

Community Health Needs Assessment of Northeast Georgia

District 2 Public Health
Good News Clinics
Habersham Medical Center
Northeast Georgia Medical Center Gainesville/Braselton
Northeast Georgia Medical Center Barrow
Northeast Georgia Medical Center Lumpkin
Stephens County Hospital

Approved by:

The Hospital Authority of Habersham County, September 20, 2022 Northeast Georgia Medical Center Board of Directors, August 30, 2022 Stephens County Hospital Authority Board, September 20, 2022



As part of their commitment as a partnership of not-for-profit organizations, a collection of five hospitals and other community agencies studied northeast Georgia's community health needs for its 2022 Community Health Needs Assessment (CHNA), a triennial process required by the Internal Revenue Service due to each hospital's tax-exempt status. A CHNA is a measurement of the relative health or well-being of a given community, and it is both the activity and end-product of identifying and prioritizing unmet community health needs. This assessment is conducted by gathering and analyzing data, soliciting community feedback, and evaluating previous work and future opportunities.

The following organizations partnered to conduct a CHNA for communities they serve in the northeast Georgia region:

District 2 Public Health
Good News Clinics
Habersham Medical Center
Northeast Georgia Medical Center Gainesville/Braselton
Northeast Georgia Medical Center Barrow
Northeast Georgia Medical Center Lumpkin
Stephens County Hospital

Through this assessment, the CHNA partners worked to better understand local health challenges, identify health trends, determine gaps in the current health delivery system, and craft a plan to address those gaps and the identified health needs.

The communities served by each of the partners overlapped and combined to include all or part of 14 counties in northeast Georgia. These communities reflect the following service areas:

- Habersham Medical Center (HMC): Habersham, Banks, and Rabun counties
- NGMC Primary Service Area (PSA): Hall County
- NGMC Greater Braselton Service Area (GBSA): Barrow and Jackson counties, parts of Gwinnett and Hall counties
- NGMC Secondary Service Area 400 (SSA 400): Dawson and Lumpkin counties
- NGMC Secondary Service Area North (SSA North): Banks, Habersham, Rabun, Stephens, Towns, Union, and White counties
- Stephens County Hospital (SCH): Stephens and Franklin counties



Approach

Public Goods Group (PGG) was engaged by the partners to collect and analyze quantitative data for the CHNA and over 190 public health indicators were examined in the communities represented in the map to the right. A breakdown of the counties by service area can be found in Appendix Seven of the full CHNA report. Using this data, needs were identified through benchmark analyses, comparing region indicators against Georgia and national values.

A qualitative assessment was then conducted to solicit the input of more than 4,900 people through six channels: focus groups, interviews, inperson surveys, a multi-lingual online community survey, an online employee survey, and listening sessions. The community survey was open to the public and the employee survey was open to all



employees of each partner organization. Participants in listening sessions, focus groups, and one-on-one interviews were individuals or organizations serving and/or representing the interests of medically underserved, low-income, and/or minority populations in the

community. A list of participants can be found in Appendix Three of the full CHNA.

The outcome of the quantitative analysis was then compared with the qualitative findings to create a list of health needs in the community.

Each health need was assigned to one of four quadrants in a health needs matrix (shown to the right), which helped to identify the top

High data + low High data + high qualitative: Data shows qualitative: Both data an issue but not a and the community community priority identify this is an issue Low data + low Low data + high qualitative: Neither qualitative: Data the data nor the doesn't identify an community see the issue but the issue as pressing community does

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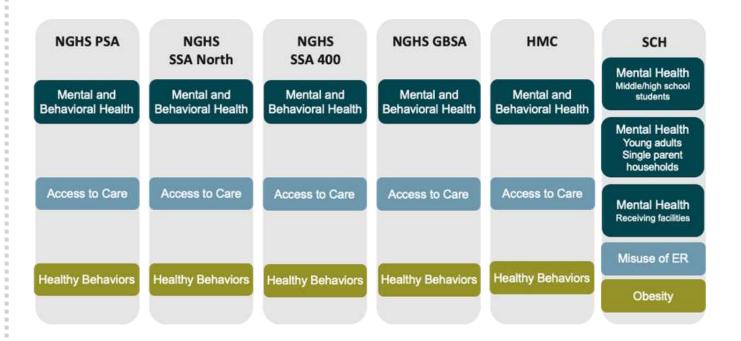
health needs for each community. Needs falling in the top right quadrant – high data and high qualitative – were further analyzed during the prioritization process.

Priority Health Needs

In May 2022, the CHNA partners and advisors consisting of board members and community leaders hosted three prioritization sessions to determine the priorities each entity would address over the next three years. Criteria used to select the priorities included:

- · Root cause and disproportionate impact on disadvantaged community members
- Magnitude and extent of the issue within the community
- Ability for CHNA partners to make an impact on the issue

As a result of this process, the following health priorities were identified as the focus of each CHNA partner's work over the next three years:



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For each priority, the CHNA partners will work to achieve greater health equity by reducing the impact of poverty and other socioeconomic indicators on that priority by implementing programming and investment in areas that directly address issues related to income and poverty and individuals who face particular challenges in accessing care due to disability, race, English proficiency, educational attainment, and other areas of socioeconomic status.

The full CHNA report is publicly available via partner websites and upon request. Community members can access the reports through the following ways:

- Habersham Medical Center: habershammedical.com
- Northeast Georgia Health System: nghs.com/community-benefit-resources
- Stephens County Hospital: stephenscountyhospital.com

An interactive data platform created through Tableau is available to all community members at **NortheastGeorgiaCHNA.com**. This platform provides access to both ZIP code and county-level public health indicators found throughout the CHNA, including demographics, socioeconomic indicators, disease prevalence, insurance coverage, and preventable hospitalizations. Additionally, downloadable data sheets for each service area are available that provide a summary of key health, economic, and demographic indicators. Downloadable data sheets relevant to the service areas are available to the community at **nghs.com/community-benefit-resources**.

Hospital partners are currently creating their CHNA implementation plans, which will be board approved on or before February 15, 2023. These strategies outline a three-year plan as to how each hospital will address the identified health priorities and will contain goals and tactics to make sustainable and meaningful changes within each of the six communities. Implementation strategies are made available to the public, and hospitals report annually on their progress towards their goals.

Both the CHNA and the subsequent implementation strategies were designed to fully meet Internal Revenue Service regulations, as found in the Internal Revenue Code Section 501(r).

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