

**CARTERET GENERAL HOSPITAL
COMMUNITY HEALTH NEEDS
ASSESSMENT & IMPLEMENTATION
STRATEGY
AUGUST 2013**



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I. Executive Summary

Carteret General Hospital (CGH) conducted a community health needs assessment (CHNA) and developed an implementation strategy to address the health needs identified in the CHNA. Data was collected from residents and key informants through surveys. This dual set of primary data was strengthened with secondary data from the North Carolina State Center for Health Statistics, County Health Rankings, National Cancer Institute, U.S. Census Bureau, and Healthy People 2020 to provide a clear picture of the health needs affecting CGH’s community.

CGH examined and prioritized the identified health needs for each community based upon the ability to make an impact and the significance of the health need to the community. Following the assessment, CGH developed an implementation strategy adopted by its governing body to take action and establish realizable goals in order to measure CGH’s progress on addressing these health needs. The assessment recognized several health needs, prioritized as follows:

- Diabetes
- Cancer
- Cardiovascular Disease
- Unintentional Poisonings & Injuries

Completion of a CHNA generally consists of five steps, which are illustrated in the figure below. While the steps for a CHNA are generally the same for most hospital facilities, the method of performing each step may vary. CGH utilized methods that best suit the community of Carteret County.

CGH completed the five steps of the CHNA and recorded the methods and results in the following pages. Carteret views this report as more than just a requirement. The CHNA is a representation of the community, and without the community, CGH would not exist, so we would like to thank the community for its participation. We prepared this report for the benefit of the community and welcome any input to create a better representation going forward.

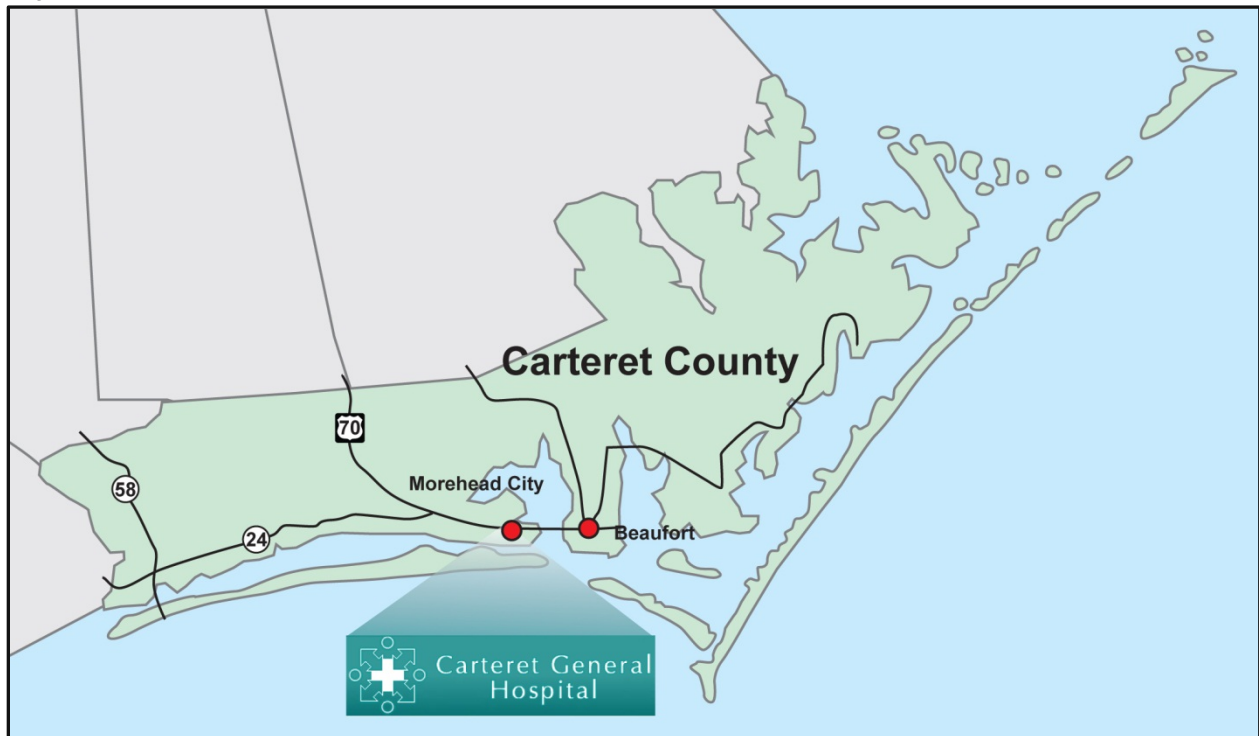


II. Community Profile

The CHNA is used to profile a community and identify its health needs. One of the main characteristics of our community is the demographics. A focus on demographics is vital to the assessment, as they describe the cultural and regional similarities and differences that influence the community's health needs. Without knowing the demographics of the community it is difficult to determine the health needs and find solutions to them. A few key demographics considered for the assessment are race, age, and mean household income.

Guidance from proposed Treasury Regulations allows a hospital facility to take into account all of the relevant facts and circumstances when defining the community, including the geographic area served.¹ Carteret General Hospital (CGH) serves a population of approximately 67,632 people in eastern North Carolina. CGH's primary service area is Carteret County. The community was determined based on the physical location of the hospital facility.

Figure 1



¹ Proposed Regulation Section 1.501(r)-3(b)(3).

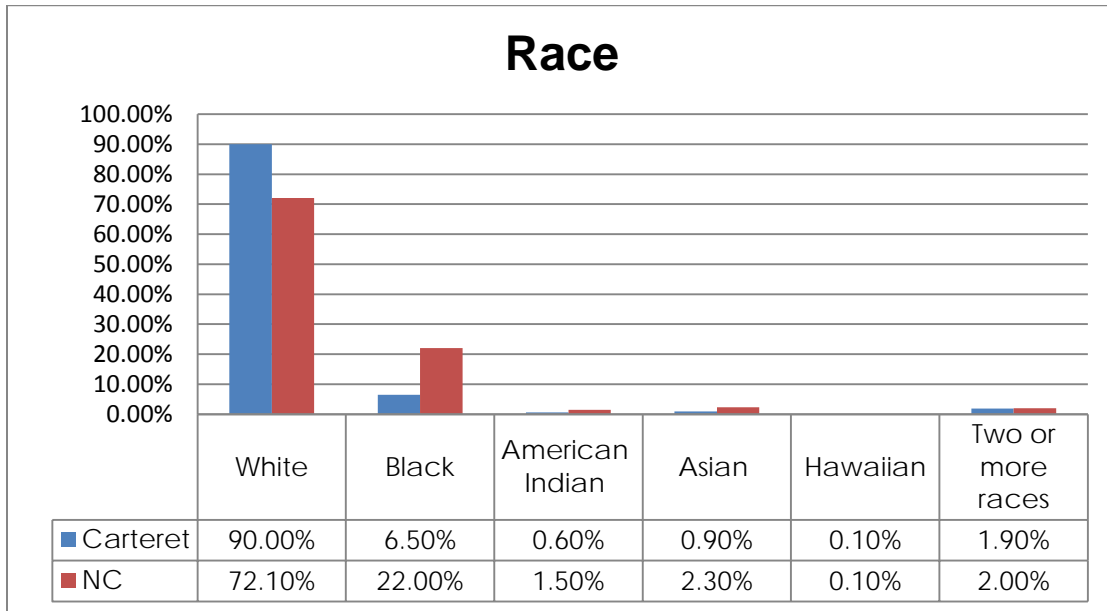


Table 1

The graph above represents the racial distribution of the community (Carteret County) set against that of the state of North Carolina. The statistics are provided by the U.S. Census Bureau. Guidelines provided by the U.S. Office of Management and Budget determine the race categories above and specifically mention that people who identify their origin as Hispanic, Latino, or Spanish may be of any race. The community's population is approximately 90% white, 6.5% African American, 1.9% two or more races, with the remainder consisting of American Indian, Asian, and Hawaiian. The racial distribution for the region is not similar to state or national statistics. The primary differences are the white population, 17.9% greater than state average, and the black population, 15.5% lower than state average.

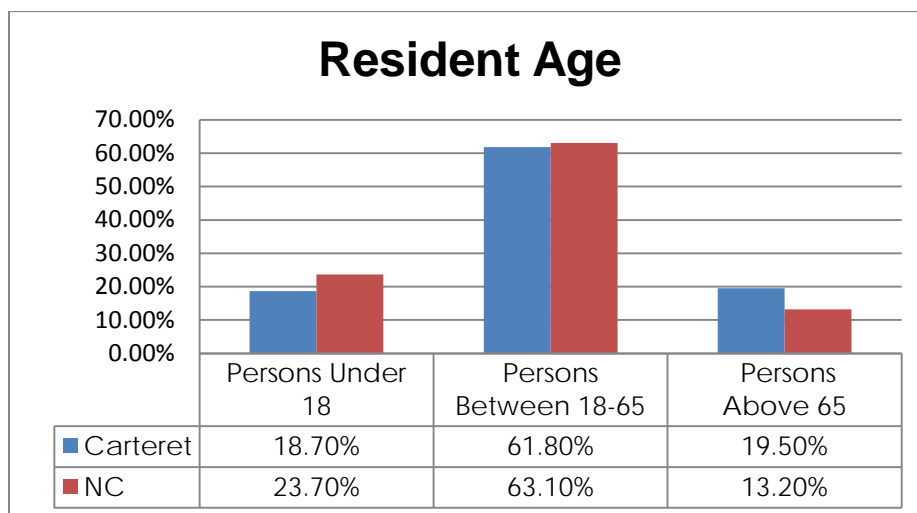


Table 2

Table 2 represents the age distribution of the community (Carteret County) and the state of North Carolina. The age distribution consists of 18.7% of the population under the age of 18, 61.8% between the ages of 18-65, and 19.5% above the age of 65. Age statistics are similar when compared to North Carolina’s statewide percentages. The most notable age difference is that the group under the age of 18 is 5% lower than the state average, and the group above the age of 65 is 6.3% higher than the state average.

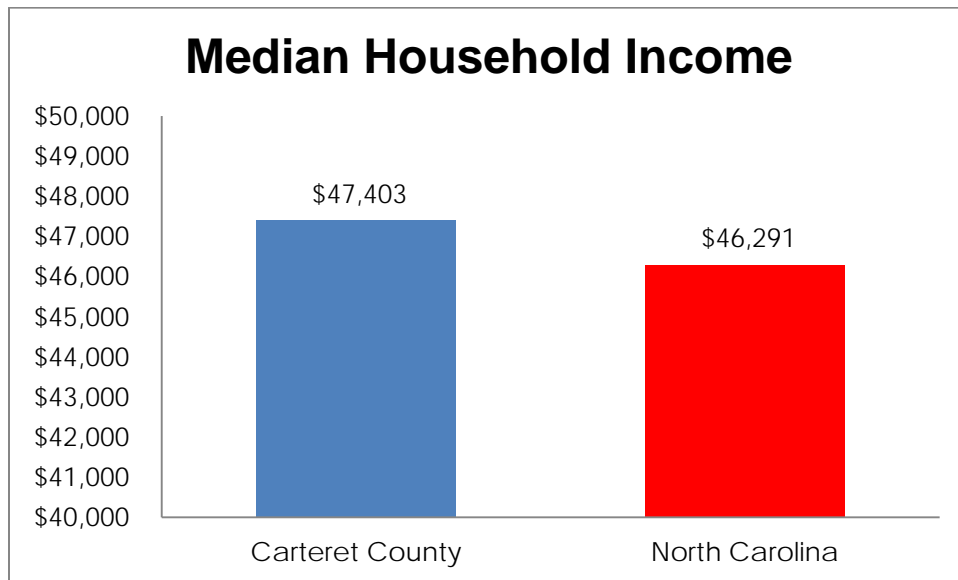


Table 3

Table 3 above represents the median household income distribution of the community (Carteret County) and state of North Carolina. CGH’s service area mean household income is \$47,403, which is \$1,112 higher than the state average.

III. Data Assessment Process

The data assessment process involves collecting statistical data. Prime examples of sources of this statistical data are the U.S. Census Bureau, North Carolina State Center for Health Statistics (NCSCHS), County Health Rankings, National Cancer Institute, and Healthy People 2020. All of these sources were used in the data assessment phase of this report. Numerous websites, nicknamed “warehouses”, store this statistical data on the Internet and generally allow the public free access. The major hurdle of the data assessment process involves sorting through the swarm of statistics, finding a common representation, and communicating the results in an understandable manner.

The US Census Bureau² conducts a full population and housing census every decade and an abbreviated survey providing communities current information relevant to planning investments

² www.census.gov

and services every year. The annual survey polls for information on age, gender, race, income, health insurance status, education, and similar demographic elements. The CHNA utilizes statistical information from this annual survey to build community comparisons.

NCSCHS³ provides high-quality information on the health of North Carolinians and is mandated to administer statistical activities to the state of North Carolina. NCSCHS continuously explores new ways of obtaining, analyzing, and disseminating health data.

The County Health Rankings⁴ program is collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The County Health Rankings show the rank of the health of nearly every county in the nation, and illustrate that much of what affects health occurs outside of the doctor's office. A variety of measures that affect health are shown on the website.

The National Cancer Institute⁵ is part of the National Institutes of Health which is a component of the Department of Health. Established by the National Cancer Institute Act of 1937, the National Cancer Institute is responsible for cancer research and training. The National Cancer Institute's main program, the National Cancer Program, conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients and their families.

Healthy People 2020⁶ provides science-based, 10 year national objectives for improving the health of all Americans. The Healthy People initiative is grounded in the principle that setting national objectives and monitoring progress can motivate action. For three decades, Healthy People has established benchmarks and monitored progress over time in order to encourage collaborations across sectors, guide individuals toward making informed health decisions, and measure the impact of prevention activities.

CGH contracted with Healthy Communities Institute and Dixon Hughes Goodman, LLP to help collect statistical data from the above sources to measure community health and process the data. Healthy Communities Institute has developed a customizable web-based information system designed to give access to high-quality community health assessment data as well as improved health indicator tracking.

We will now present statistical data for the health needs that are most important to the community. The primary target is the target set by Healthy People 2020. These targets are 10 year goals set for the entire nation with the objective of improving the health of all Americans. Trying to meet these benchmarks is important because it encourages collaborations across communities, empowers individuals to make informed health decisions, and measures the

³ www.schs.state.nc.us

⁴ www.countyhealthrankings.org

⁵ www.cancer.gov

⁶ www.healthypeople.gov/2020

impact of prevention activities. If a Healthy People 2020 target does not exist, then the target is selected as the 50th percentile of either all counties in the United States or all counties in North Carolina depending on which data is available. This secondary target is important because it shows whether or not Carteret County is faring better than its peers. Meeting this target suggests that the community is implementing programs, utilizing resources, or exhibiting behavior to fulfill that particular health need. If the bar graph is green, then Carteret County is meeting a target – a red bar graph means the target is not met.

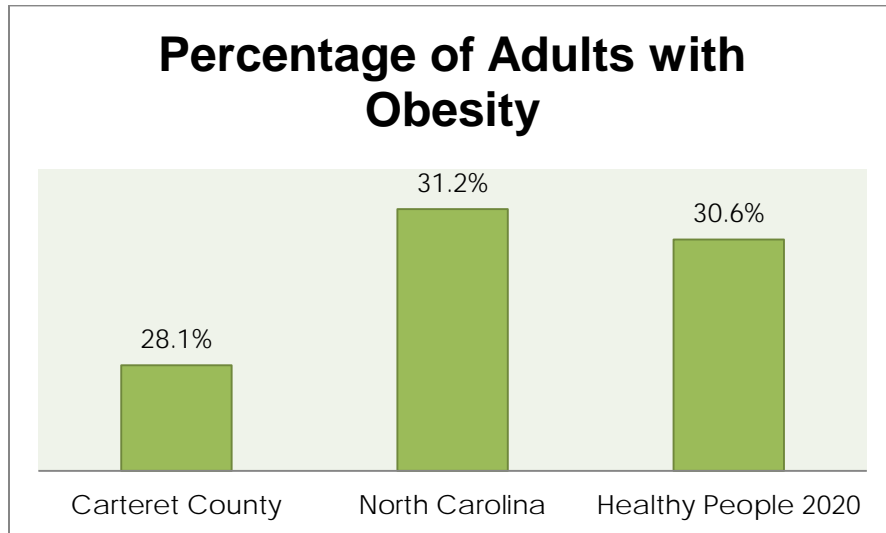


Table 4

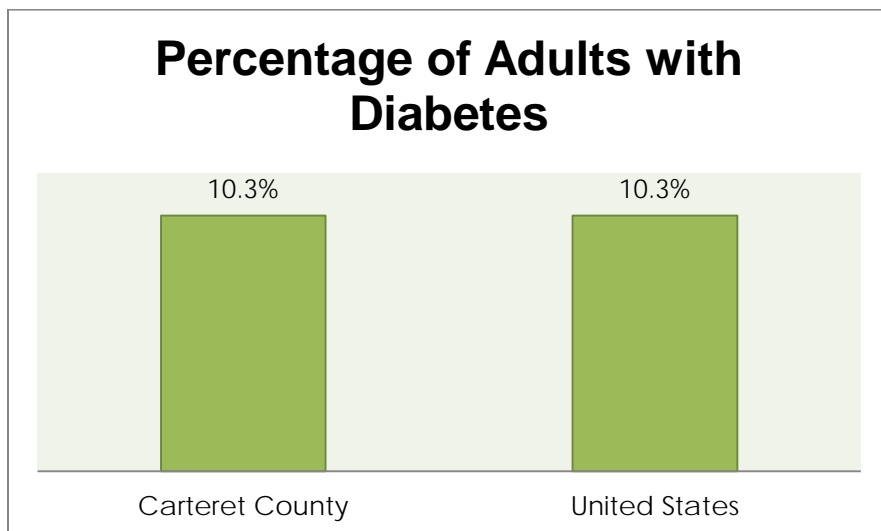


Table 5

Table 4 above shows the percentage of adults with obesity for the county and state along with the Healthy People 2020 target. The statistical data were obtained from County Health Rankings. Table 5 shows the percentage of adults with diabetes for the county and country.

The statistical data were obtained from County Health Rankings. Carteret County is either on par or better than its peers when it comes to the diseases of obesity and diabetes. This may be due to healthier lifestyle choices of the residents of the community.

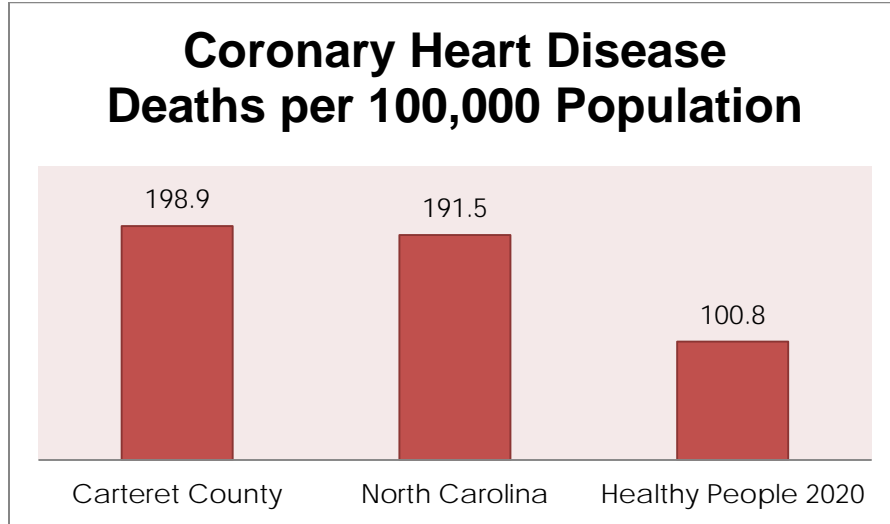


Table 6

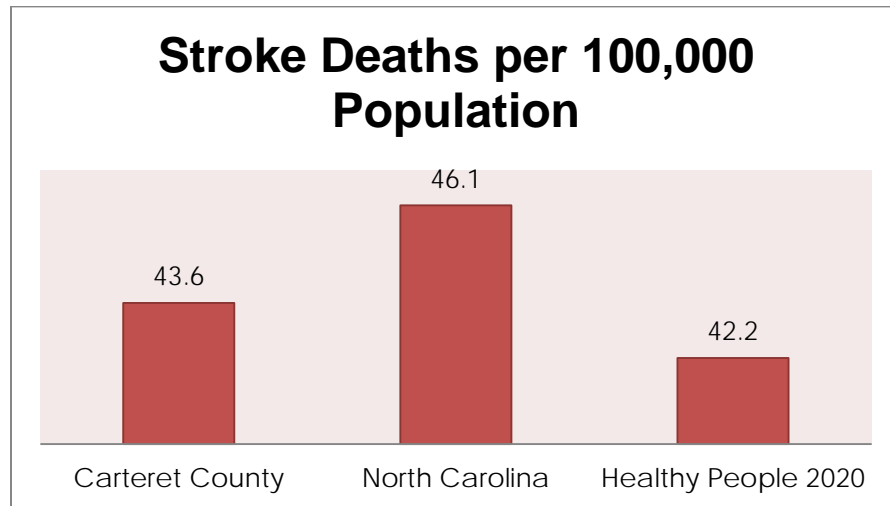
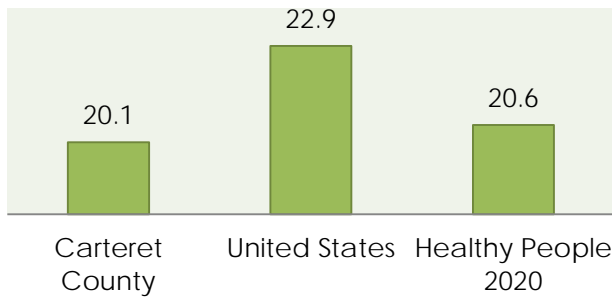


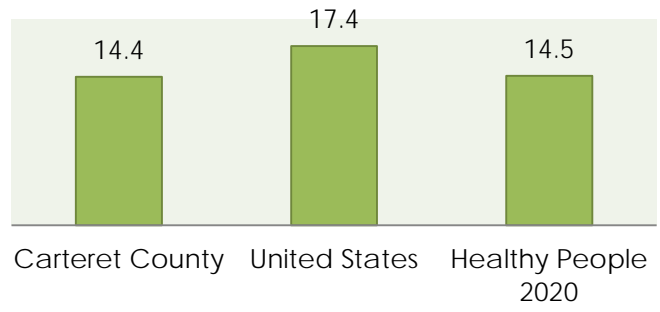
Table 7

Tables 6 and 7 above show the number coronary heart disease deaths and number of stroke deaths per 100,000 population for the county and state along with the Healthy People 2020 target. The statistical data were obtained from North Carolina State Center for Health Statistics. While Carteret County shows positive numbers when it comes to obesity and diabetes, the numbers for heart disease related deaths shows the county has room for improvement.

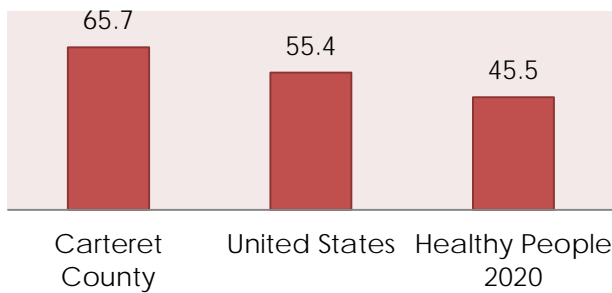
Breast Cancer Deaths per 100,000 Population



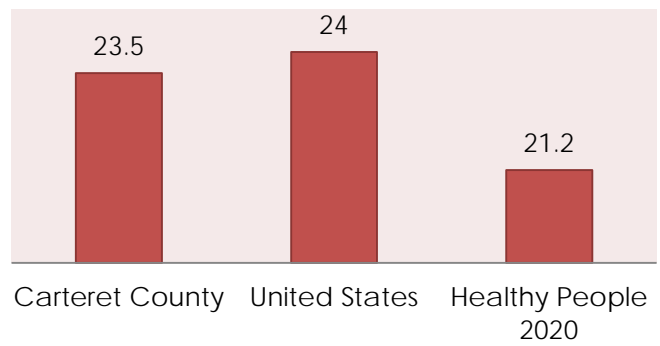
Colorectal Cancer Deaths per 100,000 Population



Lung Cancer Deaths per 100,000 Population



Prostate Cancer Deaths per 100,000 Population



Tables 8, 9, 10 & 11

Tables 8, 9, 10, and 11 show the number of cancer deaths (per specific site) per 100,000 population for the county and country along with the Healthy People 2020 target. The statistical data were obtained from National Cancer Institute. Carteret County is doing well when it comes to breast and colorectal cancer, but not as well when it comes to lung and prostate cancer. Lung cancer appears to be the worst area based on the statistical data. This is the only cancer site where Carteret County is worse than the national average.

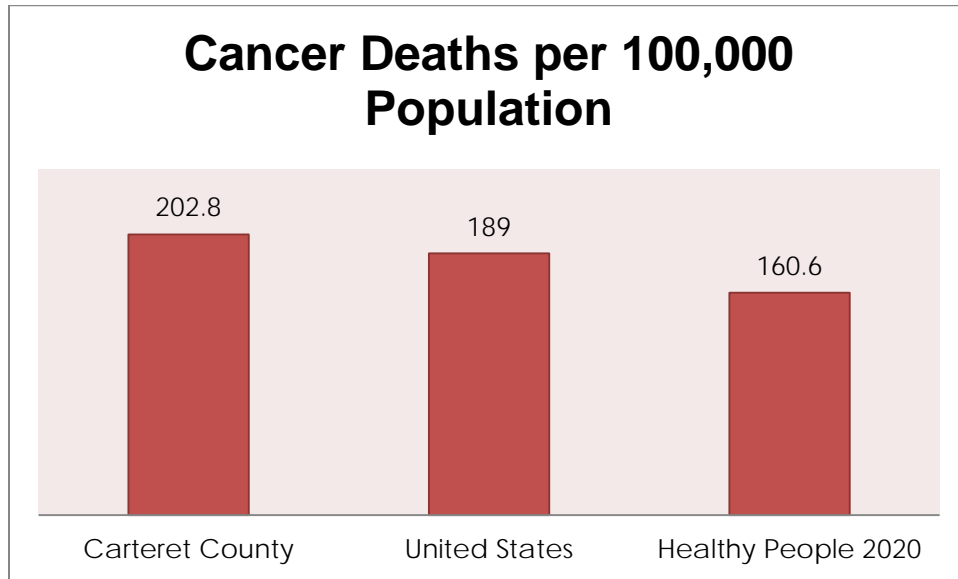


Table 12

Table 12 shows the number of cancer deaths per 100,000 population for the county and country along with the Healthy People 2020 target. The statistical data were obtained from National Cancer Institute.

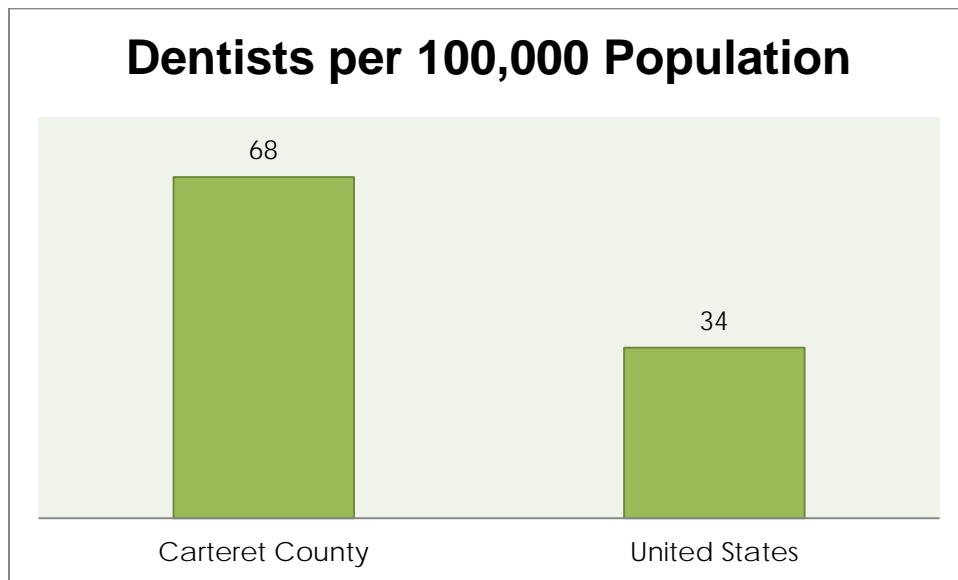


Table 13

Table 13 above shows the number of dentists per 100,000 population for the county and country. The statistical data were obtained from County Health Rankings.

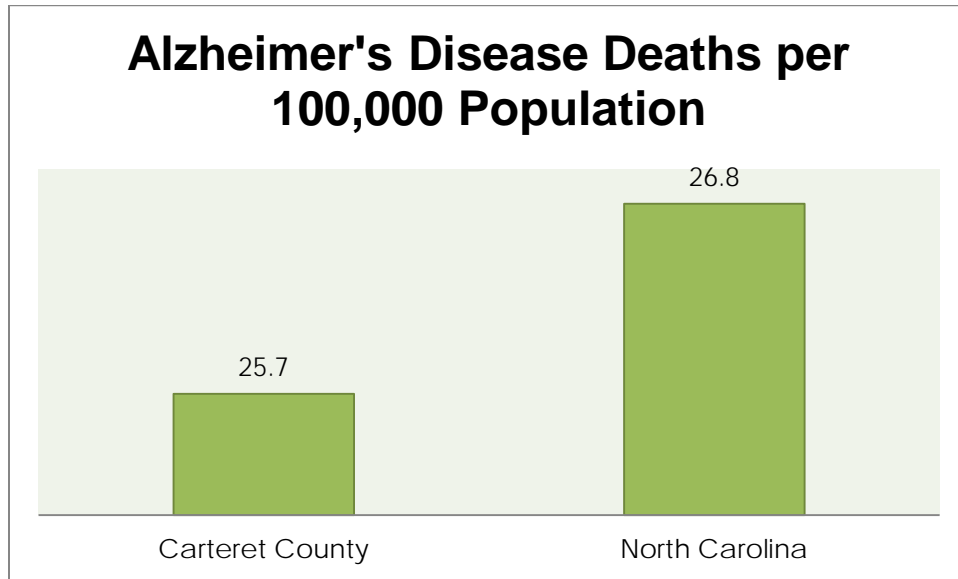


Table 14

Table 14 above shows the number of Alzheimer's disease deaths per 100,000 population for the county and state. The statistical data were obtained from North Carolina State Center for Health Statistics.

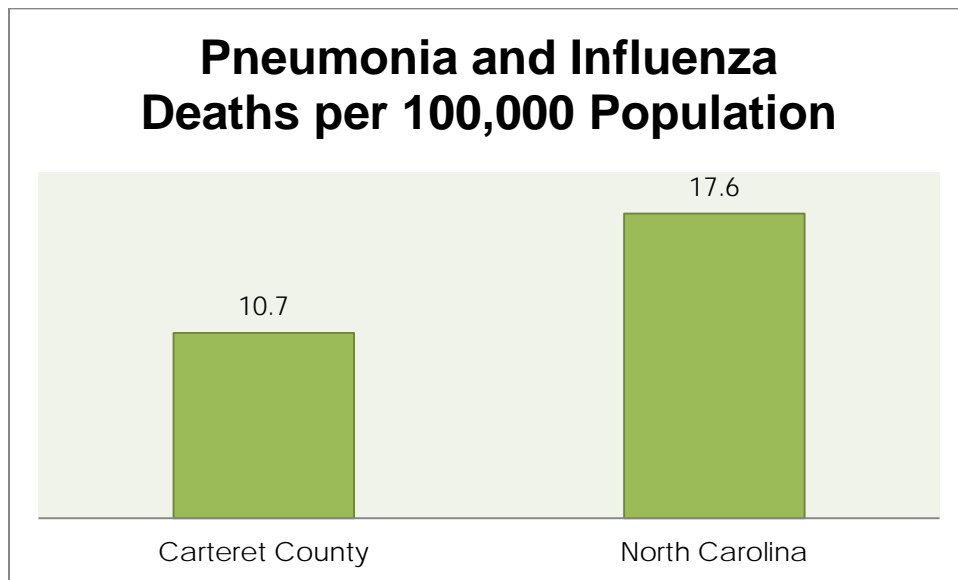
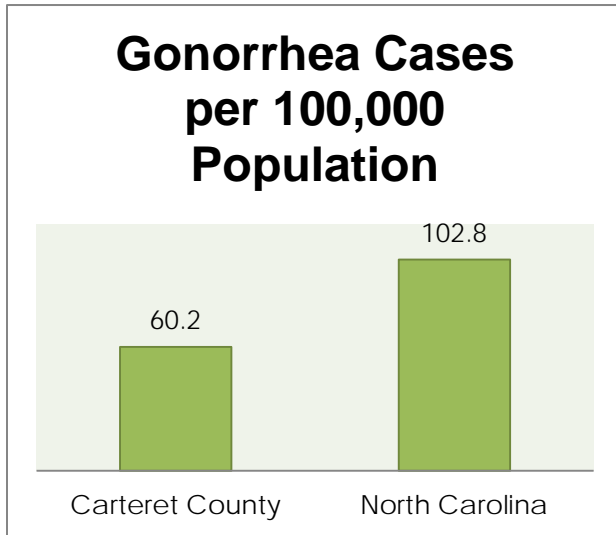
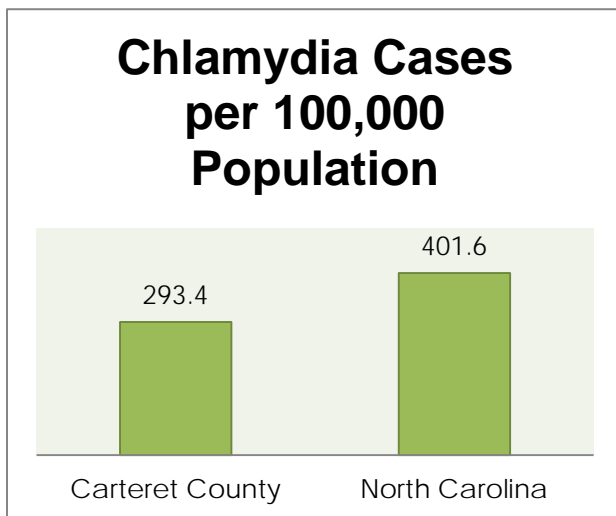


Table 15

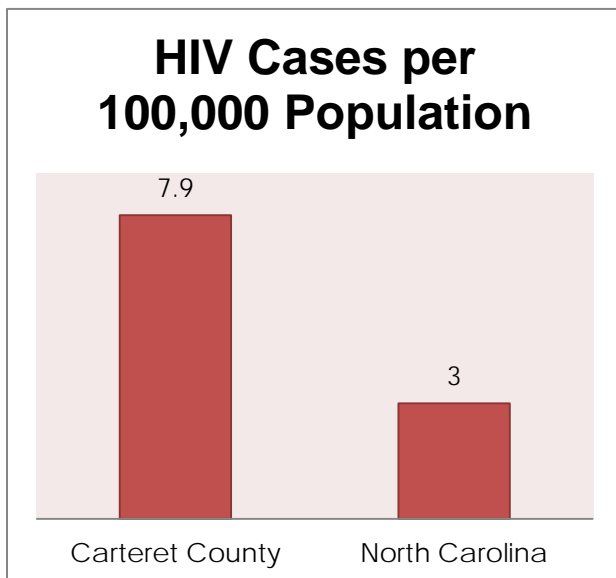
Table 15 above shows the number of pneumonia and influenza deaths per 100,000 population for the county and state. The statistical data were obtained from North Carolina State Center for Health Statistics.



Tables 16, 17, and 18 show the number of chlamydia cases, gonorrhea cases, and HIV cases per 100,000 population for the county and state. The statistical data were obtained from North Carolina Department of Health and Human Services. It appears that Carteret County is successfully battling the less harmful sexually transmitted diseases, but not against the more deadly HIV. It isn't readily apparent from the graphs which factors are contributing to these positive factors, but it is traditionally related to education and preventative practices. For example, Carteret County Health Department has an STD testing clinic located in Morehead that tests for each of these STDs.



Tables 16, 17 & 18



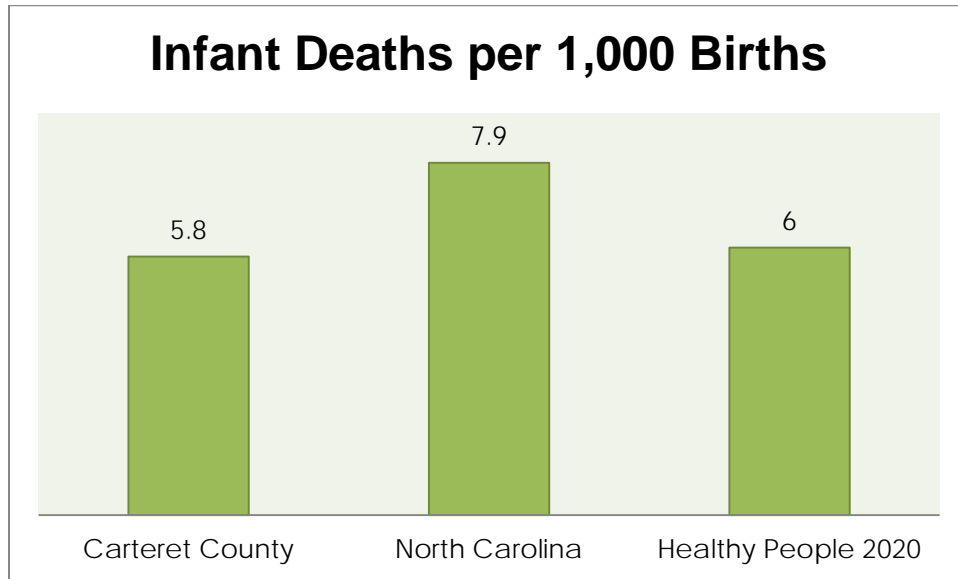


Table 19

Table 19 shows the number of infant deaths within the first year per 1,000 live births for the county and state along with the Healthy People 2020 target. The statistical data were obtained from North Carolina State Center for Health Statistics. The maternal child health staff at Carteret General Hospital, two employees from Carteret County Health Department, and four employees from Carteret County Partnership for Children have undergone National Child Passenger Safety Certification Training and are Child Passenger Safety Technicians.

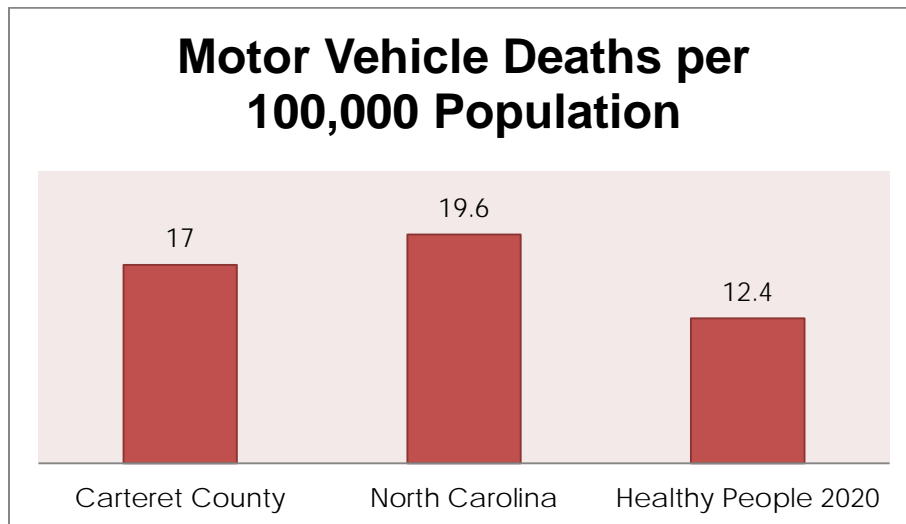


Table 20

Table 20 above shows the number of motor vehicle deaths per 100,000 population for the county and state along with the Healthy People 2020 target. The statistical data were obtained from North Carolina State Center for Health Statistics.

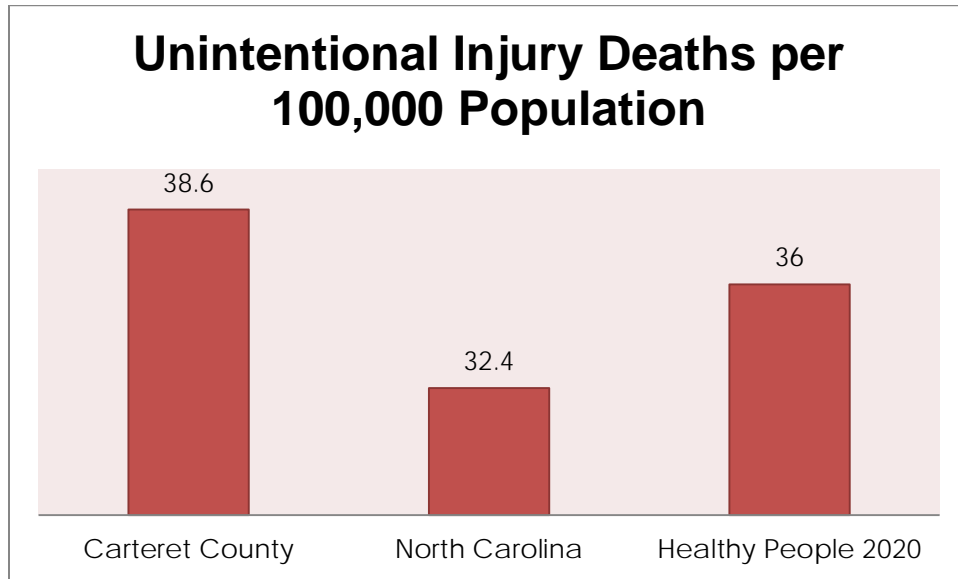


Table 21

Table 21 shows the number of unintentional injury deaths per 100,000 population for the county and state along with the Healthy People 2020 target. The statistical data were obtained from North Carolina State Center for Health Statistics.

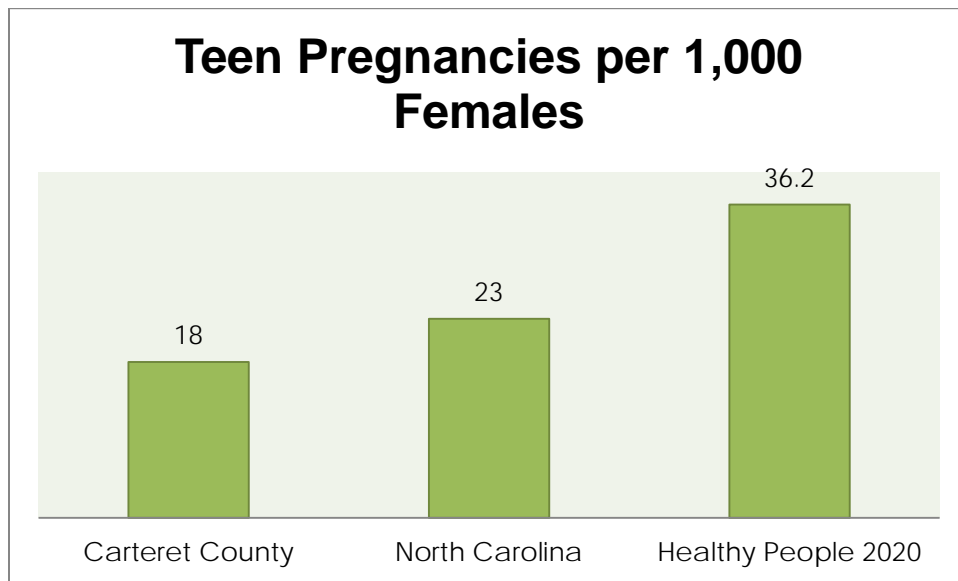
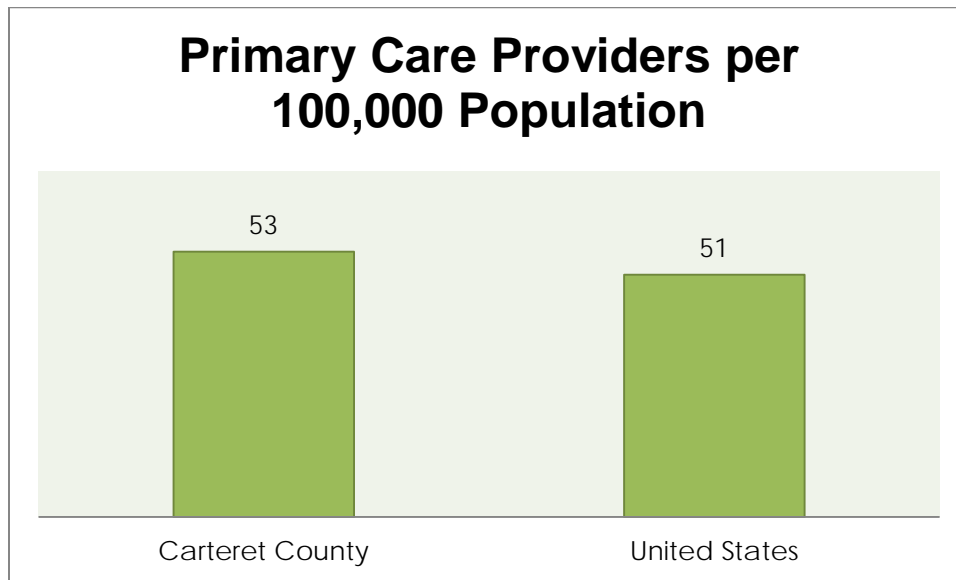
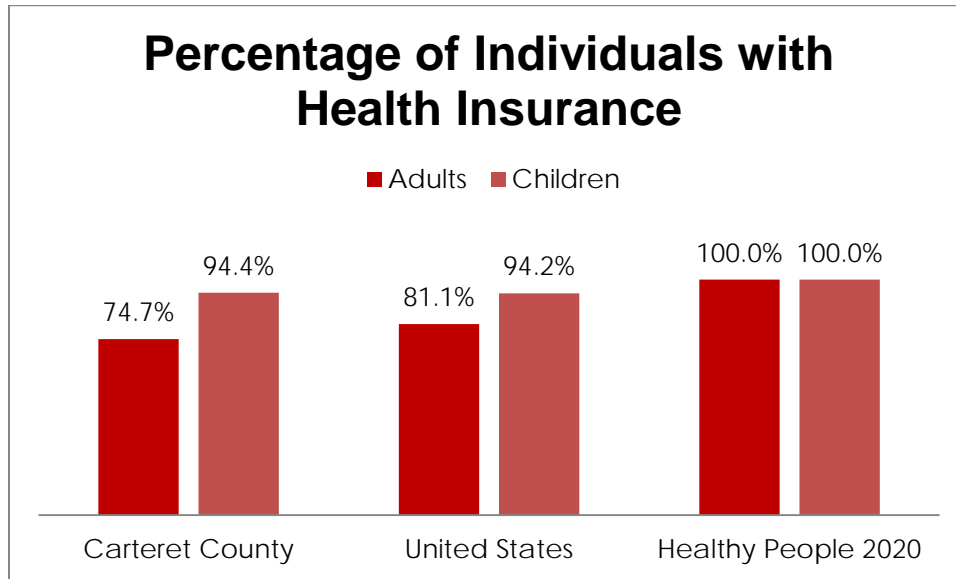


Table 22

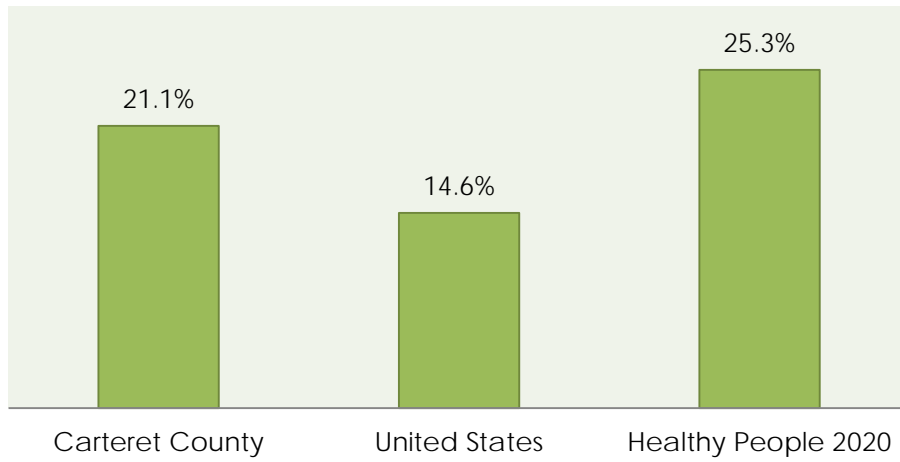
Table 22 shows the number of teen pregnancies per 1,000 females aged 15-17 for the county and state along with the Healthy People 2020 target. The statistical data were obtained from North Carolina State Center for Health Statistics.



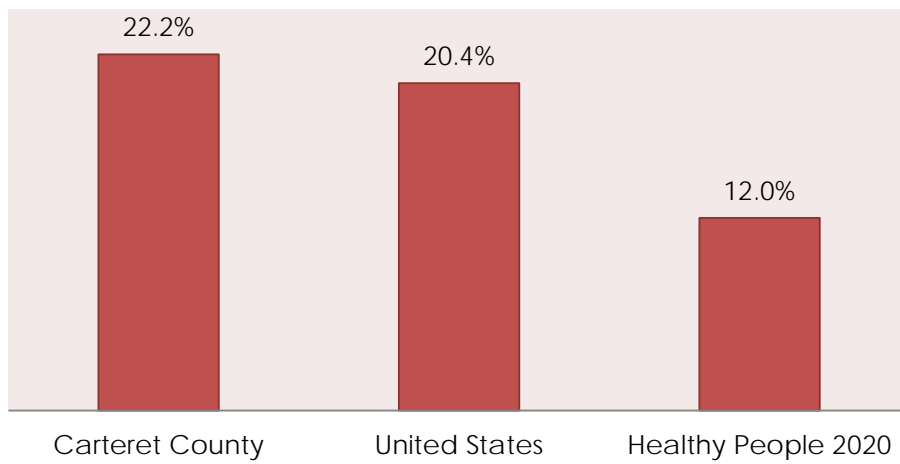
Tables 23 & 24

These two tables show the percentage of adults and children with health insurance for the county and country and the number of primary care providers per 100,000 population. The statistical data for the health insurance were obtained from the US Census, and the statistical data for the primary care providers were obtained from County Health Rankings. Carteret County has an above average amount of primary care providers to accommodate the community. However, the community's adult population is less insured than the majority of the nation, and may not be fully utilizing Carteret County's primary care providers. Also, the statistical data suggests that families are more concerned about health providing insurance for their children than for themselves.

Adults who Drink Excessively



Adults who Smoke



Tables 25 & 26

These two tables show the percentage of adults who drink excessively and smoke for the county and country. The statistical data were obtained from County Health Rankings. The percentages for both behaviors are relatively close for Carteret County. Based upon the Healthy People 2020 targets, it appears that smoking is viewed more negatively than alcohol consumption.

IV. Community Input

The community input portion is generally derived from surveys distributed to residents of the community. A portion of the input must come from a local or state government health department or equivalent agency, as well as from community members of medically underserved, low-income, and minority populations or individuals or organizations that represent the interests of such populations.

CGH and the Carteret County Health Department developed a community opinion survey that was available to residents of the community in written format and through an online survey proctor⁷ to make the survey as widely available as possible. Approximately 549 residents completed the community opinion survey. The survey was open from April to July of 2013 to all residents of the community. Community partners also offered assistance in gathering primary data from the community. We have included a chart that breaks down the demographics of the individuals that completed the survey. The total number of surveys on the chart does not equal the total number of surveys completed - some individuals decided not to answer the question or had both/all of the answers checked. In those situations the question with the invalid response was not used in this chart.

The survey respondent chart shows that a majority of the respondents were female, older, Caucasian, and in the higher income brackets; however, there is representation from minority and low income sections of the community.

Next, we will look at two questions and responses from the survey that represent the medically underserved section of the community.

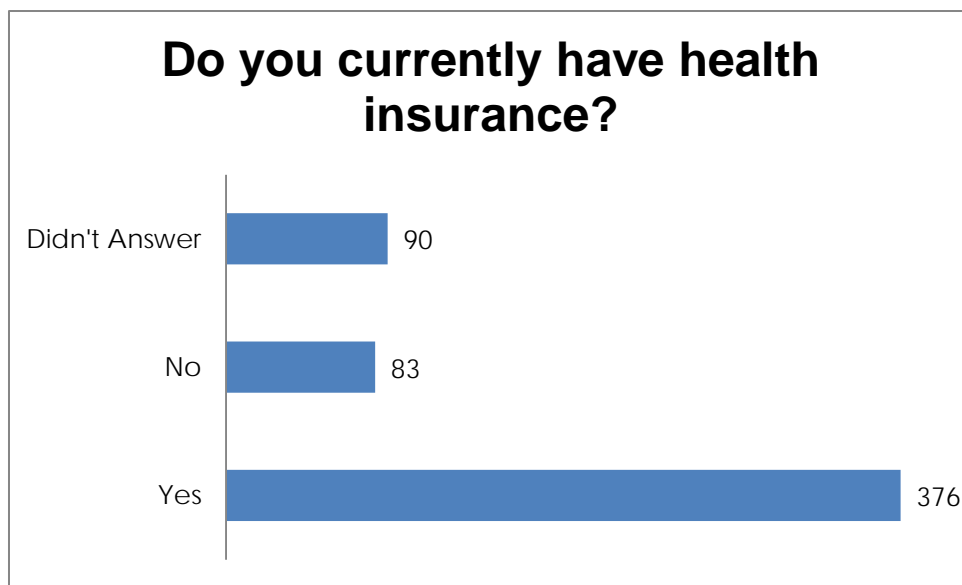


Fig. 2

⁷ www.surveymonkey.com

About 18% of the respondents answered that they do not have health insurance. 90 of the 549 respondents skipped this question.

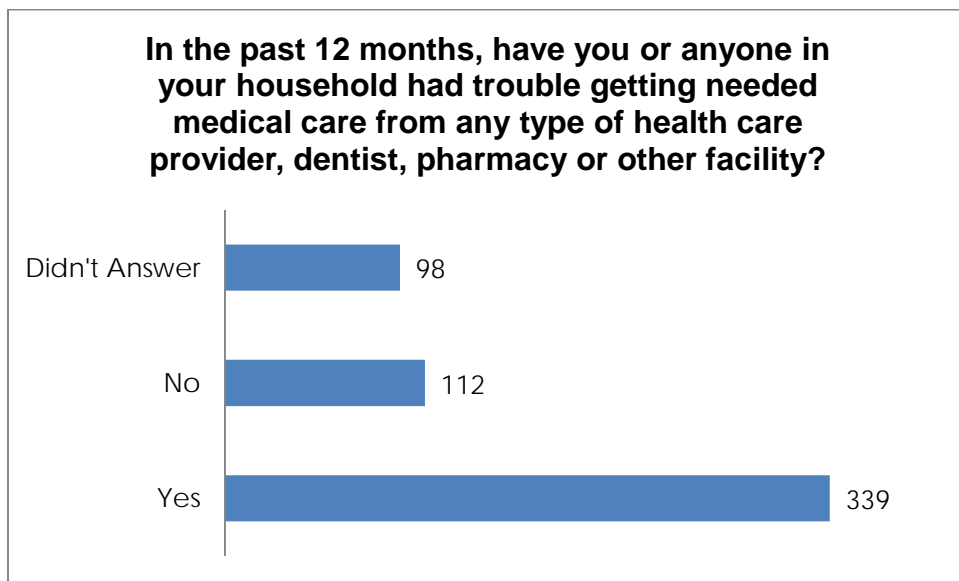


Fig. 3

About 25% of the respondents answered that they have difficulty getting needed medical care. 98 of the 549 respondents skipped this question.

CGH and the Carteret County Health Department also developed a survey for key informants of the community. 500 surveys were sent out to key informants, and 134 surveys were completed. Of these 134 individuals, 24 (or 17.91%) represented the county or municipal government and 58 (or 43.28%) represented the healthcare industry.

Finally, the residents were asked to rank a list of community health needs. The question asked the respondents to consider a health need as either a major problem, somewhat of a problem, or not a problem. These three options were weighted three, two, and one respectively, before the votes were tallied to determine the rank of community health needs.

Ranking	Health Needs	Major Problem	Somewhat of a Problem	Not a Problem	Total
1	Obesity	282	186	15	1,233
2	Diabetes	255	171	26	1,133
3	High Blood Pressure	239	193	20	1,123
4	Cancer	252	167	30	1,120
5	Heart Disease	225	181	26	1,063
6	Stroke	137	223	42	899
7	Asthma	106	240	65	863
8	Motor Vehicle Injuries	70	280	89	859
9	Dental/Oral Health	112	198	89	821
10	Alzheimer's Disease	90	243	46	802
11	Lung Disease	103	209	68	795
12	Pneumonia and Influenza	60	228	88	724
13	Unintentional Poisonings	67	158	113	630
14	Kidney Disease	47	182	84	589
15	STDs	52	169	90	584
16	Infant Death	14	95	167	399

Figure 4

The ranking shows that the community considers obesity, diabetes, cancer, and heart related diseases as the most important health needs.

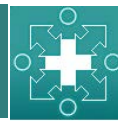
V. Community Health Resources

Carteret County has many resources available to meet the sixteen identified health needs. CGH plays a large role in the community by offering volunteer services, facilitating health fairs and screenings, and sponsoring support groups. The following is a comprehensive list of resources available with contact information.

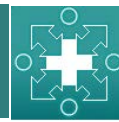
HOME HEATH AGENCIES	
Carteret Home Health Service, Morehead City	808-6081, fax: 808-6573, beeper 247-8446, Hospice 808-6085
Liberty Home Care & Hospice, Morehead City	247-4748, fax: 247-2445, central intake 1-800-999-9883, beeper 808-1009, Jacksonville office 1-800-800-0614
Gentiva Home Health (formerly Tarheel), Morehead City	726-9300, fax: 726-9832, Pollocksville office 1-800-865-4539, fax: 224-0310
Carolina East Home Care	633-8182, fax: 636-0038
Craven Co. Health Dept. Home Health-Hospice	636-4930, fax: 636-5301
Community Home Care & Hospice, Morehead City	672-8301, fax: 672-8306
Continuum Home Care & Hospice, Jacksonville	910-989-2682, fax: 910-989-2691
Onslow Home Health and Hospice	910-577-6660, fax: 910-577-6636

<u>WOUND CENTERS</u>	
Wound Healing & Hyperbaric Center – A Division of Carteret General Hospital	252-808-6450
<u>HOSPICE PROVIDERS</u>	
Hospice of Carteret County	808-6085, fax: 808-6573, beeper 247-8446
Craven Co. Health Dept. Home Health-Hospice	636-4930, fax: 636-5301
Community Home Care & Hospice	672-8301, fax: 672-8306, Morehead City 910-326-1037, fax: 855-240-5473
Continuum Home Care & Hospice, Jacksonville	910-989-2682, fax: 910-989-2691
Liberty Home Care & Hospice	247-4748, fax: 247-2445, central intake 1-800-999-9883 beeper 808-1009, Jacksonville office 1-800-800-0614
Onslow Home Health and Hospice	910-577-6660, fax: 910-577-6636
United Hospice	252-633-4311, fax 252-633-3009
<u>HOME INFUSION COMPANIES</u>	
Advanced Home Care, Greenville	252-353-6800, fax: 877-242-3298, New Bern 638-8400
Coram Healthcare, Morrisville	1-800-245-2463, fax: 919-461-5101
Critical Care	1-866-239-6037 fax: 1-877-501-1469
CuriScript Infusion Pharmacy/ Walgreens	800-304-0123 fax: 877-413-5069
Jabez Home Infusion	1-800-432-5114, fax: 252-758-6904
Liberty Medical Specialties, Whiteville	1-800-297-7567, fax: 910-640-3893
Walgreen's Option Care, Wilmington	1-800-849-4901, fax: 910-791-7723 central intake 800-948-6606, fax 919-481-1881
<u>DME – DURABLE MEDICAL EQUIPMENT COMPANIES</u>	
Advanced Home Care, New Bern	638-8400, fax: 355-0446
Apria Healthcare, Wilmington	1-800-937-9792, fax: 910-343-9525
Carolina Home Medical	New Bern 1-877-636-1711, Jacksonville 1-866-455-9982 Morehead City 222-0038, fax: 726-0516
CVC (Carolina Vital Care), Morehead City	726-3556, fax: 726-4227
Family Medical Supply, New Bern	910-890-1508
Freedom Medical Supplies, Morehead City	247-6282 fax: 247-0574
Johnson Drug Company, Jacksonville	1-888-272-2273, fax: 910-347-9298
Kight's Medical Corp, Wilmington	910-395-6663 fax: 910-395-5951
Liberty Medical Specialties Morehead City	247-3657, fax: 726-9320
Lincare, New Bern	252-634-3355, fax: 252-635-3350
McCarthy Square Pharmacy, New Bern	252-514-2900, fax: 252-514-2400
Medical Park Pharmacy, Morehead City	726-0777, fax: 808-3907
Norcare, Jacksonville	1-888-880-5077, fax: 910-455-8234

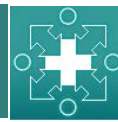
Pediatric Services of America, Greenville	1-800-339-2484, fax: 809-1153
Professional Nursing Service, Morehead City	252-247-6911 fax: 252-809-1153
Skubinna Home Medical of Swansboro	910-325-1300 fax: 910-325-1500
<u>PRIVATE DUTY & PERSONAL CARE AGENCIES</u>	
Accommodating Home Care Service, New Bern	252-635-9005 fax: 252-635-9006
Arcadia Healthcare (personal care, private pay only)	727-0127, fax: 252-574-2770
Extensions of Life	726-2338
Friendly Caregivers	252-240-1234
Help-at-Home	1-866-672-3100
Home Companion Service	252-726-6575
Home Helpers	1-888-727-0330/ 252-727-0330, fax: 252-727-0110
Interim Health Care	(referral line) 1-800-849-6144, fax: 910-483-6049
Lower Cape Fear Hospice, Inc., Wilmington	1-800-733-1476
Maxim Health Care (personal care)	726-8746, fax: 726-6673, Jacksonville 1-800-304-0753
Pediatric Services of America, Inc., Greenville	1-800-375-2129, fax: 252-756-9337
Professional Nursing Service (personal care)	247-6911, fax: 247-1034
University Home Care, Greenville area only	1-800-227-3894
Wellcare (personal care)	910-353-9788, fax: 910-353-9895
<u>NEGATIVE PRESSURE WOUND THERAPY PROVIDERS</u>	
KCI wound Vac - www.kci1.com for Fast Form	1-800-275-4524, fax: 1-888-245-2295
Liberty Medical Specialties - Whiteville	1-800-297-7567, Local 1-910-642-2250 , fax: 1-910-642-0109
Apria (Smith-Nephew) Wound Care Management	800-780-1228, fax: 800-323-1882
<u>PHARMACIES</u>	
Beaufort Drug Company	728-2006
Bell's Drug Store, Beaufort	728-3810
CVS Pharmacy	Beaufort 728-4115, Morehead City 726-0555, Emerald Isle 354-7541
Rite Aid Drug	Beaufort 728-7700, Morehead City 726-4104, Fax: 727-0551
	Atlantic Beach 247-6933, fax: 247-2902
Family Pharmacy & Home Medical, Newport	223-3291, fax: 223-2191
K-Mart, Morehead City	247-2174
Medical Park Pharmacy, Morehead City	726-0777, fax: 726-6497
Medical Park East	504-2800, fax: 504-2805
Medical Park Pharmacy West	726-0279 fax: 726-0792
Morehead City Drug Company	726-2106, fax: 726-4457
O'Neal's Drug Store, Newport	223-3080, fax: 223-3090



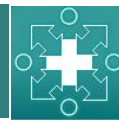
Sea Level Pharmacy	225-0601 or 225-4921, fax: 225-1838
Walgreens	Morehead City 222-3643, Swansboro 910-325-0036
Wal-Mart, Morehead City	247-2501
<u>NURSING CENTERS ICF/SNF</u>	
Croatan Ridge (formerly Britthaven of Newport)	223-2560, fax: 223-3370
Crystal Bluffs	726-0031, fax: 726-5831
Harborview Healthcare Center	726-6855, fax: 808-2074
	Harborview Towers 726-0453, fax: 726-3526
Snug Harbor on Nelson Bay	225-4411 (adm X 241),fax: 225-3931
	Health Care Center ext: 227, Social Work x: 224
Heritage Healthcare	225-2408, 225-4611, fax: 225-1228
Cherry Point Bay (formerly Britthaven of Havelock)	444-4631, fax: 444-5799
Bayview, New Bern	638-1818, fax: admission 633-4049, 636-5636
River Point Crest (formerly Britthaven of New Bern)	637-4730, fax: 638-3552
Two Rivers, Trent Campus	638-6001, fax: 638-9304
Two Rivers Health Care, Neuse Campus	634-2560, fax: 638-1485
Premier Nursing & Rehab (formerly Britthaven of Jacksonville)	910-353-7222, fax: 355-2659
Carolina River (formerly Britthaven of Onslow)	910-455-3610, fax: 938-2659
Brookstone Living Center, Pollocksville	252-224-0112, fax: 252-224-1076
Ridgewood Manor, Washington	252-946-9570, fax: 252-946-3715
Ombudsman	1-800-824-4648, 252-638-3185 ext 3007
<u>FAMILY CARE/REST HOMES</u>	
Harris Family Care Home, Beaufort	728-6525, fax: 728-2801
Rimmer Family Care Home, Beaufort	247-7830, fax: 728-2801
Carebridge Assisted Living, Jacksonville	910-347-1300
Croatan Village, New Bern	634-9066, fax: 634-1862
<u>ASSISTED LIVING</u>	
Brookdale - Carolina House, Morehead City	726-4454, fax: 726-9709
Snug Harbor on Nelson Bay	225-4411 ext: 241, fax: 225-3931
Carteret House Assisted Living, Newport	223-2600, fax: 223-4754
<u>SPECIALITY HOSPITALS</u>	
Kindred Hospital, Greensboro	1-336-271-2800, fax: 336-271-2734
LifeCare Hospital, Rocky Mount	1-877-852-5822, fax: 252-451-4045



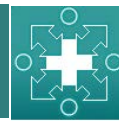
<u>IN-PATIENT REHABILITATION CENTERS</u>	
Carolina East Rehab, New Bern	(admissions) 633-8020, fax: 633-8294 (referral) Reports: 633-8022, direct fax: 633-8294
Coastal Rehab Hospital, Wilmington	910-343-7845, fax: 910-815-5623
Duke Rehab, Durham	919-684-4551, fax: 919-681-8642
Heritage Hospital Rehab (Vidant Medical Center /Tarboro)	252-641-7460, fax 252-641-7465
Lenoir Memorial Rehab Center	252-522-7776, fax: 252-522-7867
Regional Rehab Center, Greenville	252-847-4345, fax: 252-847-8222, Reports 252-847-4441, 252-847-5143
UNC Hospitals Rehab, Chapel Hill	919-966-5929, fax: 919-966-2595
WakeMed Rehab, Raleigh	919-350-7876, fax: 919-350-8791
<u>OUT-PATIENT REHABILITATION CENTERS</u>	
Carteret General Hospital Therapy Dept	808-6461, fax: 808-6990
Beaufort Physical Therapy	838-0222, fax: 838-0224
Carolina Physical Therapy & Sports Med Center	Morehead City 726-9777, fax: 726-8767 Havelock office 444-5600, fax: 444-8966 New Bern 633-6099, fax: 633-4047
Carteret Physical Therapy Associates, Inc.	247-2738, fax: 240-3882
Moore Sports Therapy and Rehab	252-808-3151, fax: 808-3120
Specialty Center for Physical Therapy	726-1802, fax: 726-1805
Onslow Rehab Center, Swansboro	910-326-3066, fax: 910-326-3231
Onslow Hospital Rehab	910-577-2372, fax: 910-577-2625
Peak Performance PT	Havelock 447-4055, fax: 447-4001 Greenville 252-329-8800, fax: 252-329-8866 Jacksonville 910-936-7555, fax: 910-938-7544 New Bern 636-9800, fax: 636-9855
Snug Harbor	Physical and Occupational Therapy 225-3131, Fax: 225-6221
Therapy Center of Cedar Point	393-8828, fax: 393-7928
<u>GENERAL MEDICAL HOSPITALS</u>	
Baptist Medical Center, Winston-Salem	336-716-2011
Camp Lejeune Hospital	910-450-4300
Carolina East Medical Center, New Bern	633-8111
Duke University Medical Center, Durham	919-684-8111
Duplin General Hospital, Kenansville	910-296-0941
Lenoir Memorial Hospital, Kinston	252-522-7000
New Hanover Regional Medical Center, Wilmington	910-343-7040
Onslow Memorial Hospital, Jacksonville	910-343-7000
Vidant Medical Center, Greenville	252-847-4100
University Of North Carolina Hospitals, Chapel Hill	919-966-4131



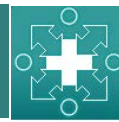
Veteran Affairs Hospital - Durham	919-286-1441, Admin Officer of the Day ext 6250
Wake Medical Center, Raleigh	919-350-8000
Wayne Memorial Hospital, Goldsboro	919-736-1110
<u>VETERAN AFFAIRS HOSPITAL/TRANSFER COORDINATORS</u>	
Asheville, NC	800-932-6408 (x15219)
Beckley, WV	304-255-2121 (x4778)
Durham, NC	919-286-0411 (x6250)
Fayetteville, NC	910-822-7002
Hampton, VA	757-722-9961 (x2122)
Richmond, VA	804-675-5824
Salem, VA	540-982-2463 (x1769)
Salisbury, NC	704-638-9000
Durham VA Case Managers: (to assist with transfers)	919-286-0411 x2142 or x2141
<u>TRANSPORT SERVICES (WITHIN CARTERET COUNTY)</u>	
Carteret General Hospital (Paramedic)	252-808-6133
Crystal Coast Medical Transport (CCMT) (Basic Life Support only)	252-808-5555
(other transportation resources listed at end of agency section)	
Friendly Transport	252-808-3400
<u>PSYCHIATRIC & SUBSTANCE ABUSE HOSPITALS / RESOURCES</u>	
Alamance Regional	1-336-538-7888
Behavioral Health Services, Beaufort Co. Medical Center	252-975-4416
Broughton Hospital, Morganton, NC	828-433-2111
Brynn Marr, Jacksonville	1-800-822-9507, 910-577-1400, fax: 910-577-2799
	Administration – 910-577-1900
Cherry Hospital, Goldsboro	919-731-3326
Coastal Plain Hospital, Rocky Mount	1-800-234-0234, Administration – 252-937-5404
Crossroads, Carolina East Medical Center, New Bern	633-8204, fax: 633-8198
Day by Day, Smithfield	1-919-965-6550
Duke General	919-684-0100
Outpatient Psychiatry	919-684-8111
Durham Regional - Behavioral Health	919-470-6137
Duplin General Psych Unit, Kenansville	910-296-0401, 910-296-2876/ 2877
East Carolina Behavioral Health (Local Management Entity)	877-996-3973 or 877-685-2415
Frye Regional, Hickory (Metal Retardation and Developmental Disabilities Unit)	828-315-5719



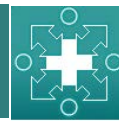
Holly Hill, Raleigh	1-800-447-1800
Northside Mental Health Center, Ahoskie	252-209-3056
The Oaks, New Hanover Regional, Wilmington	910-815-5625
Onslow Carteret Behavioral Health Services Screening, Triage, and Referral	1-888-737-0327
Recovery Innovations Crisis Ctr., Jacksonville	910-353-5118, fax: 910-577-1338
OPIOID Treatment Center (methadone clinic), New Bern	252-353-5346
Vidant Medical Center, Psych Unit	252-847-7264, Beeper: 252-413-4117
Port Detox Center, Greenville	252-413-1637, fax: 252-413-1818
Port Detox Center, Ahoskie	252-332-5086, fax: 252-332-5243
Port Human Services, New Bern	252-672-8742 x201 or x202
Ray G. Silverthorne Center (Substance Abuse / Mental Illness)	252-975-8854, fax: 252-975-8887
Thomasville, Geriatric Psychiatric Unit	336-476-2446
Walter B. Jones Alcohol and Drug Treatment, Greenville	252-830-3426
Wayne Memorial Hospital Psych. Unit	919-731-6255
Wilmington LME	910-550-2600
Wilmington Treatment Center	1-800-992-3671, fax: 910-762-7966
Adolescent Psych.	Holly Hill, Raleigh 1-800-447-1800
	Moses Cone, Greensboro 336-832-9600
	U.N.C. Chapel Hill 919-966-8721
	Baptist Hosp./WFU, Winston-Salem 336-716-2011
	John Umstead Hospital, Butner 919-575-7211
	Fax: 919-575-7643
Carteret County Sheriff's Department	252-504-4800
<u>AGENCIES/ COMMUNITY RESOURCES</u>	
<u>CHILDREN'S SERVICES</u>	
Acorn Center for Families	727-0040
Boys and Girls Club, Beaufort 504-2465, Morehead City	726-6584
Carteret County Child Service Coordination Program	728-8550
Carteret Co. Child Support, Morehead City	247-1129
Carteret Co. Schools	728-4583
Children's Developmental Services Agency	514-4770
Child Care Resource & Referral of Carteret Co.	727-0445
Coastal Community Action, Inc	223-1630
Developmental Evaluation Center, New Bern	514-4770, fax: 514-4773
Easter Seals, Raleigh	1-800-662-7119
Family Support Network of NC	1-800-852-0042
Make-a-Wish Foundation	1-800-722-9474
Newport Developmental Center for Children	223-4574, fax: 223-4920



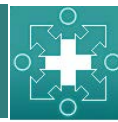
Carteret County Partnership for Children	727-0440
<u>COUNSELING/EMOTIONAL SUPPORT</u>	
American Red Cross	637-3405
Coastal Pregnancy Care Center	247-2273
Carteret County Domestic Violence Program	24 hr 728-3788, 726-2336
Carteret County Literacy Council	808-2020
Carteret County Rape Crisis Program	504-3668, 24 hr – 725-4040
Carteret County Women’s Resource Center	247-6585
HIV Support (Health Dept)	728-8550
Independent Living	514-4806
Vocational Rehabilitation	247-2037
Consumer Credit Counseling (Fayetteville office)	888-381-3720 x21
Nursing Home Complaint Hotline	1-800-624-3004, 919-733-8499
LeChris Counseling Services	726-9006
RHA Crystal Coast Therapy	808-0052
<u>DEPARTMENT OF SOCIAL SERVICES/ HEALTH DEPARTMENTS/ MENTAL HEALTH</u>	
Carteret Co. Dept. of Social Services	728-3181, fax: 728-3631
Carteret Co. Health Dept.	728-8550
LeChris, Morehead City	726-9006
Craven Co. Dept. of Social Services	636-4900
Craven Co. Health Dept.	636-4920
Onslow Co. Dept. of Social Services	910-455-4145, fax: 910-455-2901
Onslow Co. Health Dept.	910-347-2154
Recovery Innovations Crisis Center – Jacksonville NC	910-353-5118
CoastalCare, triage and referral	888-737-0327
<u>DISABILITY SERVICES</u>	
American Diabetes Association	1-800-342-2383
American Red Cross	637-3405
Blind Services, Barbara Hanson, Carteret County Department of Social Services	728-3181
Consolidated Work Opportunities, Inc. - Employment	444-0918
Epilepsy Association	1-800-451-0694
Handicap Parking Permit, Motor Vehicle	726-7695
Social Security Administration	637-1703, 1-800-772-1213
Station Club	252-240-1025
Vocational Rehabilitation, Morehead City	247-2037
Vocational Rehabilitation, Jacksonville	910-455-1445



<u>FOOD/ CLOTHING**</u>	
Caroline's Collectibles	726-3081
Carteret County Department of Social Services (Intake worker can also provide assistance with vouchers for Martha's Mission)	728-3181
**Carteret County Humane Shelter Thrift Shop	726-1399
Hope Mission	240-2359
Martha's Mission Cupboard (Monday/Wednesday/Friday)	726-1717
St. Andrew's Episcopal Church Thrift Store	726-4747
St. James United Methodist Church	223-4231
Hem of His Garment	910-326-1811
**Second Blessings (Christian Thrift Store)	726-7921
<u>GUARDIANSHIP</u>	
Carteret Co. Department of Social Services – Adult Protective Services	728-3181
Clerk of Court	838-8151
Estate Clerk of Court	838-8149
Health Department	728-8550
<u>HOUSING</u>	
Coastal Community Action	223-1630
Carteret County Domestic Violence Shelter	728-3788
Coastal Women's Shelter	638-4509, 638-5995
Habitat for Humanity	223-2111
New Bern Shelter	637-4185, 633-2021
Onslow Community Outreach, 600 Court St., Jacksonville	910-347-3227
Second Chance Mission, 309 Court St., Jacksonville	910-455-7111, 910-455-6264
<u>LOW INCOME</u>	
Crystal Coast Housing (Mon.-Thurs. 8-3:15)	Morehead City 726-8042
Eastern Carolina Regional Housing Authority (Macon Court, Kings Terrace)	Morehead City 726-4401
Westwood Square Apartments (Mon.-Thurs. 9-3)	Morehead City 247-4666
Beaufort Housing Authority	728-3226
Brentwood Village Apartments (Mon.-Wed. 10-3)	Beaufort 728-4557
Carteret Court Apartments	Beaufort 728-2679
Elm Green	Newport 223-1266
Blue Point Bay	Newport 222-0015
<u>LEGAL SERVICES</u>	
Carteret County Magistrate	Beaufort 838-8143 / Cape Carteret 393-8568



Pamlico Sound Legal Services	1-800-672-8213
Seniors' Health Insurance Information Program (help w/ Medicare forms)	222-6352
<u>MEALS ON WHEELS</u>	
Senior Citizens Center - Home Delivered Meals	247-2626
	Morehead City 726-4654, All Saints 247-6909
	Beaufort 342-7983
Cape Carteret/Emerald Isle	393-7725 or 354-2762
Newport and Cape Carteret	223-5706
Onslow County: Council on Aging	910-455-2747
Swansboro: Hem of His Garment	910-326-1811
<u>MEDICINES/MEDICAL CARE</u>	
Broad Street Clinic, 35 th Street, Morehead City	726-4562, fax: 726-4459
Carteret County Department of Social Services (ask for service intake worker)	728-3181
Carteret Christian Ministries, Morehead City (Mon, Wed, Fri 2-4pm)	247-2543
Salvation Army, Morehead City	726-7147
Senior Pharmacy Program	638-3657
St. James United Methodist Church, Newport	223-4231
MERCI Clinic, New Bern	633-1599
Religious Community Services, New Bern	633-2767
Hem of His Garment, Swansboro	910-326-1811
<u>RETIREMENT COMMUNITIES</u>	
Berne Village, New Bern	252-633-1779, fax: 252-637-9428
Ekklesia Apartments, Morehead City	726-0076, 240-3315
Harborview Towers	726-0453, fax: 726-3526
<u>SUPPORT GROUPS</u>	
Alcoholics Anonymous/Al-Anon/Alateen/Accountable Care Organization	726-8540
AIDS / HIV:	24 Hour Hotline 1-800-232-4636
	Onslow Carteret Behavioral Healthcare Services (Counseling) 888-737-0327
Alzheimer Support:	Duke Family Support Program 1-800-672-4213
	Alzheimer Assoc. 1-800-228-8738, 919-832-3732
American Cancer Society	1-800-227-2345
Tickled Pink	808-6642
Look Good Feel Better Group	808-6642



Vidant Medical Center Cancer Support Groups	252-847-7943
American Lung Association	1-800-586-4872
Bereavement Support	Carteret General (1st Mon 12:00) 808-6085
Brain Injury Support Group – Tricounty - 1st Sat. 10AM Home Place Assisted Living, New Bern	670-6625
Breast Feeding Support Program	222-6353
RAAB Clinic	808-6177
Diabetic Care and Education	247-3300
Diabetic Outpatient Education / Support CGH	808-6689
Domestic Violence Support Group	247-3788
Hearing Loss Support Group	1-800-205-9915
Hepatitis C Awareness Support Group	910-526-5845
Man to Man, Prostate Cancer	726-8836
Narcotics Anonymous:	
Mon. 8PM - St. Peter's Methodist Church, 111 Hodges St., Morehead City	
Tues. 8PM - 1st United Methodist Church, 900 Arendell St., Morehead City	
Thurs. & Fri. - Webb Library, 9th & Evans St., Morehead City	
Ostomy Support Group	633-8166
Smoking Cessation, Freedom from Smoking	808-6611
Stroke Support Groups:	
Coastal Stroke Club, Coastal Rehab Center, New Bern	633-8020
Clay Gaskins, 1st Sat. 10AM - Hospital Dining Room	
Weight Loss Surgery Support Group	247-2101 option 1
<u>TRANSPORTATION</u>	
Carteret County Area Transportation (C.C.A.T.S.)	240-1043
Individuals may qualify through DSS first	728-3181
Coast Community Action	223-1630
*Will help seniors and family members to appointments.	
R.S.V.P. - Senior Center	728-3181 x6105
Senior Center 2 nd Wed...1-3pm	
Greyhound Bus Station, New Bern	252-633-3100
(other transport services listed in first section of directory)	
<u>VETERAN'S SERVICES</u>	
Veteran Affairs Clinic	240-2349
Veteran's Service Office	728-8440

Figure 5

The organizations listed in Figure 5 above were those discovered during the CHNA process that may provide health care to address the needs discussed in this report or other social services for the benefit of the community. This figure is the most current list of community resources to the best of CGH's knowledge as of the completion date of this report. Please note that this list may not be all inclusive of every identifiable community resource upon the time of the reader's viewing.

Now that we've seen community health resources, let's take a look at how CGH prioritized the health needs identified by the community.

VI. Prioritization of Community Health Needs Identified

The next step is to prioritize the community health needs identified from the survey. The Proposed Treasury Regulations offer guidance on how to prioritize health needs. The guidance includes using the burden, scope, severity, or urgency of the health need; the estimated feasibility and effectiveness of possible interventions; health disparities associated with the need; or the importance the community places on addressing the need.⁸

CGH used two of these suggested guidelines to prioritize the health needs identified by the community – the importance the community places on the health need and the ability of CGH to impact the health need.

Using these guiding principles, CGH re-categorized some of the health needs identified in the survey and the health needs identified in the data assessment to condense similar needs into the following list.

- Obesity
- Diabetes
- Cancer
- Heart Disease/Stroke
- Asthma
- Motor Vehicle Injuries
- Dental/Oral Health
- Alzheimer's Disease
- Lung Disease
- Pneumonia and Influenza
- Unintentional Injuries
- STDs
- Infant Death
- Teen Pregnancy
- Individuals with Health Insurance
- Primary Care Provider Rate

⁸ Proposed Regulation Section 1.501(r)-3(b)(4)

- Tobacco Use
- Adults who Drink Excessively

Next, CGH constructed a chart to help visualize and prioritize each health need. A discussion of knowledgeable CGH leaders was held in order to judge CGH's ability to impact each health need. The ranking provided by the community opinion survey respondents was used to judge the significance of the community need.

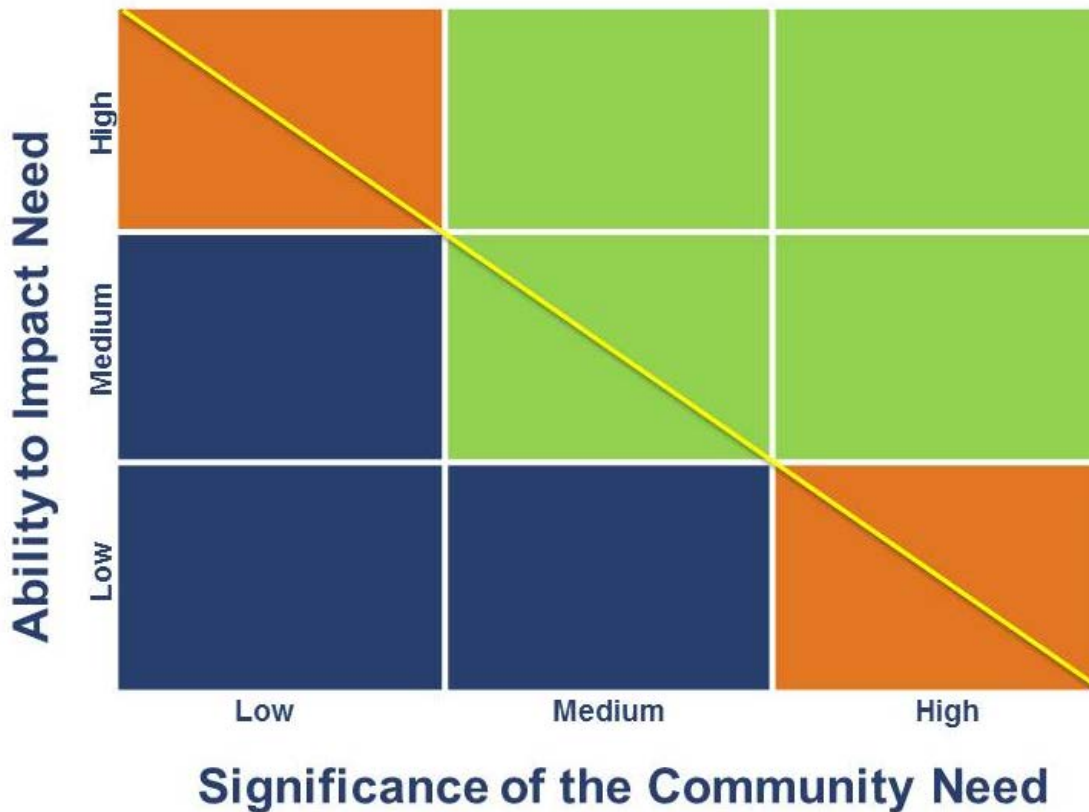
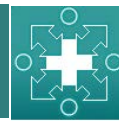


Figure 6

After the chart was populated with the identified health needs, those that were in the upper right half of the chart were considered to be priorities. The health needs chosen as priorities are:

- Diabetes
- Cancer
- Cardiovascular Disease
- Unintentional Poisonings & Injuries

The implementation strategy will reveal CGH's actions for addressing each of these prioritized health needs, the anticipated impact of the strategy, a plan to evaluate the impact, any programs or resources committed to addressing the health needs, and any planned



collaboration with other organizations. If the hospital facility will not address one or more of the health needs identified, the implementation strategy will discuss the reasons.

This concludes Carteret General Hospital's community health needs assessment. In this CHNA, we have shown you the demographics of Carteret County, Carteret General Hospital's community. Next, we presented graphs that depict the comparison of Carteret County health data with other counties in North Carolina and the country as well as targets chosen by Healthy People 2020. Third, the results of our community opinion survey were summarized. These results displayed how the respondents ranked the community health needs. Fourth, we offered a sample list of the resources and organizations available in the community to address the health needs identified in the CHNA. Finally, we described the process used to prioritize the health needs. Please send your thoughts and comments, so that we may improve the next iteration of our CHNA.

Thank you,

Carteret General Hospital

I. Introduction

Carteret General Hospital (CGH) will engage key community partners in implementing evidence-based strategies across the service area. CGH has strategically reviewed both internal and external resources to acknowledge the many organizations and resources in place to address the health needs of the community. The Implementation Strategy explains the actions that CGH will take to address the health needs identified in the CHNA. These actions will identify any programs and resources CGH plans to commit to address the health need. Also, the anticipated impact of the actions is provided along with an evaluation measure to determine the level of success of each action. Collaboration efforts with various community organizations are specified as well. Finally, the Implementation Strategy will also explain why CGH cannot address all the needs identified in the CHNA, and if applicable, how CGH will support other organizations.

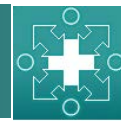
II. Health Needs Addressed

As previously mentioned in the CHNA report, CGH chose the following health needs to address based on the list generated from primary and secondary data. CGH chose these health needs based on the importance of the health need to the community and its ability to make an impact.

- Diabetes
- Cancer
- Cardiovascular Disease
- Unintentional Poisonings & Injuries

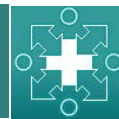
Carteret General Hospital has utilized tables to compile the key components of the implementation strategies into an easy to read format. These tables are displayed on the following pages. Multiple strategies have been developed for each health need along with detailed action steps for each strategy.

IMPLEMENTATION STRATEGY



Carteret General Hospital

Community Health Need:	Diabetes Prevention			
Specific Needs Identified in the CHNA:	High percentage of diabetes cases among adults Age-adjusted death rate due to diabetes has increased from 16.5 during 2006-2010 to 17.2 during 2007-2011			
Target is based on 50th percentile of counties in the US	Carteret County 10.3%, United States 10.3%			
Goals:	Reduce the percentage of diabetes cases among adults Reduce the age-adjusted death rate due to diabetes			
Strategy: Increase awareness of prediabetes and diabetes in Carteret County				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Develop media campaign	Increased awareness	Media campaign launched	Staff, monetary	Radio, TV, newspaper, brochures
2. Expand Carteret General Hospital Telehealth Program to address diabetes education/management for outpatients	Increased awareness/early intervention and education	Program launched	Staff, monetary	Cardiocom Telehealth Solutions
3. Collaborate with community organizations, local organizations, and schools for awareness programs	Increased awareness	1 program quarterly	Staff, monetary	Local churches, Senior Center, Civic Organizations, Carteret County School System
4. Meet all standards and performance measures to apply for re-certification for the Learning Center as an ADA recognized program (currently already certified until 2016)	Increased awareness	Re-certification obtained	Staff hours, monetary	American Diabetes Association
Strategy: Increase early identification and intervention measures for diabetes				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Perform routine A1c testing on patients with abnormal fasting glucose levels.	Increase early identification	EMR documentation analysis	Staff	Staff, local providers
2. Increase communication of abnormal values between local providers/endocrinologists and patient	Increased awareness/early intervention	EMR documentation analysis	Staff, time	Local providers, CGH hospitalist
3. Establish education program for Diabetes Prevention	Early intervention	Program launched	Staff, time, monetary	Local providers, patient
Strategy: Obtain Joint Commission Certification for Inpatient Diabetes Care				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Develop a multi-disciplinary diabetes team with an identifiable program champion & MD program advisor.	Staff awareness and team development	Joint Commission Certification	Staff, time	MD, staff
2. Establish specific staff education requirements.	Strong knowledge base of diabetes. Increase in staff competence in patient education	Diabetes staff competences yearly	Staff, time, monetary	CGH staff, education department
3. Ensure patient education on self-management of diabetes at both inpatient and outpatient levels.	Increase in patient diabetes self-management education	Increase in Outpatient DSME referrals. Decrease in readmission rates for diabetes related problems.	Staff, time	Local providers, CGH staff and CGH DSME program
4. Development of and analysis of glucometrics. Data collection of incidences of hypoglycemia defined at blood sugar less than 70 mg/dl-	Increase awareness of frequency	Data analysis monthly	Staff	CGH Diabetes team, CGH risk management, CGH Clinical Practice Council
Strategy: Optimize organization's diabetes health				
Action Step	Anticipated Impact	Evaluation Measure	Programs & Resources	Collaboration
1. Collaborate with Employee Health for promoting Learning Center services to colleagues starting with abnormal A1C value	Increased awareness, Increased referrals	Program stats	Staff	CGH Allwell and Learning Center Staff
2. Develop employee Diabetes Prevention Program	Earlier intervention	Program launched	Staff, time	CGH Allwell and Learning Center Staff



Community Health Need:		Cancer Prevention		
Specific Needs Identified in the CHNA:		High number of cancer deaths (per 100,000 people) High all cancer incidence rate (per 100,000 people)		
Healthy People 2020 Target is 160.6 deaths		Carteret County 202.8 deaths, North Carolina 189 deaths Carteret County 514.1, U.S. Counties 456.8		
Goals:		Reduce the number of cancer deaths in Carteret County		
Strategy: Increase the awareness of cancer in Carteret County				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Offer free screenings throughout the community-breast cancer in October, skin cancer in June	Increased awareness	Two free screenings offered annually	Staff volunteers/hours, space, monetary	Local dermatologists, Carteret County Health Department
2. Hold local survivorship celebration prior to National Survivorship Celebration annually in June and increase attendance	Increased awareness	One celebration offered annually, increase attendance to ≥ 175	Staff volunteers/hours, space, monetary	American Cancer Society
3. Grow cancer support groups offered through Carteret General Hospital	Increased awareness	Offer Head and Neck, Breast and Leukemia & Lymphoma support groups with at least 25 participants annually	Staff hours	American Cancer Society
4. Coordinate annual prevention seminar to be held in Carteret County	Increased awareness	One prevention seminar offered in community	Staff volunteers/hours, space	Various community partners
Strategy: Attainment of Cancer Center Accreditation/Growth of Cancer Center				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Initiate and complete survey process for Commission on Cancer Accreditation and meet all standards of performance	Recognition of cancer services and quality of care	Obtain accreditation for Cancer Center	Staff hours, monetary	Registry Partners, Inc., American College of Surgeons Commission on Cancer
2. Expand Clinical Trials Program	Growth of Cancer Center services	Participate in 2 clinical trials in 2014 and 2015	Staff hours, monetary	UNC Lineberger Cancer Center, UNC IRB
3. Increase pharmacy residency program to have 1 resident in place for 2013 & 2014 and two in 2015	Growth of Cancer Center services	Pharmacy residents in place for specified years	Staff hours, HR, monetary	Various pharmacy schools throughout NC
Strategy: Reduce smoking in the community				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Increase participation in smoking cessation program offered by Carteret General Hospital	Decreased number of smokers	40 individuals enrolled annually	Staff hours, monetary	Local businesses, pharmacy, local MDs
2. Promote smoking cessation program at community events	Increased number of events annually	Participate in 4 events annually	Staff hours/volunteer, monetary, space	Local community partners, health fairs, etc.
3. Offer Carteret General Smoking Cessation Program to other employers throughout the county	Decreased number of smokers	Present and offer program to 2 employers	Staff hours, monetary	Local employers, local providers
Strategy: Increase awareness of cancer treatment options in Carteret County				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Obtain cancer center accreditation by meeting all standards of performance and completing survey process successfully	Increased awareness of cancer treatment	Accreditation obtained	Staff hours, monetary	N/A
2. Develop a media campaign for the county for Cancer Center to include radio spots/talk, television ads, and features on the Carteret General Hospital website	Increased awareness of cancer treatment	Media campaign launched	Staff hours, monetary	Local media
3. Facility expansion and construction of Cancer Center onsite to offer timely and efficient care in one location-Medical Oncology and Radiation Oncology	Increased awareness of cancer treatment	Onsite cancer center built	Monetary	Earl Architects
Strategy: Support Cancer Center services/expansion through the Carteret General Foundation				
Action Step	Anticipated Impact	Evaluation Measure	Programs & Resources	Collaboration
1. Raise 30% of total cost of Cancer Center facilities through Foundation efforts	Enhanced cancer services in the community	Monetary goal met	Staff hours/volunteer, monetary	Community members, employees, various sponsors
2. Sponsor community events to educate and raise awareness and funds	Enhanced cancer services in the community/ increased awareness	At least 2 events held annually	Staff hours/volunteer, monetary	Community members, employees, various sponsors

Community Health Need:		Prevention of Heart Disease/Stroke		
Specific Needs Identified in the CHNA:		High number of cardiovascular disease related deaths (per 100,000 people) High number of stroke related deaths (per 100,000)		
Healthy People 2020 Target is 100.8 deaths (cardiovascular) Healthy People 2020 Target is 42.2 deaths (stroke)		Carteret County 198.9 deaths, North Carolina 191.5 deaths (cardiovascular) Carteret County 43.6 deaths, North Carolina 46.1 deaths (stroke)		
Goals:		Reduce the percentage of cardiovascular disease related deaths in Carteret County Reduce the percentage of stroke related deaths in Carteret County		
Strategy: Increase stroke awareness/prevention in the community				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Promote May as stroke awareness month through radio spots/community screenings/educational opportunities/posters/PSA	Increased awareness	Radio interview during May, 3 BP screenings/ stroke risk factor screenings	Staff hours/volunteer	American Stroke Association, local media, various community partners
2. Promote stroke related programs offered at Carteret General Hospital-Telemedicine Program and Stroke Transitional Care Program	Increased awareness	Provide 1 community event per year to educate community on Stroke Telemedicine at CGH Enroll 75 patients per year in Stroke Transitional Care Program	Staff hours/volunteer	Various community partners CGH employees/patients
3. Partner with local skilled facilities through Carteret Transitions Team to offer stroke education class for CNAs	Increased awareness/ earlier treatment	Provide class for at least 8 CNAs	Staff hours	Local skilled facilities
Strategy: Increase heart disease awareness/prevention in the community				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Facility expansion and construction of cardiac catheterization lab onsite to offer timely and efficient care in one location	Increased prevention/earlier treatment	Cardiac cath lab constructed and open	Monetary	Earl Architects
2. Increase participation in telehealth program for heart failure patients admitted to Carteret General Hospital in an effort to educate individuals on disease management	Increase awareness/better education and management of disease process	Enroll 45 patients annually	Staff hours, monetary	Local cardiologists, primary care physicians, CGH staff, patients/families
Strategy: Reduce smoking in the community				
Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Increase participation in smoking cessation program offered by Carteret General Hospital	Decreased number of smokers	Enroll 45 patients annually	Staff hours, monetary	Local businesses, pharmacy, local MDs
2. Promote smoking cessation program at community events	Increased number of events annually	Participate in 4 events annually	Staff hours/volunteers, monetary, space	Local community partners, health fairs, etc.
3. Offer Carteret General Smoking Cessation Program to other employers throughout the county	Decreased number of smokers	Present and offer program to 2 employers	Staff hours, monetary	Local employers, local providers

Community Health Need:	Prevention of Unintentional Injuries/Poisonings
Specific Needs Identified in the CHNA:	High number of unintentional injuries/poisoning related deaths (per 100,000 people)
Healthy People 2020 Target is 36 deaths	Carteret County 38.6 deaths, North Carolina 32.4 deaths
Goals:	Reduce deaths associated with unintentional injuries/poisonings in Carteret County

Strategy: Implement Project Lazarus in Carteret County

Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Carteret General to become actively involved in Carteret County Substance Abuse Coalition	Greater involvement in implementation process	Project implemented	Staff hours	Carteret County Substance Abuse Coalition team members
2. Have active participation in provider education	Provider awareness	At least 25 providers attend/obtain education materials	Staff hours	Project Lazarus team, Community Care Plan of Eastern NC, local providers, Carteret County Substance Abuse Coalition team members
3. Develop a process for getting Naloxon kits in patients homes	Community awareness of project	Kits given to patients to keep in their homes	Staff hours/monetary	Project Lazarus team, Community Care Plan of Eastern NC, local providers, Carteret County Substance Abuse Coalition team members

Strategy: Increase substance abuse awareness/services in Carteret County

Action Step	Anticipated Impact	Evaluation Measure	Resources	Collaboration
1. Referral sent to outpatient case management on all Carolina Access patients who present to Carteret General with an overdose	Increased awareness and connection to services	Referrals sent	Staff hours	Community Care Plan of Eastern Carolina
2. Implement VIP program at Carteret General Hospital to identify high risk patients and reduce the number of narcotics in the community	Increased awareness	Program started	Staff hours	Carteret General Hospital ED staff, local providers
3. Have all ED providers, hospitalists and pharmacists at Carteret General Hospital trained and utilizing CSRS and CMIS databases	Increased awareness	Providers trained and using databases	Staff hours	Community Care Plan of Eastern Carolina
4. Referral to outpatient case management services with Community Care Plan of Eastern Carolina on all ED priority patients	Increased awareness and connection to services	Referrals sent	Staff hours	Community Care Plan of Eastern Carolina/ Chronic Pain Initiative, ED staff
5. Promote and partner with local recovery events in Carteret County	Increased awareness	Advertisement of events-annually in September	Staff hours	Local Sheriffs department, Carteret County Substance Abuse Coalition

III. Health Needs Not Addressed

The table below is a list of the health needs not addressed by Carteret General Hospital. The reasons range from other organizations are addressing the health need, Carteret County is already meeting targets set by national standards, or a lack of resources to impact the health need.

Community Need	Reasons Needs Not Addressed
Obesity	Percentage of adults with obesity is 28.1% for Carteret County compared to 31.2% for NC and 30.6% as the Healthy People 2020 target.
Asthma	Carteret General offers Better Breathers support group. Strong partnership with Community Care Plan of Eastern NC, who has their own asthma initiative.
Motor Vehicle Injuries	Carteret General has limited resources and limited ability to impact this need.
Dental/Oral Health	Carteret General does not offer dental services. Carteret County is well above the nation for dentists per 100,000 people. Carteret County 68, nation 34. Dental bus offered for school children through the health department.
Alzheimer's Disease	Alzheimer's disease deaths per 100,000 population shows Carteret County at 25.7 compared to 26.8 for NC.
Pneumonia and Influenza	Pneumonia and influenza deaths per 100,000 population shows Carteret County at 10.7 compared to 17.6 for NC. Carteret General Hospital is the 2nd largest employer in Carteret County, and as of 2013, influenza vaccination is mandatory for all employees.
STDs	Focus of local health departments.
Infant Death	Focus of local health departments. Infant deaths per 1,000 births shows Carteret County at 5.8 compared to 7.9 for NC and 6 as the Healthy People 2020 target.
Teen Pregnancy	Focus of local health departments.
Individuals with Health Insurance	Focus of local health departments/local pediatrician offices.
Primary Care Provider Rate	Carteret County has 53 providers per 100,000 population which equates to the top 50th percentile as compared to other counties throughout the nation. Carteret General Hospital as a strong physician recruitment program currently in place.
Tobacco Use	Addressed in heart disease/stroke and cancer implantation plans.
Adults who Drink Excessively	Carteret General has limited resources and limited ability to impact this need. Carteret County Substance Abuse Coalition is also addressing this and Carteret General has representation on that board.