Executive Summary

Anson Community Hospital is located in Anson County, North Carolina, a small rural community with a population mix of approximately 50 percent African American and 50 percent Caucasian American. The hospital and the local health department recognized the health disparities in the African American population and decided to participate in the state’s Healthy Carolinians initiative, a state version of the national Healthy People 2000 and 2010 initiatives. In 1996, Anson Community Hospital established the Healthy Ansonians Task Force with specific goals targeting substance abuse, sexually transmitted diseases, maternal and child health, and injury control. In subsequent years, the task force added several additional initiatives such as the Mobile Health Screening Clinic and the Parish Nurse Program.

The Mobile Health Screening Clinic was purchased in 1998 when the Healthy Ansonians Task Force recognized that the lack of public transportation in the community was creating a barrier to patients in receiving the care that they needed. The Mobile Health Screening Clinic was established through an initial grant from The Duke Endowment. Today, the Mobile Health Screening Clinic has ten permanent sites in Anson County and screens about 6,000 community members annually. The program has been so successful that, even though the grant has expired, Anson Community Hospital has included the operating cost of the clinic into its budget in support of the hospital’s mission to improve the health status of the people of Anson County.

In addition to the Mobile Health Screening Clinic, the Healthy Ansonians Task Force also established a Parish Nurse Program in 1998. The Task Force recognized that one of the best ways to reach the African American population in the community was through their churches. The program received an initial start-up grant from The Duke Endowment and currently serves 32 churches in the community. One full-time parish nurse and over 40 volunteer nurses in the various congregations staff the program. The Parish Nurse Program provides a variety of services depending on the needs of each individual church, from basic health screenings to CPR training and American Red Cross babysitter certification courses. The Parish Nurse Program has been well received in the community and recently received a grant from the Duke School of Divinity to expand the program.

Organization Size: 30 acute, 95 long-term care beds

Program/Initiative Descriptions
Healthy Ansonians Task Force: In 1995, the chairman of Anson Community Hospital’s board asked the organization to create a community relations task force. The state had a Healthy Carolinians program, a state-level program of the national Healthy People 2000 and now 2010 initiatives. North Carolina believes that to achieve the Healthy People objectives, local communities must be dedicated to creating and implementing their own solutions. Local Healthy Carolinians task forces can be created and certified by the Office of Healthy Carolinians if they chose to address at least two of the 11 objectives outlined in the November 1992 Report of the Governor’s Task Force on Health Objectives for the Year 2000. Also, the local task force must outline its methodology to decrease health disparities in the population served. The Healthy Ansonians Task Force chose to focus on four areas: substance abuse, sexually transmitted diseases, maternal and child health, and injury control. The Task Force received its initial certification in 1996, was recertified for three years in 1998, and recertified for another three years in 2001. There are approximately 20 community leaders on the Task Force representing most of the Health and Human Services providers in the county, with another approximately 100 members composing the four subcommittees. One example of a program the Task Force implemented is the Asthma Coalition. The program was created because the Task Force identified that about $350,000 was being spent annually to care for young children in the emergency room suffering from acute asthma attacks. The Asthma Coalition hosted “Camp Summer Breathe” in 2002 with 18 asthmatic children. The children worked with their adult caregiver and physician and learned how to manage their asthma. The program repeated in 2003 with 28 new children.

Mobile Health Screening Clinic: After getting certified, the Healthy Ansonians Task Force realized just how much the lack of a public transportation was a major barrier to patients in receiving the care they needed. In 1998, the hospital received a three-year, $435,000 grant from The Duke Endowment, which allowed the Task Force to establish the Mobile Health Screening Clinic. The Mobile Health Screening Clinic rotates through ten permanent sites in the county, including a Wal-Mart and an IGA parking lot. The clinic also appears at special community events, which increases awareness and also draws additional people to the event. The Mobile Health Screening Clinic conducts basic health screenings with a senior level registered nurse and one or more assistants. Approximately 25 percent of the people receiving a health screening need referral to a primary care physician for follow-up. The clinic also performs occupational health screenings for local employers. Although the funding from The Duke Endowment has ended, the hospital has built the operating cost of the Mobile Health Screening Clinic into its budget and is continuing the program with only limited support from various sources.

Nurse Parish Program: The Healthy Ansonians Task Force realized the strong relationship between spiritual health and physical health. The Task Force also reviewed the literature showing that churches are an excellent way
to reach the African American community. As a result, the Healthy Ansonians Task Force created a Parish Nurse Program. It received an additional three-year Duke Endowment grant for $135,000 to establish the program and hire one full-time nurse. In addition to the paid nurse position, over 40 volunteer nurses in the various congregations help coordinate the program in their churches. Participating churches create a covenant with the parish nurse stating their goals and needs for the program. In addition to various health screenings, the parish nurse program provides numerous programs and services, including CPR certification, American Red Cross babysitter certification programs, instructions in healthy diets, and a variety of other services. The nurse also serves as a reference and liaison between the church members and the health care system when the church members are confused about the way the system works. The Parish Nurse Program recently received an expansion grant from The Duke Endowment to implement the Duke School of Divinity’s Caring Communities initiative. The grant will allow the program to increase its staff and reach more church congregations.

Establishment of Programs/Initiatives
- Mobile Clinic: 1998
- Parish Nurse Program: 1998

Racial or Ethnic Disparities Problem the Programs/Initiatives Were Designed to Address
- Anson County’s total population is approximately 50 percent African American.
- The working population is about 60 percent African American.
- The national Healthy People 2000 and 2010 initiatives had been in place for some time, but all the problems identified were still there; North Carolina believed the problems would only be solved through a commitment by local communities to innovate their own solutions.

Major Objectives: Work with the health and human services providers in Anson County to continually improve the health status of the community members the hospital serves

Significant Results
- The Parish Nurse Program began with no churches in 1998 and now has 32 participating congregations. The program also has one of the largest numbers of volunteers of any volunteer program in the state.
- Nearly 6,000 people annually receive basic health screenings through the Mobile Health Screening Clinic.
- People are often waiting when the Mobile Health Screening Clinic arrives.
- In 1996 Anson County had the highest Syphilis rate in all 100 North Carolina counties; the county is now ranked 41st.
• The hospital’s volume has increased to all-time highs, and its local market share has increased from 34 percent to 39 percent between 1999 and 2002.
• Numerous other initiatives have been added by the Healthy Ansonians Task Force, including Safe Communities/Safe Kids, Domestic Violence, and a Sexual Assault Nurse Examiner (SANE) program.
• Anson Community’s bottom line has increased steadily the past three years despite the additional costs of the program. The hospital’s 2003 bottom line was its best ever.

External Partners in the Programs/Initiatives
• Duke Endowment
• Duke School of Divinity
• Office of Healthy Carolinians
• The entire community, including the health and human services providers, local business, churches, sheriff’s department, schools, community college, and local officials

Limitations or Problems Encountered
• Eliminating “turf” barriers and trying to get people to work together toward a common goal
• Making the Anson County task force work with limited resources and time because all members of the task force are volunteers with other full-time positions

Estimated Cost of the Programs, To Date
• Mobile Health Screening Clinic: Annual operating costs are $350,000 (excluding the purchase of the clinic)
• Parish Nurse Program: $100,000 annually

Advice to Other Organizations That May Want to Start Similar Programs
• Start small; get a few successes so people don’t get discouraged.
• Each initiative needs someone who is passionate for the program’s purpose and goal.
• If you can show the impact the program is projected to have on minorities and/or the uninsured, grants are available.
• This is not a short-term solution.

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