

BROWARD COUNTY HEALTH PLAN OVERVIEW

Broward County is the Nation’s sixteenth largest county and continues to grow in racial and ethnic diversity. Broward’s diversity elevated the County from the sixteenth (1990) to the third (2009) most racially diverse Florida County. The diversity and size of Broward, in conjunction with a variety of other factors, result in a community with complex needs. These needs are becoming increasingly multifaceted due to the growing U.S. economic crisis, which has disproportionately impacted Florida. As the economy continues to decline, more Broward residents are unable to afford the rising costs of healthcare and rely on publicly funded social services for assistance. This increase in demand highlights the value of a comprehensive analysis of Broward’s health and human services needs.

The Broward County Health Plan’s purpose is outlined in Figure 1. The Health Plan provides a comprehensive description of the Community, healthcare system and various factors influencing health and healthcare access.

Figure 1. Health Plan Purpose



The Health Plan covers a vast spectrum of topics, from labor force statistics to immunization rates, reflecting the broad scope of issues affecting public health as well as highlighting the correlation between socioeconomic and community health. For example, education is a socioeconomic factor that can significantly impact the individual and community health. Figure 2 and Figure 3 elaborate on the relationships between health and socioeconomic factors.

Figure 2. Relationship Between Socioeconomic Factors and Health



Figure 3. Socioeconomic Factors Influencing Health Status



The Health Plan is a dynamic document whose goal is to be a working document, continually updated, to ensure availability of the most current information available. The information is targeted to leaders in the following areas:

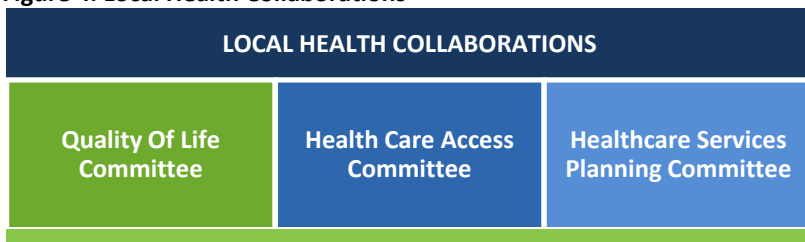
- Local Governments and Other Policymakers
- Healthcare Administrators
- Healthcare Providers
- Healthcare Funders
- Healthcare Professionals

- Healthcare Researchers
- Consumers and Other Stakeholders
- Public and Private Healthcare Financers

BROWARD COUNTY COLLABORATION

Broward County has a unique health and human services system in which extensive collaboration occurs to ensure a high quality of care in Broward County. This collaboration assists in the development of the Health Plan, which is facilitated by three Health Committees that meet monthly: Quality of Life (QOL) Committee, Healthcare Access Committee (HAC) and Health Services Planning (HSP) Committee. The Quality of Life Committee is responsible for the Broward Quality of Life Survey. The monthly Health Care Access Committee is responsible for measuring progress in attaining health improvements through the Broward Health Benchmarks, and the Health Services Planning (HSP) Committee oversees the Broward County Health Plan.

Figure 4. Local Health Collaborations



The Health Plan is divided into seven chapters to address the multifaceted healthcare system in Broward.

CHAPTER I: REGIONAL PROFILE

Chapter I provides demographic and socioeconomic indicators influencing health status and impacting availability of health resources that contribute to increasing utilization rates and decreasing availability healthcare financing. The factors discussed in this Chapter include demographics, immigration, migration, education, income, employment, poverty, public assistance, cost of living, housing, health insurance, crime, domestic violence, drugs and recently incarcerated populations. These factors directly and indirectly impact the health status of Broward County residents.

CHAPTER II: HEALTH STATUS

Chapter II outlines community health status through a variety of health indicators. The Chapter considers five broad health categories: Maternal and Child Health, Behavioral Health, Oral Health, School Health and Morbidity and Mortality.

CHAPTER III: HEALTH RESOURCES

Chapter III provides an overview of health resources currently available in Broward County. This includes a discussion of Primary Care Centers, Urgent Care Centers, the Broward County Health Department, Hospitals, Nursing Homes as well as other healthcare providers and programs. Additionally, the health professional shortage and medically underserved

population designations and their impact on Broward are discussed.

CHAPTER IV: HEALTHCARE UTILIZATION

Chapter IV provides healthcare utilization data. Broward County's diversity as well as the seasonal fluctuations can influence utilization. This Chapter will assist in analyzing utilization and provide a greater understanding of the health care system in the County.

CHAPTER V: HEALTHCARE FINANCING

Chapter V discusses the increasingly complex topic of healthcare financing. It outlines numerous sources of healthcare financing in Broward and provides a brief description of healthcare funding.

CHAPTER VI: SURVEYING AND BENCHMARKS

Chapter VI provides an overview of the local Quality of Life Survey health section and additional local mechanisms for identifying and tracking health issues and priority areas, including the Broward Health Benchmarks and the Community Survey. These data sources are utilized to guide local community initiatives.

CHAPTER VII: THE HEALTH DATA WAREHOUSE

Chapter VII outlines the Health Data Warehouse. BRHPC developed a web-based data warehouse and analytical engine with the following query module functions: 1) Prevention Quality Indicators/Avoidable Admission, 2) Inpatient Chronic

Conditions (ICD-9), 3) Suicide Incidence, 4) ED Acuity Stratification (CPT) and 5) NYU Algorithm ED Preventable/Avoidable. This Chapter explains these systems and illustrates the data produced by the Health Data Warehouse.

CHAPTER VIII: GAPS ANALYSIS

Chapter VIII provides a brief description of the analysis requested by the Coordinating Council of Broward (CCB) in 2009 to determine the potential impact of implementing a common eligibility program for publicly funded social services in Broward County and the surrounding metropolitan area. The analysis was based on five programs: 1) Earned Income Tax Credit (EITC), 2) Nutritional/Food Stamps Program, 3) Women, Infants and Children (WIC), and 4) Health Insurance.