

# Vidant Chowan Hospital's Community Health Implementation Strategy



2013-2016

# Executive Summary

## **Executive summary**

Vidant Chowan Hospital is a 25-bed hospital in Edenton, NC that provides surgical, emergency, medical/surgical, intensive care, family birthing, laboratory and radiology services, as well as a specialty clinic. The hospital also offers cardiopulmonary rehabilitation, diabetes self-management, outpatient behavioral health services and physical, speech and occupational therapy.

Vidant Chowan 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 Chowan 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 Chowan includes Chowan County and parts of Perquimans County. Chowan County encompasses 233 square miles, 61 of which are water.

The major town in Chowan County is Edenton, the county seat. Other Chowan County communities include Tyner, Rocky Hock, and Yeopim. Perquimans County encompasses 329 square miles, including 82 square miles of water. Hertford is the county seat and other Perquimans communities include Bethel, Winfall, Chapanoke, Belvidere, Durants Neck and Snug Harbor.

As of the 2010 U.S. Census, the population of Chowan County was 14,793, nearly evenly divided by gender. The median age of Chowan County residents was 44.8 years, 7.4 years older than the median age for North Carolina as a whole. Whites composed 62 percent of the total population; blacks/African Americans 34.3 percent; American Indians and Alaskan Natives 0.3 percent; Asians, native Hawaiians and other Pacific Islanders 0.4 percent; and Hispanics/Latinos of any race 3.4 percent.

Chowan County is a tier 1 county, meaning it is one of the 40 most economically distressed counties in North Carolina. Chowan's per capita income and median income per household are \$5,439 and

\$8,705, respectively, below the state as a whole. Almost 65 percent of Chowan County public school students are enrolled in free or reduced lunch programs. Additionally, the poverty rate in Chowan County for 2007-2011 is 23.7, well above the state rate of 16.1. Chowan's high school dropout rate is also higher than the state at 5.66 versus the state rate of 3.43.

Chowan County has a lower rate of uninsured individuals in the 19-64 age range than the state, 20.6 versus 23.0, but has a higher proportion of Medicaid eligibles than the state, 23 percent versus 17 percent. In terms of active health professionals per 10,000 residents, Chowan exceeds the state on every indicator except dentists. Chowan County's health rankings are 23rd on mortality, 64th on morbidity, 51st on health behaviors, 18th on clinical care, 77th on social and economic factors, and 49th on physical environment compared with other North Carolina counties.

Perquimans County's population was 13,453 as of the 2010 census, nearly evenly divided by gender. The median age of Perquimans County residents was 46.4 years, which is 9.0 years older than the state as a whole. Whites composed 72.1 percent of the total population; blacks/African Americans 24.9 percent; American Indians and Alaskan natives 0.3 percent; Asians, native Hawaiians and other Pacific Islanders 0.3 percent; Hispanics/Latinos of any race composed 2.1 percent.

Perquimans County is a tier 2 county, meaning it is one of the 40 second-most economically distressed counties in North Carolina. Perquimans' per capita income and median income per household are \$6,144 and \$12,692, respectively, lower than the state as a whole. More than 67 percent of Perquimans County public school students are enrolled in free or reduced lunch programs. Additionally the poverty rate in Perquimans County for 2007-2011 is 20.6, well above the state rate of 16.1. Perquimans' high school dropout rate is slightly lower than the state at 3.39 versus the NC rate of 3.43.

Perquimans County has a lower rate of uninsured individuals in the 19-64 age range than the state, 21.5 versus 23.0, but a higher proportion of Medicaid eligibles than the state, 19 percent versus 17 percent. In terms of active health professionals per 10,000 residents, Perquimans lags the state on every indicator including physicians, primary care physicians, dentists, nurses and pharmacists. Perquimans County's health rankings are 69th on mortality, 68th on morbidity, 61st on health behaviors, 44th on clinical care, 34th on social and economic factors, and 3rd on physical environment compared with other North Carolina 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 Chowan and Perquimans counties include:**

- o Albemarle Regional Health Services
- o Vidant Chowan Hospital
- o Albemarle Health
- o Healthy Carolinians of the Albemarle
- o East Carolina University
- o Three Rivers Healthy Carolinians
- o Perquimans County
- o College of the Albemarle
- o NC Cooperative Extension-Perquimans County
- o Vidant Medical Group
- o Vidant Chowan Directors Council
- o Vidant Chowan Patient and Family Advisor
- o Chowan Hospital Foundation

**Chowan Hospital Foundation 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 health-focused grants to their communities.

The goal 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 care and locates programs within communities, making them available and more accessible to people needing the programs/services.

Chowan Hospital Foundation established a committee of local community members to review the health needs of our community and determine focus areas for participation.

Members of our committee include: the health education director for ARHS, a retired school teacher, a hospital registered dietitian and member of Three Rivers Healthy Carolinians, the director of planning and marketing at Vidant Chowan Hospital and a staff nurse at Vidant Chowan.

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

- o Access to Care
- o Chronic Disease Prevention and Management
- o Maternal and Child Health

Vidant Chowan Hospital distributed \$74,400 to various agencies in Chowan, Perquimans, Tyrrell and Washington counties 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 on the CHAC. 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 5 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 healthcare 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 Chowan and Perquimans counties and improve quality of life for people living with diabetes.*

#### **Strategies:**

- o Continue offering free blood sugar screenings throughout the community.
- o Continue supporting the diabetes support group and Diabetes Day program.
- o Continue offering diabetes education through Diabetes Self-Management program.
- o Develop plan to offer additional foot and eye screenings throughout the community.
- o Improve medication education for diabetes patients.

### **Priority health need: cancer**

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

#### **Strategies:**

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

### **Priority health need: cardiovascular disease**

**Goal:** *To reduce the rate of cardiovascular disease in Chowan and Perquimans counties and improve quality of life for people living with cardiovascular disease.*

#### **Strategies:**

- o Continue providing cardiopulmonary rehabilitation and cardiology specialty clinic and diagnostics.
- o Continue offering free blood pressure and cholesterol screenings throughout the community.
- o Continue hosting the annual heart health event for women.
- o Optimize the use of health coaching services at Vidant Medical Group practices.



## **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:**

- o Continue offering Healthy Living Support Group to promote healthy behaviors.
- o Expand congregational health program to include additional churches.
- o Continue supporting the Eat Smart, Move More, Weigh Less program.
- o Continue supporting the Expanded Foods and Nutrition Education Program.
- o Continue providing health fairs.
- o 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 Chowan and Perquimans counties.*

### **Strategies:**

- o Continue marketing initiatives to promote screenings and immunizations.
- o Continue offering transitional care services to connect patients with chronic conditions to community services.
- o Continue flu awareness and prevention activities.
- o Inform providers and communities about local services through education and awareness activities.
- o 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. Chowan and Perquimans counties Emergency Services are the lead agencies 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 Chowan 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