

Broward Health Executive Summary

Broward Health contracted with Broward Regional Health Planning Council (BRHPC) for assistance in conducting the FY 2022 - 2023 Community Needs Assessment (CHNA) including the collection of quantitative and qualitative data regarding the health needs; facilitation of community advisory council forums/presentations. In conducting the CHNA, the following steps were completed: 1) the community served was defined; 2) the health needs of the community served were defined; and 3) input from persons who represent the broad interests of the community were solicited and considered. All relevant facts and circumstances were considered in defining the community served including geographic areas and target populations (including medically underserved, low-income, and minority populations). Additionally, all patients were considered without regard to whether (or how much) they or their insurers pay for the care received.

Broward Health's CHNA Advisory Council members participated in community forums from June 25, 2021, to November 19, 2021. During these meetings, the council reviewed data to identify and prioritize community health needs in Broward Health's service area. Quantitative data describing community demographics, social determinants of health (SDOH), health access, maternal and infant health, leading causes of death, disability and disease, health behaviors, mental health, and substance use, and hospital utilization were collected and presented. Data sources included the U.S. Census American Community Survey, Florida Charts, U.S. Bureau of Labor Statistics, and the BRHPC Florida Health Data Warehouse. Qualitative data were collected from a broad range of community stakeholders (including the community served and their representatives) through the following activities: 1) BRHPC Broward CHNA Survey, 2) Community and Provider Focus Groups (4 of each), 3) Key Informant Interviews, 4) input gathered during committee forums and 5) the identification and ranking of needs. Broward Health staff presented an evaluation of the impact of actions taken to address the significant health needs identified in the preceding CHNA.

An initial list of identified needs was developed based on the quantitative and qualitative data collected throughout the CHNA process including the input by stakeholders. The identified needs were then separated into two categories: socioeconomic needs and health needs. Advisory council members were asked to review the two categories and recommend modifications based on the data. Advisory council members from community-based organizations were then asked to rank each need by category using an online survey platform. The resulting priority ranking of needs is included in Table 1.

Table 1. Priority Ranking of Needs by Type

Health Needs	Rank
Diabetes/Obesity	1
Behavioral Health	2
Heart Disease & Stroke	3
Maternal & Infant Health	4
Cancer	5
Alzheimer's Disease	6
HIV/AIDS	7
Asthma	8
Sickle Cell Disease	9
SDOH-Related Needs	Rank
Health Care Access & Quality	1
Economic Stability & Food Environment	2
Housing/Homelessness	3
Linguistically & Culturally Appropriate Care	4