

Vidant Bertie Hospital's Community Health Implementation Strategy



2013-2016

Executive Summary

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Vidant Bertie Hospital is a six-bed hospital in Windsor, NC that provides surgical, emergency, medical/surgical, laboratory and radiology services, as well as specialty and primary care clinics. The hospital also offers outpatient behavioral health services and physical, speech and occupational therapy. The hospital operates Vidant Family Medicine – Windsor, a primary care physician practice, and has a telemedicine link with the Brody School of Medicine at East Carolina University.

Vidant Bertie is one of 10 hospitals that make up Vidant Health. 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 (i.e. 52 percent Tier 1, 38 percent Tier 2 and 10 percent Tier 3). 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 and Vidant Bertie is to enhance the quality of life for the people and communities we serve, touch and support. Our vision is to be a place where incredible people provide incredible care every day. 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 Vidant Bertie is Bertie County. Bertie County encompasses 741 square miles, 42 square miles of which are water. The major town in Bertie County is Windsor, the county seat. Other Bertie County communities include Askewville, Aulander, Colerain, Kelford, Merry Hill, Lewiston-Woodville, Powellsville and Roxobel.

As of the 2010 US Census, the population of Bertie County was 21,282, nearly evenly divided between males and females. The overall median age was 42.9, 5.5 years older than the median age for NC as a whole. Whites composed 35.2 percent of the total population; blacks/African Americans 62.5 percent; American Indians and Alaskan natives 0.5 percent; Asians, native Hawaiians and other Pacific Islanders 0.5 percent and Hispanics/Latinos of any race 1.3 percent of the total population.

Bertie County is a tier 1 county, meaning it is one of the 40 most economically distressed counties in the state. Bertie's per capita income and median income per household are \$6,978 and \$15,774, respectively, below North Carolina as a whole. Seventy-four percent of Bertie County public school students are enrolled in free or reduced lunch programs. Additionally, the poverty rate in Bertie

County for 2007-2011 is 23.6, well above the state rate of 16.1. Bertie's high school dropout rate is also higher than the state at 3.57 versus the state rate of 3.43.

Bertie County has a higher rate of uninsured individuals in the 19-64 age range than the state, 24.8 versus 23.0, as well as a higher proportion of Medicaid eligibles than the state, 27 percent versus 17 percent. In terms of active health professionals per 10,000 residents, Bertie lags the state on every indicator including physicians, primary care physicians, dentists, nurses and pharmacists. Bertie County's health rankings are also poor with Bertie ranking 97th on mortality, 83rd on morbidity, 99th on health behaviors, 66th on clinical care, 88th on social and economic factors, and 62nd on physical environment versus other NC counties.

Participants

The community health assessment (CHA) process was initiated by Albemarle Regional Health Services (ARHS) in collaboration with Vidant Bertie Hospital, Vidant Chowan Hospital and Albemarle Health. Vidant Roanoke-Chowan Hospital and the Outer Banks Hospital also assisted with the CHA for the ARHS region. A CHA leadership team was formed to ensure input from persons with a broad knowledge of the community. The leadership team began meeting in June 2012 with regular meetings and activities scheduled to complete the community health assessment process.

The CHA includes four main components: secondary data, primary data, stakeholder interviews and the implementation plan. Secondary data were collected and analyzed by professional epidemiologist Dr. Sheila Pfaender. Primary data were collected using the two-stage cluster sampling method, where the county is divided by census tract and homes within that tract are randomly selected to participate. Eighty surveys were completed per county. Data were collected using handheld electronic devices then compiled and analyzed by ARHS staff. Stakeholder interviews were completed by determining appropriate interviewees with the CHA leadership team, then using a confidential survey tool to complete interviews. ARHS compiled and summarized the results of the stakeholder interviews.

Participants in the CHA process for Bertie County include:

- Albemarle Regional Health Services
- Vidant Bertie Hospital
- Vidant Chowan Hospital
- UNC Chapel Hill
- East Carolina University
- Bertie County Recreation Department
- Three Rivers Healthy Carolinians
- NC Cooperative Extension- Bertie County
- Bertie County EMPOWER! Diabetes Program
- College of the Albemarle
- Vidant Medical Group
- Vidant Bertie Directors Council
- Vidant Bertie Patient and Family Advisor

Vidant Bertie Hospital Development Council Community Benefits Grants Program

Vidant Health wants to do more to help people improve their health before they require hospital treatment. That's why in 1998, Pitt County Memorial Hospital (now Vidant Medical Center) made a substantial donation to the Pitt Memorial Hospital Foundation (now Vidant Health Foundation) 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 Vidant Health regional hospitals 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 educates people about disease prevention and management, provides people with the knowledge and tools to be successful in their own health and locates programs within communities, making them available and more accessible.

Vidant Bertie Hospital established a committee of local community members to review the health needs of our community and determine focus areas. Members of our committee include: a nurse from ARHS-Bertie, the manager of Vidant Family Medicine-Windsor, a local minister and hospital chaplain, a local pharmacist and chairperson of the development council, the chairperson of Three Rivers Healthy Carolinians, the director of patient care services and vice president of operations at Vidant Bertie Hospital, and chairperson of the Bertie YMCA board.

The committee's current focus areas are based on the 2010 CHA and include:

- Access to Care
- Chronic Disease Prevention and Management
- Nutrition/Physical Activity
- Maternal and Child Health

Vidant Bertie Hospital distributed \$101,110 to various agencies in Bertie and Martin counties through this program in July 2013. The next funding cycle will align the Community Benefit Grant focus areas with the health priorities identified in the 2013 CHA.

Implementation Plan

Community Health Advisory Council

Vidant Bertie and Vidant Chowan hospitals formed a Community Health Advisory Council (CHAC) in May 2013 to review the results of the CHA, determine and prioritize community health needs, and develop an implementation plan to address identified health priorities. The CHAC includes hospital, medical staff and community representatives from Bertie, Chowan and Perquimans counties. Patient and family advisors were also included. The CHAC identified the following health priorities for Bertie, Chowan and Perquimans counties using the nominal group method.

- Diabetes
- Cancer
- Cardiovascular disease
- Lifestyle (smoking, inactivity, nutrition, substance abuse)
- Lack of medical home (lack of knowledge among community and providers regarding available services)

The CHAC identified the following overarching strategies to address all five health needs:

- Target screening and educational opportunities to specific audiences including men, children, seniors and African-Americans.
- Identify and implement evidence-based programs to impact health status, especially for men, children, seniors and African-Americans.
- Raise awareness and encourage participation in healthy activities through
 - a. Engaging formal and informal leaders of targeted groups.
 - b. Identifying grant funding for programs aimed at priority health conditions and populations.
 - c. Identifying appropriate incentives.
- Partner with Community Transformation Grant to promote healthy eating, active lifestyles and tobacco-free living.
- Support policy changes that promote healthier lifestyles.
- Partner with ARHS and workplaces to offer health assessments for employees.
- Raise awareness among community members and health care providers about local health resources and programs through marketing and education.

The CHAC also identified strategies specifically addressing each health need. The goals and strategies for each identified health need are listed below.

Priority health need: diabetes

Goal: *To reduce the rate of diabetes in Bertie County and improve quality of life for people living with diabetes*

Strategies:

- Continue offering free blood sugar screenings throughout the community.
- Continue supporting the diabetes support group and Diabetes Day program.
- Continue offering diabetes education at Vidant Family Medicine-Windsor.
- Develop plan to offer additional foot and eye screenings throughout the community.
- Improve medication education for diabetes patients.

Priority health need: cancer

Goals: *To increase prevention and early detection of cancer (breast, colon, prostate, lung, cervical, skin)*

Strategies:

- Continue providing early detection services including mammography, FOBT screening and colonoscopies.
- Continue supporting American Cancer Society through Relay for Life and other partnerships.
- Continue supporting local breast and cervical cancer control program through ARHS.
- Continue hosting annual breast cancer event.
- Offer additional education and screening opportunities for prostate, skin, and colon cancer.
- Support efforts of Community Transformation Grant to promote tobacco-free living to prevent lung cancer.

Priority health need: cardiovascular disease

Goals: *To reduce the rate of cardiovascular disease in Bertie County and improve quality of life for people living with cardiovascular disease*

Strategies:

- Continue providing cardiology specialty clinic and diagnostics.
- Continue offering free blood pressure and cholesterol screenings throughout the community.
- Continue hosting the annual heart health event for women.
- Optimize the use of health coaching services at Vidant Family Medicine Windsor.

Priority health need: lifestyle (smoking, inactivity, nutrition, substance abuse)

Goals: *To improve the health status of the community by encouraging healthy behaviors and discouraging unhealthy behaviors*

Strategies:

- Continue offering Healthy Living Support Group to promote healthy behaviors.

- Expand congregational health program to include additional churches.
- Continue supporting the Eat Smart, Move More, Weigh Less program.
- Continue supporting the Expanded Foods and Nutrition Education Program.
- Continue providing health fairs.
- Identify opportunities to offer the Chronic Disease Self-Management Program through partnerships.

Priority health need: lack of medical home (lack of knowledge among community and providers regarding available services)

Goals: *To improve community and provider knowledge of the health and human services and support structures available in Bertie County*

Strategies:

- Continue marketing initiatives to promote screenings and immunizations.
- Continue offering transitional care services to connect patients with chronic conditions to community services.
- Continue flu awareness and prevention activities.
- Inform providers and communities about local services through education and awareness activities.
- Ensure patients transferred back from other hospitals reconnect with local health providers and resources.

Identified health issues not being addressed by hospital

The CHA identified some additional health issues that will not be addressed directly by the hospital. These health issues include mental and dental health as well as deaths from unintentional injuries. Currently the hospital does not have the capacity or capability to address the mental health needs in our service area. The hospital will continue to partner with local providers to provide care for the mentally ill. East Carolina Behavioral Health is the lead agency for mental health services in our region and we will continue to support their efforts to improve mental health services.

Similarly the hospital does not have the capacity or capability to address the dental health needs in our service area. As with mental health, the hospital will continue to partner with local providers to connect patients with dental services. Additionally the hospital will support the efforts of East Carolina University in establishing its dental school and programs to address dental health needs in eastern North Carolina.

Deaths from unintentional injuries are mainly related to natural disasters and boating accidents. The hospital works with multiple agencies to promote regional disaster preparedness to address the impact of natural disasters and will continue to participate in those activities. Bertie County Emergency Services is the lead agency for disaster preparedness. The hospital lacks the capacity and capability to provide injury and accident prevention education regarding boating and other injuries. Other agencies such as the NC Fish and Wildlife Commission provide community education and resources regarding boating and water safety.

Approval

Vidant Bertie Hospital's Implementation Strategy for 2013-2016 was approved by the Vidant Community Hospitals' Board of Directors on September 24, 2013.

Dr. David Herman, Chair,
Vidant Community Hospitals' Board of Directors