

# 2022 Community Health Needs Assessment Executive Summary



Methodist Le Bonheur Healthcare (MLH) conducted a Community Health Needs Assessment (CHNA) between June and October 2022. This assessment meets the federal requirements of the Affordable Care Act (ACA). It also serves an essential purpose in guiding MLH to structure clinical programs and community outreach to best meet the most pressing needs of our community. In accordance with federal requirements, this report is made widely available to the public on our website at [www.methodisthealth.org](http://www.methodisthealth.org).



In alignment with our mission and our deep history of reinvesting in our community to meet the needs of the patients we serve, the CHNA is a key component of the system's 2022-2026 Strategic Plan, *MLH Reimagined*. The plan includes six strategic imperatives, including "Community Health and Partnerships." Key objectives under the community imperative include:

- Partner to impact the top two needs identified by the CHNA.
- Alongside key partners, invest in the community to address health disparities and address access to care.

A steering committee composed of approximately 20 representatives from across our system provides oversight for the achievement of the community objectives. Leadership of the steering committee reports regularly to the MLH System Leadership

Team (SLT). Through this planning structure, the SLT was actively engaged in the CHNA process, receiving regular updates on methodology and results. Ultimately, the SLT established the community health priorities, based largely on recommendations from the Community Health and Partnerships steering committee.

MLH's CHNA reflects feedback from the community and experts in public health and clinical care, and takes into account the health needs of vulnerable populations, including minorities, those with chronic illness, low-income residents and medically underserved populations. The CHNA and identified health needs will serve as the foundation for future community benefit investments. MLH also will adopt an implementation strategy for each of its facilities.

This report documents how the CHNA was conducted and describes the related findings.

### CHNA Process

MLH pursued an integrative approach to utilize various methods for this assessment for our primary geographic area including Shelby County, Tennessee and Desoto County, Mississippi. In addition to publicly available secondary data, MLH incorporated:

- Results from a community health needs survey administered to 1074 community members
- Survey data from 41 key industry and stakeholder participants
- Findings from 10 focus groups with 82 community members to gather more in-depth knowledge of health and barriers to health

### Health Priorities

The health issues prioritized in 2016 and again in 2019 include:

- Cardiovascular health
- Cancer
- Maternal/child health
- Access to health services, including behavioral health



In summary, our CHNA revealed the following key information:

LEADING CAUSE OF DEATH ( <i>Greatest to Least</i> )		
	Shelby County	Desoto County
1	Heart Disease	Heart Disease
2	Cancer	Cancer
3	COVID-19	COVID-19
4	Unintentional Injuries	Unintentional Injuries
5	Stroke	Lower Respiratory

IMPORTANCE TO COMMUNITY ( <i>Most to Least</i> )		
	Health Condition	Health Factor
1	Mental Health	Poverty
2	Overweight/Obesity	Healthcare Access and Insurance
3	Diabetes	Community Violence
4	Homicide	Homelessness
5	Drug and Alcohol	Health Literacy, Health Education

DISPARITIES ( <i>Largest to Smallest</i> )	
1	Sexually Transmitted Diseases
2	Homicide
3	Firearm and Assault
4	Drug and Alcohol
5	Hypertension

Similar to our 2019 CHNA results, regardless of the health conditions, the community voiced issues related to accessing healthcare which cut across all health conditions:

- Lack of mental health resources
- Lack of comprehensive health insurance
- Poverty or lack of financial resources to pay basic living costs
- Lack of provider cultural humility and trust
- Confusing and overwhelming healthcare system

These issues have long plagued our community, and MLH has shaped programs and outreach to address them. We will continue to deploy system resources to meet these needs going forward.



Based on a review and assessment of the 2022 CHNA results, recommendations from the Community Health and Partnerships steering committee and an evaluation of the strategic fit within our organization, MLH leadership has established the following priorities:

- MLH will focus on cardiovascular disease and

cancer as its two priorities

- MLH will develop facility and system-specific implementation plans to address these priorities.
- MLH will collaborate with key strategic partners to address disparities and access to care, focusing on areas with the greatest geographic/racial/gender disparity in our service area.

In addition to our priorities, we are committed to addressing health equity and disparity, which was a key consideration throughout this process.

### Health Disparities

- African Americans die from heart disease/hypertension and cancer at a much higher rate than whites.
- African Americans acquire new cases of HIV and other sexually transmitted diseases at significantly higher rates than whites.
- Homicide is eleven times more prevalent among African American children under the age of 18 years than white teens.

## Health Access

We increasingly understand that health conditions are negatively impacted by Social Determinants of Health (SDOH) which are most prevalent among impoverished populations.

- The poverty rate for our area is 20 percent, which is higher than state and national averages.
- A third of all children live in poverty.
- 50 percent of African American and 40 percent of Hispanic children under the age of five live in poverty.
- 12 percent of Shelby County's populations is uninsured.
- Sixteen percent of Shelby County's population has limited access to food; 27% of Shelby County children have limited access to food.
- Nine percent of our population has no access to personal transportation.
- Access to mental health was identified as the top community health concern.
- More than 10 percent of our children don't complete a high school education.



## Next Steps

The next step in the Community Health Needs Assessment process is the establishment of an implementation plan to address the needs identified in this report. This implementation plan will provide direction over the next three years to ensure that efforts across this system are focused on addressing the health needs identified in this assessment.

