Giles County Community Health Assessment

FINAL REPORT AUGUST 31, 2018

Carilion Giles Community Hospital CarilionClinic.org/about/chna



Contents

Disclaimer
Acknowledgements4
Project Management Team4
Project Support Team4
Giles County FOCUS4
Community Health Assessment Team (CHAT)5
CHAT Members
Executive Summary7
Description of the Community
Community Demographics9
Assessment Service Area10
Existing Resources 11
Carilion Giles Community Hospital 11
Community Health Assessment Process 11
Method 11
Collaboration12
Community Health Improvement Process12
Step 1: Conduct Community Health Assessment
Step 2: Strategic Planning
Step 3: Implementation Strategy13
Step 4: Program Implementation13
Step 5: Evaluation
Data Collection14
Community Health Survey (CHS):14
Focus Groups:14
Stakeholder Survey:
Prioritization15
Robert Wood Johnson Foundation Framework16
Target Population
Community Health Assessment Findings17
Community Impact

Response Since 2015 GCACHA19
Success Measures20
2018 Community Health Assessment Data21
Primary Data and Community Engagement21
Stakeholder Survey Results21
Target Population Focus Group Results
Giles County Area Community Health Survey Results
Secondary Data67
Demographics
Social and Economic Factors
Health Behaviors
Clinical Care
Physical Environment
Health Outcomes / Health Status of the Population90
Appendices
Appendix 1: Community Health Improvement Process97
Appendix 2: Gantt Chart
Appendix 3: Community Health Need Prioritization99
Appendix 4: Community Health Survey100
Appendix 5: Stakeholder Survey104
Appendix 6: Stakeholder Survey and Focus Group Locations
Appendix 7: Community Resource List106
Appendix 8: Links and References to Other Community Health Assessments and Data

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 Carilion Clinic Community Health & Outreach at <u>communityoutreach@carilionclinic.org</u>.

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 Giles County Area 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 2018 Giles County Area Community Health Assessment (GCACHA) was due to the strong leadership and participation of its Project Management Team, the Project Support Team, members of Giles County FOCUS (FOCUS on Communities Utilizing Services), and the Community Health Assessment Team. 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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Giles County FOCUS

The Giles County FOCUS Program is a formalized network of service providers that interact extensively with underserved Giles citizens. Through "focused" and coordinated service provision; addressing the physical, educational and economic well-being of individuals, families and communities, FOCUS elevates the status of their human condition(s).

The mission of FOCUS is to lead positive social change for families and individuals living in Giles County through the coordination of advocacy, information, opportunity and community involvement. Its vision is three fold: that every child is provided relationships to help them achieve his/her greatest potential and participate in and contribute to the community; that every parent is provided relationships to help them improve the quality of life for their families; and that every adult is provided the relationships to help them become responsible, participating citizens.

Community Health Assessment Team (CHAT)

Carilion Clinic's CHAs 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 CHA 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. In the Giles County area, FOCUS serves as the CHAT and additional key community leaders are invited to participate.

CHAT Members

This list menues i	nembers that attended 50% (2) or mo	i e of the char meetings.
Name	Organization	Area of Expertise
Michelle Ballard	Monroe County Health Centers	Healthcare Admin. & Operations
Aaron Boush	Carilion Clinic	Hospital/Community Health
Juli Dellorso	NRV Cares	Preventing Child Abuse & Neglect
Mona DiGiulian	NRV CARES	Child Abuse/Neglect
Jeff Dinger	Giles County Special Projects	County FOCUS/Projects Coordinator
Sharon Edwards	New River Community Action, Inc.	Homeless & Housing
Shelby Kelley	CHIP	Children/Parenting
Valerie Massie	Giles Day Report Center	Substance Abuse & Mental Health; Life Skills
Amy Michals	Carilion Clinic	Public Health/Community Health Assessment
Angie Nichols	NRCA-CHIP Coord	Child Abuse/Healthy Families & Children
Trina Porterfield-Pifer	New River Community Action, Inc. Head Start Program	Nutrition
Brett Rader	Pembroke Management Inc Housing Voucher	Housing
Dr. Pam Ray	VA Dept of Health	Outreach & Education
Leslie Sharp	New River Valley Community Services	Mental Health, Substance Use, DD
Stephanie Spencer	Carilion Giles Community Hospital	Community Health
Sierra Steffen	Carilion Clinic	Health Data Analytics, Statistics
Steve Taylor	Giles County Day Report Center	Substance Abuse/Life Skills
Ruth Urquhart	Monroe County Health Center - Peterstown	FQHC - Family Practice
Kristie Williams	Carilion Giles Community Hospital	Health Care

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

Executive Summary

Carilion Clinic, the New River Health District, and FOCUS partnered to conduct the 2018 GCACHA. Together with partners, we are committed to the essential work of improving and maintaining the health of our communities. It is important to assess the health concerns of each community periodically to ensure that current needs are being addressed. A Community Health Assessment (CHA) 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 CHA and the public availability of its findings is intended to enable the community to effectively plan the vital work of maintaining and improving health.

The finding of the 2018 GCACHA 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. Child abuse / neglect
- 3. Transportation / transit system
- 4. Poor diet
- 5. Access to mental / behavioral health services
- 6. Access to specialty care (general)
- 7. Lack of health literacy / lack of knowledge of healthy behaviors
- 8. Access to substance use services
- 9. Culture: healthy behaviors not a priority
- 10. Lack of exercise

This report contains the findings of the 2018 GCACHA, including primary and secondary health and social determinant data on the service area and specific populations.

Description of the Community

The Giles County area, including Giles County, Virginia and Monroe County, West Virginia is the service area for the GCACHA. Giles County is a picturesque region of Appalachian America, with mountainous terrain, cliffs, rivers and streams. It is part of the New River Valley, which includes the counties of Floyd, Giles, Montgomery (including the towns of Christiansburg and Blacksburg), and Pulaski and the independent City of Radford. The County is rural and topographically isolated with 48.6 persons per square mile compared 202.6 persons per square mile in Virginia as a whole¹. It is a part of the New River Valley Planning District (Health Planning District 4) and is commonly referred to as Rural Appalachia². The area is bordered on the south by the Blue Ridge Mountains and the north by the Alleghany Mountains. One of the oldest rivers in America, the New River, runs through this region³.

The counties of Summers, Monroe, and Mercer, West Virginia border Giles County to the north, northwest. In addition, the County is bordered by the Virginia counties of Craig (east); Montgomery (southeast); Pulaski (south); and Bland (west).

Giles County is approximately 356 square miles⁴. The area is comprised of nine towns and is delineated by three voting districts: Pembroke, Eggleston, and Newport (Eastern District); Pearisburg, Staffordsville, and White Gate (Central District); and Glen Lyn, Rich Creek, and Narrows (Western District). Of these towns, Pearisburg, Narrows, Glen Lyn, and Rich Creek are federally designated as rural census tracts⁵. Pearisburg is the County Seat. In terms of governance, Giles County is governed by a County Board of Supervisors that controls the county budget. It is the site of the majority of health and human services available to the residents of Giles County⁶.

Mountains characterize the geography of Giles County. Many of the rural roads are unpaved and steep, with the highest peak at 4,348 above sea level. Much of the County consists of national forest. Giles County achieved major motion picture fame by serving as the geographic backdrop in the 1987 Hollywood blockbuster, "Dirty Dancing." The vacation lodge where the movie was filmed is one of the County's largest seasonal employers⁷.

Under the peak of Angel's Rest and surrounded by the beautiful mountains of Pearisburg, VA, lies Carilion Giles Memorial Hospital. For more than 50 years, this hospital has served the residents, neighbors, and visitors of Giles County. In 2002, CGCH was granted a government designation of Critical Access in a rural setting and today it is one of the leading hospitals of this kind in the nation.

¹ U.S. Census Bureau, 2017, QuickFacts. https://www.census.gov/quickfacts/fact/table/va,gilescountyvirginia/PST045217

² Virginia Department of Health, New River Health District. http://www.vdh.virginia.gov/new-river/

³ New River Water Trail. http://www.newriverwatertrail.com/NRWT/history-of-the-new-river/

⁴ U.S. Census Bureau, 2017, QuickFacts. https://www.census.gov/quickfacts/fact/table/va,gilescountyvirginia/PST045217

⁵ United States Census Bureau, Geography. https://www.census.gov/geo/reference/gtc/gtc_place.html

⁶ Giles County, Virginia's Mountain Playground. http://virginiasmtnplayground.com

⁷ Giles County, A Rich History. http://virginiasmtnplayground.com/history/

Secluded in the Allegheny Highlands, Monroe County was separated from Greenbrier County, West Virginia in 1799, where its economic basis has been farming and timber harvesting ever since⁸. Monroe has a population of 13,402 with the population per square mile of 28.6 and has 472.75 square miles of land⁹.

Community Demographics

The 2018 GCACHA revealed differences in size and population and significant disparities both in health and in social determinants. The 2012-2016 American Community Survey (ACS) found the total population of the counties of Giles and Monroe to be 16,871 and 13,496¹⁰. For Giles County, the ACS predicts positive future population change at 2.2% compared to the Commonwealth of Virginia at 9.2%. Median age ranges from 43.6 Giles County to 47.0 in Monroe County¹¹. The ACS finds that both areas have a larger percentage of the population that is White than in the Commonwealth of Virginia as a whole. In Giles County, 96.7% of the population is White and 2.5% of the population is Black¹².

All of Giles County is a designated Medically Underserved Area (MUA) and a Health Professional Shortage Area (HPSA) for primary care, dental and mental health professionals¹³.

⁸ http://www.monroecountywv.net/About.html

 ⁹ U. S. Census Bureau, QuickFacts. https://www.census.gov/quickfacts/fact/table/monroecountywestvirginia/PST045217
 ¹⁰ U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table S0101.

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S0101&prodType=table ¹¹ U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table S0101

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S0101&prodType=table ¹² U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table DP05

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP05&prodType=table ¹³ Department of Health and Human Services, Health Resources and Services Administration Data Warehouse (2018)

 $https://datawarehouse.hrsa.gov/tools/analyzers/HpsaFindResults.aspx\ and the set of th$

https://datawarehouse.hrsa.gov/tools/analyzers/MuaSearchResults.aspx

Assessment Service Area

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 MUAs and Health Professional Shortage Areas (HPSAs).

Carilion Giles Community Hospital is located in Giles County, Virginia. In fiscal year 2017, CGCH served 8,811 unique patients. Patient origin data revealed that during this year, 88.57% of patients served by CGCH lived in the following localities:

- Giles County, VA (68.41%)
- Monroe County, WV (20.16%)



Existing Resources

Giles County is part of the New River Valley, a region flush with resources including food, health and human services, arts and culture and outdoor amenities. Health and human service organizations work to reduce the disparities in access to care and access to resources that still exist for many residents of the region. Please see Appendix 7 for a list of community resources serving Giles County.

Carilion Giles Community Hospital

Carilion Giles Community Hospital (CGCH) is a modern, 25-bed Critical Access hospital, offering emergency services recognized nationally for quality and patient satisfaction in addition to highquality inpatient care and an extended care recovery program (Swing Bed) that gives eligible patients an opportunity to grow stronger before going home. The main entrance serves as the access point for all walk-in patients needing emergency care, diagnostics, rehabilitation and other outpatient services. CGCH works to bring new services to the community as the need is identified¹⁴.

CGCH is part of Carilion Clinic, a not-for-profit health care organization based in Roanoke, Virginia. It is mission-driven, focusing everyday on improving the health of the communities they serve. Through a comprehensive network of hospitals, primary and specialty physician practices, wellness centers, and other complementary services, quality care is provided close to home for nearly 1 million Virginians. With an enduring commitment to the health of our region, we also seek to advance care through medical education and research, helping our community stay healthy and inspire our region to grow stronger.

Community Health Assessment Process

Method

Carilion Clinic, the New River Health District, and FOCUS partnered to conduct the 2018 GCACHA.

A 19-member Community Health Assessment Team (CHAT) oversaw the planning activities. The service area included those living in the counties of Giles (VA) and Monroe (WV). We strive to target the underserved/vulnerable populations disproportionately impacted by the social determinants of health, including poverty, race/ethnicity, education, and/or lack of insurance.

Beginning in October 2017, primary data collection included a Community Health Survey, focus groups with key stakeholders and providers and focus groups with target populations. Secondary data collected include demographic and socioeconomic indicators as well as health indicators addressing access to care, health status, prevention, wellness, risky behaviors and the social environment.

⁴Carilion Giles Community Hospital. Retrieved from: <u>https://www.carilionclinic.org/locations/carilion-giles-community-hospital</u>

Collaboration

In the Giles County area, FOCUS has served as the convening partnership of health and human service organizations. CGCH has partnered with the New River Health District and FOCUS to conduct the 2018 Community Health Assessments and respond to identified community health priorities. CGCH participates regularly on FOCUS and recruited CHAT members through FOCUS for the 2018 GCACHA. CGCH, FOCUS and the New River Health District partnered in the planning and execution of the 2018 GCACHA and will continue to partner and convene others to participate in strategies to address identified needs.

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 Shewhart¹⁵. It consists of five distinct steps: (1) conducting the CHA, (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.

Step 1: Conduct Community Health Assessment

The first step in the Community Health Improvement Process is to conduct a Community Health Assessment. Led by a Community Health Assessment Team (CHAT), the assessment involves collection of primary and secondary data from numerous sources. Primary data include responses from a community health survey, open to all residents of the assessment area, as well as focus groups conducted with stakeholders and with target populations. The target populations are defined as underserved/vulnerable populations disproportionately impacted by the social determinants of health, including poverty, race/ethnicity, education, and/or lack of insurance.

Step 2: Strategic Planning

After the completion of the CHA, the CHAT enters the strategic planning phase of the process. First, the CHAT must decide what community health needs to focus on and provide explanation as to what issues will be the focus and why. To help with this determination, the CHAT participates in an activity charting the top priorities on an axis, based on the feasibility and potential impact of solutions that could be implemented locally to address these issues.

After the priority areas (needs) have been identified, the team participates in strategic planning. Break-out session format is used for the planning session. CHAT members spend the strategic planning session developing a framework of goals and strategies to use as a starting point for a planning retreat in the coming summer and fall. In future strategic planning sessions, FOCUS members will identify alignment opportunities between organizations and system changes that are likely to lead to improvement, establish measures that will tell if changes are leading to improvement, and select new or existing evidence-based strategies for the community that are most likely to succeed in addressing the needs.

¹⁵ Science of Improvement: How to Improve. (2014). Institute for Healthcare Improvement. Retrieved from http://www.ihi.org/resources/Pages/HowtoImprove/ScienceofImprovementHowtoImprove.aspx

Step 3: Implementation Strategy

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

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

Step 4: Program Implementation

Carilion Clinic Community Health & Outreach and the CHAT will establish and monitor new and ongoing community health programs implemented to respond to the community health needs identified in the CHA. New programs will be piloted on a small scale first and will be continually assessed and improved using the PDSA cycle¹⁶. The goal of the PDSA cycle is to make small, sustained improvements over time. Relevant data are 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 with other organizations in the community. The PDSA cycle is ongoing 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 Health and Outreach.

Progress will be reported to CGCH's Board of Directors from time to time, which may include periodic updates in the Administrator's Report throughout the year, for each community health need identified in the last CHA cycle.

In addition, the Board will be informed of community grant awards given by the hospital to fund health safety net programs in the community. Decisions on 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 CHA. For more information, see https://www.carilionclinic.org/community-health

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

¹⁶ Plan –Do-Study-Act (PDSA) Cycle (2008).

Retrieved from: https://innovations.ahrq.gov/qualitytools/plan-do-study-act-pdsa-cycle

Data Collection

The CHAT leads the assessment and oversees primary and secondary data collection. Beginning in October 2017, primary data collection included a Community Health Survey, focus groups with key stakeholders and providers, and focus groups with target populations. 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.

Community Health Survey (CHS): The CHS consists of 38 questions for adults, age 18 and older, 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 zip code level. This survey is not a scientific survey and the survey method uses oversampling techniques of the target population (please see Appendix 4 for Carilion Giles Community Hospital's CHS). Efforts are made to keep as many questions consistent from the previous CHS for result trending purposes. An incentive for completing the CHS was provided to encourage participation.

Focus Groups: Focus groups are conducted with many groups of individuals in an effort to best understand health in the Giles County area. The goal of the focus groups is to identify barriers to care and gaps in services for primary care, dental and mental health/substance use services for the population. An effort was made to meet with groups representing each lifecycle (parents and women of child-bearing age, adults, and the elderly) living in MUAs. We strive to target our assessment of health care and barriers for those underserved and vulnerable populations disproportionately impacted by the social determinants of health. Information provided by focus groups was analyzed to understand themes of group responses.

For each group, there were no more than 15 participants. A facilitator and scribe conducted each focus group meeting and the audio of the meetings were recorded and later transcribed to be analyzed. In order to contribute, participants signed consent forms prior to each meeting agreeing on the format of the meeting, how information would be used and to ensure confidentiality. The groups were held in convenient, neutral locations and/or in sites where participants already congregate. Snacks and beverages were provided.

The script for the focus groups is simple and consists of six open-ended questions, as detailed below:

1. In one or two words, how would you describe good health?

2. Looking at this list, what things do you need to have good health like what we've described? Do you have these things?

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

4. What do you, or your family and friends, do when you have a toothache or need your teeth cleaned?

5. 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 use?

6. Is there anything else you would like to tell us about your health or the health of others in the Giles County Area?

Stakeholder Survey: A six-question, open-ended survey is collected from key community stakeholders with insight into the health of the community, more specifically of those in target populations. Stakeholders are identified by the CHAT or by the Project Management Team.

Prioritization

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 3 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.

Robert Wood Johnson Foundation Framework

According to the Robert Wood Johnson Foundation's (RWJF) County Health Rankings¹⁷, 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 areas¹⁸. 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"¹⁹.

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.

Our community-based programs and community grants are categorized using the RWJF framework for what influences health: health behaviors; social and economic factors; clinical care access and quality; and physical environment²⁰. We measure our success by tracking related indicators at the regional, local, and zip code level, as well as by monitoring change and improvement in the County Health Rankings of our municipalities.

Target Population

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. Populations are examined across the different life cycles including parents of children and adolescents, women of child-bearing age, adults, and the elderly as well as across various race and ethnic groups.

¹⁷ County Health Ranking & Roadmaps. Retrieved from: <u>http://www.countyhealthrankings.org/</u> ¹⁸ Robert Wood Johnson Foundation. Retrieved from:

https://www.rwjf.org/en/library/interactives/whereyouliveaffectshowlongyoulive.html

¹⁹ Social Determinates of Health. Retrieved from: <u>https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-of-health</u>

²⁰ County Health Ranking & Roadmaps. Retrieved from: <u>http://www.countyhealthrankings.org/</u>

Community Health Assessment Findings

The finding of the 2018 GCACHA 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. Child abuse / neglect
- 3. Transportation / transit system
- 4. Poor diet
- 5. Access to mental / behavioral health services
- 6. Access to specialty care (general)
- 7. Lack of health literacy / lack of knowledge of healthy behaviors
- 8. Access to substance use services
- 9. Culture: healthy behaviors not a priority
- 10. Lack of exercise

The results of the assessment reflected a variety of social determinant of health factors, showing the understood impact that these factors have on overall health. The findings revealed distinct disparities in health for those living in poverty. As in years past, the Giles and Monroe counties vary in health factors and social determinants, but generally perform worse than the Commonwealth of Virginia as a whole. Academic attainment rates were lower as was median household income, more children are eligible for free and reduced lunch, and unemployment rates, while improving, are still lagging the statewide and national averages, impacting the social determinants of health.

Many of the respondents to the Community Health Survey and focus group participants, whether insured or uninsured, noted that the cost of care keeps them from accessing preventive care and services. Survey responses revealed "Cost" to be the top reason that people feel prevents them from getting the healthcare they need.

Stakeholders identified lack of transportation as the biggest issue that impacts health, followed by substance use. Lack of transportation was also identified as the biggest barrier to health, followed by lack of insurance. 100% of target population focus groups also brought up access to transportation in discussions.

According to the American Community Survey (ACS), 31.5% of people in Giles County and 45% of people in Monroe County, WV, live below 200% of the Federal Poverty Level (FPL) compared to 26.5% for the Commonwealth of Virginia²¹. This rate is even higher for children in both Giles and Monroe counties.

²¹ U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table C17002. https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS 16 5YR C17002&prodType=table

The rate of poverty can be seen through free and reduced lunch qualifications in school systems. As a whole in the 2017/2018 school year, 47% of students in Giles County qualified²².

Graduation rates in Giles County have improved overall in the last couple of years, but still fell shy of the state average of 91.3% in 2017 at 89.9%²³. Narrows High School outperformed the state rate while Giles High School underperformed. When evaluating the academic attainment rates for the population 25 and over, Giles County and Monroe County have lower overall education levels than the Commonwealth of Virginia rate of 88.6% of residents with a high school degree or higher and 36.9% with a Bachelor's degree or higher. In Giles, an average of 85.2% of people have a high school degree or higher and 15.9% have a Bachelor's degree or higher. Monroe County compares at 81.4% with a high school degree or higher and 13.4% with a Bachelor's degree or higher²⁴.

When asked about the most important issues that affect health in our community, 58.1% of survey respondents answered "alcohol and illegal drug use," followed by 39.1% answering "cancer," and 38.2% answering "obesity/overweight." Stakeholders responded that substance use and transportation were the most important issues.

The Virginia Department of Health reports that in 2016, the emergency department (ED) opioid overdose rate was 130.5 overdoses per 100,000 people in Giles County. This compares to the state ED opioid overdose rate of 103.5 overdoses per 100,000 population²⁵. The Commonwealth of Virginia, along with many other states, has declared opioid addiction to be a public health emergency and the health commissioner has issued a standing order making Naloxone available to any resident to treat an overdose²⁶.

Narcan (Naloxone) use rates have been significantly lower than the state average in Giles County at 5.9 per 100,000 population according to Virginia Department of Health data. Fatal prescription overdose rates have been worse than the state rate of 5.5 per 100,000 at 11.9 per 100,000 population²⁷. The CHAT prioritized "alcohol and drug use" as the top health need, recognizing the significance of this crisis in our region.

When asked what health care services are hard to get in our community, survey respondents answered that "cancer care" (39%) was the most challenging to access, followed by "adult dental care" (32.4%), "specialty care" (32.2%), "mental health / counseling services" (30.8%) and "substance abuse services for drugs and alcohol" (28.1%).

²⁶ Virginia declared opioid emergency, makes antidote available to all. Retrieved from: https://www.washingtonpost.com/local/virginia-politics/virginia-declares-opioid-emergency-makes-antidote-available-toall/2016/11/21/f9b4f348-booe-ne6-beic-8cec35biad25_story.html?noredirect=on&utm_term=.f0386afe4b79

²⁷ Virginia Department of Health <u>http://www.vdh.virginia.gov/data/opioid-overdose/</u>

²² Virginia Department of Education National School Lunch Program Free and Reduced Price Eligibility Reports http://www.doe.virginia.gov/support/nutrition/statistics/

²³ Virginia Department of Education, Virginia Cohort Reports

http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml ²⁴ U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1501 https://factfindor.congus.gov/faces/tablecorriges/inf/page/productrigew.html?gid=ACS_16_cVR_S1501

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1501&prodType=table

²⁵ Virginia Department of Health <u>http://www.vdh.virginia.gov/data/opioid-overdose/</u>

Community Impact

Response Since 2015 GCACHA

Carilion Clinic 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.

Our community-based programs and community grants are categorized by using the RWJF framework for what influences health: health behaviors; social and economic factors; clinical care access and quality; and physical environment.

In response to the health needs that were identified in the 2015 CGACHA, Community Health and Outreach hired a part-time Health Educator to serve the Giles County area. Since fall of 2015, the hospital has provided 118 holistic health events that included a variety of health education, health screenings and immunizations that reached 3,108 people. In addition, the hospital has started a Better Breathers Club and a diabetes support group. CGCH also gave four community grants that reflect the RWJF framework and address wellness, transportation, and access to services, and child abuse prevention.

To address tobacco use, CGCH provided education about tobacco dangers in partnership with the Giles Youth Adult Partnership, expanded the 1-800-QUIT-NOW program, and held trainings with staff and physicians about smoking cessation. The hospital addressed substance abused by enrolling Emergency Department physicians in the Commonwealth of Virginia's prescription monitoring program, adopted new guidelines for narcotic prescribing, and updated pain management guidelines.

Carilion and community partners have worked hard improve access to services in the area. To increase access to mental health, CGCH is piloting tele-psychology at the Giles clinic and added infrastructure in the emergency department. To improve access to dental care, the hospital has increased awareness about dental services offered by the Community Health Center of Giles and provides referrals to these services. CGCH is also expanding specialty care by building a new addition to the hospital, which is currently underway, that will provide specialty services.

Carilion also created physical fitness opportunities for staff by building a fitness studio at the hospital and encourages and provides wellness opportunities for staff.

Success Measures

As a result of Carilion Clinic, the New River Health District, FOCUS partners' investments and the coordinated programming of community organizations, RWJF County Health Factor Rankings have improved overall from 2016 -2018 for Giles County.

In addition to County Health Rankings, Carilion Clinic monitors program outcomes for internal health programming, as well as for grant funded programs. A scorecard is being created to track specific secondary, primary, and program outcome indicators.

The analysis below shows directional trends between the 2015 and 2018 CHS results.

* Denotes significant change from 2015 measurement.

Right direction:

- Using dental care services *
- Having eye exam in past 12 months
- Having dental exam in past 12 months
- ED visit in past 12 months
- Affording medicine needed for health conditions
- Having a colonoscopy
- Having a mammogram
- Neighborhood supporting healthy eating
- Easy to get affordable fresh fruits and vegetables
- Time since last doctor check-up
- Having enough money for food for family
- Time since last dental clinic visit
- Having health insurance *
- Being told by a doctor that you have:
 - Depression or anxiety *
 - High blood pressure
 - Obesity / Overweight
 - High cholesterol
 - High blood sugar or diabetes
 - Mental health problems

Wrong direction:

- Taking medicine doctor tells me to
- Having a Pap smear
- Neighborhood supporting physical activity
- Being told by a doctor that you have:
 - o Asthma

2018 Community Health Assessment Data

Primary Data and Community Engagement

Stakeholder Survey Results

Throughout the CHA process, community stakeholders, leaders, and providers were encouraged to complete the Stakeholder Survey (Appendix 5: Stakeholder Survey). This survey provided an additional perspective to the needs and barriers to health facing our community. Stakeholder focus groups were held in addition to Stakeholder Survey distribution, to ensure all responses were captured. The survey was available online and in print, and was distributed at meetings and focus groups.

In total, **53** surveys were completed: online surveys print surveys focus groups

Stakeholders identified lack of transportation as the biggest issue that impacts health, followed by substance use. Lack of transportation was also identified as the biggest barrier to health, followed by lack of insurance. Though access to services was frequently identified as an important issue impacting health, socioeconomic factors were more apparent as barriers to these healthy services.

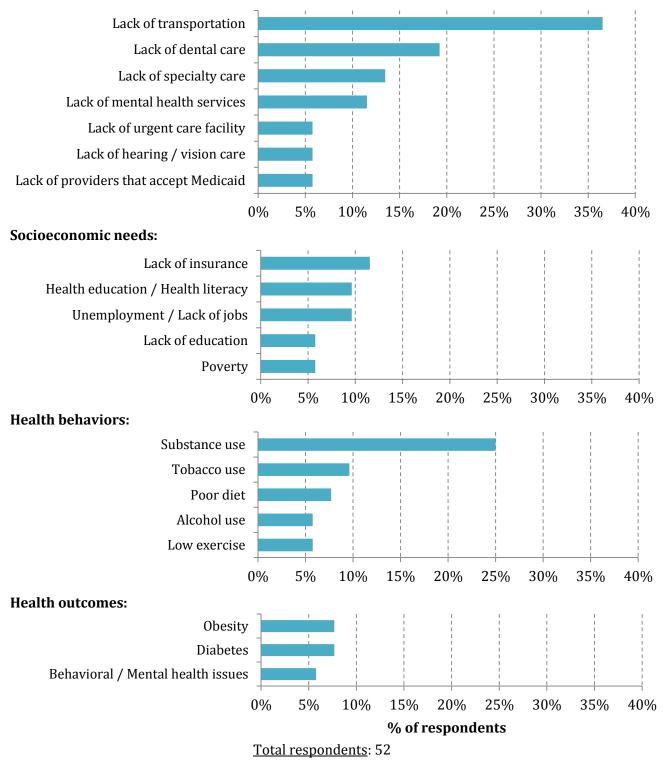
The entire area and outlying areas were both identified as localities with the greatest unmet need. The population groups identified with the greatest unmet need were the elderly, closely followed by young adults, and those with low income.

Respondents identified increasing access to transportation as the biggest change the community could make to meet the needs and reduce the barriers to health. Education was the second most frequent response.

Stakeholders were asked the following questions. Main themes, subcategories, and percent of respondents that identified them are graphed.

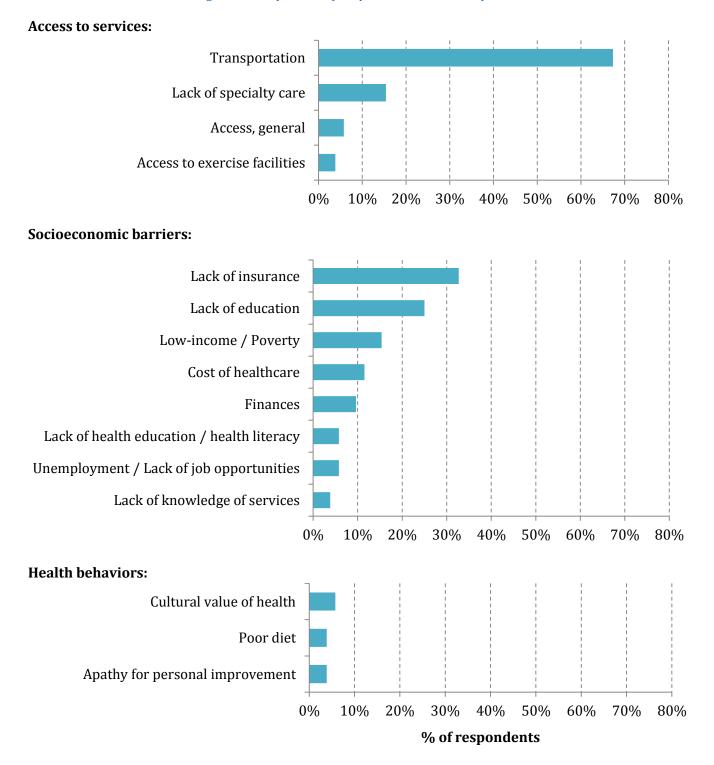
1. What are the most important issues (needs) that impact health in your community? *Main themes, subcategories, and percent of respondents that identified them:*

Access to services:



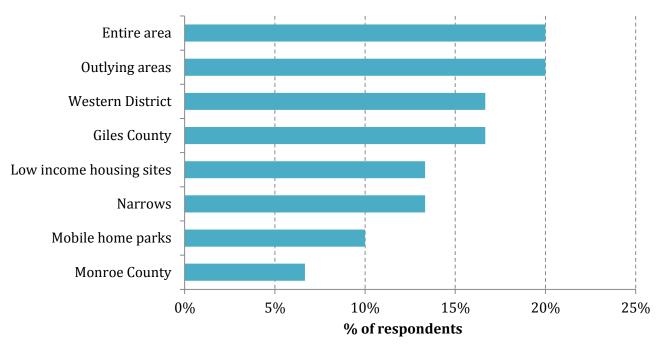
2. What are the barriers to health for the populations you serve?

Main themes, subcategories, and percent of respondents that identified them:



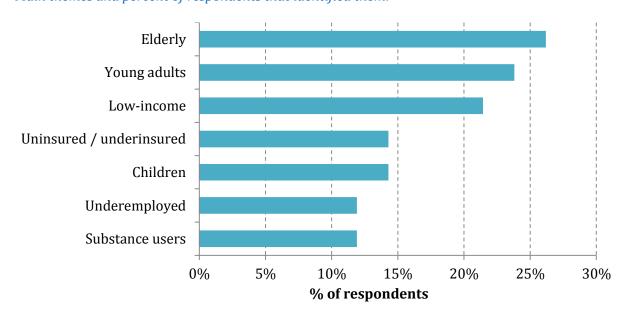
Total respondents: 52





Total respondents: 30

4. Is there one population group with the greatest unmet need? *Main themes and percent of respondents that identified them:*



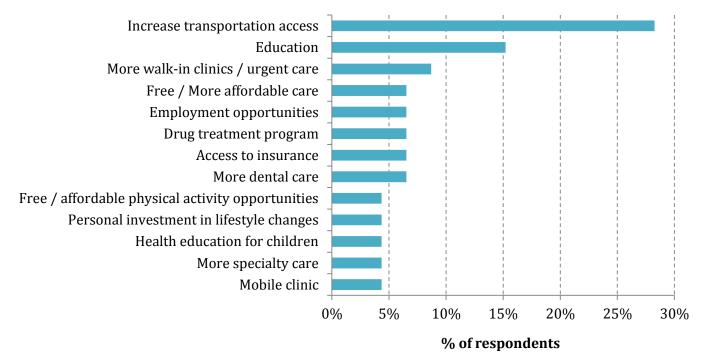
Total respondents: 42

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

AA	Giles Health and Family Center
Adult daycare transportation	Giles Senior Center
Agency on Aging	Head Start
Cardiac rehab maintenance program	Health Department
CareMap program	Home health
Carilion Charity Care	Lion's Club
Carilion Clinic	LogistiCare
Children recreation programs	Meals on Wheels
CHIP	Medicaid/Medicare
Christian Mission	Monroe Health Clinic
Churches	New Life Recovery
Community Health Center	New River Valley Community Action
Community nursing outreach	New River Valley Community Center
Department of Social Services	New River Valley Community Services
Dialysis centers	NRV Cares
Empowergize class at CGCH	Rotary Club
ЕМТ	Senior walking trails
Family practice offices	SNAP
FMRS Health Systems	Urgent Care
Focus On Communities Utilizing Services (FOCUS)	Virginia Cooperative Extension
Giles County Public Schools	Virginia Department for Aging and Rehabilitative Services
Giles County Wellness Center	WIC
Giles Free clinic	

6. If we could make one change as a community to meet the needs and reduce the barriers to health, what would that be?





Total respondents: 46

Target Population Focus Group Results

Target population focus groups were conducted to capture the needs and barriers to health for the uninsured, underinsured, low-income, minority, senior, and chronically ill populations. Focus group locations were chosen based on their service to target populations, and where existing groups already met.

Two target population focus groups were held and were asked questions related to needs and barriers to health, and access to primary, oral, and mental health care.

Focus group locations:

Giles County Senior Center:

The Giles Senior Center works with locals to bring their seniors up to the minute information on classes, health screenings, recreational opportunities, and trips that help with enhancing their lives.

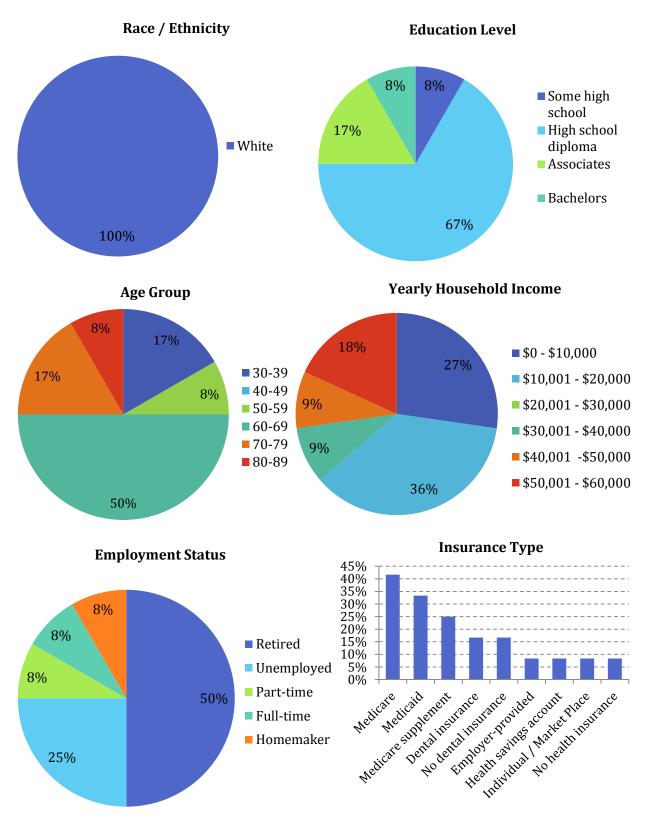
For more information, visit: <u>http://virginiasmtnplayground.com/seniors/</u>

Community Health Center of NRV, Pearisburg:

The Community Health Center of the New River Valley has provided over 30 years of medical and dental services to the area, and serves people of all ages and circumstances, regardless of ability to pay.

For more information, visit: http://chcnrv.org/

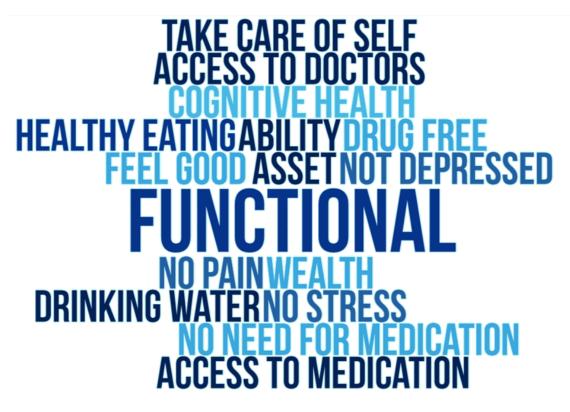
Focus Group Demographics



Focus Group Responses

To begin the focus groups, attendees were asked to describe good health. A word cloud was created to show results; the larger the word is in the cloud, the more a term was used.

1. In one or two words, how would you describe good health?

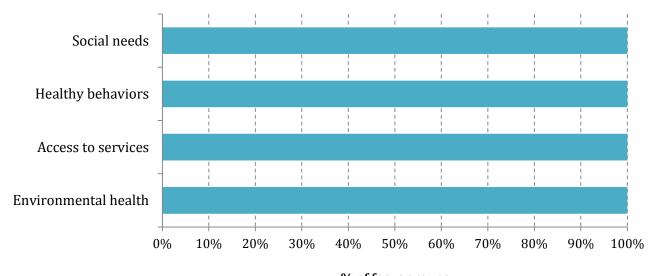


Responses from the rest of the questions revealed that focus groups were aware of the many factors that influence good health- not just clinical care, but socioeconomic factors as well. These social needs can limit access to services and encourage home remedies or neglect in place of preventive and regular care.

Though socioeconomic factors can impede good health, relying on the support of family and friends was frequently discussed regarding physical and mental health care. Focus group attendees often relied as much on social support as clinical care. One focus group attendee described this of their community, saying *"I love this county. I have my coworkers, friends, church group, and family- I feel like I have a large support group. People don't just call you and check up on you everywhere else."*

Long wait times, challenges with pain management, access to care, and lack of transportation were also common themes. Though these and many other barriers exist, attendees recognized the need for a comprehensive approach to health, including socioeconomic factors, healthy behaviors, access to clinical care, and a healthy environment.

2. Looking at this list, what things do you need to have good health like what we've described?



Main themes and percent of focus groups that identified them:

% of focus groups

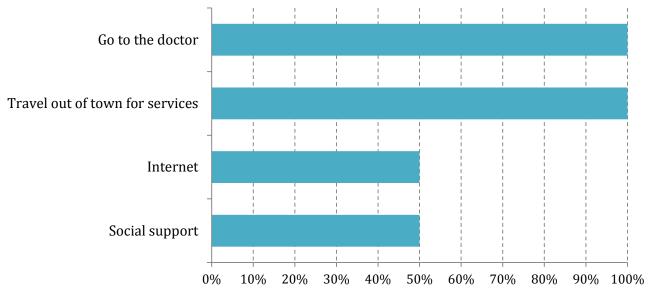
Subcategories of main themes:

Social needs: Safety Money Support Social activities Acceptance of mental health issues

Healthy behaviors: Exercise Motivation Knowledge Good attitude Take vitamins Affordable, healthy food Personal prioritization of health

Access to services: Local care Transportation Access to medication Access to care- substance use treatment

Environmental health: Good home Clean water **3.** What do you, or your family and friends, do when you need a check-up or are sick? *Main themes and percent of focus groups that identified them:*



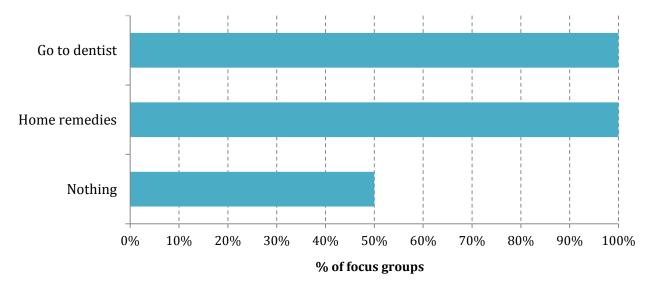
% of focus groups

Subcategories of main themes:

Go to the doctor: UVA Urgent Care Carilion Clinic Emergency room Health Department Community Health Center

Social support: Go to church Call family / friends

4. What do you, or your family and friends, do when you have a toothache or need your teeth cleaned?

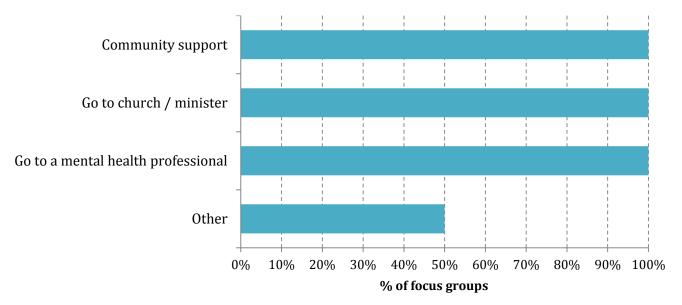


Main themes and percent of focus groups that identified them:

Subcategories of main themes:

Go to dentist: Community Health Center

Home remedies: Oil of clove OTC medication Pull teeth yourself 5. 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 abuse? *Main themes and percent of focus groups that identified them:*



Subcategories of main themes:

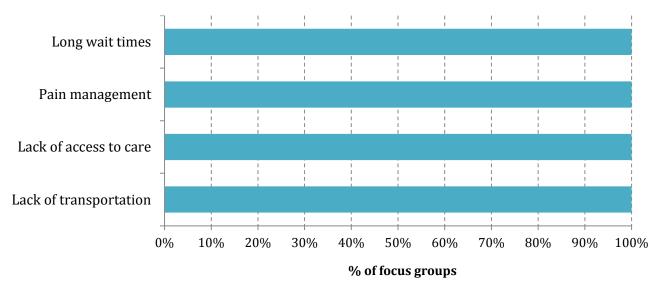
Community support: AA Peer support groups Talk to family / friends

Go to a mental health professional: St. Albans Carilion Clinic Emergency room Community Health Center Counseling through Virginia Tech students

Other:

Call hotlines Sheriff's office Bethany Hall, Roanoke

6. Is there anything else you would like to tell us about your health or the health of others in the Giles County area?



Main themes and percent of focus groups that identified them:

Other responses:

Stigma Obesity Diabetes Chronic disease Abuse of the system Coordination of care No places to exercise Lack of support groups Lack of physical activity Knowledge of resources Lack of swimming facility Affordability of healthcare/medication Finding doctors that accept certain insurance

Giles County Area Community Health Survey Results

A Community Health Survey was conducted as part of the Giles County Area Community Health Assessment. This survey was used to evaluate the health of the community and identify potential geographic areas to target improvements. Input and oversight of survey development was provided by the Community Health Assessment Team (CHAT).

A 38-question survey instrument was developed that asked questions about socioeconomic factors, access to medical, dental, and mental health care, healthy behaviors, physical environment, health outcomes, and demographics. The survey instrument included commonly used questions and metrics from the following established community surveys:

- Community Themes and Strengths Assessments, National Association of County and City Health Officials (NACCHO), Mobilizing for Action through Planning and Partnerships (MAPP)
- Community Healthy Living Index, YMCA
- Behavioral Risk Factor Surveillance System, Centers for Disease Control (CDC)
- National Health Interview Survey, Centers for Disease Control (CDC)
- Youth Risk Behavior Surveillance System, Centers for Disease Control (CDC)
- Martin County Community Health Assessment, Martin County, North Carolina
- Previous Giles County Area Community Health Surveys

Both an English and Spanish version of the survey was available (Appendix 4: Community Health Survey).

The CHAT identified target populations, collection sites, and methods of survey distribution. The population of interest for the survey was Giles County area residents 18 years of age and older. The Giles County area included the CHA service area: Giles County, VA and Monroe County, WV. The following subpopulations were especially targeted for sampling:

- Underserved/vulnerable populations disproportionately impacted by the social determinants of health including:
 - o Poverty
 - Race/ethnicity
 - Education
 - Lack of insurance

A non-probability sample method was used, where respondents were not randomly selected. Although the survey was available to all residents living in the Giles County area, oversampling of the targeted subpopulations occurred through specific outreach efforts. Oversampling of the targeted subpopulation ensured that needs and assets specific to this subpopulation of interest were captured.

Surveys were distributed in October 2017 through February 2018. Over 10 organizations, agencies, and community members assisted in the distribution of the survey. A drawing for a \$50 grocery gift card for those who completed the survey was offered as an incentive.

The survey instrument was available via the following methods:

- Survey Monkey link (www.surveymonkey.com/r/2018CHA)
- Phone line (888-964-6620)
- Paper surveys (collected by volunteers and/or staff of partner agencies)

Outreach strategies for survey distribution included:

- Media coverage by the local television and newspaper announcing the URL for the survey
- Facebook
- Face-to-face survey interviews at sites / agencies that serve the target populations using volunteers and/or staff
- Flyers and posters distributed throughout the community with survey URL and phone line information
- Survey URL posted on partner agency websites

In total, **481** surveys were collected:

304 paper surveys

176 online surveys

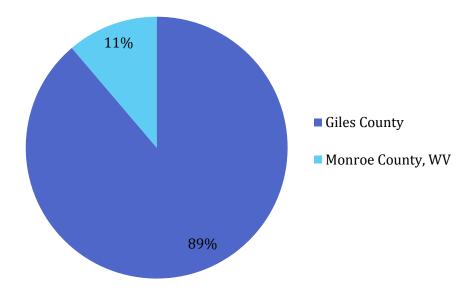
1 phone surveys

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

Community Health Survey Demographics

County of residence

Locality	#	%
Giles County	427	88.8%
Monroe County, WV	54	11.2%
Total responses:	481	



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

	#	%
Employer Provided Insurance	210	47.5%
Dental Insurance	104	23.5%
Medicare	93	21.0%
Medicaid	72	16.3%
Medicare Supplement	63	14.3%
No Dental Insurance	55	12.4%
Individual / Private Insurance / Market Place / Obamacare	40	9.1%
Health Savings / Spending Account	36	8.1%
No Health Insurance	35	7.9%
Government (VA, Champus)	17	3.9%
COBRA	1	0.2%
Answered	442	
Skipped	39	

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

	#	%
Not applicable- I have health insurance	232	84.4%
Too expensive / cost	35	12.7%
Unemployed / no job	10	3.6%
Not available at my job	7	2.6%
I don't understand Marketplace / Obamacare Options	0	0.0%
Student	0	0.0%
Other	5	1.8%
Answered	275	
Skipped	206	

What is your zip code?

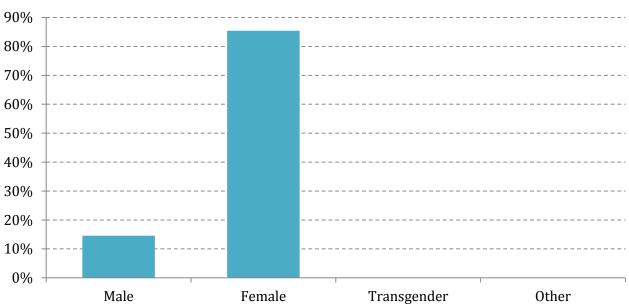
Zip Code	#	%
24134	157	34.9%
24124	100	22.2%
24136	69	15.3%
24963	24	5.3%
24147	20	4.4%
24150	16	3.6%
Other	64	14.2%

What is your age?

Average:	47.0
Answered	429
Skipped	52

What is your gender?

	#	%
Female	375	85.4%
Male	64	14.6%
Transgender	0	0.0%
Other	0	0.0%
Answered	439	
Skipped	42	



Gender

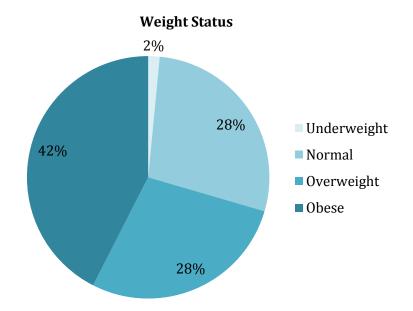
Height, in inches:

Weight, in pounds:

Median:	65.0	Median:	172.
Answered	413	Answered	39
Skipped	68	Skipped	8

Weight status and BMI:

Underweight	1.5%
Normal	28.0%
Overweight	28.0%
Obese	42.5%
Median BMI:	28.3

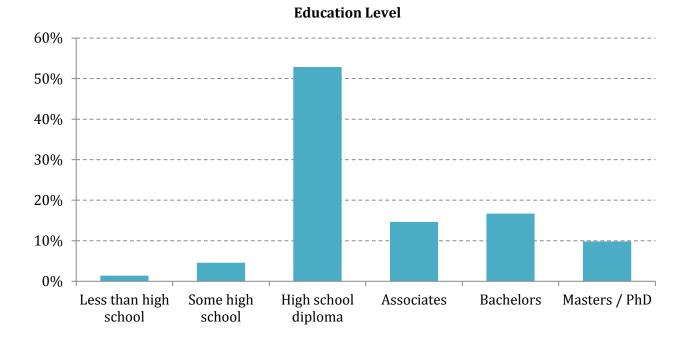


0-17 average:	1.4
18-64 average:	1.9
65+ average:	0.7
Answered	438
Skipped	43

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

What is your highest education level completed?

	#	%
Less than high school	6	1.4%
Some high school	20	4.6%
High school diploma	231	52.9%
Associates	64	14.7%
Bachelors	73	16.7%
Masters / PhD	43	9.8%
Answered	437	
Skipped	44	

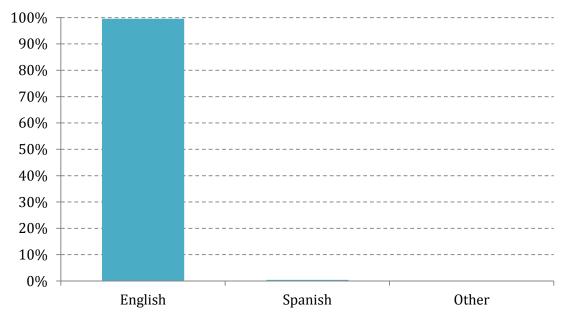


42

What is your primary language?

	#	%
English	440	99.6%
Spanish	2	0.5%
Other	0	0.0%
Answered	442	
Skipped	39	

Primary Language



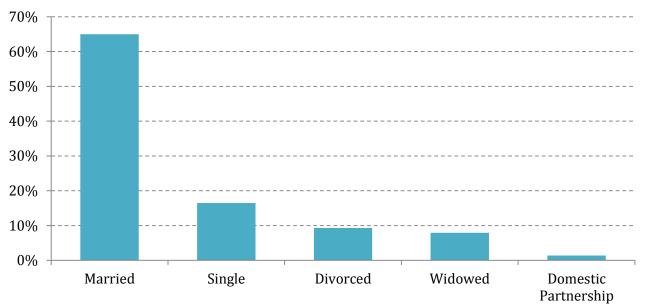
What ethnicity do you identify with? (Check all that apply)

	#	%
White	428	97.1%
American Indian / Alaskan Native	6	1.4%
More than one race	4	0.9%
Decline to answer	3	0.7%
Black / African American	2	0.5%
Latino	1	0.2%
Other	1	0.2%
Asian	0	0.0%
Native Hawaiian / Pacific Islander	0	0.0%
Answered	441	
Skipped	40	

What is your marital status?

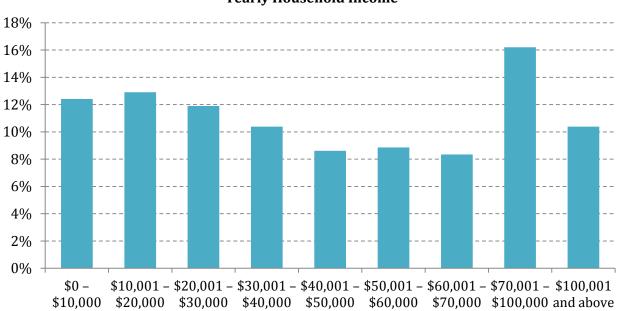
	#	%
Married	280	65.0%
Single	71	16.5%
Divorced	40	9.3%
Widowed	34	7.9%
Domestic Partnership	6	1.4%
Answered	431	
Skipped	50	





What is your yearly household income?

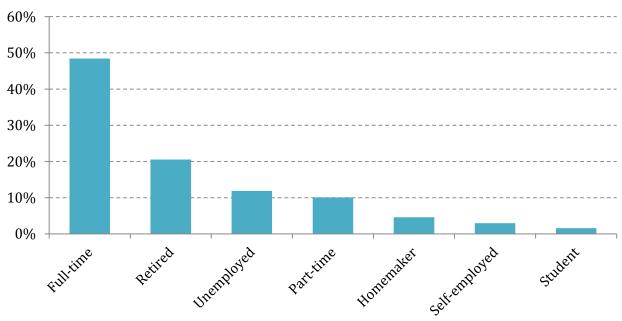
	#	%
\$0 - \$10,000	49	12.4%
\$10,001 - \$20,000	51	12.9%
\$20,001 - \$30,000	47	11.9%
\$30,001 - \$40,000	41	10.4%
\$40,001 - \$50,000	34	8.6%
\$50,001 - \$60,000	35	8.9%
\$60,001 - \$70,000	33	8.4%
\$70,001 - \$100,000	64	16.2%
\$100,001 and above	41	10.4%
Answered	395	
Skipped	86	



Yearly Household Income

What is your current employment status?

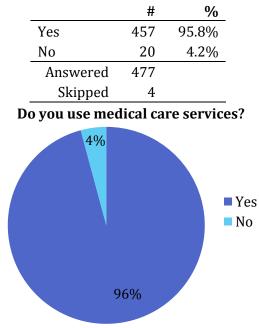
	#	%
Full-time	212	48.4%
Retired	90	20.6%
Unemployed	52	11.9%
Part-time	44	10.1%
Homemaker	20	4.6%
Self-employed	13	3.0%
Student	7	1.6%
Answered	438	
Skipped	43	



Employment Status

Community Health Survey Responses

1. Do you use medical care services?



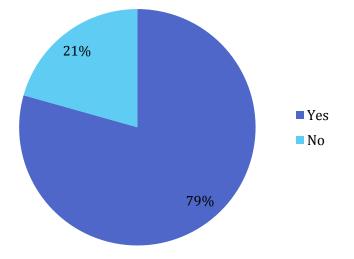
Where do you go for medical care? (Check all that apply)

	#	%
Carilion Clinic Family Medicine- Giles	297	65.3%
Doctor's Office	240	52.8%
Emergency Room	153	33.6%
Urgent Care / Walk in Clinic	48	10.6%
Health Department	30	6.6%
Carilion Clinic Obstetrics & Gynecology – Giles	25	5.5%
Community Health Center of the NRV	24	5.3%
Monroe Health Center	24	5.3%
Giles Community Health Center / Giles Free Clinic	21	4.6%
Salem VA Medical Center	8	1.8%
Pharmacy Clinic	4	0.9%
Planned Parenthood	3	0.7%
Carilion Clinic Community Care	0	0.0%
Craig County Health Center	0	0.0%
Free Clinic	0	0.0%
New Horizons Healthcare	0	0.0%
Pulaski Free Clinic	0	0.0%
Tri-Area Community Health Center	0	0.0%
Virginia Premier Medical Home	0	0.0%
Other	34	7.5%
Answered	455	
Skipped	26	

2. Do you use dental care services?

	#	%
Yes	373	79.4%
No	97	20.6%
Answered	470	
Skipped	11	

Do you use dental care services?



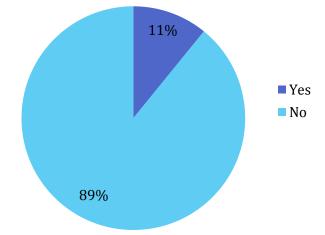
Where do you go for dental care? (Check all that apply)

	#	%
Dentist's office	293	79.0%
Kool Smiles (Christiansburg)	26	7.0%
Giles Community Health Center / Giles Free Clinic	23	6.2%
Community Health Center of the NRV	14	3.8%
Carilion Dental Clinic	10	2.7%
Monroe Health Center	9	2.4%
Craig County Dental Clinic	3	0.8%
Emergency Room	2	0.5%
Wytheville Community College Dental Hygiene Clinic	2	0.5%
Salem VA Medical Center	1	0.3%
Urgent Care / Walk in Clinic	1	0.3%
Commonwealth Dental	0	0.0%
Mission of Mercy Project	0	0.0%
Project Access	0	0.0%
Small Smiles	0	0.0%
Other	35	9.4%
Answered	371	
Skipped	110	

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

	#	%
Yes	51	10.9%
No	418	89.1%
Answered	469	
Skipped	12	

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)

	#	%
Doctor/Counselor's Office	25	49.0%
New River Valley Community Services	19	37.3%
Community Health Center of the NRV	4	7.8%
Access Services	3	5.9%
Emergency Room	3	5.9%
Giles Community Health Center / Giles Free Clinic	3	5.9%
Monroe Health Center	1	2.0%
Salem VA Medical Center	1	2.0%
Urgent Care / Walk in Clinic	1	2.0%
Blue Ridge Behavioral Healthcare	0	0.0%
Bradley Free Clinic	0	0.0%
Catawba Hospital	0	0.0%
Connect	0	0.0%
Craig County Health Center	0	0.0%
Family Service of Roanoke Valley	0	0.0%
Mental Health America	0	0.0%
Respond	0	0.0%
Other	13	25.5%
Answered	51	
Skipped	430	

	#	%
Alcohol and illegal drug use	269	58.1%
Cancers	181	39.1%
Overweight / obesity	177	38.2%
Diabetes	127	27.4%
Prescription drug abuse	125	27.0%
Mental health problems	119	25.7%
Lack of exercise	108	23.3%
Heart disease and stroke	104	22.5%
Aging problems	93	20.1%
Poor eating habits	91	19.7%
Child abuse / neglect	88	19.0%
Access to healthy foods	84	18.1%
Tobacco use / smoking	83	17.9%
Access to affordable housing	77	16.6%
Cell phone use / texting and driving / distracted driving	76	16.4%
High blood pressure	63	13.6%
Stress	58	12.5%
Bullying	52	11.2%
Dental problems	46	9.9%
Domestic violence	42	9.1%
Environmental health (e.g. water quality, air quality, pesticides, etc.)	31	6.7%
Accidents in the home (ex. falls, burns, cuts)	29	6.3%
Lung disease	20	4.3%
Teenage pregnancy	19	4.1%
Not using seat belts / child safety seats / helmets	18	3.9%
Suicide	16	3.5%
Not getting "shots" to prevent disease	11	2.4%
Sexual assault	10	2.2%
Neighborhood safety	9	1.9%
Unsafe sex	7	1.5%
Infant death	4	0.9%
Homicide	3	0.7%
Gang activity	2	0.4%
HIV / AIDS	2	0.4%
Other	11	2.4%
Answered	463	
Skipped	18	

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

	#	%
Cancer care	171	39.0%
Adult dental care	142	32.4%
Specialty care (ex. heart doctor)	141	32.2%
Mental health / counseling	135	30.8%
Substance abuse services –drug and alcohol	123	28.1%
Urgent care / walk in clinic	105	24.0%
Alternative therapy (ex. herbal, acupuncture, massage)	104	23.7%
Programs to stop using tobacco products	91	20.8%
Eldercare	83	19.0%
Child dental care	73	16.7%
Women's health services	64	14.6%
Domestic violence services	57	13.0%
Family doctor	46	10.5%
Dermatology	42	9.6%
Medication / medical supplies	36	8.2%
Vision care	35	8.0%
None	33	7.5%
End of life / hospice / palliative care	32	7.3%
Chiropractic care	25	5.7%
Family planning / birth control	25	5.7%
Emergency room care	19	4.3%
X-rays / mammograms	16	3.7%
Ambulance services	14	3.2%
Preventive care (ex. yearly check-ups)	14	3.2%
Lab work	12	2.7%
Inpatient hospital	11	2.5%
Physical therapy	10	2.3%
Immunizations	7	1.6%
Other	21	4.8%
Answered	438	
Skipped	43	

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

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

	#	%
Cost	164	39.2%
I can get the healthcare I need	127	30.4%
Long waits for appointments	95	22.7%
Lack of evening and weekend services	85	20.3%
High co-pay	81	19.4%
No health Insurance	37	8.9%
Don't know what types of services are available	36	8.6%
Location of offices	32	7.7%
Afraid to have check-ups	26	6.2%
Can't find providers that accept my Medicaid insurance	26	6.2%
Childcare	24	5.7%
No transportation	23	5.5%
Have no regular source of healthcare	15	3.6%
Don't trust doctors / clinics	14	3.4%
Can't find providers that accept my Medicare insurance	9	2.2%
Don't like accepting government assistance	7	1.7%
Language services	2	0.5%
Other	25	6.0%
Answered	418	
Skipped	63	

7. Please check one of the following for each statement:

	#	Yes %	N #	o %	Not app #	licable %
I have had an eye exam within the past 12 months.	290	64.0%	# 163	36.0%	" 0	0.0%
I have had a mental health / substance abuse visit within the past 12 months.	64	14.3%	306	68.5%	77	17.2%
I have had a dental exam within the past 12 months.	277	61.6%	166	36.9%	7	1.6%
I have been to the emergency room in the past 12 months.	155	34.4%	285	63.3%	10	2.2%
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.).	46	10.2%	385	85.8%	18	4.0%
I have been a victim of domestic violence or abuse in the past 12 months.	12	2.7%	410	91.7%	25	5.6%
My doctor has told me that I have a long-term or chronic illness.	128	28.8%	304	68.3%	13	2.9%
I take the medicine my doctor tells me to take to control my chronic illness.	162	36.5%	138	31.1%	144	32.4%
I can afford medicine needed for my health conditions.	270	61.8%	93	21.3%	74	16.9%
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).	247	55.5%	107	24.0%	91	20.5%
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).	178	39.7%	103	23.0%	167	37.3%
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check not applicable).	146	32.6%	103	23.0%	199	44.4%
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)	243	54.4%	196	43.9%	8	1.8%
Does your neighborhood support healthy eating? (e.g. community gardens, farmers' markets, etc.)	241	54.9%	188	42.8%	10	2.3%
In the area that you live, is it easy to get affordable fresh fruits and vegetables?	314	70.4%	132	29.6%	0	0.0%
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?	119	26.7%	322	72.2%	5	1.1%
Have there been times in the past 12 months when you did not have enough money to pay your rent or mortgage?	102	22.8%	325	72.7%	20	4.5%
Do you feel safe in your neighborhood?	423	94.4%	25	5.6%	0	0.0%
Answered Skipped	454 27					

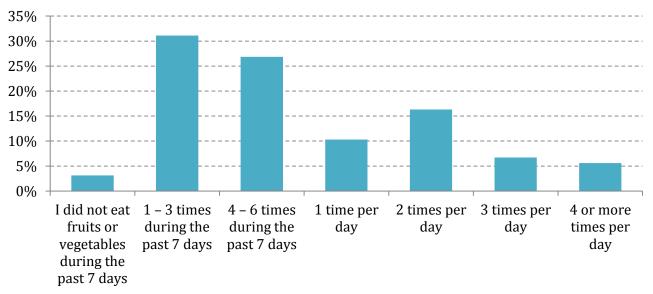
	#	%
Grocery store	435	96.2%
Take-out / fast food / restaurant	178	39.4%
Home Garden	111	24.6%
Dollar store	109	24.1%
Farmers' Market	67	14.8%
Corner store / convenience store / gas station	63	13.9%
Food bank / food kitchen / food pantry	32	7.1%
I regularly receive food from family, friends, neighbors, or my church	18	4.0%
Back-pack or summer food programs	14	3.1%
Community Garden	8	1.8%
I do not eat at home	0	0.0%
Meals on Wheels	0	0.0%
Other	9	2.0%
Answered	452	
Skipped	29	

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

, , , , ,	#	%
I did not eat fruits or vegetables during the past 7 days	14	3.1%
1 – 3 times during the past 7 days	139	31.1%
4 – 6 times during the past 7 days	120	26.9%
1 time per day	46	10.3%
2 times per day	73	16.3%
3 times per day	30	6.7%
4 or more times per day	25	5.6%
Answered	447	
Skipped	34	

9. 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)

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



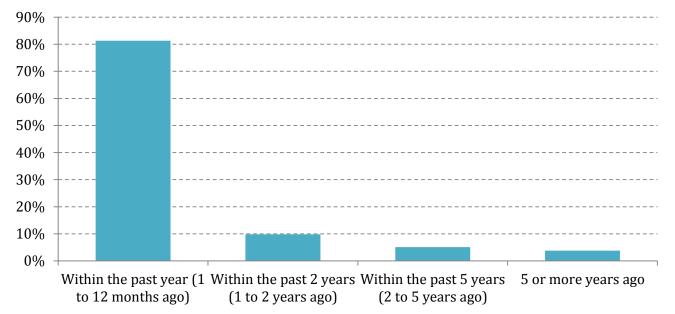
	#	%
Depression or anxiety	148	34.7%
High blood pressure	114	26.7%
Obesity / overweight	104	24.4%
I have no health problems	96	22.5%
High cholesterol	70	16.4%
Asthma	63	14.8%
High blood sugar or diabetes	48	11.2%
Mental health problems	40	9.4%
Heart disease	33	7.7%
COPD / chronic bronchitis / Emphysema	21	4.9%
Cancer	16	3.8%
Drug or alcohol problems	13	3.0%
Stroke / Cerebrovascular disease	11	2.6%
Cerebral palsy	0	0.0%
HIV / AIDS	0	0.0%
Other	50	11.7%
Answered	427	
Skipped	54	

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

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

#	%
365	81.3%
44	9.8%
23	5.1%
17	3.8%
449	
32	
	365 44 23 17 449

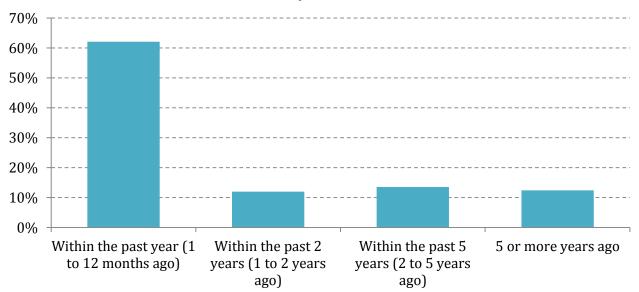
How long has it been since you last visited a doctor for a routine checkup?



12. 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)	275	62.1%
Within the past 2 years (1 to 2 years ago)		12.0%
Within the past 5 years (2 to 5 years ago)		13.5%
5 or more years ago		12.4%
Answered	443	
Skipped	38	

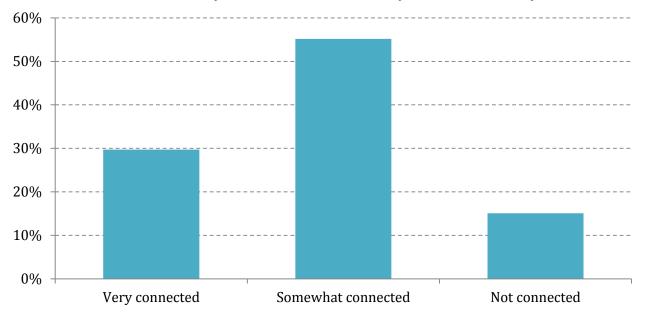
How long has it been since you last visited a dentist or a dental clinic for any reason?



	#	%
Very connected	132	29.7%
Somewhat connected	245	55.2%
Not connected	67	15.1%
Answered	444	
Skipped	37	

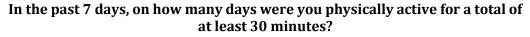
13. How connected do you feel with the community and those around you?

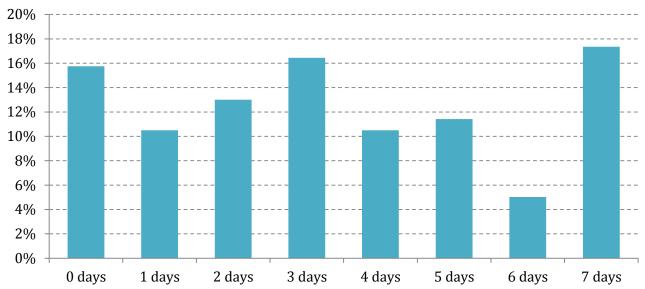
How connected do you feel with the community and those around you?



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	69	15.8%
1 day	46	10.5%
2 days	57	13.0%
3 days	72	16.4%
4 days	46	10.5%
5 days	50	11.4%
6 days	22	5.0%
7 days	76	17.4%
Answered	438	
Skipped	43	

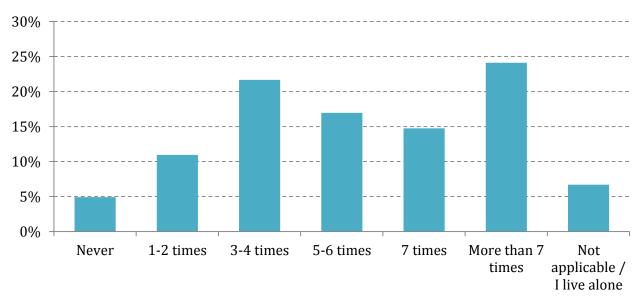




	#	%
Never	22	4.9%
1-2 times	49	10.9%
3-4 times	97	21.7%
5-6 times	76	17.0%
7 times	66	14.7%
More than 7 times	108	24.1%
Not applicable / I live alone	30	6.7%
Answered	448	
Skipped	33	

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

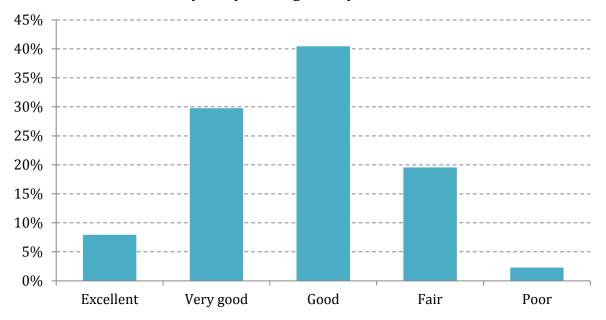
During the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?



#	%
35	8.0%
131	29.8%
178	40.5%
86	19.6%
10	2.3%
440	
41	
	35 131 178 86 10 440

16. Would you say that in general your health is: (Please check one)

Would you say that in general your health is:



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?*

Median:	2.0
Answered	360
Skipped	121

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?*

Median:	2.0
Answered	352
Skipped	129

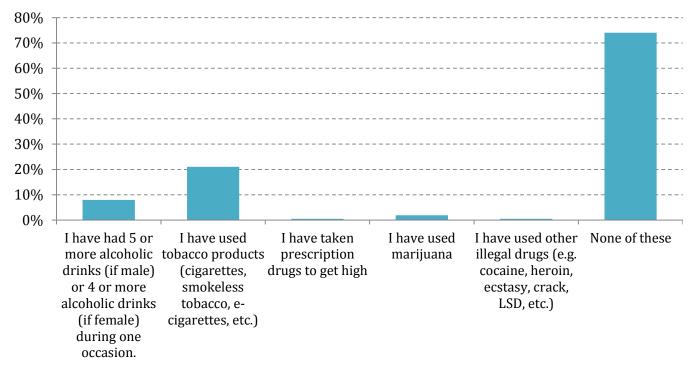
*Median was used due to the skewed distribution of the responses.

These median data are not directly comparable to the averages reported in the 2015 report.

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

	#	%
I have had 5 or more alcoholic drinks (if male) or 4 or more alcoholic drinks (if female) during one occasion.	34	7.9%
I have used tobacco products (cigarettes, smokeless tobacco, e-cigarettes, etc.)	90	21.0%
I have taken prescription drugs to get high	2	0.5%
I have used marijuana	8	1.9%
I have used other illegal drugs (e.g. cocaine, heroin, ecstasy, crack, LSD, etc.)	2	0.5%
None of these	317	74.1%
Answered	428	
Skipped	53	

*These 2018 data are not comparable to 2015 data, as this question was reformatted for data quality and accuracy

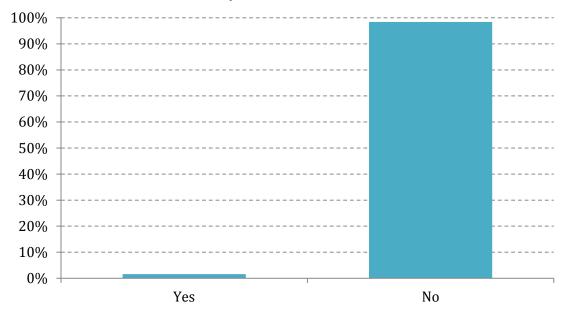


During the past 30 days:

20. Have you ever used heroin?

	#	%
Yes	7	1.6%
No	427	98.4%
Answered	434	
Skipped	47	

Have you ever used heroin?



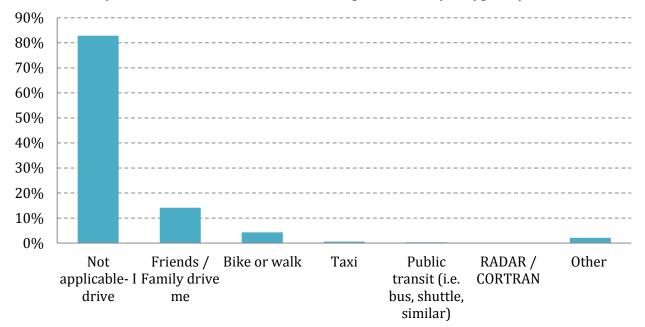
21. How many vehicles are owned, leased, or available for regular use by you and those who currently live in your household? Please be sure to include motorcycles, mopeds and RVs

Average:	2.3
Answered	418
Skipped	63

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

	#	%
Not applicable- I drive	270	82.8%
Friends / Family drive me	46	14.1%
Bike or walk	14	4.3%
Taxi	2	0.6%
Public transit (i.e. bus, shuttle, similar)	1	0.3%
RADAR / CORTRAN	0	0.0%
Other	7	2.2%
Answered	326	
Skipped	155	

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



Secondary Data

Secondary data were collected to obtain a more comprehensive description of our community that goes beyond the scope of the primary data collected throughout the Community Health Assessment process. Relevant information from existing data sources validates the trends seen in primary data collection, but also provides more detailed descriptive information on the characteristics of our community.

These population-level measures come from secondary sources such as:

- The American Community Survey, U.S. Census Bureau
- Behavioral Risk Factor Surveillance System, Center for Disease Control
- County Health Rankings, Robert Wood Johnson Foundation
- Virginia Department of Health
- Virginia Department of Education

The demographic data presented first define the Giles County area by population counts, age, income, race/ethnicity, etc. The subsequent sections are organized by Robert Wood Johnson Foundation's County Health Rankings Model. Health factors are presented first and include social and economic factors, health behaviors, clinical care, and physical environment. Health outcomes close the secondary data section and include measures on disease status and quality of life.

Data are presented by county or smallest available geographic area, and include census tracts from the MUAs when applicable. State and national level data are also included for comparison when available.

Links and references to other community health assessments and data can be found in Appendix 8.

Demographics

Total population

Geography	Total Population
Virginia	8,310,301
Giles County	16,871
Monroe County	13,496
U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table S0101	
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=AC	S_16_5YR_S0101&prodType=table

Population change estimates, 2010-2040

Geography	2010	2020	Pct. Change	2030	Pct. Change	2040	Pct. Change
Virginia	8,001,024	8,811,512	10.1%	9,645,281	9.5%	10,530,229	9.2%
Giles County	17,286	17,821	3.1%	18,283	2.6%	18,683	2.2%
U.S. Census Bureau, Virginia Employment Commission Community Profiles (2018)							

https://data.virginialmi.com/gsipub/index.asp?docid=342

Median age

Geography	Median age
Virginia	37.8
Giles County	43.6
Monroe County	47.0
U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table S0101	
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S	0101&prodType=table

Estimates of population by lifecycle

Geography	Under 5 years	5 to 14 years	15 to 17 years	18 to 64 years	65 years and over
Virginia	6.1%	12.5%	3.8%	63.9%	13.8%
Giles County	5.1%	12.1%	3.8%	59.1%	19.9%
Monroe County	4.9%	11.6%	3.4%	56.4%	23.5%
U.S. Census Bureau, 2012-20	016 5-vear estimates.	American Commu	nity Survey, Table S	50101	

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S0101&prodType=table

Race and ethnicity

Geography	White	Black	American Indian and Alaskan Native	Asian	Native Hawaiian and Other Pacific Islander	Some other race	Two or more races	Hispanic or Latino	Not Hispanic or Latino
Virginia	68.7%	19.2%	0.3%	6.1%	0.1%	2.3%	3.4%	8.7%	91.3%
Giles County	96.7%	2.5%	0.2%	0.3%	0.0%	0.0%	0.3%	1.5%	98.5%
Monroe County	97.7%	0.7%	0.4%	0.0%	0.0%	0.0%	1.3%	1.1%	98.9%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table DP05 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP05&prodType=table

Giles County Public Schools race/ethnicity 2015-2018

School Year	School Type	Hispanic	American Indian / Alaskan Native	Asian	Black, not of Hispanic origin	Native Hawaiian / Other	White	Two or more
2015-20	16							
	Elementary Schools	1.4%	0.4%	0.1%	1.0%	0.3%	95.2%	1.7%
	Middle Schools	1.8%	0.0%	0.3%	2.0%	0.0%	93.6%	2.3%
	High Schools	1.8%	0.1%	0.9%	1.6%	0.0%	93.5%	1.9%
	District Grand Total	1.6%	0.2%	0.5%	1.4%	0.1%	94.2%	1.9%
2016-20	17							
	Elementary Schools	1.3%	0.3%	0.0%	1.3%	0.3%	95.6%	1.3%
	Middle Schools	1.4%	0.0%	0.3%	1.7%	0.0%	94.3%	2.3%
	High Schools	1.8%	0.2%	0.7%	1.7%	0.0%	93.7%	1.9%
	District Grand Total	1.5%	0.2%	0.3%	1.5%	0.1%	94.6%	1.7%
2017-20	18							
	Elementary Schools	1.2%	0.2%	0.1%	1.2%	0.0%	95.8%	1.5%
	Middle Schools	2.0%	0.0%	0.3%	1.1%	0.0%	95.7%	0.9%
	High Schools	1.7%	0.1%	0.4%	1.5%	0.0%	94.3%	2.0%
	District Grand Total	1.9%	0.1%	0.3%	1.5%	0.0%	94.2%	2.0%
	artment of Education. Fall Memb	• •						
		ership Reports			1.570	0.070	91.270	2.070

Population 5 years and over who speak a language other than English at home

Geography	#	%			
Virginia	1,211,386	15.5%			
Giles County	704	4.4%			
Monroe County	122	1.0%			
U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1601 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1601&prodType=table					

Marital status

Geography	Now married (except separated)	Widowed	Divorced	Separated	Never married
Virginia	50.0%	5.6%	10.2%	2.5%	31.8%
Giles County	52.6%	8.7%	11.5%	4.3%	23.0%
Monroe County	58.0%	9.0%	15.5%	1.1%	16.4%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1201

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1201&prodType=table

Social and Economic Factors

Fall PALS-K scores that were below kindergarten readiness levels

Geography	2015-2016	2016-2017	2017-2018
Virginia	13.8%	14.6%	16.0%
Giles County	23.4%	23.0%	26.0%

Virginia Department of Education vis Kids Count Data Center

http://datacenter.kidscount.org/data/bar/3254-kindergarteners-whose-fall-pals-k-scores-were-

below-kindergarten-readiness-levels?loc=48&loct=5

Third grade Standards of Learning English Reading Assessment pass rate

Geography	2014-2015	2015-2016	2016-2017
Giles County	79.3%	76.9%	70.8%
Virginia Department of Education, Test Data			

http://www.doe.virginia.gov/statistics_reports/research_data/index.shtml

On time graduation rates, Giles County

Geography	2015	2016	2017
Virginia	90.6%	91.4%	91.3%
Giles County	88.7%	85.1%	89.9%
Virginia Department of Education, Virginia Cohort Reports			

http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

On time graduation rates, Giles County high schools

Geography	2015	2016	2017
Virginia	90.6%	91.4%	91.3%
Giles High	89.5%	85.9%	88.3%
Narrows High	87.1%	83.6%	93.5%
Virginia Department of Education, Virginia Cohort Reports			

http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

Dropout rates, Giles County

Geography	2015	2016	2017
Virginia	5.2%	5.3%	5.8%
Giles County	5.6%	11.3%	5.3%
Virginia Department of Education, Virginia Cohort Reports			

http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

Dropout rates, Giles County high schools

Geography	2015	2016	2017
Virginia	5.2%	5.3%	5.8%
Giles High	4.9%	10.9%	5.5%
Narrows High	7.1%	11.9%	4.8%
Virginia Department of Education, Virginia Cohort Reports http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml			

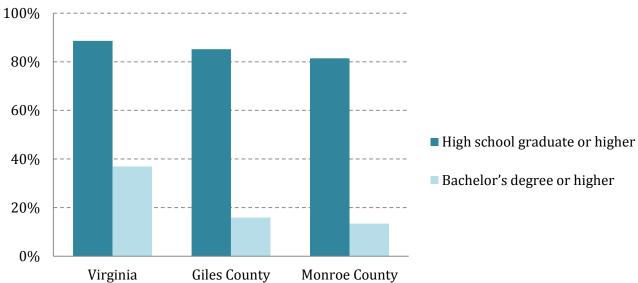
High school students enrolled in an institution of higher education within 16 months of graduation

Geography	2013	2014	2015
Virginia	72%	72%	72%
Giles County	65%	59%	62%
Virginia Department of Education, Postsecondary Enrollment Reports			

https://p1pe.doe.virginia.gov/postsec_public/postsec.do?dowhat=LOAD_REPORT_C11

Geography	High school graduate or higher	Bachelor's degree or higher
Virginia	88.6%	36.9%
Giles County	85.2%	15.9%
Monroe County	81.4%	13.4%
U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1501 https://factfinder.census.gov/faces/tableservices/isf/pages/productview.xhtml?pid=ACS 16 5YR S1501&prodType=table		

Academic attainment for population 25 and over



Academic attainment for population 25 and over

Median household income

Geography	Median Household Income
Virginia	\$66,149
Giles County	\$47,675
Monroe County	\$35,995
U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1903	

0.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table 51903 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1903&prodType=table

Persons in family/household	2016	2017	2018
1	\$11,880	\$12,060	\$12,140
2	\$16,020	\$16,240	\$16,460
3	\$20,160	\$20,420	\$20,780
4	\$24,300	\$24,600	\$25,100
5	\$28,440	\$28,780	\$29,420
6	\$32,580	\$32,960	\$33,740
7	\$36,730	\$37,140	\$38,060
8	\$40,890	\$41,320	\$42,380
9+	Add \$4,160 for each	Add \$4,180 for each	Add \$4,320 for each
-	additional person	additional person	additional person
0 1	date of the HHS Poverty Guideli gov/documents/2018/01/18/		

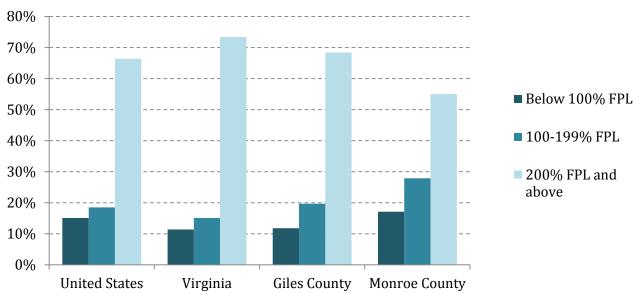
Federal poverty guidelines for the 48 contiguous states and the District of Columbia

Number of residents living in poverty

Coography	Below 10	0% FPL	100-19	9% FPL	200% FPL a	nd above	Total
Geography	#	%	#	%	#	%	
United States	46,932,225	15.1%	57,457,973	18.5%	206,239,447	66.4%	310,629,645
Virginia	921,664	11.4%	1,220,553	15.1%	5,918,675	73.4%	8,060,892
Giles County	1,970	11.8%	3,288	19.7%	11,401	68.4%	16,659
Monroe County	2,283	17.1%	3,716	27.9%	7,333	55.0%	13,332

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table C17002

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table



Residents living in poverty

Ratio of income by poverty status, by age, Giles area

		< 6 years	s of age			
Coography	Below 10	00% FPL	100-19	99% FPL	200% FPL :	and above
Geography	#	%	#	%	#	%
United States	5,535,200	23.5%	5,399,378	22.9%	12,598,178	53.5%
Virginia	100,968	16.7%	119,744	19.8%	384,499	63.5%
Giles County	149	15.6%	309	32.3%	498	52.1%
Monroe County	289	36.6%	226	28.6%	275	34.8%
U.S. Census Bureau, 2012-2016 5-year	r estimates, American Co	mmunity Surv	ey, Table B17024			

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

		6-17 year	s of age			
Coography	Below 10	00% FPL	100-19	99% FPL	200% FPL a	nd above
Geography	#	%	#	%	#	%
United States	9,800,583	20.0%	10,629,109	21.7%	28,493,648	58.2%
Virginia	177,384	14.4%	222,105	18.0%	833,512	67.6%
Giles County	267	10.7%	542	21.8%	1,680	67.5%
Monroe County	404	21.7%	492	26.4%	969	52.0%
U.S. Census Bureau, 2012-2016 5-	year estimates, American Co	mmunity Surv	ey, Table B17024			

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

		18-64 yea	rs of age			
Coography	Below 10	00% FPL	100-19	99% FPL	200% FPL	and above
Geography	#	%	#	%	#	%
United States	27,401,015	14.2%	32,181,272	16.6%	133,716,676	69.2%
Virginia	558,524	10.9%	682,490	13.4%	3,862,973	75.7%
Giles County	1,327	13.3%	1,734	17.4%	6,902	69.3%
Monroe County	1,346	17.7%	2,011	26.4%	4,256	55.9%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table B17024 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

		65+ years	of age			
Coography	Below 10	0% FPL	100-19	99% FPL	200% FPL a	and above
Geography	#	%	#	%	#	%
United States	4,195,427	9.3%	9,248,214	20.6%	31,430,945	70.0%
Virginia	84,788	7.6%	196,214	17.5%	837,691	74.9%
Giles County	227	7.0%	703	21.6%	2,321	71.4%
Monroe County	244	8.0%	987	32.2%	1,833	59.8%

0.5. Census Bureau, 2012-2010 5-year estimates, American Community Survey, Table B17024 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

Poverty status in	the past 12	months, by r	race/ethnicity
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		White		Black	/ African Amer	ican
Geography	Population	Number in poverty	Percent in poverty	Population	Number in poverty	Percent in poverty
Virginia	5,561,852	506,826	9.1%	1,522,283	303,397	19.9%
Giles County	16,115	1,879	11.7%	407	35	8.6%
Monroe County	13,017	2,166	16.6%	87	28	32.2%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1701

	American I	ndian / Alaskan	Native		Asian	
Geography	Population	Number in poverty	Percent in poverty	Population	Number in poverty	Percent in poverty
Virginia	20,911	2,852	13.6%	494,027	39,385	8.0%
Giles County	28			52	20	38.5%
Monroe County	50	17	34.0%			

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1701 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

	Native Hawaiiar	n and Other Paci	fic Islander	So	me other race	
Geography	Population	Number in poverty	Percent in poverty	Population	Number in poverty	Percent in poverty
Virginia	5,074	383	7.5%	186,105	32,823	17.6%
Giles County	8	8	100.0%	4		
Monroe County	 2016 E waar actimates Ame					

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1701 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

	Two	or more races		Hispa	nic / Latino orig	gin
Geography	Population	Number in poverty	Percent in poverty	Population	Number in poverty	Percent in poverty
Virginia	270,640	35,998	13.3%	705,132	108,944	15.5%
Giles County	45	28	62.2%	255	181	71.0%
Monroe County	178	72	40.4%	155		0.0%

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_C17002&prodType=table

Number of TANF recipients for Giles County for calendar year 2015-2017
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Geography	2015	2016	2017		
Giles County	147	134	173		
Virginia Department of Social Services Profile Report					

http://www.dss.virginia.gov/geninfo/reports/agency_wide/ldss_profile.cgi

Number of SNAP recipients for Giles County for calendar year 2015-2017

Geography	2015	2016	2017	
Giles County	3,106	2,851	2,920	
Virginia Department of Social Services Profile Report				

http://www.dss.virginia.gov/geninfo/reports/agency_wide/ldss_profile.cgi

Students eligible for free and reduced lunch program

Geography	2015-2016	2016-2017	2017-2018		
Virginia	42.0%	41.9%	44.3%		
Giles County	46.3%	46.9%	47.0%		
Virginia Department of Education National School Lunch Program Free and Reduced Price Eligibility Reports http://www.doe.virginia.gov/support/nutrition/statistics/					

Giles County Public Schools free and reduced lunch eligibility, 2015-2016

	SNAP	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
	membership	#	%	#	%	#	%
Elementary Schools							
Eastern Combined	467	182	39.0%	38	8.1%	220	47.1%
Macy McClaugherty Combined	537	234	43.6%	42	7.8%	276	51.4%
Narrows Elementary / Middle	481	233	48.4%	32	6.7%	265	55.1%
High Schools							
Giles High	666	185	27.8%	55	8.3%	240	36.0%
Narrows High	334	119	35.6%	30	9.0%	149	44.6%

Virginia Department of Education National School Lunch Program Free and Reduced Price Eligibility Reports

http://www.doe.virginia.gov/support/nutrition/statistics/

	SNAP	Free lunch	eligible	Reduced lunch	eligible	Total F/R lunch	eligible
	membership	#	%	#	%	#	%
Elementary Schools							
Eastern Combined	447	163	36.5%	46	10.3%	209	46.8%
Macy McClaugherty Combined	572	241	42.1%	63	11.0%	304	53.2%
Narrows Elementary / Middle	454	209	46.0%	43	9.5%	252	55.5%
High Schools							
Giles High	683	198	29.0%	62	9.1%	260	38.1%
Narrows High	343	109	31.8%	39	11.4%	148	43.2%
Virginia Department of Education	National School Lunch P	rogram Free and Re	educed Price	Eligibility Reports			

Giles County Public Schools free and reduced lunch eligibility, 2016-2017

http://www.doe.virginia.gov/support/nutrition/statistics/

Giles County Public Schools free and reduced lunch eligibility, 2017-2018

	SNAP	Free lunch	eligible	Reduced lunch e	eligible	Total F/R lunch	eligible
	membership	#	%	#	%	#	%
Elementary Schools							
Eastern Combined	448	173	38.6%	41	9.2%	214	47.8%
Macy McClaugherty Combined	566	267	47.2%	42	7.4%	309	54.6%
Narrows Elementary / Middle	481	228	47.4%	26	5.4%	254	52.8%
High Schools							
Giles High	658	200	30.4%	41	6.2%	241	36.6%
Narrows High	345	126	36.5%	30	8.7%	156	45.2%

http://www.doe.virginia.gov/support/nutrition/statistics/

Children living in single parent households, by race/ethnicity

Geography	Total children living in single parent households	White	Black / African American	Hispanic or Latino		
Virginia	27.2%	19.5%	55.5%	28.4%		
Giles County	26.1%	25.1%	61.1%	38.6%		
Monroe County	25.4%	25.1%	30.0%	20.8%		
	U.S. Census Bureau, 2010 Census Summary File 1, Table P31, P31A, P31B, P31H https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=DEC_10_SF1_P31&prodType=table					

Families living in poverty

Geography	Families living in poverty	Families living in poverty with related children under 18 years	Female head of household with related children under 18 years living in poverty
Virginia	8.1%	12.8%	34.2%
Giles County	8.2%	11.0%	14.9%
Monroe County	15.1%	22.5%	66.6%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1701 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1702&prodType=table

Grandparents living with grandchildren who are responsible for their grandchildren with no parent of the grandchild present

Geography	Pct.		
Virginia	12.9%		
Giles County	31.8%		
Monroe County	52.2%		
U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1002 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1002&prodType=table			

Cost-burdened renters and homeowners, 2015

Geography	Renters	Homeowners		
Bluefield, WV-VA Micro Area	45.6%	18.1%		
Blacksburg-Christiansburg-Radford Metro Area	49.0%	17.2%		
Harvard Joint Center for Housing Studies http://harvard-cga.maps.arcgis.com/apps/MapSeries/index.html?appid=6177d472b7934ad9b38736432ace1acb				

Consumer opportunity profile

Geography	Residents living in census tracts with <i>low to very low</i> Consumer Opportunity Scores	Residents living in census tracts with <i>high to very high</i> Consumer Opportunity Scores			
Giles County	51%	13%			
Virginia Department of Health, Virginia Health Opportunity Index (2018) https://www.vdh.virginia.gov/omhhe/hoi/consumer-opportunity-profile					

Economic opportunity profile

Geography	Residents living in census tracts with <i>low to very low</i> Economic Opportunity Scores	Residents living in census tracts with <i>high to very high</i> Economic Opportunity Scores
Giles County	100%	0%
	th, Virginia Health Opportunity Index (2018) ov/omhhe/hoi/consumer-opportunity-profile	

Unemployment rate

Geography	2014	2015	2016		
United States	6.2%	5.3%	4.9%		
Virginia	5.2%	4.5%	4.0%		
Giles County	6.2%	5.2%	5.3%		
U.S. Census Bureau, Virginia Employment Commission Community Profiles (2018)					

https://data.virginialmi.com/gsipub/index.asp?docid=342

Rate of child abuse and neglect, 2012-2013

Geography	Completed child abuse and neglect cases per 1,000 children			
	2012	2013		
Giles County	28.5	29.9		
Virginia Department of Social Services, Child protective Reports and Studies https://www.dss.virginia.gov/geninfo/reports/children/cps/all_other.cgi				

Child abuse and neglect cases, Count, 2017

Geography	
Virginia	9,578
Giles County	89
2017 case counts may be from incomplete cases. Virginia Department of Social Services, Child protective Rep https://www.dss.virginia.gov/geninfo/reports/children/cp	

Health Behaviors

No leisure time physical activity

Geography	2012	2013	2014
Virginia	22%	21%	22%
Giles County	30%	32%	32%
Monroe County	34%	30%	32%

2016 County Health Rankings, 2012 CDC Diabetes Interactive Atlas 2017 County Health Rankings, 2013 CDC Diabetes Interactive Atlas 2018 County Health Rankings, 2014 CDC Diabetes Interactive Atlas http://www.countyhealthrankings.org/app/virginia/2017/downloads

Access to recreational facilities

	2012		2014	4
Geography	#	Facilities /	#	Facilities /
	#	1,000	#	1,000
Giles County	0	0.00	0	0.00
Monroe County	0	0.00	0	0.00
USDA Food Environment Atlas: Data https://www.ers.usda.gov/data-pro			e and documents	tion downloads/

Fast food restaurants rate

Coography	Fast food restaurant	Fast food restaurants per 1,000		
Geography	2012	2014		
Giles County	0.77	0.71		
Monroe County	0.07	0.00		
USDA Food Environment Atlas: Data Access and Documentation Downloads https://www.ers.usda.gov/data-products/food-environment-atlas/data-				

access-and-documentation-downloads/

Low income and low access to store

Geography	2010	2015
Giles County	4.0%	0.3%
Monroe County	2.2%	5.4%

USDA Food Environment Atlas: Data Access and Documentation Downloads https://www.ers.usda.gov/data-products/food-environment-atlas/dataaccess-and-documentation-downloads/

Census Tract	Population	Low access to a supermarket or large grocery store		Total population that is lov and has low access to a sup or large groo	ermarket			
		#	%	#	%			
Giles County								
30100	2,176	2,176	100.0%	648	29.8%			
30200	3,856	3,856	100.0%	1,466	38.0%			
30300	5,568	1,801	32.3%	548	9.8%			
30400	5,686	2,894	50.9%	920	16.2%			
Monroe County								
50100	3,117	3,057	98.1%	1,224	39.3%			
50200	4,513	4,513	100.0%	2,036	45.1%			
50300	5,872	5,015	85.4%	2,309	39.3%			
USDA Food Access Res	USDA Food Access Research Atlas							

Low income and low access to store, by census tract, 2015

https://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data/

Flu vaccination, 2014

Geography	
Virginia	43.5%
Giles County	43.7%
Virginia Department of Health Behavioral Risk Factor Surveillance System, Small	
http://www.vdh.virginia.gov/data/health-behavi	or/

Adolescents (ages 13-17) who receive three doses of HPV vaccine

Coography	Girl	S	Boys	
Geography —	2014	2015	2014	2015
Virginia	35.9%	38.5%	22.5%	25.7%
Virginia Departmer https://virginiawel	ıg			

Cancer screenings, 2014

Geography	Women with no Pap test in the past 3 years	Women 40 and older with no mammogram in past 2 years	Adults 50 and older with no sigmoidoscopy or colonoscopy
Virginia	20.5%	25.0%	28.0%
Southwestern Region	29.6%	30.0%	32.8%
New River Health District		25.1%	29.9%
Virginia Department of Health, Behavioral I http://www.vdh.virginia.gov/brfss/data/	Risk Factor Surveillance System		

		Sexually	transmitted in	nfections per	[.] 100,000	
Geography		2014			2015	
	Early Syphilis	Gonorrhea	Chlamydia	Early Syphilis	Gonorrhea	Chlamydia
Virginia	6.8	97.6	423.3	10.3	103.5	436.4
Giles County	0.0	17.8	208.1	11.9	17.8	273.6
Virginia Department of H						

Sexually transmitted infection rate

http://www.vdh.virginia.gov/data/sexually-transmitted-infections/

Late to no prenatal care rate, 2014

Geography	Late to no prenatal care per 1,000 live births		
Virginia	28.0		
Giles County	32.4		
Virginia Department of Health, Statistical Reports and Tables http://www.vdh.virginia.gov/HealthStats/stats.htm			

Low birthweight

Geography	2014	2015		
Virginia	7.9%	7.9%		
Giles County	14.0%	6.6%		
Virginia Department of Health, Statistical Reports and Tables				
http://www.vdh.virginia.gov/HealthSta	ats/stats.htm			

Infant mortality rate, by race 2015

Coography		Infant d	leaths / 1,00	0 live births
Geography	Total	White	Black	Other
Virginia	5.9	4.7	11.3	3.5
Giles County				
Virginia Department of Health, Statistical Reports and Tables				
http://www.vdh.virginia.	gov/HealthStats/sta	ts.htm		

Birth rate, by race

		Live births per 1,000						
Geography	2014			2015				
	Total	White	Black	Other	Total	White	Black	Other
Virginia	12.3	10.8	12.4	26.4	12.3	10.7	12.3	26.6
Giles County	11.1	11.3		16.4	11.0	11.1		14.5
Virginia Department of Health, Statistical Reports and Tables http://www.ydh.virginia.gov/HealthStats/stats.htm								

Teen pregnancy rate, by race, 2015

Coography	Teen pregna	ncies per 1,0	00 females ag	es 10-19
Geography	Total	White	Black	Other
Virginia	12.0	8.9	17.5	21.4
Giles County	23.8	25.0		
Virginia Department of Health, Statistical Reports and Tables				
http://www.vdh.virginia	.gov/HealthStats/stat	s.htm		

Adult smoking

Geography	2014	2015	2016	
Virginia	20%	17%	15%	
Giles County	18%	15%	15%	
Monroe County	22%	22%	22%	
2016 County Health Rankings,	2016 County Health Rankings, 2014 Behavioral Risk Factor Surveillance System			

2017 County Health Rankings, 2014 Behavioral Risk Factor Surveillance System 2018 County Health Rankings, 2016 Behavioral Risk Factor Surveillance System http://www.countyhealthrankings.org/app/virginia/2018/downloads

ED heroin overdose rate

Coography	Overdoses per 100,000		
Geography	2015	2016	
Virginia	9.5	16.7	
Giles County	0.0	0.0	
Virginia Department of Health http://www.vdh.virginia.gov/data/opioid-overdose/			

ED opioid overdose rate

Coography -	Overdoses per 100,000			
Geography -	2015	2016		
Virginia	87.4	103.5		
Giles County	83.8	130.5		
Virginia Department of Health http://www.vdh.virginia.gov/data/opioid-overdose/				

Fatal prescription opioid overdose rate

Coography	Fatal over	Fatal overdoses per 100,000		
Geography	2014	2015	2016	
Virginia	6.0	4.7	5.5	
Giles County	11.9	12.0	11.9	
Virginia Department of Health http://www.vdh.virginia.gov/data/opioid-overdose/				

Coognaphy	Fatal over	doses per 1	100,000
Geography	2014	2015	2016
Virginia	4.2	5.6	9.6
Giles County	5.9	0.0	0.0
Virginia Department of	Health		

http://www.vdh.virginia.gov/data/opioid-overdose/

EMS Narcan use rate

Coography	EMS Narc	EMS Narcan use per 100,000			
Geography	2014	2015	2016		
Virginia	26.0	33.9	48.5		
Giles County	29.7	6.0	5.9		
Virginia Department of Health http://www.ydh.virginia.gov/data/opioid-overdose/					

Clinical Care

Health insurance status

Coography	Μ	edicaid	Μ	edicare		Private
Geography ——	#	%	#	%	#	%
Virginia	865,073	10.9%	1,180,282	14.8%	5,944,729	74.6%
Giles County	2,233	13.2%	3,846	22.8%	11,192	66.3%
Monroe County	2,739	20.5%	3,446	25.7%	7,738	57.8%

U.S. Census Bureau, 2010-2014 5-year estimates, American Community Survey, Table S2701 https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S2701&prodType=table

Coography	Direct-P		urchase Employer Based		Uninsured	
Geography	#	%	#	%	#	%
Virginia	1,042,552	13.1%	4,799,029	60.2%	968,444	12.1%
Giles County	2,451	14.5%	9,309	55.1%	2,834	16.8%
Monroe County	1,592	11.9%	6,423	48.0%	2,014	15.0%

U.S. Census Bureau, 2010-2014 5-year estimates, American Community Survey, Table S2701

 $https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_14_5YR_S2701\&prodType=table$

	< 18 ye	ears old	18-64 ye	ears old	65+ ye	ears old		All ages
	#	%	#	%	#	%	#	%
With health insurance	542,282	91.8%	855,485	71.9%	270,731	98.5%	1,668,498	81.1%
Employer-based health insurance	139,623	23.6%	396,090	33.3%	53,006	19.3%	588,719	28.6%
Direct-purchase health insurance	34,132	5.8%	186,992	15.7%	89,270	32.5%	310,394	15.1%
Medicare	9,488	1.6%	92,184	7.7%	264,239	96.1%	365,911	17.8%
Medicaid	365,483	61.8%	249,778	21.0%	54,746	19.9%	670,007	32.6%
No health insurance	48,744	8.2%	334,968	28.1%	4,164	1.5%	387,876	18.9%
Total number <200% FPL	591,026		1,190,453		274,895		2,056,374	

Less than 200% FPL health insurance status by age, Virginia, 2016

ear estimates, American Community Survey, Table B27016 J.S. Census Bureau, 2016 1-

 $https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/productview.xhtml?pid=ACS_16_1YR_B27016\&prodType=tablegervices/pages/p$

Projected newly eligible for Medicaid through closing coverage gap, 2018

Geography

Giles County

The Commonwealth Institute

http://www.thecommonwealthinstitute.org/

2018/01/11/closing-the-coverage-gap-by-locality/

Giles area Health Professional Shortage Areas

800

Geography	MUA	Primary Care HPSA	Dental HPSA	Mental Health HPSA		
Giles County	Giles Service Area	Giles County, Giles	Low Income-Bland / Giles Counties, Giles	Low Income-New River Valley Service Area, Giles		
Monroe County	Monroe County	Monroe County Health Center, Miller Family Practice, Low Income- Monroe County, Monroe	Monroe County Health Center, Miller Family Practice, Monroe County, Monroe	Mental Health Catchment Area IV Fmrs, Monroe, Monroe County Health Center, Miller Family Practice, Low Income-Monroe County		
Department of Health a	Department of Health and Human Services, Health Resources and Services Administration Data Warehouse (2018)					

https://datawarehouse.hrsa.gov/tools/analyzers/HpsaFindResults.aspx

https://datawarehouse.hrsa.gov/tools/analyzers/MuaSearchResults.aspx

People who could not see a doctor due to cost, 2014

Geography	
Giles County	14.5%
Virginia Department of Health, Behavioral Risk Factor Surv http://www.vdh.virginia.gov/data/health-behavior/	veillance System

Adults with	a regular	health	hcare provi	der, 2014
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Geography	
Virginia	69.3%
Giles County	77.1%
Virginia Department of Health Behavioral Risk Factor Surveillance Systen	n, Small Area Estimation
http://www.ydh.virginia.gov/data/health-	-behavior/

Primary care provider population ratio, 2013

Geography	# PCPs	PCP Rate	PCP Ratio
Virginia	6,216	75	1,329:1
Giles County	10	59	1,693:1
Monroe County	5	37	2,697:1

Rates are per 100,000 population

2016 County Health Rankings, 2013 Area Health Resource File, American Medical Association http://www.countyhealthrankings.org/app/virginia/2017/downloads

Primary care provider population ratio, 2014

Geography	# PCPs	PCP Rate	PCP Ratio
Virginia	6,321	76	1,317:1
Giles County	9	54	1,868:1
Monroe County	6	44	2,264:1

Rates are per 100,000 population

2017 County Health Rankings, 2014 Area Health Resource File, American Medical Association http://www.countyhealthrankings.org/app/virginia/2017/downloads

Primary care provider population ratio, 2015

Geography	# PCPs	PCP Rate	PCP Ratio
Virginia	6,368	76	1,316:1
Giles County	9	54	1,856:1
Monroe County	6	44	2,251:1

Rates are per 100,000 population

2018 County Health Rankings, 2015 Area Health Resource File, American Medical Association http://www.countyhealthrankings.org/app/virginia/2018/downloads

Geography	# MHPs	MHP Rate	MHP Ratio
Virginia	10,814	130	770:1
Giles County	1	6	16,815:1
Monroe County	4	29	3,396:1

Mental health provider population ratio, 2015

Rates are per 100,000 population

2016 County Health Rankings, 2015 CMS, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2017/downloads

Mental health provider population ratio, 2016

Geography	# MHPs	MHP Rate	MHP Ratio
Virginia	11,479	137	730:1
Giles County	1	6	16,708:1
Monroe County	4	30	3,377:1

Rates are per 100,000 population

2017 County Health Rankings, 2016 CMS, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2017/downloads

Mental health provider population ratio, 2017

Geography	# MHPs	MHP Rate	MHP Ratio
Virginia	12,294	146	684:1
Giles County	2	12	8,429:1
Monroe County	5	37	2,674:1

Rates are per 100,000 population

2018 County Health Rankings, 2017 CMS, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2018/downloads

Dentist population ratio, 2014

Geography	# Dentist	Dentist Rate	Dentist Ratio
Virginia	5,303	64	1,570:1
Giles County	6	36	2,803:1
Monroe County	2	15	6,791:1

Rates are per 100,000 population

2016 County Health Rankings, 2014 Area Health Resource File, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2017/downloads

Dentist population ratio, 2015

Geography	# Dentists	Dentist Rate	Dentist Ratio
Virginia	5,465	65	1,534:1
Giles County	5	30	3,342:1
Monroe County	2	15	6,753:1

Rates are per 100,000 population

2017 County Health Rankings, 2015 Area Health Resource File, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2017/downloads

Dentist population ratio, 2016

Geography	# Dentists	Dentist Rate	Dentist Ratio
Virginia	5,631	67	1,494:1
Giles County	5	30	3,371:1
Monroe County	2	15	6,685:1

Rates are per 100,000 population

2018 County Health Rankings, 2016 Area Health Resource File, National Provider Identification File http://www.countyhealthrankings.org/app/virginia/2018/downloads

Adults with a dental visit in the last year, 2014

Geography	
Giles County	77.5%
Virginia Department of Health, Health H http://www.vdh.virginia.gov/data/hea	

Physical Environment

Geography	Percentage of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities
Virginia	15%
Giles County	9%
Monroe County	9%
2018 County Health Rankings, Comprehensive Housing Affordability Strategy (CHAS) http://www.countyhealthrankings.org/app/virginia/2018/downloads	

Severe housing problems, 2010-2014

Occupied housing units with no vehicles available

Geography	#	%
Virginia	196,917	6.4%
Giles County	447	6.1%
Monroe County	343	5.8%

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP04&prodType=table

Driving alone to work

Geography	Drive alone to work	Drive alone to work, commute > 30 minutes	
Virginia	77%	39%	
Giles County	80%	39%	
Monroe County	85%	49%	
2018 County Health Rankings, 2012-2016 5-year American Community Survey http://www.countyhealthrankings.org/app/virginia/2018/downloads			

Health Outcomes / Health Status of the Population

County Health Rankings: Health outcomes

Geography	2016	2017	2018
Giles County (out of 133)	78	90	96
Monroe County (out of 55)	20	27	25
*Rankings between Giles and Monroe not comparable			

County Health Rankings

http://www.countyhealthrankings.org/app/virginia/2018/downloads

County Health Rankings: Health factors

Geography	2016	2017	2018
Giles County (out of 133)	71	51	62
Monroe County (out of 55)	14	11	18

*Rankings between Giles and Monroe not comparable

County Health Rankings

http://www.countyhealthrankings.org/app/virginia/2018/downloads

Adults reporting poor or fair health

Geography	2014	2015	2016
Virginia	17%	15%	16%
Giles County	14%	13%	14%
Monroe County	21%	22%	22%

2016 County Health Rankings, 2014 Behavioral Risk Factor Surveillance System 2017 County Health Rankings, 2015 Behavioral Risk Factor Surveillance System 2018 County Health Rankings, 2016 Behavioral Risk Factor Surveillance System http://www.countyhealthrankings.org/app/virginia/2017/downloads

Average poor physical health days in the past month

Geography	2014	2015	2016
Virginia	3.5	3.2	3.5
Giles County	3.3	3.3	3.4
Monroe County	4.7	5.1	5.0

2016 County Health Rankings, 2014 Behavioral Risk Factor Surveillance System 2017 County Health Rankings, 2015 Behavioral Risk Factor Surveillance System 2018 County Health Rankings, 2016 Behavioral Risk Factor Surveillance System http://www.countyhealthrankings.org/app/virginia/2018/downloads

Average mentally unhealthy days in the past month

Geography	2014	2015	2016
Virginia	3.3	3.3	3.5
Giles County	3.3	3.3	3.7
Monroe County	4.6	4.6	4.9

2016 County Health Rankings, 2014 Behavioral Risk Factor Surveillance System 2017 County Health Rankings, 2015 Behavioral Risk Factor Surveillance System 2018 County Health Rankings, 2016 Behavioral Risk Factor Surveillance System http://www.countyhealthrankings.org/app/virginia/2018/downloads

Adults who report having one or more days of poor health that kept them from doing their usual activities during the past 30 days, 2013-2014

Geography	
Virginia	41.1%
New River Health District	38.8%
Virginia Department of Health Behavioral Risk Factor Surveillance System http://www.vdh.virginia.gov/brfss/data/	

Confirmed elevated blood lead levels in children under 36 months

Geography	Population <36 months	2014	2015
Virginia	303,439	185	164
Giles County	529	0	0
Virginia Department of Health, Lead-Safe			

http://www.vdh.virginia.gov/leadsafe/data-statistics/

HIV infection rate

Coography	HIV infections per 100,000		
Geography	2014	2015	
Virginia	11.1	11.2	
Giles County	17.8	17.8	
Virginia Department of Health, Sexually Transmitted Infections			

http://www.vdh.virginia.gov/data/sexually-transmitted-infections/

New HIV diagnosis Rate

Coography	New diag	noses per 1	100,000
Geography	2014	2015	2016
Virginia	11.0	11.6	10.3
Giles County	17.8	18.0	0.0
Virginia Department of Health http://www.vdh.virginia.gov/data/opioid-overdose/			

	Reported tuberculosis cases		
Geography		per	100,000
	2014	2015	2016
Virginia	2.4	2.5	2.4
Giles County	0.0	0.0	0.0

Reported tuberculosis rate

Virginia Department of Health, Tables of Selected Reportable Diseases http://www.vdh.virginia.gov/surveillance-and-investigation/virginiareportable-disease-surveillance-data/tables-of-selected-reportablediseases-in-virginia-by-year-of-report

New reported hepatitis C case rate

Coography	New cases	per 100,000	, ages 18-30
Geography —	2014	2015	2016
Virginia	76.3	89.7	131.3
Giles County	348.6	518.6	425.7
Virginia Department of Heal	th		

http://www.vdh.virginia.gov/data/opioid-overdose/

High blood pressure, 2015

Geography	
Virginia	33.2%
New River Health District	27.0%
Virginia Department of Health http://www.vdh.virginia.gov/data/chronic-disease/	

Obesity

Geography	2012	2013	2014
Virginia	27%	27%	28%
Giles County	31%	30%	30%
Monroe County	32%	31%	32%

2016 County Health Rankings, 2012 CDC Diabetes Interactive Atlas 2017 County Health Rankings, 2013 CDC Diabetes Interactive Atlas 2018 County Health Rankings, 2014 CDC Diabetes Interactive Atlas http://www.countyhealthrankings.org/app/virginia/2018/downloads

Heart disease prevalence, 2014

Geography	
Giles County	3.0%
Virginia Department of Health	
Behavioral Risk Factor Surveillance Syster	n
http://www.vdh.virginia.gov/data/chron	ic-disease/

Diabetes prevalence, 2014

Geography

Giles County10.3%Virginia Department of Health
Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/data/chronic-disease/

Chronic obstructive pulmonary disease (COPD) prevalence, 2014

Geography	
Giles County	7.4%
Virginia Department of Health	
Behavioral Risk Factor Surveillance Syst	tem
http://www.vdh.virginia.gov/data/chro	onic-disease/

Chronic disease discharges by age group

Asthma, June 2016 – June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	0.0	19.8	0.0
Rates based on primary dia Sg2, Virginia Health Inform			

Angina, June 2016 – June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	18.8	99.1	156.6
Rates based on primary diagr Sg2, Virginia Health Informat			

Chronic obstructive pulmonary disease, June 2016 - June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	0.0	198.3	704.6
Rates based on primary diagno Sg2, Virginia Health Informatio	1 0		

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	18.8	396.6	1,513.6
Rates based on primary diagn Sg2, Virginia Health Informati			

Congestive heart failure, June 2016 - June 2017

Diabetes, June 2016 – June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	244.7	244.7	244.7
Rates based on primary diagno Sg2, Virginia Health Informatio			

Hypertension, June 2016 - June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	0.0	19.8	78.3
Rates based on primary diagno Sg2, Virginia Health Informatio			

Pneumonia, June 2016 – June 2017

Coography	Discharge rate per 100,000		
Geography	18-44 years old	45-64 years old	65+ years old
Giles County	94.1	456.1	1,278.7
Rates based on primary diagnos Sg2, Virginia Health Information			

Overall death rate

Coography	Deaths per 100,000			
Geography	2014	2015	2016	
Virginia	74.1	74.6	69.0	
Giles County	124.9	119.7	83.1	

Virginia Department of Health

Office of Chief Medical Examiner's Annual Report, Table 1.8 http://www.vdh.virginia.gov/medical-examiner/annual-reports/

Malignant neoplasm deaths per 100,000, 2013

Geography	
Virginia	161.3
Giles County	197.9
Virginia Department of Health http://www.vdh.virginia.gov/Health	Stats/stats.htm

Heart disease deaths per 100,000, 2013

Geography	
Virginia	155.9
Giles County	216.1
Virginia Department of Health http://www.vdh.virginia.gov/Healt	thStats/stats.htm

Cerebrovascular disease deaths per 100,000, 2013

Geography	
Virginia	38.5
Giles County	23.6
Virginia Department of Health http://www.vdh.virginia.gov/He	ealthStats/stats.htm

Chronic lower respiratory disease deaths per 100,000, 2013

Geography	
Virginia	37.2
Giles County	50.6
Virginia Department of Health http://www.vdh.virginia.gov/Healt	hStats/stats.htm

Diabetes mellitus deaths per 100,000, 2013

Geography	
Virginia	18.3
Giles County	36.1
Virginia Department of Health http://www.vdh.virginia.gov/HealthS	Stats/stats.htm

Suicide death rate

Coography	Suicide deaths per 100,000							
Geography	2014	2015	2016					
Virginia	13.8	13.1	13.2					
Giles County	11.9	6.0	23.7					

Virginia Department of Health Office of Chief Medical Examiner's Annual Report, Table 1.8 http://www.vdh.virginia.gov/medical-examiner/annual-reports/

Accidental death rate

Coography	r 100,000		
Geography —	2014	2015	2016
Virginia	31.6	34.2	35.2
Giles County	71.4	59.9	35.6

Virginia Department of Health Office of Chief Medical Examiner's Annual Report, Table 1.8

http://www.vdh.virginia.gov/medical-examiner/annual-reports/

Drug/Poison death rate

Coography	Drug	/Poison deaths	per 100,000
Geography	2014	2015	2016
Virginia	11.4	11.6	16.0
Giles County	17.8	23.9	17.8
0	of Health, Office of Chief Medica inia.gov/medical-examiner/anr		eport, Table 5.8

Appendices Appendix 1: Community Health Improvement Process

Step 1: Conduct CHNA

- •Create Gantt chart
- •Form CHAT
- •Collect and review secondary data
- Conduct stakeholder surveys
- •Conduct Target Population Focus Groups
- •Conduct Community Health Survey
- Review assessment data
- Prioritize Health Needs
- Publish CHNA Report

Every Three Years

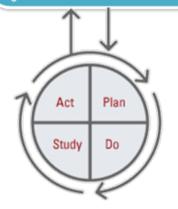
Step 5: Evaluation (on-going)

Evaluate applicable process and outcome measures for each expected outcome and report to CHAT quarterly
Report progress being made for each community health need identified during last CHNA cycle and community grand giving to hospital Board of Directors bi-annually

•Undated progress being made for each community health need on organization's 990 tax form

Step 4: Program Implementation (on-going)

- •Use PSDA cycle to conduct small scale tests
- Refine the changes each PDSA cycle making small incrmental improvements
- After successful implementation of pilot, implement change on a broader scale throughout the organization or to other organizations



Step 2: Strategic Planning

- CHAT participate in strategic planning for top priorities
- •Decide which issues to focus on
- Identify alignment opportunities between organizations
- Identify changes that are likely to lead to improvement
- •Establish measures that will tell if changes are leading to improvement
- •Select evidence-based approaches (interventions / strategies) that are most likely to succeed in addressing community health needs identified in CHNA

Step 3: Implementation Strategy

• Develop a written implementation strategy that specifies what health needs were identified, what needs the organization plans to address, and what needs the organization doesn't plan to address (and why they are not addressing these issues)

- Include expected outcome for each community issue being addressed, proposed evidence-based intervention / strategies with goals and objectives defined , and how the goals and objectives will be measures (both process and outcome measures)
 Adoption of the implementation strategy by the organization Board of Directors
- Integrate the implementation strategy with community and organization plan
 Host event in the community to release the results of the CHNA and implementation strategy

Appendix 2: Gantt Chart

Tasks	Assigned To:	Start Date	End Date	Duration (working days)	% complete
2018 Giles County		08-10 Thu	11-01 Thu	320	68%
CHA	•	00.40.5	00.44 E :		1000/
Create Gantt Chart	Amy	08-10 Thu	08-11 Fri	1	100%
2018 CHA Planning Meeting & Identify additional CHAT members	Amy, Stephanie, Jeff Dinger, Kristie Williams	09-14 Thu	10-30 Mon	32	100%
Pre-CHAT #1 Work	Amy/Stephanie	10-30 Mon	11-06 Mon	5	100%
CHAT #1 Meeting	СНАТ	11-06 Mon	11-06 Mon	1	100%
Survey Distribution		10-01 Sun	02-28 Wed	107	100%
Focus Groups	Amy/Stephanie	11-06 Mon	02-28 Wed	82	100%
Collect Secondary Data for CHA	Amy, Carilion support	12-01 Fri	03-31 Sat	85	100%
CHAT #2 Meeting	СНАТ	01-29 Mon	01-29 Mon	1	100%
Analyze Survey Data	Amy	03-01 Thu	05-07 Mon	47	100%
CHAT Meeting #3- Data and Prioritization	СНАТ	05-07 Mon	05-07 Mon	1	100%
Final CHA Report	Carilion Clinic	06-01 Fri	07-19 Thu	34	90%
CHAT Strategic Planning Meeting #4	СНАТ	07-12 Thu	07-12 Thu	1	100%
Create Implementation Strategy	Carilion Clinic / FOCUS	04-23 Mon	09-01 Sat	94	15%
Communication Plan and Community Forum	Carilion Clinic / FOCUS	08-01 Wed	11-01 Thu	66	5%

Appendix 3: Community Health Need Prioritization

Community Health Assessment Prioritization

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

Rank	- 10, with 1 being the most pertinent.
Kank	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 dental care Access to mental / behavioral health services
	Access to mental / benavioral 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:

Appendix 4: Community Health Survey

GILES AREA COMMUNITY HEALTH SURVEY

ACCESS and BARRIERS TO HEALTHCARE

	Do you use medical care services? • <i>If yes, where do you go for medical</i> Doctor's Office Carilion Clinic Family Medicine – Giles Carilion Clinic Obstetrics & Gynecology – C Community Health Center of the NRV Craig County Health Center Giles Community Health Center / Giles Free Emergency Room Health Department	<i>care</i> : Giles	 ? (Check <u>all</u> that apply) Monroe Heal Pharmacy Cl Planned Pare Pulaski Free Salem VA Met 	inic entho Clinic edical nmur / Wa	ood c Center nity Health Center lk in Clinic
		are? J Gil	(Check <u>all</u> that apply) les Community Health Center /		Urgent Care / Walk in Clinic
	Community Health Center of the NRV Craig County Dental Clinic	J Ko J Mi J Mo	les Free Clinic ol Smiles (Christiansburg) ssion of Mercy Project onroe Health Center lem VA Medical Center		Wytheville Community College Dental Hygiene Clinic Other:
	Access ServicesImage: ServicesBlue Ridge Behavioral HealthcareImage: ServicesCatawba HospitalImage: ServicesCommunity Health Center of the NRVImage: Services	ealti Ci D Ei D Gi Fi D M			? (Check <u>all</u> that apply) New River Valley Community Services Respond
4.	What do you think are the <u>five mos</u> <u>five</u>)	<u>t im</u>	portant issues that affect healt	h in e	our community? (Please check
	Access to healthy foods Access to affordable housing Accidents in the home (e.g. falls, burns, cuts) Aging problems Alcohol and illegal drug use Bullying Cancers Cell phone use / texting and driving / distracted driving		Environmental health (e.g. water quality, air quality, pesticides, etc.) Gang activity Heart disease and stroke High blood pressure HIV / AIDS Homicide Infant death Lack of exercise		 Not getting "shots" to prevent disease Not using seat belts / child safety seats / helmets Overweight / obesity Poor eating habits Prescription drug abuse Sexual assault Stress Suicide
	Child abuse / neglect Dental problems Diabetes		Lung disease Mental health problems Neighborhood safety		 Teenage pregnancy Tobacco use / smoking Unsafe sex

- Diabetes
- Domestic violence

100

Other:_____

Which health care services are hard to get in our community? (Check all that apply) 5.

- Adult dental care
- Alternative therapy (e.g. herbal,
- acupuncture, massage) Ambulance services
- Cancer care
- Child dental care
- Chiropractic care
- Dermatology
- Domestic violence services
- Eldercare
- Emergency room care

What do you feel prevents you from getting the healthcare you need? (Check all that apply) 6.

- Afraid to have check-ups
- Can't find providers that accept
- Can't find providers that accept
- Childcare
- Cost
- Don't know what types of services are available

- □ End of life / hospice / palliative care
- Family doctor
- Family planning / birth control
- Immunizations
- Inpatient hospital
- Lab work
- Medication / medical supplies
- Mental health / counseling
- Physical therapy
- Preventive care (e.g. yearly check-ups)

- - my Medicaid insurance
- my Medicare insurance

Don't like accepting government assistance

- Don't trust doctors / clinics
- Have no regular source of healthcare
- Lack of evening and weekend services

CENEDAL HEALTH OUECTIONS

- **D** Programs to stop using tobacco products
- Specialty care (e.g. heart doctor)
- Substance abuse services -drug
- and alcohol
- Urgent care / walk in clinic
- Vision care
- Women's health services
- X-rays / mammograms
- None
- Other:___
- **D** Language services
- Location of offices
 - Long waits for appointments
- No health insurance
- No transportation
- □ I can get the healthcare I need
- Other:

GENERAL HEALTH QUESTIONS			
7. Please check one of the following for each statement	Yes	No	Not applicable
I have had an eye exam within the past 12 months.			
I have had a mental health / substance abuse visit within the past 12 months.			
I have had a dental exam within the past 12 months.			
I have been to the emergency room in the past 12 months.			
I have been to the emergency room for <u>an injury</u> in the past 12 months (e.g. motor vehicle crash, fall, poisoning, burn, cut, etc.).			
I have been a victim of domestic violence or abuse in the past 12 months.			
My doctor has told me that I have a long-term or chronic illness.			
I take the medicine my doctor tells me to take to control my chronic illness.			
I can afford medicine needed for my health conditions.			
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").			
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").			
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check "Not applicable").	٦		٦
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)			
Does your neighborhood support healthy eating? (e.g. community gardens, farmers' markets, etc.)			
In the area that you live, is it easy to get affordable fresh fruits and vegetables?			
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?	٦		
Have there been times in the past 12 months when you did not have enough money to pay your rent or mortgage?			٥
Do you feel safe in your neighborhood?			

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

- Back-pack or summer food programs
- Community garden
- □ Corner store / convenience store / gas station
- Dollar store
- Farmers' market
- Food bank / food kitchen / food pantry
- Grocery store

- Home garden
- I do not eat at home
- I regularly receive food from family, friends, neighbors, or mv church
- Meals on Wheels
- Take-out / fast food / restaurant
- Other: _____

High co-pay

	During the past 7 days, how many or vegetable juice. <i>(Please check or</i>)	<u>1e</u>)						Do not	count fruit
	during the past 7 days		4 – 6 times during the 1 time per day	e pa	st 7 days		3 times per day 4 or more times	per day	7
	1 – 3 times during the past 7 days		2 times per day						
10. □ □ □ □ □	Have you been told by a doctor that Asthma Cancer Cerebral palsy COPD / chronic bronchitis / emphysema Depression or anxiety	it yo	Drug or alcohol pro Heart disease High blood pressu	oble re	ms		 Mental hea Obesity / o Stroke / ce I have no h Other: 	verweig rebrova ealth pr	ht scular disease oblems
	How long has it been since you las Within the past year (1 to 12 months ago Within the past 2 years (1 to 2 years ago)	ited a doctor for a			st 5 ye	ears (2 to 5 year		
	How long has it been since you las specialists, such as orthodontists. Within the past year (1 to 12 months ago	(Ple		_		-	reason? Incluears (2 to 5 years		its to dental
	Within the past 2 years (1 to 2 years ago)			5 or more year			's ago j	
	How connected do you feel with the		mmunity and tho Somewhat connected		round you?		🗖 Not conr	nected	
14.	In the past 7 days, on how many da the time you spent in any kind of p for some of the time.)								
• 0	days 🗆 1 day 🗖 2 days		□ 3 days	4 da	ays 🗖 5 d	days	🗖 6 day	5	🗖 7 days
15.	During the past 7 days, how many together?	time	es did all, or most,	of	your family li	iving	in your hous	e eat a	meal
	Never Image: 3-4 till 1-2 times 5-6 till				7 times More than 7 ti	mes		Not app I live al	plicable / one
	Would you say that in general youExcellentIVery good	r hea	alth is: <i>(Please che</i> Good	eck <u>(</u>	-	Fair			Poor
17.	Thinking about your physical heal the past 30 days was your physica						ıry, for how n	nany da	ays during
18.	Thinking about your mental health many days during the past 30 days								ons, for how
	During the past 30 days: <i>(Check ali</i> I have had 5 or more alcoholic drinks (if	male) or 4 or		I have used ma				
	more alcoholic drinks (if female) during I have used tobacco products (cigarettes				ecstasy, crack,		legal drugs (e.g. etc.)	cocaine	, heroin,
	tobacco, e-cigarettes, etc.) I have taken prescription drugs to get hig	gh			None of these				
20.	Have you ever used heroin? 🗆 Yes	[]	lo						
	How many vehicles are owned, lea your household? Please be sure to If you do not drive, what mode of t	incl	ude motorcycles,	mo	peds and RVs	s		current Vehicles	-
	Not applicable- I drive Bike or walk Friends / family drive me		Public transit (i.e. l similar) RADAR / CORTRAI	ous,			TaxiOther:		

DEMOGRAPHIC INFORMATION and HEALTH INSURANCE
23. Which of the following describes your current type of health insurance? (<i>Check <u>all</u> that apply</i>)
COBRAHealth Savings / SpendingMedicare
Dental Insurance Account Medicare Supplement
Employer Provided Insurance Individual / Private Insurance / No Dental Insurance No Dental Insurance
Government (VA, Champus) Marketplace / Obamacare No Health Insurance
□ Medicaid
24. <u>If you have no health insurance,</u> why don't you have insurance? (<i>Check <u>all</u> that apply</i>)
 Not applicable- I have health insurance D Not applicable- I have health insurance D Too expensive / cost
I don't understand Marketplace / Obamacare options I don't understand Marketplace / Obamacare options I unemployed / no job
 Not available at my job O ther:
□ Student
25. What is your ZIP code?
26. What is your street address (optional)?
27. What is your age?
28. What is your gender? 🗖 Male 🛛 Female 🗖 Transgender
29. What is your height?
30. What is your weight?
31. 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
 32. What is your highest education level completed? □Less than high school □ Some high school □ High school diploma / GED □ Associates □ Bachelors □ Masters / Ph 33. What is your primary language? □ English □ Spanish □ Other
34. What ethnicity do you identify with? (Check all that apply)
□ Native Hawaiian / Pacific Islander □ Asian □ Black / African American □ White □ More than one race □ Decline to answer □ Other:
D American Indian / Alaskan Nauve D Latino D More than one race D Decime to answer D Other:
35. What is your marital status? I Married Single Divorced Widowed Domestic Partnership
36. What is your yearly household income?
\Box \$0 - \$10,000 \Box \$10,001 - \$20,000 \Box \$20,001 - \$30,000 \Box \$30,001 - \$40,000 \Box \$40,001 - \$50,000
□ \$50,001 - \$60,000 □ \$60,001 - \$70,000 □ \$70,001 - \$100,000 □ \$100,001 and above
37. What is your current employment status?
□ Full-time □ Part-time □ Unemployed □ Self-employed □ Retired □ Homemaker □ Student
38. Is there anything else we should know about your (or someone living in your home) health care needs in
Giles County or Monroe County?

Thanks for helping make the Giles Area a healthier place to live, work, and play!

Appendix 5: Stakeholder Survey

Giles County Area Professional Informant Survey Barriers and Challenges Faced by Residents and Health and Human Services Agencies

An online version of this survey is available at <u>https://www.surveymonkey.com/r/2018CHStakeholder</u>

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

1. Your name, organization, and title:

NAME:	
ORGANIZATION:	
TITLE:	

2. What are the most important issues (needs) that impact health in the Giles County area?

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

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

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

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

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

Thank you for your input!

Appendix 6: Stakeholder Survey and Focus Group Locations

Organization/Group
FOCUS – Community Health Assessment Team
Giles County Day Report Program Staff
Narrows Head Start

Appendix 7: Community Resource List

Community Resources listed by Stakeholders are listed below along with publicly available contact information collected in spring 2018. A more comprehensive resource list can be found at https://tinyurl.com/yb7bh8ys. This list is a point-in-time snapshot of resources available and is not updated regularly. Please note that information may have changed since the collection date.

Community members can also learn more about available resources by calling 2-1-1 or going online to <u>https://www.211virginia.org/consumer/index.php.</u> 2-1-1 is a free service available to help callers find appropriate resources in their locality.

AA Meetings 529 Wenonah Avenue Pearisburg, VA 24134

Agency on Aging Meals on Wheels 141 East Main Street., STE 500 Pulaski, VA 24301 (540) 980-7720 http://www.nrvaoa.org/

Carilion Giles Community Hospital 159 Hartley Way Pearisburg, VA 24134 (540) 921-6000 https://www.carilionclinic.org

CHIP of New River Valley 114 N Franklin Street Christiansburg, VA 24073 (540) 394- 3255 http://newrivercommunityaction.org/chip/

Community Health Center 219 South Buchanan Street Pearisburg, VA 24134 (540) 921-3502 http://www.chcnrv.org/

Department of Social Services 211 Main Street., Suite 109 Narrows, VA 24124 (540) 726-8315; (540) 626- 7291 https://www.gileshealthnet.org/GCSS.php Family Center 701 Wenonah Avenue Pearisburg, VA (540) 921- 3024 http://gileshealthandfamily.org/

FMRS Mental Health Counseling Middle Street Union, WV 24983 (304) 772-5452 https://www.fmrs.org/

Giles County Administration FOCUS Program 315 North Main Street Pearisburg, VA 24134 (540) 921-2525 http://virginiasmtnplayground.com/gilescounty-health-community-outreach/

Giles Health and Giles Free Clinic 219 Buchanan Street Pearisburg, VA 24134 <u>https://www.gileshealthnet.org/freeclinic.ph</u> p

County Health Department 120 North Main Street Pearisburg, VA 24134 (540) 235-3135 http://www.vdh.virginia.gov/new-river/ Giles County Lion's Club 315 North Main Street Pearisburg, VA 24134 (540) 921-2525 http://virginiasmtnplayground.com/tag/lion s-club/

Giles County Senior Citizen Center 1320 Wenonah Avenue Pearisburg, VA 24134 (540) 921-3924

Giles County Wellness Center 140 Clendennin Rd Narrows, VA 24124 (540) 921- 4292 http://gilescountywellness.com/GCWC/

Giles Life Saving and Rescue Squad 175 Industrial Park Road Pearisburg, VA 24134 (540) 921-4357 http://www.gilesrescue.com/

HEAD START- New River Community Center 516 B Wenonah Avenue Pearisburg, VA 24134 (540) 921-2146 http://newrivercommunityaction.org/contac t/

Monroe Health Clinic 200 Health Center Drive P.O. Box 590 Union, WV, 24983 (304) 772- 3064 http://monroehealthcenters.com/ NRV Cares 205 West Main Street #4 Christiansburg, VA 24073 (540) 381-8310 https://www.nrvcares.org/

New River Valley Community Center New Life Recovery Center 7193 Warden Ct., Radford, VA 24141 (540) 961- 8400 http://www.nrvcs.org

New River Valley Rotary Club Addresses varies <u>https://newrivervalleyrotaryclubs.org/</u>

Pearisburg Recreation Department 112 Tazewell Street Pearisburg, VA 24134 (540) 921-0340 https://www.pearisburg.org

Virginia Cooperative Extension 507 Wenonah Avenue Pearisburg, VA 24134 (540) 921-3455 https://giles.ext.vt.edu/

Virginia Department of Aging and Rehabilitative Services Locations Varies https://www.vadars.org/offices.aspx

WIC-Giles County 1 Taylor Avenue, #4 Pearisburg, VA 24134 (540) 235-3135 http://www.wicprograms.org/li/giles_count y_health_department_wic_24134

Appendix 8: Links and References to Other Community Health Assessments and Data

• Virginia Youth Survey, Virginia Department of Health http://www.vdh.virginia.gov/virginia-youth-survey/data-tables/