

Community Health Implementation Strategy

FY 2019 - 2022



Executive Summary

The Outer Banks Hospital is a 21-bed, not-for-profit, critical access hospital located in Nags Head, NC. The hospital serves residents and visitors of Dare County and the surrounding region by promoting wellness and providing the highest quality healthcare services. The hospital provides the following services to the community: acute hospitalization, labor and delivery, emergency and urgent care, general and specialized surgery, filmless imaging, cardiology and oncology.

The Outer Banks Hospital is a partnership between Chesapeake Regional Healthcare (40%) and Vidant Health (60%). Vidant Health is a regional health system serving 1.4 million people in 29 counties throughout rural eastern North Carolina. Most of the counties served by Vidant Health are listed in the top 40 most economically distressed areas in the state (73% of Vidant Health's counties are classified as Tier 1 counties; 24% of the counties are classified as Tier 2 counties; 3% of the counties are classified as Tier 3 counties). The system consists of Vidant Medical Center (an academic medical center), nine community hospitals, an ambulatory surgery center, wellness, and rehabilitation facilities, home health agencies and other independently operated health services. Vidant Health is affiliated with the Brody School of Medicine at East Carolina University. The mission of Vidant Health is to improve the health and well-being of eastern North Carolina. Our vision is to become a national model for rural health and wellness by creating a premier, trusted health care delivery and education system. Integral to our mission is our commitment to be responsive to our community's needs and to provide high quality, cost-effective health care services.

Description of community

The primary service area for The Outer Banks Hospital encompasses Dare County. Dare County is located along the coast in northeastern North Carolina. Municipalities within Dare County include Avon, Buxton, Frisco, Hatteras, Manns Harbor, Kitty Hawk, Manteo, Nags Head, Kill Devil Hills, Southern Shores, and Duck.

As of 2016, the population of Dare County had increased to 35,964 from 34,892 in 2013. The population was evenly divided among males (49.3%) and females (50.7%). Whites composed 94.1% of the total population; Blacks/African Americans 2.7%; and American Indian, Alaskan Native, Asian, Pacific Islander or persons reporting two or more races represent the remaining 3.2%. Dare County is a Tier 2 county, meaning it is not one of the 40 most economically distressed counties in North Carolina. In 2017, Dare County's per capita income and median income per household are 30,898 and \$55,640, respectively. Both figures are higher than the state average. Additionally, the poverty rate in Dare County is 8.2%, which is lower than the state and the region. These factors contribute to the health challenges identified in the 2019 Community Health Needs Assessment.

Participants

Health ENC – 2019 Community Health Needs Assessment

Initiated in 2015 by the Office of Health Access at the Brody School of Medicine at East Carolina University, Health ENC grew out of conversations with health care leaders about improving the community health needs assessment (CHNA) process in eastern North Carolina. Health ENC, now a partnership among county health departments and hospitals in eastern NC, coordinates a regional CHNA in 33 counties of eastern North Carolina. In addition, the Health ENC Program Manager works to build coalitions and partnerships that will address health issues identified through the regional CHNA process.

The Community Health Needs Assessment is conducted every three years and includes several components: secondary data, primary data surveys, small group discussions, and the prioritization of county health needs. As part of the assessment process, members of The Outer Banks Hospital and Dare County Department of Health and Human Services worked collaboratively to distribute a community health opinion survey to various segments of the population in Dare County. The survey was printed in English and Spanish and distributed to a broad range of people in the community, targeting different income levels, including underserved members of the community, the elderly, and the general population. In addition to the paper surveys, a web-based survey tool was developed by Health ENC and made available to the public through different email lists. The survey was also publicized through the local newspaper and social media. The survey was used to collect primary data from April 18 - June 30, 2018. A total of 848 community members completed the survey. In addition to the community health opinion survey, three focus group sessions were held in Dare County in June and July 2018 to receive feedback from various community groups which were under-represented in the survey responses. A total of 19 community members participated in the focus group sessions.

Community key stakeholder group – Dare County

The Healthy Carolinians of the Outer Banks served as the community stakeholders who participated in the planning, data review and prioritization process for the 2019 Dare County CHNA. Members are:

- The Outer Banks Hospital
- Dare County Department of Health & Human Services
- Albemarle Hospital Foundation
- Albemarle Project Access
- Community Care Clinic of Dare
- Dare County Emergency Medical Services
- Dare County Older Adult Services
- Dare County Schools
- Dare County Sheriff's Office
- GEM Day Services
- Hotline
- Interfaith Community Outreach, Inc.
- Mano Al Hermano
- Outer Banks Chamber of Commerce
- Outer Banks Community Collaborative

Following a comprehensive review of all data provided, participants were asked to identify key trends for further evaluation. A list was developed which included several potential priorities for further discussion, consideration and ranking.

The following criteria were used to evaluate the potential health priorities:

1. **The Magnitude of the Problem** – How many persons does the problem affect?
2. **Seriousness of the Consequences** – What degree of disability or premature death occurs because of the problem? What are the potential burdens to the community such as social or economic burdens?
3. **Feasibility of Correcting the Problem** – Is the problem amenable to interventions? Is the problem preventable? Is the community concerned about the problem? Is the intervention feasible scientifically as well as acceptable to the community?

Prioritization Process

Based on findings from the 2019 Community Health Assessment, members of the HCOB Partnership identified the following health or social concerns for the county. The issues were identified by consensus and are listed in no particular order below:

1. Prevention and Safety
2. Substance Abuse
3. Mental Health
4. Built Environment
5. Access to Health Services
6. Cancer
7. Older Adults
8. Economy
9. Transportation
10. Healthcare Navigation & Literacy

Members participated in and evaluated the inventory of services, discussed these issues, asked questions and then came to a consensus on the list. Then they participated in a formal prioritization process. Each participant was asked to evaluate each of the issues according to three criteria: (1) magnitude of the problem; (2) seriousness of the consequences; and (3) feasibility of correcting the problem.

Next, the Healthy Carolinians of the Outer Banks partnership discussed the averages of each category and noted that several of the same health concerns were present in the top five throughout. Following additional discussion, participants narrowed the health concerns to three health priorities.

2019 Community Health Priorities for Dare County

As a result of the comprehensive 2019 CHNA Prioritization Process that included significant input from community members surrounding primary and secondary data, as well as a wealth of information from local, state, and national data sources, an in-depth discussion of the assessment data and existing community resources resulted in the key stakeholder group selecting three health priorities for focus over the next three years. Additionally, The Outer Banks Hospital has developed an Implementation Plan to address these community health priorities.

These three health priorities are:

- Mental Health
- Substance Abuse
- Transportation

The Outer Banks Hospital Development Council Community Benefits Grants Program

The Outer Banks Hospital is committed to improving the health and well-being of eastern North Carolina. We partner and serve community members throughout the continuum of care. With our mission at the forefront of our efforts, Vidant Medical Center (formerly Pitt County Memorial Hospital) made a substantial donation to the Vidant Health Foundation (formerly Pitt Memorial Hospital Foundation) in 1998 to establish the Community Benefit and Health Initiatives Grants program. In 2006, the program extended its outreach by establishing a Regional Community Benefits Grants program which works with The Outer Banks Hospital to distribute grants to their communities.

The goal of the program is to support outreach projects that focus on wellness and prevention strategies. The Community Benefit Grants program supports community partners to educate people about disease prevention and management, provide people with the knowledge and tools to be successful in their own health care and establish programs within communities, making them available and more accessible to community members who need these programs/services. The Outer Banks Hospital distributes over \$100,000 annually to various agencies/organizations in Dare County.

The committee's funding focus areas are based on the health priorities identified in the most recent CHNA.

Implementation Strategy

Priority Health Need #1: Mental Health

Goal: To improve access and services for mental health patients in our community.

Supporting Data: The age-adjusted death rate due to suicide is a significant problem in Dare County. The 2012- 2016 death rate due to suicide in Dare County (20.2 deaths/100,000 population) is nearly double that of the North Carolina rate (12.9 deaths/100,000 population) and almost three-fold the Healthy NC 2020 target of 8.3 deaths/100,000 population. Further, suicide is among the top ten causes of death in the county. The 2017 mental health provider rate is another indicator of concern. For every 100,000 individuals, there are only 156 mental health providers in Dare County. This is lower than both the North Carolina value (216 providers) and the US value (214 providers). Some Dare County indicators within the mental health and mental disorders topic area performed well when compared to North Carolina's value, the US value, and state targets in the secondary data scoring results (data score <1.5).

Strategies:

- An Outer Banks Hospital representative will participate on the Healthy Carolinians Breaking Through Task Force.
- An Outer Banks Hospital representative will participate on the Healthy Carolinians Adult Collaborative on Mental Health Task Force.
- The Outer Banks Hospital will fund a community benefit grant to the Breaking Through Task Force for a public awareness campaign that will focus on reducing the stigma attached to seeking help for behavioral health issues and creating awareness about local issues.
- The Outer Banks Hospital will fund a community benefit grant to Children and Youth Partnership to create a mindfulness-based well-being program at Manteo Middle School as well as develop programs for other Dare County Schools, while also training educators, parents and community partners.

Priority Health Need #2: Substance Abuse

Goal: To improve access and services for substance abuse patients in our community.

Supporting Data: Dare County's death rate due to drug poisoning (19.7) is higher than that of North Carolina (16.2) and that of the nation (16.9). Dare County also falls within the second poorest performing quartile when compared against other North Carolina counties and U.S. counties.

Dare County's liquor store density indicator has a score of 2.4 and is exceedingly high at 28 stores per 100,000 population. This is nearly 5 times higher than North Carolina's value (5.8 stores/100,000 population) and more than twice the U.S. value (10.5 stores/100,000 population). When compared to North Carolina counties and U.S. counties overall, Dare County falls within the worst quartile in both cases.

Along with the high liquor store density, alcohol abuse is also an area of concern for Dare County. 18.2% of adults in Dare County are reported to drink excessively, which is about 2% higher than reported for North Carolina as a whole. However, Dare County does successfully meet the HP 2020 target of 25.4%.

While fewer adults in Dare County (16.5% of adults) smoke compared to the state (17.9%) and nation (17%), Dare County has failed to meet the Healthy North Carolina target of 13% and the Healthy People 2020 Target of 12%.

Strategies:

- With three Certified Tobacco Treatment Specialists at The Outer Banks Hospital, the hospital will continue its Tobacco Cessation Program, an excellent resource and opportunity for community members to break the tobacco habit. The program highlights include:
 - Comprehensive evaluation to determine which treatments will be most effective for you
 - Evidence-based medications — often combination medications or adaptive treatment
 - The option of several evidence-based behavioral treatments
- One of the Tobacco Treatment Specialists will also participate in the Region 9, Albemarle Regional Health Services Tobacco Prevention Task Force.
- A representative of The Outer Banks Hospital will serve on the Saving Lives Task Force and the Hospital will continue to sponsor, participate, and promote the Saving Lives Task Force Town Hall events.
- The Outer Bank Hospital Center for Healthy Living will develop an Alcohol Use Reduction Clinic to their services.
- The Outer Banks Hospital will continue to host the medicine drop events in the community on a quarterly basis.
- The Outer Banks Hospital will continue to sponsor the Physician's Council on Prescription Drug Abuse. An Outer Banks Hospital hospitalist chairs the Council.
- The Outer Banks Hospital will continue sponsor Dare CASA (Coalition Against Substance Abuse) events.

Priority Health Need #3: Transportation

Goal: To improve access and transportation options to and from medical appointments, etc. for patients in our community.

Supporting Data: The geography of Dare County, as a long, narrow peninsula and few main

roads connecting it to mainland, particularly lends itself to increasing transportation issues. The lack of multiple large roads or highways and the spread of the population throughout the county from healthcare facilities create difficulties for many of those in need of care. While transportation was not ranked highly from the secondary data scoring results, community members from both focus groups and survey responses often mentioned the barrier transportation created when needed to access quality healthcare. Between transportation options, road maintenance, and road safety, nearly 10% of survey respondents reported these issues as areas in need of improvement in Dare County. Additionally, among focus group discussion participants, many cited transportation issues as a barrier to care. Further discussions with community members may shed light on issues with public transportation, vehicle availability or ownership, or eldercare driving services to health appointments.

Strategies:

- A representative of The Outer Banks Hospital will serve on the newly-formed Transportation Task Force that will focus on transportation issues that impact all residents and create barriers to receiving health care.
- The Outer Banks Hospital will fund a community benefit grant to Dare County Transportation to provide transportation to in and out of county medical appointments for underserved patients.
- The Outer Banks Hospital will fund a community benefit grant to Hyde County Non-Profit Private Transportation Corporation to provide transportation to and from medical appointments for patients living on Ocracoke.

Health Need that will be Addressed by the Hospital’s Implementation Plan

The Community Health Needs Assessment did not provide enough data surrounding **Access to Health Services** to have this need as one of the priorities. However, because of the anecdotal and subjective feedback by members of the Healthy Carolinians of the Outer Banks partnership, The Outer Banks Hospital will lead a workgroup to collect more data surrounding Access to Health Services.

Approval

The Outer Banks Hospital’s Implementation Plan for 2019-2022 was approved by the Board of Directors on June 28, 2019.



Chair, The Outer Banks Hospital Board of Directors



Date