



Northeast Georgia Medical Center

Community Health Needs Assessment Implementation Plan

2023 - 2025



Northeast Georgia Medical Center Gainesville/Braselton
Northeast Georgia Medical Center Barrow
Northeast Georgia Medical Center Lumpkin

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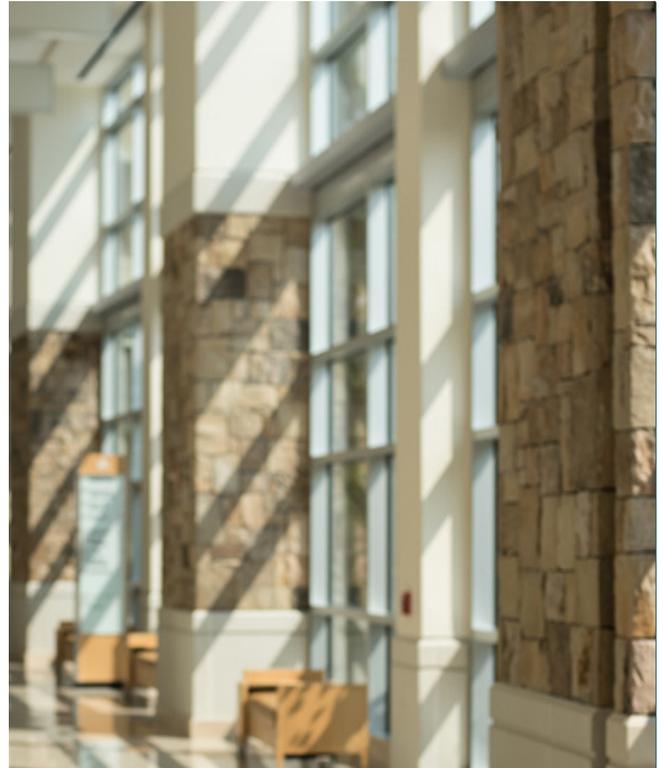


About This Implementation Plan

This Implementation Plan was developed in partnership with hospital leadership and community stakeholders to address the identified priorities listed in the 2022 Community Health Needs Assessment (CHNA). The CHNA was conducted in partnership with Habersham Medical Center, Stephens County Hospital, Good News Clinics, and District 2 Public Health, and in accordance with IRS regulations that require a CHNA to be executed every three years. The CHNA was approved by the Northeast Georgia Medical Center (NGMC) boards on August 30, 2022.

This plan focuses primarily on NGMC's strategies in addressing the identified health priorities, including work with other community partners. NGMC developed strategies separate from the other CHNA partners but looks for overlap where possible. Additionally, when possible, tactics align with overarching organizational strategic goals.

In this Implementation Plan, NGMC refers to all three hospital entities: Gainesville/Braselton, Barrow and Lumpkin, as well as service areas, as listed to the right.



- **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



Health Priorities



Healthy Behaviors



Access to Care



**Mental & Behavioral
Health**

The CHNA revealed many important health needs in the health system's service area and those needs varied by service area. Needs included important concerns such as access to care, healthy behaviors, mental and behavioral health, homeless youth, food access and nutrition, and maternal and child health. All issues identified through CHNA are important to the health of the community and to NGMC. The three priorities adopted by the organization represent health issues on which we can have the most impact based on prioritization criteria, and are not an indication of NGMC's overall commitment to addressing other pressing health concerns.

For example, though heart care and cancer treatment are not listed in the three priorities, NGMC continues its internal work on these services. The same holds true for other critical health issues. Each year, NGMC publishes an annual Community Benefit Report that outlines all community benefit activities, including progress on identified priorities as well as work in other relevant areas.

Please refer to pages 7 to 10 of the full CHNA report at



www.nghs.com/community-benefit-resources



for a description of the approach used to identify and prioritize significant health needs. To see a video describing our CHNA process, please visit

<https://youtu.be/updttylGaO8>.



Strategies Across All Priorities

For each priority, NGMC will partner with people and organizations in communities served to achieve greater health equity by reducing the impact of poverty and other socioeconomic indicators on that priority.

Social Determinants of Health



The conditions in which people are born, grow, work, live, and age. This includes income, education and opportunities for education, employment, housing, neighborhood conditions, transportation systems, and social connections.

Health Equity



The state in which everyone has the opportunity to attain full health potential, and no one is disadvantaged from achieving this potential because of social position or any other socially defined circumstance.

← Population Health Overlap →





Priority Tactics

Key tactics include:

- » **Replicate One Hall's Mental and Behavioral Health work throughout the region.** United Way's One Hall Mental and Behavioral Health Subcommittee, of which NGHS is a part, has worked to develop innovative ways through collaboration with the community to address mental and behavioral health concerns starting in Hall County. The committee adopted a model called ACE, which stands for Access, Collaboration and Education. By sharing the successes of the One Hall collaborative model in other counties throughout the region, a more unified approach to meeting mental health needs is possible. **The strategic vision of this effort is to create a comprehensive system of integrated services that recognizes and treats the mental and behavioral health needs of people where and when they need care.**

- » **Implement Unite Us.** Unite Us is a social care network that allows for electronic referrals and communication between nonprofits and service organizations to connect individuals and families to the social services they need in real-time to navigate life and find pathways out of poverty. Partnering with United Way of Hall County and many others in the community, Unite Us allows for individuals to more easily be connected to services such as housing, employment, food assistance and more.

- » **Continue to develop the Workforce Pipeline to recruit and train a competitive workforce** in healthcare fields such as nursing.



Priority Tactics

Key tactics include:

- » **Deploy the Digital Roadmap.** The Digital Roadmap is the guide which outlines NGHS's strategy to expand the use of technology to provide people across our region a more convenient consumer experience, expand access to care and improve engagement. Improving online searches for physicians, implementing consumer-driven online scheduling, and expanding conditions for electronic visits are just a few examples of the work that has been done in this arena. Over the next three years, we plan to explore implementation of on-demand video visits for urgent care, expand remote patient monitoring, expand paperless registration, and more.
- » **Analyze community health data to identify geographical hotspots** or areas throughout the region in which unhealthy behaviors have led to poor health outcomes. This tactic will allow for health education to be tailored to better serve audiences and improve health.
- » Support community organizations working to decrease health disparities by providing **microgrants that promote and develop healthy behaviors** across the region.





Priority: Healthy Behaviors

Health behaviors are actions individuals take that affect their health. This includes actions that lead to improved health, such as eating well and being physically active, and actions that increase one's risk of disease.

Goal: Reduce unhealthy behaviors including tobacco use, sedentary lifestyles, obesity rates, and chronic condition rates, such as hypertension and diabetes.

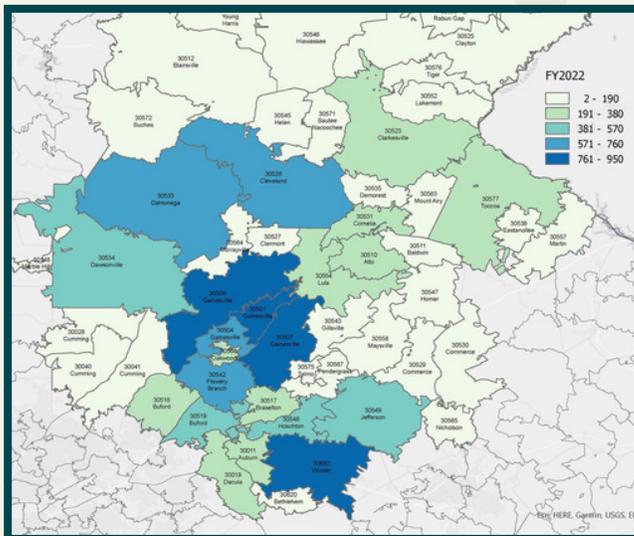
Overall Outcome Measure (baseline): Within the service area, 25% of community members are obese, 18% drink excessively, 17% are current smokers, 10% of adults age 20+ have diabetes, and 32% of adults age 18+ have high blood pressure.

Source: CDC Behavioral Risk Factor Survey (2019), CDC National Center for Center for Chronic Disease Prevention and Health Promotion (2019).

Other key statistics for NGMC service areas:

- Approximately 166,750 community members within the region live in a food desert, meaning their neighborhood does not have a healthy food source.
- 38% of the population sleeps less than seven hours a night, on average (2018).
- 24% of the population reported no exercise or active leisure during the last 30 days, slightly worse than the state average (2019).

NGMC Inpatients with a BMI of 30 or above, FY22



The map to the left demonstrates the number of community members admitted to a NGMC hospital for any condition with a BMI of 30 or above and the ZIP code for where they live. That BMI level indicates obesity.

We saw similar trends in FY22 for outpatients treated through the Northeast Georgia Physicians Group.

Source: Internal data, accessed October 2022.



Priority: Healthy Behaviors

Strategies include:

- Conduct a geographical analysis of unhealthy behaviors and health outcomes by ZIP codes
- Create “Practical Tips and Tricks on How to Be as Healthy as Possible” for different audiences, races, and ethnicities, using healthy lifestyle model Blue Zone tenants as a possible framework
- Discovery on maternal/child health and preventative services for women across the region
- Explore opportunities for partnership at the E.E. Butler Center, which currently includes services such as the federally funded Head Start program that provides free preschool childcare services to low-income families
- Continue to deploy Tar Wars, a tobacco and smoking prevention program for fourth and fifth-grade students, in Barrow and throughout the region



Outcome measures include:

- Increased health education and literacy for community members
- Increased access to maternal/child health resources for women
- Reduced unhealthy behaviors, including tobacco use, sedentary lifestyle rates, obesity rates, preventable chronic condition rates, and preventable injury rates
- Reduced smoking and vaping rates among school children



Priority: Access to Care

Access to care addresses barriers community members may face, including lack of providers, transportation, and limited services for low-income populations.

Goal: Work to improve access to care throughout the region through growth in workforce, residency slots filled in Graduate Medical Education programs, master facility plan, and digital front door.

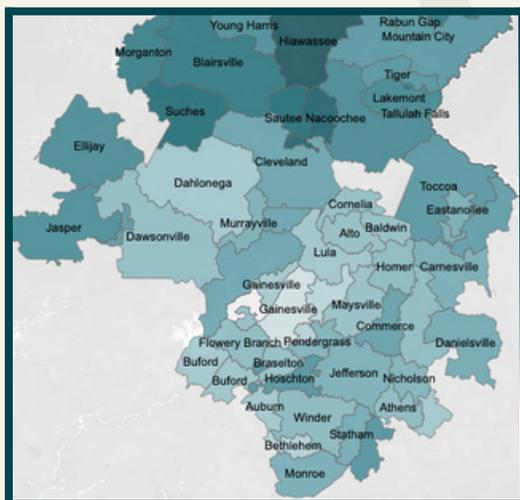
Overall Outcome Measure (baseline): 210 residency slots filled in various specialities.

Source: NGMC GME Program

Key statistics for NGMC service areas:

- 19% of the region's population lives within at least one health professional shortage area related to primary care, dental care, or mental health.
- 77% of females aged 50-74 had a mammogram within the previous two years and 84% of women aged 21-65 had a cervical cancer screening within the last three years, both lower than the Georgia average (2018).
- 76% of adults had a routine check-up within the last year, and 34% of women and 31% of men aged 65+ were up to date on core preventative services (2019).
- Less than two-thirds of adults had visited the dentist in the last year, and more than 14% of adults reported having lost most or all their natural teeth due to decay or gum disease (2018).

Routine Check-Ups, By Community



The map to the left indicates the percentage of the population aged 18 and older who have had a routine check-up within the last year (2019).

The darker the color, the higher the percentage of the population that has had a check-up, with the highest being 81% and the lowest as 71%.

Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2019.



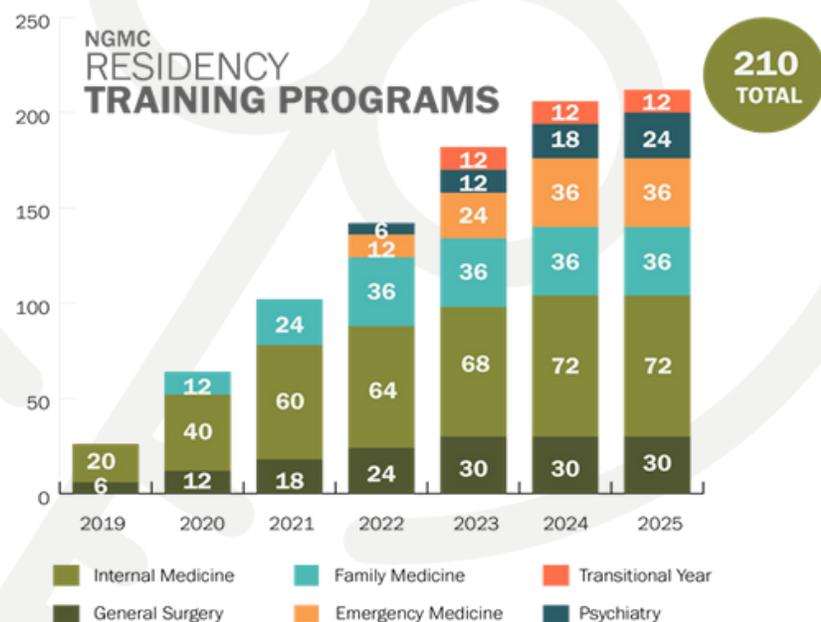
Priority: Access to Care

Strategies include:

- Continue to build workforce pipeline through the University of North Georgia and other partner organizations
- Continue charity care committee work + explore providing preventative screenings for low-income, uninsured community members
- Deploy digital roadmap, telehealth, hospital at home, and remote monitoring of patients across the region where possible
- Continue the NGPG Primary Care Rebuild
- Maintain and grow relationships with indigent clinics across the region
- Coordinate care for indigent cases at Braselton Ambulatory Surgery Center
- Explore opportunities at the E.E. Butler Center
- Continue to provide Graduate Medical Education (GME) to train future health professionals
- Continue expansion of health services through Growing the Greater Good, NGMC Lumpkin, and our partnership with Habersham Medical Center

Outcome measures include:

- Workforce growth and increased number of GME programs offered
- Accelerated Bachelor of Science in Nursing program established in partnership with the University of North Georgia
- Increased partnerships year-over-year with indigent clinics
- Increased utilization of digital resources to access care throughout the service area





Priority: Mental and Behavioral Health

Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. Included within mental health are indicators related to suicide and substance abuse.

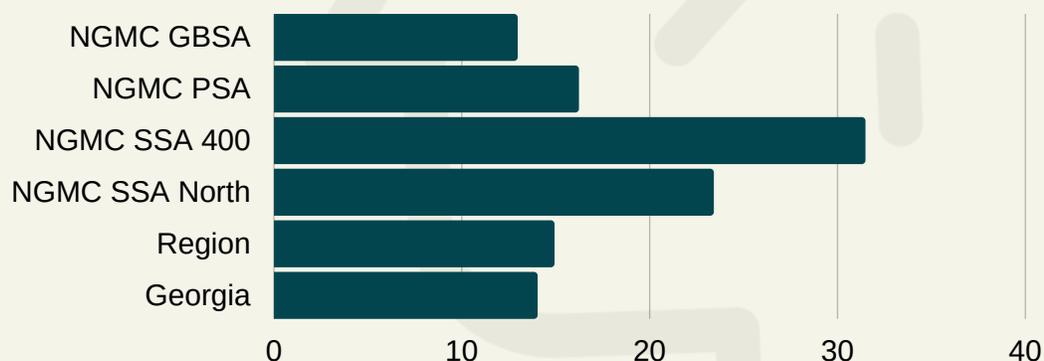
Goal: Reduce suicide and opioid overdose rates within our service areas; work toward a more comprehensive system of integrated services that recognizes and treats mental and behavioral health needs of people where and when they need care. Share lessons learned through United Way of Hall County's One Hall Mental and Behavioral Health Subcommittee, of which NGHS is a part.

Overall Outcome Measure (baseline): The rate of deaths in the region related to suicide, alcohol-related disease, and/or drug overdose (also known as "Deaths of Despair") was 37 deaths for every 100,000 people each year in the region between 2016 and 2020, higher than the Georgia rate.

Source: Centers for Disease Control and Prevention, National Vital Statistics System, 2016-2020.

- In FY16 and FY17, 64% of the inpatient admissions for the purpose of treating mental health and substance abuse were admitted through the Emergency Department as compared to 59.2% in FY22.
- There were 105 mental health providers for every 100,000 people throughout the NGMC service area, far less than state and national averages.
- Throughout the region, in 2019, community members reported an average 4.8 poor mental health days that year, which likely worsened during COVID-19.
- The age-adjusted opioid death rate due averaged 9.4 deaths per every 100,000 people each year between 2016 and 2020 in the NGMC service area, higher than the state average. This is most prevalent in SSA 400.

Age-Adjusted Average Annual Suicide Death Rate, 2016 to 2020, per every 100,000 people



Source: Centers for Disease Control and Prevention, National Vital Statistics System, 2016-2020.



Priority: Mental and Behavioral Health

Strategies include:

- Expand United Way's One Hall Mental and Behavioral Health efforts throughout the region, starting in SSA 400 (Lumpkin and Dawson counties)
- Collaborate within One Hall for legislative funds
- Prioritize digital health for mental health services
- Continue to support the Partnership for a Drug Free Hall, an alliance that engages the community to create conditions toward the prevention and reduction of substance abuse
- Continue partnership with the Reach Out Campaign, which aims to increase awareness of the issue and provide education on the importance of paying attention to the mental well-being of yourself and others



Outcome measures include:

- Increased awareness of available resources for mental and behavioral services
- Decreased suicide rates and drug-related deaths in all service areas
- Poor mental health days decrease throughout the region
- Increased utilization of digital resources for mental and behavioral health
- Continue internal and community-based efforts to create a downward trend in the percentage of inpatient admissions for the purpose of treating mental health and substance abuse being admitted through the emergency department.



Health Needs Not Addressed

The health needs NGMC chose not to address through the prioritization process include, but are not limited to the following:

PSA: Diabetes, heart disease, cancer, food insecurity, and COVID-19 vaccination rates.

GBSA: COVID-19 vaccination and death rates, diabetes, poverty and income, heart disease, and cancer.

SSA North: COVID-19 vaccination and death rates, heart disease, poverty and income, geriatric care, food insecurity, and housing costs.

SSA 400: Diabetes, heart disease, stroke, food insecurity, poverty and income, cancer, and COVID-19 death and vaccination rates.

Even though the above weren't explicitly chosen as health priorities, NGMC does actively work on many of these issues, such as heart disease, cancer, and stroke. Additionally, the work NGMC will undertake to address our chosen health priorities will have an impact on the health issues listed above. For example, addressing healthy behaviors to help decrease obesity rates will impact diabetes and heart disease rates. NGMC also works with many community partners and coalitions in their work in supporting vulnerable populations throughout the region.

Find the full CHNA and more information about NGMC's community benefit online at:

www.nghs.com/community-benefit-resources





Northeast Georgia Medical Center

*Improving the health of our community in
all we do.*



www.nghs.com/community-benefit-resources