Cape Fear Valley Health is a 952-bed, 8-hospital regional health system with more than 1 million inpatient and outpatient visits annually.
More than 50 healthcare locations throughout our region.

8,000 employees.

300+ employed physicians.
## Service Area Population

<table>
<thead>
<tr>
<th></th>
<th>2015</th>
<th>2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cumberland</td>
<td>329,827</td>
<td>344,715</td>
</tr>
<tr>
<td>Bladen</td>
<td>35,758</td>
<td>36,120</td>
</tr>
<tr>
<td>Harnett</td>
<td>127,348</td>
<td>146,067</td>
</tr>
<tr>
<td>Hoke</td>
<td>52,452</td>
<td>59,228</td>
</tr>
<tr>
<td>Robeson</td>
<td>137,224</td>
<td>139,678</td>
</tr>
<tr>
<td>Sampson</td>
<td>64,623</td>
<td>65,975</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>747,232</strong></td>
<td><strong>791,783</strong></td>
</tr>
</tbody>
</table>
Health Outcomes Ranking by County

- **RANK: 1-25** (High Ranking)
- **RANK: 26-50**
- **RANK: 51-75**
- **RANK: 76-100** (Low Ranking)

Source: University of Wisconsin Population Health Institute
2015 County Health Rankings, North Carolina
Significant physician shortage in our region

- In North Carolina, 25% of our counties DO NOT have:
  - OB/Gyn
  - General Surgery
  - Pediatricians
  - Psychiatrists

- Severe Primary Care and Specialty Care shortage across Southeastern N.C.
## Regional Physician Needs Analysis

<table>
<thead>
<tr>
<th>Specialty</th>
<th>2020 Need</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Practice &amp; Internal Medicine</td>
<td>145.5</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>23</td>
</tr>
<tr>
<td>General Surgery</td>
<td>15</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>41.5</td>
</tr>
<tr>
<td>Obstetrics/Gyn</td>
<td>33</td>
</tr>
</tbody>
</table>

Date compiled through:
- MGMA Healthcare Consulting Group
  - Cape Fear Valley Health System
- 3d Health
  - Southeastern Health System
## Regional Emergency Department Visits

<table>
<thead>
<tr>
<th>Area</th>
<th>Visits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cape Fear Valley Medical Center</td>
<td>130,134</td>
</tr>
<tr>
<td>Southeastern</td>
<td>63,216</td>
</tr>
<tr>
<td>Harnett</td>
<td>61,877</td>
</tr>
<tr>
<td>Hoke</td>
<td>61,486</td>
</tr>
<tr>
<td>Sampson</td>
<td>33,874</td>
</tr>
<tr>
<td>Bladen</td>
<td>14,209</td>
</tr>
</tbody>
</table>
# Regional Emergency Department Visits

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cape Fear Valley Medical Center</td>
<td>130,134</td>
<td>329,827</td>
</tr>
<tr>
<td>Southeastern</td>
<td>63,216</td>
<td>137,224</td>
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<td>Sampson</td>
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<td>64,623</td>
</tr>
<tr>
<td>Bladen</td>
<td>14,209</td>
<td>35,758</td>
</tr>
</tbody>
</table>
What to do?

- Aggressive recruiting – limited success

- Residency Development
  - Internal Medicine
  - General Surgery
  - Emergency Medicine
  - OB/GYN
  - Transitional 2017

- Psychiatry starting 2018
- Pediatrics starting 2019
Residents often go into practice within 50 miles of their residency location

Source: 2011 Survey of Final Year Medical Residents
Merritt Hawkins
## Approved Residencies

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
<th>2022</th>
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<tbody>
<tr>
<td>Internal Medicine</td>
<td>15</td>
<td>30</td>
<td>45</td>
<td>45</td>
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<tr>
<td>General Surgery</td>
<td>4</td>
<td>8</td>
<td>12</td>
<td>16</td>
<td>20</td>
<td>20</td>
</tr>
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<td>(20)</td>
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<td></td>
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<tr>
<td>Emergency Medicine</td>
<td>8</td>
<td>16</td>
<td>24</td>
<td>32</td>
<td>32</td>
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<td></td>
<td></td>
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<tr>
<td>Obstetrics/Gyn</td>
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<td>8</td>
<td>12</td>
<td>16</td>
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<tr>
<td>Transitional</td>
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<td>(26)</td>
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<td></td>
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</tr>
<tr>
<td>Psychiatry*</td>
<td>4</td>
<td>8</td>
<td>12</td>
<td>16</td>
<td>16</td>
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<td>(16)</td>
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<td></td>
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<tr>
<td>Pediatrics**</td>
<td>6</td>
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<td>18</td>
<td>18</td>
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<td></td>
</tr>
<tr>
<td>(18)</td>
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<td></td>
</tr>
<tr>
<td><strong>Totals (Residents Only)</strong></td>
<td>57</td>
<td>92</td>
<td>133</td>
<td>159</td>
<td>173</td>
<td>173</td>
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<tr>
<td>Medical Students</td>
<td>112</td>
<td>112</td>
<td>112</td>
<td>112</td>
<td>112</td>
<td>112</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>169</td>
<td>204</td>
<td>245</td>
<td>271</td>
<td>285</td>
<td>285</td>
</tr>
</tbody>
</table>

* Approval expected 5/1/18  ** Approval expected 6/1/19
Challenges

- Disproportionate Funding
- Operating deficiencies (approx. $15,000 loss per resident)
- Tremendous Infrastructure Costs
  - **Resident Space**: auditoriums, conference room, library, computer workstations, training and simulation space and other common elements
  - **Faculty Space**: program directors, core faculty, medical education coordinators and other administrative staff
  - **Hospital Based Space**: resident space located on patient floors, on-call sleep space, rounding rooms, showers and other necessary amenities
  - **Patient Space**: OR and procedure space
  - **Clinic Space**: outpatient clinic space to provide ample opportunities for residents to see patients in an outpatient setting and satisfy ACGME requirements
  - **Residency Support Space**