



2021

Community Health Needs Assessment
and
Health Improvement Action Plan



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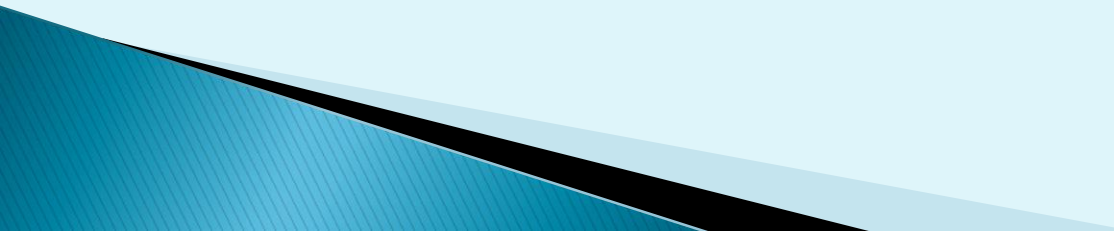
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I. Executive Summary

- a. History and Overview
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 - c. Identified Health Priorities
- 

History and Overview

Original hospital was built in the 1950s located near downtown Fort Payne. Purchased by Baptist Health System in 1983
The only hospital in DeKalb County.

- **Our current 134 bed facility was built in 1986.**
- **In April 2006, Baptist sold the hospital to Community Health Systems. The name changed to DeKalb Regional Medical Center.**
- **April 2016, Community Health Systems spun off Quorum Healthcare and DeKalb Regional was one of the hospitals that moved to Quorum Healthcare.**
- **One of largest employers in DeKalb County \$60 million net revenue and over 500 employees.**
- **Hosiery was the dominant local industry for over 50 years but >4,000 jobs were lost beginning in 2003.**
- **Local unemployment rate rose to double digit with loss of textile industry jobs to foreign markets – now slowly improving.**



Mission and Purpose

Mission:

Improve the cardiac health of the community and the ACS patient through evidence based practice, monitoring key quality outcome indicators, education of early warning signs and symptoms of heart attack to the healthcare providers and the community population, as a whole, and efficient utilization of resources.

Purpose:

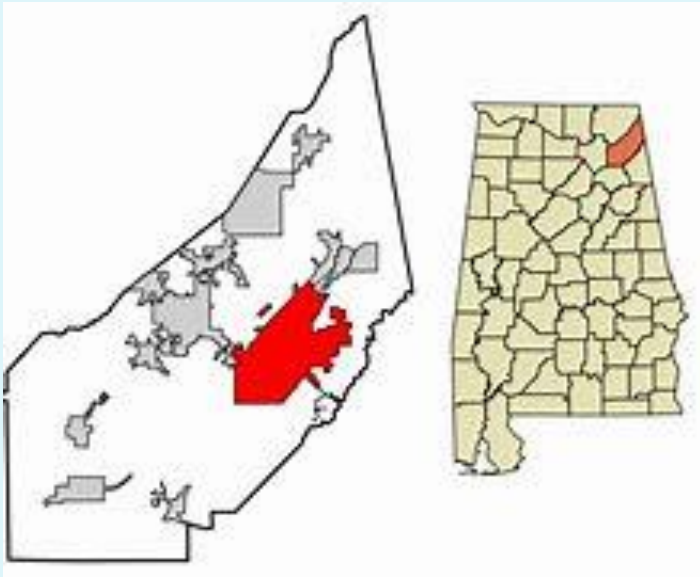
DeKalb Regional Medical Center is committed to providing the highest standard of care for the Acute Coronary Syndrome (ACS) patient. DRMC is dedicated to improving its processes and addressing quality of care issues as they relate to the care of the ACS patients from initial point of contact in the community or the hospital. The Chest Pain Committee is a dedicated multidisciplinary team of health care professionals who will work collaboratively to strengthen the relationship between EMS, the community and the Medical Center and address the diagnosis, protocols and processes in the care of the ACS patient throughout the continuum of care. The community health assessment will be a foundation on which the chest pain committee can use to determine the health risk in our community along with the availability of resources and the community education needs that can attribute to obtaining a goal for increased awareness and prevention of cardiovascular disease. It is requirement by the American College of Cardiology Accreditation Services for this to be performed every 3 years.

DeKalb County Community Health Assessment

- A Community Health Assessment was conducted to assess the current health status, key health care needs along with barriers , issues and resources that are available within the community , in effort to improve the overall health and wellness of DeKalb County.
- The assessment was conducted, by collecting data from local and state websites, obtaining information from our internal data base, interviews with key community members, and observation of local resources.
- An analysis of the data was used to identify a list of healthcare priorities within the community.
- Based on the results of the Cardiovascular Disease Assessment a Health Improvement Plan was developed on how to education the at risk population on cardiovascular disease.

Priority Health Care Concerns

In 2015, the State of Alabama conducted a statewide Community Health Assessment (CHA) and determined the top 13 leading health concerns in the state. DeKalb County is comparable to the rest of the state, however in 2020 we added COVID-19 as our #1 health concern. Our assessment was conducted by compiling internal statistics, published data, observations of the community and interviews with a variety of people within the community such as, healthcare workers, community leaders, stakeholders and members of the general public. After reviewing the information obtained, we modeled our community CHA around the version the state had previously conducted. Below are the top 6 health concerns for DeKalb County, Alabama.



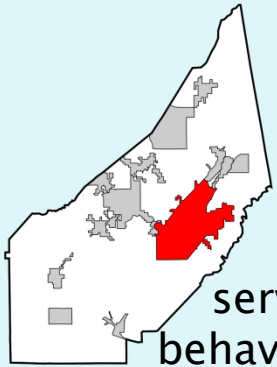
- 1. COVID-19**
- 2. Access to Primary/Specialty Care**
- 3. Mental Health/Substance Abuse**
- 4. Poor Pregnancy Outcomes**
- 5. Nutrition and Physical Activity (Obesity)**
- 6. Cardiovascular Disease**

HEALTHCARE CONCERN	Supportive Data/Associated Factors
1. COVID 19	<ul style="list-style-type: none"> • 8,675 cases as of 3/20/21 • 179 deaths • Current Risk level: MEDIUM • Vulnerability Rate: VERY HIGH
2. Access to Care (Primary/Speciality)	<ul style="list-style-type: none"> • Lack of insurance • Lack of availability of service • High cost • Lack of transportation
3. Mental Health/Substance Abuse	<ul style="list-style-type: none"> • Lack of Mental Health Care resources • Large percentage of incarcerations r/t substance abuse and mental health disorders • Increasing OD rates over last 3 years
4. Poor Pregnancy Outcomes	<ul style="list-style-type: none"> • Lack of Insurance • Cultural disparities • Lack of prenatal care • Substance Abuse
5. Nutrition & Physical Activity	<ul style="list-style-type: none"> • Rural area • Culture (Southern fried foods) • Economics (lower income) • High cost of healthy food choices • Lack of time(work)
6. Cardiovascular Disease	<ul style="list-style-type: none"> • Poor Nutrition • Lack of exercise/physical activity • Obesity • Lack of preventive care

II. Community Served

- a. Location
- b. Population
- c. Race & Ethnicity
- d. Service Area Map

II. Community Served: DeKalb County, AL

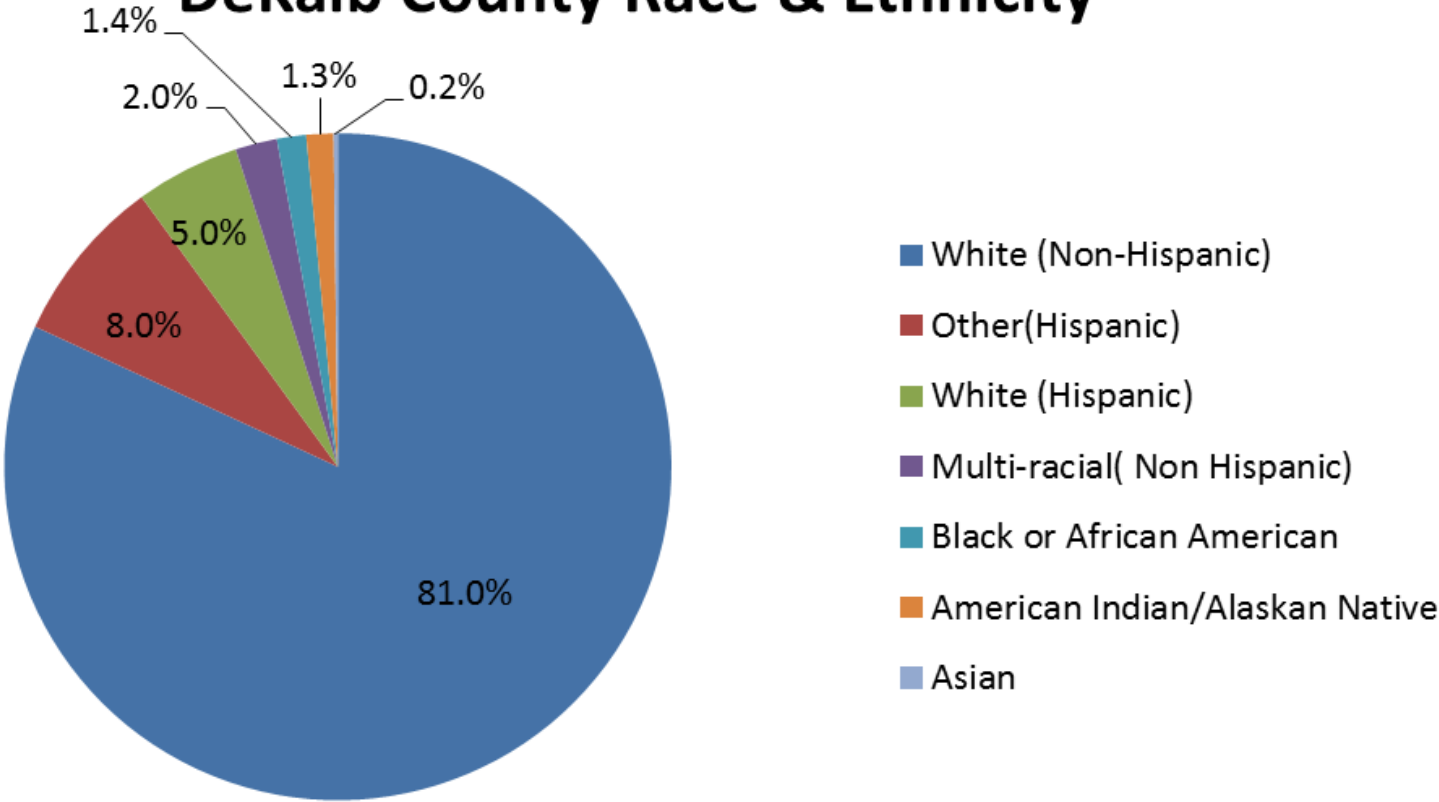


DeKalb County is located in Northeast Alabama and lies between Lookout and Sand Mountain. It has a surface area of 784 square miles and a population estimated at 72,000. DeKalb Regional Medical Center is the only hospital in the county. It is a full-service, 134-bed facility offering inpatient and outpatient care, emergency services, primary stroke center, chest pain center, labor & delivery, imaging, behavioral health, home health, rehabilitation and a sleep center. We believe in the power of people to create great care. We are a place where technology and skilled professionals come together to provide compassionate, patient-focused care. And we work hard every day to be a place of healing, caring and connection for patients and families in the community we call home.



Race & Ethnicity

DeKalb County Race & Ethnicity



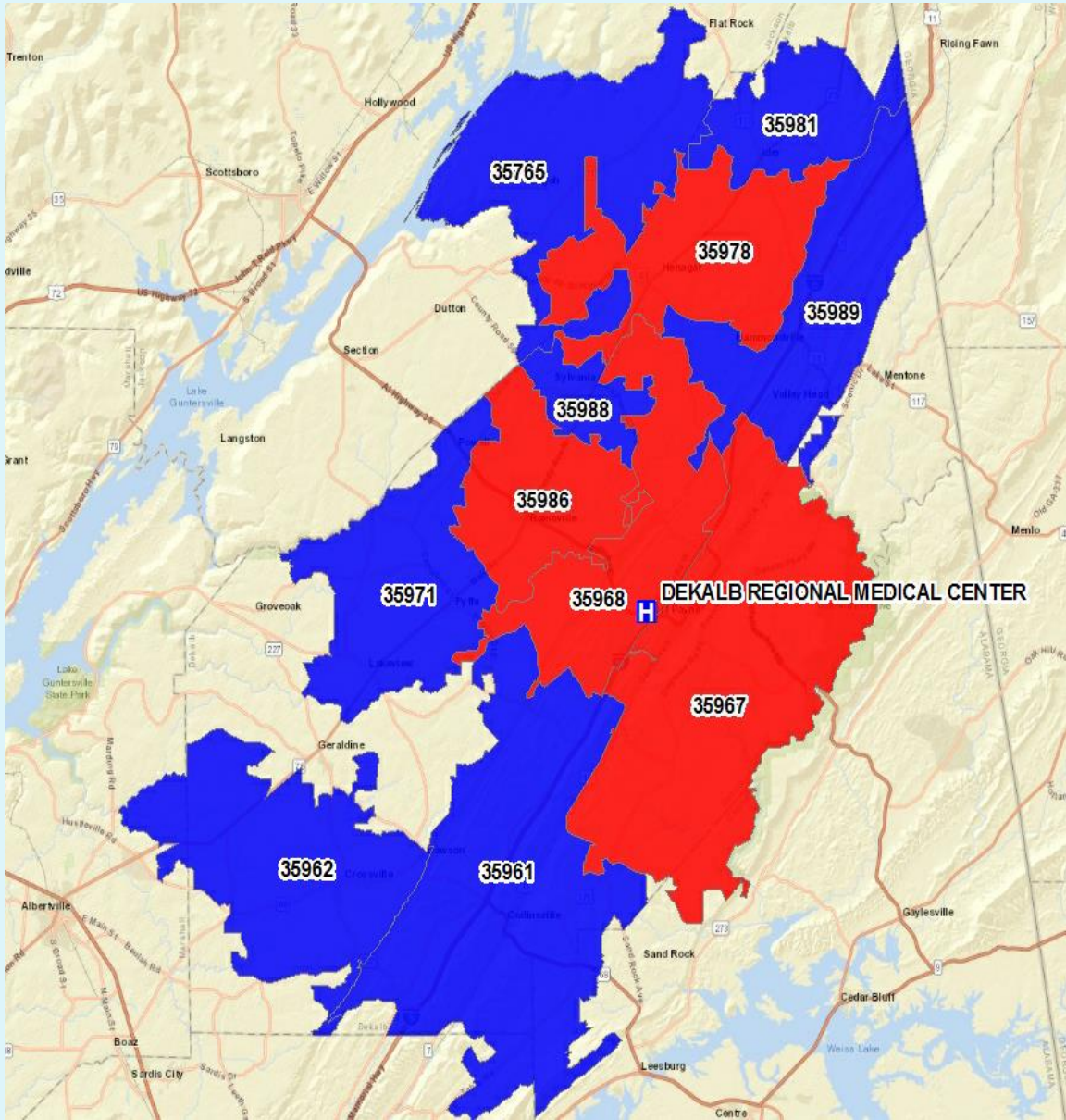
Service Area Map

ServiceArea
by ZIP Code

- Primary (4)
- Secondary (7)

Scale
6.16 mi/inch

Custom Landmark
H Selected Facility



III. General Community Information

- a. 2018 APDH Health Profile
- b. Economy Overview

ADPH 2018 DeKalb County Health Profile

DEKALB 2018 HEALTH PROFILE



SUMMARY	
Total Population	71,385
Births	823
Deaths	845
Median Age	39.9
Life Expectancy at Birth	74.9
Total Fertility Rate per 1,000 Females Aged 10-49	1,979.0
Marriages Issued	511
Divorces Granted	17

PREGNANCY/NATALITY				
	Females Aged 15-44		Females Aged 10-19	
	Number	Rate	Number	Rate
Estimated Pregnancies	1,037	81.0	109	22.6
Births	823	11.5	87	18.0
Induced Terminations of Pregnancy	45	3.5	4	0.8
Estimated Total Fetal Losses	169	---	18	---

Birth rates are per 1,000 population.

Estimated pregnancy and induced termination of pregnancy rates are per 1,000 females in specified age group.

BIRTHS BY AGE GROUP OF MOTHER					
	Total	10-14	15-17	18-19	20+
All Births	823	2	18	67	736
Rate	11.5	0.8	13.1	73.4	57.0
White	789	2	18	62	707
Rate	11.9	0.9	14.4	74.4	59.4
Black and Other	34	0	0	5	29
Rate	6.5	0.0	0.0	62.5	28.8

Rates are per 1,000 females in specified age group.

Births with unknown age of mother are included in the age group "20+".

LIVE BIRTHS				
	Females Aged 15-44		Females Aged 10-19	
	Number	Percent	Number	Percent
Births to Unmarried Women	319	38.8	69	79.3
Low Weight Births	71	8.6	17	19.5
Multiple Births	23	2.8	6	6.9
Medicaid Births	497	60.5	72	82.8

Percentages are of all births with known status for females in specified age group.

ADPH 2018 DeKalb County Health Profile

INFANT RELATED MORTALITY BY RACE* AND AGE GROUP OF MOTHER						
	All Ages			Ages 10-19		
	All Races	White	Black and Other	All Races	White	Black and Other
Infant Deaths	7	7	0	1	1	0
Rate per 1,000 Births	8.5	8.9	0.0	11.5	12.2	0.0
Postneonatal Deaths	4	4	0	1	1	0
Rate per 1,000 Births	4.9	5.1	0.0	11.5	12.2	0.0
Neonatal Deaths	3	3	0	0	0	0
Rate per 1,000 Births	3.6	3.8	0.0	0.0	0.0	0.0

*Infant deaths are by race of child; births are by race of mother.

2018 ESTIMATED POPULATIONS BY AGE GROUP, RACE AND SEX									
Age Group	All Races			White			Black and Other		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Total	71,385	35,428	35,957	66,184	32,745	33,439	5,201	2,683	2,518
0-4	4,237	2,210	2,027	3,810	1,973	1,837	427	237	190
5-9	4,692	2,377	2,315	4,327	2,190	2,137	365	187	178
10-14	5,213	2,674	2,539	4,737	2,442	2,295	476	232	244
15-44	26,120	13,316	12,804	23,908	12,140	11,768	2,212	1,176	1,036
45-64	18,801	9,322	9,479	17,587	8,706	8,881	1,214	616	598
65-84	11,115	5,131	5,984	10,661	4,916	5,745	454	215	239
85+	1,207	398	809	1,154	378	776	53	20	33

ADPH 2018 DeKalb County Health Profile

DEKALB 2018 HEALTH PROFILE (Continued)

MORTALITY	All Races			White			Black and Other		
	Total	Male	Female	Total	Male	Female	Total	Male	Female
Deaths	845	424	421	831	417	414	14	7	7
Rate per 1,000 Population	11.8	12.0	11.7	12.5	12.7	12.4	2.7	2.6	2.8

SELECTED CAUSES OF DEATH	Total		Male		Female		White		Black and Other	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Heart Disease	218	305.4	111	313.3	107	297.6	214	322.0	4	76.9
Cancer	160	224.1	85	239.9	75	208.6	159	239.3	1	19.2
Stroke	43	60.2	20	56.5	23	64.0	42	63.2	1	19.2
Accidents	44	61.6	25	70.6	19	52.8	43	64.7	1	19.2
CLRD*	75	105.1	38	107.3	37	102.9	75	112.9	0	0.0
Diabetes	36	50.4	18	50.8	18	50.1	36	54.2	0	0.0
Influenza and Pneumonia	20	28.0	10	28.2	10	27.8	19	28.6	1	19.2
Alzheimer's Disease	49	68.6	18	50.8	31	86.2	49	73.7	0	0.0
Suicide	13	18.2	8	22.6	5	13.9	13	19.6	0	0.0
Homicide	2	2.8	2	5.6	0	0.0	2	3.0	0	0.0
HIV Disease	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Rates are per 100,000 population in specified categories.

*CLRD is known as Chronic Lower Respiratory Disease.

ACCIDENTAL DEATHS	All Ages		Ages 19 and Under	
	Number	Rate	Number	Rate
All Accidents	44	61.6	2	10.6
Motor Vehicle	18	25.2	1	5.3
Suffocation	0	0.0	0	0.0
Poisoning	16	22.4	1	5.3
Smoke, Fire and Flames	4	5.6	0	0.0
Falls	2	2.8	0	0.0
Drowning	0	0.0	0	0.0
Firearms	0	0.0	0	0.0
Other Accidents	4	---	0	---

Rates are per 100,000 population in specified categories.

DEATHS BY AGE GROUP		
Age Group	Number	Rate
Total	845	11.8
0 - 14	10	0.7
15 - 44	51	2.0
45 - 64	163	8.7
65 - 84	423	38.1
85 +	198	164.0

Rates are per 1,000 population in specified age group.

ADPH 2018 DeKalb County Health Profile

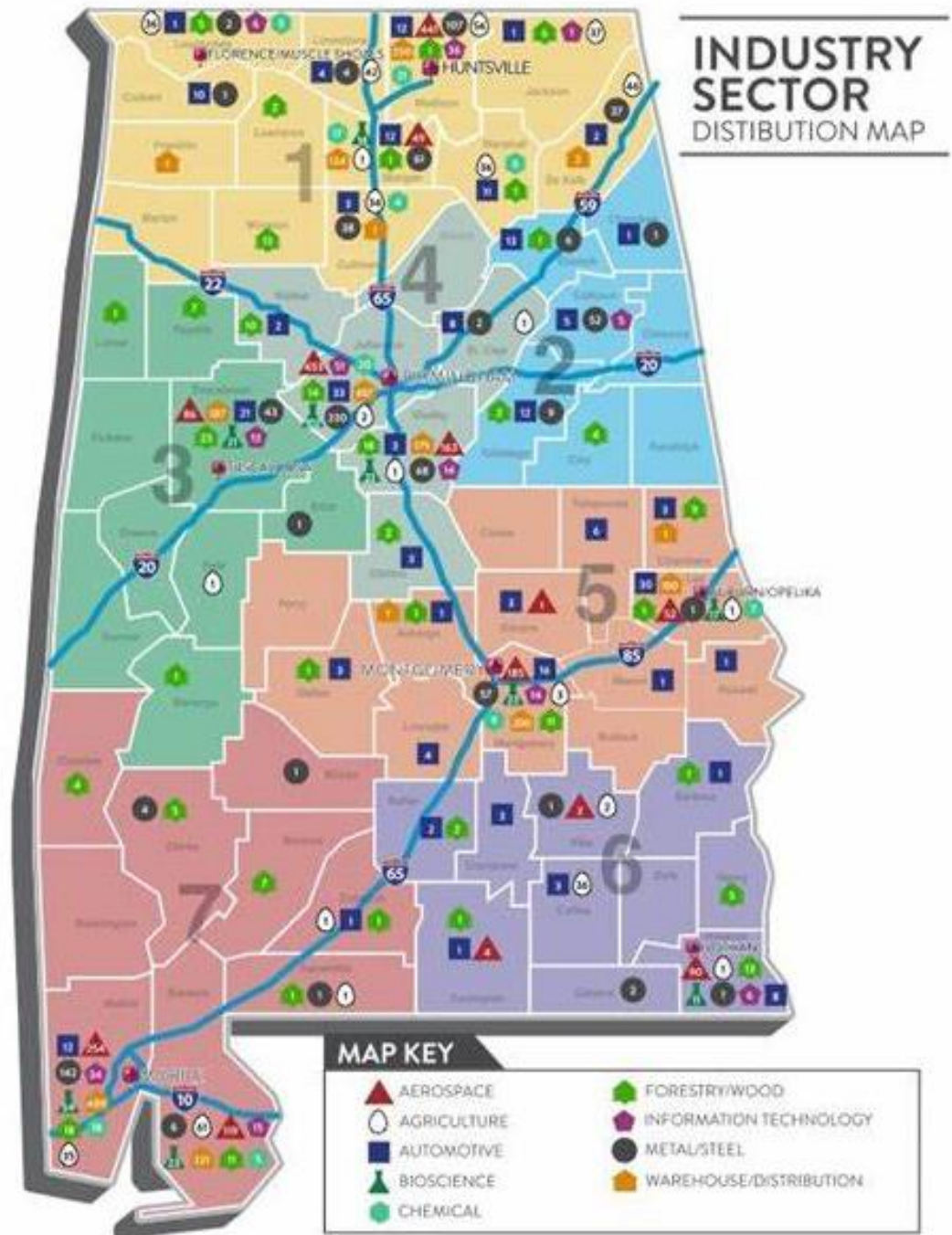
SELECTED CANCER SITE DEATHS	Total		Male		Female	
	Number	Rate	Number	Rate	Number	Rate
All Cancers	160	224.1	85	239.9	75	208.6
Trachea, Bronchus, Lung, Pleura	47	65.8	30	84.7	17	47.3
Colorectal	18	25.2	10	28.2	8	22.2
Breast (female)	16	22.4	...	...	16	44.5
Prostate (male)	9	12.6	9	25.4	...	...
Pancreas	11	15.4	6	16.9	5	13.9
Leukemias	6	8.4	4	11.3	2	5.6
Non-Hodgkin's Lymphomas	5	7.0	2	5.6	3	8.3
Ovary (female)	5	7.0	...	...	5	13.9
Brain and Other Nervous System	5	7.0	3	8.5	2	5.6
Stomach	0	0.0	0	0.0	0	0.0
Uterus and Cervix (female)	1	1.4	...	...	1	2.8
Esophagus	4	5.6	3	8.5	1	2.8
Melanoma of Skin	2	2.8	1	2.8	1	2.8
Other	31	---	17	---	14	---

Rates are per 100,000 population in specified categories.

Measurements based on small denominators should be used with caution. Rates and ratios based on a denominator of less than 50 births or 1,000 population are shaded. Estimated pregnancies are the sum of births, induced terminations of pregnancy (abortions) and estimated total fetal losses. Estimated total fetal losses are equal to the sum of 20 percent of births and 10 percent of induced terminations of pregnancy. The total fertility rate is the sum of age-specific birth rates multiplied by the width of the intervals, i.e. five years. A total fertility rate of 2,100 births per 1,000 females aged 10-49 years would maintain the current population. Estimated populations are from the U.S. Census Bureau. See Appendix B for other definitions and formulas.

Economy

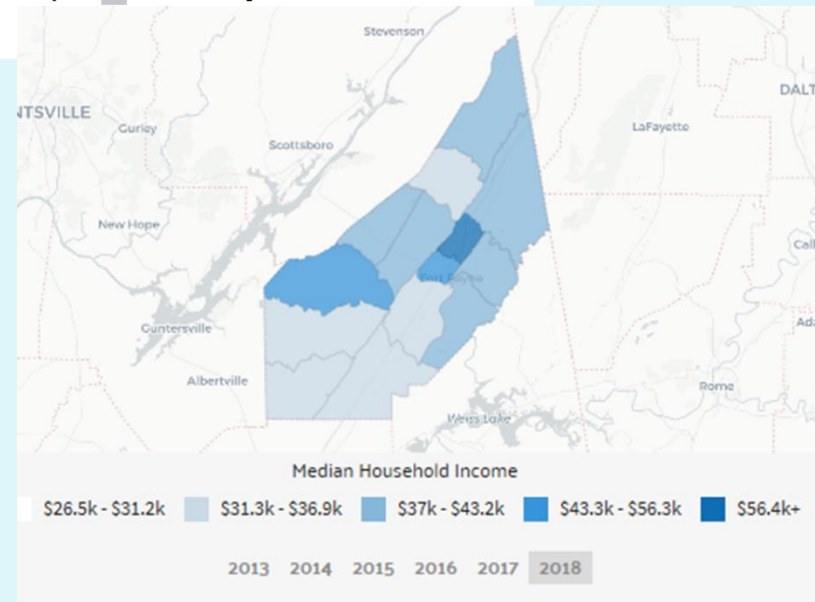
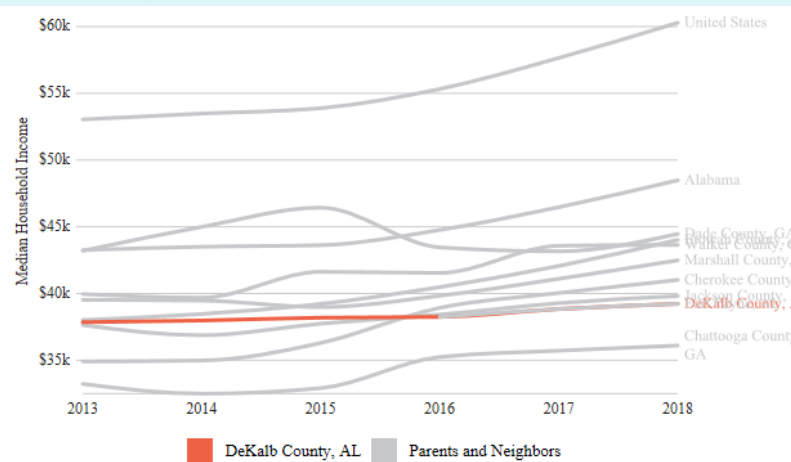
DeKalb County is located in Northeast Alabama, less than two and a half hours from over six major Southeastern markets. I-59 runs through the county, and DeKalb is also close to I-20, I-24, I-65, and I-75. The county's ideal location has made it a popular choice for distribution companies, automotive suppliers, and other manufacturers. Residents of DeKalb County benefit from the county's close proximity to large cities while enjoying a lower cost of living.



Economy

The median annual household income across DeKalb County is \$39,233, which is lower than the national average median annual income of \$61,937. There has been a 1.01% annual growth in the median income in comparison to \$38,842 in 2017.

Annual Household Income			
DeKalb County Median Income		National Average	
\$39,233		\$61,937	
Unemployment Rate			
November 2019		November 2020	
DeKalb County	Alabama Seasonally Adjusted	DeKalb County	Alabama Seasonally Adjusted
2.2%	2.7%	2.6%	4.4%



The displayed charts reveal how the median household income in DeKalb County, AL compares to that of its neighboring and parent geographies.

Economy

DeKalb County's has a large workforce population in the production industry. That is due to the wide array of industries within the county.

Occupation	Workforce by Occupation and Gender
★ Production Occupations	5176
Office & Administrative Support Occupations	2948
Sales & Related Occupations	2580
Management Occupations	2193
Material Moving Occupations	1771
Construction & Extraction Occupations	1746
Transportation Occupations	1467
Installation, Maintenance, & Repair Occupations	1443
Building & Grounds Cleaning & Maintenance Occupations	1236
Education Instruction, & Library Occupations	1194
Food Preparation & Serving Related Occupations	1168
Healthcare Support Occupations	907
Health Diagnosing & Treating Practitioners & Other Technical Occupations	797
Personal Care & Service Occupations	781
Health Technologists & Technicians	704
Business & Financial Operations Occupations	698
Farming, Fishing, & Forestry Occupations	333
Community & Social Service Occupations	241
Arts, Design, Entertainment, Sports, & Media Occupations	240
Architecture & Engineering Occupations	236
Fire Fighting & Prevention, & Other Protective Service Workers Including Supervisors	234
Law Enforcement Workers Including Supervisors	199
Computer & Mathematical Occupations	139
Life, Physical, & Social Science Occupations	111
Legal Occupations	95

Top 5 Employers in Market

Employer	Industry	2020: # Employees	Healthcare Reform Driven Changes/Health Plan Comments	Is Hospital In-Network?
The Children's Place	Distribution Center	1,548	BCBS-NJ	Yes
DeKalb County Schools System	Education	1,013	BCBS-AL	Yes
Koch Foods, Inc.	Poultry Processing	850	BCBS-AL	Yes
Heil Environmental	Garbage Truck Bodies	853	BCBS- IL	Yes
DeKalb County Schools System	Education	1,013	BCBS-AL	Yes

Employer Programs (e.g., Occ Med, Workers' Comp, Wellness Works)

Launched our Occupational Health program and partnered with The Children's Place (largest employer in market) to provide on-site Occ-Med and Worker's Comp services. We continue to offer acute injury care to local employers through our Ortho clinic, which includes Friday night coverage to support local athletes. We provide coverage at local employer health fairs (The Children's Place, Koch Foods, Siemens and RTI).

County Unemployment Data

2018	2019	2020 [July 2020]	2020 # Employed as of [July]	2020 # Unemployed as of [July]
3.8%	2.8%	5.5%	30,589	1,765

Highlights of Business Environment / Employment Forecast

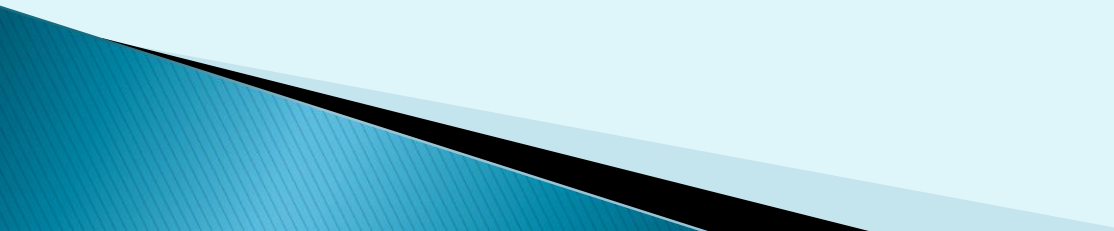
Short Term	Long Term
1. EDA reports Healthcare Support Occupations will experience rapid growth	1. Alabama offers a favorable environment for major industry location
2. Capital investment by The Children's Place and RTI (plant expansions)	2. Strong regional Economic Development Authority
3. Some resurgence in domestic hosiery production and open plant capacity	3. Development of Nuclear Power Plant in Hollywood

Economy

Industrial Health Clinics

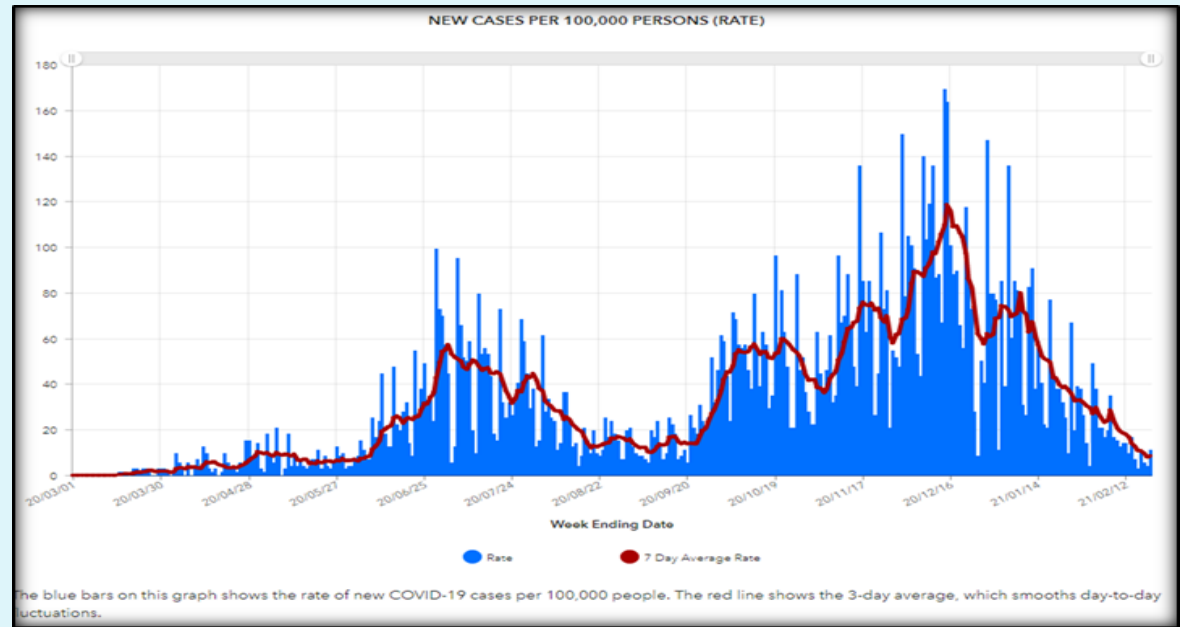
- Heil & The Children's Place both have an onsite health clinic to treat employee's health issues and concerns. This has proven to be beneficial to the company, by improving the health of the employee and decreasing lost work days related to injury and illness.
- DRMC recently hired a Director of Occupational Health to assist other industries in DeKalb County with improving the health and wellness of their employees, which allows for increased productivity and has a positive impact on the community

IV. Priorities Overview

1. COVID-19
 2. Access to Primary/Specialty Care
 3. Mental Health/Substance Abuse
 4. Poor Pregnancy Outcomes
 5. Nutrition and Physical Activity (Obesity)
 6. Cardiovascular Disease
- 



COVID-19




In February 2020 we started implementing process for COVID-19 per the CDC recommendations , and updated the process and procedures each time we received guidance. We restricted visitors and required mask for employees and visitors before the state mandate to protect our staff and our patients. As the COVID-19 pandemic grew, so did our awareness and we continuously was sending out education and resources for our staff, patients and community. In late 2020, our county was severely impacted by COVID-19 and we saw a spike in hospitalizations, but we diligently worked with our employees and our community to providing a safe environment for those seeking healthcare treatment. We received our first batch of vaccinations in late December and immediately begin vaccinating our front line workers. A vaccine clinic has been set up inside the facility to administer vaccines to our employees and other first responders in the community. Our community has suffered with the loss of well respected community leaders, family and friends during this pandemic. We are continuing to monitor daily the updates associated with the pandemic and will continue to be ready to provide safe and effective care for all patients, while adhering the CDC recommendations. We are currently providing educational resources for the community and staff for their family on vaccine clinics within the county for those who would like to be vaccinated. We continue to be a part of a multidisciplinary county taskforce with combined efforts to stop the spread of the COVID-19 pandemic in our community.


2


Access to Primary/Specialty Care

- Access to health care impacts prevention of disease and disability as well as detection and treatment of health conditions. Improving access to care increases quality of life, reduces preventable deaths, and increases the life expectancy of the population.
- Some common barriers to access to care include, but are not limited to: lack of insurance coverage, lack of availability of services in a geographical area, high costs for medical services, and lack of transportation. These barriers can lead to disparities in access to care which in turn leads to lowering the life expectancy and the quality of life of those affected. Although the Affordable Care Act should increase the proportion of Alabamians with health insurance, having health insurance alone does not ensure access to care.
- The 2015 CHA Data reflects that DeKalb County has the highest percentage of uninsured population (21.7 %), followed by Franklin County (20.1 %) and Escambia County (19.6 %). The Census Bureau estimated that the 2019 uninsured population rate for DeKalb County would be 18.8%. Franklin County and DeKalb County are ranked first and second with regards to percentage increase in Hispanic population among Alabama counties, respectively. This large increase in the Hispanic population, coupled with the fact that Hispanics have the highest percentage of uninsured population, may explain the high percentage of uninsured population for these two counties.
- During the COVID-19 pandemic, tele-health visits became available by most providers and some specialty providers to ensure they were still able to provide the care their patients needed without exposing them to addition risk.

Primary Care Providers


Collinsville 
Dr. Koe

Crossville 
Dr. Ufford

Fyffe 
Northeast Alabama Health Services

Fort Payne 
Wills Valley Family Medical
DeKalb Clinic
Northside Medical
Encore Medical Spa
Doctors Med Care
Fort Payne Primary
DeKalb Family Medicine
DeKalb MD
Rapid Care
CarePlus Family Medicine

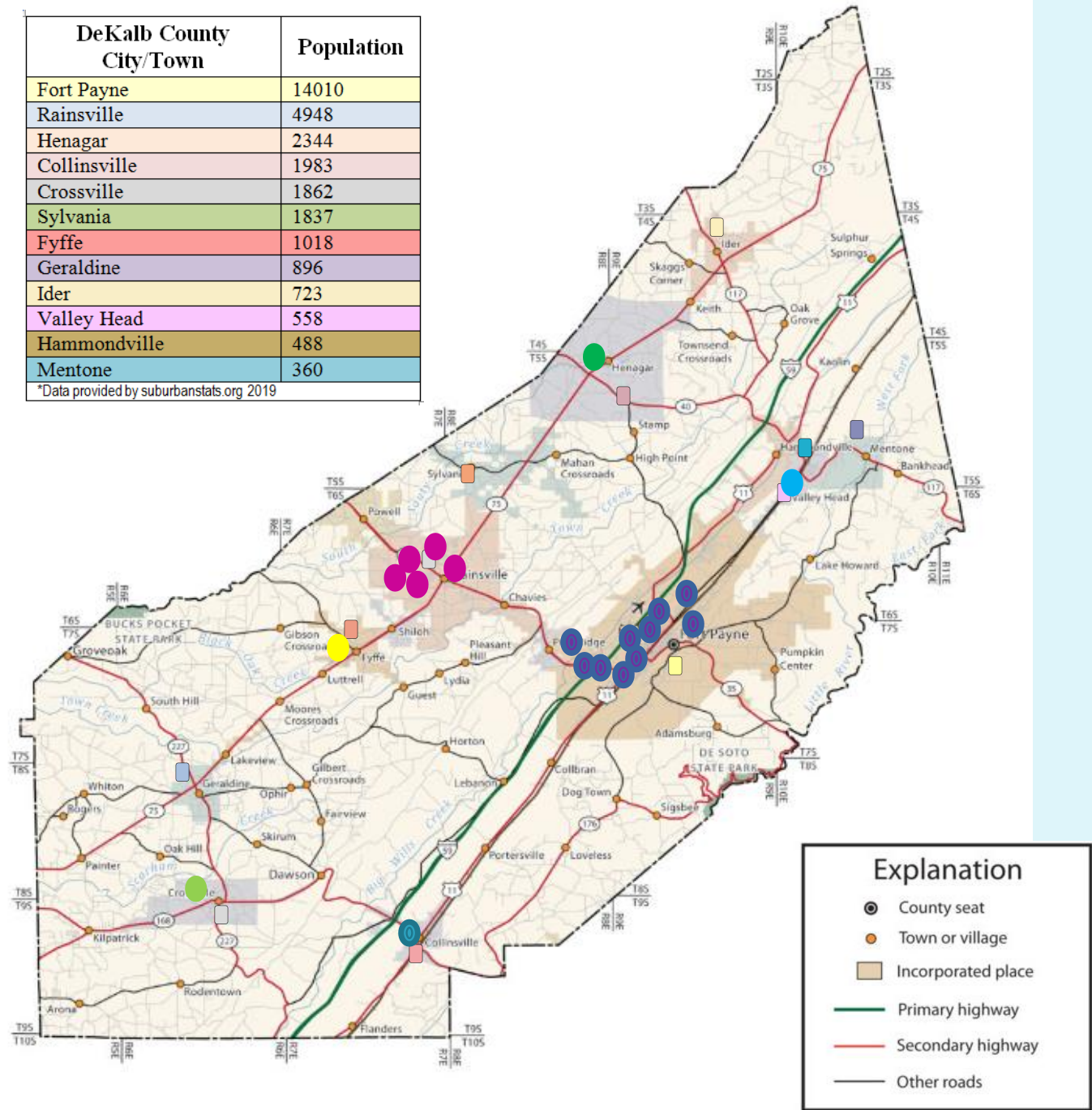
Rainsville 
Dove Healthcare
DeKalb Primary Care
Decker Clinic
DeKalb Urgent care
Family First Medicine

Henagar 
Dr. Sims

Valley Head 
Valley Head Clinic

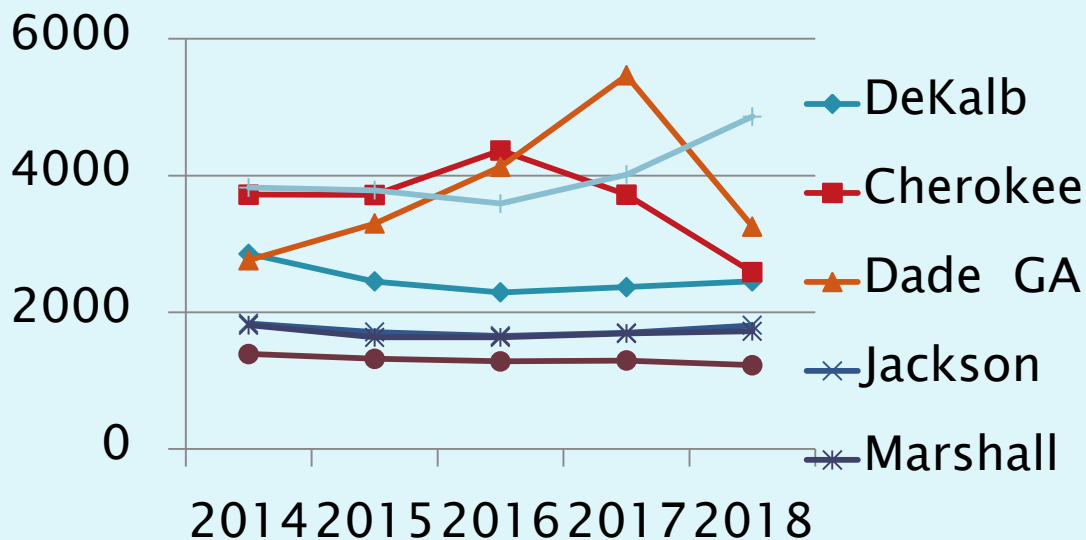
DeKalb County City/Town	Population
Fort Payne	14010
Rainsville	4948
Henagar	2344
Collinsville	1983
Crossville	1862
Sylvania	1837
Fyffe	1018
Geraldine	896
Ider	723
Valley Head	558
Hammondville	488
Mentone	360

*Data provided by suburbanstats.org 2019



Access to Primary/Specialty Care

Based on the 2018 report, the Patient to Primary Care Physician Ratio, in DeKalb County is 2,453:1. This represents a 3.55% increase from the previous year (2,369 patients).



Surrounding Counties	Patients per Primary Healthcare Provider
Etowah County, AL	1227
Marshall County, AL	1722
Jackson County, AL	1808
DeKalb County, AL	2453
Cherokee County, AL	2586
Dade County, GA	3253
Walker County, GA	4862
Chattooga County, GA	12461

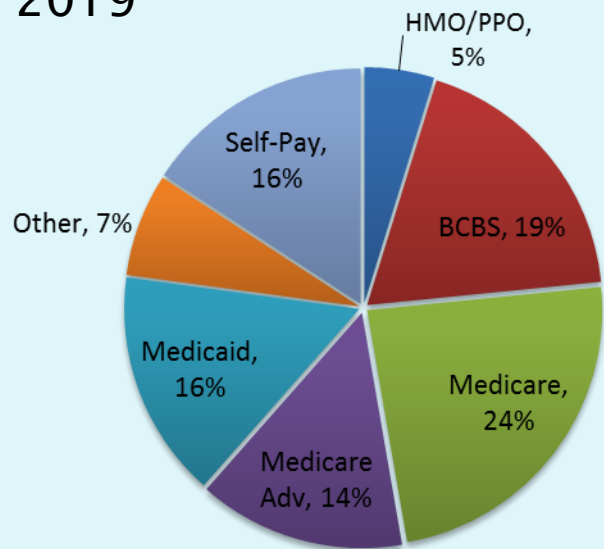
Data from the County Health Rankings & Roadmaps County Health Rankings 2018 report from 2015 data.

Access to Primary/Specialty Care

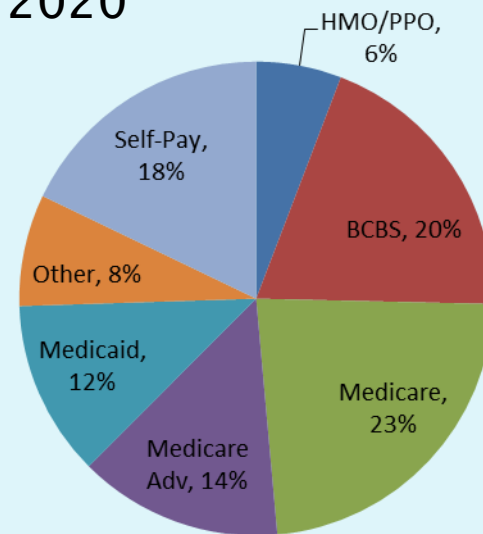
- ▶ 85.5% of the population of DeKalb County, AL has health benefit coverage.
 - 38.6% on employee plan,
 - 21.7% on Medicaid
 - 12.3% on Medicare
 - 11.5% on non-group plans
 - 1.42% on military or VA plans
- ▶ 14.5% are uninsured

Hospital Net Revenue by Payer Type

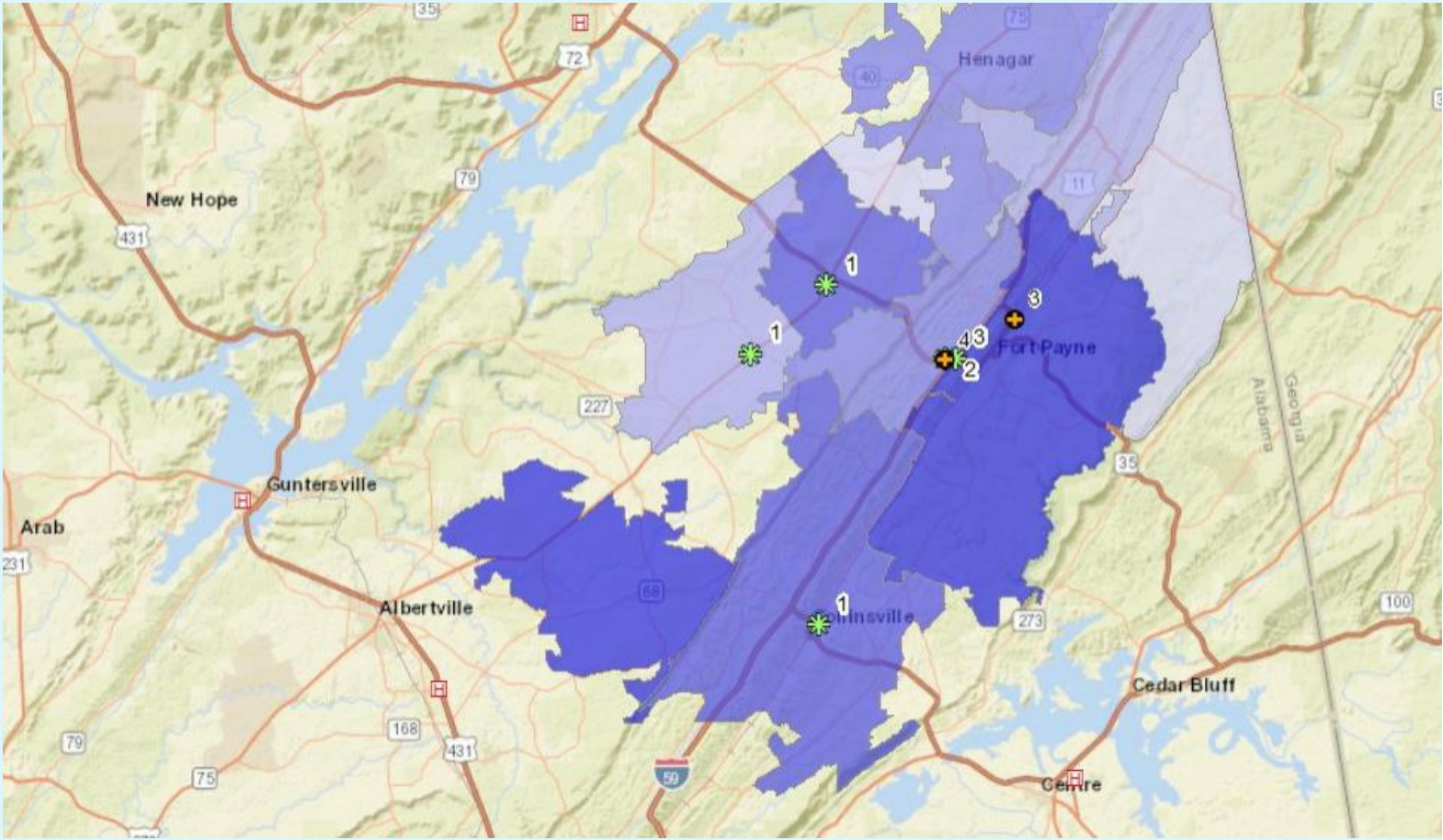
2019



2020



Employed Primary Care & Population Density Map



2019 Pop by Zip Code

- 7,841 to 16,721 (2)
- 5,213 to 7,841 (2)
- 4,837 to 5,213 (2)
- 2,136 to 4,837 (2)
- 1,921 to 2,136 (3)

Scale
7.89 mi/inch

Landmark

- US Hospitals

Custom Landmark

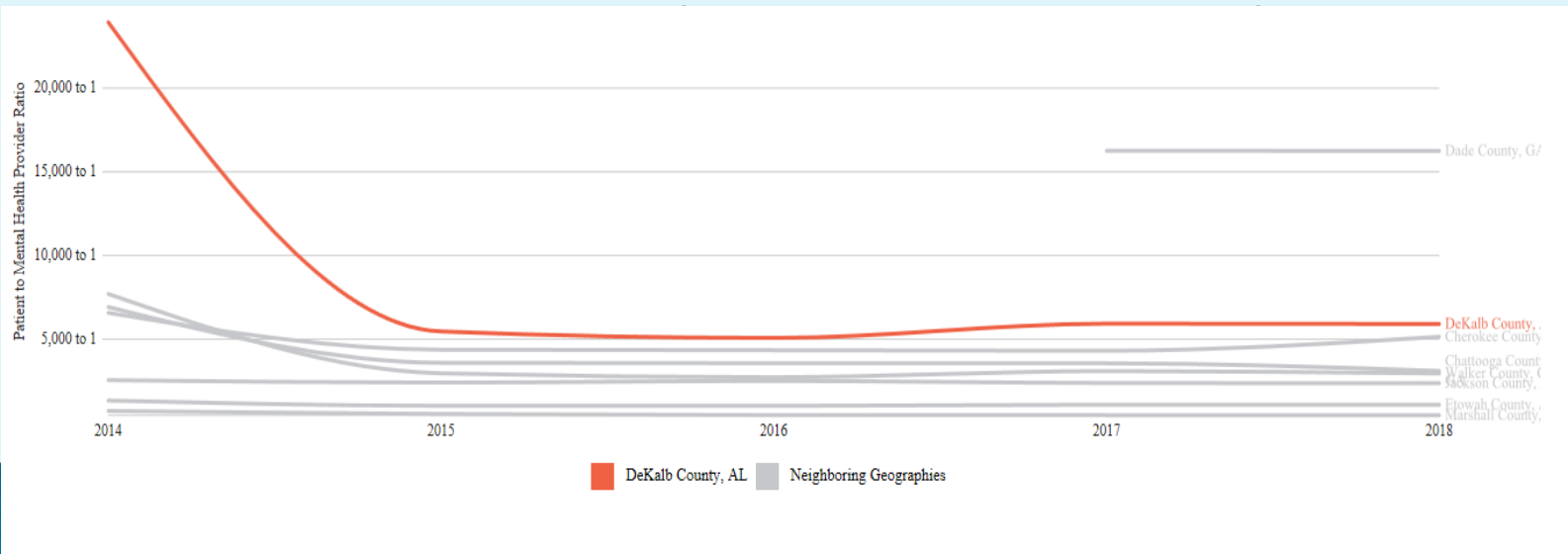
- Freestanding ED
- Imaging Ctrs
- Amb Surg Ctr
- Urgent Care
- Specialist
- PCPs

* CSA Service Area .

3

Mental Health / Substance Abuse

- 5,908 to 1 Patient to Mental Health Provider Ratio in DeKalb County, AL
- 750 patients presented to the ED in 2020 for a primary complaint related to mental health or substance abuse
- 153 patients were transferred to a mental health treatment facility
- Mental Health & Substance abuse are predominant factors in the majority of law enforcement issues. These often are concurrent, as one may lead to the other. Mental Health and substance abuse appear to be a common denominator in the majority of crimes in our community.



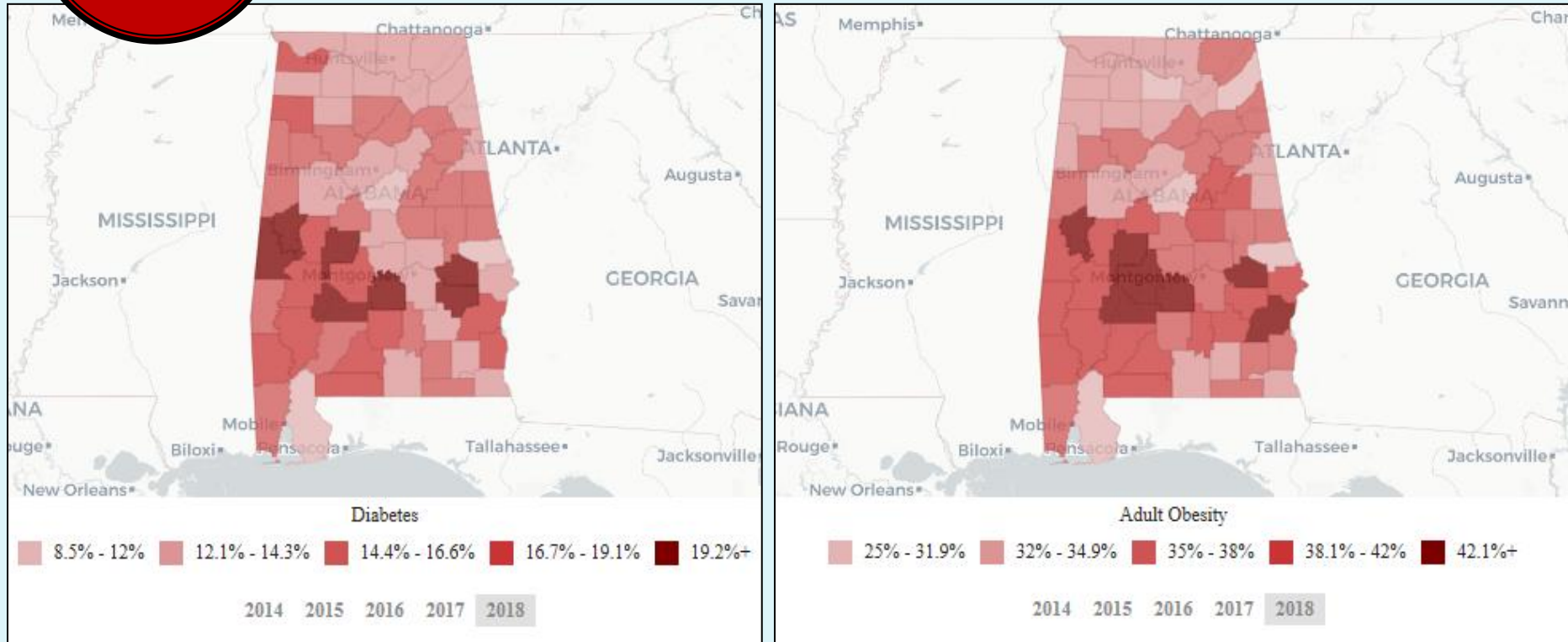
Mental Health and Substance Abuse

RESOURCES

- Fort Payne Medical Detox– Inpatient Detox Unit
- CED Mental Health Clinic– Outpatient Clinic
- ProVision Healthcare Services– Outpatient Clinic
- Fort Payne Pediatrics– Pediatric Outpatient
- The Bridge: Addiction Treatment Services– Outpatient
- Bradford Health Services– Inpatient/Outpatient

4

Nutrition & Physical Activity



DeKalb county falls below the average state & national level obesity rates.

DeKalb County 29%

Alabama Average 36.1%

National Average 42.4%

Nutrition & Physical Activity

Diabetes			
Year	DeKalb County %	State Average %	State Ranking 67 Counties
2018	12.2%	15%	64th
2017	13.4%	15.4%	50th
2016	11.5%	13.8%	55th
2015	13.6%	13.6%	41st
Obesity			
Year	DeKalb County %	State Average %	State Ranking 67 Counties
2018	30.5%	36.9%	64th
2017	30.4%	36.6%	62nd
2016	30.6%	35%	60th
2015	32.1%	35%	53rd

Prevalence of diabetes and obesity in DeKalb County over the last 4 years.

5

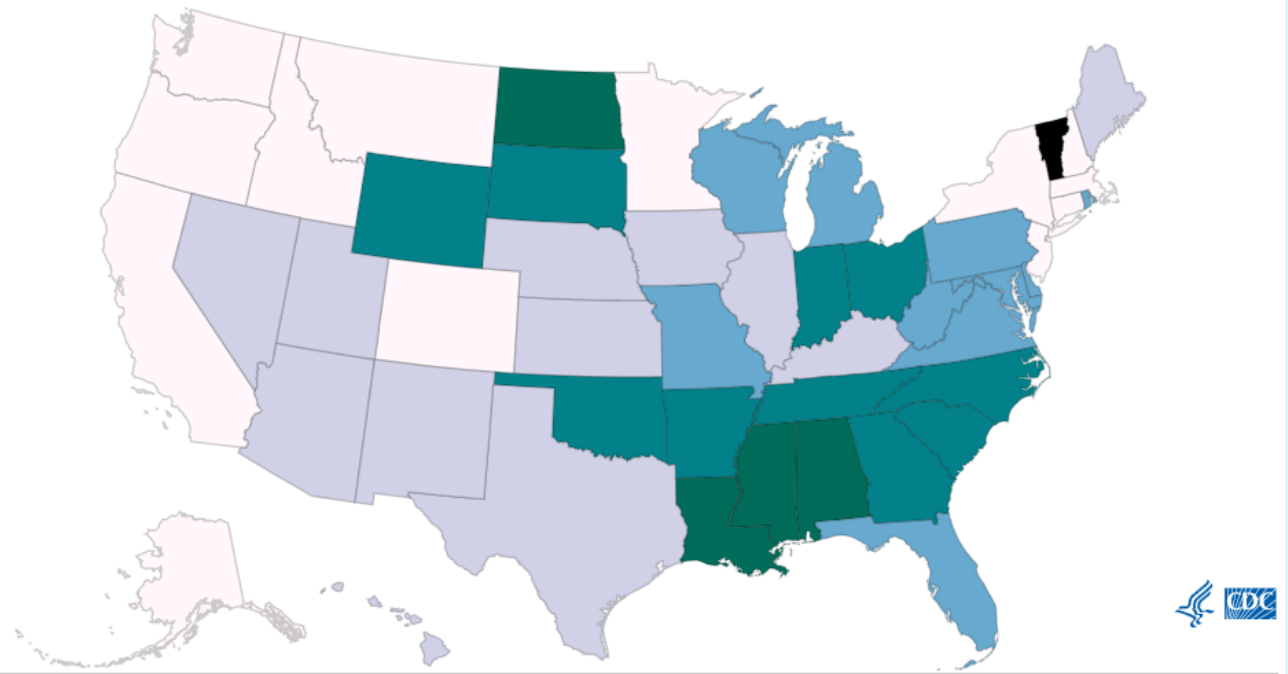
Poor Pregnancy Outcomes

Infant Mortality Rates by State

2019

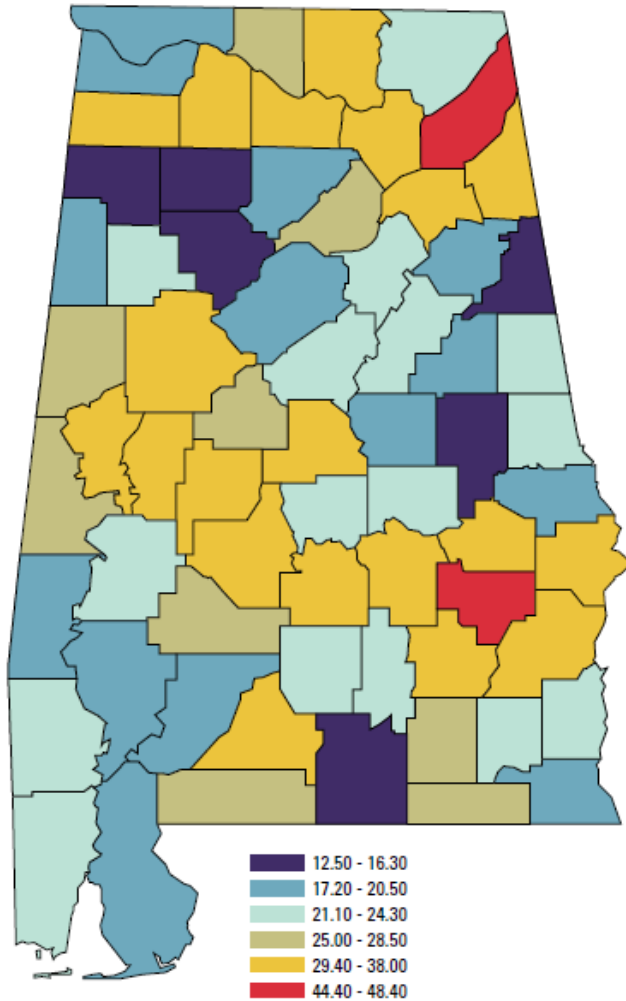
Legend

- 3.07 - 4.89
- 4.89 - 5.75
- 5.76 - 6.37
- 6.37 - 7.12
- 7.14 - 11.46



Location	Infant Mortality Rate	Deaths
● Mississippi	9.07	322
● Louisiana	8.07	468
● Alabama	7.89	449

Poor Pregnancy Outcomes



Births With Less Than Adequate Prenatal Care

- Almost a quarter of Alabama's females do not receive adequate prenatal care.
- Several dangerous health conditions can be recognized during prenatal care.
- The highest rate was in DeKalb County (48.4 percent) and the lowest was in Winston County (12.5).
- Alabama's less than adequate prenatal care rate is:
- Fifteen percent greater in 2012–2013 than in 2002–2003. Almost 20 percent higher among African American females than Caucasian.
- Less than two percent higher in rural counties than urban counties.
- Highest for infants born to teens and lowest for infants born to mothers age 30 and older.
- Higher among those with a high school education and less among those with more than a high school education.
- Almost 80 percent higher for females whose delivery was paid by Medicaid than those not paid by Medicaid.
- Almost half of Hispanic mothers received less than adequate prenatal care

Poor Pregnancy Outcomes

Infant Mortality Number and Rates 2017-2019								
County/State	2017		2018		2019		2017-2019	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate
DeKalb County	6	7.4	7	8.5	8	10.1	21	8.6
Alabama	435	7.4	405	7.0	449	7.7	1289	7.4

DeKalb County has steadily seen a rise in the infant mortality rate over the 3 year period from 2017–2019, which is above the state average. The 2 leading reasons for infant mortality. The leading causes of infant death that contribute to infant mortality in Alabama include low birth weight, preterm births before 37 weeks gestation, Sudden Infant Death Syndrome (SIDS) and bacteria sepsis of newborn. Associated factors include race, where one lives, environmental influences, and available resources known as social determinants of health or health inequities.

Factors associated with low birth weight in DeKalb County are

- None or less than adequate prenatal care
- Maternal age
- Substance abuse

6

Cardiovascular Disease

- Cardiovascular disease is a serious health condition which can result in death and disability.
- It is the number one the leading cause of death in DeKalb County and the state of Alabama.
- Due to the lack of screening and health services, cardiovascular disease is often diagnosed after it begins the person begins to exhibit signs and symptoms with serious health concerns.
- Many people in Alabama have hypertension or high cholesterol but that goes undiagnosed for a lengthy period of time, resulting in cardiovascular conditions that can often be fatal.
- Cardiovascular disease is highly related to obesity and a lack of exercise.
- Poor diets, that are high in fats and processed sugars, and lack of exercise are risk factors associated with cardiovascular diseases.
- Smoking also increases the risk of developing cardiovascular disease.
- There also seems to be a association related to income and education, low income and educational levels are at a higher risk of developing cardiovascular disease.
- Heart disease is especially prevalent in rural areas, likewise these rural areas tend to have a lower than average income and educational level.
- Heart disease can be treated with changes in diet and exercise, if the condition is detected in its early stages.
- Heart disease can be prevented by making healthy lifestyle choices and routine physicals that can identify and treat health issues, such as hypertension, hyperlipidemia, and diabetes.

DRMC –STEMI Age Specific Data

STEMI by Age Group				
	STEMIs	Age ≥ 65 yrs	Age < 65 yrs	% STEMI < 65
2020	45	19	26	58%
2019	20	6	14	70%
2018	21	6	15	71%
2017	27	9	18	67%
2016	33	17	16	48%

Year	30-39 yrs	40-49 yrs	50-59 yrs	60-64 yrs
2020	0	38%	42%	19%
2019	7%	7%	50%	36%
2019	0	33%	40%	27%
2017	17%	33%	44%	6%
2016	6%	44%	38%	12%

This data is compiled yearly and the trend for STEMI ages < 65 yrs was continuing to rise. With this information we were able to target a specific age group and work towards preventing and treating cardiovascular disease.

V. Cardiovascular Health

- a. Cardiovascular Health Risk Assessment Findings
- b. Cardiovascular Health Improvement Plan

Cardiovascular Disease Risk Assessment

The following information was obtained from the CHA to assist in identifying populations at risk for developing heart disease

- 63% of DeKalb County's population is 15-64 years of age, so approximately 50% of the population would be working.
- DeKalb County has a lower than average state and national unemployment rate.
- DeKalb County has a high Hispanic population, primarily in the lower portion of the county.
- DeKalb County has a high patient to PCP ratio.
- DeKalb County is a thriving economic community with several industries.
- DeKalb County is rural with lower than average median household income.
- DeKalb County has a 30.5% obesity rate, as a result of poor nutrition and lack of physical activity.
- Internal STEMI data helps identify a target age range for education regarding Heart Disease treatment and prevention.
- A healthy community supports a healthy economy.

Cardiovascular Disease Risk Assessment

- After conducting a community health assessment the collected data was analyzed. It was determined that the target population for DeKalb Regional to focus on decreasing the risk of heart disease would be working class age group, from around 25-64 yrs. The ages on the earlier years of spectrum from 25-35, is very vital to educate on preventative measures of heart disease. The later ages requires education related to the early warning signs of a heart attack, along with the importance of routine physicals to address new developing issues and becoming established with a primary care physician. Having a PCP is important for routine screening and early recognition of underlying health conditions that contribute to cardiovascular disease.
- The plan is to work closely with the industries in the county to promote health and wellness of their employees, which benefits the people, the community and the industry. We want to stress the importance of Primary Prevention by educating on the importance of routine health screenings to identify and treat risk factors early.
- Another plan on how provide education on the importance of heart disease prevention, is to connect with our community through social media, and internet based education.

Health Improvement Plan

- **DRMC will be a leader in community education and awareness related to acute coronary syndrome.**
- We will use social media Facebook page to distribute information on sign and symptoms of Acute Coronary Syndrome (ACS), Early Heart Attack Care (EHAC) , Hands Only CPR, and preventative care.
- DRMC will provide local physicians offices and clinics with educational recourses for patients related to ACS & EHAC.
- DRMC will be a resource for education materials related to improving the overall health of the employee, but focusing on decreasing the risk factors associated with cardiac disease for local industries within the county.
- **DRMC will increase screening for risk factors associated with cardiovascular disease.**
- DRMC will be a resource for employee health fairs for local industries, which can include cardiovascular health screenings which may identify conditions that need medical interventions to prevent heart disease
- DRMC has uploaded cardiac risk screening assessments on their website and on their Facebook page.
- DRMC plans to host quarterly community health fairs, which include screening for cardiac disease risk factors, once it is safe to resume such activities per CDC guidelines with pandemic restrictions.

Health Improvement Plan

- **DRMC will provide community education on ways to increase ones daily activity.**
- Provide resources to industries to hand out to their employees on recreational activities that are offered and available throughout the county.
- Educate the public through social media that increasing ones daily activity does always mean exercise or joining a gym.
- Educate the community via social media on free family friendly resources available in our community which can promote an active lifestyle, such as walking ,biking and hiking trails, along with water activities such as swimming and kayaking.
- **DRMC will provide information to the community on healthy food choices through social media.**
- Include information on local farmers markets for fresh produce availability
- Include heart healthy recipes via website link and sharing on social media
- **DRMC will collaborate with local industries on health and wellness programs.**
- We plan to further align our hospital with major employers and commercially insured patients in our market. As a result of our dedicated care for The Children's Place Southeast U.S. Distribution Center (TCP), especially in response to COVID-19 (employee screening project), DeKalb Regional was selected to develop and provide onsite Occupational Health and Wellness services. Through proper early execution of TCP rollout, DeKalb Regional will establish a model to present additional large employers in the area. Existing relationships with area employers, access to leader contacts through the County Economic Development Authority and Employer demand for better value and efficiency create an opportunity for growth in Occupational Health and Wellness.

Cardiovascular Disease Risk Assessment

Cardiovascular Disease Risk Factors	DeKalb County's Risk Results	Action Plan
Lack of screening and health services	2,453:1 = Patients: PCP Ratio	Collaborate with local industries by assisting with health fairs, and providing online screening tools that may help identify risk of cardiac disease.
Lack of Health Insurance	Uninsured population is estimated around 20%	Simple Plus Price, a pre paid program that offers a discount rate. Charity Care Program Financial Counselor onsite that can assist patients in signing with a health plan that fits their needs.
Chronic Disease Risk Factors: Obesity, Diabetes, HTN, High Cholesterol	30.5% Obesity rate 12.2% Diabetes rate	Increase community education related to primary prevention, healthy eating habits and increasing the amount of physical activity
Rural Area	Rural Northeast Alabama with a Population of 71,385 in 2018.	Tele-health Service availability DRMC operates 3 Primary Care Clinics within the county.
Low Income	In 2018 the median annual income was \$39,233, which is \$22,704 less than the national median income in the US.	Low income and lower education levels seems to be a factor that contributes to obesity. Provide community education and resources on healthy eating affordable /free outdoor activities.
Lower Education Level	The Census Bureau estimated that between 2015-2019 the percent of people in DeKalb County, over the age of 25 that are a: High school graduate or higher= 74.8% Bachelor's Degree or higher = 13%	Low income and lower education levels seems to be a factor that contributes to obesity. Provide community education and resources on healthy eating affordable /free outdoor activities.

2021 Employee Health Education Action Plan

1st Q 2021

Date	Topic	Description
January 2021	COVID Vaccination Clinic	A COVID vaccination clinic was set up inside the facility in accordance with the ADPH to administer vaccines to healthcare workers and first responders.
January 2021	Website Update	During the pandemic, our hospital website www.dekalbregional.com has been updated and maintained to reflect current information with health related topics and education related to all aspects of care, including up- to- date coronavirus information, cardiac health and wellness, weight loss information, primary care providers, tele-health etc. A Cardiac Health assessment was also added to our cardiovascular section, along with education on early warning signs and hands only CPR
February 2021	Heart Health Month	The Health assessment survey was conducted.
February 2021	Online Heart Health Assessment	A link to a heart health assessment was published on our Facebook page
February 2021	Heart Healthy Tips Board in Cafeteria	The dietary department featured a Heart Healthy Tips board in the cafeteria to give reminders for staff on how to keep their heart healthy.
February 2021	National Wear Red Day	Feb 5 th we celebrated National Go Red Day, also that week the Facebook Social Media page posted information about Go Red Day and how it's purpose is to raise cardiovascular disease awareness, and a link to a video goredforwomen.org was posted. We also came up with social media hash tag #WearRedDeKalb for people to post and share photos on social media.
February 2021	Primary Prevention Education	Our Facebook post the week of 2/14, 2/22, 2/25 was about the importance of primary prevention and regular health screens. Also a link to the website for scheduling virtual tele- health appointments was made available.
March 2021	Colorectal Awareness Month	Social media page is featuring the importance of colorectal screens and primary care prevention
March 2021	National Nutrition Month	Healthy recipes available in cafeteria

2Q 2021		
April 7 th 2021	World Health Day	Social Media post about World Health Day and the importance of Primary Prevention.
April 2021	Recreational Activity Awareness	Provide information to employees and community, via social media, about the recreational activities offered within the county to increase physical activity.
May 2021	Mental Health Awareness Month	Educational handouts available to staff on Mental Health Awareness and prevention. Also the information for the employee help line will be made available to all staff.
May 2021	Skin Cancer Awareness Month	This month we will take the opportunity to promote skin care, and have social media post and educational information for the staff. We will reach out to the local physicians who specialize in dermatology.
June 2021	Men's Health Month	Education provided via Social media and visual flyers within the facility to promote men's health and wellness. To include cardiac screenings and primary prevention
3Q 2021		
	Anticipated Heath Fair	If not, we will continue to offers employee education and the importance of primary prevention with hand- out flyers and social media promotions.
4Q 2021		
Oct	Cardiovascular Heath	Annual VFW Fair, promote Cardiovascular disease prevention/ EHAC/ Stroke and demonstrate Hands Only CPR, offer virtual cardiac screening assessments, and BP checks.

Goal

The goal of the Community Health Assessment (CHA) is to provide the facility with valuable information about the community and maximizing resource utilization needed for addressing the populations at risk of heart disease. Once the population has been identified, a health improvement plan is devised, and shared with key stakeholders, such as area physicians and EMS. This encourages a collaborative approach to maintain optimum health and wellness that can result in prevention of cardiovascular disease in DeKalb County.

Resources

- ▶ ADPH <https://www.alabamapublichealth.gov/index.html>
- ▶ CDC www.cdc.gov
- ▶ DeKalb County Economic development Authority www.dekalbeda.com
- ▶ <https://datausa.io/profile/geo/dekalb-county-al/>