



HCA Florida

**UCF Lake Nona
Hospital**

UCF Lake Nona Hospital Community Health Needs Assessment 2026-2029 Implementation Strategy Plan



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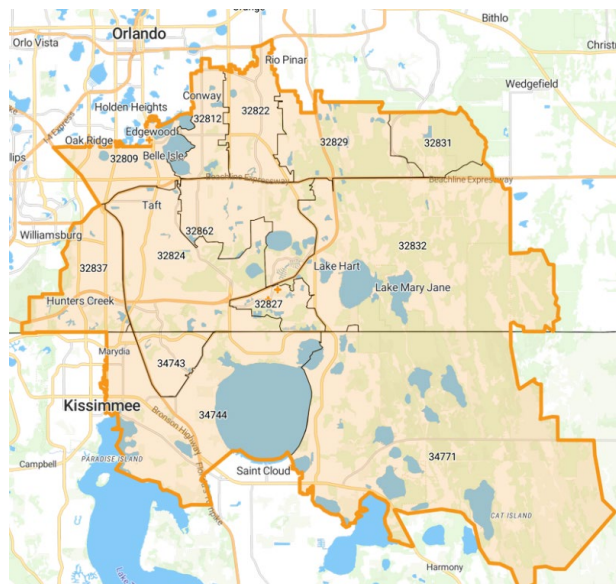
About UCF Lake Nona Hospital

Opening in 2021, the UCF Lake Nona Hospital is a full-service acute care facility located adjacent to the University of Central Florida College of Medicine within Orlando's Lake Nona Medical City. The hospital serves Lake Nona and surrounding communities in southeast Orlando and Osceola County and currently includes 64 inpatient beds, a 20-bed emergency department, four operating rooms, a cardiac catheterization laboratory, comprehensive imaging and laboratory services, and private birthing suites. Designed to support a rapidly growing region, the facility has the capacity to expand with long-term plans accommodating up to 500 beds. Established through a joint venture between HCA Healthcare's North Florida Division and UCF Academic Health, the hospital integrates academic medicine with the nation's largest healthcare systems and is part of the 650-acre Lake Nona Medical City health and life sciences campus.

Mission Statement

Above all else, we are committed to the care and improvement of human life. We achieve this through the delivery of exceptional patient care, groundbreaking research and outstanding education.

Service Area and Community Profile



UCF Lake Nona Hospital is located within Lake Nona Medical City, a rapidly growing health and life sciences hub in Central Florida. The hospital's primary service area includes five ZIP codes across Orange County (32824, 32827, 32832) and Osceola County (34743, 34744), with an additional secondary service area spanning six ZIP codes in Orange County and one in Osceola County.

The region is experiencing significant population growth, contributing to increased demand for healthcare services. While growth in Orange County has begun to stabilize following a period of rapid expansion, Osceola County continues to grow at a faster rate, indicating a rising need for

infrastructure, housing, and access to care. Central Florida overall remains one of the fastest-growing regions in the state.

The population in the service area is younger and more diverse than state and national averages, with higher proportions of children, working-age adults, and Hispanic or Latino residents. Osceola County, in particular, has a majority Hispanic population, while both counties reflect substantial racial and ethnic diversity. As the population continues to grow and evolve, these demographic trends highlight the importance of culturally responsive care, expanded access to services, and proactive community health planning to meet emerging needs.

Community Health Needs Assessment Overview

As a hybrid of for-profit and non-for-profit entity, the hospital is required to complete a Community Health Needs Assessment (CHNA) every three years under the Affordable Care Act and IRS Section 501(r)(3), followed by a three-year Implementation Strategy Plan (ISP). Beyond compliance, CHNA supports broader community health improvement by aligning stakeholders around shared data, priorities, and resources to improve health outcomes and advance equity. UCF Lake Nona Hospital partnered with Crescendo Consulting Group to conduct this CHNA, which uses primary and secondary data to assess community health needs, assets, and service gaps. Findings are prioritized to guide a three-year action plan, with intentional outreach to include underrepresented community perspectives.



Secondary research summarizes key findings from secondary data, information originally collected by external sources for other purposes. Data were drawn from credible local, state, and national sources, including public health surveillance systems, census data, administrative records, and peer-reviewed studies. These sources provided insight into demographic trends, health outcomes, risk factors, and access to care. Both quantitative data (such as morbidity, mortality, and health care utilization rates) and qualitative information (including prior assessments and policy reports) were analyzed. Major sources included the U.S. Census Bureau’s American Community Survey Five-Year Estimates, the Centers for Disease Control and Prevention, and state health department data. All data reflect information available prior to December 2025 and are cited throughout the report, though some original datasets may not be publicly accessible.

Primary research was conducted between October 2025 and January 2026 through one-on-one key informant interviews and focus group discussions. This qualitative approach gathered firsthand insights from individuals closely connected to populations with significant or unique health needs. Interviews and focus groups, conducted both in-person and virtually, followed a consistent format focused on community strengths, available resources, service gaps, and barriers affecting health and well-being. Key informant interviews provided in-depth perspectives, while focus groups captured shared experiences and differing viewpoints among community members. Findings are presented as narrative summaries, supported by participant quotes that illustrate key themes, including strengths, root causes of community needs, and potential action areas.

The community survey was administered online and in print in English, Spanish, and Haitian Creole, using targeted outreach and reminders to encourage participation. While responses provided valuable insight from across the service area, the survey was not a random sample, and results are not fully representative; subgroup comparisons were limited and not statistically tested.

Community health priorities were identified through a structured, two-step process. Leadership from UCF Lake Nona Hospital and UCF Academic Health initially reviewed and scored needs using the Hanlon Method, followed by further refinement and final selection by the Implementation and Monitoring Committee. The top priorities for the 2026–2029 Implementation Strategy Plan are access to care, maternal and child health, and unintentional injury.

Data limitations include time lags in publicly available data and potential participation bias, meaning findings may not fully reflect all community perspectives.

Content and thematic analyses were conducted using ATLAS.ti software to extrapolate the community considerations, strengths, community need root causes, and action areas.

- **Strengths** are assets within the community that can serve as resources to address the needs identified.
- **Community Needs** are the underlying factors and conditions that drive the most pressing challenges, barriers, and concerns faced in the community.
- **Action Areas** are the tangible gaps, barriers, and challenges that participants identified, as well as the strategies that were highlighted as opportunities to address them.

Source: Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. Nursing & Health Sciences, 15(3), 398–405. wiley. <https://doi.org/10.1111/nhs.12048>

Health Needs Prioritization

The prioritization of community health needs represents a critical step in the CHNA process. To determine which needs UCF Lake Nona Hospital will address in its 2026–2029 Implementation Strategy Plan (ISP), a structured, multi-phase prioritization approach was conducted. The first prioritization session was held on January 21, 2026, and included executive leadership from UCF Lake Nona Hospital and UCF Academic Health. The session was facilitated by Crescendo Consulting Group. Participants were presented with a comprehensive review of both quantitative and qualitative data collected during the CHNA process. This was followed by a facilitated discussion of the identified community health needs.

During the discussion, leadership evaluated each need using the following considerations:

- Magnitude and severity of the issue
- Feasibility of intervention
- Potential barriers to implementation
- Anticipated impact on the service area if unaddressed

Following the discussion, participants independently rated each identified need on a scale of magnitude, severity, and feasibility. Scores were aggregated and analyzed using the Hanlon Method to generate an overall priority ranking.

Identified Community Health Needs

A total of 17 community health needs were identified and voted on during the first prioritization session.

Rank	Community Health Need
1	Health Literacy
2	Infant Mortality
3	Maternal Child Health Care Providers
4	Lack of Knowledge of Available Resources
5	Lack of Primary Care
6	Workforce Recruitment and Retention
7	Unintentional Injury (i.e., water safety)
8	Growing Gap Between Insured and Uninsured / Underinsured
9	Lack of Behavioral Health Services for Youth and Young Adults
10	Behavioral Health Workforce Shortages
11	Perinatal Supports
12	Food Security
13	Affordable Housing
14	Increased Cost of Living
15	Transportation
16	Affordable Childcare Services
17	Lack of Specialists (i.e., cardiologists, orthopedics, endocrinologists, etc.)

Final Priority Selection

A second prioritization meeting was held on February 12, 2026, to determine which needs would be formally adopted as priority areas for the 2026–2029 ISP. Prior to the meeting, participants completed a structured survey to further evaluate each ranked need using organizational capacity criteria:

Criteria	Definition
Locus of control	The degree of control that the healthcare system has to influence change in the listed need.
Existing programming	Programs that are currently operating within the healthcare system.
Financial Capacity	Does the healthcare system have the funding or other resources, like available staff or community benefit dollars, to address this need?
Skill Set Capacity	Does the healthcare system workforce have the necessary skills to address this need?

During the meeting, participants reviewed survey findings and engaged in a facilitated discussion to:

- Identify needs that were not viable for direct hospital intervention
- Recognize interrelated needs that could be strategically bundled
- Determine overarching focus areas aligned with organizational strategy and capacity

Following deliberation, the hospital selected the following three community health priorities for the 2026–2029 Implementation Strategy Plan:

- Access to Care
- Maternal Child Health
- Unintentional Injury

These priorities reflect both demonstrated community need and the organization’s capacity to implement meaningful, measurable interventions.

Needs Outside of the Scope of this Plan

UCF Lake Nona Hospital recognizes the importance of several additional community health needs, including:

- Increased Cost of Living
- Affordable Housing
- Affordable Childcare Services
- Behavioral Health Workforce Shortages
- Lack of Behavioral Health Services for Youth and Young Adults

These areas fall outside the hospital’s primary scope of influence. Based on established prioritization criteria, the hospital has determined that it does not have sufficient direct control, resources, or specialized workforce to effectively lead initiatives in these areas.

Additionally, Central Florida benefits from a strong network of community organizations and subject matter experts who are better positioned to address these complex social and systemic challenges. UCF Lake Nona Hospital will continue to support and collaborate with these partners when appropriate, while focusing its resources on priority areas where it can have the greatest impact.

Governance, Monitoring and Reporting

UCF Lake Nona Hospital has established a CHNA Implementation and Monitoring Committee (Committee) to oversee implementation activities related to the CHNA. The Committee is responsible for reviewing performance metrics, assessing outcomes, identifying gaps, and recommending adjustments to ensure continuous improvement and alignment with community health priorities.

The hospital is committed to transparency and accountability in its community health improvement efforts. To support this commitment, the hospital prepares an annual impact report that summarizes progress on community initiatives aligned with identified priority areas. These reports will be made publicly available and shared with key community stakeholders and partners when available.

In addition, UCF Lake Nona Hospital seeks to engage community members and partners to obtain feedback on implemented initiatives and overall impact. Feedback will be collected through ongoing collaboration with community-based organizations, participation in community meetings and coalitions, and direct input from program participants and stakeholders, as appropriate. This input will be used to inform program enhancements, address emerging community needs, and guide future implementation planning.

This implementation strategy plan was approved by the UCF Academic Health Governors on July 21, 2026, and the UCF Academic Health Board approved on August 11, 2026.



Community Health Priorities

Access to Care

Data Overview

Data shows that approximately 11.0% to 12.0% of residents in Orange and Osceola counties are uninsured. Medicaid coverage is higher in Osceola County at 23.0%, reflecting possible greater economic vulnerability.¹ These provider shortages may contribute to delayed care and reduced availability of specialized services across both counties.²

HEALTH CARE PROVIDER RATIO (PEOPLE PER PROVIDER)

Orange County				Osceola County			
	2019	2025			2019	2025	
	1,234 : 1	607 : 1			2,237 : 1	740 : 1	
Primary Care Provider	Florida: 1,422 : 1	Florida: 691 : 1		Primary Care Provider	Florida: 1,422 : 1	Florida: 691 : 1	
	2019	2025			2019	2025	
	2,597 : 1	1,871 : 1			3,622 : 1	2,576 : 1	
Dentist	Florida: 2,037 : 1	Florida: 1,482 : 1		Dentist	Florida: 2,037 : 1	Florida: 1,482 : 1	
	2019	2025			2019	2025	
	682 : 1	433 : 1			1,829 : 1	1,192 : 1	
Pediatrician	Florida: 1,037 : 1	Florida: 753 : 1		Pediatrician	Florida: 1,037 : 1	Florida: 753 : 1	
	2019	2025			2019	2025	
	3,005 : 1	1,717 : 1			4,169 : 1	2,441 : 1	
OB / GYN	Florida: 4,753 : 1	Florida: 3,141 : 1		OB / GYN	Florida: 4,753 : 1	Florida: 3,141 : 1	

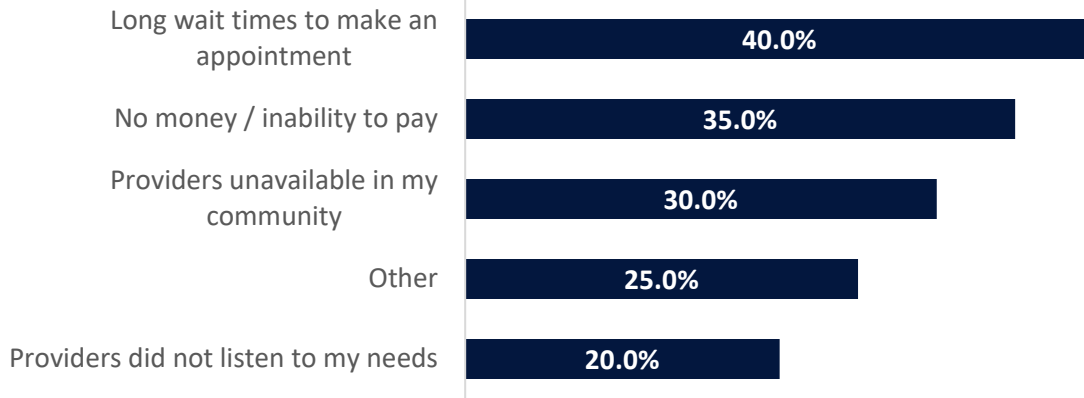
Source: National Plan and Provider Enumeration System NPI

¹ U.S. Census Bureau American Community Survey 2019-2023 Five-year Estimates.

² National Plan and Provider Enumeration System NPI, 2025.

Community input from the 2026 CHNA identified key barriers to healthcare access among respondents unable to obtain needed care, including long wait times to make an appointment, inability to pay among the top three reasons given. Additional opportunities to improve access were identified through broader community engagement efforts.

WHAT KEPT YOU FROM ACCESSING MEDICAL CARE WHEN YOU NEEDED IT?



Orange County

12.3%

Population without Insurance

Osceola County

10.9%

Opportunities for Improving Healthcare Access



Expand operational hours



Utilize mobile services



Implement preventative health programs



Increase awareness



Support health provider workforce initiatives

Goal: Improve access to preventive, primary, acute, and chronic care services for underserved populations in the service area.

Objective 1:	Increase access to preventive screenings, health education, and primary care services among residents of high-need communities.
Action 1.1	Deploy mobile health clinic in high-need communities to provide no-cost preventive screenings, health education, and information about available healthcare resources.
Action 1.2	Support linkage to care through care coordination services that assist individuals identified through mobile clinic screenings in establishing a medical home, connecting with appropriate healthcare providers, scheduling appointments when feasible, and addressing barriers to follow-up care.
Action 1.3	Support community-based organizations that provide preventive screenings and health education through partnerships, outreach collaboration, and resource support to expand access within high-need communities.

Objective 2:	Improve access to healthcare services among underserved populations by supporting community-based strategies that reduce barriers to care and strengthen connections to available health resources.
Action 2.1	Strengthen community-based efforts that connect underserved populations to healthcare services across the continuum of care through coordinated, partnership-based approaches that improve access and shared awareness of available resources.
Action 2.2	Support community-based initiatives that reduce barriers to healthcare access by improving health literacy, language-appropriate services, and individuals' ability to navigate and connect to available healthcare and community resources.
Action 2.3	Expand efforts that improve access to affordable healthcare services through insurance enrollment assistance, Financial Assistance Policy (FAP) education, benefit navigation, and other affordability-focused interventions.

UCF Lake Nona Hospital Programs

Financial Assistance Policy (FAP) supports access to medically necessary and emergency care by reducing financial barriers for uninsured and underinsured patients. The program provides free or discounted care based on household income and family size, using federal poverty guidelines to determine eligibility.

The program ensures that patients are informed of available financial support through multiple touchpoints, including hospital registration, billing communications, and community-based outreach. Information about the policy, application process, and eligibility criteria is made accessible both in person and online, with materials available in multiple formats and languages. Patients are offered assistance with completing applications and verifying required documentation.

Integrated with broader access-to-care efforts the policy helps connect eligible individuals to navigate the application process and understand their options. Our policy reduces cost-related barriers and aligns with the hospital's commitment to access to care for all.

Hands Only CPR Activities provides community-based training designed to increase bystander response during cardiac and emergency events. This initiative delivers hands-on instruction in Hands-Only CPR, and basic emergency response techniques to community members, local businesses, schools, and nonprofit organizations within the hospital's service area. The program aims to improve survival outcomes by equipping individuals with the knowledge and confidence to act quickly in emergency situations, while also expanding awareness and access to life-saving resources such as AEDs.

UCF Health Mobile Health Clinic expands access to preventive services, primary care, chronic disease management, and health education for underserved populations. By delivering no-cost services directly within community settings, the program helps reduce common barriers to care, including lack of insurance, transportation challenges, and limited appointment availability. This initiative aligns with UCF Lake Nona Hospital's CHNA Implementation Strategy by increasing access to essential healthcare services and promoting early detection and disease prevention.

The mobile unit is a 38-foot clinic equipped with two exam rooms and a dedicated space for patient education and counseling, with additional outdoor areas for registration and outreach activities. Services are primarily focusing on high-need communities. The program partners with local organizations to identify priority populations, promote services, and ensure culturally responsive care. Outreach locations include community centers, schools, shopping areas, and places of worship, enabling the clinic to meet individuals where they live, work, and gather.

Community Initiatives

UCF Academic Health Inc.

UCF College of Health Professions and Sciences, Medicine, and Nursing implemented Heart Health at the Laundromat initiative, a community-based cardiometabolic disease (CMD) prevention program. In partnership with Pineapple Healthcare, QLatinx, and Abrigando Corazones Inc., the program delivers biweekly health education and screening services in laundromat settings located within priority ZIP codes. This innovative, nontraditional care model increases access to preventive services by meeting underserved populations where they live and gather. The initiative promotes heart health awareness, early detection, and adoption of healthy behaviors through evidence-based education and primary prevention screenings.

UCF College of Nursing offers HeartSmart Living for Older Adults, an eight-week, evidence-based educational program designed to improve cardiovascular health among underserved older adults. Delivered in partnership with local community centers within the hospital's primary service area, the program focuses on heart-healthy lifestyle behaviors, including nutrition, physical activity, medication adherence, and self-management techniques. This initiative enhances access to preventive education and empowers older adults to better manage their health and reduce their risk of chronic disease.

Shepherd's Hope in partnership with the Florida Department of Health Orange County provides uninsured and underserved individuals with access to cardiovascular health resources and education. The program distributes cardiac wellness kits, facilitates volunteer-led health education sessions, and utilizes evidence-based materials developed by the American Heart Association to improve heart health literacy. By promoting early prevention, self-monitoring, and healthy lifestyle behaviors, this initiative expands access to essential tools and supports improved cardiovascular outcomes among vulnerable populations.

Partnerships

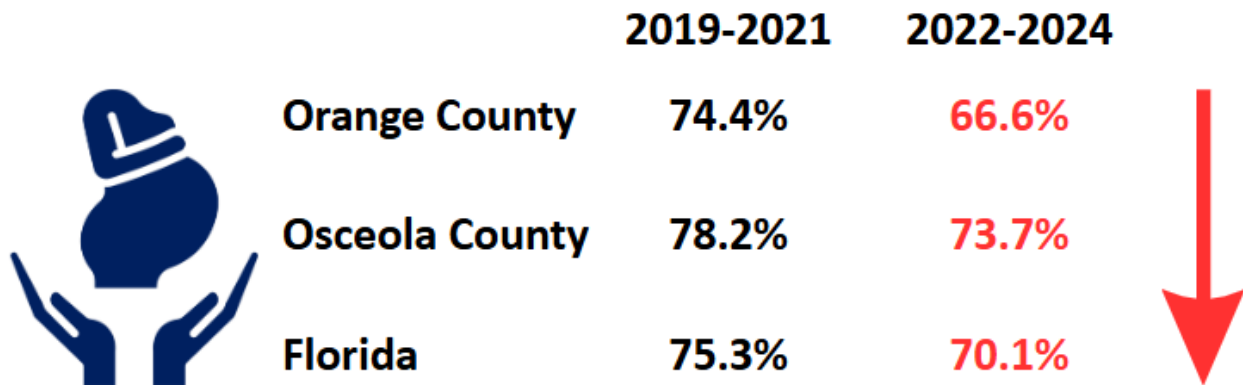
- Federally Qualified Health Centers (FQHCs)
- Local health departments (Orange & Osceola Counties)
- Community-based organizations serving uninsured/underserved populations
- Faith-based organizations and community centers

Maternal Child Health

Data Overview

Access to first-trimester prenatal care declined across Orange County, Osceola County, and Florida from 2019-2021 to 2022-2024, with Orange County experiencing the sharpest decrease (74.4% to 66.6%) and falling below both Osceola County (73.7%) and the Florida figure (70.1%).

BIRTHS TO MOTHERS WITH FIRST-TRIMESTER PRENATAL CARE (PERCENT OF TOTAL BIRTHS)



Source: Florida Department of Health, Division of Public Health Statistics and Performance Management. Florida HealthCHARTS, Pregnancy and Young Child Profile

Policy Recommendations to Improve Maternal Health Outcomes



Expand BIPOC maternal health provider pipelines through scholarships and internships.



Support mentorship and residency programs to recruit and retain diverse providers.



Require training in cultural competence, bias, and respectful maternity care for providers.

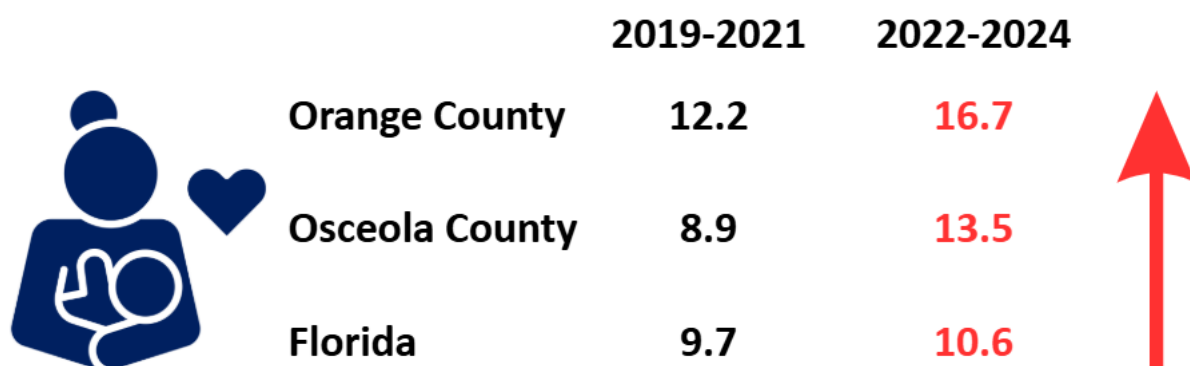


Integrate bias and cultural competence into credentialing and license renewal.

Source: The Policy Center for Maternal Mental Health

During the same period, severe maternal morbidity increased in both counties, with Orange County rising from 12.2 to 16.7 and Osceola County from 8.9 to 13.5 per 1,000 delivery hospitalizations, both exceeding the state rate of 10.6 in 2022–2024. Together, these trends indicate worsening maternal health outcomes and potential gaps in timely prenatal and maternal care access, particularly in Orange County.³

SEVERE MATERNAL MORBIDITY RATE PER 1,000 DELIVERY HOSPITALIZATIONS



In both Orange and Osceola counties, individuals identifying as Black or African American experienced the highest rates of severe maternal morbidity in both time periods, with rates increasing between 2019–2021 and 2022–2024.

SEVERE MATERNAL MORBIDITY BY RACE AND ETHNICITY⁴

	Orange County		Osceola County		Florida	
	2019-2021	2022-2024	2019-2021	2022-2024	2019-2021	2022-2024
Total	12.2	16.7	8.9	13.5	9.7	10.6
White	7.6	11.8	4.6	11.0	7.8	8.3
Black or African American	18.1	24.2	17.3	17.8	14.8	16.5
Other Race	7.6	11.8	10.9	15.9	10.1	11.9
Hispanic/Latino	11.3	14.4	8.9	14.5	8.8	9.6
Non-Hispanic/Latino	12.5	18.4	8.4	11.1	10.1	11.1

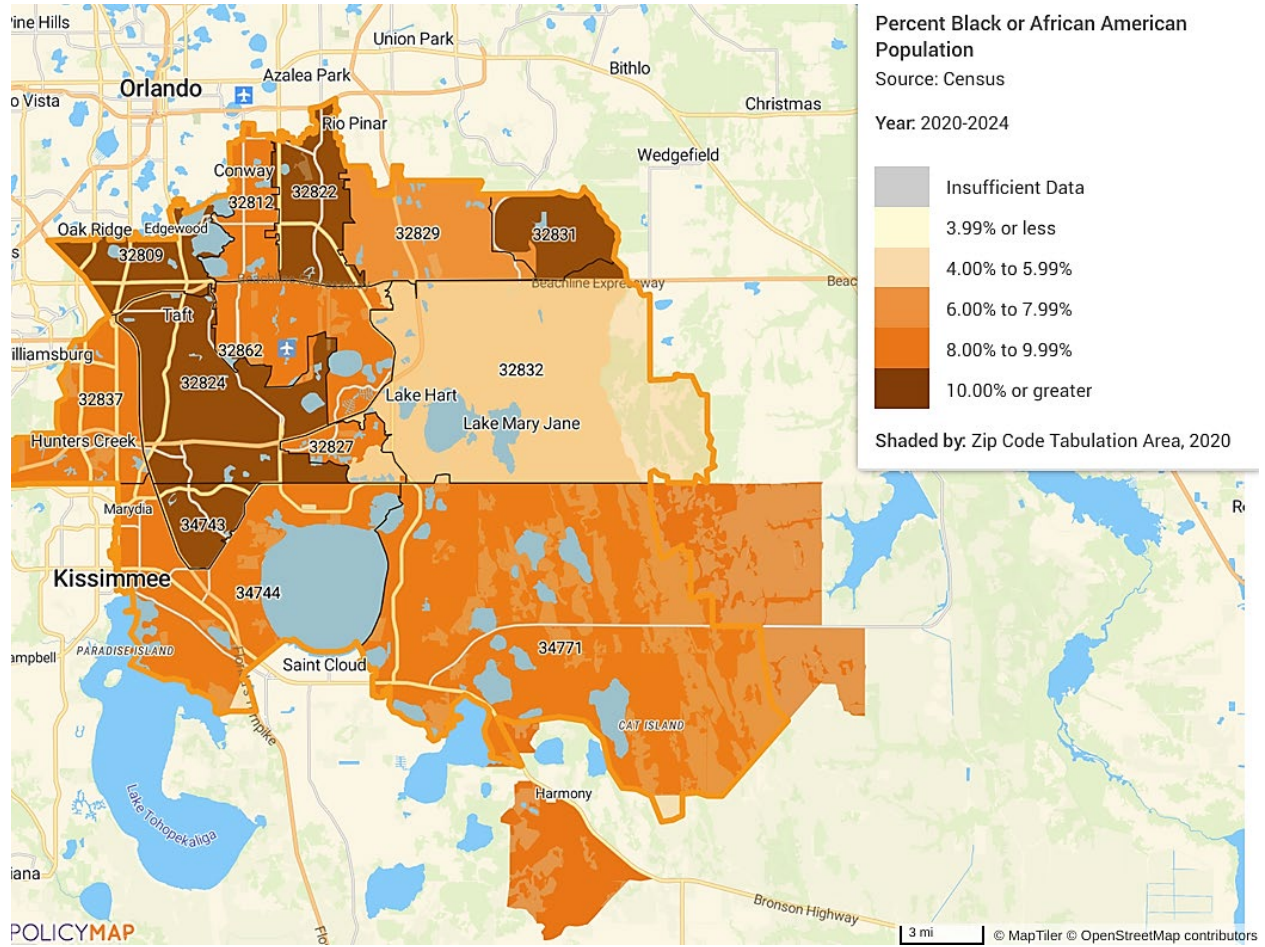
Source: Florida Department of Health, Bureau of Vital Statistics 2021-2023

³ Florida Department of Health, Division of Public Health Statistics and Performance Management. Florida HealthCHARTS, Pregnancy and Young Child Profile. Florida Department of Health, Bureau of Vital Statistics 2021-2023.

⁴ Severe Maternal Morbidity is calculated using codes specified by the Alliance for Innovation on Maternal Health among delivery hospital inpatient records for females aged 12-55. Includes acute myocardial infarction, aneurysm, acute renal failure, adult respiratory distress syndrome, amniotic fluid embolism, cardiac arrest/ventricular fibrillation, conversion of cardiac rhythm, disseminated intravascular fibrillation, eclampsia, heart failure/arrest during surgery or procedure, puerperal cerebrovascular disorders, pulmonary edema/acute heart failure, severe anesthesia complications, sepsis, shock, sickle cell disease with crisis, air and thrombotic embolism, blood products transfusion, hysterectomy, temporary tracheostomy or ventilation.

<https://www.Floridahealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=NonVitalInd.Dataviewer&cid=0867>

ESTIMATED PERCENT OF POPULATION WHO WERE BLACK OR AFRICAN AMERICAN, BETWEEN 2020-2024



Goal: Improve maternal and infant health outcomes by increasing access to education, early prenatal care, and supportive services for populations experiencing the greatest burden of adverse outcomes and the highest mortality rates.

Objective 1:	Increase participation in prenatal, postpartum, and parenting education programs.
Action 1.1	Provide accessible prenatal and postpartum education (e.g., childbirth, breastfeeding, newborn care) through community-based locations, clinical settings, and virtual platforms, with targeted outreach in areas with elevated maternal and infant health risks.
Action 1.2	Expand programs that support safe infant care practices, maternal mental health, and overall well-being, including support groups, depression screenings, and wellness activities.

Objective 2:	Improve early and continuous access to prenatal and postpartum care for individuals with increased risk of poor maternal and infant outcomes.
Action 2.1	Integrate standardized screening for social drivers of health (SDOH) during prenatal and postpartum visits and establish closed-loop referral systems connecting patients to services such as home visiting, nutrition support, housing resources, and care coordination.
Action 2.2	Partner with community organizations and local leaders to increase awareness, trust, and participation in maternal and infant health programs and services.

UCF Lake Nona Hospital Programs

Breastfeeding 101 Education is an educational class led by a Registered Nurse who is also an International Board-Certified Lactation Consultant (IBCLC). This program is designed to equip expectant and new parents with the knowledge and skills necessary to successfully initiate and sustain breastfeeding. Topics include breastfeeding fundamentals, milk production, hormonal influences, positioning and latch techniques, pumping, and common challenges. The program aims to promote optimal infant nutrition, support maternal confidence, and improve breastfeeding outcomes.

Childbirth Education Series is a comprehensive five-week program designed to prepare expectant families for labor, delivery, and early postpartum care. Led by a Registered Nurse, the series provides evidence-based education to increase knowledge, confidence, and preparedness for childbirth. Weekly sessions include preparing for birth and maintaining a healthy pregnancy; pain management techniques and labor progression; medical interventions and cesarean birth; newborn care and postpartum recovery; and

breastfeeding education led by a lactation consultant. The program supports informed decision-making and positive birth experiences.

Cribs for Kids® National Safe Sleep Hospital UCF Lake Nona Hospital is a certified participant in the Cribs for Kids® National Safe Sleep Hospital Certification Program, reflecting its commitment to promoting infant safety and reducing sleep-related infant deaths. This designation recognizes adherence to nationally recognized safe sleep guidelines and the hospital's efforts to educate families on best practices, including placing infants on their backs to sleep, using a firm sleep surface, and maintaining a safe sleep environment. The program reinforces the hospital's role in advancing maternal and child health through evidence-based education and community outreach.

Prenatal Yoga on the Green is a free, community-based program offered to expectant mothers to support physical and emotional well-being during pregnancy. Led by a certified yoga instructor, the class incorporates gentle movement, breathing techniques, and mindfulness practices tailored to pregnancy. The program aims to reduce stress, improve flexibility and strength, and promote overall maternal health, while also fostering community connection and support among participants.

Community Initiatives

Healthy Start Coalition of Osceola County works to improve pregnancy and early childhood outcomes by supporting pregnant women and families with children up to age three. Through its Connect program, the Coalition received approximately 7,000 referrals in 2024, linking families to education, care coordination, and home-visiting services such as Healthy Start. With support from the Community Health Advancement grant, the Coalition expanded its Direct Connect program by embedding staff within a birthing hospital to engage families prior to discharge, assess postnatal risks, and provide immediate referrals to home visiting and supportive services. This initiative strengthens early intervention efforts and improves access to care for at-risk populations.

Libby's Legacy Breast Cancer Foundation expands access to breast cancer screening, diagnostic services, and patient navigation for uninsured and underserved women in Orange and Osceola counties. The program provides timely follow-up care, individualized education, and financial assistance for essential diagnostic procedures. By reducing barriers to early detection and treatment, this initiative plays a critical role in improving women's health outcomes and addressing disparities in access to care.

Second Harvest Food Bank of Central Florida enhances access to nutritious food and nutrition education for pregnant and postpartum individuals through monthly grocery box distributions and evidence-based education. Participants also receive meal preparation kits and educational materials to support healthy eating behaviors. This initiative addresses food insecurity, promotes nutrition knowledge, and supports healthy lifestyle habits, contributing to improved maternal and child health outcomes.

UCF Academic Health Inc.

UCF College of Nursing Mothers Moving Forward Project is designed to support pregnant and postpartum women through education and self-management strategies. The program focuses on self-blood pressure monitoring, mental health awareness and coping strategies, and physical activity aligned with American College of Obstetricians and Gynecologists recommendations. By promoting healthy lifestyle behaviors and early identification of potential health risks, the program aims to improve maternal health outcomes and empower women throughout the perinatal period.

Partnerships

- OB/GYN providers and pediatric practices
- WIC programs and early childhood organizations
- Home visiting programs
- Local doulas and maternal health advocates

Unintentional Injury

Data Overview

Fatal unintentional injuries in Orange and Osceola counties are primarily driven by falls and motor vehicle crashes. In Orange County, fatal falls increased from 12.9 to 13.6 per 100,000 population between 2019–2021 and 2022–2024, exceeding the Florida rate of 12.0. Drowning mortality remained relatively stable across both counties and the state during this period. Nonfatal falls generated the highest emergency department visit rates, with Orange County nearly doubling from 323.0 to 703.5 per 100,000 population. Motor vehicle crash-related emergency visits also increased, rising from 176.5 to 313.6 in Orange County and from 268.7 to 273.1 in Osceola County. Together, these trends indicate a growing injury burden related to falls and transportation-related incidents, particularly in Orange County.⁵



Goal: Reduce preventable injuries and strengthen community capacity to respond to emergency situations.

Objective 1:	Increase community knowledge and skills in injury prevention and emergency response.
Action 1.1	Provide community-based education on fall prevention, water safety, and general injury prevention strategies, targeting high-risk populations.
Action 1.2	Deliver Hands-Only CPR and AED training to community members, schools, workplaces, and community organizations, with a focus on increasing bystander response rates.

Objective 2:	Promote water safety and reduce drowning risk among children and high-risk populations.
Action 2.1	Expand access to low-cost or no-cost swim lessons for children in underserved communities through partnerships with local organizations and aquatic centers.

⁵ Florida Department of Health. Bureau of Vital Statistics Fatal Injuries Profile.

Action 2.2	Conduct culturally and linguistically appropriate education campaigns on water safety, active supervision, and drowning prevention strategies for parents and caregivers.
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Objective 3:	Reduce fall risk and fall-related injuries among older adults.
Action 3.1	Implement evidence-based fall prevention programs (e.g., balance and strength training, home safety assessments, and medication review education) for older adults through community centers, healthcare providers, and senior-serving organizations.
Action 3.2	Provide home safety education and distribute fall-prevention resources (e.g., checklists, assistive devices) to older adults and caregivers, with referrals to occupational therapy or home modification services when needed.

UCF Lake Nona Hospital Programs

Stop the Bleed Education Program is a community-focused initiative that trains individuals to recognize and respond to life-threatening bleeding emergencies. Participants learn essential skills, including bleeding control techniques such as direct pressure, wound packing, and tourniquet application. Training is provided to community groups, schools, workplaces, and local organizations to increase preparedness and rapid response in emergencies. The program's goal is to reduce preventable deaths from traumatic injuries by empowering community members with practical, life-saving skills.

Florida Swimming Lesson Voucher Program works to increase water safety and prevent drowning in Florida by providing free swim lessons to families with incomes below 200% of the federal poverty level, focusing on water safety and survival skills for children aged one to seven, up from the previous limit of four. Children with autism and active military families will be prioritized, but all eligible families are encouraged to apply. The State of Florida will begin to provide swim lesson vouchers for ages one through seven on July 1, 2026. Applications will be available at local health departments.

Community Initiatives

Nemours Children's Hospital Expands ABA-based swimming instruction for children with autism and developmental disabilities who face a significantly higher risk of drowning to teach essential water-safety skills. Through individualized plans and weekly lessons, the program helps children master Red Cross Swim Levels 1 and 2. The effort reduces unintentional injuries and improves the quality of life for neurodivergent children and their families.

YMCA of Central Florida Safe Start and ISR Swim Lessons Subsidized swim lessons for infants and toddlers to help prevent the risk of drowning, the primary cause of unintentional injury in children.

Partnerships

- Local public schools and school districts
- Fire departments and EMS agencies
- Law enforcement agencies
- Parks and recreation departments
- Community centers and youth organizations
- Osceola Healthy Aging
- Local Health Departments

Conclusion

UCF Lake Nona Hospital is a unique joint venture between HCA Healthcare’s North Florida Division and UCF Academic Health, bringing together the strength of one of the nation’s leading healthcare systems with the academic excellence of the University of Central Florida College of Medicine. This collaboration enables the hospital to integrate high-quality clinical care, innovative research, and the education of future healthcare professionals to better serve the evolving needs of the community.

Guided by the findings of the Community Health Needs Assessment, UCF Lake Nona Hospital remains committed to addressing key priorities, including access to care, maternal and child health, and unintentional injury prevention. Through strategic partnerships, targeted interventions, and ongoing evaluation, the hospital aims to drive measurable improvements in community health outcomes.

UCF Lake Nona Hospital is dedicated to eliminating health disparities, expanding access to high-quality services, and ensuring patient safety. By leveraging innovation, collaboration, and data-driven decision-making, the hospital will continue to strengthen its role as a trusted healthcare leader and community partner, working to improve the health and well-being of the populations it serves.