

2022

COMMUNITY HEALTH NEEDS ASSESSMENT

BAYHEALTH HOSPITAL, SUSSEX CAMPUS
MILFORD, DELAWARE



BAYHEALTH.ORG

TABLE OF CONTENTS

I.	Executive Summary
11.	Description of Community Served
III.	Review of Implementation Plan from 2019 Assessment
IV.	The 2022 Needs Assessment
V.	How the Assessment was Conducted
VI.	Community Health Needs Assessment Results
VII.	Health Needs Identified
VIII.	Summaries: Assessments and Priorities
IX.	Next Steps
X.	Acknowledgements
XI.	References
XII.	Appendices
	A. Sussex County Community Member Survey
	B. Sussex County Community Stakeholder Survey
	C. Sussex County Community Stakeholders Included
	D. America's Health Rankings Senior Report 2022
	E. America's Health Rankings Annual Report 2021

I. EXECUTIVE SUMMARY

As central and southern Delaware's largest health system, Bayhealth Hospital has 68 locations including two hospitals, employed physician practices, outpatient diagnostic centers, high school wellness centers, occupational health centers, an ambulatory surgery center, and a freestanding emergency department. The two hospitals include Bayhealth Hospital, Kent Campus in Dover, Delaware, and Bayhealth Hospital, Sussex Campus in Milford, Delaware. The health system is a high reliability organization whose number one focus is the safety of all patients, staff, and visitors with a goal of doing zero harm. Bayhealth is an affiliate of Penn Medicine for Heart and Vascular, Cancer, and Orthopedics, giving patients access to the expertise of an academic medical center and considered to be among the finest in the region.

The staff of more than 3,700 employees, including a Magnet®-recognized team of more than 700 nurses, and 400 physicians, is driven by the mission to strengthen the health of our community, one life at a time by living out our vision to deliver the nation's best healthcare to communities in Kent and Sussex Counties. Each staff member delivers on the mission and vision by displaying the core values of compassion, accountability, respect, integrity, and teamwork in every interaction. The health system has a robust reward and recognition system that encourages staff to acknowledge peers for adhering to these core values.

Bayhealth is a financially strong health system with a healthy annual operating margin and total net revenue of \$782.1 million. In Fiscal Year 2021, Bayhealth Hospital Sussex Campus recorded 29,423 emergency department visits at Sussex Campus, 4,661 patient admissions, 468 births, and 79,146 diagnostic imaging procedures. Bayhealth provided \$73.2 million in unreimbursed care. The organization is committed to providing health care services to patients in Kent and Sussex counties and surrounding areas regardless of their ability to pay.

The Financial Assistance Program (FAP) was established to provide financial relief to those who are unable to meet their financial obligation to Bayhealth, regardless of age, gender, race, national origin, social or immigration status, sexual orientation, or religious affiliation. Financial assistance applies to all emergent and medically necessary services provided at Bayhealth-owned and operated entities for patients whose income is at least or below 250 percent of the Federal Poverty Level. Elective and cosmetic services are excluded under this policy.

Eligibility for the FAP is based upon an individual assessment of financial need. Financial assessment includes a review of a completed application which includes the prior year's tax return or W2, current pay stubs and bank statements, publicly available data that provides information on a patient's ability to pay (credit scoring), and a review of the patient's available funds and other financial resources available to the patient. FAP-approved individuals receive a 100 percent discount on patient responsibility balances. This applies to gross charges for uninsured patients and balance after insurance for insured patients. FAP-approved patients are not charged more than the Amounts Generally Billed (AGB). Patients have 240 days from the first statement date after the care is provided to apply for financial assistance.

Bayhealth Hospital, Kent Campus is located in the state capital of Dover. This 266-bed hospital has been offering quality healthcare since 1927. The hospital offers a comprehensive array of services which include the following: cancer care, cardiothoracic and vascular services, neurosciences including neurosurgery, neurology, stroke care, neurosurgical critical care, and sleep care, orthopedics, surgical services offering the da Vinci® Surgical System, women's and children's health services to include maternal-fetal medicine, an obstetrical emergency department, and neonatal intensive care unit (NICU), diagnostic and interventional radiology, and a Level 2 Trauma Center.

Bayhealth Hospital, Sussex Campus opened in February 2019, replacing Milford Memorial Hospital. With 152 private rooms, this hospital delivers an exceptional experience for patients, guests and caregivers. The hospital offers many of the same services as Bayhealth Hospital, Kent Campus, including cancer care, interventional cardiology, neurosciences including neurosurgery, neurology, stroke care, and sleep care, orthopedics, surgical services offering the da Vinci® Surgical System, women's and children's health services including an obstetrical emergency department, diagnostic and interventional radiology, a Level 3 Trauma Center, and more. The Sussex Campus is also home to Inpatient Rehabilitation designed to help patients regain their independence in an environment that is welcoming and restorative. The Commission on Accreditation of

Rehabilitation Facilities recognized the unit and its healthcare team for providing the highest quality care, value, and optimal outcomes to patients.

Bayhealth launched formal graduate medical education (GME) residency programs in family medicine and internal medicine in July 2021 and expanded to general surgery in July 2022. An emergency medicine residency will launch in 2023. This health system is committed to providing advanced medical technology, progressive treatment options, state-of-the-art equipment, and extensive consumer health education programs. The following Bayhealth departments have earned additional certifications and accreditations:

- The Joint Commission Accreditation Gold Seal of Approval
- The Joint Commission Advanced Certification Primary Stroke Center
- Top Performer on Key Quality Measures® Recognition from The Joint Commission
- Magnet® recognition and twice designated by the American Nurses Credentialing Center's (ANCC's) Magnet Recognition Program®, 2015-2019, 2020-2024
- Commission on Cancer Accreditation
- American College of Radiology – Accreditation for Imaging
- Commission on Accreditation of Rehabilitation Facilities (CARF) for Inpatient Rehabilitation, Bayhealth Hospital, Sussex Campus
- American College of Surgeons Verified Trauma Center
- Mission Lifeline® Silver Plus STEMI Receiving Center from the American Heart Association
- Baby-Friendly status from Baby-Friendly USA, Inc.
- Bronze Safe Sleep Champion designation by Cribs for Kids® National Safe Sleep Hospital Certification Program
- “Comprehensive accreditation” under the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP®), a joint program of the American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMBS)- Bayhealth Hospital, Kent Campus
- PRISM Award™ for Exemplary Practice from the Academy of Medical-Surgical Nurses (AMSN)
- Blue Distinction® Center designation from Highmark Blue Cross Blue Shield Delaware – Cardiac Care, Bariatric Surgery, Maternity Care, Knee and Hip Replacement
- HealthCare Chaplaincy Network's “Excellence in Spiritual Care” award
- The Human Rights Campaign Foundation's Healthcare Equality Index recognition as a Top Performer in LGBTQ Healthcare Equality
- Accreditation Commission for Health Care in Specialty Pharmacy Services
- Healthcare Information and Management Systems Society (HIMSS) Stage 7 Award
- College of Healthcare Information Management Executives (CHIME) Digital Health Most Wired – Level 9
- 2020 Top Hospital Award for Outstanding Quality and Safety from the Leapfrog Group - Bayhealth Hospital, Sussex Campus
- National recognition as 2021 Sterile Processing Department of the Year from Healthcare Purchasing News
- Practice Transition Accreditation Program (PTAP) from the American Nurses Credentialing Center (ANCC)
- Accreditation for Laboratory and Pathology Services from the College of American Pathologists
- Transcatheter Aortic Valve Replacement (TAVR) Certification from the American College of Cardiology (ACC)
- Electrophysiology Program Accreditation through American College of Cardiology (ACC)
- Best Maternity Hospital from the Leapfrog Group and Newsweek
- National Accreditation Program for Rectal Cancer (NAPRC) from the American College of Surgeons
- First in Delaware to offer 7D Surgical FLASH™ Navigation System for radiation-free spinal and cranial procedures in Neurosurgery
- Emergency Quality Network (E-QUAL) Honor Roll in sepsis care from the American College of Emergency Physicians
- 2021 Joy in Medicine™ Recognition Program from American Medical Association (AMA) for our Medical Staff Wellness Program
- Level 2 National Certification through Emergency Medical Services for Children
- 2022 HeartCare Center of Excellence through the American College of Cardiology (ACC)
- 2022 Leapfrog Safety Grade A, Bayhealth – Sussex Campus

- Healthgrades 2022, 2021 America's 100 Best Hospitals for Coronary Intervention Award
- Healthgrades 2022 Stroke Care Excellence Award
- Healthgrades 2022 Outstanding Patient Experience Award
- Healthgrades 2022 America's 100 Best Hospitals for Pulmonary Care Award

II. DESCRIPTION OF COMMUNITY SERVED

Southern Delaware, home to Bayhealth Hospital, Sussex Campus, delivers on a coastal lifestyle. Located in Milford, it is just 20 miles south of Dover and is 20 miles north of Lewes and Rehoboth Beaches. Milford offers small town charm and a main street with boutiques, coffee shops, restaurants, and more. The town comes to life during their Third Thursday events featuring food vendors, live music and a community atmosphere. Its neighboring town of Milton has much of the same charms with a large park, access to water sports, quaint restaurants, and festivals. South of these towns are award-winning beaches that offer fine dining, outlet shopping, access to water activities, excellent schools, and more. More information is available at SouthernDelaware.com.

COMMUNITY AFFORDABLE CARE ORGANIZATION PARTNERSHIP

Bayhealth is part of the eBrightHealth accountable care organization (ACO) which brings together more than 1,200 primary and specialty care clinicians from two regional health systems, including Bayhealth and ChristianaCare, as well as two federally qualified health centers and 4 private primary care practices. This statewide collaboration helps clinicians address the clinical, behavioral, social and other needs of Medicare beneficiaries to improve their access to primary care office visits, prevent unnecessary emergency department visits and decrease the amount of time they spend in hospitals. The result is improved quality of life for patients and reduced health care spending. eBrightHealth ACO serves approximately 30,000 Medicare beneficiaries from Delaware, Pennsylvania and Maryland. Care coordination is provided by ChristianaCare's award-winning care coordination program, CareVio.

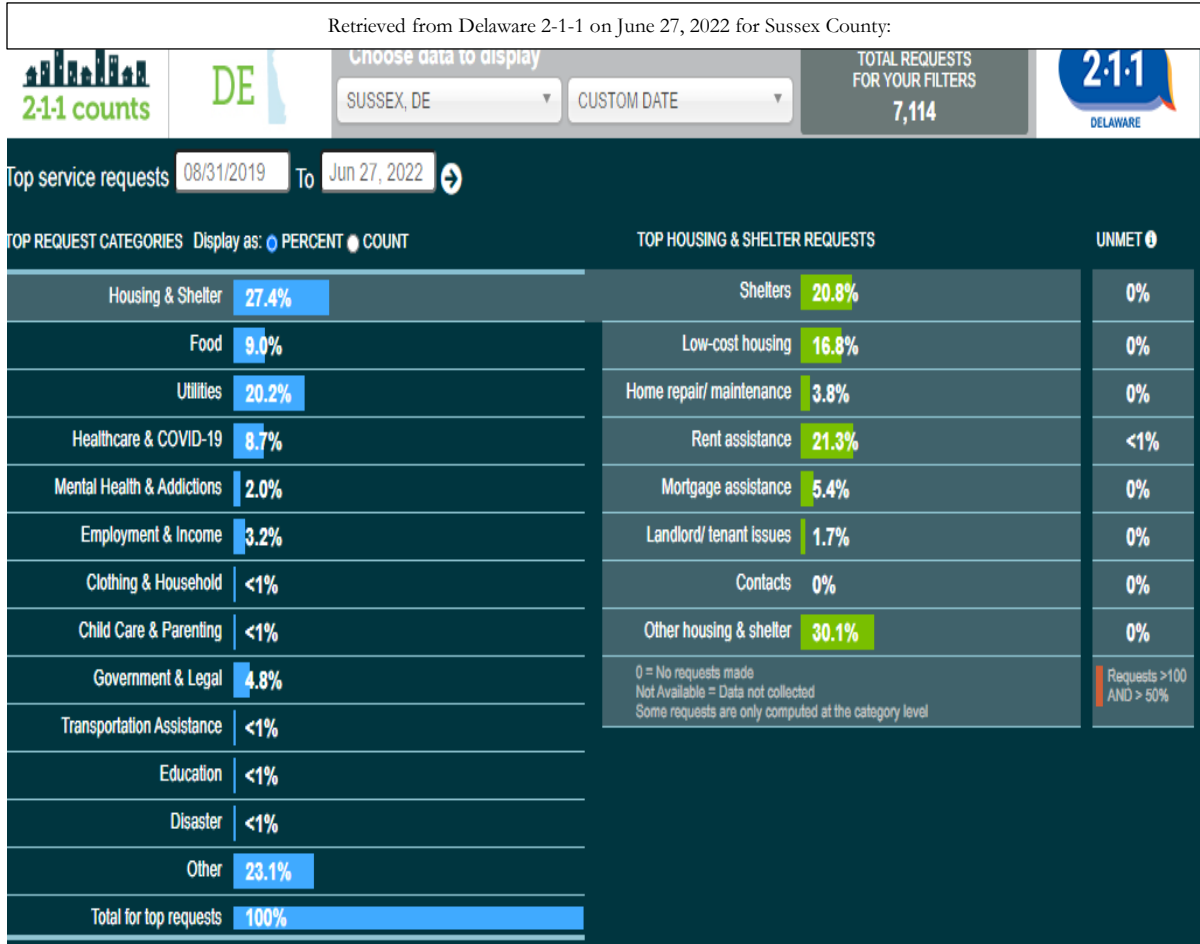
COMMUNITY BENEFITS

As a not-for profit healthcare organization, Bayhealth provides many services to the community. Since the 2019 Community Health Needs Assessment, Bayhealth has served over 5,576 people in community outreach programs offered by the Education Department. In addition, 756 people attended community RN-run clinics and programs. According to the 2021 Community Report, Bayhealth reported \$142,854,423 in community benefits. Community health education ranges from health fairs to screenings to nurse-run clinics. Other services provided include community-based clinical services, healthcare support services, health professions education, subsidized health services, research, financial and in-kind contributions, community building activities, and community benefit operations.

Beginning in January 2021, Bayhealth offered free COVID vaccine clinics at Blue Hen Corporate Center. As the vaccine became more widely available, this transitioned to community COVID vaccine clinics in local high schools, state housing complexes and local businesses. During the following eight months, over 10,000 COVID vaccines were administered to community members.

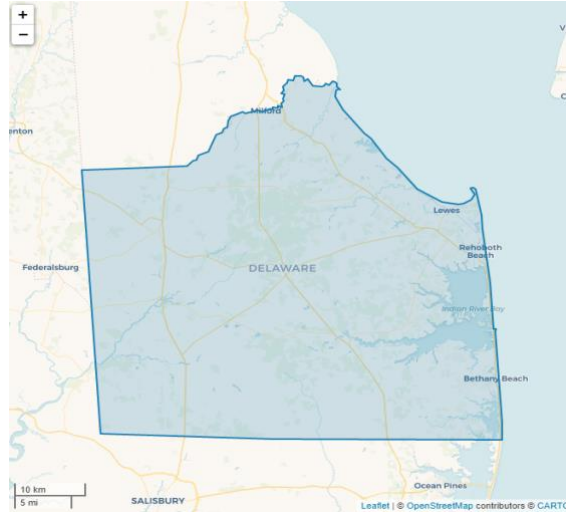
UTILIZATION OF COMMUNITY RESOURCES

Delaware 2-1-1 is available for anyone requesting community resources throughout the state. Information in this repository is provided through the partnership between United Way and the State of Delaware. Callers can inquire about a list of services and programs through this helpline. Bayhealth’s partnership with Unite Delaware will improve referrals for clients served by this organization. The following table depicts the utilization of Delaware 2-1-1 services from August 30, 2019 through June 27, 2022 for Sussex County.



SUSSEX COUNTY'S DEMOGRAPHICS

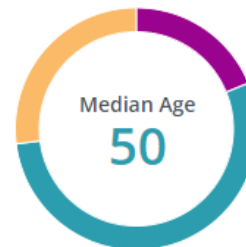
As reported in 2020 by the US Census Bureau, Delaware's population was 989,948 with 237,378 living in Sussex County. According to a Delaware Population Consortium report on October 21, 2021, the projected population for 2025 will be 1,018,473 residents in the state of Delaware and 285,286 living in Sussex County.



Sussex County demographic statistics were reported in My Healthy Delaware ([www.https://myhealthycommunity.dhss.delaware.gov/home](https://myhealthycommunity.dhss.delaware.gov/home)) and are reflective of 2019 statistics when retrieved on June 21, 2022. The population of 223,384 people consisted of 27% over the age of 65. The median household income is \$63,162. Sussex County residents living below the poverty level are calculated at 11%.

Population by Age 2019

Age Group	Count	Percent of Population
● Under 18	42,274	18.8%
● Between 18 and 65	121,621	54.2%
● Over 65	60,489	27.0%



Population by Race 2019

Race	Count	Percent of Population
White	184,098	82.0%
Black	26,918	12.0%
Two or More Races	5,196	2.3%
Other Race	4,384	2.0%
Asian	2,753	1.2%
Native American	777	0.3%
Pacific Islander	258	0.1%

Population by Ethnicity 2019

Ethnicity	Count	Percent of Population
Non-Hispanic	203,807	90.8%
Hispanic	20,577	9.2%

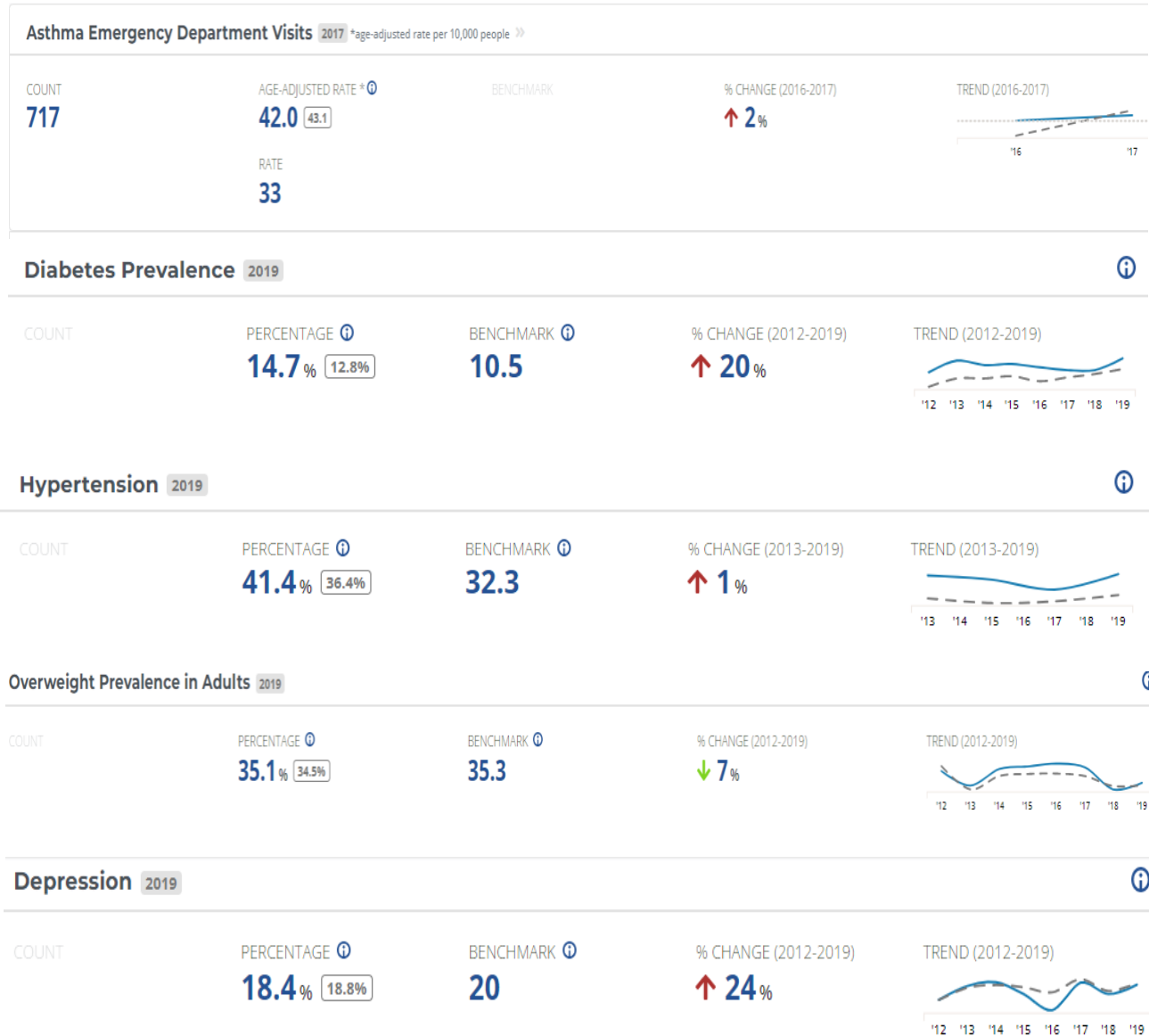


HEALTH DISPARITIES FOR SUSSEX COUNTY

Chronic diseases are the leading causes of death nationally. In Delaware, the leading causes of death are as follows:

1. Cardiovascular disease, including heart disease and stroke
2. Cancer
3. Lung diseases
4. Diabetes

According to My Healthy Delaware, the following chronic illness and overall health information were reported for Sussex County:



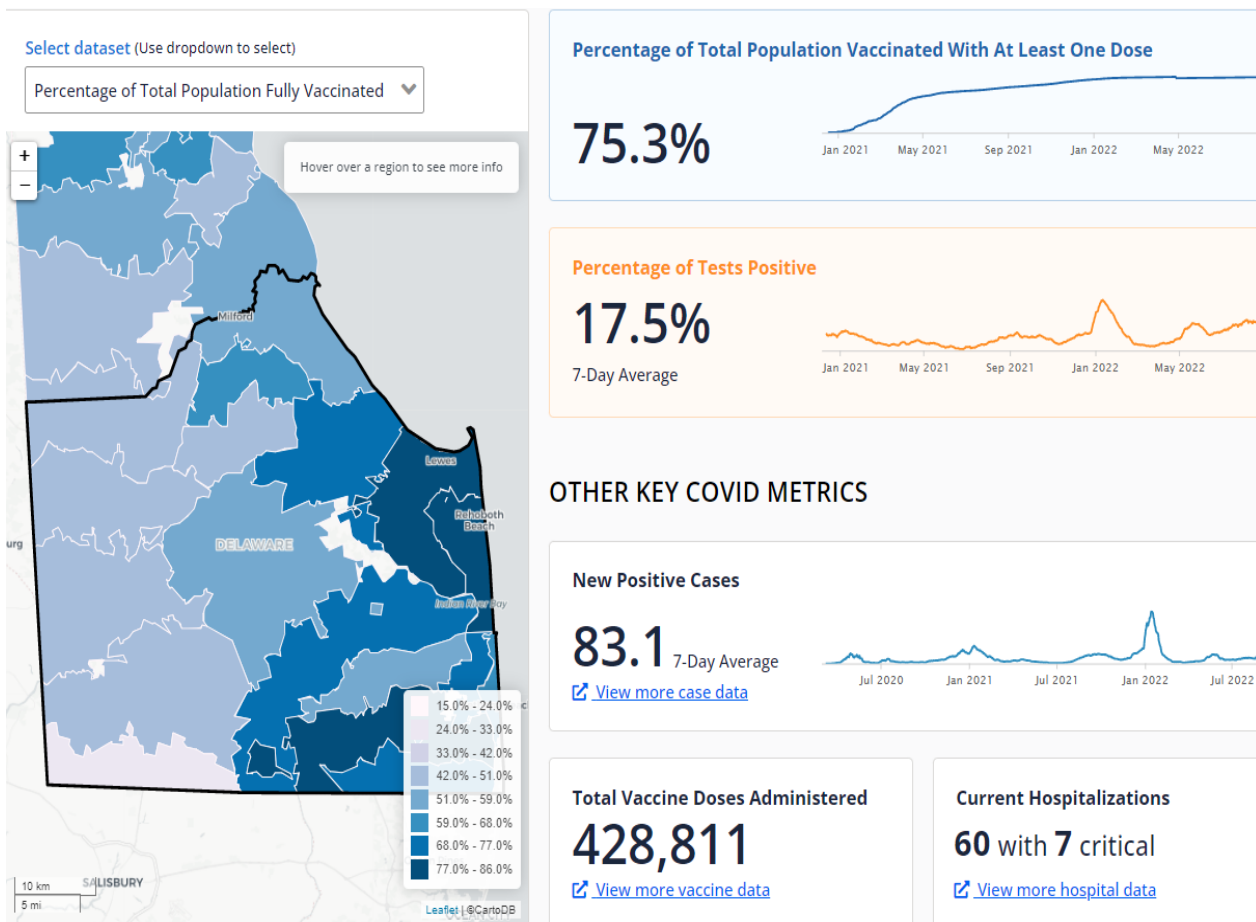
THE IMPACT OF COVID-19

Angeline Dewey and Bradley Kirkes co-lead a diverse multi-disciplinary team to provide almost 100 COVID-19 testing clinics over five months from March 2020 to July 2020 in Kent and Sussex Counties. Testing sites included the following: Dover Downs (drive-through) and Blue Hen Surgery Center (drive-through) in Dover, Bayhealth Sussex Campus-Nemours Building (drive-through), Perdue Farms in Milford, Perdue Farms in Georgetown, and Allen Foods in Harbeson. Bayhealth also partnered with DHSS to assist with COVID-19 testing at the Milford State Service Center. Educators provided tips on handwashing and proper wear of masks at each screening site.

Bayhealth rallied during the COVID-19 pandemic and created resources to support the health and well-being of staff members. Meal Trains were arranged at each campus to make it convenient for staff. Survival kits were also put together to help relieve stress during this time. Leadership hosted a breakfast buffet to recognize staff for heroic measures. Staff members were also acknowledged through a “Be My Hero” campaign. The outpouring of support from the local community included parades, banners, signage, and meal contributions to help boost morale.

Bayhealth was the first healthcare system in Delaware to receive the COVID-19 vaccine. The vaccine was offered to all team members and administered by nurses from Occupational Health and the Education Department. Volunteers from Bayhealth also participated in community drive-through clinics coordinated by the Department of Health and Social Services (DHSS).

Current statistics on vaccination rates for Sussex County as of August 24, 2022 on the My Healthy Delaware website are as follows:



SOCIAL DETERMINANTS OF HEALTH

Bayhealth recognizes the importance of social determinants in contributing toward to the overall health of our community. Social determinants of health (SDoH) have a major impact on people's health, well-being, and quality of life. They can contribute to wide health disparities and inequities. According to Healthy People 2030, as cited from <https://health.gov/healthypeople/priority-areas/social-determinants-health> on September 30, 2021, SDoH include the following: (1) healthcare access and equity, (2) economic stability, (3) education access and quality, (4) neighborhood and built environment, and (5) social and community context. Examples of SDoH include the following:

- Access to nutritious foods and physical activity opportunities
- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Polluted air and water
- Language and literacy skills

Bayhealth initiated SDoH screening assessments with questions related to housing, transportation, financial, community and family support, and personal safety. These were built into Bayhealth's electronic medical record documentation for healthcare workers to assess inpatients and those seen in the community. It was first piloted at the Bayhealth Hospital - Sussex Campus in March 2021 and later approved and rolled out at both the Kent and Sussex Campuses in July 2021. The Clinical Integration and Education Departments developed online education in the learning management system which targeted Bayhealth healthcare professionals for the acute care and community settings.

To address community needs, Bayhealth partnered with Unite Delaware, a coordinated care network of health and social service providers. Partners in the network are connected through the 'Unite Delaware' shared technology platform that enables them to send and receive electronic referrals, address people's social needs, and improve health across communities. Effective July 28, 2022, those trained in the system now assist clients with the appropriate services to address SDoH. This service is particularly beneficial for care managers to coordinate community services.

COMMUNITY OUTREACH

Bayhealth re-energized a Community Outreach Committee in 2021. The goals of the committee are reflective of Bayhealth's Strategic Plan. These goals include the following: (1) to reduce barriers to health and wellness services, (2) to address cultural differences and (3) to develop multi-language resources for staff, patients, and community members that align with federal requirements. Populations targeted over the next three fiscal years include the Haitian, Hispanic, and Amish cultures. The committee works with local churches and community non-profits to increase patient education, interpreter services, transportation to appointments, and low-cost/discounted medical services among our most vulnerable populations. This committee is led by Carrie Hart, Volunteer Services Director. Members include staff from Strategic Planning, Clinical Integration, Education, Population Health, Ambulatory Care, and Marketing.

Representatives from the Cancer Center and Education Department participate in monthly Sussex County Healthcare Coalition meetings for partnerships and statewide outreach. Committees involve health care and mental health/substance use disorders to address the needs of communities throughout Delaware.

The Healthier Sussex County Task Force was created to address mental health and substance use disorders as identified by the 2019 Community Health Needs Assessment. It is led by CEOs from three healthcare systems in Sussex County: Bayhealth, Beebe Healthcare, and TidalHealth. The goal of this collective partnership is to make a positive impact on members of the community seeking these services.

Bayhealth also attends meetings for Restoring Central Dover, a program designed to help local entrepreneurs succeed with initiatives to revitalize Downtown Dover. This committee includes members from NCALL, Inc. which focuses on housing and community development. It also addresses the local farmers' market and community events to engage residents. NCALL, Inc was funded by Healthy Communities Delaware to work with residents impacted by COVID-19 for housing,

financial security, food security, and employment in Kent County. In Sussex County, food pantries and COVID-19 care kits were provided to address food security needs.

Bayhealth's Community Wellness Program offers RN-run clinics for underserved populations in Kent and Sussex Counties at the following locations: Dover Interfaith Mission (men's homeless shelter) in Dover, House of Hope (women's homeless shelter) in Dover, and Slaughter Neck Community Resource Center in Lincoln. Since many clients at homeless shelters do not have a primary care provider, Clinical Educators partnered with the GME program to offer more comprehensive services. In September 2022, internal medicine residents will begin rotating through the Dover Interfaith Mission location to offer assistance to individuals requiring medication refills or access to care through physician referrals.

Bayhealth created a Population Health Department in November 2020 that is working to improve the health of the community while creating greater value for clients served. It is comprised of 14.5 full-time equivalents, including a Senior Manager, RN population health supervisor, population health specialist, Bayhealth Medical Group educator, diabetic educator, 5 annual wellness LPN's, and 4.5 RN chronic care managers to support primary care practices. Dr. Preeti Gupta from Bayhealth Primary Care, Sussex Campus, is a leader in population health and helped design Bayhealth's program. This program has grown tremendously and will continue to support the community. Thousands of lives have been touched between 2021-2022 with partnerships throughout the state and in the community.

III. REVIEW OF IMPLEMENTATION PLAN FROM 2019 ASSESSMENT

As a result of the 2019 Community Health Needs Assessment (CHNA), Bayhealth selected the following priority areas to improve upon: (1) obesity/nutrition, (2) diabetes, (3) cancer, and (4) mental health/substance abuse. This grid depicts progress made in each area including Bayhealth departments that participated in each strategy.

SUMMARY OF 2019-2022 IMPLEMENTATION

CHNA STRATEGIES – SUSSEX CAMPUS

Health Concern	Activity Implemented	Activity Results with Timeframe	Bayhealth Departments
Obesity & Nutrition	Collaborating with community service partners to develop strategies to address needs in Dover and the surrounding areas	<p>Despite the challenges brought on from the COVID-19 pandemic, the Bayhealth Bariatric Program completed more than 260 bariatric procedures at both hospitals over the past 32 months (reported 2/21/22)</p> <hr/> <p>Community involvement was significantly diminished; however, the Bariatric Program did participate in the following: Bayhealth Movie Night at Delaware Turf Fields (10/2019), Go Pink (10/2019), Diabetes Expo (11/2019), and a radio opportunity with WGMD on 1/8/2020 to discuss obesity with its impact on overall health and wellness</p> <hr/> <p>The Bariatric Program worked with marketing to develop social media posts to drive interest to the website; the community can now locate information on this program, including an on-demand online informational seminar; this has allowed individuals to learn more about obesity and surgical weight loss options offered at Bayhealth</p> <hr/> <p>Interactive support groups were offered twice monthly to help the community with healthy endeavors; support groups were held at each hospital location and simultaneously via WebEx to increase accessibility and were held virtually until April 2022; patients may attend even if they have not had bariatric surgery at Bayhealth</p> <hr/> <p>The goal of the Bariatric Program is to educate the community regarding success stories for patients who have had bariatric surgery; these are shared in the Bayhealth Community Health & Wellness electronic newsletter</p> <hr/> <p>Patricia Deer, RN, the Bariatric Program Coordinator, worked with physician liaisons and provided the Bayhealth Medical Group with brochures for patients seen in clinics</p> <hr/> <p>Plans moving forward include monthly educational offerings on various topics including nutrition, pregnancy and bariatrics; Dr. Theodoros Katsichtis, general surgeon, is involved with a WebEx endeavor to engage the community</p>	Executive Team and Board of Directors Medical Staff Patient Care Services Bariatrics Food & Nutrition Pharmacy Education Department

<p>Substance Abuse and Behavioral (Mental) Health</p>	<p>Partner with community service organizations, local academia, and the State of Delaware to discuss specific concerns related to substance abuse and behavioral health</p>	<p>In 2019, Dr. Jonathan Kauffman led the creation of Bayhealth’s Opioid Oversight Task Force; Psychiatrist, Dr Andrea DeSimone and Care Manager, Patricia Buck joined the team to address patients with addictions</p> <hr/> <p>Bayhealth implemented the Electronic Prescription Controlled Substances (EPCS) platform in the electronic medical record for physicians to provide electronic prescriptions for controlled substances</p> <hr/> <p>Dr. Kelly Abbrescia and Dr. Jonathan Kauffman serve on the Delaware Overdose System of Care Committee, a group created by and run by the State of Delaware; they are seeking to improve access to treatment and reduce overdose deaths. Naloxone is now available through a state program for ED patients and families of patients who have had an overdose; several physicians have undergone training to prescribe Suboxone from 2019 to present.</p> <hr/> <p>Bayhealth hired Peer Recovery coaches (recovering addicts) in our Emergency Departments; Peer Recovery Coaches were contracted through Recovery International - two at the Kent Campus, one for the Sussex Campus, and a supervisor who is back-up for each campus; Dennis Hallock supervises all Peer Recovery Coaches for the Kent and Sussex Emergency Departments.</p> <hr/> <p>In September 2020, Bayhealth hosted a 2-part “Back to Reality: Substance Use Disorders” virtual Webex to educate healthcare professionals about drug threats in caring for individuals presenting to our hospitals and appropriate treatment modalities; four sessions were held for Bayhealth staff with nursing contact hours awarded.</p> <hr/> <p>SUN Behavioral programs offered by Webex to Bayhealth staff on various behavioral health topics.</p> <hr/> <p><i>My Medication Bags</i> are available throughout Bayhealth, physician practices, and at Community Wellness Clinics to improve medication reconciliation and compliance</p> <hr/> <p>Inpatient order sets created and utilized in electronic medical record based upon evidence-based practice; standardized assessment tools and medications used for alcohol and substance withdrawal.</p>	<p>Executive Team & Board of Directors</p> <p>Medical Staff</p> <p>Patient Care Services</p> <p>Finance</p> <p>Emergency Department</p> <p>Education</p> <p>Patient Advocacy</p> <p>Performance Improvement</p> <p>Risk Management</p> <p>Care Management</p> <p>Workplace Violence</p> <p>Patient Experience</p> <p>Chaplains</p> <p>Population Health</p> <p>Marketing & Communications</p>
--	--	--	---

		<p>Bayhealth participated in Delaware Goes Purple in 2019 and 2020 to raise awareness and reduce the stigma attached to substance use and addiction; in 2019, a team organized a “Taking Steps” event where employees gathered for a short walk around the building to show their support for this initiative; Marketing and Communications promoted this campaign at drive through point-of-distribution stations at Blue Hen Mall and Sussex Campus, table displays at Kent/Sussex Campuses, a moment of prayer and meditation on October 23, 2020 at the Kent Chapel, and on Facebook and Workplace</p> <hr/> <p>Psychiatric telehealth is available for use on inpatient units and Emergency Departments at the Kent, Sussex, and Smyrna sites</p> <hr/> <p>Mental health counselors are available for students at all high school Bayhealth Wellness Centers</p> <hr/> <p>Suzanne Chafin, Licensed Professional Counselor for Mental Health, employed by Bayhealth Family Medicine, Dover to offer a range of behavioral health services and counseling to families, children, and adults</p>	
Cancer	Collaborating with community service partners to develop strategies to address needs in Dover and the surrounding areas	<p>2019 – Runway of Hope raised more than \$83,000 for the Bayhealth Survivorship Program; Go Pink! event raised more than \$28,000 for the Bayhealth Cancer Screening Assistance Program</p> <hr/> <p>Expanded the medical team with a radiation oncologist, hematologist-oncologist, and telegeneticist</p> <hr/> <p>Expanded access to patients for the medically-managed genetic counseling program</p> <hr/> <p>Partnered with Penn Medicine’s Abramson Cancer Center Telegenetics Program to provide genetic testing and counseling to guide the development of the patient’s personalized treatment plans for patients</p> <hr/> <p>Targeted at-risk groups for outreach; implemented colorectal and lung navigator programs to reduce barriers to screening and early detection of cancer</p> <hr/> <p>Inaugural celebration for local cancer survivors on June 4, 2019; developed special video featuring Cancer Center staff to express their gratitude</p> <hr/> <p>Received donations from the following: (1) Dogfish Head Craft Brewery for benevolence funds to help assist cancer patients during times of financial hardship, (2) Safeway Foundation to provide free biopsies to women in need in central and southern Delaware, (3) C.F. Schwartz Toyota to support oncology services, and (4) Winner Subaru and Delaware Chapter of the Leukemia & Lymphoma Society for cancer patients</p>	<p>Executive Team & Board Members</p> <p>Medical Staff</p> <p>Patient Care Services</p> <p>Cancer Institute</p> <p>Finance</p> <p>Clinical Nurse Navigators</p> <p>Education Department</p>

		<p>Bayhealth’s Lung and Colorectal Cancer Screening and Outreach Nurse Navigator, Trina Turner, MSN, RN-BC, LNC, raised awareness for colorectal cancer and screening/early detection at Delaware Agricultural Week event in Harrington, Delaware</p> <hr/> <p>Bayhealth participated in Hope Day at Legislative Mall in July 2019 which was hosted by Convoy of Hope; reached more than 350,000 people in Kent County; conducted free clinical breast exams, facial skin screening assessments, and provided information on prostate, colorectal and lung cancer screenings, smoking cessation, and skin health</p> <hr/> <p>Bayhealth cancer registry top cancer sites were breast, lung, and prostate for both campuses</p> <hr/> <p>Bayhealth Research Committee held annual conference entitled “Discover the Wonders of Research”</p> <hr/> <p>2020 – Outreach limited due to the COVID-19 pandemic; lung navigator served as a liaison for the Imaging Center which improved lines of communication</p> <hr/> <p>Imaging Centers designed new ways to screen patients while protecting patients and care providers to minimize risk from potential COVID-19 exposure; instituted universal mask policy to comply with Centers for Disease Control and Prevention guidelines</p> <hr/> <p>Bayhealth Cancer Institute enrolled in the American Society of Clinical Oncology’s registry to collect information about patients who have cancer and were diagnosed with COVID-19; Bayhealth was the only cancer program enrolled in Delaware for this program as of November 2020</p> <hr/> <p>In March 2020, hospital and physician practices altered appointments from in-personal to “virtual” face-to-face and telehealth appointments without disrupting care or quality of services received</p> <hr/> <p>Bayhealth celebrated the 15th anniversary of Go Pink! in October 2020 and sold 4,200 t-shirts for breast cancer awareness month; proceeds after expenses were divided between breast screenings and education programs available through the Bayhealth Cancer Institute and the Delaware Breast Cancer Coalition (DBCC)</p> <hr/> <p>The National Breast Cancer Foundation awarded \$5,000 to Bayhealth to support the low-cost breast cancer screening programs</p>	
--	--	--	--

		<p>The telegenetics program expanded from Kent County into Sussex County with an additional medical oncologist hired for the Cancer Institute</p> <hr/> <p>Dr. Rishi Sawhney, Medical Director of the Bayhealth Cancer Institute, began a bimonthly Molecular Tumor Conference to allow the team to weigh in findings, discuss treatments, and educate others on research impacting therapies</p> <hr/> <p>Trina Turner, MSN, RN-BC, LNC, Bayhealth’s Lung and Colorectal Cancer Screening and Outreach Nurse Navigator, was a dual nominee for excellence awards in Ambulatory Care and Volunteerism & Service; she partnered with the Delaware Quit Line and prior to COVID-19, attended over 20 community outreach and educational events to help the underserved in both Kent and Sussex Counties</p> <hr/> <p>To raise awareness for colorectal cancer, Bayhealth team members wore blue on the first two Fridays in March 2020; information was shared regarding colorectal cancer and screenings</p> <hr/> <p>Two new nurse practitioners and one new radiation oncologist joined the oncology team in 2020</p> <hr/> <p>2021 – According to the Bayhealth cancer registry, top cancer sites for each hospital were breast, prostate, and lung.</p> <hr/> <p>Bayhealth Cancer Institute’s 10th Annual Runway of Hope fundraiser raised \$100,308 in support of programs for cancer survivors and patients.</p> <hr/> <p>Bayhealth joined a national Return to Screening effort, spearheaded by the Commission on Cancer, the American Cancer Society, and the National Accreditation Program for Breast Centers to boost screening rates by 10%</p> <hr/> <p>Sent postcard reminders in My Chart for overdue screenings</p> <hr/> <p>Worked with Dover Air Force Base to ensure that they were aware of the Bayhealth screening program and appointments that are available; opened additional evening appointments at Eden Hill Medical Center</p> <hr/> <p>Bayhealth launched a program with the Perdue Foundation to assist underserved women for breast cancer screenings</p> <hr/> <p>Partnered with the Delaware Breast Cancer Coalition and Westside Family Healthcare to conduct patient outreach</p>	
--	--	--	--

		<p>Patients enrolled in clinical trials by year:</p> <table border="1"> <thead> <tr> <th></th> <th>2019</th> <th>2020</th> <th>2021</th> </tr> </thead> <tbody> <tr> <td>Kent Accruals</td> <td>442</td> <td>525</td> <td>42</td> </tr> <tr> <td>Sussex Accruals</td> <td>226</td> <td>251</td> <td>12</td> </tr> <tr> <td>Total Accruals</td> <td>668</td> <td>776</td> <td>54</td> </tr> </tbody> </table>		2019	2020	2021	Kent Accruals	442	525	42	Sussex Accruals	226	251	12	Total Accruals	668	776	54	
	2019	2020	2021																
Kent Accruals	442	525	42																
Sussex Accruals	226	251	12																
Total Accruals	668	776	54																
Availability of Providers	Identifying community need to partner with undergraduate (UME) students and graduate medical education (GME) through a formalized program to increase access to providers in the Bayhealth service area	<p>In 2019, Bayhealth became a formal teaching hospital by providing training to 11 third-year medical students from the Philadelphia College of Osteopathic Medicine (PCOM)</p> <hr/> <p>Bayhealth partnered with numerous area medical schools to bring on third- and fourth-year medical students for clinical rotations</p> <hr/> <p>Bayhealth partnered with Philadelphia College of Osteopathic Medicine, Drexel, and Sidney Kimmel Medical College</p> <hr/> <p>Bayhealth partnered with Arcadia to place Physician Assistant students</p> <hr/> <p>Undergraduate medical education (UME) expanded from 76 students in 2019-2020 to 219 students in 2021-2022</p> <hr/> <p>Bayhealth was highlighted in the July 2020 Delaware Healthcare Association's community benefit report with the steps taken to address access to primary care in Delaware</p> <hr/> <p>Received initial accreditation for Family Medicine (2019), Internal Medicine (2020), General Surgery (2021), and Emergency Medicine (2022) residencies from the Accreditation Council for Graduate Medical Education</p> <hr/> <p>During 2021-2022, there were 13 internal medicine residents and 8 family medicine residents for each 3-year program</p> <hr/> <p>Dr. Brintha Vasagar appointed Program Director for Family Medicine Program which opened in July 2021</p> <hr/> <p>Bayhealth Family Medicine Primary Care Practice created in Dover; this was the first in the area to integrate mental health counseling and offer addiction treatment and the only practice with PharmD integrated; this program increased the need for primary care by 30,000 outpatient visits per year in the local community; this is one of only two practices in the area accepting new patients with the overall shift to concierge medicine</p>	<p>Executive Team</p> <p>Medical Staff Liaisons</p> <p>GME Program</p> <p>Marketing & Communications</p> <p>Finance</p>																

	<p>From 2021-2022, family medicine residents were involved in the community at the Hope Clinic in Dover; they also rotated to Camp Rehoboth to support the LGBTQ+ community to address special needs of this population by participating in the HIV Clinic</p> <hr/> <p>Dr. Joseph Deutsch appointed Program Director for Internal Medicine Residency program beginning in July 2021</p> <hr/> <p>Medical student rotations created in internal medicine</p> <hr/> <p>The Bayhealth Internal Medicine outpatient practice opened July 2021 in Milford, DE; provided care for an underserved population as Milford is a physician-shortage area; when fully staffed in 2024, this practice will add more than 20,000 patient visits to the community per year</p> <hr/> <p>Bayhealth sponsored the 2021 Delaware Resorts 55+ Expo in Lewes; blood pressure screening and flu shots were provided, along with information on the Referral Line (1-866-BAY-DOCS) for individuals requesting a new physician</p> <hr/> <p>Projected residents for 2022-2023 are 26 internal medicine, 16 family medicine, and 3 general surgery</p> <hr/> <p>Emergency Medicine Residency Program will begin in July 2023 led by Program Director, Dr. Dean Johnson; there will be 6 residents for this inaugural class for a 3-year program; a medical student elective in emergency medicine will be available with this program</p> <hr/> <p>Team members from the GME program represented Bayhealth at the June 2022 PrideFest event on Legislative Mall in Dover</p> <hr/> <p>To enhance the training environment with state-of-the-art technology, Bayhealth created a Simulation Lab for multi-disciplinary team training with an Open House scheduled for September 7, 2022; the Simulation Lab will utilize state of the art training to improve the learning experiences of the interdisciplinary team.</p>	
--	---	--

IV. THE 2022 NEEDS ASSESSMENT

The Community Health Needs Assessment (CHNA) for Sussex County, Delaware was conducted in collaboration with an interprofessional team including the Bayhealth Community Benefits Committee and the Community Health Needs Assessment Subcommittee. Members from Bayhealth on these committees are:

- ✚ Education
- ✚ Finance
- ✚ Population Health
- ✚ Care Management
- ✚ Medical Staff
- ✚ Patient Care Services
- ✚ Marketing

Planning for the 2022 CHNA began in August 2021 when team members established the scope of work and the project timeline. The two target populations for the assessment of community health needs included community members of Kent County as well as community stakeholders of Kent County. The CHNA subcommittee met monthly to maintain the project plan. The committee reviewed the survey questions from 2019, other Delaware Hospitals CHNA survey questions, the Delaware State Health Improvement Plan 2020 Annual Report, as well as Healthy People 2030. Additional information considered in developing the surveys for 2022 included national and local trends in healthcare such as Emergency Department usage and SDoH. The community-at-large survey and the community stakeholder survey very much mirror each other in terms of content; however, the different perspectives of a consumer and a stakeholder provide alternative views for data interpretation. A copy of the community-at-large survey can be found in Appendix A and the community stakeholder survey can be found in Appendix B at the end of this document.

Bayhealth's service area includes both Kent County, Delaware and Sussex County, Delaware. Kent County includes Bayhealth Kent Campus as well as the Free-Standing Emergency Department in Smyrna, Delaware. Sussex County includes the Bayhealth Sussex Campus. For consistency, the subcommittee decided to use the community-at-large and community stakeholder surveys in both counties. This document specifically addresses the Community Health Needs Assessment for Sussex County Delaware. The complete report on Kent County CHNA can be found on www.bayhealth.org/community-health-and-wellness/chna.

V. HOW THE ASSESSMENT WAS CONDUCTED

The CHNA subcommittee approved a promotional plan from the Marketing department and launched the community-at-large survey in October 2021. This survey was primarily advertised electronically using SurveyMonkey and was available in English and Spanish languages. Paper surveys were also available in English, Spanish, and Haitian Creole and deployed for Bayhealth in-person community events, medical provider offices, senior centers, and homeless shelters as well as large businesses. The completed paper surveys were then manually entered into the electronic survey. Bayhealth provided an initiative to complete the survey with a gift card raffle. The survey was advertised with a direct link on Bayhealth's internal and external website, internal news communications, Bayhealth social media posts, Bayhealth's community email newsletter, local newspaper advertisements, as well as digital and print ads. Postcards were also made with a QR code link to the survey (participants use their cell phones to scan the QR code) for distribution at medical provider offices, Bayhealth Wellness and Occupational health sites, and waiting rooms in the Bayhealth facilities.

The community stakeholder survey was launched in January 2022. The survey was promoted as an electronic version through SurveyMonkey. The stakeholder list was comprised of six categories

- ✚ Healthcare Providers
- ✚ Schools
- ✚ Business and Organizations
- ✚ Churches
- ✚ City, County, and State Government
- ✚ Non-profit organizations

Email addresses were obtained from a variety of individuals and groups who are employees, members, or leaders within the six categories of stakeholders. The full listing of stakeholders who were contacted are listed in Appendix C. An initial email was sent to stakeholders with a link to the survey as well as two additional follow-up emails requesting their participation.

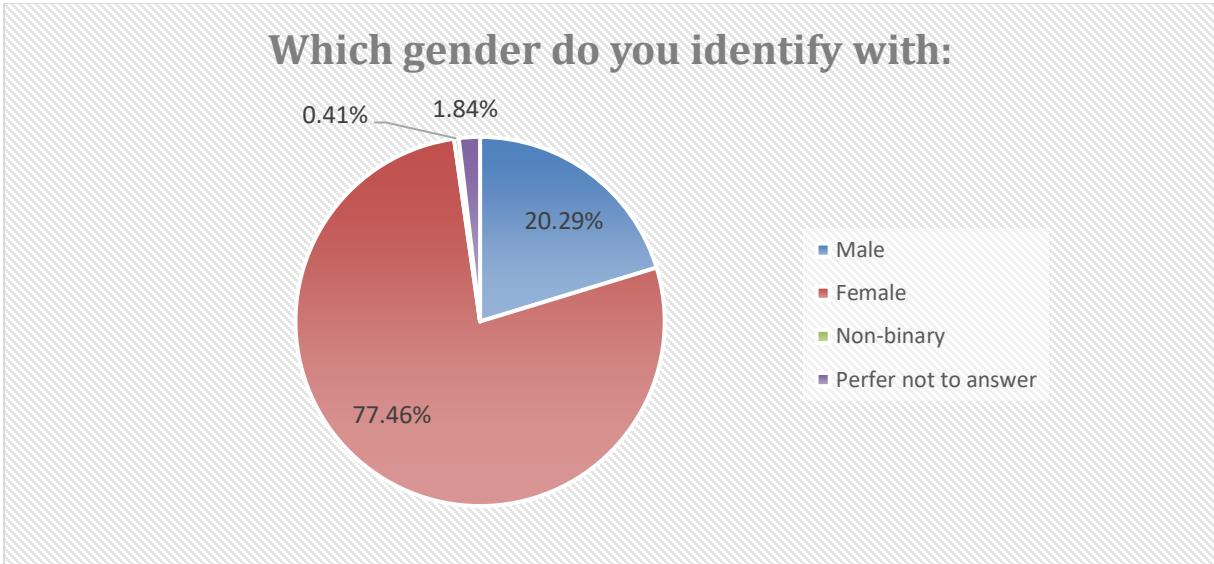
The results of both the community-at-large and community stakeholder surveys are provided in the next section.

VI. COMMUNITY HEALTH NEEDS ASSESSMENT RESULTS

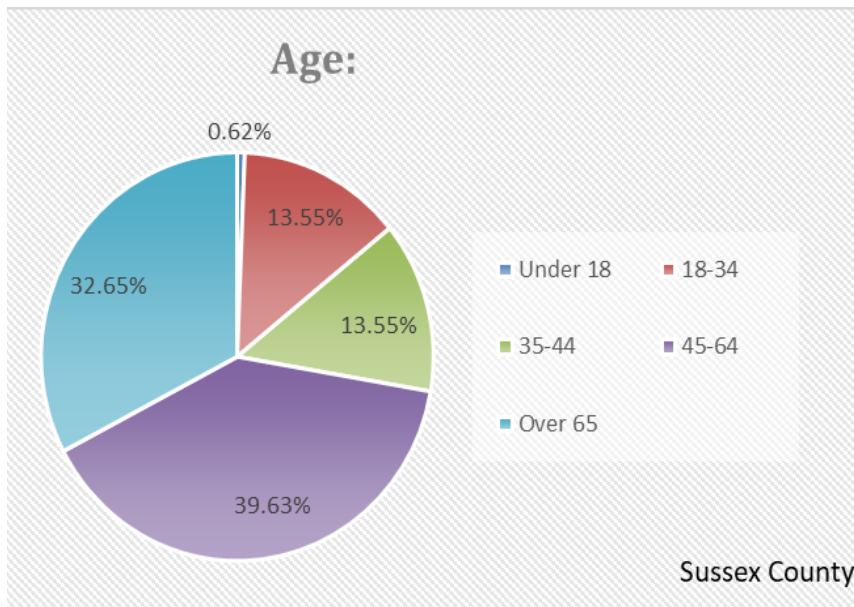
COMMUNITY-AT-LARGE SURVEY RESULTS

The community-at-large survey questions were mostly multiple choice with some areas of free response. In total, 488 community members completed the Sussex County community-at-large survey. The demographic results are below:

The majority of respondents were female (77.46%).

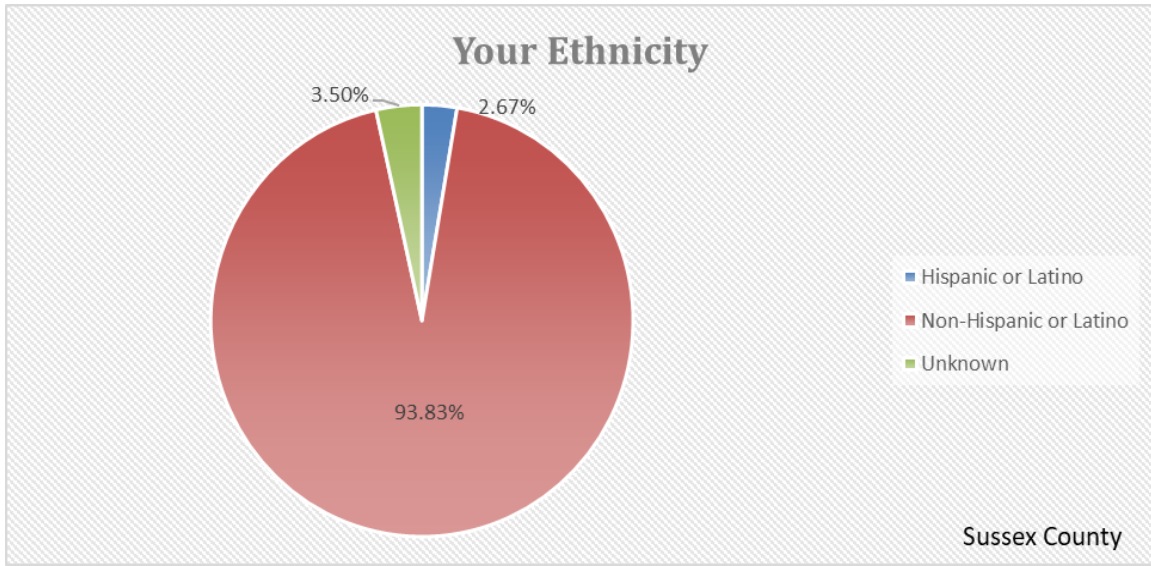


The age breakdown of the respondents is as follows:

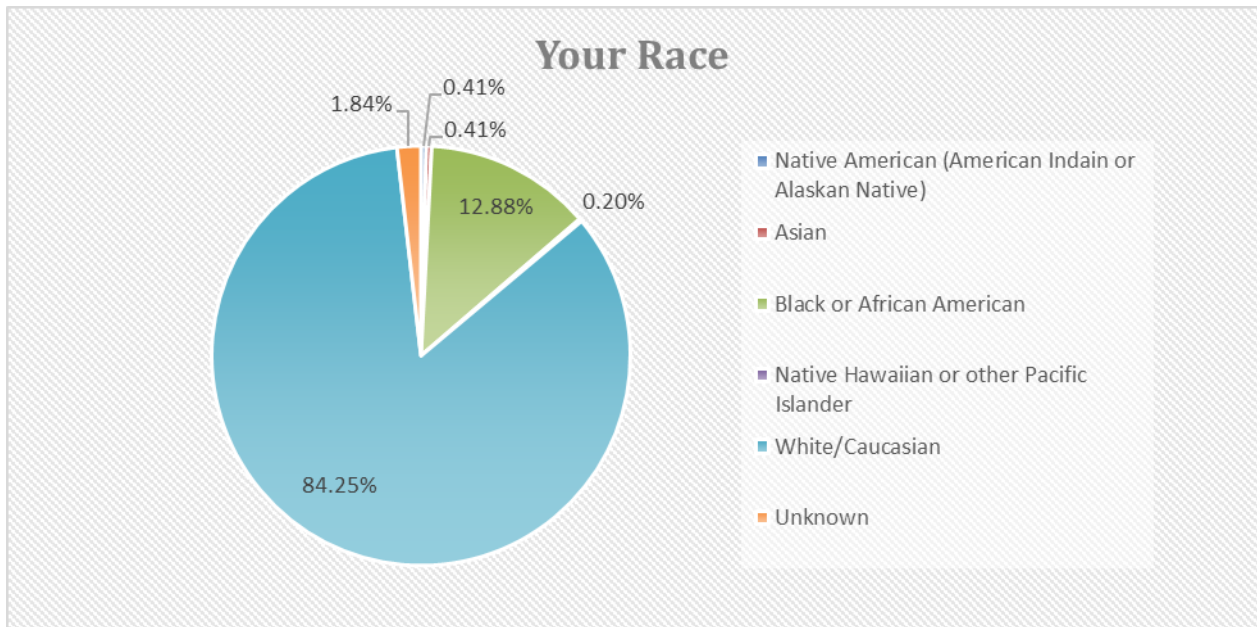


Under 18	0.62%	3
18-34	13.55%	66
35-44	13.55%	66
45-64	39.63%	193
Over 65	32.65%	159

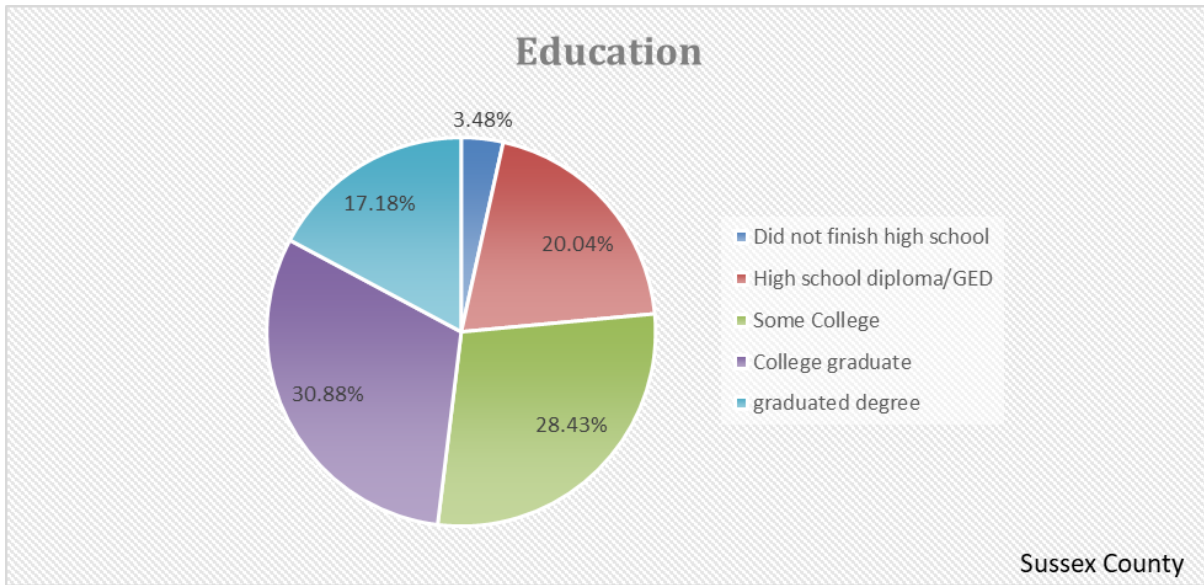
The predominant ethnicity was non-Hispanic or Latino (93.83%).



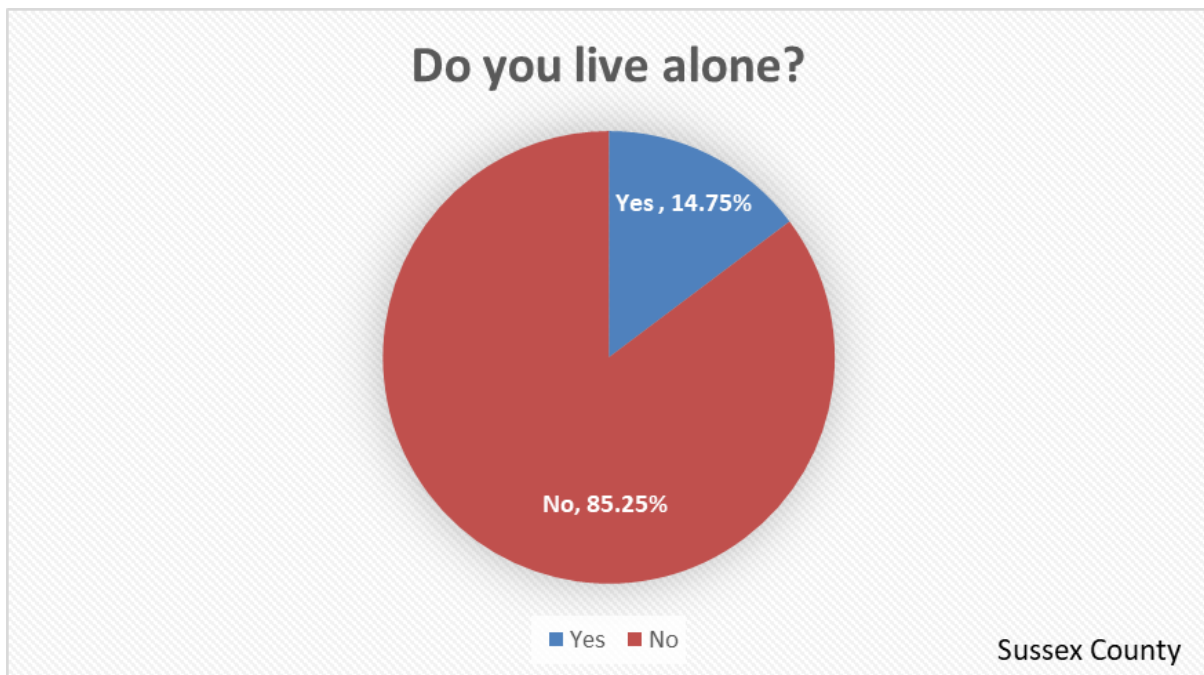
White/caucasian (84.25%) encompassed the majority of the responses followed by Black/ African American (12.88%).



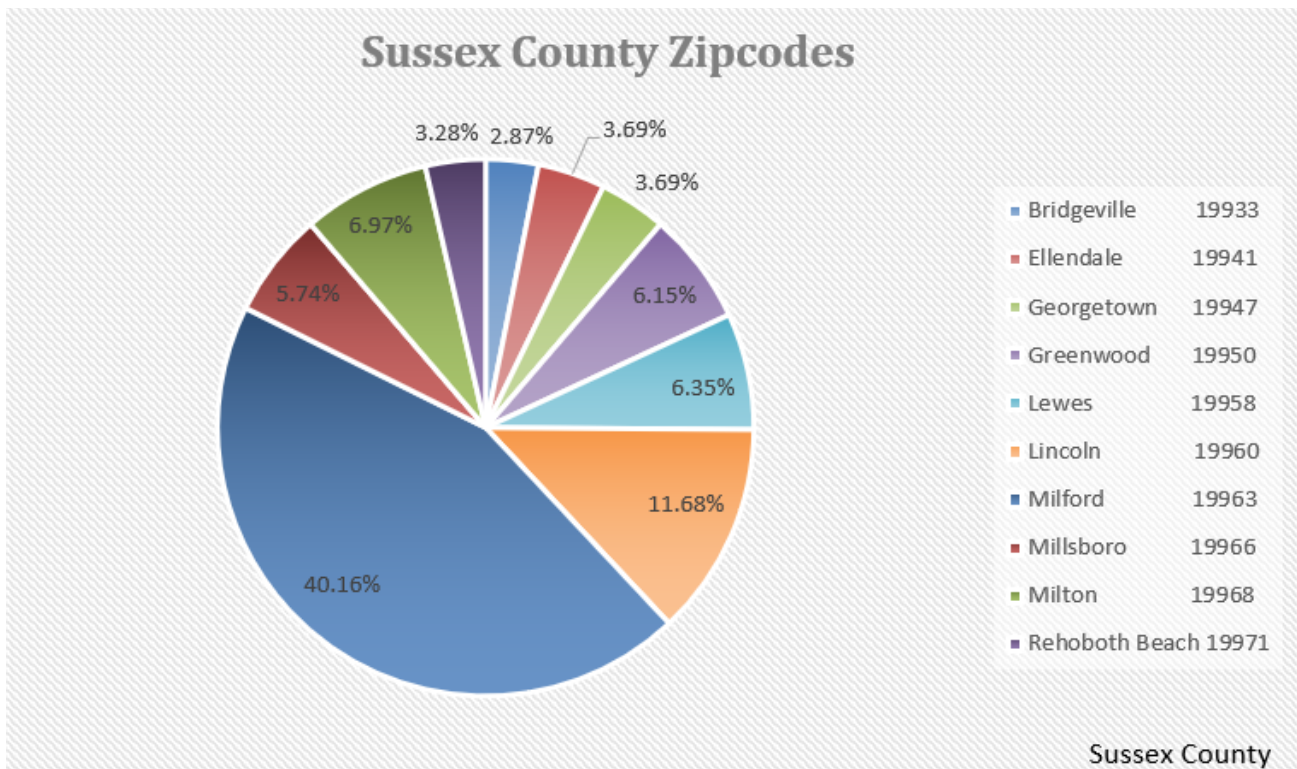
Most of the respondents were college graduates (30.88%), had some college (28.43%), and 20.04% had a high school diploma/GED.



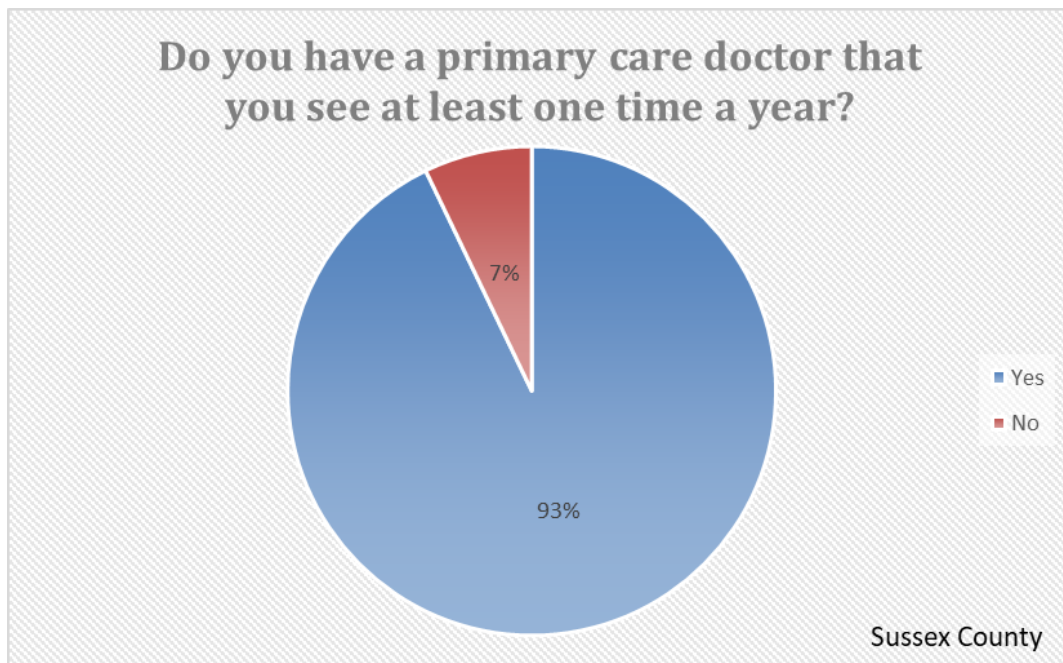
Of those who responded to the survey, 14.75% stated they lived alone.



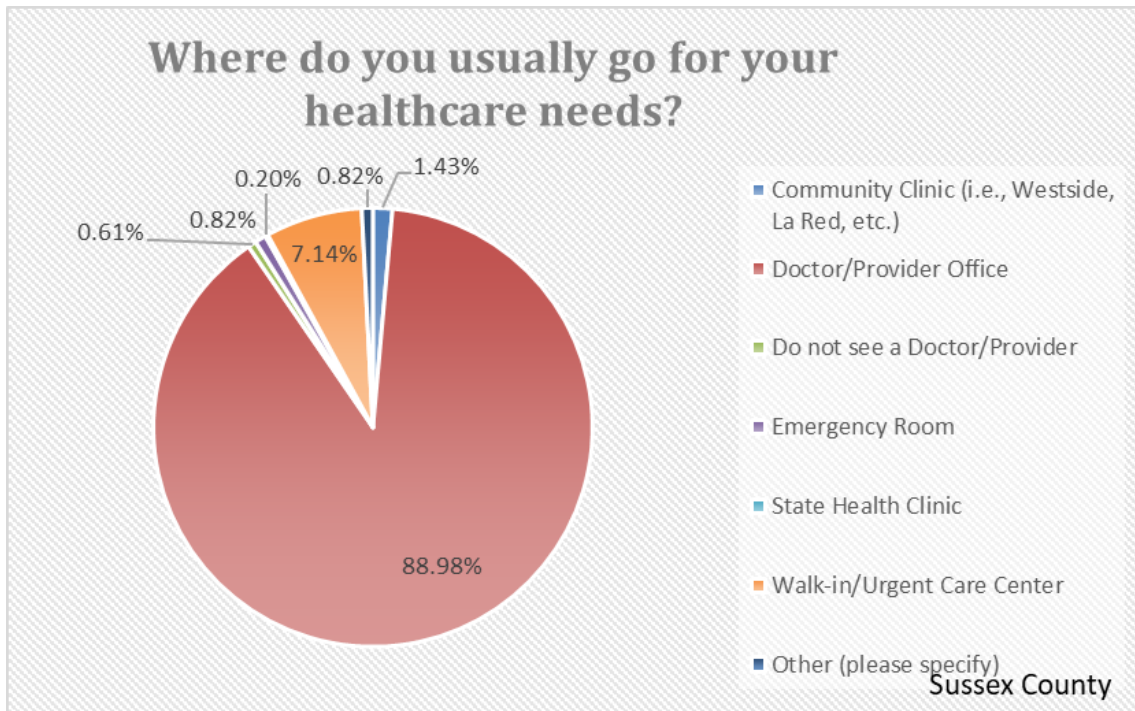
The following represent the towns where respondents stated they resided. *The top areas included Milford, Lincoln, Milton, and Greenwood, which mirror Bayhealth's service area in Sussex County.*



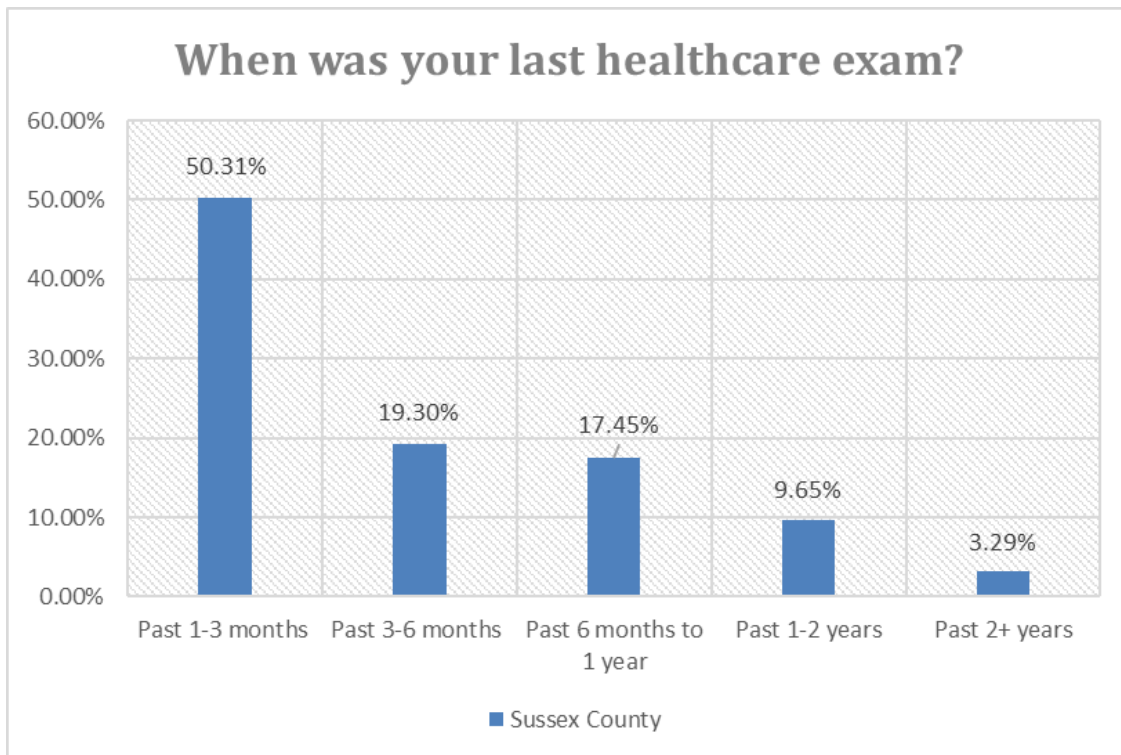
One of the first questions for the community-at-large stakeholder survey was “Do you have a primary care doctor that you see at least one time a year?” *93% of the respondents indicated that they did have a primary doctor that they see at least once a year.*



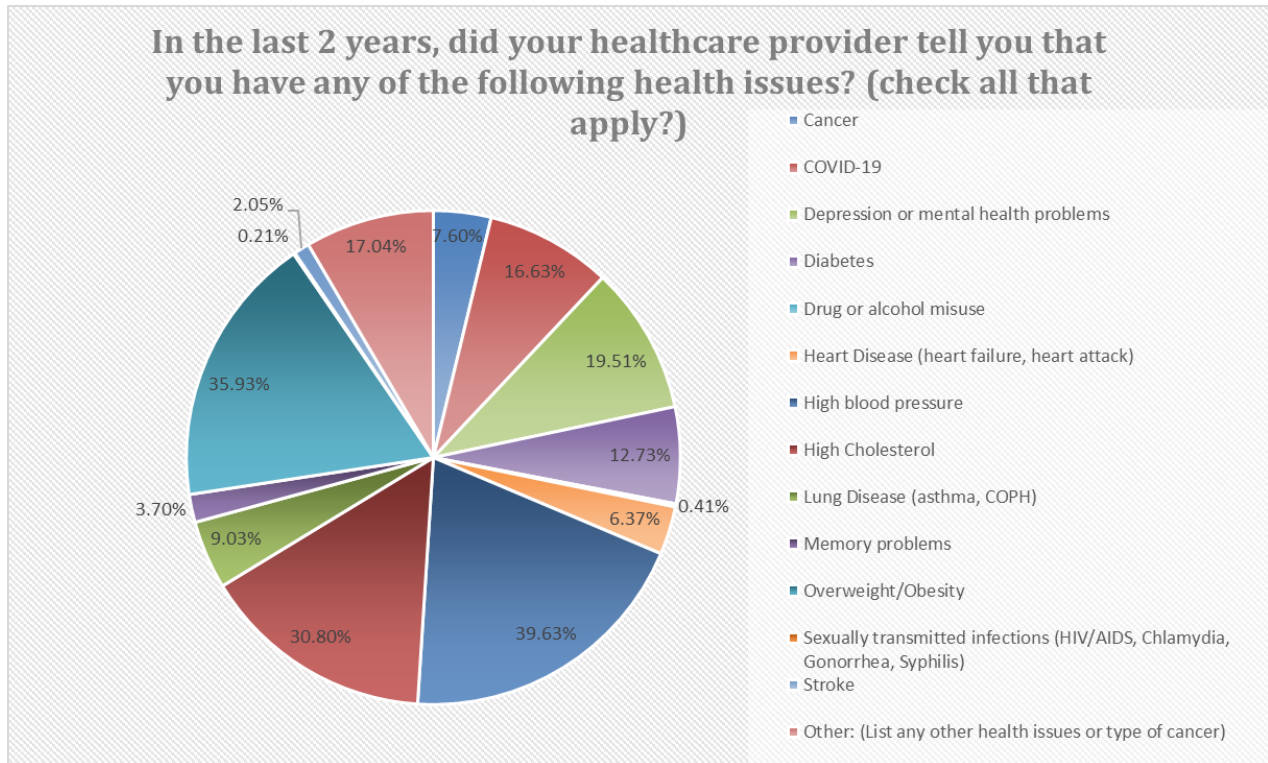
The next question was “Where do you usually go for healthcare needs?” *Doctor/Provider office was the most popular response and 88.98%. Walk-in/Urgent Care center was second with 7.14%.*



For the question, “When was your last healthcare exam?” almost *half of the respondents answered within the past 1 to 3 months.*

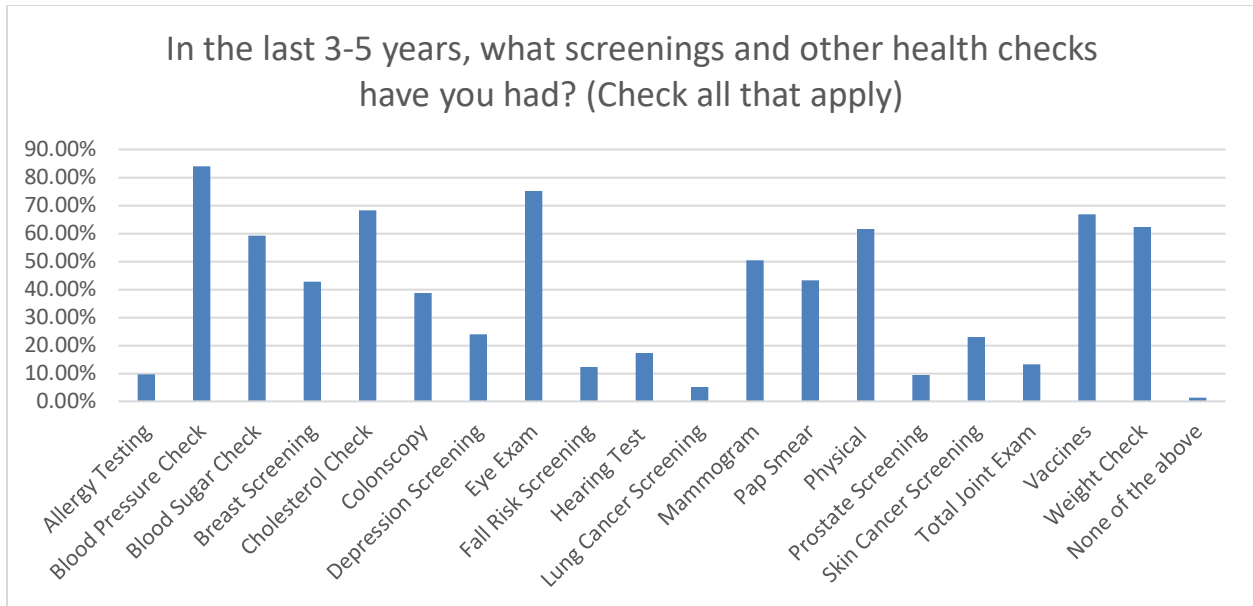


The next question looked at diseases; it asked, “In the last 2 years, did your healthcare provider tell you that you have any of the following?” *The top three most popular answers were high blood pressure (39.63%), overweight/obesity (35.93%) and high cholesterol (30.80%).*



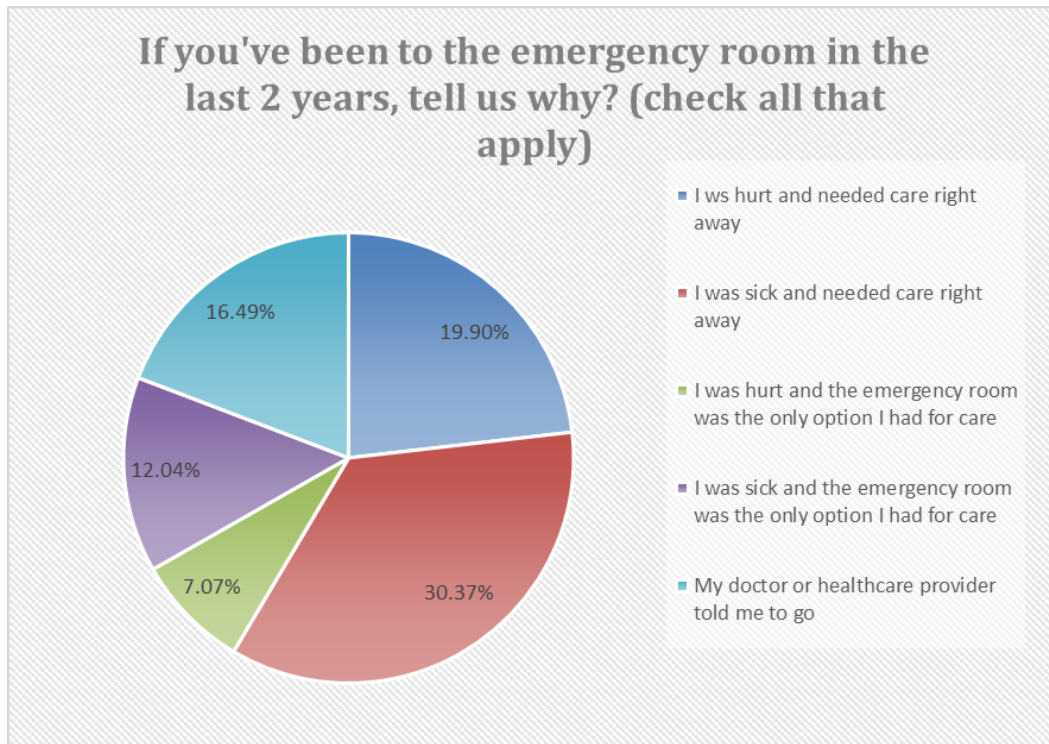
Cancer	7.60%
COVID-19	16.63%
Depression or mental health problems	19.51%
Diabetes	12.73%
Drug or alcohol misuse	0.41%
Heart Disease (heart failure, heart attack)	6.37%
High blood pressure	39.63%
High Cholesterol	30.80%
Lung Disease (asthma, COPH)	9.03%
Memory problems	3.70%
Overweight/Obesity	35.93%
Sexually transmitted infections (HIV/AIDS, Chlamydia, Gonorrhea, Syphilis)	0.21%
Stroke	2.05%
Other: (List any other health issues or type of cancer)	17.04%

For the question, “In the last 3 to 5 years, what screenings and other health checks have you had?”, the top five answers included blood pressure check (83.98%), eye exam (75.15%), cholesterol check (68.17%), vaccines (66.94%), and weight check (62.42%). The answers with the lowest responses included: allergy testing (9.65%), prostate screening (9.45%) and lung cancer screening (5.13%).

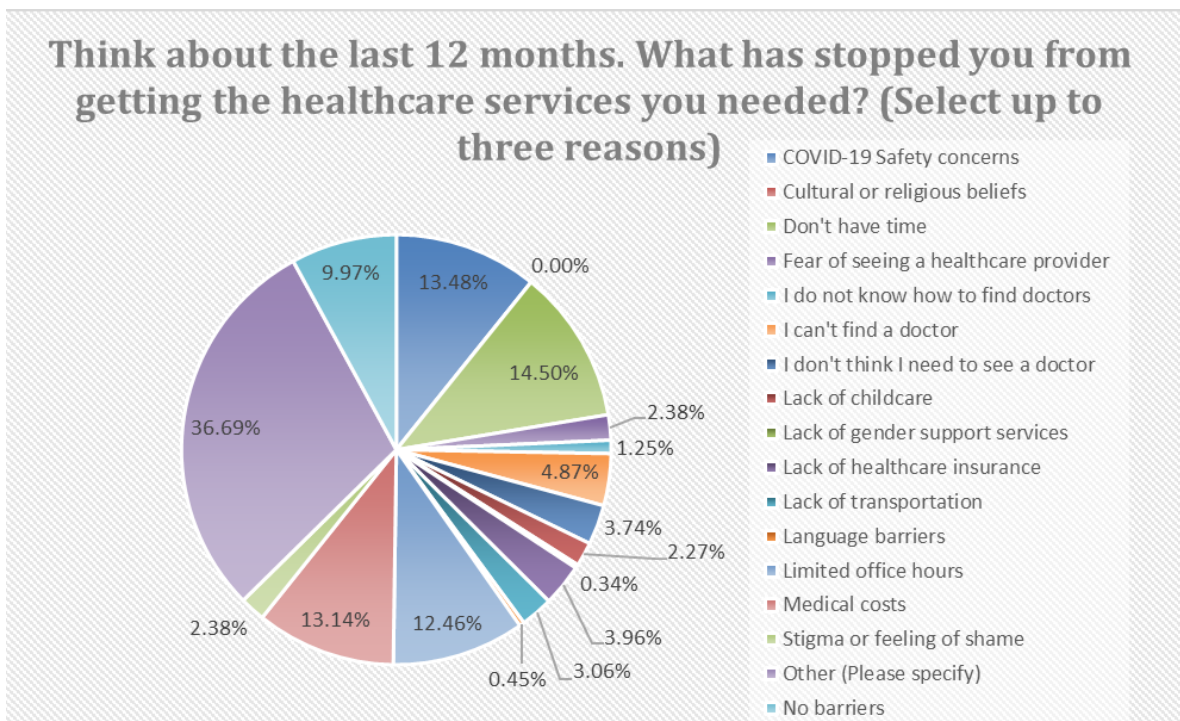


Allergy Testing	9.65%
Blood Pressure Check	83.98%
Blood Sugar Check	59.14%
Breast Screening	42.71%
Cholesterol Check	68.17%
Colonscopy	38.81%
Depression Screening	24.02%
Eye Exam	75.15%
Fall Risk Screening	12.32%
Hearing Test	17.25%
Lung Cancer Screening	5.13%
Mammogram	50.31%
Pap Smear	43.33%
Physical	61.60%
Prostate Screening	9.45%
Skin Cancer Screening	23.00%
Total Joint Exam	13.14%
Vaccines	66.94%
Weight Check	62.42%
None of the above	1.23%

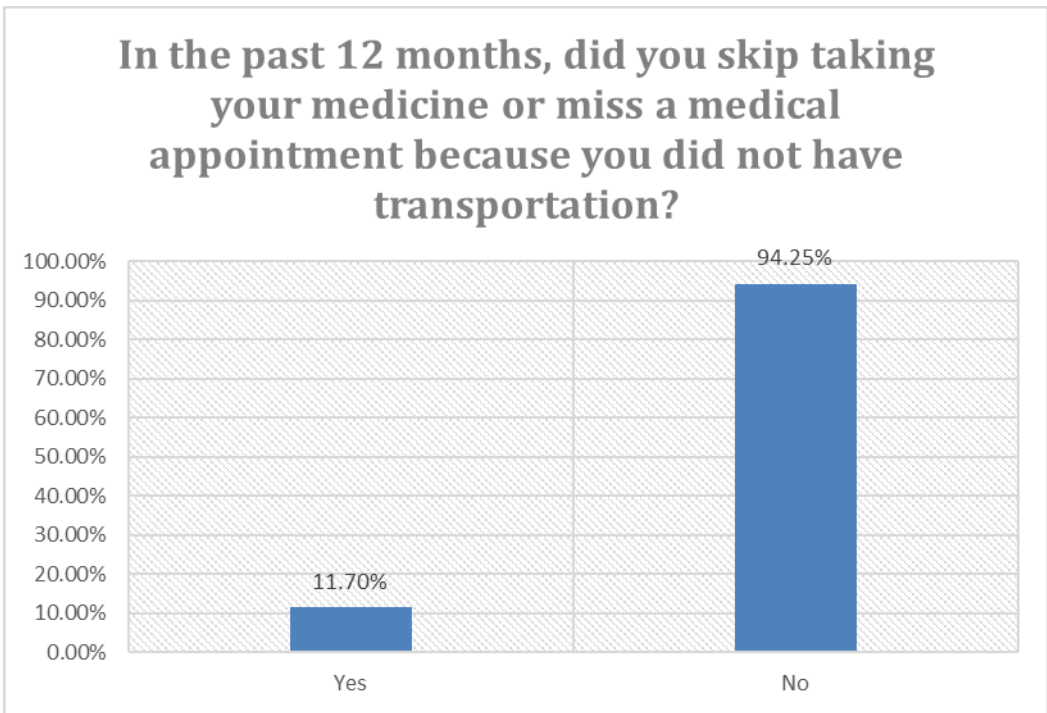
The next question was “If you’ve been to the Emergency Room in the last 2 years, tell us why?” Of those that answered, 30.37% stated “I was sick and needed care right away” followed by 19.90% of people who indicated “I was hurt and needed care right away.” In addition, 16.49% stated “My doctor or healthcare provider told me to go.”



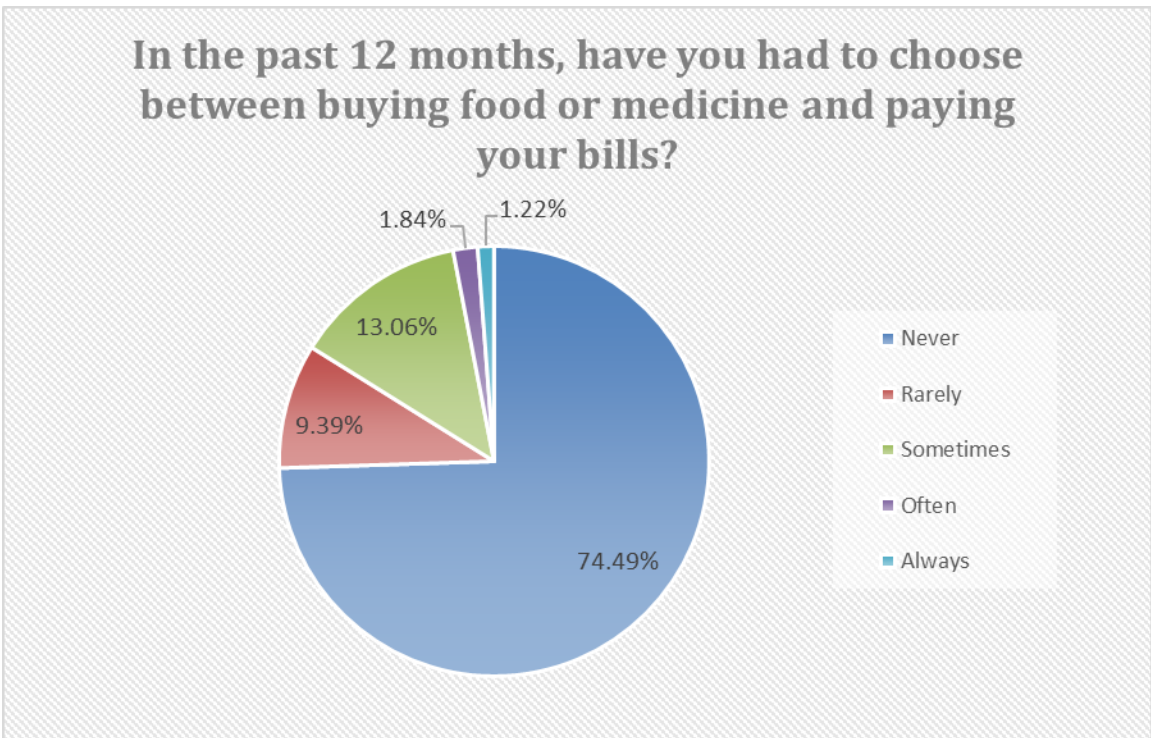
The next question on the survey asked “Think about the last 12 months. What has stopped you from getting the healthcare services you needed?” The top 3 responses were: “No barriers (42.92%), COVID-19 safety concerns (24.02%), and limited office hours (11.91%).”



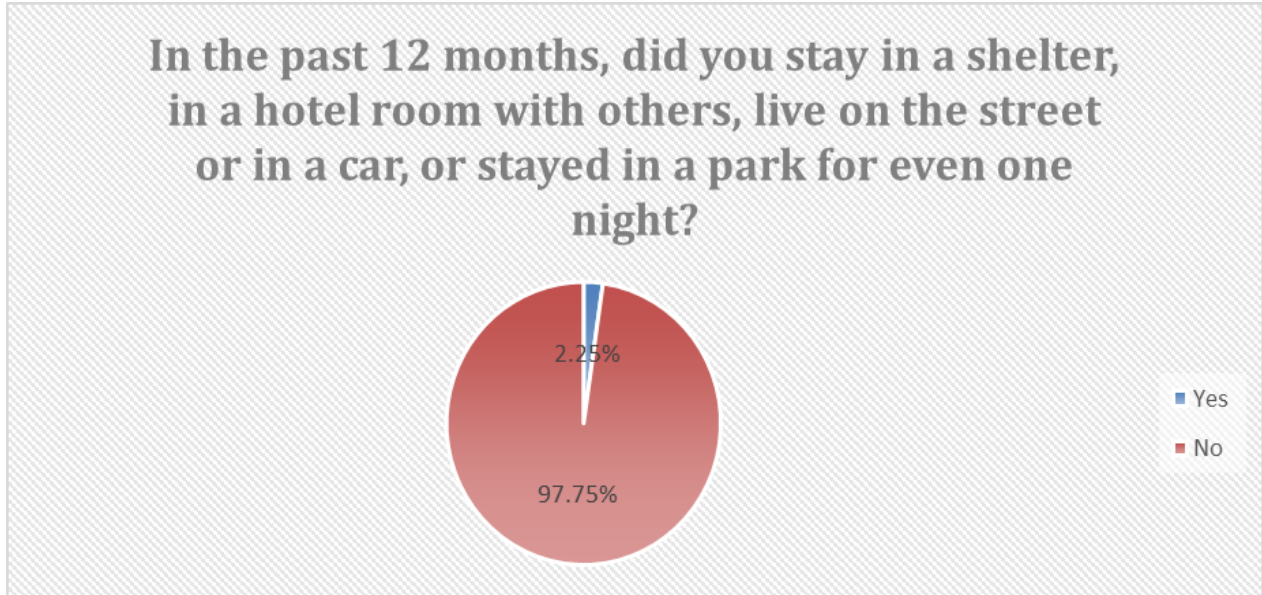
When asked “In the past 12 months, did you skip taking your medicine or miss a medical appointment because you did not have transportation?”, 94.25% answered “No.”



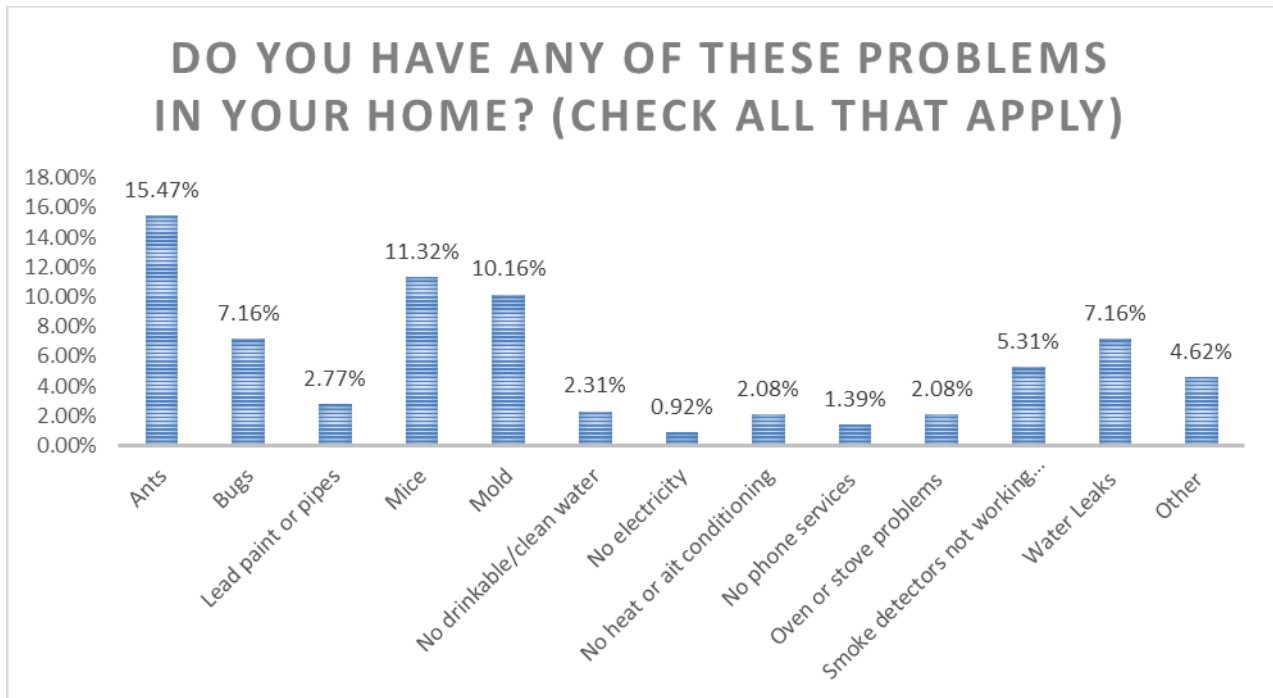
For the question “In the past 12 months, have you had to choose between buying food or medicine and paying your bills?”, 74.49% stated “Never” and 13.06% stated “Sometimes.”



The survey then asked, “In the past 12 months, did you stay in a shelter, in a hotel room with others, live on the street or in a car, or stayed in a park for even one night?” 97.75% stated “No.”

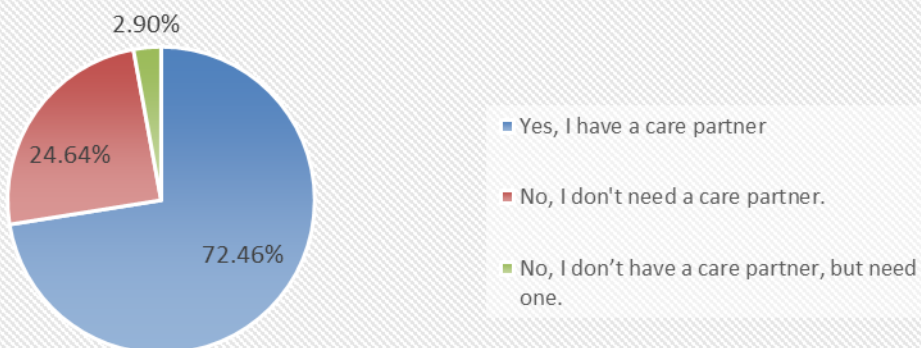


The next question was “Do you have any of these problems in your home?” The top answers included: *ants* (15.47%), *mice* (11.32%), *mold* (10.16%), *water leaks* (7.16%), and *bugs* (7.16%).



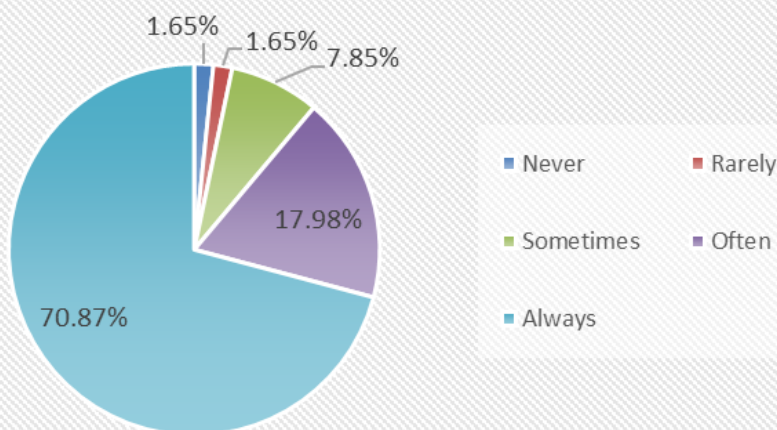
When asked about care partners, the following data was obtained: 72.46% of respondents had a care partner, 2.90% did not have a care partner, but needed one, and 24.64% did not feel they needed a care partner.

Having support from friends and family is helpful. Do you have someone who is care partner to help you with questions about healthcare, help fill medications for you, or help drive you to appointments?

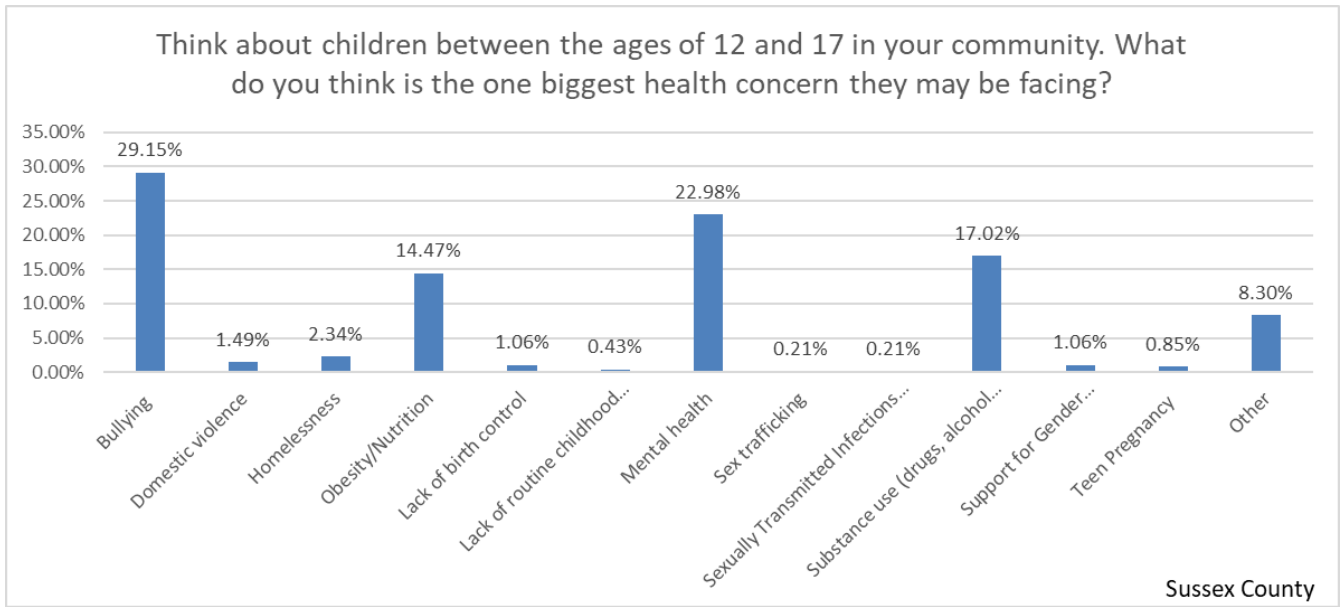


For the question "Does your healthcare provider explain things to you in a way that you can understand?", 70.87% of responses indicated "Always", while 17.98% answered "Often" and 7.85% answered "Sometimes."

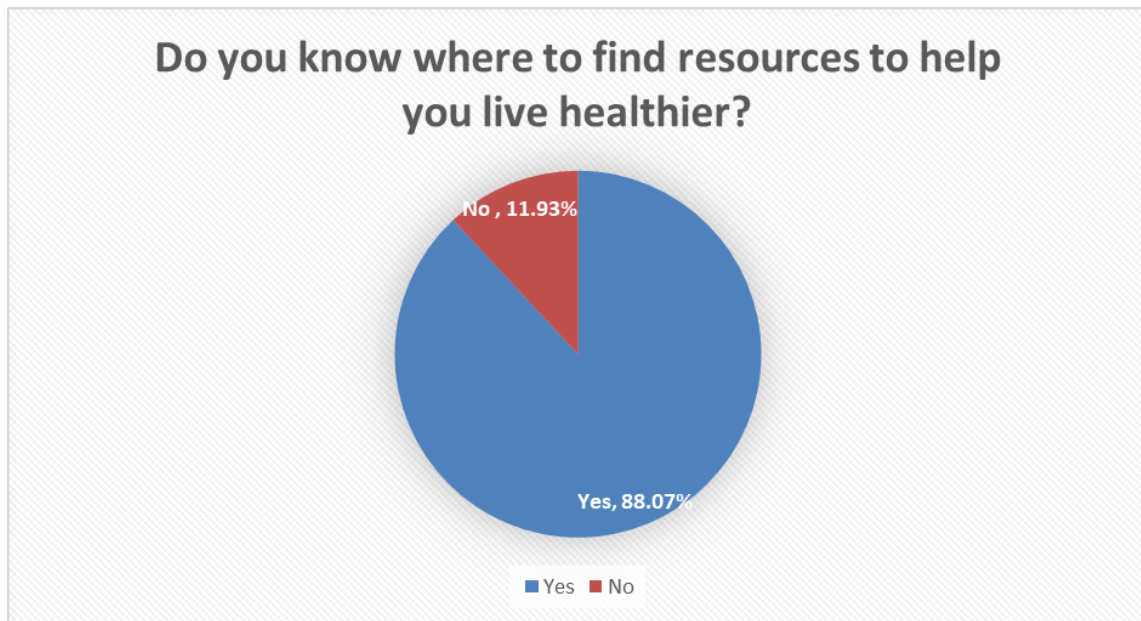
Does your healthcare provider explain things to you in a way that you can understand?



The next question asked “Think about children between the ages of 12 and 17 in your community. What do you think is one the biggest health concerns they may be facing?” *The top three answers were: bullying (29.15%), mental health (22.98%), and substance use (drugs, alcohol, vaping) (17.02%).*



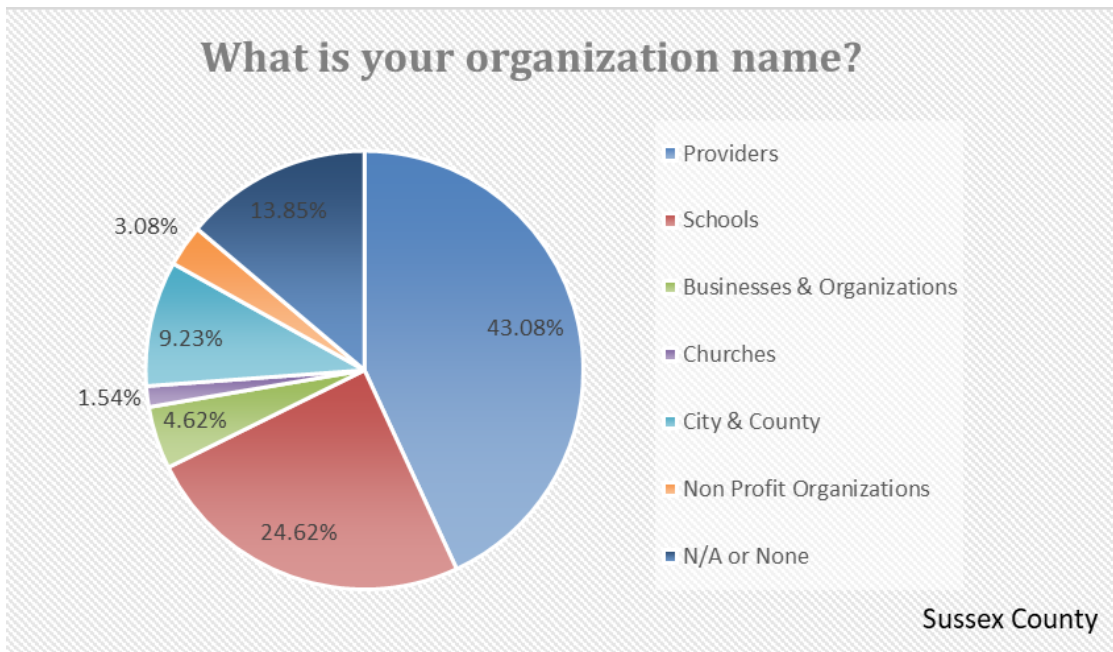
The last question on the survey was “Do you know where to find resources to help you live healthier?” 88.07% of respondents answered “Yes.”



COMMUNITY STAKEHOLDER SURVEY RESULTS

The community stakeholder survey questions were also mostly multiple choice with a few areas of free text. The questions very much mirrored the community-at-large survey, but asked participants to answer the questions based on their roles and knowledge as a community stakeholder who serves members of the community.

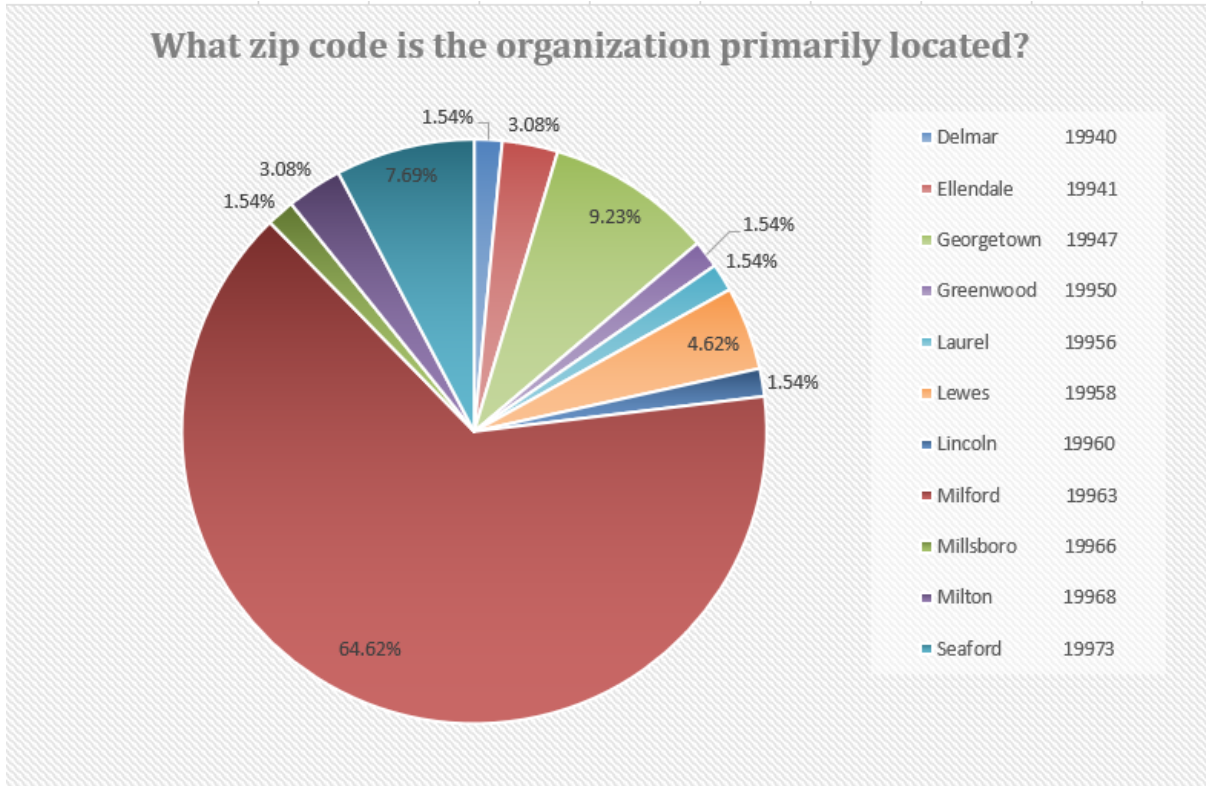
In total, 65 different community stakeholders responded. The categories of the stakeholders are as follows: 43.08% *medical providers*, 24.62% *schools*, 13.85% *other*, 9.23% *government*, 4.62% *businesses and organizations*, 3.08% *non-profit organizations*, and 1.54% *churches*.



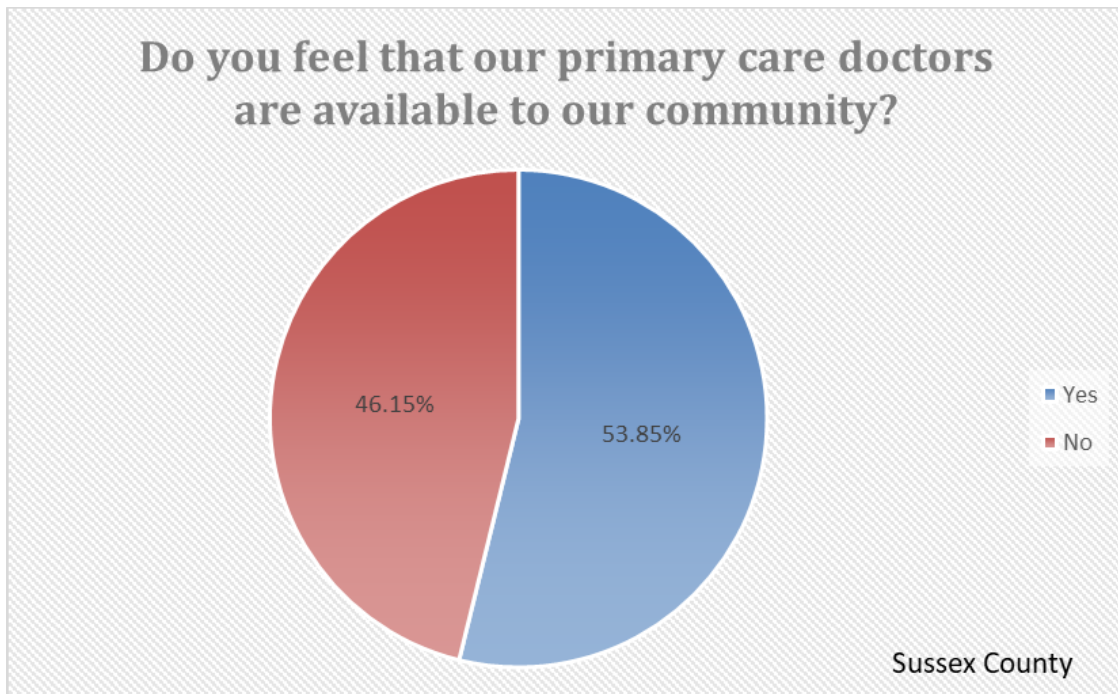
The breakdown of stakeholder roles is below.



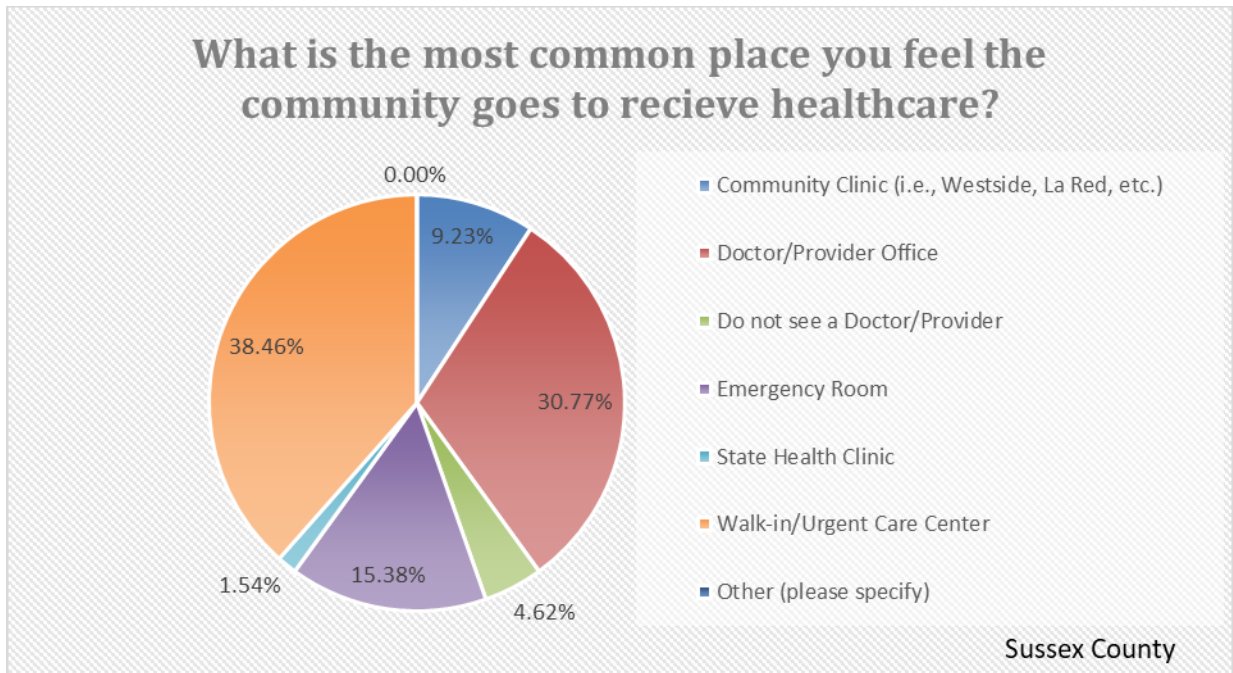
The following areas were represented with *Milford capturing the majority at 64.62%*.



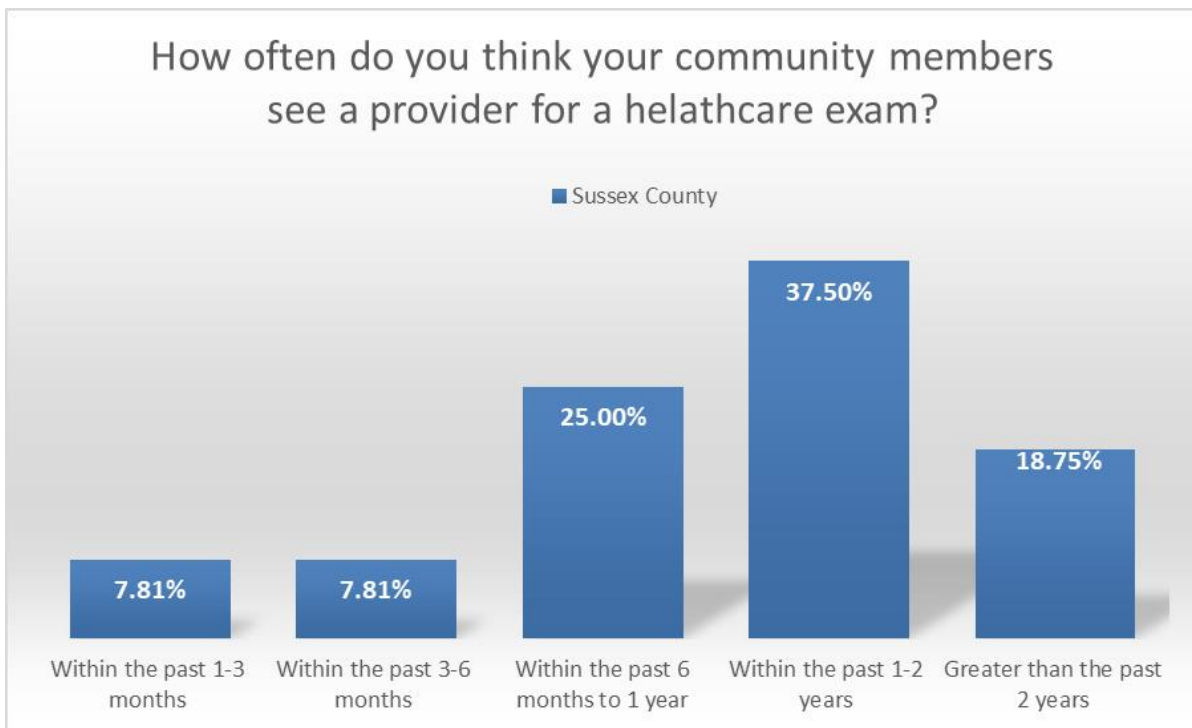
One of the first questions for the stakeholders was “Do you feel that our primary care doctors are available to our community?” *53.85% felt that yes, they were available and 46.15% felt they were not available.*



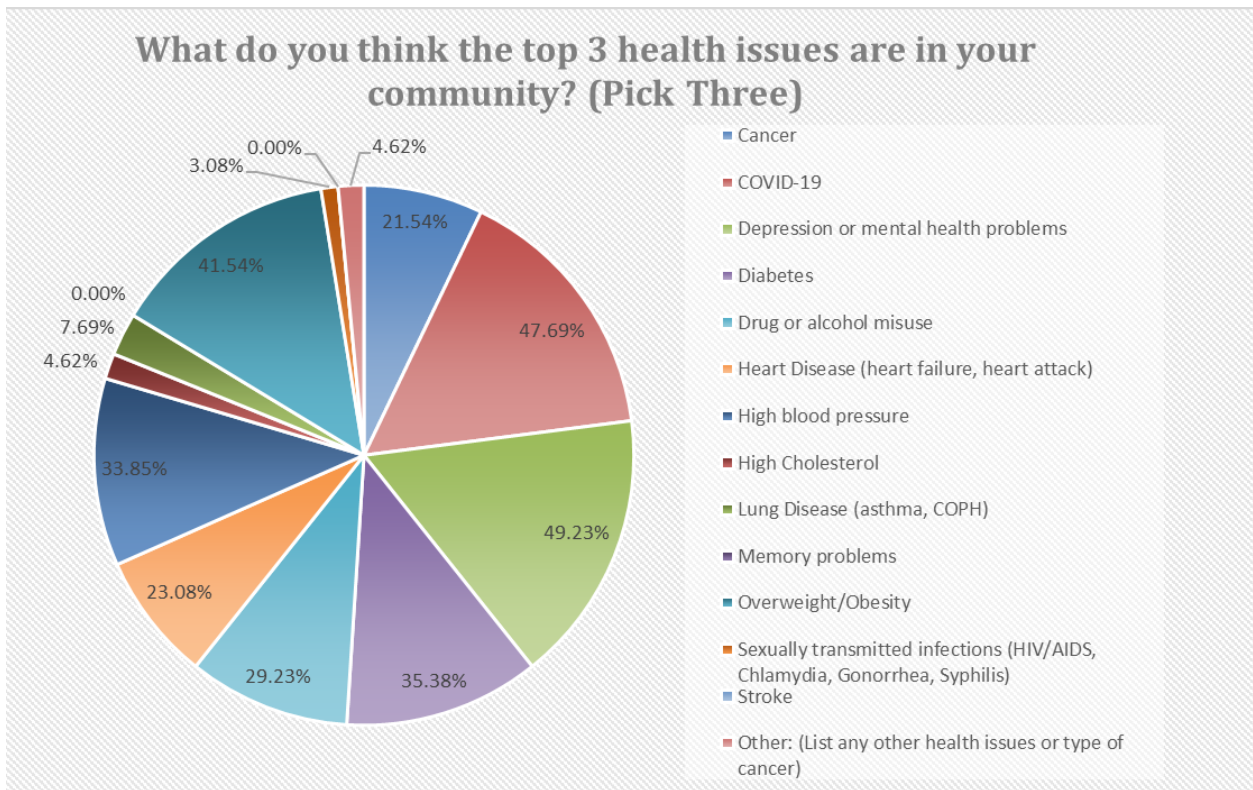
The next question was “What is the most common place you feel the community goes to receive healthcare?” The top three answers were *Walk-in/Urgent Care Center (38.46%)*, *Doctor/Provider office (30.77%)*, and *the Emergency Room (15.38%)*.



When asked “How often do you think your community members see a provider for a healthcare exam?”, *the majority answered within the past one to two years (37.50%)*.

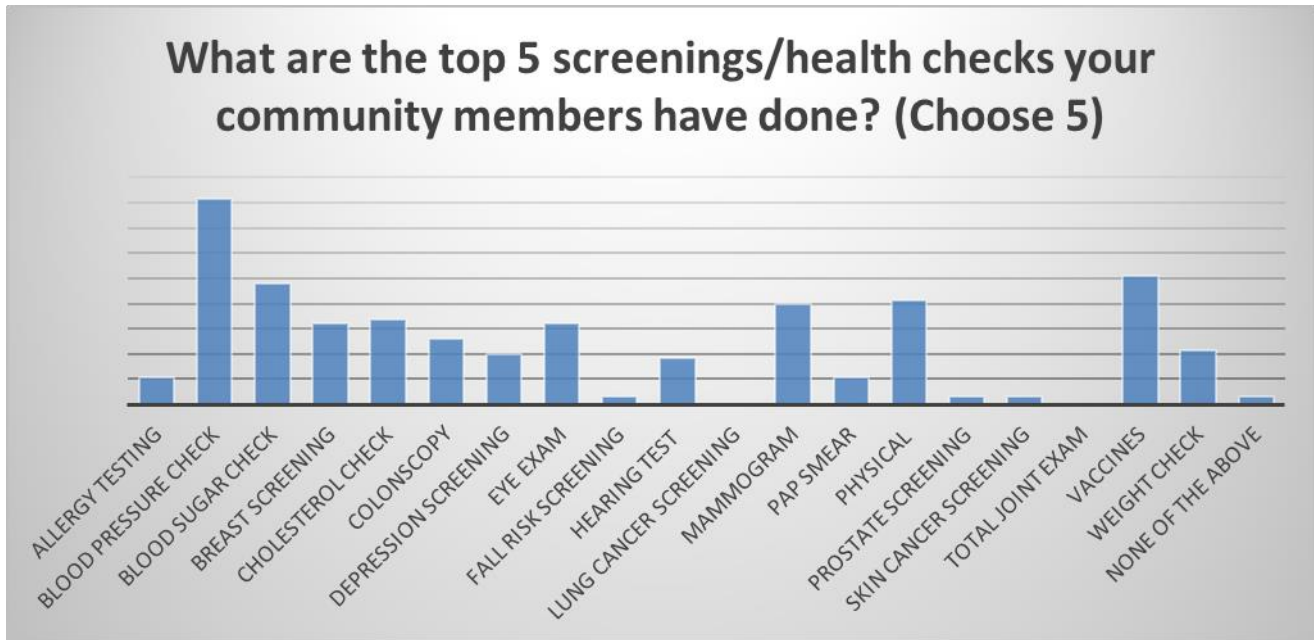


For the question “What do you think the top three health issues are in your community?”, the top three answers were depression or mental health problems (49.23%), COVID-19 (47.69%), and overweight/obesity (41.54%).

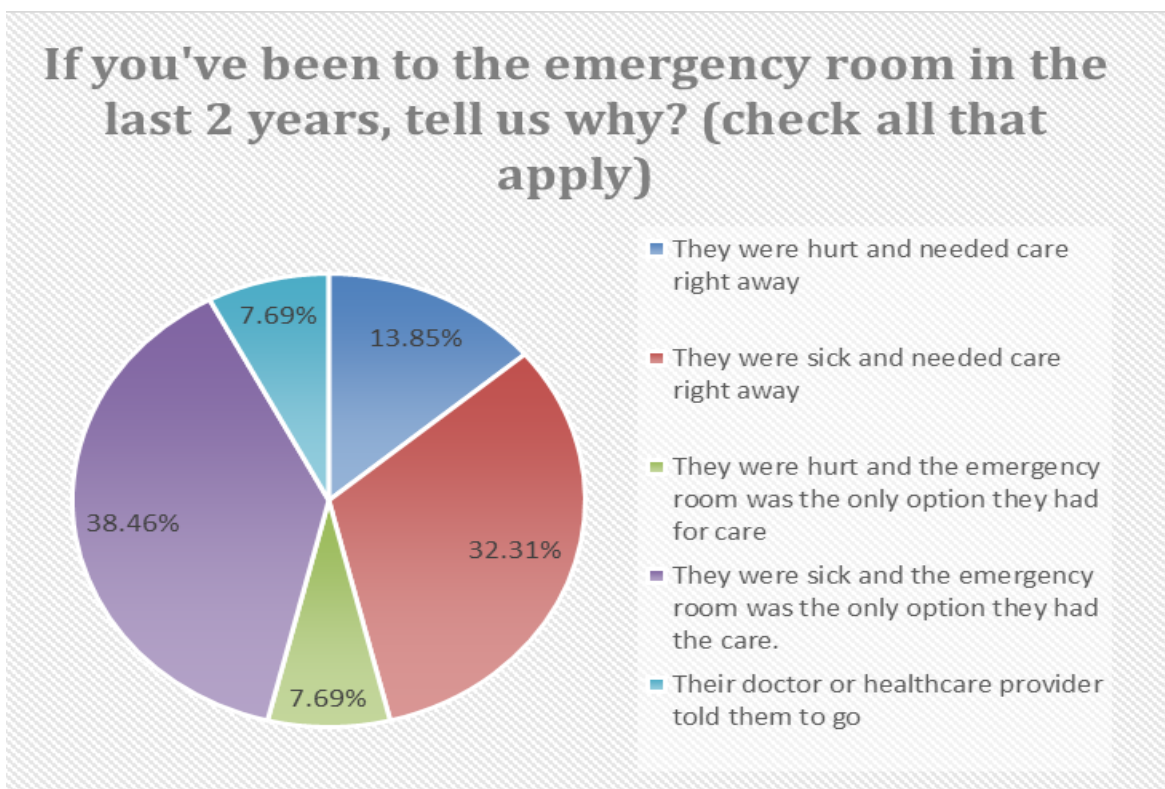


Answer Choices	Responses
Cancer	21.54%
COVID-19	47.69%
Depression or mental health problems	49.23%
Diabetes	35.38%
Drug or alcohol misuse	29.23%
Heart Disease (heart failure, heart attack)	23.08%
High blood pressure	33.85%
High Cholesterol	4.62%
Lung Disease (asthma, COPH)	7.69%
Memory problems	0.00%
Overweight/Obesity	41.54%
Sexually transmitted infections (HIV/AIDS, Chlamydia, Gonorrhea, Syphilis)	3.08%
Stroke	0.00%
Other: (List any other health issues or type of cancer)	4.62%

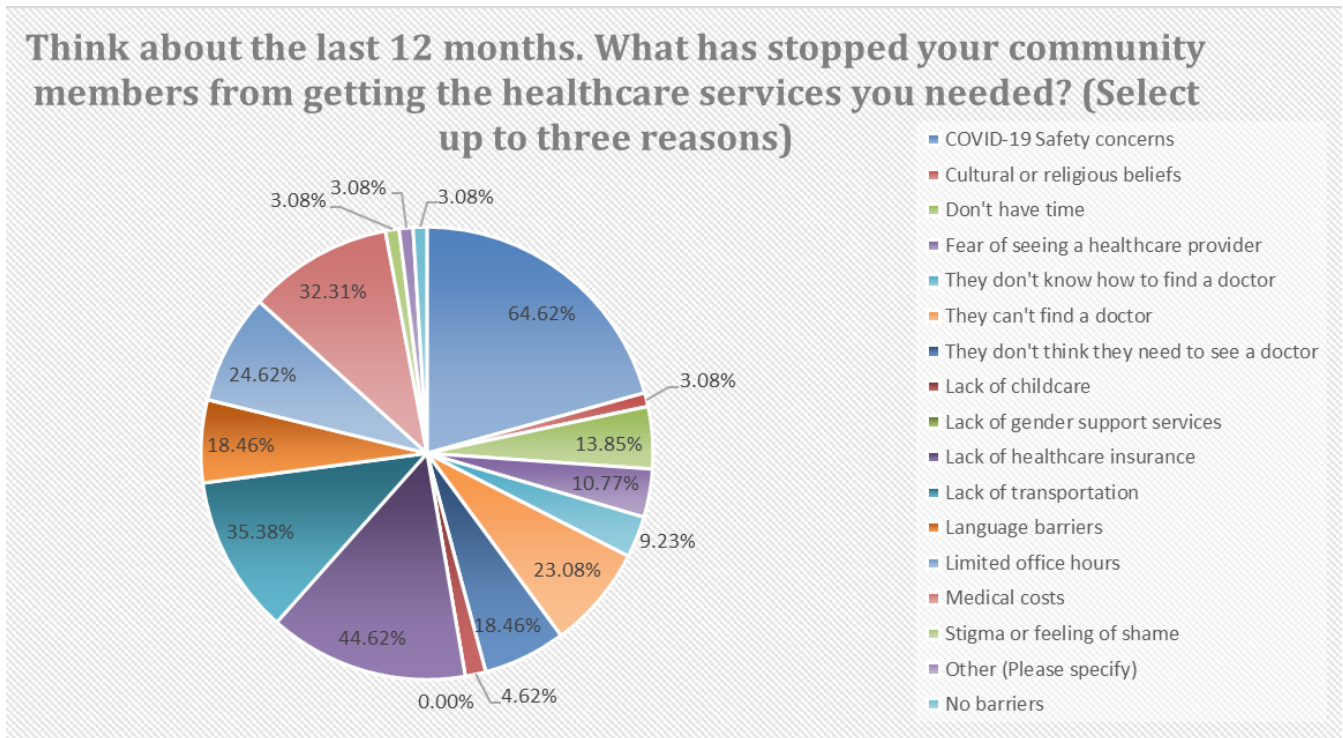
The next question was “What are the top five screenings/health checks your community members have done?” *The top five most popular answers were blood pressure check (81.54%), vaccines (50.77%), blood sugar check (47.69%), physical (41.54%), and mammogram (40%).*



Another question was “What is the primary reason your community members go to the Emergency Room?” *The most popular answers were “they were sick and the emergency room was the only option they had for care” (38.46%) and “they were sick and needed care right away” (32.31%).*

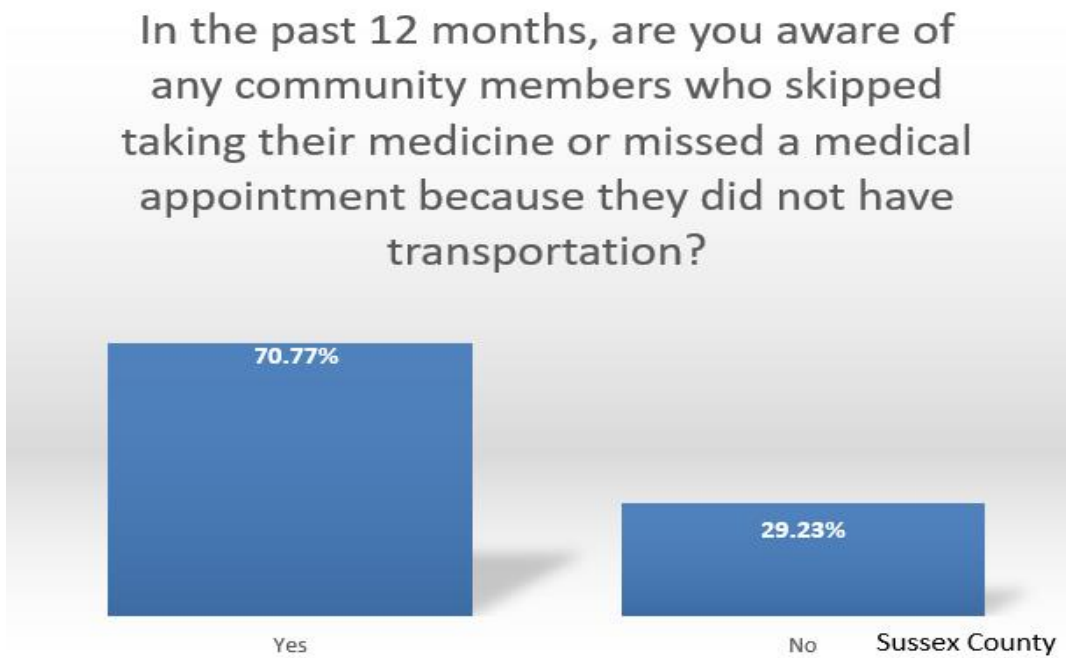


When asked “Think about the last 12 months. What has stopped your community members from getting the healthcare services they needed?”, the top answers were COVID-19 safety concerns (64.62%), lack of health insurance (44.62%), medical costs (32.31%), limited office hours (24.62%) as well as they can’t find a doctor (23.08%).

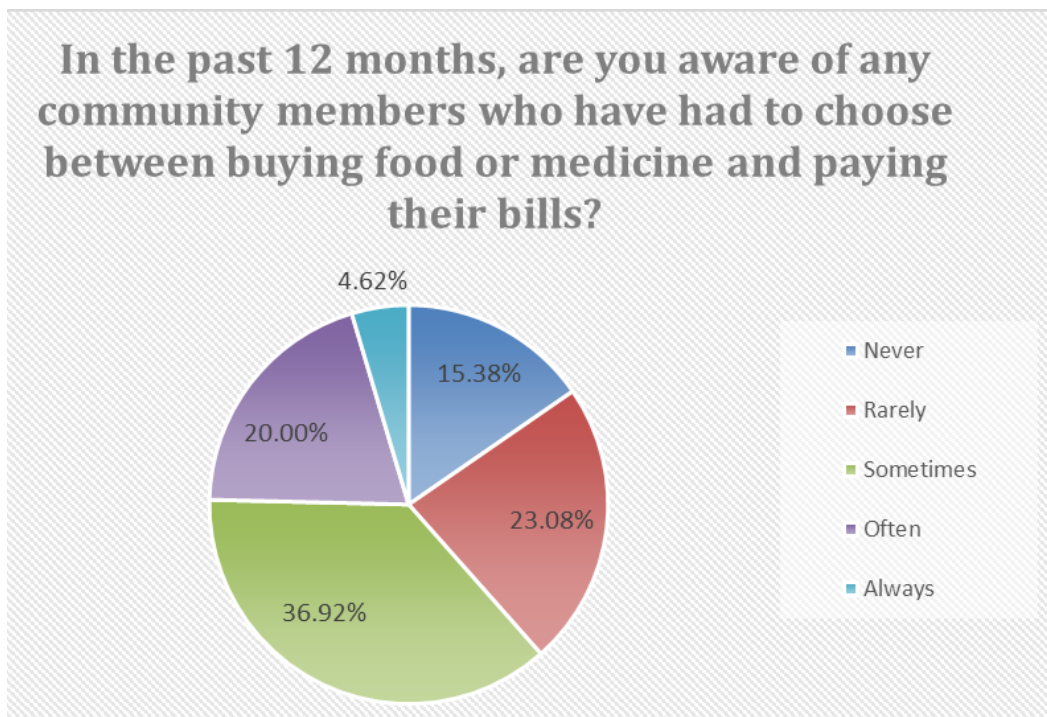


COVID-19 Safety concerns	64.62%
Cultural or religious beliefs	3.08%
Don't have time	13.85%
Fear of seeing a healthcare provider	10.77%
They don't know how to find a doctor	9.23%
They can't find a doctor	23.08%
They don't think they need to see a doctor	18.46%
Lack of childcare	4.62%
Lack of gender support services	0.00%
Lack of healthcare insurance	44.62%
Lack of transportation	35.38%
Language barriers	18.46%
Limited office hours	24.62%
Medical costs	32.31%
Stigma or feeling of shame	3.08%
Other (Please specify)	3.08%
No barriers	3.08%

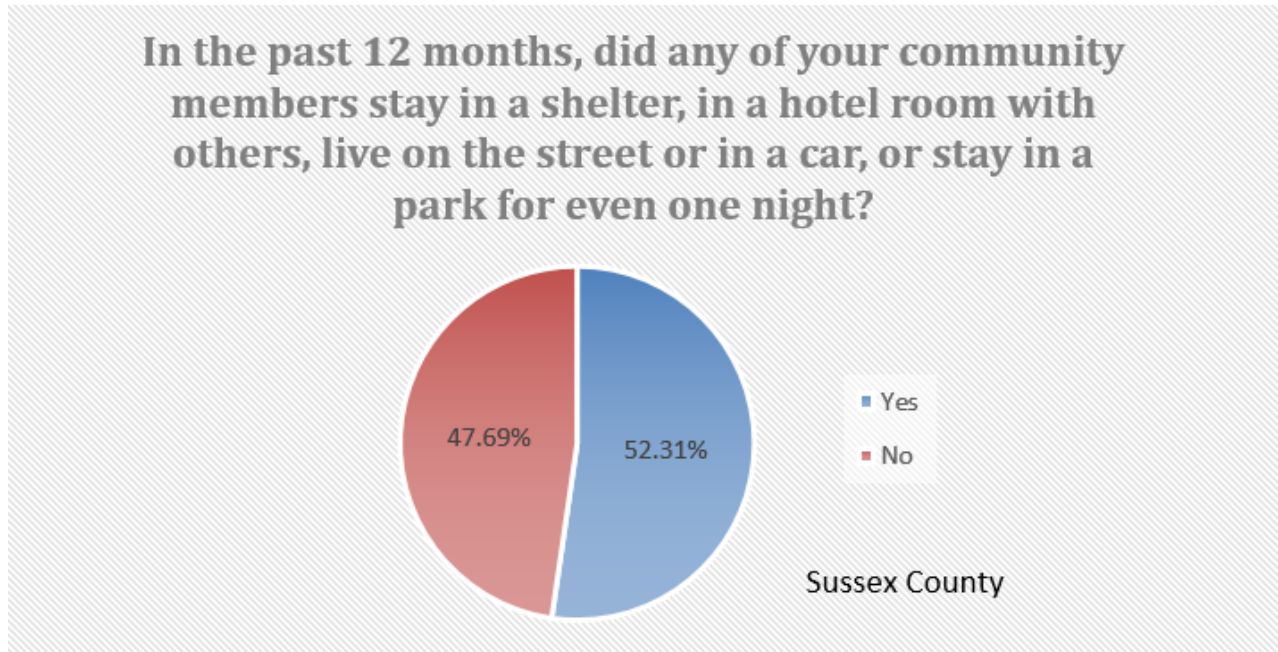
For the question “In the past 12 months, are you aware of any community members who skipped taking their medicine or missed a medical appointment because they did not have transportation?”, *the majority of participants stated “Yes” (70.77%).*



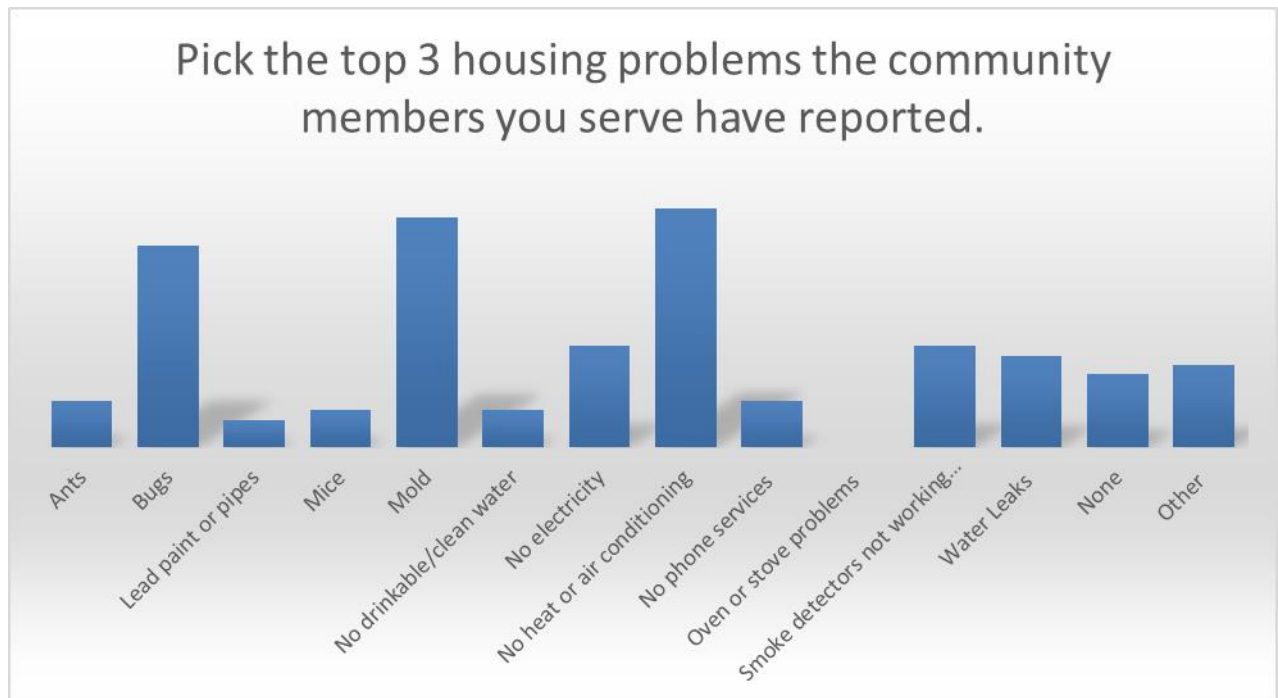
The next question was “In the past 12 months, are you aware of any community members who have had to choose between buying food or medicine and paying their bills?” *The most popular answer was “Sometimes” (36.92%) followed by “Rarely” (23.08%) and Often (20%).*



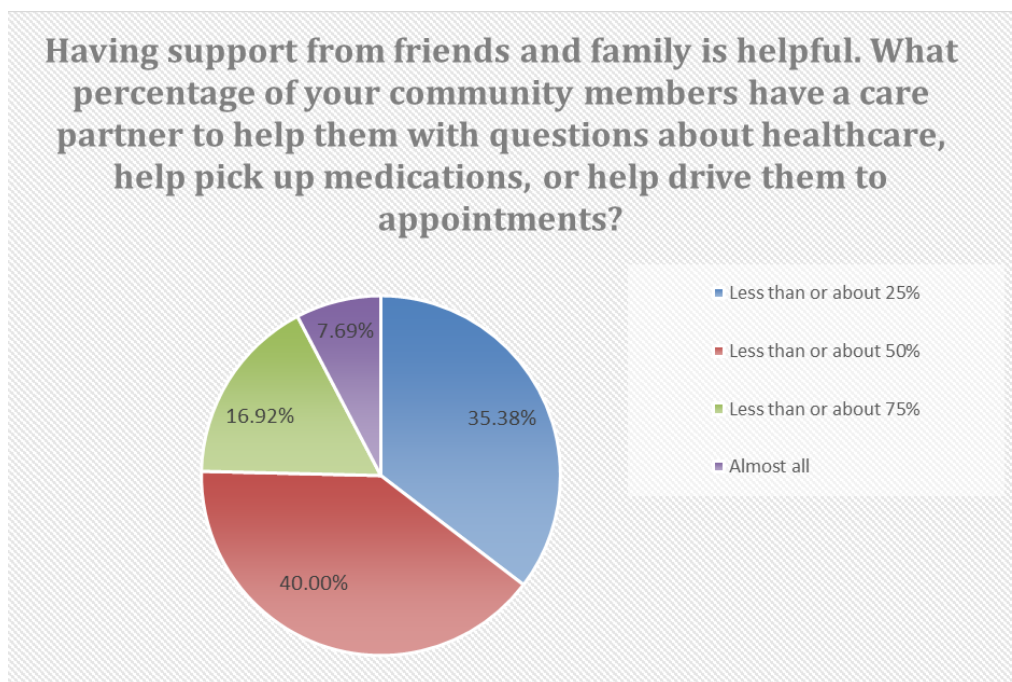
Another question was “In the past 12 months, did any of the community members you assist have to stay in a shelter, in a hotel room with others, live on the street or in a car, or stay in a park for even one night?” 52.31% stated “Yes” to this question. Interestingly enough there were multiple free text comments that stated “hotel” as well as “shelter”.



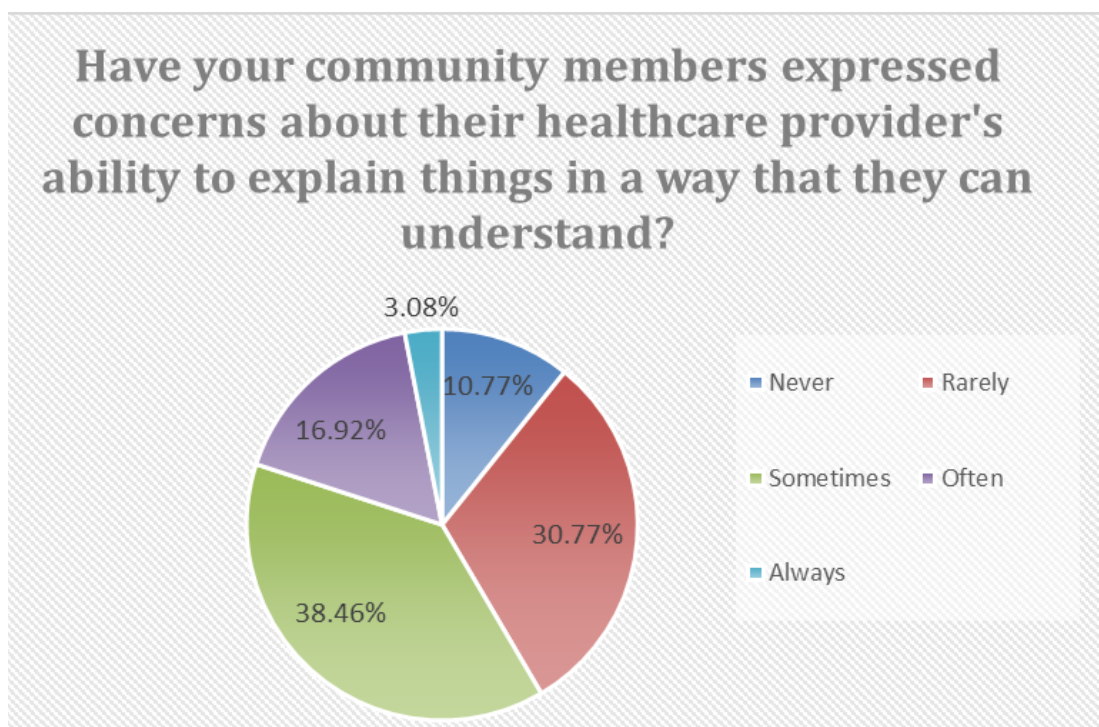
When asked to “Pick the top 3 housing problems the community members you serve have reported,” the top three answers were “no heat or air conditioning” (40%), “mold” (38.46%), and “bugs” (33.85%).



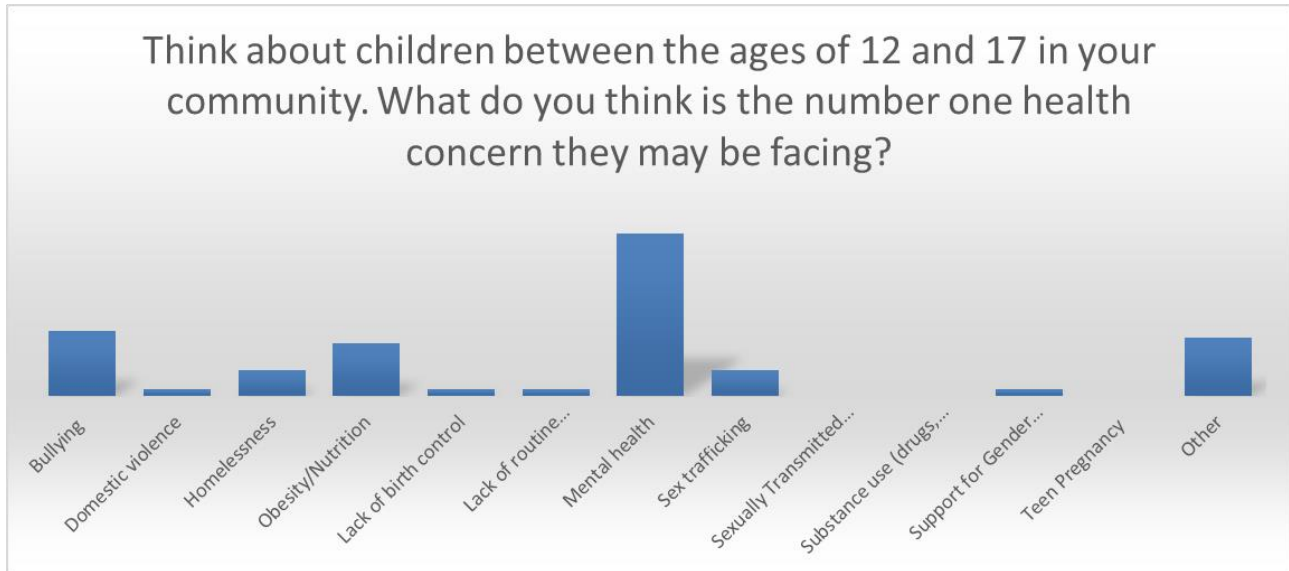
For the question “Having support from friends and family is helpful. What percentage of your community members have a care partner to help them with questions about healthcare, help pick up medications, or help drive them to appointments?”
40% of respondents stated the less than or about 50%.



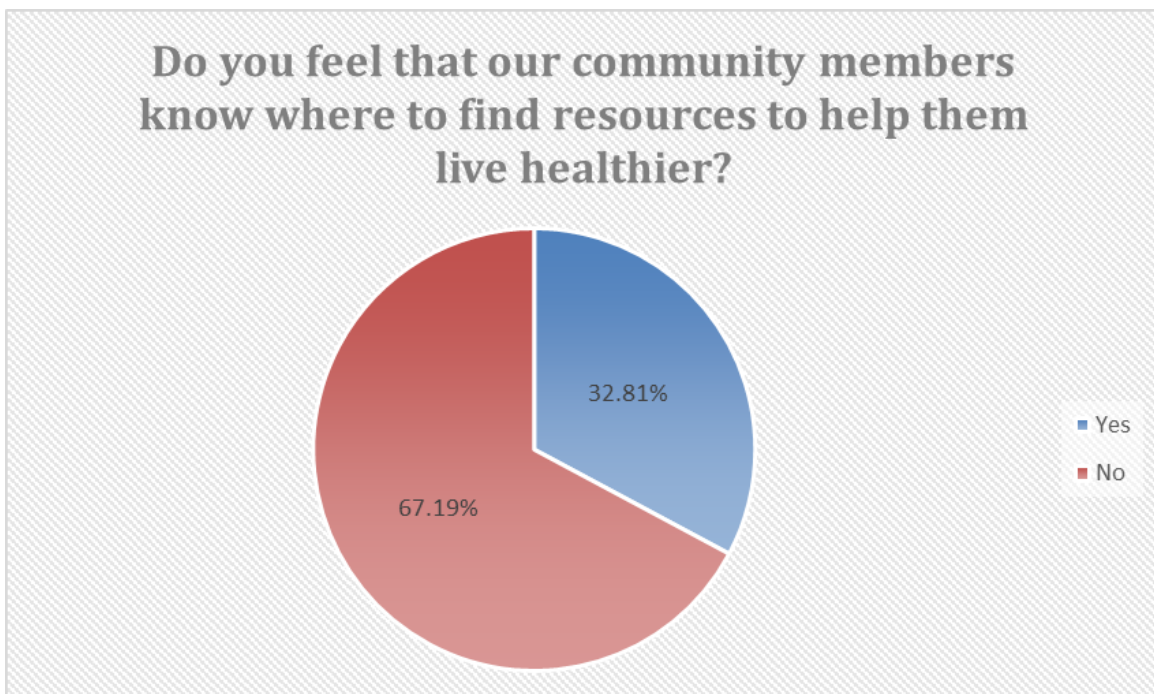
The next question was “Have your community members expressed concerns about their healthcare provider’s ability to explain things in a way that they can understand?” *The majority of respondents answered “Sometimes” (38.46%). Additionally, 30.77% answered “Rarely” and 16.92% answered “Often.”*



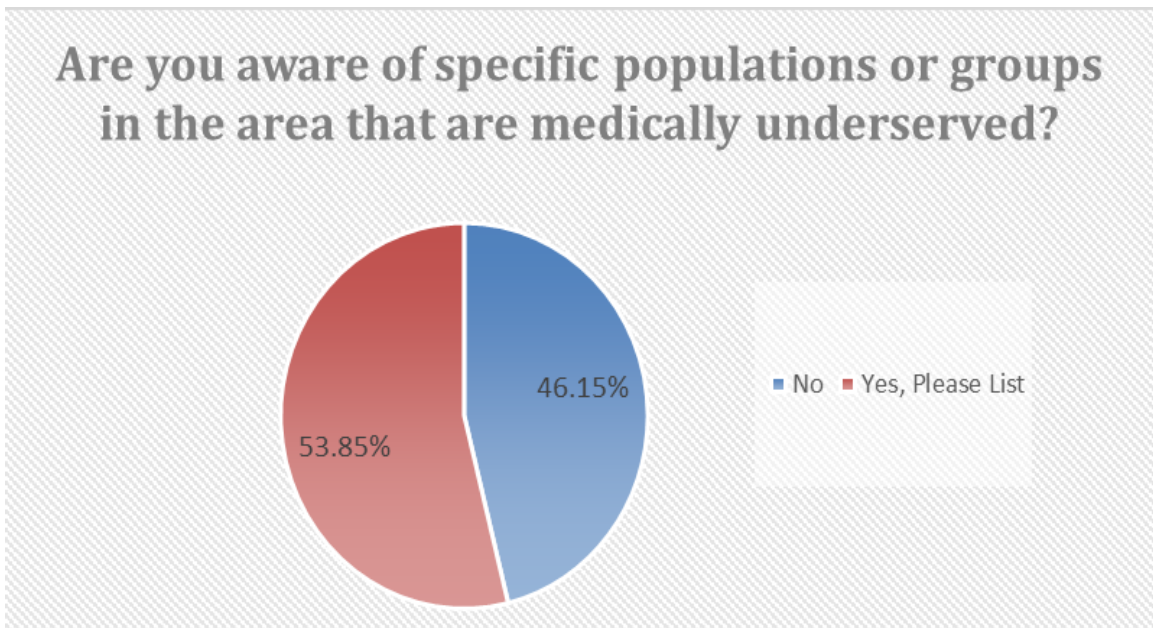
Another question was “Think about the children between the ages of 12 and 17 in your community. What do you think is the number one health care concern they may be facing?” *The top three answers were mental health (38.46%), bullying (15.38%), and obesity/nutrition (12.31%).*



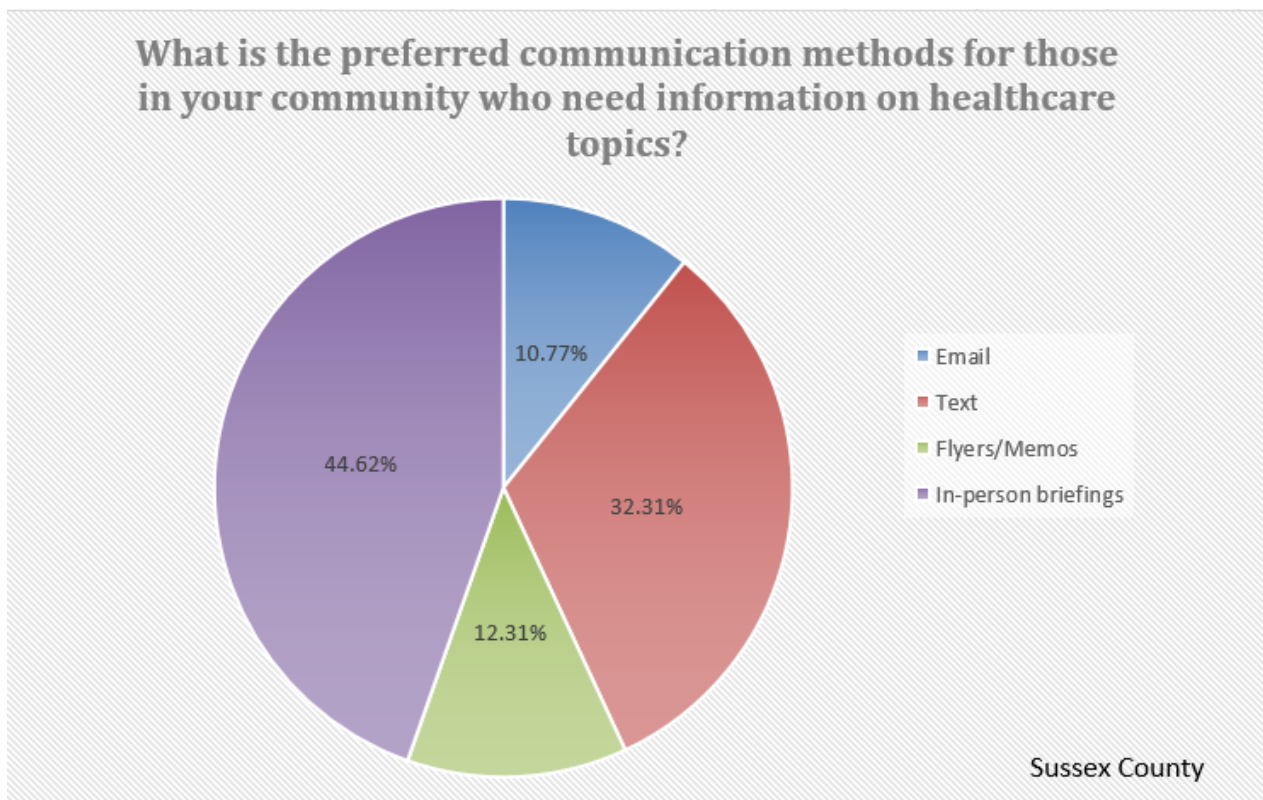
For the question “Do you feel that our community members know where to find resources to help them live healthier?”, *67.19% answered “No.”*



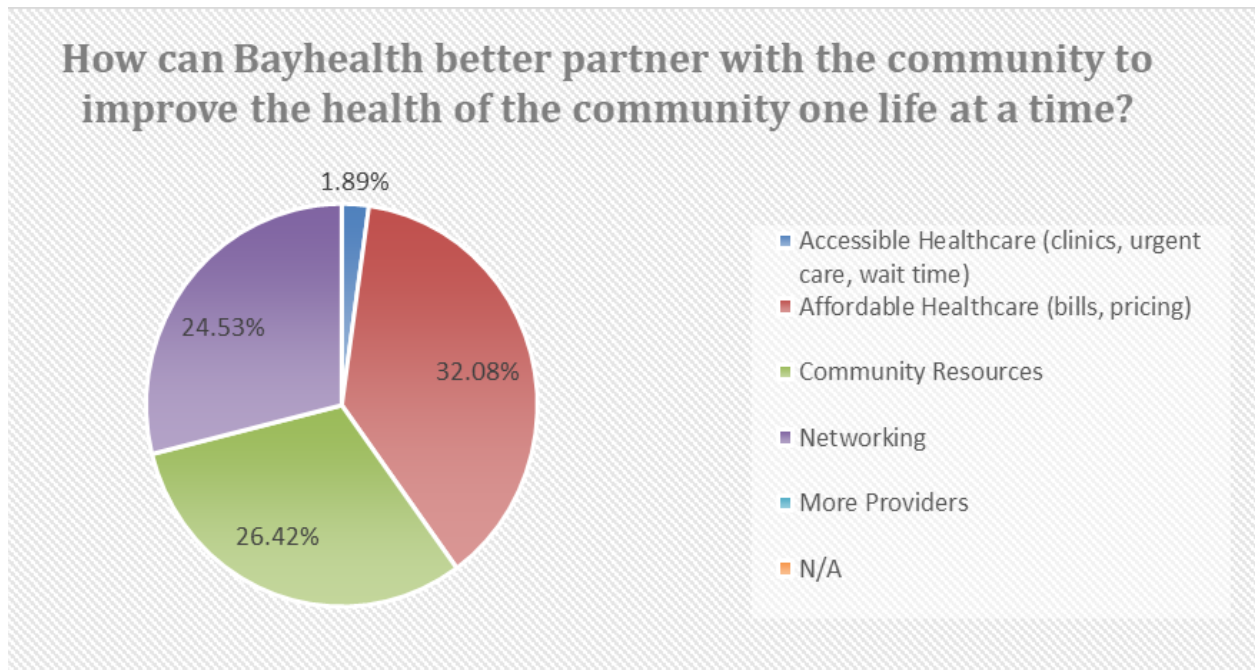
When asked “Are you aware of specific populations or groups in the area that are underserved?”, 53.85% answered “yes.” In the free text box, 35 respondents entered further information which included Haitian, Hispanic, and immigrants.



The next question on the survey inquired “What is the preferred communication methods for those in your community who need information on healthcare topics?” The answers were as follows: In-person briefing (44.62%), Text (32.31%), Flyers/Memos (12.31%), and Email (10.77%).



The last question on the survey asked, “How can Bayhealth better partner with the community to improve the health of the community one life at a time?” This was a free text response; *the following themes were identified through the responses: affordable healthcare (32.08%), community resources (26.42%), networking (24.53%), and accessible healthcare (1.89%).*



VII. HEALTH NEEDS IDENTIFIED

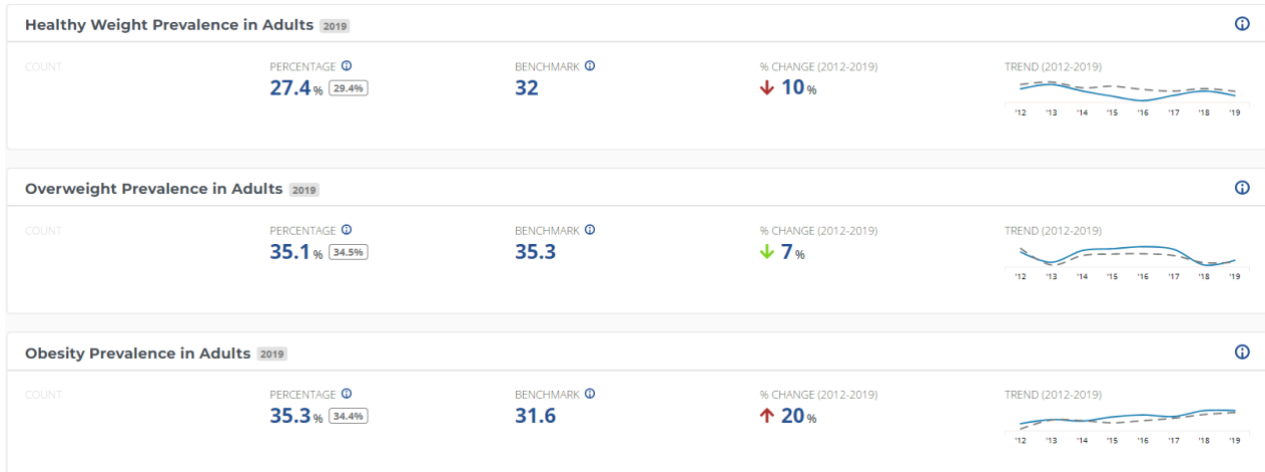
In the analysis of Sussex County Community Health Needs Assessment data from community members and stakeholders, the most important health issues which emerged include:

- ✦ Obesity
- ✦ Mental health
- ✦ Preventable emergency room visits and hospitalizations
- ✦ Cost of healthcare
- ✦ Access to medical providers
- ✦ Social determinants of health including homelessness, finances, transportation and housing

In the section below, data from various reliable web-based databases and organizations will be presented. The elements shown are focused on the above highlighted health issues which were gleaned from the Sussex County Community Health Needs Assessment surveys from community members and stakeholders.

OBESITY

Overweight is defined as a BMI between 25 and 29.9 while obese is defined as a BMI over 30. America, in general continues to be challenged by obesity which continues an upward trend. Delaware has the highest ranking of obesity for adults greater than 65 years old out of all 50 states Based on the United Health Foundation’s Americas’ Health Ranking Senior Report 2022 (Appendix D). Sussex County in Delaware has experienced a reduced prevalence of healthy weight in adults while also experiencing an increase in obesity prevalence (20% increase from 2012-2019) according to My Healthy Community data retrieved on July 29, 2022. The obesity prevalence also exceeds the benchmark of 31.6. ([www https://myhealthycommunity.dhss.delaware.gov/home](https://myhealthycommunity.dhss.delaware.gov/home)).

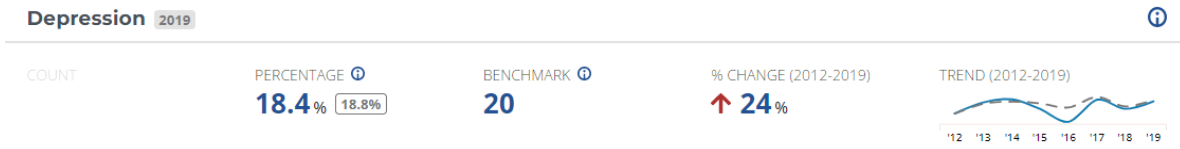


<https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/healthy-lifestyles/weight>

Many factors contribute to this rate of overweight and obese adults including physical activity and nutrition. Overweight and obese individuals are at much greater risk for developing chronic conditions such as heart disease, stroke, diabetes, some cancers, and high blood pressure. Delaware ranks higher than the national average in the percentage of adults who had three or more chronic health conditions [ranked 47th out of 50] (Appendix D).

MENTAL HEALTH

One of the most common health conditions in the United States is mental illness (Center for Disease Control and Prevention). The CDC reports that as many as 1 in 5 will experience mental illness in a given year. The term mental illness covers almost 200 diagnoses including autism, dementia, depression, schizophrenia, as well as psychotic disorders. More than half of Delawareans receive assistance or treatment for their mental health despite being ranked 11th out of 50 states for providing access to mental health services. My Healthy Community reports (as of July 29, 2022) that in Sussex County, 18.4% of individuals have depression which is an increase of 24% from 2012 to 2019.



Suspected non-fatal drug overdoses from heroin and opioids continue to plague Sussex County as well.



<https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/mental-health-substance-use/drug-treatments>

Utilizing Analytics from the Bayhealth Electronic Health Record (EHR), the following data was abstracted for the calendar year of 2021:

	Kent Emergency Room	Sussex Emergency Room	Smyrna Free Standing Emergency Department
Mental Health Visits for calendar year 2021	1195	627	34

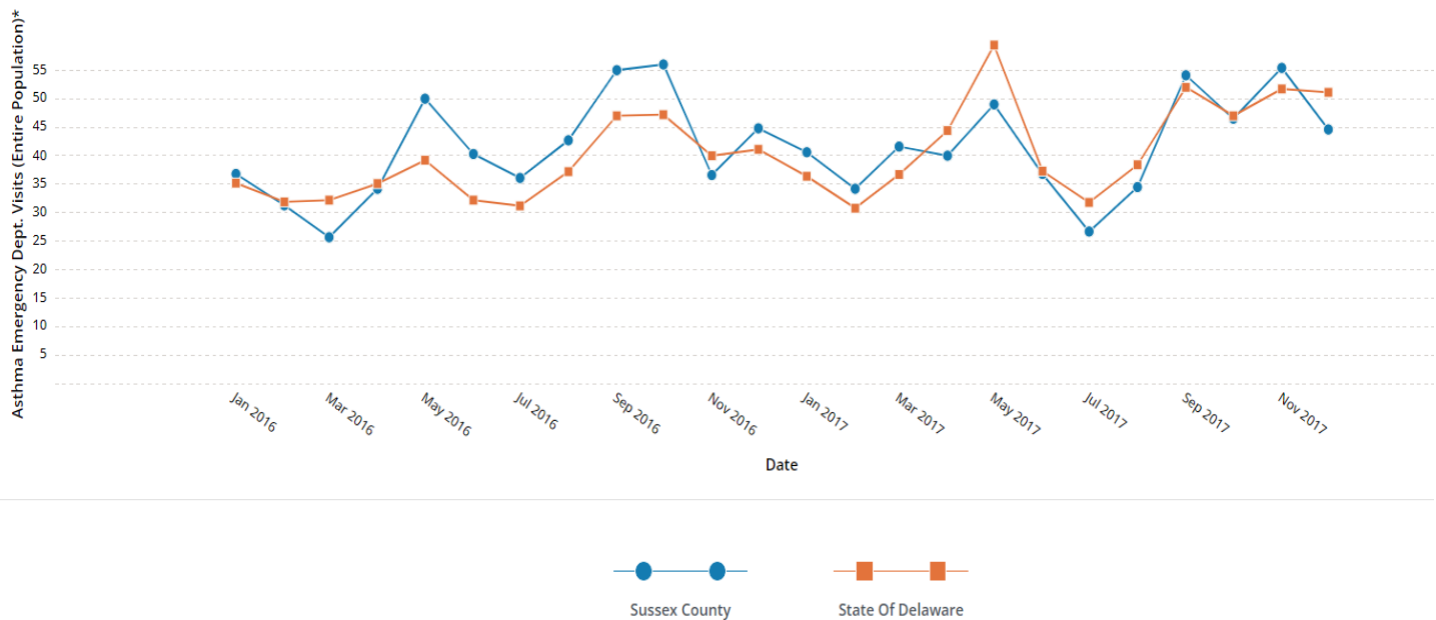
PREVENTABLE EMERGENCY ROOM VISITS/HOSPITALIZATIONS

151 million people visit the Emergency Rooms/Departments (ED) across the United States annually. This means approximately 47 in 100 people go to the ED each year. Infants and seniors over the age of 75 account for the highest rate of ED visits along with non-Hispanic Black patients (Centers for Disease Control). Compounding this problem are additional factors including:

- 25% of ED visits were by uninsured patients
- 35% of the visits were by patients living below the poverty level
- Almost half of the patients have functional limitations in terms of difficulty with vision, hearing, mobility, communication, cognition, and self-care.

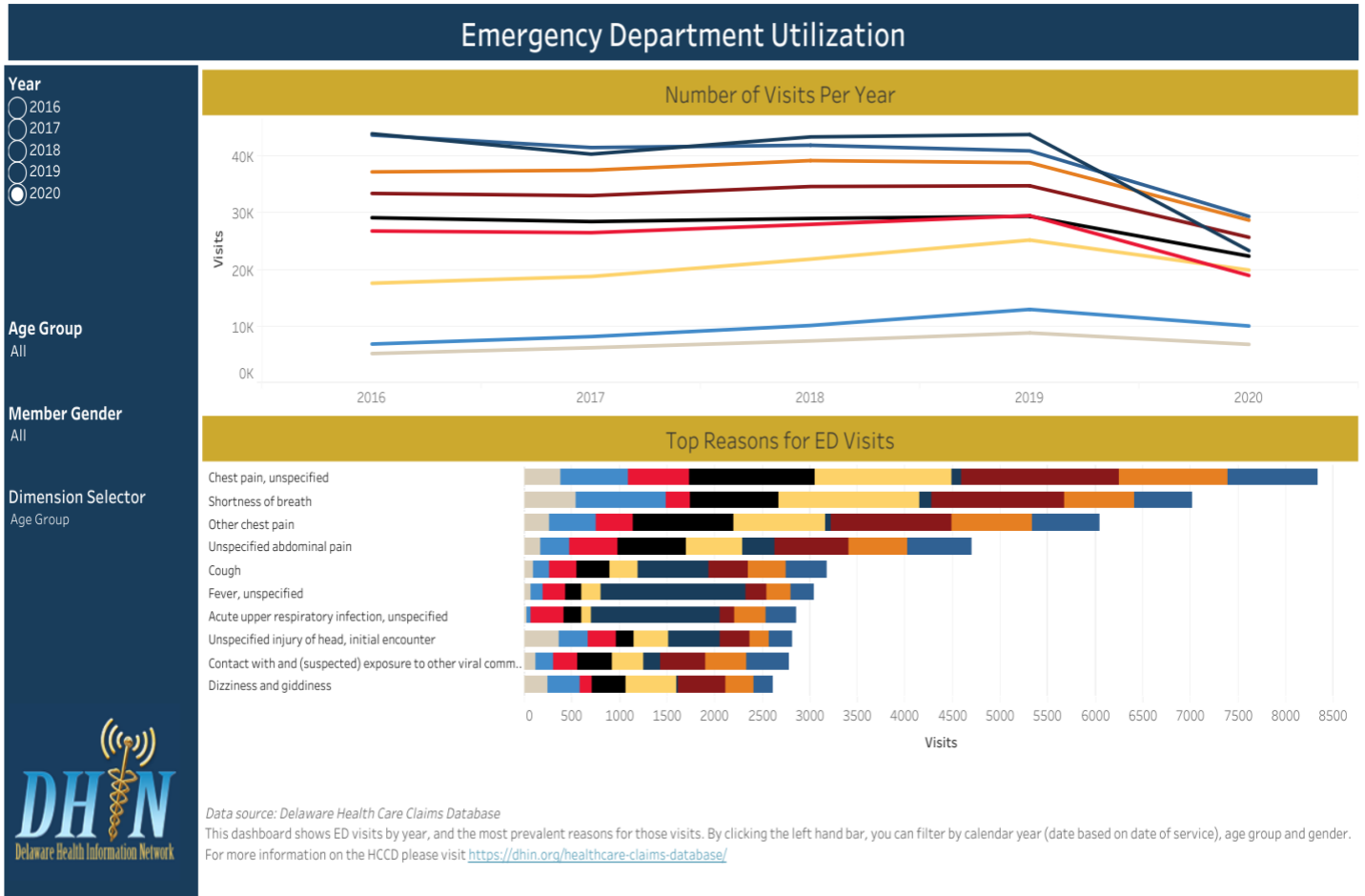
The highest rate of ED visits was from those who have Medicaid or Children’s Health Insurance Program while the ED rate was lowest among patients with private insurance (Cairns, Ashman, Kang, 2022). Certainly some ED visits can be prevented. The need to go to the ED can occur because of poor care coordination, inadequate access to healthcare or poor decisions by the patient. Upwards of 27% of ED visits could be managed in physician offices, clinics, and urgent care centers. Several diagnoses contribute to preventable ED visits including mental health, alcohol or substance abuse, dental conditions, asthma, and diabetes (Agency for Healthcare Research and Quality). Diabetics account for approximately 24% of ED visits by patients aged 45 and older. Incidentally a quarter of the diabetes ED visits had Medicare as their insurance (Hall and Schwartzman, 2018). Delaware ranks 17th in the list of the highest rate of emergency room visits according to a Becker’s Hospital Review article from 2020 (Vaidya, 2020). Delaware also has a high rate of preventable hospitalizations, ranking 37th out of the 50 states (United Health Foundation). Asthma-related ED visit data can be found on My Healthy Community Delaware; it shows an increase in asthma ED visits the past several years as well with Sussex County having a higher rate of asthma ED visits compared with the State of Delaware.

Asthma Emergency Dept. Visits (Entire Population)* in Sussex County compared with State of Delaware (2016 - 2017) *age-adjusted rate per 10,000 people



<https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/chronic-disease/asthma/er-visits>

The Delaware Health Information Network houses the Delaware Health Care Claims database. A report on Emergency Department Utilization is shown below for the year 2020. The various colors represent different age brackets. Though a decline is seen in ED utilization, recall that the COVID-19 pandemic began in March 2020 and significantly impacted the public's perception of seeking health care. Note the highest reasons according to this report for going to the ED include chest pain, shortness of breath, other chest pain, and unspecified abdominal pain.



Retrieved from <https://dhin-hccd-portal.medicasoftware.com/public/view>

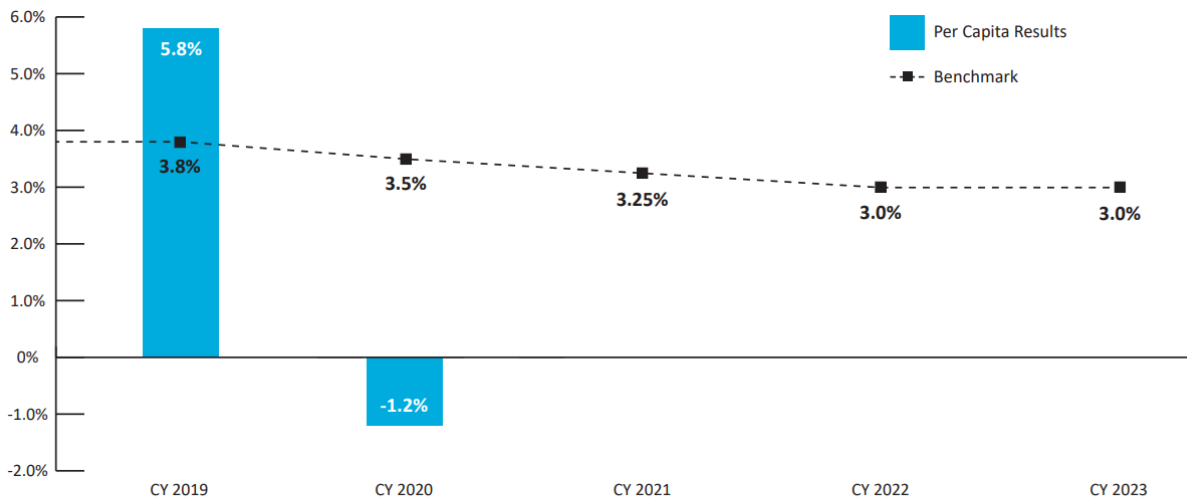
COST OF HEALTHCARE

The United States has historically had the highest health care costs in the world and spends significantly more on health care than other comparable nations. A variety of reasons account for rising health care costs including an aging population, litigious nature, as well as an unhealthy population. Since this information became public, Delaware is the second state in the nation to establish a health care spending benchmark through an executive order by Governor John Carney in late 2018. The benchmark is the target annual per capita growth rate for Delaware’s total health care spending. It is expressed as a percentage growth from the prior year’s per capita spending. The intent is to track and aim for controlled health care expenditure growth. Looking over the reports since this order was implemented, the state failed to meet the health care spending benchmark in 2019 but recovered in 2020 and exceeded the established goal.

State Level Total Health Care Expenditures Spending and Per Capita Amount



Figure 3-3: State Level Total Health Care Expenditures, Change in Per Capita versus Spending Benchmark



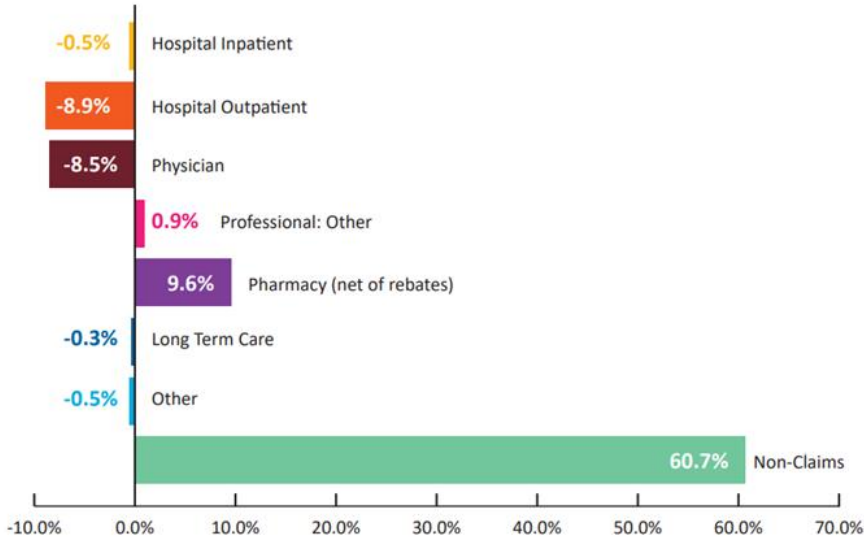
On a per capita basis, THCE decreased 1.2% relative to the CY 2020 spending benchmark of 3.5%.

Retrieved from <https://dhss.delaware.gov/dhcc/files/benchmarktrendreport2020.pdf>

Though this sounds encouraging, nine months out of 2020 included the COVID-19 pandemic, a time when many did not seek health care out of fear as well as when many providers and hospitals reduced non-urgent services. There was a noted reduction in hospital inpatient and outpatient spending along with payments to physicians. However, total health care expenditures in Delaware exceeded eight billion dollars with the cost per capita still over \$8000 per person.



Figure 3-8: CY 2020 Change in State Level TME by Service Category (excluding VHA)

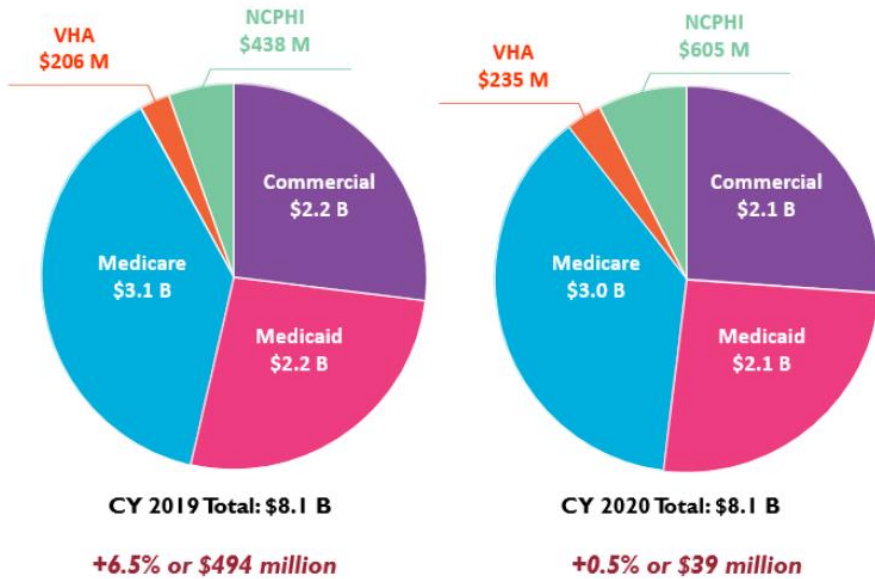


Non-Claims spending had the largest percentage change going from -\$33 million in CY 2019 to -\$53 million in CY 2020.



Pharmacy spending (net of rebates) increased the most in CY 2020 among the claims categories.

TOTAL HEALTH CARE EXPENDITURES (THCE)



STATE LEVEL THCE PER CAPITA



5

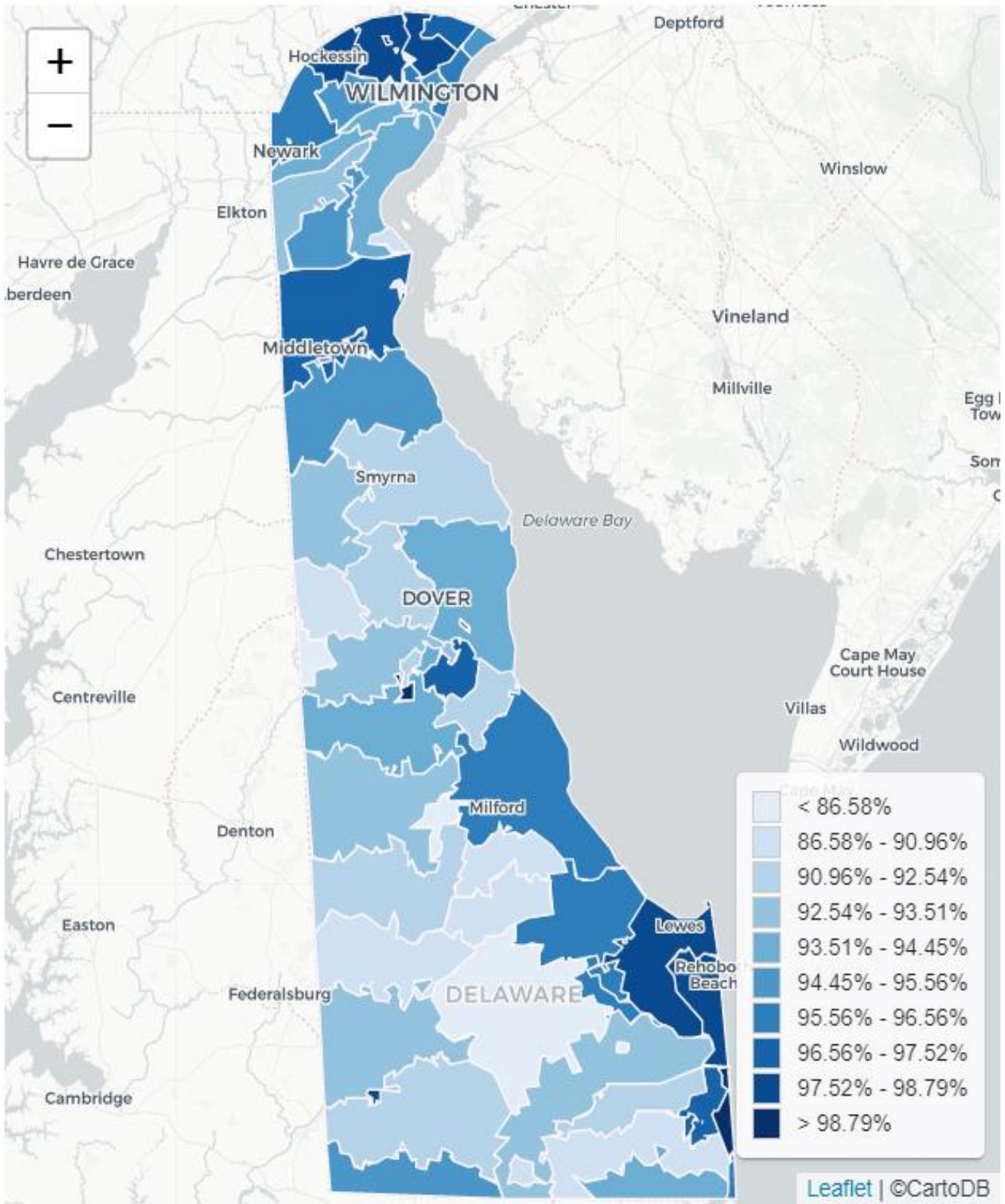
DHCC PRESENTATION ON HEALTH CARE SPENDING BENCHMARK

Retrieved from <https://dhss.delaware.gov/dhcc/files/benchmarktrendreport2020.pdf>

The State of Delaware continues to support and drive several initiatives in order to reduce health care costs including Accountable Care Organizations, transparency and benchmarking of health care spending, as well as assistance in affordable health care insurance acquisition through websites such as:

ChooseHealth Delaware <https://www.choosehealthde.com/Road-to-Value>

The percent of uninsured Americans is 9.2%. According to My Healthy Community website, Delaware's percentage of insured residents is 94.27% (or roughly 6% uninsured), lower than the national average. In addition to basic health care insurance, Delaware offers 28 Medicare Advantage plans (an increase from 2021) and 12 different Medigap plans. The graph on the next page shows geographically what percentage of Delaware residents have health insurance.



Retrieved from <https://myhealthycommunity.dhss.delaware.gov/portals/ecdc/locations/state/health>

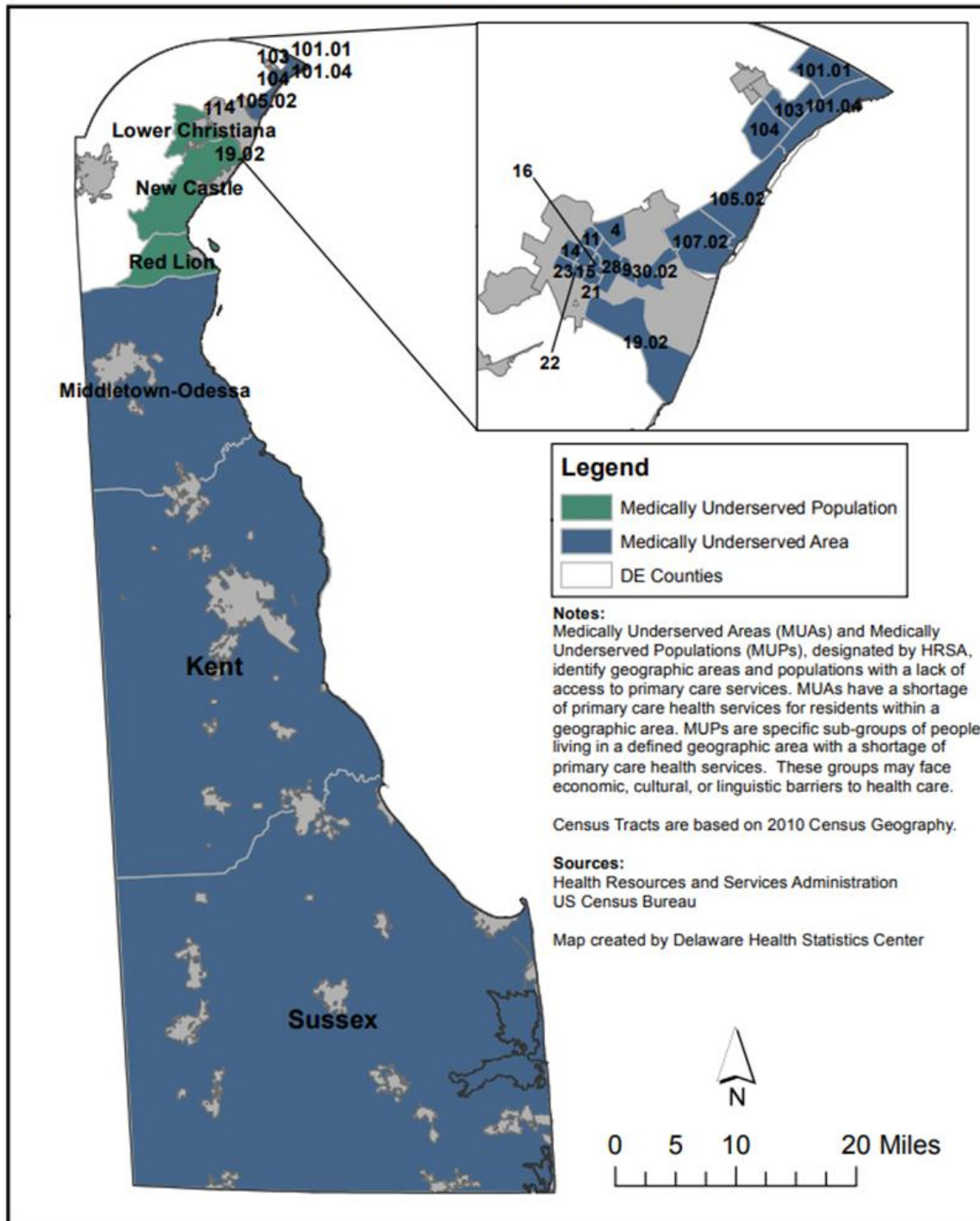
ACCESS TO PROVIDERS AND HEALTHCARE WORKERS

The internet provides many options for finding a healthcare provider. Many of these search engines assist in locating a provider in a specific area or one whom specializes in a specific disease process. While providers exist, it does not necessarily mean an appointment is readily available or is one that may accept certain health care insurances. In fact, the majority of Delaware has a shortage of providers.

The state of Delaware Division of Public Health works with federal partners to locate and define Medically Underserved Areas (MUA) and Health Professional Shortage Areas (HPSA) within our geographic area. Below are graphics detailing MUA and HPSA in Delaware. Clearly the majority of Delaware is medically underserved and is experiencing a healthcare professional shortage for primary care, dental, and mental health providers.

Nationally and locally a healthcare worker shortage is now a top patient safety concern. The American Hospital Association called the workforce shortage that hospitals are experiencing a national emergency. The shortage expands well beyond nurses; it is essentially every role that participates in the care team. Many reasons exist for the healthcare worker shortage including the COVID-19 pandemic, burn out, and an aging population, rapid increases in chronic diseases, limited capacity of medical and health education programs, as well as an aging healthcare workforce. Hospitals are having to try innovative programs in order to obtain the workforce needed in order to continue caring for patients.

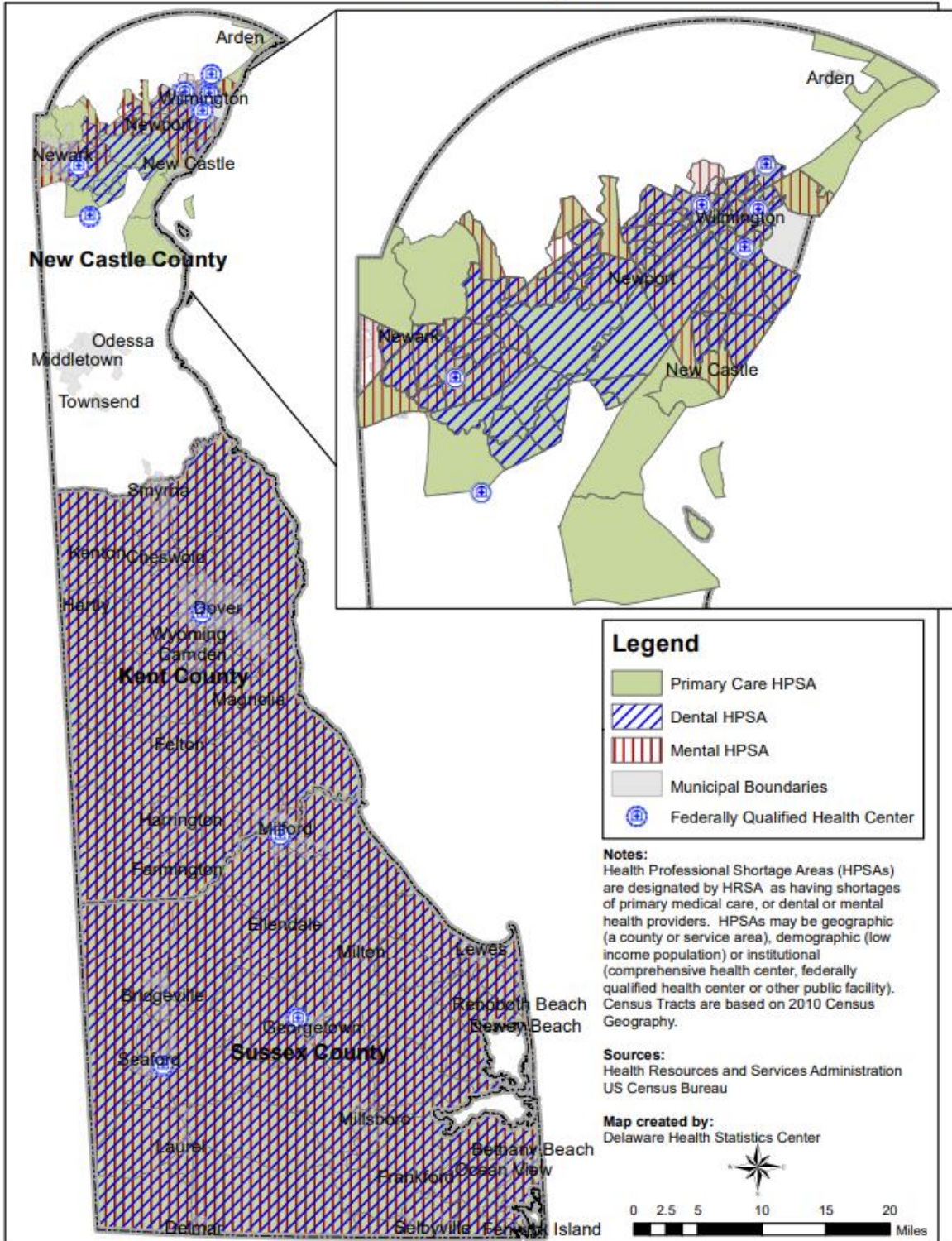
Medically Underserved Areas/Populations Delaware 2019



MD 2/7/2019

Retrieved from https://www.dhss.delaware.gov/dph/hsm/files/mua_2019.pdf

All HPSA Designations

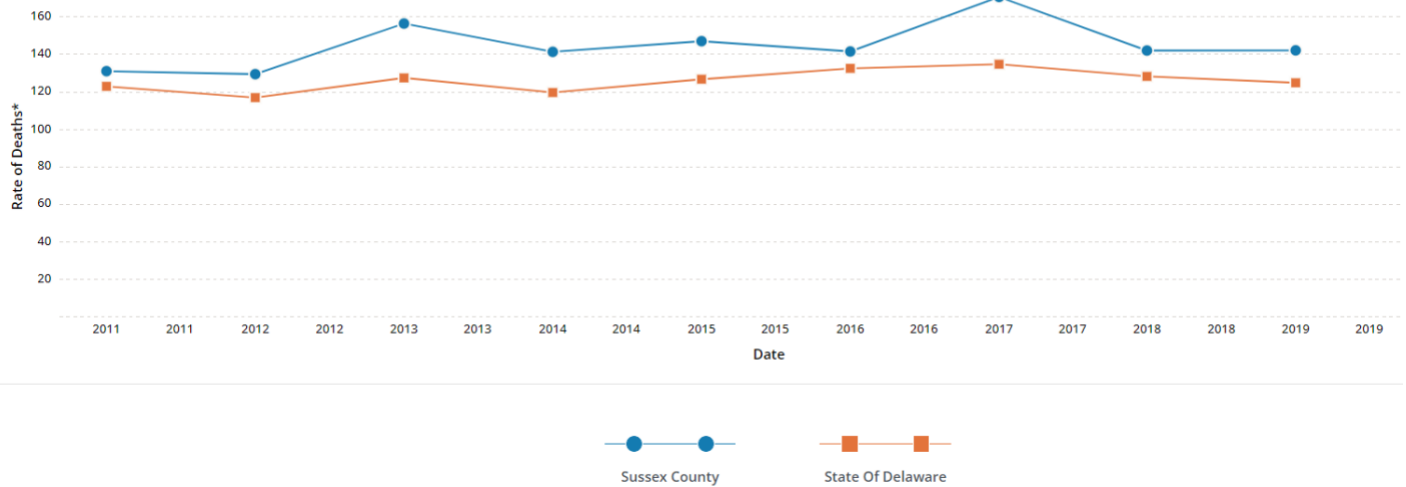


MD 3.5.2022

Retrieved from https://www.dhss.delaware.gov/dph/hsm/files/hpsa_all.pdf

Available data to support or disprove limitations to access health care providers in Sussex County is extremely limited. On My Healthy Communities, there is information about utilization including mortality amenable to health care which measures preventable deaths by timely and effective care. Lower rates in this area indicate an improvement in health system performance. Sussex County has a higher rate than the state of Delaware with the data over nine years staying relatively flat.

Mortality Amenable to Healthcare* in Sussex County compared with State of Delaware (2011 - 2019) *rate per 100,000 people

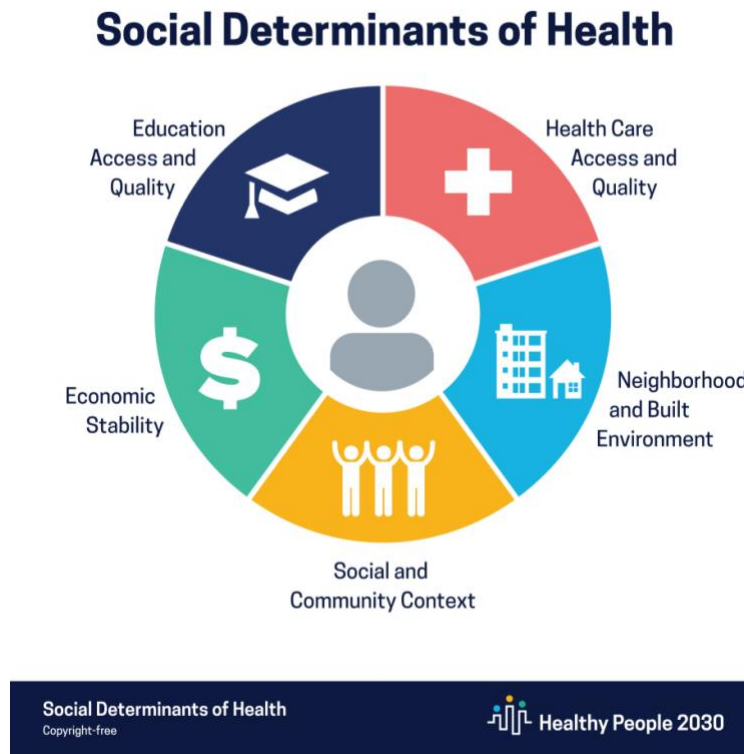


Retrieved from <https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/health-services-utilization/mortality-amenable-to-healthcare>

Locally, the State Office of Primary Care and Rural Health collaborates with local health advocates on a variety of community development activities designed to increase access to health care in Delaware (<https://dhss.delaware.gov/dph/hsm/pcohome.html>).

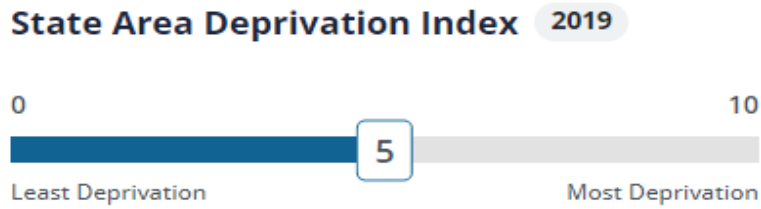
SOCIAL DETERMINANTS OF HEALTH

Over the decades, healthcare professionals and organizations have worked to improve the lives and health of the community. The focus during this time has historically been on the prevention and treatment of injury and disease. Within the past several years, more healthcare professionals and organizations have come to understand that staying healthy entails numerous social factors as well. This concept is termed Social Determinants of Health (SDoH) as discussed earlier in this document. To review, there are many different definitions for SDoH. The Center for Disease Control and Prevention utilizes the following: “social determinants of health are conditions in the places where people live, learn, work, and play that affect a wide range of health and quality-of-life risks and outcomes” (<https://www.cdc.gov/socialdeterminants/index.htm> retrieved on 8/2/22). Included in SDoH are five categories as listed in the demographic below.



Healthy People 2030, U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Retrieved 8/2/22 from <https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

The Deprivation Index measures the socioeconomic deprivation experienced in an area. Higher values indicate higher levels of deprivation. Factors influencing this value include income, education, employment, and housing quality (several SDoH elements). In 2019, Sussex County’s deprivation index was 5 out of 10.



Higher levels of deprivation have been associated with an increased risk of adverse health and health care outcomes.

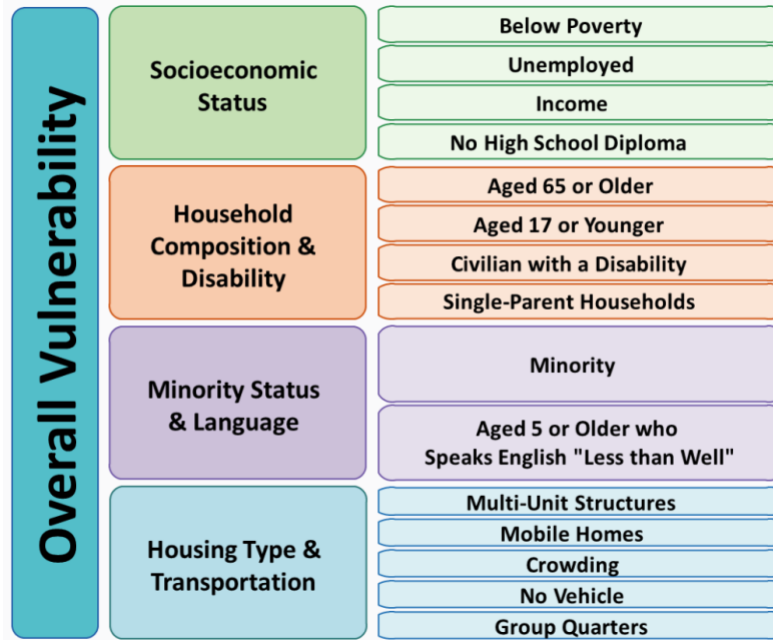
Retrieved from <https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/community-characteristics>

My Healthy Community Website provides additional Delaware data regarding SDoH:

Four-year graduation rate	88%
Unemployment rate	5.45% Concentrated areas of higher numbers in Seaford, Greenwood, and Ellendale
Percentage of families with at least one employed parent	92%
Family poverty rate	14.02%
Rent burden (portion of household income spent on rent)	29.6%

The CDC developed a Social Vulnerability Index (SVI), the extent to which an area's social conditions affect the response and prevention of disasters. SVI's were created to help differentiate the relative vulnerability of a particular place from those around it.

There are 15 census tract variables in the SVI which are sorted by commonality into four different themes: Socioeconomic Status, Household Composition & Disability, Minority Status & Language, and Housing & Transportation (see graphic below).



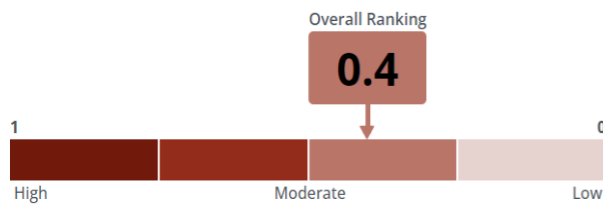
Retrieved from <https://myhealthycommunity.dhss.delaware.gov/locations/county-sussex/topics/climate-change/svi>

Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability). Delaware's overall SVI is 0.73 which is on the upper end of moderate. This total score is based on the scores within the four categories of socioeconomic status: household composition and disability, minority status and language, and housing type and transportation. The following graphics are the Sussex County percentiles for SVI to include details on socioeconomic status:

State of Delaware / Sussex County

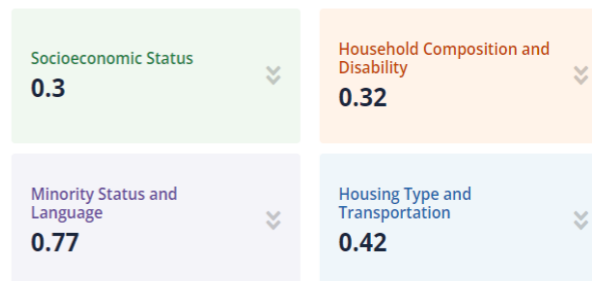
Social Vulnerability Index

Overall Vulnerability Percentile

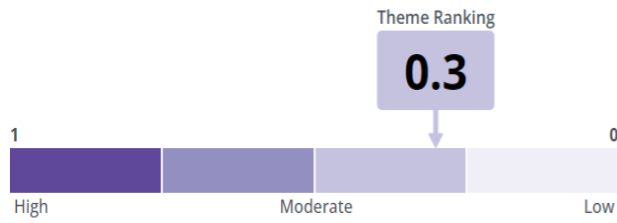


Possible values range from 0 (lowest vulnerability) to 1 (highest vulnerability). Sussex County's ranking of 0.4 indicates a Moderate to Low level of vulnerability.

Sub-Theme Percentiles



Socioeconomic Status



Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability).
Sussex County's ranking of 0.3 indicates a Moderate to Low level of vulnerability.

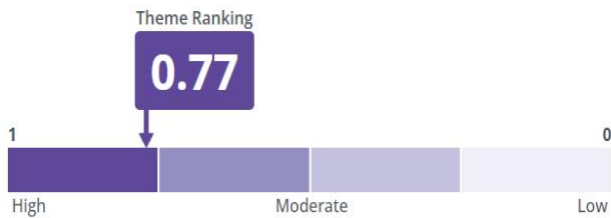
[About the data](#)

Indicators

[Indicator Definitions](#)



Minority Status and Language

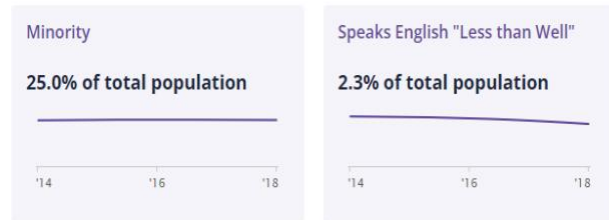


Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability).
Sussex County's ranking of 0.77 indicates a High level of vulnerability.

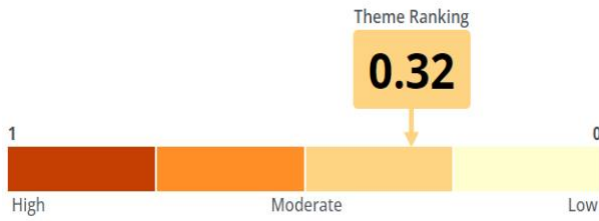
[About the data](#)

Indicators

[Indicator Definitions](#)



Household Composition and Disability

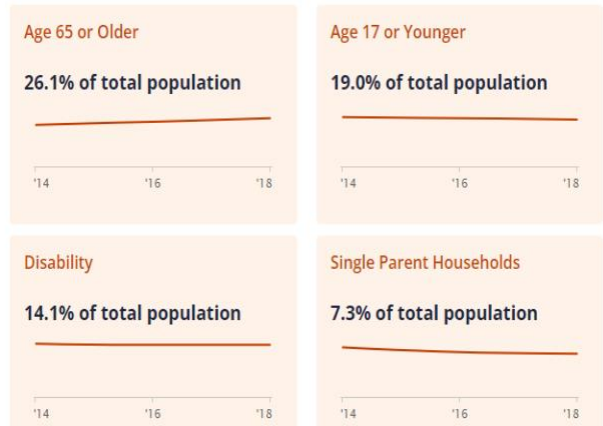


Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability). Sussex County's ranking of 0.32 indicates a Moderate to Low level of vulnerability.

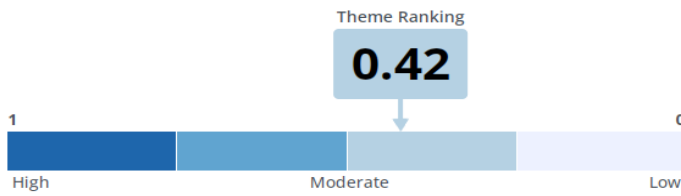
[About the data](#)

Indicators

[Indicator Definitions](#)



Housing Type and Transportation

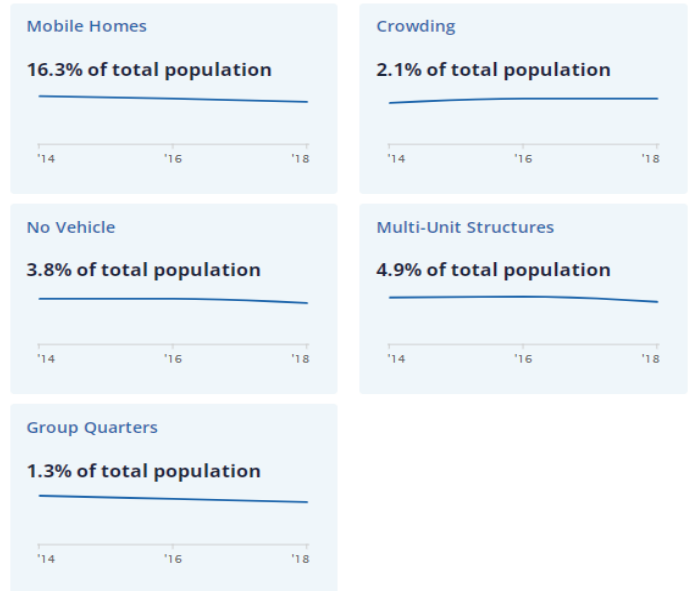


Possible scores range from 0 (lowest vulnerability) to 1 (highest vulnerability). Sussex County's ranking of 0.42 indicates a Moderate to Low level of vulnerability.

[About the data](#)

Indicators

[Indicator Definitions](#)



Retrieved from <https://myhealthycommunity.dhss.delaware.gov/locations/county-kent/topics/climate-change/svi>

Another data resource, the United Health Foundation, has additional social and economic factors listed for Delaware along with a national comparison. 9.9% of households experience food insecurity in Delaware compared with 10.7% nationally. On a positive note, the state spends a higher rate of dollars per person on public health (\$152 per person versus \$116 nationally). Complete report available as Appendix E.

Delaware

State Health Department Website: dhss.delaware.gov

Measures		Rating	State Rank	State Value	U.S. Value
SOCIAL & ECONOMIC FACTORS*		+++++	10	0.474	—
Community and Family Safety	Occupational Fatalities (deaths per 100,000 workers)	+++	23	4.6	4.2
	Public Health Funding (dollars per person)	++++	15	\$152	\$116
	Violent Crime (offenses per 100,000 population)	++	36	423	379
Economic Resources	Economic Hardship Index (index from 1-100)	+++	25	45	—
	Food Insecurity (% of households)	+++	19	9.9%	10.7%
	Income Inequality (80-20 ratio)	++++	19	4.41	4.85
Education	High School Graduation (% of students)	+++++	10	89.0%	85.8%
	High School Graduation Racial Disparity (percentage point difference)	+++++	6	7.6	15.1
Social Support and Engagement	Adverse Childhood Experiences (% ages 0-17)	+++	23	15.5%	14.8%
	High-speed Internet (% of households)	++++	17	90.6%	89.4%
Engagement	Residential Segregation — Black/White (index from 0-100)	+++++	1	45	62
	Volunteerism (% ages 16+)	+++	28	34.2%	33.4%
	Voter Participation (% of U.S. citizens ages 18+)	+++	28	59.8%	60.1%

The Healthy People 2030 website (<https://health.gov/healthypeople>) and the Delaware State Health Improvement Plan 2020 Annual Report (https://img1.wsimg.com/blobby/go/7298608e-3c37-4361-b78a-b30fff51587e/DE%20SHIP%202020%20Annual%20Report_FullReport.pdf) are two additional vital sources of information to be taken into consideration when determining the needs of the community. Both resources dictate national (Healthy People 2030) and local (Delaware State Health improvement Plan 2020 Annual Report) health priorities. Obesity, mental health, social determinants, and preventable emergency department visits/hospitalizations are all objectives included in the Healthy People 2030 initiative from the United States department of Health and Human Services. Obesity, mental health, and social determinants of health are also clear priorities in the Delaware State Health Improvement Plan.

VIII. SUMMARIES: ASSESSMENTS AND PRIORITIES

Based upon the above analysis, Bayhealth Hospital has identified the following healthcare needs as a priority for our service area in Sussex County Delaware:

- Obesity
- Mental health
- Social Determinants of Health
- Preventable emergency room visits/hospitalizations.

Obesity and mental health have continued to plague the community as well as the rest of the country. These two areas have been identified as community health needs in 2016, 2019 and yet again this year. Continued efforts are needed in these areas to pursue a healthier community that has yet to show sustained improvements in these areas.

IX. NEXT STEPS

Bayhealth will develop and implement strategies to address these prioritized health needs with the goal to improve trending data. The priorities for Kent and Sussex Counties will be united in order to develop strategies which will create the most engagement and impact for our community members. Bayhealth will integrate these initiatives into their overall strategic plan and collaborate with community members, stakeholders and service organizations in order to create synergistic outcomes benefiting the overall health of the community one life at a time.

X. ACKNOWLEDGEMENTS

This document was co-authored by Angeline Dewey MSN, RN, APRN, ACNS-BC, CCRN-K, CNRN, Director of Education and Teresa Towne MSN, RN, NPD-BC, NE-BC, Clinical Educator for Bayhealth Hospital. Special thanks to Stella Zhao, the Master's in Public Health University of Delaware intern who assisted with this project.

XI. REFERENCES

Agency for Healthcare Research and Quality; Chartbook on Care Coordination, Preventable Emergency Department Visits retrieved from <https://www.ahrq.gov/research/findings/nhqdr/chartbooks/carecoordination/measure2.html> on 7/27/22.

American Immigration Council. Immigrants in Delaware. Retrieved on 8/3/22 at <https://www.americanimmigrationcouncil.org/research/immigrants-in-delaware>

Cairns, C. Ashman, JJ. Kang, K. Emergency department visit rates by selected characteristics: United States, 2019. NCHA Data Brief, no 434. Hyattsville, MD: National Center for Health Statistics. 2022. DOI: <https://dx.doi.org/10.15620/cdc:114424>.

Centers for Disease Control. About Mental Health. Retrieved July 28, 2022 at <https://www.cdc.gov/mentalhealth/learn/index.htm>

Centers for Disease Control. Emergency Department visits. Retrieved July 27, 2022 at <https://www.cdc.gov/nchs/fastats/emergency-department.htm>

Delaware Health and Social Services. Medically Underserved Areas/Populations Delaware 2019. Retrieved on 8/2/22 from https://www.dhss.delaware.gov/dph/hsm/files/mua_2019.pdf

Delaware Health and Social Services. All HPSA Designations. Retrieved on 8/2/22 from https://www.dhss.delaware.gov/dph/hsm/files/hpsa_all.pdf

Delaware State Health Improvement Plan 2020 Annual Report. Retrieved on June 7, 2022 at <https://delawareship.org/ship-reports>.

Hall, MJ., Rui, P., Schwartzman, A. Emergency department visits by patients aged 45 and over with diabetes: United States, 2015. NCHA Data Brief, no 301. Hyattsville, MD: National Center for Health Statistics. 2018.

Healthy People 2030. [Healthy People 2030 | health.gov](https://www.health.gov)

Johnson, Steven Ross. "Staff Shortages Choking U.S. Health Care System." U.S. News July 28, 2022 at 4:45pm.

Marsh & McLennan Companies. Delaware Health care Spending and Quality Benchmarks Implementation Manual version 1.0. Retrieved on 8/1/22 at <https://dhss.delaware.gov/dhss/files/benchmarksummary013119.pdf>

State of Delaware. My Healthy Community Delaware Environmental Public Health Tracking Network. <https://myhealthycommunity.dhss.delaware.gov/home>

State of Delaware department of Health and Social Services Delaware Health Care Commission. Calendar Year 2020 Results Benchmark Trend Report. Retrieved on 8/1/22 at <https://dhss.delaware.gov/dhcc/files/benchmarktrendreport2020.pdf>

United States Interagency Council on Homelessness. Delaware homelessness statistics. Retrieved on 8/4/22 at <https://www.usich.gov/homelessness-statistics/de/>

Vaidya, Anuja (2020). States ranked by ER visit rate. Retrieved from <https://www.beckerhospitalreview.com/rankings-and-ratings/states-ranked-by-er-visit-rate-2.html> on 7/22/26.

XII. APPENDICES

APPENDIX A: SUSSEX COUNTY COMMUNITY MEMBER SURVEY

Community Member Health Survey – Kent County/Sussex County

You are invited to take a survey to help us understand your health concerns and needs. Your input will be used to help Bayhealth improve the health of our community, one life at a time.

You will need about 10 minutes to complete the survey.

Any information you share with us will stay confidential.

1. Do you have a primary care doctor that you see at least one time a year?

Yes
No

2. Where do you usually go for your healthcare needs?

Community Clinic (i.e., Westside, La Red, etc)
Doctor/Provider Office
Do not see a Doctor/Provider
Emergency Room
State Health Clinic
Walk-in/Urgent Care Center
Other (please specify)

3. When did you have your last healthcare exam?

Past 1-3 months
Past 3-6 months
Past 6 months to 1 year
Past 1-2 years
Past 2+ years

4. In the last 2 years, did your healthcare provider tell you that you have any of the following health issues? (Check all that apply).

Cancer
COVID-19
Depression or mental health problems
Diabetes
Drug or alcohol misuse
Heart disease (heart failure, heart attack)
High blood pressure
High cholesterol
Lung disease (asthma, COPD)
Memory problems
Overweight/obesity
Sexually transmitted infection (HIV/AIDS, Chlamydia, Gonorrhea, Syphilis)

Community Member Health Survey – Kent County/Sussex County

Stroke

Other: (List any other health issues or the type of cancer you were diagnosed with if applicable)

5. In the last 3-5 years, what screenings and other health checks have you had? (Check all that apply).

Allergy testing
Blood pressure check
Blood sugar check
Breast screening
Cholesterol check
Colonoscopy
Depression screening
Eye exam
Fall Risk screening
Hearing test
Lung Cancer screening
Mammogram
Pap smear
Physical
Prostate screening
Skin Cancer screening
Total joint exam (knee, hip, shoulders)
Vaccines (Pneumonia, Flu, Whooping Cough, Shingles, etc.)
Weight check
None of the above

6. If you've been to the emergency room in the last 2 years, tell us why. (Check all that apply).

- I was hurt and needed care right away
- I was sick and needed care right away
- I was hurt and the emergency room was the only option I had for care
- I was sick and the emergency room was the only option I had for care
- My doctor or healthcare provider told me to go

7. Think about the last 12 months. What has stopped you from getting the healthcare services you needed? (Select up to three reasons).

Community Member Health Survey – Kent County/Sussex County

COVID-19 safety concerns
Cultural or religious beliefs
Don't have time
Fear of seeing a healthcare provider
I do not know how to find doctors
I can't find a doctor
I don't think I need to see a doctor
Lack of childcare
Lack of gender support services
Lack of health insurance
Lack of transportation
Language barriers
Limited office hours
Medical costs
Stigma or feelings of shame
Other (please specify)
No barriers

8. In the past 12 months, did you skip taking your medicine or miss a medical appointment because you did not have transportation?

Yes
No

9. In the past 12 months, have you had to choose between buying food or medicine and paying your bills?

Never
Rarely
Sometimes
Often
Always

10. In the past 12 months, did you stay in a shelter, in a hotel room with others, live on the street or in a car, or stayed in a park for even one night?

Yes
No
If yes, please list which one: _____

11. Do you have any of these problems in your home? Check all that apply.

Ants
Bugs
Lead paint or pipes
Mice

Community Member Health Survey – Kent County/Sussex County

Mold
No drinkable/clean water
No electricity
No heat or air conditioning
No phone services
Oven or stove problems
Smoke detectors not working or don't have smoke detectors
Water leaks
Other (please list)

12. Having support from friends and family is helpful. Do you have someone who is a care partner to help you with questions about healthcare, help fill medications for you, or help drive you to appointments?

- Yes, I have a care partner.
 No, I don't need a care partner.
 No, I don't have a care partner, but need one.

13. Does your healthcare provider explain things to you in a way that you can understand?

Never
Rarely
Sometimes
Often
Always

14. Think about children between the ages of 12 and 17 in your community. What do you think is the one biggest health concern they may be facing?

Bullying
Domestic violence
Homelessness
Obesity/Nutrition
Lack of birth control
Lack of routine childhood vaccines
Mental health
Sex Trafficking
Sexually Transmitted Infections (STIs)
Substance use (drugs, alcohol and vaping)
Support for Gender Identification (ex. LGBTQ+)
Teen Pregnancy
Other: (please list)

Community Member Health Survey – Kent County/Sussex County

15. Do you know where to find resources to help you live healthier?

Yes

No

Tell us about yourself:

Which gender do you identify with:

Male

Female

Non-binary

Prefer not to answer

What is your zip code? (Make mandatory field)

Do you live alone?

Yes

No

Age:

Under 18

18-34

35-44

45-64

Over 65

Education:

Did not finish high school

High school diploma/GED

Some college

College graduate

Graduate degree

Your Ethnicity:

Hispanic or Latino

Non-Hispanic or Latino

Unknown

Your Race:

Native American (American Indian or Alaskan Native)

Asian

Black or African American

Community Member Health Survey – Kent County/Sussex County

Native Hawaiian or other Pacific Islander
White/Caucasian
Unknown

If you would like to be ~~entered into~~ a raffle for a prize, please enter your name and contact phone number (including area code) or email.

THANK YOU FOR YOUR PARTICIPATION!!!

Community Stakeholder Health Survey – Kent County/Sussex County

You are invited to take a survey to help us understand your perception of our community's health concerns and needs **as a vital stakeholder in the community**. Your input will be used to help Bayhealth improve the health of our community, one life at a time.

You will need about 10 minutes to complete the survey.

Any information you share with us will stay confidential.

PLEASE REMEMBER TO ANSWER THE QUESTIONS AS A STAKEHOLDER IN OUR COMMUNITY'S HEALTH!

1. Do you feel that our primary care doctors are available to our community members?

Yes

No

2. What is the most common place you feel the community goes to receive healthcare?

Community Clinic (i.e., Westside, LaRed, etc)

Doctor/Provider Office

Do not see a Doctor/Provider

Emergency Room

State Health Clinic

Walk-in/Urgent Care Center

Other

3. How often do you think your community members see a provider for a healthcare exam?

Within the past 1-3 months

Within the past 3-6 months

Within the past 6 months to 1 year

Within the past 1-2 years

Greater than the past 2 years

4. What do you think the top 3 health issues are in your community? (Pick three)

Cancer

COVID-19

Depression or mental health problems

Diabetes

Drug or alcohol misuse

Heart disease (heart failure, heart attack)

High blood pressure

High cholesterol

Lung disease (asthma, COPD)

Memory problems

Overweight/obesity

Sexually transmitted infection (HIV/AIDS, Chlamydia, Gonorrhea, Syphilis)

Stroke

Community Stakeholder Health Survey – Kent County/Sussex County

Other: (List any other health issues or the type of cancer you were diagnosed with if applicable)

5. What are the top 5 screenings/health checks your community members have done? (Choose 5)

- Allergy testing
- Blood pressure check
- Blood sugar check
- Breast screening
- Cholesterol check
- Colonoscopy
- Depression screening
- Eye exam
- Fall Risk screening
- Hearing test
- Lung Cancer screening
- Mammogram
- Pap smear
- Physical
- Prostate screening
- Skin Cancer screening
- Total joint exam (knee, hip, shoulders)
- Vaccines (Pneumonia, Flu, Whooping Cough, Shingles, etc.)
- Weight check
- None of the above

6. What is the primary reason your community members go to the Emergency Room?

- They were hurt and needed care right away
- They were sick and needed care right away
- They were hurt and the emergency room was the only option they had for care
- They were sick and the emergency room was the only option they had for care
- Their doctor or healthcare provider told them to go

Community Stakeholder Health Survey – Kent County/Sussex County

7. Think about the last 12 months. What has stopped your community members from getting the healthcare services they needed? (Select up to three reasons).

- COVID-19 safety concerns
- Cultural or religious beliefs
- Don't have time
- Fears of seeing a healthcare provider
- Lack of childcare
- Lack of gender support services
- Lack of health insurance
- Lack of transportation
- Language barriers
- Limited office hours
- Medical costs
- Stigma or feelings of shame
- They don't know how to find doctors
- They can't find a doctor
- They don't think they need to see a doctor
- Other barriers: (Comment box)
- No barriers

8. In the past 12 months, are you aware of any community members who skipped taking their medicine or missed a medical appointment because they did not have transportation?

- Yes
- No

9. In the past 12 months, are you aware of any community members who have had to choose between buying food or medicine and paying their bills?

- Never
- Rarely
- Sometimes
- Often
- Always

10. In the past 12 months, did any of the community members you assist have to stay in a shelter, in a hotel room with others, live on the street or in a car, or stay in a park for even one night?

- Yes (list all that apply) _____
- No

Community Stakeholder Health Survey – Kent County/Sussex County

11. Pick the top 3 housing problems the community members you serve have reported.

Ants
Bugs
Lead paint or pipes
Mice
Mold
No drinkable/clean water
No electricity
No heat or air conditioning
No phone services
Oven or stove problems
Smoke detectors not working or don't have smoke detectors
Water leaks
Others (Please list)
None

12. Having support from friends and family is helpful. What percentage of your community members have a Care Partner to help them with questions about healthcare, help pick up medications, or help drive them to appointments?

Less than or about 25%
Less than or about 50%
Less than or about 75%
Almost all

13. Have your community members expressed concerns about their healthcare provider's ability to explain things in a way that they can understand?

Never
Rarely
Sometimes
Often
Always

14. Think about children between the ages of 12 and 17 in your community. What do you think is the number one health concern they may be facing? (Choose one)

Bullying
Domestic violence/sex trafficking
Homelessness
Obesity/Nutrition
Lack of birth control
Lack of routine childhood vaccines
Mental health
Sexually Transmitted Infections (STIs)
Substance use (drugs, alcohol and vaping)

Community Stakeholder Health Survey – Kent County/Sussex County

Support for Gender Identification (ex. LGBTQ+)

Teen Pregnancy

Other: (please list)

15. Do you feel that our community members know where to find resources to help them live healthier?

Yes

No

16. Are you aware of specific populations or groups in the area that are medically underserved?

No

Yes

17. What is the preferred communication method for those in your community who need information on healthcare topics?

Email

Text

Flyers, memos

In-person Briefings

18. How can Bayhealth better partner with the community to improve the health of the community one life at a time?

Tell us about yourself:

What is your organization's name: (Mandatory)

What zip code is the organization primarily located? (Mandatory)

APPENDIX C: SUSSEX COUNTY COMMUNITY STAKEHOLDERS INCLUDED

All Bayhealth medical providers
All Sussex County medical providers
La Red Health Center
Milford Center
Silver Lake
Sussex Acute
Polaris
Cadia Renaissance
Hillside
Milford Place
Milford School District
Woodbridge School District
Lake Forest School District
Delaware Technical and Community College - Student Life
Cape Henlopen School District
Indian River School District
Americare Home Solutions
Brain Injury Association of Delaware
Choices for Community Living - Delaware
Delaware Nurses Association
Delaware Guidance Services
Delaware Health Information Network
Delaware Healthcare Association
Delaware Prostate Cancer Coalition
Highmark Blue Cross Blue Shield Delaware
Perdue Farms, Inc. (Milford)
Harrington Chamber of Commerce
City of Harrington
Sussex County Council
Lewes City Council
Milford City Council
Slaughter Beach City Council
Ellendale City Council
Georgetown City Council

Blood Bank of Delmarva, Inc.
Boys and Girls Club of DE
Cancer Support Community Delaware
Central Delaware Habitat for Humanity
Delaware Breast Cancer Coalition, Inc.
Delaware Diabetes Coalition
Delaware Hospice, Inc.
Easter Seals of DE & MD's Eastern Shore
Frederica Senior Center
Friends of Delaware Veterans Inc.
Milford Wellness Village
Milford Senior Center
Children and Family First
United Way
CHEER
Delaware Veterans Home
Office of Veterans Services
House District General Assembly members
Senate District members
Representative Lisa Blunt Rochester
Senator Tom Carper
Senator Chris Coons
Avenue United Methodist Church
King Empowerment Christian Church
Trinity Church of Love
New Beginnings Community AME Church
Milford Church of Nazarene
Chaplain at Bayhealth
First Baptist Church of Milford
Jesus Loves Temple
Reformation Lutheran Church
Christian Tabernacle
Milford Church of God
Mt. Enon Baptist Church
New Genesis Rock of Love Christian Ministries
St. John's Apostle Roman Catholic Church
Bethel AME Milford
Trinity UMC Frederica, DE
Upper Room Church
Avenue UM Church
Lincoln & Slaughter Neck UMC
First Presbyterian Lay Pastor
RCCG Salvation & Praise Assembly

Delaware

State Health Department Website: dhs.delaware.gov

Overall Rank:

19

DELAWARE

Summary

Strengths:

- Low suicide rate
- High volunteerism rate
- High percentage of four- or five-star nursing home beds

Challenges:

- High prevalence of multiple chronic conditions
- High prevalence of obesity
- High preventable hospitalization rate

Highlights:

OBESITY

▲30%

from 28.9% to 37.6% of adults ages 65+ between 2011 and 2020

EARLY DEATHS

▲20%

from 1,591 to 1,915 deaths per 100,000 adults ages 65-74 between 2019 and 2020

FLU VACCINATION

▲16%

from 58.3% to 67.8% of adults ages 65+ between 2018 and 2020

Measures

		Rating	State Rank	State Value	U.S. Value
SOCIAL & ECONOMIC FACTORS*					
++++ 4 0.704 —					
Community and Family Safety	Violent Crime (offenses per 100,000 population)	++	34	432	399
Economic Resources	Food Insecurity (% of adults ages 60+)	+++	15	10.2%	12.6%
	Poverty (% of adults ages 65+)	++++	9	7.3%	9.4%
	Poverty Racial Disparity (ratio) [†]	—	—	3.3	2.7
	SNAP Reach (participants per 100 adults ages 60+ in poverty)	++	22	77.4	81.0
Social Support and Engagement	Community Support Expenditures (dollars per adult ages 60+)	++++	19	\$50	\$57
	High-speed Internet (% of households with adults ages 65+)	++++	8	82.6%	78.0%
	Low-care Nursing Home Residents (% of residents)	++	22	13.6%	15.2%
	Risk of Social Isolation (index 1-100, adults ages 65+)	++++	3	20	—
	Volunteerism (% of adults ages 65+)	++++	6	39.7%	31.6%
PHYSICAL ENVIRONMENT*					
++ 24 0.393 —					
Air and Water Quality	Air Pollution (micrograms of fine particles per cubic meter)	++	39	8.2	8.3
	Drinking Water Violations (% of community water systems)	++++	1	0.0%	0.8%
Housing	Severe Housing Problems (% of small households with an adult ages 62+)	++	22	28.4%	32.7%
CLINICAL CARE*					
+++ 21 0.205 —					
Access to Care	Avoided Care Due to Cost (% of adults ages 65+)	++	32	4.3%	4.2%
	Geriatric Providers (providers per 100,000 adults ages 65+)	++	31	25.3	31.1
	Home Health Care Workers (workers per 1,000 adults ages 65+)	+++	24	40.7	57.7
Preventive Clinical Services	Cancer Screenings (% of adults ages 65-75)	++	25	77.5%	75.9%
	Flu Vaccination (% of adults ages 65+)	++	26	67.8%	67.3%
	Pneumonia Vaccination (% of adults ages 65+)	++	30	71.6%	70.3%
Quality of Care	Dedicated Health Care Provider (% of adults ages 65+)	++++	13	94.8%	93.5%
	Hospice Care (% of Medicare decedents)	++++	2	59.4%	50.7%
	Hospital Readmissions (risk-standardized readmission rate per 100 admissions)	++++	20	16	16
	Nursing Home Quality (% of beds rated four or five stars)	++++	5	59.6%	41.2%
	Preventable Hospitalizations (discharges per 100,000 Medicare beneficiaries ages 65-74)	++	37	1,826	1,582
BEHAVIORS*					
++ 32 -0.122 —					
Nutrition and Physical Activity	Exercise (% of adults ages 65+)	++++	18	24.9%	23.1%
	Fruit and Vegetable Consumption (% of adults ages 65+)	++++	17	8.2%	7.3%
	Physical Inactivity (% of adults ages 65+ in fair or better health)	++	36	32.8%	30.6%
Sleep Health	Insufficient Sleep (% of adults ages 65+)	++	39	28.0%	26.0%
Tobacco Use	Smoking (% of adults ages 65+)	++	29	9.8%	8.9%
HEALTH OUTCOMES*					
++ 31 -0.016 —					
Behavioral Health	Drug Deaths (deaths per 100,000 adults ages 65+) [‡]	—	—	8.1	8.4
	Excessive Drinking (% of adults ages 65+)	++	24	7.3%	7.4%
	Frequent Mental Distress (% of adults ages 65+)	++++	11	6.5%	8.1%
	Suicide (deaths per 100,000 adults ages 65+)	++++	4	10.2	16.9
Mortality	Early Death (deaths per 100,000 adults ages 65-74)	++++	19	1,915	2,072
	Early Death Racial Disparity (ratio) [§]	—	—	1.6	1.6
Physical Health	Falls (% of adults ages 65+)	++++	10	25.6%	27.1%
	Frequent Physical Distress (% of adults ages 65+)	++	30	14.8%	14.5%
	High Health Status (% of adults ages 65+) [¶]	++	30	44.8%	43.5%
	Multiple Chronic Conditions (% of Medicare beneficiaries ages 65-74)	+	47	54%	46%
	Obesity (% of adults ages 65+)	+	50	37.6%	29.3%
	Teeth Extractions (% of adults ages 65+)	++	23	12.9%	13.4%
OVERALL					
++++ 19 0.243 —					

* Value is a summation score. Higher scores are healthier.

† Non-ranking measure.

— Indicates data missing or suppressed.

‡ For measure definitions, including data sources and years, visit AmericasHealthRankings.org.

Rating	Rank
++++	1-10
+++	11-20
++	21-30
+	31-40
—	41-50

SENIOR REPORT 2022 AmericasHealthRankings.org



Delaware

State Health Department Website: dhss.delaware.gov

Measures	Rating	State Rank	State Value	U.S. Value	
SOCIAL & ECONOMIC FACTORS*					
Rating: +++++ 10 0.474 --					
Community and Family Safety	Occupational Fatalities (deaths per 100,000 workers)	+++	23	4.6	4.2
	Public Health Funding (dollars per person)	++++	15	\$152	\$116
	Violent Crime (offenses per 100,000 population)	++	36	423	379
Economic Resources	Economic Hardship Index (index from 1-100)	+++	25	45	--
	Food Insecurity (% of households)	++++	19	9.9%	10.7%
	Income Inequality (80-20 ratio)	++++	19	4.41	4.85
Education	High School Graduation (% of students)	++++	10	89.0%	85.8%
	High School Graduation Racial Disparity (percentage point difference)	++++	6	7.6	15.1
Social Support and Engagement	Adverse Childhood Experiences (% ages 0-17)	+++	23	15.5%	14.8%
	High-speed Internet (% of households)	++++	17	90.6%	89.4%
	Residential Segregation — Black/White (index from 0-100)	++++	1	45	62
	Volunteering (% ages 16+)	+++	28	34.2%	33.4%
	Voter Participation (% of U.S. citizens ages 18+)	+++	28	59.8%	60.1%
PHYSICAL ENVIRONMENT*					
Rating: +++++ 15 0.211 --					
Air and Water Quality	Air Pollution (micrograms of fine particles per cubic meter)	++	39	8.2	8.3
	Drinking Water Violations (% of community water systems)	++++	1	0.0%	0.8%
	Risk-screening Environmental Indicator Score (unitless score)	+++	17	1,513,402	--
	Water Fluoridation (% of population served)	++++	19	85.9%	73.0%
Housing and Transit	Drive Alone to Work (% of workers ages 16+)	++	32	80.7%	75.9%
	Housing With Lead Risk (% of housing stock)	+++	22	15.1%	17.6%
	Severe Housing Problems (% of occupied housing units)	+++	27	14.6%	17.3%
CLINICAL CARE*					
Rating: +++++ 17 0.546 --					
Access to Care	Avoided Care Due to Cost (% ages 18+)	++++	20	9.3%	9.8%
	Providers (per 100,000 population)				
	Dental Care	+	50	396	62.3
	Mental Health	++++	20	299.0	284.3
	Primary Care	++++	10	296.2	252.3
	Uninsured (% of population)	++++	15	6.6%	9.2%
Preventive Clinical Services	Colorectal Cancer Screening (% ages 50-75)	++++	9	77.2%	74.3%
	Dental Visit (% ages 18+)	++	32	64.5%	66.7%
	Immunizations				
	Childhood Immunizations (% by age 35 months)	++++	2	86.0%	75.4%
	Flu Vaccination (% ages 18+)	++++	20	48.7%	47.0%
	HPV Vaccination (% ages 13-17)	++++	16	63.2%	58.6%
Quality of Care	Dedicated Health Care Provider (% ages 18+)	++++	11	83.0%	77.6%
	Preventable Hospitalizations (discharges per 100,000 Medicare beneficiaries)	+	43	4,378	3,770
BEHAVIORS*					
Rating: ++ 33 -0.177 --					
Nutrition and Physical Activity	Exercise (% ages 18+)	+++	22	23.8%	23.0%
	Fruit and Vegetable Consumption (% ages 18+)	+++	21	8.4%	8.0%
	Physical Inactivity (% ages 18+)	++	34	24.7%	22.4%
Sexual Health	Chlamydia (new cases per 100,000 population)	++	39	6,022	551.0
	High-risk HIV Behaviors (% ages 18+)	+	45	6.4%	5.6%
	Teen Births (births per 1,000 females ages 15-19)	+++	21	14.9	16.7
Sleep Health	Insufficient Sleep (% ages 18+)	++	31	33.2%	32.3%
Smoking and Tobacco Use	Smoking (% ages 18+)	+++	24	15.1%	15.5%
HEALTH OUTCOMES*					
Rating: +++ 30 -0.069 --					
Behavioral Health	Excessive Drinking (% ages 18+)	++++	13	15.9%	17.6%
	Frequent Mental Distress (% ages 18+)	++++	11	12.3%	13.2%
	Non-medical Drug Use (% ages 18+)	+++	22	10.6%	12.0%
Mortality	Premature Death (years lost before age 75 per 100,000 population)	++	36	8,342	7,337
	Premature Death Racial Disparity (ratio)	++++	9	1.2	1.5
Physical Health	Frequent Physical Distress (% ages 18+)	++	33	10.5%	9.9%
	Low Birthweight (% of live births)	+	42	9.4%	8.3%
	Low Birthweight Racial Disparity (ratio)	++++	17	1.9	2.1
	Multiple Chronic Conditions (% ages 18+)	++	34	10.5%	9.1%
	Obesity (% ages 18+)	+	43	36.5%	31.9%
OVERALL					
					0.192 --

*Values derived from individual measure data. Higher values are considered healthier.
 -- Data not available, missing or suppressed.
 For measure definitions, sources and data years, see the Appendix or visit www.AmericasHealthRankings.org.

Rating	Rank
+++++	1-10
++++	11-20
+++	21-30
++	31-40
+	41-50

Summary

Strengths:

- Low prevalence of frequent mental distress
- High childhood immunization rate
- High prevalence of colorectal cancer screening

Challenges:

- High prevalence of obesity
- High prevalence of high-risk HIV behaviors
- High preventable hospitalization rate

Highlights:

DRUG DEATHS

▲29%
 from 35.9 to 46.2 deaths per 100,000 population between 2017 and 2019

MENTAL HEALTH PROVIDERS

▲27%
 from 235.7 to 299.0 per 100,000 population between 2017 and 2021

HIGH HEALTH STATUS

▲12%
 from 49.2% to 55.2% of adults between 2019 and 2020

DELAWARE