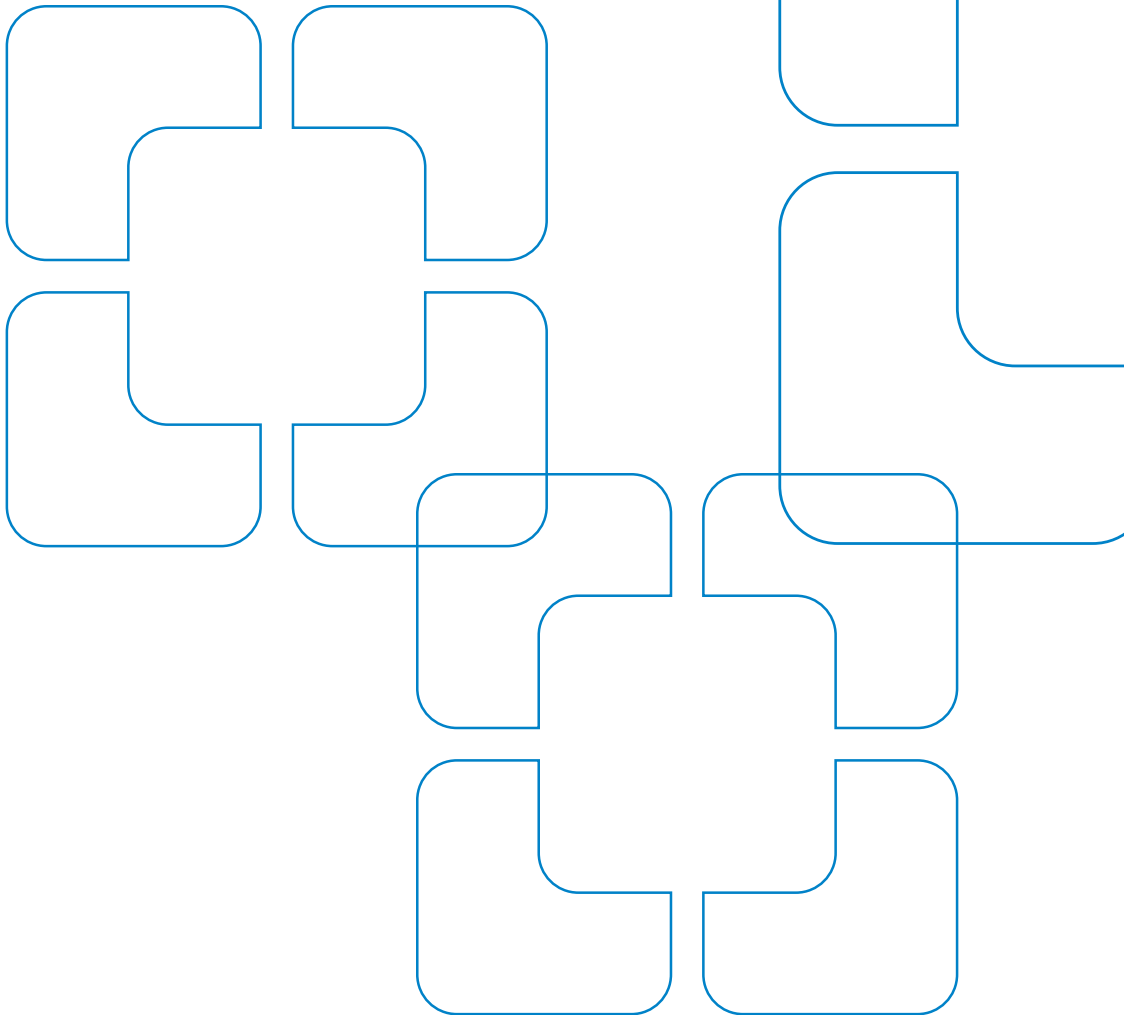




Cleveland Clinic
Indian River Hospital

Community Health Needs Assessment 2024



Cleveland Clinic Indian River Hospital
1000 36th Street, Vero Beach, FL 32960

2024 Community Health Needs Assessment
As required by Internal Revenue Code § 501(r)(3)

Name and EIN of Hospital Organizations Operating Hospital Facility:	Indian River Memorial Hospital Inc. 59-2496294 DBA: Cleveland Clinic Indian River Hospital
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Date Approved by Authorized Governing Body:	November 15, 2024
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Contact:	Cleveland Clinic chna@ccf.org
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Cleveland Clinic Indian River Hospital

2024 Community Health Needs Assessment

I. INTRODUCTION

Cleveland Clinic Indian River Hospital (CCIRH) is a part of the Cleveland Clinic, a nonprofit, multispecialty, academic medical center that integrates clinical and hospital care with research and education. The hospital offers preventive, primary, and acute hospital care and a broad array of specialty services. Our physicians represent nearly 50 medical specialties and subspecialties working in integrated teams to provide collaborative, patient-centered care. We work with community-based physicians to care for area residents and collaborate with our Cleveland Clinic colleagues across southeast Florida and Ohio to ensure access to the most advanced levels of medicine and innovative care. Additional information on the hospital and its services is available at my.clevelandclinic.org/florida.

CCIRH is part of the Cleveland Clinic health system, which includes an academic medical center near downtown Cleveland, Ohio, fifteen regional hospitals in northeast Ohio, a children's hospital, a children's rehabilitation hospital, five southeast Florida hospitals, and several other facilities and services across the states of Ohio, Florida, and Nevada. Cleveland Clinic is one of the world's largest and best healthcare systems, with 80,642 caregivers, 23 hospitals, and 276 outpatient facilities in locations around the globe*.

Each Cleveland Clinic hospital supports a tripartite mission of patient care, research, and education. Research is conducted at and in collaboration with all Cleveland Clinic hospitals. Through research, Cleveland Clinic has advanced knowledge and improved community health for all its communities, from local to national, and across the world. This allows patients to access novel techniques and participate in research trials no matter where they access care. Through education, Cleveland Clinic trains health professionals who provide access to health care across Ohio, Florida, and the United States.

Cleveland Clinic was at the forefront of modern medicine when its founders opened it as a multi-specialty group practice in 1921. In its first century, Cleveland Clinic introduced many medical firsts, opened facilities around the world, and is proud to be ranked among the top hospitals in the country. Now, 100 years later, the vision of the founders remains Cleveland Clinic's mission: caring for life, researching for health, and educating those who we serve. Additional information about Cleveland Clinic is available at my.clevelandclinic.org.

Cleveland Clinic is much more than a healthcare organization. We are part of the social fabric of the community, creating opportunities for those around us and making the communities we serve healthier. We are listening to our neighbors to understand their needs, now and in the future. The health of every individual affects the broader community.

*Please note: The statistics reflect official year-end totals as of Dec. 31, 2023.

According to the National Academy of Medicine, only 20% of a person's health is related to the medical care they receive. Other factors have a lifelong impact, accounting for 80% of a person's overall health. These social determinants of health are conditions in which people grow, work, and live – including employment, education, food security, housing, life expectancy, chronic diseases, infant mortality, substance use disorders, and several others.

To address health disparities, we lead efforts in clinical and non-clinical programming, advocacy, building partnerships, sponsorship, and community investment. We are actively partnering with community leaders to help strengthen community resources and mitigate the impact of these social determinants of health. Cleveland Clinic is optimistic that through implementing these long-term efforts, frequently re-assessing the community's needs, and remaining committed to addressing key social determinants of health, sustainable change can be made. CCIRH recognizes that addressing social economic challenges requires seeing the bigger picture and maintaining steady progress. The challenges to health disparities are historically rooted and thus require multi-faceted, long-term solutions to observe improved health outcomes over time, through many cycles of community health needs assessments and implementation strategies. Improving healthcare challenges today paves the way for better outcomes for future generations in the communities we serve. By engaging with partners who share our commitment, we can create better, healthier communities for everyone.

Each Cleveland Clinic hospital conducts a Community Health Needs Assessment (CHNA) to understand and plan for the current and future health needs of residents and patients in the communities it serves. The CHNAs inform the development of strategies designed to improve community health, including initiatives designed to address social determinants of health. The facilities within Cleveland Clinic's five-hospital regional health system in Florida collaborate to share community health data and resources throughout the CHNA and implementation strategy processes.

A. CHNA Process and Methodology

CHNA Background

On December 1, 2023, Cleveland Clinic Indian River Hospital engaged Carnahan Group to conduct a Community Health Needs Assessment (CHNA) in 2024 as required by the Patient Protection and Affordable Care Act (PPACA). For more information on Carnahan Group, please refer to Appendix B: Carnahan Group Qualifications.

A CHNA is a report based on epidemiological, qualitative, and comparative methods that assess the healthcare and public health issues in a hospital organization's community and that community's access to services related to those issues. Based on the 2024 CHNA findings, an implementation strategy addressing the identified community health needs will be developed and adopted by CCIRH by May 15, 2025.

Collaborating Organizations

The facilities within Cleveland Clinic's five-hospital regional health system in Florida collaborate to share community health data and resources throughout the CHNA and implementation strategy processes. For this assessment, Indian River Hospital collaborated with the following Cleveland Clinic hospitals: Martin North, Martin South, Tradition and Weston.

501(r)(3) CHNA Regulations

The Patient Protection and Affordable Care Act, enacted on March 23, 2010, requires not-for-profit hospital organizations to conduct a CHNA once every three taxable years that meets the requirements of the Internal Revenue Code 501(r). 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).

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 CCIRH collaborated, if applicable, including their qualifications;
- A description of how CCIRH took into account input from persons who represented the broad interests of the community served by CCIRH, 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 CCIRH; 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.

Primary Data Collection 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 CCIRH, 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 CCIRH, leaders, representatives, or members of medically underserved, low-income, and minority populations with chronic disease needs in the community served by CCIRH; and,

- Consultation or input from other persons located in and/or serving CCIRH'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 primary data sources utilized for CCIRH's CHNA are provided in Appendix C. Information was gathered by conducting interviews with individuals representing community health and public service organizations, and medical professionals.

Secondary Data Collection Strategy

A variety of data sources were utilized to gather demographic and health indicators for the community served by CCIRH. Commonly used data sources include Esri, the U.S. Census Bureau, and the Centers for Disease Control and Prevention (CDC). Indian River County defines the community served by CCIRH. Demographic and health indicators are presented for these areas. Initial secondary data collection was completed utilizing the most recent periods of data available as of July 31, 2024.

For select indicators, county-level data are compared to state and national benchmarks. Additionally, Healthy People 2030 (HP 2030) Goals are presented where applicable. The HP 2030 Goals are measurable, ten-year public health objectives to help individuals, organizations, and communities across the United States improve health and well-being.

B. Community Definition

For the CHNA report, CCIRH defined the community as Indian River County, as displayed on the map below. CCIRH analyzed demographic data by ZIP Code to ensure that medically underserved, low-income, or minority populations who live in the geographic areas from which the hospital draws patients were not excluded from the defined community. CCIRH acknowledges that additional patients served via telehealth may reside within a broader geographic area.

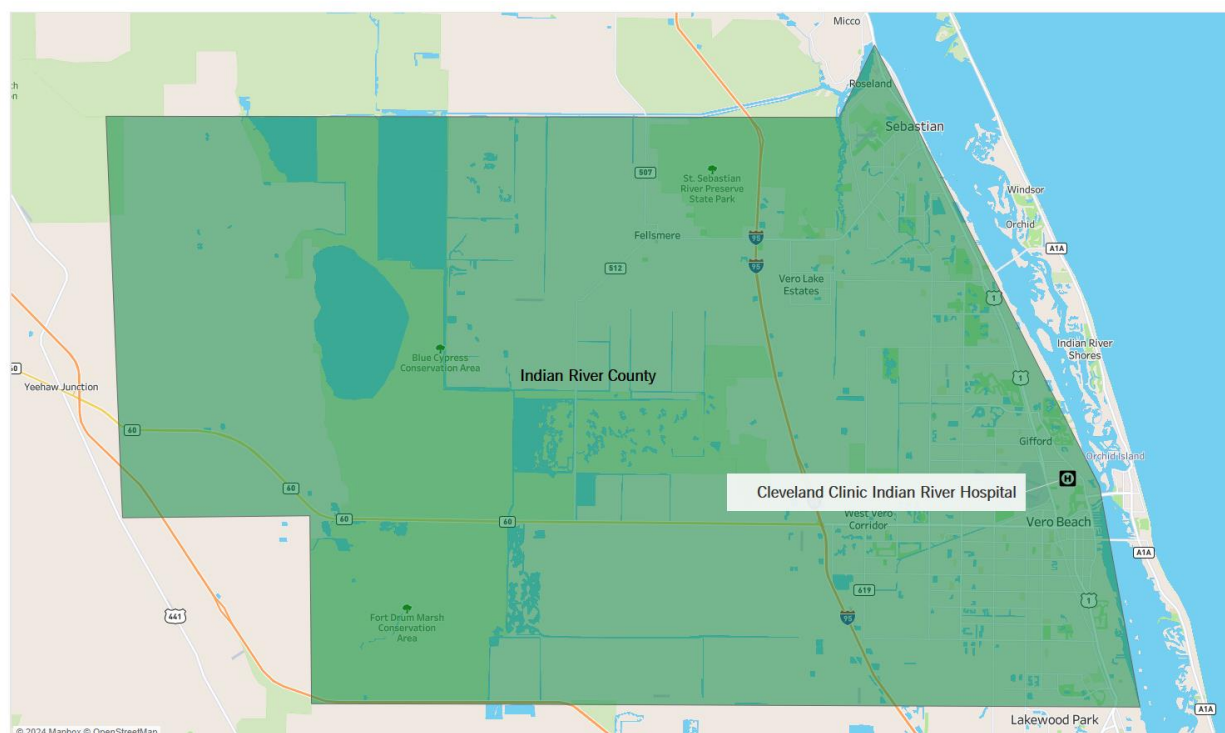


Figure 1 - Defined Community, Source: Carnahan Group, CCIRH

Inpatient Discharges by ZIP Code

CCIRH reviewed inpatient, outpatient, and emergency department discharge data for the calendar year 2022. ZIP Codes reflecting the top 75% of inpatient, outpatient, and emergency department discharges within the most recent year of data were prioritized for inclusion within the defined community. The top patient discharges by ZIP Code for the facility are featured in Appendix F.

II. EXECUTIVE SUMMARY

A. Prioritized Community Health Needs

This Community Health Needs Assessment (CHNA) is constructed to serve as a tool for community program planning and act as a guide for allocating community resources and efforts where they are needed most. The overarching goals in conducting this CHNA are to identify significant health needs of the community, prioritize those health needs, and identify potential resources available to address those health needs.

An extensive list of the community's health concerns was established through analysis of both primary and secondary data. This list of needs was entered into a decision matrix to establish which priorities were most pressing for the community. Ranked factors considered during this process include benchmarked secondary data, categorized coded primary data, information related to the burden, scope, severity, or urgency of the health need, the feasibility and effectiveness of intervening, the presence of health disparities, the hospital's and health system's strategic priorities, and local County Health Improvement Plans (CHIP) and the Florida State Health Improvement Plan (SHIP).

The prioritized community health needs (listed in alphabetical order) identified during CCIRH's 2024 CHNA are listed below.

- Access to Care
- Behavioral Health
- Chronic Disease Prevention & Management
- Maternal and Child Health
- Socioeconomic Concerns



Figure 1 – Prioritized list of community health needs

Access to Care

Health insurance
Provider shortages
Awareness of resources

Affordability
Transportation
Fear

Access to care ranked as one of the most consistently mentioned health concerns by community leaders, emphasizing the critical need for better access and delivery of care. Stakeholders cited timeliness and appointment availability as significant hurdles to obtaining care. Leaders also highlighted how long wait times for primary care providers further prolong the wait times to receive specialist referrals and appointments. Some interviewees were concerned about healthcare workforce shortages, the rising number of providers solely offering concierge medicine, and the need for additional provider capacity during peak “season” when the population fluctuates.

Community stakeholders voiced a need for more intermediate care services to address the needs of homeless patients and the growing elderly population following discharge from an acute care facility. Public health experts voiced that access to care is particularly problematic for specific sub-groups of the population, including communities of color, LGBTQ+ individuals, and veterans.

Representatives raised concerns about how economic constraints place limitations on families’ ability to make healthy choices. Community leaders mentioned that, for working families, there is a gap in income qualifications for services that leaves many working families just outside of the threshold to qualify for Medicaid and other services. Many working families are faced with the challenge of choosing between living necessities such as rent and food, over healthcare.

The Healthy People 2030 leading health indicators include the following items related to access to care:

- Children, adolescents, and adults who use the oral healthcare system
- Persons with medical insurance

Indian River County is designated by the Health Resources and Services Administration as a low-income population Health Professional Shortage Area (HPSA) and a Medically Underserved Area. When examining provider supply, County Health Rankings data reveals the ratio of population to primary care physicians within Indian River County was higher than the state and national benchmarks in 2022. Additionally, the ratio of population to mental health providers in Indian River County is higher than the state and national benchmarks. A higher ratio is indicative of less access to providers. An additional indicator of inequitable access to care is reflected in higher rates of preventable hospital stays among Indian River County residents compared to the Florida and U.S. benchmarks.

Behavioral Health

Mental Health
Anxiety & Depression
Suicide

Substance Use Disorders
Toxic Stress

Behavioral health, which includes mental health and substance use, was a major concern among community leaders. Mental health and substance use issues do not discriminate based on race, age, or socioeconomic status; however, some populations are disproportionately affected and are less likely to receive treatment. Additionally, it is important to note that behavioral health and physical illness are intrinsically linked, being that depression, anxiety, and substance use disorders can affect a person's desire and ability to make healthy choices.

When discussing behavioral health, leaders most frequently mentioned affordability and shortages in the behavioral health workforce as barriers to accessing treatment. Interviewees stated that residents seem to struggle the most with substance use, depression, and anxiety. Additionally, community members voiced that mental illness is often compounded by substance use and co-occurring physical health problems. They indicated a desire for a more integrated and holistic approach to behavioral health care.

The Healthy People 2030 leading health indicators include the following items related to behavioral health:

- Drug overdose deaths
- Suicides
- Adolescents with major depressive episodes (MDEs) who receive treatment
- Adults engaging in binge drinking of alcoholic beverages during the past 30 days

County Health Rankings data shows that, on average, residents of Indian River County experience more poor mental health days and more frequent mental health distress than the average Florida resident. According to Florida Health Charts, county residents have higher rates of hospitalization and emergency department visits for mood and depressive disorders when compared to the Florida benchmark. Of particular concern in the primary data was an increased prevalence of behavioral health disorders among children and adolescents; the secondary data reflects this trend. Children ages 1-5 in the county have much higher rates of receiving mental health treatment services than the Florida rates.

Examining the behavioral health provider supply reveals that Indian River County has a lower supply of mental health counselors, licensed psychologists, and clinical social workers as compared to the Florida supply. In 2022, the county also had a higher suicide rate for all age groups, as well as for youth aged 15 to 19.

Behavioral health, described as mental well-being and substance use prevention, is included as a priority area within the 2022-2026 State Health Improvement Plan for Florida. Improving mental health is also listed as a priority goal within Indian River County's 2021-2026 County Health Improvement Plan.

Chronic Disease Prevention & Management

Prevention & Early Screening
Heart Disease & Stroke

Behavioral Risk Factors
Healthy Aging

Chronic disease prevention and management was identified as a leading health concern for Indian River County. This concern is substantiated by secondary data, as cancer, heart disease, chronic lower respiratory disease, and stroke ranked as four of the top five leading causes of death in the community. Chronic diseases decrease one's quality of life substantially; however, they may be prevented and managed by controlling individuals' modifiable risk factors, like smoking, high cholesterol, and blood pressure. Interviewees specifically raised concerns regarding the prevalence of sickle cell disease, asthma, diabetes, stroke, and heart disease within the community.

Stakeholders voiced that the prevalence rates of chronic conditions, particularly cancer, heart disease, and stroke, are disproportionately present in communities of color. Public health experts noted an upward trend in obesity, emphasizing that nutrition, physical activity, and chronic diseases are intrinsically connected. Community leaders indicated a desire for more programs that address the upstream social and economic risk factors for chronic illness.

The Healthy People 2030 leading health indicators include the following items related to Chronic Disease Management and Prevention:

- Consumption of calories from added sugars by persons aged 2 years and over
- Persons who are vaccinated annually against seasonal influenza
- Persons who know their HIV status
- Children and adolescents with obesity
- Adults who meet current minimum guidelines for aerobic physical activity and muscle-strengthening activity
- Adults who receive a colorectal cancer screening based on the most recent guidelines
- Adults with hypertension whose blood pressure is under control
- New cases of diagnosed diabetes in the population
- Current use of any tobacco products among adolescents
- Cigarette smoking in adults

County Health Rankings data indicates that residents of Indian River County have worse access to healthy foods, which may be related to the increased rates of adult obesity compared to the state average. When examining age-adjusted death rates for heart disease by race, statistics show that Black non-Hispanic populations in the county experience higher rates of death from heart disease, heart attacks, and high blood pressure when compared to all other races within the county and when compared to the corresponding group at the state level. According to FL Health Charts, adults in Indian River County also had a higher rate of diabetes-related emergency room visits. When examining the community's access to physical activity opportunities, the county has a lower percentage of the population who live within a half mile of a park. Access to parks, green spaces, and safe recreational facilities plays a critical role in

a community's built environment, which can enable community members to achieve optimal health.

Healthy weight is included as a priority goal within Indian River County's 2021-2026 County Health Improvement Plan. Chronic disease prevention and management is listed as a priority area within the 2022-2026 State Health Improvement Plan for Florida.

Maternal and Child Health

Prenatal Care
Pregnancy Risk Factors

Maternal & Infant Mortality
Affordable Childcare

Maternal and child health is a major indicator of a community's health—after all, it determines the health of families and the health of the next generation. The health of mothers before, during, and post-pregnancy influences the health and well-being of infants. The differences in health outcomes for infants based on race/ethnicity reflect a significant challenge within Indian River County. Several key informants indicated concerns regarding access to obstetrics services along with disproportionately worse outcomes in infant mortality among Black and Hispanic populations.

The Healthy People 2030 leading health indicators include the following items related to maternal and child health:

- Infant deaths
- 4th-grade students whose reading skills are at or above the proficient achievement level for their grade
- Maternal deaths

According to Florida Health Charts, Indian River County's infant mortality rate per 1,000 live births from 2018-2022 was significantly worse than the state's benchmark. The mortality rate for Black infants was more than three times higher than that of white infants, further substantiating community leaders' concern for racial health disparities in maternal and infant care. When analyzing prenatal risk factors, Florida Health Charts show that Indian River County has a higher percentage of mothers who smoked during pregnancy and a lower percentage of mothers who maintained a healthy weight during pregnancy.

Maternal and child health is included as a top priority within the 2022-2026 State Health Improvement Plan for Florida.

Socioeconomic Concerns

Affordable & Safe Housing
Food Insecurity
Economic Stability

Safety (gun violence)
Physical Activity Opportunities

Non-clinical factors such as employment, the community's built environment, level of education, systemic racism, and access to healthy foods are all fundamental factors in the underlying context of an individual's health. Leaders emphasized that a high cost of living, income inequality, and a lack of affordable housing are significant economic challenges for residents in Indian River County. Access to healthy foods and transportation ranked closely behind housing as significant physical and environmental barriers to living optimally healthy lives. Leaders emphasized how poverty, financial barriers, and economic opportunity influence health disparities in Indian River County. Many interviewees also described the unique challenges faced by the "ALICE" (Asset-limited, income-constrained, employed) population in the community.

Healthy People 2030 leading health indicators include the following items related to socioeconomic concerns:

- Household food insecurity and hunger
- Exposure to unhealthy air
- Homicides
- Employment among the working-age population

Factors included within the assessment's secondary data, such as housing, transportation, racial segregation, educational attainment, and environmental factors, provide a snapshot of the socioeconomic conditions that residents experience. From an economic perspective, Indian River County has a lower percentage of individuals living below the poverty level; however, the percentage of unemployed individuals in 2023 exceeded the state benchmark.

An individual's level of education is strongly associated with one's quality of life, health outcomes, and life expectancy. It is a major determinant in shaping future opportunities, like employment and income. Indian River County has a greater percentage of persons who obtained a bachelor's degree or graduate/professional degree than the state benchmarks.

The level of crime and sense of safety within neighborhoods influence overall quality of life, walkability, and the ability to play and exercise outdoors. Indian River has a greater rate of hospitalizations due to unintentional firearm injuries, school environmental safety incidents, and child abuse cases than the Florida state averages.

Indian River County has a greater population of persons with disabilities compared to state and national benchmarks. The American Community Survey estimate for 2018-2022 shows that the county had a high percentage of persons with hearing, vision, cognitive, self-care, and independent living difficulties when compared to the state and national averages. This indicates

a need for infrastructure and policies that will allow people with disabilities to access needed services and support.

Social and economic concerns are described as one of seven priority areas within the 2022-2026 State Health Improvement Plan for Florida. Indian River County's CHIP for 2021-2026 features economic opportunity and employment, as well as housing as priority areas.

B. Health Equity

Indian River Hospital (IRH) acknowledges that the true strength and measure of a community's health is only as strong as the health of its most vulnerable populations. Across the nation, health inequities and disparities persist by race, gender, economic status, sexual orientation, and geographical location; Indian River County is no exception. The Office of Health Studies estimates that in 2022, clinical care impacted only 20 percent of county-level variation in health outcomes, while socioeconomic concerns affected as much as 50 percent. Many of these factors such as being born into poverty, employment opportunities, access to healthy foods, and access to quality education are oftentimes beyond the individuals' control yet have the greatest impact on one's trajectory of health. These social disadvantages are reflected in health disparities for chronic diseases, infant and maternal mortality, mental illness and substance use disorders, and overall life expectancy. IRH is committed to improving and working with the community to alleviate health disparities.

With equity at the forefront of every decision, Cleveland Clinic recognizes that health equity should not merely serve as a strategic priority but exists as an embedded concept within the organization's mission, culture, and daily workflows. Healthy People 2030 asserts that if we are truly striving for health equity, we must "value everyone equally with...ongoing societal efforts to address avoidable inequalities, historical and contemporary injustices, and the elimination of health and health care disparities." As a leader in healthcare, IRH proactively assesses our system's practices and policies to determine where inequities are produced and where solutions can be implemented on a wide scale. To truly advance health equity and implement systematic change, Cleveland Clinic ingrains principles of health equity within each strategic priority and meaningfully considers root causes of inequities in all levels of decisions.

Indian River Hospital is committed to extending care beyond the four walls of our hospitals and clinics to listen to residents' concerns and collaborate with community organizations, to address the pressing needs of the communities we serve. Our dedication to advancing health equity and institutionalizing organizational change is exemplified by our commitment to stakeholder collaboration, engaged leadership, and ongoing training and quality improvement efforts. By operating through an equity-focused lens, CCIRH aims to embed equity as a common standard and approach to health, patient care, and community welfare to support our communities in reaching their full potential.

III. SECONDARY DATA OVERVIEW

The following sections provide a snapshot of the community's demographics, an overview of the community's healthcare setting, and an environmental scan of county and state-level assessments. Please see Appendix E for detailed secondary data.

A. Population Demographics

Population Growth

The projected population growth for the community is 3.5% over the next five years. Significant population growth is expected for Vero Beach ZIP Codes 32966 and 32967.

ZIP Code	Community	2023 Population	2028 Population	5 Year Percentage Change
32948	Fellsmere	6,676	6,707	0.5%
32963	Vero Beach	16,649	16,878	1.4%
32968	Vero Beach	16,136	16,452	2.0%
32958	Sebastian	29,201	29,972	2.6%
32960	Vero Beach	21,121	21,831	3.4%
32962	Vero Beach	27,549	28,581	3.7%
32966	Vero Beach	20,875	22,034	5.6%
32967	Vero Beach	28,814	30,488	5.8%
Grand Total		167,021	172,943	3.5%

Figure 2 - Population Change by ZIP Code, Source: Esri 2023

Population by Age Group

The populations of residents aged 20-29 and 50-64 are expected to decrease slightly over the next five years. Significant population growth is expected for adults aged 35-44, and adults over the age of 70. The median age within Indian River County was 54.8 years, which far exceeded the Florida (42.4 years) and U.S. (38.5 years) median ages according to the U.S. Census Bureau American Community Survey 2018-2022 Five-Year Estimates.

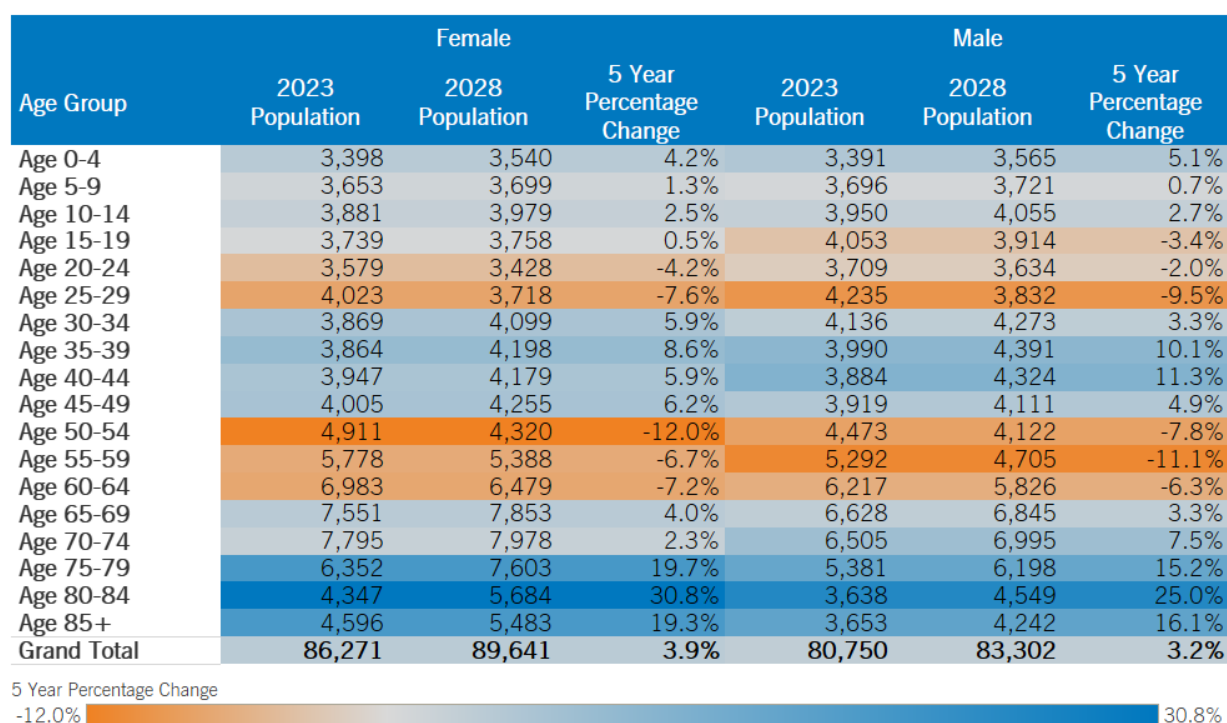


Figure 3 - Population change by age group, Source: Esri 2023

Population Race/Ethnicity

The most common race/ethnicity in CCIRH's community is white (72.7%) followed by Hispanic (13.6%), Black/African American (8.3%), individuals of two or more races (3.3%), Asian (1.6%), American Indian or Alaska Native (0.2%), and other races (0.5%). Substantial population growth is expected for the Asian (14.5%) and Hispanic (8.1%) populations and individuals of two or more races (8.9%). The Black population within Indian River County is also expected to exceed the average population growth rate.

Race and Ethnicity	2023 Population	2028 Population	5 Year Percentage Change
Asian	2,605	2,983	14.5%
Multiple Races	5,455	5,943	8.9%
Hispanic	22,662	24,492	8.1%
Other Race	781	835	6.9%
American Indian Alaska Native	291	305	4.8%
Black/African American	13,811	14,458	4.7%
Pacific Islander	55	57	3.6%
White	121,361	123,870	2.1%
Grand Total	167,021	172,943	3.5%

Figure 4 - Population change by race/ethnicity, Source: Esri 2023

Language and Foreign-Born Population

A greater portion of foreign-born individuals resided in Indian River County than in Florida and the United States from 2018 to 2022. A lower percentage of Indian River County residents spoke a language other than English within the home during the same time frame.

	Indian River County	Florida	United States
Foreign born population	24.1%	20.7%	13.6%
Language other than English spoken at home	13.9%	29.9%	21.7%

Figure 5 – Language and foreign-born population, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Computer and Internet Access

Households within Indian River County were more likely to lack access to a computer or broadband internet than the state and national averages.

	Indian River County	Florida	United States
Households with a computer	93.5%	95.2%	94.0%
Households with broadband internet subscription	86.9%	88.8%	88.3%

Figure 6 - Computer and internet access, Source: U.S. Census Bureau ACS 2018-2022

Veteran Population

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, 10.8% of Indian River County residents were veterans, compared to 7.9% of Florida residents and 6.6% of the U.S. population. Veterans in Indian River County were more likely to be unemployed and more likely to have a disability than those across Florida and the United States.

	Indian River County	Florida	United States
Veteran status	10.8%	7.9%	6.6%
Verteran unemployment rate	7.8%	4.1%	4.2%
Veteran poverty rate	7.0%	7.1%	7.0%
Veteran disability status	35.6%	30.1%	29.8%

Figure 7 - Veteran population, unemployment, poverty, and disability rates, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than the state benchmark value.

Rural Population

According to County Health Rankings, 7.2% of Indian River County residents were classified as rural, compared to 8.5% of Florida residents.

LGBTQ+ Population

According to the UCLA School of Law Williams Institute, 4.6% of Florida's population identified as lesbian, gay, bisexual, or transgender in 2019. The Florida LGBT population was 48% male and 52% female with an average age of 39.4 in 2017. Approximately 24% of Florida's LGBT population represented families with children. Race and ethnicity data for the LGBT population in 2017 shows that 51% of the population was white, 30% Latino/a, 12% Black/African American, 1% Asian, 4% more than one race, and 2% all other races.

The Florida LGBT population had an uninsured rate of 21% in 2017, which was greater than the non-LGBT population (15%). The community also experienced higher rates of food insecurity (27% compared to 16%) and were more likely to have incomes less than \$24,000 (27% compared to 21%).

According to the U.S. Census Bureau American Community Survey 2022 data, 62.6% of same-sex couples across the nation were homeowners, 54.8% of same-sex householders had at least a bachelor's degree, and 78.7% of same-sex householders were employed.

It is important to note that many national demographic and community health surveys do not collect complete information related to sexual orientation and gender identity (SOGI). This leads to significant data limitations for measuring the prevalence of LGBTQ+ individuals and identifying specific health problems impacting the community.

B. Community Health Indexes

Area Deprivation Index

The Area Deprivation Index (ADI) ranks neighborhoods by socioeconomic disadvantage and compares them to the state level. It includes factors related to income, education, employment, and housing quality. Each block group receives a state-level decile ranking, with group 1 having the lowest ADI (least disadvantaged) and 10 having the highest ADI (most disadvantaged). Within CCIRH's defined community, high ADI (disadvantaged) neighborhoods are located within Vero Beach ZIP Codes 32962, 32960, and 32967, and Sebastian ZIP Code 32958.

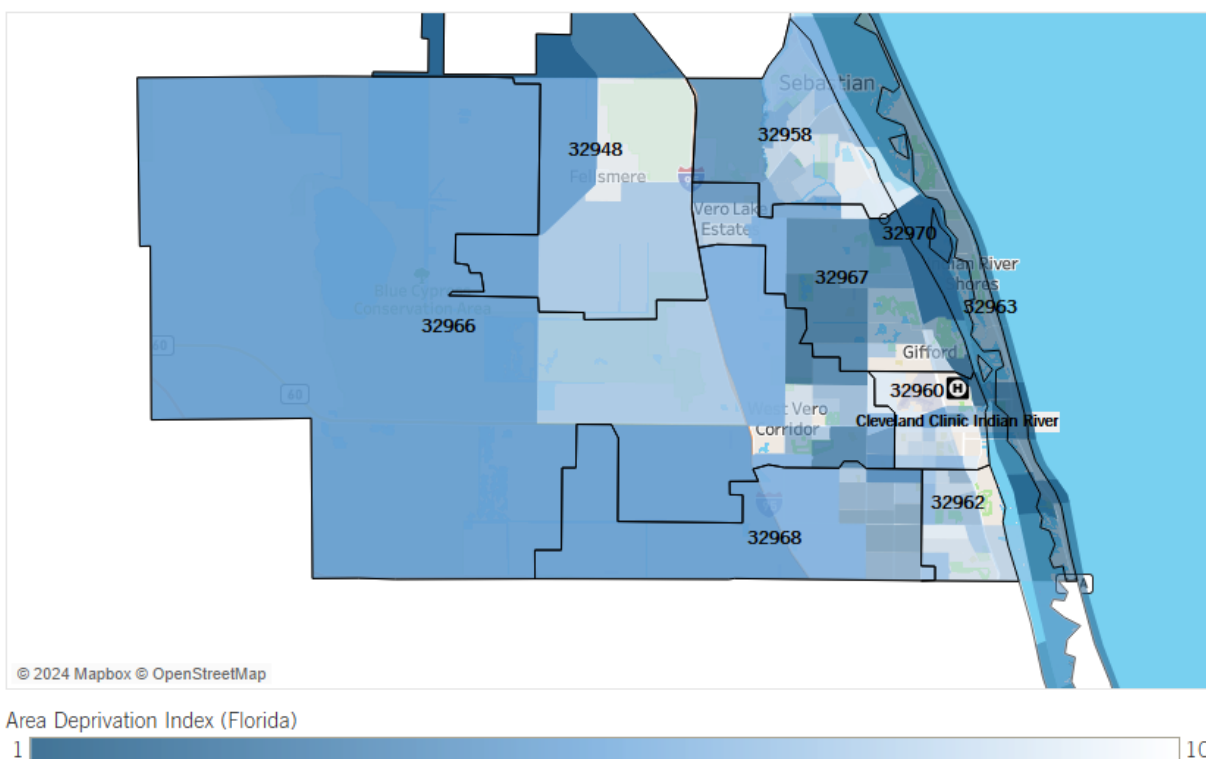


Figure 8 - Map of Area Deprivation Index (ADI) by census block group, Source: University of Wisconsin School of Medicine and Public Health 2021

Social Vulnerability Index (SVI)

The Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry Social Vulnerability Index (SVI) is a place-based index that quantifies experiencing social vulnerability, defined as the demographic and socioeconomic factors that adversely affect communities that encounter hazards and other community-level stressors like disasters or disease outbreaks. The SVI scores range from 0 (lowest vulnerability) to 1 (highest vulnerability).

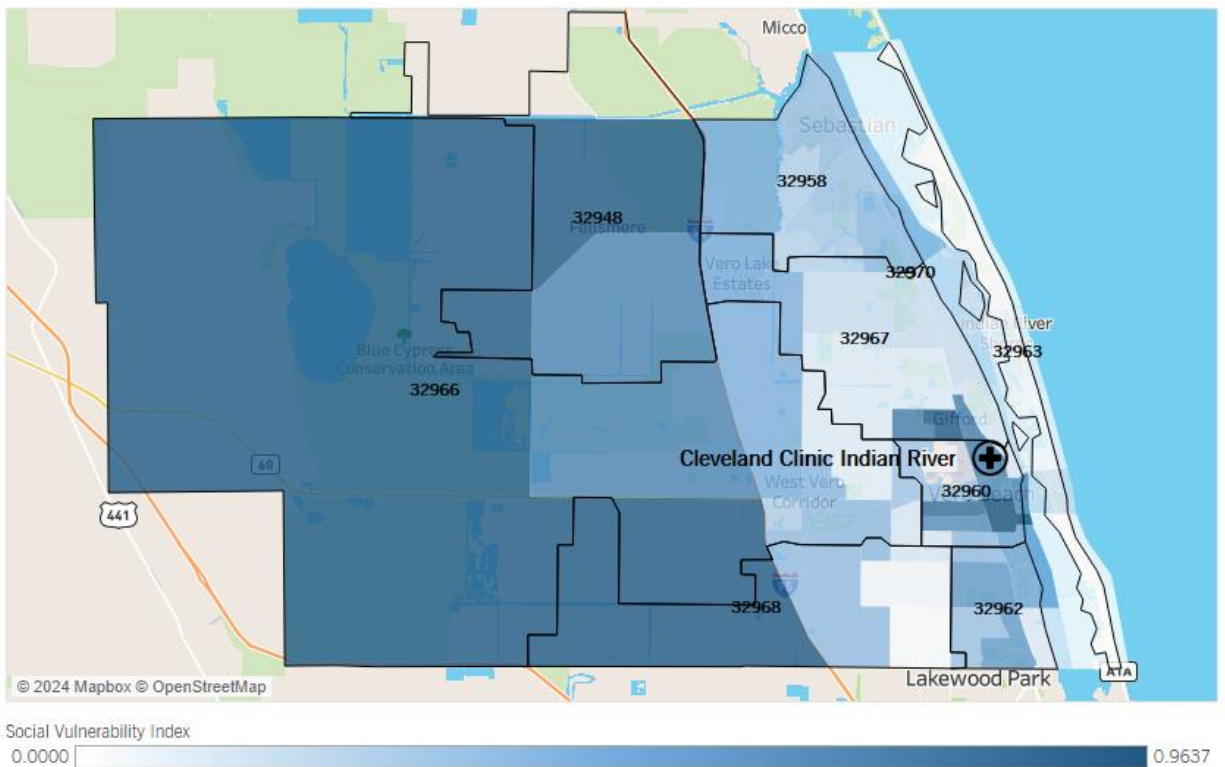


Figure 9 – Florida Social Vulnerability Index score by census tract, Source: CDC/ATSDR 2022

Child Opportunity Index

The Child Opportunity Index (COI) is a composite index of 44 measures that demonstrates how the neighborhood environment impacts children and families. The COI 3.0 captures differences in opportunity across U.S. neighborhoods and can be used to design and implement programs promoting equity. The 2021 child opportunity scores range from 1 to 100, with higher scores indicating that children in those neighborhoods experience all the conditions they need to thrive. Scores are grouped in the map below according to the following categories: very low, low, moderate, high, or very high.

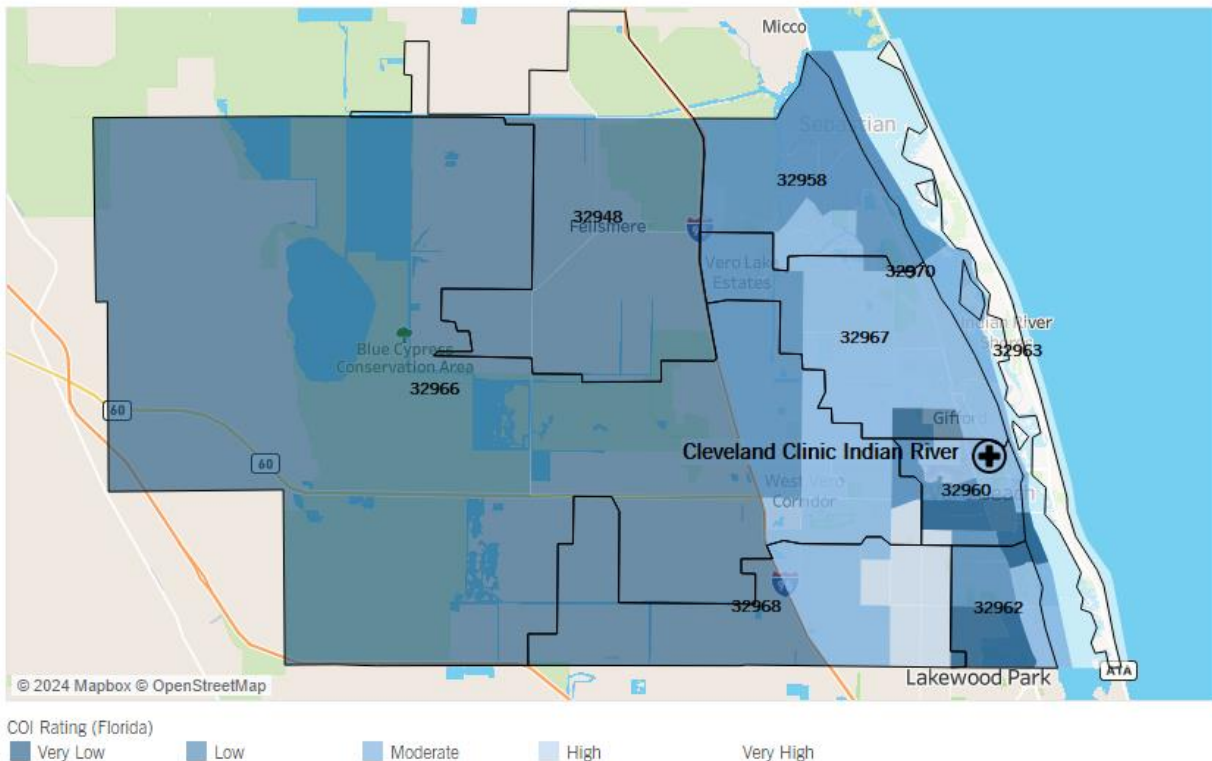


Figure 10 – Child Opportunity Index 3.0 (COI) ratings by census tract for Florida, Source: diversitydatakids.org.

Environmental Justice Index

The Environmental Justice Index (EJI) is a tool for identifying and prioritizing areas that may require special attention or additional action to improve health and health equity. The index characterizes cumulative impacts and patterns of environmental injustice by ranking each census tract according to 36 environmental, social, and health factors. The EJI ranking ranges from 0 (lowest relative burden/vulnerability) to 1 (highest relative burden/vulnerability).

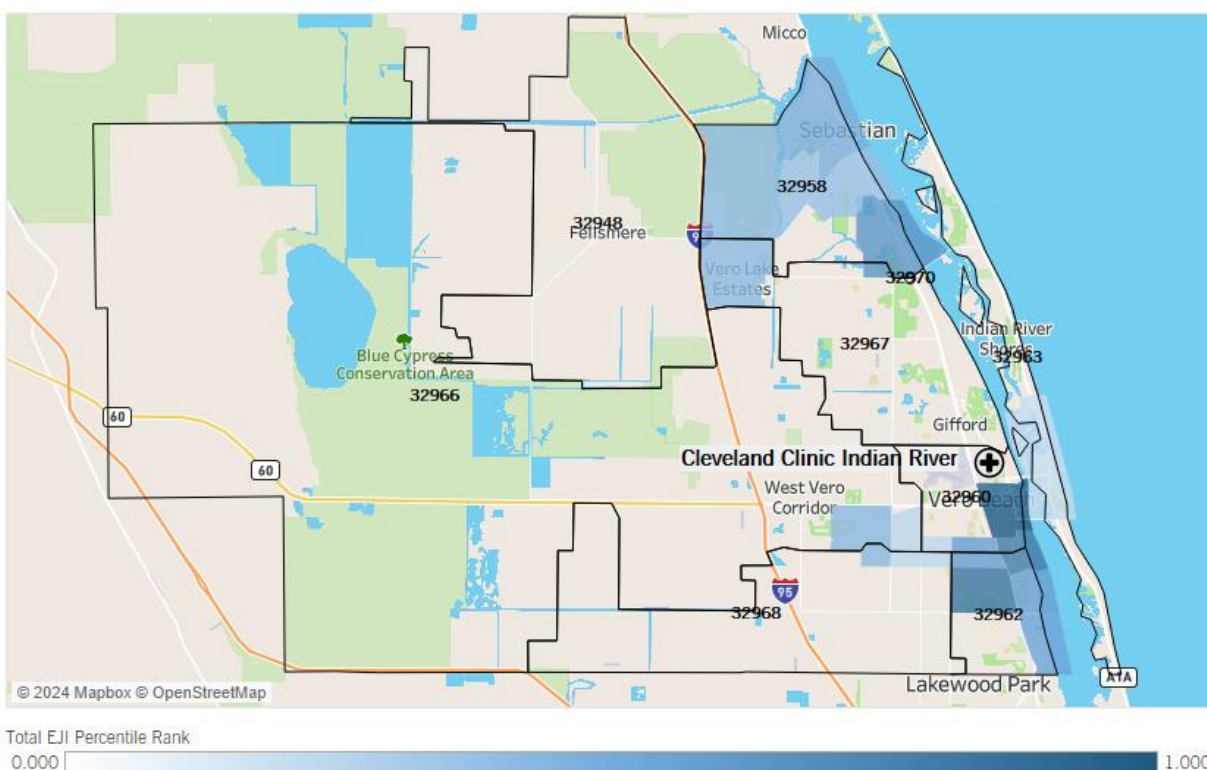


Figure 11 – Environmental Justice Index ranking by census tract 2022, Source: CDC and Agency for Toxic Substances Disease Registry

Healthcare Equality Index

The Human Rights Campaign's Healthcare Equality Index is a national benchmarking tool that evaluates healthcare facilities for their dedication to the equitable treatment and inclusion of LGBTQ (Lesbian, Gay, Bisexual, Transgender, Queer or Questioning) patients, visitors, and employees. In 2024 CCIRH received an index score of 100 and was designated as an LGBTQ+ Healthcare Equality Leader.

C. Other Assessments and Health Improvement Plans

Indian River County Health Improvement Plan 2021-2026

- Mental health
- Healthy weight
- Affordable housing
- Integration of housing support services
- Increase employment
- Decrease poverty rate

Florida State Health Improvement Plan 2022-2026

- Alzheimer's disease and related dementias
- Chronic diseases & conditions
- Injury, safety, & violence
- Maternal & child health
- Behavioral health (includes mental illness and substance abuse)
- Social and economic conditions impacting health
- Transmissible and emerging diseases

ALICE Report for the State of Florida 2024 Update

- Cost of childcare
- Growing population of adults over 65
- Alleviating racial disparities in financial hardship
- Health policies related to public assistance
- Food insecurity
- Housing affordability
- Insufficient retirement savings
- Savings to cover unexpected expenses or crises
- Impact of financial hardship on mental health

IV. PRIMARY DATA

A. Community Leader Interviews

The community leader interview data is qualitative 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 CCIRH, 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.

Interview Methodology

Seventeen interviews were conducted from January 31st to February 16, 2024. Interviews required approximately 30 minutes to complete. Interviewers followed the same process for each interview. The complete list of interview questions and responses can be found in Appendix D.

Community Leader Interview Key Themes



Figure 12 - Word cloud of key community leader interview themes. Topics with 3 or more mentions were included.

Community Leader Interview Summary

Community leaders cited access to care, particularly healthcare affordability, and availability, as an overarching health concern. Several leaders identified a lack of healthcare specialists—especially obstetricians and mental health providers as a significant barrier to accessing these types of health services. Community leaders expressed that in Indian River County, residents with lower socioeconomic status are more likely to experience greater barriers to accessing care, such as inadequate transportation, lack of medical insurance, and inability to pay for medications. Florida's lack of Medicaid expansion was often cited as a major barrier, preventing

a large percentage of the population from accessing affordable healthcare. Many interviewees candidly expressed that a significant percentage of the area's large immigrant population declines to seek care due to concerns that their immigration status could be endangered. Additionally, interviewees expressed that the large immigrant population struggles with navigating the healthcare system. Individuals are often not aware of health resources and social services that they may be eligible to receive.

Indian River County's community leaders stated that behavioral health, including mental health and substance use, was a pressing community health issue. Leaders expressed concerns regarding the growing demand to address mental health needs including substance use, social isolation, depression, anxiety, stress, and suicide. While the need for behavioral health providers continues to grow exponentially, the supply of providers has not kept pace, leading to long wait times and difficulties finding timely care. Leaders were concerned about rising mental health and substance use issues among teenagers and adolescents. Interviewees expressed a profound need for more providers in conjunction with the need for programs and campaigns to combat the negative stigma associated with receiving treatment. From an equity stance, community leaders advocated for improving behavioral health services for vulnerable groups, such as people experiencing homelessness, those identifying as LGBTQ+, elderly, and non-English speakers. Additionally, eliminating stigma regarding mental health treatment within the Black, Indigenous, and People of Color (BIPOC) communities was a top priority for key stakeholders.

Socioeconomic concerns were frequently mentioned as a call to action to address the root causes of health inequities that exist within the community. The urgent need for quality and affordable housing led the way as a primary socioeconomic concern, with financial stability, access to fresh produce grocery stores, and access to physical activity opportunities following close behind. Leaders cited that addressing upstream factors would ultimately lower downstream poor health outcomes—for example, economic hardship, such as housing insecurity, was described as a driver of poor mental health and substance use.

"The housing crisis is a public health crisis because of its great impact on chronic stress, mental health, and physical health."

- Community Leader, 2024

When asked to discuss major barriers to obtaining optimal health, leaders often cited access to care, health literacy, cultural and language barriers, nutrition, and affordability of care. A growing concern for the ALICE population surfaced throughout the interviews, where many leaders voiced distress for middle-income households who live paycheck to paycheck but are not able to access services because they earn incomes outside of social assistance thresholds. Community leaders mentioned that while there is an understanding that improving socioeconomic conditions is a long-term and continuous process, focusing on improving the neighborhood and built environment, healthcare access and quality, and economic stability should be prioritized. Improving the social determinants of health remained a reoccurring

theme for those most concerned with addressing the major drivers that impact individual and community health outcomes.

Given that the healthcare landscape is drastically different from when the world was coping with the COVID-19 pandemic, interviewees were asked to compare the current health of their community to three years ago. 59.1% stated that the health of the community has declined, 31.8% asserted that the health of the community has improved, and 9.1% shared that the health of the community has remained the same.

Finally, leaders were asked for feedback and suggestions on how the health and health equity of their community could be improved. Interviewees shared that they look forward to more collaborative efforts, as there is a wealth of non-profits within the community that are working on similar causes. Many leaders stated that having a collaborative platform would potentially yield greater community benefits. Others stated that healthcare services need to be brought into the community to eliminate the barrier of accessing place-based healthcare. Specific examples of actualizing this concept include providing in-home services, mobile preventative care screenings, hosting community primary care events, and establishing community maternal healthcare villages for expecting and post-partum mothers.

V. COMMUNITY RESOURCES

A. Community Resources Related to CHNA Priorities

Access to Care Resources

- Treasure Coast Community Health is a Federally Qualified Health Center (FQHC) that provides adult and child primary care services, behavioral health services, and dental services on a sliding fee scale. Services are offered at eight different locations within Fellsmere and Vero Beach.
- The Florida Department of Health in Indian River County provides family planning, HIV/AIDS care, communicable and sexually transmitted disease services, immunizations, school health, and the WIC nutrition program within Vero Beach. The Health Department also facilitates vital statistics, environmental health services, public health preparedness and response, outreach, and the County Human Services assistance program.
- United Against Poverty Indian River County provides crisis care, case management, education, food and household subsidy, employment training, and active referrals to social service providers.
- Visiting Nurse Association (VNA) provides home health and senior care. VNA provides mobile care including sports physicals for school-aged children, medical assistance for the uninsured or homeless, memory screenings for those experiencing early signs of Alzheimer's or dementia, and more.
- We Care provides free medical services and care coordination for uninsured and low-income Indian River County adults through a network of volunteer physicians and other healthcare professionals. The clinic also helps with prescriptions, transportation for medical appointments, and medical supplies.
- Whole Family Health Center is an FQHC lookalike clinic that provides adult primary care, pediatrics, behavioral health, patient navigation, chronic disease management, HIV screening, transportation, and pharmacy services.

Behavioral Health Resources

- Cleveland Clinic Indian River Hospital CCIRH's Behavioral Health Center is a 46-bed facility with an interdisciplinary team who provides inpatient services for children, adolescents, adults, and seniors. The center is also a designated Baker Act receiving facility, with trained professionals who offer 24/7 screening and assessment for behavioral health issues.
- Mental Health Association (MHA) provides crisis intervention, psychotherapy, and medication management services at the Walk-In and Counseling Center. MHA also offers information, referrals, case management, self-help groups, psycho-educational groups, and group therapy sessions. All services are offered on a sliding fee scale.
- McCabe Connections Center was launched by the Mental Health Collaborative in Indian River County. The Center is a central access point for behavioral health needs. Staff assist patients with mental health and substance use disorders through screening, referrals, making appointments, and assisting with barriers to obtaining care.

- The Mental Health Collaborative of Indian River County convenes stakeholders to find solutions for unmet needs in the mental health continuum of care. The collaborative offers guidance, administrative support, recommendations related to funding sources, technical assistance, coordination, and advocacy to its partners.
- New Horizons is the most comprehensive mental health and substance use recovery agency in the region, with nine facilities across four counties serving 14,000 children and adults annually, regardless of their ability to pay. Services include crisis services for adults and children, adult mental health and substance use services, pediatric services, and a variety of special programs including a Transitional Group Home, injection clinic, primary care clinic, in-jail services, and mental health court.
- Suncoast Mental Health Center provides therapeutic and case management treatment services. The organization is dedicated to community-based and family-centered care to help ensure positive mental health for every child, adult, and family. Services are offered in a variety of settings including but not limited to community, home-based, activity centers, and school. The agency also offers family benefits services to eligible clients in need.
- Tykes and Teens provides quality mental health services for children with over 50 in-person locations across the region, case management, telehealth services, programming for children and families, counseling, prevention programs, home visiting, and in-school and community-based programs.
- Substance Awareness Center of Indian River County offers day treatment, outpatient substance use programs, a Recovery Assistance Program, educational programs, peer support, and counseling services.

Chronic Disease Prevention & Management Resources

- Cleveland Clinic Indian River Hospital Scully-Welsh Cancer Center provides wrap-around services including cancer care coordination, diagnostic services, surgical oncology, radiation oncology, medical oncology, hematology, clinical trials, therapies, and genetic counseling.
- Cleveland Clinic Indian River Hospital Welsh Heart Center offers comprehensive cardiac care, two cardiac catheterization labs, a cardiovascular critical care unit, cardiac/pulmonary rehabilitation, heart valve clinic, and specialized cardiac ultrasound imaging.
- Cleveland Clinic Indian River Hospital provides a heart failure management clinic that offers patients tailored education, assistance with smoking cessation, medication management, and dietary consultations.
- Healthy Communities, Healthy People Chronic Disease Prevention Program is committed to implementing safe and accessible sidewalks, parks, and walking or biking trails, healthy vending and cafeteria options, policies promoting clean outdoor air, tobacco prevention and cessation education, and health education within faith-based settings.
- Visiting Nurse Association (VNA) offers wellness health clinics that provide blood pressure, blood sugar, and cholesterol screenings at no-cost throughout the county. The VNA also offers caregiver support meetings open to the public.

Maternal and Child Health Resources

- Indian River Healthy Start Coalition strengthens and enhances the local maternal and infant system of care by increasing awareness, streamlining services, and building partnerships. The coalition offers prenatal, childbirth, breastfeeding, and parenting classes and services.
- Women, Infants, and Children Nutrition Program provides food assistance, breastfeeding support, nutrition education, and referrals for health care and community services.
- Early Learning Coalition of Indian River, Martin, and Okeechobee Counties provides financial assistance for families and offers support, training, and resources to community providers who serve approximately 7,800 children daily through the School Readiness, VPK, and free Resource & Referral programs. The coalition serves children and families from all socio-economic backgrounds through a network of childcare and resource and referral programs. Along with free Resource and Referral services, the coalition also works to enhance both the quality and supply of care through recruitment and training programs.
- Boys & Girls Club of Indian River County programs for youth focus on the areas of education and career development, character and leadership development, health and life skills, sports and fitness, the arts, and community service.
- Big Brothers Big Sisters of St. Lucie, Indian River, and Okeechobee Counties provides mentoring with the support of donors and volunteers to develop positive relationships that impact the lives of young people.

Socioeconomic Concerns Resources

- United Way of Indian River County envisions a world where Indian River County is strong, with jobs that pay a livable wage, good schools, and a healthy environment. More than 24,000 of our friends and neighbors were helped by United Way of Indian River County partner agencies in 2020.
- Treasure Coast Food Bank serves Indian River, Martin, St. Lucie, and Okeechobee counties and has a network of over 300 partner agencies. The food bank assists nearly 100,000 individuals weekly and distributes 41,000,000 meals annually.
- Treasure Coast Homeless Services Council, Inc. is the Continuum of Care (CoC), a regional planning body that coordinates housing and services funding for homeless families and individuals, for Indian River, St. Lucie, and Martin counties. The CoC meets bi-monthly to discuss issues related to homelessness, homeless services in the area, gaps in services, funding sources, and it is a great networking opportunity for individuals and Agencies helping the homeless on the Treasure Coast.
- 2-1-1 Helpline Palm Beach and Treasure Coast offers information on social services, community services and resources for food assistance, medical clinics, foreclosure prevention, parenting and developmental concerns, seniors, services for teens and others.
- Senior Resource Association promotes an active, healthy, and independent lifestyle for older adults. SRA provides meals, social activities, respite, transportation, guardianship services, and information and referral services.
- Hope for Families Center provides shelter, food, essential supplies, case management, and education to families experiencing homelessness or housing insecurity.
- Camp Haven is a transitional home that provides supportive living opportunities, education, food, clothing, and vocational training to those experiencing homelessness.

VI. IMPACT EVALUATION

The CHNA process should be viewed as a three-year cycle to evaluate the impact of actions taken to address priority areas. This step affirms organizations' focus and target efforts during the next CHNA cycle. The top health priorities for the Indian River Hospital Community from the 2021 CHNA were:

- COVID- 19
- Health Equity & Social Determinants of Health
- Chronic Disease Prevention & Management
- Behavioral Health
- Maternal & Child Health
- Access to Care
- Medical Research and Health Professions Education

Implementation strategies for these health topics shifted in response to the COVID-19 pandemic. Innovative strategies were adopted to continue building capacity for addressing the community health needs.

A. Actions Taken Since Previous CHNA

Indian River Hospital's previous Implementation Strategy Report (ISR) outlined a plan for addressing the following priorities identified in the 2021 CHNA: COVID-19, Health Equity & Social Determinants of Health, Chronic Disease Prevention & Management, Behavioral Health, Maternal & Child Health, Access to Care, Medical Research and Health Professions Education

Caring for our community is essential, and part of that is sharing accurate, up-to-date information on health-related topics with our community. Many of our hospital services were paused or deferred as we navigated the COVID-19 landscape. As we continue to serve our communities, we are committed to addressing the needs identified in our ISR.

Cleveland Clinic Indian River Hospital uses evidence-based approaches in the delivery of healthcare services and educational outreach with the aim of achieving healthy outcomes for the community it serves. It undertakes periodic monitoring of its programs to measure and determine their effectiveness and ensure that best practices continue to be applied. Given that the process for evaluating the impact of various services and programs on population health is longitudinal by nature, significant changes in health outcomes may not manifest for several community health needs assessment cycles. We continue to evaluate the cumulative impact.

The narrative below describes the strategies, modifications made to the action plans, and highlighted impacts for each health priority area.

COVID-19

- a. Continued to collaborate with local public health entities, long-term care facilities, schools, emergency responders, and community-based organizations to establish COVID-19 testing stations at CCIRH facilities, and process COVID-19 tests.

- b. Continued to provide clinical expertise and community health education related to COVID-19 prevention, testing, infection control, vaccination, and treatment through collaboration with local communication outlets, long-term care facilities, and community-based organizations.
- c. Facilitated vaccination clinics and assisted partner organizations in the storage, transport, and provision of COVID-19 vaccines.

Access to Care

- a. Patient Financial Advocates and Scully-Welsh Cancer Center patient navigators assisted patients in evaluating eligibility for financial assistance or public health insurance programs.
- b. In 2022 Cleveland Clinic health system provided over \$212.2 million in financial assistance to its communities in Ohio, Florida, and Nevada.
- c. Utilized medically secure online and mobile platforms, connected patients with Cleveland Clinic providers for telehealth and virtual visits.
- d. In 2023, Cleveland Clinic provided 917,534 virtual visits.
- e. Promoted 211 Palm Beach/Treasure Coast and Mental Health Collaborative local resource directories.

Health Equity & Social Determinants of Health

- a. Provided diversity, equity, and inclusion training for Cleveland Clinic caregivers including training related to allyship, unconscious bias, and structural racism.
- b. Partnered with community-based organizations to improve equitable access to healthy foods.
- c. Partnered with United Against Poverty to sponsor Thanksgiving dinners for 350 participating families.

Chronic Disease Prevention & Management

- a. Implemented health promotion, health education, support groups, and outreach events related to heart disease and stroke, cancer, respiratory disease, and obesity, therefore reducing behavioral risk factors. Continued to partner with the American Cancer Society, American Lung Association, Indian River School District, and local fire & rescue.
- b. Collaborated with Treasure Coast Community Health by offering mammograms at no charge to women through the Women's Health Fund. A total of 116 mammograms free of charge were provided through this program.

Behavioral Health

- a. Through provider partnerships and participation in the Mental Health Collaborative and the Baker Act Task Force, continued to build a continuum of care and implement health promotion, health education, and outreach events.
- b. Provided Mental Health First Aid (MHFA) training. Hosted 29 classes for caregivers and community members.

Maternal & Child Health

- a. Participated in coalitions and task forces to align programs, share best practices, and coordinate a systemic approach to improving quality of care and birth outcomes. Partnered with the Florida Perinatal Quality Collaborative.
- b. Continued to partner with local fire rescue services, Safe Kids, and Indian River County Healthy Start Coalition.
- c. In partnership with the Indian River County Healthy Start Coalition, continued to develop a community doula program.

Medical Research and Health Professions Education

- a. Through the Florida Research and Innovation Center, advanced innovative translational research focused on the areas of cancer, immunobiology, and infectious diseases, including COVID-19. In 2022, Cleveland Clinic provided \$128.9 million in medical research.
- b. Cleveland Clinic provided a wide range of high-quality medical education, including accredited training programs for residents, physicians, nurses, and allied health professionals. By educating medical professionals, we ensure that the public receives the highest level of medical care and will have access to highly trained health professionals in the future. For 2022, Cleveland Clinic's community benefit in support of education was \$ 338.2 million.

B. Comments Received on Previous CHNA

Community Health Needs Assessment reports from 2021 were published on the Indian River Hospital website. No community feedback has been received as of the drafting of this report. For more information regarding Cleveland Clinic Community Health Needs Assessments and Implementation Strategy reports, please visit www.clevelandclinic.org/CHNAreports or contact CHNA@ccf.org.

C. Request for Public Comment

Comments and feedback about this report are welcomed. Please contact: chna@clevelandclinic.org

VII. APPENDICES

A. APPENDIX - References

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B. APPENDIX - Carnahan Group Qualifications

Carnahan Group is an innovative, leading healthcare services firm that delivers tailored solutions to address our clients' ever-evolving strategic, valuation, and compliance challenges. With over two decades of experience, Carnahan has established partnerships with a diverse range of organizations, including large healthcare systems, academic medical centers, and community hospitals.

Carnahan Group's Strategic Services utilizes the latest technologies – in parallel with extensive expertise in public health, geographic information systems (GIS), and data visualization – to deliver best-in-class consulting services, including Community Health Needs Assessments (CHNAs), implementation strategies, and community benefit consulting.

As experts in community benefit reporting, Carnahan Group's consultants take great care in documenting the adherence to the Treasury and IRS requirements in addition to state-specific requirements for the CHNA and Implementation Strategy. Moreover, the community benefit team continuously refines its methodology to stay ahead of the curve and adapt to emerging community health needs. As experts in community benefit reporting, our Strategic consultants take great care in documenting compliance with Treasury and IRS requirements and state-specific requirements for the CHNA and Implementation Strategy.

For more information about Carnahan Group or to schedule a discovery call, please visit <http://carnahangroup.com> or call 813.289.2588.

C. APPENDIX - Organizations Providing Input

The following individuals and organizations provided feedback during community leader interviews:

Type of Organization	Organization
Clinical provider	Visiting Nurse Association of the Treasure Coast Whole Family Health Center
Local government	Indian River County Community Services Indian River County Hospital District
Non-profit/community-based organization	Boys & Girls Club of Indian River County Hope For Families Center Indian River County Healthy Start Coalition Veterans Council of Indian River County
Public Health Expert	Florida Department of Health in Indian River County
Represents underserved, low-income, minority, or chronic disease population	Indian River County NAACP Mental Health Collaborative of Indian River County Treasure Coast Homeless Services Council, Inc. United Against Poverty Indian River County United Way of Indian River County

Figure 13 - Organizations Providing Input via Community Leader Interviews and Supplemental Interviews
CLEVELAND CLINIC INDIAN RIVER HOSPITAL 2024 CHNA

D. APPENDIX - Interview Question Guide and Data

Community Leader Interview Question Guide

The following questions were used as the basis for discussion during key stakeholder interviews with community leaders:

1. What are the most significant overarching health concerns in your community?
2. What community health problems are having the most significant impacts on the need for hospital healthcare services?
3. What barriers inhibit optimal health for individuals in your community?
4. What physical or environmental risk factors exist in the community that prevent optimal health?
5. Which health disparities appear most prevalent in your community?
6. What behavioral health (mental health and substance use) issues are concerns in the community?
7. What could be done to improve the health and health equity of your community?
8. If you could create any type(s) of programs to improve the health and health equity of community members, what would it/they be?
9. Do you see any emerging health needs or are there additional health concerns we have not covered?
10. Compared to three years ago, has the health of your community improved, declined, or stayed the same?

Interview Responses - Significant Overarching Health Concerns

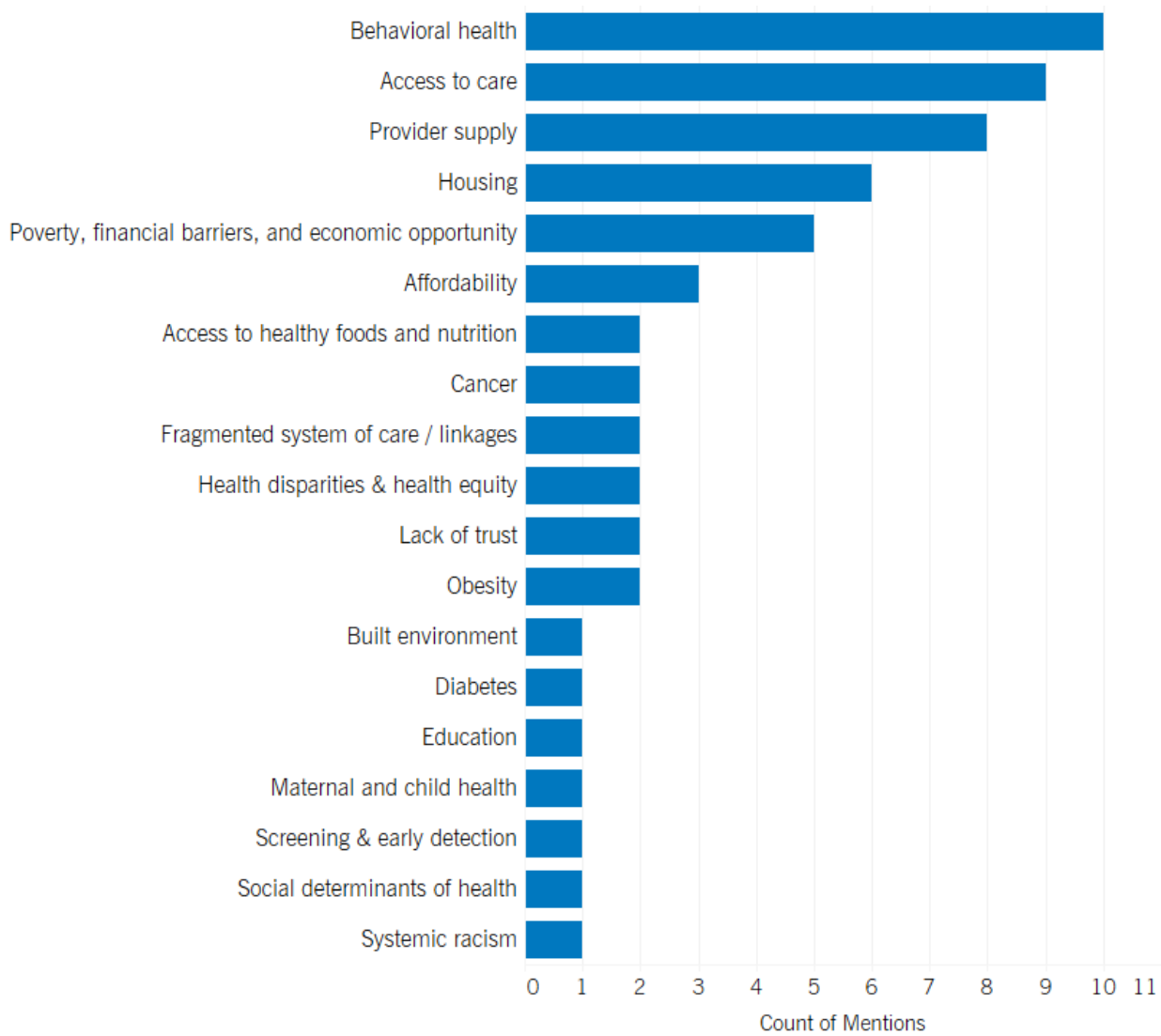


Figure 14 - Overarching Health Concerns Mentioned by Community Leaders

Interview Responses - Barriers

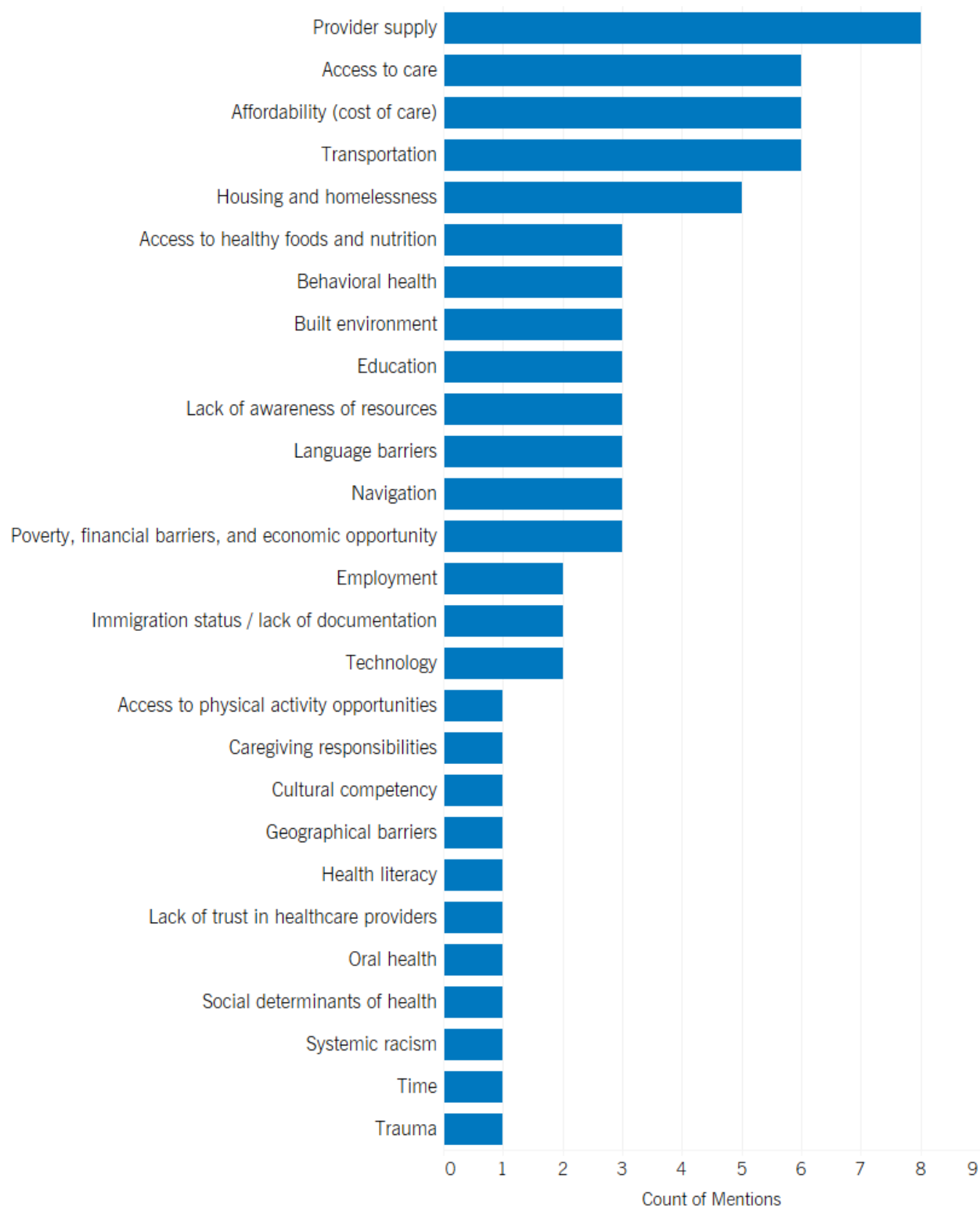


Figure 15 - Barriers Mentioned by Community Leaders

Interview Responses - Issues Impacting Need for Hospital Services

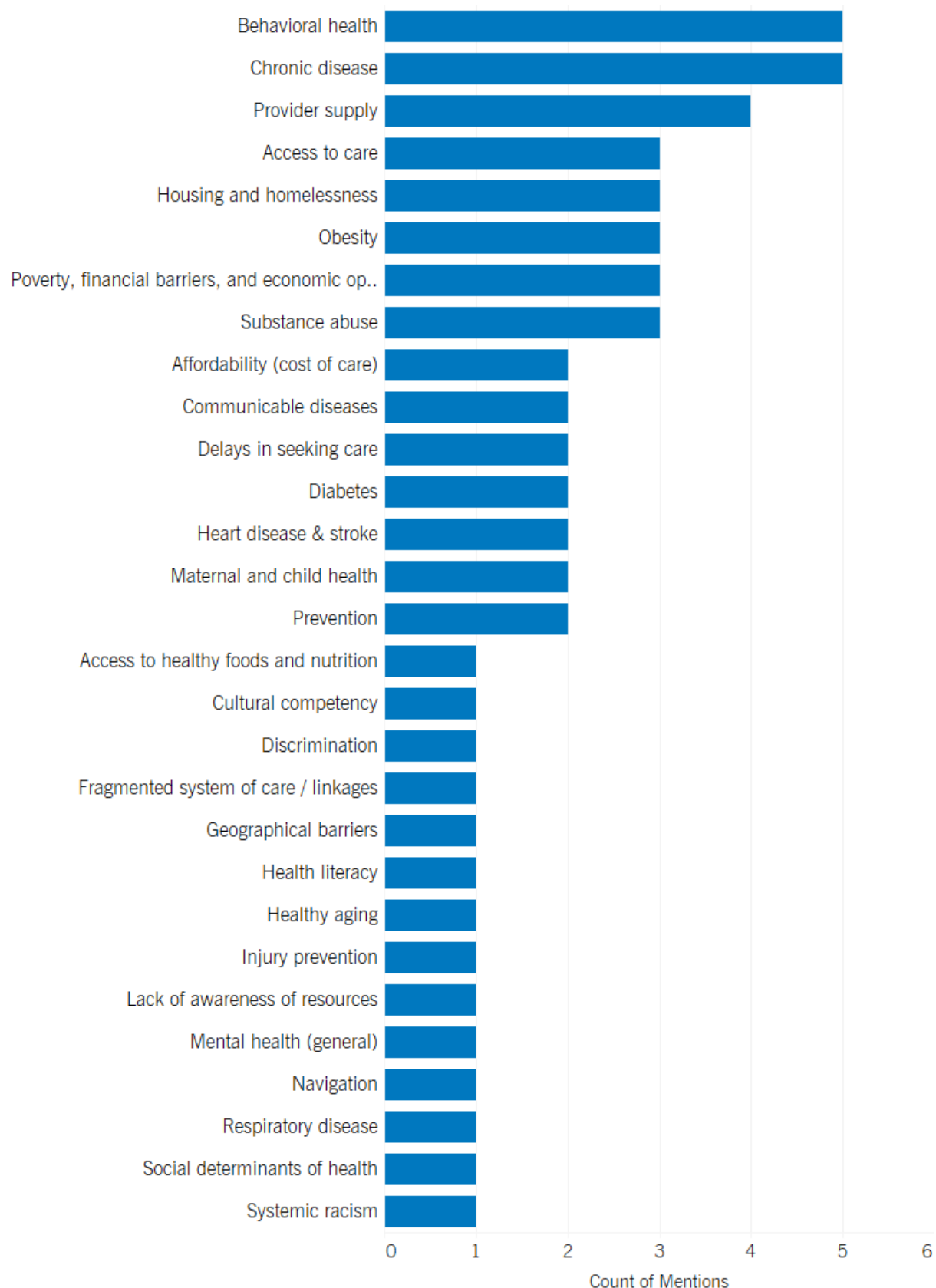


Figure 16 – Issues Impacting the Need for Hospital-Based Services Mentioned by Community Leaders
CLEVELAND CLINIC INDIAN RIVER HOSPITAL 2024 CHNA

Interview Responses - Health Disparities

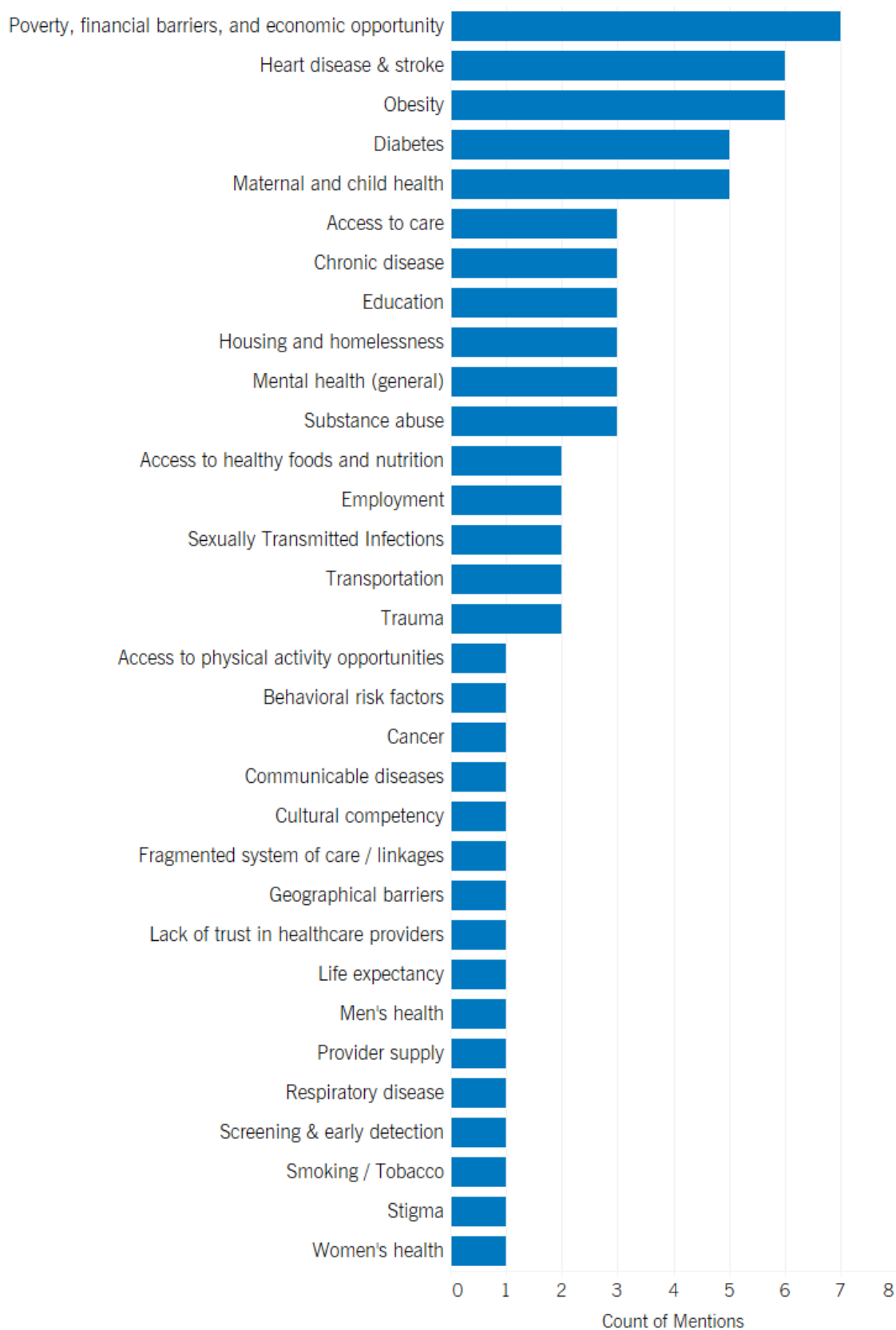


Figure 17 – Health Disparities Mentioned by Community Leaders

Interview Responses - Environmental Risk Factors

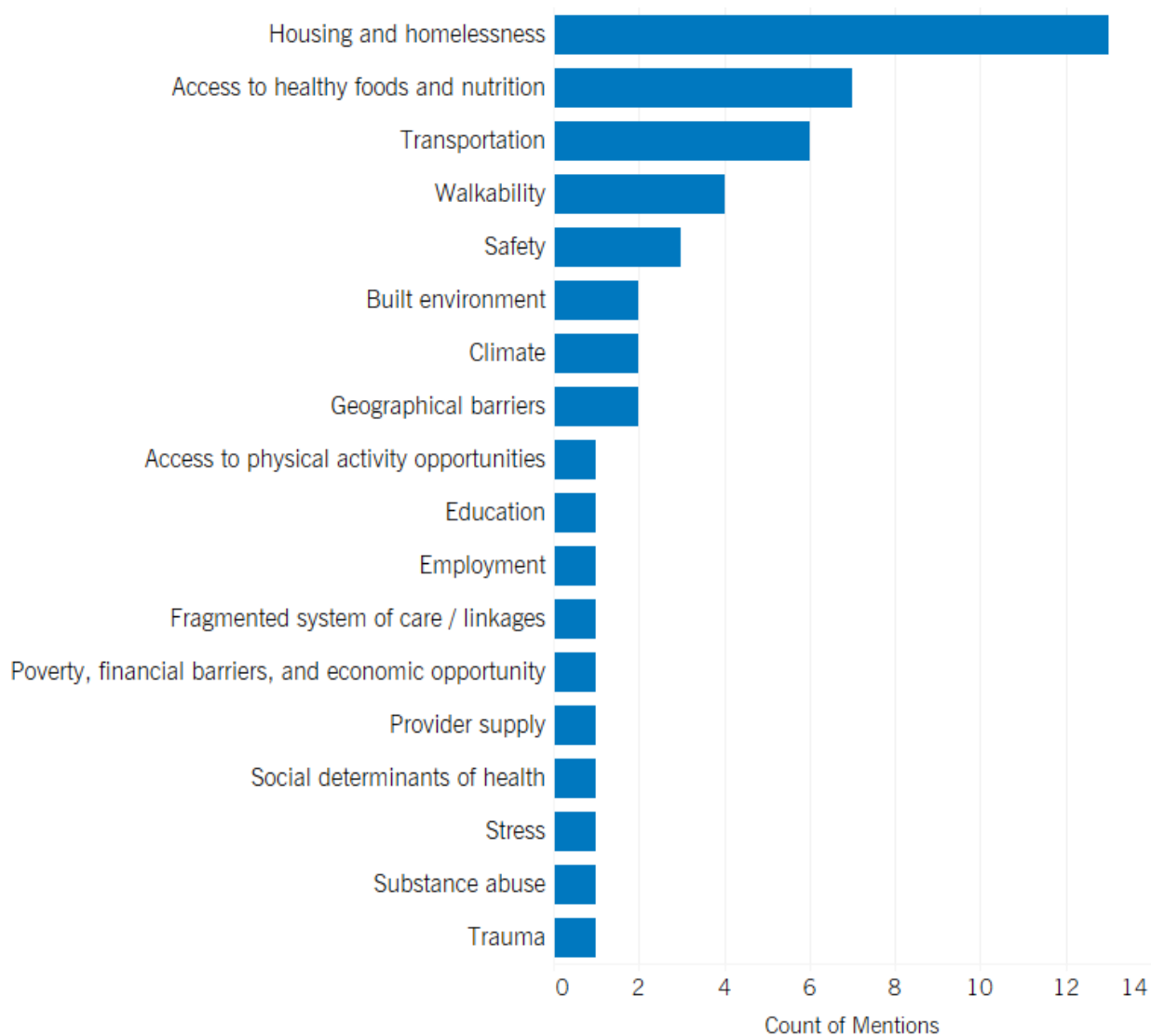


Figure 18 – Environmental/Physical Environment Risk Factors Mentioned by Community Leaders

Interview Responses - Behavioral Health Issues

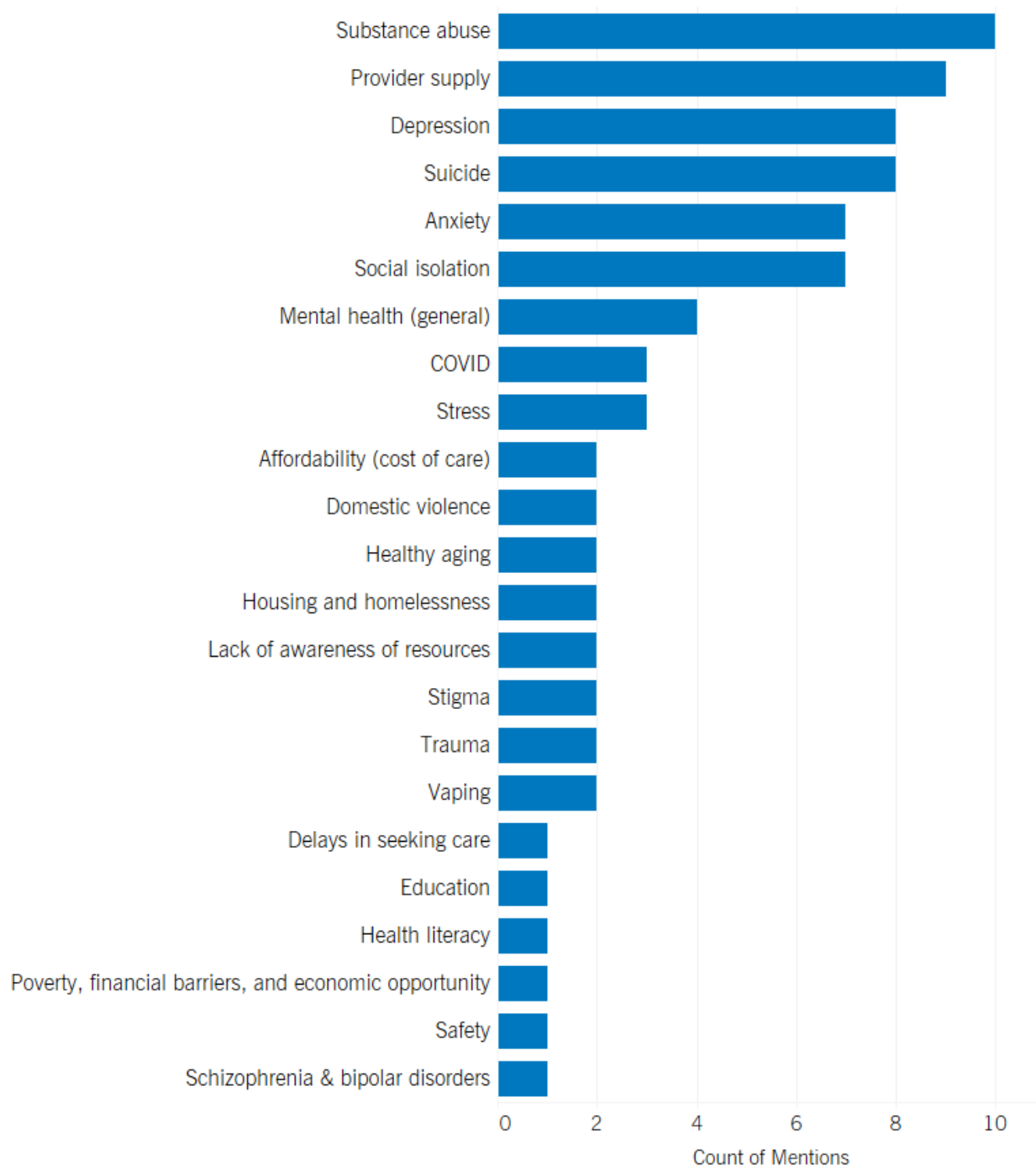


Figure 19 – Behavioral Health Issues Mentioned by Community Leaders

Interview Responses - Emerging Issues

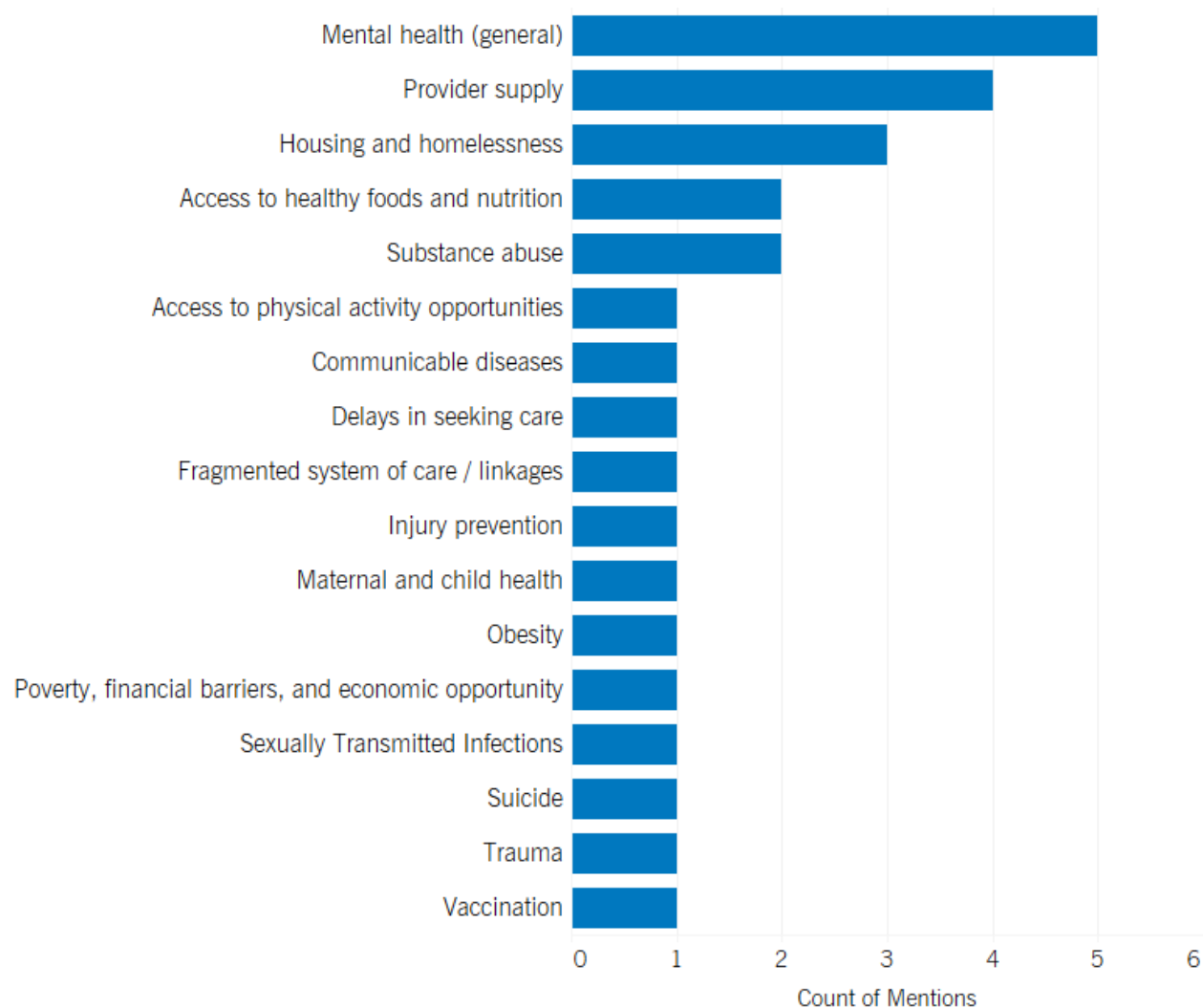


Figure 20 – Emerging Issues Mentioned by Community Leaders

E. APPENDIX - Detailed Secondary Data

Access to Care

Health Professional Shortage Areas

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 areas are characterized as Health Professional Shortage Areas (HPSAs) within the community:

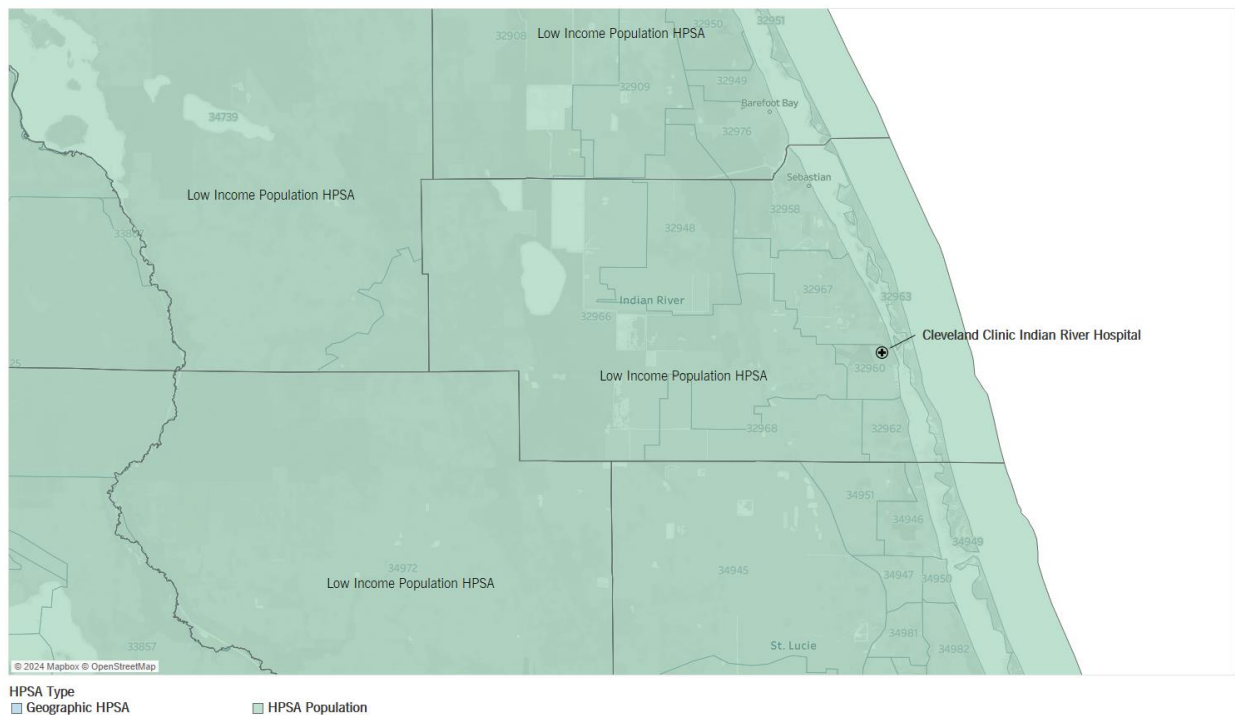


Figure 21 – Health Professional Shortage Area, Source: Health Resources and Services Administration

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. Designations are based on the Index of Medical Underservice (IMU).

The IMU is calculated based on four criteria:

- the population to provider ratio
- the percent of the population below the federal poverty level
- the percent of the population over age 65
- the infant mortality rate

IMU can range from 0 to 100, where zero represents the completely underserved. Areas or populations with IMUs of 62.0 or less qualify for designation as an MUA/P.

The following map describes the MUA within the community:

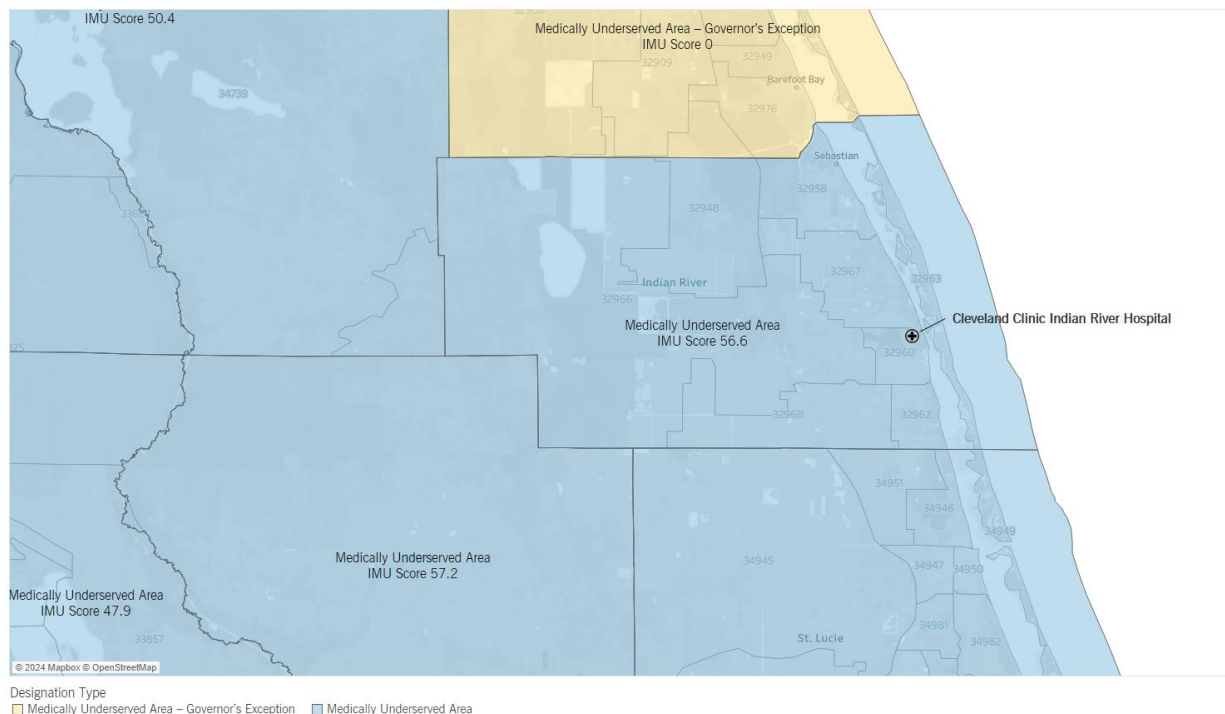


Figure 22 - Medically Underserved Areas, Source: Health Resources and Services Administration

Provider Supply

Residents of Indian River County had worse access to primary care and mental health providers than the Florida averages, according to the ratios of providers to population.

	Indian River County	Florida	United States
Ratio of primary care physicians to population	1590:1	1370:1	1330:1
Ratio of mental health providers to population	600:1	490:1	320:1

Figure 23 - Provider to population ratios, Source: County Health Rankings 2024

Dental Provider Supply

Florida Health Charts publishes information related to dental care and providers. The dentist and dental hygienist supply per 100,000 population was higher (more supply) in Indian River County than in the state in 2022.

	Indian River County	Florida
Total licensed Florida dental hygienists, 2022	73.6	62.2
Total licensed Florida dentists, 2022	65.1	59.0

Figure 24 - Dental providers per 100,000 population, Source: Florida Health Charts Oral Health Profile. Provider supply is shown per 100,000 population.

Access to Behavioral Health Care

Indian River County had fewer counselors, psychologists, clinical social workers, and total behavioral health professionals per population compared to the state benchmark values in 2021. However, the supply of adult and child/adolescent psychiatric beds per population was greater within Indian River County than in Florida.

	Indian River County	Florida
Licensed mental health counselors	38.1	60.3
Licensed psychologists	21.5	23.4
Licensed clinical social workers	42.4	52.6
Total behavioral/mental health professionals	86.0	123.5
Adult psychiatric beds	20.9	20.1
Child and adolescent psychiatric beds	7.4	3.2

Figure 25 – Access to behavioral health services, Source: Florida Health Charts, 2021, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Well Visits

Indian River County adults were less likely to have a medical check-up during the prior year when compared to the state average for 2019.

	Indian River County	Florida
Adults with medical check up past year, 2019	77.3%	78.8%

Figure 26 - Adults with a medical check-up, Source: Florida Health Charts

Health Insurance Coverage

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, Indian River County residents were more likely to have health insurance than all Florida residents. A greater portion of individuals in Indian River County had public health insurance than the state and national benchmarks.

	Indian River County	Florida	United States
Private insurance coverage	62.4%	63.3%	67.6%
Public insurance coverage	48.1%	36.8%	35.9%
No health insurance coverage	11.1%	12.3%	8.9%
No health insurance coverage (children < 19 years)	7.0%	7.5%	5.3%

Figure 27 - Health insurance coverage, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Uninsured Population

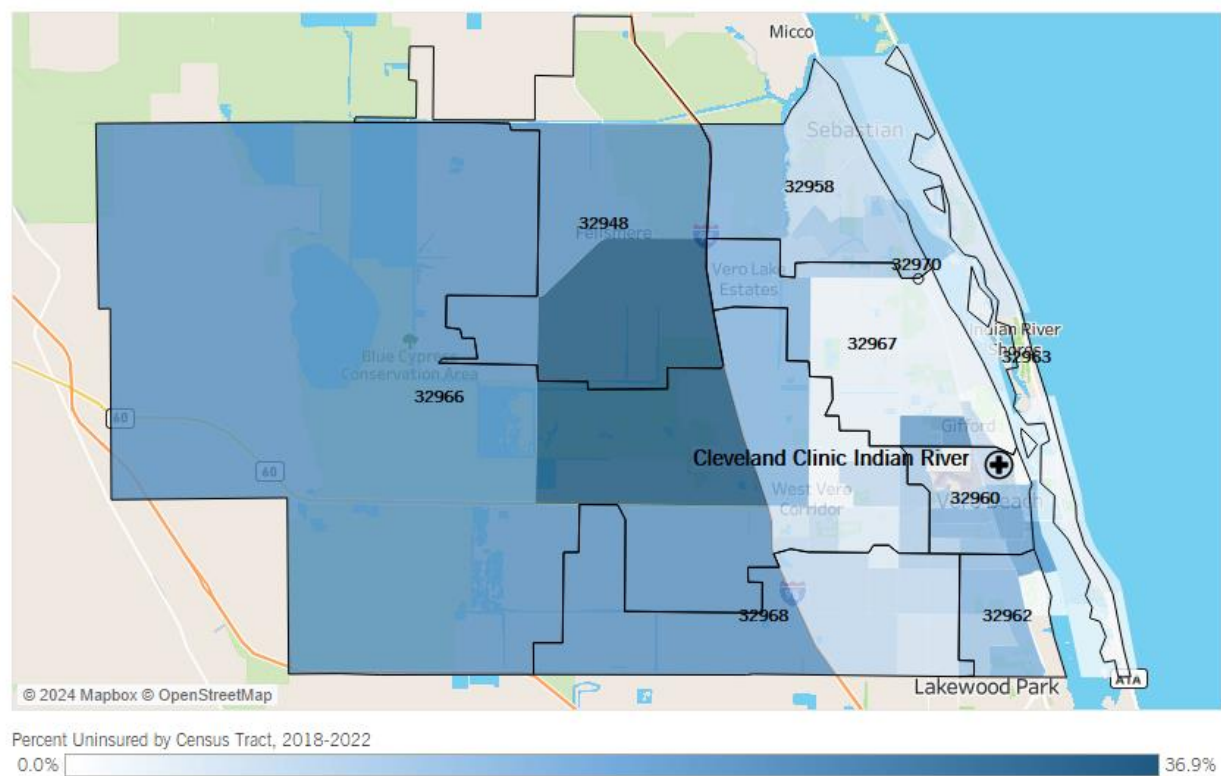


Figure 28 - Uninsured population by census tract, Source: U.S. Census Bureau ACS 2018-2022

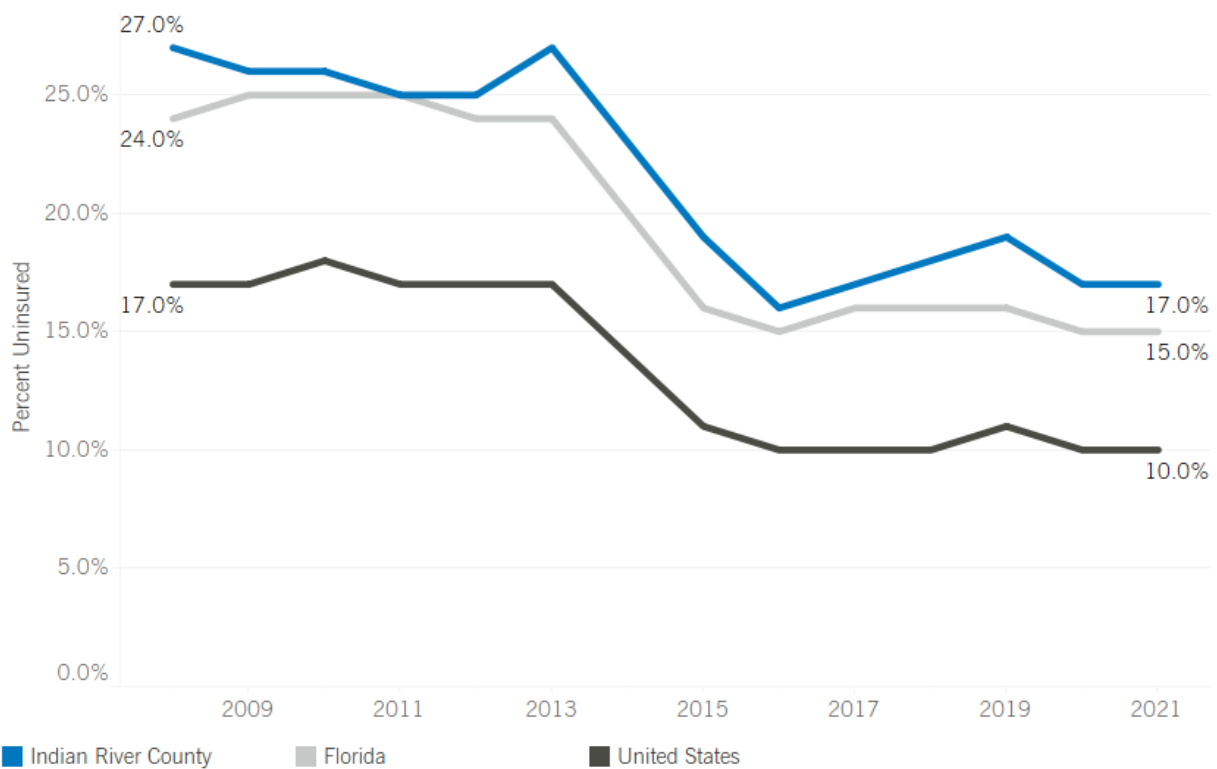


Figure 29 - Uninsured population over time, Source: County Health Rankings 2024

Economic Stability

Employment, Income, and Poverty

The 2023 annual unemployment rate for Indian River County was greater than Florida's rate. According to the 2018-2022 U.S. Census Bureau American Community Survey estimates, the median household income in Indian River County was lower than the Florida and United States medians. Asian, Black, and Hispanic individuals in the defined community had lower income levels than the state benchmark for all races/ethnicities.

Poverty thresholds are determined by family size, the number of children, and the age of the head of the household. A family's income before taxes is compared to the annual poverty threshold. As of January 27, 2024, the federal poverty threshold for a family of four was \$31,200. The Census Bureau estimates indicate that Indian River County residents were slightly less likely to live in poverty compared to Florida residents. Within Indian River County, income inequality, or the gap between the highest- and lowest-earning households, was equal to the state ratio.



Health Equity Highlight

According to Healthy People 2030, nearly one in ten individuals live in poverty in the United States. Those with steady employment are less likely to live in poverty and are more likely to be healthy. Economic stability represents a key domain within the HP2030 SDOH framework.

ALICE (asset-limited, income-constrained, employed) households are those earning above the federal poverty level but still facing difficulties affording basic expenses. The portion of households that fall within this category was slightly lower within Indian River County than in the state of Florida, but still represented nearly one-third of households in the community. County Health Rankings provides data related to living wage, which represents the minimum income necessary to meet basic needs for an adequate standard of living without requiring public assistance. The measure reflects the wage for a household of three with one adult working full-time and two children. The living wage in Indian River County was lower than the state average.

	Indian River County	Florida	United States
2023 unemployment rate ¹	3.5%	2.9%	3.6%
Median household income ²	\$ 67,543	\$ 67,917	\$ 75,149
Living wage ³	\$ 41.40	\$ 45.36	N/A
ALICE households ⁴	32.0%	33.0%	29.0%
Individuals below poverty level ²	11.5%	12.7%	11.5%
Children below poverty level ³	17.0%	17.0%	16.0%
Income inequality ratio ³	4.6	4.6	4.9

Figure 30 - Socioeconomic indicators, Source: 1) Bureau of Labor Statistics, 2) U.S. Census Bureau ACS 2018-2022, 3) County Health Rankings, income inequality represented as a ratio of household income at the 80th percentile to that of the 20th percentile, 4) United Way ALICE Report, shading indicates the county measure was greater than or worse than the state benchmark value

Median Household Income by Census Tract

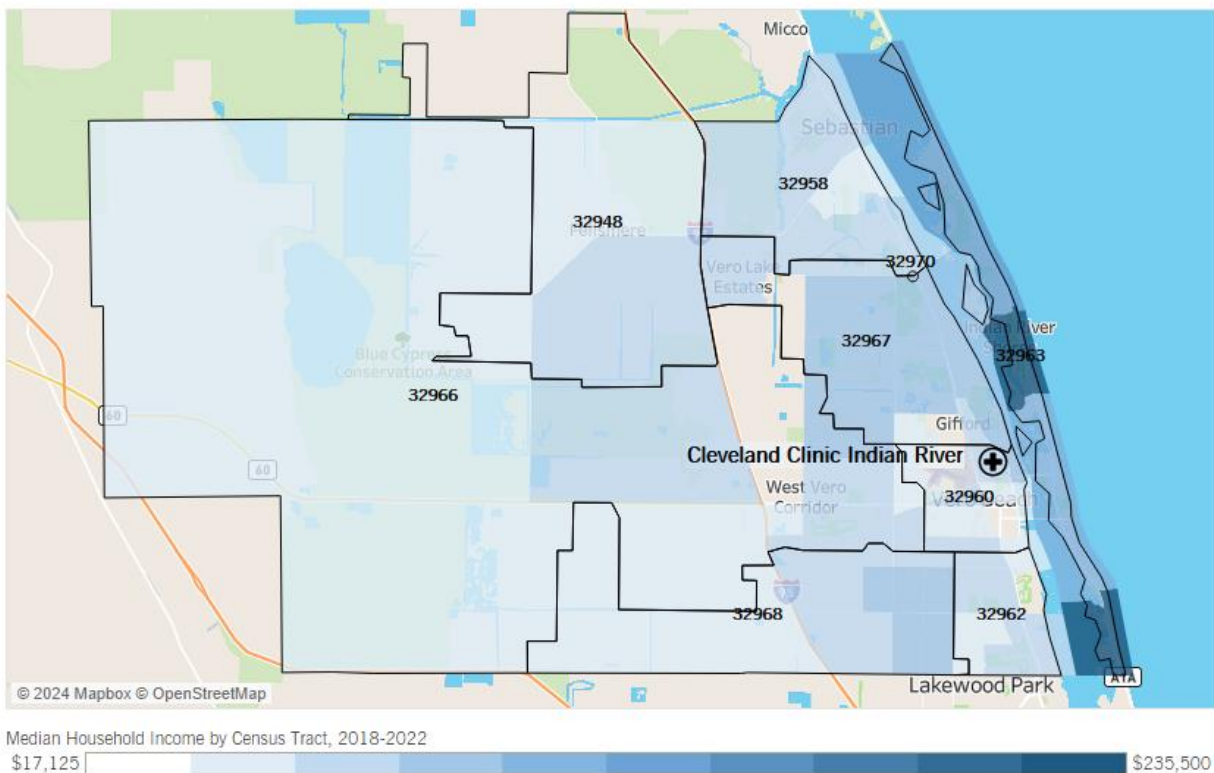


Figure 31 - Map of median household income by census tract, Source: U.S. Census Bureau ACS 2018-2022

Median Household Income by Race/Ethnicity

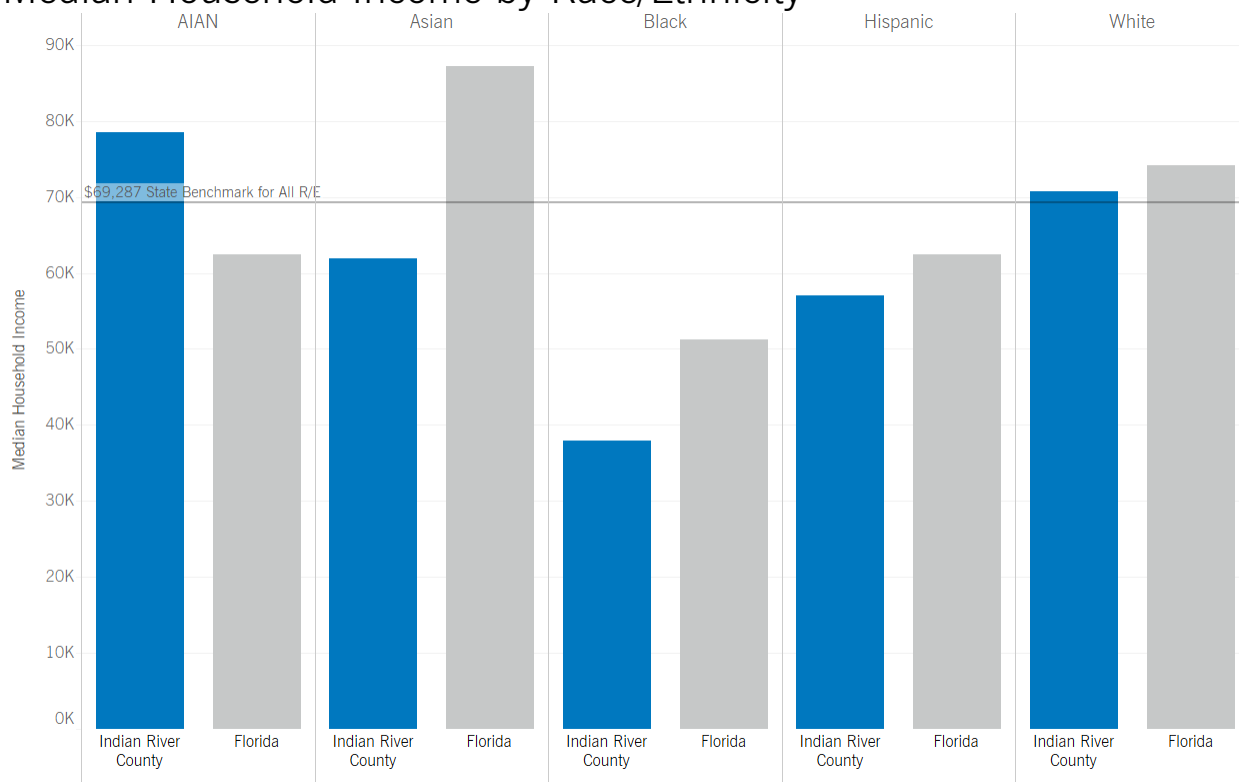


Figure 32 - Median household income by race/ethnicity 2018-2022, Source: County Health Rankings 2024

Children Below Federal Poverty Level Over Time

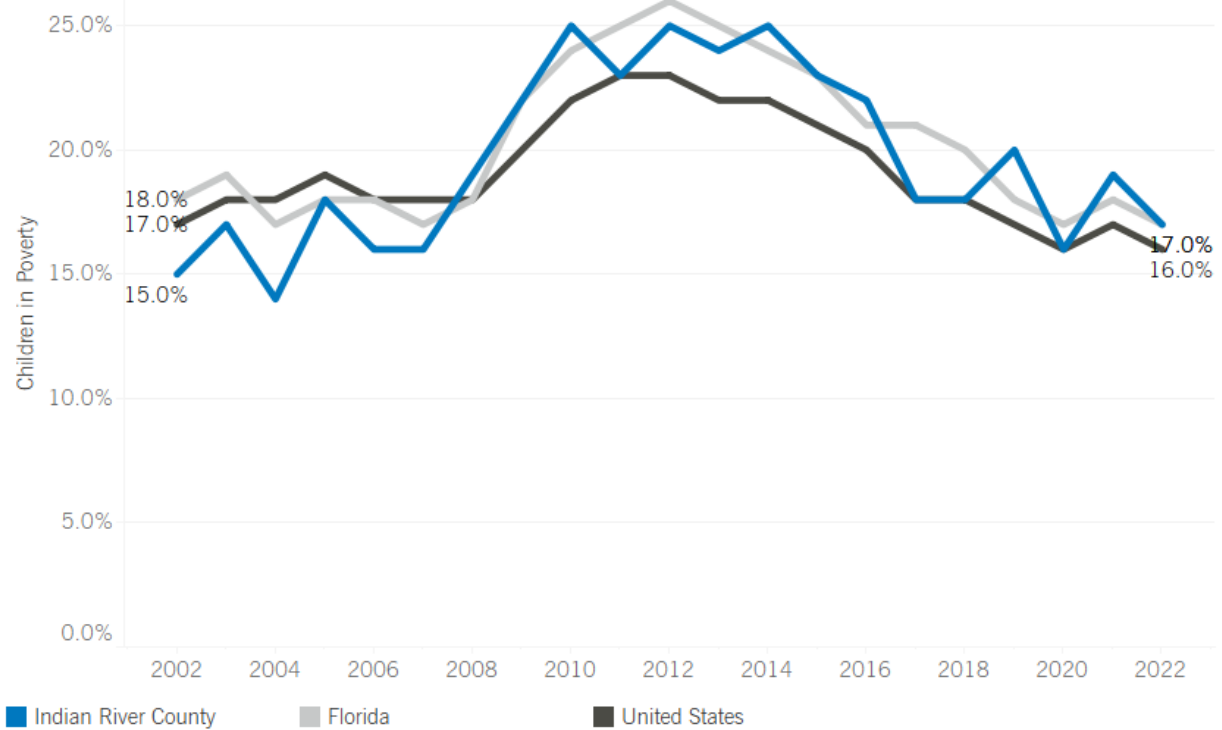


Figure 33 – Children below federal poverty level over time, Source: County Health Rankings 2024

Population Below Federal Poverty Level

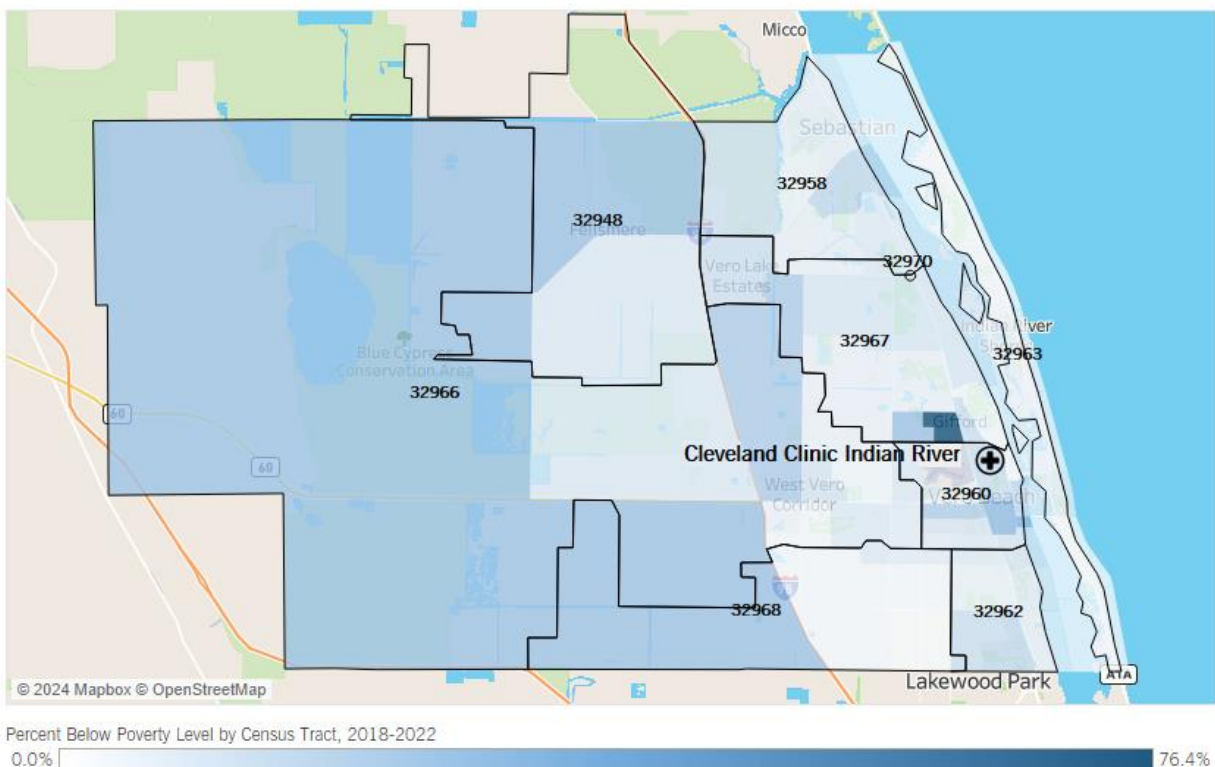


Figure 34 – Population below the federal poverty level by census tract, Source: U.S. Census Bureau ACS 2018-2022

Unemployment Over Time

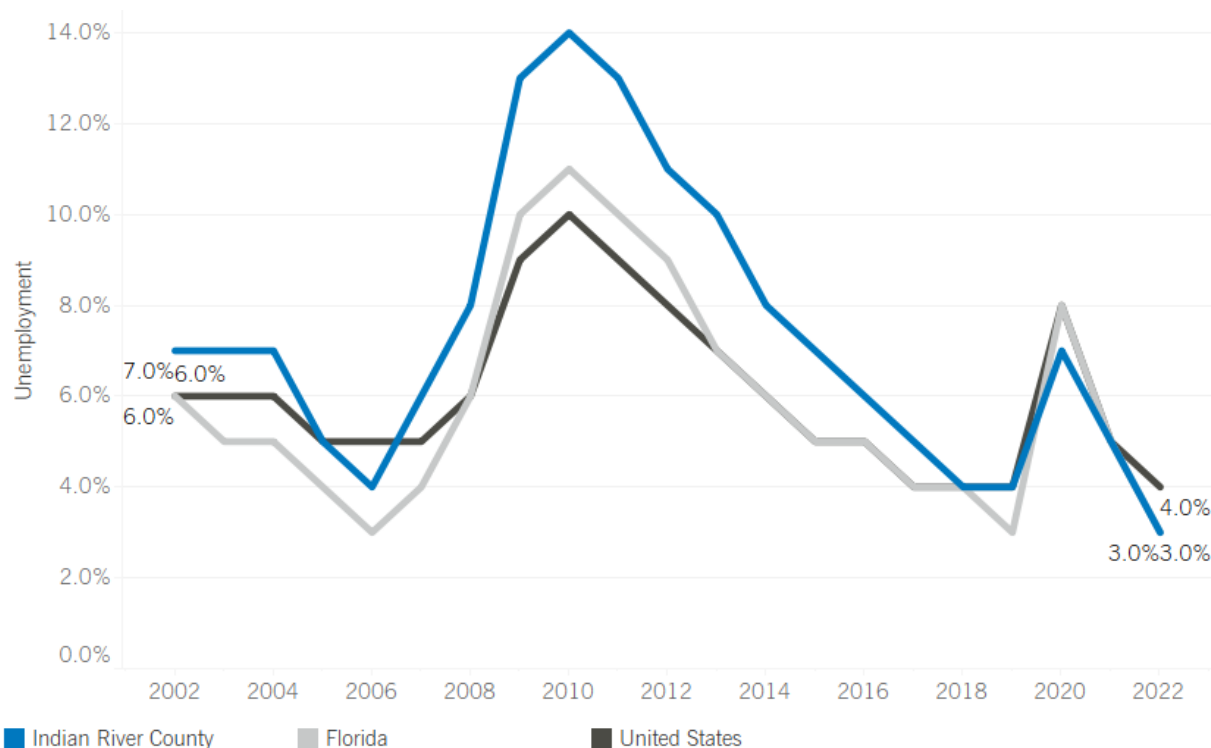


Figure 35 – Unemployment over time, Source: County Health Rankings 2024

Housing

Home Ownership and Housing Characteristics

The U.S. Census Bureau's 2018-2022 American Community Survey (ACS) estimates indicated that Indian River County had a significantly higher rate of homeownership than the state and national benchmarks. Of Indian River County residents, 87% occupied the same residences as one year ago, slightly greater than the state average. The county had a smaller portion of adults over age 65 living alone than the Florida average.

County Health Rankings publishes estimates of severe housing cost burden and segregation utilizing ACS data. Overall, Indian River County had a smaller proportion of individuals with a severe housing cost burden when compared to Florida. From 2018-2022, the racial segregation index for Black/white households in Indian River County was greater than the Florida indicator. However, school segregation in Indian River County was lower than the state and national averages.

	Indian River County	Florida	United States
Homeownership	80.2%	66.9%	64.8%
Same residence as 1 year ago	87.0%	85.6%	86.9%
Percent of adults over age 65 who live alone	20.8%	24.3%	26.6%
Severe housing cost burden	14.0%	19.0%	17.0%
Residential segregation - Black/white	61.0	57.0	61.0
School segregation	0.07	0.22	0.24

Figure 36 - Homeownership and housing characteristics, Source: U.S. Census Bureau ACS 2018-2022, County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Rent

According to 2022 estimates by the U.S. Census Bureau, the median monthly rental cost within Indian River County was lower than the state and national averages. Indian River County's median rent rose nearly 35% from 2018 to 2022. A smaller portion of residents in Indian River County were renters compared to Florida and the United States.

	Indian River County	Florida	United States
Median rent - 2022	\$ 1,261	\$ 1,525	\$ 1,300
Renter occupied housing units	19.8%	35.2%	33.1%

Figure 37 – Renters and rent costs, Source: U.S. Census Bureau ACS 2018-2022, median rent reflects one-year estimates, shading indicates the county measure was greater than or worse than the state benchmark value.

Rental Costs Over Time

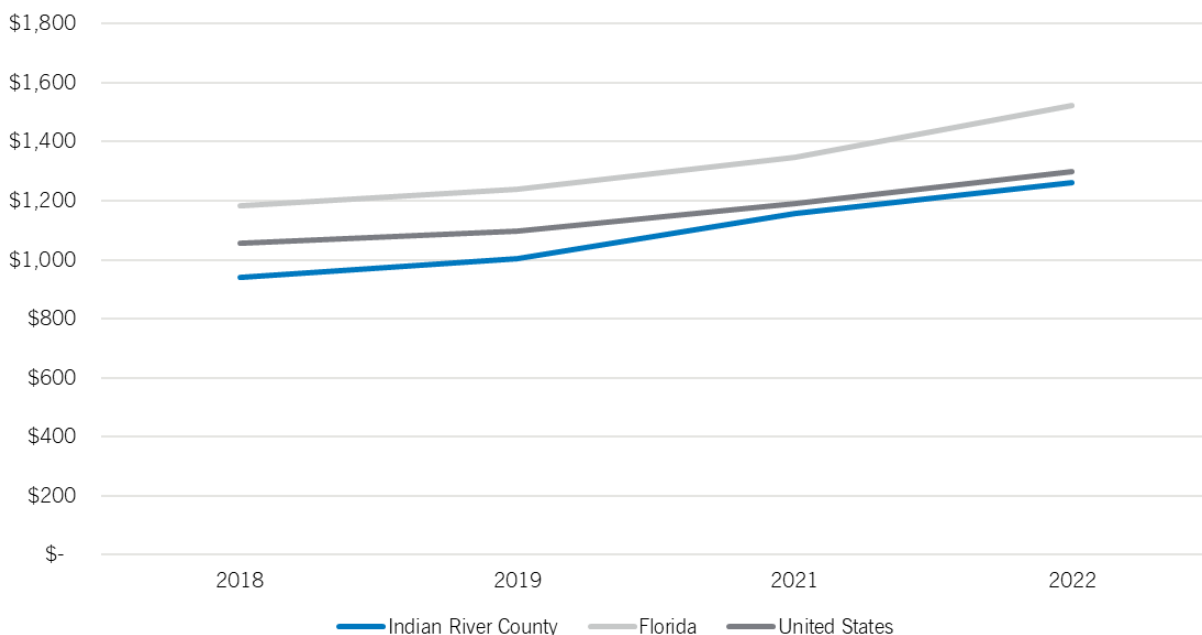


Figure 38 - Median rent over time, Source: U.S. Census Bureau ACS

Housing Cost Burden

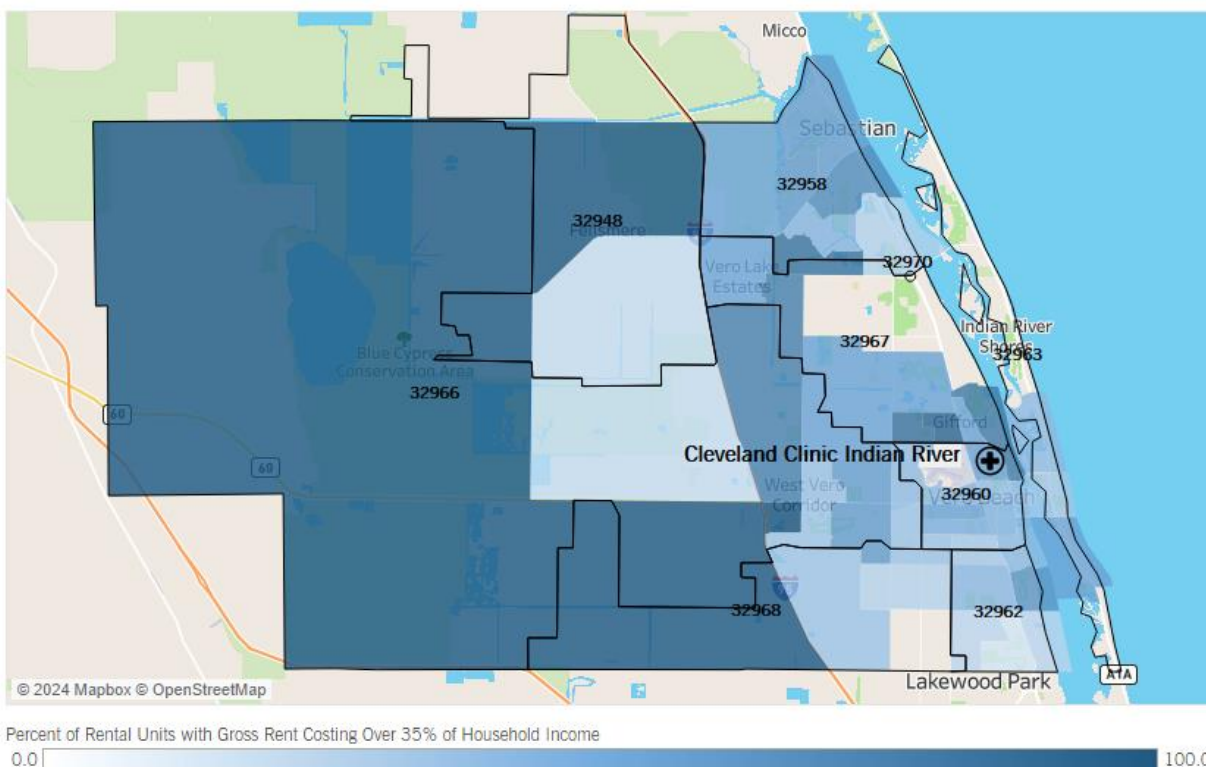


Figure 39 - Percent of rental units with gross rent greater than 35% of household income by census tract, Source: U.S. Census Bureau ACS

Homelessness

The Florida Department of Children and Families provides a Point-in-Time (PIT) count of sheltered and unsheltered homeless persons on a single night. The 2023 count for Indian River County included 341 individuals.

Indian River County	
Total homeless individuals January, 2023	341

Figure 40 - Point-in-time homelessness count, Source: Florida Health Charts, Florida Department of Children and Families

Food Insecurity

Food Insecurity and Access to Healthy Foods

The food environment index reported by County Health Rankings is scored from 1 (worst) to 10 (best). In 2021, Indian River County's index was higher than the state value but lower than the national benchmark. A greater portion of Indian River County residents experienced limited access to healthy foods than those in Florida and the United States in 2019. According to

County Health Rankings, the 2021 food insecurity rate in Indian River County was slightly lower than the state and national averages.

Feeding America reported that when safety net programs expanded during the economic downturn caused by the COVID-19 pandemic, food insecurity levels were stable or declined. However, as the program expansions ended and food prices simultaneously rose, food insecurity levels increased significantly.

	Indian River County	Florida	United States
Food environment index	7.4	7.2	7.7
Limited access to healthy foods	13.0%	7.6%	6.1%
Food insecurity	10.0%	10.6%	10.4%

Figure 41 - Food environment and food insecurity, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.



Health Equity Highlight

Lack of access to affordable healthy foods has been linked to an increased risk of being diagnosed with diet-related chronic illness, including certain cancers, diabetes, and cardiovascular disease. Racial minorities and people of lower socioeconomic status are more likely to live in environments with lower food indices and bear the burden of diet-related illnesses at greater proportions.

SNAP Benefits and Average Meal Costs

According to Map the Meal Gap, one in eight people, and one in five children in Florida face hunger. The Supplemental Nutrition Assistance Program (SNAP) provides temporary help for individuals to buy food. It is estimated that 38.3% of Florida households receiving SNAP benefits have children. Over a third of individuals who were food insecure did not meet the criteria for receiving SNAP benefits in 2022. The average meal cost in Indian River County was greater than the average meal cost in Florida and the United States in 2022. Across all food-insecure individuals within the county, the annual food budget shortfall is estimated at over \$17.6 million.

	Indian River County	Florida	United States
Percent of food insecure above (outside) SNAP threshold	39%	46%	*
Percent of food insecure below (inside) SNAP threshold	61%	54%	*
Average meal cost	\$ 4.56	\$ 4.13	\$ 3.99

Figure 42 - Food insecure SNAP benefits and average meal cost, Source: Feeding America Map the Meal Gap 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Education

The U.S. Census Bureau 2018-2022 estimates indicate that Indian River County had a greater portion of individuals over age 25 with some college or a college degree compared to the Florida benchmarks.

Highest Level of Education Completed

	Indian River County	Florida	United States
Less than 9th grade	3.0%	4.4%	4.7%
9th to 12th grade, no diploma	5.6%	6.4%	6.1%
High school degree or equivalent	26.7%	27.7%	26.4%
Some college, no degree	21.2%	19.2%	19.7%
Associate's degree	10.8%	10.1%	8.7%
Bachelor's degree	19.9%	20.2%	20.9%
Graduate or professional degree	12.8%	12.1%	13.4%

Figure 43 - Highest Level of Education Completed by Persons 25 Years and Older, Source: U.S. Census Bureau ACS 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

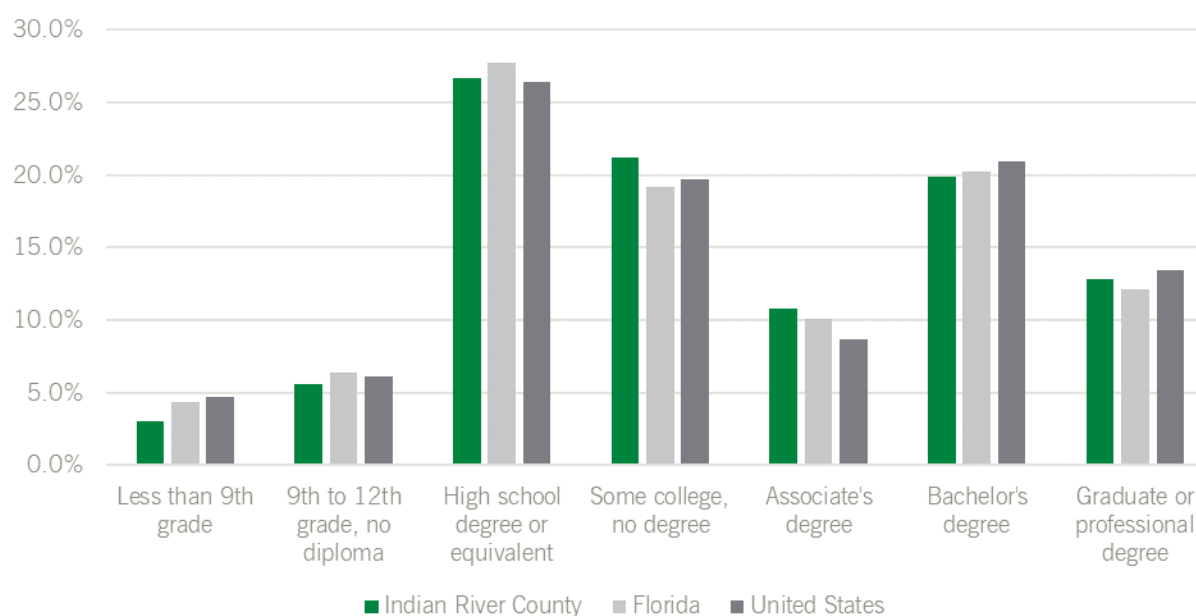


Figure 44 - Highest level of education completed by persons 25 years and older, Source: U.S. Census Bureau ACS 2018-2022

High School Graduation Rates by Race/Ethnicity

According to the Florida Department of Education, the high school graduation rate for all students within Indian River County was greater than the Florida graduation rate. Asian, Black, and students of two or more races had lower graduation rates compared to the combined rate for all races/ethnicities in Indian River County.

	Indian River County	Florida
All Race/Ethnicities	95.6%	88.0%
American Indian	*	84.7%
Asian	94.4%	96.9%
Black	90.4%	83.2%
Hispanic	97.7%	86.8%
Pacific Islander	*	87.1%
Two or More Races	93.0%	88.4%
White	96.4%	91.0%

Figure 45 - High school graduation rates by race/ethnicity, Source: Florida Dept. of Education, 2022-2023 * indicates suppressed data or no data, shading indicates the measure was worse than the benchmark value for all races/ethnicities.



Health Equity Highlight

Unequal educational opportunities and lower educational attainment are intrinsically linked to disparities in health outcomes. Understanding the health benefits of educational attainment and the broader social context of its impact is integral to reducing health disparities.

Literacy and Numeracy

The National Center for Education Statistics publishes adult numeracy and literacy estimates by county. Scores below level 1 indicate adults are at risk of having difficulties using or comprehending written or numeric materials, while level 2 indicates adults are near proficient but may still struggle to perform tasks using written or numeric information. Indian River County had lower portions of individuals with poor literacy (below level 1 literacy and below level 1 numeracy) than the state benchmarks.

	Indian River County	Florida
Literacy below level 1	19.0%	24.0%
Literacy at level 2	35.0%	34.0%
Literacy at or above level 3	44.0%	42.0%
Numeracy below level 1	30.0%	35.0%
Numeracy at level 2	38.0%	35.0%
Numeracy at or above level 3	33.0%	30.0%

Figure 46 - Literacy and numeracy scores for adults, Source: National Center for Education Statistics PIAAC Skills Map 2013-2017

Transportation

Transportation Indicators

According to the U.S. Census Bureau's 2018-2022 American Community Survey estimates, individuals in Indian River County had more access to vehicles, experienced less traffic volume, and had fewer long commutes compared to all Florida residents.

	Indian River County	Florida	United States
Housing units with no vehicles available	4.3%	6.0%	8.3%
Traffic volume	60	145	108
Driving alone to work	46%	74%	72%
Driving alone to work, long commute	26%	43%	36%
Mean travel time to work (minutes)	24.3	28.0	26.4

Figure 47 - Transportation indicators, Source: U.S. Census Bureau ACS 2018-2022

Walkability

The Environmental Protection Agency's 2021 National Walkability Index dataset ranks each block group relative to all other block groups in the United States. Parts of Indian River County like areas within Vero Beach South were rated as above-average walkable (index score of 10.51 to 15.25) while other portions of the county like areas in Gifford and West Vero Corridor were rated as least walkable (index score of 1 to 5.75) or below-average walkable (index score of 5.76 to 10.50).

Crime and Violence

According to the Florida Department of Law Enforcement, rates of crime in 2020-2021 were generally lower within Indian River County than the Florida and U.S. benchmark rates. However, the homicide rates for Black individuals in Indian River County exceeded the state average for all races/ethnicities.

Violent & Property Crime Rates

	Indian River County	Florida	United States
Total Crime Rate	1,126.1	1,952.3	*
Homicide	3.1	5.1	6.8
Rape	11.1	39.7	42.4
Robbery	22.3	50.9	65.5
Aggravated Assault	105.1	273.3	272.2
Burglary	106.4	201.9	270.9
Larceny/Theft	816.3	1,218.3	1,305.5
Motor Vehicle Theft	61.8	163.0	255.9

Figure 48 - Crime rates per 100,000 population, Source: Florida Dept. of Law Enforcement, Crime in Florida 2020-2021 and FBI Crime in the United States 2021, *comparable total unavailable.

Homicides by Race/Ethnicity

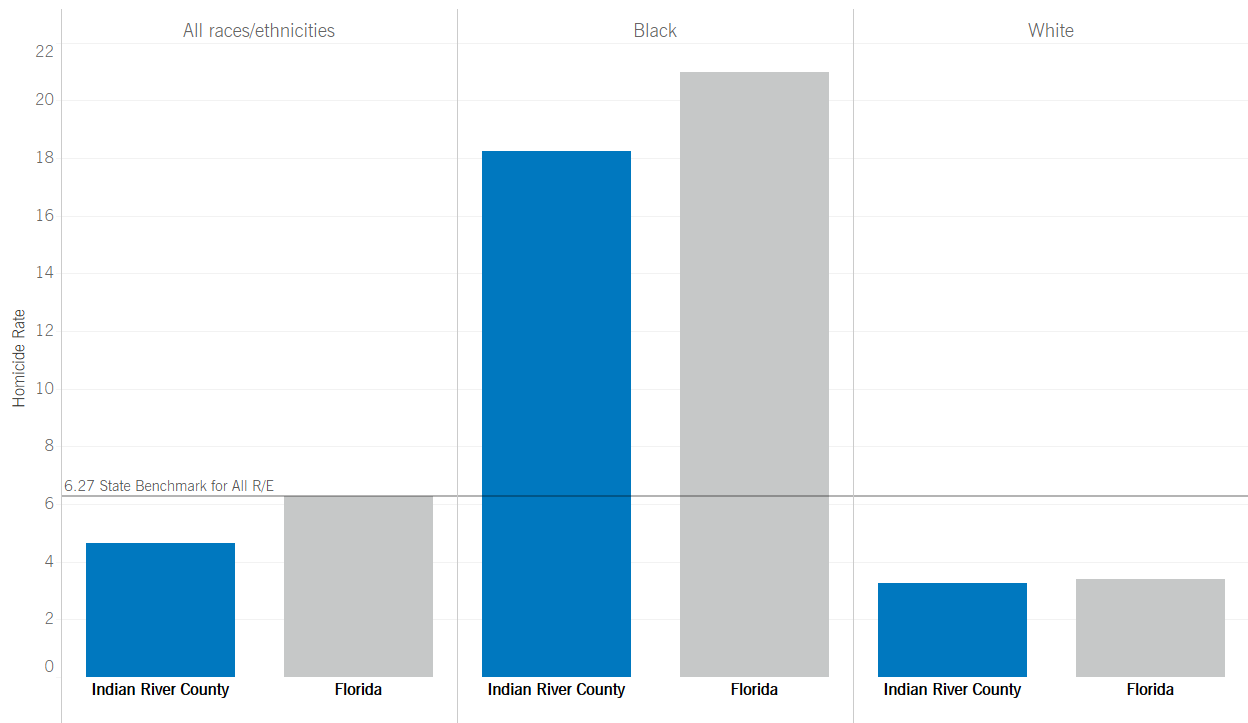


Figure 49 - Homicides by race/ethnicity, Source: County Health Rankings 2024

Rates of Child Abuse and Domestic Violence

Child abuse towards children ages 5-11 was more frequent in Indian River County than the state rate from 2021 to 2023. The rate of domestic violence offenses was significantly lower in Indian River County than in Florida from 2020 to 2022.

	Indian River County	Florida
Child abuse (age 5-11)*	602.5	483.8
Sexual violence (age 5-11)*	41.5	42.0
Domestic violence offenses**	37.9	300.9

Figure 50 - Child abuse and domestic violence rates *per 100,000 children 2021-2023 or ** per 100,000 population 2020-2022, Source: Florida Health Charts, shading indicates the county measure is worse than the state benchmark value.

Human Trafficking

According to Florida Health Charts and the National Human Trafficking Hotline, the state of Florida had 1,253 human trafficking victims, 141 human trafficking-related hospitalizations, and 71 related emergency department visits in 2021.

Violence in Healthcare Settings

According to the Florida Hospital Association and U.S. Bureau of Labor Statistics, hospital workers are six times more likely to experience violence in the workplace than other private sector workers. Violence in healthcare settings can hinder the provision of high-quality healthcare and may tie up resources resulting in delayed care. Approximately 44% of nurses reported experiencing physical violence and 68% reported experiencing verbal abuse in the workplace during the pandemic.

Environmental Risk Factors

Toxic Exposures and Green Spaces

Florida Health Charts publishes data on toxic exposures and poisonings, water quality, school environmental safety, access to green spaces, and other environmental health measures. The rates of carbon monoxide poisoning within Indian River County were higher than the state rates from 2021 to 2023. During the same time frame, 98.2% of county residents received fluoridated water. School environmental safety incidents were more prevalent within the community when compared to the Florida rate from 2021 to 2023. Individuals had less access to green spaces compared to the state average, with 39.8% of Indian River County residents living within a half mile of a park (considered walking distance).

	Indian River County	Florida
Lead poisoning	3.9	7.4
Carbon monoxide poisoning	1.6	0.7
Population receiving fluoridated water	98.2%	78.2%
School environmental safety incidents *	35.8	33.6
Population living within 0.5 miles of a park	39.8%	43.0%

Figure 51 - Environmental exposures and incidents, Source: Florida Health Charts, 2020-2022, rates per 100,000 population, * rate per 1,000 K-12 students 2021-2023, shading indicates the county measure was greater than or worse than the state benchmark value.

Biomedical Waste

Florida Health Charts and the Florida Bureau of Environmental Health report data on improper disposal of biomedical waste from facilities such as hospitals, clinics, laboratories, nursing homes, dental offices, and funeral homes. Unsatisfactory inspections of biomedical and group facilities indicate an enhanced risk of contracting diseases through environmental exposure to pathogens. Indian River County had higher percentages of unsatisfactory inspections of biomedical waste facilities and group care facilities when compared to the Florida state benchmark.

	Indian River County	Florida
Unsatisfactory inspections of biomedical waste facilities	19.2%	13.3%
Unsatisfactory inspections of group care facilities	13.2%	9.0%

Figure 52 – Biomedical waste exposures, Source: Florida Health Charts, 2023, shading indicates the county measure is greater than the state benchmark value for unsatisfactory inspections.

Pollution and Environmental Risk Factors

According to County Health Rankings, Indian River County had lower levels of air pollution (particulate matter) than the Florida and U.S. averages in 2022. There were no drinking water violations in 2022. Less than 15% of residents in Indian River County experienced severe housing problems from 2016-2020. The severe housing problems indicator measures households with at least one in four of the following issues: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities.

	Indian River County	Florida	United States
Air pollution - particulate matter	7.1	7.8	7.4
Drinking water violations	No	N/A	N/A
Severe housing problems	14%	19%	17%

Figure 53 - Environmental risk factors, Source: County Health Rankings 2024, air pollution displayed as the average daily density of fine particulate matter in micrograms per cubic meter, shading indicates the county measure was greater than or worse than the state benchmark value.

Community Resilience Estimates

The Census Bureau provides community resilience estimates (CRE) by census tract and county, which reflect the capacity of individuals and households to prepare, absorb, respond, and recover from a disaster. The percentage of community residents with three or more components of social vulnerability is featured in the map below.

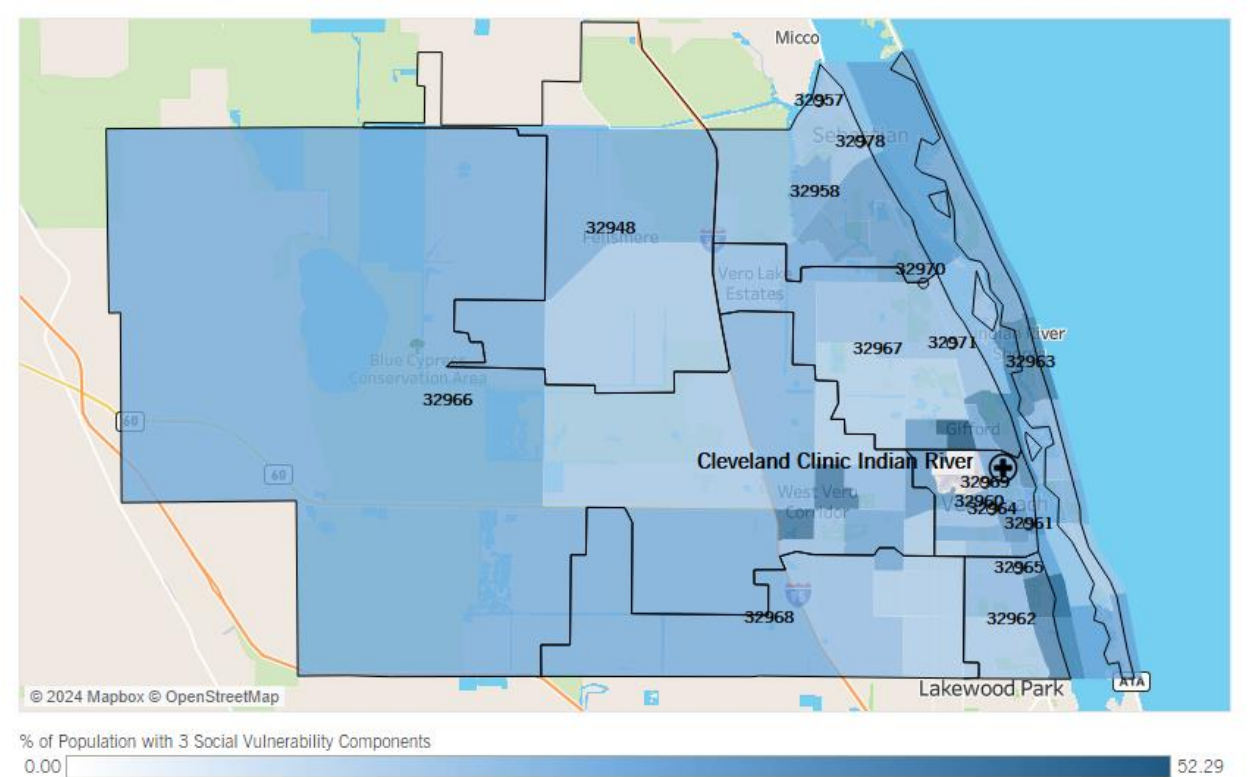


Figure 54 – Percent of population with 3 or more social vulnerability components by census tract, Source: U.S. Census Bureau 2022 Community Resilience Estimates


Health Behaviors & Obesity

Physical Activity and Food Environment

In 2022, Indian River County had a lower percentage of individuals living within a half mile of a fast-food restaurant compared to the state average. Compared to the Florida benchmark, adults in Indian River County were slightly more likely to be sedentary in 2019.

	Indian River County	Florida
Living within 1/2 mile of a fast food restaurant, 2022	17.9%	33.6%
Adults who are sedentary, 2019	26.7%	26.5%

Figure 55 - Food environment and sedentary behavior, Source: Florida Health Charts, Behavioral Risk Factor Surveillance System, shading indicates the county measure was greater than or worse than the state benchmark value.



Health Equity Highlight

Physical activity, nutrition, obesity, and chronic illness are intertwined. Systemic inequities in access to physical opportunities and affordable healthy foods worsen health disparities for vulnerable populations.

Obesity

According to County Health Rankings, the adult obesity rate within Indian River County exceeded the state benchmark rate in 2021.

	Indian River County	Florida	United States
Adult obesity	32.3%	28.3%	34.0%

Figure 56 – Adult obesity, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Sleep

Lack of sleep is linked to chronic conditions, mental health conditions, and risky behaviors. County Health Rankings reports on the portion of adults who report less than 7 hours of sleep per night on average. Individuals in Indian River County were more likely to report insufficient sleep than the state average in 2020.

	Indian River County	Florida	United States
Insufficient sleep <7 hours	35.0%	34.0%	33.0%

Figure 57 – Insufficient sleep, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Life Expectancy & Mortality

The premature death rate for Indian River County was better than the Florida benchmarks from 2019 to 2021. Overall life expectancy was greater in Indian River County than in Florida and the United States. However, Black residents' life expectancy was 7 years lower than the Florida average for all races/ethnicities.

	Indian River County	Florida	United States
Premature age-adjusted mortality	383.9	386.9	390.1
Premature death indicator (YPLL rate)	8,762.3	8,299.1	7,971.5
Life expectancy	79.0	78.5	77.6
AIAN life expectancy	*	93.6	72.8
Asian/Pacific Islander life expectancy	91.7	88.3	86.5
Black life expectancy	71.5	74.5	72.7
Hispanic life expectancy	85.3	81.9	80.3
White life expectancy	79.1	77.7	77.6

Figure 58 - Mortality indicators and life expectancy, Source: County Health Rankings 2024, mortality rate per 100,000 population, YPLL in years of potential life lost before age 75 per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value

Premature Death Over Time

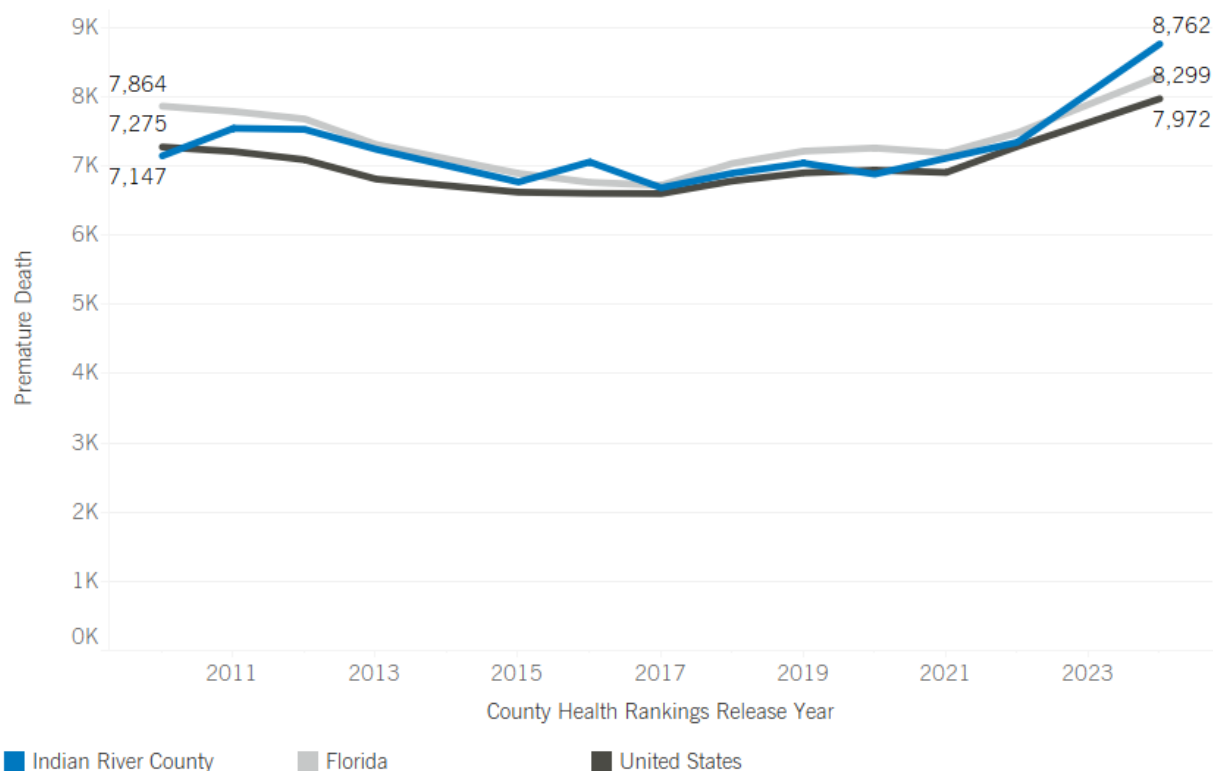


Figure 59 - Premature death in years of potential life lost (YPLL), Source: County Health Rankings

Life Expectancy by Race/Ethnicity

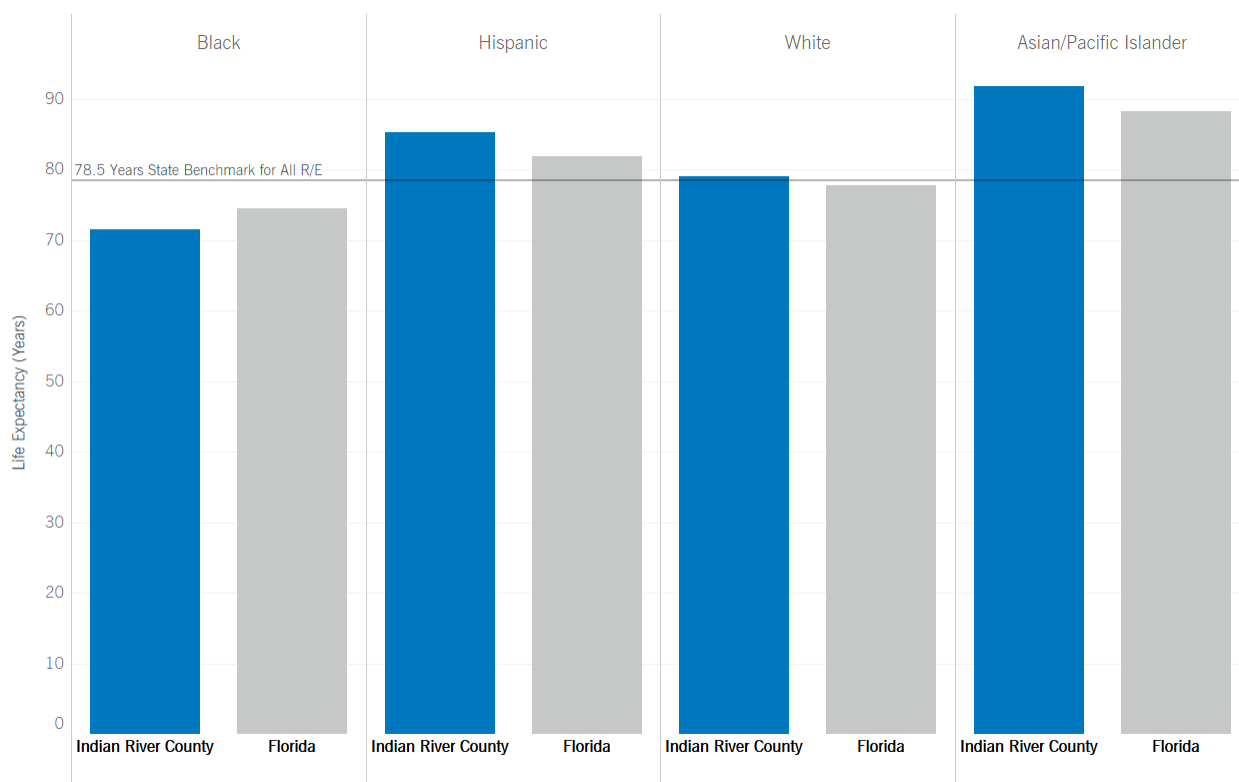


Figure 60 – Life Expectancy by race/ethnicity, Source: County Health Rankings 2024

Life Expectancy by Census Tract

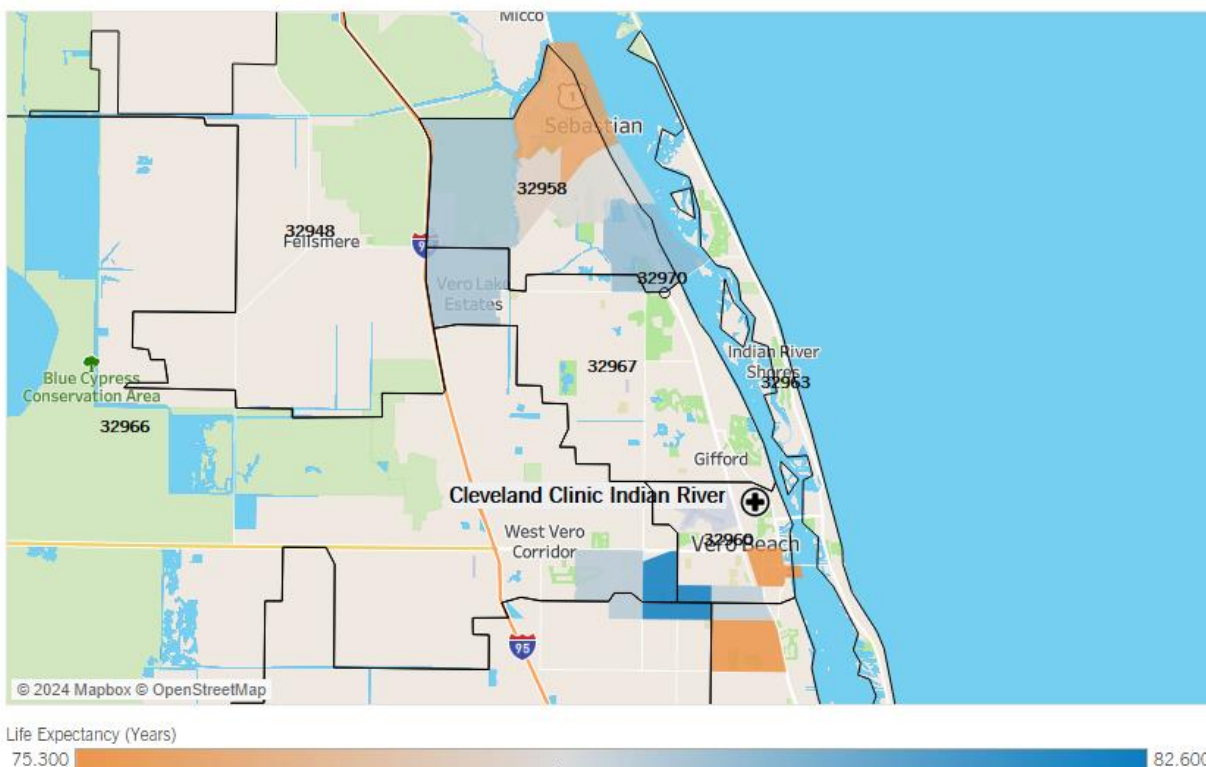


Figure 61 - Life expectancy by census tract, Source: Florida Health Charts 2016-2020

Leading Causes of Death

According to the Centers for Disease Control and Prevention, cancer, heart disease, and unintentional injury were the top three causes of death within the community. Within Indian River County, death rates for top causes of death were greater than or equal to the state benchmarks. Heart disease and cancer death rates significantly exceeded the Florida and U.S. rates. From 2018 to 2022 COVID-19 represented the fifth leading cause of death in Indian River County.

	Indian River County	Florida	United States
Heart disease	346.9	224.3	206.6
Cancer	342.1	212.5	182.7
(Unintentional injury) accident	132.7	68.6	47.7
Stroke	81.5	71.0	60.2
COVID-19	75.0	60.8	57.8
Chronic lower respiratory disease	61.2	53.7	46.0
Diabetes	40.3	32.7	29.0
Alzheimer's disease	44.8	31.0	37.4
Chronic liver disease and cirrhosis	20.2	15.6	14.5
Suicide	15.5	15.5	16.2
Kidney disease	24.0	16.6	15.2
Hypertension	28.0	13.7	11.4
Parkinson's disease	17.1	14.2	12.1
Influenza and pneumonia	20.0	13.6	15.2
Septicemia	11.8	12.3	12.3

Figure 62 - Age-adjusted death rates per 100,000 population, Source: CDC Wonder, Multiple Cause of Death 2018-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Morbidity & Preventable Hospitalizations

Morbidity

In 2024, more individuals reported poor or fair health in the community compared to the state and national benchmarks. The average number of poor physical health days reported was also greater within Indian River County than in Florida.

	Indian River County	Florida	United States
Poor or fair health	14.7%	13.3%	14.2%
Poor physical health days	3.4	3.0	3.3
Preventable hospitalization rate	2,221	3,035	2,681

Figure 63 - Indicators of morbidity and preventable hospitalization rate, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

Preventable Hospitalizations

Florida Health Charts reports on hospitalizations associated with ambulatory care-sensitive conditions. Compared to the state benchmark for all conditions, Indian River County had lower

hospitalization rates for adults under age 65 in 2022. However, there was a higher rate of hospitalizations related to COPD, dental conditions, diabetes, and nutritional deficiencies in the county compared to the state average. Black individuals in the defined community experienced worse rates of preventable hospitalizations compared to the Florida rate for all races/ethnicities.

	Indian River County	Florida
All conditions	739.2	757.6
Asthma	34.3	44.1
Bacterial pneumonia	50.0	65.2
Chronic obstructive pulmonary disease	59.3	57.0
Congestive heart failure	72.3	79.8
Dental conditions	10.2	9.3
Diabetes	144.5	133.9
Hypertension	*	3.4
Kidney/urinary infection	8.3	18.2
Nutritional deficiencies	151.9	102.8

Figure 64 - Preventable hospitalizations under age 65 for ambulatory care sensitive conditions, Source: Florida Health Charts 2022, rates are shown per 100,000 population under age 65, shading indicates the county measure was greater than or worse than the state benchmark value.

Preventable Hospitalizations Over Time

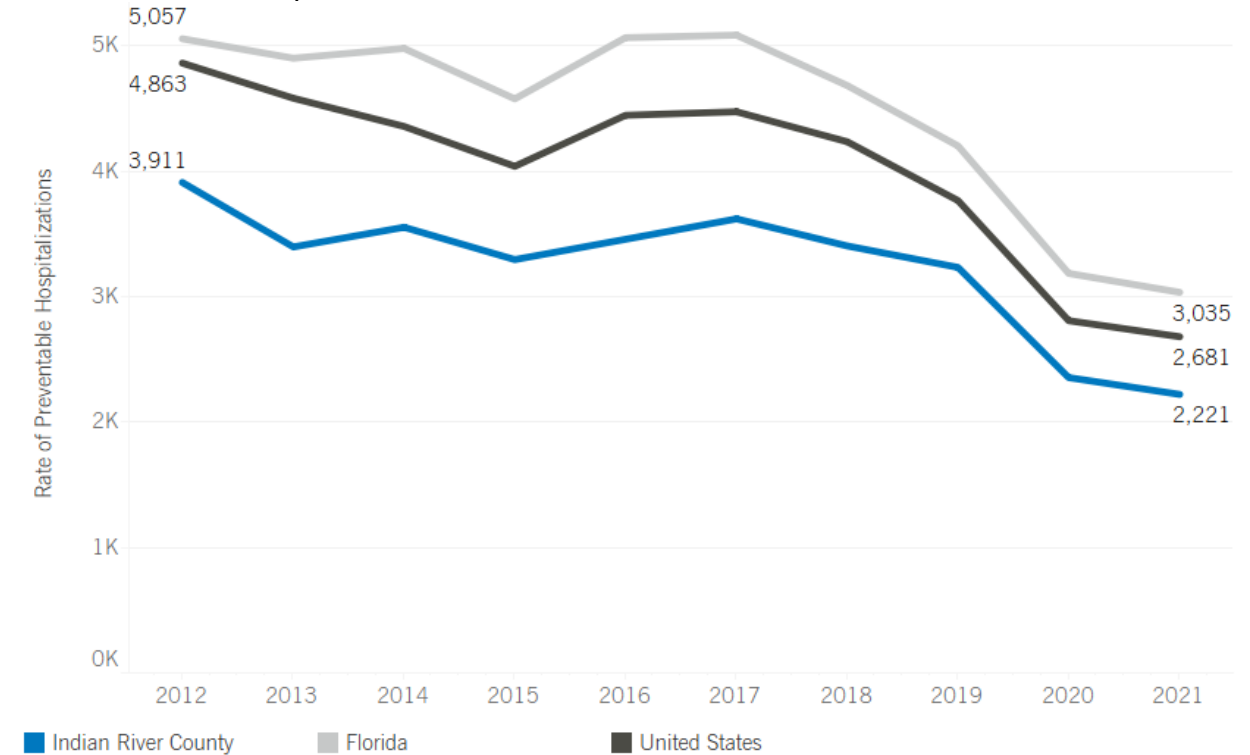


Figure 65 - Preventable hospitalizations over time, Source: County Health Rankings 2024
CLEVELAND CLINIC INDIAN RIVER HOSPITAL 2024 CHNA

Preventable Hospitalizations by Race/Ethnicity

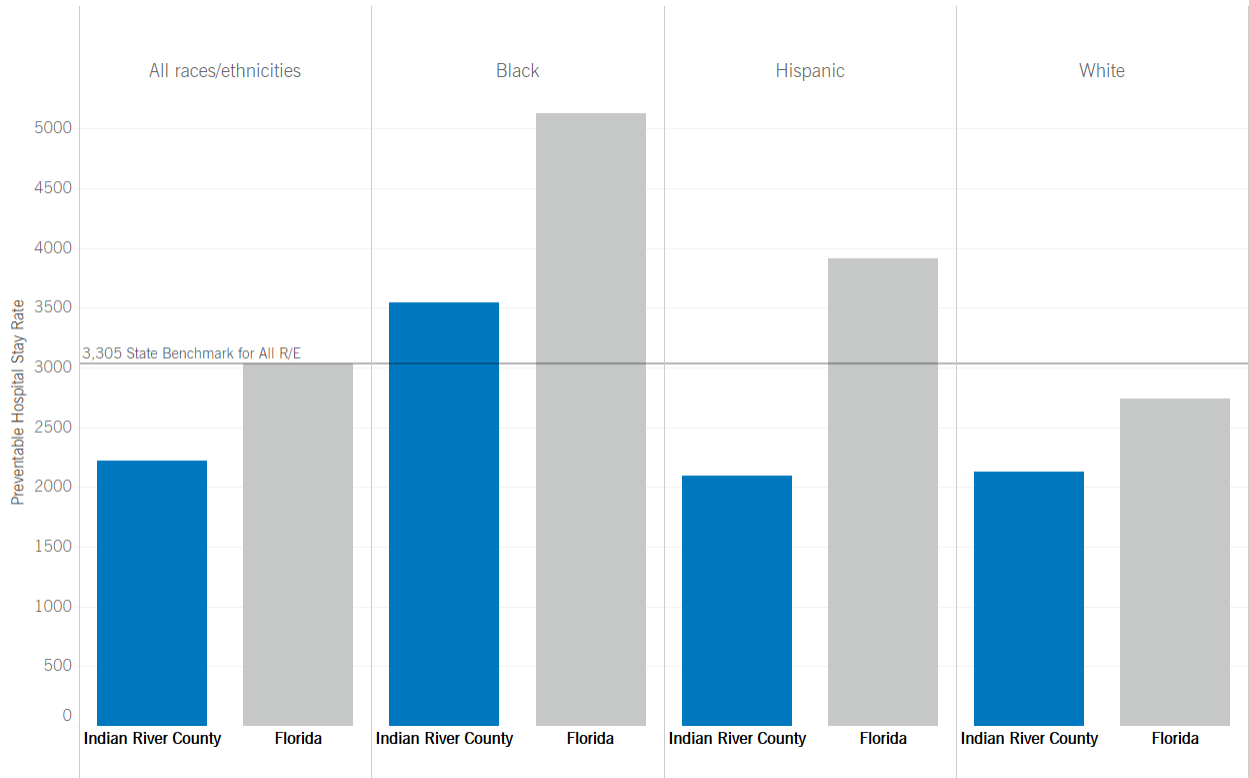


Figure 66 - Preventable hospital stays by race/ethnicity, Source: County Health Rankings 2024

Cancer

Cancer Risk Factors and Screening Rates

The National Cancer Institute reports on various cancer screenings, incidence of cancer, and cancer death rates. Within Indian River County, mammogram screenings within the past two years for women over 40 and the pap test (cervical cancer) screening rate for women aged 21 to 65 were both lower than the state benchmark rate.

	Indian River County	Florida	United States
Mammogram Past 2 Years (women over 40)	69.5%	71.1%	70.2%
Pap test (women ages 21-65, past 3 years)	72.2%	76.7%	77.7%
Sufficient colorectal screening (ages 50 to 75)	65.4%	-	-

Figure 67 - Cancer screening rates, Source: National Cancer Institute 2017-2019, shading indicates the county measure was worse than the state benchmark value, comparable colorectal screening data unavailable for the state and nation.

Cancer Incidence Rates

Indian River County had higher rates of cancer overall (all cancer sites, all races/ethnicities) in addition to higher rates of breast, prostate, lung, colorectal, skin (melanoma), ovarian, and brain cancers than the statewide incidence rates from 2016 to 2020. For all cancer sites, the Indian River County incidence rates for white, Black, and Hispanic populations were higher than the respective statewide rates.

	Indian River County	Florida	United States
Breast ³	124.2	121.3	127.0
Prostate ²	112.1	97.0	110.5
Lung and bronchus ¹	67.0	61.2	61.1
Colon and rectum ¹	40.5	40.1	41.7
Melanoma ¹	45.6	22.5	25.4
Pancreas ¹	12.6	12.9	13.2
Ovarian ³	13.1	10.9	10.1
Cervical ³	8.8	9.1	7.5
Brain ¹	6.7	5.5	5.3
Stomach ¹	5.6	7.5	8.3

Figure 68 - Age-adjusted cancer incidence rates, Source: National Cancer Institute 2016-2020, Rates per 100,000 1) Population, 2) Males, 3) Females, shading indicates the county measure was greater than or worse than the state benchmark value.

Cancer Incidence by Race and Ethnicity for All Cancer Sites

	Indian River County	Florida	United States
All Races (includes Hispanic)	503.5	434.4	442.3
White (includes Hispanic)	518.2	484.7	461.9
Black (includes Hispanic)	485.7	411.8	445.9
American Indian / Alaska Native (includes Hispanic)	*	275.9	392.6
Asian / Pacific Islander (includes Hispanic)	203.1	243.6	290.3
Hispanic (any race)	403.1	376.7	339.6

Figure 69 - Age-adjusted all cancer site incidence rates by race and ethnicity, Source: National Cancer Institute 2014-18, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Cancer Mortality Rates

Indian River County had higher mortality rates for lung and bronchus, breast, prostate, brain, stomach, and melanoma cancers than the state benchmark rates. For all cancer sites, mortality rates for white and white, Black, and Hispanic populations in Indian River County were higher than the statewide mortality rate for all races/ethnicities.

	Indian River County	Florida	United States
Lung and bronchus ¹	36.2	33.9	35.0
Breast ³	18.9	18.5	19.6
Prostate ²	20.8	16.1	18.8
Ovarian ³	5.6	6.0	6.3
Brain ¹	5.4	4.2	4.4
Stomach ¹	2.3	2.6	3.8
Melanoma ¹	3.0	2.1	2.1
Cervical ³	*	2.7	2.2

Figure 70 - Age-adjusted cancer death rates, Source: National Cancer Institute 2016-2020, Rates per 100,000 1) Population, 2) Males, 3) Females, * indicates rate is unstable, shading indicates the county measure was greater than or worse than the state benchmark value

Cancer Mortality by Race and Ethnicity for All Cancer Sites

	Indian River County	Florida	United States
All Races (includes Hispanic)	152.0	149.4	141.4
White (includes Hispanic)	154.8	150.2	154.4
Black (includes Hispanic)	199.3	154.8	174.7
American Indian / Alaska Native (includes Hispanic)	*	59.7	128.2
Asian / Pacific Islander (includes Hispanic)	*	83.9	94.5
Hispanic (any race)	118.2	108.7	108.2

Figure 71 - Age-adjusted all cancer site mortality rates by race and ethnicity, Source: National Cancer Institute 2016-2020, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Heart Disease

Heart Disease Mortality

According to the Centers for Disease Control and Prevention, the age-adjusted mortality rate for all heart disease per 100,000 population was lower in Indian River County than in Florida and the United States. When broken out by race and gender, the heart disease death rate for the Black population in Indian River County was higher than the state benchmark for all races/ethnicities. Females in Indian River County were more likely to die of heart disease than those across the state.

	Indian River County	Florida	United States
All heart disease, all races/ethnicities	202.2	203.0	223.0
All heart disease, Black (non-Hispanic)	296.4	275.8	308.0
All heart disease, white (non-Hispanic)	200.6	206.0	225.6
All heart disease, Hispanic	113.6	170.2	166.4
All heart disease, American Indian and Alaska Native	*	87.3	198.0
All heart disease, Asian	121.0	113.9	128.6
All heart disease, Native Hawaiian or Other Pacific Islander	*	118.5	245.0
All heart disease, more than one race	68.4	98.5	101.0
All heart disease, male	237.1	243.4	270.8
All heart disease, female	177.0	167.4	182.8

Figure 72 - Age-adjusted all heart disease death rate per 100,000 population, Source: CDC, 2019-2021 * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.



Health Equity Highlight

Heart disease is the number one cause of death nationally and in Indian River County, but racial health disparities in diagnosis, hospitalization, and mortality persist.

Heart Attack Mortality

From 2019 to 2021, the age-adjusted death rate for heart attack per 100,000 population was lower within Indian River County than in Florida and the United States. However, heart attack rates for the Black populations in Indian River County exceeded the rates for all other races and ethnicities within the county.

	Indian River County	Florida	United States
Heart attack, all races/ethnicities	16.1	21.8	26.2
Heart attack, Black (non-Hispanic)	22.4	26.4	31.7
Heart attack, white (non-Hispanic)	16.5	21.7	27.2
Heart attack, Hispanic	15.9	22.6	21.0
Heart attack, American Indian & Alaska Native	*	12.1	24.6
Heart attack, Asian	10.8	13.3	15.5
Heart attack, Native Hawaiian or Other Pacific Islander	*	*	28.2
Heart attack, more than one race	14.6	12.4	11.0
Heart attack, male	21.7	28.5	35.3
Heart attack, female	12.6	15.9	18.6

Figure 73 - Age-adjusted heart attack mortality per 100,000 population, Source: CDC, 2019-2021 * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Hypertension Mortality

Age-adjusted mortality rates for hypertension per 100,000 population were lower within Indian River County than in Florida and the United States. However, hypertension rates for the Black populations in Indian River County exceeded the rates for all other races and ethnicities within the county, as well as the state and national benchmarks.

	Indian River County	Florida	United States
Hypertension, all races/ethnicities	76.6	135.1	153.9
Hypertension, Black (non-Hispanic)	214.2	217.9	242.4
Hypertension, white (non-Hispanic)	71.2	131.5	147.3
Hypertension, Hispanic	69.5	116.9	142.2
Hypertension, American Indian & Alaska Native	*	63.5	183.6
Hypertension, Asian	59.3	75.5	97.5
Hypertension, Native Hawaiian or Other Pacific Islander	*	82.1	176.2
Hypertension, more than one race	14.5	68.8	74.9
Hypertension, male	92.7	161.2	180.7
Hypertension, female	64.9	111.7	130.0

Figure 74 - Age-adjusted hypertension mortality per 100,000 population, Source: CDC, 2019-2021 * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Stroke Mortality

Within the defined community, the age-adjusted death rate for stroke per 100,000 population exceeded the state and national benchmarks. Black (non-Hispanic) and white (non-Hispanic) populations in the community had higher stroke death rates than the Florida benchmark for all races/ethnicities.

	Indian River County	Florida	United States
All stroke, all races/ethnicities	50.5	43.4	39.0
All stroke, Black (non-Hispanic)	72.9	65.4	57.0
All stroke, white (non-Hispanic)	50	41.1	37.6
All stroke, Hispanic	30.2	43.8	34.8
All stroke, American Indian & Alaska Native	*	13.7	33.6
All stroke, Asian & Pacific Islander	36.1	30.4	31.5
All stroke, Native Hawaiian or Other Pacific Islander	*	*	48.5
All stroke, more than one race	21.5	23.8	19.1
All stroke, male	47.5	42.0	39.7
All stroke, female	53.3	43.9	37.8

Figure 75 - Age-adjusted stroke mortality per 100,000 population, Source: CDC, 2019-2021, * indicates insufficient data, shading indicates the county measure was greater than or worse than the state benchmark value.

Other Chronic Diseases & Risk Factors

Diabetes

According to Florida Health Charts, Indian River County had a greater prevalence of individuals who have been told they had diabetes than the Florida rate in 2019. The county also had higher rates of diabetes-related emergency room visits from 2020 to 2022, but a lower rate of hospitalizations due to diabetes. The average age at which diabetes was diagnosed was slightly older within Indian River County than in Florida.

	Indian River County	Florida
Hospitalization rate from or with diabetes ¹	164.1	208.3
Rate of emergency room visits due to diabetes ¹	237.9	205.7
Adults who have been told they had pre-diabetes ²	8.9%	9.1%
Adults who have been told they had diabetes ²	11.8%	11.7%
Average age at which diabetes was diagnosed ²	53.0	50.0

Figure 76 - Diabetes indicators, Source: 1) Florida Health Charts, 2020-2022 rolling rates per 100,000 population 2) Florida Health Charts, Behavioral Risk Factor Surveillance System 2019, shading indicates the county measure was greater than or worse than the state benchmark value.

Respiratory Disease

The hospitalization rate for chronic lower respiratory disease (CLRD) was lower within Indian River County than in the state of Florida from 2019 to 2021 according to Florida Health Charts. Indian River County had a lower asthma prevalence rate than the state average in 2019.

	Indian River County	Florida
Age-adjusted hospitalization rate from CLRD, 2019-2021	179.1	183.7
Age-adjusted hospitalization rate from or with asthma, 2019-2021	435.8	630.1
Adults who currently have asthma, 2019	5.6%	7.4%

Figure 77 - Select Chronic Lower Respiratory Disease indicators, Source: Florida Health Charts, rates are per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Behavioral Health (Mental Health and Substance Use)

Adult Mental Health

According to County Health Rankings, adults in Indian River County reported more poor mental health days on average than those in Florida in 2021. Adults in the community were also more likely to report frequent mental distress compared to the state benchmark.

	Indian River County	Florida	United States
Average number of poor mental health days	4.5	4.2	4.8
Frequent mental distress	15.5%	12.9%	15.2%

Figure 78 - Poor mental health indicators, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

In 2021, the rate of those reporting poor mental health on 14 or more of the past 30 days was lower in Indian River County than the state average, according to Florida Health Charts. Additionally, a lower portion of adults had been diagnosed with a depressive disorder than the Florida benchmark.

	Indian River County	Florida
Adults with poor mental health on 14 or more of the past 30 days	10.2%	13.8%
Adults ever told they have a depressive disorder	15.8%	17.7%

Figure 79 – Poor mental health days and depressive disorders, Source: Florida Health Charts, 2021, shading indicates the county measure was greater than or worse than the state benchmark value.



Health Equity Highlight

Racial/ethnic and geographically underserved populations disproportionately suffer from poor mental health outcomes due to many interconnected factors such as access to behavioral health services, lack of awareness of treatment options, discrimination, and cultural stigma surrounding mental health treatment.

Child and Youth Mental Health

Florida Health Charts reported that a greater portion of middle and high school students reported missing school because they felt unsafe compared to the state average in 2022. Over 45% of students in the community ages 11-17 felt sad or depressed most days, and just over a quarter of students experienced cyberbullying. Within the community, higher portions of high school students reported adverse childhood experiences (ACE) compared to the state averages.

	Indian River County	Florida
Children in K-12 with emotional/behavioral disability	0.4%	0.4%
Students felt sad or depressed most days *	45.9%	47.3%
Students missed school because felt unsafe (past 30 days) *	12.2%	10.0%
Students who have been cyber-bullied *	32.0%	30.1%
High School Students with at least one ACE	68.5%	67.2%
High School Students with 4+ ACEs	26.3%	21.4%

Figure 80 – Child and youth mental health and risk factors, Source: Florida Health Charts and Florida Youth Substance Abuse Survey, 2022, *refers to middle and high school students, shading indicates the county measure was greater than or worse than the state benchmark value

Mental Health for LGBTQ Young People

The Trevor Project publishes data from the U.S. National Survey on the Mental Health of LGBTQ Young People. According to findings from the 2023 survey, 56% of LGBTQ young people across the nation wanted mental health care in the prior year but were unable to access it. Within the population, 67% reported symptoms of anxiety and 54% reported experiencing depression. Roughly 41% of LGBTQ young people seriously considered attempting suicide in the past year and 14% attempted suicide in the past year.

Mental Disorder Emergency Visits and Hospitalizations

According to Florida Health Charts, there was a greater rate of emergency visits and hospitalizations for mental disorders across all age groups in Indian River County than in the state of Florida from 2020 to 2022.

	Indian River County	Florida
Mental disorder hospitalization rate, all ages	1,494.0	962.4
Mental disorder hospitalization rate, under age 18	1,230.3	672.9
Mental disorder emergency department visits, all ages	1,313.8	962.7
Mental disorder emergency department visits, under age 18	472.9	349.2

Figure 81 - Mental disorder emergency visits and hospitalizations, Source: Florida Health Charts, 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Intentional Self-Harm

Hospitalizations for intentional self-harm injuries were lower within Indian River County than in Florida in 2022.

	Indian River County	Florida
Intentional self-harm hospitalizations, all ages	26.8	34.8
Intentional self-harm hospitalizations, under age 18	0.0	25.6

Figure 82 - Hospitalizations for non-fatal intentional self-harm injuries, Source: Florida Health Charts, 2022, rates per 100,000 population, * indicates rate is suppressed, shading indicates county measure is worse than the state benchmark value.

Suicide

There were higher suicide death rates for youth aged 15 to 19, and adults over the age of 45 within Indian River County when compared to the Florida benchmark for all ages in 2022.

	Indian River County	Florida
Suicide death rate - all ages	25.1	17.2
Suicide death rate ages 10-14	0.0	1.6
Suicide death rate ages 15-19	39.1	9.3
Suicide death rate ages 20-24	14.8	15.0
Suicide death rate ages 25-34	13.0	17.3
Suicide death rate ages 35-44	13.5	17.6
Suicide death rate ages 45-54	29.2	19.4
Suicide death rate ages 55-64	34.8	20.6
Suicide death rate ages 65-74	19.9	17.3
Suicide death rate ages 75 or older	38.2	24.6

Figure 83 - Suicide death rates by age group, Source: Florida Health Charts, 2022, rates per 100,000 population, shading indicates county measure is worse than the state benchmark value.

Alcohol

Florida Health Charts provides self-reported measures of alcohol use. Within Indian River County, deaths from alcoholic liver disease were more common than in Florida from 2020 to 2022. Middle and high school students in Indian River County were less likely to indicate they drank alcohol or engaged in binge drinking in 2022 compared to the state average.

	Indian River County	Florida
Age-adjusted deaths from alcoholic liver disease	13.7	7.6
Students engaged in binge drinking	3.8%	5.6%
Students who drank alcohol past 30 days	11.5%	11.8%

Figure 84 – Teen alcohol use and alcoholic liver disease, Source: Florida Health Charts, 2020-2022, shading indicates county measure is worse than the state benchmark value.

Excessive drinking was more prevalent, while alcohol-impaired driving deaths were less prevalent in Indian River County than in Florida and the United States in 2021.

	Indian River County	Florida	United States
Excessive drinking	18.5%	17.2%	18.1%
Alcohol-impaired driving deaths	20.6%	21.6%	26.3%

Figure 85 – Alcohol use and related deaths, Source: Source: County Health Rankings 2024, shading indicates county measure is worse than the state benchmark value.

Tobacco and Vaping

In 2021, a greater percentage of adults in Indian River County smoked cigarettes than in Florida and the United States, according to County Health Rankings.

	Indian River County	Florida	United States
Adult smoking	19.5%	15.5%	15.0%

Figure 86 - Adult smoking, Source: County Health Rankings 2024, shading indicates the county measure was greater than or worse than the state benchmark value.

A greater portion of adult smokers in the community tried to quit within the prior year compared to the state average in 2019. There were fewer e-cigarette/vape users and fewer students who had ever smoked cigarettes or vaped nicotine in Indian River County than in Florida in 2022, according to Florida Health Charts. There was a greater percentage of students who indicated having vaped marijuana.

	Indian River County	Florida
Adult smokers who tried to quit once or more in past year*	64.9%	59.0%
Adults who are current e-cigarette users*	4.2%	7.5%
Students who have ever smoked cigarettes	6.8%	7.1%
Students who have ever vaped nicotine	19.1%	20.2%
Students who have ever vaped marijuana	14.0%	13.2%

Figure 87 - Tobacco use and vaping, Source: Florida Health Charts, 2022, *indicates 2019 data, shading indicates the county measure was greater than or worse than the state benchmark value.

Opioid Use

The Centers for Disease Control and Prevention's National Center for Injury Prevention and Control provides estimates of the number of opioid prescriptions dispensed per person, per year. Within Indian River County, the 2022 dispensing rate was higher than both the state and national rates.

	Indian River County	Florida	United States
Opioid dispensing rate	48.8	40.0	39.5

Figure 88 - Opioid prescribing rate per 100 population, Source: CDC 2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Drug Overdose Deaths by Race/Ethnicity

According to County Health Rankings, the overall drug overdose mortality rate within Indian River County was lower than the Florida mortality rate from 2019 to 2021. The drug overdose death rate for Black residents was greater than the average death rate for all races/ethnicities.

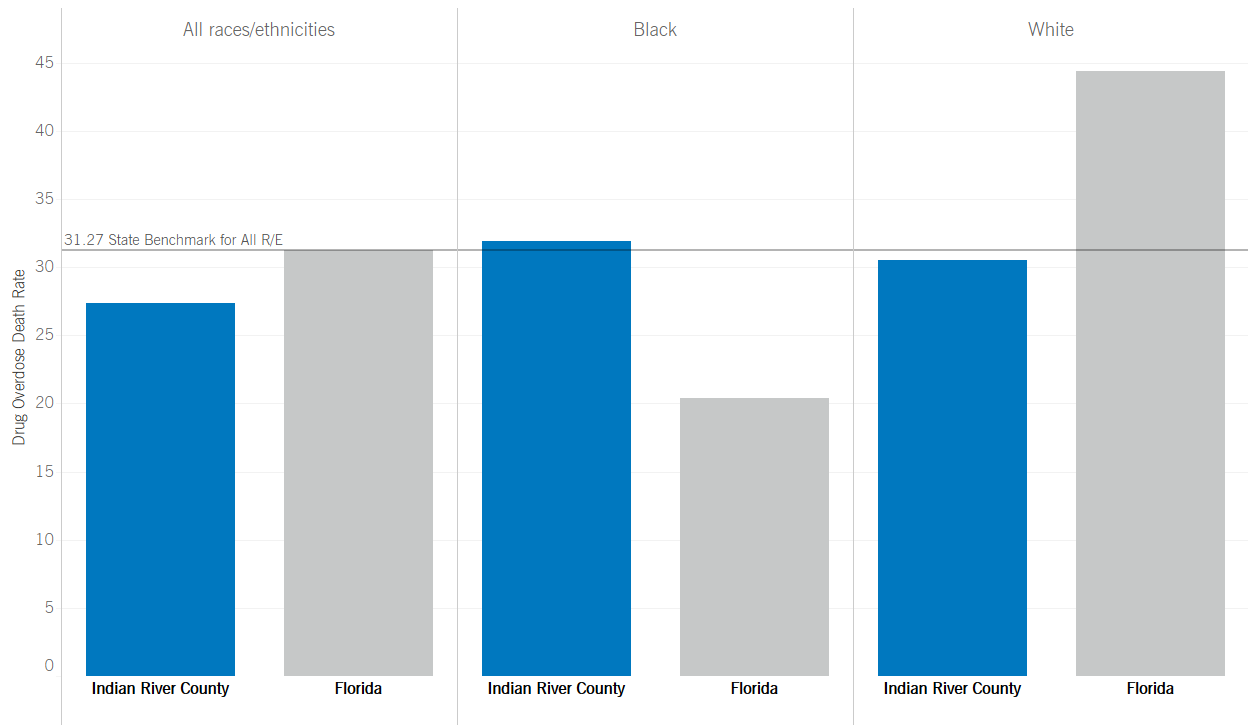


Figure 89 - Drug overdose rate by race/ethnicity, Source: County Health Rankings 2024

Maternal and Child Health

Birth Rate

Florida Health Charts publishes birth data and several maternal and child health indicators. In 2022 the total birth rate per 1,00 population in Indian River County was lower than the Florida birth rate. The birth rates for Black, other non-white, and Hispanic individuals were greater than the state average birth rate for all races/ethnicities.

	Indian River County	Florida
Total birth rate	7.6	10.0
White birth rate	6.6	9.3
Black birth rate	13.8	12.6
Other non-white birth rate	14.7	11.4
Hispanic birth rate	13.6	12.4
Non-Hispanic birth rate	6.6	9.1

Figure 90 - Birth rates by race/ethnicity per 1,000 population, Source: Florida Health Charts, 2022, shading indicates the county measure is greater than the state benchmark value for the total birth rate.

Teen Birth Rate and Interpregnancy Interval

From 2020 to 2022, Indian River County had a lower teen birth than the state benchmark but a higher percentage of repeat births for mothers aged 15 to 19. Black, Hispanic, and individuals identifying as more than one race in Indian River County experienced greater rates of teen pregnancy than the state average rate for all races/ethnicities. The portion of births with an interpregnancy interval of fewer than 18 months was lower in Indian River County than in Florida during the same time frame.

	Indian River County	Florida
Teen birth rate (per 1,000 women aged 15–19 years)	13.9	13.9
Repeat births to mothers aged 15-19	14.8%	13.1%
Births with interpregnancy interval < 18 months	34.8%	35.9%

Figure 91 - Teen birth rate and interpregnancy interval, Source: Florida Health Charts, 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Teen Birth Rate by Race/Ethnicity

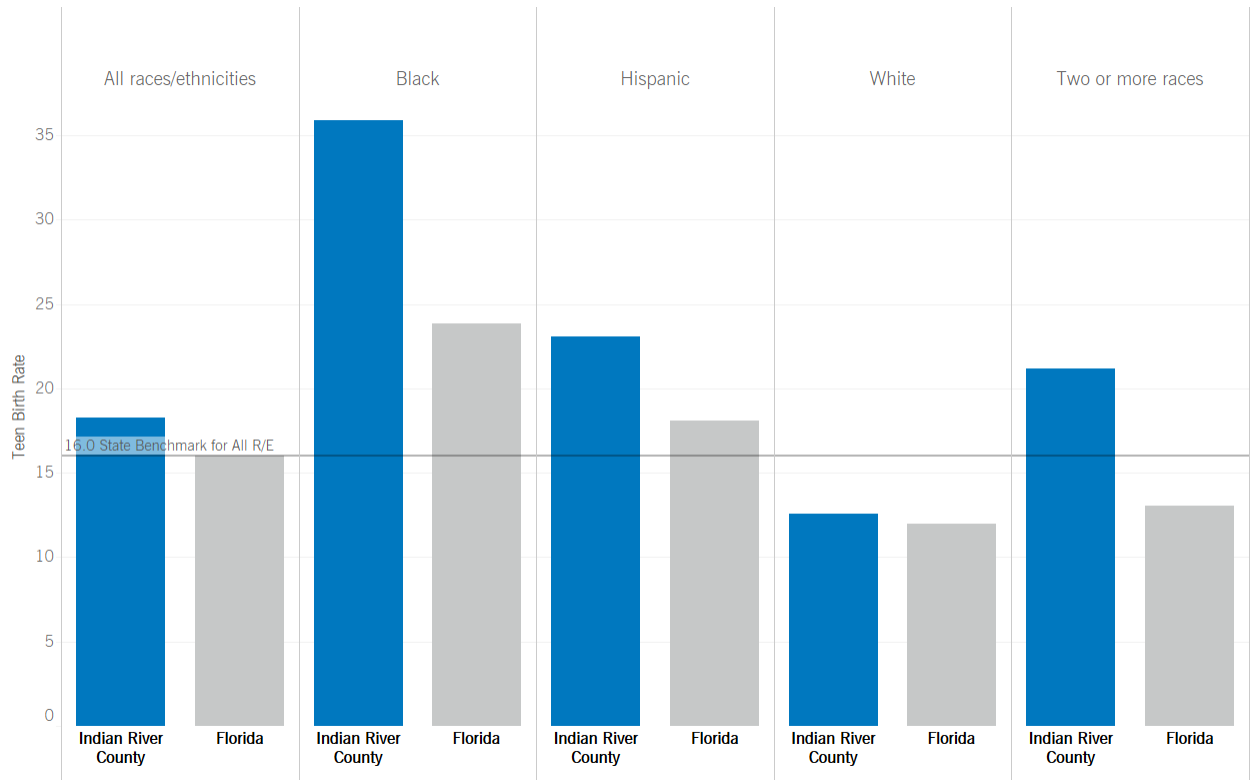


Figure 92 - Teen birth rate by race/ethnicity, Source: County Health Rankings 2024

Birth Outcomes and Risk Factors

According to Florida Health Charts, mothers in Indian River County were less likely to have a healthy weight and more likely to smoke during pregnancy compared to mothers across Florida from 2020 to 2022. Indian River County had a greater rate of mothers who initiated breastfeeding compared to the state benchmark. Mothers in Indian River County were more likely to receive first-trimester prenatal care than the Florida average. Low- and very low-birthweight births and preterm births were less likely in Indian River County than in Florida.

	Indian River County	Florida
Births to mothers with 1st trimester prenatal care	75.6%	73.8%
Births to mothers with healthy weight	38.4%	39.6%
Mothers who initiate breastfeeding	88.5%	85.7%
Births to mothers who smoked during pregnancy	5.0%	3.0%
Live births under 2,500 grams (per 1,000 live births)	8.7%	8.9%
Live births under 1,500 grams (per 1,000 live births)	1.5%	1.6%
Preterm births < 37 weeks	13.7%	14.2%

Figure 93 - Birth outcomes and related risk factors, Source: Florida Health Charts 2017-2019, shading indicates the county measure was greater than or worse than the state benchmark value.

Postpartum Depression

According to Florida's Pregnancy Risk Assessment Monitoring System (PRAMS), roughly 15.7% of women across the state experienced depressive symptoms after giving birth in 2020. Younger women, those with lower household incomes, non-Hispanic Black, and Hispanic women, and those with lower education levels were more likely to experience depressive symptoms when compared to the overall rate. Approximately 10.3% of Florida women had a healthcare provider tell them they had depression after giving birth.

Access to Maternal Care and Maternal Mortality

The March of Dimes ranks U.S. counties as maternity care deserts, or those with low access, moderate, access, or full access to maternity care. Indian River County was designated as a "full access" county, although neighboring Okeechobee County was described as a low-access county. On average, women in Indian River County travel 7.5 miles for obstetric care, compared to 10.0 miles for women across Florida.

No maternal deaths were reported in Indian River County from 2020 to 2022. The most recent maternal death within the county was reported was in 2012.

Infant Mortality

According to Florida Health Charts, the infant mortality rate in Indian River County was greater than the state benchmark from 2020 to 2022. However, infant mortality rates varied greatly by race/ethnicity. Within Indian River County, the Black infant mortality rate exceeded the state benchmark for all races/ethnicities and Black babies were three times as likely to die than white babies.

	Indian River County	Florida
Infant mortality (per 1,000 live births)	8.1	5.9
Infant mortality - white	5.7	4.2
Infant mortality - Black	17.1	11.1
Infant mortality - Hispanic	6.1	4.8
Infant mortality - non-Hispanic	8.4	6.2

Figure 94 - Infant mortality by race/ethnicity per 1,000 live births, Source: Florida Health Charts 2020-2022, shading indicates the county measure was greater than or worse than the state benchmark value.

Infant Mortality by Census Tract

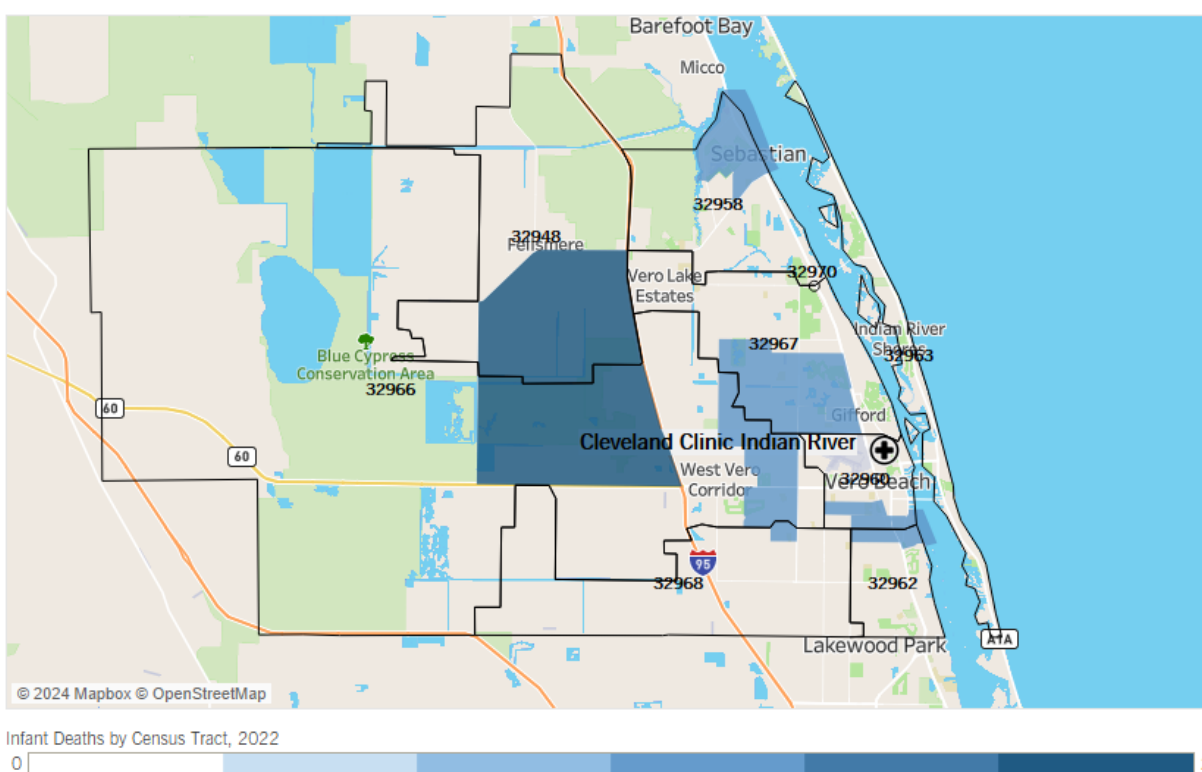


Figure 95 - Map of infant deaths by census tract, Source: Florida Health Charts 2022



Health Equity Highlight

Differences in infant health outcomes persist at disturbing rates, with Black, non-Hispanic infants experiencing significantly higher rates of infant mortality than non-Hispanic white infants.

Child Health Outcomes and Risk Factors

Florida Health Charts reports on a variety of risk factors and health outcomes for children under the age of five. Indian River County had a greater portion of pre-k students who were ineligible for free or reduced lunch when compared to the state average. The percentage of kindergarten students who were fully immunized within the County was lower than the Florida immunization rate in 2022. Infants and young children under five within Indian River County had a higher emergency room visit rate (per 100,000 population under age five) than the state rate from 2020 to 2022. However, the community had a lower child death rate from 2020 to 2022 than the state average. Black children in Indian River County died at a greater rate than all races/ethnicities combined.

	Indian River County	Florida
Children in pre-k eligible for free or reduced lunch	50.2%	62.9%
Children in kindergarten eligible for free or reduced lunch	58.2%	55.0%
Kindergarten children fully immunized	87.8%	91.7%
Emergency room visits age 0-5*	56,503.4	54,718.1
Deaths all causes ages 1-5**	15.3	25.8

Figure 96 - Health outcomes and risk factors for young children, Source: Florida Health Charts, 2020-2022, * per 100,000 population under 5, ** per 100,000 population aged 1-5, *** per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value

Child Mortality Rate by Race/Ethnicity

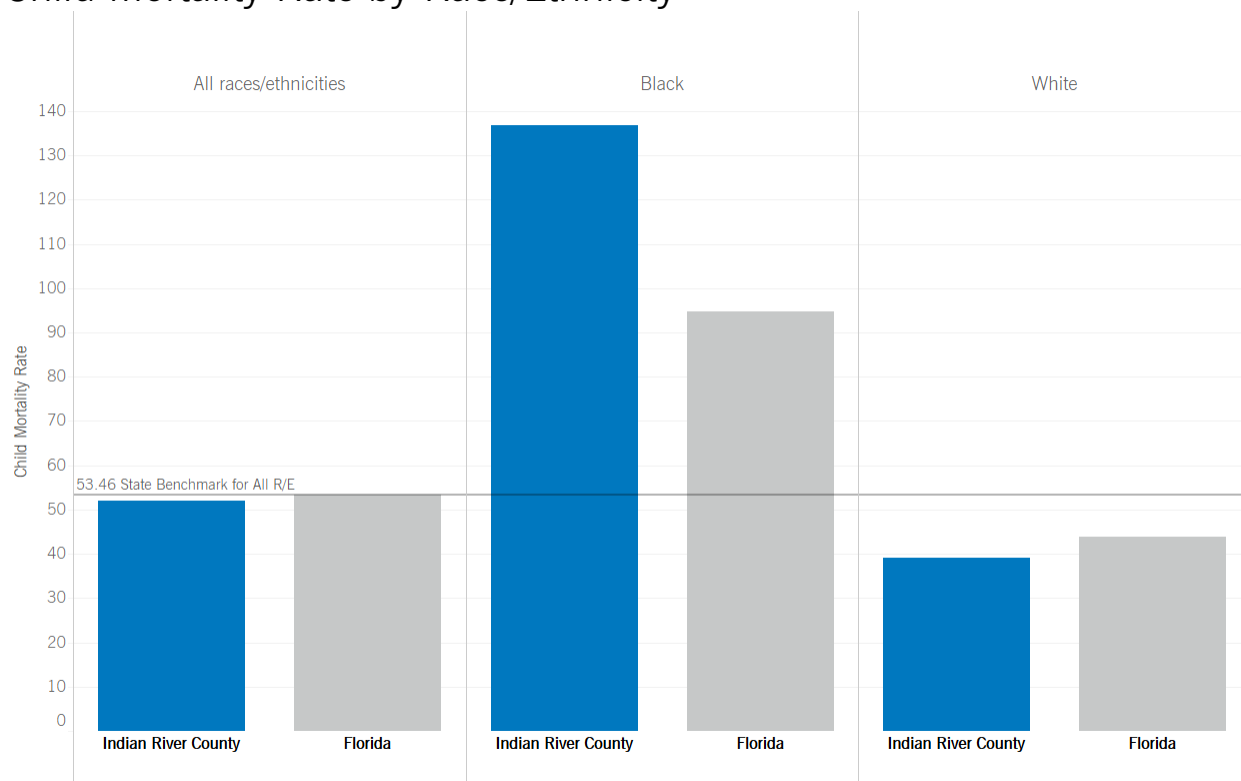


Figure 97 - Child mortality rate by race/ethnicity, Source: County Health Rankings 2024

Communicable Diseases & Sexually Transmitted Infections

Tuberculosis and Hepatitis A

According to FL Health CHARTS and the Centers for Disease Control and Prevention, there were no cases of Hepatitis A within Indian River County in 2022. The rate of tuberculosis cases was not reported due to data suppression.

	Indian River County	Florida	United States
Tuberculosis case rate	*	2.4	2.5
Hepatitis A case rate	0.0	1.4	0.7

Figure 98 - Tuberculosis and Hepatitis A Rates per 100,000 Population, Source: FL Health Charts, CDC, * data suppressed.

Sexually Transmitted Infections

According to the Centers for Disease Control and Prevention, Indian River County had significantly lower chlamydia, gonorrhea, and syphilis rates than Florida and the United States in 2018.

	Indian River County	Florida	United States
Chlamydia	273.1	480.4	495.0
Gonorrhea	83.7	199.3	194.4
Primary and secondary syphilis	13.7	20.8	17.7

Figure 99 - Reported Case Rate for Sexually Transmitted Infections per 100,000 Population, Source: CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2018

HIV Prevalence and Diagnosis Rates

The diagnosis, prevalence, and age-adjusted death rates for HIV within Indian River County were lower than the state and national benchmark rates.

	Indian River County	Florida	United States
HIV diagnosis rate	10.0	22.3	13.3
HIV prevalence rate	283.6	626.0	368.6
Age-adjusted HIV death rate	1.9	2.5	-

Figure 100 - Reported Prevalence and Infection Rates for HIV per 100,000 Population, Source: CDC National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

Injuries

Unintentional Injuries

The age-adjusted death rate for unintentional injuries was greater in Indian River County than in Florida in 2022 according to Florida Health Charts. From 2017 to 2021, white individuals across the defined community had a greater injury death rate compared to the Florida rate for all races/ethnicities. There were more hospitalizations for non-fatal unintentional firearm injuries in Indian River County than in Florida during the same time frame. Black and white individuals in the defined community had greater rates of firearm fatalities than the state benchmark for all races/ethnicities from 2017 to 2021.

	Indian River County	Florida
Age-adjusted deaths from unintentional injuries	78.7	69.4
Hospitalizations for non-fatal unintentional falls	240.2	247.7
Hospitalizations for non-fatal unintentional firearm injuries	8.9	6.3

Figure 101 – Injury hospitalizations and deaths, Source: Florida Health Charts, 2022, rates per 100,000 population, shading indicates the county measure was greater than or worse than the state benchmark value.

Injury Deaths by Race/Ethnicity

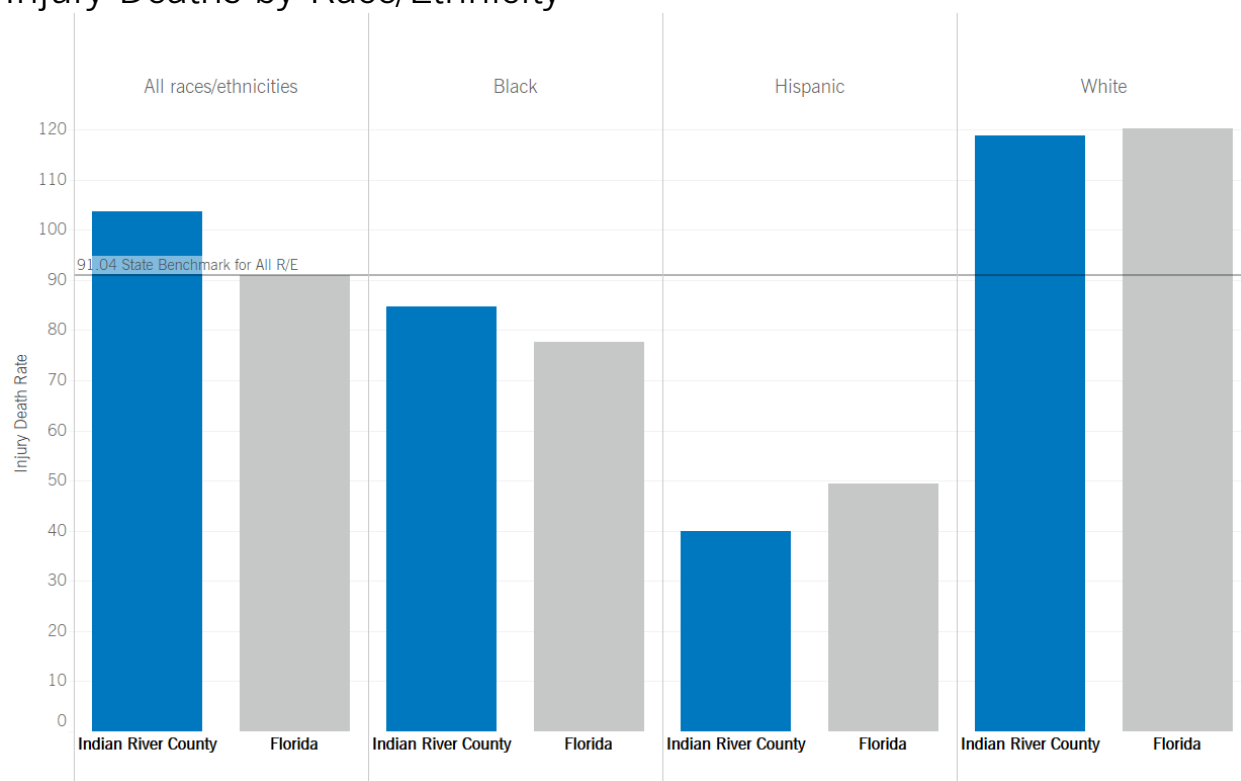


Figure 102 - Injury death rate over time, Source: County Health Rankings 2024

Firearm Fatalities by Race/Ethnicity

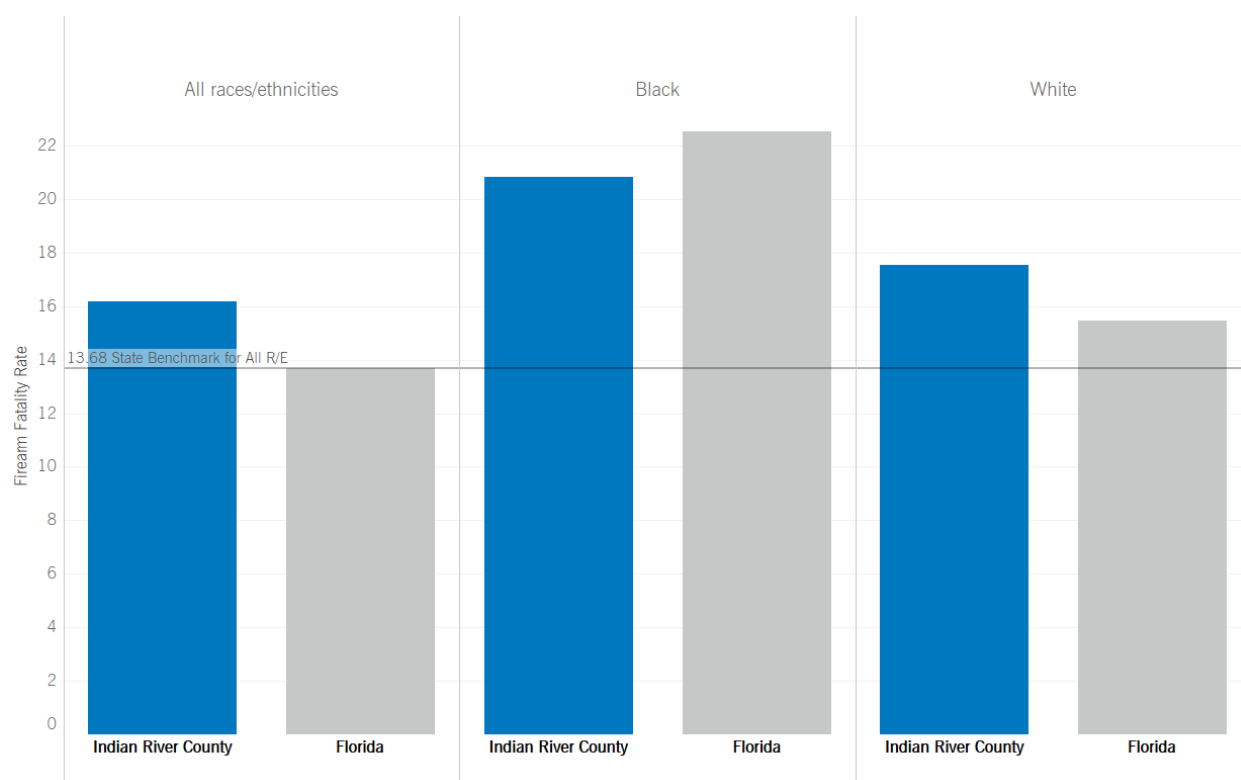


Figure 103 – Firearm fatalities by race/ethnicity, Source: County Health Rankings 2024

Disability & Caregiving

Disability

According to the U.S. Census Bureau’s 2018-2022 American Community Survey estimates, a greater portion of Indian River County’s population had a disability than the Florida or United States averages. The portions of Indian River County residents with specific difficulties were generally higher than the respective state benchmarks.

	Indian River County	Florida	United States
Population with a disability	16.2%	13.5%	12.9%
Population with a hearing difficulty	6.2%	3.8%	3.6%
Population with a vision difficulty	2.6%	2.5%	2.4%
Population with a cognitive difficulty	6.2%	5.3%	5.3%
Population with an ambulatory difficulty	5.1%	7.3%	6.7%
Population with a self-care difficulty	9.7%	2.7%	2.6%
Population with an independent living difficulty	6.9%	5.8%	5.8%

Figure 104- Disability prevalence rates, Source: U.S. Census Bureau ACS 2018-2022

Caregiving

The Centers for Disease Control and Prevention Alzheimer's Disease and Healthy Aging Program provides data on caregiving at the state level. Within Florida, one in five adults are caregivers providing regular care or assistance to a friend or family member with a health problem or disability. Approximately 58% of Florida caregivers are women, and 25% of caregivers are age 65 or older. Care has lasted at least two years for over half of caregivers, while over a third provide care for at least 20 hours per week.

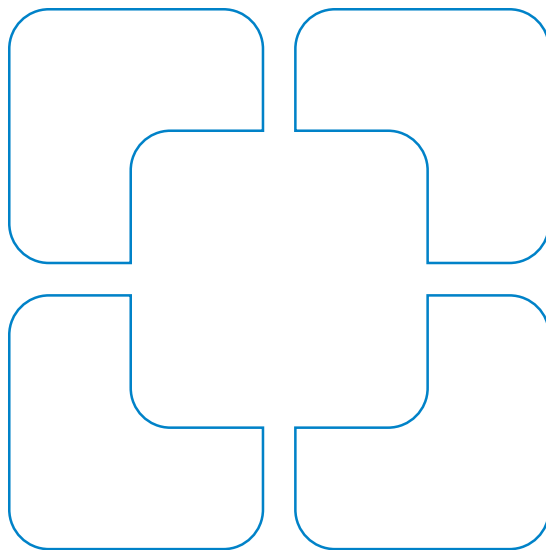
Caregiving leads to an increased risk of multiple chronic diseases. Across the U.S. roughly 40.7% of caregivers report having two or more chronic diseases. Additionally, 33.0% of caregivers report having a disability.

F. APPENDIX – Facility Discharge Data

The top discharges by ZIP Code for CCIRH are featured in the table below. Data reflects 2022 inpatient, outpatient, and emergency department visits combined.

		Visits/Cases	% of Total	Running Sum
32967	Vero Beach	11,629	15.9%	15.9%
32960	Vero Beach	11,404	15.6%	31.5%
32966	Vero Beach	10,075	13.8%	45.2%
32962	Vero Beach	9,785	13.4%	58.6%
32958	Sebastian	5,384	7.4%	65.9%
32968	Vero Beach	4,913	6.7%	72.6%
32963	Vero Beach	4,893	6.7%	79.3%
34951	Fort Pierce	3,595	4.9%	84.2%
32948	Fellsmere	1,036	1.4%	85.6%
34949	Fort Pierce	921	1.3%	86.9%
32976	Sebastian	738	1.0%	87.9%
34946	Fort Pierce	489	0.7%	88.6%
34950	Fort Pierce	416	0.6%	89.1%
34947	Fort Pierce	383	0.5%	89.7%
34982	Fort Pierce	347	0.5%	90.1%
34953	Port Saint Lucie	314	0.4%	90.6%
32961	Vero Beach	312	0.4%	91.0%
32965	Vero Beach	213	0.3%	91.3%
00261	Unknown	202	0.3%	91.6%
34986	Port Saint Lucie	183	0.2%	91.8%
34983	Port Saint Lucie	173	0.2%	92.0%
32909	Palm Bay	170	0.2%	92.3%
34972	Okeechobee	166	0.2%	92.5%
34945	Fort Pierce	154	0.2%	92.7%
34952	Port Saint Lucie	142	0.2%	92.9%
32970	Wabasso	119	0.2%	93.1%
34997	Stuart	112	0.2%	93.2%
34974	Okeechobee	108	0.1%	93.4%
32951	Melbourne Beach	104	0.1%	93.5%
32969	Vero Beach	94	0.1%	93.6%
32964	Vero Beach	89	0.1%	93.8%
34994	Stuart	88	0.1%	93.9%
34987	Port Saint Lucie	87	0.1%	94.0%
32978	Sebastian	86	0.1%	94.1%
32905	Palm Bay	85	0.1%	94.2%
34984	Port Saint Lucie	77	0.1%	94.3%
34981	Fort Pierce	77	0.1%	94.4%
34957	Jensen Beach	62	0.1%	94.5%

Figure 105 - Top discharges by ZIP Code. Source: CCIRH 2022

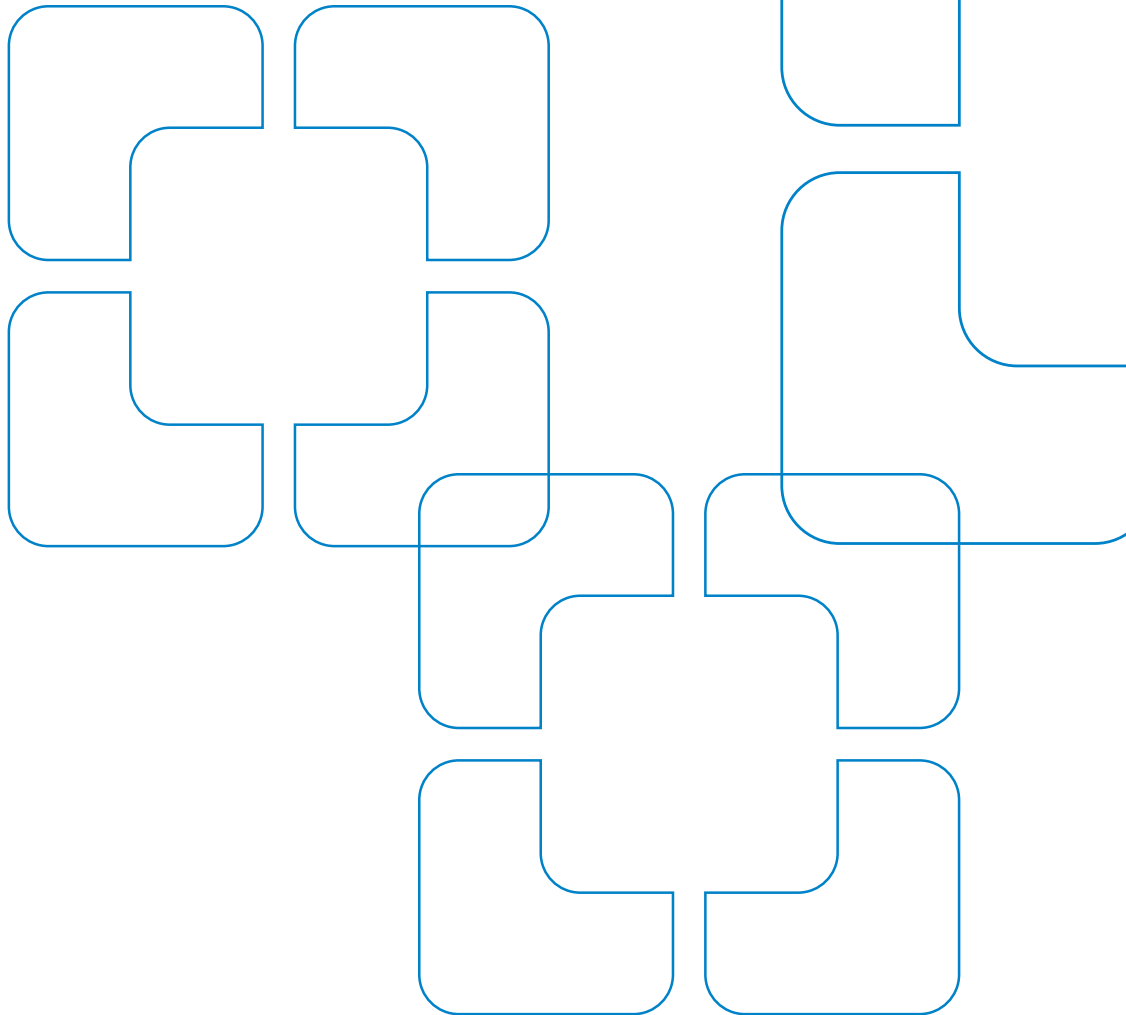


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Cleveland Clinic
Indian River Hospital

Implementation Strategy Report 2024



Cleveland Clinic Indian River Hospital
1000 36th Street
Vero Beach, FL 32960

2024 Community Health Needs Assessment
Implementation Strategy for Years 2025 – 2027
As required by Internal Revenue Code § 501(r)(3)

Name and EIN of Hospital Organizations Operating Hospital Facility:	Indian River Memorial Hospital Inc. 59-2496294 DBA: Cleveland Clinic Indian River Hospital
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Date Approved by Authorized Governing Body:	April 15, 2025
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Contact:	Cleveland Clinic chna@ccf.org
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Cleveland Clinic Indian River Hospital

2024 IMPLEMENTATION STRATEGY

I. INTRODUCTION AND PURPOSE

This written plan is intended to satisfy the requirements set forth in Internal Revenue Code Section 501(r)(3) regarding community health needs assessments and implementation strategies. The overall purpose of the Implementation Strategy is to align the hospital's limited resources, program services, and activities with the findings of the community health needs assessment ("CHNA").

A. Description of Hospital

Cleveland Clinic Indian River Hospital (CCIRH) is a part of the Cleveland Clinic, a nonprofit, multispecialty, academic medical center that integrates clinical and hospital care with research and education. The hospital offers preventive, primary, and acute hospital care and a broad array of specialty services. Our physicians represent nearly 50 medical specialties and subspecialties working in integrated teams to provide collaborative, patient-centered care. We work with community-based physicians to care for area residents and collaborate with our Cleveland Clinic colleagues across southeast Florida and Ohio to ensure access to the most advanced levels of medicine and innovative care. Additional information on the hospital and its services is available at my.clevelandclinic.org/florida.

The hospital is part of the Cleveland Clinic health system, which includes an academic medical center, eleven regional hospitals in northeast Ohio, a children's hospital, a children's rehabilitation hospital, five southeast Florida hospitals, and several other facilities and services across Ohio, Florida, and Nevada. Additional information about Cleveland Clinic is available at my.clevelandclinic.org/.

B. Hospital Mission

Cleveland Clinic Indian River Hospital's mission is:

Caring for life, researching for health, and educating those who serve.

II. COMMUNITY DEFINITION

For purposes of this report, Cleveland Clinic Indian River Hospital defined the community as Indian River County, as displayed on the map below. CCIRH analyzed demographic data by ZIP Code to ensure that medically underserved, low-income, or minority populations who live in the geographic areas from which the hospital draws patients were not excluded from the defined community. CCIRH acknowledges that additional patients served via telehealth may reside within a broader geographic area.

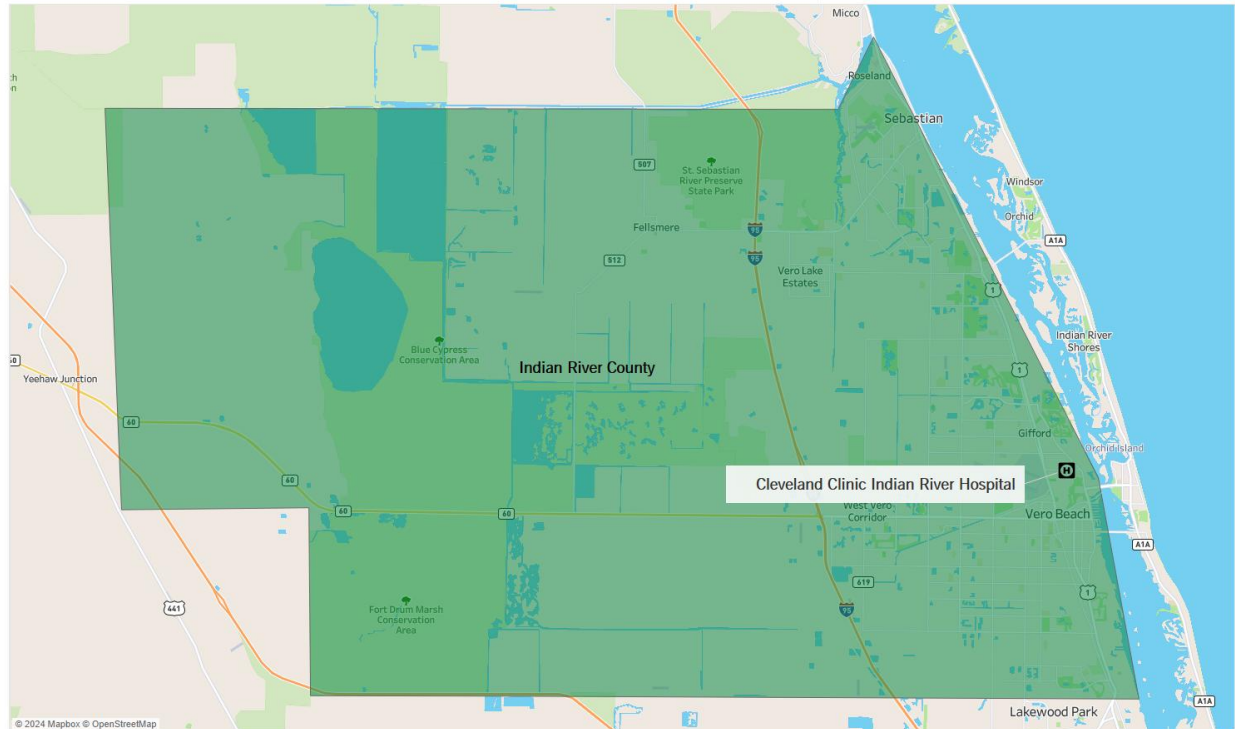


Figure 1 - Defined Community, Source: CCIRH

III. HOW IMPLEMENTATION STRATEGY WAS DEVELOPED

This Implementation Strategy was developed by a team of members of senior leadership at Cleveland Clinic Indian River Hospital and Cleveland Clinic representing several departments of the organizations, including clinical administration, medical operations, nursing, finance, population health, and community relations. This team incorporated input from the hospital's community and local non-profit organizations to prioritize selected strategies and determine possible collaborations. Alignment with county Community Health Assessments (CHA) and Community Health Improvement Plans (CHIP) was also considered. Each year, senior leadership at Cleveland Clinic Indian River Hospital and Cleveland Clinic will review this Implementation Strategy to determine whether changes should be made to better address the health needs of its communities.

Collaborating Organizations

The facilities within Cleveland Clinic's five-hospital regional health system in Florida collaborate to share community health data and resources throughout the CHNA and implementation strategy processes. For this assessment, Indian River Hospital collaborated with the following Cleveland Clinic hospitals: Martin North, Martin South, Tradition and Weston.

IV. SUMMARY OF THE COMMUNITY HEALTH NEEDS IDENTIFIED

CCIRH's significant community health needs as determined by analyses of quantitative and qualitative data include:

Community Health Needs

- Access to Care
- Behavioral Health
- Chronic Disease Prevention & Management
- Maternal & Child Health
- Socioeconomic Concerns

See the 2024 Cleveland Clinic Indian River Hospital CHNA for more information:

<https://my.clevelandclinic.org/florida/about/community>

V. NEEDS HOSPITAL WILL ADDRESS

A. Cleveland Clinic Community Health Initiatives

Each Cleveland Clinic hospital provides numerous services and programs in efforts to address the health needs of the community. Implementation of our services focuses on addressing structural factors important for community health, strengthening trust with residents and stakeholders, ensuring community voice in developing strategies, and evaluating our strategies and programs.

Strategies within the ISRs are included according to the prioritized list of needs developed during the 2024 CHNA. The hospital's community health initiatives combine Cleveland Clinic and local non-profit organizations' resources in unified efforts to improve health for all community members, ensure equal access to healthcare, and provide quality healthcare for Individuals from all backgrounds.

We recognize that to truly serve and improve the community, members of the community must be informed and involved. In an effort to better engage the community in the CHNA and implementation strategy process, Cleveland Clinic has introduced community conversations to

leverage the strengths of the existing network of collaborators and resources within the community. Members of the community, non-profit organizations, local government, and key community stakeholders have been invited to participate. By convening with the community and intentionally allocating resources where they are needed the most, it is our hope to make sustainable changes towards building healthier communities.

B. Cleveland Clinic Indian River Hospital 2024 Implementation Strategy

The Implementation Strategy Report includes the priority community health needs identified during the 2024 Cleveland Clinic Indian River CHNA and hospital-specific strategies to address those needs from 2025 through 2027.

Access to Care

Access to affordable, quality health care is particularly problematic for individuals and may include barriers of health insurance, affordability, provider shortages, transportation, geographical barriers, and a lack of awareness regarding available resources. Cleveland Clinic continues to evaluate methods to improve community members' access to care.

All Cleveland Clinic hospitals will continue to provide medically necessary services to all patients regardless of race, color, creed, gender, country of national origin, or ability to pay. [Cleveland Clinic Financial Assistance](#).

Initiatives Including Collaborations and Resources Allocated	Anticipated Impacts
A Utilizing medically secure online and mobile platforms, connect patients with Cleveland Clinic providers for telehealth and virtual visits	Overcome geographical and transportation barriers, improve access to specialized care
B Promote 211 Palm Beach/Treasure Coast and Mental Health Collaborative local resource directories	Improve awareness of existing resources, improve access to social services and community supports
C Collaborate with partners like the Visiting Nurse Association to improve access to primary care and screenings through mobile care units and community outreach services	Increase the portion of individuals who report a recent well check, increase screening rates

Behavioral Health

Cleveland Clinic Indian River Hospital’s 2024 CHNA identified mental health, substance use disorders, anxiety, and depression as significant behavioral health concerns. Certain populations within the community are disproportionately affected by behavioral health issues. Specific concerns included an increased number of Baker Acts among children and adolescents, indicating an increase in behavioral health issues among this population.

Initiatives Including Collaborations and Resources Allocated	Anticipated Impacts
A Continue to provide peer support to individuals who have experienced an opioid-related overdose	Reduce rate of relapse, decrease overdose death rates
B Through provider partnerships and participation in local taskforces, workgroups, and coalitions, continue to build a continuum of care and implement health promotion, health education, and outreach events	Increase the number of individuals with behavioral health conditions who participate in treatment, reduce stigma, improve early identification of behavioral health conditions
C Provide Mental Health First Aid trainings	Improve mental wellness; increase knowledge of signs, symptoms, and risk factors for behavioral health issues; increase the proportion of individuals with behavioral health conditions who receive treatment

Chronic Disease Prevention & Management

Cleveland Clinic Indian River Hospital’s 2024 CHNA identified chronic disease and other health conditions as prevalent in the community (ex. heart disease, stroke, diabetes, asthma and other respiratory diseases, bleeding disorders, and cancer). Initiatives related to the prevention and management of chronic diseases seek to improve behavioral risk factors, promote screening and early identification, and support healthy aging across the lifespan.

Initiatives Including Collaborations and Resources Allocated	Anticipated Impacts
A Continue to partner with the Florida Department of Health in Indian River County implement health promotion, health education, support groups, outreach events, and health screenings, focusing on providing resources to underserved populations and those experiencing differences in health outcomes	Improve physical activity, improve nutrition, increase screening rates for heart disease risk factors, improve screening follow-up rates, reduce skin cancer incidence and death rates

Maternal & Child Health

Cleveland Clinic Indian River Hospital’s 2024 CHNA identified prenatal care, maternal and infant mortality, pregnancy risk factors, and affordable childcare as maternal and child health concerns within the community.

Initiatives Including Collaborations and Resources Allocated	Anticipated Impacts
A Participate in coalitions and task forces to align programs, share best practices, and coordinate a systemic approach to improving quality of care and birth outcomes	Reduce differences in maternal and infant mortality and related health outcomes
B Partner with community-based organizations (e.g. Hope for Families Center, local school districts), to provide evidence-based K-12 programming, education, community events, and health promotion	Improve rates of road traffic, bicycle, child passenger, pedestrian, and drowning injuries; prevent sudden infant death syndrome, improve maternal and infant health outcomes
C In partnership with the Indian River County Healthy Start Coalition, develop and refine a replicable, facility-level community doula program model for implementation across Florida	Improve preterm birth rate, improve breastfeeding rates, reduce infant and maternal mortality

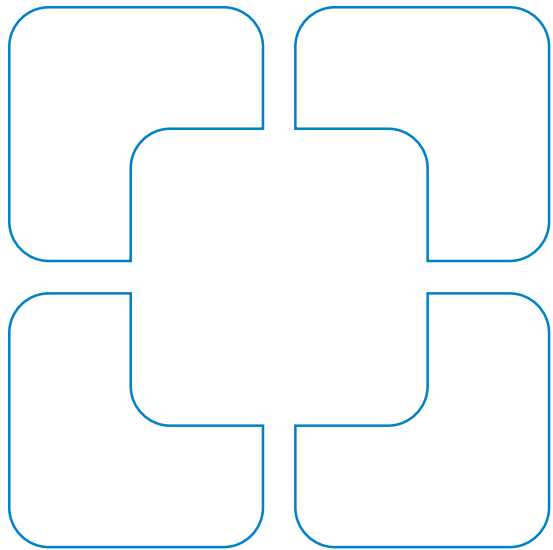
Socioeconomic Concerns

Cleveland Clinic Indian River Hospital's 2024 CHNA identified social drivers that impact population health. One of the greatest concerns for residents in Indian River County is affordable housing.

Cleveland Clinic is committed to promoting access and inclusion for all. To address differences in health outcomes, we lead efforts in clinical and non-clinical programming, advocacy, building partnerships, sponsorship, and community investment. We are actively partnering with community leaders to help strengthen community resources. Cleveland Clinic is optimistic that through implementing these long-term efforts, frequently re-assessing the community's needs, and remaining committed to addressing key social drivers of health, sustainable change can be made.

Initiatives Including Collaborations and Resources Allocated	Anticipated Impacts
A Partner with community-based organizations to improve access to healthy foods	Improve self-efficacy associated with healthy eating, improve nutrition
B Contribute to the development of the local workforce through job creation initiatives in partnership with United Against Poverty	Improve poverty rates, increase the proportion of individuals with health insurance coverage
C Collaboration with partners (e.g. The Source Dignity Village) to provide temporary housing and supports	Increase employment, reduce rate of emergency department visits, and improve mental health outcomes for individuals with housing insecurity
D Establish a Community Advisory Council comprised of individuals representing local community-based organizations that will provide a mechanism for the continued integration of community voice into community benefit programming The Community Advisory Council will collaborate to establish additional strategies and action items related to social drivers of health	Increase collaboration with community-based organizations, develop sustainable initiatives
E Explore potential partnerships, interventions, and evidence-based programs to support the overall health of veteran populations by addressing key social drivers of health	Improve housing stability, increase access to healthcare, increase employment, and improve access to social supports

For more information regarding Cleveland Clinic Community Health Needs Assessments and Implementations Strategy Reports, please visit www.clevelandclinic.org/CHNAReports or contact CHNA@ccf.org.



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