



## **Novant Health Kernersville Medical Center**

**Community Benefit Implementation Plan**

**Forsyth County, North Carolina**

**2016-2018**

**Approved by the Novant Health Triad Region Board of Directors on October 11, 2016**

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## **I. Introduction**

Novant Health Forsyth Medical Center, in partnership with the Forsyth County Department of Public Health, Forsyth County Healthy Community Coalition and Wake Forest Baptists Health conducted a community health needs assessment in FY 2014-2015 to identify the most pressing health needs in our community. Novant Health Kernersville Medical Center will enhance the community's health by offering health and wellness programming in response to the specific health needs identified.

### ***a. Organization Overview***

Novant Health Kernersville Medical Center is an integral part of the Novant Health system (collectively known as "Novant Health"). Novant Health is a non-profit integrated health care system of 14 medical centers and a medical group with over 500 clinic locations. Other facilities and programs include outpatient surgery and diagnostic centers, charitable foundations, rehabilitation programs, and community health outreach programs. Novant Health and its affiliates serve their communities with programs including health education, home health care, prenatal clinics, community clinics and immunization services. Novant Health's over 25,000 employees and physician partners care for patients and communities in North Carolina, Virginia, South Carolina and Georgia.

### ***Mission***

Novant Health exists to improve the health of our communities, one person at a time.

Our employees and physician partners strive every day to bring our mission, vision and values to life. We demonstrate this commitment to our patients in many different ways. Our organization:

- Maintains an active community health outreach program.
- Demonstrates superior outcomes for many health conditions as indicated by our state and national quality scores.
- Creates innovative programs that address important health issues, with many of our programs and services being recognized nationally.
- Believes in its role as a good corporate citizen, working with community agencies and organizations to make our communities better places to live and work.

**Novant Health Kernersville Medical Center (NHKMC)**, a department of Novant Health Forsyth Medical Center, is a 50-bed community facility that provides surgery, emergency care, diagnostic testing, inpatient care and other medical services.

**b. Our Community**

Primary and Secondary Service Areas

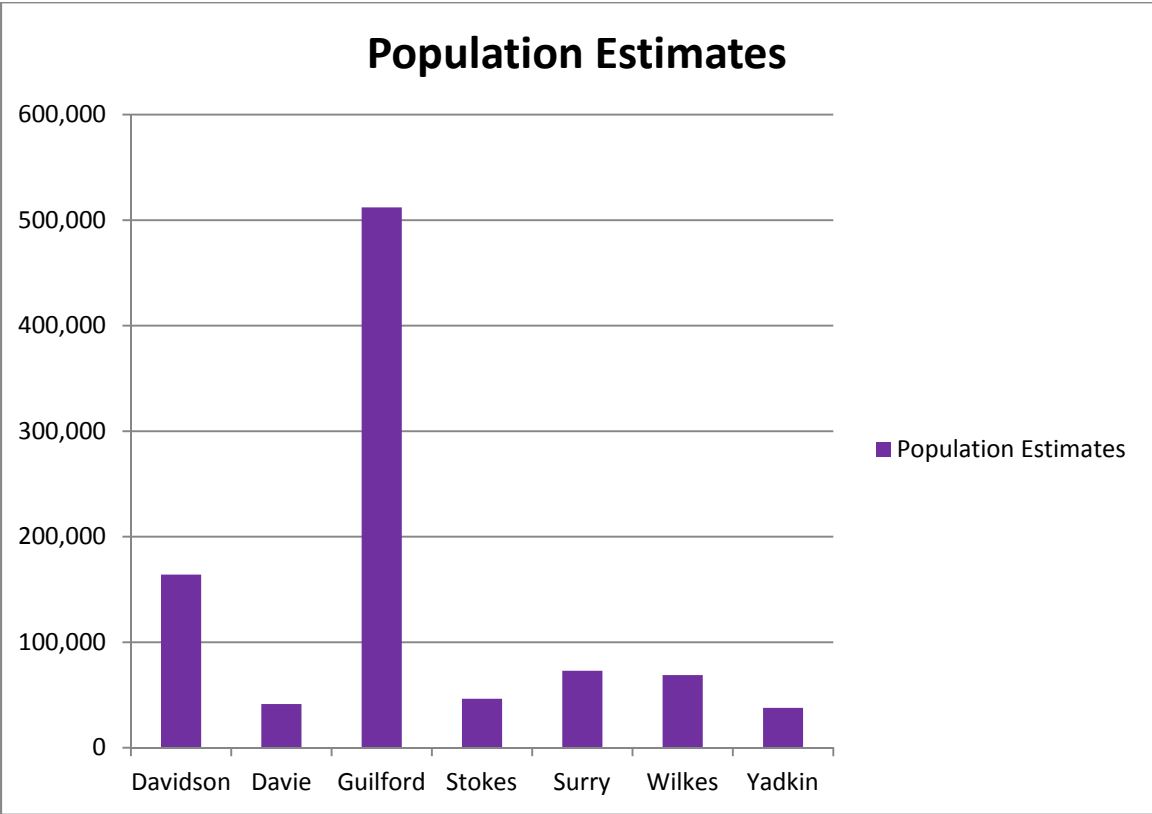
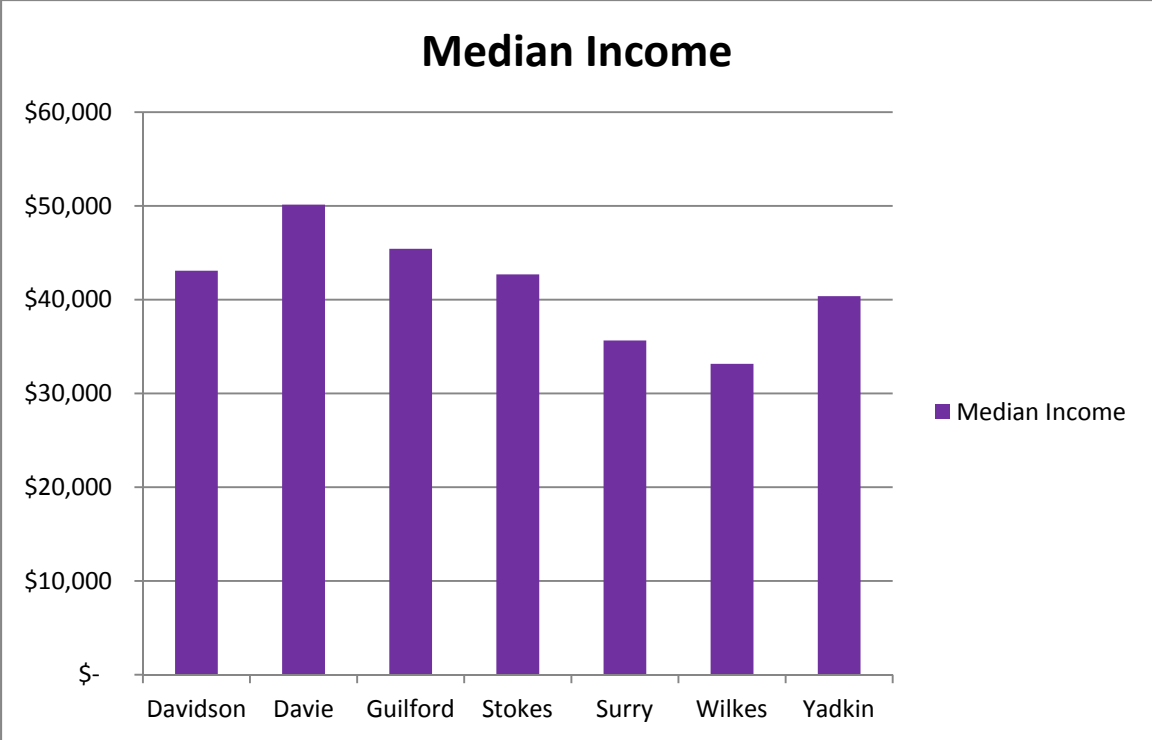
The Primary Service Area for Novant Health Kernersville Medical Center is defined by the zip codes that represent 75% to 85% of the hospital’s in-patient population as outlined below:

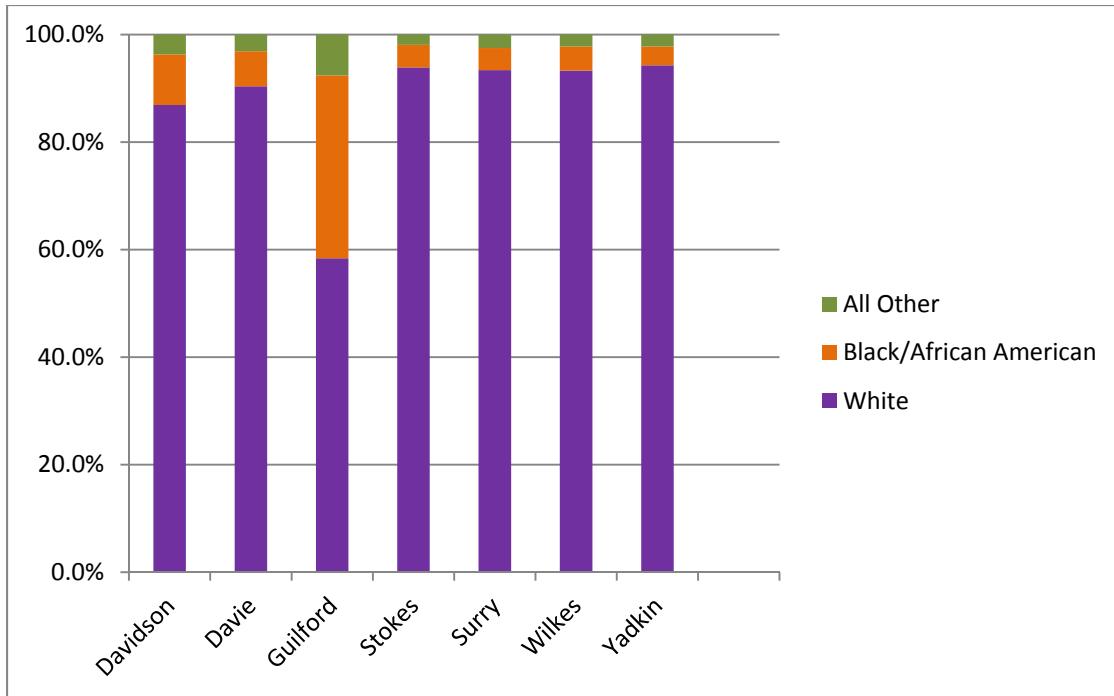
Zip Code	City	County	Zip Code	City	County
27009	Belews Creek	Forsyth	27110	Winston Salem	Forsyth
27010	Bethania	Forsyth	27111	Winston Salem	Forsyth
27012	Clemmons	Forsyth	27112	Winston Salem	Forsyth
270253	Lewisville	Forsyth	27113	Winston Salem	Forsyth
27040	Pfafftown	Forsyth	27114	Winston Salem	Forsyth
27045	Rural Hall	Forsyth	27115	Winston Salem	Forsyth
27050	Tobaccoville	Forsyth	27116	Winston Salem	Forsyth
27051	Walkertown	Forsyth	27117	Winston Salem	Forsyth
27094	Rural Hall	Forsyth	27120	Winston Salem	Forsyth
27098	Rural Hall	Forsyth	27127	Winston Salem	Forsyth
27099	Rural Hall	Forsyth	27130	Winston Salem	Forsyth
27101	Winston Salem	Forsyth	27150	Winston Salem	Forsyth
27102	Winston Salem	Forsyth	27152	Winston Salem	Forsyth
27103	Winston Salem	Forsyth	27155	Winston Salem	Forsyth
27104	Winston Salem	Forsyth	27157	Winston Salem	Forsyth
27105	Winston Salem	Forsyth	27198	Winston Salem	Forsyth
27106	Winston Salem	Forsyth	27199	Winston Salem	Forsyth
27107	Winston Salem	Forsyth	27284	Kernersville	Forsyth
27108	Winston Salem	Forsyth	27285	Kernersville	Forsyth
27109	Winston Salem	Forsyth			

Forsyth County, NHKMC’s primary service area and defined community, includes the county seat of Winston-Salem. Based on 2014 estimates, Forsyth County remained the fourth largest county in the State of North Carolina with just over 365,000 residents<sup>1</sup>. Forsyth County’s population grew 4.2% since the 2010 US Census when there were an estimated 350,670 county residents. The County covers a 408 square mile area, with an average of 859.5 persons per square mile.

The Primary Service Area includes the City of Winston Salem, the Towns of Bethania, Kernersville, Lewisville, Rural Hall, Walkertown and the Village of Clemmons, which are all located in Forsyth County. The Secondary Service Area for Novant Health Kernersville Medical Center covers a seven county radius, including: Davidson, Davie, Guilford, Stokes, Surry, Wilkes and Yadkin counties. According to the 2014 U.S. Census estimates, the aforementioned counties include the following demographic profiles:

<sup>1</sup> U.S. Census Bureau (2015). State & County QuickFacts. <http://quickfacts.census.gov/qfd/states/37/37067.html>





**Population**

Forsyth County is more urban in nature, with only 7.4%<sup>2</sup> of the population living in rural areas. The county consists of a large urban center surrounded by smaller, more rural communities. Demographic data for Forsyth County is outlined below:

**Forsyth County Population By Race & Ethnicity (2014)**

	Forsyth County	North Carolina
Population Estimate	365,298	9,943,964
Persons Under 5 Years, percent 2014	6.3%	6.1%
Persons Under 18 Years, percent 2014	23.7%	23.0%
Person 65 Years & Over, percent 2014	14.4%	14.7%
Female Persons, percent 2014	52.5%	51.3%
White Alone, percent 2014	67.5%	71.5%
Black/African-American Alone, percent 2014	27.1%	22.1%
American Indian & Alaska Native Alone, percent 2014	0.8%	1.6%
Asian Alone, percent 2014	2.3%	2.7%
Native Hawaiian & Other Pacific Islander Alone, percent 2014	0.1%	0.1%
Two or More Races, percent 2014	2.1%	2.1%
Hispanic or Latino, percent 2014	12.6%	9.0%

Source: U.S. Census Bureau (2014).

<sup>2</sup>NC Economic Data and Site Information, 2015, <http://accessnc.commerce.state.nc.us/docs/countyProfile/NC/37067.pdf>

Children and adolescents make up an estimated one-third (30.0%) of the population in Forsyth County, while seniors make up 14.4% of the population. From 2014 to 2019, the population of Forsyth County is projected to grow by 0.8%. Non-white minorities currently make up almost half (45%) of the racial demographic in Forsyth County.

Forsyth County residents earn a median income that is slightly lower than the North Carolina state average. According to the U.S. Census 2014 American Community Survey, roughly one-third (32.1%) of Forsyth County residents have attained a bachelor’s degree or higher<sup>3</sup>. A key indicator to evaluate economic condition of Forsyth County is the poverty rate. The poverty rate for Forsyth County residents is higher than the North Carolina state average by 2.5%, and the poverty rate for children (ages 0-17) in Forsyth County is 3.5% higher than the NC State average.

Median Household Income		Population Educational Attainment (≥ 25 yrs old)		Poverty Rate	
Forsyth County	\$45,944	< HS diploma/GED	7.7%	All ages (Forsyth County)	19.7%
		HS diploma/GED	26.1%	All ages (North Carolina)	17.2%
North Carolina	\$46,596	Some college or associate's degree	28.5%	Children (0-17)	27.6%
		Bachelor's degree	20.7%	Children (0-17) (North Carolina)	24.1%
		≥ Graduate degree	11.4%		

## II. Prioritized Health Needs

### a) Identified Significant Health Needs

From participant responses from the 2014 Community Health Opinion Survey, several social, behavioral, and clinical health needs were identified based on highest rank in responses after analyzing and interpreting Forsyth County’s primary and secondary data. Overall findings included the following:

- The top three issues that most affect the quality of life of Forsyth County residents are low income/poverty, homelessness and violent crime/dropping out of school
- The top three services that needed improvement were availability of employment, positive teen activities and high paying employment.
- Regarding personal health responses, 75% reported their health was good to excellent; 70% reported engaging in physical activity for 30 minutes in the past 30 days; 47% did not receive the flu shots and the top three chronic health conditions previously diagnosed were high blood pressure, high cholesterol and depression or anxiety.

<sup>3</sup> U.S. Census Bureau, Small Area Income and Poverty Estimate Program. December 2015. <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

- Regarding access to care/family health responses, when sick, 70% visit the doctor's office; 10% hospitals and 10% urgent care. Barriers cited to receiving healthcare were lack of insurance, insurance did not cover what I needed and cost too high
- The top health issues were overweight/obesity, mental health and chronic disease
- The top social issues were poverty, homelessness, unemployment and access to care.

Based on these identified health needs, the CHA Data Team, a working group formed out of the Forsyth County Community Health Assessment Advisory Group, identified these issues as 17 social, clinical, behavioral and health outcomes. The identified health outcomes included the following:

1. Access to Care
2. Alcohol abuse
3. Cancer
4. Depression
5. Heart Disease
6. Homelessness
7. Inequities
8. Infant Care
9. Overweight/Obesity
10. Physical inactivity
11. Poor diet
12. Poverty
13. Risky sexual activity
14. Smoking
15. Stroke
16. Suicide
17. Unemployment

#### **b) County Prioritization**

In July 2015, a combination of online surveys and paper surveys were conducted to ask community members and stakeholders to rank the top three health issues according to years of potential life lost and magnitude of these issues. The calculated scores were used to rank the focus areas, and the weighted rankings from the community opinion surveys and the priority focus exercise were combined with the following results:

- 1) Cancer
- 2) Heart Disease
- 3) Stroke
- 4) Infant Mortality
- 5) Suicide

#### ***Recommended Prioritized Health Outcomes***

For each of the identified areas, recommendations were made for the three broad health outcomes priorities of chronic disease, maternal and infant health and mental health. Below is a summary of those recommendations:



- *Chronic Disease:* Increase programming of chronic disease self-management programs that are delivered by lay individuals in community settings or via computer or phone applications or messaging. Potential outcomes to achieve include increased healthy behaviors, improved quality of life, improved mental health, reduced hospital utilization, and improved chronic disease management.
- *Maternal and Infant Health:* develop an approach to improving infant mortality focusing on the collective impact model that will foster a sense of community, create a shared vision amongst community members, coordinate efforts through reinforcing activities, improve organizational support dedicated to the work of groups supporting infant health.
- *Mental Health:* integrate behavioral health into primary care practices, bring substance abuse screenings and treatments into a primary care setting, carefully collaborate between providers, case managers, behavioral health consultants and mental health specialists to help improve mental health, patient engagement and reduce drug and alcohol use.

**c) Facility prioritization**

In addition to the community rankings, Novant Health Kernersville Medical Center reviewed the top five diagnosis codes for inpatient and outpatient hospital emergency room at Novant Health Forsyth Medical Center visits year-to-date January to July 2015.

Novant Health Forsyth Medical Center Emergency Department  
Top 5 Diagnoses YTD Jan-July 2015

Inpatient		Outpatient	
Diagnosis	Volume	Diagnosis	Volume
Septicemia NOS	814	Chest pain NOS	1,331
Pneumonia, organism NOS	400	Chest pain NEC	896
Urinary tract infection NOS	219	Urinary tract infection NOS	895
Chest pain, NEC	69	Headache	806
Syncope and collapse	65	Abdominal pain oth spcf st.	628

A review of the hospital emergency room visits indicated that many of the top inpatient diagnosis codes are correlated with chronic issues affecting the aging population. Upon analysis of the outpatient diagnosis codes, it was apparent that many of the patients seen had symptoms that could be related to a number of chronic conditions, including (but not limited to) heart disease, obesity, diabetes and chronic issues related to aging.

Upon a comprehensive review of the community’s recommended prioritized outcomes and NHFMC’s ED top 5 diagnosis codes, the Novant Health Kernersville Medical Center leadership team and Board of Trustees evaluated this information based on the scope, severity, health disparities associated with the need, and the estimated feasibility and effectiveness of possible interventions. Through this thorough

evaluation, the team agreed on the following two top significant health priorities for Novant Health Kernersville Medical Center:

1. Diabetes
2. Obesity

### III. Issues identified for remediation

In the following section Novant Health Kernersville Medical Center will address each of the top two prioritized needs. Each need includes actions that must be taken to achieve improved community health. Outlined within each need, Kernersville Medical Center will identify the description of need, programs, resources and intend actions, anticipated impact, priority populations, evaluation plan, intervention strategies, tactics for achievement, growth targets, and community partners.

The following action plans were developed through evaluation of Novant Health Kernersville Medical Center programs and the U.S. Department of Health and Human Services “Healthy People 2020” topics. To determine anticipated impact, Healthy People 2020 objectives were reviewed and integrated into each priority area. As a leader committed to improving the nation’s health, it is imperative to Forsyth Medical Center that our guiding principles in defining our role in community health outreach and advocacy be well aligned with the Healthy People’s goal of achieving health equity and eliminating disparities. (See Appendix A for Healthy People 2020 objectives that were evaluated.)

#### **a) Priority 1: Diabetes**

From 2009-2013 Diabetes remained a leading cause of death in Forsyth County and disproportionately affected African-Americans with a 3.4 to 1 ratio. Based on the same 2013 statistics, diabetes ranked as the fourth most common cause of death in non-whites, as compared to whites and Hispanics. Additionally, the community perception survey identified diabetes as an emerging issue for both adults and children.

**Programs, resources and intended actions to address diabetes:** Novant Health Kernersville Medical Center offers community based services including education for diabetes prevention and diabetes management, as well as glucose and A1C screenings. All of these programs are intended to increase awareness of diabetes, promote healthy lifestyles that prevent disease, provide education around management and monitoring techniques and support patients through the initial stages of diagnosis and treatment.

SIGNIFICANT HEALTH NEED		
DIABETES		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
Community A1c screenings	Remarkable You community screening initiative	Early detection of undiagnosed prediabetic and diabetic participants will increase

<b>Community diabetes education</b>	Lecture series on diabetes prevention	Knowledge level of participants will increase and participants will learn new skills to change unhealthy behaviors
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**b) Priority 2: Obesity**

In the Community Health Assessment, residents were asked a series of questions about what they believed were the top three health behaviors people in their community need more information about and a strong theme related to healthy living emerged, where eating well/nutrition (26.2%) exercising/fitness (22.9%) and managing weight (22.4%) were all commonly cited. In addition, 26.5% of participants reported that they had been diagnosed as obese or overweight by a health care provider.

**Programs, resources and intended actions to address obesity:** Novant Health Kernersville Medical Center offers programs to address obesity, including body mass index screenings, and nutrition education. Additionally, Novant Health Kernersville Medical Center collaborates with various community partners to support other nutrition and fitness programs throughout Forsyth County.

SIGNIFICANT HEALTH NEED		
OBESITY		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
<b>Community Body Mass Index (BMI) screenings</b>	Remarkable You community screening initiative	Early detection of undiagnosed obese participants will increase and participants will learn new skills to change unhealthy behaviors
<b>Community nutrition education</b>	Lectures on healthy eating and weight management	Knowledge level of participants will increase and participants will learn new skills to change unhealthy behaviors

#### IV. Unaddressed health needs

Although Novant Health Kernersville Medical Center is working to address several significant needs in the community, we are unable to impact all identified county priorities, but will support community partners as appropriate with the following known issues:

Need	Explanation
<ul style="list-style-type: none"><li>Alcohol abuse</li><li>Risky sexual activity</li><li>Smoking</li></ul>	Other agencies addressing need
<ul style="list-style-type: none"><li>Access to Care</li></ul>	Community coalitions in existence to help address need from a collaborative-based approach
<ul style="list-style-type: none"><li>Homelessness</li><li>Inequities</li><li>Poverty</li><li>Unemployment</li></ul>	Outside of Novant Health Forsyth Medical Center’s scope of services

#### V. Role of the board and administration

The Novant Health Triad Region Board of Trustees and Novant Health Kernersville Medical Center administration are active participants in the community benefit process. Through strategic planning initiatives focused on chronic disease, community health outreach, and access to care, leadership provides direction on actions and intended impact, and serves as the approving body for the community health needs assessment and community benefit implementation plan. Administrative leaders serve on the County assessment process teams, priority setting committee and action planning team and hospital board members participate and provide influence to the community benefit plans. All members are actively involved in the priority setting discussion and outreach planning process. Additionally, community benefit reports are provided to the board and facility leadership teams throughout the calendar year for ongoing education.

## Appendix A: Healthy People 2020 Indicators

### Diabetes

- Increase the proportion of persons with diabetes whose condition has been diagnosed (Healthy People 2020; D-15).
- Increase the proportion of persons with diagnosed diabetes who receive formal education (Healthy People 2020; D-14).

### Obesity

- Increase the proportion of adults who are at a healthy weight (Healthy People 2020; NWS-8).
- Reduce the number of children and adolescents who are considered obese (Healthy People 2020; NWS-10).