



Community Health Needs Assessment

Bon Secours Southampton Memorial Hospital
Bon Secours Mercy Health, Inc.



Good Help to Those In Need®

Table of Contents

Executive Summary	2
Facility Description and Vision.....	5
Access to Health Care Profile	7
Provider to Residents Ratios	
Health Professional Shortage Area/Medically Underserved Area	
Demographics Data Profile	7
Population	
Unemployment/Median Income	
High School Graduation	
Uninsured Population	
Healthy Lifestyles	
Social Indicators of Health Related to Children	
Health Conditions and Disease Data Profile	12
Key Findings.....	12
Alcohol/Substance Abuse	
Behavioral/Mental Health	
Adult Obesity/Overweight/Diabetes	
Heart Conditions	
Smoking/Tobacco Use	
Other Key Findings	18
Cancer	
Alzheimer's Disease/Dementia	
Violence in the Community	
Access to Health Services	
Community Assets that Need Strengthening	
Identifying Needs	21
Community Dialogues	
Prioritization Process	22
Method for Prioritization	
Progress on 2016-2019 CHNA Priorities	23
Services and Resources Available to Meet Identified Needs	23
Appendix	37

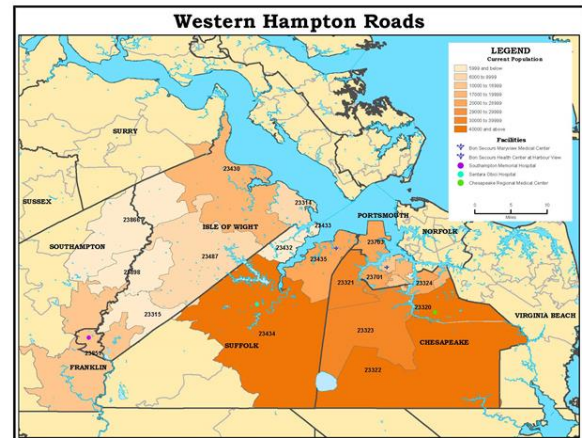
Executive Summary

Bon Secours Southampton Memorial Hospital (SMH) is located in Franklin, Virginia. SMH is a Joint Commission-accredited, 219-bed facility that provides inpatient, outpatient, emergency, medical, surgical and long-term care serving approximately 63,477 residents in the City of Franklin, Isle of Wight County, Southampton County, and the City of Suffolk in the Commonwealth of Virginia. The 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 as part of the 2019 Community Health Assessment. This executive summary provides an overview of the initiative and the findings.

The Mission of Bon Secours Mercy Health, Inc. is to extend the compassionate ministry of Jesus by improving the health and well-being of our communities and bring good help to those in need, especially people who are poor, dying and underserved.

The survey and this assessment focus on the SMH service area of fifteen (15) zip codes. The study region is shown in the map.

Bon Secours Southampton Memorial Hospital Service Area



Overall, survey participants represent a blend of perspectives across age, race and income.

Based on secondary data analysis, the following table highlights the major health issues where the SMH community has worse rates or percentages when compared to Virginia.

Health Concerns
<ul style="list-style-type: none"> • Alcohol/Substance Use • Behavioral/Mental Health • Diabetes/Overweight/Obesity • Heart Conditions
Social / Economic Factors
<ul style="list-style-type: none"> • Low Median Income • Unemployment • Hunger • Accidents/Injuries (unintentional) • Violence in the Community

The following charts illustrate the top strengths, health issues and services that need improvement identified by survey participants.

Top Strengths identified by Survey Participants
Affordable Child Care
Affordable Housing
Employment Opportunity/Workforce Development
Healthy Food Access
Homelessness
Neighborhood Safety

Top Health Issues identified by Survey Participants
Alcohol/ Substance Use
Behavioral/Mental Health
Diabetes
Heart Conditions
Smoking/Tobacco Use
Overweight/Obesity

Top Areas of Improvement identified by Survey Participants
Behavioral/Mental Health Services
Chronic Disease Services
Dental/Oral Health Services
Social Services
Aging Services

For the most part, the health needs selected by survey participants focus on health issues. Violence in the Community and Accidents/Injuries (unintentional) were the only social issues included in the top concerns.

SMH'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, and services currently provided. 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, SMH will focus the Community Health Needs Assessment implementation strategy on the following.

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.

SMH will address heart disease through The CHF Get with the Guidelines program, an in-hospital program for improving care by promotion consistent adherence to CHF (chronic heart failure) treatment guidelines. In addition, SMH will focus on efficient and effective care of patients with acute coronary syndrome and establish consistent, high quality processes across the continuum of care. Community education will be implemented through programming and heart attack warning education flyers in the hospital and medical group waiting rooms. Hypertension and CHF control will be done through the medical groups.

Chronic Disease in the Aging Population

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, SMH 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. Medical practices will provide effective A1C monitoring and treatment to reduce complications related to diabetes and improve overall health of patients. Annual medical

wellness visits will ensure screenings are being performed to identify chronic disease early and effective management of chronic disease is implemented.

Southampton Memorial Hospital was acquired by Bon Secours Mercy Health, Inc. on January 1, 2020. Prior to the acquisition, SMH was a for-profit hospital. As such, it was not required to complete a CHNA. In order to align all hospital year-ends and CHNA cycles, Southampton Memorial Hospital will prepare a new CHNA and Implementation Strategy for tax year ending December 31, 2022.

Facility and Service Area Description

Bon Secours Southampton Memorial Hospital (SMH), Franklin/Southampton's first medical facility began in the home of Dr. Raiford in the small community of Sedley and later became Raiford Hospital. SMH opened in 1963 on its current site. In 1999, SMH was purchased by Community Health Systems. Bon Secours Mercy Health, Inc. purchased SMH on January 1, 2020.

In 2004, SMH underwent a \$17.5 million, 60,000 square foot expansion. A \$2 million renovation in 2001 converted shared rooms into private rooms. In

2006, the renovation of the Women's Suite was completed and in 2015, a \$2 million renovation of East Pavilion was completed.

SMH is a 219-bed not-for-profit, acute care facility licensed in the state of Virginia and serving approximately 63,477 residents primarily in cities of Franklin and Suffolk and the counties of Isle of Wight and Southampton. SMH provides a comprehensive array of inpatient and outpatient services. In addition, SMH works with sister facilities Bon Secours DePaul Medical Center in Norfolk, Bon Secours Mary Immaculate

Hospital in Newport News, and Maryview Medical Center in Portsmouth to support highly complex surgical specialties.

SMH has 90 licensed general acute care beds, eight ICU beds, 58 medical/surgical beds (including 10 licensed Swing beds), a 13-bed secured medical unit, and 10 medical detox beds. In addition, SMH operates a 24-hour emergency services department and a 129 bed long term care facility. In addition to the services listed above, SMH offers comprehensive radiology services including magnetic Resonance Imaging (MRI) and Computer Tomography (CT). Other offerings include nuclear medicine, respiratory therapy, gastroenterology, neurology, cardiology, podiatry, inpatient dialysis, and gynecological services.

Orthopedics, sports medicine, internal medicine, family practice, and ophthalmology, among other specialty practices are also provided through SMH.

Signifying our commitment to rendering the best care to the patients we serve. SMH is fully accredited by the Joint Commission for the hospital, LTC/SNF, and Lab. Radiology is accredited by the American College of Radiology (ACR) for ultrasound (breast, general, and vascular) and mammography (ACR and FDA). In addition, the SMH Chest Pain program is accredited by the American College of Cardiology (ACC).

SMH also maintains a 5-star rating with CMS for its LTC/SNF. The U.S. News & World Report named SMH's LTC for Best Nursing Home (2017) and Skilled Care (2019).



Access to Health Care Profile

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

Providers

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 the cities of Franklin and Suffolk and the counties of Isle of Wight and Southampton. The ratios for the state are also given for comparison. This data table highlights a disparity in provider to resident ratios between the three cities and across provider types¹.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Primary Care (per 100,000 population (2017))	820:1	4,440:1	2,150:1	1,100:1	1,350:1
Dentist 100,000 population (2018)	1,340:1	8,790:1	3,700:1	2,280:1	1,460:1
Mental Health (per 100,000 population (2019))	620:1	0.0:1	3,700:1	1,010:1	570:1

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 2019, Franklin and Southampton County were designated by HPSA for primary care, dental and mental health shortages.

HRSA designates geographic areas or defined populations as “medically underserved” based on the presence of 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.²

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”.

¹<http://www.countyhealthrankings.org>

² <http://hrsa.gov/shortage/index.html>

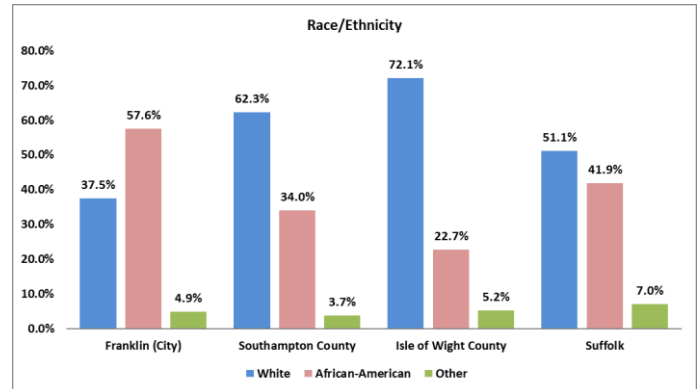
A summary of the demographics data for the Southampton Memorial Hospital service area is found in this section of the CHNA. Except where noted, data in the demographics section can be accessed at <http://www.countyhealthrankings.org>.

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.³

- The SMH community is predominantly White with a large African American population. Compared with Virginia as a whole, the SMH community has a higher percentage of White population and a significantly greater percentage of Africans Americans.

³ MinorityHealth.hhs.gov, HHS Disparities Action Plan



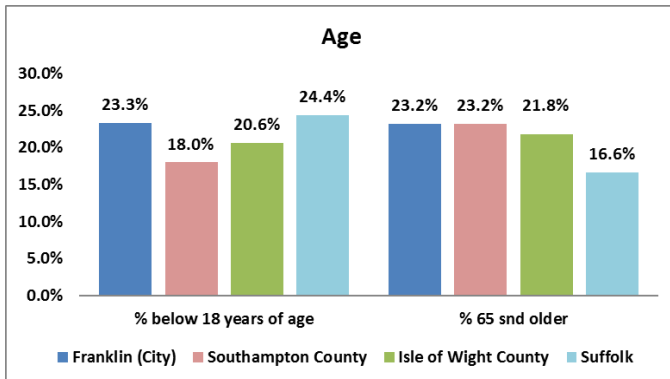
- There are lower percentages of Hispanics and Asians in the SMH community compared to Virginia.

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.⁴

The chart on the next pages shows SMH community age population is comprised of younger adults (age 17 and younger)

⁴ www.healthypeople.gov/topics-objectives/topic/older-adults

is slightly lower than the rest of Virginia while having a slightly older population (age 65 and older) than the rest of Virginia.

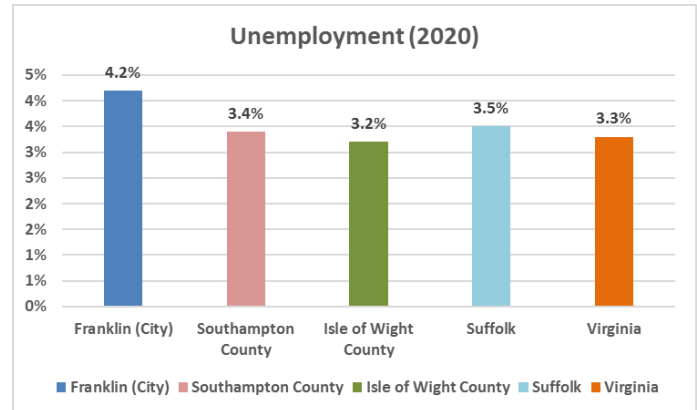


The Weldon Cooper Center for Public Service estimates that the community's older population will steadily increase through 2040 to over 76,000 people, while the population growth rate of <19 and 20-64 year olds will decrease below that of the older population.⁵ These data are reflective of the "baby 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).⁶ The following tables illustrate the data for unemployment and median income for the SMH community.

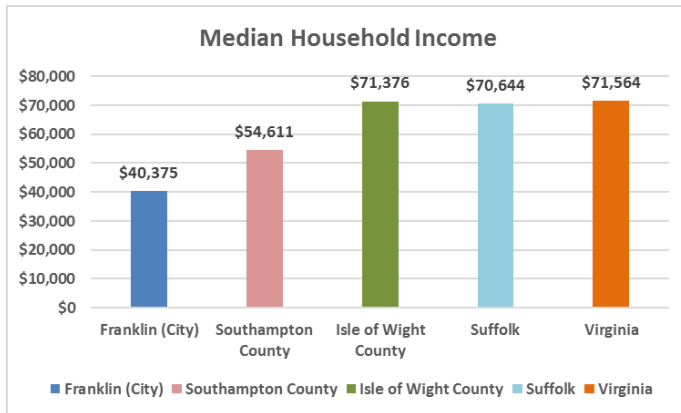


- The SMH community overall experiences slightly higher levels of unemployment than Virginia, with Franklin having the highest unemployment in the community. Unemployment in the SMH community has decreased since 2017. The median household income for SMH overall is slightly lower than Virginia.

⁵

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

⁶ 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.



- The median income in Franklin and Southampton County are significantly lower than the state average for the reporting period of 2014-2108. The median household income for reporting period in Franklin and Southampton County increased slightly since the 2010-2014 reporting period.
- The median household income for Isle of Wight County and Suffolk are statistically equal to that of Virginia. Median incomes for the reporting period of 2014-2018 for Isle of Wight County and Suffolk are slightly higher than the 2010-2014 reporting period.

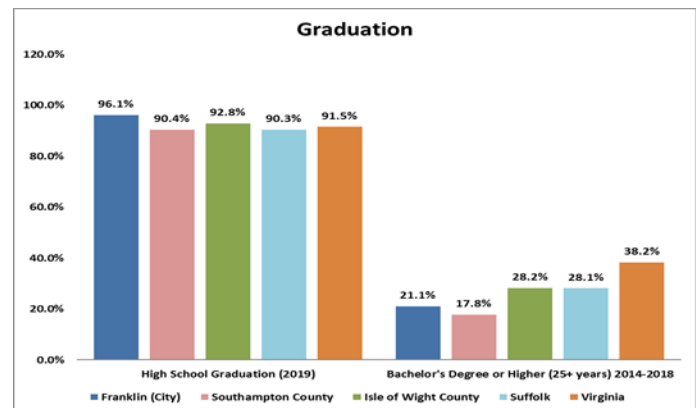
High School Graduation

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.

- High school graduation rates for the SMH community are statistically equal to Virginia's for the 2019 reporting period. With the exception

of Suffolk which is slightly lower, the rates are statistically equal to the 2017 reporting period.

- The percentage of residents with a bachelor's degree or higher is lower than Virginia's percentage; however, the percentage is higher for the 2014-2018 reporting period than the reporting period of 2010-2014.



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.⁷

- Overall percentages of uninsured adults and children in the SMH community and Virginia are statistically comparable and have slightly decreased since the 2014.

⁷ www.healthypeople.gov, Access to Health Services

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.⁸

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 following table provides food and physical activity data for the SMH community.⁹

The Food Environment index for the SMH community is slightly better than the data reported for Virginia. Franklin's Food Insecurity Index is significantly worse than Virginia.

Measure and Definition of Measure	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Food Environment Index (2020) Factors that contribute to a healthy food environment, 0 (worst) to 10 (best)	4.4%	7.1%	8.6%	7.7%	8.9%
Food Insecurity (2017) Percentage of population with no lack adequate access to food	20.2%	12.9%	10.3%	13.4%	10.2%
Physical Inactivity (2016) Percentage of adults aged 20 and over reporting no leisure-time physical activity HP2020 Goal – 32.6%	27.0%	34.0%	28.0%	27.0%	23.0%
Access to exercise (2020) Percentage of population with adequate access to locations for physical activity	45.3%	31.0%	71.0%	76.2%	82.4%

The index shows that food insecurity in Southampton County and Suffolk are

⁸ www.stateofobesity.org/healthcare-costs-obesity

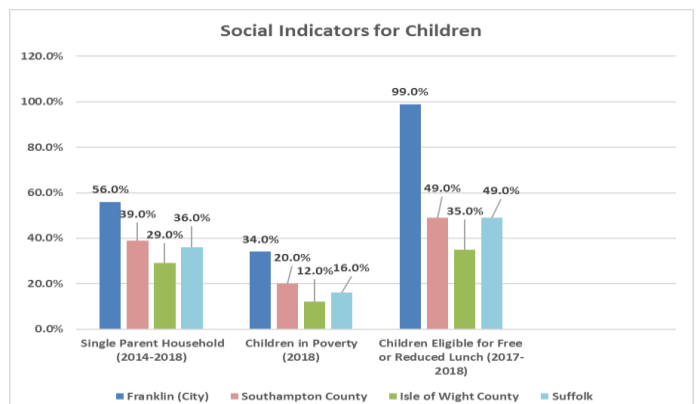
slightly worse than Virginia, while Isle of Wight is on par with the state percentage.

Physical Inactivity percentages for the SMH community are higher than Virginia. Southampton County has the highest percentage of physical inactivity within the SMH community.

While all areas of the SMH community ranked lower than Virginia in access to exercise, Southampton County ranked the lowest (31%), followed by Franklin. While still lower than Virginia, Suffolk has the most access to exercise opportunities in the SMH service area.

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 on the next page provides risk factor data specific to children (<18 years old) in the SMH community for the reporting period of 2014-2018.



- The percentage of children in single parent households within the SMH community overall (40.0%) is above the Virginia percentage (30.0%) with Franklin significantly higher at 56.0%. The percentage for the SMH community has slightly increase since the 2010-2014 reporting period.
- The percentage of children living in poverty in the SMH community (20.5%) is higher than Virginia's percentage of 14.0%. Isle of Wight County is the only locality with a lower percentage (12.0%) than Virginia.
- With Franklin having a higher unemployment rate and considerably lower annual median income, there is a direct correlation with Franklin having a significantly higher percentage (99%) of children eligible for free or reduced lunch and the rest of the SMH community compared to Virginia (44.0%).
- Isle of Wight County is the only locality in the SMH community with a lower percentage of children eligible for free or reduced lunch (35.0%) than Virginia.

Health Conditions and Disease Data Profile

The Health Conditions and Disease Data Profile for SMH community 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. Additional health behaviors and social determinants of health have been identified, as well as data around children and teens, as key contributors to the overall health of a community.

KEY FINDINGS

In this section, we will highlight the top five health concerns and services that need improvement raised by health indicators as well as by the Community Health Needs Survey (Survey). This analysis is listed in order of priority based on Survey results as perceived by the responders. Support for this data can be found at <http://www.ghrconnects.org> unless otherwise noted.

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.

The following table shows the death rates for drug overdose, Fentanyl/Heroin overdose, and prescription drug

overdose death rate for the SMH community.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Drug Poisoning Deaths (per 100,000) 2016-2018	no data	no data	20.0	10.3	17.2
Death Rate due to Fentanyl/Heroin Overdose (per 100,000) 2018	0.0	11.4	5.4	6.6	9.5
Death Rate due to Prescription Opioid Overdose (per 100,000) 2017	0.0	11.1	8.2	3.4	5.9
EMS Narcan Administration (per 100,000) 2017	84.3	55.4	38.3	57.1	53.9

- Drug overdose deaths have increased in Isle of Wight County and Suffolk since the last reporting period of 2014-2016. The rate for Suffolk has decreased. There was no data recorded for Franklin and Southampton County.
- In 2018, the death rate due to Fentanyl/Heroin in the SMH service area decreased since 2016. Franklin experienced the greatest drop from 24.5% to 0.0%.
- Prescription opioid related deaths in the SMH service area as a whole are slightly lower than Virginia. While Southampton and Isle of Wight counties showed the greatest increase since 2017, Isle of Wight County and Suffolk slightly decreased in number of deaths from prescription opioid related deaths.
- Although Narcan administration by emergency medical services decreased in the SMH service area since 2017, it significantly increased

in Franklin and slightly increased in Southampton County.

The following table illustrates the percentage for excessive drinking, binge drinking, and alcohol-impaired driving.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Excessive Drinking (2017)	13.8%	15.7%	18.1%	17.0%	17.4%
Alcohol-Impaired Driving Deaths (2014-2018)	0.0%	47.6%	36.4%	17.5%	30.2%

- The percentage for excessive drinking in the SMH community overall is slightly lower than Virginia; however, it is slightly higher than in 2015. Although all areas have increased percentages, Isle of Wight County is the only area with a higher rate than Virginia.
- The percentage of alcohol-impaired driving deaths in the SMH community is lower than Virginia for report period 2014-2108. Although percentages for Southampton County, Isle of Wight County, and Suffolk increased since the 2010-2014 reporting period, Franklin's decreased from 100.0% to 0.0%.

The following table shows latest data around alcohol and tobacco use by teens in the SMH community. There is no previous data to compare.

	Franklin (City)	Southampton County	Isle of Wight	Suffolk	Virginia
Teens who Use Alcohol (2013)	25.0%	29.0%	31.0%	27.0%	30.0%
Teens who Use Tobacco (2013)	16.0%	20.0%	21.0%	18.0%	20.0%

- The percentage of teens who use alcohol in the SMH community (28.0%) is lower than Virginia.
- The percentage of teen who use tobacco in the SMH community is also lower than Virginia.

Even though the SMH community ranks lower than Virginia for excessive drinking, survey participants ranked Alcohol/Substance Abuse as a top five health concern.

Behavioral/Mental Health

Behavioral/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 illnesses, 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 2016.¹⁰ The tables below illustrate data around suicide and mental health.¹¹

- The suicide mortality rate for the SMH community (14.5 per 100,000) is higher than Virginia's rate (11.8 per 100,000) and has almost doubled since 2015. Franklin's rate is significantly higher than the rest of the community. Isle of Wight County's rate is slightly higher than 2015, while Southampton County and Suffolk rates decreased.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Suicide Mortality Rate (per 100,000) 2017	25.2	7.3	16.4	9.2	11.8
Hospitalization Rate due to Mental Health (per 10,000) 2016-2018	87.2	31.9	45.8	60.8	53.3

- The SMH community rate of hospitalizations due to mental health decreased slightly from the 2015-2017 reporting period. Franklin's rate continues to be significantly higher than the rest of the SMH community and Virginia.

¹⁰ www.nimh.nih.gov/health

- The SMH community continues to have a statistically equivalent rate of average number of poor mental health days with Virginia; however, the number has increased throughout the community since 2015.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Average Number of Poor Mental Health Days (2017)	4.3	3.9	3.8	3.8	3.8
Frequent Mental Distress (2017)	13.8%	12.2%	11.3%	11.6%	11.0%
Depression: Medicare Population (2017)	12.2%	14.6%	14.4%	15.0%	16.6%

- The percentage of the SMH community residents who report frequent mental distress has increased since 2015.
- The percentage of Medicare population diagnosed with depression slightly increased in the SMH community since 2015.

	Franklin (City)	Southampton County	Isle of Wight	Suffolk	Virginia
Teens who Felt Sad or Hopeless (2013)	25.0%	24.0%	24.0%	25.0%	25.0%
Hospitalization Rate due to Pediatric Mental Health (per 10,000) 2016-2018	45.1	19.5	24.4	39.0	32.1
Hospitalization Rate due to Adolescent (10-17) Suicide and Intentional self-Inflicted Injury per 10,000 (2016-2018)	74.8	34.8	27.3	53.0	40.9

- The percentage of SMH community teens who felt sad or hopeless is statistically equal to that of Virginia. There is no data available to compare with a previous reporting period.
- The rate of hospitalization due to pediatric mental health (32.0 per

10,000) increased since the previous reporting period of 2014-2015 (26.8 per 10,000); however, it is statistically equal to that of Virginia.

- The SMH community hospitalization rate due to adolescent suicide and intentional self-inflicted injury (47.5 per 10,000) is significantly higher than the the previous reporting period of 2014-2015 (30.8 per 10,000). The rates for Franklin and Southampton County increased since the 2014-2015 reporting period, while Isle of Wight and Suffolk rates slightly decreased.

Behavioral/Mental Health was rated in the top five health concerns by Survey participants. Behavioral/Mental Health Services was also rated in the top five Services that Needs Strengthening.

Chronic Disease in the Aging Population

The percentage of obese adults is an indicator of the overall health of a community. Obesity increases the risk of many diseases and health conditions, including diabetes. 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 following table illustrates the percentage of SMH community adults who are obese and who maintain a sedentary lifestyle in relation to Virginia.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Adults who are Obese (2016)	49.0%	45.0%	38.0%	32.0%	30.0%
Adults who are Sedentary (2016)	26.6%	32.3%	26.8%	28.3%	21.6%

- The obesity percentage for the SMH community overall has increased since 2015. The percentages for Franklin, Southampton County, and Isle of Wight increased while the percentage for Suffolk remained the same since 2015.
- The percentage of adults who report being sedentary slightly increased since 2015. While Franklin's percentage remained consistent, the percentage for rest of the SMH community increased.

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. The table below shows data around diabetes rates, mortality, and hospitalization.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Adults with Diabetes (20 years +) 2016	11.5%	13.8%	9.7%	12.6%	9.6%
Diabetes Mortality Rate (per 100,000) 2017	61.3	19.2	29.5	33.2	17.2
Hospitalization Rate due to Diabetes Adults (per 10,000) 2016-2018	46.6	18.9	20.3	23.0	18.3

- The percentage of adults with diabetes in the SMH community (14.3%) is higher compared to

Virginia (9.6%). The percentages for Franklin and Isle of Wight slightly decreased since 2014; however, the Southampton County and Suffolk experience an increase in the same time period.

- Diabetes mortality rates for the SMH community (35.8) are significantly higher than Virginia (17.2). Franklin and Isle of Wight's rates almost doubled while Suffolk's rate more than doubled since 2015. Southampton County's rate increased slightly in the same time period.
- Hospitalization rates due to diabetes in the SMH community (27.2) are higher than Virginia (18.3). Since the 2014-2016 reporting period, Franklin's hospitalization rate due to diabetes decreased while the rates in the rest of the SMH community increased.
- Diabetes in the SMH community's Medicare population increased between 2015 (30.5%) and 2017 (32.1%). It is also higher than Virginia's percentage of 27.8%. With the exception of Suffolk, which had a decrease, the percentage for the rest of the SMH increased during the same time period.

Diabetes, along with Overweight/Obesity was rated in the top five as a major health issue survey respondents. It was also in the top five as a Service that needs Strengthening (Chronic Disease Services subcategory).

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 could be attributed to these causes.¹² Stroke is the second leading cause of death globally, and the third leading cause of death in the United States. Stroke is also a leading cause of disability in the United States.

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 the SMH community and Virginia.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Stroke Mortality Rate (per 100,000) 2017	52.4	32.5	39.9	36.3	31.8
Heart Disease Mortality Rate (per 100,000) 2017	242.1	182.6	131.1	166.0	133.1

- The overall SMH community stroke mortality rate (40.3 per 100,000) is significantly higher than Virginia's rate; however, the overall rate has improved since 2015. The rate for Southampton County slightly

increased. The rates for the rest of the SMH community decreased and Franklin's rate decreased by more than half in the same period.

- The overall SMH community heart disease mortality rates are also higher than Virginia's rate and have increased since 2015. Heart disease rates in Franklin and Southampton County have increased significantly since 2015. Rates for Isle of Wight County and Suffolk improved in the same time period.

Survey responders identified heart conditions in the top five as a health concern. Heart conditions was also included in the top five services that needs strengthening as a subset of Chronic Disease services..

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.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
Hospitalization Rate due to Adult Asthma (per 10,000) 2016-2018	12.4	2.5	2.3	4.7	3.7
Adults who Smoke (2017)	19.7%	17.1%	15.2%	19.9%	16.4%

¹² www.heart.org/idc/groups/ahamah-public

- The percentage of adult smokers in the SMH community has remained statistically steady since 2015; however, is higher than Virginia (16.4%).

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 hospitalized due to asthma in the SMH community improved between 2014 (7.9%) and 2018 (5.5%); however, is greater than Virginia. Percentages in Southampton (2.5%) and Isle of Wight (2.3%) counties are lower than Virginia. Suffolk's percentage (4.7%) is slightly higher than Virginia. Franklin's percentage (12.4) is over three times higher than Virginia.

Chronic obstructive pulmonary disease (COPD) refers to a group of diseases that cause breathing problems. The primary cause of COPD is tobacco use.

	Franklin (City)	Southampton County	Isle of Wight County	Suffolk	Virginia
COPD: Medicare Population (2017)	12.2%	14.0%	10.5%	11.5%	10.7%
Asthma: Medicare Population (2017)	5.2%	4.7%	5.4%	5.8%	5.4%

- The percentage of Medicare population with COPD in the SMH community (12.1%) increased slightly since 2015 (11.3%). Although Franklin and Southampton County percentages are higher than Virginia for the current reporting period, they are lower than in 2015. The percentage for Isle of Wight County and Suffolk increased.
- The percentage of Medicare population in the SMH community (5.3%) diagnosed with asthma decreased since 2015. All areas showed improvement.

Tobacco use is the greatest risk factor for lung cancer. Lung cancer mortality rates for Franklin, Southampton County, and Suffolk are higher than Virginia's rate of 42.2 per 100,000.

Lung Cancer Mortality (rate per 100,000)				
	2009-2013	2010-2014	2011-2015	2012-2016
Franklin (City)	47.6	48.5	39.7	47.7
Southampton County	47.6	45.5	44.2	49
Isle of Wight County	47.6	44.0	38.6	37.1
Suffolk	48.2	47.3	43.2	40.7

Smoking/Tobacco Use was listed in the Survey top five health concerns. It was not included in the top five services that need strengthening.

Other Key Findings

This section provides an overview of other key findings and perceptions of health within the SMH community, which includes the cities of Franklin and Suffolk

and the counties of Southampton and Isle of Wight. It combines and compares data from the Community Health Needs Assessment with an analysis of secondary data. Unless otherwise noted, data in this section may be accessed at <http://www.ghrconnects.org>.

Cancer

Cancer has been identified as the second greatest cause of death nationwide, with Heart Disease being number one. The following tables show the data for colorectal, lung, prostate, and breast cancer for the SMH community.

- Colorectal Cancer**

Colorectal Cancer Mortality (rate per 100,000)				
	2009-2013	2010-2014	2011-2015	2012-2016
Franklin (City)	no data	no data	no data	no data
Southampton County	23.7	22.4	18.2	19.6
Isle of Wight County	16.2	15.1	13.0	13.5
Suffolk	20.6	20.3	18.6	19.3

Colorectal cancer mortality rates in the SMH community overall (17.5 per 100,000) increased slightly from 16.6 in the 2011-2015 reporting period after decreasing from 19.3 the previous reporting period of 2010-2014. There was no data reported for Franklin in either County Health Rankings or GHRConnects.

- Lung Cancer**

Lung cancer rates were presented in the previous section. Lung cancer is the second most commonly diagnosed cancer (excluding non-

melanoma skin cancer) and the leading cause of cancer death among both men and women in the United States. Cigarette smoking is the strongest risk factor for lung cancer.¹³ Lung cancer mortality rates for the SMH community overall (43.6 per 100,000) have increased since the previous reporting period (41.5 per 100,000) after a decrease from 46.3 per 100,000 in reporting period 2010-2014.

- Prostate Cancer**

The strongest risk factors for developing Prostate cancer are age, race/ethnicity, and family history.¹⁴ 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)				
	2009-2013	2010-2014	2011-2015	2012-2016
Franklin (City)	no data	no data	no data	no data
Southampton County				
Isle of Wight County	31.4	27.6	25.2	21.9
Suffolk	38.2	40.9	37.5	35.5

The most recent data for prostate cancer in Southampton County (39.4 per 100,000) is from the 2006-2010 reporting period. It is significantly higher than Virginia for the same reporting period (42.4 per 100,000) and ranked in the worst 25% United

¹³ www.cancercoalitionofvirginia.org

¹⁴ www.cancercoalitionofvirginia.org

States counties. However, it is a decrease (44.8 per 100,000) from the 2005-2009 reporting period. Isle of Wight County's mortality rates is lower than Virginia's rate of 24.7 per 100,000, while Suffolk's rate is higher. There is no data for Franklin.

- **Breast Cancer**

Breast cancer is the most commonly diagnosed cancer (excluding non-melanoma skin cancer) and the leading cause of cancer death among women in the United States.

Breast Cancer Mortality (rate per 100,000)				
	2009-2013	2010-2014	2011-2015	2012-2016
Franklin (City)	46.5	48.2	52.3	50.2
Southampton County	39.4	33.6	25.8	24.2
Isle of Wight County	32.3	33.3	26.4	19.9
Suffolk	26.8	27.7	27.0	26.8

Breast cancer mortality rates for the SMH community (30.3 per 100,000) are above the Virginia rate of 21.4 per 100,000; however, the overall community rate continues to improve from the previous reporting periods. Although decreased from the 2011-2015 reporting period, Franklin's rate is more than double that of Virginia.

Cancer was rated was in the top ten health issue identified by Survey participants. It was not included in 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.¹⁵

The percentage of the Medicare population diagnosed with Alzheimer's disease or Dementia in the SMH community (10.5%) in 2017 have slightly increased from the 2015 reporting period of 9.4%. Franklin (11.5%), Southampton County (10.5%) and Isle of Wight County (9.6%) experienced a slight increase since 2015, while Suffolk (10.3%) remained statistically steady. With the exception of Isle of Wight County, the SMH community has higher rates than Virginia (10.2%).

Survey participants rated Aging Services and Behavioral/Mental Health in the top five 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.

¹⁵ www.alz.org

Violent crime rates in the SMH community (214.1 per 100,000) decreased for the 2014-2016 reporting period from 2012-2014 reporting period of 241.0 per 100,000.¹⁶ Violent crime rates for Franklin (310.4 per 100,000) and Suffolk (276.5 per 100,000) are significantly higher than Virginia's rate of 207.0 per 100,000, while the rates for Southampton County (125.2 per 100,000) and Isle of Wight County (144.3 per 100,000) are lower. In addition, violent crime rates in Franklin and Southampton County have increased since the previous reporting period, while the rates for Suffolk decreased and Isle of Wight remained statistically steady.

Survey respondents include Violence in the Community in the top ten health concerns.

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
- Time Off from Work
- Transportation
- Health Insurance
- Understanding the Use of Services
- Childcare
- No/Limited Home Support Network

¹⁶ www.countyhealthrankings.com

Community Assets that Need Strengthening

There are many things that impact health outside of the direct provision of healthcare. Survey participants were asked to select the top five community assets they felt need to be strengthened in their community. The list of selected by Survey participants is below:

- Affordable Childcare
- Affordable Housing
- Employment Opportunity / Workforce Development
- Healthy Food Access
- Homelessness
- Neighborhood Safety
- Senior Services
- Social & Community Networks
- Social Services
- Transportation

Identifying Needs

This report has highlighted health issues and services that are being effectively addressed by the SMH 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 12 focus group meetings called Community Dialogues were held in the Hampton Roads region in which 300 individuals participated. The purpose of the meetings was to elicit feedback from community members about publicly 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.

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 the 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

SMH 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 health concerns and services that need strengthening identified, the hospital's strategic goals, services currently provided, and available hospital resources. After narrowing the 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, SMH will focus the CHNA Implementation Strategy on Heart Conditions and Chronic Disease in Aging Adults through clinical initiatives and partnering with medical providers and community groups to increase awareness.

Heart Conditions will be addressed through community education and clinical initiatives. Chronic Disease in the Aging Population will include clinical interventions and around diabetes and obesity/overweight community education.

Although SMH recognizes the importance of all the health concerns identified by community through the Survey and Community Dialogues, resources are limited within the organization to prioritize all the needs. There are other providers and organizations addressing these needs with specialized programs and services. SMH is prepared to collaborate/assist with these efforts beyond the current set of services we provide.

Progress on 2016 – 2019 CHNA Identified Priorities

The hospital merged with Bon Secours Mercy Health, Inc. as of January 1, 2020. Prior to the merger, Southampton Memorial Hospital was a for-profit hospital. As such, it was not required to complete a CHNA. In order to align all hospital year-ends within Bon Secours Mercy Health, Inc., this CHNA and its implementation strategy will be approved by the Board of Directors and in place by January 15, 2021.

Services & Resources Available to Meet Identified Needs

Although SMH recognizes the importance of all the needs identified by the community, 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.

SMH is prepared to collaborate/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:

Alcohol/Substance Abuse

- Bon Secours Maryview Medical Center
- Children's Hospital of the King's Daughters
- Veterans Administration Medical Center
- Virginia Department of Health
- Western Tidewater Free Clinic

Behavioral/Mental Health

- Bon Secours Maryview Medical Center
- Catholic Charities of Eastern Virginia
- Children's Hospital of the King's Daughters
- Response–Sexual Abuse Support Services
- Veterans Administration Medical Center
- Virginia Department of Health
- Western Tidewater Community Services Board

Diabetes/Overweigh/Obesity – Adult

- American Diabetes Association
- Children's Hospital of the King's Daughters
- Veterans Administration Medical Center

- Virginia Department of Health
- Western Tidewater Free Clinic

Heart Conditions

- Bon Secours Maryview Medical Center
- American Heart Association
- Veterans Administration Medical Center
- Virginia Department of Health
- Western Tidewater Free Clinic

- Bon Secours Maryview Medical Center
- Children's Hospital of the King's Daughters
- Veterans Administration Medical Center
- Virginia Department of Health
- Western Tidewater Free Clinic

Smoking/Tobacco Use

- American Cancer Society

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

The Bon Secours SMH Medical Center 2021 – 2022 Community Health Needs Assessment was approved by the Bon Secours Hampton Roads Board of Directors on September 22, 2020.

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 <http://bshr.com>

APPENDIX

APPENDIX I

Community Health Needs Assessment Survey – Key Stakeholders

The list on the following pages includes the organizations that were invited to complete the Bon Secours SMH Medical Center Community Health Needs Assessment Survey between October 23 and December 12, 2018. Representatives from some of these organizations also provided input during facilitated community discussions (Community Dialogues).

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Access Partnership		Survey invitation to identify top health concerns and services that need strengthening	
American Cancer Society	Chronic Illness Support	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
American Diabetes Association	Chronic Illness Support	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
American Heart Association	Chronic Illness Support	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
American Red Cross	Disaster Relief	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Beach Grove United Methodist Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Birdsong Peanuts	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Bon Secours Hampton Roads Board of Directors	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Buy Fresh Buy Local Hampton Roads	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Catholic Charities of Eastern Virginia	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Center for Child & Family Services	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Champions for Children (PCAHR)	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
Children's Hospital of The King's Daughters	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
City of Suffolk	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Compassionate Care Hospice	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Consortium for Infant and Child Health (CINCH)/EVMS	Information	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
Early Childhood Commission – Suffolk	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
Eastern Virginia Medical School	Medical/Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Family & Youth Foundations Counseling Services	Counseling	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Friends of Obici	Community	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Healthy People Healthy Suffolk	Community	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Hubbard Peanuts	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Isle of Wight Board of Supervisors	Government	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Isle of Wight Academy	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
Isle of Wight – Smithfield Chamber of Commerce	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Isle of Wight Citizens Association	Community	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Isle of Wight County Schools	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
JenCare Senior Medical Center	Seniors	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, seniors
Lancaster Farms	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Main Street United Methodist Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Mount Suffolk Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Nansemond River Baptist Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Obici Healthcare Foundation	Community Foundation	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Old Dominion University	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Olde Towne Medical & Dental Center	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Paul D. Camp Community College	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, adults, seniors
Peninsula Health District	Government/Health	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Perdue Foods	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Planters/Kraft Foods Co	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Riverside Health System	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Senior Services of Southeastern Virginia	Community	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, seniors
Sentara Healthcare	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Sentara Obici Hospital	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Smithfield Foods	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Southampton Department of Social Services	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Suffolk Christian Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Suffolk Department of Social Services	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Suffolk Iron Works Ince	Business	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Summit Wellness At The Mount	Mental Health	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Surry Area Free Clinic	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Surry County Office on Youth	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
The Barry Robinson Center	Mental Health	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children
Town of Smithfield	Government	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Town of Windsor	Government	Survey invitation to identify top health concerns and services that need strengthening	Community at large

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Urban League of Hampton Roads	Education, Health, Housing	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
VersAbility Resources	Non-Profit	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Virginia Career Works – Greater Peninsula	Education, Workforce Development	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults
Virginia Cooperative Extension	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Virginia League for Planned Parenthood	Family Planning	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults
Virginia Office of the Attorney General/Hampton roads Opioid Working Group	Substance Abuse Prevention	Survey invitation to identify top health concerns and services that need strengthening	Community at large
Virginia Oral Health Coalition	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Virginia Peninsula Foodbank	Community	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

Organization	Organization Focus	Nature and extent of input	Populations whose interest were represented
Western Tidewater Community Services Board	Mental Health	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Western Tidewater Free Clinic	Medical	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Western Tidewater Health District	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Wilroy Baptist Church	Faith-based organization	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Women, Infant and Children	Education	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults
YMCA of South Hampton Roads	Community	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors
Youth & Family Services, Suffolk Public Library	Government	Survey invitation to identify top health concerns and services that need strengthening	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors

APPENDIX II

Peninsula Community Health Collaboration CHNA Community Dialogues

Organization	Populations whose interest were represented	Date/Time	Attendance
Mary Immaculate Hospital SeniorHealth Newport News, VA	Seniors, low-income, racial minorities, ethnic minorities, people with disabilities	Tuesday January 8, 2019	87
DePaul Medical Center SeniorHealth Norfolk, VA	Seniors, low-income, racial minorities, ethnic minorities, people with disabilities	Friday January 18, 2019	34
SMH Medical Center SeniorHealth Portsmouth, VA	Seniors, low-income, racial minorities, ethnic minorities, people with disabilities	Tuesday January 22, 2019	64
Healthy Portsmouth (Key Stakeholders) Portsmouth, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Thursday February 21, 2019	8
Community Conversations – No Wrong Door Norfolk, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Monday February 25, 2019	24
Family Focus English as a Second Language Newport News, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Wednesday February 27, 2019	12
Sentara Princess Anne Patient/Family Advisory Group Virginia Beach, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Thursday February 28, 2019	20
Federation of Civic Leagues Norfolk, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Thursday March 14, 2019	11

Organization	Populations whose interest were represented	Date/Time	Attendance
Green Run Civic League Virginia Beach, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Saturday March 23, 2019	8
Virginia Resource Center Norfolk/Virginia Beach, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, adults, seniors	Wednesday March 27, 2019	11
Peninsula Department of Health (Key Stakeholders) Newport News, VA	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Monday April 1, 2019	4
Western Tidewater Diabetes Coalition	Low-income, racial minorities, ethnic minorities, people with disabilities, children, adults, seniors	Conducted by Sentara Obici Hospital – date unknown	Estimate 14 - 25

APPENDIX III

Bon Secours SMH Hospital CHNA Community Health Survey Verbatim Comments

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

- 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 Women's health and health care disparities not make this list
- I treat only children and do not live in any of the areas I serve and treat
- Oral Health
- Mental health is a growing populations. Yet there's limited organizations that can screen. Barriers such as appointments, transportations comes into play.
- Lack of access to primary, behavioral health and oral health care. Lack of choices for healthy eating and active living
- Lack of understanding of community resources that are already available to patients and are under utilized

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

- Lack of providers in Rural areas
- 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...
- Language barrier should be added

Community Health Services for Adults that Need to be Strengthened

- Transportation is a major issue for the aging population.
- Women's health
- Health promotion and prevention is inherent in all of the categories
- Transportation to physician offices

- 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
- Transportation is a critical barrier to health care for many of our patients.

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

- 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

- Violence prevention and gun safety education Palliative care services
- Cardiac care.
- 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.
- Transportation remains a barrier to health care for teens.
- Water Safety/Drowning Prevention. Tween/Teen Leadership Programs

At Risk/Vulnerable Populations who Need Services or Support

- 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 ineffectious 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.
- 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 PRESENTATION FOR BEATING THE HOLIDAY BLUES, GRIEVING, EDUCATING STAFFS (IN SCHOOLS), FAMILIES HOW TO IDENTIFY SUICIDE IDEATIONS. AGAIN A BARRIER TO GET IN THE SYSTEM.

- Wow. I could have chosen several others on this list (i.e., many more than 5)

Community Assets and Services that Need Strengthening

- 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

- There are a lot of people I see as a specialist who are just utterly lost in the healthcare maze, and who do not know what to do without being explicitly told,

o

multiple times, and who have no instinct or knowledge on how to advocate for themselves. I try to guide them as I can, but I wish everyone could just have a case manager to push them along. "Did you make an appointment with your PCP? Okay, make an appointment with your PCP. Did they not answer? Okay, call again."

- Thank you for asking. I'd love to help from a public health standpoint if needed.
- Need to identify a way to encourage or reward individuals to live a healthy lifestyle, eat nutritional foods, take responsibility for their health. We can continue to provide and strengthen services but unless an individual assumes some responsibility, it won't make a difference.
- More than 5 in each area really should have been marked....
- The community not only needs the mentioned resources, but needs to be empowered to access them. Often times people are turned off to assistance because someone was rude, or they were met with red tape. Self-advocacy is SO important, and unfortunately is not taught.
- Thank you for the survey and for your collaboration.
- All the social network is great, but if it's not being shared then we're back to where we were. We can't help our community if there's gap in our resources and social netting.
- There is little vocal effective advocacy for patients ages 19-64.
- Thank you for allowing me the opportunity to share my concerns

**Bon Secours SMH Medical Center
Surveys**

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.

Understanding Your Perspective - Your Community

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.)

- | | |
|--|---|
| <input type="checkbox"/> Accomack County | <input type="checkbox"/> Newport News (City of) |
| <input type="checkbox"/> Charles City County | <input type="checkbox"/> Norfolk (City of) |
| <input type="checkbox"/> Chesapeake (City of) | <input type="checkbox"/> Northampton County |
| <input type="checkbox"/> Essex County | <input type="checkbox"/> Northumberland County |
| <input type="checkbox"/> Franklin (City of) | <input type="checkbox"/> Poquoson (City of) |
| <input type="checkbox"/> Gloucester County | <input type="checkbox"/> Portsmouth (City of) |
| <input type="checkbox"/> Hampton (City of) | <input type="checkbox"/> Richmond County |
| <input type="checkbox"/> Isle of Wight County | <input type="checkbox"/> Southampton County |
| <input type="checkbox"/> James City County | <input type="checkbox"/> Suffolk (City of) |
| <input type="checkbox"/> King and Queen County | <input type="checkbox"/> Surry County |
| <input type="checkbox"/> King William County | <input type="checkbox"/> Sussex County |
| <input type="checkbox"/> Lancaster County | <input type="checkbox"/> Virginia Beach (City of) |
| <input type="checkbox"/> Mathews County | <input type="checkbox"/> Westmoreland County |
| <input type="checkbox"/> Middlesex County | <input type="checkbox"/> Williamsburg (City of) |
| <input type="checkbox"/> New Kent County | <input type="checkbox"/> York County |

Understanding 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)

- | | |
|---|--|
| <input type="checkbox"/> Business Representative | <input type="checkbox"/> Healthcare- Public Health / Health Department / Free Clinic |
| <input type="checkbox"/> Community Nonprofit Organization (Food Bank, United Way, etc.) | <input type="checkbox"/> Healthcare - Health Insurance |
| <input type="checkbox"/> Education (Pre K - High School, including School Administrators and School Nurses) | <input type="checkbox"/> Healthcare - Provider (Physician, Nurse or other Healthcare Professional) |
| <input type="checkbox"/> Education (After High School) | <input type="checkbox"/> Healthcare - Hospital Affiliation (Board Member, Auxiliary Volunteer, etc.) |
| <input type="checkbox"/> Faith-based Organization | <input type="checkbox"/> Law Enforcement / Fire Department / Emergency Medical Services (EMS) |
| <input type="checkbox"/> Financial Institution | <input type="checkbox"/> Local Government or Civic Organization |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Other (Please specify below) |
| <input type="checkbox"/> 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 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.

- | | |
|--|---|
| <input type="checkbox"/> Accidents / Injuries (Unintentional) | <input type="checkbox"/> Hunger |
| <input type="checkbox"/> Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids) | <input type="checkbox"/> Infectious Diseases (Hepatitis, TB, MRSA, etc.) |
| <input type="checkbox"/> Alzheimer's Disease / Dementia | <input type="checkbox"/> Intellectual / Developmental Disabilities / Autism |
| <input type="checkbox"/> Behavioral / Mental Health (Suicide, ADHD, Anxiety, Depression, etc.) | <input type="checkbox"/> Neurological Conditions (Stroke, Seizures, Multiple Sclerosis, Traumatic Brain Injury, etc.) |
| <input type="checkbox"/> Bullying (Cyber, Workplace, etc) | <input type="checkbox"/> Overweight / Obesity |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Chronic Pain | <input type="checkbox"/> Prenatal and Pregnancy Care |
| <input type="checkbox"/> Dental / Oral Care | <input type="checkbox"/> Respiratory Diseases (Asthma, COPD, Emphysema) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Sexually Transmitted Infections (HPV, HIV/AIDS, Chlamydia, Gonorrhea, Herpes, etc.) |
| <input type="checkbox"/> Drowning / Water Safety | <input type="checkbox"/> Smoking / Tobacco Use (Cigarettes, Chewing Tobacco, Vaping or E-Cigarettes) |
| <input type="checkbox"/> Environmental Health (Water Quality, Pollution, Mosquito Control, etc.) | <input type="checkbox"/> Violence – Sexual and / or Domestic |
| <input type="checkbox"/> Heart Conditions (Heart Disease, Congestive Heart Failure / CHF, Heart Attacks / AMI, High Blood Pressure / Hypertension) | <input type="checkbox"/> 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 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 ADULTS (ages 18+) in your community.

- | | |
|---|--|
| <input type="checkbox"/> Aging Services | <input type="checkbox"/> Health Promotion and Prevention Services |
| <input type="checkbox"/> Alcohol / Substance Abuse Services | <input type="checkbox"/> Home Health Services |
| <input type="checkbox"/> Behavioral / Mental Health Services | <input type="checkbox"/> Hospice and Palliative Care Services |
| <input type="checkbox"/> Bereavement Support Services | <input type="checkbox"/> Hospital Services (Inpatient, outpatient, emergency care) |
| <input type="checkbox"/> Cancer Services | <input type="checkbox"/> Long Term Services / Nursing Homes |
| <input type="checkbox"/> Care Coordination and Transitions of Care | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Chronic Disease Services (Diabetes, High Blood Pressure/ Hypertension) | <input type="checkbox"/> Physical Rehabilitation Services |
| <input type="checkbox"/> Chronic Pain Management Services | <input type="checkbox"/> Primary Care |
| <input type="checkbox"/> Dental / Oral Health Services | <input type="checkbox"/> Public Health Services |
| <input type="checkbox"/> Domestic Violence / Sexual Assault Services | <input type="checkbox"/> Self-Management Services (Nutrition, Exercise, etc.) |
| <input type="checkbox"/> Family Planning and Maternal Health Services | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Health Insurance Coverage | <input type="checkbox"/> Telehealth / Telemedicine |

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.

Community Health Concerns and Health Services Gaps

Children's and Teens' Health Concerns (ages 0-17)

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 CHILDREN AND TEENS in the community.

6. Below is an alphabetical list of community health issues that affect CHILDREN AND TEENS (ages 0 - 17). Based on your experience, please check the FIVE most important health concerns for CHILDREN AND TEENS in your community.

- | | |
|---|---|
| <input type="checkbox"/> Accidents / Injuries (Unintentional) | <input type="checkbox"/> Hunger |
| <input type="checkbox"/> Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids) | <input type="checkbox"/> Infectious Diseases (Hepatitis, TB, MRSA, etc.) |
| <input type="checkbox"/> Behavioral / Mental Health (Suicide, ADD, Anxiety, Depression) | <input type="checkbox"/> Intellectual / Developmental Disabilities / Autism |
| <input type="checkbox"/> Bullying (Cyber, Workplace, etc) | <input type="checkbox"/> Neurological Conditions (Epilepsy, Seizures, Tourette Syndrome-TICS, Sleep Disorders) |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Overweight / Obesity |
| <input type="checkbox"/> Chronic Pain | <input type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Dental / Oral Care | <input type="checkbox"/> Respiratory Diseases (Asthma and Cystic Fibrosis) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Sexually Transmitted Infections (HPV, HIV/AIDS, Chlamydia, Gonorrhea, Herpes, etc.) |
| <input type="checkbox"/> Drowning / Water Safety | <input type="checkbox"/> Smoking / Tobacco Use (Cigarettes, Chewing Tobacco, Vaping or E-Cigarettes) |
| <input type="checkbox"/> Eating Disorders | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Environmental Health (Water Quality, Pollution, Mosquito Control, etc.) | <input type="checkbox"/> Violence In the Home – Child Abuse (Sexual, Physical, Emotional or Neglect) or Exposure to Domestic Violence |
| <input type="checkbox"/> Heart Conditions (Congenital Heart Defects, Fainting and Rhythm Abnormalities) | <input type="checkbox"/> 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 Services and Gaps: Children 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.

- | | |
|--|---|
| <input type="checkbox"/> Alcohol / Substance Use Services | <input type="checkbox"/> Health Insurance Coverage |
| <input type="checkbox"/> Behavioral / Mental Health Services | <input type="checkbox"/> Home Health Services |
| <input type="checkbox"/> Bereavement Support Services | <input type="checkbox"/> Parent Education and Prevention Programming |
| <input type="checkbox"/> Cancer Services | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Care Coordination and Transitions of Care | <input type="checkbox"/> Physical Rehabilitation Services |
| <input type="checkbox"/> Child Abuse Prevention and Treatment Services | <input type="checkbox"/> Primary Care |
| <input type="checkbox"/> Chronic Disease Services (Diabetes, High Blood Pressure/ Hypertension) | <input type="checkbox"/> Public Health Services |
| <input type="checkbox"/> Chronic Pain Management Services | <input type="checkbox"/> Self-Management Services (Nutrition, Exercise, etc.) |
| <input type="checkbox"/> Dental / Oral Health Services | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Foster Care (Supporting children in the system and their host families) | <input type="checkbox"/> Telehealth / Telemedicine |

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.

Access to Healthcare

8. Below is an alphabetical list of issues that may affect the ability for individuals to access care. Based on your experience, please check the FIVE most important issues in accessing healthcare in your community.

- | | |
|--|---|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> No / Limited Home Support Network |
| <input type="checkbox"/> Costs | <input type="checkbox"/> No / Limited Phone Access |
| <input type="checkbox"/> Discrimination | <input type="checkbox"/> Time Off From Work |
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Lack of Medical Providers | <input type="checkbox"/> Understanding the Use of Health Services |
| <input type="checkbox"/> Location of Health Services | |

Please use this space to provide any additional information on why you selected these concerns.

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.

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

Community Assets to Strengthen

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.

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

Your Community Health Needs

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.

- | | | |
|---|--|--|
| <input type="radio"/> Accomack County | <input type="radio"/> King William County | <input type="radio"/> Portsmouth (City of) |
| <input type="radio"/> Charles City County | <input type="radio"/> Lancaster County | <input type="radio"/> Richmond County |
| <input type="radio"/> Chesapeake (City of) | <input type="radio"/> Mathews County | <input type="radio"/> Southampton County |
| <input type="radio"/> Essex County | <input type="radio"/> Middlesex County | <input type="radio"/> Suffolk (City of) |
| <input type="radio"/> Franklin (City of) | <input type="radio"/> New Kent County | <input type="radio"/> Surry County |
| <input type="radio"/> Gloucester County | <input type="radio"/> Newport News (City of) | <input type="radio"/> Sussex County |
| <input type="radio"/> Hampton (City of) | <input type="radio"/> Norfolk (City of) | <input type="radio"/> Virginia Beach (City of) |
| <input type="radio"/> Isle of Wight County | <input type="radio"/> Northampton County | <input type="radio"/> Westmoreland County |
| <input type="radio"/> James City County | <input type="radio"/> Northumberland County | <input type="radio"/> Williamsburg (City of) |
| <input type="radio"/> King and Queen County | <input type="radio"/> Poquoson (City of) | <input type="radio"/> York County |

* 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.

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

- | | |
|--|---|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> No / Limited Home Support Network |
| <input type="checkbox"/> Costs | <input type="checkbox"/> No / Limited Phone Access |
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Time Off From Work |
| <input type="checkbox"/> Lack of Medical Providers | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Location of Health Services | <input type="checkbox"/> 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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disabilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Religion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immigration Status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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.

- | | |
|--|--|
| <input type="checkbox"/> Access to Care (Availability, Language, Costs, Lack of Providers, etc.) | <input type="checkbox"/> Health Insurance Coverage |
| <input type="checkbox"/> Aging Services | <input type="checkbox"/> Health Promotion and Prevention Services |
| <input type="checkbox"/> Alcohol / Substance Use Disorders | <input type="checkbox"/> Home Health Services |
| <input type="checkbox"/> Behavioral / Mental Health Services | <input type="checkbox"/> Hospice and Palliative Care Services |
| <input type="checkbox"/> Bereavement Support Services | <input type="checkbox"/> Hospital Services (Inpatient, Outpatient, Emergency Care) |
| <input type="checkbox"/> Cancer Services | <input type="checkbox"/> Long Term Services / Nursing Homes |
| <input type="checkbox"/> Care Coordination and Transitions of Care | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Chronic Disease Services (Diabetes, High Blood Pressure) | <input type="checkbox"/> Physical Rehabilitation Services |
| <input type="checkbox"/> Chronic Pain Management Services | <input type="checkbox"/> Primary Care |
| <input type="checkbox"/> Dental / Oral Health Services | <input type="checkbox"/> Public Health Services |
| <input type="checkbox"/> Domestic Violence / Sexual Assault Services | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Family Planning and Maternal Health Services | <input type="checkbox"/> 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.

- | | |
|--|---|
| <input type="checkbox"/> Accidents / Injuries (Unintentional) | <input type="checkbox"/> Hunger |
| <input type="checkbox"/> Alcohol/ Substance Use (Prescription or Illegal Drugs including Opioids) | <input type="checkbox"/> Infectious Diseases (Hepatitis, TB, MRSA, etc.) |
| <input type="checkbox"/> Behavioral / Mental Health (Including Suicide, ADD, Anxiety, Depression, etc.) | <input type="checkbox"/> Intellectual or Developmental Disabilities / Autism |
| <input type="checkbox"/> Bullying (Cyber, School, etc.) | <input type="checkbox"/> Neurological Conditions (Epilepsy, Tourette Syndrome, Sleep Disorders, Seizures etc.) |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Overweight/Obesity |
| <input type="checkbox"/> Chronic Pain | <input type="checkbox"/> Physical Disabilities |
| <input type="checkbox"/> Dental / Oral Care | <input type="checkbox"/> Respiratory Diseases (Asthma, Emphysema, Cystic Fibrosis) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Sexually Transmitted Infections (HPV, Herpes, HIV/AIDS, Chlamydia, Gonorrhea, etc.) |
| <input type="checkbox"/> Drowning / Water Safety | <input type="checkbox"/> Smoking / Tobacco Use (Cigarettes, Chewing Tobacco, Vaping or E-Cigarettes) |
| <input type="checkbox"/> Eating Disorders | <input type="checkbox"/> Teen Pregnancy |
| <input type="checkbox"/> Environmental Health (Water Quality, Pollution, Mosquito Control, etc.) | <input type="checkbox"/> Violence In the Home – Child Abuse (Sexual, Physical, Emotional or Neglect) or Exposure to Domestic Violence |
| <input type="checkbox"/> Heart Conditions (Congenital Heart Disease, Fainting, and Rhythm Abnormalities) | <input type="checkbox"/> 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 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 check the FIVE (5) MOST IMPORTANT ISSUES IN ACCESSING HEALTHCARE FOR CHILDREN AND TEENS in your community.

- | | |
|---|---|
| <input type="checkbox"/> Childcare | <input type="checkbox"/> No / Limited Home Support Network |
| <input type="checkbox"/> Costs | <input type="checkbox"/> No / Limited Phone Access |
| <input type="checkbox"/> Health Insurance | <input type="checkbox"/> Time Off From Work |
| <input type="checkbox"/> Lack of Medical Providers | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Location of Health Services | <input type="checkbox"/> Understanding the Use of Health Services |
| <input type="checkbox"/> Comments: Please use this space to provide any additional information on why you selected these concerns or share any concerns not listed. | |

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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Gender	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sexual Orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Disabilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Religion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immigration Status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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. Based 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 community.

- | | |
|--|---|
| <input type="checkbox"/> Alcohol / Substance Use Disorders | <input type="checkbox"/> Health Insurance Coverage |
| <input type="checkbox"/> Behavioral / Mental Health Services | <input type="checkbox"/> Home Health Services |
| <input type="checkbox"/> Bereavement Support Services | <input type="checkbox"/> Parent Education and Prevention Programming (Child Development, Positive Discipline, Newborn Care, Parent/Child Relationships, etc.) |
| <input type="checkbox"/> Cancer Services | <input type="checkbox"/> Pharmacy Services |
| <input type="checkbox"/> Care Coordination and Transitions of Care | <input type="checkbox"/> Physical Rehabilitation Services |
| <input type="checkbox"/> Child Abuse Treatment Services | <input type="checkbox"/> Primary Care |
| <input type="checkbox"/> Chronic Disease Services (Diabetes, High Blood Pressure) | <input type="checkbox"/> Public Health Services |
| <input type="checkbox"/> Chronic Pain Management Services | <input type="checkbox"/> Social Services |
| <input type="checkbox"/> Dental / Oral Health Services | <input type="checkbox"/> Telehealth / Telemedicine |
| <input type="checkbox"/> Foster Care (Supporting Children in the System and Their Host Families) | |

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.

- | | |
|--|---|
| <input type="checkbox"/> Caregivers (Examples: caring for a spouse with dementia or a child with autism) | <input type="checkbox"/> Individuals Transitioning out of Incarceration |
| <input type="checkbox"/> Children and Teens (age 0-17 years) | <input type="checkbox"/> Individuals Needing Hospice / End of Life Support |
| <input type="checkbox"/> Immigrants or Community Members who are not Fluent in English | <input type="checkbox"/> Low Income Individuals |
| <input type="checkbox"/> Individuals / Families / Children Experiencing Homelessness | <input type="checkbox"/> Migrant Workers |
| <input type="checkbox"/> Individuals in the LGBTQ+ Community | <input type="checkbox"/> Seniors / Elderly |
| <input type="checkbox"/> Individuals Struggling with Literacy | <input type="checkbox"/> Unemployed Individuals |
| <input type="checkbox"/> Individuals with Intellectual or Developmental Disabilities | <input type="checkbox"/> Uninsured / Underinsured Individuals |
| <input type="checkbox"/> Individuals with Physical Disabilities | <input type="checkbox"/> Veterans |
| <input type="checkbox"/> Individuals Struggling with Substance Abuse | <input type="checkbox"/> Victims of Human Trafficking, Sexual Violence or Domestic Violence |

Comments: Please use this space to provide any additional information on why you selected these concerns or share any concerns 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.

- | | |
|--|---|
| <input type="checkbox"/> Affordable Child Care | <input type="checkbox"/> Public Spaces with Increased Accessibility for Those with Disabilities |
| <input type="checkbox"/> Education – Early Childhood (Pre-K) | <input type="checkbox"/> Safe, Affordable Housing |
| <input type="checkbox"/> Education – Kindergarten through High School | <input type="checkbox"/> Safe Play and Recreation Spaces (Playgrounds, Parks, Sports Fields) |
| <input type="checkbox"/> Education – Post High School | <input type="checkbox"/> Safe Sidewalks, Trails and Bike Access |
| <input type="checkbox"/> Education – Special Education Services | <input type="checkbox"/> Safety Net Food System (Food Bank, WIC, SNAP, Meals on Wheels, etc.) |
| <input type="checkbox"/> Employment Opportunity / Workforce Development | <input type="checkbox"/> Senior Services (Centers, Socialization, Education, etc.) |
| <input type="checkbox"/> Environment – Air & Water Quality | <input type="checkbox"/> Social and Community Networks |
| <input type="checkbox"/> Healthy Food Access (Fresh Fruits & Vegetables, Community Gardens, Farmers Markets, etc.) | <input type="checkbox"/> Social Services (Assistance with Medicaid, Medication, Home Safety, Other Resources, etc.) |
| <input type="checkbox"/> Public Safety Services (Police, Fire, EMT) | <input type="checkbox"/> Transportation |

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

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

Please tell us a little about yourself (OPTIONAL)

17. Please select the option that best describes your own personal health.

Very Poor	Poor	Neutral	Good	Very Good
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Please select the option that best describes the health of your community.

Very Poor	Poor	Neutral	Good	Very Good
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Gender

- ☐ Male
- ☐ Female
- ☐ Transgender
- ☐ Prefer Not to Answer

20. Race

- ☐ White
- ☐ Black
- ☐ American Indian / Alaska Native
- ☐ Asian / Native Hawaiian / Other Pacific Islander
- ☐ Some Other Race
- ☐ Two or More Races

21. Ethnicity

- ☐ Hispanic
- ☐ 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:

26. Are you currently serving on active duty or as a Reservist in the U.S. Armed Forces?

☐ Yes

☐ No

27. Are you a veteran of the U.S. Armed Forces?

☐ Yes

☐ No

28. Are you a dependent of someone who serves in the U.S. Armed Forces?

☐ Yes

☐ No

29. Housing

☐ Own

☐ Rent

☐ Homeless

☐ Other

30. Live With:

Number of Adults in Home

Number of Children

31. Live With: Age Range of Children

☐ 0-2

☐ 3-5

☐ 6-11

☐ 12-14

☐ 15-18

☐ 19-21

☐ 22-25

☐ There are no children within these age ranges living in my home.

32. Primary Language(s) Spoken in Your Home?

