FirstHealth
Moore Regional Hospital

Implementation Plan

FirstHealth
OF THE CAROLINAS

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Implementation Plan
For 2019 Community Health Needs Assessment

Summary of Community Health Needs Assessment Results

FirstHealth Moore Regional Hospital located in Moore County, serves as the central hospital for specialty care services for the five-county region. Historically, Moore County is the healthiest county in the region, however, in past Community Health Needs Assessments (CHNA), chronic disease rates were still above North Carolina state averages. Since the 2016 CHNA, FirstHealth focused on implementing several initiatives and expansion of services. This included implementing a stroke protocol in the emergency department, opening the Reid Heart Center, acquiring several primary care clinics, opening convenient care centers in two locations in Moore County and expanding access to specialty care services. With a concentration on expanding access to services, the 2019 CHNA data demonstrate declines in heart disease, diabetes and cancer mortality rates, and furthermore the mortality rates were below the state averages. Additionally, tobacco usage rates declined, and individuals with one or more cardiovascular risk factors improved. However, the top three causes of death for Moore County were cancer, diseases of the heart and Alzheimer's disease. Although Moore County chronic disease data demonstrates improvements in population health; the surrounding counties continue to struggle with high rates of diabetes, heart disease and cancer. The two top causes of death in the region are diseases of the heart and cancer.

FirstHealth Moore Regional Hospital will work in partnership with FirstHealth Moore Regional Hoke Campus, FirstHealth Moore Regional Richmond Campus, and FirstHealth Montgomery Memorial Hospital to collaborate on implementation plan efforts. Additionally, in 2005, FirstHealth Community Health Services established community level collaboratives in each county, the 2020 task forces, to assist with identifying program and service gaps based on CHNA data. These 2020 task force groups are comprised of key stakeholders to include but not limited to representatives from public health, school system, school nursing, school-based health centers, chambers of commerce, cooperative extension, partnership for children, faith-based, law enforcement, citizens at-large and behavioral health. Each task force identifies three priority health issues and assists with developing action plans to address community focused solutions to improve health outcomes.

Through this multifaceted approach of reviewing the CHNA data, the secondary data included in First-In-Health 2020 data charts and health disparities data, FirstHealth Moore Regional Hospital has identified health focus areas for implementation plans. These focus areas include:

- *Chronic disease prevention and behavioral health*
  - Although Moore County data demonstrate improvements in chronic diseases, the top causes of death support additional efforts focused on heart disease and cancer. Regional data demonstrate higher rates than the state averages for diabetes, heart disease and obesity and the community continues to perceive these as health issues. Addressing these chronic disease conditions through preventive health programs and health education classes will have an impact on health outcomes.
  - As the nation is experiencing the opioid crisis, so is the FirstHealth region. Overdose rates continue to rise. Feedback from the community, medical providers and law enforcement indicate a need to address opioid use disorder and substance use disorder both from a clinical and community perspective.
  - With the decentralization of behavioral health services at the state level, behavioral health issues and resources continue to be a challenge in the rural region. Partners have identified behavioral health as an area of focus with a concentration on active addiction, tobacco/vaping usage, depression and suicide.

- *Access to care*
  - North Carolina did not opt to expand Medicaid, therefore, the rates of uninsured individuals remains high in region with 13 percent reporting no insurance coverage. The hospital will develop an implementation plan with consideration for increasing access to primary care and developing partnerships to assist with linkages to services and preventive programs.
  - Given the rural environment and transportation barriers for uninsured and underserved, the hospital will continue to develop a comprehensive telehealth/telemedicine strategy to primary and specialty care services to underserved areas in the region.
  - With cancer as a leading cause of death in the region, FirstHealth is focused on expanding oncology services through the establishment of a comprehensive Cancer Center.

- *Quality of care*
  - FirstHealth of the Carolinas has a strategic goal systemwide to achieve "Zero Harm" with all inpatient quality measures by 2024.
  - FirstHealth Moore Regional Hospital will focus on the transition to value based care by focusing on quality initiatives aligned with value based reimbursement.
  - FirstHealth Physician Group formed a formal primary care service line to monitor quality measures, implement quality improvement projects and initiate systemwide workflows.

- FirstHealth Moore Regional Hospital will continue to focus on hospital readmissions, enhancing transitions of care for chronically ill patients and recruiting providers to participate in the clinically aligned network (CAN), HealthNC+.
- The system is also working to implement a well-coordinated whole-person care delivery system/network that engages a care team approach. This will involve developing systems to identify and address social determinants of health to improve population health outcomes with a focus on individuals with high hospital readmission rates and/or high utilization of emergency department due to unmanaged chronic conditions.

Chronic disease prevention and behavioral health

FirstHealth recognizes the value of health education and wellness programs. As such, FirstHealth Moore Regional Hospital will continue to link patients with chronic disease conditions to community-driven, education and wellness programs.

- At least 150 patients will be referred to diabetes self-management and nutrition services per year; diabetes will continue to utilize telehealth technology to expand group and one-on-one education
- FirstHealth coordinates the Minority Diabetes Prevention Project in partnership with the Region 6 Health Departments, which includes screening 250 individuals in the region per year, conducting at least five Prevent T2 classes and enrolling 75 participants in the classes per funding year. This program is funded through NC Office of Minority Health and Health Disparities.
- Three hundred individuals/patients, with a priority of reaching individuals at or below 200 percent of the federal poverty level, will participate in nutrition education and physical activity programs such as Healthier You and Exercise is Medicine per year.
- 250 individuals and patients annually will learn basic nutrition skills through nutrition programs such as Weigh2Be (non-surgical weight management program) and health and fitness nutrition education seminars per year.
- FirstQuit (the tobacco cessation program) will serve 100 individuals through the outpatient quit-tobacco program per year and provide 500 inpatient bedside consultations for tobacco users.
- Moore Regional Hospital employees who utilize tobacco products will be assessed a surcharge for health insurance premium rates each pay period.
- The hospital will continue to support local organizations with health fairs and programs through the speakers' bureau.
- The hospital will continue to provide an affordable low-dose CT scan program to detect lung cancer in current and former smokers.

- The hospital will actively engage in the Sandhills Opioid Response Consortium that is focused on increasing access to treatment via increasing DATA Waivered providers to offer medication assisted treatment, implementing countywide peer support program, increasing the level of awareness through stigma education for providers and community, increasing access to harm reduction, implementing a rapid overdose response team and providing case management for patients struggling with opioid use disorder/substance use disorder.
- The hospital will contribute to linking at least 50 individuals in the region to treatment/recovery resources and focus on decreasing overdose rates and emergency department visits in the region.
- The hospital will continue to host internal opioid focused committee meetings to work collaboratively across inpatient and outpatient services with a focus on prescribing guidelines, linkage to services, streamline testing and improved patient outcomes.
- The hospital will support community partners and law enforcement with Operation Medicine Drop events twice per year and support safe disposal of medications in the permanent drop box locations.
- Community Health Services will work with the Moore County community collaborative, MooreHealth, to develop a plan to raise awareness and address behavioral health challenges in the community, such as suicide, and increasing knowledge regarding how to access behavioral health services for individuals in crisis.

Access to Care

Although the hospital observed decreases in the number of uninsured due to the Affordable Care Act; there is still a large percentage of individuals who are uninsured and/or underinsured as evidenced by the health care system providing over $ 37 million in charity care from fiscal year 2016 through fiscal year 2018. Individuals who enrolled in the marketplace are struggling with high deductible plans, making access to care a continued focus area. Furthermore, North Carolina did not expand Medicaid. As a result, individuals who live at or below 133 percent of the Federal Poverty Level (FPL) do not qualify for the marketplace or Medicaid, which further marginalizes their options for access to care. The hospital is committed to linking low-income, disparate populations with appropriate safety net services:

- Discharge planners and nurses in the hospital as well as the Emergency Department will provide active referrals to the Medication Assistance Program and the resources for uninsured and underinsured, such as referrals to Federally Qualified Health Centers and rural health clinics for primary care services.
- The medication assistance program will request at least 3,000 medications for low-income and uninsured patients per year in Moore County; 4,300 medications for the region.
- The hospital will maintain a strong partnership with Community Care of North Carolina, the Health Department, sliding fee scale clinics, rural health clinics, Federally Qualified Health

Centers, the Department of Social Services and community agencies and partners to continue to ensure referrals to primary care, safety net programs and services for uninsured.

- The hospital will continue to support a comprehensive, web-based system, FirstNavistar, to assist patients with navigating health care resources and primary care services. Additionally, at the state level, the hospital will participate in NC360 as implementation is expanded.
- The hospital will expand access to FirstHealth On The Go (telehealth convenient care services) by increasing payor options and exploring options for bringing services to uninsured/self-pay.
- The hospital will continue to implement a comprehensive telemedicine plan to expand access to behavioral health and specialty care services in the rural region.
- The system will build a comprehensive, state-of-the-art Cancer Center located on the Moore Regional Hospital campus to expand oncology services available in the region.

Quality of Care

Zero Harm

FirstHealth has a goal of reaching Zero Harm by 2024. In the past, quality data was presented in aggregate versus by specific measure and hospital site. With a focus on Zero Harm, quality data for all inpatient metrics is shared with leadership and employees with specific numbers per measure per facility.

- FirstHealth Moore Regional Hospital will share reports at each leadership meeting, will encourage accurate reporting and will implement quality improvement initiatives to achieve Zero Harm.
- Employees and units that achieve Zero Harm will be recognized on an annual basis.

Value Based Care/Value Based Reimbursement

FirstHealth understands the shift in health care to value based reimbursement on improving population health outcome measures. As such, in 2016, FirstHealth established a CAN in partnership with local providers, HealthNC+. In order to continue to foster improved quality outcomes and shared savings, over the next three years Moore Regional Hospital will:

- Continue to recruit providers to CAN.
- Actively monitor quality improvement measurements via electronic medical record reports with a focus on diabetes, hypertension, body mass index and follow-up plan and tobacco usage and counseling.
- Host quarterly meetings of Quality Subcommittee for HealthNC+ members to discuss successes and challenges, as well as share best practices in improving quality measures.
- Actively conduct quality focused initiatives through the Primary Care Service Line with an initial focus on hypertension control.

Whole-Person Care Delivery

FirstHealth understands that social barriers can often present challenges for individuals struggling to manage chronic conditions. These barriers may include issues such as housing, transportation, access to food, access to care and access to medications. As such, over the next three years, the hospital will engage in developing a whole-person approach to care culture shift. This will include implementing social determinants of health (SDOH) screenings and a system of linking patients to services both internally and externally that will ultimately improve population health outcomes. Strategies will include:

- Providers engaging in multidisciplinary care team approach and refer unmanaged patients to services such as health coaching for physical activity and nutrition counseling, and health education programs such as Know It Control It for hypertension, Chronic Disease Self-Management (CDSMP) for individuals with unmanaged chronic conditions and FirstQuit for tobacco users.
- Establishing a Center for Health and Social Care on the Richmond campus.
- Implementing SDOH screening tool to be utilized inpatient and outpatient that is integrated into the electronic health record with an identification methodology for patient needs.
- Developing a referral process to the Center for Health and Social Care for patient that need follow-up regarding SDOH needs.
- Tracking individual patient level data to intently track improved patient outcomes to support the return on investment for the Center.
- Work with community partners such as social services, health department, homeless shelters, Salvation Army, Habitat for Humanity, to establish referral patterns to address food insecurity, housing and transportation needs.
- Work to ultimately decrease inpatient and emergency room readmissions in a proactive manner through empowering the patient by resolving social barriers.
- Expand Palliative Care to integrate services into the Center to assist patients with timely and comprehensive care that addresses the complex mix of social, behavioral, functional and medical concerns.

Dementia-Friendly Hospital Initiative

Recognizing higher rates of Alzheimer's disease and dementia in Moore County, FirstHealth Moore Regional Hospital has implemented and will continue to scale the dementia-friendly hospital initiative. This nurse-led initiative includes identifying patient rooms with a lavender forget-me-not to alert all caregivers of the patient's condition. Additionally, the initiative includes toolkits placed at each nursing unit which include items such as large signs to place around the room to indicate location of closet, restroom, TV; busy aprons; animated toy cats

and dogs and many other items to assist with providing a calming environment and patient-focused activities to busy the mind.

Note: Reference the Community Health Needs Assessment Introduction for additional details on health focus areas identified as needs that other agencies and community partners are currently addressing through programs and interventions.