

2014
Community Health Needs Assessment of
the Twin Counties: Carroll and Grayson
Counties and Galax City, Virginia
Together, Making Our Community Healthier



Copies of this document may be obtained at Twin County Regional Healthcare 200 Hospital Drive,
Galax, VA 24333 or by phone (276) 236-8181 or via the hospital website www.tcrh.org

Perspective—Together, Making Our Community Healthier

The Community Health Needs Assessment (CHNA) defines opportunities for health improvement, creates a collaborative community environment to engage multiple change agents, and an open and transparent process to listen and truly understand the health needs of Carroll and Grayson Counties and Galax City, VA referred to throughout this document as The Twin County Region.

Twin County Regional Healthcare, as the sponsor of the assessment, engaged national leaders in community health needs assessment to assist in the project. Stratasan, a healthcare analytics and facilitation company out of Nashville Tennessee was engaged to marshal the process and provide community health data and expertise. Stratasan provided the analysis of community health data to assist the community with determining focus areas and goals for improvement.

Participants

Over eighty community and health care organizations collaborated to implement a four stage CHNA process focused on identifying and defining local health issues, concerns and needs. The three-month process centered on gathering and analyzing data to provide direction for the community and hospital to create a plan to improve the health of the community.

Project goals and objectives

- To implement a formal and comprehensive community health assessment process that will allow for the identification of key health and health service issues, and a systematic review of health status in The Twin County Region.
- To support the existing infrastructure that will permit ongoing updating and easy dissemination of available data.
- To initiate a collaborative partnership between all stakeholders in the community.
- To create a health profile that will allow for prioritization of needs and resource allocation, informed decision making, and collective action that will improve health outcomes.



Sourced from the County Health Rankings website:
<http://www.countyhealthrankings.org/take-action>

“We initiated the Community Health Needs Assessment with the goal of identifying health needs, and setting goals, objectives and priorities,” said Jon Applebaum, Chief Executive Officer, Twin County Regional Healthcare. **“It is our goal to use our findings as a foundation for community mobilization to improve the health of our residents.”** **“The information we gathered provided the insight we need to set priorities for health improvement and will be used by TCRH to create an action plan. We hope other community organizations will join us.”** added Martha Cole, Director of Marketing, Twin County Regional Healthcare. **“The Community Health Summit was the final, critical step in the assessment process. Now the real work—improving the health of the community—begins.”**

Who Told Us What?

Data Collection and Timeline

In early December 2013, TCRH contracted with Stratasan to assist in conducting a Community Health Needs Assessment.

The health of the community was studied extensively through primary and secondary research methods. Data was gathered using several methods:

- 26 community members, employers, not-for-profit organizations, school and government representatives participated in a focus group for their perspectives on community health needs and issues on January 9, 2014.
- Information gathering, using public health sources and hospital-specific data, occurred in December and January.
- 17 physicians and 45 employees were surveyed on-line regarding their perspectives on community health status and needs from January 7 through January 21, 2014.
- A Community Summit was conducted on January 23, 2014 with 80 community stakeholders. The audience consisted of healthcare workers, business leaders, school systems, government representatives, clergy and other community members.
- This report to the community was completed in June, 2014.



Collaboration is Key to Good Health

Community Engagement and Transparency

We are pleased to share the results of the Community Health Needs Assessment with our community. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community as the findings impact each and every citizen in one way or another, and join in the improvement efforts.

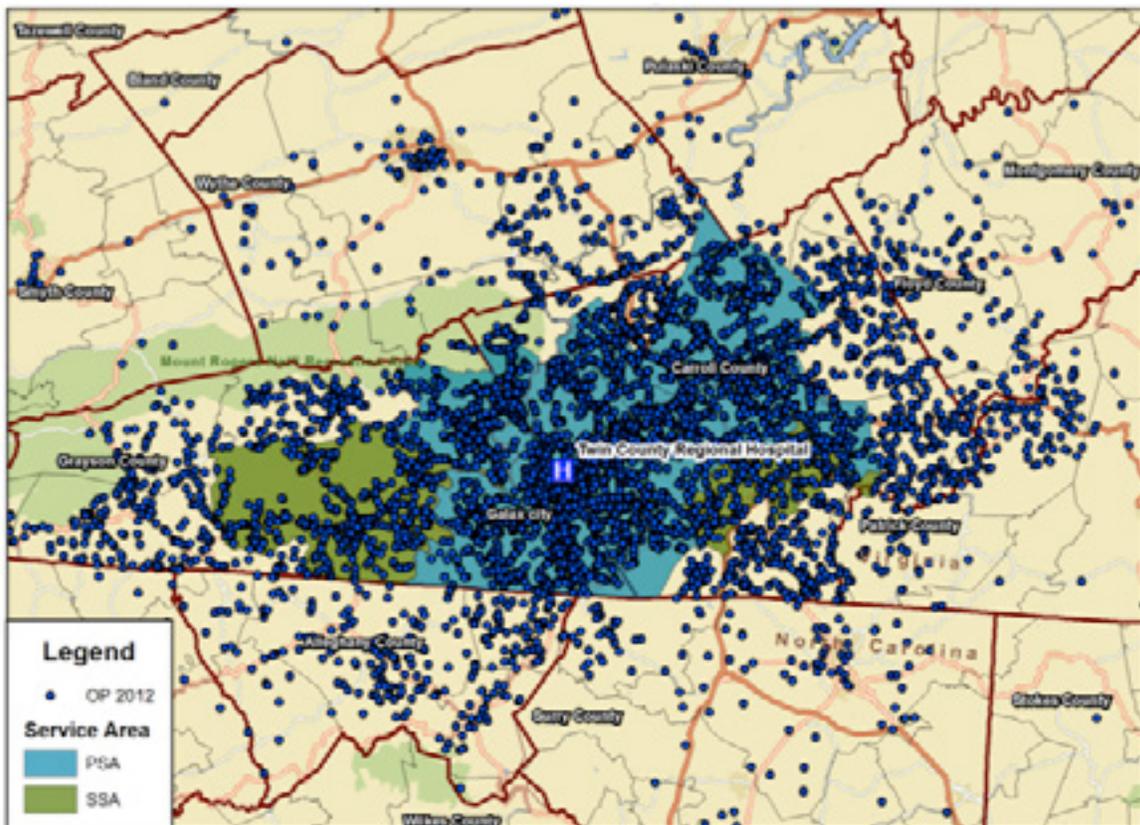
Implementation Plans

To successfully make our community healthier, it is necessary to have a collaborative venture which brings together all of the care providers, citizens, government, schools, churches and business and industry around an effective plan of action. A comprehensive plan will be coordinated across the counties to help ensure adequate availability of needed and desired services.

Community Selected for Assessment

Twin County Regional Healthcare's (TCRH) health information provided the basis for the geographical focus of the CHNA. The map below shows where TCRH receives its patients. 93% of TCRH's inpatients come from The Twin County Region, 64% from Galax/Grayson County, and 29% from Carroll County. Therefore, it is reasonable to select The Twin County Region as the primary focus of the CHNA.

Twin County Regional Healthcare Patients - 2012



Key Findings of the Community Health Assessment

The Twin County Region, known as Gateway to the Blue Ridge Mountains and Old Time Mountain Music Capital of the World, must come together now to improve the health of their communities. The results of their community health assessment follow.

Key Demographic Statistics:

- The population of The Twin County Region is projected to decrease from 2012 to 2017 (.76%), whereas VA is projected to increase as is the U.S.
- The Twin County Region is much older (45 median age) than VA and the U.S and has lower median household income (\$36,091) than both VA and the U.S.
- The healthcare index measures how much the county spends out of pocket on healthcare services. The U.S. index is 100. The Twin County Region (79 index) spends 21% less than the average U.S. household out of pocket on healthcare.
- The racial make-up of the region is 95% white, 2% black, 2% some other race, 1% two or more races and 4% Hispanic origin.
- The income distribution of the region is 6% high income, 46% middle income and 48% low income.

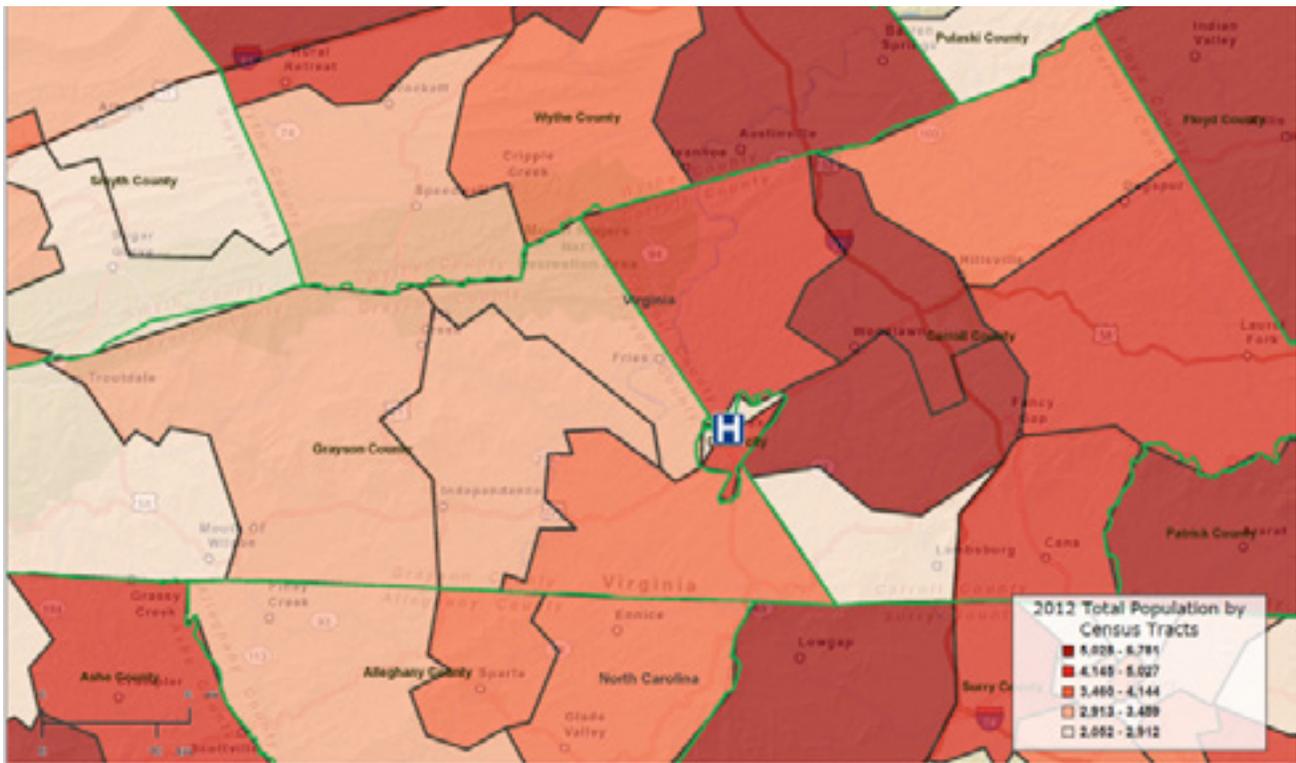
Demographics of the Community

The table below shows the demographic summary of the Twin County Region compared to Virginia and the U.S.

Category	Carroll Co.	Grayson Co.	Galax City	Virginia	USA
Population (2012)	30,185	15,578	7,047	8,142,122	313,129,017
Median Age (2012)	45.3	47.4	42.9	37.6	37.3
Median Household Income (2012)	\$37,141	\$35,245	\$31,947	\$58,369	\$50,157
Annual Pop. Growth (2012-17)	0.10%	-0.50%	-0.20%	0.90%	0.70%
Household Population (2012)	12,844	6,826	2,926	3,106,762	118,208,713
Dominant Tapestry (2012)	42 – Southern Satellites	46 – Rooted Rural	56 – Rural Bypasses	4 - Boomburbs	12 – Up and Coming Families
Business (2011)	1,521	803	572	465,383	12,239,616
Employees (2011)	6,935	3,260	4,985	3,398,581	146,234,698
Medical Care Index*	79	81	74	122	100
Average Health Expenditures (2011)	\$3,269	\$3,351	\$3,090	\$5,138	\$3,611
Total Health Expenditures (2011)	\$41,987,820	\$22,875,761	\$9,041,777	\$15,963,604,095	\$424,173,676,593



Population by Census Tracts



There are five census tracts in Grayson County, two in Galax City and seven in Carroll County. Most of the population is located in central Carroll County. The more rural census tracts are two large tracts west and southeast of Galax and one smaller tract in northern Galax. The second largest populated tracts are also in Carroll County. Grayson County is more rural than the other areas.

Health Status Data

In 2013, based on the County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin, Carroll County ranked 89th healthiest county in Virginia out of the 133 counties ranked (1= the healthiest; 133 = unhealthiest), Grayson ranked 94, tied with Galax City.

County Health Rankings suggest the areas to explore for improvement in all three areas are: smoking, obesity, motor vehicle crash death rate, teen birth rate, uninsured, dentists, preventable hospital stays, some college, unemployment, and children in poverty. For Grayson County additional areas of focus are limited access to healthy foods and high school graduation. In Galax City children in single parent households was noted as an area for improvement.

When analyzing the health status data, local results were compared to Virginia and the top 10% of counties in the U.S. Where The Twin County Region's results are worse than the State, we see an opportunity for group and individual actions that result in improved community ratings. There are several lifestyle gaps that need to be closed to move The Twin County Region up the ranking to be the healthiest community in Virginia and eventually the Nation. For additional perspective, Virginia is ranked the 26th healthiest state out of the 50 states, essentially the middle of the pack.

Healthcare Utilization

The overall demand for health services in The Twin County Region is congruent with an aging population. The estimated inpatient visits per population is higher than VA and the US with The Twin County Region generating 7,910 inpatient hospital visits per year. The estimated physician office visit rates are also higher than Virginia and the US with 232,135 physician office visits per year. Outpatient visit rates are lower than Virginia and the US, with 13,461 visits per year. Emergency department visit rate is lower than Virginia and the same as the US with 23,211 visits. These trends are consistent with an older population, using more inpatient, ED and physician office visits and fewer outpatient visits.

Survey Results, Health Status Rankings and Comparisons

Focus Group Results

Twenty-six community stakeholders participated in a focus group for their input into the community's health. There was broad community participation in the focus group representing a range of interests and backgrounds. There was an excellent article in the Galax Gazette giving an account of the focus group in the January 13-14, 2014 issue. Below is a summary of the 90 minute discussion.

- The group described the health of the community as below. Poverty, culture and the age of the population creates some health challenges.
- Most people turn to their primary care physician for their basic healthcare needs. Some employers have clinics. Some mentioned using the hospital emergency department for primary care. There was a discussion about existing adequate capacity of primary care physicians. There is a shortage of primary care physicians and primary care may look different in the future with more of a team approach to care.
- The group was asked about the top health issues in the community that impact people's health. The group mentioned chronic disease (pulmonary, cardiology, diabetes, obesity and cancer), socioeconomic issues (high unemployment, lower wages, disability, lack of jobs and inability to get higher education), smoking, high cost of health-
- care and health insurance, substance abuse, aging population, mental health needs and difficulty obtaining healthy foods as the most important health issues.
- Some employers in the area have innovative wellness programs for employees.
- The most important health issues for children are poverty and lack of resources for healthy food, particularly with two parents working, and more opportunities for children to exercise.
- The group thought that the community needs more technology, systems of care, more health education, motivation, personal responsibility, cheerleading, dental care, and more specialty services to manage their health conditions.
- The group believed that the individual is responsible for improving health, but there is a role for everyone in the community: employers, hospital, physicians, school systems, faith-based nursing program, churches, local and federal government and insurance companies to help.
- The group strongly believes the three areas work very well together citing multiple examples and do not know of any reason they cannot work well together to improve community health.



Physician and Employee Survey

17 physicians and 45 employees were surveyed using an on-line survey for their input into the community's health.

Community Physician Responses

- 59% responded the community's health was fair, 29% responded poor and 12% responded good.
- 88% believe obesity is the most prevalent disease followed by diabetes (77%), mental health (59%), high blood pressure (53%), cancer and heart disease (both at 35%).
- When asked about the top two or three issues impacting people's health, jobs/employment and affordable health insurance tied for first with 41%. They were followed by people taking more responsibility for their own health, more specialists and more primary care physicians.
- The top health concerns for children were physical inactivity (71%), lack of healthy diet (47%), health education (42%) and lack of mental health services (29%).
- Financial assistance for doctor visits, medical supplies etc. were seen as most needed by the population in order to manage their health more effectively (65%), followed by Insurance that's more affordable for more people, more integrated approach among providers to coordinate patient care and more information/education about their condition(s).

Hospital Employee Responses

- 76% responded the community's health was fair, 9% responded poor, 13% responded good, and 2% responded excellent.
- 82% believe diabetes and mental health are the most prevalent diseases followed by obesity (73%), heart disease (60%), high blood pressure (56%), and cancer (31%).
- When asked about the top two or three issues impacting people's health, jobs/employment led with 51%, followed by affordable health insurance at 44%, then affordable services and programs (31%), then people taking more responsibility for their own health (29%). They were followed by more urgent care clinics and more specialists (both at 27%).
- The top health concerns for children were physical inactivity (84%), lack of healthy diet (82%), health education (41%) and child care options (27%).
- Financial assistance for doctor visits, medical supplies etc. were seen as most needed by the population in order to manage their health more effectively (68%), followed by Insurance that's more affordable for more people, more integrated approach among providers to coordinate patient care and more specialists.



Virginia Health Data and Initiatives

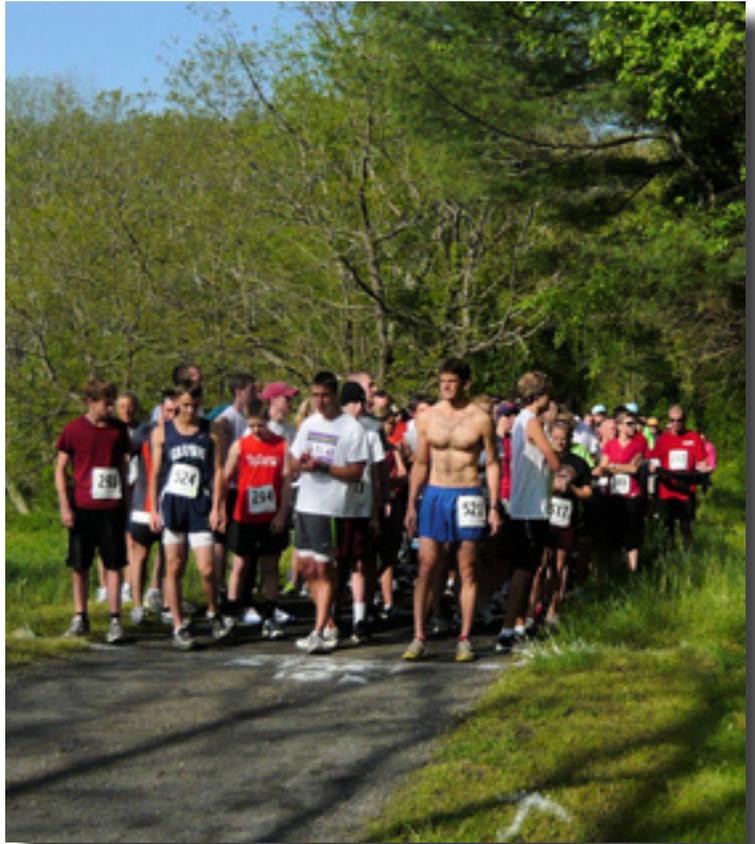
Vicky Richardson, Nursing Supervisor of the Mount Rogers Health District presented information on initiatives of the District at the Community Health Summit. Where there are common initiatives between the state and the counties, coordination of efforts would be ideal.

Health Department Services:

- Maternal and Child Health Services
- Reproductive Health Services
- Wellness Program Services
- Cardiovascular risk reduction
- Health education
- Occupational Health and Safety
- Worksite wellness
- Disease prevention

Program Priorities:

- Maternal and child health
- Communicable disease control
- Women's preventive health services
- Chronic disease control
- Obesity prevention
- Smoking prevention
- Health education
- School health
- Environmental protection
- Emergency preparedness and response



Summary of Data Analysis in Community Health Needs Assessment

As can be seen from the County Health Ranking tables, many indicators were analyzed in the Community Health Needs Assessment. Data other than County Health Rankings was also analyzed and is referenced in the bullets below, such as: Youth Risk Behavioral Surveillance Survey, demographics, socioeconomics, consumer health spending, focus group and surveys of the physicians and hospital staff. Social and economic factors ranked lower: some college, unemployment. Physical environment: limited access to healthy foods is higher and percentage of fast food restaurants is high.

Health Outcomes (Mortality and Morbidity)

	Carroll County	Grayson County	Galax City	Virginia	National Benchmark 90th Percentile
Overall Ranking (Rank out of 133 VA Counties or 50 States)	89	94	94		26
Health Outcomes (Rank out of 133)	67	84	79		28
Mortality (Rank out of 133)	79	87	104		
Premature death (YPLL per 100,000 pop prior to age 75)	8,152	8,387	9,128	6,362	5,317
Morbidity (Rank out of 133)	52	80	50		
Poor or fair health (% reporting age-adjusted)	17%	20%		22%	10%
Poor physical health days (Avg # of days past 30 days)	4.0	3.2		3.2	2.6
Poor mental health days (Avg # of days past 30 days)	3.7	4.7		3.1	2.3
Low birthweight (% of live births with birthweight <2500 grams)	6.6%	8.1%	7.4%	8.3%	6.0%

Strengths

- Lower percentage of adults reporting poor or fair health
- Lower percentage of low birth weight babies.
- Lower cancer death rate (National Cancer Institutes) in Galax City than VA and the U.S. and falling or stable rate trends in all three areas.

Opportunities

- Higher premature death measured in lower years of potential years of life lost.
- Higher number of poor mental health days reported.
- Higher number of poor physical health days reported.
- 12% of Carroll and Grayson Counties and 11% of Galax City has diabetes

Health Behaviors

	Carroll County	Grayson County	Galax City	Virginia	National Benchmark 90th Percentile
Health Factors (Rank out of 133)	111	103	108	18	
Health Behaviors (Rank out of 133)	121	75	83		
Adult smoking (smokes every day or most days)	34%	24%		18%	13%
Adult obesity (BMI >=30)	31%	29%	29%	28%	25%
Physical inactivity (% 20 yo and older reporting no leisure time physical)	30%	29%	26%	24%	21%
Excessive drinking	13%	9%		16%	7%
Motor vehicle crash death rate (crude mortality per 100,000 pop)	22	28		11	10
Sexually transmitted infections (Chlamydia rate per 100,000 pop)	183	161	398	385	92
Teen birth rate (ages 15-19 per 1,000 female pop)	45	47	89	32	21

Strengths

- Lower rate of sexually transmitted infections.
- Lower percentage of excessive drinking.

Opportunities

- Smoking- The Twin County Region has a higher percentage of smokers than VA and the U.S. and also indexes higher than the US for smoking 9+ packs of cigarettes per week. 15% of VA high school students smoked a cigarette. Chewing tobacco, snuff or dipping is hovering at 8%. Since smoking is such a health hazard, any smoking is an opportunity to improve health status. Smoking harms nearly every organ of the body. Smoking causes many diseases and reduces the health of smokers in general. The adverse health effects from cigarette smoking account for an estimated 443,000 deaths, or nearly one of every five deaths, each year in the United States. (CDC website)
- Obesity –Higher percentage of adult obesity in all three counties. 11% of VA high school students are obese. Obesity puts people at increased risk of chronic diseases: diabetes, kidney disease, joint problems, hypertension and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer's. It often leads to metabolic syndrome and type 2 diabetes. It is a factor in cancers, such as ovarian, endometrial, postmenopausal breast cancer, colorectal, prostate, and others. A link has been found between migraine and obesity.
- Higher teen birth rate.



- Higher percentage of physical inactivity.
- Higher motor vehicle crash death.
- as ovarian, endometrial, postmenopausal breast cancer, colorectal, prostate, and others. A link has been found between migraine and obesity. And, of course, obesity affects an individual's general quality of life, self-esteem and self-image.
- Higher motor vehicle crash death.
- Higher teen birth rate.



Clinical Care

	Carroll County	Grayson County	Galax City	Virginia	National Benchmark 90th Percentile
Clinical Care (Rank out of 133)	105	118	57		
Uninsured (%<65 w/o health insurance)	20%	20%	20%	15%	11%
Primary care physicians (Pop per physician)	3,754	1,936	272	1,356	1,067
Dentists (Pop per dentist)	3,796	5,221	1,243	1,811	1,516
Preventable hospital stays (Hospitalization rate for ambulatory-sensitive conditions per 1,000 Medicare enrollees)	70	91	84	58	47
Diabetic screening (%diabetic Medicare enrollees receiving HbA1c)	88%	87%	86%	86%	90%
Mammography screening (%female Medicare enrollees receiving mammo)	68%	67%	69%	66%	73%

Strengths

- Access to primary care. The population to primary care for the three counties is 1,341, just below the VA number.
- Diabetic screening is high.
- Mammography screening is high.
- Diabetes screening is high.

Opportunities

- High percent of the population without health insurance (uninsured).
- Access to dentists; the population to dentist ratio is high.
- Preventable hospitals stays are higher.
- Higher preventable hospital stays.
- Lower percentage of Medicare enrollees receiving blood sugar screening for diabetes.
- Lower percentage of Medicare enrollees receiving a mammogram.

Social & Economic Factors

	Carroll County	Grayson County	Galax City	Virginia	National Benchmark 90th Percentile
Social & Economic Factors (Rank out of 133)	101	110	126		
High school graduation (% of 9th grade cohort graduating in 4 yrs)	89%	85%	88%	88%	N/A
Some college (% of adults 35-44 w/ some postsecondary ed)	46%	47%	48%	67%	70%
Unemployment	9.3%	10.3%	10.1%	6.2%	5.0%
Children in poverty (% under age 18 in poverty)	29%	29%	37%	16%	14%
Inadequate social support (% of adults w/o social/emotional support)	21%	14%		18%	14%
Children in single-parent households (% of HH headed by a single)	29%	24%	62%	30%	20%
Violent crime rate (violent crime per 100,000 pop)	135	152	421	233	66

Strengths

- Higher high school graduation percentage.
- Lower percentage of inadequate social support.
- Lower percentage of children in single-parent households.
- Lower violent crime rate (except Galax City).
- High percentage of employees employed in manufacturing.

Opportunities

- Higher unemployment rate, although improving.
- Lower post-secondary education percentage.
- Higher percentage of children in poverty.
- Lower median household income and high percentage of low income households.

Physical Environment

	Carroll County	Grayson County	Galax City	Virginia	National Benchmark 90th Percentile
Physical Environment (Rank out of 133)	106	111	36		
Daily fine particulate matter (Avg daily measure of matter in micrograms)	12.7	12.8	12.8	12.8	8.8
Drinking water safety (% of pop exposed to water exceeding a violation limit during the past year)	3%	0%		8%	0%
Access to recreational facilities (Recreational facilities per 100,000 pop)	3	0	28	10	16
Limited access to healthy foods (% of pop who are low income and do not live close to a grocery store)	2%	6%	1%	4%	1%
Fast food restaurants (% of all restaurants that are fast food)	45%	27%	40%	50%	27%

Strengths

- Drinking water safety is good.
- Higher access to recreational facilities in Galax and outdoor recreational opportunities.
- Lower daily fine particulate matter in the air.
- Lower limited access to healthy foods (except in Grayson Co.).
- Lower percentage of fast food restaurants.

Opportunities

- Expense of healthy foods compared to processed foods.

There are four broad themes which emerged in this process:

- The Twin County Region needs to create a “Sense of Health” that permeates the culture of the counties, cities, employers, churches, and community organizations, so everyone can buy into health improvement.
- There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
- While any given measure may show an overall good picture of community health, there are significantly challenged subgroups.
- It will take a partnership with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community.

Results of the Community Health Summit

At the Community Health Summit, the following issues were prioritized and actions were brainstormed by the table groups and form the foundation of The Twin County Region's health initiatives. The work in the next months will determine the ideas to be implemented. The Summit attendees listed the three most important health issues in the Twin County Region. The results of the activity are below with higher numbers indicating the number of "votes" or priority by topic.



1. Obesity (49)
2. Chronic diseases (26) (in general 3): Cardiovascular (9), cancer (6), pulmonary (5), high blood pressure (3)
3. Smoking (19)
4. Lifestyle behavior and education (18)
5. Substance abuse (10) and mental health (8)
6. Diabetes (16)
7. Socio-economic issues (14): Uninsured/access to health insurance (4), poverty (3), affordable healthcare, diverse industry
8. Family and personal responsibility (10)
9. Teen pregnancy (7)
10. Issues of aging (vision, hearing, Alzheimer's) (5)
11. Access to care and/or urgent care (4)

Community Health Summit Suggested Goals and Actions

The most important health issues were combined into nine categories and table groups brainstormed goals and actions around the most important health issues listed above. These goals and actions have been organized below.

Obesity

Suggested Goal 1: Reduce obesity by 10% within 3 years

Suggested Action 1: Create specific marketing plan geared to parallel fast-food marketing focused on healthy eating— branding influences people

Suggested Action 2: Work with local organizations: governments, schools, churches, etc. to have plan in

place for local people to donate produce to families and children

Responsible Partners: TCRH in partnership with school administrators. City Councils and local boards, churches, farmers markets

Suggested Goal 2: Develop marketing strategy to encourage healthy eating and exercise three times per week

Suggested Action 1: Encourage healthy lifestyle choices by developing resources to teach train and motivate i.e. school resource person to set example, encourage biking, hiking, etc.

Suggested Action 2: Work with school systems to include all children in athletic activities not just the best athletes

Responsible Partners: School systems, churches, area recreation departments, school resource officers, PE teachers, coaches.

Suggested Goal 3: Educate entire community regarding ways to improve health by diet and exercise and making healthy choices

Suggested Action 1: Teach nutrition and how to buy and prepare healthy foods, particularly for young mothers

Suggested Action 2: Increase awareness of availability of resources to help families, for example, local farmers markets

Responsible Partners: USDA Extension offices, farmers markets, Grayson LandCare group, VA Tech Agriculture departments

Chronic Diseases (cardiovascular, cancer, pulmonary, high blood pressure)

Suggested Goal 1: Collaborate with schools to improve health education and outreach to adult groups to improve education on chronic disease management/prevention

Suggested Action 1: Hold collaborative meetings with schools

Suggested Action 2: Outreach to District 3 and community adult groups

Responsible Partners: school nursing program, school administration, health educators, TCRH, District 3, community organization, VA Tech College of Medicine, local physicians, clinics, American Cancer Society

Suggested Goal 2: Improve risk-factor detection

for chronic diseases by providing annual health fairs to at risk populations

Suggested Action 1: Collaborative meetings with responsible partners to plan health fairs

Suggested Action 2: Identify dates/places/times prime populations to target

Responsible Partners: TCRH, VDH, free clinic, United Way, Faith-based Nursing, business partners, schools, social services

Suggested Goal 3: Increase colon cancer screening rate to 70% of the eligible population by 2017

Suggested Action 1: Utilize bi-annual health fairs for hemoccult testing and promotion of colonoscopies

Suggested Action 2: Marketing and education – utilize business partners/health provider partners to expand audience and education opportunities

Responsible Partners: TCRH, Health Department, Free Clinic, United Way, faith-based nursing, business partners, schools, social services



Smoking/Tobacco Use

Suggested Goal 1: Decrease smoking by 20% by 2017 through prevention

Suggested Action 1: Health education in elementary and high school

Suggested Action 2: Utilize regional, state, national resources to increase awareness/education through all media resources

Responsible Partners: Health Department, health care providers, school systems, churches, American Cancer Society

Suggested Goal 2: Increase treatment and support for smoking cessation

Suggested Action 1: Establish smoking cessation programs

Suggested Action 2: Partner with business to encourage utilization of programs and make referrals

Suggested Action 3: Create formal support groups with support partners

Suggested Action 4: Increase engagement in other activities, i.e. exercise

Responsible Partners: TCRH, Health Department, Wellness Centers, health care providers, area businesses



Lifestyle Behavior and Education

Suggested Goal 1: Increase the awareness and value of a healthy lifestyle and behavior to all residents within the Twin County Region and reduce obesity and diabetes

Suggested Action 1: Create a community Facebook page and social media education strategy dedicated to awareness and value of a healthy lifestyle

Suggested Action 2: Increase kids knowledge, education and activity

Suggested Action 3: Create community health and wellness plan/ outreach program using existing resources

Responsible Partners: TCRH, Health Department, schools, business owners, primary care, Free Clinic, churches, Recreation Departments, CWC

Suggested Goal 2: Initiate a community lifestyle behavior and education program in place within all public schools

Suggested Action 1: Implement a pedometer program for 100% of kids twelve years old and up

Responsible Partners: local businesses, TCRH, Health Department, Wellness Center, School Systems

Suggested Goal 3: Reduce heart disease by 2% by 2018

Suggested Action 1: Provide a discount incentive program through churches that will encourage senior exercise

Responsible Partners: churches, Wellness Center

Substance Abuse and Behavioral Health

Suggested Goal 1: Decrease substance abuse due to use of multiple medications and prescription drugs

Suggested Action 1: Increase PCPs role in educating patients; provide CME to physicians

Suggested Action 2: Decrease need for extended prescription drug use

Responsible Partners: pain management clinic, outside resources, primary care providers

Suggested Goal 2: Decrease substance abuse due to recreational drug use

Suggested Action 1: Continue awareness in schools post grade school level and continue DARE program

Suggested Action 2: Increase community awareness and funds for whom to call in an emergency

Responsible Partners: Resource officers, physicians

Suggested Goal 3: Increase resources and access for mental health needs

Suggested Action 1: Reduce prejudice and stigma of mental health through education

Suggested Action 2: Increase access by recruitment of psychiatric providers

Responsible Partners: mental health providers, TCRH, Twin County Coalition

Diabetes

Suggested Goal 1: Reduce population of diabetes in Twin County Region to below 10% by 2019

Suggested Action 1: Education and follow-up within school system and households

Suggested Action 2: Dedicate resources (staff, time, etc) to work on prevention

Responsible Partners: schools, parents, pediatricians, physicians, community recreation centers, wellness centers, churches, TCRH, Health Department, Free Clinic

Suggested Goal 2: Increase referrals to existing diabetes programs by 5% within 1 year

Suggested Action 1: Promote existing diabetes services using testimonials, social media, videos, etc

Suggested Action 2: Work with business to incentivize attendance at diabetes programs

Responsible Partners: marketing directors, administration, businesses, TCRH, Health Department, community programs, churches



Socioeconomics

Goal 1: Increase post-secondary education to Suggested Goal 1: Reduce the number of uninsured by 25% by 2016

Suggested Action 1: Increase or facilitate enrollment in Medicaid and in the health exchanges

Suggested Action 2: Encourage legislature to expand coverage for Medicaid

Responsible Partners: TCRH, Department of social services, community groups and members

**Suggested Goal 2: Improve access to healthcare
Suggested Action 1: Increase free health screenings**

Suggested Action 2: Partner with industry for wellness screenings

Suggested Action 3: Increase immunization programs

Responsible Partners: TCRH, large employers, schools, social services, community

Access to Healthcare Providers and Issues of Aging

Suggested Goal 1: Educate and communicate currently available healthcare resources

Suggested Action 1: Create a pamphlet of all the existing healthcare services and distribute to the community

Suggested Action 2: Create a committee with health care providers who will create the pamphlet

Responsible Partners: The Gazette, The Carroll News, Radio

Suggested Goal 2: Educate the senior citizen community on healthy behaviors and preventative measures

Suggested Action 1: Health fair each quarter focused on seniors located where seniors congregate

Suggested Action 2: Encourage churches involvement with a ministry of health and healing

Responsible Partners: community organizations, churches, health care providers

Family Responsibility/Teen Pregnancy

Suggested Goal 1: Decrease teen pregnancy by 1% by 2016

Suggested Action 1: Research and obtain grants to secure funding for prevention education

Suggested Action 2: Provide Health Department services within school buildings to improve access

Responsible Partners: school systems, Health Department

Suggested Goal 2: Provide an after-school mentoring program for students identified as at-risk for teen pregnancy

Suggested Action 1: Secure funding through state, federal, private, United Way and other grants

Suggested Action 2: Develop a committee to identify volunteers and participants to develop the program

Responsible Partners: school system, Recreation Department, community volunteers, churches

Suggested Goal 3: Improve teen self-esteem

Suggested Action 1: Focus on positive influences from peers, adults, family

Suggested Action 2: Community forums held in various locations to communicate with parents/guardians of teens

Responsible Partners: schools, civic organizations, churches



Twin County Regional Hospital's Selected Initiatives

Based on input from the prioritization at the Community Summit, Twin County Regional Healthcare (TCRH) has selected three (3) corresponding goals based on the identified community health needs from the CHNA and the Summit. Action plans are being developed for these identified goals and will be implemented over the next few months. TCRH will monitor the progress through the Hospital's Executive Team and will annually report the progress to their Board and the community.

Giving credit where credit is due

Acknowledgements

We would like to acknowledge the efforts of the collaborative group which assisted in the CHNA. It is energizing when a diverse group of citizens comes together to work toward a common cause. Funding for this project has been provided by: Twin County Regional Healthcare.

Participation in the focus group and at the Community Summit creating the Twin County Region Community Health Needs Assessment and Improvement Plan:

- Twin County Regional Healthcare: CEO, Chief Financial Officer, Hospice, Emergency Department, Human Resources, Home Health, Nurse Practitioner, Chief Nursing Officer, Quality, Physician practices
- Twin County Regional Healthcare Board of Trustees
- Practicing community physicians
- Retired community physicians
- Grayson and Carroll Counties and Galax City Community Advisory Group for TCRH
- Mt. Rogers Health District
- Carroll County Social Services
- Hillsville Town Council
- Former Legacy Board Members
- Carroll County EMS
- Galax Grayson EMS
- Community Members
- Legacy Board Members
- Retired teacher
- Galax City Mayor
- Waddell Nursing Home
- Foundation Board
- Employer Contractor
- Hillsville Presbyterian Church
- Rugby Volunteer Rescue Squad
- Grayson Board of Supervisors
- Grayson Nursing and Rehabilitation Center
- Heritage Hall-Laurel Meadows
- Vaughan-Bassett Furniture
- United Way Virginia Highlands
- Galax Presbyterian Community Nurse
- The Gazette
- City of Galax Schools
- Grayson County Public Schools
- Tri-Area Community Health Center of Laurel Fork
- Mt. Rogers Community Services Board
- Carilion Medical Associates Family Practice
- First Citizens Bank
- First Baptist Church of Galax Community Nurse
- Grayson National Bank
- City of Galax Council
- Galax Family Care Center
- Camp Zion & Saddle Creek Churches
- The Carroll News
- Carroll County Social Services
- Golden Living Center – Blue Ridge
- Independence Family Care Center
- Carroll County Administrator
- Free Clinic of the Twin Counties
- Crossroads Institute
- Trinity Mission Health and Rehab
- Blue Ridge Crossroads Economic Development Authority
- Hillsville Family Care Center
- Grayson County Officials
- Hillsville Lions Club
- Twin County Orthopedic Center
- Elk Creek Rescue Squad



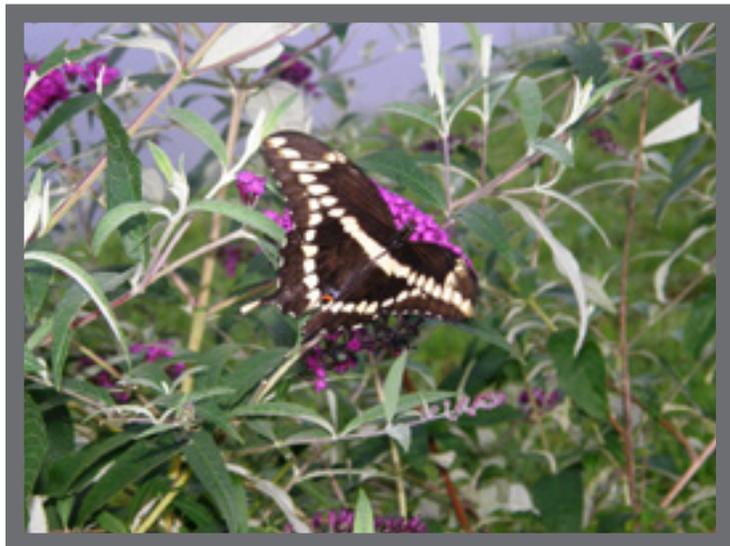
Funding for this project was provided by Twin County Regional Hospital

The report is not the end of the process.

- Several small groups will form to begin implementation on several fronts related to the goals and actions identified in the Community Summit. Please contact Martha Cole at Twin County Regional Healthcare for information regarding ongoing efforts and how you may get involved.
- The primary and secondary research is the basis of the Community Health Needs Assessment report for The Twin County Region, Virginia. The health information contained in these reports can be utilized to further refine community health priorities, develop an updated community plan and guide collaboration and resource allocation.
- Meet the people who have brought this important information together. As a community, we are appreciative of their work, their time and their talents.
- Twin County Regional Healthcare, Board of Trustees
- Jon Applebaum, Chief Executive Officer, Twin County Regional Healthcare
- Martha Cole, Director Marketing, Twin County Regional Healthcare
- Twin County Regional Healthcare Community Advisory Group

Ways I see myself getting involved

Goals for my personal health



TWIN COUNTY
Regional Healthcare

Duke LifePoint Healthcare

2013 Twin Counties, Virginia Community Health Needs Assessment