



**COMMUNITY HEALTH NEEDS
ASSESSMENT
2016**



Dear Community Resident:

Conway Medical Center welcomes you to review this document as we strive to meet the health and medical needs in our community. All not-for-profit hospitals are required to develop this report in compliance with the Affordable Care Act.

The “2016 Community Health Needs Assessment” identifies local health and medical needs and provides a plan to indicate how Conway Medical Center will respond to such needs. This document suggests areas where other local organizations and agencies might work with us to achieve desired improvements and illustrates one way we, as a medical community, are meeting our obligations to efficiently deliver medical services.

CMC will conduct this effort at least once every three years. This current report will be added to the Conway Medical Center Website along with the 2013 Community Health Needs Assessment for easy access.

We do not have adequate resources to solve all the problems identified. Some issues are beyond the mission of the hospital and action is best suited for a response by others. Some improvements will require personal actions by individuals rather than the response of an organization. We view this as a plan for how we, along with other organizations and agencies, can collaborate to bring the best each has to offer to address the more pressing identified needs.

We all live and work in this community together and our collective efforts can make living here more enjoyable and healthier.

Our Mission

Conway Medical Center will improve the overall health of our community by being a leader in health care.

A Message From the CEO

"As the CEO of Conway Medical Center, I am very proud of the tremendous effort and resources we have put into the expansion of our facilities. But I am even more proud of the way we care for people. I believe that truly caring people goes beyond the bricks and mortar concerns of a hospital. It involves practicing the "Golden Rule" and taking the time to listen, understand and respect those we serve. This is what has distinguished our hospital since its beginning more than 80 years ago and we will continue this tradition of caring as we grow into the future."

- Philip A. Clayton, CEO

About Conway Medical Center

The nonprofit medical center has 210 inpatient beds; a 66-bed long-term care facility, Kingston Nursing Center and a 22-bed sub-acute care facility, Medstar.

The facility's medical staff is comprised of approximately 200 physicians, representing 30 specialties.

Diagnostic services include cardiac catheterization, PET scanning, two high-speed GE CT Systems including a 64-slice CT scanner, 3-D heart scans, PET scanning, MRI, breast MRI, bone-density screening, digital mammography, stereotactic breast biopsy, high definition endoscopy/bronchoscopy, and a sleep-disorders lab.

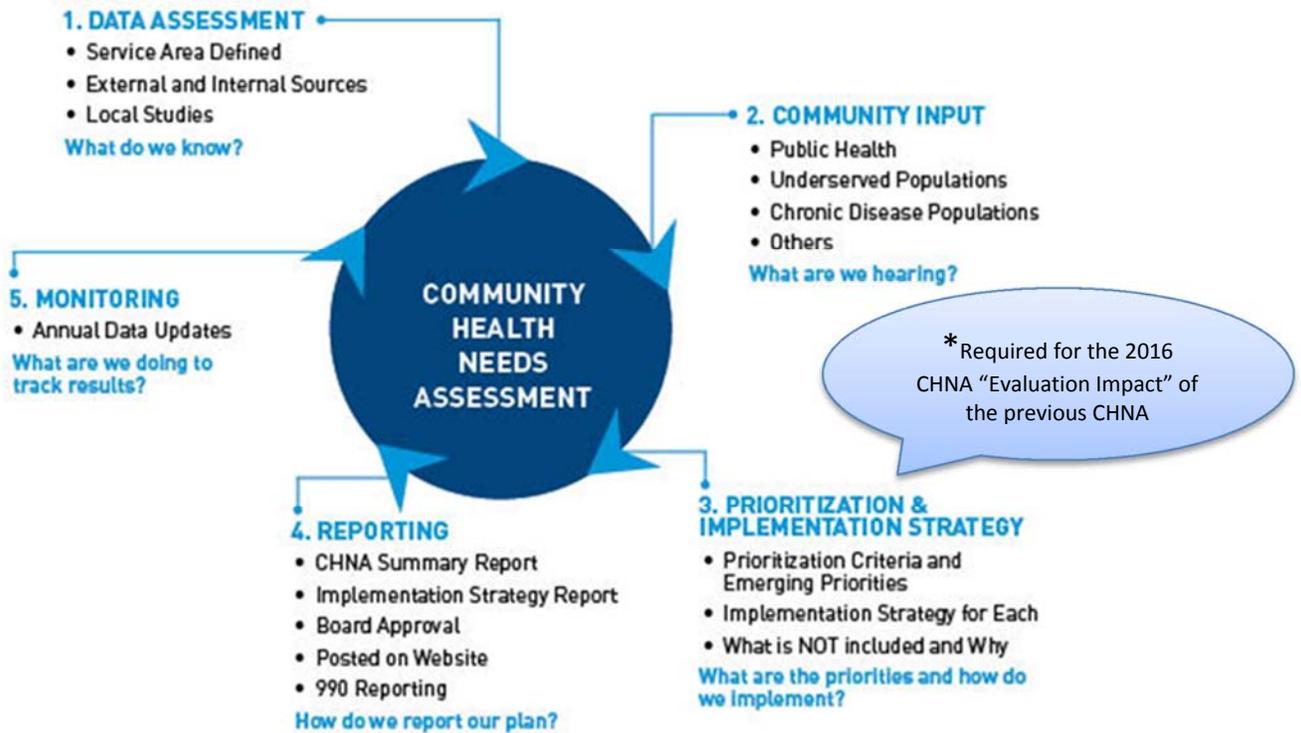
The facility also offers an outpatient physical therapy and cardiac rehabilitation program. The center specializes in general and vascular surgery, joint replacement surgery, weight loss surgery, medical care to include critical care, telemetry, inpatient dialysis, palliative care, obstetrics, pediatrics and women's services

Process and Methodology

Conway Medical Center identified community health needs by undergoing an assessment process. This process incorporated a comprehensive review by the hospital’s Community Needs Assessment Team along with secondary and primary data input using the expertise of Dixon Hughes Goodman LLP. The team used several sources of quantitative health measures and social and demographic data specific to CMC’s home county (Horry) provided by local public health agencies, health care associations and various other data outlets. CMC took advantage of this opportunity to collaborate with its administrators, physicians, outreach programs, and local organizations as well.

Conway Medical Center sought outside assistance from the Dixon Hughes Goodman CHNA team in this process. DHG provided data, organized community input, facilitated priority sessions, and supported the report drafting process.

The assessment process consists of five steps pictured below:



The data assessment piece was completed during June, July, and August of 2016. In this step, service areas were defined, external data research was completed and key findings were summarized. As the data assessment was completed, the community input phase was started.

During the month of August, 2016, phone and written interviews were conducted with persons with special knowledge of public health. In addition, hospital personnel, local organizations, and community outreach advocates were interviewed. A summary of this dialog was created and is included in this report. A prioritization session was then held to summarize and overlay data elements with key community input findings.

From this session, priorities emerged based upon the significance of the need to the service area, and CMC's ability to impact the need. Based on these priorities, CMC decided on which priorities would be included in their implementation strategy and which priorities would not be addressed. These can be found in the Implementation Strategy document. This report and strategy were then approved by the board and made "widely available" on the Conway Medical Center website.

Below is a list of steps within each phase of the process:

Data Assessment

- Community Definition
- Secondary Data Downloads
- Compilation of Secondary Data into the Community Assessment
- External Data Research
- Data Assessment Key Findings
- Data Summary Per County

Community Input

- Identify Community Interviewees
 - Hospital Administrators
 - Local and Community Organizations
 - Other Local Groups
 - Public Health Officials – Florence Health Department
- Secure Input
- Summarize Responses

Prioritization/Implementation Strategy

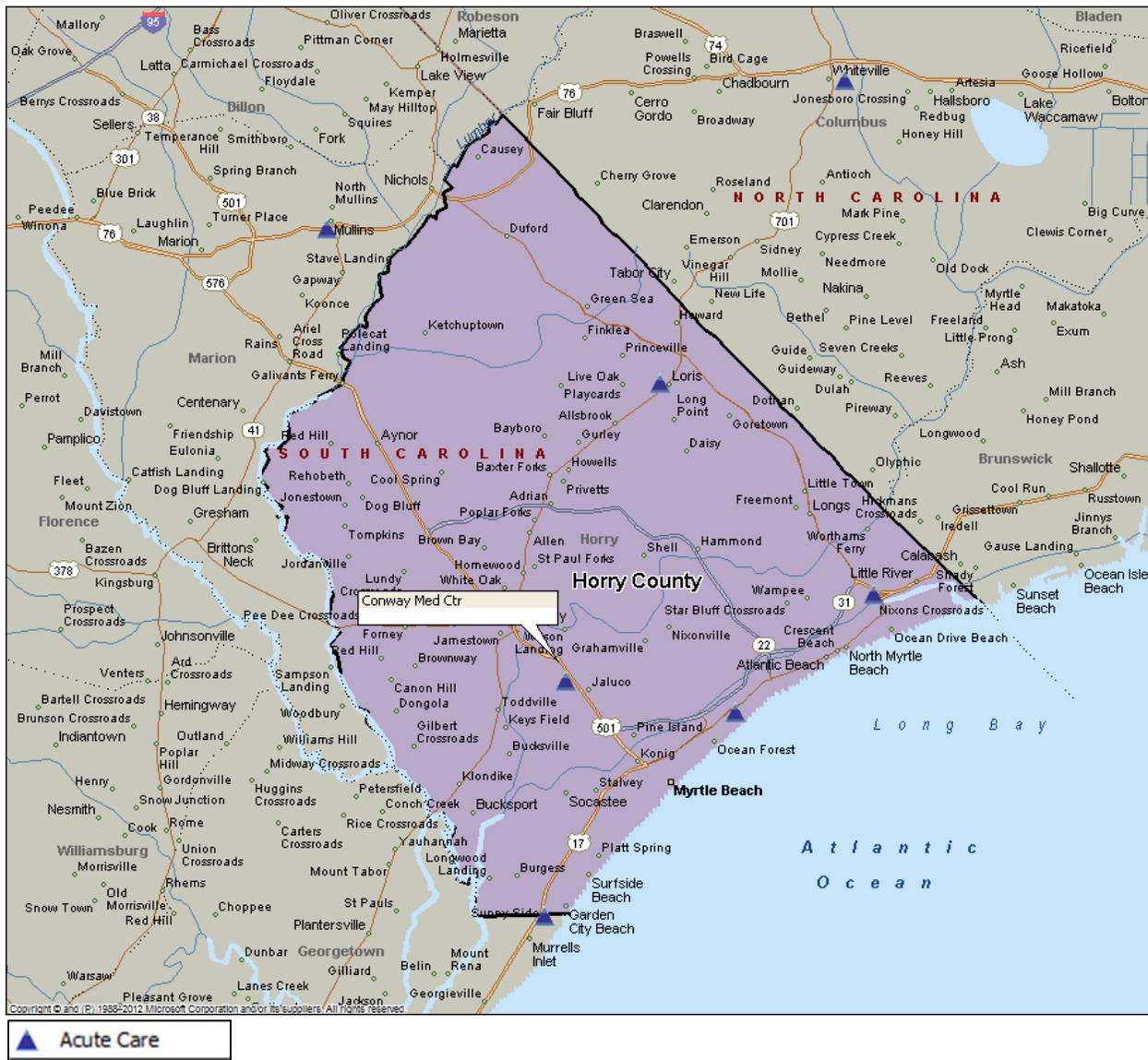
- Create Summary of Data Assessment and Community Input
- Prepare Prioritization
- Work with CMC, CHNA Team to develop Implementation Strategy

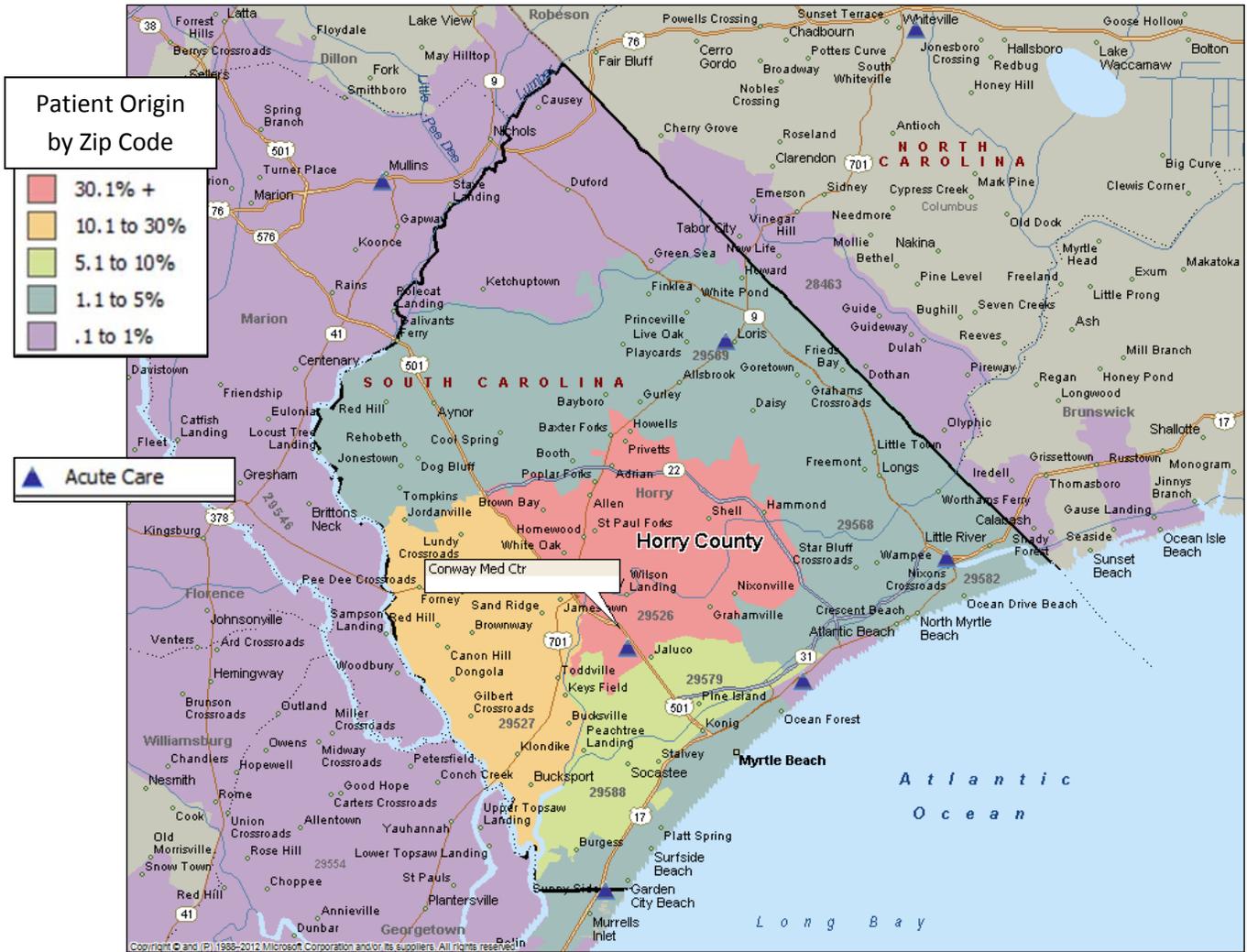
Reporting

- Create CHNA Report (web posted)
- Confirm Board Date for CHNA Findings
- Publish CHNA Report on Website
- Complete Form 990 Schedule H
- Attach Implementation Strategy to Form 990

Community Served

Conway Medical Center’s service area is defined as Horry County for this assessment. A majority of CMC’s patient origin is encompassed within this geographical area. Using a county definition as the service area is crucial for our analysis as many of our secondary data sources are county specific and serve as a comparison tool to other counties, the state of South Carolina, and the United States. Also, many of our community input sources consider Horry County their primary service area. These include public health officials, as well as many different community advocacy groups with whom CMC has relationships.





90%+ of Conway Medical Center’s patients come from Horry County

Data Assessment - Secondary Data

In order to present the data in a way that would tell a story of the community and also identify needs, the framework of Healthy People 2020 was selected to guide secondary data gathering and also community input. This framework was selected based on its national recognition as well as its mission listed below:

- Identify nationwide health improvement priorities.
- Increase public awareness and understanding of the determinants of health, disease, and disability and the opportunities for progress.
- Provide measurable objectives and goals that are applicable at the national, state, and local levels.
- Engage multiple sectors to take actions to strengthen policies and improve practices that are driven by the best available evidence and knowledge.
- Identify critical research, evaluation, and data collection needs.

Within this framework, 12 Topics were chosen as “Leading Health Indicators”. These topics guide discussion and research related to this CHNA.



Sources Used in Data Assessment Process

2016 County Health Rankings: This source is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. It gives a general snapshot of how healthy each county is in relation to others in the same state. It measures and ranks both health outcomes and health factors that lead to those outcomes. Each indicator is weighed, standardized, and ranked in order to come up with an overall ranking of health for each county in South Carolina. Ranking areas included:

Health Outcomes:

- Length of Life
- Quality of Life

Health Factors:

- Health Behaviors
- Clinical Care
- Social and Economic Factors
- Physical Environment

Health Indicators Warehouse: The HIW is a collaboration of many Agencies and Offices within the Department of Health and Human Services. The HIW is maintained by the CDC's National Center for Health Statistics. HIW has many county level statistics that allow for comparison to state and national benchmarks.

In addition, other government sites were used:

- CMS Standard Analytical Inpatient File
- State Cancer Profiles
- Small Area Health Insurance Estimates
- Data.CMS.gov
- South Carolina Department of Health and Environmental Control
- South Carolina Department of Social Services

Data Assessment Highlights and Findings

The data assessment piece of the CHNA process included data tables, graphs, and maps from various sources widely available. These data elements were used to identify at-risk populations, underserved populations, health need areas, and professional shortage areas. A summary of findings was then created to highlight areas of need within the service area.

Demographics: Nielsen demographics were used to create maps and tables of total population and breakdown other population segments. This information was pulled for Horry County and the state of South Carolina. 2016 and 2021 demographics were included. Below is a snapshot of the Horry County population showing growth in age groups over the next five years.

	Pop 2016	Pop 2021	% Growth Total Pop 2016-2021	Net Growth Total Pop 2016-2021
Age 00-04	16,329	17,544	7.44%	1,215
Age 05-09	16,899	17,841	5.57%	942
Age 10-14	17,197	18,514	7.66%	1,317
Age 15-17	10,321	11,851	14.82%	1,530
Age 18-44	100,415	107,380	6.94%	6,965
Age 45-54	39,741	40,693	2.40%	952
Age 55-64	45,228	47,656	5.37%	2,428
Age 65-74	42,028	53,132	26.42%	11,104
Age 75-84	17,280	19,894	15.13%	2,614
Age 85+	5,582	6,888	23.40%	1,306
Total	311,020	341,393	9.77%	30,373

Additionally, many races will see their population grow over the next five years in Horry County.

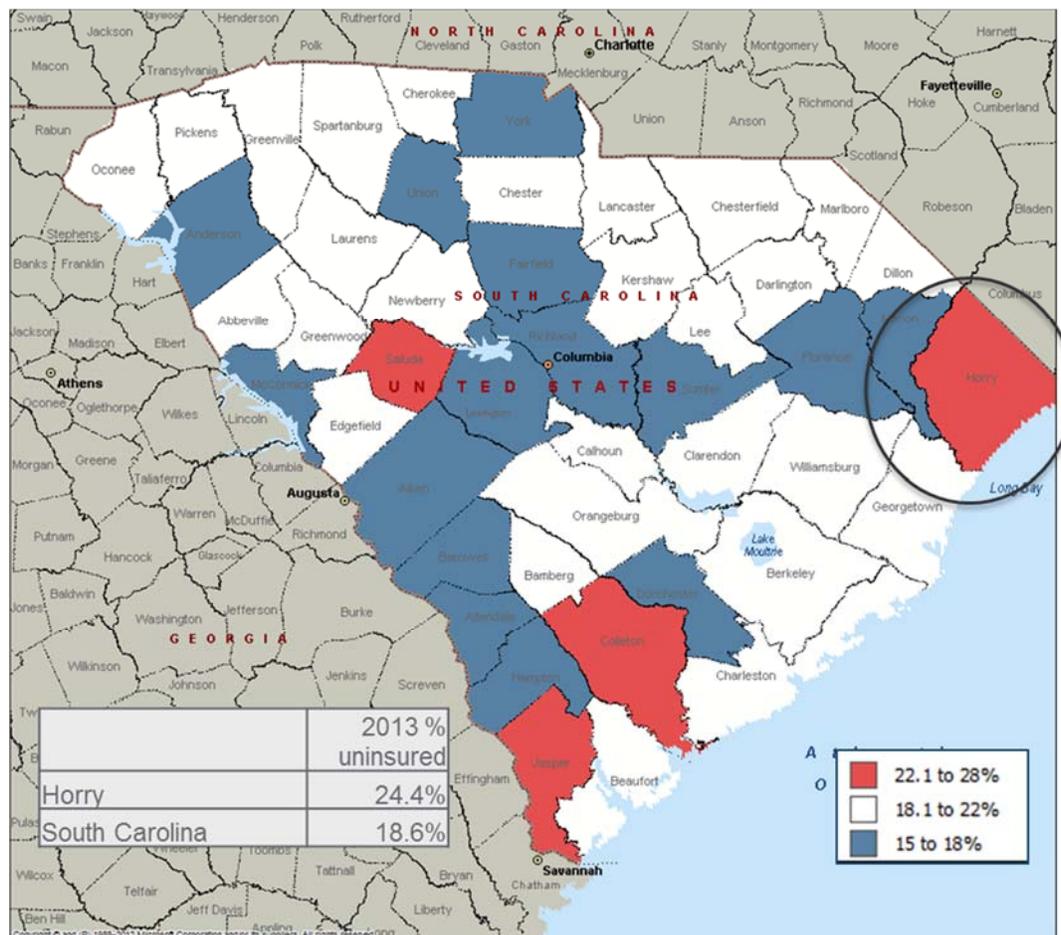
	Total Population	White	African American	American Indian	Asian	Pacific Islander	Other	Two or more races
Population 2016	311,020	246,892	41,991	1,488	3,801	450	9,522	6,876
Population 2021	341,393	269,565	46,264	1,645	4,696	587	10,316	8,320
Net Growth 2016-2021	30,373	22,673	4,273	157	895	137	794	1,444
% Growth 2016-2021	9.77%	9.18%	10.18%	10.55%	23.55%	30.44%	8.34%	21.00%
Population Under 65 2016	246,130	187,661	37,407	1,360	3,364	429	9,396	6,513
Population Under 65 2021	261,479	196,917	40,514	1,472	4,062	555	10,151	7,808
Net Growth Under 65 2016-2021	15,349	9,256	3,107	112	698	126	755	1,295
% Growth Under 65 2016-2021	6.24%	4.93%	8.31%	8.24%	20.75%	29.37%	8.04%	19.88%
Population 65+ 2016	64,890	59,231	4,584	128	437	21	126	363
Population 65+ 2021	79,914	72,648	5,750	173	634	32	165	512
Net Growth 65+ 2016-2021	15,024	13,417	1,166	45	197	11	39	149
% Growth 65+ 2016-2021	23.15%	22.65%	25.44%	35.16%	45.08%	52.38%	30.95%	41.05%

Access to Health Services-

Healthy People 2020 Overview- “A person’s ability to access health services has a profound effect on every aspect of his or her health, yet at the start of the decade, almost 1 in 4 Americans do not have a primary care provider (PCP) or health center where they can receive regular medical services.

Approximately 1 in 5 Americans (children and adults under age 65) do not have medical insurance. People without medical insurance are more likely to lack a usual source of medical care, such as a PCP, and are more likely to skip routine medical care due to costs, increasing their risk for serious and disabling health conditions. When they do access health services, they are often burdened with large medical bills and out-of-pocket expenses.”

Insurance Coverage Estimates: According to SAHIE (Small Area Health Insurance Estimates), in 2013, 24.4% of Horry County residents under 65 years of age were uninsured. This is higher than South Carolina as a whole (18.6%).



Clinical Preventative Services

Healthy People 2020 Overview - “Clinical preventive services, such as routine disease screening and scheduled immunizations, are key to reducing death and disability and improving the Nation’s health. These services both prevent and detect illnesses and diseases—from diabetes to cancer—in their earlier, more treatable stages, significantly reducing the risk of illness, disability, early death, and medical care costs. Yet, despite the fact that these services are covered by Medicare, Medicaid, and many private insurance plans under the Affordable Care Act, millions of children, adolescents, and adults go without clinical preventive services that could protect them from developing a number of serious diseases or help them treat certain health conditions before they worsen.”

Some Death Rates per 100,000 population were measureable against the Healthy People 2020 Targets. The time frame is 2009-2013 from State Cancer Profiles. Green text indicates meeting or beating the Healthy People 2020 target.

Cancer Type	Healthy People 2020 Target	Horry County
All Sites	161.4/100,000	178.6/100,000
Breast Cancer	20.7/100,000 Female	20.6/100,000
Colon and Rectum	14.5/100,000	15.7/100,000
Lung and Bronchus	45.5/100,000	58.5/100,000
Prostate	21.8/100,000	18.3/100,000

Preventative Services for Horry County

- % Diabetic Medicare Patients Receiving HbA1c Screening has improved slightly from the previous Community Health Needs Assessment and it is above that of South Carolina
- % Female Medicare enrollees receiving mammography screening has decreased from the previous Community Health Needs Assessment.
- Over a 5 and 7 year average, the % Adults 50+ reporting having a sigmoidoscopy or colonoscopy has not met the Healthy People Target of 70.5%. Horry County is at 61.5% for a 7 year period of 2006-2012.

Environmental Quality-

Healthy People 2020 Overview - "Poor environmental quality has its greatest impact on people whose health status is already at risk. For example, nearly 1 in 10 children and 1 in 12 adults in the United States have asthma, which is caused, triggered, and exacerbated by environmental factors such as air pollution and secondhand smoke."

From County Health Rankings, Horry County has 12.1 days with maximum 24 hour average Particulate Matter 2.5 concentration over the National Ambient Air Quality. They are the same as all of South Carolina. This was the only measurable for Environmental Quality – other than smoking statistics which appear later in this report.

Injury and Violence-

Healthy People 2020 Overview - "Motor vehicle crashes, homicide, domestic and school violence, child abuse and neglect, suicide, and unintentional drug overdoses are important public health concerns in the United States. In addition to their immediate health impact, the effects of injuries and violence extend well beyond the injured person or victim of violence, affecting family members, friends, coworkers, employers, and communities. Witnessing or being a victim of violence is linked to lifelong negative physical, emotional, and social consequences."

Motor Vehicle Deaths: from 2007-2013 Horry County had a motor vehicle death rate per 100,000 population of 19.2. Comparatively, South Carolina had a rate of 18.8. Horry County and South Carolina have both improved since the previous Community Health Needs Assessment, they still have not met the Healthy People 2020 target of 12.4 deaths per 100,000 population.

The Homicide Rate per 100,000 (2007-2013) has declined since the previous Community Health Needs Assessment. In Horry County it went from 7.4/100,000 to 3.5/100,000. However, the Unintentional Injury Deaths in Horry County, at 72 per 100,000 is double the Healthy People 2020 target of 36 deaths/100,000.

Maternal, Infant, Child Health-

Healthy People 2020 Overview – "The well-being of mothers, infants, and children determines the health of the next generation and can help predict future public health challenges for families, communities, and the medical care system. Moreover, healthy birth outcomes and early identification and treatment of health conditions among infants can prevent death or disability and enable children to reach their full potential. "

Percent of live births with low birth weight over the period of 2007-2013 for Horry County was 9.9%, still above the HP 2020 target of 7.8%

Mental Health-

Healthy People 2020 Overview –“Mental health is essential to a person’s well-being, healthy family and interpersonal relationships, and the ability to live a full and productive life. People, including children and adolescents, with untreated mental health disorders are at high risk for many unhealthy and unsafe behaviors, including alcohol or drug abuse, violent or self-destructive behavior, and suicide.”

County Health Rankings 2016 calculates 140.9 Mental Health Providers/100,000 population for 2015. South Carolina has 152.8. Though previously measured differently, this number has increased significantly.

Nutritional, Physical Activity and Obesity-

Healthy People 2020 Overview -“Good nutrition, physical activity, and a healthy body weight are essential parts of a person’s overall health and well-being. Together, these can help decrease a person’s risk of developing serious health conditions, such as high blood pressure, high cholesterol, diabetes, heart disease, stroke, and cancer. A healthful diet, regular physical activity, and achieving and maintaining a healthy weight also are paramount to managing health conditions so they do not worsen over time. “

Obesity: According to County Health Rankings 2016, 28.7% of adults in Horry County are obese. This percent is still based on 2012 input along with changes in population. The Healthy People Target is 30.6%, thus Horry County meets the Healthy People 2020 goal.

The % of the population in Horry County with limited access to healthy food has improved. County Health Rankings released in 2012 reported 18.4% with limited access and the current release of County Health Rankings 2016 indicates 6%.

Physical Activity: Horry County indicates 83.6% of the population has access to Exercise Opportunities compared to 70.8% for South Carolina.

Oral Health-

Healthy People 2020 Overview – “Oral diseases ranging from dental caries (cavities) to oral cancers cause pain and disability for millions of Americans. The impact of these diseases does not stop at the mouth and teeth. A growing body of evidence has linked oral health, particularly periodontal (gum) disease, to several chronic diseases, including diabetes, heart disease, and stroke. “

According to the Office of Research and Statistics, SC Budget and Control Board, in 2008, Dental Conditions was the #1 top reason for emergency room visits for ambulatory care sensitive conditions (avoidable reasons). Horry County has 40.9 dentists/100,000 population compared to South Carolina of 51.6.

Social Determinants-

Healthy People 2020 Overview – “A range of personal, social, economic, and environmental factors contribute to individual and population health. For example, people with a quality education, stable employment, safe homes and neighborhoods, and access to preventive services tend to be healthier throughout their lives. Conversely, poor health outcomes are often made worse by the interaction between individuals and their social and physical environment.”

According to Nielsen, Horry County has 14.6% of families living below the poverty level. The county also has 8.2% of adults (25+) with no high school diploma.

In 2014, 29.9% of children in Horry County were said to be living in poverty, according to County Health Rankings. Horry County had 7.3% unemployment in 2014.

Substance Abuse/Tobacco-

Healthy People 2020 Overview –“Substance abuse—involving drugs, alcohol, or both—is associated with a range of destructive social conditions, including family disruptions, financial problems, lost productivity, failure in school, domestic violence, child abuse, and crime.”

“Tobacco use is the single most preventable cause of disease, disability, and death in the United States, yet more deaths are caused each year by tobacco use than by all deaths from human immunodeficiency virus (HIV), illegal drug use, alcohol use, motor vehicle injuries, suicides, and murders combined.”

Substance abuse: Particularly as it relates to alcohol in 2014 16.8% of Horry County residents reported excessively drinking.

Tobacco: The Healthy People 2020 target for adults who smoke is 12%. In 2014 Horry County’s percentage of adult smokers was still higher than the target. However, from the previous Community Health Needs Assessment there was improvement of 5%.

Next Steps-

Data collected in this phase is overlaid with community input findings to prioritize needs of Horry County and ultimately leads to strategies on many of the issues identified above.

Community Input Findings

Subsequent to the secondary data assessment, the Community Needs Assessment Team entered into dialogue with key hospital administrators, physicians, those with knowledge/expertise in public health, and those serving underserved and chronic disease populations. During this phase, the team conducted interviews by phone and written questionnaires in which respondents were able to comment and discuss general community health issues of their specific service area. Through these numerous interviews and surveys, a summary of community input was created. This summary would eventually be used to help focus in on priorities and ultimately, implementation strategies.

The list below includes respondents who participated in this phase. They included experts in the field of public health, hospital administration members and community outreach groups.

- Conway Medical Center
- Horry County United Way
- Director of School Nurses, Horry County Schools
- Pee Dee Region of SCDHEC
- Friendship Medical Center
- Access Health Horry County
- South Carolina Department of Health and Environmental Control
- Waccamaw Mental Health Center

Respondents were asked what they viewed as the top health issues facing Horry County and its residents. They were then asked to elaborate on certain barriers and strategies to addressing these needs. After combining input from these individuals, a summary table was created to illustrate the frequency in which certain issues were mentioned.

Frequency Table

Issue	Count
Access to Care (Insurance/Financial Barriers)	8
Transportation (Access)	8
Lack of PCPs	6
Education/Awareness of Resources	6
Diabetes	5
Obesity/Nutrition	4
Hypertension	4
Heart Disease	4
Medication Management and Compliance	3
Specialty Physicians	3
Staff (be it hospital or community agencies)	3
Drug Abuse	3
Follow-up care (discharge planning)	2
Mental Health	1
Tobacco Use	1
COPD	1
Population Growth (retired - non work force)	1
No Medicaid Expansion	1
Teen Pregnancy	1

Inventory of Services Addressing Community Needs:

Conway Medical Center offers the following services currently to address many of the needs identified in this assessment, as well as many not mentioned.

Center for Wound Healing & Hyperbaric Medicine is the first of its kind in Horry County and has two state-of-the-art hyperbaric oxygen chambers.

Critical Care Services: Conway Medical Center's Critical Care Units provide comprehensive and continuous care for critically-ill individuals as well as social and psychological support for patients and their families. Our Critical Care team includes physicians, nurses and other specialists who are specially trained in critical care

Diabetes Management: Offers a Diabetic Self-Management Training program to help people make better lifestyle choices to manage their disease and prevent complications.

Diagnostic Services: More commonly known as "Radiology," possesses the staff, equipment and software technology to rival imaging in larger hospitals across the country.

Endoscopy Center: One of eastern South Carolina's premier facilities providing a full range of gastrointestinal endoscopic procedures dedicated to the diagnosis and treatment of a variety of gastrointestinal disorders.

Heart Center: CMC offers a state-of-the-art cardiac catheterization laboratory featuring the latest in cardiac diagnostic imaging technology, allowing our team of highly trained and skilled physicians and medical staff to quickly and accurately determine an appropriate course of treatment for patients.

Joint Replacement Center is backed by the latest advances in joint replacement technology.

Laboratory Services is a CAP accredited laboratory and adheres to all regulatory compliance associated with performance and resulting of lab tests.

Long Term Care partners include specialists in nursing, rehabilitation, nutrition, social services, activities, environmental services, and geriatric medical care.

Mammography captures sharp images for detecting breast cancer, using state-of-the-art technology machines.

Medical Services Center of Conway Medical occupies the third floor west wing of Conway Medical Center. Many of the patients serviced are elderly with complex medical-surgical problems. The unit is designed to care for patients 24 hours a day, 7 days a week.

Palliative Care: The Palliative Care Team consists of Nurse Consultants, Physician, Social Worker, Pastoral Clinician, Nurse Practitioner and Case Manager. The team works with the patient, family and primary physician when the patient is affected by chronic progressive illness.

Pastoral Services: Conway Medical Center Chaplains are available 24 hours a day to provide pastoral and emotional support to patients, families and staff.

Pediatric Center welcomes you and your child to our facility. Should you and your child need to stay with us, please know that we will strive to make your stay as pleasant as possible.

Pulmonary Rehabilitation Program includes both exercise and education geared towards improving the symptoms of respiratory disease. It is a safe and effective way to help the participant feel better faster, become stronger, and improve the overall quality of life.

Rehabilitation: Getting you back to a normal active lifestyle.

Subacute Care: Medstar Subacute Facility is also known as Medstar Marina. The care partners for Medstar focus on the provision of intensive skilled rehabilitation and nursing care to prepare patients for the journey back home.

Surgical Services: Conway Medical Center is an established leader in surgical care, with over 90 surgeons specializing in weight loss, orthopedics, vascular surgery, spinal surgery, dental, oral/maxillofacial, otolaryngology, obstetrics/gynecology, urology, podiatry, plastic and general surgery.

The Birthplace: An Exceptional Place to Have Your Baby. Conway Medical Center Birthplace offers:

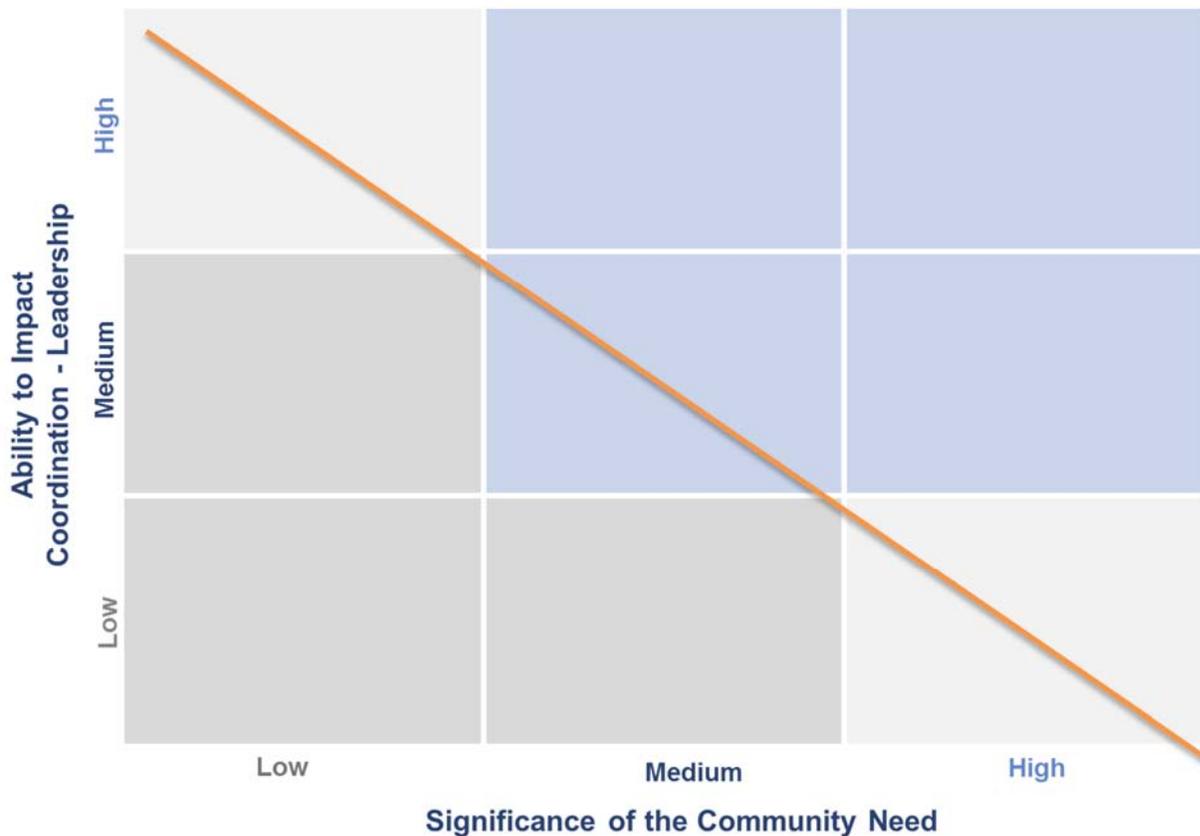
- Childbirth Classes
- Breastfeeding Classes
- Birthplace Tours
- Obstetrical Anesthesia

Weight Loss Surgery: Experience successful, remarkable weight loss

Prioritization of Needs

In September 2016, Conway Medical Center leadership team met to discuss priorities and implementation strategies. The purpose of this session was to evaluate the impact from the 2013 CHNA session and determine if some of those priorities should continue with additional implementation. New priorities were identified and prioritizing of needs took place. Criteria used to prioritize these needs included importance to the service area, relevance of the health issues to the population served, and the ability of CMC to effectively impact and improve the health issue. Also discussed in this session were those needs that were already being addressed by other community partners or organizations.

A prioritization grid was created that compared CMC’s ability to impact the need and how significant the need was in the community. Those needs identified in the upper right sectors of the grid were viewed as the most significant needs that CMC’s leadership team felt they had the ability to impact and would be the needs that would ultimately be chosen as priorities. A sample is shown below:



Based on this grid, the following issues were chosen as priorities:

- A. Access to Primary Care Providers
- B. Discharge Follow-up
- C. Motor Vehicle Fatalities
- D. Diabetes
- E. % of Mammography Screenings
- F. % of Adults Smoking

Many of these issues were chosen as the framework of Conway Medical Center’s implementation strategies. Also, in accordance with IRS proposed regulations, the team identified which of these priorities would not be addressed in the implementation strategy and why. After discussing these priorities in depth and examining CMC’s expertise, the expertise of other community organizations and outreach, and CMC’s wide range of services currently available, the following issues were chosen for implementation:

- A. **Access to Primary Care Providers** – There is a perceived gap in the market for access to PCP providers. CMC will partner with local clinics to continue assisting in providing care at reduced costs through support in areas of rent, utility bills, and hospital services as well as evaluate the opportunities to expand access points for care.
- B. **Discharge Follow-up** – In order to reduce several health concerns CMC has identified patients not following discharge instructions as a significant community need. It is CMC’s intent to establish best practices and education around discharge instructions.
- C. **Motor Vehicle Fatality** – According to the Association of State and Territorial Health Officials, Crash-related deaths and injuries are largely preventable. States can utilize systems, policy, and programmatic interventions to target and prevent this serious public health problem. CMC will focus its efforts on the trauma side in partnership with local EMS providers.
- D. **Diabetes**- Diabetes is a major health need across the US and in Horry County. CMC will continue to support and educate medically underserved diabetics in the community.
- E. **% of Mammography Screenings** - Provide preventative screenings while finding innovative ways to address financial and transportation barriers of receiving these screenings.

Priorities not being addressed include:	Reasoning / Explanation
% of Adults Smoking	As part of CMC’s 2013 CHNA – CMC included this need in their prioritization planning. CMC actively implemented their action plans. At this time, there are other organizations in the county that are specifically focused on this need. However, CMC will continue to be an advocate of creating smoke free environments.

CMC's Community Needs Assessment Team then initiated the development of implementation strategies for each health priority identified above. This Implementation Plan will be rolled out over the next three years. The team will work with community partners and health issue experts on the following for each of the approaches to addressing health needs listed:

- Identify what other local organizations are doing to address the health priority
- Develop support and participation for these approaches to address health needs
- Develop specific and measurable goals so that the effectiveness of these approaches can be measured
- Develop detailed work plans
- Communicate with the assessment team and ensure appropriate coordination with other efforts to address the issue

The team will then develop a monitoring method at the conclusion of the Implementation Plan to provide status and results of these efforts to improve community health. CMC is committed to conducting another health needs assessment in three years.

In addition, CMC will continue to play a leading role in addressing the health needs of those within our community. As such, community benefit planning is integrated into our Hospital's annual planning and budgeting processes to ensure we continue to effectively support community benefits.

Evaluation Impact – outputs since the 2013 CHNA

The following table identifies the 2013 prioritized Community Health Needs that CMC identified and developed implementation plans around. Each need contains a list of “Actions Steps” and subsequent “Evaluation Impact.”

Community Health Need:	Access to care for the uninsured, indigent			Evaluation Impact 2016
Goals:	Increase/continue education on a variety of health conditions/issues to improve access to care and health status of community			
Strategy: Improve access to care for the uninsured and indigent				
Action Step	Accountability	Timeline	Desired Outcome	
Increase partnerships with businesses/stores around the county to provide fingerstick lipid panels, blood pressures and various other screenings on HEALTHREACH Van to community.	HEALTHREACH	End of 2014	Minimum 5 new sites	We met the desired outcome by increasing the number of sites by 5.
Formalize partnerships with other safety net providers in our market area to assist uninsured, high utilization emergency room patients with better coordination of care	Hospital	September 2014	Improved access and better coordination of care	Participated in Healthy Outcomes plan with safety net providers throughout the county.
Provide additional staff in the emergency room and patient access areas to assist the uninsured in applying for Medicaid and other possible insurance coverage through the Affordable Care Act Marketplace.	Hospital	Ongoing	Improved access and better coordination of care	Increased staff through a 3rd party contract
Partner with local clinic to continue assisting in providing care at reduced costs through support in areas of rent, utility bills, and hospital services.	Hospital	Ongoing	Improved access and better coordination of care	Partnered with Friendship Clinic

Community Health Need:	Prevention/Screenings			Evaluation Impact 2016
Goals:	Increase/continue education/screenings in areas of heart disease/stroke.			
Strategy: To provide access to breast health screenings and aid in annual compliance.				
Action Step	Accountability	Timeline	Desired Outcome	
Provide free mammograms to uninsured, low-income women in Horry County area through the Mammography Initiative.	CMC Foundation	continuous	maintain funding to provide this initiative	Accomplished through Foundation. Ongoing and will continue.
Distribute mammogram reminders to past patients due for their next mammogram/follow-up	Breast Health Navigator	monthly, continuous	Decreased number of women not completing annual screenings or follow-up	Provided past patients with a calendar
Explore options for addressing transportation barriers in rural areas.	Navigator/Marketing	5/1/2014	Outreach or program to target an area in need.	Offered breast health education in rural church.
Attend health fairs and outreach to area communities regarding breast health.	Breast Health Navigator, Marketing, Healthreach	continuous	increased visualization as CMC being a breast health provider	Successfully attended health fairs
Continually seek grants to assist with funding for screening and diagnostic testing. (Had Komen grant in 2012.)	Breast Health Navigator	continuous	another grant	Applied for Komen grant
Strategy: Expand health screenings to include availability of Lung Cancer Screening through low dose CT.				
Action Step	Accountability	Timeline	Desired Outcome	
Finalize process and logistics for low-dose Chest CT.	Radiology	11/1/2013	Patients scheduling and having this exam.	Have low-dose CT
Provide education to area providers and the community about the research, benefits and guidelines for this screening.	Radiology, Breast Health Navigator	6/1/2014	Utilization of screening by community.	Put information in medical staff newsletter and marketing put info in local papers.
Strategy: Screen and educate the community on the risk factors of heart disease and stroke.				
Action Step	Accountability	Timeline	Desired Outcome	
Increase partnerships with businesses/stores/churches to provide fingerstick lipid panels and blood pressures on HEALTHREACH Van to Community	HEALTHREACH	End of 2014	Minimum 5 new sites	We met the desired outcome by increasing the number of sites by 5.
Participate in health fairs and educate on the risks of heart disease/stroke.	HEALTHREACH	End of 2014	Minimum 1 or 2 functions	Participated in health fairs
Offer community screening, CMP Blood panel, to educate community on importance of knowing your numbers for heart disease risk.	HEALTHREACH	End of March 2014	100-200 participants	Accomplished action step
Offer fingerstick lipid panels and blood pressure to senior centers.	HEALTHREACH	End of August 2014	All senior centers/increase awareness	Accomplished action step
Offer community screenings to identify overall health risks to small businesses, corporations, and residents of Horry County.	HEALTHREACH	End of 2014	Minimum 3-4 Events	We met the desired outcome with 5 events.
Strategy: Screen and educate the community about the importance of a PSA and Exam for Prostate Health.				
Action Step	Accountability	Timeline	Desired Outcome	
Provide access for community to attend a prostate screening to include a PSA and exam.	HEALTHREACH	End of September 2014	2-3 locations	Accomplished action step and ongoing
Prepare educational material to promote screenings, etc..	HEALTHREACH	End of September 2014	Increase awareness	Education provided and ongoing
Strategy: Screen and educate the community about Thyroid disease.				
Action Step	Accountability	Timeline	Desired Outcome	
Provide access for community to attend a Thyroid screening.	HEALTHREACH	End of August 2014	20-40 participants	We met the desired outcome with 150 participants.
Prepare educational materials to promote screenings.	HEALTHREACH	End of August 2014	Increase awareness	Yes, we have materials to promote screenings.

Community Health Need:	Diabetes			Evaluation Impact 2016
Goals:	Conway Medical Center will provide continued support and education to			
Strategy: To provide and promote wellness and access to care through education				
Action Step	Accountability	Timeline	Desired Outcome	
Offer monthly diabetic support group meetings, providing education, support, and access to community resources	Hospital	Ongoing	Consistent, if not increasing attendance at monthly support group meetings	Accomplished and ongoing
Participate in community health fairs to promote diabetes wellness	Hospital	Ongoing	Increased awareness of diabetes wellness	Accomplished
Provide no-cost glucometers and test strips to uninsured diabetics admitted to the facility	Hospital	Ongoing	Increased patient involvement in diabetes self-care/compliance	Accomplished and ongoing
Strategy: Screen and educate at risk diabetics and current diabetics.				
Action Step	Accountability	Timeline	Desired Outcome	
Provide access to community to attend an A1-C screening if either a current diabetic or at risk diabetic.	HEALTHREACH	End of November 2013 and 2014	10-20 participants	Accomplished. Greater than 20 screened
Prepare educational materials to promote screenings.	HEALTHREACH	End of November 2013 and 2014	Increase awareness.	Accomplished
Provide blood sugar screenings on HEALTHREACH Van at area businesses/stores/churches.	HEALTHREACH	End of 2014	Provide at all HEALTHREACH Van locations.	Accomplished and ongoing

Community Health Need:	Smoking			Evaluation Impact 2016
Goals:	Conway Medical Center will provide support and education to assist and encourage smoking cessation in the community			
Strategy: To reduce tobacco use and dependence through treatment, support, and education				
Action Step	Accountability	Timeline	Desired Outcome	
Provide written educational information presenting the hazards of smoking to all patients who self-report as being tobacco users.	Hospital	Ongoing	Increased awareness of the hazards of smoking and second hand smoke among members of our community	Included in process and procedures and ongoing
Provide smoking cessation educational programs on The Patient Education Channel free of charge to patients and visitors.	Hospital	Ongoing	Decrease the number of tobacco users in the community	Accomplished
Provide a low cost three session smoking cessation class to help smokers quit. Class will be open to the public and advertised throughout the community	Hospital	Ongoing	Decrease the number of tobacco users in the community	Accomplished and classes are provided on an ongoing basis. Aug 2016 became certified by American Lung Association as a Freedom From Smoking Educational Provider
Educate patients who are seen by the diabetic educator about the particular hazards of smoking on the diabetic disease processes	Hospital	Ongoing	Increase the overall health of the community	Accomplished and classes are provided on an ongoing basis. Aug 2016 became certified by American Lung Association as a Freedom From Smoking Educational Provider

Community Health Need:		Infant Mortality			Evaluation Impact 2016
Goals:		To have a positive impact on the infant mortality rate in our community			
Strategy: Provide continued support and education to the community regarding prenatal and					
Action Step		Accountability	Timeline	Desired Outcome	
Provide a low cost child birth and newborn education class to expectant parents		Hospital	Ongoing	Educate expectant parents and new parents on the importance of infant care	Accomplished and continue to provide education
Offer monthly no-cost breastfeeding classes		Hospital	Ongoing	increase in breastfeeding	Accomplished and continue to provide education. Hired lactation consultant. Pursuing Baby Friendly status
Participate in community health fairs to promote prenatal education		Hospital	Ongoing	Educate expectant parents and new parents on the importance of infant care	Accomplished and ongoing
Provide new parents with education regarding back to sleep, co-bedding, and second hand smoke		Hospital	Ongoing	Increase awareness regarding importance of placing newborn on the back to sleep, as well as the hazards of co-bedding and second hand smoke	Part of discharge process/teaching. Ongoing.
Provide parental CPR training for high risk newborns		Hospital	Ongoing	Increase the understanding of infant CPR so parents are better equipped to care for their high risk newborn.	We have not been routinely providing infant CPR training to parents for high risk newborns. The director of the unit is working on plans to be able to offer this service.
Provide education regarding the risks of early delivery		Hospital	Ongoing	increase awareness of the importance of not delivering until 39 weeks gestation	Accomplished. Standardized through office. Had no early elective deliveries since October 2014.

Board Approval

This Community Health Needs Assessment Report for fiscal YE September 30, 2016 was approved by the Conway Medical Center Board of Directors at its meeting held on September 26, 2016.