Rockbridge Area Community Health Assessment

FINAL REPORT

AUGUST 31, 2018

Carilion Stonewall Jackson Hospital
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Contents

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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 communityoutreach@carilionclinic.org.

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 Rockbridge 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 Rockbridge Area Community Health Assessment (RACHA) was due to the strong leadership and participation of its Project Management Team, the Project Support Team, members of Rockbridge 2020, and the Community Health Assessment Team. Thank you to all of the community members who participated in the Community Health Survey, focus groups and the Community Visioning Event.

Members of these teams included:

Project Management Team

Project Director: Chuck Carr, Carilion Stonewall Jackson Hospital - VP
Project Director: Shirley Holland, Carilion Clinic- VP Planning and Community Development
Project Director: Greg Madsen, Carilion Stonewall Jackson Hospital - VP
Project Manager: Aaron Boush, Carilion Clinic- Community Health & Outreach Manager
Project Manager: Amy Michals, Carilion Clinic – Community Health & Outreach Analyst
Project Manager: Holly Ostby, Carilion Stonewall Jackson Hospital – Community Health Educator

Project Support Team

Carilion Clinic Community Health & Outreach Intern: Rohan Kaushal

Carilion Clinic Community Health & Outreach Intern: Devki Patel
Carilion Clinic Community Health & Outreach Intern: Emily Skywark
Carilion Clinic Carilion Direct
Virginia Medical Reserve Corps Volunteers: Penny Askew and Frieda Driver
Focus Group Facilitators and Scribes: Jaclyn Hostetter, Joan Manley, and Jeri Schaff

Community Visioning Event Coordination Team

Dr. Laura Kornegay, Health Director, Central Shenandoah Health District
Jeri Schaff, Executive Director, Valley Program for Aging Services
Suzanne Sheridan, Executive Director, Rockbridge Area Health Center

Rockbridge 2020

Rockbridge 2020 was founded in 1995 by Stonewall Jackson Hospital. It brought together providers of health care and related services in the Rockbridge Area for the purpose of collaboration and planning for healthcare over the next quarter of a century. Informal monthly meetings allowed participants to network and educate each other about services available through each of the agencies represented. Through the early years a few surveys were conducted to identify needs in the community.

The work of Rockbridge 2020 continued in 2006 when Stonewall Jackson Hospital became part of the Carilion Health System (now Carilion Clinic). In 2011, Carilion Stonewall Jackson hospital partnered with the Rockbridge Area Free Clinic (now the Rockbridge Area Health Center) and the Central Shenandoah Health District to conduct a Community Health Assessment (CHA). The 12-month project defined and assessed the health of our community, and enabled members of

Rockbridge 2020 to develop a 3-year strategic plan to address the most pressing needs (Access to Health Services; Nutrition, Physical Activity and Obesity; Oral Health; and Mental Health). The completed assessment and community-wide strategic plan were made available to the general public in 2012. One of the key outcomes from this assessment was the transition of the Rockbridge Area Free Clinic to the Rockbridge Area Health Center.

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

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

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 at "Community Health Assessment Teams" (CHAT) lead the CHA projects. The CHATs consist 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 Rockbridge Area, Rockbridge 2020 serves as the CHAT.

CHAT Members and Area of Expertise

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

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

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

Executive Summary

Carilion Clinic and Rockbridge 2020 partnered to conduct the 2018 RACHA. Together with partners, we are committed to the essential work of improving and maintaining the health of our community. 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 plan effectively the vital work of maintaining and improving health.

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

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

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

Description of the Community

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

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

In order to fully appreciate the present day community of Rockbridge County, it is important to understand the values and accomplishments of the first families. As the ancient mountains, rivers, and fertile valley fields define the county's landscape, the accomplishments of those past provide a strong foundation for the community leaders of today. When charting the course for future generations, it is important to remember how the community first expressed its values and to understand those values as living sources of strength and inspiration.

Settlers of Scotch-Irish and German descent first came to the Shenandoah Valley in the 1730s from Pennsylvania. They settled along a Native American path known as the Great Wagon Road. This ancient path still serves the community as US Route 11. Rockbridge County was founded in 1778 from parts of Augusta County and Botetourt County. It was named for the natural rock formation; known as Natural Bridge, which was owned at that time by Thomas Jefferson. The town, later incorporated as Lexington, was established where the Maury River and the Great Wagon Road conveniently intersect[4].

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[1] US Census Bureau State and County Quick Facts, 2010 . Retrieved from:
https://www.census.gov/quickfacts/fact/table/buenavistacityvirginia,lexingtoncityvirginia,rockbridgecountyvirginia,va/PST045217
[2] Virginia Rural Health Plan, 2008, http://www.va-srhp.org/docs/plan/11-appendix-d.pdf

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

[4] Lexington – America: From the Beginning, https://lexingtonvirginia.com/history-buffs/america-from-the-beginning

The primary industry was education. The Scotch-Irish settlers formed Augusta Academy in the 1740s. The name later changed to Liberty Hall Academy and a new stone school was built in 1793. The Academy was renamed Washington College after George Washington provided sustainable funding for the school. Following the Civil War, Robert E. Lee served as the college president and expanded the curriculum. After his death, Washington College was renamed Washington and Lee University, as it remains today[5].

In 1816, Lexington became one of three areas in the state designated by the U.S. General Assembly of Virginia to store an arsenal of weapons[6]. In 1839, the small town's second college, Virginia Military Institute was founded at the site of the arsenal. The railroad arrived in Lexington between 1860 and 1880[7], and with a strong community of educated, innovative leaders, Rockbridge County began to grow and prosper after the Civil War. In 1867, the county added a third college, Southern Seminary, an institute of higher education for women located in Buena Vista. Southern Seminary is now known as Southern Virginia University[8].

Despite these amenities and the presence of key safety net providers in the region, including Carilion Stonewall Jackson Hospital, a federally qualified health center, the health department and other service organizations, there remain thousands of low-income and uninsured or underinsured residents who do not have access to affordable care.

Community Demographics

The 2018 RACHA revealed distinct communities with significant 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 cities of Lexington and Buena Vista to be 7,036 and 6,610 respectively and the population of Rockbridge County to be 22,450[9]. For all communities, the ACS predicts positive future population change, but to varying degrees. Median age in the Rockbridge Area localities ranges from 21.5 in the City of Lexington to 48.5 in Rockbridge County[10]. The ACS finds that for most of the Rockbridge Area, a larger percentage of the population is White than in the State of Virginia as a whole. In Rockbridge County, 93.4% of the population is White, 2.6% of the population is Black and 2.4% identify as more than one race. All other races make up less than 1% of the population. Hispanic or Latino residents make up 1.6% of the population[11].

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[5] W&L: A Brief History. Retrieved from: https://www.wlu.edu/about-wandl/history-and-traditions/a-brief-history
[6] Encyclopedia Virginia, Virginia Military Institute: Before the War. Retrieved from:
https://www.encyclopediavirginia.org/Virginia_Military_Institute_During_the_Civil_War#start_entry
[7] Lexington Virginia, A Brief History. Retrieved from: https://www.lexva.com/lexhistory.htm
[8] Southern Sem College Store. Retrieved from: http://www.southernsemcollegestore.com/
[9] 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

[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 estimates, American Community Survey, Table DP05
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP05&prodType=table

Lexington and Buena Vista are slightly more racially and ethnically diverse than Rockbridge County, with a populations that are 84.5% and 89.8% White, 9.1% and 1.7% Black, and 4.0% and 7.3% Asian, with 2.3% and 1.2% respectively representing more than one race and the remainder representing small minorities of American Indian/Alaskan Native, Native Hawaiian/Pacific Islander or some other race at less than 1%[12]. Of the population, 4.2% of Lexington and 1.3% of Buena Vista identify as Hispanic or Latino[13]. The region is divided into urban and rural areas, which vary greatly in the economic means of the residents who live there. The low income population in the Rockbridge Area has a federal designation as a MUA. Many communities are designated as Primary and Dental Health Professional Shortage Areas (HPSA) and the entire Rockbridge Service Area is designated as a Mental Health HPSA[14].

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 Medically Underserved Areas (MUAs) and Health Professional Shortage Areas (HPSAs).

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

- Lexington City (35.47%)
- Buena Vista City (23.11%)
- Rockbridge County (21.53%)
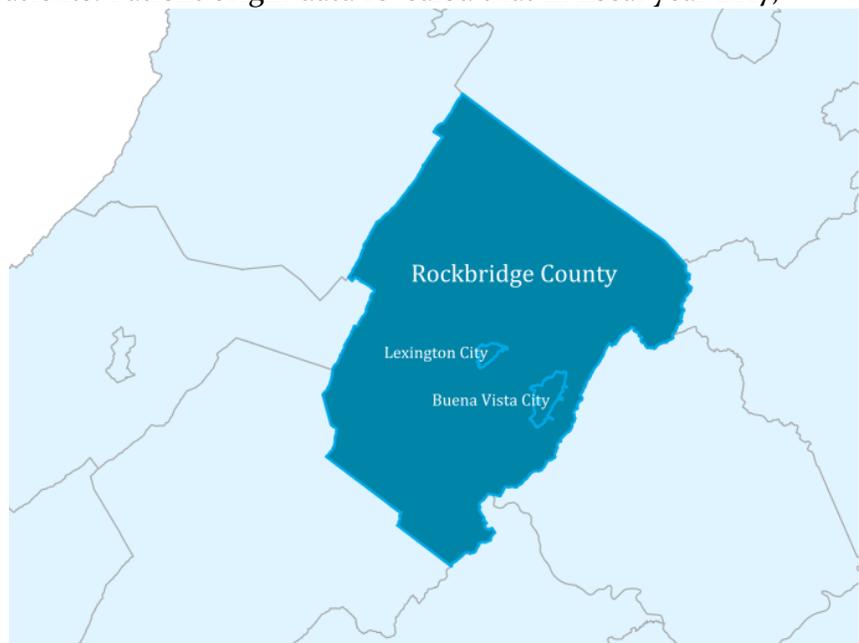
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[12] U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table DP05.
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP05&prodType=table

[13] 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

[14] Department of Health and Human Services, Health Resources and Services Administration Data Warehouse (2018).
https://datawarehouse.hrsa.gov/tools/analyzers/HpsaFindResults.aspx and
https://datawarehouse.hrsa.gov/tools/analyzers/MuaSearchResults.aspx

Existing Resources

Located at the southern end of the Shenandoah Valley, Rockbridge County is bound on the east by the Blue Ridge Mountains and on the west by the Allegheny Mountains, with gently rolling hills in between. Both agriculture and outdoor recreation are mainstays for the local economy. Four local colleges bring students from all over the world and help sustain a vibrant community that includes food, shopping, arts and cultural opportunities. Centrally located, the city of Lexington serves as the hub for health and human services resources for residents of Rockbridge County, Buena Vista and Lexington. The small size of our community ensures that everyone knows each other. This allows our health and human services organizations to work very closely with each other to reduce the disparities in access to care and access to resources that exist for many local residents. 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 our region. Please see Appendix 7 for a list of community resources in the Rockbridge Area.

Carilion Stonewall Jackson Hospital

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

Carilion Health System (now Carilion Clinic) purchased 80% of Stonewall Jackson Hospital in 2006. Carilion Clinic is a not-for-profit health care organization based in Roanoke, Virginia. It is mission-driven, focusing everyday on improving the health of the communities we 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 inspiring our region to grow stronger.

The other 20% continues to be owned by the community in the trust of the SJH Community Health Foundation. The Foundation provides monies for grants to local organizations that aim to improve the health of our community. Members of the Board of Directors for the Foundation sit on a committee of the CSJH Board of Directors to determine which grants to award. For the next three years, all grants will go toward programs and initiatives aimed at addressing needs identified in this Community Health Assessment.

Community Health Assessment Process

Method

Carilion Clinic and Rockbridge 2020 partnered to conduct the 2018 RACHA. Rockbridge 2020 is the community collaboration formed by Stonewall Jackson Hospital that works to address key health priorities identified in the triennial CHA.

A 33-member Community Health Assessment Team (CHAT) oversaw the planning activities. The service area included those living in the cities of Lexington and Buena Vista and in Rockbridge County. 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, focus groups with target populations, and focus groups of community members from the Community Visioning Event. Secondary data were collected including demographic and socioeconomic indicators as well as health indicators addressing access to care, health status, prevention, wellness, risky behaviors and the social environment.

Collaboration

Forming a true community collaborative with lasting impact is no small feat. Rockbridge 2020 fosters collaborative community development between partners using the Strive Collective Impact Model[15]. This evidence-based model focused on "the commitment of a group of important players from different sectors to a common agenda for solving a specific social problem" and has been proven to lead to large-scale change.

Collective impact focuses on four conditions for collective success: (1.) A Shared Community Vision: a broad set of cross-sector community partners come together in an accountable way to implement a vision for a healthier community and communicate that vision effectively. (2.) Evidence-based Decision Making: The integration of professional expertise and data to make decisions about how to prioritize a community's efforts to improve health outcomes. (3.) Collaborative Action: the process by which networks of appropriate cross-sector services/providers use data to continually identify, adopt and scale practices that improve health outcomes. (4.) Investment & Sustainability: There is broad community ownership for building civic infrastructure and resources that is committed to sustain the work of the partnership to improve health outcomes. Collective Impact also suggests having a neutral anchor institution to serve as the convening body for community collaborative.

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[15] Kania, J., & Kramer, M. (2011). Collective Impact. Stanford Social Innovation Review. Retrieved from http://www.ssireview.org/images/articles/2011_WI_Feature_Kania.pdf

Carilion Clinic believes in the power of collaboration and understands that it must address community health issues together, with key partners, as a community. To ensure lasting impact from the health assessment and resulting community improvement process, Carilion operates and plays a key convening role in Rockbridge 2020.

Rockbridge 2020 fosters collaborative relationships among over 36 diverse stakeholder organizations representing health and human services, businesses, local governments, and other non-profit organizations.

Community Health Improvement Process

Carilion Clinic's community health improvement process was adapted from Associates in Process Improvement's Model for Improvement and the Plan-Do-Study-Act (PDSA) cycle developed by Walter Shewhart[16]. 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 data 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 self-select what issues they would like to work on and spend the strategic planning session developing a framework of goals and strategies to use as a starting point for strategic planning meetings in the coming summer and fall. In future strategic planning sessions, Rockbridge 2020 members identify alignment opportunities between organizations and system changes that are likely to lead to

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

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.

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 measures and outcome measures). The document must be formally approved by the hospital's Board of Directors and filed on the organization's 990 tax return. Carilion Clinic will integrate the implementation strategy with existing organizational and community plans.

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 cycle[17]. 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 on-going for existing community health improvement programs.

Step 5: Evaluation

Community health programs and metrics associated with the expected outcome in the implementation strategy will be monitored by Carilion Clinic Community Health and Outreach as well as Rockbridge 2020.

Progress will be reported to Carilion Stonewall Jackson Hospital'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.

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-outreach.

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

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[17] 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, focus groups with target populations and focus groups of community members from the Community Visioning Event. Secondary data were collected including demographic and socioeconomic indicators as well as health indicators addressing access to care, health status, prevention, wellness, risky behaviors and the social environment.

Community Health Survey (CHS)

The CHS consisted of 39 questions for adults age 18 and older about access and barriers to healthcare, general health questions, and demographic information. The survey mirrored Healthy People 2020 goals as well as many other national health surveys that do not collect health care data at the county or zip code level. This survey was not a scientific survey and the survey method used oversampling techniques of the target population. Please see Appendix 4 for Carilion Stonewall Jackson Hospital's CHS. Efforts were 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 were conducted with many groups of individuals in an effort to best understand health in the Rockbridge Area. The goal of the focus groups was 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 Medically Underserved Areas. We strove 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 at sites where participants already congregate. Snacks and beverages were provided.

The script for the focus groups was simple and consisted 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 addiction?

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

Stakeholder Survey

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

Community Visioning Event

A Community Visioning Event was hosted in January 2018 at which 44 community members, invited by the Community Visioning Event Coordination Team, participated in focus groups answering a similar set of questions as those asked on the stakeholder survey.

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 (RWJF)[18], where an individual lives, works and plays is a strong predictor of their health outcomes. Currently in the United States, a person's zip code can help predict their life expectancy due to its direct link to the social determinants of health such as poverty, race/ethnicity, education and employment status in these areas[19]. 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[20]."

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[18] County Health Ranking & Roadmaps. Retrieved from: http://www.countyhealthrankings.org/

[19] Robert Wood Johnson Foundation – Does where you live affect how long you live?. Retrieved from: https://www.rwjf.org/en/library/interactives/whereyouliveaffectshowlongyoulive.html

[20] HealthyPeople.gov, About Healthy People. Retrieved from: https://www.healthypeople.gov/2020/About-Healthy-People

Carilion responds to community health needs in innovative ways: having a robust primary care physician practice network of medical homes; 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 needs; 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 environment[21]. 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 elderly as well as across various racial and ethnic groups.

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[21] County Health Rankings & Roadmaps. Retrieved from: http://www.countyhealthrankings.org/

Community Health Assessment Findings

The findings of the 2018 Rockbridge Area Community Health Assessment revealed 10 priority health-related issues in the community, identified by the CHAT after review of the data collected.

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

The results of the assessment reflected a variety of health and social determinant factors, showing the understood impact social determinants have on overall health. The findings revealed distinct disparities in health for those living in poverty, with poverty itself identified as a top health priority. Buena Vista overall displayed worse results as compared to Rockbridge County and Lexington. Poverty rates were higher, academic attainment rates were lower and unemployment rates, while improving, continue to be greater than statewide 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. According to focus group participants, often individuals self-treat or delay treatment due to cost, shortage of care and a confusing medical care system. Survey responses revealed "Cost," "Long waits for appointments," "Lack of evening and weekend services" and "High co-pay" to be the top reasons that people feel prevent them from getting the healthcare they need. Stakeholders agreed, listing cost of health care as the second most significant barrier to accessing care in the community, next only to transportation.

According to the American Community Survey (ACS), the median household income in Buena Vista is $29,109, significantly lower than Rockbridge County at $52,478 and the State of Virginia at $66,149[22]. 61.5% of people in the City of Buena Vista live below 200% of the Federal Poverty Level (FPL) compared to 26.5% for the State of Virginia. In Lexington and Rockbridge County, 38.9% and 33.7% of residents respectively live below 200% FPL.

Academic Attainment levels in the City of Buena Vista are lower than Lexington and Rockbridge County, although on-time graduation rates improved in recent years to match Rockbridge County

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[22] U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1903.
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1903&prodType=table

in 2017 and almost caught up to the state rate of 91.3%[23]. When evaluating the academic attainment rates for the population 25 and over, Rockbridge County and Lexington outperform Buena Vista with 86.2% and 85% of people respectively having a high school degree or higher compared to 81.2% in Buena Vista. Lexington, due likely in part to the presence of Washington and Lee and Virginia Military Institute, has a much higher rate of residents over 25 with a Bachelor's degree or higher (44.9%) than Rockbridge County (25.1%) and Buena Vista (16.2%), even outperforming the state rate of 36.9%[24].

Reflective of the urban and rural differences that exist in the area, transportation opportunities vary across the municipalities. Residents of Lexington and Buena Vista are less likely to own a vehicle than residents of Rockbridge County[25].

When asked for the more important issues that affect health in our community, 43.9% of survey respondents answered "alcohol and illegal drug use," followed by 40.9% answering "overweight/obesity," 29.9% answering "mental health problems," and 29.2% saying "poor eating habits." Stakeholders responded that specialty care, mental health services and poor nutrition were the most important issues.

The Virginia Department of Health reports that in 2016 emergency department (ED) opioid overdose rates in the Rockbridge Area range from zero (0) overdoses per 100,000 people in Lexington to 201.5 overdoses per 100,000 people in from the City of Buena Vista. This compares to the state ED opioid overdose rate of 103.5 overdoses per 100,000 population.[26] The State 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 overdose[27].

Narcan (Naloxone) use rates have been higher in the City of Buena Vista at 62 per 100,000 population than the state rate according to Virginia Department of Health data[28]. Interestingly, according to the same data from 2016, while ED overdose visits in Buena Vista were much higher than other municipalities, the fatal overdose rate is zero (0), less than neighboring localities. The CHAT identified "alcohol and drug use" as the top priority health need, recognizing the significance of this crisis in our region. While the City of Lexington had lower overdose rates, it saw a notable spike in suicide deaths in 2016 to 71.0 per 100,000 from 13.8 per 100,000 the year before and compared to a rate of 13.2 per 100,000 in the State of Virginia.

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[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://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1501&prodType=table
[25] U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table DP04.
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_DP04&prodType=table
[26] Virginia Department of Health http://www.vdh.virginia.gov/data/opioid-overdose/
[27] 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-to-all/2016/11/21/f9b4f348-b00e-11e6-be1c-8cec35b1ad25_story.html?noredirect=on&utm_term=.f0386afe4b79
[28] Virginia Department of Health **http://www.vdh.virginia.gov/data/opioid-overdose/**

When asked, what health care services are hard to get in our community, survey respondents answered that "cancer care" (29.9%) was the most challenging to access, followed by "specialty care" (28.1%), "dermatology" (23.2%) and "mental health / counseling" (22.8%).

Participants in the Community Visioning Event, hosted in January 2019, were proud of the Rockbridge Area community, noting the local universities, outdoor recreation opportunities, the Rockbridge Area Health Center and the friendly, collaborative nature of residents and organizations.

Community Impact

Response Since the 2015 RACHA

The 2015 CHA identified four top priorities: the need for urgent care, care coordination, general wellness, and mental health. Since that time, Carilion Stonewall Jackson Hospital and members of Rockbridge 2020 have worked diligently to address these needs. One of the most notable accomplishments has been the opening of Velocity Care in Lexington. This new urgent care center has been steadily busy since opening in June of 2016, and has well exceeded anticipated patient volumes. Carilion Stonewall Jackson has also seen a resultant reduction in utilization of the Emergency Department.

On the matter of care coordination, CSJH has implemented a system to identify patients at high risk of readmission. Hospital case managers work closely with these patients and their families to identify and address issues beyond medical care that will impact their long-term wellness. By working closely with care coordinators in local physician offices and linking patients with other local support agencies, we are able to greatly improve the patient's recovery process.

CSJH has worked in partnership with the VA Cooperative Extension, W&L Campus Kitchen, Maury River Family Practice, the Glasgow Farmers Market, and the Rockbridge Area Health Center to develop and implement Eat Healthy Rockbridge, a fresh food prescription program. Through this program, patients are identified who could benefit from dietary education and improved access to fresh fruits and vegetables. Patients are enrolled in the 12-week program which consists of weekly education, and vouchers for the Glasgow Farmers Market. This program not only benefits the patient, but also supports local farmers. Carilion Clinic provided the grant for supplies and vouchers, while partner organizations provided staff for planning and implementation.

In the area of mental health, CSJH worked in partnership with local law enforcement and Rockbridge Area Community Services (RACS) to open a CIT (Crisis Intervention Team) Assessment Center. This facility, located within the hospital, and staffed by law enforcement, allows for a safe and calm environment for patients experiencing a mental health crisis who do not need other medical care. In addition to the CIT Assessment Center, CSJH continues to work closely with RACS on public education initiatives aimed at diminishing the stigmas associated with mental health problems, and spreading knowledge of local resources available to assist patients and their families.

Success Measures

As a result of Carilion Clinic and Rockbridge 2020's investments and the coordinated programming of community partners, the City of Lexington and Rockbridge County have improved their RWJF County Health Factor Rankings since 2015.

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:
- Having an eye exam in past 12 months
- Having dental exam within past 12 months
- ED visits for injuries
- Domestic violence and abuse victim
- Having a long-term or chronic illness
- Affording medicine needed for health conditions
- Having a colonoscopy
- Neighborhood supporting physical activity *
- Neighborhood supporting healthy eating
- Easy to get affordable fresh fruits and vegetables
- Being told by a doctor that you have:
    - High cholesterol
    - High blood sugar or diabetes
- Time since last dental clinic visit
- Having health insurance

Wrong direction:
- ED visit in past 12 months
- Having a Pap smear
- Having a mammogram
- Fruit and vegetable consumption in past 7 days
- Being told by a doctor that you have:
    - Depression or anxiety
    - High blood pressure
    - I have no health problems
    - Asthma
    - Obesity / overweight
    - Mental heal problems
    - COPD
    - Cancer
- Time since last routine check-up

2018 Community Health Assessment Data

Primary Data and Community Engagement

Community Visioning Event Results

A Community Visioning Event was held on the campus of Virginia Military Institute as part of the Rockbridge Community Health Assessment process. Residents, leaders of the community, and representatives of local organizations learned about the process and had meaningful group discussions on the health of the community.

Groups participated in discussions addressing the current health of Rockbridge and what could be done to create a healthier community. There were 44 attendees in 9 groups. Most groups were proud of local outdoor recreation opportunities and local universities, and considered these as assets that contribute to a healthier community. Though community pride was abundant, access to healthcare and lack of transportation were most frequently identified as issues that need to be addressed to improve health.

Community investment and accessibility to services were identified as important characteristics of a healthy community. Responses such as walkability and social interaction were previously listed as already established in Lexington, but responses such as access to healthcare and coordination of care were considered areas of opportunity to improve.

Community Visioning Event Demographics

Race / Ethnicity

- White 90%
- Black / African American 5%
- American Indian / Alaskan Native 5%

Education Level

- High school diploma 2%
- Associates 3%
- Bachelors 50%
- Masters / Phd 45%

Age Group

- 28-37: 21%
- 38-47: 10%
- 48-57: 21%
- 58-67: 32%
- 68-77: 11%
- 78-87: 5%

Yearly Household Income

- $20,001-$30,000: 6%
- $30,001-$40,000: 6%
- $40,001-$50,000: 9%
- $50,001-$60,000: 3%
- $60,001-$70,000: 16%
- $70,001-$100,000: 16%
- $100,001 and above: 44%

Employment Status

- Full-time 79%
- Retired 10%
- Part-time 8%
- Self-employed 3%
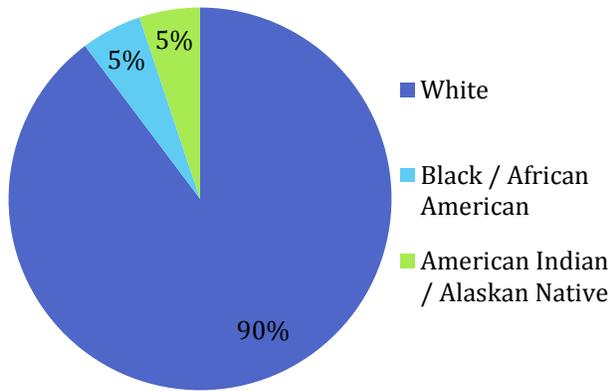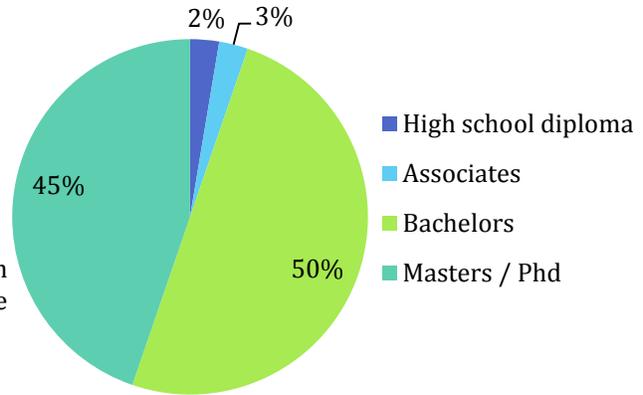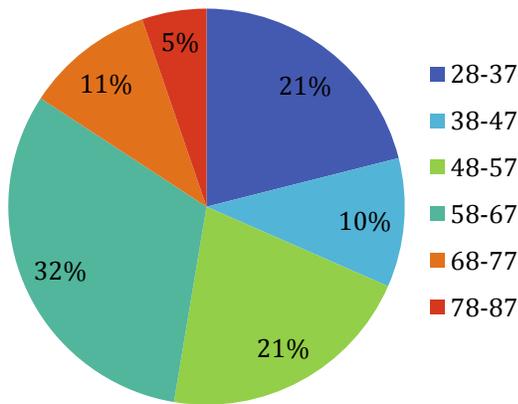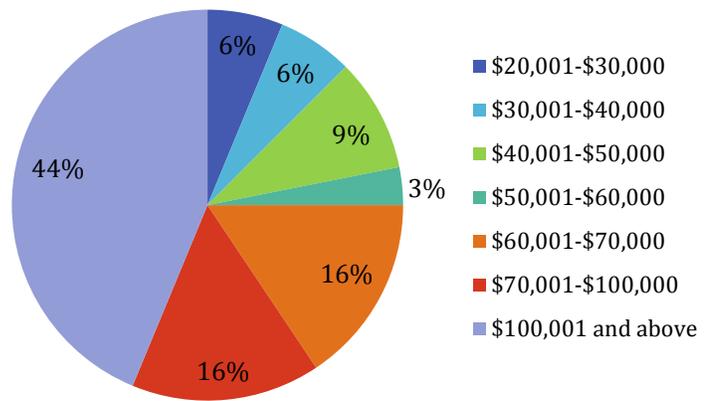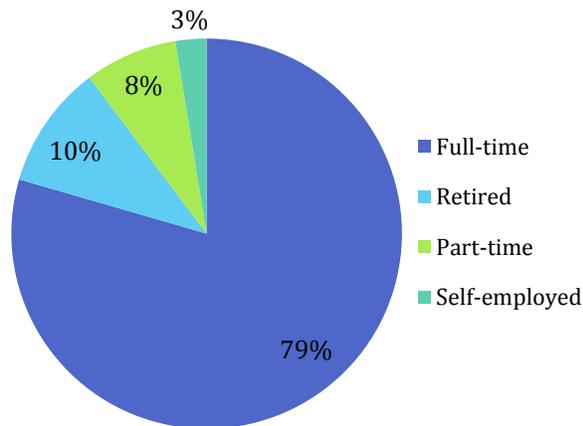
Insurance Type
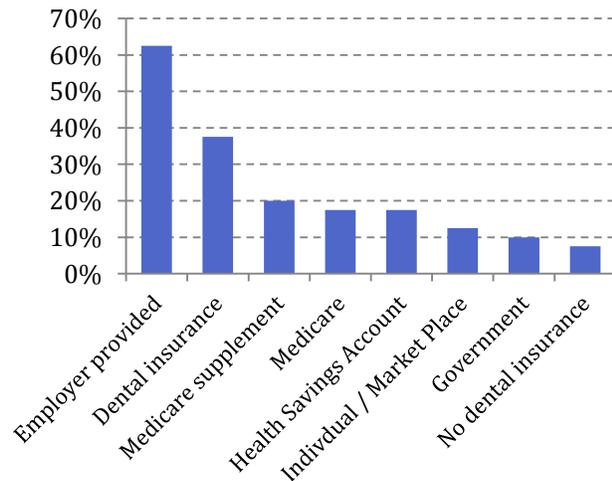
Community Visioning Event Responses

1. **What makes you most proud of our community? / What are the assets present in Rockbridge today that contribute to a healthy community?**
Main themes, subcategories, and percent of groups that identified them:

Community:
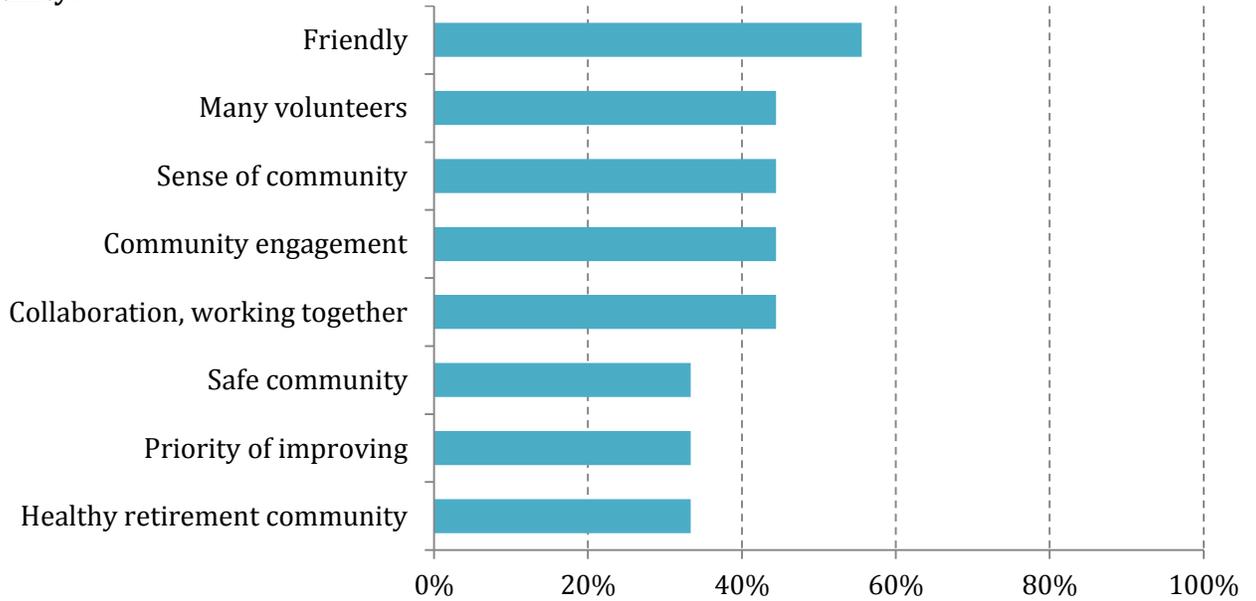
Environment:
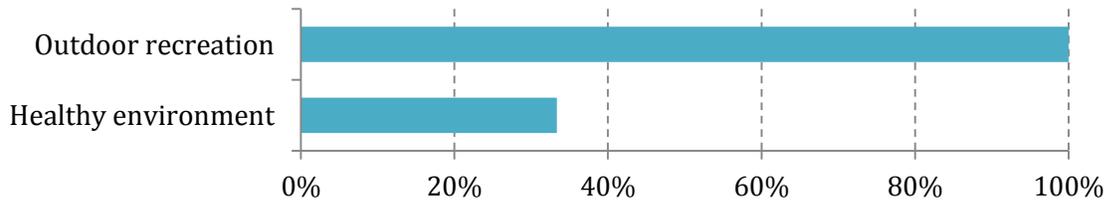
Healthcare:
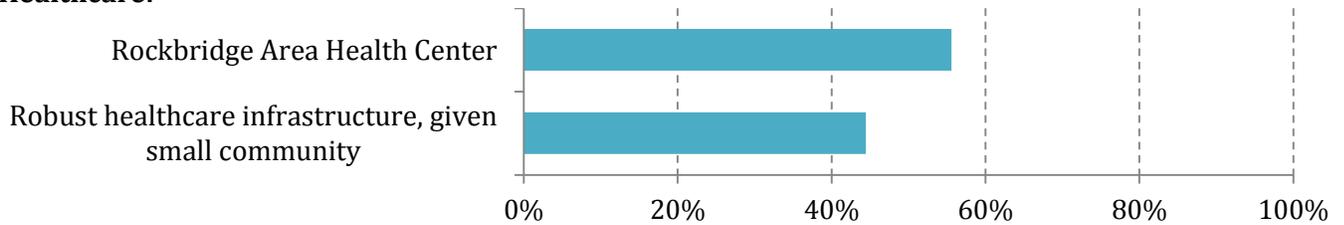
Local Universities:
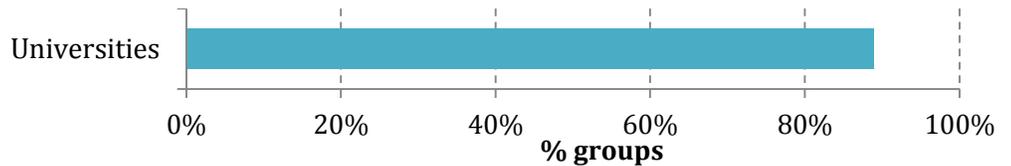
Total groups: 9

2. **What are the needs of the community? / What do you believe are the 2-3 most important issues that must be addressed to improve the health and quality of life in our community?**
Main themes, percent of groups that identified them, and details of themes:
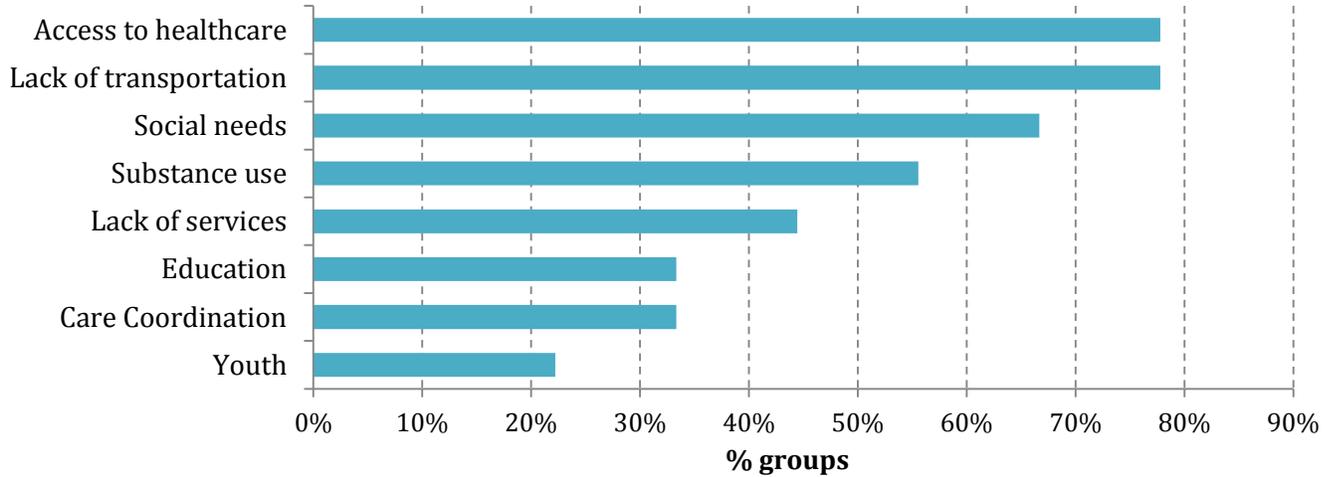
Total groups: 9

Details:

Healthcare:
- OBGYN
- Cardiology
- Telehealth
- Pediatric care
- Mobile unit for care
- Primary care physicians
- Access to specialty care
- Mental health providers
- Recruit physicians to the area
- Medicare/Medicaid providers

Lack of transportation:
- Lower cost
- For elderly, medical transportation
- Public transportation to rural areas

Social needs:
- Poverty
- Isolation
- Economy
- Food insecurity
- Underfunded schools
- Workforce development
- Living conditions
- Jobs that provide a living wage
- Empower minority populations
- Unemployment / job opportunities
- Schools closing= kids losing meals

Lack of services:
- Childcare
- Gym space
- More things to do locally
- Recreation opportunities
- Adult sports opportunities
- After school care/programs
- Increased cell phone / internet access
- Elderly care- affordable, more options

Education:
- Cooking skills
- Health literacy
- Teach basic skills
- Parenting classes
- Health education
- Education, general
- Financial education
- Education about available resources
- Education programs about health system
- People do not understand medical language

Youth:
- Teen pregnancy
- Low graduation rates
- Eating healthy, exercise when young

27

3. **What do you believe are the 2-3 most important characteristics of a healthy community?**

Main themes and percent of groups that identified them:
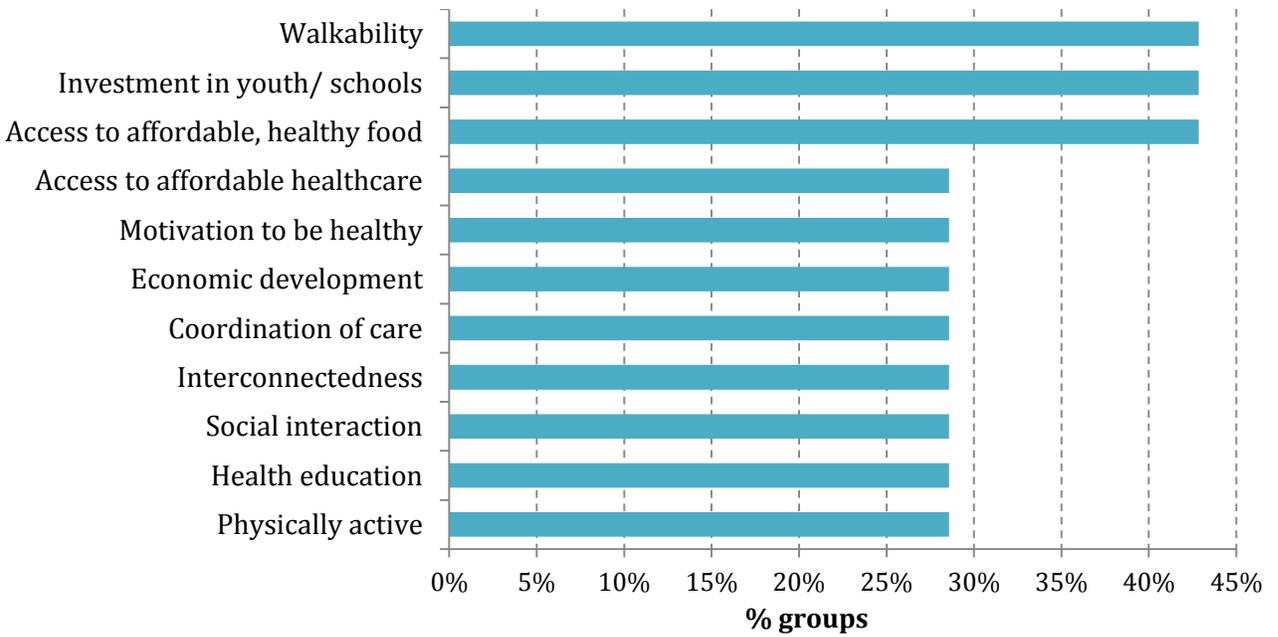
Total groups: 7

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 alongside 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, **26** surveys were completed:
>> **6** online surveys
>> **20** print surveys
>> **1** focus group

Stakeholders identified access to specialty care as the biggest issue that impacts health, closely followed by access to mental health services, poor nutrition, substance use, obesity, and access to transportation. Lack of transportation was also identified as the biggest barrier to health.

Rural and outlying areas were identified as the locality with the greatest unmet need. According to respondents, the population group determined to have the greatest unmet need was the elderly.

Respondents identified improving access to mental health care as the biggest change the community could make to meet the needs and reduce the barriers to health. This reflects one of the top issues identified that impacts health.

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:
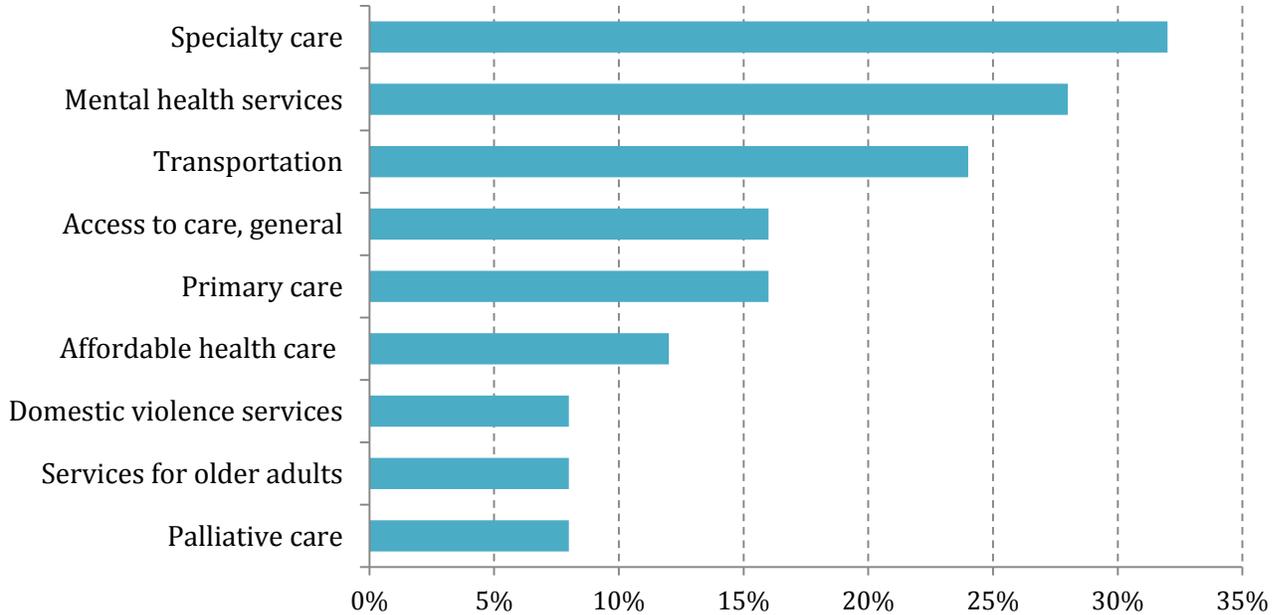
Access to services:

Socioeconomic issues:
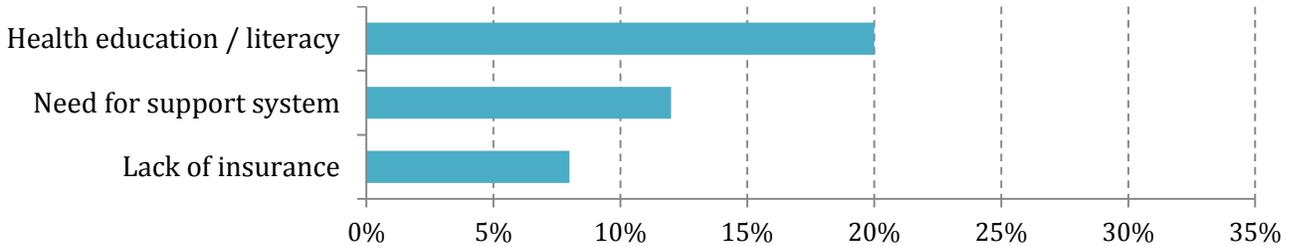
Healthy behaviors:
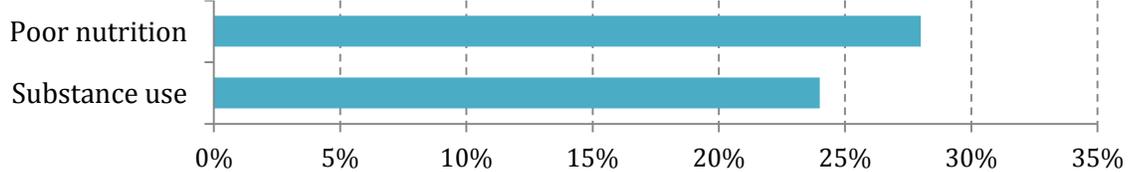
Health outcomes:
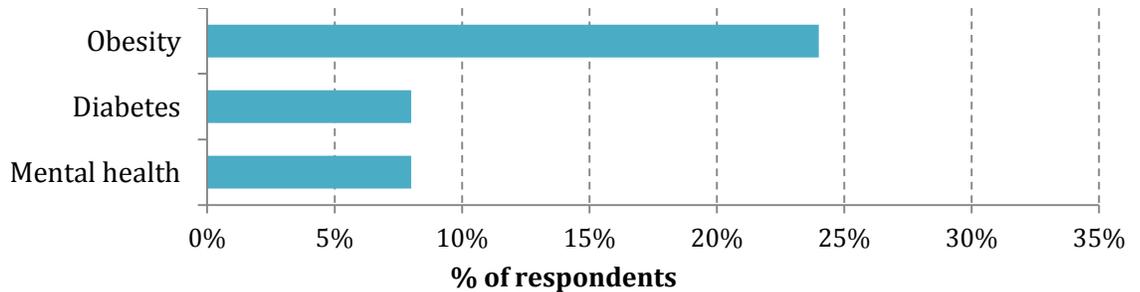
% of respondents

Total respondents: 25

2. What are the barriers to health for the populations you serve?
Main themes, subcategories, and percent of respondents that identified them:

Access to services:
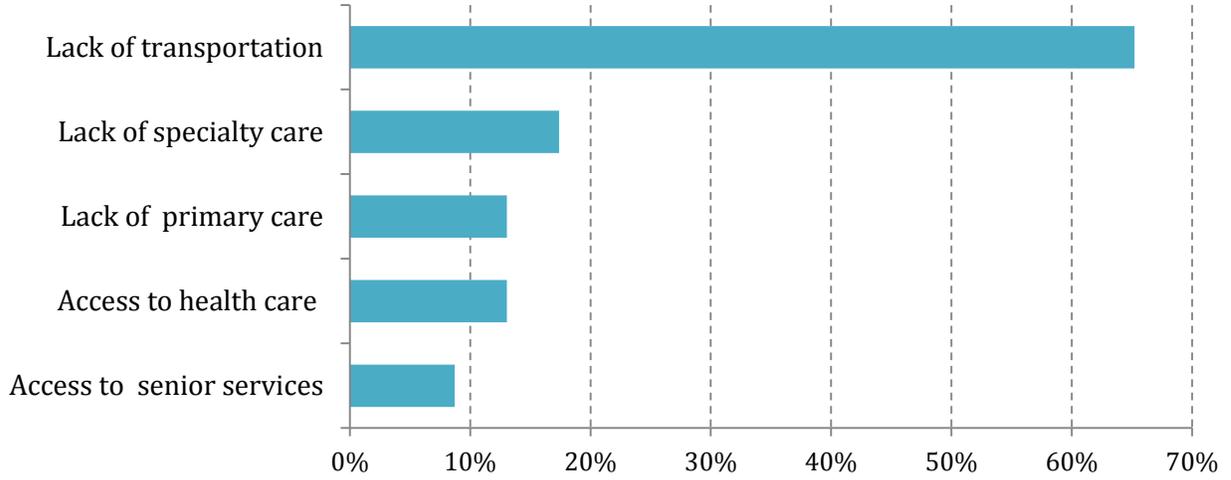
Socioeconomic barriers:
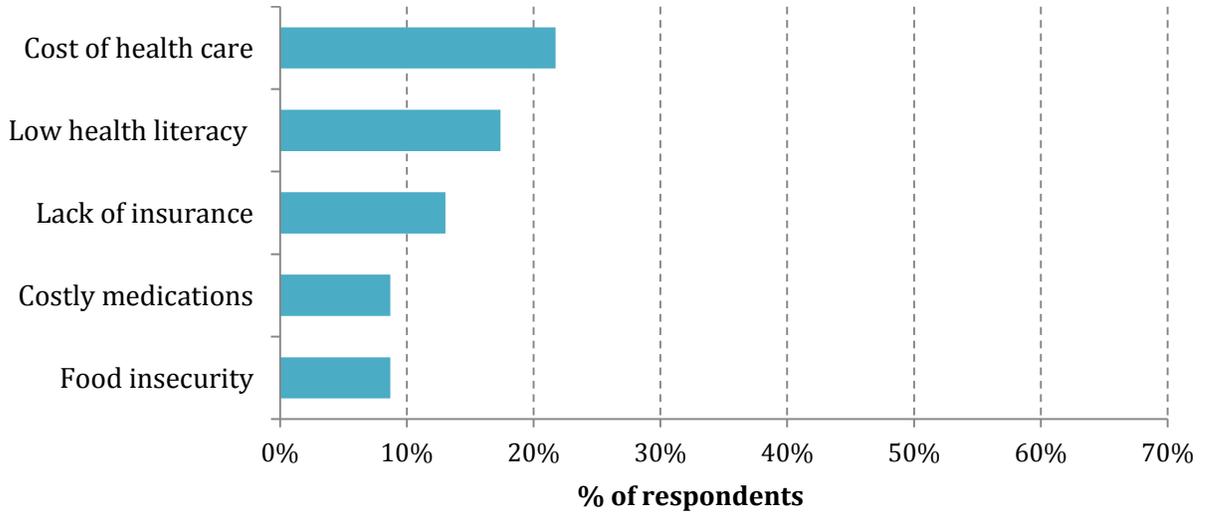
% of respondents

Total respondents: 23

3. Is there one locality / neighborhood with the greatest unmet need?

Main themes and percent of respondents that identified them:
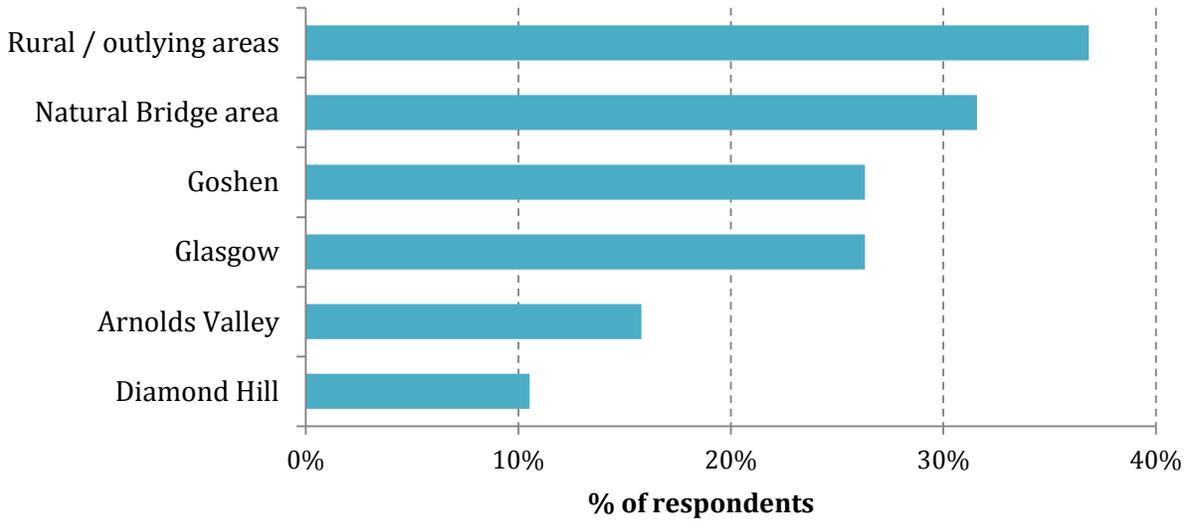
Total respondents: 19

4. Is there one population group with the greatest unmet need?

Main themes and percent of respondents that identified them:
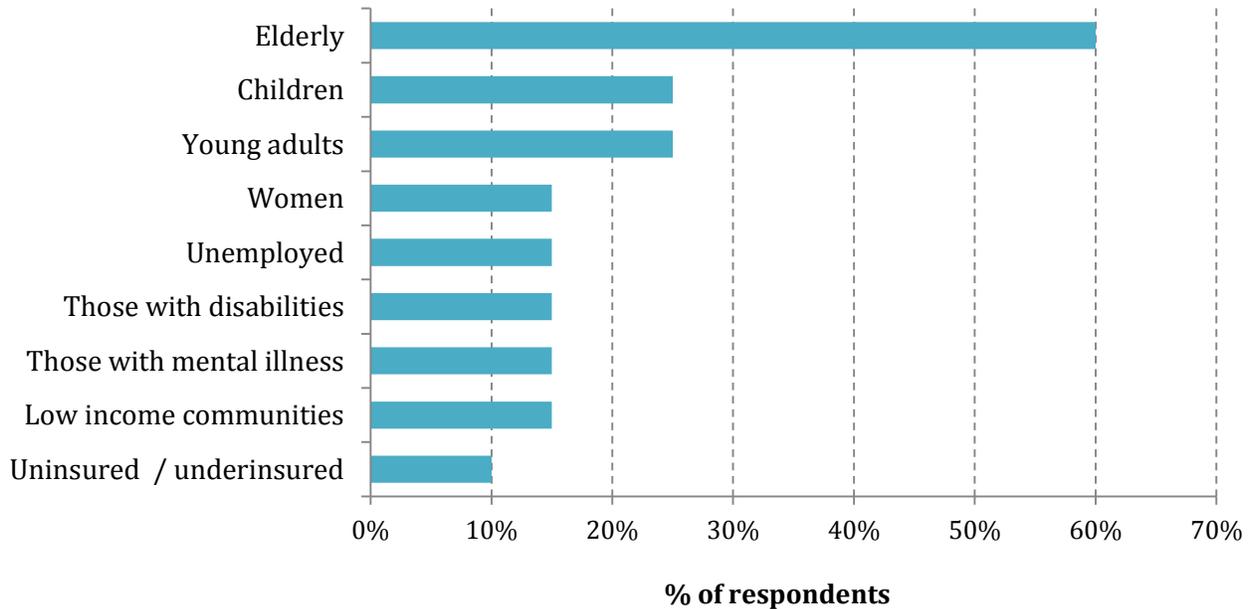
Total respondents: 20

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

Americare
Appalachian Trail
Backpack program- meals for kids
Blue Phoenix Cafe
Blue Ridge Parkway
Campus Kitchen
Carilion Stonewall Jackson Hospital
Chessie Trail
Churches
Community organizations
Community Table
Cooking Matters class (CSB)
Dentists
Diabetes education @ RAHC and Lexington
Prescription Center)
Emergency Room
Farmers market
Food pantries
Gyms
Horse center
Jordan's Point Park
Kendal
LEPC- Local Emergency Planning Committee
Lexington Prescription Center
Library
Live Healthy Rockbridge
Maury Express transit
Maury River Senior Center
Meals on Wheels

Medicaid
Medicare
Medicare Insurance Counseling - VPAS
Mobile Wellness Program - YMCA
Mohawk – in house clinic
National Parks
Outdoor recreation- walking trails,
Pharmacies
Primary care providers
Pro Careers
Public School Systems
RACI – Rockbridge Advocates for Community
Integration
Rockbridge Area Community Services
Rockbridge Area Health Center
Rockbridge Area Recreation Organization
Rockbridge Area Transportation System
Rockbridge 2020
SNAP
Southern Virginia University
State parks
TANF
Urgent Care / Velocity Care
Valley Program for Aging Services
Veterans Affairs
Virginia Military Institute
Washington and Lee University
YMCA
340B medication program

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

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

Improve access:
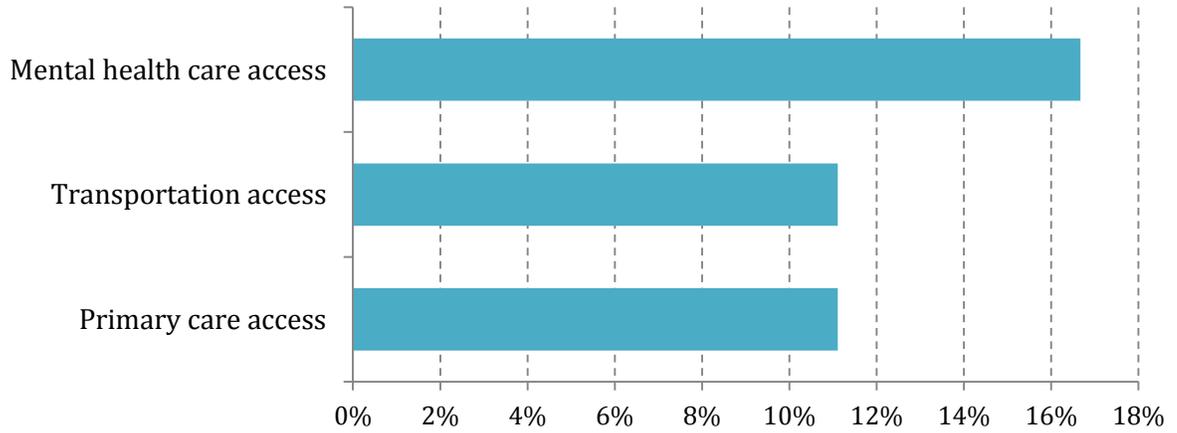
Education:
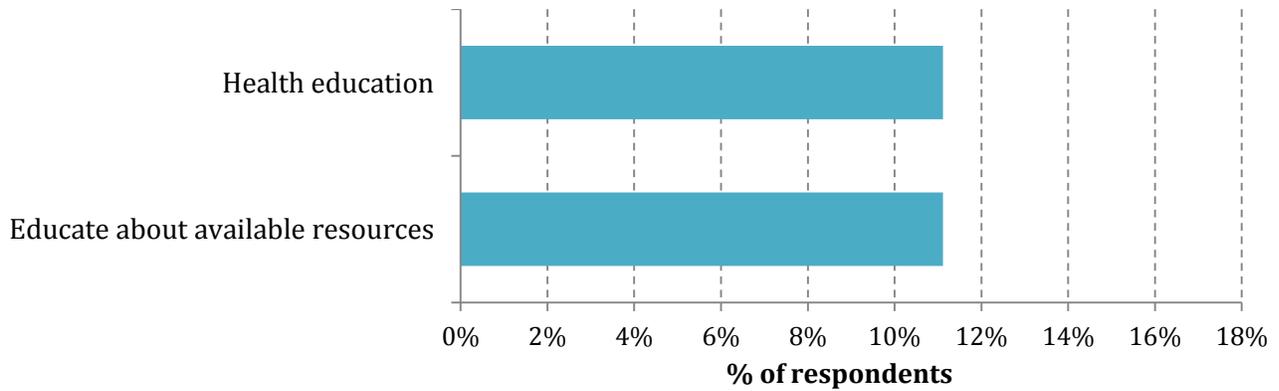
Total respondents: 18

Target Population Focus Group Results

Target population focus groups were conducted to capture the needs and barriers to health for underserved/vulnerable populations disproportionately impacted by the social determinants of health including poverty, race/ethnicity, education, and/or lack of insurance. Focus group locations were chosen based on their service to target populations, and where existing groups already met.

Six 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:

Americare Plus:
> Americare Plus provides in-home personal care, live-in services, homemaker services, companion care, pet assistance, and new mother assistance for the Rockbridge area.
> For more information, visit http://www.americarepluspc.com/

Rockbridge Area Hospice:
> Rockbridge Area Hospice not only provides hospice care, but also grief workshops, caregiver relief, and end-of-life planning assistance. Though RAH serves the entire Rockbridge area, they are specially trained in serving veterans as well. This focus group included both clinicians and volunteers.
> For more information, visit https://www.rockbridgeareahospice.org/

Kendal:
> Located in Lexington, Kendal is a vibrant retirement community that provides a continuum of care for those who appreciate lifelong learning, culture, art, wellness, and volunteerism.
> For more information, visit https://kalex.kendal.org/

Maury River Senior Center:
> Maury River Senior Center provides exercise, educational, and health programs, meals, social events, and other life-enriching activities for the senior population in the Buena Vista area. Two focus groups were held here, including a group of members that play bluegrass music together.
> For more information, visit https://www.vpas.info/MRSC

Women Small Business Owners Group:
> A focus group was held with female members of the Chamber of Commerce who own small businesses.
> For more information, visit http://www.lexrockchamber.com/

Focus Group Demographics

Race / Ethnicity
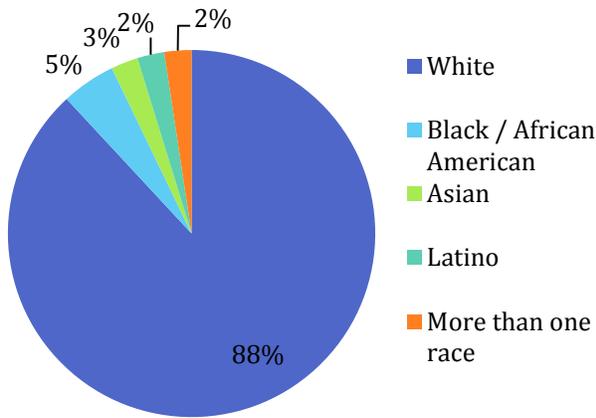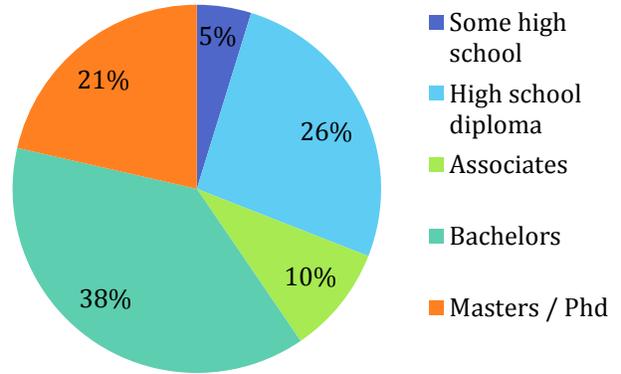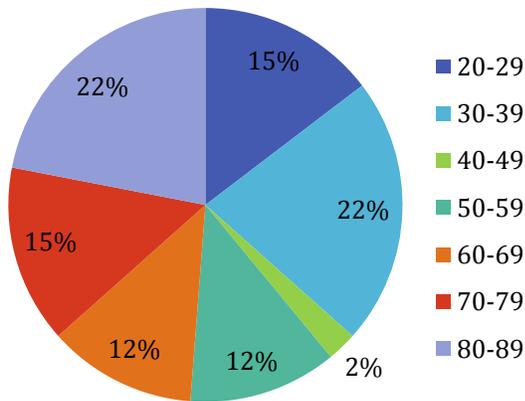
- White — 88%
- Black / African American — 5%
- Asian — 3%
- Latino — 2%
- More than one race — 2%

Education Level

- Some high school — 5%
- High school diploma — 26%
- Associates — 10%
- Bachelors — 38%
- Masters / Phd — 21%

Age Group

- 20-29 — 15%
- 30-39 — 22%
- 40-49 — 2%
- 50-59 — 12%
- 60-69 — 12%
- 70-79 — 15%
- 80-89 — 22%

Yearly Household Income

- $0-$10,000 — 5%
- $10,001-$20,000 — 19%
- $20,001-$30,000 — 14%
- $30,001-$40,000 — 14%
- $40,001-$50,000 — 6%
- $60,001-$70,000 — 3%
- $70,001-$100,000 — 14%
- $100,001 and above — 25%

Employment Status

- Retired — 40%
- Full-time — 35%
- Part-time — 14%
- Self-employed — 9%
- Homemaker — 2%

Insurance Type

36
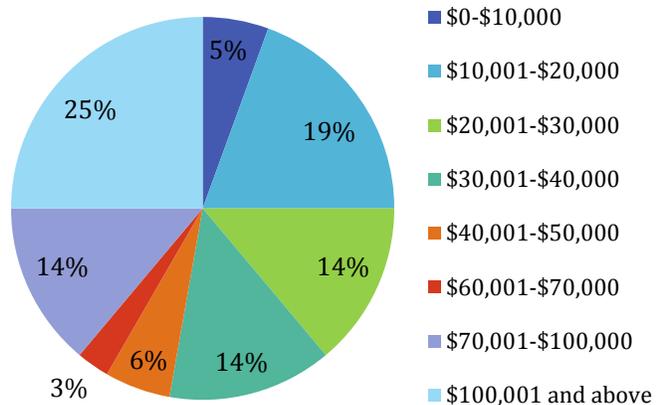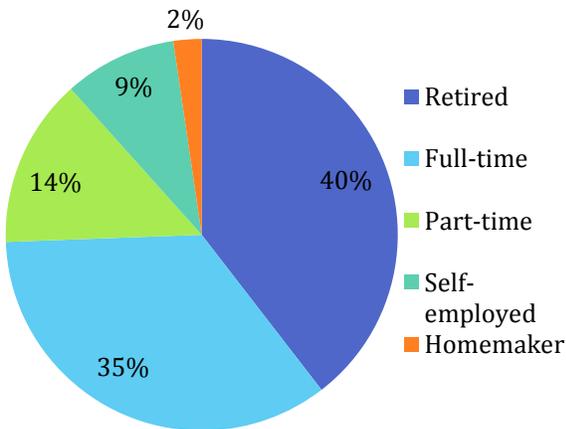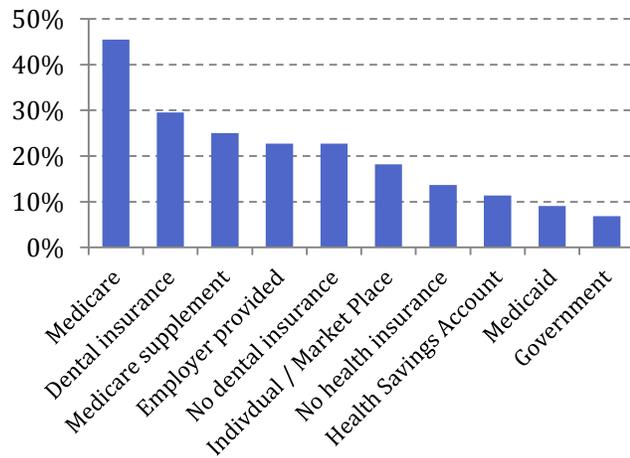
To begin the focus groups, attendants were asked to describe good health. A word cloud was created to show results; the larger the word is in the cloud, the more a term was used.

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

Responses from the rest of the questions revealed that all focus groups considered money as a top need for good health. Lack of money can encourage home remedies in place of preventive care. Home remedies were discussed just as frequently as going to the doctor when sick. Lack of financial security may also lead to challenges affording care, such as the "dental insurance challenges" identified when discussing dental care, and "cost of good health" identified when discussing other health problems. Over half of the focus groups discussed the problems of dental care, as it is often not covered under insurance.

The importance of social needs was also a frequent theme. Relying on the support of family and friends was identified in most focus group for discussions regarding physical and mental health care. Social support was also identified in the top three responses for things needed for good health. One focus group attendee identified this, saying *"Taking care of each other- I have an advocate who can hold my hand if something goes wrong. She is my advocate, and I am hers."*

Though social support was a frequent topic of discussion, most focus groups noted that personal motivation was also important to good health. Another focus group attendee said, *"Somebody can give you all the help in the world, but until you are willing to change, it's not going to happen."*

When asked about any other health issues they wish to voice, focus groups most frequently identified shortage of care, reflecting a common theme from the stakeholder survey.

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:

Theme	%
Money	100%
Good diet	~83%
Social support	~83%
Education	~66%
Motivation	~66%
Exercise programs	~66%
Access to medical care	~66%
Healthy behaviors	50%
Jobs	~33%
Positive attitude	~33%
Healthy physical environment	~33%

% of focus groups
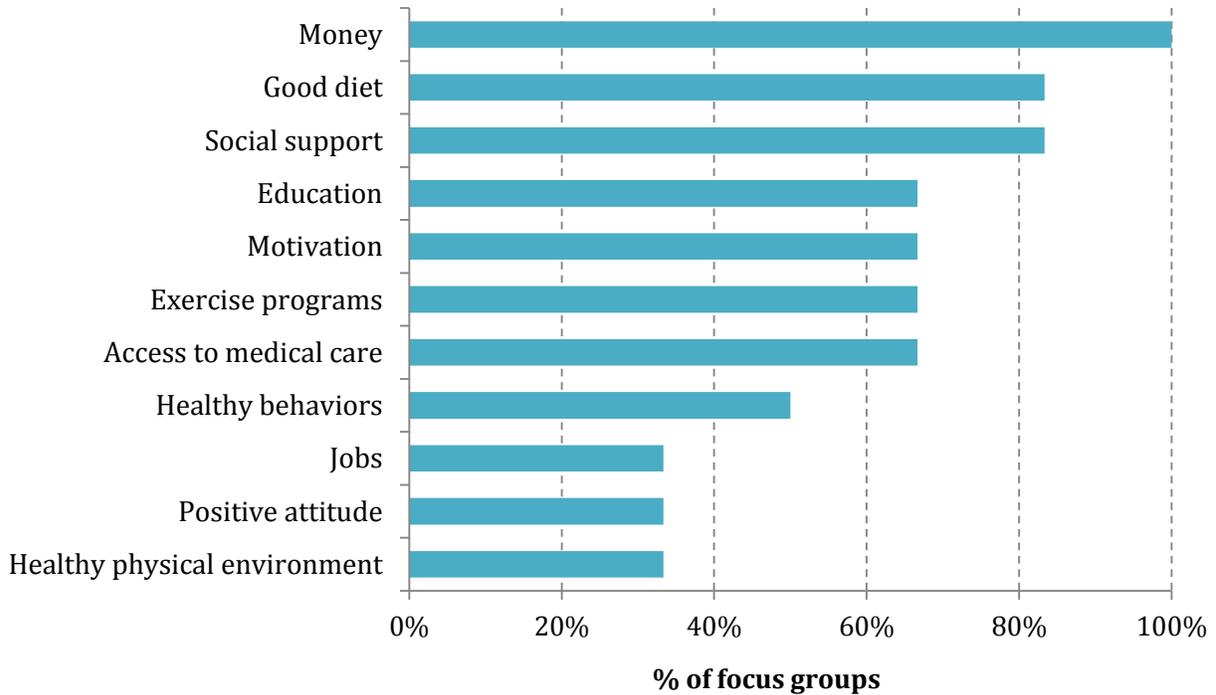
Subcategories of main themes:

Money:
- Insurance
- Money to buy food
- Money for transportation

Social support:
- Community
- Help from family and friends

Education:
- Knowledge of resources
- Knowledge of healthy behaviors
- Knowledge of healthy food preparation

Motivation:
- Wanting to be healthy
- Willpower / Self-control

Access to medical care:
- Medication
- A good doctor
- Yearly physical

Healthy behaviors:
- Sleep
- Healthy habits

Healthy physical environment:
- Good weather
- Areas to walk
- Affordable and safe housing

Other responses:
- Good genetics
- Remaining independent
- Reliable transportation

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:

Category	%
Go to the doctor	~83%
Home remedies	~83%
OTC medication	~66%
Urgent care	~66%
Go to ER	~50%
Rest	~50%
Support from family and friends	~33%

% of focus groups
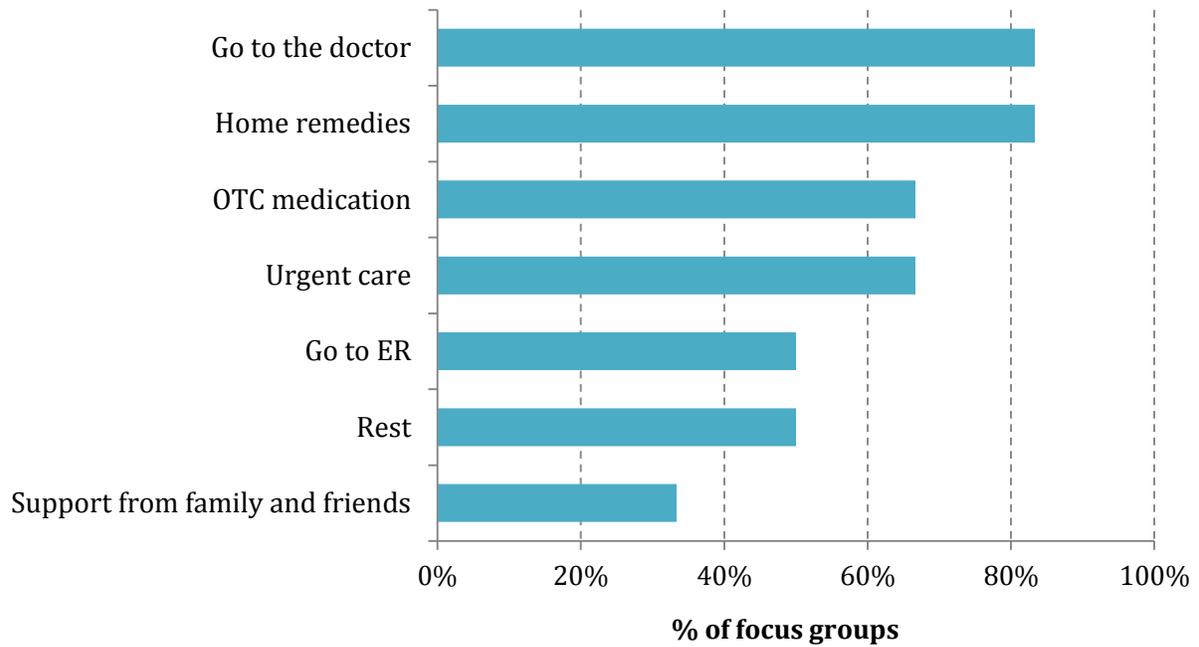
Subcategories of main themes:

    Home remedies:
        Drink tea
        Eat garlic
        Eat ginger
        Play music
        Eat healthy foods
        Take a hot shower
    Get support from family and friends:
        Get advice from them
    Other responses:
        Call 911
        Call a nurse
        Stay away from others
        Use internet to research symptoms

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:
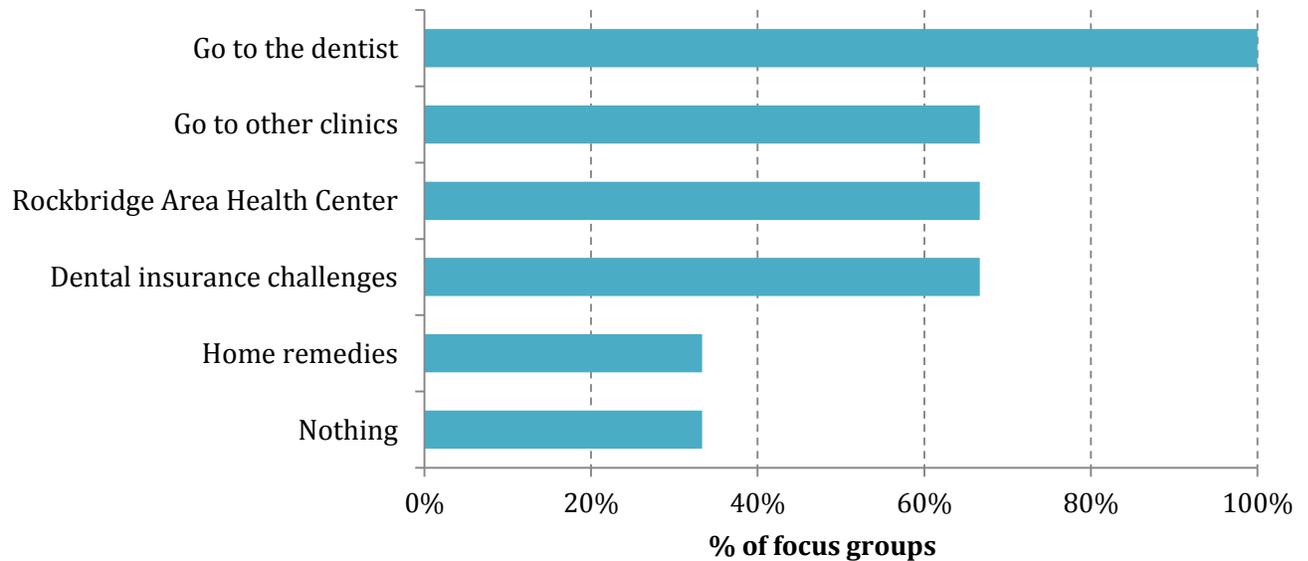
Subcategories of main themes:

Go to the dentist:
      Travel out of town
Go to other clinics:
      Mobile clinic
      SVU RAM Clinic
      Emergency Room
Dental insurance challenges:
      Medicaid often not accepted
      Don't have dental insurance
      Cheaper to pay out-of-pocket than for insurance
Home remedies:
      Orajel
      Camphor
      BC Powder
      Pain relief medication
Other responses:
      Research providers online

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:
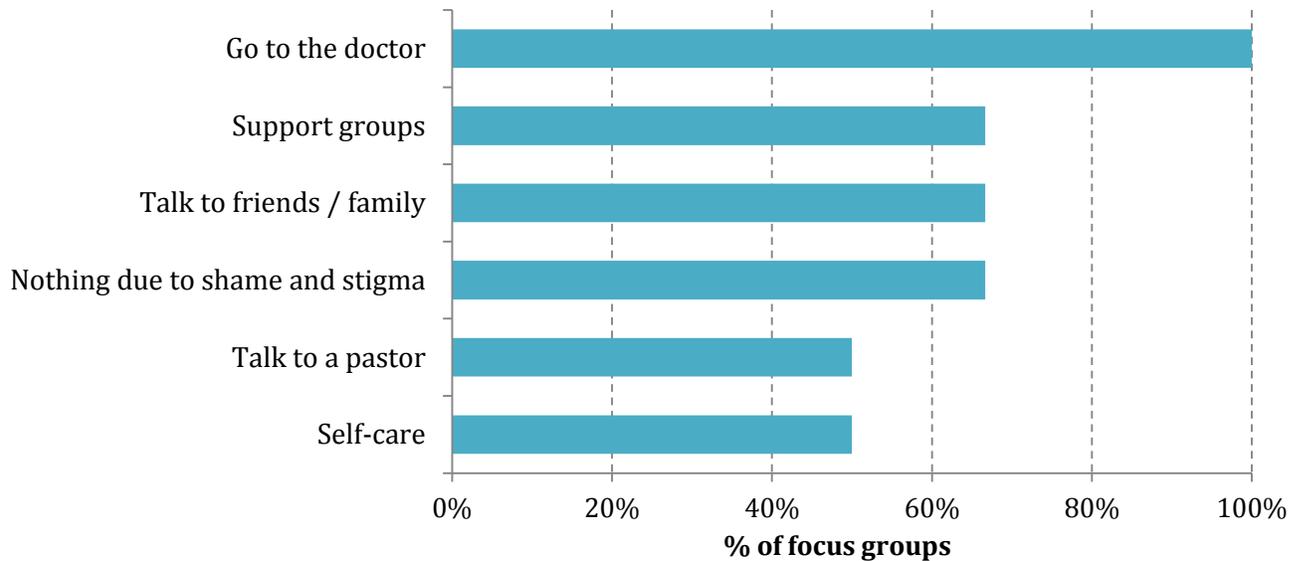
Subcategories of main themes:

Go to the doctor:
    Psychiatrist
    Emergency room
    Primary care doctor
    Rehabilitation center
    Rockbridge Area Health Center
Support groups:
    AA
    Caregiver support
    Grief support groups
    Al-Anon Family Groups
    Kendal Health and Wellness Group
    Community Dementia Support Group
Self-care:
    Yoga
    Herbs
    Watch movies
    Take prescribed medication
Other responses:
    Need for education
    Need for transportation
    Need for law enforcement
    Need for frequent medication reevaluation

6. **Is there anything else you would like to tell us about your health or the health of others in the Rockbridge Area?**
   Main themes and percent of focus groups that identified them:
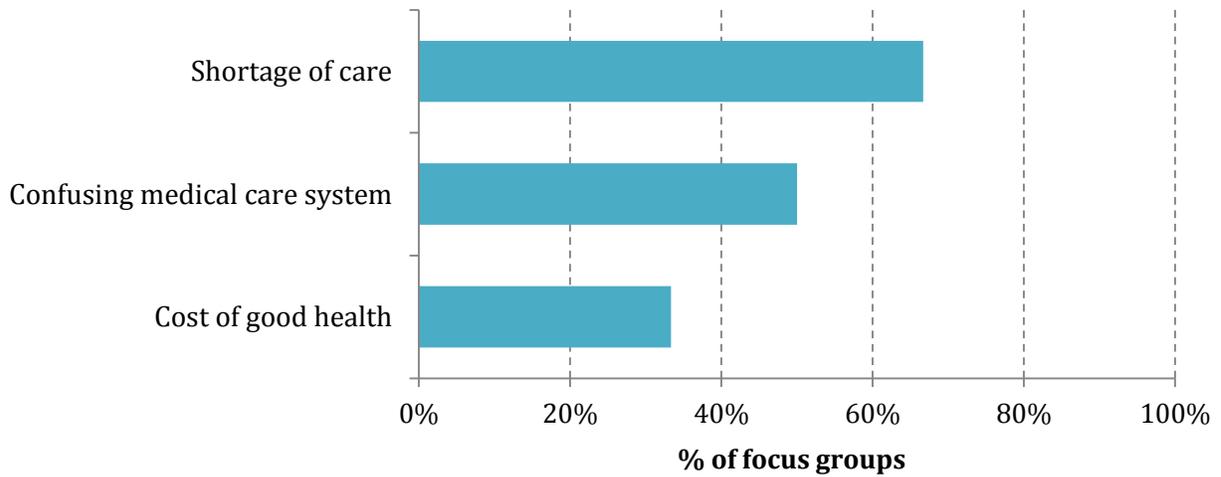
Subcategories of main themes:

Shortage of care:
      Specialists
      Primary Care
      Geriatric Care
      Pediatric Care
      OB / Prenatal care
      Local, full-time physicians
Confusing medical care system:
      Hard to find doctors
      Hard to get appointments
      Confusing insurance plans
      Services only available to those who know of them
Cost of good health:
      Insurance is expensive
      Good food is expensive
      Cost of healthcare in general
      Prescription drugs are expensive
Other responses:
      Drug addiction is a problem
      Healthy activities needed for children
      Better access here than most rural areas
      Need for transportation to more rural areas
      More exercise infrastructure needed like safe bike paths
      Parents need more resources since they make decisions for their children

Rockbridge Area Community Health Survey Results

A Community Health Survey was conducted as part of the Rockbridge Area Community Health Assessment. This survey was used to evaluate the health of the community and identify potential geographic areas to target improvements.

A 39-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 Rockbridge 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 Rockbridge area residents 18 years of age and older. The Rockbridge area included the CHA service area: Rockbridge County, Lexington City, and Buena Vista City. The following subpopulations were especially targeted for sampling:

- Underserved/vulnerable populations disproportionately impacted by the social determinants of health including:
  - 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 Rockbridge 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. About 20 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 or 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, **568** surveys were collected:

194 paper surveys

372 online surveys

2 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.

A Maury River Middle School class conducted a version of this survey. Their results can be found in Appendix 9.

County of residence

Locality	#	%
Rockbridge County	428	75.4%
Buena Vista City	71	12.5%
Lexington City	69	12.2%
Total responses:	**568**	
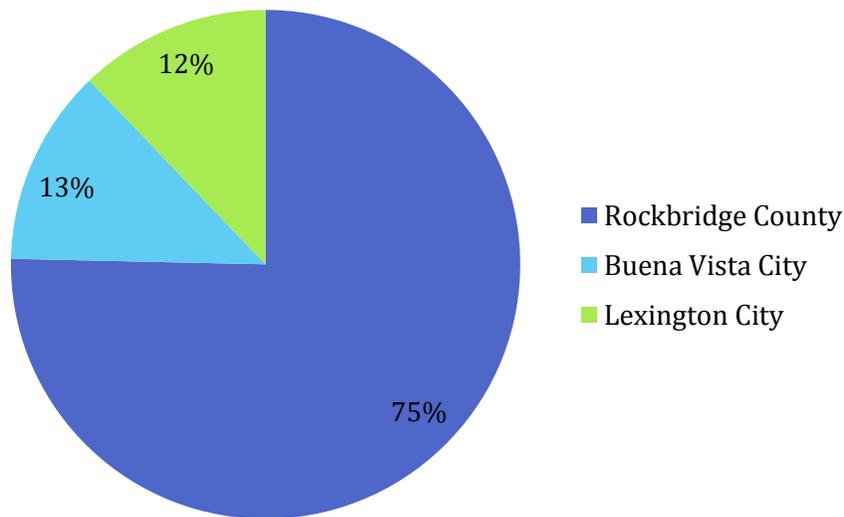
Where do you live?

	#	%
Lexington/Rockbridge County	156	27.8%
Buena Vista	123	21.9%
Lexington	114	20.3%
Glasgow	44	7.8%
Natural Bridge	38	6.8%
Rockbridge Baths	19	3.4%
Fairfield	13	2.3%
Kerrs Creek	13	2.3%
Collierstown	11	2.0%
Raphine	6	1.1%
Goshen	2	0.4%
Brownsburg	1	0.2%
Other	21	3.7%
Answered	561	
Skipped	7	

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

	#	%
Employer Provided Insurance	217	43.0%
Dental Insurance	127	25.2%
Medicare	114	22.6%
Medicaid	81	16.0%
No Dental Insurance	71	14.1%
No Health Insurance	61	12.1%
Medicare Supplement	55	10.9%
Individual / Private Insurance / Market Place / Obamacare	47	9.3%
Health Savings / Spending Account	19	3.8%
Government (VA, Champus)	18	3.6%
COBRA	1	0.2%
Answered	505	
Skipped	63	

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

	#	%
Not applicable- I have health insurance	257	80.3%
Too expensive / cost	46	14.4%
Unemployed / no job	14	4.4%
Not available at my job	8	2.5%
Student	5	1.6%
I don't understand Marketplace / Obamacare Options	4	1.3%
Other	3	0.9%
Answered	320	
Skipped	248	

What is your zip code?

Zip Code	#	%
24450	227	43.7%
24416	138	26.6%
24555	55	10.6%
24579	30	5.8%
24578	20	3.9%
24435	12	2.3%
24472	8	1.5%
Other	29	5.6%

What is your age?

Average:	48.5
Answered	484
Skipped	84

What is your gender?

	#	%
Female	369	74.4%
Male	127	25.6%
Transgender	0	0.0%
Other	0	0.0%
Answered	496	
Skipped	72	

Gender
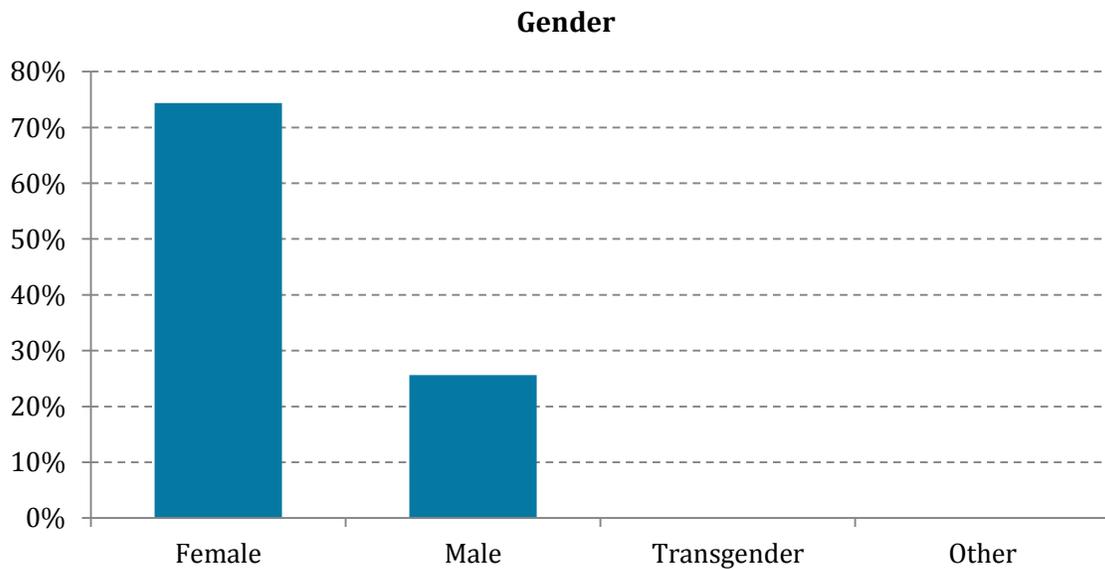
Height, in inches:

Median:	66.0
Answered	477
Skipped	91

Weight, in pounds:

Median:	180.0
Answered	457
Skipped	111

Weight status and BMI:

Underweight	1.3%
Normal	23.7%
Overweight	32.2%
Obese	42.7%
Median BMI:	28.6

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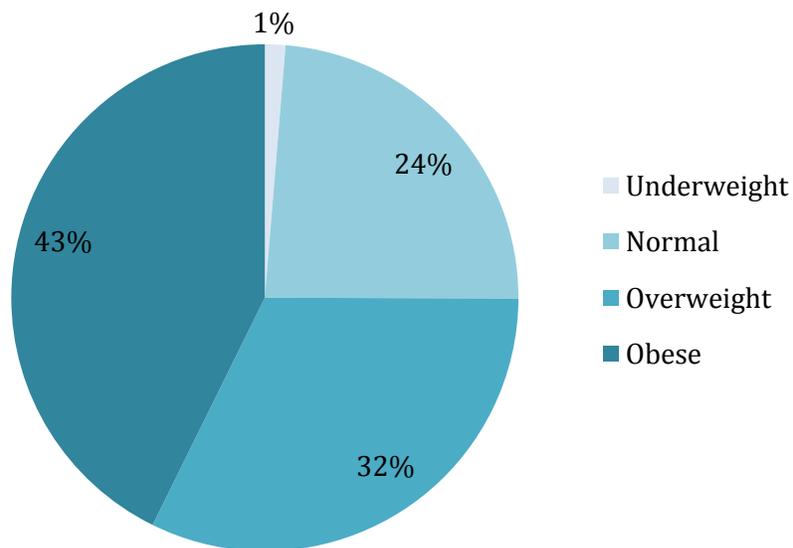
How many people live in your home (including yourself)?

0-17 average:	1.4
18-64 average:	1.8
65+ average:	0.7
Answered	498
Skipped	70

What is your highest education level completed?

	#	%
Less than high school	7	1.4%
Some high school	35	7.0%
High school diploma	235	46.8%
Associates	66	13.2%
Bachelors	84	16.7%
Masters / PhD	75	14.9%
Answered	502	
Skipped	66	

Education Level
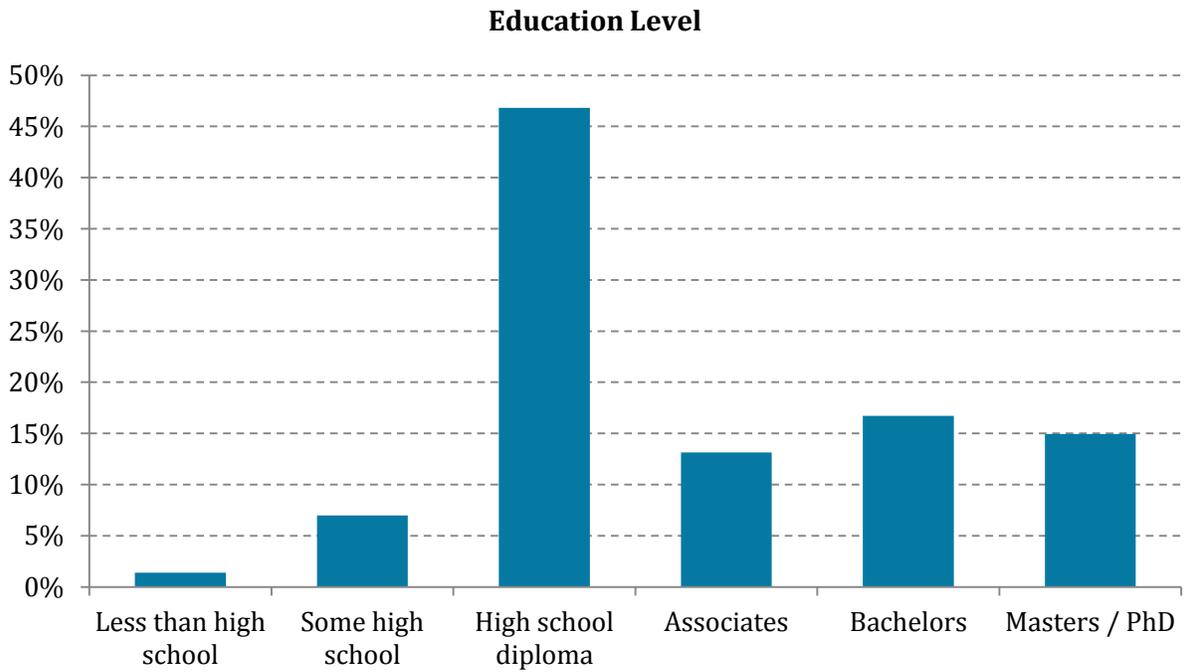
What is your primary language?

	#	%
English	497	99.2%
Spanish	2	0.4%
Other	2	0.4%
Answered	501	
Skipped	67	

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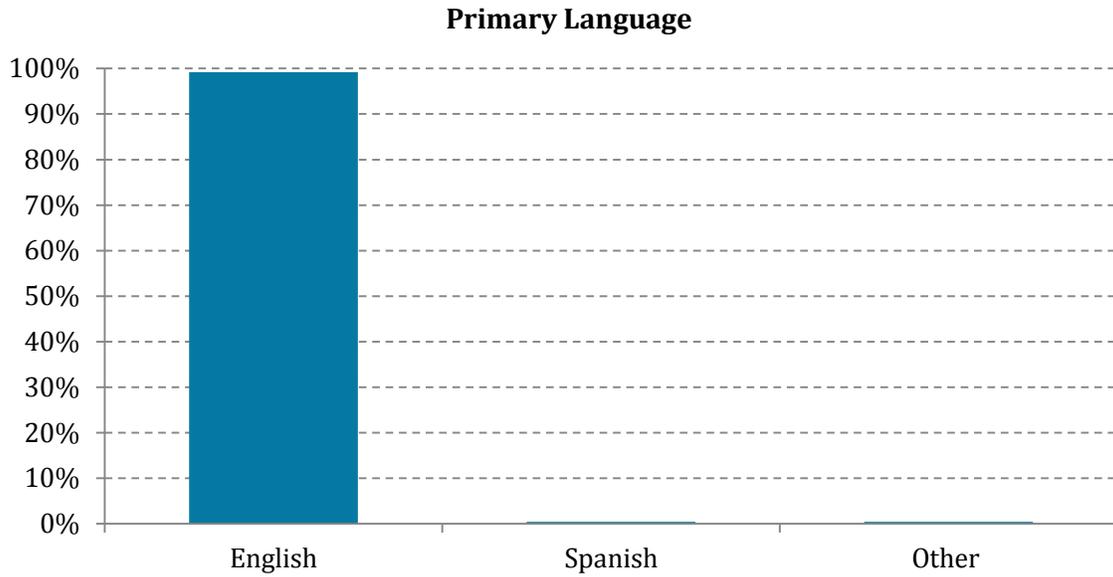
What ethnicity do you identify with? (Check all that apply)

	#	%
White	434	86.5%
Black / African American	38	7.6%
Decline to answer	11	2.2%
American Indian / Alaskan Native	6	1.2%
Latino	6	1.2%
More than one race	6	1.2%
Asian	2	0.4%
Native Hawaiian / Pacific Islander	1	0.2%
Other	6	1.2%
Answered	502	
Skipped	66	

What is your marital status?

	#	%
Married	268	54.0%
Single	110	22.2%
Divorced	75	15.1%
Widowed	35	7.1%
Domestic Partnership	8	1.6%
Answered	496	
Skipped	72	

Marital Status
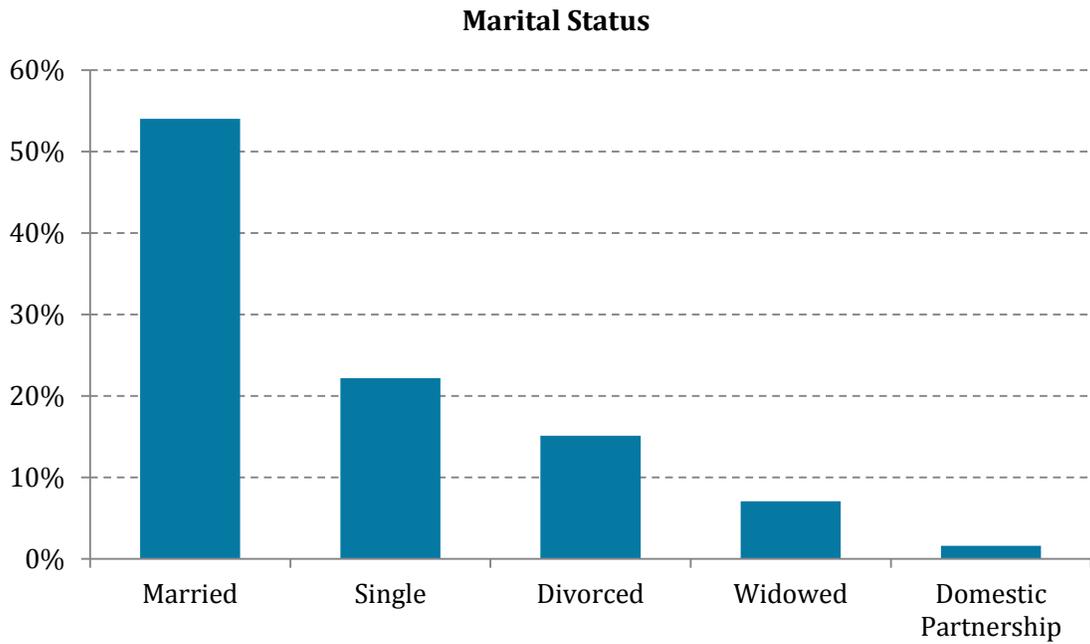
What is your yearly household income?

	#	%
$0 – $10,000	68	14.6%
$10,001 – $20,000	76	16.3%
$20,001 – $30,000	57	12.2%
$30,001 – $40,000	52	11.2%
$40,001 – $50,000	38	8.2%
$50,001 – $60,000	44	9.4%
$60,001 – $70,000	31	6.7%
$70,001 – $100,000	49	10.5%
$100,001 and above	51	10.9%
Answered	466	
Skipped	102	

Yearly Household Income
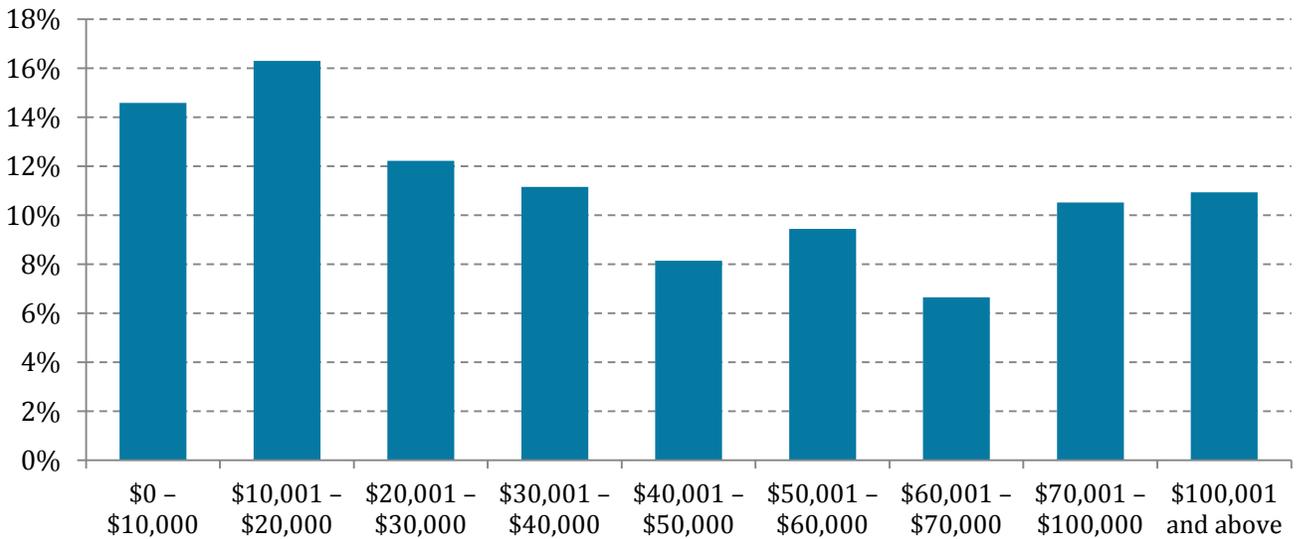
What is your current employment status?

	#	%
Full-time	234	47.1%
Retired	100	20.1%
Part-time	61	12.3%
Unemployed	56	11.3%
Homemaker	31	6.2%
Student	9	1.8%
Self-employed	6	1.2%
Answered	497	
Skipped	71	

Employment Status
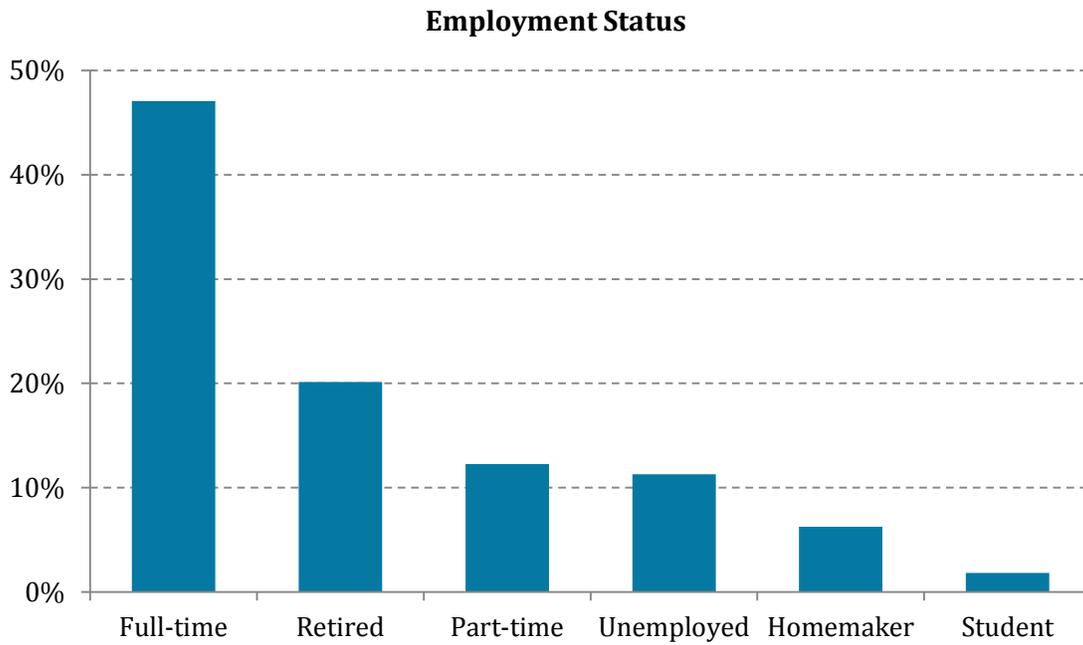
Community Health Survey Responses

1. Do you use medical care services?

	#	%
Yes	530	94.8%
No	29	5.2%
Answered	559	
Skipped	9	

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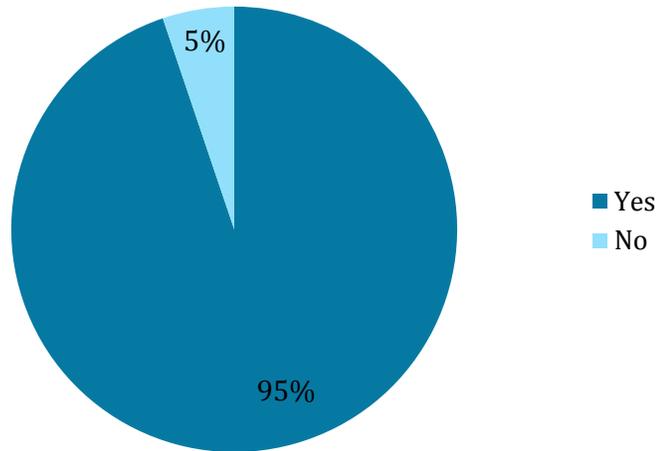
Where do you go for medical care? (Check all that apply)

	#	%
Doctor's Office	298	56.2%
Rockbridge Area Health Center	177	33.4%
Augusta Health	155	29.3%
Urgent Care / Walk in Clinic	144	27.2%
Emergency Room	116	21.9%
Carilion Clinic Family Medicine - Lexington	110	20.8%
UVA Health System	59	11.1%
Health Department	45	8.5%
Carilion Clinic Family Medicine - Buena Vista	32	6.0%
Free Clinic	30	5.7%
Salem VA Medical Center	18	3.4%
Pharmacy Clinic	7	1.3%
Planned Parenthood	3	0.6%
Remote Area Medical Clinic	2	0.4%
Carilion Clinic Family Medicine – Bridgewater	1	0.2%
Other	25	4.7%
Answered	530	
Skipped	38	

2. **Do you use dental care services?**

	#	%
Yes	459	82.7%
No	96	17.3%
Answered	555	
Skipped	13	

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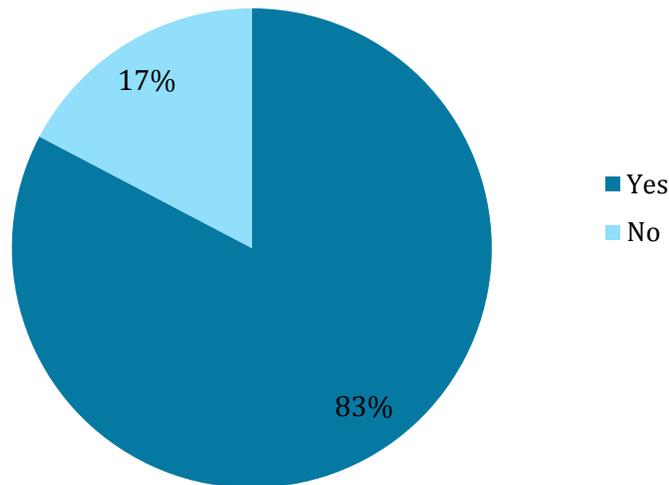
Where do you go for dental care? (Check all that apply)

	#	%
Dentist's office	290	63.0%
Rockbridge Area Health	152	33.0%
Free Clinic	23	5.0%
Emergency Room	6	1.3%
Affordable Dentures – Bedford	5	1.1%
Remote Area Medical Clinic	4	0.9%
Urgent Care / Walk in Clinic	3	0.7%
Carilion Dental Clinic	2	0.4%
Salem VA Medical Center	2	0.4%
Small Smiles	2	0.4%
Commonwealth Dental	0	0.0%
Mission of Mercy Project- Roanoke	0	0.0%
Other	23	5.0%
Answered	460	
Skipped	108	

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

	#	%
Yes	83	15.0%
No	472	85.1%
Answered	555	
Skipped	13	

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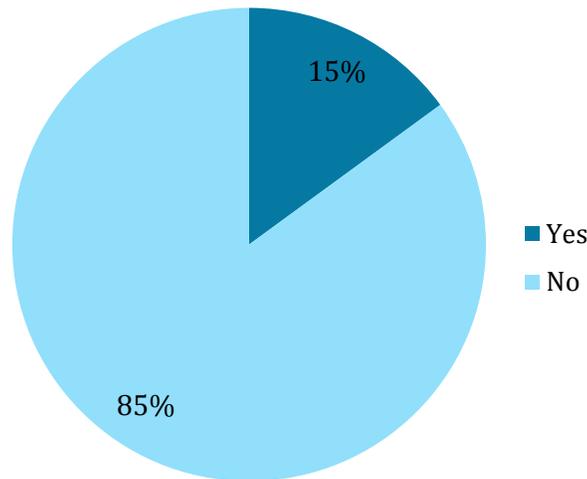
Where do you go for mental health, alcohol abuse, or drug abuse services? (Check all that apply)

	#	%
Rockbridge Area Health Center	41	49.4%
Doctor/Counselor's Office	28	33.7%
Community Services Board	15	18.1%
Salem VA Medical Center	6	7.2%
Urgent Care / Walk in Clinic	2	2.4%
Emergency Room	1	1.2%
Western State Hospital	1	1.2%
Catawba Hospital	0	0.0%
Connect	0	0.0%
Mental Health America	0	0.0%
Respond	0	0.0%
Other	7	8.4%
Answered	83	
Skipped	485	

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

	#	%
Alcohol and illegal drug use	239	43.9%
Overweight / obesity	223	40.9%
Mental health problems	163	29.9%
Poor eating habits	159	29.2%
Cancers	154	28.3%
Lack of exercise	150	27.5%
Access to healthy foods	124	22.8%
Diabetes	124	22.8%
Aging problems	116	21.3%
Stress	108	19.8%
Access to affordable housing	107	19.6%
Heart disease and stroke	103	18.9%
High blood pressure	100	18.4%
Prescription drug abuse	95	17.4%
Tobacco use / smoking	92	16.9%
Cell phone use / texting and driving / distracted driving	90	16.5%
Child abuse / neglect	79	14.5%
Domestic violence	74	13.6%
Dental problems	67	12.3%
Bullying	53	9.7%
Environmental health (e.g. water quality, air quality, pesticides, etc.)	43	7.9%
Accidents in the home (ex. falls, burns, cuts)	34	6.2%
Suicide	24	4.4%
Not using seat belts / child safety seats / helmets	18	3.3%
Teenage pregnancy	18	3.3%
Sexual assault	16	2.9%
Not getting "shots" to prevent disease	11	2.0%
Neighborhood safety	10	1.8%
Unsafe sex	10	1.8%
HIV / AIDS	9	1.7%
Lung disease	8	1.5%
Infant death	5	0.9%
Homicide	3	0.6%
Gang activity	1	0.2%
Other	11	2.0%
Answered	545	
Skipped	23	

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

	#	%
Cancer care	150	29.9%
Specialty care (ex. heart doctor)	141	28.1%
Dermatology	116	23.2%
Mental health / counseling	114	22.8%
Alternative therapy (ex. herbal, acupuncture, massage)	102	20.4%
Adult dental care	98	19.6%
Substance abuse services –drug and alcohol	94	18.8%
Women's health services	94	18.8%
Family doctor	90	18.0%
Programs to stop using tobacco products	80	16.0%
Eldercare	73	14.6%
Child dental care	54	10.8%
None	49	9.8%
Emergency room care	40	8.0%
Domestic violence services	35	7.0%
Vision care	35	7.0%
Chiropractic care	33	6.6%
Medication / medical supplies	30	6.0%
Family planning / birth control	29	5.8%
Urgent care / walk in clinic	29	5.8%
Preventive care (ex. yearly check-ups)	25	5.0%
X-rays / mammograms	23	4.6%
Physical therapy	22	4.4%
End of life / hospice / palliative care	20	4.0%
Ambulance services	19	3.8%
Inpatient hospital	19	3.8%
Lab work	18	3.6%
Immunizations	6	1.2%
Other	23	4.6%
Answered	501	
Skipped	67	

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

	#	%
Cost	213	43.7%
I can get the healthcare I need	134	27.5%
Long waits for appointments	117	24.0%
Lack of evening and weekend services	110	22.6%
High co-pay	105	21.6%
No health Insurance	54	11.1%
Don't know what types of services are available	52	10.7%
Location of offices	45	9.2%
Can't find providers that accept my Medicaid insurance	30	6.2%
No transportation	28	5.8%
Afraid to have check-ups	25	5.1%
Have no regular source of healthcare	23	4.7%
Can't find providers that accept my Medicare insurance	20	4.1%
Don't trust doctors / clinics	20	4.1%
Childcare	15	3.1%
Don't like accepting government assistance	12	2.5%
Language services	1	0.2%
Other	26	5.3%
Answered	487	
Skipped	81	

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.	306	58.7%	213	40.9%	2	0.4%
I have had a mental health / substance abuse visit within the past 12 months.	86	16.8%	356	69.5%	70	13.7%
I have had a dental exam within the past 12 months.	355	68.5%	158	30.5%	5	1.0%
I have been to the emergency room in the past 12 months.	152	29.5%	354	68.6%	10	1.9%
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.).	45	8.7%	456	88.4%	15	2.9%
I have been a victim of domestic violence or abuse in the past 12 months.	13	2.5%	485	93.6%	20	3.9%
My doctor has told me that I have a long-term or chronic illness.	132	25.5%	373	72.2%	12	2.3%
I take the medicine my doctor tells me to take to control my chronic illness.	189	36.5%	178	34.4%	151	29.2%
I can afford medicine needed for my health conditions.	306	60.7%	111	22.0%	87	17.3%
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).	267	52.0%	90	17.5%	157	30.5%
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).	142	27.6%	129	25.1%	244	47.4%
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check not applicable).	185	35.9%	127	24.6%	204	39.5%
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)	322	63.0%	177	34.6%	12	2.4%
Does your neighborhood support healthy eating? (e.g. community gardens, farmers' markets, etc.)	322	63.3%	169	33.2%	18	3.5%
In the area that you live, is it easy to get affordable fresh fruits and vegetables?	353	68.7%	157	30.5%	4	0.8%
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?	153	29.7%	358	69.5%	4	0.8%
Have there been times in the past 12 months when you did not have enough money to pay your rent or mortgage?	142	27.7%	339	66.2%	31	6.1%
Do you feel safe in your neighborhood?	482	93.4%	33	6.4%	1	0.2%

Answered	523	
Skipped	45	

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

	#	%
Grocery store	503	96.7%
Take-out / fast food / restaurant	192	36.9%
Dollar store	139	26.7%
Farmers' Market	122	23.5%
Home Garden	110	21.2%
Food bank / food kitchen / food pantry	84	16.2%
Corner store / convenience store / gas station	53	10.2%
I regularly receive food from family, friends, neighbors, or my church	26	5.0%
Back-pack or summer food programs	23	4.4%
Meals on Wheels	22	4.2%
Community Garden	6	1.2%
I do not eat at home	3	0.6%
Other	8	1.5%
Answered	520	
Skipped	48	

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)

	#	%
I did not eat fruits or vegetables during the past 7 days	13	2.6%
1 – 3 times during the past 7 days	172	33.7%
4 – 6 times during the past 7 days	127	24.9%
1 time per day	56	11.0%
2 times per day	85	16.7%
3 times per day	40	7.8%
4 or more times per day	17	3.3%
Answered	510	
Skipped	58	

During the past 7 days, how many times did you eat fruit or vegetables (fresh or frozen)?
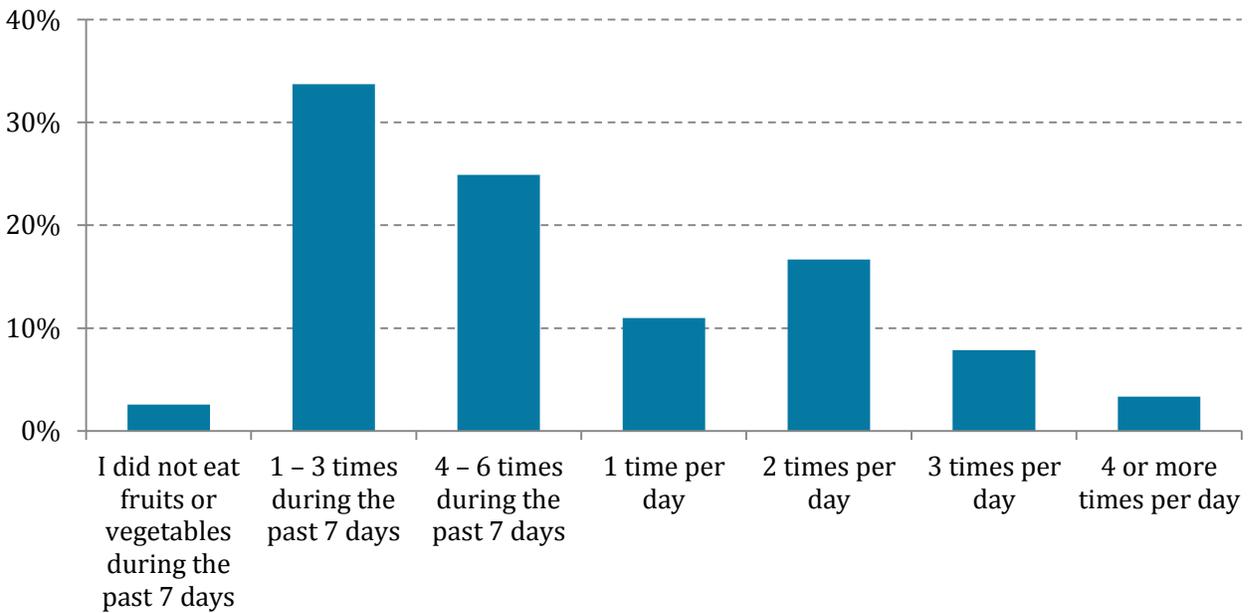
10. Have you been told by a doctor that you have… (Check all that apply)

	#	%
Depression or anxiety	170	35.6%
High blood pressure	158	33.1%
Obesity / overweight	139	29.1%
High cholesterol	95	19.9%
I have no health problems	89	18.6%
Asthma	64	13.4%
High blood sugar or diabetes	56	11.7%
Mental health problems	46	9.6%
Heart disease	25	5.2%
COPD / chronic bronchitis / Emphysema	18	3.8%
Cancer	15	3.1%
Stroke / Cerebrovascular disease	9	1.9%
Drug or alcohol problems	6	1.3%
Cerebral palsy	2	0.4%
HIV / AIDS	0	0.0%
Other	49	10.3%
Answered	478	
Skipped	90	

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

	#	%
Within the past year (1 to 12 months ago)	387	76.3%
Within the past 2 years (1 to 2 years ago)	58	11.4%
Within the past 5 years (2 to 5 years ago)	23	4.5%
5 or more years ago	39	7.7%
Answered	507	
Skipped	61	
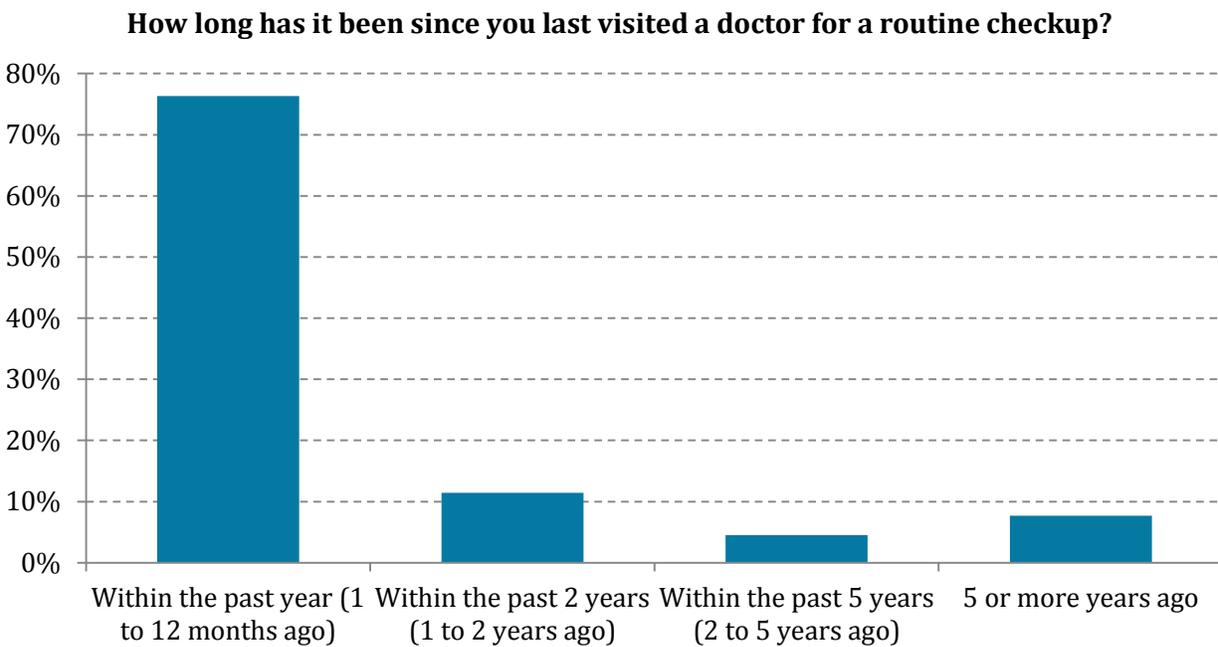
How long has it been since you last visited a doctor for a routine checkup?

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)	355	69.3%
Within the past 2 years (1 to 2 years ago)	51	10.0%
Within the past 5 years (2 to 5 years ago)	44	8.6%
5 or more years ago	62	12.1%
Answered	512	
Skipped	56	

How long has it been since you last visited a dentist or a dental clinic for any reason?
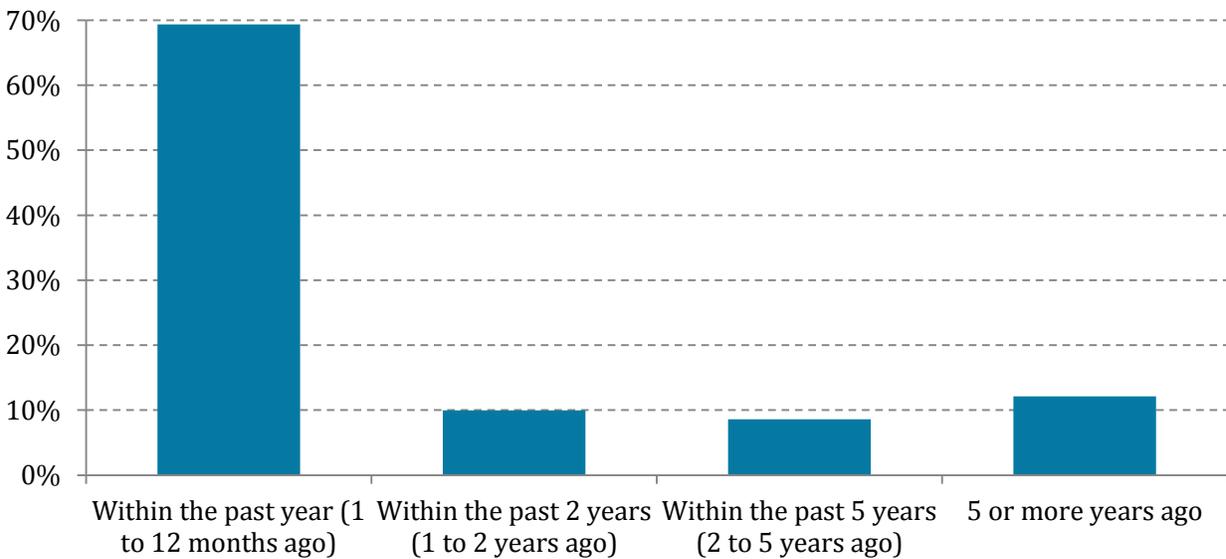
13. How connected do you feel with the community and those around you?

	#	%
Very connected	161	31.9%
Somewhat connected	265	52.5%
Not connected	79	15.6%
Answered	505	
Skipped	63	

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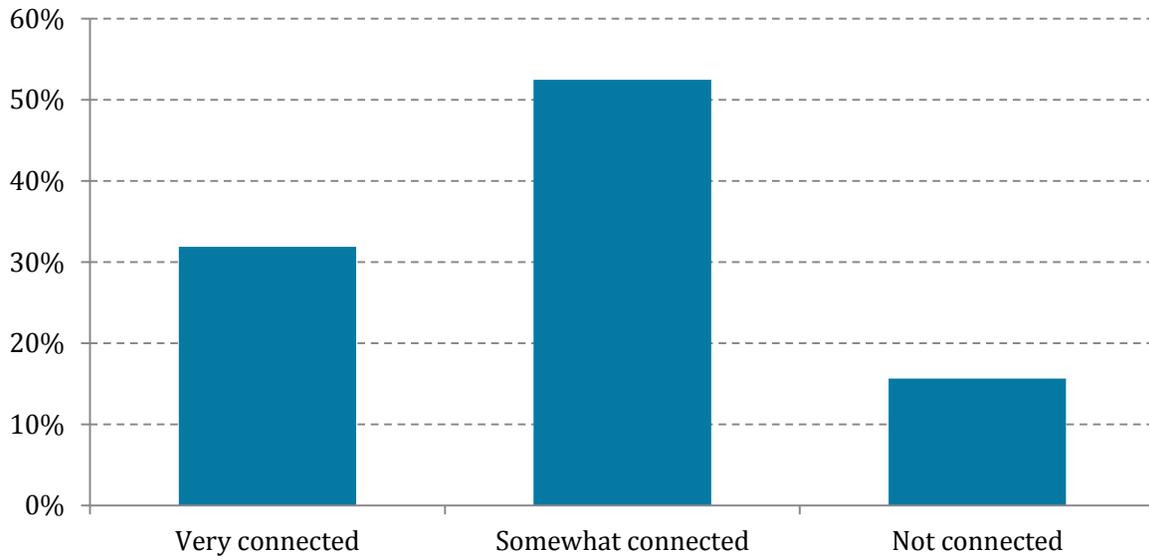
14. In the past 7 days, on how many days were you physically active for a total of at least 30 minutes? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard for some of the time.)

	#	%
0 days	83	16.4%
1 day	54	10.7%
2 days	79	15.6%
3 days	79	15.6%
4 days	53	10.5%
5 days	60	11.9%
6 days	21	4.2%
7 days	76	15.1%
Answered	505	
Skipped	63	

In the past 7 days, on how many days were you physically active for a total of at least 30 minutes?
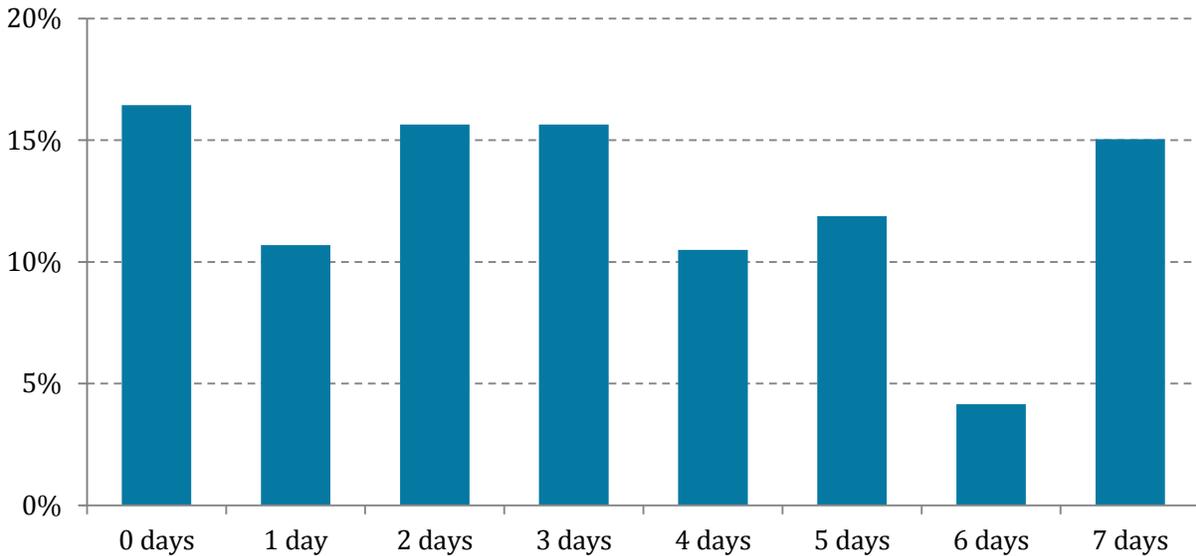
15. During the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?

	#	%
Never	28	5.5%
1-2 times	62	12.3%
3-4 times	91	18.0%
5-6 times	73	14.4%
7 times	60	11.9%
More than 7 times	126	24.9%
Not applicable / I live alone	66	13.0%
Answered	506	
Skipped	62	

During the past 7 days, how many times did all, or most, of your family living in your house eat a meal together?
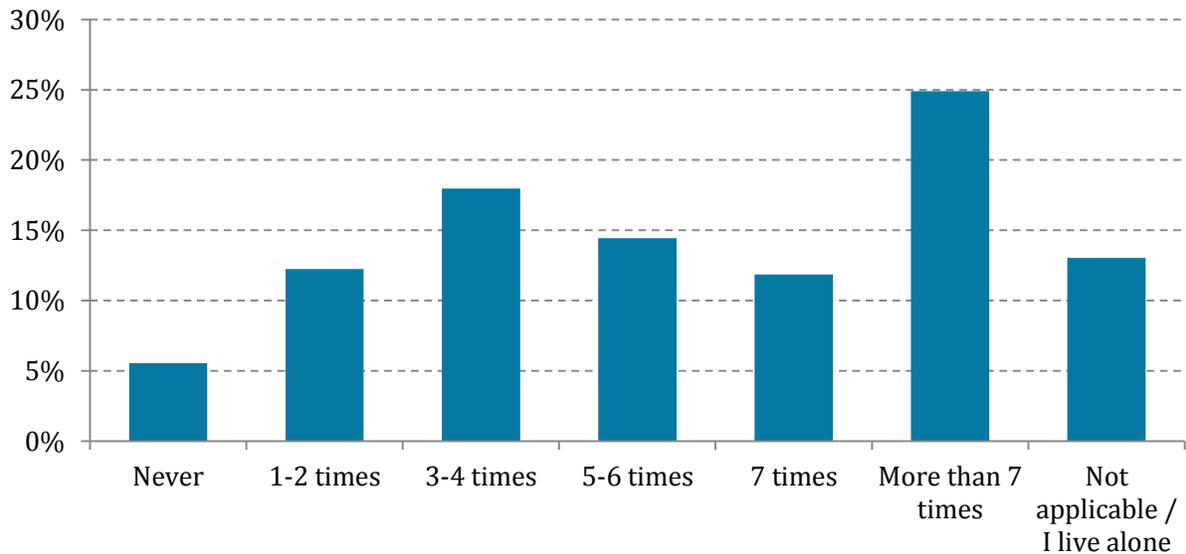
16. Would you say that in general your health is: (Please check one)

	#	%
Excellent	28	5.5%
Very good	133	26.3%
Good	229	45.3%
Fair	95	18.8%
Poor	21	4.2%
Answered	506	
Skipped	62	
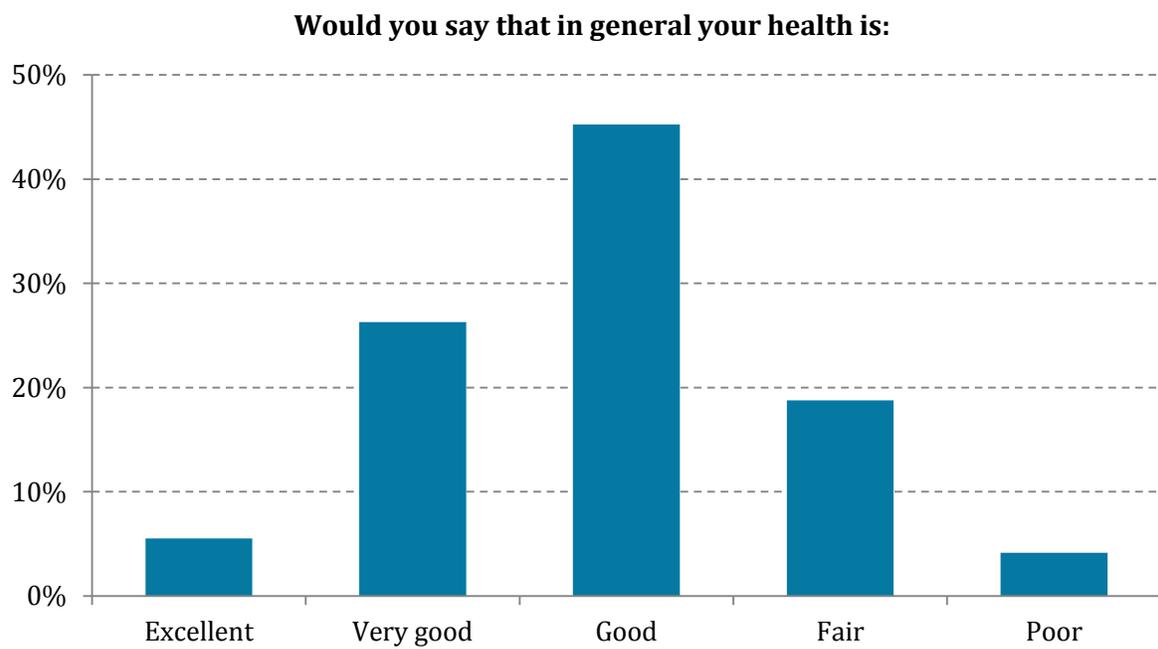
Would you say that in general your health is:

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	430
Skipped	138

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:	1.0
Answered	428
Skipped	140

*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.	81	16.4%
I have used tobacco products (cigarettes, smokeless tobacco, e-cigarettes, etc.)	114	23.1%
I have taken prescription drugs to get high	1	0.2%
I have used marijuana	13	2.6%
I have used other illegal drugs (e.g. cocaine, heroin, ecstasy, crack, LSD, etc.)	2	0.4%
None of these	323	65.4%
Answered	494	
Skipped	74	

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

During the past 30 days:
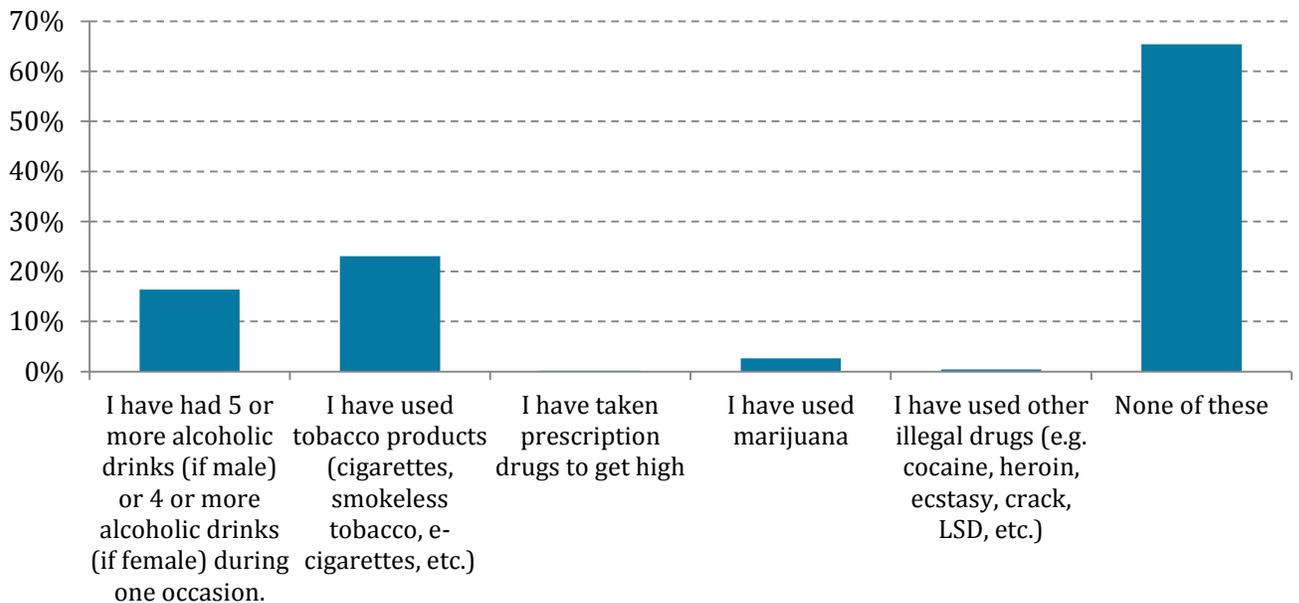
20. Have you ever used heroin?

	#	%
Yes	4	0.8%
No	492	99.2%
Answered	496	
Skipped	72	
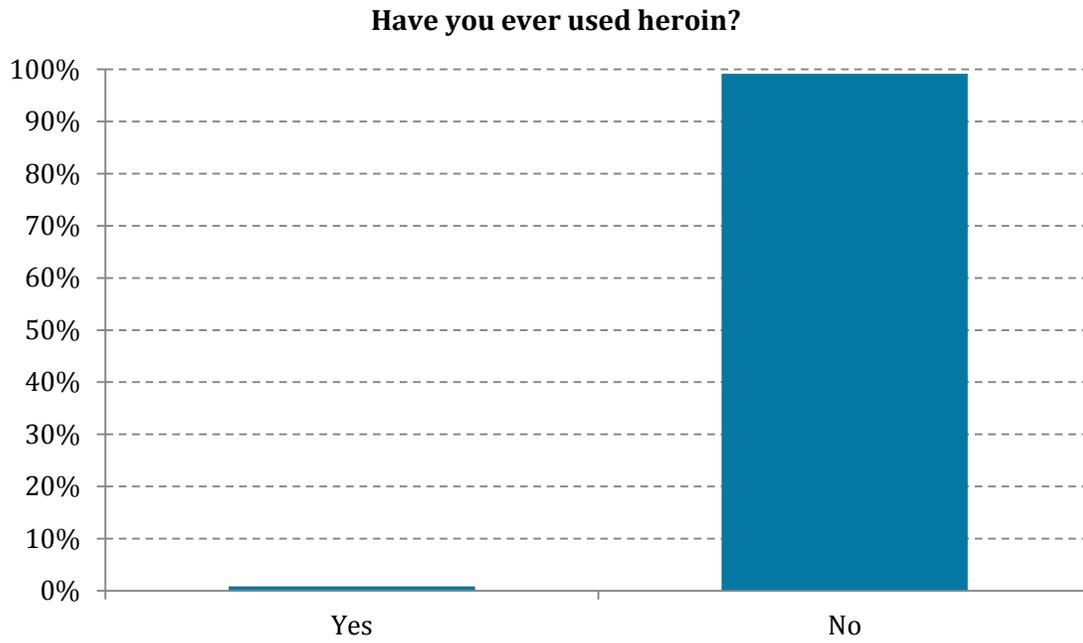
Have you ever used heroin?

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:	2.1
Answered	484
Skipped	84

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

	#	%
Not applicable- I drive	312	83.2%
Friends / Family drive me	43	11.5%
Bike or walk	12	3.2%
Public transit (i.e. bus, shuttle, similar)	12	3.2%
RADAR / CORTRAN	7	1.9%
Taxi	5	1.3%
Other	6	1.6%
Answered	375	
Skipped	193	

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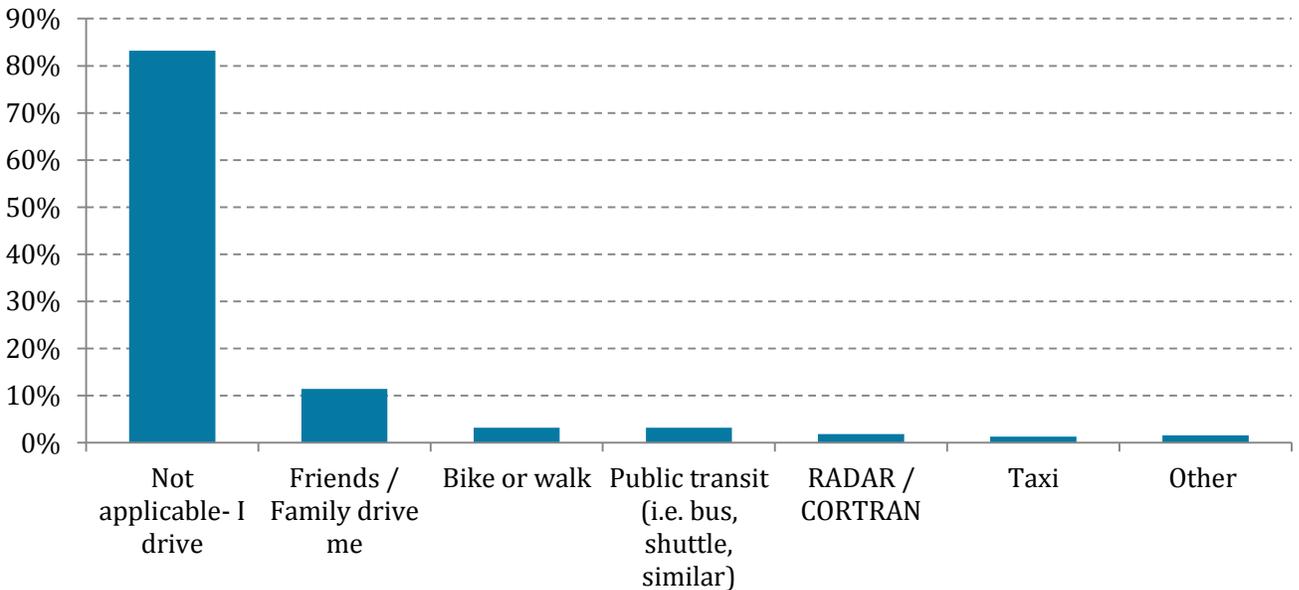
Secondary Data

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 defines the Rockbridge 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 Medically Underserved Areas (MUA) when applicable. State and national level data are also included for comparison when available.

Demographics

Total population

Geography	Total Population
Virginia	8,310,301
Rockbridge County	22,450
Buena Vista City	6,610
Lexington City	7,036

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

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%
Rockbridge County	22,307	22,887	2.6%	23,223	1.5%	23,478	1.1%
Buena Vista City	6,650	7,149	7.5%	7,655	7.1%	8,128	6.2%
Lexington City	7,042	7,613	8.1%	8,225	8.0%	8,799	7.0%

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
Rockbridge County	48.5
Buena Vista City	35.1
Lexington City	21.5

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

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%
Rockbridge County	4.8%	9.9%	3.3%	57.9%	24.0%
Buena Vista City	5.1%	12.6%	3.3%	62.5%	16.6%
Lexington City	2.5%	3.2%	2.7%	77.4%	14.2%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S0101
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%
Rockbridge County	93.4%	2.6%	0.1%	0.6%	0.1%	0.7%	2.4%	1.6%	98.4%
Buena Vista City	89.8%	1.7%	0.0%	7.3%	0.0%	0.0%	1.2%	1.3%	98.7%
Lexington City	84.5%	9.1%	0.0%	4.0%	0.0%	0.1%	2.3%	4.2%	95.8%

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

Rockbridge 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
2015-2016								
	Elementary Schools	4.0%	0.4%	0.5%	2.9%	0.0%	89.6%	2.5%
	Middle Schools	2.7%	0.3%	0.3%	2.4%	0.0%	91.5%	2.7%
	High Schools	3.9%	0.2%	1.4%	4.2%	0.0%	87.7%	2.6%
	District Grand Total	3.7%	0.3%	0.8%	3.3%	0.0%	89.3%	2.6%
2016-2017								
	Elementary Schools	4.3%	0.4%	0.4%	3.0%	0.1%	88.2%	3.6%
	Middle Schools	3.5%	0.3%	0.3%	2.7%	0.0%	89.5%	3.7%
	High Schools	4.0%	0.2%	1.1%	4.6%	0.1%	87.2%	2.8%
	District Grand Total	4.0%	0.3%	0.6%	3.5%	0.1%	88.2%	3.3%
2017-2018								
	Elementary Schools	4.6%	0.5%	0.3%	3.0%	0.2%	87.4%	4.0%
	Middle Schools	4.4%	0.3%	0.5%	2.6%	0.0%	88.5%	3.7%
	High Schools	3.9%	0.0%	0.7%	4.2%	0.2%	87.8%	3.1%
	District Grand Total	4.3%	0.3%	0.5%	3.3%	0.1%	87.8%	3.6%

Virginia Department of Education. Fall Membership Reports
http://www.doe.virginia.gov/statistics_reports/enrollment/fall_membership/report_data.shtml

Buena Vista City 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
2015-2016								
	Elementary Schools	1.1%	0.2%	0.0%	5.1%	0.0%	90.7%	2.9%
	Middle Schools	0.7%	1.3%	0.0%	4.7%	0.0%	91.9%	1.3%
	High Schools	1.0%	2.2%	0.0%	5.3%	0.2%	89.1%	2.2%
	District Grand Total	1.0%	1.2%	0.0%	5.1%	0.1%	90.2%	2.4%
2016-2017								
	Elementary Schools	2.2%	0.5%	0.0%	4.9%	0.0%	88.6%	3.9%
	Middle Schools	0.0%	0.6%	0.0%	5.8%	0.0%	91.6%	1.9%
	High Schools	1.3%	1.8%	0.3%	4.6%	0.3%	89.6%	2.3%
	District Grand Total	1.5%	1.0%	0.1%	4.9%	0.1%	89.5%	2.9%
2017-2018								
	Elementary Schools	2.4%	0.5%	0.0%	5.8%	0.0%	86.7%	4.6%
	Middle Schools	2.1%	1.4%	0.0%	5.6%	0.0%	88.2%	2.8%
	High Schools	1.3%	1.5%	0.0%	4.4%	0.3%	90.5%	2.1%
	District Grand Total	1.9%	1.1%	0.0%	5.2%	0.1%	88.5%	3.3%

Virginia Department of Education. Fall Membership Reports
http://www.doe.virginia.gov/statistics_reports/enrollment/fall_membership/report_data.shtml

Lexington City 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
2015-2016								
	Elementary Schools	9.5%	0.7%	3.9%	9.5%	0.0%	75.2%	1.3%
	Middle Schools	6.5%	0.0%	2.7%	9.1%	0.0%	81.7%	0.0%
	High Schools	--	--	--	--	--	--	--
	District Grand Total	8.3%	0.4%	3.5%	9.3%	0.0%	77.6%	0.8%
2016-2017								
	Elementary Schools	7.5%	0.6%	3.9%	11.4%	0.0%	74.4%	2.3%
	Middle Schools	7.9%	0.0%	4.0%	9.4%	0.0%	78.7%	0.0%
	High Schools	--	--	--	--	--	--	--
	District Grand Total	7.6%	0.4%	3.9%	10.6%	0.0%	76.1%	1.4%
2017-2018								
	Elementary Schools	8.3%	0.0%	4.2%	8.9%	0.0%	75.7%	2.9%
	Middle Schools	6.9%	0.0%	4.0%	9.9%	0.0%	78.7%	0.5%
	High Schools	--	--	--	--	--	--	--
	District Grand Total	7.8%	0.0%	4.1%	9.3%	0.0%	76.9%	1.9%

Virginia Department of Education. Fall Membership Reports
http://www.doe.virginia.gov/statistics_reports/enrollment/fall_membership/report_data.shtml

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

Geography	#	%
Virginia	1,211,386	15.5%
Rockbridge County	790	3.7%
Buena Vista City	210	3.3%
Lexington City	371	5.4%

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%
Rockbridge County	55.2%	8.1%	13.2%	1.5%	22.0%
Buena Vista City	49.0%	6.9%	8.1%	2.6%	33.4%
Lexington City	19.9%	5.0%	5.4%	0.2%	69.5%

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%
Rockbridge County	10.6%	21.0%	16.0%
Buena Vista City	6.3%	12.0%	8.0%
Lexington City	10.9%	13.0%	2.0%

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 Reading Assessment pass rate

Geography	2014-2015	2015-2016	2016-2017
Rockbridge County	79.4%	69.9%	74.3%
Buena Vista City	55.9%	55.2%	72.3%
Lexington City	86.3%	90.0%	84.3%

Virginia Department of Education, Test Data
http://www.doe.virginia.gov/statistics_reports/research_data/index.shtml

On time graduation rates

Geography	2015	2016	2017
Virginia	90.6%	91.4%	91.3%
Rockbridge County	92.4%	91.1%	90.9%
Buena Vista City	84.2%	79.2%	90.2%
Lexington City	--	--	--

Virginia Department of Education, Virginia Cohort Reports
http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

On time graduation rates, Rockbridge County high schools

Geography	2015	2016	2017
Virginia	90.6%	91.4%	91.3%
Rockbridge County High	92.4%	91.1%	90.9%

Virginia Department of Education, Virginia Cohort Reports
http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

On time graduation rates, Buena Vista City high schools

Geography	2015	2016	2017
Virginia	90.6%	91.4%	91.3%
Parry McCluer High	84.2%	79.2%	90.2%

Virginia Department of Education, Virginia Cohort Reports
http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

Dropout rates

Geography	2015	2016	2017
Virginia	5.2%	5.3%	5.8%
Rockbridge County	5.6%	7.8%	7.1%
Buena Vista City	8.4%	11.7%	5.4%
Lexington City	--	--	--

Virginia Department of Education, Virginia Cohort Reports
http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

Dropout rates, Rockbridge County high schools

Geography	2015	2016	2017
Virginia	5.2%	5.3%	5.8%
Rockbridge County High	5.6%	7.8%	7.1%

Virginia Department of Education, Virginia Cohort Reports
http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/index.shtml

Dropout rates, Buena Vista City high schools

Geography	2015	2016	2017
Virginia	5.2%	5.3%	5.8%
Parry McCluer High	8.4%	11.7%	5.4%

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%
Rockbridge County	65%	65%	66%
Buena Vista City	61%	60%	60%
Lexington City	--	--	--

Virginia Department of Education, Postsecondary Enrollment Reports
https://p1pe.doe.virginia.gov/postsec_public/postsec.do?dowhat=LOAD_REPORT_C11

Academic attainment for population 25 and over

Geography	High school graduate or higher	Bachelor's degree or higher
Virginia	88.6%	36.9%
Rockbridge County	86.2%	25.1%
Buena Vista City	81.2%	16.2%
Lexington City	85.0%	44.9%

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1501
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1501&prodType=table

Academic attainment for population 25 and over

Median household income

Geography	Median Household Income
Virginia	$66,149
Rockbridge County	$52,478
Buena Vista City	$29,109
Lexington City	$34,464

U.S. Census Bureau, 2012-2016 5-year estimates, American Community Survey, Table S1903
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_S1903&prodType=table

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

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 additional person	Add $4,180 for each additional person	Add $4,320 for each additional person

Federal Registrar, Annual Update of the HHS Poverty Guidelines
https://www.federalregister.gov/documents/2018/01/18/2018-00814/annual-update-of-the-hhs-poverty-guidelines

Number of residents living in poverty

Geography	Below 100% FPL		100-199% FPL		200% FPL and above		Total
	#	%	#	%	#	%	
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
Rockbridge County	3,274	14.7%	4,208	19.0%	14,717	66.3%	22,199
Buena Vista City	1,694	27.6%	2,083	33.9%	2,369	38.5%	6,146
Lexington City	653	18.4%	728	20.5%	2,168	61.1%	3,549

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
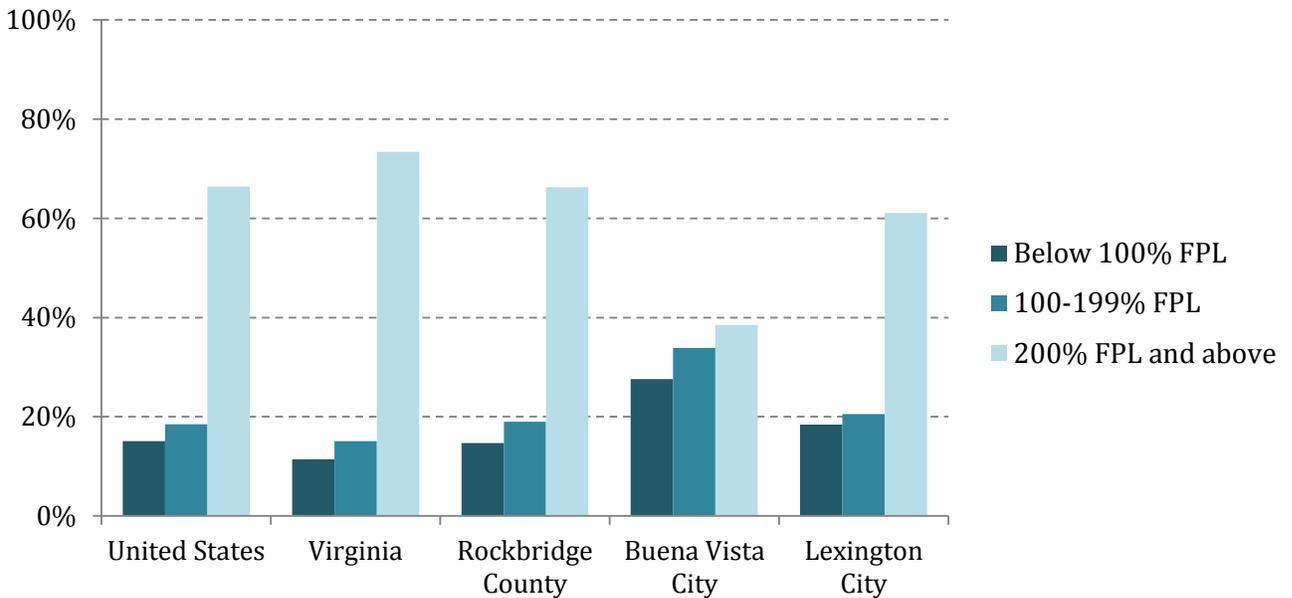
Ratio of income by poverty status, by age

< 6 years of age

Geography	Below 100% FPL		100-199% FPL		200% FPL and above	
	#	%	#	%	#	%
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%
Rockbridge County	302	23.9%	316	25.1%	643	51.0%
Buena Vista City	164	36.2%	193	42.6%	96	21.2%
Lexington City	26	12.1%	136	63.3%	53	24.7%

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

6-17 years of age

Geography	Below 100% FPL		100-199% FPL		200% FPL and above	
	#	%	#	%	#	%
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%
Rockbridge County	665	24.9%	522	19.6%	1,483	55.5%
Buena Vista City	361	39.0%	316	34.2%	248	26.8%
Lexington City	26	8.2%	44	13.9%	247	77.9%

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

18-64 years of age

Geography	Below 100% FPL		100-199% FPL		200% FPL and above	
	#	%	#	%	#	%
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%
Rockbridge County	1,843	14.3%	2,142	16.6%	8,945	69.2%
Buena Vista City	1,031	27.6%	1,224	32.8%	1,481	39.6%
Lexington City	521	25.2%	240	11.6%	1,306	63.2%

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

Geography	Below 100% FPL		100-199% FPL		200% FPL and above	
	#	%	#	%	#	%
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%
Rockbridge County	464	8.7%	1,228	23.0%	3,646	68.3%
Buena Vista City	138	13.4%	350	33.9%	544	52.7%
Lexington City	80	8.4%	308	32.4%	562	59.2%

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

Poverty status in the past 12 months, by race/ethnicity

Geography	White			Black / African American		
	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%
Rockbridge County	20,818	2,991	14.4%	488	118	24.2%
Buena Vista City	5,556	1,577	28.4%	50	--	--
Lexington City	2,951	536	18.2%	501	77	15.4%

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

Geography	American Indian / Alaskan Native			Asian		
	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%
Rockbridge County	22	--	--	138	--	--
Buena Vista City	--	--	--	482	117	24.3%
Lexington City	--	--	--	89	40	44.9%

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

Geography	Native Hawaiian and Other Pacific Islander			Some other race		
	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%
Rockbridge County	28	--	--	165	85	51.5%
Buena Vista City	--	--	--	--	--	--
Lexington City	--	--	--	--	--	--

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

Geography	Two or more races			Hispanic / Latino origin		
	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%
Rockbridge County	540	80	14.8%	343	88	25.7%
Buena Vista City	58	--	--	72	43	59.7%
Lexington City	8	--	--	191	12	6.3%

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

Number of TANF recipients for Rockbridge for calendar year 2015-2017

Geography	2015	2016	2017
Rockbridge / Buena Vista / Lexington	222	228	261

Virginia Department of Social Services Profile Report
http://www.dss.virginia.gov/geninfo/reports/agency_wide/ldss_profile.cgi

Number of SNAP recipients for Rockbridge for calendar year 2015-2017

Geography	2015	2016	2017
Rockbridge / Buena Vista / Lexington	5,620	5,103	5,351

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%
Rockbridge County	43.0%	40.4%	46.2%
Buena Vista City	51.4%	49.9%	56.9%
Lexington City	24.2%	26.6%	26.6%

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

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

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Central	475	178	37.5%	21	4.4%	199	41.9%
Fairfield	301	154	51.2%	20	6.6%	174	57.8%
Mountain View	137	53	38.7%	12	8.8%	65	47.5%
Natural Bridge	256	140	54.7%	29	11.3%	169	66.0%
Middle Schools							
Maury River	572	203	35.5%	54	9.4%	257	44.9%
High Schools							
Rockbridge County	999	243	24.3%	71	7.1%	314	31.4%

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

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

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Central	504	178	35.3%	34	6.8%	212	42.1%
Fairfield	295	128	43.4%	20	6.8%	148	50.2%
Mountain View	133	58	43.6%	9	6.8%	67	50.4%
Natural Bridge	262	140	53.4%	28	10.7%	168	64.1%
Middle Schools							
Maury River	613	215	35.1%	58	9.5%	273	44.5%
High Schools							
Rockbridge County	951	201	21.1%	45	4.7%	246	25.9%

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

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

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Central	512	196	38.3%	47	9.2%	243	47.5%
Fairfield	303	159	52.5%	23	7.6%	182	60.1%
Mountain View	119	57	47.9%	7	5.9%	64	53.8%
Natural Bridge	271	165	60.9%	10	3.7%	175	64.6%
Middle Schools							
Maury River	609	253	41.5%	44	7.2%	297	48.8%
High Schools							
Rockbridge County	958	267	27.9%	54	5.6%	321	33.5%

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

Buena Vista City Public Schools free and reduced lunch eligibility, 2015-2016

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Enderly Heights	208	107	51.4%	32	15.4%	139	66.8%
FW Kling Jr.	238	121	50.8%	29	12.2%	150	63.0%
Middle Schools							
Parry McCluer	148	62	41.9%	9	6.1%	71	48.0%
High Schools							
Parry McCluer	412	122	29.6%	35	8.5%	157	38.1%

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

Buena Vista City Public Schools free and reduced lunch eligibility, 2016-2017

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Enderly Heights	196	94	48.0%	27	13.8%	121	61.7%
FW Kling Jr.	217	106	48.9%	24	11.1%	130	59.9%
Middle Schools							
Parry McCluer	156	73	46.8%	16	10.3%	89	57.1%
High Schools							
Parry McCluer	399	118	29.6%	25	6.3%	143	35.8%

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

Buena Vista City Public Schools free and reduced lunch eligibility, 2017-2018

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Enderly Heights	193	109	56.5%	17	8.8%	126	65.3%
FW Kling Jr.	220	136	61.8%	23	10.5%	159	72.3%
Middle Schools							
Parry McCluer	148	88	59.5%	4	2.7%	92	62.2%
High Schools							
Parry McCluer	395	145	36.7%	22	5.6%	167	42.3%

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

Lexington City Public Schools free and reduced lunch eligibility, 2015-2016

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Harrington Waddell	301	73	24.3%	5	1.7%	78	25.9%
Middle Schools							
Lylburn Downing	186	37	19.9%	3	1.6%	40	21.5%

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

Lexington City Public Schools free and reduced lunch eligibility, 2016-2017

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Harrington Waddell	319	81	25.4%	10	3.1%	91	28.5%
Middle Schools							
Lylburn Downing	204	45	22.1%	3	1.5%	48	23.5%

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

Lexington City Public Schools free and reduced lunch eligibility, 2017-2018

	SNAP membership	Free lunch eligible		Reduced lunch eligible		Total F/R lunch eligible	
		#	%	#	%	#	%
Elementary Schools							
Harrington Waddell	316	81	25.6%	8	2.5%	89	28.2%
Middle Schools							
Lylburn Downing	200	45	22.5%	3	1.5%	48	24.0%

Virginia Department of Education National School Lunch Program Free and Reduced Price Eligibility Reports
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%
Rockbridge County	27.1%	25.6%	62.0%	43.8%
Buena Vista City	32.7%	31.0%	61.2%	40.0%
Lexington City	27.5%	23.2%	57.4%	10.2%

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%
Rockbridge County	8.6%	18.8%	62.1%
Buena Vista City	25.8%	34.6%	84.4%
Lexington City	6.2%	11.6%	31.1%

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%
Rockbridge County	19.4%
Buena Vista City	27.4%
Lexington City	100.0%

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
Roanoke Metro Area	41.5%	19.9%
Staunton-Waynesboro Metro Area	45.4%	23.5%

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 *low to very low* Consumer Opportunity Scores	Residents living in census tracts with *high to very high* Consumer Opportunity Scores
Rockbridge County	18%	28%
Buena Vista City	100%	0%
Lexington City	100%	0%

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 *low to very low* Economic Opportunity Scores	Residents living in census tracts with *high to very high* Economic Opportunity Scores
Rockbridge County	82%	0%
Buena Vista City	0%	100%
Lexington City	100%	0%

Virginia Department of Health, Virginia Health Opportunity Index (2018)
https://www.vdh.virginia.gov/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%
Rockbridge County	5.3%	4.7%	4.4%
Buena Vista City	5.8%	5.1%	5.1%
Lexington City	7.8%	6.8%	6.3%

U.S. Census Bureau, Virginia Employment Commission Community Profiles (2018)
https://data.virginialmi.com/gsipub/index.asp?docid=342

**Unemployment rate
2014-2016**
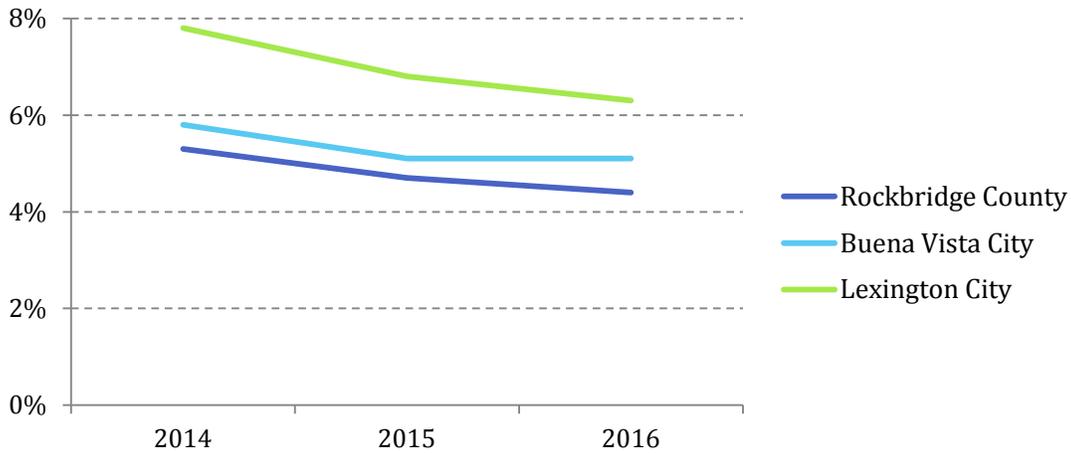
Rate of child abuse and neglect, 2012-2013

Geography	Completed child abuse and neglect cases per 1,000 children	
	2012	2013
Rockbridge County	1.8	1.6
Buena Vista City	3.7	0.7
Lexington City	0.0	0.0

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
Rockbridge County	10
Buena Vista City	0
Lexington City	4

2017 case counts may be from incomplete cases.
Virginia Department of Social Services, Child protective Reports and Studies
https://www.dss.virginia.gov/geninfo/reports/children/cps/all_other.cgi

Health Behaviors

No leisure time physical activity

Geography	2012	2013	2014
Virginia	22%	21%	22%
Rockbridge County	28%	27%	24%
Buena Vista City	24%	22%	23%
Lexington City	23%	20%	21%

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

Geography	2012		2014	
	#	Facilities / 1,000	#	Facilities / 1,000
Rockbridge County	0	0.00	0	0.00
Buena Vista City	1	0.15	1	0.15
Lexington City	1	0.14	1	0.14

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

Fast food restaurants rate

Geography	Fast food restaurants per 1,000	
	2012	2014
Rockbridge County	0.40	0.40
Buena Vista City	0.89	0.61
Lexington City	1.29	1.37

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
Rockbridge County	6.4%	5.4%
Buena Vista City	40.6%	52.7%
Lexington City	0.1%	1.2%

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, by census tract, 2015

Census Tract	Population	Low access to a supermarket or large grocery store		Total population that is low-income and has low access to a supermarket or large grocery store	
		#	%	#	%
Buena Vista Census Tract 306	6,650	6,499	97.7%	3,735	56.2%
Lexington Census Tract 305	7,042	576	8.2%	112	1.6%
Rockbridge Census Tract 301	7,348	5,861	79.8%	1,956	26.6%
Rockbridge Census Tract 302	4,580	4,378	95.6%	1,606	35.1%
Rockbridge Census Tract 303	6,434	6,265	97.4%	1,838	28.6%
Rockbridge Census Tract 304	3,945	3,823	96.9%	1,258	31.9%

USDA Food Access Research Atlas
https://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data/

Flu vaccination, 2014

Geography	
Virginia	43.5%
Rockbridge County	43.6%
Buena Vista City	41.9%
Lexington City	53.9%

Virginia Department of Health
Behavioral Risk Factor Surveillance System, Small Area Estimation
http://www.vdh.virginia.gov/data/health-behavior/

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

Geography	Girls		Boys	
	2014	2015	2014	2015
Virginia	35.9%	38.5%	22.5%	25.7%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

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	21.0%	25.0%	28.0%
Northwestern Region	21.2%	28.7%	29.2%
Southwestern Region	29.6%	30.0%	32.8%
Central Shenandoah Health District	22.5%	30.8%	26.7%

Virginia Department of Health, Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/brfss/data/

Sexually transmitted infection rate

Geography	Sexually transmitted infections per 100,000					
	2014			2015		
	Early Syphilis	Gonorrhea	Chlamydia	Early Syphilis	Gonorrhea	Chlamydia
Virginia	6.8	97.6	423.3	10.3	103.5	436.4
Rockbridge County	0.0	4.5	215.0	4.5	22.4	197.1
Buena Vista City	0.0	30.3	257.5	15.1	15.1	257.5
Lexington City	0.0	27.4	164.1	0.0	0.0	191.5

Virginia Department of Health, Sexually Transmitted Infections
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
Rockbridge County	34.0
Buena Vista City	21.7
Lexington City	22.0

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Birth rate, by race

| Geography | Live births per 1,000 | | | | | | | |
| | 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
Rockbridge County	6.6	6.4	8.3	14.2	6.7	6.5	9.8	18.0
Buena Vista City	13.9	14.5	10.0	--	12.5	13.1	7.8	--
Lexington City	12.4	12.7	5.3	25.3	11.8	12.8	2.7	13.6

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Teen pregnancy rate, by race, 2015

| Geography | Teen pregnancies per 1,000 females ages 10-19 | | | |
	Total	White	Black	Other
Virginia	12.0	8.9	17.5	21.4
Rockbridge County	8.9	8.6	16.7	--
Buena Vista City	8.1	9.0	--	--
Lexington City	9.0	10.5	--	--

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Adult smoking

Geography	2014	2015	2016
Virginia	20%	17%	15%
Rockbridge County	17%	16%	16%
Buena Vista City	22%	21%	22%
Lexington City	20%	19%	17%

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

ED heroin overdose rate

| Geography | Overdoses per 100,000 | |
	2015	2016
Virginia	9.5	16.7
Rockbridge County	4.5	13.4
Buena Vista City	0.0	15.5
Lexington City	0.0	0.0

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

ED opioid overdose rate

Geography	Overdoses per 100,000	
	2015	2016
Virginia	87.4	103.5
Rockbridge County	58.2	62.5
Buena Vista City	120.9	201.5
Lexington City	0.0	0.0

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

Fatal prescription opioid overdose rate

Geography	Fatal overdoses per 100,000		
	2014	2015	2016
Virginia	6.0	4.7	5.5
Rockbridge County	0.0	4.5	4.5
Buena Vista City	0.0	0.0	0.0
Lexington City	0.0	0.0	14.2

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

Fatal fentanyl and/or heroin overdose rate

Geography	Fatal overdoses per 100,000		
	2014	2015	2016
Virginia	4.2	5.6	9.6
Rockbridge County	0.0	8.9	0.0
Buena Vista City	0.0	0.0	0.0
Lexington City	0.0	0.0	0.0

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

EMS Narcan use rate

Geography	EMS Narcan use per 100,000		
	2014	2015	2016
Virginia	26.0	33.9	48.5
Rockbridge County	0.0	0.0	13.4
Buena Vista City	15.1	75.6	62.0
Lexington City	41.0	27.5	42.6

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

Clinical Care

Health insurance status

Geography	Medicaid #	Medicaid %	Medicare #	Medicare %	Private #	Private %
Virginia	865,073	10.9%	1,180,282	14.8%	5,944,729	74.6%
Rockbridge County	2,196	9.9%	5,437	24.5%	15,861	71.5%
Buena Vista City	1,062	16.1%	1,377	20.8%	4,034	61.1%
Lexington City	375	6.5%	846	14.7%	4,766	82.7%

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

Geography	Direct-Purchase #	Direct-Purchase %	Employer Based #	Employer Based %	Uninsured #	Uninsured %
Virginia	1,042,552	13.1%	4,799,029	60.2%	968,444	12.1%
Rockbridge County	4,374	19.7%	11,876	53.5%	2,940	13.3%
Buena Vista City	854	12.9%	3,349	50.7%	1,073	16.2%
Lexington City	1,464	25.4%	3,606	62.6%	394	6.8%

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

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

	< 18 years old #	< 18 years old %	18-64 years old #	18-64 years old %	65+ years old #	65+ years old %	All ages #	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	

U.S. Census Bureau, 2016 1-year estimates, American Community Survey, Table B27016
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_B27016&prodType=table

Less than 200% FPL health insurance status by age, Rockbridge County, 2011-2013

	< 18 years old		18-64 years old		65+ years old		All ages	
	#	%	#	%	#	%	#	%
With health insurance	1,036	71.4%	2,034	47.0%	1,438	99.7%	4,508	62.4%
Employer-based health insurance	430	29.7%	1,006	23.2%	265	18.4%	1,701	23.5%
Direct-purchase health insurance	93	6.4%	472	10.9%	544	37.7%	1,109	15.4%
Medicare	0	0.0%	312	7.2%	1,438	99.7%	1,750	24.2%
Medicaid	646	44.6%	402	9.3%	200	13.9%	1,248	17.3%
No health insurance	414	28.6%	2,297	53.0%	5	0.3%	2,716	37.6%
Total number <200% FPL	1,450		4,331		1,443		7,224	

U.S. Census Bureau, 2011-2013 3-year estimates, American Community Survey, Table B27016
https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_3YR_B27016&prodType=table

Projected newly eligible for Medicaid through closing coverage gap, 2018

Geography	
Rockbridge County	1200
Buena Vista City	800
Lexington City	100

The Commonwealth Institute
http://www.thecommonwealthinstitute.org/
2018/01/11/closing-the-coverage-gap-by-locality/

Health Professional Shortage Areas

Geography	MUA	Primary Care HPSA	Dental HPSA	Mental Health HPSA
Rockbridge County	Low Income-Rockbridge Area	Rockbridge Area Free Clinic, Big Island, Buffalo, Kerrs Creek, Natural Bridge, South River, Walkers Creek, Low Income-Rockbridge Area, Rockbridge	Rockbridge Area Free Clinic, Low Income-Rockbridge County/Lexington City/Buena Vista City, Rockbridge	Rockbridge Area Free Clinic, Rockbridge Service Area, Rockbridge
Buena Vista City	Low Income-Rockbridge Area	Low Income-Rockbridge Area, Buena Vista City	Low Income-Rockbridge County/Lexington City/Buena Vista City, Buena Vista City	Buena Vista City, Rockbridge Service Area
Lexington City	Low Income-Rockbridge Area	Low Income-Rockbridge Area, Lexington City	Low Income-Rockbridge County/Lexington City/Buena Vista City, Lexington City	Rockbridge Service Area, Lexington City

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	
Rockbridge County	16.3%
Buena Vista City	12.2%
Lexington City	3.4%

Virginia Department of Health,
Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/data/health-behavior/

Adults with a regular healthcare provider, 2014

Geography	
Virginia	69.3%
Rockbridge County	84.2%
Buena Vista City	83.7%
Lexington City	83.7%

Virginia Department of Health
Behavioral Risk Factor Surveillance System, Small Area Estimation
http://www.vdh.virginia.gov/data/health-behavior/

Primary care provider population ratio, 2013

Geography	# PCPs	PCP Rate	PCP Ratio
Virginia	6,216	75	1,329:1
Rockbridge County	24	108	929:1
Buena Vista City	1	15	6,680:1
Lexington City	--	--	--

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
Rockbridge County	25	112	8,93:1
Buena Vista City	2	30	3,302:1
Lexington City	--	--	--

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
Rockbridge County	24	107	931:1
Buena Vista City	2	30	3,309:1
Lexington City	--	--	--

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

Mental health provider population ratio, 2015

Geography	# MHPs	MHP Rate	MHP Ratio
Virginia	10,814	130	770:1
Rockbridge County	1	4	22,327:1
Buena Vista City	3	45	2,201:1
Lexington City	33	451	222:1

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
Rockbridge County	1	4	22,354:1
Buena Vista City	4	60	1,655:1
Lexington City	35	482	207:1

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
Rockbridge County	1	4	22,392:1
Buena Vista City	4	62	1,613:1
Lexington City	39	554	181:1

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
Rockbridge County	1	4	22,327:1
Buena Vista City	5	76	1,321:1
Lexington City	9	123	812:1

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
Rockbridge County	1	4	22,354:1
Buena Vista City	5	76	1,324:1
Lexington City	9	124	807:1

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
Rockbridge County	1	4	22,392:1
Buena Vista City	5	77	1,290:1
Lexington City	9	128	783:1

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	
Rockbridge County	72.6%
Buena Vista City	59.1%
Lexington City	75.3%

Virginia Department of Health, Health Behavior
http://www.vdh.virginia.gov/data/health-behavior/

Youth with no dental visit in the last year, 2013

Geography	
Virginia	21%
Rockbridge County	20%
Buena Vista City	20%
Lexington City	20%

Virginia Atlas of Community Health
http://www.atlasva.com

Physical Environment

Severe housing problems, 2010-2014

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%
Rockbridge County	12%
Buena Vista City	22%
Lexington City	21%

2018 County Health Rankings, Comprehensive Housing Affordability Strategy (CHAS)
http://www.countyhealthrankings.org/app/virginia/2018/downloads

Occupied housing units with no vehicles available

Geography	#	%
Virginia	196,917	6.4%
Rockbridge County	309	3.3%
Buena Vista City	268	9.9%
Lexington City	208	11.2%

U.S. Census Bureau, 2012-2016 5-year American Community Survey, Table DP04
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%
Rockbridge County	84%	29%
Buena Vista City	85%	14%
Lexington City	51%	29%

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 (out of 133)

Geography	2016	2017	2018
Rockbridge County	41	36	54
Buena Vista City	76	77	80
Lexington City	45	37	40

County Health Rankings
http://www.countyhealthrankings.org/app/virginia/2018/downloads

County Health Rankings: Health factors (out of 133)

Geography	2016	2017	2018
Rockbridge County	43	47	46
Buena Vista City	93	96	101
Lexington City	58	53	35

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%
Rockbridge County	14%	13%	15%
Buena Vista City	19%	20%	22%
Lexington City	17%	18%	17%

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
Rockbridge County	3.5	3.3	3.6
Buena Vista City	4.1	4.4	4.6
Lexington City	3.9	3.8	3.8

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
Rockbridge County	3.3	3.4	3.9
Buena Vista City	3.8	4.0	4.7
Lexington City	3.6	3.7	3.8

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%
Central Shenandoah Health District	37.4%

Virginia Department of Health
Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/brfss/data/

Youth with dental caries in their primary or permanent teeth, 2013

Geography	
Virginia	18%
Rockbridge County	16%
Buena Vista City	16%
Lexington City	17%

Virginia Atlas of Community Health
http://www.atlasva.com

Youth with teeth in fair/poor condition, 2013

Geography	
Virginia	6%
Rockbridge County	5%
Buena Vista City	5%
Lexington City	5%

Virginia Atlas of Community Health
http://www.atlasva.com

Low birthweight

Geography	2014	2015
Virginia	7.9%	7.9%
Rockbridge County	3.4%	6.0%
Buena Vista City	4.3%	4.8%
Lexington City	6.6%	7.0%

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Confirmed elevated blood lead levels in children under 36 months

Geography	Population <36 months	2014	2015
Virginia	303,439	185	164
Rockbridge County	603	1	3
Buena Vista City	257	0	0
Lexington City	111	0	0

Virginia Department of Health, Lead-Safe
http://www.vdh.virginia.gov/leadsafe/data-statistics/

HIV infection rate

Geography	HIV infections per 100,000	
	2014	2015
Virginia	11.1	11.2
Rockbridge County	4.5	0.0
Buena Vista City	0.0	15.1
Lexington City	0.0	0.0

Virginia Department of Health, Sexually Transmitted Infections
http://www.vdh.virginia.gov/data/sexually-transmitted-infections/

New HIV diagnosis rate

Geography	New diagnoses per 100,000		
	2014	2015	2016
Virginia	11.0	11.6	10.3
Rockbridge County	4.5	0.0	0.0
Buena Vista City	0.0	15.1	0.0
Lexington City	0.0	0.0	0.0

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

Reported tuberculosis rate

Geography	Reported tuberculosis cases per 100,000		
	2014	2015	2016
Virginia	2.4	2.5	2.4
Rockbridge County	0.0	4.5	0.0
Buena Vista City	0.0	15.1	0.0
Lexington City	0.0	0.0	0.0

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

New reported hepatitis C case rate

Geography	New cases per 100,000, ages 18-30		
	2014	2015	2016
Virginia	76.3	89.7	131.3
Rockbridge County	100.1	67.3	171.6
Buena Vista City	0.0	133.8	69.9
Lexington City	0.0	27.2	0.0

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

High blood pressure, 2015

Geography	
Virginia	33.2%
Central Shenandoah Health District	34.8%

Virginia Department of Health
http://www.vdh.virginia.gov/data/chronic-disease/

Obesity

Geography	2012	2013	2014
Virginia	27%	27%	28%
Rockbridge County	24%	25%	24%
Buena Vista City	28%	26%	26%
Lexington City	27%	26%	26%

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	
Rockbridge County	4.4%
Buena Vista City	4.7%
Lexington City	11.1%

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

Diabetes prevalence, 2014

Geography	
Rockbridge County	11.1%
Buena Vista City	3.6%
Lexington City	0.7%

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	
Rockbridge County	7.5%
Buena Vista City	21.7%
Lexington City	4.4%

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

Chronic disease discharges by age group

Asthma, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	0.0	0.0	0.0
Rockbridge County	29.4	13.8	15.0

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Angina, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	0.0	0.0	57.9
Rockbridge County	0.0	0.0	90.3

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Chronic obstructive pulmonary disease, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	0.0	184.2	694.4
Rockbridge County	0.0	276.9	421.2

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Congestive heart failure, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	0.0	138.1	2,083.3
Rockbridge County	39.2	152.3	1,459.1

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Diabetes, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	136.5	414.4	463.0
Rockbridge County	117.5	346.1	376.1

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Hypertension, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	0.0	46.0	0.0
Rockbridge County	0.0	55.4	90.3

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Pneumonia, June 2016 – June 2017

Geography	Discharge rate per 100,000		
	18-44 years old	45-64 years old	65+ years old
Buena Vista City	68.3	138.1	868.1
Rockbridge County	49.0	83.1	857.4

Rates based on primary diagnosis hospital discharges
Sg2, Virginia Health Information, 2018

Overall death rate

Geography	Deaths per 100,000		
	2014	2015	2016
Virginia	74.1	74.6	69.0
Rockbridge County	76.1	125.3	89.3
Buena Vista City	30.3	90.7	15.5
Lexington City	41.0	41.3	99.4

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

Infant mortality rate, by race, 2015

Geography	Infant deaths / 1,000 live births			
	Total	White	Black	Other
Virginia	5.9	4.7	11.3	3.5
Rockbridge County	6.7	7.2	--	--
Buena Vista City	12.0	12.5	--	--
Lexington City	--	--	--	--

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Malignant neoplasm deaths per 100,000, 2013

Geography	
Virginia	161.3
Rockbridge County	158.5
Buena Vista City	274.9
Lexington City	131.9

Virginia Department of Health
http://www.vdh.virginia.gov/HealthStats/stats.htm

Heart disease deaths per 100,000, 2013

Geography	
Virginia	155.9
Rockbridge County	120.7
Buena Vista City	186.8
Lexington City	128.9

Virginia Department of Health
http://www.vdh.virginia.gov/HealthStats/stats.htm

Cerebrovascular disease deaths per 100,000, 2013

Geography	
Virginia	38.5
Rockbridge County	37.7
Buena Vista City	37.1
Lexington City	46.2

Virginia Department of Health
http://www.vdh.virginia.gov/HealthStats/stats.htm

Chronic lower respiratory disease deaths per 100,000, 2013

Geography	
Virginia	37.2
Rockbridge County	38.8
Buena Vista City	35.7
Lexington City	52.6

Virginia Department of Health
http://www.vdh.virginia.gov/HealthStats/stats.htm

Diabetes mellitus deaths per 100,000, 2013

Geography	
Virginia	18.3
Rockbridge County	17.2
Buena Vista City	21.1
Lexington City	7.8

Virginia Department of Health
http://www.vdh.virginia.gov/HealthStats/stats.htm

Suicide death rate

Geography	Suicide deaths per 100,000		
	2014	2015	2016
Virginia	13.8	13.1	13.2
Rockbridge County	22.4	26.8	8.9
Buena Vista City	0.0	0.0	0.0
Lexington City	13.7	13.8	71.0

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

Geography	Accidental deaths per 100,000		
	2014	2015	2016
Virginia	31.6	34.2	35.2
Rockbridge County	44.8	76.0	53.6
Buena Vista City	0.0	45.3	15.5
Lexington City	13.7	13.8	0.0

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

Geography	Drug/Poison deaths per 100,000		
	2014	2015	2016
Virginia	11.4	11.6	16.0
Rockbridge County	0.0	17.9	4.5
Buena Vista City	0.0	0.0	0.0
Lexington City	0.0	0.0	14.2

Virginia Department of Health, Office of Chief Medical Examiner's Annual Report, Table 5.8
http://www.vdh.virginia.gov/medical-examiner/annual-reports/

Avoidable hospital stays for ambulatory care sensitive conditions per 100,000 persons

Geography	2013
Virginia	1294

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Avoidable deaths from heart disease, stroke, or hypertensive disease per 100,000 persons

Geography	2013	2014
Virginia	49.9	49.1

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Average years of disability-free life expectancy

Geography	2013	2014
Virginia	66.1	66.0

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Health Planning Districts with established on-going collaborative community health planning process

Geography	2015	2016
Virginia	43.0%	82.8%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Electronic health records, Virginia

Geography	2014	2015	2016
Health care providers who have implemented a certified electronic health record	70.6%	73.4%	--
Entities connected through Connect Virginia HIE Inc., and the Electronic Health Information Exchange, and the National e-Health Exchange	--	3,800	4,832
Local Health Districts that have electronic health records and connect to community providers through Connect Virginia	--	0	0

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Hospitals that meet the state goal for prevention of hospital-onset *C diff* infections

Geography	2013	2015
Virginia	38.5%	43.2%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

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 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

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 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

Act | Plan
Study | Do

Appendix 2: Gantt Chart

Tasks	Assigned To:	Start Date	End Date	Duration (working days)	% complete
2018 Rockbridge Area CHA		08-01 Tue	11-01 Thu	327	83%
Create Gantt Chart	Amy	08-01 Tue	08-01 Tue	1	100%
2018 CHA Planning Meeting	Amy, Aaron, Holly, Chuck	09-06 Wed	09-06 Wed	1	100%
Finalize Survey	Amy/Carilion	09-20 Wed	09-21 Thu	1	100%
Pre-CHAT #1 Work	Amy/Holly	09-21 Thu	10-16 Mon	17	100%
CHAT #1 Meeting	Amy/Holly	10-17 Tue	10-17 Tue	1	100%
Survey Distribution	All	10-01 Sun	02-28 Wed	107	100%
Focus Groups	Amy/Holly	11-01 Wed	02-28 Wed	85	100%
Collect Secondary Data for CHA	Sierra	12-01 Fri	03-31 Sat	85	100%
Community Forum	Rockbridge 2020 Leaders	01-09 Tue	01-09 Tue	1	100%
CHAT #2 Meeting	Rockbridge 2020	01-16 Tue	01-16 Tue	1	100%
Analyze Survey, Focus Group & Secondary Data	Sierra	03-01 Thu	04-17 Tue	33	100%
CHAT Meeting #3- Data and Prioritization	Rockbridge 2020	04-17 Tue	04-17 Tue	1	100%
Final CHA Report	Carilion Clinic	06-01 Fri	07-12 Thu	29	100%
CHAT Strategic Plan	Rockbridge 2020	06-19 Tue	06-19 Tue	1	100%
Create Implementation Strategy	Carilion Clinic / Rockbridge 2020	06-01 Fri	08-01 Wed	43	20%
Communication Plan	Carilion Clinic / Rockbridge 2020	09-03 Mon	11-01 Thu	43	10%

Appendix 3: Community Health Need Prioritization

Community Health Assessment Prioritization

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

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

ROCKBRIDGE AREA COMMUNITY HEALTH SURVEY

ACCESS and BARRIERS TO HEALTHCARE

1. Do you use medical care services? ☐ Yes ☐ No
- *If yes, where do you go for medical care? (Check all that apply)*

☐ Doctor's Office
☐ Augusta Health
☐ Carilion Clinic Family Medicine – Bridgewater
☐ Carilion Clinic Family Medicine - Buena Vista
☐ Carilion Clinic Family Medicine - Lexington
☐ Emergency Room
☐ Free Clinic
☐ Health Department

☐ Pharmacy Clinic
☐ Planned Parenthood
☐ Remote Area Medical Clinic
☐ Rockbridge Area Health Center
☐ Salem VA Medical Center
☐ UVA Health System
☐ Urgent Care / Walk in Clinic
☐ Other: _____

2. Do you use dental care services? ☐ Yes ☐ No
- *If yes, where do you go for dental care? (Check all that apply)*

☐ Dentist's Office
☐ Affordable dentures – Bedford
☐ Carilion Dental Clinic
☐ Commonwealth Dental
☐ Emergency Room

☐ Free Clinic
☐ Kool Smiles
☐ Mission of Mercy Project- Roanoke
☐ Remote Area Medical Clinic
☐ Rockbridge Area Health Center

☐ Salem VA Medical Center
☐ Urgent Care / Walk in Clinic
☐ Other: _____

3. Do you use mental health, alcohol abuse, or drug abuse services? ☐ Yes ☐ No
- *If yes, where do you go for mental health, alcohol abuse, or drug abuse services? (Check all that apply)*

☐ Doctor/Counselor's Office
☐ Catawba Hospital
☐ Community Services Board
☐ Connect

☐ Emergency Room
☐ Mental Health America
☐ Respond
☐ Rockbridge Area Health Center

☐ Salem VA Medical Center
☐ Urgent Care / Walk in Clinic
☐ Western State Hospital
☐ Other: _____

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

☐ 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
☐ Child abuse / neglect
☐ Dental problems
☐ Diabetes
☐ Domestic violence

☐ 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
☐ Lung disease
☐ Mental health problems
☐ Neighborhood safety

☐ 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
☐ Teenage pregnancy
☐ Tobacco use / smoking
☐ Unsafe sex
☐ Other:_____

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

- ❐ 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

- ❐ 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)

- ❐ 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:_____

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

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

- ❐ Don't like accepting government assistance
- ❐ Don't trust doctors / clinics
- ❐ Have no regular source of healthcare
- ❐ High co-pay
- ❐ Lack of evening and weekend services
- ❐ 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 an injury 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").	❐	❐	❐
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?	❐	❐	
Have there been times in the past 12 months when you did not have enough money to pay your rent or mortgage?	❐	❐	❐
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 my church
- ❐ Meals on Wheels
- ❐ Take-out / fast food / restaurant
- ❐ Other: _____

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 <u>one</u>)*

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

10. Have you been told by a doctor that you have… *(Check <u>all</u> that apply)*

- ☐ Asthma
- ☐ Cancer
- ☐ Cerebral palsy
- ☐ COPD / chronic bronchitis / emphysema
- ☐ Depression or anxiety
- ☐ Drug or alcohol problems
- ☐ Heart disease
- ☐ High blood pressure
- ☐ High blood sugar or diabetes
- ☐ High cholesterol
- ☐ HIV / AIDS
- ☐ Mental health problems
- ☐ Obesity / overweight
- ☐ Stroke / cerebrovascular disease
- ☐ I have no health problems
- ☐ Other: _____

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

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

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 <u>one</u>)*

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

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

- ☐ Very connected
- ☐ Somewhat connected
- ☐ Not connected

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

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

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

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

16. Would you say that in general your health is: *(Please check <u>one</u>)*

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

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

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

19. During the past 30 days: *(Check <u>all</u> that apply)*

- ☐ I have had 5 or more alcoholic drinks (if male) or 4 or more alcoholic drinks (if female) during one occasion.
- ☐ I have used tobacco products (cigarettes, smokeless tobacco, e-cigarettes, etc.)
- ☐ I have taken prescription drugs to get high
- ☐ I have used marijuana
- ☐ I have used other illegal drugs (e.g. cocaine, heroin, ecstasy, crack, LSD, etc.)
- ☐ None of these

20. Have you ever used heroin? ☐ Yes   ☐ No

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. _____ **Vehicles**

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

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

23. Which of the following describes your current type of health insurance? (*Check <u>all</u> that apply*)
- ❐ COBRA
- ❐ Dental Insurance
- ❐ Employer Provided Insurance
- ❐ Government (VA, Champus)
- ❐ Health Savings / Spending Account
- ❐ Individual / Private Insurance / Marketplace / Obamacare
- ❐ Medicaid
- ❐ Medicare
- ❐ Medicare Supplement
- ❐ No Dental Insurance
- ❐ No Health Insurance

24. <u>If you have no health insurance</u>, why don't you have insurance? (*Check <u>all</u> that apply*)
- ❐ Not applicable- I have health insurance
- ❐ I don't understand Marketplace / Obamacare options
- ❐ Not available at my job
- ❐ Student
- ❐
- ❐ Too expensive / cost
- ❐ Unemployed / no job
- ❐ Other: _____

25. What is your ZIP code? _____

26. Where do you live?
- ❐ Brownsburg
- ❐ Buena Vista
- ❐ Collierstown
- ❐ Fairfield
- ❐ Glasgow
- ❐ Goshen
- ❐ Kerrs Creek
- ❐ Lexington
- ❐ Lexington/Rockbridge County
- ❐ Natural Bridge
- ❐ Raphine
- ❐ Rockbridge Baths
- ❐ Other: _____

27. What is your street address (optional)? _____

28. What is your age? _____

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

30. What is your height? _____

31. What is your weight? _____

32. How many people live in your home (including yourself)?
Number who are 0 – 17 years of age _____
Number who are 18 – 64 years of age _____
Number who are 65 years of age or older _____

33. What is your highest education level completed?
❐Less than high school ❐ Some high school ❐ High school diploma / GED ❐ Associates ❐ Bachelors ❐ Masters / PhD

34. What is your primary language? ❐ English ❐ Spanish ❐ Other_____

35. What ethnicity do you identify with? (*Check all that apply*)
- ❐ Native Hawaiian / Pacific Islander
- ❐ American Indian / Alaskan Native
- ❐ Asian
- ❐ Latino
- ❐ Black / African American
- ❐ More than one race
- ❐ White
- ❐ Decline to answer ❐ Other:_____

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

37. What is your yearly household income?
- ❐ $0 – $10,000
- ❐ $10,001 to $20,000
- ❐ $20,001 – $30,000
- ❐ $30,001 – $40,000
- ❐ $40,001 – $50,000
- ❐ $50,001 – $60,000
- ❐ $60,001 – $70,000
- ❐ $70,001 – $100,000
- ❐ $100,001 and above

38. What is your current employment status?
❐ Full-time ❐ Part-time ❐ Unemployed ❐ Self-employed ❐ Retired ❐ Homemaker ❐ Student

39. Is there anything else we should know about your (or someone living in your home) health care needs in the Rockbridge Area?
_____
_____
_____

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

Rockbridge 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
https://www.surveymonkey.com/r/2018CHStakeholder

Responses will not be identified, either in written material or verbally, by name or organization. Please return to: Amy Michals, Carilion Community Health & Outreach, 1202 3rd Street S.W., Roanoke, VA 24016. Thank you!

1. Your name, organization, and title:

   NAME:_____

   ORGANIZATION:_____

   TITLE: _____

2. What are the most important issues (needs) that impact health in the Rockbridge 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 Rockbridge Area, what would that be?

_____
_____
_____
_____
_____
_____

Thank you for your input!

Please return to: Amy Michals, Carilion Community Health & Outreach, 1202 3rd Street S.W., Roanoke, VA 24016.

Questions: Please contact Amy Michals at 540-983-4046 or almichals@carilionclinic.org

Appendix 6: Stakeholder Survey and Focus Group Locations

Organization/Group
Rockbridge 2020 (CHAT)

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 https://www.211virginia.org/consumer/index.php. 2-1-1 is a free service available to help callers find appropriate resources in their local area.

Community Resources Listed by Stakeholders

Appalachian Trail, Rockbridge Co.
101 Maury River Drive
Buena Vista, VA 24416
(540) 261-7321
https://www.virginia.org/listings/OutdoorsAndSports/AppalachianTrailRockbridgeCo/

Blue Phoenix Café and Market
110 W Washington St.
Lexington, VA 24450
(540) 461-8306
http://www.bluephoenixcafe.com/

Carilion Clinic Internal Medicine
108 Houston St. Suite A
Lexington, VA 24450
(540) 463-2181
https://www.carilionclinic.org/locations/carilion-clinic-internal-medicine-lexington?utm_source=GMB&utm_campaign=local-listing

Carilion Stonewall Jackson ER
1 Health Circle
Lexington, VA 24450
(540) 458-3300
https://www.carilionclinic.org/locations/carilion-stonewall-jackson-hospital

Chessie Nature Trail
Physical Plant VMI
Lexington, VA 24450
(540) 464-7119
http://www.vmi.edu/about/for-visitors/chessie-trail/about-the-trail/

The Community Table, Rockbridge Area
350 Spotswood Avenue
Lexington, VA 24450
https://www.communitytablerockbridge.org

Cooking Matters Class (CSB)
241 Greenhouse rd.
Lexington, VA 24450
(540) 463-3141
https://www.racsb.org/form__map

Fitness your way Rockbridge
465 E Nelson St.
Lexington, VA 24450
(540) 817-9387
https://fitnessyourwayrockbridge.com/

Jordan's Point Park
Old Mill Race
Lexington, VA 24450
(540) 463-3154
https://lexingtonvirginia.com/directory/attractions/jordans-point-park

Kendal at Lexington
160 Kendal Drive
Lexington, VA 24450
(540) 463-1910
https://kalex.kendal.org/

LEPC- Local Emergency Planning Committee
150 S. Main St.
Lexington, VA 24450
(540) 463-4361
https://www.co.rockbridge.va.us/543/LEPC--
-Local-Emergency-Planning-Committe

Lexington Farmers Market
McCrum's Parking lot, Jefferson St.
Lexington, VA 24450
(540) 463-3777
https://www.virginia.org/listings/Shopping/
LexingtonFarmersMarket/

Lexington Medicaid, Food Stamp and welfare
20 E. Preston St.
Lexington, VA 24450
(540) 463-7143
https://medicaidoffice.us/virginia-medicaid-
offices/lexington-va-medicaid-food-stamp-
and-welfare-office/

Lexington Rx Center
800 S Main St
Lexington, VA 24450
(540) 463-9166
https://www.lexingtonrx.com/contact

Maury Express Transportation
P.O. Box 13825
Roanoke, VA 24037
(540) 343-1721
http://radartransit.org/ridership-
information/maury-express/

(VPAS) Meals on wheels, Maury River Senior
Center
2137 Magnolia Ave.
Buena Vista, VA 24416
(540) 261-7474
https://www.vpas.info/MRSC

Mohawk Industries Inc.
404 Anderson St.
Glasgow, VA 24555
(540) 258-2811
http://mohawkind.com/

Natural Bridge
6477 S. Lee Hwy
Natural Bridge, VA 24578
(540) 258-2811
http://www.dcr.virginia.gov/state-
parks/natural-bridge#general_information

Pro Careers, Inc.
393 East 29th St.
Buena Vista, VA 24416-1292
(800) 992-0566
http://procareersinc.com/Contact_Us.html

Rockbridge 20/20
8 East Nelson St. Suite 101
Lextington, VA 24450
(540) 463-5375
http://rockbridge2020.org/about-us

Rockbridge Area Community Services
241 Greenhouse Rd.
Lexington, VA 24450
(540) 463-3141
https://www.racsb.org/form__map

Rockbridge Area Health Center (FQHC):
Dentistry, Transportation, Live Healthy etc.
25 Northridge Ln.
Lexington, VA 24450-3399
(540) 464-8700
http://rockahc.org/

Rockbridge Area Relief Association
350 Spotswood Dr.
Lexington, VA 24450
(540) 463-6642
http://raralex.org/

Rockbridge Regional Central Library
138 S. Main St.
Lexington, VA 24450
(540) 463-4324
http://www.rrlib.net/

Rockbridge Area YMCA
790 North Lee Highway
Lexington, VA 24450
(540) 464-9622
http://ymcavbr.org/locations/rockbridge/rockbridge-area-ymca/

Virginia Horse Center
487 Maury River Rd.
Lexington, VA 24450
(540) 464-2950
https://vahorsecenter.org/

Virginia Tech Campus Kitchen
Dining Hall, Wallace Hall
No physical location
https://campuskitchens.org/

AIM 1: Healthy, Connected Communities

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

Geography	2013	2014	2015
Virginia	72%	72%	72%
Rockbridge County	65%	65%	66%
Buena Vista City	61%	60%	60%
Lexington City	--	--	--

Virginia Department of Education, Postsecondary Enrollment Reports
https://p1pe.doe.virginia.gov/postsec_public/postsec.do?dowhat=LOAD_REPORT_C11

Cost-burdened renters and homeowners, 2015

Geography	Renters	Homeowners
Roanoke Metro Area	41.5%	19.9%
Staunton-Waynesboro Metro Area	45.4%	23.5%

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 *low to very low* Consumer Opportunity Scores	Residents living in census tracts with *high to very high* Consumer Opportunity Scores
Rockbridge County	18%	28%
Buena Vista City	100%	0%
Lexington City	100%	0%

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 *low to very low* Economic Opportunity Scores	Residents living in census tracts with *high to very high* Economic Opportunity Scores
Rockbridge County	82%	0%
Buena Vista City	0%	100%
Lexington City	100%	0%

Virginia Department of Health, Virginia Health Opportunity Index (2018)
https://www.vdh.virginia.gov/omhhe/hoi/consumer-opportunity-profile

Health Planning Districts with established on-going collaborative community health planning process

Geography	2015	2016
Virginia	43.0%	82.8%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

AIM 2: Strong Start for Children

Teen pregnancy rate, by race, 2015

Geography	Teen pregnancies per 1,000 females ages 10-19			
	Total	White	Black	Other
Virginia	12.0	8.9	17.5	21.4
Rockbridge County	8.9	8.6	16.7	--
Buena Vista City	8.1	9.0	--	--
Lexington City	9.0	10.5	--	--

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

Fall PALS-K scores that were below kindergarten readiness levels

Geography	2015-2016	2016-2017	2017-2018
Virginia	13.8%	14.6%	16.0%
Rockbridge County	10.6%	21.0%	16.0%
Buena Vista City	6.3%	12.0%	8.0%
Lexington City	10.9%	13.0%	2.0%

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 Reading Assessment pass rate

Geography	2014-2015	2015-2016	2016-2017
Rockbridge County	79.4%	69.9%	74.3%
Buena Vista City	55.9%	55.2%	72.3%
Lexington City	86.3%	90.0%	84.3%

Virginia Department of Education, Test Data
http://www.doe.virginia.gov/statistics_reports/research_data/index.shtml

Infant mortality rate, by race, 2015

Geography	Infant deaths / 1,000 live births			
	Total	White	Black	Other
Virginia	5.9	4.7	11.3	3.5
Rockbridge County	6.7	7.2	--	--
Buena Vista City	12.0	12.5	--	--
Lexington City	--	--	--	--

Virginia Department of Health, Statistical Reports and Tables
http://www.vdh.virginia.gov/HealthStats/stats.htm

AIM 3: Preventive Actions

No leisure time physical activity

Geography	2012	2013	2014
Virginia	22%	21%	22%
Rockbridge County	28%	27%	24%
Buena Vista City	24%	22%	23%
Lexington City	23%	20%	21%

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

Overweight or obese

Geography	2012	2013	2014
Virginia	63.6%	64.0%	64.7%
Northwestern Region	66.7%	63.5%	64.8%
Southwestern Region	66.4%	67.7%	67.8%
Central Shenandoah Health District	68.2%	64.9%	67.1%

Virginia Department of Health, Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/brfss/data/

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

Census Tract	Population	Low access to a supermarket or large grocery store		Total population that is low-income and has low access to a supermarket or large grocery store	
		#	%	#	%
Buena Vista Census Tract 306	6,650	6,499	97.7%	3,735	56.2%
Lexington Census Tract 305	7,042	576	8.2%	112	1.6%
Rockbridge Census Tract 301	7,348	5,861	79.8%	1,956	26.6%
Rockbridge Census Tract 302	4,580	4,378	95.6%	1,606	35.1%
Rockbridge Census Tract 303	6,434	6,265	97.4%	1,838	28.6%
Rockbridge Census Tract 304	3,945	3,823	96.9%	1,258	31.9%

USDA Food Access Research Atlas
https://www.ers.usda.gov/data-products/food-access-research-atlas/download-the-data/

Low income and low access to store

Geography	2010	2015
Rockbridge County	6.4%	5.4%
Buena Vista City	40.6%	52.7%
Lexington City	0.1%	1.2%

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

Adult smoking

Geography	2014	2015	2016
Virginia	20%	17%	15%
Rockbridge County	17%	16%	16%
Buena Vista City	22%	21%	22%
Lexington City	20%	19%	17%

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

Flu vaccination, 2014

Geography	
Virginia	43.5%
Rockbridge County	43.6%
Buena Vista City	41.9%
Lexington City	53.9%

Virginia Department of Health
Behavioral Risk Factor Surveillance System, Small Area Estimation
http://www.vdh.virginia.gov/data/health-behavior/

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

Geography	Girls		Boys	
	2014	2015	2014	2015
Virginia	35.9%	38.5%	22.5%	25.7%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

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	21.0%	25.0%	28.0%
Northwestern Region	21.2%	28.7%	29.2%
Southwestern Region	29.6%	30.0%	32.8%
Central Shenandoah Health District	22.5%	30.8%	26.7%

Virginia Department of Health, Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/brfss/data/

Average years of disability-free life expectancy

Geography	2013	2014
Virginia	66.1	66.0

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Adults with a regular healthcare provider, 2014

Geography	
Virginia	69.3%
Rockbridge County	84.2%
Buena Vista City	83.7%
Lexington City	83.7%

Virginia Department of Health
Behavioral Risk Factor Surveillance System, Small Area Estimation
http://www.vdh.virginia.gov/data/health-behavior/

Avoidable hospital stays for ambulatory care sensitive conditions per 100,000 persons

Geography	2013
Virginia	1294

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Avoidable deaths from heart disease, stroke, or hypertensive disease per 100,000 persons

Geography	2013	2014
Virginia	49.9	49.1

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Mental health and substance use disorder hospitalizations per 100,000 adults

Geography	2013
Virginia	668.5

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

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%
Central Shenandoah Health District	37.4%

Virginia Department of Health
Behavioral Risk Factor Surveillance System
http://www.vdh.virginia.gov/brfss/data/

Electronic health records, Virginia

Geography	2014	2015	2016
Health care providers who have implemented a certified electronic health record	70.6%	73.4%	--
Entities connected through Connect Virginia HIE Inc., and the Electronic Health Information Exchange, and the National e-Health Exchange	--	3,800	4,832
Local Health Districts that have electronic health records and connect to community providers through Connect Virginia	--	0	0

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Hospitals that meet the state goal for prevention of hospital-onset *C diff* infections

Geography	2013	2015
Virginia	38.5%	43.2%

Virginia Department of Health, Virginia Plan for Well-Being
https://virginiawellbeing.com/measures/

Appendix 9: Maury River Middle School Health Survey Data

Maury River Middle School Health Survey Demographics

Students from a Maury River Middle School health class helped to collect Community Health Survey data for the 2018 RACHA by taking an abbreviated version of the CHS home with a goal of returning at least three surveys each, completed by adults over the age of 18. The students then, as a class, compiled the data below and reviewed the results.

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

	#	%
Employer Provided Insurance	101	59.8%
No Health Insurance	20	11.8%
Medicare	17	10.1%
No Dental Insurance	14	8.3%
Individual / Private Insurance	13	7.7%
Medicare Supplement	13	7.7%
Medicaid	12	7.1%
Marketplace /Obamacare	9	5.3%
Government (VA, Champus)	7	4.1%
Savings / Spending Account	4	2.4%
# respondents	169	

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

	#	%
Not applicable	112	75.7%
I have health insurance	14	9.5%
Too expensive / cost	14	9.5%
Not available at my job	8	5.4%
Unemployed / no job	4	2.7%
I don't understand Marketplace / Obamacare options	1	0.7%
Other	3	2.0%
# respondents	148	

What is your age?

Average:	43.7

What is your gender?

	#	%
Female	131	75.7%
Male	42	24.3%
# respondents	173	

Height, in inches:

Median:	65.0

Weight, in pounds:

Median:	176.0

What is your highest education level completed?

	#	%
Less than high school	6	3.5%
Some high school	8	4.7%
High school diploma	83	48.8%
Associates	18	10.6%
Bachelors	32	18.8%
Masters / PhD	23	13.5%
# respondents	170	

What is your primary language?

	#	%
English	168	98.8%
Spanish	1	0.6%
Other	1	0.6%
# respondents	170	

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

	#	%
White	154	91.7%
More than one race	4	2.4%
Black/African American	3	1.8%
Latino	3	1.8%
Decline to answer	2	1.2%
American Indian	1	0.6%
Asian	1	0.6%
# respondents	168	

What is your marital status?

	#	%
Married	119	70.8%
Single	22	13.1%
Divorced	19	11.3%
Domestic Partnership	4	2.4%
Widowed	4	2.4%
# respondents	168	

What is your current employment status?

	#	%
Full-time	92	54.4%
Homemaker	21	12.4%
Retired	19	11.2%
Self-Employed	16	9.5%
Part-time	12	7.1%
Unemployed	10	5.9%
Student	5	3.0%
# respondents	169	

Maury River Middle School Health Survey Responses

1. **If you use medical care services, where do you go for medical care? (Check all that apply)**

	#	%
Doctor's Office	155	90.6%
Urgent Care / Walk in Clinic	110	64.3%
Emergency Room	75	43.9%
Other	11	6.4%
# respondents	171	

2. **If you use dental care services, how often do you use them?**

	#	%
Every 6 months	105	61.8%
Once a year	31	18.2%
When a problem occurs	44	25.9%
# respondents	170	

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

	#	%
Alcohol and illegal drug use	110	62.5%
Overweight/obesity	79	44.9%
Cancers	72	40.9%
Tobacco use/smoking	56	31.8%
Diabetes	49	27.8%
Cell phone use/texting and driving	46	26.1%
High Blood Pressure	43	24.4%
Stress	42	23.9%
Prescription drug use	40	22.7%
Lack of exercise	40	22.7%
Poor Eating habits	32	18.2%
Bullying	31	17.6%
Access to healthy foods	29	16.5%
Mental health problems	27	15.3%
Child abuse/neglect	23	13.1%
Heart disease and stroke	21	11.9%
A Teenage Pregnancy	18	10.2%
Accidents in the home	15	8.5%
Domestic violence	12	6.8%
Aging problems	9	5.1%
Not using seat belts/child safety seats	6	3.4%
Dental Problems	5	2.8%
Sexual Assault	5	2.8%
Suicide	5	2.8%
Not getting shots to prevent disease	4	2.3%
Environmental health	3	1.7%
Others	3	1.7%
HIV/AIDS	2	1.1%
Lung Disease	2	1.1%
Infant Death	1	0.6%
Gang activity	1	0.6%
Neighborhood safety	1	0.6%
# respondents	176	

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

	#	%
Specialty care	84	50.0%
Mental health / counseling	42	25.0%
Women's health services	40	23.8%
Alternative therapy	37	22.0%
Dermatology	37	22.0%
Substance abuse services	34	20.2%
Child dental care	29	17.3%
Programs to stop using tobacco products	27	16.1%
None	25	14.9%
Family doctor	22	13.1%
Adult dental care	17	10.1%
Emergency room care	15	8.9%
Xrays/mammograms	14	8.3%
Domestic violence services	12	7.1%
Preventive care	8	4.8%
Family planning / birth control	8	4.8%
Ambulance services	8	4.8%
Chiropractic care	8	4.8%
Urgent care / walk in clinic	8	4.8%
Eldercare	6	3.6%
Physical therapy	6	3.6%
Inpatient hospital	6	3.6%
End of life / hospice	6	3.6%
Vision care	6	3.6%
Immunizations	5	3.0%
Lab work, medication, medical supplies	3	1.8%
Cancer care	1	0.6%
Other	10	6.0%
# respondents	168	

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

	#	%
Cost	69	41.6%
Long wait for appointments	49	29.5%
I can get the healthcare I need	45	27.1%
Lack of evening and weekend services	38	22.9%
Location of offices	25	15.1%
No health insurance	25	15.1%
High co-pay	24	14.5%
Can't find providers that accept my Medicaid insurance	10	6.0%
Don't trust doctors / clinic	9	5.4%
No transportation	5	3.0%
Afraid to have checkups	4	2.4%
Have no regular source of healthcare	4	2.4%
Childcare	3	1.8%
Don't know what types of services are available	3	1.8%
Don't like accepting government assistance	2	1.2%
Language services	0	0.0%
Other	11	6.6%
# respondents	166	

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

	Yes	No	Not applicable	# respondents
I have had an eye exam within the past 12 months.	43.2%	45.3%	11.5%	139
I have had a mental health / substance abuse visit within the past 12 months.	28.9%	54.3%	16.8%	173
I have had a dental exam within the past 12 months.	65.9%	31.8%	2.3%	173
I have been to the emergency room in the past 12 months.	21.1%	73.9%	5.0%	161
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.).	10.5%	84.8%	4.7%	171
My doctor has told me that I have a long-term or chronic illness.	29.0%	51.5%	19.5%	169
I take the medicine my doctor tells me to take to control my chronic illness.	35.9%	25.7%	38.3%	167
I can afford medicine needed for my health conditions.	54.3%	13.4%	32.3%	164
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).	47.9%	16.0%	36.1%	169
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).	31.2%	22.9%	45.9%	170
I am over 50 years of age and have had a colonoscopy in the past 10 years (if under 50, please check not applicable).	31.4%	17.8%	50.9%	169
Does your neighborhood support physical activity? (e.g. parks, sidewalks, bike lanes, etc.)	44.8%	44.3%	10.9%	174
In the area that you live, is it easy to get affordable fresh fruits and vegetables?	72.3%	27.1%	0.6%	166
Do you feel safe in your neighborhood?	93.0%	5.8%	1.2%	171

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

	#	%
Grocery store	169	96.6%
Take-out/fast food/restaurant	88	50.3%
Home garden	64	36.6%
Farmers' market	53	30.3%
Dollar store	27	15.4%
I regularly receive food from family, friends, neighbors, or my church	24	13.7%
Corner store/convenience store/gas station	22	12.6%
Community garden	2	1.1%
I do not eat at home	2	1.1%
Meals on Wheels	0	0.0%
# respondents	175	

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

	#	%
I did not eat fruits or vegetables during the past 7 days	3	1.8%
1 – 3 times during the past 7 days	41	24.3%
4 – 6 times during the past 7 days	45	26.6%
1 time per day	28	16.6%
2 times per day	40	23.7%
4 or more times per day	12	7.1%
# respondents	169	

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

	#	%
I have no health problems	60	39.0%
High blood pressure	36	23.4%
Obesity/overweight	30	19.5%
Depression or anxiety Drug	28	18.2%
Asthma	21	13.6%
High cholesterol	18	11.7%
High blood sugar or diabetes	13	8.4%
Heart disease	6	3.9%
Cancer	5	3.2%
Mental health problems	5	3.2%
Stroke/cerebrovascular disease	2	1.3%
COPD/chronic bronchitis/emphysema	2	1.3%
Alcohol problems	1	0.6%
Cerebral Palsy	0	0.0%
HIV/AIDS	0	0.0%
Other	16	10.4%
# respondents	154	

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

	#	%
Within the past year (1 to 12 months ago)	112	70.4%
Within the past 2 years (1 to 2 years ago)	21	13.2%
Within the past 5 years (2 to 5 years ago)	9	5.7%
5 or more years ago	17	10.7%
# respondents	159	

11. 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)	131	76.2%
Within the past 2 years (1 to 2 years ago)	11	6.4%
Within the past 5 years (2 to 5 years ago)	12	7.0%
5 or more years ago	18	10.5%
# respondents	172	

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

	#	%
Very connected	48	27.6%
Somewhat connected	100	57.5%
Not connected	26	14.9%
# respondents	502	

13. 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	18	10.5%
1 day	19	11.0%
2 days	24	14.0%
3 days	32	18.6%
4 days	16	9.3%
5 days	27	15.7%
6 days	7	4.1%
7 days	29	16.9%
# respondents	172	

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

	#	%
Never	2	1.2%
1-2 times	21	12.2%
3-4 times	34	19.8%
5-6 times	39	22.7%
7 times	20	11.6%
More than 7 times	53	30.8%
Not applicable / I live alone	3	1.7%
# respondents	172	

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

	#	%
Excellent	20	11.8%
Very good	23	13.5%
Good	101	59.4%
Fair	23	13.5%
Poor	3	1.8%
# respondents	170	

16. 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:	0.0

17. 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:	0.0

18. 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:	2.8

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

	#	%
Not applicable	124	86.7%
I drive Bike or walk	8	5.6%
Friends / family drive me	7	4.9%
Taxi	1	0.7%
RADAR / CORTRAN	0	0.0%
Other	7	4.9%
# respondents	143	