McLeod Health Dillon 2019 Community Health Needs Assessment



Approved by McLeod Medical Center Dillon Board of Directors on 07/20/2019

McLeod Health

The Choice for Medical Excellence

Introduction

Health begins —long before illness—in our homes, schools and jobs. Through meaningful collaboration, we have the opportunity to make choices that can help us all to live a healthy life, regardless of income, education or ethnic background. This *Community Health Needs Assessment* and *Action Plan* presents an opportunity for improving health status.

People whose circumstances have made them vulnerable to poor health need our help in working towards eliminating barriers that provide everyone with the chance to live a healthy life. This work can't happen without first making use of the facts that serve as the foundation. Health research provides indicators of health status, such as the prevalence of disease or health issue and its effect in both economic and human terms. As health improvement initiatives are introduced, it can reflect the effectiveness of an approach or intervention. By using the *Community Health Needs Assessment*, we can evaluate relevant determinants of health that provides valuable insight in guiding decisions that create a pathway for improving the health of our community. As you read the *Community Health Needs Assessment*, it can change the way you think about health.

After reviewing the report, it is important to begin where health starts. Everyone in our community should have the opportunity to make good healthy choices (e.g., regarding smoking, diet, alcohol use, physical activity) since this has the largest impact on future health outcomes. Wherever possible, through programs, services, public policy or other means, emphasis needs to be placed on addressing health choices and prevention before there is a medical need. Research has shown that the health care system represents only 10-20% of determining health status, while our individual health behaviors we choose account for 40% or more.

Through changes in public policy, it is possible that most people, regardless of income, could have the ability to see a doctor. Health insurance does not guarantee good health, but it does provide important access to preventative health services. It can reduce the risk of deferring needed care and the financial risk associated with receiving care. Those most vulnerable to poor health often have the weakest voice when it comes to health policy. Our efforts should prioritize

our resources to address the most pressing needs, disparities, and inequalities where we may be impactful.

Our success should be linked to collaboration where our collective efforts can build a healthy community that nurtures its families and communities. McLeod Health encourages partnerships with volunteers, business, government, civic and religious institutions to join us in this work. Although we will not be able to eradicate every illness, there is much we can accomplish by education, fostering good health and addressing community health gaps. Health begins with healthy relationships, healthy communities, and healthy jobs, which can protect us from the stress of everyday life.

Input was solicited and taken into account from the following sources in identifying and prioritizing significant health needs and in identifying resources potentially available to address those health needs:

- At least one state, local, or regional governmental public health department (or equivalent department or agency), or State Office of Rural Health with knowledge, information, or expertise relevant to the health needs of the community
- Members of medically underserved, low-income, and minority populations in the community served by the hospital facility or individuals or organizations serving or representing the interests of these populations
- Solicitation of comments received on the hospital facility's most recently conducted CHNA and most recently adopted implementation strategy

One-on-one interviews, questionnaires, and forums were conducted in Spring 2019 as a means to gather input.

Top Health Concerns Reported Among Community Members

- Obesity
- Drug Abuse

- Cancer
- Heart Disease/Stroke

Source: McLeod Health 2019 Survey

Top Health Concerns Reported Among Health Professionals

Most frequent health concerns:

- Drug Abuse
- Obesity
- Access to Specialty Care

Source: McLeod Health 2019 Survey

Primary Diagnosis Admitted to Emergency Department

Most frequent health needs presenting to McLeod Health Dillon Emergency Department October 2017 – September 2018:

- Abdominal Pain
- Chest Pain
- Urinary Tract Infection
- Acute Upper Respiratory Infection
- Acute Pharyngitis
- Influenza
- Acute Bronchitis
- Headache
- Acute Sinusitis
- Vomiting

Source: McLeod Health Clinical Outcomes

Primary Inpatient Diagnosis

Most frequent health needs presenting to McLeod Health Dillon October 2017 – September 2018:

- Obstetrical Care, Labor and Deliver, Vaginal and Cesarean Section
- Sepsis
- Acute and Chronic Respiratory Failure
- Acute Kidney Failure
- Hypertension with Heart Failure
- Chronic Obstructive Pulmonary Disease
- Acute Respiratory Failure
- Cerebral Infarction

Source: McLeod Health Clinical Outcomes

Opportunities & Plan Priorities

McLeod Dillon has developed an action plan that collaborates with community partners to provide community health initiatives that are focused on areas listed below and further described within the Implementation Plan that utilizes evidence-based practices for addressing:

- Chronic Diseases
- Access to Care
- Substance Abuse
- Sexual Health

About McLeod Health Dillon

With a strong history in the Dillon community since 1943, McLeod Dillon, formally Saint Eugene Hospital has continued to grow and expand to serve residents of Dillon (SC) and Robeson (NC) counties with excellence in patient care. The DNV-GL accredited medical center employs 350 and has the strength of 100 physicians on its medical staff. McLeod Dillon, established in 1998, offers general and orthopedic surgery, women's services, emergency services, intensive care, rehabilitative services and cardiac rehabilitation. Investments in state of the art technology to improve patient care have included MRI, 3D mammography, 4D ultrasounds, CT Scans, and nuclear and vascular studies.

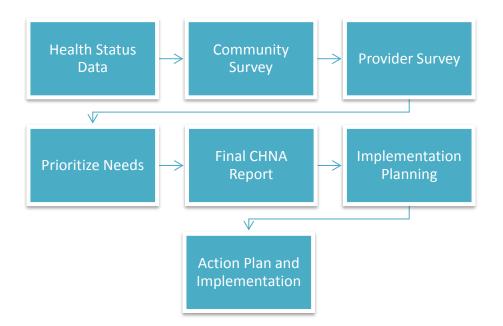
McLeod Medical Center Dillon, a member of the McLeod Health network, has been serving Dillon County for 70 years. Dillon County residents have looked to McLeod Dillon to meet their health care needs. During this time, McLeod Dillon has expanded its clinical services and added new members to the medical, clinical and non-clinical staff to meet the changing needs of the citizens we serve. Providing our community with a level of care rarely found outside large urban hospitals is among our most recognized achievements at McLeod Dillon.

OVERVIEW

This Community Health Needs Assessment serves as a tool to evaluate the overall health status, behaviors and needs of Dillon County. The March 2010 passage of the Patient Protection and Affordable Care Act (ACA) introduced reporting requirements for private, not-for-profit hospitals. To meet these new federal requirements, the information gathered in this assessment is used to guide the strategic planning process in addressing health disparities.

A Community Health Needs Assessment gives information to health care providers to make decisions and commit resources to areas of greatest need, making the greatest impact on community health status.

This assessment incorporates data from within the community, such as individuals served and health organizations, as well as vital statistics and other existing health-related data to develop a tailored plan which targets the needs of the county. The Community Health Needs Assessment includes:



METHODS

An assessment team comprised of McLeod Health's Community Health and Communication and Public Information staff reviewed literature, data and publications from public sources. Members of the assessment team represented each of the seven acute care hospital facilities within McLeod Health and were assigned to collect data that represented indicators of community health status or its socioeconomic determinants. Therefore, focus was placed on identifying locally-appropriate indicators, benchmarks, and pertinent health issues.

Pre-existing databases containing local, state and national health and behavior data were used for comparisons when possible. Sources of this data are listed at the end of this document.

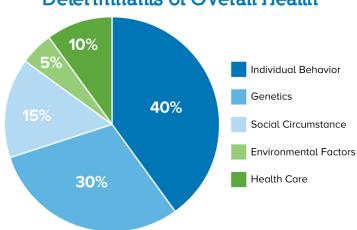
Data collection was limited to the most recent publicly available resources and some primary data from qualitative and quantitative investigation. As a result, this document portrays a partial picture of the health status of the community served.

Data analysis included demographic, socioeconomic and health determinant measures. When possible, data also was analyzed according to age, gender and/or race to offer insight into health disparities that may affect specific subgroups in the community. A summary of county data is reflected as a comparison to state and national data when available to indicate community health concerns.

HEALTH DETERMINANTS AND DISPARITIES

What are the determinants of health?

Health behaviors had the majority overall impact on future health outcomes (i.e., smoking, diet, drug & alcohol use, physical activity, other lifestyle behaviors) and account for 40% of causes for premature death. Genetic predisposition is responsible for 30%, Social circumstances 15%, and Health care for only 10% (i.e., access to physician and other health services) of health risk for premature death.



Determinants of Overall Health

Source: We Can Do Better-Improving the Health of the American People, The New England Journal of Medicine, September 2007

Behavioral Determinants (40%)

Examples:

- Diet
- Physical activity

- Alcohol, cigarette, and other drug use
- Hand washing

Genetic Determinants (30%)

Examples:

- Age
- Sex
- HIV status
- Inherited conditions, such as sickle-cell anemia, hemophilia, and cystic fibrosis
- Carrying the BRCA1 or BRCA2 gene, which increases risk for breast and ovarian cancer
- Family history of heart disease, cancer, etc.

Social Determinants (15%)

Examples:

- Availability of resources to meet daily needs, such as educational and job opportunities, living wages, or healthful foods
- Social norms and attitudes, such as discrimination
- Exposure to crime, violence, and social disorder, such as the presence of trash
- Social support and social interactions
- Socioeconomic conditions, such as concentrated poverty
- Quality schools
- Transportation options
- Public safety

Health Care Determinants (10%)

Examples:

- Quality, affordability, and availability of services
- Lack of insurance coverage
- Limited language access

Environmental Determinants (5%)

Examples:

- Quality of food, water, and air
- Worksites, schools, and recreational settings
- Housing, homes, and neighborhoods
- Exposure to toxic substances and other physical hazards
- Physical barriers, especially for people with disabilities

What are health disparities?

"Health disparity" refers to a higher burden of illness, injury, disability, or mortality experienced by one population group relative to another group. Health disparities can involve the medical care differences between groups in health insurance coverage, access to care, and quality of care. While disparities are commonly viewed through the lens of race and ethnicity, they occur across many dimensions, including socioeconomic status, age, location, gender, and disability status. Poor health status is often linked with people without health insurance, those who have poor access of care (i.e., limited transportation), lower socioeconomic status, lower education obtainment, and those among racial minority groups. Beyond the provision of health care services, eliminating health disparities will necessitate behavioral, environmental, and social-level approaches to address issues such as insufficient education, inadequate housing, exposure to violence, and limited opportunities to earn a livable wage.

Health disparities have persisted across the nation and have been documented for many decades and, despite overall improvements in population health over time, many disparities have persisted and, in some cases, widened. Moreover, economic downturns contributed to a further widening of disparities.

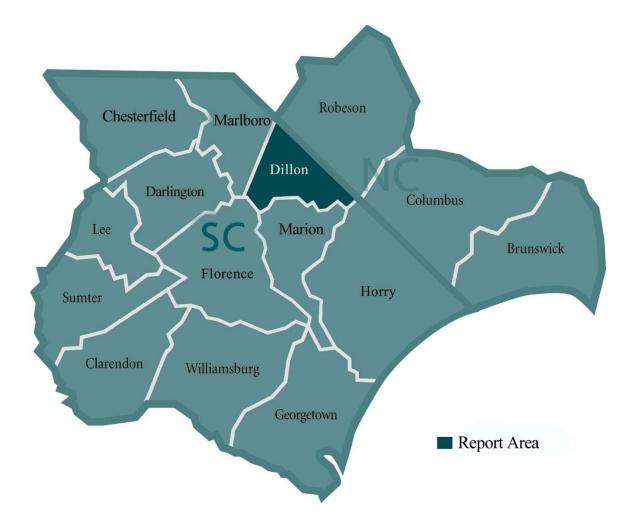
The Community Health Needs Assessment attempts to identify and quantify the health disparities within a defined county population that are at disproportionately higher in incidence of disease, disability, or at risk of experiencing worse health outcomes. Within these identified disparities and availability of health resources, gaps can be identified and prioritized based on need so that health resources can be targeted. Planning initiatives to address community health needs take in consideration the existing initiatives, the available resources that we are aware of, and where future improvements can be anticipated to make meaningful impact on improving community health.

What are Key Initiatives to reduce disparities?

In 2010, the U.S. Department of Health and Human Services (HHS) established a vision of, "a nation free of disparities in health and health care," and set out a series of priorities, strategies, actions, and goals to achieve this vision. States, local communities, private organizations, and providers also are engaged in efforts to reduce health disparities.

Federal, state, and local agencies and programs work along with local hospitals, often in cooperation, to provide access to needed health care services. Within constraints of limited resources, each of these entities generally target populations with specific services offered within the county. This study attempts to incorporate their input into determining the priorities among health disparities and look for opportunities for collaboration.

COMMUNITY DEFINED FOR THIS ASSESSMENT



The community was defined based on the geographic origins of McLeod Dillon inpatient and outpatient hospital data, the study area for this assessment is defined as Dillon County which represents the majority of patients served, to include the zip codes shown in Table 1.

ZIP Code	City	County
28340	Fairmont	Robeson, NC
28369	Orrum	Robeson, NC
28383	Rowland	Robeson, NC
29525	Clio	Marlboro
29536	Dillon	Dillon
29543	Fork	Dillon
29547	Hamer	Dillon
29563	Lake View	Dillon
29567	Little Rock	Dillon

Table 1. McLeod Dillon Primary Service Area ZIP Codes

Demographics

Current population demographics and changes in demographic composition over time play a determining role in the types of health and social services needed by communities.

The following information represents indicators of health status. The gauge displays, where available, compare local data to state and national data. A green needle on the gauge indicates the county is performing above the state and national data. A red needle indicates the county is performing below the state and national data.

Total Population

A total of 31,073 people live in the 405.07 square mile report area defined for this assessment according to the U.S. Census Bureau American Community Survey 2013-17 5-year estimates.

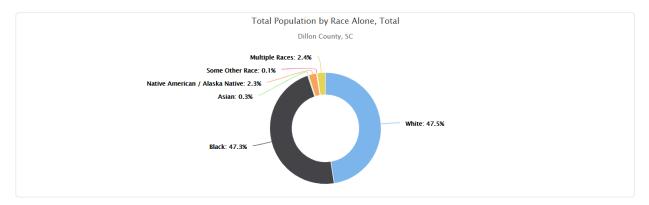
The population density for this area, estimated at 76.71 persons per square mile, is less than the national average population density of 90.88 persons per square mile.

Report Area	Total Population	Total Land Area (Square Miles)	Population Density (Per Square Mile)
Dillon County, SC	31,073	405.07	76.71
South Carolina	4,893,444	30,062.97	162.77
United States	321,004,407	3,532,315.66	90.88

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract → Show more details

Total Population by Race Alone, Total

Report Area	White	Black	Asian	Native American / Alaska Native	Native Hawaiian / Pacific Islander	Some Other Race	Multiple Races
Dillon County, SC	14,754	14,707	100	714	6	42	750
South Carolina	3,292,598	1,332,110	71,994	14,992	3,015	74,328	104,407
United States	234,370,202	40,610,815	17,186,320	2,632,102	570,116	15,553,808	10,081,044



Population in Limited English Households

This indicator reports the percentage of the population aged 5 and older living in Limited English speaking households. A "Limited English speaking household" is one in which no member 14 years old and over (1) speaks only English at home or (2) speaks a language other than English at home and speaks English "Very well." This indicator is significant as it identifies households and populations that may need English-language assistance.

28,930	491	1.79	б
4,603,480	76,656	1.679	%
1,150,892	13,323,495	4.429	%
	1,150,892 age.	age.	

Social & Economic Factors

Economic and social insecurity often are associated with poor health. Poverty, unemployment, and lack of educational achievement affect access to care and a community's ability to engage in healthy behaviors. Without a network of support and a safe community, families cannot thrive. Ensuring access to social and economic resources provides a foundation for a healthy community.

Education - Bachelor's Degree or Higher

11.17% of the population aged 25 and older, or 2,274 have obtained an Bachelor's level degree or higher. This indicator is relevant because educational attainment has been linked to positive health outcomes.

Report Area	Total Population Age 25+	Population Age 25+ with Bachelor's Degree or Higher	Percent Population Age 25+ with Bachelor's Degree or Higher	Percent Population Age 25+ with Bachelor's Degree or Higher
Dillon County, SC	20,367	2,274	11.17%	
South Carolina	3,325,601	898,081	27.01%	0% 100% Dillon County (11.17%)
United States	216,271,644	66,887,603	30.93%	 South Carolina (27.01%) United States (30.93%)

Note: This indicator is compared to the state average.

Data Source: US Census Bureau, American Community Survey. 2013-17. Source geography: Tract \rightarrow Show more details

Education - High School Graduation Rate

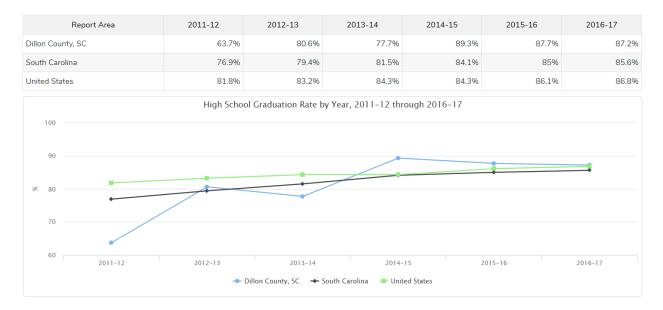
Within the report area 87.1% of students are receiving their high school diploma within four years. Data represents the 2016-17 school year.

This indicator is relevant because research suggests education is one the strongest predictors of health (Freudenberg & Ruglis, 2007).

Report Area	Total Student Cohort	Estimated Number of Diplomas Issued	Cohort Graduation Rate	Cohort Graduation Rat
Dillon County, SC	389	339	87.1%	
South Carolina	49,427	42,320	85.6%	
Jnited States	3.095,906	2.688.701	86.8%	

High School Graduation Rate by Year, 2011-12 through 2016-17

The table below shows local, state, and National trends in cohort graduation rates. Note: Data for some states are omitted each year when they fail to meet federal reporting standards or deadlines. Use caution when comparing national trends as the "universe" population may differ over time.



Income - Median Household Income

This indicator reports median household income based on the latest 5-year American Community Survey estimates. This includes the income of the householder and all other individuals 15 years old and over in the household, whether they are related to the householder or not. Because many households consist of only one person, average household income is usually less than average family income.

Report Area	Total Households	Average Household Income	Median Household Income	Median Household Incor
Dillon County, SC	10,945	\$41,502.00	\$30,866.00	
South Carolina	1,871,307	\$66,759.00	\$48,781.00	
Jnited States	118.825.921	\$81,283.00	\$57.652.00	

Poverty - Population Below 100% FPL

Poverty is considered a key driver of health status.

Within the report area 30.62% or 9,381 individuals are living in households with income below the Federal Poverty Level (FPL). This indicator is relevant because poverty creates barriers to access including health services, healthy food, and other necessities that contribute to poor health status.



Dillon County, SC

Physical Environment

A community's health also is affected by the physical environment. A safe, clean environment that provides access to healthy food and recreational opportunities is important to maintaining and improving community health.

Air Quality - Respiratory Hazard Index

This indicator reports the non-cancer respiratory hazard index score. This score represents the potential for non-cancer adverse health effects, where scores less than 1.0 indicate adverse health effects are unlikely, and scores of 1.0 or more indicate a potential for adverse health effects.

Report Area	Total Population	Respiratory Hazard Index Score
Dillon County, SC	32,062	1.37
South Carolina	4,625,357	1.63
United States	312,576,287	1.83

Data Source: EPA National Air Toxics Assessment. → Show more details

Food Environment - Grocery Stores

This indicator reports the number of grocery stores per 100,000 population. Grocery stores are defined as supermarkets and smaller grocery stores primarily engaged in retailing a general line of food, such as canned and frozen foods; fresh fruits and vegetables; and fresh and prepared meats, fish, and poultry. Included are delicatessen-type establishments. Convenience stores and large general merchandise stores that also retail food, such as supercenters and warehouse club stores are excluded. This indicator is relevant because it provides a measure of healthy food access and environmental influences on dietary behaviors.

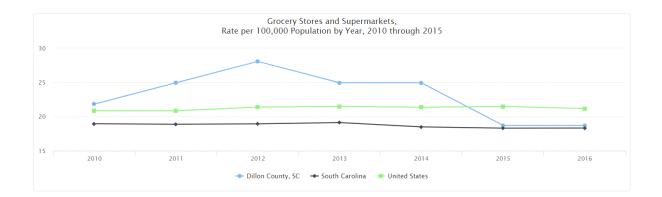


Data Source: US Census Bureau, County Business Patterns, Additional data analysis by CARES, 2016, Source geography; ZCTA → Show more details

Grocery Stores and Supermarkets, Rate per 100,000 Population by Year, 2010 through 2015

Report Area	2010	2011	2012	2013	2014	2015	2016
Dillon County, SC	21.83	24.95	28.07	24.95	24.95	18.71	18.71
South Carolina	18.96	18.87	18.94	19.13	18.49	18.31	18.33
United States	20.85	20.85	21.39	21.47	21.37	21.47	21.18

South Carolina (18.33) United States (21,18)



Food Environment - SNAP-Authorized Food Stores

This indicator reports the number of SNAP-authorized food stores as a rate per 10,000 population. SNAP-authorized stores include grocery stores as well as supercenters, specialty food stores, and convenience stores that are authorized to accept SNAP (Supplemental Nutrition Assistance Program) benefits.



Clinical Care

A lack of access to care presents barriers to good health. The supply and accessibility of facilities and physicians, the rate of uninsured, financial hardship, transportation barriers, cultural competency, and coverage limitations affect access.

Rates of morbidity, mortality, and emergency hospitalizations can be reduced if community residents access services such as health screenings, routine tests, and vaccinations. Prevention indicators can call attention to a lack of access or knowledge regarding one or more health issues and can inform program interventions.

30-Day Hospital Readmissions

This indicator reports the percentage of Medicare fee-for-service beneficiaries readmitted to a hospital within 30 days of an initial hospitalization discharge.

Report Area	Medicare Part A and B Beneficiaries	Rate of 30-Day Hospital Readmissions among Medicare Beneficiaries	Rate of 30-Day Hospital Readmissions among Medicare
Dillon County, SC	422	20.1	Beneficiaries
South Carolina	52,069	14.5	
United States	2,885,032	14.9	
	mpared to the state average.		0 25 Dillon County, SC (20.1)

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. -> Show more details

Access to Dentists

This indicator reports the number of dentists per 100,000 population. This indicator includes all dentists - qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.), who are licensed by the state to practice dentistry and who are practicing within the scope of that license.

Report Area	Total Population, 2015	Dentists, 2015	Dentists, Rate per 100,000 Pop.	Dentists, Rate per 100,000 Pop.
Dillon County, SC	31,234	8	25.61	
South Carolina	4,896,146	2,549	52.1	
United States	321,418,820	210,832	65.6	
				0 300

Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File. 2015. Source geography: County → Show more details

Access to Dentists, Rate (Per 100,000 Pop.) by Year, 2010 through 2015

This indicator reports the rate of dentists per 100,000 population by year.

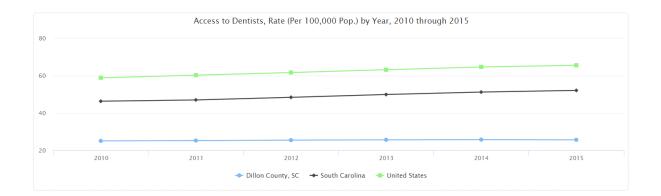
Report Area	2010	2011	2012	2013	2014	2015
Dillon County, SC	25	25.2	25.4	25.6	25.7	25.6
South Carolina	46.3	47	48.4	49.9	51.2	52.1
United States	58.9	60.3	61.7	63.2	64.7	65.6

South Carolina (14.5) United States (14.9)

Dillon County (25.61)

South Carolina (52.1)

United States (65.6)



Access to Mental Health Providers

This indicator reports the rate of the county population to the number of mental health providers including psychiatrists, psychologists, clinical social workers, and counsellors that specialize in mental health care.



Note: This indicator is compared to the state average

Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2017. Source geography: County → Show more details

Access to Primary Care

This indicator reports the number of primary care physicians per 100,000 population. Doctors classified as "primary care physicians" by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Report Area	Total Population, 2014	Primary Care Physicians, 2014	Primary Care Physicians, Rate per 100,000 Pop.	Primary Care Physicians, Rate p 100,000 Pop.
Dillon County, SC	31,127	19	61.04	
South Carolina	4,832,482	3,689	76.3	
Jnited States	318,857,056	279,871	87.8	
ata. This indicator is as	mpared to the state average.			0 300
		Health Resources and Services Administration	, Area Health Resource File. 2014. Source geography: County \rightarrow	 Dillon County (61.04) South Carolina (76.3) United States (87.8)

Access to Primary Care, Rate (Per 100,000 Pop.) by Year, 2004 through 2014

This indicator reports the rate of primary care physicians per 100,000 population by year.



Diabetes Management - Hemoglobin A1c Test

This indicator reports the percentage of diabetic Medicare patients who have had a hemoglobin A1c (hA1c) test, a blood test which measures blood sugar levels, administered by a health care professional in the past year. In the report area, 418 Medicare enrollees with diabetes have had an annual exam out of 511 Medicare enrollees in the report area with diabetes, or 82%. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

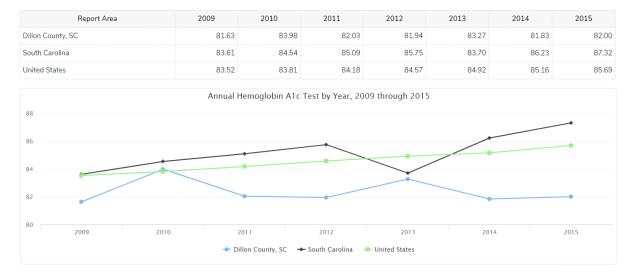
Report Area	Total Medicare Enrollees	Medicare Enrollees with Diabetes	Medicare Enrollees with Diabetes with Annual Exam	Percent Medicare Enrollees with Diabetes with Annual Exam
)illon County, SC	3,305	511	418	82%
outh arolina	550,660	70,300	61,388	87.3%
Inited tates	26,937,083	2,919,457	2,501,671	85.7%

Note: This indicator is compared to the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: County → Show more details

Annual Hemoglobin A1c Test by Year, 2009 through 2015

Percent of Medicare Beneficiaries with Diabetes with Annual Hemoglobin A1c Test



Federally Qualified Health Centers

This indicator reports the number of Federally Qualified Health Centers (FQHCs) in the community. This indicator is relevant because FQHCs are community assets that provide health care to vulnerable populations; they receive extra funding from the federal government to promote access to ambulatory care in areas designated as medically underserved.

Report Area	Total Population	Number of Federally Qualified Health Centers	Rate of Federally Qualified Health Centers per 100,000 Population
Dillon County, SC	32,062	3	9.36
South Carolina	4,625,364	187	4.04
United States	312,471,327	8,768	2.81

Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Center for Medicare & Medicaid Services, Provider of Services File. December 2018. Source geography: Address \rightarrow Show more details

Health Professional Shortage Areas

This indicator reports the number and location of health care facilities designated as "Health Professional Shortage Areas" (HPSAs), defined as having shortages of primary medical care, dental or mental health providers. This indicator is relevant because a shortage of health professionals contributes to access and health status issues.

Report Area	Primary Care Facilities	Mental Health Care Facilities	Dental Health Care Facilities	Total HPSA Facility Designations
Dillon County, SC	0	0	0	0
South Carolina	49	48	47	144
United States	3,599	3,171	3,071	9,836

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, Health Resources and Services Administration. February 2019. Source geography: Address

Show more details

Preventable Hospital Visits

This indicator reports the discharge rate (per 1,000 Medicare enrollees) for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients. This indicator is relevant because analysis of ACS discharges allows demonstrating a possible "return on investment" from interventions that reduce admissions (for example, for uninsured or Medicaid patients) through better access to primary care resources.

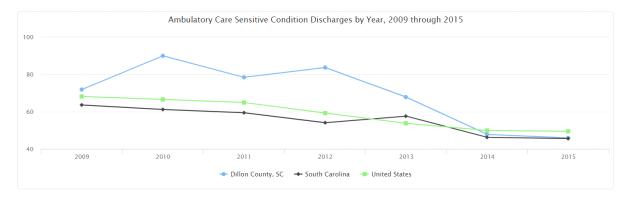
Report Area	Total Medicare Part A Enrollees	Ambulatory Care Sensitive Condition Hospital Discharges	Ambulatory Care Sensitive Condition Discharge Rate	Preventable Hospital Events, Ag Adjusted Discharge Rate (Per 1,000 Medicare Enrollees)
Dillon County, SC	2,545	116	45.9	
South Carolina	434,703	19,801	45.6	
United States	22,488,201	1,112,019	49.4	0 150 Dillon County, SC (45.9) South Carolina (45.6)
te: This indicator i	is compared to the state average.			United States (49.4)

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: County -> Show more details

Ambulatory Care Sensitive Condition Discharges by Year, 2009 through 2015

Rate of Ambulatory Care Sensitive Condition Discharges (per 1,000 Medicare Part A Beneficiaries)

Report Area	2009	2010	2011	2012	2013	2014	2015
Dillon County, SC	71.91	90.02	78.46	83.71	67.83	47.80	45.93
South Carolina	63.62	61.20	59.44	54.08	57.60	46.23	45.55
United States	68.16	66.58	64.93	59.29	53.76	49.90	49.45



Prevention - Mammogram

This indicator reports the percentage of female Medicare enrollees, age 67-69, who have received one or more mammograms in the past two years. This indicator is relevant because engaging in preventive behaviors allows for early detection and treatment of health problems. This indicator can also highlight a lack of access to preventive care, a lack of health knowledge, insufficient provider outreach, and/or social barriers preventing utilization of services.

Report Area	Total Medicare Enrollees	Female Medicare Enrollees Age 67-69	Female Medicare Enrollees with Mammogram in Past 2 Years	Percent Female Medicare Enrollees with Mammogram in Past 2 Year	Percent Female Medica Enrollees with Mammogra Past 2 Year
Dillon County, SC	3,305	343	189	55.4%	
South Carolina	550,660	58,753	39,850	67.8%	0% 10 • Dillon County (55.4)
United States	26,937,083	2,544,732	1,607,329	63.2%	 South Carolina (67.4) United States (63.29)

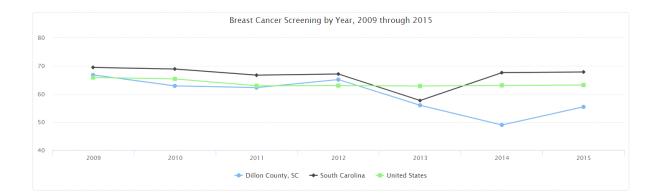
Note: This indicator is compared to the state average.

Data Source: Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care. 2015. Source geography: County \rightarrow Show more details

Breast Cancer Screening by Year, 2009 through 2015

Percent of Female Medicare Beneficiaries Age 67-69 with Mammogram trend

Report Area	2009	2010	2011	2012	2013	2014	2015
Dillon County, SC	66.77	62.88	62.27	65.11	55.97	48.95	55.39
South Carolina	69.46	68.89	66.69	67.10	57.67	67.59	67.83
United States	65.87	65.37	62.90	62.98	62.82	63.06	63.16



Health Behaviors

Health behaviors such as poor diet, a lack of exercise, and substance abuse contribute to poor health status.

Alcohol Consumption

This indicator reports the percentage of adults aged 18 and older who self-report heavy alcohol consumption (defined as more than two drinks per day on average for men and one drink per day on average for women). This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as cirrhosis, cancers, and untreated mental and behavioral health needs.

Report Area	Total Population Age 18+	Estimated Adults Drinking Excessively	Estimated Adults Drinking Excessively (Crude Percentage)	Estimated Adults Drinking Excessively (Age-Adjusted Percentage)	Estimated Adults Drini Excessively (Age–Adjusted Percent
Dillon County, SC	23,232	2,207	9.5%	10.1%	
South Carolina	3,500,728	500,604	14.3%	14.9%	0%
United States	232,556,016	38,248,349	16.4%	16.9%	 Dillon County (10. South Carolina (14 United States (16.5)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12. Source geography: County → Show more details

Breastfeeding - Ever

This indicator reports the percentage children under 6 years old who were ever breastfed or fed breast milk.

Report Area	Estimated Number of Children Ever Breastfed Total Population	Percentage of Children Ever Breastfed Total Population	Estimated Number of Children Ever Breastfed SNAP-Ed Population	Percentage of Children Ever Breastfed SNAP-Ed Population
South Carolina	248,172	74%	97,440	63%
United States	18,402,779	79%	6,364,329	69%

Physical Inactivity

Within the report area, 7,736 or 33.3% of adults aged 20 and older self-report no leisure time for activity, based on the question: "During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?". This indicator is relevant because current behaviors are determinants of future health and this indicator may illustrate a cause of significant health issues, such as obesity and poor cardiovascular health.

Report Area	Total Population Age 20+	Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity	Percent Population with no Leisure Time Physical Activity
Dillon County, SC	22,488	7,736	33.3%	
South Carolina	3,674,036	907,850	23.9%	0% 50%
United States	238,798,321	52,960,511	21.6%	 Dillon County (33.3%) South Carolina (33.0%)

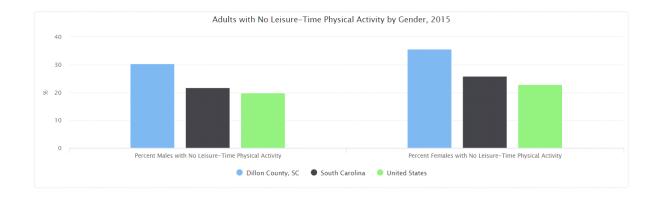


Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2015. Source geography: County -> Show more details

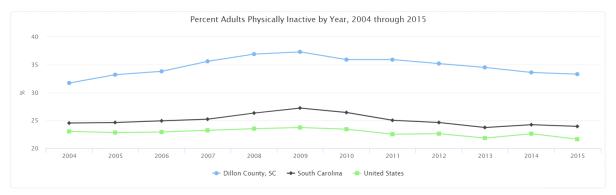
Adults with No Leisure-Time Physical Activity by Gender, 2015

Report Area	Total Males with No Leisure-Time Physical Activity	Percent Males with No Leisure-Time Physical Activity	Total Females with No Leisure-Time Physical Activity	Percent Females with No Leisure-Time Physical Activity
Dillon County, SC	3,241	30.5%	4,495	35.7%
South Carolina	389,165	21.7%	518,684	25.9%
United States	23,655,542	20%	29,304,977	23%



Percent Adults Physically Inactive by Year, 2004 through 2015

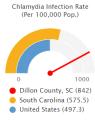
Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Dillon County, SC	31.7%	33.2%	33.8%	35.6%	36.9%	37.3%	35.9%	35.9%	35.2%	34.5%	33.6%	33.3%
South Carolina	24.5%	24.6%	24.9%	25.2%	26.3%	27.2%	26.4%	25%	24.6%	23.7%	24.2%	23.9%
United States	23%	22.8%	22.9%	23.2%	23.5%	23.7%	23.4%	22.5%	22.6%	21.8%	22.6%	21.6%



STI - Chlamydia Incidence

This indicator reports incidence rate of chlamydia cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

Report Area	Total Population	Total Chlamydia Infections	Chlamydia Infections, Rate (Per 100,000 Pop.)
Dillon County, SC	31,234	263	842
South Carolina	4,896,146	28,179	575.5
United States	321,418,820	1,598,354	497.3

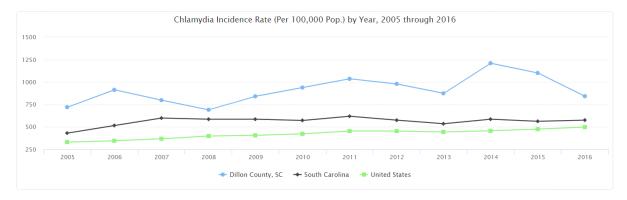


Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2016. Source geography: County → Show more details

Chlamydia Incidence Rate (Per 100,000 Pop.) by Year, 2005 through 2016

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Dillon County, SC	719.96	913.37	798.2	690.6	841.1	938.81	1,035.96	979.28	874.19	1,210.41	1,101.36	842.03
South Carolina	430.39	515.7	598.38	585.25	585.25	572.11	619.06	574.77	534.8	585.5	562.44	575.53
United States	330.3	345.4	367.7	398	405.7	422.8	453.4	453.4	443.5	456.1	474.97	497.28



STI - Gonorrhea Incidence

This indicator reports incidence rate of Gonorrhea cases per 100,000 population. This indicator is relevant because it is a measure of poor health status and indicates the prevalence of unsafe sex practices.

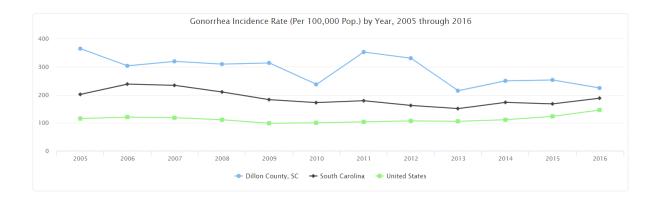
Report Area	Total Population	Total Gonorrhea Infections	Gonorrhea Infections, Rate (Per 100,000 Pop.)	(Per 100,000 Pop.)
Dillon County, SC	31,234	70	224.1	
South Carolina	4,896,146	9,194	187.8	
Jnited States	321,418,820	468,514	145.8	0 700

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2016. Source geography: County \rightarrow Show more details

Gonorrhea Incidence Rate (Per 100,000 Pop.) by Year, 2005 through 2016

Report Area	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Dillon County, SC	364.82	303.38	319.28	309.47	313.79	237.04	352.67	330.63	214.54	249.77	252.93	224.11
South Carolina	201.39	238.11	233.78	209.93	182.64	171.9	178.67	161.7	150.7	172.8	167.6	187.78
United States	114.9	120.1	118.1	110.7	98.2	100	103.3	106.7	105.3	110.7	122.96	145.76

United States (145.8)



STI - HIV Prevalence

This indicator reports prevalence rate of HIV per 100,000 population. This indicator is relevant because HIV is a life-threatening communicable disease that disproportionately affects minority populations and may also indicate the prevalence of unsafe sex practices.

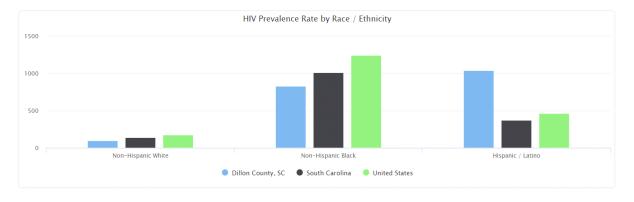


Note: This indicator is compared to the state average.

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. 2015. Source geography: County → Show more details

HIV Prevalence Rate by Race / Ethnicity

Report Area	Non-Hispanic White	Non-Hispanic Black	Hispanic / Latino
Dillon County, SC	96.05	831.22	1,041.67
South Carolina	139.1	1,013.97	369.98
United States	174	1,243.8	462



South Carolina (394.6)

United States (362.3)

Tobacco Usage - Current Smokers

In the report area an estimated 4,902, or 21.1% of adults age 18 or older self-report currently smoking cigarettes some days or every day. This indicator is relevant because tobacco use is linked to leading causes of death such as cancer and cardiovascular disease.

Report Area	Total Population Age 18+	Total Adults Regularly Smoking Cigarettes	Percent Population Smoking Cigarettes (Crude)	Percent Population Smoking Cigarettes (Age-Adjusted)	Percentage of Adults Smok Cigarettes
Dillon County, SC	23,232	4,902	21.1%	21.7%	
South Carolina	3,500,728	710,648	20.3%	20.6%	0% 309 Dillon County (21.7%
United States	232,556,016	41,491,223	17.8%	18.1%	 Dilion County (21.7%) South Carolina (20.6%) United States (18.1%)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12. Source geography: County → Show more details

Health Outcomes

Measuring morbidity and mortality rates allows assessing linkages between social determinants of health and outcomes. By comparing, for example, the prevalence of certain chronic diseases to indicators in other categories (e.g., poor diet and exercise) with outcomes (e.g., high rates of obesity and diabetes), various causal relationship may emerge, allowing a better understanding of how certain community health needs may be addressed.

Asthma Prevalence

This indicator reports the percentage of adults aged 18 and older who self-report that they have ever been told by a doctor, nurse, or other health professional that they had asthma. This indicator is relevant because asthma is a prevalent problem in the U.S. that is often exacerbated by poor environmental conditions.

Report Area	Survey Population (Adults Age 18+)	Total Adults with Asthma	Percent Adults with Asthma
Dillon County, SC	20,742	3,532	17%
South Carolina	3,526,734	456,596	12.9%
United States	237,197,465	31,697,608	13.4%

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County → Show more details

South Carolina (12.9%)

United States (13.4%)

Cancer Incidence - All Sites

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.



Cancer Incidence - All Sites

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of females with breast cancer adjusted to 2000 U.S. standard population age groups (Under Age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.

Report Area	Estimated Total Population (Female)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)
Dillon County, SC	1,971	21	106.5
South Carolina	299,688	3,845	128.3
United States	18,800,721	234,445	124.7

Note: This indicator is compared to the state average.

Data Source: State Cancer Profiles. 2011-15. Source geography: County \rightarrow Show more details

Cancer Incidence - Colon and Rectum

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of colon and rectum cancer adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.

um Cancer Rate) Pop.)
100
/

Cancer Incidence - Lung

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of colon and rectum cancer adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.



Cancer Incidence - Prostate

This indicator reports the age adjusted incidence rate (cases per 100,000 population per year) of males with prostate cancer adjusted to 2000 U.S. standard population age groups (Under age 1, 1-4, 5-9, ..., 80-84, 85 and older). This indicator is relevant because cancer is a leading cause of death and it is important to identify cancers separately to better target interventions.

Report Area	Estimated Total Population (Male)	New Cases (Annual Average)	Cancer Incidence Rate (Per 100,000 Pop.)	Prostate Cancer Incidence F (Per 100,000 Pop.)
Dillon County, SC	1,645	22	133.7	
South Carolina	281,658	3,363	119.4	
United States	17,489,816	190,639	109	0 200

Data Source: State Cancer Profiles. 2011-15. Source geography: County → Show more details

United States (109)

Depression (Medicare Population)

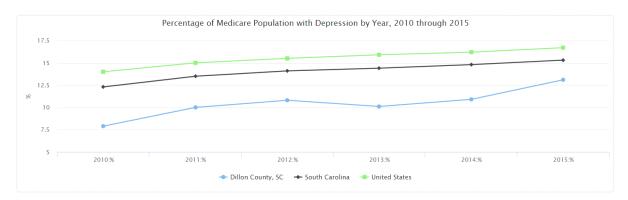
This indicator reports the percentage of the Medicare fee-for-service population with depression.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Depression	Percent with Depression	Percentage of Medicare Beneficiaries with Depression
Dillon County, SC	4,452	581	13.1%	
South Carolina	691,524	105,719	15.3%	
United States	34,118,227	5,695,629	16.7%	
	pared to the state average. Addicare and Medicaid Services. 2015. Source geography: County	v → Show more details		0% 60% Dillon County (13.1%) South Carolina (15.3%)

Percentage of Medicare Population with Depression by Year, 2010 through 2015

This indicator reports the percentage trend of the Medicare fee-for-service population with depression over time.

Report Area	2010	2011	2012	2013	2014	2015
Dillon County, SC	7.9%	10%	10.8%	10.1%	10.9%	13.1%
South Carolina	12.3%	13.5%	14.1%	14.4%	14.8%	15.3%
United States	14%	15%	15.5%	15.9%	16.2%	16.7%

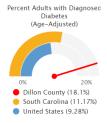


Diabetes (Adult)

This indicator reports the percentage of adults aged 20 and older who have ever been told by a doctor that they have diabetes. This indicator is relevant because diabetes is a prevalent problem in the U.S.; it may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.

United States (16.7%)

Report Area	Total Population Age 20+	Population with Diagnosed Diabetes	Population with Diagnosed Diabetes, Age-Adjusted Rate
Dillon County, SC	22,460	4,582	18.1%
South Carolina	3,675,498	463,200	11.17%
United States	241,492,750	24,722,757	9.28%

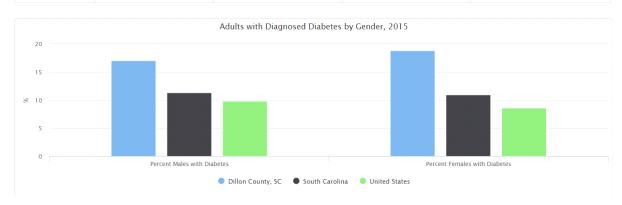


Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. 2015. Source geography: County - Show more details

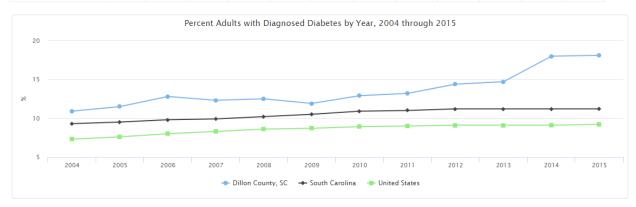
Adults with Diagnosed Diabetes by Gender, 2015

Report Area	Total Males with Diabetes	Percent Males with Diabetes	Total Females with Diabetes	Percent Females with Diabetes
Dillon County, SC	1,953	17.1%	2,629	18.9%
South Carolina	221,906	11.4%	241,297	11%
United States	12,333,249	9.9%	11,950,019	8.6%



Percent Adults with Diagnosed Diabetes by Year, 2004 through 2015

Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Dillon County, SC	10.9%	11.5%	12.8%	12.3%	12.5%	11.9%	12.9%	13.2%	14.4%	14.7%	18%	18.1%
South Carolina	9.3%	9.5%	9.8%	9.9%	10.2%	10.5%	10.9%	11%	11.2%	11.2%	11.2%	11.2%
United States	7.3%	7.6%	8%	8.3%	8.6%	8.7%	8.9%	9%	9.1%	9.1%	9.1%	9.2%



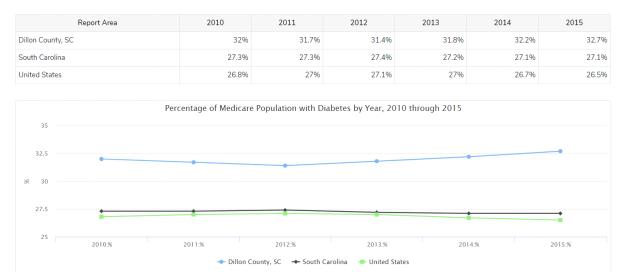
Diabetes (Medicare Population)

	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Diabetes	Percent with Diabetes	Percentage of Medicare Beneficiaries with Diabet
Dillon County, SC	4,452	1,458	32.75%	
South Carolina	691,524	187,643	27.13%	
Jnited States	34,118,227	9,057,809	26.55%	

This indicator reports the percentage of the Medicare fee-for-service population with diabetes.

Percentage of Medicare Population with Diabetes by Year, 2010 through 2015

This indicator reports the percentage trend of the Medicare fee-for-service population with diabetes over time.



Heart Disease (Adult)

1,107, or 5.5% of adults aged 18 and older have ever been told by a doctor that they have coronary heart disease or angina. This indicator is relevant because coronary heart disease is a leading cause of death in the U.S. and is also related to high blood pressure, high cholesterol, and heart attacks.

Report Area	Survey Population (Adults Age 18+)	Total Adults with Heart Disease	Percent Adults with Heart Disease	
Dillon County, SC	20,215	1,107	5.5%	
South Carolina	3,509,878	163,079	4.6%	
United States	236,406,904	10,407,185	4.4%	0% 15%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES. 2011-12. Source geography: County → Show more details

Heart Disease (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with ischaemic

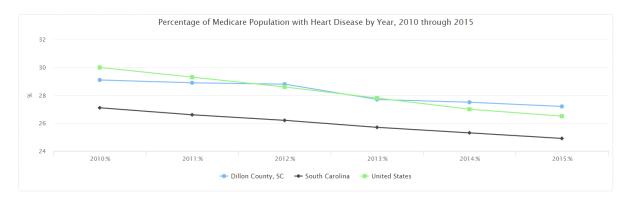
heart disease.

Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with Heart Disease	Percent with Heart Disease	Percentage of Medicare Beneficiaries with Heart Disease
Dillon County, SC	4,452	1,211	27.2%	
South Carolina	691,524	172,428	24.93%	
United States	34,118,227	9,028,604	26.46%	
Noto: This indicator is as	mpared to the state average.			0% 60%
	Medicare and Medicaid Services. 2015. Source geography: Co	$unty \rightarrow$ Show more details		 Dillon County (27.2%) South Carolina (24.93%)

Percentage of Medicare Population with Heart Disease by Year, 2010 through 2015

This indicator reports the percentage trend of the Medicare fee-for-service population with ischaemic heart disease over time.

Report Area	2010	2011	2012	2013	2014	2015
Dillon County, SC	29.1%	28.9%	28.8%	27.7%	27.5%	27.2%
South Carolina	27.1%	26.6%	26.2%	25.7%	25.3%	24.9%
United States	30%	29.3%	28.6%	27.8%	27%	26.5%



United States (26.46%)

High Blood Pressure (Adult)

9,665, or 41.6% of adults aged 18 and older have ever been told by a doctor that they have high blood pressure or hypertension.

Report Area	Total Population (Age 18+)	Total Adults with High Blood Pressure	Percent Adults with High Blood Pressure	Percent Adults with High Bl Pressure
Dillon County, SC	23,232	9,665	41.6%	
South Carolina	3,500,728	1,106,230	31.6%	
United States	232,556,016	65,476,522	28.16%	0% 509
	npared to the state average. Disease Control and Preventio	on, Behavioral Risk Factor Surveillance System. Accessed	via the Health Indicators Warehouse. US Department of	 Dillon County (41.6% South Carolina (31.6% United States (28.16%)

Depa Health & Human Services, Health Indicators Warehouse. 2006-12. Source geography: County → Show more details

High Blood Pressure (Medicare Population)

This indicator reports the percentage of the Medicare fee-for-service population with

hypertension (high blood pressure).

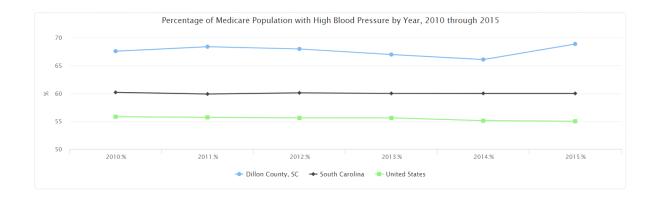
Report Area	Total Medicare Fee-for-Service Beneficiaries	Beneficiaries with High Blood Pressure	Percent with High Blood Pressure	Percentage of Medicare Beneficiaries with High Bloo
Dillon County, SC	4,452	3,068	68.91%	Pressure
South Carolina	691,524	414,573	59.95%	
United States	34,118,227	18,761,681	54.99%	
	compared to the state average. or Medicare and Medicaid Services, 2015. Source geogra	aphy: County → Show more details		0% 80% Dillon County (68.91%) South Carolina (59.95% United States (54.99%)

Percentage of Medicare Population with High Blood Pressure by Year, 2010 through 2015

This indicator reports the percentage trend of the Medicare fee-for-service population with

ischaemic heart disease over time.

Report Area	2010	2011	2012	2013	2014	2015
Dillon County, SC	67.6%	68.4%	68%	67%	66.1%	68.9%
South Carolina	60.2%	59.9%	60.1%	60%	60%	60%
United States	55.8%	55.7%	55.6%	55.6%	55.1%	55%



Infant Mortality

This indicator reports the rate of deaths to infants less than one year of age per 1,000 births. This indicator is relevant because high rates of infant mortality indicate the existence of broader issues pertaining to access to care and maternal and child health.



Low Birth Weight

This indicator reports the percentage of total births that are low birth weight (Under 2500g). This indicator is relevant because low birth weight infants are at high risk for health problems. This indicator can also highlight the existence of health disparities.

Report Area	Total Live Births	Low Weight Births (Under 2500g)	Low Weight Births, Percent of Total	
Dillon County, SC	3,374	442	13.1%	
South Carolina	418,684	41,450	9.9%	
United States	29,300,495	2,402,641	8.2%	0%

Data Source: US Department of Health & Human Services, Health Indicators Warehouse. Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2006-12. Source geography: County → Show more details

United States (8.2%)

Babies Born with Low Birth Weight, Percent by Time Period, 2002-2008 through 2006-2012

Report Area	2002-2008	2003-2009	2004-2010	2005-2011	2006-2012
Dillon County, SC	139	6 13.3%	13.4%	13.6%	13.1%
South Carolina	10.19	6 10.1%	10.1%	10%	9.9%
United States	8.19	6 8.1%	8.2%	8.2%	8.2%
14 12 38 10	•	•		•	•
8				•	
6 2002-		9 2004– Dillon County, SC 🔶 South Ca		05-2011	2006-2012

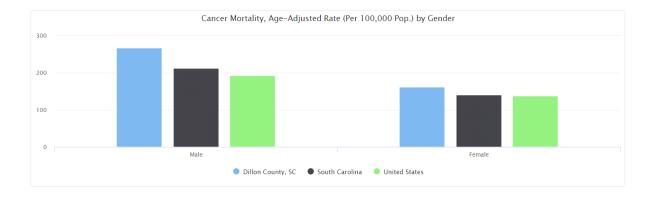
Mortality - Cancer

This indicator reports the rate of death due to malignant neoplasm (cancer) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are re-summarized for report areas from county level data, only where data is available. This indicator is relevant because cancer is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2012-2016	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Cancer Mortality, Age–Adjust Death Rate (Per 100,000 Pop.)
Dillon County, SC	31,179	75	241.8	203	
South Carolina	4,837,662	9,942	205.51	171.5	
United States	318,689,254	590,634	185.3	160.9	0 250
lote: This indicator is compa	red to the state average.	590,634 National Vital Statistics System. Accesse			0 Dillon Co South Ca United St

Cancer Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

Report Area	Male	Female
Dillon County, SC	267.58	162.1
South Carolina	213.27	141.41
United States	192.58	137.85



Mortality - Coronary Heart Disease

Within the report area the rate of death due to coronary heart disease (ICD10 Codes I20-I25) per 100,000 population is 147. This rate is greater than the Healthy People 2020 target of less than or equal to 103.4. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are re-summarized for report areas from county level data, only where data is available. This indicator is relevant because heart disease is a leading cause of death in the United States.

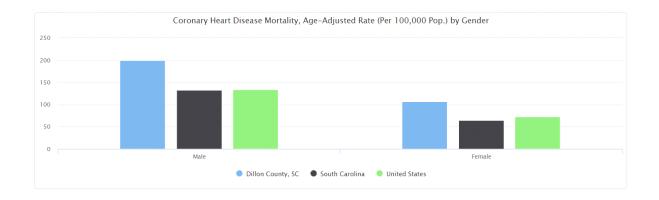
Report Area	Total Population	Average Annual Deaths, 2012-2016	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Coronary Heart Disease Mortality Age-Adjusted Death Rate (Per 100,000 Pop.)
Dillon County, SC	31,179	53	171.3	147	
South Carolina	4,837,662	5,270	108.94	94.16	
United States	318,689,254	367,306	115.3	99.6	0 200
Note: This indicator is com	pared to the state average.				 Dillon County, SC (147) South Carolina (94,16)

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County -> Show more details

Coronary Heart Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

Report Area	Male	Female
Dillon County, SC	199.66	106.73
South Carolina	132.26	64.66
United States	134.28	72.41

United States (99.6)



Mortality - Lung Disease

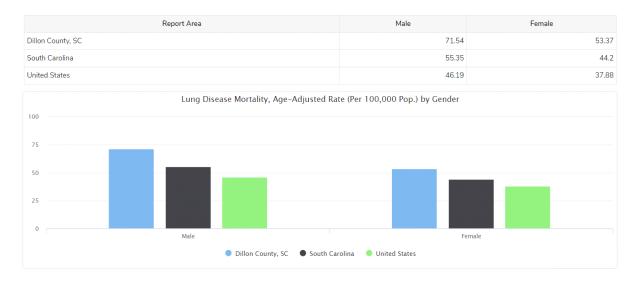
This indicator reports the rate of death due to chronic lower respiratory disease per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are re-summarized for report areas from county level data, only where data is available. This indicator is relevant because lung disease is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2012-2016	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Lung Disease Mortality, Age Adjusted Death Rate (Per 100,000 Pop.)
Dillon County, SC	31,179	23	72.5	61.4	
South Carolina	4,837,662	2,743	56.71	48.64	
United States	318,689,254	149,886	47	41.3	0 100
					Dillon County, SC (61.4)

Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County -> Show more details

Lung Disease Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender



South Carolina (48.64)

United States (41.3)

Mortality - Pedestrian Motor Vehicle Crash

This indicator reports the crude rate of pedestrians killed by motor vehicles per 100,000 population. This indicator is relevant because pedestrian-motor vehicle crash deaths are preventable and they are a cause of premature death.

Report Area	Total Population (2010)	Total Pedestrian Deaths, 2011-2015	Average Annual Deaths, Rate per 100,000 Pop.	Pedestrian Motor Venicie Mortality, Crude Death Rate (Per 100,000 Pop.)
Dillon County, SC	32,062	11	11.4	
South Carolina	4,625,364	645	4.6	
United States	312,732,537	28,832	3.1	0 20
				Dillon County, SC (11.4)

Note: This indicator is compared to the state average.

Data Source: US Department of Transportation, National Highway Traffic Safety Administration, Fatality Analysis Reporting System. 2011-2015. Source geography: County -> Show more details

.4) South Carolina (4.6) United States (3.1)

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Mortality - Premature Death

This indicator reports Years of Potential Life Lost (YPLL) before age 75 per 100,000 population for all causes of death, age-adjusted to the 2000 standard. YPLL measures premature death and is calculated by subtracting the age of death from the 75-year benchmark. This indicator is relevant because a measure of premature death can provide a unique and comprehensive look at overall health status.

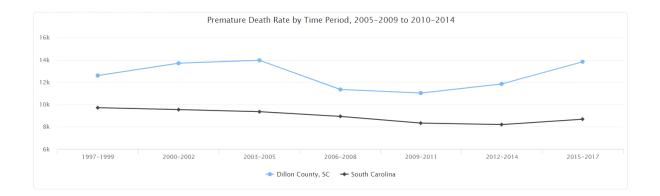
	2013-2017	2013-2017 Average	Rate per 100,000 Population	
86,830	680	12,006	13,827	
13,928,349	73,733	1,216,076	8,731	
908,082,355	3,744,894	63,087,358	6,947	5000 2000
	13,928,349	13,928,349 73,733	13,928,349 73,733 1,216,076	13,928,349 73,733 1,216,076 8,731

Data Source: University of Wisconsin Population Health Institute, County Health Rankings. 2015-17. Source geography: County -> Show more details

Premature Death Rate by Time Period, 2005-2009 to 2010-2014

Report Area	1997-1999	2000-2002	2003-2005	2006-2008	2009-2011	2012-2014	2015-2017
Dillon County, SC	12,591.5	13,696.4	13,959.5	11,341.44	11,020.9	11,844.6	13,827.21
South Carolina	9,707.6	9,538.1	9,347.9	8,932.05	8,328	8,197.4	8,678.14

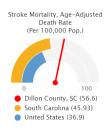
United States (6.947)



Mortality - Stroke

Within the report area there are an estimated 56.6 deaths due to cerebrovascular disease (stroke) per 100,000 population. This is greater than the Healthy People 2020 target of less than or equal to 33.8. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are re-summarized for report areas from county level data, only where data is available. This indicator is relevant because stroke is a leading cause of death in the United States.

Report Area	Total Population	Average Annual Deaths, 2012-2016	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)
Dillon County, SC	31,179	20	64.8	56.6
South Carolina	4,837,662	2,495	51.58	45.93
United States	318,689,254	134,618	42.2	36.9



Note: This indicator is compared to the state average

Data Source: Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER. 2012-16. Source geography: County -> Show more details



Stroke Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

Mortality - Unintentional Injury

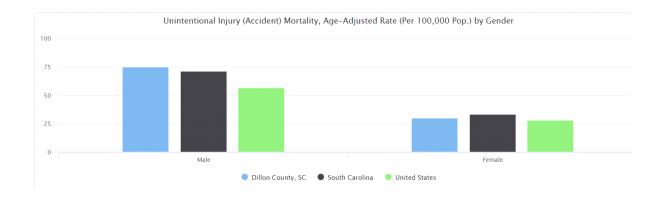
more details

This indicator reports the rate of death due to unintentional injury (accident) per 100,000 population. Figures are reported as crude rates, and as rates age-adjusted to year 2000 standard. Rates are re-summarized for report areas from county level data, only where data is available. This indicator is relevant because accidents are a leading cause of death in the U.S.

Report Area	Total Population	Average Annual Deaths, 2012-2016	Crude Death Rate (Per 100,000 Pop.)	Age-Adjusted Death Rate (Per 100,000 Pop.)	Unintentional Injury (Accider Mortality, Age-Adjusted Dea Rate (Per 100,000 Pop.)
illon County, SC	31,179	16	52.6	51.8	
outh Carolina	4,837,662	2,562	52.95	51.28	
Inited States	318,689,254	140.444	44.1	41.9	0 100

Unintentional Injury (Accident) Mortality, Age-Adjusted Rate (Per 100,000 Pop.) by Gender

Report Area	Male	Female
Dillon County, SC	75.27	30.13
South Carolina	71.15	33.19
United States	56.87	27.98



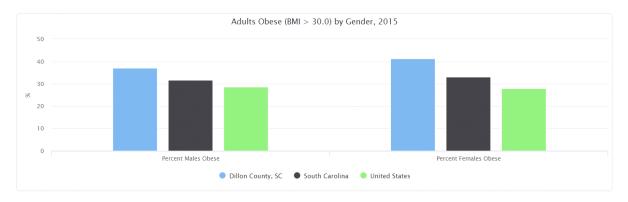
Obesity

39.3% of adults aged 20 and older self-report that they have a Body Mass Index (BMI) greater than 30.0 (obese) in the report area. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.



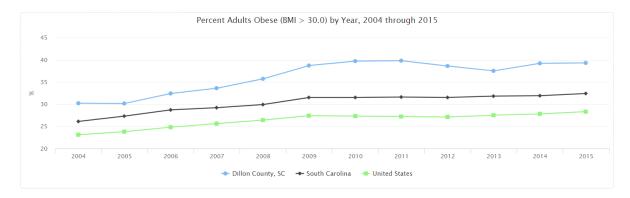
Adults Obese (BMI > 30.0) by Gender, 2015

Report Area	Total Males Obese	Percent Males Obese	Total Females Obese	Percent Females Obese
Dillon County, SC	3,835	37%	4,976	41.3%
South Carolina	556,571	31.7%	634,001	33.2%
United States	33,600,782	28.7%	34,382,509	27.9%



Percent Adults Obese	(BMI > 30.0) by Yea	r, 2004 through 2015
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Report Area	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Dillon County, SC	30.2%	30.15%	32.4%	33.6%	35.7%	38.7%	39.7%	39.8%	38.6%	37.5%	39.2%	39.3%
South Carolina	26.1%	27.3%	28.7%	29.2%	29.9%	31.5%	31.5%	31.6%	31.5%	31.8%	31.9%	32.4%
United States	23.1%	23.8%	24.8%	25.6%	26.4%	27.4%	27.3%	27.2%	27.1%	27.5%	27.8%	28.3%



Poor Dental Health

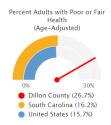
This indicator reports the percentage of adults age 18 and older who self-report that six or more of their permanent teeth have been removed due to tooth decay, gum disease, or infection. This indicator is relevant because it indicates lack of access to dental care and/or social barriers to utilization of dental services.



Poor General Health

Within the report area 27.6% of adults age 18 and older self-report having poor or fair health in response to the question "would you say that in general your health is excellent, very good, good, fair, or poor?". This indicator is relevant because it is a measure of general poor health status.

Report Area	Total Population Age 18+	Estimated Population with Poor or Fair Health	Crude Percentage	Age-Adjusted Percentage
Dillon County, SC	23,232	6,412	27.6%	26.7%
South Carolina	3,500,728	598,624	17.1%	16.2%
United States	232,556,016	37,766,703	16.2%	15.7%



Note: This indicator is compared to the state average.

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse. 2006-12. Source geography: County \rightarrow Show more details

Dillon County Health Rankings 2016 vs. 2019

To evaluate the impact of any actions that were taken to address the significant health needs identified in the 2016 CHNA the following is a comparison of health outcomes and behaviors in 2016 and in 2019.

	Dillon 2016 Ranking	Progress	Dillon 2019 Ranking
Health Outcomes	43		45
Length of Life	39		44
Premature Death	11,300	Getting Worse	13,800
Quality of Life	45		45
Poor or Fair Health	26%		29%
Poor Physical Health Days	5		5.1
Poor Mental Health Days	4.6		5.1
Low Birthweight	13%		12%
Health Factors	43		42
Health Behaviors	45		44
Adult Smoking	25%		22%
Adult Obesity	39%	Little or No Change	39%
Food Environment Index	5.4		6.1
Physical Inactivity	36%	Improving	34%
Access to Exercise	55%		32%
Opportunities			
Excessive Drinking	12%		14%
Alcohol-Impaired Driving	17%		29%
Deaths			
Sexually Transmitted	868.2	Improving	842
Infections			
Teen Births	74	Improving	54
Clinical Care	41		38

Uninsured	21%	Improving	14%
Primary Care Physicians	1,840:1		1,820:1
Dentists	3,890:1		3,410:1
Mental Health Providers	1,300:1		960:1
Preventable Hospital Stays	68		5,743
Diabetes Monitoring	83%		
Mammography Screening	56%	Improving	37%
Social & Economic Factors	42		43
High School Graduation	81%		88%
Some College	39%		41%
Unemployment	9.70%	Improving	5.70%
Children in Poverty	42%	Little or No Change	42%
Income Inequality	5.2		5.8
Children in Single-Parent	58%		51%
Households			
Social Associations	9.6		9.1
Violent Crime	1,229	Improving	914
Injury Deaths	78		84
Physical Environment	1		3
Air Pollution – Particulate	12.1	Improving	10.1
Matter			
Drinking Water Violations	No		No
Severe Housing Problems	19%		17%
Driving Alone to Work	75%		73%
Long Commute – Driving Alone	28%		31%

Data Source: https://www.countyhealthrankings.org/app/south-carolina/2016/compare/snapshot?counties=45_033

Priority Issues and Implementation Plan

McLeod Health utilizes resources such as U.S. Department of Health and South Carolina State Health Improvement Plan which serves to guide health promotion and disease prevention efforts. The South Carolina State Health Improvement Plan (SHIP) lays out the foundation for giving everyone a chance to live a healthy life. It is a call to action for South Carolinians to take datadriven, evidence-based steps to advance the health and well-being of all South Carolinians. The plan highlights goals and strategies on which communities can focus so the state can make measurable health improvement by 2023. Attention is focused on determinants that affect the public's health that contribute to health disparities by addressing identified needs through education, prevention, targeted initiatives validated through research, and the delivery of health services. Cross-sector collaboration is now widely considered as essential for having meaningful impacts on building healthier communities. Through collaboration with public health agencies, health care organizations and providers, community leaders, and input from across business sectors and others in the community, McLeod Health can better serve its mission.

In prioritization of needs, consideration was given to the following:

- Based on importance to community
- Capacity to address change
- Alignment to McLeod Health Mission, Vision and Values
- Collaboration with existing organizations
- Magnitude/Severity of problem
- Need among vulnerable populations
- Willingness to act on issue
- Ability to have meaningful impact
- Availability of hospital resources

Plan Priorities

McLeod Health Dillon has selected the following areas which to collaborate with community partners for improving community health in Dillon County.

- Chronic Diseases
- Access to Care
- Substance Abuse

• Sexual Health

Implementation Plan

Priority issues were determined from the community input gathered for the CHNA. The priority issues, or "goal", are listed as Strategies, Metrics on how to measure those strategies, Community Partners and Timeframe.

Through successful partnerships and collaborations with public health agencies, health care organizations and providers, community leaders, and input from across business sectors and other in our community, McLeod Health can more effectively satisfy its long standing mission dedicated to improving the health and well-being in our region through excellence in health care.

Goal	Strategies	Metrics/What we are measuring	Community Partners	Timeframe
Goal #1: Reinforce importance of physical activity among youth and adults in the community.	Strategy #1: Partner with City of Dillon Wellness CenterActions/Tactics• Promote free inside / outside walking tracks to potential Cardiac Rehab patientsCorporate membership for employees and their families established April 2019	 Number of people reached through education Number of memberships . 	 City of Dillon City of Dillon Wellness Center 	Ongoing
Goal #2: Promote and raise awareness of healthy behaviors among youth and adults in the community.	 Strategy #1: Partnership with local and regional organizations Actions/Tactics: Participate in events sponsored by city, county, local and regional organizations Educational series to highlight health issues, including stroke, heart disease, diabetes, arthritis, women's health Mobile Mammography Unit Health Fairs Go Red Luncheon 	 Number of people reached through education Number of events 	 City of Dillon County of Dillon United Way RALI/Dillon County Health Initiative Kiwanis Club Dillon County Help for Veterans Pee Dee Coalition Dillon County Boys and Girls Youth Center Dillon County Chamber of Commerce Local Schools Northeastern Rural Health Network/Wise Woman Trinity Behavioral Care Auxiliary 	Ongoing
Goal #3: Improve healthy eating behaviors among	Strategy #1: Support Dillon's Francis Marion University Rural	Grant funding received	Dillon County Rural Area	 Program to

youth and adults in the community	Area Leadership Institute (RALI) in undertaking BCBS grant funding in partnership with the SC Office of Rural Health The Dillon County Health Initiative (DCHI) was formed under RALI to: provide plants and seeds for individual and community gardens (complete in Dillon and Lake View); provide free health and nutrition education (ongoing hospital participation); work with Dillon County Free Medical Clinic to reduce high blood pressure and diabetes	\$15,000 • Program rolled out	Leadership Institute (RALI) • SC Office of Rural Health • Blue Cross Blue Shield	started in 2016 Full impleme ntation planned over 36 months
	 Actions/Tactics Increasing physical activity among youth Increase availability of fresh foods and available markets 			

	Strategy 2: Weight Watchers class for employees and community members	•	Number of participants			
	Strategy 3: McLeod Health Healthier You Program for employees and their spouses to help them live healthier lifestyles. Educational information from this program is widely available to all employees through various distribution methods.	•	Number of employees participating	•	McLeod Health	Ongoing
	 Actions/Tactics: Smoking Cessation BMI Screening Health Risk Assessment Blood Pressure Glucose Screening and Diabetes Prevention Annual Wellness Visits Health Coaching 					
Goal #4: Offer Cardiac Rehab exercise regime and education to improve healthy eating and physical activity behaviors among at- risk and post heart event	Strategy #1: Ongoing support recovery from heart attacks by providing cardiac rehab program. Actions/Tactics:	•	Grant Received by November (annually) Number of	•	McLeod Health Foundation Private Donors Physician Donors	Annually
patients.	Offer scholarships to those that are uninsured and need to continue cardiac rehab program.		at-risk, uninsured patients served			
Goal #5: Support better outcomes for stroke care	Strategy #1: Achieve Acute Stroke Ready Accreditation	•	Designation Number of patients served	•	McLeod Health American Heart Association	Accreditation survey held in May 2019
	Strategy #2: Telestroke	•	Number of Consults	•	REACH	Ongoing

CHNA Need #2: Access to Care

(Socioeconomic Barriers – Affordable Care, Resource Awareness and Education, and Transportation)

Goal	Strategies	Metrics/What we are measuring	Community Partners	Timeframe
Goal #1: Expand specialty care into rural areas for both adult and youth populations.	Strategy #1: Telehealth Psychiatry Cardiology Pulmonology Vascular Stroke (REACH) Lactation Nutrition Diabetes Education	 Number of consultations Number of specialty programs participating 	 McLeod Regional Medical Center McLeod Physician Associates REACH Network Palmetto Care Connections SC Department of Mental Health 	Ongoing
Goal #2: Improve education and access to remove transportation and financial barriers for underserved population (new and expecting mothers)	Strategy #1: Expand McLeod Nurse Family Partnership enrollment	 Numbers of referrals and/or participants, Case Study Outcomes 	 McLeod Nurse Family partnership McLeod Health Foundation Alliance for a Healthier South Carolina/Initiative Healthy Babies 	Annually
Goal #3: Improve access to hospital providers and services	Strategy #1: Recruitment of providers	 Number of provider positions filled 	 Mcleod Health Local Physicians 	Ongoing
Goal #4: Support better outcomes for stroke care	Strategy #1: Achieve and maintain Acute Stroke Ready Certification evidenced by DNV accrediting agency	 Designation Number of Patients served 	 McLeod Health American Heart Association Dillon County EMS 	Survey held May 2019
	Strategy #2: Telestroke	Number of Consults	REACH	Ongoing

Goal	Strategies	Metrics/What we are measuring	Community Partners	Timeframe
Goal #1: Increase access to substance use treatment, prevention and recovery services.	Strategy #1: Participate in the Rural Opioid Community Response Consortium, sponsored by CareSouth.		 CareSouth Trinity Behavioral Care TriCounty Community Mental Health Northeastern Rural Health Network 5 counties: Dillon, Darlington, Lee, Marlboro and Chesterfield 	In beginning phases
Goal #2 Gain access to specialty providers to rural areas for both youth and adult populations	Strategy #1: Use of telepsychiatry in Emergency Department	Number of consults	SC Department of Mental Health	Ongoing
Goal #3: Access to emergency mental health assistance through community partner agencies	Strategy #1: Counselor available daily in Emergency Department to assist with placement	Number of patients served	TriCounty Community Mental Health	Ongoing

Goal	Strategies	Metrics/What we are measuring	Community Partners	Timeframe
Goal #1: Improve birth outcomes through education to expecting moms.	Strategy #1: Centering Care in McLeod OBGYN Dillon practice – to improve outcomes and reduce preterm birth (Part of Alliance for a Healthier South Carolina initiative – Centering Pregnancy)	 Program Implementation Number of participants Breastfeeding rates Preterm birth rates 	 McLeod OB/GYN Dillon McLeod Nurse Family Partnership 	12 months
	 Actions/Tactics Promote benefits of full term delivery through new OB packets distributed at McLeod OB/GYN Dillon. Childbirth preparation offerings 			
	Strategy #2: Utilize the March of Dimes 39+ Weeks Quality Improvement Initiative	 Reduction in elective inductions, cesarean deliveries scheduled before 39 weeks of pregnancy Improved birth outcomes 	McLeod OB/GYN Dillon	Annually
	Strategy #3: Obstetrical Nurse Navigator	 Number of expecting mothers attending prenatal classes 	 McLeod Dillon Women's Services McLeod OB/GYN Dillon 	In beginning phases. OB Navigator position filled late 2018

	Strategy #4: Maintain Baby Friendly Designation	 Decrease in number of mothers receiving little to no prenatal care Increase in number of postpartum visits Re-designation 	 McLeod Dillon Women's Services McLeod OB/GYN Dillon Baby Friendly USA 	Ongoing Re-surveyed every five years
Goal #2: Increase education, condom access and improve parent/child communication	Strategy 1: Continue county wide teen pregnancy task force to plan and guide collaborative action to reduce teen pregnancy. Actions/Tactics Conduct education classes to emphasize abstinence first, then contraception, condom access (education is best practice) Provide evidence based practices and programming Increase awareness and understanding of STD risks and prevention	 Reduction in teen birth rates Number of teens reached/participating Number of classes conducted Decrease in STD rates 	 DHEC McLeod Nurse Family Partnership First Steps Schools Churches CareSouth Free Medical Clinic Pee Dee Coalition SC Campaign to Prevent Teen Pregnancy Boys and Girls Youth Center Community Groups Pee Dee Healthy Start McLeod OB/GYN Dillon Trinity Behavioral Health 	Annually

Goal #3: Reach underserved and uninsured women and improve sexual health outcomes.	Strategy #1: Expand Free Medical Clinic to include Women's Services	 Number of women served Number of patient visits 	 McLeod OB/GYN Dillon Dillon County Rural Area Leadership Institute (RALI) Free Medical Clinic 	Annually
	Strategy #2: Utilize the Choose Well Grant to provide Long Acting Reversible Contraception (LARC) at delivery	 Number of women served by OB Nurse Navigator Number of LARC Insertions 	 McLeod OB/GYN Dillon McLeod Dillon Women's Services New Morning Foundation 	Annually

Sources

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Poverty – Population Below 100% FPL, Data Source: US Census Bureau, *American Community Survey*. 2013-17. *Source geography:* Tract

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STI – Chlamydia Incidence, Data Source: US Department of Health & Human Services, *Health Indicators Warehouse*. Centers for Disease Control and Prevention, *National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention*. 2016. Source geography: County

STI- Gonorrhea Incidence, US Department of Health & Human Services, *Health Indicators Warehouse*. Centers for Disease Control and Prevention, *National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention.* 2016. Source geography: County

STI – HIV Prevalence, US Department of Health & Human Services, *Health Indicators Warehouse*.
Centers for Disease Control and Prevention, *National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention*. 2015. Source geography: County

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Asthma Prevalence, Data Source: *Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System*. Additional data analysis by CARES. 2011-12. Source geography: County

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Heart Disease (Medicare Population), *Note: This indicator is compared to the state average*. Data Source: *Centers for Medicare and Medicaid Services*. 2015. Source geography: County

High Blood Pressure (Adult), Note: This indicator is compared to the state average. Data Source: Centers for Disease and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse.
2006-12. Source geography: County

High Blood Pressure (Medicare Population), *Note: This indicator is compared to the state average*. Data Source: *Centers for Medicare and Medicaid Services*. 2015. Source geography: County

Infant Mortality, *Note: This indicator is compared to the state average*. Data Source: *US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File*. 2006-10. Source geography: County

Low Birth Weight, *Note: This indicator is compared to the state average*. Data Source: *US Department of Health & Human Services, Health Indicators Warehouse*. Centers for Disease Control and Prevention, *National Vital Statistics System*. Accessed via CDC WONDER. 2006-12. Source geography: County

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Mortality – Coronary Heart Disease, *Note: This indicator is compared to the state average.* Data Source: Centers for Disease Control and Prevention, *National Vital Statistics System.* Accessed via CDC WONDER. 2012-16. Source geography: County

Mortality – Lung Disease, *Note: This indicator is compared to the state average.* Data Source: Centers for Disease Control and Prevention, *National Vital Statistics System.* Accessed via CDC WONDER. 2012-16. Source geography: County

Mortality – Pedestrian Motor Vehicle Crash, *Note: This indicator is compared to the state average*. Data Source: US Department of Transportation, National Highway Traffic Safety Administration, Fatality Analysis Reporting System. 2011-2015. Source geography: County

Mortality – Premature Death, *Note: This indicator is compared to the state average*. Data Source: *University of Wisconsin Population Health Institute, County Health Rankings*. 2015-17. Source geography: County

Mortality – Stroke, *Note: This indicator is compared to the state average*. Data Source: Centers for Disease Control and Prevention, *National Vital Statistics System*. Accessed via CDC WONDER. 2012-16. Source geography: County

Mortality – Suicide, *Note: This indicator is compared to the state average*. Data Source: Centers for Disease Control and Prevention, *National Vital Statistics System*. Accessed via CDC Wonder. 2012-16. Source geography: County

Mortality – Unintentional Injury, *Note: This indicator is compared to the state average*. Data Source: Center for Disease Control and Prevention, *National Vital Statistics System*. Accessed via CDC WONDER. 2012-16. Source geography: County

Obesity, *Note: This indicator is compared to the state average*. Data Source: Centers for Disease Control and Prevention, *National Center for Chronic Disease Prevention and Health Promotion*. 2015. Source geography: County

Poor Dental Health, *Note: This indicator is compared to the state average*. Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Additional data analysis by CARES. 2006-10. Source geography: County

Poor General Health, *Note: This indicator is compared to the state average*. Data Source: Centers for Disease Control and Prevention, *Behavioral Risk Factor Surveillance System*. Accessed via the *Health Indicators Warehouse*. US Department of Health & Human Services, *Health Indicators Warehouse*. 2006-12. Source geography: County

Dillon County Health Rankings, Data Source: <u>https://www.countyhealthrankings.org/app/south-</u> carolina/2016/compare/snapshot?counties=45_033

USPSTF Grade A and B Preventative Service Recommendations Associated with Identified Key Priority Areas, Data Source: *USPSTF A and B Recommendations by Date*. U.S. Preventive Services Task Force. June 2019. <u>https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations-by-date/</u>

Appendix A

List of civic groups, providers, and organizations surveyed:

- McLeod Health Dillon Auxiliary
- McLeod Health Dillon Hospitalists
- McLeod Physician Associates
- South Carolina Department of Health & Environmental Control

Appendix B

Below is supplemental information to the Health Outcomes data found in this report.

INDICATOR	Dillon County Health Profile ⁶	COUNT	VALUE	RANK ¹	CTATE
INDICATOR	MEASURE Births with expected payor Medicaid (percent of all live births; 2015-2017)	COUNT 967	VALUE 78.8	RANK NA	STATE
		610	78.8 49.7	43	50 76
	Breastfeeding initiation (percent of all live births; 2015-2017)	160	49.7	43	/0
	Low birthweight births (<2,500 grams; percent of all live births; 2015-2017) Mothers receiving adequate prenatal care	100	13.1	45	
Births ²	(percent of all live births; 2015-2017)	985	80.2	4	75
Births	Mothers who smoked during pregnancy	565	00.2	4	/3
	(percent of all live births; 2015-2017)	189	15.4	40	9
	Preterm births (<37 weeks gestation; percent of all live births; 2015-2017)	151	12.3	29	11
	Teen live births (rate per 1,000 female population aged 15-19; 2015-2017)	146	48.4	43	23
Infant Mortality ²					
Infant Mortality	Infant mortality (rate per 1,000 live births; 2015-2017)	15	12.2	43	
	Coronary heart disease (percent; 2015-2017)	NA	9.4	46	8
	Stroke (percent; 2015-2017)	NA	4.6	25	
	Heart attack (percent; 2015-2017)	NA	8.7	44	
	Hypertension (percent; 2015-2017)	NA	50.1	35	3
hronic Diseases, Risk	Diabetes (percent; 2015-2017)	NA	22.2	44	13
Factors, and Health	Current asthma (percent; 2015-2017)	NA	9.8	32	
Behaviors ³	Current smoking (percent; 2015-2017)	NA	28.6	43	1
	Adults categorized as obese, aged 20+ (BMI ≥30; percent; 2015-2017)	NA	42.4	40	3
	Reported leisure time physical activity				-
	in the past 30 days (percent; 2015-2017)	NA	57.2	43	7.
	Received a flu vaccine in the last year, aged 65+ (percent; 2015-2017)	NA NA	56.6	37 39	6
	Received a pneumococcal vaccine ever, aged 65+ (percent; 2015-2017)	NA	63.5	39	7:
	Accidental drug overdose				
	(age-adjusted rate per 100,000 population; 2015-2017)		13.1	22	10
	Alzheimer's disease			10	
	(age-adjusted rate per 100,000 population; 2015-2017)	_	34.4	13	4.
	Cancer (malignant neoplasms only;			20	
	age-adjusted rate per 100,000 population; 2015-2017)	-	183.4	32	16
	Cerebrovascular disease		50.0	24	
	(age-adjusted rate per 100,000 population; 2015-2017)		58.0	34	4
Mortality ²	Chronic lower respiratory disease				
	(age-adjusted rate per 100,000 population; 2015-2017)		76.6	45	4
	Diabetes (age-adjusted rate per 100,000 population; 2015-2017)	-	32.0	32	2
	Diseases of the heart (age-adjusted rate per 100,000 population; 2015-2017)		265.0		47
	Motor vehicle accident	-	265.8	44	17
	(age-adjusted rate per 100,000 population; 2015-2017)		23.4	21	2
	Suicide (age-adjusted rate per 100,000 population; 2013-2017)		11.6	12	2
	All causes (age-adjusted rate per 1,000 population; 2015-2017)		10.8	43	1
		NA	26.3	45 NA	1
	Families below the poverty level (percent; 2013-2017) Population Non-Hispanic white (percent; 2017)	NA	46.3	NA	6
Population	Population Non-Hispanic black (percent; 2017)	NA	48.0	NA	2
Demographics ⁴	Population Non-Hispanic other (percent; 2017)	NA	48.0	NA	2
2598.5 1404	Population Non-Hispanic Other (percent; 2017) Population Hispanic/Latino (percent; 2017)	NA	2.6	NA	
		100000			
	Delayed seeing a doctor in the last year due to cost (percent; 2015-2017) ³	NA	20.6	40	1
	Has at least one person considered a personal doctor				
Health	or health care provider (percent; 2015-2017) ³	NA	82.3	17	7
Care Access	Population insured by Medicaid (percent; 2013-2017) ⁴	NA	45.7	NA	6
	Population insured by private health insurance (percent; 2013-2017) ⁴	NA	8.9	NA	
	Population without health insurance (percent; 2013-2017) ⁴	NA	16.8	NA	1
Home and	Elevated (≥5 mcg/dL) blood lead tests in children <6 years of age		25.0		
Home and Environmental	(percent of all tests; 2017) ⁵	NA	0.0		

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Appendix C

McLeod Health Dillon completed an inventory of community resources available within the service area. These resources include but are not limited to organizations, facilities, and programs in the community that are potentially available to address health needs.

Organizations are listed by county under the following headings:

- Senior Services
- Counseling
- Special Needs
- Assistance, Information and Education
- Food
- Shelter/Housing
- Transportation
- Medical and Health Assistance
- Home and Medical Assistance
- Free and Reduced Cost Medical Clinics
- CareSOUTH Carolina Primary Care Locations
- Family Medicine
- Internal Medicine
- Nephrology
- Obstetrics and Gynecology
- Pediatric Medicine
- General Surgery
- Orthopedics
- Urology



Community Resources

Guide Book to Getting the Help You Need After You Leave the Hospital



Thank You for Choosing McLeod Medical Center Dillon



Revised 7/17, 5/16, 12/14, 3/14, 8/13

About This Guide

McLeod Medical Center Dillon is concerned about your health and well being after you leave our hospital.

The purpose of this guide is to provide you with information on services available in the region. The guide is not all-inclusive of the services provided; it was put together to provide you with a starting point.

In this guide are a variety of resources that may offer additional care and services to you.



Senior Services	
Pine Street Senior Center	910-671-3881
PrivilegesPlus	910-671-5835
Veteran's Services of Robeson County	910-671-3071
Counseling	
Alcoholics Anonymous	910-272-3030
Al-Anon	910-272-3030
Alzheimer's Disease	910-671-5703
Autism	910-739-5298
Bereavement	910-671-5655
Brain Injury	910-618-5606
Cancer (Breast, Prostate or Reproductive Organs)	877-227-9416
	877-671-5730
Diabetes	910-671-5595
Heart Disease	910-671-5067
Lung Disease	910-738-5403
Narcotics Anonymous	910-272-3030
Palmer Drug Prevention Program	910-522-0421
ç. ç.	910-618-1135
Robeson Health Care Corporation	
Substance Abuse Services	910-844-3066
Southeastern Recovery Alternatives	910-272-3030
-	
Special Needs	
Borderbelt AIDS Resource Team (BART)	
(Fairmont)	910-628-6671
Committee for the Disabled	910-671-3836
Diabetes Community Center	910-618-0655
-	877-703-2680
NC Services for the Blind	800-422-1897
Robeson County Mental Health Services	910-738-1461
Robeson Family Counseling Center	
(Mental Health)	910-738-8558
Southeastern Behavioral Services	910-738-1431
Southeastern Family Services	910-739-8622
Southeastern Mental Health Center	910-738-1461
	800-670-6871
Crisis Line	800-672-8255
Telamon Corporation	
(Migrant/Seasonal Farm Workers)	910-671-0504
Assistance Information and Films	
Assistance, Information and Educa	
Center for Community Action	910-739-7854
	910-739-7851
NC Vocational Rehabilitation	910-618-5513
Food	
Meals on Wheels	910-618-5533
Robeson County Church and Community Center	910-018-5555
Robeson County Church and Community Center	910-738-3204 910-843-4120
	910-645-4120
Shelter/Housing	
American Red Cross (Robeson County Chapter)	910-738-5057
Lumberton Christian Care center	910-739-1204
Rape Crisis Center	910-739-1204 910-739-6278
Robeson County Church and Community Center	
reserve county can call and community celler	910-738-3204 910-843-4120
Southeastern Family Violence Center	910-739-8622
Sourcestern ranny violence Center	210-735-0022
Transportation	
Southeastern Area Transit System (SEATS)	910-618-5679
sentence in the second second (second)	210 010-3019

Shelter/Housing

Shehen Housing	
American Red Cross (Pee Dee Chapter)	843-662-8121
Area Rescue Mission (Men)	843-661-5377
CAA Shelter	843-678-3410
Cedar Terrace Apartments	843-774-8355
Dillon County Homeless Shelter	843-841-0875
Dillon County Pee Dee Coalition	843-774-0898
Florence County Pee Dee Coalition	843-669-4600
Good Shepherd Rescue Mission (Men) (Darlington)	843-393-1608
Habitat for Humanity	843-665-1624
House of Blessings Shelter (Marion)	843-464-6959
House of Hope of the Pee Dee (Women)	843-661-5115
Housing Authority of Darlington	843-393-0437
Housing Authority of Florence	843-669-4163
Pee Dee Coalition Crisis Center	843-669-4600
Pee Dee Community Action Agency (Dillon)	843-841-0875
Pee Dee Girls' Home	843-665-7116
Resurrection Shelter	843-407-4591
Street Reach Shelter (Horry County)	843-626-3643
Tara Hall Home for Boys (Georgetown)	843-546-3000
The Salvation Army	843-662-4461
Transitional Shelter	843-678-3410

Transportation

The Healing Lodge

LogistiCare	866-420-6231
Florence PDRTA	843-665-2227
Lakeside Medical	843-629-7133
Marlboro PDRTA	803-537-6610

North Carolina Resources (Robeson County)

Medical and Health Assistance

Medical and Health Assistance	
Carolina Access (Medicaid Recipients)	919-647-8170
Health Check (Medicaid, Birth to 21 Years)	910-737-5002
	910-737-5006
	910-671-3473
Health Choice (Health Insurance for Children)	910-671-3540
Healthy Steps (Birth to 3 Years)	910-739-3318
Hermitage Medical Clinic (Pain Management)	910-671-9298
Physician Directory (Listing)	910-671-5577
Robeson Child Health	910-608-2100
Robeson County Church and Community	
Center (Medication)	910-738-5204
	910-843-4120
Robeson County Health Department	910-738-7231
Robeson County Partnership for Children	
(Smart Start)	910-738-6767
Robeson County Partnership for	
Community Health	910-671-5595
Home and Medical Assistance	
Community Alternative Program Services (CAPS)	910-671-5390
Department of Social Services	910-671-3500
Home Health Services (Listing)	910-671-5551
Hospice Services (Listing)	910-671-5551
Robeson County Department of Health and	
Human Services	919-855-4400
Robeson County Department of Social Services	910-671-3770
Robeson County Home Health	910-671-3200

910-522-0900



South Carolina (Pee Dee Counties) Free and Reduced Cost Medical Clinics

For a complete listing of locations in South Carolina, visit SCFreeClinics.org

Darlington County Free Medical Clinic	843-398-0060
Dillon County Free Medical Clinic	843-774-4241
Health Care Partners of SC (Marion)	843-423-2400
Helping Hands Clinic (Mullins)	843-464-8750
Hope Health (Florence)	843-667-9947
Mercy In Me Free Medical Clinic (Cheraw)	843-537-5288
Mercy Medicine Clinic (Florence)	843-667-9947

North Carolina (Robeson County)

Free and Reduced Cost Medical Clinics

For a complete listing of locations in North Carolina, visit NCFreeClinics.org

Indian Health Care	910-272-8300
Robeson Healthcare Clinic	910-739-1666

CareSOUTH Carolina Primary Care Locations

Bishopville Center 545 Sumter Hwy PO Box 508 Bishopville, SC 29010 803.484.5317

Cheraw Center 212 Third Street PO Box 1357 Cheraw, SC 843.537.0961

Rosa Lee Gerald Center 737 South Main Street PO Box 239 Society Hill, SC 29593 843.378.4501

Lake View Center 103 Kemper Street PO Box 1076 Lake View, SC 29565 843.759.2189

Latta Center 122 Latimere, SC 29563 843.627.6252

Bennettsville Center 999 Cheraw Street PO Box 1197 Bennettsville, SC 29512 843.479.2341

Chesterfield Center 500 W. Boulevard PO Box 346 Chesterfield, SC 29709 843.623.5080 Hartsville Center 1268 South Fourth Street PO Box 909 Hartsville, SC 29550 843.332.3422

Vantage Point 1268 South Fourth Street PO Box 999 Hartsville, SC 29551 843.383.8632

Hunt Family Practice 106 Hospital Square PO Box 508 Bishopville, SC 29010 803.484.5943

McColl Center 225 South Main Street PO Box 86 McColl, SC 29570 843.523.5751

Bennettsville Pediatrics 210 W. Main Street PO Box 1197 Bennettsville, SC 29512 843.479.1200

Dillon Center 207 E. Monroe Street Dillon, SC 29536, 843.774.4337



Doctors

Family Medicine

Dillon Family Medicine 603 North 6th Avenue • Dillon, SC 29536 (843) 774-7336



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Michael N. Brown, M.D. Board Certified in Family Medicine



Timothy A. Fitzgibbon, M.D. Board Certified in Family Medicine



Paul D. Freel, M.D. Board Certified in Family Medicine



Kyle Gehres, D.O. Board Certified in Family Medicine



Nardin Khalil, M.D. Board Certified in Family Medicine



Robin C. Shealy, M.D. Board Certified in Family Medicine



S. Granville Vance, M.D. Board Certified in Family Medicine

Senior Services (continued)

Senior Services (continued)	
Leatherman Senior Center and	
Senior Citizens Association	843-669-6761
Marion County Council on Aging	843-423-4391
Marlboro County Council on Aging	843-479-9951
Counseling	
Bethany Christian Services	
(Pregnancy Counseling/Adoption)	843-629-1177
Circle Park Family Counseling and	
Addictions Center	843-665-9349
Circle Park Prevention Center	843-669-8087
Consumer Credit Counseling	
(Family Service Center)	800-223-9213
Dillon County Alcoholics Anonymous	843-774-6591
Florence County Alcoholics Anonymous	843-669-6345
McLeod Hospice	843-777-2564
McLeod Hospice Grief Recovery Group	843-777-2007
Marlboro Co. Commission on Alcohol and	
Drug Abuse	843-479-8328
Palmetto Center	843-662-9378
Pee Dee Big Brothers/Big Sisters	843-662-7081
Rubicon Family Counseling (Darlington)	843-332-4156
Special Needs	
Carolina Family Planning Center	843-616-6559
Darlington Pee Dee Center (Mental Health)	843-332-4141
DHEC Division of STD/HIV	800-322-2437
Dillon County Department of Disabilities	
and Special Needs	843-774-6775
Marion County Commission for the Blind	843-248-2017
Marion County Department of Disabilities	
and Special Needs	843-774-9619
Mental Health Association	843-661-5407
Pee Dee Center (Mental Health)	843-664-2600
Pee Dee Speech and Hearing Center	843-662-7802
SC Commission for the Blind	843-661-4788
Tri County Mental Health	843-774-3351
Trinity Behavioral Care	843-774-6591

Assistance, Information and Education

Alzheimer's Association	800-636-3346
American Diabetes Association	803-799-4246
American Kidney Fund	800-638-8299
Arthritis Foundation Carolina Chapter	800-883-8806
Asthma and Allergy Foundation of America	800-727-8468
Asthma Information Line	800-822-2762
Diabetes Association	800-342-2383
Diabetes Information and Action Line	800-354-5297
Dillon County Veterans Affairs	843-774-1427
Florence Area Literacy Council	843-667-1908
Florence County Veterans Affairs Clinic	843-292-8383
Medicare Hotline	800-633-4227
McLeod Diabetes Center	800-777-6000
McLeod Resource Center	
(Pregnancy, Newborn Resources)	843-777-5493
Poison Control	800-922-1117
SC Vocational Rehabilitation	843-774-3691
Sickle Cell Foundation	843-673-9509
Social Security Administration	800-772-1213
Food	
Dillon County Helping Hands Food Bank	843-841-2266
Manna House	843-667-6077





South Carolina Resources (Pee Dee Counties)

Medical and Health Assistance Best Chance Network

Dest Chance Network	
(Mammograms and Pap Smears)	800-227-2345
Darlington County Department of Health and	
Environmental Control (DHEC)	843-332-7303
Darlington County Health Center	843-332-7303
Darlington County Health Department	843-398-4400
Dillon County Health Department	843-774-5611
Dillon County Healthy Learners	
(Children's Vision, Dental, Medical Services)	843-774-1907
Dillon County Department of Social Services	843-774-8284
Florence County Commission for the Blind	843-661-4788
Florence County Department of Social Services	843-669-3354
Florence County Health Department	843-661-4835
Free Medicine Program	800-921-0072
HealthSouth Rehabilitation Services	843-679-9000
Marion County Health Department	843-423-8295
Marlboro County Health Department	843-479-6801
Medically Indigent Assistance Program	
(Medicaid Eligibility)	843-841-3347
Mercy Medicine Clinic	843-667-9947
McLeod Dillon	843-774-4111
Partnership for Prescription Assistance	888-477-2669
Sexton Dental Clinic	843-662-2543
Smiles Dental Clinic (Children in Dillon County)	843-774-6200
Welvista (Prescription Drug Assistance)	800-763-0059

Home and Medical Assistance

Dillon County Department of Health and	
Human Services (DHHS)	843-774-2713
DHHS - Community Long Term Care	843-667-8718
Dillon Community Action Agency	843-774-9038
Dillon County Department of Social Services	843-774-8284
Dillon County DHEC Home Health	843-774-5611
Florence Community Action Agency	843-678-3401
Florence County DHEC Home Health	843-661-4794
Lighthouse Ministries	843-629-0830
Marlboro County Department of Social Services	843-479-7181
Marlboro County DHEC Home Health	843-623-2206
Marlboro County DHHS	843-479-4520
Marion Community Action Agency	843-423-6711
Marion County Department of Social Services	843-423-4623
Marion County DHEC Home Health	843-423-7157
Marion County DHHS	843-423-5417
McLeod Home Health	843-777-3050
Senior Services	
AARP Senior Community Service	

843-665-1344
843-393-8521
843-774-0089
843-393-8521

• Internal Medicine

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Nephrology

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Rebecca J. Craig, M.D. Board Certified in Obstetrics and Gynecology





Marla J. Hardenbergh, M.D. Board Certified in Obstetrics and Gynecology

• Pediatric Medicine

McLeod Pediatrics Dillon 705 N. 8th Avenue, Suite 3A • Dillon, SC 29536 (843) 774-6091



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• General Surgery

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Mamdouh Mijalli, M.D. Board Certified in General Surgery

• Orthopedics

Michael J. Sutton, D.O. 705 North 8th Avenue, Suite 1B • Dillon, SC 29536 (843) 487-1588



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The 2019 McLeod Health Dillon Community Health Needs Assessment is located on the website of McLeod Health at <u>www.McLeodHealth.org</u>.

A copy can also be obtained by contacting the hospital administration office.