

Community Health Needs Assessment



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Executive Summary

Background and Purpose

Columbus Regional Healthcare System, located in Columbus County, North Carolina, is the leading healthcare provider serving the health care needs of those in the Columbus County area. With a mission *to be the primary healthcare home of the citizens of Columbus County and surrounding communities*, Columbus Regional Healthcare System is dedicated to improving the health of the community and being a leader in raising standards for excellence in care delivery

In the spring of 2022, Columbus Regional Healthcare System staff in collaboration with stakeholders in Columbus County convened a **Wellness Initiative** to review obstacles to health and physical needs of residents in our county. This effort focused on assessing community health needs, local health resources, barriers to care, gaps in services, and trends regarding health and healthy lifestyles and to seek funds to address strategies developed during this process. The CHNA will be utilized to document community need and link those needs to benefit community efforts through partnerships with local health resources. The needs assessment will be utilized to assist the hospital in planning and prioritizing its community benefit investments. The assembled task force met to discuss questions to be included on the survey and how the survey should be disseminated across the county. During the first meeting of this group it was determined that we needed a third party facilitator to ensure the process was comprehensive and was open to all residents. MDC-Rural Forward agreed to take on this task and has been involved in developing agendas, meeting times and stakeholders. Our county has completed two needs assessments in the past nine months. A study of the recreation needs of the county was commissioned by the County and has been completed. The second needs assessment was funded through Kate B. Reynold and addresses the substance abuse/misuse issues in our County and is targeting some of the same areas we are addressing in our health assessment. The needs assessment is working with the hospital and local agencies to determine how to best allocate funds from the Pharma settlement which will average 7 million dollars over an 18 year period. There is currently a Columbus County Opioid Substance Abuse/Misuse Coalition made up of members from across the county that is addressing these issues. The members are listed in the Appendix.

Data Collection and Process.

The CHNA was incorporated into a Survey Monkey and pen and paper surveys were prepared in both English and Spanish. A listing of possible agencies that should be included in the dissemination of surveys was developed. These sites included, but were not limited to:

- Columbus Regional Healthcare Staff
- Columbus County and Whiteville City Schools
- Southeastern Community College Faculty, Staff and Students
- Local Public Libraries

- Physician Offices
- Behavioral Health Centers
- Department of Aging Sites
- Civic Groups such as Rotary and Columbus Children, Youth and Families
- Hispanic Outreach Programs
- Support Groups such as Parkinson's Meetings.
- Columbus Ministerial Association through CRHS Chaplain's Office
- Waccamaw Siouan Development Office
- All Law Enforcement Agencies
- Columbus County Government
- Local Town and City Governments
- Faith Based organizations
- Columbus County Chamber and Tourism
- International Paper
- Columbus County Jobs Foundation
- Private medical practices and clinics
- Local Chambers of Commerce (Chadbourn, Tabor City and Fair Bluff.
- Minority owned barber shops and salons

Our intent was to distribute surveys throughout the county and utilize those listed above to obtain responses that reflect the entire community. Whiteville, being the largest township in the county, was expected to have the greatest return and that was reflected in our response rate. An effort was made to reach underserved areas of the county and members of the committee were asked to reach out to identify individuals in these areas.

The Community Health Needs Assessment (CHNA) Survey developed for this assessment cycle was utilized in addition to a survey completed in the summer of 2022 to assess Opioid, Substance Abuse and Misuse in Columbus County. The [opioid/substance abuse survey](#) was implemented through a joint effort by The Columbus County Regional Hospital and Columbus County Government. A task force appointed by Addiction Consultant Training, LLC from Chapel Hill and approved by the Columbus County Board of Commissioners will oversee the settlement funding designated for our county through the Big Pharma settlement. This survey, included as a link in this document, and questions/comments gathered during this process tend to validate issues identified with the CHNA. Also included as a link in this document is the Community Recreation Needs Assessment, a study conducted by the Columbus County Parks and Recreation to research status of access to health and recreation facilities for residents in our county. These documents validate many of the findings identified throughout our survey. Please refer to the Appendix for all links listed in this document.

Key findings through the CHNA, as they did in 2019, indicate residents note a lack of access to health care and the funds to pay for medical services, chronic diseases (heart disease, stroke,

cancer and diabetes), premature deaths due to accidents, suicides and drug abuse, issues with obesity and the impact on individuals dealing with weight management, illegal drug and prescription drug abuse, safe places for recreation and exercise and lack of facilities for this purpose.

In 2018, the Columbus County YMCA Steering Committee implemented three programs in response to the results of the survey conducted by the YMCA of Southeastern North Carolina and Columbus Regional Healthcare System. Two private pools within the County were converted to public YMCA pools. Swim for Life Safety Programs, free and private swim lessons were offered at these locations during 2018 and 2019. Unfortunately, in 2021, due to Covid and lack of qualified lifeguards, those pools were not operation in 2021 and 2022. Girls and the Run (GOTR) and STRIDE, two nationally recognized programs emphasizing exercise and leadership operated for three years in the county and city school systems with over 200 students participating ceased during the Covid lockdown and closure of face to face classes. In the spring 2020 we began a new diabetes education program in the county with funding secured by the YMCA of SENC, BCBS and North Carolina State University. Classes are conducted for those who are at risk for developing diabetes and options are offered to delay onset or prevent progress of the disease. These opportunities together will address many of the concerns/needs that were identified through the two surveys. The Columbus County YMCA Steering Committee supported the Columbus County Parks and Recreation Department as they worked to find matching funds to complete a specialized outdoor training facility adjacent to the Columbus County Farmer's Market. Currently, MDC-Rural Forward has contracted with our county to facilitate a wellness initiative with the hope of using data from all three surveys to raise funds to build a YMCA Center. That committee, with representation from all demographic groups in the county has already begun meeting, setting goals and establishing a 501-C3. Good news for our county also include the funding of an inclusion park located just outside of Whiteville and funded by Trillium. The grant was written by the same consultants who are working with us on the Substance Abuse Coalition

Identified Health Priorities

A variety of data and information was collected and analyzed in order to identify key priority health needs of the community. The prioritization process included review and analysis of:

- 1) Secondary, quantitative statistical data,
- 2) Primary, qualitative community feedback, and
- 3) Current community and Columbus Regional Healthcare System assets.

In addition to review of above, CRHS staff, distributed surveys to identified individuals, groups and healthcare related professionals, utilized feedback from the Columbus County Substance Abuse/Misuse Coalition, Recreation Advisory Committee and Columbus County Wellness

Initiative to identify priorities and discuss potential action plans. To select priorities and related strategies, the following criteria were considered:

- Data and community feedback indicated the issue as an important community need
- Columbus Regional Healthcare System has the capacity to impact the issue
- Addressing a selected issue holds the potential to affect other key health conditions, therefore creating a multiplying effect
- Strategies selected align with and support Columbus Regional's mission and strategic direction
- Strategies selected take in consideration current assets in both the community and within Columbus Regional Healthcare System

In considering the above, the following priorities were selected:

1. Heart Disease and Stroke

As noted in the 2022 Health Needs Assessment, residents indicated cancer as the number one health concern in the county with 36% of respondents listing it as the top concern even though heart disease and stroke continue to be the leading cause of death according to statistical data supplied by NCDHHS attributing to 209 deaths or 27.9% in Columbus County. Obesity was ranked as second important health concern with 52.8% responding which correlates closely with cardiovascular disease.

2. Cancer

Cancer was identified by residents as one of the most important health in our county with 36.02% responding this was a leading health issue. The N.C. Division of Public Health reports cancer as the second highest cause of death in Columbus County at 17.8% and 133 deaths. These statistics are from the NCSCHS 2017 Leading Causes of Death in Columbus County statistics. Cancer continues to be the leading cause of death in North Carolina with a percentage of 20.9% of the 19,474 deaths. Lung cancer is the leading cause of cancer deaths in Columbus County with 205 reported deaths between 2013 and 2017. (2017 State Center for Health Statistics).

3. Diabetes

The prevalence of diabetes continues to be high in Columbus County with 45.03% indicating it is a major health concern and is tied with cerebrovascular disease for the fourth leading cause of death (NCSHSC, 2017). Diabetes is also a major cause of death

and disability in North Carolina and across the nation. With a greater prevalence of obesity and an increasing elderly population, diabetes is approaching epidemic proportions in North Carolina and our county.

We must address the impact COVID 19 has had on our County and State. In a county already suffering from poverty, high unemployment, lack of housing and access to health care, COVID had a significant impact on children, families and our economy, Characteristics listed below are factors that may be related to SARS-CoV transmission, increase the risk of severe COVID 19 and/or make individuals vulnerable to the social impacts of the pandemic.

Among Columbus County households:

- 24% live in crowded housing, meaning they have more than one person per room
- 6.8% have grandparents living with grandchildren under age 18 and
- 46.3% of county renters are cost burdened, meaning they spend 30% or more of their monthly income on housing

Among Columbus County residents:

- 19.4 % of individuals age 1—64 do not have health insurance
- 19.2% smoke
- 46.2% of adults age 20 and older are obese and
- 19.1% of adults age 20 and older have been diagnosed with diabetes
- 58.7 % of county residents work in another county while 46.5% of Columbus jobs are filled by individuals outside of Columbus County

Columbus County cases Confirmed 17,510 Deaths 276

Updated Aug 19 at 11:59 AM local

North Carolina cases Confirmed 3,074,964 Deaths 25,770

Updated Aug 19 at 11:59 AM local

[Coronavirus in Columbus NC | UNC Gillings Coronavirus Dashboard](#)

Respondents to the CHNA Assessment Survey indicated illegal drug use ranked among their top concerns for unhealthy behaviors with a response rate of 72.2%. This response correlates with data included in the County Health Rankings and Roadmaps 2002 rankings for Columbus County. Data indicated higher than state average for drug overdoses in Columbus County in addition to higher numbers of violent crime which could be attributed to illegal drug use by residents; one reason the county was funded by The Kate B. Reynold Foundation to conduct a needs assessment on opioid/ substance abuse misuse. Our county rates are higher than the state average in accidental deaths, homicide, mental health, and cardiovascular disease. We are designated as medically underserved and recognized as a food desert by USDA.

[MUA_Find_Export \(2\).pdf](#)

[HPSA Find \(hrsa.gov\)](#)

- Community assets related to these needs have been identified in the *Identified Priority Health Needs & Related Assets* section of this report.
- Strategic initiatives to address each of these identified needs have been developed and are included in the Columbus Regional Healthcare System's Community Health Needs Assessment- Implementation Strategies and reported annually to the IRS on Form 990.
- The 2022 CHNA report will be made available to the public and posted on Columbus Regional Healthcare System's website: www.crhealthcare.org

About the Research

Community research was conducted by a Wellness Initiative Committee comprised of members from the various communities, key stakeholders from Columbus Regional Healthcare System, Columbus County Health Department, various local businesses public and private non-profits, public officials, private citizens faith based organizations. A community-based approach was taken to complete the community health needs assessment. National, state, regional and county specific data were collected from a broad set of data sources. Special emphasis was placed on reviewing The Healthy People 2030 Leading Indicators, medically underserved areas and gathering information from community residents, providers of health and human services and other stakeholders and representatives of Columbus County. The Healthy People 2030 paper has a vision, measures, health indicators and objectives to direct their work for the time frame designated in this report.

Vision

A society in which all people can achieve their full potential for health and well-being across the lifespan.

Overall Health and Well-Being Measures

8 broad, global outcome measures intended to assess the Healthy People 2030 vision

Core Objectives

358 measurable public health objectives that have 10-year targets and are associated with evidence-based interventions

Leading Health Indicators

A small subset of 23 high-priority Healthy People 2030 core objectives selected to drive action toward improving health and well-being

Developmental Objectives

Public health issues with evidence-based interventions but lacking reliable data

Research Objectives

Public health issues that are not yet associated with evidence-based interventions

For access to the archived slides from HP2030 Progress Reviews, see: [Healthy People 2030 Progress Review](#).

[Healthy People 2030 | health.gov](#)

[Healthy People 2030 Objectives and Measures - Healthy People 2030 | health.gov](#)

Efforts were made to ensure that the research was conducted in a manner that was representative of the communities within Columbus Regional's primary service area. The primary service area and focus of the CHNA is Columbus County as approximately 82.2% of Columbus Regional's inpatient, outpatient and emergency room discharges were residents of Columbus County.

Research methods were conducted in an approach that incorporated both quantifiable and qualitative data to get a well-rounded view of the state of the community's health needs.

- 1) Collection of **statistical (secondary, quantitative) data** at national, state, regional and local levels-key data sources included Healthy People 2020, County Health Rankings, National Health Indicators Warehouse, CDC and North Carolina DEHEC biostatistics and hospital discharge data. Dates of data collected ranged from 2013-2022. For each indicator, data was pulled for the most recent year available. In addition, data was pulled when available, from previous years in order to assess progress
- 2) Collection of **qualitative data** through a community health assessment survey was distributed throughout Columbus County via web link, survey monkey, email and pen and paper hard copies in English and Spanish in addition to personal visits and presentations across the county.

Community Served – Columbus County

The geographic service area and focus of the Columbus Regional Healthcare System's CHNA is Columbus County as approximately 82.2% Columbus Regional's inpatient, outpatient and emergency room discharges were from those who reside in Columbus County. The ED served

24,131 patients in the 2021 calendar year with 459 having a diagnosis and referral for behavioral health issues. The number of mental health referrals correlates with perception of angry behavior and violence as health concerns in the county

Population Growth

Columbus County, North Carolina's estimated population is 50,623 with a growth rate of -0.52% in the past year according to the most recent United States Census Data. Columbus County, North Carolina is the 51st largest county in North Carolina. The county decreased in population from 56,279 in 2016.

[2020 Census Population and Housing Map | Tableau Public](#)

[U.S. Census Bureau QuickFacts: North Carolina](#)

Race

Using the sources cited above the racial makeup of Columbus County is as follows:

Race	Population
White Alone	62.9%
Black or African American	30.2%
American Indian/Alaskan	4.0%
White Alone, Not Hispanic or Latino	58.7%
Two or More Races	2.2%
Asian	0.6%
Latino/Hispanic	6.0%
Native Hawaiian or Pacific Islander	0.1%

POPULATION

<u>Total</u>	54,575	Annual Growth Rate -0.57
Fair Bluff	1,038	
Tabor City	9,116	
Whiteville	18,448	
Nakina	2,500	
Clarendon	1,407	
Brunswick	48	
Cerro Gordo	2,298	
Delco	2,090	
Lake Waccamaw	2,684	
Bolton	485	
Riegelwood	3,750	
Chadbourn	7,027	
Evergreen	1,651	
Hallsboro	1,432	

Education

Columbus County is below the state average for high school graduates at 86.3% for Columbus County schools and one percentage point higher than the state average in the Whiteville City Schools, which is reflected in the survey and could be attributed to lack of job opportunities directly related to less than desired skilled workforce. Unemployment is above the state average at 4.90% in addition to income inequality at 5.2%. All these combined with number of children living in poverty, and low median household income contribute to low educational attainment and well-trained workforce. (County Health Rankings and Roadmap, 2022) The student population of our County is skewed towards women with 427 male students and 844 female students receiving degrees. Universities or colleges awarded 326 degrees. Most graduates are White followed by Black or African American and most common majors are Liberal Arts and Sciences, General Business Administration and Management and Electrical Engineering and Technology.

Income and Poverty



The economy of Columbus County, NC employs 20.5k people. The most common jobs held in Columbus County, NC are Sales and Related occupations (2,155 people), Production Opportunities (1804 people) Office and Administrative Support Occupations (1686 people). Compared to other counties, Columbus County, NC has an unusually high number of residents working as Law Enforcement Workers including Supervisors (1.89 times higher than expected). Health Technologies and Technicians 1.83 times) and Farming, Fishing and Forestry Occupations (1.8 times.). The highest paid jobs held by residents of Columbus County, NC by median income are Architecture and Engineering Occupations (\$61,250), Health Diagnosing & Treatment Practitioners and other Technical occupations (\$57,188), Life, Physical and Social Science Occupations (\$56,250). The highest paying job in Columbus County, NC by median earnings are Utilities (\$53,828), Transportation and Warehousing and Wholesale Trade (\$48,931). Median household income in Columbus County, NC is \$37,628. This is less than the median US income at \$6,712. Males in Columbus County, NC have an average income that is 1.33 times higher than the average income of females, which is \$47,862. Median income of the residents of North Carolina is (\$52,800). Statistics indicate in 2020 Estimated population in with income below the poverty level is over 23.6% .In 2019, Columbus County ranked 17th out of North Carolina counties, with the percent of individuals below 200% FPL at 46.4%. Data provided by [U.S. Census Bureau American Community Survey 5-Year Estimates Subject Tables \(S1701\)](https://datausa.io/profile/geo/columbus-county-nc/#economy). <https://datausa.io/profile/geo/columbus-county-nc/#economy> <https://www.countyhealthrankings.org/app/north-carolina/2019/measure/factors/63/data> [Columbus County, North Carolina | County Health Rankings & Roadmaps](#) [Compare Counties in North Carolina - Columbus \(CU\) | County Health Rankings & Roadmaps](#) [Columbus County, North Carolina | County Health Rankings & Roadmaps](#) <https://www.welfareinfo.org/poverty-rate/north-carolina/columbus-county>

Unemployment

According to the Columbus County Health Rankings and Roadmaps, 2022, unemployment in Columbus County is 8.2.6%. Unemployment in NC is 7.2% according to BLS statistics.

<https://accessnc.ncommerce.com/DemoGraphicsReports/pdfs/countyProfile/NC/37047.pdf>
<https://www.bls.gov/eag/eag.nc.htm>

With the downturn in the economy over the past several years, poverty rates have climbed at an alarming rate and are much higher than the nation's 14.3% poverty rate. Columbus County's rate for children living in poverty has increased to 27% when compared to the state's poverty level of 18%. The Columbus County Economic Development Office maintains current data on the health of our county as it relates to education, economics, poverty levels and factors related to business and industry development.

[Columbus County Economic Development Commission \(columbusedc.com\)](http://columbuscountyedc.com)

General State of our Community's Health

For a general overview of the state of health outcomes and related factors please refer to the following report. Also, included in the following links is a review of the health of Columbus County published by US New and World Report, 2022 Healthiest Communities.

[Columbus County | Healthy Communities NC](#)
[Compare Counties in North Carolina - Columbus \(CU\) | County Health Rankings & Roadmaps](#)
[How Healthy Is Columbus County, North Carolina? | US News Healthiest Communities](#)

Summary of Findings

General Social Characteristics

- Columbus County's population has experienced a decline since 2011. Population statistics now indicate a total of 54,575, a decline of 311.
- Educational attainment stands at 6.33% below ninth grade, and 33% no higher than a high school education. The highest graduation rates are among the Asian population with a rate of 100%.
- Columbus County continues to reflect a more diverse population than the state and nation with more females than males, a difference between 39.9% and 43.7%. Of our 44,150 adults, 10,484 are considered senior citizens.
- Median household income has remained stagnant over the past 10 years and is lower than the state and nation. Poverty rates have increased at an alarming rate and is now 23.62% and higher among females. The average wage earned in Columbus County is \$29,739.
- Unemployment remains higher than the state and national average.
- Spanish is the only language spoken by 4.69% of the population.

General Health Rankings

- Columbus County was ranked as the least healthy county in the state of North Carolina for the years 2009 – 2014 ranking 100 out of 100. In 2015 some improvement to the overall rank was achieved with a score of 96 out of 100. The health outcomes ratings (morbidity, mortality) was 96 and was 88 among the health factors ratings (social, economic, environment, health behavior factors). As of health rankings released for 2022, Columbus County ranked 91th in the state in Health outcomes and 92th in Health Factors.

Healthy Lifestyles

- Overweight and obese adults and children are a concern, as well as habits related to lack of exercise and healthy eating.
- Community Perceptions: Feedback from the community health assessment surveys indicated that there is still a lack of physical activity, eating healthier foods and smoking among adults as reported in the 2015 Behavioral Risk Factor Surveillance Survey (BRFSS). These three health behaviors are self-reported among Columbus residents and negatively impact the health of residents.
- Most people have a general knowledge of how lifestyle choices impact health; however, most report, that for reasons related to cost, access and convenience it is difficult to maintain a healthy lifestyle. Survey respondents stated the economy is their biggest concern and they feel the lack of job opportunities and insufficient funds to pay for everyday necessities are two main reasons our county continues to be ranked low in the state for health factors and outcomes.

Health Risk Factors

- Prevalence of diabetes continues to be high and Columbus County has a higher rate than both the state and nationally at 16.9%
- Infant mortality is higher than the state average at 9.3%.
- Columbus County in the 2022 Health Rankings and Roadmaps indicated Columbus County had 12,200 premature age-related deaths as compared to 8000 at the state level with average life expectancy of 74.5 years as compared to 78.1.
- Heart disease rates continue to increase and according to the North Carolina Health Profile for Columbus County through 2019 is 287.5 compared to 158.0 for the state.
- Community Perceptions: The community health assessment surveys consistently reported that obesity, chronic disease and drug/alcohol abuse were the number one health problems in Columbus County and aligned closely with state rankings.

[Columbus County - NCIOM](#)

Health Outcomes- Morbidity and Mortality in Columbus County

- Diseases of the heart were the number one leading cause of death in Columbus County in 2021 attributing to 294.77 deaths.

- Cancer is the second leading cause of death in adults in Columbus County in 2021 attributing to 192.07 deaths.

Leading Causes of Death in North Carolina

COVID-19 rose to the third leading cause of death in North Carolina by June 2021, accounting for 98.2 deaths per 100,000. Heart disease and cancer have held steady as the leading causes of death in North Carolina, accounting for, respectively, 160.1 and 150.4 deaths per 100,000 as of June 2021. Unintentional injuries — which, per the CDC's definition, include unintentional drownings, motor vehicle crashes, falls and poisonings made up another significant portion of deaths in North Carolina, 69.1 per 100,000.

[Leading causes of death in North Carolina: CDC data | Charlotte Observer](#)

[Leading Causes of Death in Columbus County](#)

[North Carolina \(cdc.gov\)](#)

[TOP 15 CAUSES OF DEATH NORTH CAROLINA \(worldlifeexpectancy.com\)](#)

Mental Health

- Columbus is now served by Trillium (LME). There are several private providers (for-profit and non-profit) endorsed by them to provide at least one service related to mental health, developmental disabilities. The current ratio for mental health providers is 690:1.
- Feedback from the community indicates that there is a growing concern regarding mental health services related to substance abuse including prescription and illegal drug use. The Border Belt Newsroom, a cooperative funded by Kate B. Reynolds, published data indicting 27 deaths in Columbus County due to substance abuse in 2021.

[At least 27 died in Columbus County last year from substance abuse | Health | nrcolumbus.com](#)

Health Services

- Due to the lower-income status of Columbus County, it is designated as medically indigent with a Health Professional Shortage Area (HPSA) Score of 19 in primary care. In 2017, Columbus County had 5.4 primary care physicians per 10,000 residents as compared to 7.0 at the state level.
- Columbus County has improved and is comparable to the state and nation in preventive clinical services such as diabetes screenings, but mammography screenings are lower than the state average of 42% compared with 48% at the state level. Our CHNA indicated most females responding having had a mammogram in the last twelve months. Mammograms for the uninsured (388) were provided in 2021 with foundation funding.
- With increases in unemployment in Columbus County, the community assessments report access to care remains an issue, due mostly to lack of insurance and inability to pay for medical co-pays and prescriptions
- Hospital data indicate total number of patients seen in our Ed in 2021 totaled 24,731 with 20,123 residents of Columbus County.

[What is Shortage Designation? | Bureau of Health Workforce \(hrsa.gov\)](#)

Perceptions from the Community Health Assessment Surveys included:

Survey results indicated the most important health issues in our community are cancer, diabetes, obesity and weight issues along with mental health issues such as depression and anger.

Cardiovascular remains as one of the leading health issues in county. Top issues identified as unhealthy behaviors include alcohol and drug abuse, lack of exercise and poor eating habits.

Factors at impact the well-being in our community are drug abuse, lack of exercise options, and poor eating habits. Closely ranked is the inability to schedule routine medical check-ups.

Additional concerns that were noted in the survey findings include:

- Lack of health insurance and payment of copays and deductibles
- Appointments not available when needed
- The community reported additional need for health screenings and assistance for individuals with mental health needs and resources to combat illegal drug use and abuse of prescription drugs and alcohol
- This assessment, differed from our last one, emphasizing lack of exercise options, poor eating habits that issues related to obesity,
- **Survey Question # 43** (responses located in Appendix) was quite informative. Respondents were able to provide personal responses about their concerns or problems in the community.

Many of these issues are the focus of the Substance Abuse/Misuse Coalition and the Health and Wellness Initiative. It is important to note Columbus County leads the state in accidental deaths and is fourth in the state in the number of homicides (NC Health Rankings). These findings correlate with the Healthy North Carolina 2030 attainment goals that seek to holistically address and improve the health, safety, and well-being of North Carolinians.

[HNC-REPORT-FINAL-Spread2.pdf \(nciom.org\)](#)

Children's Health

Obesity is a condition affecting many residents in Columbus County and is the number one health problem in children. In North Carolina in 2022 Health Rankings, 38% of adults were obese. In 2017, 13.1% percent of children ages 10-17 were considered obese and 15.4% of high school students were obese. North Carolina ranks 19th in the nation for the number of individuals diagnosed as obese. More children are eligible for free lunch, lack of exercise and lack of choices for health foods contribute to this health issue.

<https://www.stateofobesity.org/states/nc/>

<https://datacenter.kidscount.org>

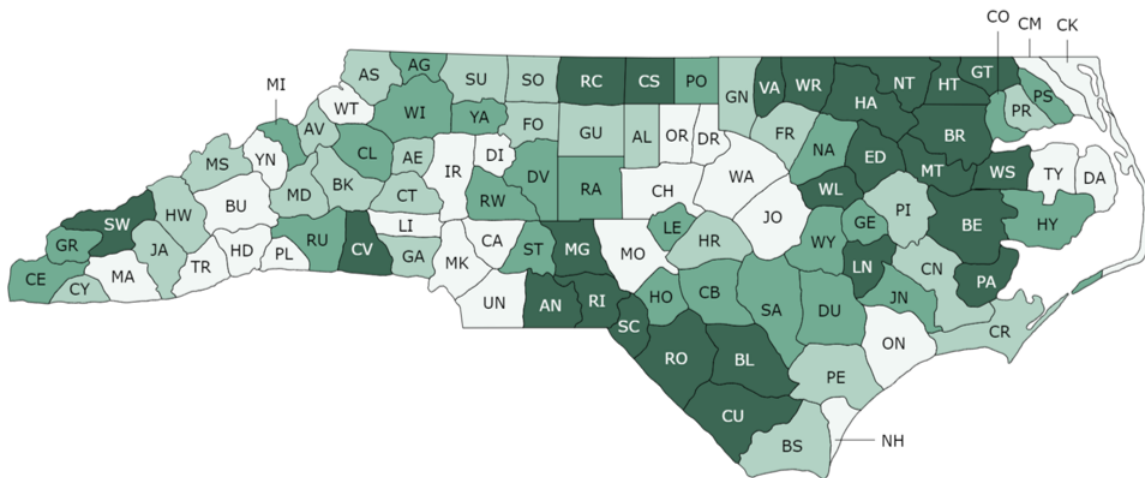
[Selected Indicators for Columbus County, North Carolina | KIDS COUNT Data Center](#)

COUNTY HEALTH RANKINGS

The *County Health Rankings* rank the health of nearly every county in the nation and show that much of what affects health occurs outside of the doctor's office. Published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation, the *Rankings* help counties understand what influences how healthy residents are and how long they will live. The *Rankings* confirm the critical role that factors such as education, jobs, income, and environment play in influencing health. The Rankings look at a variety of measures that affect health such as the rate of people dying before age 75, high school graduation rates, access to healthier foods, air pollution levels, income, and rates of smoking, obesity and teen births. The *Rankings*, based on the latest data publicly available for each county, are unique in their ability to measure the overall health of each county in all 50 states on the multiple factors that influence health. Visit the websites listed below to view the full document. Also included is the data for years of life lost based on life expectancy by total population, race, gender and ethnicity.

<https://www.countyhealthrankings.org/rankings/data/nc>
[North Carolina Downloads | County Health Rankings & Roadmaps](#)
[CD8B-2016-2020-YPLL-ByCounty.pdf \(ncdhhs.gov\)](#)

2022 Health Outcomes – North Carolina



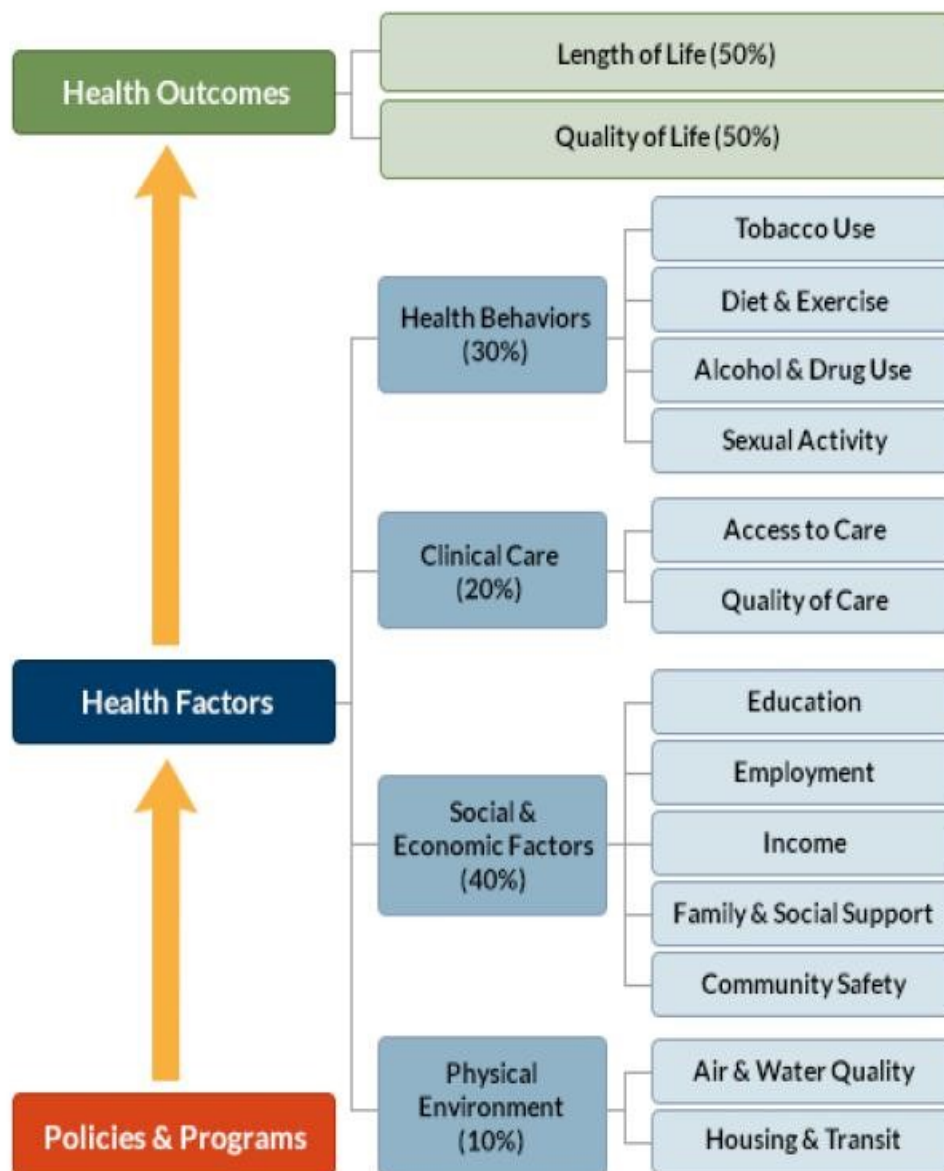
Health Outcome Ranks

1 to 25	26 to 50	51 to 75	76 to 100
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Columbus County ranked 91 out of 100 counties for having the least favorable health outcomes.

Based on the County Health Rankings, Columbus County ranks in the highest tier in the state among unhealthy outcomes. It ranks 94 out of 100 counties among the health outcomes ratings and 92 out of 100 among the health factors ratings. Columbus County was ranked at 100 for the 6 years in a row until improving to 96 for 2016 year.

The summary health factor rankings are based on weighted scores of four types of factors: behavioral, clinical, social and economic, and environmental. The weights for the factors (shown in parentheses in the figure) are based upon a review of the literature and expert input and represent just one way of combining these factors.

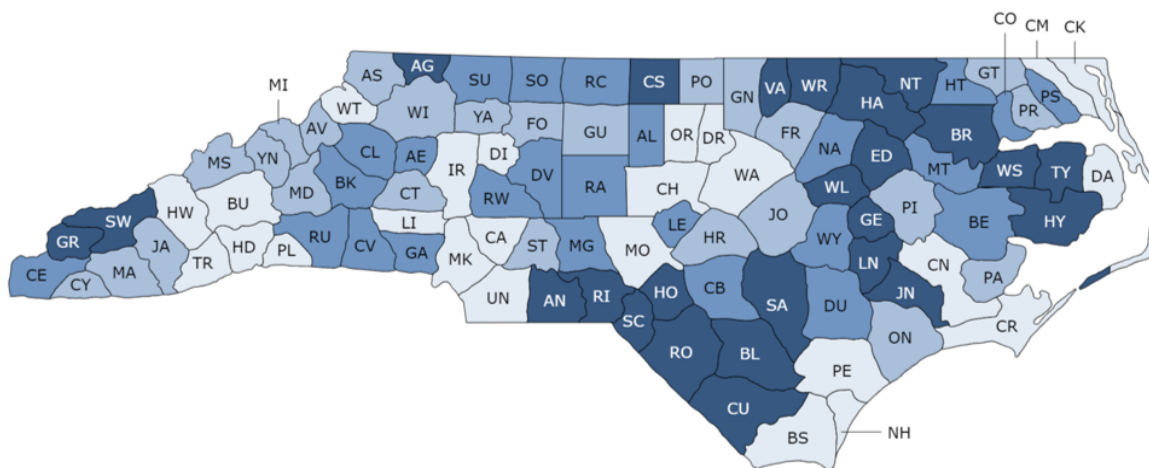


How Do Counties Rank for Health Factors?

Health factors in the County Health Rankings represent the focus areas that drive how long and how well we live, including health behaviors (tobacco use, diet & exercise, alcohol & drug use, sexual activity), clinical care (access to care, quality of care), social and economic factors (education, employment, income, family & social support, community safety), and the physical environment (air & water quality, housing & transit). Columbus County ranked 92 out of 100 counties.

Rank 1 • 25 • Rank 26-50 • Rank 51-75 • Rank 76-100

2022 Health Factors – North Carolina



Health Factor Ranks 1 to 25 26 to 50 51 to 75 76 to 100

The blue map shows the distribution of North Carolina's health factors based on weighted scores for health behaviors, clinical care, social and economic factors, and the physical environment. Detailed information on the underlying measures is available at www.countyhealthrankings.org. The map is divided into four quartiles with less color intensity indicating better performance in the respective summary rankings. Columbus County ranked 92 out of 100 counties based on favorable health factors

What are the Factors That Drive Health and Health Equity and How Does Housing Play a Role?

Health is influenced by a range of factors. Social and economic factors, like connected and supportive communities, good schools, stable jobs, and safe neighborhoods, are foundational to achieving long and healthy lives. These social and economic factors also interact with other important drivers of health and health equity. For example, housing that is unaffordable or unstable can either result from poverty or exacerbate it. When our homes are near high performing schools and good jobs, it's easier to get a quality education and earn a living wage, if people live near grocery stores where fresh food is available or close to green spaces and parks, eating healthy and being active is easier. When things like lead, mold, smoke, and other toxins are inside our homes, they can make us sick. And when so much of a paycheck goes toward the rent or mortgage, it makes it hard to afford to go to the doctor, cover the utility bills, or maintain reliable transportation to work or school.

Health Environment Columbus ranks approximately the same as the state average for particulate matter and air pollution. The county average is 9.7% while the state average is 9.8% The County is not listed as having any drinking water violations and ranks approximately the same for housing problems. We do face higher than state averages for those individuals who drive alone to work or drive alone and have long distance commutes. The county does have higher home ownership rates than the state average.

Health Risk Factors

Indicator	Columbus County Current	Columbus Past	North Carolina	Nation
Smoking (adults age 18+)	19.0%	24.4%	18%	25%
Diabetes	16.0%	14.6%	11.0%	8.3%
Hypertension	32.70%	32%	29.5%	29.9%
Infant Mortality	10.4%	17.9%	7.2%	7%

Sources: National Health Indicators Warehouse (HIW), Healthy People 2030
[Healthy_People_2030_Leading_Health_Indicators.pdf](#)

Health Outcomes – Mortality and Morbidity

Leading Causes of Death in North Carolina@ 2021

Location: COLUMBUS

Race: all

Gender: both all (Hispanic, Non-Hispanic and Unknown)

Age: 0 - 99 years

.

Rank	Cause	N u m b e r
1	Heart Disease - Ranks No. 1 in the state according to NC Health Rankings	294.77
2	Cancer	192.07
3	Covid 19	106.02
4	Accidents- Ranks No. 1 in the state according to NC Health Rankings	77.48
5	Stroke	59.14
6	Lung Disease	52.9
7	Diabetes	29.97
8	Kidney Disease, Nephritis	26.06
9	Alzheimer's Disease	24.9
10	Influenza/Pneumonia	20.55
*	Columbus County ranks 4 th in the state in the number of Homicides	16.68

Source: State Center for Health Statistics, North Carolina

[North Carolina \(cdc.gov\)](https://www.cdc.gov)

[TOP 15 CAUSES OF DEATH NORTH CAROLINA \(worldlifeexpectancy.com\)](https://worldlifeexpectancy.com)

Leading Causes of Death in North Carolina@ 2020

Location: ALL COUNTIES

Race: all

Gender: both all (Hispanic, Non-Hispanic, and

Hispanic Origin: Unknown)

Rank	Cause
1	Diseases of the Heart
2	Cancer
3	Covid 19
4	Accidents
5	Stroke
6	Chronic Lower Respiratory Disease
7	Alzheimer's Disease
8	Diabetes
9	Kidney Disease
10	Influenza/Pneumonia

Source: State Center for Health Statistics

[TOP 15 CAUSES OF DEATH NORTH CAROLINA \(worldlifeexpectancy.com\)](https://worldlifeexpectancy.com/top-15-causes-of-death-north-carolina/)
[North Carolina \(cdc.gov\)](https://www.cdc.gov/nchs/data/tables/leadingcauses/leadingcauses.html)

Cancer

The N.C. Division of Public Health reports that cancer is now the leading cause of death in North Carolina surpassing heart disease. In Columbus County, the cancer rate is 17.8% compared to the state rate of 20.9%. Lung cancer is the leading cause of cancer death in Columbus County (July 2020 Cancer Profiles). Please refer to the link below to review fact sheet related to cancer statistics and the risk factors and Interventions related to these diseases in Columbus County, North Carolina and the United States.

Projected Types of Cancer	Columbus County	North Carolina
Lung/Bronchus	56	9375
Colon/Rectum	28	4838
Female Breast	64	11,315
Prostrate	45	7739
Pancreas	10	1774
All Cancers	372	64,274

[Cancer Profiles \(ncdhhs.gov\)](https://www.ncdhhs.gov/cancer/cancer-profiles)
[cp_nc \(ncdhhs.gov\)](https://www.ncdhhs.gov/cancer/cp_nc)

Heart Disease

Heart Disease is the second leading cause of death for men and women in North Carolina. The risk for heart disease increases as a person's age increases. In addition to behavioral risk factors, obesity, high blood pressure, high cholesterol and diabetes are other known risk factors for heart disease In Columbus, diseases of the heart mortality rate are 27.9% compared to the state rate of 20.2%.

[NC County Health Data - NCIOM](#)

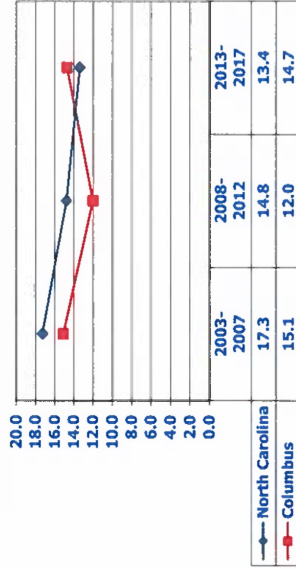
Charts included on the following two pages indicate statewide and county trends in key health indicators and include comparisons to Columbus County for Colorectal Cancer, Trachea, Bronchus and Lung Cancer, Female Breast Cancer and Prostate Cancer, Cardiovascular, Heart, Stroke and Diabetes death rates per 100,000 residents.

[Columbus.pdf \(ncdhhs.gov\)](#)

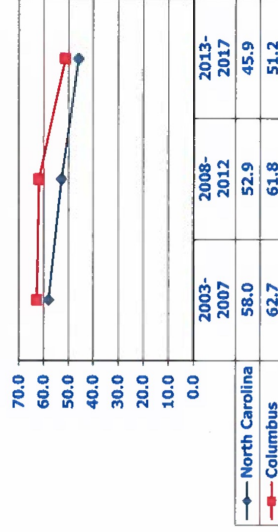
NORTH CAROLINA STATEWIDE AND COUNTY TRENDS IN KEY HEALTH INDICATORS: COLUMBUS COUNTY



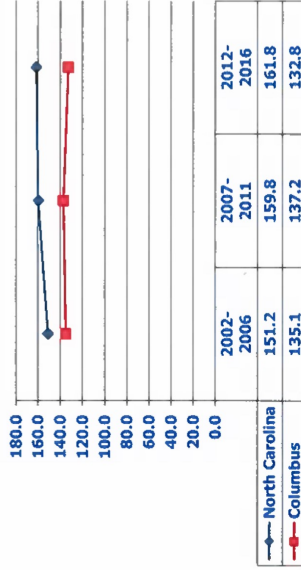
13. Age-Adjusted Colorectal Cancer Death Rates per 100,000 Residents (Healthy NC 2020 Target=10.1)



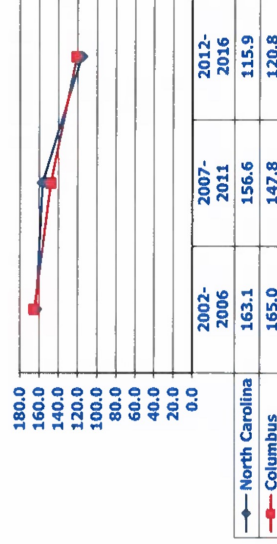
14. Age-Adjusted Trachea, Bronchus, & Lung Cancer Death Rates per 100,000 Residents



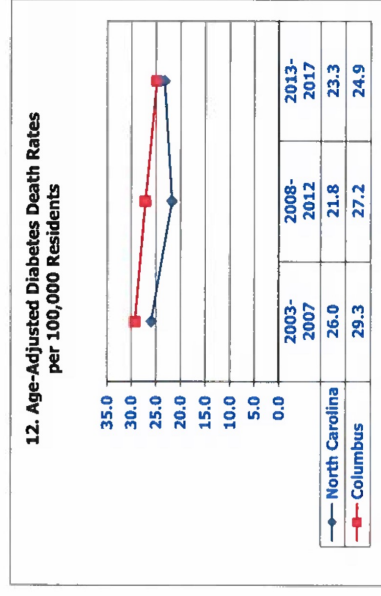
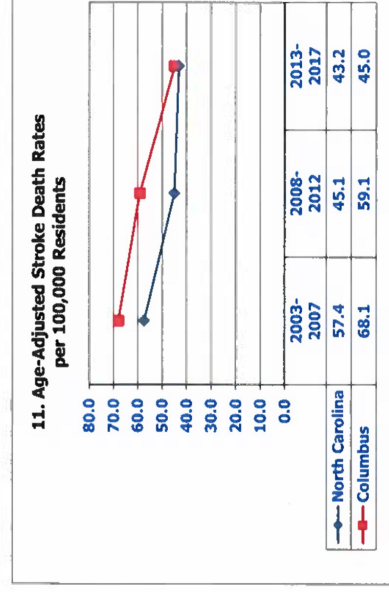
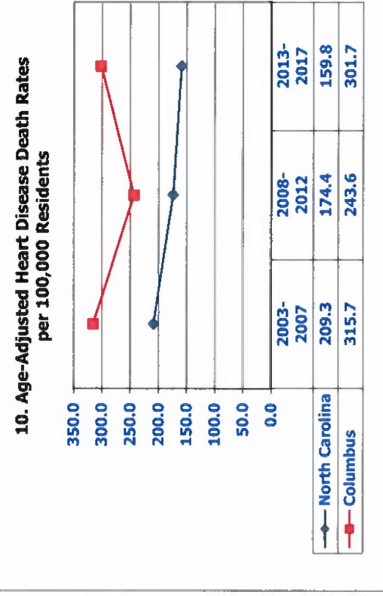
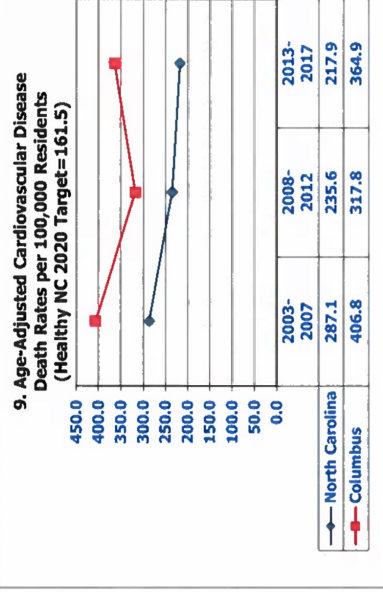
15. Age-Adjusted Female Breast Cancer Incidence Rates per 100,000 Residents



16. Age-adjusted Prostate Cancer Incidence Rates per 100,000 Residents



NORTH CAROLINA STATEWIDE AND COUNTY TRENDS IN KEY HEALTH INDICATORS: COLUMBUS COUNTY



Health Services – Preventive Clinical and Access

Due to the lower-income status of the county, the United States Census designates Columbus County as “rural”. Columbus has an unemployment rate of 9.2 (2020) with 22.3% living in poverty and is considered a Tier 1 county, which means it is considered economically depressed by the State health factors and outcomes in North Carolina. (Lowest 0%-25)

[Columbus County - NCIOM](#)

Clinical Preventive Services

Screenings

Columbus County screening rates for some of the most widely recommended screenings are better than the state and national rates. Various events are held throughout the year where free screenings are provided to the public for regular cholesterol, blood pressure and bone density checks. Listing of [health screenings](#) and wellness activities sponsored by the hospital are **included in the Appendix**.

Health Care Access

At 19.4%, Columbus County has one of the highest rates of uninsured adults age 19 and over. Additionally, 5.6% of our children ages 0-18 lack health insurance coverage, which is in line with the state average of 5.4%. (2022 County Rankings and Roadmaps). Our Medicaid population is at 36.6% compared to the state average of 25%. We have fewer health care physicians per 10,000 residents compared to the state level, few dentists and birth attendants. Access to Psychiatrists and Psychologists is 0.4 per 10,000 as compared to 3.6 per 10,000 residents at the state level. Rate of substance abuse and mental health-related visits to emergency departments per 100,000 population is 1841.7. This has been changing over time in Columbus County, NC in comparison to neighboring states. Data provided by County Health Rankings and Roadmap, 2022.

<http://nciom.org/nc-health-data/nc-data/>

<https://www.countyhealthrankings.org/rankings/data/nc>

2022 Community Feedback-A Community Survey

Community Survey

Qualitative data was gathered by conducting a community survey with a total of 324 from community members. The prioritization process included review and analysis of this primary, qualitative community feedback to determine priorities for healthcare interventions within Columbus County. Participants are lower for this needs assessment but that could be attributed to the other two assessments that were completed in the last six months on health and wellness and addressing substance abuse and misuse issues. In addition, this survey was distributed mainly online and access to internet is still costly and unavailable in areas of the county. The severity of Covid has also impacted participation in many community initiatives.

[2022 Community Health Needs Assessment Survey Results](#) in the Appendix and the survey alone as a pdf document for those who wish to review the questions without the results. We have a total of 324 residents responding to the survey, less than in 2019. There are similarities with responses but major concerns fluctuated in importance. More individuals indicated concerns related to drug and substance abuse, behavioral issues and violent behavior in addition to lack of exercise option and concerns with residents struggling with weight issues and obesity. These concerns are reflected in causes of death in the county and statewide.

Identified Priority Health Needs & Related Health Assets

To select priorities and related strategies, the following criteria were considered:

- Data from the Community Health Assessment Survey indicated the issue as an important community need.
- Columbus Regional Healthcare System has the capacity to impact the issue.
- Addressing a selected issue holds the potential to affect other key health conditions, therefore creating a multiplying effect.
- Strategies selected align with and support Columbus Regional Healthcare System's mission and strategic direction
- Strategies selected take in consideration current assets in both the community and within Columbus Regional Healthcare System

In considering the above, the following priorities were selected:

1. Heart Disease and Stroke/Obesity/Overweight/Obesity/Lack of Exercise

Cardiovascular disease includes the second and fourth leading cause of death in North Carolina heart disease and stroke- and account for nearly 26% of all deaths in North Carolina.

Heart disease is the number one leading cause of death in Columbus County with a ranking of number one in the state at 294.77 (Adjusted Death Rate per 100), (NCHEALTHRANKINGS/CDC 12/21) While high blood pressure, smoking and physical inactivity are considered four major risk factors, other factors such as obesity and diabetes are also considered risk factors.

2. Cancer

The Columbus County Cancer Profile for July 2020, indicated 64,274 people were projected to die from cancer in North Carolina. According to the same 2020 North Carolina Cancer Registry 372 were projected to die in that same time period in Columbus County making it the second leading cause of death compared to the number one ranking statewide. Lung cancer is the leading cause of cancer death in Columbus County with 56 projected deaths.

It is generally recognized that most cancers are related to personal lifestyle or environmental factors (smoking and diet). Other factors (age, gender, family history of a

specific cancer) are also associated with the development of cancer and aid in the identification of people at high risk.

3. Diabetes

The prevalence of diabetes continues to be high in Columbus County ranks 31 out of 100 counties as the leading death as of 12/21. Diabetes is also a major cause of death and disability in North Carolina and the nation. With a greater prevalence of obesity and an increasing elderly population, diabetes is approaching epidemic proportions in North Carolina. The number of diabetes related deaths in Columbus County from 2015-2019 was 117 with a death rate of 45.0 as reported in Vital Statistics –Volume 2, January 2021.

Implementation Strategies

After identification of health care priorities, additional planning meetings will be facilitated with Columbus Regional Healthcare System leaders and the Wellness Initiative to develop strategic initiatives to address the health care need priorities.

Columbus Regional Healthcare System's Implementation Strategies include:

Heart disease and stroke- To address heart disease and stroke, Columbus Regional Healthcare System will focus on:

1. Community education efforts to increase early heart disease/stroke awareness and detection
2. Increase at risk population screenings for heart disease. More specifically, initiatives include tracking number of referrals to cardiac rehabilitation services at CRHS, continue to partnership with outside physicians specializing in cardiology and vascular issues and a daily in-county presence from Wilmington Heart Associates.
 - a. Offer community education programs on topics related to heart disease and stroke awareness including cholesterol screenings, blood pressure checks and education related to preventative measures such as physical exercise and weight loss. Continue inclusion of screenings and education into current community programs, health fairs and community outreach events. CRHS has initiated participation in local health fairs in conjunction with the Columbus County Farmer's Market, G&G Healthcare, **community screenings** (see appendix) at churches and within the hospital. There have been various screenings for vascular issues during the past year. We are now working with the Faith Community in Black Communities by offering Blood Pressure Checks at minority owned Barber Shops and Salons. We are also participating

in health fairs and events across the county offering information on heart disease and related health issues. Columbus Regional Healthcare System employees are offered an annual wellness program that includes wellness labs, immunization compliance and identification of hypertension and other chronic illnesses.

- b. A partnership with the Columbus Regional Foundation has assisted the Hospital in the purchase of The [Viz Platform](#), utilized for Intelligent Care Coordination. This software empowers multidisciplinary care teams to coordinate care across mobile, desktop and within the radiology platform. Viz alerts multidisciplinary care teams earlier in the workflow, coordinating care by connecting frontline health care professionals (HCPs) to specialists facilitating efficient communication and coordinating care. Connecting care teams earlier in the workflow enables faster treatment decisions, significantly improving patient outcomes. This was made possible through a \$51,000 donation to the CRHS Stroke Initiative. Stroke is not an acronym; it is really a diagnosis. Columbus Regional Healthcare System is now a fully certified Acute Stroke Ready Hospital. The Emergency Department Staff nurses and physicians are prepared to diagnose and treat a stroke patient immediately. There is a stroke coordinator and team of staff nurses prepared to provide additional education for groups throughout the community. They use the F.A.S.T. educational program to train individuals; the sooner an individual receives treatment, the better the outcomes. We are currently certified as a Silver Award from the American Stroke Association. Columbus Regional Healthcare System has received the American Heart Association's Silver Plus Get With The Guidelines®-Stroke quality achievement award for its commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines, ultimately leading to more lives saved and reduced disability.
- c. Expanded relationship with Cape Fear Heart Associates, a cardiology physician group from New Hanover County, to provide efficient, convenient cardiac care to residents of Columbus County. A cardiologist has been hired to serve patients five days a week in the Whiteville Office to offer more comprehensive and continuity of care. A helicopter is located full-time at CRHS to transport critical care patients to New Hanover Regional Healthcare for immediate intervention particularly as it relates to cardiac care and stroke.

- d. The Care Transitions program originally funded through the Duke Endowment and provides staff to collaborate with patients and their healthcare team upon discharge from CRHS to improve health outcomes and reduce readmissions. The Care Transitions Team will expand upon current work being done with patients following discharge from the hospital. This program has now transitioned to Care Management for continued navigation through the discharge process.
 - e. Columbus Regional is a partner with the Columbus County Farmers Market and provides a satellite location for an on-campus Farmers Market each Thursday through the growing season. This arrangement provides access to fresh fruits and vegetables for the community and for our hospital staff in a convenient location. Farmer's market vouchers are available in the hospital gift shop to make shopping at the market easier for visitors and staff.
3. Cancer- To address Cancer, Columbus Regional will focus on the following:
- 1) Increasing education to the community
 - 2) Implement cancer screening programs into current community benefit related activities

Initiatives include:

- A) Donayre Care Cancer Center (DCCC), partnering with Levine Cancer Institute in Charlotte provide services with the hospital.
- B) DCCC now offers free screenings on-site and throughout the county for prostate, colon and anal cancers, free mammograms and two staff have now received national certification as specialize nurses who can provide breast exams out in the community. Code 911 is a project where staff is working with local emergency responders to educate them on the dangers of developing certain types of cancer due to exposure to hazardous materials. Outreach activities are now regularly scheduled at local Fire and Rescue Departments for possible Lung cancer. We now sponsor a Cancer Survivor Breakfast, Mammogram parties which provide a day at the spa for uninsured women to receive breast cancer screening. Tailgate Parties for Prostate Screening and a chance to win Panthers football tickets. Partnerships with local firefighters offer free lung screenings. In addition we offer free colon cancer screenings and checks for skin cancer and 388 mammograms were performed in 2021.
- C) The Donayre Cancer Care Center (DCCC) facilitates the Columbus Cancer Champions Support group for all cancer patients. Attendees meet monthly and hear from various speakers including, Providers, Dieticians,

Physical Therapy and others. The Caring for the Caregiver is another Support Group that is sponsored by DCCC and is led by the Columbus Regional Healthcare System Chaplain.

- D) Because of the partnership with Levine Cancer Institute, Donayre Cancer Care Center has access to Clinical Trials. These research studies are designed to answer questions about new ways to diagnose, treat and prevent cancer. Clinical trial participants can receive new treatment in this area. Patient will also receive the benefit of having a nutrition educator on site in addition to a social worker. Financial assistance will continue to be provided for drug needs and transportation cost to and from DCCC. Plans for the still include pursuing accreditation through the Commission on Cancer.

4. Diabetes- Columbus Regional Healthcare System will address Diabetes by:

- 1) Increasing education
- 2) Participate and offer community events to provide free screenings for patients at risk for this chronic disease while offering resources for management and treatment options and concentration on pre-teen and teen diabetes prevalence.
 - A) For hospitalized patients at Columbus Regional Healthcare, a diabetes educator with advanced diabetes management certification, is available to help educate and manage their diabetes during their hospital stay.
 - B) Columbus Regional Healthcare System increases community awareness through education of diabetes signs and symptoms, treatment options and preventative measures at monthly support group meetings. Provides space and financial support including group leader and program speakers.
 - C) The Diabetes Education Program at CRHS is recognized by the American Diabetes Association as meeting the National Standards for Diabetes Management Education. The program provides group classes and individual diabetes education sessions and self-management through dietician nutritional counseling. Education is provided by a multidisciplinary staff including a certified diabetes educator nurse, certified diabetes educator dietitian, podiatrists, exercise physiologists and pharmacists. Participants are offered both day and night options for classes.
 - D) Columbus Regional Healthcare System annually sponsors a Diabetes Awareness Day which features various screenings and education

opportunities for the community. Participants are offered examinations by a local podiatrist who screens for diabetic neuropathy. Since 2020 the YMCA of Southeastern North Carolina has been working with Columbus County to offer diabetes education classes and related services to identified individuals who are pre-disposed to developing Type I or Type II diabetes. This program will be offered at no cost to approved participants.

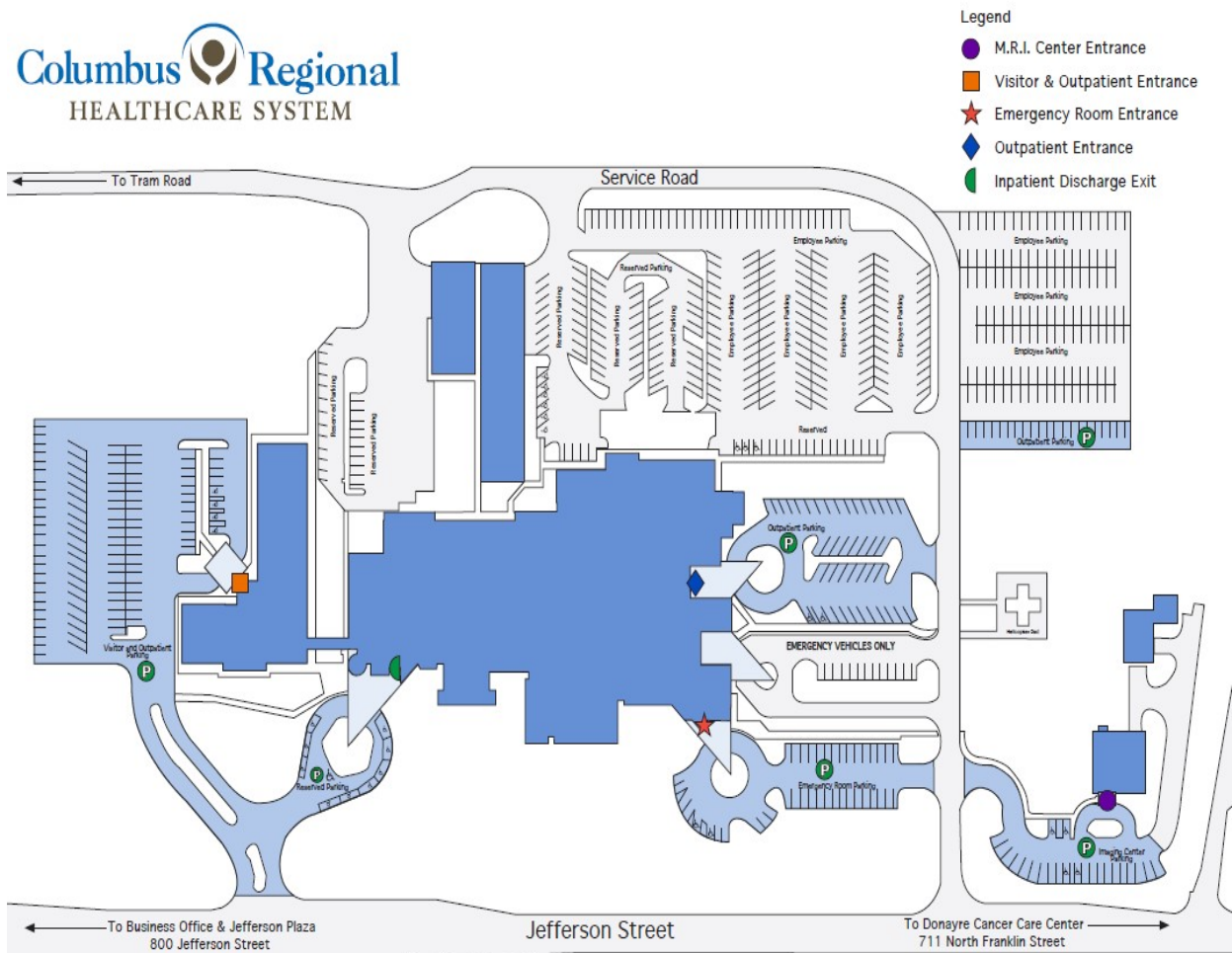
- E) Columbus Regional partners with the YMCA of Southeastern North Carolina to implement diabetes classes in Columbus County which began in January of 2020. These classes will be offered for cycles during the year and will offer weight management support, exercise, and dietary and medication options. The target group will be identified by testing throughout the county to review A1C levels and concentrate on those that are diagnosed as pre-diabetic but in danger of developing Type I or Type II diabetes.
- 5. Columbus Regional Healthcare will continue to work as a partner with the Columbus County newly formed Wellness Initiative and the YMCA of Southeastern North Carolina to offer programs such as GOTR and STRIDE for students in our elementary and middle grades and expanded to Bladen and Robeson Counties once school has returned to in-person classes\in addition to supporting our EMS personnel as they work towards their deep-water rescue certification Our Parkinson's support group has been temporarily suspended due to COVID. The hospital was represented on the county needs assessment for parks and recreation that was completed in summer of 2022. A copy of the survey, committee members and results are included in the Appendix. This collaboration is a huge step forward in working with several agencies to provide safe sites for children and adults to gather and participate in recreational activities. CRHS also sponsors Girl Trek activities in the county, Girl Trek is a nationally recognized health and wellness for minority women.
 - 6. Illegal use of prescription drugs remains a high priority in our county. CRHS has continues to offer a Med Safe program where specialized containers are placed in the main lobby for community residents to dispose of unused medication safely and help protect the environment. Overuse and illegal use of prescription drugs has been addressed by our ER and CME on prescribing pain medication to patients has been offered twice this year to area physicians. Policies are in place for individuals coming into the emergency room for treatment and for patients discharging from the hospital related to number of pills, refills and referrals to primary care providers. Columbus Regional recently partnered with Columbus County Government to submit a grant application to the Kate B. Reynolds Foundation for funding to conduct a substance abuse misuse needs assessment for our county. The Coalition formed as a result of

the needs assessment will recommend a Strategic Plan to include projects for consideration under the Big Pharma settlement that will be dispersed beginning this fall. The results of the needs assessment are included in with an executive summary and map in the Appendix. Grant funding will address deaths due to homicides and accidents.

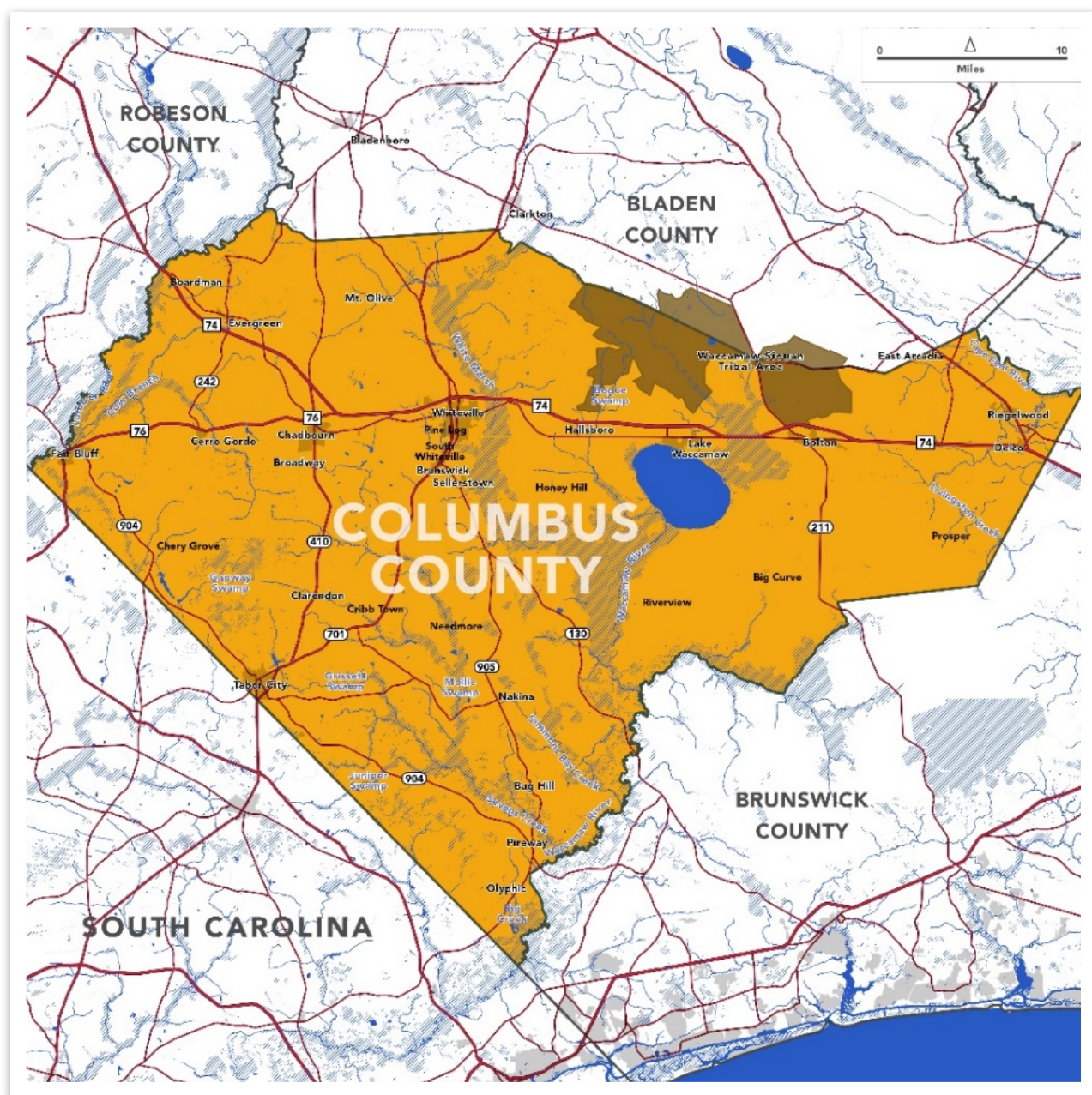
7. General Health Initiatives will continue to be a significant factor in our community outreach efforts. We will continue to sponsor general health fairs throughout the county and partner with other public agencies and physicians to offered health screenings. Our CRHS Chaplain will continue outreach with local churches and arrange for presentations related to health issues identified by these partners. CRHS will continue to operate a Hurricane Command Center within the hospital during periods of tropical disturbances. CRHS will continue to build on the relationship with the Columbus County Health Department and work together to address health concerns identified in our 2019 Community Health Needs Assessment. CRHS continues to fund an Employee Emergency Care Fund through the CRHS Foundation and employee contributions to assist those employees who have suffered loss due to natural disaster. Funds dispersed and collected are documented in our Form 990 each year. Recently CRHS was recognized as the only hospital in our region to receive a designation as a Center of Robotic Excellence. Sample flyers of community activities either sponsored or supported by CRHS are included in the Appendix. Examples include prostrate and mammogram screenings, skin cancer evaluations, Fall Good Health Festival, Back to School Family Health Day, River Strut in Fair Bluff to emphasize health and awareness and the Columbus County Fair. During the COVID Pandemic, CRHS was a site for both testing and vaccinations for the public. A complete listing of community activities and engagement can be found in the Appendix. Columbus Regional Hospital was a leader in offering both Corvid Testing and Vaccination Clinics for employees and the County at no cost to participants. As of September 7, 2022, there have been 17,741 cases of Covid and 278 deaths.
8. CRHS now has two full time urologist and 4 full time Advanced Practice Practitioners to address the issue of lack of medical providers to treat kidney and nephrology related health problems.
9. In 2022, CRHS received designation as a Center for Robotic Excellence; only one in the region. Benefits of robotic surgery for patients includes: decreased complications, decreased costs, improved efficacy and patient safety. Additional benefits include increased patient awareness, improved patient satisfaction and improved team cooperation. Specialties utilizing robotic surgeries include obstetrics and gynecology, urology, limited thoracic surgeries and gastrointestinal procedures.
10. Strategies to address community concerns related to alcohol and drug issues are the focus of the Substance Abuse/Misuse Coalition which is now fully active with funding through the Columbus County Regional Health Care System, the County of

Columbus and a grant from the Kate B. Reynolds Foundation and was included earlier in this report.

APPENDIX



Columbus Regional
is a Tobacco - Free Campus



Columbus County 2022 Wellness Initiative

Lauren George Cole, Special Projects, Columbus Regional Healthcare System
Dr. Jugta Kahai, Southeast Pediatrics, Columbus Regional Healthcare System
Shawn Maynor, Mayor, Town of Bolton
Julie Strickland, Director, Columbus County Parks and Recreation
Selena Rowell, Columbus County Partnership for Children
Dr. Rachel Dunbar, Chief of Staff, CRHS
Julie Strickland, Columbus County Parks and Recreation
Edward Madden, Columbus County Manager
Dr. Mark Whichard, Whiteville City School
Jonathan Williams, Columbus County Schools
Dr. Rachel Smith, Edgewood Elementary School
Marjorie Hilburn, Columbus County Farmers Market
Amber Bellamy, Director of Columbus County Dream Center
Dr. Peters Chambers, Physician, CRHS, and Director of Public Safety
Selena Rowell, Columbus County Smart Start
Dick Jones, CEO, YMCA of Southeastern North Carolina
Brenda Jolly, President CRHS Foundation
Joseph Washburn, Faith Community
Dr. Gary Lanier, Columbus County Economic Development
Jeremy Simmons, CRHS Chaplain and Representative of Minority Faith Based Organizations
Rebecca Tyson, Columbus County Public Housing
Dr. Chris English, President, Southeastern Community College
Waccamaw Siouan Tribe, Pamela Young Jacobs
Rhonda Dutton, Columbus County Youth and Families
Mariel Biebel, Whiteville City Schools, Migrant Coordinator
Stephanie Miller, Physician Outreach Coordinator, CRHS
Kim Smith, Director, Columbus County Health Department.

Hetal Petal, Consultant, MDC Rural Forward Ex-Officio

COLUMBUS COUNTY SUBSTANCE ABUSE COALITION

Whiteville City Schools Superintendent

1. Marc Whichard, mwhichard@whiteville.k12.nc.us.

Columbus County School Superintendent and Family Resources Director

2. Deanne Meadows deanneMeadows@columbus.k12.nc.us *(Dr. Meadows wants to be cc'd on all emails)*

2. Designee: Heather Piggott, ghwing@columbus.k12.nc.us

Columbus County Health Department

3. Kim Smith, kim.L.smith@columbusco.org

Columbus County Courts

4. Sandra Norris, sandra.L.norris@nccourts.org

Assistant District Attorney

5. Courtney Worley, courtney.n.sanford@ncrourts.org

Trillium Health Services

6. Dennis Williams, dennis.williams@trilliumnc.org

Director, CRHS Emergency Department

7. Rose McPherson, rmcpherson@crhealthcare.org

Pediatrician

8. Dr. Jugta Kahai, jkahai@crhealthcare.org

Columbus County Law Enforcement

9. Sheriff Jody Greene, jgreene@columbussheriff.com.

Minority Community. Pastor and Southeastern Community College Board of Trustees

10. Rev. Timothy Lance, moderatorlance@aol.com

Columbus County Department of Social Services, Foster Care Coordinator

11. Patches McQueen, pmcqueen@columbusco.org

Columbus County Government, Manager

12. Eddie Madden, emadden@columbusco.org

Liaison, Waccamaw Siouan Tribe

13. Pamela Young Jacobs, nativesongpj@yahoo.com

Recovering Addict

14. Willis Harper, willis.harper07@gmail.com

15. Superior Court Judge Sasser, Douglas.Sasser@nccourts.org

15. Denise Maultsby, denise.e.maultsby@nccourts.org *(Denise will fill in for the judge when he cannot be there. cc her on all emails)*

Columbus County Manager

16. Jerome McMillian, trooperb549@gmail.com

Columbus Baptist Association

17. Dave Heller, dave@columbusbaptistnc.com.

Minority Community, Pastor

18. Tracey Troy, traceytroy625@gmail.com

Minority Community Pastor

19. Daisy Brooks, factsoflifechurch2020@gmail.com

Columbus County Recreation Master Plan Committee

Julie M. Strickland, County Parks & Recreation Director- Committee Facilitator

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Shane Hardee, Columbus County Dixie Softball Association-President

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Kiley Hinson, Columbus County Dixie Youth Baseball

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Lloyd Lennon, Columbus County Parks and Recreation Advisory Board-Chairman

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Dr. Beverly Justice, UNC Pembroke Faculty member and collegiate volleyball coach

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Lacie P. Jacobs, SCC-Vice President of Administrative Services/Chief Operating Officer

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Matthew E. Wilson, Lake Waccamaw Commissioner-East Ward and softball coach
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2022 COMMUNITY HEALTH ASSESSMENT SURVEY

[CRHS 2022 Needs Assessment Survey Questions.pdf](#)

[2022 Community Health Needs Assessment Survey Results](#)

[2022 CRHS Community Health Needs Assessment Spanish](#)

[2022 Substance Abuse/Misuse Survey](#)

[2022 Parks and Recreation Survey](#)

[Question 43 on CHNA](#)

[Community Events and Screening Activities](#)

[Opioid / Substance Abuse Strategic Plan](#)

DIRECTORY OF RESOURCES FOR COLUMBUS COUNTY

Copies of Columbus County Resource Guides can be found by clicking on the links below.

https://www.ncworks.gov/admin/gsipub/htmlarea/uploads/CRAG/Columbus_County.pdf

<http://www2.columbusco.org/health/healthier/resourceguide.pdf>