# Novant Health Huntersville Medical Center

**Community Benefit Implementation Plan**
**Mecklenburg County, North Carolina**
**2022-2024**

**Approved by the Novant Health Southern Piedmont Region Board of Trustees on October 19, 2022**

# Table of Contents

# I.       Introduction

Novant Health Huntersville Medical Center, in partnership with the Mecklenburg County Public Health Department, Atrium Health and One Charlotte Health Alliance established a community health needs assessment in 2022 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 to meet identified health needs.

### a) Organization Overview

Novant Health is an integrated network of hospitals, physician clinics, and outpatient facilities that delivers a seamless and convenient healthcare experience to communities in North Carolina, South Carolina, and Georgia. The Novant Health network consists of more than 1,800 physicians and over 35,000 team members who provide care at more than 800 locations, including 15 hospitals and hundreds of outpatient facilities and physician clinics. *Diversity MBA Magazine* ranked Novant Health first in the nation on its 2021 list of "Best Places for Women & Diverse Managers to Work." In 2021, Novant Health provided more than $1.1 billion in community benefit, including financial assistance and services.

### Mission

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

Our team members and physician partners strive every day to bring our mission, vision and values to life. We demonstrate this commitment to our patients in many 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 socially responsible organization, working with community agencies and organizations to make our communities better places to live and work.

**Novant Health Huntersville Medical Center (NHHMC)** is a 139-bed community hospital offering a wide range of services in emergency, maternity, surgery, pediatrics, cardiovascular, cancer and outpatient care.

### a. Our Community

**Primary and Secondary Service Areas**

The Primary Service Area for Novant Health Huntersville Medical Center is defined by the zip codes that represent at least 75% of the hospital's in-patient population as outlined below:

| Zip Code | City | County |
|---|---|---|
| 28027 | Concord | Cabarrus |
| 28164 | Stanley | Gaston |
| 28117 | Mooresville | Iredell |
| 28115 | Mooresville | Iredell |
| 28037 | Denver | Lincoln |
| 28078 | Huntersville | Mecklenburg |
| 28269 | Charlotte | Mecklenburg |
| 28031 | Cornelius | Mecklenburg |
| 28216 | Charlotte | Mecklenburg |
| 28036 | Davidson | Mecklenburg |
| 28214 | Charlotte | Mecklenburg |
| 28262 | Charlotte | Mecklenburg |

Mecklenburg County contains seven municipalities including the City of Charlotte, and the towns of Cornelius, Davidson, Huntersville, Matthews, Mint Hill and Pineville. There are 5 counties in the Novant Health Huntersville Primary Service Area (PSA): Cabarrus, Gaston, Iredell, Lincoln and Mecklenburg Counties. 54% of patients reside in the PSA of Mecklenburg County and 59% of patients reside in the Primary and Secondary Service Areas of Mecklenburg County. Most patients reside in Mecklenburg County and it represents the highest population of potentially underserved, low-income and minority individuals from the PSA. Therefore, Mecklenburg County will be the sole focus of demographic, health, and social indicators.

The Secondary Service Area covers a seven-county radius, including Cabarrus, Catawba, Gaston, Iredell, Lincoln, Mecklenburg, and Rowan Counties.

**Mecklenburg County Population: Demographics**

Mecklenburg County has a population of 1,122,276 compared to the total North Carolina population of 10,551,162.

With over 1.1 million people living in Mecklenburg, it is the second most populated county in North Carolina. The county includes six municipalities (Cornelius, Davidson, Huntersville, Matthews, Mint Hill, and Pineville) along with the City of Charlotte. Nearly 80% of residents live in Charlotte.

## Race and Ethnicity

### Mecklenburg



- Native/Alaskan/Pacific, 1%
- Two/more races, 2.6%
- Asian, 6.5%
- Hispanic, 14.1%
- White, 56.6%
- Black/African American, 33.3%

### North Carolina



- Native/Alaskan/Pacific, 1.7%
- Two/more races, 2.5%
- Asian, 3.4%
- Hispanic, 10.2%
- Black/African American, 22.3%
- White, 70.1%
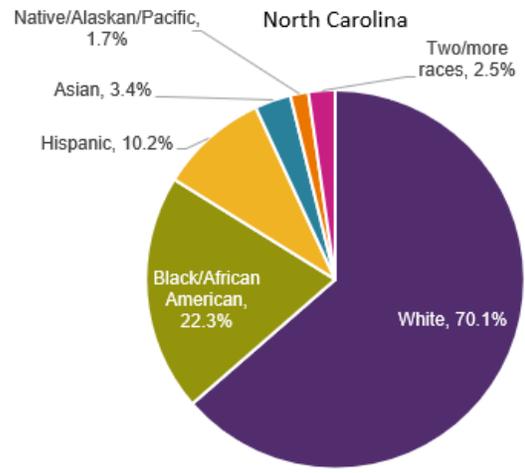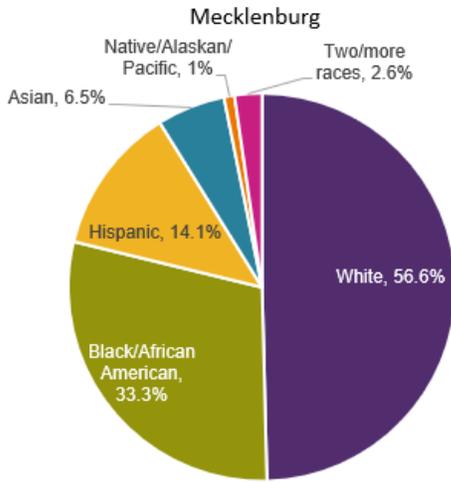
### Persons without health insurance under age 65



| Mecklenburg | North Carolina |
|-------------|----------------|
| 12.2% | 12.7% |

### Median Income



| North Carolina | Mecklenburg |
|----------------|-------------|
| $56,642 | $69,240 |

## Poverty Rate
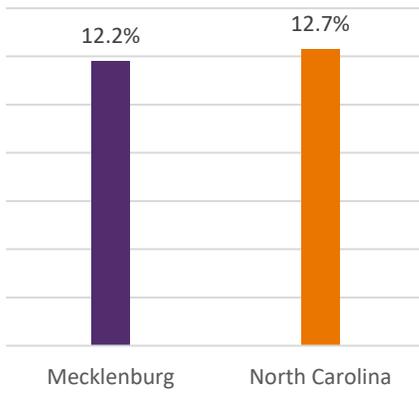
| Mecklenburg County | North Carolina |
|---|---|
| 11% | 12.9% |
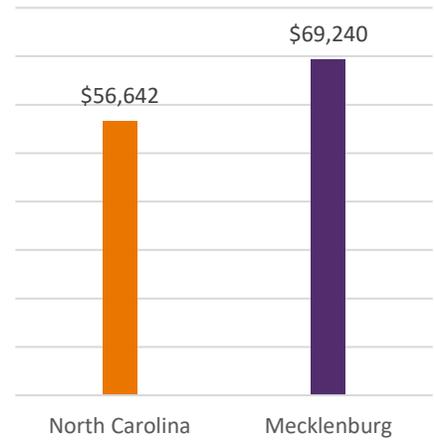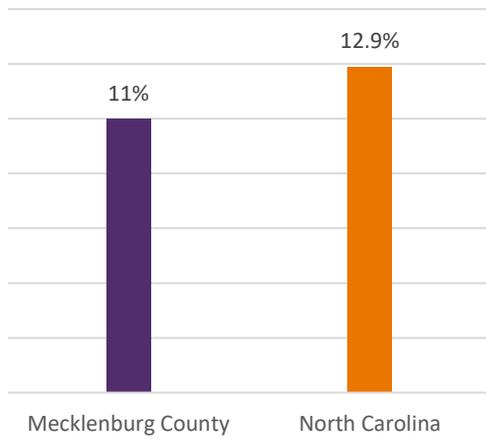
## Educational Attainment

| Mecklenburg High school graduate or higher | North Carolina High school graduate or higher | Mecklenburg Bachelor's degree or higher | North Carolina Bachelor's degree or higher |
|---|---|---|---|
| 90.5% | 88.5% | 45.8% | 32% |
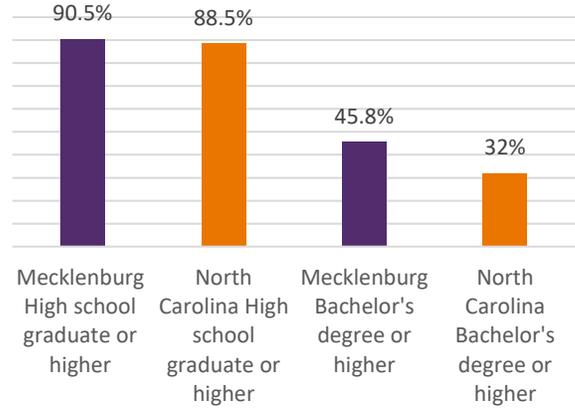
Source for above graphs: US Census Bureau

| Demographics | Mecklenburg County | | North Carolina | |
|---|---|---|---|---|
| | Population | Percentage | Populations | Percentage |
| Persons Under 5 Years | 72,857 | 6.7% | 605,299 | 5.8% |
| Persons Under 18 Years | 257,739 | 23.5% | 2,301,596 | 22.2% |
| Person 65 Years & Over | 122,780 | 11.2% | 1,688,354 | 16.3% |
| Female Persons | 568,717 | 51.9% | 5,333,560 | 51.4% |

Sources: ACS US Census Bureau 2020 Mecklenburg, ACS US Census Bureau

| Length of Life | Top U.S. Performers | North Carolina | Mecklenburg County |
|---|---|---|---|
| Years of **potential life lost** before age 75 per 100,000 population (age-adjusted). | 5,600 | 8,000 | 6,100 |
| **Clinical Care** | **Top U.S. Performers** | **North Carolina** | **Mecklenburg County** |
| Ratio of population to **primary care physicians** | 1,010:1 | 1,400:1 | 1,130:1 |
| Ratio of population to **dentists** | 1,210:1 | 1,710:1 | 1,430:1 |
| Ratio of pop. to **mental health providers** | 250:1 | 360:1 | 300:1 |
| **Physical Environmental** | **Top U.S. Performers** | **North Carolina** | **Mecklenburg County** |
| **Air Pollution** – Particulate Matter (micrograms per cubic meter) | 5.9 | 7.5 | 9.0 |
| Percentage of households with overcrowding, high costs, lack of kitchen, or lack of plumbing | 16% | 15% | 13% |

**Mecklenburg County Population: Health Indicators**
Mecklenburg County's leading causes of death in 2019 were cancer and heart disease. NHHMC will consider health indicators such as leading causes of death for the Mecklenburg County population but will also consider how to impact root causes with analysis of social determinants of health, social risk, and social needs.

| Rank | Leading Causes of Death in Mecklenburg County in 2019 | Number | % |
|---|---|---|---|
| 1 | Cancer | 1359 | 21.0 |
| 2 | Diseases of heart | 1235 | 19.1 |
| 3 | Cerebrovascular diseases | 371 | 5.7 |
| 4 | Alzheimer's disease | 347 | 5.4 |
| 5 | All other unintentional injuries | 322 | 5.0 |
| 6 | Chronic lower respiratory diseases | 251 | 3.9 |
| 7 | Diabetes mellitus | 214 | 3.3 |
| 8 | Nephritis, nephrotic syndrome and nephrosis | 145 | 2.2 |
| 9 | Assault (homicide) | 105 | 1.6 |
| 10 | Motor vehicle injuries | 98 | 1.5 |
| | All other causes (Residual) | 2012 | 31.3 |
| | Total Deaths -- All Causes | 6459 | 100.0 |

Source: State Center for Health Statistics, North Carolina

## II.    Prioritized Health Needs

**Identified Significant Health Needs**
The nine topic areas included in the 2017-18 CHA were selected by reviewing the data and validated using a survey tool that was administered to community leaders and representatives of key health agencies in the county. The survey included 15 health topics for consideration and asked respondents to rank the issues in order of importance. In 2022, the same top nine issues were identified as those included in the 2017 CHA and a new category informed by the data, was added. Emerging Health Issues characterizes the impact of emerging or re-emerging health conditions that pose major public threats, such as COVID-19. Health disparities and social determinants of health are not called out specifically as health issues but rather incorporated within each. In alphabetical order, the 10 health issues are:

1. Access to care
2. Chronic disease prevention
3. Emerging health issues
4. Healthy environment
5. Healthy pregnancy
6. HIV and other STIs
7. Injury Prevention
8. Mental health
9. Substance use disorder
10. Violence prevention

*a)* **County prioritization**

Consideration of these topic areas—and the data alongside community input--resulted in the following top four priority health issues for MCPH:

1. Mental Health
2. Access to Care
3. Chronic Disease

*b)* **Facility prioritization**

In addition to the primary and secondary data, Novant Health Huntersville Medical Center reviewed the top five diagnosis codes for inpatient and outpatient hospital emergency department visits.

Novant Health Huntersville Medical Center Emergency Department
Top 5 Diagnoses July 2021- June 2022

| Inpatient Diagnosis | Volume | Outpatient Diagnosis | Volume |
|---|---|---|---|
| Covid-19 | 530 | Covid- 19 | 1858 |
| Sepsis, unspecified organism | 309 | Other chest pain | 1854 |
| Hypertensive heart disease with heart failure | 121 | Syncope and collapse | 602 |
| Hypertensive heart and chronic kidney disease with heart failure and stage 1 thru stage 4 chronic kidney disease or unspecified chronic kidney disease | 120 | Headache, unspecified | 563 |
| Non ST elevation (NSTEMI) myocardial infection | 115 | Dizziness and giddiness | 494 |

The top 5 diagnoses from July 2021 to June 2022 were greatly impacted by the Covid-19 Pandemic in the outpatient and inpatient settings. As a result of Covid-19 and encouraging virtual visits for patient

safety, when possible, the inpatient diagnosis trend was more serious diagnoses like heart and kidney failures. Outpatient trending diagnoses were severe symptoms and side effects of Covid-19.

Upon a comprehensive review of the primary and secondary data and NHHMC's ED top 5 diagnosis codes, the Novant Health Huntersville 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 significant health priorities for Novant Health Huntersville Medical Center:

1. Mental health
2. Access to care
3. Chronic disease
4. Violence prevention

## III.    Addressing needs

Novant Health Huntersville Medical Center is committed to working to address each of its prioritized areas of need through resource allocation and support of the following programs and actions:

| Priority Need: | Program / Initiative: | Action: | Intended Outcome: |
|---|---|---|---|
| **Mental Health** | Mental Health TIC/Resiliency<br><br>Training/Screenings<br><br>Investment | • Provide information and training to individuals in various sectors including nonprofit, faith, and education communities, to include our own teams<br>• Support aligned community organizations and events | • Increase general mental health awareness, the impact of trauma, and provision of tools and/or skills to build resiliency<br>• Increase individual's ability to access resources, and the number of individuals connected to appropriate treatment and/or services |
| **Access to Care** | Education and Health Screenings<br><br>Mobile Outreach<br><br>Investment | • Host health education and screening events and facilitate referrals to care and/or resources<br>• Host childhood immunizations and health assessment events via mobile outreach program<br>• Support aligned community organizations and events | • Increased number of community stakeholders connected to a primary medical home and appropriate care |
| **Chronic Disease** | Wellness Education<br><br>Health Screenings/ Resources<br><br>Investment | • Wellness Webinars and speaker's bureau program<br>• Host health and SDoH screenings<br>• Provide related referrals, assessment of resources and food insecurity support<br>• Support aligned community organizations and events | • Increased access to health resources and screenings<br>• Increased awareness of health risks and prevention tools/methods |
| **Violence Prevention** | Education<br><br>Public awareness<br><br>Investment | • Wellness Webinars and speaker's bureau program<br>• Public safety and trauma programs with community partners<br>• Collaboration with community partners, board affiliations, and committees<br>• Support aligned community organizations and events | • Increased awareness of violence prevention tools/methods and resources |

Again, NHHMC will focus resource allocation on these prioritized needs based on careful consideration of estimated feasibility and effectiveness of possible interventions. While NHHMC will not prioritize the remaining significant health needs (listed above in Section II), it will support and collaborate with community partners as appropriate for the purpose of improving outcomes for identified needs that are better aligned with their scope of service.

In addition to the programs and services offered to the community through Novant Health Huntersville Medical Center, there are various existing community assets available throughout the Mecklenburg County community that have additional programs and resources tailored to meet all the identified health needs. The following is a list of valued community agencies that address those prioritized and non-prioritized needs:

| Identified Significant Health Needs | Local Community Resources Addressing Needs |
|---|---|
| • Access to care<br>• Chronic disease prevention<br>• HIV & other STIs<br>• Healthy pregnancy | Mecklenburg County Health Department, One Charlotte Health Alliance, Charlotte Community Health Clinic, Care Ring, Center for Prevention Services, RAIN, CW Community Health Center, DeAngelo Williams Foundation, Carolina Breast Friends, Claire's Army, Colon Cancer Coalition, Healthy Charlotte Alliance, Heartbright, Hospitality House, Madelyn's Fund, MS Society, LLS, Zero End Prostate, Matthews Free Medical Clinic, Bright Blessings |
| • Emerging health issues (outbreaks of infectious diseases that pose major public health threats, such as COVID-19 and Monkey Pox) | Mecklenburg County Health Department, One Charlotte Health Alliance |
| • Healthy environment (including pollution, clean water, poverty, housing, and food access)<br>• Violence prevention<br>• Injury prevention | Heal Charlotte, Second Harvest, Loaves and Fishes, Catawba Riverkeepers, Catawba Lands Conservancy, Roof Above, Sustain Charlotte, Pat's Place, Shelter Health Services, Safe Alliance, Rebuilding Together, The Bulb, YWCA, Angels and Sparrows, Habitat for Humanity of Greater Matthews, Common Heart Food Pantry, Community Shelter of Union County |
| • Mental health<br>• Substance use disorder | Charlotte Rescue Mission, Crisis Assistance Ministry, Mental Health America, Living Waters, RAIN, Dilworth Center, Center for Prevention Services, Lake Norman Community Medical Clinic |

**For a full list of community resources, visit www.novanthealth.org/mycommunity.**

## IV.    Role of the board and administration

The Novant Health Southern Piedmont Region Board of Trustees and Novant Health Huntersville 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 on 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.

## V.    Appendix:

| Steering Committee for Mecklenburg County CHA |
|:---:|
| Agency |
| Atrium Health |
| Mecklenburg County Public Health* |
| Novant Health |
| One Charlotte Health Alliance |

- *Representative of a state, local, tribal, or regional governmental public health department (or equivalent department or agency)
- For a full list of agencies involved in the CHA process, including those representing underserved, low-income, and minority populations, please see the MCPH 2022 CHA report.