Mobile Infirmary
INFIRMARY HEALTH

Community Health Needs Assessment
2012

Mobile Infirmary Medical Center | 5 Mobile Infirmary Circle, Mobile, AL 36607 | P: 251-435-2400

~ Mission ~ Vision ~ Values ~

Mission

Our mission is LIFE

Vision

The FIRST CHOICE for healthcare in our region

Our Values

Leadership

Integrity

Family

Excellent Service

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Executive Summary

The Patient Protection and Affordable Care Act (ACA), signed into law on March 23, 2010, created new requirements for not-for-profit hospitals including a requirement for a Community Health Needs Assessment (CHNA) to be completed every three years. This report was prepared by Alabama Quality Assurance Foundation (AQAF) in conjunction with Mobile Infirmary Medical Center to meet the CHNA requirement for fiscal year 2012-2013. Alabama Quality Assurance Foundation (AQAF) is the Quality Improvement Organization (QIO) for the state of Alabama. AQAF has over three decades of experience in identifying and addressing community health needs.

To prepare this CHNA report data was gathered from multiple sources in an effort to construct a current and accurate snapshot of the health issues in Mobile County, Alabama. Data was obtained from multiple public data bases and opinions were solicited from public health experts, community leaders and patients within the community served by Mobile Infirmary Medical Center. This information was summarized for final consideration by a CHNA team consisting of hospital and system personnel as well as community members. Using rank order balloting, this team prioritized the community health needs as follows:

1. Good Nutrition/Obesity Prevention
2. Diabetes Related Education and Support
3. Decrease Unemployment
4. Free Subsidized Healthcare for the Medically Indigent or Needy
5. Cardiac Health
6. Mental Health Related Education and Support

An implementation strategy that will address each of these issues is currently in development. The strategy will seek to leverage valuable partnerships that currently exist, identify novel opportunities for synergy and maximize legacy programs while deploying specific interventions within the community. The outcomes and results of these interventions will be followed and reexamined in preparation for the next CHNA scheduled for completion in Spring 2016.

Methodology

The needs assessment process was initiated by assembling an internal team responsible for shepherding the entire project. The internal team was comprised of representatives from hospital management, nursing services, patient services, and AQAF. This team met initially to review the requirements of the Community Health Needs Assessment as established by the Affordable Care Act and further defined by IRS Notice 2011-52 and to establish the roles and responsibilities for the team members. These decisions were memorialized in a project plan and incorporated into a project dashboard. A secure, web-based portal was established to provide reliable communication among the team members and ready access to the project plan and dashboard. With the infrastructure created and the purpose and scope of the project identified, the team set about its primary task of gathering data.

The first step in the data gathering process was to obtain several de-identified data sets from the hospital. The initial task was to obtain zip code specific discharges for up to three years. These data were then analyzed to compile zip code maps defining the hospital's service area. Additional data were requested from the hospital including admission data stratified by age, race, ethnicity and payer mix and discharge diagnoses. With the service area of the hospital determined, a best fit county was selected for data collection from secondary (public) sources and for the purposes of comparison. Secondary sources utilized for this report include:

- Behavioral Risk Factor Surveillance Survey
- Youth Risk Factor Behavior Surveillance Survey
- Alabama Department of Public Health, Center for Health Statistics
- Alabama Department of Public Health, Immunization Division
- Alabama Department of Public Health, Cancer Registry
- U.S. Census Bureau
- U.S. Bureau of Labor Statistics
- County Health Rankings and Roadmaps
- Community Health Status Indicators

The second step was to gather information from various representatives of the community. The elements of this step required answers to the following questions:

- Who would provide input?
- What questions would be asked?
- What format would be utilized?

The CHNA team met to establish a list of key informants that included individuals with public health expertise, state and local officials, community leaders and patients. The CHNA team also developed a consistent list of health issues that would be used to query the key informants. These issues were established with a private ballot after an open discussion. The ballot contained 42 high-priority health issues identified as Healthy People 2020 Health Indicators. The participants were instructed to select up to 20 of the issues that they felt were of significance in their community. A frequency calculation was used to

establish the topic areas of concern for that community. These topic areas were then used to develop a survey that was distributed to the key informants via Survey Monkey. The topic areas were also used to create a survey that was distributed to several patient groups and to inform the face to face interviews held with the public health experts. The results of these surveys and interviews were then compiled.

Distillation of these data into a prioritized list was the final step of the Community Health Needs Assessment. The CHNA coalition committee (the CHNA team plus multiple community members) met to complete this final task. AQAF staff presented the data collected. The coalition committee members then completed a private, rank ordered ballot identifying the most significant health care priorities for the community. A frequency weighted, Borda type tabulation was then used to arrive at the final prioritized list. The information presented to the CHNA coalition committee and the final prioritized list of care needs is summarized in this report.

Community Description

Geographic Area Defined

Mobile Infirmary Medical Center community is defined by the zip codes of 75% of the hospitals discharges and includes the following:

36605	36617	36507	36613	36451
36582	36571	36693	36619	36445
36695	36610	36526	36607	36545
36606	39452	36604	36603	
36608	36575	36544	36541	
36609	36618	36611	36502	

The community consists of 27 zip codes, of which 24 are in Mobile County. Two additional Alabama counties, Baldwin and Jackson, are also represented as well as George County, Mississippi. For the purpose of community comparisons in this study, Mobile Infirmary Medical Center's community will be defined as Mobile County, Alabama.

Mobile County is located on the Alabama Gulf Coast and is bordered by Mississippi to the west and Florida to the east. It includes Dauphin Island, Gaillard Island and Mon Louis Island. The City of Mobile is the dominant urban area. Economic growth, mild climate, and coastal appeal entice residents to live in this community. The region offers an abundance of cultural and recreational opportunities, a variety of museums, theatre, symphony, ballet, opera, fishing, golf and beach activities. Mobile is also home to the oldest Mardi Gras celebration in the United States with annual Mystic Society celebrations and public parades.

The land area of the county is 1,233.09 (75%) square miles with 410.93 (25%) square miles of water. (Graph 2)

Illustration 1. Mobile Infirmary Medical Center's Service Area
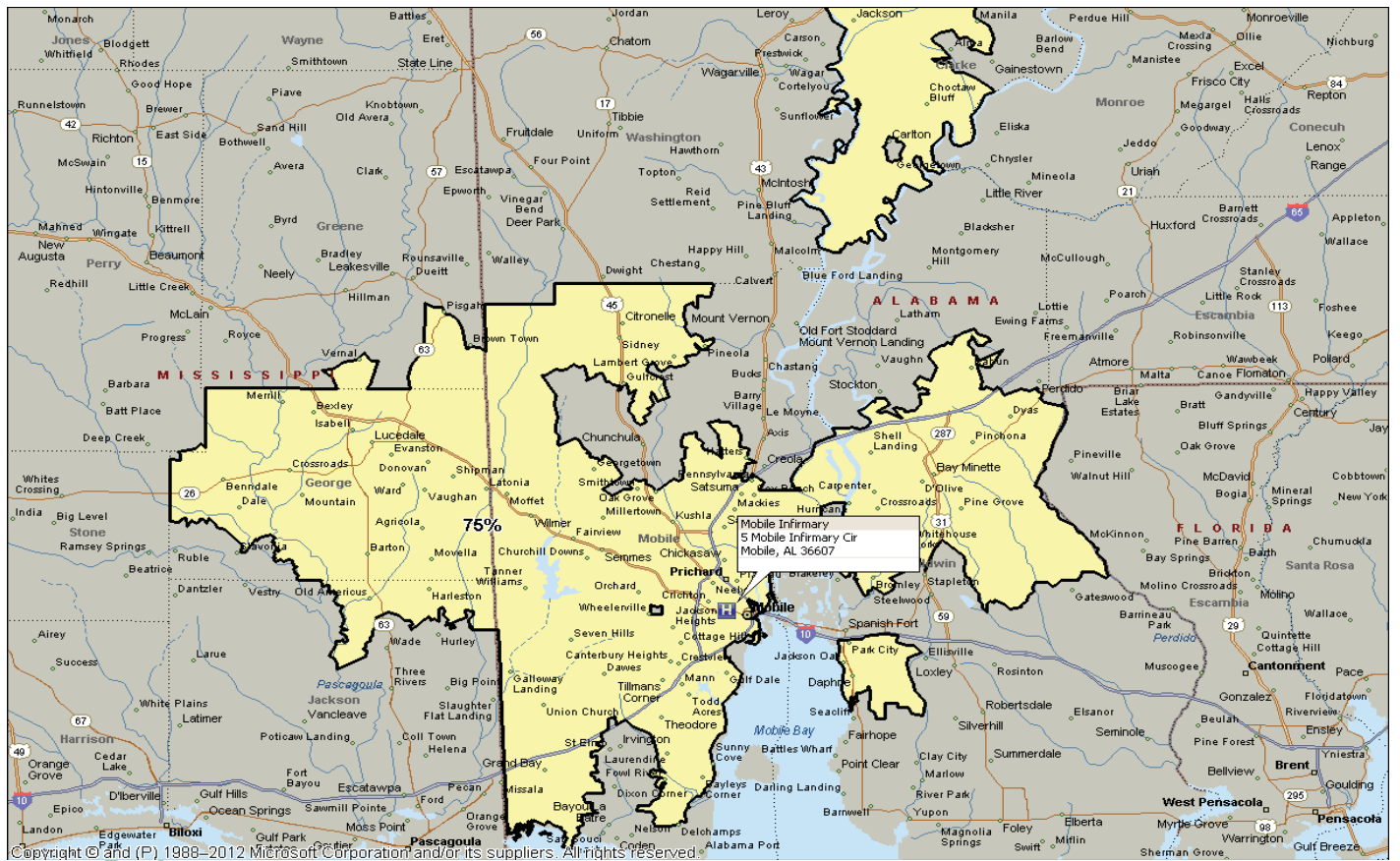
Population

The 2011 population for Mobile County is estimated to be 412,577. (Graph 1) The county experienced a slight population percentage change of - 01% during the previous year. The county shows a slightly higher percentage of women as opposed to men; this is consistent with state and national data. The percentage of persons 65 years and older is 13.2%, slightly lower than the state's 14.0%. (Graph 5) The dominant language is English, with 4.8% speaking another language in the home. There are 35,538 veterans in the community. Although Mobile County residents are well served by an abundance of hospitals in the area, it is currently designated as a Medically Underserved Area/Population (MUA/P) This designation is made by the Department of Health and Human Services based on an index of four variables; the ratio of primary care physicians per 1,000 residents, the infant mortality rate %, population living below the poverty line %, population over the age of 65. Mobile County is also considered a Health Professional Shortage Area (HRSA) for low-income residents in areas of primary care, dental care and mental health care.

Medically Underserved Area/Population

	Mobile	Alabama	United States
Infant Mortality	7.9%	7.5%	6.7%
Below Poverty Level	19.2%	19%	15.9%
Age 65 and Over	13.2%	14%	13.3%

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Race/Ethnicity

The population of Mobile County is 60.8% white, 34.9% black, and 2.9% other with 1.4% reporting two or more races. (Graph 6) The U.S. Census Bureau considers Hispanic/Latino heritage as an ethnicity versus a race. Persons claiming Hispanic/Latino heritage are included in the self-designated race categories previously defined. The Hispanic/Latino population of Mobile County is less than the state average of 4.0%. Persons of Asian heritage comprise 1.9% of the population and (Graph 7) American Indians are less than 1% of the population. There is a federally recognized tribe of Choctaw Indians occupying 300 aces near Mt. Vernon.

Education

In most areas of Mobile County the schools are operated by the Mobile County Public School System. The cities of Chickasaw, Saraland and Satsuma have separate school systems. The Public School System has an enrollment of over 65,000 students, and approximately 8,500 employees. There are 72 different languages spoken within the 150 public schools. Mobile County has four of the state's high-performing, high-poverty schools, known as Torchbearers. The State of Alabama operates the Alabama School of Mathematics and Science in Mobile, which boards advanced Alabama high school students. Mobile also has a large number of private schools, the majority being parochial in nature. Private schools include 8 catholic, 6 Protestant and 1 non-religious affiliated preparatory school. Of the county's residents, 13.9% are considered illiterate, 82.9% are high school graduates and 20.1% hold a Bachelor's degree or higher. (Graph 8 and Graph 9) Post secondary educational opportunities include Bishop State Community College. Academic colleges and universities in Mobile include University of South Alabama, Spring Hill College, and the University of Mobile. The University of South Alabama is one of only two medical schools in Alabama, graduating 75 students per year.

Employment

In Mobile County, the per capita Income is $22,306, median family income $42,187, and the percentage of residents living below the poverty level is 19.2%. (Graph 10 and Graph 11) The unemployment rate for Mobile County is 7.2%, while the State of Alabama average is 7.1% and the national average is 7.8%. Overall, the county is doing well on many economic indicators. In Mobile County, aerospace, retail services, construction, healthcare and manufacturing are the major industries. The Mobile Chamber of Commerce lists the region's largest employers as:

1. Mobile County Public School System (7,350)
2. University of South Alabama (USA) and USA Health Systems (5,500)
3. Infirmary Health Systems (5,200)
4. Austal USA (3,000)
5. Wal-Mart (2.900)
6. City of Mobile (2,200)

Food stamps and Supplement Nutrition Assistance Program (SNAP) benefits are used by 19% of the residents of Mobile County. Of low-income residents, 42.4% use SNAP.

Roads and Transportation

Roads in Mobile County provide residents and companies transportation access to major cities across the United States. Two major interstates converge in Mobile, I-10 and I-65.

Public transportation is limited in Mobile County. The Wave Transit is based in downtown Mobile and is the only public transportation system for the county. Bus service runs regularly from the transportation center to multiple points in Mobile and several surrounding communities. Smaller buses connect with three cities in Baldwin County: Daphne, Fairhope and Spanish Fort. The downtown electric trolley service is only available for accommodations and attractions. Greyhound provides intercity bus transportation to cities across the United States.

Mobile Regional Airport provides commercial airline service, as well as charter service. Airlines serving the airport include Delta, Northwest Airlink, U.S. Airways, American Eagle, American Airlines and Continental Express. The Regional Airport is currently undergoing improvements by expanding its air terminal ramp and plans to construct an 8,500 foot parallel runway.

The Mobile area is served by six Railroads, five of which are Class-I railroads. This capacity provides companies with excellent freight service at competitive prices.

The Alabama State Port Authority owns and operates the public terminals at the Port of Mobile. The public terminals handle containerized, break-bulk, coal, grain, Ro/Ro, cement and oversized/heavy lift cargoes. With nearly 6 million square feet of covered and open storage space, this full services seaport is currently ranked 10th largest in the nation in total trade. The deepwater terminals offer direct access to BNSF/Alabama & Gulf Railroad. The Port also includes services for off-shore natural gas and ship repair/building. As of November 2011, there is no longer cruise liner service in the Port. Although this departure brought a loss of jobs and revenue, the Port Authority saw record revenues in fiscal year 2012 due to increases of steel, container and coal volumes.

Weather

The Gulf of Mexico, Mobile Bay and Mobile River, add to Mobile county's prosperity, but also add vulnerability to tropical systems. The Mobile Coast is affected by a tropical system on average every 2.4 years. The last two major storms impacting the area were Hurricane Isaac in 2012 and Hurricane Ida in 2009. Although neither storm directly affected Mobile, large force winds and flooding extended into the area causing damage. Small coastal fishing communities such as Coden and Bayou La Batre were greatly impacted by these tropical systems.

Deepwater Horizon Oil Spill

The British Petroleum (BP) Deepwater Horizon Oil Spill of April 2010 is the largest accidental marine oil spill in petroleum history and damage to the Gulf's fishing and tourism industry persists today. The ecological effects of the oil spill are still not completely known. Dauphin Island and Mobile Bay's microbial

population was significantly altered by the spill, the affect of which may have lasting economical and ecological impact. Private lawsuits and civil and criminal prosecutions continue to be in process. In response to the B/P oil spill, the EPA has monitored air, water, sediment and waste generated by the clean-up operation. Periodic updates are available at www.Restore The Gulf.gov.

Air/Water Quality

Air quality in Mobile, AL is 33 on a scale to 100 (higher is better). This is based on ozone alert days and the number of pollutants in the air as reported by the EPA. Water quality in Mobile is 61, which is better than the National average of 55. The EPA has a complex method of measuring watershed quality using 15 indicators. Superfund index is 20 on a scale to 100 (higher is better). This index is based upon the number and impact of EPA Superfund pollution sites in the county, including spending on the cleanup efforts.

Health Care

Mobile County is a regional center for medical care, research and education. Nearly 10 percent of Mobile's workforce is employed in the healthcare sector. There are more than 850 physicians and 175 dentists practicing in the area, many affiliated with one or more of the nine hospitals and the 2,800 hospital beds serving the Mobile Bay region. In addition, there are many outpatient surgical centers, emergency clinics, home healthcare services, assisted living facilities and nursing homes. The five major medical centers within a 10 miles radius of Mobile Infirmary Medical Center are:

- Springhill Medical Center
- University of South Alabama Medical Center and Children & Women Hospital
- Alta Point Health System (Mental Health)
- Mitchell Cancer Institute
- Providence Hospital

Mobile Infirmary Medical Center is located at 5 Mobile Infirmary Circle, Mobile, AL 36607. On Oct. 21, 1910, the original Mobile Infirmary opened at Ann Street on the north side of Springhill Avenue. The facility had 32 beds, an operating room and a laboratory. Financially supported in part by the volunteer work of a small group of dedicated women, the first hospital served Mobile for 42 years. In 1952, a 285-bed hospital opened on the 80-acre site of the old Oak Hill Golf Course. Eight years later a school of nursing was built directly across from the hospital. Today, the 689-bed Mobile Infirmary serves as the cornerstone of Infirmary Health. With more than 2500 employees and some 700 physicians on staff, it is the largest, not-for-profit hospital in Alabama.

Mobile Infirmary Inpatient Services
- 689 hospital beds
    - 50 beds J.L. Bedsole/Rotary Rehabilitation Hospital
- 70 Critical Care Beds including:
    - Cardiac ICU
    - Medical ICU
    - Neurological ICU Surgical ICU
    - Surgical ICU
    - Pediatric ICU
    - Geriatric/Psychiatric ICU
- Bariatric Center of Excellence
- Birthing Center
    - Labor & Delivery
    - Birthing Suites
    - Special Care Nursery
- Dedicated Pediatric Unit
    - Pediatric ICU
- Psychiatric Unit
    - Acute Psychiatric Care
    - Geriatric Psychiatric ICU
- Inpatient Surgery
    - 24,000 surgeries annually
    - Two da Vinci Surgical Robots

Mobile Infirmary Outpatient Services
- 24-hour Emergency Department (43,000 visits per year)
- I-65 Out Patient and Diagnostic Services
- Surgery
    - 7 Operating Rooms
    - 3 Pain Management Rooms
    - 1 Laser Room
    - Reproductive –In Vitro Fertilization Lab
- Heart and vascular diagnostic and interventional procedures lab
- Bounce Back - cardiac rehabilitation program
- CT Scanning, certified mammography, ultra sound and nuclear medicine
- Open MRI Scanning and PET/CT
- The Breast Center, offering screening mammography and diagnostic evaluations
- Childbirth and breast feeding classes
- Pro Health Fitness and Rehabilitation Center, including cardiopulmonary rehabilitation
- Diabetes Education and Resource Center
- Gastroenterology Laboratory
- Outpatient cancer services
- Neuroendocrine Tumor services
- Nutritional counseling
- Pain management services

- Sleep evaluation services
- Wound Care and Hyperbaric Medicine
- Seniors Best Program
- Women's Best Program
- "Best" Healthy Senior Living Publication
- DeBakey Drug Education Vehicle
- Hospital Web-site
  - o Health Library   o Interactives   o E-Newsletter

Additional Mobile Community Area Health Care Resources include:
- Alabama Department of Public Health Tobacco Quit Line
- AltaPointe Health System
- Emma's Harvest Home Addiction Facility
- Federally Qualified Health Centers
  - o Franklin Primary Health Centers
    - Aiello/Buskey Medical Center
    - Central Plaza Towers Health Center
    - Franklin Medical and Dental Express
    - Franklin Primary Healthcare
    - H. E. Savage Health Care for the Homeless
    - Hadley Medical Center
    - Hadley Vision Center
    - J.R. Thomas Wellness, Fitness and Rehabilitation Center
    - Maysville Medical Center
    - Prevention and Education Community Health Care Center
    - Prichard Medical Center
    - Springhill Health Center
    - West Mobile Family Medical Center
    - Women and Children's Center
  - o Bayou La Batre Area Health Development Board, Inc.
    - BayouClinic, Inc
    - Mostellar Medical Center
    - Mostellar Dental Center
  - o Mobile County Health Department
    - Citronelle Clinic
    - Eight Mile Clinic
    - Family Oriented Primary Health Care Clinic
    - Mobile Co. Training School Clinic
    - Mobile Medical Van
    - North Mobile Health Center
    - Semmes Clinic (La Clinica de Semmes)
    - Southwest Mobile Health Center
    - University of South Alabama Women's & Child Health Center
    - Women and Children's Health Center

- Home of Grace Addiction Facility
- Mercy Medical (PACE, Hospice, Asst Living)
- Mobile Alabama Area Home Health Agencies
- Mobile Alabama Area Nursing Homes
- Mobile Health Department Main, Bayou Street
- Ozanam Charitable Pharmacy
- Prevention and Education Center
- Providence Hospital
- Providence Hospital Outreach Services, Bayou La Batre
- Serenity Care Addiction Facility
- South Alabama Cares HIV/AIDS
- Springhill Medical Center
- Tillman's Corner Clinic
- University of South Alabama Medical Center
- University of South Alabama Women & Children's
- VA Coast Veterans Outpatient Healthcare
- Via Mobile Senior Citizens Services
- Victory Health Partners

Patient data for Mobile Infirmary Medical Center for FY 2012 is detailed below and includes principal discharge diagnoses , payor source, inpatient demographics, and discharge disposition.

Inpatient 2010-2012		
Principal Diagnosis	Cases	%
REHABILITATION PROCEDURE	1,420	2.51%
CORNARY ATHEROSCLEROSIS-NATIVE VESSEL	1,340	2.37%
PNEUMONIA	1,287	2.27%
SEPTICEMIA	1,142	2.02%
CHEST PAIN NEC	982	1.74%
URINARY TRACT INFECTION NOS	862	1.52%
OBSTRUCTED CHRONICH BRONCHITIS WITH EXACCERBATION	851	1.50%
OSTEOARTHROS NOS-L/LEG	733	1.30%
CEREBRAL ARTERY OCCLUSSION WITH INFARCT	676	1.19%
ATRIAL FIBRILLATION	607	1.07%
Top 10 Total	9,900	17.50%
Grand Total	5,6582	100.00%

Outpatient 2010-2012		
Principal Diagnosis	Cases	%
MAMMOGRAM SCREEN	27,496	8.26%
SCREEN MALIGNANT NEO-PLASM-CERVIX	22,451	6.75%
ABDOMINAL PAIN-SITE NOS	7,337	2.21%
BREAST DISORDER NOS	6,004	1.80%
URINARY TRACT INFEC-TION NOS	5,401	1.62%
ABNORMAL GLAN PAPS-MEAR-CERVIX	4,513	1.36%
SCREEN MALIGNANT NEO-COLON	4,372	1.31%
LUMBOSACRAL NEURITIS NOS	3,539	1.06%
OBSTRUCTIVE SLEEP AP-NEA	3,315	1.00%
SYMPTOMATIC MENO-PAUSAL STATE	3,208	0.96%
Top 10 Total	87,636	26.34%
Grand Total	332,708	100.00%

Inpatient Payor Source 2010-2012		
	Cases	%
MEDICARE	19,487	34.44%
BLUE CROSS	11,178	19.76%
MEDICAID	6,353	11.23%
SELF PAY	4,835	8.55%
SENIORS FIRST	2,994	5.29%
MEDICARE COM-PLETE	2,798	4.95%
BC ADVANTAGE	1,438	2.54%
OTHER MEDICARE ADVANTAGE	1,239	2.19%
OTHER	56,582	11.06%

Outpatient Payor Source 2010-2012		
	Cases	%
BLUE CROSS	148,902	44.75%
MEDICARE OUTPA-TIENTS	73,392	22.06%
MEDICAID	17,866	5.37%
SELF PAY	15,291	4.60%
SENIORS FIRST	15,130	4.55%
MEDICARE COM-PLETE	12,518	3.76%
UNITED HEALTH CARE	9,350	2.81%
BC ADVANTAGE	7,490	2.25%
OTHER	32,772	9.85%

Inpatient Race Distribution 2010-2012	
	%
WHITE	59.38%
BLACK	39.90%
ASIAN	0.28%
HISPANIC	0.25%
INDIAN	0.19%

Outpatient Race Distribution 2010-2012	
	%
WHITE	68.75%
BLACK	30.47%
ASIAN	0.32%
HISPANIC	0.27%
INDIAN	0.12%
UNKNOWN	0.06%

Inpatient Age Distribution 2010-2012	
	%
0-9 years	2.27%
10-19 years	1.55%
20-29 years	7.30%
30-39 years	9.23%
40-49 years	11.50%
50-59 years	17.42%
60-69 years	19.59%
70-79 years	16.53%
80+ years	14.61%

Outpatient Age Distribution 2010-2012	
	%
0-9 years	2.30%
10-19 years	3.38%
20-29 years	9.12%
30-39 years	11.06%
40-49 years	15.43%
50-59 years	20.70%
60-69 years	19.42%
70-79 years	12.31%
80+ years	6.29%

Inpatient Discharge Disposition 2010-2012		
	Cases	%
DISCHARGED HOME	36,114	63.83%
HOME W/HOME HEALTH SERVICES	9,471	16.74%
NURSING HOME-SKILLED	4,090	7.23%
EXPIRED	1,408	2.49%
NURSING HOME - (ICF)	998	1.76%
HOSPICE-HOME CARE	907	1.60%
INPATIENT REHAB FACILITY	893	1.58%
PSYCHIATRIC HOSPITAL	645	1.14%
OTHER	2,056	3.63%

Outpatient Discharge Disposition 2010-2012		
	Cases	%
DISCHARGED HOME	327,645	98.48%
LEFT AGAINST MEDICAL ADVICE	2,298	0.69%
HOME W/HOME HEALTH SERVICES	1,146	0.34%
NURSING HOME-SKILLED	471	0.14%
OTHER	1,151	0.35%

Community Resource List

15 Place
Alcoholics Anonymous
Area Agency on Aging
  • South Alabama Region
Alabama Department of Rehabilitation Services
  • Business Relations/Employment
  • Independent Living/Home Bound Services
  • Vocational Rehabilitation Services
    o Blind
    o Deaf
Bay Area Food Bank
Catholic Social Services
Community Action, INC
  • Bayou La Batre Center
  • Hillside Center
  • Mobile-Main
Department of Human Resources
  • Child Support & Enforcement
  • Family Financial Aid
  • Food Assistance
  • Senior Citizens Abuse & Neglect
Dumas Wesley Community Center
Education Foundation
Family Promise of Coastal Alabama
Goodwill Easter Seals

Gulf Coast Business Support Center
Habitat for Humanity
Hands on South Alabama
Homeless Coalition Housing First
Impact Alabama
Legal Services of Alabama
Life Lines of Mobile/Baldwin Counties
Lighthouse Academy of Excellence
Mobile Housing Authority
Mobile Training School Clinic
Ozanam Charitable Pharmacy
Penelope House
Salvation Army of Coastal Alabama
Serenity Care Addiction Facility
South Alabama Cares HIV/AIDS
State of Alabama Unemployment Claims
Team Focus
United Methodist Inner City Mission
United Way
VA Coastal Veterans Outpatient Healthcare
VIA Health Fitness and Enrichment Center
Volunteer Lawyers Program of America
Volunteers of America Southeast
Wilmer Hall Children's Home
Women's Center
YMCA

COMPARISON COMMUNITY

Comparison Community – Charleston County, South Carolina

To compare the Mobile Infirmary Medical Center Community with a peer county, the Department of Health & Human Services 2009 Community Health Status Indicators (CHSI) report was utilized. CHSI uses population size, poverty level, age distribution, population density and other demographic data to establish comparison communities across the United States. Of the 24 counties considered to be peer counties to Mobile County, Charleston County, South Carolina was selected for this CHNA based on its similar location in the southeastern United States.

Illustration 2. Mobile County, Alabama and comparison Charleston County, SC

Mobile County, Alabama   Charleston County, South Carolina
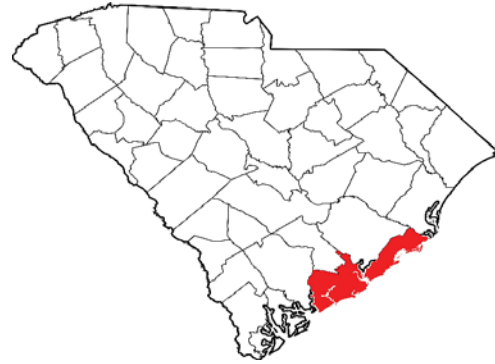
Comparison Demographics

	Mobile County, Alabama	Charleston County, SC
Population (Graph 1)	412,577	357,704
Density (per square mile) (Graph 2 and Graph 3)	336	382
Poverty Level (% below)	19.2%	16.8%
Age Distribution (Graph 4 and Graph 5)	Under 18 (24.9%) 19 to 64 (61.9%) 65 and older (13.2%)	Under 18 (20.7%) 19 to 64 (66.3%) 65 and older (13%)
Race	White (60.8%) Black (34.9%) Other (4.3%)	White (66.8%) Black (29.7%) Other (3.5%)
Hispanic or Latino Origin	2.5% (4.0% state average)	5.4%
High School Graduates	82.9%	87.9%
Bachelor's Degreee or Higher	20.1%	22%
Median Household Income	$42,187	$50,133

DATA AGGREGATION

Data from primary and secondary sources were analyzed. Secondary source data were aggregated at the smallest unit available - the county. Secondary data reports and other resources were carefully reviewed for this CHNA in order to provide points of comparison for the information and opinions gathered through the primary information collection process. Information from primary sources was obtained via electronic surveys, face-to-face surveys and phone and in-person interviews.

Behavioral Risk Factors

The Behavioral Risk Factor Surveillance System (BRFSS) is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, data are collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. It is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. For many states, the BRFSS is the only available source of timely, accurate data on health-related behaviors.

Table 1. Health Risk Factors – Cardiovascular Disease identified with BRFSS data

Table 2. Health Risk Factors – Chronic Conditions identified with BRFSS data

Chronic Conditions

- Mobile County
- Charleston County
- Alabama
- National

	Ever told you had asthma?[YES]	Ever told you have (COPD) chronic obstructive pulmonary disease, emphysema or chronic bronchitis? [YES]	Ever told you have diabetes? [YES]	Ever told you have kidney disease? [YES]
Mobile County	9.5%	10.4%	14.6%	3.2%
Charleston County	13.3%	7.9%	16.5%	4.0%
Alabama	11.5%	12.0%	11.8%	3.5%
National	12.9%	7.8%	12.4%	3.1%

Table 3. Health Risk Factors – Cancer identified with BRFSS data

Cancer

- Mobile County
- Charleston County
- Alabama
- National

	Ever told you had any other types of cancer? [YES]
Mobile County	10.2%
Charleston County	10.2%
Alabama	9.9%
National	9.4%

Table 4. Health Risk Factors – Mental Health identified with BRFSS data

Mental Health

Legend: Mobile County, Charleston County, Alabama, National

- Mobile County: 19.2%
- Charleston County: 14.0%
- Alabama: 21.2%
- National: 18.1%

Ever told you that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression? [YES]
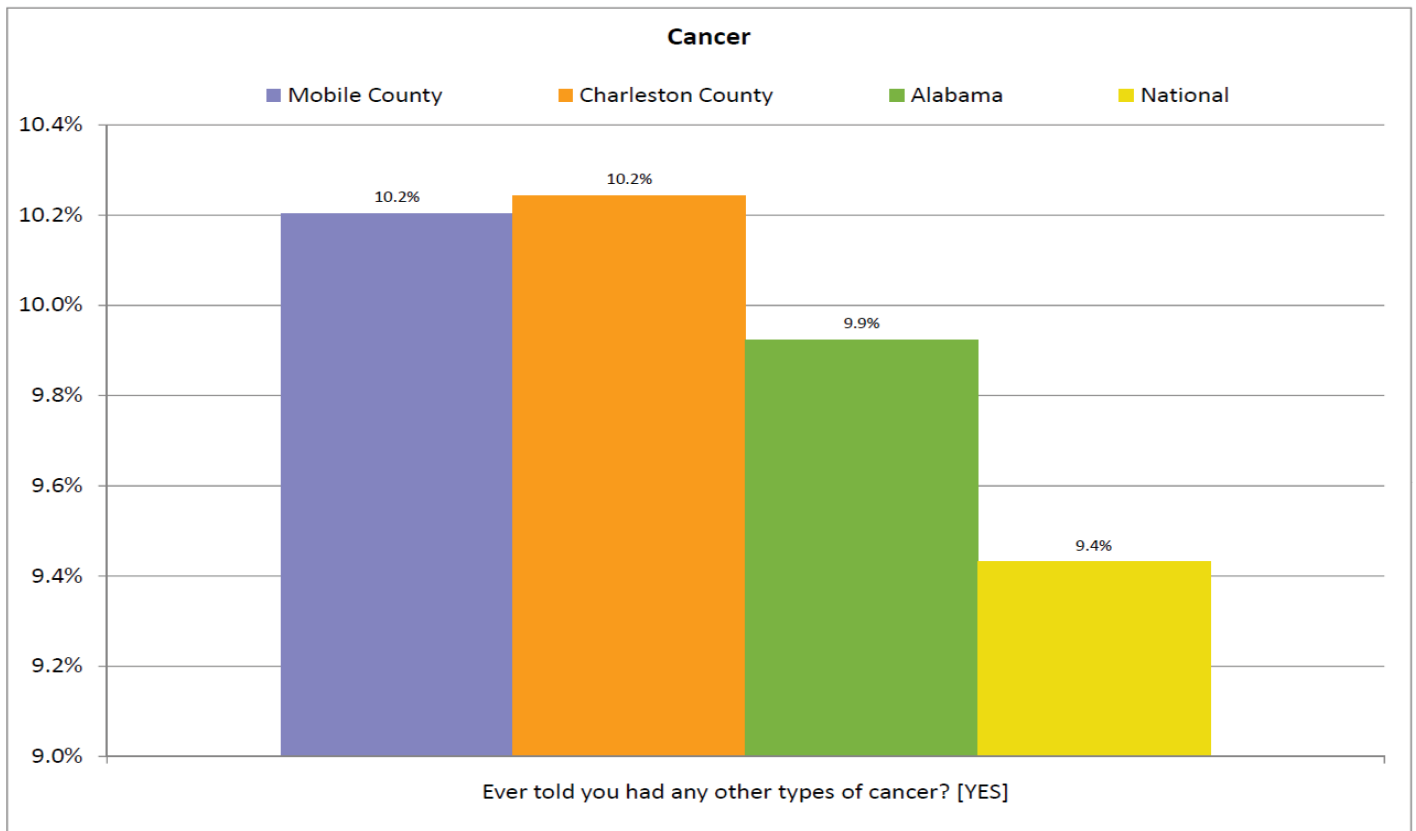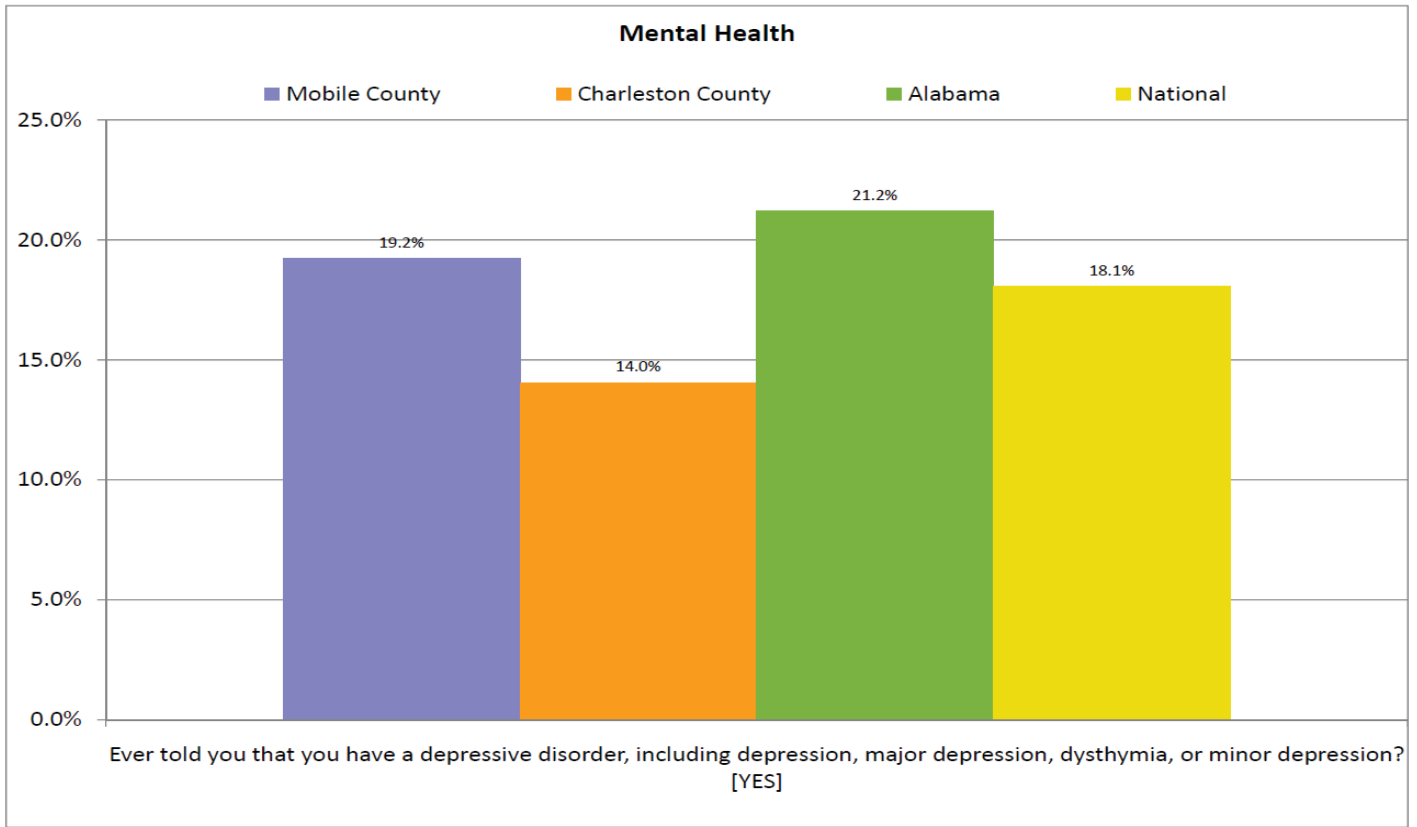
Table 5. Health Risk Factors – Behavioral issues identified with BRFSS data

Behavioral

Legend: Mobile County, Charleston County, Alabama, National

Calculated Variable: Four-level smoker status: Everyday smoker, Someday smoker, Former smoker, Non-smoker [Everyday OR Someday Smoker]
- Mobile County: 19.7%
- Charleston County: 16.7%
- Alabama: 19.4%
- National: 16.7%

Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all? [Every Day OR Some Days]
- Mobile County: 2.7%
- Charleston County: 1.4%
- Alabama: 4.6%
- National: 3.0%

Adults that report having had at least one drink of alcohol in the past 30 days? [YES]
- Mobile County: 37.4%
- Charleston County: 51.8%
- Alabama: 41.3%
- National: 47.9%

Table 6. Health Risk Factors – Obesity identified with BRFSS data

Obesity

- Mobile County
- Charleston County
- Alabama
- National

	Mobile County	Charleston County	Alabama	National
Four-categories of Body Mass Index (BMI) [Overweight OR Obese]	69.0%	62.4%	67.7%	64.1%
During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise? [YES]	65.5%	75.2%	64.8%	72.7%
Fruit intake in times per day	0.84	0.89	0.80	0.98
Vegetable intake in times per day	0.67	0.67	0.69	0.77

Table 7. Health Care Access identified with BRFSS data

Health Care Access

- Mobile County
- Charleston County
- Alabama
- National

	Mobile County	Charleston County	Alabama	National
Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service? [YES]	87.8%	84.2%	81.7%	82.1%
Do you have one person you think of as your personal doctor or health care provider? [YES]	72.6%	79.2%	73.6%	77.2%

County Health Rankings

Secondary data available on Mobile County and all counties in the nation are available at www.countyhealthranking.org. This annually updated site establishes a benchmark using Health Outcomes and Health Factors. The County Health Rankings are a key component of the Mobilizing Action Toward Community Health (MATCH) project. MATCH is the collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The rankings identify the multiple health factors that determine a county's health status. Each county receives a summary rank for its health outcomes and health factors - the four types of health factors include: health behaviors, clinical care, social and economic factors and the physical environment.

County Health Rankings Health Outcomes and Factors	Mobile County	Charleston County	Alabama	National Benchmark
Mortality				
Premature death	10,188	7,819	9,609	5,317
Health Behaviors				
Adult smoking	24%	18%	23%	13%
Adult obesity	32%	28%	33%	25%
Physical inactivity	31%	24%	31%	21%
Excessive drinking	15%	22%	12%	7%
Motor vehicle crash death rate	23	17	0.23	0.1
Sexually transmitted infections	785	716	562	92
Low birthweight	11.90%	9.70%	10.40%	6.00%
Teen birth rate	59	43	49	21
Clinical Care				
Uninsured	19%	20%	17%	11%
Primary care physicians	1,714:1	804:1	1,641:1	1,067:1
Dentists	2,246:1	1,076:1	2,488:1	1,516:1
Preventable hospital stays	72	46	80	47
Diabetic screening	83%	85%	84%	90%
Mammography screening	64%	72%	65%	73%
Social & Economic Factors				
High school graduation	64%	73%	72%	
Unemployment	10.10%	8.30%	9.00%	5.00%
Children in poverty	30%	26%	28%	14%
Children in single-parent households	44%	41%	37%	20%
Violent crime rate	612	694	427	66
Physical Environment				
Daily fine particulate matter	11.8	11.9	12.9	8.8
Access to recreational facilities	7	13	7	16
Limited access to healthy foods	11%	6%	8%	1%

Community Health Status Indicators

Community Health Status Indicators (CHSI) provides data on over 200 key health indicators for each of the 3,141 United States counties. The data are provided to assist community leaders and public health professionals as they identify, compare and address the most pressing issues for their community.

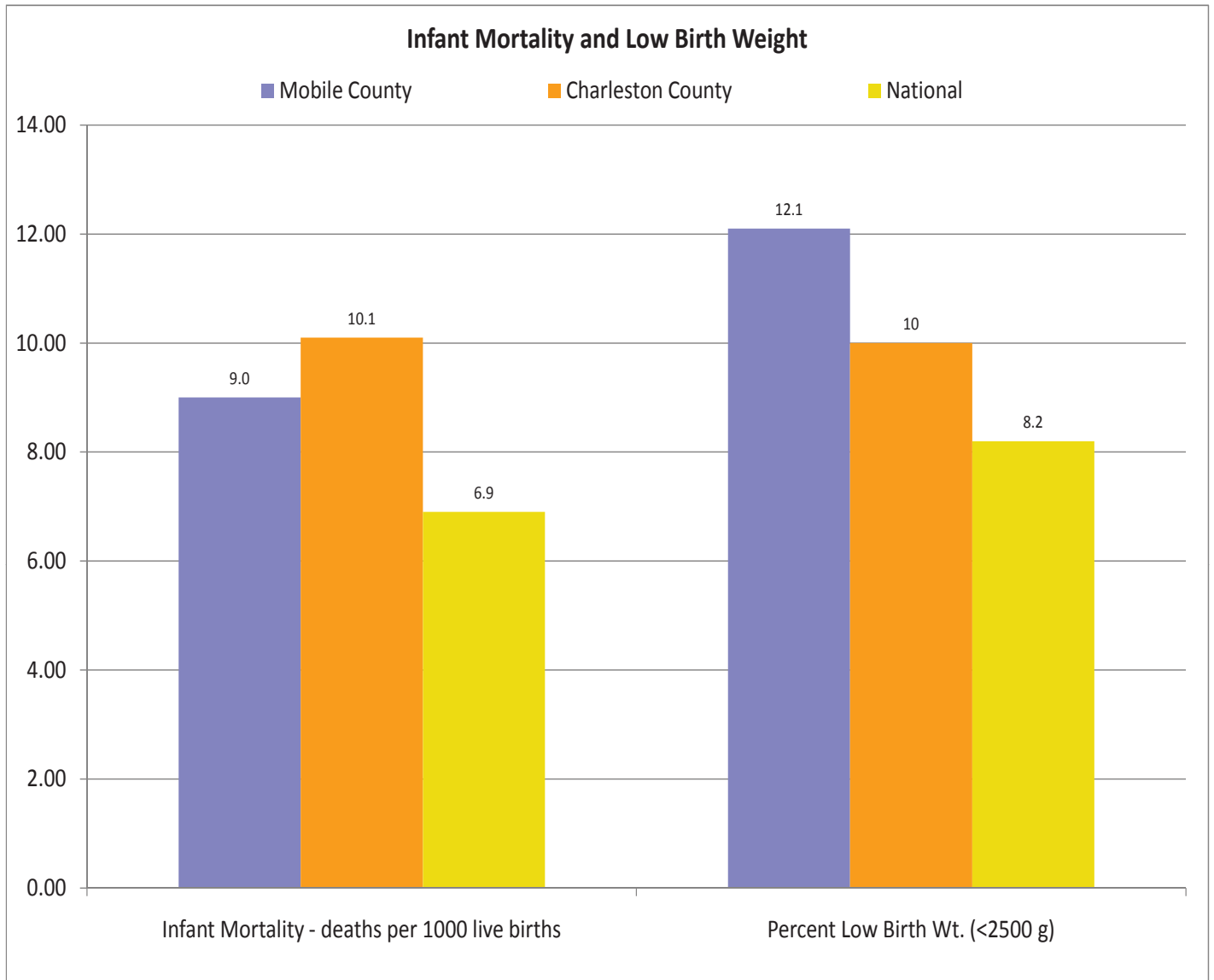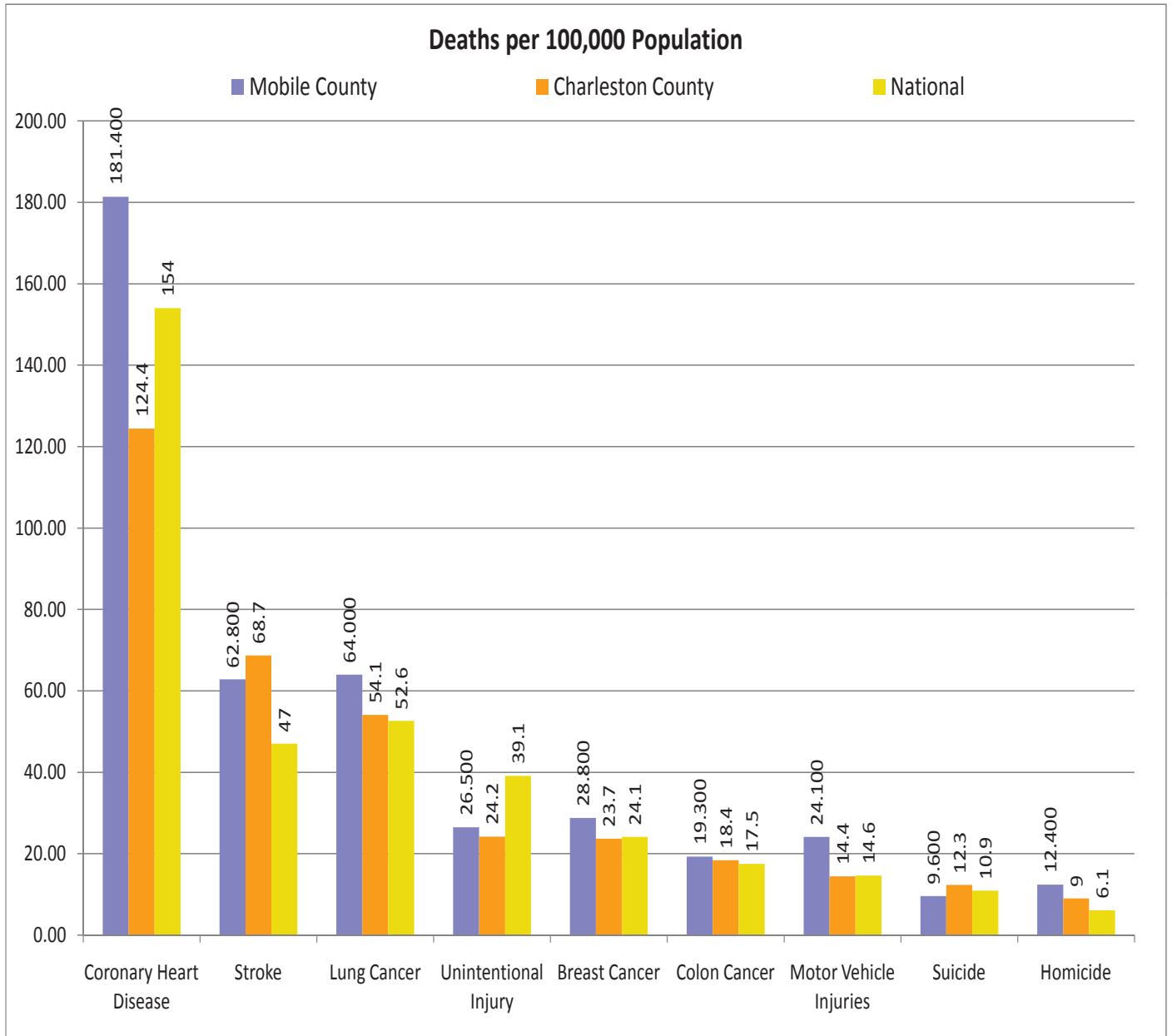**Table 9.** Infant Mortality and Low Birth Weight

Infant Mortality and Low Birth Weight

■ Mobile County　　■ Charleston County　　■ National

	Infant Mortality - deaths per 1000 live births	Percent Low Birth Wt. (<2500 g)
Mobile County	9.0	12.1
Charleston County	10.1	10
National	6.9	8.2

Table 10. Deaths per 100,000 Population

Deaths per 100,000 Population

Legend: ■ Mobile County ■ Charleston County ■ National

Category	Mobile County	Charleston County	National
Coronary Heart Disease	181.400	124.4	154
Stroke	62.800	68.7	47
Lung Cancer	64.000	54.1	52.6
Unintentional Injury	26.500	24.2	39.1
Breast Cancer	28.800	23.7	24.1
Colon Cancer	19.300	18.4	17.5
Motor Vehicle Injuries	24.100	14.4	14.6
Suicide	9.600	12.3	10.9
Homicide	12.400	9	6.1

Surveys/Interviews

To formulate a comprehensive list of the greatest health needs within the Mobile Infirmary Medical Center community, survey and interview questions were developed as previously described. Using the guidance provided in IRS Notice 2011-52 on Community Health Needs Assessments for tax-exempt hospitals, the CHNA team identified key informants. The list of key informants included health experts at the state and community levels, local civic leaders, patients and patient advocates. These key informants were queried using a variety of techniques including electronic survey, focus groups, telephone and in-person interviews. Below is a list of the survey questions and the weighted responses:

Which are the Biggest Problems for You or Your Family?	• Stress • Lack of Exercise
Biggest Health Issue/Concern in Your Community?	• Nutrition / Weight Loss • Heart Disease/ Stroke
What Does Your Community Need In Order to Improve Your Health and Others?	• Affordable Insurance • Mental Health Services • Healthier Food Options • Substance Abuse Rehabilitation
What Events/Initiatives are Most Beneficial to Your Community	• Pro Health • DeBakey Drug Van
Most Important Problems Facing Community?	• Transportation • Lack of Physicians • Overuse of Health System by Uninsured • Lack of Health Insurance • Apathy Toward Adequate Self Care
What Can Hospitals Do To Improve the Quality of Life in Your Community?	• Healthy Education/Screening • Nutritional Counseling
How Can Hospitals in Your Community Help Enrich the Community?	• Promote Walking Paths • Eliminate Sugar Drinks • Smoke Free • Educate on Available Services • Decrease Cost of Health Care

RESULTS

Summary of Findings

The CHNA Coalition Committee, consisting of representatives from hospital senior management and multiple community leaders, completed a private ballot to determine the top issues of the community. The ballot prompted each committee member to rank order a list of community concerns.

The results demonstrated the committee member's healthcare priorities, as well as the voting frequency of each item on the ballot. A Borda type methodology was used to tabulate the results. The issues considered to be of greatest need in the community were as follows:

1. Good Nutrition/Obesity Prevention
2. Diabetes Related Education and Support
3. Decrease Unemployment
4. Free Subsidized Healthcare for the Medically Indigent or Needy
5. Cardiac Health
6. Mental Health Related Education and Support

Identifying the needs of the community provides Mobile Infirmary Medical Center the opportunity and the knowledge to better align existing programs and to design future efforts to best meet the needs of their community. Mobile Infirmary Medical Center is part of a health system committed to community outreach and health care excellence.

APPENDICES

Graphs

Graph 1. U.S. Census – 2011 Population Estimate

2011 Population Estimate

	Mobile County	Charleston County
	412,577	357,704
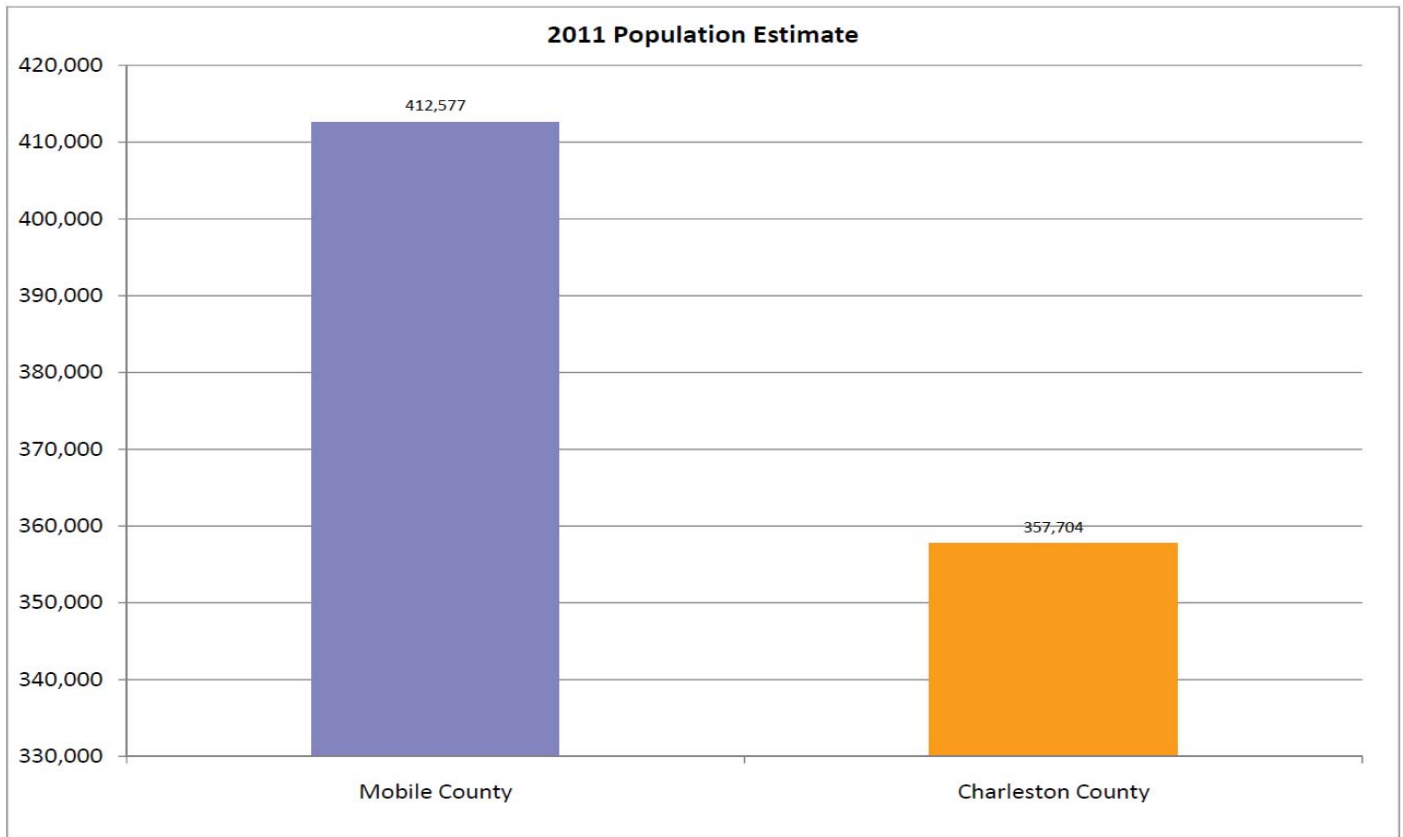
Graph 2. U. S. Census – Land Area

Land area in square miles

	Mobile County	Charleston County
	1,229	916
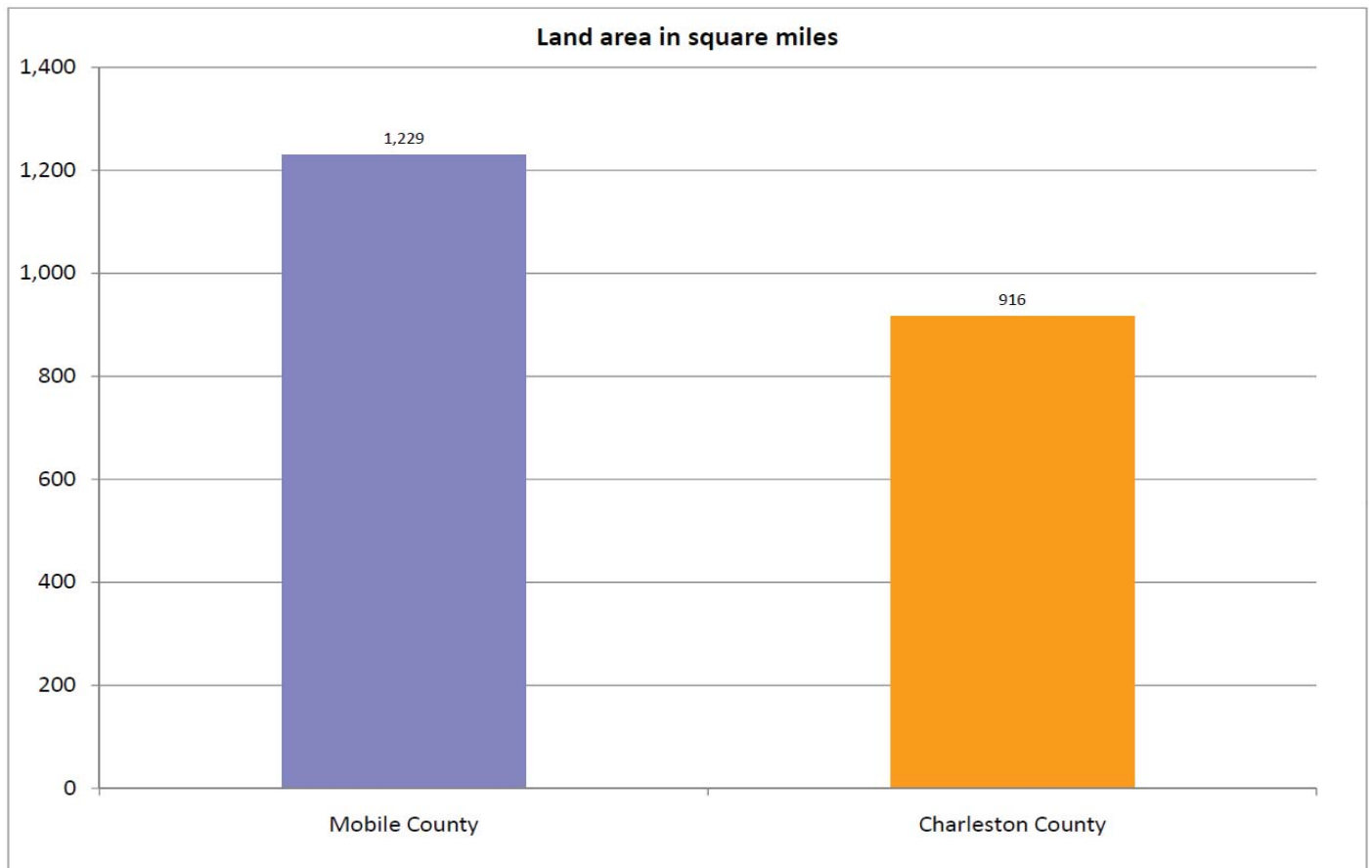
Graph 3. U. S. Census – Persons per Square Mile

Persons per square mile

	Mobile County	Charleston County
Value	336	382
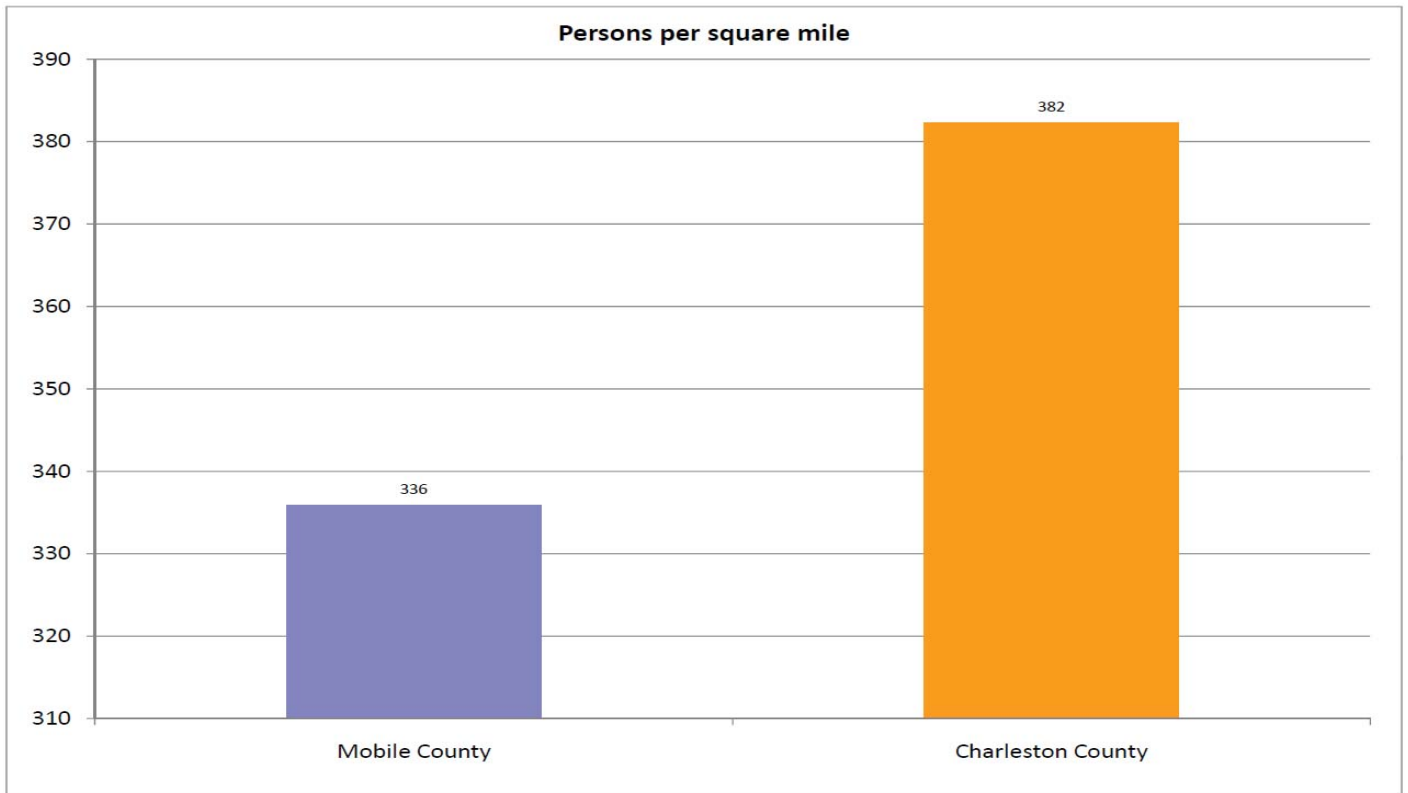
Graph 4. U. S. Census – Persons under 18 years

Persons under 18 years

	Mobile County	Charleston County	Alabama	National
Value	24.9%	20.7%	23.5%	23.7%
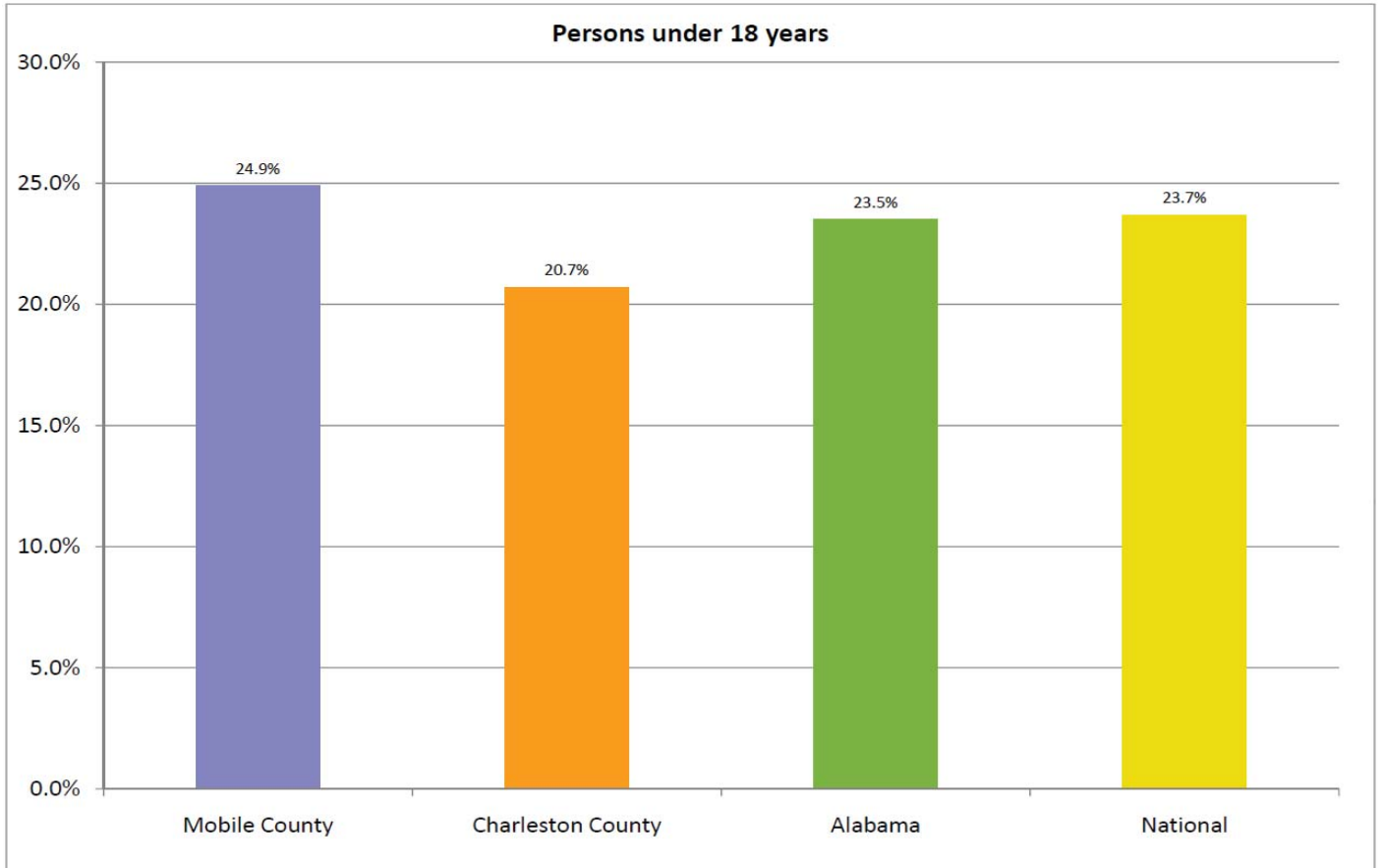
Graph 5. U. S. Census – Persons 65 years and over

Persons 65 years and over

- Mobile County: 13.2%
- Charleston County: 13.0%
- Alabama: 14.0%
- National: 13.3%

Graph 6. U. S. Census – Race

Race

	Mobile County	Charleston County	Alabama	National
White persons	60.8%	66.8%	70.1%	78.1%
Black persons	34.9%	29.7%	26.5%	13.1%
Other (American Indian / Alaska Native / Asian / Native Hawaiian / Pacific Islander)	4.3%	3.5%	3.4%	8.8%
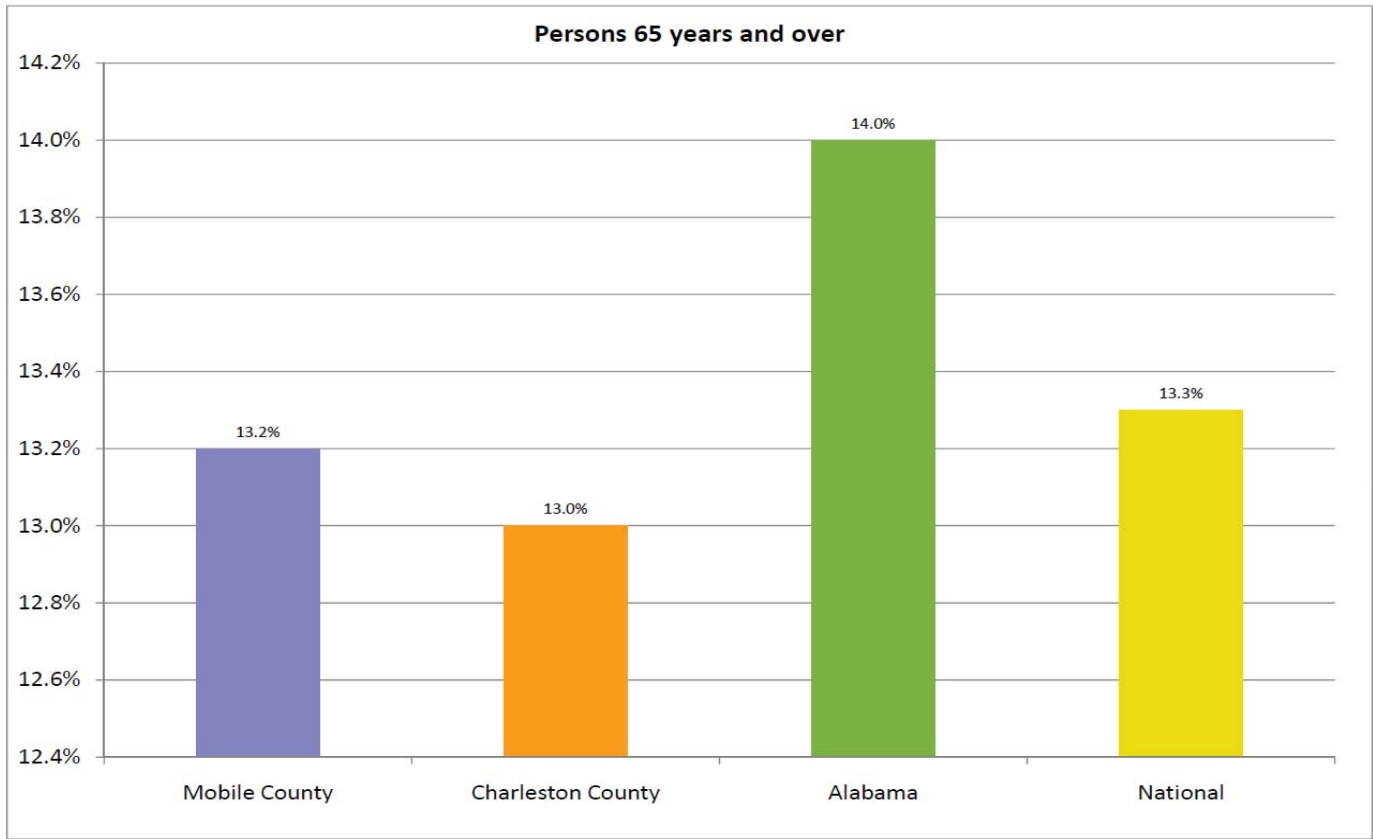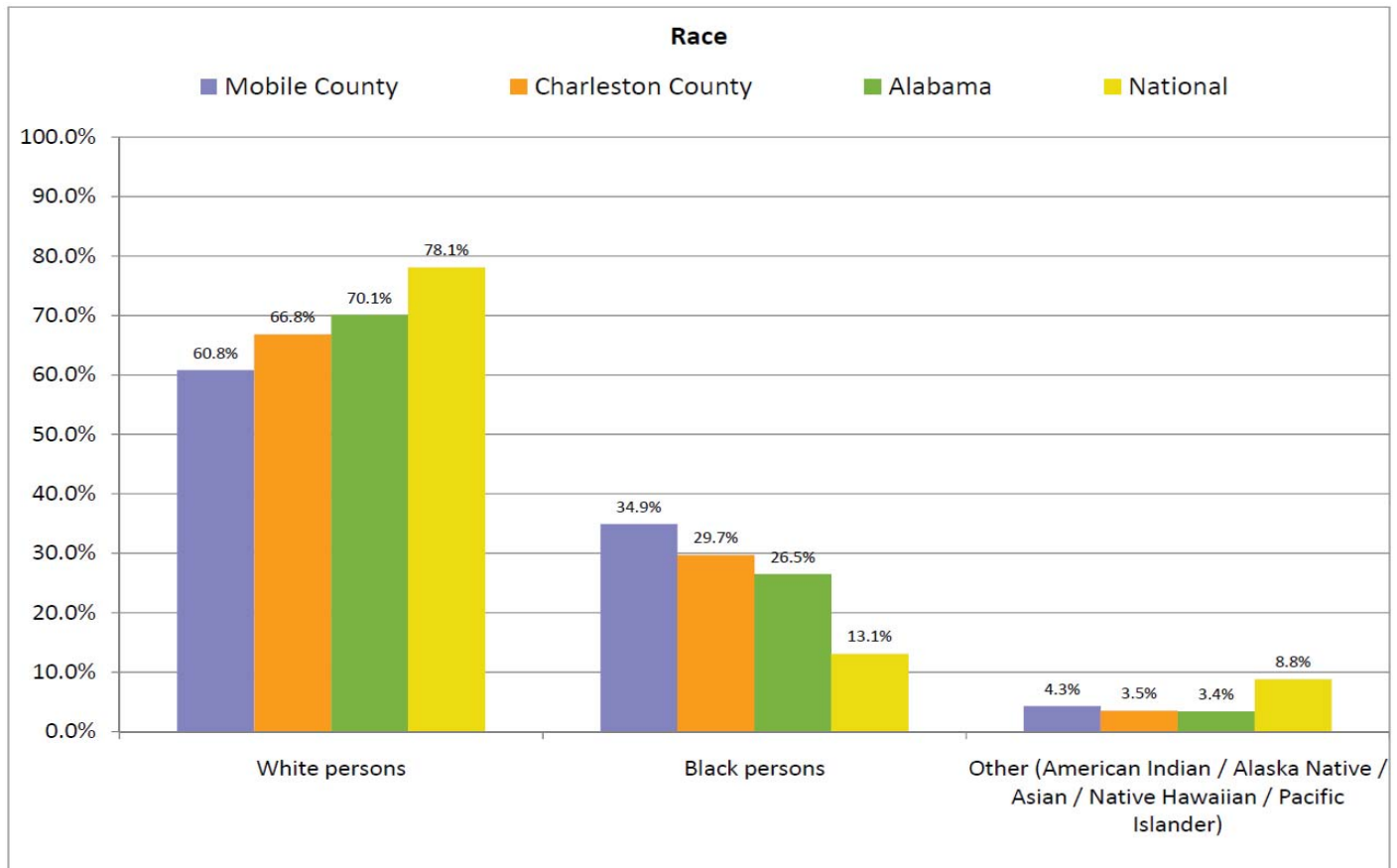
Graph 7. U. S. Census – Ethnicity

Persons of Hispanic or Latino Origin

Location	Percentage
Mobile County	2.5%
Charleston County	5.4%
Alabama	4.0%
National	16.7%
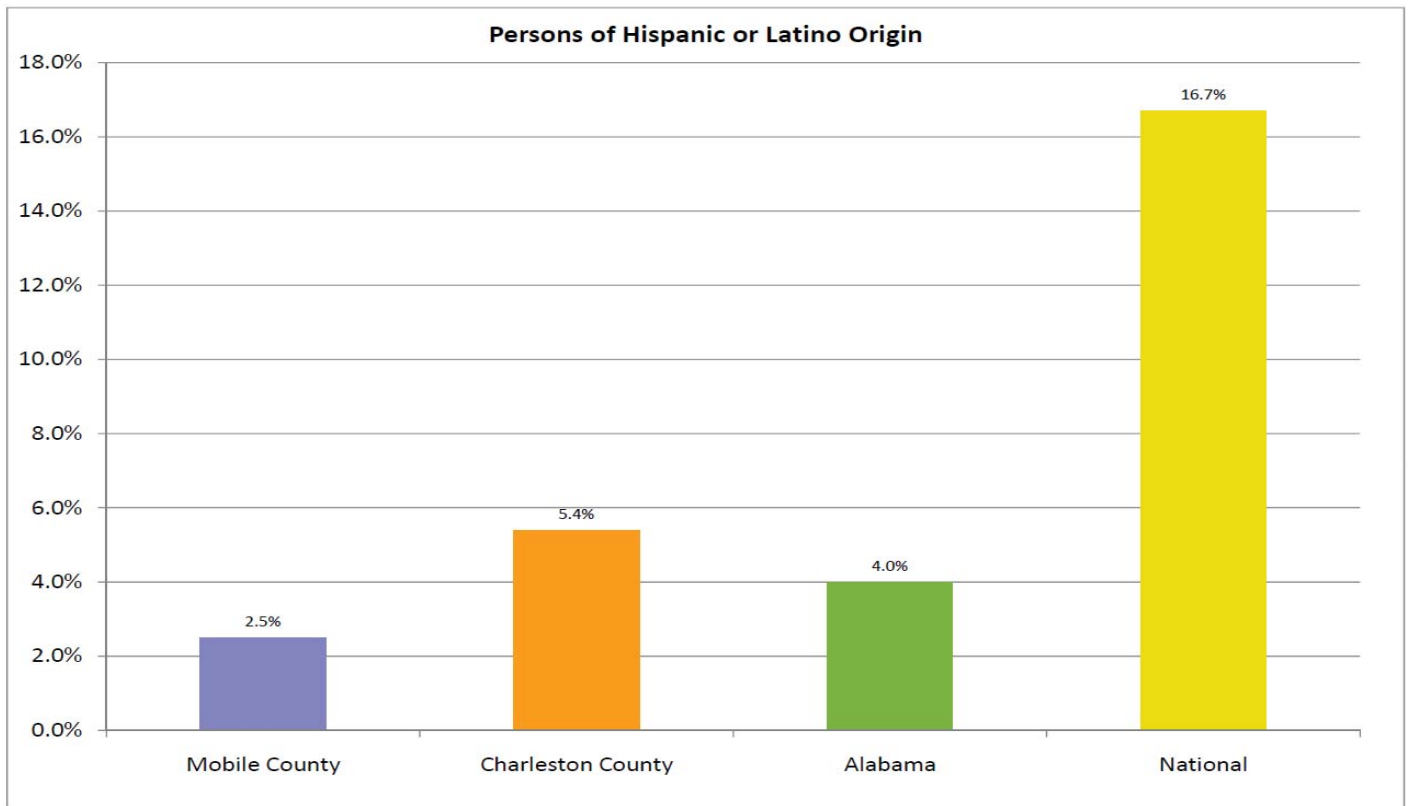
Graph 8. U. S. Census – High School Graduate or Higher

High school graduate or higher

Location	Percentage
Mobile County	82.9%
Charleston County	87.9%
Alabama	81.9%
National	85.4%
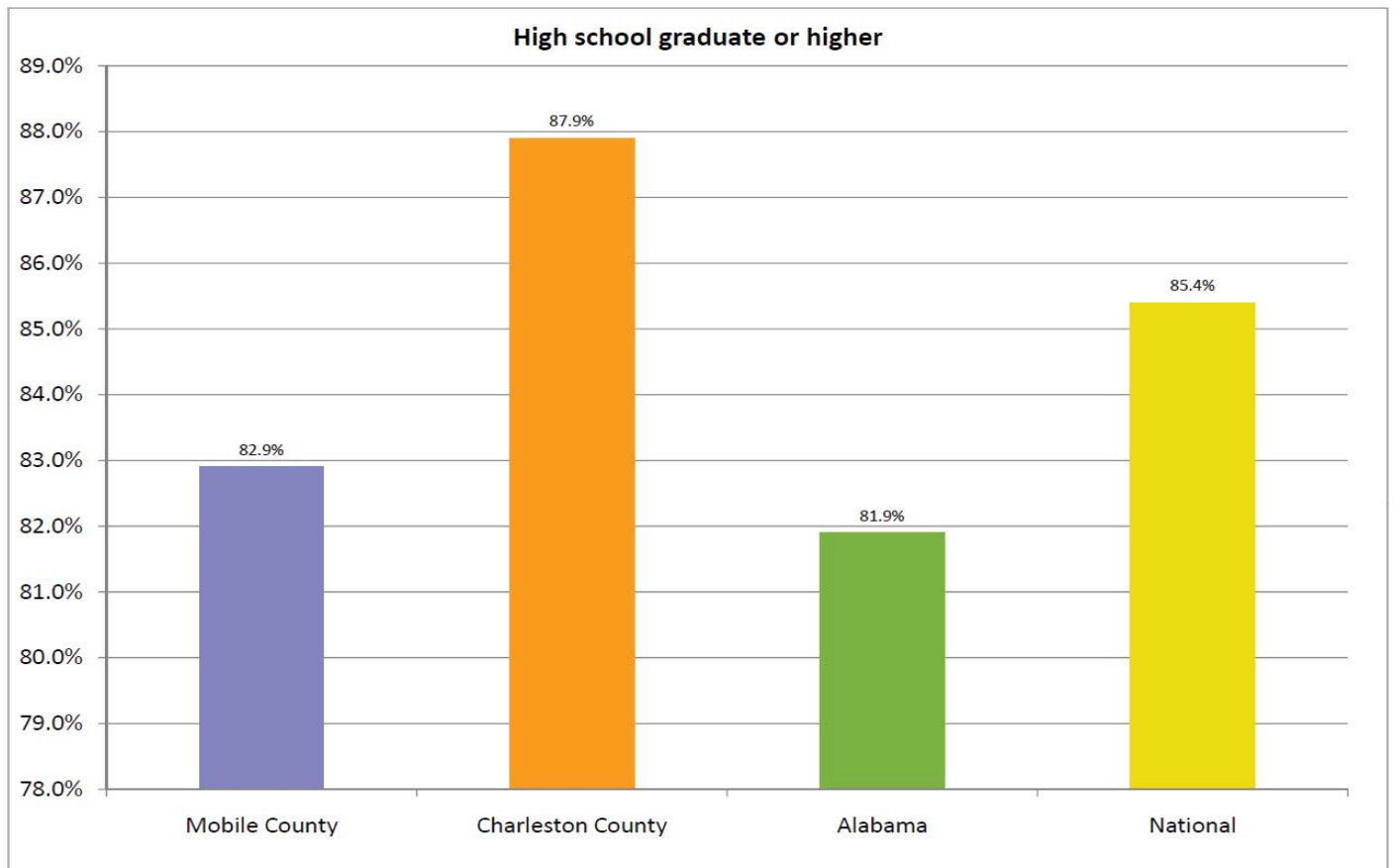
Graph 9. U. S. Census – Bachelor's degree or higher

Bachelor's degree or higher

	Mobile County	Charleston County	Alabama	National
%	20.1%	37.7%	22.0%	28.2%
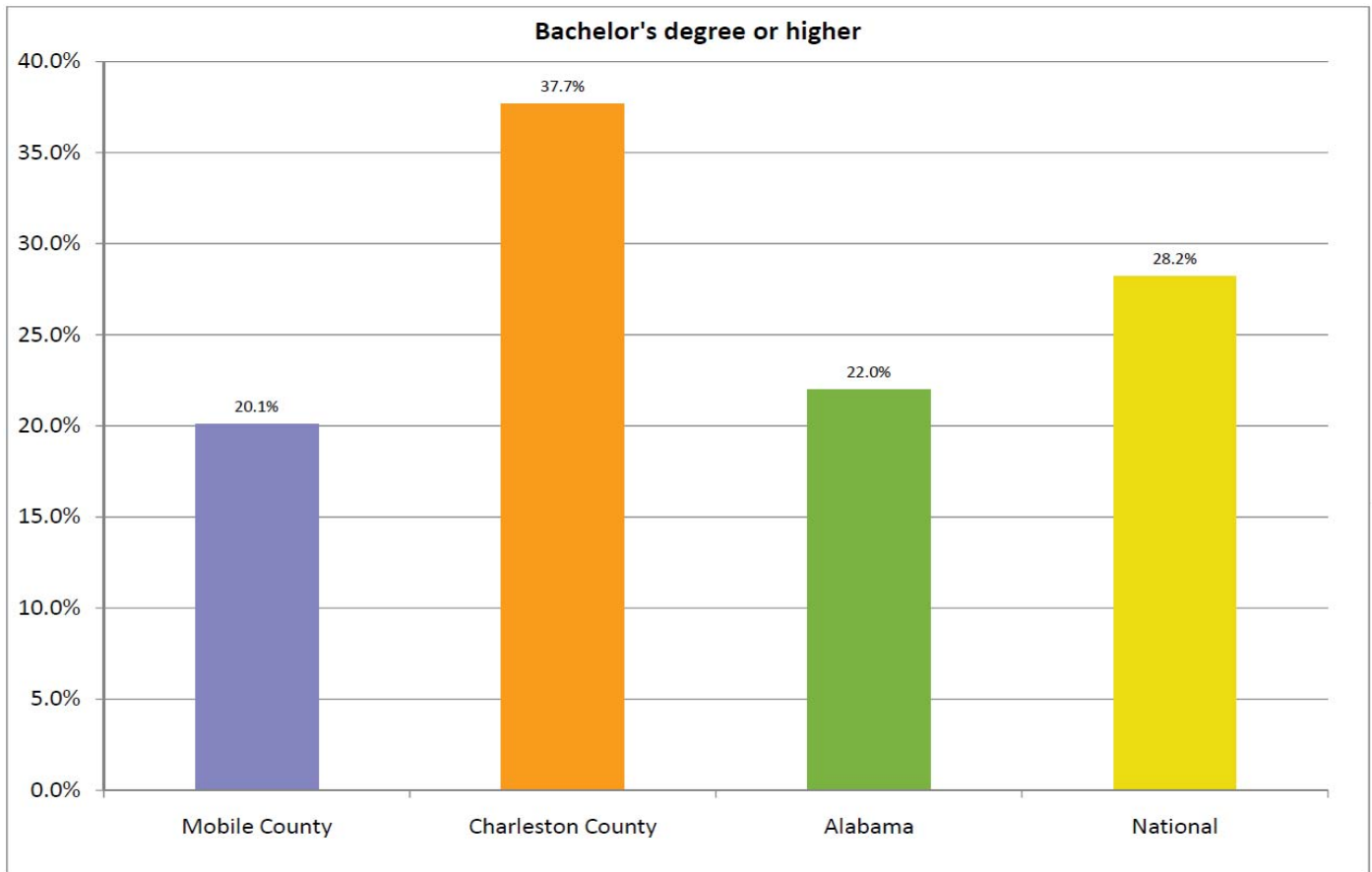
Graph 10. U. S. Census – Median household income

Median household income

	Mobile County	Charleston County	Alabama	National
$	$42,187	$50,133	$42,934	$52,762
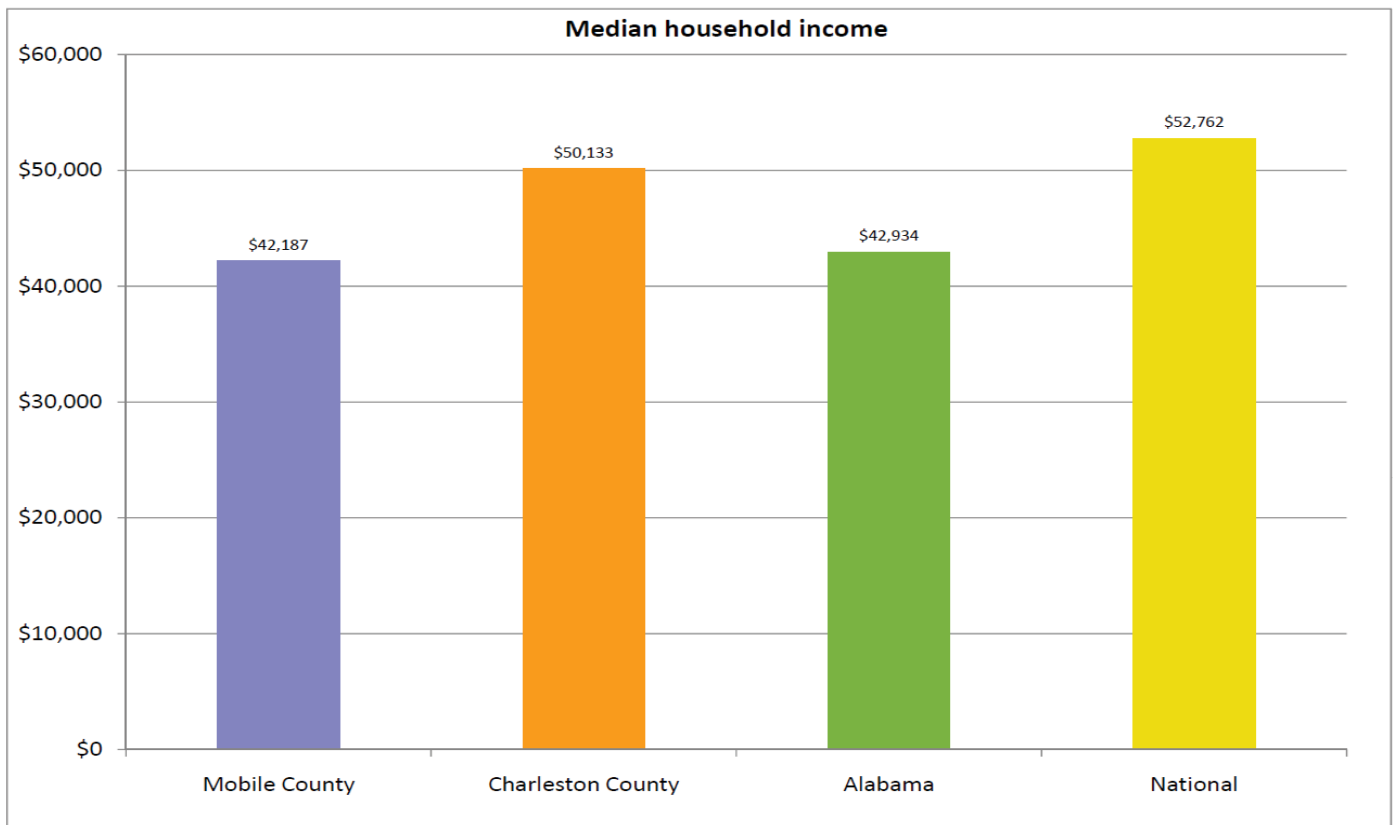
Graph 11. U. S. Census – Persons below poverty level

Persons below poverty level

Mobile County	19.2%
Charleston County	16.8%
Alabama	17.6%
National	14.3%