



Atrium Health Wake Forest Baptist



Wake Forest Baptist Medical Center Community Health Needs Assessment (CHNA) FY 2022-2024 Executive Summary

Introduction

North Carolina Baptist Hospital (dba Atrium Health Wake Forest Baptist Medical Center) is a not-for profit academic medical center in Winston-Salem, N.C. It is a component member of Atrium Health Wake Forest Baptist, a preeminent, internationally recognized academic medical center with balanced excellence in patient care, research and education. Atrium Health Wake Forest Baptist's two main components are:

1. An integrated clinical system – anchored by Atrium Health Wake Forest Baptist Medical Center, an 885-bed tertiary-care hospital in Winston-Salem – that includes Brenner Children's Hospital, five community hospitals, more than 300 primary and specialty care locations and more than 2,700 physicians; and
2. Wake Forest School of Medicine, the academic core of Atrium Health Enterprise and a recognized leader in experiential medical education and groundbreaking research that includes Wake Forest Innovations, a commercialization enterprise focused on advancing health care through new medical technologies and biomedical discovery.

Atrium Health Wake Forest Baptist Medical Center is accredited by The Joint Commission and has been committed to providing for the health care needs of northwest North Carolina and southwest Virginia since the 1920s.

Definition of Community Served

Community Demographics

There are 382,295 residents in 146,816 households living in Forsyth County, NC (*source U.S. Census, 2019*), a county located in the Triad region of North Carolina. Forsyth County is the fourth most populous county in North Carolina. According to the U.S. Census, the population is 56.3% white, 27.5% Black or African American, 13.3% Hispanic or Latino, 2.6% Asian, 2.3% two or more races, 0.9% American Indian and Alaska Native, and 0.1% Native Hawaiian and Other Pacific Islander. The population of the county is 52.7% female and 47.3% male. Persons under 18 years of age represent 22.7% of the population while persons 65 years of age and over represent 16.4%. The percentage of persons without health insurance and under the age of 65 years old is 14.2%. In addition, the median household income in 2019 dollars is \$51,569. The percent of persons in poverty is 15.2%.¹

According to the *2020 Forsyth County, State of the County Health (SOTCH) Report*, chronic diseases and health conditions are the leading causes of death in Forsyth County. Although the rate has decreased to 157.9 (2015-2019), cancer remains the number one cause of death in Forsyth County. Mental health continues to be a health crisis for Forsyth County. The number of residents who visited the Emergency Department (ED) for mental health reasons in 2020 (2,318) declined from the previous year's total (2,746). Nevertheless, the 2020 total is

¹ <https://www.census.gov/quickfacts/fact/table/forsythcountynorthcarolina/POP060210>

noteworthy because for most of the year, Forsyth County's EDs limited acceptance of non-COVID related emergencies.

Process and Methods Used to Conduct the CHNA

Primary Data Sources

For the collection of primary data, a variety of data collection methods including surveys, community conversations, focus groups, and interviews were utilized.

Community Survey

In 2021, a joint community survey was created by Novant Health Forsyth Medical Center and Atrium Health Wake Forest Baptist Medical Center that sought community input. The Forsyth Community Health Needs Assessment survey was administered to community members at a community location, the Downtown Health Plaza, in Winston Salem. This survey was a short electronic-based questionnaire, and data was obtained between July 28, 2021 and October 10, 2021. A total of 50 community members participated in the survey.

The primary concern identified by 22 participants was **chronic disease, such as cancer, diabetes, and heart disease**. Also, of significant concern to the population is the **access to healthy foods, access to COVID-19 vaccines, dental care, and mental health issues**. The community health services that were identified as needing strengthening included **dental care, health care coverage/health insurance, mental health services, and public health services**. The community support services in most need of strengthening were **homeless services, transportation, and employment or job finding services**. Also of importance to these residents were **services related to domestic violence, substance use and having a food safety net or food banks**.

Secondary Data Sources

2020 Forsyth County, State of the County Health (SOTCH) Report

The 2020 Forsyth County State of the County Health (SOTCH) Report found that:

- Forsyth County's total **infant deaths** in 2019 was among the highest of the past 5 years
- Forsyth County's 2019 **chlamydia** rate of 844.6 is its highest of the past 5 years
- **Cancer, mental health, diabetes, cerebrovascular disease, hypertension, heart disease and chronic lower respiratory disease** are just a few of the major health issues in Forsyth County
- **Chronic diseases and health conditions are the leading causes of death in Forsyth County. Cancer remains the number one cause of death in Forsyth County**
- **Mental Health** continues to be a health crisis for Forsyth County
- **Polysubstance overdose** remains an emerging issue for Forsyth County

Identification and Prioritization of Community Health Need

Process

The process to identify priority health needs and to locate primary and secondary data sources involved close collaboration with partners, particularly the Forsyth County Department of Public Health and Novant Health Forsyth Medical Center. Tactics and strategies for collaboration were discussed that focused on efficient methods to obtain primary and secondary data to inform the Community Health Needs Assessment. Conversations with Forsyth Department of Public Health and Novant Health Forsyth Medical Center led to three solutions:

1. Atrium Health Wake Forest Baptist Medical Center would utilize the most recent data published by the health department. In this case, Atrium Health Wake Forest Baptist Medical Center would review and include data published in the 2020 State of the County Health (SOTCH) Report.
2. Incorporate resident surveys conducted in partnership with Novant Health Forsyth Medical Center
3. Community leaders and organizations who represent the broad interests of the community and who have been involved in county-wide needs assessments and conversations would be consulted to inform the process and identify community health needs.

Criteria

In determining our criteria, 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 places on addressing the need.

Criteria listed in the following chart, along with corresponding weighted values, were used to determine the health priorities selected by Atrium Health Wake Forest Baptist Medical Center.

Criteria	Weighted Value
Identified as a county priority	2
Disparity exists within census tract/zip code/county/market	3
AHWFB steering/leadership perceive as a priority	2
Great potential to improve health status	3
Positive visibility for Atrium Health Wake Forest Baptist Medical Center	1
High # of patients/residents can/would be impacted	2
Feasibility/resources availability /existing relationships	2
Supports Strategic Plan objectives	2
Synergy with current supported initiatives- FaithHealthNC, United Way	2

Coordinates/complements with County Health Department assessment priorities	1
Total points	20

Prioritized Health Needs

To address the community health needs identified in the Community Health Needs Assessment (CHNA), recommendations were prioritized on primary data gathered through the resident surveys and key information interviews, secondary data findings, criteria, and guiding principles. The identified priority health needs and recommended initiatives were then grouped into the following three domains:

1. **Access to Care:** with a focus on special populations who experience significant financial, health insurance coverage, transportation, location, time, health and health system knowledge, and agency barriers
2. **Social Impact and Injustice:** with a focus on the following factors that influence health
 - a. Food insecurity in underserved neighborhoods
 - b. Race and culture
 - c. Lack of awareness of resources
 - d. Inability to work due to medical conditions
 - e. Lack of affordable housing and poor housing conditions
 - f. Poverty
 - g. Education – universal Pre-K
3. **Chronic and emerging diseases, and key health conditions and indicators** including:
 - a. Cancer
 - b. Diabetes
 - c. Heart Disease
 - d. Hypertension
 - e. Cerebrovascular disease
 - f. COVID-19
4. **Maternal and Child Health and Infant Mortality**
5. **Mental Health and Poly-substance Use**

Sharing the CHNA and Communicating Priorities to Stakeholders

It is vital that the broader community, including community-based organizations, the faith community, grassroots leaders, and members of resident-led initiatives, understand that the assessment can be a powerful tool when utilized effectively. Therefore, North Carolina Baptist Hospital team members will provide workshops to community members who are interested in learning how to access this report and other informational resources available on the new [Community Impact Website](#). To further expand our reach, when appropriate, we will partner

with the Forsyth County Department of Public Health to disseminate the full report. Internal stakeholders with significant community partnership (e.g. NC Baptist Hospital Foundation, Philanthropy, and others) will also be invited to participate in learning opportunities. Internal communications and the Intranet will also serve as a platform to educate internal team members about the availability of the report and key findings. Several team members are also affiliated with community organizations through involvement on boards, committees, and other service positions. As such, it is expected that these individuals will continue efforts to publicize the CHNA and serve as an educational resource as opportunities arise to do so.