



# **CAPE FEAR VALLEY BLADEN HEALTHCARE**

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## **Bladen County Hospital**

### *2016 Community Health Needs Assessment*

A comprehensive assessment of the health needs of Bladen County residents

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## EXECUTIVE SUMMARY

Provisions of the Patient Protection and Affordable Care Act (ACA) require all non-profit hospital facilities in the United States to conduct a community health needs assessment and adopt an implementation strategy to meet the identified community health needs. In the process of conducting a community health needs assessment, all non-profit hospitals are required to take into account input from individuals who represent a broad interest of the community served, including those individuals with special knowledge and/or expertise in public health.

Bladen County Hospital conducted its first community health needs assessment to evaluate the health of the community, identify high priority health needs, and develop strategies to address the needs of the community in 2013. The 2013 Bladen County Hospital Community Health Needs Assessment included a combination of quantitative and qualitative information from reputable statistical sources, and community survey and feedback provided by community partners. This is the second CHNA completed by Bladen County Hospital. The same methodology was utilized for this report. The results of the 2016 Community Health Needs Assessment are summarized in this Report. In addition, changes in population health are discussed and a summary of the 2013-2015 Implementation Plan are included in Appendix 5. A comprehensive implementation plan for the next three years will be developed based on the results of the 2016 Community Health Needs Assessment.

Inquiries regarding the 2016 Bladen Hospital Community Health Needs Assessment should be directed to:

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## METHODOLOGY

### *Overview*

The assessment process included data collection from a combination of primary and secondary sources. Valuable input from community survey respondents provided primary data for the assessment. Secondary data sources included the 2010 U.S. Census, additional population data from the North Carolina Office of State Budget and Management, the North Carolina State Center for Health Statistics, and county level data from Bladen County Hospital and Bladen County Department of Health. Bladen County Hospital was an integral part of the Community Health Assessment Team (CHAT) established to analyze the community health needs of Bladen County. The CHAT reviewed the primary and secondary data, and discussed community health needs that may be addressed by the Bladen County Hospital. The Community Health Needs Assessment was conducted using the following six-step process:

### *Step 1: Establish a CHA Team*

The first step is to establish a Community Health Assessment Team to lead the community assessment process. This group consists of motivated individuals who act as advocates for a broad range of community members and appropriately represent the concerns of various populations within the community many of whom were involved in the previous CHNA completed in 2013.

#### **Community Health Needs Assessment Team (CHAT)**

##### *Project Facilitators*

- Marianne Valentiner, Health Educator I, Bladen County Health Department
- Berkleigh Pridgen, Health Educator I, Bladen County Health Department
- Donda Evans, Chief Nursing Officer, Bladen County Hospital

##### *Work Group*

- Sandra Kelly-Cain, Family Consumer Sciences Agent
- Zuhey Padilla, Community Representative/Translator
- Maria Edwards, Clerk to the Board/ Assistant to County Manager
- Linda Clark, Economic Development
- Debra Conner, Director of Nursing, Bladen County Health Department
- Kelsey Edwards, Bladen County Library Director
- Willie Kay McDuffie, Bladen County Lead School Nurse
- Patti Miller, Bladen County Parks and Recreation Program Coordinator
- Dijana Register, Administrative Officer

## METHODOLOGY

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- Carol Strickland, Young Families Connect Coordinator
- Kayla Brienne, Young Families Connect Health Educator
- Stacie Kinlaw, NC Cooperative Extension- 4H
- Janet Miller, DSS Social Work Program Manager
- Melissa Melvin, Administrative Assistant, Bladen County Hospital

### Advisory Team

- Debra Conner, Director of Nursing, Bladen County Health Department
- Tina Mundy, Bladen County Community College Human Resources Director
- Wayne Raynor Bladen County Interim Health Director
- Lisa Byrd, President, Bladen County Hospital Ashley Dowless, Director of Marketing, Bladen County Hospital
- Melissa Melvin, Administrative Assistant, Bladen County Hospital
- Kelsey Edwards, Bladen County Library Director
- Zuhey Padilla, Community Representative/Translator
- Willie Kay McDuffie, Bladen County Lead School Nurse
- Carol Strickland, Young Families Connect Coordinator
- Kayla Brienne, Young Families Connect Health Educator
- DiJuana Register, Administrative Officer

The CHAT established the goals of the Community Health Needs Assessment as defined below:

- A Community Health Needs Assessment provides the foundation for improving and promoting the health of a community.
- Identifies and describes factors that affect the health of a population and factors that determine the availability of resources within the community to adequately address health concerns.
- Describes the health status of a community.
- Identifies factors in a community that contribute to health challenges.
- Identifies existing community assets.
- Resources that can improve the health status of the community.
- Promotes partnership and collaboration within the communities.
- Share information and identified issues found in the community health assessment process.
- Tool for identifying emerging issues, foundation for planning programs and organization decisions to promote a healthier county and communities.

## METHODOLOGY

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### *Step 2: Collect Primary Data*

In this phase, the Community Health Assessment Team collected local data to discover residents' viewpoints and concerns about life in the community, health concerns, and other issues important to the people. Community interests and concerns extend beyond the statistical information readily available to health organizations involved in conducting the assessment process. It is important to assess the status of the community according to the people. Methods of collecting primary data include interview, listening sessions and focus groups. A process of "asset mapping" is also helpful. Through this process residents assist the health assessment team in identifying the community's many positive aspects.

### *Step 3: Analyze the County Health Data Book*

Bladen County prepares a County Health Data Book every several years that provides a wide range of health-related secondary data for Bladen County. The CHAT compared the Bladen County health statistics with North Carolina health statistics to identify potential health problems in Bladen County and to determine if improvement has been made since the previous CHNA.

### *Step 4: Combine Your County's Health Statistics with Your Community Data*

The CHAT reviewed the data from Phases 2 and 3 in detail, interpreting the health statistics and fitting together Bladen County health statistics with the Primary Data received from the community to gain a basic understanding of the community's major health issues.

### *Step 5: Report to the Community*

The CHAT reported the results of the assessment to the community. This report will be shared with Bladen County representatives and made available to the public.

### *Step 6: Select Health Priorities*

Following the completion of the 2016 Community Health Needs Assessment Report, an Implementation Plan will be created to meet the applicable identified needs. The Implementation Plan will be presented to the Bladen County Hospital Board for review and approval. Efforts will be measured appropriately and progress will be reported regularly.

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## PRIMARY DATA - Community Health Needs Assessment Survey Document and Partners

### *Community Health Needs Assessment Goals*

The CHAT identified the following goals for the Community Health Needs Assessment:

- Provide the foundation for improving and promoting the health of a community
- Identify and describe factors that affect the health of a population and factors that determine the availability of resources within the community to adequately address health concerns
- Describe the health status of a community
- Identify factors in a community that contribute to health challenges
- Identify existing community assets
- Identify resources that can improve the health status of the community
- Promote partnership and collaboration within the communities
- Share information and issues found in the Community Health Needs Assessment process
- Provide a tool for identifying emerging issues, foundation for planning programs and organization decisions to promote a healthier county and communities.

### *Community Health Needs Assessment Findings*

The CHAT reviewed information and details regarding the Community Health Needs Assessment process, including primary and secondary data collection methods (please see Appendices 1 - 6). Additionally, results from the 2013 Community Health Needs Assessment Implementation Plan, included in Appendix 5, were reviewed.

CHAT participants were asked to share perceived strengths and values of the community in an effort to identify potential resources to assist in addressing the community's top health needs. The top strengths and values identified include:

- Collaboration between community organizations
- Caring professionals
- Variety of resources
- Quality clinical care
- Public transportation
- Strong local government
- Affordable wellness activities.

## PRIMARY DATA - Community Health Needs Assessment Survey Document and Partners

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CHAT participants then were asked to share perceived barriers and concerns within the community in an effort to identify potential community health needs. The top barriers and concerns identified include:

- Patient motivation
- Awareness and education
- Lack of financial resources
- Duplication of programs
- Lack of county-wide referral program
- Lack of healthy dining options
- Poor quality of school lunches and concession stand items
- Aging population
- Teen pregnancy
- Obesity
- Lack of affordable medications
- Mental health
- Safety concerns (outdoor physical activity-parks, trails, etc.).

The CHAT reviewed the primary data and identified the community's barriers and concerns. The CHAT continued to research community health needs by utilizing a variety of secondary data. Recommendations and data will be shared with the Bladen County Hospital's senior leadership team.



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## SECONDARY DATA - Community Overview

### *History*

A Coastal Plain county and the third largest in North Carolina, Bladen County is rightfully named the “Mother County.” Of the state’s 100 counties, 55 of them were originally part of Bladen County.

Bladen County was formed in 1734 as Bladen Precinct of Bath County from New Hanover Precinct. It was named for Martin Bladen, a member of the Board of Trade. With the abolition of Bath County in 1739, all of its constituent precincts became counties.

Originally, Bladen was a vast territory with indefinite northern and western boundaries. Reductions in its extent began in 1750, when its western part became Anson County. In 1752 the northern part of Bladen County was combined with parts of Granville County and Johnston County to form Orange County. In 1754, the northern part of what was left of Bladen County became Cumberland County. In 1764, the southern part of what remained of Bladen County was combined with part of New Hanover County to form Brunswick County. In 1787, the western part of the now much smaller county became Robeson County. Finally, in 1808 the southern part of Bladen County was combined with part of Brunswick County to form Columbus County.

### *Geography*

Bladen County has several notable geographic features, most of which are bodies of water. The Cape Fear, South, and Black River all pass through the county, while the Bladen Lakes State Forest is important woodland in the region. The White and Jones Lakes are a few of Bladen County’s lakes; most are Carolina Bay phenomena, and Bladen County has more of these bays than any other county in the state. Carolina Bays are oval-shaped depressions that can be hundreds of feet or miles wide and between 15 to 50 feet deep. Scientists dispute the reason for these Carolina Bays; many hold to the belief that meteorite showers caused those indentations.

According to the U.S. Census Bureau, the county has a total area of 887 square miles (2,297.3 km<sup>2</sup>), of which 875 square miles (2,266.2 km<sup>2</sup>) is land and 12 square miles (31.1 km<sup>2</sup>) (1.37%) is water.

### *Populated Places*

- Abbottsburg
- Bladenboro

## SECONDARY DATA - Community Overview

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- Butters
- Clarkton
- Dublin
- East Arcadia
- Elizabethtown
- Kelly
- TarHeel
- White Lake
- White Oak

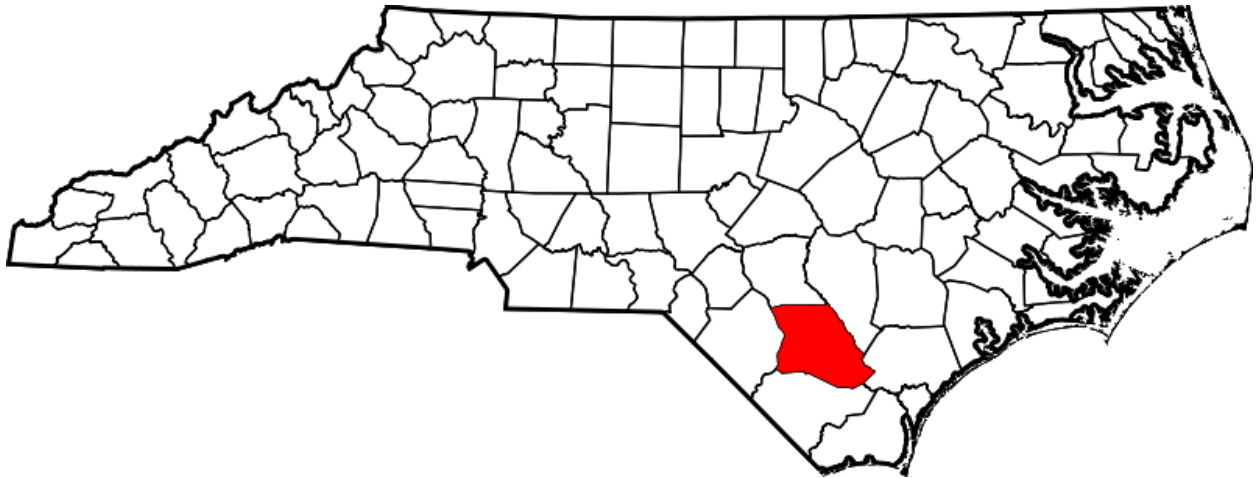
*Map of Bladen County, North Carolina  
with Municipal and Township Labels*



## SECONDARY DATA - Community Overview

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Bladen County is located just inside North Carolina's southeastern coastal plain. The North Carolina Office of State Budget and Management (NCOSBM) estimates in 2016, 35,194 people populate Bladen County's 879 square miles. Bladen's northern boundary connects with Cumberland County; its western boundary connects with Robeson County; its southern boundary connects with Columbus County; and its eastern boundary connects with Sampson and Pender County. The South River forms the County's eastern border, and the Cape Fear River transverses the County from the northwest to the southeast into the Atlantic Ocean; that effectively divides the County in half.



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## SECONDARY DATA - Demographics

### *Bladen County Population - 2014*

	Bladen County	North Carolina
White persons	60.7%	72.5%
Black persons	34.6%	22.1%
American Indian	2.9%	1.6%
Asian persons	0.3%	2.7%
Persons reporting two or more races	1.5%	2.1%
Persons of Hispanic or Latino origin	7.2%	8.6%
White persons not Hispanic	54.6%	64.1%
Persons under 5 years old	5.1%	6.1%
Persons under 18 years old	21.6%	23.0%
Persons 65 years old & over	18.7%	14.7%
Female Persons	51.8%	51.3%
Male Persons	48.2%	48.7%

Source: US Census Bureau 2014

Population distribution in Bladen County changed slightly from 2011 to 2014. The greatest change was in the percentage of black persons in the county which decreased by 0.8% and the percentage of persons under 18 years of age, which decreased by 1.1%.

### *Bladen County Economics*

- *Per Capita Income*

Year	Bladen County Per Capita Income	North Carolina Per Capita Income
2014	\$19,059	\$25,608

Source: US Census Bureau 2014

- *Median Household Income*

Year	Bladen County Median Household Income	North Carolina Median Household Income
2014	\$29,532	\$46,693

Source: US Census Bureau 2014

## SECONDARY DATA – Demographics

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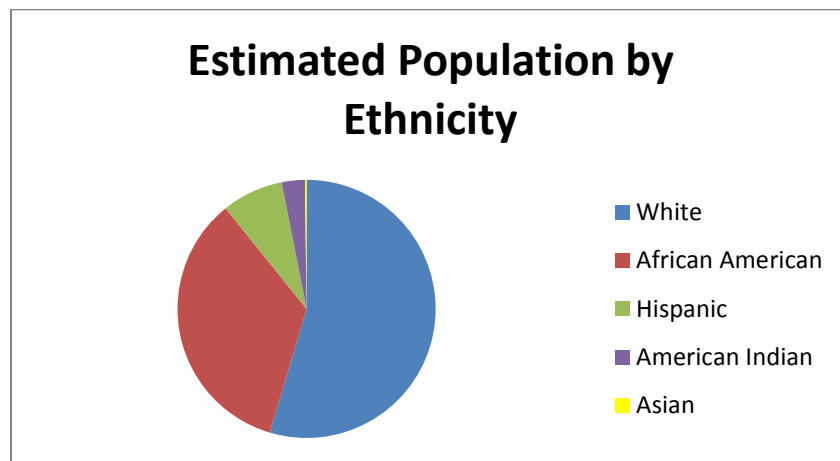
- *Persons Below Poverty*

Year	Bladen County Persons Below Poverty	North Carolina Persons Below Poverty
2010-2014	25.6%	17.2%

Source: US Census Bureau 2014

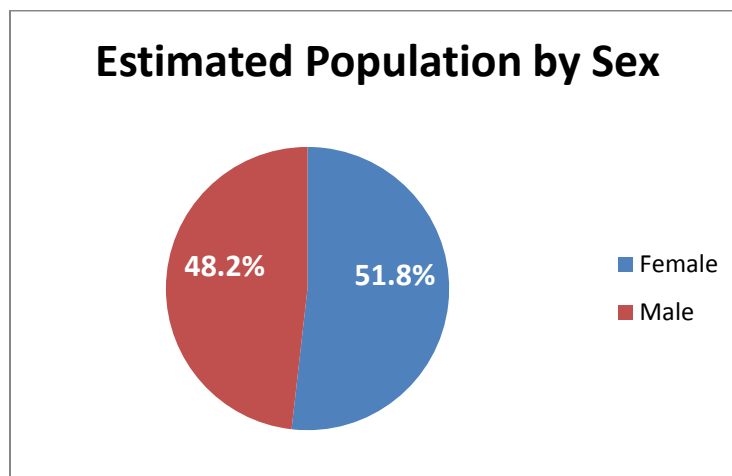
The number of person living below poverty in Bladen County has increased from 23.6% in 2007-2011 to 25.6% in 2010-2014.

- *Population by Ethnicity*



Source: US Census Bureau 2014

- *Population by Sex*



Source: US Census Bureau 2014

## SECONDARY DATA – Demographics

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### *Pollution Indexes*

An emerging family health issue identified by the respondents surveyed (19.2%), down from 20.4% in the 2013 CHNA, is Asthma. In 2014, 28 individuals were hospitalized in Bladen County compared to 38 in 2011, with a primary diagnosis of Asthma, 6 were under the age of 14. In 2014, Bladen County's rate was 80.8 cases for all ages per 100,000 population compared to State rate of 97.7. This rate decreased from 108.8 cases per 100,000 in 2011.

The following table shows a comparison of the 2012 Pollution Indexes for Bladen County, North Carolina, and the United States.

2012 Pollution Indexes	Bladen	North Carolina	United States
Air Pollution	87	90	100
Ozone Index	85	90	100
Lead Index	43	57	100
Carbon Monoxide Index	111	94	100
Nitrogen Dioxide Index	70	94	100
Particulate Matter Index	96	94	100

Source: [www.epa.gov](http://www.epa.gov)

The previous table shows that Bladen County is below the Index Score (Index score: 100 = National Average.) for all but one Pollution Index. Further, all but one if the above indexes, nitrogen dioxide, have decreased since 2010. Bladen County's Carbon Monoxide Index score is higher than the National Average and North Carolina's Index. Carbon monoxide (CO) is a colorless, odorless gas emitted from combustion processes. Nationally and, particularly in urban areas, the majority of CO emissions to ambient air come from mobile sources. CO can cause harmful health effects by reducing oxygen delivery to the body's organs (like the heart and brain) and tissues. At extremely high levels, CO can cause death.

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## SECONDARY DATA – Mortality and Morbidity

According to the 2010-2014 Age-Adjusted Death Rates per 100,000 population obtained from the NC State Center for Health Statistics, the ten leading causes of death for Bladen County are:

1. Diseases of the Heart
2. Cancer
3. Chronic Lower Respiratory Diseases
4. Cerebrovascular Disease
5. Other Unintentional Injuries
6. Diabetes
7. Unintentional Motor Vehicle Injuries
8. Nephritis/Nephrosis Diseases
9. Alzheimer's Disease
10. Septicemia.

Diseases of the heart and cancer remain at the top of the leading causes of death in Bladen County when compared to the 2013 CHNA. However, several other rankings have shifted. Chronic lower respiratory diseases have passed cerebrovascular disease and unintentional motor vehicle injuries moved down from fifth to seventh switching places with Other unintentional injuries.

The following chart contains a comparison of the age-adjusted death rates for the leading causes of death in Bladen County and North Carolina. Bladen County's rates are lower in three categories, most notably cancer, but are considerably higher than the State rate in others.

### 2010-2014 AGE-ADJUSTED DEATH RATES; PER 100,000 POPULATION

Cause of Death	Bladen County	North Carolina
Diseases of the Heart	232.1	165.9
Cancer	163.4	171.8
Chronic Lower Respiratory Diseases	44.0	46.0
Cerebrovascular Disease	42.3	43.0
Other Unintentional Injuries	36.6	29.6
Diabetes	35.0	22.1
Unintentional Motor Vehicle Injuries	34.6	13.5
Nephritis, Nephrotic Syndrome, and Nephrosis	27.1	17.0
Alzheimer's Disease	25.6	29.2
Septicemia	15.9	13.0

Source: North Carolina State Center for Health Statistics, 2014

## SECONDARY DATA – Mortality and Morbidity

Comparing age-adjusted death rates for Bladen County from the previous CHNA reflects a decrease in all causes of death except motor vehicles and Alzheimer's as shown in the following table. During the same time frame North Carolina deaths associated with all disease categories decreased; except diabetes, other unintentional injuries and Alzheimer's, which increased.

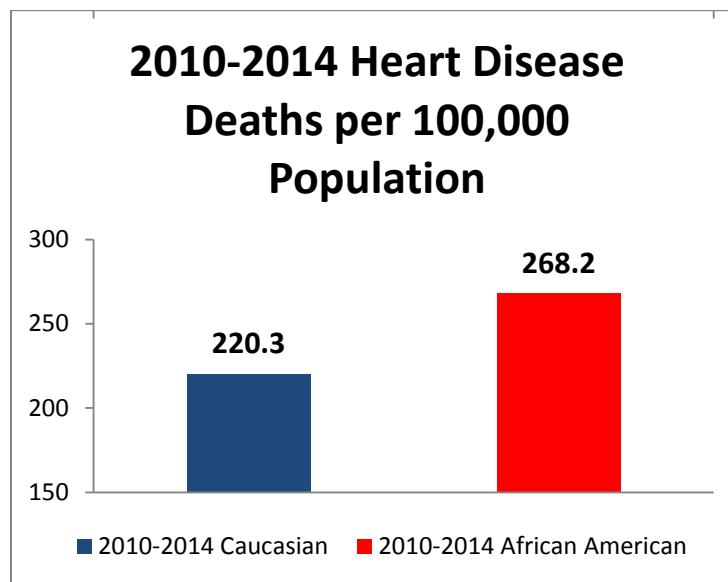
**Comparison of Age-Adjusted Death Rates**

Cause of Death	Bladen County		North Carolina	
	2007-2011	2010-2014	2007-2011	2010-2014
Diseases of the Heart	259.1	232.1	179.3	165.9
Cancer	192.8	163.4	179.7	171.8
Chronic Lower Respiratory Diseases	61.5	44.0	46.0	46.0
Cerebrovascular Disease	54.0	42.3	46.6	43.0
<b>Diabetes</b>	38.8	35.0	<b>15.5</b>	<b>22.1</b>
<b>Other Unintentional Injuries</b>	37.9	36.6	<b>22.0</b>	<b>29.6</b>
Nephritis, Nephrotic Syndrome, and Nephrosis	33.9	27.1	29.2	17.0
<b>Unintentional Motor Vehicle Injuries</b>	<b>26.1</b>	<b>34.6</b>	18.6	13.5
<b>Alzheimer's Disease</b>	<b>24.6</b>	<b>25.6</b>	<b>29.0</b>	<b>29.2</b>
Septicemia	16.0	15.9	13.6	13.0

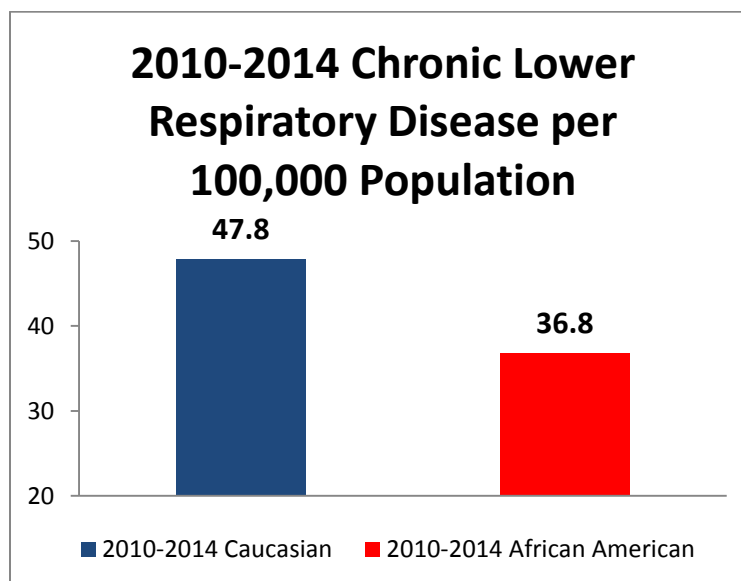
*Source: North Carolina State Center for Health Statistics, 2014*

Bladen County's minority residents tend to have higher mortality rates than North Carolina rates. The following graphs illustrate the rates by race for the county's six leading causes of death, five of which include health-related illnesses. The following data regarding disparities between races is not age-adjusted data. The following charts show the 2010-2014 Death Rates per 100,000 population by race for Heart Disease, Cancer, and Unintentional Motor Vehicle Deaths, Cerebrovascular Disease, and Diabetes, respectively. A sixth chart shows the 2010-2014 Rates per 100,000 population for Chronic Lower Respiratory Disease.

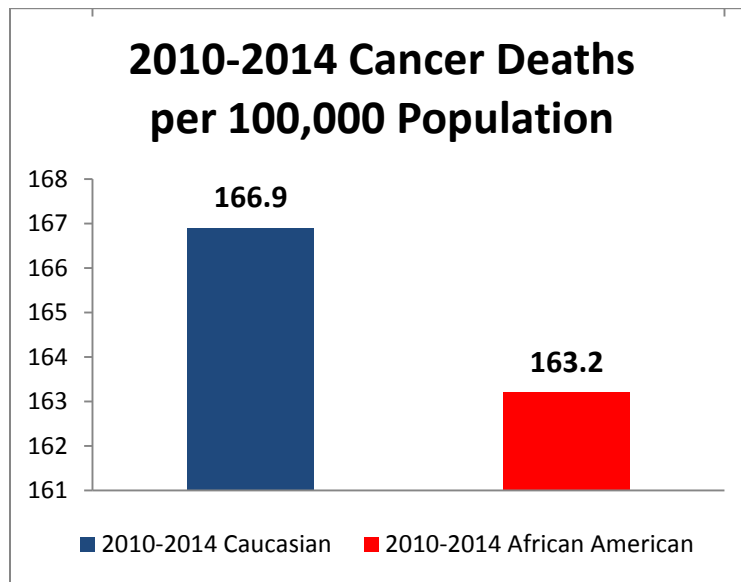




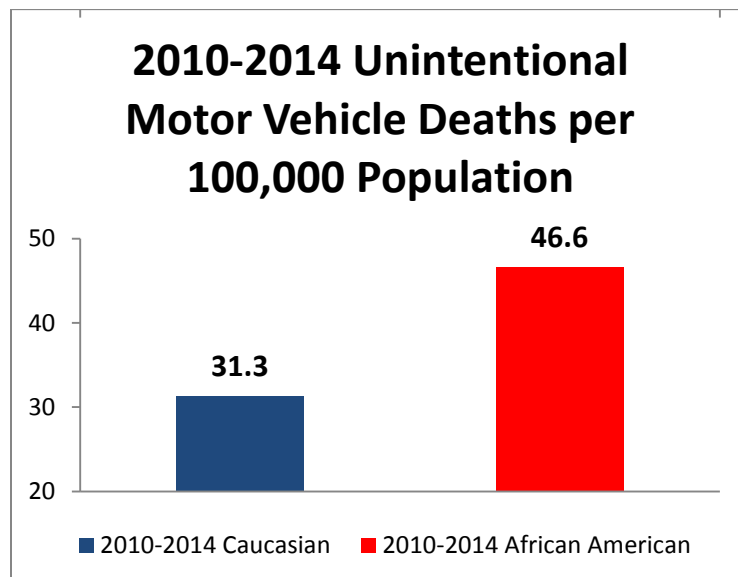
The heart disease death rate for the Caucasian population in Bladen County has decreased significantly, from 263.9 to 220.3 deaths per 100,000 population from 2007-2011 to 2010 – 2014. However, for the same timeframe, the age-adjusted heart disease death rate for the African American population in Bladen County has increased from 265.3 to 268.2 deaths per 100,000 population.



The chronic lower respiratory disease death rates for both the Caucasian and African American populations in Bladen County have decreased significantly from 2007-2011 to 2010 – 2014.



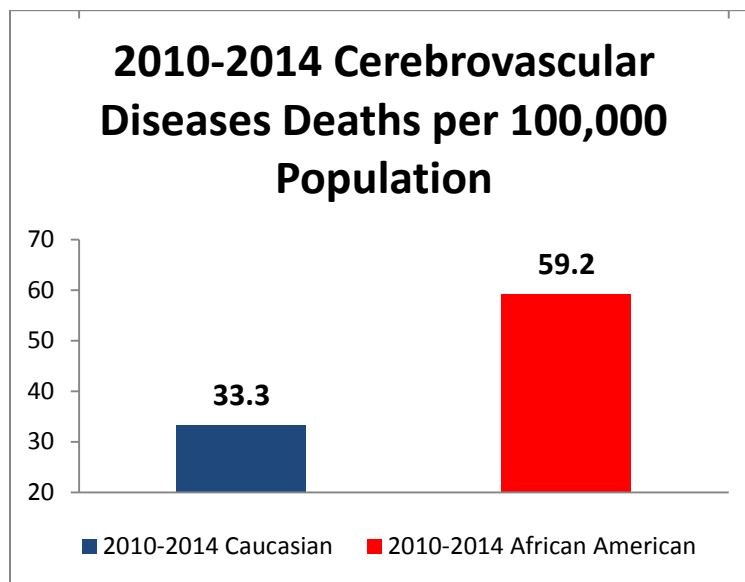
The cancer death rates for both the Caucasian and African American populations in Bladen County have decreased significantly from 2007-2011 to 2010 – 2014. A slightly greater improvement has been seen for the African American population.



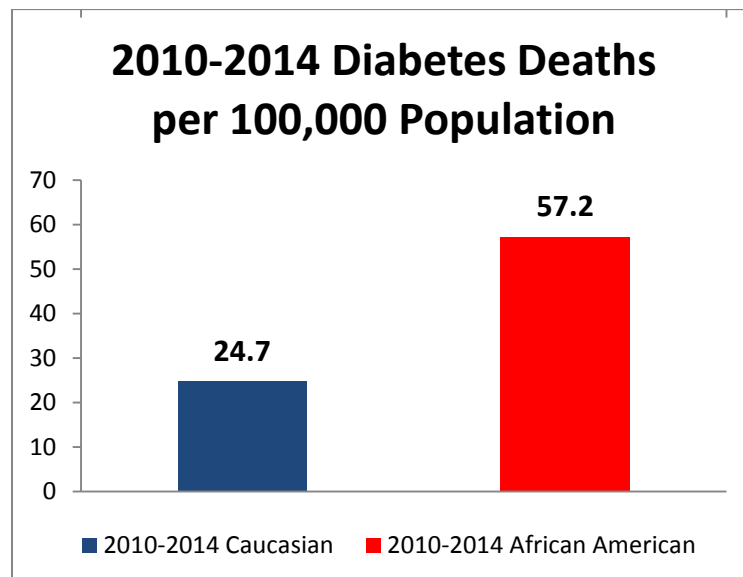
The unintentional motor vehicle death rate for the Caucasian population in Bladen County has decreased significantly, from 37.7 to 31.3 deaths per 100,000 population from 2007-2011 to 2010 – 2014. However, for the same timeframe, the unintentional motor vehicle death rate for the African American population in Bladen County has increased from 45.8 to 46.6 deaths per 100,000 population.

## SECONDARY DATA – Mortality and Morbidity

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The cerebrovascular disease death rates for both the Caucasian and African American populations in Bladen County have decreased significantly from 2007-2011 to 2010 – 2014.



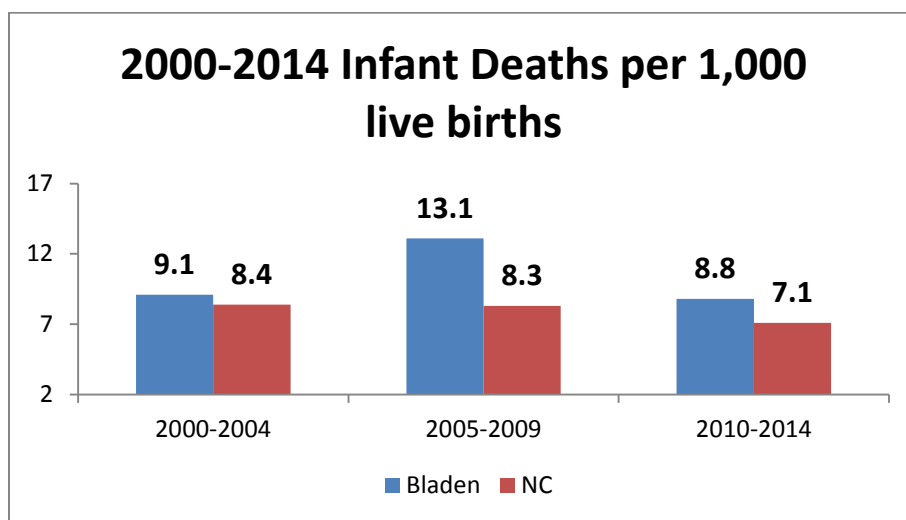
*Source: North Carolina State Center for Health Statistics, 2014*

The diabetes disease death rate for the Caucasian population in Bladen County decreased significantly from 30.2 to 24.7 deaths per 100,000 population from 2007-2011 to 2010 – 2014. During the same timeframe, the African American diabetes disease death rate decreased only slightly from 57.9 to 57.2 deaths per 100,000 population.

## SECONDARY DATA – Mortality and Morbidity

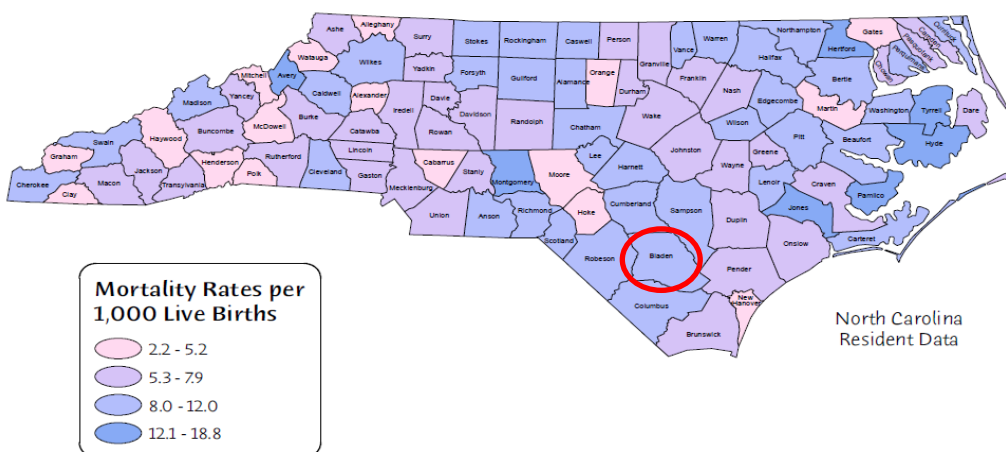
As shown by the previous charts, African Americans experienced higher rates in all of the categories except for Chronic Lower Respiratory Disease and Cancer. That data indicates the importance of a continued focus and interventions to address health issues experienced by Bladen County's diverse and minority citizens.

The following chart shows a comparison of Bladen County and North Carolina infant mortality rates per 1,000 live births in 2000-2014. The map shows infant mortality rate by North Carolina County in 2010-2014.



Source: North Carolina State Center for Health Statistics, Vital Statistics

### North Carolina Infant Mortality Rates 2010-2014



## SECONDARY DATA – Mortality and Morbidity

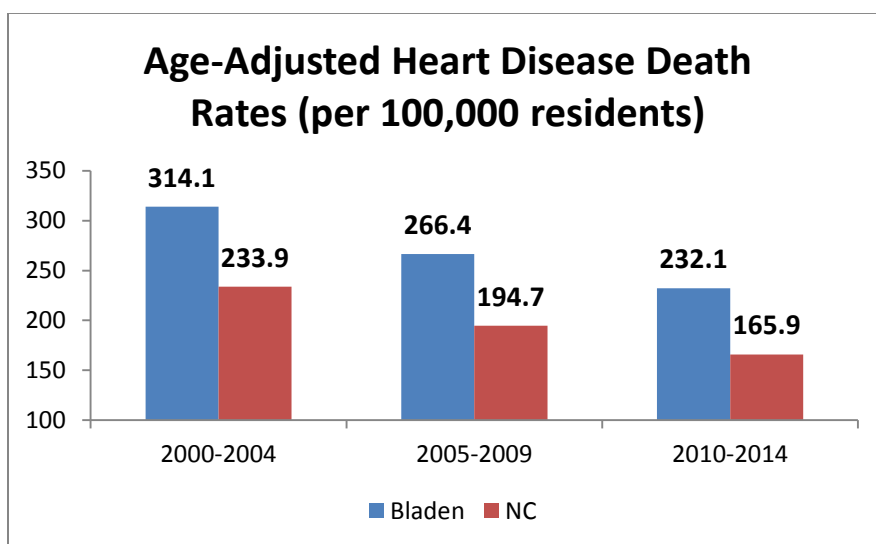
According to the State Center for Health Statistics, from 2000-2014, Bladen County's infant mortality rate has improved over the time frame. The rates for North Carolina were lower for the entire time frame. From 2005-2009, Bladen County's rates greatly exceeded North Carolina rate; 13.1 per 1,000 live births versus 8.3 per 1,000 live births. Based on Bladen County's small population size of about 35,000, any change or increase in Bladen County's infant mortality numbers results in a larger rate when compared to the state rate. In Bladen County, 1 infant death is 1 too many. There is a need for more education and awareness concerning prenatal health and infant care.

In April, 2011, the Young Moms Connect Program was implemented at Bladen County Health Department in an effort to address and reduce some risk factors. Bladen County has the following infant mortality reduction programs in place:

- Pregnancy Care Management
- Children's Health Clinic
- Care Coordination for Children (CC4C)
- Family Planning Clinic
- Pregnancy Testing Clinic
- Maternity Clinic
- Post-Partum/ Newborn Assessments.

### *Chronic Disease Trends*

Following are the age-adjusted leading causes of death in Bladen County: heart disease; cancer; diabetes; respiratory diseases; unintentional motor vehicle injuries; and cerebrovascular diseases. The following graphs show the trends of those diseases over the last 15 years through 2014. Heart Disease is the #1 cause of death in Bladen County.

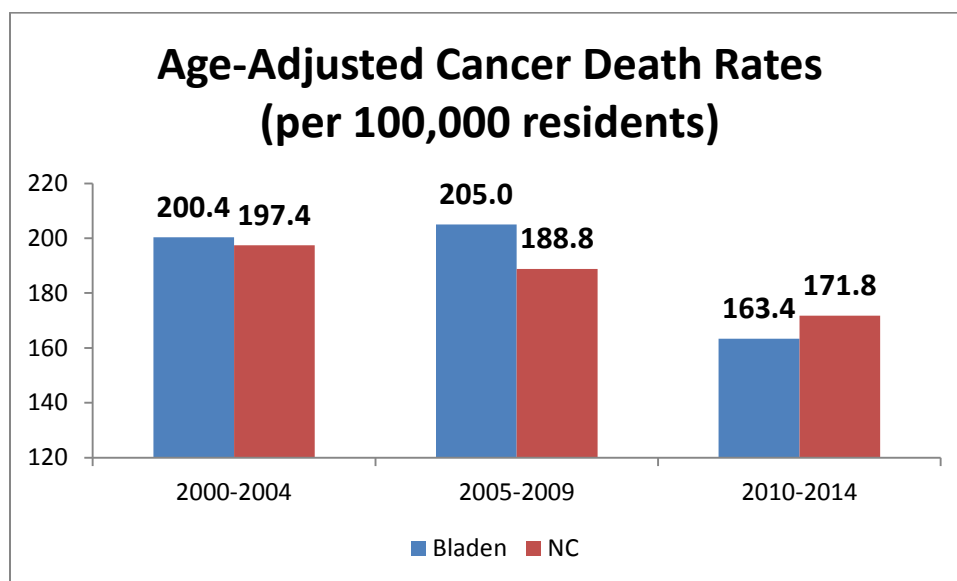


Source: North Carolina State Center for Health Statistics

## SECONDARY DATA – Mortality and Morbidity

The number of deaths from heart disease continues to be consistently higher than North Carolina. Bladen's rate has decreased from 314.1 to 232.1 per 100,000 population.

Cancer is the #2 cause of death in Bladen County.



Source: North Carolina State Center for Health Statistics

The Bladen County cancer death rates have decreased from 200.4 to 163.4 per 100,000 population. In the timeframe 2010-2014, county rates are lower than statewide North Carolina for the first time.

Trachea, Bronchus, and Lung are the highest rates for cancer in Bladen County. Lung cancer is the leading cause of cancer death in the United States in men and women. Like most cancers, lung cancer occurs after repeated insults to the genetic material of the cells. By far the most common source of the insults is tobacco smoke, which is responsible for about 87% of all lung cancer deaths occurring in the United States.

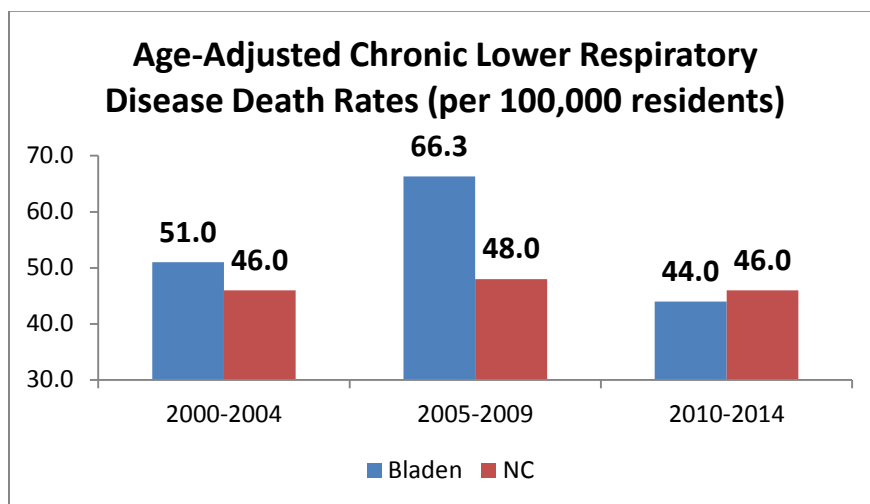
Cancer	Bladen County	North Carolina
Cancer All Types	163.4	171.8
Colon, Rectum and Anus	15.7	14.3
Trachea, Bronchus & Lung	53.1	50.6
Breast	19.1	21.6
Prostate	19.8	21.4

Source: North Carolina State Center for Health Statistics

## SECONDARY DATA – Mortality and Morbidity

As shown in the previous table, Breast and Prostate age-adjusted cancer death rates for Bladen County residents are lower than the North Carolina rate. Colon, rectum and anus, and trachea, bronchus and lung age-adjusted cancer death rates are greater.

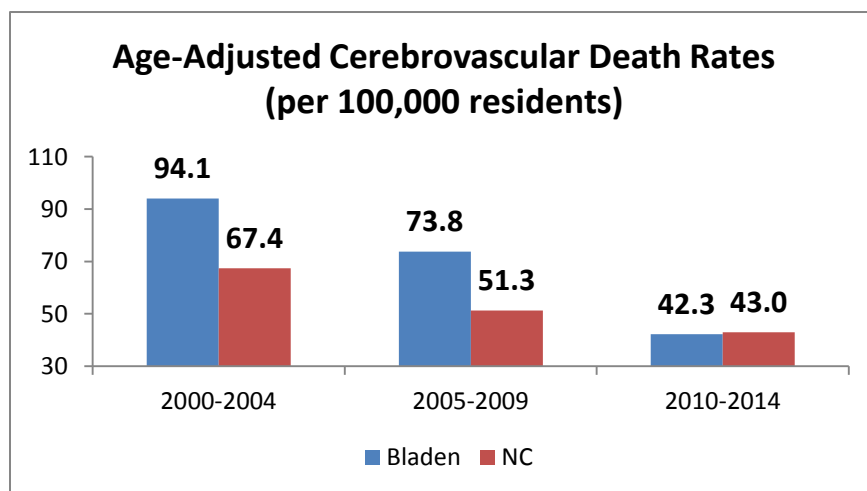
Diseases of the respiratory system are the #3 cause death in Bladen County.



Source: North Carolina State Center for Health Statistics

Diseases of the respiratory system include Chronic Obstruction Pulmonary Disease (COPD), emphysema, and chronic bronchitis. The number one cause of respiratory disease is smoking. Bladen County's age-adjusted rate for 2010-2014 is lower than the state of North Carolina's rate for the first time and reflects significant improvement from the previous five years.

The #4 cause of death in Bladen County is Cerebrovascular disease.

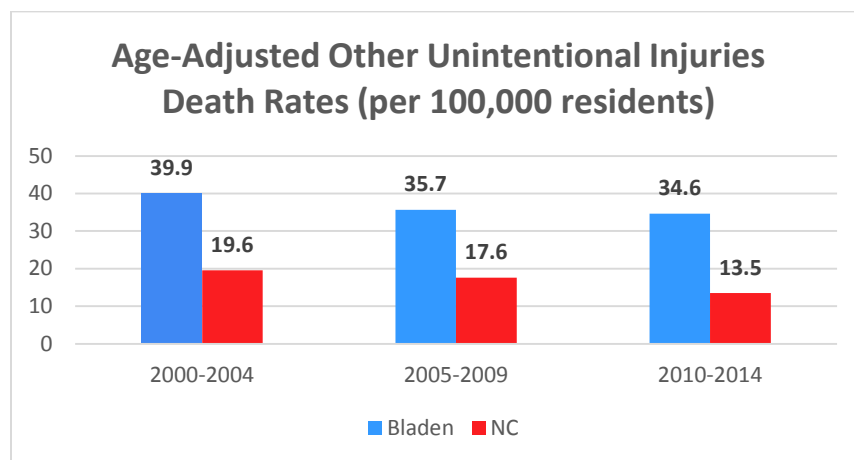


Source: North Carolina State Center for Health Statistics

## SECONDARY DATA – Mortality and Morbidity

Bladen County's age-adjusted death rate for cerebrovascular disease has decreased from 94.1 to 42.3 per 100,000 population during the fifteen years. Bladen County has improved their rates to best the North Carolina rates. During the last five years, the rate decreased by 31.5 deaths per 100,000 population. Hypertension, diabetes, high cholesterol levels, and smoking are risk factors that lead to Cerebrovascular disease. If blood pressure, diabetes, and cholesterol levels are not maintained within normal limits, a person is at higher risk of a stroke.

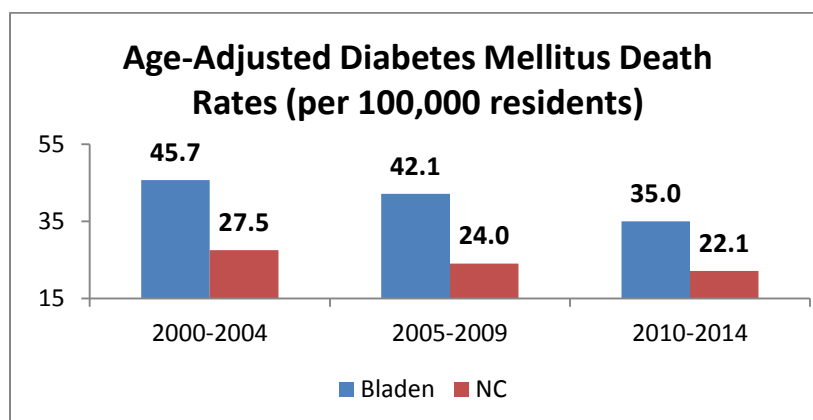
Other unintentional injuries is the #5 leading cause of death in Bladen County.



Source: North Carolina State Center for Health Statistics

Bladen County's age-adjusted death rate for other unintentional injuries has decreased to 34.6 age-adjusted death per 100,000 population. Bladen County's rate is significantly greater than the rate for the state of North Carolina.

Diabetes Mellitus is the #6 cause of death in Bladen County.



Source: North Carolina State Center for Health Statistics

Bladen County's age-adjusted death rate for diabetes has decreased from 45.7 to 35.0



## SECONDARY DATA – Mortality and Morbidity

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per 100,000 population. Despite this decrease, Bladen County's rate is still more than 58% greater than the rate for the state of North Carolina.

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## IDENTIFIED HEALTH NEEDS, PRIORITIZATION AND RESULTS

The final portion of the Community Health Needs Assessment process includes a summary of the priority health needs identified. To determine which needs should be priorities, Bladen County Hospital reviewed outcomes and findings from both the primary and secondary data, and the 2013 CHNA and utilized an objective approach to determine areas of greatest concern.

### *Prioritization Process*

Each section of the Community Health Needs Assessment has been incorporated to not only measure and estimate the level of current health needs for Bladen County residents, but to also highlight key factors and conditions that are expected to have the greatest impact on those needs going forward including factors such as the availability of existing healthcare facilities and resources, socioeconomic factors in the community, and, demographic differences.

Each potential need was analyzed against the others and prioritized based on a variety of different considerations, such as:

- Input received from interviews with community health leaders, community members, and members of Bladen County Hospital leadership
- Variance of need metric(s) from other Bladen County Hospital internal indicators
- Impact of demographics and socioeconomic characteristics on need levels
- Availability of other health resources to meet the need
- Ability of Bladen County Hospital to positively impact need.

### *Results*

The CHAT met in February 2016 to review the findings of the survey and to identify leading community health problems. The CHAT reviewed the results of the primary and secondary statistics. Based on the statistics, the CHAT listed the top community concerns and problems.

The CHAT ranked results from the surveys and statistical data on the county. Input was received from each CHAT member on programs and funding in Bladen County addressing issues that have been identified as emerging based on the CHNA survey. The Community Health Assessment process was used to identify and rate the community health problems to be addressed:

## IDENTIFIED HEALTH NEEDS, PRIORITIZATION AND RESULTS

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1. Magnitude: How many persons does the problem affect, either actually or potentially?
2. Seriousness of the Consequences: What degree of disability or premature death occurs because of the problem? What are the potential burdens to the community, such as economic or social burdens?
3. Feasibility of correcting: Is the problem amenable/agreeable to intervention.

The CHAT agreed on the top issues identified by the survey (primary data) and the secondary data (health and demographic statistics). CHAT members were emailed the Problem Prioritization Worksheets with the identified top health concerns and issues identified. Problem Prioritization Worksheets were calculated and the scoring indicated the rank of each health issue.

**Based on the results from the Problem Prioritization Worksheets, the CHAT agreed the focus areas for the Bladen County Hospital will be Chronic Disease Management and Prevention around the following conditions:**

1. Heart Disease
2. Cancer
3. Obesity/Weight Problem

### *New and Emerging Issues*

After reviewing the primary and secondary results, the CHAT identified one new area of concern: Teenage Pregnancy.

- *Teenage Pregnancy*

Teenage Pregnancy was ranked in the top five issues of those surveyed when questioned, "In your opinion, what is the biggest health and/or other issue in your community"? Based on Teenage pregnancy data for 2014 per 100,000 for NC was 32.3 vs. Bladen County Rate at 52.1. An increased concern surfaced after reviewing the 2013 rates for Teenage Pregnancy where NC's rate was 35.2 vs. a rate of 46.7 for Bladen County. This data validates that this is a growing issue in Bladen County that needs to be addressed. Bladen County's rates have increased by 11% from 2013 to 2014 and are significantly greater than the State rate.

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## Appendix 1

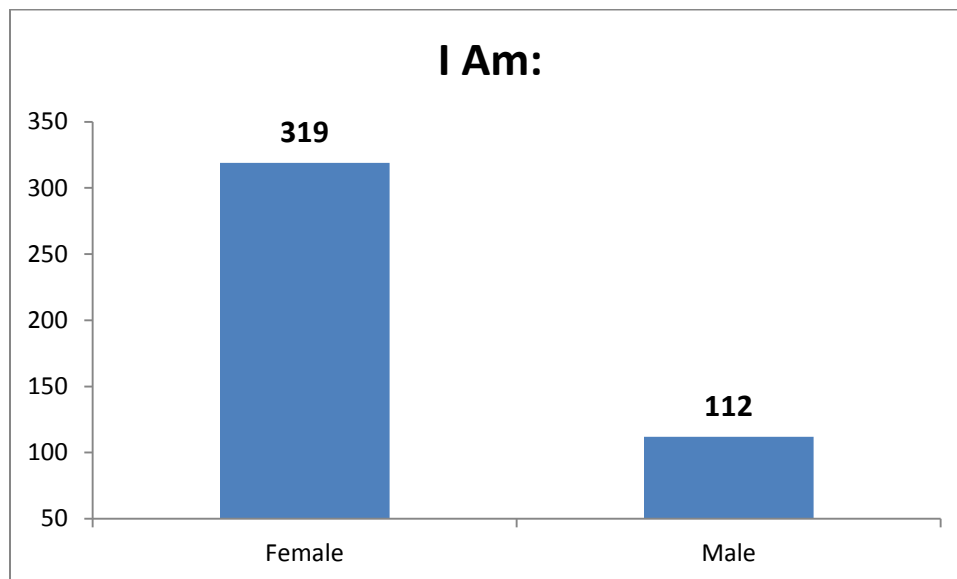
### PRIMARY DATA:

### Community Health Survey Results - Feedback

Primary data was collected during the time period of January 2016 to February 2016 using the Community Health Needs Assessment Survey. Participants of the CHAT distributed the survey to the community at various community locations. A total of **443** surveys were returned. Survey responses are discussed in this Section.

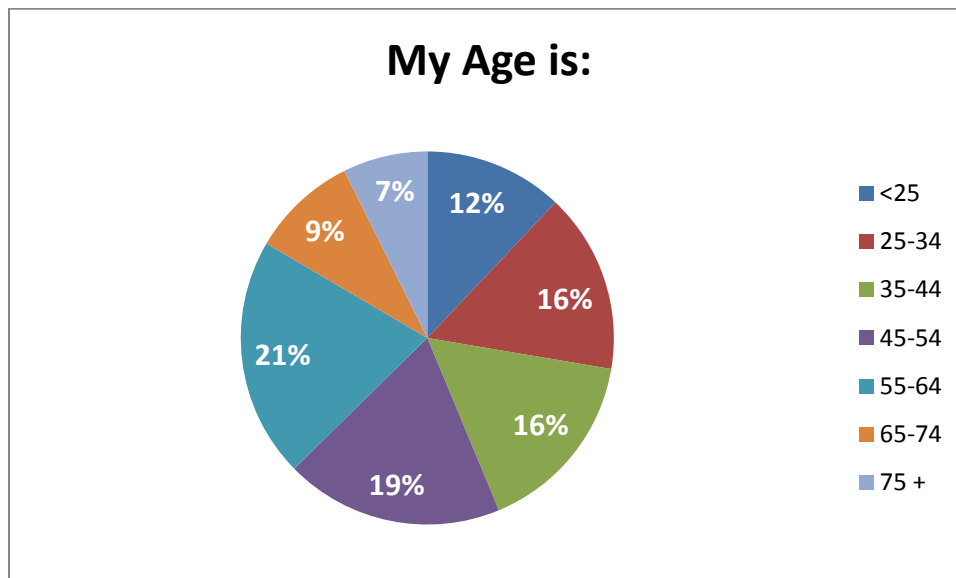
#### *Demographics*

Of the 443 survey respondents, 319 (72%) were female and 112 (25%) were male. There were some surveys in which individuals did not check either gender box. As such, the total number of participants does not match the total number of surveys completed. Surveys were completed from a variety of ages. The majority of participants were ages 55-64 (21%). The following two graphs illustrate those responses.

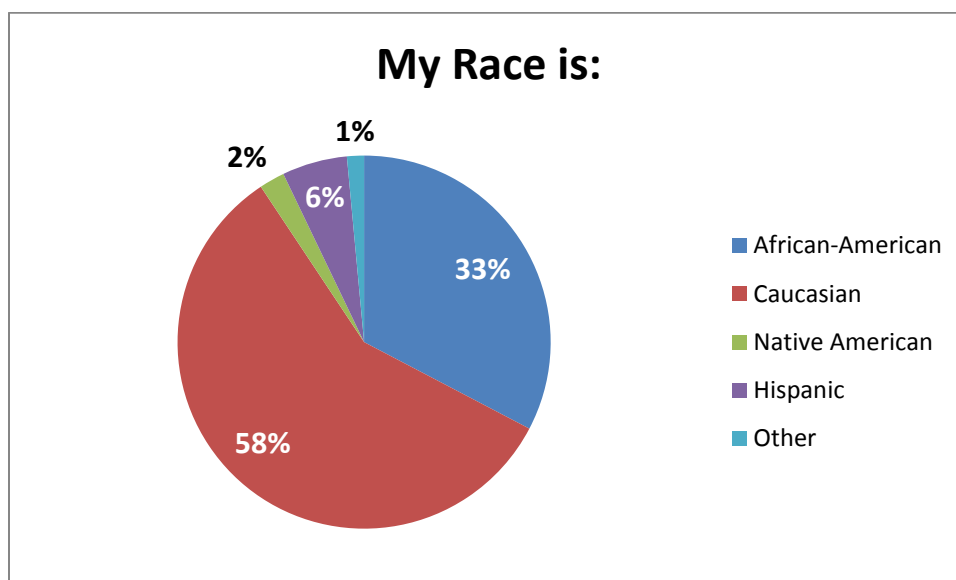


Appendix 1  
PRIMARY DATA:  
Community Health Survey Results - Feedback

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Racial makeup of Bladen County is of Caucasian, Native American, Hispanic, African-American, and 2% other. Survey respondents included the following: Native American 2%; Hispanic 6%; Caucasian 58%; African American 33%; and Other 1%. The race and ethnicity of survey respondents mirrors the race and ethnicity of Bladen County's population. The following two graphs illustrate those responses.



To ensure that a diverse group of citizens was reached and included, the CHAT distributed surveys to a variety of organizations, agencies, and community clubs

## Appendix 1

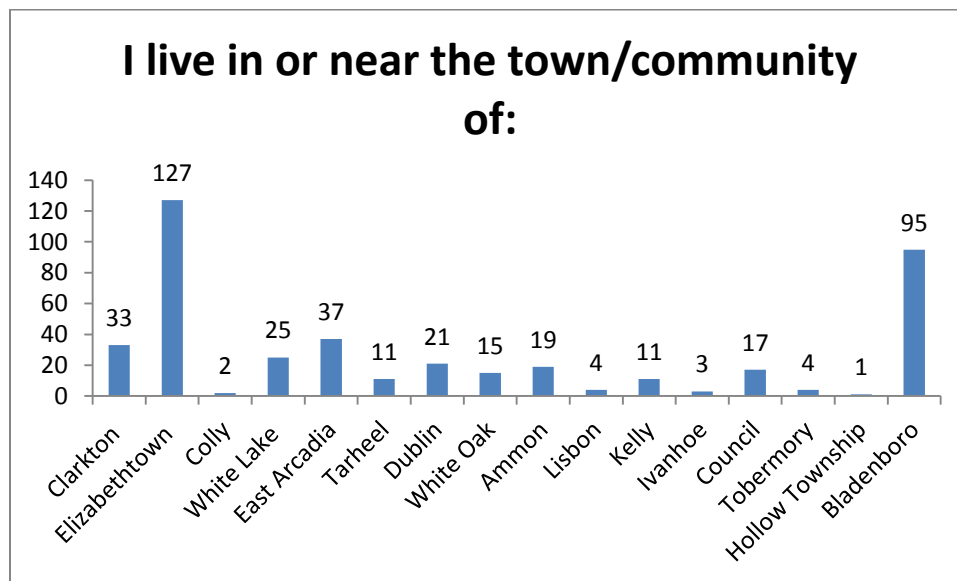
### PRIMARY DATA:

### Community Health Survey Results - Feedback

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throughout the county. A target return rate of 500 respondents was set. A total of 1,000 surveys were printed and a total of 443 were returned.

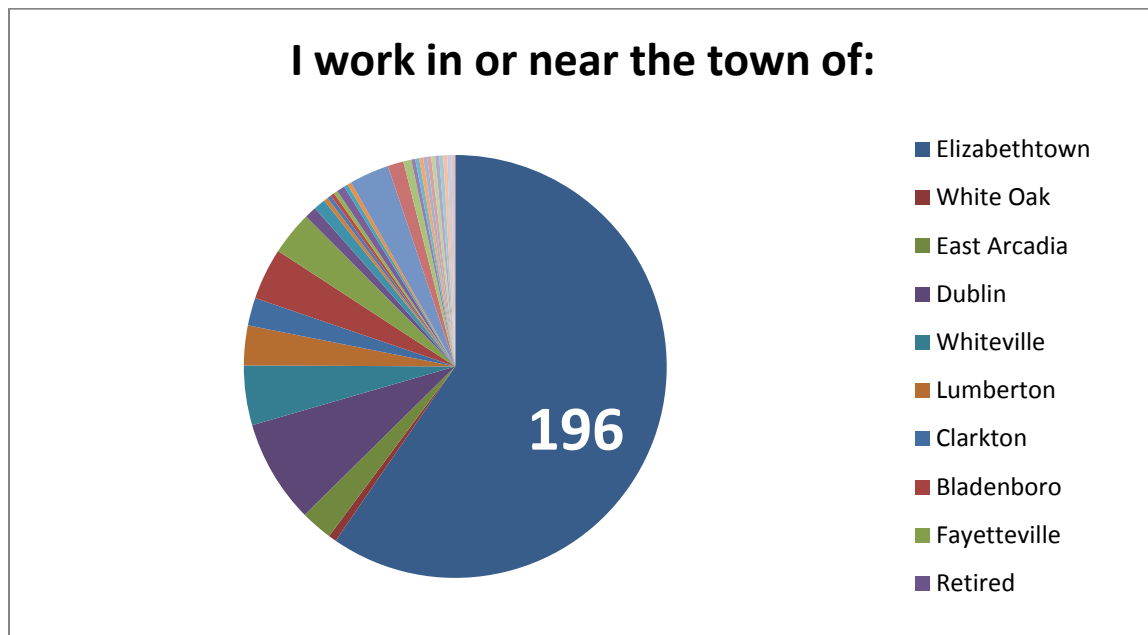
A breakout of returned surveys by community is illustrated by the following graph.



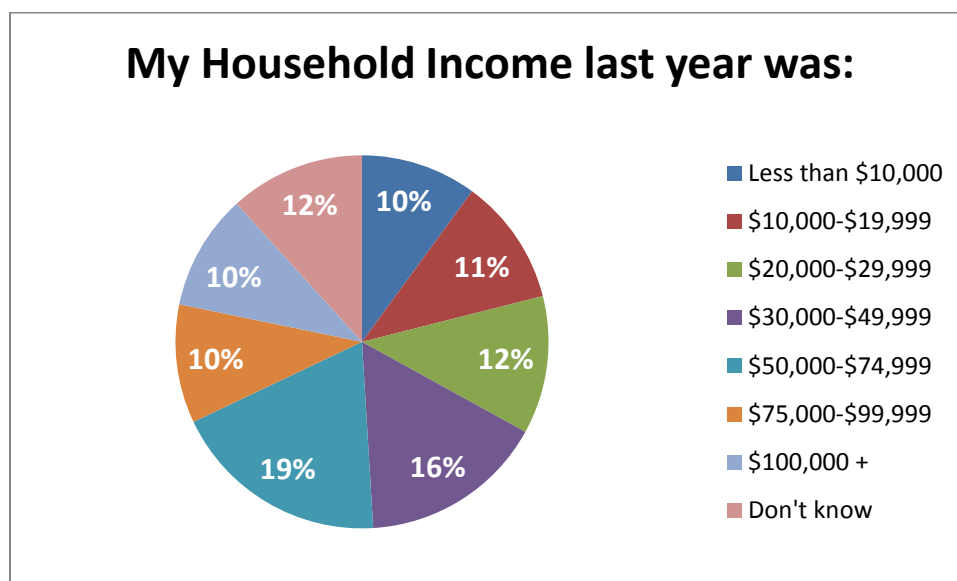
When it came to where survey respondents worked 329 total responses were received. A majority of respondents work in Elizabethtown. Over 32 different responses were received as illustrated in the pie chart below.

Appendix 1  
PRIMARY DATA:  
Community Health Survey Results - Feedback

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Quick Facts from the US Census Bureau reports persons below poverty level at 17.2% for the entire state of North Carolina and Bladen County, 25.6%. Per capita money income in the past 12 months, 2015, North Carolina reported \$25,608 versus Bladen County \$19,059.



Unemployment rate for Bladen County in January 2015 was 8% compared to the North Carolina rate of 5.7%. The Bladen County rate is down 5.6% since January 2013 data

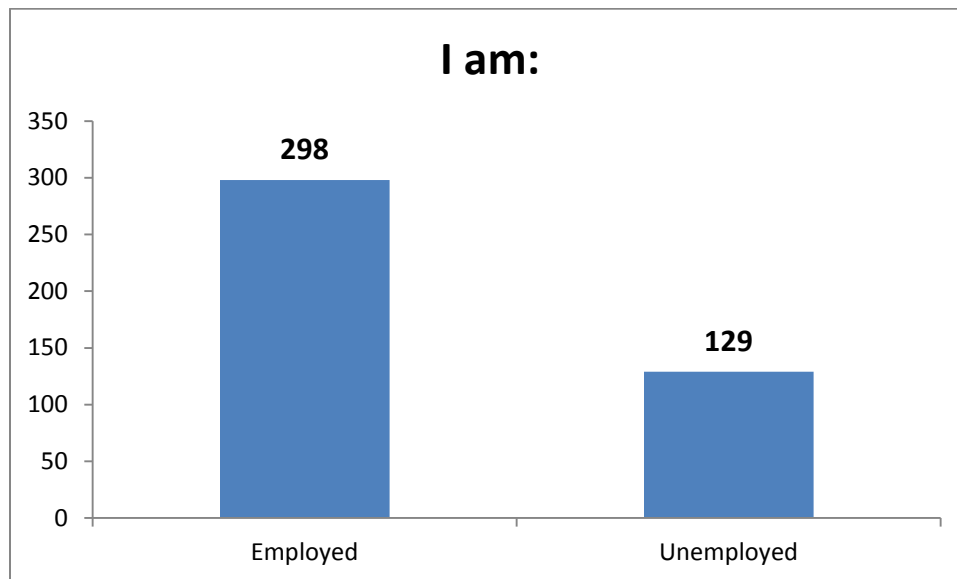
## Appendix 1

### PRIMARY DATA:

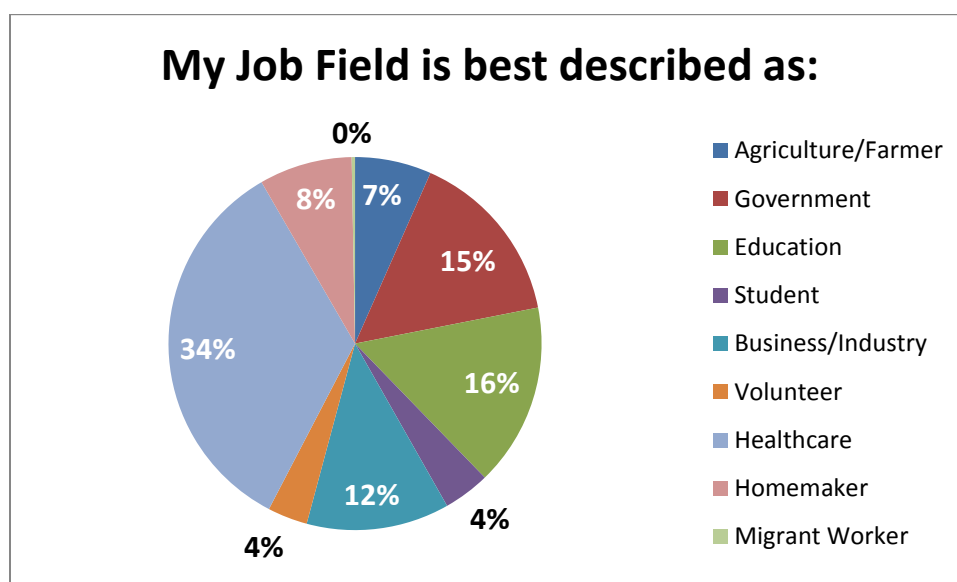
#### Community Health Survey Results - Feedback

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reflected in the previous CHNA survey. 30.2% of those surveyed reported they were unemployed, and 69.8% reported being employed. This response rate is very similar to the previous survey.



The following graph illustrates the number of the population surveyed job fields. Of those persons surveyed, 1 was a Migrant worker, 28 Homemakers, 118 Healthcare workers, 12 Volunteers, 43 Business/Industry, 14 were Students, 55 worked in education, 53 worked in Government, and 23 worked in Agriculture/Farmer.





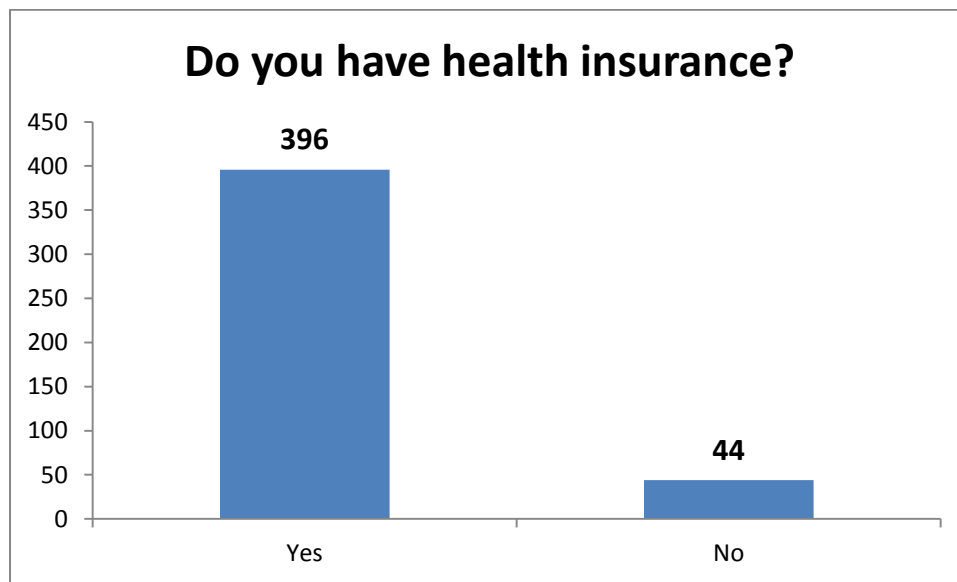
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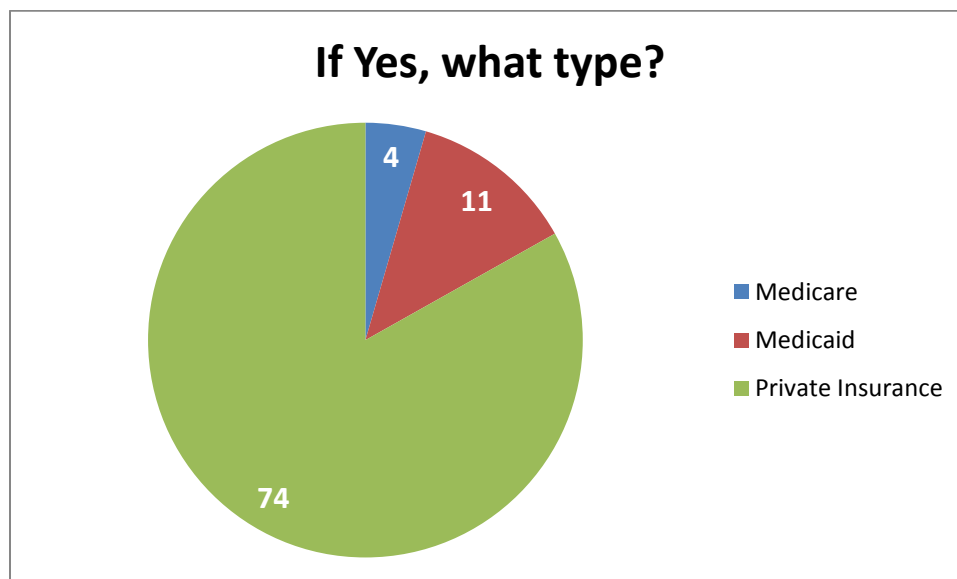
#### Community Health Survey Results - Feedback

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Results from the surveys indicate that 10% of the persons surveyed do not have insurance, and 90% of the persons surveyed they do have health insurance. In the previous CHNA survey in 2013, 82% of the respondents had health insurance.



The following chart indicates the respondents who have insurance: 74 had private insurance; 4 Medicare; and 11 Medicaid. Many who answered that they had insurance did not respond to answer who provided them with it.



Of survey respondents, 12.5% of those surveyed responded that they had not seen a

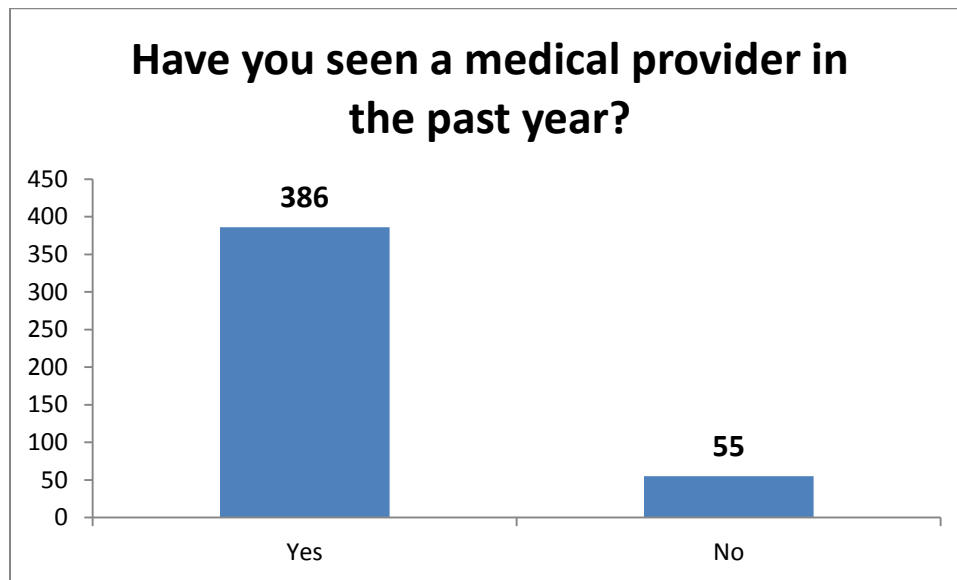
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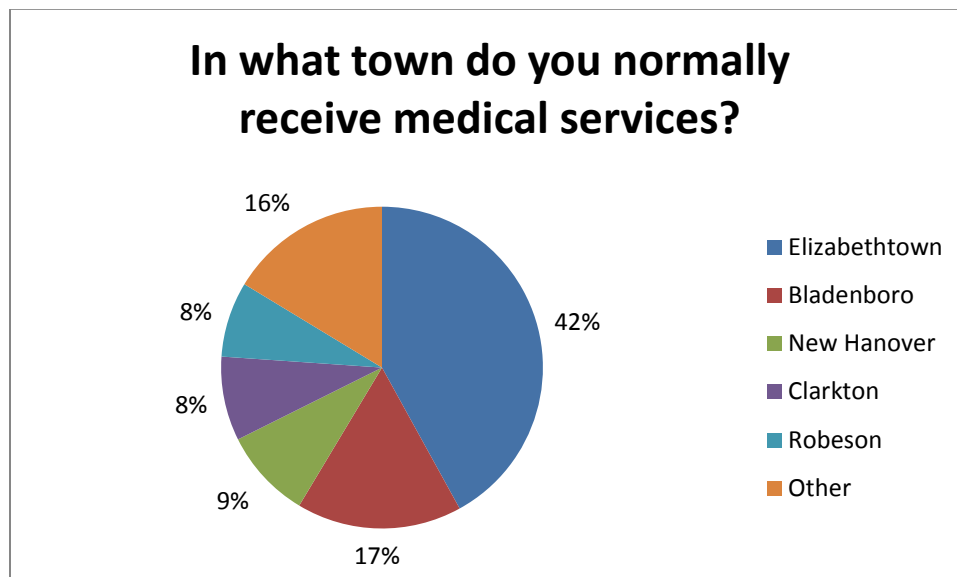
#### Community Health Survey Results - Feedback

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medical provider in the past year; 87.5% responded that they had seen a medical provider in the past year, as shown in the following chart.



Two-thirds of survey respondents normally receive medical services in Bladen County. The remaining 33% seek care elsewhere, with New Hanover County and Robeson County being the most prevalent of the external answers received.



Of survey respondents, 26% of those surveyed responded that they were single parents; 72% of those surveyed responded that they were not single parents, as shown in the following chart. For comparison purposes, according to the ACS, in 2010-2014, the

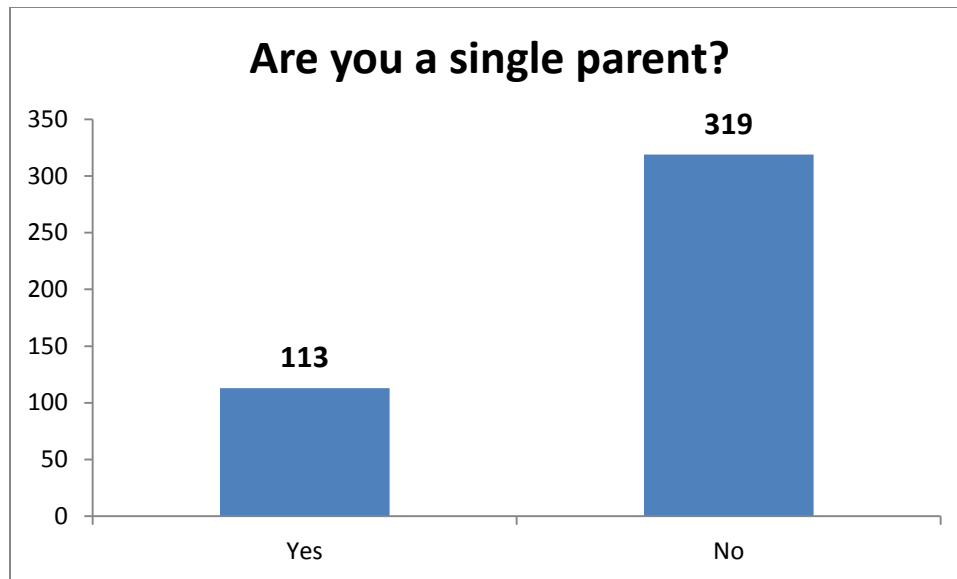
## Appendix 1

### PRIMARY DATA:

#### Community Health Survey Results - Feedback

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percentage of children that live in a household headed by a single parent in Bladen County was 23%.

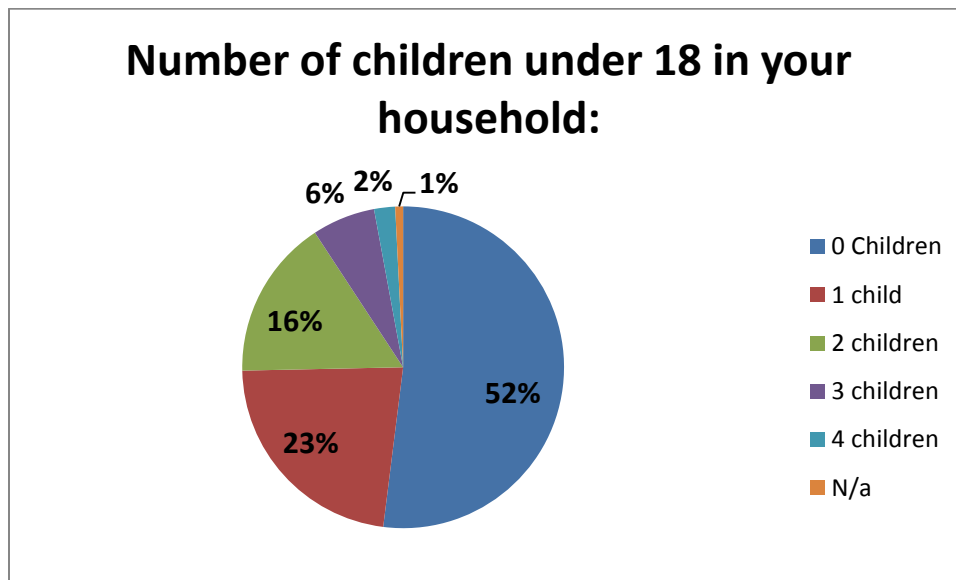


Single parenting is not a new phenomenon. In fact, the number of single parents raising children in the U.S. has been on the rise for decades. The American Community Survey (ACS), a nationwide survey designed to provide communities a fresh look at how they are changing, and a critical element in the Census Bureau's reengineered decennial census program. The ACS collects and produces population and housing information every year instead of every ten years. The County Health Rankings uses American Community Survey data to obtain measures of social and economic factors. According to the ACS, in 2010-2014, North Carolina had an overall percentage of 18% of households headed by a single parent.

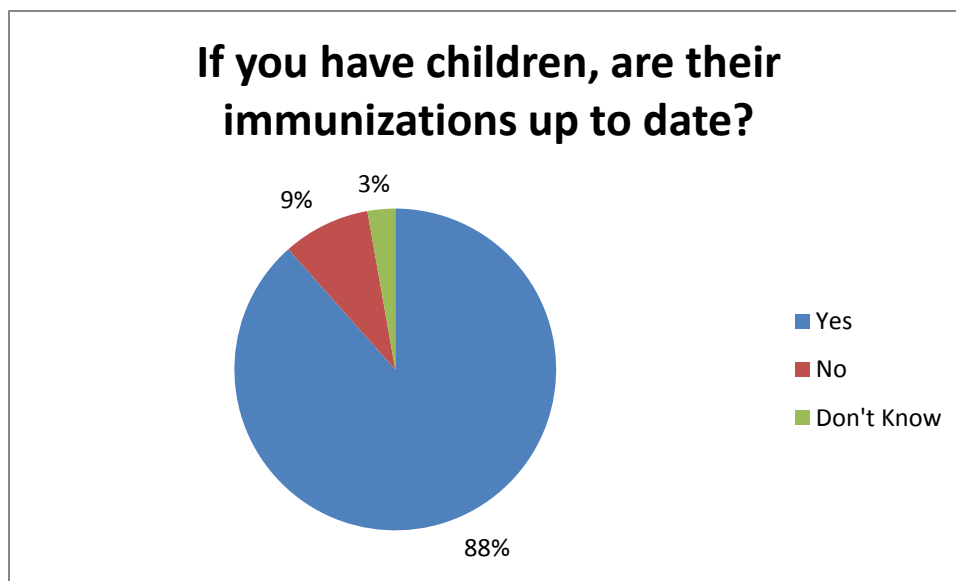
A majority of respondents did not have any children under the age of 18 in their household. Almost 40% of respondents had either 1 or 2 children under the age of 18 living in their household, as illustrated in the pie chart below.

Appendix 1  
PRIMARY DATA:  
Community Health Survey Results - Feedback

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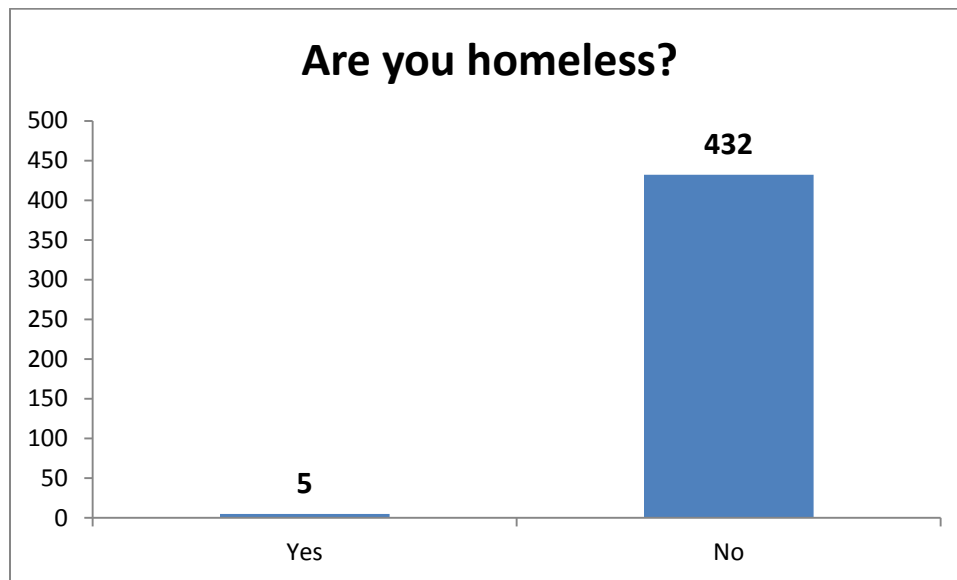
Of the 216 respondents for whom childhood immunizations are applicable, 88% of those respondents have children with up to date immunizations, as shown in the following chart.



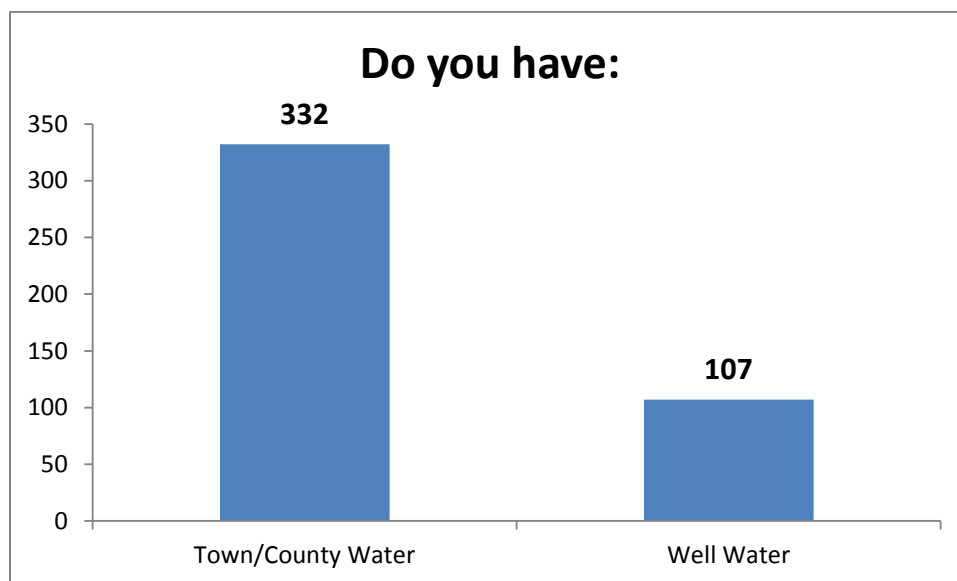
Of survey respondents, 98.8% of those surveyed responded that they were not homeless; 1.2% of those surveyed responded that they were homeless, as shown in the following chart.

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PRIMARY DATA:  
Community Health Survey Results - Feedback

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Of survey respondents, 75.6% of those surveyed responded that they have town/county water; 24.4% of those surveyed responded that they have well water, as shown in the following chart.



In 2006, the North Carolina General Assembly passed [Session Law 2006-202](#), which requires local health departments to initiate programs for permitting, inspection and testing of private drinking water wells which are constructed, repaired or abandoned, on or after July 1, 2008. As a result, county health departments enforce state statutes and

## Appendix 1

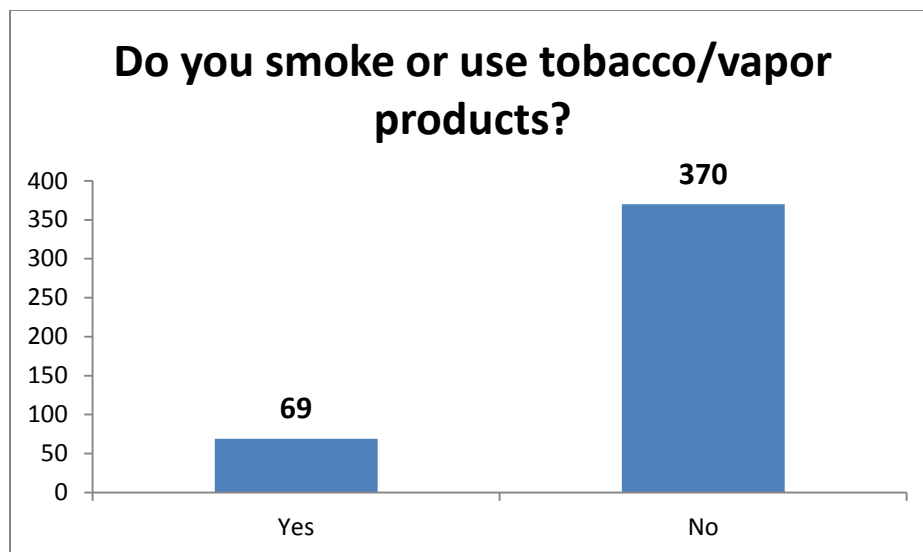
### PRIMARY DATA:

#### Community Health Survey Results - Feedback

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rules, and receive technical and legal assistance from the Environmental Health Section of the Division of Public Health, North Carolina Department of Health and Human Services. The types of wells covered by the program include (1) private wells that serve a single residence and (2) transient non-community water supply wells that do not meet the definition of “public water supply” in 15A NCAC 18C (i.e. restaurants, churches, and medical facilities). Program implementation date for all 100 counties was July 1, 2008.

Of survey respondents, 84.2% of respondents reported that they do not smoke or use tobacco products; 15.8% of respondents reported that they smoke or use tobacco products, as shown in the following chart. This reflects a 3% decrease in smokers since the 2013 CHNA survey as follows: 81.2% of respondents reported that they do not smoke or use tobacco products; 18.8% of respondents reported that they smoke or use tobacco products, as shown in the following chart.



23.7% of respondents reported that he/she or someone in his/her home smokes or uses tobacco products compared to 28.6% from the previous survey.

According to 2014 data from the Centers for Disease Control and Prevention, in North Carolina, 19.1% of the adult population (aged 18+ years), over 1,918,000 individuals are cigarette smokers. Across all states, the prevalence of cigarette smoking among adults ranges from 9.7% to 26.7%. North Carolina ranks 29th among the states and the District of Columbia.

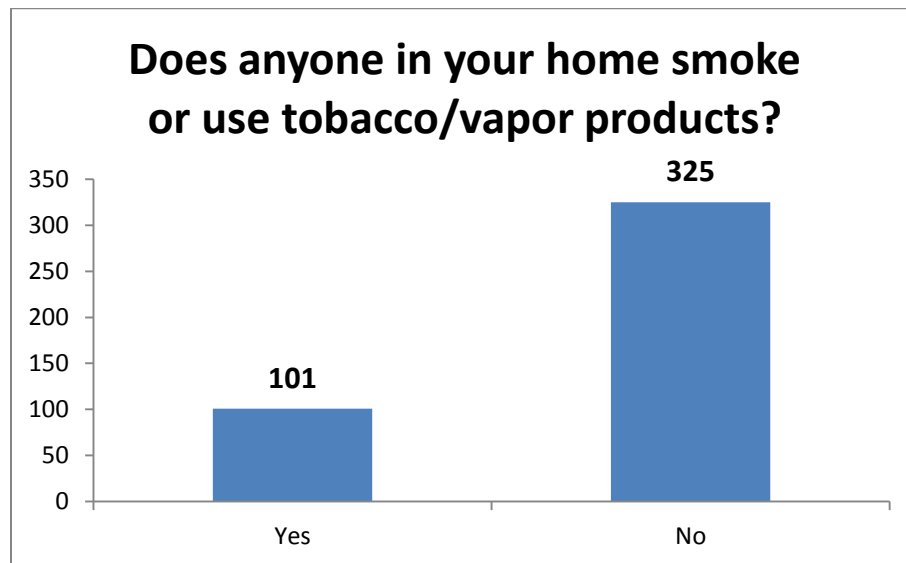
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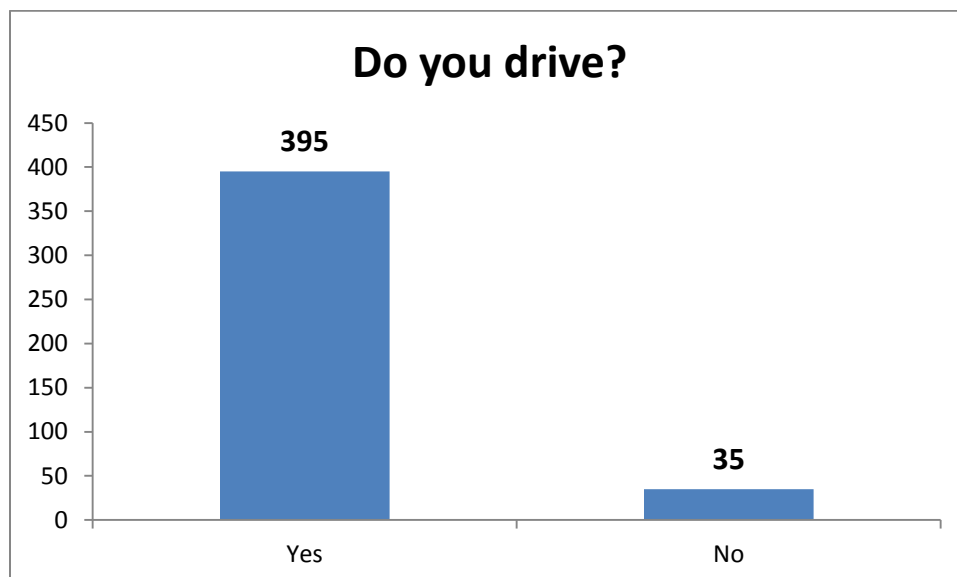
#### Community Health Survey Results - Feedback

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The remaining respondents reported that there is no one in his/her home that smokes or uses tobacco products, as shown in the following chart.



Of survey respondents, 91.8% of those surveyed responded that they drive; 8.2% of those surveyed responded that they do not drive, as shown in the following chart.



Of survey respondents, 93.8% of those surveyed responded that they have their own transportation; 6.2% of those surveyed responded that they do not have their own

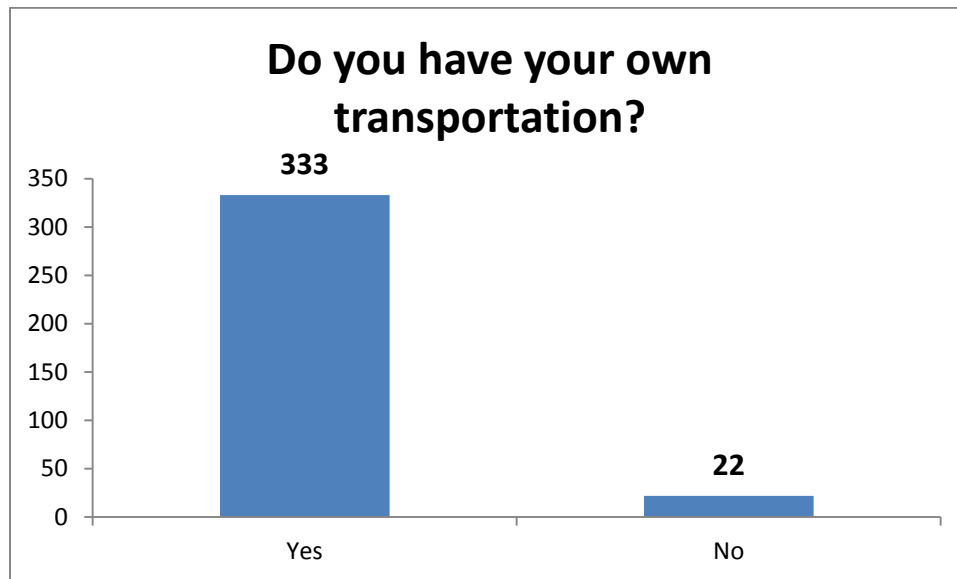
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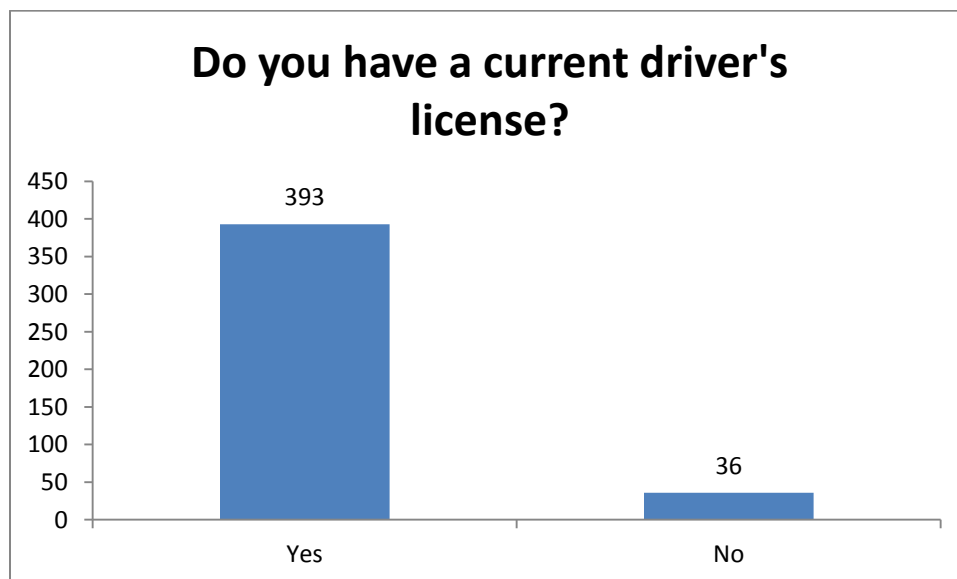
#### Community Health Survey Results - Feedback

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transportation, as shown in the following chart.



Over 91% of respondents have a current driver's license as illustrated in the graph below.





## Appendix 1

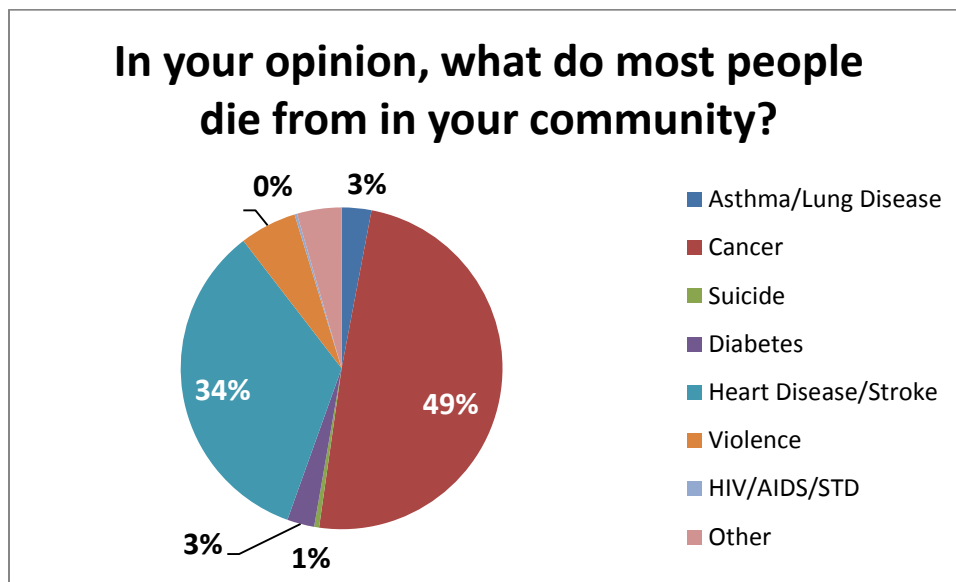
### PRIMARY DATA:

#### Community Health Survey Results - Feedback

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#### *Health Survey*

The next portion was used to identify health concerns in Bladen County. Topics include morbidity, access to care, areas of improvement, among other areas.



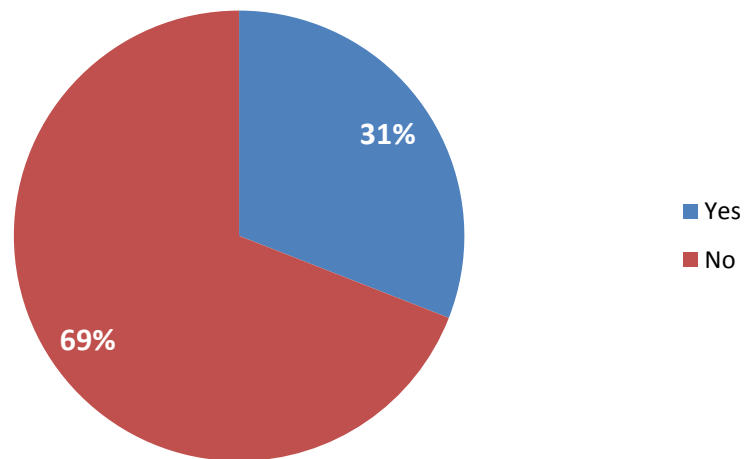
The above pie chart illustrates the number and the percentage of the population surveyed who feel that in their opinion the stated issues are the leading causes of death in their community. As shown the top two issues according to the communities' perception are:

1. Cancer
2. Heart Disease

These are the top two leading causes of death in Bladen County, but when adjusted for age, heart disease is more prevalent than cancer.

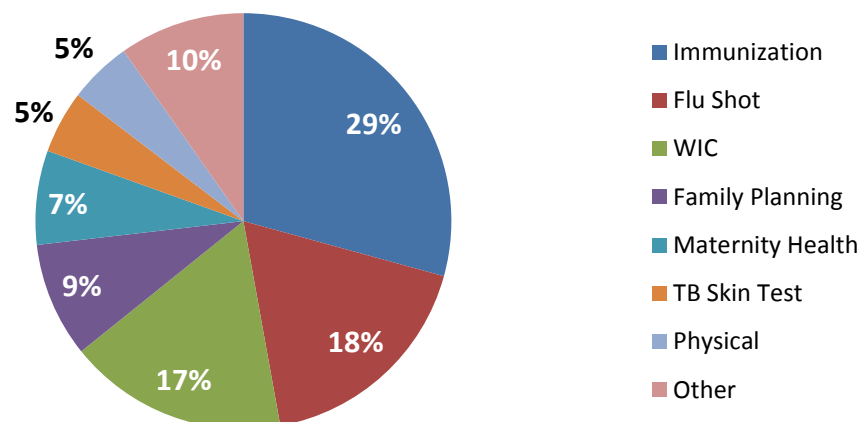
When asked whether they have used any services at the Bladen County health department, only 31% of respondents have used the services offered.

### Have you used any services at the local health department?



Of the 129 respondents who used the health department, it was used for a variety of reasons with immunization the most prevalent response. As you can see in the pie chart below, immunization has the greatest percentage followed by flu shot and WIC.

### If so, which ones?



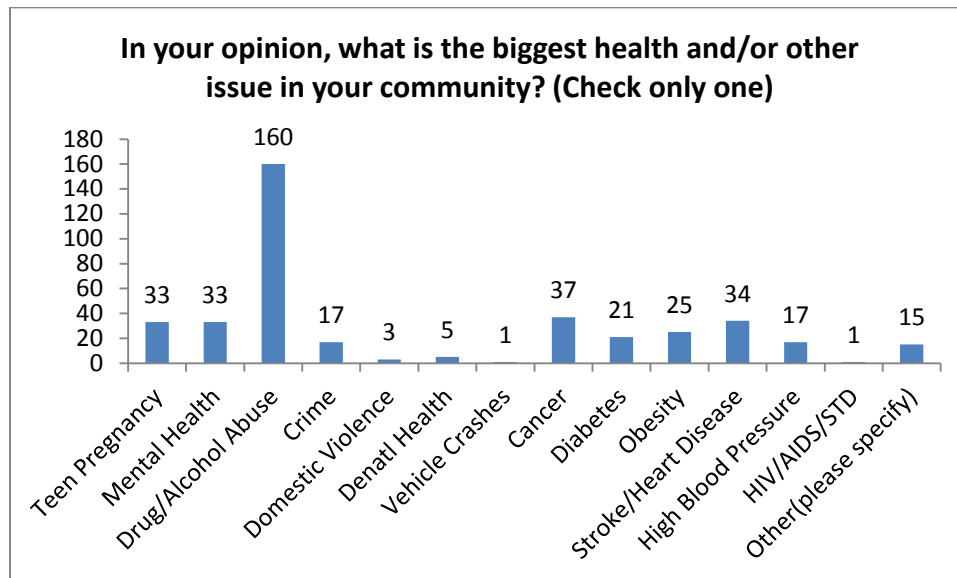
## Appendix 1

### PRIMARY DATA:

### Community Health Survey Results - Feedback

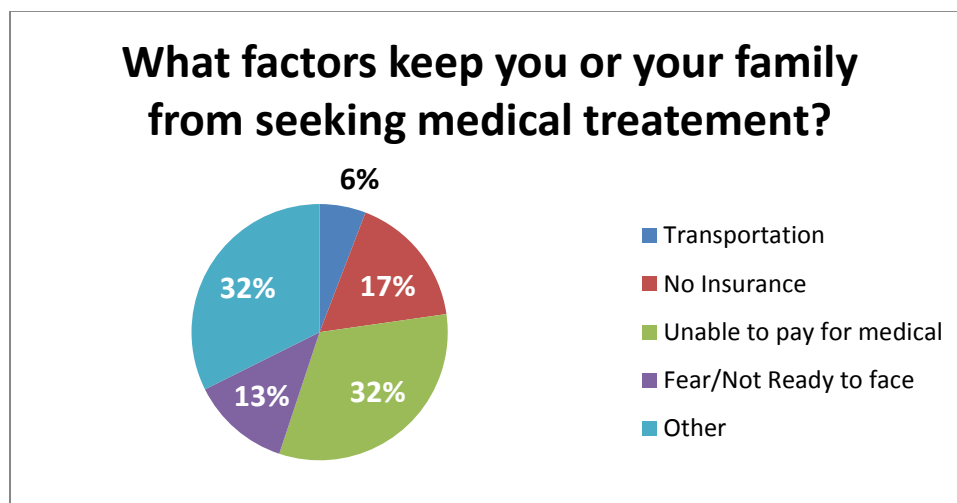
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Identifying the biggest health and/or other issue in your community is often times a difficult proposal. Based on our survey results we received a wide array of answers from respondents.



Drug/ Alcohol abuse was by far the most common response followed by cancer and heart disease. Teen Pregnancy and Mental Health were also among the most common responses. For those who responded 'Other' many replied that they did not know.

The following chart illustrates the percentage of the population surveyed who identified the main reasons that keep persons in their community from seeking medical treatment.



## Appendix 1

### PRIMARY DATA:

#### Community Health Survey Results - Feedback

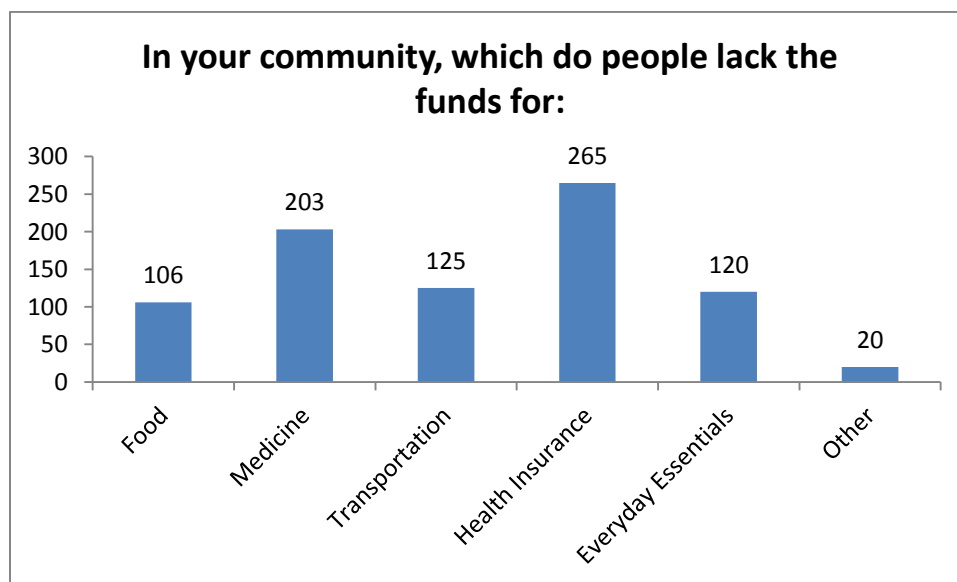
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As shown the top three issues are:

1. Unable to pay for medical costs
2. Other
3. No Insurance

Unable to pay and No insurance were the top two issues in the previous survey. These responses were used by the CHAT in its efforts to identify ways improve access to health care services.

Respondents were asked what of the basic necessities in life they felt people lacked the funds for. The chart below illustrates the responses from the 393 respondents who answered the question. Health insurance was the most common response followed by medicine. This is consistent with responses in the previous survey.



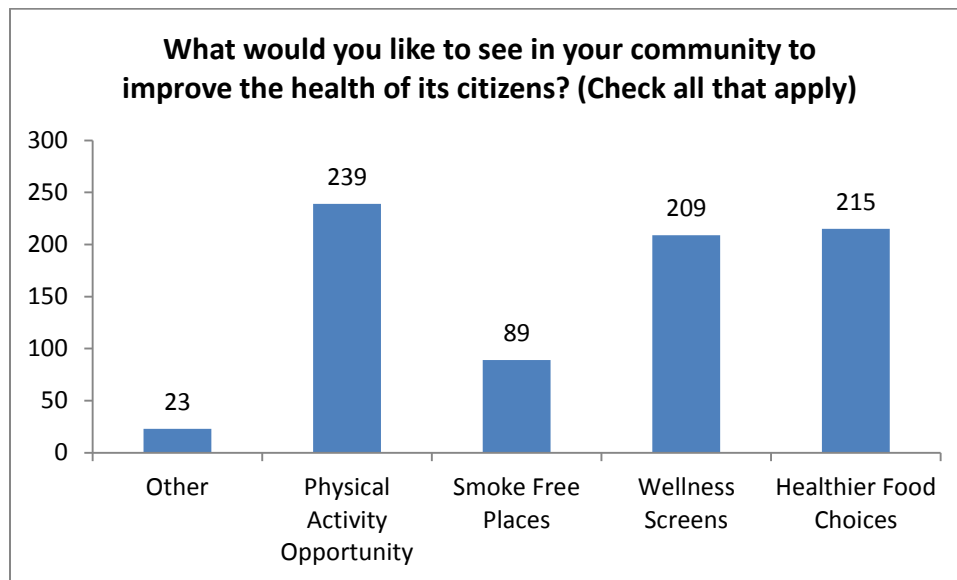
403 Respondents identified the top reported health programs that they would like to see in their community, as shown in the following chart

## Appendix 1

### PRIMARY DATA:

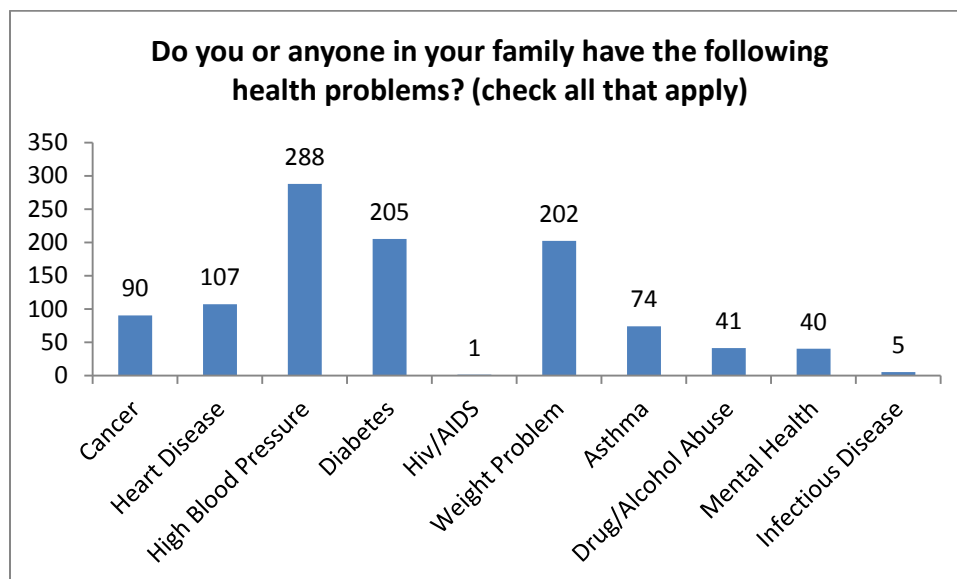
#### Community Health Survey Results - Feedback

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Among the improvements in the other category there were multiple responses for a free health/dental clinic, rehab facility, and mental health services. These are difficult services to access in rural settings.

For health problems, of the 385 respondents, 288 either had or had someone in their family who has high blood pressure. Diabetes and weight problem were very similar with 205 and 202 respondents respectively. These health problems are secondary diagnoses that when held in combination can lead to much serious health issues.



The top services that those surveyed reported needing in their community are:

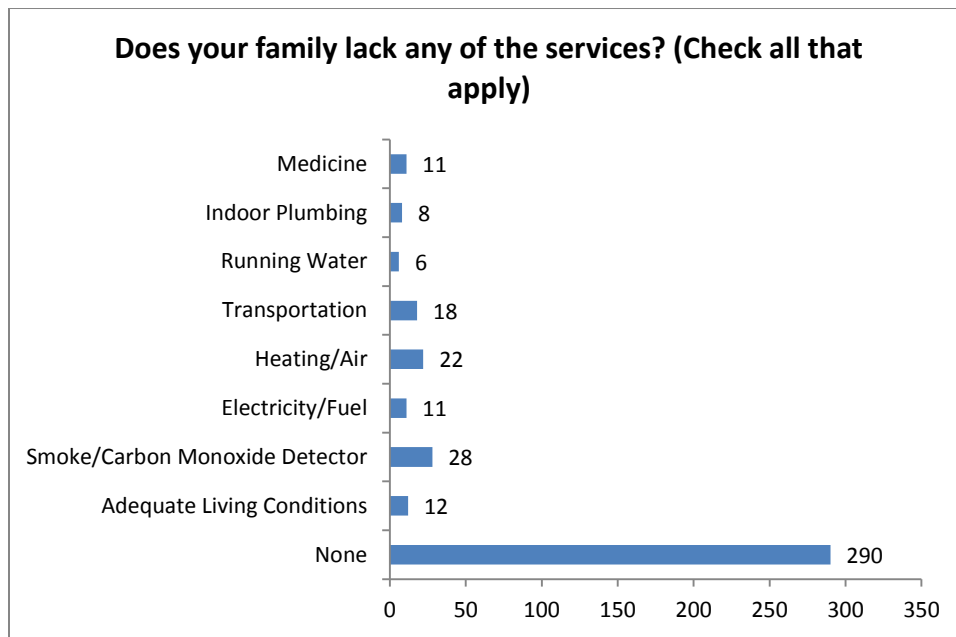
## Appendix 1

### PRIMARY DATA:

#### Community Health Survey Results - Feedback

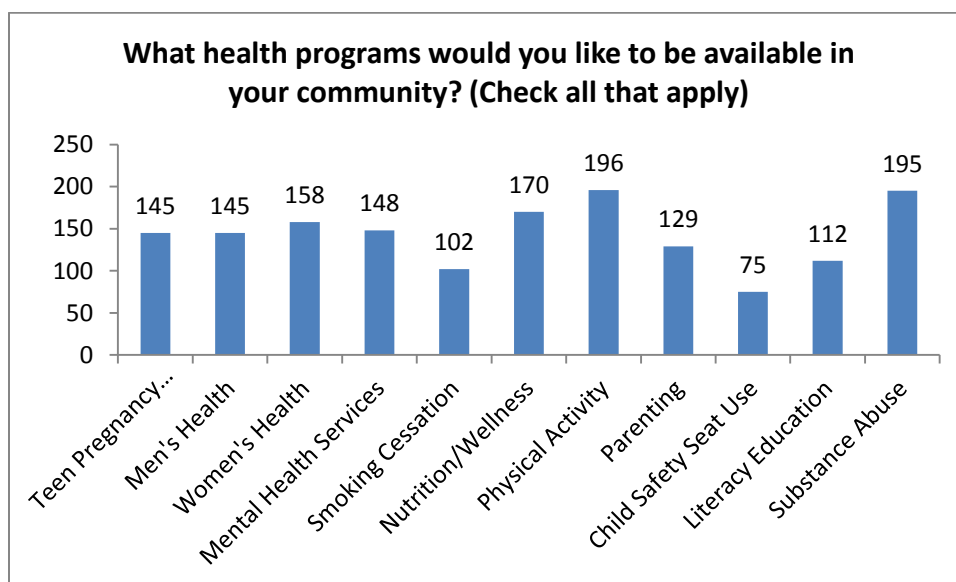
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1. Smoke/Carbon Monoxide Detector 28 (7.6%)
2. Heating/Air (6%).



Transportation and medicine were the top two responses in the prior CHNA.

The following chart illustrates services that survey respondents said that they would like to be available in the community:



## Appendix 1

### PRIMARY DATA:

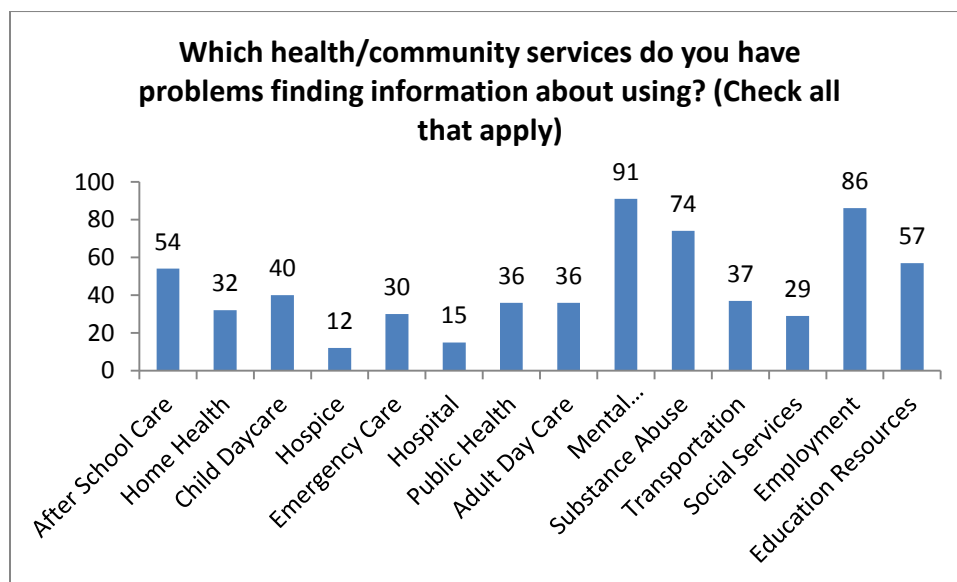
### Community Health Survey Results - Feedback

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The population surveyed identified the following services in Bladen County that they would like to be available:

1. Physical Activity
2. Substance Abuse
3. Nutrition/Wellness
4. Women's Health
5. Mental Health Services

The following chart illustrates respondents' health/community services they have problems finding information about using:

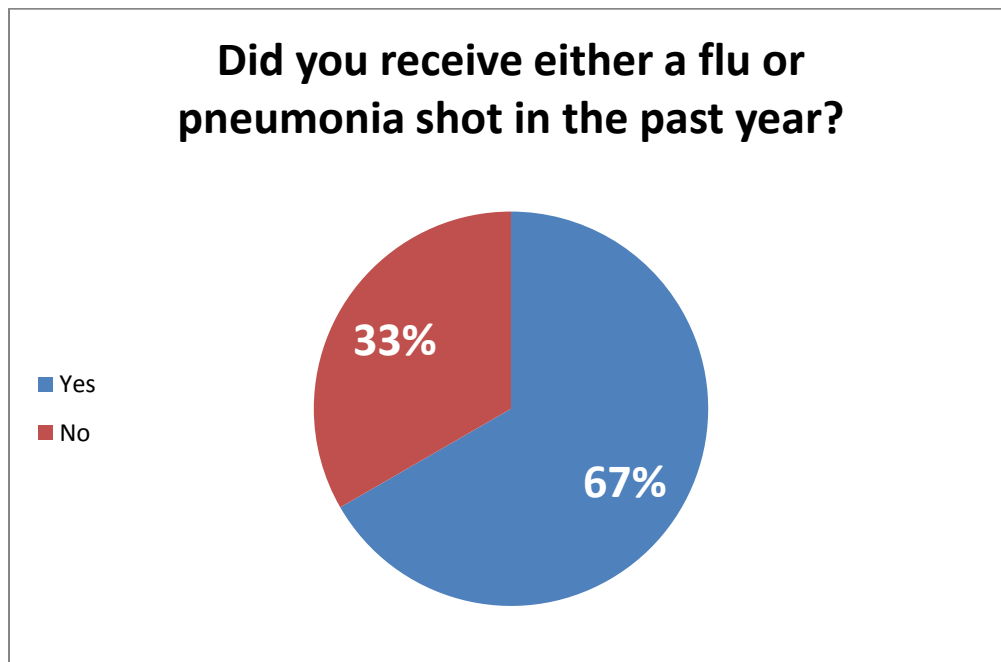


Mental Healthcare/Counseling, Employment, and Substance Abuse were the most popular responses among the 270 respondents.

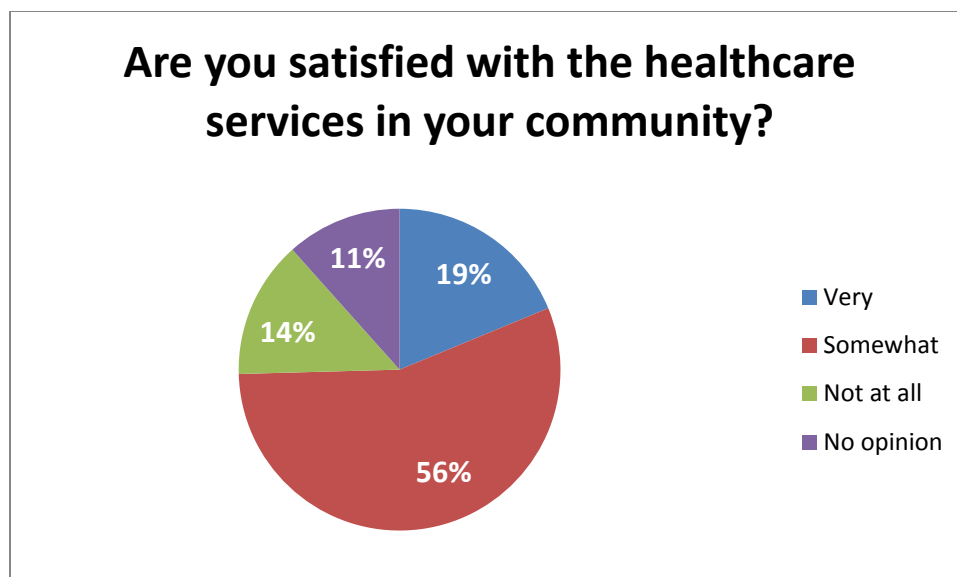
Approximately two-thirds of respondents received either a flu or pneumonia shot within the past year as illustrated in the pie chart below.

Appendix 1  
PRIMARY DATA:  
Community Health Survey Results - Feedback

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The final question on the survey asked respondents how satisfied they were with the health services in Bladen County. 405 respondents answered the question with a majority somewhat satisfied with the health services in their community.



Of respondents to the current survey 14% were “not at all” satisfied with the healthcare services in the community compared to only 9% on the 2013 CHNA Survey. The percent very or somewhat satisfied decreased from 83% to only 75% of respondents.



## Appendix 1

### PRIMARY DATA:

### Community Health Survey Results - Feedback

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The CHAT used information from all survey questions in combination with the secondary data when considering what would be the most effective items to include in the implementation plan.

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## Appendix 2

### EXISTING HEALTHCARE FACILITIES AND RESOURCES

The section below provides a description of the health care landscape in Bladen County, including a description of the available health care facilities and services.

Since 1952, Bladen County Hospital has been helping the great people of the community, with a personal touch and dedication you just can't find in a big city hospital. Bladen County Hospital is one of just a handful of Critical Access Hospitals statewide; each charged with a vital mission to serve the primarily rural community surrounding it. In 2008, Bladen County Hospital became part of the Cape Fear Valley Health System (CFVHS). Bladen Healthcare, d/b/a Bladen County Hospital was formed in 2012 as a wholly owned subsidiary of CFVHS.

Bladen Healthcare is a health network the residents of Bladen County are proud to call their own. With a 58 bed hospital, primary and specialty care physician practices, Bladen Healthcare offers the residents of Bladen County and the surrounding areas with the same level of quality care as regional health systems.



Bladen County Hospital is a federally designated Critical Access Hospital serving Bladen County and offers:

- 48 Acute Care Beds (Only 25 currently staffed and operational)
- 10 Swing beds (Acute care beds utilized for nursing facility patients as needed)
- 10 Skilled Nursing Beds
- A fully staffed Emergency Department that is staffed 24/7. The Emergency Department is STEMI and STROKE certified.
- Physician Practices– located in Elizabethtown, Bladenboro and Dublin, which include Obstetrics, Pediatrics, Cardiology, Nephrology, Rehabilitation, Imaging and Surgical Services.

## Appendix 2 – Existing Healthcare Facilities and Resources

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CFVHS operates a variety of health care facilities from its headquarters in Fayetteville, North Carolina including Bladen Healthcare. CFVHS includes a tertiary acute care hospital, a long-term acute care hospital, a community hospital, a critical access hospital, an inpatient rehabilitation facility, county emergency medical services, an outpatient psychiatric facility, a detoxification facility, a wellness center, 15 primary care clinics, 20 specialty care clinics, 4 walk-in clinics, and Health Pavilion North, an outpatient complex. Cape Fear Valley Medical Center (CFVMC) in Fayetteville is the flag-ship of CFVHS. In October 2014 CFVHS also began managing Harnett Health, which has two community hospitals, Betsy Johnson Memorial Hospital and Central Harnett Hospital in Harnett County.

CFVHS, including Hoke Healthcare, LLC, and Bladen Healthcare, LLC, is an 880-bed tertiary health delivery system in eastern North Carolina with a long-standing six-county primary and secondary service area, which serves Bladen County. CFVHS draws from all areas within the 15-county Health Service Area V and provides a broad range of patient services. CFVHS has one acute care facility under development, Cape Fear Valley North Hospital with 65 CON-approved beds in Cumberland County.

Hospital services began in 1956 under the name of Cumberland County Hospital Authority offering 200 acute care beds. Within 10 years of the 1956 original bed-opening, construction began on another 195 acute care beds and 100 bassinets, allowing CFVMC to claim ownership of the largest newborn-care facility in the state. In 1976, a 60-bed state-of-the-art rehabilitation facility opened for Cumberland and surrounding counties. Eighteen additional rehabilitation beds were added in 1995. In 1999, Highsmith-Rainey Memorial Hospital (HRMH) was acquired and licensed for 133 acute beds. In 2008, HRMH was a 112 bed acute care hospital. To maximize utilization of all hospital acute care beds in Cumberland County, 46 beds were relocated from HRMH to CFVMC. HRMH is a 66-bed long-term acute care (LTAC) facility operating at 90% occupancy.

Cape Fear Valley Health System has 880 licensed and Certificate of Need (CON) approved beds, including:

- Cumberland County (Serves Bladen County)
  - Cape Fear Valley Medical Center, Main Campus, Owen Drive
    - 501 Acute Care Beds
    - 78 Rehabilitation Beds
    - 32 Behavioral Health Beds
    - 23 CON Approved, not operational Acute Care Beds
  - Highsmith-Rainey Specialty Hospital, Robeson Street
    - 66 Long Term Acute Care Beds
  - Primary Care, Neurosurgery and General Surgery Clinics

## Appendix 2 – Existing Healthcare Facilities and Resources

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- Cape Fear Valley North
  - 65 CON Approved, not operational Acute Care Beds
  - Medical Office Building
    - Express Care
    - Medical and Radiation Oncology
    - Primary Care and Pediatric Services
    - Outpatient PT and OT Services
- Services provided include:
  - Cancer Care
  - Heart and Vascular
  - Birth Center
  - Pediatrics
  - Neuroscience
  - Orthopedics
  - Weight Loss Surgery
  - Surgical Services
  - Acute and Chronic Medical Care
  - Geriatrics
  - Imaging / Diagnostics
  - Rehabilitation
  - Outpatient Services
  - Minority Health
  - Infectious Diseases
  - Nephrology
  - Physician Practices
  - Emergency Care
  - Other Services.
- Bladen County (Primary Market, South of Cumberland County)
  - Bladen Healthcare, LLC, Bladen County
    - 48 Acute Care Beds (Only 25 currently staffed and operational)
    - 10 Swing beds (Acute care beds utilized for nursing facility patients as needed)
    - 10 Skilled Nursing Beds
    - A fully staffed Emergency Department that is staffed 24/7. The Emergency Department is STEMI and STROKE certified.
    - Physician Practices– located in Elizabethtown, Bladenboro and Dublin, which include Obstetrics, Pediatrics, Cardiology, Nephrology, Rehabilitation, Imaging and Surgical Services.
- Hoke County (Primary Market, West of Cumberland County)
  - Hoke Healthcare, LLC
  - 41 Acute Care Beds
  - A fully staffed 16 bed Emergency Department

## Appendix 2 – Existing Healthcare Facilities and Resources

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- Physician Practices located in Raeford and Medical Office Building on hospital campus, which include Pediatrics, Obstetrics, and Cardiology

The Fayetteville (Cumberland County) location is in Southeastern North Carolina in an area populated by more than 155,000 veterans.

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## **Appendix 3 - Bladen County Community Health Survey Document - English**

The following pages include a complete copy of the Community Health Needs Assessment Survey in English.

## Appendix 2 – Existing Healthcare Facilities and Resources

### Bladen County Health Assessment Survey 2016

This survey is conducted by the Bladen County Health Department, Cape Fear Valley/Bladen County Hospital as well as Healthy Bladen Collaborative

Please complete the questions below and return it to: Bladen County Health Department  
Attn: Marianne Valentiner-Project Facilitator PO Box 189, Elizabethtown, NC 28337

Your information is confidential.

#### Part I. Demographics

Please complete the questions below for statistical purposes only. Darken in ( ) as appropriate.

I am: Female ( ) Male ( )

My age is: under 25 ( ) 25-34 ( ) 35-44 ( ) 45-54 ( ) 55-64 ( ) 65-74 ( ) 75+ ( )

My race is: African-American ( ) Caucasian ( ) Native American ( ) Hispanic ( ) other ( )

I live in or near the town/community of \_\_\_\_\_.

I work in or near the town/community of \_\_\_\_\_.

The highest level of education I have completed is: (Check only one)

11th Grade or less ( ) High School Diploma or GED ( ) some college, but no degree ( )  
Associate's degree ( ) Bachelor's degree ( ) Masters degree or higher ( )

My household income last year was:

Less than \$10,000 ( ) \$10,000-\$19,999 ( ) \$20,000-\$29,999 ( ) \$30,000-\$49,999 ( )  
\$50,000-\$74,999 ( ) \$75,000-\$99,999 ( ) \$100,000+ ( ) Don't Know ( )

I am: Employed ( ) Unemployed ( )

My job field is best described as:

Agriculture/farmer ( ) government ( ) education ( ) student ( )  
Business/industry ( ) volunteer ( ) healthcare ( ) homemaker ( )  
Migrant worker ( ) other \_\_\_\_\_

Do you have health insurance? Yes ( ) No ( )  
If yes, what type? Medicare ( ) Medicaid ( ) Private Insurance ( )

Have you seen a medical provider in the past year? Yes ( ) No ( )

In what town do you normally receive medical services? \_\_\_\_\_

Are you a single parent? Yes ( ) No ( )

Number of children under 18 in your household: \_\_\_\_\_

If you have children, are their immunizations up to date? Yes ( ) No ( ) Don't know ( ) N/A ( )

Are you homeless? Yes ( ) No ( )

Do you have: Town/County Water ( ) well water ( )

Do you smoke or use tobacco/vapor products? Yes ( ) No ( )

Does anyone in your home smoke or use tobacco/vapor products? Yes ( ) No ( )

Do you drive? Yes ( ) No ( ) Do you have your own transportation? Yes ( ) No ( )

Do you have a current drivers license? Yes ( ) No ( )

**Part II. Health Survey: This survey will help identify health concerns in our community. Give answers as directed. Your information is confidential.**

In your opinion, what do most people die from in your community?

Asthma/Lung Disease ( ) Cancer ( ) Suicide ( ) Diabetes ( )  
Heart Disease/Stroke ( ) Violence ( ) HIV/AIDS/STD ( ) Other \_\_\_\_\_



2. Have you used any services at the local health department? Yes ( ) No ( )

If so, which ones? \_\_\_\_\_

3. In your opinion, what is the biggest health and/or other issue in your community? **(Check only one)**

Teen Pregnancy ( ) Mental Health ( ) Drug/Alcohol Abuse ( ) Crime ( ) Domestic Violence ( )

Dental Health ( ) Vehicle Crashes ( ) Cancer ( ) Diabetes ( ) Obesity ( )

Stroke/Heart Disease ( ) High Blood Pressure ( ) HIV/AIDS/STD ( ) Other \_\_\_\_\_

4. What factors keep you or your family from seeking medical treatment? **(Check all that apply)**

Transportation ( ) No Insurance ( ) Unable to pay for medical services/medicine ( )

Fear/not ready to face health problems ( ) other \_\_\_\_\_

5. In your community, which do people lack the funds for: **(Check all that apply)**

Food ( ) Medicine ( ) Transportation ( ) Health Insurance ( ) Everyday essentials/items ( )

other \_\_\_\_\_

6. What would you like to see in your community to improve the health of its citizens? **(Check all that apply)**

Healthier Food Choices ( ) Wellness Screens ( ) Smoke-Free Places ( ) Other \_\_\_\_\_

Physical Activity Opportunities ( )

7. Do you or anyone in your family have the following health problems? **(Check all that apply)**

Cancer ( ) Heart Disease ( ) High Blood Pressure ( ) Diabetes ( ) HIV/AIDS ( )

Weight Problem ( ) Asthma ( ) Drug/Alcohol Abuse ( ) Mental ( ) Infectious Disease ( )

8. Does your family lack any of the following services? **(Check all that apply)**

Medicine ( ) Indoor Plumbing ( ) Running Water ( ) Transportation ( ) Heating/Air ( )

Electricity/fuel ( ) Smoke/Carbon Monoxide Detectors ( ) Adequate Living Conditions ( ) None ( )

9. What health programs would you like to be available in your community? **(Check all that apply)**

Teen Pregnancy Prevention ( ) Men's Health ( ) Women's Health ( ) Mental Health Services ( )

Smoking Cessation ( ) Nutrition/Wellness ( ) Physical Activity ( ) Parenting ( )

Child Safety Seat Use ( ) Literacy education ( ) Substance Abuse ( )

10. Which health/community services do you have problems finding information about using?

**(Check all that apply)**

After School Care ( ) Home Health ( ) Child Day Care ( ) Hospice ( )

Emergency Care ( ) Hospital ( ) Public Health ( ) Adult Day Care ( )

Transportation ( ) Social Services ( ) Employment ( ) Education Resources ( )

Mental health care/Counseling ( ) Substance Abuse ( )

11. Did you receive either a flu or pneumonia shot in the past year? Yes ( ) No ( )

12. Are you satisfied with the health care services in your community? List any comments in Part III.

Very ( )

Somewhat ( )

Not at all ( )

No opinion ( )

## Part III. Comments

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Thank you for your completion of this survey!  
Results of the survey will be reported to the community.



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## **Appendix 4 - Bladen County Community Health Survey Document - Spanish**

The following pages include a complete copy of the Community Health Needs Assessment Survey in Spanish.

## Appendix 4 - Bladen County Community Health Survey Document - Spanish

### Evaluación de salud del condado de Bladen encuesta 2016

Esta encuesta es conducida por el Departamento de salud del condado de Cape Fear Valley

Regional Medical Center del Condado de Bladen, y community Team partners

Por favor complete las preguntas de abajo y devuélvalo a: Bladen County Health

Department, Attn: Marianne Valentiner,

PO Box 189, Elizabethtown, NC 28337

Su Información es confidencial.

#### Parte I. Demográfica

Por favor complete las preguntas, solo para el uso estadístico.

Mi género es: ☐ Femenino ☐ Masculino

Mi edad es: Menos de 25 ☐ 25-34 ☐ 35-44 45-54 55-64 65-74  
75+

Mi origen es: Afro Americano Europeo Americano Nativo Americano Latino Americano

Yo vivo en o cerca del pueblo/comunidad de \_\_\_\_\_

Yo trabajo en o cerca del pueblo/comunidad de \_\_\_\_\_

El grado más alto de educación que he completado es: (marque solo una)

Primaria o inferior Secundaria o GED Bachillerato sin diploma, carrera técnica

Bachillerato con diploma Universidad o postgrado

Los ingresos de mi casa el año pasado fueron:

Menos de \$10,000 \$10,000-\$19,000 \$20,000-\$29,000 \$30,000-\$49,999  
\$50,000-\$74,999 \$75,000-\$99,999 \$100,000+ no lo se

Yo estoy empleado no estoy empleado

Mi campo de trabajo se describe mejor como:

Agricultura/granjero Gobierno Educación Estudiante Negocio/industria  
voluntario Cuidado médico Ama de casa Trabajador emigrante  
otro \_\_\_\_\_

¿Tiene usted seguro médico? Si No

¿Si es si de que tipo? Medicare Medicaid Privado

¿A visto usted un proveedor médico en el último año? Si No

¿Es usted un padre soltero? Si No

Número de niños menores de 18 años en su casa: \_\_\_\_\_

¿Si usted tiene niños sus vacunas están al día? Si No No sabe

¿Esta usted sin hogar? Si No

Tiene usted: Agua de la ciudad/condado Agua de pozo  
 ¿Usted fuma o usa productos de tabaco? Si No  
 ¿Alguien en su casa fuma o usa productos de tabaco? Si No  
 ¿Usted maneja? Si No ¿Tiene usted su propio transporte? Si No  
 ¿Tiene usted un médico de atención primaria? Si No  
 Si es sí ¿ha visitado usted a su médico de atención primaria en el último año? Si No  
 Si es no ¿ha visitado usted a proveedor médico en el último año? Si No  
 ¿Ha sido usted tratado en la sala de emergencias del hospital en el último año? Si No

**Parte II. Encuesta de Salud. Esta encuesta ayudara a identificar preocupaciones de salud en nuestra comunidad. De respuestas como se le indica. Su información es confidencial.**

1. ¿En su opinión, de que mueren la mayoría de las personas en su comunidad? (Marque una)  
 Asma/enfermedad pulmonar Cáncer Depresión/suicidio Diabetes  
 Enfermedad cardiaca/derrame cerebral Violencia VIH/SIDA Otro \_\_\_\_
2. ¿En su opinión, cual es el problema más grande de salud en su comunidad? (Marque tres)  
 El embarazo de jóvenes La salud mental El abuso de drogas/alcohol Crimen  
 La salud dental Accidentes automovilísticos Cáncer Diabetes Obesidad  
 Abuso Infantil Pobres hábitos alimenticios Falta de Ejercicio  
 Derrame cerebral Presión arterial alta VIH/SIDA Otro \_\_\_\_
3. ¿Cuáles son los factores que le impiden a usted o su familia buscar tratamiento médico? (Marque todas las que correspondan)  
 Transporte La falta de seguro medico No puede pagar los servicios  
 médicos/medicinas Temor (el no estar listo para enfrentar problemas de salud)  
 Otro \_\_\_\_
4. ¿Siente que las personas en su comunidad no tienen los recursos económicos para cualquier de los siguientes? (marque todos los que correspondan)  
 Alimentos Medicinas Transporte Seguro medico Servicios públicos (agua, luz, teléfono)
5. ¿Que le gustaría ver en su comunidad para mejorar la salud de su familia, amigos y vecinos? (marque todas las que correspondan)  
 Elegir alimentos saludables Revisiones de salud Lugares donde no se fume  
 Mas servicios de salud con horarios extendidos Programas deportivos para todas las edades  
 Otro \_\_\_\_
6. ¿Alguna vez le ha dicho un medico que usted o algún miembro de su casa sufre de cualquiera de los siguientes problemas de salud? (marque todas las que correspondan)  
 Cáncer Enfermedad del corazón Presión arterial alta Diabetes  
 VIH/SIDA Problema de sobre peso Asma
7. ¿Carece su familia de cualquiera de los siguientes servicios? (marque todos los que correspondan)

Medicina      instalación de plomería      Agua potable      Transporte  
Electricidad/combustible      Ninguno

8. ¿Que programa de salud le gustaría que fuera disponible en su comunidad? (marque todos los que correspondan)

Prevención de embarazo de jóvenes      Salud de hombres      Salud de la mujer  
Fumar      Nutrición      Actividad física      Autoestima      Crianza de hijos  
Uso del asiento de seguridad del niño      Alfabetización      Abuso de drogas/alcohol

9. ¿En cuales de los servicios de salud tiene usted problemas para encontrar, o no tiene información de cómo utilizar? (marque todos los que correspondan)

Cuidado después de la escuela      cuidado médico en casa      cuidado de niños      hospicio  
cuidado de emergencia      hospital      salud pública      cuidado para adultos      Transporte  
servicios sociales      mas servicios de salud con horarios extendidos      Cuidado dental  
Tratamiento para alcoholismo y drogadicción      Cuidados de salud mental/asesoría  
Cuidados para mujeres en embarazo      inscribirse para el Medicaid/Medicare      vacunas  
Establecimientos de cuidados a largo plazo      Servicios de emergencia 911      Droguerías

10. ¿Recibió usted una vacuna para la influenza o gripe el año pasado?      Si      No

11. ¿Está usted satisfecho con los servicios médicos en su comunidad?  
muy      algo      nada      ninguna opinión

12. En su opinión ¿tiene su comunidad problemas con alguno de los siguientes?

Seguridad en el trafico      Oportunidades de Empleo      Establecimientos y programas de  
recreación      Calidad del aire      Control de animales      Transporte público      Calidad del  
agua potable      Eliminación de desperdicios sólidos      Crimen

## Parte III. Comentarios

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¡GRACIAS POR TERMINAR ESTA ENCUESTA! LOS  
RESULTADOS DE ESTA ENCUESTA SERÁN REPORTADOS A LA  
COMUNIDAD

## Appendix 5 – CFV Bladen County Hospital 2013-2015 Implementation Plan Summary

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
Address Chronic Disease Issues in Bladen County <b>Heart Disease</b>	<ul style="list-style-type: none"> <li>• #1 leading cause of death in Bladen County.</li> <li>• Identified by Community as 4th leading health issue impacting families in Bladen County</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to incorporate prevention activities into all outreach events to include ways to control modifiable risk factors for Heart Disease</li> <li>• Expand prevention education activities and early diagnosis by working with school system to educate in the early years through high school age</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with Community Care of the Lower Cape Fear Care Managers in CFV Bladen Medical Practices</li> <li>• Continue to provide educational information at Community Health Fairs</li> <li>• Collaborate with Bladen County Health Department to spread the word of “East Smart, Move More, Weigh Less”</li> <li>• Continue to offer CPR training to teen and adults as outreach program</li> <li>• Have “Ask the Doctor” blog on Bladen-on-line</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with heart disease</li> <li>• Decrease inpatient admissions by persons with heart disease</li> <li>• Improved referral rates to Cardiac Rehab</li> </ul>	<ul style="list-style-type: none"> <li>• Improve survival rates due to Sudden Cardiac Death</li> <li>• Reduced mortality rates from AMI</li> </ul>
<b>BCH Activities and Three Year Outcomes 2013-2015</b>		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page 73.</li> <li>• PI is completed monthly on Congestive Heart Failure patients to ensure that they are on an ACE inhibitor, ARB or Beta Blocker if ejection fraction is less than 40%</li> <li>• Refer patients to Swing Bed and/or Cardiac Rehabilitation of needed</li> <li>• Monitor Aspirin Use in diabetic patients</li> <li>• Annual Wellness visits for Medicare</li> </ul>	<p>BCH:</p> <ul style="list-style-type: none"> <li>• Has an ongoing relationship with Community Care of the Lower Cape Fear Care Managers with presence in CFV Bladen Medical Practices</li> <li>• Has provided multiple educational programs, including CPR training, as reflected in the table included on page 73.</li> <li>• Continues to work with and support efforts of the Bladen County Public Health Department</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County ED use rate for cardiac related diagnoses has increased from 178.37 per 10,000 population to 197.14 per 10,000 population from 2013 to 2015</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County age-adjusted death rate for heart disease has decreased from 274.6 per 100,000 population to 232.1 per 100,000 population from 2005-2009 to 2010-2014</li> <li>• The Bladen County age-adjusted death rate for Acute MI has decreased from 90.9 per 100,000 population</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

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		<ul style="list-style-type: none"><li>• Flu vaccines given at Farmer's Market for the community</li></ul>		<ul style="list-style-type: none"><li>• The Bladen County cardiac related inpatient admissions have increased from 203.9 per 10,000 population to 196.0 per 10,000 population from 2013 to 2015</li></ul>	to 65.1 per 100,000 population from 2005-2009 to 2010-2014
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## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
Address Chronic Disease Issues in Bladen County <b>Cancer</b>	<ul style="list-style-type: none"> <li>• 2<sup>nd</sup> leading cause of death in Bladen County.</li> <li>• Identified by Community as 3rd leading health issue impacting community</li> <li>• Identified by Community as 5th leading health issue impacting families in Bladen County</li> </ul>	<ul style="list-style-type: none"> <li>• Expand prevention activities and early diagnosis</li> <li>• Reduce smoking incidence and the risk of developing lung cancer and other cancers and diseases by providing Smoking Cessation classes, education, and support in the community</li> <li>• Reduce oral cancer incidence rates related to HPV virus</li> </ul>	<ul style="list-style-type: none"> <li>• Expanded utilization of Palliative Care and Hospice Services in the Community</li> <li>• Provide educational opportunities to Bladen County Hospital staff regarding hospice services.</li> <li>• Continue to provide educational information at Community Health Fairs</li> <li>• Improved access for screening mammography</li> <li>• Increased awareness in Community for need to do breast self-exams and screening mammograms</li> <li>• Provide screening work up and CT Scan for worried-well long term and high risk smokers through the CFV Lung Nodule Clinic</li> <li>• Provide education and information to community and schools about the risks of smoking and smoking cessation through public events and outreach opportunities</li> <li>• Improve education, awareness, and screening mammography access for uninsured and underinsured women in Community</li> <li>• Provide Survivorship Program for growing population of cancer survivors in Community</li> </ul>	<ul style="list-style-type: none"> <li>• Improved communication with existing hospice providers</li> <li>• Educate cancer free-patients on the dangers and provide support to cancer survivors</li> </ul>	<ul style="list-style-type: none"> <li>• Decreased smoking rates</li> <li>• Decreased incidence in Lung Cancer and/or earlier identification of lung cancer when it is curable</li> <li>• Improved awareness and decreased incidence in HPV related oral cancers in Community</li> <li>• Improved screening mammography rates and breast cancers caught in earlier stage</li> <li>• Improvement in Quality of Life for Cancer Survivors</li> </ul>
BCH Activities and Three Year Outcomes		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page 73.</li> </ul>	BCH: <ul style="list-style-type: none"> <li>• Has provided multiple educational programs, including smoking cessation, mammography and screening as</li> </ul>	<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County age-adjusted death rate for Lung Cancer has decreased from</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

2013-2015		<ul style="list-style-type: none"> <li>• PI on Pap Smears (follow-up of normal &amp; abnormal results) monthly</li> <li>• PI on mammograms (follow-up of normal &amp; abnormal results) monthly</li> <li>• Attended Homecoming Football game to educate community on breast cancer</li> <li>• Annual Wellness visits for Medicare addresses multiple cancer screenings</li> <li>• Flu vaccines given at Farmer's Market</li> </ul>	<p>reflected in the table included on page 73.</p> <ul style="list-style-type: none"> <li>• Continues to work with and support efforts of the Bladen County Public Health Department</li> </ul>	73.	65.1 per 100,000 population to 54.3 per 100,000 population from 2005-2009 to 2010-2014
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## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
Address Chronic Disease Issues in Bladen County <b>Stroke / Cerebrovascular</b>	<ul style="list-style-type: none"> <li>• 3<sup>rd</sup> leading cause of death in Bladen County.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to incorporate prevention activities into all outreach events to include ways to control modifiable risk factors for Stroke and Heart Disease</li> <li>• Expand prevention education activities and early diagnosis by working with school system to educate in the early years through high school age</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with Community Care of the Lower Cape Fear Care Managers in CFV Bladen Medical Practices</li> <li>• Continue to provide educational information at Community Health Fairs</li> <li>• Collaborate with Bladen County Health Department to spread the word of “East Smart, Move More, Weigh Less”</li> <li>• Continue to offer CPR training to teen and adults as outreach program</li> <li>• Have “Ask the Doctor” blog on Bladen-on-line</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with heart and vascular disease</li> <li>• Decrease inpatient admissions by persons with heart and vascular disease</li> </ul>	<ul style="list-style-type: none"> <li>• Improve survival rates due to Stroke</li> <li>• Reduced mortality rates from Stroke</li> </ul>
BCH Activities and Three Year Outcomes  2013-2015		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page 73.</li> <li>• PI is completed monthly on Congestive Heart Failure patients to ensure that they are on</li> </ul>	BCH: <ul style="list-style-type: none"> <li>• Has an ongoing relationship with Community Care of the Lower Cape Fear Care Managers with presence in CFV Bladen Medical Practices</li> <li>• Has provided multiple educational programs, including CPR training, as reflected in the table included on page</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County cardiac related inpatient admissions have increased from 203.9 per 10,000 population to 196.0 per 10,000</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County age-adjusted death rate for cerebrovascular disease has decreased from 73.8 per</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

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		<p>an ACE inhibitor, ARB or Beta Blocker if ejection fraction is less than 40%</p> <ul style="list-style-type: none"> <li>• Refer patients to Swing Bed and/or Cardiac Rehabilitation if needed</li> <li>• Monitor Aspirin Use in diabetic patients</li> <li>• Annual Wellness visits for Medicare</li> <li>• Flu vaccines given at Farmer's Market for the community</li> </ul>	<p>73.</p> <ul style="list-style-type: none"> <li>• Continues to work with and support efforts of the Bladen County Public Health Department</li> </ul>	<p>population from 2013 to 2015</p>	<p>100,000 population to 42.3 per 100,000 population from 2005-2009 to 2010-2014</p>
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## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
Address Chronic Disease Issues in Bladen County <b>Respiratory Disease</b>	<ul style="list-style-type: none"> <li>• 4<sup>th</sup> leading cause of death in Bladen County.</li> <li>• Identified by Community as 4th leading health issue impacting community</li> </ul>	<ul style="list-style-type: none"> <li>• Expand prevention activities and early diagnosis</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with Community Care of the Lower Cape Fear Care Managers in CFV Bladen Medical Practices</li> <li>• Work with CFV Bladen Medical Practices to implement/continue use of medical home model for COPD patients regardless of payor.</li> <li>• Continue to provide educational information at Community Health Fairs</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with COPH</li> <li>• Decrease inpatient admissions by persons with COPD</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with COPD</li> <li>• Decrease inpatient admissions by persons with COPD</li> </ul>
<b>BCH Activities and Three Year Outcomes 2013-2015</b>		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page 73.</li> <li>• Spirometry services are available at BMA clinics</li> <li>• BMA has offered Asthma Days at BMA Bladenboro and Kid's Care in which patients &amp; families were given asthma education and free supplies</li> <li>• Asthma Action Plan PI is completed on each</li> </ul>	BCH: <ul style="list-style-type: none"> <li>• Has an ongoing relationship with Community Care of the Lower Cape Fear Care Managers with presence in CFV Bladen Medical Practices</li> <li>• Has provided multiple educational programs, including CPR training, as reflected in the table included on page 73.</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County respiratory diseases inpatient admissions have decreased from 153.09 per 10,000 population to 144.80 per 10,000 population from 2013 to 2015</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County ED admissions related to respiratory diseases have decreased from 733.09 per 10,000 population to 587.73 per 10,000 population from 2013 to 2015</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

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		provider once a month • Flu vaccines given at Farmer's Market for the community			
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## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
Address Chronic Disease Issues in Bladen County <b>Asthma</b>	<ul style="list-style-type: none"> <li>• 4<sup>th</sup> leading cause of death (Respiratory Disease) in Bladen County.</li> <li>• Identified by Community as 6th leading health issue impacting families in Bladen County</li> </ul>	<ul style="list-style-type: none"> <li>• Collaborate with Bladen County Schools for parent/student/staff Asthma education</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with Community Care of the Lower Cape Fear Care Managers in CFV Bladen Medical Practices</li> <li>• Work with CFV Bladen Medical Practices to implement/continue use of medical home model and NIH guidelines for all patients regardless of payor.</li> <li>• Continue to provide educational information at Community Health Fairs</li> <li>• Collaborate with Bladen County Health Department to spread the word of <i>"East Smart, Move More, Weigh Less"</i></li> <li>• Expand prevention activities and early diagnosis by hosting forums at PTA meetings where a physician can address Asthma education with teachers, students and staff</li> <li>• Have <i>"Ask the Doctor"</i> blog on Bladen-on-line</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with Asthma</li> <li>• Improve disease self-management</li> <li>• Decrease asthma-related inpatient admissions</li> <li>• Decrease asthma-related emergency dept visits</li> <li>• Decrease school absences &amp; time missed from work (caregivers)</li> <li>• Continued support for the patient and family</li> <li>• Communication to connect the patient/family, school and physician</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease inpatient admissions by persons with Asthma</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

<b>BCH Activities and Three Year Outcomes 2013-2015</b>		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on page 73.</li> <li>• Spirometry services are available at BMA clinics</li> <li>• BMA has offered Asthma Days at BMA Bladenboro and Kid's Care in which patients &amp; families were given asthma education and free supplies</li> <li>• Asthma Action Plan PI is completed on each provider once a month</li> <li>• Flu vaccines given at Farmer's Market for the community</li> </ul>	BCH: <ul style="list-style-type: none"> <li>• Has an ongoing relationship with Community Care of the Lower Cape Fear Care Managers with presence in CFV Bladen Medical Practices</li> <li>• Has provided multiple educational programs as reflected in the table included on page 73.</li> <li>• Continues to work with and support efforts of the Bladen County Public Health Department</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County respiratory diseases inpatient admissions have increased from 153.09 per 10,000 population to 144.80 per 10,000 population from 2013 to 2015</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County ED admissions related to respiratory diseases have decreased from 733.09 per 10,000 population to 587.73 per 10,000 population from 2013 to 2015</li> </ul>
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## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Problem Statement		BCH Strategies	BCH Activities	Outcomes (measurement)	
Problem	Why?	How?	How, Specifically?	Intermediate	Long-Term
ASHAddress Chronic Disease Issues in Bladen County <b>Diabetes</b>	<ul style="list-style-type: none"> <li>• 6<sup>th</sup> leading cause of death in Bladen County.</li> <li>• Identified by Community as 4th leading health issue impacting community</li> <li>• Identified by Community as 3rd leading health issue impacting families in Bladen County</li> </ul>	<ul style="list-style-type: none"> <li>• Provide increased education for all diabetic patients with an emphasis on pediatric diabetes cases</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with Community Care of the Lower Cape Fear Care Managers in CFV Bladen Medical Practices</li> <li>• Continue to provide educational information at Community Health Fairs</li> <li>• Organize walking/running activities (5K) to promote exercise</li> <li>• Expand prevention education activities and early diagnosis by working with school system to educate in the early years through high school age</li> <li>• Have “Ask the Doctor” blog on Bladen-on-line</li> <li>• Collaborate with Bladen County Department of Health’s initiatives for diabetic patients; “East Smart, Move More, Weigh Less” and Diabetes Educational Support Group Meetings</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with diabetes</li> <li>• Increase knowledge of school nurses</li> <li>• Improve awareness and care for diabetic children</li> </ul>	<ul style="list-style-type: none"> <li>• Decrease ED utilization by persons with diabetes</li> <li>• Decrease inpatient admissions by persons with diabetes</li> <li>• Increase knowledge of school nurses</li> <li>• Improve awareness and care for diabetic children</li> </ul>
<b>BCH Activities and Three Year Outcomes</b>		<ul style="list-style-type: none"> <li>• A Summary Table reflecting all BCH outreach is included on</li> </ul>	BCH: <ul style="list-style-type: none"> <li>• Has an ongoing relationship with Community Care of the Lower Cape</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County Endocrine /Nutr/Metab</li> </ul>	<ul style="list-style-type: none"> <li>• The Bladen County inpatient</li> </ul>

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

2013-2015		<p>page 73.</p> <ul style="list-style-type: none"> <li>PI is completed monthly on diabetic patients addressing: <ul style="list-style-type: none"> <li>i. LDL levels drawn within the last 12 months</li> <li>ii. Aspirin use</li> <li>iii. Annual foot exams (comprehensive including inspection, palpation &amp; sensation)</li> <li>iv. Smoking cessation</li> </ul> </li> <li>Flu vaccines given at Farmer's Market</li> </ul>	<p>Fear Care Managers with presence in CFV Bladen Medical Practices</p> <ul style="list-style-type: none"> <li>Has provided multiple educational programs, including CPR training, as reflected in the table included on page 73.</li> <li>Continues to work with and support efforts of the Bladen County Public Health Department</li> </ul>	<p>Disorder (Diabetes) ED use rate decreased slightly from 165.31 per 10,000 population to 164.14 per 10,000 population from 2013 to 2015</p>	<p>admission rate for patients with diabetes* increased from 17.33 per 10,000 population to 18.49 per 10,000 population from 2013 to 2015</p>
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\*Diabetes defined as DRGs 637,638,639 Truven inpatient database



## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

### Educational Outreach Summary

Date	Activity Name	County	Purpose	# Served
4/6/2013	Spring & Grow Expo	Bladen	Blood Donor Center Awareness & Education	unknown
1/15/2015	MLK Parade	Bladen	Community Awareness/PR	500
2/2/2015	Job Shadowing Day	Bladen	Community Awareness/PR	25
3/8/2015	Career & Technical Awareness Day	Bladen	Community Awareness/PR	600
3/9/2015	Community Disaster Drill	Bladen	Community Awareness/PR	100
3/17/2015	Career Day Booker T. Washington	Bladen	Community Awareness/PR	250
3/23/2015	Bladen County Special Olympics	Bladen	Community Awareness/PR	300
4/7/2015	Spring & Grow Expo	Bladen	Community Awareness/PR	500
4/22/2012	Spring Fest Camp Clearwater	Bladen	Community Awareness/PR	500
4/24/2015	Bladen Comm.College Job Fair	Bladen	Community Awareness/PR	100
5/4/2015	Bladen County Relay for Life	Bladen	Community Awareness/PR	1000
5/19/2015	White Lake Water Festival Parade	Bladen	Community Awareness/PR	1000
6/23/2015	US Cellular Customer App.Day	Bladen	Community Awareness/PR	75
6/26/2015	Farm Bureau Healthy Living Day	Bladen	Community Awareness/PR	250
8/23/2015	Elizabethtown Comm. Night out	Bladen	Community Awareness/PR	100
9/5/2015	BCC Nursing Student Luncheon	Bladen	Community Awareness/PR	25

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

Date	Activity Name	County	Purpose	# Served
9/8/2015	Bladenboro Fun Day	Bladen	Community Awareness/PR	350
9/15/2015	Dublin Peanut Festival	Bladen	Community Awareness/PR	1200
10/14/2012	Grape Festival	Bladen	Community Awareness/PR	200
10/21/2012	Harvest Party Camp Clearwater	Bladen	Community Awareness/PR	375
11/3/2015	Beast Festival	Bladen	Community Awareness/PR	450
11/17/2015	Bladen Crisis 4K for Food	Bladen	Community Awareness/PR	40
11/20/2015	BMA Bladenboro Clinic Open House	Bladen	Community Awareness/PR	150
11/25/2015	Elizabethtown Christmas Parade	Bladen	Community Awareness/PR	325
12/15/2015	Bladenboro Christmas Parade	Bladen	Community Awareness/PR	1000
8/3/2013	Smithfield Packing	Bladen	Education	50
12/8/2013	Bladenboro Christmas Parade	Bladen	Outreach	1,000
5/3/13	HCDD: Bladen Staff/Visitors	Bladen	Presentation/Awareness: Health Care Decision Day	
3/2/2015	Read Across America Day	Bladen	Public Relations	32
4/26/2015	Bladen We Care Golf Tournament	Bladen	Public Relations	75
6/6/2015	New Light Church	Bladen	Public Relations	100
6/13/2015	Galeed Baptist Church	Bladen	Public Relations	100
6/29/2015	Chamber of Commerce Banquet	Bladen	Public Relations	150

## Appendix 6 – CFV Bladen County Hospital 2013-2015 Community Health Activities

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Date	Activity Name	County	Purpose	# Served
10/4/2015	BCC Foundation Fundraiser	Bladen	Public Relations	25
10/15/2015	Dublin Primary School Clinic Tour	Bladen	Public Relations	28
11/3/2015	BCH Foundation Gala	Bladen	Public Relations	300
4/21/2015	Boost the Boro Fundraiser	Bladen	Public Relations	125
6/22/2015	DYB Coach Pitch State Tournament	Bladen/Columbus	Community Awareness/PR	375
5/4/2015	Bladenboro Rotary Golf Tournament	Bladen/Columbus	Public Relations	60
9/19/2015	Minister's Association Meeting	Bladen/Columbus	Public Relations	40
2/21/2015	Cape Fear Farm Heritage Day	Columbus	Community Awareness/PR	100

## Appendix 7 - Priority Worksheet

### PROBLEM IMPORTANCE WORKSHEET

*Brief review of input and data on this issue:*

Complete a separate form for each health issue identified by the CHA Team

Health issue: \_\_\_\_\_

CHECK THE APPROPRIATE BOX FOR EACH ITEM BELOW (Explanation below)

	10 HIGH	9	8	7	6	5	4	3	2	1 LOW	SUB TOTAL
MAGNITUDE											
CONSEQUENCES											
FEASIBILITY											
Other (define criteria)											
SUM OF TOTALS											

A problem with a score of 10 on each criteria would indicate that it is of the greatest magnitude, has the most serious consequences, and is most feasible to correct. In contrast, a score of 1 on each criteria would indicate that it is of the least magnitude, has the least serious consequences, and is least feasible to correct. Add together the scores for each health issue to obtain the Problem Importance Index.

1. **Magnitude:** How many persons does the problem affect, either actually or potentially?
2. **Seriousness of the Consequences:** What degree of disability or premature death occurs because of the problem? What are the potential burdens to the community, such as economic or social burdens?
3. **Feasibility of Correcting:** Is the problem amenable to interventions (i.e., is the intervention feasible scientifically as well as acceptable to the community?). What technology, knowledge, or resources are necessary to correct the problem?

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## References

Bladen County Health Department 2010 Community Health Needs Assessment.

Bladen County Health Department 2013 Community Health Needs Assessment.

North Carolina State Center for Health Statistics

<http://www.schs.state.nc.us/>

North Carolina Office of State Budget and Management

<http://www.osbm.state.nc.us/>

US Census Bureau

[www.census.gov/2010census](http://www.census.gov/2010census)

NC Census (uses US Census Bureau)

<http://quickfacts.census.gov/qfd/states/37000.html>

Bureau of Labor Statistics

<http://data.bls.gov>

American Fact Finder Community Facts

[http://factfinder.census.gov/faces/nav/jsf/pages/community\\_facts.xhtml](http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml)