

# Franklin County Community Health Needs Assessment

**FINAL REPORT**

.....

**AUGUST 10, 2016**

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## Disclaimer

This document has been produced to benefit the community. Carilion Clinic encourages use of this report for planning purposes and is interested in learning of its utilization. Comments and questions are welcome and can be submitted to Amy Michals ([almichals@carilionclinic.org](mailto:almichals@carilionclinic.org)), Carilion Clinic Community Outreach Planning Analyst.

Members of the Project Management Team reviewed all documents prior to publication and provided critical edits. Every effort has been made to ensure the accuracy of the information presented in this report; however, accuracy cannot be guaranteed. Members of the Franklin County Community Health Assessment Team cannot accept responsibility for any consequences that result from the use of any information presented in this report.

## Acknowledgements

Success of the Franklin County / Bassett Community Health Needs Assessment (FCHNA) was due to the strong leadership and participation of its Project Management Team, the Community Health Assessment Team, and members of Healthy Franklin County. Thank you to all of the community members who participated in the Community Health Survey and focus groups.

Members of these teams included:

## Project Management Team

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## Community Health Assessment Team (CHAT)

Carilion Clinic's CHNAs are community-driven projects and success is highly dependent on the involvement of citizens, health and human service agencies, businesses, and community leaders. Community stakeholder collaborations known as "Community Health Assessment Teams" (CHAT) lead the CHNA projects. The CHATs consists of health and human service agency leaders, persons with special knowledge of or expertise in public health, the local health department, and leaders, representatives, or members of medically underserved populations, low-income persons, minority populations, and populations with chronic disease.

## ***CHAT Members***

<b>Name</b>	<b>Organization</b>
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<b>Sue Beatty</b>	Franklin County Department of Aging Services
<b>Nancy Bell</b>	United Way of Franklin County
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<b>Sarah Bowman</b>	Martinsville Henry County Coalition for Health and Wellness
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<b>Pam Chitwood</b>	United Way of Franklin County
<b>Judy Clark</b>	Young Audiences of Virginia
<b>Teresa Fontaine</b>	Southern Area Agency on Aging
<b>Dr. Jody Hersey</b>	Virginia Department of Health
<b>Shirley Holland</b>	Carilion Medical Center
<b>Barbara Jackman</b>	Martinsville Henry County Coalition for Health and Wellness
<b>Bill Jacobsen</b>	Carilion Franklin Memorial Medical Center
<b>Florella Johnson</b>	Pigg River Community Association
<b>Ryan King</b>	Rocky Mount Police Department
<b>Tyler Lee</b>	Carilion Franklin Memorial Medical Center
<b>Stacy Louthan</b>	Family Preservation Services
<b>Sue McGuire</b>	Franklin County Public Library
<b>Amy Michals</b>	Carilion Medical Center
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<b>Gail Nordhaus</b>	Carilion Franklin Memorial Medical Center
<b>Angela Philips</b>	Franklin County Family Resource Center
<b>Amanda Shuff</b>	Southern Area Agency on Aging
<b>Heather Snead</b>	Franklin County Public School System
<b>Amber Wilborne</b>	TW Controls

## Executive Summary

Many and varied organizations are involved in the essential work of improving and maintaining the health of any given community. It is important to assess the health concerns of each community periodically to ensure that current needs are being addressed. A Community Health Needs Assessment (CHNA) every three years will uncover issues, indicate where improvement goals are needed, and track and promote progress in key areas, so that there is demonstrated, ongoing improvement. The work of conducting this CHNA and the public availability of its findings is intended to enable the community to plan effectively the vital work of maintaining and improving health.

*This report contains the findings of the 2016 Franklin County Community Health Needs Assessment (FCCHNA), including data on the target population and service area, as well as primary and secondary data.*

### **Method**

Carilion Clinic and Healthy Franklin County (HFC) partnered to conduct the 2016 FCCHNA. HFC is the community collaboration formed after the 2013 FCCHNA to address community health need.

A 27-member Community Health Assessment Team (CHAT) oversaw the planning activities. The service area included those living in Franklin County and the Bassett area of Henry County. The target population included the low-income, uninsured and/or underinsured, and those living with chronic illness.

Beginning in April 2016, primary data collection included a Community Health Survey, focus groups with key stakeholders and providers, and focus groups with target populations. Secondary data was collected including demographic and socioeconomic indicators, as well as health indicators addressing access to care, health status, prevention, wellness, risky behaviors and the social environment.

### **Findings**

The findings of the 2016 Franklin County / Bassett Community Health Needs Assessment revealed an underserved population in need of better access to primary care, mental health care, dental care and specialty services. The community expressed a need for more reliable transportation and coordination of care across the health and human services sector. Specifically, transportation concerns are exacerbated by the lack of access to primary and dental care, making trips into Roanoke necessary for many Franklin County residents. Stakeholders and community respondents also expressed sincere concern over the use and abuse of alcohol, illegal drugs and prescription drugs.



Poverty rates were higher, academic attainment rates were lower, and unemployment rates continue to be greater than statewide averages impacting the social determinants of health. Health statistics revealed higher death rates from drugs/poison and prescription drugs. Teen pregnancy rates in the region continue to be higher than rates in Virginia. However, rates of smoking, obesity and limited physical activity are improving.

Many of the respondents to the Community Health Survey and focus group participants, whether insured or uninsured, noted that the cost keeps them from accessing preventive care and services. Access to affordable oral health services for uninsured and low-income adults continues to be a major need in the service area.

Stakeholders cited poor health literacy among the target population including limited basic health knowledge, no value placed on preventive care and chronic disease management, and little awareness of existing resources in the community. There is an ongoing effort to develop a “Culture of Wellness” with an emphasis on health education, access to healthy foods, and increased physical activity. Successful collaboration among health and human service organizations is a strength the region can build on to improve coordination of care and the local health culture.

## **Response**

In July 2016, the CHAT participated in a prioritization activity to determine the greatest needs in the service area based on the primary and secondary data collected during the assessment period. The top ten priority areas that emerged from these findings include:

1. Access to primary care
2. Access to mental health counseling/substance abuse services
3. Lack of reliable transportation
4. Access to adult dental care
5. Value not placed on preventive care and chronic disease management
6. High uninsured population
7. High prevalence of substance abuse (alcohol, illegal & prescription drugs)
8. Alcohol and illegal drug use
9. Improved coordination of care across the health and human service sector
10. Stigma with mental health and substance abuse services

The CHAT participated in strategic planning on July 11, 2016. It reviewed the top priorities and compared data from the 2016 FCCHNA to the 2013 FCCHNA, analyzed existing resources and community work around these priority needs, and determined community level strategies to work on over the next three years.

Carilion Clinic will work in the fall of 2016 to develop an implementation strategy. Carilion Clinic, many of the CHAT members, and Healthy Franklin County will continue to collaborate to actively address community health need in Franklin County and the Bassett area of Henry County.

## Target Population

The target populations for Carilion Clinic’s CHNA projects consist of the following groups: low-income individuals, uninsured and underinsured individuals, those that face barriers to accessing care and available resources, and users of existing health care safety net organizations. Populations are examined across the different life cycles including children and adolescents, women of child-bearing age, adults, and elderly, as well as across various race and ethnic groups.

## Service Area

The service areas for each CHNA are determined by at least 70% of unique patient origin of the Carilion Clinic hospital in each respective market. There is a focus placed on areas that are considered Medically Underserved Areas (MUAs), Health Professional Shortage Areas (HPSA), and Food Deserts.

Carilion Franklin Memorial Hospital (CFMH) is located in Rocky Mount, Virginia. In fiscal year 2015, CFMH served 21,118 unique patients. Patient origin data revealed that in fiscal year 2015, 74.40% of patients served by CFMH lived in the following localities:

- Franklin County (69.24%)
- Bassett - Henry County (5.16%)



Nestled in the beautiful Blue Ridge Mountains in Southwest Virginia, Franklin County is mostly rural with 81.3 persons per square mile and a land area of 690.43 square miles.<sup>1</sup>

The service area for the Franklin County Community Health Needs Assessment includes Franklin County and the Bassett area of Henry County. Franklin County residents vary greatly in many socioeconomic factors. The demographic and economic make-up of the residents who live at Smith Mountain Lake is much different than the rest of the county.

<sup>1</sup> US Census, Quick Facts, 2010

# Community Health Improvement Process

Carilion Clinic's community health improvement process was adapted from Associates in Process Improvement's the Model for Improvement and the Plan-Do-Study-Act (PDSA) cycle developed by Walter Shewhart<sup>2</sup>. It consists of five distinct steps: (1) conducting the CHNA, (2) strategic planning, (3) creating the implementation strategy, (4) program implementation, and (5) evaluation. This cycle is repeated every three years to comply with IRS requirements. Each step in the process is explained below. (Please see Appendix 1 for the Carilion Clinic Community Health Improvement Process diagram.)

## ***Step 1: Conduct CHNA***

The first step of conducting a CHNA is to create a Gantt chart. This tool is a timeline that documents the upcoming tasks needed to conduct the CHNA, who is responsible for each task, start and end dates for each task, and the completion percentage for each task. The Gantt Chart for Franklin County can be found in Appendix 2.

The CHAT leads the CHNA and oversees primary and secondary data collection. Primary data collection includes a community health survey (CHS), target population focus groups, and a stakeholder survey.

### ***Community Health Survey (CHS)***

The CHS consists of 40 questions about access and barriers to healthcare, general health questions, and demographic information. The survey mirrors Healthy People 2020 goals, as well as many other national health surveys that do not collect health care data at the county or zip code level. This survey is not a scientific survey and uses oversampling techniques of the target population. (See Appendix 3 for Carilion Clinic's CHS.) A Data Collection and Tracking Committee provides recommendations for future improvements to the CHS with input from the CHAT and community members. An incentive for completing the CHNA was provided to encourage participation in the CHS.

### ***Target Population Focus Groups***

Focus groups are conducted with the target population. The goal of the focus groups is to identify barriers to care and gaps in services for primary care, dental and mental health/substance abuse services for the population. There is at least one focus group representing each lifecycle (children and adolescents, women of child-bearing age, adults, and elderly) living in Franklin County or Bassett if applicable. Focus groups targeting special populations will be determined by the CHAT, if needed. For each focus group, there is a maximum of twelve participants. A facilitator and scribe(s) conduct the focus group meeting and the audio of the meetings are recorded and later transcribed. Snacks and beverages are provided for participants.

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<sup>2</sup> Science of Improvement: How to Improve. (2014). Institute for Healthcare Improvement. Retrieved from <http://www.ihl.org/resources/Pages/HowtoImprove/ScienceofImprovementHowtoImprove.aspx>

Consent forms must be signed prior to each meeting (to inform participants regarding format and to ensure confidentiality). The groups are held in convenient, neutral locations and/or in sites where participants already congregate.

The script for the focus groups is simple and consists of five open-ended questions:

1. In one or two words, how would you describe good health?
2. What do you, or your family and friends, do when you need a check-up or are sick?
3. What do you, or your family and friends, do when you have a toothache or need your teeth cleaned?
4. What do you, or your family and friends, do when you need to talk to someone about your nerves/stress/depression or need help with alcohol or drug addiction?
5. Is there anything else you would like to tell us about your health or the health of others in Franklin County?

Data is analyzed and themes are identified using the focus group transcripts.

### ***Stakeholder Survey***

The final primary research as part of the CHNA is a stakeholder survey. This survey is administered to any stakeholders identified by the CHAT or Carilion Clinic. (See Appendix 4 for the stakeholder survey tool.)

### ***Secondary Data Collection***

Secondary data is collected as part of the CHNA. Data is benchmarked with Healthy People 2020 and other national best measures and trends are analyzed. Carilion Clinic uses the data metrics suggested by the Catholic Health Association.

### ***Prioritization***

After all primary and secondary data collection is complete, the CHAT reviews all data and participates in a prioritization activity. This consists of each CHAT member picking the ten most pertinent community needs and ranking them on a scale of one to ten, with one being the most pertinent. Then, only for those top ten, the CHAT members rate the feasibility and potential impact of the needs on a scale of one to five, with one being the most feasible and having the most impact. (Please see Appendix 7: Community Health Needs Assessment Prioritization Worksheet.) This data is combined and overall ranking, feasibility and potential impact scores are determined.

### ***CHNA Report***

The last step of the CHNA is publishing and analyzing the primary and secondary data into a final CHNA report. These reports must be published in the same fiscal year as the CHNA and made widely available to the community. Carilion publishes the CHNAs on its website at [www.carilionclinic.org/about/chna](http://www.carilionclinic.org/about/chna) and has print copies available through the Community Outreach department. CHAT members and partner organizations may also publish data on their websites.

## ***Step 2: Strategic Planning***

After the completion of the CHNA and the identification of the priority areas (needs), the CHAT enters the strategic planning phase of the process. During strategic planning, the CHAT first reviews data for the top priorities, comparing data from the current needs assessment to results from the prior needs assessment conducted three years earlier. CHAT members then identify and analyze existing community resources and initiatives addressing the priority issues. Analysis of existing work and resources is completed using a SWOT analysis, identifying areas of strength and weakness and factors that could create opportunities for success or threaten success in solving community health needs. Through this process, CHAT members identify alignment opportunities between organizations, identify system changes that are likely to lead to improvement, and select new or existing evidence-based strategies for the community that are most likely to succeed in addressing the needs.

## ***Step 3: Implementation Strategy***

After the CHNA is completed, Carilion Clinic develops a written implementation strategy that specifies what health needs were identified in the CHNA, what needs the organization plans to address, and what needs the organization does not plan to address with reasons for each.

Included in the document are expected outcomes for each community issue being addressed, proposed evidence-based interventions with goals and objectives that will be tracked over time (both process measures and outcome measures). The document must be formally approved by the organization's Board of Directors and filed on the organization's 990 tax return. Carilion Clinic will integrate the implementation strategy with existing organizational and community plans and host an event in the community to present the CHNA results and the corresponding implementation strategy.

#### ***Step 4: Program Implementation***

Carilion Clinic Community Outreach and Healthy Franklin County will establish and monitor new community health programs implemented to respond to the community health needs identified in the CHNA. New programs will be piloted on a small scale first and will be continually assessed and improved using the PDSA cycle. The goal of the PDSA cycle is to make small, sustained improvements over time. Relevant data is collected and analyzed for each program. After successful implementation of the pilot, the program can be implemented on a larger scale throughout Carilion Clinic or to other organizations in the community. The PDSA cycle is on-going for existing community health improvement programs.

#### ***Step 5: Evaluation***

Community health programs and metrics associated with the expected outcome in the implementation strategy will be monitored by Carilion Clinic Community Outreach.

Progress will be reported bi-annually to Carilion Clinic's Board of Directors for each community health need identified in the last CHNA cycle for each community. In addition, the Board will be informed of community grant awards given by Carilion Clinic to fund health safety net programs in the community. Decisions on the funding of health safety net programs will be based on available resources and the impact on addressing a documented community health need identified in the CHNA. For more information, please see <https://www.carilionclinic.org/about/community-outreach>.

Finally, Carilion Clinic will update progress made on each community health needs identified in the most recent CHNA cycle annually on the organization's 990 tax form.

## Community Collaboration and Collective Impact

Carilion Clinic fosters community development in its CHNA process and community health improvement process by using the Strive Collective Impact Model for the CHAT. This evidence-based model focuses on “the commitment of a group of important players from different sectors to a common agenda for solving a specific social problem(s)<sup>3</sup>” and has been proven to lead to large-scale changes. It focuses on relationship building between organizations and the progress towards shared strategies.

Collective impact focuses on four conditions for success:

1. **A Shared Community Vision:** a broad set of cross-sector community partners come together in an accountable way to implement a vision for a healthier community and communicate that vision effectively.
2. **Evidence-based Decision Making:** The integration of professional expertise and data to make decisions about how to prioritize a community's efforts to improve health outcomes.
3. **Collaborative Action:** the process by which networks of appropriate cross-sector services/providers use data to continually identify, adopt and scale practices that improve health outcomes.
4. **Investment & Sustainability:** There is broad community ownership for building civic infrastructure and resources are committed to sustain the work of the partnership to improve health outcomes.

Collective Impact also suggests having a neutral anchor institution to serve as the convening body for the CHAT. The role of the anchor institution is to listen to/support the community as a convener in identifying and aligning around the community's shared aspirations. The anchor institution pulls together and staffs a coalition of key organizations and individuals to achieve that change including: (1) organize meetings of the full partnership; (2) facilitate work groups to guide the development and implementation of specific activities; (3) manage and strengthen relationships with individuals and organizations; (4) engage a broad spectrum of stakeholders in developing community change strategies and mobilizing the community's resources to implement them; (5) build public will and catalyze action; (6) create a policy agenda; (7) use data to inform all decisions<sup>4</sup>.

Carilion Clinic has partnered with the United Way of Franklin County to serve as the anchor institution for the CHAT. Health is the United Way's main priority to advance the common good in Franklin County.

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<sup>3</sup> Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review. Retrieved from [http://www.ssireview.org/images/articles/2011\\_WI\\_Feature\\_Kania.pdf](http://www.ssireview.org/images/articles/2011_WI_Feature_Kania.pdf)

<sup>4</sup> Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review. Retrieved from [http://www.ssireview.org/images/articles/2011\\_WI\\_Feature\\_Kania.pdf](http://www.ssireview.org/images/articles/2011_WI_Feature_Kania.pdf)

## ***Healthy Franklin County***

Healthy Franklin County (HFC) is an initiative of United Way of Franklin County brought forth from two reports, both developed to assess the needs of Franklin County. It is derived from the 2013 FCCHNA and also the Franklin County Prosperity Indicators Report. HFC seeks to reduce obesity and related chronic diseases by mobilizing time, talent and financial resources to promote healthier lifestyles. The focus from its inception has been providing simple ways for people to take control of their health. HFC works by aligning resources to work together to improve the health and well-being of all Franklin County residents. This is done by integrating practices and coordinating improvements that provide collective impact and lead to positive change.

Healthy Franklin County partners with community driven programs including: United Way of Franklin County, Summit Health, Keystone Health, and Franklin County Area Development Corporation. Healthy Franklin County directly partnered with Carilion Clinic to conduct the 2016 Franklin County Community Health Needs Assessment.



## Description of the Community

Franklin County, Virginia is located in the foothills of the Blue Ridge Mountains. Franklin County is part of the West Piedmont Health District. The mission of the West Piedmont Health District is to achieve and maintain optimum personal and community health by emphasizing promotion of disease prevention and environmental protection.

Franklin County is culturally divided into two distinct socioeconomic areas, the Smith Mountain Lake community versus the rural communities and the town of Rocky Mount. The lake community is mostly comprised of retired individuals where geriatric health issues are prominent. Within the town and rural areas reside a large segment of the county's pediatric population, young families, and elderly populations. Health concerns of the rural and town areas are as diverse as is the population.



Carilion Clinic Franklin Memorial Hospital

Carilion Franklin Memorial Hospital is wholly owned by Carilion Clinic, a not-for-profit healthcare organization based in Roanoke, Virginia. Through a comprehensive network of hospitals, primary and specialty physician practices and other complementary services, quality care is provided close to home for more than 870,000 Virginians. With an enduring commitment to the health of the region, care is advanced through medical education and research, and assistance is provided to help the community to stay healthy. Carilion Clinic employs 685 physicians representing more than 70

specialties who provide care at 241 practice sites.

To advance education of health professionals, Jefferson College of Health Sciences, within Carilion Medical Center, is a professional health sciences college offering Associate's, Bachelor's, and Master's degree programs. During fiscal year 2015, 800 undergraduate and 262 graduate students were enrolled.

The Virginia Tech Carilion School of Medicine enrolled 165 students and there were 706 appointed faculty members during fiscal year 2015. Carilion Clinic and Virginia Tech Carilion School of Medicine provide graduate medical education to 260 medical residents and fellows. There are 13 accredited residency programs (Carilion / OMNEE Emergency Medicine Dermatology, General Hospital Dentistry, Emergency Medicine, Family Medicine, Internal Medicine, Neurosurgery, Obstetrics/Gynecology, Pediatrics, Plastic Surgery, Podiatry, Psychiatry and Surgery) and 11 accredited fellowship programs (Addiction Psychology, Adult Joint Reconstruction, Cardiovascular Disease, Child and Adolescent Psychiatry, Gastroenterology,

Geriatric Medicine, Geriatric Psychiatry, Hospice and Palliative Care, Infectious Disease, Interventional Cardiology, and Pulmonary Critical Care).

Advanced Clinical Technology and programs include CyberKnife Stereotactic Radiosurgery, DaVinci Robotic Surgical System, 60 bed neonatal intensive care unit, hybrid operating room, Carilion Clinic Children's Hospital, Cancer Center, Spine Center, and comprehensive cardiothoracic, vascular and orthopedic surgery programs. Carilion Roanoke Memorial Hospital serves as a Level One Trauma Center with EMS services that include three EMS helicopters, six first-response vehicles and 38 Advanced Life Support Ambulances.

An additional benefit to the community is Carilion Clinic's economic contribution to the region. As the area's largest employer, jobs are provided for more than 12,100 residents of the region. Research conducted at the Virginia Tech Carilion Research Institute (VTCRI) creates a bridge between basic science research at Virginia Tech and clinical expertise at Carilion Clinic and increases translational research opportunities for both partners. Research conducted by scientists at the institute is aimed at understanding the molecular basis for health and disease, and development of diagnostic tools, treatments, and therapies that will contribute to the prevention and solution of existing and emerging problems in contemporary medicine. Research areas of emphasis which presently align with areas of strength and active research at Virginia Tech include inflammation, infectious disease, neuroscience, and cardiovascular science and cardiology.

# Primary Data and Community Engagement

## *Stakeholder Survey Results*

During the CHNA process, community stakeholders and providers were encouraged to complete the stakeholder survey (see Appendix 4: Stakeholder Survey for the survey tool). This survey was completed online, in print, and administered to stakeholders during various meetings. When this survey was physically administered at meetings, the project management team used this tool to spark conversation about community health need in the service area. (Please see Appendix 5: 2016 Stakeholder Survey Locations for a complete list of locations where the survey was administered.) In total, 48 participants completed the stakeholder survey. Forty two (42) surveys were completed during stakeholder meetings and six paper copies and online surveys were completed.

### ***Needs and Barriers***

Stakeholders were asked to respond to the following questions addressing the health needs and barriers in Franklin County.

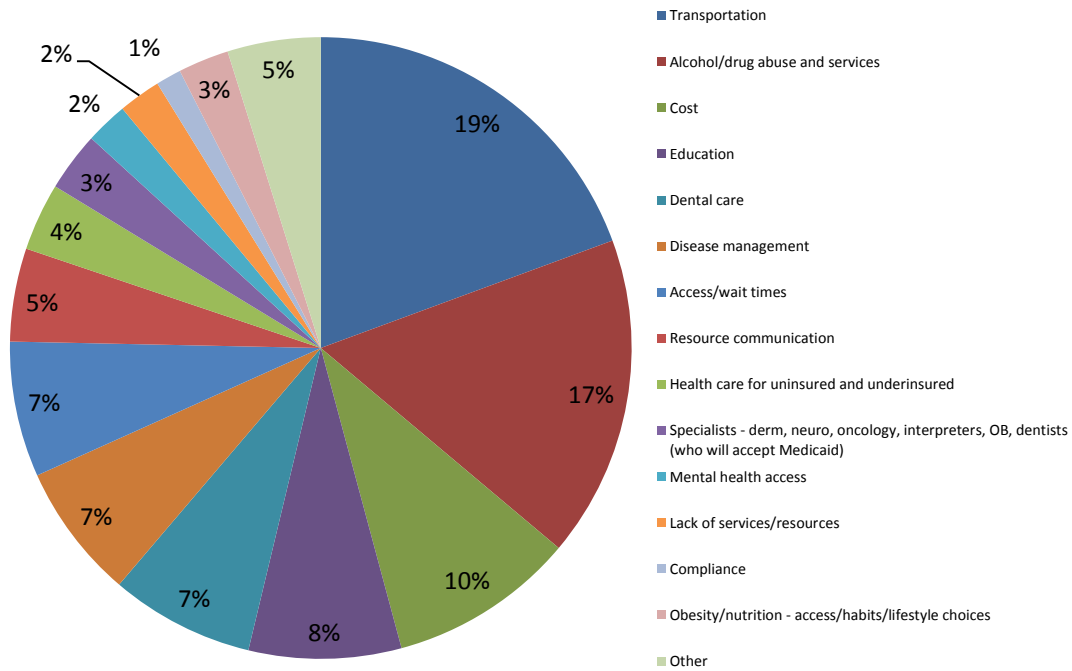
- ***What are the most important issues (needs) that impact health in Franklin County / Bassett?***
- ***What are the barriers to health for the populations you serve in Franklin County / Bassett?***

A total of 129 responses from 48 individuals were collected addressing the “Needs and Barriers” and 16 categories were identified:

- Transportation
- Alcohol/ drug abuse and services
- Cost
- Education
- Dental care
- Disease management
- Access/ wait times
- Resource communication
- Health care for uninsured and underinsured
- Specialist-dermatology, neurology, oncology, (who will accept Medicaid)
- Mental health services
- Lack of services/ resources
- Compliance
- Obesity/ nutrition- access/habits/lifestyle choices

To determine which “Needs and Barriers” categories were identified most often by the focus groups, the responses for each category are presented as a percentage of the total responses.

## What are the most issues (needs) that impact health in Franklin County?



Respondents identified “Transportation” as the greatest need/barrier that impacts health with “Alcohol and drug abuse” as a close second. “Cost” of general healthcare services was the third greatest response followed by “education”. Access to dental care facilities and long waits in the waiting room, and finding specialist who accepted Medicaid were also identified as barriers and needs to accessing services in Franklin County.

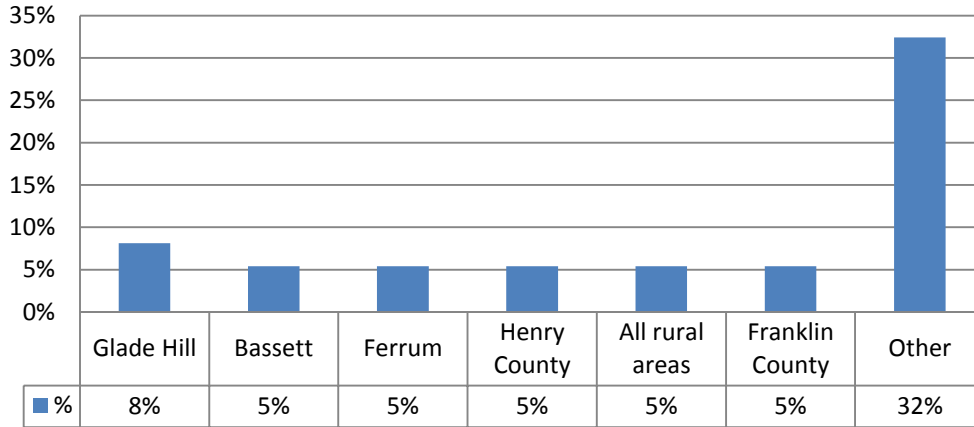
**Localities with the Greatest Unmet Need**

In addition to the “Needs and Barriers” that impact health, participants were asked:

- **Is there one locality/neighborhood with greatest unmet need in Franklin County?**

The majority of respondents agreed that there is unmet need throughout Franklin County. Of the 37 responses, the following localities/neighborhoods were identified:

**Locality**



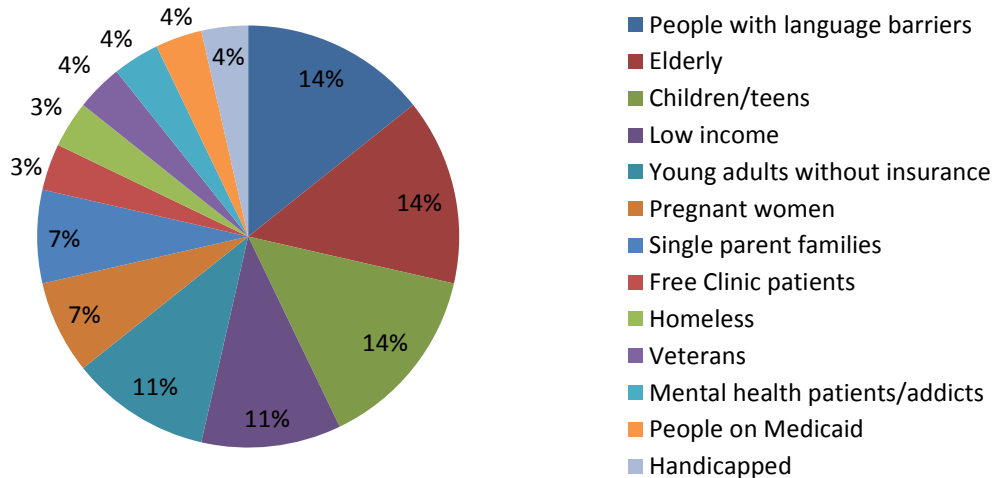
**Populations with the Greatest Unmet Need**

Next participants were asked:

- **Is there one population with greatest unmet need in Franklin County?**

The top response from participants identified people with language barriers, the elderly and children/teens as having the greatest unmet need.

**Population Group**



## **Resources**

Stakeholder survey participants were asked to respond to the following question addressing the available resources in the Franklin area.

- **What are the resources for health for the populations you serve in Franklin?**

A total of 56 responses were collected addressing the “Resources” and 8 categories identified, including:

- Community Resources
- Cost and Insurance
- Education
- Services –Behavioral Health
- Services - Dental
- Services – Healthcare
- Services - Prescriptions
- Public Health

The complete list of community resources, as identified by community stakeholders, can be found in Appendix 5: Community Resources.

## **Initiatives and Changes**

Stakeholder survey participants were asked to respond to the following question:

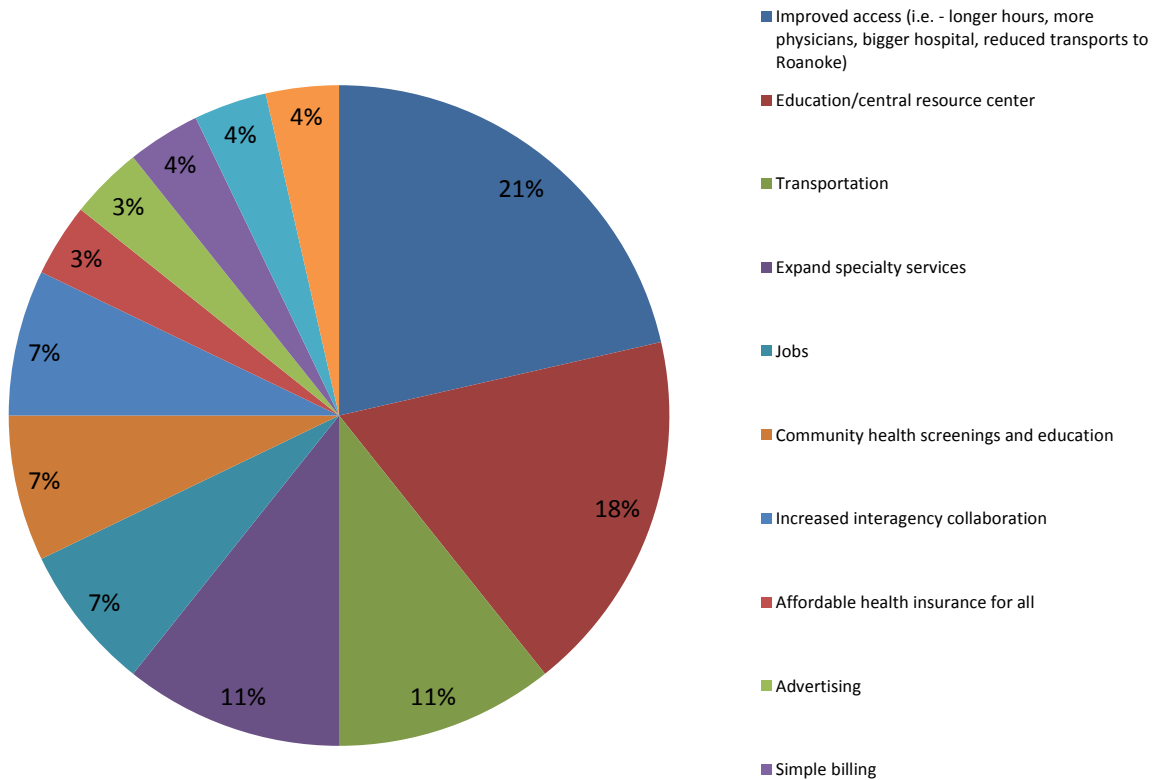
- **If we could make one change as a community to meet the needs and reduce the barriers to health in Franklin, what would that be?**

A total of 28 responses were collected addressing the “Initiatives and Changes” and 12 categories identified.

- Improved access ( longer hours, more physicians, bigger hospitals, reduced transports to Roanoke)
- Education/ central resource center
- Transportation
- Expand specialty services
- Jobs
- Community health screenings and education
- Increased interagency collaboration
- Affordable health insurance for all
- Advertising
- Simple billing
- Increased access to mental health services
- Crack down on drug dealers

To determine which “Changes and Initiatives” categories were identified most often by the participants, the responses for each category are presented as a percentage of the total responses.

## If we could make one change to meet the needs of the community and reduce the barriers to health what would it be?



## Target Population Focus Group Results

Four focus group meetings were held with target populations living in Franklin County and Bassett from May 9 through May 25, 2016 to address the healthcare needs for, and address barriers to, affordable comprehensive services including primary care, oral health, and mental health and substance abuse services.

The CHAT identified participants for the focus group meetings by reviewing programs and organizations in the service area that offer services to the uninsured and underinsured, the low-income, minority, and chronically ill groups across the lifecycles. All attempts were made to conduct focus groups at sites where existing, intact groups already met and/or at sites that served the target population.

### Focus Group Locations

Organization	Parents	Adults	Seniors	Site/Group
Bassett Library	✓	✓		Bassett
Essig Center			✓	Senior Group
Henry Fork Center	✓	✓		English Learning Class
Tanyard Village			✓	Residents Meeting

### Bassett Blue Ridge Regional Library

The Bassett Library serves the general population and is located off of Fairy Stone Park Highway. Their Mission is to provide free, friendly service and access to timely materials that educate, enrich, and entertain the entire community. Some of their programs designed to achieve their Mission include: Summer Book Sale, Literati (homework help), and the Bookmobile. They also offer classes such as Tai-Chi and chair exercise groups.

For more information you can visit them on the web at [www.brri.lib.va.us/index.php](http://www.brri.lib.va.us/index.php)

A focus group was conducted with the residents of Bassett County who utilize library services.



### ***S.T.E.P***

S.T.E.P (Solutions That Empower People) is a dynamic community action agency serving Franklin and Patrick counties. STEP's mission is to provide exceptional services to families seeking to improve their quality of life through community, economic, personal, and family development. For more information, visit their website at <http://www.stepincva.com/about.php>.

A focus group was conducted with participants in a S.T.E.P Senior Meals program at the Essig Center.

### ***Essig Center***

The Essig YMCA is a charitable association dedicated to building healthy spirit, mind, and body. It is an association of members, volunteers, contributors, and staff, putting Christian principles into practice through programs that promote healthy lifestyles, strong families, positive youth developments, community strength, and international understanding. The Essig Recreation Center is located in Rocky Mount and is owned by the YMCA. The Essig Recreation Center is focused on serving local youth and expanding the arts among young people.

For more information visit their website, [www.franklincountyyymca.org](http://www.franklincountyyymca.org)

A focus group was conducted with a S.T.E.P Senior Meals program that regularly meets at the Essig Center.

### ***Henry Fork Service Center***

The Henry Fork Service Center is an organization that strives to make God's love visible in the Henry Fork community by being a positive Christian presence. This is achieved by providing a place where children, youth, and adults can come to spend creative time. They provide summer programs to help children with math skills and often take trips to educational sites such as Washington DC. For more information, visit the website [www.henryforkcenter.org](http://www.henryforkcenter.org).

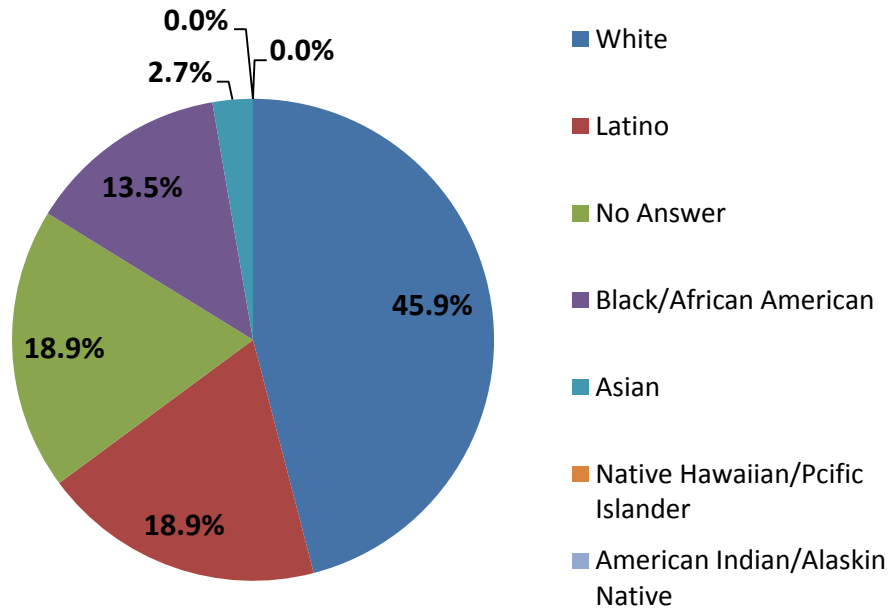
A focus group was conducted with the English Learning Class.

### ***Tanyard Village***

Tanyard Village is an affordable apartment community located in Rocky Mount, Virginia. Tanyard Village was developed and operates with federal housing financing and utilizes housing programs to make rent affordable to lower income tenants. To learn more about Tanyard Village visit <http://affordablehousingonline.com/housing-search/Virginia/Rocky-Mount/Tanyard-Village/46509/>

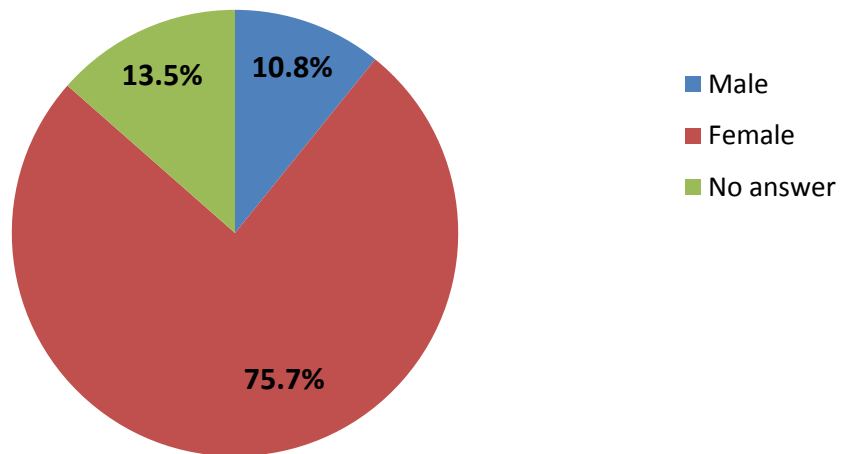
A focus group was held with Tanyard Village residents.

## Race/Ethnicity of Focus Group Participants



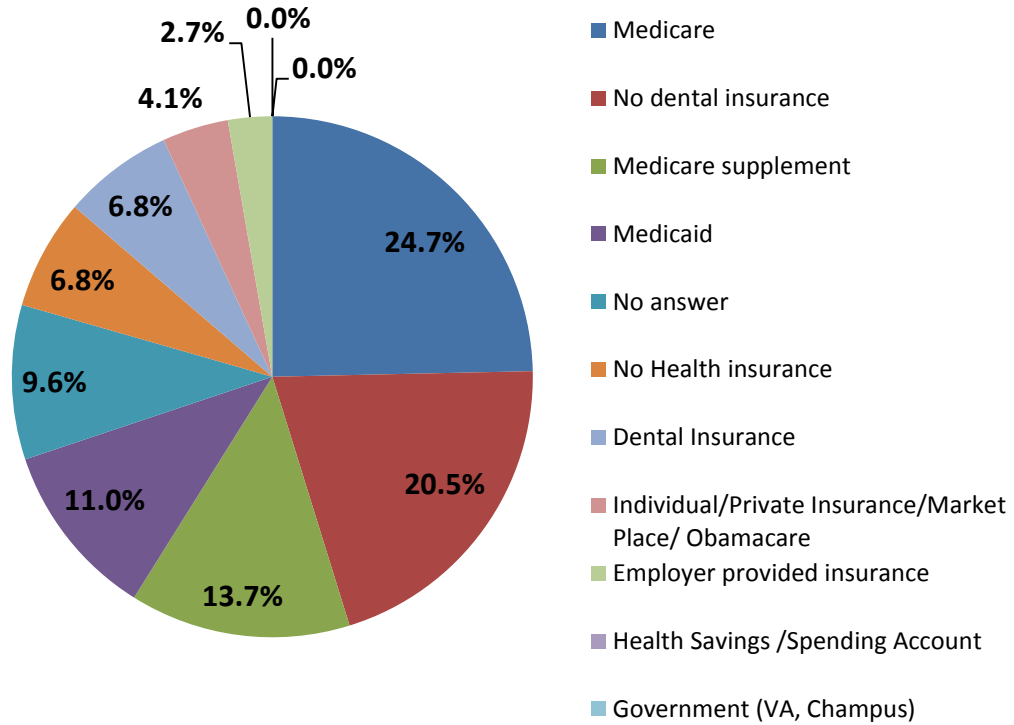
The majority of participants were women (76%) with the remaining 10.8% men.

## Focus Group Participant Gender



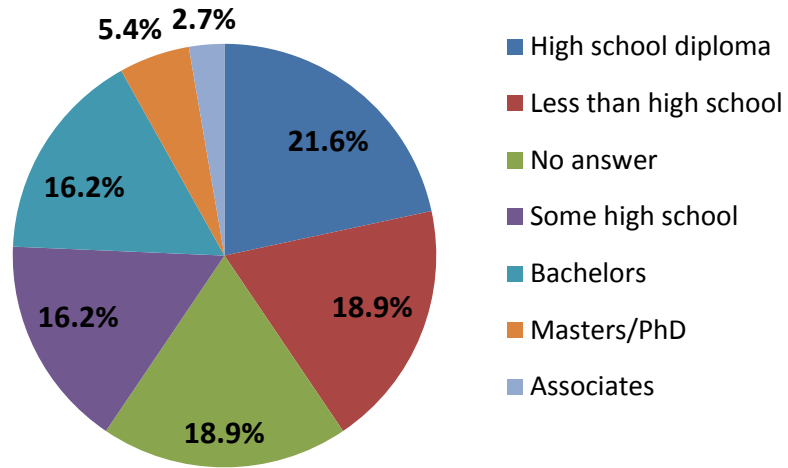
Seven percent (6.8%) of participants reported having no health insurance, 13.7% reported having employer provided insurance and 4.1% reported having market place plans. More participants had no dental insurance (20.5%) compared to those having dental insurance (6.8%).

### Focus Group Insurance Type



Nineteen percent (18.9%) of focus group participants had less than a high school education, 16% had some high school, 21.6% had a high school diploma, 2.7% had an Associate's degree, 16.2% had a Bachelor's degree and 5.4% had a Master's degree or a PhD.

## Highest Education Level Completed



## Focus Group Results

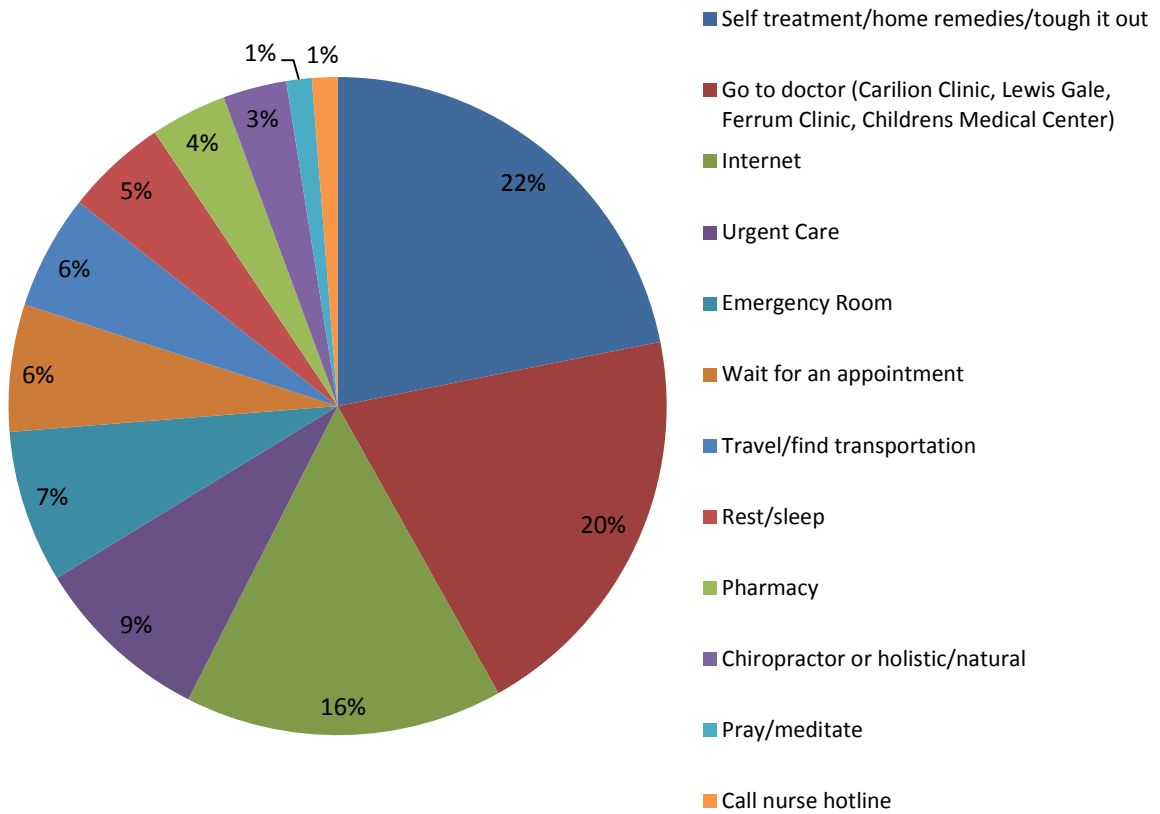
At the beginning of each meeting, participants were asked “What is good health?”. Responses addressed participants’ perceptions of health status, wellness and prevention, social networks, and access to services. A word cloud was created to show results from this question. The more a term was used, the larger that word is in the cloud.



WordItOut

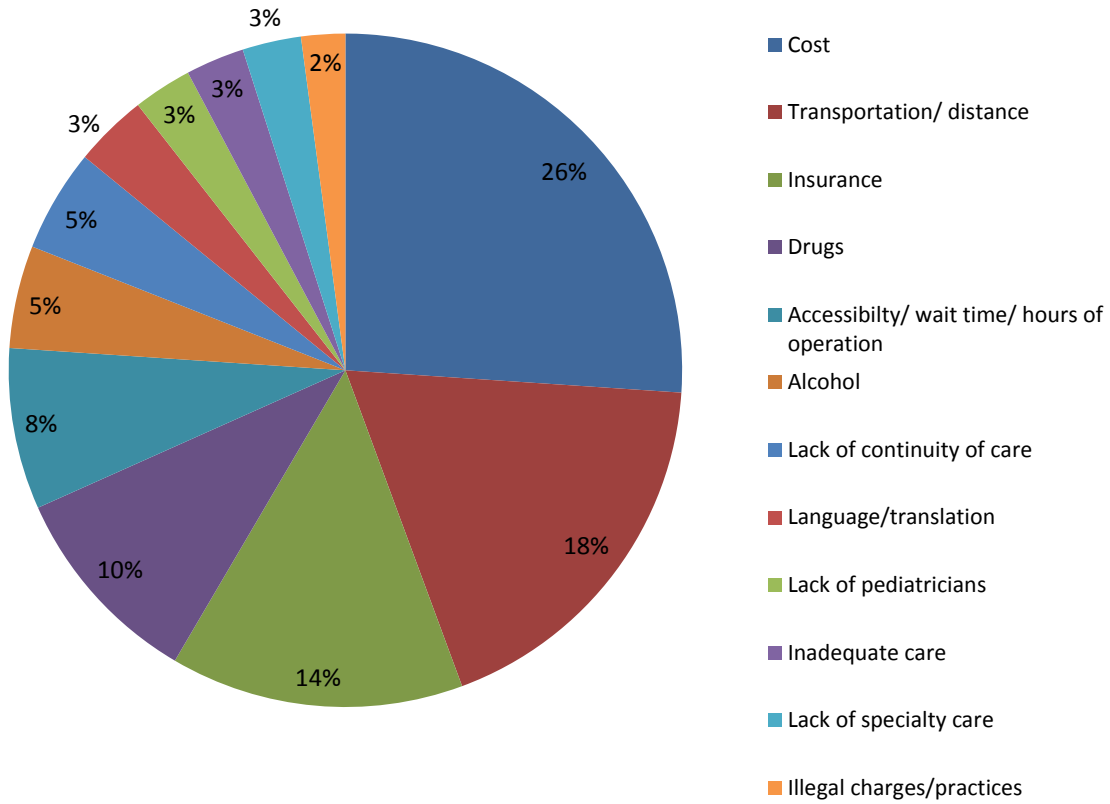
Participants were then asked “What do you, or your family and friends, do when you need a check-up or are sick?” Only 20% of participants stated that they use the doctor’s office, while 22% self-treat at home or tough it out. Another 16% reported that they consult the internet when they are sick.

### What do you, your family, or friends do when you need a check-up or are sick?



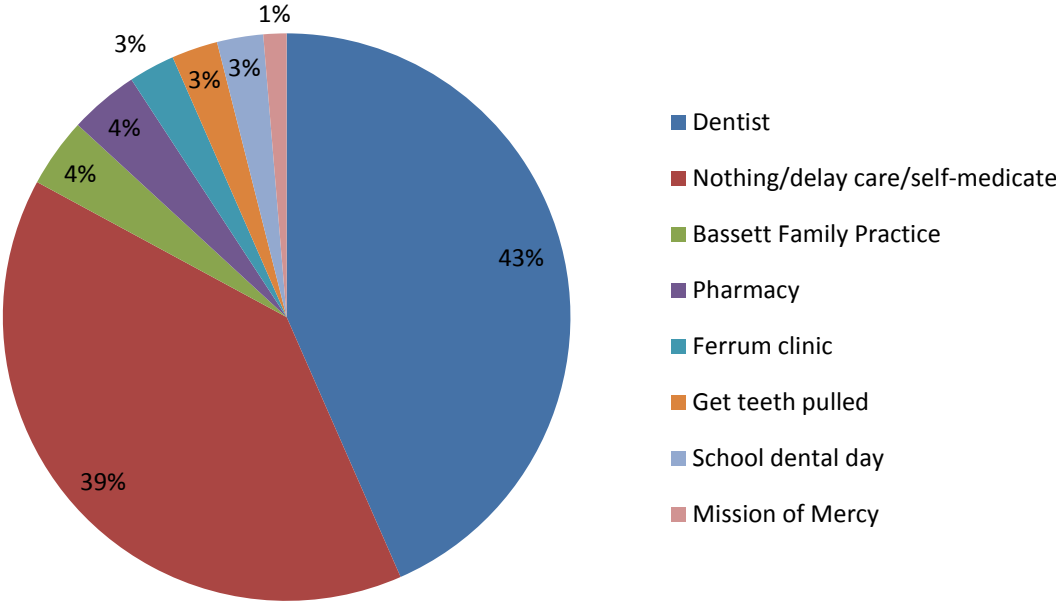
Medical care barriers identified during the focus group included cost (26%), transportation (18%), no insurance (14%), and drugs (10%).

## Medical Care Barriers



Next, participants were asked, “What do you, or your family and friends, do when you have a toothache or need your teeth cleaned?” The top responses were: go to the dentist (43%); home remedies/self-care (39%); and go to Bassett Family Practice (4%).

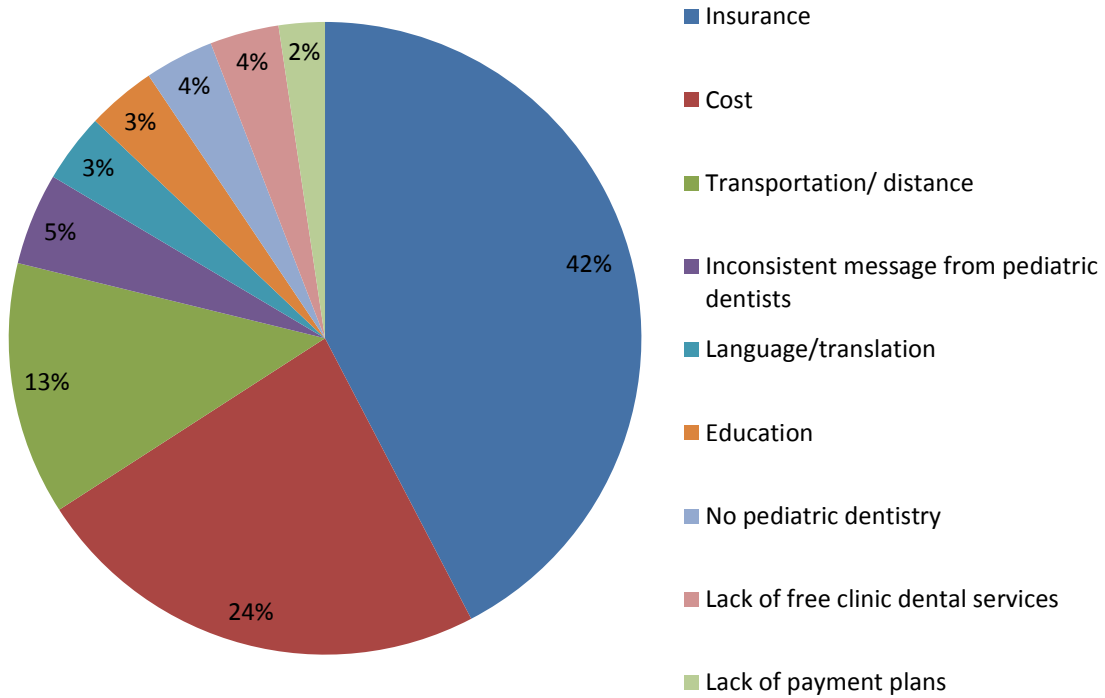
### What do you, or your family and friends do when you have a toothache?





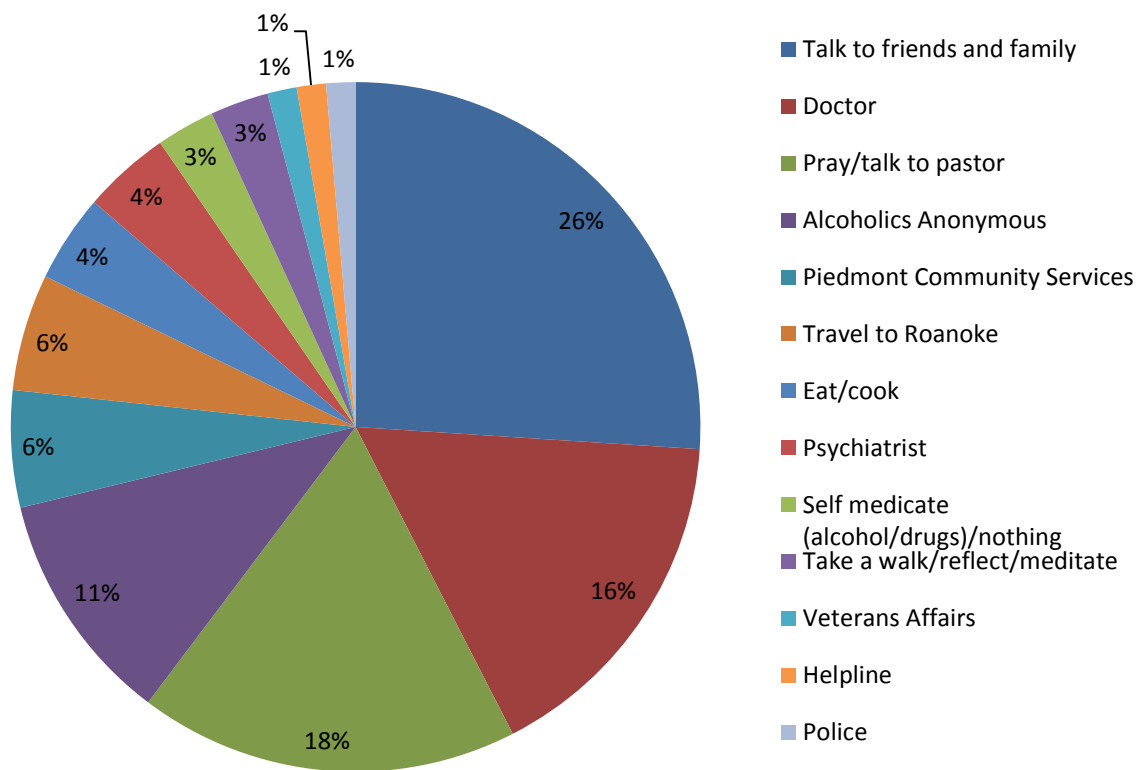
Dental care barriers included: lack of insurance (42%); the cost of dental care (24%); and the need for transportation (13%).

### Dental Care Barriers



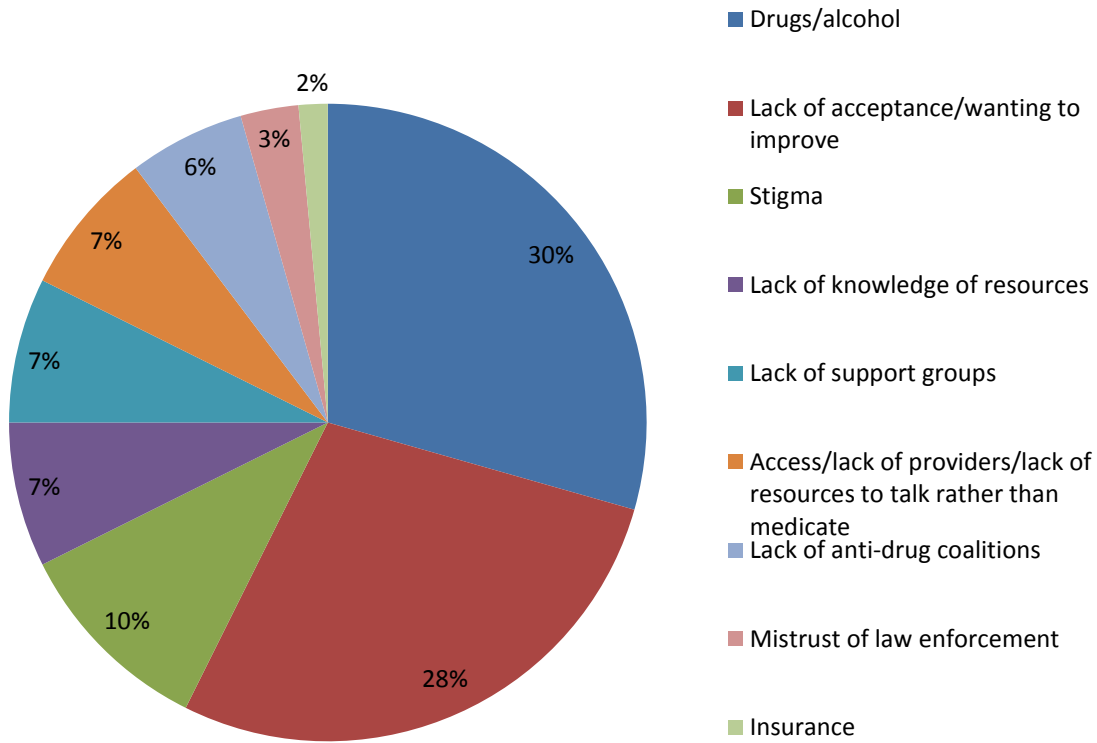
Participants were asked, “What do you, or your family and friends, do when you need to talk to someone about mental health or substance abuse issues?” The top responses were: talk to friends or family members (26%); pray/ talk to pastor (18%); go to the doctor or counselor’s office (16%).

## What do you, or your family and friends, do when you need to talk to someone about mental health or substance abuse issues?



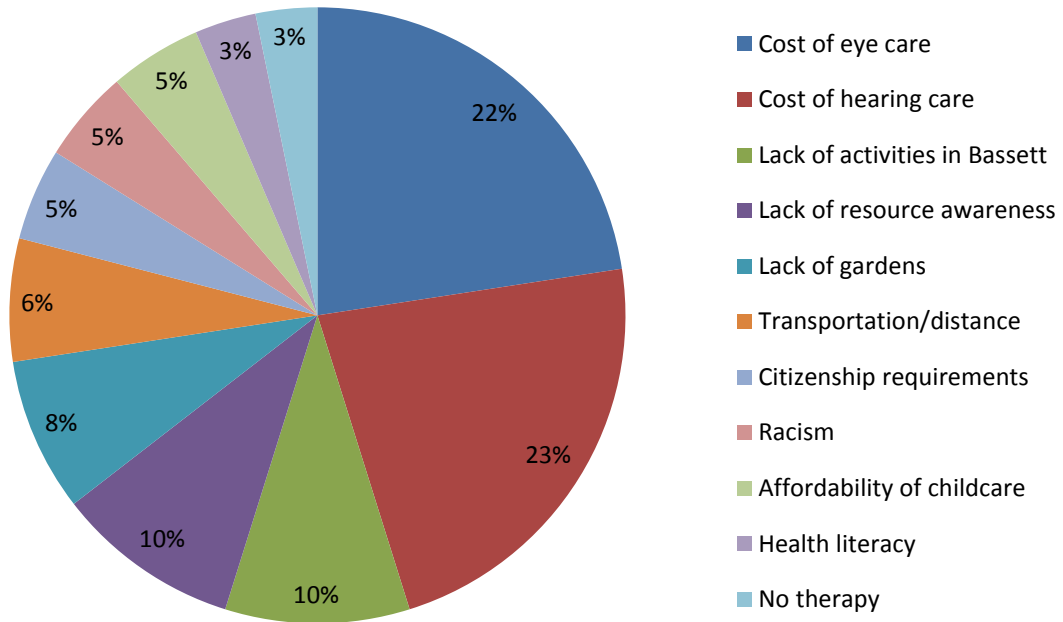
Mental health and substance abuse care barriers included: the drugs and alcohol themselves (30%); lack of acceptance that there is a problem or lack of a desire to improve (28%); and stigma around seeking mental health services (10%).

## Mental Health and Substance Abuse Care Barriers



Finally, participants were asked, “Is there anything else we need to know about the health care need in the community?” The top responses indicated a high cost for hearing care (23%), high cost for eye care (22%), lack of activities in Bassett (10%), and lack of resource awareness (10%).

### Other Barrier to Optimal Health



## ***Franklin County / Bassett Community Health Survey***

### ***Methodology***

A Community Health Survey was conducted as a part of the Franklin County Community Health Needs Assessment. This survey was used to gauge the health of the community and identify potential areas to target improvements. Input and oversight of survey development was provided by the CHNA Management Team.

The survey was developed using community survey samples from the following:

- National Association of County and City Health Officials' Mobilizing for Action through Planning and Partnerships Community Themes and Strengths Assessments;
- YMCA's Community Healthy Living Index;
- Center for Disease Control's Behavioral Risk Factor Surveillance System;
- Center for Disease Control's National Health Interview Survey
- Center for Disease Control's Youth Risk Behavior Surveillance System (YRBSS)
- Community Health Surveys from Montgomery and Giles County, Virginia;
- Martin County Community Health Assessment, Martin County, North Carolina; and
- Roanoke Community Health Needs Assessment, 2012.

A 40-question survey was developed that asked questions about an individual's access to medical, dental and mental health care. The survey also asked questions about chronic illness, healthy and risky behaviors, insurance status, and basic demographic information. Both an English and Spanish version of the survey was available. (The survey tool is included in Appendix 3: Community Health Survey).

Populations targeted for the survey were residents 18 years of age and older and included:

- General Population
  - All residents in the CHNA service area, including Franklin County and the Bassett area of Henry County.
- Target Populations
  - Low-income and/or uninsured residents; minority populations; and residents living with chronic illness

A nonprobability sampling method, which does not involve random selection of respondents, was used.<sup>5</sup> This method is often used for social research. Although surveys were made available to all residents living in Franklin County and Bassett, oversampling of the target populations occurred through targeted outreach efforts. Oversampling methodologies involve data collection for particular subgroups of the population that may be underrepresented in a random sample survey.

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<sup>5</sup> Research Methods- Knowledge Base, Nonprobability Sampling, Web Center for Social Research Methods, [www.socialresearchmethods.net/kb/samponn/php](http://www.socialresearchmethods.net/kb/samponn/php)

The CHAT identified target populations, collection sites and mode(s) of distribution of the surveys. Surveys were distributed beginning April through June of 2016. Over 40 organizations, agencies, and community members assisted in the distribution of the surveys. In total, 306 surveys were collected.

The survey was distributed via the following methods:

- Survey Monkey link ([www.surveymonkey.com/r/2016CHNA](http://www.surveymonkey.com/r/2016CHNA))
- Phone line 888-964-6620
- Flyers and posters distributed throughout the community with survey URL and phone line information
- Paper surveys (collected by volunteers and/or staff of partner agencies)

A drawing for a \$50 Kroger gift card was offered as an incentive to those who completed the survey (one survey per person).

Outreach strategies for survey distribution included:

- Media coverage by local television station
- Face-to-face survey interviews at sites/agencies that serve the target populations using volunteers and/or staff
- Flyer and poster distributed at sites/agencies that serve the general community and target populations
- Survey URL posted on partner agency websites

Surveys were analyzed and reported using Survey Monkey and Microsoft Excel. All responses were entered into Survey Monkey either directly by the respondents or by Carilion Direct who entered responses from paper or phone surveys.

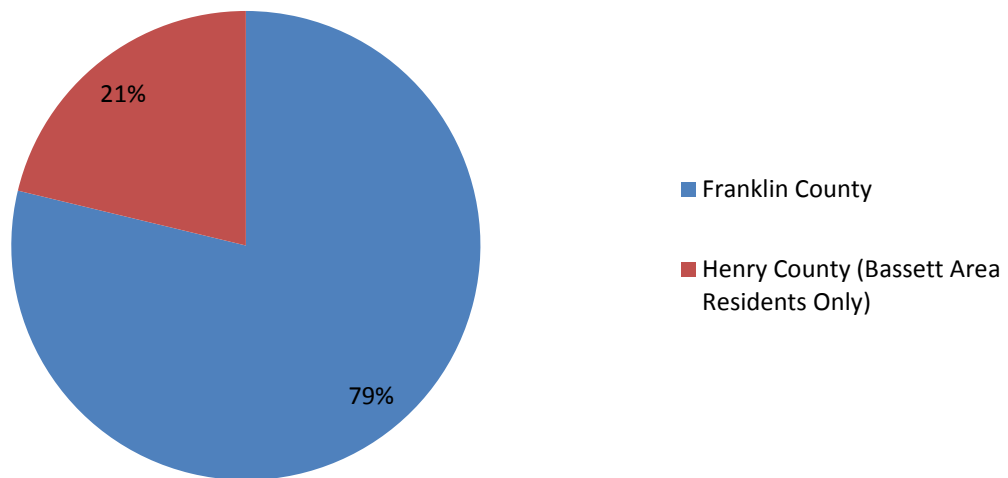
## Survey Results

### Access and Barriers to Healthcare

Please select the county or city you live in from the box below:

Answer Options	Response Percent	Response Count
Franklin County	78.8%	241
Henry County (Bassett Area Residents Only)	21.2%	65
<i>answered question</i>		<b>306</b>
<i>skipped question</i>		<b>0</b>

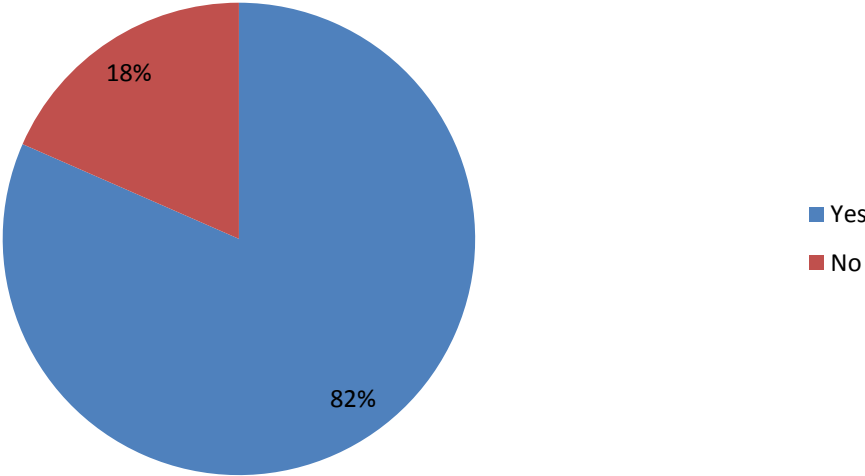
**Please select the county or city you live in from the box below:**



Question 1: Is there a specific doctor's office, health center, or other place that you usually go if you are sick or need advice about your health?

Answer Options	Response Percent	Response Count
Yes	81.6%	239
No	18.4%	54
<i>answered question</i>		293
<i>skipped question</i>		13

**Is there a specific doctor's office, health center, or other place that you usually go if you are sick or need advice about your health?**

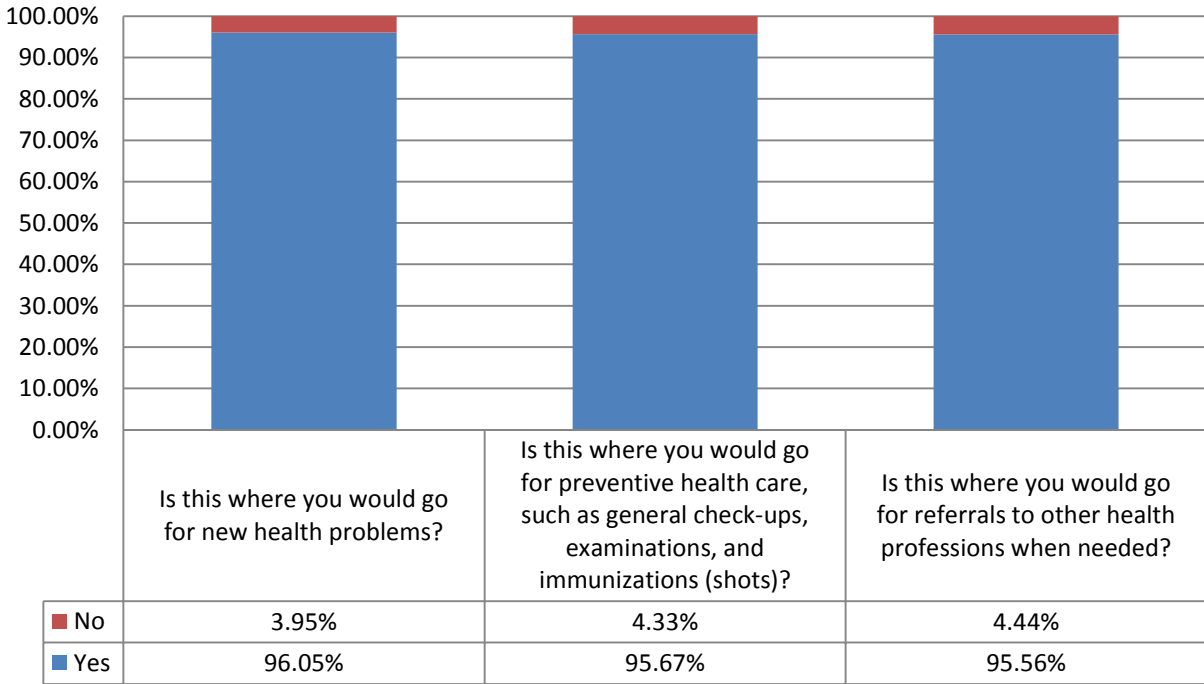




When thinking about the specific doctor’s office, health center, or other place that you usually go if you are sick or need advice about your health:

Answer Options	Yes	Yes	No	No	Response Count
Is this where you would go for new health problems?	219	96.05%	9	3.95%	228
Is this where you would go for preventive health care, such as general check-ups, examinations, and immunizations (shots)?	221	95.67%	10	4.33%	231
Is this where you would go for referrals to other health professions when needed?	215	95.56%	10	4.44%	225
<i>answered question</i>					<b>232</b>
<i>skipped question</i>					<b>74</b>

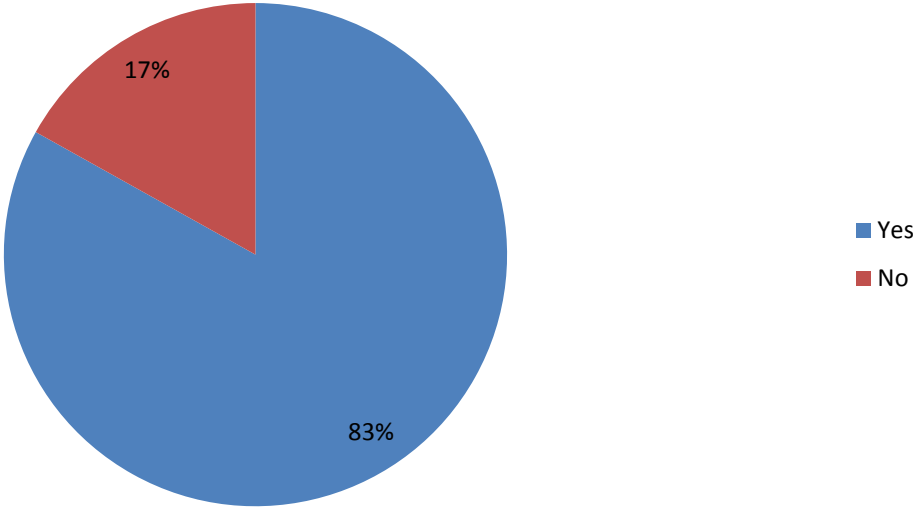
**When thinking about the specific doctor’s office, health center, or other place that you usually go if you are sick or need advice about your health:**



Question 2: Do you use medical care services?

Answer Options	Response Percent	Response Count
Yes	83.1%	236
No	16.9%	48
<i>answered question</i>		<b>284</b>
<i>skipped question</i>		<b>22</b>

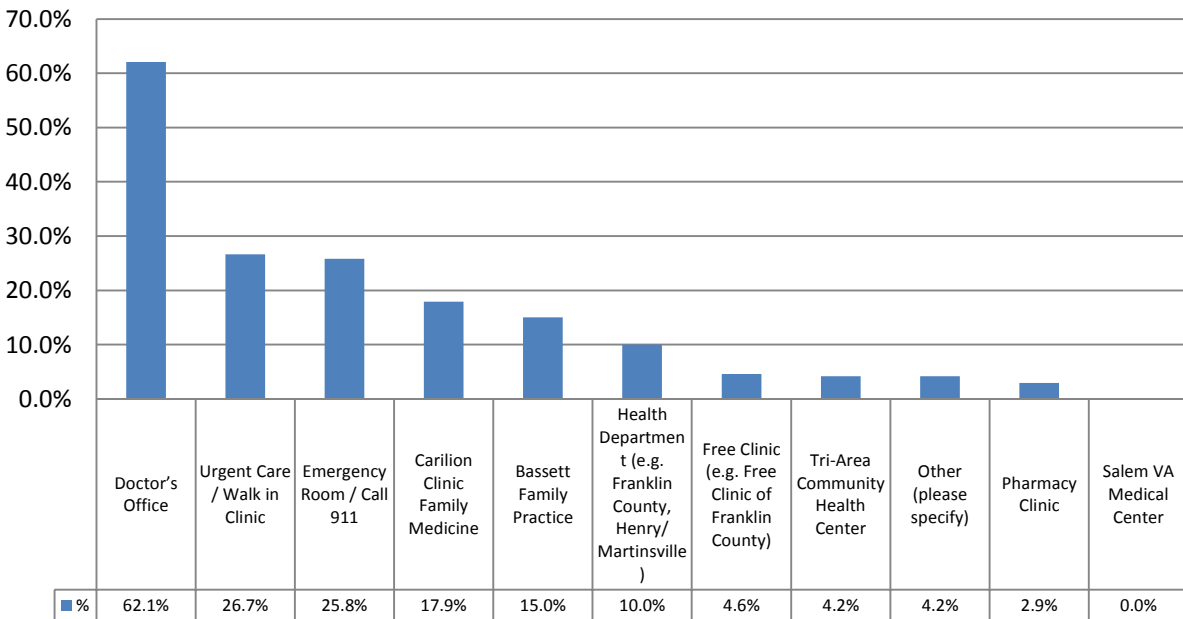
**Do you use medical care services?**



Where do you go for medical care? (Check all that apply)

Answer Options	Response Percent	Response Count
Doctor's Office	62.1%	149
Urgent Care / Walk in Clinic	26.7%	64
Emergency Room / Call 911	25.8%	62
Carilion Clinic Family Medicine	17.9%	43
Bassett Family Practice	15.0%	36
Health Department (e.g. Franklin County, Henry/ Martinsville)	10.0%	24
Free Clinic (e.g. Free Clinic of Franklin County)	4.6%	11
Tri-Area Community Health Center	4.2%	10
Other (please specify)	4.2%	10
Pharmacy Clinic	2.9%	7
Salem VA Medical Center	0.0%	0
<i>answered question</i>		<b>240</b>
<i>skipped question</i>		<b>66</b>

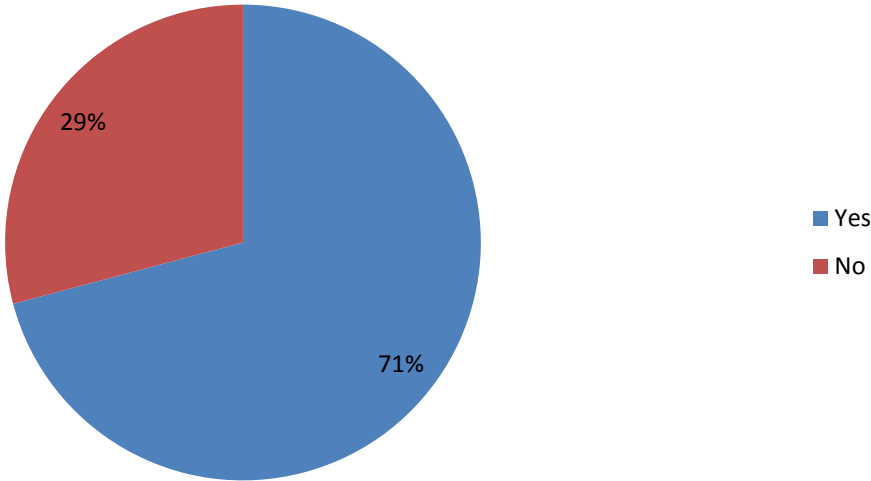
### Where do you go for medical care?



Question 3: Do you use dental care services?

Answer Options	Response Percent	Response Count
Yes	70.8%	209
No	29.2%	86
<i>answered question</i>		<b>295</b>
<i>skipped question</i>		<b>11</b>

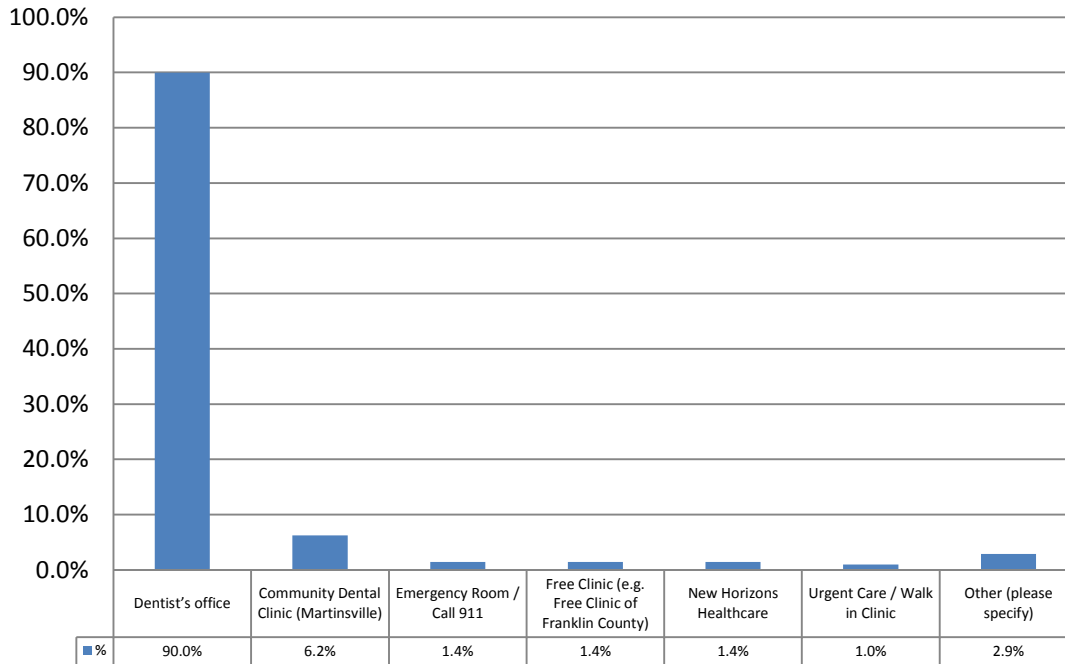
### Do you use dental care services?



Where do you go for dental care? (Check all that apply)

Answer Options	Response Percent	Response Count
Dentist's office	90.0%	188
Community Dental Clinic (Martinsville)	6.2%	13
Emergency Room / Call 911	1.4%	3
Free Clinic (e.g. Free Clinic of Franklin County)	1.4%	3
New Horizons Healthcare	1.4%	3
Urgent Care / Walk in Clinic	1.0%	2
Other (please specify)	2.9%	6
<b><i>answered question</i></b>		<b>209</b>
<b><i>skipped question</i></b>		<b>97</b>

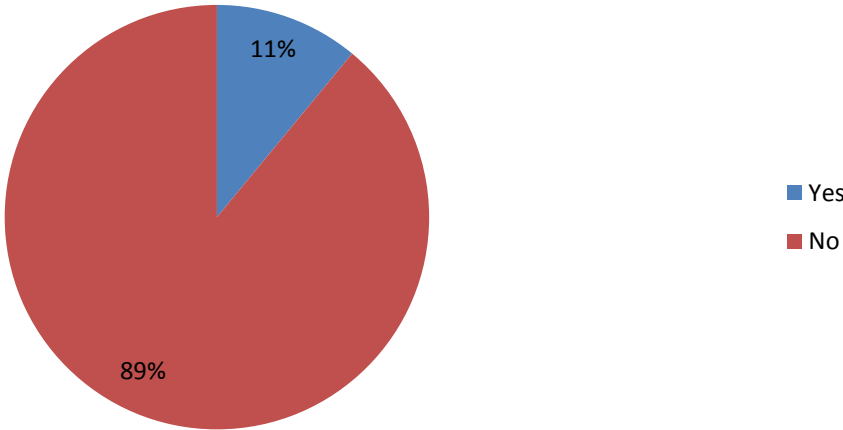
### Where do you go for dental care?



Question 4: Do you use mental health, alcohol abuse, or drug abuse services?

Answer Options	Response Percent	Response Count
Yes	11.0%	32
No	89.0%	259
<i>answered question</i>		291
<i>skipped question</i>		15

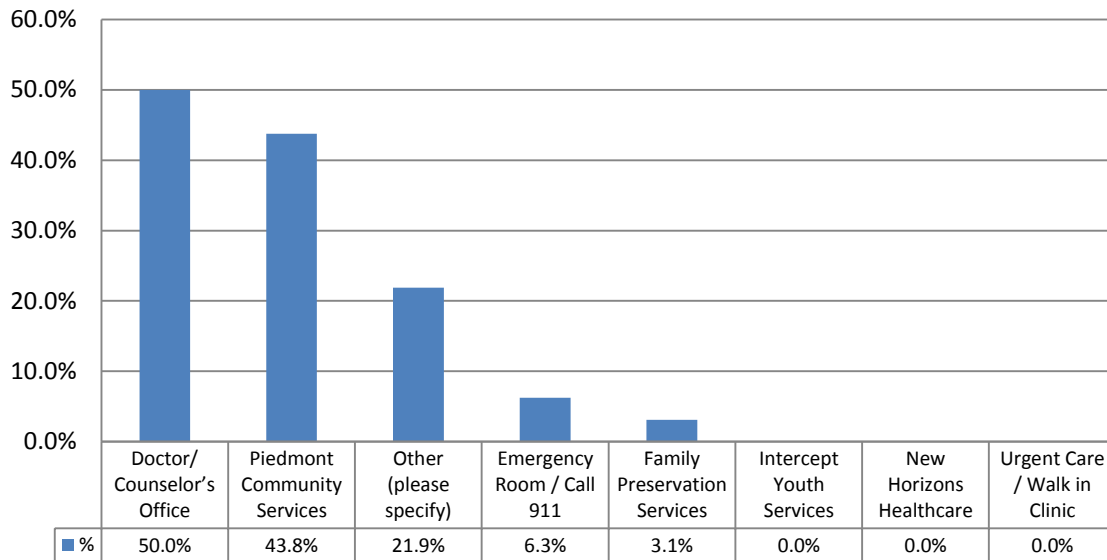
### Do you use mental health, alcohol abuse, or drug abuse services?



Where do you go for mental health, alcohol abuse, or drug abuse services? (Check all that apply)

Answer Options	Response Percent	Response Count
Doctor / Counselor's Office	50.0%	16
Piedmont Community Services	43.8%	14
Other (please specify)	21.9%	7
Emergency Room / Call 911	6.3%	2
Family Preservation Services	3.1%	1
Intercept Youth Services	0.0%	0
New Horizons Healthcare	0.0%	0
Urgent Care / Walk in Clinic	0.0%	0
<i>answered question</i>		<b>32</b>
<i>skipped question</i>		<b>274</b>

### Where do you go for mental health, alcohol abuse, or drug abuse services?



Question 5: What do you think are the five most important issues that affect health in our community? (Please check five)

Answer Options	Response Percent	Response Count
Alcohol and illegal drug use	46.4%	136
Overweight / obesity	42.3%	124
Mental health problems	29.7%	87
Access to healthy foods	26.6%	78
Diabetes	24.2%	71
Prescription drug abuse	23.9%	70
Poor eating habits	22.5%	66
Cancers	21.5%	63
Stress	21.5%	63
Heart disease and stroke	19.5%	57
Tobacco use / smoking	19.5%	57
Cell phone use / texting and driving / distracted driving	18.8%	55
Aging problems	17.1%	50
Child abuse / neglect	16.7%	49
High blood pressure	15.7%	46
Domestic violence	14.0%	41
Dental problems	13.7%	40
Accidents in the home (e.g. falls, burns, cuts)	8.9%	26
Bullying	8.2%	24
Environmental health (e.g. water quality, air quality, pesticides, etc.)	7.8%	23
Not using seat belts / child safety seats / helmets	7.2%	21
Not getting "shots" to prevent disease	6.8%	20
Lack of exercise	6.1%	18
Unsafe sex	4.4%	13
Suicide	4.1%	12
Teenage pregnancy	3.1%	9
Sexual assault	2.7%	8
Gang activity	2.0%	6
HIV / AIDS	2.0%	6
Homicide	2.0%	6
Lung disease	1.4%	4
Neighborhood safety	1.4%	4
Other (please specify)	1.4%	4
Infant death	1.0%	3
<b><i>answered question</i></b>	<b>281</b>	<b>293</b>
<b><i>skipped question</i></b>	<b>11</b>	<b>13</b>



Question 6: Which health care services are hard to get in our community? (Check all that apply)

Answer Options	Response Percent	Response Count
Adult dental care	40.0%	108
Dermatology	25.6%	69
Mental health / counseling	24.4%	66
Alternative therapy (ex. herbal, acupuncture, massage)	22.6%	61
Specialty care (ex. heart doctor)	22.2%	60
Substance abuse services -drug and alcohol	22.2%	60
Child dental care	20.0%	54
Women's health services	17.8%	48
Cancer care	16.3%	44
Family doctor	15.9%	43
Urgent care / walk in clinic	15.9%	43
Programs to stop using tobacco products	15.6%	42
Medication / medical supplies	12.6%	34
Vision care	12.2%	33
Eldercare	11.5%	31
None	8.9%	24
Emergency room care	8.1%	22
Family planning / birth control	7.8%	21
Domestic violence services	7.4%	20
Inpatient hospital	6.7%	18
Preventive care (ex. yearly check-ups)	5.9%	16
Physical therapy	5.6%	15
Ambulance services	4.8%	13
X-rays / mammograms	4.8%	13
End of life / hospice / palliative care	4.1%	11
Other (please specify)	4.1%	11
Lab work	3.3%	9
Immunizations	3.0%	8
Chiropractic care	2.6%	7
<b><i>answered question</i></b>	<b>259</b>	<b>270</b>
<b><i>skipped question</i></b>	<b>33</b>	<b>36</b>

Question 7: What do you feel prevents you from getting the healthcare you need? (Check all that apply)

Answer Options	Response Percent	Response Count
Cost	49.4%	133
Long waits for appointments	29.0%	78
Lack of evening and weekend services	28.6%	77
High co-pay	24.5%	66
I can get the healthcare I need	21.6%	58
Don't know what types of services are available	14.5%	39
No health insurance	13.8%	37
Location of offices	11.5%	31
Can't find providers that accept my Medicaid insurance	10.4%	28
Don't trust doctors / clinics	7.8%	21
No transportation	7.8%	21
Can't find providers that accept my Medicare insurance	7.1%	19
Have no regular source of healthcare	6.7%	18
Afraid to have check-ups	5.6%	15
Don't like accepting government assistance	4.8%	13
Childcare	4.5%	12
Language services	3.7%	10
Other (please specify)	1.5%	4
<b><i>answered question</i></b>	<b>258</b>	<b>269</b>
<b><i>skipped question</i></b>	<b>34</b>	<b>37</b>

## General Health Questions

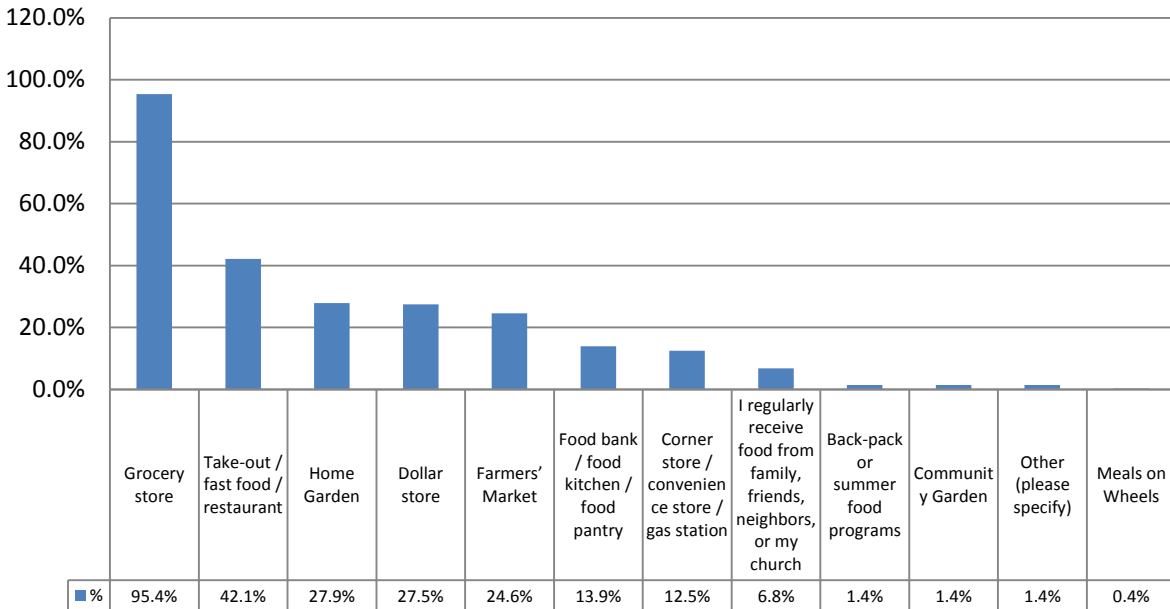
Question 8: Please check one of the following for each statement:

Answer Options	Yes	Yes %	No	No %	N/A	N/A %	Response Count
I have had an eye exam within the past 12 months.	144	52.0%	132	47.7%	1	0.4%	277
I have had a mental health / substance abuse visit within the past 12 months.	40	14.4%	193	69.7%	44	15.9%	277
I have had a dental exam within the past 12 months.	161	58.1%	116	41.9%	0	0.0%	277
I have been to the emergency room in the past 12 months.	86	31.2%	182	65.9%	8	2.9%	276
I have been to the emergency room for an injury in the past 12 months (e.g. motor vehicle crash, fall, poisoning, burn, cut, etc.).	28	10.2%	238	86.5%	9	3.3%	275
Have you been a victim of domestic violence or abuse in the past 12 months?	8	2.9%	255	91.7%	15	5.4%	278
My doctor has told me that I have a long-term or chronic illness.	76	27.3%	191	68.7%	11	4.0%	278
I take the medicine my doctor tells me to take to control my chronic illness.	92	33.1%	91	32.7%	95	34.2%	278
I can afford medicine needed for my health conditions.	132	48.5%	79	29.0%	61	22.4%	272
I am over 21 years of age and have had a Pap smear in the past three years (if male or under 21, please check not applicable).	162	58.9%	63	22.9%	50	18.2%	275
I am over 40 years of age and have had a mammogram in the past 12 months (if male or under 40, please check not applicable).	80	28.9%	82	29.6%	115	41.5%	277
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check not applicable).	77	27.8%	68	24.5%	132	47.7%	277
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)	144	52.4%	122	44.4%	9	3.3%	275
Does your neighborhood support healthy eating? (e.g. community gardens, farmers' markets, etc.)	153	56.0%	112	41.0%	8	2.9%	273
In the area that you live, is it easy to get affordable fresh fruits and vegetables?	176	64.5%	96	35.2%	1	0.4%	273
Have there been times in the past 12 months when you did not have enough money to buy the food that you or your family needed?	101	36.6%	170	61.6%	5	1.8%	276
<i>answered question</i>							<b>281</b>
<i>skipped question</i>							<b>25</b>

Question 9: Where do you get the food that you eat at home? (Check all that apply)

Answer Options	Response Percent	Response Count
Grocery store	95.4%	267
Take-out / fast food / restaurant	42.1%	118
Home Garden	27.9%	78
Dollar store	27.5%	77
Farmers' Market	24.6%	69
Food bank / food kitchen / food pantry	13.9%	39
Corner store / convenience store / gas station	12.5%	35
I regularly receive food from family, friends, neighbors, or my church	6.8%	19
Back-pack or summer food programs	1.4%	4
Community Garden	1.4%	4
Other (please specify)	1.4%	4
Meals on Wheels	0.4%	1
I do not eat at home	0.0%	0
<b>answered question</b>		<b>280</b>
<b>skipped question</b>		<b>26</b>

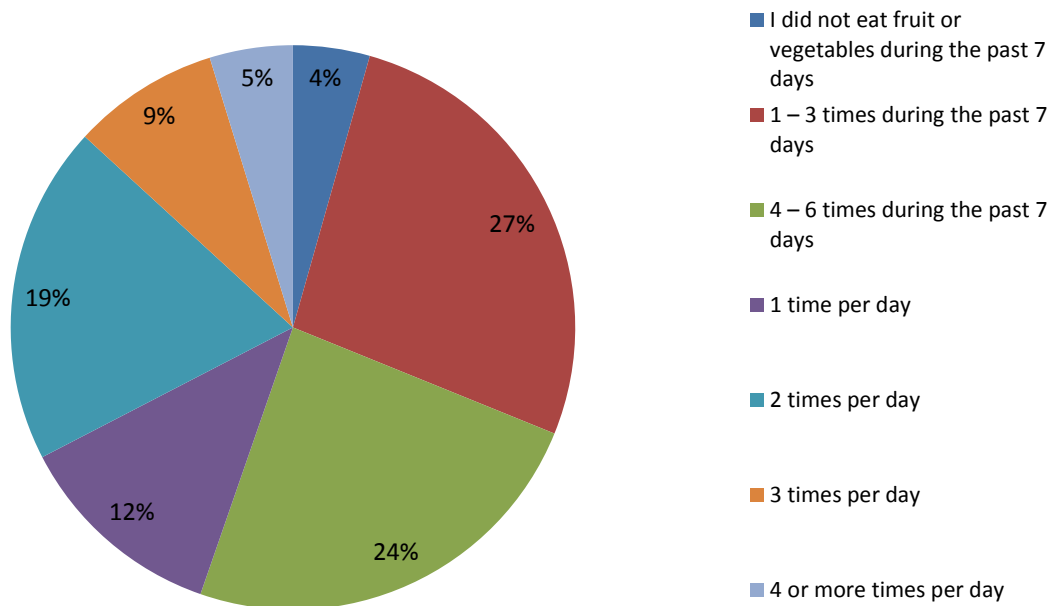
## Where do you get the food that you eat at home?



Question 10: During the past 7 days, how many times did you eat fruit or vegetables (fresh or frozen)? Do not count fruit or vegetable juice. (Please check one)

Answer Options	Response Percent	Response Count
I did not eat fruit or vegetables during the past 7 days	4.4%	12
1 - 3 times during the past 7 days	26.7%	73
4 - 6 times during the past 7 days	24.2%	66
1 time per day	12.1%	33
2 times per day	19.4%	53
3 times per day	8.4%	23
4 or more times per day	4.8%	13
<i>answered question</i>		<b>273</b>
<i>skipped question</i>		<b>33</b>

### During the past 7 days, how many times did you eat fruit or vegetables (fresh or frozen)?



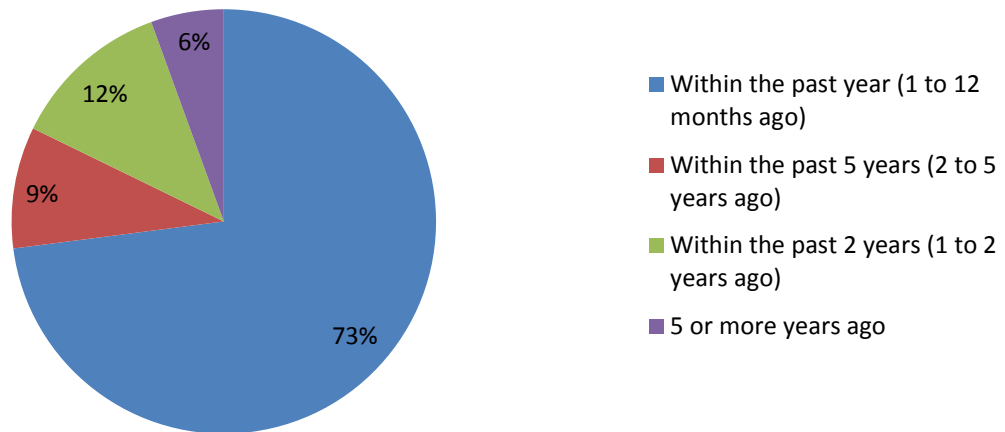
Question 11: Have you been told by a doctor that you have... (Check all that apply)

Answer Options	Response Percent	Response Count
Obesity / overweight	33.5%	84
Depression or anxiety	32.7%	82
High blood pressure	31.9%	80
I have no health problems	23.9%	60
High cholesterol	21.1%	53
Asthma	13.5%	34
High blood sugar or diabetes	12.7%	32
Other (please specify)	12.0%	30
Mental health problems	8.0%	20
COPD / chronic bronchitis / Emphysema	6.8%	17
Heart disease	6.0%	15
Cancer	3.2%	8
Stroke / Cerebrovascular disease	2.0%	5
Drug or alcohol problems	1.2%	3
HIV / AIDS	0.4%	1
Cerebral palsy	0.0%	0
<b><i>answered question</i></b>		<b>251</b>
<b><i>skipped question</i></b>		<b>55</b>

Question 12: How long has it been since you last visited a doctor for a routine checkup? (Please check one)

Answer Options	Response Percent	Response Count
Within the past year (1 to 12 months ago)	73.0%	197
Within the past 2 years (1 to 2 years ago)	12.2%	33
Within the past 5 years (2 to 5 years ago)	9.3%	25
5 or more years ago	5.6%	15
	<i>answered question</i>	<b>270</b>
	<i>skipped question</i>	<b>36</b>

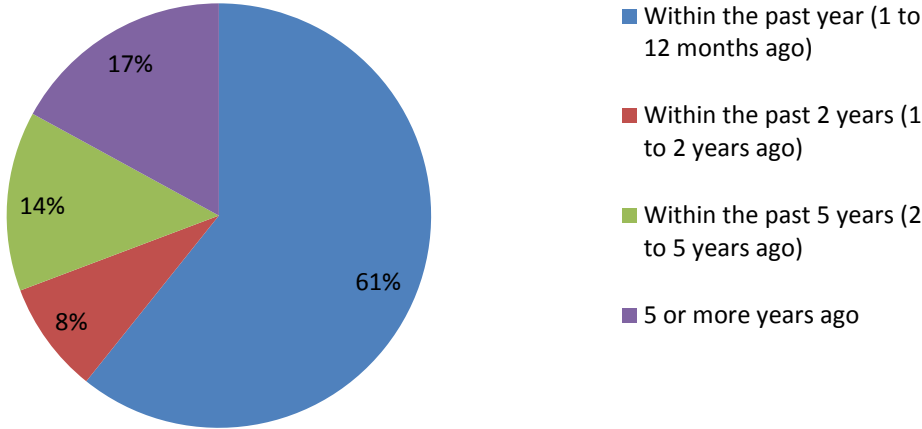
### How long has it been since you last visited a doctor for a routine checkup?



Question 13: How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists. (Please check one)

Answer Options	Response Percent	Response Count
Within the past year (1 to 12 months ago)	60.7%	164
Within the past 2 years (1 to 2 years ago)	8.5%	23
Within the past 5 years (2 to 5 years ago)	13.7%	37
5 or more years ago	17.0%	46
<i>answered question</i>		<b>261</b>
<i>skipped question</i>		<b>36</b>
		<b>270</b>

### How long has it been since you last visited a dentist or a dental clinic for any reason?

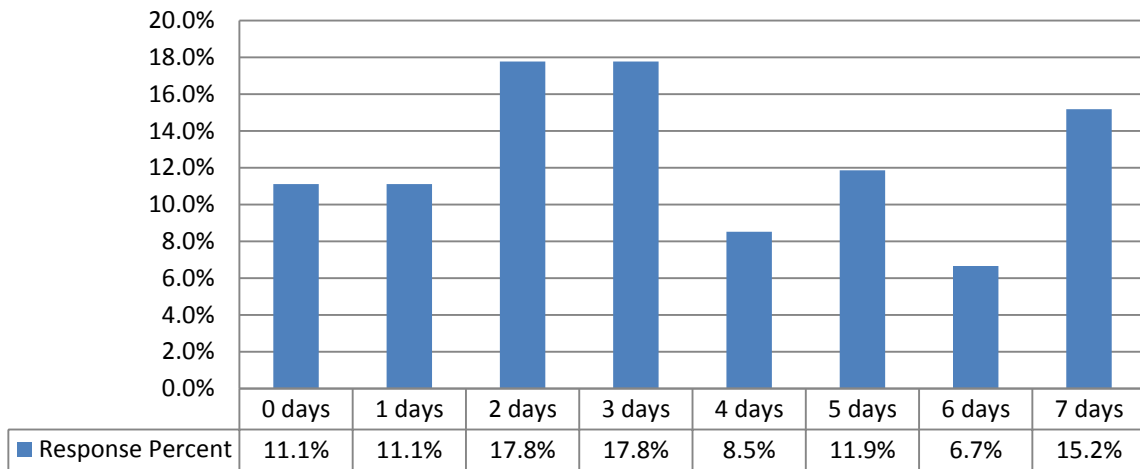




Question 14: In the past 7 days, on how many days were you physically active for a total of at least 30 minutes? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard for some of the time.)

Answer Options	Response Percent	Response Count
0 days	11.1%	30
1 days	11.1%	30
2 days	17.8%	48
3 days	17.8%	48
4 days	8.5%	23
5 days	11.9%	32
6 days	6.7%	18
7 days	15.2%	41
<i>answered question</i>		<b>270</b>
<i>skipped question</i>		<b>36</b>

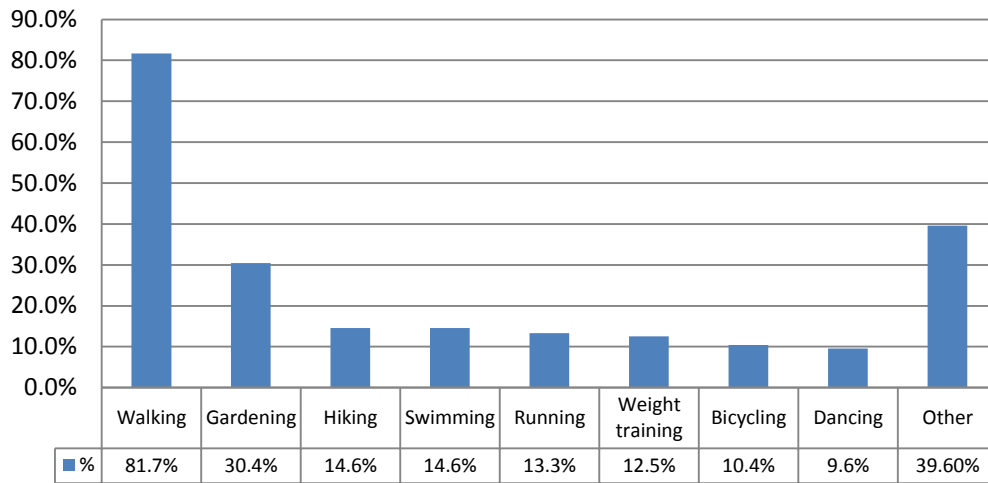
**In the past 7 days, on how many days were you physically active for a total of at least 30 minutes?**



Question 15: Other than your regular job, what physical activity or exercises do you participate in? (Check all that apply)

Answer Options	Response Percent	Response Count
Walking	81.7%	196
Gardening	30.4%	73
Hiking	14.6%	35
Swimming	14.6%	35
Running	13.3%	32
Weight training	12.5%	30
Bicycling	10.4%	25
Dancing	9.6%	23
Group exercise classes	7.9%	19
Canoeing / kayaking	7.1%	17
Yoga / Pilates	7.1%	17
Hunting	5.0%	12
Individual sports	4.6%	11
Team sports	3.3%	8
Other (please specify)	2.9%	7
Horseback riding	1.7%	4
<i>answered question</i>		<b>240</b>
<i>skipped question</i>		<b>66</b>

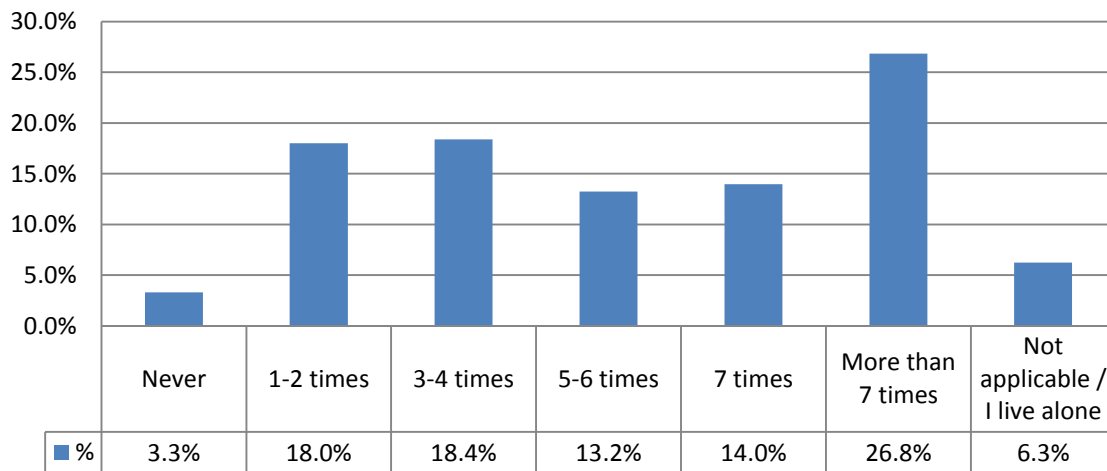
### Physical Activity / Exercise



Question 16: In the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?

Answer Options	Response Percent	Response Count
Never	3.3%	9
1-2 times	18.0%	49
3-4 times	18.4%	50
5-6 times	13.2%	36
7 times	14.0%	38
More than 7 times	26.8%	73
Not applicable / I live alone	6.3%	17
<i>answered question</i>		<b>272</b>
<i>skipped question</i>		<b>34</b>

**In the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?**



Question 17: Thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?

Answer Options	Average
	5
<i>answered question</i>	226
<i>skipped question</i>	80

Question 18: Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

Answer Options	Average
	7
<i>answered question</i>	220
<i>skipped question</i>	86

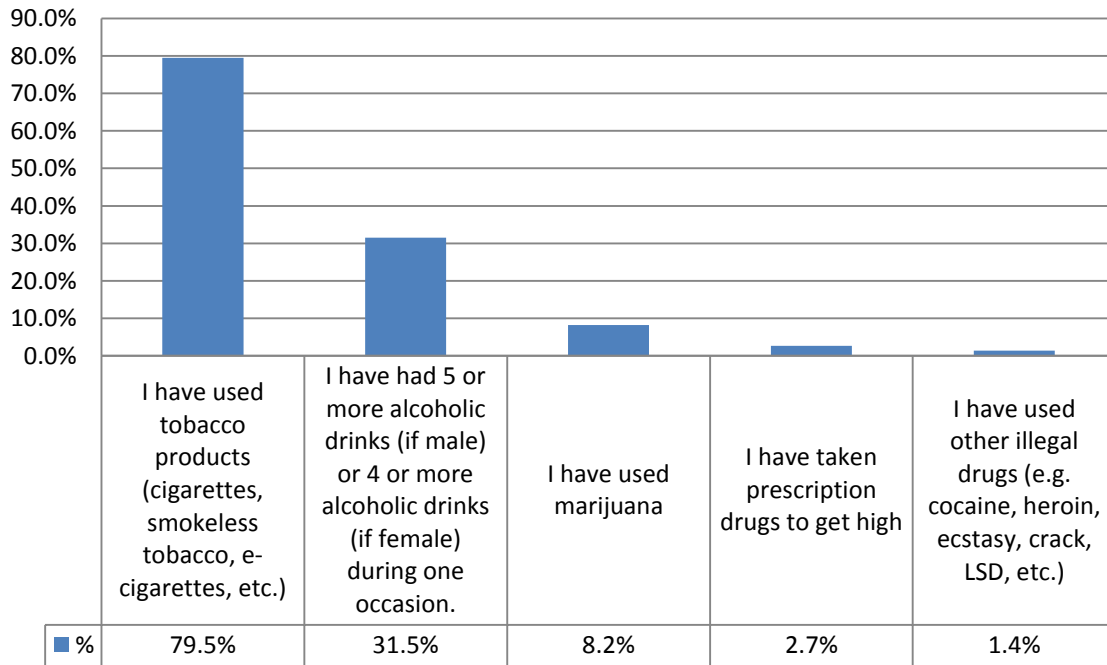
Question 19: During the last 30 days, how many days did you miss work or school due to pain or illness (physical or mental)?

Answer Options	Average
	2
<i>answered question</i>	206
<i>skipped question</i>	100

Question 20: During the past 30 days: (Check all that apply)

Answer Options	Response Percent	Response Count
I have used tobacco products (cigarettes, smokeless tobacco, e-cigarettes, etc.)	79.5%	58
I have had 5 or more alcoholic drinks (if male) or 4 or more alcoholic drinks (if female) during one occasion.	31.5%	23
I have used marijuana	8.2%	6
I have taken prescription drugs to get high	2.7%	2
I have used other illegal drugs (e.g. cocaine, heroin, ecstasy, crack, LSD, etc.)	1.4%	1
<i>answered question</i>		<b>73</b>
<i>skipped question</i>		<b>233</b>

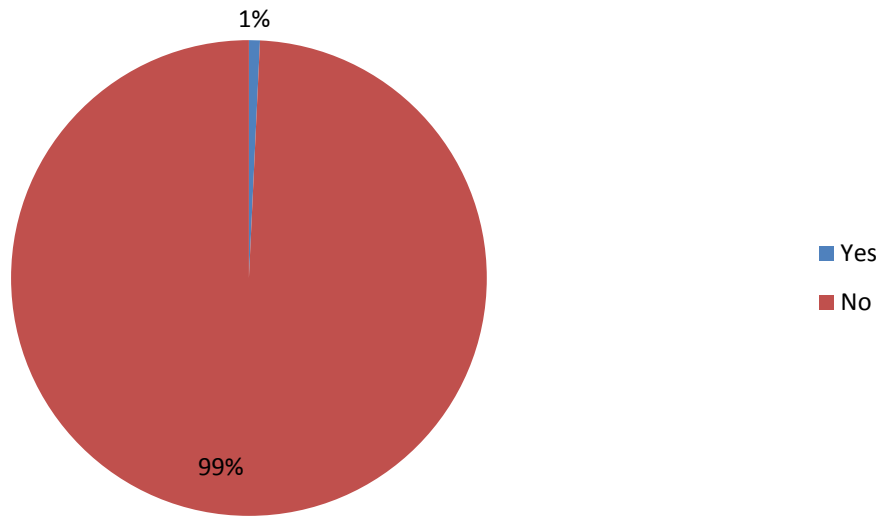
**During the past 30 days: (Check all that apply)**



Question 21: Have you ever used heroin?

Answer Options	Response Percent	Response Count
Yes	0.7%	2
No	99.3%	267
<i>answered question</i>		<b>269</b>
<i>skipped question</i>		<b>37</b>

### Have you ever used heroin



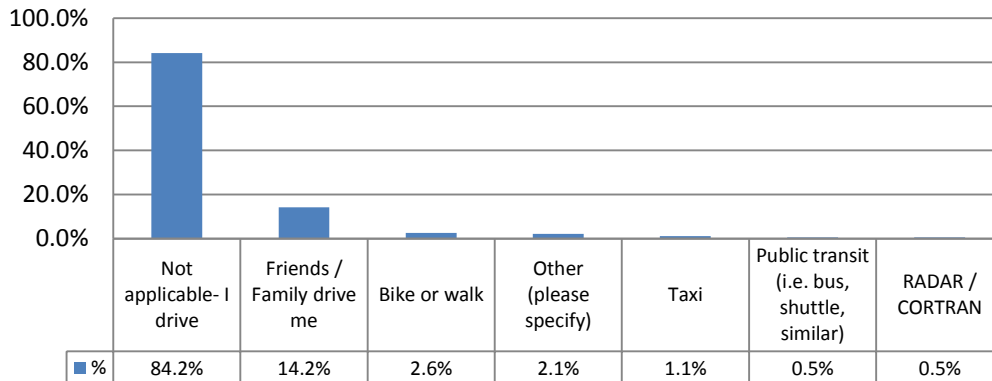
Question 22: How many vehicles are owned, leased, or available for regular use by you and those who currently live in your household? Please be sure to include motorcycles, mopeds and RVs.

Answer Options	Average
	2
<i>answered question</i>	<b>259</b>
<i>skipped question</i>	<b>47</b>

Question 23: If you do not drive, what mode of transportation do you use typically use.

Answer Options	Response Percent	Response Count
Not applicable- I drive	84.2%	160
Friends / Family drive me	14.2%	27
Bike or walk	2.6%	5
Other (please specify)	2.1%	4
Taxi	1.1%	2
Public transit (i.e. bus, shuttle, similar)	0.5%	1
RADAR / CORTAN	0.5%	1
<i>answered question</i>		<b>190</b>
<i>skipped question</i>		<b>116</b>

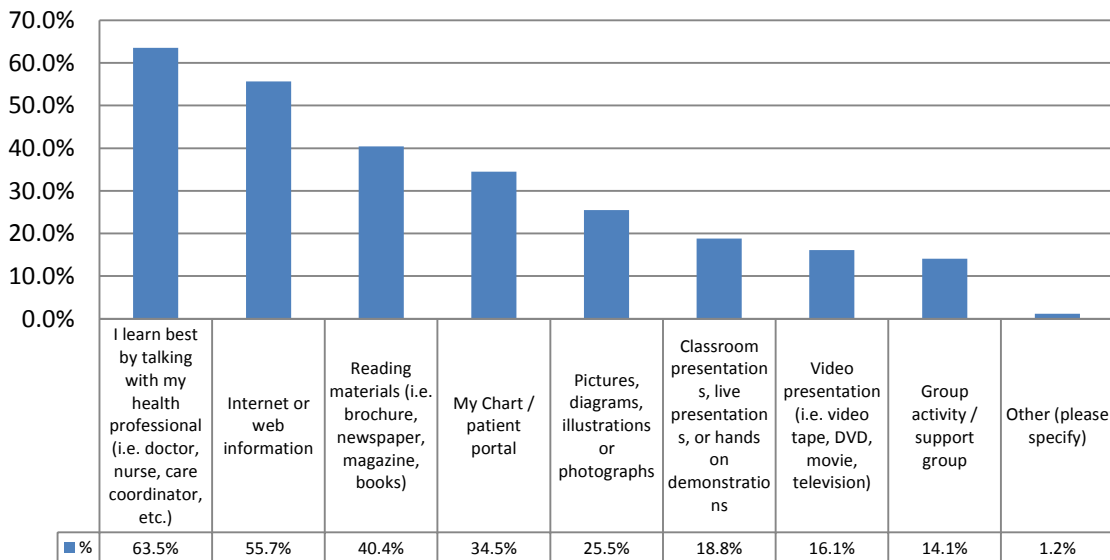
### If you do not drive, what mode of transportation do you use typically use.



Question 24: What types of information help you learn the best about your health? (Check all that apply)

Answer Options	Response Percent	Response Count
I learn best by talking with my health professional (e.g. doctor, nurse, care coordinator, etc.)	63.5%	162
Internet or web information	55.7%	142
Reading materials (i.e. brochure, newspaper, magazine, books)	40.4%	103
My Chart / patient portal	34.5%	88
Pictures, diagrams, illustrations or photographs	25.5%	65
Classroom presentations, live presentations, or hands on demonstrations	18.8%	48
Video presentation (i.e. video tape, DVD, movie, television)	16.1%	41
Group activity / support group	14.1%	36
Other (please specify)	1.2%	3
<b>answered question</b>		<b>255</b>
<b>skipped question</b>		<b>51</b>

### What types of information help you learn the best about your health?



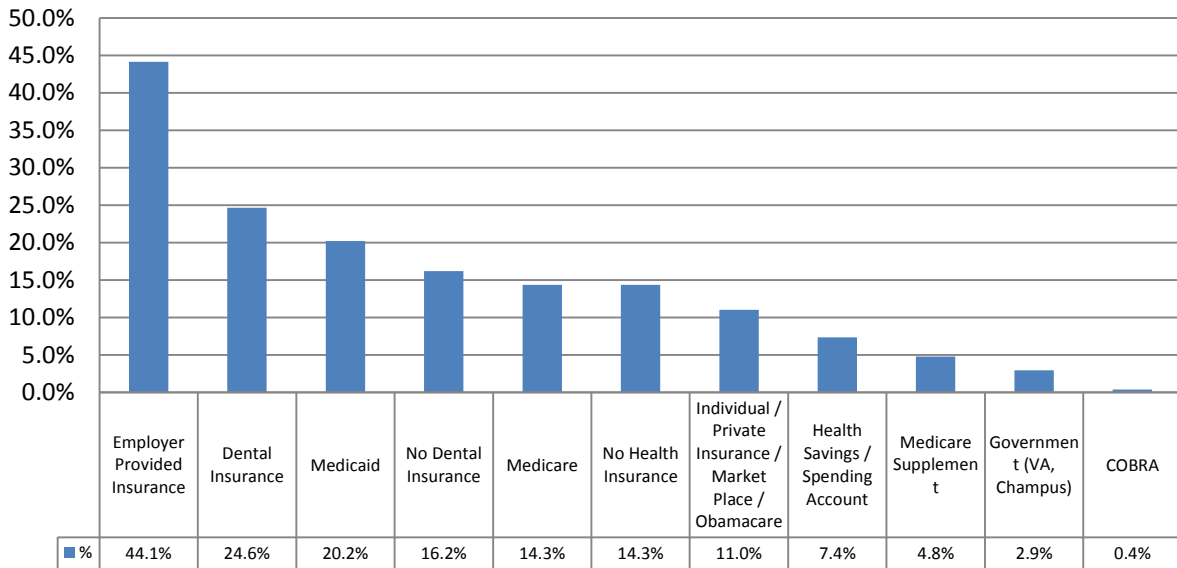


Demographic Information and Health Insurance

Question 25: Which of the following describes your current type of health insurance? (Check all that apply)

Answer Options	Response Percent	Response Count
Employer Provided Insurance	44.1%	120
Dental Insurance	24.6%	67
Medicaid	20.2%	55
No Dental Insurance	16.2%	44
Medicare	14.3%	39
No Health Insurance	14.3%	39
Individual / Private Insurance / Market Place / Obamacare	11.0%	30
Health Savings / Spending Account	7.4%	20
Medicare Supplement	4.8%	13
Government (VA, Champus)	2.9%	8
COBRA	0.4%	1
<i>answered question</i>		<b>272</b>
<i>skipped question</i>		<b>34</b>

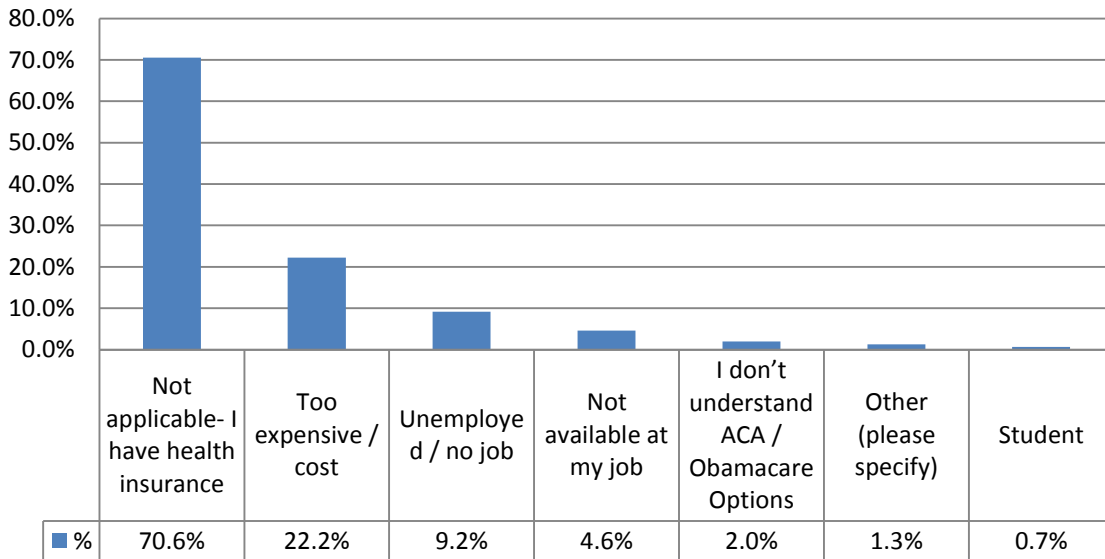
**Which of the following describes your current type of health insurance?**



Question 26: If you have no health insurance, why don't you have insurance? (Check all that apply)

Answer Options	Response Percent	Response Count
Not applicable- I have health insurance	70.6%	108
Too expensive / cost	22.2%	34
Unemployed / no job	9.2%	14
Not available at my job	4.6%	7
I don't understand ACA / Obamacare Options	2.0%	3
Other (please specify)	1.3%	2
Student	0.7%	1
<i>answered question</i>		<b>153</b>
<i>skipped question</i>		<b>153</b>

### If you have no health insurance, why don't you have insurance?



Question 27: What is your ZIP code?

Location	Zip Code	Response Count	Response Percent
Rocky Mount, Franklin CO.	24151	115	40.35%
Bassett, Henry CO.	24055	25	8.77%
Martinsville, Henry CO.	24112	25	8.77%
Wirtz, Franklin CO.	24184	21	7.37%
Ferrum, Franklin CO.	24088	19	6.67%
Glade Hill, Franklin CO.	24092	19	6.67%
Boones Mill, Franklin CO.	24065	17	5.96%
Penhook, Franklin CO.	24137	10	3.51%
Hardy, Franklin CO.	24101	8	2.81%
Callaway, Franklin CO.	24067	5	1.75%
Collinsville, Henry CO.	24078	5	1.75%
Moneta, Bedford	24121	4	1.40%
Union Hall, Franklin CO.	24176	3	1.05%
Critz, Patrick CO.	24082	2	0.70%
Axton, Henry CO.	24054	1	0.35%
Henry, Franklin CO,	24102	1	0.35%
Radford, Radford CITY	24141	1	0.35%
Ridge Way, Henry CO.	24148	1	0.35%
Sandy Level, Pittsylvania CO.	24161	1	0.35%
Stanleytown, Henry CO.	24168	1	0.35%
Reidsville, NC- Rockingham CO.	27320	1	0.35%
<i>answered question</i>			<b>285</b>
<i>skipped question</i>			<b>21</b>

Question 28: What is your street address (optional)?

Results are not public and will be used for community health improvement initiatives

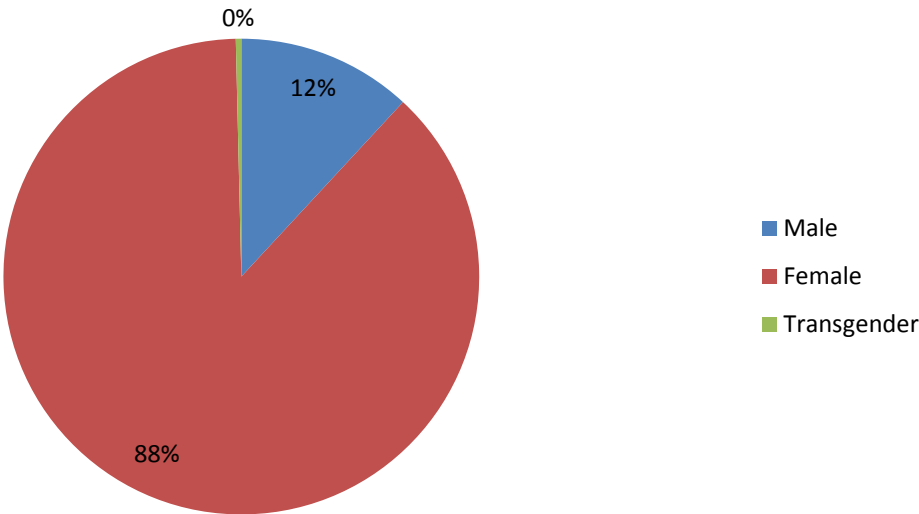
Question 29: What is your age?

Answer Options	Average
	43
<i>answered question</i>	<b>260</b>
<i>skipped question</i>	<b>46</b>

Question 30: What is your gender?

Answer Options	Response Percent	Response Count
Male	11.9%	32
Female	87.7%	236
Transgender	0.4%	1
<i>answered question</i>		<b>269</b>
<i>skipped question</i>		<b>37</b>

### What is your gender?



Question 31 and Question 32: What is your height, weight, and BMI calculation

What is your height?		
Answer Options		Response Average
Feet		5.03
Inches		4.89
<i>answered question</i>		<b>258</b>
<i>skipped question</i>		<b>48</b>
What is your weight?		
Answer Options	Answer Options	Response Average
Pounds		184.45
<i>answered question</i>		<b>251</b>
<i>skipped question</i>		<b>55</b>
BMI		
Answer Options		Response Average
BMI		30.80

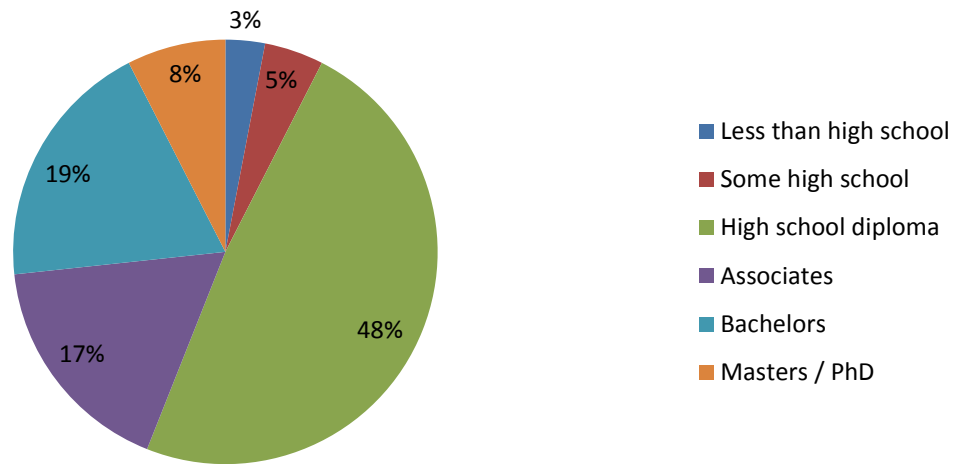
Question 33: How many people live in your home (including yourself)?

Answer Options	Response Average	Response Count
Number who are 0 - 17 years of age:	1.26	198
Number who are 18 - 64 years of age :	1.86	245
Number who are 65 years of age or older:	.23	124
<i>answered question</i>		<b>267</b>
<i>skipped question</i>		<b>39</b>

Question 34: What is your highest education level completed?

Answer Options	Response Percent	Response Count
Less than high school	3.0%	8
Some high school	4.5%	12
High school diploma	48.5%	129
Associates	17.3%	46
Bachelors	19.2%	51
Masters / PhD	7.5%	20
<i>answered question</i>		<b>266</b>
<i>skipped question</i>		<b>40</b>

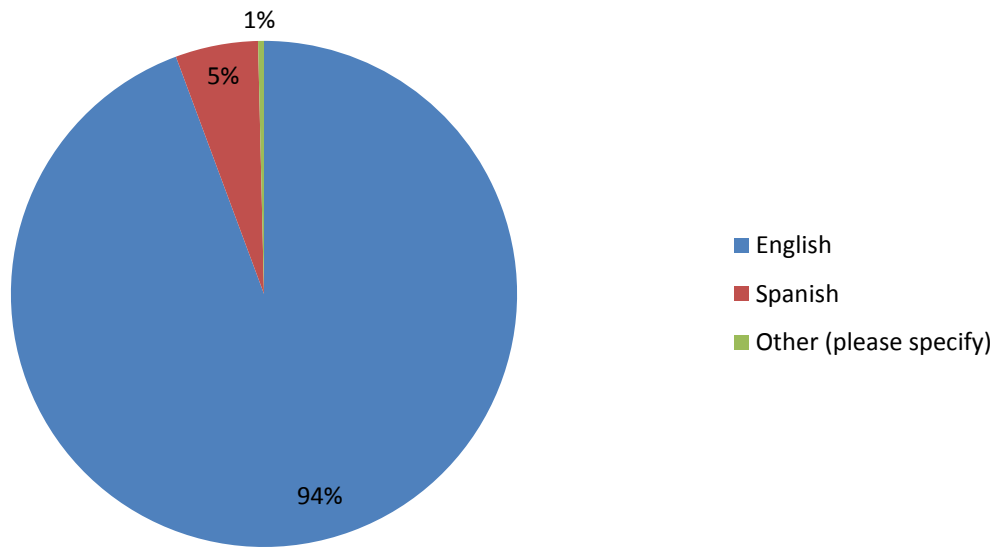
### What is your highest education level completed?



Question 35: What is your primary language?

Answer Options	Response Percent	Response Count
English	94.3%	250
Spanish	5.3%	14
Other (please specify)	0.4%	1
<i>answered question</i>		<b>265</b>
<i>skipped question</i>		<b>41</b>

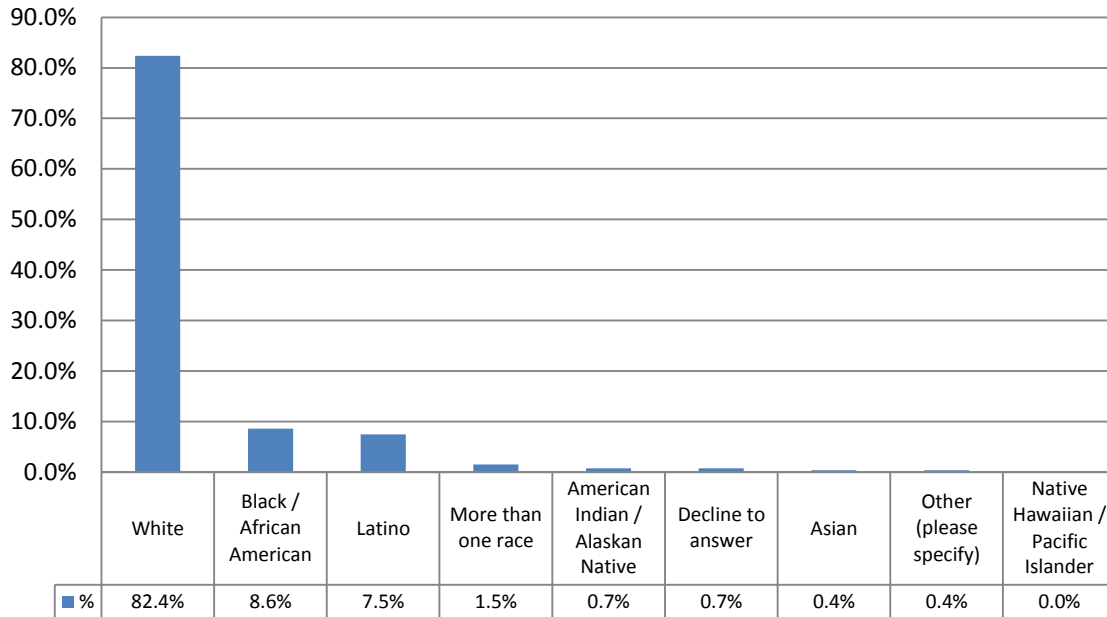
### What is your primary language?



Question 36: What ethnicity do you identify with? (Check all that apply)

Answer Options	Response Percent	Response Count
White	82.4%	220
Black / African American	8.6%	23
Latino	7.5%	20
More than one race	1.5%	4
American Indian / Alaskan Native	0.7%	2
Decline to answer	0.7%	2
Asian	0.4%	1
Other (please specify)	0.4%	1
Native Hawaiian / Pacific Islander	0.0%	0
<i>answered question</i>		<b>267</b>
<i>skipped question</i>		<b>39</b>

### What ethnicity do you identify with?

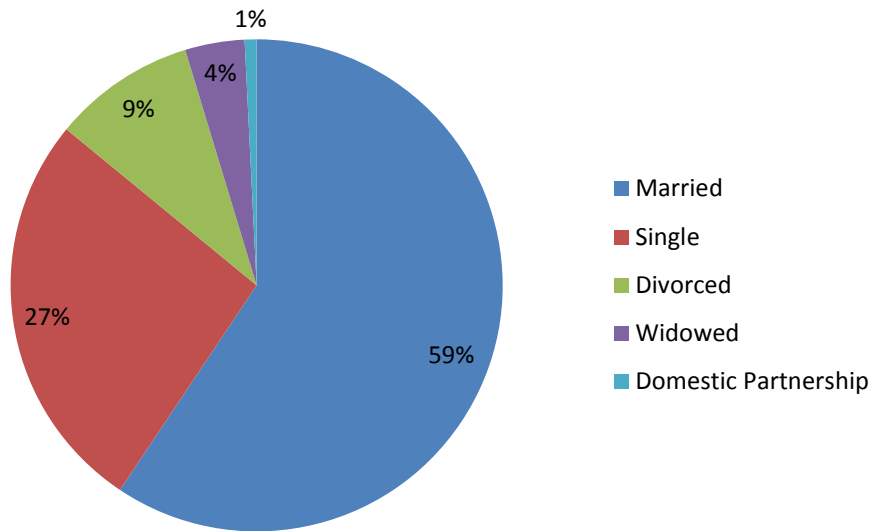




Question 37: What is your marital status?

Answer Options	Response Percent	Response Count
Married	59.4%	152
Single	26.6%	68
Divorced	9.4%	24
Widowed	3.9%	10
Domestic Partnership	0.8%	2
<i>answered question</i>		<b>256</b>
<i>skipped question</i>		<b>50</b>

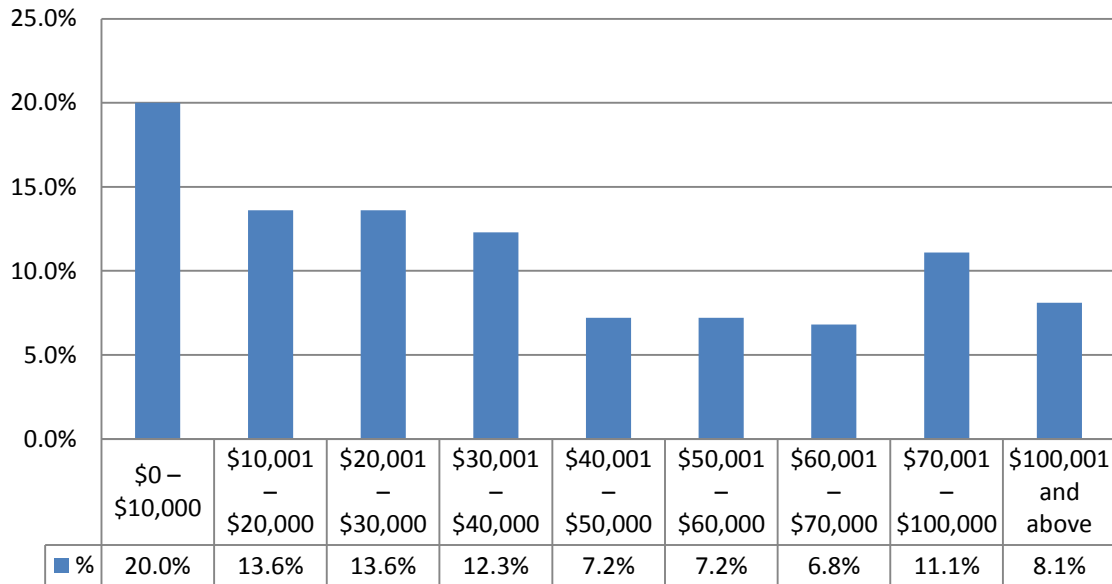
### What is your marital status?



Question 38: What is your yearly household income?

Answer Options	Response Percent	Response Count
\$0 - \$10,000	20.0%	51
\$10,001 - \$20,000	13.6%	33
\$20,001 - \$30,000	13.6%	33
\$30,001 - \$40,000	12.3%	30
\$40,001 - \$50,000	7.2%	18
\$50,001 - \$60,000	7.2%	17
\$60,001 - \$70,000	6.8%	16
\$70,001 - \$100,000	11.1%	26
\$100,001 and above	8.1%	19
<i>answered question</i>		<b>243</b>
<i>skipped question</i>		<b>63</b>

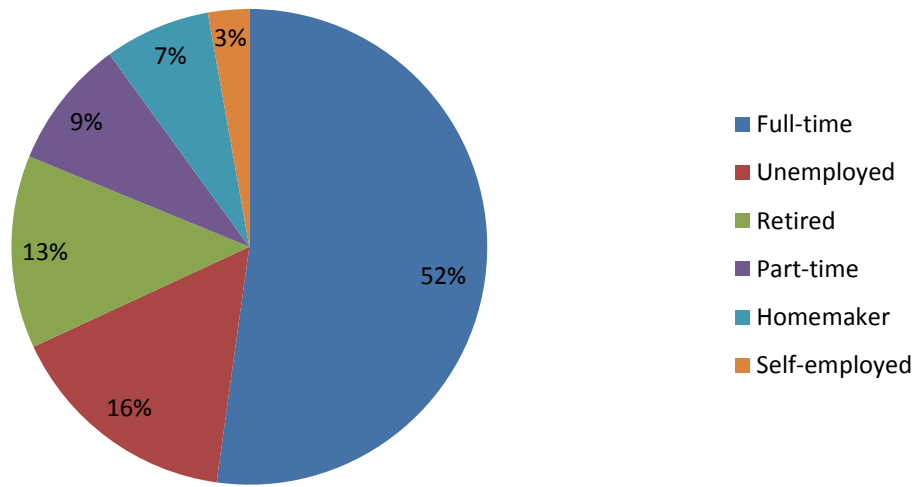
### What is your yearly household income?



Question 39: What is your current employment status?

Answer Options	Response Percent	Response Count
Full-time	52.2%	132
Unemployed	15.9%	42
Retired	13.1%	33
Part-time	8.8%	25
Homemaker	7.2%	22
Self-employed	2.8%	7
<i>answered question</i>		<b>261</b>
<i>skipped question</i>		<b>45</b>

**What is your current employment status?**



# Secondary Data

## *Demographics and Socioeconomic Status*

### ***Social Determinants of Health***

In the same way a person’s DNA is the cornerstone of their individuality, social determinants of health shape wellbeing for billions of humans across the globe. The Center for Disease Control defines social determinants of health as “the circumstances in which people are born, grow up, live, work, and age, as well as the systems put in place to deal with illness<sup>6</sup>”. These circumstances change over time as a person grows and moves around the living world. For this reason, social determinants of health are often used to identify at-risk populations and analyze what determinants impact their lives more than people not considered to be at-risk<sup>6</sup>.

Individuals don’t have complete control over social determinants of health. In fact, they are heavily influenced by large-scale processes like politics, economic change, and culture<sup>6</sup>. These forces also have power in deciding what health care systems are operational in a geographic area. Higher-income areas are commonly buzzing with private care physicians and health services while the lower-income areas depend heavily on charity and government-subsidized services as treatment. This keeps social mobilization from occurring, and the poor areas become sicker as the rich areas see improvement in health issues<sup>7</sup>.

Healthy People 2020 has identified five main social determinants of health that need to be addressed in some way. Economic stability, education, social and community context, health and health care, and neighborhood and built environment have been named as the focus for governmental and organizational health system and wellbeing improvement by the year 2020 in the United States<sup>8</sup>. These five overarching topics include several subcategories that serve to direct specific actions and policy across the nation. Once the social determinants of health are identified in any context, the next important step is to devise a strategy for addressing the determinants and, ultimately, minimizing the negative impact that they have on the nation’s most at-risk groups. No single strategy has been identified as the best or most effective for this task, but trial and error by social groups and government bodies has already brought much needed change to some of the needs areas<sup>8</sup>.

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<sup>6</sup> Centers for Disease Control and Prevention. (2015). Social Determinants of Health. Retrieved from <http://www.cdc.gov/socialdeterminants/>

<sup>7</sup> World Health Organization. (n.d.-a) Social Determinants of Health: Key Concepts. Retrieved from [http://www.who.int/social\\_determinants/thecommission/finalreport/key\\_concepts/en/](http://www.who.int/social_determinants/thecommission/finalreport/key_concepts/en/)

<sup>8</sup> Healthy People 2020. (2015-a). Social Determinants of Health. Retrieved from

A central task in analyzing social determinants of health is the process of discovering health disparities between subgroups in the same geographical area<sup>9</sup>. Health disparities are differences in physical and mental health or wellbeing that stem from differences in factors like race, ethnicity, and socioeconomic status<sup>10</sup>. When connections can be drawn between certain population subgroups, income levels, and the burden that illness places on the community, social disparities emerge as the problems that can be fixed. Social determinants of health provide the context needed to identify what issues need to be addressed and where improvement efforts should begin.

### **Population, Gender, Race and Age**

From 2010 to 2020, the U.S. Census Bureau projects a large population growth occurring in Franklin County (18.76%). In comparison, Virginia will experience a 13.1% increase in its population. In this study, five-year population estimates are used when comparing statistics for Franklin and Henry Counties to the State of Virginia. From 2010-2014, a total of 56,159 residents live in Franklin County and 54,151 residents live in Henry County.

### **Total Population by Geographic Location**

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S0101. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Total Population
Franklin	56,159
Henry	54,151
Virginia	8,001,024

Population projections for 2010 to 2040 predict continued growth in Franklin County and Henry County.

### **Population Change Estimates, 2010 – 2040**

(U.S. Census Bureau, Virginia Employment Commission. (2016).Community Profiles. Retrieved from <http://data.virginialmi.com/gsipub/index.asp?docid=342>)

Geography	2010	% Change	2020	% Change	2030	% Change	2040	% Change
Franklin	56,159	18.76%	62,412	11.13%	68,461	9.69%	74,695	9.11%
Henry	54,151	-6.52%	54,182	0.06%	55,233	1.94%	56,387	2.09%
Virginia	8,001,024	13.02%	8,811,512	10.13%	9,645,281	9.46%	10,530,229	9.17%

<sup>9</sup> Robert Wood Johnson Foundation. (n.d.). Social Determinants of Health. from – <http://www.rwjf.org/en/our-topics/topics/social-determinants-of-health.html>

<sup>10</sup> Robert Wood Johnson Foundation. (n.d.). Social Determinants of Health. from – <http://www.rwjf.org/en/our-topics/topics/social-determinants-of-health.html>

The median age in Franklin County is 44.7 years, which is higher than the median age in Virginia as a whole (37.6). The median age in Henry County is 45.5 years, which is higher than the median age in Virginia as a whole (37.6).<sup>11</sup>

### Median Age by Geographic Location

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S0101. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

	Virginia	Franklin County	Henry County
Median Age (years)	37.6	44.7	45.5

A smaller percentage of children ages 0-17 years live in Franklin County and Henry County (20.3% and 20.3% respectively) compared to children living in Virginia (22.9%). There are fewer adults ages 18-64 living in Franklin County (61.10%) and Henry County (59.6%) as compared to those living in Virginia (64.5%); however, there are more seniors 65 years and older living in Franklin County (19.3%) and Henry County (20.7%) than in the state of Virginia (13%).<sup>12</sup>

### Estimates of Population by Lifecycle, 5-Year Estimates, 2010 - 2014

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S0101. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Under 5	5-14 years	15-17 years	18-64 years	Over 65 years
Franklin County	4.90%	11.50%	3.50%	60.80%	19.30%
Henry County	5.20%	11.40%	3.60%	59.10%	20.70%
Virginia	6.20%	12.70%	3.80%	64.30%	13.00%

In Franklin County, 87.1% of the population is White, 8.3% is Black, and 2.6% is Hispanic. In Henry County, 70.9% of the population is White, 21.9% is Black, and 5.0% is Hispanic.

### Race and Ethnicity, 5-Year Estimate, 2010-2014

(U.S. Census Bureau, 2010 - 2014 5-Year American Community Survey, Table DP05. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	White	Black	American Indian and Alaskan Native	Asian	Native Hawaiian and Other Pacific	Hispanic or Latino (of any race)	Some other race	Two or more races
Virginia	63.90%	18.90%	0.20%	5.80%	0.10%	8.40%	0.20%	2.60%
Franklin County	87.10%	8.30%	0.10%	0.30%	0%	2.60%	0.40%	1.20%
Henry County	70.90%	21.90%	0.00%	0.50%	0%	5.00%	0.20%	1.40%

<sup>11</sup> US Census, American Community Survey 5-Year Estimates, Median Age, 2010-2014

<sup>12</sup> US Census, American Community Survey 5-year Estimates, Age by Sex, 2010-2014

Franklin County and Henry County Public Schools continue to experience relative stability in the populations it serves, with growth being seen only in the percent of children who are Hispanic. In the past school year (2015-2016), Franklin County reports that 7.15% of the children in elementary schools, 6.08% in middle schools, and 4.48% in the high schools are Hispanic. We have included data for race distribution in Franklin County and Henry County public schools for school years 2013-2014, 2014-2015, and 2015-2016.

### Franklin County Public Schools Race/Ethnicity, 2013-2016

(Virginia Department of Education (2016). Fall Membership Reports. Retrieved from [http://bi.vita.virginia.gov/doe\\_bi/rdPage.aspx?rdReport=Main&subRptName=Fallmembership](http://bi.vita.virginia.gov/doe_bi/rdPage.aspx?rdReport=Main&subRptName=Fallmembership))

School Year	School Type	Hispanic	American Indian/ Alaskan Native	Asian	Black, not of Hispanic origin	White	Native Hawaiian/ Other	2 or more
2013-2014								
	Elementary Schools	6.10%	0.21%	0.31%	8.33%	79.34%	0.00%	5.71%
	Middle Schools	4.43%	0.18%	0.47%	7.29%	82.91%	0.10%	4.73%
	High Schools	3.77%	0.47%	0.57%	9.80%	81.39%	0.00%	4.01%
	District Grand Total	5.00%	0.28%	0.42%	8.52%	80.81%	0.00%	4.96%
2014-2015								
	Elementary Schools	6.76%	0.21%	0.30%	8.46%	79.04%	0.00%	5.24%
	Middle Schools	4.43%	0.18%	0.71%	8.39%	80.73%	0.10%	5.50%
	High Schools	4.29%	0.37%	0.61%	9.37%	81.41%	0.00%	3.96%
	District Grand Total	5.48%	0.25%	0.49%	8.71%	80.14%	0.01%	4.92%
2015-2016								
	Elementary Schools	7.15%	0.21%	0.30%	8.18%	78.71%	0.00%	5.44%
	Middle Schools	6.08%	0.19%	0.50%	8.08%	79.95%	0.10%	5.14%
	High Schools	4.48%	0.28%	0.60%	8.23%	81.88%	0.00%	4.53%
	District Grand Total	6.09%	0.23%	0.44%	8.17%	79.96%	0.01%	5.09%

## Henry County Public Schools Race/Ethnicity, 2013-2016

(Virginia Department of Education (2016). Fall Membership Reports. Retrieved from [http://bi.vita.virginia.gov/doe\\_bi/rdPage.aspx?rdReport=Main&subRptName=Fallmembership](http://bi.vita.virginia.gov/doe_bi/rdPage.aspx?rdReport=Main&subRptName=Fallmembership))

School Year	School Type	Hispanic	American Indian/ Alaskan Native	Asian	Black, not of Hispanic origin	White	Native Hawaiian / Other	2 or more
<b>2013-2014</b>								
	Elementary Schools	13.87%	0.21%	0.43%	21.15%	57.79%	0.03%	6.52%
	Middle Schools	10.26%	0.36%	0.48%	19.45%	63.60%	0.10%	5.79%
	High Schools	8.68%	0.38%	0.57%	22.29%	64.72%	0.00%	3.37%
	District Grand Total	11.46%	0.30%	0.48%	21.09%	61.24%	0.03%	5.41%
<b>2014-2015</b>								
	Elementary Schools	14.32%	0.15%	0.40%	21.41%	56.51%	0.03%	7.18%
	Middle Schools	12.50%	0.12%	0.24%	19.44%	61.47%	0.10%	6.22%
	High Schools	9.33%	0.41%	0.59%	22.22%	63.51%	0.00%	3.93%
	District Grand Total	12.37%	0.22%	0.42%	21.20%	59.81%	0.01%	5.96%
<b>2015-2016</b>								
	Elementary Schools	14.69%	0.15%	0.37%	20.79%	56.27%	0.00%	7.73%
	Middle Schools	13.51%	0.06%	0.12%	20.84%	59.18%	0.10%	6.30%
	High Schools	9.90%	0.27%	0.59%	21.70%	62.84%	0.05%	4.66%
	District Grand Total	12.93%	0.17%	0.38%	21.08%	58.98%	0.01%	6.44%

In Franklin County, 3.4% of the population 5 years and over speaks a language other than English at home, compared to 15.2% in Virginia. In Henry County, there are more individuals 5 years and over who speak a language other than English at home (5.5%).<sup>13</sup>

### Population 5 years and over whom speak a language other than English at home, 5-Year Estimate, 2010-2014

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S1601. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	#	%
Franklin County	1,822	3.40%
Henry County	2,765	5.50%
Virginia	1,164,892	15.20%

<sup>13</sup> U.S. Census Bureau, American Community Survey, 5-year estimates, 2010-2014



## Academic Attainment

There is a direct link to educational attainment, health literacy, and positive health outcomes. According to the Virginia Health Equity report, Virginians who don't attend, or complete, high school are more likely to die of heart disease, cancer and a dozen other leading causes of death than those who earn a diploma.

In Franklin County there is one public school division, Franklin County Public Schools, consisting of twelve elementary, one middle, and one high school. In addition, there are two alternative schools- one applied technology and career exploration school for all students and the second for adult students and career education.

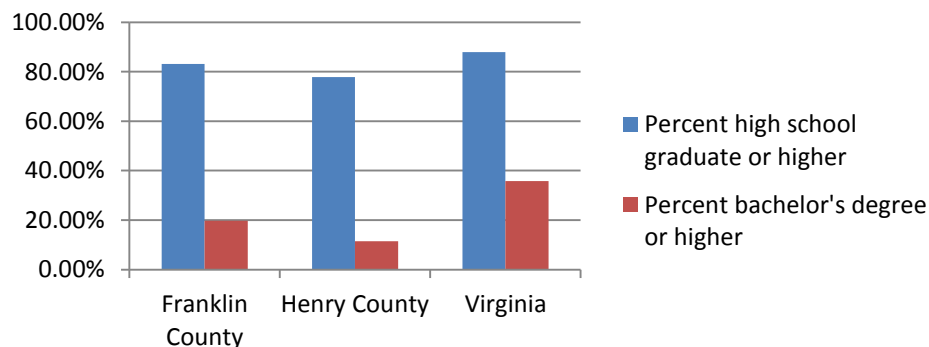
Education attainment in both Franklin County and Henry County is lower than much of the region and the state as a whole. Eighty three percent (83.1%) of the population 25 years and over in Franklin County and 77.8% of the population in Henry County has a high school diploma while only 19.8% in Franklin County and 11.5% in Henry County have a Bachelor's Degree or higher.

### Academic Attainment for Population 25 and Over, 5-Year Estimate, 2010-2014

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S1501. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Percent high school graduate or higher	Percent bachelor's degree or higher
Franklin County	83.10%	19.80%
Henry County	77.80%	11.50%
Virginia	87.90%	35.80%

### Franklin and Henry Academic Attainment for Population 25 and Over, 5-Year Estimate, 2010-2014



The on-time graduation rates for students in Franklin County (87.7%) and Henry County (88.5%) are lower than the state (90.5%). Henry County’s on-time graduation rates are currently higher than Franklin County’s; however Franklin’s on-time graduation rates are trending up since 2013, while Henry’s are trending down, driven by a decrease in graduation rates at Bassett High School.<sup>14</sup>

### On Time Graduation Rates, Franklin and Henry County

(Virginia Department of Education, Virginia Cohort Reports, Retrieved from [http://www.doe.virginia.gov/statistics\\_reports/graduation\\_completion/cohort\\_reports/.](http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/))

Geography	2013	2014	2015
Franklin County	86.20%	87.10%	87.70%
Henry County	90.40%	89.20%	88.50%
Virginia	90.10%	89.90%	90.50%

### On Time Graduation Rates, Franklin County High Schools

(Virginia Department of Education, Virginia Cohort Reports, Retrieved from [http://www.doe.virginia.gov/statistics\\_reports/graduation\\_completion/cohort\\_reports/.](http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/))

Schools	2013	2014	2015
Franklin County High	86.20%	87.10%	87.70%
Virginia	90.10%	89.90%	90.50%

### On Time Graduation Rates, Henry County High Schools

(Virginia Department of Education, Virginia Cohort Reports, Retrieved from [http://www.doe.virginia.gov/statistics\\_reports/graduation\\_completion/cohort\\_reports/.](http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/))

Schools	2013	2014	2015
Basset High	94.20%	90.70%	88.20%
Magna Vista High	85.30%	87.30%	88.80%
Virginia	90.10%	89.90%	90.50%

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<sup>14</sup> Virginia Department of Education, Division Level and Drop-out Rates, 2013-2015

## Dropout Rates, Franklin County and Henry County

(Virginia Department of Education, Annual Dropout Statistics, Retrieved from [http://doe.virginia.gov/statistics\\_reports/graduation\\_completion/index.shtml](http://doe.virginia.gov/statistics_reports/graduation_completion/index.shtml))

Geography	2013	2014	2015
Franklin County	7.80%	7.10%	10.10%
Henry County	4.30%	7.50%	5.70%
Virginia	6.50%	5.40%	5.20%

## Dropout Rates, Franklin County High Schools

(Virginia Department of Education, Virginia Cohort Reports, Retrieved from [http://www.doe.virginia.gov/statistics\\_reports/graduation\\_completion/cohort\\_reports/.](http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/))

Schools	2013	2014	2015
Franklin County High	7.80%	7.10%	10.10%
Virginia	6.50%	5.4%	5.20%

## Dropout Rates, Henry County High Schools

(Virginia Department of Education, Virginia Cohort Reports, Retrieved from [http://www.doe.virginia.gov/statistics\\_reports/graduation\\_completion/cohort\\_reports/.](http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/))

Schools	2013	2014	2015
Basset High	2.60%	6.90%	6.60%
Magna Vista High	6.00%	8.10%	4.40%
Virginia	6.50%	5.40%	5.20%

STEP, Inc.'s Head Start program offers preschool opportunities to at-risk children living in the Franklin County, as well as in neighboring Patrick County. There are six Head Start locations in the Franklin County serving preschoolers, infants, and toddlers.

Franklin County and adjoining Roanoke and New River Valleys boast several institutions of higher learning. Franklin County is home to Ferrum College. Roanoke College and Hollins University are located within the Roanoke MSA. Virginia Tech, the largest land grant university in Virginia with nationally recognized research programs is located in neighboring Montgomery County as is the Edward Via College of Osteopathic Medicine. Radford University, located in the independent city of Radford in the New River Valley, is a state university and is the site of the Waldron College of Health and Human Services which houses the School of Nursing, School of Social Work, Communication Sciences and Disorders, and the newly formed Occupational Therapy program, as well as the Speech and Hearing Clinic, Child Advocacy Center, and FAMIS Outreach program. In addition, Radford University's Department of Psychology offers graduate degrees in clinical psychology and counseling.

The Roanoke MSA is also home to Virginia Western Community College and Carilion Clinic's Medical Education Programs including the Virginia Tech Carilion (VTC) School of Medicine and Research Institute, eleven residency programs and twelve fellowships. Additionally, the Jefferson College of Health Sciences offers sixteen different degree programs (Associates, Bachelors, Masters) in nursing and allied health is part of the Carilion Clinic education system in the city.

## Income and Poverty Status

The median income in Franklin County (\$44,827) is much lower than the state (\$64,792), but similar to other areas in Southwest Virginia. The median income in Henry County is even lower at \$34,344.

### Median Household Income, 5-Year Estimates, 2009-2013 & 2010-2014

(U.S. Census Bureau, 2009-2013 & 2010-2014 5-Year American Community Survey, Table S1901. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Median Income 2009-2013	Median Income 2010-2014
Franklin County	\$45,624.00	\$44,827.00
Henry County	\$34,984.00	\$34,344.00
Virginia	\$63,907.00	\$64,792.00

The Federal Poverty Guidelines (FPL) is used to determine eligibility for many local, state, and federal assistance programs. It is based on an individual's or family's annual cash income before taxes. Updated yearly by the Census Bureau, the 2014, 2015, and 2016 guidelines are provided below as a reference.<sup>15</sup>

2014 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia	
Persons in Family/household	Poverty Guideline
1	\$11,670.00
2	\$15,730.00
3	\$19,790.00
4	\$23,850.00
5	\$27,910.00
6	\$31,970.00
7	\$36,030.00
8	\$40,090.00
For families/household with more than eight persons, add \$4,060 for each additional person.	

(Federal Register. *2014 Poverty Guidelines for the 48 Contiguous States and the District of Columbia*. Vol. 79, No. 14, January 22, 2014, pp. 3593-3594. Retrieved from <https://federalregister.gov/a/2014-01303>)

<sup>15</sup><http://aspe.hhs.gov/poverty/14poverty.cfm>

2015 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia	
Persons in Family/household	Poverty Guideline
1	\$11,770.00
2	\$15,930.00
3	\$20,090.00
4	\$24,250.00
5	\$28,410.00
6	\$32,570.00
7	\$36,730.00
8	\$40,890.00
For families/household with more than eight persons, add \$4,160 for each additional person.	

(Federal Register. 2015 Poverty Guidelines for the 48 Contiguous States and the District of Columbia. Vol. 80, No. 15, January 22, 2015, pp. 3236-3237. Retrieved from <https://federalregister.gov/a/2015-01120>)

2016 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia	
Persons in Family/household	Poverty Guideline
1	\$11,880.00
2	\$16,020.00
3	\$20,160.00
4	\$24,300.00
5	\$28,440.00
6	\$32,580.00
7	\$36,730.00
8	\$40,890.00
For families/household with more than eight persons, add \$4,160 for each additional person.	

(Federal Register. 2016 Poverty Guidelines for the 48 Contiguous States and the District of Columbia. Vol. 81, No. 16, January 25, 2016, pp. 4036-4037. Retrieved from <https://federalregister.gov/a/2016-01450>)

The guidelines reflect 100% of the FPL. To calculate 200% of the FPL, multiply the listed income level by two.

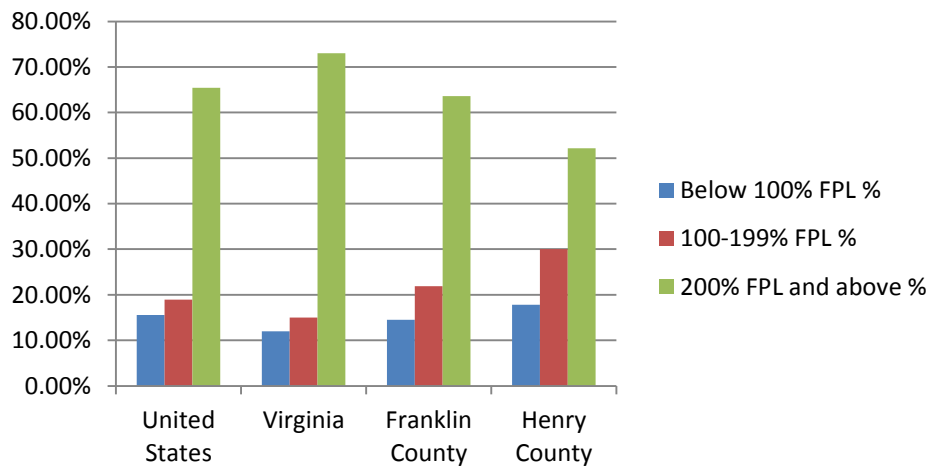
In Franklin County, 36.38% of residents live below 200% of the FPL as compared to 27% in Virginia and 34.5% in the United States. Even more startling is that close to 48% of residents in Henry County live below 200% of poverty with 17.8% of these residents living below 100% of poverty.<sup>16</sup>

### Number of Residents Living in Poverty, 2010-2014

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table C17002. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Below 100% FPL		100-199% FPL		200% FPL and above		Total	
	#	%	#	%	#	%	#	%
United States	47,755,606	15.59%	58,017,801	18.95%	200,452,987	65.46%	306,226,394	100.00%
Virginia	914,237	12.00%	1,227,921	15.00%	5,797,174	73.00%	7,939,332	100.00%
Franklin County	7,943	14.49%	11,999	21.89%	34,870	63.62%	54,812	100.00%
Henry County	9,328	17.81%	15,720	30.01%	27,327	52.18%	52,375	100.00%

### Percent of Residents Living in Poverty



<sup>16</sup> US Census Bureau, American Community Survey 5-year Estimates, 2010-2014

## Ratio of Income by Poverty Status by Age, Franklin County

(American Community Survey 5-Year Estimates, U.S. Census Bureau, Table B17024, 2010-2014. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

< 6 years of age						
	Below 100% FPL		100-199% FPL		200% FPL & over	
	#	%	#	%	#	%
United States	5,859,390	24.71%	5,469,940	23.07%	12,379,706	52.22%
Virginia	106,060	17.44%	119,773	19.69%	382,384	62.87%
Franklin County	765	23.06%	763	23.00%	1,790	53.95%
Henry	880	27.39%	1,296	40.34%	1,037	32.28%

6-17 years						
	Below 100% FPL		100-199% FPL		200% FPL & over	
	#	%	#	%	#	%
United States	10,048,005	20.54%	10,739,034	21.95%	28,141,750	57.52%
Virginia	173,299	14.11%	224,375	18.26%	830,912	67.63%
Franklin County	1,935	24.88%	1,800	23.15%	4,042	51.97%
Henry County	2,165	29.26%	2,371	32.05%	2,862	38.69%

18-64 years						
	Below 100% FPL		100-199% FPL		200% FPL & over	
	#	%	#	%	#	%
United States	27,921,991	14.56%	32,653,021	17.03%	131,142,250	68.40%
Virginia	555,771	10.97%	688,952	13.60%	3,822,885	75.44%
Franklin County	4,273	12.92%	6,576	19.88%	22,233	67.21%
Henry County	5,447	17.58%	8,144	26.28%	17,398	56.14%

65 years & >						
	Below 100% FPL		100-199% FPL		200% FPL & over	
	#	%	#	%	#	%
United States	392,619	9.38%	9,155,746	21.87%	28,789,282	68.76%
Virginia	79,107	7.64%	194,821	18.82%	760,993	73.53%
Franklin County	970	9.12%	2,860	26.89%	6,805	63.99%
Henry County	836	7.76%	3,909	36.28%	6,030	55.96%



In Franklin and Henry Counties more Whites live in poverty (13.5% and 16% respectively) as compared to Virginia (9.2%). More African Americans live in poverty in these areas (21.9% and 21.1% respectively) as compared to the statewide averages (20.1%), as well.<sup>17</sup>

### Poverty Status in the Past 12 Months by Race/Ethnicity, 2010-2014

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S1701. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	White			Black/African American		
	Population	Number in Poverty	Percent	Population	Number in Poverty	Percent
Virginia	5,520,140	505,667	9.20%	1,501,394	301,972	20.10%
Franklin County	49,388	6,669	13.50%	4,198	919	21.90%
Henry County	38,791	6,253	16%	11,378	2,401	21.10%

Geography	American Indian/Alaskan Native			Asian			Native Hawaiian and Other Pacific Islander		
	Population	Number in Poverty	Percent	Population	Number in Poverty	Percent	Population	Number in Poverty	Percent
Virginia	22,245	3,094	13.90%	467,627	38,712	8.30%	4,966	544	11.00%
Franklin County	57	0	0.00%	130	0	0.00%	0	0	0.00%
Henry County	17	0	0.00%	282	55	19.50%	0	0	0.00%

Geography	Some Other Race			Two or More Races		
	Population	Number in Poverty	Percent	Population	Number in Poverty	Percent
Virginia	175,067	30,181	17.20%	247,893	34,067	13.70%
Franklin County	351	214	61.00%	688	141	20.50%
Henry County	1,087	387	35.60%	820	232	28.30%

The Franklin County Department of Social Services works to promote self-sufficiency while providing support and protection to the citizens of the city through the delivery and coordination of community based social services. Services include financial assistance programs including aid to families with dependent children-foster care; emergency assistance and energy assistance; Medicaid and FAMIS (Family Access to Medical Insurance Security) enrollment; Supplemental Nutrition Assistance Program (SNAP) and the Temporary Assistance for Needy Families (TANF); and state and local hospitalization. Other support programs include adult and child protective services; prevention services for families; foster care and adoption services; and child care development.

<sup>17</sup> US Census Bureau, American Community Survey, 1-year estimates, 2010

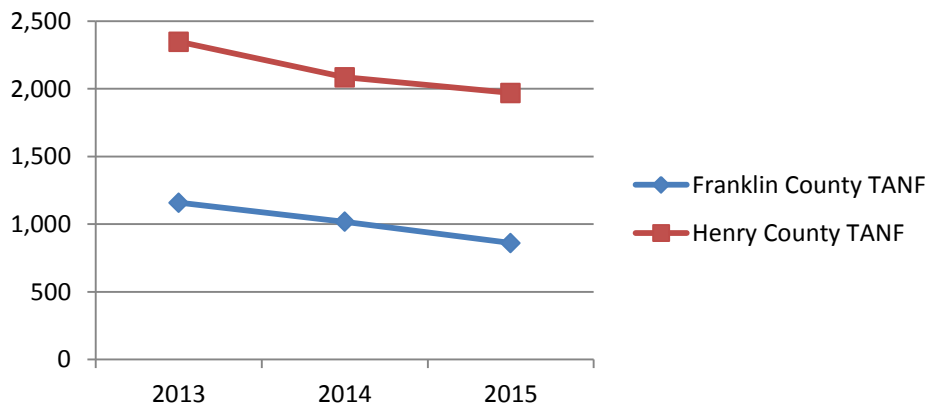
## Number of TANF Recipients for Fiscal Year, 2013-2015

(Virginia Department of Social Services. Local Departments of Social Services Profile Report. Local Agency Caseload & Expenditure, SFY 2013-2015. Retrieved from

[http://www.dss.virginia.gov/geninfo/reports/agency\\_wide/ldss\\_profile.cgi](http://www.dss.virginia.gov/geninfo/reports/agency_wide/ldss_profile.cgi).)

Geography	2013	2014	2015
Franklin County TANF	1,158	1,018	860
Henry County TANF	2,347	2,085	1,969

## Number of TANF Recipients for Fiscal Year, 2013-2015



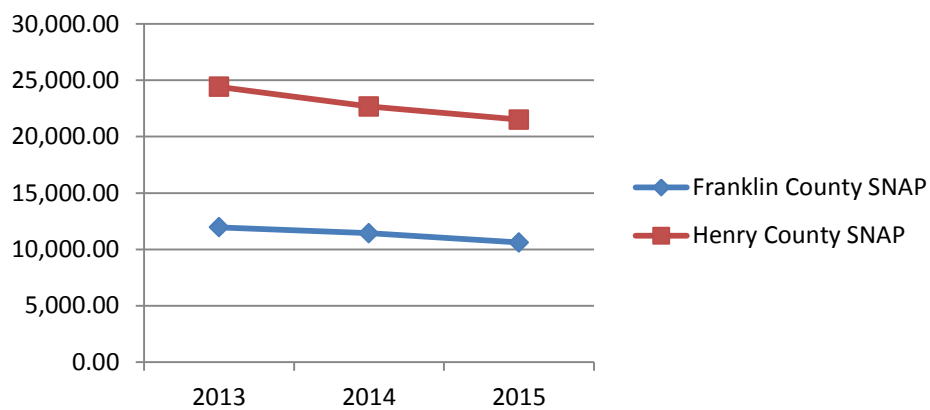
## Number of SNAP Recipients for Fiscal Year, 2013-2015

(Virginia Department of Social Services. Local Departments of Social Services Profile Report. Local Agency Caseload & Expenditure, SFY 2013-2015. Retrieved from

[http://www.dss.virginia.gov/geninfo/reports/agency\\_wide/ldss\\_profile.cgi](http://www.dss.virginia.gov/geninfo/reports/agency_wide/ldss_profile.cgi).)

Geography	2013	2014	2015
Franklin County SNAP	11,963.00	11,430.00	10,616.00
Henry County SNAP	24,417.00	22,661.00	21,507.00

## Number of SNAP Recipients for Fiscal Year, 2013-2015



Half of the school children in Franklin County and more than half in Henry County are eligible for the Free and Reduced Lunch Program as compared to 41.2% for Virginia school districts as a whole.<sup>18</sup>

### Students Eligible for Free and Reduced Lunch Program, 2013-2016

(Virginia Department of Education, Office of School Nutrition Programs. Free and Reduced Price Eligibility Report, Division Level. Retrieved from [http://www.doe.virginia.gov/support/nutrition/statistics/.](http://www.doe.virginia.gov/support/nutrition/statistics/))

Geography	% Eligible for Free or Reduced Lunch 2013	% Eligible for Free or Reduced Lunch 2014	% Eligible for Free or Reduced Lunch 2015	% Eligible for Free or Reduced Lunch 2016
Franklin County	50.75%	50.13%	51.99%	51.29%
Henry County (See Note 1)	64.75%	66.25%	65.65%	70.40%
Virginia	40.10%	41.19%	41.95%	41.20%
Note 1. This School is operating under the USDA Community Eligibility Provision (CEP). The free eligible is a calculated number based on the USDA guidance.				

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<sup>18</sup>Virginia Department of Education, Office of School Nutrition Program, National School Lunch Program Free & Reduced Price Eligibility Report.

## Franklin County Public Schools Free and Reduced Lunch Eligibility, 2014-2015

(Virginia Department of Education, Office of School Nutrition Programs. Free and Reduced Price Eligibility Report, School/Site Level. Retrieved from <http://www.doe.virginia.gov/support/nutrition/statistics/>.)

Schools	SNAP Membership	Free Lunch Eligible	%Free Lunch Eligible	Reduced Lunch Eligible	%Reduced Lunch Eligible	Total F/R Lunch Eligible	% Total F/R Lunch Eligible
Ben. Franklin Middle-East	543	248	45.67%	38	7.00%	286	52.67%
Boones Mill	339	107	31.56%	28	8.26%	135	39.82%
Burnt Chimney	326	139	42.64%	18	5.52%	157	48.16%
Callaway	249	120	48.19%	28	11.24%	148	59.44%
Dudley	296	102	34.46%	28	9.46%	130	43.93%
Ferrum	242	135	55.79%	9	3.72%	144	59.50%
Glade Hill	328	172	52.44%	23	7.01%	195	59.45%
Henry	200	94	47.00%	18	9.00%	112	56.00%
Lee M. Waid	396	220	55.56%	34	8.59%	254	64.14%
Rocky Mount	389	323	83.03%	0	0.00%	323	83.03%
Snow Creek	224	124	55.36%	17	7.59%	141	62.95%
Sontag	342	291	85.09%	0	0.00%	291	85.09%
Windy Gap	345	117	33.91%	22	6.38%	139	40.29%
<b>Middle Schools</b>							
Ben. Franklin Middle-West	845	333	39.41%	64	7.57%	397	46.98%
Gereau Center for Apl Tech & Career Expl	304	126	41.45%	29	9.54%	155	50.99%
<b>High Schools</b>							
Franklin County	1054	385	36.53%	101	9.58%	486	46.11%

## Franklin County Public Schools Free and Reduced Lunch Eligibility, 2015-2016

(Virginia Department of Education, Office of School Nutrition Programs. Free and Reduced Price Eligibility Report, School/Site Level. Retrieved from <http://www.doe.virginia.gov/support/nutrition/statistics/>.)

Schools	SNAP Membership	Free Lunch Eligible	%Free Lunch Eligible	Reduced Lunch Eligible	%Reduced Lunch Eligible	Total F/R Lunch Eligible	% Total F/R Lunch Eligible
Ben. Franklin Middle-East	527	224	42.50%	36	6.83%	260	49.34%
Boones Mill	339	108	31.86%	37	10.91%	145	42.77%
Burnt Chimney	299	115	38.46%	15	5.02%	130	43.48%
Callaway	269	139	51.67%	19	7.06%	158	58.74%
Dudley	293	105	35.84%	20	6.83%	125	42.66%
Ferrum	260	201	77.31%	0	0.00%	201	77.31%
Glade Hill	299	165	55.18%	26	8.70%	191	63.88%
Henry	199	94	47.24%	19	9.55%	113	56.78%
Lee M. Waid	381	215	56.34%	26	6.82%	241	63.25%
Rocky Mount	392	325	82.91%	0	0.00%	325	82.91%
Snow Creek	212	103	45.58%	14	6.60%	117	55.19%
Sontag	366	311	84.97%	0	0.00%	311	84.97%
Windy Gap	322	113	35.09%	15	4.66%	128	39.75%
Middle Schools							
Ben. Franklin Middle-West	819	331	40.42%	55	6.72%	386	47.13%
Gereau Center for Apl Tech & Career Expl	258	101	39.15%	23	8.91%	124	48.06%
High Schools							
Franklin County	1049	344	32.79%	74	7.05%	418	39.85%

## Henry County Public Schools Free and Reduced Lunch Eligibility, 2014-2015

(Virginia Department of Education, Office of School Nutrition Programs. Free and Reduced Price Eligibility Report, School/Site Level. Retrieved from <http://www.doe.virginia.gov/support/nutrition/statistics/>.)

Schools	SNAP Membership	Free Lunch Eligible	%Free Lunch Eligible	Reduced Lunch Eligible	%Reduced Lunch Eligible	Total F/R Lunch Eligible	% Total F/R Lunch Eligible
Axton	429	365	85.08%	0	0.00%	365	85.08%
Campbell Court	370	315	85.14%	0	0.00%	315	85.14%
Carver	523	445	85.09%	0	0.00%	445	85.09%
Collinsville Primary	313	266	84.98%	0	0.00%	266	84.98%
Drewry Mason	451	384	85.14%	0	0.00%	384	85.14%
John Redd Smith	315	268	85.08%	0	0.00%	268	85.08%
Mt. Olivet	289	246	85.12%	0	0.00%	246	85.12%
Rich Acres	260	221	85.00%	0	0.00%	221	85.00%
Sanville	260	221	85.00%	0	0.00%	221	85.00%
Stanleytown	356	303	85.11%	0	0.00%	303	85.11%
Middle Schools:							
Fieldale-Collinsville	880	501	56.93%	55	6.25%	556	63.18%
Laurel Park	773	414	53.56%	51	6.60%	465	60.16%
High Schools:							
Basset	1144	550	48.08%	86	7.52%	636	55.59%
Magna Vista	1067	470	44.05%	70	6.56%	540	50.61%

## Henry County Public Schools Free and Reduced Lunch Eligibility, 2015-2016

(Virginia Department of Education, Office of School Nutrition Programs. Free and Reduced Price Eligibility Report, School/Site Level. Retrieved from <http://www.doe.virginia.gov/support/nutrition/statistics/>.)

Schools	SNAP Membership	Free Lunch Eligible	%Free Lunch Eligible	Reduced Lunch Eligible	%Reduced Lunch Eligible	Total F/R Lunch Eligible	% Total F/R Lunch Eligible
Axton	422	292	69.19%	25	5.92%	317	75.12%
Campbell Court	372	260	69.89%	33	8.87%	293	78.76%
Carver	532	372	69.92%	37	6.95%	409	76.88%
Collinsville Primary	311	185	59.49%	26	8.36%	211	67.85%
Drewry Mason	435	232	53.33%	28	6.44%	260	59.77%
John Redd Smith	291	174	59.79%	18	6.19%	192	65.98%
Mt. Olivet	311	162	52.09%	30	9.65%	192	61.74%
Rich Acres	268	185	69.03%	20	7.46%	205	76.49%
Sanville	296	210	70.95%	18	6.08%	228	77.03%
Stanleytown	369	223	60.43%	19	5.15%	242	65.58%
Middle Schools:							
Fieldale-Collinsville	901	521	57.82%	70	7.77%	591	65.59%
Laurel Park	753	405	53.78%	77	10.23%	482	64.01%
High Schools:							
Basset	1154	572	49.57%	112	9.71%	684	59.27%
Magna Vista	1021	477	46.72%	99	9.70%	576	56.42%



## Households and Marital Status

In Franklin County, of the population 15 years of age and older, more were married, fewer were divorced, and fewer had never married as compared to the state as a whole.<sup>19</sup>

### Marital Status, Population 15 years and over, 2010-2014, Percentage

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S1201. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Now Married	Widowed	Divorced	Separated	Never Married
Franklin County	56.10%	6.80%	9.90%	1.90%	25.30%
Henry County	51.90%	8.60%	13.40%	3.00%	23.10%
Virginia	50.40%	5.60%	10.00%	2.50%	31.50%

More children less than 18 years of age who live with their own parents live in single parent families in Franklin and Henry Counties than in the state as a whole. While the percent of African American children living in single parent households is higher than that of White or Hispanic families, our area has a lower percentage than the state as a whole; however, we have a higher percentage of White children living in single parent households.

### Percent of Children Living in Single Parent Households, 2010, by Race/Ethnicity

(U.S. Census Bureau, 2010 Census Summary File 1, Table P31, P31A, P31B, P31H. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Total Child Population	White	African American	Hispanic or Latino
Virginia	23.97%	17.73%	44.70%	24.03%
Franklin County	24.67%	22.44%	43.92%	23.35%
Henry County	29.68%	24.58%	41.90%	30.66%

\*Note: Refers to population of children (< 18 years) living in their own parents' households. Excludes minors who are heads of households, spouses, or other relatives (e.g., grandchildren) living in the household as well as children living in institutionalized settings. Hispanic origin is not mutually exclusive of race.

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<sup>19</sup> US Census Bureau, American Community Survey, 5-year Estimate, Table S1201, 2010-2014

## Families Living in Poverty

(U.S. Census Bureau, 2009-2013 and 2010-2014, 5-Year American Community Survey, Table S1702. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	Percent 2009-2013	Percent 2010-2014	Percent Change
Franklin County	10.30%	10.10%	-1.90%
Henry County	12.70%	13.10%	3.10%
Virginia	8.00%	8.20%	2.50%

## Families Living in Poverty with Related Children Under 18 Years

(U.S. Census Bureau, 2009-2013 and 2010-2014, 5-Year American Community Survey, Table S1702. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	2009-2013	2010-2014	Percent Change
Virginia	12.60%	13.00%	3.17%
Franklin County	17.00%	18.50%	8.82%
Henry County	25.10%	25.00%	-0.40%

## Female Head of Household with Related Children Under 18 Years Living in Poverty

(U.S. Census Bureau, 2009-2013 and 2010-2014, 5-Year American Community Survey, Table S1702. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	2009-2013	2010-2014	Percent Change
Franklin County	35.80%	42.10%	17.60%
Henry County	40.30%	41.80%	3.72%
Virginia	33.20%	34.40%	3.61%

In both Franklin and Henry Counties, more grandparents are responsible for their grandchildren as compared to the state.<sup>20</sup>

## Percent of Grandparents Living with Grandchildren who are Responsible for their Grandchildren with No Parent of the Grandchild Present

(U.S. Census Bureau, 2009-2013 and 2010-2014, 5-Year American Community Survey, Table S1002. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

Geography	2009-2013	2010-2014	Percent Change
Franklin County	15.10%	18.20%	20.53%
Henry County	17.50%	15.30%	-12.57%
Virginia	13.00%	12.60%	-3.08%

<sup>20</sup> US Census Bureau, American Community Survey 5-year Estimates, 2010-2014

## Employment Status

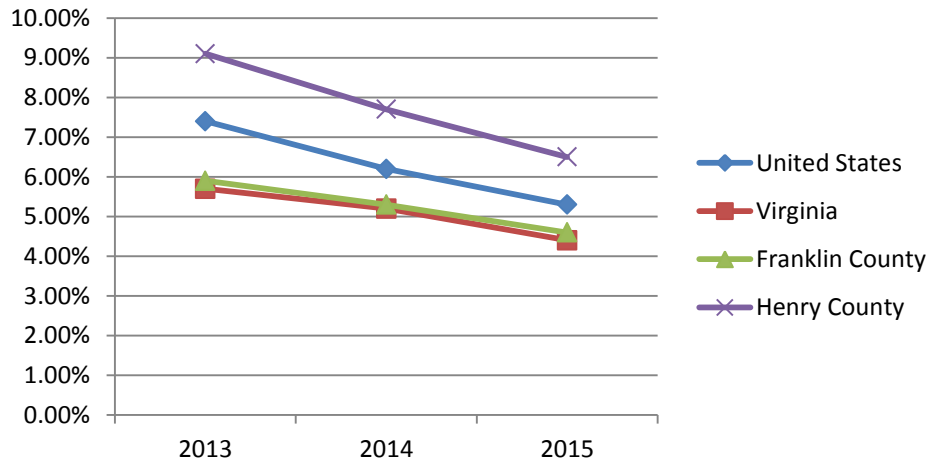
Many areas in Southwest Virginia were hard hit by the recession with a large increase in unemployment rates from 2008 to 2011. Those rates have since started to decline. Franklin and Henry Counties both consistently have higher unemployment rates than the state average.

### Unemployment Rates for 2013-2015

(Virginia Employment Commission, Local Area Unemployment Statistics, Retrieved from <https://data.virginialmi.com/gsipub/index.asp?docid=342>)

Geography	2013	2014	2015
United States	7.40%	6.20%	5.30%
Virginia	5.70%	5.20%	4.40%
Franklin County	5.90%	5.30%	4.60%
Henry County	9.10%	7.70%	6.50%

### Unemployment Rates, 2013-2015



## ***Transportation***

In Henry County, more residents (7.5%) live in housing without an available vehicle as compared to Franklin County (5.2%) and the state as a whole (6.4%). Due to the rural nature of much of this area and a lack of public transportation, not having a vehicle available can be a significant barrier.

### **Occupied Housing Units with No Vehicles Available 2010-2014**

(U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table DP04. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

<b>Geography</b>	<b>#Occupied housing units with no vehicles available</b>	<b>%Occupied housing units with no vehicles available</b>
Franklin County	1,120	5.20%
Henry County	1,676	7.50%
Virginia	194,153	6.40%

## Access to Health Care

Access to health services is one of Healthy People 2020's Leading Health Indicators and its goal is to improve access to comprehensive, quality health care services. Objectives related to this goal include:

- Increase the proportion of persons with a usual primary care provider (AHS-3)
- Increase the number of practicing primary care providers (AHS-4)
- Increase the proportion of persons who have a specific source of ongoing care (AHS-5)
- Reduce the proportion of individuals who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines (AHS-6)<sup>21</sup>

Disparities in access to health services directly affect quality of life and are impacted by having health insurance and ongoing sources of primary care. Individuals who have a medical home tend to receive preventive health care services, are better able to manage chronic disease conditions, and decrease emergency room visits for primary care services.<sup>22</sup>

### Health staffing shortages and designations

Franklin County and Henry County are designated Medically Underserved Areas (MUAs). Health Professional Shortage Areas (HPSAs) are present in portions of Franklin and Henry Counties for Primary Care, Dental, and Mental Health providers and are outlined in the following table.

#### Franklin County and Henry County Health Professional Shortage Areas

(Find Shortage Areas: HPSA by State & Country.(2014).U.S. Department of Health and Human Services: Health Resources and Services Administration. Retrieved from <http://hpsafind.hrsa.gov/HPSASearch.aspx> and Find Shortage Areas: MUA/P by State & County. (2014). U.S. Department of Health and Human Services: Health Resources and Services Administration. Retrieved from <http://muafind.hrsa.gov/index.aspx>.)

**\*HPSA Score is on a scale of 1-26. Larger scores = higher needs.**

Geography	MUA	Primary Care HPSA	PCP HPSA Score	Dental HPSA	Dental HPSA Score	Mental Health HPSA	MHP HPSA Score
Franklin County	Franklin Service Area	Franklin County	6	Low income - Franklin County	11	Low income - Piedmont Service Area (Franklin)	17
Henry County	Henry County/Martinsville City	Low Income - Martinsville City/Henry County (Henry)	15	Low Income - Henry County/Martinsville City	16	Low Income - Piedmont Service Area (Henry)	17

<sup>21</sup> US Department of Health & Human Services, Healthy People 2020, Topics and Objectives, [www.healthypeople.gov](http://www.healthypeople.gov)

<sup>22</sup> Closing the Divide: How Medical Homes Promote Equity in Health Care: Results from the Commonwealth Fund 2006 Health Care Quality Survey, Volume 62, June 27, 2007

## Health Services Professionals

There is a direct relationship between the number of primary care providers in a community and improved health outcomes. Having an adequate supply of primary care providers is a measure of access to care and can be determined by calculating the ratio of the population to one Full-time Equivalent (FTE) provider. It is important to note that this information may at times under- or over-estimate the number of providers in the area; does not take into account patient satisfaction, how care is provided and utilization of services by the patients; and finally this measure does not reflect how care is coordinated within a community.<sup>23</sup>

### Primary Care Providers Population Ratio, 2011

(HRSA Area Resource File. (2011). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2014/downloads>)

Geography	#PCP	PCP Rate	PCP Ratio
Virginia	6,021	74	1345:1
Franklin County	25	44	2257:1
Henry County	30	56	1791:1

### Primary Care Providers Population Ratio, 2012

(HRSA Area Resource File. (2012). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)

Geography	#PCP	PCP Rate	PCP Ratio
Virginia	6,091	74	1344:1
Franklin County	24	43	2350:1
Henry County	31	59	1709:1

### Primary Care Providers Population Ratio, 2013

(Area Health Resource File/American Medical Association. (2013). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Geography	#PCP	PCP Rate	PCP Ratio
Virginia	6,216	75	1329:1
Franklin County	26	46	2167:1
Henry County	33	63	1594:1

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<sup>23</sup> County Health Rankings, 2012 Data and Methods, <http://www.countyhealthrankings.org/health-factors/access-care> accessed 8/18/12

### **Mental Health Providers Population Ratio, 2013**

(HRSA Area Resource File. (2013). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2014/downloads>)

Geography	#MHP	MHP Rate	MHP Ratio
Virginia	8,025	100	998:1
Franklin County	5	9	11,282:1
Henry County	n/a	n/a	n/a

### **Mental Health Providers Population Ratio, 2014**

(CMS, National Provider Identification. (2014). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)

Geography	#MHP	MHP Rate	MHP Ratio
Virginia	11,406	138	724:1
Franklin County	8	14	7,042:1
Henry County	1	2	52,617:1

### **Mental Health Providers Population Ratio, 2015**

(CMS, National Provider Identification. (2015). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Geography	#MHP	MHP Rate	MHP Ratio
Virginia	12,162	146	685:1
Franklin County	10	18	5,636:1
Henry County	1	2	52,081:1

### Dentist Population Ratio, 2012

(HRSA Area Resource File. (2012). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2014/downloads>)

Geography	#Dentists	Dentist Rate	Dentist Ratio
Virginia	4,951	60	1,653:1
Franklin County	11	19	5,128:1
Henry County	30	57	1,766:1

### Dentist Population Ratio, 2013

(HRSA Area Resource File. (2013). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)

Geography	#Dentists	Dentist Rate	Dentist Ratio
Virginia	5,127	62	1611:1
Franklin County	11	20	5121:1
Henry County	31	59	1697:1

### Dentist Population Ratio, 2014

(Area Health Resource File/National Provider Identification file. (2014). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Geography	#Dentists	Dentist Rate	Dentist Ratio
Virginia	5,303	64	1570:1
Franklin County	10	18	5,636:1
Henry County	31	60	1680:1



## ***Source of Primary Care and Cost of Services***

Primary care services are the center of modern health care systems. According to Healthy People 2020, there are three main steps in accessing primary health care services. First, an individual needs to enter the health care system. This may happen in several different ways. For example, entry can occur as a new patient in a private practice or community health center or as an emergency room patient. Next, the individual needs to access location where the health care services they need are provided. This could be through a referral, a discharge from the hospital to another location, or from independent research. Finally, the individual needs to find a health care provider in the location they have chosen that they trust with their wellbeing and are able to communicate with. This is often the lengthiest part of the process, as doctors often have long wait times for appointments. Cultural differences and language barriers also contribute to the complicated process. Once these three steps are completed, a patient is defined as having successfully accessed the health system<sup>24</sup>.

Currently, one in fifteen American citizens depend on government-provided primary health services. This reliance on community health services has forced public health to grow rapidly in order to accommodate the nearly 22 million patients that utilize health centers today<sup>25</sup>. The wide range of services provided by primary care professionals makes it a cornerstone of the entire U.S. health care system. In order to make sure the services rendered to patients are high-quality and utilize new technology, access to primary care needs the support of a hefty budget<sup>42</sup>. The transition to electronic medical records has already occurred in nearly 90 percent of federally qualified health centers. This technological innovation has made it easier and faster to integrate new patients into health centers everywhere<sup>41</sup>.

Improving the accessibility of primary care health services in this country is an expensive and somewhat lengthy process, but the benefits of Americans having a primary care health professional to monitor their wellbeing outweigh the cost.

Having a usual source of care and cost of services greatly impacts an individual's ability to access primary care especially the low-income and uninsured populations living in a community. In the Service Area, more persons living in Franklin County (15.2%) and Henry County (13.7%) reported that they could not see a doctor due to cost than in Virginia as a whole.

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<sup>24</sup> Healthy People 2020. (2015). Access To Health Services. Retrieved from <http://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>

<sup>25</sup> Health Resources and Services Administration. (n.d.). Health Center Program: What Is A Health Center? Retrieved from <http://bphc.hrsa.gov/about/what-is-a-health-center/index.html>

## Percent of People Who Could Not See a Doctor Due to Cost

(Behavioral Risk Factor Surveillance System.(2006-2012). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)

Geography	% Couldn't Access
Virginia	11.50%
Franklin County	15.20%
Henry County	13.70%

### **Insurance Status**

There is a significantly greater number of uninsured individuals (13.6%), Medicaid (14.4%), and Medicare (22.8%) recipients in Franklin County as compared to the service area and statewide. There are fewer individuals with employer based insurance plans (49.9%) in Franklin County.

### **Health Insurance Status, 2010-2014**

(American Community Survey 5-Year Estimates, U.S. Census Bureau, 2010-2014, Table S2701. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml>)

	Virginia		Franklin County		Henry County	
	#	%	#	%	#	%
Medicaid	865,073	10.90%	8,076	14.40%	9,769	19.00%
Medicare	1,180,282	14.80%	12,765	22.80%	13,503	25.80%
Private	5,944,729	74.60%	37,586	67.10%	31,640	60.40%
Direct-Purchase	1,042,555	13.10%	10,970	19.60%	10,064	19.20%
Employer Based	4,799,029	60.20%	27,943	49.90%	22,780	43.50%
Uninsured	968,444	12.10%	7,613	13.60%	8,033	15.30%

### Less Than 200% FPL Health Insurance Status by Age, Virginia

(U.S Census Bureau, American Community Survey 3-Year Estimates, 2011-2013, Table B27016. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

2013	< 18 Years		18-64		65+		All Ages	
With health insurance	573569	90.74%	774657	61.42%	269020	98.60%	1617246	74.66%
Employer-based health insurance	161325	25.52%	392888	31.15%	60121	22.04%	614334	28.36%
Direct-purchase health insurance	33268	5.26%	119231	9.45%	94883	34.78%	247382	11.42%
Medicare	11901	1.88%	96393	7.64%	265435	97.29%	373729	17.25%
Medicaid	369825	58.51%	218111	17.29%	57610	21.12%	645546	29.80%
No health insurance	58519	9.26%	486662	38.58%	3810	1.40%	548991	25.34%
Total Number < 200% FPL	632088		1261319		272830		2166237	

### Less Than 200% FPL Health Insurance Status by Age, Franklin County

(U.S Census Bureau, American Community Survey 3-Year Estimates, 2011-2013, Table B27016. Retrieved from <http://factfinder.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t#none>)

	< 18 Years		18-64		65+		All Ages	
	#	%	#	%	#	%	#	%
With health insurance	4697	94.00%	6365	59.66%	3444	100.00%	14506	75.91%
Employer-based health insurance	828	16.57%	2730	25.59%	670	19.45%	4228	22.12%
Direct-purchase health insurance	154	3.08%	1041	9.76%	1381	40.10%	2576	13.48%
Medicare	0	0.00%	1286	12.05%	3408	98.95%	4694	24.56%
Medicaid	3725	74.54%	2022	18.95%	422	12.25%	6169	32.28%
No health insurance	300	6.00%	4304	40.34%	0	0.00%	4604	24.09%
Total Number < 200% FPL	4997		10669		3444		19110	

## Health Status of the Population

### Percent of Adults Reporting Fair to Poor Health and the Number of Poor Physical Health Days in the Past Month, 2014

(Behavioral Risk Factor Surveillance System (2014). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Geography	Poor or Fair Health	Poor Physical Health Days
Virginia	17	3.5
Franklin County	15	3.5
Henry County	20	4.2

### Percent of Adults Reporting Fair to Poor Health and the Number of Poor Physical Health Days in the Past Month, 2006-2012

(Behavioral Risk Factor Surveillance System. (2006-2012). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)

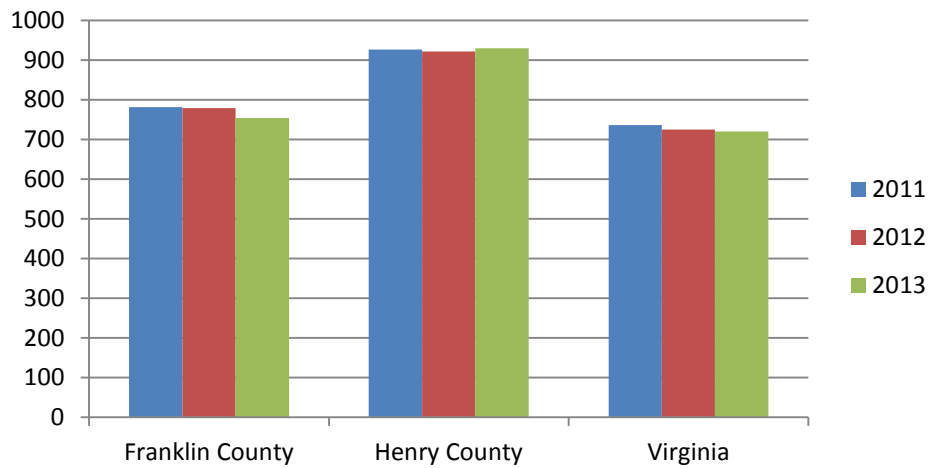
Geography	Poor or Fair Health	Poor Physical Health Days
Virginia	14	3.2
Franklin County	21	3.4
Henry County	26	5.2

## Death Rates

### Franklin County and Henry County Statistical Area Deaths Age-Adjusted Rates per 100,000

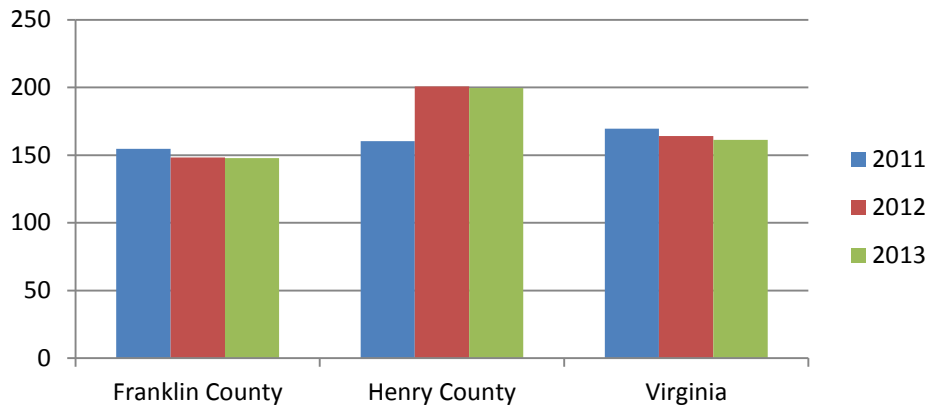
(Statistical Reports and Tables (2014). Virginia Department of Health: Division of Health Statistics. Retrieved from <http://www.vdh.virginia.gov/healthstats/stats.htm#pop>)

#### Total Deaths Per 100,000 Population



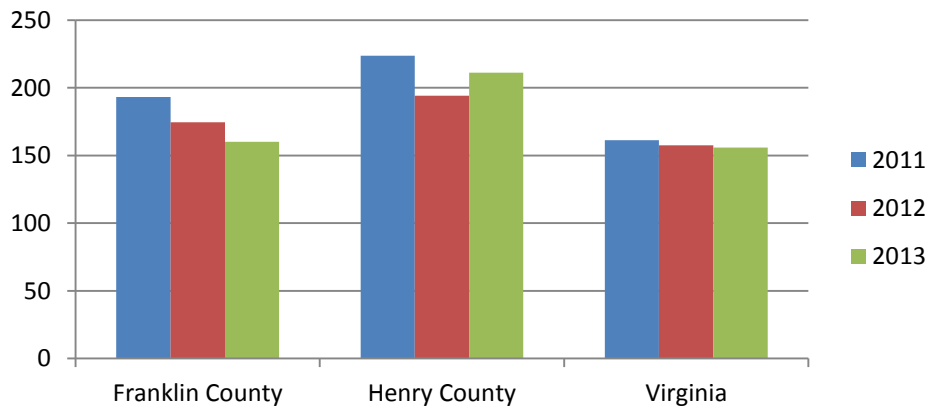
Geography	2011	2012	2013
Franklin County	780.9	778.6	753.9
Henry County	926.5	921.7	929.5
Virginia	735.8	724.9	720.1

## Malignant Neoplasms Deaths Per 100,000 Population



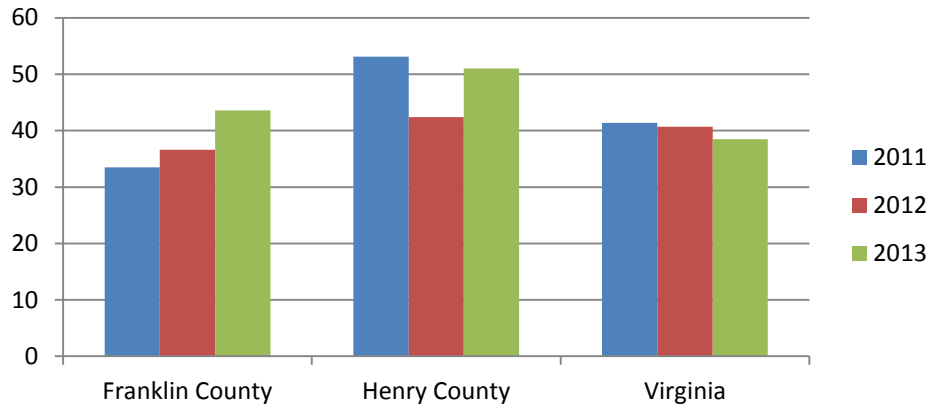
Geography	2011	2012	2013
Franklin County	154.7	148.2	147.7
Henry County	160.3	200.7	199.5
Virginia	169.5	164.1	161.3

## Heart Disease Deaths Per 100,000 Population



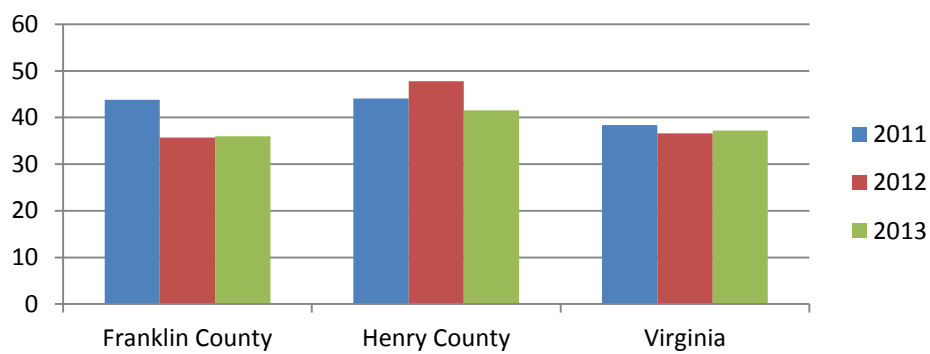
Geography	2011	2012	2013
Franklin County	193.2	174.6	160
Henry County	223.6	194.2	211.2
Virginia	161.3	157.4	155.9

## Cerebrovascular Disease Deaths Per 100,000 Population



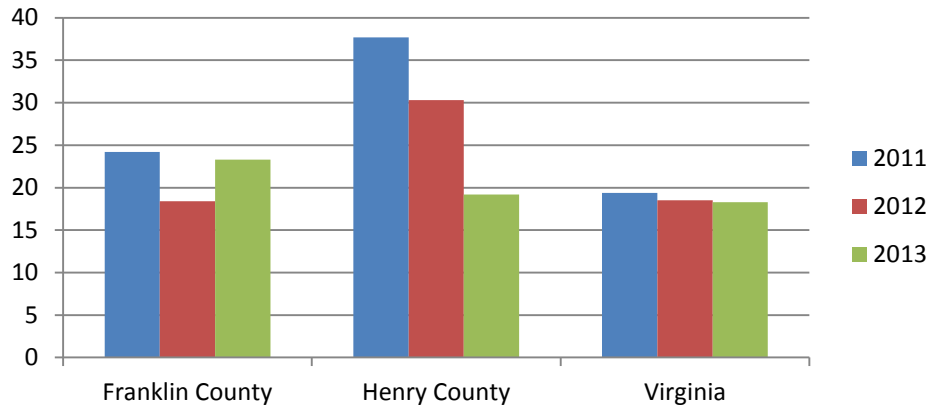
Geography	2011	2012	2013
Franklin County	33.5	36.6	43.6
Henry County	53.1	42.4	51
Virginia	41.4	40.7	38.5

## Chronic Lower Respiratory Disease Deaths Per 100,000 Population



Geography	2011	2012	2013
Franklin County	43.8	35.7	36
Henry County	44.1	47.8	41.5
Virginia	38.4	36.6	37.2

## Diabetes Mellitus Deaths Per 100,000 Population



Geography	2011	2012	2013
Franklin County	24.2	18.4	23.3
Henry County	37.7	30.3	19.2
Virginia	19.4	18.5	18.3



### ***Prevention Quality Indicators***

Prevention Quality Indicators (PQI) identify quality of care for ambulatory sensitive conditions, conditions for which good outpatient care can prevent hospitalization or which early intervention can prevent complications and severe disease.

### **Franklin County Statistical Area Age Adjusted Discharge Rates per 100,000**

(Virginia Atlas of Community Health, Atlas Data, HPD6, 2013, Retrieved from <http://atlasva.com/>)

<b>Age-Adjusted Discharge Rate per 100,000</b>	<b>Franklin County</b>	<b>Henry County</b>	<b>Virginia Total</b>
Adult Asthma PQI Discharges	N/A	N/A	14.60
Angina PQI Discharges	N/A	N/A	7.50
Bacterial Pneumonia PQI Discharges	204.50	197.20	186.70
Chronic Obstructive Pulmonary Disease (COPD) PQI Discharges	138.00	148.10	181.80
Congestive Heart Failure PQI Discharges	223.50	154.20	237.50
Diabetes PQI Discharges	149.60	114.90	141.50
Hypertension PQI Discharges	72.60	46.00	38.60

## **Mental Health and Substance Abuse**

At any moment, there are millions of people across the nation suffering from mental health and substance abuse problems. The American Psychological Association estimates that one-fourth of American citizens do not have access to any kind of mental health services. Without access to mental health services, many Americans are rendered incapable of living a healthy, productive life. Even the individuals with health insurance are at risk due to the fact that several insurance companies do not cover mental health and substance abuse services under their policies<sup>26</sup>. As the media continues to report crimes committed by people with poor mental health occurring every day, it is the nation's responsibility to increase access to mental health services for all.

The Affordable Care Act has recognized the need and responded with measures to widen access to all Americans. The key in the ACA's guidelines is the need to identify and treat mental illness early and effectively. More than 5,000 health care professionals across the nation are being supported by a part of the ACA that sends social workers and psychologists into schools in order to improve the overall social and behavioral atmosphere among at risk adolescents. The ACA is also investing in the creation of new hubs and websites that Americans can access to locate the services they need. By entering a few details such as location and the health issue they want to treat, people will be able to bypass the lengthy referral process that makes accessing mental health services so difficult<sup>27</sup>. The Affordable Care Act is a key player in the improvement of mental health services across the nation.

Accessing mental health and substance abuse services is a need seen across races, ages, genders, and geographic region. While the public works to fight the negative stigma that is associated with seeking help for mental health crises, health organizations need to commit their money and time to connecting those who are suffering to the resources they need and deserve to heal and rebuild their lives.

### **Number of Mentally Unhealthy Days in the Past Month**

(Behavioral Risk Factor Surveillance System. (2006-2012, 2014). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads> <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

<b>Geography</b>	<b>Mentally Unhealthy Days in the Past Month, 2006-2012</b>	<b>Mentally Unhealthy Days in the Past Month, 2014</b>
Virginia	3.10	3.30
Franklin County	3.60	3.40
Henry County	4.80	3.80

<sup>26</sup> American Psychological Association. (n.d.). Access To Mental Health Care. Retrieved from <http://www.apa.org/health-reform/access-mental-health.html>

<sup>27</sup> The White House Blog. (2013). Increasing Access To Mental Health Services. Retrieved from <https://www.whitehouse.gov/blog/2013/04/10/increasing-access-mental-health-services>

## Franklin County Metropolitan Statistical Suicide Deaths per 100,000 Population, 2011-2013

(Statistical Reports and Tables (2015). Virginia Department of Health: Division of Health Statistics. Retrieved from <http://www.vdh.virginia.gov/healthstats/stats.htm#pop>)

Geography	2011	2012	2013
Franklin County	14.90	19.20	18.10
Henry County	23.40	20.00	19.20
Virginia	12.50	12.50	12.20

## Franklin County Statistical Unintentional Injury Death Rate per 100,000 Population, 2011-2013

(Statistical Reports and Tables (2015). Virginia Department of Health: Division of Health Statistics. Retrieved from <http://www.vdh.virginia.gov/healthstats/stats.htm#pop>)

Geography	2011	2012	2013
Franklin County	54.40	68.70	28.00
Henry County	71.90	90.90	49.30
Virginia	33.40	33.30	33.00

## Franklin County Statistical Area Drug/Poison Deaths (age adjusted rates per 100,000), 2014

(Virginia Department of Health, Office of Chief Medical Examiner's Annual Report, 2013, Table 5.8, 5.11 and 5.15, Retrieved from <http://www.vdh.virginia.gov/medExam/documents/pdf/Annual%20Report%202013.pdf>)

Drug/Poison (deaths per 100,000 population)	Franklin County	Henry County	Virginia Total
Drug/Poison	16.00	19.20	11.40
Prescription Drugs (FHMO)	12.40	15.40	6.40
Heroin	1.80	0.00	2.70

## **Oral Health**

All too often, the importance of oral health maintenance is overshadowed by larger scale health care issues. For about 47 million people in the United States, these issues are left untreated until emergency care is required<sup>28</sup>. In fact, nearly 830,000 emergency room visits during 2009 could have been prevented if underserved populations had access to regular dental services in their community (The White House Blog, 2013). According to the Center for Disease Control, Non-Hispanic Blacks, Hispanics, and American Indians have the worst overall oral health in the nation<sup>29</sup>. In order to mend the oral health issues in this nation, it is absolutely necessary to change the way the public, government, and elected officials view dental health services.

The American Dental Association is leading the charge for transitioning the way oral health is prioritized in the U.S. They have found that nearly one fourth of American children don't have access to oral health services, and have devised several strategies to begin opening the right pathways for intervention. They are teaming up with community centers across the nation to implement programs to provide dental care and educate the underserved population about how to maintain their oral health<sup>30</sup>. A central goal in improving access to oral health services is increasing the prevalence of oral health literacy among all populations in the country.

Great strides have already been seen in child and adolescent oral health. New programs are being implemented across the nation that use school and after-school care centers to reach the vulnerable children without regular access to oral health services. New school-based dental sealant programs have stemmed from Healthy People 2020 initiatives<sup>31</sup>.

These programs recognize that tooth decay is a huge issue in underserved populations, and provide the thin plastic seals on chewing teeth that help children to minimize the number of dental caries they will face without regular oral care. Other regions are focusing on making every public water source in the nation contain the fluoride that is suggested for strong, healthy teeth<sup>47</sup>.

Eliminating oral health disparities requires medical professionals, medical supply companies, and local venues to volunteer their resources and expertise in order to care for the populations with poor oral health.

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<sup>28</sup> The White House Blog. (2013). Increasing Access To Mental Health Services. Retrieved from <https://www.whitehouse.gov/blog/2013/04/10/increasing-access-mental-health-services>

<sup>29</sup> Centers for Disease Control and Prevention. (2015-b). Disparities in Oral Health. Retrieved from [http://www.cdc.gov/oralhealth/oral\\_health\\_disparities/index.htm](http://www.cdc.gov/oralhealth/oral_health_disparities/index.htm)

<sup>30</sup> American Dental Association. (2015). Action For Dental Health: Breaking Down Barriers. Retrieved from <http://www.ada.org/en/public-programs/action-for-dental-health/breaking-down-barriers>

<sup>31</sup> Healthy People 2020. (2015-b). Access To Health Services. Retrieved from <http://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>

### Adults age 18+ with No Dental Visit in the Last Year, 2013

(Virginia Atlas of Community Health, 2013, , Retrieved from <http://www.atlasva.com/>)

	Franklin County	Henry County	Virginia Total
Percent Adults age 18+ with No Dental Visit in the Last Year	21%	21%	22%

### Youth (age 0-17) with No Dental Visit in the Last Year, 2013

(Virginia Atlas of Community Health, 2013, , Retrieved from <http://www.atlasva.com/>)

	Franklin County	Henry County	Virginia Total
Percent Youth age 18+ with No Dental Visit in the Last Year	20%	21%	21%

### Youth (age 0-17) with Dental Caries in their Primary or Permanent Teeth, 2013

(Virginia Atlas of Community Health, 2013, , Retrieved from <http://www.atlasva.com/>)

	Franklin County	Henry County	Virginia Total
Percent Youth (age 0-17) with Dental Caries in their Primary or Permanent Teeth	16%	18%	18%

### Youth (age 0-17) with Teeth in Fair/Poor Condition, 2013

(Virginia Atlas of Community Health, 2013, , Retrieved from <http://www.atlasva.com/>)

	Franklin County	Henry County	Virginia Total
Percent Youth (age 0-17) with Teeth in Fair/Poor Condition	5%	6%	6%

## ***Prevention and Wellness***

Well-being is a concept whose definition varies greatly between individuals. Essentially, well-being involves the ability to see your own life in a positive way and feeling good. Well-being and wellness are interchangeable terms, and encompass different aspects of a person's life. Some specific aspects of well-being include physical, psychological, developmental, and emotional well-being<sup>32</sup>. In health care, measuring wellness is done by collecting data in order to evaluate community behaviors, determine the average life span and top causes of death, study regional access to healthy food and individual activity levels, and many other categories involving the way humans live<sup>33</sup>.

Wellness in America is at a historical low in several areas. Obesity runs rampant across almost every race and region in the country<sup>49</sup>. Food deserts, or areas where there is virtually no access to healthy and local food choices, are becoming a normal presence in urban areas across the nation. People continue to partake in risky health behaviors like binge-drinking and drug use despite knowing the negative impact it has on the body as a whole<sup>48</sup>. In order to reverse the negative trend that well-being is following, individuals and organizations alike must change everything about the way the average person spends their day. Learning what a healthy lifestyle is can take countless different forms, whether it is a class or a festival or a school presenter<sup>49</sup>. As communities embrace the concept that they have the power to change their state of wellness, it will become easy to implement the right programs and initiatives for the area. Wellness is core to human life and the task of monitoring and improving it is highly important in order to ensure that future generations will have the opportunity to thrive.

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<sup>32</sup> Centers for Disease Control and Prevention. (2015-e). Health-Related Quality Of Life: Well-Being Concepts. Retrieved from <http://www.cdc.gov/hrqol/wellbeing.htm>

<sup>33</sup> U.S. Department of Health and Human Services. (2015-b). Prevention. Retrieved from <http://www.hhs.gov/safety/>

## County Health Rankings

Beginning in 2010, the County Health Rankings have analyzed localities in all 50 states using measures to determine how healthy people are and how long they live. These measures include (1) health outcomes which look at how long people live (mortality) and how healthy people feel while alive (morbidity); and (2) health factors which represent what influences the health of a county including health behaviors, clinical care, social and economic factors, and physical environment.<sup>34</sup> The lower the overall ranking is, the healthier the community.

Henry County has consistently been ranked poorly in both health outcome and health factors.

County Health Rankings--Health Outcomes (out of 133)			
Locality	2014 Rank	2015 Rank	2016 Rank
Franklin	71	70	67
Henry County	127	125	127

County Health Rankings--Health Factors (out of 133)			
Locality	2014 Rank	2015 Rank	2016 Rank
Franklin	49	49	59
Henry County	120	120	112

### Health Risk Factors

Low education levels in the region together with high poverty rates result in the inability for many to understand the complexities of health care resulting in poor compliance with disease management goals, preventive services and screenings, and follow-up with providers.

High blood pressure and high cholesterol are two of the controllable risk factors for heart disease and stroke. Reducing the proportion of adults with hypertension to 26.9% (HDS-5) and high blood cholesterol levels to 13.5% (HDS-7) are two targets for the Healthy People 2020 goal to improve cardiovascular health. The percentage of Franklin and Henry County residents who reported having hypertension or high blood cholesterol levels were in line with statewide averages. Both local and statewide rates exceeded Healthy People 2020.<sup>35</sup>

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<sup>34</sup> University of Wisconsin Population Health Institute & the Robert Wood Johnson Foundation, County Health Rankings, [www.countyhealthrankings.org](http://www.countyhealthrankings.org), 2012

<sup>35</sup> Virginia Department of Health, Office of Family Health Services, Behavior Risk Factor Surveillance System, 2010

## Virginia Behavior Risk Factor Surveillance System Health Risk Factors- High Blood Pressure and Cholesterol, 2013

(Risk Profiles HPD12 <http://atlasva.org/data/>)

Adult Age 18+ Health Risk Profile	Franklin County	Henry County	Virginia
High Blood Pressure (told by a doctor or other health professional)	31.00%	31.00%	30.00%
High Cholesterol (told by a doctor or other health professional)	36.00%	35.00%	35.00%

One of the Healthy People 2020 Leading Health Indicators addresses the effects of tobacco and a goal to “reduce illness, disability, and death related to tobacco use and secondhand smoke exposure”. One of its key objectives is to reduce the number of adults who are current smokers to 12% (TU-1).

## Virginia Behavior Risk Factor Surveillance System Health Risk Factors-Adult Smoking

(Behavioral Risk Factor Surveillance System. (2006-2012), (2014). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2015/downloads>)  
<http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Geography	% Adults who smoke daily or most days, 2006 - 2012	% Adults who smoke daily or most days, 2014
Virginia	18%	20%
Franklin County	22%	17%
Henry County	26%	20%



## Nutrition, Weight Status, and Physical Activity

A healthy body weight, good nutrition, and physical activity are positive predictors of good health and are a Healthy People 2020 Leading Health Indicator. The prevalence of overweight and obesity has increased tremendously in the past 30 years and is at epidemic proportions in the United States. These increasing rates raise concern because of their implications on health and their contribution to obesity-related diseases like diabetes and hypertension.

### Virginia Behavior Risk Factor Surveillance System Health Risk Factors-Obesity and Physical Inactivity

(National Center for Chronic Disease Prevention and Health Promotion, Division of Diabetes Translation. (2010, 2011, 2012) and (CDC Diabetes Interactive Atlas. (2010, 2011, 2012).

Retrieved from <http://www.countyhealthrankings.org/app/virginia/2014/downloads>,  
<http://www.countyhealthrankings.org/app/virginia/2015/downloads>,  
<http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Locality	2010		2011		2012	
	% Obese	% No Leisure Time Physical Activity	% Obese	% No Leisure Time Physical Activity	% Obese	% No Leisure Time Physical Activity
Virginia	28%	23%	28%	22%	27%	22%
Franklin County	29%	26%	29%	24%	27%	23%
Henry County	30%	33%	31%	35%	32%	36%

### Access to Recreational Facilities, 2014

(United States Department of Agriculture. 2014. Food Environment Atlas: Data Access and Documentation Downloads. Economic Research Service. Retrieved from <http://ers.usda.gov/data-products/food-environment-atlas/data-access-and-documentation-downloads.aspx>)

Access to Recreational Facilities		
Geography	Rec. Facs.	Rec. Fac. Rate
Franklin	5	8.86%
Henry	5	9.44%

## Fast Food Restaurant Rate per 1,000 population

(USDA Food Environment Index. (2012) Retrieved from <http://ers.usda.gov/data-products/food-environment-atlas/data-access-and-documentation-downloads.aspx>)

Geography	Rate of Fast Foods per 1,000 population	Number of Fast Food Restaurants
Virginia		
Henry County	0.53	28
Franklin County	0.50	28

Access to healthy foods directly impacts an individual's (and community's) ability to consume fruits, vegetables, and whole grains. Increasing the proportion of Americans who have access to a food retail outlet that sells a variety of foods encouraged by the Dietary Guidelines is an objective of Healthy People 2020 (NWS-4).

Despite the prevalence of food deserts in the United States, there is no universally recognized definition of a "food desert". The U.S. Department of Agriculture (USDA) and the Department of Health and Human Services (HHS) define food deserts as "a census tract with a substantial share of residents who live in low-income areas that have low levels of access to a grocery store or healthy, affordable food retail outlet<sup>36</sup>". Food deserts and food insecurity go hand-in-hand; individuals living in food deserts are often food insecure.

Individuals who are food insecure are unsure where their food will come from and are more likely to have low access to healthy, nutritious foods, such as fruits and vegetables, whole grains, and dairy<sup>37</sup>. Fruit and vegetable consumption, in particular, is a key component of disease prevention. Individuals who consume more fruits and vegetables are more likely to maintain a healthy body weight and are less likely to develop chronic diseases, such as diabetes, heart disease, or cancer<sup>38</sup>. However, national studies have consistently shown that lower-income individuals consume fewer servings of fruits and vegetables than higher-income individuals<sup>39</sup> with the most often cited barrier being cost<sup>40</sup>. These health behaviors not only fuel disparities in chronic disease prevalence, but are driven by preexisting disparities in income, education, and access to food.

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<sup>36</sup> U.S. Department of Agriculture. "Food deserts". Updated 2014. Accessed January 23, 2015. Retrieved from <http://apps.ams.usda.gov/fooddeserts/fooddeserts.aspx>.

<sup>37</sup> Food Deserts in Virginia, Recommendations from the Food Desert Task Force. Virginia Tech and Virginia State University, January 2014.

<sup>38</sup> U.S. Department of Health and Human Services, U.S. Department of Agriculture. Dietary Guidelines for Americans. 7th Ed. U.S. Government Printing Office; Washington, D.C.: December 2010.

<sup>39</sup> Centers for Disease Control and Prevention. State-specific trends in fruit and vegetable consumption among adults – United States, 2000-2009. MMWR, Morb Mortal Wkly Rep. 2010; 59:1125-1130.

<sup>40</sup> Larson NI, Story MT, and Nelson MC. Experimental analysis of neighborhood effects. *Econometrica*. 2009, 75(1):83-119.

Recently, studies have indicated that individuals with better access to a supermarket or large grocery store are more likely to eat healthier foods<sup>41</sup>. Furthermore, researchers have shown that fruit and vegetable intake in low-income, low food access areas increases when access to healthy foods increases, such as at the opening of a new grocery store or modified corner store<sup>42</sup>. In addition to increased consumption of fruits and vegetables, better access to large grocery stores or supermarkets is also associated with decreased risk of obesity while better access to convenience stores is associated with a higher risk of obesity and obesity-related chronic diseases, such as diabetes and heart disease<sup>52</sup>. Similar results have been associated with increased access to farmer's markets. In one study of adolescent girls, greater access to farmer's markets and produce vendors was associated with decreased risk of overweight and obesity over a three-year period<sup>43</sup>.

Decreasing hunger, food insecurity, and food deserts in the United States has been repeatedly prioritized in federal and local initiatives including *Healthy People 2020*, First Lady Michelle Obama's *Let's Move* campaign, and more recently, First Lady of Virginia Dorothy McAuliffe's childhood nutrition and food security initiative. Despite this, the U.S. Department of Agriculture's Economic Research Service estimates that 14.3% of American households, or 43.5 million people, were food insecure at some point in 2013<sup>44</sup> <sup>45</sup> with 23.5 million people (7.5%), including 6.5 million children, living in food deserts<sup>46</sup>. In Virginia, food deserts exist in all regions of the state, though some regions are more severely affected than others. In 2012, 12.7% of Virginians were food insecure though many localities, particularly those situated in Central and Southwestern Virginia, reported food insecurity rates much higher than the state average. Similarly, many localities in Central and Southwestern Virginia reported low-access rates, the number of people that live more than a mile from a supermarket in urban areas or 10 miles in rural areas, greater than the state average of 17.8% or the national average of 7.3%<sup>57</sup>.

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<sup>41</sup> Larson NI, Story MT, and Nelson MC. Experimental analysis of neighborhood effects. *Econometrica*. 2009, 75(1):83-119.

<sup>42</sup> Economic Research Service. Access to Affordable and Nutritious Foods: Measuring and Understanding Food Deserts and Their Consequences, Report to Congress, U.S. Department of Agriculture, June 2009.

<sup>43</sup> Leung CW, Laraia BA, Kelly M, Nickleach D, Adler NE, Kushi LH, Yen IH. The influence of neighborhood food stores on change in young girls' body mass index. *Am J Prev Med* 2011; 41(1):43-51.

<sup>44</sup> Coleman-Jenson A, Gregory C, and Singh A. Household food security in the United States in 2013, ERR-173, U.S. Department of Agriculture, Economic Research Service, September 2014.

<sup>45</sup> U.S. Census Bureau. State and County Quickfacts: USA. Updated December 2014. Accessed January 25, 2015. Retrieved from <http://quickfacts.census.gov/qfd/states/00000.html>.

<sup>46</sup> Food Deserts in Virginia, Recommendations from the Food Desert Task Force. Virginia Tech and Virginia State University, January 2014.

## Access to Healthy Foods

(USDA Food Environment Atlas, Map the Meal Gap. (2010). Retrieved from <http://www.countyhealthrankings.org/app/virginia/2016/downloads>)

Locality	# Limited Access	% Limited Access
Franklin	3,988	7%
Henry	3,600	7%
Virginia	295,610	4%

In Franklin County, there are four census tracts determined to be food deserts. Food deserts are defined as an area where residents are poor, lack transportation and have no supermarkets to supply healthy food choices.

## Census Tract Food Deserts

(United States Department of Agriculture, Economic Research Service, Food Access Research Atlas, 2013, Retrieved from <http://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data.aspx>)

Locality	Census Tract	Total Population	Percentage of people with low access to a supermarket or large grocery store	Number of people with low access to a supermarket or large grocery store	Percentage of total population that is low-income and has low access to a supermarket or large grocery store	Number of low-income people with low access to a supermarket or large grocery store
Franklin	20500	8135	99.99%	8133.96	26.65%	2167.79
Franklin	20600	3774	100.00%	3774.00	39.57%	1493.35
Franklin	20800	6566	83.44%	5478.89	40.73%	2674.39
Franklin	20900	6964	100.00%	6964.00	45.85%	3193.01
Henry	11200	3768	100.00%	3768.00	54.70%	2060.98

\*People at 1 mile--an urban tract with at least 500 people or 33% percent of the population living at least 1 mile from the nearest supermarket, supercenter, or large grocery store

### ***Clinical Preventive Screenings***

According to the National Cancer Institute, deaths can be greatly reduced for breast, cervical, colon, and rectal cancer through early detection and screening tests. In Franklin County, more women 18 years and older had no PAP test in the past 3 years as compared statewide, more women had no mammogram in the past 3 years, and more adults 50 years of age and older had no colorectal screenings within the past two years.

### **Virginia Behavior Risk Factor Surveillance System Health Risk Factors- Cancer Screenings, 2013**

(Risk Profiles HPD12 <http://atlasva.org/data/>)

<b>Adult age 18+ Health Risk Profile</b>	<b>Franklin</b>	<b>Henry</b>	<b>Virginia</b>
Percent of women with no Pap test in the past 3 years	18.00%	21.00%	16.00%
Percent of women 40 and older with no mammogram in past 2 years	29.00%	29.00%	28.00%
Percent of adults 50 and older with no sigmoidoscopy or colonoscopy	29.00%	36.00%	28.00%

## Maternal, Infant, and Child health

### Prenatal and Perinatal Health Indicators

Maternal and child health is a Healthy People 2020 Leading Health Indicator with the goal to “improve the health and well-being of women, infants, children and families”. Infant mortality is affected by many factors including the socioeconomic status and health of the mother, prenatal care, birth weight of the infant, and quality of health services delivered to both the mother and child and is a key predictor of the health of a community.

Healthy People 2020 Objectives and targets are as follows:

- MICH- 1.3: Reduce the rate of infant deaths (within 1 year) to 6.0 infant deaths per 1,000 live births
- MICH- 8.1: Reduce low birth weight (LBW) to 7.8% of live births
- MICH- 10.1: Increase the proportion of pregnant women who receive early and adequate prenatal care to 77.9%

### Late Entry into Prenatal Care, Franklin County, 2013

(Virginia Department of Health, Statistical Reports and Tables, 2011-2013, Retrieved from <http://www.vdh.virginia.gov/HealthStats/stats.htm>,  
<http://www.vdh.virginia.gov/HealthStats/documents/2010/pdfs/VDHS13.pdf>)

Prenatal & Perinatal Health Indicators	Franklin	Henry	Virginia
Late entry into prenatal care (entry after first trimester) Percent of all births	4.00%	19.00%	13.20%

### Prenatal & Perinatal Health Indicators, Franklin County, 2013

(Virginia Department of Health, Statistical Reports and Tables, 2013, 2014, Retrieved from <http://www.vdh.virginia.gov/HealthStats/stats.htm>)

	Franklin	Henry	Virginia
Low Birth Weight Rate	11.2	12	8
Infant Mortality Rate (Number per 1,000 births)	6.3	14.3	6.2

### Prenatal & Perinatal Health Indicators, Franklin County, 2013

(Virginia Department of Health, Statistical Reports and Tables, 2011-2013. Retrieved from <http://www.vdh.virginia.gov/HealthStats/stats.htm>)

Infant Mortality Rates per 1,000 live births			
	2011	2012	2013
Franklin County	5.7	11.3	6.3
Henry County	6.2	10.4	14.3
Virginia	6.7	6.3	6.2

## Prenatal & Perinatal Health Indicators, Franklin County, 2013

(Virginia Department of Health, Statistical Reports and Tables, 2013, Retrieved from <http://www.vdh.virginia.gov/HealthStats/stats.htm>)

Total Live Births Rates by Race, 2013	Franklin	Henry	Virginia
Total Live Birth Rates per 1,000	8.4	9.3	12.3
Live Birth Rates per 1,000 (White)	8.2	9.3	10.9
Live Birth Rates per 1,000 (Black)	9.8	7.9	12.8
Live Birth Rates per 1,000 (Other)	14.2	44.1	25.4

Total Infant Deaths by Race, 2013	Franklin	Henry	Virginia
Infant Death Rates per 1,000	6.3	14.3	6.2
Infant Death Rates per 1,000 (White)	4.8	10.7	5.2
Infant Death Rates per 1,000 (Black)	20.8	31.6	12.2
Infant Death Rates per 1,000 (Other)	No data	No data	2.2

## Prenatal & Perinatal Health Indicators, Franklin County, 2013

(Virginia Department of Health, Statistical Reports and Tables, 2013, Retrieved from <http://www.vdh.virginia.gov/HealthStats/stats.htm>)

Teen Pregnancy Rate, 2013				
Pregnancy Rate per 1,000 Females 10-19 (per 1,000 births)	Total	White	Black	Other
Franklin County	14.9	No data	17.7	20.4
Henry County	19.3	21.2	12.2	46.5
Virginia	14.4	10.8	22.6	20.4

### Preventive Screenings

#### Reported Number of Children Tested for Elevated Blood Lead Levels under 36 months

(Virginia Department of Health, Lead-Safe Virginia Program, 2014, Retrieved from <http://166.67.66.226/leadsafe/documents/pdf/2014%20Surveillance%20Report.pdf>)

	Franklin	Henry	Virginia
Population <36 Months	1881	1721	303439
Number Confirmed Elevated	0	0	185

## ***Infectious diseases***

### ***HIV Infection Prevalence and Other Sexually Transmitted Infections Rate***

One of the Healthy People 2010 goals is to “promote healthy sexual behaviors, strengthen community capacity, and increase access to quality services to prevent sexually transmitted diseases in their complications”.

The HIV infection prevalence in this region is much lower than the state as a whole.

#### **Franklin County HIV Infection Prevalence, 2015**

(Virginia Department of Health. (2015). Virginia HIV Surveillance Annual Report. Retrieved from [http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/Programs/HIV-AIDS/SurveillanceProgram/documents/pdf/Annual\\_Report\\_2015.pdf](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/Programs/HIV-AIDS/SurveillanceProgram/documents/pdf/Annual_Report_2015.pdf))

	Franklin	Henry	VA
Rate of all cases of HIV disease (per 100,000)	120.7	117.1	298.5

#### **Franklin County Sexually Transmitted Infection Rates (per 100,000), 2014**

(Virginia Department of Health. (2014). Virginia STI Surveillance Annual Report. Retrieved from [http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/DAta/QuarterlySurveillanceReport2\\_Q\\_15.htm#TES](http://www.vdh.virginia.gov/epidemiology/DiseasePrevention/DAta/QuarterlySurveillanceReport2_Q_15.htm#TES))

Locality	Early Syphilis	Gonorrhea	Chlamydia
Franklin County	7.1	95.9	260.9
Henry	1.9	150.1	338.3
Virginia	6.7	98.4	426.7

#### **Franklin County Number of Reported Tuberculosis (TB) Rates per 100,000 2013-2014**

(Virginia Department of Health, TB Surveillance Reports, 2010-2014, Retrieved from <http://www.vdh.virginia.gov/TB/EpidemiologyandSurveillance.htm>)

Locality	2013	2014
Franklin County	0	3.5
Henry	1.9	0
Virginia	2.2	2.9



## *Social environment*

### **Franklin County Rate of Child Abuse and Neglect (per 1,000 children), 2012-2013**

(Virginia Department of Social Services, Child Protective Reports & Studies, 2012-2013, Retrieved from [http://www.dss.virginia.gov/geninfo/reports/children/cps/all\\_other.cgi](http://www.dss.virginia.gov/geninfo/reports/children/cps/all_other.cgi))

Rate of Child Abuse and Neglect (per 1,000 children)		
Geography	2012	2013
Franklin County	0.61	3.47
Henry	6.5	6.05

## Community Health Need Prioritization

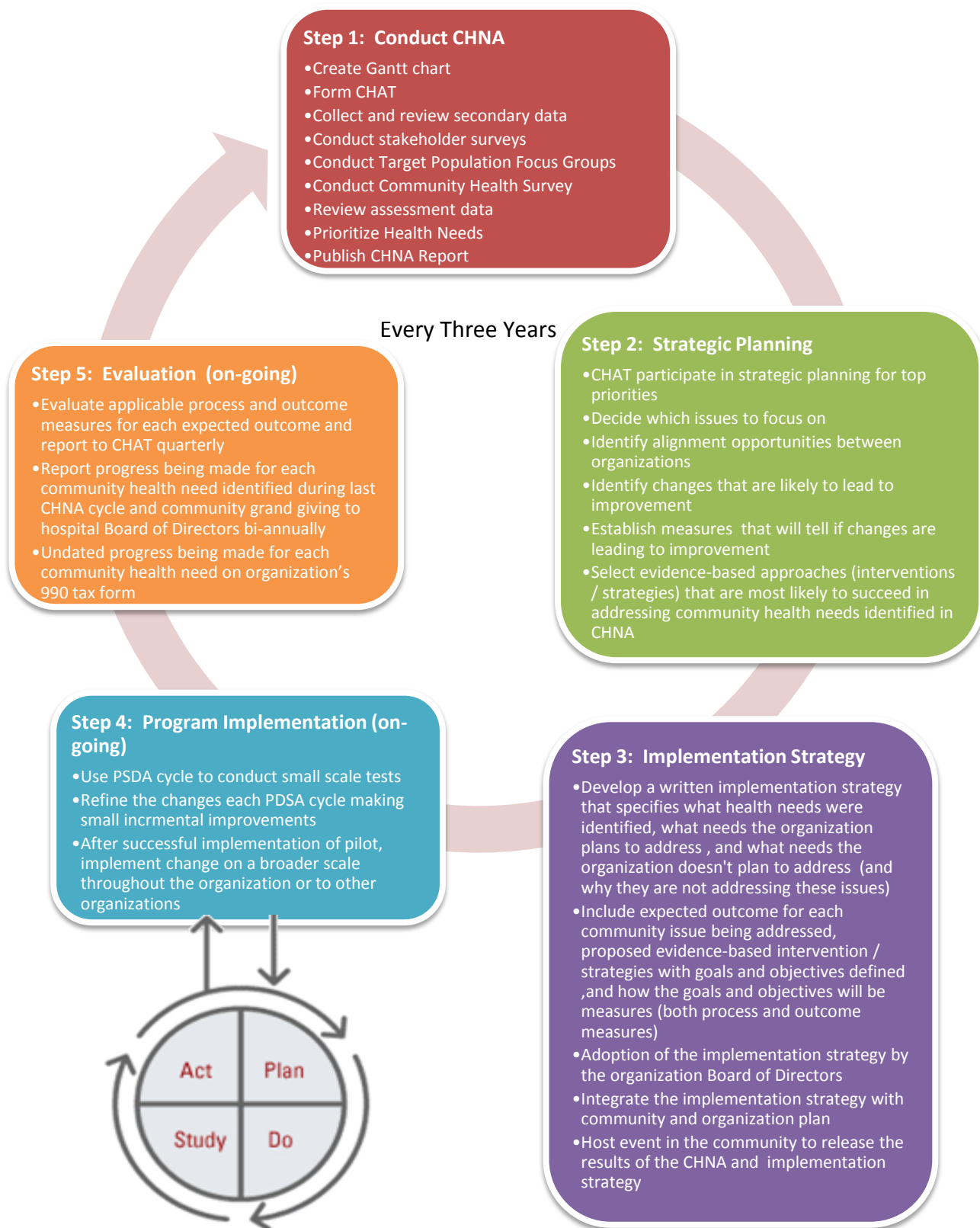
CHAT members participated in a prioritization activity in July 2016 after all primary and secondary data was presented. To quantitatively determine health needs, CHAT members were asked to rank the top ten pertinent community needs, with one being the most pertinent. Next, on a scale of 1-5, CHAT members were asked to assign a feasibility and potential impact score for each of the ranked needs. This information is used to inform strategic planning. (See Appendix 7: Prioritization Worksheet for an example of the tool used.)

The results of the prioritization activity found the following issues as the top prioritized need for the service area:

<b>2016 Franklin Community Health Needs Assessment Prioritization of Needs</b>	<b>Rank <i>Frequency</i></b>	<b>Rank <i>Average</i></b>	<b>Feasibility <i>Average</i></b>	<b>Potential Impact <i>Average</i></b>
Access to primary care	7	2.1	1	1.1
Access to mental health counseling / substance abuse services	7	2.6	3.1	2
Lack of reliable transportation	6	2.5	3.3	1.7
Access to adult dental care	6	4	3.5	2.5
Value not placed on preventative care and chronic disease management	5	7.2	2.8	2.4
High uninsured population	4	5	4	2
High prevalence of substance abuse (alcohol, illegal & prescription drugs)	4	5.5	3.25	3.25
Alcohol and illegal drug use	4	7	3	3
Improved coordination of care across the health and human services sector	4	7.25	1.75	1.25
Stigma with mental health and substance abuse services	3	5	3.3	2

# Appendices

## Appendix 1: Community Health Improvement Process



## Appendix 2: Gantt Chart

Tasks	Assigned To:	Start Date	End Date	Duration (working days)	% complete
<b>2016 Franklin County CHNA</b>		03-29 Tue	07-22 Fri	83	83%
Create Gantt Chart	Amy	04-04 Mon	04-04 Mon	1	100%
Identify additional CHAT members	Management Team	03-29 Tue	04-12 Tue	1	100%
Collect Secondary Data for CHNA	Amy + Interns	04-04 Mon	06-10 Fri	49	100%
Pre-CHAT #1 Work	Amy + Aaron	04-04 Mon	04-18 Mon	10	100%
Schedule ALL Meetings	Kenya	04-04 Mon	04-08 Fri	4	100%
CHAT #1 Meeting	CHAT	05-04 Wed	05-04 Wed	1	100%
Survey Distribution	All	05-02 Mon	06-01 Wed	22	100%
Focus Groups	Amy + Gail + Aaron	05-02 Mon	05-31 Tue	21	100%
CHAT #2 Meeting	CHAT	05-24 Tue	05-24 Tue	1	100%
Analyze Survey Data	Amy	06-01 Wed	06-15 Wed	10	100%
CHAT Meeting #3- Data and Prioritization	CHAT	06-30 Thu	06-30 Thu	1	100%
Management Team Meeting	Management Team	06-27 Mon	07-06 Wed	1	100%
Final CHNA Report	Carilion Clinic	06-17 Fri	07-08 Fri	15	75%
CHAT Strategic Plan	CHAT	07-11 Mon	07-11 Mon	1	100%
Create Implementation Strategy	Management Team	06-17 Fri	07-11 Mon	16	10%
Communication Plan and Community Forum	Carilion Clinic / HFC	07-11 Mon	07-22 Fri	9	50%

## Appendix 3: Community Health Survey

### FRANKLIN COUNTY / BASSETT COMMUNITY HEALTH SURVEY

#### ACCESS and BARRIERS TO HEALTHCARE

1. Is there a specific doctor's office, health center, or other place that you usually go if you are sick or need advice about your health?  Yes  No
- Skip to question 2 if you answered **No**
  - If you answered **Yes**
    - Is this where you would go for new health problems?  Yes  No
    - Is this where you would go for preventive health care, such as general check-ups, examinations, and immunizations (shots)?  Yes  No
    - Is this where you would go for referrals to other health professions when needed?  Yes  No
2. Do you use medical care services?  Yes  No
- If yes, where do you go for medical care? (Check all that apply)
- |   |   |
|---|---|
| <input type="checkbox"/> Doctor's Office  | <input type="checkbox"/> Pharmacy Clinic                  |
| <input type="checkbox"/> Bassett Family Practice  | <input type="checkbox"/> Salem VA Medical Center          |
| <input type="checkbox"/> Emergency Room / Call 911  | <input type="checkbox"/> Tri-Area Community Health Center |
| <input type="checkbox"/> Free Clinic (e.g. Free Clinic of Franklin County)                  | <input type="checkbox"/> Urgent Care / Walk in Clinic     |
| <input type="checkbox"/> Health Department (e.g. Franklin County, Henry/Martinsville, etc.) | <input type="checkbox"/> Other: _____                     |
3. Do you use dental care services?  Yes  No
- If yes, where do you go for dental care? (Check all that apply)
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Dentist's office                       | <input type="checkbox"/> Free Clinic (e.g. Free Clinic of Franklin County) | <input type="checkbox"/> Urgent Care/ Walk in Clinic |
| <input type="checkbox"/> Community Dental Clinic (Martinsville) | <input type="checkbox"/> Mission of Mercy Project                          | <input type="checkbox"/> Other: _____                |
| <input type="checkbox"/> Emergency Room / Call 911              | <input type="checkbox"/> New Horizons Healthcare                           |  |
4. Do you use mental health, alcohol abuse, or drug abuse services?  Yes  No
- If yes, where do you go for mental health, alcohol abuse, or drug abuse services? (Check all that apply)
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Doctor/Counselor's Office    | <input type="checkbox"/> Intercept Youth Service     | <input type="checkbox"/> Urgent Care / Walk in Clinic |
| <input type="checkbox"/> Emergency Room / Call 911    | <input type="checkbox"/> New Horizons Healthcare     | <input type="checkbox"/> Other: _____                 |
| <input type="checkbox"/> Family Preservation Services | <input type="checkbox"/> Piedmont Community Services |   |
5. What do you think are the five most important issues that affect health in our community? (Please check five)
- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Access to healthy foods                                   | <input type="checkbox"/> Environmental health (e.g. water quality, air quality, pesticides, etc.) | <input type="checkbox"/> Not getting "shots" to prevent disease              |
| <input type="checkbox"/> Accidents in the home (ex. falls, burns, cuts)            | <input type="checkbox"/> Gang activity  | <input type="checkbox"/> Not using seat belts / child safety seats / helmets |
| <input type="checkbox"/> Aging problems  | <input type="checkbox"/> Heart disease and stroke   | <input type="checkbox"/> Overweight / obesity                                |
| <input type="checkbox"/> Alcohol and illegal drug use                              | <input type="checkbox"/> High blood pressure  | <input type="checkbox"/> Poor eating habits                                  |
| <input type="checkbox"/> Bullying  | <input type="checkbox"/> HIV / AIDS   | <input type="checkbox"/> Prescription drug abuse                             |
| <input type="checkbox"/> Cancers   | <input type="checkbox"/> Homicide   | <input type="checkbox"/> Sexual assault                                      |
| <input type="checkbox"/> Cell phone use / texting and driving / distracted driving | <input type="checkbox"/> Infant death   | <input type="checkbox"/> Stress  |
| <input type="checkbox"/> Child abuse / neglect                                     | <input type="checkbox"/> Lack of exercise   | <input type="checkbox"/> Suicide   |
| <input type="checkbox"/> Dental problems   | <input type="checkbox"/> Lung disease   | <input type="checkbox"/> Teenage pregnancy                                   |
| <input type="checkbox"/> Diabetes  | <input type="checkbox"/> Mental health problems   | <input type="checkbox"/> Tobacco use / smoking                               |
| <input type="checkbox"/> Domestic violence   | <input type="checkbox"/> Neighborhood safety  | <input type="checkbox"/> Unsafe sex  |
|  |   | <input type="checkbox"/> Other: _____  |

**6. Which health care services are hard to get in our community? (Check all that apply)**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Adult dental care                                      | <input type="checkbox"/> End of life / hospice / palliative care | <input type="checkbox"/> Programs to stop using tobacco products    |
| <input type="checkbox"/> Alternative therapy (ex. herbal, acupuncture, massage) | <input type="checkbox"/> Family doctor                           | <input type="checkbox"/> Specialty care (ex. heart doctor)          |
| <input type="checkbox"/> Ambulance services                                     | <input type="checkbox"/> Family planning / birth control         | <input type="checkbox"/> Substance abuse services –drug and alcohol |
| <input type="checkbox"/> Cancer care  | <input type="checkbox"/> Immunizations                           | <input type="checkbox"/> Urgent care / walk in clinic               |
| <input type="checkbox"/> Child dental care                                      | <input type="checkbox"/> Inpatient hospital                      | <input type="checkbox"/> Vision care                                |
| <input type="checkbox"/> Chiropractic care                                      | <input type="checkbox"/> Lab work                                | <input type="checkbox"/> Women’s health services                    |
| <input type="checkbox"/> Dermatology  | <input type="checkbox"/> Medication / medical supplies           | <input type="checkbox"/> X-rays / mammograms                        |
| <input type="checkbox"/> Domestic violence services                             | <input type="checkbox"/> Mental health / counseling              | <input type="checkbox"/> None                                       |
| <input type="checkbox"/> Eldercare  | <input type="checkbox"/> Physical therapy                        | <input type="checkbox"/> Other: _____                               |
| <input type="checkbox"/> Emergency room care                                    | <input type="checkbox"/> Preventive care (ex. yearly check-ups)  |   |

**7. What do you feel prevents you from getting the healthcare you need? (Check all that apply)**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Afraid to have check-ups                               | <input type="checkbox"/> Don’t like accepting government assistance | <input type="checkbox"/> Location of offices             |
| <input type="checkbox"/> Can’t find providers that accept my Medicaid insurance | <input type="checkbox"/> Don’t trust doctors / clinics              | <input type="checkbox"/> Long waits for appointments     |
| <input type="checkbox"/> Can’t find providers that accept my Medicare insurance | <input type="checkbox"/> Have no regular source of healthcare       | <input type="checkbox"/> No health Insurance             |
| <input type="checkbox"/> Childcare  | <input type="checkbox"/> High co-pay                                | <input type="checkbox"/> No transportation               |
| <input type="checkbox"/> Cost   | <input type="checkbox"/> Lack of evening and weekend services       | <input type="checkbox"/> I can get the healthcare I need |
| <input type="checkbox"/> Don’t know what types of services are available        | <input type="checkbox"/> Language services                          | <input type="checkbox"/> Other: _____                    |

**GENERAL HEALTH QUESTIONS**

**8. Please check one of the following for each statement**

	Yes	No	Not applicable
I have had an eye exam within the past 12 months.	<input type="checkbox"/>	<input type="checkbox"/>	
I have had a mental health / substance abuse visit within the past 12 months.	<input type="checkbox"/>	<input type="checkbox"/>	
I have had a dental exam within the past 12 months.	<input type="checkbox"/>	<input type="checkbox"/>	
I have been to the emergency room in the past 12 months.	<input type="checkbox"/>	<input type="checkbox"/>	
I have been to the emergency room for an <u>injury</u> in the past 12 months (e.g. motor vehicle crash, fall, poisoning, burn, cut, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	
Have you been a victim of domestic violence or abuse in the past 12 months?	<input type="checkbox"/>	<input type="checkbox"/>	
My doctor has told me that I have a long-term or chronic illness.	<input type="checkbox"/>	<input type="checkbox"/>	
I take the medicine my doctor tells me to take to control my chronic illness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I can afford medicine needed for my health conditions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am over 21 years of age and have had a Pap smear in the past three years (if male or under 21, please check not applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am over 40 years of age and have had a mammogram in the past 12 months (if male or under 40, please check not applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check not applicable).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
Does your neighborhood support healthy eating? (e.g. community gardens, farmers’ markets, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
In the area that you live, is it easy to get affordable fresh fruits and vegetables?	<input type="checkbox"/>	<input type="checkbox"/>	
Have there been times in the past 12 months when you did not have enough money to buy the food that you or your family needed?	<input type="checkbox"/>	<input type="checkbox"/>	

**9. Where do you get the food that you eat at home? (Check all that apply)**

- |   |   |
|---|---|
| <input type="checkbox"/> Back-pack or summer food programs              | <input type="checkbox"/> Home Garden  |
| <input type="checkbox"/> Community Garden                               | <input type="checkbox"/> I do not eat at home   |
| <input type="checkbox"/> Corner store / convenience store / gas station | <input type="checkbox"/> I regularly receive food from family, friends, neighbors, or my church |
| <input type="checkbox"/> Dollar store                                   | <input type="checkbox"/> Meals on Wheels  |
| <input type="checkbox"/> Farmers’ Market                                | <input type="checkbox"/> Take-out / fast food / restaurant                                      |
| <input type="checkbox"/> Food bank / food kitchen / food pantry         | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Grocery store                                  |   |

**10. During the past 7 days, how many times did you eat fruit or vegetables (fresh or frozen)? Do not count fruit or vegetable juice. (Please check one)**

- I did not eat fruit or vegetables during the past 7 days     1 – 3 times during the past 7 days     4 – 6 times during the past 7 days     3 times per day  
 1 time per day     4 or more times per day

**11. Have you been told by a doctor that you have... (Check all that apply)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Asthma                                | <input type="checkbox"/> Drug or alcohol problems     | <input type="checkbox"/> Mental health problems           |
| <input type="checkbox"/> Cancer                                | <input type="checkbox"/> Heart disease                | <input type="checkbox"/> Obesity / overweight             |
| <input type="checkbox"/> Cerebral palsy                        | <input type="checkbox"/> High blood pressure          | <input type="checkbox"/> Stroke / Cerebrovascular disease |
| <input type="checkbox"/> COPD / chronic bronchitis / Emphysema | <input type="checkbox"/> High blood sugar or diabetes | <input type="checkbox"/> I have no health problems        |
| <input type="checkbox"/> Depression or anxiety                 | <input type="checkbox"/> High cholesterol             | <input type="checkbox"/> Other: _____                     |
|  | <input type="checkbox"/> HIV / AIDS                   |   |

**12. How long has it been since you last visited a doctor for a routine checkup? (Please check one)**

- Within the past year (1 to 12 months ago)     Within the past 2 years (1 to 2 years ago)  
 Within the past 5 years (2 to 5 years ago)     5 or more years ago

**13. How long has it been since you last visited a dentist or a dental clinic for any reason? Include visits to dental specialists, such as orthodontists. (Please check one)**

- Within the past year (1 to 12 months ago)     Within the past 2 years (1 to 2 years ago)  
 Within the past 5 years (2 to 5 years ago)     5 or more years ago

**14. In the past 7 days, on how many days were you physically active for a total of at least 30 minutes? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard for some of the time.)**

- 0 days     1 days     2 days     3 days     4 days     5 days     6 days     7 days

**15. Other than your regular job, what physical activity or exercises do you participate in? (Check all that apply)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Bicycling              | <input type="checkbox"/> Hiking            | <input type="checkbox"/> Swimming        |
| <input type="checkbox"/> Canoeing / kayaking    | <input type="checkbox"/> Horseback riding  | <input type="checkbox"/> Team sports     |
| <input type="checkbox"/> Dancing                | <input type="checkbox"/> Hunting           | <input type="checkbox"/> Walking         |
| <input type="checkbox"/> Gardening              | <input type="checkbox"/> Individual sports | <input type="checkbox"/> Weight training |
| <input type="checkbox"/> Group exercise classes | <input type="checkbox"/> Running           | <input type="checkbox"/> Yoga / Pilates  |

**16. In the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?**

- Never     3-4 times     7 times     Not applicable / I live alone  
 1-2 times     5-6 times     More than 7 times

**17. Thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good? \_\_\_\_\_ Days**

**18. Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good? \_\_\_\_\_ Days**

**19. During the last 30 days, how many days did you miss work or school due to pain or illness (physical or mental)? \_\_\_\_\_ Days**

**20. During the past 30 days: (Check all that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> I have had 5 or more alcoholic drinks (if male) or 4 or more alcoholic drinks (if female) during one occasion. | <input type="checkbox"/> I have taken prescription drugs to get high                                       |
| <input type="checkbox"/> I have used tobacco products (cigarettes, smokeless tobacco, e-cigarettes, etc.)                               | <input type="checkbox"/> I have used marijuana   |
|   | <input type="checkbox"/> I have used other illegal drugs (e.g. cocaine, heroin, ecstasy, crack, LSD, etc.) |

**21. Have you ever used heroin?**  Yes     No

**22. How many vehicles are owned, leased, or available for regular use by you and those who currently live in your household? Please be sure to include motorcycles, mopeds and RVs. \_\_\_\_\_ vehicles**

**23. If you do not drive, what mode of transportation do you use typically use.**

- Not applicable- I drive
- Bike or walk
- Friends / Family drive me
- Public transit (i.e. bus, shuttle, similar)
- RADAR / CORTRAN
- Taxi
- Other: \_\_\_\_\_

**24. What types of information help you learn the best about your health? (Check *all that apply*)**

- Classroom presentations, live presentations, or hands on demonstrations
- Group activity / support group
- I learn best by talking with my health professional (i.e. doctor, nurse, care coordinator, etc.)
- Internet or web information
- My Chart / patient portal
- Pictures, diagrams, illustrations or photographs
- Reading materials (i.e. brochure, newspaper, magazine, books)
- Video presentation (i.e. video tape, DVD, movie, television)
- Other \_\_\_\_\_



**DEMOGRAPHIC INFORMATION and HEALTH INSURANCE**

**25. Which of the following describes your current type of health insurance? (Check all that apply)**

- COBRA
- Dental Insurance
- Employer Provided Insurance
- Government (VA, Champus)
- Health Savings / Spending Account
- Individual / Private Insurance / Market Place / Obamacare
- Medicaid
- Medicare
- Medicare Supplement
- No Dental Insurance
- No Health Insurance

**26. If you have no health insurance, why don't you have insurance? (Check all that apply)**

- Not applicable- I have health insurance
- I don't understand ACA / Obamacare Options
- Not available at my job
- Student
- Too expensive / cost
- Unemployed / no job
- Other: \_\_\_\_\_ **What is your ZIP code?** \_\_\_\_\_

**27. What is your street address (optional)?** \_\_\_\_\_

**28. What is your age?** \_\_\_\_\_

**29. What is your gender?**  Male  Female  Transgender

**30. What is your height?** \_\_\_\_\_

**31. What is your weight?** \_\_\_\_\_

**32. How many people live in your home (including yourself)?**

Number who are 0 – 17 years of age \_\_\_\_\_

Number who are 18 – 64 years of age \_\_\_\_\_

Number who are 65 years of age or older \_\_\_\_\_

**33. What is your highest education level completed?**

Less than high school  Some high school  High school diploma  Associates  Bachelors  Masters / PhD

**34. What is your primary language?**  English  Spanish  Other \_\_\_\_\_

**35. What ethnicity do you identify with? (Check all that apply)**

Native Hawaiian / Pacific Islander  Asian  Black / African American  White  Latino  
 American Indian / Alaskan Native  Other  More than one race  Decline to answer  Other: \_\_\_\_\_

**36. What is your marital status?**  Married  Single  Divorced  Widowed  Domestic Partnership

**37. What is your yearly household income?**

\$0 – \$10,000  \$10,001 – \$20,000  \$20,001 – \$30,000  \$30,001 – \$40,000  \$40,001 – \$50,000  
 \$50,001 – \$60,000  \$60,001 – \$70,000  \$70,001 – \$100,000  \$100,001 and above

**38. What is your current employment status?**

Full-time  Part-time  Unemployed  Self-employed  Retired  Homemaker

**39. Is there anything else we should know about your (or someone living in your home) health care needs in Franklin County or Bassett?**

\_\_\_\_\_

## **Appendix 4: Stakeholder Survey**

### **Franklin County / Bassett Professional Informant Survey**

#### **Barriers and Challenges Faced by Residents and Health and Human Services Agencies**

An online version of this survey is available at <https://www.surveymonkey.com/r/CHNAProviderSurvey>

*Responses will not be identified, either in written material or verbally, by name or organization.*

*Please return to: Amy Michals, Carilion Community Outreach, 1202 Third Street, S.W., Roanoke, VA 24016.*

**Thank you!**

1. Your name, organization, and title:

NAME: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

TITLE: \_\_\_\_\_

2. What are the most important issues (needs) that impact health in Franklin County / Bassett?

---

---

3. What are the barriers to health for the populations you serve?

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4. Is there one locality / neighborhood with the greatest unmet need? If so, why?

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5. Is there one population group with the greatest unmet need? If so, why?

---

---

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6. What are the resources for health for the populations you serve?

---

---

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7. If we could make one change as a community to meet the needs and reduce the barriers to health in Franklin County / Bassett, what would that be?

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**Thank you for your input!**

*Please return to: Amy Michals, Carilion Community Outreach, 1202 Third Street, S.W., Roanoke, VA 24016.*

*Questions: Please contact Amy Michals at 540-983-4046 or [almichals@carilionclinic.org](mailto:almichals@carilionclinic.org).*

### ***Appendix 5: 2016 Stakeholder Survey Locations***

Organization	Site/Group
2016 CHNA CHAT	Meeting #2
Carilion Clinic	Patient Transport
Carilion Clinic	Carilion Franklin Memorial Hospital Employees
Franklin County	Public Safety
Focus on Response and Education to Stay Healthy (FRESH)	FRESH Coalition Meeting

## Appendix 6: Community Resources

Resources	Category	Website
Care Coordinators	Community Resources	<a href="http://www.b2byellowpages.com/search/searchv.cgi?business=patient+care+coordinators&amp;location=rocky+mount%2C+va">http://www.b2byellowpages.com/search/searchv.cgi?business=patient+care+coordinators&amp;location=rocky+mount%2C+va</a>
Carilion Direct	Community Resources	<a href="https://www.carilionclinic.org/">https://www.carilionclinic.org/</a>
Carilion Health Events	Community Resources	<a href="https://www.carilionclinic.org/calendar/month">https://www.carilionclinic.org/calendar/month</a>
Child Advocacy center	Community Resources	<a href="http://www.roact.org/programs/cac/">http://www.roact.org/programs/cac/</a>
DHS	Community Resources	
Family Preservation Services	Community Resources	<a href="http://www.yellowpages.com/rocky-mount-va/mip/family-preservation-services-488245">http://www.yellowpages.com/rocky-mount-va/mip/family-preservation-services-488245</a>
Financial Assistance Programs	Community Resources	<a href="https://www.carilionclinic.org/billing/financial-assistance">https://www.carilionclinic.org/billing/financial-assistance</a>
Henry County Parks and Rec	Community Resources	<a href="http://www.henrycountyva.gov/parks-and-recreation">http://www.henrycountyva.gov/parks-and-recreation</a>
Intercept	Community Resources	<a href="http://www.interceptyouth.com/">http://www.interceptyouth.com/</a>
Language Line	Community Resources	<a href="https://www.languageline.com/">https://www.languageline.com/</a>
Miles for Vets	Community Resources	<a href="http://www.mile1.net/">http://www.mile1.net/</a>
Piedmont Community Services	Community Resources	<a href="http://www.piedmontcsb.org/pcs2012/index.html">http://www.piedmontcsb.org/pcs2012/index.html</a>
Sherriff's Department	Community Resources	<a href="https://sheriff.franklincountyohio.gov/">https://sheriff.franklincountyohio.gov/</a>
Social Services	Community Resources	<a href="http://www.franklincountyva.gov/social-services">http://www.franklincountyva.gov/social-services</a>
Social Workers	Community Resources	<a href="http://www.franklincountyva.gov/social-services">http://www.franklincountyva.gov/social-services</a>
Southern Area on Aging / Dept. of Aging	Community Resources	<a href="http://www.southernaaa.org/saaa_providers.html">http://www.southernaaa.org/saaa_providers.html</a>
Churches - drug abuse help	Community Resources, Services – Behavioral Health	
Medicaid	Cost and Insurance	<a href="https://www.medicaid.gov/">https://www.medicaid.gov/</a>
Google	Education	
Dave Stewart, LPC Professional counselor	Services – Behavioral Health	
Christiansburg/Danville for low-cost dental	Services - Dental	<a href="http://freeclinicdirectory.org/virginia_care_bycity.html">http://freeclinicdirectory.org/virginia_care_bycity.html</a>
Dentists - Dr. Radford, Blue	Services - Dental	<a href="http://www.blueridgedentalgroup.com/">http://www.blueridgedentalgroup.com/</a>

Ridge		
Mission of Mercy Roanoke Civic Center	Services - Dental	<a href="http://wset.com/archive/hundreds-get-free-dental-care-in-roanoke">http://wset.com/archive/hundreds-get-free-dental-care-in-roanoke</a>
Small Smiles	Services - Dental	<a href="http://smallsmiles.com/">http://smallsmiles.com/</a>
911/EMS	Services - Healthcare	<a href="http://fcpublicsafety.com/">http://fcpublicsafety.com/</a>
Bassett Family Practice	Services - Healthcare	<a href="http://www.healthycommunitymhc.org/bassett-family-practice">http://www.healthycommunitymhc.org/bassett-family-practice</a>
Diabetes and Chronic Disease Self- Management	Services - Healthcare	
Dialysis Center	Services - Healthcare	<a href="https://www.freseniuskidneycare.com/dialysis-centers/virginia/rocky-mount/300-technology-dr-24151/7082">https://www.freseniuskidneycare.com/dialysis-centers/virginia/rocky-mount/300-technology-dr-24151/7082</a>
ER	Services - Healthcare	<a href="http://www.fcmh.net/">http://www.fcmh.net/</a>
Existing PCP offices	Services - Healthcare	<a href="http://www.docspot.com/d/VA/rocky-mount/primary-care.html">http://www.docspot.com/d/VA/rocky-mount/primary-care.html</a>
Ferrum Tri-Area Clinic	Services - Healthcare	<a href="http://www.triareahealth.org/ferrum/">http://www.triareahealth.org/ferrum/</a>
Franklin Hospital	Services - Healthcare	<a href="https://www.carilionclinic.org/hospitals/carilion-franklin-memorial-hospital">https://www.carilionclinic.org/hospitals/carilion-franklin-memorial-hospital</a>
Free Clinic	Services - Healthcare	<a href="http://bernardhealthcare.com/">http://bernardhealthcare.com/</a>
Home Health / Hospice	Services - Healthcare	<a href="http://www.senioradultservices.org/home-health-services/Franklin-county-VA/resources.html">http://www.senioradultservices.org/home-health-services/Franklin-county-VA/resources.html</a>
New Life Birth Center	Services - Healthcare	<a href="http://newlifebirthcenter.org/main_page.html">http://newlifebirthcenter.org/main_page.html</a>
Pre-natal Center	Services - Healthcare	<a href="http://www.franklincountyva.gov/residents/health-human-services/perinatal-center">http://www.franklincountyva.gov/residents/health-human-services/perinatal-center</a>
School nurses	Services - Healthcare	
School Psychologists	Services - Healthcare	
Tele-health	Services - Healthcare	<a href="http://cchpca.org/what-is-telehealth">http://cchpca.org/what-is-telehealth</a>
Travel Check-in Nurse	Services - Healthcare	<a href="https://www.dhp.virginia.gov/nursing/nursing_maprogs.asp">https://www.dhp.virginia.gov/nursing/nursing_maprogs.asp</a>
Urgent Care - Velocity Care	Services - Healthcare	<a href="http://velocitycarebycarilion.com/westlake-urgent-care">http://velocitycarebycarilion.com/westlake-urgent-care</a>
Health Department	Services - Healthcare, Public Health	<a href="http://www.franklincountyva.gov/residents/health-human-services/health-department">http://www.franklincountyva.gov/residents/health-human-services/health-department</a>
Needy Meds	Services - Prescriptions	<a href="http://www.needymeds.org/local_programs.taf?_function=list&amp;state=MO">http://www.needymeds.org/local_programs.taf?_function=list&amp;state=MO</a>
MHM	Services - Healthcare, behavioral health	<a href="http://www.mhm-services.com/">http://www.mhm-services.com/</a>

