

A photograph of a woman with long dark hair, wearing a light-colored cardigan over a plaid shirt, holding a young child. The child is laughing and wearing a light-colored cardigan over a plaid shirt. They are outdoors in a grassy field, with a bright sunset or sunrise in the background, creating a warm, golden glow. A large blue graphic element is on the left side of the image.

**2019 COMMUNITY  
HEALTH NEEDS  
ASSESSMENT**

# Healthier Tomorrows

 **ValleyHealth**  
Winchester Medical Center

# TABLE OF CONTENTS

---

**EXECUTIVE SUMMARY**

Introduction..... 3  
 Methodology Summary..... 5  
 Definition of the Community..... 6  
 Significant Community Health Needs..... 7

**CHNA DATA AND ANALYSIS**

**METHODOLOGY**

Data Sources and Analytic Methods..... 15  
 Collaborating Organizations..... 15  
 Prioritization Process and Criteria..... 17  
 Information Gaps..... 17

**DEFINITION OF COMMUNITY ASSESSED..... 18**

**SECONDARY DATA ASSESSMENT**

Demographics..... 21  
 Economic Indicators..... 34  
 Local Health Status Indicators..... 49  
 Ambulatory Care Sensitive Conditions..... 78  
 Community Need Index™ and Food Deserts..... 84  
 Overview of the Health and Social Service Landscape..... 90  
 Other Facilities and Resources..... 93  
 Other Recent Community Health Needs Assessments..... 115

**PRIMARY DATA ASSESSMENT**

Community Survey Findings..... 123  
 Summary of Interview Findings..... 141  
 Individuals Providing Community Input..... 145

**APPENDIX A: COMMUNITY SURVEY AND INTERVIEWS... 157**

**APPENDIX B: ACTIONS TAKEN SINCE 2016 CHNA..... 163**

**SOURCES..... 168**

# EXECUTIVE SUMMARY

---

## Introduction

This community health needs assessment (CHNA) was conducted by Winchester Medical Center (WMC or the hospital) to identify community health needs and to inform the subsequent development of an Implementation Strategy to address those needs. The hospital's assessment of community health needs also responds to regulatory requirements.

Winchester Medical Center, is a 495-bed regional referral hospital that serves 13 counties in Virginia and West Virginia, and the City of Winchester in Virginia. The Magnet designated hospital provides an unusual breadth of services including the region's only Level II Trauma Center, an accredited Chest Pain Center-Primary PCI, an Advanced Primary Stroke Center, a Level 4 Epilepsy Center, and a Level III Neonatal Intensive Care Unit (NICU). Additional information regarding the hospital and its services is available at:

<http://www.valleyhealthlink.com/WMC>.

The hospital is an operating unit of Valley Health System, which includes five other hospitals (Hampshire Memorial Hospital, Page Memorial Hospital, Shenandoah Memorial Hospital, War Memorial Hospital and Warren Memorial Hospital) and operates a range of other healthcare facilities and services in Virginia, West Virginia and Maryland.





Federal regulations require that tax-exempt hospital facilities conduct a CHNA every three years and develop an implementation strategy that addresses priority community health needs. Tax-exempt hospitals also are required to report information about community benefits they provide on IRS Form 990, Schedule H.

As specified in the instructions to IRS Form 990, Schedule H, community benefits are programs or activities that provide treatment and/or promote health and healing as a response to identified community needs.

Community benefit activities and programs seek to achieve several objectives, including:

- improving access to health services,
- enhancing public health,
- advancing increased general knowledge, and
- relief of a government burden to improve health.<sup>1</sup>

To be reported, community need for the activity or program must be established. Needs can be established by conducting a community health needs assessment.

CHNAs seek to identify priority health status and access issues for particular geographic areas and populations by focusing on the following questions:

- **Who** in the community is most vulnerable in terms of health status or access to care?
- **What** are the unique health status and/or access needs for these populations?
- **Where** do these people live in the community?
- **Why** are these problems present?

The question of *how* the hospital can best address significant needs is subject of a separate Implementation Strategy.

## Community Health Needs Assessment Adoption

This community health needs assessment was adopted by the Valley Health Board of Trustees on December 10, 2019.

---

<sup>1</sup> Instructions for IRS form 990 Schedule H, 2018.

## Methodology Summary

An already active Community Advisory Committee, augmented with additional invited community members, was used to help guide the hospital's Community Health Needs Assessment (CHNA) process. This committee included individuals who had previously served on various Valley Health Boards of Trustees, the Health Director from the Lord Fairfax Health District which serves Clarke, Frederick, Page, Shenandoah, and Warren counties and the City of Winchester. Community members included representatives from Winchester Medical Center and across Valley Health.

Community health needs were identified by collecting and analyzing data and information from multiple sources. Statistics for numerous health status, health care access, and related indicators were analyzed, including comparisons to benchmarks where possible. The principal findings of recent health assessments conducted by other organizations were reviewed as well.

Input from 56 groups/individuals was received through key informant interviews. These informants represented the broad interests of the community and included individuals with special knowledge of, or expertise, in public health.

A community health survey was administered between January 2, 2019 and March 31, 2019. The survey was translated into Spanish. A total of 2,429 completed surveys from across the region were received. Among those, 108 surveys were received from the Hispanic community.

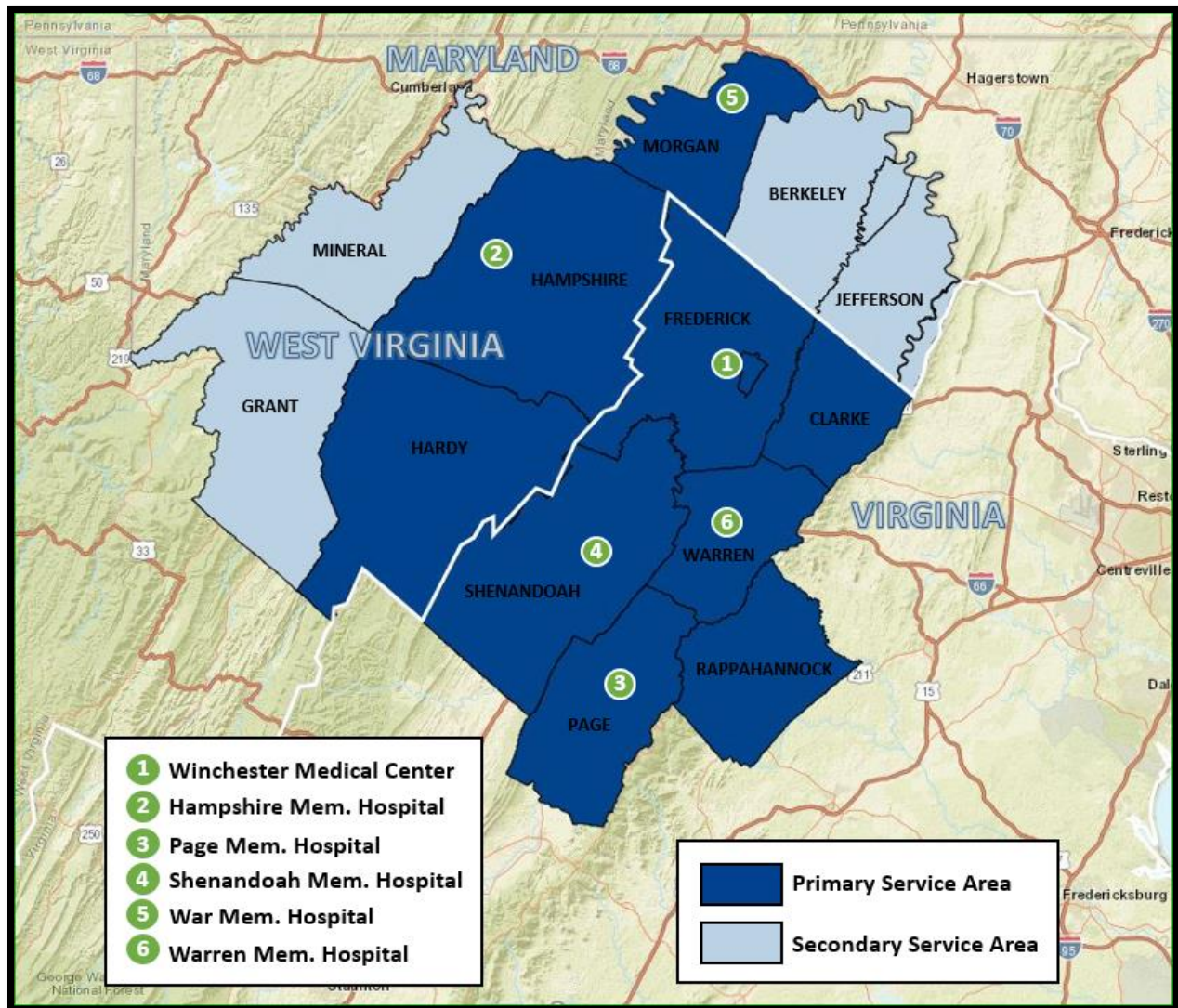
Valley Health applied a ranking methodology to prioritize the community health needs identified, incorporating both quantitative and qualitative data throughout. Scores for the severity and scope of identified health needs were assigned and calculated using weighted averages taking into account multiple data sources. Major themes discussed in the community response sessions were compared to the scored health issues to aid in identifying the prioritized list of health needs.

Community health needs were determined to be "significant" if they were identified as problematic in at least three of the four following data sources: (1) the most recently available secondary data regarding the community's health, (2) recent assessment develop by other organizations, (3) community input provided by the key informants who participated in the interview process, or (4) the community health survey.

No information gaps have affected the hospital's ability to reach reasonable conclusions regarding priority community health needs.

WMC collaborated with the other Valley Health hospitals for this assessment: Hampshire Memorial Hospital, Page Memorial Hospital, Shenandoah Memorial Hospital, War Memorial Hospital, and Warren Memorial Hospital.

## Definition of the Community Served by Hospital



Source: ESRI 2019, Created by Planning and Business Development

### Winchester Medical Center Community by the Numbers

- WMC's community serves 13 counties in Virginia and West Virginia and the City of Winchester in Virginia
- Total population in 2018: 521,401
- Projected population change between 2018 and 2023: 6.7%
  - Population declines expected in two counties, Mineral, WV and Page, VA)
- 94.7% of 2018 discharges originated from the community
  - 28.7% from Frederick County
- Demographics:
  - 17.8% of the population are 65+
  - 6.7% Hispanic or Latino populations
- Pockets of poverty and specific community health problems found to be present

## Significant Community Health Needs

The CHNA identified and prioritized community health needs using the data sources, analytic methods, and prioritization process and criteria described in the Methodology section. These needs are listed below in priority order and described on the following pages, with examples of the data supporting the determination of each health need as a priority. Further detail regarding supporting data, including sources, can be found in the CHNA Data and Analysis section of this report.

### Prioritized Health Needs

1. Behavioral and Health Status Factors
2. Access to Primary, Preventive and Specialty Care
3. Social & Economic Factors
4. Mental Health and Substance Abuse
5. Health Outcomes
6. Maternal and Child Health

To provide insight into trends, a comparison to findings from WMC's August 2016 CHNA is included below the description and key findings of each priority need.

## **Prioritized Health Need #1: Behavioral and Health Status Factors**

### Physical Activity, Obesity, and Other Chronic Diseases

A lack of physical activity and poor nutrition are contributing factors to being overweight. Obesity can also lead to a wide range of health problems and chronic diseases among all age groups. This includes high cholesterol, hypertension, diabetes, heart disease, stroke, and some cancers. Nationally, the increase in both the prevalence of being overweight and obesity and associated chronic diseases is well-documented, and has negative consequences for individuals and society. Low-income and poverty often contribute to poor nutrition and to hunger.

#### **Key Findings**

- Commenting on the contributing factors to poor health status, interview participants mentioned nutrition and diet, low physical activity and exercise, and food insecurity. Many commented on the lack of affordable, healthy food choices in some parts of the community. Obesity among children and youth within the community was reported to be a concern.
- During the 2018-2019 school year, 55.8 percent of students in Page County and 46.1 percent of students in Warren County received free or reduced price lunches, indicating risk of poor nutrition and hunger (**Exhibit 20**).
- Berkeley, Hampshire, and Page counties showed a higher rate of limited access to exercise opportunities than the other ten counties that represent the WMC's community as reported by *2019 County Health Rankings* (**Exhibit 23B**).
- WMC's community contains 26 census tracts identified as food deserts. These are located in Shenandoah and Warren counties, and the City of Winchester in Virginia, and Berkeley, Hampshire, Hardy, Jefferson, Mineral, and Morgan counties in West Virginia. There are two census tracts designated as food deserts within the City of Winchester, VA (**Exhibit 38**).
- Food deserts – low-income areas more than one mile from a supermarket or large grocery store in urban areas and more than 10 miles from a supermarket or large grocery store in rural areas – exist in six of the nine counties plus Winchester city in WMC's primary service area. In the secondary service area, food deserts exist in two of four counties.
- Ninety-eight schools in the WMC community, located in every county except Clarke, had 40 percent or more of their students eligible for free and reduced-price lunches, indicating risks of poor nutrition and hunger.
- Physical inactivity was prominent in Jefferson County with reported rates higher than the state averages (**Exhibit 23B**).

**Comparison to August 2016 CHNA:** Physical activity, nutrition, and obesity-related chronic diseases were one of the top health priority areas identified in WMC's August 2016 CHNA. Participants in key informant interviews in 2016 reported obesity prevalence bad as or worse than two to three years ago.



## **Prioritized Health Need #2:**

### **Access to Primary, Preventive and Specialty Care**

#### Primary, Specialty and Dental Care

Access to primary and preventive health care services through a doctor's office, clinic or other appropriate provider is an important element of a community's health care system, and is vital to the health of the community's residents. The ability to access care is influenced by many factors, including insurance coverage and the ability to afford services, the availability and location of health care providers, an understanding of where to find services when needed, and reliable personal or public transportation.

#### **Key Findings**

- While there have been some growth in providers, the Winchester community is experiencing lower ratio rates when it comes to the number of primary care physicians per 100,000 populations, the number of available dentists, and an increased need for additional mental health providers. The Winchester community is below the Virginia ratio in several counties for these types of providers, according to the *County Health Rankings* report. In West Virginia, ratio rates for mental health providers are lower in all areas except Berkeley County. Six of WMC's 13 service area counties are Medically Underserved Areas, two are Health Professional Shortage Areas for primary care, and Winchester City has Medically Underserved Populations (**Exhibit 24C**).
- Four of six Virginia counties and two of seven West Virginia counties in the service area ranked in the bottom half of all counties in their respective states on "access to care" in the *County Health Rankings*.
- Six of the nine counties in WMC's primary service area – plus Winchester City – have higher percentages of uninsured residents than their respective states, according to the U.S. Census. Seven counties overall have higher percentages of uninsured residents than their respective states. Nine of the 13 counties have higher percentages of uninsured residents than the U.S.
- Concerns about access to care were the most frequently mentioned factor contributing to poor health in key informant interviews.
- Lack of accessible or reliable transportation to health care appointments and a lack of providers who accept new Medicaid and even Medicare patients were the most frequently mentioned specific access to care issues in interviews, especially for low-income individuals and senior citizens.
- Thirty-two percent of survey respondents reported not being able to get needed basic primary care due to lack of insurance and 14.4 percent reported that they could not afford the medical care.

**Comparison to August 2016 CHNA:** Access to affordable health care was one of the priority issues identified in WMC's August 2016 CHNA, for reasons including: a lack of providers relative to the population; affordability and the uninsured; and the challenges of unemployment and low income.

## **Prioritized Health Need #3: Social & Economic Factors**

### **Poverty, Housing & Homelessness, Low Income Families**

Income levels, employment and economic self-sufficiency correlate with the prevalence of a range of health problems and factors contributing to poor health. People with lower income or who are unemployed/underemployed are less likely to have health insurance or the ability to afford out of pocket health care expenses. Lower income is associated with increased difficulties securing reliable transportation, which impacts access to medical care, and the ability to purchase an adequate quantity of healthy food on a regular basis. For these and other reasons, the assessment identified financial hardship and basic needs insecurity as a priority health need in the community.

#### **Key Findings**

- The highest portion of households with income under \$25,000 in 2017 were located in Hampshire, Hardy, and Mineral Counties of West Virginia.
- Within the WMC community, unemployment rates have decreased in every county except Rappahannock for 2017.
- Participants in interviews believe that low income housing, and poverty were the top issues contributing to poor health status and limited care. Other income-related factors noted include difficulty with securing transportation to medical appointments and homelessness.
- In the survey, low income and financial challenges were reported. For survey respondents who reported not being able to always get the care they needed, affordability and lack of insurance coverage were the reasons most frequently mentioned.

**Comparison to August 2016 CHNA:** Financial hardship and basic needs insecurity was not one of the top health priority areas identified in WMC's August 2016 CHNA, but that assessment did note several financial hardship measures relevant to health. The study reported that the community experienced a 19 percent increase in the percentage of households (incomes under \$25,000) since 2009.

## **Prioritized Health Need #4: Mental Health and Substance Abuse**

Smoking, Alcohol and Drug Abuse, and Mental Health Services

### **Mental Health**

Mental and behavioral health includes both mental health conditions (e.g., depression, bi-polar) and behavioral problems (e.g., bullying, suicidal behavior). Poor mental and behavioral health causes suffering for both those afflicted and the people around them. It can negatively impact the ability of children to learn in school, and the ability of adults to be productive in the workplace and to provide a stable and nurturing environment for their families. Poor mental or behavioral health frequently contributes to or exacerbates problems with physical health and illness.

### **Key Findings**

- Nine of the 13 counties in WMC's community reported poor mental health days higher than their state's average according to the County Health Rankings report (**Exhibits 23A and 24B**).
- There are twelve locations in WMC's community that are designated as a Medically Underserved Area or Population (**Exhibit 34**).
- The suicide rate in 10 of the thirteen counties in the overall service area for which data were available was worse than their respective state's rates, according to the state health departments in Virginia and West Virginia.
- Major concerns mentioned by key informants were the need for more providers to care for children with mental and behavioral health issues. The WMC community has limited resources for this type of community need.
- An additional concern mentioned by key informants was connecting patients with services needed. Wait times are very long for patients to see a clinician.

**Comparison to WMC's 2016 CHNA:** Mental health was one of the priority issues identified in WMC's 2016 CHNA, for reasons including: the presence of mental health, Health Professional Shortage Area (HPSAs); and unfavorable suicide rates compared to the state's average. Both mental health needs and a lack of treatment options were frequently mentioned by interviewees; identification of substance abuse and mental health ranked as the second highest health priority in community response sessions.

## **Substance Abuse**

Substance abuse includes the use of illicit substances (e.g., cocaine, heroin, methamphetamine, and marijuana), misuse of legal over-the-counter and prescription medications, and abuse of alcohol. Substance abuse affects not only the individual substance user, but those around them; negatively impacting health, safety and risky behaviors, including violence and crime, adult productivity, student ability to learn, and families' ability to function. Tobacco smoking is well-documented to be a risk factor for various forms of cancer, heart disease and other ailments, and to pose health risks for those exposed to secondhand smoke.

### **Key Findings**

- A health factor of alcohol use based on binge and excessive drinking placed Clarke, Frederick, and Rappahannock counties in the second quartile of all Virginia counties, according to *County Health Rankings* report.
- Rates of adult tobacco use in all of the seven counties in West Virginia were in the top 49% of counties in the state. Smoking across the community averaged 24 percent.
- Substance abuse was a major concern and mentioned frequently by key informant interview participants. It was portrayed as a growing and serious issue.
- Substance abusers are often classified as offenders, and have limited options for seeking treatment.

**Comparison to August 2016 CHNA:** Substance abuse was one of the priority issues identified in WMC's August 2016 CHNA. It was frequently mentioned as a serious issue by interview participants. Focus groups identified substance abuse and mental health as the second highest health priority.



## **Prioritized Health Need #5: Health Outcomes**

### Length of Life & Quality of Life

Health Outcomes represent how healthy a county is right now. They reflect the physical and mental well-being of residents within a community through measures representing both length of life and the quality of life.

Length of Life measures how long people within a community live and whether the people are considered to be dying too early. Quality of Life refers to how healthy people feel while alive. It represents the well-being of a community, and represents the importance of physical, mental, social and emotional health from birth to adulthood.

#### **Key Findings**

- Four of the fourteen counties reported adult smoking percentages higher than the state averages. Page and Warren counties reported 17.0 percent of population were smokers, Shenandoah County showed 16 percent (**Exhibit 23B**).
- Mortality due to malignant neoplasms (cancer), chronic lower respiratory disease, nephritis, influenza/pneumonia, and suicide rates were greater than the state average for six of the seven counties (**Exhibit 24**).
- In the WMC community, suicide rates were higher than the state averages (**Exhibit 26A**).
- Septicemia for Page County was reported 50-74 percent worse than the national average (**Exhibit 26A**).
- Rappahannock and Warren counties reported unintentional injury related mortality at a higher rate than both the Virginia and national averages (**Exhibit 25**).

## **Prioritized Health Need #6: Maternal and Child Health**

### Teen Births, Infant Mortality, No Prenatal Care in 1<sup>st</sup> Trimester

Maternal and child health indicators, including teen pregnancy and infant mortality, should be considered when evaluating the health of a community. The rate of teen pregnancy is an important health statistic in any community for reasons that include: concerns for the health of the mother and child, the financial and emotional ability of the mother to care for the child, and the ability of the mother to complete her secondary education and earn a living. Teen pregnancy also stresses the educational system and the families of teen mothers. Infant mortality can be a sign of deficits in access to care, health education, personal resources, and the physical environment.

#### **Key Findings**

- The teen birth rates in Winchester City and two of the seven counties in West Virginia were higher than the state and U.S. averages (**Exhibit 23B**).
- Grant and Morgan counties had lower birthweights than other counties within the WMC community (**Exhibit 24A**).
- Infant mortality rates were higher in Winchester City than the other counties within the region.
- Key informant interviews mentioned that there is a need to promote the importance of health screenings among women aged 40-50 years old.
- Key informant interviews mentioned that there was limited access to prenatal care and obstetric services in Front Royal and Warren County.

**Comparison to August 2016 CHNA:** Maternal and child health indicators, including teen pregnancy and infant mortality, were not identified as top health priorities in Winchester Medical Center's August 2016 CHNA.

# CHNA DATA AND ANALYSIS

---

## METHODOLOGY

### Data Sources and Analytic Methods

Community health needs were identified by collecting and analyzing data and information from multiple quantitative and qualitative sources. Considering information from a variety of sources is important when assessing community health needs, to ensure the assessment captures a wide range of facts and perspectives and assists in identifying the highest-priority health needs.

Statistics for health status, health care access, and related indicators were analyzed and included data from local, state, and federal public agencies, community service organizations in the WMC community, and Valley Health. Comparisons to benchmarks were made where possible. Details from these quantitative data are presented in the report's body, followed by a review of the principal findings of health assessments conducted by other organizations in the community in recent years.

Input from persons representing the broad interests of the community was collected through: 56 individual/group interviews with over 200 key informants (January-March 2019); a community health survey with 2,429 respondents; and six community response sessions (April 2016) comprised of 20 additional community stakeholders where preliminary findings were discussed. Interviews and community response sessions included: individuals with special knowledge of, or expertise in, public health; local and state health agencies with current data or information about the health needs of the community; and leaders, representing the medically underserved, low-income, and minority populations, and populations with chronic disease needs. Feedback from community response session participants helped validate findings and prioritize identified health needs.

### Collaborating Organizations

WMC collaborated with the other Valley Health hospitals for this assessment: Hampshire Memorial Hospital, Page Memorial Hospital, Shenandoah Memorial Hospital, War Memorial Hospital, and Warren Memorial Hospital.

Valley Health's internal project team included:

Mark H. Merrill, president and CEO, Valley Health System

Grady (Skip) Philips, senior vice president, Valley Health; president, Winchester Medical Center

Elizabeth Savage, senior vice president/chief human resource officer (CHRO) and vice president, Community Health & Wellness

Chris Rucker, president of Valley Regional Enterprises; vice president, Valley Health ambulatory services, Tracy Mitchell, VHS director, Community Health & Wellness Services

Michael Wade, operations manager, Marketing & Communications

Mary Welch-Flores, manager, Business Development

The Community Advisory Committee (CAC) serving as the Community Health Needs Assessment Steering Committee, provided insight regarding the needs of the communities participating in the 2019 CHNA. The CAC guides the process to ensure alignment with organizational mission and vision and support of legislative mandates regarding CHNA reporting. Members of the committee make sure those components of the CHNA are being adequately compiled and addressed and that the project is completed with prioritized health needs.

Valley Health's Community Health Needs Assessment steering committee included:

Gwen Borders-Walker, vice president, NAACP (Winchester, VA)  
Pastor George Bowers, faith-based community member  
Linda Caley, president, WMC Auxiliary (Winchester, VA)  
Travis Clark, president, operations, Valley Health Southern Region; president, Shenandoah Memorial Hospital and Page Memorial Hospital  
Rick Gladding, former chairman, SMH Board of Trustees (Woodstock, VA)  
Peg Goodyear, president, WMC Auxiliary (Front Royal, VA)  
Colin M. Green, MD, MPH, health director, Lord Fairfax Health District, Virginia Department of Health  
Dr. Ray Grimm, former member, WMH Board of Trustees (Front Royal, VA)  
Sharen Gromling, executive director, Our Health (Winchester, VA)  
Floyd Heater, vice president, Valley Health Southern Region; president, Warren Memorial Hospital  
Henry (Mac) Hobgood, former chairman, WMH Board of Trustees (Front Royal, VA)  
Diane Kerns, former member, WMC Board of Trustees (Winchester, VA)  
Tom Kluge, president, Hampshire Memorial Hospital and War Memorial Hospital  
Tom Leslie, DDS, former member, War Board of Trustees (Berkeley Springs, WV)  
Tom Linski, Jr., former member, SMH Board of Trustees (New Market, VA)  
David Long, former member, PMH Board of Trustees (Luray, VA)  
Richard (Dick) L. Masincup, former member, PMH Board of Trustees (Luray, VA)  
Mark Merrill, president and CEO, Valley Health  
Tracy Mitchell, VHS director, community health & wellness services  
Grady (Skip) Philips, III, senior vice president, Valley Health; president Winchester Medical Center  
Nadine Pottinga, president & CEO, United Way of Northern Shenandoah Valley  
Elizabeth Savage, senior vice president/chief human resource officer (CHRO) and vice president of community health & wellness  
Rabbi Scott Sperling, faith-based community member  
Ethel Showman, former member, SMH Board of Trustees (Front Royal, VA)  
Cathy Weaver, former member, PMH Board of Trustees (Luray, VA)  
Mary Welch-Flores, manager, business development  
Karen Whetzel, former member, SMH Board of Trustees (Woodstock, VA)  
John Willingham, former member, WMC Board of Trustees (Winchester, VA)

Additionally, lists of the interviewees and community response session participants are provided in **Exhibits 63** through **66** of this report.



## Prioritization Process and Criteria

Valley Health applied a ranking methodology to prioritize the community health needs identified by the assessment, incorporating both quantitative and qualitative data throughout. Scores were calculated for each data category (secondary data, previous assessments, survey, and interviews) based on the number of sources measuring each health issue and the severity of the issue as measured by the data and as indicated by community input. Scores were averaged and assigned a weight for each data category: 40 percent, 10 percent, 10 percent, and 40 percent, respectively. All identified health issues were assigned scores for severity and scope. Major themes discussed by participants in the community response sessions were compared to the scored health issues.

## Information Gaps

No information gaps have affected the hospital's ability to reach reasonable conclusions regarding priority community health needs.

# DEFINITION OF COMMUNITY ASSESSED

This section identifies the community that was assessed by Winchester Medical Center (WMC). WMC’s community is comprised of 13 counties in Virginia and West Virginia and the City of Winchester in Virginia (114 ZIP codes). The hospital’s primary service area (PSA) includes Clarke, Frederick, Page, Rappahannock, Shenandoah, and Warren counties and the City of Winchester in Virginia, and Hampshire, Hardy, and Morgan Counties in West Virginia. The secondary service area (SSA) includes Berkeley, Grant, Jefferson, and Mineral counties in West Virginia (**Exhibit 1**). The hospital is located in Winchester, Virginia.

In 2018, the WMC community was estimated to have a population of 521,401 persons. Approximately 58 percent of the population resided in the primary service area (**Exhibit 1**).

**Exhibit 1: Community Population, 2018**

| 2018 DATA               |                       |                             |
|-------------------------|-----------------------|-----------------------------|
| County/City             | Total Population 2018 | Percent of Total Population |
| <b>PSA</b>              | <b>302,857</b>        | <b>58.1%</b>                |
| Clarke County, VA       | 14,757                | 2.8%                        |
| Frederick County, VA    | 87,411                | 16.8%                       |
| Hampshire County, WV    | 25,339                | 4.9%                        |
| Hardy County, WV        | 14,560                | 2.8%                        |
| Morgan County, WV       | 18,473                | 3.5%                        |
| Page County, VA         | 24,258                | 4.7%                        |
| Rappahannock County, VA | 7,580                 | 1.5%                        |
| Shenandoah County, VA   | 43,751                | 8.4%                        |
| Warren County, VA       | 39,560                | 7.6%                        |
| Winchester City, VA     | 27,168                | 5.2%                        |
| <b>SSA</b>              | <b>218,544</b>        | <b>41.9%</b>                |
| Berkeley County, WV     | 118,793               | 22.8%                       |
| Grant County, WV        | 12,489                | 2.4%                        |
| Jefferson County, WV    | 58,584                | 11.2%                       |
| Mineral County, WV      | 28,678                | 5.5%                        |
| <b>Total</b>            | <b>521,401</b>        | <b>100.0%</b>               |

Sources: Projections: ESRI Community Profiles for all PSA and SSA Counties

This community definition was validated by the geographic origins of WMC inpatients and emergency department encounters (**Exhibit 2**).

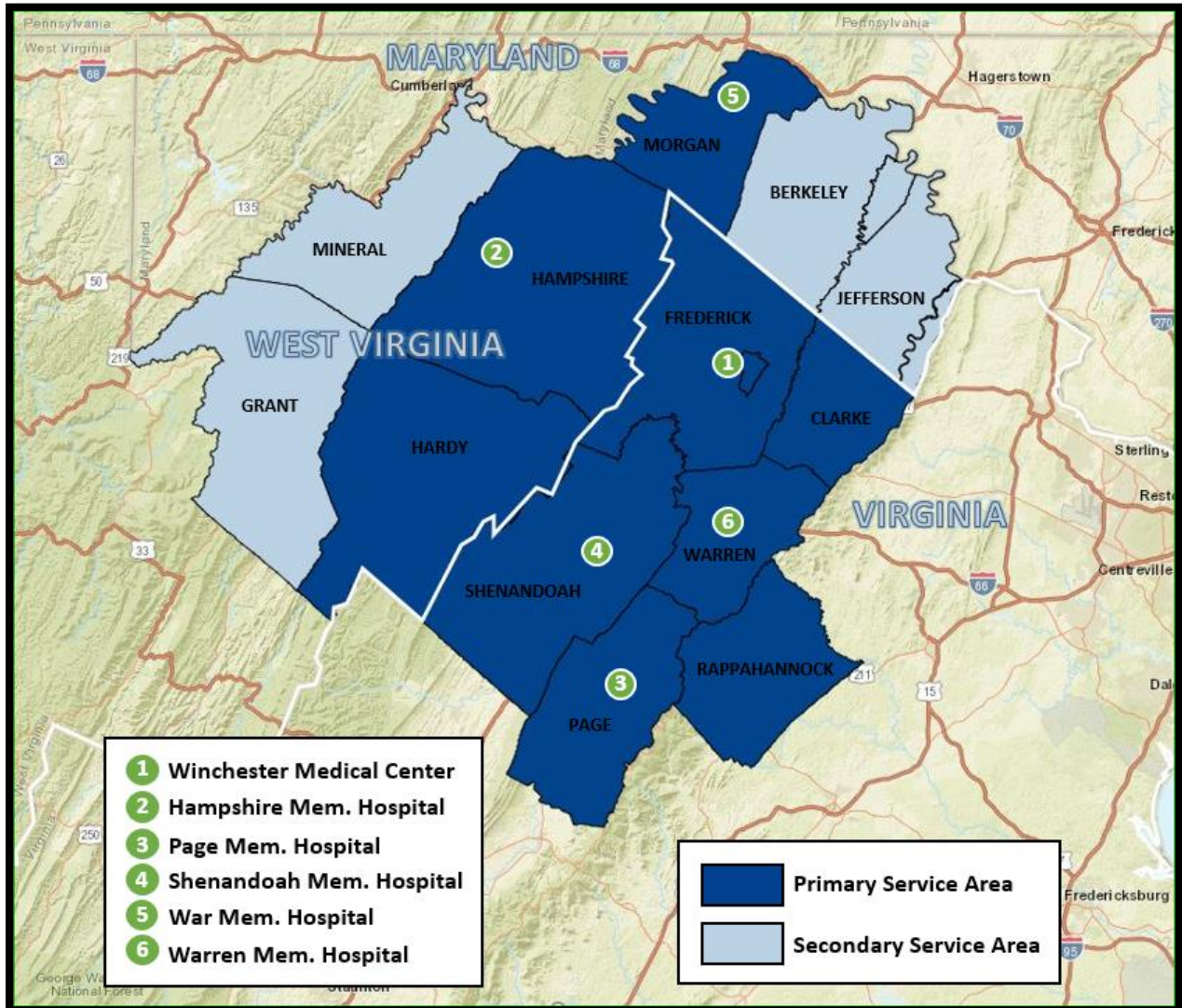
**Exhibit 2: WMC Inpatient and Emergency Department Discharges, 2018**

| <b>WMC Patient Discharge Volumes IP and ED, 2018</b> |                                       |                                      |                                |                                 |
|--|---------------------------------------|--------------------------------------|--------------------------------|---------------------------------|
| <b>County/City</b>                                   | <b>Number of Inpatient Discharges</b> | <b>Percent of Patient Discharges</b> | <b>Number of ED Discharges</b> | <b>Percent of ED Discharges</b> |
| <b>PSA</b>   | <b>18,132</b>                         | <b>78.3%</b>                         | <b>52,994</b>                  | <b>77.2%</b>                    |
| Clarke County, VA                                    | 966                                   | 4.2%                                 | 352                            | 0.5%                            |
| Frederick County, VA                                 | 6,657                                 | 28.7%                                | 26,126                         | 38.0%                           |
| Hampshire County, WV                                 | 1,318                                 | 5.7%                                 | 3,009                          | 4.4%                            |
| Hardy County, WV                                     | 576                                   | 2.5%                                 | 1,370                          | 2.0%                            |
| Morgan County, WV                                    | 867                                   | 3.7%                                 | 1,909                          | 2.8%                            |
| Page County, VA                                      | 715                                   | 3.1%                                 | 442                            | 0.6%                            |
| Rappahannock County, VA                              | 94                                    | 0.4%                                 | 107                            | 0.2%                            |
| Shenandoah County, VA                                | 2,101                                 | 9.1%                                 | 3,855                          | 5.6%                            |
| Warren County, VA                                    | 1,962                                 | 8.5%                                 | 2,776                          | 4.0%                            |
| Winchester City, VA                                  | 2,876                                 | 12.4%                                | 13,048                         | 19.0%                           |
| <b>SSA</b>   | <b>3,799</b>                          | <b>16.4%</b>                         | <b>8,983</b>                   | <b>13.1%</b>                    |
| Berkeley County, WV                                  | 2,129                                 | 9.2%                                 | 6,261                          | 9.1%                            |
| Grant County, WV                                     | 271                                   | 1.2%                                 | 293                            | 0.4%                            |
| Jefferson County, WV                                 | 1,155                                 | 5.0%                                 | 2,198                          | 3.2%                            |
| Mineral County, WV                                   | 244                                   | 1.1%                                 | 231                            | 0.3%                            |
| <b>PSA and SSA Total</b>                             | <b>21,931</b>                         | <b>94.7%</b>                         | <b>61,977</b>                  | <b>90.2%</b>                    |
| Other areas  | 1,224                                 | 5.3%                                 | 6,702                          | 9.8%                            |
| <b>Total Discharges</b>                              | <b>23,155</b>                         | <b>100.0%</b>                        | <b>68,679</b>                  | <b>100.0%</b>                   |

Source: Winchester Medical Center Patient Discharge Volumes IP and ED, 2018 (Tableau)

In 2018, the WMC community accounted for 90.2 percent of the hospital's inpatients and emergency department discharges. The majority (77.2 percent) of the hospital's inpatients originated from the primary service area. Approximately 51 percent of emergency department visits originated from Winchester City and Frederick County (**Exhibit 2**).

**Exhibit 3: Winchester Medical Center Community:** 13 counties plus the City of Winchester that comprise WMC’s primary and secondary service areas.



Source: ESRI 2019, Created by Planning and Business Development



## SECONDARY DATA ASSESSMENT

This section presents an assessment of secondary data regarding health needs in WMC’s community.

### Demographics

Population characteristics and change play a role in influencing the health issues of and service needed by communities. The total population in the WMC’s community is expected to grow 6.7 percent from 2018 to 2023 (**Exhibit 4**).

**Exhibit 4: Percent Change in Population by County/City, 2018-2023**

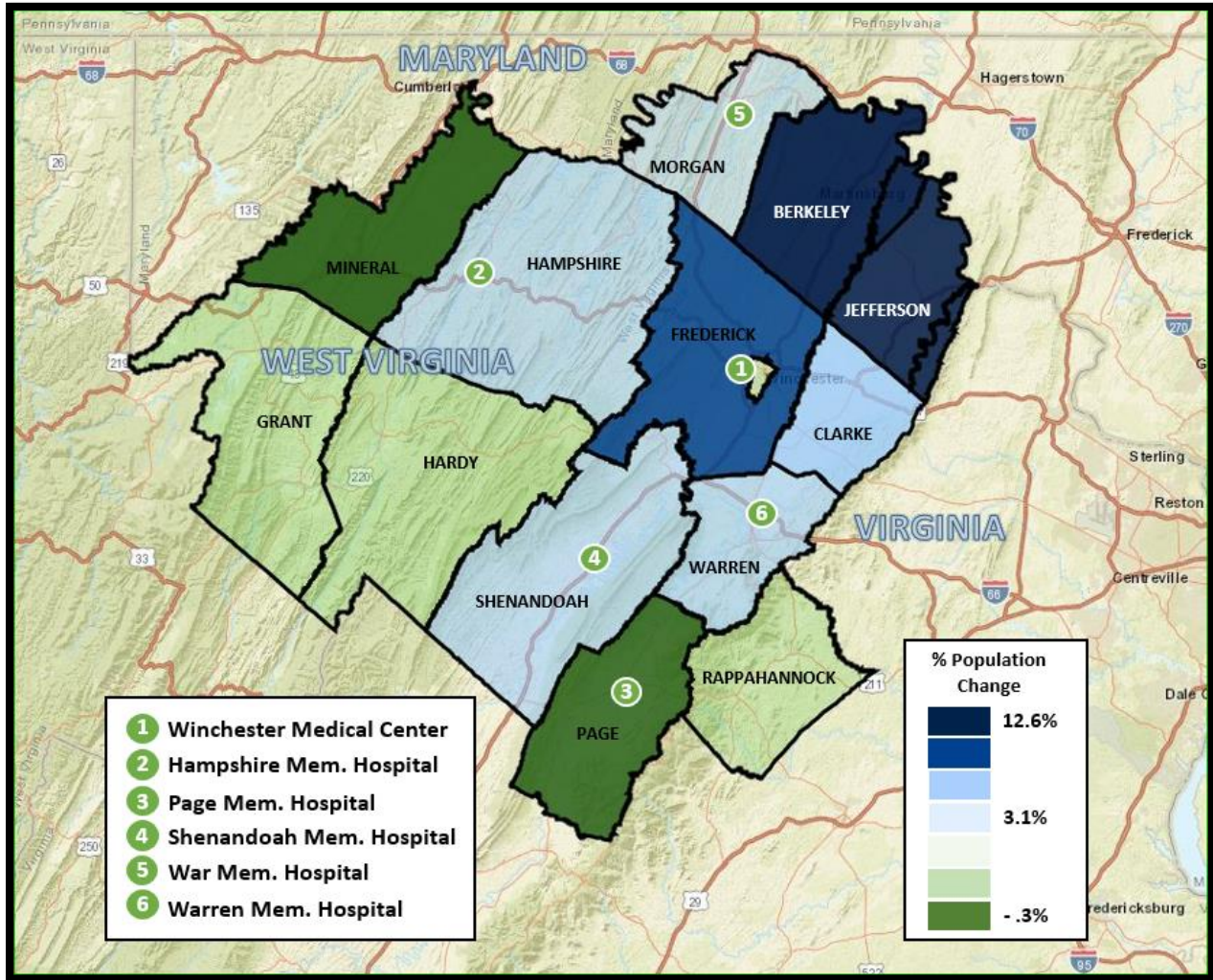
| 2018 DATA               |                       |                                 |  |
|-------------------------|-----------------------|---------------------------------|--|
| County/City             | Total Population 2018 | Total Population estimates 2023 | Percent Change in Population 2018-2023 |
| <b>PSA</b>              | <b>302,857</b>        | <b>315,722</b>                  | <b>4.2%</b>                            |
| Clarke County, VA       | 14,757                | 15,286                          | 3.6%                                   |
| Frederick County, VA    | 87,411                | 95,139                          | 8.8%                                   |
| Hampshire County, WV    | 25,339                | 26,117                          | 3.1%                                   |
| Hardy County, WV        | 14,560                | 14,849                          | 2.0%                                   |
| Morgan County, WV       | 18,473                | 19,091                          | 3.3%                                   |
| Page County, VA         | 24,258                | 24,185                          | -0.3%                                  |
| Rappahannock County, VA | 7,580                 | 7,696                           | 1.5%                                   |
| Shenandoah County, VA   | 43,751                | 44,976                          | 2.8%                                   |
| Warren County, VA       | 39,560                | 40,730                          | 3.0%                                   |
| Winchester City, VA     | 27,168                | 27,653                          | 1.8%                                   |
| <b>SSA</b>              | <b>218,544</b>        | <b>240,605</b>                  | <b>10.1%</b>                           |
| Berkeley County, WV     | 118,793               | 133,785                         | 12.6%                                  |
| Grant County, WV        | 12,489                | 12,753                          | 2.1%                                   |
| Jefferson County, WV    | 58,584                | 65,418                          | 11.7%                                  |
| Mineral County, WV      | 28,678                | 28,649                          | -0.1%                                  |
| <b>Total</b>            | <b>521,401</b>        | <b>556,327</b>                  | <b>6.7%</b>                            |

Source: Projections: ESRI Detailed Age Profiles PSA and SSA All counties

The Commonwealth of Virginia is expected to increase by 4.1 percent and West Virginia to increase by 0.75 percent between 2018 and 2023.<sup>2</sup> Berkeley County has the largest projected population increase at 12.6 percent for the WMC community (**Exhibit 4**).

<sup>2</sup> ESRI Detailed Age Profiles PSA and SSA All counties

**Exhibit 5: Population Change by County/City and ZIP Code, 2018-2023**



Source: ESRI 2019, Created by Planning and Business Development

Frederick County in Virginia, and Berkeley County in West Virginia are expected to grow faster than the community as a whole (approximately 8.8 and 12.6 percent respectively), while Page County in Virginia, and Mineral County in West Virginia are projected to experience population declines (**Exhibits 4 and 5**).

**Exhibit 6: Percent Change in Population by Age/Sex Cohort, 2018-2023**

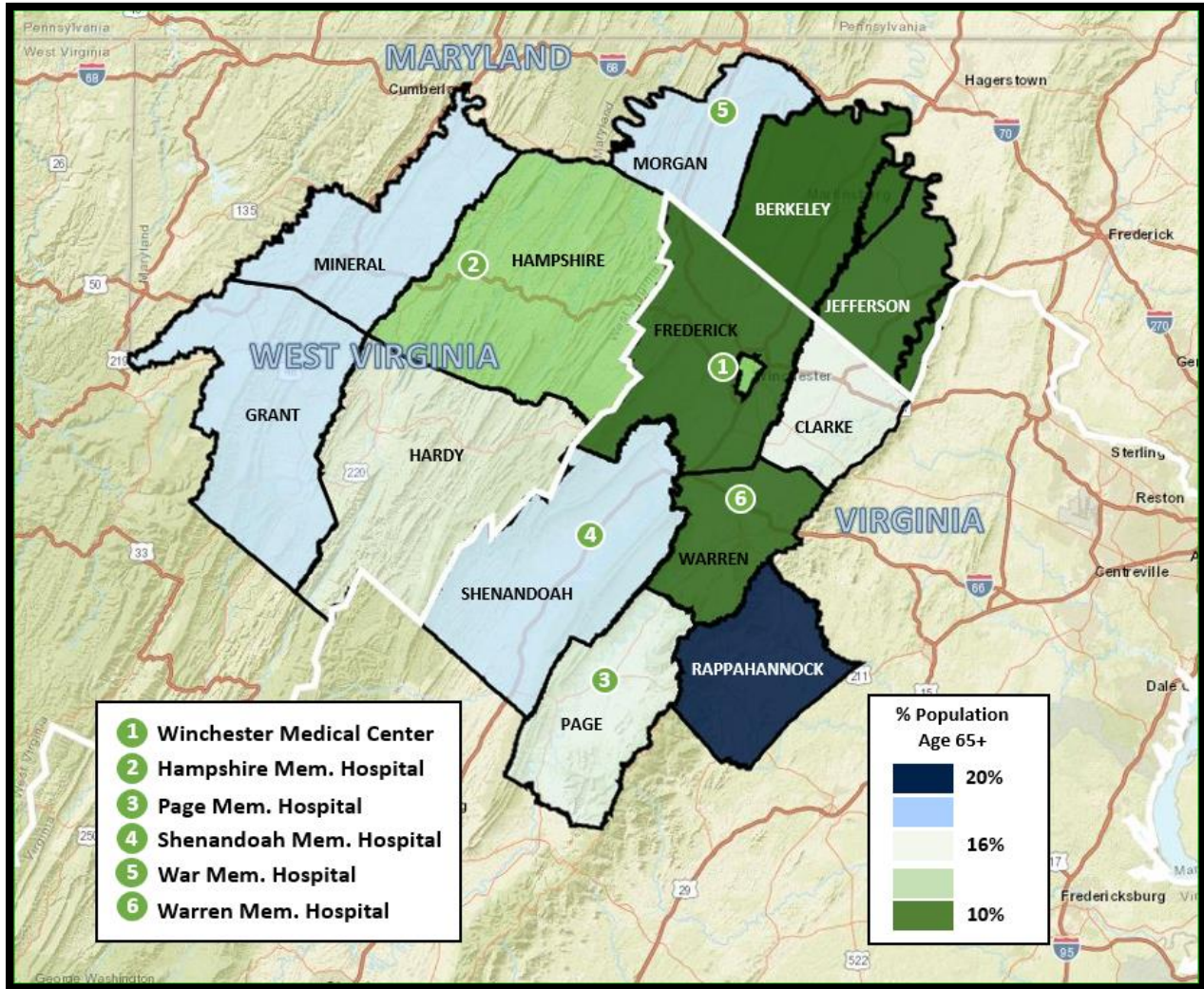
| <b>2018 DATA</b>                |                        |                        |                           |                        |                                  |                                |
|---------------------------------|------------------------|------------------------|---------------------------|------------------------|----------------------------------|--------------------------------|
| <b>Age/Sex Total Population</b> | <b>Population 2014</b> | <b>Population 2018</b> | <b>% Growth 2014-2018</b> | <b>Population 2023</b> | <b>5 Year % Change 2018-2023</b> | <b>% total 2018 Population</b> |
| <b>Female 0-19</b>              | 60,758                 | 60,928                 | 0.3%                      | 64,550                 | 5.9%                             | 11.7%                          |
| <b>Male 0-19</b>                | 63,007                 | 63,643                 | 1.0%                      | 68,007                 | 6.9%                             | 12.2%                          |
| <b>Female 20-44</b>             | 75,735                 | 78,354                 | 3.3%                      | 81,624                 | 4.2%                             | 15.0%                          |
| <b>Male 20-44</b>               | 74,895                 | 78,556                 | 4.7%                      | 82,399                 | 4.9%                             | 15.1%                          |
| <b>Female 45-64</b>             | 70,845                 | 73,918                 | 4.2%                      | 74,395                 | 0.6%                             | 14.2%                          |
| <b>Male 45-64</b>               | 70,304                 | 73,062                 | 3.8%                      | 73,749                 | 0.9%                             | 14.0%                          |
| <b>Female 65+</b>               | 40,623                 | 49,646                 | 18.2%                     | 59,395                 | 19.6%                            | 9.5%                           |
| <b>Male 65+</b>                 | 34,346                 | 43,294                 | 20.7%                     | 52,208                 | 20.6%                            | 8.3%                           |
| <b>Total</b>                    | <b>490,513</b>         | <b>521,401</b>         | <b>5.9%</b>               | <b>556,327</b>         | <b>6.7%</b>                      | <b>100.0%</b>                  |

Source: Projections: ESRI Detailed Age Profiles PSA and SSA All Counties

The number of residents aged 44 years and younger has increased by 9.3 percent since 2014, while the 45 and older age cohort, in total, has an increase of 2.5 percent. The 65+ age cohort experienced a 19.3 percent increase from 2014 (**Exhibit 6**).



**Exhibit 7: Percent of Population Aged 65+ by County/City, 2018**



Source: ESRI 2019, Created by Planning and Business Development

At 19.0 percent, Rappahannock County reported the highest percentage of people aged 65 and older. Page and Shenandoah counties in Virginia, and Grant County in West Virginia reported 18.0 percent of the population were 65 and older (**Exhibit 7**). Berkeley County, WV, and Frederick County, VA, had the lowest percentages of people aged 65 and over.

**Exhibit 8A: Distribution of Population by Race, 2018-2023**

| 2018 DATA                         |                |                |  |                                  |                                  |
|-----------------------------------|----------------|----------------|--|----------------------------------|----------------------------------|
| Race/Ethnicity                    | 2018 Total     | 2023 Total     | Percent Change in Population 2018-2023 | Percent of Total 2018 Population | Percent of Total 2023 Population |
| American Indian and Alaska Native | 1,626          | 1,841          | 13.3%                                  | 0.3%                             | 0.3%                             |
| Asian                             | 6,591          | 8,617          | 30.7%                                  | 1.3%                             | 1.5%                             |
| Black or African American         | 25,474         | 29,102         | 14.2%                                  | 4.9%                             | 5.2%                             |
| Native Hawaiian/Pacific Islander  | 186            | 142            | -23.7%                                 | 0.0%                             | 0.0%                             |
| Some other Race                   | 12,372         | 15,069         | 21.8%                                  | 2.4%                             | 2.7%                             |
| Two or more Races                 | 13,618         | 17,689         | 29.9%                                  | 2.6%                             | 3.2%                             |
| White                             | 461,536        | 483,866        | 4.8%                                   | 88.5%                            | 87.0%                            |
| <b>Total</b>                      | <b>202,199</b> | <b>206,293</b> | <b>2.0%</b>                            | <b>38.8%</b>                     | <b>37.1%</b>                     |
| Hispanic or Latino                | 29,831         | 37,014         | 24.1%                                  | 5.7%                             | 6.7%                             |
| Not Hispanic or Latino            | 491,571        | 19,311         | 5.6%                                   | 94.3%                            | 93.3%                            |
| <b>Total</b>                      | <b>521,402</b> | <b>556,325</b> | <b>6.7%</b>                            | <b>100.0%</b>                    | <b>100.0%</b>                    |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties.

About 88.5 percent of the WMC’s community population is White compared to the previous assessment in 2016 at 91 percent. Non-White populations are expected to grow from 9.2 percent in 2016 to 5 percent of the total population during the years 2018 to 2023. According to the ESRI Community Profiles, the Hispanic or Latino population is expected to increase 24.1 percent between 2018 and 2023 (**Exhibit 8A**).

**Exhibit 8B: VA Counties Distribution of Population by Race, 2018-2023**

| Race/Ethnicity                    | Page, VA      |               | Rappahannock, VA |              | Shenandoah, VA |               | Warren, VA    |               |
|-----------------------------------|---------------|---------------|------------------|--------------|----------------|---------------|---------------|---------------|
|                                   | 2018          | 2023          | 2018             | 2023         | 2018           | 2023          | 2018          | 2023          |
| American Indian and Alaska Native | 49            | 48            | 23               | 31           | 131            | 177           | 198           | 204           |
| Asian                             | 121           | 121           | 69               | 92           | 438            | 538           | 475           | 611           |
| Black or African American         | 461           | 484           | 341              | 339          | 1094           | 1429          | 1899          | 1996          |
| Some other Race                   | 170           | 169           | 45               | 54           | 1531           | 1834          | 514           | 611           |
| Two or more Races                 | 364           | 363           | 172              | 208          | 963            | 1204          | 1068          | 1303          |
| White                             | 23094         | 23000         | 6930             | 6973         | 39595          | 39794         | 35406         | 36005         |
| <b>Total</b>                      | <b>24,258</b> | <b>24,185</b> | <b>7,580</b>     | <b>7,696</b> | <b>43,751</b>  | <b>44,976</b> | <b>39,560</b> | <b>40,730</b> |
| Hispanic or Latino                | 485           | 484           | 311              | 385          | 3281           | 3913          | 1820          | 2240          |
| Not Hispanic or Latino            | 23773         | 23701         | 7269             | 7311         | 40470          | 41063         | 37740         | 38490         |
| <b>Total</b>                      | <b>24,258</b> | <b>24,185</b> | <b>7,580</b>     | <b>7,696</b> | <b>43,751</b>  | <b>44,976</b> | <b>39,560</b> | <b>40,730</b> |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties

**Exhibit 8C: VA Counties Distribution of Population by Race, 2018-2023**

| Race/Ethnicity                    | Clarke, VA    |               | Frederick, VA |               | Winchester City |               |
|-----------------------------------|---------------|---------------|---------------|---------------|-----------------|---------------|
|                                   | 2018          | 2023          | 2018          | 2023          | 2018            | 2023          |
| American Indian and Alaska Native | 59            | 76            | 262           | 285           | 136             | 166           |
| Asian                             | 177           | 245           | 1573          | 2188          | 706             | 774           |
| Black or African American         | 664           | 611           | 3671          | 4281          | 2961            | 2987          |
| Native Hawaiian/Pacific Islander  | 15            | 15            | 87            | 95            | 0               | 0             |
| Some other Race                   | 295           | 367           | 3496          | 4472          | 2771            | 3125          |
| Two or more Races                 | 428           | 535           | 2273          | 3044          | 1060            | 1300          |
| White                             | 13119         | 13436         | 76048         | 80773         | 19534           | 19302         |
| <b>Total</b>                      | <b>14,757</b> | <b>15,286</b> | <b>87,411</b> | <b>95,139</b> | <b>27,168</b>   | <b>27,653</b> |
| Hispanic or Latino                | 871           | 1085          | 7605          | 9990          | 4836            | 5531          |
| Not Hispanic or Latino            | 13,886        | 14,200        | 79,807        | 85,149        | 22,332          | 22,122        |
| <b>Total</b>                      | <b>14,757</b> | <b>15,286</b> | <b>87,411</b> | <b>95,139</b> | <b>27,168</b>   | <b>27,653</b> |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties

**Exhibit 8D: West Virginia Counties Distribution of Population by Race, 2018-2023**

| Race/Ethnicity                    | Berkeley, WV   |                | Grant, WV     |               | Jefferson, WV |               | Hampshire, WV |               |
|-----------------------------------|----------------|----------------|---------------|---------------|---------------|---------------|---------------|---------------|
|                                   | 2018           | 2023           | 2018          | 2023          | 2018          | 2023          | 2018          | 2023          |
| American Indian and Alaska Native | 356            | 401            | 25            | 26            | 176           | 196           | 51            | 52            |
| Asian                             | 1426           | 2007           | 25            | 26            | 1113          | 1505          | 101           | 131           |
| Black or African American         | 8791           | 10703          | 112           | 140           | 3632          | 4056          | 329           | 392           |
| Native Hawaiian/Pacific Islander  | 0              | 0              | 0             | 0             | 59            | 5             | 25            | 26            |
| Some other Race                   | 1663           | 2007           | 87            | 102           | 1289          | 1701          | 76            | 78            |
| Two or more Races                 | 3920           | 5485           | 150           | 191           | 1816          | 2420          | 380           | 444           |
| White                             | 102637         | 113182         | 12089         | 12268         | 50500         | 55534         | 24376         | 24994         |
| <b>Total</b>                      | <b>118,793</b> | <b>133,785</b> | <b>12,489</b> | <b>12,753</b> | <b>58,584</b> | <b>65,418</b> | <b>25,339</b> | <b>26,117</b> |
| Hispanic or Latino                | 5227           | 6422           | 175           | 204           | 3515          | 4645          | 405           | 522           |
| Not Hispanic or Latino            | 113,566        | 127,363        | 12,314        | 12,549        | 55,069        | 60,773        | 24,934        | 25,595        |
| <b>Total</b>                      | <b>118,793</b> | <b>133,785</b> | <b>12,489</b> | <b>12,753</b> | <b>58,584</b> | <b>65,418</b> | <b>25,339</b> | <b>26,117</b> |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties



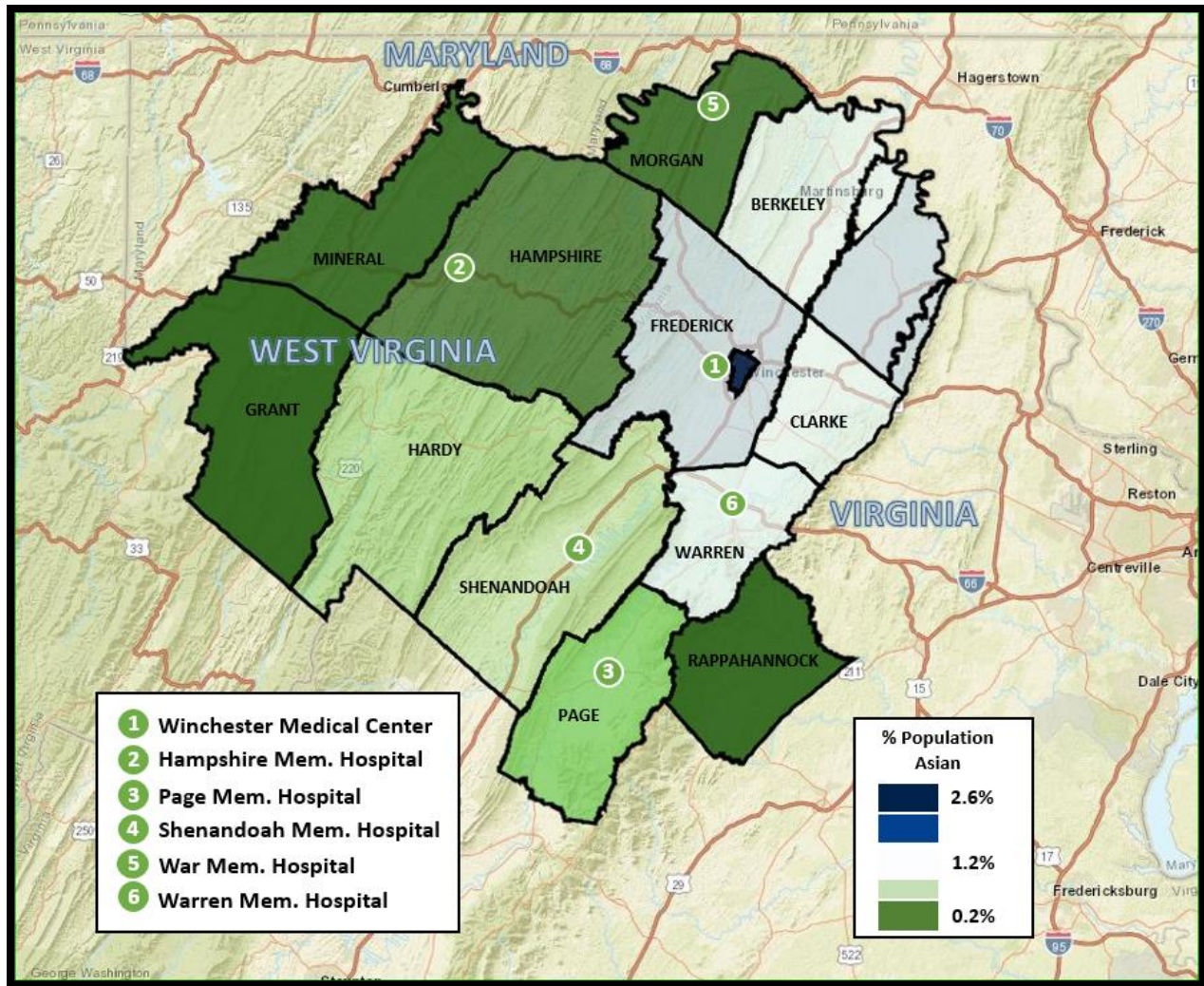
**Exhibit 8E: West Virginia Counties Distribution of Population by Race, 2018-2023**

| Race/Ethnicity                    | Hardy, WV     |               | Morgan, WV    |               | Mineral, WV   |               |
|-----------------------------------|---------------|---------------|---------------|---------------|---------------|---------------|
|                                   | 2018          | 2023          | 2018          | 2023          | 2018          | 2023          |
| American Indian and Alaska Native | 29            | 45            | 74            | 76            | 57            | 57            |
| Asian                             | 102           | 74            | 92            | 134           | 172           | 172           |
| Black or African American         | 510           | 653           | 148           | 172           | 860           | 859           |
| Some other Race                   | 320           | 416           | 55            | 76            | 57            | 57            |
| Two or more Races                 | 262           | 342           | 333           | 420           | 430           | 430           |
| White                             | 13337         | 13320         | 17771         | 18213         | 27101         | 27073         |
| <b>Total</b>                      | <b>14,560</b> | <b>14,849</b> | <b>18,473</b> | <b>19,091</b> | <b>28,678</b> | <b>28,649</b> |
|                                   |               |               |               |               |               |               |
| Hispanic or Latino                | 728           | 935           | 314           | 401           | 258           | 258           |
| Not Hispanic or Latino            | 13,832        | 13,913        | 18,159        | 18,690        | 28,420        | 28,391        |
|                                   |               |               |               |               |               |               |
| <b>Total</b>                      | <b>14,560</b> | <b>14,849</b> | <b>18,473</b> | <b>19,091</b> | <b>28,678</b> | <b>28,649</b> |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties

Exhibits 9, 10, and 11 illustrate locations in the community where the percentage of the population that is Asian, Black, Hispanic or Latino were highest. The percentage of Asian and Black and Hispanic residents are highest in the City of Winchester.

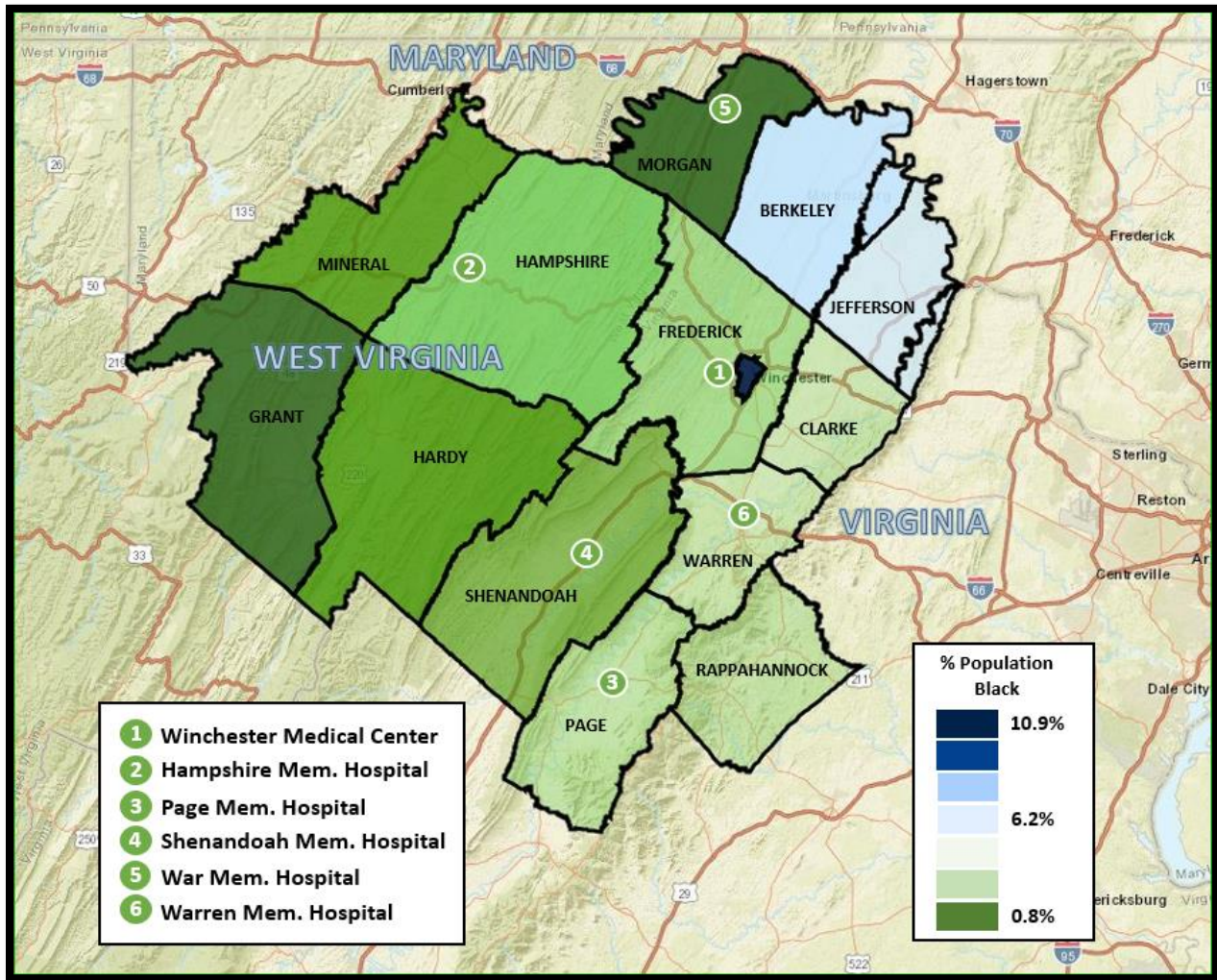
**Exhibit 9: Percent of Population – Asian, 2018**



Source: ESRI 2019, Created by Planning and Business Development

*Berkeley, Frederick, and Jefferson counties reported the highest number of Asian residents.*

**Exhibit 10: Percent of Population – Black, 2018**

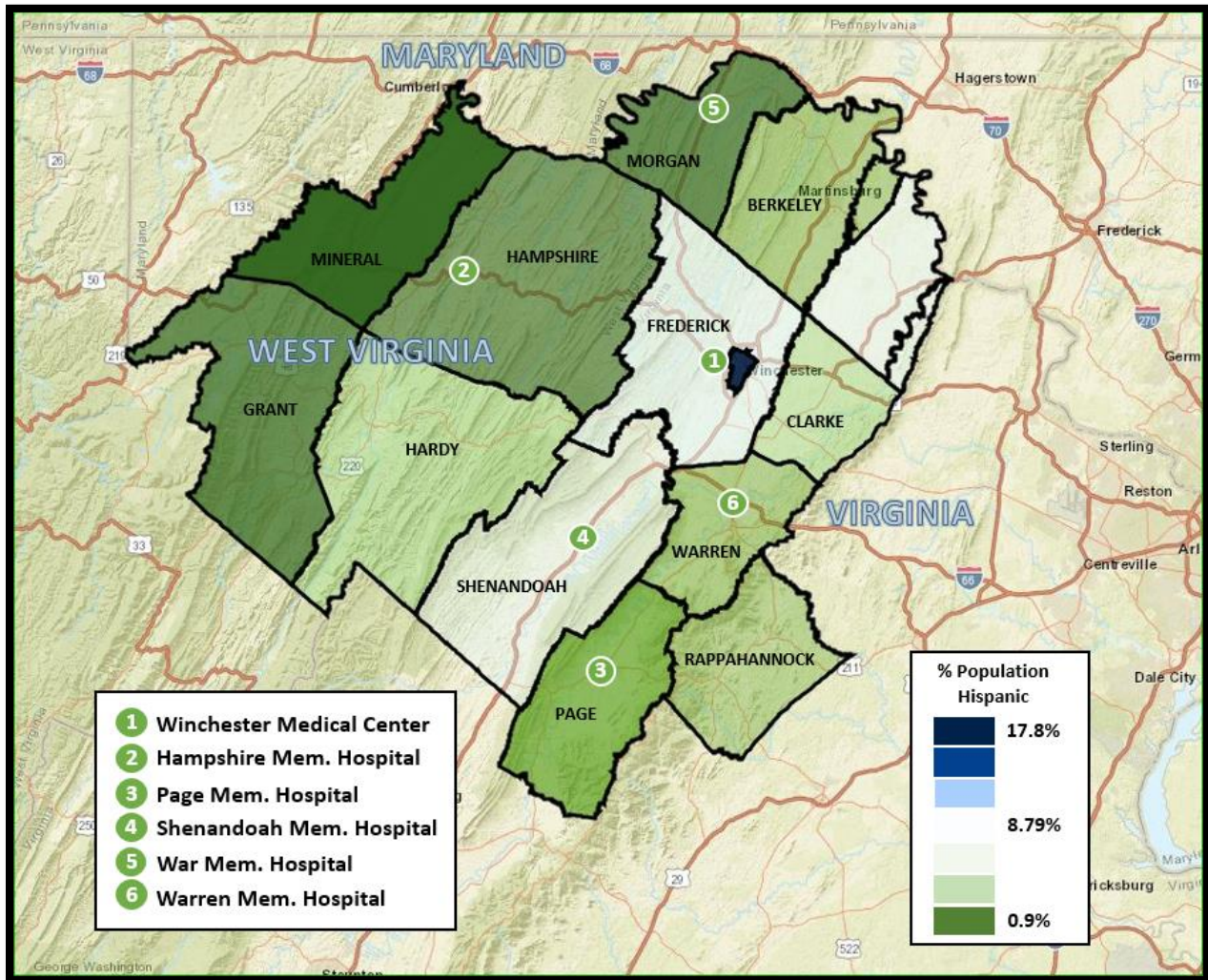


Source: ESRI 2019, Created by Planning and Business Development

*Berkeley, Frederick, Jefferson, Shenandoah, Warren counties, and Winchester City reported the highest percentages of Black residents.*



**Exhibit 11: Percent of Population – Hispanic or Latino, 2018**



Source: ESRI 2019, Created by Planning and Business Development

*Berkeley, Clarke, Frederick, Jefferson, and Shenandoah counties, and the City of Winchester reported the highest percentages of Hispanic or Latino residents.*

**Exhibit 12A: Virginia Counties Percent of Population – Not proficient in English, 2018**

| 2013-2017 DATA  |                         |                            |                       |                               |                             |                         |                           |
|---|-------------------------|----------------------------|-----------------------|-------------------------------|-----------------------------|-------------------------|---------------------------|
| Language  | Clarke County, Virginia | Frederick County, Virginia | Page County, Virginia | Rappahannock County, Virginia | Shenandoah County, Virginia | Warren County, Virginia | Winchester City, Virginia |
|   | Estimate                | Estimate                   | Estimate              | Estimate                      | Estimate                    | Estimate                | Estimate                  |
| <b>Total:</b>   | 5,568                   | 30,495                     | 9,467                 | 3,131                         | 17,262                      | 14,190                  | 10,520                    |
| <b>English only</b>                                   | 5,103                   | 27,650                     | 9,140                 | 2,851                         | 16,094                      | 13,189                  | 8,854                     |
| <b>Spanish:</b>                                       | 204                     | 2,064                      | 138                   | 170                           | 767                         | 520                     | 1,251                     |
| <b>Limited English speaking household<sup>3</sup></b> | <b>30</b>               | <b>265</b>                 | <b>-</b>              | <b>25</b>                     | <b>213</b>                  | <b>86</b>               | <b>470</b>                |
| <b>Not a limited English speaking household</b>       | 174                     | 1,799                      | 138                   | 145                           | 554                         | 434                     | 781                       |
| <b>Other Indo-European languages:</b>                 | 169                     | 406                        | 116                   | 83                            | 324                         | 280                     | 217                       |
| <b>Limited English speaking household</b>             | <b>13</b>               | <b>18</b>                  | <b>15</b>             | <b>-</b>                      | <b>64</b>                   | <b>27</b>               | <b>7</b>                  |
| <b>Not a limited English speaking household</b>       | 156                     | 388                        | 101                   | 83                            | 260                         | 253                     | 210                       |
| <b>Asian and Pacific Island languages:</b>            | 74                      | 315                        | 73                    | 27                            | 77                          | 119                     | 138                       |
| <b>Limited English speaking household</b>             | <b>30</b>               | <b>33</b>                  | <b>-</b>              | <b>16</b>                     | <b>7</b>                    | <b>28</b>               | <b>28</b>                 |
| <b>Not a limited English speaking household</b>       | 44                      | 282                        | 73                    | 11                            | 70                          | 91                      | 110                       |
| <b>Other languages:</b>                               | 18                      | 60                         | -                     | -                             | -                           | 82                      | 60                        |
| <b>Limited English speaking household</b>             | <b>-</b>                | <b>-</b>                   | <b>-</b>              | <b>-</b>                      | <b>-</b>                    | <b>-</b>                | <b>16</b>                 |
| <b>Not a limited English speaking household</b>       | 18                      | 60                         | -                     | -                             | -                           | 82                      | 44                        |

Source: U.S. Census Bureau, ACS 5-year estimates, 2017

*Approximately 36.7 percent of the Hispanic population in the City of Winchester do not speak English. Clarke (40.5%) and Rappahannock (59.3%) counties have higher percentages of their Asian population that do not speak English.*

<sup>3</sup> A "limited English speaking household" is one in which no member 14 years old and over (1) speaks only English or (2) speaks a non-English language and speaks English "very well." In other words, all members 14 years old and over have at least some difficulty with English. By definition, English-only households cannot belong to this group. Previous Census Bureau data products have referred to these households as "linguistically isolated" and "Households in which no one 14 and over speaks English only or speaks a language other than English at home and speaks English 'very well.'" This table is directly comparable to tables from earlier years that used these labels.

**Exhibit 12B: West Virginia Percent of Population – Not proficient in English, 2018**

| 2013-2017 DATA  |                                |                             |                                 |                             |                                 |                               |                              |
|---|--------------------------------|-----------------------------|---------------------------------|-----------------------------|---------------------------------|-------------------------------|------------------------------|
| Language  | Berkeley County, West Virginia | Grant County, West Virginia | Hampshire County, West Virginia | Hardy County, West Virginia | Jefferson County, West Virginia | Mineral County, West Virginia | Morgan County, West Virginia |
|   | Estimate                       | Estimate                    | Estimate                        | Estimate                    | Estimate                        | Estimate                      | Estimate                     |
| <b>Total:</b>   | 42,456                         | 4,372                       | 9,676                           | 5,561                       | 20,808                          | 11,274                        | 7,118                        |
| <b>English only</b>                                   | 39,738                         | 4,236                       | 9,500                           | 4,992                       | 19,060                          | 10,844                        | 6,888                        |
| <b>Spanish:</b>                                       | 1,294                          | 75                          | 92                              | 317                         | 934                             | 258                           | 190                          |
| <b>Limited English speaking household<sup>4</sup></b> | <b>139</b>                     | <b>7</b>                    | <b>22</b>                       | <b>3</b>                    | <b>150</b>                      | <b>108</b>                    | <b>2</b>                     |
| <b>Not a limited English speaking household</b>       | 1,155                          | 68                          | 70                              | 314                         | 784                             | 150                           | 188                          |
| <b>Other Indo-European languages:</b>                 | 793                            | 47                          | 84                              | 111                         | 456                             | 39                            | 26                           |
| <b>Limited English speaking household</b>             | <b>13</b>                      | -                           | -                               | <b>37</b>                   | -                               | -                             | -                            |
| <b>Not a limited English speaking household</b>       | 780                            | 47                          | 84                              | 74                          | 456                             | 39                            | 26                           |
| <b>Asian and Pacific Island languages:</b>            | 391                            | -                           | -                               | 121                         | 267                             | 133                           | 14                           |
| <b>Limited English speaking household</b>             | <b>13</b>                      | -                           | -                               | <b>33</b>                   | <b>73</b>                       | -                             | <b>3</b>                     |
| <b>Not a limited English speaking household</b>       | 378                            | -                           | -                               | 88                          | 194                             | 133                           | 11                           |
| <b>Other languages:</b>                               | 240                            | 14                          | -                               | 20                          | 91                              | -                             | -                            |
| <b>Limited English speaking household</b>             | -                              | -                           | -                               | <b>20</b>                   | -                               | -                             | -                            |
| <b>Not a limited English speaking household</b>       | 240                            | 14                          | -                               | -                           | 91                              | -                             | -                            |

Source: U.S. Census Bureau, ACS 5-year estimates, 2017

*Approximately 41.9 percent of the Hispanic population in Mineral County does not speak English. Hardy (23.7%) and Morgan (21.4%) counties have higher percentages of their Asian population that do not speak English.*

<sup>4</sup> A "limited English speaking household" is one in which no member 14 years old and over (1) speaks only English or (2) speaks a non-English language and speaks English "very well." In other words, all members 14 years old and over have at least some difficulty with English. By definition, English-only households cannot belong to this group. Previous Census Bureau data products have referred to these households as "linguistically isolated" and "Households in which no one 14 and over speaks English only or speaks a language other than English at home and speaks English 'very well'." This table is directly comparable to tables from earlier years that used these labels.



Data regarding residents without a high school diploma, those who have a high school diploma, residents that have had some college, and those that have earned a college degree are presented in **Exhibit 13** by city and county, for Virginia, West Virginia and the United States.

**Exhibit 13: Other Socioeconomic Indicators, 2018**

| 2018 DATA            |   |  |                                   |                                     |
|----------------------|---|--|-----------------------------------|-------------------------------------|
| County/City          | Population 25 + without a high school diploma | Population 25 + with high school diploma | Population 25 + with some college | Population 25 + with College Degree |
| <b>PSA</b>           |   |  |                                   |                                     |
| Clarke, VA           | 11.6%   | 27.8%                                    | 18.6%                             | 42.0%                               |
| Frederick, VA        | 11.0%   | 30.1%                                    | 19.4%                             | 39.6%                               |
| Hampshire, WV        | 19.0%   | 48.7%                                    | 14.3%                             | 18.0%                               |
| Hardy, WV            | 18.5%   | 45.9%                                    | 13.0%                             | 22.6%                               |
| Morgan, WV           | 16.1%   | 39.5%                                    | 15.9%                             | 28.5%                               |
| Page, VA             | 19.6%   | 45.5%                                    | 16.6%                             | 20.2%                               |
| Rappahannock, VA     | 11.7%   | 25.5%                                    | 20.8%                             | 41.9%                               |
| Shenandoah, VA       | 13.4%   | 38.8%                                    | 19.6%                             | 28.3%                               |
| Warren, VA           | 13.1%   | 36.8%                                    | 19.7%                             | 30.4%                               |
| Winchester, VA       | 15.2%   | 27.0%                                    | 16.3%                             | 41.6%                               |
| <b>SSA</b>           |   |  |                                   |                                     |
| Berkeley, WV         | 12.0%   | 36.2%                                    | 21.0%                             | 30.9%                               |
| Grant, WV            | 16.9%   | 45.9%                                    | 13.7%                             | 23.5%                               |
| Jefferson, WV        | 10.3%   | 30.6%                                    | 19.3%                             | 39.8%                               |
| Mineral, WV          | 10.7%   | 47.4%                                    | 19.4%                             | 22.4%                               |
| <b>Virginia</b>      | <b>10.5%</b>                                  | <b>23.6%</b>                             | <b>19.3%</b>                      | <b>46.6%</b>                        |
| <b>West Virginia</b> | <b>13.8%</b>                                  | <b>39.1%</b>                             | <b>17.8%</b>                      | <b>29.1%</b>                        |
| <b>US</b>            | <b>12.3%</b>                                  | <b>27.0%</b>                             | <b>20.5%</b>                      | <b>40.3%</b>                        |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties.

Key findings include:

- All Virginia counties in the community, had a higher percentage than the state average of residents aged 25 and older who did not graduate high school. The number of non-graduates in Page County was 19.6 compared to 24.5 percent as reported in the previous 2016 assessment.
- Grant, Hampshire, Hardy, and Morgan counties in West Virginia had higher percentages of non-graduates than the state average of 13.8 percent. Berkeley and Jefferson counties have higher percentages of residents who completed a college degree than the state average of 29.1 percent.

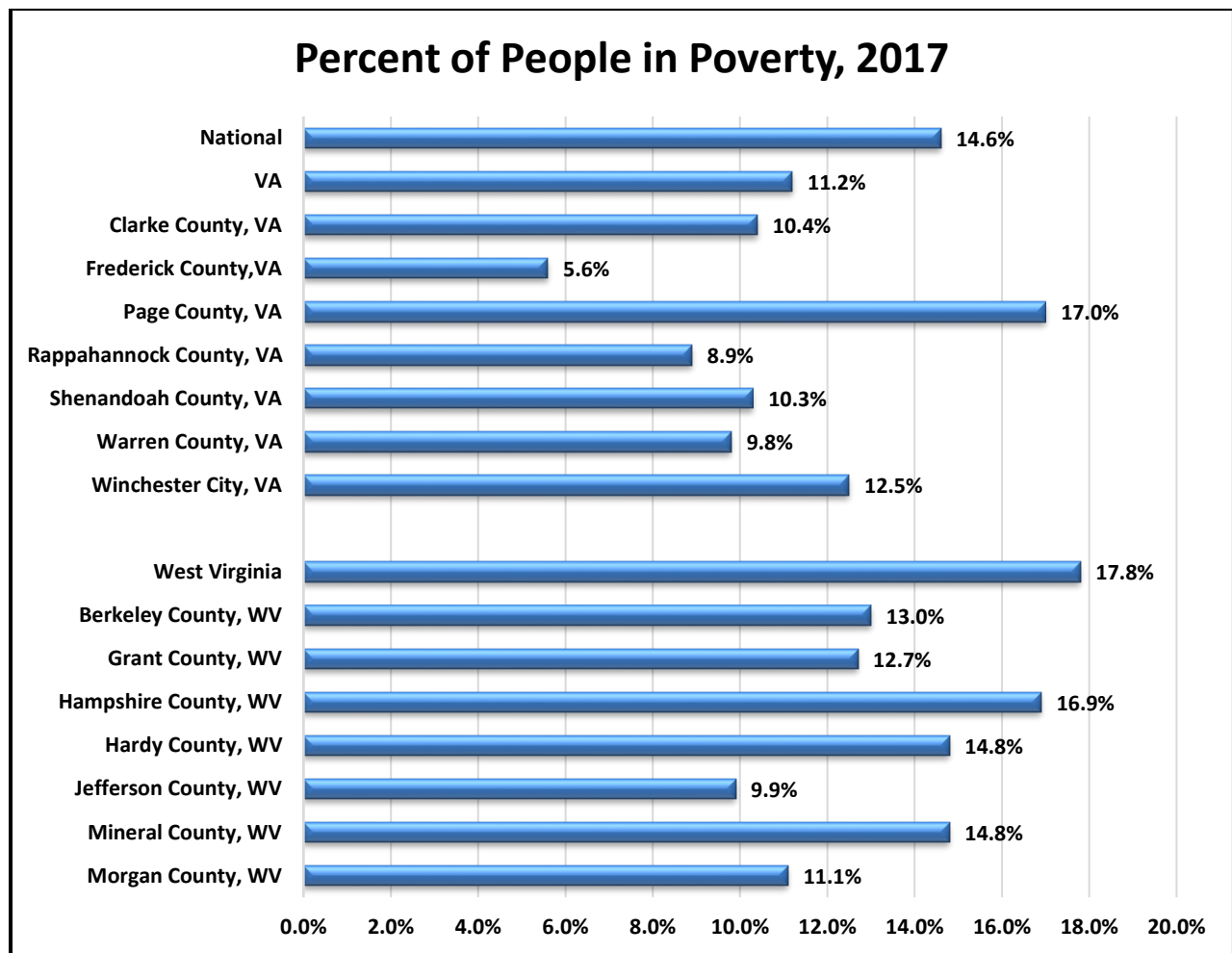
## Economic Indicators

The following types of economic indicators with implications for health were assessed: (1) people in poverty; (2) household income; (3) unemployment rate; (4) crime; and (5) insurance status.

### 1. People in Poverty

Many health needs are associated with poverty. In 2018, approximately 14.6 percent of people in the U.S., 11.2 percent of people in Virginia, and 17.8 percent of people in West Virginia reported living in poverty (**Exhibit 14**).

**Exhibit 14A: Percent of People in Poverty, Virginia & West Virginia Counties, 2017**



Source: U.S. Census Bureau, ACS estimates, 2018. Retrieved from:  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_DP03&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP03&prodType=table)

Poverty levels for Winchester City decreased from 15.6 percent in 2016 to 12.5 percent in 2018. Page County had reported poverty rates of 17.0 percent, higher than the Virginia average of 11.2 percent (**Exhibit 14**).

Hampshire, Hardy, and Mineral counties reported poverty rates higher than the US average. The poverty rates for all counties were lower than the West Virginia average (**Exhibit 14**).

**Exhibit 14B: Percent of People in Poverty by Race/Ethnicity, by County, 2017**

| <b>% of Families &amp; People Income Past 12 Months Below Poverty Level-By County and Ethnicity/Race</b> |                           |              |              |                           |
|--|---------------------------|--------------|--------------|---------------------------|
| <b>County/City</b>   | <b>Poverty Level 2017</b> |              |              |                           |
|  | <b>White</b>              | <b>Black</b> | <b>Asian</b> | <b>Hispanic or Latino</b> |
| <b>PSA</b>   |                           |              |              |                           |
| Clarke County, VA  | 8.6%                      | 17.7%        | 25.7%        | 18.2%                     |
| Frederick County, VA   | 5.7%                      | 5.2%         | 3.7%         | 11.4%                     |
| Hampshire County, WV   | 16.9%                     | 42.1%        | 0.0%         | 15.2%                     |
| Hardy County, WV   | 14.3%                     | 35.7%        | 0.0%         | 65.5%                     |
| Morgan County, WV  | 10.7%                     | 21.2%        | 33.8%        | 26.6%                     |
| Page County, VA  | 17.0%                     | 24.7%        | 12.6%        | 18.9%                     |
| Rappahannock County, VA  | 8.3%                      | 6.5%         | 13.6%        | 47.1%                     |
| Shenandoah County, VA  | 9.7%                      | 20.5%        | 36.1%        | 11.2%                     |
| Warren County, VA  | 9.3%                      | 19.9%        | 14.2%        | 5.0%                      |
| Winchester City, VA  | 11.3%                     | 13.0%        | 13.9%        | 25.8%                     |
| <b>SSA</b>   |                           |              |              |                           |
| Berkeley County, WV  | 11.5%                     | 23.9%        | 18.7%        | 15.0%                     |
| Grant County, WV   | 12.0%                     | 26.1%        | 0.0%         | 5.3%                      |
| Jefferson County, WV   | 9.0%                      | 14.8%        | 5.9%         | 14.7%                     |
| Mineral County, WV   | 14.1%                     | 36.3%        | 0.0%         | 24.5%                     |
| <b>VA</b>  | <b>8.9%</b>               | <b>19.4%</b> | <b>7.5%</b>  | <b>15.0%</b>              |
| <b>WV</b>  | <b>17.1%</b>              | <b>29.7%</b> | <b>15.1%</b> | <b>24.2%</b>              |
| <b>National</b>  | <b>12.0%</b>              | <b>25.2%</b> | <b>11.9%</b> | <b>22.2%</b>              |

Source: U.S. Census Bureau, ACS estimates, 2017. Retrieved from: <http://factfinder.census.gov>

Poverty rates across the community have been comparatively high for African American, Hispanic (or Latino), Asian residents. In counties served by the hospital, the poverty rates for Hispanic (or Latino) residents are the highest in Rappahannock County, the City of Winchester in Virginia, and Hardy and Mineral counties in West Virginia.

The Black population in Hampshire and Hardy counties reported higher poverty rates than the White population. The Asian population in Berkeley and Morgan counties in West Virginia, and Shenandoah County in Virginia also reported higher poverty rates than the White population, with Berkeley, Morgan and Shenandoah counties exceeding the national and state averages (**Exhibit 14B**).

## 2. Household Income

The Federal Poverty Level (FPL) is used by many public and private agencies to assess household needs for low-income assistance programs. In the WMC community in 2018, 10 of the 14 counties, including Winchester City, were above the state average for percent of households with incomes below \$25,000, an approximation of the federal poverty level (FPL) for a family of four. **Exhibit 15** indicates the percent of lower-income households in the community.

**Exhibit 15: Percent Lower-Income Households by County/City, 2018**

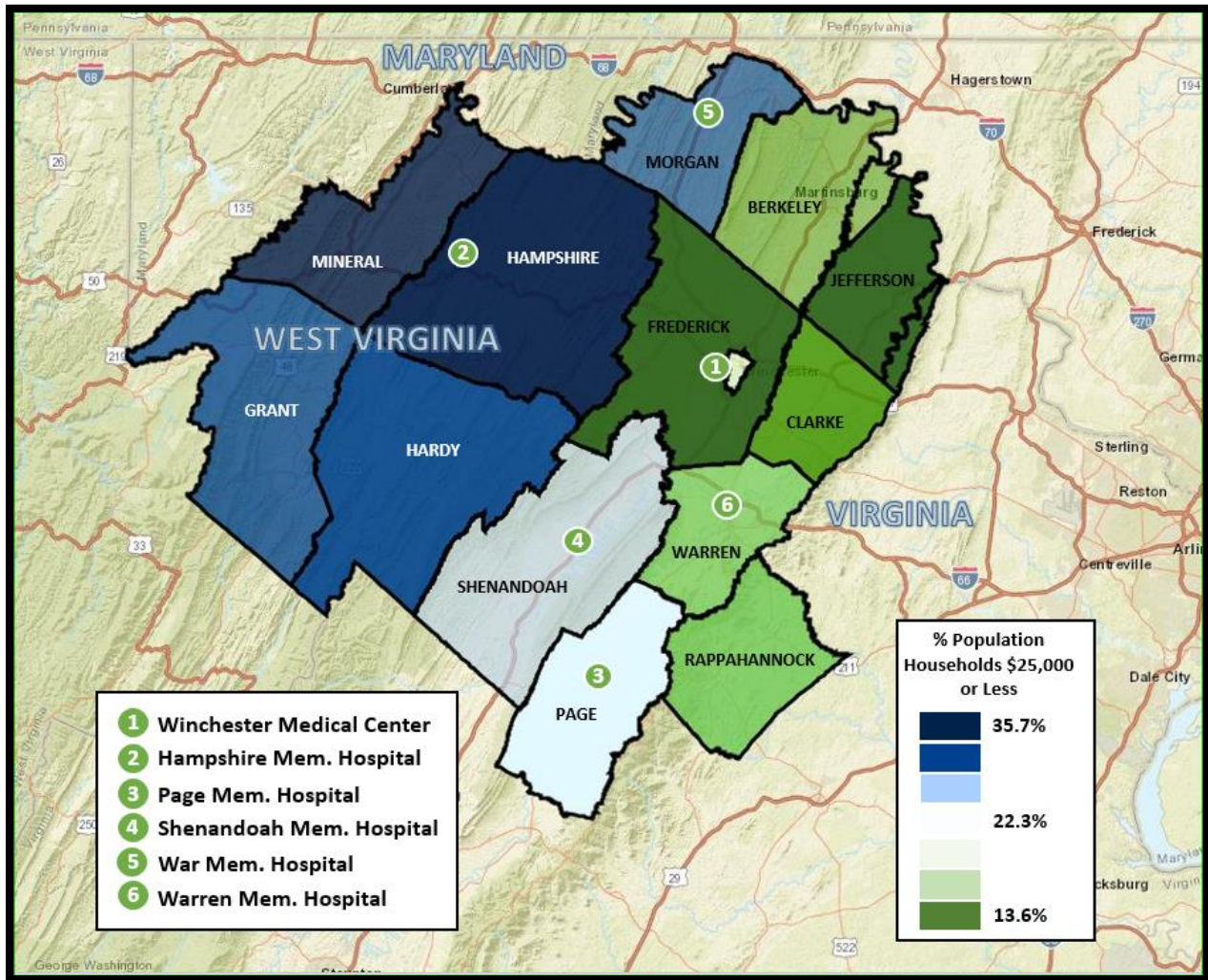
| 2018 DATA            |                         |   |
|----------------------|-------------------------|---|
| County/City          | Median Household Income | Percent of Households Less than \$25,000 in 2018 <sup>5</sup> |
| <b>PSA</b>           |                         |   |
| Clarke, VA           | \$76,436.00             | 16.5%   |
| Frederick, VA        | \$69,911.00             | 13.6%   |
| Hampshire, WV        | \$38,357.00             | 35.7%   |
| Hardy, WV            | \$38,222.00             | 31.5%   |
| Morgan, WV           | \$41,123.00             | 30.2%   |
| Page, VA             | \$47,579.00             | 22.3%   |
| Rappahannock, VA     | \$68,802.00             | 17.4%   |
| Shenandoah, VA       | \$52,930.00             | 22.8%   |
| Warren, VA           | \$63,771.00             | 18.0%   |
| Winchester, VA       | \$50,218.00             | 21.7%   |
| <b>SSA</b>           |                         |   |
| Berkeley, WV         | \$57,602.00             | 18.1%   |
| Grant, WV            | \$40,716.00             | 28.6%   |
| Jefferson, WV        | \$72,486.00             | 13.9%   |
| Mineral, WV          | \$37,840.00             | 32.7%   |
| <b>Virginia</b>      | <b>\$68,682.00</b>      | <b>16.9%</b>  |
| <b>West Virginia</b> | <b>\$43,555.00</b>      | <b>29.1%</b>  |
| <b>US</b>            | <b>\$58,100.00</b>      | <b>20.6%</b>  |

Source: Projections: ESRI Community Profiles for all PSA and SSA Counties

In Virginia, four of the seven counties, and Winchester City, reported percentages of households with income less than \$25,000 reported greater than the Virginia state average of 16.9 percent. In West Virginia, four of the seven counties reported percentages greater than the West Virginia state average of 29.1 percent (**Exhibit 15**).

<sup>5</sup> ESRI Community Profiles for all PSA and SSA Counties. Total is from 2018 Households by Income Category, Add <\$15,000 and \$15,000-\$24,000 lines

**Exhibit 16: Percent of Households with Incomes under \$25,000 by County/City, 2018**



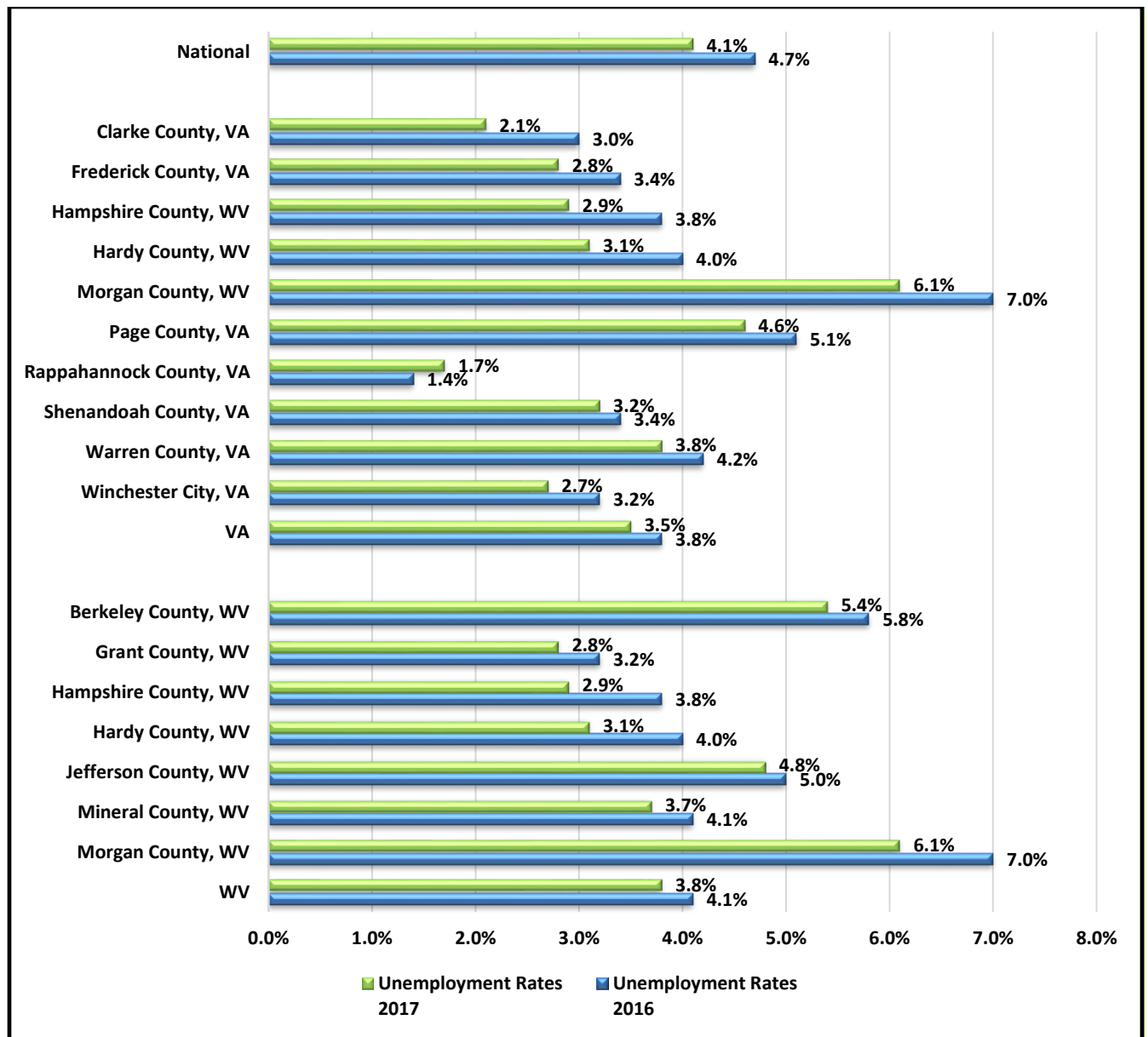
Source: ESRI 2019, Created by Planning and Business Development

Page and Shenandoah counties, and the City of Winchester reported median household income levels below the state and national averages. In West Virginia, Hardy, Morgan, Grant and Mineral counties also reported median household income levels below the state and national averages (**Exhibit 16**).

### 3. Unemployment Rates

Unemployment is problematic because many individuals receive health insurance coverage through their (or a family member's) employer. If unemployment rises, employer based health insurance can become less available. The national unemployment rates have decreased significantly from 9.2 percent to 3.9 percent from 2014 to 2017. **Exhibit 17A** shows unemployment rates for 2016-2017.

**Exhibit 17A: Unemployment Rates, Virginia, and West Virginia Counties, 2016 (in blue) and 2017 (in green)**



Source: <https://www.bls.gov/lau/#cntyaah><https://www.bls.gov/lau/#cntyaa>, West Virginia, and US show 2018 Unemployment rates



**Exhibit 17B: Unemployment Rates, 2016 and 2017**

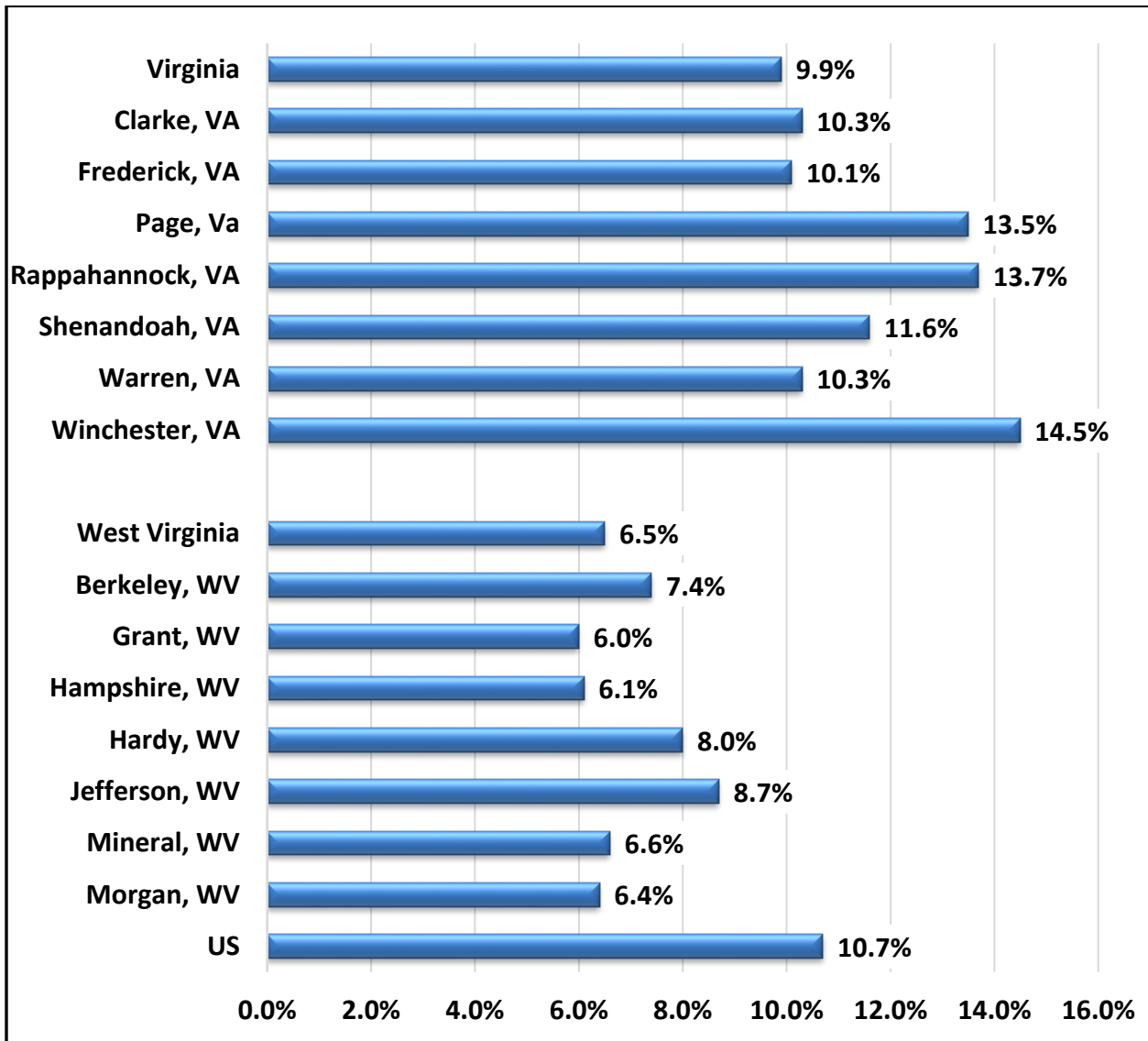
| <b>Unemployment Rates by County , State, National 2016 and 2017</b> |                                    |                                    |
|---|------------------------------------|------------------------------------|
| <b>County/City</b>  | <b>Unemployment Rates<br/>2016</b> | <b>Unemployment Rates<br/>2017</b> |
| <b>PSA</b>  |                                    |                                    |
| Clarke County, VA   | 3.0%                               | 2.1%                               |
| Frederick County, VA  | 3.4%                               | 2.8%                               |
| Hampshire County, WV  | 3.8%                               | 2.9%                               |
| Hardy County, WV  | 4.0%                               | 3.1%                               |
| Morgan County, WV   | 7.0%                               | 6.1%                               |
| Page County, VA   | 5.1%                               | 4.6%                               |
| Rappahannock County, VA   | 1.4%                               | 1.7%                               |
| Shenandoah County, VA   | 3.4%                               | 3.2%                               |
| Warren County, VA   | 4.2%                               | 3.8%                               |
| Winchester City, VA   | 3.2%                               | 2.7%                               |
| <b>SSA</b>  |                                    |                                    |
| Berkeley County, WV   | 5.8%                               | 5.4%                               |
| Grant County, WV  | 3.2%                               | 2.8%                               |
| Jefferson County, WV  | 5.0%                               | 4.8%                               |
| Mineral County, WV  | 4.1%                               | 3.7%                               |
| <b>VA</b>   | <b>3.8%</b>                        | <b>3.5%</b>                        |
| <b>WV</b>   | <b>4.1%</b>                        | <b>3.8%</b>                        |
| <b>National</b>   | <b>4.7%</b>                        | <b>4.1%</b>                        |

Source: US Census Bureau. Retrieved from: [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_16\\_5YR\\_DP03&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP03&prodType=table)

In 2017, Page County reported the highest unemployment rate among Virginia counties in the WMC community, and Berkeley County reported the highest unemployment rate for West Virginia counties. The unemployment rate for Page County decreased by 0.5 percent from previous year, but remains higher than Virginia and US averages (**Exhibit 17B**).

4. Insurance Status

**Exhibit 18A: Uninsured Population, 2017**



Source: Projections: ESRI Community Profiles for all counties in PSA and SSA, VA and WV State and National Profiles

- **Exhibit 18A** demonstrates that all Virginia counties had uninsured rates higher than the Commonwealth and national averages. Rappahannock County, and Winchester City have uninsured rates higher than the other Virginia counties.
- In West Virginia the uninsured rate decreased from 13.2% to 6.5% and in Virginia there was a decrease from 12.1% to 9.9% during the reporting period. Medicaid expansion was adopted for West Virginia counties.

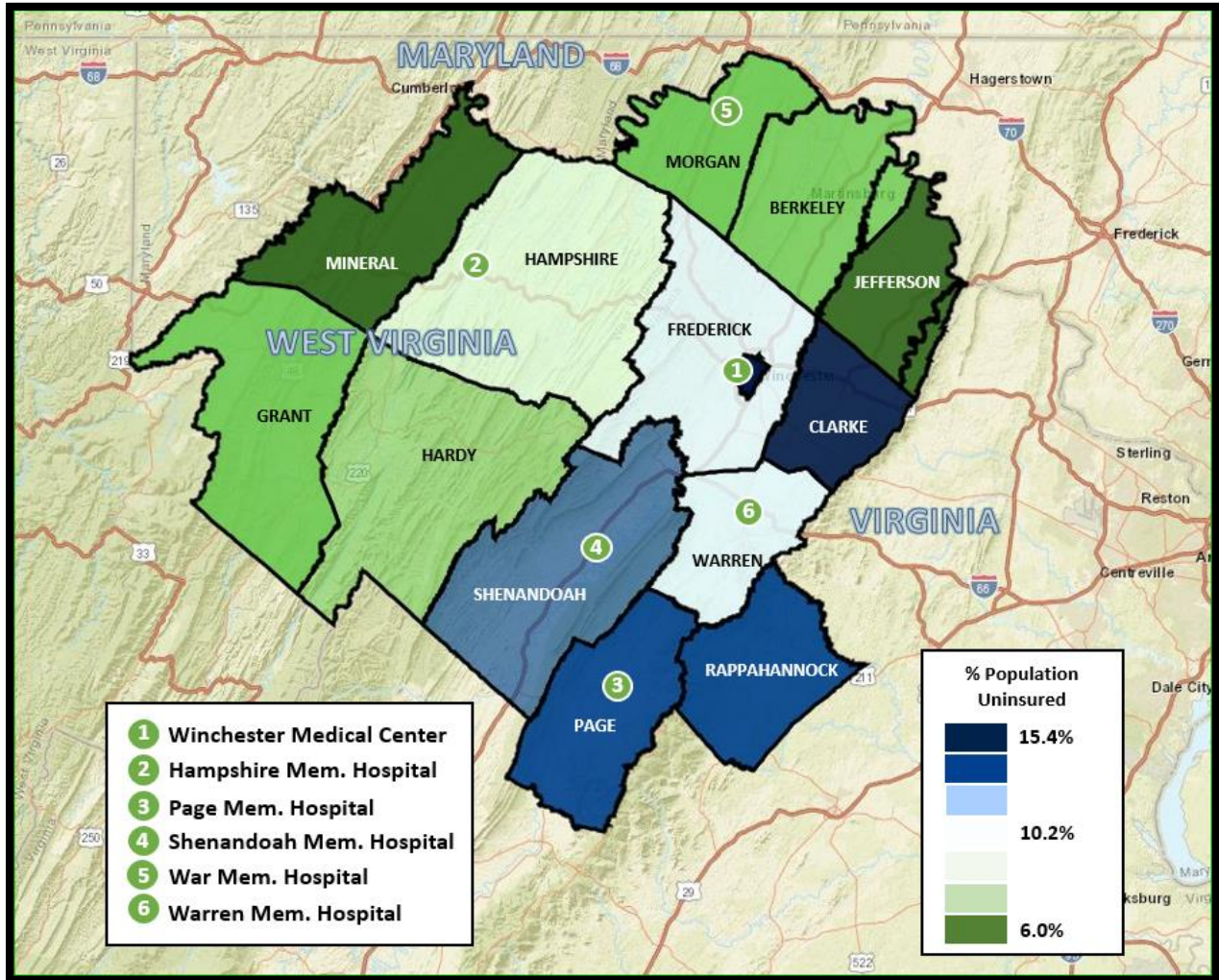
**Exhibit 18B: Uninsured Rates by County, State, and National, 2017**

| <b>Uninsured Rates by County , State, National, 2017</b> |                        |
|--|------------------------|
| <b>County/City</b>                                       | <b>% of Population</b> |
| <b>PSA</b>   |                        |
| Clarke County, VA  | 14.3%                  |
| Frederick County, VA                                     | 10.2%                  |
| Hampshire County, WV                                     | 8.7%                   |
| Hardy County, WV   | 8.0%                   |
| Morgan County, WV  | 7.4%                   |
| Page County, VA  | 13.5%                  |
| Rappahannock County, VA                                  | 13.7%                  |
| Shenandoah County, VA                                    | 11.6%                  |
| Warren County, VA  | 10.3%                  |
| Winchester City, VA                                      | 15.4%                  |
| <b>SSA</b>   |                        |
| Berkeley County, WV                                      | 7.7%                   |
| Grant County, WV   | 7.3%                   |
| Jefferson County, WV                                     | 6.9%                   |
| Mineral County, WV                                       | 6.0%                   |
| <b>VA</b>  | <b>9.9%</b>            |
| <b>WV</b>  | <b>6.5%</b>            |
| <b>National</b>  | <b>10.7%</b>           |

Source: Projections: ESRI Community Profiles for all counties in PSA and SSA, VA and WV State and National Profiles

Berkeley, Grant, and Jefferson counties in West Virginia had uninsured population percentages higher than the state average of 6.5% (**Exhibit 18B**).

**Exhibit 18C: Uninsured Populations by County, 2018**



Source: ESRI 2019, Created by Planning and Business Development

In the WMC community, the highest percent of uninsured people were located in Clarke County and the City of Winchester (**Exhibit 18C**).

## 5. Crime

**Exhibit 19: Violent and Property Crime Rates per 100,000 Population, 2016**

| Crime Rates 2016           |                  |               |                                       |  |              |                |                |               |                    |                     |            |
|----------------------------|------------------|---------------|---------------------------------------|--|--------------|----------------|----------------|---------------|--------------------|---------------------|------------|
| County/City                | Population       | Violent crime | Murder and non-negligent manslaughter | Rape (revised definition) <sup>1</sup> | Robbery      | Property crime | Burglary       | Larceny-theft | Aggravated assault | Motor vehicle theft | Arson      |
| <b>PSA</b>                 | <b>302,857</b>   |               |                                       |  |              |                |                |               |                    |                     |            |
| Clarke                     | 14,757           | 11            | 1                                     | 3                                      | 0            | 93             | 26             | 62            | 7                  | 5                   | 0          |
| Frederick                  | 87,411           | 8             | 2                                     | 33                                     | 8            | 1,005          | 161            | 782           | 25                 | 62                  | 2          |
| Hampshire                  | 25,339           |               |                                       |  |              |                |                |               |                    |                     |            |
| Hardy                      | 14,560           | 16            | 1                                     | 0                                      | 0            | 6              | 0              | 5             | 15                 | 1                   | 0          |
| Morgan                     | 18,473           | 50            | 0                                     | 5                                      | 0            | 70             | 20             | 48            | 45                 | 2                   | 0          |
| Page                       | 24,258           | 26            | 5                                     | 11                                     | 1            | 150            | 39             | 101           | 9                  | 10                  | 5          |
| Rappahannock               | 7,580            | 1             | -                                     | 1                                      | -            | 27             | 9              | 18            | -                  | -                   | -          |
| Shenandoah                 | 43,751           | 41            | 1                                     | 16                                     | -            | 229            | 61             | 163           | 24                 | 5                   | 1          |
| Warren                     | 39,560           | 20            | -                                     | 11                                     | -            | 221            | 24             | 179           | 9                  | 18                  | 1          |
| Winchester                 | 27,168           |               |                                       |  |              |                |                |               |                    |                     |            |
| <b>SSA</b>                 | <b>218,544</b>   |               |                                       |  |              |                |                |               |                    |                     |            |
| Berkeley                   | 118,793          | 78            | 2                                     | 14                                     | 16           | 952            | 248            | 67            | 46                 | 37                  | 5          |
| Grant                      | 12,489           | 4             | 0                                     | 0                                      | 0            | 10             | 3              | 7             | 4                  | 0                   | 0          |
| Jefferson                  | 58,584           | 46            | 3                                     | 8                                      | 6            | 474            | 168            | 291           | 29                 | 15                  | 3          |
| Mineral                    | 28,678           | 17            | 0                                     | 1                                      | 1            | 60             | 16             | 42            | 15                 | 2                   | 3          |
| <b>Virginia Total</b>      | <b>8,566,397</b> | <b>7,039</b>  | <b>159</b>                            | <b>1,416</b>                           | <b>1,616</b> | <b>68,748</b>  | <b>8,909</b>   | <b>55,989</b> | <b>3,848</b>       | <b>3,850</b>        | <b>352</b> |
| <b>West Virginia Total</b> | <b>1,895,717</b> | <b>302.0</b>  | <b>4.0</b>                            | <b>27.3</b>                            | <b>35.2</b>  | <b>235.5</b>   | <b>2,034.7</b> | <b>484.9</b>  | <b>1,447.3</b>     | <b>102.5</b>        | <b>N/A</b> |

Sources: Violent crime counts retrieved from the Federal Bureau of Investigation, Uniform Crime Reports, 2016. Projections: ESRI Detailed Age Profiles PSA and SSA All counties. Retrieved from: <https://ucr.fbi.gov/crime-in-the-u.s/2016/crime-in-the-u.s.-2016/tables/table-8/table-8-state-cuts/west-virginia.xls><sup>6</sup>

Frederick, Berkeley, and Jefferson counties had a higher number of offenses for property crimes, including burglary, compared to other counties within WMC's community. Offenses reported for larceny were also comparatively high in Frederick, and Jefferson counties. Frederick County had the highest number of reported offenses of motor vehicle thefts compared to other counties within the service area (**Exhibit 19**).

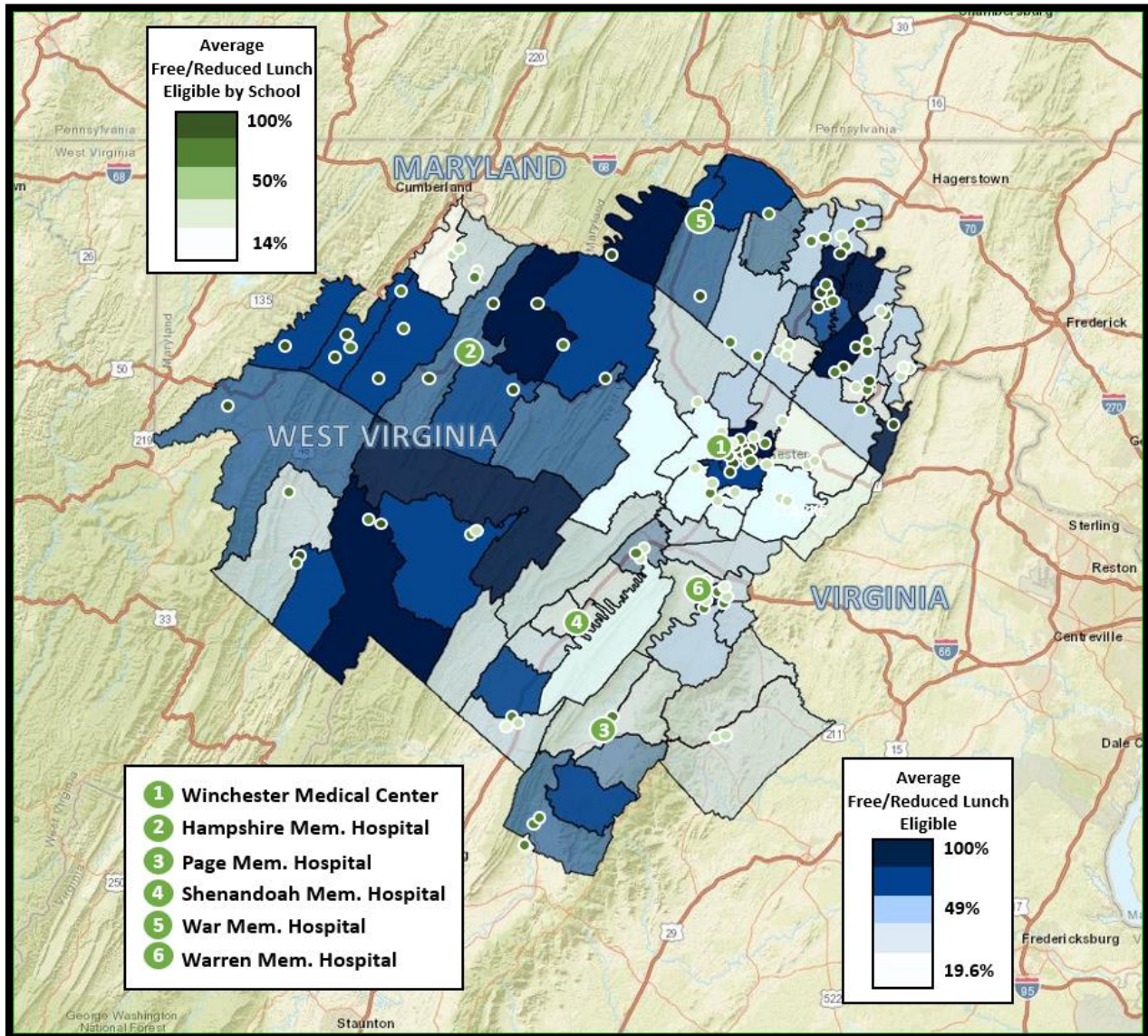
<sup>6</sup> 1. Rate per 100,000 inhabitants - Data shows the number of offenses reported within each county; 2. The figures shown in this column for the offense of rape were reported using the revised Uniform Crime Reporting (UCR) definition of rape. See the data declaration for further explanation; 3. The figures shown in this column for the offense of rape were reported using the legacy UCR definition of rape. See the data declaration for further explanation; 4. Data shown in this table do not reflect county totals but are the number of offenses reported by the sheriff's office or county police department.



## 6. Eligibility for the National School Lunch Program

Schools participating in the National School Lunch Program are eligible to receive financial assistance from the United States Department of Agriculture (USDA) to provide free or reduced-price meals to low-income students. Schools with 40 percent or more of their student bodies receiving this assistance are eligible for school-wide Title I funding, designed to ensure that students meet grade-level proficiency standards (**Exhibit 20**).

### Exhibit 20: Public School Students Eligible for Free or Reduced-Price Lunches, School Year 2018 - 2019



Source: ESRI 2019, Created by Planning and Business Development

In the WMC community, there were 59 schools in Virginia and 46 schools in West Virginia eligible for Title 1 funds (**Exhibit 20**).



**Exhibit 21A: Virginia Department of Education - Office of School Nutrition Programs  
2018-2019 Free and Reduced Eligibility Report - SFA**

| SFA Name and Number                                      | SNP Memb. | Free Eligible | Free % | Red. Eligible | Reduced % | Total F/R Eligible | Total F/R % |
|--|-----------|---------------|--------|---------------|-----------|--------------------|-------------|
| <b>022-Clarke County Public Schools</b>                  | 1,975     | 372           | 18.84% | 54            | 2.73%     | 426                | 21.57%      |
| <b>034-Frederick County Public Schools</b>               | 13,776    | 3,918         | 28.44% | 802           | 5.82%     | 4,720              | 34.26%      |
| <b>069-Page County Public Schools</b>                    | 3,351     | 1,585         | 47.30% | 284           | 8.48%     | 1,869              | 55.77%      |
| <b>082-Rockingham County Public Schools</b>              | 11,859    | 3,940         | 33.22% | 851           | 7.18%     | 4,791              | 40.40%      |
| <b>085-Shenandoah County Public Schools</b>              | 6,071     | 2,416         | 39.80% | 357           | 5.88%     | 2,773              | 45.68%      |
| <b>093-Warren County Public Schools (CEP - Note 1)</b>   | 5,276     | 2,135         | 40.47% | 296           | 5.61%     | 2,431              | 46.08%      |
| <b>132-Winchester City Public Schools (CEP - Note 1)</b> | 4,319     | 2,720         | 62.98% | 200           | 4.63%     | 2,920              | 67.61%      |

Source: Virginia Department of Education, Office of School of Nutrition Programs (SNP) Retrieved from: <http://doe.virginia.gov/support/nutrition/statistics/index.shtml><sup>7</sup>

The National School Lunch Program (NSLP) is a federally assisted meal program operating in public and non-profit private schools and residential child care institutions since 1946. The program provides nutritionally balanced, low-cost or free lunches to school children. School meals contribute to student learning success, while positively affecting their health and nutrition.

This highest percentage of students receiving free or reduced lunches for the WMC community were located in Page County and the City of Winchester, VA (**Exhibit 21A**).

<sup>7</sup> The free eligibility for those sites is calculated based on USDA guidance.

**Exhibit 21B: West Virginia Department of Education  
County Percent Need Data for Claim Date October 1, 2015**

| County                                 | Number of Students | Free Eligible | Free % | Reduced Lunch Eligible | Reduced Lunch % | Total Free / Reduced | Total % Free / Reduced Lunch |
|--|--------------------|---------------|--------|------------------------|-----------------|----------------------|------------------------------|
| <b>Berkeley County Public Schools</b>  | 18,539             | 8,980         | 48.44% | 1,054                  | 5.69%           | 10,034               | 54.12%                       |
| <b>Grant County Public Schools</b>     | 1,842              | 1,004         | 54.51% | 96                     | 5.21%           | 1,100                | 59.72%                       |
| <b>Hampshire County Public Schools</b> | 3,414              | 1,888         | 55.30% | 241                    | 7.06%           | 2,129                | 62.36%                       |
| <b>Hardy County Public Schools</b>     | 2,491              | 1,592         | 63.91% | 111                    | 4.46%           | 1,703                | 68.38%                       |
| <b>Jefferson County Public Schools</b> | 9,321              | 3,914         | 41.99% | 295                    | 3.16%           | 4,209                | 45.15%                       |
| <b>Mineral County Public Schools</b>   | 4,439              | 2,184         | 49.20% | 337                    | 7.59%           | 2,521                | 56.80%                       |
| <b>Morgan County Public Schools</b>    | 2,533              | 1,776         | 70.11% | 0                      | 0.00%           | 1,776                | 70.11%                       |

Source: West Virginia Department of Education, Retrieved from: [https://wvde.state.wv.us/ocn-download/PlaybookInfo/DataStatistics/Percent\\_Needy\\_2016\\_CEO\\_Ungrouped.pdf](https://wvde.state.wv.us/ocn-download/PlaybookInfo/DataStatistics/Percent_Needy_2016_CEO_Ungrouped.pdf)

The National School Lunch Program state allocation for Virginia was \$593,545. West Virginia was \$213,153. In the WMC community, there were 57 schools in Virginia and 86 schools in West Virginia that were eligible for Title 1 funds (**Exhibits 21A and 21B**).

## 7. Changing Health Care

### **Affordable Care Act**

The Patient Protection and Affordable Care Act (Affordable Care Act) was enacted March 23, 2010. The Affordable Care Act actually refers to two separate pieces of legislation — the Patient Protection and Affordable Care Act (P.L. 111-148) and the Health Care and Education Reconciliation Act of 2010 (P.L. 111-152)—that together expand Medicaid coverage to millions of low-income Americans and makes numerous improvements to both Medicaid and the Children’s Health Insurance Program (CHIP).

After the new law was enacted in March 2010, Centers for Medicare & Medicaid Services (CMS) worked with state partners to identify key implementation priorities and provide the guidance needed to prepare for the significant changes to Medicaid and CHIP that took effect on January 1, 2014. In particular, CMS provided several forms of guidance and federal support for state efforts to develop new or upgrade existing eligibility systems.

In March 2012, CMS released two final rules defining the eligibility and enrollment policies needed to achieve a seamless system of coverage for individuals who became eligible for Medicaid in 2014, as well as eligibility and enrollment for the new Affordable Insurance Exchanges. The final rules establish the framework for States’ implementation of the eligibility expansion going forward.

### **Medicaid Expansion**

Virginia’s Medicaid program provides payment for health care for people in particular categories. Currently, Medicaid in Virginia typically covers: pregnant women with household incomes up to 133% of the Federal Poverty Level (FPL), children (up to age 18) up to 133% of FPL, older adults up to 80% of FPL, some people with disabilities up to 80% of FPL, and parents up to 24% of FPL. The percent of 133% of FPL translates to \$14,856 per year for individuals or \$30,657 per year for families of four.

- In June 2012, the U.S. Supreme Court upheld the constitutionality of all the major provisions of the Patient Protection and Affordable Care Act (ACA), but provided the states the option of whether or not to expand Medicaid eligibility up to 133% (plus a 5% income disregard) of federal poverty. Virginia expanded Medicaid as of January 1, 2019<sup>8</sup>.
- In Virginia, Medicaid is primarily available to children in low-income families, pregnant women, low-income elderly persons, individuals with disabilities, and parents who meet specific income thresholds<sup>9</sup> Adults without children or disabilities are ineligible.
- It has been estimated that over 400,000 Virginian will gain coverage. Across the United States, uninsured rates have fallen most in states that decided to expand Medicaid.<sup>10</sup>

---

<sup>8</sup> Health Insurance.org, November 2, 2018. Retrieved 2019, from: <https://www.healthinsurance.org/virginia-medicaid/>

<sup>9</sup> DMAS.

<sup>10</sup> See: <http://hrms.urban.org/briefs/Increase-in-Medicaid-under-the-ACA-reduces-uninsurance.html>

- Costs of the expansion are 100% federally funded for 2014 through 2016, decreasing incrementally to 90% for 2020 and subsequent years for all newly eligible enrollees. After 2016, the state share increases gradually, and is capped at 10% by 2020.
- The federal match for children/pregnant women would increase from 65% to 87% between 2015 and 2019.
- When the health care law was passed, it required states to provide Medicaid coverage for all adults 18 to 65 with incomes up to 133% (effectively 138%) of the federal poverty level, regardless of their age, family status, or health.
- The law also provides premium tax credits for people with incomes between 100% and 400% of the federal poverty level to buy private insurance plans in the Health Insurance Marketplace.
- Valley Health has partnered with local agencies and other resources to help individuals access benefits that they are qualified for in the communities we serve.

## Local Health Status and Access Indicators

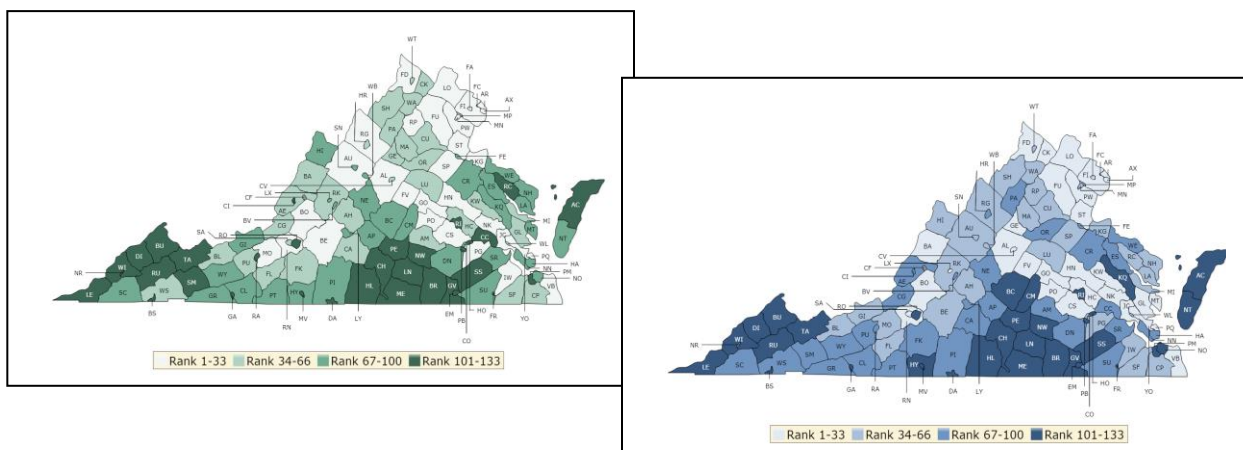
This section examines health status and access to care data for the WMC community. Data sources include: (1) *County Health Rankings*; (2) Virginia Department of Health; and (3) Behavioral Risk Factor Surveillance System. Indicators also were compared to Healthy People 2020 goals.

### 1. County Health Rankings

*County Health Rankings*, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, examines a variety of health status indicators and ranks each county/city within each commonwealth or state in terms of “health factors” and “health outcomes.” These health factors and outcomes are composite measures based on several variables grouped into the following categories: length of life (years of potential life lost before age 75), quality of life (percent of people reporting poor or fair health and the number of physically and mentally unhealthy days within the last 30 days), health behaviors (tobacco use, diet & exercise, alcohol & drug use, sexual activity), clinical care (access to care, quality of care), social and economic factors (education, employment, income, family & social support, community safety), and physical environment (air & water, housing & transit). *County Health Rankings* is updated annually. *County Health Rankings* relies on data from 2011 to 2017.

**Exhibit 22** illustrates each county’s or city’s ranking for each composite category in 2019. Rankings indicate how each county/city in Virginia ranked compared to the 133 counties in the Commonwealth, and how each county in West Virginia ranked compared to the 55 counties in West Virginia. A rank of 1 indicates the best county/city in the state. Indicators are shaded based on the county’s percentile for the state or commonwealth ranking. For example, Page County compared unfavorably to other Virginia counties for Clinical Care; with a rank of 132 out of 133 counties and placing in the bottom quartile of all Virginia counties.

#### Exhibit 22A: County Rank among 133 Virginia Counties, 2019





**Exhibit 22B: County Rank among 133 Virginia Counties, 2019**

| Indicator Category                         | Clarke |      | Frederick |      | Page |      | Rappahannock |      | Shenandoah |      | Warren |      | Winchester City |      |
|--|--------|------|-----------|------|------|------|--------------|------|------------|------|--------|------|-----------------|------|
|  | 2016   | 2019 | 2016      | 2019 | 2016 | 2019 | 2016         | 2019 | 2016       | 2019 | 2016   | 2019 | 2016            | 2019 |
| <b>Health Outcomes</b>                     | 28     | 36↓  | 22        | 21   | 66   | 55   | 13           | 12   | 33         | 38↓  | 37     | 46↓  | 37              | 61↓  |
| <b>Length of Life (50%)</b>                | 39     | 50↓  | 28        | 26   | 89   | 68   | 15           | 10   | 34         | 33   | 56     | 63↓  | 56              | 53   |
| <b>Quality of Life (50%)</b>               | 22     | 27↓  | 21        | 23↓  | 45   | 47↓  | 16           | 18↓  | 38         | 48↓  | 26     | 35↓  | 26              | 72↓  |
| <b>Health Factors<sup>11</sup></b>         | 22     | 30↓  | 35        | 22   | 101  | 94   | 31           | 37↓  | 44         | 53↓  | 57     | 51   | 57              | 46   |
| <b>Health Behaviors (30%)</b>              | 20     | 14↓  | 36        | 13   | 62   | 53   | 21           | 31↓  | 23         | 50↓  | 48     | 67↓  | 48              | 49↓  |
| <b>Clinical Care (20%)</b>                 | 39     | 96↓  | 81        | 84↓  | 125  | 132↓ | 114          | 105  | 120        | 94   | 110    | 71   | 110             | 33   |
| <b>Social &amp; Economic Factors (40%)</b> | 9      | 24↓  | 25        | 18   | 95   | 95   | 28           | 33↓  | 44         | 39   | 48     | 45   | 48              | 56↓  |
| <b>Physical Environment (10%)</b>          | 128    | 79   | 77        | 48   | 121  | 11   | 20           | 7    | 74         | 101↓ | 71     | 16   | 71              | 59   |

Source: 2019 County Health Ranking

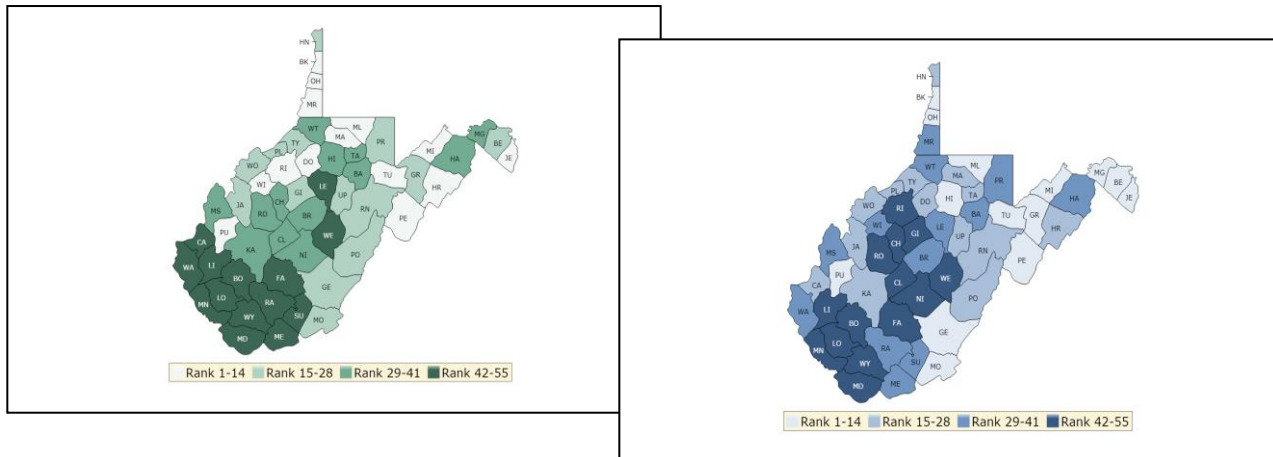
| VA Health Outcomes Key |  |
|------------------------|--|
| Rank 1-33              |  |
| Rank 34-66             |  |
| Rank 67-100            |  |
| Rank 101-133           |  |

| VA Health Factors Key |  |
|-----------------------|--|
| Rank 1-33             |  |
| Rank 34-66            |  |
| Rank 67-100           |  |
| Rank 101-133          |  |

<sup>11</sup> Health Factors is a weighted average based on health behaviors, clinical care, social & economic factors and physical environment.

**Exhibits 23A and 23B** provide data for each underlying indicator of the composite categories in the County Health Rankings.<sup>12</sup> The *County Health Rankings* methodology provides a comparison of counties within a state or commonwealth to one another. It also is important to analyze how these same indicators compare to the national average; this information is illustrated in Exhibits 24A-E (for West Virginia). For example, Hampshire, Hardy and Jefferson counties Clinical Care physical environment was more than 75 percent worse than the U.S. average, and the cell in the table for the county was shaded to reflect this. Cells in the tables below are shaded if the indicator for a county/city in the WMC community exceeded the national average for that indicator by more than ten percent.

**Exhibit 23A: County Rank among 55 West Virginia Counties, 2019**



<sup>12</sup> *County Health Rankings* provides details about what each indicator measures, how it is defined, and data sources at [http://www.countyhealthrankings.org/sites/default/files/resources/2013Measures\\_datasources\\_years.pdf](http://www.countyhealthrankings.org/sites/default/files/resources/2013Measures_datasources_years.pdf)

**Exhibit 23B: County Rank among 55 West Virginia Counties, 2019**

| Indicator Category                         | Berkeley |      | Grant |      | Hampshire |      | Hardy |      | Jefferson |      | Mineral |      | Morgan |      |
|--|----------|------|-------|------|-----------|------|-------|------|-----------|------|---------|------|--------|------|
|  | 2016     | 2019 | 2016  | 2019 | 2016      | 2019 | 2016  | 2019 | 2016      | 2019 | 2016    | 2019 | 2016   | 2019 |
| <b>Health Outcomes</b>                     | 14       | 25↓  | 11    | 21↓  | 26        | 32↓  | 19    | 13   | 1         | 1    | 13      | 10   | 13     | 35↓  |
| <b>Length of Life (50%)</b>                | 22       | 30↓  | 6     | 5    | 28        | 35↓  | 15    | 15   | 3         | 3    | 14      | 10   | 14     | 38↓  |
| <b>Quality of Life (50%)</b>               | 13       | 18↓  | 27    | 36↓  | 17        | 21↓  | 23    | 12   | 2         | 12↓  | 19      | 20↓  | 19     | 24↓  |
| <b>Health Factors<sup>13</sup></b>         | 20       | 9    | 22    | 11   | 43        | 32   | 40    | 22   | 2         | 3↓   | 5       | 6↓   | 5      | 5    |
| <b>Health Behaviors (30%)</b>              | 43       | 34   | 21    | 20   | 36        | 24   | 41    | 12   | 3         | 12↓  | 2       | 11↓  | 2      | 3↓   |
| <b>Clinical Care (20%)</b>                 | 8        | 13↓  | 25    | 25   | 51        | 46   | 35    | 49↓  | 15        | 49↓  | 36      | 9    | 36     | 32   |
| <b>Social &amp; Economic Factors (40%)</b> | 8        | 4    | 24    | 15   | 41        | 26   | 38    | 22   | 1         | 22↓  | 3       | 8↓   | 3      | 5↓   |
| <b>Physical Environment (10%)</b>          | 46       | 27   | 5     | 2    | 15        | 24↓  | 11    | 6    | 42        | 6    | 38      | 5    | 38     | 15   |

Source: 2019 County Health Ranking  
 ↓ = If ranking has changed from previous 2016 assessment.

| WV Health Outcomes Key |  |
|------------------------|--|
| Rank 1-14              |  |
| Rank 15-28             |  |
| Rank 19-41             |  |
| Rank 42-55             |  |

| WV Health Factors Key |  |
|-----------------------|--|
| Rank 1-14             |  |
| Rank 15-28            |  |
| Rank 19-41            |  |
| Rank 42-55            |  |

<sup>13</sup> Health Factors is a weighted average based on health behaviors, clinical care, social & economic factors and physical environment.

**Exhibit 24A: County/City Data Compared to U.S. Average, Virginia Counties, 2019**

| 2019   | Clarke | Frederick | Page | Rappahannock | Shenandoah | Warren | Winchester City | Virginia |
|--|--------|-----------|------|--------------|------------|--------|-----------------|----------|
| <b>Health Outcomes</b>                                   | 36     | 21        | 55   | 12           | 38         | 46     | 61              | ~        |
| <b>Length of Life</b>                                    | 50     | 26        | 68   | 10           | 33         | 63     | 53              | ~        |
| Premature Death<br>(Years of Potential Life Lost Rate)   | 7577   | 6175      | 8429 | 4870         | 6522       | 8045   | 7634            | 6360     |
| <b>Quality of Life</b>                                   | 27     | 23        | 47   | 18           | 48         | 35     | 72              | ~        |
| Poor or Fair Health<br>(Percent Fair/Poor)               | 14     | 12        | 15   | 13           | 15         | 15     | 18              | 16       |
| Poor Physical Health Days<br>(Physically Unhealthy Days) | 3.3    | 3.3       | 3.6  | 3.2          | 3.4        | 3.3    | 3.8             | 3.5      |
| Poor Mental Health Days<br>(Mentally Unhealthy Days)     | 3.6    | 3.4       | 3.7  | 3.4          | 3.7        | 3.6    | 3.8             | 3.5      |
| Low Birthweight<br>(Percent LBW)                         | 6%     | 7%        | 7%   | 6%           | 7%         | 7%     | 8%              | 8%       |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Higher than state average</b>  |   |

**Exhibit 24B: County/City Data Compared to U.S. Average, Virginia Counties, 2019**

| 2019   | Clarke    | Frederick | Page      | Rappahannock | Shenandoah | Warren    | Winchester City | Virginia |
|--|-----------|-----------|-----------|--------------|------------|-----------|-----------------|----------|
| <b>Health Factors</b>                                  | <b>30</b> | <b>22</b> | <b>94</b> | <b>37</b>    | <b>53</b>  | <b>51</b> | <b>46</b>       | ~        |
| <b>Health Behaviors</b>                                | <b>14</b> | <b>13</b> | <b>53</b> | <b>31</b>    | <b>50</b>  | <b>67</b> | <b>49</b>       | ~        |
| Adult Smoking (Percent Smokers)                        | 15%       | 14%       | 17%       | 14%          | 16%        | 17%       | 18%             | 15%      |
| Adult Obesity (Percent Obese)                          | 27%       | 30%       | 28%       | 30%          | 31%        | 28%       | 30%             | 29%      |
| Food Environment Index                                 | 9.2       | 9.4       | 8.6       | 7.4          | 9          | 8         | 8.5             | 8.9      |
| Physical Inactivity (Percent Physically Inactive)      | 21%       | 19%       | 27%       | 25%          | 27%        | 27%       | 22%             | 22%      |
| Access to Exercise Opportunities (Percent with Access) | 75%       | 83%       | 32%       | 48%          | 74%        | 80%       | 100%            | 82%      |
| Excessive Drinking (Percent)                           | 17%       | 19%       | 16%       | 16%          | 18%        | 20%       | 17%             | 17%      |
| Alcohol-impaired Driving Deaths (Percent)              | 14%       | 20%       | 31%       | 33%          | 18%        | 37%       | 0%              | 31%      |
| Sexually Transmitted Infections (Chlamydia Rate)       | 215.8     | 234.4     | 96.9      | 230.4        | 194.5      | 294.2     | 491.1           | 473.2    |
| Teen Births  | 11        | 22        | 32        | 14           | 27         | 28        | 29              | 19       |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Higher than state average</b>  |   |



**Exhibit 24C: County/City Data Compared to U.S. Average, Virginia Counties, 2019**

| 2019                              | Clarke    | Frederick | Page       | Rappahannock | Shenandoah | Warren    | Winchester City | Virginia |
|-----------------------------------|-----------|-----------|------------|--------------|------------|-----------|-----------------|----------|
| <b>Clinical Care</b>              | <b>96</b> | <b>84</b> | <b>132</b> | <b>105</b>   | <b>94</b>  | <b>71</b> | <b>33</b>       | ~        |
| Uninsured (Percent)               | 10%       | 10%       | 14%        | 14%          | 12%        | 10%       | 14%             | 10%      |
| Primary Care Physicians (Ratio)   | 2,050:1   | 2,350:1   | 2,960:1    | 3,690:1      | 2,270:1    | 1,860:1   | 372:1           | 1,310:1  |
| Dentists (Ratio)                  | 2,900:1   | 7,860:1   | 5,930:1    | 3,660:1      | 3,330:1    | 3,960:1   | 548:1           | 1,470:1  |
| Mental Health Providers (Ratio)   | 1,610:1   | 2,060:1   | 2,970:1    | 1,220:1      | 2,060:1    | 1,200:1   | 195:1           | 628:1    |
| Preventable Hospital Stays (Rate) | 6,681     | 6,013     | 5,439      | 3,207        | 5,166      | 5,279     | 5,610           | 4,454    |
| Mammography Screening (Percent)   | 42%       | 42%       | 33%        | 30%          | 40%        | 38%       | 43%             | 43%      |
| Flu vaccinations                  | 51%       | 51%       | 28%        | 46%          | 47%        | 52%       | 52%             | 48%      |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Lower than state average</b>   |   |
| <b>Higher than state average</b>  |   |

**Exhibit 24D: County/City Data Compared to U.S. Average, Virginia Counties, 2019**

| 2019                                     | Clarke    | Frederick | Page      | Rappahannock | Shenandoah | Warren    | Winchester City | Virginia |
|--|-----------|-----------|-----------|--------------|------------|-----------|-----------------|----------|
| <b>Social and Economic Factors</b>       | <b>24</b> | <b>18</b> | <b>95</b> | <b>33</b>    | <b>39</b>  | <b>45</b> | <b>56</b>       | ~        |
| High School Graduation (Graduation Rate) | 98%       | 95%       | 97%       | 96%          | 96%        | 94%       | 93%             | 98%      |
| Some College (Completion Rate)           | 59%       | 61%       | 45%       | 61%          | 54%        | 51%       | 60%             | 59%      |
| Unemployment (Rate)                      | 3.40%     | 3.20%     | 5.30%     | 3.50%        | 3.50%      | 3.70%     | 3.60%           | 3.40%    |
| Children in Poverty (Percent in Poverty) | 8%        | 9%        | 22%       | 15%          | 14%        | 13%       | 20%             | 8%       |
| Income Inequality (Ratio)                | 5         | 3.6       | 4.1       | 4.6          | 4.1        | 4         | 4.2             | 5        |
| Children in single-parent households     | 33%       | 24%       | 38%       | 31%          | 25%        | 34%       | 41%             | 33%      |
| Social Associations (Association Rate)   | 18.1      | 9.2       | 10.6      | 12.2         | 15.5       | 13.5      | 18.9            | 18.1     |
| Violent Crime (Rate)                     | 73        | 112       | 154       | 41           | 178        | 138       | 272             | 73       |
| Injury Deaths (Rate)                     | 90        | 75        | 84        | 76           | 87         | 83        | 84              | 90       |

Source: County Health Rankings, 2019

| Key                        |   |
|----------------------------|---|
| Unreliable or missing data | ~ |
| Higher than state average  |   |

**Exhibit 24E: County/City Data Compared to U.S. Average, Virginia Counties, 2019**

| 2019   | Clarke    | Frederick | Page      | Rappahannock | Shenandoah | Warren    | Winchester City | Virginia |
|--|-----------|-----------|-----------|--------------|------------|-----------|-----------------|----------|
| <b>Physical Environment</b>                              | <b>79</b> | <b>48</b> | <b>11</b> | <b>7</b>     | <b>101</b> | <b>16</b> | <b>59</b>       | ~        |
| Air Pollution - Particulate Matter (Average Daily PM2.5) | 9         | 9.1       | 8.4       | 8.3          | 8.8        | 8.7       | 9               | 8.9      |
| Drinking Water Violations (Presence of Violations)       | No        | No        | No        | No           | Yes        | No        | N/A             | N/A      |
| Severe Housing Problems (Percent)                        | 18%       | 12%       | 13%       | 15%          | 14%        | 12%       | 21%             | 15%      |
| Driving Alone to Work (Percent Driving Alone)            | 79%       | 83%       | 78%       | 73%          | 81%        | 75%       | 67%             | 77%      |
| Long Commute-Driving Alone (Percent)                     | 51%       | 36%       | 45%       | 52%          | 41%        | 56%       | 31%             | 39%      |

Source: County Health Rankings, 2019

| Key                        |   |
|----------------------------|---|
| Unreliable or missing data | ~ |
| Higher than state average  |   |

**Exhibit 25A: County/City Data Compared to U.S. Average, West Virginia Counties, 2019**

| 2019   | Berkeley  | Grant     | Hampshire | Hardy     | Jefferson | Mineral   | Morgan    | West Virginia |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|---------------|
| <b>Health Outcomes</b>                                   | <b>25</b> | <b>21</b> | <b>32</b> | <b>13</b> | <b>1</b>  | <b>10</b> | <b>38</b> | ~             |
| <b>Length of Life</b>                                    | <b>30</b> | <b>5</b>  | <b>35</b> | <b>15</b> | <b>3</b>  | <b>10</b> | <b>38</b> | ~             |
| Premature Death<br>(Years of Potential Life Lost Rate)   | 9,647     | 7,372     | 10,535    | 8,792     | 7,197     | 7,984     | 11,410    | 10,473        |
| <b>Quality of Life</b>                                   | <b>18</b> | <b>36</b> | <b>21</b> | <b>12</b> | <b>1</b>  | <b>20</b> | <b>24</b> | ~             |
| Poor or Fair Health<br>(Percent Fair/Poor)               | 24%       | 22%       | 22%       | 22%       | 21%       | 18%       | 23%       | 20%           |
| Poor Physical Health Days<br>(Physically Unhealthy Days) | 5.2       | 4.9       | 5.2       | 4.9       | 4.8       | 4.4       | 5.2       | 5             |
| Poor Mental Health Days<br>(Mentally Unhealthy Days)     | 5.2       | 5.2       | 5.1       | 5.1       | 4.9       | 4.5       | 4.9       | 4.9           |
| Low Birthweight<br>(Percent LBW)                         | 9%        | 8%        | 10%       | 9%        | 9%        | 8%        | 8%        | 10%           |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Higher than state average</b>  |   |

**Exhibit 25B: County/City Data Compared to U.S. Average, West Virginia Counties, 2019**

| 2019  | Berkeley | Grant | Hampshire | Hardy | Jefferson | Mineral | Morgan | West Virginia |
|---|----------|-------|-----------|-------|-----------|---------|--------|---------------|
| <b>Health Factors</b>                                     | 9        | 11    | 32        | 22    | 3         | 6       | 5      | ~             |
| <b>Health Behaviors</b>                                   | 34       | 20    | 24        | 12    | 2         | 11      | 3      |               |
| Adult Smoking (Percent Smokers)                           | 23%      | 21%   | 22%       | 20%   | 19%       | 22%     | 20%    | 25%           |
| Adult Obesity (Percent Obese)                             | 35%      | 37%   | 38%       | 37%   | 35%       | 34%     | 38%    | 36%           |
| Food Environment Index                                    | 8        | 7.7   | 6.8       | 7.3   | 8.9       | 7.7     | 8.1    | 6.9           |
| Physical Inactivity<br>(Percent Physically Inactive)      | 28%      | 30%   | 26%       | 29%   | 22%       | 26%     | 25%    | 28%           |
| Access to Exercise Opportunities<br>(Percent with Access) | 44%      | 37%   | 48%       | 67%   | 55%       | 62%     | 63%    | 60%           |
| Excessive Drinking (Percent)                              | 12%      | 13%   | 11%       | 11%   | 11%       | 16%     | 13%    | 12%           |
| Alcohol-impaired Driving Deaths<br>(Percent)              | 37%      | 29%   | 32%       | 35%   | 35%       | 20%     | 11%    | 31%           |
| Sexually Transmitted Infections<br>(Chlamydia Rate)       | 277.9    | 144.5 | 81.4      | 151.6 | 263.8     | 189.4   | 97.0   | 261.4         |
| Teen Births   | 36       | 31    | 46        | 40    | 37        | 19      | 32     | 23            |

Source: County Health Rankings, 2019

| Key                        |   |
|----------------------------|---|
| Unreliable or missing data | ~ |
| Higher than state average  |   |



**Exhibit 25C: County/City Data Compared to U.S. Average, West Virginia Counties, 2019**

| 2019                              | Berkeley | Grant     | Hampshire | Hardy     | Jefferson | Mineral  | Morgan    | West Virginia |
|-----------------------------------|----------|-----------|-----------|-----------|-----------|----------|-----------|---------------|
| <b>Clinical Care</b>              | <b>8</b> | <b>25</b> | <b>51</b> | <b>35</b> | <b>15</b> | <b>9</b> | <b>36</b> | ~             |
| Uninsured (Percent)               | 6%       | 7%        | 9%        | 8%        | 6%        | 6%       | 7%        | 7%            |
| Primary Care Physicians (Ratio)   | 2,230:1  | 1,960:1   | 4,660:1   | 4,630:1   | 1,880:1   | 3,050:1  | 1,960:1   | 1,270:1       |
| Dentists (Ratio)                  | 1,920:1  | 2,330:1   | 2,930:1   | 1,960:1   | 3,130:1   | 3,020:1  | 3,540:1   | 1,860:1       |
| Mental Health Providers (Ratio)   | 618:1    | 1,300:1   | 1,680:1   | 2,290:1   | 1,480:1   | 1,240:1  | 1,970:1   | 832:1         |
| Preventable Hospital Stays (Rate) | 5,194    | 6,071     | 4,815     | 5,984     | 4,060     | 4,620    | 3,641     | 5,683         |
| Mammography Screening (Percent)   | 36%      | 44%       | 39%       | 39%       | 33%       | 49%      | 33%       | 38%           |
| Flu Vaccinations                  | 46%      | 38%       | 38%       | 30%       | 39%       | 43%      | 42%       | 41%           |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Lower than state average</b>   |   |
| <b>Higher than state average</b>  |   |

**Exhibit 25D: County/City Data Compared to U.S. Average, West Virginia Counties, 2019**

| 2019                                     | Berkeley | Grant     | Hampshire | Hardy     | Jefferson | Mineral  | Morgan   | West Virginia |
|--|----------|-----------|-----------|-----------|-----------|----------|----------|---------------|
| <b>Social and Economic Factors</b>       | <b>4</b> | <b>15</b> | <b>26</b> | <b>22</b> | <b>1</b>  | <b>8</b> | <b>5</b> | ~             |
| High School Graduation (Graduation Rate) | 89%      | 94%       | 95%       | 84%       | 93%       | 89%      | 97%      | 94%           |
| Some College (Completion Rate)           | 55%      | 57%       | 45%       | 41%       | 46%       | 62%      | 51%      | 52%           |
| Unemployment (Rate)                      | 5.20%    | 3.70%     | 5.60%     | 3.90%     | 5.00%     | 3.10%    | 5.40%    | 4.00%         |
| Children in Poverty (Percent in Poverty) | 24%      | 17%       | 22%       | 26%       | 22%       | 12%      | 22%      | 19%           |
| Income Inequality (Ratio)                | 4.9      | 3.9       | 4.5       | 4.2       | 4         | 4.2      | 4.2      | 3.9           |
| Children in single-parent households     | 34%      | 36%       | 26%       | 39%       | 39%       | 24%      | 34%      | 18%           |
| Social Associations (Association Rate)   | 12.9     | 8.7       | 11.9      | 9.9       | 11.5      | 9.8      | 14.2     | 14.7          |
| Violent Crime (Rate)                     | 330      | 168       | 224       | 227       | 429       | 187      | 242      | 407           |
| Injury Deaths (Rate)                     | 114      | 121       | 72        | 122       | 91        | 91       | 84       | 133           |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Higher than state average</b>  |   |

**Exhibit 25E: County/City Data Compared to U.S. Average, West Virginia Counties, 2019**

| 2019   | Berkeley  | Grant    | Hampshire | Hardy    | Jefferson | Mineral  | Morgan    | West Virginia |
|--|-----------|----------|-----------|----------|-----------|----------|-----------|---------------|
| <b>Physical Environment</b>                              | <b>27</b> | <b>2</b> | <b>24</b> | <b>6</b> | <b>43</b> | <b>5</b> | <b>15</b> | ~             |
| Air Pollution - Particulate Matter (Average Daily PM2.5) | 9.6       | 9.7      | 8.1       | 8.6      | 8.2       | 9.6      | 8.7       | 12.7          |
| Drinking Water Violations (Presence of Violations)       | N/A       | No       | No        | Yes      | Yes       | Yes      | No        | N/A           |
| Severe Housing Problems (Percent)                        | 11%       | 14%      | 9%        | 11%      | 8%        | 13%      | 9%        | 15%           |
| Driving Alone to Work (Percent Driving Alone)            | 82%       | 83%      | 82%       | 80%      | 79%       | 80%      | 82%       | 77%           |
| Long Commute-Driving Alone (Percent)                     | 33%       | 38%      | 33%       | 56%      | 30%       | 53%      | 37%       | 38%           |

Source: County Health Rankings, 2019

| <b>Key</b>                        |   |
|-----------------------------------|---|
| <b>Unreliable or missing data</b> | ~ |
| <b>Higher than state average</b>  |   |

**Exhibit 24 and Exhibit 25(A-E)** highlights the following comparatively unfavorable indicators:

- Adult smoking in Page, Shenandoah, and Warren counties, and the City of Winchester,
- Adult obesity in Frederick, Rappahannock, and Shenandoah counties, and the City of Winchester, Grant, Hampshire, Hardy, and Morgan counties,
- Percent of population without health insurance in Page and Rappahannock counties, and the City of Winchester,
- The supply of primary care physicians, dentists, and mental health providers in WMC's community.
- Percent of children in poverty in Berkeley, Hardy, and Page counties, and the City of Winchester,
- Unemployment rates in Page, Berkeley, Hampshire, Jefferson, and Morgan counties,
- The rate of social associations,
- Percent of female Medicare enrollees that received mammography screenings in Page, Rappahannock, Jefferson and Morgan counties,
- High school graduation rates for Hardy County,
- Percent of households with severe housing problems in Clarke County,
- Percent of workforce that drives alone to work in Clarke, Frederick, Page, Berkeley, Grant, Hampshire, Hardy, Jefferson, Mineral and Morgan counties,
- Percent of workers who commute in their car alone and drive more than 30 minutes in Clarke, Page, Rappahannock, Shenandoah, Warren, Hardy, and Mineral counties.

## 2. Virginia Department of Health

The Virginia Department of Health (VDH) maintains a data warehouse that includes indicators regarding a number of health issues. In **Exhibits 25A through 30B**, cells in the tables below are shaded if the mortality rate for a county/city or health district in the WMC community exceeded the Virginia average for that condition by more than ten percent. In some cases, data from VDH is presented by health district.

The Lord Fairfax Health District is composed of Clarke, Frederick, Page, Shenandoah; and Warren counties, and Winchester City. The Rappahannock/Rapidan Health District includes Rappahannock County from the WMC community, as well as Culpeper, Fauquier, Madison, and Orange counties. Supplemental cancer incidence data were gathered from the Centers for Disease Control and Prevention.



### Exhibit 26A: Leading Causes of Death by Virginia County/City, 2015

|   | Page, VA | Rappahannock, VA | Shenandoah, VA | Warren, VA | Clarke, VA | Frederick, VA | Winchester City | VA            | National      |
|---|----------|------------------|----------------|------------|------------|---------------|-----------------|---------------|---------------|
| <b>Total Deaths All Ages</b>              |          |                  |                |            |            |               |                 |               |               |
| <b>Total Deaths Rate<sup>14</sup></b>     |          |                  |                |            |            |               |                 |               |               |
| Malignant Neoplasms (Cancer) Rate         | 189.41   | 161.4            | 183.99         | 206.06     | 185.41     | 185.61        | 207.05          | <b>152.55</b> | <b>152.49</b> |
| Diseases of Heart Rate                    | 240.39   | 171.53           | 174.43         | 204.26     | 186.65     | 158.68        | 199.79          | <b>154.54</b> | <b>165.04</b> |
| Cerebrovascular Diseases Rate             | 51.03    | 45.56            | 44.77          | 55.02      | 49.8       | 37.9          | 46.53           | <b>37.46</b>  | <b>37.59</b>  |
| Chronic Lower Respiratory Diseases Rate   | 37.71    | 26.31            | 39.4           | 53.84      | 46.34      | 44.07         | 52.28           | <b>34.94</b>  | <b>40.92</b>  |
| Alzheimer's Disease Rate                  | 27.93    | 18.15            | 19.54          | 38.24      | 34.51      | 24.63         | 30.23           | <b>27.58</b>  | <b>31.04</b>  |
| Diabetes Mellitus Rate                    | 18.99    | 15.11            | 19.98          | 21.79      | 15.73      | 14.73         | 19.73           | <b>20.14</b>  | <b>21.45</b>  |
| Nephritis and Nephrosis Rate              | 17.34    | 9.08             | 17.31          | 20.04      | 22.63      | 14.81         | 23.38           | <b>16.91</b>  | <b>13.01</b>  |
| Septicemia Rate                           | 22.49    | 9.34             | 14.6           | 13.31      | 12.45      | 8.53          | 14.35           | <b>13.04</b>  | <b>10.56</b>  |
| Influenza and Pneumonia Rate              | 18.7     | 21.19            | 23.62          | 17.57      | 14.24      | 17.64         | 22.05           | <b>13.08</b>  | <b>14.3</b>   |
| Suicide Rate                              | 19.02    | 16.51            | 15.81          | 18.16      | 16.65      | 13.74         | 16.04           | <b>13.35</b>  | <b>14.01</b>  |
| Chronic Liver Disease Rate                | 11.69    | 6.18             | 7.51           | 10.49      | 8.5        | 8.94          | 12.33           | <b>9.64</b>   | <b>10.88</b>  |
| Primary Hypertension & Renal Disease Rate | 3.8      | 4.4              | 4.9            | 7.46       | 4.36       | 4.84          | 8.41            | <b>7.15</b>   | <b>9</b>      |

Source: Virginia Department of Health, 2015. Retrieved from: <https://www.vdh.virginia.gov/healthstats/stats.htm>. Rates are per 100,000 population.

According to VDH, Warren County compared unfavorably to the national average on nine indicators, while Page County compared unfavorably on seven indicators. Septicemia was reported at 50 - 74 percent worse than the national average for Page County. Mortality due to malignant neoplasms (cancer), chronic lower respiratory disease, nephritis, influenza/pneumonia, and suicide rates were greater than the Commonwealth average for six of the seven counties (**Exhibit 26A**).

| Key   |   |
|---|---|
| Rates unreliable due to small sample size                       | ~ |
| Ranging from better than National up to 10% worse than National |   |
| 10-49% worse than National                                      |   |
| 50-74% worse than National                                      |   |
| > 75% worse than National                                       |   |

<sup>14</sup> The ratio of total deaths to total population in a specified community or area over a specified period of time. The death rate is often expressed as the number of deaths per 1,000 of the population per year.

**Exhibit 26B: Leading Causes of Death by West Virginia County/City, 2017**

|   | Berkeley, WV | Grant, WV | Jefferson, WV | Hampshire, WV | Hardy, WV | Morgan, WV | Mineral, WV | WV            | National      |
|---|--------------|-----------|---------------|---------------|-----------|------------|-------------|---------------|---------------|
| <b>Total Deaths All Ages</b>              |              |           |               |               |           |            |             |               |               |
| <b>Total Deaths Rate</b>                  |              |           |               |               |           |            |             |               |               |
| Malignant Neoplasms (Cancer) Rate         | 206.78       | 154.85    | 197.07        | 202.46        | 169.79    | 205.64     | 197.93      | <b>179.44</b> | <b>152.49</b> |
| Diseases of Heart Rate                    | 220.14       | 232.51    | 223.43        | 210.48        | 238.9     | 204.9      | 241.79      | <b>191.98</b> | <b>165.04</b> |
| Cerebrovascular Diseases Rate             | 48.6         | 37.54     | 49.95         | 41.33         | 52.55     | 41.55      | 47.31       | <b>41.78</b>  | <b>37.59</b>  |
| Chronic Lower Respiratory Diseases Rate   | 55.37        | 48.93     | 51.11         | 50.47         | 48.37     | 45.48      | 52.14       | <b>64.26</b>  | <b>40.92</b>  |
| Alzheimer's Disease Rate                  | 27.47        | 14.06     | 30.34         | 18.32         | 20.96     | 40.17      | 23.61       | <b>30.55</b>  | <b>31.04</b>  |
| Diabetes Mellitus Rate                    | 28.99        | 13.13     | 27.62         | 34.19         | 29.46     | 26.1       | 30.6        | <b>33.98</b>  | <b>21.45</b>  |
| Nephritis and Nephrosis Rate              | 17.76        | 18.21     | 16.31         | 18.17         | 18.69     | 23.18      | 17.67       | <b>17.11</b>  | <b>13.01</b>  |
| Septicemia Rate                           | 13.19        | 11.25     | 12.16         | 11.28         | 16.36     | 15.36      | 14.92       | <b>14.63</b>  | <b>10.56</b>  |
| Influenza and Pneumonia Rate              | 20.79        | 14.33     | 15.26         | 15.11         | 27.01     | 18.55      | 16.06       | <b>18.16</b>  | <b>14.3</b>   |
| Suicide Rate                              | 15.38        | 16.1      | 11.95         | 15.12         | 16.27     | 18.28      | 17.14       | <b>21.06</b>  | <b>14.01</b>  |
| Chronic Liver Disease Rate                | 11.11        | 8.49      | 11.06         | 12.24         | 11.18     | 10.39      | 11.34       | <b>13.97</b>  | <b>10.88</b>  |
| Primary Hypertension & Renal Disease Rate | 8.15         | 3.96      | 7.15          | 9.78          | 7.44      | 5.77       | 13.75       | <b>13.05</b>  | <b>9</b>      |

Source: West Virginia World Life Expectancy, 2017

According to West Virginia World Life Expectancy, Mineral County compared unfavorably to the national level on ten indicators reporting 10 – 49 percent worse than the national average. Mortality due to cancer, heart disease, and cerebrovascular disease were greater than West Virginia and national averages (**Exhibit 26B**).

| <b>Key</b>  |   |
|---|---|
| Rates unreliable due to small sample size                       | ~ |
| Ranging from better than National up to 10% worse than National |   |
| 10-49% worse than National                                      |   |
| 50-74% worse than National                                      |   |
| > 75% worse than National                                       |   |

## Exhibit 27: Motor Vehicle Injury-Related Mortality and Suicide Rates by County, 2017

| 2017                    |         |            |          |  |                            |
|-------------------------|---------|------------|----------|--|----------------------------|
| County/City             | Crashes | Fatalities | Injuries | Death Rate Per 1,000 Drivers <sup>15</sup> | Suicide Rate <sup>16</sup> |
| <b>PSA</b>              |         |            |          |  |                            |
| Clarke County, VA       | 274     | 3          | 117      | 42.4                                       | 16.7                       |
| Frederick County, VA    | 1,278   | 22         | 481      | 43.2                                       | 13.7                       |
| Hampshire County, WV    | ~       | ~          | ~        | 72.8                                       | 15.1                       |
| Hardy County, WV        | ~       | ~          | ~        | 58.8                                       | 16.3                       |
| Morgan County, WV       | ~       | ~          | ~        | 67.4                                       | 18.3                       |
| Page County, VA         | 248     | 3          | 199      | 44.7                                       | 19.0                       |
| Rappahannock County, VA | 157     | 3          | 98       | 54.0                                       | 16.5                       |
| Shenandoah County, VA   | 695     | 4          | 289      | 43.3                                       | 15.8                       |
| Warren County, VA       | 587     | 6          | 25       | 49.7                                       | 18.2                       |
| Winchester City, VA     | 630     | 0          | 161      | 47.6                                       | 16.0                       |
| <b>SSA</b>              |         |            |          |  |                            |
| Berkeley County, WV     | ~       | ~          | ~        | 65.1                                       | 15.4                       |
| Grant County, WV        | ~       | ~          | ~        | 50.8                                       | 16.1                       |
| Jefferson County, WV    | ~       | ~          | ~        | 53.1                                       | 12.0                       |
| Mineral County, WV      | ~       | ~          | ~        | 46.7                                       | 17.1                       |
| <b>VA</b> <sup>17</sup> | 127,375 | 3,922      | 65,306   | 44.0                                       | 13.4                       |
| <b>WV</b>               | ~       | 1,892      | ~        | 100.3                                      | 21.1                       |
| <b>National</b>         | ~       | ~          | ~        | 49.4                                       | 14.0                       |

Source: Virginia Department of Transportation, 2017, and World Life Expectancy, 2017.

Rappahannock and Warren counties and the City of Winchester reported unintentional-injury related mortality at a higher rate than both the Virginia and national averages for that cohort. The overall populations of Virginia counties reported higher rates of mortality related to suicide than Commonwealth averages (**Exhibit 27**).

<sup>15</sup> Virginia data retrieved from [https://www.dmv.virginia.gov/safety/crash\\_data/crash\\_facts/crash\\_facts\\_17.pdf](https://www.dmv.virginia.gov/safety/crash_data/crash_facts/crash_facts_17.pdf)

West Virginia data retrieved from: <https://www.worldlifeexpectancy.com/usa/west-virginia-accidents>

<sup>16</sup> West Virginia data retrieved from: <https://www.worldlifeexpectancy.com/usa/west-virginia-accidents>

<sup>17</sup> Virginia and West Virginia averages were retrieved from: [https://www.dmv.virginia.gov/safety/crash\\_data/crash\\_facts/crash\\_facts\\_17.pdf](https://www.dmv.virginia.gov/safety/crash_data/crash_facts/crash_facts_17.pdf)

**Exhibit 28A: Cancer Mortality Rates by County, 2015**

| <b>Cancer Mortality Rates by County, 2015 Data</b> |                 |                         |                       |                   |                   |                      |                            |              |                 |
|--|-----------------|-------------------------|-----------------------|-------------------|-------------------|----------------------|----------------------------|--------------|-----------------|
|  | <b>Page, VA</b> | <b>Rappahannock, VA</b> | <b>Shenandoah, VA</b> | <b>Warren, VA</b> | <b>Clarke, VA</b> | <b>Frederick, VA</b> | <b>Winchester City, VA</b> | <b>VA</b>    | <b>National</b> |
| <b>All Cancers</b>                                 | <b>198.7</b>    | <b>151.9</b>            | <b>169.7</b>          | <b>197.4</b>      | <b>177.6</b>      | <b>176.7</b>         | <b>182.7</b>               | <b>163.8</b> | <b>163.5</b>    |
| Colorectal   | 17.3            | ~                       | 10.2                  | 14.7              | 15.4              | 13.2                 | 15.7                       | <b>14.0</b>  | <b>14.5</b>     |
| Lung and Bronchus                                  | 53.9            | 43                      | 48                    | 59                | 55                | 50                   | 40.2                       | <b>44.0</b>  | <b>43.4</b>     |
| Breast   | 30.1            | ~                       | 24.8                  | 19.2              | ~                 | 24.8                 | 19                         | <b>21.8</b>  | <b>20.9</b>     |
| Prostate   | 25.9            | ~                       | 24.9                  | 32.5              | 39.3              | 19.8                 | 32.3                       | <b>20.2</b>  | <b>19.5</b>     |

Source: Conduent Platform retrieved from: <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>. Rates are per 100,000 population.

| <b>Key</b>                                      |   |
|---|---|
| Rates unreliable due to small sample size       | ~ |
| Rates higher than both VA and National averages |   |

Residents of Clarke, Frederick, Page, and Warren counties experienced cancer mortality rates higher than the Commonwealth and national averages for lung and bronchus, Breast cancer rates were highest in Frederick, Page, and Shenandoah counties. Prostate cancer was reported higher than both the Commonwealth and national averages in five of the seven Virginia Counties (**Exhibit 28A**).

**Exhibit 28B: Cancer Mortality Rates by County, 2015**

| Cancer Mortality Rates by County, 2011-2015 Data |              |              |               |               |              |            |              |              |              |
|--|--------------|--------------|---------------|---------------|--------------|------------|--------------|--------------|--------------|
|  | Berkeley, WV | Grant, WV    | Jefferson, WV | Hampshire, WV | Hardy, WV    | Morgan, WV | Mineral, WV  | WV           | National     |
| <b>All Cancers</b>                               | <b>204.1</b> | <b>161.1</b> | <b>171.8</b>  | <b>197</b>    | <b>172.3</b> | <b>191</b> | <b>182.5</b> | <b>193.1</b> | <b>163.5</b> |
| Colorectal                                       | 23.5         | ~            | 14.4          | 21.9          | ~            | 21.1       | 14.9         | <b>18.4</b>  | <b>14.5</b>  |
| Lung and Bronchus                                | 62.9         | 50.9         | 47.8          | 60.5          | 44.9         | 53.7       | 58.4         | <b>58.8</b>  | <b>43.4</b>  |
| Breast   | 23.9         | ~            | 21.3          | 21.8          | ~            | ~          | 19.7         | <b>22.2</b>  | <b>20.9</b>  |
| Prostate   | 18.1         | ~            | 19            | ~             | ~            | ~          | ~            | <b>17.6</b>  | <b>19.5</b>  |

Source: Conduent Platform retrieved from: <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>. Rates are per 100,000 population.

| Key   |   |
|---|---|
| Rates unreliable due to small sample size       | ~ |
| Rates higher than both WV and National averages |   |

Residents of Berkeley, Hampshire, and Morgan counties experienced cancer mortality rates higher than the West Virginia and National averages for colorectal cancer. Both Berkeley and Hampshire counties reported Cancer Mortality rates higher than both West Virginia national averages for lung and bronchus cancer. Berkeley County showed the highest rates for breast cancer in the WMC community (**Exhibit 28B**).

**Exhibit 29A: Cancer Incident Rates by County, 2015**

| <b>Cancer Incidence Rates by County, 2015 Data</b> |                 |                         |                       |                   |                   |                      |                        |              |                 |
|--|-----------------|-------------------------|-----------------------|-------------------|-------------------|----------------------|------------------------|--------------|-----------------|
|  | <b>Page, VA</b> | <b>Rappahannock, VA</b> | <b>Shenandoah, VA</b> | <b>Warren, VA</b> | <b>Clarke, VA</b> | <b>Frederick, VA</b> | <b>Winchester City</b> | <b>VA</b>    | <b>National</b> |
| <b>All Cancers</b>                                 | <b>451.4</b>    | <b>390.5</b>            | <b>470.7</b>          | <b>403.5</b>      | <b>427.5</b>      | <b>411.0</b>         | <b>395.4</b>           | <b>414.3</b> | <b>441.2</b>    |
| Colorectal   | 33.4            | 36.8                    | 47.8                  | 30.3              | 47.8              | 36.8                 | 30.3                   | <b>36.0</b>  | <b>39.2</b>     |
| Lung and Bronchus                                  | 63.0            | 64.4                    | 73.7                  | 53.9              | 63.0              | 64.4                 | 53.9                   | <b>58.9</b>  | <b>60.2</b>     |
| Breast   | 114.1           | 135.1                   | 152.2                 | 135.9             | 152.2             | 129.8                | 135.9                  | <b>123.3</b> | <b>124.7</b>    |
| Prostate   | 88.1            | 73.7                    | 83.4                  | 83.2              | 83.4              | 77.2                 | 83.2                   | <b>102.8</b> | <b>109.0</b>    |

Source: Conduent Platform retrieved from: <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>. Rates are per 100,000 population.

| <b>Key</b>                                      |   |
|---|---|
| Rates unreliable due to small sample size       | ~ |
| Rates higher than both VA and National averages |   |

Six of the seven counties reported breast cancer rates higher than both the Commonwealth and national averages. Clarke, Page, Rappahannock, Shenandoah, and Frederick counties have higher incidence rates than both the Commonwealth and national averages for lung and bronchus cancer. In 2015, colorectal cancer incidence rates was reported higher in both Clarke and Shenandoah counties (**Exhibit 29A**).



**Exhibit 29B: Cancer Incident Rates by County, 2015**

| <b>Cancer Incidence Rates by County, 2015 Data</b> |                     |                  |                      |                      |                  |                   |                    |              |                 |
|--|---------------------|------------------|----------------------|----------------------|------------------|-------------------|--------------------|--------------|-----------------|
|  | <b>Berkeley, WV</b> | <b>Grant, WV</b> | <b>Jefferson, WV</b> | <b>Hampshire, WV</b> | <b>Hardy, WV</b> | <b>Morgan, WV</b> | <b>Mineral, WV</b> | <b>WV</b>    | <b>National</b> |
| <b>All Cancers</b>                                 | <b>482.0</b>        | <b>369.8</b>     | <b>442.2</b>         | <b>462.4</b>         | <b>377.4</b>     | <b>407.9</b>      | <b>446.7</b>       | <b>469.9</b> | <b>441.2</b>    |
| Colorectal   | 48.2                | 48.3             | 40.5                 | 52.5                 | 36.4             | 42.9              | 36.9               | <b>47.0</b>  | <b>39.2</b>     |
| Lung and Bronchus                                  | 85.4                | 59.3             | 67.7                 | 83.7                 | 63.2             | 69.1              | 78.9               | <b>80.3</b>  | <b>60.2</b>     |
| Breast   | 130.4               | 82.9             | 116.3                | 101.2                | 80.6             | 112.2             | 113.9              | <b>116.3</b> | <b>124.7</b>    |
| Prostate   | 104.0               | 39.9             | 104.2                | 71.6                 | 84.3             | 85.3              | 83.1               | <b>94.7</b>  | <b>109.0</b>    |

Source: Conduent Platform retrieved from: <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>. Rates are per 100,000 population.

| <b>Key</b>                                      |   |
|---|---|
| Rates unreliable due to small sample size       | ~ |
| Rates higher than both WV and National averages |   |

Residents of Berkeley, Grant, and Hampshire counties experienced cancer mortality rates higher than the West Virginia and national averages for colorectal cancer. Berkeley County also reported high incidence rates for breast cancer. Lung and bronchus cancers have been reported in six of the seven counties to be higher than West Virginia and the national averages (**Exhibit 29B**).

**Exhibit 30: Communicable Disease by County and Health District, 2016**

| Communicable Diseases by County, Virginia and West Virginia 2016 |           |           |   |
|--|-----------|-----------|---|
| County/Region  | Chlamydia | Gonorrhea | Lyme Disease Incidence Rate <sup>18</sup> |
| <b>PSA</b>   |           |           |   |
| Clarke County, VA  | 215.8     | 7.0       | 97.5                                      |
| Frederick County, VA   | 234.4     | 20.4      | 49.3                                      |
| Hampshire County, WV   | 125.2     | 20.9      | ~   |
| Hardy County, WV   | 185.4     | 7.1       | ~   |
| Morgan County, WV  | 108.3     | 11.4      | ~   |
| Page County, VA  | 96.9      | 8.4       | 33.7                                      |
| Rappahannock County, VA  | 230.4     | 54.2      | 54.2                                      |
| Shenandoah County, VA  | 194.5     | 50.9      | 34.7                                      |
| Warren County, VA  | 291.7     | 48.6      | 56.3                                      |
| Winchester city, VA  | 491.1     | 51.3      | 33.0                                      |
| <b>SSA</b>   |           |           |   |
| Berkeley County, WV  | 341.8     | 128.6     | ~   |
| Grant County, WV   | 100.5     | 0.00      | ~   |
| Jefferson County, WV   | 355.2     | 86.0      | ~   |
| Mineral County, WV   | 187.9     | 24.8      | ~   |
| <b>Lord Fairfax Health District</b>                              | 251.7     | 32.5      | 47.2                                      |
| <b>Rappahannock/Rapidan Health District</b>                      | 233.8     | 24.7      | 28.1                                      |
| <b>Virginia</b>  | 471.6     | 131.8     | 16.1                                      |
| <b>West Virginia</b>   | 222.8     | 70.2      | 16.2                                      |
| <b>National (2017)</b>   | 528.8     | 170.58    | 9.1                                       |

Source: Virginia Department of Health, 2016. Rates are per 100,000 population, and West Virginia Lyme Disease Incidence Rate, MSN, 2016

| Key  |   |
|--|---|
| Rates unreliable due to small sample size              | ~ |
| Ranging from better than State average up to 10% worse |   |
| 11-49% worse than State average                        |   |
| 50-74% worse than State average                        |   |
| > 75% worse than State average                         |   |

The Lord Fairfax and Rappahannock/Rapidan health districts reported much lower chlamydia and gonorrhea rates than the Virginia average, but Lyme disease incidence exceeds the Virginia average. Lyme disease rates reported were 75% higher than the Commonwealth rate for Frederick, Page, Rappahannock, and Warren counties, and Winchester City (**Exhibit 30**).

<sup>18</sup> West Virginia data, 2017 retrieved from: <https://www.msn.com/en-us/health/medical/worst-states-for-lyme-disease/ar-AAy7KoV>

**Exhibit 31A: Maternal and Child Health Indicators by County/City and State, 2016**

| Indicator, 2016                     | Clarke, VA | Frederick, VA | Page, VA | Rappahannock, VA | Shenandoah, VA | Warren, VA | Winchester City, VA | VA   | National |
|-------------------------------------|------------|---------------|----------|------------------|----------------|------------|---------------------|------|----------|
| Low birth weight infants            | 5          | 6.4           | 6.8      | 1.9              | 6.2            | 8.1        | 10.8                | 8.4  | 8.3      |
| Very low birth weight infants       | 1.7        | 0.9           | 1.6      | 0                | 1.1            | 1.6        | 2.00                | 1.5  | 1.4      |
| Teen pregnancy rate 10-19**         | 20.7       | 33.6          | 18.0     | 59.7             | 50.1           | 52.4       | 26.9                | 10.2 | 18.8     |
| No prenatal care in first trimester | 20.5       | 21.8          | 22.6     | 27.5             | 23.8           | 23.2       | 35.5                | 18.4 | 23.0     |
| Infant mortality rate               | 16.8       | 4.3           | 8        | 0                | 4.4            | 11.2       | 5.7                 | 5.3  | 5.9      |

Sources: Virginia Department of Health, 2016, and Conduent Platform retrieved from <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>

\*\*Rates per 1,000 live births.

| Key   |   |
|---|---|
| Rates unreliable due to small sample size           | ~ |
| Ranging from better than VA up to 10% worse than VA |   |
| 11-49% worse than VA                                |   |
| 50-74% worse than VA                                |   |
| > 75% worse than VA                                 |   |

Winchester City reported rates of no prenatal care in the first trimester more than 50 percent higher than the Virginia average. Teen pregnancy rates for 10-19 year old population were 75 percent or higher than the Commonwealth average of 10.2 percent for all seven of the VA counties. Infant mortality rates were 75 percent worse than the Commonwealth’s average in Clarke County than compared to the other counties within WMC’s community (**Exhibit 31A**).

**Exhibit 31B: Maternal and Child Health Indicators by County/City and State, 2016**

| Indicator, 2016                     | Berkeley, WV | Grant, WV | Hardy, WV | Hampshire, WV | Jefferson, WV | Mineral, WV | Morgan, WV | WV   | National |
|-------------------------------------|--------------|-----------|-----------|---------------|---------------|-------------|------------|------|----------|
| Low birth weight infants            | 7.1          | 7.9       | 8.9       | 9.9           | 7             | 11.8        | 6.8        | 8.9  | 8.3      |
| Very low birth weight infants       | 1            | 0.5       | 1.5       | 2.6           | 1.9           | 1.9         | 1.8        | 1.6  | 1.4      |
| Teen pregnancy rate 10-19**         | 7.3          | 13.4      | 9.4       | 10.2          | 13.9          | 12.7        | 23.6       | 13.7 | 18.8     |
| No prenatal care in first trimester | 19.1         | 30.1      | 19.4      | 26.9          | 28.2          | 19.4        | 24.8       | 22.5 | 23       |
| Infant mortality rate               | 4.9          | 5.3       | 6.6       | 13.2          | 19.1          | 7.2         | 8.8        | 7.3  | 5.9      |

Sources: Virginia Department of Health, 2016, and Conduent Platform retrieved from <https://www.valleyhealthlink.com/About-Us/Community-Benefit.aspx>  
 \*\*Rates per 1,000 live births.

| Key   |   |
|---|---|
| Rates unreliable due to small sample size           | ~ |
| Ranging from better than VA up to 10% worse than VA |   |
| 11-49% worse than VA                                |   |
| 50-74% worse than VA                                |   |
| > 75% worse than VA                                 |   |

Infant mortality rates were reported to be 75 percent worse than West Virginia for Hampshire and Jefferson Counties. Grant, Hampshire, and Jefferson counties reported rates of no prenatal care in the first trimester more than 25 percent higher than the West Virginia average. Teen pregnancy rates for 10-19 year old population were 50 percent or higher than the West Virginia average of 13.7 percent for Morgan County. Infant mortality rates were reported to be higher in Hampshire, Jefferson, and Morgan counties for WMC’s Community (**Exhibit 31B**).

### 3. Behavioral Risk Factor Surveillance System

Data collected by the Centers for Disease Control and Prevention's (CDC) Behavioral Risk Factor Surveillance System (BRFSS) are based on a telephone survey that gathers data on various health indicators, risk behaviors, healthcare access, and preventive health measures. Data are collected for the entire United States. Analysis of BRFSS data can identify localized health issues and trends, and enable county, state (or Commonwealth), or nation-wide comparisons.

**Exhibit 32A** compares various BRFSS indicators for all seven Virginia counties, with Virginia and United States averages for comparison. Indicators are shaded if an area's value was more than ten percent higher than the Virginia average. Data for Clarke and Page counties and Winchester City were not included in this analysis due to small sample sizes. Data for Rappahannock County were unavailable. **Exhibit 32B** compares BRFSS indicators to state and U.S. averages for the community's West Virginia counties. Data for Grant County was unavailable.

**Exhibit 32A: BRFSS Indicators and Variation from the Commonwealth of Virginia,\* 2015**

| Indicator 2015    |   | Clarke, VA | Frederick, VA | Page, VA | Rappahannock, VA | Shenandoah, VA | Warren, VA | Winchester City, VA | VA           |
|-------------------|---|------------|---------------|----------|------------------|----------------|------------|---------------------|--------------|
| Health Behaviors  | Excessive drinkers <sup>19</sup>                          | 17.0%      | 19.0%         | 16.0%    | 16.4%            | 17.7%          | 19.6%      | 17.0%               | <b>17.4%</b> |
|                   | Current smoker  | 15.0%      | 14.0%         | 17.0%    | 14.0%            | 16.4%          | 17.2%      | 18.0%               | <b>15.3%</b> |
|                   | No physical activity in past 30 days                      | 21.0%      | 19.0%         | 26.8%    | 24.5%            | 27.1%          | 27.3%      | 22.0%               | <b>21.6%</b> |
| Access            | Rate of primary care providers (PCP) per 100,000          | 49         | 43            | 33.80    | 27.10            | 44.00          | 53.60      | 269                 | <b>76.4</b>  |
|                   | Do not have health care coverage under 65                 | 10.3%      | 10.1%         | 13.5%    | 13.7%            | 11.6%          | 10.3%      | 14.5%               | <b>9.9%</b>  |
|                   | Overweight or obese                                       | 26.9%      | 29.7%         | 27.6%    | 30.0%            | 30.7%          | 27.7%      | 29.6%               | <b>28.8%</b> |
| Health Conditions | Told have diabetes <sup>20</sup>                          | 9.0%       | 8.3%          | 9.2%     | 9.3%             | 9.4%           | 12.2%      | 8.5%                | <b>9.6%</b>  |
|                   | Poor mental health > number of days/month <sup>21</sup>   | 3.6%       | 3.4%          | 3.7%     | 3.4%             | 3.7%           | 3.6%       | 3.8%                | <b>3.5%</b>  |
| Mental Health     | Poor physical health > number of days/month <sup>22</sup> | 3.0%       | 3.3%          | 3.6%     | 3.2%             | 3.4%           | 3.3%       | 3.8%                | <b>3.5%</b>  |
| Overall Health    | Reported poor or fair health                              | 14.1%      | 12.2%         | 15.2%    | 12.9%            | 15.2%          | 14.6%      | 18.0%               | <b>15.9%</b> |

Source: CDC BRFSS, 2015.

Shenandoah and Warren counties, and the City of Winchester compared worse (six indicators) than the Virginia average. All seven counties within WMC’s community reported high percentages of residents who don’t have health insurance under age 65. Rappahannock, Shenandoah, and Frederick counties, and the City of Winchester reported percentages higher than the Commonwealth’s average for being overweight or obese. The City of Winchester reported poor or fair health condition higher than the Virginia average (**Exhibit 32A**).

<sup>19</sup> \*\*Adult men having more than two drinks per day; adult women having more than one drink per day.

<sup>20</sup> Total, Adults Aged 20+ Years, Age-Adjusted Percentage, Virginia, 2015

<sup>21</sup> Average number of reported mentally unhealthy days per month among adults 18 years and over

<sup>22</sup> Average number of reported physically unhealthy days per month among adults 18 years of age and over



**Exhibit 32B: BRFSS Indicators and Variation from the State of West Virginia, 2015**

| Indicator 2015    |   | Berkeley, WV | Grant, WV | Jefferson, WV | Hampshire, WV | Hardy, WV | Morgan, WV | Mineral, WV | WV           |
|-------------------|---|--------------|-----------|---------------|---------------|-----------|------------|-------------|--------------|
| Health Behaviors  | Binge drinkers <sup>23</sup>                              | ~            | ~         | ~             | 9.9%          | DSU       | 10.1%      | 7.2%        | <b>9.3%</b>  |
|                   | Excessive drinkers <sup>24</sup>                          | 13.4%        | 11.4%     | 15.6%         | 11.4%         | 11.4%     | 12.0%      | 12.5%       | <b>11.8%</b> |
|                   | Current smoker  | 22.7%        | 21.2%     | 18.8%         | 21.6%         | 20.4%     | 20.4%      | 22.2%       | <b>24.8%</b> |
|                   | No physical activity in past 30 days                      | 27.6%        | 29.9%     | 25.3%         | 36.1%         | 29.4%     | 25.3%      | 26.0%       | <b>27.8%</b> |
| Access            | Unable to visit doctor due to cost                        | ~            | ~         | ~             | ~             | ~         | ~          | ~           | <b>14.8%</b> |
|                   | Rate of primary care providers (PCP) per 100,000          | 45           | 51        | 53            | 21            | 22        | 51         | 33          | <b>79</b>    |
|                   | Do not have health care coverage under 65                 | 6.4%         | 6.6%      | 6.1%          | 8.7%          | 8.0%      | 7.4%       | 6.0%        | <b>6.5%</b>  |
|                   | Overweight or obese                                       | 35.0%        | 37.3%     | 38.4%         | 38.0%         | 36.5%     | 38.4%      | 33.9%       | <b>36.3%</b> |
| Health Conditions | Told have diabetes <sup>25</sup>                          | 10.5%        | 14.5%     | 8.8%          | 11.4%         | 10.9%     | 12.5%      | 12.3%       | <b>12.7%</b> |
|                   | Poor mental health > number of days/month <sup>26</sup>   | 5.2%         | 5.1%      | 4.5%          | 5.1%          | 4.9%      | 4.9%       | 4.9%        | <b>5.2%</b>  |
| Mental Health     | Poor physical health > number of days/month <sup>27</sup> | 4.9%         | 5.2%      | 4.4%          | 4.9%          | 4.8%      | 5.0%       | 5.2%        | <b>5.2%</b>  |
| Overall Health    | Social-emotional support lacking: Adults (percent)        | ~            | ~         | ~             | 14.9%         | 23.8%     | 21.2%      | 15.6%       | <b>19.1%</b> |
|                   | Reported poor or fair health                              | 22.1%        | 22.2%     | 18.2%         | 21.8%         | 20.6%     | 19.7%      | 22.6%       | <b>24.1%</b> |

Source: CDC BRFSS, 2015, DSU=Data Statistically Unreliable

In Berkeley, Jefferson, Morgan and Mineral counties, the percentage of people who reported being excessive drinkers or heavy drinkers was higher than the West Virginia average. Grant, Hampshire, Hardy, and Morgan counties had four or more indicators that were worse than the West Virginia average. The obesity indicator was higher in five of the seven West Virginia counties compared to the West Virginia average (**Exhibit 32B**).

<sup>23</sup> \*Adult males having five or more drinks on one occasion; adult females having four or more drinks on one occasion.

<sup>24</sup> \*\*Adult men having more than two drinks per day; adult women having more than one drink per day.

<sup>25</sup> Total, Adults Aged 20+ Years, Age-Adjusted Percentage, Virginia, 2015

<sup>26</sup> Average number of reported mentally unhealthy days per month among adults 18 years and over

<sup>27</sup> Average number of reported physically unhealthy days per month among adults 18 years of age and over

## Ambulatory Care Sensitive Conditions

This section examines the frequency of discharges for Ambulatory Care Sensitive Conditions (ACSCs, frequently referred to as Prevention Quality Indicators or PQIs) throughout WMC's community.

ACSC are eighteen health “conditions for which good outpatient care can potentially prevent the need for hospitalization or for which early intervention can prevent complications or more severe disease.”<sup>28</sup> As such, rates of hospitalization for these conditions can “provide insight into the quality of the health care system outside of the hospital,” including the accessibility and utilization of primary care, preventive care and health education. Among these conditions are: diabetes, perforated appendixes, chronic obstructive pulmonary disease (COPD), hypertension, congestive heart failure, dehydration, bacterial pneumonia, urinary tract infection, and asthma.

Disproportionately high rates of discharges for ACSC indicate potential problems with the availability or accessibility of ambulatory care and preventive services and can suggest areas for improvement in the health care system and ways to improve outcomes.

---

<sup>28</sup> Agency for Healthcare Research and Quality (AHRQ) Prevention Quality Indicators, accessed online at <http://archive.ahrq.gov/data/hcup/factbk5/factbk5d.htm> on June 28, 2013.

1. County/City-Level Analysis

**Exhibit 33: WMC Discharges for ACSC by County/City and Payer<sup>29</sup>, 2018**

| Percentage of IP ACSC Discharges to Total ACSC Discharges |              |              |              |             |              |             |
|---|--------------|--------------|--------------|-------------|--------------|-------------|
| County/Service Area                                       | Blue cross   | Medicaid     | Medicare     | Other       | Commercial   | Self        |
| <b>PSA</b>  | <b>11.1%</b> | <b>6.0%</b>  | <b>45.5%</b> | <b>0.1%</b> | <b>6.6%</b>  | <b>7.6%</b> |
| Clarke, VA  | 8.8%         | 4.1%         | 71.0%        | 0.1%        | 9.4%         | 6.5%        |
| Frederick, VA   | 11.5%        | 5.7%         | 65.9%        | 0.2%        | 9.5%         | 7.3%        |
| Hampshire, WV   | 10.5%        | 14.2%        | 63.8%        | 0.3%        | 8.5%         | 2.6%        |
| Hardy, WV   | 12.8%        | 11.5%        | 64.6%        | 0.3%        | 10.2%        | 0.7%        |
| Morgan, WV  | 6.8%         | 16.8%        | 68.0%        | 0.2%        | 6.8%         | 1.4%        |
| Page, VA  | 18.7%        | 6.5%         | 47.7%        | 1.3%        | 16.1%        | 9.7%        |
| Rappahannock, VA  | 19.0%        | 0.0%         | 52.4%        | 0.0%        | 9.5%         | 19.0%       |
| Shenandoah, VA  | 14.6%        | 6.9%         | 62.2%        | 9.6%        | 6.7%         | 6.7%        |
| Warren, VA  | 15.0%        | 8.4%         | 55.2%        | 12.7%       | 8.5%         | 8.5%        |
| Winchester, VA  | 8.5%         | 12.4%        | 59.0%        | 7.1%        | 12.7%        | 12.7%       |
| <b>SSA</b>  | <b>11.6%</b> | <b>10.3%</b> | <b>52.5%</b> | <b>0.4%</b> | <b>10.7%</b> | <b>1.7%</b> |
| Berkley, WV   | 14.7%        | 12.8%        | 59.2%        | 0.5%        | 10.9%        | 1.9%        |
| Grant, WV   | 11.4%        | 11.4%        | 69.6%        | 0.0%        | 6.3%         | 1.3%        |
| Jefferson, WV   | 12.3%        | 10.5%        | 59.9%        | 0.4%        | 14.6%        | 2.3%        |
| Mineral, WV   | 2.9%         | 7.4%         | 67.6%        | 0.0%        | 22.1%        | 0.0%        |
| <b>Total PSA and SSA</b>                                  | <b>11.4%</b> | <b>8.9%</b>  | <b>63.0%</b> | <b>0.2%</b> | <b>9.6%</b>  | <b>6.8%</b> |
| Other Counties  | 14.6%        | 5.5%         | 48.6%        | 1.1%        | 20.7%        | 9.6%        |
| <b>Total</b>  | <b>11.6%</b> | <b>8.7%</b>  | <b>62.3%</b> | <b>0.3%</b> | <b>10.2%</b> | <b>7.0%</b> |

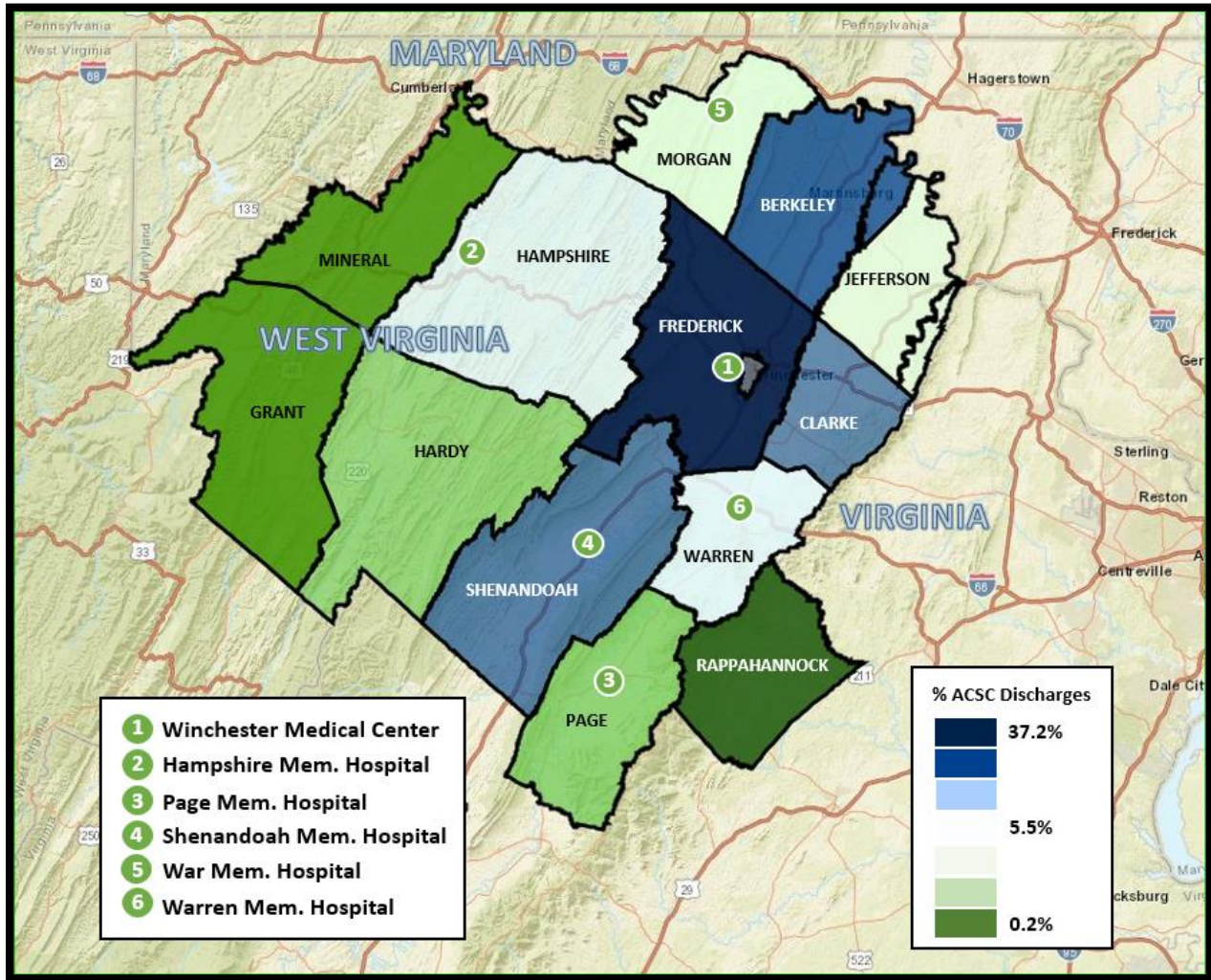
Source: Valley Health System, 2018 Inpatient Data

Medicare patients had the highest proportion of discharges for ACSCs. Self-pay patient (typically uninsured individuals) had shown a decrease from 6.9 percent in 2016 to 10.2 percent for ACSC. Clarke County in Virginia, and Grant and Morgan counties in West Virginia, had the highest percentage of Medicaid discharges for ACSCs (**Exhibit 33**).

<sup>29</sup> Discharges from all Valley Health System hospitals.

2. County-Level Analysis

**Exhibit 34A: Discharges<sup>30</sup> for ACSC by County/City, 2018**



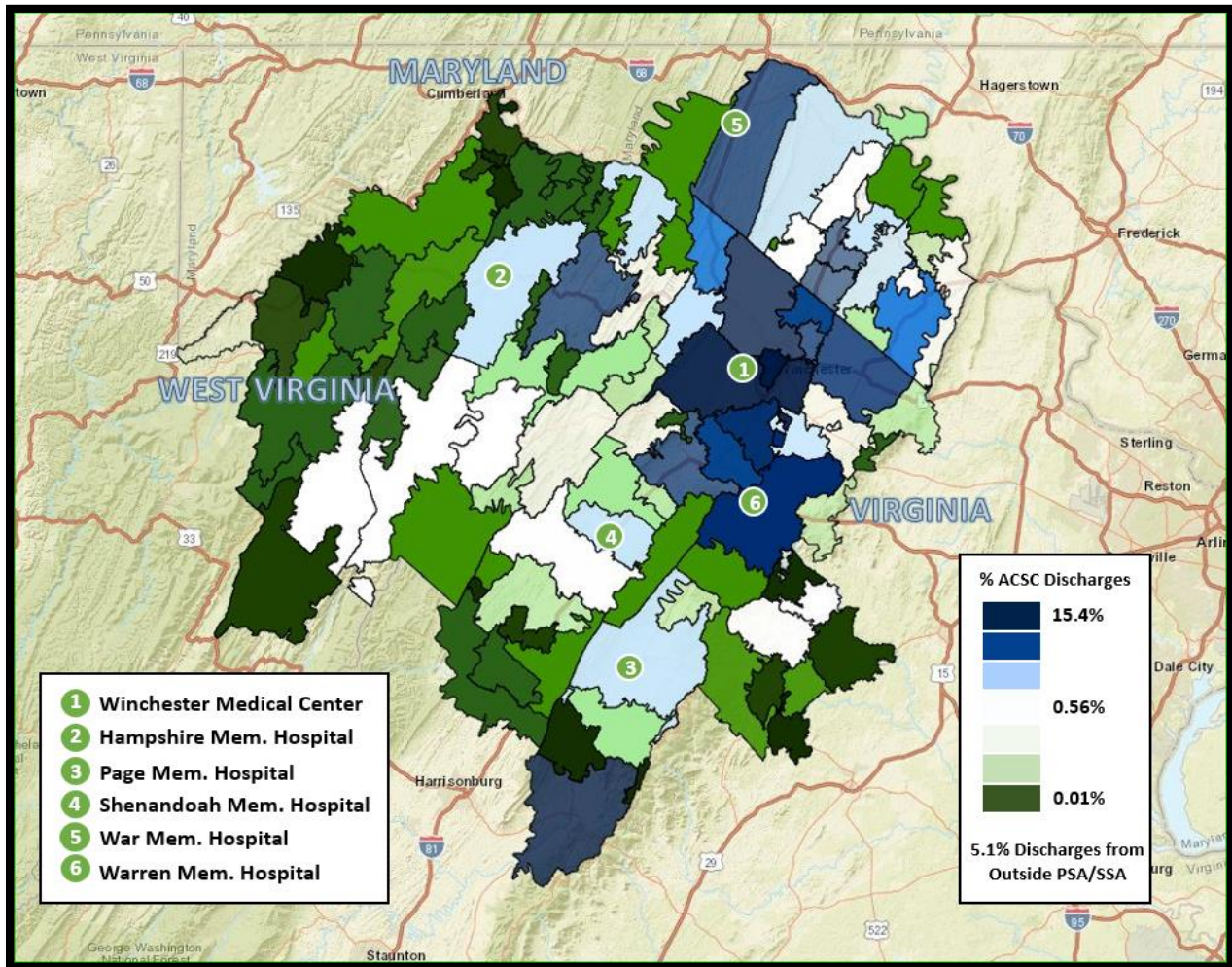
Source: ESRI 2019, Created by Planning and Business Development

The highest percentage of ACSC discharges were from Berkeley, Clarke, Frederick, and Shenandoah counties (**Exhibit 34A**).

<sup>30</sup> Discharges are from all Valley Health hospitals.



**Exhibit 34B: Discharges<sup>31</sup> for ACSC by County/City and Zip, 2018**



Source: ESRI 2019, Created by Planning and Business Development

The highest percentage of ACSC discharges were from zip codes: 22601 in the City of Winchester (Winchester, VA, 15.4%), 22602 in Frederick County (Winchester, VA, 11.3%), 22603 in Frederick County (Winchester, VA, 9.8%), 22655 in Frederick County (Stephens City, VA, 7.3%) within the WMC community (**Exhibit 34**).

<sup>31</sup> Discharges are from all Valley Health hospitals.

### 3. Hospital-Level Analysis

#### Exhibit 35: ACSC Inpatient (IP) Discharges by Hospital, 2018

| IP ACSC Discharges by Hospital 2018 |                          |                     |   |
|-------------------------------------|--------------------------|---------------------|---|
| Entity Name                         | Total IP ACSC Discharges | Total IP Discharges | Percentage of IP ACSC Discharges to Total IP Discharges |
| Hampshire Memorial Hospital         | 249                      | 415                 | 60.0%   |
| Page Memorial Hospital              | 294                      | 751                 | 39.1%   |
| Shenandoah Memorial Hospital        | 1,213                    | 1,505               | 80.6%   |
| War Memorial Hospital               | 230                      | 487                 | 47.2%   |
| Warren Memorial Hospital            | 1,570                    | 1,816               | 86.5%   |
| Winchester Medical Center           | 12,410                   | 23,155              | 53.6%   |
| <b>Total</b>                        | <b>15,966</b>            | <b>28,129</b>       | <b>56.8%</b>  |

Source: Valley Health System, 2018 Inpatient Data.

Page Memorial Hospital had the lowest percent of ACSC discharges of all hospitals in Valley Health. Warren Memorial Hospital had the highest percent of ACSC discharges for 2018 (Exhibit 35).



**Exhibit 36: Discharges for ACSC by Condition and Age, Winchester Medical Center, 2018**

| Discharges for ACSC by Condition and age for WMC, 2018 |              |             |              |              |               |
|--|--------------|-------------|--------------|--------------|---------------|
| Condition  | 0 to 17      | 18 to 39    | 40 to 64     | 65 +         | Total         |
| Heart failure  | ~            | 2           | 95           | 290          | 387           |
| Pneumonia  | 19           | 26          | 198          | 577          | 820           |
| Asthma   | 19           | 6           | 7            | 18           | 50            |
| Urinary tract infection                                | 4            | 4           | 21           | 230          | 259           |
| Diabetes   | 1            | 60          | 147          | 130          | 338           |
| Dehydration  | 8            | 2           | 7            | 28           | 45            |
| Hypertension   | ~            | ~           | 3            | 4            | 7             |
| Angina   | ~            | ~           | 3            | 4            | 7             |
| Appendix   | 6            | 17          | 25           | 21           | 69            |
| <b>Total</b>   | <b>57</b>    | <b>117</b>  | <b>506</b>   | <b>1,302</b> | <b>1,982</b>  |
| <b>Percent Total</b>                                   | <b>2.88%</b> | <b>5.9%</b> | <b>25.5%</b> | <b>65.7%</b> | <b>100.0%</b> |

Source: Valley Health System, 2018 Inpatient Data<sup>32</sup>.

Patients aged 65 years and over had the highest percentage of discharges for ACSC conditions. The top four ACSC conditions at WMC were: pneumonia, heart failure, diabetes, and urinary tract infections in adults 65 and older, and pneumonia and diabetes in patients' ages ranging from 40 to 64 years old (**Exhibit 36**).

<sup>32</sup> Discharges from all Valley Health System hospitals. \*Heart failure codes (428.1, I11.0, I50.21, I50.23, I50.31, I50.33, I50.9), \*\*Pneumonia codes (J15.9, 482.9, J18.9, J13, J18.9, J11.00, J15.6, 480.9, 481, 482, 482.1, 486, 487, J10.00, J15.7, P23.6, A40.3, J12.9), \*\*\*Asthma codes ( J45.901, J45.42, 493.92, 493.01, 493.02, 493.21, J45.902, J45.41, J45.909, J45.42, 493.92), \*\*\*\*Diabetes codes (648.01, E10.10, O24.410, O24.419, O24.420, O24.429, E10.11, E10.621, E10.69, E11.21, E11.43, E11.52, E11.621, E10.69, E11.21, E11.43, E11.52, E11.621, E11.628, E11.649, E11.65, E11.69, E09.65, E10.649, E11.40, E11.51)

## Community Need Index™ and Food Deserts

### 1. Dignity Health Community Need Index™

Dignity Health, a California-based hospital system, developed and has made available for public use a *Community Need Index*™ (CNI) that measures barriers to health care access by county/city and ZIP code.<sup>33</sup> The index is based on five social and economic indicators:

#### 1. Income Barrier

- Percentage of households below poverty line, with head of household age 65 or more
- Percentage of families with children under 18 below poverty line
- Percentage of single female-headed families with children under 18 below poverty line

#### 2. Cultural Barrier

- Percentage of population that is minority (including Hispanic ethnicity)
- Percentage of population over age 5 that speaks English poorly or not at all

#### 3. Education Barrier

- Percentage of population over 25 without a high school diploma

#### 4. Insurance Barrier

- Percentage of population in the labor force, aged 16 or more, without employment
- Percentage of population without health insurance

#### 5. Housing Barrier

- Percentage of households renting their home

The CNI provides a score for every populated ZIP code in the United States on a scale of 1.0 to 5.0. A score of 1.0 indicates a ZIP code with the least need, while a score of 5.0 represents a ZIP code with the most need.

**Exhibit 37** presents the *Community Need Index*™ (CNI) score of ZIP codes in the community by each county in the Winchester Medical Center community, weighted by the CNI score and population of each.

---

<sup>33</sup> Accessed online at <http://cni.chw-interactive.org/> on June 28, 2013.

**Exhibit 37: Community Need Index™ Score by County and ZIP Code, 2018**

| SERVICE AREA | COUNTY           | CITY/TOWN NAME   | ZIP   | CNI SCORE |
|--------------|------------------|------------------|-------|-----------|
| Primary      | Winchester, VA   | Winchester       | 22601 | 4.2       |
| Primary      | Shenandoah, VA   | New Market       | 22844 | 4         |
| Primary      | Page, VA         | Stanley          | 22851 | 4         |
| Primary      | Shenandoah, VA   | Woodstock        | 22664 | 4         |
| Primary      | Shenandoah, VA   | Mount Jackson    | 22842 | 3.6       |
| Primary      | Page, VA         | Luray            | 22835 | 3.6       |
| Primary      | Hampshire, WV    | Romney           | 26757 | 3.6       |
| Primary      | Clarke, VA       | Berryville       | 22611 | 3.4       |
| Primary      | Warren, VA       | Front Royal      | 22630 | 3.4       |
| Primary      | Page, VA         | Shenandoah       | 22849 | 3.4       |
| Primary      | Hardy, WV        | Moorefield       | 26836 | 3.4       |
| Primary      | Clarke, VA       | Paris            | 20130 | 3.2       |
| Primary      | Clarke, VA       | White Post       | 22663 | 3.2       |
| Primary      | Shenandoah, VA   | Quicksburg       | 22847 | 3.2       |
| Primary      | Shenandoah, VA   | Edinburg         | 22824 | 3.2       |
| Primary      | Rappahannock, VA | Sperryville      | 22740 | 3.2       |
| Primary      | Rappahannock, VA | Washington       | 22747 | 3.2       |
| Primary      | Hampshire, WV    | Shanks           | 26761 | 3.2       |
| Primary      | Frederick, VA    | Winchester       | 22603 | 3         |
| Primary      | Shenandoah, VA   | Strasburg        | 22657 | 3         |
| Primary      | Rappahannock, VA | Huntly           | 22640 | 3         |
| Primary      | Rappahannock, VA | Chester Gap      | 22623 | 3         |
| Primary      | Hardy, WV        | Fisher           | 26818 | 3         |
| Primary      | Morgan, WV       | Paw Paw          | 25434 | 3         |
| Primary      | Hampshire, WV    | Rio              | 26755 | 3         |
| Primary      | Clarke, VA       | Bluemont         | 20135 | 2.8       |
| Primary      | Clarke, VA       | Boyce            | 22620 | 2.8       |
| Primary      | Warren, VA       | Bentonville      | 22610 | 2.8       |
| Primary      | Rappahannock, VA | Woodville        | 22749 | 2.8       |
| Primary      | Rappahannock, VA | Castleton        | 22716 | 2.8       |
| Primary      | Morgan, WV       | Berkeley Springs | 25411 | 2.8       |
| Primary      | Hardy, WV        | Lost City        | 26810 | 2.8       |
| Primary      | Hampshire, WV    | Augusta          | 26704 | 2.8       |
| Primary      | Frederick, VA    | Winchester       | 22602 | 2.6       |
| Primary      | Shenandoah, VA   | Lebanon Church   | 22641 | 2.6       |

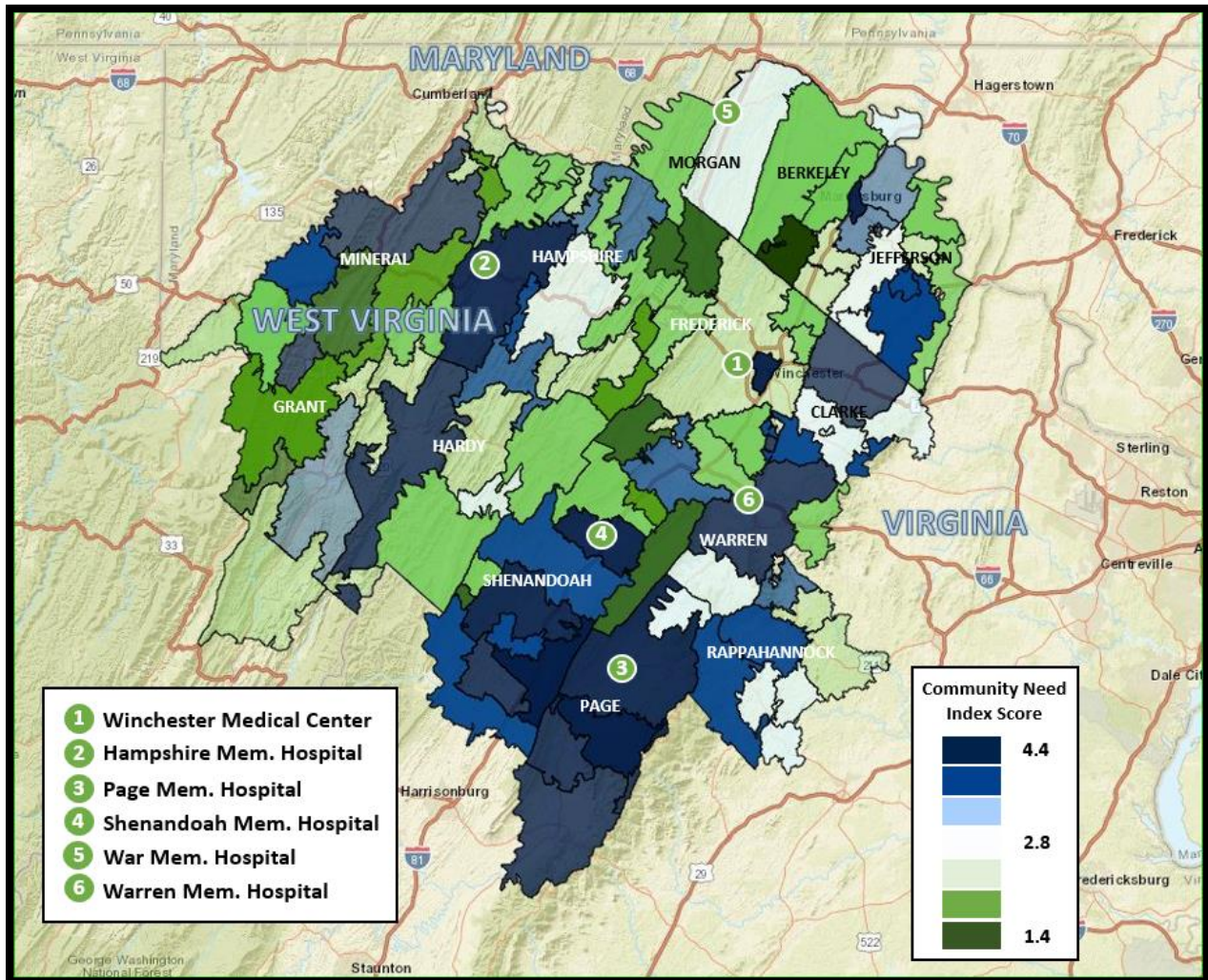
**Exhibit 37: Community Need Index™ Score by County and ZIP Code, 2018 (continued)**

| SERVICE AREA | COUNTY           | CITY/TOWN NAME | ZIP   | CNI SCORE |
|--------------|------------------|----------------|-------|-----------|
| Primary      | Rappahannock, VA | Flint Hill     | 22627 | 2.6       |
| Primary      | Hardy, WV        | Old Fields     | 26845 | 2.6       |
| Primary      | Hardy, WV        | Milam          | 26838 | 2.6       |
| Primary      | Hampshire, WV    | Levels         | 25431 | 2.6       |
| Primary      | Hardy, WV        | Baker          | 26801 | 2.6       |
| Primary      | Frederick, VA    | Stephens City  | 22655 | 2.4       |
| Primary      | Frederick, VA    | Clear Brook    | 22624 | 2.4       |
| Primary      | Frederick, VA    | Stephenson     | 22656 | 2.4       |
| Primary      | Frederick, VA    | Gore           | 22637 | 2.4       |
| Primary      | Frederick, VA    | Middletown     | 22645 | 2.4       |
| Primary      | Warren, VA       | Linden         | 22642 | 2.4       |
| Primary      | Shenandoah, VA   | Maurertown     | 22644 | 2.4       |
| Primary      | Shenandoah, VA   | Basye          | 22810 | 2.4       |
| Primary      | Hardy, WV        | Mathias        | 26812 | 2.4       |
| Primary      | Morgan, WV       | Great Cacapon  | 25422 | 2.4       |
| Primary      | Hardy, WV        | Wardensville   | 26851 | 2.4       |
| Primary      | Hampshire, WV    | Springfield    | 26763 | 2.4       |
| Primary      | Hampshire, WV    | Purgitsville   | 26852 | 2.4       |
| Primary      | Hampshire, WV    | Green Spring   | 26722 | 2.4       |
| Primary      | Hampshire, WV    | Capon Bridge   | 26711 | 2.4       |
| Primary      | Hampshire, WV    | Slanesville    | 25444 | 2.4       |
| Primary      | Shenandoah, VA   | Toms Brook     | 22660 | 2.2       |
| Primary      | Hampshire, WV    | High View      | 26808 | 2.2       |
| Primary      | Frederick, VA    | Cross Junction | 22625 | 2         |
| Primary      | Warren, VA       | Middletown     | 22649 | 2         |
| Primary      | Shenandoah, VA   | Fort Valley    | 22652 | 2         |
| Primary      | Shenandoah, VA   | Star Tannery   | 22654 | 2         |
| Primary      | Shenandoah, VA   | Orkney Springs | 22845 | 2         |
| Primary      | Hampshire, WV    | Bloomery       | 26817 | 2         |
| Secondary    | Mineral, WV      | Piedmont       | 26750 | 4.4       |
| Secondary    | Berkeley, WV     | Martinsburg    | 25401 | 4.2       |
| Secondary    | Mineral, WV      | Keyser         | 26726 | 3.4       |
| Secondary    | Jefferson, WV    | Charles Town   | 25414 | 3.2       |
| Secondary    | Jefferson, WV    | Ranson         | 25438 | 3.2       |
| Secondary    | Mineral, WV      | Elk Garden     | 26717 | 3.2       |

**Exhibit 37: Community Need Index™ Score by County and ZIP Code, 2018 (continued)**

| <b>SERVICE AREA</b> | <b>COUNTY</b> | <b>CITY/TOWN NAME</b> | <b>ZIP</b> | <b>CNI SCORE</b> |
|---------------------|---------------|-----------------------|------------|------------------|
| Secondary           | Berkeley, WV  | Martinsburg           | 25404      | 3                |
| Secondary           | Grant, WV     | Petersburg            | 26847      | 3                |
| Secondary           | Jefferson, WV | Summit Point          | 25446      | 2.8              |
| Secondary           | Jefferson, WV | Kearneysville         | 25430      | 2.8              |
| Secondary           | Berkeley, WV  | Falling Waters        | 25419      | 2.8              |
| Secondary           | Mineral, WV   | Wiley Ford            | 26767      | 2.8              |
| Secondary           | Jefferson, WV | Shenandoah Junction   | 25442      | 2.6              |
| Secondary           | Berkeley, WV  | Bunker Hill           | 25413      | 2.4              |
| Secondary           | Berkeley, WV  | Inwood                | 25428      | 2.4              |
| Secondary           | Grant, WV     | Gormaniam             | 26720      | 2.4              |
| Secondary           | Mineral, WV   | Ridgeley              | 26753      | 2.4              |
| Secondary           | Jefferson, WV | Shepherdstown         | 25443      | 2.2              |
| Secondary           | Jefferson, WV | Harpers Ferry         | 25425      | 2.2              |
| Secondary           | Berkeley, WV  | Martinsburg           | 25403      | 2.2              |
| Secondary           | Berkeley, WV  | Hedgesville           | 25427      | 2.2              |
| Secondary           | Grant, WV     | Mount Storm           | 26739      | 2.2              |
| Secondary           | Mineral, WV   | Burlington            | 26710      | 2                |
| Secondary           | Mineral, WV   | Fort Ashby            | 26719      | 2                |
| Secondary           | Grant, WV     | Maysville             | 26833      | 2                |
| Secondary           | Grant, WV     | Cabins                | 26855      | 1.8              |
| Secondary           | Mineral, WV   | New Creek             | 26743      | 1.6              |
| Secondary           | Berkeley, WV  | Gerrardstown          | 25420      | 1.4              |

**Exhibit 38: Community Need Index™ Score by County and ZIP Code, 2018**



Source: ESRI 2019, Created by Planning and Business Development

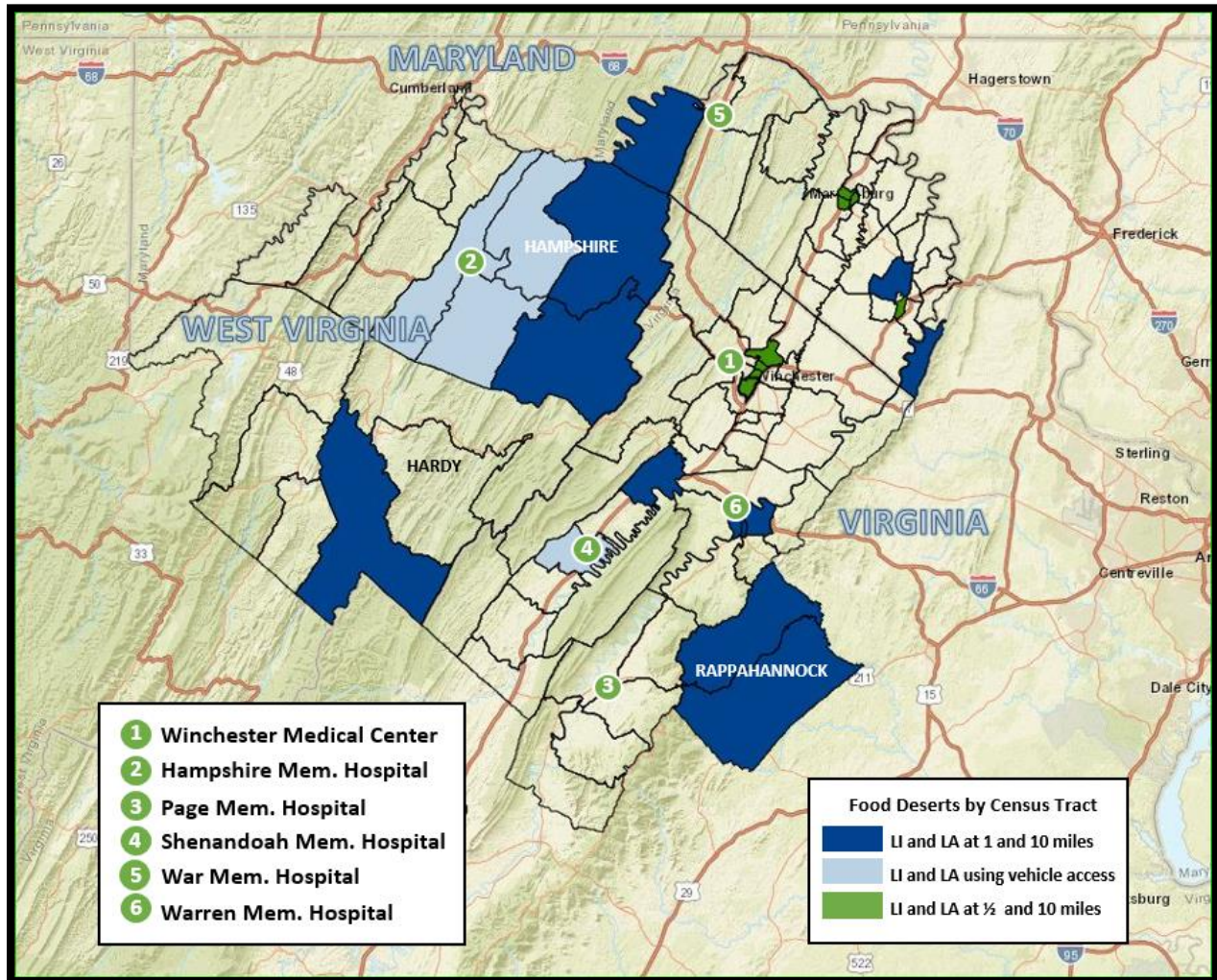
ZIP codes 26750, (Piedmont, Mineral County), 22601 (Winchester City), and 25401 (Martinsburg, Berkeley County), scored in the “Highest Need” category (ranges from 4.2 – 5.0) Areas of middle to high need are located in substantial parts of Clarke, Page, Shenandoah, Warren, Berkeley, Hampshire, Hardy, and Mineral counties (**Exhibit 38**).



## 2. Food Deserts (Lack of Access to Nutritious and Affordable Food)

The U.S. Department of Agriculture’s Economic Research Service estimates the number of people in each census tract that live in a food desert, defined as low-income areas more than one mile from a supermarket or large grocery store in urban areas and more than 10 miles from a supermarket or large grocery store in rural areas. Many government-led initiatives aim to increase the availability of nutritious and affordable foods to people living in these food deserts. **Exhibit 39** illustrates the location of food deserts in the WMC community.

### Exhibit 39: Food Deserts by Census Tract



Source: ESRI 2019, Created by Planning and Business Development

WMC’s community contains 26 census tracts identified as food deserts. These are located in and around Shenandoah and Warren counties, and the City of Winchester in Virginia, and Berkeley, Hampshire, Hardy, Jefferson, Mineral, and Morgan counties in West Virginia. There are two census tracts designated as food deserts within the City of Winchester, VA (**Exhibit 39**).

## Overview of the Health and Social Services Landscape

This section identifies geographic areas and populations in the community that may face barriers accessing care due to medical underservice or a shortage of health professionals.

The section then summarizes various assets and resources available to improve and maintain the health of the community.

### Medically Underserved Areas, Communities, and Populations

Medically Underserved Areas and Populations (MUA/Ps) are designated by the Health Resources and Services Administration (HRSA) based on an “Index of Medical Underservice (IMU).” The IMU calculation is a composite of the ratio of primary medical care physicians per 1,000 persons, the infant mortality rate, the percentage of the population with incomes below the poverty level, and the percentage of the population age 65 or over. Areas with a score of 62 or less are considered “medically underserved”.<sup>34</sup>

**Medically Underserved Area (MUA)** – counties, a group of counties or civil divisions, or a group of urban census tracts in which residents have a shortage of personal health services.

The Index of Medical Underservice designates MUAs as a subset of a Medically Underserved Community. Visit [Medically Underserved Areas and Populations](#) for more.

**Medically Underserved Community (MUC)** – a geographic location or population of individuals eligible for designation by the federal government as a Health Professional Shortage Area, Medically Underserved Area, Medically Underserved Population, or Governor’s Certified Shortage Area for Rural Health Clinic purposes.

As an umbrella term, MUC also includes populations such as homeless individuals, migrant or seasonal workers, and residents of public housing.

**Medically Underserved Populations (MUPs)** – federally-designated population groups having a shortage of personal health services, often defined as groups who face economic, cultural, or linguistic barriers to health care, and limited access to services.

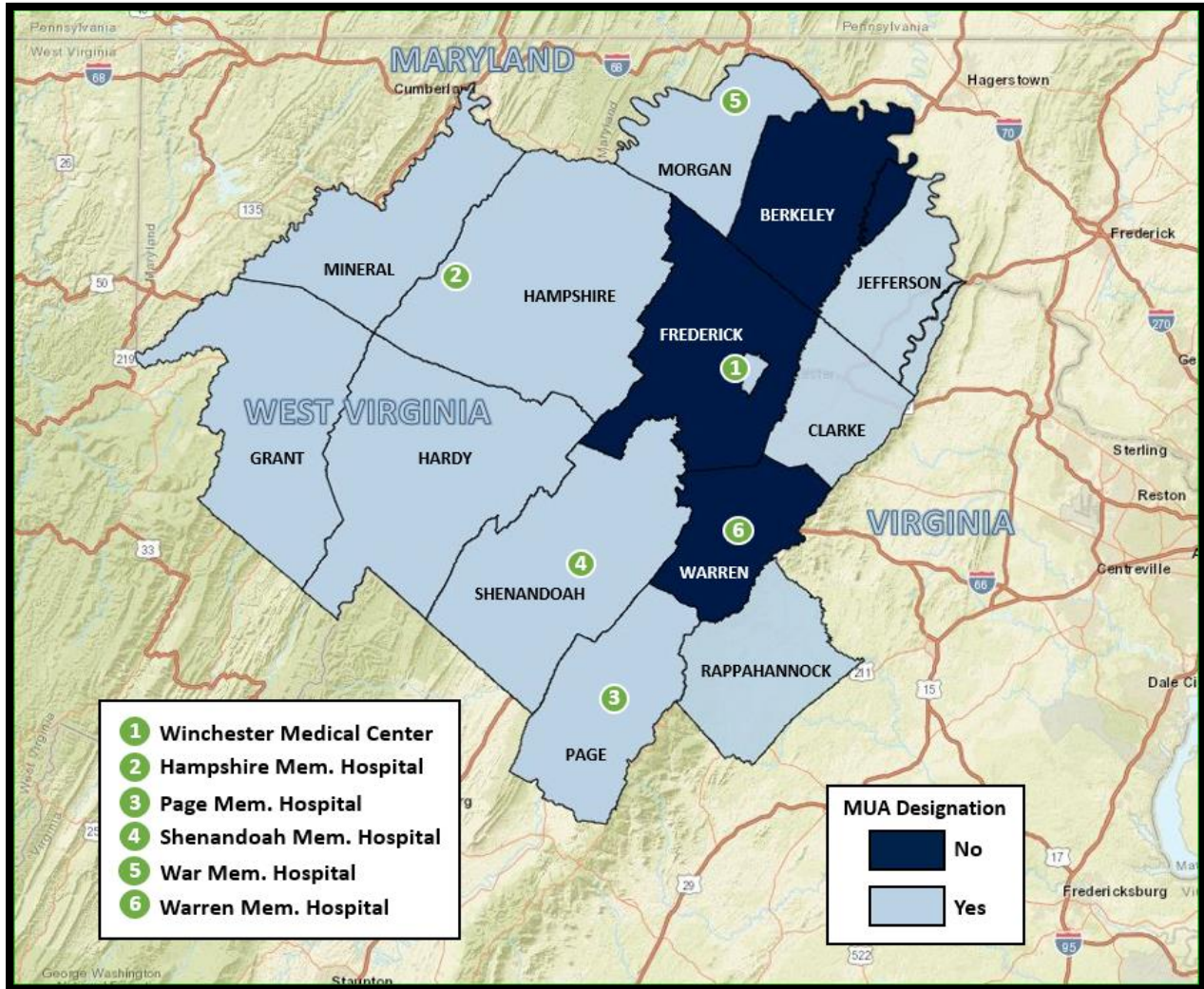
The Index of Medical Underservice designates MUPs.

---

<sup>34</sup> U.S. Health Resources and Services Administration. (n.d.) *Guidelines for Medically Underserved Area and Population Designation*. Retrieved 2012, from <http://bhpr.hrsa.gov/shortage/muaps/index.html>.



**Exhibit 40: Medically Underserved Areas and Populations, 2018**



Source: ESRI 2019, Created by Planning and Business Development

**Exhibit 40** shows areas designated by HRSA as medically underserved for mental, dental, and primary care professionals. Eleven of the fourteen counties are classified as a MUA within WMC’s community.

**Exhibit 41A: Medically Underserved Areas and Populations and Health Professional Shortage Areas, 2018<sup>35</sup>**

| Service Area Name            | Designation Type                 | Primary State Name | Index of Medical Underservice Score | Status     | Rural Status    |
|------------------------------|----------------------------------|--------------------|-------------------------------------|------------|-----------------|
| CLARKE SERVICE AREA          | Medically Underserved Area       | Virginia           | 48                                  | Designated | Non-Rural       |
| Low Income - Winchester Area | Medically Underserved Population | Virginia           | 59.3                                | Designated | Non-Rural       |
| CT 0001.00                   |                                  |                    |                                     |            |                 |
| CT 0003.01                   |                                  |                    |                                     |            |                 |
| CT 0003.02                   |                                  |                    |                                     |            |                 |
| Low Income - Page County     | Medically Underserved Population | Virginia           | 57                                  | Designated | Rural           |
| Rappahannock County          | Medically Underserved Area       | Virginia           | 58.6                                | Designated | Partially Rural |
| Shenandoah County-MUA        | Medically Underserved Area       | Virginia           | 59.9                                | Designated | Rural           |

Source: Health and Human Services Administration, 2018

**Exhibit 41B: Medically Underserved Areas and Populations and Health Professional Shortage Areas, 2018<sup>36</sup>**

| Service Area Name           | Designation Type                 | Primary State Name | Index of Medical Underservice Score | Status     | Rural Status    |
|-----------------------------|----------------------------------|--------------------|-------------------------------------|------------|-----------------|
| Hampshire County            | Medically Underserved Area       | West Virginia      | 61.6                                | Designated | Partially Rural |
| Hardy Service Area          | Medically Underserved Area       | West Virginia      | 49.9                                | Designated | Rural           |
| Jefferson Service Area      | Medically Underserved Area       | West Virginia      | 47.4                                | Designated | Non-Rural       |
| Grant District              | Medically Underserved Area       | West Virginia      | 53.8                                | Designated | Rural           |
| MCD (91296) Grant district  |                                  |                    |                                     |            |                 |
| Union District              | Medically Underserved Area       | West Virginia      | 61.7                                | Designated | Rural           |
| MCD (93216) Union district  |                                  |                    |                                     |            |                 |
| Low Income - Morgan County  | Medically Underserved Population | West Virginia      | 60.7                                | Designated | Rural           |
| Low Income - Mineral County | Medically Underserved Population | West Virginia      | 63.6                                | Designated | Partially Rural |

Source: Health and Human Services Administration, 2018

<sup>35</sup> HRSA, May 2018, Retrieved from: <https://bhwh.hrsa.gov/shortage-designation/muap>

<sup>36</sup> HRSA, May 2018, Retrieved from: <https://bhwh.hrsa.gov/shortage-designation/muap>

## Other Facilities and Resources

### 1. Federally Qualified Health Centers

Federally Qualified Health Centers (FQHCs) are established to promote access to ambulatory care in areas designated as “medically underserved.” These clinics provide primary care, mental health, and dental services for lower-income populations. FQHCs receive enhanced reimbursement for Medicaid and Medicare services and most also receive federal grant funds under Section 330 of the Public Health Service Act. FQHCs throughout the state can be found at: <https://www.findahealthcenter.hrsa.gov>.

---

*Federally Qualified Health Centers are defined as community-based and patient-direct organizations that deliver comprehensive, culturally competent, high-quality primary health care services. Health centers also often integrate access to pharmacy, mental health, substance use disorder, and oral health services in areas where economic, geographic, or cultural barriers limit access to affordable health care services. Health centers deliver care to the nation’s most vulnerable individuals and families, including people experiencing homelessness, agricultural workers, residents of public housing, and the nation’s veterans*

---

**Exhibit 42: Federally Qualified Health Centers**

| Federally Qualified Health Centers                   |                    |            |                         |                  |       |
|--|--------------------|------------|-------------------------|------------------|-------|
| Health Center Name                                   | County             | ZIP CODE   | Street Address          | City             | State |
| SCH Healthy Smiles Dental                            | Berkeley County    | 25404-3800 | 58 Warm Springs Ave     | Martinsburg      | WV    |
| SCH Martinsburg                                      | Berkeley County    | 25401-2890 | 99 Tavern Rd            | Martinsburg      | WV    |
| SCH Mobile   | Berkeley County    | 25401-2890 | 99 Tavern Rd            | Martinsburg      | WV    |
| SCH Behavioral Health                                | Jefferson County   | 25414-5719 | 44 Trifecta Pl          | Charles Town     | WV    |
| Tri-State Community Health Center - Berkeley Springs | Morgan County      | 25411-6247 | 261 Berkmore Pl, Ste 1A | Berkeley Springs | WV    |
| SCH Migrant Outreach                                 | City of Winchester | 22601-4929 | 867 Fairmont Ave        | Winchester       | VA    |
| SCH Winchester                                       | City of Winchester | 22601-3054 | 1330 Amherst St         | Winchester       | VA    |
| Mountaineer Community Health Center, Inc.            | Morgan County      | 25422      | 783 Winchester St       | Great Cacapon    | WV    |

Source: Health and Human Services Administration, 2018, retrieved from <https://findahealthcenter.hrsa.gov/?zip=&radius=5&incrementalsearch=true>

There are currently eight FQHC sites operating in the WMC’s community (**Exhibit 42**).



## 2. Local Clinics and Health Departments

In addition to the FQHCs, there are other clinics in the area that serve lower-income individuals. These include Sinclair Health Clinic (Winchester, VA), St. Luke Community Clinic (Front Royal, VA), Shenandoah Community Health Clinic (Woodstock, VA), Page Free Clinic (Luray, VA), and Good Samaritan Free Clinic (Martinsburg, WV).

In addition to these resources, the Lord Fairfax Health Department (services Clarke, Frederick, Page, Shenandoah, and Warren counties, and the City of Winchester), Berkeley County Health Department, Grant Health Department, Jefferson County Health Department, Hampshire County Health Department, Hardy County Health Department, Mineral County Health Department, and Morgan County Health Department also provide an array of services at locations throughout the region.

## 3. Hospitals

**Exhibit 43** presents information on hospitals facilities that operate in the community. WMC's community contains four acute care hospitals and seven critical access hospitals.

### **Exhibit 43: List of Hospitals in the WMC Community**

| County/City           | Hospital Name                    | Number of Beds | City              | Zip Code     |
|-----------------------|----------------------------------|----------------|-------------------|--------------|
| <b>PSA</b>            |                                  |                |                   |              |
| Hampshire, WV         | Hampshire Memorial Hospital      | 25             | Romney            | 26757        |
| Morgan, WV            | War Memorial Hospital            | 25             | Berkeley Springs  | 25411        |
| Page, VA              | Page Memorial Hospital           | 25             | Luray             | 22835        |
| Shenandoah, VA        | Shenandoah Memorial Hospital     | 25             | Woodstock         | 22664        |
| Warren, VA            | Warren Memorial Hospital         | 60             | Front Royal       | 22630        |
| <b>Winchester, VA</b> | <b>Winchester Medical Center</b> | <b>455</b>     | <b>Winchester</b> | <b>22601</b> |
| <b>SSA</b>            |                                  |                |                   |              |
| Berkeley, WV          | Berkeley Medical Center          | 159            | Martinsburg       | 25401        |
|                       | Martinsburg VA Medical Center    | 90             | Martinsburg       | 25401        |
| Grant, WV             | Grant Memorial Hospital          | 57             | Petersburg        | 26847        |
| Jefferson, WV         | Jefferson Medical Center         | 45             | Charlestown       | 25414        |
| Mineral, WV           | Potomac Valley Hospital          | 25             | Keyser            | 26726        |

Source: Virginia Health Information, 2018, and for WV, American Hospital Directory, 2018.

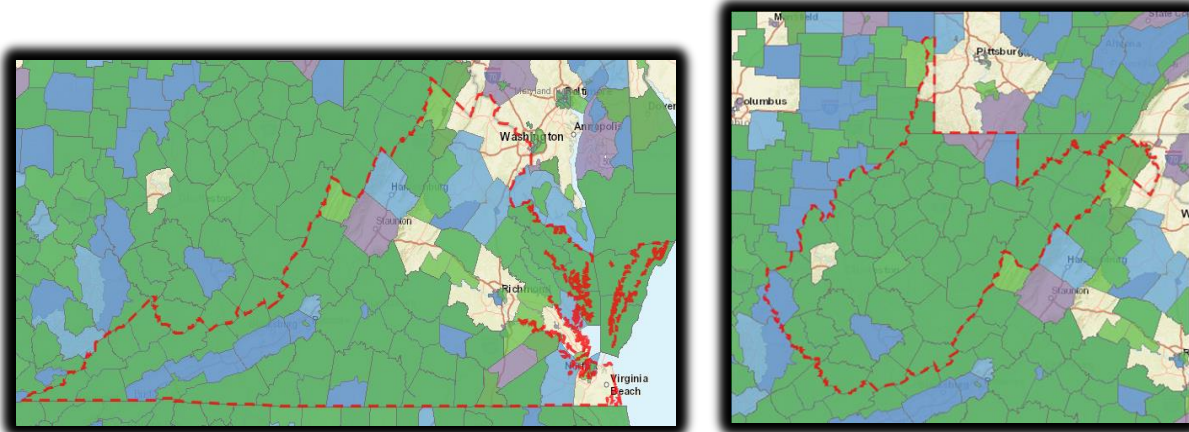
#### 4. Health Professional Shortage Areas

A geographic area can receive a federal Health Professional Shortage Area (HPSA) designation if a shortage of primary medical care, dental care, or mental health care professionals is found to be present.

In addition to areas and populations that can be designated as HPSAs, a health care facility can receive federal HPSA designation and an additional Medicare payment if it provides primary medical care services to an area or population group identified as having inadequate access to primary care, dental, or mental health services.

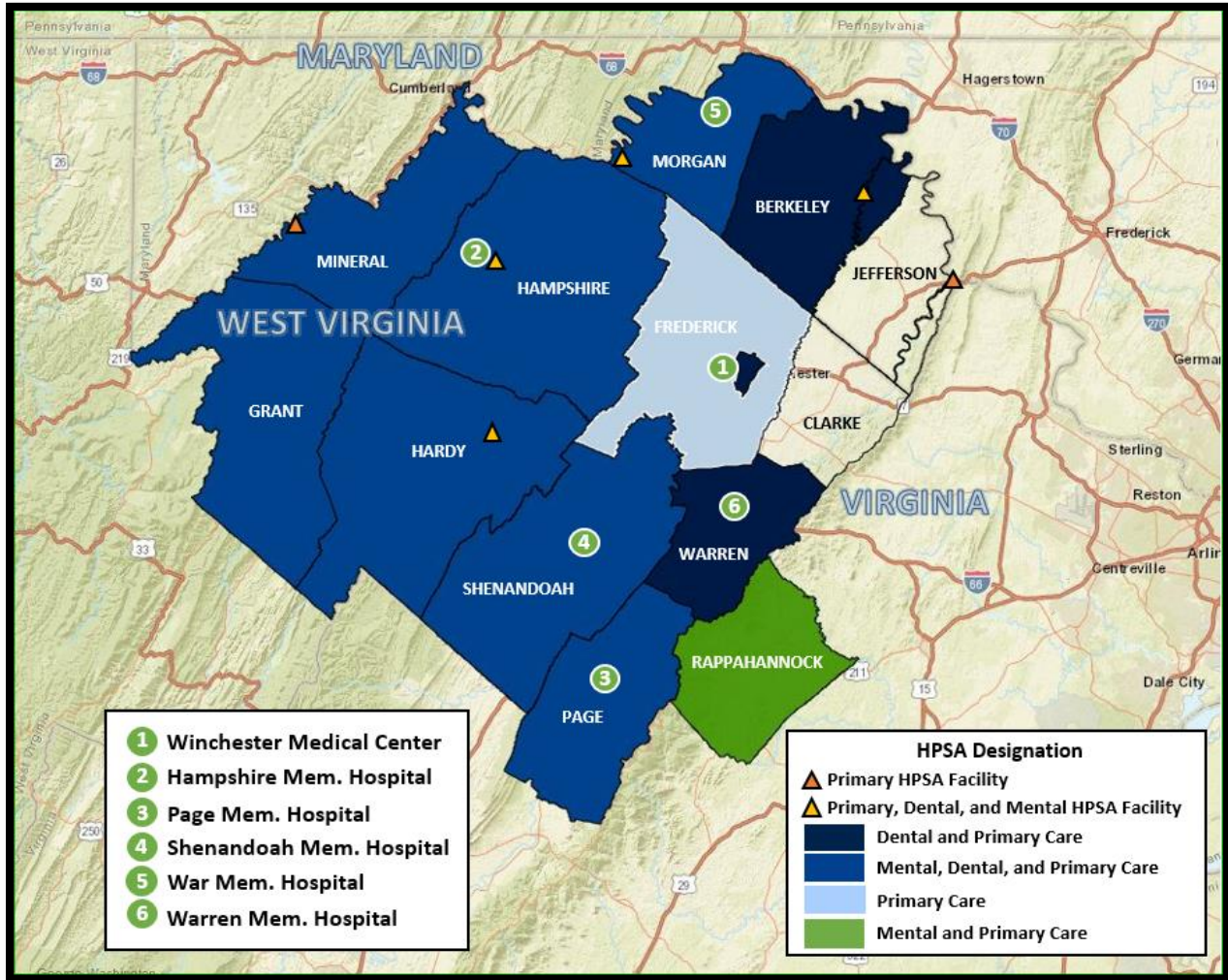
*HPSAs can be: “(1) An urban or rural area (which need not conform to the geographic boundaries of a political subdivision and which is a rational area for the delivery of health services); (2) a population group; or (3) a public or nonprofit private medical facility.”<sup>37</sup>*

Areas and populations in the WMC community are designated as HPSAs (**Exhibit 44A**). Page, Mineral, and Morgan counties are designated as primary medical care, dental, and mental health HPSAs, while Berkeley, Grant and Shenandoah counties are designated as mental health and dental HPSAs. Hardy, Hampshire, Jefferson, and Rappahannock counties are designated as mental health HPSAs, and Winchester City and Warren County are designated as dental HPSAs. Parts of Hampshire and Hardy counties also are considered dental HPSAs.



<sup>37</sup> U.S. Health Resources and Services Administration, Bureau of Health Professionals. (n.d.). *Health Professional Shortage Area Designation Criteria*. Retrieved 2019, from <http://bhpr.hrsa.gov/shortage/hpsas/designationcriteria/index.html>

**Exhibit 44A: Health Professional Shortage Areas Designation, 2018**



Source: ESRI 2019, Created by Planning and Business Development

**Exhibit 44A** shows Health Professional Shortage Area (HPSA) designations that indicate health care provider shortages in primary care, dental health or mental health.

**Exhibit 44B: HPSA Shortage Areas in the WMC Community**

| <b>Discipline</b> | <b>HPSA Name</b>                    | <b>Designation Type</b>    | <b>HPSA Score</b> | <b>Designation Date</b> | <b>Rural Status</b> |
|-------------------|-------------------------------------|----------------------------|-------------------|-------------------------|---------------------|
| Dental Health     | Warren County                       | High Needs Geographic HPSA | 4                 | 10/26/2017              | Partially Rural     |
| Primary Care      | Warren County                       | Geographic HPSA            | 4                 | 12/20/1984              | Partially Rural     |
| Mental Health     | Shenandoah/Page Counties            | High Needs Geographic HPSA | 11                | 04/02/2013              | Rural               |
| Primary Care      | Shenandoah/Page Counties            | Geographic HPSA            | 9                 | 03/20/2017              | Rural               |
| Dental Health     | Shenandoah                          | Geographic HPSA            | 4                 | 12/20/1984              | Rural               |
| Dental Health     | Page County                         | Geographic HPSA            | 15                | 09/10/2001              | Rural               |
| Primary Care      | Mi-Frederick County/Winchester City | Other Population HPSA      | 16                | 07/18/2018              | Non-Rural           |
| Dental Health     | Low Income-Winchester City          | Low Income Population HPSA | 10                | 05/22/2012              | Non-Rural           |
| Primary Care      | E.A. Hawse Health Center            | FQHC                       | 11                | 10/26/2002              | Rural               |
| Dental Health     | E.A. Hawse Health Center            | FQHC                       | 18                | 10/26/2002              | Rural               |
| Mental Health     | E.A. Hawse Health Center            | FQHC                       | 14                | 10/26/2002              | Rural               |
| Primary Care      | Elk Garden Clinic                   | Rural Health Clinic        | 0                 | 11/12/2003              | Rural               |
| Primary Care      | Grant County                        | Geographic HPSA            | 12                | 03/21/2017              | Rural               |
| Primary Care      | Hampshire County                    | Geographic HPSA            | 9                 | 02/24/2014              | Partially Rural     |
| Dental Health     | Hampshire County                    | Low Income Population HPSA | 20                | 04/13/2017              | Partially Rural     |
| Dental Health     | Hampshire Memorial Hospital         | Rural Health Clinic        | 0                 | 01/05/2007              | Rural               |
| Primary Care      | Harpers Ferry Family Medicine       | Rural Health Clinic        | 0                 | 09/30/2009              | Non-Rural           |
| Primary Care      | Low Income-Berkeley County          | Low Income Population HPSA | 13                | 11/09/2016              | Non-Rural           |
| Dental Health     | Low Income-Berkeley County          | Low Income Population HPSA | 11                | 11/14/2013              | Non-Rural           |
| Primary Care      | Low Income-Hardy County             | Low Income Population HPSA | 18                | 2/23/2017               | Rural               |
| Primary Care      | Low Income-Mineral County           | Low Income Population HPSA | 17                | 01/19/2010              | Partially Rural     |
| Mental Health     | Low Income-Mineral County           | Geographic HPSA            | 8                 | 03/30/2017              | Partially Rural     |

| Discipline    | HPSA Name                                 | Designation Type                  | HPSA Score | Designation Date | Rural Status    |
|---------------|---|-----------------------------------|------------|------------------|-----------------|
| Dental Health | Low Income-Morgan County                  | Low Income Population HPSA        | 16         | 02/27/2013       | Rural           |
| Mental Health | Low Income-Petersburg                     | Low Income Population HPSA        | 17         | 07/21/2011       | Partially Rural |
| Dental Health | Low Income-Grant County                   | Low Income Population HPSA        | 17         | 04/24/2012       | Rural           |
| Dental Health | Low Income-Hardy County                   | Low Income Population HPSA        | 18         | 03/28/2017       | Rural           |
| Primary Care  | Low Income-Morgan County                  | Low Income Population HPSA        | 16         | 05/08/2012       | Rural           |
| Mental Health | Morgan County                             | Geographic HPSA                   | 14         | 07/28/2017       | Rural           |
| Primary Care  | Mountaineer Community Health Center, Inc. | Federally Qualified Health Center | 0          | 09/30/2005       | Rural           |
| Dental Health | Mountaineer Community Health Center, Inc. | Federally Qualified Health Center | 0          | 04/30/2007       | Rural           |
| Mental Health | Mountaineer Community Health Center, Inc. | Federally Qualified Health Center | 0          | 04/30/2007       | Rural           |
| Primary Care  | Shenandoah Valley Medical Center          | Federally Qualified Health Center | 14         | 05/23/2003       | Non-Rural       |
| Dental Health | Shenandoah Valley Medical Center          | Federally Qualified Health Center | 9          | 01/13/2004       | Non-Rural       |
| Mental Health | Shenandoah Valley Medical Center          | Federally Qualified Health Center | 17         | 01/13/2004       | Non-Rural       |

Source: Health Professional Shortage Areas (HRSA), Retrieved from: <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

There are seven health care facilities in the WMC community, all in West Virginia, that are designated as HPSA facilities (**Exhibit 44B**).



**Exhibit 45: Health Professionals Rates per 100,000 Population by County/City, 2019**

| Winchester Medical Center<br>County | Primary Care Physicians       |                             | Dentists                   |                             | Mental Health Providers           |                             |
|-------------------------------------|-------------------------------|-----------------------------|----------------------------|-----------------------------|-----------------------------------|-----------------------------|
|                                     | Number Primary Care Providers | Rate per 100,000 population | Number of Dental Providers | Rate per 100,000 population | Number of Mental Health Providers | Rate per 100,000 population |
| <b>PSA</b>                          |                               |                             |                            |                             |                                   |                             |
| Clarke                              | 7                             | 49                          | 5                          | 34                          | 9                                 | 62                          |
| Frederick                           | 36                            | 43                          | 11                         | 13                          | 42                                | 49                          |
| Hampshire                           | 5                             | 21                          | 8                          | 34                          | 14                                | 60                          |
| Hardy                               | 3                             | 22                          | 7                          | 51                          | 6                                 | 44                          |
| Morgan                              | 9                             | 51                          | 5                          | 28                          | 9                                 | 51                          |
| Page                                | 8                             | 34                          | 4                          | 17                          | 8                                 | 34                          |
| Rappahannock                        | 2                             | 27                          | 2                          | 27                          | 6                                 | 82                          |
| Shenandoah                          | 19                            | 44                          | 13                         | 30                          | 21                                | 49                          |
| Warren                              | 21                            | 54                          | 10                         | 25                          | 33                                | 83                          |
| Winchester                          | 74                            | 269                         | 51                         | 183                         | 143                               | 512                         |
| <b>SSA</b>                          |                               |                             |                            |                             |                                   |                             |
| Berkeley                            | 51                            | 45                          | 60                         | 52                          | 186                               | 162                         |
| Grant                               | 6                             | 51                          | 5                          | 43                          | 9                                 | 77                          |
| Jefferson                           | 30                            | 53                          | 18                         | 32                          | 38                                | 67                          |
| Mineral                             | 9                             | 33                          | 9                          | 38                          | 22                                | 81                          |
| <b>Virginia</b>                     | <b>6423</b>                   | <b>76</b>                   | <b>5749</b>                | <b>68</b>                   | <b>13494</b>                      | <b>159</b>                  |
| <b>West Virginia</b>                | <b>1443</b>                   | <b>79</b>                   | <b>974</b>                 | <b>54</b>                   | <b>2183</b>                       | <b>120</b>                  |

Source: Data provided by County Health Rankings, 2019.

Primary care providers and dental availability are below the Virginia and West Virginia averages in all areas except Winchester City. In Berkeley County and the City of Winchester, mental health provider availability is above the Virginia and West Virginia averages (**Exhibit 45**).



## 5. Other Community Resources

There is a wide range of agencies, coalitions, and organizations available in the region served by Winchester Medical Center. 2-1-1 Virginia and West Virginia maintains a large database to help refer individuals in need to health and human services in Virginia and West Virginia. For Virginia, this is a service of the Virginia Department of Social Services provided in partnership with the Council of Community Services, The Planning Council, the United Way of Central Virginia, and the United Way of Greater Richmond & Petersburg, and can be found at <https://211virginia.org/consumer/>. In West Virginia, the program is a collaborative project of the United Ways of West Virginia and can be found at <http://www.wv211.org/what-we-do>.

The other organizations accessible through the 211 Virginia, and 211 West Virginia provide the following types of services and resources include:

- Alzheimer's assistance
- Basic human needs (food banks, shelters, rent or utility assistance)
- Child care referral centers
- Child development
- Consumer counseling
- Crisis intervention
- Disability services
- Domestic violence programs
- Education
- Energy assistance
- English as a second language classes
- Family counseling
- Financial assistance
- HIV/AIDS programs
- Home health care
- Homeless services
- Legal assistance
- Maternal and child health care
- Mentorship opportunities
- Parenting programs
- Physical and mental resources
- Senior services
- Support for children, youth and families (examples: after school programs, tutoring, mentorship programs, family resource centers)
- Substance abuse
- Suicide prevention
- Transportation
- Volunteer opportunities
- Work initiatives (examples: educational and vocational training programs)

The United Way of Northern Shenandoah Valley publishes “The Community Services Directory.” The directory is a 190-page resource book made possible by volunteer assistance through Northern Virginia Daily and produced as a community service by RR Donnelley. The directory is available for download at <https://www.unitedwaynsv.org/community-service-directory-download>.

**Community organizations that provide services to residents with disabilities:**

- Access Independence
- ADAPT (Adult Day Activities Program Team)
- Adult Care Center of the Northern Shenandoah Valley, Inc.
- Blue Ridge Center for Therapeutic Horsemanship
- Blue Ridge Educational Center
- Blue Ridge Opportunities
- Brain Injury Association of Virginia
- Deaf and Hard of Hearing Services Center, Inc.
- disAbility Law Center of Virginia
- Disabled American Veterans
- F.R.E.E. Foundation of Northern Shenandoah Valley
- Horizon Goodwill Industries
- Grafton Integrated Health Network
- Home Health Services - Valley Health
- Infant & Toddler Connection of Shenandoah Valley (ITC-SV)
- Literacy Volunteers - Winchester Area
- Lutheran Family Services
- Northwestern Community Services Board
- Northwestern Regional Educational Programs (NREP)
- NW Works, Inc.
- Shenandoah County Search, Inc.
- Shenandoah Valley Community Residences, Inc.
- SHEN-PACO Industries, Inc.
- The Arc of Northern Shenandoah Valley
- The Arc of Warren, Inc.
- Timber Ridge School
- Virginia Autism Resource Center
- Virginia Department for Aging and Rehabilitative Services
- Virginia Relay Center

**Community organizations that provide services for domestic violence:**

- Blue Ridge Legal Services
- Choices, Council on Domestic Violence for Page Co., Inc.
- Response, Inc.
- The Laurel Center
- Virginia Lawyer Referral Service
- Winchester Victim Witness Program

**Community organizations that provide services for employment:**

- Blue Ridge Opportunities
- Disabled American Veterans
- Horizon Goodwill Industries
- NW Works, Inc.
- Senior Community Service Employment Program (SCSEP)
- SHEN-PACO Industries, Inc.
- Virginia Career Works, Shenandoah Valley Region
- Virginia Department for Aging and Rehabilitative Services
- Virginia Employment Commission

**Community organizations that provide services for financial assistance:**

- Blue Ridge Housing Network, Inc.
- C-CAP - Winchester
- Centralized Housing Intake
- Department of Social Services-Clarke County
- Department of Social Services-Frederick County
- Department of Social Services-Shenandoah County
- Department of Social Services-Page County
- Department of Social Services-Warren County
- Department of Social Services-Winchester
- Disabled American Veterans
- Division of Child Support Enforcement
- Faithworks, Inc.
- FISH of Clarke County, Inc.
- Front Royal/Warren County C-CAP
- Highland Food Pantry
- Lord Fairfax Area Food Bank
- Page One of Page County, Inc.
- Shenandoah Alliance for Shelter
- The Arc of Northern Shenandoah Valley
- The Salvation Army - Front Royal/Warren County
- The Salvation Army - Winchester
- Valley Assistance Network

**Community organizations that provide services for food:**

- Bright Futures Frederick/Winchester
- C-CAP – Winchester
- Community Food Pantry in Great Cacapon
- Department of Social Services-Clarke County
- Department of Social Services-Frederick County
- Department of Social Services-Shenandoah County
- Department of Social Services-Page County
- Department of Social Services-Warren County
- Department of Social Services-Winchester
- FISH of Clarke County, Inc.
- Front Royal/Warren County C-CAP
- Highland Food Pantry
- House of Hope
- Lord Fairfax Area Food Bank
- MCIEC Food Pantry (Morgan County)
- Morgan County Interfaith Emergency Care
- Page One of Page County, Inc.
- Shenandoah Area Agency on Aging
- Starting Points of Morgan County – Meal Time Community Kitchen
- The Salvation Army - Front Royal/Warren County
- The Salvation Army - Winchester
- Valley Assistance Network
- Winchester Rescue Mission

**Community organizations that provide services for health resource:**

- AIDS Response Effort, Inc.
- Alzheimer's Association
- American Cancer Society
- American Lung Association
- American Red Cross of the Shenandoah Valley
- Berkeley County Meals on Wheels
- Blue Ridge Hospice
- Blue Ridge Poison Center
- Brain Injury Association of Virginia
- Dental Clinic of NSV
- Department of Social Services-Clarke County
- Department of Social Services-Frederick County
- Department of Social Services-Shenandoah County
- Department of Social Services-Page County
- Department of Social Services-Warren County
- Department of Social Services-Winchester
- Diabetes Management Program Valley Health
- Dr. Terry Sinclair Health Clinic
- F.R.E.E. Foundation of Northern Shenandoah Valley

- Faith in Action
- Good Samaritan Free Clinic
- Home Health Services - Valley Health
- Lions Clubs Eyeglasses Program of Winchester/Frederick County
- Lord Fairfax Health District (Health Departments)
- Page County Free Clinic
- Shenandoah Community Health Clinic
- Shenandoah Valley Compassionate Care Pharmacy
- Special Love, Inc. - Camp Fantastic
- St. Luke Community Clinic
- Valley Health System
- Virginia Relay Center

**Community organizations that provide housing & shelter services:**

- AIDS Response Effort, Inc.
- American Red Cross of the Shenandoah Valley
- Arise of Page County
- Bethany House (Martinsburg, WV)
- Blue Ridge Habitat for Humanity
- Blue Ridge Housing Network, Inc.
- Centralized Housing Intake
- Choices, Council on Domestic Violence for Page Co., Inc.
- Council on Alcoholism - Lord Fairfax House
- Faithworks, Inc.
- Family Promise of Shenandoah County
- Grace House
- Habitat for Humanity of Page County
- Habitat for Humanity of Warren County
- Henry & William Evans Home for Children
- House of Hope
- Keyser Housing Authority
- Martinsburg Housing Authority
- Martinsburg Union Rescue Mission
- Mission Serve Group
- New Eve Maternity Home
- Northwestern Community Services Board
- People Incorporated of Virginia
- Phoenix Project
- Piedmont Housing Authority
- Response, Inc.
- Shenandoah Alliance for Shelter
- Shenandoah County Search, Inc.
- Shenandoah Valley Community Residences, Inc.
- SHEN-PACO Industries, Inc.
- The Laurel Center

- The Salvation Army - Front Royal/Warren County
- The Salvation Army - Winchester
- Valley Assistance Network
- Valley Light Foundation
- Virginia Department of Veterans Services
- Volunteers of America Chesapeake
- Winchester Area Temporary Thermal Shelter (WATTS)
- Winchester Rescue Mission

**Community organizations that provide pregnancy & parenting resources:**

- A Small Hand
- ABBA Care Inc.
- Community Prenatal Access
- Division of Child Support Enforcement
- Front Royal Pregnancy Center
- Healthy Families Northern Shenandoah Valley
- Healthy Families Page and Shenandoah Counties
- Lord Fairfax Health District (Health Departments)
- New Eve Maternity Home
- reSolutions, Inc.
- Shenandoah County Pregnancy Center
- The Life Center of Page Valley
- The Red Wagon Ministry
- Virginia Autism Resource Center

**Community organizations that provide senior services:**

- AARP Tax-Aide Volunteer Income Tax Assistance
- Adult Care Center of the Northern Shenandoah Valley, Inc.
- Alzheimer's Association
- Blue Ridge Hospice
- Department of Social Services-Clarke County
- Department of Social Services-Frederick County
- Department of Social Services-Shenandoah County
- Department of Social Services-Page County
- Department of Social Services-Warren County
- Department of Social Services-Winchester
- Faith in Action
- Godfrey Miller Historic Home and Fellowship Center
- Senior Community Service Employment Program (SCSEP)
- Shenandoah Area Agency on Aging
- The Red Wagon Ministry
- Virginia Department for Aging and Rehabilitative Services



**Community organizations that provide substance abuse services:**

- Alcoholics Anonymous
- Bridging the Gaps
- Council on Alcoholism - Lord Fairfax House
- Edgehill, A Recovery Retreat Center
- Grace House
- Narcotics Anonymous
- Northwestern Community Services Board
- Northern Shenandoah Valley Substance Abuse Coalition
- Strength in Peers
- The Warren Coalition

**Community organizations that provide veterans services:**

- Community Veterans Engagement Board
- Disabled American Veterans
- Virginia Department of Veterans Services
- Virginia Employment Commission

**Community organizations that provide youth development services:**

- Big Brothers Big Sisters of Northwest Virginia
- Blue Ridge Center for Therapeutic Horsemanship
- Blue Ridge Educational Center
- Boy Scouts of America - Shenandoah Area Council
- Bright Futures Frederick/Winchester
- CFW - Child Foster Care
- Child Safe Center
- Department of Social Services-Clarke County
- Department of Social Services-Frederick County
- Department of Social Services-Shenandoah County
- Department of Social Services-Page County
- Department of Social Services-Warren County
- Department of Social Services-Winchester
- Families Reaching Out Group (Froggy's Closet)
- Girl Scout Council of the Nation's Capital
- Grafton Integrated Health Network
- Henry & William Evans Home for Children
- Heritage Child Development Center
- I'm Just Me Movement
- Infant & Toddler Connection of Shenandoah Valley (ITC-SV)
- Lutheran Family Services
- Moms in Motion
- Northwestern Community Services Board
- Shenandoah Valley Discovery Museum
- Skyline Community Action Partnership - Headstart
- Special Love, Inc. - Camp Fantastic

- The Kids Club of Northern Shenandoah Valley
- The Reading Road Show - Gus Bus
- Timber Ridge School
- Virginia Cooperative Extension
- Youth Development Center, Inc.

United Way of the Eastern Panhandle Partner Agency List is available at <https://www.uwayep.org/partner-agencies>.

- American Red Cross
- BE-Hive, A Family Inspiration Place, Inc.
- Berkeley County BackPack Program
- Berkeley Senior Services
- BlackCat Music Cooperative
- Boys & Girls Club of the Eastern Panhandle
- CASA of the Eastern Panhandle
- Catholic Charities West Virginia, Inc.
- CCAP/Loaves & Fishes
- CenterPointe Church
- Children First Child Development Center
- Children's Home Society of WV
- Church Without Walls Ministries, Inc.
- Community Alternatives to Violence
- Community Networks, Inc.
- Destiny Baptist Church
- EVAK K9 Search and Rescue Team, Inc.
- Faith Community Coalition for the Homeless
- For Love of Children (The Outdoor Education Center)
- Girl Scouts Nation's Capital
- Good Samaritan Free Clinic
- Good Shepherd Interfaith Volunteer Caregivers, Inc.
- Horses with Hearts
- Junior Mentoring Programs (JUMP)
- Leetown Science Center
- Martinsburg Renew, Inc.
- Meals on Wheels of Berkeley County
- Meals on Wheels of Jefferson County
- Morgan County Partnership
- Morgan County Starting Points
- Norborne Preschool & Day Care Center, Inc.
- Panhandle Home Health, Inc.
- Partnership for Affordable Housing
- Potomac Valley Audubon Society
- PurposeFULL Paws
- Shepherdstown Day Care
- Spring Mills High School
- Wildwood Middle School
- WV Coalition to End Homelessness

6. Food Pantries and Soup Kitchens

**Exhibit 46A: Food Pantries and Soup Kitchens in the WMC Community**

| <b>Free Food Pantries</b>                  |   |  |
|--|---|--|
| <b>Winchester City</b>                     | <b>Address/Phone</b>                                | <b>Hours</b>   |
| Highland Food Pantry                       | 446 Highland Avenue<br>(540) 662-0809               | Tuesdays 9-11AM and 6:30-8PM   |
| Hope Again Care Center                     | 213 S. Braddock Street<br>(540) 450-8935            | Tuesday-Thursday 10AM-2PM<br>Saturdays (1st – 4th) 9AM-12 Noon                         |
| Centenary United Church                    | 202 S. Cameron Street<br>(540) 662-9067             | 2nd and 4th Fridays from 1:00– 2:00 p.m.   |
| C-CAP                                      | 112 S. Kent Street<br>(540) 662-4318                | Monday-Thursday 8:30AM-2:30PM, Friday 8:30-11:30AM                                     |
| Winchester Rescue Mission                  | 435 N. Cameron Street<br>(540) 667-5379             | Monday-Saturday 10-10:30AM   |
| Lord Fairfax Area Food Bank                | 1802 Roberts Street<br>(540) 450-1799               | Monday-Friday 8:30AM-3:30PM, one time only for families                                |
| <b>Frederick County</b>                    |   |  |
| St. Paul’s on the Hill                     | 1527 Senseny Road, Winchester<br>(540) 667-8110     | 1st Sunday of each month 1-3PM   |
| Salvation Army                             | 300 Fort Collier Road, Winchester<br>(540) 662-4777 | Monday, Wednesday and Friday 8:30-11AM<br>Walmart Truck: 1:30-2PM Tuesday and Thursday |
| The Life Church                            | 199 Agape Way, Stephens City<br>(703) 330-0881      | 2nd and 4th Mondays 6PM  |
| Olive Branch Food Pantry at Victory Church | 2870 Middle Road, Winchester<br>(540) 667-9400      | Wednesdays 12:30-1:30PM  |
| Stephens City United Methodist Church      | 5291 Main Street, Stephens City<br>(540) 869-2348   | Tuesdays 12:30-3PM, 3rd Tuesdays 6:30-8PM  |
| Welltown United Methodist Church           | 1444 Welltown Road, Winchester<br>(540) 665-0433    | Thursdays 5:30-7PM   |
| Greenway Spirit & Word Fellowship          | 1275 Tasker Road, Stephens City<br>(540) 868-9110   | 3rd Wednesday 9-11AM   |

| <b>Free Food Pantries</b>                      |  |   |
|--|--|---|
| <b>Clarke County</b>                           | <b>Address/Phone</b>                               | <b>Hours</b>  |
| FISH of Clarke County                          | 36 E Main St., Berryville<br>(540) 955-1823        | Wednesdays & Saturdays<br>9AM- 12 Noon  |
| Women of Duncan Memorial                       | 210 E. Main St., Berryville<br>(540) 955-3700      | 3rd Friday of the Month (2nd Friday in December) Call first<br>*Must receive Medicaid or SNAP |
| Christ Episcopal Church                        | 843 Bishop Mead Rd., Millwood<br>(540) 837-1112    | 1st Friday at 1PM - Seniors Only<br>1st Saturday 9-11AM                                       |
| <b>Warren County</b>                           |  |   |
| C-CAP  | 316 N. Royal Ave., Front Royal<br>(540) 636-2448   | Monday-Friday 9AM-12 Noon   |
| Front Royal Church of Christ                   | 140 W. 15th St., Front Royal<br>(540) 635-2613     | Monday-Friday, Call for appointment   |
| Loaves and Fishes                              | 613 N. Royal Ave., Front Royal<br>(540) 252-4320   | Tuesday 1-4PM, Thursday and Friday 9M-2PM   |
| Salvation Army                                 | 357 Cloud St., Front Royal<br>(540) 635-4020       | Monday-Friday 9AM-12 Noon, 1:30-3:30PM  |
| <b>Shenandoah County</b>                       |  |   |
| Bread of Life at Woodstock Presbyterian Church | 156 S. Muhlenberg St., Woodstock<br>(540) 459-4419 | 3rd Tuesday & 3rd Thursday<br>1- 4PM  |
| Columbia Furnace Church of the Brethren        | 20910 Senedo Rd., Edinburg<br>(540) 459-1632       | 4th Saturday 8:45-11AM  |
| Compassion Cupboard                            | 533 Burgess St., Strasburg<br>(540 ) 465-3778      | 3rd Tuesday 9AM-12 Noon, 1:15- 3PM  |
| Open Door Food Pantry                          | 11278 Old Valley Pike, Mt. Jackson<br>540-740-8135 | 3rd Thursday 1-6PM  |
| Broadway Presbyterian Church                   | 107 E Lee St. Broadway<br>(540) 896-3903           | 1st and 3rd Thursday 5:30-6:45PM  |
| Loaves and Fishes Pantry at Manor Memorial UMC | 9320 N. Congress St, New Market<br>(540) 740-8959  | 3rd Thursday - 1-6PM  |
| <b>Page County</b>                             |  |   |
| Page One - Luray                               | 35 N. Bank Street, Luray<br>(540) 743-4863         | Monday, Tuesday & Thursday<br>from 8:30-11:30AM   |
| Page One – Shenandoah                          | 600 Comer Lane, Shenandoah<br>(540) 652-8780       | Monday, Wednesday & Friday<br>12 Noon to 4PM  |

| <b>Free Meal/Soup Kitchens</b>               |  |   |
|--|--|---|
| <b>Winchester City</b>                       | <b>Address</b>   | <b>Hours</b>  |
| Winchester Rescue Mission                    | 435 N. Cameron Street<br>(540) 667-5379                                | Breakfast at 6AM. daily,<br>Dinner at 5PM daily   |
| Living Faith Church and Outreach             | 435 N. Cameron Street<br>(Winchester Rescue Mission)<br>(540) 665-2335 | Lunch on Monday, Wednesday<br>and Thursday 11AM-12:30PM   |
| Braddock St. United Methodist Church         | 115 Wolfe Street<br>(540) 667-3366                                     | Dinner on Mondays at 6PM  |
| Jubilee Kitchen at First Presbyterian Church | 116 S. Loudoun Street<br>(540) 662-3824                                | Lunch on Saturdays at<br>11:30AM  |
| Kitchen of Hope at Market St. UMC            | 131 S. Cameron Street<br>(540) 662-6709                                | Dinner on Thursdays at<br>5:30PM  |
| Centenary United Church                      | 202 S. Cameron Street<br>(540) 662-9067                                | Lunch on 2nd and 4th Fridays<br>at 12 Noon  |
| Knights of Columbus                          | 519 S. Cameron Street<br>(540) 662-5545                                | Dinner on Wednesdays at<br>4:30PM   |
| <b>Frederick County</b>                      |  |   |
| Salvation Army                               | 300 Fort Collier Road,<br>Winchester<br>(540) 662-4777)                | Lunch Monday-Friday at 12<br>Noon, Sunday at 1PM, Dinner<br>at 5PM. Monday-Saturday,<br>6PM on Sundays Breakfast<br>Monday-Friday at 6:30AM |
| Emmanuel United Methodist Church             | 2732 Martinsburg Pike,<br>Stephenson<br>(540) 662-1269                 | 2nd and 4th Mondays 4:30-<br>6PM  |
| Trinity Lutheran Church                      | 810 Fairfax Pike, Stephens City<br>(540) 869-4019                      | Last Wednesday of the month<br>5:30PM   |
| <b>Warren County</b>                         |  |   |
| Calvary Episcopal Church                     | 132 N Royal Ave., Front Royal<br>(540) 635-2763                        | Dinner on Tuesdays 4:45-5:45<br>PM  |
| St. John's Catholic Church                   | 131 West Main St., Front Royal<br>(540) 635-6780                       | Dinner on Wednesday 5-6PM<br>and Friday 5-6PM   |
| John Wesley United Methodist Church          | 14 Church St., Front Royal<br>(540) 636-4416                           | 3rd Friday 5PM-7PM  |
| Front Royal Presbyterian Church              | 115 Luray Ave., Front Royal<br>(540) 635-3894                          | Dinner on Thursday 5-6PM  |
| E. Wilson Morrison Elementary                | 40 Crescent St., Front Royal<br>(540) 635-4188                         | Monday-Thursday 11AM-1PM<br>Children & Adults Free<br>Summer Lunch Program<br>(Summer Only)   |



| <b>Free Meal/Soup Kitchens</b>     |   |   |
|------------------------------------|---|---|
| <b>Shenandoah County</b>           |   |   |
| St. Paul's Church                  | 156 W. Washington St.,<br>Strasburg<br>(540) 465-3232 | Dinner on 1st, 3rd & 5th<br>Wednesdays 5:30-7PM                         |
| Strasburg UMC                      | 114 W. Washington St.,<br>Strasburg<br>(540) 465-8788 | Dinner on 2nd & 4th<br>Wednesdays - 5:30-7PM                            |
| Shenandoah<br>Community Fellowship | 197 Patmos Rd., Woodstock<br>(540) 459-2952           | Dinner on 3rd Friday - 5:30-<br>7PM Deliveries Available –<br>must call |
| Reformation Lutheran<br>Church     | 9283 N. Congress St., New<br>Market<br>(540) 740-3239 | Lunch on Thursdays at 11AM  |
| <b>Page County</b>                 |   |   |
| Main Street Baptist<br>Church      | 15 E Main St., Luray<br>(540) 743-5834                | Dinner on Saturdays at<br>5:30PM  |
| Rileyville Baptist<br>Church       | 7044 US Hwy 340 N., Rileyville<br>(540) 743-3003      | 1st and 3rd Thursday 10:30A-<br>1P Free meal for seniors                |

## Exhibit 46B: Food Pantries and Soup Kitchens in the WMC Community

| West Virginia Food Pantries             |  |   |
|---|--|---|
| Berkeley County                         | Address/Phone  | Hours   |
| Church Without Walls                    | Martinsburg, WV<br>(304) 260-9509  | Tuesdays 10:00 am – 1:00 pm<br>3 <sup>rd</sup> Saturday<br>10:00 am – 1:00 pm |
| Loaves and Fishes                       | Martinsburg, WV<br>(304) 267-2810  | Call for hours  |
| Martinsburg Work 4 WV Center            | Martinsburg, WV 25403<br>(304) 267-0030  | Mondays – Thursdays<br>8:30 am – 5:00 pm<br>Fridays<br>9:00 am – 5:00 pm      |
| One-Stop                                | Martinsburg, WV 25401<br>(304) 263-25401   | Daily<br>9:00 am – 1:00 pm  |
| Salvation Army                          | Martinsburg, WV 25401<br>(304) 267-4612<br>(serves Berkeley, Jefferson, and Morgan Counties) | Mondays – Fridays<br>9:00 am – 12:00 pm<br>1:00 pm – 3:00 pm                  |
| Snyder’s Bible Chapel                   | Hedgesville, WV 25427<br>(304) 676-2786  | 3 <sup>rd</sup> Tuesdays<br>9:00 am – 12:00 pm                                |
| Mineral County                          | Address/Phone  | Hours   |
| Faith In Action, Inc.                   | 71 James Street<br>Keyser, WV 26726<br>(304) 788-5331  | Monday – Friday<br>8:00 am – 5:00 pm  |
| Morgan County                           | Address/Phone  | Hours   |
| Amazing Grace Food Pantry               | Christian Church Road<br>Capon Bridge, WV 26711<br>(304) 856-2773                            | Tuesdays 9-11AM and 6:30-8PM  |
| Morgan County Emergency Assistance Team | Berkley Springs, WV 25411<br>(304) 258-2487  | Tuesdays and Fridays<br>9:00 am – 3:00 pm                                     |
| Saint Vincent De Paul Society           | Berkeley Springs, WV 25411<br>(304) 258-1311   | Call for available hours  |

Source: Homeless Shelter Director, Helping The Needy of America, 2018, Retrieved from: <https://www.homelessshelterdirectory.org/cgi-bin/id/cityfoodbanks.cgi?city=Berkeley%20Springs&state=WV>

## Findings of Other Recent Community Health Needs Assessments

Valley Health also considered the findings of other needs assessments published since 2016. Ten such assessments conducted in the WMC area are referenced here, with highlights and summary points below.

### 1. **Homelessness and Medical Vulnerability - Point in Time Survey – 2019** (data from 2018 & 2019)

The statewide 1,000 homes for 1,000 Virginians initiative is led by the Virginia Coalition to End Homelessness, to survey/assess the 1,000 most vulnerable Virginians experiencing homelessness who cycle between streets, emergency shelters, hospital emergency rooms, jails, and prisons. There are eight campaigns representing thirteen counties and over 30 jurisdictions across the Commonwealth. The initiative conducts a Point-in-Time survey that is administered on one night to count the unsheltered homeless persons within the community. The survey is conducted during the last ten days in January. The cities of Harrisonburg and Winchester, and Clarke, Frederick, Page, Rockingham, Shenandoah, and Warren counties are included within the Harrisonburg data collection campaign for 2019. The survey was conducted on January 23, 2019.

Of the thirteen communities across the Commonwealth participating in the 1,000 Homes for 1,000 Virginians initiative, twelve have conducted Registry Weeks to collect information on vulnerability. A Vulnerability Index is used to calculate the survey results.

Key findings from the 2019 Point in Time Survey relevant to this CHNA:

- The Laurel Center in Winchester was closed for a physical move to their new 32 bed facility on January 24, 2018. This impacted Winchester's numbers in 2018. The new 32 bed facility was open during the Point in Count in 2019.
- In 2019, 146 individuals experiencing homelessness for Winchester/Frederick County were identified and surveyed; 19 of those surveyed were identified as unsheltered homeless adults & children. There was an increase of 48 individuals compared to 2018 at 98.
- In 2019, 23 individuals experiencing homelessness for Front Royal/Warren County were identified and surveyed; 17 individuals experiencing homelessness for Woodstock/Shenandoah County were identified and surveyed; 24 individuals experiencing homelessness for Luray/Page County were identified and surveyed.
- In 2019, there were a total of 111 adults in shelters/transitional beds, 16 were homeless children in shelters, and 19 were unsheltered homeless adults. Compared to 2018, there were 89 adults in shelters/transitional beds, 6 were homeless children in shelters, and 6 were unsheltered homeless adults.
- In comparison from 2018 to 2019 there was a 49% increase in homeless individuals who participated in the Point in Time survey.

- Through the coordination with Valley Assistance Network (VAN) in Winchester and area homeless assistance service providers , the Point in Time survey reflects 24 sheltered persons in hotels paid for by local government, churches, and not profit agencies. This contributed to an additional 24 shelter beds to the housing inventory for 2019. Without this emergency shelter effort in place, the unsheltered persons in Winchester, VA would likely be higher according to the survey results.
- In the Winchester Public Schools for 2018, there were 208 students who were homeless compared to Frederick County Public Schools 210 students.
- In 2019, the Point in Time survey identified 16 veterans, and 11 individuals who were unaccompanied youth population between the ages of 18-24.

## 2. Housing Needs and Vulnerability Survey Results – 2018

Survey responses were collected from homeless adults in Harrisonburg, VA, and others participated in interviews from Clarke, Frederick, Page, Rockingham, Shenandoah, Warren Counties, as well as the City of Winchester. The survey was conducted on January 24, 2018.

- There were 137 persons who volunteered to share their personal experience information to help better understand the community and homelessness, the barriers to housing, physical and emotional health, and other demographic information.
- In the last three years (2015-2018), 26 percent of the surveyed population reported being homeless for 4-11 months; when compared to a lifetime duration of 36+ months the percentage increased to 62.4 percent.
- In 2016, the Virginia Point in Time survey identified 793 individuals who were chronically homeless of 4,639 in Virginia, or 17 percent of individuals who were included within the count. For 2018, 21 percent of surveyed adults (26 persons of 127 will full data points gathered) were identified as chronically homeless by HUD’s definition.

---

***HUD Chronic Homeless Definition:***  
***Chronically homeless defined by having a disability and either:***  
***1. 4+times homeless in the past 3 years (duration 1+ year)***  
***2. or one episode of 12+ month duration in the past three years***

---

- Out of the 137 individuals surveyed, 59 percent stayed at least 90 days at their last permanent housing location.
- From the individuals surveyed, reasons most chosen for homelessness was unemployment, unable to pay rent, physical/mental disability, plans with family/friends fell through, dispute with family/friends, evicted, family or personal illness, released from jail, and addiction.

- Top 5 reasons from self-reported barriers to stable housing were cannot find affordable housing, transportation, medical problems, cannot find work, and dental problems.
- In 2018, the average male age was 48, female 40.
- The highest reported age groups was 40-44 years old (20), and 55-59 years old (18).
- 66 percent of the individuals surveyed identified themselves as white/Caucasian, 16 percent black/African American, and 10 percent who identified themselves as Latino/Hispanic.
- Out of the 131 individuals surveyed, 11 (8%) identified themselves as being a veteran. Of those identified as veterans, three (27%) were unsheltered.
- 21 percent of surveyed individuals (28 of 134 adults who answered) reported receiving special education services in high school.
- 20 percent had a less than high school education.
- 72 percent of surveyed adults have served time in jail, and 31 percent reported that they had served time in prison.
- 10 percent stated they were placed in foster care as a child, and 41 percent suffered from childhood trauma, abuse or neglect.
- 51 percent have received treatment for mental health issues.
- 36 percent have been admitted to the hospital for mental health issues (39 individuals declined to answer this question on the survey).
- Respondents reported a total of 99 ER visits in the last 3 months, for an estimated cost of \$1,311,175, assuming an average of \$1,325 per ER visit (130 individuals answered). In the last 12 months respondents reported 182 ER visits (121 individuals answered).
- 81 of the 135 individuals surveyed (60%) indicated they had no medical insurance. 290 days of hospital admission were reported from individuals without insurance.

### **3. United Way of the Northern Shenandoah Valley Community Needs Update: 2014-2017**

The United Way completed a community health needs assessment in April 2014. The assessment includes demographic and social trends in order to update priorities and target contributed funds to the needs that matter the most to the people within the community. Community Impact priorities are used as a tool for planning and as a guide for fund distribution. The United Way has worked with many community partners to focus on mental health issues, update population data and assess their progress, as an organization, in dealing with education, income and health conditions.

Key findings relevant to this CHNA for education include:

- Increased on-time high school graduation rates. The percentage of students in a cohort who earned a Board of Education approved diploma within four years of entering high school went from 87 percent in 2009 to 93 percent in 2012.
- Decrease in the need for kindergarten remediation. The PALS-K is used to identify kindergarten students who are behind in their acquisition of fundamental literacy skills. Between the 2008-2009 and 2013-2014, the need for remedial assistance decreased from 37 percent to 31 percent for Winchester City, 16 percent to 14 percent for Shenandoah County, 15 percent to 13 percent for Warren County, and 12 percent to 10 percent for Clarke County. Frederick and Page counties remained constant at 17 percent and 18 percent respectively, when compared to from the previous reporting period.
- Increase in college participation. The Virginia Department of Education assisted with the creation of the Virginia Longitudinal Data System. This system tracks student success from K-12 through college. For the 2009 to 2012 reporting period, Frederick County college participation rates increased from 64 percent to 65 percent.

### **4. United Way ALICE Project, 2017**

ALICE, an acronym for Asset Limited, Income Constrained, Employed, are households that earn more than the Federal Poverty Level (FPL), but less than the basic cost of living for the county. Combined, the number of poverty and ALICE households equals the total population struggling to afford basic needs. The Economic Viability Dashboard evaluates community conditions for ALICE in three core areas. Each is an index with a scale of 1 (worse) to 100 (better).

- In 2015 for Virginia, 50 percent of the households were considered ALICE population and at poverty level.
- Economic conditions for Clarke County were 65 for housing, 43 for job opportunities, and 42 for community resources. Berryville, VA reported 51 percent of households were at the ALICE or poverty levels.
- Economic conditions for Frederick County were 61 for housing, 52 for job opportunities, and 56 for community resources. Middletown, VA reported 47 percent of their total households were either ALICE or poverty levels, Stephens City was close at 46 percent.



- Economic conditions for Page County were 52 for housing, 64 for job opportunities, and 62 for community resources. Stanley, VA reported 47 percent of their total households were either ALICE or poverty levels, Shenandoah, VA at 52 percent, and Luray, VA at 50 percent.
- Economic conditions for Rappahannock County were 50 for housing, 31 for job opportunities, and 53 for community resources. Chester Gap, VA reported 38 percent of their total households were either ALICE or poverty levels.
- Economic conditions for Shenandoah County were 51 for housing, 47 for job opportunities, and 59 for community resources. Mount Jackson, VA reported 55 percent of their total households were either ALICE or poverty levels, New Market, VA at 53 percent, and Basye, VA at 51 percent. Toms Brook, VA reported the lowest at 29 percent of their total population was considered ALICE or below the FPL.
- Economic conditions for Warren County were 65 for housing, 43 for job opportunities, and 49 for community resources. Front Royal, VA reported 49 percent of their total households were either ALICE or poverty levels.
- Economic conditions for Winchester City were 41 for housing, 53 for job opportunities, and 51 for community resources.

## 5. Page Alliance for Community Action (PACA), 2018

The Page Alliance for Community Action (PACA) conducted a 2018 Needs Assessment Update.<sup>38</sup>

Key findings relevant to this CHNA include:

- There were 17.2 percent of the Page County Population are considered to be in poverty. 15.5 percent are in deep poverty (2012-2016 reporting period). This percentage has increased from 11.9 compared to the previous report (2011-2015).
- Suicide rates in Page County exceeds the rate per 100,000 population in Virginia.
- In 2016, there were 63 meth cases reported for Page County, 47 prescription opioid cases, 17 benzodiazepine cases, and 2 heroin cases. Page County has higher drug use on average of 337.18 for Marijuana than Virginia state average of 276.44.
- Page County's rates for violent crime and robbery are lower than the state and national averages.
- In 2018, there were 8.8 percent of the community responded that they had thought a lot or often about suicide compared to 2016 at 5.8 percent.

---

<sup>38</sup> Page Alliance for Community Action (PACA). (2018). Page County 2018 Needs Assessment Update.

## **6. Page Alliance for Community Action (PACA), Pride and Young Adult Survey, 2015-2017**

The Page Alliance for Community Action (PACA), the “Page County Student Pride Survey,” of the county’s high school students which was compared to the Monitoring the Future national survey.<sup>39</sup>

Key findings relevant to this CHNA include:

- Page County 8<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> graders had a lower rate of tobacco use (6.9%) compared to 2009 at 23.20 percent. It is important to note that these numbers have likely gone up in the last year with the rise of e-cigarette use among youth.
- Page County 8<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> graders had a lower rate of alcohol use in 2017. There was a huge drop in alcohol use from 2009 at 27.2 percent compared to 2015 at 13.5 percent, however, an increase in 2017 at 16.6 percent.
- Page County 8<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> graders had a lower rate of marijuana use for 2017 at 7.6 percent compared to 2009 at 9.3 percent. Marijuana use has consistently dropped in the last few years for students.
- Page County 8<sup>th</sup>, 9<sup>th</sup>, and 11<sup>th</sup> graders had a lower rate of prescription drug use for 2017 at 1.4 percent, compared to 2015 at 5 percent.

## **7. People Incorporated, 2018 Community Needs Assessment**

People Incorporated in the Community Action Agency serving 13 counties and 3 cities in Virginia to include Clarke, Frederick, Page, Shenandoah, and Warren counties, and the City of Winchester.

Key findings relevant to this CHNA include:

- Affordable housing costs continue to rise in the Washington DC metro area and families are relocating to the northern Shenandoah Valley (NSV), placing greater demands on the housing market.
- As the rates of overdose and drug abuse increase, NSV stakeholders are concerned with the availability and cost of mental health and substance abuse services for residents. The region has the fewest mental health providers per resident of any of the regions at 1, 714 residents per provider.
- A living wage for a family of four in the region would be \$15.75 for two, full-time adults with two children, and \$28.90 for one adult with two children. The retail and food service jobs occupied by many low-income persons do not pay nearly this wage. The need for more living wage jobs that are accessible to low-income individuals is seen in all regions.

---

<sup>39</sup> Page Alliance for Community Action (PACA). (2018). Page County Student Pride Survey Results.

- Manufacturing remains the largest industry in the NSV with 20% of total employment.
- In the northern Shenandoah Valley, 29 percent of the population were considered ALICE (Asset Limited, Income Constrained, Employed), and 19 percent fell below the Federal Poverty Level.
- An almost complete lack of public transit is an issue in rural northern Shenandoah Valley.
- Housing vacancy rates have increased in the northern Shenandoah Valley from 11.8 percent to 12.8 percent.
- The median monthly rent in Rappahannock County is \$1,046, but the average monthly income for a renter household is \$2,610.
- In the northern Shenandoah Valley, 19 percent of low-income individuals moved residences in the last year as opposed to those living above the Federal Poverty Line at 11 percent.
- Obesity rates across the United States have a close relationship with poverty. According to data from the CDC, “low income children and adolescents are more likely to be obese than their higher income counterparts. In the northern Shenandoah Valley obesity rates for 2018 were at 29.5 percent.

## 8. Frederick County Department of Social Services, 2017

The Frederick Department of Social Services completed their “Frederick Department of Social Services FY17 Annual Report”<sup>40</sup> to discuss the community’s priorities and performance. The department uses its own secondary data as well as other publicly available data, including the U.S. Census.

Key findings relevant to this CHNA include:

- The number of applications for the Supplemental Nutrition Assistance Program (SNAP) and The Temporary Assistance for Needy Families (TANF) program decreased slightly from 2016 to 2017. Applications received in 2016 were 2,112 for SNAP, and 498 for TANF. In 2017, 2,062 for SNAP, and 480 for TANF based upon applications received.
- Child care provides funding to enhance the quality and affordability of child care services available to families. Child care programs are child-centered, family-focused services that support the family goals and economic self-sufficiency and child development by providing substitute parental protection, guidance, and early childhood education. Child care assistance decreased from 2016 to 2017 from \$590,000 to \$566,000.
- Applications for energy assistance, including fuel assistance, crisis assistance, and cooling assistance, increased from \$226,000 in 2016 to \$231,000 in 2017.

---

<sup>40</sup> Frederick Department of Social Services. (2017). Winchester Department of Social Services FY 2017

## 9. **Blue Ridge Habitat for Humanity, Breaking New Ground Community Impact Report, 2016-2017**

The Blue Ridge Habitat for Humanity (BRHFH) completed a “2016-2017 Community Impact Report”<sup>41</sup> BRHFH’s goal is to increase capacity to serve more individuals in the region, and significantly impact the housing deficit in the communities they serve. BRHFH’s service area has expanded to include Clarke, Frederick, and Shenandoah counties, and the City of Winchester.

Key findings relevant to this CHNA include:

- In Shenandoah County, 37 percent of the county’s population is housing cost burdened.
- 50 percent of the City of Winchester’s population is asset limited, income constrained, and employed.
- Housing construction has a huge economic impact on the local community. On average, home construction creates 3.5 full-time jobs per home each year.

## 10. **West Virginia Statewide Housing Needs Assessment, 2014**

The West Virginia Housing Development Fund engaged Vogt Santer Insights to conduct a statewide housing needs assessment.<sup>42</sup> The assessment provides a comprehensive housing assessment that focuses on the current and anticipated housing need in each of the 55 counties. A detailed analysis of each county has been conducted to include demographic trends, economic and housing market performance, household income projections and anticipated market demand with the focus on affordable housing.

Because it presents some of the same housing concerns as this CHNA, many of its findings are comparable. Items of particular note include:

- Within the state, Jefferson County was one of the five mentioned counties to have the lowest unemployment rate of 4.8 percent as of December 2013.
- Jefferson County has one of the highest projected growth rates among rental household families under age 55, and showed a high growth rate among seniors (age 55 and older).
- Berkeley, Grant, Jefferson, and Hampshire counties had the highest projected growth among senior (age 55 and older) renter households with incomes between 41 percent and 60 percent over Area Median Household Income (AMHI) in the next five years. Hampshire County also showed the lowest projected growth among families under age 55 for rental households.

---

<sup>41</sup> Habitat for Humanity. (2018). *2018 Community Impact Report*, Retrieved from: <https://create.piktochart.com/output/24941385-shaa-final-1182017>.

<sup>42</sup> West Virginia Community Action Partnership. (2012). *Believe in West Virginia: Assessment of Needs Report*. Retrieved, 2013 from: <http://www.wvcommunityactionpartnership.org/pdfs/2012needsassessment.pdf>

## PRIMARY DATA ASSESSMENT

Community input (primary data) was gathered through the design and administration of a community health survey and through key informant interviews. This section summarizes findings from the process.

### Community Survey Findings

The community health survey questionnaire was completed by 2,472 residents from the Winchester Medical Center community, 108 of these surveys were from the Hispanic population.

WMC's survey of community health consisted of questions about a range of health status and access issues, as well as respondent demographic characteristics. The survey was made available from January – March 2019 on Valley Health's web site and was widely publicized at the Valley Health Community Wellness Festival, Lord Fairfax Community College, and at a Mexican Consulate event on the Our Health, Inc. campus.

The survey was also available via e-mail distribution lists, computer kiosks throughout the region, partner organizations, mass mailing, newsletters, social media, and websites. The questionnaire was available in English and Spanish, and paper copies were available on request.

#### 1. Respondent Characteristics

Of the 2,472 surveys from WMC's community:

Almost 69 percent of respondents were female, and 51 percent were between the ages of 35 and 64. Eighty-nine percent were White, and three percent identified as Hispanic or Latino. The majority of respondents reported being in good, very good or excellent overall health. There were 62.7 percent of respondents that reported they were married, employed full time (53 percent), and having an undergraduate degree or higher (55 percent). The majority (98 percent) of respondents speak English in the home. One percent of respondents reported that they spoke multiple languages at home, and six percent reported speaking only Spanish at home.

**Exhibits 47 through 63** summarizes responses from residents of the WMC community.

**Exhibit 47: Survey Respondents by County/City, 2019**

| <b>County/City</b>       | <b>Number of Respondents</b> | <b>Percent of Respondents</b> |
|--------------------------|------------------------------|-------------------------------|
| <b>PSA</b>               | <b>2116</b>                  | <b>85.60%</b>                 |
| Clarke, VA               | 58                           | 2.35%                         |
| Frederick, VA            | 700                          | 28.32%                        |
| Hampshire, WV            | 163                          | 6.59%                         |
| Hardy, WV                | 28                           | 1.13%                         |
| Morgan, WV               | 96                           | 3.88%                         |
| Page, VA                 | 116                          | 4.69%                         |
| Rappahannock, VA         | 14                           | 0.57%                         |
| Shenandoah, VA           | 217                          | 8.78%                         |
| Warren, VA               | 200                          | 8.09%                         |
| Winchester City, VA      | 524                          | 21.20%                        |
| <b>SSA</b>               | <b>215</b>                   | <b>8.70%</b>                  |
| Berkeley, WV             | 132                          | 5.34%                         |
| Grant, WV                | 13                           | 0.53%                         |
| Jefferson, WV            | 27                           | 1.09%                         |
| Mineral, WV              | 43                           | 1.74%                         |
| <b>Totals:</b>           | <b>2331</b>                  | <b>94.30%</b>                 |
| Outside of Market Region | 141                          | 5.70%                         |
| <b>Grand Total</b>       | <b>2472</b>                  | <b>100.00%</b>                |

Source: Valley Health Community Survey, 2019.

Frederick County had the highest percentage of respondents. Residents from the PSA accounted for 85.6 percent of respondents and increase from 2016 at 84.8 percent. The total number of Spanish surveys received was 108 (**Exhibit 47**).



**Exhibit 48: Survey Respondents by Age, 2019**

| Response                 | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|--------------------------|------------------|----------------|------------------------|-------------------------------|
| 15 – 24                  | 5.6%             | 126            | 20.4%                  | 22                            |
| 25 – 34                  | 11.6%            | 261            | 33.3%                  | 36                            |
| 35 – 44                  | 15.5%            | 349            | 20.4%                  | 22                            |
| 45 – 54                  | 19.1%            | 431            | 15.7%                  | 17                            |
| 55 – 64                  | 19.1%            | 430            | 0.0%                   | 0                             |
| 65 – 74                  | 15.9%            | 359            | 0.9%                   | 1                             |
| 75+                      | 13.1%            | 295            | 0.0%                   | 0                             |
| <b>Answered Question</b> |                  | <b>2251</b>    |                        | <b>98</b>                     |
| <b>Skipped Question</b>  |                  | <b>113</b>     |                        | <b>10</b>                     |

Source: Valley Health Community Survey, 2019.

The highest percentage of English-speaking respondents were aged 45-55 and 55-64. The highest percentage of Spanish-speaking 25-34 years of age. Approximately 13.1 percent of total respondents were 75+ years old (**Exhibit 48**).

**Exhibit 49: Survey Respondents by Sex, 2019**

| Response                 | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|--------------------------|------------------|----------------|------------------------|-------------------------------|
| Female                   | 72.5%            | 1713           | 52.8%                  | 57                            |
| Male                     | 21.3%            | 504            | 23.1%                  | 25                            |
| <b>Answered Question</b> |                  | <b>2217</b>    |                        | <b>82</b>                     |
| <b>Skipped Question</b>  |                  | <b>147</b>     |                        | <b>26</b>                     |

Source: Valley Health Community Survey, 2019.

The highest percent of English surveys received were from female population at 72.5 percent; and 52.8 percent of the returned Spanish surveys were completed by females (**Exhibit 49**).

### Exhibit 50: Survey Respondents by Ethnicity, 2019

| Response                  | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|---------------------------|------------------|----------------|------------------------|-------------------------------|
| White                     | 88.8%            | 2020           | 3.7%                   | 4                             |
| Black or African American | 4.9%             | 111            | 0.9%                   | 1                             |
| Hispanic or Latino        | 2.2%             | 49             | 81.5%                  | 88                            |
| Asian                     | 0.8%             | 18             | 0.0%                   | 0                             |
| Two or more races         | 2.6%             | 58             | 2.8%                   | 3                             |
| Other (please specify)    | 0.8%             | 19             | 1.9%                   | 2                             |
| <b>Answered Question</b>  |                  | <b>2275</b>    |                        | <b>98</b>                     |
| <b>Skipped Question</b>   |                  | <b>89</b>      |                        | <b>10</b>                     |

Source: Valley Health Community Survey, 2019.

The White population was the largest group to respond to the English survey at 88.8 percent. There was an increase of Black or African American participants this year at 20.1 percent compared to 2016 at 2.4 percent (**Exhibit 50**).

### Exhibit 51: Survey Respondents by Marital Status, 2019

| Response                 | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|--------------------------|------------------|----------------|------------------------|-------------------------------|
| Co-habiting              | 3.9%             | 90             | 11.1%                  | 12                            |
| Divorced                 | 9.5%             | 216            | 5.6%                   | 6                             |
| Married                  | 61.7%            | 1408           | 21.3%                  | 23                            |
| Not married/single       | 15.0%            | 343            | 24.1%                  | 26                            |
| Widowed                  | 9.8%             | 224            | 0.9%                   | 1                             |
| <b>Answered Question</b> |                  | <b>2281</b>    |                        | <b>78</b>                     |
| <b>Skipped Question</b>  |                  | <b>83</b>      |                        | <b>40</b>                     |

Source: Valley Health Community Survey, 2019.

A majority of the surveys received were from married or co-habiting individuals for both the English and Spanish survey respondents (**Exhibit 51**).

### Exhibit 52: Survey Respondents by Education Attainment, 2019

| Response  | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|---|------------------|----------------|------------------------|-------------------------------|
| College degree or higher  | 54.4%            | 1234           | 9.3%                   | 10                            |
| Did not complete high school(enter highest grade level completed below) | 5.1%             | 115            | 47.2%                  | 51                            |
| High school diploma or GED  | 19.6%            | 444            | 25.0%                  | 27                            |
| Other   | 1.1%             | 26             | 0.0%                   | 0                             |
| Some college  | 19.8%            | 449            | 1.9%                   | 2                             |
| <b>Answered Question</b>  |                  | <b>2268</b>    |                        | <b>90</b>                     |
| <b>Skipped Question</b>   |                  | <b>63</b>      |                        | <b>18</b>                     |

Source: Valley Health Community Survey, 2019.

Most of the English surveys received were from individuals who have earned a college degree or a high school diploma. Among the Spanish survey respondents 47.2 percent had not completed high school and 25.0 percent had earned a high school diploma or GED (**Exhibit 52**).

### Exhibit 53: Survey Respondents by Income, 2019

| Response                 | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|--------------------------|------------------|----------------|------------------------|-------------------------------|
| Less than \$15,000       | 8.6%             | 204            | 27.8%                  | 30                            |
| \$15,000 - \$24,999      | 9.4%             | 223            | 24.1%                  | 26                            |
| \$25,000 - \$34,999      | 7.1%             | 167            | 13.9%                  | 15                            |
| \$35,000 - \$49,000      | 10.8%            | 255            | 11.1%                  | 12                            |
| \$50,000 - \$74,999      | 19.7%            | 465            | 2.8%                   | 3                             |
| \$75,000 - \$99,999      | 12.9%            | 305            | 1.9%                   | 2                             |
| Over \$100,000           | 23.0%            | 543            | 1.9%                   | 2                             |
| <b>Answered Question</b> |                  | <b>2162</b>    |                        | <b>90</b>                     |
| <b>Skipped Question</b>  |                  | <b>202</b>     |                        | <b>18</b>                     |

Source: Valley Health Community Survey, 2019.

Individuals from all income levels were represented among the survey results. Although somewhat evenly distributed, the highest percentage of English survey respondents indicated income over 100,000 (23%), followed by those with income range \$50,000 – \$74,999 (19.7%). The highest number of respondents to the Spanish surveys indicated income levels of less than \$15,000 (27.8%) a decrease in percentage from 2016 at 36.4 percent (**Exhibit 53**).

**Exhibit 54: Survey Respondents by Employment Status, 2019**

| Response                      | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|-------------------------------|------------------|----------------|------------------------|-------------------------------|
| Full time                     | 49.6%            | 1172           | 40.7%                  | 44                            |
| Part time (one job)           | 7.8%             | 184            | 13.0%                  | 14                            |
| Part time (more than one job) | 2.1%             | 49             | 1.9%                   | 2                             |
| Retired                       | 25.0%            | 592            | 0.9%                   | 1                             |
| Student                       | 2.6%             | 61             | 1.9%                   | 2                             |
| Unemployed                    | 3.8%             | 90             | 13.0%                  | 14                            |
| Other (please specify)        | 4.9%             | 116            | 2.8%                   | 3                             |
| <b>Answered Question</b>      |                  | <b>2264</b>    |                        | <b>80</b>                     |
| <b>Skipped Question</b>       |                  | <b>100</b>     |                        | <b>28</b>                     |

Source: Valley Health Community Survey, 2019.

Of the English survey respondents, 49.6 percent reported that they had a full-time job. Over 40 percent of the Spanish survey respondents reported that they had a full-time job, and 13 percent stated they were unemployed (**Exhibit 54**).

**Exhibit 55: Language Spoken in Home, 2019**

| Response                 | Response Percent | Response Count | Spanish Survey Percent | Spanish Survey Response Count |
|--------------------------|------------------|----------------|------------------------|-------------------------------|
| English                  | 94.7%            | 2238           | 1.9%                   | 2                             |
| Spanish                  | 1.1%             | 27             | 82.4%                  | 89                            |
| Other (please specify)   | 1.6%             | 14             | 1.2%                   | 2                             |
| <b>Answered Question</b> |                  | <b>2279</b>    |                        | <b>89</b>                     |
| <b>Skipped Question</b>  |                  | <b>85</b>      |                        | <b>17</b>                     |

Source: Valley Health Community Survey, 2019.

English and Spanish are most frequently spoken in the homes of the respective survey respondents (**Exhibit 55**).

**Exhibit 56: Physical Activity - Children, 2019**

| <b>Response</b>           | <b>Response Percent</b> | <b>Response Count</b> | <b>Spanish Survey Percent</b> | <b>Spanish Survey Response Count</b> |
|---------------------------|-------------------------|-----------------------|-------------------------------|--------------------------------------|
| 1-2 Days a Week           | 6.1%                    | 144                   | 18.5%                         | 20                                   |
| 3-4 Days a Week           | 12.6%                   | 298                   | 21.3%                         | 23                                   |
| 5-6 Days a Week           | 13.2%                   | 311                   | 7.4%                          | 8                                    |
| Every Day (7 days a week) | 10.4%                   | 245                   | 8.3%                          | 9                                    |
| Less than 1 day a week    | 9.9%                    | 235                   | 11.1%                         | 12                                   |
| <b>Answered Question</b>  |                         | <b>1233</b>           |                               | <b>72</b>                            |
| <b>Skipped Question</b>   |                         | <b>1131</b>           |                               | <b>36</b>                            |

Source: Valley Health Community Survey, 2019.

Of the English survey respondents, 13.2 percent reported that their children had some form of physical activity five to six times of week, and over 20 percent of the Spanish survey respondents reported their children had some form of physical activity three to four times a week (**Exhibit 56**).

## 2. Access Issues

### Exhibit 57: Locations Where Respondents Received Routine Healthcare

| Response   | Response Count | Spanish Survey Response Count |
|--|----------------|-------------------------------|
| Traditional medical office (MD, APN, PA)           | 2147           | 37                            |
| Urgent care facility or store-based walk-in clinic | 598            | 13                            |
| Free or low-cost clinic or health center           | 102            | 46                            |
| Local Health Department clinic                     | 71             | 20                            |
| Provider of alternative medicine                   | 122            | 5                             |
| Hospital emergency room                            | 223            | 19                            |
| No routine medical care received                   | 48             | 7                             |
| Other (please specify)                             | 72             | 1                             |

Source: Valley Health Community Survey, 2019.

Survey question 7 asked about access to care and where patients choose to go for routine care. A majority of the English survey respondents stated that they went to a traditional medical office for routine care, however, most of the Hispanic respondents reported that they went to a free or low-cost clinic or health center for care (**Exhibit 57**).

### Exhibit 58A: Respondent Ability to Receive Needed Care, by Type of Care (English)

| Response   | Always | N/A | Never | Rarely | Sometimes | (blank) |
|--|--------|-----|-------|--------|-----------|---------|
| Basic medical care   | 2001   | 7   | 13    | 42     | 267       |         |
| Dental care  | 1955   | 6   | 13    | 37     | 264       | 22      |
| Mental health care   | 1866   | 6   | 13    | 38     | 260       | 11      |
| Medical specialty care (cardiology, neurology, etc.)                                   | 1928   | 6   | 13    | 41     | 262       | 20      |
| Medicine and medical supplies  | 1941   | 6   | 13    | 41     | 263       | 22      |
| Pregnancy care   | 1855   | 6   | 13    | 40     | 257       | 17      |
| Routine screenings (mammograms, laboratory testing, age/gender appropriate screenings) | 1949   | 6   | 13    | 41     | 263       | 25      |

Source: Valley Health Community Survey, 2019.

**Exhibit 58A** suggests that most English survey respondents indicated that they “always” had the ability to access needed care. Basic medical, dental care, mental health, access to proper medicines, routine screenings, and pregnancy care were identified for WMC’s community.

**Exhibit 58B: Respondent Ability to Receive Needed Care, by Type of Care (Spanish)**

| Response   | Always | Never | Rarely | Sometimes | (blank)   |
|--|--------|-------|--------|-----------|-----------|
| Basic medical care   | 30     | 6     | 9      | 47        | <b>0</b>  |
| Dental care  | 20     | 3     | 8      | 36        | <b>22</b> |
| Mental health care   | 18     | 3     | 8      | 33        | <b>11</b> |
| Medical specialty care (cardiology, neurology, etc.)                                   | 20     | 3     | 8      | 32        | <b>20</b> |
| Medicine and medical supplies  | 19     | 3     | 8      | 30        | <b>22</b> |
| Pregnancy care   | 18     | 3     | 6      | 32        | <b>17</b> |
| Routine screenings (mammograms, laboratory testing, age/gender appropriate screenings) | 30     | 6     | 9      | 47        | <b>25</b> |

Source: Valley Health Community Survey, 2019.

**Exhibit 58B** suggests that most Spanish survey respondents indicated that they “sometimes” had the ability to access needed care.” Basic medical and pregnancy care were identified for WMC’s community.



**Exhibit 59A: Access Barriers to Receiving Needed Care, by Service Type (English)**

| Response   | Can't afford it / too expensive | Can't get appointment | Inconvenient hours | Lack of medical providers | Lack of transportation | Language barrier | Other |
|--|---------------------------------|-----------------------|--------------------|---------------------------|------------------------|------------------|-------|
| Basic medical care   | 90                              | 26                    | 17                 | 17                        | 10                     | 4                | 17    |
| Dental care  | 81                              | 17                    | 15                 | 13                        | 8                      | 3                | 15    |
| Mental health care   | 80                              | 19                    | 16                 | 15                        | 8                      | 3                | 14    |
| Medical specialty care   | 79                              | 18                    | 16                 | 15                        | 7                      | 3                | 13    |
| Medicine and medical supplies  | 80                              | 17                    | 15                 | 15                        | 8                      | 4                | 14    |
| Routine screenings (mammograms, laboratory testing, age/gender appropriate screenings) | 77                              | 16                    | 16                 | 14                        | 7                      | 3                | 15    |

Source: Valley Health Community Survey, 2019.

Basic medical care, dental care, mental health care, and access to proper medicines were the most frequently identified services.

**Exhibit 59A** summarizes reasons why respondents have been unable to access these services. Cost and lack of insurance were the most frequently identified access barriers. [Respondents also identified they were unable to get appointments, hours were not convenient for basic medical care]. Among those choosing “other,” most responses cited either cost or a lack of need for services as the reason they did not access care.

**Exhibit 59B: Access Barriers to Receiving Needed Care, by Service Type (Spanish)**

| Response   | Can't afford it / too expensive | Can't get appointment | Inconvenient hours | Lack of medical providers | Lack of transportation | Language barrier | Other |
|--|---------------------------------|-----------------------|--------------------|---------------------------|------------------------|------------------|-------|
| Basic medical care   | 23                              | 1                     | 2                  | 1                         | 3                      | 1                | 5     |
| Dental care  | 18                              | 1                     | 2                  | 1                         | 1                      | 1                | 3     |
| Mental health care   | 15                              | 1                     | 1                  | 1                         | 1                      | 1                | 3     |
| Medical specialty care   | 13                              | 1                     | 1                  |                           | 1                      |                  | 3     |
| Medicine and medical supplies  | 14                              | 1                     | 1                  | 1                         | 1                      |                  | 2     |
| Prenatal Care  | 10                              | 1                     |                    | 1                         | 1                      |                  | 1     |
| Routine screenings (mammograms, laboratory testing, age/gender appropriate screenings) | 14                              |                       | 2                  | 1                         | 1                      | 1                | 1     |

Source: Valley Health Community Survey, 2019.

**Exhibit 59B** summarizes reasons why respondents have been unable to access these services. Cost of insurance was the most frequently identified access barrier for the Spanish survey respondents.

**Exhibit 60: How do you pay for healthcare?**

| <b>Response</b>   | <b>Response Percent</b> | <b>Response Count</b> | <b>Spanish Survey Percent</b> | <b>Spanish Survey Response Count</b> |
|---|-------------------------|-----------------------|-------------------------------|--------------------------------------|
| Cash (no insurance)   | 6.0%                    | 143                   | 61.1%                         | 66                                   |
| Charity care  | 0.4%                    | 9                     | 1.9%                          | 2                                    |
| Medicaid  | 3.7%                    | 87                    | 7.4%                          | 8                                    |
| Medicare  | 18.3%                   | 433                   | 1.9%                          | 2                                    |
| Other (please specify)  | 4.0%                    | 95                    | 3.7%                          | 4                                    |
| Private health insurance (for example: Anthem, Blue Cross, HMO) | 65.2%                   | 1541                  | 10.2%                         | 11                                   |
| Veterans' Administration  | 1.0%                    | 24                    | 0.9%                          | 1                                    |
| <b>Answered Questions</b>                                       |                         | <b>1773</b>           |                               | <b>94</b>                            |
| <b>Skipped Questions</b>  |                         | <b>50</b>             |                               | <b>14</b>                            |

Source: Valley Health Community Survey, 2019.

**Exhibit 60** shows that 65.2 percent of English survey respondents have private health insurance coverage and 18.3 percent have Medicare coverage. Those without health insurance were much more likely to use free or low-cost clinics and health centers or hospital emergency rooms for routine healthcare. The Spanish surveys indicated that 61.1 percent of that respondent population paid cash for their healthcare, that only 10.2 percent had private insurance.

### 3. Health Issues

#### Exhibit 61A English Survey Respondents

**Question: Which of the following do you believe are the three most important factors for a healthy community? Check only 3**

| Issue                                       | Count | Percent Responded |
|---|-------|-------------------|
| Jobs and stable economy                     | 1191  | 48.2%             |
| Access to health care (e.g., family doctor) | 1040  | 42.1%             |
| Safe place to raise children                | 889   | 36.0%             |
| Low crime/safe neighborhoods                | 700   | 28.3%             |
| Healthy behaviors and lifestyles            | 572   | 23.1%             |
| Excellent schools                           | 569   | 23.0%             |
| Affordable housing                          | 541   | 21.9%             |
| Strong family life                          | 421   | 17.0%             |
| Religious/spiritual values                  | 405   | 16.4%             |
| Clean environment                           | 346   | 14.0%             |
| Parks/recreation facilities                 | 174   | 7.0%              |
| Healthy race relations                      | 158   | 6.4%              |
| Low level of child abuse                    | 110   | 4.4%              |
| Low adult death/disease rates               | 81    | 3.3%              |
| Arts and cultural events                    | 61    | 2.5%              |
| Low infant death rate                       | 59    | 2.4%              |
| Other (please specify)                      | 52    | 2.1%              |

Source: Valley Health System, 2019

Over 40 percent of respondents indicated jobs, a stable economy, and access to care were among the most important factors for a healthy community. Affordable housing, excellent schools, healthy behaviors and lifestyles, low crime/safe neighborhoods, and safe place to raise children were identified by over 20 percent of respondents as among the most important factors (**Exhibit 61A**).

### Exhibit 61B Spanish Survey Respondents

**Question: Which of the following do you believe are the three most important factors for a healthy community? Check only 3**

| Issue                                       | Count | Percent Responded |
|---|-------|-------------------|
| Safe place to raise children                | 50    | 14.0%             |
| Access to health care (e.g., family doctor) | 44    | 12.3%             |
| Jobs and stable economy                     | 42    | 11.8%             |
| Clean environment                           | 35    | 9.8%              |
| Low crime/safe neighborhoods                | 32    | 2.9%              |
| Healthy behaviors and lifestyles            | 21    | 5.9%              |
| Affordable housing                          | 21    | 5.9%              |
| Excellent schools                           | 20    | 5.6%              |
| Strong family life                          | 20    | 5.6%              |
| Healthy race relations                      | 13    | 3.6%              |
| Low level of child abuse                    | 13    | 3.6%              |
| Parks/recreation facilities                 | 12    | 3.4%              |
| Arts and cultural events                    | 12    | 3.4%              |
| Religious/spiritual values                  | 11    | 3.1%              |
| Low infant death rate                       | 7     | 2.0%              |
| Low adult death/disease rates               | 4     | 1.1%              |

Source: Valley Health System, 2019

Over 50 percent of respondents indicated that a safe place to raise children, access to care, jobs and a stable economy were among the most important factors for a healthy community. A clean environment, low crime/safe neighborhoods, healthy behaviors and lifestyles, and affordable housing were identified by over 30 percent of respondents as among the most important factors (**Exhibit 61B**).

## Exhibit 62A English Survey Respondents

**Question: Which of the following do you believe are the three most significant health problems in our community? (Those problems which have the greatest impact on overall community health)? Check only 3**

| Issue                                       | Count | Percent Responded |
|---|-------|-------------------|
| Being overweight                            | 751   | 30.4%             |
| Mental health (depression, bipolar, autism) | 741   | 30.0%             |
| Low income/financial issues                 | 683   | 27.6%             |
| Cancer                                      | 437   | 17.7%             |
| Access to healthy food                      | 299   | 12.1%             |
| Diabetes                                    | 296   | 12.0%             |
| Affordable housing                          | 289   | 11.7%             |
| Heart disease                               | 282   | 11.4%             |
| Tobacco use/smoking                         | 265   | 10.7%             |
| Not enough exercise                         | 260   | 10.5%             |
| Poor dietary choices                        | 248   | 10.0%             |
| Homelessness                                | 247   | 10.0%             |
| High blood pressure                         | 189   | 7.6%              |
| Domestic violence                           | 137   | 5.5%              |
| Childhood obesity                           | 122   | 4.9%              |
| Alzheimer's or dementia                     | 119   | 4.8%              |
| Suicide                                     | 101   | 4.1%              |
| Vaping/juuling                              | 100   | 4.0%              |
| Dental health                               | 95    | 3.8%              |
| Other (please specify)                      | 94    | 3.8%              |
| Respiratory/lung disease                    | 65    | 2.6%              |
| Teenage pregnancy                           | 50    | 2.0%              |
| Sexually transmitted diseases (STDs)        | 45    | 1.8%              |
| Motor vehicle crash injuries                | 42    | 1.7%              |
| Asthma                                      | 35    | 1.4%              |
| Poor air quality                            | 34    | 1.4%              |
| Stroke                                      | 24    | 1.0%              |

Source: Valley Health System, 2019

Over 30 percent of respondents indicated being overweight, and mental health among the most significant health problems in the community. Low income, financial stability, cancer, access to healthy foods, diabetes, affordable housing, and heart disease were identified by over 11 percent of respondents as among the most significant health problems (**Exhibit 62A**).

## Exhibit 62B Spanish Survey Respondents

**Question: Which of the following do you believe are the three most significant health problems in our community? (Those problems which have the greatest impact on overall community health)? Check only 3**

| Issue                                       | Count | Percent Responded |
|---|-------|-------------------|
| Being overweight                            | 40    | 12.5%             |
| Diabetes                                    | 40    | 12.5%             |
| Access to healthy food                      | 24    | 7.5%              |
| Cancer                                      | 22    | 6.9%              |
| High blood pressure                         | 15    | 4.7%              |
| Childhood obesity                           | 14    | 4.4%              |
| Domestic Violence                           | 14    | 4.4%              |
| Not enough exercise                         | 14    | 4.4%              |
| Teen Pregnancy                              | 14    | 4.4%              |
| Dental health                               | 13    | 4.0%              |
| Substance Abuse                             | 12    | 3.7%              |
| Low income/financial issues                 | 11    | 3.4%              |
| Poor dietary choices                        | 12    | 3.7%              |
| Tobacco use/smoking                         | 11    | 3.4%              |
| Heart disease                               | 9     | 2.8%              |
| Respiratory/lung disease                    | 9     | 2.8%              |
| Affordable housing                          | 8     | 2.5%              |
| Asthma                                      | 6     | 1.9%              |
| Homelessness                                | 6     | 1.9%              |
| Mental health (depression, bipolar, autism) | 5     | 1.6%              |
| Sexually transmitted diseases (STDs)        | 5     | 1.6%              |
| Stroke                                      | 5     | 1.6%              |
| Alzheimer's or dementia                     | 3     | 0.9%              |
| Poor air quality                            | 3     | 0.9%              |
| Vaping/juuling                              | 3     | 0.9%              |
| Motor vehicle crash injuries                | 2     | 0.6%              |
| Suicide                                     | 1     | 0.3%              |

Source: Valley Health System, 2019

Over 40 percent of Spanish survey respondents indicated being overweight, having diabetes, access to healthy foods, and cancer were the most significant health problems in the community. High blood pressure, childhood obesity, domestic violence, not enough exercise, and teen pregnancy were identified by over 15 percent of respondents as among the most significant health problems (**Exhibit 62B**).



#### 4. Health Behaviors

##### Exhibit 63A English Survey Respondents

**Question: Which of the following do you believe are the three most frequent risky behaviors in our community? (Those behaviors which have the greatest impact on overall community health). Check only 3**

| Issue                                   | Count | Percent Responded |
|---|-------|-------------------|
| Drug abuse                              | 375   | 15.2%             |
| Alcohol abuse                           | 237   | 9.6%              |
| Poor eating habits                      | 162   | 6.6%              |
| Tobacco use/smoking                     | 129   | 5.2%              |
| Racism or other form of bigotry         | 98    | 4.0%              |
| Lack of exercise                        | 89    | 3.6%              |
| Unsafe sex                              | 69    | 2.8%              |
| Dropping out of school                  | 69    | 2.8%              |
| Not getting recommended vaccines        | 38    | 1.5%              |
| Vaping/juuling                          | 36    | 1.5%              |
| Not using birth control                 | 23    | 0.9%              |
| Not using seat belts/child safety seats | 17    | 0.7%              |
| Other (please specify)                  | 13    | 0.5%              |

Source: Valley Health System, 2019

Over 15 percent of respondents indicated drug abuse was the most risky health behavior in the community. When asked to identify the top risky health behaviors in the community, English survey respondents most often indicated alcohol abuse, poor eating habits, tobacco use and smoking, racism or other form of bigotry, lack of exercise, and unsafe sex (**Exhibit 63**).

### Exhibit 63B Spanish Survey Respondents

**Question: Which of the following do you believe are the three most frequent risky behaviors in our community? (Those behaviors which have the greatest impact on overall community health). Check only 3**

| Issue                                   | Count | Percent Responded |
|---|-------|-------------------|
| Alcohol abuse                           | 66    | 21.0%             |
| Drug abuse                              | 56    | 17.8%             |
| Tobacco use/smoking                     | 46    | 14.6%             |
| Racism or other form of bigotry         | 35    | 11.1%             |
| Lack of exercise                        | 27    | 8.6%              |
| Not getting recommended vaccines        | 25    | 7.9%              |
| Not using seat belts/child safety seats | 20    | 6.3%              |
| Dropping out of school                  | 16    | 5.1%              |
| Unsafe sex                              | 12    | 3.8%              |
| Not using birth control                 | 8     | 2.5%              |
| Vaping/juuling                          | 4     | 1.3%              |

Source: Valley Health System, 2019

The top risky health behaviors in the Spanish community indicated by the survey respondents are: drug abuse, alcohol abuse, tobacco use/smoking, racism or other form of bigotry, and lack of exercise. These are followed by not getting shots to prevent disease, not using seat belts/child safety seats, dropping out of school, and unsafe sex (**Exhibit 63B**).

## Summary of Key Stakeholder Interview Findings, 2019

Valley Health and Our Health, Inc. conducted both face-to-face informant interviews and telephone interviews during the months of March and April 2019. The interviews were designed to obtain input on health needs from persons who represent the broad interests of the community served by WMC, including those with special knowledge of or expertise in public health.

Fifty-six individual and group interviews were conducted, including: persons with special knowledge of or expertise in public health; health and other public departments or agencies with data or information relevant to the health needs of the community; and leaders, representatives and members of medically underserved, low-income, and minority populations, and of populations with chronic disease needs; and representatives of the education and business communities. An annotated list of individuals providing community input is included the following section of this report.

Interviews were conducted using a structured questionnaire. Informants were asked to discuss community health issues and encouraged to think broadly about the social, behavioral and other determinants of health. Interviewees were asked about issues related to health status, health care access and services, chronic health conditions, populations with special needs, and health disparities.

The frequency with which specific issues were mentioned and interviewees' perceptions of the severity (how serious or significant) and scope (how widespread) of each concern were assessed. The following health status issues and contributing factors were reported to be of greatest concern. The items in each list are presented in order of stated importance, although the differences in some cases are relatively minor.

The following issues were identified by external informants as those of greatest concern to the community health in the WMC community, and are presented in alphabetical order.

### **Access to Health Care**

While mental health care and elderly care were mentioned previously, interviewees identified several other health care services that were difficult to access. Respondents identified extended hours, to add additional specialists to include pediatricians, and low-cost health care options for screenings and other services.

- 1. Dental care.** A community resident's ability to receive proper dental care was a concern for many of those interviewed. Some community residents are traveling to West Virginia to receive services. Interviewees believed that a lack of dental insurance and affordability were the main causes for residents leaving the community for services.
- 2. Primary care.** Interviewees mentioned that primary care services can be difficult to access in the community, especially for underserved communities. This concern was magnified by a belief that many community residents used the emergency room as a primary care provider. Cost of care, lack of insurance, and navigating through the health care system were cited as causes of not accessing care.

- 3. Specialty care providers.** Interviewees had mentioned a lack of specialty care services in the community, especially for children needing cancer or mental health services.

### **Factors Contributing to Health Status and Access to Care**

In addition to discussing health status issues and health conditions in the community, interview participants addressed the factors or conditions they believe most contribute to poor health status. Responses were similar to the 2016 Community Health Needs Assessment reports. An alphabetical list of the major contributing factors raised, some of them inter-related, are below:

- 1. Access to health care (physicians/specialists):** Interview participants cited a wide range of difficulties regarding access to care, including availability of providers (physicians/specialists), cost and affordability of care, significant transportation barriers for low-income and elderly populations, and language or cultural barriers for some members of the community. Some interviewees mentioned that there are community residents that do not seek medical care due to their immigration status in the country.
- 2. Affordable Housing/Assisted Living:** Interview participants frequently mentioned the need for affordable housing across the WMC community and assisted home care for senior citizens. Some interview participants highlighted the particular health risks experienced by older residents in the community. Seniors have lower incomes, transportation barriers, advanced chronic diseases, and social isolation that can negatively impact health status.
- 3. Cancer:** Cancer was mentioned frequently during the interview process. Some believe this is due to increased awareness of cancer services within the WMC community, however, others mentioned that it may be the result of more awareness and residents scheduling preventative screenings.
- 4. Chronic illness (i.e. Cholesterol, Diabetes, and Heart Disease):** Diabetes was the most frequently mentioned chronic disease in the interviews, and was often paired with discussion about obesity and being overweight. This was true for all ages, but these health issues were noted to be rising among children and youth. Commenting on related contributing factors, interview participants mentioned nutrition and diet, low physical activity and exercise levels, and food insecurity and hunger. Access to healthy foods was mentioned as a barrier, including that some do not have money to purchase fresh produce. There was widespread recognition of the toll that chronic illness has on health, its impact on the health care system, and the importance of not only treatment but also behavioral change in addressing the chronic disease.
- 5. Drug and substance abuse:** An array of substance abuse issues were identified across the WMC community as important to those interviewed. Substance abuse was portrayed as both growing and serious throughout the region. Heroin was mentioned most often; however, alcohol, marijuana, and methamphetamine use were also mentioned. Interviewees reported that pregnant women who use illicit drugs and possibly compromise the health of their babies is still of significant importance to the WMC community.

- 6. Education/Awareness:** Several interviewees mentioned that education and awareness about services were barriers to care. Factors linked generally to educational attainment and specifically to health education were noted by interview participants as impeding both the ability to effectively seek and manage health care, and to adopt and practice healthy behaviors. Many noted that the community is not aware of services available to them, and that finding services is not easily managed. It was also mentioned that those coming out of prison have limited access to resources.
- 7. Financial insecurities and poverty:** It was frequently stated that issues related to income and financial resources limit access to care, contribute to poor diet and nutrition, and create stresses that negatively impact health.
- 8. Homelessness:** Homelessness is a risk factor for poor health, and creates stress and challenges to maintaining one's health and seeking or obtaining needed health care. Homelessness was frequently mentioned among the interviewees, and also noted that in order to have housing, basic needs would need to be met such as employment, food, and shelter.
- 9. Lack of physical activity and exercise:** Among health behaviors that contribute to or inhibit good health, a lack of physical activity and exercise was mentioned as a concern for all age groups. Interview participants recognized that reasons for limited activity and strategies to increase activity differ across the life span.
- 10. Mental and behavioral health:** Mental and behavioral health was the second most frequently-mentioned health issue in the community. Interviewees reported that the community's mental health needs have risen, while mental health service capacity has not. They described a wide range of mental health issues, including bullying among youth, autism spectrum symptoms and diagnoses, depression among senior citizens, adult and family stress and coping difficulties, lack of affordable outpatient mental health professionals, and a lack of local inpatient treatment facilities, especially for children. Interviewees also noted frequent dual diagnoses of mental health and substance abuse problems, and that having an inpatient detox center/unit would be beneficial to the community.
- 11. Poor nutrition and diet:** Among healthy behaviors, dietary habits and nutrition were mentioned most frequently as major factors in obesity, diabetes, heart disease and related conditions, and chronic diseases. Interview participants mentioned these were due to a lack of access to affordable healthy foods for lower income families. It was mentioned some residents do not have a stable food source.
- 12. Smoking and tobacco:** Smoking and tobacco use was frequently mentioned in the context of concerns about drug and substance abuse. Smoking was viewed as a significant issue, although average smoking rates have declined, the long-lasting health effect has now become notably worse since the launch of electronic cigarettes (e-cigarettes).

**13. Transportation:** Several interviewees identified the lack of transportation options in the community as a problem. In some rural locations, the lack of transportation options was seen as a major barrier for residents to receive proper health care. This problem was identified as a particular need among low-income and elderly residents.

**14. Unhealthy lifestyles:** Many interviewees identified unhealthy lifestyle behaviors around nutrition and lack of activity leads to poor health was reported as concerns. Diabetes, heart disease, and obesity were mentioned often across the WMC community.

## Individuals Providing Community Input

The CHNA took into account input from many people who represent the broad interests of the community served by the hospital. This was done via interviews with over 200+ individuals and six “community response sessions” that included 20 participants. These 200+ stakeholders included public health experts; individuals from health or other departments and agencies; leaders or representatives of medically underserved, low-income, and minority populations; and other individuals representing the broad interests of the community (**Exhibits 64-67**).

### 1. Public Health Experts

Individuals interviewed with special knowledge of, or expertise in, public health, some of whom also participated in a community response session, include those in **Exhibit 65**:

#### **Exhibit 64: Public Health Experts**

| <b>Name</b>          | <b>Title</b>                   | <b>Affiliation or Organization</b>                            | <b>Special Knowledge/Expertise or Nature of Leadership Role</b>                | <b>Interview or Response Session</b> |
|----------------------|--------------------------------|---|--|--------------------------------------|
| Chris Petsko         | District Administrator         | Lord Fairfax Health District                                  | Expertise in the public health needs of Lord Fairfax Health district residents | Interview                            |
| Dr. Colin Greene     | District Director              | Lord Fairfax Health District                                  | Expertise in the public health needs of Lord Fairfax Health district residents | Interview                            |
| Dr. Thomas Daugherty | Health Officer                 | Hampshire County Health Department                            | Expertise in the public health needs of Hampshire County residents             | Interview                            |
| Leea Shirley         | Public Health Nurse Supervisor | Virginia Department of Health<br>Lord Fairfax Health District | Expertise in the public health needs of Lord Fairfax Health district residents | Interview                            |
| Stephanie Shoemaker  | Local Health Administrator     | Hampshire County Health Department                            | Expertise in the public health needs of Hampshire County residents             | Interview                            |



## 2. Health or Other Departments or Agencies

Several interviewees were from departments or agencies with current data or other information relevant to the health needs of the community (**Exhibit 65**). This list excludes the public health experts identified in **Exhibit 64**, who also meet this criterion.

### **Exhibit 65: Individuals from Health or Other Departments or Agencies**

| <b>Name</b>          | <b>Title</b>  | <b>Affiliation or Organization</b>                | <b>Special Knowledge/Expertise or Nature of Leadership Role</b>   | <b>Interview or Response Session</b> |
|----------------------|---|---|---|--------------------------------------|
| Brandon Jennings     | Executive Director  | Sinclair Health Clinic                            | Special knowledge regarding health needs of the indigent populations in the community                     | Interview                            |
| Cheryl Reames        | Executive Director/Manager  | Greater Winchester Area Parkinson's Support Group | Expertise in Parkinson's Disease and community resident   | Both                                 |
| Cosby Potter-Davis   | Executive Director  | Good Samaritan Free Clinic                        | Special knowledge regarding health needs of the indigent populations in the community for Berkeley County | Interview                            |
| Debbie Dart          | Executive Director/Manager  | Choices, Council on Domestic Violence             | Special knowledge regarding domestic violence   | Interview                            |
| Dennis Morris        | Board of Supervisor   | Shenandoah County Board of Supervisors            | Shenandoah County   | Interview                            |
| Donald K. Price      | Executive Director  | Access Independence, Inc.                         | Special knowledge regarding patients with disabilities  | Interview                            |
| Dr. Barbara Walter   | VP, Medical Affairs   | Page Memorial Hospital                            | Page County   | Interview                            |
| Dr. Greg Byrd        | VP, Medical Affairs   | Shenandoah Memorial Hospital                      | Shenandoah County   | Interview                            |
| Dr. Iyad Sabbagh     | Senior VP, Chief Physician Executive, and President, Valley Physician Enterprise            | Valley Health                                     | Frederick County  | Interview                            |
| Dr. James Wiedower   | Physician   | Valley Physician Enterprise                       | Special knowledge regarding Bariatrics  | Interview                            |
| Dr. Jeff Feit        | VP, Population Health, Valley Health, Chief Operating Officer, Valley Physician Enterprises | Valley Health                                     | Population Health   | Interview                            |
| Dr. Madhur Solanki   | Associate Medical Information Officer   | Winchester Medical Center                         | City of Winchester  | Interview                            |
| Dr. Nicolas Restrepo | VP, Medical Affairs   | Winchester Medical Center                         | City of Winchester  | Interview                            |
| Dr. Robert Meltvedt  | VP, Medical Affairs, Warren Memorial Hospital   | Warren Memorial Hospital                          | Warren County   | Interview                            |
| Gay Rice             | Director  | Worth Waiting 4                                   | Special knowledge of teen pregnancy   | Interview                            |

**Exhibit 65: Individuals from Health or Other Departments or Agencies (continued)**

| <b>Name</b>         | <b>Title</b>  | <b>Affiliation or Organization</b>        | <b>Special Knowledge/Expertise or Nature of Leadership Role</b>               | <b>Interview or Response Session</b> |
|---------------------|---|---|---|--------------------------------------|
| John Nagley         | Executive Director  | AIDS Response Effort                      | Special knowledge regarding health needs of population in community with AIDS | Interview                            |
| Kim Shrum           | Clinical Manager  | Shenandoah Memorial Hospital              | Special knowledge regarding health needs of indigent population in community  | Interview                            |
| Leslie Hardesty     | SA Program Coordinator  | TLC                                       | Special knowledge regarding seniors needs in Shenandoah county                | Interview                            |
| Lisa Herbaugh       | Program Coordinator   | The Laurel Center                         | Special knowledge regarding domestic violence                                 | Interview                            |
| Maria Lorenson      | Development Director  | Hospice of the Panhandle                  | Special knowledge end-of-life care  | Interview                            |
| Mary Presley        | Physical Therapy  | Warren Memorial Hospital                  | Warren County   | Interview                            |
| Megan Gordon        | Program Director  | Page Alliance Community Action            | Page County   | Interview                            |
| Michaela Zaraszczak | Executive Assistant   | Access Independence, Inc.                 | Special knowledge regarding patients with disabilities                        | Interview                            |
| Natalie Cline       | Marketing and Events Assistant  | Berkeley County Chamber                   | Berkeley County   | Interview                            |
| Nicole Foster       | President   | Front Royal Chamber of Commerce           | Warren County   | Interview                            |
| Pam Murphy          | Executive Director  | Shenandoah County Free Clinic             | Special knowledge regarding health needs of indigent population in community  | Interview                            |
| Rachel Carlson      | Director, Advanced Practice Clinician Services  | Valley Physician Enterprise               | Clinician Services  | Interview                            |
| Robin Stevens       | Services Coordinator  | Choices, Council on Domestic Violence     | Special knowledge regarding domestic violence                                 | Interview                            |
| Sharon Baroncelli   | Executive Director  | Shenandoah Chamber of Commerce            | Shenandoah County   | Interview                            |
| Sharon Stanfield    | Eligibility Worker Supervisor   | Frederick County Dept. of Social Services | Expertise in the social services  | Interview                            |
| Stephanie Grubb     | Coordinator Psychiatrics  | Valley Health Behavioral Health           | Special knowledge regarding behavioral health needs in community              | Interview                            |
| Susan Sanders       | Office Manager  | Berkeley County Chamber                   | Berkeley County   | Interview                            |
| Tammy Gasper        | VP, Shenandoah Memorial Hospital; Southern Region Medical Staff Services & Clinical Program Development | Shenandoah Memorial Hospital              | Shenandoah County   | Interview                            |
| Teresa Rhodes       | Executive Director/Manager  | AbbaCare, Inc.                            | Special knowledge regarding teen pregnancy                                    | Interview                            |

### 3. Community Leaders and Representatives

The following individuals were interviewed because they are leaders or representatives of medically underserved, low-income, and/or minority populations (**Exhibit 66**). This list excludes the public health experts identified in **Exhibit 64**.

#### **Exhibit 66: Community Leaders and Representatives**

| <b>Name</b>          | <b>Title</b>  | <b>Affiliation or Organization</b>              | <b>Special Knowledge/Expertise or Nature of Leadership Role</b>  | <b>Interview or Response Session</b> |
|----------------------|---|---|--|--------------------------------------|
| Abbey Remold         | Manager, HR Business Partner  | VHS Southern Region<br>Warren Memorial Hospital | Special knowledge regarding health needs of indigent populations in the communities of Page, Shenandoah, and Warren Counties | Interview                            |
| Allen Sibert         | TOVRC   | Winchester City Sheriff's Office                | Law Enforcement  | Interview                            |
| Amanda Behan         | Lieutenant  | Winchester Police Department                    | Law Enforcement  | Interview                            |
| April McClain-Clower | Director  | Shenandoah Memorial Hospital                    | Special knowledge regarding health needs of the Shenandoah County populations in the community                               | Interview                            |
| Bartley Hoffman      | Director, Surgical Services   | Shenandoah Memorial Hospital                    | Shenandoah County  | Response Session                     |
| Becky Whetzel        | Medical Transport Manager   | Valley Medical Transport                        | Special knowledge in patient transportation  | Interview                            |
| Benjamin Dolewski    | Medical Practice Manager  | Page Rural Health Center                        | Special knowledge regarding health needs of the indigent populations in the community  | Both                                 |
| Brandon Truman       | Education and PI Manager  | Valley Medical Transport                        | Special knowledge in patient transportation  | Interview                            |
| Brian Sewtle         | Capt. Mental Health CBI   | Winchester Police Department                    | Law Enforcement  | Interview                            |
| Carolyn Knowles      | Operations Manager  | Valley Medical Transport                        | Special knowledge in patient transportation  | Interview                            |
| Cathy Weaver         | Member, Community Advisory Committee  | Community                                       | Page County Community  | Interview                            |
| Chaz Niang           | Officer/CRT   | Winchester Police Department                    | Law Enforcement  | Interview                            |
| Chris Rucker         | President, Valley Regional Enterprises; VP, Valley Health Ambulatory Services | Valley Health                                   | Special knowledge regarding ambulatory health needs and transportation services  | Interview                            |

**Exhibit 66: Community Leaders and Representatives (continued)**

| Name                   | Title  | Affiliation or Organization          | Special Knowledge/Expertise or Nature of Leadership Role   | Interview or Response Session |
|------------------------|--|--------------------------------------|--|-------------------------------|
| Christa Shifflett      | Executive Director   | Warren County Coalition              | Warren County  | Response Session              |
| Christopher S. Hale    | Med/Surg. Clinical Manager   | Page Memorial Hospital               | Special knowledge regarding health needs of the Page County populations  | Interview                     |
| Claire McDonald        | Executive Director   | The Independent School of Winchester | Special knowledge in education   | Interview                     |
| Courtney Miller        | Wellness Services  | Valley Health                        | Special knowledge regarding nutrition and wellness   | Both                          |
| Crystal Larson         | Administrator  | Lynn Care Center                     | Special knowledge regarding health needs of long-term care patients  | Interview                     |
| DeAnna Cheatham        | Director   | Warren County Social Services        | Warren County  | Interview                     |
| Diane Kerns            | Chair, Community Advisory Committee                                    | Community                            | Winchester Community   | Interview                     |
| Doug Stanley           | County Administrator   | Local Government-Warren County       | Warren County  | Interview                     |
| Dr. David T. Sovine    | Superintendent   | Frederick County Public Schools      | Special knowledge in education   | Interview                     |
| Dr. Jason Van Heukelum | Superintendent   | Winchester City Schools              | Special knowledge in education   | Interview                     |
| Dr. Mark Johnston      | Superintendent   | Shenandoah County Public Schools     | Special knowledge in education   | Interview                     |
| Dr. Shannon Grimsley   | Superintendent   | Rappahannock County Public Schools   | Special knowledge in education   | Interview                     |
| Dr. Wendy Gonzalez     | Superintendent   | Page County Public Schools           | Special knowledge in education   | Interview                     |
| Erich May              | Superintendent   | Morgan County Public Schools         | Special knowledge in education   | Interview                     |
| Ethel Showman          | Member, Community Advisory Committee                                   | Community                            | Shenandoah County Community  | Interview                     |
| Faith Power            | Member, Community Advisory Committee                                   | Community                            | Winchester Community   | Interview                     |
| Floyd Heater           | VP, Valley Health Southern Region, President, Warren Memorial Hospital | Valley Health                        | Special knowledge regarding health needs of indigent populations in the communities of Page, Shenandoah, and Warren counties | Interview                     |

**Exhibit 66: Community Leaders and Representatives (continued)**

| <b>Name</b>          | <b>Title</b>                                    | <b>Affiliation or Organization</b>                        | <b>Special Knowledge/Expertise or Nature of Leadership Role</b>                   | <b>Interview or Response Session</b> |
|----------------------|---|---|---|--------------------------------------|
| Grady (Skip) Philips | President, Winchester Medical Center            | Valley Health   | Special knowledge regarding health needs of indigent populations in the community | Interview                            |
| Jake Meza            | VHS Director, UC/OH/QC                          | Valley Regional Enterprise/ VHS                           | Special knowledge regarding health needs of indigent populations in the community | Interview                            |
| Jane Bauknecht       | Executive Director                              | Adult Care Center of NSV, Inc.                            | Special knowledge regarding adult day care needs                                  | Interview                            |
| Janice Boserman      | PI/Quality                                      | War Memorial Hospital                                     | Morgan County   | Interview                            |
| Jessica Watson       | Director CDRC & WRC                             | Winchester Medical Center Chronic Disease Resource Center | Special knowledge regarding health needs of indigent patients                     | Interview                            |
| Jill Williams        | Program Supervisor                              | Healthy Families Northern Shenandoah Valley               | Experience providing parenting support to at-risk families in the community       | Both                                 |
| JoAnne Winschel      | Social Worker                                   | Shenandoah Memorial Hospital                              | Special knowledge regarding health needs of indigent population in community      | Interview                            |
| John Piper           | Chief of Police                                 | Winchester Police Department                              | Law Enforcement   | Interview                            |
| John Robben          | Director  | Valley Medical Transport                                  | Special knowledge in patient transportation                                       | Interview                            |
| John Van Wyck        | Director of Student Services & Federal Programs | Page County Public Schools                                | Special knowledge in education  | Interview                            |
| Julie Horak          | Pharmacy Manager                                | War Memorial Hospital                                     | Morgan County   | Interview                            |
| Julie Larrick        | Clinical Team Manager                           | Valley Health Home Health                                 | Special knowledge regarding home health care                                      | Interview                            |
| Julie Zigler         | Executive Director                              | Division of Aging and Rehabilitative Services             | Special knowledge regarding rehabilitative services                               | Interview                            |
| K.C. Bohrer          | Sheriff   | Morgan County Sheriff's Department                        | Law Enforcement   | Interview                            |
| Kaili Flick          | Operations Manager                              | Valley Medical Transport                                  | Special knowledge in patient transportation                                       | Interview                            |
| Karen Poff           | Executive Director                              | Virginia Tech Extension                                   | Special knowledge in education  | Interview                            |

**Exhibit 66: Community Leaders and Representatives (continued)**

| Name                         | Title   | Affiliation or Organization                 | Special Knowledge/Expertise or Nature of Leadership Role                                   | Interview or Response Session |
|------------------------------|---|---|--|-------------------------------|
| Karen Schultz, PhD           | Director & Professor, Center for Public Service and Scholarship | Shenandoah University                       | Special knowledge regarding health needs of the indigent populations in the community.     | Response Session              |
| Katy Pitcock                 | Co-Chair and Coordinator Community Prenatal and Language Access | Virginia Medical Interpreting Collaborative | Special knowledge of health needs of populations that have limited in English proficiency. | Community Health Survey       |
| Keith Nixon                  | Officer/Drug Court  | Winchester Police Department                | Law Enforcement, Drug Court  | Interview                     |
| Kelly Rice                   | Deputy Chief  | Winchester Police Department                | Law Enforcement  | Interview                     |
| Kerry L. "Kahle" Magalis, II | Chief of Police   | Front Royal                                 | Law Enforcement  | Interview                     |
| Kim Shrum                    | Clinical Manager  | Shenandoah Memorial Hospital                | Special knowledge regarding health needs of indigent population in community               | Interview                     |
| L. Gregory Drescher          | Superintendent  | Warren County Public Schools                | Special knowledge in education   | Interview                     |
| Lauren Cummings              | Executive Director  | NSV Substance Abuse Coalition               | Special knowledge regarding substance abuse need in community                              | Both                          |
| Linda Holtzapple             | Executive Director  | Shenandoah Area Agency on Aging             | Special knowledge regarding senior populations   | Interview                     |
| Lisa Hyde                    | Warrants Clerk  | Winchester Police Department                | Law Enforcement  | Interview                     |
| Mark Lahman                  | Corporal Oldtown  | Winchester Police Department                | Law Enforcement  | Interview                     |
| Mark Merrill                 | President and Chief Executive Officer                           | Valley Health                               | Special knowledge of health needs of populations   | Both                          |
| Mike Ackerman                | Sergeant/ CRT   | Winchester Police Department                | Law Enforcement  | Interview                     |
| Misty Warren                 | Women's and Children's Coordinator                              | Valley Health                               | Expertise women's and children outreach  | Interview                     |
| Nicky Fadley                 | Executive Director  | Strength In Peers                           | Special knowledge of mental health needs in community                                      | Interview                     |
| Patty Fields                 | Office Data Specialist  | Hampshire Memorial Hospital                 | Hampshire County   | Interview                     |

**Exhibit 66: Community Leaders and Representatives (continued)**

| Name                | Title  | Affiliation or Organization                   | Special Knowledge/Expertise or Nature of Leadership Role   | Interview or Response Session |
|---------------------|--|---|--|-------------------------------|
| Philip Graybeal     | Chief Financial Officer  | Page Memorial Hospital                        | Special knowledge regarding health needs of indigent populations in the communities of Page, Shenandoah, and Warren Counties | Interview                     |
| Portia Brown        | Director of Quality and Regulatory Affairs                       | Page Memorial Hospital                        | Special knowledge regarding health needs of the Page County populations  | Interview                     |
| Rachel Payne        | Clinical Team Manager  | Valley Health Home Health                     | Special knowledge regarding home health care   | Interview                     |
| Samantha Greenfield | Placement Counselor  | Division of Aging and Rehabilitative Services | Special knowledge regarding rehabilitative services  | Interview                     |
| Sara Kuykendall     | Dietician  | Valley Health Wellness Services               | Special knowledge regarding nutrition  | Interview                     |
| Scott Mallery       | Executive Director   | Aging & Family Services                       | Special knowledge regarding senior populations   | Interview                     |
| Sharen Gromling     | Executive Director   | Our Health, Inc.                              | Special knowledge regarding health needs of the indigent populations in the community.                                       | Both                          |
| Sharon Rigney       | Director Women's & Children                                      | Winchester Medical Center                     | Special knowledge regarding health needs of women and children in the community.   | Interview                     |
| Sonia M. Conrad     | LPN Office Intake Specialist                                     | Valley Health Home Health                     | Special knowledge regarding home health care   | Interview                     |
| Stacey Heavner      | Executive Director   | Senior Community Service Employment Program   | Special knowledge regarding senior populations   | Interview                     |
| Stephanie Fisher    | Clinical Manager   | Valley Health Home Health                     | Special knowledge regarding home health care   | Interview                     |
| Tabitha Keyser      | Case Management  | Page Memorial Hospital                        | Special knowledge regarding health needs of Page County indigent populations   | Interview                     |
| Taryn Logan         | Planning Director  | City of Warren                                | Warren County  | Interview                     |
| Tom Kluge           | President, Hampshire Memorial Hospital and War Memorial Hospital | Valley Health                                 | Special knowledge regarding health needs of indigent populations in the community for Hampshire and Morgan counties.         | Interview                     |



**Exhibit 66: Community Leaders and Representatives (continued)**

| Name             | Title   | Affiliation or Organization     | Special Knowledge/Expertise or Nature of Leadership Role                                    | Interview or Response Session |
|------------------|---|---------------------------------|---|-------------------------------|
| Thomas Noser     | Imaging/Cardiopulmonary Manager               | Page Memorial Hospital          | Page County   | Response Session              |
| Tina Combs       | President and Chief Executive Officer         | Berkeley County Chamber         | Berkeley County   | Interview                     |
| Tracy Mitchell   | Valley Health Director                        | Valley Health Wellness Services | Special knowledge regarding wellness services   | Interview                     |
| Tracey Ramey     | Education Department Coordinator              | Warren Memorial Hospital        | Special knowledge in education  | Interview                     |
| Travis Clark     | VP, Operations, Valley Health Southern Region | Valley Health                   | Special knowledge regarding health needs of Page, Shenandoah, and Warren County populations | Both                          |
| Trina Cox        | Director                                      | Hampshire Wellness              | Special knowledge regarding wellness services   | Interview                     |
| Victoria Johnson | Marketing Liaison                             | Valley Health Home Health       | Special knowledge regarding home health care  | Interview                     |

5. Persons Representing the Broad Interests of the Community

**Exhibit 67: Other Interviewees Representing the Broad Interests of the Community**

| Name                | Title                           | Affiliation or Organization                | Interview or Response Session |
|---------------------|---------------------------------|--|-------------------------------|
| Alexis LaPorte      | TOVRC                           | TWG Insurance-The Winchester Group Inc.    | Interview                     |
| Andre Miller        | VA Dept. of Veteran Services    | United Way Housing Coalition               | Interview                     |
| Anita Schill        | Mayor's Office                  | City of Winchester                         | Response Session              |
| Anne Norton         | Volunteer                       | WMC Auxiliary                              | Interview                     |
| Aaron Grisdale      | City of Winchester              | United Way Housing Coalition               | Interview                     |
| Avery Ramspeck      | Volunteer                       | WMC Auxiliary                              | Interview                     |
| Beth Falu           | TOVRC                           | Navy Federal Credit Union Contact Center   | Interview                     |
| Bethany Searfoss    | NSV Substance Abuse Coalition   | United Way Housing Coalition               | Interview                     |
| Beverly Pearce      | Wyck, LLC                       | United Way Housing Coalition               | Interview                     |
| Brandon Jennings    | TOVRC                           | Sinclair Health Clinic                     | Interview                     |
| Breannan Lloy       | TOVRC                           | Bank of Clarke County                      | Interview                     |
| Bonnie Paulsen      | Volunteer                       | WMC Auxiliary                              | Interview                     |
| Carl Chapman        | TOVRC                           | Welltown United Methodist Church           | Interview                     |
| Carmen Richmond     | TOVRC                           | Heart of the Home Design-Build             | Interview                     |
| Carmen Silvius      | The Kirland Image               | Non-Profit Council of Shenandoah County    | Interview                     |
| Cathy Philips       | Education Chair                 | WMC Auxiliary                              | Interview                     |
| Charly Franks       | Concern Hotline                 | United Way Housing Coalition               | Interview                     |
| Cheryl Dellinger    | NVD                             | Non-Profit Council of Shenandoah County    | Interview                     |
| Chris Monroe        | NWCSB                           | United Way Housing Coalition               | Interview                     |
| Cindy Greenya       | UWNSV                           | United Way                                 | Interview                     |
| Coressa Hubbard     | Workforce Virginia              | Virginia                                   | Response Session              |
| Courtney Cox        | TOVRC                           | United Bank                                | Interview                     |
| Cyndy Walsh         | Shenandoah Education Foundation | Non-Profit Council of Shenandoah County    | Interview                     |
| Danielle Cullers    | Volunteers of America           | United Way Housing Coalition               | Interview                     |
| Danielle Tyler      | Volunteer                       | WMC Auxiliary                              | Interview                     |
| David Smith         | Mayor                           | Winchester City                            | Interview                     |
| Debbie Dart         | Director                        | Choices, Page County                       | Response Session              |
| Diane Lockhart      | TOVRC                           | County of Frederick                        | Interview                     |
| Dick W. Meyer       | Director                        | Emergency Management and Homeland Security | Interview                     |
| Doris Trant         | Director                        | WMC Volunteer Services                     | Interview                     |
| Doug Norell         | Valley Interfaith Council       | United Way Housing Coalition               | Interview                     |
| Ed Smith            | TOVRC                           | Winchester Public Schools                  | Interview                     |
| Ericka Strosnyder   | TOVRC                           | Lyle P. Strosnider, Inc.                   | Interview                     |
| Faith Carter        | TOVRC                           | NW Works, Inc.                             | Interview                     |
| Frank Murphy        | Community Representative        | NAACP                                      | Interview                     |
| Gay Rice            | Director                        | Worth Waiting4                             | Both                          |
| Gwen Borders-Walker | Vice President                  | NAACP                                      | Interview                     |
| Helen Ritchie       | Volunteer                       | WMC Auxiliary                              | Interview                     |
| Heather Buonocore   | Physical Therapist              | FREE                                       | Response Session              |

**Exhibit 67: Other Interviewees Representing the Broad Interests of the Community  
(continued)**

| <b>Name</b>            | <b>Title</b>                                 | <b>Affiliation or Organization</b>            | <b>Interview or Response Session</b> |
|------------------------|--|---|--------------------------------------|
| Heather Kovaly         | TOVRC  | Thermo Fisher Scientific                      | Interview                            |
| Ingrid Thompson        | Shenandoah Paco Industries                   | Non-Profit Council of Shenandoah County       | Interview                            |
| Jean Martin            | Humane Society of Shenandoah County          | Non-Profit Council of Shenandoah County       | Interview                            |
| Jean Westfall          | Community Representative                     | United Way Housing Coalition                  | Interview                            |
| Jennie Morrow          | TOVRC  | Morgan Stanley-Wealth Management - Winchester | Interview                            |
| Jennifer Hall          | Director of Community Engagement             | Valley Assistance Network                     | Response Session                     |
| Jenny Castor           | Volunteer                                    | WMC Auxiliary                                 | Interview                            |
| Joanne Altenburg       | Volunteer                                    | WMC Auxiliary                                 | Interview                            |
| Joanne Dietz           | Braddock Street UMC                          | United Way Housing Coalition                  | Interview                            |
| Jody Wall              | TOVRC  | Director of Program Development of TOVRC      | Interview                            |
| Joe Litterio           | First Bank                                   | Non-Profit Council of Shenandoah County       | Interview                            |
| John Copenhaver        | Valley Interfaith Council                    | NAACP   | Interview                            |
| Joseph Jablorish       | Valley Assistance Network                    | United Way Housing Coalition                  | Interview                            |
| Judy Franz             | Shenandoah County Search, Inc.               | Non-Profit Council of Shenandoah County       | Interview                            |
| Julian Berger          | TOVRC  | Loudon County Sheriff's Office                | Interview                            |
| Kate Simpson           | Community Representative                     | United Way Housing Coalition                  | Interview                            |
| Katherine Morrison     | Community Foundation                         | Non-Profit Council of Shenandoah County       | Interview                            |
| Keith Fleury           | Housing and Real Estate Investments, LLC     | United Way Housing Coalition                  | Interview                            |
| Kelli Dayrit           | TOVRC  | Lord Fairfax Community College                | Interview                            |
| Kelli Williams         | Lord Fairfax Community College               | Non-Profit Council of Shenandoah County       | Interview                            |
| Kelliann Harris        | TOVRC  | The Laurel Center                             | Interview                            |
| Kelly Bober            | Childsafe Center                             | United Way Housing Coalition                  | Interview                            |
| Kim Herbstritt         | NSV Community Foundation                     | United Way Housing Coalition                  | Both                                 |
| Kevin Hay              | TOVRC  | Romney Presbyterian Church                    | Interview                            |
| Kimberly Wilt          | Blue Ridge Habitat for Humanity              | United Way Housing Coalition                  | Interview                            |
| La Tasha Do'zia-Early  | Executive Director, Youth Development Center | NAACP   | Interview                            |
| Latasha Thompson       | Community Representative                     | Non-Profit Council of Shenandoah County       | Interview                            |
| Linda Caley            | Volunteer                                    | WMC Auxiliary                                 | Interview                            |
| Lindsey Douglas        | Big Brothers Big Sisters                     | Non-Profit Council of Shenandoah County       | Interview                            |
| Lois Hitchcock         | Volunteer                                    | WMC Auxiliary                                 | Interview                            |
| Lynn McKee             | Response                                     | Non-Profit Council of Shenandoah County       | Response Session                     |
| Mary Anton             | TOVRC  | Handley Regional Library                      | Interview                            |
| Marshall Henson        | NW Works                                     | United Way Housing Coalition                  | Interview                            |
| Mary Dale Jackson      | Community Representative                     | NAACP   | Interview                            |
| Matt Peterson          | Blue Ridge Habitat for Humanity              | United Way Housing Coalition                  | Response Session                     |
| Melissa Miller Piselli | Shenandoah County Pregnancy Center           | Non-Profit Council of Shenandoah County       | Interview                            |
| Michael Funk           | Shenandoah County Foundation                 | Non-Profit Council of Shenandoah County       | Interview                            |

**Exhibit 67: Other Interviewees Representing the Broad Interests of the Community  
(continued)**

| <b>Name</b>           | <b>Title</b>                                      | <b>Affiliation or Organization</b>                                  | <b>Interview or Response Session</b> |
|-----------------------|---|---|--------------------------------------|
| Michael Starling      | TOVRC   | Randolph-Macon Academy  | Interview                            |
| Michael Wade          | TOVRC   | Valley Health   | Interview                            |
| Nadine Pottinga       | UWNSV   | United Way  | Both                                 |
| Niki Wilson           | Director of Development, Valley Health Foundation | Non-Profit Council of Shenandoah County                             | Interview                            |
| Nikki Morelli         | AbbaCare  | Berkeley, WV, Clarke, Frederick, Warren, and the City of Winchester | Response Session                     |
| Oscar Cerrito Mendoza | A.R.E.  | United Way Housing Coalition  | Interview                            |
| Pamela Lam-Allen      | TOVRC   | Shenandoah Valley Discovery Museum                                  | Interview                            |
| Pat Bowers            | Volunteer   | WMC Auxiliary   | Interview                            |
| Patrick Barker        | Frederick County EDA                              | United Way Housing Coalition  | Interview                            |
| Patty Fadeley         | Blue Ridge Hospice                                | Non-Profit Council of Shenandoah County                             | Interview                            |
| Pete Fravel           | TOVRC   | Habitat for Humanity  | Interview                            |
| Rebekah Dehaven       | Community Representative                          | NAACP   | Interview                            |
| Rebekah Schennum      | Shenandoah Valley Lutheran Ministries             | Non-Profit Council of Shenandoah County                             | Interview                            |
| Richard Kennedy       | TOVRC   | Top of VA Regional Chamber  | Interview                            |
| Robin Stevens         | Services Coordinator                              | Choices, Page County  | Response Session                     |
| Robert Hitchcock      | Volunteer   | WMC Auxiliary   | Interview                            |
| Rodney Culbreath      | Director, I'm Just Me Movement                    | NAACP   | Interview                            |
| Rhonda VanDyke        | TOVRC   | Shenandoah University   | Interview                            |
| Sarah Downs           | Lord Fairfax Outreach                             | Non-Profit Council of Shenandoah County                             | Interview                            |
| Scott Terndrup        | Coordinator                                       | Shenandoah Area on Aging  | Interview                            |
| Sherry Avery          | Family Promise of Shenandoah County               | Non-Profit Council of Shenandoah County                             | Interview                            |
| Sherry Ritenour       | Thrivent Financial                                | Non-Profit Council of Shenandoah County                             | Interview                            |
| Shontya Washington    | TOVRC   | Frederick County Public Schools                                     | Interview                            |
| Sue Dietz             | Musterworks Chorus                                | Non-Profit Council of Shenandoah County                             | Interview                            |
| Tara Helsley          | Community Representative                          | NAACP   | Interview                            |
| Teri Merrill          | Community Representative                          | NAACP   | Interview                            |
| Thea Thomas           | President   | NAACP   | Interview                            |
| Tim Youmans           | Planning Director                                 | Winchester City Planning Department                                 | Interview                            |
| Traci Toth            | Executive Director                                | Faith in Action   | Interview                            |
| Tyson Gilpin          | Community Representative                          | NAACP   | Interview                            |
| Rev. Dave Cunsolo     | Lead Pastor                                       | Victory Church  | Interview                            |
| Veronica Olko         | Brian Injury Connections of Shenandoah Valley     | Non-Profit Council of Shenandoah County                             | Interview                            |
| Vickie Davies         | Executive Director                                | St. Luke Community Clinic   | Interview                            |
| Vivian Walker         | Community Representative                          | NAACP/ Non-Profit Council of Shenandoah County                      | Interview                            |
| Zanata Fenn           | A.R.E.  | United Way Housing Coalition  | Interview                            |

# Appendix A – Community Interviews and Survey

## 1. Area Community Health Survey (English and Spanish)



### 2019 Community Health Survey

Please take a few minutes to complete the survey below. The purpose of the survey is to get your opinions about community health needs in Valley Health System's service area. The survey results and other information will be used to identify the most pressing concerns that can be addressed through community action. If you have previously completed the 2019 Community Health Survey, please disregard this request.

Remember, your opinion is important! If you have any questions, please contact us at the address provided at the end of the survey. Thank you for sharing your opinions.

- Which of the following do you believe are **the three most important factors** for a healthy community? (Those factors which most improve the quality of life in a community.) Please check only three:
 

|  |   |  |
|--|---|--|
| <input type="radio"/> Safe place to raise children | <input type="radio"/> Healthy race relations                      | <input type="radio"/> Low level of child abuse         |
| <input type="radio"/> Jobs and stable economy      | <input type="radio"/> Parks/recreation facilities                 | <input type="radio"/> Healthy behaviors and lifestyles |
| <input type="radio"/> Clean environment            | <input type="radio"/> Arts and cultural events                    | <input type="radio"/> Low adult death/disease rates    |
| <input type="radio"/> Affordable housing           | <input type="radio"/> Religious/spiritual values                  | <input type="radio"/> Low infant death rate            |
| <input type="radio"/> Low crime/safe neighborhoods | <input type="radio"/> Strong family life                          | <input type="radio"/> Other: _____                     |
| <input type="radio"/> Excellent schools            | <input type="radio"/> Access to health care (e.g., family doctor) |  |
- Which of the following do you believe are **the three most significant health problems** in our community? (Those problems which have the greatest impact on overall community health) Please check only three:
 

|   |   |  |
|---|---|--|
| <input type="radio"/> Access to healthy food  | <input type="radio"/> Heart disease                               | <input type="radio"/> Respiratory/lung disease             |
| <input type="radio"/> Asthma                  | <input type="radio"/> High blood pressure                         | <input type="radio"/> Sexually transmitted diseases (STDs) |
| <input type="radio"/> Alzheimer's or dementia | <input type="radio"/> Homelessness                                | <input type="radio"/> Stroke                               |
| <input type="radio"/> Affordable housing      | <input type="radio"/> Low income/financial issues                 | <input type="radio"/> Substance abuse                      |
| <input type="radio"/> Being overweight        | <input type="radio"/> Mental health (depression, bipolar, autism) | <input type="radio"/> Suicide                              |
| <input type="radio"/> Cancer                  | <input type="radio"/> Motor vehicle crash injuries                | <input type="radio"/> Teenage pregnancy                    |
| <input type="radio"/> Childhood obesity       | <input type="radio"/> Not enough exercise                         | <input type="radio"/> Tobacco use/smoking                  |
| <input type="radio"/> Dental health           | <input type="radio"/> Poor air quality                            | <input type="radio"/> Vaping/juuling                       |
| <input type="radio"/> Diabetes                | <input type="radio"/> Poor dietary choices                        | <input type="radio"/> Other: _____                         |
| <input type="radio"/> Domestic violence       |   |  |
- Which of the following do you believe are **the three most frequent risky behaviors** in our community? (Those behaviors which have the greatest impact on overall community health) Please check only three:
 

|  |  |   |
|--|--|---|
| <input type="radio"/> Alcohol abuse          | <input type="radio"/> Not getting recommended vaccines | <input type="radio"/> Not using birth control                 |
| <input type="radio"/> Dropping out of school | <input type="radio"/> Racism or other form of bigotry  | <input type="radio"/> Unsafe sex                              |
| <input type="radio"/> Drug abuse             | <input type="radio"/> Tobacco use/smoking              | <input type="radio"/> Not using seat belts/child safety seats |
| <input type="radio"/> Lack of exercise       | <input type="radio"/> Vaping/juuling                   | <input type="radio"/> Other: _____                            |
| <input type="radio"/> Poor eating habits     |  |   |
- How would you rate our community as a healthy community?
 

|                                 |                                 |                            |                            |                            |
|---------------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
| <input type="radio"/> Excellent | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
|---------------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
- How would you rate your own personal health?
 

|                                 |                                 |                            |                            |                            |
|---------------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
| <input type="radio"/> Excellent | <input type="radio"/> Very Good | <input type="radio"/> Good | <input type="radio"/> Fair | <input type="radio"/> Poor |
|---------------------------------|---------------------------------|----------------------------|----------------------------|----------------------------|
- When do you see a medical doctor or nurse?
 

|   |
|---|
| <input type="radio"/> Routinely for annual exam, check-up, and/or preventative care   |
| <input type="radio"/> When I and/or a family member is ill/injured/sick/not feeling well  |
| <input type="radio"/> Regular visits directed by a medical professional for the care of chronic disease (diabetes, high blood pressure, asthma, etc.) |
| <input type="radio"/> Rarely  |
| <input type="radio"/> Never   |
- Where or with whom do you and your family receive routine medical care? Please select all that apply.
 

|  |  |
|--|--|
| <input type="radio"/> Traditional medical office (MD, APN, PA)           | <input type="radio"/> Provider of alternative medicine |
| <input type="radio"/> Urgent care facility or store-based walk-in clinic | <input type="radio"/> Hospital emergency room          |
| <input type="radio"/> Free or low-cost clinic or health center           | <input type="radio"/> No routine medical care received |
| <input type="radio"/> Local Health Department clinic                     | <input type="radio"/> Other: _____                     |
- Are you and all of your family members able to get needed care?
 

|  | Always                | Sometimes             | Rarely                | Never                 | N/A                   |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Basic medical care   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Dental care  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Mental health care   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medical specialty care (cardiology, neurology, etc.)                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medicine and medical supplies  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Pregnancy care   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Routine screenings (mammograms, laboratory testing, age/gender appropriate screenings) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

9. If you did not answer "Always" to any item in question 8, why? Please check all that apply.

|                               | Insurance             | No appointment        | Can't get appointment | Can't afford // too expensive | Inconvenient hours    | Lack of transportation | Lack of trust in medical providers | Language barrier      | Other                 | N/A                   |
|-------------------------------|-----------------------|-----------------------|-----------------------|-------------------------------|-----------------------|------------------------|------------------------------------|-----------------------|-----------------------|-----------------------|
| Basic medical care            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Dental care                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Mental health care            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medical specialty care        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medicine and medical supplies | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Pregnancy care                | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Routine screenings            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>         | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

If you answered "Other," please specify: \_\_\_\_\_

10. How do you pay for your health care? Please check all that apply.

- Cash (no insurance)
- Private health insurance (for example: Anthem Blue Cross, HMO)
- Medicare
- Medicaid
- Veterans Administration
- Charity care
- Other: \_\_\_\_\_

11. How many days a week do you ...

|  | 0                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Exercise for 30 or more minutes                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Eat five or more servings of fruits and vegetables | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Eat whole-grain breads, cereals or noodles         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Drink more than two alcoholic drinks               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Smoke one or more cigarettes                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Vape or juul                                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**General Demographic Questions:** Your responses will be kept confidential and will not be shared.

12. City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

13. Age:

- 15-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75+

14. Sex:  Female  Male

15. Ethnic group you most identify with:

- White
- Black or African American
- Hispanic or Latino
- Asian
- Two or more races
- Other: \_\_\_\_\_

16. Marital Status

- Married
- Co-habiting
- Not married/Single
- Divorced
- Widowed

17. Education

- Did not complete high school
- Highest grade level completed: \_\_\_\_\_
- High school diploma or GED
- Some college
- College degree or higher
- Other

18. Household income

- Less than \$15,000
- \$15,000 - \$24,999
- \$25,000 - \$34,999
- \$35,000 - \$49,999
- \$50,000 - \$74,999
- \$75,000 - \$99,999
- Over \$100,000

19. Employment Status

- Full time
- Part time (one job)
- Part time (2 or more jobs)
- Student
- Retired
- Unemployed
- Other: \_\_\_\_\_

20. What language do you usually speak at home?

- English
- Spanish
- Other: \_\_\_\_\_

21. How many children under 18 live in your household? \_\_\_\_\_

22. How many times a week do your children engage in physical activity (sports, outdoor play, etc.)

- Every day (7 days a week)
- 5-6 days a week
- 3-4 days a week
- 1-2 days a week
- Less than 1 day a week

23. Where/how did you receive this survey? Check one.

- Church
- Community meeting
- Retail store/shopping mall
- Mail
- Newspaper
- Personal contact
- Social media (Facebook)
- Workplace
- Other: \_\_\_\_\_

Thank you for your responses. Please return completed surveys to the address below by February 28, 2019. If you would like more information about this community project, please contact us at 540-536-2504.

Mary Zufall, Business Development Manager  
 Valley Health System  
 220 Campus Boulevard, Suite 402  
 Winchester, VA 22601



Tómese unos minutos para completar la encuesta a continuación. El propósito de la encuesta, es conocer sus opiniones sobre las necesidades de salud de la comunidad en el área de servicio de Valley Health System. Los resultados de la encuesta y otra información se utilizarán para identificar las inquietudes más inmediatas que se pueden abordar a través de la acción comunitaria. Si ya completó la encuesta de salud comunitaria de 2019, ignore esta solicitud.

Recuerde, su opinión es importante! Si tiene alguna pregunta, comuníquese con nosotros a la dirección que se proporciona al final de la encuesta. Gracias por compartir sus opiniones.

1. ¿Cuáles de los siguientes son los tres factores más importantes para una comunidad saludable?

(Los factores que mejoran la calidad de vida en una comunidad). Marque solo tres:

- |  |   |  |
|--|---|--|
| <input type="radio"/> Un lugar seguro para criar niños                 | <input type="radio"/> Relaciones raciales saludables  | <input type="radio"/> Bajo nivel de maltrato infantil                    |
| <input type="radio"/> Trabajos y una economía estable                  | <input type="radio"/> Parques e instalaciones recreativas                                   | <input type="radio"/> Comportamientos y estilo de vida saludables        |
| <input type="radio"/> Ambiente limpio                                  | <input type="radio"/> Eventos de arte y culturales  | <input type="radio"/> Tasa de mortalidad baja en adultos/ y enfermedades |
| <input type="radio"/> Vivienda asequible                               | <input type="radio"/> Valores religiosos Valores y espirituales                             | <input type="radio"/> Baja tasa de mortalidad infantil                   |
| <input type="radio"/> Baja delincuencia / seguridad en los vecindarios | <input type="radio"/> Lazos familiares fuertes  | <input type="radio"/> Otros: _____                                       |
| <input type="radio"/> Excelentes escuelas                              | <input type="radio"/> Acceso a asistencia médica (por ejemplo, médico de familia, clínica.) |  |

2. ¿Cuáles de los siguientes son los tres problemas de salud más importantes en nuestra comunidad?

(Aquellos problemas que tienen el mayor impacto en la salud general de la comunidad.) Por favor marque solo tres:

- |   |  |   |
|---|--|---|
| <input type="radio"/> Acceso a alimentos saludables | <input type="radio"/> Enfermedades cardíacas                         | <input type="radio"/> Enfermedades respiratorias/Pulmones       |
| <input type="radio"/> Asma                          | <input type="radio"/> Presion alta                                   | <input type="radio"/> Enfermedades de transmission sexual (ETS) |
| <input type="radio"/> Alzheimer o demencia          | <input type="radio"/> Falta de vivienda                              | <input type="radio"/> Derrame cerebral                          |
| <input type="radio"/> Vivienda asequible            | <input type="radio"/> Ingresos bajos/problemas financieros           | <input type="radio"/> Abuso de sustancias                       |
| <input type="radio"/> Exceso peso                   | <input type="radio"/> Salud mental (depresión, autismo, bipolaridad) | <input type="radio"/> Suicidio                                  |
| <input type="radio"/> Cancer                        | <input type="radio"/> Accidentes automovilísticos                    | <input type="radio"/> Embarazos de Adolescentes                 |
| <input type="radio"/> Obesidad infantil             | <input type="radio"/> No suficiente ejercicio                        | <input type="radio"/> Tabaco/fumar                              |
| <input type="radio"/> Salud Dental                  | <input type="radio"/> Calidad deficiente del aire                    | <input type="radio"/> Usa cigarrillos electrónicos o juul       |
| <input type="radio"/> Diabetes                      | <input type="radio"/> Hábitos de alimentación poco saludables        | <input type="radio"/> Otros: _____                              |
| <input type="radio"/> Violencia Domestica           |  |   |

3. ¿Cuáles de los siguientes son los tres comportamientos de riesgo más frecuentes en nuestra comunidad? (Aquellos conductas que tienen el mayor impacto en la salud general de la comunidad) Marque solo tres:

- |  |   |   |
|--|---|---|
| <input type="radio"/> Abuso de alcohol       | <input type="radio"/> Falta de vacunas para prevenir enfermedades | <input type="radio"/> No usar control de la natalidad                                   |
| <input type="radio"/> Abandono de la escuela | <input type="radio"/> Racismo/otra forma de intolerancia          | <input type="radio"/> Sexo sin protección   |
| <input type="radio"/> Drogadicción           | <input type="radio"/> Uso de Tabaco/Fumar                         | <input type="radio"/> No usar el cinturón de seguridad/asientos de seguridad para niños |
| <input type="radio"/> Falta de ejercicio     | <input type="radio"/> Usar cigarrillos electronicos o juul        | <input type="radio"/> Otros: _____  |

4. ¿Cómo calificaría a nuestra comunidad, como una comunidad saludable?

- Excelente     Muy buena     Buena     Razonable     Mala

5. ¿Cómo calificaría su propia salud personal?

- Excelente     Muy buena     Buena     Razonable     Mala

6. ¿Cuándo usted visita a un médico o enfermera?

- Rutinariamente para exámenes anuales, chequeos y /o cuidados preventivos
- Cuando alguien de mi familia o Yo, está enfermo, herido, o no se siente bien.
- Visitas regulares dirigidas por un profesional médico para el cuidado de enfermedades crónicas (diabetes, presión arterial alta, asma, etc.)
- Raramente
- Nunca

7. ¿Dónde o con quién recibe atención médica de rutina usted y su familia? Por favor seleccione todas las respuestas válidas.

- |  |   |
|--|---|
| <input type="radio"/> Oficina de un doctor                                 | <input type="radio"/> Proveedor de medicina alternativa.      |
| <input type="radio"/> Centro de atención de urgencias o clinica sin citas. | <input type="radio"/> Sala de Emergencia del Hospital         |
| <input type="radio"/> Clínica o centro de salud gratuito o de bajo costo.  | <input type="radio"/> No se recibe atención médica de rutina. |
| <input type="radio"/> Departamento de salud local                          | <input type="radio"/> Otros: _____                            |

8. ¿Usted y todos los miembros de su familia, pueden obtener la atención necesaria?

|   | Siempre               | Aveces                | Raramente             | Nunca                 | ND                    |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Cuidado medico básico   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado dental  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Salud mental  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado médico especial(cardiólogo, neurólogo, etc.)  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medicina y suplementos médicos  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado prenatal  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Exámenes de rutina (mamografías, pruebas de laboratorio, exámenes adecuados para la edad y el género) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |



|   |                       |                           |                            |                       |                       |                       |                                    |                       |                       |                       |                       |
|---|-----------------------|---------------------------|----------------------------|-----------------------|-----------------------|-----------------------|------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 9. Si no respondió "Siempre" a alguna de la pregunta 8, ¿por qué?<br>Por favor marque todos los que apliquen. | No seguro             | No puede obtener una cita | Muy caro/no lo puedo pagar | Inconvenientes        | Horas                 | Falta de Transporte   | Falta de confianza en los médicos. | Falta de Lenguaje     | Barrera de Lenguaje   | Otros                 | M/D                   |
| Atención médica básica  | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado dental  | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado de la salud mental  | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Especialidad médica   | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Medicina y suministros médicos.   | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Cuidado prenatal  | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Exámenes de rutina  | <input type="radio"/> | <input type="radio"/>     | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Si usted respondió otros, especifique: \_\_\_\_\_

10. ¿Cómo paga por su atención médica? Por favor marque todos los que apliquen.

- Efectivo (sin seguro médico)
- Seguro Médico privado (por ejemplo: Anthem Blue Cross, HMO)
- Medicare
- Medicaid
- Administración de Veteranos
- Cuidado caritativo
- Otros: \_\_\_\_\_

11. Cuántos días a la semana hace ...

|  |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  | 0                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     |
| Hacer ejercicio por 30 minutos o más             | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Comer cinco o más porciones de frutas y verduras | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Comer pan integrales, cereales o fideos          | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Beber dos o más bebidas alcohólicas              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Fuma uno o más cigarrillos                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Usa cigarrillos electrónicos o juul              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**Preguntas demográficas generales: Sus respuestas se mantendrán confidenciales y no se compartirán.**

12. Ciudad/pueblo \_\_\_\_\_ Código postal: \_\_\_\_\_

13. Edad:
- 15-24
  - 25-34
  - 35-44
  - 45-54
  - 55-64
  - 65-74
  - 75+

14. Sexo:  Femenino  Masculino

15. Grupo étnico con el que se identifica más:
- Blanco
  - Negro o africano Americano
  - Hispano o Latino
  - Asiático
  - De dos o más razas
  - Otro

16. Estado civil:
- Casado
  - Co-habitado
  - Viudo
  - Soltero/no casado
  - Divorciado

17. Educación:
- No complete la secundaria
  - Nivel que termino: \_\_\_\_\_
  - Diploma de Bachillerato o GED
  - Some college
  - College degree or higher
  - Otro: \_\_\_\_\_

18. Ingreso Familiar
- Menos de \$15,000
  - \$15,000 - \$24,999
  - \$25,000 - \$34,999
  - \$35,000 - \$49,999
  - \$50,000 - \$74,999
  - \$75,000 - \$99,999
  - Más de \$100,000

19. Estatus de Empleo:
- Tiempo completo
  - Media jornada(Un trabajo)
  - Media jornada (más de un trabajo)
  - Jubilado
  - Estudiante
  - Desempleado
  - Otro: \_\_\_\_\_

20. ¿Qué idioma habla en casa?  
 Inglés  Español  Otro: \_\_\_\_\_

21. ¿Cuántos niños menores de 18 años viven en su vivienda? \_\_\_\_\_

22. ¿Cuántas veces por semana sus niños participan en actividades físicas (deportes, juegos a aire libre, etc.)?
- Todos los días (7 días a la semana)
  - 5-6 días a la semana
  - 3-4 días a la semana
  - 1-2 días a la semana
  - Menos de 1 día a la semana

23. ¿Dónde o cómo recibió esta encuesta?
- Iglesia
  - Junta Comunitaria
  - Tienda de comestibles o centro comercial
  - Correo
  - Periódico
  - Contacto Personal
  - Medios de comunicación social (Facebook)
  - Trabajo
  - Otro: \_\_\_\_\_

Gracias por sus respuestas. Por favor, devuelva las encuestas completadas a la dirección a continuación antes del 28 de Febrero 2019. Si desea obtener más información sobre este proyecto comunitario, comuníquese con nosotros al número de teléfono a continuación:

**Mary Welch-Flores, Gerente de Desarrollo de Negocios**  
Valley Health System, 220 Campus Boulevard  
Suite 402, Winchester, VA 22601  
540-536-2504

#### 4. Target Population Interview Questions

## Valley Health System

### Community Health Needs Assessment (CHNA)

### Interview Questions

Interviewee Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_

Date and Location Held: \_\_\_\_\_

Is Interviewee a Public Health Expert (Y/N)?: \_\_\_\_\_

Interviewer will begin the interview with:

- brief background on Valley Health’s CHNA process and how results will be used;
- individual responses will be aggregated and will be kept confidential;
- how interviewees will be identified in the report; and
- the interview is strictly voluntary, and by agreeing to proceed interviewee is indicating consent.

#### Questions:

1. **Organizational Mission/Issues, Area and Population (if relevant).** If Interviewee is employed/affiliated with an organization: what is your organization’s mission/what are its services; geographical area (town or county) or population group (uninsured, racial/ethnic minority, congregation) served? If yes, please elaborate.
2. In your opinion, what are the **biggest issues or concerns** facing the people served by your organization (or populations about which you have particular knowledge)? The biggest issues or concerns in your community?  
(If necessary: What are the **biggest health-related issues or concerns**?)
3. Over the past couple years, have these issues been **improving, staying the same or getting worse**? Why? How do you know? Please provide an example.
4. **Where** and for what **population groups** in the community are each of these issues most pronounced? (City/Town, County, road corridor, hospital service area, ...)
5. Please discuss the kinds of issues that people served by your organization (or population groups about which you have particular knowledge) encounter when attempting to **access health or social services** for themselves and/or their families.
  - **Where** (in what locations/areas) are these problems most pronounced?
  - For **what population groups** are these problems most pronounced (low-income, minorities, uninsured, and people with chronic disease)?

6. Do residents leave the local community to **access** certain services? If so, which residents and for what? What services are not readily accessible locally? Why do residents need to travel for care? Where do they go for care?
7. Please discuss the principal **factors that are contributing to (driving) poor health status** among people served by your organization (or population groups about which you have particular knowledge).
  - **Where** (in what locations/areas) are these problems most pronounced?
  - For **what population groups** are these problems most pronounced (low-income, minorities, uninsured, and people with chronic disease)?
8. What organizations (including coalitions and informal groups) are working to address these health care access and health status problems? What community assets could play a role in addressing these needs?
9. What specific initiative(s) would you recommend be implemented to address the most pressing access or health status problems in the community (or for population groups about which you have particular knowledge)?

## Appendix B – Actions Taken Since The 2016 CHNA

---

This appendix discusses community health improvement actions taken by Valley Health - Winchester Medical Center since its last CHNA reports were published, and based on the subsequently developed Implementation Strategies. The information is included in the 2019 CHNA reports to respond to final IRC 501(r) regulations, published by the IRS in December 2014.

### Priority Strategic Initiatives

1. Access to Primary and Preventative Care.
  - a. Utilize United Way's 211 directory in Virginia and West Virginia, updating hospital and affiliate service provider contact information within the online directory to facilitate access to Valley Health services. Standardize referrals of vulnerable populations and/or high-risk patients between the hospital and local free medical clinics, including the Free Medical Clinic of the Northern Shenandoah Valley, Good Samaritan Free Clinic, St. Luke Community Clinic, Page County Free Clinic, and the Shenandoah County Free Clinic. By using a caseworker within the emergency room, this standardized process will help those in need obtain access to primary and preventative care more expeditiously, and reduce unneeded emergency department visits.
  - b. Provide financial support to Faith in Action, an organization that provides transportation to and from healthcare services. This financial support will serve to sustain transportation services for low-income persons to access needed medical care and social services.
  - c. Create a consortium of for-profit and not-for-profit entities within Lord Fairfax Health District for the purpose of facilitating public access to health care through additional grant opportunities for transportation funding.
  - d. Provide information on the locations of, and eligibility requirements for, follow-up health services to vulnerable populations receiving health screenings via Valley Health's Mobile Health Coach, and continue to deploy the Mobile Health Coach to provide screenings and follow-up referral to the community free of charge. Examples of screenings include blood pressure checks and cholesterol screenings.
  - e. Continue the work of the Preventable Hospital Admissions Task Force to improve access to outpatient services for community residents and reduce avoidable emergency department admissions.
  - f. Provide financial support to the Free Medical Clinic of Northern Shenandoah Valley, Inc., Shenandoah Community Health Clinic, St. Luke's Free Clinic, and Good Samaritan Free Clinic, organizations that provide medical care to low-income families and the uninsured in Winchester City, Frederick County, and Clarke County. This financial support will help sustain the organization's mission, assist those in need with obtaining access to primary and preventative care, and reduce unneeded emergency department visits.
  - g. Provide financial assistance to the local Federal Qualified Health Center (FQHC), Shenandoah Valley Medical Systems, to improve access to primary and mental health services.

- h. Subsidize recruitment efforts in identified health professional shortage areas (HPSAs) to increase the number of healthcare professionals in identified specialties and professions.
  - i. Subsidize the Shenandoah Valley Family Practice Residency program to train and retain family practice physicians in the community.
  - j. Provide financial and in-kind support of training programs for physical therapy, occupational therapy, physician assistant, nurse practitioner nursing, and certified nursing assistants to attract and retain healthcare professionals in these key disciplines.
  - k. Provide financial assistance through both free and discounted care for health care services, consistent with Valley Health's financial assistance policy. This policy is intended in part to reduce financial considerations as a barrier to primary and preventative care, thereby managing health in the most cost effective manner.
  - l. In addition to offering charity assistance to eligible individuals and families, assist patients in determining eligibility for federal, state, or local entitlement programs and in enrolling in Medicaid. WMC assists patients with obtaining available benefits, including completion of necessary paperwork online.
2. Mental and Behavioral Health
- a. Provide financial support to the Concern Hotline, an organization that provides crisis intervention and suicide prevention services to residents in the Northern Shenandoah Valley. This important resource provides an access point to those with a mental health need, and a clearinghouse for referrals to other appropriate community resources.
  - b. Continue to provide services through a psychosocial club, Camp Re-Creation, for persons with mental health conditions who are at risk for readmission in Frederick County and Winchester City. This camp started in the summer of 2013 and intends to provide summer, fall, and spring classes.
  - c. Provide access to mental and behavioral healthcare through telemedicine services that reduce geographic barriers to care. This program places the expertise of trained mental health professionals at the bedside of mental health patients in crisis, in locales where this expertise would not otherwise be available.
  - d. Provide financial support to the National Alliance on Mental Illness (NAMI) of Winchester, an organization working to improve mental health in Winchester City. This advocacy organization serves as a both a critical link to the needs of the mental health community, and a coordinator of support programs that assist mental health patients and their families.
  - e. Continue to provide scholarships at Valley Health's wellness and fitness centers for patients with mental illness or substance abuse diagnoses with an accompanying referral from their physician regarding the need for exercise.
  - f. Continue to provide funding for the Behavioral Health Unit and related services located at Winchester Medical Center for adult acute care patient for services. This facility serves as the only acute inpatient behavioral health facility in the community.
  - g. Subsidize outpatient mental health services, a structured program serving the adult mental health population within the community, which is an important part

of the continuum of care for those discharged from acute care and for other community members not requiring inpatient mental health services.

- h. Provide financial assistance to the local Federally Qualified Health Center (FQHC), Shenandoah Valley Medical Systems, to improve access to services. This support allows expansion of the clinic to provide increased access for mental health patients.
  - i. Collaborate with The Laurel Center for forensic nursing services to include referrals, counseling, and litigation support serving victims of domestic and sexual violence.
3. Physical Activity, Nutrition, and Obesity-Related Chronic Diseases
- a. Enhance awareness of and education related to obesity and youth risk behaviors using the 9-5-2-1-0 initiative, a program that encourages healthy choices related to sleep, consumption of fruits and vegetables, recreational screen time, physical activity, and sodas and sugary drinks. 9-5-2-1-0 materials and publications will be utilized in preschool and elementary schools, promoted to WIC program participants, and distributed by the Health Coach mobile unit at health fairs and other external events.
  - b. Continue participation in the youth risk behaviors subgroup and the Youth Resource Alliance, a network of youth-focused individuals, organizations, and resources serving youth in the Lord Fairfax Health District.
  - c. Using information on specific risk behaviors of youth identified in the Center for Disease Control and Prevention's Youth Risk Behavior Survey conducted in the Lord Fairfax Health District, develop strategies to address healthy behaviors, such as the Girls on the Run program which encourages physical activity in third to eighth grade girls.
  - d. Continue deploying Valley Health's Mobile Health Coach to provide screenings and referrals to the community free of charge. Screenings include blood pressure checks and cholesterol screenings.
  - e. Provide community educational and screening events targeting low-income and underinsured individuals, to increase awareness and detection of colorectal, breast (Every Women's Life) and lung cancer; and diabetes.
  - f. Promote awareness and detection of cardiovascular disease by providing education and screenings at community events such as the Community Wellness Festival and county fairs, as well as education programs coordinated by Valley Health Heart & Vascular. Additionally, Valley Health's Heart Attack Risk Program provides free screenings across the region.
  - g. Sponsor the Apple Blossom 10K race and partner with other local municipal parks and recreation departments to provide other 5K and fun runs. Races help promote physical fitness for the community.
  - h. Establish the Chronic Disease Transition Center to provide assistance and services to patients with chronic diseases. This program provides education and disease management services for patients otherwise without access to a primary care physician or health education resources.
  - i. Deliver the Diabetes Management Program, an American Diabetes Association (ADA) accredited program that provides educational classes in both group and

individual settings to cover specific content areas defined by the ADA and outlined in the National Standards for Diabetes Self-Management Education (DSME). Included are follow-up education, nutritional education, insulin initiation/adjustment, insulin pump therapy, pregnancy and diabetes, and other services such as continuous glucose monitoring and diabetes prevention education.

4. Substance Abuse and Tobacco Smoking
  - a. Provide financial support to Edgehill Recovery Center/New Life, an organization focusing on healthy living and recovery from substance abuse.
  - b. Assist with the detection and treatment of substance abuse screening in prenatal care through the Perinatal Substance Abuse/District Child Protective Services. Licensed practitioners, as a routine component of prenatal care, establish and implement a medical history protocol to screen all pregnant patients for substance use to determine the need for further evaluation.
  - c. Provide access to education to each patient upon discharge through the Tobacco Cessation Program. WMC also provides a free Tobacco Cessation Information session for the community to learn more about tobacco use and potential risks of cancer, successful ways of quitting, and to become aware of local and national resources.
  - d. Provide financial and in-kind support for the Northern Shenandoah Valley Substance Abuse Coalition, a coalition of law enforcement, health care, substance abuse treatment and youth advocacy organizations, working together to address substance abuse and addiction in the Winchester region.
  - e. Provide treatment and stabilization services in our region both through services at WMC and in collaboration with community and regional substance abuse and mental health providers.
  
5. Maternal and Child Health/Teen Pregnancy
  - a. Provide mammogram screenings for uninsured community members year-round on Mondays at a reduced cost, and during the month of October offered every day.
  - b. Continue to provide financial and in-kind support to the ChildSafe Center-CAC to assist children that have been abused. Advocate for a collaborative, child-focused approach to the investigation, prosecution and treatment of child abuse by providing a safe, child-friendly facility, a multidisciplinary team response to abuse allegations, and professional support, education and advocacy services.
  
6. Financial Hardship and Basic Needs Insecurity
  - a. Provide support to area United Way programs addressing financial insecurity through their partnerships with local non-profit organizations.
  - b. Provide housing for families that have a loved one admitted to the hospital through the Hurst House, a hotel-like atmosphere with an added personal touch. It is offered to those that need to be close to their loved ones and who live an extended distance from the hospital. The services are free of charge to patient families.



- c. Provide prescriptions through financial support to those that cannot afford them through the Shenandoah Valley Compassionate Pharmacy program, aimed at providing medications to those that would otherwise forego medications.
- d. Provide COPD Inhalers to those that cannot afford them through the Shenandoah Compassionate Pharmacy Program.

## SOURCES

---

- Arnold & Porter, 2018. “*Affordable Care Act “Repeal and Replace”*”. Retrieved 2019, from <https://www.arnoldporter.com/en/perspectives/publications/2018/01/5-health-care-policy-issues-to-follow-in-2018>.
- Becker’s Hospital Review, 2018. “*Michael Dowling: 4 most important healthcare trends in 2018*”. Retrieved 2019, from <https://www.beckershospitalreview.com/hospital-management-administration/michael-dowling-4-most-important-healthcare-trends-in-2018.html>.
- Centers for Disease Control, 2016. “*Sexually Transmitted Disease Surveillance 2014*”. Retrieved 2016, from <https://www.cdc.gov/std/stats17/default.htm>.
- Commentary: Focus on People, Not Pre-Existing Conditions  
<https://www.usnews.com/news/healthcare-of-tomorrow/articles/2019-06-12/commentary-focus-on-people-not-pre-existing-conditions>.
- Dignity Health. (n.d.), 2018. “*Community Needs Index*”. Retrieved 2019, from <http://cni.chw-interactive.org/>.
- Economic Research Service (ERS), U.S. Department of Agriculture (USDA). (2017). *Food Access Research Atlas*. Retrieved 2019, from <http://www.ers.usda.gov/data-products/food-access-research-atlas.aspx>.
- ElationHealth, 2018. “*Health policy trends for 2018*”. Retrieved 2019, from <https://www.elationhealth.com/healthcare-innovation-policy-news-blog/trends-2018/>.
- ESRI Community Profiles for all PSA and SSA Counties. 2018. Demographic Data: *2018 Population by Age & Sex*.
- ESRI Community Profiles for all PSA and SSA Counties. 2018. Demographic Data: *2018 Uninsured Rates*.
- Federal Bureau of Investigation. (2016). *Uniform Crime Reports: Violent and Property Crime Offenses*. Retrieved 2019, from <https://ucr.fbi.gov/crime-in-the-u.s/2016/crime-in-the-u.s.-2016/tables/table-8/table-8-state-cuts/virginia.xls>.
- Health Insurance & Health Reform Authority, 2018. “*Virginia and the ACA’s Medicaid expansion*”. Retrieved 2019, from <https://www.healthinsurance.org/virginia-medicaid/>.
- Health Insurance.org, November 2, 2018. “*Virginia and the ACA’s Medicaid Expansion*.” Retrieved 2019, from: <https://www.healthinsurance.org/virginia-medicaid/>
- Internal Revenue Service. (2018). Instructions for Schedule H (Form 990).

Knowledge@Wharton, 2018. "Beyond Obamacare: What's Ahead for U.S. Health Care in 2018". Retrieved 2019, from <https://knowledge.wharton.upenn.edu/article/the-future-of-the-aca/>.

Commentary: Focus on People, Not Pre-Existing Conditions  
<https://www.usnews.com/news/healthcare-of-tomorrow/articles/2019-06-12/commentary-focus-on-people-not-pre-existing-conditions>.

National Pride Survey Data (2017-2018). "Grades 6-12 Pride Surveys National Summary". Retrieved July 23, 2019, from <http://www.pridesurveys.com/index.php/reports-on-student-behavior-perceptions-2/>

Office of School Nutrition Programs, Virginia Department of Education. (2018-2019). *National School Lunch Program (NSLP) Free and Reduced Price Eligibility Report*. Retrieved 2016, from <http://www.doe.virginia.gov/support/nutrition/statistics/>

Page Alliance for Community Action. (2017-2018). Page County Student Pride Survey Results. Retrieved 2019.

The Winchester Star, (September 5, 2017). "*Lord Fairfax Health District leads state in Lyme disease rates*",

[https://www.winchesterstar.com/news/clarke/lord-fairfax-health-district-leads-state-in-lyme-disease-rates/article\\_d3a33cec-d798-5aa5-b61b-b9f4d3f7e97c.html](https://www.winchesterstar.com/news/clarke/lord-fairfax-health-district-leads-state-in-lyme-disease-rates/article_d3a33cec-d798-5aa5-b61b-b9f4d3f7e97c.html)

United Way of Northern Shenandoah Valley (2014-2017). "Community Needs Assessment".

Retrieved 2019, from <http://www.unitedwaynsv.org/sites/unitedwayshenandoah.oneeach.org/files/pictures/Community%20Needs%20Update%202014-2017.pdf>.

United Way of Northern Shenandoah Valley (2015). "ALICE Asset Limited, Income Constrained, Employed". Retrieved 2019, from <https://www.unitedwaynsv.org>.

U.S. Census Bureau. (2017). Demographic Data: *Community Facts, Table: Selected Economic Characteristics 2013-2017 American Community Survey 5 Year Estimates*. Retrieved 2019, from [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_DP03&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP03&prodType=table).

U.S. Census Bureau. (2017). Demographic Data: *Poverty Level-By County and Ethnicity/Race*. Retrieved 2019, from [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_17\\_5YR\\_S1701&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_5YR_S1701&prodType=table).

U.S. Census Bureau. (2017). Demographic Data: *Unemployment Rates*. Retrieved 2019, from [https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_14\\_5YR\\_DP03&prodType=table](https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_DP03&prodType=table).

- U.S. Centers for Disease Control and Prevention. (2016). *Behavioral Risk Factor Surveillance System*. Retrieved 2013, from <http://www.cdc.gov/brfss/>
- U.S. Center for Disease Control and Prevention's National Program of Cancer Registries Cancer Surveillance System. (2016). State Cancer Profiles: Incidence Rates Report Retrieved 2019, from <http://statecancerprofiles.cancer.gov/incidencerates/index.php>.
- USDA Report to Congress. (June 2019). Access to Affordable and Nutritious Food. Measuring and Understanding Food Desserts and their Consequences. Retrieved 2019, from [https://www.ers.usda.gov/webdocs/publications/42711/12698\\_ap036fm\\_1\\_.pdf?v=41055](https://www.ers.usda.gov/webdocs/publications/42711/12698_ap036fm_1_.pdf?v=41055)
- U.S. Health Resources and Services Administration. (2016). *Shortage Areas*. Retrieved 2016, from <https://datawarehouse.hrsa.gov/tools/analyzers/hpsafind.aspx>.
- University of Wisconsin Population Health Institute and Robert Wood Johnson Foundation. (2019). *County Health Rankings: Mobilizing Action Toward Community Health*. Retrieved 2019, from <http://www.countyhealthrankings.org/>
- Valley Health System. (2018). Emergency Department Data.
- Valley Health System. (2018). Inpatient Discharge Data.
- Virginia Department of Health (2016). Reportable Disease Surveillance Data. Retrieved 2019, from <http://www.vdh.virginia.gov/Epidemiology/Surveillance/SurveillanceData/AnnualReports/index.htm>
- Virginia Department of Health. (2017). *2017 Communicable Disease Report*. Retrieved 2019, from <http://www.vdh.virginia.gov/content/uploads/sites/89/2018/07/LFHD-2017-Annual-CD-Report.pdf>.
- West Virginia Department of Health and Human Resources, Office of Epidemiology and Prevention Services. (2017). STD Surveillance Data. Retrieved 2019, from [https://oepps.wv.gov/std/pages/std\\_data.aspx](https://oepps.wv.gov/std/pages/std_data.aspx).
- West Virginia Life Expectancy. (2019). West Virginia Causes of Death by Age and Gender. Retrieved 2019, from <https://www.worldlifeexpectancy.com/west-virginia-cause-of-death-by-age-and-gender>.
- Winchester Department of Social Services. (2017). Winchester Department of Social Services FY 2013 Annual Report. Retrieved 7/25/2019, from <https://www.winchesterva.gov/sites/default/files/documents/pio/2017-annual-report-web.pdf>.