



Novant Health Thomasville Medical Center

Community Health Needs Assessment

Davidson County, North Carolina

2022-2024

Approved by the Novant Health Thomasville Medical Center Board of Trustees on October 18, 2022

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I. Introduction

Novant Health Thomasville Medical Center, in partnership with the Davidson County Health Department and Atrium Wake Forest Baptist Health Lexington Medical Center, conducted community health needs assessment in 2021 to identify the most pressing health needs in our community. Novant Health Thomasville 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 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. For example, 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 Thomasville Medical Center (NHTMC) is a 146-bed hospital offering a wide range of inpatient and outpatient services, birthing rooms and an emergency department.

b) Our Defined Community

Primary and Secondary Service Areas

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

Primary Service Area		
Zip Code	City	County
27360	Thomasville	Davidson
27292	Lexington	Davidson
27295	Lexington	Davidson
27239	Denton	Davidson
27263	High Point	Guilford
27370	Trinity	Randolph

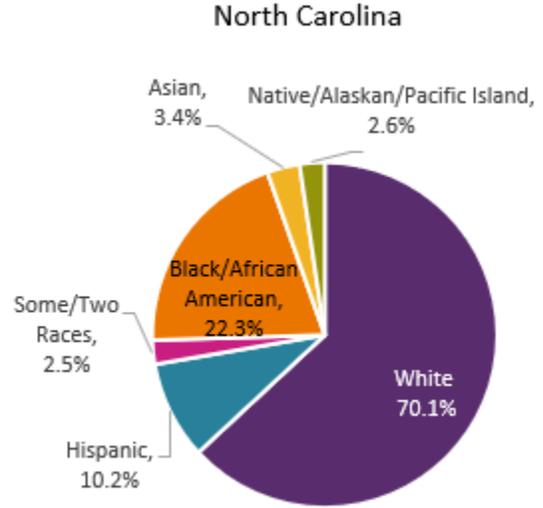
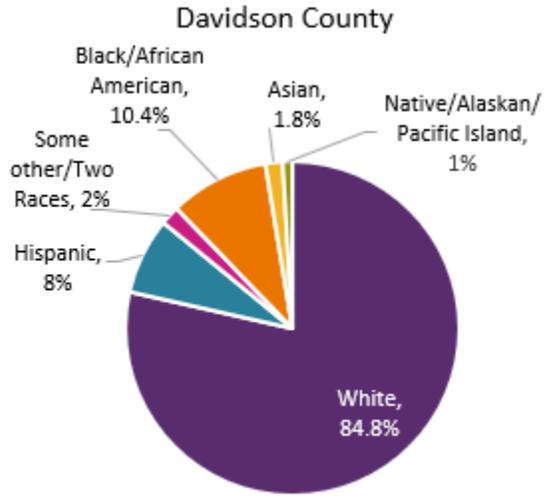
There are three counties in the Novant Health Thomasville Medical Center Primary Service Area (PSA): Davidson, Guilford, and Randolph Counties. 69% of patients reside in the PSA of Davidson County, while 71% of patients reside in the Primary and Secondary Service Areas of Davidson County. Most patients reside in Davidson County and it represents the highest population of potentially underserved, low-income, and minority individuals from the Primary Service Area. Therefore, Davidson County will be the sole focus of demographic, health, and social indicators.

The Secondary Service Area covers a 16-county radius, including Alamance, Cabarrus, Davidson, Davie, Forsyth, Guilford, Mecklenburg, Nash, Randolph, Rockingham, Rowan, Stanly, Stokes, Surry, Watauga, and Yadkin Counties.

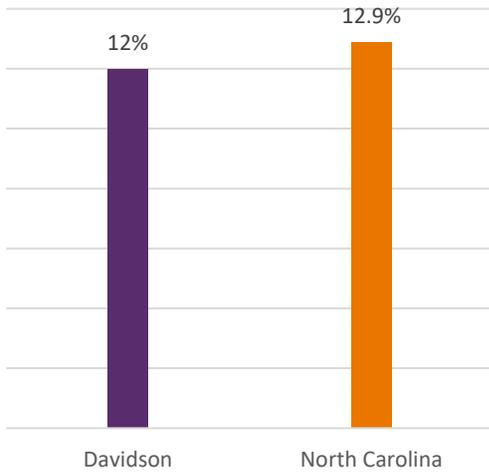
Davidson County Population: Demographics

Davidson County includes Thomasville, the most populated city, and Lexington, the County seat. It has a population of 170,637 compared to the total North Carolina population of 10,551,162.

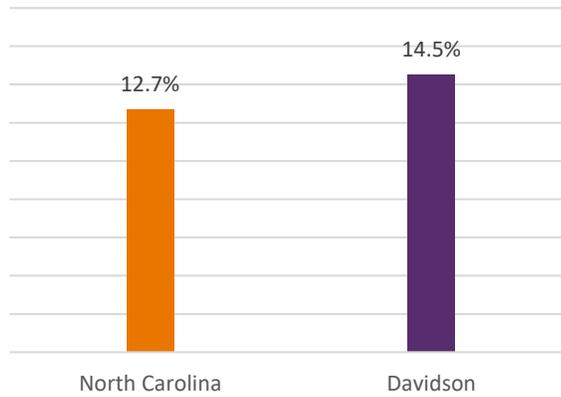
Race and Ethnicity

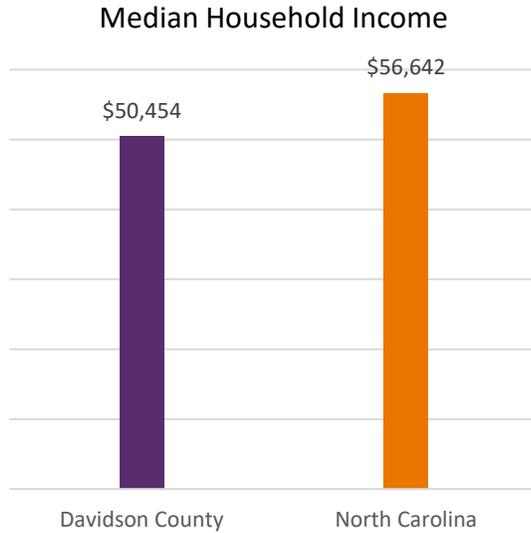
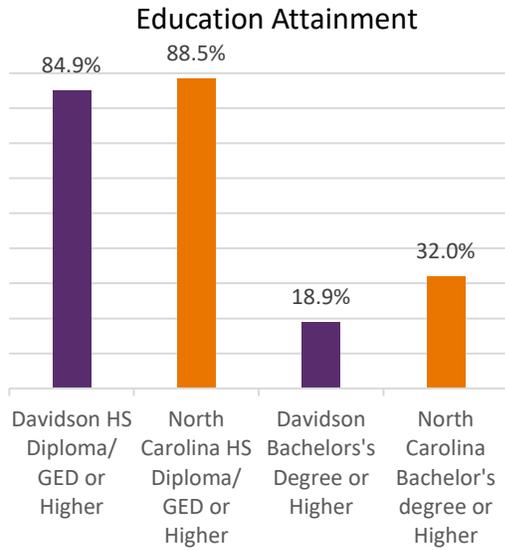


Poverty Rates



Persons without health insurance under age 65





Source for above graphs: U.S. Census Bureau QuickFacts: United States

Demographics	Davidson County		North Carolina	
	Population	Percentage	Population	Percentage
Persons Under 5 Years	9,113	5.5%	605,299	5.8%
Persons Under 18 Years	36,729	22%	2,301,596	22.2%
Person 65 Years & Over	30,238	18.1%	1,688,354	16.3%
Female Persons	85,392	51.2%	5,333,560	51.4%

Sources: US Census Bureau North Carolina, US Census Bureau Davidson

Length of Life	Top U.S. Performers	North Carolina	Davidson County
Years of potential life lost before age 75 per 100,000 population (age-adjusted).	5,600	8,000	9,600
Clinical Care	Top U.S. Performers	North Carolina	Davidson County
Ratio of population to primary care physicians	1,010:1	1,400:1	3,810:1
Ratio of population to dentists	1,210:1	1,710:1	4,340:1
Ratio of pop. to mental health providers	250:1	360:1	920:1
Physical Environmental	Top U.S. Performers	North Carolina	Davidson County
Air Pollution – Particulate Matter (micrograms per cubic meter)	5.9	7.5	9.3
Percentage of households with overcrowding, high costs, lack of kitchen, or lack of plumbing	8.75%	15%	13.2%

Source: County Health Rankings & Roadmaps

Davidson County Population: Health Indicators

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

Leading Causes of Death in Davidson County in 2019			
Rank	Causes of Death	Number	%
1	Cancer	420	22.4
2	Diseases of heart	360	19.2
3	Chronic lower respiratory diseases	153	8.4
4	Alzheimer's disease	126	6.73
5	Cerebrovascular disease	94	5.0
6	Other Unintended injuries	86	4.5
7	Diabetes mellitus	60	2.8
8	Nephritis, nephrotic syndrome, and nephrosis	38	2.4
9	Pneumonia and Influenza	43	2.1
10	Motor Vehicle Injuries	19	2.1
	All other causes (Residual)	487	24.4
	Total Deaths – All Causes	1,871	100.0

Source: [North Carolina Department of Health and Human Services](#)

Davidson County Population: Social Indicators

Social Determinants of Health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health functioning, and quality-of-life outcomes and risks.

Social Risk is adverse social conditions associated with poor health outcomes, such as food insecurity and housing instability.

Social Needs are the nonclinical needs that individuals identify as essential to their well-being.

Source for definitions: Healthy People 2030, Health Affairs, The Milbank Quarterly

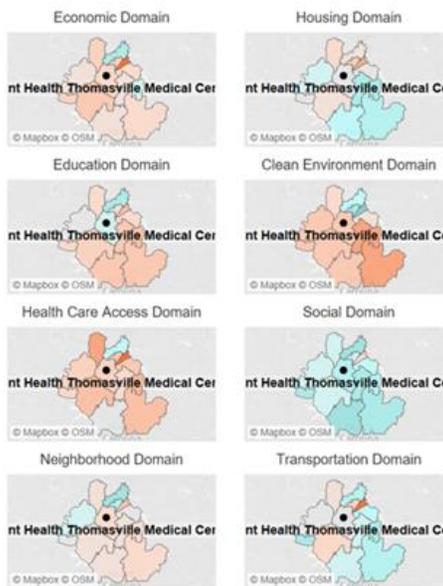
Domains and Components: Novant Health Thomasville Medical Center

Each of these maps illustrates the regional variation in the overall VVI, the eight specific domain vulnerabilities, and three selected components that will be referenced in the clinical outcomes and utilization section.



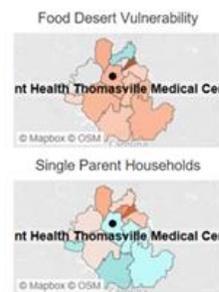
Vizient Vulnerability Index
 Low High
 -3,000 3,000

Data source: CDB distinct patients of any age seen in this hospital in any setting 2019-2020, identified by zip code. Zip codes representing less than 0.5% of all hospital patients are omitted from map.



In addition to the domains, two specific components were identified for inclusion in this analysis due to their reliable relationships with specific metrics across member hospitals.

In particular, the Food Desert component shows a relationship with Diabetes metrics, while the Single Parents component shows a relationship with ED metrics and Maternal Care metrics.



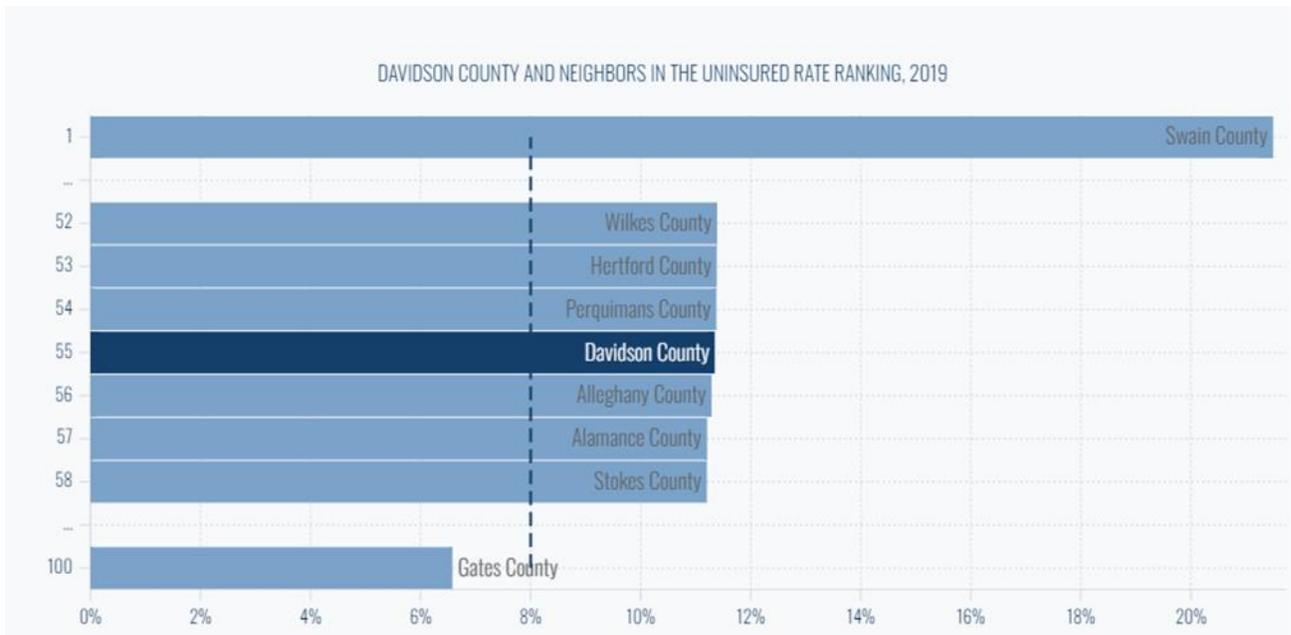
vizient.

According to the Vizient Vulnerability Index (screenshot provided above) released in January 2022, patients admitted to Thomasville Medical Center experience the most profound social risks if they live in 27260, 27107, 27292, or 27293. These zip codes experience disproportionately high social risks when compared to their counterpart neighborhoods. Areas of particular concern include access to healthcare, poverty, access to early childhood education, and food insecurity.

When segmented by race and ethnicity, Asian and Pacific Islander patients tend to skew more vulnerable than other groups.

Access to Care

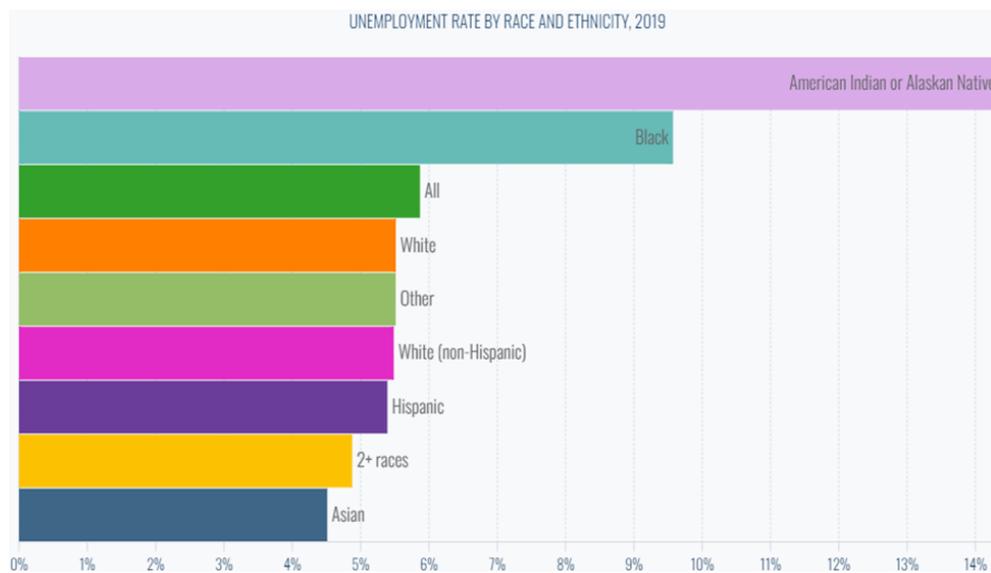
The rate of uninsured individuals in Davidson is slowly increasing compared to the state’s rate of 11.3%. The dotted line in the graphs below shows the aim targets for Davidson County by 2030. An increase in Davidson County members having health insurance will allow more of the community’s needs to be met, although Davidson County is in line with the NC rate.



Source: Healthy Communities NC

Workforce Development

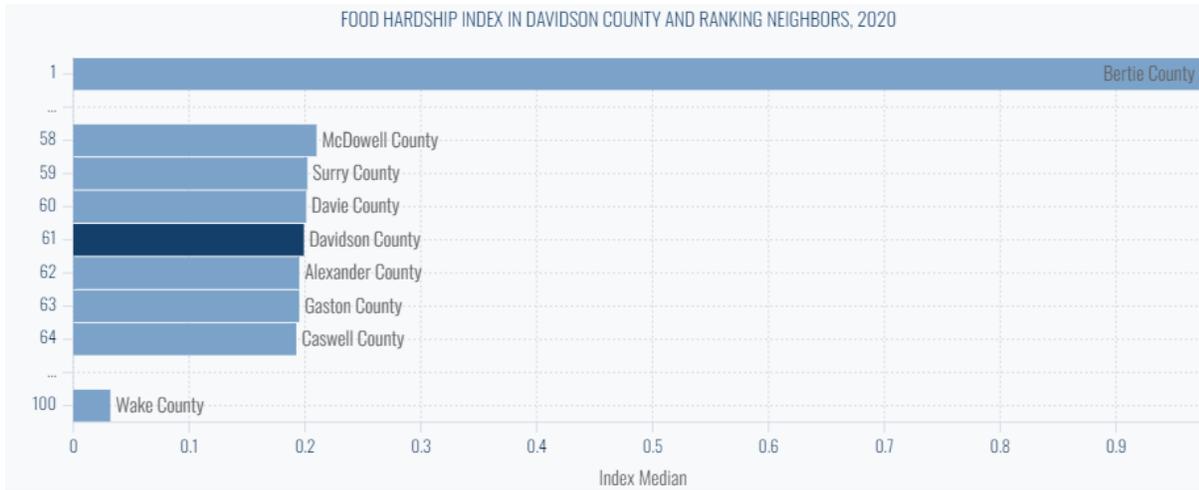
Overall unemployment rates in Davidson County are at 6.1% compared to the North Carolina average of 7%. The graph below shows that American Indians and Black Americans have significantly worse outcomes for unemployment rates compared to other races and ethnicities. Having the financial means to afford health services, urgent health needs, and prescriptions is critical to addressing health needs.



Source: Healthy Communities NC

Food Hardship Challenges

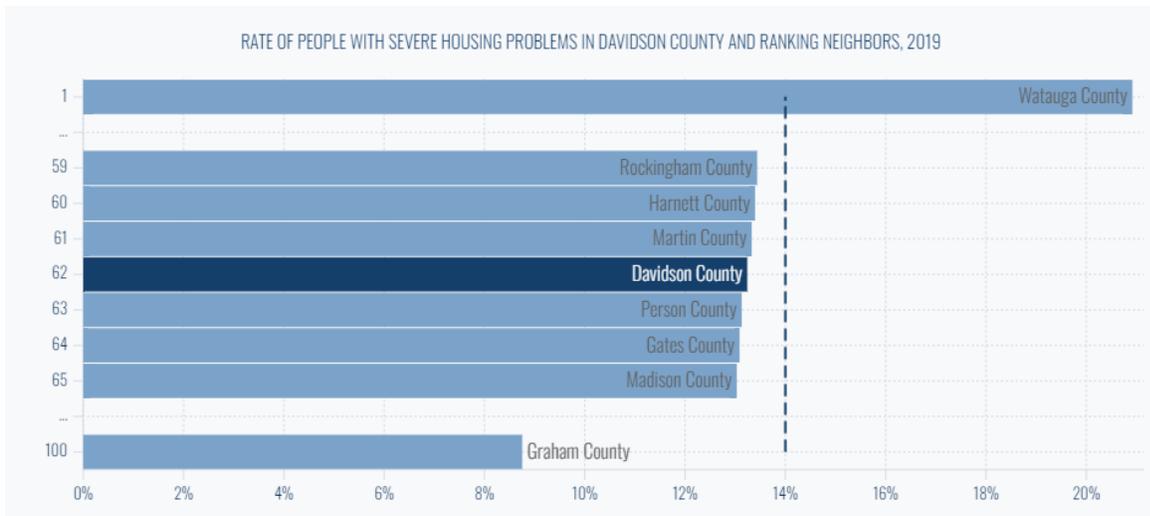
Davidson is currently ranked 61st on the food hardship scale. There is progress being made, moving from 66th in 2015, but there continues to be an opportunity to address food insecurity.



Source: Healthy Communities NC

Housing Hardship

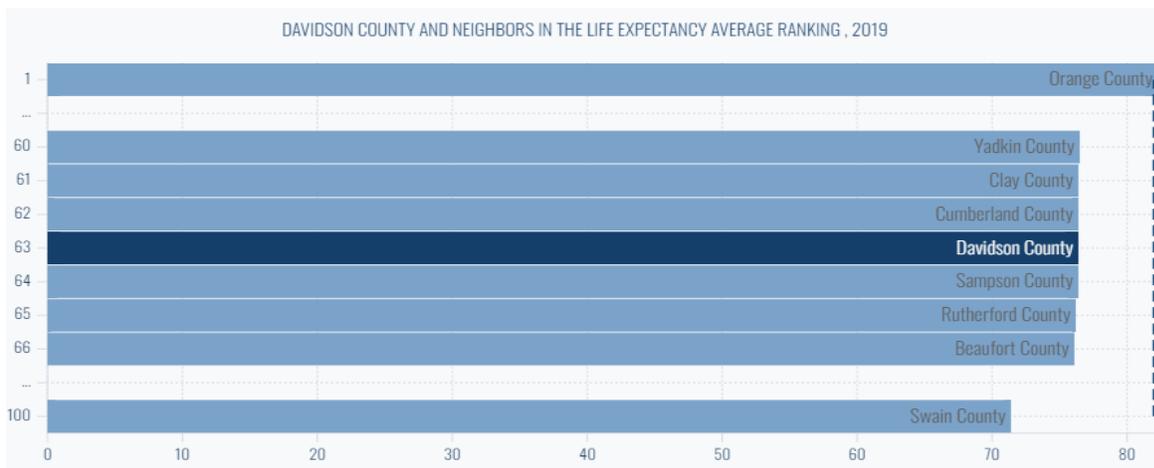
Davidson County has been focused on addressing the housing issues in the community and is currently exceeding its 2030 target. 13.2% of Davidson County's Population is spending more than 30% of its income on rent alone, compared to North Carolina where a total of almost 50% of the population is spending 30% of income on rent.



Source: Healthy Communities NC

Life expectancy

Life expectancy in Davidson County has taken a slight dip to 76 compared to other years at 78. This community is aiming to bring its poverty down to 10.6% (from 12 %) by 2030, by recent statistics cited by the US Census Bureau. Addressing social determinants of health should have a significant impact on improving life expectancy and poverty amongst the communities in Davidson.



Source: Healthy Communities NC

II. Assessment process

COVID-19 impact on the CHNA assessment process:

The COVID-19 pandemic has been a global public health emergency, requiring the diversion of significant resources from hospital systems, public health departments, clinical healthcare providers, community organizations, and local, state, and national government agencies. In each of the communities we serve, Novant Health has worked tirelessly to keep our patients, team members and community members safe and healthy, delivering free/accessible COVID-19 education, masks, and vaccines.

The pandemic further exposed health inequities, and other problems associated with Social Determinants of Health, including those experienced by the medically underserved, low-income, and minority populations. In its COVID-19 response, Novant Health conducted targeted outreach and education to build trust with—and increase access for—these particularly vulnerable communities and individuals, as well as with the community organizations that serve them.

As it relates to the CHNA process, significant COVID-19 impact and interruption were in the areas of survey distribution and input solicitation as well as the availability of collaborating community partners to be involved in the planning and prioritization process. Every effort was made to engage with and solicit input from individuals and organizations serving or representing the interests of medically underserved, low-income, and minority populations, but these efforts were sometimes hindered by limited resources and capacity because of COVID-19 pandemic response and heightened safety precautions. While this CHNA cycle process was impacted by COVID-19, Novant Health will continue to inclusively incorporate and serve the interests of all community members in our community response and community benefit work, including those of the medically underserved, low-income, and minority populations.

The following are excerpts and findings from the **2021 Davidson County Community Health Needs Assessment**.

To access the full report, please visit: [2021 Davidson County Community Health Needs Assessment](#)

a) Collaborative community partners

Local Health Departments in North Carolina are required to conduct a comprehensive Community Health Assessment (CHA) every four years to maintain local health department accreditation. As part of the Patient Protection and Affordable Care Act of 2010, not-for-profit hospitals are also now required to conduct a Community Health Needs Assessment (CHNA) once every three years.

The 2021 CHNA process involved a smaller leadership team than in previous years, due to the Davidson County Healthy Community Coalition not currently being active and the COVID-19 pandemic making direct community engagement unrelated to the pandemic nearly impossible.

In Davidson County, the 2021 CHNA was led in collaboration with Novant Health Thomasville Medical Center (NHTMC) and Atrium Wake Forest Baptist Health Lexington Medical Center (LMC). Each organization was represented by 2 individuals, totaling 6 members of the leadership team. The Leadership Team consisted of the Public Health Strategist and Health Director representing the health department, the manager of Special and Community Events and NHTMC hospital President representing NHTMC, and the Manger of Chaplaincy and Clinical Ministries and LMC hospital President representing LMC.

No services were contracted out for the production of this CHNA. The CHNA questionnaire was drafted and finalized by the leadership team, and the Public Health Strategist at the Davidson County Health Department completed the primary data analysis. As part of this assessment process, special attention was paid to the needs of the underserved. The process emphasized collaboration and distribution of the survey among community partners to improve the overall health of the community.

b) Solicitation

The CHNA, which is both a process and a document, investigates and describes the current health status of the community, what has changed since the last assessment, and what indicators needs to change to improve the health of the community. The *process* involves the collection and analysis of a large range of data, including demographic, socioeconomic and health statistics, environmental data, hospital data, and professional and public opinion. The completed CHNA serves as the basis for prioritizing the community's health needs and culminates in planning to meet those needs.

The 2021 Davidson County Community Health Needs Assessment solicited input from persons who represent the broad interests of Davidson County, though broad distribution via various organizations and community groups across the county, including those who represent the interests of members of the medically underserved, low-income, and minority populations. The demographic profile of survey respondents is represented in the table in the following section.

c) Data collection and analysis

Primary data

The CHNA is a community collaborative with the common goal of bringing to light the gaps and areas of need as they related to the overall health of Davidson County residents. Initiated in June 2021, the

CHNA process began swiftly and the Community Health Needs Survey was distributed widely beginning on September 10, 2021. The CHNA Leadership Team worked to carefully craft a questionnaire that would capture a broad range of information without being a burden to the survey respondent. The questionnaire consisted of 32 required questions and concluded with a comment box for respondents to provide additional thoughts. A CHNA toolkit was provided to organizations and community groups across the county with many opting to promote the survey on various social media platforms and organizational websites. The survey was open for 24 days in which 791 responses were received. Due to heightened COVID-19 restrictions small group listening sessions were not held in order to protect the safety of individuals and concerns regarding the productivity of virtual sessions. On October 28, 2021, the results of the Community Health Needs Survey were presented to the CHNA Leadership Team who then unanimously voted to identify the health priorities. In the weeks and month's following the CHNA report was developed as well as an accompanying presentation that was introduced to key community stakeholders in February 2022.

Demographic data collected from the sample of survey participants is illustrated below:

Survey Demographic Category	2021 Survey Participants		County Population (ACS 2020)		
	Number	Percent	Demographics	Number	Percent
Total Participants	791	100%	Total Population	166, 837	100%
Gender			Gender		
Male	25.92%		Male	81,445	48.8%
Female	71.55%		Female	85,392	51.2%
Other Gender	0.25%				
Race/Ethnicity			Race/Ethnicity		
White/Caucasian	74.97%		White/Caucasian	132, 6623	79.5%
African American/Black	6.95%		African American/Black	15,391	9.2%
Of Hispanic or Latino Origin	4.68%		Of Hispanic or Latino Origin	12,265	7.4%
Asian or Pacific Islander	0.63%		Asian	2,523	1.5%
American Indian and Alaska Native	0.76%		American Indian and Alaska Native	250	0.1%
Other Race	1.01%		Two or More Races	4,873	2.9%
			Some other race	118	0.1%
			Native Hawaiian or Pacific Islander	13	0%
Age			Age		
			Under 5 years	9,113	5.5%
			5 to 9 years	10,630	6.4%
			10 to 14 years	10,153	6.1%
Under 18	1.77%		15 to 19 years	10,138	6.1%
18-24	4.17%		20 to 24 years	9,328	5.6%
25-34	10.87%		25 to 34 years	19,481	11.7%
35-44	17.83%		35 to 44 years	19,532	11.7%
45-54	19.85%		45 to 54 years	24,299	14.6%
55-64	21.49%		55 to 59 years	13,020	7.8%
			60 to 64 years	10,905	6.5%
			65 to 74	17,569	10.5%
			75 to 84	9,531	5.7%
			>85	3,138	1.9%
Education			Education (45 to 64 years old)		
12 th grade or less, no diploma	6.07%				
High School graduate or GED	12.52%		High School graduate or higher	41,615	86.3%
Some college, but no degree	18.46%				
Associate degree or vocational	19.47%				

Bachelor's Degree	26.04%	Bachelor's Degree or higher	8,975	18.6%
Graduate Professional degree	17.45%			
Household Income		Household Income		
		\$1 to\$ 9,999	764	1.4%
Less than \$15,000	5.69%	\$10,000 to \$14,999	1,845	3.4%
Between \$15,000 and \$29,000	12.52%	\$15,000 to \$24,999	7,576	13.9
		\$25, 000 to 34,999	10,681	19.6%
Between \$30,000 and \$49,999	19.97%	\$35,000 to \$49,000	13,318	24.5%
Between \$50,000 and \$74,999	21.49%	\$50,000 to \$64,999	8,347	15.3%
		\$65,000 to \$74, 999	3,533	6.5%
Between \$75,000 and \$99,000	16.31%	\$75,000 to \$99,999	4,039	7.4%
Between \$100,000 and \$150,000	15.68%	\$100,000 or more	4,325	7.9%
Over \$150,000	8.34%			

Source: US Census Bureau Davidson County Income, US Census Davidson County Demographics, 2021 Davidson County Community Health Needs Assessment

Secondary data

In addition to the primary data collected through the survey, secondary data was collected from state and national sources, including: the American Community Survey from the Unites States Census Bureau, the Behavioral Risk Factors Surveillance System (BRFSS) from the Centers for Disease Control and Prevention (CDC), the North Carolina Center for Health Statistics, and County Health Rankings from the Robert Wood Johnson Foundation.

III. Identification and prioritization of health needs

a) Identified significant health needs

From participant responses, key data points included:

Identified health issues in Davidson County ranked by survey respondents are as follows:

1. Substance abuse (55.75%)
2. Obesity (52.21%)
3. Mental Health (49.43%)
4. Diabetes (40.71%)
5. Cancer (24.27%)
6. Alcoholism (21.11%)
7. Tobacco (17.95%)
8. Infectious Diseases (16.69%)
9. Other Chronic Diseases (9.48%)
10. Sexually Transmitted Diseases (4.55%)

11. Lung Disease (3.92%)
12. Pediatric Health (3.92%)

Health behaviors prioritized by survey respondents as topics needing more education in the community are as follows:

1. Drug use (52.47%)
2. Preventative Health Care (47.28%)
3. Stress Management (36.54%)
4. Nutrition (32.74%)
5. Immunizations (29.84%)
6. Tobacco/Alcohol Use (26.80%)
7. Suicide Prevention (21.74%)
8. Exercise (21.49%)
9. Safe Driving (13.91%)
10. Emergency Preparedness (11.25%)
11. Oral Health (5.94%)

The CHNA data team identified these issues as the significant community health needs based on survey response rankings and supporting data:

1. Substance Abuse
2. Obesity
3. Mental Health
4. Diabetes
5. Cancer
6. Alcoholism
7. Tobacco
8. Infectious Diseases
9. Other Chronic Diseases
10. Sexually Transmitted Diseases
11. Lung Disease
12. Pediatric Health

b) Analysis and prioritization

In October 2021, the CHNA Leadership Team reviewed the primary data, secondary data, and compared the information to the 2018 CHNA priorities and supporting data. The team also looked at the findings with consideration of the impact that the COVID-19 pandemic has had on the community in all facets. It was unanimously decided that the priorities should remain substance misuse, mental health, and chronic disease.

The following were established in 2021 as Davidson County's health priorities for the 2022-2024 CHNA cycle:

- Substance Misuse
- Mental Health
- Chronic Disease

Further information on prioritized health outcomes is summarized as follows:

- **Substance misuse:** In 2017, NC DHHS released the North Carolina Opioid Action Plan (OAP), a detailed plan to combat the opioid crisis. Since 2017, the OAP has been updated two times and now the 2021 Opioid and Substance Use Action Plan (OSUAP) captures polysubstance use and encompasses a greater focus on equity and lived experiences. The OSUAP outlines strategies that are proven to be effective and focus on equity, prevention, harm reduction, and connection. The action plan also identifies metrics that allow for tracking progress and transparency of data. Routine updates from local health department and other agencies across North Carolina allow for progress to be measured at the county level and reflected in a dashboard on the NC DHHS website.

The 2021 CHNA asked participants, “If you or someone you know was experiencing substance misuse issues or needed mental health treatment, where would you go or who would you ask for help?” The responses were as follows:

- I don’t know (30.72%)
 - Hospital Emergency Department (25.41%)
 - Family Services of Davidson County (21.49%)
 - Daymark (20.73%)
 - Place of Worship (15.3%)
 - Health Department (14.54%)
- **Mental health:** Mental health has been identified as a top priority in the Davidson County CHNA since approximately 2008. The 2021 CHNA asked participants, “If you or someone you know was experiencing substance misuse issues or needed mental health treatment, where would you go or who would you ask for help?” The responses were as follows:
 - I don’t know (30.72%)
 - Hospital Emergency Department (25.41%)
 - Family Services of Davidson County (21.49%)
 - Daymark (20.73%)
 - Place of Worship (15.3%)
 - Health Department (14.54%)

The Behavioral Risk Factor Surveillance System (BRFSS) survey asks individuals to think back over the last 30 days and to report how many days, out of the last 30 days, that they experienced poor mental health. The following data represents responses from Alleghany, Ashe, Davidson, Davie, Forsyth, Stokes, Surry, Watauga, Wilkes, and Yadkin counties: 5.7% reported 1-2 days; 8.3% reported 3-7 days; 5.5% reported 8+ days. In 2021, Mental Health America’s “Ranking the States,” ranked North Carolina 41 out of 51 overall when looking at 15 different measures

directly related to mental health. A ranking of 41 indicates that North Carolina has a high prevalence of mental illness and a low rate of access to care when compared to other states.

- **Chronic disease:** Diabetes is one of the leading causes of death in Davidson County. Rates of diabetes related death have consistently increased over time, not only in Davidson County but across North Carolina. Data from the US Diabetes Surveillance System shows that incidence of diabetes is higher in Davidson County than in neighboring Randolph County. This surveillance data also indicates that there is a higher prevalence of diabetes among men in Davidson County than women.

Cancer is the number one leading cause of death in Davidson County. According to data from the NC Central Cancer Registry, female breast cancer is the most frequently diagnosed form of cancer in Davidson County, where as lung cancer has the highest mortality rate of cancer among residents of Davidson County. Cancer and diseases of the heart are the two leading causes of death among all individuals in Davidson County. African Americans living in Davidson County have a higher incidence of chronic disease related deaths, specifically, heart disease, diabetes, cerebrovascular, and kidney disease when compared to other races.

Davidson County CHNA participants were asked the following question about chronic conditions: “Have you ever been told by a doctor or other licensed health care professional that you have any of the following conditions?” The responses were as follows:

- High blood pressure (37.42%)
- High Cholesterol (30.72%)
- Depression or Anxiety (28.7%)
- Obesity (28.57%)
- Diabetes, not during pregnancy (12.9%)
- Cancer (8.09%)
- Heart Disease (7.59%)
- Lung Disease (COPD/Emphysema) (4.17%)
- None of the above (29.46%)

Of the individuals who responded that they had a chronic condition, 51.9% indicated that they had 2 or more chronic conditions.

Facility prioritization

In addition to the primary and secondary data described above, Novant Health Thomasville Medical Center reviewed the top five diagnosis codes for inpatient and outpatient hospital emergency room visits from April 2021 to March 2022.

Novant Health Thomasville Medical Center Emergency Department
Top 5 Diagnoses April 2021 – March 2022

Inpatient Diagnosis	Volume	Outpatient Diagnosis	Volume
COVID-19	452	COVID-19	1956
Sepsis, unspecified organism	165	Other Chest pain	930
Chronic obstructive pulmonary disease with (acute) exacerbation	81	Acute upper respiratory infection, unspecified	476
Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	80	Nausea with vomiting, unspecified	473
Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	75	Urinary tract infection, site not specified	467

The top 5 Diagnoses from April 2021 to March 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 NHTMC’s ED top 5 diagnosis codes, the Novant Health Thomasville 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 three top significant health priorities for Novant Health Thomasville Medical Center:

1. Chronic Disease
2. Substance Misuse
3. Mental Health

IV. Addressing needs

Novant Health Thomasville 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	Program/Actions	Anticipated Impact
Chronic Disease	Diabetes Management	<ol style="list-style-type: none"> 1. Provide education, community resources available and diabetic screening opportunities in Davidson County as evidenced by hosting at least 2 diabetes events annually and distributing educational materials to at least 75 community members each calendar year. Educational events can include: <ul style="list-style-type: none"> • Nutrition talks, healthy cooking classes, information on symptoms, how to manage diabetes, etc. 2. Promote NHTMC Center for Health and Wellness (when completed) as location for free community education classes taught by NH experts held at least quarterly. 3. Explore possibilities of establishing a diabetes bridge clinic in Thomasville.
Substance Misuse	Increase awareness of substance misuse treatment options for all populations, and focus on outreach to pregnant females with substance misuse disorder	<ol style="list-style-type: none"> 1. Explore opportunities to partner with Ob-Gyn providers at Women’s Center of Lexington to expand initiative with Eleanor Health for pregnant moms identified with a substance misuse disorder. 2. Increase awareness of medication drop box in hospital lobby as evidenced by data reports from hospital pharmacy regarding weight of medication collected and dates of collection disposal. 3. Upon opening of NHTMC Center for Health and Wellness, promote opportunity and benefits to community of local treatment option. 4. Partner with Eleanor Health and Davidson County Health Department to educate pregnant moms seen at CityLake Ob-Gyn/delivering at NHTMC and identified with a substance misuse disorder about the opportunity of being referred for medically assisted treatment, therapy and support for up to one (1) year post- delivery evidenced by a monthly data report from Women’s Unit manager reporting healthy birth outcomes of those patients identified as enrolled in the treatment program and quarterly data reported from CityLake OB regarding number

		of patients physicians wrote referrals for to Eleanor Health.
Mental Health	Increase awareness of mental health resources available to all community members with a focus on services for seniors	<ol style="list-style-type: none"> 1. Design and distribute an educational flier outlining mental health resources available to community. NHTMC will partner with the Life Center of Davidson and Davidson County Senior Services to raise aware of services available to seniors (55+) seeking help for themselves or others evidenced by increased monthly usage data supplied by Life Center. Partnership will also include responsibility of NHTMC to review resource lists (Caregivers of DC website community directory resource) at least twice annually and provide updates to Life Center and Davidson County Senior Services with accurate up-to-date resources. 2. Promote available mental health resources to NHTMC ConnectionLink members at least twice annually as evidenced by copy of newsletters and distribution list provided with date of email/ mailing and program flier and attendance list. 3. Develop and distribute at least 100 fliers to community members annually outlining mental health resources for seniors in county and state to raise awareness as evidenced by number of fliers distributed at community events.

Again, NHTMC will focus resource allocation on these prioritized needs based on careful consideration of estimated feasibility and effectiveness of possible interventions. While NHTMC will not prioritize the remaining significant health needs (listed above in Section III), 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 Thomasville Medical Center, there are various existing community assets available throughout the Davidson 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
<ul style="list-style-type: none"> • Substance Abuse • Alcoholism • Tobacco 	CareNet Counseling Eleanor Health Davidson County Medical Ministries/Kintegra Family Medicine – Lexington/Thomasville Partners in Prevention Davidson County Transitional Services Daymark Recovery Services DragonFly House Family Services of Davidson County Four Directions Counseling and Recovery Green Center for Growth and Development Atrium Health Wake Forest Baptist Behavioral Health Lexington Treatment Associates Monarch NC National Alliance on Mental Illness Path of Hope, Inc Positive Wellness Alliance Prevention Services RHA Health Services Sandhills Center Thomasville Treatment Associates Tobacco Cessation Clinic – Atrium Triad Health Project TwinCity Harm Reduction
<ul style="list-style-type: none"> • Obesity 	BabyCafe Central United Methodist Church – Denton J.Smith Young YMCA Tom A Finch Community YMCA Davidson County Health Department WIC program Davidson Co. Parks and Recreation Abbotts Creek Missionary Baptist Church Canaan United Methodist Church – The Lord’s Table – Congregate Meals through Davidson County Senior Services Cooperative Community Ministry Davidson County First Hope Ministries (Formerly Crisis Ministry of Davidson County) Davidson County Community Action Davidson County Social Services, FNS, SNAP Davidson County United Way Fairgrove Family Resource Center The Father’s Storehouse First Assembly of God Davidson Medical Ministries First Pentecostal Holiness Church – Servant’s Table Ministry –

	<p> First United Methodist Church – Good Samaritan Fund High Rock Church – Hope 4 Humanity His Laboring Few Least of These Ministries Meals on Wheels Mile 2 Church NC 211 New Temple House of Provisions Novant Health Thomasville Medical Center Behavioral Health Open Door Ministry (High Point) Open Hands of Davidson County Pastor’s Pantry Parks and Recreation of Lexington Parks and Recreation of Thomasville Pleasant Grove United Methodist Church Salvation Army of Davidson County Second Harvest Food Bank of Northwest NC Senior Services Nutrition Program South Davidson Family Resource Center (Denton) Sunnyside Ministry Tyro United Methodist Church Upper Room Food Ministry West Davidson Food Pantry, Least of These Ministries, Inc. </p>
<ul style="list-style-type: none"> • Mental Health 	<p> 9-8-8 Line CareNet Counseling Crisis Textline Eleanor Health Davidson County Medical Ministries/Kintegra Family Medicine – Lexington/Thomasville Daymark Recovery Services DragonFly House Family Services of Davidson County Hope4nc Helpline (English and Spanish) Hospice of Davidson Monarch NAMI Family Support Group - Lexington NC National Alliance on Mental Illness NHBAM Hopeline Novant Health Thomasville Medical Center Behavioral Health Partners in Prevention Sandhills Center Smart Start of Davidson County </p>

<ul style="list-style-type: none"> • Diabetes • Lung Disease • Other Chronic Diseases 	<p>ARC of Davidson County BabyCafe USA Cancer Services of Davidson County Carolina SeniorCare PACE Davidson County Health Department Davidson Medical Ministries Davidson County Senior Services Resource Line EasterSeals UPC Epilepsy of Davidson County Greater Vision Ministry JDRF Life Center of Davidson County Piedmont Triad Regional Council Salvation Army of Davidson County’s Boys and Girls Club Special Olympics of Davidson County</p>
<ul style="list-style-type: none"> • Cancer 	<p>American Cancer Society Cancer Services of Davidson County Hospice of Davidson County</p>
<ul style="list-style-type: none"> • Infectious Diseases 	<p>Davidson County Health Department Piedmont Health Services and Sickle Cell Agency High Point</p>
<ul style="list-style-type: none"> • Sexually Transmitted Diseases 	<p>Positive Wellness Alliance Triad Health Project</p>
<ul style="list-style-type: none"> • Pediatric Health 	<p>CIS of Lexington, Davidson County CIS of Thomasville DragonFly House FairGrove Family Resource Center – Circle of Friends Family Services of Davidson County Smart Start of Davidson County Davidson County Health Department J. Smith Young YMCA Tom A Finch Community YMCA</p>

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

V. Impact Evaluation of the 2019-2021 Community Health Needs Assessment

No written comments were received from the 2019-2021 CHNA and implementation strategy.

Based on the previously reported health data from the 2019-2021 Community Health Needs Assessment, the Novant Health Thomasville Board of Trustees did a collective review of community feedback and prioritization and determined the top health priorities for Novant Health Thomasville Medical Center as the following: Chronic Disease, Substance Abuse and Mental Health, and Access to Care.

The specific commitments, objectives, measurements, and successes for Novant Health Thomasville Medical Center addressing their 2019-2021 priorities are described in the table below.

Of note, in 2020 and 2021, the COVID-19 pandemic diverted our focused response on priority needs to meet new, unexpected, and urgent priorities in our community. Our COVID-19 response, including education, free mask distribution, and vaccines, addressed issues of access to care and chronic disease by targeting vulnerable communities. While intended outcomes identified in 2019 weren't always able to be met, Novant Health provided access to critical and life-saving services to all of our communities through dedicated COVID-19 response efforts.

Priority	Program	Intended Outcome	Actual Outcome
Chronic Disease	Support initiatives that work toward early detection and treatment with emphasis on education and intervention.	<p>Establish bi-monthly diabetes drop-in for community, providing a diabetes education, the 1st and 3rd Thursdays from 3-4pm. No appointment needed. Show 10% increase annually of participation and monitor changes in ED utilization for diabetic related problems.</p> <p>Utilize Center for Health and wellness to expand regular classes and programming for education, support, and prevention of early detection and intervention of chronic diseases, including cooking classes and exercises.</p>	<p>Conducted outreach by mail about diabetes education/resources to 681 patients who utilized the ED in 2019.</p> <p>See table (below) showing decrease in ED utilization for diabetic related problems from 2019 to 2021, from 386 in 2019 to 301 in 2021, an improvement of 22%.</p> <p>230 community members were reached through 4 Remarkable You screenings (that included cholesterol, glucose and A1C exams to measure their risk for diabetes), and various other screenings such as blood pressure screenings (to measure for heart disease), mammography screenings and other cancer screenings.</p> <p>Heart health education was provided through various classes and</p>

			<p>educational programming to 1,328 community members.</p> <p>Blood pressure monitors were provided by NHTMC at Grubb Family YMCA, Tom A Finch Community YMCA and J. Smith Young YMCA to provide accessible and free blood pressure monitors directly to the community.</p> <p>ConnectionLink, a resource and benefit program for residents age 55+, provided classes in person, online and via newsletters about chronic disease management. In January 2020, there were 348 community members in ConnectionLink receiving communication and resources.</p> <p>Additionally, NHTMC provided \$58,712 in charitable contributions to the following organizations to support their work addressing this priority (for some specific initiatives to reduce barriers for successful breastfeeding, increase participation in exercise sessions, and help establish healthy lifestyles to decrease chronic disease and obesity): Tom A Finch Community YMCA, Cancer Services of Davidson County, United Church Homes, American Cancer Society</p> <p>Center for Health and Wellness building has not been completed to date.</p>
Substance Abuse and Mental Health	Support initiatives that provide early detection and treatment with emphasis on reducing progression of mental health and substance misuse with specific focus on those	Show a 5% decrease of community members presenting to ED for mental health and behavioral health issues more than twice annually by hosting community education	See tables showing decrease in behavioral health related ED visits from 2019 to 2021 (below). Overall, behavioral health related diagnosis visits decreased from 1051 in 2019 to 948 in 2021, an improvement of 10%. When expanding the data to 2018 (the

	<p>individuals between 18-40 years of age.</p>	<p>programs in specific identified neighborhoods utilizing the 3D map from 2018 encounters and partnering with local agencies.</p> <p>Increase capacity building by actively partnering with the new Davidson County Substance Abuse Coordinator as evidenced by meeting at least quarterly and provide team members to serve on newly formed committees for community initiatives, and compile rosters of audience and number of attendees for each showing of Resilience for support evidence of community awareness education.</p> <p>Utilize Center for Health and Wellness to expand outpatient behavioral health services to include substance abuse and addiction therapy.</p>	<p>end of the previous CHNA cycle), these visits decreased from 1103 in 2019 to 948 in 2021, an improvement of 14%. The number of patients with two or more behavioral health diagnosis visits decreased from 111 in 2019 to 107 in 2021, an improvement of 4%. When expanding the data to 2018 (the end of the previous CHNA cycle), these visits decreased from 119 in 2018 to 107 in 2021, an improvement of 10%.</p> <p>NHTMC Community Engagement team member attended Davidson County Stop Prescription Drugs Now meetings and worked with the county's new Substance Abuse Coordinator to establish relationships with community partners.</p> <p>3,581 community members participated in events and programs for mental health education and awareness, including showings of the Resilience documentary, information about how to cope with grief, and recharging as a community helper.</p> <p>ConnectionLink members were engaged via phone calls and newsletters/emails about ways to stay connected during pandemic, and available resources to support mental health. Direct phone calls to ConnectionLink members were made to at least 134 individuals during the pandemic and increased isolation.</p> <p>At least 162 community members participated in various support groups.</p> <p>Additionally, NHTMC provided \$5,000 in charitable contributions to Family Services of Davidson County to support their work addressing this priority.</p>
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			Center for Health and Wellness building has not been completed to date.
Access to Care	Implement step by step process for community events to show increase in access to care as evidence by how many appointments are scheduled for participants at identified screenings and how many appointments scheduled are kept.	Utilize the 3D maps to identify top areas of concern in the county and schedule community events at least quarterly to provide health screenings and ability to schedule follow up appointments for participants and Medical Ministries. If other concerns are expressed or identified during the community screenings, support patient navigation to resources in NH MyCommunity.	In this 3-year period, MyCommunity searches totaled 1,372, with the top search terms being “food pantry,” “help pay for utilities,” and “emergency food.” The number of shares/connections (or information sent directly to patients/community members searching for help) decreased from 40+ in 2019 to less than 10 in 2021. The Latino/Hispanic Advisory Council, a 20+ member community council (including members from NHTMC) is focused on increasing access to care and health resources for the Latino/Hispanic population; the council meets monthly and hosts community events. Through 140 breastfeeding support groups, childbirth preparations sessions, early parenting and infant CPR classes, 2,435 mothers and their family members received education providing improved access to care in the area of maternal and infant health. Advance care programming, about making healthcare decisions and communicating advance directives, was delivered to 355 participants. General wellness education for seniors was provided in various formats to community members, outside of ConnectionLink members, to 832 individuals, including heart health, preventing falls, recognizing stroke symptoms, medication management, healthy aging, etc.

			<p>General wellness education for seniors, in various topics, was delivered in various formats to ConnectionLink members in 3,726 instances.</p> <p>NHTMC entered into a 3-year agreement with Davidson County in 2020 to add bus service to increase access to transportation, free of charge to residents across the county (at a cost of \$6000 each year to Novant Health).</p> <p>Additionally, NHTMC provided \$19,000 in charitable contributions to the following organizations to support their work addressing this priority: Life Center of Davidson County, The Arc of Davidson County, Hospice of Davidson County</p>
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	2018	2019	2020	2021
Diabetes related diagnosis visits	313	386	296	301

	2018	2019	2020	2021
Number of patients with Behavioral Health Related diagnosis AND >/= 2 visits	119	111	105	107

Behavioral Health related diagnosis visits	1103	1051	918	948
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VI. Appendix

Davidson County Community Health Assessment Steering Committee

Organization
Atrium Wake Forest Baptist Health Lexington Medical Center
Novant Health Thomasville Medical Center
Davidson County Health Department*

- *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 Davidson County Health Department’s full report: [2021 Davidson County Community Health Needs Assessment](#)