



Healthier Tomorrows

EXECUTIVE SUMMARY of the
2019 COMMUNITY HEALTH NEEDS ASSESSMENT
and 2020-2022 IMPLEMENTATION STRATEGY



Our Mission, Vision, and Values



Our Mission

Serving Our
Community by
Improving Health.



Our Vision

Inspire hope and promote health as the
community's first – and best – choice
for high quality, safe and affordable care



Our Values

Integrity
Compassion
Collaboration
Courage
Innovation
Excellence
Integrity

2018 Key Stats at a Glance: Page Memorial Hospital



Emergency
Room Visits
11,470



Hospital Based
Outpatient Encounters
30,087



Total
Discharges



Financial Assistance
& Means-Tested
Programs
\$3,405,370



Total Outpatient
Laboratory Tests
& Imaging Exams
71,782

2019 Community Health Needs Assessment Summary

Introduction and Background

Every three years, Page Memorial Hospital conducts a collaborative community health needs assessment (CHNA) to meet IRS regulatory requirements and to identify and prioritize the health needs of the residents, particularly those who experience health inequities.

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

Methodology Summary

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

Input from 56 groups/individuals was received through key informant interviews. Interviews and community response sessions included (a) individuals with special knowledge of, or expertise in, public health, (b) representatives from local and state health agencies with current data and information about the health needs of the community, and (c) leaders representing medically underserved, low-income, minority populations, and populations with chronic diseases. Feedback from community response sessions helped validate findings and prioritize identified health needs.

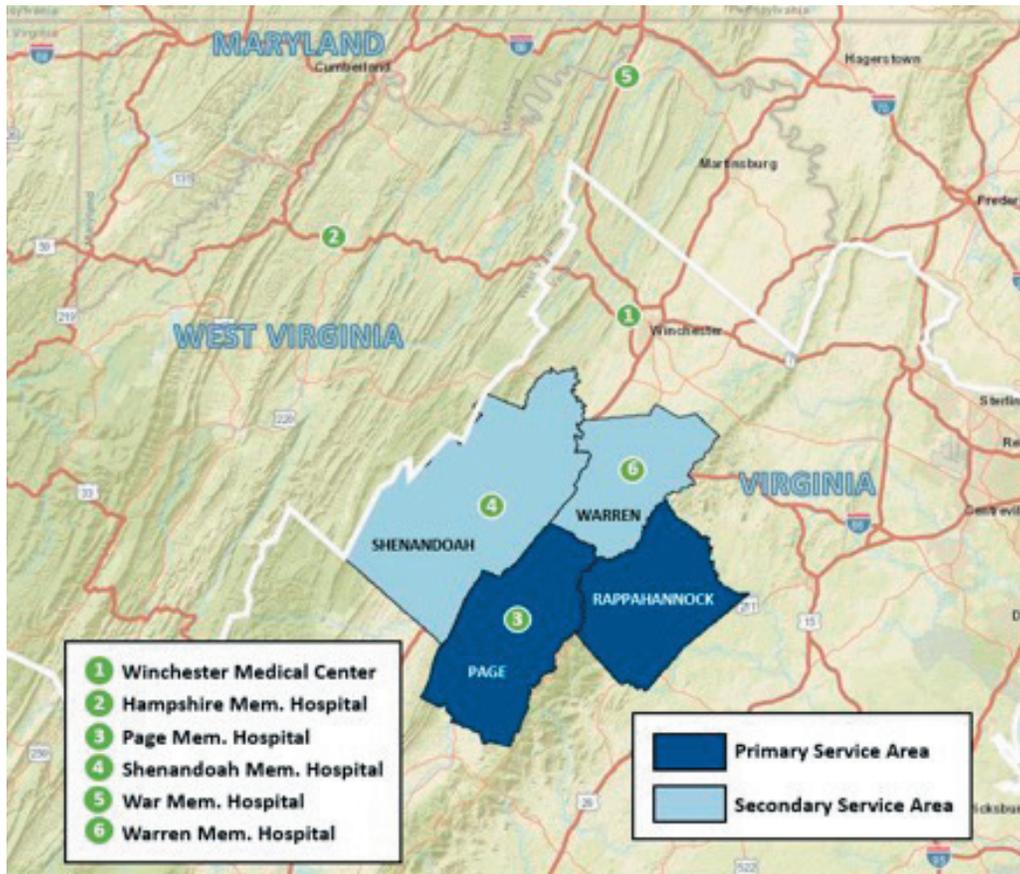
A community health survey was administered between January 2, 2019 and March 31, 2019. The survey was translated into Spanish. A total of 2,429 completed surveys from across the region were received. Among those, 108 surveys were received from the Hispanic community. Valley Health applied a ranking methodology to prioritize the community health needs identified, incorporating both quantitative and qualitative data throughout. Scores for the severity and scope of identified health needs were assigned and calculated using weighted averages taking into account multiple data sources. Major themes discussed in the community response sessions were compared to the scored health issues to aid in identifying the prioritized list of health needs.

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

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

Highlights of the Community Served

Page Memorial Hospital is located in Luray, Virginia. The hospital's primary service area includes Page and Rappahannock counties, while Shenandoah and Warren counties comprise the hospital's secondary service area.



Source: ESRI 2019, Created by Planning and Business Development

Page Memorial Hospital is located in Luray, Virginia. The hospital's primary service area includes Page and Rappahannock counties, while Shenandoah and Warren counties comprise the secondary service area. In 2019, the PMH community was estimated to have a population of 115,149 people. Approximately 27.6% of the population resided in the primary service area. Overall, the population in the Page County community is expected to decline by .30% between 2018 and 2023. Page County reported a 2017 poverty rate of 17%, above the Virginia average of 11.2%. In 2018, 22.3% of households had an average income under \$25,000. The 2017 unemployment rate for Page County was 5.3% while in Warren County it was 3.7%, both higher than the Virginia average which was 3.0%.

Summary of Findings

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

Prioritized list of health needs identified by CHNA:

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

Health Need #1: Behavioral and Health Status Factors

Physical Activity, Obesity, and Other Chronic Diseases



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

Health Need #2: Access to Primary, Preventive and Specialty Care

Primary, Specialty and Dental Care



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

Health Need #3: Social & Economic Factors

Poverty, Housing & Homelessness, Low Income Families



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

Health Need #4: Health Outcomes

Length of Life & Quality of Life



Health Outcomes represent how healthy a county is right now. They reflect the physical and mental well-being of residents within a community through measures representing both length of life and the quality of life. Length of Life measures how long people within a community live and whether the people are considered to be dying too early. Quality of Life refers to how healthy people feel while alive. It represents the well-being of a community, and reflects the importance of physical, mental, social and emotional health from birth to adulthood.

Health Need #5: Mental Health and Substance Abuse

Smoking, Alcohol and Drug Abuse, and Mental Health Services



Mental Health

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

Substance Abuse

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



Health Need #6: Maternal and Child Health

Teen Births, Infant Mortality, No Prenatal Care in 1st Trimester



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

2020-2022 Implementation Strategies: Significant Health Needs the Hospital Will Address

The implementation strategy describes how Page Memorial Hospital (PMH) plans to address significant health needs identified in the 2019 Community Health Needs Assessment. To achieve maximum impact, PMH chooses to identify three health needs for its primary of focus and will support other agencies in taking a lead role in addressing the remaining health needs.

Prioritized Health Need #1: Behavioral and Health Status Factors

Physical Activity, Obesity and Chronic Disease

The hospital intends to address physical activity, obesity and chronic disease by taking the following actions:

- Initiate the Fit4Kidz program at the Valley Health Wellness & Fitness |Luray. Fit4Kidz is a comprehensive program designed to introduce children ages 6 to 13 to healthy lifestyle options with which they might not otherwise be familiar.
- Expand the Chronic Care Management Program enrollment to 20% of eligible Medicare beneficiaries in clinics.
- Expand enrollment in the Diabetes Management Program [DMP].
- Launch the Transition Program at Valley Health Wellness & Fitness |Luray – a medically integrated program for individuals with chronic disease.
- Launch the Diabetes Prevention Program [DPP]. The DPP is a twelve-month lifestyle change program, recognized by the Centers for Disease Control and Prevention, which can help individuals who are at risk make lasting, lifestyle changes.

Anticipated Impact and Plan to Evaluate:

Through implementing the above strategies, Page Memorial Hospital anticipates the following impacts:

- Increased knowledge contributing to improved health behaviors among both youth and adults
- Increased self-efficacy surrounding healthy habits and healthy choices
- Increased utilization in both the chronic care and diabetes management programs resulting in improved disease control and positive outcomes for those in the population with chronic conditions—either preventing or delaying possible complications related to those conditions

Prioritized Health Need #2: Access to Primary, Preventive and Specialty Care

Primary, Specialty, Dental Care and Home Health

The hospital intends to address access to primary, specialty and dental health care by taking the following actions:

- Continue financial support of the Page Free Clinic for both primary and dental care.
- Expand the existing Page Memorial Hospital Transportation Program
- Implement *time to service* for the third next available appointment for both primary care & specialty care areas.
- Continue efforts to assist and enroll individuals in Medicaid, ensuring that eligible patients are directed to appropriate resources for coverage

Anticipated Impact and Plan to Evaluate:

Through implementing the above strategies, Page Memorial Hospital anticipates the following impacts:

- Increased access to care through greater community awareness of available health care resources

- Improved care coordination among and referrals to appropriate care providers, including the Free Clinic
- Improved access to health care appointments and reduced no show rates by providing reliable, consistent and affordable transportation options

Prioritized Health Need #3: Mental Health and Substance Abuse

Smoking, Alcohol, and Drug Abuse and Mental Health Services

The hospital intends to address mental and behavioral health by taking the following actions:

- Recruit a Peer Recovery Specialist for work in the Page Memorial Hospital Emergency Department.
- Support launch of and sustainability of the Crisis Intervention Team Assessment Center [CITAC].
- Continue support of the Counseling & Psychological Services Program [CAPS] in partnership with James Madison University.
- Continue and enhance both financial and in-kind support for the Page Alliance for Community Action [PACA], with a focus on anti-vaping education within the schools.
- Support and participate on the Opioid Planning Grant with the Warren Coalition.

Anticipated Impact and Plan to Evaluate:

Through implementing the above strategies, Page Memorial Hospital anticipates the following impacts:

- Increased access to crisis evaluation and intervention services
- Expanded supportive services for people with mental illness
- Increased awareness and understanding of youth about the dangers of vaping
- Increased access to case management services for vulnerable populations entering the PMH Emergency Department
- Identification of gaps in mental health services and the mobilization of leaders who can address the opioid crisis

Needs the Hospital Will Not Directly Address

No hospital can address all of the health needs present in its community. Page Memorial Hospital is committed to serving the community by adhering to its mission, using its skills and capabilities, and remaining a strong organization so that it can continue to provide a range of important health care services and community benefits.

This implementation strategy does not include specific plans to address **Social & Economic Factors** (poverty, housing & homelessness, low income families), **Health Outcomes** (length and quality of life), or **Maternal and Child Health** (teen births, infant mortality, no prenatal care in first trimester), all of which were needs mentioned during the 2019 Community Health Needs Assessment.

In some instances, Page Memorial Hospital is not ideally suited to be the lead organization in addressing these items and is directing its limited resources to other identified community health needs. In some cases, the needs fall under other categories and are therefore already being addressed in this plan.

Nonetheless, while Page Memorial Hospital does not intend to be the lead organization in all areas, we will continue to partner with agencies that are more closely aligned and suited to have an impact on these issues. Such organizations include, but are not limited to, the Northern Shenandoah Valley Housing Coalition, Dental Clinic of Northern Shenandoah Valley, Page Alliance for Community Action, Page Free Clinic, St. Luke Free Clinic, and Shenandoah Community Clinic.

Conclusion

Page Memorial Hospital and the CHNA Steering Committee are proud of their collaborative relationship with local community organizations and are committed by “Serving our Community by Improving Health”. The 2019 CHNA report and implementation strategy will be made available to the broader community and is intended to be a useful resource to both residents and health care providers.

The CHNA report and implementation strategy was adopted by the Valley Health Board of Trustees on December 10, 2019.

For more information or a copy of the complete Community Health Needs Assessment, please visit www.valleyhealthlink.com/chnareports.



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