

Hospital Systems Capacity Building Initiative: Hospital & Community Profile





HOSPITAL SYSTEM AT-A-GLANCE

- Non-Profit
- Academic Medical Center
- Located in North Carolina
- 6 Hospitals

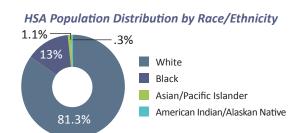
 HSCB Implementation Location-New Hanover – Brunswick, NC

HEALTH SERVICE AREA (HSA) KEY STATISTICS

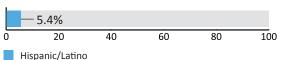


HSA Counties

Brunswick, New Hanover, and Pender Counties



Percent of HSA that is Hispanic/Latino





HSA county-level median household income is \$55,370 compared to \$52,413 for North Carolina.



91% of adults age 25 or older within the HSA have a high school diploma and **34%** have a bachelor's degree compared with **87%** and **31%** respectively for North Carolina.



HSA has a cancer death rate of **160** deaths per 100,000 compared with **164** for North Carolina.



85% of adults under age 65 and **94%** of children under age 19 within HSA have insurance compared to **85%** and **95%** for North Carolina.

INITIATIVE OVERVIEW

The American Cancer Society (ACS) is partnered with the Centers for Disease Control and Prevention (CDC) to support hospital systems, like New Hanover Regional Medical Center. This five-year initiative increases capacity to build multi-sector partnerships to implement evidence-based and informed interventions for cancer prevention and screening.

Participating hospital systems are building a community of practice to share best practices and lessons learned and build the evidence base for increasing breast health equity, colorectal cancer screening or HPV vaccinations

This community of practice is built on the intersection of participating hospital systems, state and local health departments, ACS and community partners.

New Hanover Regional Medical Center's partners include:

The American Cancer Society, New Hanover County Health Department, Pender County Health Department, Wilmington Chapter of The Links Incorporated, Going Beyond the Pink, Lump to Laughter



Area of Focus: Breast Health Equity

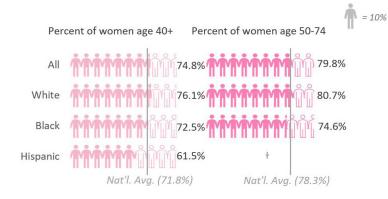
Data Sources: HSCB Initiative applications, the American Communities Survey (2014-2018) and the National Cancer Institute/CDC (2013-2017). Data for ethnicity (i.e., Hispanic/Latino) were collected and reported separate from race.

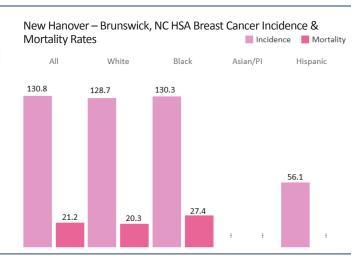
COMMUNITY CANCER BURDEN

The summary below provides a high-level overview of the cancer burden in the state and corresponding health service area for each area of focus, along with national benchmarks. The Hospital Systems Capacity Building Initiative provides support to improve cancer screening and prevention in breast health equity, colorectal cancer screening, and HPV vaccination. The selected indicators below provide a snapshot of cancer burden, however additional data may be explored during HSCB Community of Practice program planning to better understand health equity and other factors related to differential cancer outcomes.

BREAST CANCER SCREENING

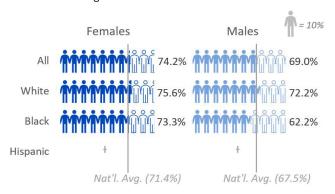


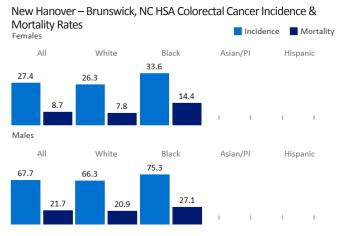




COLORECTAL CANCER SCREENING

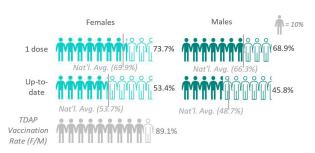
North Carolina: Percentage of Adults Age 50-75 Years Up-to-Date with CRC Screening



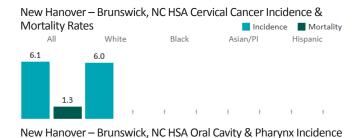


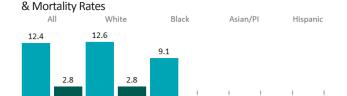
HPV VACCINATIONS

North Carolina: HPV Vaccination Rates, Age 13-17



The HPV series, TDAP, and meningococcal vaccines should all be completed by a patient's 13th birthday, so comparing HPV with either highlights missed opportunities when the HPV vaccine could have been administered.





Footnotes: Biological sex for these data sources was self-reported by the individuals represented. Definition of screening up-to-date: Home-Based Fecal Occult Blood Test (FOBT) in last year and/or flex sig in last 5 years and FOBT in last 3 years and/or colonoscopy in last 10 years. Incidence and Mortality Rates: Calculated per 100,000 people. Data Sources: Mammogram and FBOT Screening - BRFSS Screening and Risk Factors Tables, 2018; HPV Vaccination – 2018 Adolescent HPV Vaccination Coverage Dashboard, 2018; TDAP- 2018 Adolescent Tetanus and diphtheria toxoids (Td) or Tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis Vaccination Coverage Dashboard; Incidence – 2013-2017 National Program of Cancer Registries; Mortality – 2014-2018 National Vital Statistics System.