

# Rockbridge Area Community Health Assessment

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HEALTH IMPROVEMENT IMPLEMENTATION STRATEGY  
FY 2018-2020

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## **Carilion Stonewall Jackson Hospital Health Improvement Implementation Strategy**

### **FY 2019 – FY 2021 Summary**

Carilion Clinic is a not-for-profit, integrated healthcare system located among the Blue Ridge Mountains with its flagship hospital in the heart of the City of Roanoke, which serves as the largest urban hub in Western Virginia. There, through a comprehensive network of hospitals, primary and specialty physician practices, wellness centers and other complimentary services, quality care is provided close to home for nearly 1 million Virginians. Carilion's roots go back more than a century, when a group of dedicated citizens came together and built a hospital to meet the healthcare needs of the community. Today, Carilion is a key anchor institution focusing on more than just healthcare; Carilion is dedicated to its mission of improving the health of the communities we serve.

With an enduring commitment to the health of our region, care is advanced through clinical services, medical education, research and community health investments. Carilion believes in service, collaboration and caring for all. Through ongoing investments in discovering and responding to the health needs of its community comes the understanding that stakeholders must address community health issues together to most effectively create change.

The purpose of this implementation strategy is to describe what Carilion Stonewall Jackson Hospital (CSJH) plans to do to address the community health needs identified in the 2018 Rockbridge Area Community Health Assessment (RACHA).

CSJH is a non-profit, critical access hospital dedicated to quality care and patient comfort. The hospital was founded in 1907 by the United Daughters of the Confederacy, and was originally located in the former home of confederate general Thomas "Stonewall" Jackson. Commitment and support through the last century allowed the hospital to grow, expand, and in 1954 move across town to its present site. A new structure and enhanced patient care tower was completed on the same site in 2002.

Carilion Health System (now Carilion Clinic) purchased 80% of Stonewall Jackson Hospital in 2006. The other 20% continues to be owned by the community in the trust of the SJH Community Health Foundation. The Foundation provides monies for grants to local organizations that aim to improve the health of our community.

## Community Served

The Rockbridge Area, home to CSJH, is composed of the independent cities of Lexington and Buena Vista, and Rockbridge County. Located at the southern end of the Shenandoah Valley in west central Virginia, Rockbridge County is classified as a rural county. It is bounded on the west by the Alleghany Mountains and on the east by the Blue Ridge Mountains. The county's rolling hills and 58,000 acres of national forest comprise much of its 616 square miles. There are 37 persons per square mile, which is significantly lower than the state average of 203 persons per square mile<sup>1</sup>. Highways 81 and 64 provide ready access to neighboring markets and services.

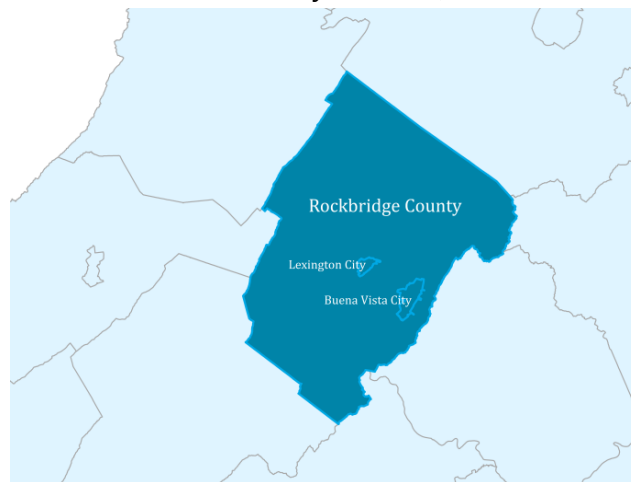
The independent cities of Buena Vista and Lexington lie within the county limits. Lexington, the county seat, is situated in the center of the county. It is the heart of much of the county's educational, retail, commercial and governmental activities. Buena Vista is located six miles east of Lexington and is considered the industrial and manufacturing core of the county. Both the cities of Buena Vista and Lexington are classified as mixed urban areas<sup>2</sup>. With land areas of 7 square miles and 2.5 square miles respectively, there are 992 persons per square mile in Buena Vista and 2,820 persons per square mile in Lexington<sup>3</sup>. The incorporated towns of Glasgow, Goshen, Brownsburg, Natural Bridge Station, Raphine and Fairfield are located within the county limits.

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

Carilion Stonewall Jackson Hospital (CSJH) is located in Lexington, Virginia. In fiscal year 2017, CSJH served 11,318 unique patients. Patient origin data revealed that in fiscal year 2017, 80.11% of patients served by CSJH lived in the following localities:

- Lexington City (35.47%)
- Buena Vista City (23.11%)
- Rockbridge County (21.53%)

The target population for Carilion Clinic's CHA projects consists of the following groups: underserved/vulnerable populations disproportionately impacted by the social determinants of health including poverty, race/ethnicity, education, and/or lack of insurance.



<sup>1</sup> US Census Bureau State and County Quick Facts, 2010 . Retrieved from: <https://www.census.gov/quickfacts/fact/table/buenavistacityvirginia,lexingtoncityvirginia,rockbridgecountyvirginia,va/PST045217>

<sup>2</sup> Virginia Rural Health Plan, 2008, <http://www.va-srhp.org/docs/plan/11-appendix-d.pdf>

<sup>3</sup> US Census Bureau State and County Quick Facts, 2010 . Retrieved from: <https://www.census.gov/quickfacts/fact/table/buenavistacityvirginia,lexingtoncityvirginia,rockbridgecountyvirginia,va/PST045217>

## Implementation Strategy Process

CSJH and Rockbridge 2020 partnered to conduct the 2018 RACHA. This process was community-driven and focused on high levels of community engagement involving health and human services leaders, stakeholders, and providers; the target population; and the community as a whole. Rockbridge 2020 is a partnership for the purpose of collaboration and planning for healthcare. Rockbridge 2020's strategic plan is updated every three years to align with the triennial Community Health Assessment, is community-driven and a major driver of CSJH's Health Improvement Implementation Strategy for the Rockbridge Area. A 33-member Community Health Assessment Team (CHAT) oversaw the planning activities. Please see Appendix 1 for the CHAT Directory.

Beginning in October 2017, primary data collection included a Community Health Survey, focus groups with key stakeholders and providers, focus groups with target populations, and focus groups of community members from the Community Visioning Event. Secondary data were 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.

After all primary and secondary data collection is complete, the CHAT reviews all data and participates in a prioritization activity. This activity 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. The categories listed on the prioritization activity sheet align with the Robert Wood Johnson Foundation framework for what influences health. Please see Appendix 2 to view the prioritization worksheet. The data are combined and priorities are selected based on the number of times a category is selected in the top 10, with average ranking serving as a tie-breaker. Once the priorities have been selected, the CHAT participates in an activity to rate the feasibility and potential impact of a solution to each health issue. Rockbridge 2020 will continue to conduct strategic planning around the 2018 RACHA health priorities during monthly meetings in the summer and fall of 2018. Please see Appendix 3 for Feasibility and Impact activity results.

The 2018 RACHA was approved by the CSJH Board of Directors and made publically available in August 2018. This Implementation Strategy was developed by the Carilion Clinic Community Health and Outreach Department based on priority community health needs identified in the 2018 RACHA. Input on Implementation Strategies was solicited from CHAT members, the CSJH Board of Directors, the CSJH Community Benefit Team, Community Health and Outreach staff and key Carilion Clinic leadership. This document has been approved by CSJH's Board of Directors.

## Prioritized List of Significant Health Needs Identified in the 2018 RACHA

The finding of the 2018 RACHA revealed 10 priority health-related issues in the community, identified by the CHAT after review of the data collected.

1. Alcohol and drug use
2. Poverty / low average household income
3. Access to mental / behavioral health services
4. Poor diet
5. High prevalence of chronic disease
6. Culture: healthy behaviors not a priority
7. Lack of health literacy / lack of knowledge of healthy behaviors
8. Access to primary care
9. Access to specialty care
10. Tobacco use

## CSJH Implementation Plan

According to the Robert Wood Johnson Foundation's (RWJF) County Health Rankings<sup>4</sup>, where an individual lives, works and plays is a strong predictor of their health outcomes. Currently in the United States, a person's zip code can help predict their life expectancy due to its direct link to the social determinants of health such as poverty, race/ethnicity, education and employment status in these areas<sup>5</sup>. These factors are so important to our overall health, that they were added to the 10-year national Healthy People 2020 objectives with a goal to "create social and physical environments that promote good health for all."<sup>6</sup>

Carilion responds to community health needs in innovative ways: making sure our regions have access to state-of-the-art healthcare close to home; providing community grants and sponsorships to extend our mission and support other organizations that address health need; creating and implementing community-wide strategies to reduce barriers, coordinate resources and enhance community strengths; and by providing community-based health and wellness programming. Carilion Clinic's response strategies are organized by the RWJF framework for what influences health: health behaviors; social and economic factors; clinical care access and quality; and physical environment.

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<sup>4</sup> County Health Ranking & Roadmaps. Retrieved from: <http://www.countyhealthrankings.org/>

<sup>5</sup> Robert Wood Johnson Foundation. Retrieved from: <https://www.rwjf.org/en/library/interactives/whereyouliveaffectshowlongyoulive.html>

<sup>6</sup> Social Determinates of Health. Retrieved from: <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health>

## Commitment

Commitment to community service is evident at all levels of the organization. In 2016, Carilion Clinic hospitals committed more than \$170 million toward activities that improve community health and social determinants of health. Carilion's commitment to community health is evidenced by its commitment to a population health infrastructure including an entire community health and outreach department dedicated to assessing and addressing community need. The department is responsible for leading and facilitating the Community Health Improvement Process, Community Health Assessments, the system's community grant process, community health education, community benefit collection, and neighborhood health initiatives. CHO has staff at the system level and at each community hospital and works with the each hospital's Board of Directors and Carilion Clinic's Board of Governors to create health improvement strategies to address community health needs. Each Carilion Clinic hospital has a Community Benefit Team which oversees the local hospital's plan to address community need in partnership with the local community health assessment team. There is also a Community Benefit Council at the system level providing oversight for Carilion Clinic as a whole. This council is responsible for overseeing and strategically guiding Carilion's community health improvement work and for community benefit strategy, collection and submission.

## Community Partnerships

Carilion believes in the power of collaboration and understands that community health issues must be addressed together, with the community. To ensure lasting community impact from the health assessment and community health improvement process, Carilion participates in and provides in-kind support to community health coalitions that address health needs in the Rockbridge Area, such as Rockbridge 2020. Rockbridge 2020 is organized and led by CSJH staff. In addition, Carilion partners with multiple community and business organizations around initiatives to improve health and wellness and to impact the social determinants of health for all who live in the Rockbridge Area. Other coalitions CSJH participates in include: Live Healthy Rockbridge Kids, Local Emergency Preparedness Committee and the Rockbridge Area Prevention Coalition.

## *Rockbridge 2020*

Forming a true community collaborative with lasting impact is no small feat. Rockbridge 2020 was founded in 1995 by Stonewall Jackson Hospital. It brought together providers of health care and related services in the Rockbridge Area for the purpose of collaboration and planning for healthcare over the next quarter of a century. Informal monthly meetings allowed participants to network and educate each other about services available through each of the agencies represented. Through the early years a few surveys were conducted to identify needs in the community.

The work of Rockbridge 2020 continued in 2006 when Stonewall Jackson Hospital became part of the Carilion Health System (now Carilion Clinic). In 2011, Carilion Stonewall Jackson Hospital partnered with the Rockbridge Area Free Clinic (now the Rockbridge Area Health Center) and the Central Shenandoah Health District to conduct a Community Health Assessment. The 12-month project defined and assessed the health of our community, and enabled members of Rockbridge 2020 to develop a 3-year strategic plan to address the most pressing needs (Access to Health Services; Nutrition, Physical Activity and Obesity; Oral Health; and Mental Health). The completed

assessment and community-wide strategic plan were made available to the general public in 2012. One of the key outcomes from this assessment was the transition of the Rockbridge Area Free Clinic to the Rockbridge Area Health Center.

Three years later, Rockbridge 2020 undertook a second assessment. The 2015 RACHA identified the top priorities as a need for Urgent Care, General Wellness (including nutrition, physical activity and chronic disease management), Mental Health, and Coordination of Care. In the spring of 2016, Carilion Clinic opened Velocity Care in Lexington as a direct result of the assessment. Since that time, Rockbridge 2020 has been working to implement the 2015 strategic plan.

Rockbridge 2020 continues to meet monthly to ensure we are implementing the community-wide strategic plan in the most efficient and effective manner. While each of the member organizations of Rockbridge 2020 has its own mission, as a coalition, its mission is working together for community well-being.

### **Community Grants**

Carilion Clinic is committed to improving the health of the communities we serve by addressing key health priorities identified through our triennial Community Health Assessments. Carilion fulfills this commitment in many ways, one of which is through targeted grants for community health improvement programs and those that impact the social determinants of health. Carilion provides a multitude of community grants and community health sponsorships helping local charitable organizations fulfill their missions as they relate to the health and well-being of our communities. Community grant dollars are allocated across the entire Carilion Clinic service area based on requests received. During this three-year Implementation Strategy cycle, Carilion Clinic intends to be more targeted with grant support through the initiation of a Request for Proposal (RFP) process, looking for organizations that can impact specific community health priorities in specific identified geographies.

The SJH Community Health Foundation provides additional monies for grants to local organizations that aim to improve the health of our community. Members of the Board of Directors for the Foundation sit on a committee of the CSJH Board of Directors to determine which grants to award. For the next three years, all grants will go toward programs and initiatives aimed at addressing needs identified in this Community Health Assessment.



## Significant Health Priorities to be Addressed:

### Health Behaviors

*Needs: alcohol and drug use; poor diet; high prevalence of chronic disease; culture: healthy behaviors not a priority; lack of knowledge of healthy behaviors; tobacco use.*

To address health behavior related priorities from the 2018 RACHA, Carilion provides a variety of free health education, screenings and flu immunizations in community settings. Education is also provided through health fairs and community events.

Community health education is provided by the Community Health and Outreach department, as well as on occasion by other departments. Health and wellness education topics include: general wellness; healthy eating and activity; exercise for balance and confidence building for seniors; and other topics as requested. The local health educator also leads guided public walks and hikes to increase access to exercise opportunities. Resources committed to these programs include staff time and often food and giveaway items that encourage healthy behaviors.

In addition to traditional health education, Carilion participates in health behavior related programs including:

Veggie Brigade - a program put on in partnerships with Live Healthy Rockbridge Kids to encourage local elementary school children to try new fruits and vegetables.

Eat Healthy Rockbridge - a collaborative program encouraging healthy eating through prescription vouchers to access healthy food paired with education and coaching. The pilot program was completed with patients in Glasgow this summer, and plans are in the works to conduct a 2<sup>nd</sup> program in Lexington this winter.

Stop the Bleed – a program being coordinated with area schools, teaching lay people how to intervene in the case of an injury to quickly stop blood loss.

In addition to community events, Carilion works to encourage healthy behaviors through health improvement opportunities for its own employees and through partnerships with other employers in the Rockbridge Area. As a large employer in the region, efforts to engage employees and their families in their own health impact community health overall. Carilion has rolled out the Virgin Pulse program with employees and enabled employees to involve others on the platform to encourage healthy behaviors daily. In addition, CSJH hosts a momentum studio with exercise equipment available for employees.

Carilion remains committed to the Healthier Hospital Initiative pledge and continues to work to improve the amount of healthy, local, sustainable foods purchased and served through its cafeterias.

### *Tobacco Use*

Carilion employees and their dependents will now be eligible for a new, pharmacist-led smoking cessation program. This program includes group sessions, individual follow-up, resource referrals and free access to nicotine replacement therapy products. Another option includes free participation in the Quit for Life program. Employees are offered a financial incentive when they are tobacco free. Carilion also makes available a “Preparing to Quit” speakers bureau that can be requested by community groups or companies.

### *Alcohol and drug use*

Carilion’s Opioid Task Force brings together expertise from throughout the Carilion system to better understand and address the Opioid Epidemic in Southwest Virginia. The Opioid Task Force is working to address this epidemic internally and in the community. Efforts arising from this task force include: developing system-wide guidelines and a system dashboard for opioid prescriptions; developing treatment pathways for opioid addiction in specific high-risk groups; developing best practices for risk assessment, treatment and standard orders in Carilion’s electronic medical record system, EPIC; developing an inventory of community resources related to prevention, treatment and recovery services for opioid patients and community members; and providing locations for free, safe, prescription drug returns or deactivation bags.

CSJH is also a participant in the Rockbridge Area Prevention Coalition and provides space for weekly AA meetings.

### **Clinical Care**

*Needs: access to mental / behavioral health services; access to primary care; access to specialty care.*

Issues with access to care are a focus for CSJH when addressing community health needs. In addition to providing financial support to qualifying patients who cannot afford care, Carilion is working on the following to improve affordable access to care and resources.

Carilion is committed to helping improve access to affordable medical care in our communities. With expansion of Medicaid in the Commonwealth of Virginia, Carilion will work diligently in the coming months to develop a plan for outreach and enrollment in Medicaid for those newly eligible. Additionally, Carilion will assist to find medical homes for those newly enrolled. CSJH will also work closely with its FQHC partner, Rockbridge Area Health Center, to understand their Medicaid enrollment efforts.

To improve access to care, impacting the need for access to primary care and specialty care, a new urgent care will be opening in Raphine, VA at White’s Travel Center. In the 2015 Rockbridge Area Community Health Assessment, access to urgent care services was the top need. Carilion responded by opening one urgent care in Lexington and now a second will open in Rockbridge County to serve residents and travelers.

Carilion is actively recruiting for a Family Practice physician and continues to bring specialty service to Lexington on a rotating basis. CSJH will continue to work with the Carilion Clinic Planning department to explore the specific specialty care needs in the region.

### *Mental health and substance use services*

In an ongoing effort to increase access to psychiatry and mental health services, the technological infrastructure to provide telepsych services has been put in place in the CSJH Emergency Department. Carilion Family Medicine Lexington is also slated to offer this service in the future. Service provision is currently limited by provider availability. Carilion is committed to serving the needs of its communities and continues to work toward providing telepsych services in the Rockbridge Area.

CSJH also continues to work with partners in the region to align patients and community members with available services, such as those available through the Rockbridge Area Health Center. CSJH also partners with Rockbridge Area Community Services, offering space to host free Mental Health First Aid classes. Additionally, CSJH participated on the planning committee for the Rockbridge Area Prevention Coalition's Prevention Forum geared toward parents, guardians and teachers and focused on risk factors for teens who might be inclined to use alcohol, tobacco and other drugs or self-harm.

### **Social and Economic Factors**

#### *Needs: poverty.*

In its commitment to reducing inequity of care, Carilion provides financial support for people who cannot afford insurance or healthcare. Support is also provided to many not-for-profit organizations helping to reduce the impacts of poverty on health through investments in social determinants such as housing, transportation, employment, education, access to healthy foods and many others. Each year, Carilion Clinic coordinates a system-wide United Way campaign through which employees can provide additional support to these causes.

### **Physical Environment**

While physical environment did not necessarily arise as a top priority in the 2018 RACHA, Carilion still recognizes the impact the environment has on the health of our communities. That is why efforts continue to improve the efficiency of Carilion buildings, the utilization of recycling and recyclable or bio-degradable materials where possible, the reduction of waste and the utilization of local, sustainable foods.

## **Implementation and Measurement**

Carilion has invested in multiple systems to help manage data and track outcomes of our community work. Clear Impact will be utilized to develop community, system-wide, hospital-specific and project-specific scorecards with appropriate outcome measures. Community health education programs and screenings will have program level outcomes assigned based on the topic. These outcomes will be tracked with pre- and post-tests as well as through screening results. Community programs supported by Carilion grants will be responsible for reporting program outcomes regularly.

Scorecards will be developed with key secondary data points at the zip code and county level to be updated annually to track impact of community health initiatives. Carilion will track and measure impact on certain aligned indicators that contribute to the Robert Wood Johnson Foundation County Health Factors Ranking and County Health Outcomes Ranking. Our goal is to improve County Health Rankings for the entire Rockbridge Area, but we understand that by the nature of County Health Rankings, improvements are relative to improvements in other communities within the Commonwealth of Virginia.

## **Priority Areas Not being Addressed and the Reasons**

A community approach to determine and address priority needs as described earlier in this document was used in determining which needs cannot be addressed immediately. The needs not identified as “priority” are those that will not be actively addressed in this time period. Please see Appendix 2 for the full prioritization worksheet to see what needs are not being actively addressed.

It is CSJH’s intent to address all identified priority health issues through the aforementioned initiatives, programs and/or grants if possible. This fall, CSJH will work with Rockbridge 2020 to develop a strategic plan for addressing key issues in the community and the focus of program provision will be to those living in poverty and/or in medically underserved areas.

Please visit <https://carilionclinic.org/community-health-assessments> to review the 2018 Rockbridge Area Community Health Assessment. Learn more about Carilion Clinic Community Health and Outreach at <https://www.carilionclinic.org/community-health-outreach>.

*This document was adopted on behalf of Carilion Stonewall Jackson Hospital on 9/11/2018.*



## Appendices

### Appendix 1: Community Health Assessment Team

This list includes members that attended 50% (2) or more of the CHAT meetings.

Name	Organization	Area of Expertise
Aaron Boush	Carilion Clinic	Hospitals, Healthy Food
Jeremy Brookman	Carilion Clinic	Care Coordination
Melinda Clifton	Shenandoah Rehab	Skilled Nursing and Rehab
Janette Coleman	Shenandoah Rehab	Skilled Nursing and Rehab
Neely Dahl	Health Department - Smoking Cessation/Prevention	Tobacco Policy, System & Environmental changes
Jenny Davidson	Washington and Lee University (Campus kitchen)	Nutrition
Alessandra Del Conte Dickovick	Washington and Lee University	Community - Based Research
Brandy Flint	Rockbridge County Administrators Office	Community Development
Monica Fogelberg	Rockbridge Area Health Center	Patient Services - Links to Resources
Kristin Goddard	Carilion Clinic	Marketing and Communications
Susan Harrison	Rockbridge Area Hospice	Hospice
Tammi Hellwig	Washington and Lee University	Community Based Learning Curriculum
Jaclyn Hostetter	AmeriCare	In-home Non-skilled Support Services
Jan Kaufman	Washington and Lee University – Student Health Promotion	Prevention
Karen Koch	Velocity Care	Healthcare / Urgentcare
Dian Kopical	Department of Health	Public Health Education & Community Service
Laura Kornegay	Physician	Public Health

Name	Organization	Area of Expertise
Annie LePere	HCAT / Live Healthy Rockbridge Kids	Nutrition, Physical Activity, Families
Tracy Lyons	Chamber of Commerce	Business
Greg Madsen	Carilion Clinic	Health Care
Joan Manley	RACI	Adults with Disabilities
Amy Michals	Carilion Clinic	Public Health
Heather Morrow	Rockbridge Area Health Center	Care Coordination - Nursing Continuance of Care
Hattie Myers	Rockbridge Area Transportation System	Executive Director - Transportation
Stephanie Noel-Branch	Carilion Clinic Internal Medicine	Care Coordination - Continuance of Care
Holly Ostby	Carilion Clinic	Health Care
Tom Roberts	City of Buena Vista	Planning
BreAnne Rogers	YMCA	Healthy Living, Youth Development, & Social responsibility
Kenya Thompson	Carilion Clinic	Hospitals, Scribe
Tasha Walsh	Rockbridge Area Hospice	Organizational Development, End of Life Care, Integrated care
Mickey Watkins	Valley Program for Aging Services, Maury River Senior Center	Caregivers, Vets, Community organizing
Rebecca Wilder	Virginia Cooperative Extension FCS SNAP-Ed Agent	Nutrition
Emily Woody	Carilion Care Coordinator	Care Coordination
John Young	Rockbridge Area Community Services - Executive Director	Behavioral/PP Funding/Workforce

Appendix 2: Community Health Need Prioritization

Community Health Assessment Prioritization

From the entire list, please pick 10 of the most pertinent community needs and rank on a scale of 1 - 10, with 1 being the most pertinent.

Rank	Community Issue
Health Behavior Factors	
	Alcohol and drug use
	Culture: healthy behaviors not a priority
	Lack of exercise
	Lack of health literacy / lack of knowledge of healthy behaviors
	Lack of knowledge of community resources
	Poor diet
	Risky sexual activity
	Tobacco use
Clinical Care Factors	
	Access to primary care
	Access to dental care
	Access to mental / behavioral health services
	Access to specialty care (general)
	Access to specific specialty care: _____ (write in)
	Access to substance use services
	Communication barriers with providers
	Coordination of care
	High cost of care
	High uninsured / underinsured population
	Quality of care
Social and Economic Health Factors	
	Child abuse / neglect
	Community safety / violence
	Domestic violence
	Educational attainment
	Lack of family / social support systems
	Poverty / low average household income
	Unemployment
Physical Environment Factors	
	Air quality
	Affordable / safe housing
	Injury prevention / safety of environment
	Outdoor recreation
	Transportation / transit system
	Water quality
Health Outcomes	
	High prevalence of chronic disease (general)
	High prevalence of specific chronic disease: _____ (write in)
Write-in section	
	Other:
	Other:
	Other:
	Other:
	Other:
	Other:
	Other:
	Other:

### Appendix 3: Feasibility and Impact Activity Results

Priorities	Group One Categories	Group Two Categories	Group Three Categories	Group Four Categories
<b>Alcohol and drug use</b>	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, Low to Medium Feasibility	High Impact, High Feasibility
<b>Poverty / low average household income</b>	High Impact, Low Feasibility	High Impact, Low Feasibility	High Impact, Low Feasibility	High Impact, Low Feasibility
<b>Access to mental / behavioral health services</b>	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, High Feasibility
<b>Poor diet</b>	High Impact, Medium to High Feasibility	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, High Feasibility
<b>High prevalence of chronic disease</b>	High Impact, Low Feasibility	High Impact, Low Feasibility	Low Impact, Low Feasibility	High Impact, Low Feasibility
<b>Culture: healthy behaviors not a priority</b>	High Impact, Low to Medium Feasibility	High Impact, Low Feasibility	High Impact, High Feasibility	High Impact, Low Feasibility
<b>Lack of health literacy / lack of knowledge of healthy behaviors</b>	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, High Feasibility	High Impact, Low Feasibility
<b>Access to primary care</b>	High Impact, Low Feasibility	High Impact, Low Feasibility	High Impact, Low to Medium Feasibility	Low impact, High Feasibility
<b>Access to specialty care</b>	High Impact, Low Feasibility	High Impact, High Feasibility	Low Impact, High Feasibility	High Impact, Low Feasibility
<b>Tobacco use</b>	High Impact, Low to Medium Feasibility	High Impact, Low Feasibility	Low to Medium Impact, Low Feasibility	High Impact, High Feasibility