



Community Health Needs Assessment

Bon Secours Richmond South:
Southside Medical Center
Southern Virginia Medical Center
2020



Good Help to Those In Need®

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Executive Summary

The true health of a community is defined by living conditions, opportunities and social cohesions. Place matters.

This Community Health Needs Assessment (CHNA) examines qualitative input provided by community members coupled with quantitative data on health conditions in the area. Together the information forms a snapshot of important areas of health concern.

This document is a supplemental document to the Richmond Market CHNA, and compiles data from best practice documents prepared by the Cameron Foundation, United Way, and the Crater Health District. Quantitative data presented in this report was gathered from publically available sources through the Virginia Department of Health and BeHealthyRVA.

For more information, access to these full reports can be found below:

<https://camfound.org/wp-content/uploads/2019/01/CHNA-Final.pdf>

<https://www.vdh.virginia.gov/crater/>

<http://www.behealthyrva.org/>

As this report was prepared during the COVID-19 pandemic, a grassroots approach was taken in order to obtain input from the community. We did so by engaging the community in an online survey, virtual community conversations, and conducting 1:1 key informant interviews.

Community Engagement Summary

Online Community Engagement Survey

A survey to assess community health needs was conducted as part of the CHNA process during a six-week period between July and August 2020. A total of 324 individual responses were collected. Individuals were asked to “Please choose the TOP 5 health issues you think should be addressed in your community” from a list of 13 health issues. Individuals were then asked to “Please choose the TOP 5 causes of poor health in your community” from a list of 14 health causes. The top 10 survey responses from each question are listed below:

Survey Responses - Top 10 Health Issues			
Rank	Category	Number of Respodents	Percentage
1	Chronic Diseases (i.e. Obesity, Diabetes, Heart Disease, Stroke, Cancer, COPD)	290	89.8%
2	Mental health & suicide	240	74.3%
3	Alcohol/Drug Use	216	66.9%
4	Substance abuse	210	65.0%
5	Child Abuse/Neglect	132	40.9%
6	Alzheimer’s/Dementia	121	37.5%
7	Domestic abuse	100	31.0%
8	Teen pregnancy	77	23.8%
9	Dental health	66	20.4%
10	Sexually transmitted infections including HIV/AIDS	57	17.6%
Total respondents: 323			
Survey Responses - Top 10 Health Causes			
Rank	Category	Number of Respodents	Percentage
1	Insufficient access to healthy & affordable food	172	54.1%
2	Insufficient access to healthcare services	170	53.5%
3	Insufficient availability of jobs with fair wages	168	52.8%
4	Insufficient health education	154	48.4%
5	Insufficient education/school system	142	44.7%
6	Insufficient transportation options	113	35.5%
7	Insufficient health services for senior citizens	110	34.6%
8	Insufficient resources for homeless individuals	104	32.7%
9	Insufficient housing opportunities	93	29.2%
10	Insufficient physical activity opportunities	82	25.8%
Total respondents: 318			

A copy of the full survey is available in Appendix A. The survey results are presented in Appendix B.

1:1 Interviews

Interviews were conducted with local content experts to gain insight on top community health needs and the root causes of these health needs. Interviews took place with local law enforcement, local health care nurses, non-profit community partners, and local spiritual leaders. These conversations eluded to what was later confirmed in the online community engagement survey and community conversations.

Virtual Community Conversations

As this report was conducted during the COVID-19 pandemic, two virtual community conversations were held via Zoom in October 2020. A group of 75 key informants, consisting of local community leaders and members were invited to join and the meeting information was widely distributed to the public. A total of 62 participants attended the meetings. The purpose of the community conversations was to dig deeper into the results of the CHNA community engagement survey, specifically surrounding the identified top health issues and causes along with how the COVID-19 pandemic and social justice issues have impacted the health of these communities. Lastly, the purpose of this meeting was to elicit feedback from community members about publicly available health data describing health conditions in the service areas.

The top 10 health issues as identified from the survey results were presented to the attendees and they were asked to 1) identify 3 health issues that could be addressed in the next two years, 2) identify root causes that contribute to these health issues (i.e. social determinants, racism, inequities, etc.), and 3) what is currently being done to help address these health issues? Where are there gaps?

Residents in the Richmond South Core Service Area identified the top three priorities that needed to be addressed as:

- 1) Mental Health & Suicide
- 2) Chronic Disease
- 3) Substance Abuse

A detailed list of organizations that participated is presented in Appendix C.
A detailed report from the community conversations is presented in Appendix D.

Prioritization of Community Needs

Conversations with community leaders and community members, as well as findings from the online engagement survey, helped to identify top health issues and associated causes across the region. Additionally, these discussions helped to identify significant linkages between each identified health need. The themes of Equity, Poverty, and Race were discussed as underlying concerns related to all of the health issues and causes identified. Leaders within the Community Health Division in conjunction with each hospital's Administrative Teams prioritized the following areas of focus:



Facility Description and Values

This CHNA was prepared for two Bon Secours Richmond Health System hospitals, Southside Medical Center and Southern Virginia Medical Center, acquired in 2020. These two hospitals primarily serve the residents of Southern Virginia.

OUR MISSION

Our mission 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.

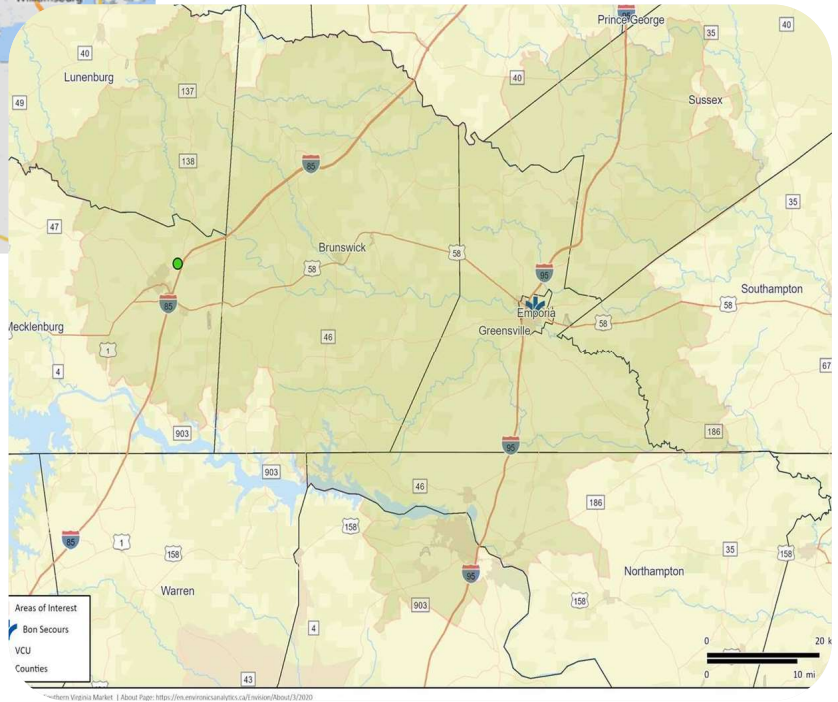
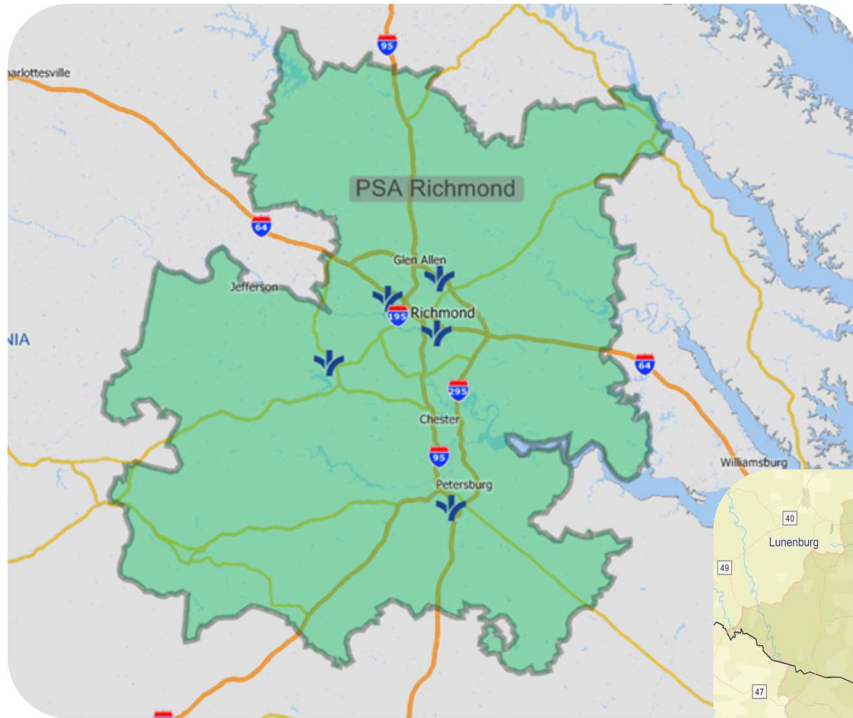
OUR VISION

Inspired by God's hope for the world, we will be a ministry where associates want to work, clinicians want to practice, people seek wellness and communities thrive.

OUR VALUES

Human dignity | Integrity | Compassion | Stewardship | Service

Bon Secours Richmond South Service Area & Population Density Map



Counties/Cities Served	Health District Represented
Dinwiddie, Emporia, Greenville, Hopewell, Petersburg, Prince George, Surry, Sussex	Crater Health District
Lunenburg, Nottoway	Piedmont Health District
Southampton County	Western Tidewater Health District
Brunswick, Mecklenburg	Southside Health District
Halifax, NC	Halifax County Health Department

Bon Secours Richmond South Facilities Description

Bon Secours Richmond South serves the southern tip of Richmond's metropolitan area as well as the vastly rural localities in southern Virginia. Bon Secours Richmond South includes two hospital facilities whose service areas significantly overlap. While the hospitals serve patients from many cities and counties, the majority of patients fall within Crater Health District, which includes the cities of Petersburg, Hopewell, and Emporia and the counties of Prince George, Dinwiddie, Surry, Sussex, and Greenville. For the purpose of this CHNA, we refer to these as the **"Richmond South Core Service Area."** Prior to the acquisition, Southside Medical Center and Southern Virginia Medical Center were for-profit hospitals. As such, the hospitals were not required to complete a CHNA.

The Bon Secours Richmond South facilities are described below:

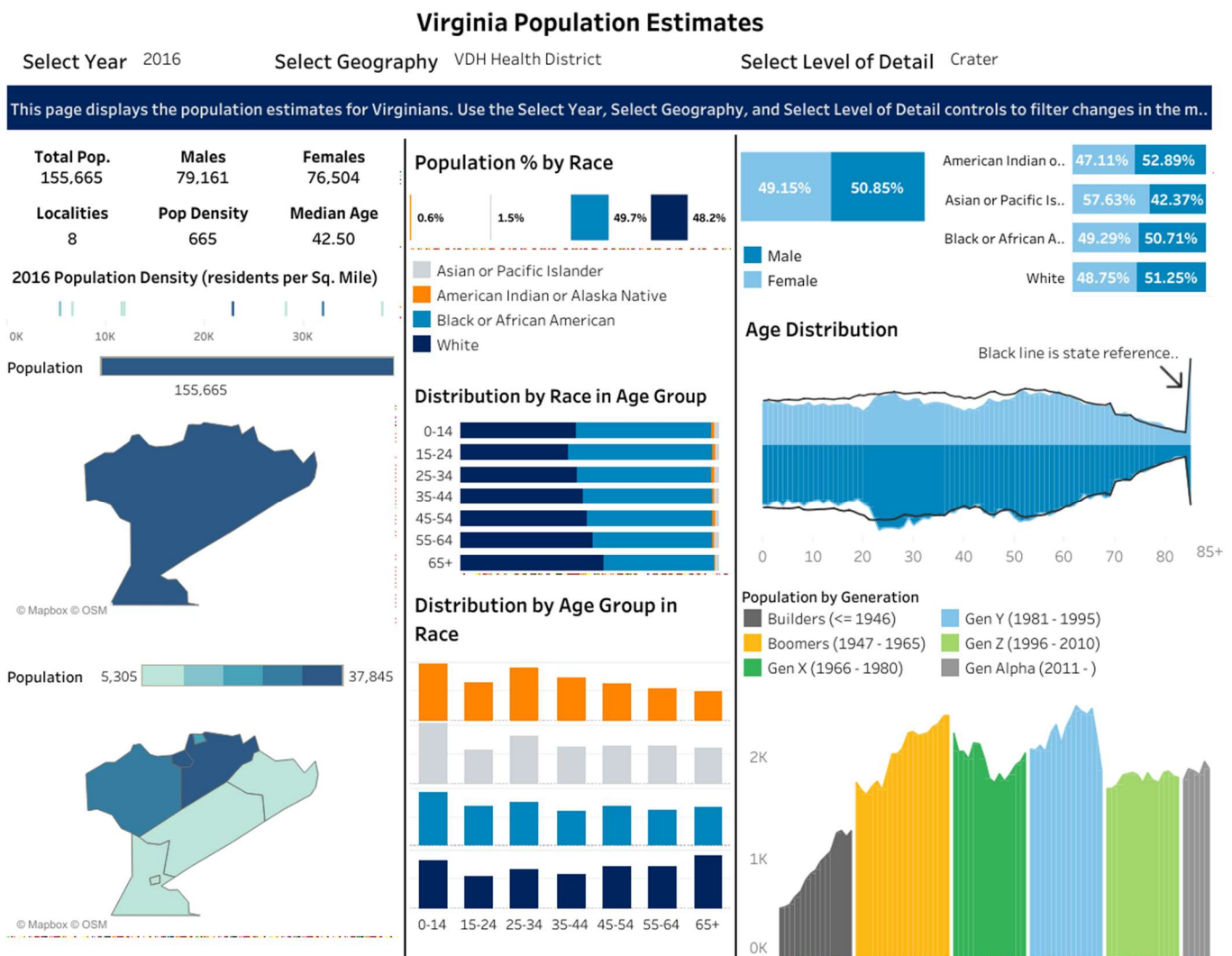
- 1) **Southside Medical Center**- Southside Medical Center is a 300-bed facility located on a 50-acre campus with nearly 400 physicians representing more than 40 specialties. Southside Medical Center primarily serves the communities of Petersburg, Hopewell, Colonial Heights, Fort Lee and Chester and the counties of Prince George, Dinwiddie, Sussex, Surry and Southern Chesterfield. Southside Medical Center was acquired by Bon Secours Mercy Health on January 1, 2020.

- 2) **Southern Virginia Medical Center** –Southern Virginia Medical Center is an 80-bed acute care hospital, primarily serving more than 50,000 residents of Emporia and Greenville, and the surrounding counties of Brunswick, Southampton, and Sussex. Southern Virginia Medical Center was acquired by Bon Secours Mercy Health on January 1, 2020.

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'.

The following graphics show demographic data and health snapshot data for the Richmond South Core Service Area.



Data Source: PostCensus population estimates from NVSS (National Vital Statistics System) https://www.cdc.gov/nchs/nvss/bridged_race.htm

Virginia Department of Health (<http://www.vdh.virginia.gov/>)

Dinwiddie County

Health Snapshot 2019



Overview



Health Factors

Access to exercise opportunities



Uninsured



Poor mental health days

Average number of mentally unhealthy days reported in past 30 days (age-adjusted)



Premature Death



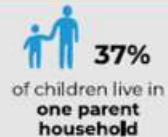
Social and Economic



Violent crime
has increased per 100,000 population



Youth



data from countyhealthneeds.org

Emporia

Health Snapshot 2019



Overview



Health Factors

Access to exercise opportunities



Uninsured



Poor mental health days

Average number of mentally unhealthy days reported in past 30 days (age-adjusted)



Premature Death



Social and Economic



Violent crime
has decreased per 100,000 population



Youth



data from countyhealthneeds.org

Greenville County

Health Snapshot 2019



Overview



Health Factors



Social and Economic



Youth



data from countyhealthrankings.org

Hopewell

Health Snapshot 2019



Overview



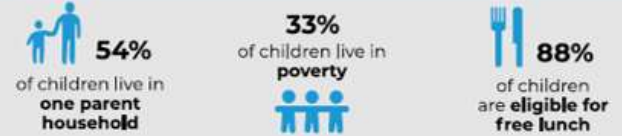
Health Factors



Social and Economic



Youth



data from countyhealthrankings.org

Petersburg

Health Snapshot 2019



Overview



Health Factors



Social and Economic



Youth



data from countyhealthrankings.org

Prince George County

Health Snapshot 2019



Overview



Health Factors



Social and Economic



Youth



data from countyhealthrankings.org

Surry County

Health Snapshot 2019



Overview



Health Factors



Social and Economic



Youth



data from countyhealthrankings.org

Sussex County

Health Snapshot 2019



Overview



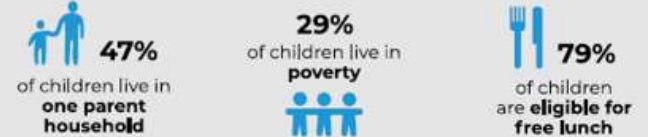
Health Factors



Social and Economic



Youth



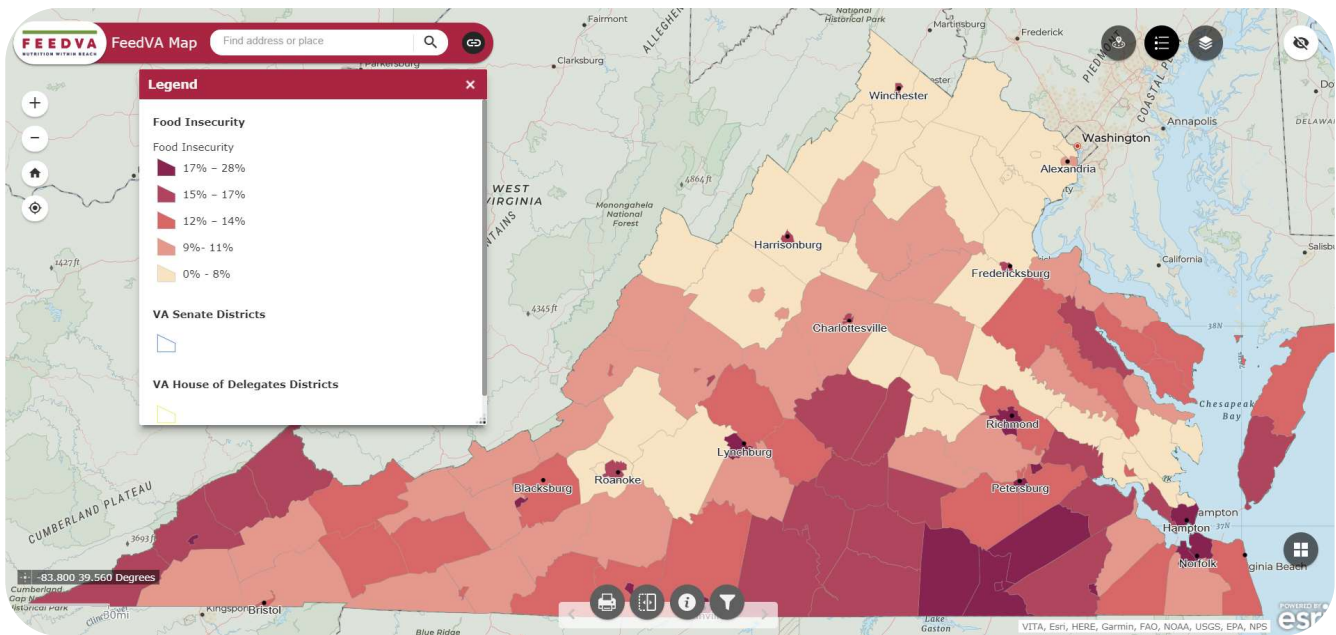
data from countyhealthrankings.org

CHNA Key Findings

The following prioritization of health issues and root causes was the culmination of a year long CHNA engagement. Chronic Disease, Behavioral Health, Social Determinants of Health and Stress/Trauma are the four focus areas for the 2021-2023 CHNA Implementation Plan. While there are current service providers addressing each of these four focus areas, many service providers are at capacity. These needs were prioritized in an effort to more adequately meet the needs of the community.



Findings from the online survey and community conversations identified access to healthy and affordable foods as the top root cause of poor health in the Richmond South Core Service area. The below map confirms the significant disparity in food access in the region.



<https://www.arcgis.com/apps/webappviewer/index.html?id=8aefe4aac0fb42f68e8efa368d3eac35>

Market Comparison Data

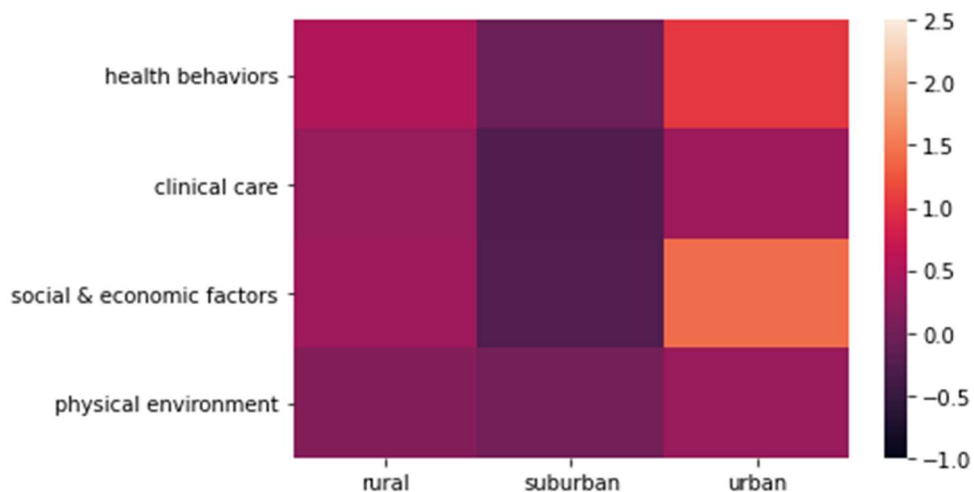
Bon Secours Richmond Health System's expansion into Southern Virginia adds a significant number of rural localities to the service area of the Richmond market. As such, a market analysis was performed to compare the severity of health needs among urban, suburban and rural localities. A lighter shade depicts poorer health conditions and higher areas of need, while a darker shade depicts better health conditions and lower areas of need.

Richmond South Core Service Area:

Rural: Brunswick, Dinwiddie, Greensville, Halifax, Lunenburg, Mecklenburg, Nottoway, Southampton, Surry, Sussex

Suburban: Chesterfield, Colonial Heights, Prince George

Urban: Emporia City, Hopewell City, Petersburg

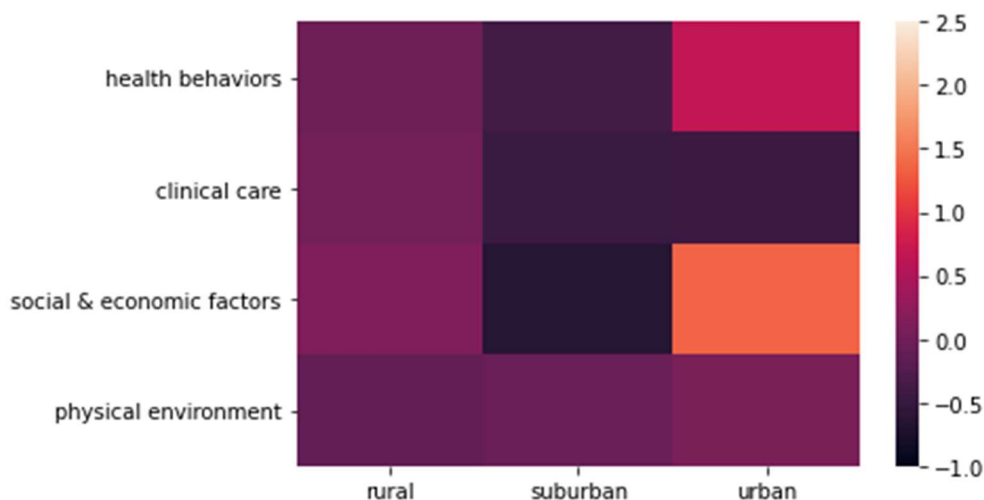


Richmond Core Service Area:

Rural: Amelia, Charles City, Lancaster, Middlesex, Northumberland

Suburban: Chesterfield, Goochland, Hanover, Henrico, New Kent, Powhatan

Urban: Richmond City



Prioritization Methodology and Results

Conversations with community leaders and community members, as well as findings from the online engagement survey, helped to identify top health issues and associated root causes of health issues. Additionally, these discussions helped to identify significant linkages between each identified health need.

Furthermore, the themes of Equity, Poverty, and Race were discussed as underlying concerns related to all of the health issues and causes identified. Leaders within the Community Health Division at Bon Secours Richmond Health System grouped the identified needs into the following categories based on the feedback provided by the community:

- 1) Chronic Disease
- 2) Behavioral Health
- 3) Social Determinants of Health
- 4) Stress/Trauma

Community health leaders then presented the four categories to the administrative teams of Southside Medical Center and Southern Virginia Medical Center and asked the following questions: 1) Where does our existing work as a health system align with these themes identified in the new CHNA structure? 2) Where are there gaps where we need to enhance our work? 3) What areas should we as a community prioritize in the next 2 years?

Collectively, Bon Secours prioritized the following areas within each overarching theme:



Further prioritization of health needs within each category will be outlined through a multi-sector implementation plan.

Resources Available to Meet Identified Needs

Bon Secours is committed to advancing this work and making an impact on community health. True impact comes when strategic partnerships are formed, and collaborations are built that can achieve greater results collectively. Bon Secours is committed to forming relationships to build a healthier community and building capacity in other nonprofits through sponsorship and volunteerism. The list below provides names and descriptions of many existing resources available within Bon Secours and within the community to meet identified needs. While each focus area below is currently being addressed to some capacity, there remains an inadequacy of services to meet the needs of the community.

Chronic Disease

- i. Access Now - *Volunteer Specialty network for free clinic patients.*
- ii. Bon Secours Care-A-Van - *Improves access to health care services for the uninsured through mobile health clinics that provide free, primary, urgent, and preventative health care. Nutrition and chronic disease management consultation are also provided. Serves uninsured and vulnerable populations in a 60-mile radius of City of Richmond.*
- iii. Bon Secours Community Nutrition Services - *Improves community health, particularly in vulnerable communities, through nutrition counseling, healthy eating classes, and advocacy for food access. Serves communities within a 60-mile radius of the City of Richmond.*
- iv. Bon Secours Diabetes Treatment Center - *Enables persons with diabetes to achieve long-term control of their blood sugar and reduce the possibility of developing diabetic complications. Serves adults and children with diabetes, gestational diabetes, and their families.*
- v. Chesterfield County Health Department, Crater Health District, Piedmont Health District, Petersburg Health Department, Western Tidewater Health District, Southside Health District, Halifax County Health Department- *Support of programs addressing the needs of vulnerable populations – includes prevention and access.*
- vi. Crater Community Hospice, Inc. – *Provides quality and support care and education on serious illness and end of life concerns*
- vii. Feed More, Inc. - *Comprehensive programs that distribute nutritious meals and wholesome food directly to our neighbors who need it most.*
- viii. Free Clinics and FQHCs – Pathways, CrossOver Health Ministry, Central Virginia Health Services - *Provide primary care services to the uninsured.*
- ix. Greater Richmond Fit4Kids - *Non-profit organization dedicated to improving children's health and reducing the prevalence of childhood obesity in the Richmond region. Greater Richmond Fit4Kids offers innovative programs that promote physical activity and healthy eating in schools, community organizations, and beyond.*
- x. Hopewell Food Pantry – *Emergency food assistance to individuals and families who are in crisis*
- xi. Honoring Choices - *A collaborative of the Richmond Academy of Medicine, Bon Secours Richmond Health System, HCA Virginia and VCU Health launched by the Academy in early 2015. Honoring Choices is actively engaging the Greater*

- Richmond, Virginia community in changing the culture about future medical decision-making.*
- xii. Lucy Corr – Not-for-profit continuing care facility
 - xiii. Medical Society of Virginia - Physician led organization providing medication assistance programs for uninsured patients.
 - xiv. Metropolitan Richmond Sports Backers: Seek to inspire people from all corners of the Greater Richmond community to live actively.
 - xv. Petersburg Healthy Options Partnerships (PHOPs) – Improve food system, improve and connect walkable routes, support improvements to food guidelines
 - xvi. Shalom Farms - Grow healthy produce distributed to underserved communities. Provide learning opportunities for children and adults, on growing food, overcoming barriers to cooking and eating nutritionally.
 - xvii. SOAR365 (formerly Greater Richmond ARC): In partnership with families, SOAR365 creates life-fulfilling opportunities for individuals with disabilities.
 - xviii. Virginia Asthma Coalition - Organizations and individuals devoted to reducing the morbidity and mortality associated with asthma; Partnership has an emphasis on Richmond's East End.
 - xix. Virginia Healthcare Foundation - Promotes and funds local public-private partnerships that increase access to primary health care services for medically underserved and uninsured Virginians.

Behavioral Health

- i. Alamo Addition Recovery Center – Support individuals seeking sobriety and addiction recovery.
- ii. Bon Secours Richmond Cullather Brain Tumor Quality of Life Center - Provides supports and education to patients with brain tumors and their families. Serves the community at large.
- iii. District 19 Community Services Board – Behavioral health services for adults, adolescents, children, and infants experiencing mental illness, intellectual/developmental disabilities and/or substance use disorders.
- iv. Family Lifeline - A home visiting program seeking to enhance family functioning through intensive case management with Community Health Nurse, Outreach Worker, and Mental Health Clinicians providing support, access to healthcare and medical services, as well as mental health assessment.
- v. Healing Place - Provides substance abuse rehab for homeless men.
- vi. NAMI Central VA – Provides family support, advocacy, education, housing, and research around mental illness.
- vii. Rx Partnership – Medication access for vulnerable Virginians through health safety net.
- viii. Safe Harbor - Offers comprehensive services and support for those who are experiencing or have experienced domestic violence, sexual violence, or human trafficking. Working from a trauma-informed and empowerment-focused lens, Safe Harbor seeks to help clients understand and address the impact of trauma and build resilience.
- ix. United Methodist Family Services (UMFS) - Offers a network of flexible community-based services. Mentoring, community respite, visitation, community-based clinical

support and parent coaching are just a few of the formal and informal offerings to support at-risk families

- x. Virginia Supportive Housing - *Provides permanent housing to the homeless.*
- xi. Voices for Children - *Statewide, privately funded, non-partisan policy research and practices that improve the lives of children.*

Social Determinants of Health

- i. Area Congregations Together in Service (ACTS) - *ACTS provide funds, support and other resources to those living in the Greater Richmond area who are at risk of losing their housing, utilities or transportation. Those served by ACTS do not qualify through government prevention assistance due to eligibility requirements and often fall through the cracks.*
- ii. Better Housing Coalition - *The Better Housing Coalition works to ensure that every citizen in the Richmond region, regardless of their economic status, has good choices in where they live, and opportunities to reach their fullest potential.*
- iii. Capital Region Collaboration - *A collaborative effort between government, business, and the community to identify and implement regional priorities that will enhance the quality of life in the Richmond Region.*
- iv. Chesterfield CASA - *Court Appointed Special Advocates speaking up for abused, neglected, and abandoned children.*
- v. Children's Home Society of Virginia - *Children's Home Society of Virginia is a full-service, private, nonprofit 501(c)(3), non-sectarian licensed child-placing agency, and one of Virginia's oldest adoption agencies.*
- vi. Commonwealth Catholic Charities - *Provides quality compassionate human services to all people, especially the most vulnerable, regardless of faith.*
- vii. Commonwealth Parenting - *Resource for parenting education.*
- viii. Communities in Schools of Petersburg - *Helping students achieve in school, graduate and go on to bright futures.*
- ix. Faison School for Autism - *School addressing the unique learning needs of children diagnosed with autism.*
- x. GRASP - *Our goal is to ensure that every student has an equal opportunity for continuing education after high school, regardless of financial or social circumstances.*
- xi. Greater Richmond Transit Authority - *Serves the City of Richmond and Henrico County. They have 186 buses and 40 routes.*
- xii. GRTC CARE - *Provides curb-to-curb public transportation to disabled individuals who may not be reasonably able to use the GRTC fixed route bus.*
- xiii. Homeward - *Planning and coordinating organization for homeless services in the greater Richmond region. Homeward's mission is to prevent, reduce, and end homelessness by facilitating creative solutions through the collaboration, coordination, and cooperation of regional resources and services.*
- xiv. Housing Families First - *Provides families experiencing homelessness with the tools to achieve housing stability. The goal is not only to assist families in finding permanent housing, but also to ensure that each family has access to the supportive services necessary to sustain housing in the long run.*

- xv. Maggie Walker Community Land Trust - *The Maggie Walker CLT seeks to develop and maintain permanently affordable homeownership opportunities for low and moderate income households.*
- xvi. Partnership for Non-Profit Excellence - *Develops the capacity of nonprofits through education, information sharing and civic engagement.*
- xvii. Partnership for Smarter Growth - *An organization focused on educating and engaging the communities in the Richmond region to work together to improve our quality of life by guiding where and how we grow, including transportation services.*
- xviii. project:HOMES - *Improving the safety, accessibility & energy efficiency of existing houses and build high quality affordable housing throughout Central Virginia.*
- xix. Shepherd's Center of Chesterfield - *An interfaith ministry of senior volunteering to improve the lives of other seniors, including medical transportation services.*
- xx. Smart Beginnings Southeast - *Brings communities together for the best possible outcomes for young children by helping prepare them for entrance into kindergarten.*
- xxi. Reach Out and Read - *Preparing America's youngest children to succeed in school by partnering with doctors to prescribe books and encourage families to reach together.*
- xxii. RideFinders - *RideFinders offers real-time ridematching with interested commuters in your area that share similar work locations and hours.*
- xxiii. Sacred Heart Center - *Sacred Heart Center offers many programs to the Latino community including English as a Second Language, GED Prep in Spanish, Plaza Comunitaria - Spanish Literacy, Citizenship, Pasitos Exitosos: First Steps to Success – a bilingual school-readiness program, College & Career Bound, Cielito Lindo summer camp, Latino Leadership Institute and more.*
- xxiv. Salvation Army Boys and Girls Club - *The Club emphasizes life-skills training and serves more than 500 members with a daily participation of 150; Partnership has an emphasis on Richmond's East End.*
- xxv. Science Museum of Virginia - *Promotes Science, Technology, Engineering, Math and Healthcare (STEMH) career interests within the region.*
- xxvi. Virginia Community Development Corporation (VCDC) - *VCDC serves as a leader in the development of innovative affordable housing and revitalization of Virginia's communities by acting as a catalyst for creative and profitable private sector investments and by empowering non-profit and other providers throughout the Commonwealth.*
- xxvii. Virginia Home for Boys and Girls - *Virginia Home for Boys and Girls (VHBG) is a nonprofit organization that has been serving children in crisis since 1846. VHBG works to help children across Virginia with emotional and behavioral health concerns by facilitating the healing process using a relationship-based, cognitive behavioral approach.*
- xxviii. Virginia LISC - *Virginia LISC works with community organizations to revitalize under-served Richmond-area neighborhoods, leading to physical improvements, safer streets, increased property values and highly engaged residents. Virginia LISC support community development organizations with grants, loans and expertise to help them construct businesses, community centers and affordable homes in low and moderate income neighborhoods.*

- xxix. Virginia Literacy Foundation - Provides funding and technical support to private, volunteer literacy organizations throughout Virginia via challenge grants, training and direct consultation.
- xxx. Virginia State University - One of Virginia's two land-grant institutions and historically black university with current student population around 4,000.
- xxxi. Virginia Supportive Housing (VSH) - VSH seeks to end homelessness by providing permanent housing and supportive services. Founded in 1988, VSH was the first non-profit organization in Virginia to develop and provide permanent supportive housing for homeless single adults.
- xxxii. United Way of Greater Richmond & Petersburg - Through coalition building, regional leadership, program investments, and fundraising, United Way mobilizes the caring power of our community to advance the common good. We focus on the building blocks of a good life, including education.
- xxxiii. YMCA of Petersburg - Youth development and physical activity programing.

Stress and Trauma

- i. Bon Secours Forensic Nursing - Comprehensive services for victims of violence and abuse
- ii. Bon Secours Richmond Cullather Brain Tumor Quality of Life Center - Provides supports and education to patients with brain tumors and their families. Serves the community at large.
- iii. Family Lifeline - A home visiting program seeking to enhance family functioning through intensive case management with Community Health Nurse, Outreach Worker, and Mental Health Clinicians providing support, access to healthcare and medical services, as well as mental health assessment.
- iv. FVSAU Child Advocacy Center - Coordinated and collaborative multidisciplinary approach to minimizing trauma and improve outcomes for child victims of physical abuse, sexual abuse, and neglect.
- v. Greater Richmond SCAN - SCAN works to prevent and treat child abuse and neglect throughout the Greater Richmond area by protecting children, promoting positive parenting, strengthening families and creating a community that values and cares for its children.
- vi. Safe Harbor - Offers comprehensive services and support for those who are experiencing or have experienced domestic violence, sexual violence, or human trafficking. Working from a trauma-informed and empowerment-focused lens, Safe Harbor seeks to help clients understand and address the impact of trauma and build resilience.
- vii. United Methodist Family Services (UMFS) - Offers a network of flexible community-based services. Mentoring, community respite, visitation, community-based clinical support and parent coaching are just a few of the formal and informal offerings to support at-risk families.
- viii. Voices for Children - Statewide, privately funded, non-partisan policy research and practices that improve the lives of children.

Needs Not Addressed

The following needs are important to the community but were not directly prioritized in this CHNA due to limited resources and/or existing partners working to address these needs:

- 1) **Dental Health:** CrossOver Healthcare Ministry's dental program provides preventative cleaning, patient education, and screenings. Additionally, they provide fillings, extractions, and dentures all at low or no cost to uninsured patients throughout the region. Central Virginia Health Services is a Federally Qualified Health Centers that provides comprehensive dental care to uninsured patients on a sliding fee scale. Virginia Commonwealth University also has a dental care program for low-income uninsured and underinsured individuals.
- 2) **Sexually transmitted infections (STIs) including HIV/AIDS:** Local and state health departments provide STI/HIV prevention programs, Pre-Exposure Prophylaxis for HIV (PrEP) and ongoing case management services. In addition to the health departments, Virginia Commonwealth University, Pathways, Central Virginia Health Services and the Daily Planet all provide STI and/or HIV/AIDS resource and services throughout the region.
- 3) **Alzheimer's/Dementia:** There are a number of resources available through assisted living facilities across the region. Additionally, the Rick Sharp Alzheimer's Foundation and the Greater Richmond Chapter of the Alzheimer's Association are two organizations working to educate individuals and families as well as connect them to resources in the community. The Memory Center is adjacent to Bon Secours St. Francis Medical Center and provides comprehensive care to those living with Alzheimer's and dementia.

Appendix A: CHNA Community Engagement Survey

BON SECOURS MERCY HEALTH

Living Conditions:

1) Please choose the TOP 5 health issues you think should be addressed in your community:

- ☐ Alcohol abuse
- ☐ Alzheimer's/Dementia
- ☐ Asthma
- ☐ Chronic Diseases (i.e. Obesity, Diabetes, Heart Disease, Stroke, Cancer, COPD)
- ☐ Child Abuse/Neglect
- ☐ Dental health
- ☐ Domestic abuse
- ☐ Infant & Maternal Mortality
- ☐ Mental health & suicide
- ☐ Substance/drug abuse
- ☐ Sexually transmitted infections including HIV/AIDS
- ☐ Teen pregnancy
- ☐ Unintentional injuries

2) In your opinion, have any of these selected health issues become more apparent due to the COVID-19 pandemic?

BON SECOURS MERCY HEALTH

3) Please choose the TOP 5 causes of poor health in your community:

- ☐ Insufficient access to healthcare services
- ☐ Insufficient access to healthy & affordable food
- ☐ Insufficient access to Social Services
- ☐ Insufficient availability of jobs with fair wages
- ☐ Insufficient education/school system
- ☐ Insufficient health education
- ☐ Insufficient health services for persons with disabilities
- ☐ Insufficient health services for senior citizens
- ☐ Insufficient housing opportunities
- ☐ Insufficient natural environment (i.e. air and water quality)
- ☐ Insufficient outdoor spaces (i.e. parks)
- ☐ Insufficient physical activity opportunities
- ☐ Insufficient resources for homeless individuals
- ☐ Insufficient transportation options
- ☐ Other health issues/causes not listed above:

4) On a scale of 1 - 6 (1 having little impact, and 6 having significant impact), how do each of the underlying causes below impact the health needs of the community?

☐ Community violence & crime (i.e. assault, gun violence, rape, drugs, prostitution, theft)

1	2	3	4	5	6
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☐ Language barriers = inequitable access to healthcare services

1	2	3	4	5	6
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☐ LGBTQ+ equality

1	2	3	4	5	6
---	---	---	---	---	---

☐ Racism

1	2	3	4	5	6
---	---	---	---	---	---

☐ Stress/trauma

1	2	3	4	5	6
---	---	---	---	---	---

BON SECOURS MERCY HEALTH**Health Care:**

5) Within the past year, where did you go most often for health care?

- ☐ Hospital/Emergency Room
- ☐ Private Doctor's Office
- ☐ Free Clinic
- ☐ Urgent Care Center (i.e. Patient First)
- ☐ Local Health Department
- ☐ Telehealth or Virtual Health
- ☐ I did not receive health care services in the past 12 months.
- ☐ Other (please specify):

6) What is the **PRIMARY** source of your health care coverage? Is it ...

- ☐ A plan purchased through an employer or union (includes plans purchased through another person's employer)
- ☐ A plan that you or another family member buys on your own
- ☐ Medicare
- ☐ Medicaid or other state program
- ☐ TRICARE (formerly CHAMPUS), VA, or Military
- ☐ Alaska Native, Indian Health Service, Tribal Health Services
- ☐ Some other source
- ☐ None (no coverage)
- ☐ Don't know/Not sure

Demographics:

7) Please provide your zip code:

8) What county/city do you currently reside in?

BON SECOURS MERCY HEALTH

9) Please choose what best describes you:

- ☐ Male
- ☐ Female
- ☐ Transgender Female /Trans woman
- ☐ Transgender Male/ Trans man
- ☐ Gender Variant/Non-Conforming
- ☐ Prefer to self-describe: (open text field)
- ☐ Prefer not to answer

10) Please choose your age group:

- ☐ 18-24 years old
- ☐ 25-34 years old
- ☐ 35-44 years old
- ☐ 45-54 years old
- ☐ 55-64 years old
- ☐ 65- 74 years old
- ☐ 75 years or older

11) Please choose the ethnicity below that best represents you:

- ☐ Hispanic/Latino
- ☐ Not Hispanic/Latino
- ☐ Prefer not to answer

12) Please choose the race below that best represents you: (select as many as apply)

- ☐ Asian
- ☐ American Indian/Alaska Native
- ☐ Black/African American
- ☐ Pacific Islander
- ☐ White/Caucasian
- ☐ Other (please specify): _____
- ☐ Prefer not to answer

BON SECOURS MERCY HEALTH

13) What is your highest level of education completed?

- ☐ Less than High School diploma
- ☐ High School diploma or GED
- ☐ Some college
- ☐ Associates degree, Technical degree, or Trade school
- ☐ Bachelor's Degree
- ☐ Graduate Degree or Higher

14) What is your average household income?

- ☐ \$0 - \$24,999
- ☐ \$25,000 - \$49,999
- ☐ \$50,000 - \$74,999
- ☐ \$75,000 - \$99,999
- ☐ \$100,000 and higher
- ☐ Prefer not to answer

Following this survey, we will be holding a virtual focus group to discuss results and dig deeper into identified community needs. If you are willing to participate, please complete the following:

Name:

Phone:

Email:

Appendix B: CHNA Survey Results

Survey Responses - Top 10 Health Issues			
Rank	Category	Number of Respondents	Percentage
1	Chronic Diseases (i.e. Obesity, Diabetes, Heart Disease, Stroke, Cancer, COPD)	290	89.8%
2	Mental health & suicide	240	74.3%
3	Alcohol/Drug Use	216	66.9%
4	Substance abuse	210	65.0%
5	Child Abuse/Neglect	132	40.9%
6	Alzheimer's/Dementia	121	37.5%
7	Domestic abuse	100	31.0%
8	Teen pregnancy	77	23.8%
9	Dental health	66	20.4%
10	Sexually transmitted infections including HIV/AIDS	57	17.6%
Total respondents: 323			
Survey Responses - Top 10 Health Causes			
Rank	Category	Number of Respondents	Percentage
1	Insufficient access to healthy & affordable food	172	54.1%
2	Insufficient access to healthcare services	170	53.5%
3	Insufficient availability of jobs with fair wages	168	52.8%
4	Insufficient health education	154	48.4%
5	Insufficient education/school system	142	44.7%
6	Insufficient transportation options	113	35.5%
7	Insufficient health services for senior citizens	110	34.6%
8	Insufficient resources for homeless individuals	104	32.7%
9	Insufficient housing opportunities	93	29.2%
10	Insufficient physical activity opportunities	82	25.8%
Total respondents: 318			

Appendix C: Key CHNA Partner Organizations

Organization Providing Input	Nature and Extent of Input	Medically under-served, low-income or minority populations represented by organization
Alamo Addition Recovery Center	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Appomattox Regional Library	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Area Congregations Together in Service (ACTS)	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Bon Secours Southern VA Medical Center Employees	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Bon Secours Southside Medical Center Employees	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Cameron Foundation	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Central Virginia Health Services	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Children's Home Society of VA	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Commonwealth Catholic Charities	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Crater Community Hospice, Inc.	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Crater Health District	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Crater Region Hospice	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
District 19 Community Services Board	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations

Emporia Child Abuse and Domestic Violence Support Services	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Family Lifeline	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Feed More, Inc	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
FVSAU Child Advocacy Center	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Halifax County Health Department	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Hopewell Food Pantry	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Lucy Corr Continuing Care	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
NAMI Central VA	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Pathways VA	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Petersburg Community Health Action Team	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Petersburg HOPs (Healthy Options Partnerships)	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Petersburg Sheriff's Department	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Piedmont Health District	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Southside Health District	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations

St. Joseph's Villa Homeless Support	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
United Methodist Family Services (UMFS)	Key Informant; CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Western Tidewater Health District	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations
Your United Way	CHNA Community Engagement Survey and Community Conversation participation	Community/all populations

Appendix D: Community Conversations Summary Report

In October 2020, the Bon Secours Community Health Team held two virtual community conversations via Zoom in order to invite conversation with the community on the region's needs. A group of 75 key informants, consisting of local community leaders and members were invited to join and the meeting information was widely distributed to the public. A total of 62 participants attended the meetings. The demographics of participants represented the demographics of the community. The purpose of the community conversations was to dig deeper into the results of the CHNA community engagement survey, specifically surrounding the identified top health issues and causes along with how the COVID-19 pandemic and social justice issues have impacted the health of these communities. Lastly, the purpose of this meeting was to elicit feedback from community members about publicly available health data describing health conditions in the service areas.

The top 10 health issues as identified from the survey results were presented to the attendees and they were asked to 1) identify 3 health issues that could be addressed in the next two years, 2) identify root causes that contribute to these health issues (i.e. social determinants, racism, inequities, etc.), and 3) what is currently being done to help address these health issues? Where are there gaps?

Residents in the Richmond South Core Service Area identified the top three priorities that needed to be addressed as:

- 1) Mental Health & Suicide
- 2) Chronic Disease
- 3) Substance Abuse

The following are some highlights from the qualitative data provided by meeting attendees:

Mental Health & Suicide: Root Causes

- Not having the mental health conversation during early childhood
- Lack of normalization, stigma
- Lack of access to professionals
- Lack of trust
- Lack of resources
- Resources that are there are not being utilized
- There is a huge stigma within the community around mental health issues
- Breakdown of families and communities has increased mental health pressures and challenges. Children are being raised by grandparents; are living in unstable and challenging circumstances.
- Telehealth is very challenging – most residents still have dial up internet, no smart phones, land lines

Mental Health & Suicide: What is being done? Where are gaps?

- Crater Health District: offers a variety of programs and efforts around mental health
- Petersburg Wellness Consortium: ACES/Trauma Informed Care

- Cameron Foundation
- Local Petersburg YMCA (there is also one near hospital in Emporia), offered in collaboration with others an “Erasing the Stigma” session or presentation to community members.
- Poplar Springs Hospital
- Health First Aid Training by coalitions
- Mental Health Zoom Conference have been offered
- Nami Central Virginia (Alliance on Mental Illness – this chapter covers both Richmond and Petersburg)
- Free health clinics that had been started in Petersburg area, that not only offer physical health support, but also mental health support for students
- Behavioral health clinic being offered at a local high school

Chronic Disease: Root Causes

- Environment (city dump, lack of mobility, trauma, food)
- Lack of education
- Fresh food is not accessible (Family Dollar is the only choice for some)
- Poverty
- Resources are on the edges of town (not City central)
- Connection to obesity
- Lack of financial means to receive care
- High tobacco use in community
- High drug use
- Neglected health problems due to drug use
- Homelessness
- Lack of access to technology
- Dial up internet

Chronic Disease: What is being done? Where are gaps?

- PHOPS (Farmers Market, Classes)
- Collaboration on educating the mainstream on issues
- FQHC and Free clinic
- High school pilot
- Getting non-profit hospital back into the community
- Expanding free clinics
- Pathways

Substance Abuse: Root Causes

- Lack of engagement of community/lack of approach
- Poverty
- Food challenges/food deserts
- Lack of transportation
- Tied to mental health issues
- Lack of trust
- High volume of drug use in area

- Multi-layers of trauma
- Black population – deep pockets of poverty
- Trust Issues
- Tele-health is very challenging

Substance Abuse: What is being done? Where are gaps?

- Church intervention; network of faith leaders
- Pathways: warm handoffs, mental health clinic, youth programs, financial literacy programs
- Family Lifeline
- Concerned Citizens of Hopewell
- Food Pantries
- Sussex Community Coalition
- Access to Technology