

Coastal Carolinas Health Alliance Regional Needs Assessment

Executive Summary

Purpose/ Overview

Southeastern North Carolina and northeastern South Carolina is a region with large numbers of ethnic minorities, increased poverty and high risk for chronic health conditions that burden the health care system and reduce quality of life. The region is largely rural with diminished access to many services. In order to assess and prioritize the greatest needs of the community, Coastal Carolinas Health Alliance (CCHA) in conjunction with the Duke Endowment and other contributing community organizations conducted a community needs assessment. Through the use of both quantitative and qualitative data, health disparities within the region can be identified. Once the disparities are recognized, a plan of action to improve the health of the region can be formulated with focus in such areas. The assessment comprises secondary health statistics as well as primary data collected from local residents via surveys and in some areas, focus groups. This compilation of information provides vital information necessary to identify the overwhelming needs of the area's residents and develop programs to address those needs. CCHA also hopes to obtain grant funding, where appropriate, to aid in launching suitable initiatives.

Geographic Parameters

Bladen County, NC	New Hanover County, NC
Brunswick County, NC	Marion County, SC
Columbus County, NC	Onslow County, NC
Duplin County, NC	Pender County, NC
Harnett County, NC	Robeson County, NC
Horry County, NC	Sampson County, NC

Disparities in which the CCHA Region Exceeds the North and South Carolina State Rates

AIDS	Diabetes Mellitus
Breast Cancer	Cerebrovascular Disease (stroke)
Prostate Cancer	Total Heart Disease & Other Ischemic Heart Disease
Percent of Persons in Poverty	Percent of Teen Pregnancies for Total Population
Unemployment	Homicide

Outstanding Community Perspectives

- Greatest health issues of concern: "Heart Disease/ Stroke" and "Drug/Alcohol Abuse"
- Greatest impact on the healthcare people receive: "Income and Lack of Health Insurance"
- Most desired community change: Increase the number of local job opportunities

Conclusion: Recommendations for Improvement

- Improve job opportunities and offer better healthcare benefits for employees
- Implement more health/wellness screens
- Increase health education within the community with a strong focus on the areas of greatest disparity as identified above
- Decrease teen pregnancies
- Offer more medication assistance programs

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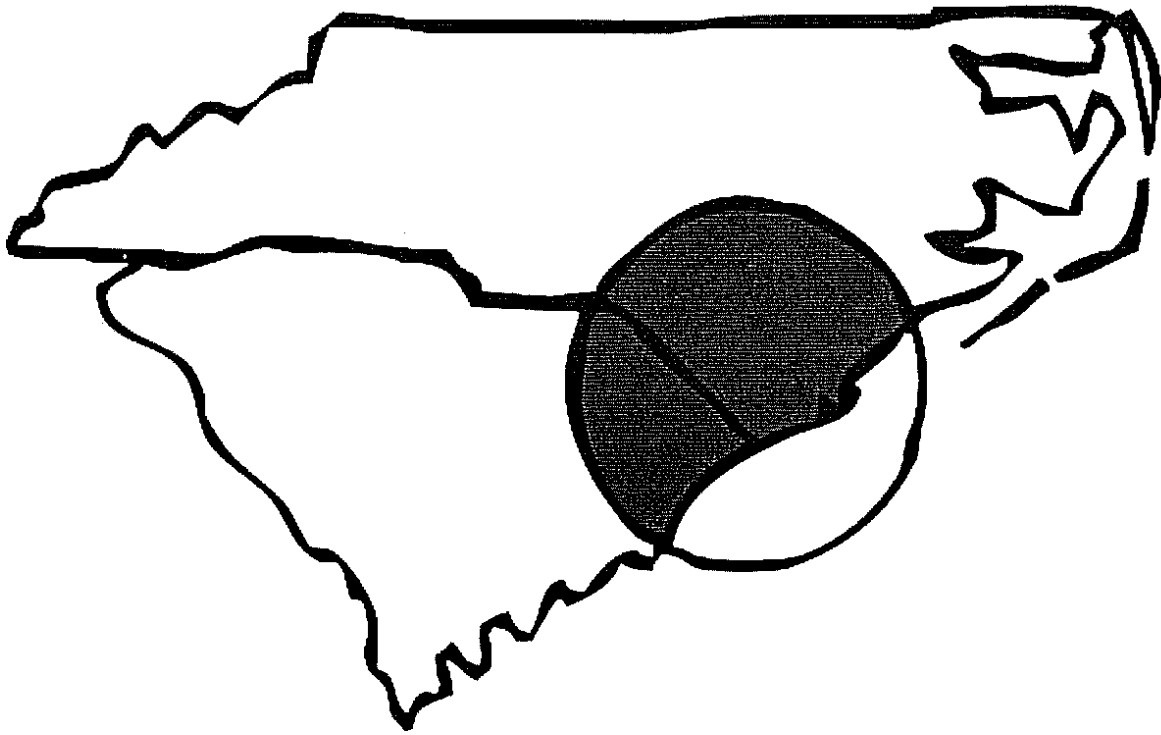
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2004



COASTAL CAROLINAS
HEALTH ALLIANCE



Mission: To provide value to members by facilitating improvement of quality and delivery of healthcare and achievement of operational efficiencies through collaborative efforts.

Vision: To be the preeminent hospital network characterized by collaboration, stellar member performance, commitment to mutual success, and a focus on local and regional healthcare issues.

Member Hospitals

Betsy Johnson Regional Hospital

Loris Healthcare System

Bladen County Hospital

Marion County Medical Center

Brunswick Community Hospital

New Hanover Health Network

Columbus Regional Healthcare System

Onslow Memorial Hospital

Conway Medical Center

Pender Memorial Hospital

Dosher Memorial Hospital

Sampson Regional Medical Center

Duplin General Hospital

Southeastern Regional Medical Center

Community Needs Assessment Contributors

Special thanks are offered to all who helped in the creation of this comprehensive assessment.

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Introduction

The majority of counties in southeastern North Carolina and northeastern South Carolina comprise a region that consists of an increased percentage of ethnic minorities, high unemployment rates and poverty levels, and high risk of life threatening diseases such as cardiovascular disease, diabetes, stroke, and hypertension. As a result, there exists a greater need for healthcare. With the exception of a few coastal cities, the communities are very small, rural areas that lack access to many of the resources needed to support the health care needs of their members. Therefore, many health disparities exist throughout the region.

A community health assessment is conducted periodically through the Coastal Carolinas Health Alliance with the help of its Community Health Improvement Team members and other community members and organizations. It allows for identification of the current health status of a community, the resources currently in place, the health care needs of the community that are not currently being met and the capacity for improvement. This assessment is a compilation of both primary data obtained from local residents via surveys, interviews, and health forums within the community, and secondary data obtained from data bases such as North Carolina State Center for Health Statistics and South Carolina Department of Health and Environmental Control. The inclusion of primary data provides qualitative data that allows each assessment to be unique in focusing on what the residents view as strengths, weaknesses, and major health issues within the community. It also helps to set priorities for improving the health of the communities according to the members' concerns. The use of secondary data provides quantitative data used to assess disease prevalence within a particular county and allows for comparison to other counties within the region and to the states of North and South Carolina. This comparison allows for detection of the commonalities of disease disparities within an area and focuses attention on those concerns that require a greater amount of resources for improvement.

The community health assessment focuses on eliminating the health disparities by considering who is affected (race, age, gender), how poor the community is (unemployment rates, poverty levels, use of food stamps, education) and where the highest health risk areas are. By identification of these factors, communities can focus their efforts on educating the community in prevention of the diseases, as well as how and where to get the health care necessary to treat the diseases. In order to achieve these goals, the community must have adequate funding to support such efforts. This funding is made possible through conducting community assessments and outlining the findings within applications for specific grants and endowments. The findings reflect the existence of disparities, the extent of the disparities and the measures necessary to correct them. This data compilation and analysis will increase the chances of obtaining adequate funding where appropriate to improve the general health of the communities.

Geographic service area

This assessment covers a total of twelve counties in North and South Carolina. Ten of those counties are in North Carolina:

- Bladen County
- Brunswick County
- Columbus County
- Duplin County, NC
- Harnett County
- New Hanover County
- Pender County
- Onslow County
- Sampson County
- Robeson County

Two counties are included from South Carolina:

- Horry County
- Marion County (Due to Marion County Medical Center's very recent membership into the Coastal Carolinas Health Alliance, data from this community is limited.)

Methodology

The Coastal Carolinas Health Alliance Regional Needs Assessment contains primary data from residents of eleven communities within southeastern North Carolina and northeastern South Carolina. The data was obtained through surveys and health forums conducted throughout the year 2003-2004. The primary data provides qualitative measurements of the communities' health and health care needs, in an effort to identify health disparities that can be addressed and corrected in order to improve the health of the region as a whole.

An ideal community needs assessment encompasses the perspectives of all members of the community. Representation from key leaders, services providers, various church and civic groups, all races, genders, and generations are necessary to complete a flawless assessment. In order to meet those demands, a standardized survey was developed and mailed to key leaders within each of the eleven counties. These surveys are designed to be distributed randomly throughout the community in order to get a clear "community perspective" of disparities as viewed by community members as a whole. Surveys were distributed at health fairs, senior activities, grocery and convenience stores, and other places in some of the counties. For the purpose of formal comparison within this assessment only survey responses from Pender and Harnett Counties include respondents other than key leaders. Therefore, a true regional "community perspective" cannot be concluded and is a noted limitation of this assessment. A second survey was developed and used in focus groups conducted by Coastal Carolinas Health Alliance's Community Health Team in several of the communities. This data is incorporated into the individual county assessments for those in which they were conducted. This information identifies what the community residents' view as healthcare strengths and weaknesses within the community as well as the major changes they feel are necessary to facilitate the improvement of the community's health. As a result, this assessment will aid in determining how to best address these needs and allocate resources.

The assessment is also made up of secondary data retrieved from various sources such as the North Carolina State Center for Health Statistics and South Carolina Department of Health and Environmental Control, among others. The databases that will be used to collect this information contain publically available statistics with no health identifiers. This data will provide quantitative measurements of the community's general health with regards to mortality/morbidity, chronic disease prevalence, STD prevalence, birth rates, teenage pregnancy rates, education, poverty level, etc. Due to the fact that the region is made up of counties contained in both North and South Carolina and the fact that two separate state sources were used, there is some variation in the data obtained for North Carolina vs South Carolina counties. All of the data obtained for North Carolina counties was not able to be duplicated by the South Carolina data sources and therefore direct county comparisons for the regional assessment in some areas was not feasible and is reflected in several of the data tables herein. The regional needs assessment and plan was formulated by taking a global look at the data contained within each of the individual county health assessments, formulating regional tabulations and then determining what

the most prominent health disparities are and where the majority exist within the region of southeastern North Carolina and northeastern South Carolina.

The primary community partner involved in this assessment is the Coastal Carolinas Health Alliance's Community Health Improvement Team lead by Emily Mabry, Operational Improvements. Coastal Carolinas Health Alliance (CCHA) is a non-profit organization made up of fourteen member hospitals located in southeastern North Carolina and northeastern South Carolina. CCHA was established approximately eleven years ago. The purpose of this organization is to "provide a cooperative forum for improving the quality and delivery of health care to the citizens of southeastern North Carolina and northeastern South Carolina" (Coastal Carolinas Health Alliance, 2003, About Us, para. 1).

The Community Health Team's mission is to establish a replicable disease management model through coordinated collaboration with key stake holders in an effort to reduce morbidity and mortality in the region. Representatives are from each of the fourteen member hospitals and may also serve as their county's local Healthy Carolinians coordinator. Nine of the twelve counties within the Alliance are certified through the North Carolina Governor's Task Force as Healthy Carolinian Partnerships. Brunswick County, NC is not currently certified but is in the process of applying for certification and Marion and Horry Counties are located in South Carolina. Healthy Carolinians is a North Carolina state initiative that South Carolina does not currently support. "The Governor's Task Force on Healthy Carolinians awards certification to communities who have established broad based community partnerships which represent the needs of the disadvantaged and whose mission is prevention based" (Healthy Carolinians, 1999-2002, Certification Process, para. 1). The community partnerships are made up of residents of the community of varying socioeconomic levels and ethnic ties, representation from government agencies, and leaders in the community as well as members from different organizations such as churches, schools and private businesses. In order to maintain Healthy Carolinians certification, communities must perform needs assessments every four years to evaluate the health status and needs of the community, and their capacity for improvement. The needs assessment is organized through the Coastal Carolinas Health Alliance's Community Health Team. With the residents' involvement, they must establish priorities determined from the findings and develop a plan of action aimed at reducing the health disparities. The partnership then informs the public of its findings and strategies for improvement, charging the community with taking an active role in improving their health. The common goal shared by both the Coastal Carolinas Health Alliance and Healthy Carolinians is improving the health of the communities they serve.