Healthier Tomorrows

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



Overview of Warren Memorial Hospital and Valley Health

Valley Health began its journey to bring better quality health to local communities in 1994. When Winchester Medical Center and Warren Memorial Hospital collaborated, a vision to better serve the region was realized. That vision was to bring communities together with better quality health care and to meet their unique needs by providing access to the latest advancements, technology, and developments in medical services. With hospitals and medical facilities in West Virginia and the Top of Virginia region, Valley Health is a community partner. Based in Winchester, Virginia, Valley Health is composed of six core hospitals: Hampshire Memorial Hospital, Page Memorial Hospital, Shenandoah Memorial Hospital, War Memorial Hospital, Warren Memorial Hospital and Winchester Medical Center. Valley Health brings together 604 licensed inpatient beds, 166 long-term care beds, 6,000 employees, and a medical staff exceeding 600 professionals.

Valley Health does much more than simply care for individuals within our hospitals. Valley Health contributes to health education, prevention, and accessible healthcare for those with limited resources. We inspire hope and promote health as the community's first – and best – choice for high quality, safe, and affordable care. Our focus always remains on patients first, rooted in our commitment to maintain compassion, integrity, collaboration, courage, innovation and excellence.

Warren Memorial Hospital first opened its doors in 1951 and the first to affiliate with Valley Health System (formerly known as Winchester Regional Health Systems) in 1993. Today Warren Memorial Hospital will open a new, replacement facility in early 2021. The new hospital campus will occupy about 28 acres and is designed to offer a modern and efficient environment of care, with flexibility to meet patient, provider and community needs into the future. Consistent with industry trends, the hospital will have 36 private inpatient rooms, 18 emergency department rooms, six observation rooms, three operating rooms, two endosco-py/procedure rooms and a cardiac catheterization lab. Green space and walking trails will encourage staff, patients and visitors to stay active and enjoy the outdoors. This modern campus will deliver greater convenience and efficiency, as well as staff, patient and community pride in an uplifting environment of care while meeting the needs of the community.



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: Warren Memorial Hospital



Room Visits **23,277**



Hospital Based Outpatient Encounters 66,918



Total Discharges



Financial Assistance & Means-Tested Programs \$6,039,502



Total Outpatient Laboratory Tests & Imaging Exams 171,994

2019 Community Health Needs Assessment Summary

Introduction and Background

Every three years, Warren 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 Warren Memorial Hospital (WMH 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.

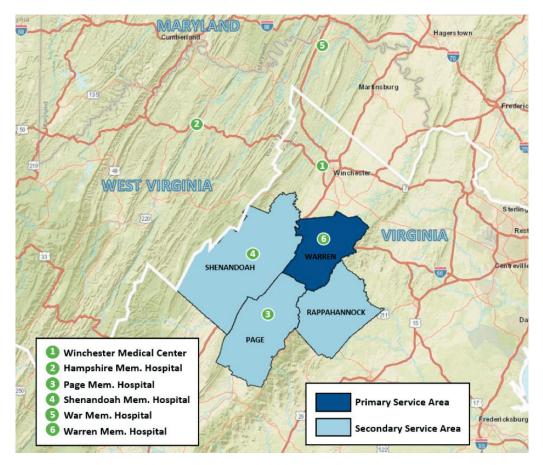
A community health survey was administered between January 2, 2019 and March 31, 2019. The survey was translated into Spanish. A total of 2,429 completed surveys from across the region were received. Among those, 108 surveys were received from the Hispanic community. Valley Health applied a ranking methodology 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

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



Source: ESRI 2019, Created by Planning and Business Development

In 2018, this community was estimated to have a population of 115,149 people. Approximately 34 percent of the population resided in Warren County. Overall, the population in Warren County is expected to increase by 2.9 percent between 2018 and 2023. Warren County reported a 2017 poverty rate of 9.8%, below the Virginia average of 11.2 percent. In 2018, 18% of house-holds in Warren County had an average income under \$25,000. The 2017 unemployment rate for Warren County was 3.7%, while in Rappahannock and Shenandoah counties it was 3.5% and in Page County 5.3%, all higher than the Virginia average, which was 3.0 percent.

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

Health Need #1: Access to Primary, Preventive and Specialty Care

Primary, Specialty and Dental Care



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: Behavioral and Health Status Factors Physical Activity, Obesity, and Other Chronic Diseases



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 represents 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 CHNA implementation strategy describes how Warren Memorial Hospital (WMH) plans to address the significant community health needs identified in the 2019 Community Health Needs Assessment (CHNA). To achieve maximum impact, WMH 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 access to primary, specialty and dental health care by taking the following actions:

- Expand Rural Health Clinics from two to five.
- Continue provider recruitment for primary care physicians and specialty care including orthopedics, physical therapy and occupational therapy.
- Evaluate the expansion of an infusion clinic.
- Continue and enhance support for St. Luke Community Clinic for both primary and dental care.
- Collaborate with the County and other agencies on transportation initiatives; explore internal options for transportation.
- Continue efforts to enroll and assist individuals eligible for Medicaid, ensuring eligible patients are directed to appropriate resources for coverage.
- Explore more robust telehealth consultation services for both primary care physicians connecting with specialties as well as services for patients.

Anticipated Impact and Plan to Evaluate:

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

- Increased access to care through greater community awareness of available health care resources.
- A lowered likelihood of delaying care and as a result improved self-care, particularly preventive screenings.
- Improved care coordination among and referrals to appropriate care providers, including the Community Clinic.
- Improved access to health care appointments and reduced no show rates by providing support for multiple transportation options, while also making transportation options affordable and consistent.
- The development of place-based solutions by bringing healthcare resources where they are needed, regardless of geographic location.

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

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

• Launch an education initiative with primary care physicians to improve the utilization and build capacity of the existing Diabetes Management Program [DMP].

- Explore possible partnerships with the local Parks and Recreation Department for enhanced youth programs, particularly those focused on exercise and healthy lifestyles.
- Launch the Transition Program a medically integrated program for individuals with chronic disease at Valley Health Wellness & Fitness | Front Royal (located in the WMH Outpatient Center).
- Expand the Chronic Care Management Program enrollment to 20% of eligible Medicare beneficiaries in clinics.

Anticipated Impact and Plan to Evaluate:

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

- Increased knowledge contributing to improved health behaviors among youth and adults.
- Increased self-efficacy surrounding healthy habits and healthy choices.
- Individuals will learn prevention strategies while exercising safely and improving overall health status.
- Increased utilization and enrollment in the chronic care management program and diabetes management program resulting in improved disease control and positive outcomes for those in the population with diabetes or other chronic conditions—either preventing or delaying possible complications related to these conditions.

Prioritized Health Need #3: Mental Health and Substance Abuse Smoking, Alcohol, and Drug Abuse and Mental Health Services

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

- Support the launch of and sustainability of the Crisis Intervention Team Assessment Center [CITAC]. CITAC is a licensed center designed to evaluate individuals in police custody to determine if involuntary commitment is needed for mental health treatment.
- Support and participate on the Opioid Planning Grant with the Warren Coalition.
- Explore options for more robust telehealth consultations services, specifically outpatient counseling services for patients.
- Expand and increase the number of Screening, Brief Intervention, and Referral to Treatment [SBIRT] referrals to counseling SBIRT is a local, confidential, evidence based approach to connect at risk patients with community resources.
- Launch an anti-vaping initiative focusing on schools, community events, community fairs and the medical community.

Anticipated Impact and Plan to Evaluate:

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

- Support the launch of and sustainability of the Crisis Intervention Team Assessment Center [CITAC]. CITAC is a licensed center designed to evaluate individuals in police custody to determine if involuntary commitment is needed for mental health treatment.
- Support and participate on the Opioid Planning Grant with the Warren Coalition.
- Explore options for more robust telehealth consultations services, specifically outpatient counseling services for patients.
- Expand and increase the number of Screening, Brief Intervention, and Referral to Treatment [SBIRT] referrals to counseling SBIRT is a local, confidential, evidence based approach to connect at risk patients with community resources.
- Launch an anti-vaping initiative focusing on schools, community events, community fairs and the medical community.

Needs the Hospital Will Not Directly Address

No hospital can address all of the health needs present in its community. Warren 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, Warren 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 Warren 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 Free Clinic, St. Luke Free Clinic, and Shenandoah Community Clinic.

Conclusion

Warren 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.



1000 Shenandoah Avenue • Front Royal, VA 22630 540-636-0300 www.valleyhealthlink.com/wmh