

A Regional Model of Community Health Improvement in Western North Carolina: WNC Healthy Impact

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During a time of transformation within systems of health and health care, the community health improvement process can provide a strong foundation for multiple strategies across health sectors. In Western North Carolina, we are taking a regional approach to supporting this process and are drawing attention to the value and potential for collective impact.

The Patient Protection and Affordable Care Act of 2010 requires 501(c)(3) nonprofit hospitals to conduct community health needs assessments (CHNAs) every 3 years and to adopt an implementation strategy describing how the hospital will meet the community needs that are identified [1]. Historically, many hospital facilities were already participating in their communities' CHNA process and were supporting programs that impacted health along the entire continuum from prevention to treatment, but this new requirement adds a mechanism of accountability.

Assessment is one of the core functions of public health [2], and local public health departments are required to carry out a community health assessment and to develop an action plan [3] or community health improvement plan [4] in order to maintain their accreditation. Given this responsibility, many local health departments have been leading and supporting community health assessments for years. Knowing that health departments have this experience, and having received increasing encouragement for cross-sector collaboration on health improvement [5, 6], hospitals across the country are now seeking a greater level of partnership with local health departments.

In Western North Carolina, health leaders from hospitals and health departments have chosen a path to health improvement that is both collaborative and regional. Late in 2011, the board of directors of WNC Health Network—an alliance of hospitals in 16 counties in Western North Carolina—joined forces with health directors belonging to the Western North Carolina Partnership for Public Health. Together these groups created a steering committee to clarify a process for health improvement and to guide the

implementation of this vision.

WNC Healthy Impact (www.WNCHealthyImpact.com) is a partnership among hospitals, health departments, and key regional partners in 16 counties in Western North Carolina that aims to improve community health. As these entities take part in the community health improvement process, they are working together locally and regionally to assess health needs, develop collaborative plans, take coordinated action, and evaluate progress and impact. Specifically, WNC Healthy Impact aims to enhance partnerships between hospitals and health departments; to improve the efficiency, quality, and standardization of community health assessment, data collection, and reporting; to encourage the strategic investment of community resources to address priority health issues; to improve health by catalyzing and coordinating action among existing and new assets and initiatives that address priority health needs; to monitor results in order to improve process, quality, and outcomes; and to promote accountability on the part of hospitals and health departments by meeting community health improvement requirements at the state and national levels [7].

Community health improvement in Western North Carolina is still a locally led and implemented process, and it is now taking place through a 3-year cycle that is aligned across the region. Collaborative investment of time and resources in WNC Healthy Impact supports and enhances community efforts at the local level by standardizing and implementing core data collection, creating templates and tools for reporting and communication, encouraging collaboration, providing training and technical assistance, identifying regional priorities, and sharing best practices across county lines.

WNC Healthy Impact is driven by a collaborative steering committee that provides operational support for the initiative and is informed by 5 different task-related work groups; these groups deal with data, communication, implementation, requirements, and evaluation. Work group

members include staff of hospitals, health departments, and partner agencies across the region. The specifics of the work are guided by evidence-based approaches to implementing and communicating change and understanding its impact.

When looking across the region at priorities identified through the health assessment process, the themes that emerge relate to chronic disease, access to care, mental health, and substance abuse. Across the region, hospitals and health departments are working with community agencies and other parties to address these complex issues using a number of evidence-based approaches and strategies. For example, many communities are working together to implement Project Lazarus, an overdose prevention and opioid safety program [8], in response to concerns about abuse of prescription drugs. Other communities are working to create environments that facilitate healthy choices regarding physical activity, nutrition, and tobacco use. Rural communities in particular are partnering in innovative ways to bring medical, dental, and optometric care to those with limited access [9]. To read more about specific community efforts and plans, visit the WNC Healthy Impact Web site [10].

The call to take action and make changes is loud and clear. In Western North Carolina, we are listening and are committed to doing things better, together. **NCMJ**

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