Lafayette General Health
St. Martin Hospital
Community Health Needs Assessment

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Introduction

St. Martin Hospital

St. Martin Hospital (SMH) is located at 210 Champagne Boulevard, Breaux Bridge, LA 70517. SMH is a critical access hospital maintaining inpatient acute beds and a skilled nursing rehabilitation unit, as well as a staffed 24-hour emergency room. As a non-profit hospital, SMH is committed to help patients who need help paying their hospital bills. The hospital features the only emergency room available in all of St. Martin Parish. As an alternative to the ER, SMH offers primary care through its walk-in community health clinic.

Methodology

Community Health Needs Assessment Background

On June 24, 2019, Lafayette General Health contracted with Carnahan Group to conduct a Community Health Needs Assessment (CHNA) as required by the Patient Protection and Affordable Care Act (PPACA). Please refer to Appendix A: Carnahan Group Qualifications for more information about Carnahan Group.

The PPACA, enacted on March 23, 2010, requires not-for-profit hospital organizations to conduct a CHNA once every three taxable years that meets the requirements the Internal Revenue Code 501(r) set forth by the PPACA. The PPACA defines a hospital organization as an organization that operates a facility required by a state to be licensed, registered, or similarly recognized as a hospital; or, a hospital organization is any other organization that the Treasury's Office of the Assistant Secretary ("Secretary") determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501(c)(3).

A CHNA is a report based on epidemiological, qualitative, and comparative methods that assess the health issues in a hospital organization's community and that community's access to services related to those issues. Based on the findings of the CHNA, an implementation strategy for SMH that addresses the community health needs will be developed and adopted up to 5.5 months following the end of fiscal year 2019.

Secondary Data Collection and Analysis Methodology

A variety of data sources were utilized to gather demographic and health indicators for the community served by SMH. Commonly used data sources include Esri, the U.S. Census Bureau, and the Centers for Disease Control and Prevention (CDC). St. Martin Parish defines the community served by SMH. Demographic and health indicators are presented for the parish.

For select indicators, parish level data are compared to state and national benchmarks. Additionally, Healthy People 2020 (HP 2020) Goals are presented where applicable. The HP 2020 Goals, launched in December 2010, are science-based, ten-year national objectives for improving the health of all Americans.

Requirements

As required by the Treasury Department ("Treasury") and the Internal Revenue Service (IRS), this CHNA includes the following:

- A description of the community served;

- A description of the process and methods used to conduct the CHNA, including:

  - A description of the sources and dates of the data and the other information used in the assessment; and,

  - The analytical methods applied to identify community health needs.

- The identification of all organizations with which SMH collaborated, if applicable, including their qualifications;

- A description of how SMH took into account input from persons who represented the broad interests of the community served by SMH, including those with special knowledge of or expertise in public health, written comments regarding the hospital's previous CHNA, and any individual providing input who was a leader or representative of the community served by SMH; and,

- A prioritized description of all of the community health needs identified through the CHNA and a description of the process and criteria used in prioritizing those needs.

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CHNA Strategy

This CHNA was conducted following the requirements outlined by the Treasury and the IRS, which included obtaining necessary information from the following sources:

- Input from persons who represented the broad interests of the community served by SMH, which included those with special knowledge of or expertise in public health;

- Identifying federal, regional, state, or local health or other departments or agencies, with current data or other information relevant to the health needs of the community served by SMH, leaders, representatives, or members of medically underserved, low-income, and minority populations with chronic disease needs in the community served by SMH; and,

- Consultation or input from other persons located in and/or serving SMH's community, such as:

    - Healthcare community advocates;

    - Nonprofit organizations;

    - Local government officials;

    - Community-based organizations, including organizations focused on one or more health issues;

    - Healthcare providers, including community health centers and other providers focusing on medically underserved populations, low-income persons, minority groups, or those with chronic disease needs.

- The sources used for SMH's CHNA are provided in the References and Appendix B: Community Leader Interviewees. Information was gathered by conducting interviews with individuals representing community health and public service organizations, medical professionals, hospital administration and other hospital representatives.

Community Overview

For the purposes of the CHNA report, SMH chose St. Martin Parish as its community. Because this community was chosen purely by geography, it includes medically underserved, low income, and minority populations. All patients, regardless of health insurance status or the ability to pay for care, were taken into account within the community.
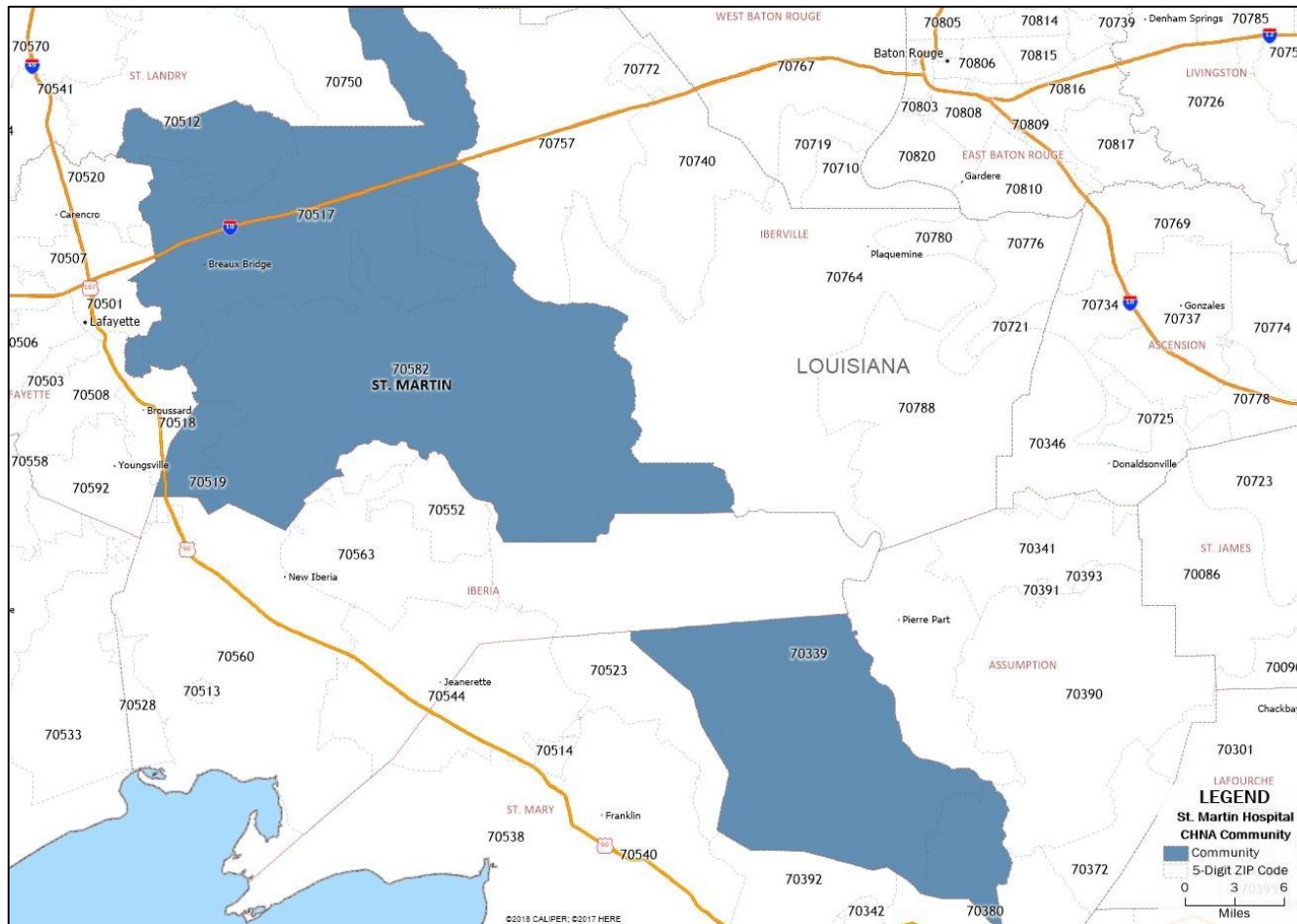
Source: Maptitude 2018

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Community Overview (continued)

<u>Health Professional Shortage Areas</u>

Health Professional Shortage Areas (HPSAs) are designations that indicate health care provider shortages in primary care, dental health, or mental health.

Shortages may be geographic-, population-, or facility-based:

- **Geographic Area** - A shortage of providers for the entire population within a defined geographic area.

- **Population Groups** - A shortage of providers for a specific population group(s) within a defined geographic area (e.g., low income, migrant farmworkers, and other groups)

The following table describes the Health Professional Shortage Area (HPSA) within the community:

Parish	Primary Care Designation	Dental Health Designation	Mental Health Designation	Rural Status
St. Martin Parish	Geographic	High Needs Geographic	Geographic	Partially Rural

Source: HRSA

Community Overview (continued)

Medically Underserved Areas

Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs) identify geographic areas and populations with a lack of access to primary care services.

MUAs have a shortage of primary care health services for residents within a geographic area while MUPs are specific sub-groups of people living in a defined geographic area with a shortage of primary care health services.

The following table describes the MUA within the community:

Parish	MUA	IMU Score	Rural Status
St. Martin Parish	Designated MUA	59.3	Partially Rural

Source: HRSA

Demographics - Population Density by ZIP Code in SMH's Community, 2019
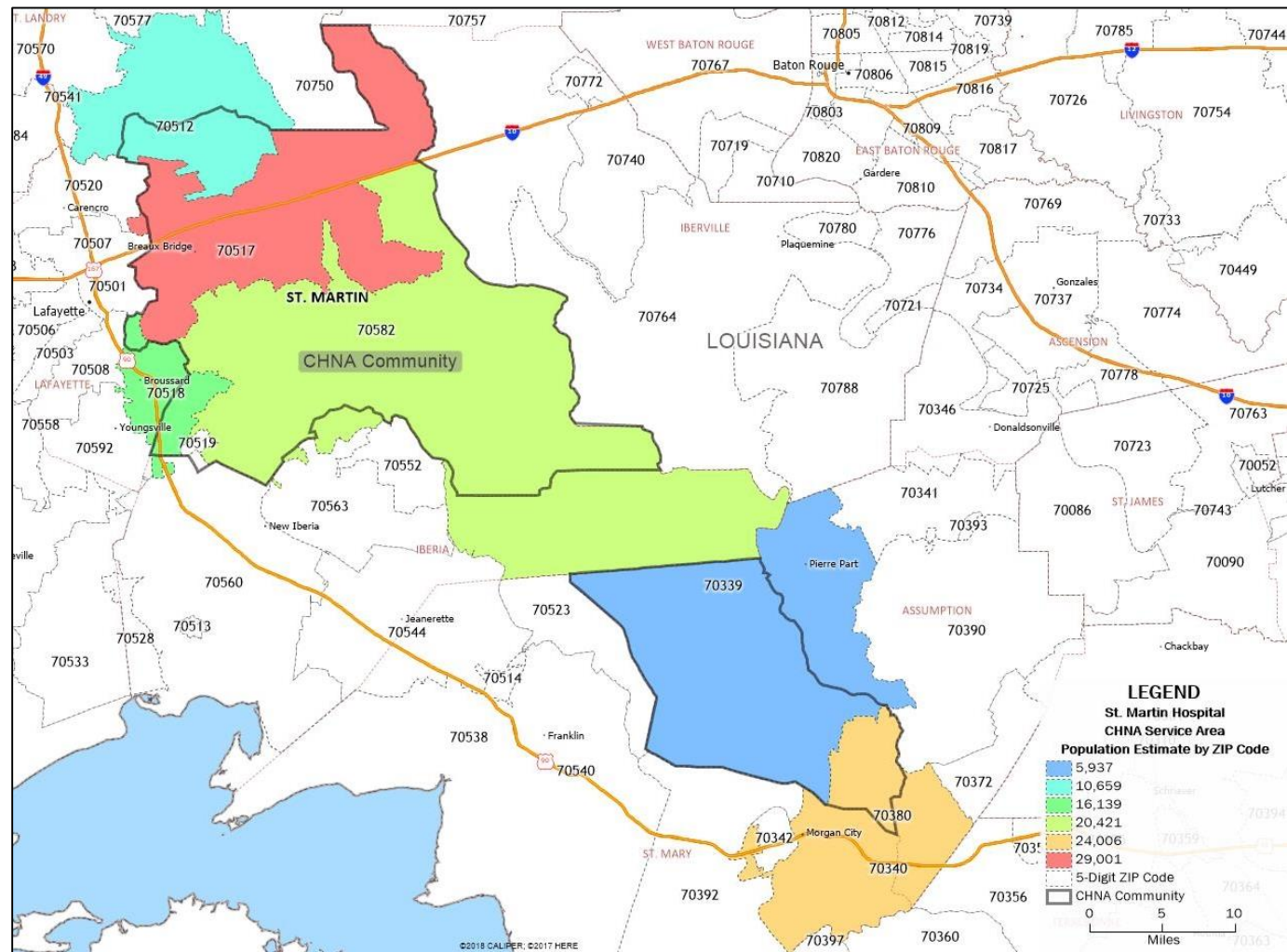
Source: Esri 2019; Maptitude 2018

Population Change by ZIP Code

The overall projected population growth for the community is 2.7% over the next five years. Greater population growth is expected for the 70518 (9.3%), 70517 (3.5%), and 70512 (2.1%) ZIP Codes than for 70582 (1.3%) and 70339 (1.0%). The 70380 ZIP Code has a projected -0.7% population decline over the next five years.

Total Community Population Change by ZIP Code, 2019-2024

ZIP Code	Community	Current Population	Projected 5-year Population	Percent Change
70339	Pierre Part	5,937	5,999	1.0%
70380	Morgan City	24,006	23,836	-0.7%
70512	Arnaudville	10,659	10,880	2.1%
70517	Breaux Bridge	29,001	30,011	3.5%
70518	Broussard	16,139	17,633	9.3%
70582	Saint Martinville	20,421	20,680	1.3%
Total		106,163	109,039	2.7%

Source: Esri 2018

Population Change by Age and Gender

Within the community, the population aged 65 through 84 is expected to experience the greatest amount of growth over the next five years, ranging from 16.1% to 30.0% expected growth. The populations aged 15 through 19 (13.0%) and 40 through 44 (14.4%) are also expected to experience significant growth. A decline in the number of individuals aged 20 through 34 and 50 through 59 is anticipated over the next five years, with the highest amount of population decline expected amongst those aged 25 through 29 (-20.8%).

Total Community Population Change by Age and Gender, 2019-2024

Age Group	2019			2024			Percent Change		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
Age 00 through 04	3,462	3,484	6,946	3,482	3,482	6,964	0.6%	-0.1%	0.3%
Age 05 through 09	3,583	3,577	7,160	3,612	3,578	7,190	0.8%	0.0%	0.4%
Age 10 through 14	3,583	3,591	7,174	3,842	3,781	7,623	7.2%	5.3%	6.3%
Age 15 through 19	3,192	2,963	6,155	3,542	3,413	6,955	11.0%	15.2%	13.0%
Age 20 through 24	2,983	2,830	5,813	2,726	2,613	5,339	-8.6%	-7.7%	-8.2%
Age 25 through 29	3,792	3,590	7,382	2,994	2,855	5,849	-21.0%	-20.5%	-20.8%
Age 30 through 34	3,824	3,650	7,474	3,772	3,535	7,307	-1.4%	-3.2%	-2.2%
Age 35 through 39	3,718	3,698	7,416	3,849	3,789	7,638	3.5%	2.5%	3.0%
Age 40 through 44	3,282	3,368	6,650	3,821	3,786	7,607	16.4%	12.4%	14.4%
Age 45 through 49	3,298	3,334	6,632	3,361	3,379	6,740	1.9%	1.3%	1.6%
Age 50 through 54	3,369	3,495	6,864	3,320	3,352	6,672	-1.5%	-4.1%	-2.8%
Age 55 through 59	3,712	3,889	7,601	3,339	3,488	6,827	-10.0%	-10.3%	-10.2%
Age 60 through 64	3,510	3,655	7,165	3,589	3,808	7,397	2.3%	4.2%	3.2%
Age 65 through 69	2,888	2,934	5,822	3,315	3,447	6,762	14.8%	17.5%	16.1%
Age 70 through 74	2,020	2,200	4,220	2,474	2,619	5,093	22.5%	19.0%	20.7%
Age 75 through 79	1,247	1,464	2,711	1,654	1,869	3,523	32.6%	27.7%	30.0%
Age 80 through 84	699	894	1,593	879	1,168	2,047	25.8%	30.6%	28.5%
Age 85 and over	497	888	1,385	573	933	1,506	15.3%	5.1%	8.7%
Total	**52,659**	**53,504**	**106,163**	**54,144**	**54,895**	**109,039**	**2.8%**	**2.6%**	**2.7%**

Source: Esri 2018

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Current Population Race/Ethnic Composition

The most common race/ethnicity in SMH's Community is White (68.1%), followed by Black/African American (22.5%), Hispanic (5.5%), individuals of two or more races (1.6%), Asian/Pacific Islander (1.6%), and other races (0.7%).

Total Community Population by Race/Ethnicity, 2019

Source: Esri 2019

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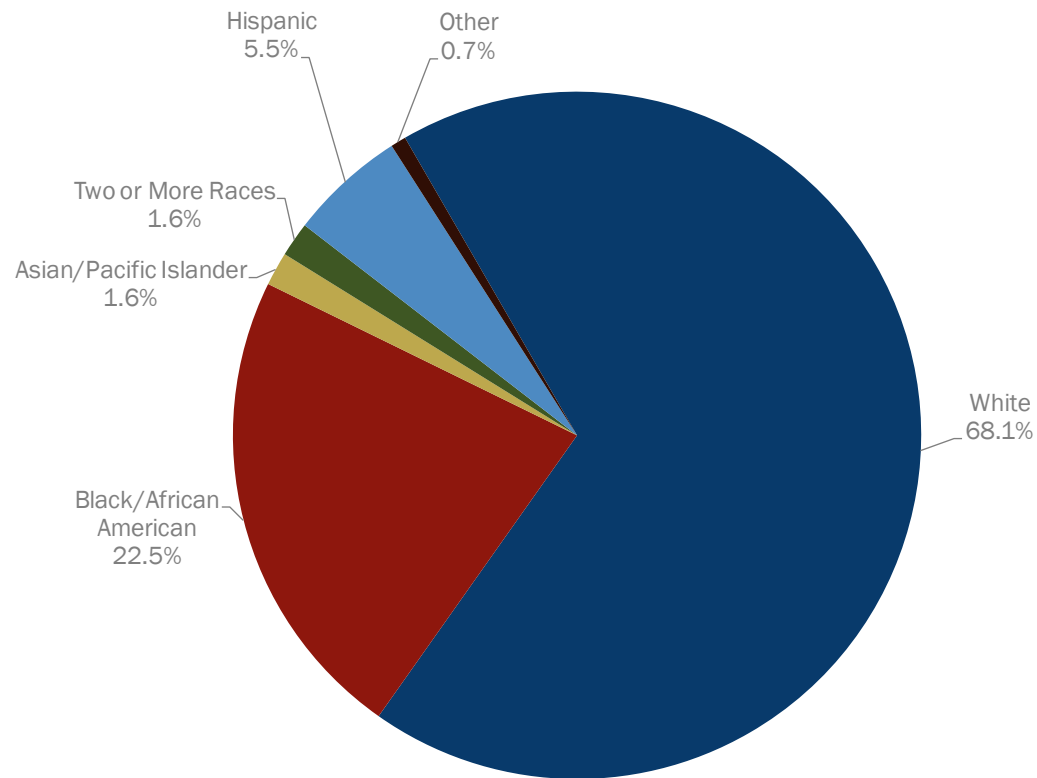
Population Change by Race/Ethnicity

Within the community, substantial population growth is expected for the Hispanic population (24.0%), individuals of two or more races (21.0%), other races (6.6%), and Asian/Pacific Islanders (6.1%). White and Black/African American populations within the community are expected to experience far less significant growth (0.8% and 1.5%, respectively).

Total Community Population Change by Race/Ethnicity, 2019-2024

Race/Ethnicity	2019	2024	Percent Change
White	72,313	72,914	0.8%
Black/African American	23,863	24,227	1.5%
Asian/Pacific Islander	1,678	1,781	6.1%
Two or More Races	1,727	2,090	21.0%
Hispanic	5,815	7,209	24.0%
Other	767	818	6.6%

Source: Esri 2018

Socioeconomic Characteristics

According to HP2020, socioeconomic status (SES) is most often based on a person's income, education level, occupation, social status in the community, and geographic location. Studies have found that SES, more than race or ethnicity, predicts the likelihood of an individual's or group's access to education, health insurance, health care services, and safe and healthy living or working conditions.

According to the U.S. Bureau of Labor Statistics, the 2018 annual unemployment rate average for St. Martin Parish (5.2%) was higher than the average for Louisiana (4.9%) and the United States (3.9%). The U.S. Census Bureau publishes the American Community Survey (ACS), which includes median household income and poverty estimates. According to 2013-2017 ACS estimates, the median household income in St. Martin Parish was higher than the median for Louisiana but significantly lower than the national median household income of $57,652.

Poverty thresholds are determined by family size, number of children, and age of the head of the household. A family's income before taxes is compared to the annual poverty thresholds. If the income is below the threshold, the household and each individual in it are considered to be below the poverty level. As of January 11, 2019, the 2019 federal poverty threshold for a family of four was $25,750. The ACS estimates indicate that St. Martin Parish (17.7%) has a lower percentage of residents below the poverty level compared to the Louisiana population (19.6%), although this exceeds the U.S. estimate (12.3%). St. Martin Parish has a similar number of children living below the poverty level when compared to the state of Louisiana (27.8% and 27.7%, respectively), although both have a much greater percentage of children living in poverty when compared to the nation (20.3%).

	St. Martin Parish	Louisiana	United States
Unemployment Rate[1]	5.2%	4.9%	3.9%
Median Household Income[2]	$ 47,279	$ 46,710	$ 57,652
Individuals Below Poverty Level[2]	17.7%	19.6%	12.3%
Children Below Poverty Level[2]	27.8%	27.7%	20.3%

[1] Source: Bureau of Labor Statistics, 2018 Annual Average
[2] Source: U.S. Census Bureau ACS, 2013-2017 estimates

Housing

The U.S. Census Bureau ACS 2013-2017 estimates indicated that residents of St. Martin Parish had a much higher rate of home ownership (79.8%) than the Louisiana and U.S. rates (65.5% and 64.0%, respectively). The Department of Housing and Urban Development publishes an estimate of the percent of residents faced with a severe housing cost burden by county. Fewer individuals within the parish faced a severe housing cost burden from 2011 to 2015 (8.1%) when compared to the state and the nation.

From 2013-2017, the segregation index for both Black/White and non-White/White populations was lower within St. Martin Parish than in Louisiana and the United States.

Home Ownership and Residential Segregation, 2013-2017

	St. Martin Parish	Louisiana	United States
Homeownership[1]	79.8%	65.5%	64.0%
Severe housing cost burden[2]	8.1%	14.4%	15.0%
Residential segregation - Black/White[1]	30.7	55.7	62.0
Residential segregation - non-White/White[1]	26.5	51.3	47.0

[1]Source: U.S. Census - ACS, 2013-2017 estimates

[2]Source: U.S. Department of Housing and Urban Development 2011-2015

Residential segregation shown as a segregation index

Educational Attainment

The U.S. Census Bureau publishes the ACS which includes estimates of the highest level of education completed for residents aged 25 years and older. The ACS 2013-2017 estimates indicated that residents in St. Martin Parish were less likely to have completed a post high school education compared to the Louisiana averages. Louisiana's residents were more likely to have completed some high school without earning a degree (10.3%) than the United States average (7.2%).

Highest Level of Education Completed by Persons 25 Years and Older, 2013-2017

	St. Martin Parish	Louisiana	United States
Less than 9th grade	8.7%	5.4%	5.4%
9th to 12th grade, no diploma	11.3%	10.3%	7.2%
High school degree or equivalent	40.6%	33.8%	27.3%
Some college, no degree	19.6%	21.3%	20.8%
Associate's degree	5.6%	5.8%	8.3%
Bachelor's degree	10.8%	15.3%	19.1%
Graduate or professional degree	3.4%	8.1%	11.8%

Source: U.S. Census, ACS 2013-2017 estimates

Crime Rates

According to the Louisiana Commission on Law Enforcement, St. Martin Parish had a lower rate of murder, robbery, and assault when compared to Louisiana. The Parish had a higher rate of rape (42.9 per 100,000 population) than the state and national rates (40.0 and 42.4 per 100,000 population, respectively), and a higher murder rate than the U.S (5.6 and 5.4 per 100,000 population, respectively).

Violent Crime Rates, 2017

	St. Martin Parish	Louisiana	United States*
Murder and non-negligent manslaughter	5.6	12.5	5.4
Rape (Revised Definition)	42.9	40.0	42.4
Robbery	44.8	114.9	101.2
Aggravated Assault	194.0	392.1	252.4

Source: Louisiana Commission on Law Enforcement

Rates are per 100,000 population

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The Centers for Disease Control and Prevention (CDC) publish mortality and life expectancy data by county. The age-adjusted mortality from all causes in St. Martin Parish from 2013-2017 was slightly higher than the mortality rate in Louisiana during the same time frame (886.0 and 883.2 deaths per 100,000 population, respectively).

According to the CDC National Center for Health Statistics, from 2015-2017 the life expectancy in St. Martin Parish was nearly identical to the life expectancy within the state of Louisiana. The life expectancy for black individuals was lower than that of white individuals within St. Martin Parish, which is similar to the trend observed at the national level. In the United States, the life expectancy at birth for the white population was 78.8 years in 2017 while the life expectancy for the black population was 75.3 years.

Mortality Indicators

	St. Martin Parish	Louisiana
Age-adjusted mortality from all causes[1]	886.0	**883.2**
Life expectancy[2]	76.0	**76.1**
White life expectancy[2]	77.4	*
Black life expectancy[2]	72.2	*

[1] Source: CDC Wonder, 2013-2017

[2] Source: National Center for Health Statistics Mortality File 2015-2017

Mortality rates are per 100,000 population and life expectancy is shown in years of age

* comparative data unavailable

Leading Causes of Death

According to the CDC Wonder database, heart disease and cancer were the first and second leading causes of death within St. Martin Parish. From 2013 to 2017, there was a higher heart disease mortality rate (230.2 per 100,000 population) and cancer mortality rate (190.8 per 100,000 population) in St. Martin Parish than in Louisiana and the United States. St. Martin Parish's diabetes (12.6) and chronic liver disease (7.3) death rates was lower than the rate for Louisiana and the United States. St. Martin Parish's Accident death rate of 50.5 was higher than that of the overall U.S. (44.0) but less than Louisiana's (54.3). For other leading causes of death, the parish's rates exceeded the state and national benchmarks.

Leading Causes of Death, 2013-2017

	St. Martin Parish	Louisiana	United States
Heart disease	230.2	214.0	167.1
Cancer	190.8	180.2	158.1
(Unintentional injury) Accident	50.5	54.3	44.0
Chronic lower respiratory disease	47.0	45.1	41.1
Stroke	49.0	45.8	37.1
Alzheimer's disease	55.5	40.2	28.0
Diabetes	12.6	24.9	21.2
Kidney disease	24.4	22.8	13.2
Septicemia	21.5	19.3	10.7
Influenza and pneumonia	16.5	16.1	14.8
Suicide	21.9	14.3	13.3
Assault (homicide)	13.3	13.0	5.7
Chronic liver disease and cirrhosis	7.3	9.9	10.6
Hypertension[1]	*	7.9	8.6
Pneumonitis	*	4.4	5.2
Parkinson's disease	8.9	7.9	7.8
Congenital malformations and abnormalities	*	3.6	3.2

Source: CDC Wonder, 2013-2017

Age-Adjusted Death Rates are per 100,000 population

[1] Hypertension includes essential primary hypertension and hypertensive renal disease with renal failure

* Rate Unreliable or Suppressed

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Diabetes Incidence

According to the CDC's Division of Diabetes Translation, in 2016 the percentage of adults aged 20 and older who had been diagnosed with diabetes was 13.8% in St. Martin Parish. The state and national benchmarks, 11.1% and 8.5%, respectively, reflect the percentage of adults aged 18 and older.

Age-Adjusted Diabetes in Adults Ages 20 and Older, 2016

	St. Martin Parish	Louisiana	United States
Adults with diagnosed diabetes	13.8%	11.1%	8.5%

Source: Centers for Disease Control and Prevention, Division of Diabetes Translation

*State and national data reflect adults aged 18 and up

Heart Disease Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for all heart disease per 100,000 adults aged 45 to 64 was higher in St. Martin Parish than in Louisiana and the United States from 2014-2016. Similarly, the death rates for Black (non-Hispanic), White (non-Hispanic), and Male sub-populations were also higher within St. Martin Parish. The female all heart disease death rate within St. Martin Parish (116.9) was lower than the rate for Louisiana, but higher than the national benchmark (72.8).

Across all of the various heart disease death rates included within this report, the death rates for Black (non-Hispanic) individuals were higher than the death rates for White (non-Hispanic) individuals. In comparing male and female sub-populations, the death rates for males were also higher across all of the heart disease rates included (see following pages).

Age-Adjusted All Heart Disease Death Rates per 100,000 Adults Age 45 to 64 by Race and Gender, 2014-2016

	St. Martin Parish	Louisiana	United States
Heart Disease, All	244.7	193.7	122.6
Heart Disease, Black (Non-Hispanic)	336.3	274.0	213.2
Heart Disease, White (Non-Hispanic)	207.9	168.2	121.4
Heart Disease, Male	375.8	267.7	175.1
Heart Disease, Female	116.9	124.6	72.8

Source: Centers for Disease Control and Prevention, Atlas of Heart Disease and Stroke

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Heart Attack Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for heart attacks per 100,000 adults aged 45 to 64 was significantly higher in St. Martin Parish (112.8) when compared to the rate in Louisiana (43.8) and the United States (27.9). All of the sub-population heart attack death rates for St. Martin Parish were also higher than the state and national benchmarks.

Age-Adjusted Heart Attack Mortality Rates per 100,000 Adults Ages 45 to 64 by Race and Gender, 2014-2016

	St. Martin Parish	Louisiana	United States
Heart Attack, All	112.8	43.8	27.9
Heart Attack, Black (Non-Hispanic)	159.2	53.8	34.8
Heart Attack, White (Non-Hispanic)	98.8	42.1	30.0
Heart Attack, Male	168.5	64.1	41.3
Heart Attack, Female	58.8	24.8	15.2

Source: Centers for Disease Control and Prevention, Atlas of Heart Disease and Stroke

Hypertension Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for hypertension was significantly higher in St. Martin Parish than in Louisiana and the United States from 2014-2016. Similarly, the death rates for Black (non-Hispanic), White (non-Hispanic), male, and female sub-populations were also higher within St. Martin Parish than the state and national benchmarks.

Age-Adjusted Hypertension Death Rates per 100,000 Adults Ages 45 to 64 by Race and Gender, 2014-2016

	St. Martin Parish	Louisiana	United States
Hypertension, All	189.9	141.2	89.7
Hypertension, Black (Non-Hispanic)	268.6	234.5	189.1
Hypertension, White (Non-Hispanic)	154.4	105.9	80.4
Hypertension, Male	273.6	188.3	121.8
Hypertension, Female	102.5	97.1	59.4

Source: Centers for Disease Control and Prevention, Atlas of Heart Disease and Stroke

Stroke Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for stroke per 100,000 adults aged 45 to 64 was lower in St. Martin Parish (28.3) than Louisiana (32.3). However, both the parish and state stroke death rates exceeded the national benchmark (19.1). The death rates for white (non-Hispanic), male, and female sub-populations were also lower than the state benchmark, but higher than the national death rate.

Age-Adjusted Stroke Death Rates per 100,000 Adults Ages 45 to 64 by Race and Gender, 2014-2016

	St. Martin Parish	Louisiana	United States
Stroke, All	28.3	32.3	19.1
Stroke, Black (Non-Hispanic)	59.5	58.8	41.4
Stroke, White (Non-Hispanic)	16.3	21.7	16.0
Stroke, Male	32.4	39.7	22.4
Stroke, Female	24.1	25.5	16.0

Source: Centers for Disease Control and Prevention, Atlas of Heart Disease and Stroke

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Cancer Incidence

The National Cancer Institute reports cancer incidence rates on a state and parish level. Tables detailing select cancer incidence rates per 100,000 population for the 2012-2016 time frame can be found on the following page.

- The total incidence rate for all cancers within St. Martin Parish (504.8 per 100,000 population) was higher than the Louisiana and United States rates.

- Within St. Martin Parish, the lung and bronchus cancer incidence rate (71.8 per 100,000 population) was higher than the state and national benchmarks.

- The state and national benchmarks for prostate cancer incidence were lower than the parish rate (146.0 per 100,000 males).

- The breast cancer incidence rate in St. Martin Parish (100.5 per 100,000 females) was lower than the Louisiana rate (124.2) and the United States rate (125.2).

- The colorectal cancer incidence rate within St. Martin Parish (57.1 per 100,000 population) was higher than both the Louisiana and United States rates.

- The incidence rate for pancreatic cancer within St. Martin Parish was lower than the Louisiana rate (14.3 per 100,000 population) but higher than the national benchmark.

- Within St. Martin Parish, the incidence of ovarian cancer (12.0 per 100,000 females) was higher than the state and national incidence rates.

- The brain cancer incidence rate within St. Martin Parish (6.6 per 100,000 population) was higher than the state and national benchmarks.

- The incidence of stomach cancer in St. Martin Parish (13.2 per 100,000 population) was significantly higher than the Louisiana and United States incidence rates.

Cancer Incidence (continued)

Select Age-Adjusted Cancer Incidence Rates, 2012 – 2016

	St. Martin Parish	Louisiana	United States
All Cancer Sites[3]	504.8	**480.6**	**448.0**
Lung and bronchus[1]	71.8	**67.5**	**59.2**
Prostate[2]	146.0	**131.7**	**104.1**
Breast[3]	100.5	**124.2**	**125.2**
Colon and rectum[1]	57.1	**45.8**	**38.7**
Pancreas[1]	13.7	**14.3**	**12.8**
Ovarian[3]	12.0	**9.5**	**11.1**
Brain[1]	6.6	**6.0**	**6.5**
Stomach[1]	13.2	**7.1**	**6.6**
Cervical[3]	*	**8.8**	**7.6**

Source: National Cancer Institute - State Cancer Profiles

[1]Rates are per 100,000 population

[2]Rates are per 100,000 males

[3]Rates are per 100,000 females

* Indicates rate is unstable

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Cancer Mortality

The National Cancer Institute reports cancer mortality rates on a state and parish level. Tables detailing select cancer mortality rates per 100,000 population for the 2012-2016 time frame can be found on the following page.

- The total mortality rate for all cancers within St. Martin Parish (196.5 per 100,000 population) was higher than the Louisiana and United States rates.

- Within St. Martin Parish, the lung and bronchus cancer death rate (54.2 per 100,000 population) was higher than the state and national benchmark rates.

- The breast cancer mortality rate in St. Martin Parish (22.2 per 100,000 females) was lower than the Louisiana rate (23.2) but higher than the United States rate (20.6).

- The colorectal cancer death rate within St. Martin Parish (22.0) was higher than both the Louisiana and United States rates.

- The death rate for pancreatic cancer within St. Martin Parish (13.0) was higher than the state and national benchmarks.

- Within St. Martin Parish, the stomach cancer death rate (6.0) was significantly higher than the Louisiana (3.6) and United States (3.1) death rates.

Cancer Mortality

Select Age-Adjusted Cancer Mortality Rates, 2012 – 2016

	St. Martin Parish	Louisiana	United States
All Cancer Sites[3]	196.5	**183.0**	**161.0**
Lung and bronchus[1]	54.2	**51.5**	**41.9**
Prostate[2]	*	**21.0**	**19.2**
Breast[3]	22.2	**23.2**	**20.6**
Colon and rectum[1]	22.0	**17.1**	**14.2**
Pancreas[1]	13.0	**12.9**	**11.0**
Ovarian[3]	*	**6.3**	**7.0**
Brain[1]	*	**4.3**	**4.4**
Stomach[1]	6.0	**3.6**	**3.1**
Cervical[3]	*	**2.9**	**2.3**

Source: National Cancer Institute - State Cancer Profiles

[1]Rates are per 100,000 population

[2]Rates are per 100,000 males

[3]Rates are per 100,000 females

* Indicates rate is unstable

Sexually Transmitted Infections

Reported rates of sexually transmitted infections (STIs) are available by parish through the Louisiana Department of Health (formerly the Louisiana Department of Health and Hospitals). St. Martin Parish had a lower HIV diagnosis rate in 2017 than the Louisiana rate (22.0 per 100,000 population) and the United States rate (11.9). The reported chlamydia rate in St. Martin Parish (628 per 100,000 population) was lower than the state rate but higher than the national benchmark. Although St. Martin Parish had a lower gonorrhea rate than the Louisiana rate, the parish exceeded the national rate of 171.9 per 100,000 population. The rate of primary and secondary syphilis was higher in St. Martin Parish than the Louisiana and United States rates.

Reported Sexually Transmitted Infections, 2017

	St. Martin Parish	Louisiana	United States
HIV diagnosis rate	9.0	22.0	11.9
Chlamydia	628.0	742.0	528.8
Gonorrhea	214.0	256.0	171.9
Primary and secondary syphilis	17.0	15.0	9.5

Source: Louisiana Department of Health and Hospitals - 2017 Louisiana STD Annual Report

Centers for Disease Control, STD Surveillance 2017 Report

Rates are per 100,000 population

Final

Nutrition & Weight Status

The Behavioral Risk Factor Surveillance System (BRFSS) collects data and reports on health-related risk behaviors, chronic health conditions, and use of preventative services. The 2017 adult obesity rate in St. Martin Parish (34.2%) was higher than the national benchmark but lower than the Louisiana benchmark of 36.2%.

The U.S. Department of Agriculture publishes the Food Environment Atlas which includes information on food insecurity, food deserts, and access to healthy foods. St. Martin Parish's food environment index rating was higher than the Louisiana and United States ratings based on 2015-2016 data points. The percent of parish residents experiencing limited access to healthy foods (1.7%) was far lower than the state and national benchmarks. According to Map the Meal Gap, published by Feeding America in 2016, the percent of individuals experiencing food insecurity within St. Martin Parish was lower than the state average (16.7%) but higher than the U.S. average (13.0%).

Adult Obesity, 2017

	St. Martin Parish	Louisiana	United States
Adult obesity rate	34.2%	36.2%	30.1%

Source: Behavioral Risk Factor Surveillance System

Access to Healthy Foods, 2015-2016

	St. Martin Parish	Lousiana	United States
Food environment index [1]	7.8	5.3	7.7
Food insecurity [2]	15.1%	16.7%	13.0%
Limited access to healthy foods [1]	1.7%	9.5%	6.0%

[1] Source: USDA Food Environment Atlas, 2015-2016

[2] Map the Meal Gap, 2016

Final

Physical Activity

The Centers for Disease Control and Prevention and County Health Rankings collect data and report on physical activity and access to recreational and/or physical fitness opportunities. The percentage of adults in St. Martin Parish who were physically inactive (34.3%) was higher than the state and national benchmarks in 2015. Compared to the Louisiana and United States averages (74.7% and 84.0%, respectively), fewer residents of St. Martin parish had adequate access to locations for physical activity (59.7%).

Physical Activity

	St. Martin Parish	Lousiana	United States
Physical inactivity [1]	34.3%	28.5%	22.0%
Access to exercise opportunities [2]	59.7%	74.7%	84.0%

[1] Source: CDC Diabetes Interactive Atlas, 2015

[2] County Health Rankings 2019

Maternal and Child Health

The Louisiana State Center for Health Statistics, the U.S. Census Bureau and the Centers for Disease Control and Prevention publish data on maternal and child health indicators. St. Martin Parish's birth rate in 2017 was similar to the state rate, but higher than the United States birth rate (11.8 per 1,000 population). The teen birth rates in Louisiana and St. Martin Parish were significantly higher than the United States average (18.8 per 1,000 women aged 15-19 years).

The five year average infant mortality rate in St. Martin Parish was 10.3 deaths per 1,000 live births from 2013 to 2017. The most recent one year infant mortality rates for Louisiana and the United States were 7.1 and 5.8 deaths per 1,000 live births, respectively.

In 2017 St. Martin Parish had fewer low birthweight and preterm births than the state averages. However, the parish rate of low birthweight births (9.9%) was higher than the national rate (8.3%), and the parish rate of preterm births (11.7%) was higher than the national rate (9.9%).

Birth Rates and Infant Morbidity and Mortality, 2013-2017

	St. Martin Parish	Louisiana	United States
Birth rate (per 1,000 population), 2017[1]	12.9	**13.0**	**11.8**
Teen birth rate (per 1,000 women aged 15–19 years), 2017[1]	27.3	**28.7**	**18.8**
Infant mortality rate (per 1,000 live births)[2]	10.3	**7.1***	**5.8***
Low birthweight, 2017[2]	9.9%	**10.7%**	**8.3%**
Preterm births, 2017[2]	11.7%	**12.7%**	**9.9%**

[1]Source: Louisiana State Center for Health Statistics; U.S. Census Bureau

[2]Source: Louisiana State Center for Health Statistics 2013-2017 Five Year Average, Centers for Disease Control and Prevention

* State and national infant mortality rates reflect 2017 data only

Final

Access to Care

According to the U.S. Census Bureau's ACS 2013–2017 estimates, St. Martin Parish had a lower percent of insured individuals (87.0%) than Louisiana and the United States. However, the parish had less uninsured children (4.1%) than the state and the nation.

Within St. Martin Parish, the majority of insured individuals had private coverage (60.2%), while 33.4% of residents received Medicaid from 2013 to 2017. The percentage of individuals receiving Medicaid in St. Martin Parish was significantly greater than the national benchmark (19.3%).

Health Insurance Coverage, 2012-16

	St. Martin Parish	Louisiana	United States
Health insurance coverage	87.0%	87.6%	89.5%
Private insurance	60.2%	61.1%	67.2%
Population receiving Medicaid	33.4%	34.7%	19.3%
No health insurance coverage	13.0%	12.4%	10.5%
No health insurance coverage (children)	4.1%	4.5%	5.7%

Source: US Census, ACS 2013-2017

Health Behaviors

The Behavioral Risk Factor Surveillance System collects data on adult smoking and alcohol consumption. In 2016, St. Martin Parish's adult smoking rate (20.1%) was lower than Louisiana's rate (22.8%) but higher than the national benchmark. The parish had a slightly higher rate of excessive drinking (18.9%) than Louisiana (18.5%) and the United States (18.0%).

Behavioral Risk Factors - 2016

	St. Martin Parish	Louisiana	United States
Adult smokers	20.1%	**22.8%**	**17.0%**
Excessive drinking	18.9%	**18.5%**	**18.0%**

Source: Behavioral Risk Factor Surveillance System, 2016

Health Outcomes

The National Center for Health Statistics provides estimates of premature death. The St. Martin Parish premature death indicator (9,909 years of potential life lost per 100,000 population) was higher than the indicators for Louisiana (9,532 years) and the United States (6,900 years) from 2015 to 2017.

The Behavioral Risk Factor Surveillance System collects data on self-reported physical and mental health. In 2016, fewer individuals in St. Martin Parish reported poor or fair health (19.8%) when compared to Louisiana (21.1%). However, both the parish and state figures for self-reported poor or fair health exceeded the U.S. average of 16.0%.

Residents in St. Martin parish reported fewer poor physical health days than the Louisiana average, but slightly more poor mental health days. In both instances the self-reported average number of days exceeded the national averages.

Health Outcomes 2015-2017

	St. Martin Parish	Louisiana	United States
Premature death indicator [1]	9,909	9,532	6,900
Poor or fair health [2]	19.8%	21.1%	16.0%
Poor physical health days [2]	4.0	4.1	3.7
Poor mental health days [2]	4.3	4.2	3.8

Source: [1] National Center for Health Statistics, 2015-2017, shown in years of potential life lost before age 75 per 100,000 population

[2] Behavioral Risk Factor Surveillance System, 2016

Community Input

The interview data is qualitative in nature and should be interpreted as reflecting the values and perceptions of those interviewed. This portion of the CHNA process is designed to gather input from persons who represent the broad interest of the community serviced by SMH, as well as individuals providing input who have special knowledge or expertise in public health. It is intended to provide depth and richness to the quantitative data collected.

Community Leader Interviews

Interview Methodology

Twelve interviews were conducted from July 2 through August 21, 2019. Interviews required approximately 30 minutes to complete. Interviewers followed the same process for each interview, which included documenting the interviewee's expertise and experience related to the community. Additionally, the following community-focused questions were used as the basis for discussion:

- Interviewee's name

- Interviewee's title

- Interviewee's organization

- Overview information about the interviewee's organization

- What are the top strengths of the community?

- What are the top health concerns of the community?

- What do you think is the single most important thing that could be done to improve the health in your community?

- What are the barriers to obtaining health services in your community?

- What health resources are available in your community?

- What health resources does your community currently need more of?

- What sub-populations are medically underserved in your community?

- Is there anything else we should know about your community that we have not already discussed?

Community Leader Interview Summary

During the Community Leader Interviews, 12 leaders discussed a variety of health-related topics that affect the Community. Interviewees represented multiple organizations in the community including Lafayette General Health, Our Lady of Lourdes, the Diocese of Lafayette, Miles Perret Cancer Services, and others. A list of organizations and individuals included in community leader interviews is provided in Appendix B.

Interviewees discussed specific strengths in the community as they relate to healthcare. Nearly all of the interviewees discussed St. Martin Hospital as a strength and referenced the upcoming expansion of the facilities. Other interviewees noted that the Parish Health Unit, FQHCs, school-based health clinics, and Medicaid clinics were very important strengths related to access to care. Some community leaders discussed other health strengths including the local Council on Aging and the hospital's initiative to provide on-site care to inmates at the local jail.

Community Leaders also discussed their health-related concerns. Access to care topics like health insurance coverage and provider network sufficiency were discussed by several leaders as major concerns. Interviewees noted that there are many physicians in the area who do not accept Medicaid, making it difficult for patients to be seen in a timely fashion. Transportation, health literacy, and poverty were also concerns linked to access to care. During interviews, the concern mentioned most often was weight status, nutrition, and physical activity. Some leaders also linked risk factors like hypertension and diabetes to outcomes like heart disease while others were concerned with comorbid chronic conditions amongst older adults. Mental health and substance abuse were discussed and interviewees were concerned with the lack of services and providers within the community. Another frequently mentioned health issue was cancer, with some leaders citing breast cancer specifically.

Multiple interviewees mentioned the need for care coordination or service coordination within the community. Leaders felt that many individuals needed assistance accessing services and managing their own care. During interviews, community leaders mentioned that they would like for the hospital to recruit additional providers to the area and dedicate resources towards cancer treatment and substance abuse programs. Some felt that the hospital could play a role in improving individual attitudes towards nutrition and physical activity. Other suggestions made by community leaders included introducing family support or parenting programs and hosting additional events within the community rather than at the hospital facility.

Community Leader Interview Summary (continued)

Community leaders were asked to share barriers faced by local community members in seeking care. In addition to discussing access issues like health insurance, provider networks, transportation, and financial barriers, the interviewees also mentioned technology as a potential barrier. Some were concerned that older adults were not able to access online resources or patient portals easily. Multiple discussions involved health literacy and a lack of knowledge about accessing preventative care and screenings. Leaders suggested that individuals needed assistance in modifying their behavior and linkages to existing services.

Other public health and healthcare issues discussed by community leaders included sexually transmitted diseases, domestic violence, high medication costs, social connectedness, tobacco cessation, and maternal and child health.

Feedback from Prior CHNA

LGH solicited comments on their most recent CHNA for St. Martin Hospital within the publicly posted report. The organization did not receive any written feedback on the 2016 CHNA or Implementation Strategy.

Evaluation of Impact

The table below includes updates on progress made towards the goals outlined in SMH's previous Implementation Strategy document.

Community Health Need	Action Plan	Goals	Update on Progress Made
All Priority Areas	Continue publishing weekly articles on various health topics in local newspapers	To improve health knowledge among residents in St. Martin Parish	Complete. SMH publishes articles in the Teche News regarding hospital services and initiatives.
Cancer	Implement smoking cessation program	Decrease the number of cancer cases by lowering the percentage of parish residents who smoke	Complete
Cancer	Enhance infusion center services and capacity	To provide a wider breadth of infusion center services to better serve the community	Complete. SMH has increased services to include ALS patients.
Cancer	Continue utilizing colorectal screening kits	Increase the number of completed screening kits	In progress
Heart Disease	Ensure patients participating in the smoking cessation program utilize the outpatient cardiac rehabilitation component	Ensure at least 25% of patients in the smoking cessation program participate in the cardiac rehabilitation program when necessary	In progress
Heart Disease	Maintain partnership with Lafayette cardiologists to ensure cardiac care is available in the community	Continue to provide high quality cardiac care in St. Martin Parish	Complete. SMH now offers 24/7 cardiology services.
Heart Disease/Diabetes	Enhance current programs for diabetes and obesity	Increase participation in community outreach programs and education classes	Completed through the Road to Good Health program.
Diabetes	Continue to conduct glucose screenings with education and referral components in the community bi-annually	Increase the number of at-risk community residents who know their blood glucose levels and subsequently are linked to services	Complete

Evaluation of Impact

Community Health Need	Action Plan	Goals	Update on Progress Made
Diabetes	Educate the community on wellness and nutrition by establishing a six week program that focuses on healthy eating and weight loss and offer this program on a continual basis	To provide a resource to community members that is focused on wellness and healthy habits and educates residents about the resources available	Complete
Diabetes	Continue to hold monthly Cajun Delights classes	Increase monthly participation	Complete
Mental Health	Continue to work with University Hospital and Clinics (UHC), LGMC, and outside entities to ensure psychiatric patients are transferred to the appropriate facilities for care	Ensure all psychiatric patients receive the appropriate care	Complete. The hospital is also in the process of developing an onsite outpatient behavioral health clinic for the community.
Mental Health	Implement telemedicine services to serve this patient population	Create a treatment protocol utilizing telemedicine for this underserved patient population	Complete. SMH has implemented telemedicine within all parish public schools and has partnered with the parish government to provide telemedicine and nursing care to incarcerated individuals.
Social Determinants of Health	Continue providing free and low-cost screenings and other services	Serve as a health care resource for residents who are underserved due to insurance and financial barriers	SMH provides a free wellness program to all of our community called Road to Good Health. The hospital also offers free diabetes education classes and hosts free or low-cost screening events annually for the community.
Social Determinants of Health	Continue to hold events to raise funds for improving access to healthcare	Raise $150,000 through local non-profit coordination with LGH over the next three years	SMH has hosted annual fundraising events for the past three years, with the next scheduled on October 10, 2019.

Community Health Priorities

The overarching goal in conducting this Community Health Needs Assessment is to identify significant health needs of the community, prioritize those health needs, and identify potential measures and resources available to address the health needs. For the purpose of identifying health needs for SMH, a health priority is defined as a medical condition or factor that is central to the state of health of the residents in the community. An exhaustive list of health needs was compiled based on the health profile and interviews. A modified version of Fowler and Dannenberg's Revised Decision Matrix was developed to capture priorities from the primary and secondary data. This matrix tool is used in health program planning intervention strategies, and uses a ranking system of "high," "medium", and "low" to distinguish the strongest options based on effectiveness, efficiency, and sustainability. As the CHNA is meant to identify the community's most significant health needs, only the health needs falling under the "high" and "medium" categories are highlighted.

The six health needs identified through the CHNA, in order of priority are:

1. Weight Status and Nutrition
2. Mental Health and Substance Abuse
3. Access to Care
4. Cancer
5. Heart Disease and Risk Factors
6. Health Literacy

Weight Status & Nutrition

Priority Definition

The HP2020 goals include to "promote health and reduce chronic disease risk through the consumption of healthful diets and achievement and maintenance of healthy body weights" and to "improve health, fitness, and quality of life through daily physical activity."

Key topics within this priority include:

- Obesity
- Food insecurity and hunger
- Access to healthy food and environmental risk factors
- Nutrition knowledge, understanding, and skills
- Physical activity
- Access to exercise or activity opportunities
- Health-promoting environments and marketing
- Self-efficacy

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- Cultural norms surrounding unhealthy foods
- Lack of understanding on how to maintain a healthy diet
- Access to healthy foods and fresh fruits and vegetables
- Lack of knowledge of nutrition as a risk factor

Quantitative Findings

"Among adults and older adults, physical activity can lower the risk of coronary heart disease, stroke, high blood pressure, type 2 diabetes, breast and colon cancer, falls, and depression. Among children and adolescents, physical activity can improve bone health, reduce symptoms of depression, improve cognitive skills, and improve the ability to concentrate and pay attention. For people who are inactive, even small increases in physical activity are associated with health benefits." (HP2020)

Within St. Martin Parish, a greater percentage of individuals were physically inactive than the state and national averages.

The USDA's Food Environment Index for Acadia Parish was 7.8 from 2015-2016, which exceeded the state and national benchmarks.

Within St. Martin Parish, 59.7% of residents had access to exercise opportunities which was significantly lower than the Louisiana average of 74.7% and the national average of 84.0%

34.2% obesity rate

Across the United States, the prevalence of obesity is highest amongst middle-aged people, women with non-Hispanic black race/ethnicity, and Mexican-American women (HP2020).

Mental Health & Substance Abuse

Priority Definition

One of the HP2020 goals is to "improve mental health through prevention and by ensuring access to appropriate, quality mental health services."

Key topics within this priority include:

- Screening for mental/behavioral health conditions
- Increasing access to mental health providers
- Reducing risk factors and increasing protective factors
- Substance abuse
- Availability of inpatient psychiatric beds

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- Access to local mental health services including inpatient psychiatric treatment
- Suicide rates
- High levels of stress in daily life
- Treatment for opioid addiction, including during pregnancy
- Support programs for those impacted by substance abuse

Quantitative Findings

From 2013 - 2017 the suicide death rate in St. Martin Parish was 21.9 per 100,000 population, which was higher than the state rate of 14.3.

Compared to the Louisiana average, individuals in St. Martin Parish were more likely to self-report poor mental health days in the previous 30 days.

In any given year, an estimated 18.1% (43.6 million) of U.S. adults aged 18 years or older suffered from any mental illness and 4.2% (9.8 million) suffered from a seriously debilitating mental illness. Neuropsychiatric disorders are the leading cause of disability in the United States, accounting for 18.7% of all years of life lost to disability and premature mortality (HP2020).

Within St. Martin Parish, 18.9% of adults self-reported excessive drinking in 2016.

In 2017, the Opioid prescribing rate in St. Martin Parish was 70.3 prescriptions per 100 population, which was higher than the national average of 58.7 prescriptions.

2,260:1

ratio of population to mental health providers in St. Martin Parish in 2016

Access to Care

Priority Definition

The Institute of Medicine previously defined access to care as "the timely use of personal health services to achieve the best health outcomes."

Key topics within this priority include:

- Health insurance and the affordability of care
- Transportation and proximity to services
- Availability of health care providers
- Network adequacy
- Telemedicine

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- Transportation options for those without vehicles or those who are unable to drive
- Availability of primary care providers who accept Medicaid
- Access to preventative screenings to promote early detection

Quantitative Findings

6,000 : 1
population to physician ratio for primary care in St. Martin Parish in 2016

The percentage of households with no vehicle available was 6.1% in St. Martin Parish from 2013-2017.

13.0% of Acadia Parish was uninsured from 2013-2017

The percentage of children without health insurance within the parish (4.1%) was better than the state benchmark (4.5%) from 2013-2017. Individuals in St. Martin Parish were less likely to have private health insurance coverage than the Louisiana and national averages. The percent of the population receiving Medicaid was significantly higher than the national average (19.3%).

33.4% Percent of population receiving Medicaid

Cancer

Priority Definition

One of the HP2020 goals is to "reduce the number of new cancer cases, as well as illness, disability, and death caused by cancer."

Key topics within this priority include:

- Understanding of risk factors
- Access to evidence-based screenings and diagnostics
- Affordability of care and treatment
- Support services for patients, survivors, and family members

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- Breast cancer incidence and mortality rates
- Support for individuals with cancer and survivors
- Need for local chemotherapy providers

Quantitative Findings

From 2013-2017, cancer was the second leading cause of death in St. Martin Parish.

Many cancers are preventable by minimizing risk factors like smoking, physical inactivity, poor nutrition, obesity, and UV light exposure while some cancers may be prevented by vaccination. Low socioeconomic status impacts the prevalence of behavioral risk factors for cancer as well as the rate of cancer screening (HP2020).

All Cancer Site Age-Adjusted Mortality and Incidence Rates per 100,000 Population 2012-2016

Legend: St. Martin Parish, Louisiana, United States
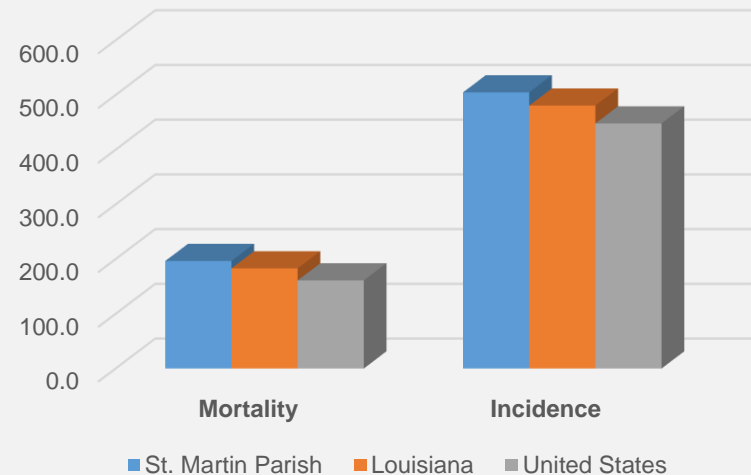
Heart Disease & Risk Factors

Priority Definition

One of the HP2020 goals is to "improve cardiovascular health and quality of life through prevention, detection, and treatment of risk factors for heart attack and stroke; early identification and treatment of heart attacks and strokes; prevention of repeat cardiovascular events; and reduction in deaths from cardiovascular disease."

Key topics within this priority include:

- Heart disease
- Stroke
- Modifiable risk factors
- Hypertension
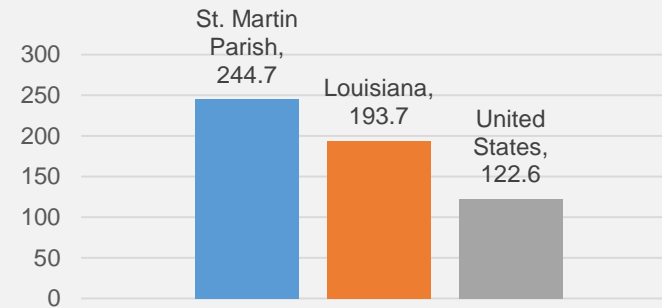- Diabetes
- Smoking

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- The incidence of heart disease in the area was a serious concern for multiple leaders
- High cost of medication and treatments for those with chronic disease diagnoses
- Hypertension as a risk factor
- Understanding of modifiable risk factors

Quantitative Findings

Heart disease was the leading cause of death in St. Martin Parish from 2012 through 2016 (CDC Wonder). The leading modifiable risk factors for heart disease and stroke are: high blood pressure, high cholesterol, cigarette smoking, diabetes, unhealthy diet and physical activity, and overweight/obese status (HP2020).

All Heart Disease Death Rates Per 100,000 Adults, Aged 45 to 64

Bar chart: St. Martin Parish, 244.7; Louisiana, 193.7; United States, 122.6

"African Americans, Hispanic/Latino Americans, American Indians, and some Asian Americans, Native Hawaiians, and other Pacific Islanders are at particularly high risk for the development of type 2 diabetes." (HP2020)

13.8%
adults with diabetes

20.1% of adults self-reported smoking in 2016

Health Literacy

Priority Definition

According to HRSA, health literacy is defined as "the degree to which individuals have the capacity to obtain, process, and understand basic health information needed to make appropriate health decisions."
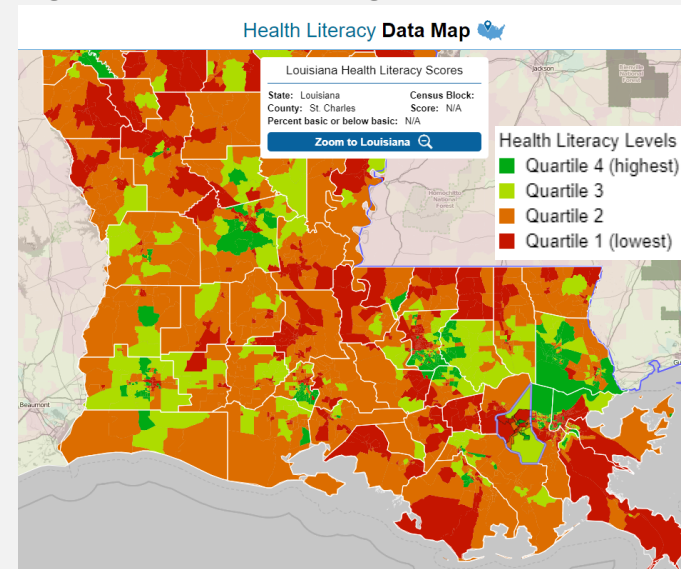
Key topics within this priority include:

- Health literacy levels amongst healthcare consumers
- Education for healthcare providers
- Medically underserved populations
- Access to healthcare information and technology

Quantitative Findings

Low health literacy is more prevalent amongst the following populations: older adults, minority populations, individuals with low socioeconomic status, and medically underserved people (HRSA).

17.7% of individuals below poverty level

According to the University of North Carolina at Chapel Hill, the following health literacy levels (by national quartile) were assigned to census tracts throughout Louisiana.

Health Literacy **Data Map**

Louisiana Health Literacy Scores

State: Louisiana
County: St. Charles
Percent basic or below basic: N/A
Census Block:
Score: N/A

Zoom to Louisiana

Health Literacy Levels
- Quartile 4 (highest)
- Quartile 3
- Quartile 2
- Quartile 1 (lowest)

Qualitative Findings

COMMUNITY LEADER CONCERNS:
- Low levels of health literacy leading to medication non-compliance
- Understanding of how to utilize primary care and preventative medicine
- Knowledge and understanding of chronic disease risk factors, especially modifiable risk factors
- Education about available social and healthcare services

Final

Resources

Based on each of the previously identified health priorities, analyses have been completed on hospital-based, community-based, and government-sponsored resources. These resources are featured throughout the following pages.

Resources – Weight Status and Nutrition

St. Martin Parish contains a number of programs and services designed to provide nutrition education, encourage community members to make healthy choices, lower obesity rates, and improve access to healthy foods. The list below includes local resources related to this health priority:

- SMH provides a free wellness program to the community called "Road to Good Health". The program targets adults and includes 6 weeks of education related to nutrition and physical activity.

- SMH's regular screening events within the community promote awareness of modifiable risk factors like nutrition and physical activity.

- The Well-Ahead Louisiana initiative by the Louisiana Department of Health (LDH) promotes and recognizes healthy choices in the spaces and places where people live and work including tobacco-free policies, healthy food options and workplace fitness programs. SMH has been recognized as a Level 3 "WellSpot" by the LDH.

- The Summer Enrichment Program in Breaux Bridge provides breakfast and lunch to school-aged children during the summer months.

- A number of local food banks provide assistance to individuals experiencing food insecurity.

- The Eat Fit program encourages local restaurants to indicate healthy options on their menus. An app is available for community members to interact with that includes a listing of area restaurants participating in the program.

Resources – Mental Health & Substance Abuse

St. Martin Parish contains a number of programs and services designed to minimize risk factors and promote protective factors related to mental illness and addiction, screen for mental and behavioral health conditions, and provide interventions. The list below includes local resources related to this health priority:

- SMH is currently developing a plan to offer outpatient behavioral health services to community members.

- Genesis Behavioral Hospital offers inpatient psychiatric services at its location in Breaux Bridge.

- Within Lafayette, LGH provides short-term inpatient psychiatric services for individuals coping with an acute medical disorder at the Lafayette Behavioral Health Unit through a partnership with the Louisiana Department of Health and Hospitals.

- The Tyler Mental Health Clinic in Lafayette serves portions of St. Martin Parish and provides psychosocial, psychological, and psychiatric evaluations, individual and group counseling, crisis management, and medication management.

- Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) is a national initiative that is being piloted in Louisiana. The aim of Project LAUNCH Louisiana is for all children ages 0-8 to reach social, emotional, behavioral, physical, and cognitive milestones. Local providers and public health professionals are engaged in a number of grant projects. Resources for parents are available at louisianalaunch.org.

Resources – Access to Care

St. Martin Parish contains a number of programs and services designed to assist lower-income, uninsured, and underinsured populations in accessing healthcare. A variety of organizations seek to increase the number of individuals with health insurance and ensure adequate access to primary care and specialty care providers. The list below includes local resources related to this health priority:

- SMH operates a walk-in Community Health Clinic that sees patients on a first come, first served basis. The clinic accepts all Medicaid plans and offers patients a reduced wait time compared to the Emergency Room.

- The hospital participates in annual fundraising efforts alongside local non-profit organizations in order to fund initiatives related to expanding access to care.

- SMH collaborates with all St. Martin Parish public schools to provide access to telemedicine services and also extends nursing care and telemedicine to incarcerated individuals in the community.

- SMH regularly publishes articles within Teche News to inform community members of available services and programming.

- The Parish Health Unit provides immunizations, reproductive health services, WIC programming, and a tuberculosis clinic.

- A number of urgent care clinics throughout the area provide after-hours care.

- The St. Martin Parish Community Health Center, a location of the Comprehensive Community Health Center, provides medical, dental, and wellness services to uninsured and underinsured individuals.

- Medicare and Medicaid approved transportation programs are available to enrollees.

- The local Council on Aging provides transportation services to older adults who qualify.

Resources – Cancer

St. Martin Parish contains a number of programs and services which aim to reduce cancer incidence rates and provide support to cancer patients and survivors. The list below includes local resources related to this health priority:

- Lafayette General Health (LGH) operates Cancer Center of Acadiana (CCA) at Lafayette General Medical Center, located within Lafayette Parish. CCA also operates a location at Acadia General Hospital, providing hematology and oncology services to local patients.

- SMH provides state of the art breast cancer screenings to help detect breast cancer as early as possible, including digital mammography, breast ultrasound, and ultrasound-guided biopsy.

- The hospital continues to partner with Komen Acadiana to support screenings, diagnostic testing, patient education, and patient navigation services.

- Miles Perret Cancer Services provides an outreach program called "Mobile Miles" that brings mastectomy supplies, nutritional supplements, durable medical equipment, and a mobile resource library to facilities within St. Martin Parish.

Resources – Heart Disease and Risk Factors

St. Martin Parish contains a number of programs and services designed to prevent heart disease, treat diabetes and hypertension, and provide high-quality cardiovascular care. The list below includes local resources related to this health priority:

- SMH offers patients access to 24/7 cardiology services.

- The hospital also provides infusion services, Coumadin treatments, a congestive heart failure clinic, and cardiac rehabilitation services.

- LGH maintains a strong partnership with Cardiovascular Institute of the South (CIS) which provides care to local community members at the Breaux Bridge location.

- The Well-Ahead Louisiana initiative by the Louisiana Department of Health (LDH) promotes and recognizes healthy choices in the spaces and places where people live and work including tobacco-free policies, healthy food options and workplace fitness programs. SMH has been recognized as a Level 3 "WellSpot" by the LDH.

- The parish has multiple recreation and fitness centers that community members may utilize for a fee.

- Diabetes education classes are hosted by SMH and the local Council on Aging.

- A number of local providers assist diabetic patients with podiatry services. Acadiana Foot Centers has a location in Lafayette and provides preventive and routine care programs for diabetic patients. These services include care of ingrown nails and infections, debridement of nails, diabetic foot care and education, and more.

Resources – Health Literacy

St. Martin Parish contains a number of programs and services designed to increase health literacy levels, and educate providers so they can better treat individuals with low levels of health literacy. The list below includes local resources related to this health priority:

- SMH provides conduct discharge planning with patients that involves education about their treatment plan and the self-management of their conditions.

- The SMH "Road to Good Health" program is a six-week course for adults focused on education related to nutrition and physical activity.

- School-based health clinics act as a resource for local families to obtain health information.

- LGH provides a number of health fairs and educational events throughout the Acadiana region. Attendees can engage in free health screenings and learn about preventative care.

- The St. Martin Parish Community Health Center, a location of the Comprehensive Community Health Center, provides medical, dental, and wellness services to uninsured and underinsured individuals.

- Local pharmacists offer consultation regarding prescribed and over the counter medications and are a valued part of the healthcare system within St. Martin Parish.

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Appendix A

Carnahan Group Qualifications

Carnahan Group is an independent healthcare technology and consulting firm that focuses on providing innovative and cost-effective compliance solutions to healthcare systems and organizations throughout the nation. Since 2002, Carnahan Group has been trusted by healthcare organizations throughout the nation as an industry leader in providing Fair Market Valuations, Medical Staff Demand Analyses, Community Health Needs Assessments, and Strategic Planning. Our executive team has risen through the ranks of some of the world's largest healthcare systems and has firsthand knowledge of working within a hospital system undergoing federal scrutiny and under OIG Corporate Integrity Agreements. We have not spent our lives as consultants and are therefore acutely aware of the sensitivity surrounding the timeliness, the objectivity, and the correctness of strategic reports. Carnahan Group is dedicated to providing unsurpassed customer service and quality to our clients.

Appendix B

Community Leader Interview Organizations

Organization	Title	Organization Type or Population Represented
Local Business	Pharmacist	Clinical provider
City of Breaux Bridge	Mayor	Local government
Local Business	Owner	Community member
St. Martin Parish Government	Parish President	Local government
City of Breaux Bridge	Employee	Local government
City of Breaux Bridge	Director of Tourism	Local government
St. Martin Hospital Service District	Chairman	Hospital administration
St. Martin Clerk of Court	Clerk of Court	Local government
St. Martin Hospital	Case Manager	Clinical provider, underserved, low-income, minority, or chronic disease population
St. Martin Hospital	Board Member	Hospital administration
Breaux Bridge Police Department	Chief	Local government
Louisiana Department of Health	Region 4 Medical Director	Public health

Carnahan Group – Company Overview

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Thank you for the opportunity to serve Lafayette General Health.
We are committed to being your innovative strategic partner.