



John C. Lincoln

Deer Valley Hospital

Community Health Needs Assessment

2012 - 2014

September 2012

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EXECUTIVE SUMMARY

Community service is the cornerstone of the John C. Lincoln Health Network, the owner and operator of John C. Lincoln Deer Valley Hospital (Deer Valley Hospital). The network began in 1927 as Desert Mission. Its goal was to address the health and social needs of struggling families in North Phoenix. With the vision and philanthropy of John Cromwell Lincoln, the network has expanded to a vertically integrated health care system dedicated to building healthy communities. Its core values include: **high-quality health care services focused on community benefit**. John C. Lincoln Health Network is known for anticipating community needs and finding new ways to meet them. Today, it provides local community access through its two hospitals and physician network, and it is actively involved with the vulnerable population and community renewal through its Desert Mission programs.

Deer Valley Hospital is the northern-most hospital in north-central Phoenix. It is a 204-bed facility that excels in emergency heart care, pediatric emergency medicine, orthopedics, general surgery and many other specialties. Deer Valley Hospital is the only hospital in Arizona to receive the Premier QUEST Award for high value health care based on “low mortality, low cost of care, and evidence-based care.” Deer Valley Hospital also has received the Arizona Pioneer Award for Quality.

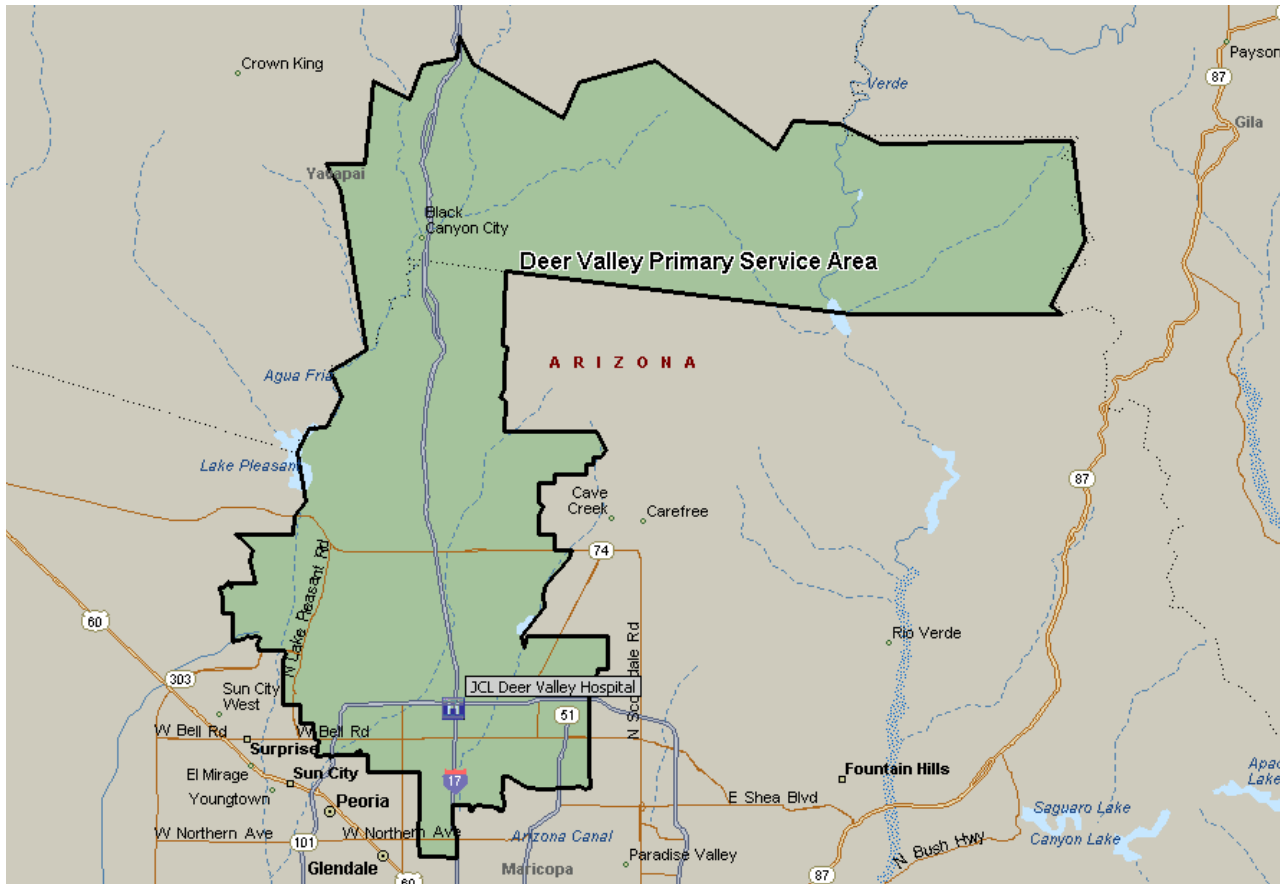
The local area surrounding Deer Valley Hospital has a population of more than 600,000. It is a predominantly White/Caucasian suburban community with young and growing families in north-central Maricopa County. During the last 10 years, the area has grown tremendously – more than 20 percent. While slowed by the 2008 recession, this area is expected to rebound faster than Central Phoenix because of available land and lower-cost housing.

This rapid growth, however, has caused a severe **shortage of primary care physicians** for Deer Valley Hospital’s population base. It is perhaps the greatest community health need in north-central Phoenix. Without adequate primary care, people are left with few choices – seek care outside of the local area or use the emergency medicine system, including first responders, hospital emergency departments and/or urgent care centers. Leaving the area often is not an option for vulnerable individuals, so their medical care becomes episodic, at best. John C. Lincoln Health Network has been actively involved in primary care physician recruitment and placement for the last two years, with a major emphasis on the Deer Valley Hospital market.

The other high-priority community health needs in the Deer Valley Hospital service area are: access to health care coverage, affordable health care, chronic disease management, prevention, behavioral health, dental health, personal care and transition between health care settings, family caregiver education and tools that support personal health responsibility. Deer Valley Hospital is, and will remain, actively involved in addressing these health needs of the communities it serves.

COMMUNITY DESCRIPTION

John C. Lincoln Deer Valley Hospital (Deer Valley Hospital) has been serving northern Phoenix in Maricopa County, Ariz., for 25 years, first as Phoenix General Hospital, then after merging with John C. Lincoln Hospital in 1997. It is a 204-bed hospital owned and operated by John C. Lincoln Health Network that is located on 27th Avenue just north of Union Hills Road, adjacent to the Loop 101 and Interstate 17. The hospital's primary service area includes 19 ZIP codes in northern Phoenix, Glendale and Peoria, Ariz., as shown in green on the map below. The service area also extends to the north along I-17, including the communities of New River and Black Canyon City.



| ZIP codes Included in John C. Lincoln Deer Valley Hospital Primary Service Area | | | | |
|---|-------|-------|-------|-------|
| 85022 | 85023 | 85024 | 85027 | 85029 |
| 85032 | 85050 | 85051 | 85053 | 85083 |
| 85085 | 85086 | 85087 | 85306 | 85308 |
| 85310 | 85324 | 85382 | 85383 | |



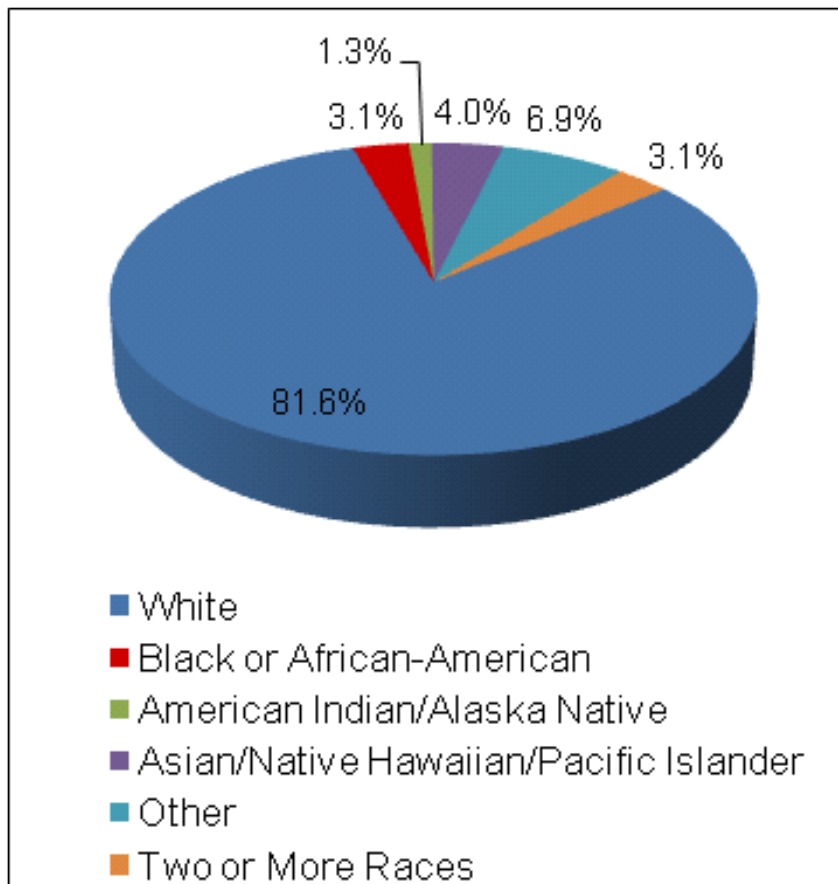
John C. Lincoln

Deer Valley Hospital

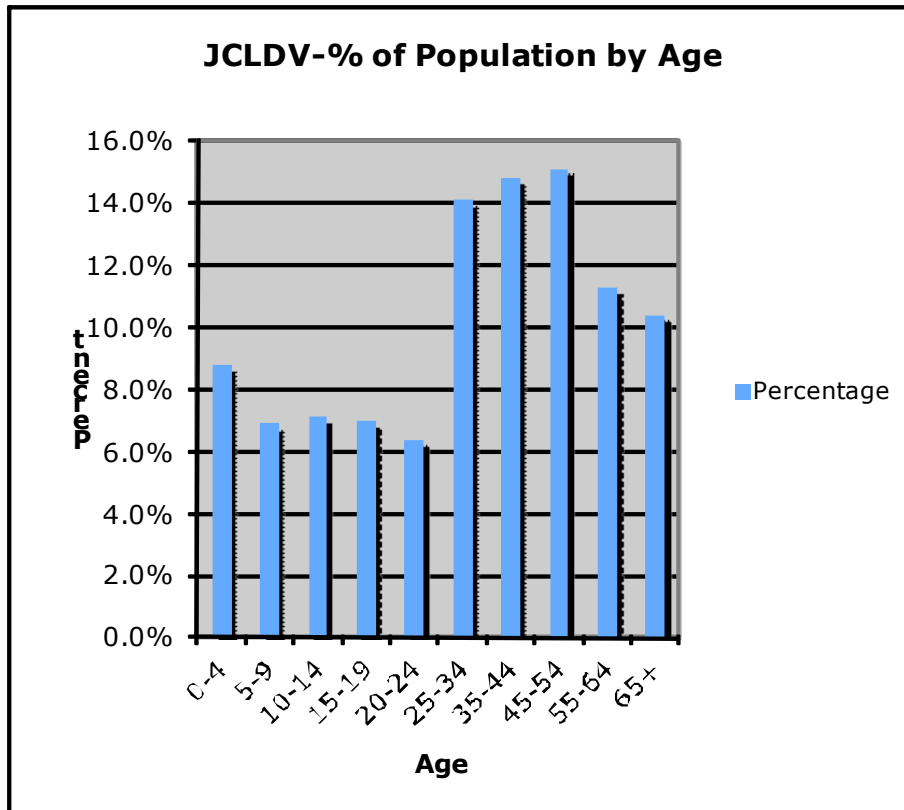
This geographic area represents 75 percent of the hospital's inpatient volume and is within 10 to 20 minutes' drive time of the facility. Black Canyon City is the northern-most community in the service area and is approximately a 30-minute drive to the hospital.

John C. Lincoln Deer Valley Hospital (Deer Valley Hospital) serves a high-growth suburban population in the northern Phoenix metropolitan area. During the last 10 years, the population in the hospital's service area has grown more than 20 percent. This growth rate has slowed significantly since the 2008 recession to approximately 1.1 percent per year, but experts believe it will rebound in 2015. Northern Phoenix is an attractive area for young families and is likely to see accelerated growth before central/southern Maricopa County.

More than 612,000 people live in the Deer Valley Hospital service area. It is dominated by Whites (82 percent), with all other races (African-American, American Indian/Native American, Asian Pacific, etc.) representing more than 18 percent of the population (see the pie chart below). Hispanics cross all races and are 18 percent of the population served by the hospital. Deer Valley's community is slightly different from Central Phoenix, which is 73 percent White/Caucasian and 29 percent Hispanic.



The age distribution in the Deer Valley Hospital vicinity is fairly similar to that found in Maricopa County and the state at large. The average age of residents in the service area is 30.5 years. Approximately 28 percent of the population is children and teens, and 22 percent is adults older than 55.



The median household income for the John C. Lincoln Deer Valley Hospital service area is \$47,000 and ranges between \$31,000 and \$85,000. Approximately 14 percent of the population earns less than \$25,000 per year. The lowest household income area is near the Deer Valley Airport and north of Moon Valley between Bell Road, west Grovers Avenue, 15th Avenue and 16th Street. Fifteen to 30 percent of the population near Deer Valley Hospital is at or below 200 percent of the federal poverty level, according to the UDS Mapper, a resource provided by the Health Resources and Services Administration (HRSA). Most of the low-income population is south of Deer Valley Hospital’s primary service area.

Manufacturing and tourism drive the local Phoenix economy. However, northern Phoenix near Deer Valley Hospital is home to several large corporations, including American Express, Discover Card, Honeywell Aerospace and PetSmart. This area also is starting to attract biotech, educational services, health care and solar-energy businesses to the area, which is expected to improve the median household income during the next several years.

ASSESSMENT PROCESS

The John C. Lincoln Health Network (JCLHN) Board of Directors and John C. Lincoln senior management have overseen the Community Health Needs Assessment process and development for John C. Lincoln Deer Valley Hospital. The Network Planning Council, consisting of senior executives, has reviewed local data, health-status indicators and interview findings about community health priorities and potential solutions. These data were analyzed based on the health care needs identified in the assessment and the health care entities in the Phoenix market. The board also has reviewed the health care needs and implementation strategy in relation to JCLHN mission, strategies and policies.

Deer Valley Hospital used a variety of different sources to understand the market and community needs, including national, state and local benchmarks. It was a multipronged approach based on objective and subjective data that gathered information about:

- Population growth and demographics – race, age, gender, income, educational attainment, primary language, public assistance and disability status.
- Health care facilities and resources – licensed medical facilities, number of primary care physicians and registered nurses.
- Hospital utilization statistics – emergency services, hospital inpatients.
- Health insurance coverage.
- Injuries by major category (falls, for example).
- Death statistics by disease.
- Primary and chronic disease statistics.
- Behavioral health use.
- Adult health risk factors.
- Birth rates.

The data for Deer Valley Hospital’s service area were provided by the Center for Health Information Research (CHIR) at Arizona State University (ASU) in February 2012. Some of the data sources used were:

- Arizona Department of Health Services, Bureau of Public Health Statistics, 2011.
- Arizona Medical Board, 2011.
- Arizona Board of Osteopathic Examiners, 2011.
- Arizona Board of Nursing, 2011.
- Arizona Cancer Registry, 2011.
- Arizona Health Status and Vital Statistics, 2010.
- Behavioral Risk Factor Surveillance System, 2011.
- Centers for Disease Control and Prevention, 2009 and 2010.
- Youth Risk Behavior Surveillance System, 2011.
- U.S. Census Bureau, 2010 American Community Survey.
- U.S. Census, 2010.



NGH Consulting LLC, a health care consulting firm based in Phoenix, analyzed the data provided by CHIR/ASU in conjunction with John C. Lincoln Health Network’s planning team.

Local interviews and surveys with organizations and individuals involved in the following areas were used to gain additional information and insight:

| | |
|---------------------------|--|
| ▪ Public Health | ▪ First Responder Groups: Police and Fire |
| ▪ Primary Care | ▪ Community Health Centers |
| ▪ Behavioral Health | ▪ Subacute Care |
| ▪ School Systems | ▪ Higher Education |
| ▪ Religious Organizations | ▪ Local Charities |
| ▪ Advocacy Groups | ▪ Local Government |
| ▪ Employers | ▪ John C. Lincoln Health Network Leadership Team |

(See Appendix A for a list of organizations.)

The goal of the quantitative data analysis and qualitative interviews was to understand and quantify, where possible, the community health needs in Deer Valley Hospital’s primary service area. The needs were prioritized based on discussions with public health representatives and others serving the community (see table above), and were tested and modified based on a thorough review of population demographics, Federally Qualified Health Centers (FQHC) data and health care utilization.

Following this analysis, the Network Planning Council met to discuss and prioritize the community health needs in the primary service area in light of other health resources, Deer Valley Hospital’s mission and its role in meeting community health needs. The end result was an implementation strategy that defines Deer Valley Hospital’s role in community health and specific action steps for the next three years. The following table shows the steps used in the development of the Community Health Needs Assessment (CHNA) for John C. Lincoln Deer Valley Hospital, including key dates.

| Key Task | Time Frame |
|---|----------------------|
| CHNA process review by senior management and board of directors | December 2011 |
| Data query and report from Arizona State University Center for Health Information & Research HealthQuery repository | January - March 2012 |
| Interviews with community health resources | January - March 2012 |
| Implementation strategy development | March - August 2012 |
| Review and approval by board | Fall 2012 |
| Provide for public access on hospital website | Fall 2012 |

COMMUNITY HEALTH PRIORITIES

The data and qualitative interviews have revealed a number of health care priorities for the community surrounding John C. Lincoln Deer Valley Hospital. The following narrative lists the priorities for this service area in descending order of importance as identified through the data analysis and interviews.

1. Access to Primary Care

A total of 33 licensed medical facilities are in Deer Valley Hospital's primary service area, including:

- Nine dialysis centers.
- Two Federally Qualified Health Centers.
- Eight hospice facilities.
- Four hospitals.
- Two rehabilitation centers.
- Eight senior care centers.

The ***biggest concern for this market, however, is the lack of primary care physicians for the population base***. Only 98 primary care physicians serve 100,000 people in Deer Valley Hospital's service area compared to 113 per 100,000 in Maricopa County and 105 per 100,000 in the state. This situation is more serious than it appears because the state average is 15 percent below the average for the United States. Access to primary care is critical for the prevention and management of chronic diseases. The lack of resources in Deer Valley Hospital's service area may result in:

- Overuse of emergency services.
- Episodic care.
- Minimal support/management across the care continuum, especially in the area of prevention and management of chronic diseases.

According to local paramedics and other first responders, the vast majority of their calls are related to diseases and conditions that could have been prevented. Statistics for the Deer Valley Hospital Emergency Department show that 45 percent of the visits are related to injuries, poisonings and ill-defined conditions.

Approximately 32 percent of all nonfatal injuries treated at Deer Valley Hospital are caused by falls. Children younger than 5 account for almost 20 percent of these falls. Deer Valley Hospital receives a much higher percentage of children with nonfatal injuries than other service-area hospitals – nearly twice as much – primarily because of Mendy's Place, a children's emergency center staffed 24/7 with pediatric-trained physicians and support staff, including child life specialists.



John C. Lincoln Deer Valley Hospital is working on strategies to move primary care out of the emergency department. Hospital leaders are developing immediate care centers and are rapidly recruiting primary care physicians as part of an employed physician strategy. To date, John C. Lincoln has 20 primary care sites throughout northern Phoenix. The health network also is implementing accredited medical homes, a Medicare accountable care organization (ACO), and on-site nursing home primary care.

Other primary care resources available to the community include private practitioners and the Federally Qualified Health Centers (FQHC) and health center look-alikes serving the area. Adelante HealthCare is the dominant FQHC near Deer Valley Hospital followed by Mountain Park Health Center. Others in the area include two facilities owned by Maricopa Integrated Health Services (Glendale Family Care Center and Sunnyslope Family Care Center), Native Health West and John C. Lincoln's Desert Mission Community Health Center. These organizations focus on the low-income population and offer services on a sliding-fee schedule. Interestingly, in 2010, the FQHCs served less than 20 percent of the low-income population per UDS Mapper, the Uniform Data System provided by the Health Resources and Services Administration (HRSA).

Approximately 53,000 low-income people in Deer Valley Hospital's local community are not managed by a FQHC, per the UDS Mapper. This fact raises questions about whether enough FQHCs are located appropriately to serve the population and whether people are adequately informed. John C. Lincoln Health Network is considering these questions and evaluating the best alternatives to reach those in need.

2. Health Care Coverage

According to benchmarks provided by Healthy People 2020, an initiative of the Department of Health and Human Services, ***the greatest health need facing Maricopa County is access to health insurance coverage***. The number of adults and children in the county who do not have health insurance is below the national average for adults and children with health insurance. Arizona was significantly affected by the 2008 recession, causing many people to lose their employer-based health insurance. In addition, changes to the state's Medicaid program, the Arizona Health Care Cost Containment System (AHCCCS), displaced many individuals, especially childless adults. According to the Arizona Hospital and Healthcare Association, 83,577 fewer individuals qualified for AHCCCS in June 2011 than the prior year.

As fewer adults possess health insurance coverage or fail to qualify for AHCCCS, hospitals will experience a dramatic increase in uncompensated care. John C. Lincoln Deer Valley Hospital offers financial assistance to self-pay patients along with an array of payment plans. The Desert Mission Community Health Center owned by John C. Lincoln Health Network on Fifth Street between Dunlap Avenue and east Hatcher Road is another resource for the Deer Valley Hospital community. It provides primary health care to low-income families who have no health insurance.

3. Affordable Health Care

The Arizona Hospital and Healthcare Association has estimated that AHCCCS pays approximately 67 percent of the actual cost associated with AHCCCS patients. The **lack of adequate health insurance coverage** significantly strains the existing health care providers, especially smaller organizations. Locally, some health care providers are beginning to discuss the viability of a foundation dedicated to uncompensated care. Currently, Keogh Health Connection and John C. Lincoln Desert Mission help underserved individuals and their families enroll in and access health care and nutrition programs in Deer Valley Hospital's service area.

John C. Lincoln Health Network, through Desert Mission, is in the process of evaluating whether it should pursue FQHC grant funding for its Community Health Center to expand its reach and serve more of the vulnerable population in North Phoenix. Desert Mission's services go well beyond health care, however, and include:

- Lincoln Learning Center – a preschool and child care program accredited by the National Association for the Education of Young Children offering extended hours for children 6 weeks through 12 years.
- Children's Dental Clinic – a low-cost dental care clinic for uninsured children.
- Marley House Behavioral Health Clinic – an organization dedicated to stabilizing families in crisis and assisting them in becoming self-sufficient.
- Desert Mission Food Bank, which provides food for individuals and families.
- Desert Mission Neighborhood Renewal, which revitalizes North Phoenix communities by developing housing and businesses.
- Adult Day Health Care program provides a safe environment where seniors can be managed while family caregivers are at work or away from the home – it offers activities, door-to-door transportation, social services, counseling and personal care as needed.

4. Chronic Disease Management

Approximately 52 percent of the deaths in John C. Lincoln Deer Valley Hospital's service area are related to different cancers and heart disease. In fact, the Healthy People 2020 benchmark initiative shows heart disease as one of the major areas of concern for Maricopa County, with deaths per 100,000 outpacing the average for the state.

The percentage of people categorized as obese in our society is at an all-time high. According to the Centers for Disease Control and Prevention, approximately 24 percent of Arizona's adults are obese. Because it is the largest population center in the state, Maricopa County significantly impacts Arizona's obesity rate. Obesity is perhaps the greatest risk factor for chronic diseases because it can lead to diabetes, heart disease, orthopedic issues and some cancers.

Another health priority for Deer Valley Hospital's community is ***chronic disease management***. Although disease management has been incorporated into some health plans and FQHCs, historically, most of it has been left to the individual and his/her family practitioner. The aging of the population and America's culture of poor nutrition and lack of exercise are creating a chronic disease epidemic. Every person interviewed for this assessment cited chronic disease management as a critical health issue for Deer Valley Hospital's service area.

A major strategy for John C. Lincoln Health Network is primary care practices designed using the medical home concept. The organization is dedicated to managing the entire patient to integrate and coordinate care across the continuum. John C. Lincoln's goal is to have all primary care practices certified as medical home providers by mid-2013. In addition, the organization has been awarded a contract by CMS (Centers for Medicare and Medicaid Services) for an accountable care organization (ACO). Its purpose is to improve the health care quality and reduce the costs of caring for Medicare recipients in its service area.

5. Prevention

Chronic diseases disproportionately affect the low-income population and the elderly. Primary care focused on ***prevention*** and medical fitness will be key to changing this trend. In this regard, John C. Lincoln is incorporating proactive care management into routine primary care. The goal is to prevent chronic disease for as long as possible.

Breast cancer has been a major focus for John C. Lincoln. Its Breast Health and Research Center on the Deer Valley Hospital campus has received funding from the Centers for Disease Control and Prevention to develop and support educational awareness for young breast cancer survivors. This program educates young women throughout Arizona on the risks of breast cancer, the importance of breast self-exams, resources for treatment, genetic factors and support groups. Free mammograms, funded through grants, are available to the low-income population. A combined community initiative involving the media, Fry's Foods, Susan G. Komen for the Cure and John C. Lincoln Health Network reminds women to perform their monthly self-exams.

Regarding obesity, John C. Lincoln's Desert Mission is working with children to research its root causes. Nutrition is a major component of this study. Desert Mission's Food Bank provides snack packs to low-income children in school, and its chef teaches families how to make nutritious low-cost meals.

6. Integrate Behavioral Health with Primary Care

Mental health and substance abuse are concerns as well. Today, mental health services are not part of routine health care. Based on discussions with local mental health care providers and Title I schools, the need to ***integrate mental health with primary care*** is important because physical health often impacts an individual's behavior and mental health status.

Locally, TERROS, a community-based behavioral health organization, has been awarded funding from Magellan Health Services of Arizona to develop an innovative service model that integrates behavioral health, primary care and wellness services. The project's goal is to improve the availability of integrated care, effective treatment, and the health condition of individuals and families. TERROS staff members are in the initial stages of contacting traditional health care providers for partnership opportunities. John C. Lincoln is working with the TERROS telehealth program in the emergency room to provide effective treatment and referrals for patients with mental health concerns.

Behavioral health services also are available to Deer Valley's residents through Marley House Behavioral Health Clinic. Marley House is owned and operated by Desert Mission, an affiliate of John C. Lincoln Health Network. It provides behavioral health and related services, including school-based prevention programs to stabilize families and individuals in crisis. As a contracted provider with Magellan Health Services, Marley House offers general mental health services along with enrollment assistance in public health coverage, cash assistance and food stamp programs. It has been recognized by Magellan Health Services as the model for integrated care.

7. Dental Health

Another concern is dental health. In fact, every interviewee ***cited access to affordable dental care as a local health care gap***. Dental health, unfortunately, is not viewed as traditional health care. AHCCCS only covers dental screenings and treatment for children younger than 21; dental care for adults is provided only if it is related to the treatment of a medical condition such as acute pain, infection or fracture. Thus, many people often neglect dental health. Poor oral hygiene can lead to gum disease, which can cause coronary artery disease, gastrointestinal disease and some cancers.

According to the Arizona Department of Health Services, Arizonans have a higher rate of oral disease than the national average. Both children and seniors are part of the growing number of underserved. More than 30 percent of Arizona children have never had a dental checkup, and 42 percent of seniors suffer from bleeding gums. From 40 to 65 percent of children between the ages of 6 and 13 have untreated tooth decay; the national average is 31 percent.

Only a handful of dental programs serve the low-income population in Deer Valley Hospital's service area: Adelante HealthCare, Midwestern University's Dental Institute and the Children's Dental Clinic managed by John C. Lincoln Desert Mission. The Children's Dental Clinic provides

access to comprehensive dental care for patients between the ages of 4 and 20 with limited financial resources. It is staffed by highly trained volunteer and paid dentists. Because of the severe need, John C. Lincoln Deer Valley Hospital, through this Desert Mission program, will continue to focus on children's dentistry.

8. Personal Care and Transitional Support following Hospital Stay

With a growing aging population, Phoenix is one of the areas where ***personal care or transitional care is necessary following hospitalization***. Good nutrition, continued rehabilitation and medication management are critical for many elderly patients to maintain and improve their health status after discharge. Without it, many of these patients would need to be readmitted to the hospital. These services are rarely covered by insurance, however, making it difficult for those with limited means to secure them.

John C. Lincoln Health Network is one of only a few organizations to offer low-cost support for the elderly through its Adult Day Health Care program. It is a safe environment where seniors can be managed while family caregivers are at work or away from the home. Adult Day Health Care offers activities, door-to-door transportation, social services, counseling and personal care as needed.

In addition, John C. Lincoln has partnered with the Area Agency on Aging, Region One, in a federal Community Care Transitions Program (CCTP) authorized by the Affordable Care Act to save taxpayer dollars by reducing avoidable readmissions because of nonmedical issues. A patient transition coach from the Area Agency on Aging will work closely with case managers from John C. Lincoln Deer Valley Hospital to identify Medicare fee-for-service inpatients who have been treated for heart failure, acute myocardial infarctions, pneumonia or other conditions that put them at risk for readmission. The transition coach will meet with the patient at home within 48 hours of discharge to check medications, facilitate follow-up physician appointments, help the patient develop a unified personal health record, and develop or review responses to "red flags" related to the patient's disease that could trigger readmissions. A second visit by the coach will occur within seven days of the patient's discharge to evaluate the patient following the first visit, assess social service needs, conduct a home safety check and screen the patient for depression. The coach also will follow up weekly by phone 30 days after discharge.

9. Family Caregiver Education

Family caregiver education also is important for loved ones who can't live alone because of debilitating medical conditions or disabilities. Subacute care providers cited this concern as a health care gap that often causes unnecessary emergency room visits or hospitalizations. Only a few caregiver training resources are available to the public in Phoenix, including the Foundation for Senior Living and the Family Caregiver Support Program at the Arizona Department of Economic Security.

10. Tools to Support Personal Responsibility

Lastly and perhaps most importantly, are ***tools for improving personal health responsibility***. Maintaining personal health doesn't always require physician involvement or the emergency room. Given the limited number of physicians and other clinical staff, information technology is becoming an attractive option. Although the Internet is a great tool, it often can be difficult and misleading when used to research health-related symptoms. Patients are seeking trusted medical information. To that end, John C. Lincoln will implement JCL Connect - My Chart over the next two years, which will allow all John C. Lincoln patients to access their own health care information online.

Navigator health coaches also will be available through the Medicare ACO plan. The goal is to support wellness by helping patients adopt healthier behaviors in an effort to manage chronic disease. Health coaches work with patients in person and over the phone to set and achieve health-related goals through community-based programs and medical services as necessary. In effect, the health coach teaches the individual how and when to use the health care system.

IMPLEMENTATION STRATEGY FOR ADDRESSING COMMUNITY HEALTH NEEDS 2012 - 2014

| Identified Community Health Need in John C. Lincoln Deer Valley (JCLDV) Primary Service Area | JCL Current Activities | Perceived Gap (per Interviews and Data) | JCLDV's Action Plans to Meet the Identified Health Need 2012 - 2014 |
|--|--|---|--|
| 1. Access to Primary Care | <ul style="list-style-type: none"> ▪ Physician recruitment ▪ Medical home development ▪ Medicare ACO ▪ Immediate care development ▪ Epic IT tools | <ul style="list-style-type: none"> ▪ JCLDV's PSA has an extreme shortage of primary care MDs per 100,000 compared to the county – 98 vs. 113 | <ul style="list-style-type: none"> ▪ Continue to implement primary care physician recruitment plan ▪ Expand immediate care strategy ▪ Continue medical home development |
| 2. Health Care Coverage | <ul style="list-style-type: none"> ▪ Financial assistance options ▪ Cash discounts ▪ AHCCCS eligibility assistance | <ul style="list-style-type: none"> ▪ Population with health insurance in Maricopa County is below national averages ▪ AHCCCS dropped 83,577 members because of eligibility changes ▪ One in three Arizonans is uninsured ▪ JCLDV has 23 percent of the uninsured inpatient market | <ul style="list-style-type: none"> ▪ Complete assessment for transitioning the Community Health Center to an FQHC; implement if indicated ▪ Implement accountable care organization ▪ Continue health screening events, such as stroke and cardiac ▪ Absorb AHCCCS shortfall and unreimbursed costs and continue financial assistance policies, including providing charity care to qualifying patients and self-pay discounts |

| Identified Community Health Need in John C. Lincoln Deer Valley (JCLDV) Primary Service Area | JCL Current Activities | Perceived Gap (per Interviews and Data) | JCLDV's Action Plans to Meet the Identified Health Need 2012 - 2014 |
|--|---|--|--|
| 3. Affordable Health Care | <ul style="list-style-type: none"> ▪ Desert Mission's programs ▪ Community Health Center ▪ Adult Day Health Care ▪ Evaluating FQHC feasibility | <ul style="list-style-type: none"> ▪ FQHCs serve less than 20 percent of the low-income population in Central Phoenix | <ul style="list-style-type: none"> ▪ Continue to support Desert Mission's initiatives ▪ Continue to encourage and expand the 2012 level of involvement of JCLHN leadership and staff in a variety of local organizations striving to address the health needs of the community |
| 4. Chronic Disease Management | <ul style="list-style-type: none"> ▪ Breast Health and Research Center clinical trials and support groups and Young Survivors programs ▪ Medical home development ▪ Medicare ACO | <ul style="list-style-type: none"> ▪ 52 percent of PSA deaths are related to cancer and heart disease ▪ Number of heart disease deaths per 100,000 in Maricopa County is higher than the state average ▪ All interviewees cited chronic disease management as a major community health need | <ul style="list-style-type: none"> ▪ Implement medical home concept and Medicare ACO |

| Identified Community Health Need in John C. Lincoln Deer Valley (JCLDV) Primary Service Area | JCL Current Activities | Perceived Gap (per Interviews and Data) | JCLDV's Action Plans to Meet the Identified Health Need 2012 - 2014 |
|--|--|--|---|
| 5. Prevention | <ul style="list-style-type: none"> ▪ Medical Home development ▪ Primary care expansion ▪ JCL Breast Health and Research Center initiatives provide mammograms for patients needing financial assistance ▪ HealthBeat newsletter ▪ Educational services ▪ Support groups ▪ Epic IT tools | <ul style="list-style-type: none"> ▪ Prevention is not covered by AHCCCS ▪ Half of ED visits are preventable | <ul style="list-style-type: none"> ▪ Incorporate prevention into routine primary care ▪ Implement medical home and Medicare ACO ▪ Continue primary care physician recruitment ▪ Implement primary care navigator health coaches |
| 6. Integrate Behavioral Health with Primary Care | <ul style="list-style-type: none"> ▪ Desert Mission offers the Marley House Behavioral Health Clinic | <ul style="list-style-type: none"> ▪ Substance abuse and mental health is cited as a gap by all interviewees | <ul style="list-style-type: none"> ▪ Explore further opportunities to partner with TERROS ▪ Maintain Marley House Behavioral Health Clinic |
| 7. Dental Health | <ul style="list-style-type: none"> ▪ Desert Mission Children's Dental Clinic | <ul style="list-style-type: none"> ▪ Cited by every interviewee as a major community health need | <ul style="list-style-type: none"> ▪ Maintain the Children's Dental Clinic |

| Identified Community Health Need in John C. Lincoln Deer Valley (JCLDV) Primary Service Area | JCL Current Activities | Perceived Gap (per Interviews and Data) | JCLDV's Action Plans to Meet the Identified Health Need 2012 - 2014 |
|--|---|--|--|
| 8. Personal Care and Transitional Support following Hospital Stay | <ul style="list-style-type: none"> ▪ John C. Lincoln Health Network Adult Day Health Care Program ▪ Case management in conjunction with Area Agency on Aging ▪ Breast Health and Research Center (BHRC) support groups ▪ Discharge planning | <ul style="list-style-type: none"> ▪ Subacute providers cited transitional support as a need for seniors following hospitalization | <ul style="list-style-type: none"> ▪ Continue Adult Day Health Care program ▪ Continue case management program ▪ Continue BHRC support groups ▪ Expand partnerships with local nursing homes |
| 9. Family Caregiver Education | <ul style="list-style-type: none"> ▪ Medical home development ▪ Discharge planning | <ul style="list-style-type: none"> ▪ Cited by subacute providers as a community health need to support seniors at home | <ul style="list-style-type: none"> ▪ Develop medical home model; include family involvement component |
| 10. Tools to Support Personal Responsibility | <ul style="list-style-type: none"> ▪ Epic electronic medical record (JCL Connect) personal health module, My Chart ▪ HealthBeat newsletter ▪ Website: JCL.com | <ul style="list-style-type: none"> ▪ Lack of personal responsibility for health is viewed as a significant community health need by most interviewees | <ul style="list-style-type: none"> ▪ Implement JCL Connect electronic health record and My Chart personal health record |

Approved by John C. Lincoln Health Network Board of Directors

September 6, 2012

APPENDIX A
Interview List

John C. Lincoln Deer Valley Hospital gratefully acknowledges the time and input of the following individuals in the development of the hospital's Community Health Needs Assessment. Their feedback was used along with quantitative data to develop the health needs prioritization for the hospital's service area. The Internal Revenue Service requires that the name, title and expertise of each person be listed in the final report. The prioritization of the needs and the implementation strategy for the hospital listed in this report are the sole responsibilities of the hospital.

| Organization | Name and Title | Area of Expertise |
|--|---|--|
| Anthem Community Council | Dixon Richardson, human resources coordinator | Civic organizations and community services in northern Phoenix |
| Arizona Association of Community Health Centers | John McDonald, CEO | Federally Qualified Health Centers and public health |
| Arizona Department of Health Services | Zipatly Mendoza, office chief for Arizona Health Disparities Center | Community partnerships to minimize health disparities |
| Arizona Health Care Cost Containment Center (AHCCCS) | Kari Price, assistant director of health care management | Medicaid population and medical management |
| Arizona Home Care | Vickie Erickson, RN, president of AZ Association of Home Care Board | Home care services and organizations |
| Calvary Community Church | Mark Martin, senior pastor | Community development |
| Children's Action Alliance | Dana Wolfe Naimark, president | Children's health and welfare needs |
| City of Glendale Fire Department | Patty Frey, deputy fire chief | First responder – emergency medicine |
| Communities in Schools | Lloyd Hopkins, regional director greater Phoenix | Social services and academic resources needed to support educational progression |
| Deer Valley Family Practice | Wendall Phillips, DO | Family medicine and disease management |
| Desert Mission | Cindy Hallman, executive director | Community service programs focused on families |
| First Things First | Tracey Craig, senior director Phoenix and Yavapai region | Early childhood development and health care needs |

| Organization | Name and Title | Area of Expertise |
|---|--|---|
| HealthSouth Valley of the Sun Rehab Hospital | Beth Bacher, CEO | Rehabilitation and skilled nursing |
| HOM Inc. | Michael Shore, president | Public housing and behavioral health |
| International Rescue Committee | Susan Dwyer, vice president of programs | Lifesaving care to refugees |
| John C. Lincoln Gavilan Peak Family Practice | John Deuel, DO | Family medicine and disease management |
| John C. Lincoln Health Network, Emergency and Trauma Services | Julie Cobos, RN, emergency/trauma clinical director | Emergency medicine nursing and trauma services |
| John C. Lincoln Health Network, Employee Health | Pam Forman, PhD, RN, network director | Occupational health and nursing |
| John C. Lincoln Health Network, Human Resources | Frank Cummins, vice president of human resources | Human resources in the health care industry |
| John C. Lincoln Health Network, Medical Staff | Jack Poles, MD | Internal medicine, geriatrics, hospice and palliative care |
| John C. Lincoln Health Network, Network Benefits | Julie Garrett, director of network benefits and HRIS | Employee benefits and health insurance |
| John C. Lincoln Health Network, Operations Council | Senior leadership | Health care industry, hospital management, clinic operations, nursing, physician services |
| Keogh Health Connection | Claudia Maldonado, program director | Connecting low-income families to health care resources |
| Maricopa County Community Colleges | Sylvia Hantla, associate vice chancellor for student affairs | Higher education and student life services |
| Maricopa County Public Health Department | Eileen Eisen-Cohen, performance improvement manager | Community health needs and public health |
| Maricopa County Regional School District | Ernest Rose, superintendent | Special education |
| Maricopa Integrated Health System | Bill Vanaskie, COO | Federally Qualified Health Centers and public health |
| Mollen Foundation | Paige Mollen, vice president | Childhood obesity and education |
| Phoenix Fire Department | Mark Angle, assistant chief | Community development/first responder |

| Organization | Name and Title | Area of Expertise |
|-------------------------------|--|--|
| Phoenix Police Department | Tracy Montgomery, assistant chief of police | Law enforcement and public safety |
| Phoenix Rescue Mission | Marlena Padron, director of community and volunteer outreach | Homeless shelter, food bank and substance abuse rehabilitation |
| Specialty Select Hospital | Sharon Anthony, CEO | Rehabilitation and skilled nursing services |
| St. Luke's Health Initiatives | Jane Pearson, director of programs | Health care policy |
| St. Vincent de Paul | Steve Zabilski, executive director | Homeless services – shelter, health care, rehabilitation |
| TERROS | Penny Free, vice president, operations | Behavioral health and Federally Qualified Health Centers |
| Valle del Sol | Kurt Sheppard, CEO | Behavioral health and social services focused on Hispanics |
| Valley of the Sun United Way | Brian Spicker, senior vice president of community impact | Health and human services |

APPENDIX B

**John C. Lincoln Health Network
Senior Leadership Community Involvement**

American Cancer Society
Arizona Academy of Family Physicians
Arizona Hospital and Healthcare Association
Arizona Town Hall
Arizona Women’s Forum
Association of Fundraising Professionals
Association of Healthcare Philanthropy
Board of Jewish Community Association
Central Phoenix Women
Charter 100
Christ’s Church of the Valley
Drowning Prevention Coalition for Central Arizona
Expect More Arizona
First Things First
Greater Phoenix Leadership
Human Rights Campaign
Honor Flight America
New Life Center for Women
North Phoenix Chamber of Commerce
Paradise Valley Christian Preparatory School
Scottsdale YMCA Board
Sonoran Sky School
Sunnyslope Kiwanis
Tumbleweed for Youth Development
United Blood Services
United Cerebral Palsy Association
Valley Life Board of Directors
Welcome to America Project