Acknowledgements

This community health plan was prepared by Rika Meyer, Marketing and Communications Manager, with contributions from members of AdventHealth Gordon’s Community Health Needs Assessment Committee and Hospital Health Needs Assessment Committee both representing health leaders in the community and hospital leaders.

We are especially grateful for the internal and external partners who helped guide the development of the community health plan which will enable our teams to continue fulfilling our mission of Extending the Healing Ministry of Christ.

Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive Summary</td>
<td>3</td>
</tr>
<tr>
<td>About AdventHealth</td>
<td>7</td>
</tr>
<tr>
<td>Priorities Addressed</td>
<td>9</td>
</tr>
<tr>
<td>Heart Disease and Heart Related Issues</td>
<td>10</td>
</tr>
<tr>
<td>Cancer</td>
<td>11</td>
</tr>
<tr>
<td>Vaping</td>
<td>13</td>
</tr>
<tr>
<td>Priorities Not Addressed</td>
<td>15</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY
Executive Summary

Adventist Health System Georgia, Inc. d/b/a AdventHealth Gordon will be referred to in this document as AdventHealth Gordon or the “Hospital”.

Community Health Needs Assessment Process
AdventHealth Gordon in Calhoun, Georgia conducted a community health needs assessment in 2022. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. This assessment process was the most comprehensive to date and included survey questions related to diversity, equity and inclusion. In addition, the priorities were defined, when possible, in alignment with Healthy People 2030, national public health priorities to improve health and well-being.

In order to ensure broad community input, AdventHealth Gordon created a Community Health Needs Assessment Committee (CHNAC) to help guide the Hospital through the assessment process. The CHNAC included representation from the Hospital, public health experts and the broad community. This included intentional representation from low-income, minority and other underserved populations. The prioritization process sought to balance our ability to impact the greatest number of people who are facing the greatest disparities.

AdventHealth Gordon also convened a Hospital Health Needs Assessment Committee (HHNAC) to help select the needs the Hospital could most effectively address to support the community. The HHNAC made decisions by reviewing the priorities selected by the CHNAC and the internal Hospital resources available.

The CHNAC and HHNAC met throughout 2021-2022. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan to address those priorities. Learn more about Healthy People 2030 at https://health.gov/healthypeople.

Community Health Plan Process
The Community Health Plan (CHP), or implementation strategy, is the Hospital’s action plan to address the priorities identified from the CHNA. The plan was developed by the CHNAC, HHNAC and input received from stakeholders across sectors including public health, faith-based, business and individuals directly impacted.

The CHP outlines targeted interventions and measurable outcomes for each priority noted below. It includes resources the Hospital will commit and notes any planned collaborations between the Hospital and other community organizations and hospitals.

The identified goals and objectives were carefully crafted, considering evidence-based interventions and AdventHealth’s Diversity, Equity, and Inclusion and Faith Accountability strategies. AdventHealth Gordon is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to all we serve.
## Executive Summary

### Priorities Addressed
The priorities addressed include:
1. Heart Disease and Heart-Related Issues  
2. Cancer  
3. Vaping  

See page 9 for goals, objectives and next steps for each priority selected to be addressed.

### Priorities Not Addressed
The priorities not addressed include:
1. Preventative Care and Screenings  
2. Diabetes  
3. Food Insecurity  
4. Pregnancy and Maternal Health  
5. Mental Health and Mental Health Disorders  
6. Nutrition and Healthy Eating  
7. Physical Health and Activity  

See page 15 for an explanation of why the Hospital is not addressing these issues.

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The Community Health Plan is a three-year strategic plan and may be updated during implementation based on changing community needs or availability of resources. AdventHealth recognizes community health is not static and high priority needs can arise or existing needs can become less pressing. The Hospital may pivot and refocus efforts and resources to best serve the community.
Executive Summary

Board Approval
On February 13, 2023, the AdventHealth Gordon Board approved the Community Health Plan goals, objectives and next steps. A link to the 2023 Community Health Plan was posted on the Hospital’s website prior to May 15, 2023.

Ongoing Evaluation
AdventHealth Gordon’s fiscal year is January – December. For 2023, the Community Health Plan will be deployed beginning May 15, 2023, and evaluated at the end of the calendar year. In 2024 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital’s IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

For More Information
Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Gordon at https://www.adventhealth.com/community-health-needs-assessments.
ABOUT ADVENTHEALTH
About AdventHealth

AdventHealth Gordon is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth strives to heal and restore the body, mind and spirit through our connected system of care. More than 80,000 skilled and compassionate caregivers serve 4.7 million patients annually. From physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, wholistic care at nearly 50 hospital campuses and hundreds of care sites throughout nine states.

Committed to your care today and tomorrow, AdventHealth is investing in research, new technologies and the people behind them to redefine medicine and create healthier communities.

About AdventHealth Gordon

AdventHealth Gordon is a comprehensive, 69-bed community hospital located in Gordon County, Georgia. Built originally in 1953 as Gordon County Hospital, the Hospital moved to its current location in the 1970’s to meet the growing needs in the community. The Hospital became part of the Adventist Health System in 1994 and officially became AdventHealth Gordon in 2019. In 2020, AdventHealth Gordon completed a project to enhance its services offered to the community. The project included the construction of the Edna Owens Breast Center, relocation and expansion of The Baby Place, expansion and renovation of the operating room and construction of a new cardiac catheterization lab. AdventHealth Gordon offers many services including allergy care, cancer care, diabetes, education, emergency and urgent care, endocrinology, heart and vascular care, home care, imaging services, lab services, lifestyle medicine, mother and baby care, ophthalmology, orthopedic care, pain medicine, pediatrics, physical therapy, primary care, sleep medicine, sports medicine, surgical care, urology, women’s care and wound care.
PRIORITIES
ADDRESSED
Heart Disease and Heart Related Issues

According to secondary data, individuals in the Hospital’s community have higher rates of coronary heart disease and of heart disease mortality per 100,000 than elsewhere in Georgia and the nation. Almost 40% of community survey respondents report having hypertension, which can be a major contributing factor to heart disease and hypertension is shown to be one of the top ten codes in Hospital visits by uninsured patients. Also, 1/3 of individuals living in the community have been told they have high cholesterol which can be a contributing factor to heart disease as well.

**Goal 1:** Increase the number of individuals receiving preventative, early diagnosis and treatment of heart disease.

**Objective 1.1:** By year 3, provide a total of 300 free heart-disease screenings (including blood pressure and calcium screenings) to low-income adults in Gordon County.

**Objective 1.2:** By year 3, partner with a total of five churches to conduct free heart disease screenings.

**Target Population:** Age 40 and above, low-income residents of Gordon County

<table>
<thead>
<tr>
<th>Activities/Strategies</th>
<th>Outputs</th>
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<th>Community Partnerships</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood pressure and health screenings at the senior center, local churches and housing authority, targeting low-income residents and the elderly on a quarterly basis</td>
<td>Two screening events, reaching 20 people each for a total of 120 residents each year</td>
<td>Tracy Farriba and community health staff will provide screenings.</td>
<td>Voluntary Action Center, senior center, local churches, housing authority</td>
<td>X</td>
</tr>
<tr>
<td>AMEN Health Clinic targeting underserved/low-income populations, providing heart disease screenings and education seminars</td>
<td>250-400 people</td>
<td>Sponsorship ($5,000), providers, volunteers, marketing, equipment</td>
<td>Local Adventist Churches, the Volunteer Action Center, free clinic, Health Department</td>
<td>X</td>
</tr>
<tr>
<td>Public educational campaign on heart disease prevention (February Heart Month)</td>
<td>Social media campaign, radio interviews, videos and newspaper stories emphasizing heart disease prevention and recognition</td>
<td>Marketing Team will create and share resources to promote screening events and educational resources.</td>
<td>Local churches, community centers, senior centers</td>
<td>X</td>
</tr>
</tbody>
</table>
Cancer

In the Hospital’s community 6.4% of the residents have had cancer according to secondary data. There is also a higher mortality rate per 100,000 than in both the state and the nation for colorectal cancer and lung, trachea and bronchus cancer in Gordon County.

**Goal 1**: Decrease the prevalence of life-threatening cancer in Gordon County.

**Objective 1.1**: By the end of year 3, increase free screenings for lung cancer in order to provide more effective treatment to increase survival rate from a baseline of 411 screenings annually to 478.

**Target Population**: Low income and/or non-English speakers in Gordon County, men and women over 40 years of age.

<table>
<thead>
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</tr>
</thead>
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<tr>
<td>Provide lung cancer screenings</td>
<td>Offer free low dose lung cancer screenings for smokers aged 50-75 who have a 20-pack year history</td>
<td>Host, staff and promote the event</td>
<td>Local industries (flooring companies, occupational health)</td>
<td>X X X</td>
</tr>
<tr>
<td>Preventative &amp; lifestyle education</td>
<td>Ongoing educational materials, social posts and reminders to check for signs of cancer (English and Spanish)</td>
<td>Marketing, corporate team</td>
<td></td>
<td>X X X</td>
</tr>
</tbody>
</table>
Cancer

Goal 1 continued: Decrease the prevalence of life-threatening cancer in Gordon County.

Objective 1.2: By the end of year 3, increase free screenings for skin cancer from a baseline of 42 screening annually to 50.

Objective 1.3: By the end of year 3, increase free screenings for colon cancers from a baseline of 867 screenings annually to 947.

Target Population: Low income and/or non-English speakers in Gordon County, men and women over 40 years of age.

<table>
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</tr>
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<tr>
<td>Skin cancer screenings, partnering with local dermatologists – Melanoma Mondays</td>
<td>Free skin cancer screenings, once per year</td>
<td>Staffing and location</td>
<td>Local dermatologists</td>
<td>X</td>
</tr>
<tr>
<td>Screenings for Public Safety personnel</td>
<td>Examines skin, prostate, mental, dietary for prevention and screening</td>
<td>Staffing, meal, location</td>
<td>Calhoun Police Department</td>
<td>X</td>
</tr>
<tr>
<td>AMEN Health Clinic targeting underserved/low-income populations, screening for cancer, providing educational lectures on cancer prevention and/or referrals (English and Spanish)</td>
<td>250-400 people, low income, English as second language</td>
<td>Sponsorship, providers, volunteers, marketing</td>
<td>Local Adventist Churches, the Volunteer Action Center, free clinic, Health Department</td>
<td>X</td>
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Vaping

According to community survey respondents, 19.7% are vaping every day or some days. Stakeholders also consider vaping to be a top health behavior risk factor, particularly among youth. Nationally, the prevalence of vaping and e-cigarette usage has been rising among youth and although vaping is considered to be less than harmful than smoking tobacco, there is still much unknown about its long-term effects.

Goal 1: Decrease the usage of vaping in Gordon County among adolescents.

Objective 1.1: By the end of year 3, increase education to teenagers about the dangers of vaping from one school (2021-22) to six public middle and high schools in AdventHealth Gordon’s PSA.

Target Population: Adolescents living in Gordon County

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<tr>
<td>Conduct vaping education lectures in local schools in Gordon County, targeting middle and high school students</td>
<td>Reach every 6th-11th grader in Gordon County with a vaping lecture</td>
<td>Tracy Farriba and Community Outreach Team</td>
<td>Gordon County School District, Calhoun City Schools</td>
<td>X</td>
</tr>
<tr>
<td>Provide education and information to local school families with ideas on how to stay active and healthy in Feel Whole 101</td>
<td>Quarterly health newsletter for all schools in Gordon County</td>
<td>Researching, writing, designing newsletter</td>
<td>Gordon County Schools, Calhoun City Schools, Coble Elementary School</td>
<td>X</td>
</tr>
</tbody>
</table>
Goal 1 continued: Decrease the usage of vaping in Gordon County among adolescents.

Objective 1.2: The Drug and Vaping Task Force is a collaborative focus group of health care personnel, social workers, school administrators, cancer coalition representatives and Live Drug Free representatives. By year three, convene the Drug and Vaping Task Force at least three times annually to create and develop vaping education strategies.

Target Population: Adolescents living in Gordon County

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<tr>
<td>Provide information and resources in the community to adults</td>
<td>Create a resource list landing page and printed for our Emergency Department, public service partners</td>
<td>Marketing, Emergency Department team members</td>
<td>Cancer Coalition of Northwest Georgia, Live Drug Free, Gordon County Schools, Calhoun City Schools</td>
<td>X</td>
</tr>
<tr>
<td>The Drug and Vaping Task Force engages Gordon County Schools to provide education to middle and high school students.</td>
<td>Provide flyers with resources on cessation and dangers of vaping targeted toward youth with access to free educational resources, attend school orientations to provide resources to parents.</td>
<td>Designing and compiling materials, program planning, web development</td>
<td>Cancer Coalition of Northwest Georgia, Live Drug Free, Gordon County Schools, Calhoun City Schools</td>
<td>X X X</td>
</tr>
</tbody>
</table>
PRIORITIES NOT ADDRESSED
Priorities Not Addressed

AdventHealth Gordon also identified the following priorities during the CHNA process. In reviewing the CHNA data, available resources, and ability to impact the specific identified health need, the Hospital determined these priorities will not be addressed.

Diabetes
Diabetes is shown to impact 12.1% of residents in the Hospital’s community according to public data, while 21.8% of community survey respondents report having diabetes. Diabetes related conditions are also shown to be one of the top ten codes in Hospital visits by uninsured patients.

The Hospital did not select diabetes as a priority, as it is not positioned to directly address this in the community at large and will focus its available resources where there is the greatest opportunity for positive impact.

Preventative Care and Screenings
According to community survey respondents, 34.6% are not aware of what preventative screenings are needed. Among those that are aware, 27.6% report not getting regular screenings. Public data shows that 73.2% of community members are up to date on routine checkups.

The Hospital did not select preventative care and screenings as a priority due to a lack of resources. However, the Hospital did select heart disease and heart related issues as a priority, which is disproportionately impacting the community, and may use preventative care strategies in addressing it.

Food Insecurity
More than 16% of the residents in the Hospital’s community are food insecure according to Feeding America and 37.2% live in a low food access area. According to community survey respondents, 21.3% received SNAP benefits last year, while 19.2% felt they ate less than they should have due to cost.

The Hospital believes that other organizations are better positioned in the community to address this need directly and will support those efforts when able.
Priorities Not Addressed

Pregnancy and Maternal Health
In Gordon County, the primary county served by the Hospital, 10.5% of mothers who give birth have no or late prenatal care and the premature birth rate is at 9.2%. There is also a higher infant mortality rate in Gordon County than in the state.

The Hospital did not select pregnancy and maternal health as a priority as it is not resourced to directly address this in the community but will support other community partners where possible in their efforts.

Mental Health and Mental Health Disorders
In the Hospital’s community, 22.5% of residents have a prevalence of depression, while 19.3% of the residents report poor mental health. According to community survey respondents 23.4% have been diagnosed with a depressive order and more than 26% have been diagnosed with an anxiety disorder.

Although the mental health needs of the community are significant, the HHNAC did not perceive the ability to impact the issue with existing Hospital resources at this time and did not select it as a priority.

Nutrition and Healthy Eating
According to community survey respondents, 44.1% eat fruits and vegetables less than two days a week. Secondary data shows 37.2% of residents in the Hospital’s community live in a low food access area and almost a quarter (22.6%) live in a very low food access area.

The Hospital believes that other organizations are better positioned in the community to address this need directly and will support those efforts when able.

Physical Health and Activity
In the Hospital’s community, 34.2% of residents report not engaging in physical activities outside of their jobs according to secondary data. The community also has a higher percentage, 16.8%, than both the state and the nation of residents who report 14 or more days in the last 30 during which their physical health was not good. Community members in the assessment cited a need for more low-cost fitness centers and accessible community spaces for recreation.

The Hospital believes that other organizations are better positioned in the community to address this need directly and will support those efforts when able.