



## **Novant Health Presbyterian Medical Center**

**Community Benefit Implementation Plan**

**Mecklenburg County, North Carolina**

**2016-2018**

**Approved by the Novant Health Southern Piedmont Region Board of Trustees on October 26, 2016**

# Table of Contents

<b>I. Introduction</b>	
a. Organization Overview	3
b. Our Community	4
<b>II. Prioritized Health Needs</b>	
a. County prioritization	7
b. Facility prioritizaion	8
<b>III. Issues identified for remediation</b>	
a. Priority 1: Diabetes	10
b. Priority 2: Obesity	10
c. Priority 3: Other chronic disease	11
d. Priority 4: Maternal & infant health	12
e. Priority 5: Mental Health	13
<b>IV. Unaddressed needs</b>	14
<b>V. Role of the board &amp; administration</b>	15
<b>Appendix</b>	

## I. Introduction

Novant Health Presbyterian Medical Center, in partnership with the Mecklenburg County Health Department and other community partners established a community health needs assessment in 2013 to identify the most pressing health needs in our community. Novant Health Presbyterian Medical Center will enhance the community's health by offering health and wellness programming, clinical services and financial support in response to the specific health needs identified.

### ***a. Organization Overview***

Novant Health Presbyterian Medical Center is an integral part of the Novant Health system (collectively known as "Novant Health"). Novant Health is a non-profit integrated health care system of 14 medical centers and a medical group with over 500 clinic locations. Other facilities and programs include outpatient surgery and diagnostic centers, charitable foundations, rehabilitation programs, and community health outreach programs. Novant Health and its affiliates serve their communities with programs including health education, home health care, prenatal clinics, community clinics and immunization services. Novant Health's over 25,000 employees and physician partners care for patients and communities in North Carolina, Virginia, South Carolina and Georgia.

### ***Mission***

Novant Health exists to improve the health of our communities, one person at a time.

Our employees and physician partners strive every day to bring our mission, vision and values to life. We demonstrate this commitment to our patients in many different ways. Our organization:

- Maintains an active community health outreach program.
- Demonstrates superior outcomes for many health conditions as indicated by our state and national quality scores.
- Creates innovative programs that address important health issues, with many of our programs and services being recognized nationally.
- Believes in its role as a good corporate citizen, working with community agencies and organizations to make our communities better places to live and work.

**Novant Health Presbyterian Medical Center (NHPMC)** serves as a regional facility with the latest in diagnostic and treatment services. Presbyterian is a leader in providing specialized care to patients with cancer and heart disease. The 622 bed hospital also provides maternity care and specialized neonatal intensive care to infants.

Novant Health Hemby Children's Hospital is located within Novant Health Presbyterian Medical Center. The hospital provides compassionate care in a family-centered environment. Large patient rooms include a parent bed and other conveniences that allow families to be comfortable during their child's hospital stay. Other features include a colorful playroom, outdoor playground, activities for children led by a child-life specialist and a pediatric intensive care unit specializing in the care of critically ill children.

**b. Our Community**

Primary and Secondary Service Areas

Mecklenburg County contains seven municipalities including the City of Charlotte, and the towns of Cornelius, Davidson, Huntersville, Mint Hill and Pineville. According to the U.S. Census Bureau 2014 population estimate, Mecklenburg County’s population increased 10.1% to 1,012,539 making Mecklenburg County the most populated and densely populated county in North Carolina.

The Primary Service Area for Novant Health Presbyterian Medical Center is defined by the zip codes that represent 75% to 85% of the hospital’s in-patient population as outlined below:

Zip Code	City	County	Zip Code	City	County
28031	Cornelius	Mecklenburg	28078	Huntersville	Mecklenburg
28134	Pineville	Mecklenburg	28204	Charlotte	Mecklenburg
28203	Charlotte	Mecklenburg	28207	Charlotte	Mecklenburg
28206	Charlotte	Mecklenburg	28210	Charlotte	Mecklenburg
28209	Charlotte	Mecklenburg	28213	Charlotte	Mecklenburg
28212	Charlotte	Mecklenburg	28216	Charlotte	Mecklenburg
28215	Charlotte	Mecklenburg	28270	Charlotte	Mecklenburg
28227	Charlotte	Mecklenburg	28273	Charlotte	Mecklenburg
28262	Charlotte	Mecklenburg	28277	Charlotte	Mecklenburg
28269	Charlotte	Mecklenburg	28036	Davidson	Mecklenburg
28105	Matthews	Mecklenburg	28214	Charlotte	Mecklenburg
28202	Charlotte	Mecklenburg	28217	Charlotte	Mecklenburg
28205	Charlotte	Mecklenburg	28226	Charlotte	Mecklenburg
28208	Charlotte	Mecklenburg	28278	Charlotte	Mecklenburg
28211	Charlotte	Mecklenburg			

The Primary Service Area includes the City of Charlotte and the Towns of Cornelius, Davidson, Pineville, Huntersville and Matthews which are all located in Mecklenburg County. The Secondary Service Area for Novant Health Presbyterian Medical Center includes counties in both North Carolina and South Carolina that are beyond Mecklenburg County proper. These areas (outlined below) include Alexander, Cabarrus, Gaston, Iredell, Lancaster, Lincoln, Rowan, Union, and York Counties.

Zip Code	City	County	Zip Code	City	County
28678	Stony Point	Alexander	28092	Lincolnton	Lincoln
28107	Midland	Cabarrus	28080	Iron Station	Lincoln
28027	Concord	Cabarrus	28037	Denver	Lincoln
28075	Harrisburg	Cabarrus	28168	Vale	Lincoln
28083	Kannapolis	Cabarrus	27013	Cleveland	Rowan
28124	Mount Pleasant	Cabarrus	28138	Rockwell	Rowan
28025	Concord	Cabarrus	28146	Salisbury	Rowan
28081	Kannapolis	Cabarrus	27054	Woodleaf	Rowan
28021	Cherryville	Gaston	28023	China Grove	Rowan
28052	Gastonia	Gaston	28144	Salisbury	Rowan
28101	McAdenville	Gaston	28147	Salisbury	Rowan
28164	Stanley	Gaston	28071	Gold Hill	Rowan
28012	Belmont	Gaston	28088	Landis	Rowan
28034	Dallas	Gaston	28125	Mount Ulla	Rowan
28056	Gastonia	Gaston	28159	Spencer	Rowan
28006	Alexis	Gaston	28079	Indian Trail	Union
28016	Bessemer City	Gaston	28110	Monroe	Union
28032	Cramerton	Gaston	28103	Marshville	Union
28054	Gastonia	Gaston	28173	Waxhaw	Union
28098	Lowell	Gaston	28104	Matthews	Union
28120	Mount Holly	Gaston	28112	Monroe	Union
28115	Mooresville	Iredell	28174	Wingate	Union
28660	Olin	Iredell	29708	Fort Mill	York
28117	Mooresville	Iredell	29730	Rock Hill	York
28166	Troutman	Iredell	29733	Rock Hill	York
28625	Statesville	Iredell	29743	Smyrna	York
28677	Statesville	Iredell	29710	Clover	York
28634	Harmony	Iredell	29717	Hickory Grove	York
28689	Union Grove	Iredell	29734	Rock Hill	York
29058	Heath Springs	Lancaster	29704	Catawba	York
29722	Lancaster	Lancaster	29715	Fort Mill	York
29067	Kershaw	Lancaster	29726	McConnells	York
29720	Lancaster	Lancaster	29732	Rock Hill	York
29707	Fort Mill	Lancaster	29742	Sharon	York
28033	Crouse	Lincoln	29745	York	York

**Population**

Mecklenburg County is the center of the country’s fifth largest urban area with over seven million people living within a 100-mile radius. The county consists of a large urban center surrounded by smaller, more rural communities.

**Mecklenburg County Population by Race & Ethnicity (2014)**

	Mecklenburg County	North Carolina
Population Estimate	1,012,539	9,943,964
Persons Under 5 Years, percent 2014	7.0%	6.1%
Persons Under 18 Years, percent 2014	24.6%	23.0%
Person 65 Years & Over, percent 2014	10.0%	14.7%
Female Persons, percent 2014	51.9%	51.3%
White Alone, percent 2014	59.2%	71.5%
Black/African-American Alone, percent 2014	32.2%	22.1%
American Indian & Alaska Native Alone, percent 2014	0.8%	1.6%
Asian Alone, percent 2014	5.5%	2.7%
Native Hawaiian & Other Pacific Islander Alone, percent 2014	0.1%	0.1%
Two or More Races, percent 2014	2.2%	2.1%
Hispanic or Latino, percent 2014	12.7%	9.0%

Source: U.S. Census Bureau (2014).

Children and adolescents make up over one-third (31.6%) of the population in Mecklenburg County, while seniors only make up 10% of the population.<sup>1</sup> From 2010 to 2020, the population of Mecklenburg County is projected to grow by 24%. North Carolina’s population is projected to grow by 11% during the same time period. Over the next 15 years, it is expected that persons age 65 and older will be the fastest growing segment of Mecklenburg County’s population. Non-white minorities currently make up over one-half (53.5%) of the racial demographic in Mecklenburg County.

Median Income by Educational Attainment		Population Educational Attainment (≥ 25 yrs old)		Poverty Rate by Educational Attainment	
> High School diploma	\$18,257	< HS diploma/GED	11.2%	Less than high school graduate	31%
High school Graduate	\$24,797	HS diploma/GED	18.7%	High school graduate (includes equivalency)	16%
Some college or associate's degree	\$30,462	Some college or associate's degree	28.2%	Some college, associate's degree	12%
Bachelor's degree	\$50,510	Bachelor's degree	28.3%	Bachelor's degree or higher	5%
≥ Graduate or professional degree	\$67,022	≥ Graduate degree	13.6%		

Source: Mecklenburg County 2015 Community Pulse

<sup>1</sup> U.S. Census Bureau (2015). State & County QuickFacts. <http://quickfacts.census.gov/qfd/states/37/3712000.html>

Mecklenburg County residents with graduate or professional degrees earn a median income that is 2.5 times higher than the median income for someone with only a high school education.<sup>2</sup> According to the U.S. Census 2009-2013 data, the median household income in Mecklenburg County is \$55,444. A key indicator to evaluate economic condition of Mecklenburg County is the poverty rate. The poverty rate for Mecklenburg County residents decreases as the amount of education increases, with 26% gap in poverty between residents who are not high school graduates and residents who have a bachelor's degree or higher.

## II. Prioritized Health Needs

### Identified Significant Health Needs

From participant responses, it was apparent that mental health, chronic disease prevention, access to care and violence prevention were the most important concerns of Mecklenburg County residents.

Other key data points included:

- When asked to identify specific health behaviors residents are trying to change, respondents identified 1) eating or drinking healthier foods (89.7%), 2) being more active (84.5%), 3) managing stress (50.1%), 4) reducing chances for injury (33.2%), and 5) limiting alcohol consumption (11.8%).
- When asked to identify the greatest health related concerns, respondents identified 1) none (62.6%), 2) some or all family members without health insurance (30.4%), 3) irregular dental care because of cost (30.2%), 4) irregular eye exams/new glasses because of cost (22.0%), and costs related to being underinsured (15.8%).
- When asked to identify things that could help residents who smoke to stop smoking, respondents identified 1) access to nicotine substitutes (26.7%), 2) support group/cessation classes (22.5%), 3) access to medications (19.4%), 4) free 24-hour help line/Quitline (14.8%), and 5) tobacco free policy at my workplace (14.4%).
- When collectively reviewing all the responses, residents identified the community's greatest health issues as mental health (55.6%), chronic disease prevention (55.6%), access to care (50.5%), violence prevention (46.5%), substance abuse prevention (43.8%), healthy environment (41.3%), sexual behavior (26.6%), injury prevention (23.0%), and maternal and child health (21.5%).

### a) County Prioritization

On October 25, 2013 117 individuals representing diverse number of community agencies and groups attended a formal CHA Priority Setting meeting. Participants were asked to score identified health issues after viewing a presentation on data specific to the nine priority areas. The nine priority areas are listed as follows:

- 1) Access to Care

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<sup>2</sup> Mecklenburg County: Community Pulse 2015.

<http://charmeck.org/mecklenburg/county/CountyManagersOffice/Documents/2015%20Mecklenburg%20County%20Community%20Pulse%20Report.pdf>

- 2) Chronic Disease and Disability
- 3) Environmental Health
- 4) Injury
- 5) Maternal Child Health
- 6) Mental Health
- 7) Responsible Sexual Behavior
- 8) Substance Abuse
- 9) Violence

Participants then scored the areas from 1 (least weight) to 10 (most weight) using the following five criteria: magnitude, severity, intervention effectiveness, public concern and urgency. The calculated scores were used to rank the focus areas, and the weighted rankings from the community opinion surveys and the priority focus exercise were combined with the following results:

- 1) Chronic Disease and Disability
- 2) Mental Health
- 3) Access to Care
- 4) Violence
- 5) Substance Abuse
- 6) Environmental Health
- 7) Maternal Child Health
- 8) Responsible Sexual Behavior
- 9) Injury

### ***Recommended Prioritized Health Outcomes***

For each of the identified areas, recommendations were made for the top four prioritized health needs. Below is a summary of those recommendations:

- *Preventing Chronic Disease and Disability:* increase opportunities for physical activity through safe community spaces, improve access to healthy foods and food choices, create policies to support increased physical activity and healthier food choices, increase access to healthcare providers.
- *Mental Health:* work to decrease stigma associated with seeking mental health care, promote communication and collaboration among healthcare providers, promote mental health first aid, and limit access to firearms.
- *Access to Care:* address barriers to access other than funding such as transportation, non-traditional hours, cultural competence, health literacy awareness and training, improved and reliable funding for free or low cost health services, and improved communication and awareness of services and how to access them.
- *Violence Prevention:* change norms regarding violence, promote efforts that help create community bonds, expand community partnerships, begin violence prevention education at the pre-K level, increase after school activities to keep kids active and engaged, use violence assessment tools to ensure consistent messages to encourage healthcare professionals to ask about safety at each encounter, increase awareness of the importance of reporting child abuse, and increase efforts to address domestic violence.

### ***b) Facility prioritization***



In addition to the community rankings, Novant Health Presbyterian Medical Center reviewed the top five diagnosis codes for inpatient and outpatient hospital emergency room visits year-to-date January – July 2015.

Novant Health Presbyterian Medical Center Emergency Department  
Top 5 Diagnoses YTD Jan-July 2015

Inpatient		Outpatient	
Diagnosis	Volume	Diagnosis	Volume
Urinary Tract Infection, NOS	89	Acute URI NOS	1361
Asthma NOS w (ac) exac	76	Chest Pain NOS	979
Chest Pain NEC	65	Urinary Tract Inf NOS	834
Chest Pain, NOS	34	Chest Pain NEC	692
Fever, NOS	20	Vomiting alone	721

A review of the hospital emergency room visits indicated that many of the top inpatient diagnosis codes are correlated with chronic issues affecting the aging population and common symptoms related to respiratory conditions and heart disease. Upon analysis of the outpatient diagnosis codes, it was apparent that many of the patients seen had symptoms that could be related to a number of chronic conditions, including (but not limited to) heart disease, diabetes and chronic issues related to aging.

Upon a comprehensive review of the community’s recommended prioritized outcomes and NHPMC’s ED top 5 diagnosis codes, the Novant Health Presbyterian Medical Center leadership team and Board of Trustees evaluated this information based on the scope, severity, health disparities associated with the need, and the estimated feasibility and effectiveness of possible interventions. Through this thorough evaluation, the team agreed on the following top five significant health priorities for Novant Health Presbyterian Medical Center:

1. Diabetes
2. Obesity
3. Other Chronic Diseases
4. Maternal and Infant Health
5. Mental Health

### **III. Issues identified for remediation**

In the following section Novant Health Presbyterian Medical Center will address each of the top five prioritized needs. Each need includes actions that must be taken to achieve improved community health. Outlined within each need, Novant Health Presbyterian Medical Center will identify the

description of need, programs, resources and intended actions, anticipated impact, priority populations, evaluation plan, intervention strategies, tactics for achievement, growth targets, and community partners.

The following action plans were developed through evaluation of Novant Health Presbyterian Medical Center programs and the U.S. Department of Health and Human Services “Healthy People 2020” topics. To determine anticipated impact, Healthy People 2020 objectives were reviewed and integrated into each priority area. As a leader committed to improving the nation’s health, it is imperative to Novant Health Presbyterian Medical Center that our guiding principles in defining our role in community health outreach and advocacy be well aligned with the Healthy People’s goal of achieving health equity and eliminating disparities. (See Appendix A for Healthy People 2020 objectives that were evaluated.)

**a) Priority 1: Diabetes**

Since 2010, Diabetes has moved up as a leading cause of death in Mecklenburg County and disproportionately affected African-Americans. Based on the same statistics, diabetes ranked as the fourth most common cause of death in non-whites.

**Programs, resources and intended actions to address diabetes:** Novant Health Presbyterian Medical Center offers community based services including education for diabetes prevention and diabetes management, as well as glucose and A1C screenings. All of these programs are intended to increase awareness of diabetes, promote healthy lifestyles that prevent disease, provide education around management and monitoring techniques and support patients through the initial stages of diagnosis and treatment.

SIGNIFICANT HEALTH NEED		
DIABETES		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
<b>Community A1C screenings</b>	Remarkable You community screening initiative in high African American populations	Early detection of undiagnosed prediabetic and diabetic participants will increase
<b>Community diabetes education</b>	Lecture series on diabetes prevention	Knowledge level of participants will increase and participants will learn new skills to change unhealthy behaviors

**b) Priority 2: Obesity**

In the Community Health Assessment, residents were asked a series of questions related to health behavior choices. In 2012, over 59% of Mecklenburg adult residents were reportedly overweight or obese, and approximately 20% of adults reported some physical activity in the past month. In 2011, only 18% of Mecklenburg County adults consumed five or more servings of fruits and vegetables a day,

and one third of teens reported spending three hours or more per day playing video games or using a computer for something other than school work on an average school day.

**Programs, resources and intended actions to address obesity:** Novant Health Presbyterian Medical Center offers programs to address obesity, including body mass index screenings, and nutrition education. Additionally, Novant Health Presbyterian Medical Center collaborates with various community partners to support other nutrition and fitness programs throughout Mecklenburg County. All programs and partnerships are intended to increase exposure and access to healthy foods, decrease weight loss and lower overall health risk factors.

SIGNIFICANT HEALTH NEED		
OBESITY		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
<b>Community Body Mass Index (BMI) screenings</b>	Remarkable You community screening initiative	Early detection of undiagnosed obese participants will increase and participants will learn new skills to change unhealthy behaviors
<b>Community nutrition education</b>	Lectures on healthy eating and weight management	Knowledge level of participants will increase and participants will learn new skills to change unhealthy behaviors

**c) Priority 3: Other Chronic Diseases**

Cancer and heart disease are ranked the first and second leading causes of death, respectively, in Mecklenburg County and in the state of North Carolina. The number of cancer deaths decreased 3.9% from 2010 to 2011. Cancer deaths decreased 10.3% for men and increased 3.2% for women in Mecklenburg County. In addition, women tend to die of higher rates of Alzheimer’s and other chronic diseases than men in Mecklenburg County.

**Programs, resources and intended actions to address other chronic diseases:** Novant Health Presbyterian Medical Center provides mobile mammography services and clinical breast exams to uninsured/underinsured women. All of these screenings are designed to increase early detection of cancer. Additionally, Novant Health Presbyterian Medical Center offers heart risk assessments, vascular screenings, and cardiac education that are designed to increase the community’s awareness of risk factors, prevent unnecessary cardiac related problems, and connect individuals to prevention and management services.

SIGNIFICANT HEALTH NEED		
OTHER CHRONIC DISEASES		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
<b>Community Cancer screenings</b>	Novant Health mobile mammography unit and community cancer screenings in racial minority populations	Participants will change beliefs about importance of annual screening for early detection and increase adherence for follow up appointments.
<b>Community education</b>	Lectures on healthy lifestyles and chronic disease and/or cancer prevention	Knowledge level of participants will increase and participants will learn new skills to change unhealthy behaviors
<b>Cardiac screenings</b>	Heart and vascular screenings for community-at-large	Detection of undiagnosed heart disease risk factors among participants will increase

**d) Priority 4: Maternal and Infant Health**

The weight and gestational age of a newborn infant are the most important predictors for his or her subsequent health and survival. Infants born preterm (<37 weeks) and/or at low birth weight (<2,500g or 5 lbs. 8 oz.) have a much greater risk of death and both short and long-term disability than full term infants. In 2011, black preterm and low birth weight rates remained the highest of all race/ethnic groups in Mecklenburg County. Additionally of concern, is the considerable gap between the mortality rates for white infants and infants of other races. From 2007-2011 the rate for non-Hispanic black infants (11.1 per 1,000 live births) was 3 times greater than the rate for non-Hispanic white infants (3.1). Another area for concern is the number of infant deaths caused by Accidental Suffocation. These deaths are due to unsafe sleep practices and are preventable.

**Programs, resources and intended actions to address maternal and infant health:** Novant Health Presbyterian Medical Center offers community education on healthy pregnancy and breastfeeding basics, along with courses in prepared childbirth, sibling preparation and infant care. All services are intended to increase knowledge of healthy pregnancy, risk factors related to low birth weight babies and provide parents-to-be with education and resources related to raising a healthy infant.

SIGNIFICANT HEALTH NEED		
MATERNAL AND INFANT HEALTH		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
Prepared childbirth classes	Lectures on healthy pregnancy, reducing risk factors and infant care	Knowledge level of participants will increase and participants will learn new skills and decrease risk factors

**e) Priority 5: Mental Health**

In the 2012 Behavioral Risk Factor Surveillance System (BRFSS), when asked about mental health – stress, depression and problems with emotions—almost 14% of adults said their mental health had not been good for 8-29 days in the past month. In the 2011 Youth Risk Behavioral Survey (YRBS), 30% of high school students surveyed reported feeling sad or hopeless almost every day for two weeks or more in a row to the extent they stopped doing some usual activities. Additionally, in 2011 suicide was the 10<sup>th</sup> leading cause of death for the total population in Mecklenburg County.

**Programs, resources and intended actions to address mental health:** Novant Health Presbyterian Medical Center provides community education focused on stress management, as well as community based behavioral services. All programs and services are intended to assist the community with varying needs of mental health support at times when they are needed most.

SIGNIFICANT HEALTH NEED		
MENTAL HEALTH		
COMMUNITY BENEFIT ACTIONS	PROGRAM	INTENDED OUTCOME
Community education	Mental health community partnership with Hopeway Foundation	Community collaboration will further impact to residents in need of mental health services through navigation and addressing social determinants impacting mental health outcomes

#### IV. Unaddressed health needs

Although Novant Health Presbyterian Medical Center is working to address several significant needs in the community, we are unable to impact all identified county priorities, but will support community partners as appropriate with the following known issues:

Health Needs	Local Community Resources Addressing Needs
<ul style="list-style-type: none"> <li>- <b><i>Access to care</i></b></li> <li>- <b><i>Chronic disease and disability</i></b></li> <li>- <b><i>Maternal and infant health</i></b></li> <li>- <b><i>Responsible sexual behavior</i></b></li> </ul>	<ul style="list-style-type: none"> <li>• CW Williams Health Center</li> <li>• Charlotte Community Health Clinic</li> <li>• Charlotte Volunteers in Medicine Clinic</li> <li>• Care Ring</li> <li>• CMC Biddle Point</li> <li>• CMC Elizabeth Family Practice</li> <li>• CMC Meyers Park</li> <li>• CMC North Park</li> <li>• Free Clinics of Our Town (Davidson)</li> <li>• Matthews Free Medical Clinic</li> <li>• Mecklenburg County Health Department</li> <li>• NC MedAssist</li> <li>• Lake Norman Community Health clinic</li> <li>• Physicians Reach Out (administered by Care Ring)</li> <li>• Shelter Health Services</li> <li>• Bethesda Health Center</li> </ul>
<p><b>Community resources addressing:</b></p> <ul style="list-style-type: none"> <li>- <b><i>Environmental health</i></b></li> <li>- <b><i>Injury</i></b></li> <li>- <b><i>Mental health</i></b></li> <li>- <b><i>Substance abuse</i></b></li> <li>- <b><i>Violence</i></b></li> </ul>	<ul style="list-style-type: none"> <li>• Children’s Alliance</li> <li>• Charlotte Mecklenburg Drug Free Coalition</li> <li>• Community Domestic Violence Review Team</li> <li>• Community Child Fatality Prevention and Protection Team</li> <li>• Charlotte Housing Authority</li> <li>• Homeless Services Network</li> <li>• HIV Community Task Force</li> <li>• Mecklenburg Safe Routes to School</li> <li>• MAPPR – Mecklenburg Area Project for Primary Care Research</li> <li>• Mecklenburg Food Policy Council</li> <li>• Mecklenburg Fruit &amp; Vegetable Coalition</li> <li>• MedLink of Mecklenburg</li> </ul>

## **V. Role of the board and administration**

The Novant Health Southern Piedmont Region Board of Trustees and Novant Health Presbyterian Medical Center administration are active participants in the community benefit process. Through strategic planning initiatives focused on chronic disease, community health outreach, and access to care, leadership provides direction on actions and intended impact, and serves as the approving body for the community health needs assessment and community benefit implementation plan. Administrative leaders serve on the County assessment process teams, priority setting committee and action planning team and hospital board members participate and provide influence to the community benefit plans. All members are actively involved in the priority setting discussion and outreach planning process. Additionally, community benefit reports are provided to the board and facility leadership teams throughout the calendar year for ongoing education.

## Appendix A: Healthy People 2020 Indicators

### Diabetes

- Increase the proportion of persons with diabetes whose condition has been diagnosed (Healthy People 2020; D-15).
- Increase the proportion of persons with diagnosed diabetes who receive formal education (Healthy People 2020; D-14).

### Obesity

- Increase the proportion of adults who are at a healthy weight (Healthy People 2020; NWS-8).
- Reduce the number of children and adolescents who are considered obese (Healthy People 2020; NWS-10).

### Heart Disease and Stroke

- Increase the proportion of adults who have had their blood pressure measured within the preceding 2 years and can state whether their blood pressure was normal or high (Healthy People 2020; HDS-4)
- Reduce the proportion of persons in the population with hypertension (Healthy People 2020; HDS-5)

### Cancer

- Increase the proportion of women who receive a breast cancer screening based on the most recent guidelines (Healthy People 2020; C-17).

### Infant Mortality

- Increase the proportion of pregnant women who attend a series of prepared childbirth classes (Healthy People 2020; MICH-12)

### Mental Health

- Reduce the suicide rate (Healthy People 2020; MHMD-1)
- Increase the proportion of adults with mental health disorders who receive treatment (Healthy People 2020; MHMD-9)