

HARRIS

REGIONAL HOSPITAL

A Duke LifePoint Hospital

This is the facility specific implementation strategy for Harris Regional Hospital and addresses the community health needs identified through a collaborative community health needs assessment (CHNA) process conducted with local and regional partners in western North Carolina. This document outlines plans for Harris Regional Hospital to support specific community benefit efforts as part of a larger community-wide plan.

OUR COMMUNITY AND KEY PARTNERS

Harris Regional Hospital's Community

As of 2017, Jackson County was home to a little under 43,000 residents, which is a rough 7% increase since 2010. Harris Regional Hospital, located in the midst of a bustling Jackson County, was founded in 1929. The hospital houses an average of 86 beds on a usual day and offers over 28 different services to patients in Western North Carolina. Harris Regional Hospital's health information provided the basis for the geographic focus on the CHNA. Figure 1 below shows where Harris Regional Hospital received patients; most of the hospital's inpatients came from Jackson County. Specifically, approximately 1,703 in-patient experiences were residents whom indicated they resided in Jackson County, which is roughly 42% of our patients at Harris Regional Hospital. The service area for Harris Regional Hospital includes medically underserved, low-income and minority populations who live in the geographic area from which the hospital draws its patients.

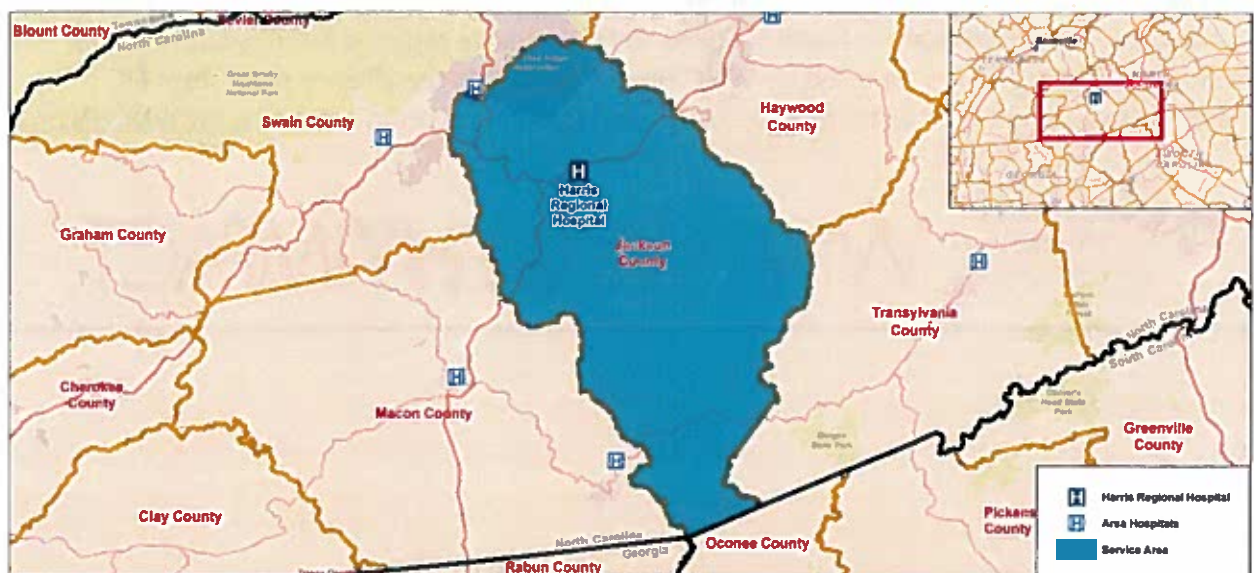


Figure 1: 2018 Planning Service Area Definition. Casemix, 2018.

PRIORITY HEALTH NEEDS & HOW THEY WERE ESTABLISHED

Prioritization Process

Process

During our group process, the following criteria were applied to select priority health issues of focus for our community over the next three years:

- Criteria 1 – Relevant – How important is this issue? (*Urgency to solve problem; Community concern; Focus on equity; Linked to other important issues*)
- Criteria 2 – Impactful – What will we get out of addressing this issue? (*Availability of solutions/proven strategies; Builds on or enhances current work; Significant consequences of not addressing issue now*)
- Criteria 3 – Feasible – Can we adequately address this issue? (*Availability of resources -- staff, community partners, time, money, equipment -- to address the issue; Political capacity/will; Community/social acceptability; Appropriate socio-culturally; Can identify easy, short-term wins*)

Participants used a modified Hanlon method to rate the priorities using the criteria listed above. Then dot voting and various techniques were used to narrow the top two priority health issues.

Identified Indicators

During the above process, the CHA Action Team identified the following health indicators to present in the public meeting for a vote:

- **Obesity:** A weight that is higher than what is considered healthy for a specific height. 42.2% of the population in Jackson county reported being obese, which is a 6% increase in 3 years (WNCHN – WNC Healthy Impact Community Health Survey, 2018).
- **Physical Activity:** Approximately 22.3% surveyed reported participating in no physical activity (WNCHN – WNC Healthy Impact Community Health Survey, 2018).
- **Nutrition:** Obtaining the recommended amount of nutrients within a day yielding positive health results. Only 7.3% of people surveyed indicated that they got 5 or more servings of fruits and/or vegetables in a day, which was 2% decrease in three years (WNCHN – WNC Healthy Impact Community Health Survey, 2018).
- **Substance Abuse:** 17.5% of people surveyed reported using opiates/opioids in the past year with (or without) a prescription, and in conjunction, 47% reported their life being negatively affect by substance abuse (WNCHN – WNC Healthy Impact Community Health Survey, 2018).

For more information about the community health priorities selected for Jackson County, read the Priority Issue sections in [the Jackson County Community Health Assessment](#).

HOW THIS IMPLEMENTATION STRATEGY WAS DEVELOPED?

Engagement in a Community-Wide Plan

As a next step following the development of a community health needs assessment (CHNA), which includes prioritization of health needs, Harris Regional Hospital collaborated with Jackson County Department of Public Health and other key community stakeholders to develop a written description of the activities that hospital facilities, public health agencies, and other local organizations plan to undertake collectively to address specific health needs in our community. In addition, Harris Regional Hospital developed a strategic plan that targets community health, specifically identifying Obesity/Physical Activity/Nutrition and Substance Abuse Prevention as the two priorities in the CHNA. The collaborative action planning process will result in the development of an electronic community health improvement plan (e-CHIP) for Jackson County, facilitated by Jackson County Department of Public Health. Harris Regional Hospital will also develop an electronic implementation plan for Jackson County.

IMPLEMENTATION STRATEGY DETAILS

Priority Health Issue #1: Physical Activity and Nutrition

Description of Community Need

Primary data revealed less than 10% of residents in Jackson County consume five or more servings of fruits or vegetables daily, and less than a quarter of the population are meeting the national physical activity recommendations of 150 active minutes per week (WNCHN – WNC Healthy Impact Community Health Survey, 2018). Furthermore, 77% of residents are overweight or obese, which are slightly higher than the Western North Carolina (WNC), State, and US averages.

Secondary data indicates that Jackson County's adult and childhood (age 2-18 years) obesity rates are higher than the WNC averages (Obesity in Children Ages 2 to 18 by county, 2017). Additionally, 11% of pregnant women have gestational diabetes, while 30% are obese with a BMI greater than 30 (Birth Indicator Tables by State and County, 2018). In relation to food insecurity, Jackson County's poverty rates continue to be higher than the WNC region and North Carolina in all categories – the total population, children under 18, and children under 5 (QuickFacts, 2019).

Implementation Strategy		
Hospital Strategy	Involvement	Evaluation/Note
<p>Hospital strategy 1</p> <p>4 the Health of It</p>	<p>Service provided by Harris Regional Hospital (Wellness Manager)</p>	<p>A worksite wellness program designed for Jackson County Public Schools. The program provides two biometric screenings and three health consultations. During these screenings, residents gain information on their total glucose, cholesterol, blood pressure, and full body composition.</p> <p>*see scorecard for measures</p>
<p>Hospital strategy 2</p> <p>The Ascent Series</p>	<p>Collaboration between Harris Regional Hospital (Wellness Manager) and Western Carolina University (Dean of Health and Human Sciences)</p>	<p>The Ascent Series is a new program developed from The Ascent Partnership with Western Carolina University taking the place of Tuesdays to Thrive. The program will be quarterly, at different locations in the community, and cover a variety of health topics that engage community interest. This strategy is strictly health education.</p>
<p>Hospital strategy 3</p> <p>Lunch and Learns</p>	<p>Exclusively provided by Harris Regional Hospital</p>	<p>Harris Regional Hospital will sponsor lunch and learns once or twice a quarter in different locations throughout the community in Jackson County. The lunch and learns will have a provider or physician as guest speaker for a key health issue within the community. This strategy is also health education.</p>
<p>Hospital strategy 4</p> <p>Breastfeeding Friendly</p>	<p>Led by Harris Regional Hospital in partnership with Jackson County Health Department and key stakeholders</p>	<p>Harris Regional Hospital is an established breastfeeding friendly organization. Lactation consultants and staff will be partnering with Jackson County Health Department to make the community of Jackson County a breastfeeding friendly place to live, work, and visit.</p>

Priority Health Issue #2: Substance Abuse

Description of Community Need

17.5% of people surveyed reported using opiates/opioids in the past year with (or without) a prescription, and in conjunction, 47% reported their life being negatively affected by substance abuse.

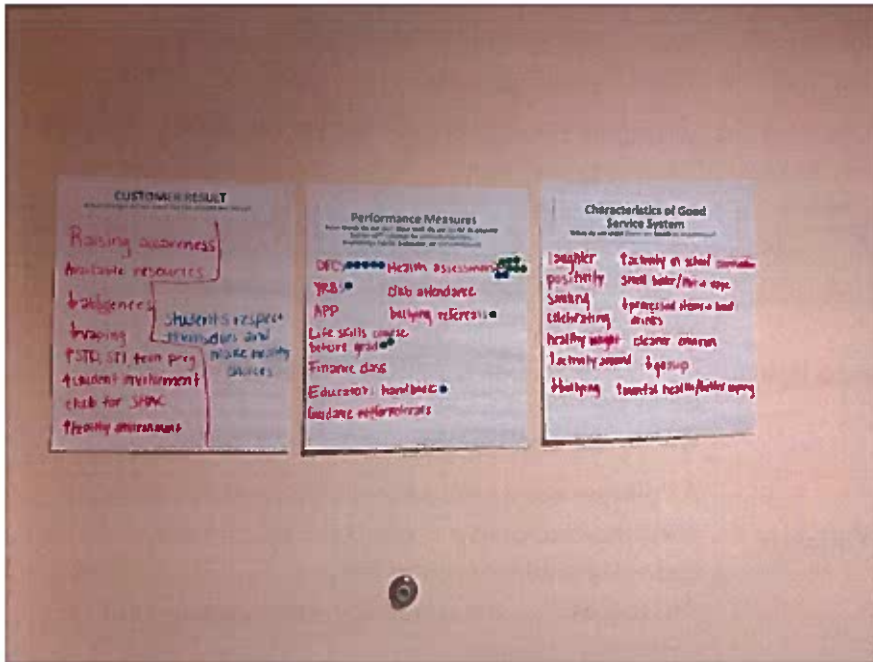


Image 1: Substance Abuse Whole Distance Exercise

Desired Community Result

The Jackson County School Health Advisory Committee met during the summer of 2019 to brainstorm on their intended result and goal of the substance abuse priority. The committee voted on – “Students respect themselves and make healthy choices” (image 1 to the left).

Partner Agencies and Roles

Jackson County’s collaborative process is supported by WNC Healthy

Impact, which works at the regional level. Locally, our process is supported by the CHA Work Team, the Healthy Carolinians Steering Committee, and the Jackson County Health Department.

Partnerships with the implementation plan will include key stakeholders within the community such as Western Carolina University, Southwestern Community College, MountainWise, Jackson County Schools, Jackson County Department on Aging, Jackson County Public Library, and the Great Smokies Health Foundation.

Related Hospital Strategies

2018 Priority Area 2 – Substance Abuse

Population Level Data:

17.5% of people surveyed reported using opiates/opioids in the past year with (or without) a prescription, and in conjunction, 47% reported their life being negatively affected by substance abuse (WNCHN – WNC Healthy Impact Community Health Survey, 2018).

The top three leading causes of death in Jackson County are associated with tobacco products. According to the CDC, smoking can cause heart disease, stroke, cancer, lung

NEXT STEPS

As part of the community health improvement process, Harris Regional Hospital will continue to work with community partners in the development, implementation, and monitoring of our collaborative community health implementation plan that includes some of the hospital strategies outlined in this document. The implementation plan will be reviewed annually by the Harris Regional Hospital Board of Trustees to assess progress on key community indicators, and updates will be made publically on the Community Health Report scorecard. Harris Regional Hospital will design, publish, and maintain an electronic health report to indicate progress being made on community health priorities through strategies presented in the above document. All outcomes will be measurable and updated regularly. The scorecard will be active and available on our hospital website. The next community health needs assessment (CHNA) will be conducted in 2021.

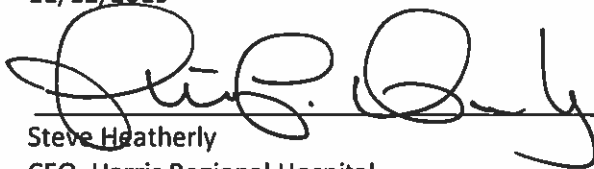
APPROVAL

Wellness Manager presented the CHNA document and data for approval on June 25th, 2019. The CHNA document for Harris Regional Hospital was verbally approved to proceed to the Implementation Phase. The above document is the result and plan to address indicated health priorities within Jackson County. This implementation report was prepared for the November 12, 2019 Harris Regional Hospital Governing Board meeting, and is approved as signed below by the Board of Trustees Chair and Hospital CEO.



Dave Thomas, MD
Board of Trustees Chair

11/12/2019



Steve Heatherly
CEO, Harris Regional Hospital

11/12/2019