2018

Community Health Needs Assessment
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Assessing community health needs and developing the appropriate plans to address these needs are essential to improving and sustaining the health of our communities. To do so, we must understand our community, the needs identified, and the process for moving forward to improve the health of Assumption Parish. Both a primary and shared focus among health care organizations is responding to the health needs of our communities. More recently, we are encouraged to develop initiatives that incorporate multiple healthcare organizations to collaborate with available and upcoming resources to offer effective and positive impacts on the community. And more specifically, the concept of a Community Health Needs Assessment is now reinforced by the Patient Protection and Affordable Care Act, which contains new requirements for tax-exempt hospitals to conduct community health needs assessments and to adopt implementation strategies to meet the health needs identified through the assessments. The 2018 Community Health Needs Assessment was conducted to determine the needs of the Assumption Parish Community of 22,700 residents.

ABOUT ASSUMPTION COMMUNITY HOSPITAL

Assumption Community Hospital began operations in April of 1972 as a parish owned Hospital Service District facility to provide for the medical needs of the community. In December of 1996 the facility was purchased by Our Lady of the Lake Regional Medical Center of Baton Rouge, Louisiana as an extension of the Franciscan Missionaries of Our Lady Health System’s (FMOLHS) commitment to providing for those most in need. The majority of services provided by Assumption Community Hospital, a federally designated 15 bed Critical Access Hospital and its Provider Based Rural Health Clinic are available to Assumption Parish residents. As the only Hospital located in Assumption Parish, it was determined that the service area used for this assessment would be within the Assumption Parish boundaries.

Assumption Community Hospital and its provider based clinic Assumption Primary Care, are producing over 15,000 encounters with patients per year through the Emergency Department, outpatient services, inpatient care and those seen in the office. We provide important and needed services such as laboratory services, radiology imaging services, respiratory therapy services, and the vital provision of 24/7 emergency room services. The Provider Based Rural Health Clinic provides a significant amount of primary care services to the Indigent and Medicaid patient population of the parish. In 2018, Assumption Primary Care was re-launched. This primary care facility has always serviced the community but it was given a facelift, new hours of operation and expanded its services. Assumption Primary Care has partnered with The Allergy, Asthma & Sinus Center, L. Ben Gaudin, MD and Adrianne N. Edmundson, MD to provide allergy injections. Same day appointments are often available and staff all always available to assist patients by phone or as they enter the office. Other important community outreach programs provided by the Hospital and Rural Health Clinic include an annual Health Fair, periodic Smoking Cessation classes, periodic Diabetes Education, friend and family CPR classes offered at no charge and the “Get Fit Ba-You” food and nutritional educational series. We have partnered with the Head Start program of Assumption Parish and we help put on their annual health fair.

Through the commitment to our healing ministry and the values of our Catholic heritage, we continually strive to identify and meet the needs of the poor and underserved of our community. Our commitment to human dignity compels us to provide a common good.
WHO WAS INVOLVED IN THE ASSESSMENT

As the only Hospital located in Assumption Parish, there was no collaboration with any other Hospital Facility. Input from other Healthcare Providers and community participants with knowledge of the specific needs and existing resources of the community was obtained in the March 22nd, 2018 stakeholders meeting. Needs were identified through the collection of statistical data from the Healthy Communities Institute, and validated by the community input. The qualitative and quantitative data was used to develop the priorities identified and to determine if there were any information gaps. The committee felt the data was sufficient and that there were no information gaps identifiable during this process.

Our distinguished group of participants represented some of the best services and leadership that Assumption Parish has to offer. Parish data was presented and the groups discussed their ideas and thoughts as to the needs and direction that they felt the parish was headed. We were able to gain community specific input from the participants to identify the community’s challenges and to focus on the issues with the greatest potential for success while considering the limited resources available at present. Input was solicited from the community in general as well as specific groups. Input was solicited from or on behalf of school-aged children, the elderly, minorities, low-income children, medically-underserved, public health officials, rural health providers, and law enforcement. Community representatives met with Assumption Community Hospital staff in person for a forum discussion where the community health needs were identified and prioritized and resources potentially available to address those health needs were identified. In attendance were members of the Parish School Board, Assumption Council on Aging, Assumption Head Start, a retired air force veteran, minority community members, the sheriff’s office, Department of Health and Hospitals/Office of Public Health, and Assumption Rural Health Clinic. These representatives provided a variety of perspectives on the community’s health needs and interests. There were no sections of the community identified as needing representation who were unable to participate. Written comments regarding the previous CHNA and implementation strategy, which is posted online, could be submitted by contacting Administration at 985-369-3600 or email Letonia.Howard@fmo lhs.org, but to date no one in the community has done so.

<table>
<thead>
<tr>
<th>Attendees included</th>
<th>Affiliation</th>
<th>Population Represented</th>
</tr>
</thead>
<tbody>
<tr>
<td>Angele Authement</td>
<td>Assumption Parish Council on Aging</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Lauren Bordelon</td>
<td>Assumption Parish Library</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Brittany Briggs</td>
<td>Assumption Parish Council on Aging</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Damian Buggage</td>
<td>Assumption Parish Schools, Director of Middle School Instruction (All citizens)</td>
<td></td>
</tr>
<tr>
<td>Dianne Cheavious</td>
<td>Assumption Parish Head Start</td>
<td>(Low income)</td>
</tr>
<tr>
<td>Teddy Crochet</td>
<td>Acadian Ambulance Service</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Fr. Al Davidson</td>
<td>Clergy</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Rene Diaz</td>
<td>Napoleonville Area Citizen</td>
<td></td>
</tr>
<tr>
<td>Stephanie Domingue</td>
<td>Assumption Community Hospital, HIM Director</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Dr. Rachel Dugas</td>
<td>Assumption Parish Head Start Director</td>
<td>(Low Income)</td>
</tr>
<tr>
<td>Debra Gonzales</td>
<td>DHH/Office of Public Health Region III</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Fr. Matthew Graham</td>
<td>Clergy</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Dr. Eric Gravois</td>
<td>Family Practice Physician</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Christy Hockaday</td>
<td>CEO Assumption Community Hospital</td>
<td>(All citizens)</td>
</tr>
<tr>
<td>Robin Landry</td>
<td>LSU Ag Center</td>
<td></td>
</tr>
</tbody>
</table>
There were no contractors hired to assist in the production of Assumption’s CHNA.

COMMUNITY NEEDS AND DEMOGRAPHIC ANALYSIS

Assumption Parish is a very rural area with only one incorporated community of approximately 700 residents known as the Village of Napoleonville. The entire parish contains 22,700 residents. Other small communities located in the parish include, Labadieville, Paincourtville, Plattenville, Bertrandville, Belle Rose, Pierre Part and Bayou L’Ourse.

Assumption Community Hospital is the only hospital located in Assumption Parish. It is centrally located in the parish and serves a more restricted population of approximately 10,000 residents as other communities are located closer to larger urban healthcare facilities. The hospital does not define its community to exclude any medically underserved, low-income, or minority populations. In addition, Assumption Community Hospital includes in their community definition all patient populations without regard to whether (or how much) they or their insurers pay for the care received or whether they are eligible for assistance under the hospital facility’s financial assistance policy.

Assumption Parish is designated as a Health Professional Shortage Area (HPSA) and is challenged with the provision of healthcare providers as a ratio of population. Nearly 100% of Assumption Community Hospital’s patient admissions are individuals who reside in Assumption Parish. Healthcare resources in Assumption Parish are very limited, but include an FQHC and two other Rural Health Clinics as well as two private practice physician offices which serve a very small percentage of the underserved population. Racial and age demographics are included below.
### Assumption Louisiana

<table>
<thead>
<tr>
<th>Population by Race</th>
<th>Persons</th>
<th>% of Population</th>
<th>Persons</th>
<th>% of Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>15,209</td>
<td>67.11%</td>
<td>2,884,993</td>
<td>61.30%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>6,649</td>
<td>29.34%</td>
<td>1,516,472</td>
<td>32.22%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>115</td>
<td>0.51%</td>
<td>32,874</td>
<td>0.70%</td>
</tr>
<tr>
<td>Asian</td>
<td>88</td>
<td>0.39%</td>
<td>87,372</td>
<td>1.86%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>15</td>
<td>0.07%</td>
<td>2,579</td>
<td>0.05%</td>
</tr>
<tr>
<td>Other</td>
<td>313</td>
<td>1.38%</td>
<td>87,246</td>
<td>1.85%</td>
</tr>
<tr>
<td>2+ Races</td>
<td>273</td>
<td>1.20%</td>
<td>94,595</td>
<td>2.01%</td>
</tr>
</tbody>
</table>

### Population by Age Group

**Parish: Assumption**

- **0-4**: 6.98%
- **5-9**: 6.09%
- **10-14**: 6.02%
- **15-17**: 5.88%
- **18-20**: 5.75%
- **21-24**: 5.53%
- **25-34**: 5.50%
- **35-44**: 5.57%
- **45-54**: 5.57%
- **55-64**: 5.62%
- **65-74**: 4.83%
- **75-84**: 3.75%
- **85+**: 1.95%

**State: Louisiana**

- **0-4**: 6.98%
- **5-9**: 6.09%
- **10-14**: 6.02%
- **15-17**: 5.88%
- **18-20**: 5.75%
- **21-24**: 5.53%
- **25-34**: 5.50%
- **35-44**: 5.57%
- **45-54**: 5.57%
- **55-64**: 5.62%
- **65-74**: 4.83%
- **75-84**: 3.75%
- **85+**: 1.95%

Claritas, 2017. admin.fmolhs.thehcns.net
Assumption Parish is a community heavily dependent on agriculture (primarily sugar cane production) and has only a few large employers such as the Assumption Parish School system and Assumption Community Hospital. The median household income for the parish is $45,457 and 13.93% of families live below the poverty line. 29% of the Assumption Parish population over the age of 25 did not graduate high school. The majority of Assumption Parish speaks only English, but 13% speak Indo-European Languages.

ASSESSMENT TOOLS

Assumption Community Hospital utilized tools through the Healthy Cities Initiative (HCI) to obtain data on the health of the community. The HCI tools provide health and demographic data, as well as comparison reports assessing how the community compares to others within the state and country on a variety of health indicators.

In the HCI reports, for each indicator, counties are assigned a score based on its comparison to other communities, whether health targets have been met, and the trend of the indicator value over time. These comparison scores range from 0-3, where 0 indicates the best outcome and 3 the worst. Target values used include the nation-wide Healthy People 2020 goals as well as locally set goals. Healthy People 2020 goals are national objectives for improving the health of the nation set by the Department of Health and Human Services Healthy People Initiative.

For all value comparisons, the scoring depends on whether the county value is better or worse than the comparison value, as well as how close the county value is to the target value.

For ease of interpretation and analysis, indicator data on the Community Dashboard is visually represented as a green-yellow-red gauge showing how the community is faring against a distribution of counties in the state or the United States. A distribution is created by taking all county values within the state or nation, ordering them from low to high, and dividing them into three groups based on their order. Indicators with the poorest comparisons (red) scored high, whereas indicators with good comparisons (green) scored low.

HCI uses the Mann-Kendall statistical test for trend to assess whether the county value is increasing over time or decreasing over time and whether the trend is statistically significant. The trend comparison uses the four most recent comparable values and statistical significance is determined at the 90% level.
<table>
<thead>
<tr>
<th>Indicator</th>
<th>State</th>
<th>US</th>
<th>HP2020</th>
<th>Local</th>
<th>Trend</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>2.83</td>
</tr>
<tr>
<td>Diabetes: Medicare Population</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2.83</td>
</tr>
<tr>
<td>Hyperlipidemia: Medicare Population</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2.83</td>
</tr>
<tr>
<td>Hypertension: Medicare Population</td>
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<td>3</td>
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<td>3</td>
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<td>2.83</td>
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<td>Workers who Walk to Work</td>
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<td>3</td>
<td>3</td>
<td>3</td>
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<td>2.78</td>
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<tr>
<td>Age-Adjusted Death Rate due to Lung Cancer</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>2.61</td>
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<td>Households with Supplemental Security Income</td>
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<td>2.61</td>
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<tr>
<td>Solo Drivers with a Long Commute</td>
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<tr>
<td>Colorectal Cancer Incidence Rate</td>
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<td>Alcohol-Impaired Driving Deaths</td>
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<tr>
<td>Chronic Kidney Disease: Medicare Population</td>
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<td>3</td>
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<td>2.5</td>
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<tr>
<td>Lung and Bronchus Cancer Incidence Rate</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2.5</td>
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<tr>
<td>Social Associations</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2.5</td>
</tr>
<tr>
<td>Workers who Drive Alone to Work</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>3</td>
<td>1.5</td>
<td>2.5</td>
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<tr>
<td>Cancer: Medicare Population</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>1.5</td>
<td>2.44</td>
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<td>Students Eligible for the Free Lunch Program</td>
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<td>3</td>
<td>3</td>
<td>3</td>
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<td>2.44</td>
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<tr>
<td>Workers Commuting by Public Transportation</td>
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<td>3</td>
<td>3</td>
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<td>2.44</td>
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<tr>
<td>People 25+ with a Bachelor’s Degree or Higher</td>
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<td>3</td>
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<td>People 25+ with a High School Degree or Higher</td>
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<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2.39</td>
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<tr>
<td>Unemployed Workers in Civilian Labor Force</td>
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<td>3</td>
<td>3</td>
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<td>2.39</td>
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<td>Non-Marital Births</td>
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<td>3</td>
<td>3</td>
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<td>2.36</td>
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<tr>
<td>People 65+ Living Below Poverty Level</td>
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<td>3</td>
<td>3</td>
<td>3</td>
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<td>2.33</td>
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<tr>
<td>Adults 20+ with Diabetes</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>2.25</td>
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<td>Drinking Water Violations</td>
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<td>3</td>
<td>3</td>
<td>1.5</td>
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<tr>
<td>Non-Physician Primary Care Provider Rate</td>
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<td>1.5</td>
<td>1.5</td>
<td>2.25</td>
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<tr>
<td>Primary Care Provider Rate</td>
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<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>2.25</td>
</tr>
<tr>
<td>Age-Adjusted Death Rate due to Diabetes</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1</td>
</tr>
<tr>
<td>Age-Adjusted Death Rate due to Unintentional Injuries</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>1</td>
<td>1.5</td>
</tr>
<tr>
<td>Ischemic Heart Disease: Medicare Population</td>
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<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1</td>
<td>1.5</td>
</tr>
<tr>
<td>Indicator</td>
<td>County Distribution</td>
<td>Value</td>
<td>Target</td>
<td>Score</td>
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<tr>
<td>------------------------------------------------------------</td>
<td>---------------------</td>
<td>-------</td>
<td>--------</td>
<td>-------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean Travel Time to Work</td>
<td>State</td>
<td>US</td>
<td>State</td>
<td>US</td>
<td>HP2020</td>
<td>Local</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
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<tr>
<td>Infant Mortality Rate</td>
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<td>3</td>
<td>1.5</td>
<td>3</td>
<td>1.5</td>
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<tr>
<td>Stroke: Medicare Population</td>
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<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>3</td>
</tr>
<tr>
<td>Adults 20+ who are Sedentary</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
<td>1.5</td>
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<tr>
<td>Mental Health Provider Rate</td>
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<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>1</td>
</tr>
<tr>
<td>Atrial Fibrillation: Medicare Population</td>
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<td>2</td>
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<td>1</td>
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<tr>
<td>Babies with Low Birth Weight</td>
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<td>1.5</td>
<td>2</td>
<td>3</td>
<td>1.5</td>
<td>3</td>
</tr>
<tr>
<td>Teen Birth Rate: 15-19</td>
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<td>1.5</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
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<tr>
<td>Access to Exercise Opportunities</td>
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<td>2</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
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<tr>
<td>Children with Low Access to a Grocery Store</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
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<td>1.5</td>
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<tr>
<td>Households with No Car and Low Access to a Grocery Store</td>
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<td>3</td>
<td>1.5</td>
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<td>1.5</td>
<td>1.5</td>
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<tr>
<td>People 65+ with Low Access to a Grocery Store</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
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<tr>
<td>People with Low Access to a Grocery Store</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>People Living 200% Above Poverty Level</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
</tr>
<tr>
<td>Single-Parent Households</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
</tr>
<tr>
<td>Adults 20+ who are Obese</td>
<td>1</td>
<td>3</td>
<td>2</td>
<td>1.5</td>
<td>3</td>
<td>1.5</td>
</tr>
<tr>
<td>Dentist Rate</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>6</td>
</tr>
<tr>
<td>4th Grade Students Proficient in English/Language Arts</td>
<td>2</td>
<td>1.5</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Age-Adjusted Hospitalization Rate due to Uncontrolled Diabetes</td>
<td>2</td>
<td>1.5</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
<td>1.5</td>
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<tr>
<td>Frequent Mental Distress</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Rheumatoid Arthritis or Osteoarthritis: Medicare Population</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>3</td>
</tr>
<tr>
<td>Self-Reported General Health Assessment: Poor or Fair</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Age-Adjusted Death Rate due to Coronary Heart Disease</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Alzheimer's Disease or Dementia: Medicare Population</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>2</td>
<td>1.5</td>
<td>2</td>
</tr>
<tr>
<td>Child Food Insecurity Rate</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
</tr>
<tr>
<td>Children Living Below Poverty Level</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>1.5</td>
<td>2</td>
</tr>
</tbody>
</table>

Indicators are then categorized into topic areas by HCI and each topic area receives a score calculated as a weighted average of all included comparison scores. Indicators may be categorized in more than one topic area.
ASSUMPTION COMMUNITY TOP HEALTH PRIORITIES

At the community forum held at Assumption Community Center on March 22nd, 2018, participants had the opportunity to compare the data presented from Healthy Communities Institute (HCI) with their experiences in the community, and discussed resources available, opportunities to better use those resources, and continued community needs. The list of participants can be found under “Who Was Involved in the Assessment”. We were able to have a very enlightening discussion on the many challenges that face the citizens and leaders of Assumption Parish.

Debra Gonzales, RN DHH/Office of Public Health Region III
The representative from DHH/Office of Public Health Region III stressed the importance of effectively utilizing the W.I.C and other governmental programs even though their office hours had been reduced in the Napoleonville to 2 days a week. A local family practice physician noted that domestic abuse, drugs abuse, poor economy and lack of mental health resources in the parish are a detriment to the mental health of the people that visit his practice. There is a need for support groups from the area churches or private counselors in the parish to allow citizens to relieve themselves of the mental burdens. A local clergyman expressed the need for the parish to have more mental health support as well. He went on to state that it may be possible to obtain funding from the diocese to assist in developing a program to support a social worker in the parish. Also, the Assumption Parish Sheriff’s Office has a summer basketball and volleyball program that was being sponsored by local companies in the community. This program offers the children of the parish as place to safely participate in a healthy activity. The Sheriff’s goal is to
build a bond with the young people and foster a sense of community amongst their parents and guardians. The program also provides healthy snack to encourage a healthier lifestyle to these young people.

Present Day Attention and Future Focus

From the focus group input and the statistical data analyzed, a number of notable significant community health needs were identified and prioritized: transportation, heart disease, obesity, mental health, access to health services, diabetes, cancer, and women’s health. After hearing input from the participants at the community forum, Assumption Community Hospital decided that it would focus its time and effort on addressing the following significant community health needs:

- Mental health services
- Obesity
- Diabetes
- Access to Cancer Screening

Since the stakeholders meeting, the hospital has reached out to experts in the field of mental health services within the FMOL Health System. These are individuals that have studied, developed and implemented successful mental health programs in their areas and we are attempting to learn from their example to build our program. We are in the midst of formulating a plan that will include having a licensed social worker see patients out of the Assumption Primary Care office. We will continue our partnership with LSU Ag Center and Assumption Parish School to offer the “Get Fit Ba-You” educational series that was developed through this CHNA process and is being taught to all public school aged children in grades 5th – 8th. Additionally, LSU Ag Center and ACH collaborate to provide nutritional education to adults, label reading and comprehension, and cooking tips. This ties in to the walking path project that we constructed in front of the hospital to promote appropriate exercise to combat certain identified health issues such as diabetes, obesity and heart disease. We will continue our partnerships with Women’s Hospital and Mary Bird Perkins to provide access to the mobile cancer screening units. There is a lot of excitement surrounding Assumption Community Hospital as we make strides into the future. Stay tuned to all of our publications and social media as we announce advancements in services provide and community events.

Community Resources Available in Assumption Parish

Assumption Parish Council on Aging
American Legion Post 585
Assumption Area Chamber of Commerce, Inc
Assumption Association for Retarded Citizens (ARC)
Assumption Knights of Columbus Council 1099
Assumption Cultural Arts Guild, Inc.
Assumption Parish Community Action Advisory Brd.
Bayou L’Ours Volunteer Fire Department
Improved Benevolent & Protective Order of Elks
Knights of Columbus

Labadieville Volunteer Fire Department
Louisiana Rural Health Association
M W Prince Hall Grand Lodge Free and Accepted Masons
Merriman-Skidmore American Legion Post 585
Napoleonville Volunteer Fire Department
National Assoc. for the Advancement of Colored People
National Assoc. of University Women
Order of Eastern Star Prince Hall Affiliation of Louisiana
Paincourtville Volunteer Fire Department
Pierre Part/Belle River Volunteer Fire Department

Visit [http://Assumptionla.com](http://Assumptionla.com) for more details and contact information on these organizations.
Previous Community Health Needs Assessment

A Community Health Needs Assessment was conducted by Assumption Community Hospital in 2015. At that time, the priorities chosen were:

- Access to Primary Care
- Childhood Obesity
- Diabetes
- Health Education for Seniors

The results of the last 3 years can be viewed below. Although, our numbers may not reflect significant change we are confident that we are moving in the right direction. The dialogue and collaboration amongst the different groups and organizations is at an all-time high and this will only work to strengthen our message. We will continue to work with our community partners to further develop programs that will meet and hopefully exceed the wants and needs of our citizens. Our goal is to be the portal of entry for healthcare in our community.
**Assumption Community Hospital**

**Community Implementation Plan Health Benefit Dashboard**

**3 Fiscal Year Comparison**

### Diabetes

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>FY 16</th>
<th>FY 17</th>
<th>FY 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Education Provided. (Average learner hour provided.)</td>
<td>175</td>
<td>183</td>
<td>187</td>
<td>183</td>
</tr>
<tr>
<td>Percent of Diabetic Medicare Patients with HA1C screenings</td>
<td>90%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Childhood Obesity

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>FY 16</th>
<th>FY 17</th>
<th>FY 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Kidmeds seen</td>
<td>100</td>
<td>107</td>
<td>116</td>
<td>112</td>
</tr>
<tr>
<td>Number of patients screened for proper weight analysis</td>
<td>500</td>
<td>411</td>
<td>532</td>
<td>522</td>
</tr>
<tr>
<td>Number of patients identified with obesity (&gt;95%)</td>
<td>14%</td>
<td>(81)</td>
<td>90(17%)</td>
<td>99(19%)</td>
</tr>
<tr>
<td>Number of instances of education/handouts provided</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Louisiana State Average Obesity Rate (ages 10-17):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adult Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>FY 16</th>
<th>FY 17</th>
<th>FY 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Number of Geriatric related education events:</td>
<td>150</td>
<td>172</td>
<td>202</td>
<td>193</td>
</tr>
<tr>
<td>(Average learner hour provided) Council on Aging events/Community Health Fairs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Headstart/Age Education</td>
<td>25</td>
<td>32</td>
<td>20</td>
<td>23</td>
</tr>
<tr>
<td>Access to Screenings: Mammograms for Insured/Uninsured/Underinsured</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Patient Visits to the Mammogram coach (4 trips scheduled 20 tests/visit)</td>
<td>80</td>
<td>57</td>
<td>65</td>
<td>68</td>
</tr>
<tr>
<td>Number of KOMEN visits to Mammogram coach (Grants)</td>
<td>30</td>
<td>16</td>
<td>2</td>
<td>0</td>
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</tbody>
</table>

### Biochemistry

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target</th>
<th>FY 16</th>
<th>FY 17</th>
<th>FY 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Patient Visits to the Rural Health Clinic (Medicaid/Uninsured)</td>
<td>1500</td>
<td>1658</td>
<td>2023</td>
<td>2165</td>
</tr>
<tr>
<td>Number of patient visits to the Health Fairs (CF Industries, COA, ARC)</td>
<td>100</td>
<td>126</td>
<td>280</td>
<td>223</td>
</tr>
<tr>
<td>Establish a Primary Care Clinic in the Pierre Part community. Although, ACH in collaboration with the Lake Primary Care Physician Group was unable to fulfill the</td>
<td>2012-2014</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Color Legend:**

- Green = Above Target or within 5% of Target
- Yellow = 10-25% below Target
- Red = >25% Below intended Target

**Synopsis:** The CHNA Implementation Plan measures for all four categories identified within the assessment (Diabetes; Childhood Obesity; Adult Services; and Access to Primary Care for the Uninsured) with the exception of three indicators, either met or exceeded the established target goals.

**FEEDBACK**

Paper copies of this assessment are available for public inspection upon request and without charge at the hospital facility. Digital copies are available on our website, at [www.FMOLHS.org](http://www.FMOLHS.org), search Community Health Needs Assessment.

Comments and other feedback about this assessment can be provided to the hospital by contacting Administration at 985-369-3600 or email Letonia.Howard@fmolhs.org.
NEXT STEPS

Assumption Community Hospital will continue dialog with collaborators and other community members to develop an implementation plan for strategies and programs to address the significant community issues identified here. We will continue to develop our “Get Fit Ba-You” Program that is a collaboration between Assumption Community Hospital and the LSU AgCenter. This joint effort has combined to reach all on the 5-8 grade students in the Assumption Parish public school system over the past 2 years. It combines nutritional education along with food tastings in the physical education classes. A ¼ mile walking path has been constructed on hospital property to promote physical activity and overall wellness in the community. We are currently working on a plan to install exercise equipment around that walking path through a partnership with the Assumption Parish Police Jury.