

Bon Secours Hampton Roads DePaul Medical Center



Good Help to Those In Need*

respect | compassion | justice | integrity |quality | innovation | stewardship | growth



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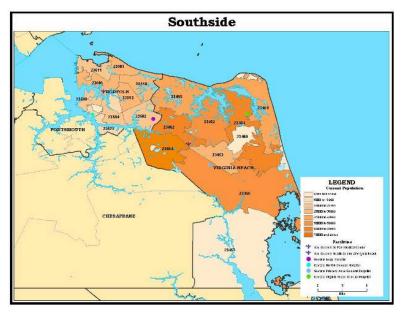


Executive Summary

Bon Secours DePaul Medical Center (DePaul) is a 198-bed not-for-profit, acute care facility licensed in the Commonwealth of Virginia serving approximately 698,000 residents in Norfolk and Virginia Beach. The Community Health Needs Assessment (CHNA) examines qualitative input provided by community members coupled with quantitative data on health conditions in the area. Together the information forms a snapshot of important areas of health concern. A survey to gather information from the community was conducted in November and December 2018. Five (5) community focus groups were held January through April 2019. This executive summary provides an overview of the initiative and the findings.

The Mission of Bon Secours Health System is to bring compassion to health care and to be Good Help to Those in Need®, especially those who are poor and dying. As a System of caregivers, we commit ourselves to help bring people and communities to health and wholeness as part of the healing ministry of Jesus Christ and the Catholic Church.

The survey and this assessment focus on the DePaul service area of 26 zip codes. The study region is shown in the map below.



Bon Secours DePaul Medical Center Service Area & Population Density Map



A collaborative team from Bon Secours DePaul Medical Center, Children's Hospital of The King's Daughters, Sentara Healthcare, and the Virginia Department of Health – Norfolk and Virginia Beach (Collaborative) began meeting in May 2018 to begin the work on the 2020 – 2022 Community Health Needs Assessment. In order to obtain input from the community, an online and hard-copy survey was disseminated in English and Spanish, and four community focus groups were held in Norfolk and Virginia Beach.

The Community Health Survey was disseminated October 23 through December 12, 2018, to the DePaul community in Norfolk and Virginia Beach. It was available online and could be completed on paper in both English and Spanish. The survey was distributed widely via Bon Secours networks, as well as meetings, clinics and programs supported by DePaul, such as the Care-A-Van, a mobile medical unit that provides care to the uninsured population, in the East Ocean View site of the Bon Secours Hampton Roads Health Communities initiative, Bon Secours DePaul Medical Center SeniorHealth members, and a Norfolk LGBTQ community resource site. The Community Health Needs Assessment Survey can be reviewed in Appendix V.

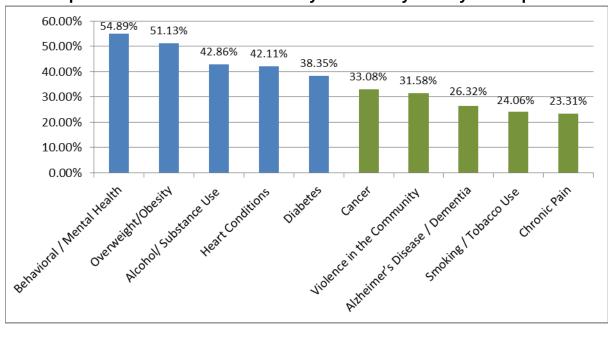
The survey was taken by 330 residents and key stakeholders who indicated Norfolk and Virginia Beach as their primary service area. Individuals were asked to choose the top five health issues and services they thought should be addressed in their community. Overall, Community Health Needs Assessment Survey participants represent a blend of perspectives across age, race and income.

Epidemiological data was provided by the Virginia Department of Health - Portsmouth. Based on secondary data analysis, the following table highlights the major health issues where the DePaul community has worse rates or percentages when compared to Virginia or Healthy People 2020 targets. It is important to note, that for the most part, Norfolk also has worse health outcomes than Virginia Beach.

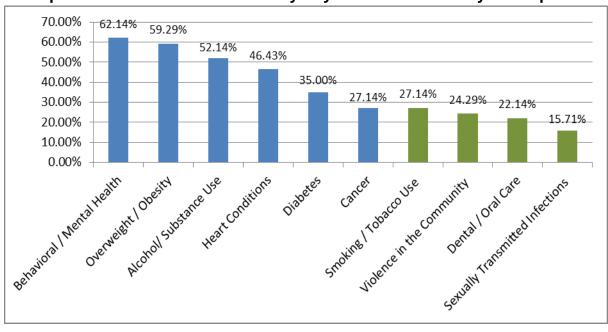
Health Concerns	Social / Economic Factors
Mental Health	Crime
Obesity	Food Insecurity
Alcohol / Substance Abuse	Unemployment
Heart Conditions	Children in Single-Parent Households
Diabetes Hospitalizations	Severe Housing Problems
Breast Cancer	
Respiratory Disease	



The charts below illustrate the top ten health issues and services that need strengthening identified by participants in the Community and Key Stakeholder surveys.

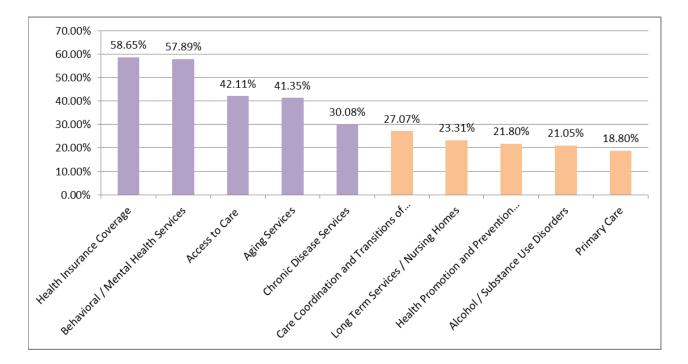






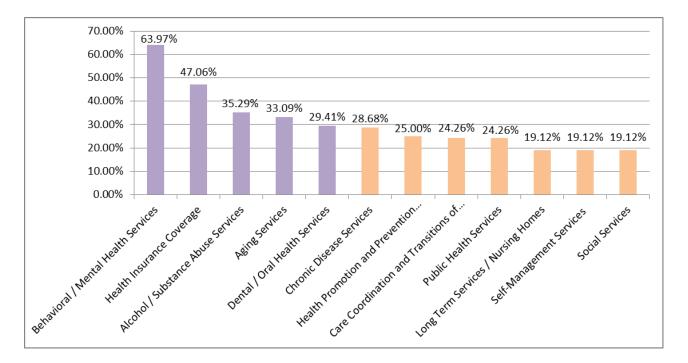
Top Ten Health Issues Identified by Key Stakeholder Survey Participants





Top Ten Services that Need Strengthening Identified by Community Survey Participants

Top Ten Services that Need Strengthening Identified by Key Stakeholder Survey Participants





For the most part, the community health needs selected by survey participants focus on health issues in the top ten concerns. Violence in the Community was the only social issue identified. It is interesting to note that eight of the top ten health concerns were the same in both the Community and Key Stakeholder responses.

DePaul Medical Center's senior leadership team met to review primary and secondary data gathered through the CHNA process (community meetings, community and key stakeholder surveys, and meetings with regional health systems and health departments). Recognizing the importance of each of the health concerns identified, the team evaluated them, the hospital's strategic goals, services currently provided, and the current CHNA Implementation Plan's progress. Based on these criteria, the team narrowed their focus to the top five health concerns selected by both the community and key stakeholders. The team then determined the areas in which they could have the greatest impact. Based on the above information and processes, DePaul will focus the Community Health Needs Assessment implementation strategy on the following.

Alcohol and Substance Abuse

Opioid addiction is characterized by a powerful, compulsive urge to use opioid drugs, even when they are no longer required medically. Opioids have a high potential for causing addiction in some people, even when the medications are prescribed appropriately and taken as directed. Many prescription opioids are misused or diverted to others. The opioid crisis is more deadly than drunk drivers or gun violence and is one of the most devastating threats to the community.

With opioid addiction at epidemic status, DePaul will focus their efforts around reducing opioid dependency and addiction in the community by monitoring opiate prescribing patterns and reducing the opiate prescription rate within the hospital. In addition, DePaul will increase awareness of substance abuse risks through school and community partnerships. In addition, monthly educational programs for aging adults will address substance abuse, as well as all ten top health concerns.

Heart Conditions

Heart disease remains the leading cause of death in the U.S. and stroke continues to rank fifth, according to the National Center for Health Statistics Mortality Data Report for 2017. Research shows people living with diabetes are at least two times more likely to develop and die from cardiovascular disease. Cardiovascular diseases are a group of disorders of the heart and blood vessels which include: coronary heart disease,



cerebrovascular disease, peripheral arterial disease, rheumatic heart disease, congenital heart disease, and deep vein thrombosis and pulmonary embolism.

DePaul will improve address cardiovascular disease through improvement of readmission rates of ST-elevation myocardial infarction (STEMI) heart attacks and chronic heart failure (CHF) patients by developing strategic interventions. Education and awareness of heart conditions will be accomplished through community education programs.

Chronic Health in Aging Adults

One in four Americans suffers from multiple chronic conditions, those that last a year or more and require ongoing medical attention or that limit activities of daily living. That number rises to three in four Americans aged 65 and older. As a person's number of chronic conditions increases, his or her risk for dying prematurely, being hospitalized, and even receiving conflicting advice from health care providers increases. People with multiple chronic conditions also are at greater risk of poor day-to-day functioning. Chronic conditions can lower quality of life for older adults and contribute to the leading causes of death among this population.

Using the CHNA priorities as a guide, DePaul will partner with medical providers and community groups to increase awareness of chronic health conditions in older adults through educational programming focused on the aging population.

Overweight/Obesity/Diabetes

DePaul will address obesity and diabetes through community education classes held at the hospital. The Bon Secours Hampton Roads Passport to Health program in the East Ocean View community of Norfolk will continue to provide education on healthy eating and lifestyles. School partnerships will continue to provide nutritional and physical health education. DePaul will also partner with medical providers and community groups to increase awareness of obesity and diabetes in older adults through educational programming focused on the aging population.

Behavioral/Mental Health

DePaul will continue the mental health initiatives identified in the previous CHNA through offering support groups and community education. Referrals to local community service boards by the emergency department Life Coaches and the Bon Secours Care-A-Van will also continue. In addition, DePaul will active participate in coalitions



addressing behavioral/mental health, especially in the areas of opioid abuse and chronic health conditions.

Facility Description and Vision

Bon Secours DePaul Medical Center (DePaul) has served the Hampton Roads region for 163 years. The Hospital of St. Vincent de Paul, Norfolk's first public hospital, was incorporated by the Virginia Legislature on March 3, 1856. The eightroom hospital served 100 patients in its first year. By the 1970's, DePaul Hospital had established itself as a state-of-theart 366-bed full-service hospital, providing a comprehensive array of



inpatient and ambulatory diagnostic and treatment services. In 1996, DePaul Hospital was transferred from the Daughters of Charity National Health System-Southeast to Bon Secours Health System, Inc. With the transfer, the facility was renamed Bon Secours DePaul Medical Center.

DePaul is now a 198-bed not-for-profit, acute care facility licensed in the state of Virginia and serving approximately 698,000 residents mostly originating from the cities of Norfolk, Virginia Beach. DePaul provides a comprehensive array of inpatient and outpatient services. In addition, DePaul works with sister facilities Bon Secours Maryview Medical Center, in Portsmouth, and Bon Secours Mary Immaculate Hospital, in Newport News, to support highly complex surgical specialties.

Bon Secours DePaul Medical Center Mission

The Mission of Bon Secours DePaul Medical Center mirrors that of its parent Bon Secours Health System, Inc. – "Inspired by the healing ministry of Jesus Christ and the Charism of Bon Secours, as a prophetic Catholic health ministry, Bon Secours DePaul will partner with our community to create a more humane world, build social justice for all, and provide exceptional value for those we serve."

To help activate its vision, DePaul is transforming how it approaches care. A top priority is to ensure that we commit to liberate the potential of our people to serve. In order to



provide exceptional value for those we serve, DePaul is continuously providing new services and treatments to area residents.

Access to Health Care Profile

This Access to Health Profile provides health service data gathered from multiple publicly available data resources.

Provider to Residents Ratios

Access to health care services is a key factor in the health of a community. A major contributing factor in health care accessibility is the burden of care placed on a provider. The following table depicts the ratio of provider/residents in Norfolk and Virginia Beach. The ratios for the state are also given for comparison. This data table highlights a disparity in provider to resident ratios between the two cities and across provider types.

Ratio of Provider to Residents (2016) ¹				
Norfolk Virginia Beach Virginia				
Primary Care	1,030:1	1,340:1	1,310:1	
Dental Care	1,220:1	1,320:1	1,470:1	
Mental Health	530:1	640:1	630:1	

Health Professional Shortage Area/Medically Underserved Area

The U.S. Health Resources and Services Administration (HRSA) defines a Health Professional Shortage Area (HPSA) designation as one that identifies a geographic area, population group or facility as having a shortage of primary care physicians. As of 2016, Norfolk has been designated a Primary Care HPSA. As of 2017, Norfolk has been designated as a Mental Health HPSA. HRSA designates geographic areas or defined populations as "medically underserved" based on the presence of particular health and socioeconomic risks in addition to provider shortages. The criteria for designation include too few primary care providers, high infant mortality, high poverty, and/or high elderly population rates. At least one subsection of Norfolk had a Medically Underserved Area (MUA) designation.²

¹ www.CountyHealthRankings.org ² http:// hrsa.gov/shortage/index.html





Demographics Data Profile

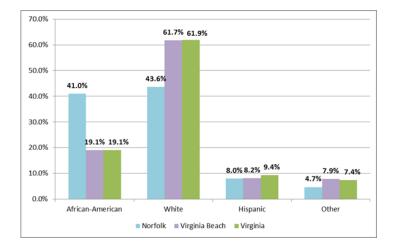
The health of a community is largely connected to the demographics and social aspects of its residents, which can be a useful indicator of health concerns. Demographic studies of a population are based on factors such as age, race, sex, economic status, education levels, and employment rates, among others. The physical environment in which individuals live, learn, work, play, and grow old also has a great impact on their health and quality of life. These cultural and environmental conditions are also known as "Social Determinants of Health".

Some key findings in the DePaul community's demographics data³ include:

Population

It has been well established that race and ethnicity are key factors in health disparities. For example, life expectancy, death rates and infant mortality rates are all less favorable among African American populations as compared to other ethnic populations. In 2009, African Americans in the United States had the highest mortality rates from heart disease and stroke as compared to any other ethnic group. Additionally, infants born to African Americans have the highest infant mortality rates, more than twice the rate for Whites in 2008. While certain health indicators such as life expectancy and infant mortality have been slowly improving, many minority race groups still experience a disproportionately greater burden of preventable disease, death, and disability.⁴

- Norfolk's population is predominantly White and African American. Compared with Virginia as a whole, Norfolk has a lower percentage of White population with and a significantly higher percentage of African American population.
- Virginia Beach population is predominantly White. Virginia Beach is equivalent to Virginia's percentage of White and African American.



³ www.countyhealthrankings.com

⁴ MinorityHealth.hhs.gov, HHS Disparities Action Plan



 There is a slightly lower percentage of Hispanics in Norfolk and Virginia Beach compared to Virginia. Norfolk has a lower percentage of Other populations than Virginia Beach and Virginia. Virginia Beach has a slightly higher percentage of Other populations than Virginia.

Older adults are at higher risk for developing chronic illnesses such as Diabetes Mellitus, Arthritis, Congestive Heart Failure and Dementia, and this proves to be a burden on the health care system. The first of the "baby boomer generation" (adults born between 1946 and 1964) turned 65 in 2011 and has resulted in an aging population nationwide. It is estimated that by the year 2030, 37 million older adults nationwide will be managing at least one chronic condition. Chronic conditions contribute to the leading causes of death among older adults. Additionally, older adults often experience higher rates of hospitalizations and low-quality care.⁵

- Norfolk is comprised of fewer children under the age of 18 than Virginia Beach and Virginia, which are statistically equal.
- Norfolk has fewer older adults (65+) than Virginia Beach and Virginia. Virginia Beach has fewer older adults than Virginia.

25.0% 20.0% 19.8% 19.8% 10.0% 5.0% 0.0% % below 18 years of age % 65 and older % 65 and older

The Weldon Cooper Center for Public Service estimates that the

community's older population will steadily increase through 2040 to over 76,000 people, while the population growth rate of <19 and 20-64 year olds will decrease below that of the older population.⁶ These data are reflective of the "baby boomer generation" moving into older adulthood nationwide.

Unemployment/Median Income

An association exists between unemployment and mortality rates, especially for causes of deaths that are attributable to high stress (cardiovascular diseases, mental and behavioral disorders, suicide, and alcohol and tobacco consumption related illnesses).⁷

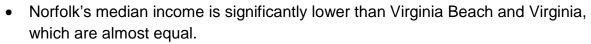
⁵ www.healthypeople.gov/topics-objectives/topic/older-adults

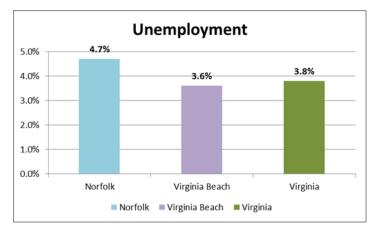
⁶ http://www.coopercenter.org/demographics/virginia-population-projections

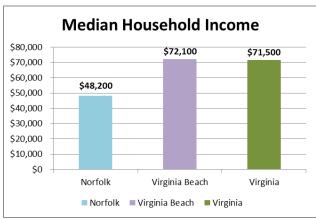
⁷ Backhans and Hemmingsson, 2011, Lundin et al., 2014, Garcy and Vagero, 2012, Browning and Heinesen, 2012, Montgomery et al., 2013, Davalos et al., 2012, Deb et al., 2011 and Strully, 2009.



• Unemployment rates in the Norfolk are higher than those in Virginia Beach and Virginia, with Virginia Beach slightly lower than Virginia.





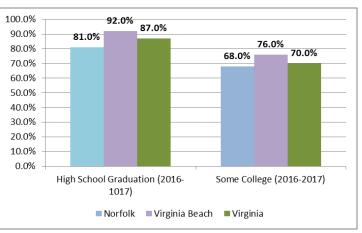


High School Graduation

A direct correlation exists between low levels of education and high poverty rates. High poverty rates in turn have an adverse effect on a community's health outcomes. The Healthy People 2020 goal for Education Level/Graduation Rates aims for at least 97.9% of students attending public schools graduate with a regular diploma four years after starting 9th grade⁸. Graduation rates for Norfolk and Virginia Beach have increased since 2014-2015. At that time, Norfolk and Virginia Beach graduation rates (78.9% and 88.5%, respectively) were lower than the Healthy People 2020 goal (82.4%) and

Virginia's (89.9%) rate.⁹

- High school graduation rates in Norfolk are lower than those in Virginia Beach and Virginia.
 Virginia Beach rates are higher than Virginia.
- The same is true of those with some college.



⁸ www.healthypeople.gov, Educational-and-Community-Based-Programs

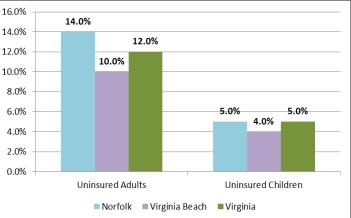
⁹ www.CountyHealthRankings.org



Uninsured Population

Research shows that high rates of health insurance coverage positively impact a community's overall health status. Access to health care services improves quality of life, school and work productivity and overall rates.¹⁰ The Healthy People 2020 goal for Health Insurance aims for 100% of the population having some form of health insurance coverage¹¹.

- Norfolk has a higher percentage of uninsured adults than Virginia and the Virginia Beach percentage is lower than Virginia.
- The percentage of uninsured children in Norfolk, Virginia Beach, and Virginia are statistically equal.



Healthy Lifestyles

Consumption of unhealthy foods, lack of exercise opportunities and other negative healthy cultures, has an adverse impact on a community. Increased access to exercise opportunities and healthy foods is a critical prevention strategy to alleviate this economic burden.¹² Low levels of physical activity are correlated with several disease conditions such as obesity, Type 2 Diabetes, cancer, stroke, hypertension, cardiovascular disease, and premature mortality. The physical activity goal set by Healthy People 2020 states that no more than 32.6% of the adult population (age 20+) report that they engages in no leisure-time physical activity¹³. The following table provides food and physical activity data for the Mary Immaculate community.¹⁴

- In Norfolk, the Food Environment Index and percentages for Food Insecurity and Access to Exercise are worse than the data reported for Virginia Beach and Virginia. The percentage for Physical Activity is statistically the same as Virginia Beach and Virginia.
- In Virginia Beach, the Food Environment Index is slightly higher (better) than Virginia's. Percentages for Food Insecurity and Physical Activity are statistically equal. The Access to Exercise percentage in Virginia Beach is also significantly higher (better) compared to Norfolk and Virginia.

¹⁰ www.healthypeople.gov, Access to Health Services

¹¹ www.healthypeople.gov, Foundation Health Measures; General Health Status

¹² www.stateofobesity.org/healthcare-costs-obesity

¹³ www.healthypeople.gov, Physical Activity

¹⁴ www.CountyHealthRankings.org

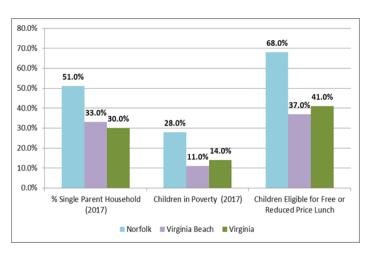


Measure and Definition of Measure	Norfolk	Virginia Beach	Virginia
Food Environment Index Factors that contribute to a health food environment, 0 (worst) to 10 (best)	6.5	8.7	8.9
Food Insecurity Percentage of population who lack adequate access to food	19%	10%	11%
Physical Inactivity Percentage of adults aged 20 and over reporting no leisure-time physical activity HP2020 Goal – 32.6%	23%	22%	22%
Access to Exercise Percentage of population with adequate access to locations for physical activity	89%	97%	82%

Social Indicators of Health Related to Children

To understand the health needs and attitudes towards health in a community it is imperative to study the social indicators of health related to children. The table provides risk factor data specific to children (<18 years old) in Norfolk and Virginia Beach.¹⁵

- The percentage of children in single parent households in Norfolk is well above the percentage in Virginia Beach and Virginia.
- The percentage of children living in poverty is significantly lower than Virginia Beach and Virginia.
- The percentage of children eligible for free or reduced price lunch in Norfolk is also significantly higher than the



percentage in Virginia Beach and Virginia.

• The percentage of children living in poverty and children eligible for free or reduced price lunch is lower in Virginia Beach than Virginia.

¹⁵ www.CountyHealthRankings.org



Health Conditions and Disease Data Profile

The Health Conditions and Disease Data Profile for DePaul community of Norfolk and Virginia Beach can be found in this section of the CHNA. This data provides a quantitative profile of the community based on a wide array of community health indicators, compiling and analyzing data from multiple sources. This CHNA focuses on health indicators for which data sources were readily available and whenever possible provides comparison to the Commonwealth of Virginia overall and the Health People 2020 goals. Additional health behaviors and social determinants of health have been identified as key contributors to the overall health of a community. Adult Smoking, Adult Obesity and Excessive Drinking are indicators with national goals from the Center of Disease Control's (CDC) Healthy People 2020 initiative as indicated in the following table.

Overall Mortality Data

Healthy People 2020 objectives define mortality rate goals per 100,000 populations for a number of health problems.¹⁶ A selection of the Healthy People 2020 mortality targets is as follows:

Healthy Peop	ole 2020 Mortality Targets		
Overall Cancer	161.4 deaths per 100,000 population		
Breast (female) Cancer	20.7 deaths per 100,000 females		
Lung Cancer	45.5 deaths per 100,000 population		
Prostate Cancer	21.8 deaths per 100,000 males		
Colon (colorectal) Cancer	14.5 deaths per 100,000 population		
Heart Disease	103.4 deaths per 100,000 population		
Stroke	34.8 deaths per 100,000 population		
Diabetes	66.6 deaths per 100,000 population		
Infant	6.0 infant deaths per 1,000 live births		
Neonatal Deaths (28 days)	4.1 neonatal deaths per 1,000 live births		
Drug Related	11.3 drug-induced deaths per 100,000		
Violence	5.5 homicides per 100,000 population		
Injuries	36.4 deaths per 100,000 injuries		

¹⁶ www.healthypeople.gov/2020/topics-objectives



In 2013, the DePaul community had a total of 3,645 deaths attributable to the leading 10 causes of mortality in the region as listed in the following tables. The three leading causes of death in Norfolk and Virginia Beach are: 1) Heart Disease, 2) Cancer, and 3) Stroke.

The table on the following page provides the number of deaths attributable to each of the top 10 causes of death for Norfolk and Virginia Beach.¹⁷

Leading 10 Causes of Mortality by Total Number of Deaths (2013)				
	Norfolk	Virginia Beach		
Diseases of the Heart	451	586		
Cancer	383	728		
Cerebrovascular Diseases (Stroke)	103	149		
Unintentional Injury	103	142		
Chronic Lower Respiratory Diseases	99	128		
Nephritis & Nephrosis (Kidney Disease)	65	69		
Septicemia	50	66		
Diabetes	49	81		
Alzheimer's Disease	42	69		
Chronic Liver Disease	31	39		

¹⁷ www.vdh.virginia.gov/healthstats/Norfolk13



Key Findings

In this section, we highlight the top ten health concerns raised by health indicators as well as by the Community Health Survey. This analysis is listed in order of priority based on the Community Health Needs Assessment Survey (Survey) to highlight how these concerns or the services addressing these concerns are perceived by the community and key stakeholders.

Behavioral/ Mental Health

Behavorial/Mental health disorders are health conditions characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning. Behavioral/Mental health disorders contribute to a number of health problems, including disability, pain and death. Behavioral/Mental health and physical health are closely connected. Mental illesses, such as depression and anxiety, affect people's ability to participate in health-promoting behaviors.

According to the National Institute of Mental Health (NIMH), an estimated 46.6 million American adults (approximately 1 in 5) were diagnosed with any mental illness (AMI) in 2017. The prevalence of AMI was higher among women than men. The prevalence of AMI was also highest among adults reporting two or more races, followed by White adults.

Additionally, suicide is the 10th leading cause of death (40,000 deaths) in the United States, moving from 11th leading cause (30,000 deaths) as reported in the 2016 CHNA. According to Healthy People 2020, the baseline suicide rate nationwide is 11.3 per 100,000. Healthy People 2020's goal is to reduce this by 10% to a rate of 10.2 per 100.000.¹⁸ The hospitalization rate due to mental health was significantly higher in Norfolk than Virginia Beach and Virginia. Virginia Beach was slightly higher.¹⁹

¹⁸ www.nimh.mih.gov/health

¹⁹ www.ghrconnects.org



Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target
Suicide Mortality Rate (per 100,000) 2017	10.9	9.7	11.8	10.2
Hospitalization Rate due to Mental Health (per 10,000) 2014-2106	70.8	58.8	52.4	

A higher percentage of Norfolk reported poor mental health days compared to Virginia Beach and Virginia. Norfolk also has a higher percentage of those reporting frequent mental destress than Virginia. Virginia Beach had a lower percentage than Virginia.²⁰

Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target
Average Number of Poor mental health days (2016)	3.8	3.4	3.4	
Frequent Mental Distress (2016)	12.3%	10.2%	11.0%	

Norfolk and Virginia Beach survey respondents prioritized Behavioral/Mental Health in the top ten health concerns. Behavioral/Mental Health Services were rated as the second most important for the Services that Needs Strengthening question by key stakeholders and the community.

Adult Obesity

Obesity is a measure defined as the percentage of adults aged 20 and older who have a body mass index (BMI) equal to or greater than 30. The obesity target set by Healthy People 2020 is that no more than 30.5% of the population is obese.²¹

The table on the next page illustrates that 32% of Norfolk residents are obese, which is a decrease of 3% since 2011. Virginia Beach's obesity rate is equal to Virginia and lower than HP2020 goals; however, it is an increase of 1% over 2011. Physical inactivity

²⁰ www.ghrconnects.org

²¹ www.healthypeople2020.gov



in Norfolk, Virginia Beach and Virginia is significantly lower than HP2020 goals, although Virginia Beach has a 1% increase over 2011.²²

Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target *
Obesity (%) 2015	32.0%	29.0%	29.0%	30.5%
Physical Inactivity (%) 2015	23.0%	22.0%	22.0%	32.6%

Key stakeholder and community survey respondents identified Overweight/Obesity as second in the top ten health concerns. It was not identified in the top ten Services that Need Strengthening.

Alcohol/Substance Abuse

In November 2016, Virginia State Health Commissioner, Dr. Marissa Levine, declared a Public Health Emergency for Virginia as a result of the opioid addiction epidemic in an effort to lower the death rate and prevent deaths from opioid addiction.

Opioid deaths have have significantly increased in Norfolk and Virginia Beach since 2013. In 2013, the death rate due to Fentanyl/Heroin in Norfolk was 6.9 per 100,000 and Virginia Beach was 6.7. Narcan adminstration by emergency medical services was 2.4 per 100,000 in Norfolk. Narcan use was significantly higher in Virginia Beach at 21.6 per 100,000.²³

The table on the next page shows the death rates for drug overdose, Fentanyl/Heroin overdose, and prescription drug overdose death rate for Norfolk and Virginia Beach..²⁴ The drug overdose death rate for Norfolk (24 per 100,000) is significantly higher than the Virginia rate of 16 per 100,000. Virginia Beach is slightly higher at 17 deaths per 100,000. The death rate due to Fentanyl/Heroin is significantly higher than Virginia Beach and Virginia. The death rate for Virginia Beach is slightly lower than that of Virginia. The death rate due to prescription opioid overdose is higher in Norfolk and Virginia Beach than Virginia. Virginia Beach is slightly higher than Norfolk. Narcan administration for emergency medical services has significantly increased in Norfolk (47.3 per 100,000) and Viginia Beach (45.5 per 100,000) since 2013 (2.4 and 21.6 respectively).

²² www.CountyHealthRankings.org

²³ www.ghrconnects.org

²⁴ www.ghrconnects.org



Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target
Drug Overdose Deaths (per 100,000) 2015-2017	24.0	17.0	16.0	
Death Rate due to Fentanyl/Heroin Overdose (per 100,000) 2017	18.8	10.4	11.0	
Death Rate due to Prescription Opioid Overdose (per 100,000) 2017	6.5	7.5	5.9	
EMS Narcan Administration Rate (per 100,000) 2017	47.3	45.5	53.9	

The following table illustrates the percentage for excessive drinking is higher Norfolk (21.1%) and Virginia Beach (22.0%) than Virginia (17.4%), with Virginia Beach slightly higher than Norfolk. While the percentages for adults who binge drink are statistically equivalent for Norfolk and Virginia Beach, they are higher than the HP2020 Target of 24.2%. Deaths due to alcohol-impaired driving are higher in Norfolk and Virginia Beach compared to Virginia.²⁵

Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target
Excessive Drinking (2016)	21.1%	22.0%	17.4%	25.4%
Adults who Binge Drink (2015)	18.4%	18.9%		24.2%
Alcohol-impaired Driving Deaths (2013-2017)	36.0%	39.0%	31.0%	

Community and key stakeholder survey responses placed Substance/Alcohol Abuse as the number three health concern. It was also in the top ten Services that Need Strengthening for both respondent groups.

Heart Conditions

Heart Disease is the leading cause of death in the United States and globally. In 2013, nearly 801,000 deaths in the United States resulted in heart disease, stroke and other cardiovascular diseases. One out of every three deaths in the United States in 2013

²⁵ www.ghrconnects.org



could be attributed to these causes.²⁶ Stroke is the second leading cause of death globally, and the fifth leading cause of death in the United States. In 2010 alone, the United States incurred more than \$500 billion in health care expenditures and related expenses as a result of heart disease and stroke. Stroke is also a leading cause of disability in the United States.

Healthy People 2020 mortality goals for Heart Disease and Stroke include the following:

Healthy People 2020 Heart Disease & Stroke Mortality Goals			
Heart Disease 103.4 deaths per 100,000 population			
Stroke	34.8 deaths per 100,000 population		

The leading modifiable (controllable) risk factors for heart disease and stroke are high blood pressure, high cholesterol, cigarette smoking, diabetes, poor diet, physical inactivity, and overweight/obesity.

The following table displays Stroke and Heart Disease Mortality for Norfolk and Virginia Beach²⁷ Since 2013, Norfolk's rate of heart disease mortality declined by 37.8. The rate of heart disease mortality in Virginia Beach declined 11.9 since 2013. Norfolk's heart disease mortality rate is significantly higher than Virginia Beach and Virginia. The rate of heart disease mortality in Virginia Beach is lower than that of Virginia.

Health Issue	Norfolk	Virginia Beach	Virginia	HP2020 Target *
Stroke Mortality Rate (per 100,000) 2017	46.9	36.0	31.8	34.8
Heart Disease Mortality Rate (per 100,000) 2017	178.0	126.6	133.1	

High blood pressure is the number one risk factor for stroke that can be corrected. High blood pressure can also lead to heart attack, heart failure, and atherosclerosis. One in

²⁶ www.heart.org/idc/groups/ahamah-public

²⁷ www.ghrconnects.org



three adults has high blood pressure in the United States. The prevalence of high blood pressure in Norfolk and Virginia Beach is below that of the United States; however, it is above the Healthy People 2020 goal. One in six adults has high blood cholesterol, one of the major risk factors for heart disease. The prevalence of high cholesterol in Norfolk and Virginia Beach is below that of the United States²⁸

Health Issue	Norfolk	Virginia Beach	United States	HP2020
High Blood Pressure	30.3%	29.5%	31.9%	26.9%
Prevalence (2015)	00.070	20.070	01.070	20.070
High Cholesterol Prevalence: Adults (2015)	30.9%	33.8%	37.1%	

Key stakeholders and the community identified Heart Conditions as the fourth top concern. Heart Conditions was not listed in the top ten Services that Need Strengthening by either Survey group.

Diabetes

Diabetes is a leading cause of death in the United States. Diabetes can have a harmful effect on most of the organs in the human body and can cause renal failure, lower-extremity amputation, and blindness among adults. It can also cause stroke and neuropathy.²⁹

Since 2013, Norfolk's diabetes mortality rate decreased 3.8%; however, it remains higher than that of Virginia Beach and Virginia, which decreased 3.9% and 0.7% respectively in the same period.³⁰

Health Issue	Norfolk	Virginia Beach	Virginia
Diabetes Mortality Rate (per 100,000) 2017	21.0	14.5	17.6

²⁸ www.ghrconnects.org

²⁹ www.ghrconnects.org

³⁰ www.ghrconnects.org



Since 2014, the percentage of adults with diabetes has increased; however, both cities are below the percentage of adults with diabetes in the United States.

The table below shows data around diabetes rates and hospitalization.³¹ The rate of hospital discharges in Norfolk for diabetes without complication is higher than Virginia's, while Virginia Beach's rate is lower. The rates for Norfolk and Virginia have increased 2% and 1.4% respectively since 2013.

Health Issue	Norfolk	Virginia Beach	United States
Adults with Diabetes (2016)	9.9%	8.8%	10.8%
Hospitalization Rate due to Diabetes: Adults (per 10,000) 2014-2016	28.1	14.4	17.1

Diabetes was rated as the number five health concern by key stakeholders and community Survey respondents. It was also in the top five as a Services that needs Strengthening (Chronic Disease Services subcategory).

Cancer

Cancer has been identified as the second greatest cause of death nationwide, with Heart Disease being number one. According to data from the National Cancer Institute cancer rates $(2011 - 2015)^{32}$ in Norfolk fell and remained steady in Virginia Beach. However, cancer remains a leading cause of death in the DePaul Medical Center service area. Cancer mortality rates advanced by Healthy People 2020 include the following:³³

Healthy People 2020 Cancer Mortality Rate Goals			
Overall Cancer 161.4 deaths per 100,000			
Breast Cancer	20.7 deaths per 100,000 females		
Lung Cancer	45.5 deaths per 100,000		
Prostate Cancer	21.8 deaths per 100,000 males		
Colon (Colorectal) Cancer	r 14.5 deaths per 100,000		

³¹ www.ghrconnects.org

³² www.statecancerprofiles.cancer.gov/incidencerates

³³ www.healthypeople.gov, Cancer



The following table provides the five-year total mortality/rates by cancer type for Norfolk and Virginia Beach compared to Virginia.³⁴ Since 2000, mortality rates for breast, colon, lung and prostate cancer have been dropping steadily in both Norfolk and Virginia Beach. With the exception of the lung cancer rate in Norfolk, these rates are all within a couple of points of the Healthy People 2020 (HP2020) target. Rates for colon and prostate cancer in Virginia Beach have already been met and dropped below the HP2020.

Cancer Mortality Rates 2011 -2015 (per 100,000)						
	Norfolk	Virginia Beach	Virginia	HP2020		
Colon Cancer	14.6	12.8	14.0	14.5		
Lung Cancer	50.0	45.0	44.0	45.5		
Prostate Cancer	27.9	18.8	20.2	21.2		
Breast Cancer	28.5	23.1	21.8	20.7		

The following tables provide total mortality/rates per 100,000 by cancer type for Norfolk and Virginia Beach (2011 - 2015) compared to Virginia³⁵.

Colon Cancer

Since 2007, Norfolk Colon Cancer Mortality rates have steadily decreased; however, remain higher than Virginia and the Healthy People 2020 target. Virginia Beach rates slightly increased from 2008-2012. Virginia Beach mortality rates are lower than Virginia and the HP2020 target.

Colon Cancer Mortality (rate per 100,000)						
	2007-2011 2008-2012 2011-2015					
Norfolk	17.4	15.0	14.6			
Virginia Beach	12.6	12.5	12.8			
Virginia	15.4	14.9	14			
HP2020	14.5	14.5	14.5			

³⁴ www.ghrconnects.org

³⁵ www.ghrconnects.org



• Lung Cancer

Since 2007, Lung cancer mortality rates in Norfolk and Virginia Beach have steadily decreased. Lung cancer is the second most commonly diagnosed cancer (excluding non-melanoma skin cancer) and a leading cause of cancer death among both men and women in the United States. Cigarette smoking is the strongest risk factor for lung cancer. Other risk factors include exposure to second-hand smoke, radon, and asbestos.³⁶

Lung Cancer Mortality (rate per 100,000)							
	2007-2011 2008-2012 2011-2015						
Norfolk	55.9	53.4	50.0				
Virginia Beach	47.5	47.1	44.0				
Virginia	49.5 48.2		44				
HP2020	45.5	45.5	45.5				

Prostate Cancer

 Prostate cancer mortality rates in Norfolk decreased between 2007 and 2012; however, the rates increased by 2015. Norfolk rates are above Virginia rates and the Healthy People 2020 target. Virginia Beach rates have steadily decreased and are below HP2020 goals. The strongest risk factors for developing Prostate cancer are age, race/ethnicity, and family history.³⁷ Prostate cancer is the most commonly diagnosed cancer (excluding non-melanoma skin cancer) and the second leading cause of cancer death among men in the United States.

Prostate Cancer Mortality (rate per 100,000)							
	2007-2011 2008-2012 2011-201						
Norfolk	26.2	24.7	27.9				
Virginia Beach	21.0	20.7	18.8				
Virginia	23.5	22.4	20.2				
HP2020	21.2	21.2	21.2				

³⁶ www.cancercoalitionofvirginia.org/VirginiaCancerData

³⁷ www.cancercoalitionofvirginia.org



Breast Cancer

 Breast cancer is the most commonly diagnosed cancer (excluding non-melanoma skin cancer) and a leading cause of cancer death among women in the United States. Between 2007 and 2012, Breast cancer mortality rates in Norfolk steadily decreased; however, they increased by 2015. Virginia Beach mortality rates remained steady since 2007. Both cities are above Virginia rates and the HP2020 target.

Breast Cancer Mortality (rate per 100,000)						
	2007-2011 2008-2012 2011-2015					
Norfolk	24.1	23.8	28.5			
Virginia Beach	23.1	23.3	23.1			
Virginia	23.4 22.7		21.8			
HP2020	20.7	20.7	20.7			

Both key stakeholders and the community survey respondents rated Cancer in the top 10 health concerns. They did not include Cancer in the top ten Services that need strengthening.

Violence in the Community

Violent crimes are defined as physical offenses and confrontations between individuals, including homicide, forcible rape, robbery, and aggravated assault. High levels of violent crime result in feelings of being unsafe and may deter people from engaging in healthy behaviors such as exercising outdoors.

The table on the following page shows the violent crime rates in Norfolk and Virginia Beach.³⁸ Since the last reporting period (2012-2014), the general violent crime rate in Norfolk and Virginia Beach has increased.

Norfolk's violent crime rate is significantly higher than Virginia and Virginia. Norfolk homicides are also significantly higher than Virginia; Virginia Beach homicides are slightly lower. Firearm fatalities in Norfolk are also much higher than Virginia Beach and Virginia.

³⁸ www.countyhealthrankings.com



Health Issue	Norfolk	Virginia Beach	Virginia
Violent Crime Rate (per 100,000) 2014- 2016	603.0	152.0	207.0
Homicides (2011- 2017)	13.0	4.0	5.0
Firearm Fatalities (2011-2017)	19.0	10.0	11.0

Community Survey respondents listed Violence in the Community in the top five health concerns; it was in the top ten concerns for key stakeholders. It was not in the top ten Services that Need Strengthening.

Smoking/Tobacco Use

Tobacco use is the agent most responsible for avoidable illness and death in America. Almost half a million Americans die prematurely due to tobacco use. Exposure to secondhand smoke for non-smokers can cause a wide range of adverse health effects such as cancer, respiratory infections, and asthma. The percentage of adult smokers in Norfolk (20.0%) and Virginia Beach (17.1%) is higher than Virginia (15.0) and the Healthy People 2020 goal of 12.0%. However, the percentages have decreased since 2014 from 22.5% in Norfolk and 19.0% in Virginia Beach.³⁹

With a rate of 38.3 (per 100,000), Norfolk has some of the highest rates of chronic lower respiratory mortality across the Hampton Roads region; however, the rates have decreased by 14.4 (per 100,000) since 2014. The rates in Virginia Beach have been declining since 2010, with a 3.3 (per 100,000) decrease since 2014. Norfolk's rate is significantly higher than Virginia, while Virginia Beach is slightly lower than Virginia. In addition, the percentage of Norfolk residents and Virginia Beach who reported they had asthma has remained statistically steady since 2014.

Chronic obstructive pulmonary disease (COPD) refers to a group of diseases that cause breathing problems. The primary cause of COPD is tobacco use. The percentages of adults with COPD in Norfolk and Virginia Beach are statistically steady since 2014. Hospital utilization rates due to COPD and community acquired pneumonia in Norfolk are higher than Virginia, whiles Virginia Beach rates are lower. (See table on following page.)

³⁹ www.ghrconnects.org



	Norfolk	Virginia Beach	Virginia	HP2020
Lung Cancer Mortality Rates (per 100,000) 2011-2015	50.0	44.0	44.0	45.5
Lung & Bronchus Cancer Incidence Rate (per 100,000) 2011-2015	74.7	69.9	58.9	

- Asthma is a result of inflamed air passages which cause difficulty with breathing. It is one of the most common diseases of children and millions of adults in America. Exposure to cigarette smoke, among other allergens, can cause asthma. The percentage of people with asthma in 2016 in higher than Virginia Beach. While the Norfolk percentage increase slightly (.1%) since 2016, Virginia Beach remained the same. Since 2014, hospitalization rates due to asthma decreased in Norfolk by 10.1% and Virginia Beach 12.1%.40
- Lung cancer was addressed in a previous section; however, it is included in this section because tobacco use is the greatest risk factor for lung cancer.

Smoking/Tobacco Use was listed in the Survey top ten health concerns by key stakeholders and the community. It was not included in the top ten Services that Need Strengthening.

Alzheimer's Disease/Dementia

Dementia is not a specific disease, but is an umbrella term for a group of symptoms describing a decline in mental abilities. Alzheimer's disease is a brain disease that increases over time and is the most common form of dementia. According to the Alzheimer's Association, Alzheimer's is the 6th leading cause of death in the United States and every 65 seconds someone develops the disease.⁴¹ In 2017, 2,549 people

died from Alzheimer's disease in Virginia. In Norfolk, the percentage of those diagnosed with Alzheimer's disease or dementia is 11.5%. The percentage for Virginia

Health Concern	Norfolk	Virginia Beach	Virginia
Adults with Current Asthma (2016)	9.6%	8.5%	
Hospital Utilization Rate due to Adult Asthma (per 10,000)	12.4	6.9	6.6

Beach is slightly better at 10.5%.⁴²

⁴⁰ www.ghrconnects.org

⁴¹ www.alz.org

⁴² www.ghrconnects.org



Alzheimer's disease was selected in the top ten top concerns by key stakeholders on the survey. A related category of Aging Services was selected by both key stakeholders and the community for Services that Needs Strengthening.

Chronic Pain

Chronic pain is pain that persists for weeks, months and years. There may have been an injury or illness, but the pain continues hurting after the initial condition heals. Some other causes of chronic pain are arthritis, osteoporosis, osteoarthritis, and rheumatoid arthritis, among others.

Arthritis is the number one cause of disability in the United States. More than 50 million adults have diabetes, a disorder of the joints, bones, muscles, and cartilage. Two of the most common types of arthritis are osteoarthritis and rheumatoid arthritis. Osteoarthritis is a degenerative joint disease. With osteoarthritis, a joint's cartilage breaks down and can cause bony overgrowth. Rheumatoid arthritis is an autoimmune disease that usually affects the small joints in the hands and feet. It can also affect other organs in the body.⁴³ Since 2014, the percentage of adults with arthritis has decrease in Norfolk by 1.3%. it has increased in Virginia Beach by 1.5% in the same time period.

Since 2017, the percentage of older adults diagnosed with rheumatoid arthritis or osteoarthritis has decreased in both Norfolk and Virginia Beach by 3.8% amd 3.4% respectively. Although the percentages are decreasing in both cities, they are still higher than Virginia.

Other Key Findings

This section provides an overview of other key findings and perceptions of health within the DePaul Medical Center community, which includes the cities of Norfolk and Virginia Beach. It combines and compares data from the Community Health Needs Assessment with an analysis of secondary data.

In addition to the top ten health concerns, the Survey asked participants to select the top five most important options from a list of approximately 25 choices. The questions asked about health concerns for children and teens (ages 0-17), healthcare services that need strengthening, access to healthcare barriers, and community assets that need strengthening in their community.

⁴³ www.ghrconnects.org



Services that Need Strengthening - Adults

The top ten Services that Need Strengthening based on key stakeholder and community participants are listed below. It is interesting to note that eight of the top ten services were selected on both surveys. Access to Care and Primary Care Services were included in the key stakeholder top ten Services that Need Strengthening.

Dental/Oral Health and Public Health Services were among the top ten for community participants.

Behavioral/Mental Health
Heath Insurance Coverage
Access to Care
Aging Services
Alcohol/Substance Abuse Services

Chronic Disease Services Dental/Oral Health Services Care Coordination & Transitions of Care Health Promotion & Prevention Services Public Health Services

Services that Need Strengthening – Children and Teens (ages 0-17)

As with the top ten Services that Need Strengthening – Adults, Behavioral/Mental Health Services is listed as the most important service by both key stakeholder and community participants. In addition, eight of the top ten Services that Need Strengthening for children were selected on both Survey participants. Self Management Services and Social Services were included in the key stakeholder top ten selections. Primary Care, Public Health Services and Social Services were in the top ten for community participants. Community Survey participants rated Child Abuse Treatment Services and Alcohol/Substance Abuse Disorders equally.Key Stakeholders rated Dental/Oral health Services and Self-Managemant Services equally. Much of the quantitative data around children and teens is limited due to confidiality; therefore, much of the information in this section and the next are primarily qualitative based on comments included on the Surveys and the Community Dialogues.

The list of the top eleven Services that Needs Strengthening – Children and Teens is below.

Behavioral/Mental Health Health Insurance Coverage Parent Education & Prevention Programs Child Abuse Prevention & Treatment Foster Care Alcohol/Substance Abuse Disorders Self-Management Services Public Health Services Dental/Oral Health Services Care Coordination & Transitions of Care Primary Care



Health Concerns for Children and Teens (ages 0-17)

When asked about health concerns related to children and teens, eight of the top ten health concerns were included on both the key stakeholder and community Survey responses. Key Stakeholders included Dental/Oral Care and Sexually Transmitted

Infections in their top ten health concerns for children. The community included Smoking/Tobacco Use and Teen Pregnancy in the top ten.

Behavioral/Mental Health Overweight/Obesity Bullying Alcohol/Substance Abuse Violence in the Home – Child Abuse Violence in the Community Hunger Smoking/Tobacco Use Sexually Transmitted Infections Teen Pregnancy

Behavioral/Mental Health

Emotions as children reach their teen years may be difficult to understand and manage. Teens may experience depression or volatile emotions leading to problems at home and school, eating disorders, drug abuse, among others. The percentage of teen who feel sad or hopeless is the same in Norfolk, Virginia Beach, and Virginia at 25%. The

hospitalization rate due to pediatric mental health has increased in Norfolk and Virginia Beach since 2012. Norfolk has experienced an increase of 26.6 hospitalizations and Virginia Beach has seen an increase of 20.3 hospitalizations. Both cities are significantly higher than Virginia with 29.9 hospitalizations.⁴⁴

Health Issue	Norfolk	Virginia Beach	Virginia
Teens who Felt Sad or Hopeless (2013)	25.0%	25.0%	25.0%
Hospitalization Rate due to Pediatric Mental Health (per 10,000) 2014-2016	55.9	47.0	29.9

Overweight/Obesity

Obesity in children and adults often leads to adult obesity. Health issues faced by obese or overweight youth often lead to more severe health problems when they become adults. There are many factors that contribute to childhood obesity such as lack of access to healthy foods, inactivity, medication, and their physical/social environment. In 2013, the latest measurement period, 33% of Norfolk's children and teens were overweight or obese, which is higher than Virginia Beach (28%) and Virginia (28%).⁴⁵

⁴⁴ www.ghrconnects.org

⁴⁵ www.ghrconnects.org



Bullying

Bullying can be physical or emotional. It can affect a child for life through lower selfesteem, depression, and suicide. The latest data around bullying is from 2013. The percentage of teens who reported being bullied in Norfolk (19%) is lower than Virginia Beach (20%) and Virginia (20%).

Alcohol/Substance Abuse

Research shows that teens who begin drinking alcohol at a young age tend to develop an alcohol dependency as they become adults more frequently than those who do not drink before age 21. In 2013, the most recent measurement year, Norfolk had the lowest percentage (26%) of teens who reported using alcohol. Twenty-nine percent (29%) of Virginia Beach teens reported using alcohol, which is 1% lower than Virginia.

Violence in the Home – Child Abuse

Child Abuse takes many forms – neglect, physical, sexual, and emotional – and can have long-term effects damaging self esteem, the abiity to form healthy relationships, and to function in a healthy manner. Norfolk saw a steady decrease in child abuse rates from 2011 to 2014 from 7.6 per 1,000 children to 5.5. Since 2014, the rate in Norfolk has significantly increased to 11. The rate in Virginia Beach has steadily decreased from 4.1 per 1,000 children to 2.8.

Hunger

Hunger can affect people from all walks of life and many Americans are one job loss or medical crisis from experiencing food insecurity. In the United States, one in six hildren may not know where there next meal will come from or when.⁴⁶ ood Insecurity results from a limited or uncertain availability of healthy foods. Scarce food resources can lead to health problems and arrested development. Children with food insecurity are at a greater risk of developing chronic diseases such as obesity, asthma, and anemia. Other risks may include hyperactivity, anxiety, and bullying.

 The percentage of children with food insecurity in Norfolk is higher than Virginia Beach and Virginia. Norfolk's percentage has slightly decreased (0.9%)

	Norfolk	Virginia Beach	Virginia
Child Food Insecurity Rate (2016)	18.5%	12.7%	13.3%
Children who are SNAP Participants (2017)	45.4%	46.5%	44.8%

since 2013, while Virginia Beach's percentage has decreased 3.5%. The percentage in Virginia Beach is lower than Virginia. SNAP (Supplemental Nutrition

⁴⁶ www.feedingamerica.org



Assistance Program) is a federal program that assists low-income families with purchasing healthy food. The percentage of children who are SNAP participants in Norfolk, Virginia Beach, and Virginia are close to being equivalent with Virgnia Beach being slightly higher than Norfolk and Virginia. The 2017 rates for both cities have steadily increased since 2013.⁴⁷

Smoking/Tobacco Use

Teens who start smoking are more likely to develop a long-term addition to tobacco than those who do not smoke. According to the Centers for Disease Control and Prevention, it is estimated that 5 million people under the age of 18 will die from smoking-related diseases, which have been reviewed in a previous section. As of 2013, the most recent data available, 18% of Norfolk teens reported using tobacco products. This is lower that the percentages for Virginia Beach (20%) and Virginia (20%).

Sexually Transmitted Infections

Since 2013, diagnoses for Sexually Transmitted Infections (STIs) continue to increase. As seen in the table, the rate of STIs in Norfolk is significantly higher than Virginia Beach and Virginia.⁴⁸

Health Issue	Norfolk	Virginia Beach	Virginia
Chlamydia Incidence (per 100,000) 2016	1316.2	604.5	471.6
Gonorrhea Incidence Rate (per 100,000) 2016	425.7	162.3	131.8
HIV Diagnoses Rate (per 100,000) 2017	31.8	13.3	
HIV/AIDS Prevalence Rate (per 100,000) 2016	876.2	280.3	189.3

Teen Pregnancy

Since 2011, the teen pregnancy rate per 1,000 females ages 15 – 17 significantly decreased in Norfolk, Virginia Beach, and Virginia. Norfolk remains higher than Virginia Beach and Virginia.⁴⁹

⁴⁷ www.ghrconnects.org

⁴⁸ www.ghrconnects.org

⁴⁹ www.countyhealthrankings.org



Access to Health Services

Survey participants were asked to select the top five barriers to accessing health services from a list eleven options. The number one barrier identified by key stakeholders and the community was Costs. The list of barriers to in order of priority is below.

Costs Health Insurance Transportation Time Off from Work Understanding the Use of Health Svcs Childcare Location of Health Services No/Limited Home Support Network Lack of Medical Providers Discrimination No/Limited Phone Access

Community Assets that Need Strengthening

There are many things that impact health outstide of the direct provision of healthcare. Survey participants were ask to select the top five community assets they felt need to be strengthened in their community. The list of the top ten selected by key stakeholders and community participants in order of priority is below.

Transportation Healthy Food Access Safe, Affordable Housing Affordable Childcare Social Services

Homeless Services Senior Services Employment Opportunity Safe Play & Recreation Spaces Neighborhood Safety

Identifying Needs

This report has highlighted health issues and services that are being effectively addressed by the DePaul community, as well as health issues that may need additional focus in the future.

Both the Survey and secondary data analysis identify important areas to consider prioritizing in the community health improvement planning process. The community and environmental factors highlighted by the community as concerns are important issues that should be considered when planning initiatives or programs to address any of the key health issues.



Community Dialogues

A total of 11 focus group meetings called Community Dialogues were held in the Hampton Roads region in which 283 individuals participated. The purpose of the meetings was to elicit feedback from community members about publically available health data describing health conditions in the service area and to review the online survey results to further explore the findings. The list of Community Dialogues and attendance is in Appendix II.

Six Community Dialogues were held in Norfolk and Virginia Beach in which 108 individuals participated. The meetings began with community members participating in a matrix exercise in which they selected the three most important of the top ten health concerns identified in the Survey. Following matrix exercise, a presentation explaining the CHNA process was shown. For sessions with larger numbers in attendance, participants were then divided into groups to discuss the top concerns identified in the matrix exercise. Smaller sessions were discussed as a single group. Breakout session facilitators lead the discussions with the following questions: Why are these issues? What is causing the issues? What can be done to address the issues? Comments were written down by a staff member or volunteer.

Prioritization Process

Method for Prioritization

DePaul Medical Center's senior leadership team met to review primary and secondary data gathered through the CHNA process (community meetings, community and key stakeholder surveys, and meetings with regional health systems and health departments). The team evaluated each of the top ten health concerns and services that need strengthening identified, the hospitals strategic goals, services currently provided, available hospital resources, and the current CHNA Implementation Plan's progress. After narrowing the top ten health concerns to the top five identified by both the community and key stakeholders, the team then determined the areas in which they could have the greatest impact.

Based on the above information and processes, DePaul will focus the CHNA Implementation Plan on Substance Abuse, Heart Conditions, and Chronic Health in Aging Adults. The implementation plan around Substance Abuse includes clinical initiatives and community education around opioid abuse. DePaul will address Heart Conditions and Chronic Health in Aging Adults through partnering with medical providers and community groups to increase awareness. In addition, monthly



educational programming on each of the top ten health concerns identified in the CHNA process will be provided through Bon Secours SeniorHealth.

While the CHNA Implementation Plan will focus on Substance Abuse, Heart Conditions, and Chronic Health in Aging Adults, DePaul will also support mental health efforts through support groups, community education, and referral to local community service boards. Active participation in coalitions addressing homelessness will continue and medical service for the uninsured population will continue through the Bon Secours Care-A-Van and Life Coach programs. Active participation in coalitions addressing behavioral/ mental health, especially in the area of opioid abuse and chronic conditions, will continue. DePaul will also address obesity and diabetes through community education. School partnerships will continue to provide nutritional and physical health education.

Although DePaul Medical Center recognizes the importance of all of the top ten health concerns identified by the community and key stakeholders, resources are limited within the organization to prioritize all of the needs. There are other providers and organizations addressing these needs with specialized programs and services. DePaul is prepared to collaborate/assist with these efforts beyond the current set of services we provide.

Progress on 2016 – 2019 CHNA Identified Priorities

After reviewing the results of the DePaul Medical Center 2016 – 2019 Community Health Needs Assessment and assessing the hospital's resources to address the needs identified, senior leadership selected Mental Health, Obesity and Homelessness. In addition, Cancer was added based on secondary data indicating the high incidence of Cancer then the area. Human Trafficking is one of the Bon Secours advocacy resolutions and the high incidence of both labor and sex trafficking in the Norfolk/Virginia Beach area.

Mental Health

- Over the past three years, over 1,500 emergency room patients received telepsych services in the emergency room. The wait time for those emergency room patients accessing behavioral/mental health specialists decreased almost from 110 minutes to less than 60 minutes.
- Life Coaches in the emergency room referred 334 patients to mental health services or the Norfolk Community Services Board. Life Coaches also referred 45 patients in



FY19 for psychiatric bed placement, 4 patients for crisis stabilization. Care-A-Van staff referred 84 patients to the Norfolk Community Services Board.

• Forty-nine (49) people participated in Family Focus programming designed to provide parent education on raising healthy families.

Obesity

- The Passport to Health (PTH) initiative launched in FY17 in the East Ocean View community of Norfolk with 71 participants (40 families). The six-month program provides families with education around healthy food and exercise in a relaxed, friendly environment. Screenings are done at the beginning of the program. By the end of the first session, ten members competed two 5K marathons. Since the first PTH session, 44 people attended the sessions, 15 participated in the PTH 5K Walk/Run. The total class reduction in BMI is 31.92, nine participants showed a decrease in blood pressure, eight participants showed a decrease in cholesterol (one decreased from 230 to 100), 5 participants showed a decrease in glucose and A1C levels.
- Nutritional counseling was provided to stroke survivors and their families by the InMotion team.
- Twenty-three (23) employer and community health events were held with 677 in attendance.
- Enrollees in the DePaul Medical Weight Loss program saw an average BMI reduction of 5.01.
- The Heart Health Academy, a three-hour educational program geared to middleschool children, is taught by Dr. Lancey, a Bon Secours cardiologist. The session has been attended by 1,303 students, with an average pre- and post-knowledge test score increase of 17.7%.

Homelessness

- Care-A-Van staff saw 1,934 homeless people at Union Mission and several churches in Norfolk. Lab services in the amount of \$155,439 were provided to Care-A-Van patients.
- Life Coaches saw 5,894 uninsured or underinsured emergency room patients. They referred 2,017 patients to primary care physicians and 290 to specialists for follow-up. Seventy (70) patients were referred for dental care. Housing resources were provided to 277 patients.
- Partnership with the Southeastern Virginia Homeless Coalition, a regional effort to connect the homeless population in Hampton Roads with resources.



- Collaboration with Hampton Roads Housing Consortium to investigate and develop plans to address issues affecting the homeless population, including continuum of care and housing opportunities for homeless veterans. Serve as a Board member.
- Partnerships with Commonwealth Catholic Charities Regional Advisory Committee to advocate for housing support throughout the region.
- Community Health and Care-A-Van participation in annual Norfolk Homeless Connect Project providing approximately 500 homeless people in Norfolk each year with health screenings, haircuts, clothing, a healthy meal, and resource information.

Cancer

- Nurse Navigators at DePaul Medical Center assisted 2,298 patients diagnosed with breast, lung, and colorectal cancer from diagnosis to end of treatment.
- Care-A-Van staff screened 287 patients with 23 referred for colonoscopy. FIT screenings were provided by the Care-A-Van for 81 patients, with 41 patients returning for results, 4 patients had positive results, and 4 colonoscopies were performed. Colorectal cancer screenings were increased by 7%.
- Free SPOTme® skin cancer screenings were done in partnership with Eastern Virginia Medical School with 106 participants screened. Nearly two-thirds of the participants were identified as needing follow-up, 41 were referred to dermatologists, and 24 biopsies were recommended.
- Sixty-eight (68) patients received skin cancer screenings at a second site, with 51 needing no follow-up, 9 were recommended to see a dermatologist for close monitoring, and 8 were recommended for biopsies.

Human Trafficking

- Annual mandatory electronic educational component developed for all Bon Secours employees.
- Specialized training for frontline staff in recognizing and treating potential human trafficking victims.
- Human Trafficking educational presentation provided to multi-cultural audience in East Ocean View (7 cultures represented) in partnership with Norfolk Public Schools and Norfolk Parks & Recreation.
- Advocacy at Virginia General Assembly in support of legislation to require posting of Human Trafficking information at all hospitals emergency rooms and other community locations. Legislation passed in 2018, posters installed in emergency room bathrooms and admission area, as well as on the Care-A-Vans.



- Partnership with Virginia Beach Justice Initiative to provide medical care and safe housing for human trafficking victims. Rescued trafficking victims in Hampton Roads are taken to Bon Secours Maryview Health Center for treatment.
- Active participation in the Hampton Roads Coalition Against Human Trafficking (HRCAT) meetings and summits.

Services and Resources Available to Meet Identified Needs

Although DePaul Medical Center recognizes the importance of all the needs identified by the community, resources are limited within the organization to prioritize all of these needs. There are other providers and organizations addressing these needs with specialized programs and services, many of whom serve on the regional Community Health Needs Assessment Coalition. DePaul Medical Center is prepared to collaborate or assist with these efforts beyond the current set of services we provide.

The list below provides names of some resources in the area that can help meet the identified needs of the community:

ACCESS Catholic Charities of Eastern Virginia Chesapeake Free Clinic (Dental) Chesapeake Regional Medical Center Children's Hospital of The King's Daughters Eastern Virginia Medical School Foodbank of Southeastern Virginia Geriatrics Life Care Hampton Roads Community Health Center(s) Hampton Roads Community Foundation Jewish Family Services Lake Taylor Hospital Norfolk Department of Public Health Old Dominion University Operation Blessing (Dental) Response – Sexual Abuse Support Services Senior Services of Southeastern Virginia Sentara Healthcare The Barry Robinson Center United Way of South Hampton Roads Veterans Affairs Medical Center Virginia Supportive Housing

For a list of additional resources available to meet identified needs of the community, please review the Virginia Department of Health's Community Services Resource Guide at https://www.vdh.virginia.gov/Resources.

The Bon Secours DePaul Medical Center 2020 – 2022 Community Health Needs Assessment was approved by the Bon Secours Hampton Roads Board of Directors on July 23, 2019.



For further information or to obtain a hard copy of this Community Health Needs Assessment (CHNA), please contact:

Bon Secours Hampton Roads Community Health at (757) 217-0330 or

http://bshr.com/about-us-community-health-needs-assessment.html



APPENDIX



APPENDIX I

Community Health Needs Assessment Survey – Key Stakeholders

100 Black Men of VA Peninsula

16th & Arctic Community Assoc

AARP

Abbitt Realty

Access Partnership

Access Partnership

Accomack County City Council

Accomack County Board of Supervisors

Accomack County DSS

Accomack County Public Schools Board

Accomack County Public Schools

Accomack County Sheriff's Office

Accomack DSS

Accomack Northampton Planning District

Adult Day Center

Adult Protective Services

Advanced Aeromedical

Advanced Technology Institute Albemarle Health

Aldersgate United Methodist Church

All Nations Church

Allied Health Services, Hertford County Public Schools

Alpha Phi Alpha Fraternity, Inc, Delta Beta Lambda Chapter

Altmeyer Funeral Home

Alzheimer's Association (Southeastern VA Chap.)

American Cancer Society

American Diabetes Association

American Red Cross

Anesthesia Specialists

Angels of Mercy Medical Clinic

Aragona Village Civic League

Arrowhead Elementary School

Art Ray, Inc.

Asian Business Association of Hampton Roads

Atlantic Shores Baptist Church Atlantic Orthopaedic Specialists

Atlantic Shores Christian Schools

Auxiliary Board/Sentara

Auxiliary Board/SPAH

Auxiliary/Sentara

Avalon: A Center for Women and Childern

Back Bay/Pungo Civic League

Bacon Street Youth and Family Services

Bariatric Surgery

Barry Robinson Center

Bay Aging

Bay Rivers Telehealth Alliance

Bayside Health & Rehab Ctr

Bayside High School

Bayside Library

Bayside Middle School

Bayview Elementary School

Bayview Infectious Disease Consultants

Bayview Physician Services



BB&T

Beach Health Clinic

Beech Grove United Methodist Church

Berea Congregational Christian Church, UCC

Bernardine Franciscan Sisters

Bernardine Franciscan Sisters Foundation

Bethany United Methodist Church

Bethel Assembly of God Church

Bethlehem Christian Church

Beyond Boobs

Big Brother Big Sister of the Greater Virginia Peninsula

Birdsong Peanuts

Bon Secours DePaul Medical Center

Bon Secours DePaul Health Foundation Board of Directors

Bon Secours Mary Immaculate Foundation Board of Directors

Bon Secours Maryview Health Foundation Board of Directors

Bon Secours Hampton Roads Board of Directors Bon Secours Hampton Rds

Bon Secours Mary Immaculate Hospital

Bon Secours Maryview Foundation Health Center

Bon Secours Maryview Medical Center

Boo Williams Sportsplex

Boone Branch Health Clinic

Boys & Girls Club of the VA Peninsula

Brain Injury Association of VA

Broad Creek Civic League

Broadwater Academy

Brock Institute for Community & Global Health

Bruton Episcopal Church

Buckroe Baptist Church

Busch Gardens

Butler Paper

Buy Fresh, Buy Local

C&F Bank

C. W. Brinkley, Inc.

Calvary Community Church

Calvary Revival Church of Chesapeake

Camden County schools

Camp Foundation Board

Cardiology Associates

Carrington Place (Nursing Home)

Carrollton Baptist Church

Carter Machinery

Catholic Charities of Eastern VA

CDR - Child Development Res

Celebrate Healthcare

Center for Child and Family Services

Central Virginia Health Services

Chambrel of Williamsburg/Brookdale Senior Living

Champions for Children (PCAHR)

Charles City County Council

Charles City County Sheriff's Office

Charles City Dept of Social Services

Checkered Flag (Car Dealership)

Chesapeake Care

Chesapeake City Schools

Chesapeake Community Health Center-PICH

Chesapeake Community



Services Board

Chesapeake Fire Department

Chesapeake Health Dept

Chesapeake Integrated Behavioral Healthcare

Chesapeake Police Department

Chesapeake Public Schools Parent Resource Center

Chesapeake Regional Medical Center

Chicahominy Health District

Child Care Aware

Child Development Resources

Children's Hospital of the King's Daughters

Childrens Specialty Group PLLC

Chinese Community Association of Hampton Roads

CHIP of SHR

CHKD Care Connection for Children

Chowan Perquimans Smart Start

Church of St. Gregory

Church of the Messiah

CIBH (CSB)

CINCH (Consortium for Infant

and Child Health) Citizens National Bank Citizens Unity Commission Coalition on Infant and Child Health Coliseum Central Board College of William & Mary Colon & Rectal Surgery Colonial Beach Schools

Colonial Beach Schools Board

Colonial Behavioral Health

Colonial Williamsburg Foundation

Comfort Keepers

Commonwealth Assisted Living

Communities in School of Hampton

Community Free Clinic of Newport News

Community Leaders, Consultant

Community Presbyterian Church

Community Services Board -Hampton / NN

Compassionate Care

Congressman Robert C Scott

Consultants in Pain Management

Cooperative Extension

Cornerstone Worship Center

Cox Communications

Crater District Health

Creative Images, LLC

Creeds Elementary School

Crisis Pregnancy Center

Cross Realty

Currituck County DSS

Cypress Chapel Christian Church

Dale Carnegie

Dare County Health Department

Daughters Connection of Hampton Roads Inc.

Delegate Chris Jones

Delegate Rick Morris

Department of Aging & Rehabilitative Services -Hampton, Newport News

Department of Aging & Rehabilitative Services - Onley

Department of Aging & Rehabilitative Services - Warsaw

Department of Veterans Affairs



Digestive & Liver Disease Specialists

Dixon Hughes Goodman

Dominion Physical Therapy

Downtown Hampton Child Development Center

Drucker & Falk

Duke Olds

Ear Nose & Throat Ltd

Early Childhood Commission - Suffolk

East End Baptist Church

East Ocean View Civic League

Eastern Shore Comm College

Eastern Shore Community Services Board

Eastern Shore of Virginia 9-1-1 Commission

Eastern Shore of Virginia Chamber of Commerce

Eastern Shore Rural Health Clinic

Eastern State Hospital

Eastern Virginia Medical School

Eastern Virginia Medical School Dept of Dermatology

Eastern Virginia Medical School Dept of

Otolaryngology/Head & Neck

Eastern Virginia Medical School Dept of Pediatrics

Eastern Virginia Medical School Dept of Psychiatry & Behavioral Sciences

Eastern Virginia Medical School Dept of Radiation Oncology

Eastern Virginia Medical School Dept of Surgery

Eastern Virginia Medical School Primary Care Internal Medicine

Eastern Virginia Medical School Brock Institute Advisory Council

Eastern Virginia Medical School Diversity & Inclusion

Eastern Virginia Medical School Graduate Program in Public Health

Eastern Virginia Medical School, Head and Neck Surgery

Eastern Virginia Medical School

Eastern Virginia Medical School Surgical Oncology

Ebenezer Baptist Church

Ebenezer United Methodist Church

ECK Supply Co.

ECPI University

EFMP The Planning Council

Elite Women's Care

Embassy Suites Hampton Roads

Emergency Physicians of Tidewater

Emmanuel Baptist Church - NN

Emmanuel Episcopal Church

Emmanuel Grace Baptist Church

Emmanuel Lutheran Church

Envoy

EPT

Essex Churches Together

Essex County Council

Essex County Board of Supervisors

Essex County Economic Development

Essex County Emergency Services

Essex County Ministerial Association

Essex County Schools

Essex County Schools Board

Essex County Sheriff's Office

Essex County Social Services

EVB



Every Woman's Life

Evolve Therapeutic Counseling

F.R.E.E. Foundation for Rehab

Faith Baptist Church

Faith Deliverance Christian Center

Family Medicine

Family Medicine - Hampton Family Practice

Family Support Network of Northeastern NC

Ferguson Corp

FERIDES/The Peanut Patch

First Baptist Church

First Baptist Church -Franklin

First Baptist Church - Mahan

First Baptist Church - Main Street

First Baptist Church -Williamsburg

First Baptist Church -NN

First Baptist Church of Norfolk

First Baptist Church South Hill

First Church of Newport News (Baptist)

First Friends Church

First Presbyterian Church of Hampton

First United Church of Christ

First United Methodist Church of Hampton

Fleet & Family Support Center-Virginia Beach

Fleet and Family Support Center Naval Medical center

Food Bank of VA

Food Bank of Virginia Peninsula

Former Sentara Strategic Planner

Fort Monroe Authority

RRMC

Fox Hill Central United Methodist Church

Fox Hill Road Baptist Church

Franklin Fire Dept

Franklin Police Dept

Franklin/Southampton Charities

Franklin-Southampton Chamber of Commerce

Freedom Life Church

Fresenius Medical Care

Friends of Obici

Friends of Obici / Western Tidewater Free Clinic Gates County Medical Center

Gates County Council

Gates County Schools

GE Appliances

General Electric/Consumer & Industrial Division

Geriatrics Life Care

Gethsemane Baptist Church Newport News

Gethsemane Community Fellowship Church

Ghent Area Ministry

Ghent Family Medicine

Gillette Law Group LC

Glennan Center for Geriatrics

Gloucester County Council

Gloucester County Board of Supervisors

Gloucester County Community Education

Gloucester County EMS

Gloucester County Schools

Gloucester County Schools Board

Gloucester County Schools, Riverside Walter Reed Hospital

Gloucester County Sheriff's Office

Gloucester Social Services



Gloucester Health Department **Gloucester House Gloucester Social Services** Gloucester Chamber of Comm **Gloucester-Mathews Free** Clinic **Goochee Enterprises LLC** Goodman and Son Grace Bible Church, VA Grace Episcopal Church Great Bridge Presbyterian Church Green Run Homeowners Association Greenwood Civic League Grove Church - Portsmouth Grove Church - Visions in **Progress Youth Ministry** Grove Outreach Christian Center Grove Vision of Truth Ministries GTL H.E.L.P. Free Clinic H.O.P.E Foundation Habitat for Humanity

Haborpointe Community Church

Hammes

Hampton Baptist Church Hampton Christian Church

Hampton City Council

Hampton City Schools

Hampton City Schools Board

Hampton Clean City Comm

Hampton Ecumenical Lodgings and Provisions, Inc.

Hampton FAPT

Hampton First United Methodist

Hampton City Foster Grandparent Program

Hampton City Health District

Hampton Healthy Families

Hampton Neighborhood Commission

Hampton City Police Division

Hampton City Public Library

Hampton City Public Works

Hampton City Redevelopment and Housing

Hampton Roads Baptist Church

Hampton Roads Community Foundation

Hampton Roads Community Health Center Hampton Roads Gastroenterology

Hampton Roads Magazine

Hampton Roads Sports Commission

Hampton University

Hampton University Proton Institute Center

Hampton Veterans Medical Center

Hampton YMCA

Hampton/Newport News CSB

Harbor's Edge

Healthy Families Partnership

Healthy Families Virginia Beach

Healthy People Healthy Suffolk

HER Shelter

Hidenwood Presbyterian - NN

Hilton Baptist Church

Hilton Presbyterian Church

Historic Triangle Comm Svc Ctr

Historic Triangle Senior Center

Historic Virginia Land Conservancy

Holy Spirit Church

Homeless Outreach



Hook Law Center Hope Haven Adult Home Hope House Foundation Hospice Community Care Hospice House & Support Care of Williamsburg Housing Partnerships Hubbard Peanuts Immaculate Conception Catholic Church Indian Lakes Foundation Infectious Disease Associates Ingleside Civic League **Insight Enterprises** Interiors by Decorating Den Internal Medicine International Black Women's Congress Internists at Western Branch **IOW Citizens Associaton IOW-Carrsville** Area Isle of Wight - Smithfield Chamber of Commerce Isle Of Wight Academy Isle of Wight County Council

Isle of Wight County Board of Supervisors Isle of Wight Cty Emerg Svcs

Isle of Wight County Schools

Isle of Wight County Schools Board

ITT Tech

Ivy Memorial Baptist Church

J. Dwight Bradshaw, D.D.S.

James City County Council

James City County Board of Supervisors

James City County Fire Department

James City County Foster Care Department

James City County Health Department

James City County Housing & Community Development

James City County Sheriff's Department

JCC Division of Social Services

JenCare Senior Medical Center

Jewish Community Center

Jewish Family Services Counseling

Jones CPA Group, PC

Jordan-Young Institute

Judeo Christian Outreach Center K.C. Robinson Consulting

Kaufman & Canoles

Kempsville Center for Behavioral Health

Kids First NE North Carolina

Kindred Transitional Care & Rehab

King and Queen County Council

King and Queen County Emergency Services

King and Queen County Health Department

King and Queen County Schools Board

King and Queen County Sheriff's Office

King and Queen County Social Services

King William County Board of Supervisors

King William County Community Services Board

King William County Fire Department

King William County Schools

King William Cty Schools Board

Lackey Free Clinic

Lacrosse Memorial Presbyterian Church



LAFB Bundles for Babies

Lake Taylor Hospital

Lakeview - Internal Medicine

Lakeview Medical Center

Lancaster By the Bay Chamber of Commerce

Lancaster County Council

Lancaster County Board of Supervisors

Lancaster County Emergency Services

Lancaster County Schools

Lancaster County Schools Board

Lancaster County Sheriff's Office

Lancaster County Social Services

Lancaster Farms

Landmark Media Enterprises

Landstown High School

Langley Christian Church

Langly NASA

LifeNet

LINK of Hampton Roads, Inc

Lions Medical Eye Bank and Research Center of Eastern Virginia

Literacy For Life

Loving Steps

Luter YMCA

Lutheran Family Services of Virginia, Inc.

MacDonald & Ingram

Main St. United Methodist Church

March of Dimes

Marine Hydraulics International

Mariners Museum

Mathews County Council

Mathews County Board of Supervisors

Mathews County Chamber of Commerce

Mathews County Schools

Mathews County Schools School Board

Mathews County Sheriff's Office

Mathews County Social Services

Max Media of Hampton Roads

Mediation Center

Medical Center Radiologists Inc

Medical Facilities of America

Medical Transport

Men's Health - Prostate

Cancer

Mid Atlantic Maritime Academy

Middle Penninsula Community Services Board

Middlesex County Board of Supervisors

Middlesex County Emergency Services

Middlesex County Schools

Middlesex County Schools Board

Middlesex County Sheriff's Office

Middlesex Social Services

Millfield Baptist Church

Minus 9 to 5

Mount Suffolk Church

Mt. Carmel Missionary Baptist Church

NAMI

Nansemond River Baptist Church

Nat. Alliance on Mental Illness -Mid Tidewater Chapter

National Coalition of 100 Black Women, Inc.

National Counseling Group

National Counseling Group -Exmore



National Counseling Group -Newport News

National Counseling Group Southeast Virginia

National VA Associate Director of Chaplaincy/Nat'l Baptist

Nat'l VA Chaplaincy in Hampton/Alliance Baptist

Naval Medical Center Portsmouth

Neighborhood Council of Williamsburg

Neighborhood Youth Soccer League

Nelson Ballard Cemetery

Nephrology Associates of Tidewater

Network Peninsula

Neurosurgical Associates

New Covenant Church

New Horizons Family Counseling Center

New Kent County Board of Supervisors

New Kent County Fire Department

New Kent County Public Schools

New Kent County Public Schools Board

New Kent Cty Sheriff's Office

New Kent County Social Services

New Kent Community Services Board

New Life Christian Center

New Life Providence Church

New Life Providence Church - Norfolk

Newport News Fire Department

Newport News City Council

Newport News Department of Human Services

Newport News Department of Planning

Newport News Juvenile Services

Newport News Police Department

Newport News Public Schools School Board

Newport News Redevelopment and Housing Authority

Newport News Public Schools

Newport News Social Service

Newtown Elementary

Norfolk City Council

Norfolk Community Enrichment Norfolk Comm Svcs Board

Norfolk Department of Human Services

Norfolk Department of Public Health

Norfolk Fire Department

Norfolk Health Department

Norfolk Internal Medicine

Norfolk Plastic Surgery PC

Norfolk Police Department

Norfolk Public Schools

Norfolk Public Schools Student Support Services

Norfolk Redevelopment & Housing Authority

Norfolk State University

Norfolk State University -Virginia Beach Higher Education Center

Norfolk WIC

Northampton County Board of Supervisors

Northampton County Chamber of Commerce

Northampton County Dept of Parks & Recreation

Northampton County Dept of Social Services

Northampton County Public Schools



Northampton County Sheriff's Office

Northern Neck Free Health Clinic

Northrop Grumman Corporation

Northumberland County Board of Supervisors

Northumberland County Chamber of Commerce

Northumberland County Emergency Services

Northumberland County Schools

Northumberland County Schools Board

Northumberland County Sheriff's Office

Northumberland County Social Services

Oasis

Oasis Social Ministry

Obici Healthcare Foundation Board

Ocean Marine LLC

Ocean Park Civic League

Odyssey Hospice

Old Dominion University

Old Dominion University -Virginia Beach Higher Education Center ODU Board of Directors Old Point National Bank Old Towne Medical Center Olde Towne Free Clinic Olde Towne Medical Center Olde Towne Medical Center Open Door Church Optima Oyster Point Family Practice Palmer Elder Law Pan-Hellenic Council of Peninsula Parent Resource Dev & Educ Park Place Health Clinic Pathology Sciences Medical

Group

Patient & Family Advisory Council

Patient Advisory Board/ SPAH

Patient First

Patient First (Newtown Rd)

Patriots Colony

Patten, Worman, Hatten & Diamonstein

Paul D Camp Community College

Pediatric & Adolescent Dentistry

Peepstreet Movement

Pembroke Mall

Pembroke Meadows & Shores Civic League

Pender & Coward

Peninsula Agency on Aging

Peninsula Christian Free Clinic

Peninsula Community Chapel

Peninsula Community Foundation

Peninsula Emergency Physicians

Peninsula EMS Council

Peninsula Health District

Peninsula Metropolitan YMCA

Peninsula SPCA

Peninsula Town Center

Peninsula Worklink

People in Need Ministry

Perdue Foods

Phillipine Cultural Center of VA

Pilato & Counts Interior Design

Planters/Kraft Foods Co.

Point O'View Civic League

Poplar Lawn Baptist Church

Poquoson City Council



Poquoson City Police Department

Poquoson City Public Schools

Poquoson City Public Schools Board

Portsmouth Behavioral Health

Portsmouth City Schools

Portsmouth Department of Health

Portsmouth General Hospital Foundation

Portsmouth Police Department

Portsmouth YMCA

Positive Family connections

Pretlow & Pretlow

Pride in Parenting

Prince of Peace Catholic Church

Project CARE

Project Link - DHS VB

Project Search

Pungo Realty

Queen Street Baptist -Hampton

R.G. Electric

R.L. Howell & Assoc.

Rappahannock Community

College Glenn's Campus

Rebound Chiropractic

Red Cross - Virginia Coastal

Red Cross - Virginia Rappahannock

Regent University

Respite Care Center of Williamsburg United Methodist Church

Richmond County Council

Richmond County Board of Supervisors

Richmond County Chamber of Commerce

Richmond County Emergency Services

Richmond County Schools

Richmond County Public Schools Board

Richmond Cty Sheriff's Office

Richmond County Social Services

RIDES

Riverside Cancer Services

Riverside Center for Excellence

Riverside Doctors Hospital Williamsburg

Riverside Foundation

Riverside Health System Board of Directors **Riverside Home Health**

Riverside Life Long Health and Aging Related Services -Hampton

Riverside Life Long Health and Aging Related Services -Hampton

Riverside Life Long Health and Aging Related Services -Mathews

Riverside Life Long Health and Aging Related Services -Saluda

Riverside Life Long Health and Aging Related Services -Sanders

Riverside Life Long Health and Aging Related Services -Smithfield

Riverside Life Long Health and Aging Related Services -Smithfield

Riverside Life Long Health and Aging Related Services the Orchard

Riverside Life Long Health and Aging Related Services -Warwick Forest

Riverside Life Long Health and Aging Related Services -West Point

Riverside Life Long Health and Aging Related Services, Thomas Nelson Comm College

Riverside Regional Med Ctr



Riverside Rehabilitation Hospital

Riverside Shore Memorial Hospital

Riverside Shore Memorial Hospital

Riverside Shore Memorial Hospital Board of Directors

Riverside Tappahannock Hospital

Riverside Walter Reed Hospital

Riverside Walter Reed Hospital Board of Directors

Roche Diagnostics Corp.

Rodef Sholom Temple in Hampton

Rotary Club of Hampton Roads

Rountree Construction

Royal Wealth Management

Sales Systems Ltd

Salvation Army

Samaritan House Virginia

Sandy Bottom Nature Park

Sasser Construction

Saunders & Ojeda

Scarborough Square Civic League

Screening Brief Intervention & Referral To Treatment

(SBIRT)

Second Act Communities

Second Chances Youth Services

Senior Services Coalition

Senior Services of Southeastern Virginia

Sentara BelleHarbour Family Prac

Sentara Center for Health and Fitness

Sentara Family Medicine

Sentara Health Foundation -Hampton Roads

Sentara Leigh Hospital Patient Family Advisory Council

Sentara Medical Group

Sentara Norfolk General Hospital

Sentara Norfolk General Hospital PFAC

Sentara Obici Auxiliary

Sentara Obici Community Health Outreach

Sentara Obici PFAC

Sentara Obici Pharmacy

Sentara Optima

Sentara Princess Anne Hospital

Sentara Virginia Beach PFAC

- Seton Youth Shelters
- Shiloh Baptist Church
- Shoemaker Vision Center

Sisters Network Inc.

Sisters of Bon Secours

SK Development

Smart Beginnings

Smart Beginnings VA Peninsula

Smithfield City Council

Smithfield Foods

Sentara Norfolk General Hospital Cancer Program PFAC

Sonoco Products

South University

Southampton County Council

Southampton County DSS-Family Services

Southeastern Virginia Health System

Southside Baptist Church

Spring Arbor of Williamsburg-Residential Assisted Living

Spring Branch Community Center

SRHA

St Bede's Catholic Church Williamsburg



St Gregory the Great Church St John the Apostle Church St. Gregory the Great School St. John Episcopal Church St. Mary's Catholic Church St. Nicholas Catholic Church St. Paul School of Nursing State Farm Insurance Striving for Spiritual Excellence Suffolk Christian Church Suffolk Department of Social Services Suffolk Fire Department Suffolk Iron Works, Inc. Suffolk Parks & Rec Recreation Suffolk Planning Commission Suffolk Police Department Suffolk Public Library Suffolk Public Schools Suffolk Social Services SunTrust Bank Surgical Services Surry Area Free Clinic Surry County Office on Youth Susan G. Komen, Tidewater

Sussex Public Schools

SWRMC Auxiliary Board

SWRMC Local Community Board

SYSCO

Tabernacle Church of Norfolk

Tappahannock Seventh Day Adventist Church

Temple Beth El

The Arc of Greater Williamsburg

The Bridge Network

The Center for Excellence in Aging and Geriatric Health

The Children's Center

The City of Norfolk Public Works

The College of William & Mary

The Farley Center at Williamsburg Place

The Glaucoma & Laser Center

The Group for Women

The Planning Council

The Riverfront

The Samaritan Group Inc.

The Up Center

The Village @ Woods Edge

Planned Parenthood

Thomas Nelson Community College

Three Rivers Health District

Tidewater Community College

Tidewater Community College - Portsmouth

Tidewater Diagnostic Imaging

Tidewater Physicians for Women

Tidwater Physicians Multispecialty Group

TOA

Town of Cape Charles Council

Town of Cape Charles Police Department

Town of Chincoteague

Town of Chincoteague Police Department

Town of Exmore Council

Town of Onancock Town Council

Town of Onley Council

Town of Smithfield Council

Town of Smithfield Fire Department

Town of Tappahannock Council

Town of Tappahannock



Police Department

Town of Urbanna Council

Town of Warsaw Council

Town of Warsaw Police Department

Town of West Point Council

Town of West Point Police Department

Town of West Point Volunteer Fire & Rescue

Town of Windsor Council

Towne Bank

Towne Bank-Norfolk

Transitions

Trinity United Methodist Church

Unilever - Lipton

Union Mission

United Jewish Community Center

United Way of South Hampton Roads

United Way of the Greater Williamsburg Area

United Way of the Virginia Peninsula

United Way Peninsula

Urban League of Hampton Roads

Urology of Virginia

Valverde & Rowell PC

VersAbility Resources

Vetshouse

Vintage Tavern

Virgina Medical Specialists

Virginia Beach Amphitheater

Virginia Beach City Council

Virginia Beach Community Services Board

Virginia Beach Department of Public Health

Virginia Beach Dept of Health

Virginia Beach EMS/Fire Dept

Virginia Beach Health Services Advisory Board

Virginia Beach Health Services Advisory Board

Virginia Beach Healthy Families

Virginia Beach Human Services

Virginia Beach Parks & Recreation

Virginia Beach Police Dept

Virginia Beach Public Schools

Virginia Beach United Methodist Church

Virginia Cooperative Extension

Virginia Cooperative Extension

Virginia Department of Health

Virginia Eye Consultants

Virginia Home Medical

Virginia League of Planned Parenthood

Virginia Modeling, Analysis and Simulation Center

Virginia Office of the Attorney General/Hampton Roads Opioid Working Group

Virginia Oncology Associates

Virginia Oncology Associates PC

Virginia Oral Health Coalition

Virginia Orthopaedic & Spine Specialists

Virginia Peninsula Chamber of Commerce

Virginia Peninsula Food Bank

Virginia Port Authority

Virginia Premier Health Plan

Virginia Supportive Housing

Virginia Wesleyan University

Virginian Pilot

Volvo Medical Associates

VPCC

WM Jordan



Wave Church - Norfolk

West End Baptist Church

West Point Chamber of Commerce

Western Branch Family Medicine & OB/GYN

Western Tidewater Community Services Board

Western Tidewater Free Clinic

Western Tidewater Health Dept.

Westminster Reformed Presbyterian Church

Westmoreland County Emergency Management

Westmoreland County Schools

Westmoreland County Schools Board

Westmoreland County Sheriff's Department

Westmoreland Cty Social Svcs

Westmoreland Medical Center

Wiliamsburg Health Foundation

Williams Mullen

Williamsburg - James City County Schools Williamsburg - James City County Schools Board

Williamsburg Area Faith in Action

Williamsburg Meals on Wheels

Williamsburg Area Transit Authority (WATA)

Williamsburg Chamber of Commerce

Williamsburg City City Council

Williamsburg City Fire Department

Williamsburg City Police Department

Williamsburg City Social Services

Williamsburg Community Chapel

Williamsburg Community Health Foundation

Williamsburg Cooperative Extension

Williamsburg Emergency Physicians

Williamsburg Human Services

Williamsburg Landing

Williamsburg United Methodist

Wilroy Baptist Church

WJCC Comm Action Agency

WJCC Public Schools

Women & Family Shelter (Union Mission)

Woodlawn Memorial

WTCSB

YH Thomas Community Center

YMCA

YMCA Board of Directors

York Co Division of Juvenile Services

York Co Housing and Neighborhood Revitalization

York County Board of Supervisors

York County Chamber of Commerce

York County Community Services

York County Department of Fire & Life Safety

York County Realtor

York County School Board

York County Social Services

York Senior Center

YWCA

Z Andrew Counseling Services

Zion Baptist Church



APPENDIX II

Bon Secours Hampton Roads CHNA Community Dialogues

Organization	Date/Time	Attendance
Mary Immaculate Hospital SeniorHealth Newport News, VA	Tuesday, January 8, 2019	87
DePaul Medical Center SeniorHealth Norfolk, VA	Friday, January 18, 2019	34
Maryview Medical Center SeniorHealth Portsmouth, VA	Tuesday, January 22, 2019	64
Healthy Portsmouth (Key Stakeholders) Portsmouth, VA	February 21, 2019	8
Community Conversations - No Wrong Door Norfolk, VA	Monday, February 25, 2019	24
Family Focus English as a Second Language Newport News, VA	Wednesday, February 27, 2019	12
Sentara Princess Anne Patient/Family Advisory Group Virginia Beach, VA	Thursday, February 28, 2019	20
Federation of Civic Leagues Norfolk, VA	Thursday, March 14, 2019	11
Green Run Civic League Virginia Beach, VA	Saturday, March 23, 2019	8
Virginia Resource Center Norfolk/Virginia Beach, VA	Wednesday, March 27, 2019	11
Peninsula Department of Health (Key Stakeholders) Newport News, VA	Monday, April 1, 2019	4



APPENDIX III

Bon Secours DePaul Medical Center CHNA Community Health Survey Verbatim Comments

Community Health Concerns for Adults (18 years of age and older)

- Free and accessible long term birth control.
- No more free health insurance nor care for those under age 60.
- Young adults do not realize the danger they are in with careless choices and they fail to protect themselves.
- I am very much concerned with the impact of health disparities experienced in my community and these issues are prevalent in minority communities.
- Aging
- Heart conditions are also a concern.
- Lack of health literacy and lack of adherence to home medications is a huge problem.
- Impact on community and will have a greater impact in the years to come if not addressed now.
- 23508 is severely polluted by the coal piers and ensuing coal dust that floats across Lambert's Point and Larchmont.
- I note heart conditions as that is sort of the nail in the coffin as far as functionality. But this is the result of obesity, diabetes, poverty, poor medical follow-up, smoking, substance abuse. All of these issues seem to occur singly, or more often in a combination, that results in me seeing people who are unhealthy, disabled, and unable to function in society.
- balanced diet, availability of healthy, fresh foods across income levels and geographic areas
- How did Womens health and health care disparities not make this list
- Getting help in homes of individuals who need them they don't qualify for Medicaid. People only with Medicare having troubling getting physicans to see them due to only having Medicare.
- Mental health is a growing populations. Yet there's limited organizations that can screen. Barriers such as appointments, transportations comes into play.
- Lack of understanding of community resources that are already available to patients and are under utilized
- Age 55+ community. Concerned about all areas affecting senior citizens
- Cost of healthcare including prescription medications



- am blessed with good health at this time. But, I am very aware of the cancer (breast) rate in this area; very aware of obesity and heart disease are so connected. I am aware of the substance abuse as well. Additionally, because of the work situation so many find themselves, stress and anxiety are huge which leads to all of the following conditions. Americans in general are in poor health and do not take good care of themselves. Virginia Beach has a very active population and appears to be a very athletic minded population. But, I believe that is very small considering the population size. We could be so much healthier.
- Social isolation, safety

Issues that may affect the ability for Adults to Access to Healthcare

- Make too much money for assistance & not enough to afford health insurance
- Lack of health insurance is the main problem
- Lack of choices in some healthcare providers
- Insurance reimbursement is the main problem I see in offering services related to weight loss and disease management. People can't afford to pay out of pocket.
- Childcare is a huge issue for many women as well as good prenatal care.
- Cut all medicaid. Increase Medicare. Medicare is an earned benefit for seniors. Medicaid is welfare for lazy losers.
- Low income, cannot afford doctors
- Lack of qualified MDs & specialists plus ludicrous wait times & charges, incompetent billing/enterprise systems, EHRs with significant erroneous information, etc. Norfolk & VB only offer welfare medicine courtesy of bottom of the barrel (remainder of comment edited by BSHR)
- Poor people do not identify with medical professionals and do not do preventive care and yearly physicals.
- Health insurance is so expensive that individuals (especially with mental health issues) just don't get the help they need.
- Populations impacted by health disparities experience such as a consequence of impaired social determinants of health. These areas touch upon those.
- Those of us that have health insurance with large deductibles or co-pays are less likely to seek care when needed because of the cost.
- For the elderly, they often "don't want to bother anyone" so care is delayed.
- I do not believe there is a stand-alone provider in 23508. for poorer residents, it is difficult to get to a physician.
- Few providers of services are available in evenings or weekends making it difficult for working parents to take time off.



- These are all important. Understanding use of health services is easily a tie for the others I chose., as is child care.....
- there is no support network for families and if there is then where are they.
- knowledge of services available and sometimes language barriers
- I am concerned about the cost of health care in general. I can not retire because
 I can not afford the cost of my current health insurance. Working for the state -the
 only perk is good health insurance coverage. ON the outside the cost is awful. I
 am for all to have good coverage, but I not for the abuse of our system so that
 people can be covered without working for it.

Community Health Services for Adults that Need to be Strengthened

- I have not had to use these services so I am putting down what is important to me.
- More education on lifestyle to get off medications for chronic disease.
- New laws affect women's access to care for prenatal.
- Often, there is little to no follow up from doctors or post-referral
- Access to quality care is non existent.
- Educating poor folks about self care and where they can go for medical care without being shamed.
- Wish there was more of an emphasis put on the prevention of injury and illness and overall wellness.
- Need 24 hour pharmacies.
- Patients with chronic diseases need RN/RT navigators for in-depth education and help with adherence to treatment for diseases like COPD, DM, CHF, asthma.
- Transportation is a major issue for the aging population.
- Women's health
- Health promotion and prevention is inherent in all of these categories.
- Services addressing sexually transmitted infections and teenage pregnancy.
- clients are unaware of services available and not educated on the insurance availability and DSS is swamped. grants for organizational who can assist clients and give resources out there
- This question is misleading. I do not feel 5 services need to be strengthened. I do not know many people nor use any of the services listed. To my knowledge, access, availability and quality of these services are adequate. I checked the boxes that are of interest to me.



Community Health Concerns/Issues for Children and Teens (Age 0-17)

- Learning Disabilities and school related issues are a problem
- Working with families on communication between teens and parents.
- Not teaching about sex and reproduction affects teen pregnancy issues.
- I feel that teens and new mothers need to have a program in the maternity ward on how to help your child be ready for school. Some training at anytime to explain that talking to your child about colors as you dress them. Read to them in your arms everyday. They love to hear yur voice and they learn to enjoy books. Use the library for books. Point out flowers, colors and crumbled leaves on a walk. Blow dandelions. Explain what your reading. Readiness and parent participation in education is important.
- There are already more than adequate resources in the community. What is needed are responsible parents! (Remainder of comment edited out by BSHR)
- Vaccination refusal Over medication with ADD/depression/ psych meds Antibiotic stewardship
- Education, sex education, preventing teen pregnancy.
- No access to primary care without a long wait and well check first. I'm an urgent care doc and we see this all the time on boths sides of the hrbt
- Many things affect children and teens with most connected to parenting skills.
- Barriers for organization having to compete vs. complimenting each organizations. leaving the community without other resources out there.
- Health promotion should be for children as well.

Community Health Services for Children and Teens that Need to be Strengthened

- learning disabilities and appropriate school services- such as IEP:'s, Section 504, and poor job that schools do dealing with behavioral issues. When they do not do a good job, the child, the family and the community as a whole suffers.
- Weight management
- People feel stuck and do not know how to do differently. They fall into generational patterns.
- Violence prevention and gun safety education Palliative care services
- cardiac care.
- violence prevention/gun control obesity management developmental disorder support
- Cannot emphasize more strongly the lack of adequate mental health resources for children, especially those with public insurance or no insurance.
- Services can be strengthened but if parents aren't required to access services, it is of no help. Social Services is difficult to access, as is behavioral/mental health



services. There is sufficient access to dental/oral health BUT parents must take minors for services.

- Prevention effective prevention strategies will work if put in place correctly and with integrity. Abuse and violence prevention is the key in reducing incidents of domestic violence and abuse.
- Home visiting programs
- Community safety services
- Majority of what I see, parents support due to lack of support in home.
- Kinship care/relatives raising children supports need to be dramatically improved. Including educating families and social workers in the direct community (ie caseworkers don't even know basic elements/programs available).
- Improving immunization rates for children in the community.

At Risk/Vulnerable Populations who Need Services or Support

- The cost of insurance/the care for those on fixed/lower incomes
- We need to have more education about sex trade.
- Virginia Beach looks like a progressive community and a good place to live, but has many needs below the surface.
- I would add to the "transitioning out of incarceration" to those currently
 incarcerated. When I see a patient who is going for trial, he states he may or may
 not be back for follow-up. They almost never received the medications they need
 while in jail, and often return to clinic after their sentence having received next to
 no care in the inefficacious jail clinic.
- Add seniors and un or underinsured
- According to data, more people are insured but our organization receives more requests for help now because although they may have coverage, they cannot afford deductibles or monthly copays. Underinsured populations with low incomes or don't understand their benefits call daily for assistance.
- All of the above also have trouble accessing care for their kids so all these fundamentally also impact access for children as a vulnerable population.
- Immigrants or community members who are not fluent in English are a population who need services targeted towards them.
- really hard to choose just five. it's a vicious circle and some are not even being address or one has more resources and funding then the other *Caregivers (Examples: caring for a spouse with dementia or a child with autism) *Individuals with Intellectual or Developmental Disabilities *Low Income Individuals *Unemployed Individuals *Victims of Human Trafficking, Sexual Violence or Domestic Violence *Veterans and Their Families ALL POINTS BACK TO



MENTAL HEALTH. WE GIVE A PRESRENTATION FOR BEATING THE HOLIDAY BLUES, GRIEVING, EDUCATING STAFFS (IN SCHOOLS), FAMILIES HOW TO IDENTIFY SUICIDE IDEATIONS. AGAIN A BARRIER TO GET IN THE SYSTEM.

Community Assets and Services that Need Strengthening

- There are not enough curb cuts at all in the entire area.
- Virginia Beach needs public transportation.
- Exterminate medicaid. Plus up Medicare. Medicaid is welfare. Medicare is an earned benefit!
- Hours for healthy food need to be for those that work.
- Linkages in Systems of Care
- When a young family pays for child care, it cancels out a large portion of their income. Rent in a safe neighborhood is out of reach for many. Access to Healthy foods won't work if parents/individuals won't use them. Would like to see SNAP work more like WIC where only healthy foods can be purchased (currently, items like candy, soda, chips and other non-nutritional foods can be obtained with SNAP).
- Community Task Forces that decide on prevention strategies for their communities...
- Safe places to play and walkable/bikeable communities also rank high up there.
- Public Safety is an asset, if we have the community proactive in helping.
 Education- after school program and have a alternative for detentions and suspensions
- health safety net

Other Comments

- Require all public spaces to have baby changing tables in Men's restrooms or have family bathrooms
- Eradicate/exterminate all welfare programs- and ban all illegal aliens from accessing tax payer funded health insurance & health care resources!
- This area could benefit from a wide-scale health literacy program.
- there is a need for more community clinics with health coaching. I know a family on Medicaid but cannot use a urgent care, they don't take Medicaid, so has to use the Emergency Room all the time. Evening hour clinics, Home visit services.



APPENDIX IV

Bon Secours DePaul Medical Center CHNA Key Stakeholder Survey Welcome to the Community Health Needs Assessment Survey

Thank you in advance for responding to this brief survey as part of the Community Health Needs Assessment being conducted jointly by Bon Secours Hampton Roads, Children's Hospital of The King's Daughters, Riverside Health System, Sentara Healthcare and the Virginia Department of Health.

Your role in the community gives you a unique perspective on the health of our community and the services available. We appreciate you taking a few minutes to answer (only 11 questions), sharing your valuable insight with us.

The results of the survey will help us identify community health priorities, as well as highlight possible opportunities to effect change.

1. Please tell us which Virginia cities and / or counties you view as the community you serve. (Check all that apply even if your perspective only includes one part of a city or county.)

Ac	comack County	Newport News (City of)
Ch	arles City County	Norfolk (City of)
Ch	esapeake (City of)	Northampton County
Es	sex County	Northumberland County
Fra	anklin (City of)	Poquoson (City of)
Glo	bucester County	Portsmouth (City of)
Ha	mpton (City of)	Richmond County
Isle	e of Wight County	Southampton County
Jar	mes City County	Suffolk (City of)
Kir	ng and Queen County	Surry County
Kir	ng William County	Sussex County
La	ncaster County	Virginia Beach (City of)
Ма	thews County	Westmoreland County
Mic	ddlesex County	Williamsburg (City of)
Ne	w Kent County	York County

Jnderstanding Your Perspective - Your Role in The Community 2. Please select from the list below the type of employer or organization you most identify with as you complete this survey. (Please choose one) Business Representative Healthcare - Public Health / Health Department / Free Clinic Community Nonprofit Organization (Food Bank, United Way, etc.) Healthcare - Health Insurance Education (Pre K - High School, including School Administrators and School Nurses) Healthcare - Provider (Physician, Nurse or other Healthcare Professional) Administrators and School Nurses) Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) Faith-based Organization Law Enforcement / Fire Department / Emergency Medical Services (EMS) Financial Institution Local Government or Civic Organization Foundation Other (Please specify below) Healthcare - Behavioral and Mental Health Other (Please specify below)			
complete this survey. (Please choose one) Business Representative Healthcare - Public Health / Health Department / Free Clinic Community Nonprofit Organization (Food Bank, United Way, etc.) Healthcare - Health Insurance Education (Pre K - High School, including School Administrators and School Nurses) Healthcare - Provider (Physician, Nurse or other Healthcare Professional) Education (After High School) Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) Faith-based Organization Law Enforcement / Fire Department / Emergency Medical Services (EMS) Financial Institution Local Government or Civic Organization Foundation Other (Please specify below)	Iderstanding Your Perspective - Your Role in The Community		
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 Community Nonprofit Organization (Food Bank, United Way, etc.) Education (Pre K - High School, including School Administrators and School Nurses) Education (After High School) Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) Faith-based Organization Law Enforcement / Fire Department / Emergency Medical Services (EMS) Financial Institution Local Government or Civic Organization Other (Please specify below) Healthcare - Behavioral and Mental Health 	(Please choose one)		
etc.) Healthcare - Provider (Physician, Nurse or other Healthcare Professional) Administrators and School Nurses) Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) Faith-based Organization Law Enforcement / Fire Department / Emergency Medical Services (EMS) Financial Institution Local Government or Civic Organization Foundation Other (Please specify below)	Business Representative	Healthcare- Public Health / Health Department / Free Clinic	
 Education (Pre K - High School, including School Administrators and School Nurses) Education (After High School) Faith-based Organization Financial Institution Foundation Healthcare - Behavioral and Mental Health Professional) Professional) Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) Law Enforcement / Fire Department / Emergency Medical Services (EMS) Other (Please specify below) 		Healthcare - Health Insurance	
Education (After High School) Faith-based Organization Faith-based Organization Financial Institution Foundation Healthcare - Behavioral and Mental Health			
Financial Institution Services (EMS) Foundation Local Government or Civic Organization Healthcare - Behavioral and Mental Health Other (Please specify below)	, 		
Foundation Local Government or Civic Organization Healthcare - Behavioral and Mental Health Other (Please specify below)	Faith-based Organization		
Foundation Other (Please specify below) Healthcare - Behavioral and Mental Health	Financial Institution	Local Covernment or Civic Organization	
Other (Please specify)	Healthcare - Behavioral and Mental Health		
	Other (Please specify)		

3. If you are answering this on behalf of a community organization, please tell us which one, as well as your name and position.

We are asking for your contact information only to assure completeness of your survey response. Your name and email will not be used in any publication or public presentation of the survey results without your permission.

Organization

My Role / Name

My Email

Community Health Concerns and Health Services Gaps Adult Health Concerns (ages 18+) We want to better understand the key health issues that you feel affect the community in which you serve or work. The next two questions are about health concerns and health services gaps for

serve or work. The next two questions are about health concerns and health services gaps for adults in the community. We will also ask you similar questions about children and teens in your community in a later section.

4. Below is an alphabetical list of community health issues that affect ADULTS (ages 18+). Based on your experience, please check the FIVE most important health concerns for ADULTS in your community.

Accidents / Injuries (Unintentional)	Hunger
Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids)	Infectious Diseases (Hepatitis, TB, MRSA, etc.)
Alzheimer's Disease / Dementia	Intellectual / Developmental Disabilities / Autism
Behavioral / Mental Health (Suicide, ADHD, Anxiety, Depression, etc.)	Neurological Conditions (Stroke, Seizures, Multiple Sclerosis, Traumatic Brain Injury, etc.)
Bullying (Cyber, Workplace, etc)	Overweight / Obesity
Cancer	Physical Disabilities
Chronic Pain	Prenatal and Pregnancy Care
Dental / Oral Care	Respiratory Diseases (Asthma, COPD, Emphysema)
Diabetes	Sexually Transmitted Infections (HPV, HIV/AIDS, Chlamydia, Gonorrhea, Herpes, etc.)
Drowning / Water Safety	Smoking / Tobacco Use (Cigarettes, Chewing Tobacco,
Environmental Health (Water Quality, Pollution, Mosquito Control, etc.)	Vaping or E-Cigarettes) Violence – Sexual and / or Domestic
Heart Conditions (Heart Disease, Congestive Heart Failure / CHF, Heart Attacks / AMI, High Blood Pressure / Hypertension)	Violence in the Community (Gun injuries, Gangs, Human Trafficking, etc.)

Other Health Problems: Please share other health concerns if they are not listed above. Also, please use this space to provide any additional information on your above selections.

Community Health Concerns and Health Services Gaps: Adults (ages 18+)		
5. Below is an alphabetical list of health services ofter experience, please check the FIVE services that you access, availability and quality of health and healthca	feel need to be strengthened in order to improve	
Aging Services	Health Promotion and Prevention Services	
Alcohol / Substance Abuse Services	Home Health Services	
Behavioral / Mental Health Services	Hospice and Palliative Care Services	
Bereavement Support Services	Hospital Services (Inpatient, outpatient, emergency care)	
Cancer Services	Long Term Services / Nursing Homes	
Care Coordination and Transitions of Care	Pharmacy Services	
Chronic Disease Services (Diabetes, High Blood Pressure/	Physical Rehabilitation Services	
Hypertension) Chronic Pain Management Services	Primary Care	
Dental / Oral Health Services	Public Health Services	
Domestic Violence / Sexual Assault Services	Self-Management Services (Nutrition, Exercise, etc.)	
	Social Services	
Family Planning and Maternal Health Services	Telehealth / Telemedicine	
Health Insurance Coverage		

Other Community Health Services: Please share other needed community health services if they are not listed above. Also, please use this space to provide any additional information on your above selections.

ommunity Health Concerns and Health Services Gaps		
hildren's and Teens' Health Concerns (ages 0-17)		
e want to better understand the key health issues that you feel affect the community in which you erve or work. The next two questions are about health concerns and health services gaps r CHILDREN AND TEENS in the community.		
 Below is an alphabetical list of community health i Based on your experience, please check the F AND TEENS in your community. 		
Accidents / Injuries (Unintentional)	Hunger	
Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids)	Infectious Diseases (Hepatitis, TB, MRSA, etc.)	
Behavioral / Mental Health (Suicide, ADD, Anxiety, Depression)	 Intellectual / Developmental Disabilities / Autism Neurological Conditions (Epilepsy, Seizures, Tourette Syndrome-TICS, Sleep Disorders) 	
Bullying (Cyber, Workplace, etc)	Overweight / Obesity	
Chronic Pain	Physical Disabilities Respiratory Diseases (Asthma and Cystic Fibrosis)	
Dental / Oral Care	Sexually Transmitted Infections (HPV, HIV/AIDS, Chlamydi	
Diabetes	Gonorrhea, Herpes, etc.)	
Drowning / Water Safety	Smoking / Tobacco Use (Cigarettes, Chewing Tobacco, Vaping or E-Cigarettes)	
Eating Disorders	Teen Pregnancy	
Environmental Health (Water Quality, Pollution, Mosquito Control, etc.)	Violence In the Home – Child Abuse (Sexual, Physical, Emotional or Neglect) or Exposure to Domestic Violence	
Heart Conditions (Congenital Heart Defects, Fainting and Rhythm Abnormalities)	Violence in the Community (Gun injuries, Gangs, Human Trafficking, etc.)	
Other Health Problems: Please share other health concerns if th additional information on your above selections.	ney are not listed above. Also, please use this space to provide any	

and Teens (ages 0-17)		
7. Below is an alphabetical list of health services often available in communities. Based on your experience, please check the FIVE services that you feel NEED TO BE STRENGTHENED in order to improve access, availability and quality of health and healthcare for CHILDREN AND TEENS (ages 0-17) in your community.		
Health Insurance Coverage		
Home Health Services		
Parent Education and Prevention Programming		
Pharmacy Services		
Physical Rehabilitation Services		
Primary Care		
Public Health Services		
Self-Management Services (Nutrition, Exercise, etc.)		
Social Services		
Telehealth / Telemedicine		

use this space to provide any additional information on your above selections.

ccess to Healthcare	
-	s that may affect the ability for individuals to access care. Based on E most important issues in accessing healthcare in your community.
	No / Limited Home Support Network
Costs	No / Limited Phone Access
Discrimination	Time Off From Work
Health Insurance	Transportation
Lack of Medical Providers	Understanding the Use of Health Services
Location of Health Services	

Identifying Vulnerable Populations

9. Every community has populations which may need additional services or support to be healthy. Please check what you feel are the FIVE VULNERABLE POPULATIONS needing additional services or support in the community.

	Caregivers (Examples: caring for a spouse with dementia or child with autism)	a	Individuals Transitioning out of Incarceration
	Children (age 0-17 years)		Individuals Needing Hospice / End of Life Support
	Immigrants or community members who are not fluent in		Low Income Individuals
E	English		Migrant Workers
	Individuals / Families / Children experiencing Homelessness		Seniors / Elderly
	Individuals in the LBGTQ+ community		Unemployed Individuals
	Individuals Struggling with Literacy		Uninsured / Underinsured Individuals
	Individuals with Intellectual or Developmental Disabilities		Veterans and Their Families
	Individuals with Physical Disabilities		Victims of Human Trafficking, Sexual Violence or Domestic Violence
	Individuals Struggling with Substance Use or Abuse		VIOLENCE

Other Vulnerable Populations: share other vulnerable populations if they are not listed above. Also, please use this space to provide any additional information on your above selections.

10. There are many things that impact health outside of the direct provision of healthcare. Below are a list of such assets in the community. Please check what you feel are the FIVE COMMUNITY ASSETS that need strengthening in the community.

Affordable Child Care		Neighborhood Safety
Affordable Housing		Public Safety Services (Police, Fire, EMT)
Early Childhood Education		Public Spaces with Increased Accessibility for those with Disabilities
Education – Kindergarten through High School		
Education – Post High School		Safe Play and Recreation Spaces (Playgrounds, Parks, Sports Fields)
Employment Opportunity/Workforce Development		Safety Net Food System (Food Bank, WIC, SNAP, Meals on Wheels, etc)
Environment – Air & Water Quality		
Green Spaces		Senior Services
Healthy Food Access (Fresh Fruits & Vegetables, Community	/ /	Social and Community Networks
Gardens, Farmers Markets, etc.)		Social Services
Homelessness		Transportation
		Walk-able and Bike-able Communities (Sidewalks, Bike/Walking Trails)

Other Community Assets: share other community assets if they are not listed above. Also, please use this space to provide any additional information on your above selections.

11. Thank you so much for your participation in the community health survey.

Optional: Please leave any comments or closing ideas below.

Thank you in advance for responding to this brief survey as part of the Community Health Needs Assessments being conducted jointly by Bon Secours Hampton Roads, Children's Hospital of The King's Daughters, Riverside Health System, Sentara Healthcare and the Virginia Department of Health.

The results of the survey will help us identify community health priorities, as well as highlight possible opportunities to effect change.

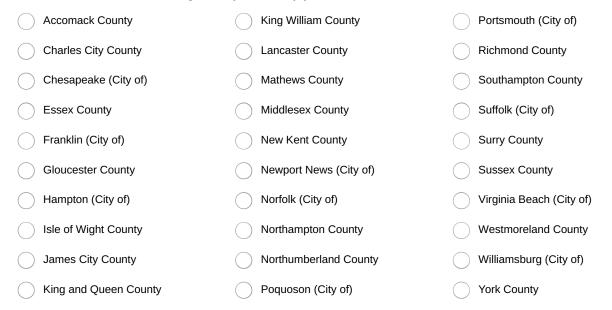
Your Home Community		
* 1. Do you live in Virginia or North Carolina?		
North Carolina		
Virginia		

North Carolina Communities

- * 2. Please tell us in which North Carolina County you live.
 - Bertie County
 - Camden County
 - Chowan County
 - Currituck County
 - Dare County
 - Gates County
 - Hertford County
 - Pasquotank County
 - Perquimans County
- * 3. Please share your ZIP code.

Virginia Communities

* 4. Please tell us in which Virginia city or county you live.



* 5. Please share your ZIP code.

Community Health Concerns and Health Services

ADULTS

We want to better understand the key health issues that you feel affect your community. The following questions are about health concerns and health services for adults. We will also ask you similar questions about children and teens in your community in a separate section.

6. Community Health Concerns for Adults (18 years of age and older)

Below is an alphabetical list of community health issues that affect ADULTS (18+). Based on your experience, please check the FIVE (5) MOST IMPORTANT HEALTH CONCERNS FOR ADULTS in your community.

	Accidents / Injuries (Unintentional)	Hunger
	Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids)	Infectious Diseases (Hepatitis, TB, MRSA, etc.)
	Alzheimer's Disease / Dementia	Intellectual or Developmental Disabilities / Autism
	Behavioral / Mental Health (Including Suicide, ADD, Anxiety, Depression, etc.)	Neurological Conditions (Stroke, Seizures, Multiple Sclerosis, Traumatic Brain Injury, etc.)
	Bullying (Cyber, Workplace, etc)	Overweight/Obesity
	Cancer	Physical Disabilities
	Chronic Pain	Prenatal and Pregnancy Care
	Dental / Oral Care	Respiratory Diseases (Asthma, COPD, Emphysema)
		Sexually Transmitted Infections (HPV, HIV/AIDS, Chlamydia,
	Diabetes	Gonorrhea, Herpes, etc.)
	Drowning / Water Safety	Smoking / Tobacco Use (Cigarettes, Chewing Tobacco,
	Environmental Health (Water Quality, Pollution, Mosquito Control, etc.)	Vaping or E-Cigarettes)
		Violence – Sexual and / or Domestic
	Heart Conditions (Heart Disease, Congestive Heart Failure, Heart Attacks, High Blood Pressure)	Violence in the Community (Gun Injuries, Gangs, Human Trafficking, etc.)

Comments: Please use this space to provide any additional information on why you selected these concerns or share other health concerns that are not listed.

7. Access to Healthcare (Adults)

Below is an alphabetical list of issues that may affect the ability for ADULTS (18+) to access care. Based on your experience, please check the FIVE (5) MOST IMPORTANT ISSUES IN ACCESSING HEALTHCARE FOR ADULTS in your community.

Childcare	No / Limited Home Support Network
Costs	No / Limited Phone Access
Health Insurance	Time Off From Work
Lack of Medical Providers	Transportation
Location of Health Services	Understanding the Use of Health Services

Comments: Please use this space to provide any additional information on why you selected these concerns or share any concerns that are not listed.

8. Below are questions that address the quality of care received. Please choose if you agree or disagree with the following statements.

When seeking health services, I feel that _____ plays a role in the treatment adults receive.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Race/Ethnicity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Language	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Gender	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Sexual Orientation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Age	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Disabilities	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Religion	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Education	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Immigration Status	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Comments: Please use this space to provide any additional information on why you agreed or disagreed with the above statements.

9. Community Health Services for Adults			
Below is an alphabetical list of health services. Based on your experience, please check the FIVE (5)			
MOST IMPORTANT SERVICES you feel NEED TO BE STRENGTHENED in order to improve health			
services for ADULTS (18+) in your community.			
Access to Care (Availability, Language, Costs, Lack of Providers, etc.)	Health Insurance Coverage		
Aging Services	Health Promotion and Prevention Services		
	Home Health Services		
Alcohol / Substance Use Disorders	Hospice and Palliative Care Services		
Behavioral / Mental Health Services	Hospital Services (Inpatient, Outpatient, Emergency Care)		
Bereavement Support Services	Long Term Services / Nursing Homes		
Cancer Services			
Care Coordination and Transitions of Care	Pharmacy Services		
Chronic Disease Services (Diabetes, High Blood Pressure)	Physical Rehabilitation Services		
	Primary Care		
Chronic Pain Management Services	Public Health Services		
Dental / Oral Health Services	Social Services		
Domestic Violence / Sexual Assault Services			
Family Planning and Maternal Health Services	Telehealth / Telemedicine		
Comments: Please use this space to provide any additional information on why you selected these concerns or share any concerns not listed.			

COMMUNITY HEALTH CONCERNS AND HEALTH SERVICES

CHILDREN and TEENS

We want to better understand the key health issues that you feel affect your community. The following questions are about health concerns and health services for children and teens.

10. Community Health Concerns for Children and Teens (Age 0-17 years)

Below is an alphabetical list of community health issues that affect CHILDREN (0-17). Based on your experience, please check the FIVE (5) MOST IMPORTANT HEALTH CONCERNS FOR CHILDREN in your community.

Accidents / Injuries (Unintentional)	Hunger
Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids)	Infectious Diseases (Hepatitis, TB, MRSA, etc.)
Behavioral / Mental Health (Including Suicide, ADD, Anxiety,	Intellectual or Developmental Disabilities / Autism
Depression, etc.) Bullying (Cyber, School, etc.)	Neurological Conditions (Epilepsy, Tourette Syndrome, Sleep Disorders, Seizures etc.)
Cancer	Overweight/Obesity
Chronic Pain	Physical Disabilities
Dental / Oral Care	Respiratory Diseases (Asthma, Emphysema, Cystic Fibrosis)
Diabetes	Sexually Transmitted Infections (HPV, Herpes, HIV/AIDS, Chlamydia, Gonorrhea, etc.)
Drowning / Water Safety	Smoking / Tobacco Use (Cigarettes, Chewing Tobacco, Vaping or E-Cigarettes)
Eating Disorders	Teen Pregnancy
Environmental Health (Water Quality, Pollution, Mosquito Control, etc.)	Violence In the Home – Child Abuse (Sexual, Physical,
Heart Conditions (Congenital Heart Disease, Fainting, and Rhythm Abnormalities)	Emotional or Neglect) or Exposure to Domestic Violence Violence in the Community (Gun Injuries, Gangs, Human
Riyum Abnornaliues)	Trafficking, etc.)

Comments: Please use this space to provide any additional information on why you selected these concerns or share any concerns not listed.

11. Access to Healthcare (Children and Teens)				
Below is an alphabetical list of issues that may affect the ability for CHILDREN AND TEENS (0 -17) to				
access care. Based on your experience, please che	ck the FIVE (5) MOST IMPORTANT ISSUES IN			
ACCESSING HEALTHCARE FOR CHILDREN AND	TEENS in your community.			
Childcare	No / Limited Home Support Network			
Costs	No / Limited Phone Access			
Health Insurance	Time Off From Work			
Lack of Medical Providers	Transportation			
Location of Health Services	Understanding the Use of Health Services			
Comments: Please use this space to provide any additional concerns not listed.	l information on why you selected these concerns or share any			

12. Below are questions that address the quality of care children/teens receive. Please choose if you agree or disagree with the following statements.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Race/Ethnicity	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Language	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Gender	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Sexual Orientation	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Age	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Disabilities	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Religion	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Education	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Immigration Status	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

Comments: Please use this space to provide any additional information on why you agreed or disagreed with the above statements.

13. Community Health Services for Children and Teens				
Below is an alphabetical list of health services. Base	d on your experience, please check the FIVE (5)			
MOST IMPORTANT SERVICES that you feel NEED	TO BE STRENGTHENED in order to improve health			
services for CHILDREN and TEENS (0-17) in your c	ommunity.			
Alcohol / Substance Use Disorders	Health Insurance Coverage			
Behavioral / Mental Health Services	Home Health Services			
Bereavement Support Services	Parent Education and Prevention Programming (Child Development, Positive Discipline, Newborn Care,			
Cancer Services	Parent/Child Relationships, etc.)			
Care Coordination and Transitions of Care	Pharmacy Services			
Child Abuse Treatment Services	Physical Rehabilitation Services			
Chronic Disease Services (Diabetes, High Blood Pressure)	Primary Care			
Chronic Pain Management Services	Public Health Services			
Dental / Oral Health Services	Social Services			
Foster Care (Supporting Children in the System and Their Host Families)	Telehealth / Telemedicine			

Other Community Health Services: Please use this space to provide any additional information on your above selections.

OTHER COMMUNITY STRENGTHS AND WEAKNESSES

14. At Risk Populations

Every community has populations which may need additional services or support to be healthy. Please check what you feel are the FIVE (5) MOST AT-RISK POPULATIONS WHO NEED SERVICES OR SUPPORT in your community.

	Caregivers (Examples: caring for a spouse with dementia or child with autism)	a	Individuals Transitioning out of Incarceration
\square	Children and Teens (age 0-17 years)		Individuals Needing Hospice / End of Life Support
	Immigrants or Community Members who are not Fluent in		Low Income Individuals
	English		Migrant Workers
	Individuals / Families / Children Experiencing Homelessness		Seniors / Elderly
	Individuals in the LBGTQ+ Community		Unemployed Individuals
	Individuals Struggling with Literacy		Uninsured / Underinsured Individuals
	Individuals with Intellectual or Developmental Disabilities		Veterans
	Individuals with Physical Disabilities		Victims of Human Trafficking, Sexual Violence or Domestic
	Individuals Struggling with Substance Abuse		Violence
Corr	ments: Please use this space to provide any additional inform	nation	on why you selected these concerns or share any concerns

Comments: Please use not listed.

15. Community Assets and Services

Every community has assets and services that greatly influence the health and well-being of its residents. Please check what you feel are the FIVE (5) MOST IMPORTANT COMMUNITY ASSETS THAT NEED STRENGTHENING in your community.

Affordable Child Care		Public Spaces with Increased Accessibility for Those with Disabilities
Education – Early Childhood (Pre-K)		Safe, Affordable Housing
Education – Kindergarten through High School		Safe Play and Recreation Spaces (Playgrounds, Parks,
Education – Post High School		Sports Fields)
Education – Special Education Services		Safe Sidewalks, Trails and Bike Access
Employment Opportunity / Workforce Development		Safety Net Food System (Food Bank, WIC, SNAP, Meals on Wheels, etc.)
Environment – Air & Water Quality Healthy Food Access (Fresh Fruits & Vegetables, Community		Senior Services (Centers, Socialization, Education, etc.)
Gardens, Farmers Markets, etc.)		Social and Community Networks
Public Safety Services (Police, Fire, EMT)		Social Services (Assistance with Medicaid, Medication, Home Safety, Other Resources, etc.)
		Transportation
mments: Please use this space to provide any additional inform listed.	ation	on why you selected these concerns or share any concerns

16. Additional Ideas or Suggestions

Please use this space to share any additional ideas or suggestions for improving community health. (OPTIONAL)

Your	Point of View				
Pleas	se tell us a little abo	ut yourself (OPTIC	DNAL)		
17	. Please select the o	ption that best desc	ribes your own persona	al health.	
	Very Poor	Poor	Neutral	Good	Very Good
	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
18	. Please select the o	ption that best desc	ribes the health of your	community.	
	Very Poor	Poor	Neutral	Good	Very Good
	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
19	. Gender				
\bigcirc) Male				
C) Female				
C	Transgender				
C	Prefer Not to Answer				
20	. Race				
С	White				
C	Black				
C) American Indian / Alasl	ka Native			
C) Asian / Native Hawaiia	n / Other Pacific Islande	r		
\bigcirc	Some Other Race				
) Two or More Races				
\bigcirc					
21	. Ethnicity				
С) Hispanic				
С	Not Hispanic or Latino				

22. Age (years): 0-17 18-24 25-54 55+ 23. Marital Status Married Separated Divorced Widowed Never Married / Single 24. Highest Level of Education Grade K-8 Grade 9-11 High School Graduate Some College / No Degree Associates Degree Bachelor's Degree Graduate Degree No Schooling Completed 25. Insurance Private Insurance (Individual, Exchange Plan, Employer Sponsored) Medicare Medicaid Military (Tricare / VA Benefits) Indian Health Services Uninsured Self-pay (Not Co-Pay)

If enrolled in more than one insurance type, please list them below:

Yes	serving on active duty or as a Reservist in the U.S. Armed Forces?
) No	
27. Are you a veteran	of the U.S. Armed Forces?
Yes	
No	
28. Are you a depend	ent of someone who serves in the U.S. Armed Forces?
Yes	
No	
29. Housing	
Own	
Rent	
Homeless	
Other	
30. Live With:	
Jumber of Adults in Home	
Number of Children	
31. Live With: Age Ra	nge of Children
0-2	
3-5	
6-11	
12-14	
15-18	
19-21	
22-25	

