



Community Health Needs Assessment (CHNA) FY 2020-2022

Health System Executive Summary

North Carolina Baptist Hospital, Davie Medical Center, Lexington Medical Center, Wilkes Medical Center and High Point Medical Center

I. Health System Summary

Wake Forest Baptist Health is northwest North Carolina’s sole academic medical center, bringing to the region the resources of one of America’s top hospitals and innovative research centers and a premier medical school. The Health System operates Wake Forest School of Medicine, which has a faculty of 1,344, including physicians and basic scientists. It also operates, through the unincorporated operating division known as “Wake Forest Baptist Health,” a multi-location health system. Wake Forest Baptist Health has 1,535 acute care and rehabilitation beds operative across the system, which encompasses its main campus (885 beds), Wake Forest Baptist Health—Lexington Medical Center (94 beds), Wake Forest Baptist Health—Davie Medical Center (50 beds), Wake Forest Baptist Health—Wilkes Medical Center (130 beds), Alleghany Health (25 beds) and Wake Forest Baptist Health—High Point Medical Center (351 beds), which joined the Wake Forest Baptist Health system in fiscal year 2019. Overall, Wake Forest Baptist Health serves a 24-county region in northwestern North Carolina and southwestern Virginia and also draws patients from across the nation for select services.

The clinicians and research scientists of Wake Forest Baptist Health are nationally recognized for clinical excellence and internationally known for pioneering research and clinical innovation. Its clinical enterprise offers expertise in more than 100 areas of medicine, encompassing comprehensive preventive and highly specialized care for all ages. The medical center network includes the 167-bed Comprehensive Cancer Center and the 144-bed Brenner Children’s Hospital, both of which are on the main campus in Winston-Salem, as well as community hospitals in Davidson, Davie, Guilford and Wilkes counties. Across its service area of northwest North Carolina and southwest Virginia, Wake Forest Baptist Health has 6 emergency departments; three urgent care centers; 83 primary care clinics; 274 specialty clinics; 18 outpatient dialysis centers and one free-standing dialysis access center; and one freestanding imaging and endoscopy center.

II. Needs Assessment Process

The needs assessment plan was based on a set of best practices for community health assessments with the purpose of identifying three or four regional priority areas to focus on for FY 2020–2022. The process was designed to rely on existing public data, directly engage community stakeholders and collaborate with local public health, other health providers as well as community partners such as faith networks relevant to the social factors underlying patterns of access. The WFBH assessment was conducted in three stages: (1) data review (primary and secondary data), (2) setting priorities, and (3) community assets inventory.

The CHNA process occurred from spring 2018 to spring 2019. WFBH internally prepared the CHNA for North Carolina Baptist Hospital, Lexington Medical Center and Davie Medical Center based on the aforementioned best practices. Due to significant involvement and investment with the Wilkes and Guilford County Health Departments, Wilkes Medical Center’s CHNA is a joint collaboration with the Wilkes County Health Department, Wilkes Medical Center and The Health Foundation, Inc. and High Point Medical Center’s CHNA is a joint collaboration with the Guilford County Health Department, High Point Medical Center, Cone Health, the United Way of Greater Greensboro and Greater High Point and UNCG Department of Public Health.

CHNA plans were finalized in May and June 2019 upon final presentation and adoption of the assessments to the Wake Forest Baptist Health - Hospital Board of Directors. The following is a description of the assessment steps and timeline created by the CHNA Team.

1. Data Review

The data review and priority-setting phase began with the compilation of existing health-related data. Stakeholders reviewed multiple data sets including Forsyth, Davidson, Davie, Guilford, and Wilkes County public health needs assessments, North Carolina Indicators for Community Health Assessment, internal disease registries, and County Health Rankings.

2. Prioritized Community Health Needs

The identified priority health needs and recommended initiatives were then grouped into the following four domains:

- Access to care
- Chronic disease management and prevention
- Behavioral health and substance dependency
- Maternal and child health

The following prioritization criteria and weighting was used to identify community benefit priorities:

Criteria	Weighted Value
Identified as a county priority	2
Disparity exists within census tract/zip code/county/market	3
WFBH steering/leadership perceive as a priority	2
Great potential to improve health status	3
Positive visibility for WFBH/LMC	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

3. Community Assets Inventory

The Community Assets Inventory conducted by FaithHealthNC in 2014-2018, remains the foundation for the Health System’s community engagement strategy. This process highlights the community benefit principals of place, partnership and poverty. The inventory includes the location of the program (clinic or community service) as well as the nature of the intangible factors, especially trust, that determine access and collaboration among community partners. It is updated regularly, and continues to inform:

- Gaps in services and opportunities for new work
- Where and with whom there is a lot of work already being done
- Opportunities for partnership and/or collaboration

The detailed reports and supporting data will be made available on the WFBH internet site. Based on the priorities identified, WFBH will develop an implementation strategy to identify the means through which the healthy system plans to address needs that are consistent with the charitable mission as part of its community benefit programs for FY 2020 through 2022. Beyond the programs that will be addressed in the implementation strategy, which will be completed by November 2019, WFBH will continue to address many of the priorities by providing care to all, regardless of the ability to pay.