

Spotlight on the Safety Net

A Community Collaboration

Aligning Efforts to Meet Community Health Needs: Collaboration in Rockingham County

Rockingham County, located in the foothills of the northern Piedmont region of North Carolina, is comprised primarily of rural areas where residents' health needs are largely served by 2 local hospitals and the public health department. The local economy has traditionally been dependent on agriculture and manufacturing, which have declined sharply in the past decade. Like other low-wealth counties, Rockingham County is therefore experiencing a shifting economic climate even as its safety-net providers are working to cope with a changing health care landscape.

A perfect storm of economic deprivation combined with an aging population has compelled local health care leaders to think creatively about how to address ongoing health needs. Health status across the hospitals' service area ranks from "fair" to "poor," well below the US mean. Uninsured rates in Rockingham County are relatively high; 1 in 5 nonelderly adults is uninsured [1]. And Rockingham County ranked in the bottom quartile for both health outcomes (78th) and health factors (85th) in the 2013 Robert Wood Johnson Foundation County Health Rankings [2]. In addition, the overall service area population is expected to decline over the next 5 years; the only segment of the population that is projected to show significant growth is the Medicare group—those 65 years or older. In this context, hospitals in Rockingham County realized that their community benefit plans and programs could have a measurable impact on the health of the county's 93,643 residents.

New provisions of the Patient Protection and Affordable Care Act of 2010 require nonprofit hospitals to conduct regular community health needs assessments (CHNAs) and to document their efforts to address the most pressing needs identified. These new requirements have provided an opportunity for local stakeholders to align and coordinate their efforts. The Rockingham County Healthcare Alliance, a local collaborative network,

includes Annie Penn Hospital, a Cone Health facility; Morehead Memorial Hospital, an independent community hospital; the Rockingham County Department of Public Health; and other health and health care organizations. With a foundation for collaboration already in place, the stakeholders in this rural county immediately saw the potential of the required CHNAs and began to coordinate the separate implementation plans required for each hospital.

The assessment process was initiated and conducted jointly by the 2 hospitals in conjunction with the collaborative network and the Rockingham County Department of Public Health. In 2012 the Rockingham County Department of Public Health completed a comprehensive community health assessment (CHA). As part of this process, public health department staff members conducted and analyzed stakeholder interviews and service-user focus groups. The CHNA was developed jointly by the 2 hospitals by building on the success of this CHA and its findings.

The CHA contained updated statistics from city, county, and state sources; national statistics were also included for trend analysis. Additional assessments were also identified and incorporated into the CHNA; these included the most recent Robert Wood Johnson Foundation County Health Rankings, an assessment of local safety-net capacity, a 2011 competitive assessment, the collaborative network's community-wide strategic plan, a dental task force report, and stakeholder interviews.

Care Share Health Alliance, which furnished consultants and facilitators for this project, used

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Address correspondence to Dr. Jennifer Nixon, 124 S Scales St, Reidsville, NC 27320 (jennifernixon@bellsouth.net).

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the Hanlon method for prioritizing health problems to compile the health needs identified in the above data sources [3]. Teams from the 2 hospitals considered this list alongside utilization rates, hospital strategic plans, particular areas of expertise, and previous community benefit initiatives to identify 3 priority areas for each hospital. Through separate processes of deliberation and analysis, the hospitals jointly identified access to care and chronic disease as the top health needs for the populations they serve. Health behaviors and mental health needs were also recognized as priority needs by Morehead Memorial Hospital and Annie Penn Hospital, respectively.

Each hospital then tapped additional individuals and departments to develop implementation strategies for each priority area. Workgroups researched other community efforts in these areas; organized teams to establish goals, objectives, outcome measures, and indicators for each priority; and coordinated their work with other CHNA teams. The resulting implementation plans will be overseen and managed by select department heads at the 2 hospitals. Once the plans are approved by the hospitals' governing boards, they will be made available to the public.

The collaborative process that Rockingham County hospitals spearheaded was built on the foundation created by the Rockingham County Department of Public Health CHA. This process underscores both the importance of regular, com-

prehensive assessment and the potential for using this resource when hospital and health department assessment schedules are coordinated. The first joint CHNA, which is scheduled to be completed this summer, marks the start of a long-term program of community health improvement. With all stakeholders on board, we feel certain it will have a lasting impact. **NCMJ**

Jennifer Nixon, PhD executive director, Rockingham County Healthcare Alliance, Reidsville, North Carolina.

Kellan Moore, MPH executive director, Care Share Health Alliance, Raleigh, North Carolina.

Linda Kinney, MHA deputy director, Care Share Health Alliance, Raleigh, North Carolina.

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