

Community Health Implementation Plan

2025 - 2027



Novant Health Brunswick Medical
Center



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INTRODUCTION

Novant Health Brunswick Medical Center, in partnership with Brunswick County Health Services and Doshier Memorial Hospital, conducted a health needs assessment in 2025 to identify the most pressing health needs in our community. Novant Health Brunswick Medical Center will enhance the community's health by offering health and wellness programming, collaborative services and financial support to meet identified health needs.

Organization Overview

Novant Health is an integrated network of more than 900 locations, including 19 hospitals, more than 750 physician clinics and urgent care centers, outpatient facilities and imaging and pharmacy services. This network supports a seamless and personalized healthcare experience for communities in North Carolina and South Carolina. Novant Health is nationally recognized for commitment to safety and quality for all patients and we serve as a catalyst for healthcare transformation through clinical trials, leading-edge research, innovative care delivery models and robust virtual care networks. The expertise and empathy of our 41,000 team members along with more than 8,600 independent and employed clinicians are at the heart of Our Cause as industry leaders caring for communities across the Carolinas.

Mission

Novant Health exists to create a healthier future and bring remarkable experiences to life. We are committed to providing a remarkable experience for our patients, our team members and the communities we serve. We demonstrate this commitment to our communities through the four pillars of Our Cause:

- **Discover.** We consistently seek to innovate, courageously transform ourselves and find new ways to add value for our patients, communities and one another.
- **Empower.** We provide one another, our patients, families and communities with the resources and environment to create shared accountability and action.
- **Thrive.** We demonstrate empathy, safety and quality to help each other and our communities grow and succeed.
- **Together.** We work as a trusted team with our unique perspectives, life experiences and expertise to bring remarkable to life in every interaction.

Novant Health Brunswick Medical Center (NHBMC) is in the southeastern corner of the state and provides maternity care, emergency services, surgery, outpatient diagnostic testing and other community healthcare programs. The hospital is continuing to grow to meet the needs of the communities served and has 74 beds.

OUR DEFINED COMMUNITY

Primary and Secondary Service Areas

The Primary Service Area for Novant Health Brunswick Medical Center is defined by the ZIP codes that represent at least 75% of the hospital's inpatient population, as outlined below:

ZIP CODE	COUNTY
28462	BRUNSWICK
28470	BRUNSWICK
28422	BRUNSWICK
28451	BRUNSWICK
28461	BRUNSWICK
28469	BRUNSWICK

The Primary Service Area (PSA) includes the City of Supply, Shallotte, Southport, Bolivia, Ocean Isle Beach and Leland. As all patients served within Novant Health Brunswick Medical Center PSA and Secondary Service Area (SSA) reside in Brunswick County, Brunswick will be the sole focus of demographic, health and social indicators.

Demographic Characteristics: Brunswick County

Brunswick County has a population of 167,112, a significant share of the total North Carolina population of 11,046,024.

YEAR	DEMOGRAPHIC	BRUNSWICK COUNTY	NC	US
2024	Population	167,112	11,046,024	340,110,988
2019-2023	Median Age	56.1	39.1	38.7
2019-2023	% with a Disability	15.33	13.37	13.04
2019-2023	% Veterans	11.21	7.59	6.44
2019-2023	% of Householders living alone (all ages)	25.0	29.2	28.5
2019-2023	% of Householders living alone (65+)	18.06	26.3	25.7
2010-2020	Population change from 2010 to 2020	27.24	9.48	7.13
2020-2030	Projected % population change from 2020 to 2030	47.4	12.5	n/a

Sources: American Community Survey (ACS) 2019-2023 5-Year Estimates, US Census Bureau. Via Metopio; American Community Survey (ACS) 2019-2023 5-Year Estimates, US Census Bureau. <https://data.census.gov/>

Derived from 2010 and 2020 Decennial Census Data. Via Metopio; County/State Population Projections. NC Office of State Budget and Management. <https://www.osbm.nc.gov/facts-figures/population-demographics/state-demographer/countystate-population-projections>; Program for the International Assessment of Adult Competencies (PIAAC), National Center for Education Statistics (NCES). Via Metopio. S Census Bureau, [Population and Housing Unit Estimates](#). 2024

Population Growth and Community Planning - Brunswick County shows strong population growth patterns. From 2010 to 2020, Brunswick County's population grew by 27.24%, far outpacing North Carolina's 9.48% and the U.S. growth rate of 7.13%. Looking ahead, Brunswick County's projected yearly population growth from 2025 to 2030 is ranging from 1.7% to 8.0%. This growth trajectory indicates increasing demand for healthcare services and infrastructure that will require strategic planning from health and community partners.

Aging Demographics and Social Isolation - With a median age of 56.1 years, Brunswick County has a considerably older population than both North Carolina (39.1 years) and the United States (38.7 years). Among those 65 and older, 18.06% live alone compared to 26.3% in North Carolina and 25.7% in the United States. Any householder living alone may face social isolation and those who also lack transportation may struggle to access food and other services. Seniors living alone remain a population with unique needs and challenges.

Disability and Veteran Health- The disability rate in Brunswick County is 15.33%, slightly higher than state and national levels. Brunswick County also has a notably higher veteran population at 11.21%, compared to 7.59% statewide and 6.44% nationally.

Health Indicators: Brunswick County

YEAR	HEALTH TOPIC	BRUNSWICK COUNTY	NC	US
2020-2022	Life expectancy	77.1	75.9	77.6
Chronic disease				
2022	% of adults with obesity	30.9	33.9	33.2
2022	% of adults with diabetes	9.2	10.6	10.8
2024	Access to exercise opportunities	77.0	78.0	84.45
2022	Coronary heart disease	5.80	4.10	3.76
2022	Residents with high blood pressure	31.3	32.16	30.32
2021	Chronic kidney disease	2.7	3.1	2.9
2023	Heart disease mortality	264.4	161.2	162.1
2023	Diabetes mortality	26.9	25.3	22.4

YEAR	HEALTH TOPIC	BRUNSWICK COUNTY	NC	US
2023	Kidney disease mortality	13.8	15.7	13.1
2023	CLRD mortality rate	59.4	37.9	33.4
2022	Cigarette smoking rate (% of adults)	13.9	14.8	13.1
Infectious Diseases				
2023	Medicare flu vaccination rate	57.00	50.00	46.25
2023	COVID-19 mortality	23.8	13.5	11.9
2023	Pneumonia and influenza mortality	15.0	12.2	10.9
Cancer				
2019-2023	Cancer mortality <i>deaths per 100,000</i>	294.4	150.7	144.1
2017-2021	Cancer diagnoses	493.0	475.5	444.4
2022	Colorectal cancer screening- <i>Percentage of adults</i>	65.30	60.96	58.85
2022	Mammography use <i>Percentage of females</i>	79.0	78.6	76.38
Maternal and Child Health				
2023	Teen pregnancy rate	19.8	20.8	n/a
2020-2022	Low birth weight	9.2	9.4	8.5
2017-2023	Infant Mortality	7.0	7.0	5.6
2020-2022	Prenatal care in the first trimester <i>Percentage of live births</i>	75.1	74.1	78.1
2024	Kindergarten immunizations	92.93	92.83	n/a
Behavioral Health				
2023	Alcohol-related mortality	21.9	11.1	12.6
2023	% of overdose deaths due to illicit opioids	81.2	76.6	n/a
2023	Suicide mortality rates (crude rate)	18.3	15.4	n/a
2023	Rate of drug overdose deaths	59.2	42.1	n/a
2023	Rate of drug overdose ED visits	68.8	161.8	n/a
2022	% of adults with depression	23.9	23.1	22.5
2022	Percent of Population Reporting Excessive Drinking in Past 30 Days	19.2	18.2	18.0
2019-2023	Suicide + Drug/Alcohol Poisoning) Crude Death Rate (Per 100,000 Population)	69.5	61.6	58.5

2019-2023	Opioid Crude Death Rate (Per 100,000 Population)	29.6	27.1	22.0
2022	Current Smokers	13.9	14.8	13.2
Healthcare Access				
2023	% with private health insurance	69.40	67.29	67.01
2023	% with public health insurance	50.52	36.44	37.41
2023	% Uninsured	8.0	10.36	8.55
2023	Medicaid coverage	15.26	19.12	21.31
2025	Primary Care Physicians Rate (Per 100,000 Population)	68.8	108.9	118.0
2024	Dentists Rate (Per 100,000 Population)	51.9	59.3	67.6
2025	Mental health care provider rate (per 100,000 population)	159.5	318.9	325.6
2025	Addiction/substance abuse providers rate (per 100,000 population)	27.8	29.9	29.4

Sources: : U.S. Census Bureau, American Community Survey (ACS) 5-Year Estimates (2019–2023), via Metopio; North Carolina State Center for Health Statistics, NC Department of Health and Human Services, via Metopio; Health Resources & Services Administration: Maternal and Child Health Bureau (MCHB) via Metopio; Centers for Disease Control and Prevention (CDC): National Vital Statistics System–Mortality (NVSS-M); North Carolina Annual Immunization Report, NC Department of Health and Human Services, via Metopio; Maternal and Infant Health Data Dashboard, North Carolina Department of Health and Human Services; North Carolina Office of State Budget and Management; Centers for Disease Control and Prevention, National Center for Health Statistics, United States Diabetes Surveillance System, Behavioral Risk Factor Surveillance System, via Metopio; PLACES Project, Centers for Disease Control and Prevention (CDC), via Metopio; Opioid and Substance Use Dashboard, NC Department of Health and Human Services. via Metopio; County Health Rankings, University of Wisconsin Population Health Institute, via Metopio; National Cancer Institute, State Cancer Profiles, via Metopio; NC Department of Health and Human Services, HIV/STD/Hepatitis Surveillance Reports, via Metopio; Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the PLACES Data Portal. 2022 ; Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2019.Centers for Medicare and Medicaid Services, CMS – Geographic Variation Public Use File. 2022; US Census Bureau, American Community Survey. 2019-23; Centers for Medicare and Medicaid Services, CMS – National Plan and Provider Enumeration System (NPPES). July 2025; Centers for Medicare and Medicaid Services, CMS – National Plan and Provider Enumeration System (NPPES). 2024.

Brunswick County demonstrates a mixed profile of health and social indicators compared to state and national benchmarks. Overall, Brunswick County’s health profile reflects strong coverage and preventive care capacity, yet major health and social challenges underscore the critical need for comprehensive, coordinated approaches to improve overall community well-being.

Access to Care – Brunswick County demonstrates relatively strong health insurance coverage compared to both North Carolina and the United States, with 69.4% of residents having private insurance and 50.5% covered by public programs. Medicaid coverage is lower in Brunswick

(15.3%) compared to the state (19.1%) and national (21.3%) levels. Despite strong insurance coverage, Brunswick faces significant challenges in provider availability. The county has only 68.8 primary care physicians per 100,000 population, far below North Carolina (108.9) and the U.S. (118.0), creating a major barrier to timely and preventive care.

Maternal and Child Health – Brunswick County demonstrates relatively positive maternal and child health indicators compared to state benchmarks. However, infant mortality for the county and the state stands at 7.0 per 1,000 live births, higher than the national rate of 5.4, indicating a critical area requiring focused intervention. Prenatal care access shows strong performance, with 75.1% of mothers receiving care in the first trimester, exceeding the state rate of 74.1% and approaching the national rate of 78.1%. These outcomes reflect both the strengths of prenatal care access in Brunswick County and the challenges posed by elevated infant mortality rates.

Chronic and Infectious Diseases– Chronic disease indicators show elevated mortality rates for heart disease, respiratory conditions, and cancer in Brunswick County. Obesity (30.9%) and diabetes prevalence (9.2%) are lower than state and national rates, which is a positive trend. However, access to exercise opportunities (77.0%) lags behind the U.S. average of 84.45%, suggesting a need for enhanced physical activity infrastructure. Cardiovascular health is a major concern, as coronary heart disease prevalence (5.80%) and heart disease mortality (264.4 per 100,000) far exceed state and national figures. Similarly, chronic lower respiratory disease mortality (59.4 per 100,000) is significantly higher than both benchmarks, highlighting respiratory health challenges. Brunswick County's cancer mortality rate (294.4 per 100,000) is nearly double state and national averages, and cancer incidence (493.0 per 100,000) is also elevated. Despite these outcomes, screening rates for colorectal cancer (65.3%) and mammography (79.0%) exceed state and national benchmarks, suggesting strong preventive efforts but potential gaps in treatment access or timeliness.

Behavioral Health – Brunswick County faces significant behavioral health challenges, with several indicators exceeding state and national averages. Mental health care access is particularly concerning, as Brunswick has 159.5 providers per 100,000 (less than half the state and national average). Alcohol-related mortality in Brunswick is 21.9 per 100,000, nearly double North Carolina's rate (11.1) and well above the U.S. average (12.6), signaling a critical concern for substance-related harm. The percentage of overdose deaths due to illicit opioids is also alarmingly high at 81.2%, surpassing the state figure of 76.6%. The percentage of adults reporting depression in Brunswick is 23.9%, slightly higher than North Carolina (23.1%) and the U.S. (22.5%). Similarly, 16.9% of adults report poor mental health, consistent with state and national trends.

Social Indicators: Brunswick County

YEAR	SOCIAL INDICATOR TOPIC	BRUNSWICK COUNTY	NC	US
2023	Median household income	\$76,797	\$70,838	\$ 77,719
2023	Poverty rate	10.47	12.79	12.46
2023	Unemployment rate	4.6	4.03	4.4
2024	% of workforce employed in the industries with the lowest wages*	37.3	22.5	n/a
2024	Average weekly wage	\$1,142	\$1,504	n/a
HOUSING				
2023	% of cost burdened housing units	24.99	28.04	31.86
2023	% of severely cost burdened housing units	13.49	12.72	15.12
2023	Housing insecurity	12.5	14.3	n/a
FOOD INSECURITY				
2023	% of households on SNAP	9.26	12.60	12.22
2023	Food insecurity	13.9	15.0	14.5
2023	Households in poverty not receiving food stamps	74.40	58.15	59.40
TRANSPORTATION				
2023	Percent of adults who reported lack of transportation	7.6	9.0	n/a
2023	% of households with no vehicle access	3.31	5.48	8.44

* Accommodation and Food Services; Retail Trade; Arts Entertainment and Recreation; and Agriculture, Forestry, Fishing and Hunting. Sources: American Community Survey (ACS) 2019, 2023 5-Year Estimates, U.S. Census Bureau, via Metopio; Quarterly Census of Employment and Wages (QCEW), NC Department of Commerce, Labor and Economic Analysis Division; Map the Meal Gap, Feeding America, via Metopio; PLACES Project, Centers for Disease Control and Prevention (CDC), via Metopio. White House Council on Environmental Quality, Climate & Economic Justice Screening Tool (Version 2.0), via Metopio; Multi-Resolution Land Characteristics Consortium, U.S. Geological Survey via Metopio

Housing Affordability and Cost Burden: Housing affordability represents a growing challenge despite Brunswick County's high homeownership rate. While moderate housing cost burden is less prevalent than in other areas, a significant subset of residents faces extreme housing affordability challenges that can limit their ability to afford other basic necessities including healthcare, food and transportation.

Food and Transportation Access: When a household has limited or uncertain access to

enough nutritious and safe food for everyone, it is considered food insecure. In Brunswick County, 13.9% of households experience food insecurity, which is slightly below the state average (15.0%) and just below the national average (14.5%). Despite experiencing food insecurity, 74.40% of households in poverty in Brunswick County did not utilize food stamps.

Lack of transportation is a significant issue in North Carolina, as 9% of adults lack transportation across the state. Brunswick County appears to have better-than-average transportation access and lower commuting burdens compared to state and national trends.

PRIORITIZED HEALTH NEEDS

After data was collected and analyzed from the primary and secondary data sources, Novant Health and localized steering committee members determined the following identified needs from which the priority health needs would be selected:

- Access to healthcare and quality of healthcare
- Behavioral Health (mental health and substance use)
- Chronic disease prevention and management/ physical health (including diabetes, obesity and heart disease)
- Income/ employment and workforce opportunities
- Built environment
- Food environment
- Food security
- Physical health
- Transportation

County Prioritized Health Needs

On November 4, 2025, the Steering Committee and community partners convened to review the integrated findings and conduct the initial prioritization. During this stakeholder meeting, participants were presented with a comprehensive overview of the CHNA findings and preliminary priority areas with an aim to narrow priorities based on the severity and intensity of need, possibility and effectiveness of interventions, level of importance community places on the need and associated health disparities.

Through this collaborative stakeholder input process, priority health needs reflecting both data-driven evidence and community input from Steering Committee members and other stakeholders throughout Brunswick County were identified. Following the November 4 prioritization meeting, a follow-up survey was distributed to Steering Committee members and community partners to finalize the selection of the top three priority health needs. This two-stage approach ensured thorough deliberation and consensus-building among all stakeholders, including leadership from NHBMC.

The three priority health needs selected for the 2025 CHNA include:

1. Behavioral Health (including mental health and substance use disorder)
2. Determinants of Health (including infrastructure, transportation, food security, and economic disparities)
3. Healthcare Access Barriers (including provider ratios, insurance barriers, and physical access barriers)

The priority health needs selected through this process were not ranked in order of importance; rather, each will be addressed over the next three years by the Community Health Assessment Steering Committee and community partners. Selected priorities reflect the direct input of community members, align with public health data and ensure accountability at the facility level for implementing strategies that address the most significant health needs in Brunswick County.

Facility Prioritization

In addition to the primary and secondary data, Novant Health Brunswick Medical Center leadership reviewed the top five diagnosis codes for inpatient readmissions and hospital emergency room returned visits from August 2024-July 2025 among patients with government insurance or no health insurance.

NOVANT HEALTH BRUNSWICK MEDICAL CENTER			
Inpatient Diagnosis	Volume	Emergency Room Diagnosis	Volume
Sepsis, unspecified organism	292	Urinary tract infection, site not specified	17
Hypertensive heart and CKD with heart failure and stage 1 through stage 4 CKD, or unspecified CKD	117	Chronic obstructive pulmonary disease with (acute) exacerbation	15
Pneumonia, unspecified organism	104	Weakness	11
Acute kidney failure, unspecified	84	Unspecified abdominal pain	9
Urinary tract infection, site not specified	75	Essential (primary) hypertension	8

Upon a comprehensive review of the primary and secondary data, the Novant Health Brunswick Medical Center leadership team and the Novant Health Brunswick Medical Center Board of Directors evaluated this information based on the scope, severity, clinical gaps 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 Brunswick Medical Center:

1. Access to care
2. Chronic disease management and prevention
3. Social Drivers of Health (including specific focus on food, housing and transportation)

ADDRESSING NEEDS

Novant Health Brunswick Medical Center is committed to working to address the identified areas of need through resource allocation and support of the following programs and actions:

PRIORITY 1		ACCESS TO CARE	
Priority Goal:		Enhance access to high-quality primary care, behavioral health, maternal and infant care, and medication for medically underserved* populations through community-based events, collaboration and investment.	
Resources and Collaboration:		<p>Novant Health Brunswick Medical Center will invest personnel resources (subject matter experts and clinical staff), facility resources (mobile health units, supplies, education materials) and financial resources (charitable contributions and/or sponsorships).</p> <p>The facility will work in collaboration with Brunswick Health Services and community-based organizations providing and expanding healthcare access and educational and research institutions training future healthcare professionals.</p>	
Strategy:	Desired outcome:	Program Action (Description):	
Enhance community-based access through outreach events and programs.	1.1 Increase number of medically underserved children receiving school-readiness vaccines.	1.1.1. Deliver Vaccine for Children (VFC) program childhood immunizations and health assessments via mobile and community health services outreach.	
	1.2 Increase capacity of community partners to provide free and reduced cost healthcare access for medically underserved communities.	1.2.1 Collaborate with healthcare access focused nonprofits, expanding capabilities through non-cost use of Novant Health's mobile and community-based outreach.	
		1.2.3. Participate in community-based events that encourage access to medication, support for pregnant patients and babies, and enhanced access to primary care.	

Engage in meaningful nonprofit partnership through charitable investments and in-kind support.	1.3 Enhance community partner capability to increase number of community members connected to appropriate venues of care.	1.3.1. Provide charitable contributions and sponsorships in support of aligned community nonprofit organizations and events, increasing access to care for community members with access and outcome barriers.
		1.3.2. Provide technology, supply, and volunteer support, including subject matter experts, to nonprofit organizations, alleviating barriers with access to primary, pregnancy and specialty care for community members.
Provide evidence-based education and resource connections to enhance community health.	1.4 Increase resource awareness and health literacy for individuals with barriers to care.	1.4.1. Host health education and screening events and facilitate referrals to care and/or resources.
		1.4.2. Provide education within communities on access to care, maternal care, healthy lifestyle recommendations, medication takeback events and other health topics.
	1.5 Enhance health outcomes for all patient groups in support of quality and safety aims.	1.4.3. Support Novant Health provider and team member education on access to care resources and how to enhance health outcomes for all.

**As defined by section 501-R of IRS regulation, medically underserved populations include populations experiencing health disparities or that are at risk of not receiving adequate medical care because of being uninsured or underinsured, or due to geographic, language, financial, or other barriers. Populations with language barriers include those with limited English proficiency. Medically underserved populations also include those living within a hospital facility's service area but not receiving adequate medical care from the facility because of cost, transportation difficulties, stigma, or other barriers. CHNAs and Implementation strategies must include members of medically underserved, low-income, and minority populations.*

PRIORITY 2	CHRONIC DISEASE MANAGEMENT AND PREVENTION
Priority Goal:	Enhance awareness of chronic disease risks, prevention and management tools, through community-based events, collaboration and investment to reduce chronic disease prevalence.
Resources and Collaboration:	<p>Novant Health Brunswick Medical Center will invest personnel resources (subject matter experts and clinical staff), facility resources (mobile health units, supplies, education materials) and financial resources (charitable contributions and/or sponsorships).</p> <p>The facility will work in collaboration with Brunswick Health Services, community-based organizations providing and expanding healthcare access and educational and research institutions training current and future healthcare professionals.</p>

Strategy:	Desired outcome:	Program Action (Description):
Enhance community-based awareness, management and prevention through outreach events and programs.	2.1 Increase number of community members aware of their chronic disease risk factors.	2.1.1. Deliver free and reduced cost Remarkable You biometric, mammography and colorectal cancer screenings through mobile and community health services outreach.
	2.2 Increase capacity of community partners to enhance community and clinical awareness of chronic disease management and prevention.	2.2.1. Collaborate with chronic disease focused nonprofits to expand clinical expertise, healthy lifestyle changes and access to treatment for medically underserved populations.
		2.2.2. Participate in community-based events that encourage increased awareness and provide resources addressing chronic disease.
Engage in meaningful nonprofit partnership through charitable investments and in-kind support.	2.3 Enhance community partner capability to reduce chronic disease prevalence.	2.3.1. Provide charitable contributions and sponsorships in support of aligned community nonprofit organizations and events addressing chronic disease.
		2.3.2. Provide technology, supplies and volunteer support, including subject matter experts, to nonprofit organizations aiding community members with access and outcome barriers.
Provide evidence-based education and resource connections to enhance community health.	2.4 Increase resource awareness and health literacy for all communities, particularly those most at risk.	2.4.1. Provide education during screening events and facilitate connections to care and resources.
		2.4.2. Provide education within communities on diabetes prevention, hypertension, cancer and healthy lifestyle recommendations,
	2.5 Enhance health outcomes for all patient groups in support of safety and quality aims.	2.5.1 Collaborate with Novant Health providers and team members on chronic disease care and resources to enhance health outcomes for all.

PRIORITY 3	SOCIAL DRIVERS OF HEALTH
Priority Goal:	Assess and address social drivers of health, particularly housing, transportation and food security among medically underserved patients and communities.
Resources and Collaboration:	Novant Health Brunswick Medical Center will invest personnel resources (volunteers, subject matter experts and resource connection staff), facility resources (resource connection technology) and financial resources (charitable contributions and/or sponsorships).

	The facility will work in collaboration with community-based organizations addressing social needs and educational and research institutions training future social work professionals.	
Strategy:	Desired outcome:	Program Action (Description):
Engage in meaningful nonprofit partnership through charitable investments and in-kind support.	3.1 Enhance community partner capability to address social needs, especially among medically underserved populations.	3.1.1. Provide charitable contributions and sponsorships in support of aligned community nonprofit organizations and events addressing social needs for medically underserved individuals and groups.
		3.1.2. Provide technology, supplies, and volunteer support, including subject matter experts, to nonprofit organizations aiding community members with social risks.
Provide evidence-based education and resource connections to address social needs.	3.2 Increase social needs resource awareness in all communities, particularly those most at risk.	3.2.1. Provide education and resource connections for communities and individuals related to access to housing, education, transportation, food and other social resources.
	3.3 Provide resource connections to medically underserved patients with social needs.	3.3.1 Provide food, transportation and other support for medically underserved patients with urgent social needs.

Health needs not selected and community resources to address health needs

NHBMC will allocate resources to prioritized health needs after careful consideration of the feasibility and potential effectiveness of proposed interventions. Other significant needs that were identified but not prioritized will remain important. NHBMC will continue to raise awareness, provide support, and collaborate with community partners as appropriate to improve outcomes for these needs when they align with the organization's scope of services.

- **Behavioral health (including mental health and substance use)** education and outreach efforts will be incorporated into broader access to care initiatives led by Novant Health or community resources.
- **Built environment, income/employment and workforce opportunities** are quality of life factors. While committed to improving the health of individuals throughout their lifespan, NHBMC recognizes these issues are broader than clinical needs and did not identify these as priorities so it could focus efforts on the top issues selected.

In the table below, significant needs not selected for prioritization are marked with an asterisk.

In addition to the programs and services offered to the community through Novant Health Brunswick Medical Center, there are various existing community assets available throughout the Brunswick County community that have additional programs and resources tailored to meet all the identified health needs. While not all-encompassing, the following is a list of several valued community agencies that address those prioritized and non-prioritized needs:

IDENTIFIED SIGNIFICANT HEALTH NEEDS	LOCAL COMMUNITY RESOURCES ADDRESSING NEEDS
<p>Health needs:</p> <ul style="list-style-type: none"> • Access to care • Chronic disease prevention and management/Physical Health 	<p>Brunswick Wellness Coalition Brunswick County Health Department Cape Fear Healthnet New Hope Clinic YMCA of Southeastern North Carolina East Carolina University School of Dental Medicine- Brunswick County Brunswick County Schools, School Health Advisory Committee Brunswick County Communities in Schools Brunswick County Cooperative Extension Brunswick Senior Resources Cedar Grove Community Health Association Lower Cape Fear LifeCare</p>
<p>Social Drivers of Health, including:</p> <ul style="list-style-type: none"> • Housing • Food • Transportation access • Built environment* • Income/ employment and workforce opportunities* 	<p>Brunswick Habitat for Humanity Brunswick Family Assistance Brunswick Island Baptist Church Countywide CDC First Baptist Church of Leland Harvest Fellowship Church Inspirational House of Praise Matthew's Ministry Ocean View United Methodist Church South Brunswick Interchurch Council (Food Pantry) Brunswick County Schools Brunswick Community College NCWorks Career Center Brunswick Family Assistance Brunswick Social Services Brunswick County Literacy Council Brunswick County Public Libraries Brunswick Transit Brunswick County Schools Shally Shuttle Town of Shallotte</p>

<ul style="list-style-type: none">Behavioral Health (including mental health and substance use disorder) *	Brunswick County Sheriff's Office Christian Recovery Centers Coastal Horizons Carolina Dunes Behavioral Health Coastal Southeastern United Care Hope Harbor Home
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*Significant needs not selected for prioritization
For a full list of community resources, visit NovantHealth.org/MyCommunity

APPROVAL OF COMMUNITY HEALTH IMPLEMENTATION PLAN

The 2025 Novant Health Brunswick Medical Center Community Health Needs Assessment (CHNA) has been reviewed and approved by the leadership of the Novant Health Brunswick Medical Center Board of Directors on December 3, 2025, in accordance with state and federal guidelines. The findings and priorities outlined in this report reflect a collaborative effort among public health professionals, community stakeholders and residents. The hospital facility affirms its commitment to using this assessment as a foundation for strategic planning, resource allocation and community health improvement initiatives.

The Novant Health Brunswick Medical Center Board of Directors and Novant Health Brunswick Medical Center administration are active participants in the community benefit process. Through strategic planning initiatives, leadership provides direction on actions and intended impact and serves as the approving body for the community health needs assessment and community health implementation plan. Administrative leaders serve on the county assessment 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.

APPENDIX

Data Sources

The following is a list of sources used during the CHNA process. Many of the datasets were accessed via the Metopio platform. A URL for each dataset is available upon request.

Centers for Disease Control and Prevention. (2024). *PLACES Project*. Retrieved via Metopio.

Centers for Disease Control and Prevention. (2025). *National Vital Statistics System-Mortality (NVSS-M)*. Retrieved via Metopio

Centers for Medicare & Medicaid Services. (2017). *Accountable Health Communities Health-Related Social Needs Screening Tool*. Retrieved via Metopio

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Community Health Assessment Steering Committee

CHNA Leadership Team
Agencies Represented:
Brunswick County Health Services
Dosher Memorial Hospital
Novant Health Brunswick Medical Center

Brunswick County CHA Stakeholders
Agencies Represented:
Alzheimer's Association, Eastern NC
Brunswick Community College
Brunswick County
Brunswick County Cooperative Extension
Brunswick County EMS
Brunswick County Environmental Health
Brunswick County Government*
Brunswick County Health Services*
Brunswick County Parks & Rec
Brunswick County Schools*
Brunswick County Sheriff Office
Brunswick County Social Services*
Brunswick County Veterans Services*
Brunswick Family Assistance
Brunswick Senior Resources Inc.
Brunswick Smart Start
Brunswick Transit System, Inc.
Cape Fear Health Net
Cedar Grove Community Center
Christian Recovery Centers Inc.
Clergy Community-SUA Commission
Coastal Horizons
CommWell Health
Dosher Memorial Hospital
Lord's Food Pantry by SBIC
Mt. Calvary AME

NAACP Brunswick County
New Hope Clinic
Novant Health Brunswick Medical Center
Partners in Community
Southeastern Integrated Care
Southport Oak Island Interchurch Fellowship
Trillium Health Resources
United Methodist Church Oak Island

*Representative of a state, local, tribal, or regional governmental public health department (or equivalent department or agency)