

Brooks County Hospital is a critical resource for residents in Brooks and surrounding counties and offers much needed healthcare services locally in the small rural town of Quitman, Georgia.

The most recent economic impact report from the Georgia Hospital Association found that in 2014, BCH provided \$2.1 million in uncompensated care for residents in South Georgia and North Florida. The inability

of patients to pay for the healthcare they need, along with declining Medicaid, Medicare and private insurance reimbursements poses serious challenges for the financial stability of the hospital. The hospital operates in the original facility that was built in 1938. The cost of upgrading the facility and patient care equipment to meet current regulatory requirements is significant, but the enhancements must

be made for BCH to continue to provide much needed healthcare to the residents of Brooks County.

The hospital is also struggling to recruit primary care providers to care for patients in the rural community, and may soon need to implement an expensive hospital medicine model.

The following pages provide a snapshot of the demographics and extreme health needs of

the Brooks County community. Put simply, Brooks County Hospital is essential to the health and financial stability of our region. Contributions to the Georgia Tax Credit program will help BCH offset the charity care the hospital provides, and donations will enable the hospital to continue providing patients in Brooks and surrounding counties the high quality healthcare in a cost-effect manner that the deserve.

At a Glance

Archbold's Brooks County Hospital is a 25-bed critical access hospital located in rural Quitman, Georgia.

The hospital has been affiliated with the Archbold health system since 1987.

Location

Bed Capacity **25**

Quitman, GaAnnual Inpatient Admissions Annu

165

Annual ED Visits **7,763**

Annual Sub-acute Admissions

197

Hospital Services



Skilled Nursing Care



IV Antibiotic Therapy



Wound Care and Wound Vacuum-Assisted Closures



TPN and Tube Feeding



Respiratory Care



Physical, Speech and Occupational Therapy

Essential for the **Local Economy**

Archbold's Brooks County Hospital is a critical resource for residents in Brooks and surrounding counties. Not only does the hospital provide critical healthcare services locally, but its existence is essential to recruit and retain industry that is so important to the economic health of the region.

BCH is one of the largest local employers in Brooks County and a vital economic engine. The most recent Economic Impact report from

the Georgia Hospital Association found that **Brooks County Hospital** contributed \$12 million to the local economy in 2014. BCH was directly responsible for employing around 100 people in Quitman, and creating or sustaining 207 jobs in the region

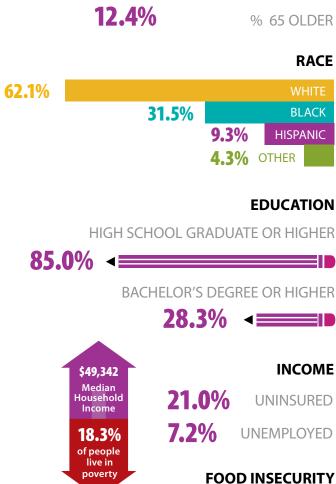
and statewide. The hospital also provided \$2.1 million in uncompensated care for residents in South Georgia and North Florida. According to the GHA report, for every BCH employee, there is more than one supporting job

created throughout the region and state. In addition the funds the organization spends on goods and services flow from the hospital to businesses, and those funds ripple through the local economy, as well.

POPULATION

% 18 AND YOUNGER

BROOKS COUNTY 10,214,860 15,658 **POPULATION** 24.7% 21.9% % 18 AND YOUNGER 18.6% % 65 OLDER **RACE** 62.2% **BLACK** 35.4% HISPANIC 5.6% OTHER 1.0% **EDUCATION** HIGH SCHOOL GRADUATE OR HIGHER 85.0% ◄≡ **BACHELOR'S DEGREE OR HIGHER** 11.1% **INCOME** \$31,686 \$49,342 Median Median **25.0**% Household Household **UNINSURED** Income Income UNEMPLOYED 7.4% 28.8% **18.3**% of people of people live in poverty **FOOD INSECURITY**



GEORGIA





Percent without reliable access to a sufficient quantity of affordable, nutritious food.





Essential for the Health of the Community

As part of a leading regional healthcare provider (Archbold Medical Center) operating the largest health system in the region, BCH helps take the lead in trying to improve the health of residents in the communities we serve.

Input was gathered from the following sources from June 3–July 25, 2016:

- Brooks County Extension Office— Written Surveys
- Brooks County Hospital Authority—Written Surveys

- Brooks County Head Start— Written Surveys
- Housing Authority, City of Quitman (typically representing low-income/minority/medically underserved population)—Written Surveys
- Brooks County Family Connection—Written Surveys
- Brooks County Health Department (typically representing lowincome/minority/medically

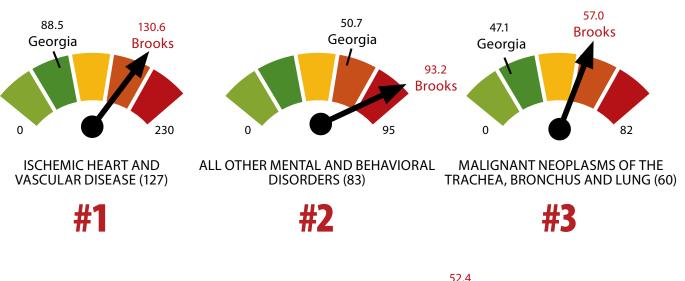
underserved population)—Written Surveys and Phone Interview

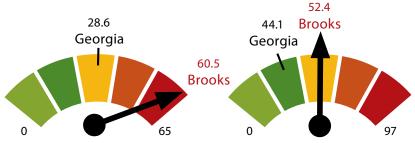
Qualitatively, the greatest medical needs according to community perception included:

- Diabetes
- · High Blood Pressure
- Obesity
- · Heart Disease
- · Back/Joint Pain

TOP 5 CAUSES OF DEATH IN BROOKS COUNTY AND AGE-ADJUSTED DEATH RATE 2010-2014

Deaths per 100,000. Data source: Georgia Department of Health, OASIS, census.gov





ESSENTIAL HYPERTENSION AND HYPERTENSION RENAL, AND HEART DISEASE (60) ALL COPD EXCEPT ASTHMA (53)

#4

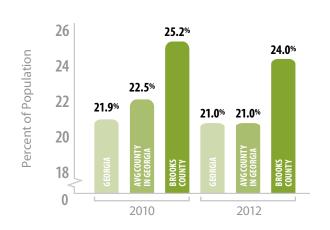
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Key Health Issues

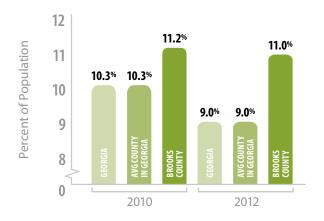


Access to care is an issue that impacts all of the other community health needs on our list. It is the degree to which individuals and groups are able to obtain a broad range of healthcare without excessive economic strain. According to the community input we received, a lack of health insurance remains the greatest barrier to access. Other access issues expressed were a lack of income, low level of education, preventative healthcare not being a priority, inability to afford a co-pay and transportation.

UNINSURED, UNDER AGE 65: 2010, 2012



UNINSURED, UNDER AGE 19: 2010, 2012

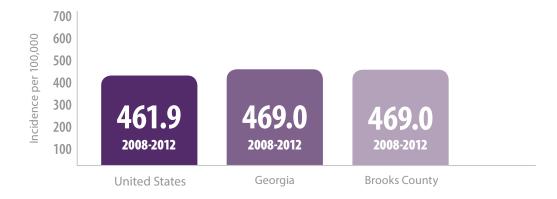




Cancer is the second-leading cause of death among all diseases, both nationally and in Georgia. Some specific types of cancer are on the rise, but a review of all ages and all cancers reveal Brooks County's incidence rate between 2008-2012 is higher than Georgia's rate, which is higher than the national rate. Brooks County males had a higher incidence rate over the four year period (571.3) than women (402.4), Non-Hispanic black males males had a higher incidence rate (738.8) than Non-Hispanic white males (527.1), though Non-Hispanic black females had a lower incidence rate (402.5) than Non-Hispanic white females (413.3).

CANCER INCIDENCE SNAPSHOT: 2008-2012

All Cancer Sites, All Ages, All Races, Both Sexes. Source: State Cancer Profiles, National Cancer Institute, CDC



Key Health Issues

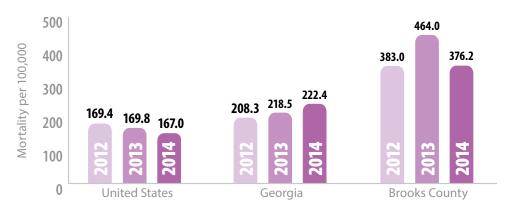


According to the American Heart Association (AHA), the Centers for Disease Control and Prevention (CDC), the National Institutes of Health (NIH) and other government sources, cardiovascular disease is the leading global cause of death, accounting for more than 17.3 million deaths per year, a number that is expected to grow to more than 23.6 million by 2030. The AHA's 2016 Heart Disease and Stroke Statistics Update suggests one of every three deaths in the U.S. in 2013 were from heart disease, stroke and other cardiovascular diseases.

Brooks County ranks among the counties with the highest mortality levels in Georgia, and well exceeds heart disease rates per 100,000 than both Georgia and U.S. rates.

MAJOR CARDIOVASCULAR DISEASES MORTALITY: 2012-2014

All ages. Source: OASIS, CDC

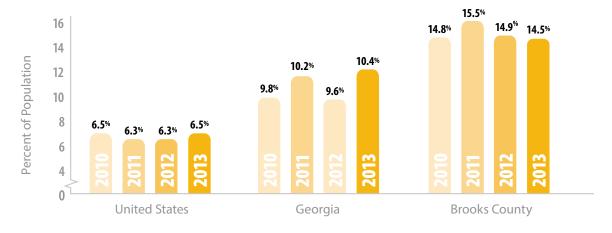




In our last CHNA, we noted that the American Diabetes Association (ADA) estimated the percentage of Americans with diabetes at 8.3%. That metric has risen to 9.3%. The ADA also estimates nearly four million more Americans have diabetes since our last CHNA was published. Further, the ADA estimates 86 million aged 20 and over are pre-diabetic, also an increase. Comparatively, those in Georgia and Brooks County exceed national estimates for diabetes. Diabetes is a disease with serious complications and can lead to premature death, and is the leading cause of blindness and kidney failure.

DIAGNOSED DIABETES RATE: 2010-2013

Age adjusted. Source: CDC, National Diabetes Surveillance System



Key Health Issues

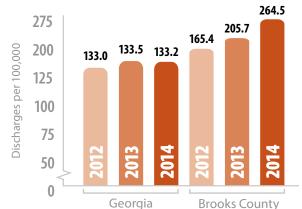


Nearly 23 million persons in the United States have chronic kidney disease (CKD), and another 20 million are at increased risk for CKD. African Americans, Hispanics, Pacific Islanders, American Indians and seniors are at increased risk. It is very difficult to make statistically consistent comparisons of CKD on a national, state and local level. Variances within specific data sets are so complex and specific enough that attempts to compare would be highly estimated, and perhaps inaccurate.

Two of the main causes of CKD are diabetes and hypertension—potentially reversible conditions with proper diet and exercise—so we are choosing to focus on comparable local and state statistics, in turn, we can provide prevention and early identification efforts.

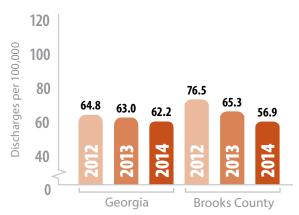
DIABETES MORBIDITY: 2012-2014

 $Deduplicated\ Discharges\ and\ Age-Adjusted\ Rate.\ Source:\ Oas is$



HYPERTENSION MORBIDITY: 2012-2014

Deduplicated Discharges and Age-Adjusted Rate. Source: Oasis

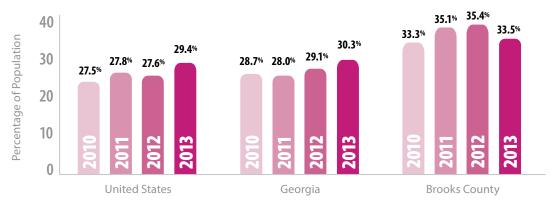




According to the most recent data released September 2015 from The State of Obesity, a University of Wisconsin Population Health Institute/Robert Wood Johnson Foundation Project, rates of obesity now exceed 35 percent in three states (Arkansas, West Virginia and Mississippi), 22 states have rates above 30 percent, 45 states are above 25 percent, and every state is above 20 percent. Georgia now has the 19th highest adult obesity rate in the nation, according to the same report.

OBESITY PREVALENCE: 2010-2013

Source: CDC-BRFSS, University of Wisconsin Population Health Institute



Key Health Issues

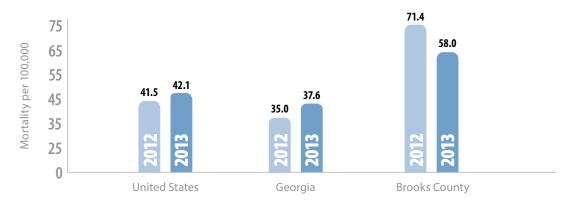


According to the American Lung Association's 2016 Estimated Prevalence and Incidence of Lung Disease, Brooks County had a total of 1,362 cases of asthma (380 pediatric and 982 adult), 954 cases of COPD and 10 cases of lung cancer. Data are based on the 2014 Behavioral Risk Factor Surveillance Survey and the 2015 joint report from CDC's National Program of Cancer Registries, NCI's SEER program, and state-based cancer registries.

Smoking clearly has a direct impact on respiratory diseases, one reason why Archbold continues to offer free smoking cessation classes to anyone in the communities they serve. The 2016 County Health Rankings and Roadmaps report estimates the smoking rate among adults in Brooks County is at 19%, compared to 17% in Georgia and 14% nationally.

CHRONIC LOWER RESPIRATORY DISEASES MORTALITY: 2012-2013

Age adjusted. Source: GA Oasis, CDC



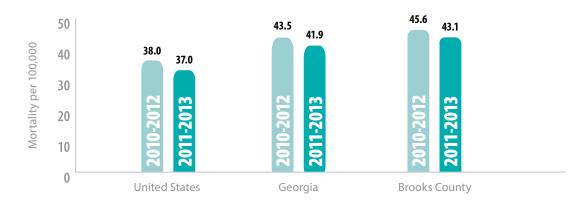


Stroke kills almost 130,000 Americans each year—about one out of every 20 deaths. However, the risk of having a stroke varies with race and ethnicity. Reviewing Brooks County data from the CDC's 2011-2013 Interactive Atlas of Heart Disease and Stroke, blacks have a death rate much higher than whites (72.0 deaths per 100,000 compared to 43.1).

The country's highest death rates from stroke continue to be in the southeastern United States. Nationally, in Georgia, and in Brooks County modest decreases in stroke mortality are evident.

STROKE MORTALITY: 2010-2012, 2011-2013

Source: CDC



How You Can Help

Brooks County Hospital is one of 49 rural hospitals in Georgia that qualifies for the Georgia Rural Hospital Tax Credit Program. Donations made directly to BCH in 2017 will receive a state income tax credit of up to 70%. These charitable gifts are also considered federally tax deductible, so your impact to BCH could be tripled! For example:



How Your Donation will be Used

Donations will be used to help address uncompensated care, fund patient care enhancements, capital improvements and new technology and equipment—all dedicated specifically for BCH.

Implementation of a New Healthcare Delivery Model for BCH

On September 29, 2016, consultants from Stroudwater and Associates completed an evaluation of the healthcare needs for Brooks County.

The recommendations for Brooks County Hospital:

- Identify needs for the provision of healthcare related services
- · Address adequacy of the present hospital facility

for the delivery of optimum patient care relative to available resources

- Detail viable models and options to address current and future healthcare needs
- · Offer a roadmap to financial viability and sustainability.

The implementation of the new delivery model will be costly, and funds from the Tax Credit program will help offset these expenses.

Physician Recruitment and Retention

The high level of uncompensated care, poses challenges for both recruitment and retention of primary care physicians to Brooks County Hospital. The hospital's medical staff is currently comprised of only four physicians. In order to retain the current physicians, and recruit one more family practice physician, the hospital will need to implement a new practice model that could require a weekend hospitalist program. Funds acquired would be used to recruit and retain physicians to Brooks County Hospital, and help with expenses related to implementing a hospital medicine program.

Need for Maintenance, Upgrade and Replacement Facilities

The cost of maintaining and upgrading the hospital to meet current standards for CMS and the Joint Commission is significant. There is no room for expansion, and without the ability to expand, the hospital cannot add additional healthcare services needed in the community.

Capital Equipment

To comply with CMS regulations that take effect in 2018, the hospital must upgrade current radiology equipment from a CR unit (cassette reader) to a DR unit (digital reader).

The hospital is currently unable to care for patients weighing over 420 pounds. Tax credit funds will also help BCH purchase bariatric beds and equipment that will enable staff to care for additional patients and meet the needs of more community members.