

Atrium Health Wake Forest Baptist Lexington Medical Center

Community Health Needs Assessment Implementation Strategy

Calendar Year 2022 – 2024

Introduction

Lexington Medical Center, doing business as Atrium Health Wake Forest Baptist Lexington Medical Center (“AHWFB-LMC”), a North Carolina non-profit corporation, is a component member of Atrium Health Wake Forest Baptist (“AHWFB”), a preeminent, internationally recognized academic medical center with balanced excellence in patient care, research, and education. As part of AHWFB, AHWFB-LMC has the resources of a nationally recognized academic medical center at its doorstep, enabling the hospital to offer world-class health care, close to home. AHWFB-LMC operates a 94 acute-care bed hospital at its Lexington, NC campus and a number of hospital-owned physician practices, specializing in digestive health, ENT, and head/neck surgery. AHWFB-LMC is accredited by The Joint Commission and has been committed to providing for the health care needs of Davidson County since the 1920s.

Vision

Atrium Health Wake Forest Baptist Lexington Medical Center’s vision is to be the first and best choice for care.

Mission

Atrium Health Wake Forest Baptist Lexington Medical Center’s mission is to improve health, elevate hope and advance healing – for all.

Culture Commitments

Atrium Health Wake Forest Baptist Lexington Medical Center’s culture commitments include the following:

- We create a space where all *Belong*
- We *Work as One* to make great things happen
- We earn *Trust* in all we do
- We *Innovate* to better the now and create they future
- We drive for *Excellence* - always

Mission Alignments: Community Engagement Principles, Population Health, Health Equity, Social Impact

AHWFB-LMC is committed to improving access, community health, and addressing the needs of our most vulnerable communities. As a result, we will emphasize identifying the *places* (e.g., zip codes, census tracts, neighborhoods, streets), *partners*, *people*, and aspects of *poverty* that we need to engage and address in our communities as we implement strategies.

We strive to be a leader in population health, health equity, and social impact as we look beyond the walls of our hospitals and medical offices to address social, economic, and environmental conditions that contribute to poor health outcomes, shortened lives, and higher health care costs of the communities we serve.

Community Served



AHWFB-LMC is located in Lexington, North Carolina in Davidson County. Lexington is the county seat of Davidson County. Davidson County covers approximately 553 square miles and has a population of approximately 305 residents per square mile. The County is mostly rural and located within the Piedmont region of central North Carolina. The geography consists of gentle

rolling terrain broken by hills and streams. The most common industries in Davidson County are manufacturing, healthcare, social assistance, and retail.

According to the 2020 census, Davidson County has approximately 168,930 residents. The population of the county is 79.4% non-Hispanic white, 10.1% non-Hispanic African American, 7.4% Hispanic or Latino, 1.6% Asian, and 1.5% Other. The population of the county is 51.1% female and 48.9% male. Persons 65 years and over represent 18.5% of the population. Persons under the age of 18 represent 27.2% of the population. The median income of the county is \$49,546 with the percentage of persons in poverty at 15.2%. Persons without health insurance, under the age of 65 is 14.6%.¹ According to the State of the County Health Report for Davidson County in 2019, life expectancy was 78.7 years for females and 73.9 for males.²

As a community hospital, AHWFB-LMC serves a geographic area that includes the cities of Lexington, Thomasville, and the surrounding area. Its neighboring counties include Davie, Forsyth, Guilford, Montgomery, Randolph, and Rowan. Davidson County is primarily comprised of four zip codes: 27292 (Lexington), 27295 (Lexington), 27239 (Denton), and 27360 (Thomasville).

According to North Carolina State Center for Health Statistics, the leading causes of death in Davidson County for 2019 were cancer and heart disease. Davidson County, like many counties across North Carolina, is seeing the impact of the opioid epidemic. In 2018, there were 142 ED visits and 35 deaths in Davidson County due to unintentional opioid poisoning.³

Neighborhood resources, ethnic diversity and fragmentation of services within Davidson County pose formidable organizational challenges in community benefit programming. Atrium Health Wake Forest Baptist Lexington Medical Center's approach to community benefit adopts a comprehensive notion of health determinants that are spread across domains of behavioral risk, social and economic circumstances, environmental exposures, and medical care. The balance and effects of many of these determinants, e.g., availability of healthy foods, parks and other safe places to play and exercise, exposure to environmental irritants, and safe housing, are specific to Davidson County and are built into the CHNA Implementation Strategy.

2022-2024 Community Health Needs Assessment

During 2021, AHWFB-LMC conducted a Community Health Needs Assessment ("CHNA") for the years 2022-2024 to identify the health needs of Davidson County. The CHNA process involved the collection of primary data from community surveys and interviews. In addition, secondary data sources were examined that included state level data (e.g., North Carolina State Center for Health Statistics, Healthy North Carolina 2030), county level data (e.g., State of the County Health (SOTCH) Reports from health departments), and community level data (e.g., neighborhood initiatives, community organizations). The process to identify priority health

¹ <https://www.census.gov/quickfacts/davidsoncountynorthcarolina>

² <https://www.co.davidson.nc.us/DocumentCenter/View/3746/2019-State-of-the-County-Health-Report>

³ <https://www.co.davidson.nc.us/DocumentCenter/View/3746/2019-State-of-the-County-Health-Report>

needs and to locate primary and secondary data sources involved close collaboration with partners, particularly the Davidson County Department of Public Health and Novant Health Thomasville Medical Center. In determining our criteria for priority health needs selection, the highest weights were placed on the health disparities associated with the need, the burden of the health need, the feasibility of possible interventions, and the importance the community placed on addressing the need. Upon completion of the CHNA, results of the assessment were shared with leaders at AHWFB-LMC and other key contributors for input.

The following CHNA priorities were identified and approved by the Board of Directors on November 18, 2021 for the 2022-2024 CHNA cycle:

- **Access to Care:** with a focus on special populations, particularly those who experience mental health challenges and substance use disorders
- **Social Impact and Injustice:** with a focus on addressing homelessness and influencing the root cause of health issues caused by power imbalances in political, economic, health, educational systems that result in health inequalities
- **Chronic and Emerging Diseases:** with a focus on supporting initiatives for early detection and ongoing treatment of chronic illness, obesity, and new diseases such as COVID-19. Concentrated focus will be placed on reducing the prevalence of chronic disease risk factors including high blood pressure and high cholesterol.

The 2022-2024 CHNA process found that social impact and injustice was identified by the community as a significant health priority that greatly influences the health of the community particularly its most vulnerable and underserved populations and individuals. The distribution of behaviors and health outcomes consistently follows social and economic patterns. Furthermore, some barriers to accessing care continue to prevent current programs and initiatives from reaching the populations in need. These challenges present important opportunities for the future. As we move forward as an integrated community of healthcare, social services and community leadership, we can leverage community assets and access to resources from the Atrium Health enterprise to improve the health of residents in Davidson County.

AHWFB-LMC acknowledges the importance of all health needs in the Davidson County community even though the hospital's resources and assets were best aligned to focus on the prioritized health needs addressed above. Community needs that were identified but not prioritized for the 2022-2024 CHNA are as follows:

- Lung Disease
- Dental Health
- Crime

AHWFB-LMC leadership will continue to partner with community-based and non-profit organizations, public health and other governmental agencies, and the broader community to help address these health needs.

2022-2024 Community Health Needs Assessment Implementation Strategy Development

This accompanying document to AHWFB-LMC's 2022-2024 CHNA outlines strategies designed to improve health through hospital programming and support for external community initiatives led by community coalitions and organizations. The list of outlined strategies will describe planned actions to address the community health needs that were identified through its CHNA process. In addition, hospital leaders will use this document to communicate the goals, objectives and approaches that AHWFB-LMC will undertake to address community needs over the next three years, and help the community understand its role in addressing those needs.

The current set of strategies and related resources were identified by reviewing the AHWFB Social Impact Inventory, AHWFB-LMC's Program Inventory, the previous strategies outlined in the 2020-2022 CHNA Implementation Strategy, and other sources of information identified by the CHNA team leads. Additional existing programming and resources were identified through conversations with hospital and community leaders who have leadership responsibilities in addressing the priority health needs in Davidson County. These existing strategies were evaluated to determine if the hospital could build upon community assets, refocus the existing program to meet prioritized health needs, and reallocate internal resources for the strategies. After identifying existing strategies & programming that would continue to meet the priority needs of the current CHNA cycle, attention then focused on identifying new strategies that would allow the hospital to:

- be consistent with the hospital's organizational strengths and community capabilities
- assess availability of hospital and/or community resources to carry out the strategy
- achieve short-term and long-term results
- identify barriers that might exist
- create partnerships and generate community support

In developing new strategies, AHWFB-LMC initially reflected on how it might effectively lead, compared to being a supportive partner for other organizations designed to achieve collective impact. Additionally, the three levels of prevention were considered during the development process: 1) Primary prevention – preventing disease from occurring, 2) Secondary prevention – finding and treating the disease early, and 3) Tertiary prevention – targeting people with symptoms and making them healthy again. Multiple factors were considered that impact health, including individual behavior, community/social supports, and government health policies.

Finally, the following evidence-based interventions were investigated:

- Community Health Improvement Navigator, CDC (<http://www.cdc.gov/chinav/database/index.html>)
- Evidence-based Practice Centers, AHRQ (<http://www.ahrq.gov/clinic/epc/>)
- Guide to Community Preventive Services, CDC (www.thecommunityguide.org)
- The Cochrane Collaboration (<http://www.cochrane.org/>)
- County Health Rankings and Roadmaps (www.countyhealthrankings.org/)
- Healthy People interventions and resources (www.healthypeople.gov)
- Healthy North Carolina 2030: <https://nciom.org/wp-content/uploads/2020/01/HNC-REPORT-FINAL-Spread2.pdf>
- Healthy Communities Institute (www.healthyclmmunitiesinstitute.com)

- National Resource for Evidence-based Programs and Practices, SAMHSA, US DHHS (www.nrepp.samhsa.gov)

2022-2024 Community Health Needs Assessment Implementation Strategy Action Plan

AHWFB-LMC addressed each of the community health needs prioritized in the 2022-2024 CHNA when developing its implementation strategy action plan. Specific implementation strategies for each prioritized health need are included below. Over the next three years, additional strategies may be added to this action plan as opportunities arise from the identification of new health trends, health system resources, and community resources and partnerships.

PRIORITIZED HEALTH NEED: ACCESS TO CARE			
Goal	Strategies	Metrics	Potential Partners or External Organizations
Improve access to care with a focus on special populations, particularly those who experience mental health challenges and substance use disorders.	<p>Strategy 1: Reduce transportation barriers and enhance awareness of available services by collaborating with community partners to explore a recovery oriented system of care</p> <ol style="list-style-type: none"> 1. Share transportation and other resource information with attendees of community education events and health fairs 2. Participate with Barriers to Access to Care Workgroup to identify and assist clients facing transportation barriers 	<ol style="list-style-type: none"> 1. Number of community education events and health fairs held in vulnerable communities 2. Number of individuals receiving information 3. Number of FaithHealth referrals for clients receiving assistance to overcome barriers to access to care 	<ul style="list-style-type: none"> • AHWFB CareNet • AHWFB FaithHealth • Davidson County Transportation System • Davidson Medical Ministries • DayMark • DCCconnect • Path of Hope
	<p>Strategy 2: Provide education regarding drug use and prevention to community members by collaborating with community partners.</p> <ol style="list-style-type: none"> 1. Share prevention information with attendees of community education events and health fairs 2. Participate with Partners in Prevention Task Force 	<ol style="list-style-type: none"> 1. Number of community education events and health fairs held in vulnerable communities 2. Number of individuals receiving information 3. Number of individuals served 	<ul style="list-style-type: none"> • AHWFB CareNet • AHWFB FaithHealth • Davidson Medical Ministries • DCCconnect

PRIORITIZED HEALTH NEED: SOCIAL IMPACT AND INJUSTICE

Goal	Strategies	Metrics	Potential Partners or External Organizations
<p>Address social impact and injustice with a focus on addressing homelessness and influencing the root cause of health issues caused by power imbalances in political, economic, health, educational systems that result in health inequalities</p>	<p>Strategy 1: Connect unhoused population to community resources.</p> <ol style="list-style-type: none"> 1. Share housing resource information with FaithHealth clients 2. Participate with DCConnect to identify and assist clients in need of housing (DCConnect is a centralized referral and peer/mentor support program that aims to establish a recovery-oriented system of care primarily focused on homelessness, substance abuse, and post-incarceration. AHWFB-LMC representatives will serve on the Advisory Council of DCConnect and will have a direct role in supporting and implementing this community). 3. Provide referrals to housing agencies within Davidson County 	<ol style="list-style-type: none"> 1. Number of FaithHealth referrals for clients receiving assistance with basic needs: food, clothing, shelter 2. Number of individuals impacted through this collaboration of stakeholders 3. Number of individuals served 	<ul style="list-style-type: none"> • AHWFB FaithHealth • Community Action • Crisis Ministry • Open Hands • Salvation Army
	<p>Strategy 2: Explore issues of health equity through partnering with community stakeholders to bring awareness to the health crisis in the community and seek to bring positive change by closing equity gaps in health care access.</p> <ol style="list-style-type: none"> 1. Collaborate with City of Lexington Human Relations Commission and provide outreach to attendees of Health Equity Conference 2. Participate with DCConnect to identify and assist clients in need of services 	<ol style="list-style-type: none"> 1. Completion of conference 2. Number of individuals served by FaithHealth 	<ul style="list-style-type: none"> • AHWFB FaithHealth • Lexington Alumnae Chapter of Delta Sigma Theta Sorority • City of Lexington’s Office of Diversity/Equity/Inclusion • Davidson Medical Ministries

PRIORITIZED HEALTH NEED: CHRONIC AND EMERGING DISEASES			
Goal	Strategies	Metrics/What are we measuring	Potential Partners or External Organizations
Address chronic and emerging diseases with a focus on reducing the prevalence of chronic disease risk factors including high blood pressure and high cholesterol.	<p>Strategy 1: Work with community organizations, congregational networks, and individuals to improve care, management and prevention of chronic diseases</p> <ol style="list-style-type: none"> 1. Providing health education/outreach encounters to community organizations and churches with a focus on vulnerable populations. Education offered on the following topics/conditions: high blood pressure, diabetes, cancer and stroke. 2. Participating in Health Fairs/Events by providing education on healthy choices 3. Providing assistance with access to medications 	<ol style="list-style-type: none"> 1. Number of health education/outreach encounters provided to community-based organizations and churches in vulnerable communities 2. Number of participants at health fair events 3. Number of FaithHealth referrals for medication assistance. 	<ol style="list-style-type: none"> 1. Davidson County Health Department 2. Davidson County Senior Services 3. Davidson Medical Ministries 4. Faith based organizations 5. AHWFB FaithHealth

CHNA Implementation Strategy Updates

Atrium Health Wake Forest Baptist Lexington Medical Center will update and sustain this CHNA implementation strategy over the next three-years (2022-2024), paying attention to new community and hospital resources, and evaluating results of community benefit programs. The evaluation will determine if strategies are being carried out as planned and achieving desired results. As the programs are evaluated, the hospital may:

- Change a program to improve its quality or effectiveness,
- Expand a program to other geographic areas or populations, or
- Eliminate/replace a program with an alternate approach.

CHNA Implementation Strategy Adoption

The Atrium Health Wake Forest Baptist Lexington Medical Center Board of Directors approved this Implementation Strategy through a board vote on April 28, 2022.