Conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes."

Efforts to improve health in the U.S. have traditionally used the healthcare system as the main driver of outcomes. With the adoption of the Affordable Care Act and the expansion of the Medicaid program, access to health care has increased, yet access is only one component of the many changes needed to improve population health. Research demonstrates that health equity must also be addressed. This will require healthcare systems to evaluate and resolve issues related to SDOH.

The image below provided by the Kaiser Family Foundation illustrates the categories and sub-categories of SDOH impacting health risks and outcomes.

The CNI score of EBRP illustrates the health disparities that exist among residents in a specific area of the parish. Seven zip codes within the parish have a CNI score of 4.2 and are identified as areas of highest need based on income, cultural, education, insurance and housing barriers. Located in the northwestern part of the parish, zip codes 70801, 70802, 70805, 70806, 70807, 70811, and 70812 represent a combined total of 124,608 individuals, or 28% of the EBRP population. Conversely, three zip codes are defined as low need with a score of 2.4 or below. These zip codes, 70817, 70818 and 70739, are located in the eastern and southern parts of the parish. These zip codes have a combined population of 58,692, or 13% of the population. The remaining 59% of EBRP residents live in middle-to-high need areas.

zip codes

Social Determinants of Health

| Economic Stability | Neighborhood and Physical Environment | Education | Food | Community and Social Context | Health Care System |
|--------------------|---------------------------------------|---------------------------|---------------------------|------------------------------|---|
| Employment | Housing | Literacy | Hunger | Social integration | Health coverage |
| Income | Transportation | Language | Access to healthy options | Support systems | Provider availability |
| Expenses | Safety | Early childhood education | | Community engagement | Provider linguistic and cultural competency |
| Debt | Parks | Vocational training | | Discrimination | Quality of care |
| Support | Playgrounds | Higher education | | Stress | |
| | Walkability | | | | |
| | Zip code / geography | | | | |

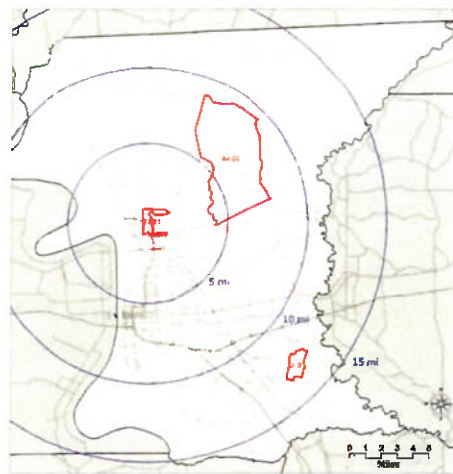
Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations



Zip Code Disparities and Social Determinants of Health (SDOH): A Case Study

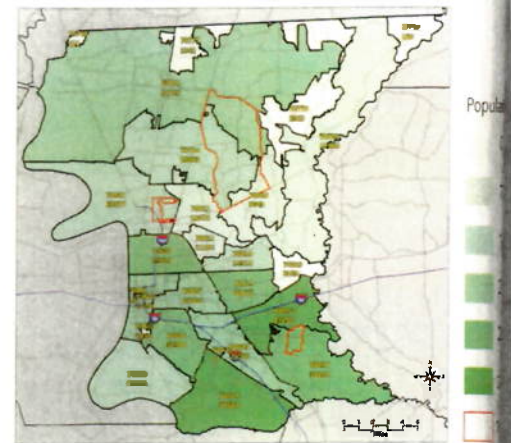
Disparities within EBRP can be illustrated by differences between three neighborhoods: Scotlandville, Carmel Acres and Shenandoah. While these neighborhoods encompass three different regions of the parish (City of Baton Rouge, City of Central and an unincorporated area of EBRP, respectively), they are close in proximity. Scotlandville is 5 miles west of Carmel Acres; Shenandoah is 15 miles south of both Scotlandville and Carmel Acres. Data from the Baton Rouge City Key can then be cross-referenced to the pillars of SDOH (see Figure 2) to evaluate mortality, morbidity, life expectancy, and overall health of citizens in each neighborhood.



According to a joint report by the Agency for Healthcare Research and Quality (AHRQ), the Office of Behavioral and Social Sciences Research, and National Institutes of Health (NIH), there is a direct correlation between education and health.⁽³⁾ The report states "Research based on decades of experience in the developing world has identified educational status (especially of the mother) as a major predictor of health outcomes, and economic trends in the industrialized world have intensified the relationship

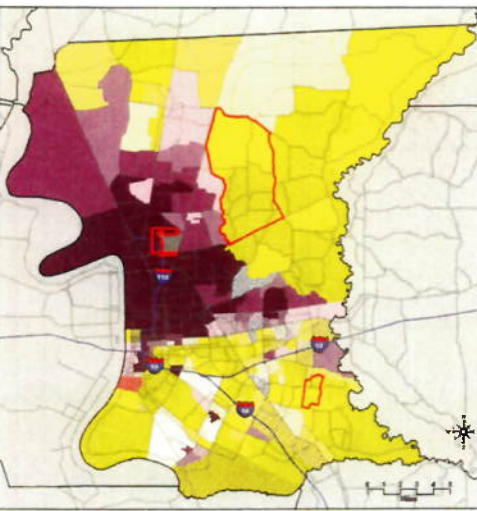
between education and health. In the United States, the gradient in health outcomes by educational attainment has steeped over the last four decades in all regions of the United States producing a larger gap in health status between Americans with high and low education".

Transporting children away from neighborhood schools has significantly impacted EBRP. A historic Supreme Court case in 1954 ruled unanimously that racial segregation of children in public schools was unconstitutional. In 1981, 13 schools in EBRP were closed as a result of non-compliance with the ruling, resulting in widespread busing of students across the parish. On July 14, 2007, 53 years after the Supreme Court ruling, the desegregation order for East Baton Rouge Parish Schools ended. As a result, three communities in EBRP formed independent cities and school districts: Zachary in 2002, Baker in 2003 and Central in 2007.

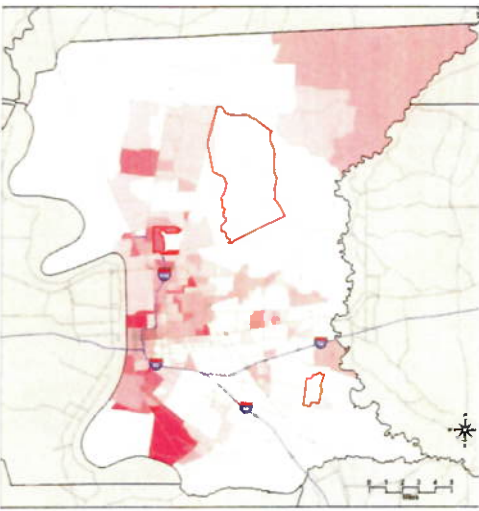


Average Population

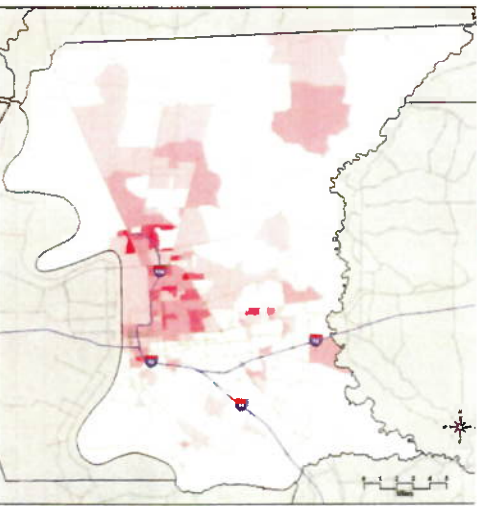
Your Zip Code Matters



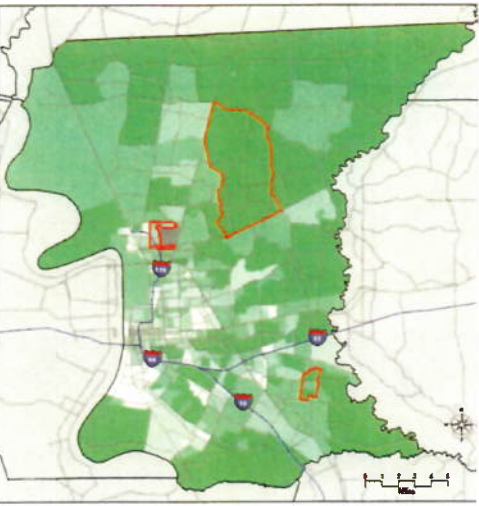
Race



Poverty



SNAP



Homeownership

Your Zip Code Matters

Scotlandville Resident



Carmel Acres Resident



Shenandoah Resident



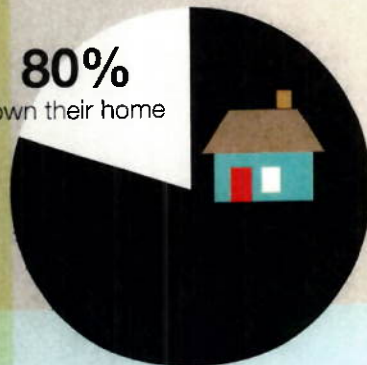
Housing

38%
own their home



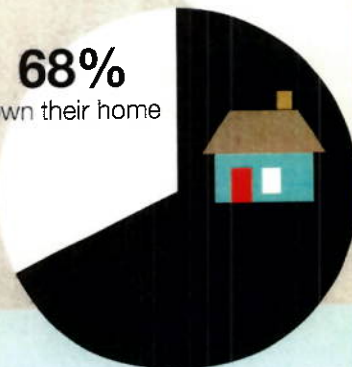
63% of renters
spend 30% or more
of their income
on rent

80%
own their home



83.1% of renters
spend 30% or more
of their income
on rent

68%
own their home



34.4% of renters
spend 30% or more
of their income
on rent

Families Living Below Poverty Level

38%

47% of Scotlandville
residents
receive food
stamps



6%

5% of Carmel Acres
residents
receive food
stamps

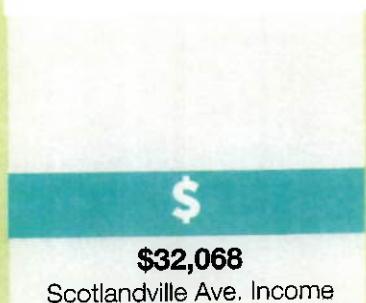


6%

4% of Shenandoah
residents
receive food
stamps

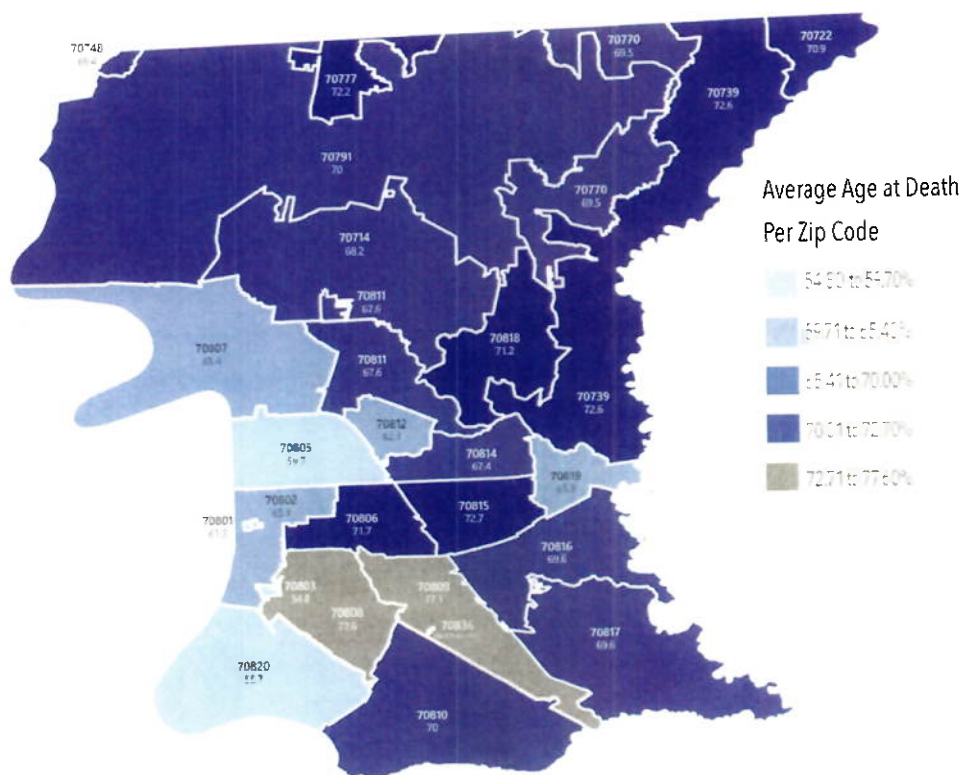


Average Income



| | Scotlandville | Carmel Acres | Shenandoah |
|--|---------------|--------------|----------------------|
| Census Tract | 31.03 | 31.03 | 31.03 |
| General Population/Demographics ⁽⁴⁾ | | | Source : BR City Key |
| Population | 3,250 | 6,565 | 5,137 |
| Race | | | |
| Caucasian/White (alone) | 510 (16%) | 5,294(81%) | 3,864 (75%) |
| African American/Black (alone) | 2,708 (83%) | 1151 (17%) | 910 (18%) |
| Asian (alone) | 11 (0.3%) | 46 (0.7%) | 209 (04%) |
| Other | 21 (0.7%) | 74 (01%) | 154 (03%) |
| Median Age By Sex | | | |
| Both Sexes | 30.2 | 41.0 | 39.1 |
| Male | 30.1 | 39.8 | 37.0 |
| Female | 31.1 | 42.3 | 41.1 |
| Economic Stability | | | Source : BR City Key |
| Average Household size | 2.88 | 2.52 | 2.52 |
| Renters spending 30% or more on household income on rent | 63.7% | 83.1% | 34.4% |
| Household income by race | | | |
| Average | \$32,068 | \$73,162 | \$99,579 |
| White | \$60,833 | \$75,496 | \$100,534 |
| Black | \$31,659 | \$63,697 | \$69,456 |
| Unemployed (16+) | 19.15% | 6.50% | 3.09% |
| # of Families | 255 | 1,994 | 1,441 |
| Families Below the Poverty Line | 97 (38%) | 116 (06%) | 89 (06%) |
| Families below the poverty line with children | 74 (29%) | 96 (05%) | 88 (06%) |
| Neighborhood and Physical Environment | | | Source : BR City Key |
| Homeownership | 38.5% | 79.9% | 68.3% |
| Owner-Occupied Housing Units Average Value | \$96,533 | \$235,077 | \$232,231 |
| Owner Average Length of Residence | 32 years | 15.7 years | 12.2 years |
| Average number of Vehicles Available | 1.2 | 2 | 2 |
| % of Occupied Housing units with 1 or fewer vehicles | 67% | 34% | 30% |
| BREC Public Parks by Zip Code (BREC Website) | 8 | 6 | 8 |

| | Scotlandville | Carmel Acres | Shenandoah |
|--|-------------------------|-------------------------|--|
| Census Tract | 31.03 | 31.03 | 31.03 |
| Neighborhood and Physical Environment (continued) | | | |
| Crime Incidents by Census Tract | | | |
| Homicides in 2017 | 7 (2.3 per 1,000) | 14 (2.3 per 1,000) | 6 (1.2 per 1,000) |
| Total Crime Incidents in 2017 | 247 (82.3 per 1,000) | 226 (37.6 per 1,000) | 271 (54.2 per 1,000) |
| Education | | | Source: BR City Key |
| Educational Attainment (+25) | | | |
| High School Diploma or less | 75.89% | 53.93% | 23.45% |
| Some college or Associate Degree | 17.93% | 30.17% | 31.57% |
| Bachelor's Degree or higher | 6.18% | 15.9% | 55.02% |
| Health Literacy Score % Basic or Below 2003 National Assessment of Adult Literacy (NAAL) http://healthliteracymap.unc.edu/ | 53% | 28% | 23% |
| School Letter grade located by Zip Code (Both 70807 and 70817 are located in EBRP which is an open enrolment district) (2016 Louisiana School Performance Scores) | | | |
| Elementary | 3 (B,C,D) | 2 (A,B) | 1 (B) |
| Middle | 2 (B,F) | 1 (B) | 2 (A,B) |
| High | 1 (C) | 1 (C) | 1 (A) |
| Alternative School/ | 2 (F,F) | - | - |
| Lab School | 1 (B) | - | - |
| Food | | | Source: Economic Research Service (ERS), U.S. Department of Agriculture (USDA). Food Access Research Atlas, https://www.ers.usda.gov/data-products/food-access-research-atlas/ |
| Low Access to a Grocery Store (half mile from a supermarket or large grocery store) | | | |
| Children | 20% | 21% | 13% |
| Total low income residents (at or below 200 percent of the Federal poverty threshold for family) | 42% | 19% | 6% |
| Housing Units who receive SNAP who live ½ mile or more from a grocery store | 29% | 4.6% | 1.7% |
| % of housing units who receive SNAP benefits | 46.8% | 4.8% | 3.8% |
| Housing Units without a vehicle who live ½ mile or more from a grocery store | 9.7% | 0.4% | 0.1% |
| % of housing units without a vehicle | 15.7% | 0.4% | 0.4% |



In the last decade, extensive research supports that the zip code in which a person lives more directly correlates to life expectancy than a person's genetic code. Analysis of economics, neighborhood/physical environment, education and food availability demonstrates EBRP zip code disparities. For example, the map above illustrates that on average Scotlandville resident lives, almost 6 years less than a resident of Carmel Acres. Yet these neighborhoods are located only five miles apart. A Scotlandville resident has an average age of death almost 6 years beyond their neighbors living in zip code 70805. These disparities occurred over decades, but as a coalition, it is our collective responsibility to make every effort to address the social determinants of health in these disinvested zip codes within our parish, in addition to the most pressing identified health priorities.

Community Needs Identified

The CHNA work group recommended the community needs below based on data analysis, social determinants of health and zip code disparities. These needs were confirmed by the Louisiana Department of Health and the Office of Public Health for Region 2.

1. Access to Care
2. Cancer Prevention
3. Cardiovascular Disease & Stroke Prevention
4. Diabetes Prevention
5. Healthy Baby
6. Healthy Living
7. Injury Prevention
8. Mental Health
9. Sexually Transmitted Infections/HIV
10. Substance Abuse

What is a Community Health Needs Assessment?

A Community Health Needs Assessment (CHNA) is a strategic plan evaluating the health of a community and a requirement of tax-exempt hospitals. The Patient Protection and Affordable Care Act (ACA), enacted on March 23, 2010, is the federal legislation that requires tax-exempt hospitals to create a CHNA every three years in order to preserve their tax exempt status. The CHNA must include:

- Identifying the demographics of the community the hospital serves
- Survey of the perceived healthcare issues in the community

- Data analysis of the current healthcare data
- Current efforts that are being done to address healthcare issues
- Community Health Implementation Plan (CHIP) which is a 3-year action plan that outlines the priority areas selected above will be addressed

Under HealthyBR leadership, the five area hospitals determined they could better use their resources and be more effective if they worked together on the CHNA and CHIP. In 2012, the hospitals used collaboration as a framework to write their CHNA's and through their involvement in HealthyBR met on a routine basis to report on progress. In 2015, the hospitals continued to collaborate and the individual boards of the hospitals voted to conduct a Joint CHNA and Joint CHIP. HealthyBR continued to provide the support for this collective effort. In 2018, the HealthyBR Board of Directors supported once again the development of a Joint CHNA and Joint CHIP using a collective impact model.



Identifying Top 10 Community Needs

HealthyBR convened a CHNA work group to help identify the top 10 community health needs. The group consisted of representatives from Baton Rouge General Medical Center, Lane Regional Medical Center, Ochsner Baton Rouge, Our Lady of the Lake Regional Medical Center, Woman's Hospital, Pennington Biomedical Research Center, Baton Rouge Area Chamber, Baton Rouge Health District, Louisiana Public Health Institute, East Baton Rouge Parish Library and the HIV/AIDS Alliance for Region 2 (HAART). The group was supported by a clinical psychologist who also works with AARP. This group collected data from over 30 local and national sources. (Appendix B) The information was analyzed to identify areas of need, deficiencies in services or access to care, and duplicative efforts to provide baseline measures for action planning.

The following key data sources were used to identify the top health priorities for EBRP.

Access to Care

(Right Care, Right Place, Right Time for ALL)

Cancer Prevention

(More access to preventive screenings for ALL)

Cardiovascular Disease & Stroke Prevention

(Increase access to Preventative programming and screenings for ALL)

Diabetes Prevention

(Increase access to Preventative programming and screenings for ALL)

Healthy Baby

(Increasing community knowledge of importance of pre-natal care)

Healthy Living

(Eating Well, Being Active and Not Smoking)

Injury Prevention

(Increasing knowledge and awareness of preventable injuries and death)

Mental Health

(Increasing awareness & coordination of resources in the community)

Sexually Transmitted Infections/ HIV

(Increase testing, decrease stigma and decrease barriers to treatment)

Substance Abuse

(Increasing awareness & coordination of resources in the community)

Identifying Significant Community Needs

Baton Rouge Vision of Health 2021

Following recommendation of the top 10 community needs, HealthyBR partnered with Humana's Bold Goal Initiative to host the Baton Rouge Vision of Health 2021. More than 100 professional representatives from: nonprofit, private, voluntary health, Veteran Affairs, public health, public service and elected officials, insurance and medical health care participated (Appendix C). Subject-matter experts presented information on each of the top ten health community needs: The Problem/Opportunity, What Work is in Progress, How has Our Community Been Impacted, Past Accomplishments, Milestones to be Accomplished and How Success Would be Measured. Following presentations on

each community need, facilitated group brainstorm sessions were held to discuss SDOH impact, potential resources and partnerships, possible interventions, and new or current work related to each community need.



Baton Rouge Vision of Health 2021 – November 1, 2017

| Community Health Need | Subject-Matter Experts | Title and Organization |
|--|------------------------|---|
| Access to Care | Gerelda Davis | Executive Director of Louisiana Primary Care Association |
| Cancer Prevention | Johnnay Benjamin | Director, Early Detection and Education at Mary Bird Perkins Cancer Center |
| Cardiovascular Disease & Stroke Prevention | Coretta LaGarde | Director Community Health & Stroke for American Heart Association |
| Diabetes Prevention | Catherine Carmichael | Research Dietitian and Project Manager for Pennington Biomedical Research Center |
| Healthy Baby | Renee Antoine | March of Dimes Maternal and Child Health Director |
| Healthy Living | Dr. Neil Johannsen | Robert and Patricia Hines Endowed Professor in Kinesiology of LSU |
| Injury Prevention | Dr. Beau Clark | East Baton Rouge Parish Coroner |
| Mental Health | Dr. Jan Kasofsky | Director of Capital Area Human Services District, Louisiana Department of Health |
| Sexually Transmitted Infections/ HIV | Natalie Cooley | Office of Public Health, STD/HIV Region 2 Program Coordinator, Louisiana Department of Health |
| Substance Abuse | Dr. Janice Peterson | State opioid grant lead and Deputy Assistant Secretary of the Office of Behavioral Health, Louisiana Department of Health |



Following group reporting sessions, each participant cast four votes for the areas of highest community needs. The chart below indicates the number of votes for each of the 10 community needs, the number of votes cast for each according to participant sector and the top four highest community needs: mental health, healthy living, access to care and diabetes prevention.



| Baton Rouge Vision of Health 2021 Results | | | | | | | | | | | |
|---|----------------|-------------------|--|---------------------|--------------|----------------|-------------------|---------------|-----------|-----------------|-------|
| | Access to Care | Cancer Prevention | Cardiovascular Disease & Stroke Prevention | Diabetes Prevention | Healthy Baby | Healthy Living | Injury Prevention | Mental Health | STI/HIV | Substance Abuse | Total |
| Medical | 11 | 5 | 6 | 11 | 12 | 21 | 1 | 29 | 11 | 8 | 115 |
| Non-profit | 9 | 3 | 4 | 5 | 4 | 16 | 5 | 8 | 1 | 5 | 60 |
| For-profit | 10 | 3 | 7 | 13 | 2 | 12 | 3 | 20 | 1 | 8 | 79 |
| Public | 4 | 1 | 2 | 1 | 3 | 12 | 4 | 11 | 12 | 6 | 56 |
| Total | 34 | 12 | 19 | 30 | 22 | 61 | 13 | 68 | 25 | 27 | |

MedBR Advisory Board

MedBR representatives from the following organizations met to discuss the top 10 health community needs: Our Lady of Lake Regional Medical Center, Ochsner Baton Rouge, Lane Regional Medical Center, Baton Rouge General Medical Center, Woman's Hospital, Baton Rouge Health District, Louisiana Primary Care Association, Louisiana Department of Health - Office of Public Health, Mary Capital Area Human Services, Baton Rouge Ryan White Program, LSU Health Center, The Baton Rouge Clinic, Veteran Affairs, Crisis Intervention Center, AARP, Gilead, Humana, Health Centers in Schools, and Southern University.

The top four significant community need areas selected by MedBR Advisory Board were mental health, healthy living, access to care and sexually-transmitted infections/HIV.

| Med BR Results - November 2, 2017 | | | | | | | | | |
|-----------------------------------|-------------------|--|---------------------|--------------|----------------|-------------------|---------------|---------|-----------------|
| Access to Care | Cancer Prevention | Cardiovascular Disease & Stroke Prevention | Diabetes Prevention | Healthy Baby | Healthy Living | Injury Prevention | Mental Health | STI/HIV | Substance Abuse |
| 15 | 1 | 2 | 5 | 3 | 17 | 0 | 24 | 14 | 7 |

East Baton Rouge Parish Community Survey

Feedback received from the 2015 CHNA was that the general public was underrepresented in the identification of both the community needs and the prioritized significant community needs. As a result, a community survey was administered using the East Baton Rouge Public Library System, an agency of the City of Baton Rouge-Parish of East Baton Rouge governed by a volunteer Board of Control. The library system serves approximately 300,000 registered cardholders (who have used library cards within the past three years). Fourteen library branches are scattered strategically throughout the parish, and all are open seven days per week. In 2016, there were 2,116,793 visits to the library, with 1,427,374 computer and Wi-Fi logins. The survey consisted of the following questions:



1. Rank the top 10 health community needs from 1 (most important) to 10 (least important)*

1. Zip code*
2. Email address
3. Comments

**denotes required field*

Community Survey Results – November 4 – December 1, 2017

| | Average Score | % Selected as Top 4 Priority |
|--|---------------|------------------------------|
| Access to Care | 7.31 | 67.35% |
| Mental Health | 6.93 | 62.52% |
| Healthy Living | 6.04 | 46.46% |
| Cardiovascular Disease and Stroke Prevention | 5.87 | 41.46% |
| Cancer Prevention | 5.68 | 40.41% |
| Healthy Baby | 5.32 | 33.51% |
| Diabetes Prevention | 5.25 | 31.61% |
| Substance Abuse | 5.15 | 35.76% |
| Sexually Transmitted Infection/HIV | 4.80 | 31.44% |
| Injury Prevention | 2.64 | 09.50% |

HealthyBR received 579 responses from 28 zip codes; 23% represented the 7 zip codes identified as priorities based upon Community Needs Index score of 4.2 or higher. The top four significant community needs based on the overall average community survey response are access to care, mental health, healthy living and cardiovascular disease/stroke prevention.

Final Priority Selection

The MedBR Advisory Board came together to identify the top four significant community needs.

- Members voted to combine the community need of mental health and substance abuse to create a behavioral health community need. This decision was based on data indicating a statistically significant increase in substance abuse, primarily

related to opioids, and the resulting need for behavioral health intervention related to opioid misuse.

- Members voted to expand the healthy living category to include cardiovascular disease, stroke and diabetes.

The top four significant community needs revised based on priority categorization by the MedBR Advisory Board are: Access to

care, behavioral health, healthy living and sexually transmitted infections/HIV.

Participants also used this meeting to review the data collected thus far to define the key SDOH for each priority, the primary issues within each and possible interventions/solutions.

| Overall Results | | | | |
|--|------------------------|--------------------------|----------------|---------------|
| | BR Vision 2021 Ranking | Community Survey Ranking | Med BR Ranking | Final Ranking |
| Access to Care | 3 | 1 | 3 | 3 |
| Cancer Prevention | 10 | 5 | 9 | 9 |
| Cardiovascular Disease & Stroke Prevention | 8 | 4 | 8 | 7 |
| Diabetes Prevention | 4 | 7 | 6 | 4 |
| Healthy Baby | 7 | 6 | 7 | 7 |
| Healthy Living | 2 | 3 | 2 | 2 |
| Injury Prevention | 9 | 10 | 10 | 10 |
| Mental Health | 1 | 2 | 1 | 1 |
| Sexually Transmitted Infections- HIV | 6 | 9 | 4 | 6 |
| Substance Abuse | 5 | 8 | 5 | 5 |



Top 10 Health Community Needs for EBR 2018 – 2021

In summary, the top four significant community needs were chosen by evaluating primary and secondary data for trends by the CHNA work group. The significant community needs were then validated by the more than 70 partner organizations of the Mayor's Healthy City Initiative as well as the Board of Directors of each hospital and confirmed by constituent surveys.

Through this process, no significant information gaps were identified that limited our ability to assess the community's health needs. There were no circumstances where the CHNA workgroup could not obtain adequate and relevant information.

The final top ten community needs for EBRP:

- Access to Care*
- Behavioral Health (Mental Health and Substance Abuse)*
- Healthy Living*
- Sexually Transmitted Infections/ HIV*
- Cancer Prevention
- Cardiovascular Disease and Stroke Prevention
- Diabetes Prevention
- Healthy Baby
- Injury Prevention

* Top 4 HealthyBR Significant Community Needs

1. Access to Care

The Institute of Medicine defines Access to Care as "the timely use of personal health services to achieve the best health outcomes." The U.S. Department of Health and Human Services states that attaining access to care requires:

- Entry into the healthcare system.
- Access to sites where patients receive healthcare services.

- Individualized care by a provider who fosters mutual communication and trust.

Healthcare access is measured in several ways, including:

- The presence or absence of resources that facilitate health care such as health insurance or a primary care physician.
- Assessments by patients regarding ease of healthcare access.
- Measures of outcomes related to care access and successful receipt of needed services ⁽⁶⁾

According to the 2017 report on the State of Mental Health in America, Louisiana ranked 41 in access to care in 2014; an improvement from the 2011 ranking of 48. ⁽⁶⁾

Closure of Earl K. Long Medical Center (the only public acute-care hospital located in the region) in 2013 and Medicaid expansion in 2016 have redirected the uninsured and Medicaid populations to emergency departments for non-emergent healthcare services. Affordable Care Act provisions have triggered an increase in the number of Federally Qualified Health Centers (FQHCs) in our parish. Collaboration with the FQHCs has enabled a community-wide initiative to redirect

patients and control excessive emergency department utilization.

Health literacy also impacts access to care. The Patient Protection and Affordable Care Act of 2010, Title V, defines health literacy as "the degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions." According to the CDC, health literacy ensures that people are able to:

- Find information and services,
- Communicate their needs and preferences and respond to information and services,
- Process the meaning and usefulness of the information and services,
- Understand the choices, consequences and context of the information and services, and
- Decide which information and services match their needs and preferences so they can act.

Currently, all hospital partners have patient navigators to support patients in navigating the complex healthcare system, accessing resources and obtaining necessary services.



Using the Institute for Healthcare Improvement's Triple Aim as a guide, hospital and public health officials have created plans to improve the patient experience and the health of the population, while reducing per capita costs of care:

- A partnership with the Louisiana Healthcare Quality Forum was formed to create a Health Information Exchange for emergency room data. This data allows the coalition to identify frequent users and tailor patient navigation programs to their needs.
- Several urgent care centers are strategically located throughout EBRP to alleviate use of hospital emergency departments for non-emergent situations. Each hospital has nursing call centers or hotlines. Once residents report concerns or symptoms, a nurse will provide education and guidance on appropriate resources for care.
- Seven school-based health centers are operated by Our Lady of the Lake Children's Hospital through a wholly-owned subsidiary, Health Centers in Schools. This unique concept provides the only totally integrated primary/mental health care model in the state of Louisiana. Health Center teams are comprised of nurse practitioners, registered nurses, licensed clinical social workers, and medical assistants (also called clinic coordinators). In school year 2017-18, the school-based centers were available to almost 4,300 students. Of those students, 74% or 3,200 students registered in the health center.
- The EBRP Emergency Medical Services' Mobile Integrated Health program works to reduce utilization of emergency departments, lower readmission rates, and improve patient outcomes. The goal of the program is to provide support to residents who would normally call 911 for a non-emergent situation. The program has found that calls

can be reduced by providing the patient with support in navigating the complicated healthcare system. Community paramedics evaluate obstacles to care for patients and connect them with appropriate resources. Their efforts have reduced the number of 911 calls, transports to the emergency room and hours spent by non-emergent patients in emergency departments. In 2017, 36 patients enrolled in the program. Program results include:

- Patients called 911 63% less often.
- Patients were transported to the hospital 67% less frequently.
- When patients called 911 and were not transported to the hospital, 93% of the issues were resolved by the program.
- EMS reduced 70% of costs associated with transporting a patient to the ER.
- Time spent with a patient who does not need to be transported to an ER was reduced by 62%, freeing valuable resources for emergencies.

2. Cancer

Cancer is the second-leading cause of death in the nation, outpaced only by heart disease. According to the American Cancer Society,

there were 1,688,780 new cancer cases and 600,920 cancer deaths in the United States in 2017. ⁽⁷⁾ National Cancer Institute indicates there were 470.9 cases of cancer per 100,000 residents in EBRP and 17.1 cancer-related deaths from 2010 to 2014. These numbers demonstrate decreases in cancer cases and 9.9% in deaths from the 2006-2010 measurement period. Compared to the Louisiana Tumor Registry, EBRP has the national average for higher inpatient mortality rates. More than 2,000 cancer cases are diagnosed each year, resulting in approximately 1,000 cancer-related deaths annually. The most frequently diagnosed cancers in EBRP are cancers of the prostate, breast, lung, and lymphoma.

Our Lady of the Lake Cancer Center and Mary Bird Perkins Cancer Center formed a partnership to offer comprehensive care for women with breast and gynecological cancers. Care can be accessed at the Mary Bird Perkins Breast and GYN Cancer Pavilion, Mary Bird Perkins Cancer Center, Our Lady of the Lake Cancer Center, or Louisiana State University's Norris Cancer Clinic.

Baton Rouge General Medical Center and Our Lady of the Lake Regional Medical Center collaborated in 2014 to provide radiation treatment



patients through a state-of-the-art Radiation Oncology Center at Lane Regional Medical Center's campus in Zachary. Lane's Cancer Center also offers a Hematology/Oncology Clinic.

These collaborations provide patients with convenient treatment options for specific types of cancer while combining the expertise of each participating organization for the highest quality outcome.

Our community partners have joined efforts to provide convenient health screenings throughout EBRP.

- Since 2015, Baton Rouge General's Pennington Cancer Center has provided 150 skin cancer, prostate cancer and breast cancer screenings for the community.
- Lane Regional Medical Center conducts free annual skin cancer, colon cancer, and prostate screenings.
- Between 2015 and 2017, Mary Bird Perkins – Our Lady of the Lake Cancer Center, through its Prevention on the Go program, provided 9,000 cancer screenings for breast, prostate, skin, colorectal and oral cavity cancers at no cost to the patient.
- In 2016, Mary Bird Perkins – Our Lady of the Lake Cancer Center engaged employers in a new workplace screening initiative to increase the number of individuals in East Baton Rouge Parish that adhere to defined screening guidelines. More than 850 employees have participated since the program's inception.
- Woman's mobile mammography coaches screened 3,845 women at 96 sites in 21 parishes in 2017. A second mammography coach was recently added to increase access for women in underserved parishes.

Research and technological advances have also made a positive impact on cancer treatments for EBRP residents.

- Ochsner Baton Rouge has partnered with The Gayle and Tom Benson Cancer Center to provide a comprehensive freestanding cancer center in Baton Rouge with infusion/chemotherapy, radiation oncology, subspecialty care and a wide range of clinical trials for all cancer types.
- Through this partnership, patients are connected to many resources, such as access to bone marrow transplants and the largest array of Phase 1 clinical trials available in South Louisiana.
- From 2015-2017, Baton Rouge General conducted 69 oncology clinical trials, 13 oncology clinical trials open for enrollment and 13 non-treatment oncology research studies.
- In 2016, there were 26 cancer-related active research studies at Woman's Hospital.
- Baton Rouge General Medical Center and Woman's Hospital offers radial tomography, a 3-D imaging concept that aids in earlier detection of tumors. Woman's Hospital has two of only 12 mammography coaches in the U.S. currently featuring 3D technology.
- Baton Rouge General Pennington Cancer Center is the only hospital in the state offering four linear accelerators among its campuses, significantly reducing radiation exposure and treatment time. BRG Pennington Cancer Center was the first accredited Comprehensive Breast Center in Louisiana. BRG was the first hospital in the region to be designated as a Hidden Scar Center of Excellence and offers the state's only IL-2 immunotherapy treatment.
- In 2016, the first Gamma Knife Icon Treatment Center in Gulf South was established at Mary Bird Perkins – Our Lady of the Lake Cancer Center. The Icon is a technology used to treat brain tumors and central nervous system disorders.
- The Mary Bird Perkins – LSU Medical Physics Partnership provides a multi-layered joint academic and research program. Created in 2004, the partnership leverages the educational and research resources of LSU and the cancer expertise of Mary Bird Perkins to benefit patients receiving cancer care in southeast Louisiana and beyond.
- A National Cancer Institute Community Oncology Research Program grant presented to LSU Health Sciences Centers in New Orleans and Shreveport, in collaboration with Mary Bird Perkins Cancer Center, offers advanced clinical trials to patients statewide. This effort is expected to reach about 80% of Louisiana residents, particularly minority populations, providing patients access to high-quality research studies closer to home.
- Mary Bird Perkins – Our Lady of the Lake Cancer Center was nationally honored by the American College of Surgeons Commission on Cancer with the Outstanding Achievement Award (achieved by only 7% of cancer facilities nationally). This award is presented to programs raising the bar on quality cancer care, with the ultimate goal of increasing awareness about high quality, patient-centered care.

Survivorship services are an important part of the recovery process. From 2015 – 2017, more than 8,500 former patients participated in Mary Bird Perkins – Our Lady of the Lake Cancer Center's survivorship program. Woman's Hospital and Mary Bird Perkins-Our Lady of the Lake have partnered to offer a wide range of survivorship services, many free of charge, that support healing and recovery.

3. Cardiovascular Disease and Stroke Prevention

Cardiovascular disease accounts for nearly 801,000 or approximately one of every three deaths in the United States each year. Risk factors for cardiovascular disease include lifestyle factors such as diet, physical activity level, smoking, alcohol consumption, and obesity. Genetics, gender, and age also influence risk.

Encompassing heart disease, stroke and high blood pressure, cardiovascular diseases claim more lives than all forms of cancer and chronic lower respiratory disease combined.

⁽⁹⁾ Heart disease is the leading cause of death in Louisiana, while stroke is the fourth leading cause of death. EBRP had a 17.9% higher age-adjusted death rate from cardiovascular disease than the national average between 2013 and 2015 according to the CDC. ⁽¹⁰⁾

EBRP interventions include restructure of the environment to promote physical activity, increasing the availability of healthy food options and increasing cigarette and alcohol taxes to discourage smoking and alcohol consumption.

HealthyBR partners have also collaborated to address cardiovascular disease and stroke. Baton Rouge General Medical Center and Our Lady of the Lake Physician Group

participate in the American Heart Association and American Medical Association's Target: BP Recognition Program celebrating physician practices, healthcare systems and their care teams who prioritize managing uncontrolled blood pressure within their patient population.

Partners also provide community screenings, education and screening tools:

- Baton Rouge General Medical Center is a Certified Chest Pain Center and has provided 409 screenings for stroke at community events since 2015. Over 200 people have been educated on heart health and strokes through our lunch and learn seminar series.
- BRG was named #1 in the state for Heart Failure treatment by CareChex for three years in a row.
- Lane Regional Medical Center provides free annual heart screenings and CPR training to local businesses, schools, and churches. Lane also provides free Automated External Defibrillator devices to churches and schools.
- Lane Regional Medical Center has earned full Cycle V Chest Pain Center Accreditation with PCI (Percutaneous Coronary Intervention) from the American College of Cardiology (ACC).
- Baton Rouge General Medical Center and Ochsner Baton Rouge partnered with the American Heart Association to provide CPR kits to local schools.
- Pennington Biomedical Research Center was a key contributor in developing the Dietary Approaches to Stop Hypertension (DASH) Diet, which is an eating plan that targets lowering blood pressure and promoting better cardiovascular health. The DASH Diet is consistently ranked by US News & World Reports as the best diet to follow for weight loss.
- Through attendance at over 75 community events, Ochsner Baton Rouge provided over 500 blood pressure screenings in 2017
- In 2017, Ochsner Baton Rouge began enrolling EBR residents into its cutting-edge Hypertension Digital Medicine Program. This program has helped patients control their blood pressure from home.
- Our Lady of the Lake Regional Medical Center has provided 1,006 community based screenings for stroke risk, BP, glucose, cholesterol and BMI in 2017.
- Woman's Hospital provides blood pressure monitors to at-risk patients. Nurses contact patients at home to ensure compliance. From March to December 2017,



case managers visited 1,123 patients with hypertension and called each patient a minimum of two times for follow-up after discharge

4. Diabetes Prevention

Diabetes can cause heart disease, liver disease, blindness, limb amputation, and death. Diabetes is divided into type 1 diabetes, type 2 diabetes and gestational diabetes. Individuals with type 1 diabetes do not produce insulin and are unable to convert carbohydrates into energy. Type 2 diabetics produce insulin but are insulin resistant, which means they do not effectively use insulin to convert carbohydrates to energy. Gestational diabetes is insulin resistance that occurs during pregnancy.

Risk factors for type 2 diabetes include obesity, lack of physical activity, and genetics. With the exception of the last factor, these can be addressed through healthy lifestyle choices. Consuming primarily vegetables, whole grains and fish and limiting processed meat, carbohydrates and sugar-sweetened beverages appears to protect against type 2 diabetes. Physical activity reduces insulin resistance. Pharma-

cological intervention is always used with type 1 diabetes and may be used for type 2 if lifestyle changes are not effective.

In Louisiana, the prevalence of diabetes increased from 8.9% in 2006 to 12.1% in 2016.⁽¹¹⁾ In 2013, there were 37,991 diagnosed cases of diabetes in EBRP. This represents 11.6% of the EBRP population.⁽¹²⁾

HealthyBR partner hospitals offer diabetes prevention and management programs. Baton Rouge General Medical Center, Our Lady of the Lake Regional Medical Center and Woman's Hospital offer diabetes management programs accredited by the American Association of Diabetes Educators. Lane Regional Medical Center and Ochsner Baton Rouge's diabetes management programs are accredited by the American Diabetes Association.

- Baton Rouge General Medical Center's nationally accredited Diabetes Education and Nutrition Program educates more than 500 people each year on strategies for managing their condition. The Limbs for Life initiative helps community members proactively manage risks to prevent lower-extremity amputations, which are commonly caused by circulation problems resulting from diabetes and vascular disease. BRG's weight loss management tools – including an annual incentive for remaining healthy.
- The Ochsner Baton Rouge Diabetes Management Program is accredited by the American Diabetes Association and sees almost 6,000 consults annually in Baton Rouge providing an education and management program including individual and group assessments and counseling, medical nutrition therapy and medical management. The program partners with the local YMCA to offer a CDC Diabetes Prevention Program.

- At Woman's Hospital, postpartum patients with previous gestational diabetes receive counseling while in the hospital on the importance of managing the condition and the correlation between gestational diabetes and the development of type 2 diabetes later in life.

In addition, Louisiana State University's Pennington Biomedical Research Center is the site of several landmark diabetes prevention studies. One such program, the Diabetes Prevention Program, found that type 2 diabetes can be prevented by modest weight loss and exercise intervention, was adopted by the American Diabetes Association and the Centers for Medicaid and Medicare services. Researchers at the facility have also demonstrated that gestational diabetes causes birth defects and is linked to neural tube defects in the fetus, a contributing factor to Spina Bifida. The Center conducts research studies in an effort to identify the triggers of chronic diseases, including diabetes. This research is instrumental in the development of more effective treatments, and has contributed to the development of several diabetes medications on the market today. The Reproductive Endocrinology & Women's Health Lab at Pennington is conducting research studies on a host of related risk areas for women and infants.

5. Healthy Baby

Louisiana ranks second in the nation for rates of low birth weight (< 2500g/5.5lbs) and preterm births (<37 weeks gestation), both of which contribute to infant deaths and long-term deficits in growth and development.⁽¹³⁾ Roughly one in ten babies are born prematurely and approximately one in 12 is born with low birth weight in the United States each year. In 2015, 10.6% of newborns in Louisiana were low birth





weight and 12.3% were preterm.⁽¹³⁾ Premature infants that survive often suffer severe conditions such as cerebral palsy, and/or significant developmental delays. The term “infant mortality” refers to the death of an infant before his or her first birthday. The infant mortality rate is an important indicator of overall population health. In 2015, the national infant mortality was 5.9 deaths per 1,000 live births; Louisiana had the second-highest infant mortality rate of any state.⁽¹¹⁾

According to the CHR, EBRP’s infant mortality and low birth weight rates are twice the national average and higher than the state average. More troubling, there is distinct disparity between African American infants and their Caucasian and Hispanic counterparts. African American women in Louisiana are two times more likely to have a low birth weight infant or to have an infant die compared to Caucasian and Hispanic women.

An increasing prevalence of prescription drug misuse across the nation has also impacted EBRP. In 2016, 290 infants were exposed to opioids while in the womb.

Untreated mood disorders in mothers also negatively impacts infants, resulting in delays in cognitive, social and emotional development, prematurity, poor weight gain and growth, and autism spectrum disorders. Effects on families include divorce, disability/unemployment, child neglect and abuse and infanticide/homicide/suicide. The World Health Organization cites that increasing numbers of women present to pregnancy clinics with chronic conditions, such as hypertension, diabetes and obesity, which contribute to pregnancy-related conditions.

Through a grant awarded in 2018, Woman’s Hospital is planning to improve outcomes, reduce preterm births through perinatal care coordination and minimize adverse effects of substance misuse during pregnancy. Currently in the initial planning stages, this project will include physicians, nurses, case managers, social workers and community health agencies in a collaborative approach to care coordination for at-risk mothers. Woman’s Hospital was instrumental in championing the development and imple-

mentation of the Association for Woman’s Health, Obstetric and Neonatal Nursing’s “Go the Full 40” campaign in EBRP. This initiative educates pregnant women and the community on the health benefits of delivering after 40 weeks’ gestation.

- In 2015, Woman’s Hospital formed the Perinatal/Neonatal Addiction Disorders Task Force to reduce the effects of maternal substance misuse in newborns. In 2017, the task force focused on identifying resources and developing relationships to support programs for pregnant mothers as well as educating physicians and residents. Team members, including more than a dozen physicians, participated in workshops on screening, brief intervention and referrals to treatment and developed evidence-based screening tools to identify, reduce and prevent problematic use and dependence on alcohol and illicit drugs. A method was implemented to reduce the number of opioids prescribed to pregnant women under the care of local OB Gyns. Working with Woman’s Hospital to support this program are Capital Area Human Services, Baton Rouge Comprehensive Treatment Center, Addiction Counseling and Educational Resource Center and Our Lady of the Lake Regional Medical Center Mental and Behavioral Health Services.
- Many NICU infants have underdeveloped respiratory systems. Baton Rouge General Medical Center, Ochsner Baton Rouge and Woman’s Hospital train all NICU parents and guardians on CPR techniques. Woman’s sends parents’ home with infant CPR kits, including manikins to practice their skills at home. Baton Rouge General’s Birth Center encourages all parents, grandparents and babysitters to take an infant CPR class, and requires parents and guardians of infants in the NICU to take the free class.

- Baton Rouge General Medical Center is a certified GIFT (Guided Infant Feeding Techniques) Facility, and has breastfeeding support groups that are open to the community.
- Woman's Hospital distributes free pregnancy journals, offers free support groups/classes and a free mobile phone app to educate and support healthy pregnancies.
- Woman's Hospital offers fetal therapy, a form of highly complex surgery performed while the baby is still in the womb to correct issues such as spina bifida, congenital pulmonary airway malformation and twin-to-twin transfusion syndrome.
- Baton Rouge General Medical Center, Ochsner Baton Rouge and Woman's Hospital have received national Blue Distinction® Center for Maternity Care designation. As Blue Distinction Centers for Maternity Care, the hospitals are recognized for delivering quality specialty care safely and effectively, based on objective measures developed with input from the medical community.
- Baton Rouge General Medical Center, Ochsner Baton Rouge and Woman's Hospital are designated Baby Friendly hospitals by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). Ochsner Baton Rouge was the first hospital in Louisiana to earn this distinction. Baby Friendly hospitals support exclusive breastfeeding and mother-baby bonding practices that have been clinically proven to support the thriving development of newborns. Baton Rouge General Medical Center, Ochsner Baton Rouge and Woman's Hospital sponsor human donor breast milk programs that provide breast milk, sometimes free of charge, to infants in the neonatal intensive

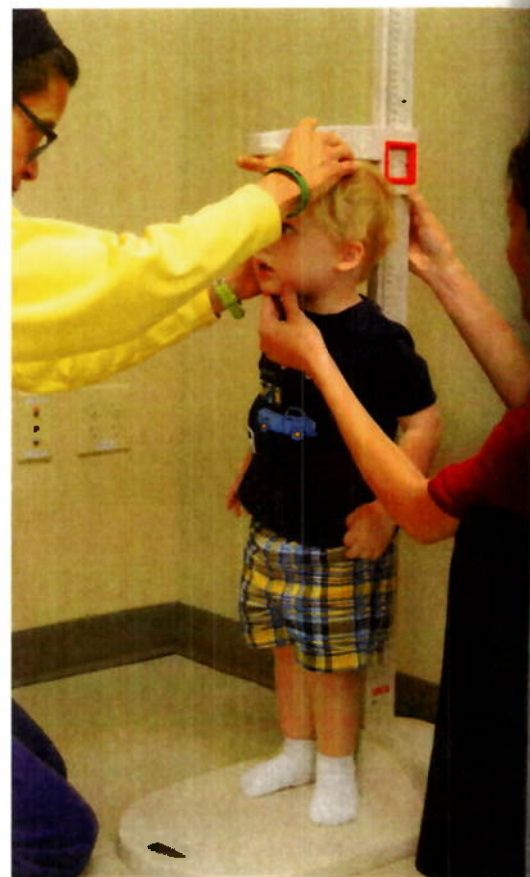
care units. Research indicates breast milk provides many advantages to the infant, including antibodies that result in fewer ear infections, respiratory infections and bouts of diarrhea.

- Woman's Hospital is a designated Level III Regional Referral Center for neonates. At 84 private beds, the NICU unit is the largest in the state.
- Baton Rouge General Medical Center has a Level III NICU. This NICU has a wide variety of staff on site, including neonatologists, neonatal nurses, and respiratory therapists who are available 24 hours a day.
- Ochsner Baton Rouge offers a certified midwife program.

6. Healthy Lifestyle

The CDC's Healthy Communities Program has identified three key contributors to disease risk: physical inactivity, unhealthy eating, and tobacco use/exposure to second-hand smoke. The CDC's 2013 report, Chronic Disease Prevention and Health Promotion stated that one in four people (25.1%) in EBRP have no leisure time for physical activity.⁽³⁾ Feeding America identified in their 2017 Map the Meal Gap report that 18.1% of people in EBRP have food insecurity, which is described as inconsistent access to adequate food due to lack of money and other resources periodically throughout the year.⁽³⁾ In addition, CHR data indicates that 15% of EBRP citizens are smokers.

Obesity is defined as a body mass index (BMI) greater than 30. Obesity is a significant risk factor for diabetes, heart disease, and stroke. Lifestyle factors such as physical activity, healthy eating, and monitoring ca-



loric intake can decrease the risk of obesity. According to the State of Obesity report by the Robert Wood Johnson Foundation, Louisiana is ranked the eighth most obese state in the nation. Thirty-four percent of Louisiana's children between the ages of 10 and 17 have been diagnosed as overweight or obese. Over 35% of adults have been diagnosed as obese, placing EBRP fifth in the nation for prevalence of adult obesity. Since 1990, Louisiana's adult obesity rate has increased 288% from 12.3% to 35.5%.⁽⁹⁾ As cases of obesity rise in the state, so do cases of related chronic diseases and healthcare costs. According to the Louisiana Department of Health's Diabetes and Obesity Action Report, Louisiana Medicaid insurers paid more than \$118 million in 2015 for claims related to members identified as obese.⁽¹⁴⁾ For these reasons, obesity was one of the top four significant community

needs in both the 2012 and 2015 CHNAs, and remains an important area of collaborative focus.

Louisiana State University's Pennington Biomedical Research Center, located in EBRP, has contributed to the development of many approved obesity medications on the market today. The Center has made significant advances in a number of related research areas, including developing a more accurate BMI calculator for adolescents and discovering environmental influences on the obesity gene. Pennington has also focused significantly on childhood obesity, and is home to a Translational Research Clinic for Children. This center opened in 2014 and is dedicated to the study of pediatric obesity and diabetes through onsite clinical and population-based research.

- Our Lifestyles, Our Lives, a program offered in partnership with Our Lady of the Lake Regional Medical Center, focuses on healthy eating, physical activity, and psychological support necessary for children to achieve a healthy weight.
- With support from Baptist Community Ministries, Pennington has developed a toolkit of best practices to assist primary care providers in providing preventive and treatment services for childhood obesity. The toolkit has been delivered to physicians across EBRP and can be found at <http://www.pbrc.edu/obesitytoolkit/>.
- Pennington investigators partnered with the Mayor's Healthy City Initiative on a study examining preschool children's physical activity and screen time. The goal to identify community strategies to improve young children's behaviors to prevent obesity. Woman's Hospital's Child Development Center partnered with Pennington on this and other related studies to evaluate the causes of obesity in preschool-aged children.

Big River Economic and Agricultural Development Alliance (BREDA), a nonprofit organization managing the Red Stick Farmers Market and the Red Stick Mobile Market, plays a pivotal role in fighting obesity in EBRP. In addition to offering four mobile markets (one location is in an identified "food desert"), BREDA also operates a public marketplace called Main Street Market. Open six days each week, Main Street Market offers an organic grocery store and hosts local Louisiana food artisans. Red Stick Farmers Market and Main Street Market support over 45 local Louisiana farmers and fishers, 35 local food artisan businesses and six local restaurants. Each Saturday morning, BREDA hosts a "Fresh from the Market" cooking demonstration by local chefs who

shop for produce at the market and then teach the public how to prepare healthy menus using fresh local ingredients.

BREDA accepts state and federally-funded nutrition assistance program purchases, supporting families and seniors who experience food insecurity. A financial incentive is offered to low-income families. Patrons are encouraged to sign up for the frequent shopper program which provides cash rewards.

- Red Stick Sprouts, collaboration between BREDA, HealthyBR and Our Lady of the Lake Regional Medical Center, empowers children visiting the market to become active participants in smart food choices. Participants ages two through 12 receive



two dollars in market tokens along with a tote bag, kid-friendly 5210+10 recipe cards, and educational materials.

- BREDA includes interactive 5210+10 events for children at their mobile markets, such as cooking demonstrations, arts and crafts, educational displays and fitness activities.

HealthyBR partners have also targeted physical inactivity and obesity in a number of ways:

- According to the Louisiana State University

Agricultural Center, there are 55 school-based community gardens in EBRP. Baton Rouge General Medical Center has partnered with the American Heart Association to sponsor a teaching garden and a "recess reboot" at Bernard Terrace Elementary School, helping kids learn about food sources, the importance of fruits and vegetables, tasty foods that can be made from them, why we should eat them regularly, and the value of being active.

- HealthyBR Family Fit Day, sponsored by HealthyBR, makes family fitness an open

streets-style event at BREC's City-Brooks Park. Events include fitness classes, healthy food tastings, walks, runs, bike rides, safety tutorials, fitness competitions, and more.

- BREC has expanded bike and walking trails, and now offers 59.23 miles of trails throughout the parish.
- A mobile recreation program, called BREC on the Geaux, uses the "pop-up shop" concept to bring physical activity to play deserts in EBRP. Two mobile units visit schools to provide unique recess activities during the school year. During the summer months, the program travels to communities throughout the parish to reach children not attending day camp programs. Eat Fit BR is a healthy restaurant initiative that works in partnership with the Baton Rouge Academy of Nutrition and Dietetics (BRAND). Ochsner Baton Rouge and HealthyBR to promote nutritious and delicious options at local restaurants. In 2017, there were 26 partners in Baton Rouge.
- The 5210+10 message and curriculum was developed by HealthyBR and the Our Lady of the Lake Children's Hospital. The message about healthy eating and active living for children and teens teaches five servings of fruits and vegetables, two hours or less of recreational screen time, one hour or more of physical activity, no sweetened drinks, and ten hours of sleep for children each day. 5210+10 has been integrated into schools, parks, summer camps, health systems, and government agencies, is taught to more than 11,000 children in camps each summer and is used in 46 schools. Our Lady of the Lake Regional Medical Center partners with City Year Baton Rouge to train all City Year Baton Rouge AmeriCorps members in 5210+10 curriculum and program implementation.



- Health Centers in Schools, a subsidiary of Our Lady of the Lake Regional Medical Center, has a Student Advisory Council (SAC) of high school students from each high school in East Baton Rouge Parish. The SAC members hold events monthly to educate students on 5210+10. Posters promoting the program are located throughout the schools. Students visiting the mobile health receive 5210+10 education, and exercise demonstrations are performed periodically throughout the school year.
- All HealthyBR partner hospitals are designated Well Spots by the Louisiana Office of Public Health.

According to CHR data, 22% of adults in Louisiana and 17% of adults in EBRP are smokers. HealthyBR partners and lawmakers have been instrumental in supporting community-wide initiatives to reduce smoking rates, resulting in a 3% decline in adult smoking from 2011 to 2015.

- Baton Rouge General Medical Center, Lane Regional Medical Center, Ochsner Baton Rouge, Our Lady of the Lake Regional Medical Center, Mary Bird Perkins – Our Lady of the Lake Cancer Center, Woman’s Hospital, Blue Cross Blue Shield of Louisiana and all BREC parks are “Tobacco Free/Smoke Free” environments.
- The Smoking Cessation Trust partners

with Baton Rouge General Medical Center, Cardiovascular Institute of the South, Mary Bird Perkins, Ochsner Baton Rouge and Our Lady of the Lake Physicians to offer free smoking cessation assistance.

- All restaurants and workplaces within EBRP have been smoke-free since 2007.
- Local hospitals partnered with HealthyBR on the Smoke-Free East Baton Rouge coalition. This initiative, designed to protect employers, musicians and entertainers in bars and casinos from the dangers of secondhand smoke was passed by EBRP Metro Council and bans smoking in these businesses effective June 1, 2018.

7. Injury Prevention

According to the Centers for Disease Control, accidents (unintentional injuries) are the fourth leading cause of death in the U.S. Accidents include falls, poisoning and motor vehicle crashes. While EBRP has demonstrated gains in related mortality rates compared to the state-wide rate, comparisons to national rates are startling.

Each year, EBRP loses 9,358 years of potential resident life span due to premature

| Risk Factor | EBRP Age-Adjusted Mortality Rate | Louisiana Age-Adjusted Mortality Rate | National Age-Adjusted Mortality Rate |
|---------------------|----------------------------------|---------------------------------------|--------------------------------------|
| All Accidents | 41.6% | 48.3 | 39.2 |
| Motor Vehicle Crash | 13.6% | 17 | 10.6 |
| Drug Poisoning | 10% | 14.7 | 13.4 |

death. This is 42% higher than the national average and 1% higher than the Louisiana average. Homicide rates in EBRP rank third in Louisiana behind Orleans and St. John the Baptist parishes. EBRP has a homicide rate of 18 per 100,000 citizens; 50% higher than the homicide rate for Louisiana and 200% higher than the national rate. According to the CDC, suicide rates in Louisiana have risen 29.3% from 1999 to 2016.

Sudden Unexpected Infant Death (SUID) continues to be a leading cause of death in infants. The number of deaths related to SUID in EBRP decreased from 17 in 2016 to seven in 2017.

- Woman’s Hospital is designated as a Safe Sleep Champion by the Department of Health and Human Services for its comprehensive education for new parents and promotion of safe sleep practices.
- A partnership between Our Lady of the Lake Regional Medical Center, EBRP Coroner’s Office, Lexlee’s Kids, BR Police Department and EBR Sheriff’s Office, assists in educating parents on safe sleep practices and distributes Pack ‘n Plays to low-income families to prevent infant injury from sleeping with parents or siblings.

Motor vehicle crashes are the leading cause of death for children three to 15 years of age (Lee, Farrell, & Mannix, 2015) as well as in teens. In 2014, over 2,300 teens ages 16-19 were killed and 221,313 were treated in emergency departments for injuries suffered in motor vehicle crashes.1 this equates to six teen deaths each day in our nation. A partnership between Our Lady of the Lake



Regional Medical Center, the Louisiana State Police Department and University Medical Center New Orleans provides interactive programming intended to provide education to teens. Called "Sudden Impact," the program's goals are to increase the use of seatbelts, and decrease impaired and distracted driving among the teenage population. Each year, the Sudden Impact Program reaches almost 3,000 students through programs held at Our Lady of the Lake Regional Medical Center and at local schools within the region.

Use of child safety seats reduces the risk of injury by up to 82% and the risk of death by 28% when compared to children of similar ages restrained by seat belts alone. (Ekundayo et al., 2013; Muller et al., 2014). While more than 80% of parents attempt to use child passenger safety systems for their children, fewer than 20% do so correctly (Muller et al., 2014).

- In partnership with the Alliance Safety Council, child passenger safety technicians at Our Lady of the Lake Children's Hospital assisted parents in installing over 500 child safety seats in 2017.
- Our Lady of the Lake offers the only therapist staffed comprehensive car seat clinic in the state of Louisiana for children with special healthcare needs. Therapists serve as the state coordinators for child passenger safety for children with special needs. In 2017, this team taught at various national therapy and injury prevention conferences as well as outpatient clinics throughout our state to increase therapist awareness on this topic.
- In partnership with Cincinnati Children's Hospital and the Toyota Corporation, Our Lady of the Lake was able to provide adaptive child safety seats free of cost for over 20 families of children with special needs in the Greater Baton Rouge area.

One older adult falls each second, making falls the number one cause of injuries and deaths from injury among older Americans. In 2014 alone, older Americans experienced 29 million falls causing seven million injuries and costing an estimated \$31 billion in annual Medicare costs, according to a new report published by the Centers for Disease Control and Prevention in this week's Morbidity and Mortality Weekly Report (MMWR).

- Our Lady of the Lake Regional Medical Center partnered with the Capital Area YMCA to provide Matter of Balance fall prevention classes to more than 320 people at YMCAs across the capital area in 2017.
- Woman's Hospital offers a group fall prevention program consisting of classes and health exams that address the sensory contributors to maintaining balance.

Our Lady of the Lake Regional Medical Center provides the only Level II Trauma Center in Region 2 of the state. The Screening, Brief Intervention and Referral to Treatment (SBIRT) program consists of a face-to-face evaluation and brief intervention protocol designed to raise the patient's awareness of substance use as a risk factor for traumatic injury, to provide education and/or referral to resources and to motivate safer and more responsible behavior. All patients admitted to Our Lady of the Lake Regional Medical Center meeting National Trauma Data Standard Patient Inclusion Criteria are candidates for SBIRT, which generates referrals to licensed substance counselors who visit patients to perform face-to-face interviews and provide referrals to resources for those who screen positive for substance misuse disorders. In 2017, 2,639 patients were admitted under the Trauma Inclusion Criteria; 36% of those tested screened positive for a substance at the time of their admission. Over 1,000 patients participated in interviews with counselors and referrals

were offered to all who screened positive.

Baton Rouge General Medical Center's Burn Center is the only verified Burn Center in Southeast Louisiana and out of just 68 that are verified in the nation, it is the gold standard in burn care treatment and has covered the pediatric and adult burn needs of patients between Gainesville and Dallas for almost 50 years. Verified burn centers are the only facilities treating burns that are held to national standards by the American Burn Association and the American College of Surgeons for every element of burn treatment, including trauma. Treating nearly 1,500 patients a year, Baton Rouge General Medical Center's comprehensive burn care team includes highly trained specialty nurses, surgeons, dietitians, respiratory therapists, rehabilitation therapists, psychiatrists, ophthalmologists, ENTs, and social workers, and have more than 400 years of combined experience.

Other efforts taking place within the EBRP community:

- Stop the Bleed, a national awareness campaign launched in 2015 by the White House, is intended to encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives. In 2017, Our Lady of the Lake Regional Medical Center trauma staff became certified instructors and began local outreach education. During the first month of operation, over 100 participants received instruction, including teachers and staff in local schools.
- The Victims Assistance Program, a partnership between Our Lady of the Lake Regional Medical Center and the East Baton Rouge Parish District Attorney's Office, was formed to reduce intentional injuries and criminal recidivism associated with violent crime. Representatives from the District Attorney's Office work in the hospital

setting to provide victims of violence with voluntary assistance. Ongoing assistance is provided to those who choose to enter the program. Examples of assistance include: safety planning, counseling, housing, educational planning, domestic violence education, navigation of the criminal justice system, as well as one year of ongoing support and follow-up.

S. Mental Health

Mental health and substance abuse were identified as top significant community needs in the 2012 and 2015 CHNAs.

Mental health refers to psychological, emotional, and social well-being. Mental illnesses affect a person's mood and how he or she feels, perceives, and behaves. Mood disorders are the most common of all mental disorders and include major depression. According to the National Alliance on Mental Illness (NAMI), approximately one in five (18.5%) adults in the U.S. experience mental illness in a given year, while approximately one in 25 adults (4%) will experience a serious mental illness that substantially interferes with or limits one or more major life activities.

According to the 2017 State of Mental Health in America, Louisiana ranks 30th in prevalence of mental illness. Six measures

comprise the Prevalence Ranking:

1. Adults with any mental illness
2. Adults with dependence or abuse of illicit drugs or alcohol
3. Adults with serious thoughts of suicide
4. Youth with at least one past year Major Depressive Episode (MDE)
5. Youth with dependence or abuse of illicit drugs or alcohol
6. Youth with Severe MDE

Mental health in EBRP has been universally identified as a priority area by the offices of the Mayor, District Attorney, Chief of Police, Sheriff, Coroner and EMS. EBRP ranks 11 of 65 parishes relative to the lowest ratio of mental health providers as compared to incarcerated individuals at 469:1. Additionally, while there are unknown consequences at this point, it is anticipated that the lasting impact of the 2016 flood will create an ongoing demand for increased mental health resources. ⁽¹⁵⁾

HealthyBR partners are working together to address this very serious issue within our community:

- HealthyBR members are collaborating to educate primary care and emergency room physicians on the use of new screening tools and referral resources for individuals with mental health and substance abuse diagnoses. HealthyBR continues to

participate in ongoing dialogue to address the mental health crisis in the Parish Prison, including the creation of referral resources. HealthyBR also participates in the regional wide Behavioral Health Collaborative to resolve population health issues related to mental health and addiction.

- Our Lady of the Lake Regional Medical Center's TAU Center includes the following programs:

- Tau Adolescent Unit: Adolescent inpatient treatment for children/adolescents between the ages of 12-17 suffering with primary behavioral health and co-occurring disorders.
- Tau St. Clare Unit: Adult inpatient treatment for ages 18 and older for primary behavioral health and co-occurring disorders. (High functioning unit.)
- Acute Unit: Adult inpatient unit for ages 18 and older who experience primary behavioral health and co-occurring disorders. (Low functioning unit)
- Specialized Geriatric Inpatient Unit: Older adult unit for seniors suffering with primary behavioral health and co-occurring disorders.
- Intensive Outpatient Program: Adult outpatient treatment for adults 18 and older.
- Baton Rouge General Medical Center offers both inpatient and outpatient mental health services, and has free assessments



for anxiety and depression available to the public.

- The Center for Adult Behavioral Health Services and the Margaret Dumas Mental Health Center provide mental health services to adults in EBRP. Child services are also provided at the Center for Children's Behavioral Health and in over 20 schools throughout the parish. These clinics are part of the Capital Area Human Services District (CAHSD), which operates three full-time and six satellite mental health clinics serving a seven-parish area that includes EBRP. A person in crisis may call CAHSD or go directly to the closest Emergency Department. CAHSD offers walk-in same-day appointments at any of their mental health clinics for immediate evaluation and appropriate disposition. CAHSD provides licensed, full-time mental health professionals to the Parish Jail and in several additional primary care settings. In Fiscal Year 2016, CAHSD served:

- 6,508 adults for mental health
- 2,228 children with mental health/addiction recovery
- 2,984 people with developmental disabilities

9. Sexually Transmitted Infections/HIV

Human Immunodeficiency Virus (HIV) and Sexually Transmitted Infections (STIs) including chlamydia, gonorrhea, human papillomavirus (HPV) and syphilis are associated with increased morbidity and mortality. STIs cause severe complications, including infertility, liver disease and some forms of cancer. The risks of transmitting STIs can be prevented by avoiding risky sexual behaviors, using condoms and through regular testing and treatment.

HIV attacks and destroys infection-fighting

cells of the immune system, making it difficult for the body to fight infections and certain cancers. Without treatment, HIV can gradually destroy the immune system and advance to Acquired Immunodeficiency Syndrome (AIDS). HIV transmission can be reduced or eliminated by addressing the primary methods of infection: safe sex practices, protection against transmission from an HIV-positive mother to her baby during pregnancy or birth, preventive treatment and sterile supplies for injection drug users, widespread testing and medical care for those who test positive and effective counseling and treatment programs.

In 2016, Louisiana ranked third in the nation for HIV case rates (24.6 per 100,000 population) and eighth in the estimated number of

HIV cases. Louisiana also ranks second in the nation for AIDS case rates (12.0 per 100,000). As of September 30, 2017, there were 21,784 persons living with HIV/AIDS in Louisiana; 10,655 with HIV and 11,129 with AIDS.

This statistic is reflected in EBRP. The Baton Rouge Metropolitan Statistical Area (Baton Rouge MSA) ranked third in the nation among large metropolitan areas in 2016 for HIV case rates (30.2 per 100,000) and first in AIDS case rates (18.0 per 100,000). As of September 30, 2017, there were 5,440 persons living with HIV/AIDS in the Baton Rouge MSA; 2,591 persons with HIV and 2,849 persons with AIDS. That same year, 1,143 new HIV cases were diagnosed in Louisiana, 249 of these were in the Baton Rouge MSA; 561 new



AIDS cases were diagnosed 149 in the Baton Rouge MSA.

Louisiana ranks first in the nation for primary and secondary syphilis case rates (16.0 per 100,000). Between January 1, 2017 and September 20, 2017 there were 1,022 persons diagnosed with syphilis in Louisiana. In that same time period, 135 persons were diagnosed with persons diagnosed with syphilis in the Baton Rouge MSA.⁽¹⁶⁾

The primary contributor to new HIV diagnoses in Louisiana is men who have sex with men (MSM). Of the persons who reported a risk factor in 2016, 56% reported being MSM, and an additional 2% reported being MSM and an injection drug user (IDU). As of September 30, 2017, 47% of all people living with HIV infection in Louisiana were MSM.⁽¹⁵⁾ The primary risk factor for early syphilis diagnoses in Louisiana is heterosexual contact. As of September 30, 2017, of the persons who reported a risk factor, 56% reported engaging in heterosexual activity, and 51% reported being MSM.⁽¹⁶⁾

African Americans are disproportionately affected by HIV/AIDS and STD. In 2016, 73% of newly diagnosed HIV cases and 75% of newly diagnosed AIDS cases were among African Americans. Through the third quarter of 2017, 70% of early syphilis cases were among African Americans. In contrast, African Americans comprise 32% of Louisiana's overall population.⁽¹⁵⁾

Reducing HIV/STI rates was one of the top significant community needs in the 2012 and 2015 CHNAs. In 2017, the Louisiana Department of Health Office of Public Health formed the Region 2 STD/HIV Task Force. Among the participants are Our Lady of the Lake Regional Medical Center, Woman's Hospital, members of the Louisiana Primary Care Association (LPCA) and HealthyBR. HealthyBR partnered with the Public Health Foundation, Catholic Health Association and community partners to develop a communi-

ty HIV roadmap. In August 2017, HealthyBR, Baton Rouge Ryan White Program and ViiV Healthcare hosted a workshop for health-care providers from a variety of clinical sites including Ryan White-funded clinics, private practice, public health, and the State Department of Health. The workshop focused on the HIV continuum of care; specifically, re-engaging clients that have been previously linked to care, retaining clients, clinician community collaboration and policy/legal barriers to retention in care. The resulting report will be used to help guide the 2018 Implementation Plan. Additional efforts to address the STI/HIV infection rate and to offer support for those with a disease:

- Community programs offer care coordination, financial and housing assistance and counseling assistance:
 - Louisiana Health Access Program (LA HAP)
 - Health Insurance Program (HIP)
 - Housing Opportunities for People with AIDS (HOPWA)
 - East Baton Rouge City-Parish Ryan White Program
- The Office of Public Health Region 2, the HIV/AIDS Alliance for Region Two, Inc. (HAART), Open Health, CareSouth, Our Lady of the Lake Regional Medical Center, Family Service of Greater Baton Rouge, Metro Health, Volunteers of America of Greater Baton Rouge and other community partners have hosted community awareness events for National Black HIV/AIDS Awareness Day, National HIV Testing Day, and World's AIDS Day.
- In September 2017, the Baton Rouge Faith Leader Town Hall was held in partnership with NAACP, The Black Church and HIV, Gilead and other community organizations. The goal was interactive dialogue between faith leaders and community experts on the impact of HIV in Baton Rouge and how the faith community can partner in efforts to fight the epidemic.

- In January 2018, Mayor Sharon Weston Broome signed the Paris Declaration of Fast-Track Cities. Baton Rouge joined New Orleans and 11 other North American cities, as well as 72 other cities around the world to:

1. Attain 90-90-90 targets
 - 90% of People Living With HIV (PLWH) know their status
 - 90% of PLWH have access to antiretroviral treatment (ART)
 - 90% of PLWH who are on ART have an undetectable viral load
2. Increase utilization of combination HIV prevention services
3. Reduce to zero the negative impact of stigma and discrimination
4. Establish a common, web-based platform to allow for real-time monitoring of progress.

In response to the CDC and the US Preventative Services Task Force's recommendations for HIV testing in healthcare settings, Our Lady of the Lake Regional Medical Center, Gilead Sciences and the Louisiana Office of Public Health entered into partnership in January 2014 to provide opt-out HIV testing and early linkage to care/intervention services to patients ages 13-64 through the Emergency Department. The opt-out HIV screening process is initiated during triage at Our Lady of the Lake Regional Medical Center's Main, Pediatric and Livingston Emergency Departments. A process was developed to ensure patients have timely access to medical care, counseling and education immediately following screening.

Results are encouraging. In 2015 and 2016, Our Lady of the Lake Regional Medical Center identified 103 patients as noncompliant according to the Louisiana Public Health Information Exchange (LaPhie). In 2017, 13,383 patients were screened across all Our Lady of the Lake

Regional Medical Center testing sites, with 85 patients identified as HIV-positive:

| Location | Patients Tested | Patients tested positive |
|-------------------|-----------------|--------------------------|
| OLOL Main ED | 9,688 | 80 |
| OLOL Pediatric ED | 442 | 0 |
| Livingston ED | 2,893 | 1 |

In November 2017, Our Lady of the Lake Regional Medical Center opened a free standing ER that is connected to an Urgent Care and Primary Care in the Northern Part of the Parish. Below are the data reported in November and December of 2017.

| Location | Patients Tested | Patients tested positive |
|------------------------|-----------------|--------------------------|
| OLOL North ED | 311 | 3 |
| OLOL North Urgent Care | 49 | 1 |
| Livingston ED | 2,893 | 1 |

Baton Rouge General Medical Center performs STD tests on all patients who are admitted to the Behavioral Health Unit. If at-risk behaviors are identified, a clinician performs HIV tests and social workers help with resources, referrals and emotional support.

Established in 2002, Woman's Hospital Mother-to-Child HIV Transmission Prevention program focuses on preventing the transmission of HIV from mothers to newborns during birth. With this program, the chance of transmission can be decreased to less than two percent. The program provides case management for women with HIV and their babies, from diagnosis during prenatal lab tests to one year after delivery. When an HIV-positive mother-to-be comes to Woman's Hospital, a specially trained nurse develops a care plan based on her specific needs. The nurse schedules her doctor's appointments, makes sure she is taking her medications and educates her about practicing safe sex. After delivery, the baby is placed on anti-retroviral medication plan for six weeks.

This service is provided at no charge to the

patient. Since 2005, Woman's Hospital has not had an HIV-positive baby born to a mother enrolled in the program.

10. Substance Abuse

Substance abuse is defined as excessive drug or alcohol consumption that affects mental and physical health. Excessive alcohol consumption also contributes to heart disease, some forms of cancer, risky sexual behavior, and accidents. According to the CHR, 18% of adults in EBRP reported binge or heavy drinking, a 15% increase from 2015. The Louisiana Health Information Network reported that between 2011 and 2013, 10.2 hospitalizations per 10,000 were due to alcohol abuse in EBRP. Alcohol-impaired driving deaths accounted for 28.8% of all driving deaths parish-wide between 2011 and 2015; a decrease from 35% between 2007 and 2012.⁽³⁾ Drug misuse has also increased across the country and EBRP. Between 2000 and 2016, death by drug poisoning in EBRP has increased 556% from 16 deaths in 2000 to 89 deaths in 2016. According to the Baton Rouge Coroner's office, five of the 28 drug-related deaths were due to heroin in 2012. In 2016, heroin use caused 34 of the 89 drug-related deaths. In just four years, the proportion of drug deaths related to heroin increased 20%.^(17, 18)

Mental health and substance abuse have been one of the top four significant com-

munity needs in both the 2012 and 2015 CHNAs. In 2018, mental health and substance abuse will be combined as Behavioral Health. For this reason, please refer also to the Mental Health priority section of this report.

- HealthyBR members are collaborating to educate primary care and emergency room physicians on new screening tools and referral resources for individuals with substance abuse diagnoses.
- The Center for Adult Behavioral Health Services provides addiction recovery services to adults in EBR. This clinic is part of the Capital Area Human Services District (CAHSD) that operates two full-time outpatient addiction recovery clinics serving a seven-parish area that includes EBR. They also operate the Capital Area Recovery Program for adult male substance abusers and treatment of co-occurring disorders. Children and adolescents can be seen at their Children's Behavioral Health Services Clinic or at school based satellites. CAHSD also provides staff within the Parish Prison.
- In Fiscal Year 2016 CAHSD served:
 - 2,060 Adults with Addiction Recovery
 - 2,228 Children with Mental Health/Addiction Recovery



Next Steps

This CHNA is only the first step in an ongoing process. HealthyBR partner organizations must use this information as a resource for working within their organizations to develop strategies and partnerships to further address the top ten community needs. While there are common areas of focus among HealthyBR partners, each must individually consider resources, costs, future impacts, and limitations of implementation plans.

The top four significant community needs – access to care, behavioral health, healthy living, and sexually transmitted infections/HIV – have the potential to greatly influence more than one area of need and the greatest potential for community-wide positive impact. Partner organizations will collaborate on a three-year Joint Implementation Plan that will address these needs across the EBRP community.

As our partner hospitals begin to focus more intently on anchor strategies over the next three years, this CHNA and the resulting Implementation Plan serve as only the first steps in an evolving process. Healthcare's role in creating healthy communities through access to quality care, research, and grant funding is complemented by a higher impact approach; hospitals and integrated health systems are increasingly stepping outside of their walls to address the social, economic, and environmental conditions that contribute to poor health outcomes, shortened lives, and higher costs in the first place. By addressing these social determinants of health through their business and non-clinical practices (for example, through purchasing, hiring, and investments), hospitals and health systems can produce increased measurably beneficial impacts on population and community health.

Leading health organizations are moving along a progression from: 1) doing good

things for the community; to 2) intentionally addressing social determinants of health, measuring and reporting on the impact made in addressing community challenges; to 3) recognizing that healthcare institutions must be accountable for impacting community health, and leveraging their assets to ensure the well-being of the community in which they are based. Some call this new approach to health "the anchor mission," meaning that a hospital not only provides charitable and philanthropic support for the community, but begins to re-orient its institutional business practices to benefit the place in which it is based.

The adoption of this "anchor mission" prevents unnecessary demand on the healthcare system, which in turn can contribute to lower costs and more affordable care for all, especially those truly in need. Simply put, this approach can improve a health system's quality and cost effectiveness while simultaneously significantly benefiting society.

By adopting an anchor mission, healthcare institutions and systems can produce measurably beneficial impacts on individual and community health, and by so doing, lower preventable demand on the healthcare system. The result is a win-win: refocused hospital business practices and operations produce conditions in which citizens and communities become healthier. Healthcare professionals call this "moving from volume to value," a process in which hospitals are rewarded for improving health, rather than delivering more care.



Hospital Overview

Baton Rouge General Medical Center:

Organization Type: Baton Rouge General Medical Center is the area's first full-service hospital, with 588 licensed beds between two campuses. The hospital opened its doors in 1900, and has provided the southeastern region with high-quality healthcare for generations. Also affiliated with BRG is Baton Rouge General Physicians, an employee network of more than of more than 60 physicians and 20 practices owned and operated under General Health System.

Services Offered: With a staff of nearly 800 physicians representing more than 80 medical specialties and subspecialties and 3,500 employees, BRG is a regional leader in primary care and specialty programs. Treating more than 300,000 patients each year, BRG offers programs that include: Emergency, the state's only verified Regional Burn Center, Pediatrics, Heart and Vascular, Cancer, Birth Center, Behavioral Health, Hyperbaric and Wound Care, Imaging and Radiology, Neurosciences, Orthopedics, Rehabilitation, and Wellness and Lifestyle. An accredited teaching hospital since 1991, Baton Rouge General offers other medical education programs, including a partnership with William Carey for an expanded nursing school, School of Radiologic Technology, Family Medicine Residency Program, Internal Medicine Residency Program, and Sports Medicine Fellowship Program.

Primary Service Area: For the purposes of this assessment, Baton Rouge General's primary service area is defined as East Baton Rouge Parish, Ascension Parish and Livingston Parish. Secondary service areas include the surrounding parishes of St. Helena, West Feliciana, Point Coupee, and West Baton Rouge.

Lane Regional Medical Center:

Organization Type: Established in 1960, Lane is a state-of-the-art, 139-bed, regional healthcare system that is continually expanding and adding new technologies, programs and services such as Interventional Cardiology, Medical & Radiation Oncology, OB/GYN, Endoscopy & Infusion, Wound Care & Hyperbaric, and Advanced Resonance Imaging Technology.

With more than 850 dedicated team members, Lane Regional is the largest employer within the city of Zachary. The hospital continues to grow and invest in the community by recruiting new physicians and providing access to the best healthcare services, technologies and programs available in the region.

Lane's core values are Quality, Service, Stewardship, Teamwork and Innovation. For more details, please visit LaneRMC.org.

Services Offered: Offering a full range of inpatient and outpatient diagnostic services, Lane supports Orthopedics, Labor & Delivery, Family Medicine & Pediatrics, Vascular & General Surgeries, In-Patient Rehabilitation, Home Health, Diabetes Management, Audiology, Emergency Services and After-Hours Urgent Care.

Primary Service Area: For the purposes of this assessment, Lane Regional Medical Center's service area is defined as East Baton Rouge Parish based on its location and the population it serves. It is located in the northern part of the parish and serves as the primary healthcare resource for the region, including more than 200,000 residents in the communities of Zachary, Baker, Central, Clinton, Jackson, St. Francisville, and beyond.

Ochsner Medical Center Baton Rouge:

Organization Type: Ochsner Health System is Louisiana's largest non-profit, academic, healthcare system. Driven by a mission to Serve, Heal, Lead, Educate and Innovate, coordinated clinical and hospital patient care is provided across the region by Ochsner's 30 owned, managed and affiliated hospitals and more than 80 health centers and urgent care centers. Ochsner Health System employs more than 18,000 employees and over 1,200 physicians in over 90 medical specialties and subspecialties, and conducts more than 700 clinical research studies.

Services Offered: Ochsner Baton Rouge delivers quality healthcare for families throughout our region. With our 150-bed hospital, 13 health centers, including 4 urgent care locations and a team of more than 300 skilled physicians, Ochsner is known for comprehensive, convenient care. We offer a full range of inpatient and outpatient services including Family Medicine and Pediatrics, Emergency Services, Women's Services, including midwifery, Cardiology, Orthopedics, Bariatric Surgery, Gastroenterology, Neurology, Imaging Services and much more.

Primary Service Area: For the purposes of this assessment, Ochsner Baton Rouge defines its primary service area as EBRP. In addition to Baton Rouge, Ochsner also services the surrounding areas of Zachary, Plaquemine, Prairieville, Denham Springs, Tangipahoa and Sherwood, offering 13 health centers, two emergency rooms and four urgent care locations.

Our Lady of the Lake Regional Medical Center:

Organization Type: Inspired by the vision of St. Francis of Assisi and in the tradition of the Roman Catholic Church, OLOL extends the healing ministry of Jesus Christ to God's people, especially those most in need.

Our Lady of the Lake is one of the largest private, not for profit academic medical centers in the state; operating under the Franciscan Missionaries of Our Lady Health System. The health system serves patients throughout Louisiana with a network of hospitals, clinics, physicians, elderly housing, and integrated information systems. Our Lady of the Lake has a complement of nearly 1,200 physicians and more than 7,000 team members. Our Lady of the Lake has 834 licensed beds and treats 35,000 inpatients; 600,000 outpatients. Joint Commission-accredited, the hospital is also Magnet-designated with many specialty certifications such as Stroke, Trauma, Bariatric Surgery and Chest Pain.

Our Lady of the Lake Children's hospital operates as a hospital within a hospital and is the second-largest pediatric facility in Louisiana treating 90,000 children each year. With the most local pediatric patient beds and the largest local pediatric intensive care unit, the hospital treats children statewide and beyond. In addition, the hospital offers the region's only 24/7 pediatric emergency department.

Services Offered: Our Lady of the Lake provides a comprehensive range of services for the community in which it serves. With over 60 medical specialties, services include the Mary Bird Perkins – Our Lady of the Lake Cancer Program, Children's Hospital, Diabetes and Nutrition Center, Emergency Department, free standing ED in Livingston and North Baton Rouge, Endoscopy Center, Hearing and Balance Center, Heart and Vascular Institute, Imaging Services, Labora-

tory and Diagnostics, Mental and Behavioral Health, Neurosciences Services, Orthopedic Services, Palliative Medicine, Inpatient and Outpatient Pharmacy, Rehabilitation, Respiratory Care Services, Senior Services, Surgical Services, Robotic Surgery, Trauma Services, Voice Center, Weight Loss, LSU Health Baton Rouge, Wound Ostomy Center and more. In partnership with Our Lady of the Lake, LSU and Tulane, the hospital hosts a vast array of Graduate Medical Education residents and training programs including pediatrics, psychiatry, internal medicine, emergency medicine and more.

Our Lady of the Lake also has a joint venture partner, Surgical Specialty Center of Baton Rouge. The joint venture was completed in September 2008.

Primary Service Area: For purposes of this Joint CHNA, Our Lady of the Lake has defined East Baton Rouge Parish as its primary service area. Secondary service areas include the surrounding parishes of Ascension, Livingston, St. Helena, West Feliciana, Point Coupee, and West Baton Rouge. Fifty two percent of the discharges from Our Lady of the Lake come from our primary service area of East Baton Rouge Parish.

Surgical Specialty Center of Baton Rouge:

Organization Type: Located in the state capital of Baton Rouge, Louisiana, Surgical Specialty Center of Baton Rouge (SSCBR) is a healthcare provider for the Greater Baton Rouge area and surrounding parishes. The hospital opened in April, 2003 and has eight operating rooms, two minor procedure rooms, and 16 licensed beds. The hospital provides surgical services in the following specialties: ENT, General Surgery, General Pediatric Surgery, Hand, Orthopedics, Spine, and Urology. Other services include Imaging (CT, X-Ray) Lithotripsy, Pain Management, and Sleep Studies.

SSCBR completed a joint venture with Our Lady of the Lake Regional Medical Center (OLOL) in September 2008. SSCBR has nearly 150 physicians on staff and 200 team members. SSCBR has 16 licensed inpatient beds and admitted approximately 1,000 patients to the inpatient unit in 2017. SSCBR performed approximately 11,500 surgical procedures, 1,800 pain management procedures, and 650 Lithotripsy procedures in 2017. Additionally, approximately 50 patients had sleep studies provided by SSCBR and 5,400 Imaging studies were conducted. As a licensed hospital, SSCBR is accredited by The Joint Commission.

Services Offered: SSCBR and staff urologists have been providing free prostate screenings since 2005, conducting approximately 40 free screenings per year. SSCBR provides services to those with Medicare and Medicaid coverage, as well as charity care.

Primary Service Area: SSCBR's primary service area is the same as OLOL's market. For purposes of the Community Health Needs Assessment the primary service area has been defined as East Baton Rouge Parish.

Woman's Hospital:

Organization Type: As the nation's only freestanding specialty hospital for women and infants, Woman's is consistently recognized for innovative programs and quality care. With more than 2,000 team members, Woman's has 168 licensed adult hospital beds and 84 licensed NICU beds, and provides an array of treatments for women and infants. Woman's is currently the 17th largest delivery service in the U.S. and the largest in Louisiana; patients deliver more than 8,600 babies at Woman's each year. With a mission to improve the health of women and infants, Woman's performs more than 7,000 surgeries, 44,000 breast procedures and 75,000 Pap tests annually.

Woman's is accredited by The Joint Commission, is a Magnet-designated hospital, and maintains patient engagement scores in the 95th percentile. An accredited teaching hospital, Woman's has partnered with Our Lady of the Lake, Louisiana State University and Tulane University Medical School to provide Graduate Medical Education for residents in obstetrics and gynecology, general surgery, emergency medicine, plastic surgery, psychiatry and pediatric programs. More information can be found at www.womans.org.

Woman's also operates the Child Development Center and Woman's Center for Wellness. The Foundation for Woman's is a 501(c)(3) nonprofit organization whose primary purpose is to raise and manage private support for Woman's Hospital.

Services Offered: Woman's provides an array of services for patients in East Baton Rouge Parish and the surrounding communities, including obstetrics and gynecology, antepartum and postpartum care, neonatal and adult intensive care, neonatal and maternal transport, breast and gynecologic cancer surgery, cosmetic surgery, bariatric surgery, general surgery, fetal surgery and maternal-fetal medicine. Outpatient services include same day surgery, radiation oncology, medical oncology, nutrition and weight loss counseling, audiology, physical therapy, cancer survivorship, occupational therapy and speech therapy for men, women and children, as well as laboratory and imaging services, in addition to a variety of outpatient clinic services.

Primary Service Area: For purposes of this joint CHNA, Woman's has defined East Baton Rouge Parish as its primary service area. More than 50 percent of patients presenting during fiscal year 2017 (October 2016 – September 2017) were from East Baton Rouge Parish. Significant secondary service areas include the surrounding parishes of Ascension and Livingston.

Baton Rouge General Medical Center:

Obesity: Baton Rouge General has maintained its nationally accredited Diabetes and Nutrition Program to help those living with or at high risk of developing the disease understands the importance of lifestyle changes as well as how to monitor and interpret blood glucose levels. BRG's employee wellness program includes incentives for healthy weight, healthy blood pressure readings, and healthy waist measurements. The cafeterias also include healthy food choices for employees and guests.

Mental and Behavioral Health: Baton Rouge General continues to offer an outpatient behavioral health center and an inpatient behavioral health unit, as well as free health risk assessments for anxiety and depression.

Overuse of Emergency Departments: Baton Rouge General works with community partners to decrease overuse of emergency departments. BRG recently opened its first after-hours clinic, BRG Express Care. Non-emergent patients in the emergency rooms are directed to BRG Express Care or to the appropriate physicians for care.

Lane Regional Medical Center:

Obesity: Lane offers a variety of free Good Health wellness classes and screening events to organizations and community members to help reduce obesity, including healthy cooking classes, biometric screenings, diabetes education, nutritional counseling and more. An employee wellness program offers cash incentives for better health and the cafeteria provides a variety of healthy food choices on the menu.

HIV and other STIs: Lane provides HIV education and screening information to assist individuals who want to be tested. Social workers provide patients with resources, referrals and emotional support.

Mental and Behavioral Health: Lane offers a comprehensive, physician-supervised, outpatient behavioral health center for individuals needing assistance with substance abuse, chronic mental illness, depression, and anxiety, eating and bipolar disorders.

Overuse of Emergency Departments: Lane is part of the HealthyBR working group to decrease ED readmission rates through a health information exchange, as well as provide access to care information (right care, right time, right place message). Information on FastLane, Lane's after hours urgent care center for non-emergent healthcare needs, is provided. Patients in the ED are directed to appropriate primary care/specialists for follow-up care as needed.

Ochsner Medical Center Baton Rouge:

Obesity: Ochsner Eat Fit BR has improved access to healthy meals on-the-go across the Baton Rouge region and continues to advocate for better nutrition through the free smartphone app which includes a list of participating partners with dishes and nutrition facts, community wellness resources and calendar of events, over 200+ Eat Fit-approved recipes, Eat Fit-approved shopping lists. Ochsner Eat Fit BR also hosts Monthly cooking demos, free of charge and open to the public at both Whole Foods Market and Alexander's Highland Market.

HIV and other STIs: Ochsner Baton Rouge participates in various HIV initiatives including the annual HIV Summit Ochsner physicians are also involved in establishing an Opt Out program at Ochsner Baton Rouge/Iberville.

Mental and Behavioral Health: Ochsner more than doubled the Psychiatry department staff and continues to recruit mental health providers to assist with a growing demand and lack of services available for mental health care in the region. A Tele Psych program is offered through the Emergency Department to ensure patients receive access to mental health providers.

Overuse of Emergency Departments: Ochsner provides educational information to patients and those visiting the various facilities on the appropriate use of ED, urgent care, primary care provider, and etc. services.

Our Lady of the Lake Regional Medical Center

Obesity: Our Lady of the Lake has successfully established a service line dedicated to Weight Loss and Diabetes Management and Prevention. The Nutrition and Metabolic Service Line consists of Bariatric Services, Lake Health Center and Our Lady of the Lake and LSU Health Baton Rouge Diabetes and Nutrition Centers.

Our Lady of the Lake has successfully implemented the 5210+10 campaign through Health Centers in Schools, The Baton Rouge Children's Health Project and Community Advocacy outreach. This childhood obesity prevention message was also adopted by the Our Lady of the Lake Physician Group.

HIV and other STIs: Opt out HIV/AIDS screenings are offered at four Our Lady of the Lake Emergency Rooms and all LSUHBR Urgent Care Centers and the LSUHBR Family Practice Clinic. Social workers in the EDs serve as transition to care liaisons for follow-up care. The hospital supports the HIV/AIDS community through the Early Intervention Clinic at LSU Health Baton Rouge, Mid-City Clinic.

Our Lady of the Lake implemented the LaPHIE (Louisiana Public Health Information Exchange) to identify and flag patients seen in the ER who are deemed out of care by the Department of Health and Hospitals. Strategies to get patients back into care are implemented.

Mental and Behavioral Health: The psychiatry program has grown to 18 residents. The hospital has opened a new outpatient Psychiatric Clinic staffed by residents and faculty, doubling the number of patients they are able to serve. The hospital offers 24/7 inpatient consult services and has increased the number of psychiatrists from four in 2010 to 15 full-time psychiatrists. As an extension of the main emergency department, OLOL has dedicated psych safe space staffed with psychiatrists, registered nurses and social workers for the evaluation and treatment of patients suffering from emergency mental and behavioral health issues.

LSUHBR has also started mental health integration into primary care in 2017 at one primary care site with plans for expansion in 2018 to two additional primary care clinics. This provides patients with depression and anxiety treatment through the consultation of a psychiatrist, with follow-up until the symptoms improve.

Overuse of Emergency Departments: Our Lady of the Lake continues to promote community education to decrease the over utilization of the ED. Social workers in the ED help direct patients to primary care and the appropriate follow-up resources. LSUHBR Urgent Care Clinics continue to meet the needs of over 43,000 patients. Education efforts to link patients to primary care and to direct patients to appropriate levels of care continue.

Woman's Hospital:

Obesity: Woman's offers a variety of services that support health and wellness. The Woman's Center for Wellness offers a trademarked weight and lifestyle management program to local employers, and also offers complimentary and affordable fitness classes and educational seminars, including cooking demonstrations. The Center is currently undergoing certification as a Medical Fitness facility. Woman's also operates a metabolic and weight loss clinic, and offers bariatric surgery. Woman's Research Department continues to conduct research studies each year related to gestational diabetes, Type II diabetes and Polycystic Ovarian Syndrome. The employee wellness program offers premium discounts and cash incentives for participation and through a combination of efforts has resulted in a health and prescription drug claim reduction of over \$2 million in the three year period the program has been in effect. Woman's café offers a wide variety of healthy choices, with lower prices than less healthy options. Woman's Child Development Center is NAPSACC and Well spot accredited due to its emphasis on prevention of childhood obesity and emphasis on wellness in early development.

HIV and other STIs: Woman's continues to operate the Mother-to-Child Transmission Program, which offers voluntary testing, case management, free medication and treatment for mom and baby. Voluntary testing for HIV/STDs is offered to all patients in the Assessment Center.

Mental and Behavioral Health: Woman's recently received a large grant supporting funding of a perinatal outcomes project, which is currently in the planning stage. The new program will offer a multi-disciplinary case-management approach to facilitate patient-centered care for opioid-dependent pregnant women with the goal of improved outcomes for mother and baby and ongoing addiction management leading to recovery.

Evaluation of 2015 CHNA

| Obesity | | 2014 Baseline | 2018 Goal | 2015 | 2016 | 2017 | 2018 |
|----------------------------|--|---------------|-----------|------|------|------|------|
| Population Health Measures | Adult Obesity Rate (CHR) | 34% | 30% | 33% | 32% | 33% | 32% |
| | Physical Inactivity Rate (CHR) | 25% | 22% | 25% | 25% | 25% | 27% |
| | Access to Exercise Opportunities (CHR) | 96% | 97% | 93% | 95% | 95% | 97% |
| | Food Environment Index (CHR) | 6.5 | 7.5 | 6.3 | 6.2 | 5.9 | 6.5 |

In collaboration with multiple community partners bending the curve on Obesity is a noticeable improvement. However, there is more work to be done in creating sustainable programs and initiatives. In partnership with BREC access to quality play and open spaces continues to improve. The creation of 5210+10 communication platform for Childhood Obesity needs to expand to sustainable, repeatable community based programming through programs like Health Care Center's in Schools and City Year.

| East Baton Rouge Parish | | 2014 Baseline | 2015 | 2016 | 2017 |
|----------------------------|---|---------------|-------|-------|-------|
| Population Health Measures | Sexually Transmitted Infections (CHR) | 744 | 584 | 608.7 | 648.9 |
| | Primary and Secondary Syphilis Rate per 100,000 | 16.1 | 24.2 | 21.9 | 16.1 |
| | Chlamydia Rate per 100,000 | 618.6 | 749.2 | 731.5 | 909.3 |
| | Gonorrhea Rate per 100,000 | 212.8 | 282.0 | 287.2 | 311.2 |
| | Reported HIV Case Rate per 100,000 | 57.2 | 46.8 | 40.5 | 38.5 |
| | Reported Stage 3 AIDS Case Rate per 100,000 | 27.1 | 20.4 | 24.8 | 19.0 |

| Baton Rouge MSA | | 2014 Baseline | 2015 | 2016 | 2017 |
|----------------------------|---|---------------|-------|-------|-------|
| Population Health Measures | HIV Case Rate (CDC) | 44.47* | 32 | 30.2 | na** |
| | Primary and Secondary Syphilis Rate per 100,000 | 10.3 | 15.4 | 14.5 | 11.1 |
| | Chlamydia Rate per 100,000 | 498.0 | 610.2 | 581.3 | 708.3 |
| | Gonorrhea Rate per 100,000 | 151.4 | 213.6 | 213.4 | 218.4 |
| | Reported HIV Case Rate per 100,000 | 40.5 | 31.9 | 29.2 | 27.1 |
| | Reported Stage 3 AIDS Case Rate per 100,000 | 20.5 | 16.2 | 17.7 | 15.3 |

*Estimated by the CDC in 2015. This switched to reported in 2015.

**The 2017 data have not been release by the CDC yet

| Mental Behavioral Health | | 2014 Baseline | 2018 Goal | 2015 | 2016 | 2017 | 2018 |
|--------------------------|-------------------------------|---------------|-----------|------|------|------|------|
| Population | Mental Health Providers (CHR) | 650** | 600** | 736 | 690 | 470 | 340 |
| Health | Poor Mental Health Days (CHR) | 2.6 | 2.4 | 2.6 | 3.7* | 4.2* | 4.0* |
| Measures | Excessive Drinking (CHR) | 15% | 12% | 15% | 19%* | 18%* | 18%* |

*Change in methodology between years or should not be compared to previous years

**We recently discovered an error in our method for identifying Mental Health Providers and Other Primary Care Providers in 2014-2016: we were including organizations as well as individual providers in each county. We have updated 2015-16 but unfortunately, the raw data used in the 2014 Rankings is no longer available although when we are able to access that data, corrections will be issued

In collaboration with Public Health and Mental Health agencies, we implemented MedLine BR as a community based resource to link providers with services. Addressing available resources continues to be a need within our community.

| Over use of the Emergency Department | | 2014 Baseline | 2018 Goal | 2015 | 2016 | 2017 | 2018 |
|--------------------------------------|-------------------------------------|---------------|-----------|------|------|------|------|
| Population Health Measures | Preventable Hospital Stays (CHR) | 46 | 43 | 44 | 38 | 33 | 33 |
| | Uninsured (CHR) | 18% | 14% | 17% | 18% | 16% | 12% |
| | Primary Care Physicians Ratio (CHR) | 1156 | 1100 | 1143 | 1150 | 1110 | 1110 |

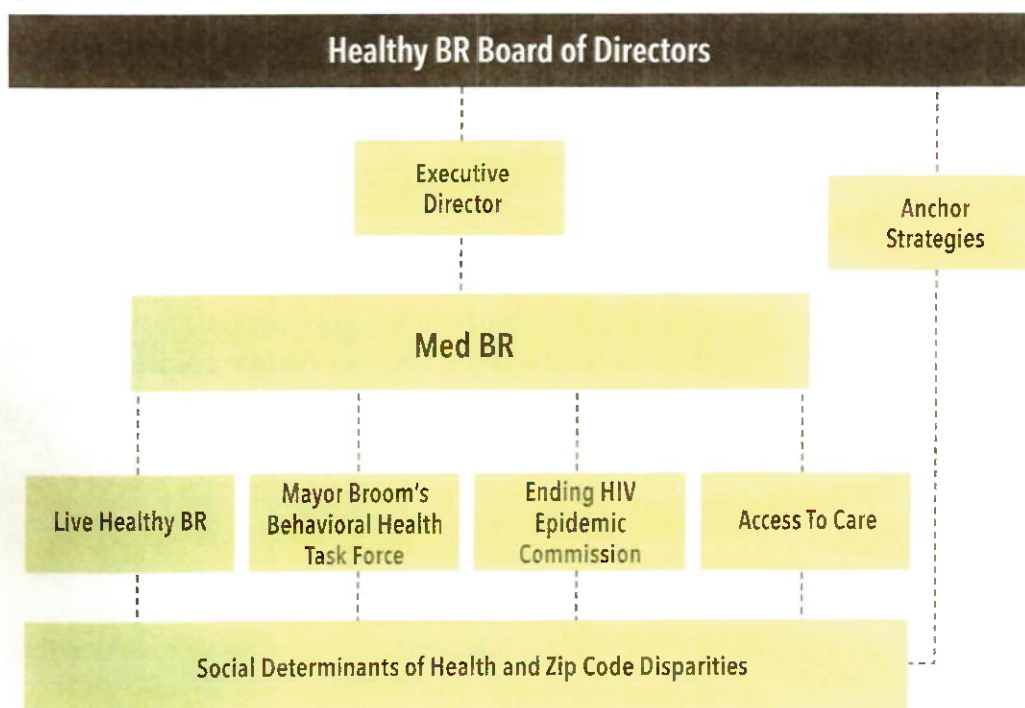
Implementation of the Right Care at the Right Place at the Right Time public education program served as a basis for all hospitals to participate in the creation of Urgent Care Centers, more Primary Care and Case Management/Patient Navigation programs to link patients with ongoing medical care. Significant improvement in decreasing ED utilization by repeating patients lowered Preventable Hospital Stays. Because of the accomplishment of these goals, redefining Access to Care for the 2018 CHNA was most appropriate with the focus on Social determinants of Health and Zip Disparities.

With the creation of a Joint CHNA in 2015, a Joint Community Health Implementation Plan (CHIP) was adopted by each hospital Board of Directors. Both the CHNA and CHIP are posted on The Mayor's Healthy City Initiative Website (HealthyBR.com). During quarterly MedBR meetings, hospitals update the CHIP plan by reporting progress made on the top 4 Prioritized Significant Community Needs.

Resources:

1. Source: U.S. Census Bureau, 2012-2016 American Community Survey 5-Year Estimates <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>
2. Source: Bureau of Labor Statistics <https://data.bls.gov/map/MapToolServlet>
3. Kaplan R, Spittel M, David D (Eds). Population Health: Behavioral and Social Science Insights. AHRQ Publication No. 15-0002. Rockville, MD: Agency for Healthcare Research and Quality and Office of Behavioral and Social Sciences Research, National Institutes of Health; July 2015.
4. Source: BR City Key <http://www.brcitykey.com/>
5. Source: National Healthcare Disparities Report 2011 U.S. Department of Health and Human Services <https://archive.ahrq.gov/research/findings/nhqrdr/nhqr11/chap9.html>
6. Source: 2017 State of Mental Health in America <http://www.mentalhealthamerica.net/issues/2017-state-mental-health-america-ranking-states>
7. Source: Cancer Facts & Figures 2017 American Cancer Society <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2017/cancer-facts-and-figures-2017.pdf>
8. Source: State Cancer Profiles reported by the CDC and National Cancer Institute <https://statecancerprofiles.cancer.gov/incidencrates/index.php?stateFIPS=22&cancer=001&race=00&sex=0&age=001&type=incd&sortVariableName=rate&sortOrder=default#results>
9. Source: Heart Disease and Stroke Statics for 2017 At-a-Glance https://healthmetrics.heart.org/wp-content/uploads/2017/06/Heart-Disease-and-Stroke-Statistics-2017-ucm_491265.pdf
10. Source: DHSP interactive Atlas County Report from the CDC <https://nccd.cdc.gov/DHSPAtlas/DetailedReports.aspx?AreaId=22033&ThemeSubClassId=34&filterId=9,2,3,4,7&filterOptions=1,1,1,1,1>
11. Source: State of Obesity Report <https://stateofobesity.org/states/la/>
12. Source: CDC Louisiana Diagnosed Diabetes Prevalence Data https://www.cdc.gov/diabetes/atlas/obesityrisk/dmprev_xls/Louisiana.xlsx
13. Source: CDC National Center for Health Statistics for the State of Louisiana <https://www.cdc.gov/nchs/pressroom/states/louisiana/louisiana.htm>
14. Source: Louisiana Department of Health Diabetes and Obesity Action Report May 22, 2107 <http://www.dhh.louisiana.gov/assets/docs/BayouHealth/ACT210RS2013522.pdf>
15. Source: East Baton Rouge Parish: Justice Center Study <http://www.brgov.com/press/Baton%20Rouge%20Justice%20Center%20Study%20-%20Final%20Report.pdf>
16. Source: Louisiana HIV, AIDS, and Early Syphilis Surveillance Quarterly Report September 30, 2017 http://www.dhh.louisiana.gov/assets/oph/HIVSTD/HIV_Syphilis_Quarterly_Reports/3rd_Quarter_2017_HIV_Syphilis_Report.pdf
17. Source: Louisiana 2016 Health Report Card <http://www.ldh.louisiana.gov/assets/oph/Center-PHI/2016HealthReportCard.pdf>
18. Source: East Baton Rouge Coroner's accidental OD statistics <http://ebrcoroner.com/news.aspx>
19. (1)Centers for Disease Control and Prevention. Web-based Injury Statistics Query and Reporting System (WISQARS) [Online]. (2015). National Center for Injury Prevention and Control, Centers for Disease Control and Prevention (producer). [Cited 2017 Apr 11].

APPENDIX A



MedBR Advisory Board: The MedBR Advisory Board is the internal medical group for HealthyBR. Leaders from each of the four working groups as well as representation from key partners serve on the MedBR Advisory Board. Additional membership includes representation from all local hospitals, FQHC's, multiple managed care plans and the State Office of Public Health. Any partner of HealthyBR is invited to participate in the MedBR Advisory Board. The key function of the MedBR Advisory Board is to assure alignment of community based strategies to address the four significant community health and implementation of the Community Health Implementation Plan (CHIP) to make Baton Rouge a healthier community.

Live Healthy BR: Live Healthy BR is a work group comprised of hospital community outreach providers, local non-profits, community based organizations, and community partners challenged with achieving Baton Rouge's health prevention goal. The work group meets monthly to address the following: eating well, being active, not smoking and the prevention of childhood obesity. Signature programs of Live Healthy BR are Fitness Rocks, Family Fit Day and a Diabetes Expo. They help create and track the Healthy Living Community Health Implementation Plan (CHIP).

STI/ HIV: Mayor Broome's Ending the HIV Epidemic Commission focuses on implementing the Population Health work of the HIV continuum of care by supporting the outcomes of the Region 2 HIV task force, the Ryan White Advisory Board and other key HIV stakeholders in the community. This commission was formed after Mayor Broome signed the Fast Track Cities Initiative in partnership with International Association of Providers of AIDS Care (IAPAC). The IAPAC commission will support the creation and tracking of the Sexually Transmitted Infection/ HIV Community Health Implementation Plan (CHIP). Utilizing a population health community based diagram that was created in partnership with the Public Health Foundation.

The workgroup consists of representation from the five local hospitals, the Region 2 Office of Public Health Medical Director, the Region 2 Coordinator of HIV, Director of Ryan White, multiple HIV care providers, community partners, and other clinicians. This group is responsible for the Annual HIV Summit.

Behavioral Health: Mayor Broome's Behavioral Health Task Force focuses on the coordination and collective support needed for organizations currently providing mental and behavioral services. The task force is also tasked with identifying gaps in services and providing recommendations to address the gaps. This group consists of hospital partners, community organizations and clinicians. They support

the ongoing work of the Bridge Center and Capital Area Human Services Districts Behavioral Health Collaborative. Additionally, they are partnering with the Bureau of Family Health/ Louisiana Department of Health on an Adverse Childhood Experiences (ACE) Initiative in East Baton Rouge Parish. The group creates and tracks the Behavioral Health Community Health Implementation Plan (CHIP).

Access to Care: This is one of two new efforts identified in the 2018 CHNA. The Access to Care Commission will focus on the structures and processes to create more equitable access to healthcare for all residents of East Baton Rouge Parish. This workgroup will also look at community wide initiatives for integrating behavioral health into the primary care model and expand the current HealthyBR efforts to promote right care, at the right place, at the right time. This commission will help create and track the Access to Care Community Health Implementation Plan (CHIP).

Anchor Strategies: This is the second of two new initiative identified in the 2018 CHNA. Anchor Strategies will be a function of the HealthyBR Board of Directors. Board leadership will be challenged to look at the concepts of local and inclusive hiring, purchasing and investments in the seven priority zip codes identified in this CHNA. The Board will work with David Zuckerman of the Democracy Collaborative to design and implement Anchor Strategies for Health Institutions. As the work of this initiative will remain a function of the HealthyBR Board of Directors, hospital and healthcare leadership is encouraged to engage their own internal HR, Purchasing/Procurement and investment teams in the implementation of this work.

Social Determinants of Health and Zip Code Disparities: Each of the working groups and the Board of Directors will focus on the Social Determinants of Health that affect each the priority areas as well as zip code disparities based on a Community Needs Index of 4.2 or higher.

APPENDIX B

List of National and Local data Sources

- American Journal of Public Health: Housing and Health: Time Again for Public Health Action
- Annie E. Casey Foundation 2017 Kids Count Data Book State Trends in Child well-Being
- Baton Rouge Area Foundation: BR City Stats 2017
- Baton Rouge Ryan White Part A Program: Integrated HIV prevention and Care Plan/ Statewide coordinated statement of need 2017-2021
- Center for Disease Control and Prevention:
 - 500 Cities
 - Louisiana HIV/AIDS Epidemic State Health Profile
- County Health Rankings
- Cradle Cincinnati: The economic impact of preterm birth
- East Baton Rouge Parish: Justice Center Study
- Economic Innovation Group: The 2107 Distressed Community Index
- Gallup: State of American Well-Being: The cost of diabetes in the US: Economic and Well –Being impact
- Health management Associates: Initiative to Decriminalize mental illness
- Heroes: HIV/AIDS in Metropolitan vs. Rural Louisiana
- Institute for Health Metrics and Evaluation (IHME) at the University of Washington: Country Report
- Louisiana Budget Project: State of Working Louisiana
- Louisiana Department of Health:
 - Coordinated System of Care Transparency Report
 - Creating a Blueprint for our Future: Louisiana State Health Assessment and Improvement Plan
 - Louisiana Health Care Report Card 2015
 - Louisiana HIV/AIDS Strategy for Prevention, Treatment and Care Services 2017-2021
 - Louisiana HIV, AIDS and Early Syphilis Surveillance Quarterly Report June 30, 2017
- National Low Income Housing Coalition: Out of Reach 2017: The High Cost of Housing
- Perryman Group: The Potential Economic and Fiscal Impacts of a Jail Diversion Program and Restoration Center for Mental Health and Related Disorders in Baton Rouge

- SAMHSA: Beyond Beds: The Vital Role of a Full Continuum of Psychiatric Care
- Trust for America's Health: The State of Obesity: Better Policies for a Healthier America 2017
- United Way: ALICE Report
- U.S. Bureau of Labor Statistics: Baton Rouge Area Economic Summary
- U.S. Dept. of Health and Human Services:
 - A call to action to create a 21st Century Public Health Infrastructure
 - Early Childhood risk and reach in Louisiana Winter 2016
- U.S. Dept. of Housing and Urban Development: Comprehensive Housing Market Analysis of Baton Rouge

APPENDIX C

List of Representative Organizations that Attended Baton Rouge Vision of Health 2021

- | | |
|--|--|
| 1. AARP ** | 32. Louisiana Center for Health Equity ** |
| 2. American Diabetes Association ** | 33. Louisiana Health Care Quality Forum |
| 3. American Heart Association ** | 34. Louisiana Primary Care Association ** |
| 4. Baton Rouge City Council ** | 35. Louisiana Public Health Institute ** |
| 5. Baton Rouge General Medical Center | 36. Louisiana Center for Nursing LSBN |
| 6. Baton Rouge Health District | 37. LSU |
| 7. BOCO Medical, LLC | 38. LSU student |
| 8. Capital Area Agency on Aging ** | 39. LSU Health |
| 9. Capital Area United Way ** | 40. March of Dimes Louisiana ** |
| 10. Capital Area Human Services District * | 41. Mary Bird Perkins Cancer Center ** |
| 11. CareSouth Medical and Dental ** | 42. Merck |
| 12. Center for Planning Excellence | 43. Mid-City Redevelopment Alliance ** |
| 13. City of Baton Rouge ** | 44. MLK Community Center ** |
| 14. City of Baton Rouge - Human Development and Services ** | 45. Neonatal Transport Team |
| 15. City of Baton Rouge, Office of Social Services ** | 46. Novo Nordisk |
| 16. Community Advocate | 47. Ochsner Baton Rouge Medical Center |
| 17. Crisis Intervention Center | 48. Our Lady Of the Lake Children's Hospital ** |
| 18. Director/Dream True Business Solutions | 49. Our Lady of the Lake Regional Medical Center |
| 19. Healthy BR ** | 50. Pennington Biomedical Research Center |
| 20. Higherpower/Varsity Sports | 51. Smoking Cessation Trust |
| 21. Humana | 52. South Burbank Crime Prevention and Development District ** |
| 22. Humana Health, Inc | 53. Southern University Agricultural Land-Grant Campus |
| 23. LA Action Coalition, Future of Nursing | 54. St. James Place ** |
| 24. LA Association of Health, Physical Education, Recreation and Dance | 55. Student visiting from Haiti ** |
| 25. LA Department of Health * | 56. Susan G. Komen Baton Rouge ** |
| 26. LA Dept. of Health -Office of Behavioral Health * | 57. The Baton Rouge Clinic, AMC |
| 27. LA Dept. of Health, Office of Primary Care and Rural Health * | 58. Veteran Affairs * |
| 28. LA Dept. of Health, Office of Public Health * | 59. Volunteer of America ** |
| 29. LA Emergency Response Network, LA Dept. of Health * | 60. Well-Ahead LA, LA Dept. of Health, Office of Public Health * |
| 30. Lane Regional Medical Center | 61. Woman's Hospital |
| 31. Lexlee's Kids ** | 62. YMCA of the Capital Area ** |

*Public Health Officials

** Representative of under resourced communities

