

# Focusing on the Health of Our Community

2022 Community Health Needs Assessment

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# The RSMH Community

## Demographics and Social Determinants of Health

# The RSMH Community



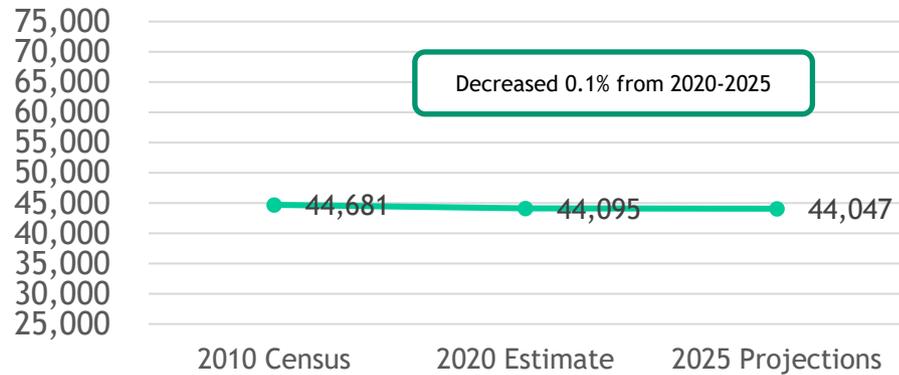
RSMH focuses on providing care to Virginia's Eastern Shore, which consists of Accomack and Northampton Counties. This includes Accomack County's Tangier Island, which is only accessible by boat or plane. In addition to serving the residents of Accomack and Northampton Counties, RSMH also serves some residents of southern Maryland as well as the thousands of tourists that visit the region. There is one health district which encompasses both counties.

- **Eastern Shore Health District:** Accomack and Northampton Counties

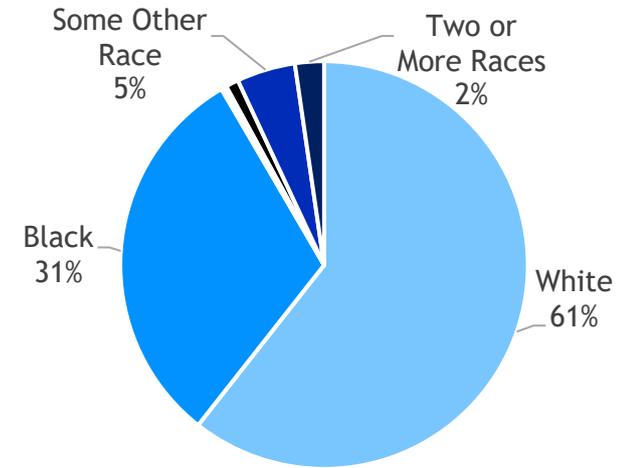


# Area Demographics

## Total Population



## 2025 Projections by Race

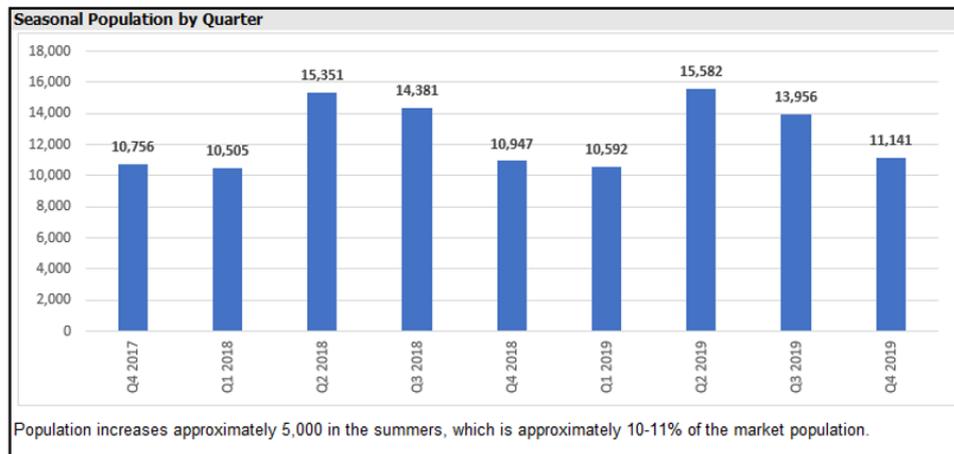
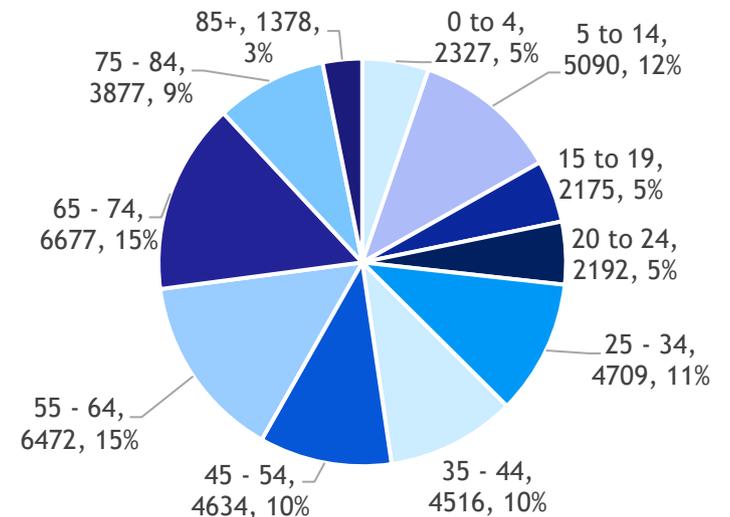


Population Density (Pop / Sq Mile) (2025 Projected): 70.85

Total Households (2025 Projected): 18,523

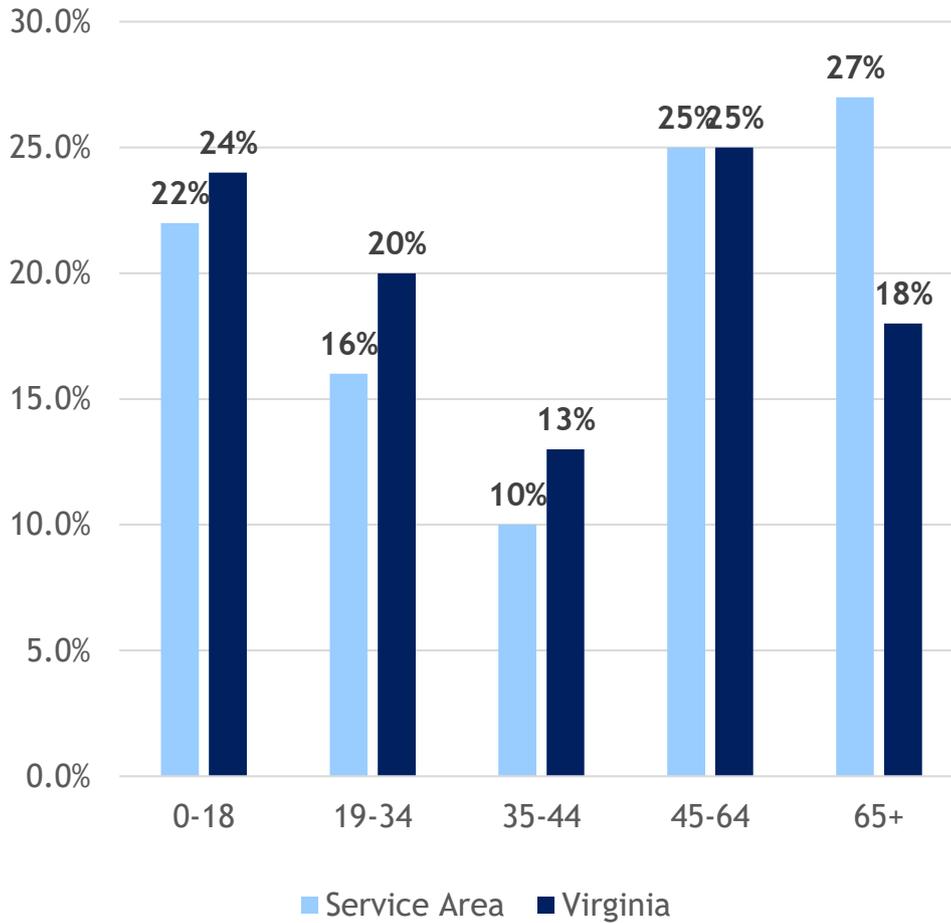
Median Age (2025 Projected): 47.4

## 2025 Projections by Age

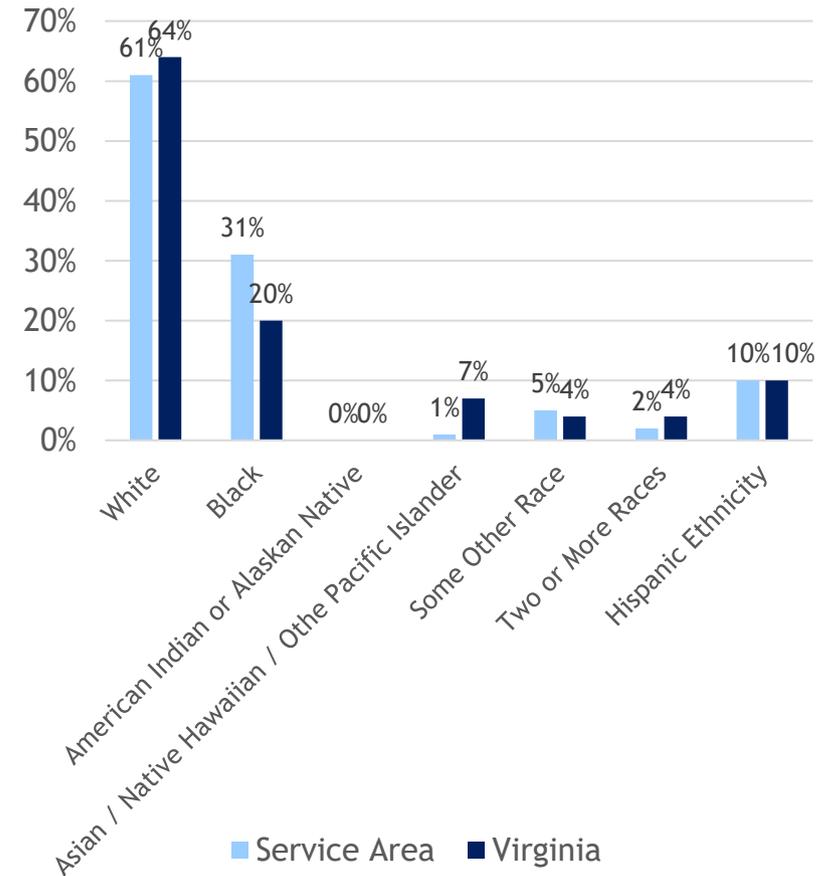


# Demographics Compared to the Commonwealth

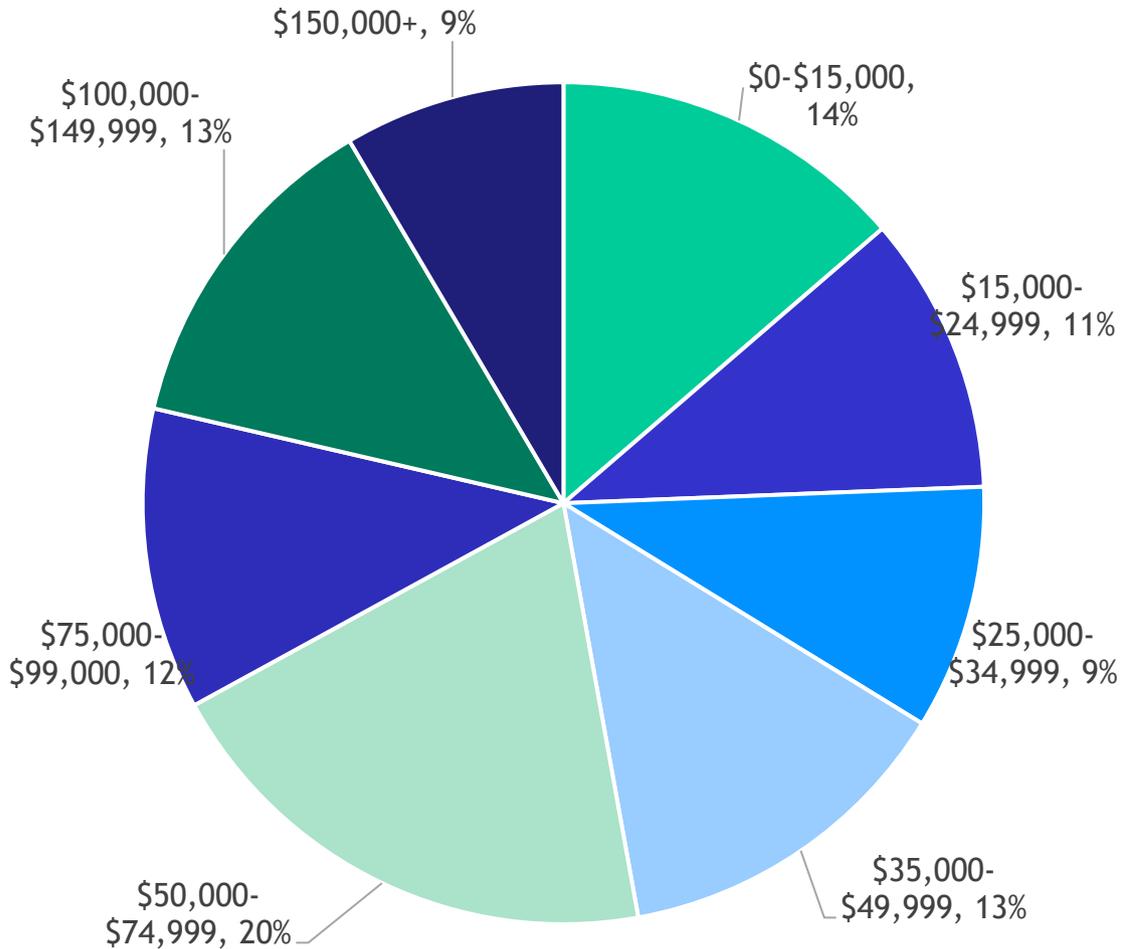
## Population Distribution by Age



## Population Distribution by Race and Ethnicity



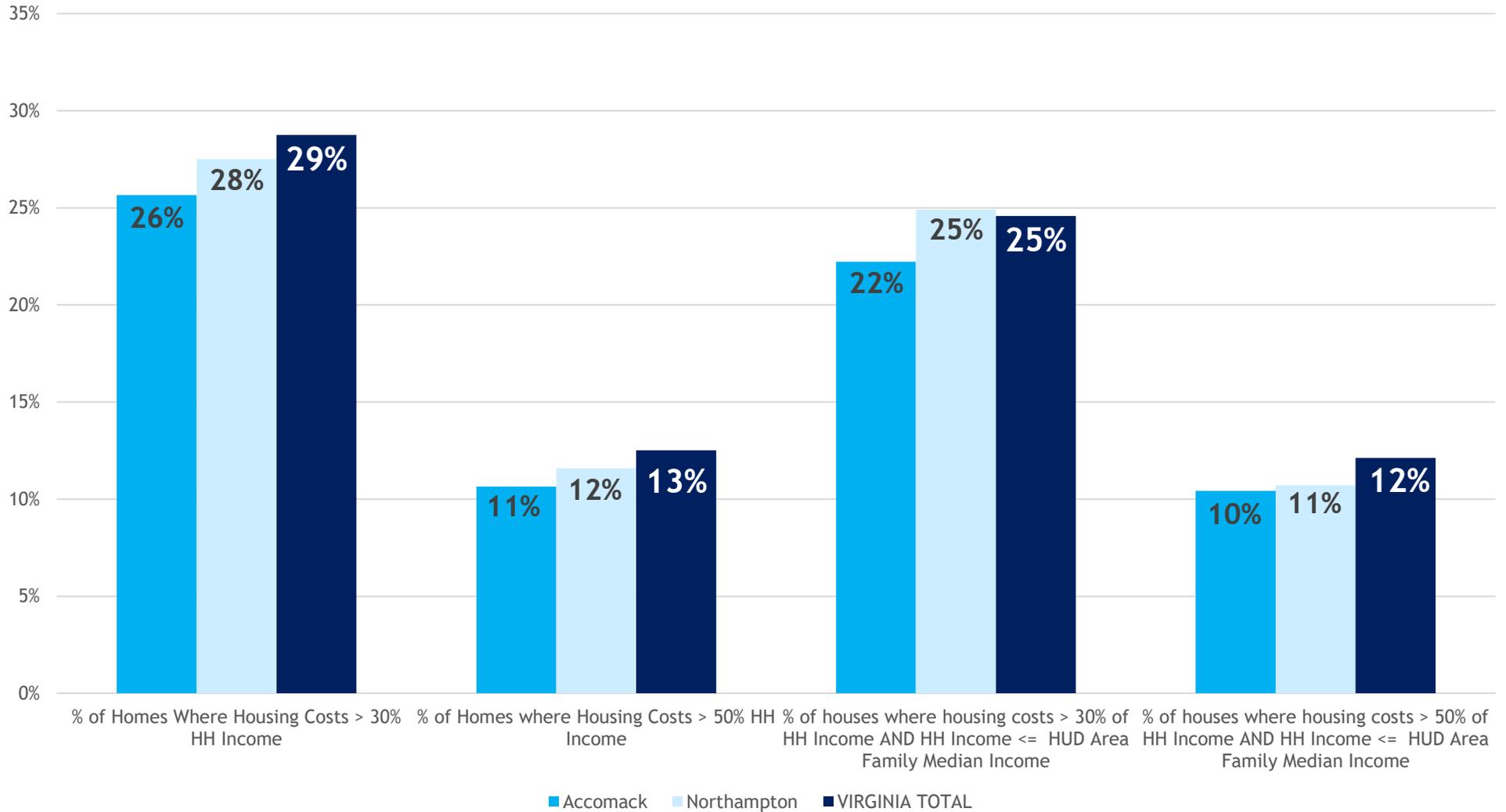
# 2025 Income Projections:



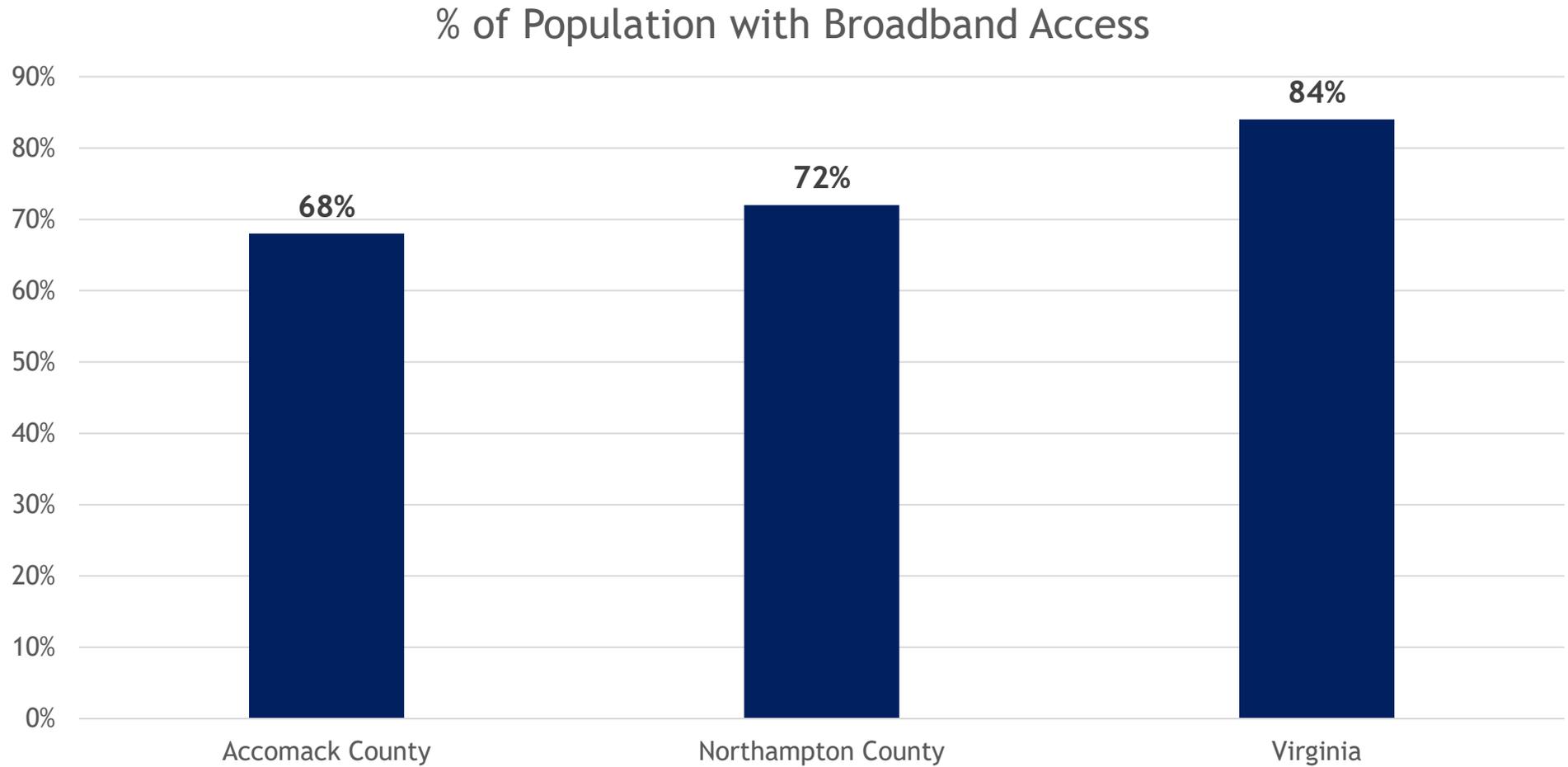
<b>Average Household Income</b>	<b>\$76,962</b>
<b>Median Household Income</b>	<b>\$53,376</b>
<b>Per Capita Household Income</b>	<b>\$32,593</b>

# Housing Insecurity:

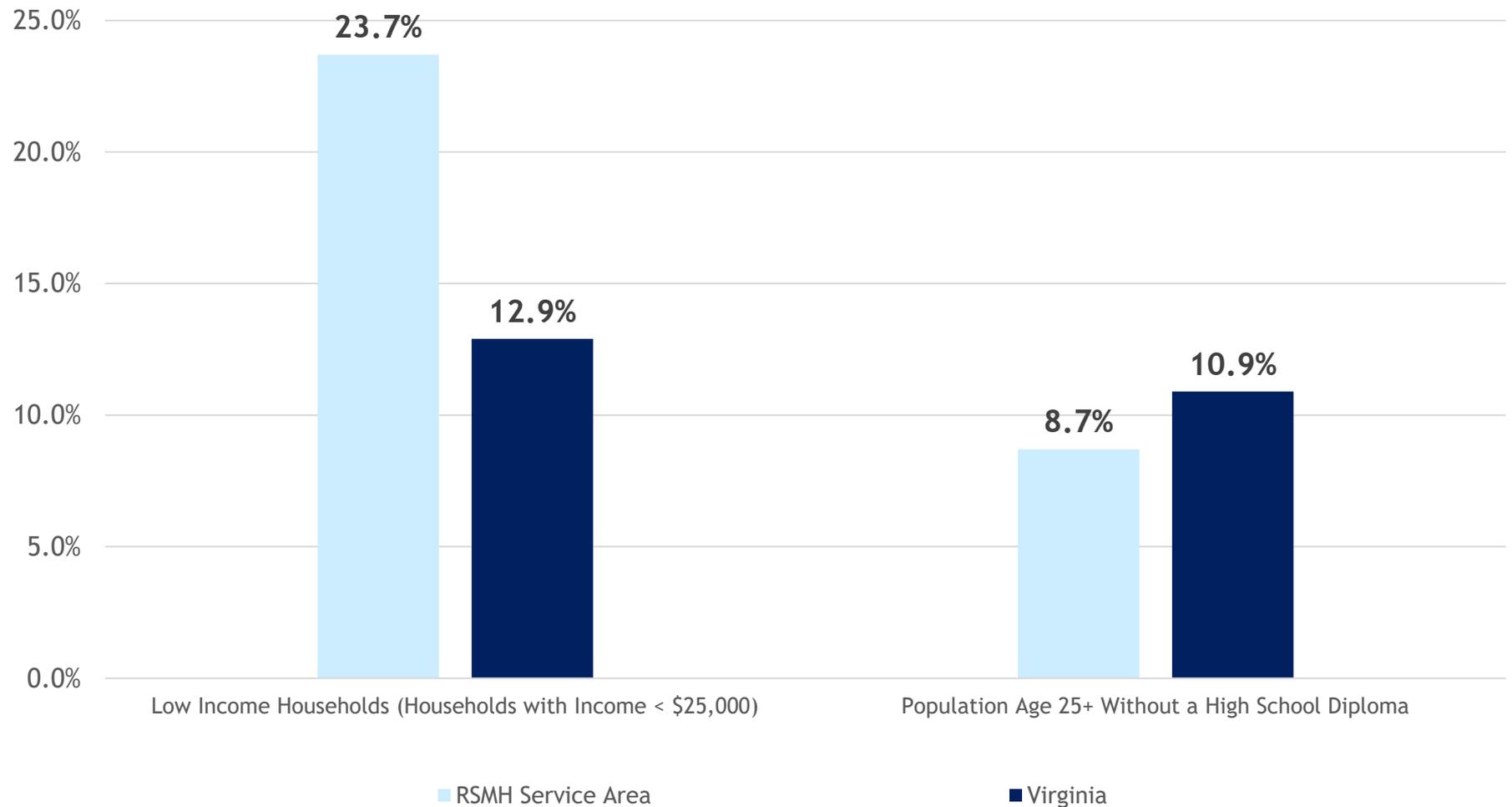
Housing Insecurity Measures



# Percent of Population with Broadband Access



# Income and Education vs Virginia



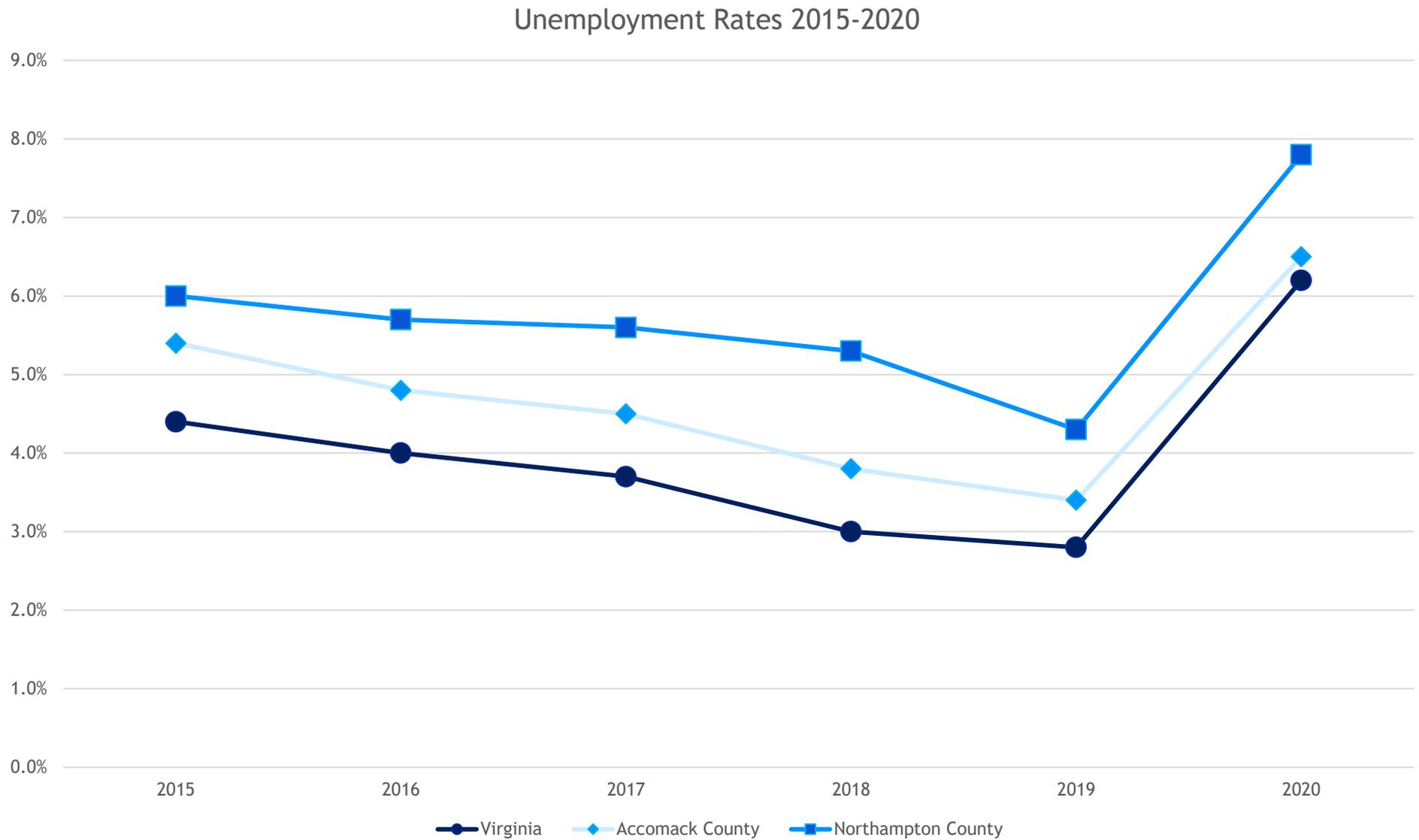
# Demographic Data

Exhibit 1-A Demographic Summary Report for Study Region 2010-2025							
Demographic Indicator	2010 Census		2020 Estimates		2025 Projections		2020 to 2025
Total Population	44,681	62.7%	44,095	62.2%	44,047	60.6%	-0.1%
Population Density (Pop/Sq Mi)	70.94		70.93		70.85		-0.1%
Total Households	18,710		18,463		18,523		0.3%
<b>Population by Race</b>							
White	28,018	62.7%	27,411	62.2%	26,701	60.6%	-2.6%
Black	13,789	30.9%	13,306	30.2%	13,642	31.0%	2.5%
American Indian or Alaska Native	161	0.4%	192	0.4%	194	0.4%	1.0%
Asian/Native Hawaiian/Other Pacific Islander	315	0.7%	419	1.0%	447	1.0%	6.7%
Some Other Race	1,689	3.8%	1,887	4.3%	2,052	4.7%	8.7%
Two or More Races	708	1.6%	879	2.0%	1,012	2.3%	15.1%
<b>Population by Ethnicity</b>							
Hispanic	3,711	8.3%	4,182	9.5%	4,528	10.3%	8.3%
Not Hispanic or Latino	40,969	91.7%	39,912	90.5%	39,519	89.7%	-1.0%
<b>Population by Age</b>							
0 to 4	2,588	5.8%	2,387	5.4%	2,327	5.3%	-2.5%
5 to 14	5,058	11.3%	5,116	11.6%	5,090	11.6%	-0.5%
15 to 19	2,587	5.8%	2,289	5.2%	2,175	4.9%	-5.0%
20 to 24	2,299	5.1%	1,954	4.4%	2,192	5.0%	12.2%
25 to 34	4,668	10.4%	4,800	10.9%	4,709	10.7%	-1.9%
35 to 44	4,864	10.9%	4,409	10.0%	4,516	10.3%	2.4%
45 to 54	6,842	15.3%	5,168	11.7%	4,634	10.5%	-10.3%
55 to 64	6,843	15.3%	7,277	16.5%	6,472	14.7%	-11.1%
65 to 74	4,836	10.8%	6,204	14.1%	6,677	15.2%	7.6%
75 to 84	2,972	6.7%	3,181	7.2%	3,877	8.8%	21.9%
85+	1,124	2.5%	1,309	3.0%	1,378	3.1%	5.3%
<b>Median Age:</b>							
Total Population	45.5		47.4		47.4		

Exhibit 1-B Socioeconomic Report for Study Region 2010-2025							
Households by Income	2010 Census		2020 Estimates		2025 Projections		2020 to 2025
\$0 - \$15,000	3,559	19.0%	3,016	16.3%	2,539	13.7%	-15.8%
\$15,000 - \$24,999	2,798	15.0%	2,222	12.0%	1,984	10.7%	-10.7%
\$25,000 - \$34,999	2,518	13.5%	1,902	10.3%	1,734	9.4%	-8.8%
\$35,000 - \$49,999	3,198	17.1%	2,776	15.0%	2,478	13.4%	-10.7%
\$50,000 - \$74,999	3,186	17.0%	3,501	19.0%	3,677	19.9%	5.0%
\$75,000 - \$99,999	1,423	7.6%	1,872	10.1%	2,150	11.6%	14.8%
\$100,000 - \$149,999	1,344	7.2%	1,906	10.3%	2,381	12.9%	25.0%
\$150,000 +	684	3.7%	1,269	6.9%	1,579	8.5%	24.5%
Average Hhld Income	\$52,890		\$67,267		\$76,962		14.4%
Median Hhld Income	\$37,223		\$46,025		\$53,376		16.0%
Per Capita Income	\$22,400		\$28,397		\$32,593		14.8%
<b>Employment</b>							
Total Population 16+	36,552		36,112		36,142		0.1%
Total Labor Force	21,197	58.0%	22,870	63.3%	21,743	60.2%	-4.9%
Civilian, Employed	19,730	93.1%	21,763	95.2%	20,479	94.2%	-5.9%
Civilian, Unemployed	1,455	6.9%	1,093	4.8%	1,251	5.8%	14.4%
In Armed Forces	12	0.1%	14	0.1%	14	0.1%	0.0%
Not In Labor Force	15,355	42.0%	13,242	36.7%	14,399	39.8%	8.7%
% Blue Collar	9,233	46.8%	10,425	47.9%	9,859	45.3%	-5.4%
% White Collar	10,497	53.2%	11,338	52.1%	10,620	48.8%	-6.3%
<b>Housing Units</b>							
Total Housing Units	27,797		28,734		29,349		2.1%
Total Occupied Housing Units	18,710	67.3%	18,463	64.3%	18,523	63.1%	0.3%
Owner Occupied:Owned with a mortgage or loan	6,452	34.5%	5,807	31.5%	5,775	31.2%	-0.5%
Owner Occupied:Owned free and clear	6,705	35.8%	6,823	37.0%	6,856	37.0%	0.5%
Renter Occupied	5,552	29.7%	5,833	31.6%	5,892	31.8%	1.0%
Vacant	9,087	32.7%	10,271	35.7%	10,826	36.9%	5.4%
<b>Vehicles Available</b>							
0 Vehicles Available	1,545	8.3%	1,684	9.1%	1,702	9.2%	1.1%
1 Vehicle Available	6,488	34.7%	6,033	32.7%	6,029	32.6%	-0.1%
2+ Vehicles Available	10,678	57.1%	10,746	58.2%	10,791	58.3%	0.4%
Average Vehicles Per Household	1.91		1.98		1.98		0.3%
<b>Marital Status</b>							
Married, Spouse Present	16,187	43.7%	17,526	47.9%	17,461	47.7%	-0.4%
Married, Spouse Absent	3,125	8.4%	2,138	5.8%	2,142	5.9%	0.2%
Divorced	4,346	11.7%	3,779	10.3%	3,807	10.4%	0.7%
Widowed	3,346	9.0%	3,331	9.1%	3,323	9.1%	-0.2%
Never Married	10,030	27.1%	9,818	26.8%	9,898	27.0%	0.8%
Age 15+ Population	37,035		36,592		36,630		0.1%
<b>Educational Attainment</b>							
Grade K - 8	2,328	7.2%	1,966	6.1%	1,940	6.0%	-1.3%
Grade 9 - 11	4,030	12.5%	3,685	11.4%	3,664	11.4%	-0.6%
High School Graduate	11,963	37.2%	11,792	36.5%	11,733	36.4%	-0.5%
Some College, No Degree	6,010	18.7%	5,746	17.8%	5,693	17.6%	-0.9%
Associates Degree	1,618	5.0%	2,113	6.5%	2,145	6.7%	1.5%
Bachelor's Degree	3,306	10.3%	3,835	11.9%	3,861	12.0%	0.7%
Graduate Degree	2,347	7.3%	2,858	8.8%	2,886	8.9%	1.0%
No Schooling Completed	549	1.7%	354	1.1%	342	1.1%	-3.4%
Age 25+ Population	32,149		32,349		32,264		-0.3%

# Labor Market

## Unemployment Rates 2015-2020



# Labor Market

## Top 10 Employers in Each Locality

### Accomack County

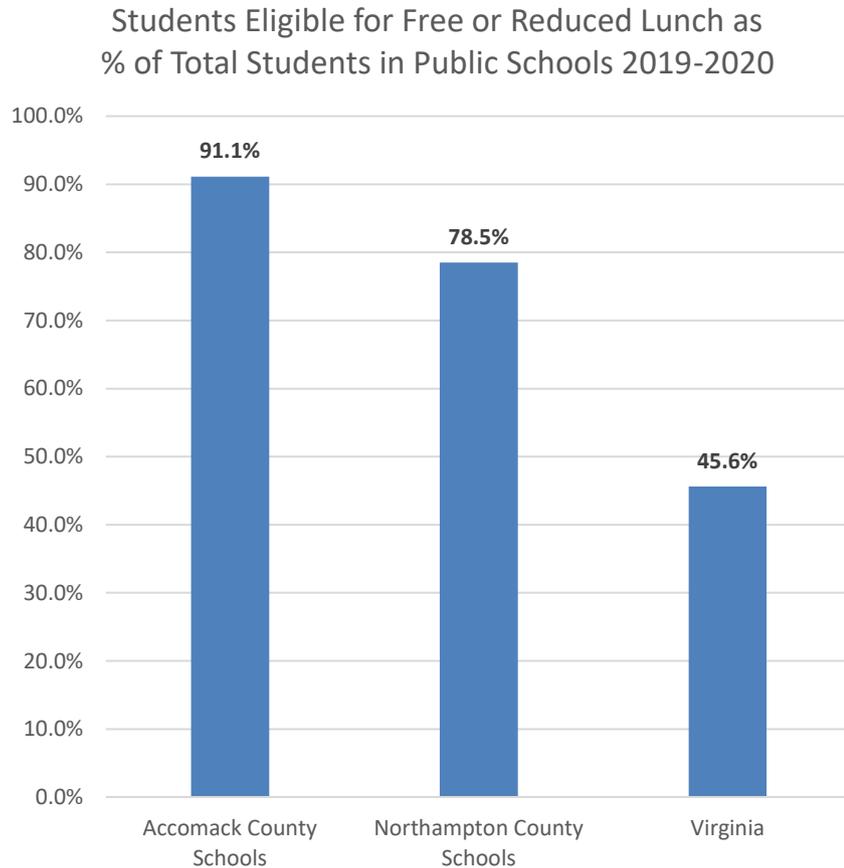
1. Perdue Products
2. Tyson Farms
3. Accomack County School Board
4. Riverside Health System
5. County of Accomack
6. NASA
7. Wal-Mart
8. Eastern Shore Rural Health
9. Food Lion
10. Eastern Shore Community Services

### Northampton County

1. Northampton County Schools
2. LFC Agricultural Services
3. County of Northampton
4. Callard Fish and Oyster Company
5. Chesapeake Bay Bridge Tunnel
6. David's Nursery
7. Food Lion
8. Total Source
9. Eastern Shore Rural Health
10. New Ravenna

# Food Insecurity:

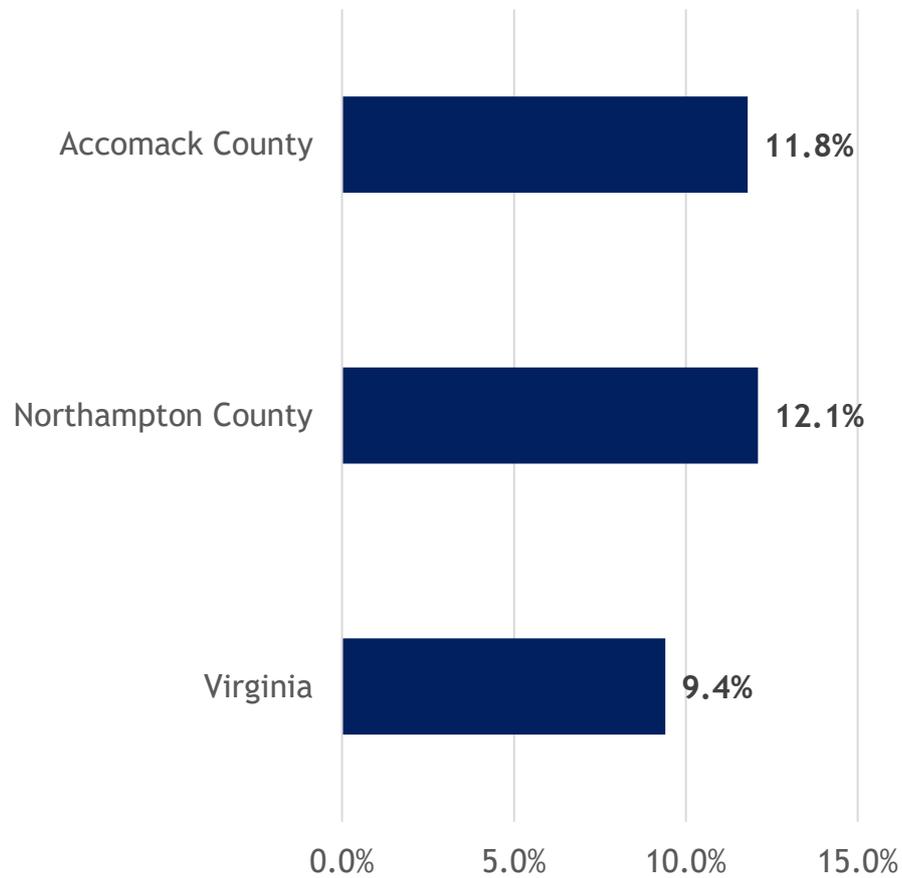
## Students Eligible for Free or Reduced Lunch as % of Total Students in Public Schools 2019 - 2020



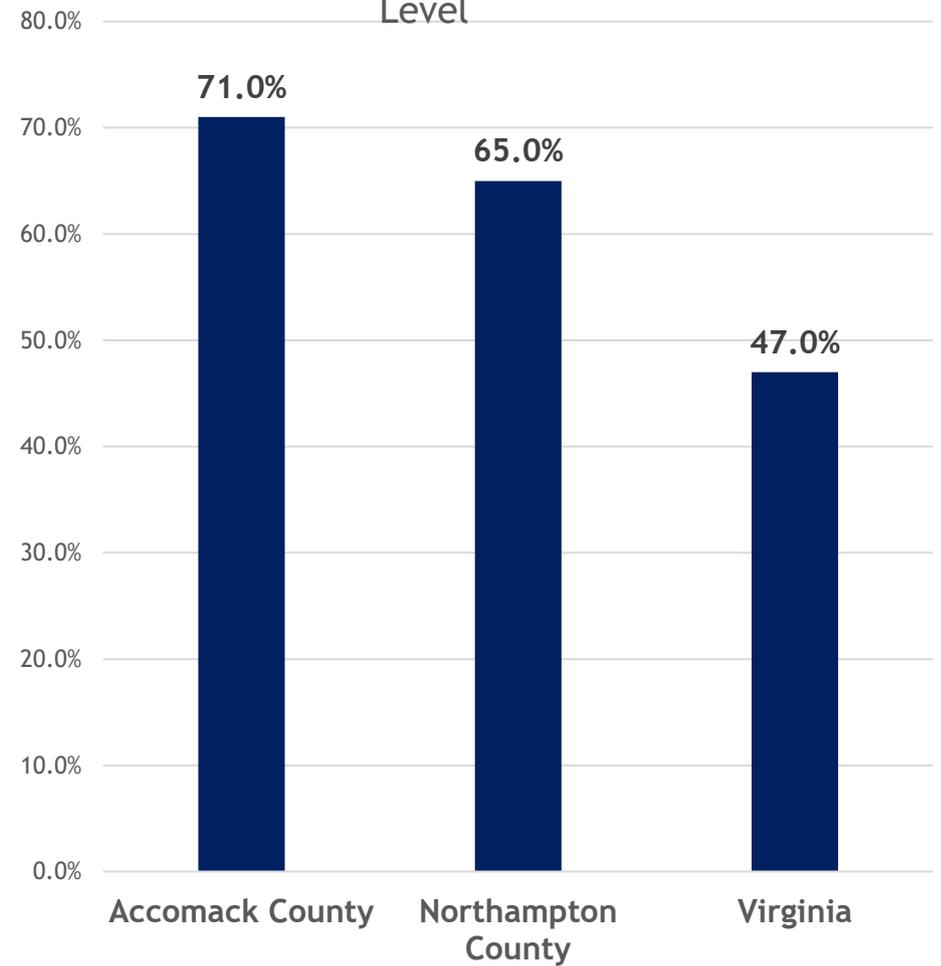
	SNP Memb. (Total Students)	Free Eligible	Free %	Reduced Eligible	Reduced %	Total F/R Eligible	Total F/R %
Accomack County Public Schools	5,223	4,757	91.1%	-	0.0%	4,757	91.1%
Northampton County Public Schools	1,514	1,059	70.0%	130	8.6%	1,189	78.5%
Virginia Total	1,294,730	525,711	40.6%	64,541	5.0%	590,252	45.6%

# Food Insecurity

Food Insecurity Rate

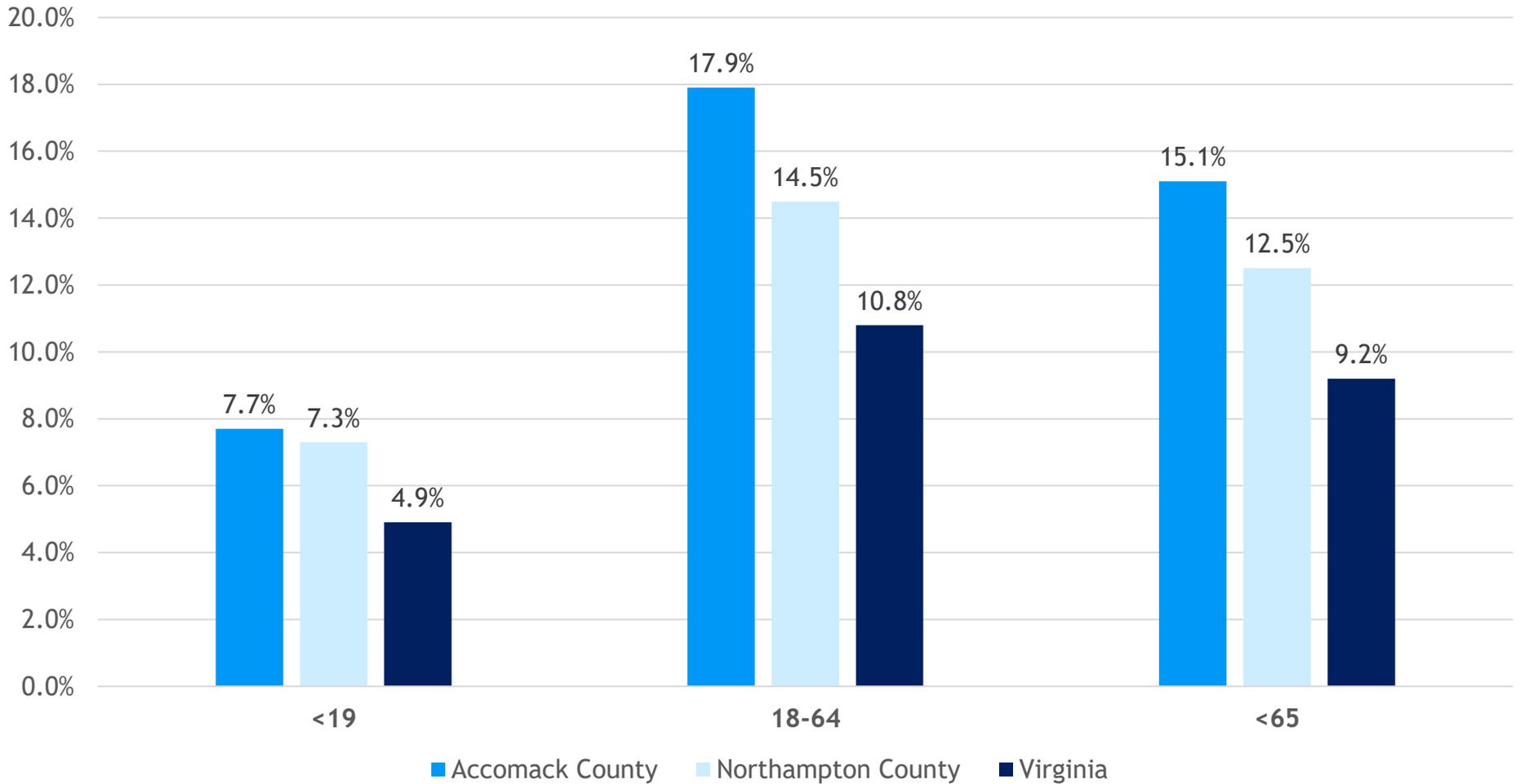


Below SNAP Threshold of 130% Poverty Level



# The Uninsured Non-Elderly

## Uninsured Non-Elderly



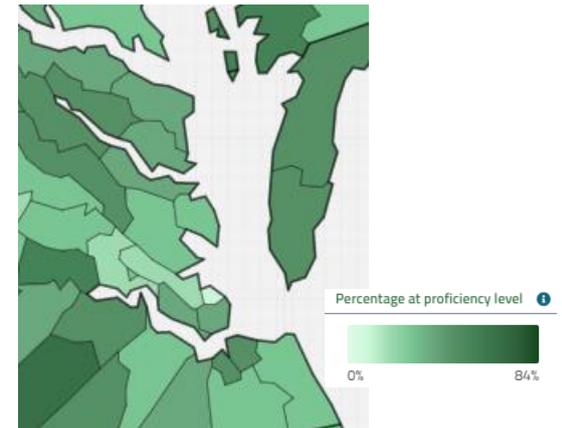
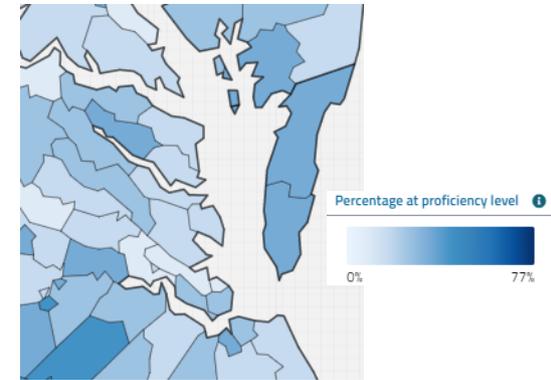
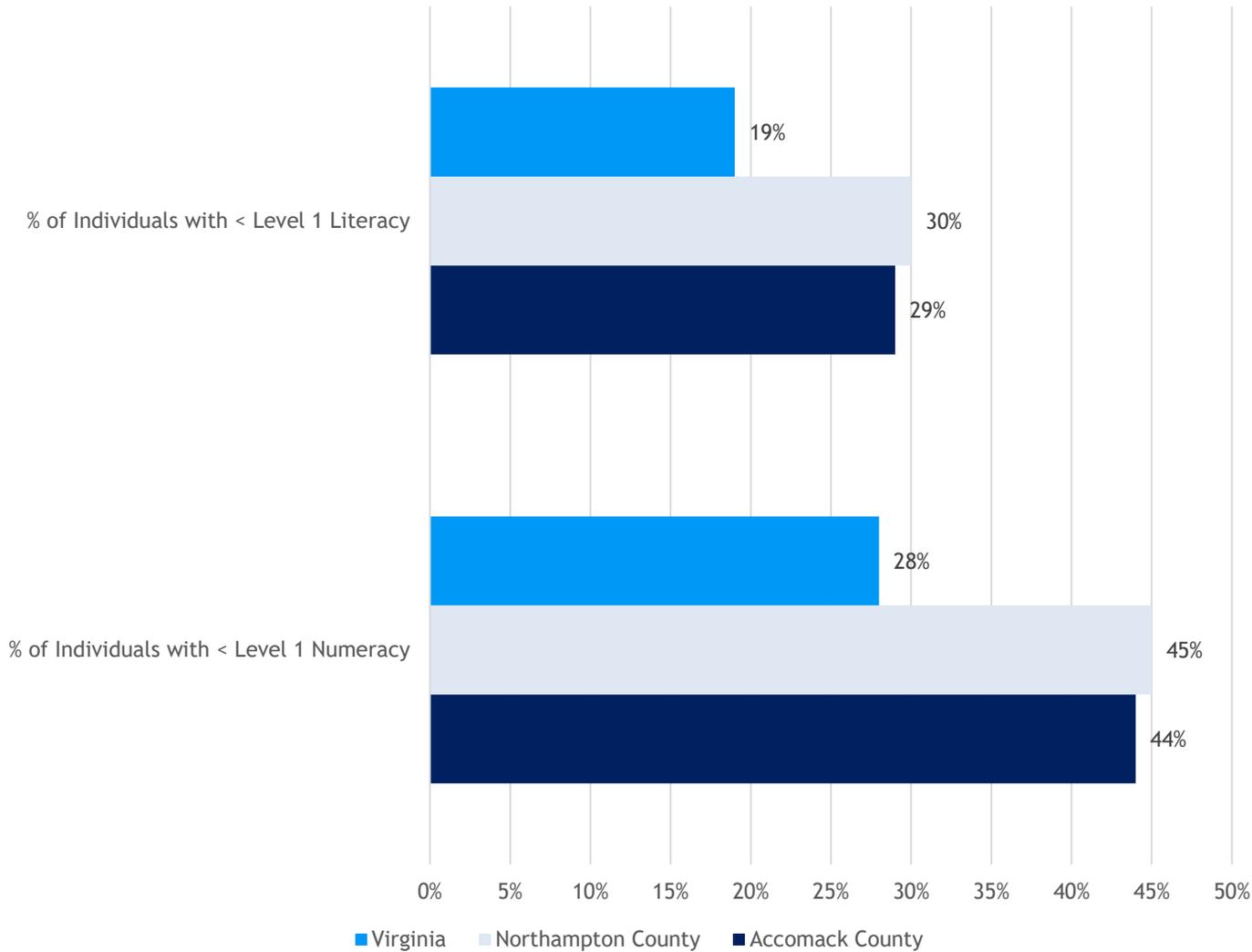
# Medically Underserved Areas and Populations

Locality	MUA / MUP Designation	Index of Medical Underservice Score	Status	Rural / Non-Rural
Accomack County	Primary Care - Medically Underserved Area	50.5	Designated	Rural
Northampton County	Primary Care - Medically Underserved Area	58.6	Designated	Rural

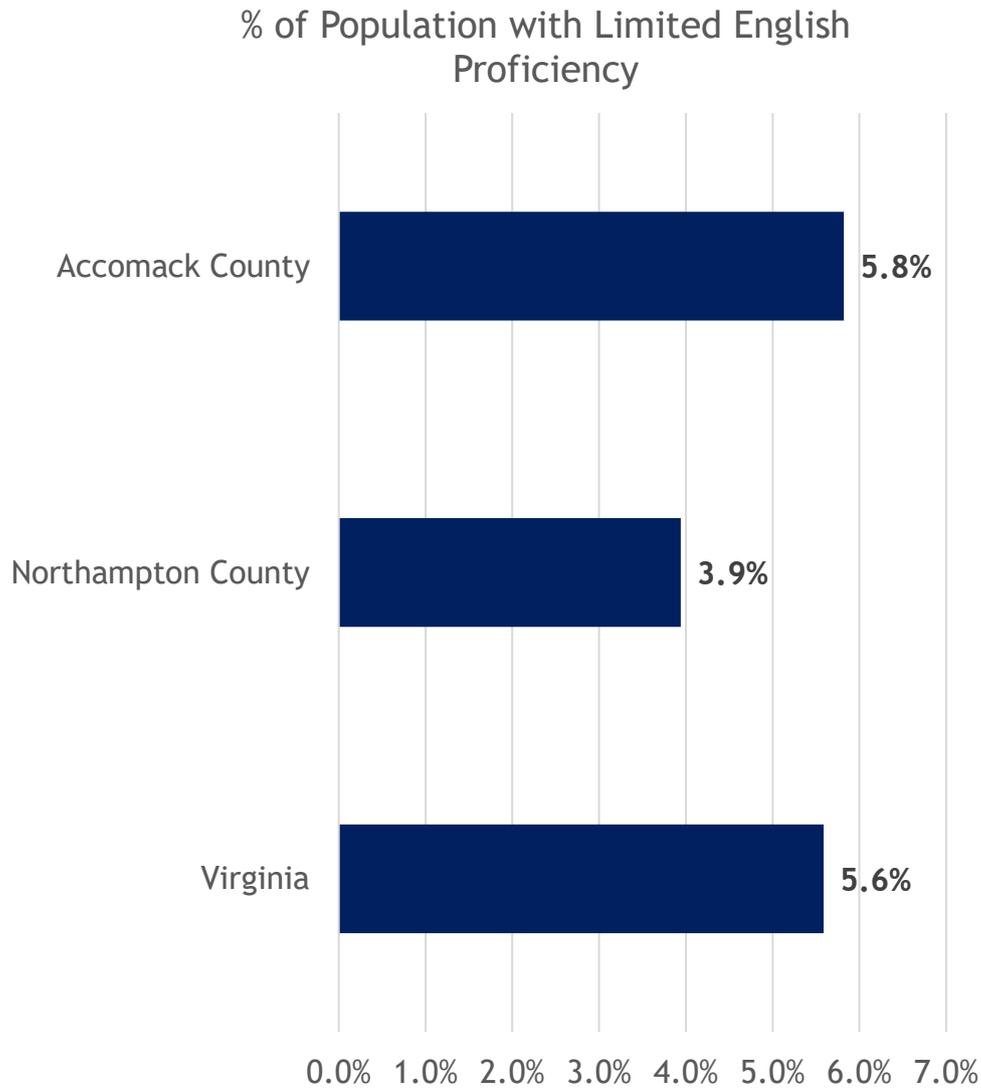
SOURCE: United States Health Resources and Service Administration [muafind.HRSA.gov](http://muafind.HRSA.gov)

# Literacy and Numeracy Levels

% of Population <Level 1 Literacy or <Level 1 Numeracy Skills



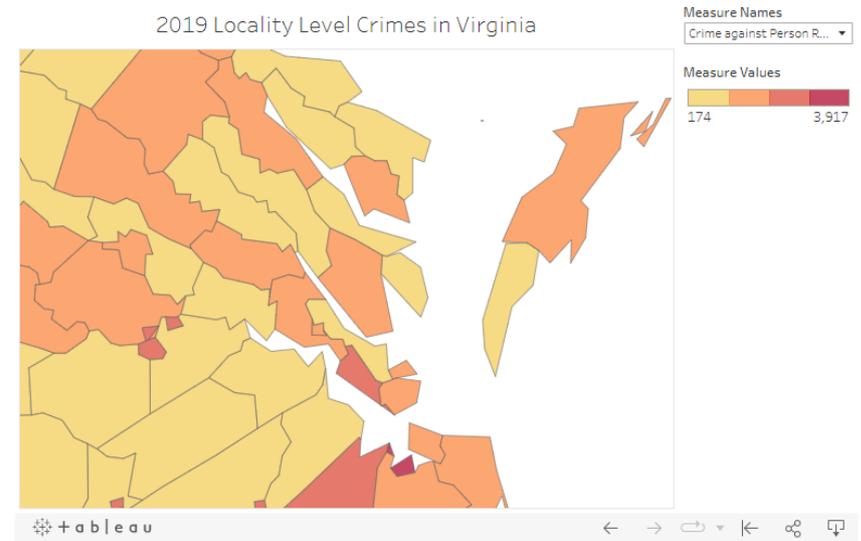
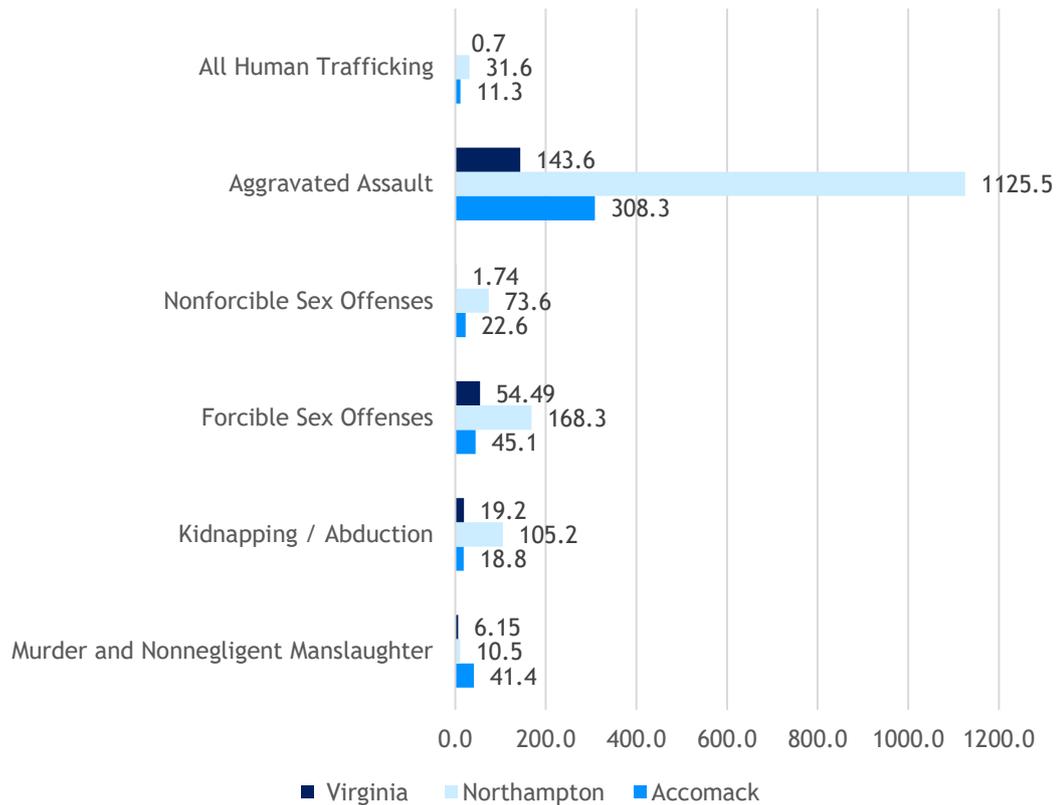
# Limited English Proficiency



Language	Population in RSMH Service Area	LEP% of RSMH Service Area
Spanish or Spanish Creole	2,034	4.7%
French Creole	125	0.3%
Tagalog	37	0.1%
French (including Patois & Cajun)	27	0.1%

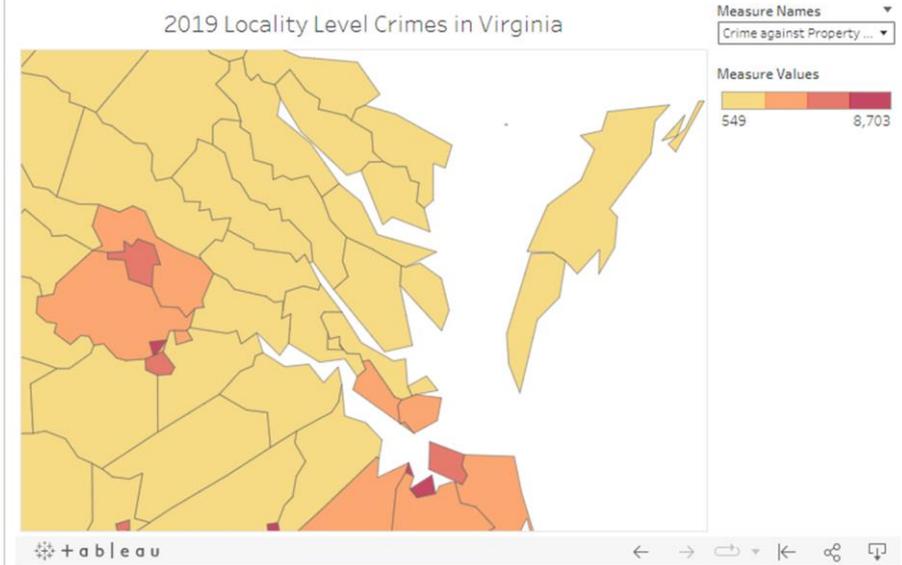
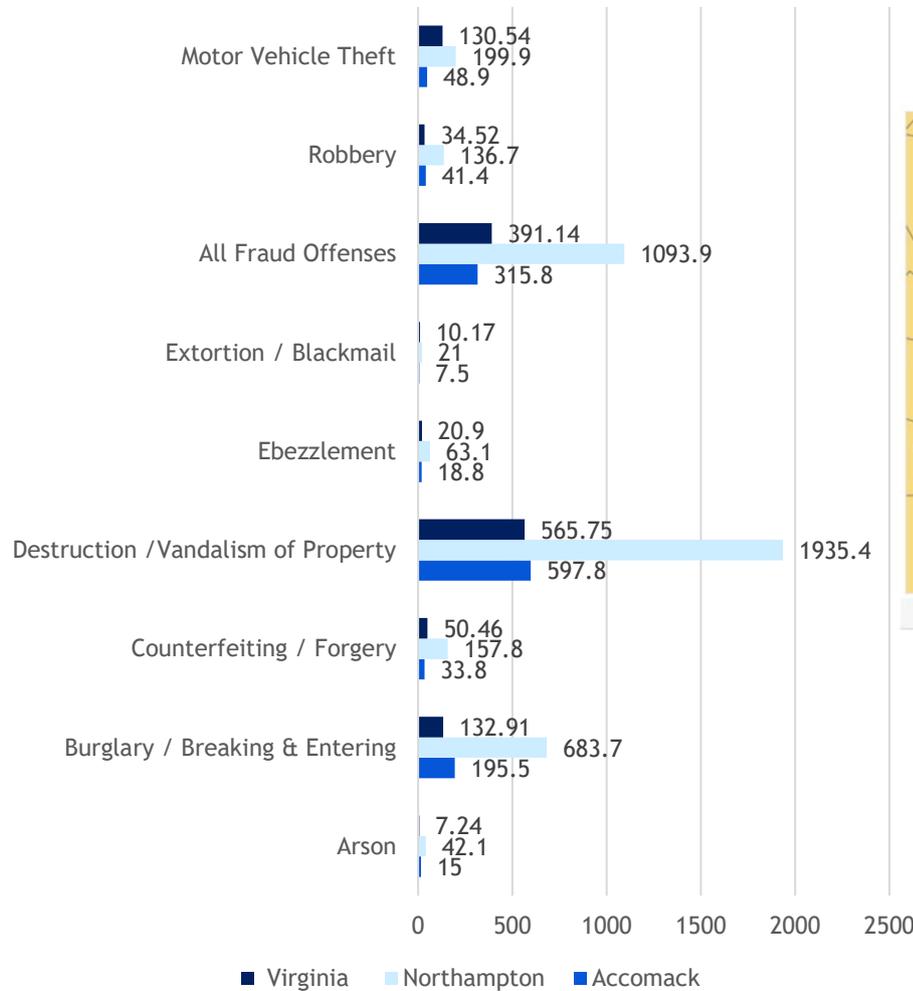
# Crimes Against People (Rates per 100k Population)

Crimes Against People Rate per 100k



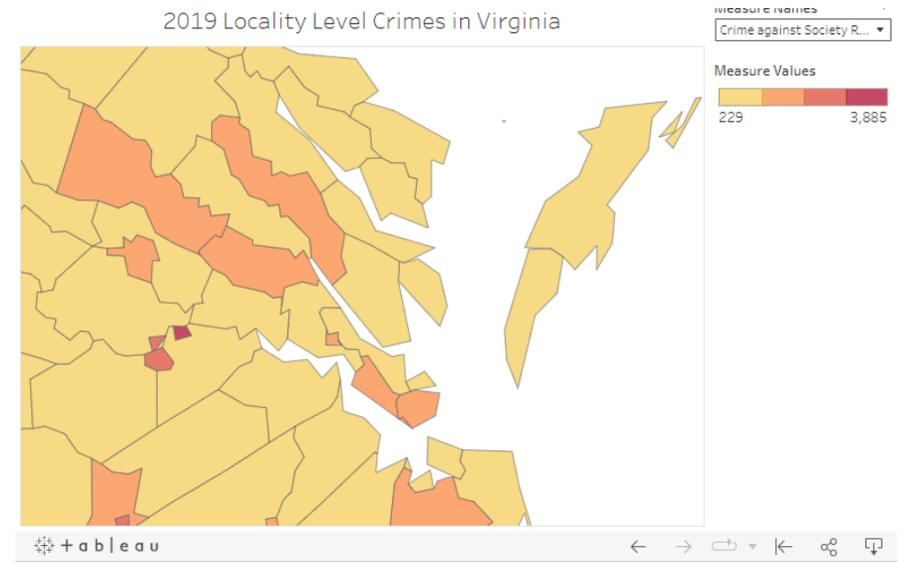
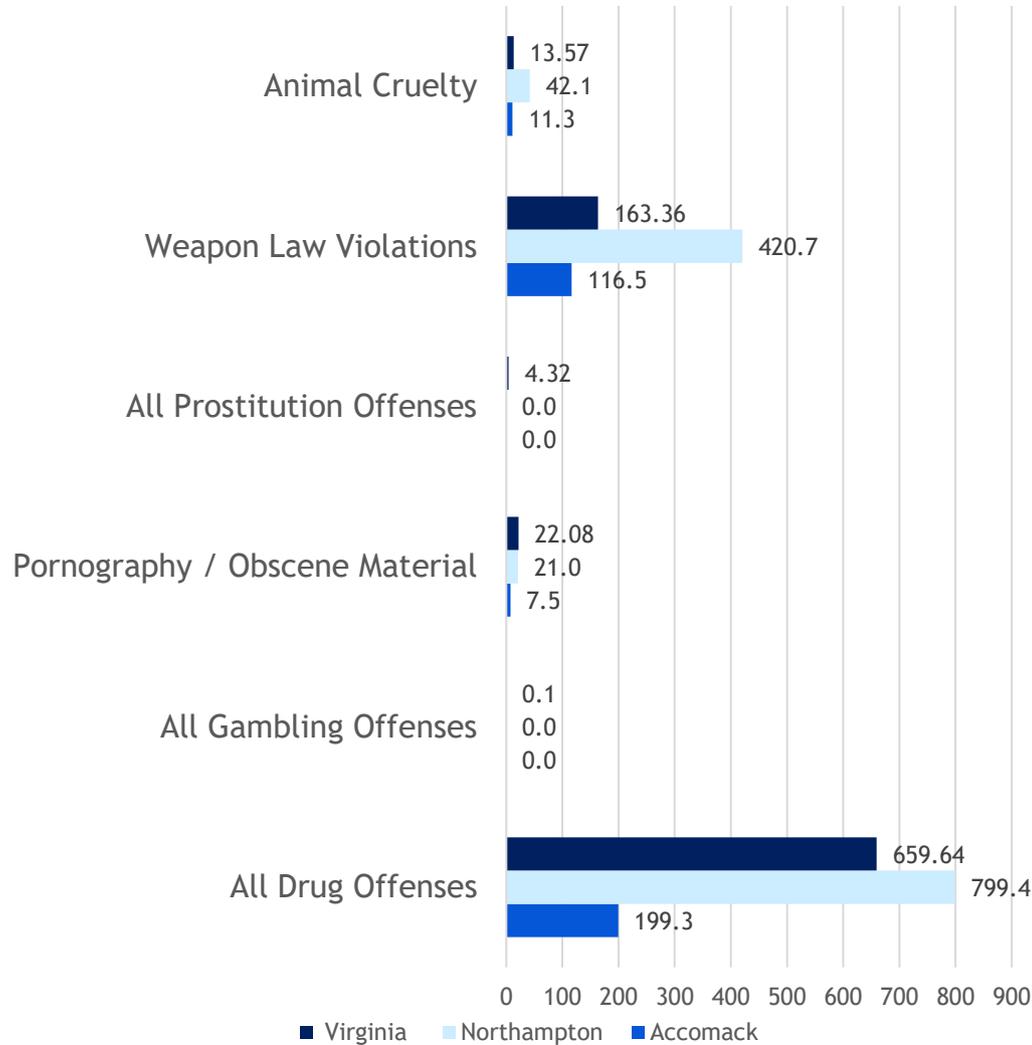
# Crimes Against Property (Rates per 100k Population)

## Crimes Against Property Rate per 100K



# Crimes Against Society (Rates per 100k Population)

Crimes Against Society Rate per 100k

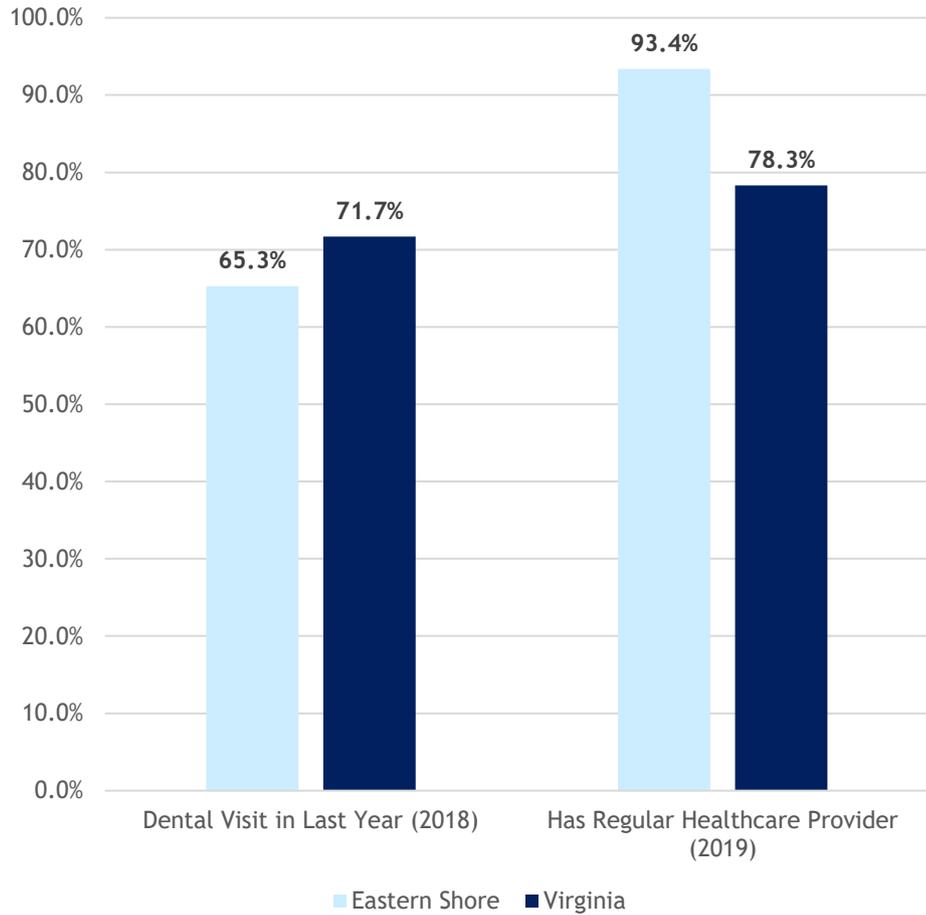


# The RSMH Community

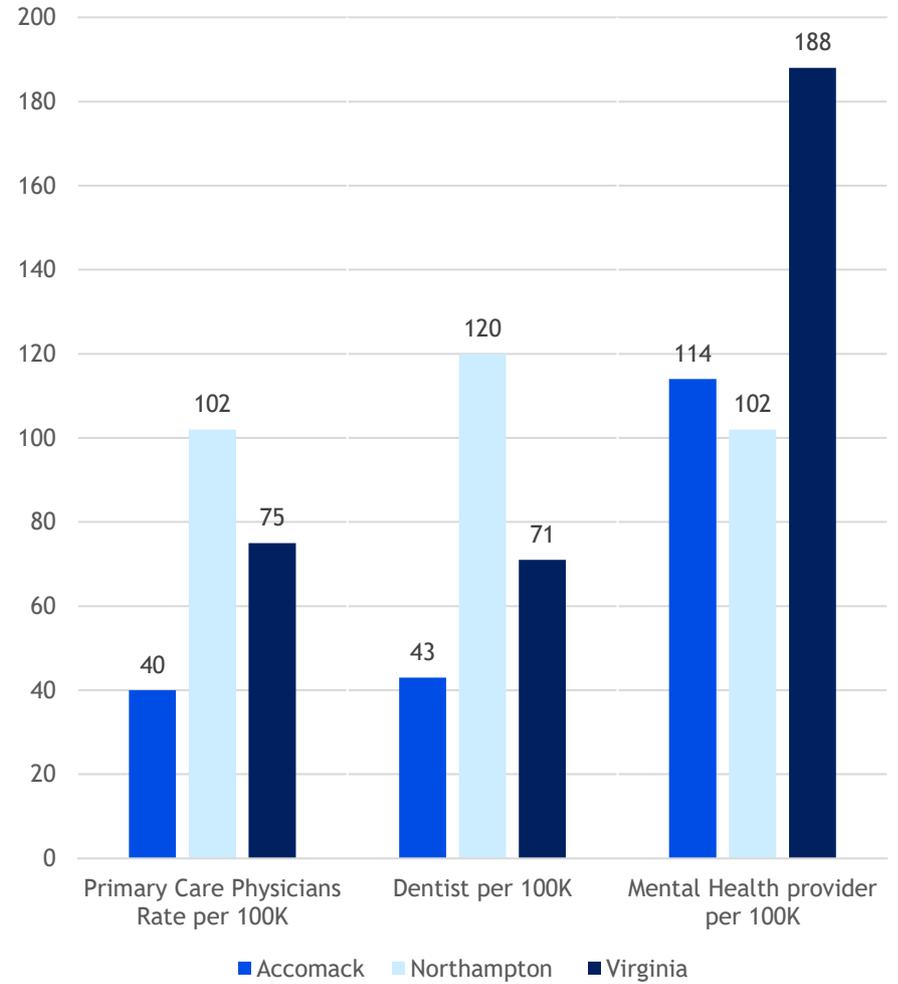
Primary & Preventative Health Profile and  
Regional Health Resources

# Healthcare Access

## Access to Primary & Preventative Oral and Oral Healthcare



## Providers per 100K

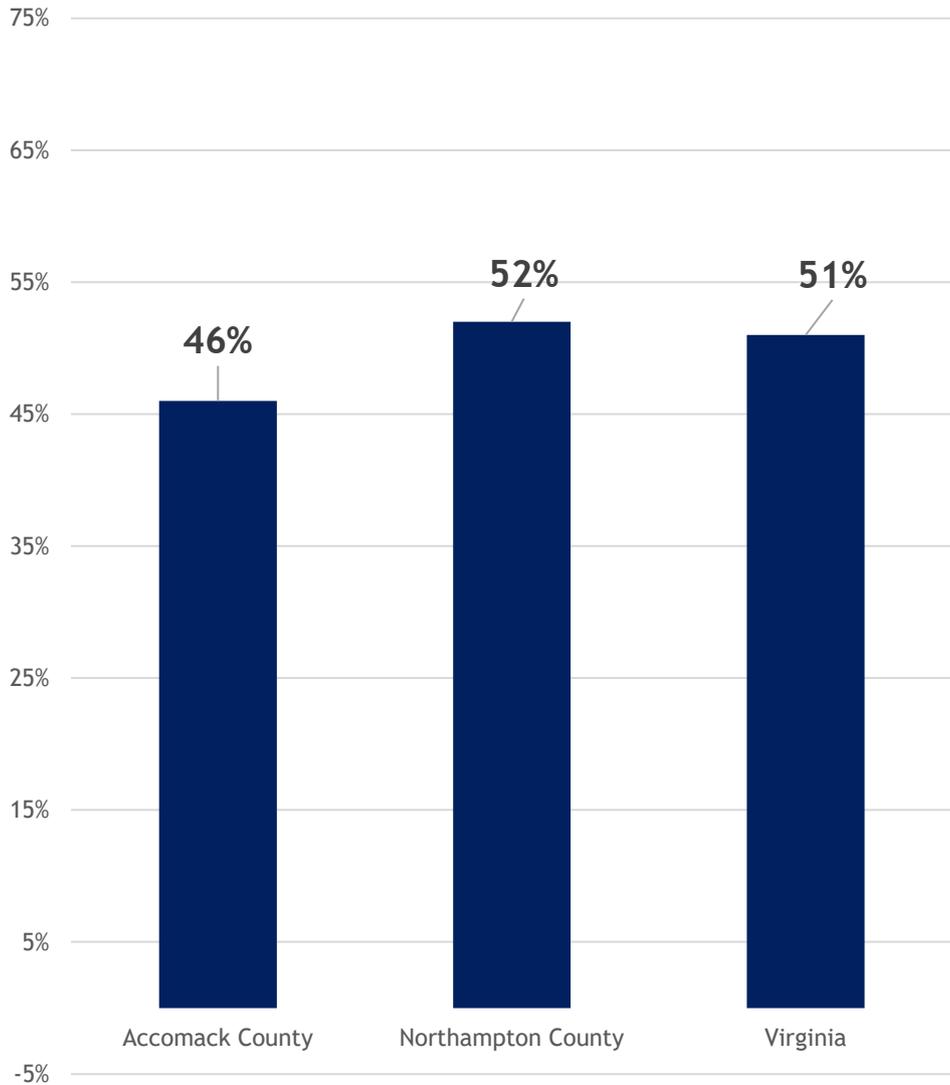


Source: Virginia Department of Health Behavioral Risk Factor Surveillance Survey <https://www.vdh.virginia.gov/brfss/>

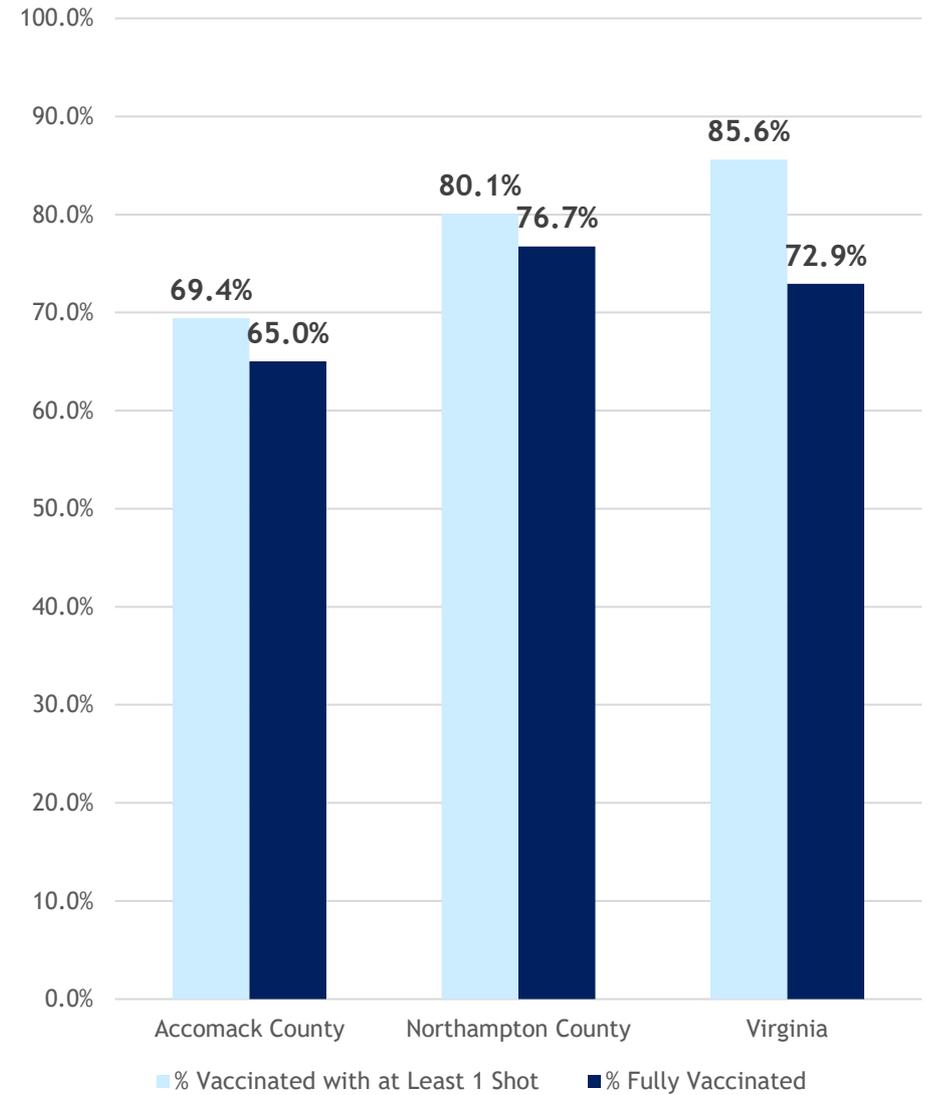
Source: 2018 data County Health Rankings

# Vaccination Rates: Flu, COVID-19

## Flu Vaccine Rate (2018)

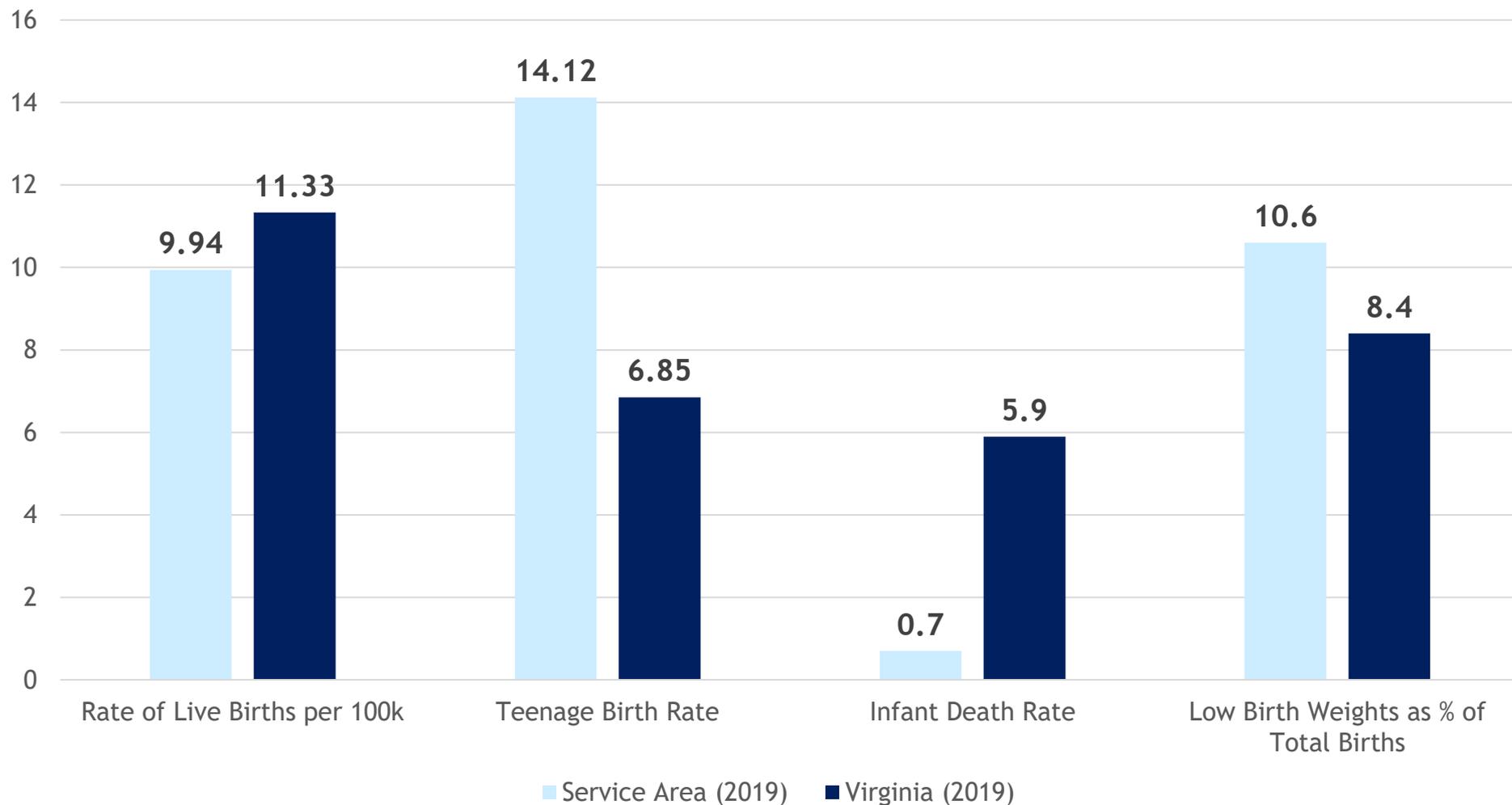


## COVID-19 Vaccination Rates (2/2022)



# Maternal and Child Health Profile (2019)

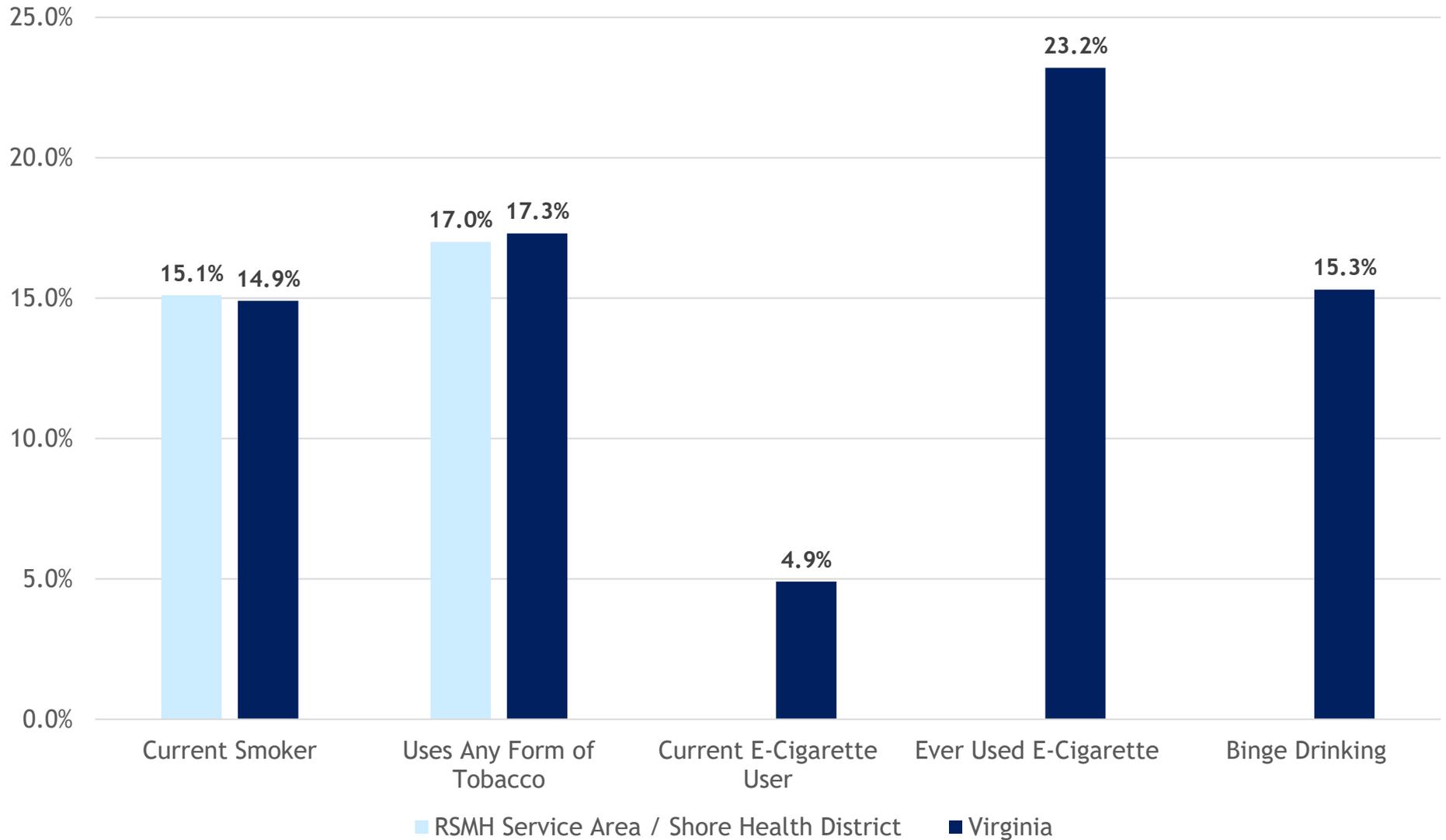
## Maternal Child Health Profile



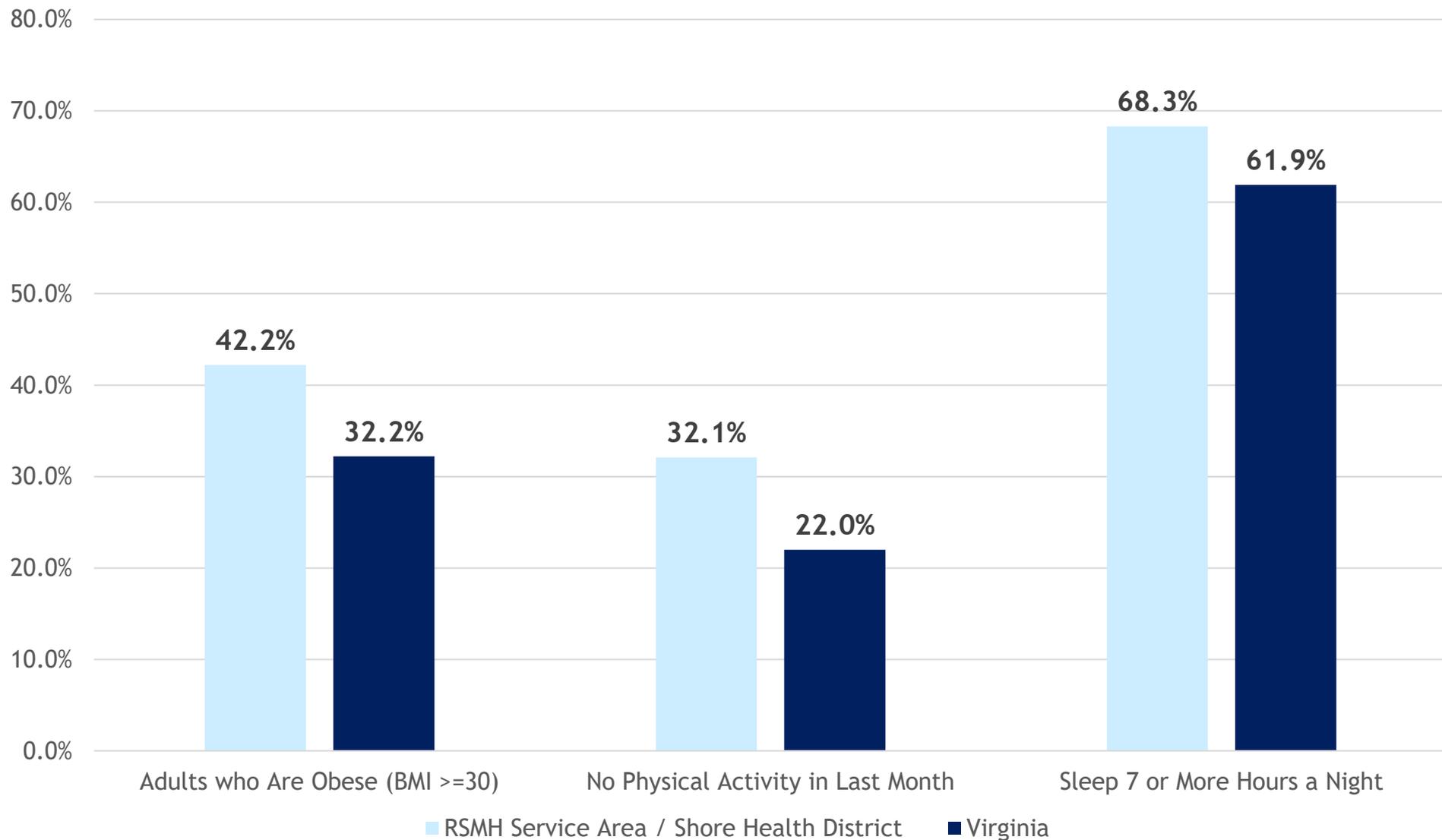
# Maternal and Child Health Profile (2019)

	Service Area	Virginia
Total Live Births	445	97,434
Rate of Live Births per 100k	9.94	11.33
Total Low Weight Births	47	8,162
Low birth Weight as Percent of Total Births	10.6%	8.4%
Total Live Births to Teens (age 10 - 19)	30	3,651
Teenage Birth rate	14.12	6.85
Live Births to Teens <15	0	29
Live Births to Teens Age 15-17	8	824
Live Births to Teens age 18-19	22	2,798
Total Infant Deaths	3	570
Infant Death Rate	0.7	5.9

# Tobacco, Alcohol and E-Cigarette Use

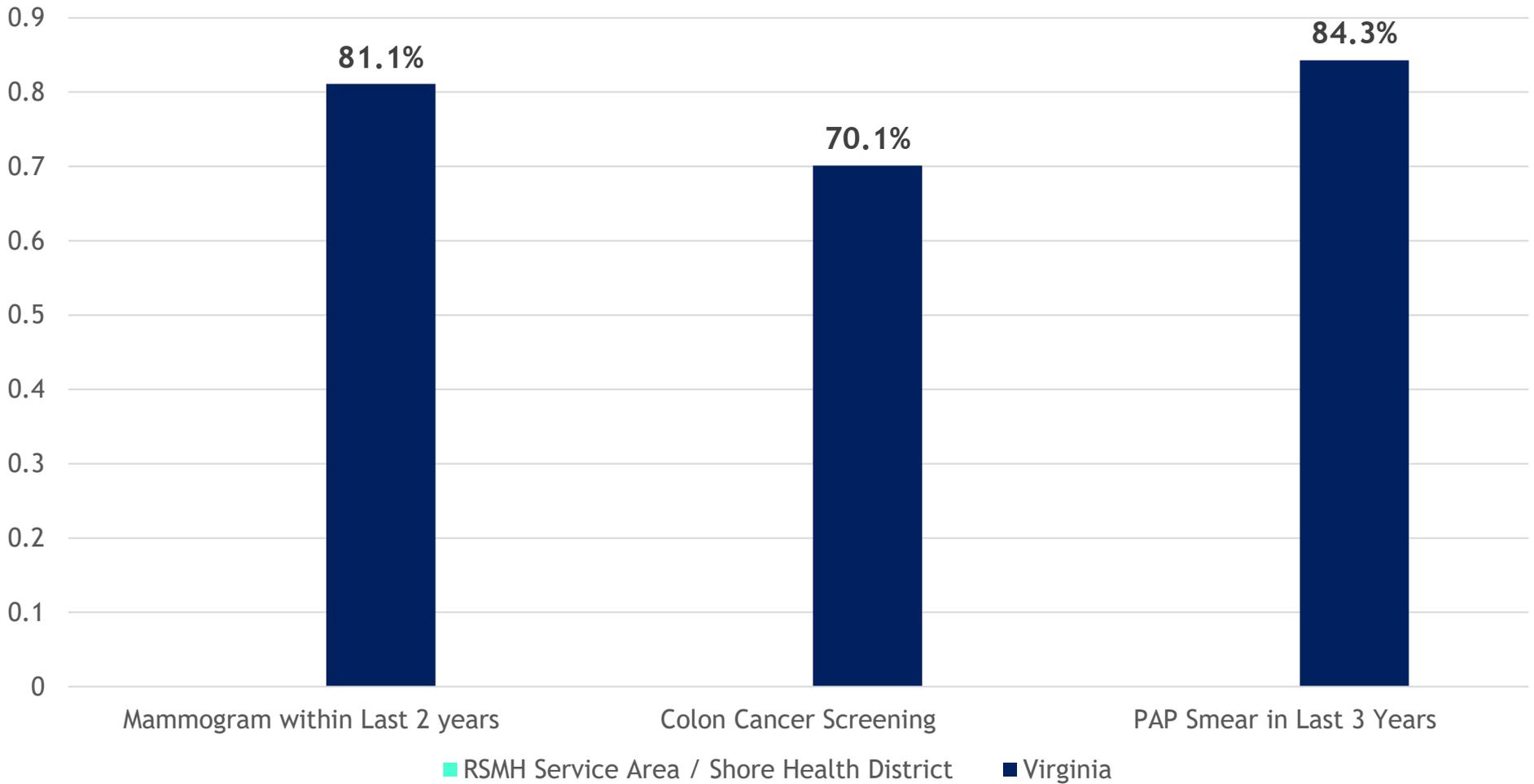


# Obesity, Physical Inactivity and Adequate Sleep Rates



# Cancer Screening Rates

*Mammography In last 2 Years, Colorectal Screening and PAP Smear within last 3 Years*



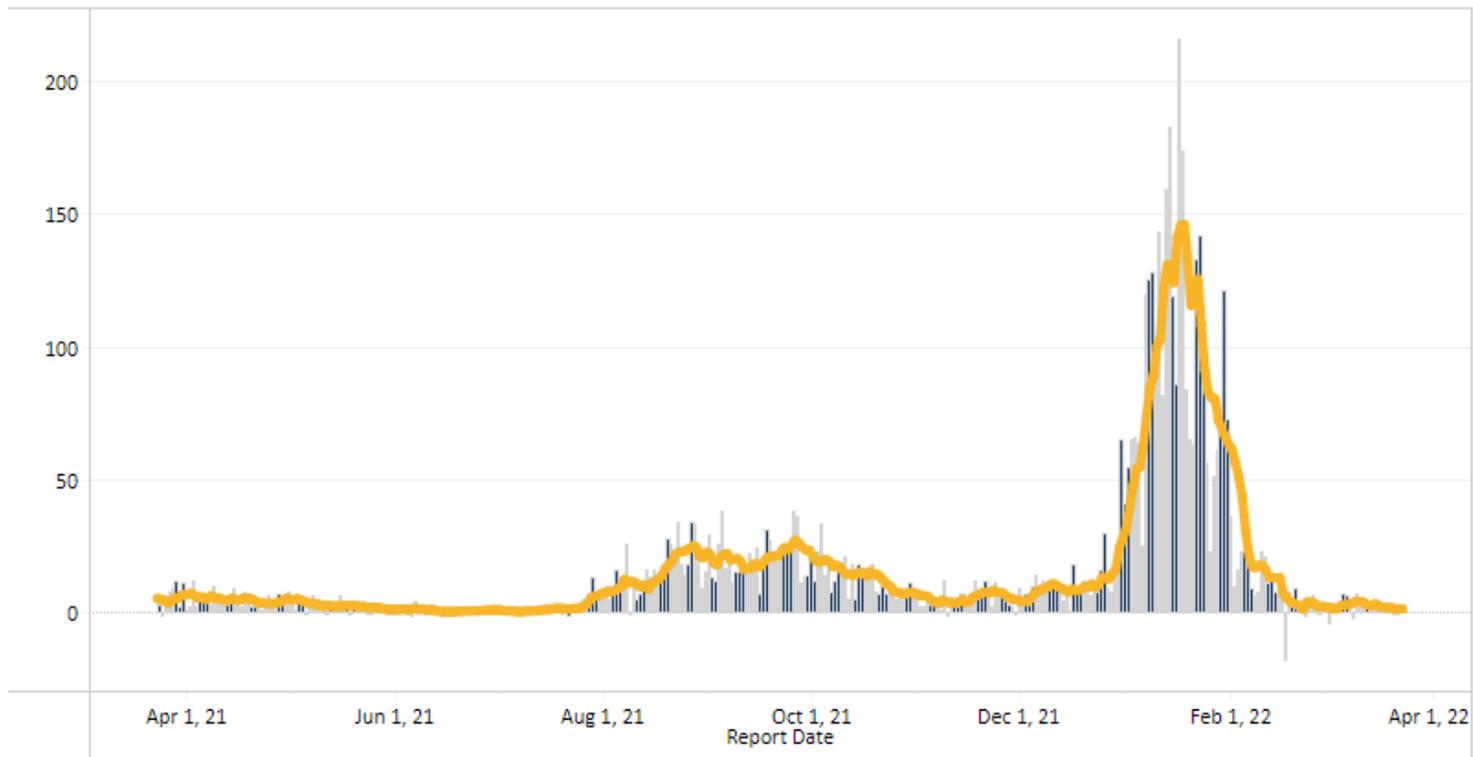
# The RSMH Community

## COVID-19 Pandemic

# COVID: Eastern Shore Health District (Accomack and Northampton Counties)

Number of Cases by Report Date for Eastern Shore District for the past year

Number of cases by the date reported to VDH  
■ New Cases      ■ New Cases 7 Day Average



\* Includes people with either a positive molecular/PCR test (Confirmed), positive antigen test (Probable) or symptomatic with known exposure to COVID-19 (Probable).

\*\* Hospitalization of a case is captured at the time VDH performs case investigation. This underrepresents the total number of hospitalizations in Virginia

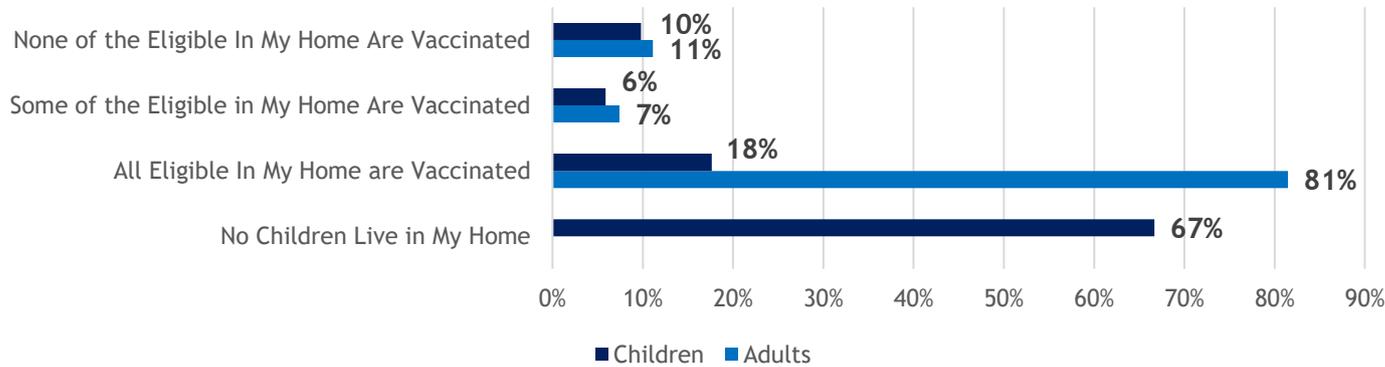
† VDH adopted the updated CDC COVID-19 2021 Surveillance Case Definition on September 1, 2021 which is found here: --

<https://ndc.services.cdc.gov/case-definitions/coronavirus-disease-2019-2021/>

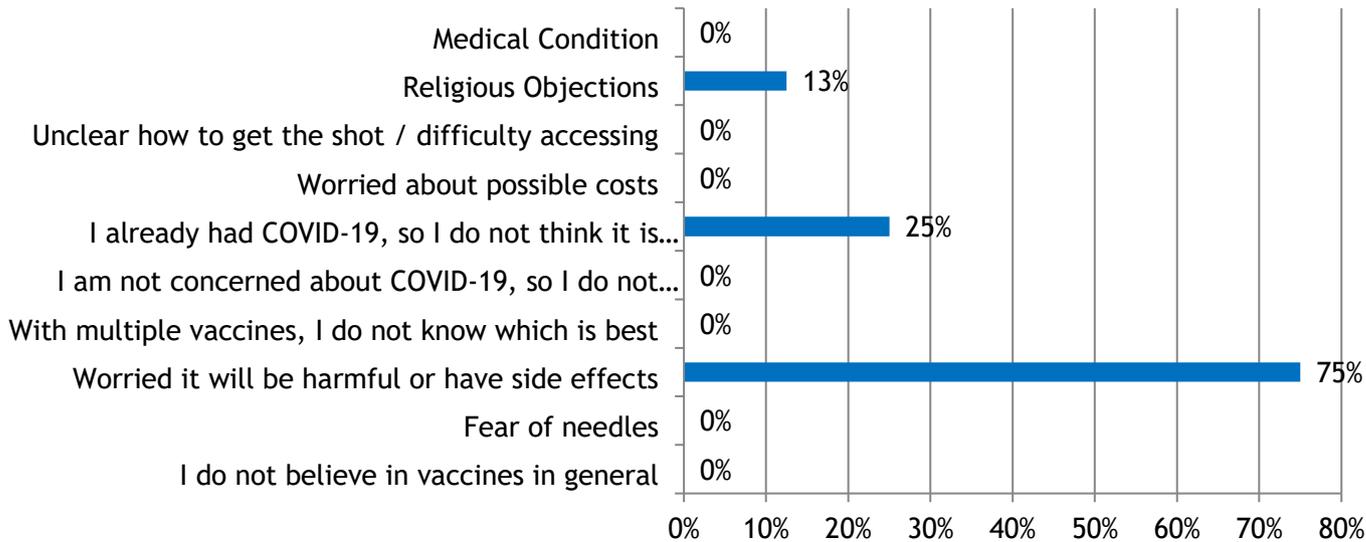
Source: Cases - Virginia Electronic Disease Surveillance System (VEDSS), data entered by 5:00 PM the prior day.

# Community Member Survey: COVID-19 Vaccination

Did the Members of Your Household Get the COVID-19 Vaccine?

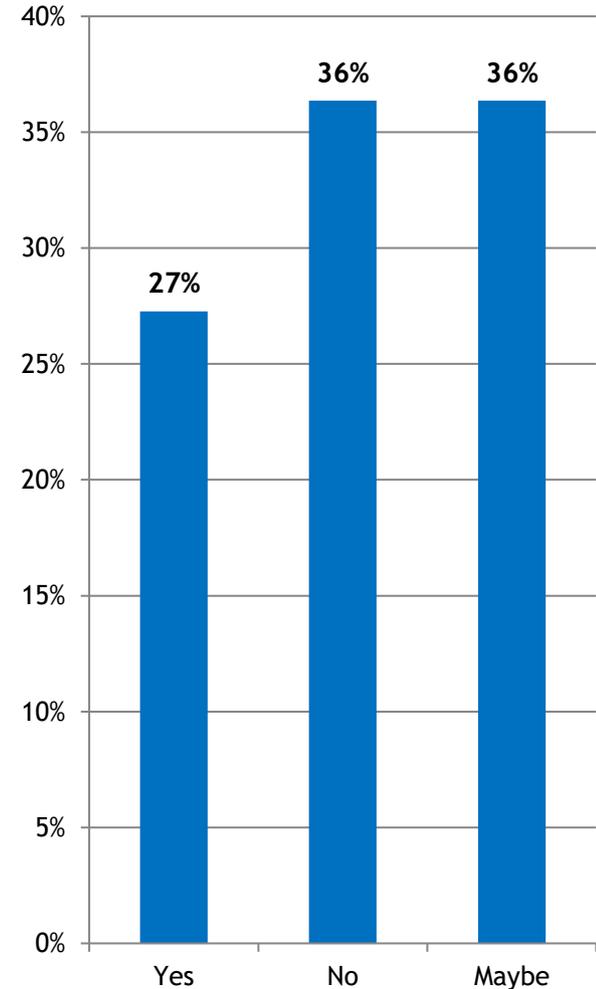


Please share your concerns about the COVID-19 vaccine  
(select all that apply):



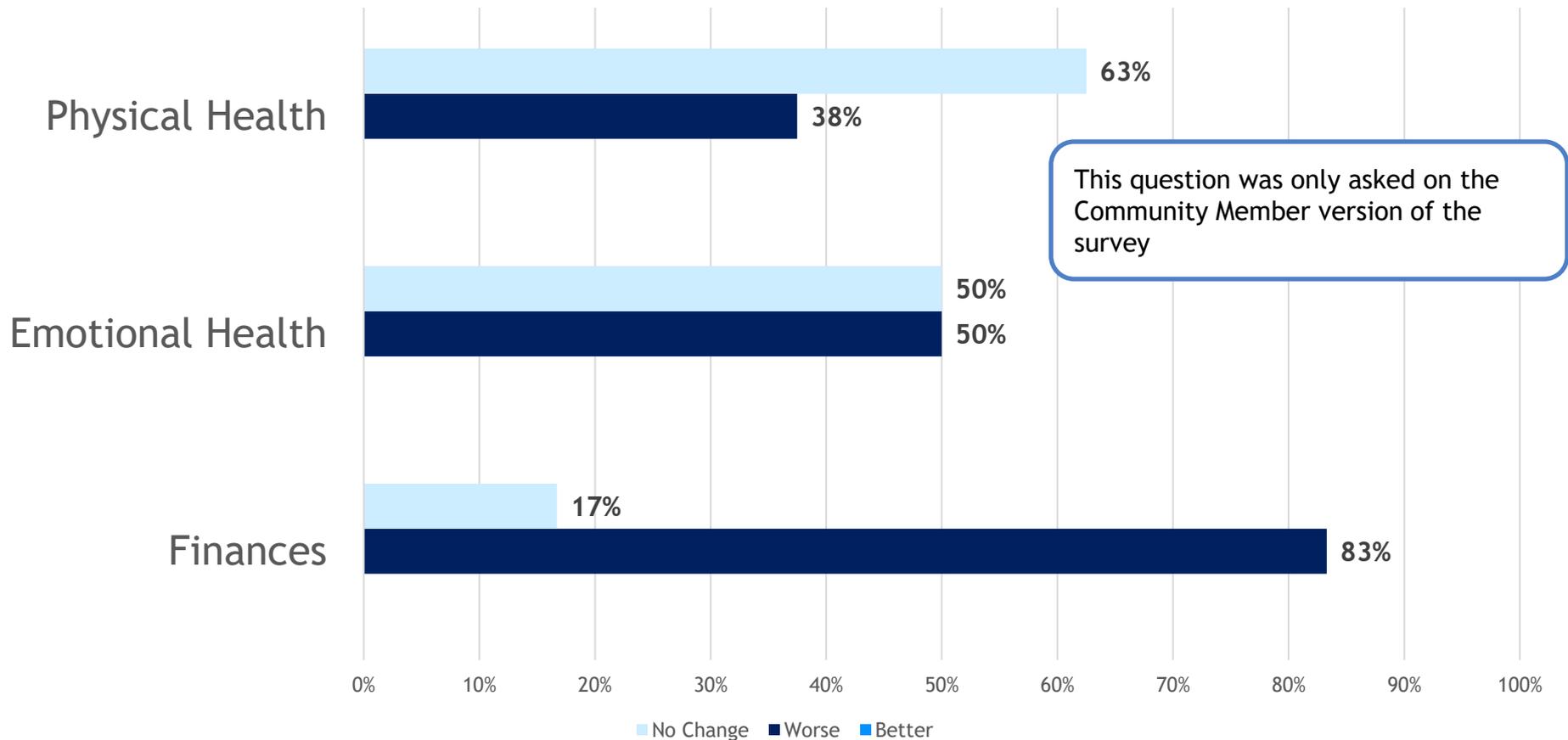
This question was only asked on the Community Member version of the survey

Do you plan to have your child(ren) get the COVID-19 vaccine in the future?



# Community Member Survey:

Since the Start of the Pandemic, My Family's \_\_\_\_\_ is Better, Worse, No Change

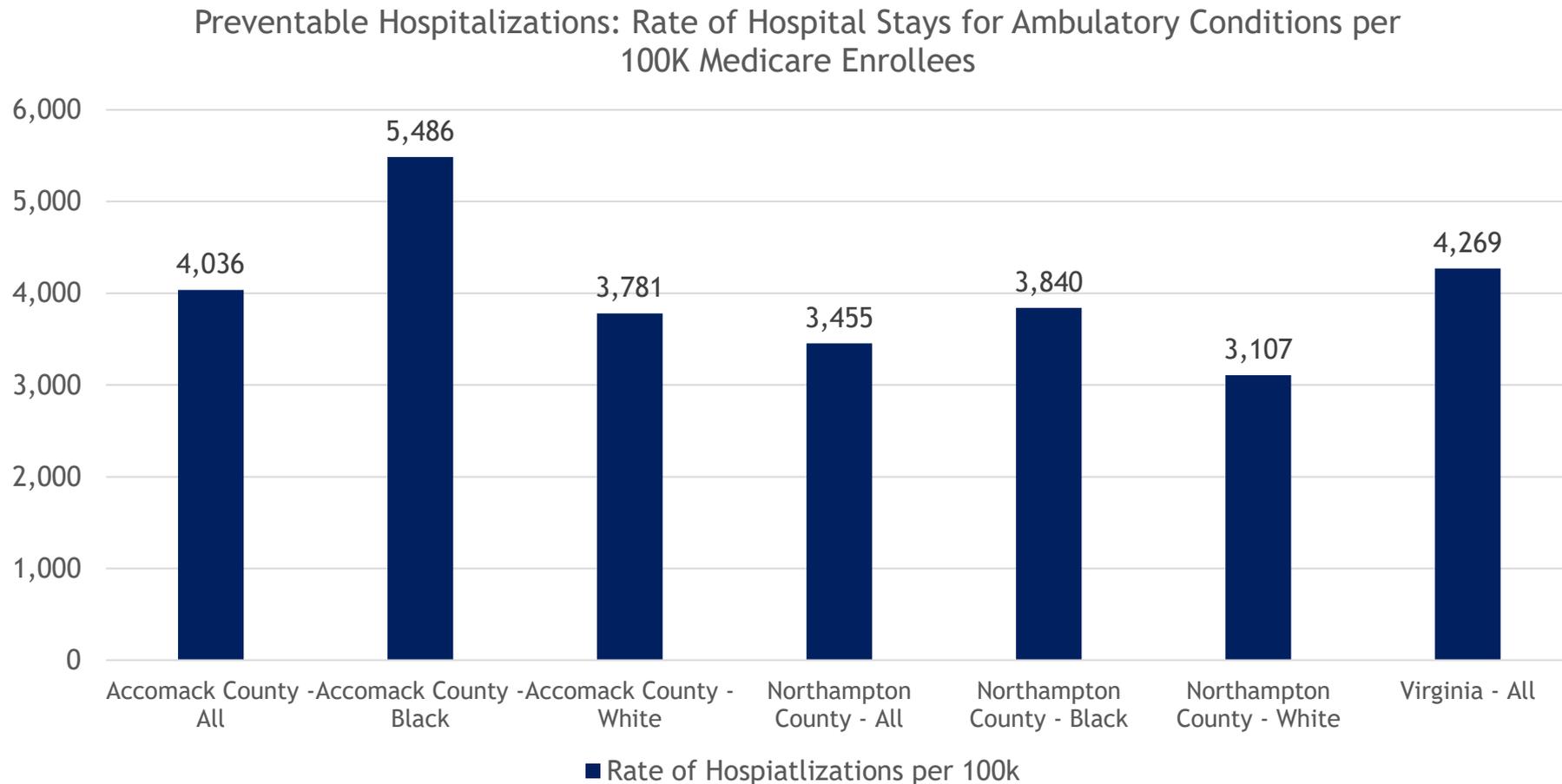


# The RSMH Community

## Morbidity & Mortality

# Preventable Hospitalizations

Rate of Hospital Stays for Ambulatory Conditions per 100k Medicare Enrollees  
(2018 is latest available data)

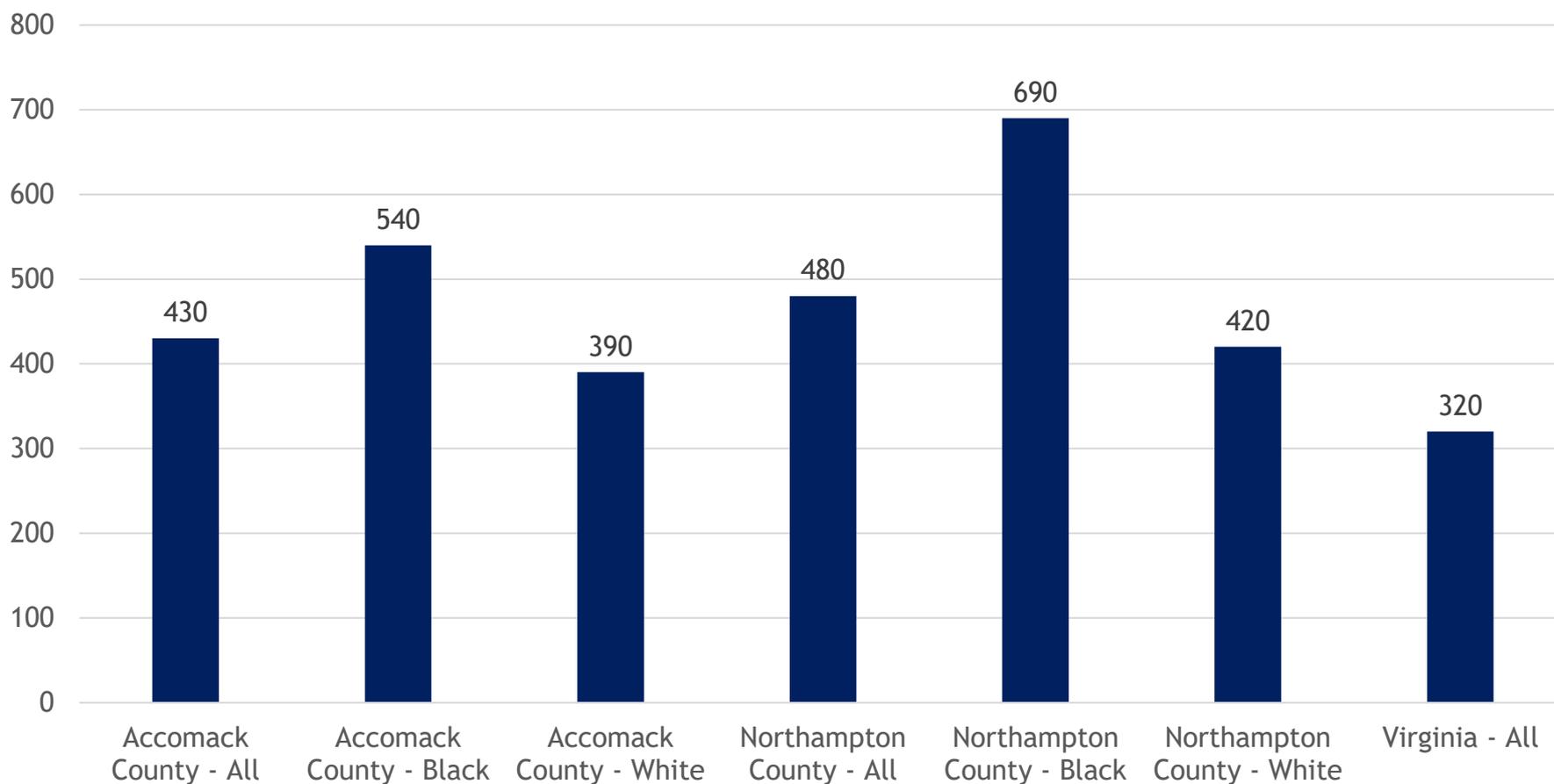


# Premature Age Adjusted Mortality

Number of Deaths Among Residents <75 per 100k (age adjusted)

2017-2019 is most recent data available

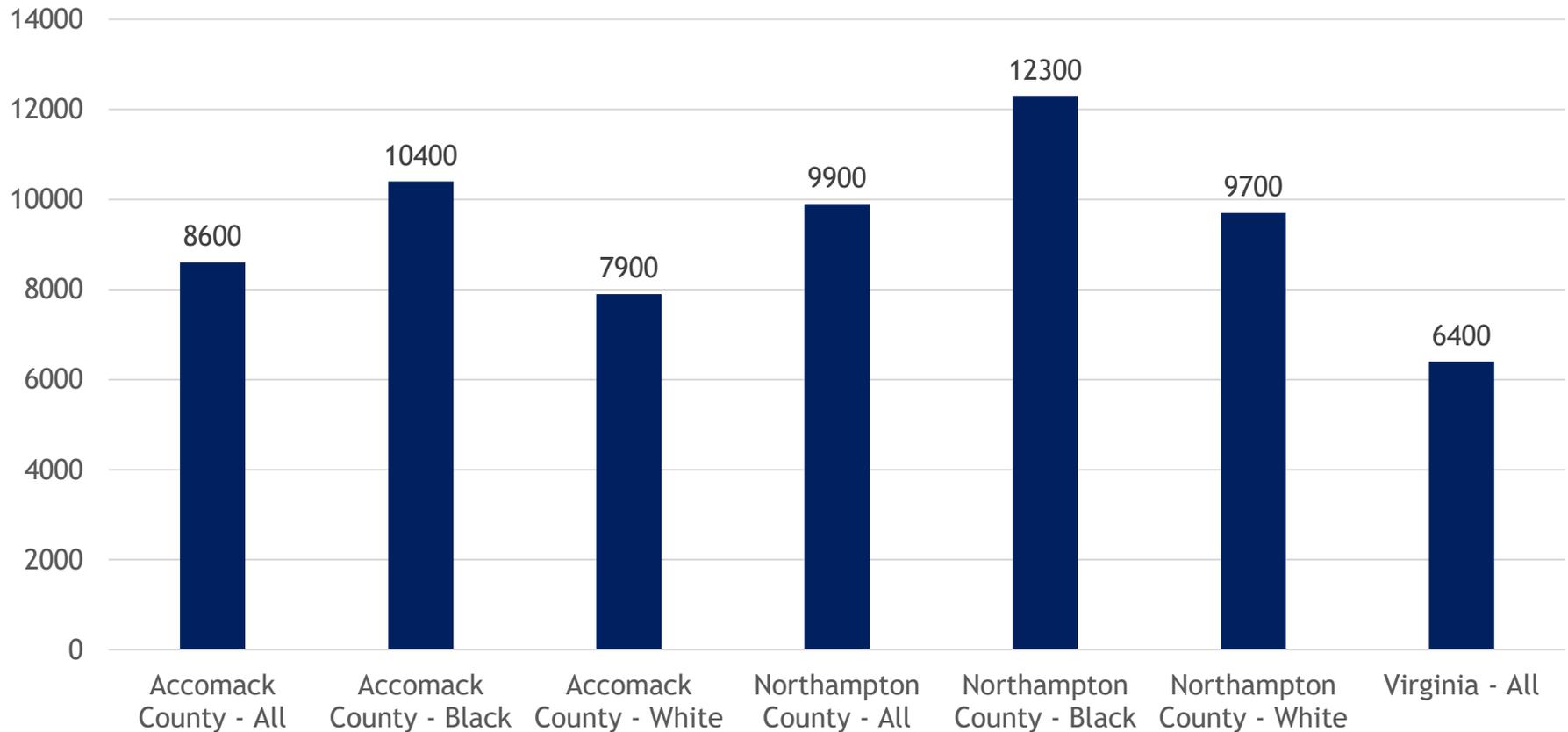
Premature Age Adjusted Mortality: Number of Deaths Among Residents <75 per 100K (Age Adjusted)



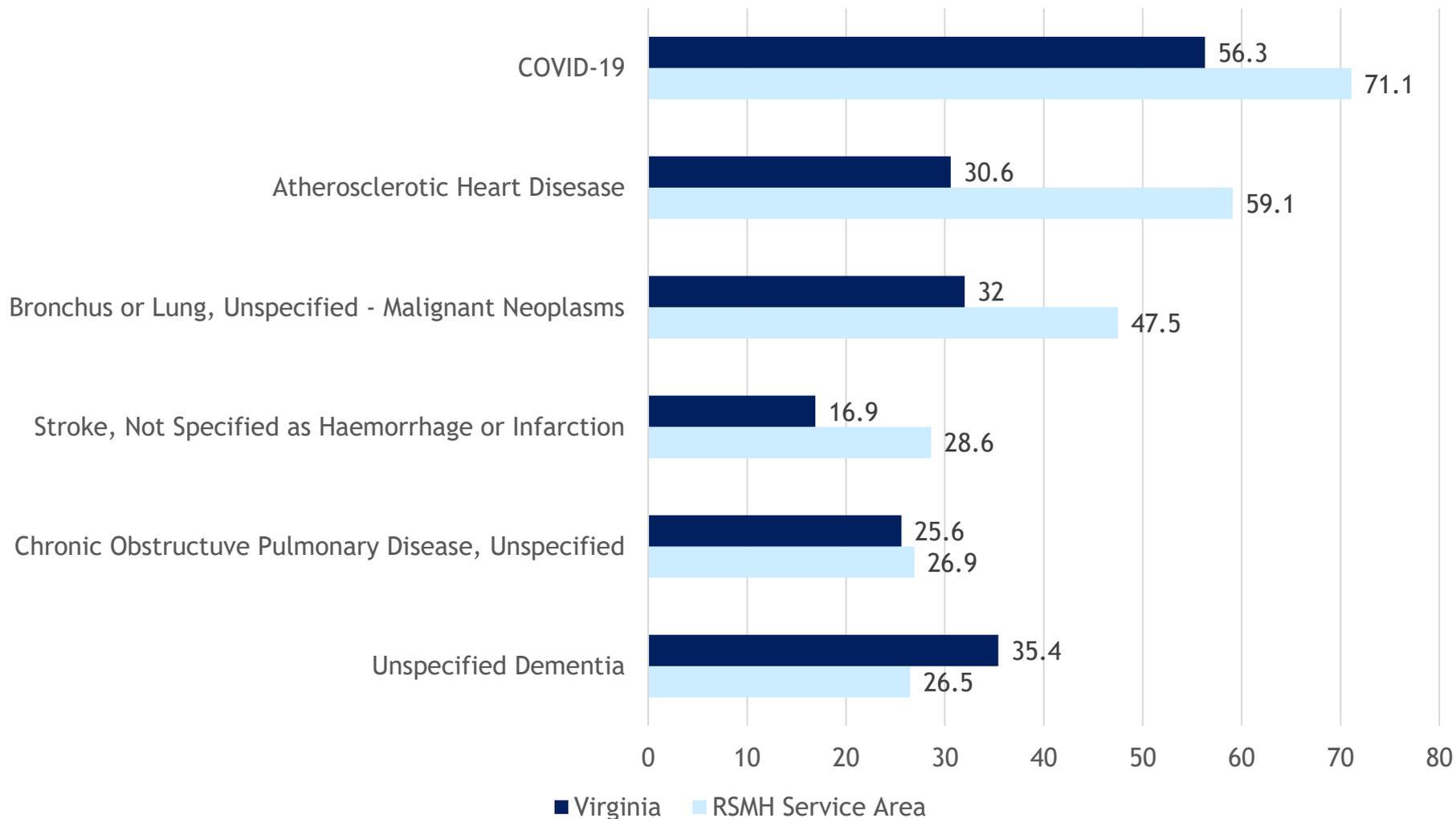
# Years Potential Life Lost

Years of Potential Life Lost Before Age 75 per 100k (age adjusted)  
2017-2019 is most recent data available

Years of Potential Life Lost Before Age 75 per 100K



# Age Adjusted Death Rate per 100K vs Virginia by Cause of Death (2020)

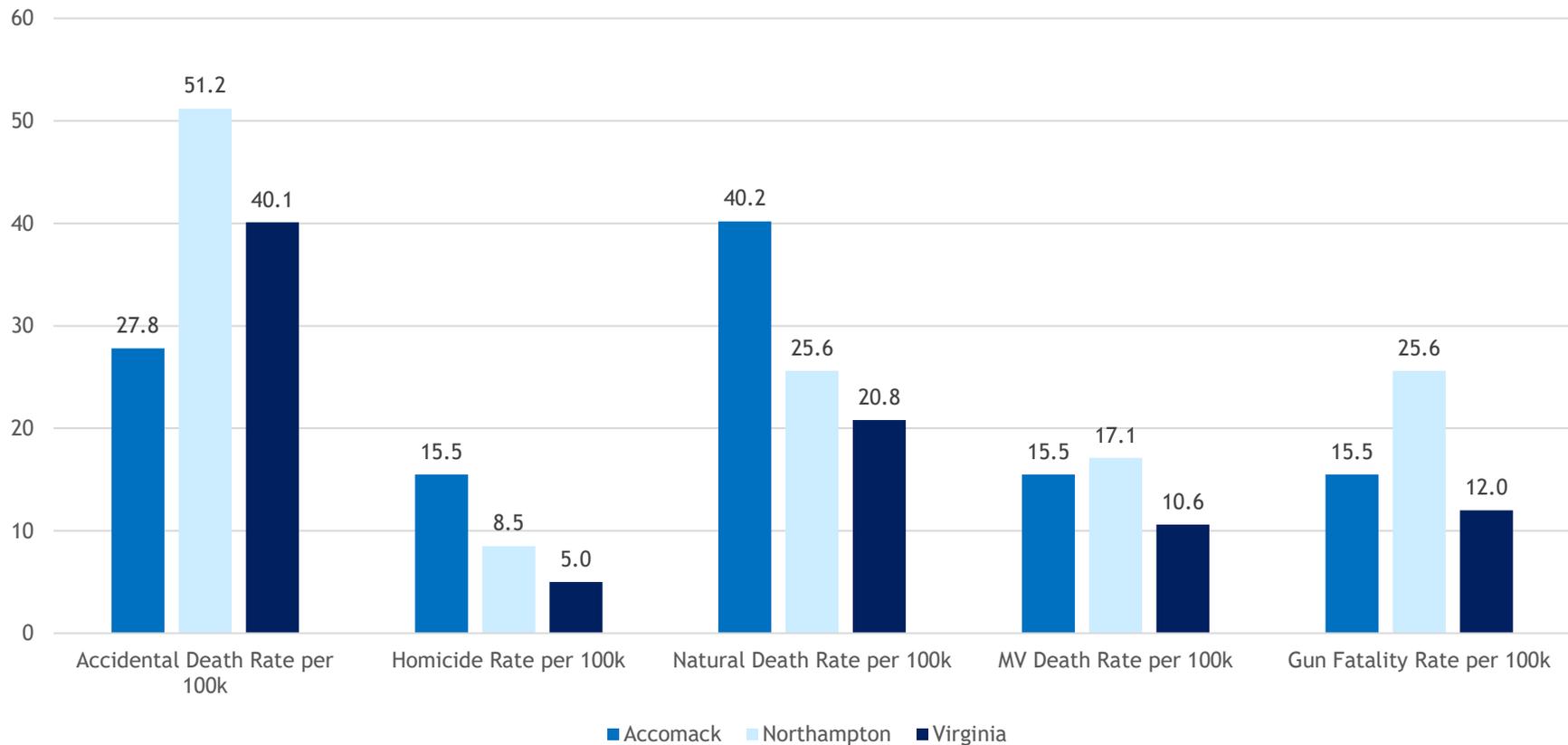


# Cause of Death

Cause of Death	Study Area (2020)			Virginia (2020)		
	Number of Deaths	Crude Death Rate per 100,000	Age Adjusted Death Rate per 100,000	Number of Deaths	Crude Death Rate per 100,000	Age Adjusted Death Rate per 100,000
All Deaths	739	1682.9	1022.7	80,596	938.2	792.8
COVID-19	55	125.3	71.1	5,821	67.8	56.3
Atherosclerotic heart disease	47	107.0	59.1	3,167	36.9	30.6
Bronchus or lung, unspecified - Malignant neoplasms	37	84.3	47.5	3,465	40.3	32
Stroke, not specified as haemorrhage or infarction	23	52.4	28.6	1,764	20.3	16.9
Unspecified dementia	22	50.1	26.5	3,549	41.3	35.4
Chronic obstructive pulmonary disease, unspecified	22	50.1	26.9	2,696	31.4	25.6
Acute myocardial infarction, unspecified	19	Unreliable		2,352	27.4	22.3
Atherosclerotic cardiovascular disease, so described	19	Unreliable		1,158	13.5	11
Alzheimer disease, unspecified	18	Unreliable		2,738	31.9	27.4
Unspecified diabetes mellitus, without complications	17	Unreliable		965	11.2	9.2
Malignant neoplasm of prostate	13	Unreliable		880	10.2	8.4
Parkinson disease	13	Unreliable		1054	12.3	10.4
Septicaemia, unspecified	12	Unreliable		950	11.1	9.2
Congestive heart failure	12	Unreliable		1,875	21.8	18.5
Heart failure, unspecified	12	Unreliable		723	8.4	7
Vascular dementia, unspecified	10	Unreliable		562	6.5	5.5
Alzheimer disease with late onset	10	Unreliable		112	1.3	1.1
Other forms of acute ischaemic heart disease	10	Unreliable		465	5.4	4.5

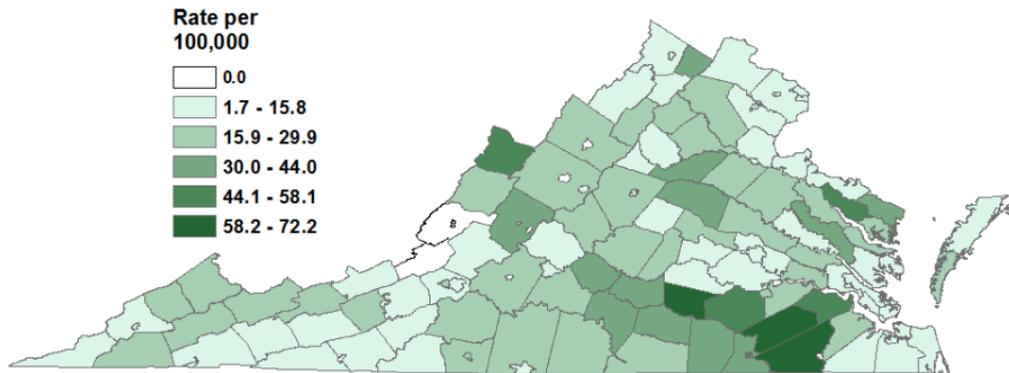
# Mortality Rates per 100K by Category

Office of Chief Medical Examiner  
Death Rate per 100k by Type of Death, 2019

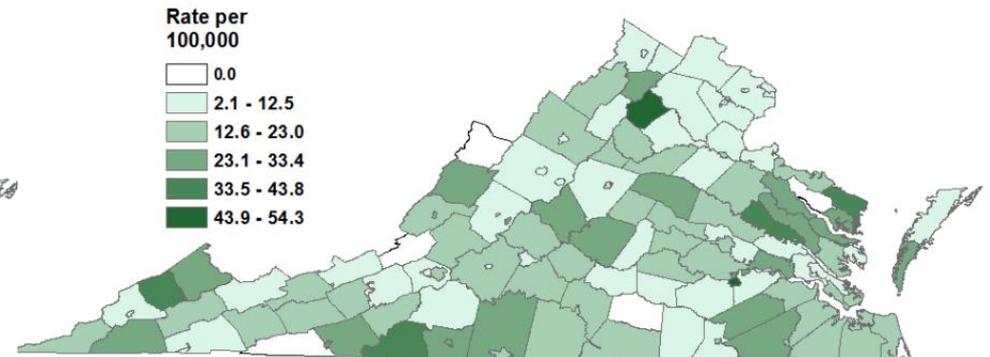


# Motor Vehicle & Gun-Related Fatalities by Locality

Map 4.4 Rate of Motor Vehicle Fatalities by Locality of Injury, 2019



Map 6.2 Rates of Gun-Related Death by Locality of Residence, 2019



# The RSMH Community

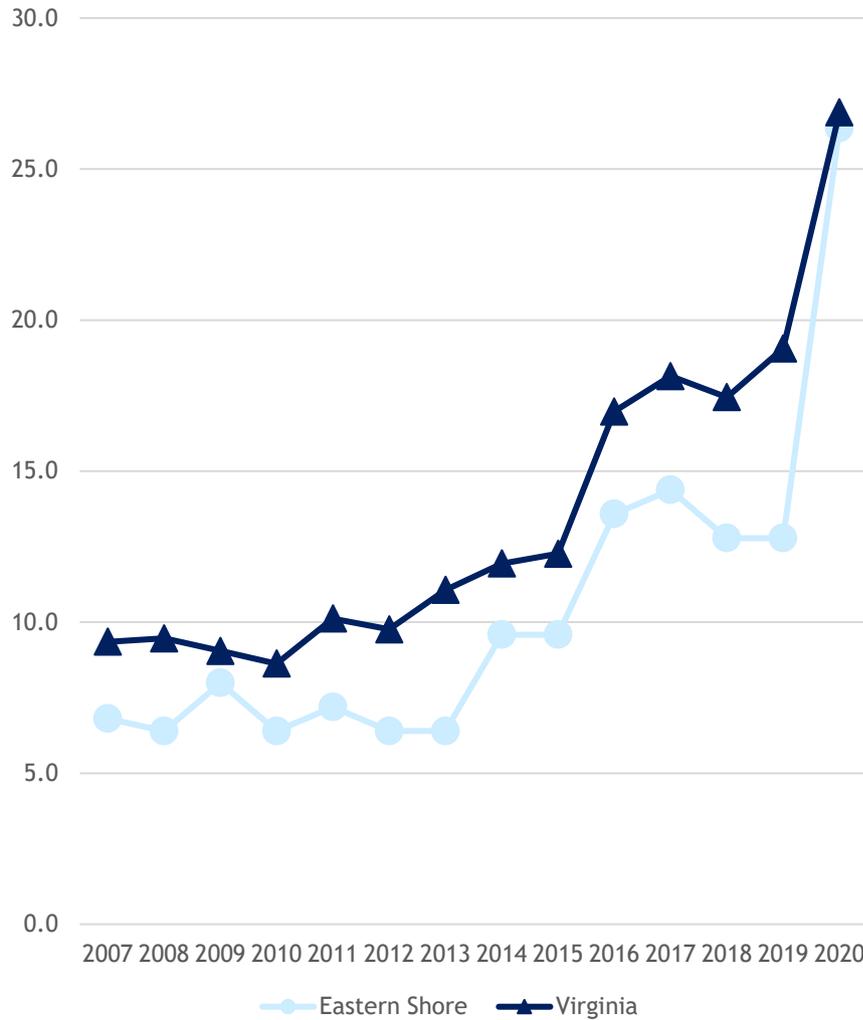
## Behavioral & Mental Health

# Inpatient Hospital Behavioral Health Discharges

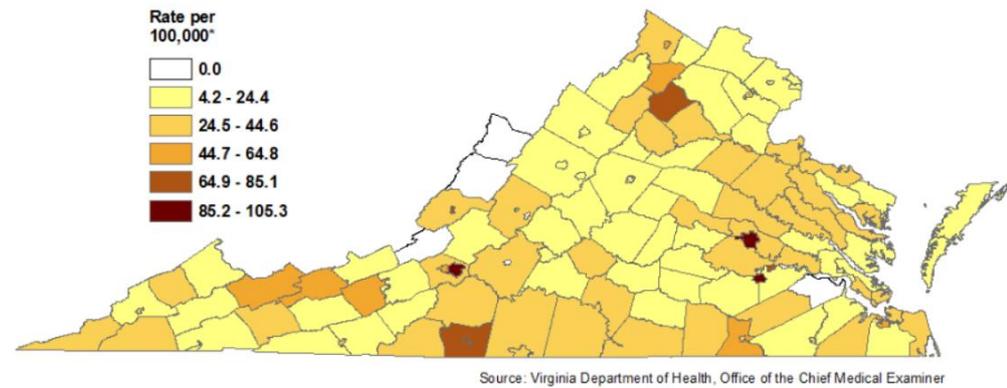
DRG	DRG Description	Eastern Shore Service Area (2020)		Virginia (2020)		Variance From State Crude rate per 100,000
		Number of Inpatient Discharges	Crude Rate per 100,000	Number of Inpatient Discharges	Crude Rate per 100,000	
	All inpatient behavioral health discharges	180	4.06	51,636	5.97	(1.90)
880	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION	5	0.11	1,147	0.13	(0.02)
881	DEPRESSIVE NEUROSES	3	0.07	2,984	0.34	(0.28)
882	NEUROSES EXCEPT DEPRESSIVE	5	0.11	1,265	0.15	(0.03)
883	DISORDERS OF PERSONALITY & IMPULSE CONTROL		0.00	339	0.04	(0.04)
884	ORGANIC DISTURBANCES & MENTAL RETARDATION	8	0.18	1,135	0.13	0.05
885	PSYCHOSES	118	2.66	31,077	3.59	(0.93)
886	BEHAVIORAL & DEVELOPMENTAL DISORDERS	1	0.02	175	0.02	0.00
887	OTHER MENTAL DISORDER DIAGNOSES		0.00	34	0.00	(0.00)
894	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AMA	3	0.07	1,235	0.14	(0.07)
895	ALCOHOL/DRUG ABUSE OR DEPENDENCE W REHABILITATION THERAPY	1	0.02	3,338	0.39	(0.36)
896	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W MCC	9	0.20	1,374	0.16	0.04
897	ALCOHOL/DRUG ABUSE OR DEPENDENCE W/O REHABILITATION THERAPY W/O MCC	27	0.61	7,533	0.87	(0.26)

# Drug Overdose Deaths per 100k Service Area vs Virginia (All Substances)

Eastern Shore vs Virginia Fatal Drug Overdoses per 100,000 by Year

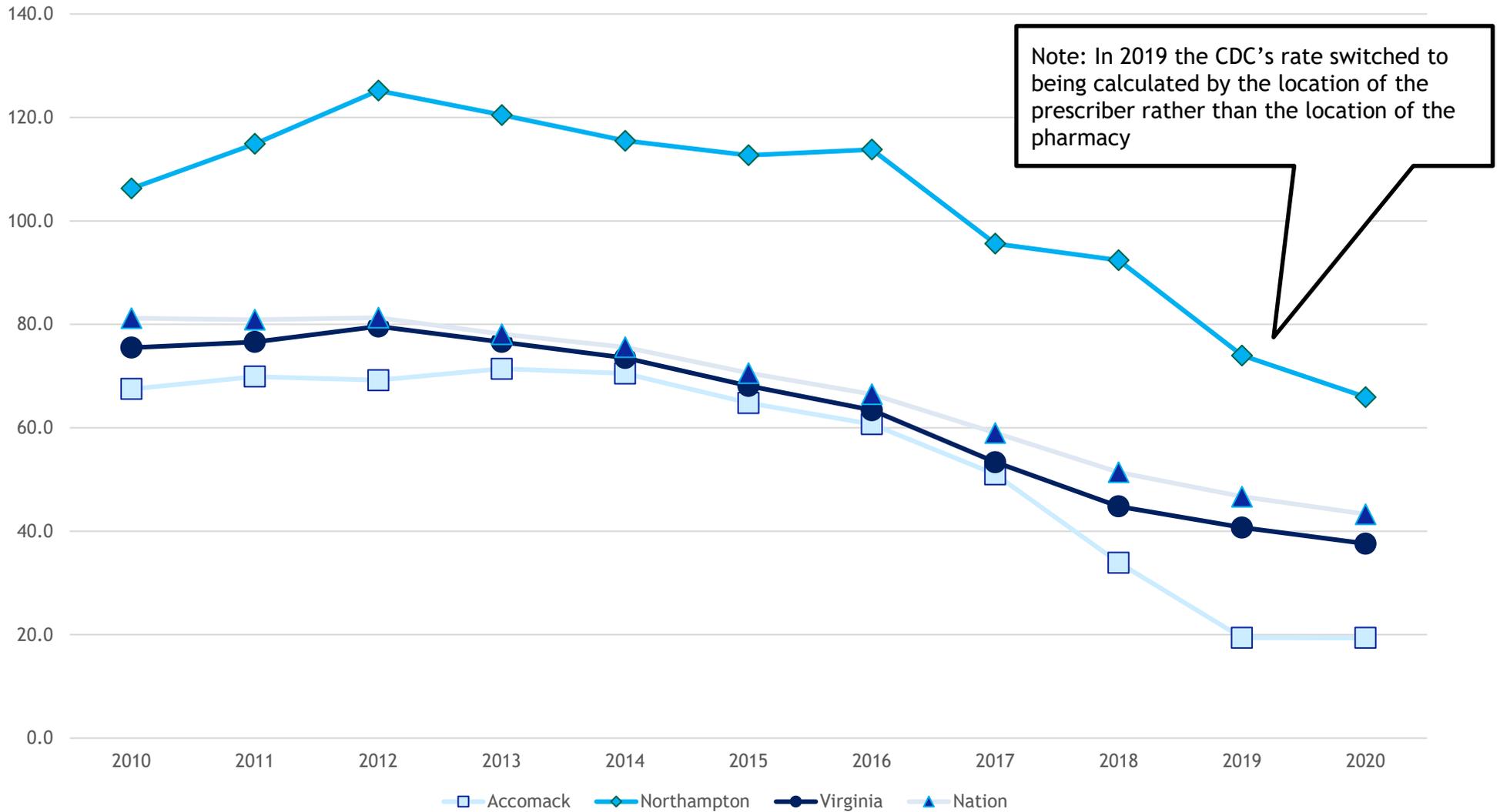


Rate of All Fatal Drug Overdoses, All Substances, by Locality of Overdose, 2020



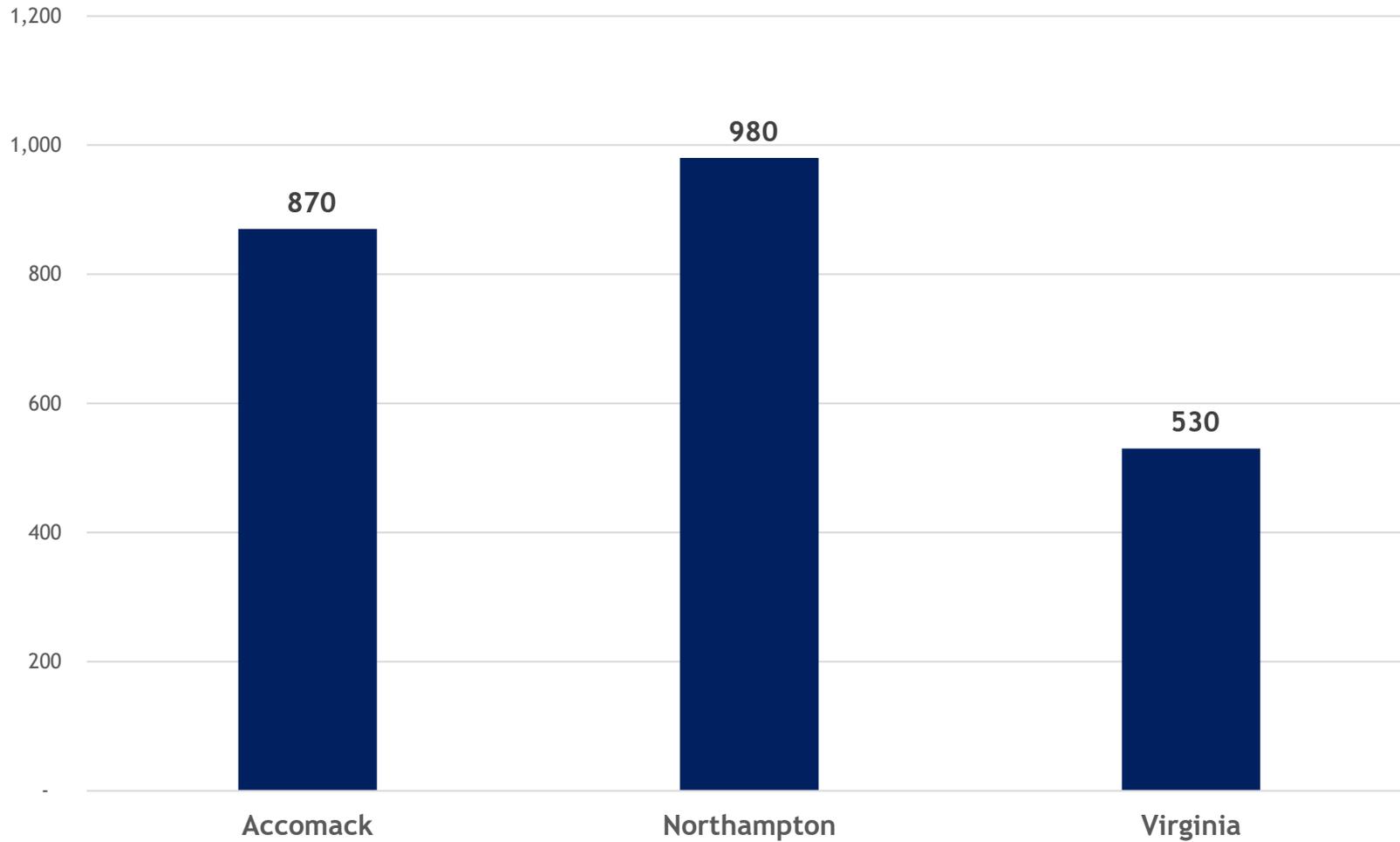
# Opioid Dispensing Rate per 100 Persons

RSMH Opioid Dispensing Rater per 100 Persons



# Mental Health Provider Ratios

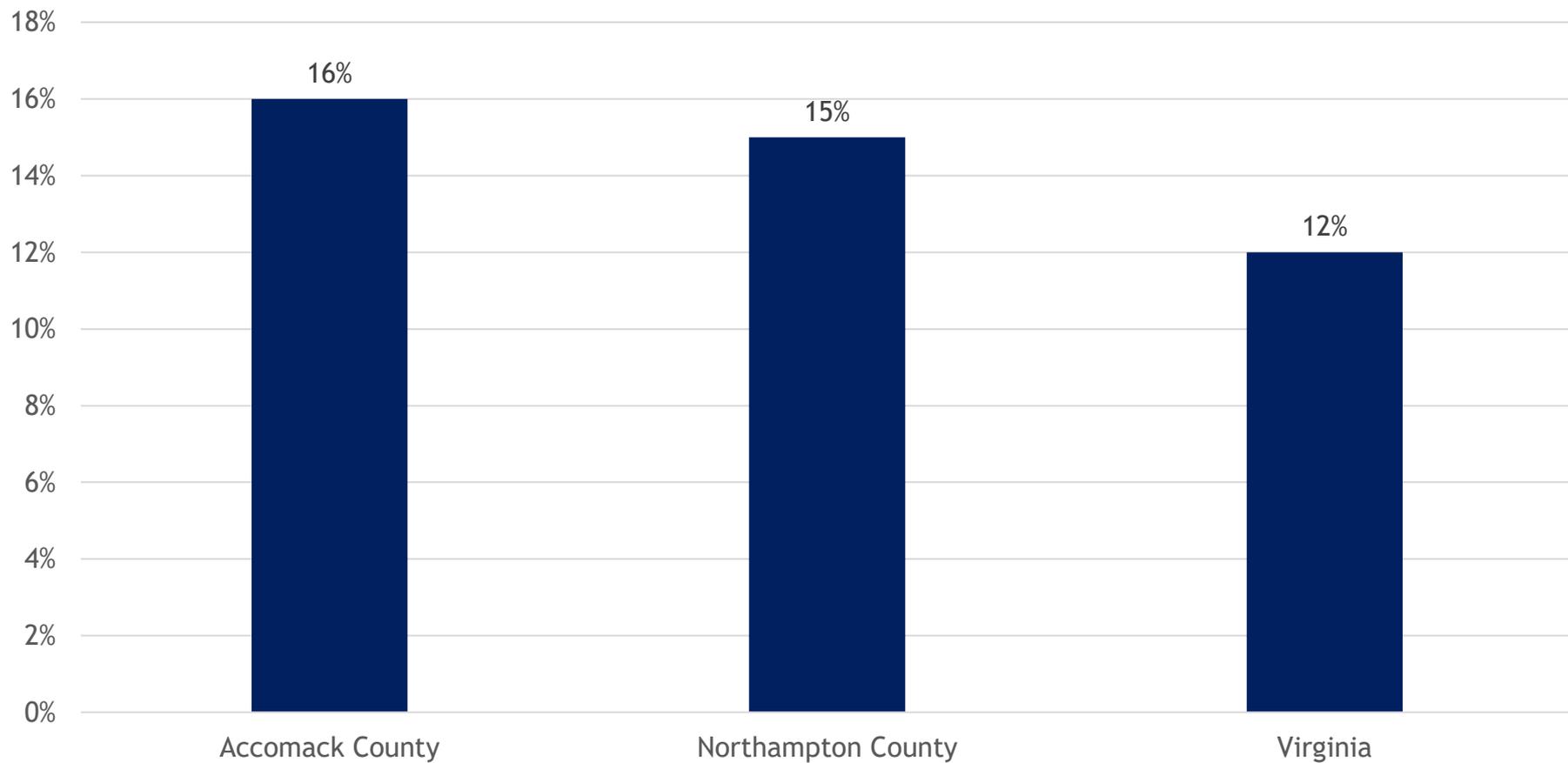
Individuals per Mental Health Provider, 2020



# Frequent Mental Distress

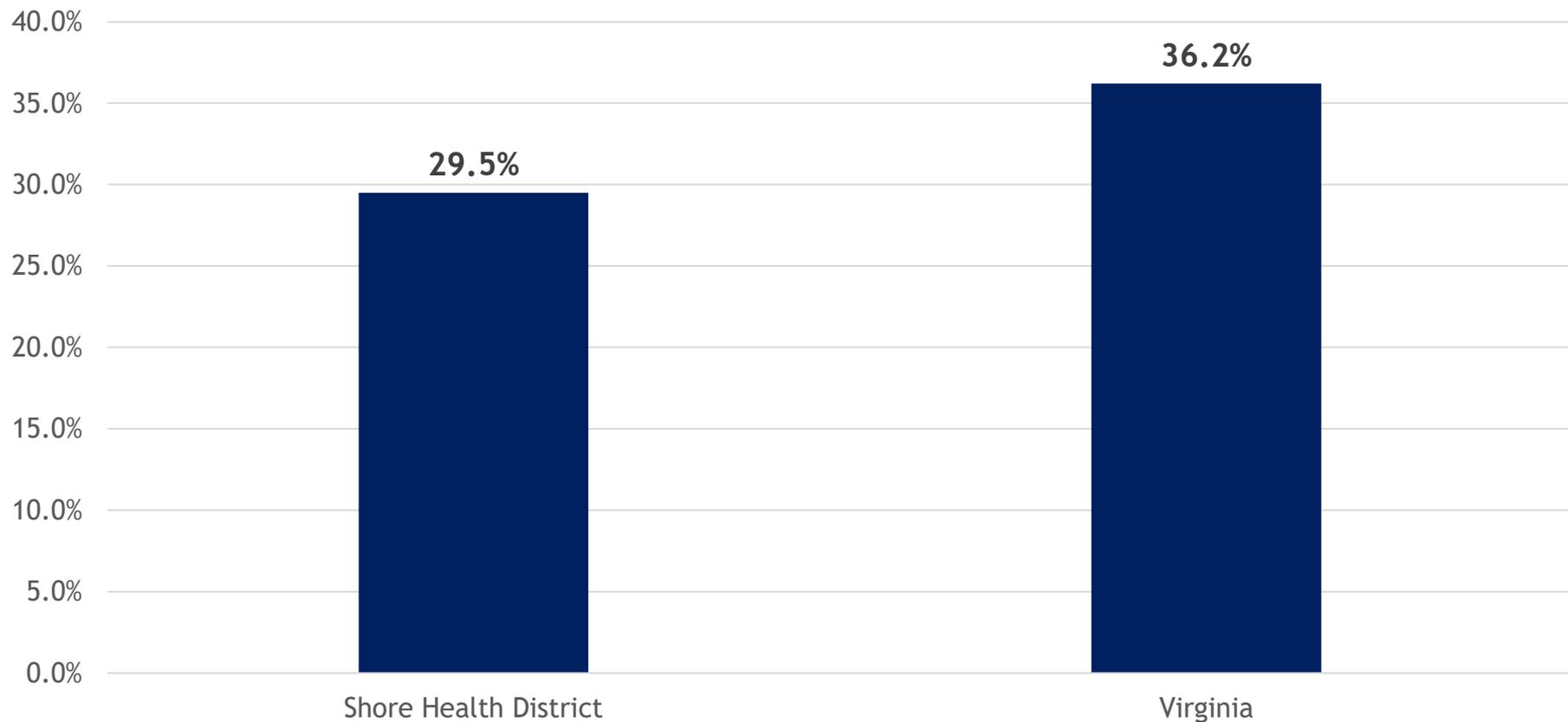
## Percentage of Adults Reporting 14 or More Days of Mental Distress Each Month

Frequent Mental Distress: % of Adults Reporting 14 or More Days of Poor Mental Health per Month



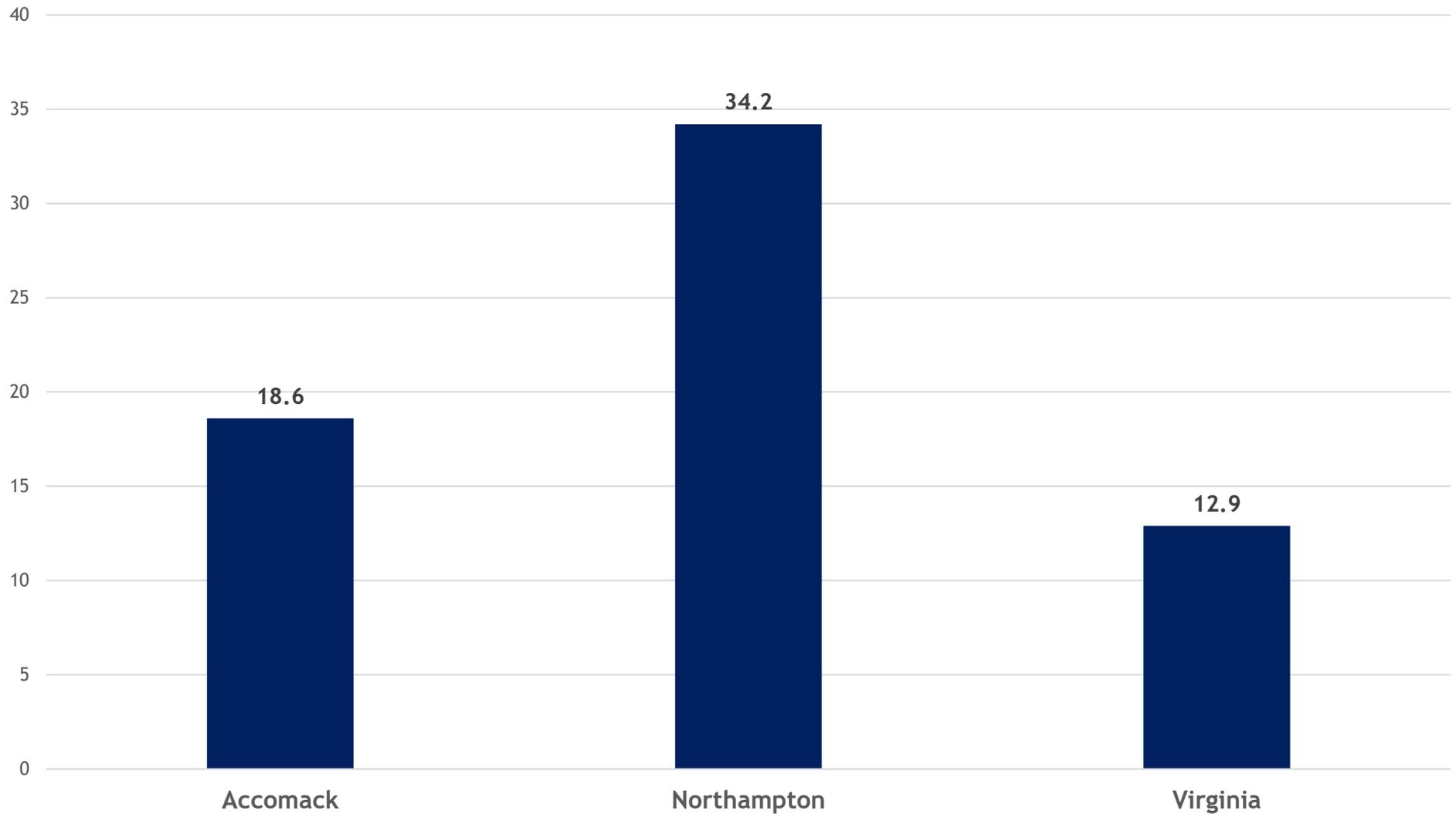
# Poor Mental Health Reported 1 or More Days of Poor Mental Health in the Last 30 Days

Poor Mental Health: % Reported 1 or More Poor Mental Health in the Last 30 Days



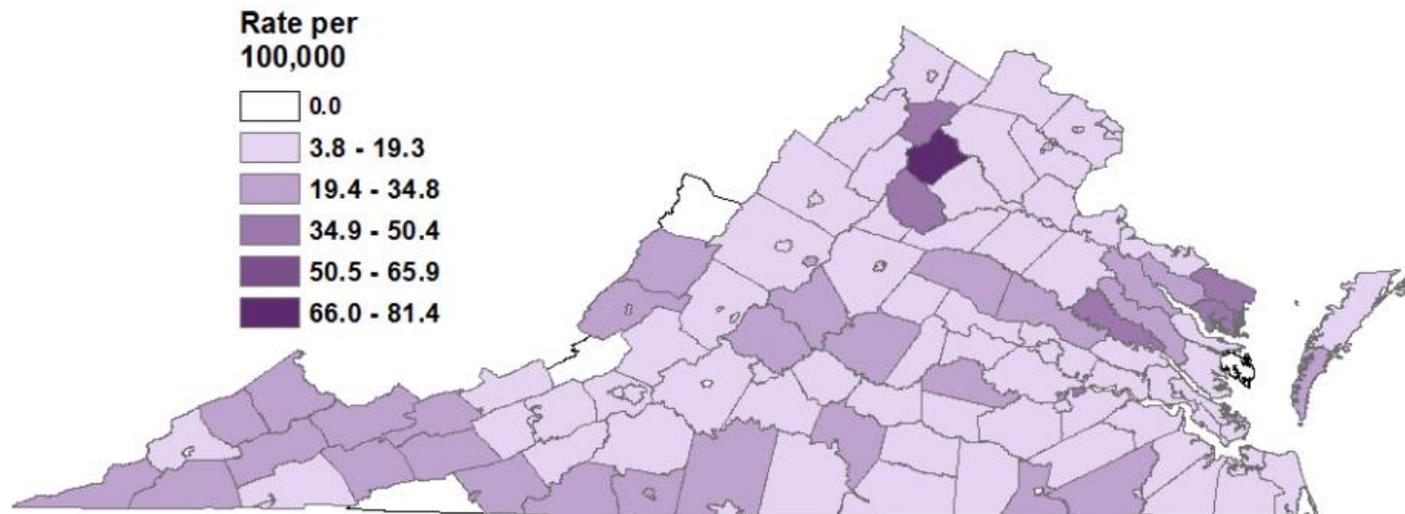
# Suicide Rate per 100K

Office of the Chief Medical Examiner  
Suicide Rate per 100k, 2019



# Suicide Rate by Locality of Residence 2019

Map 2.6 Suicide Rates by Locality of Residence, 2019

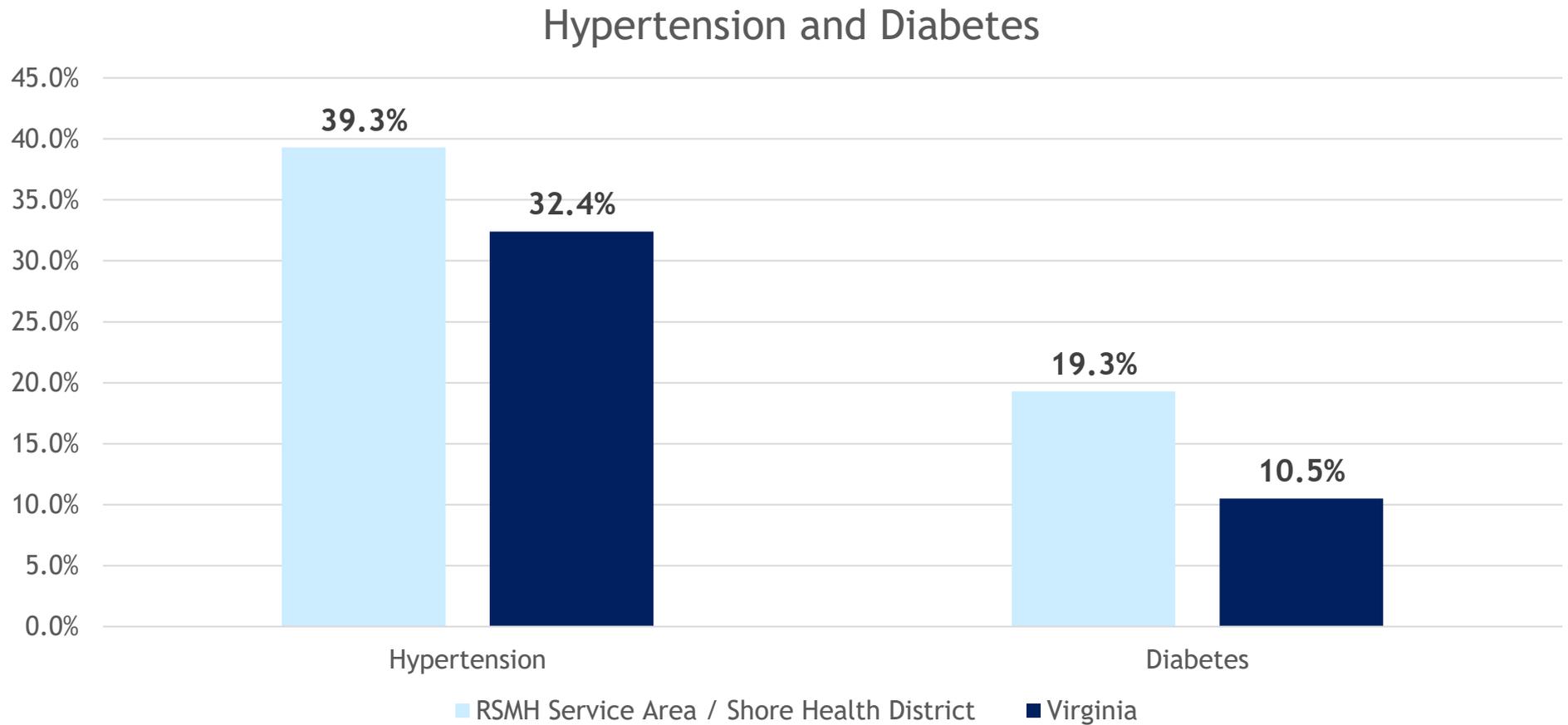


Virginia Department of Health

# The RSMH Community

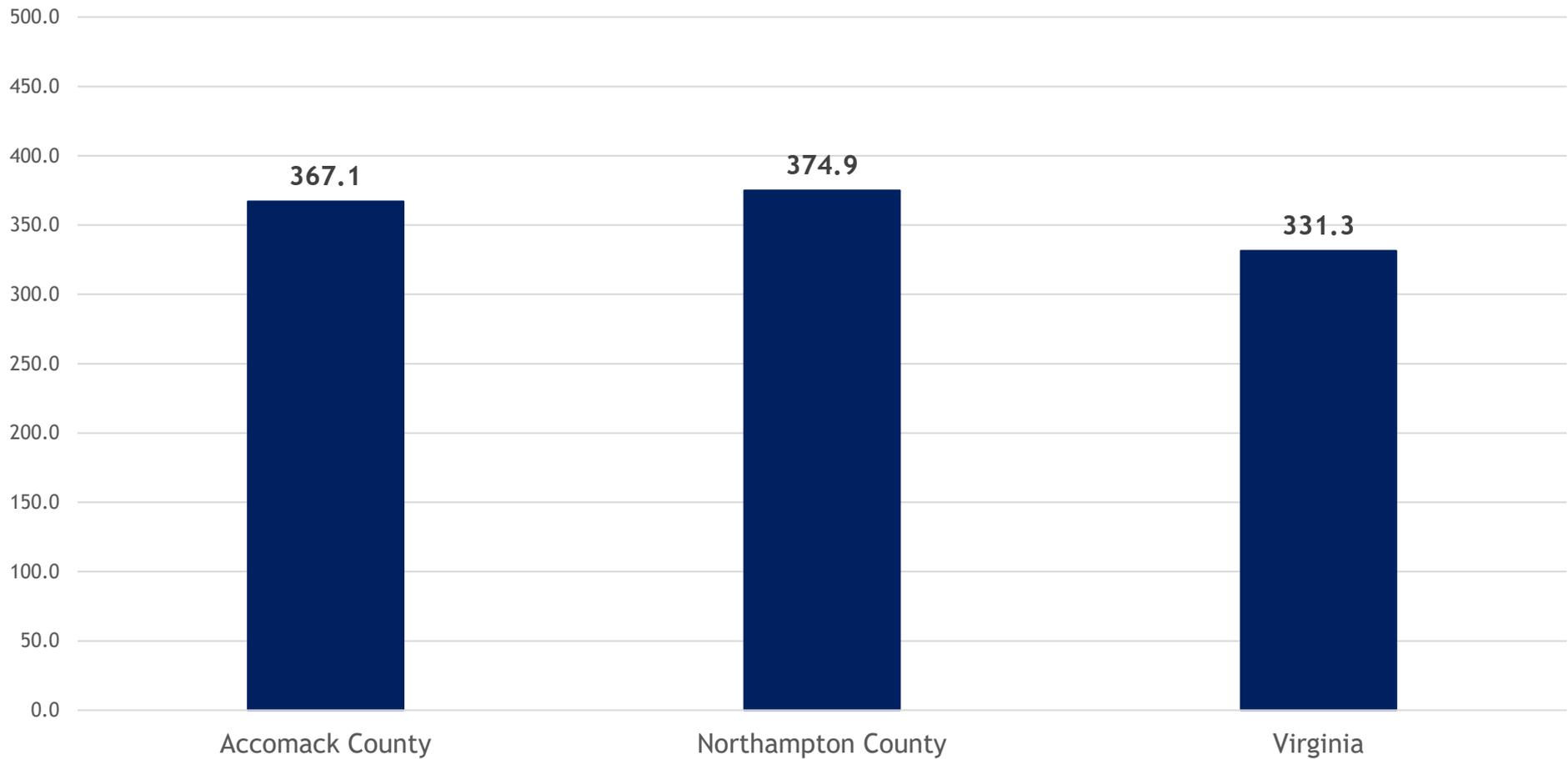
## Chronic Disease Management in the Community

# Hypertension and Diabetes

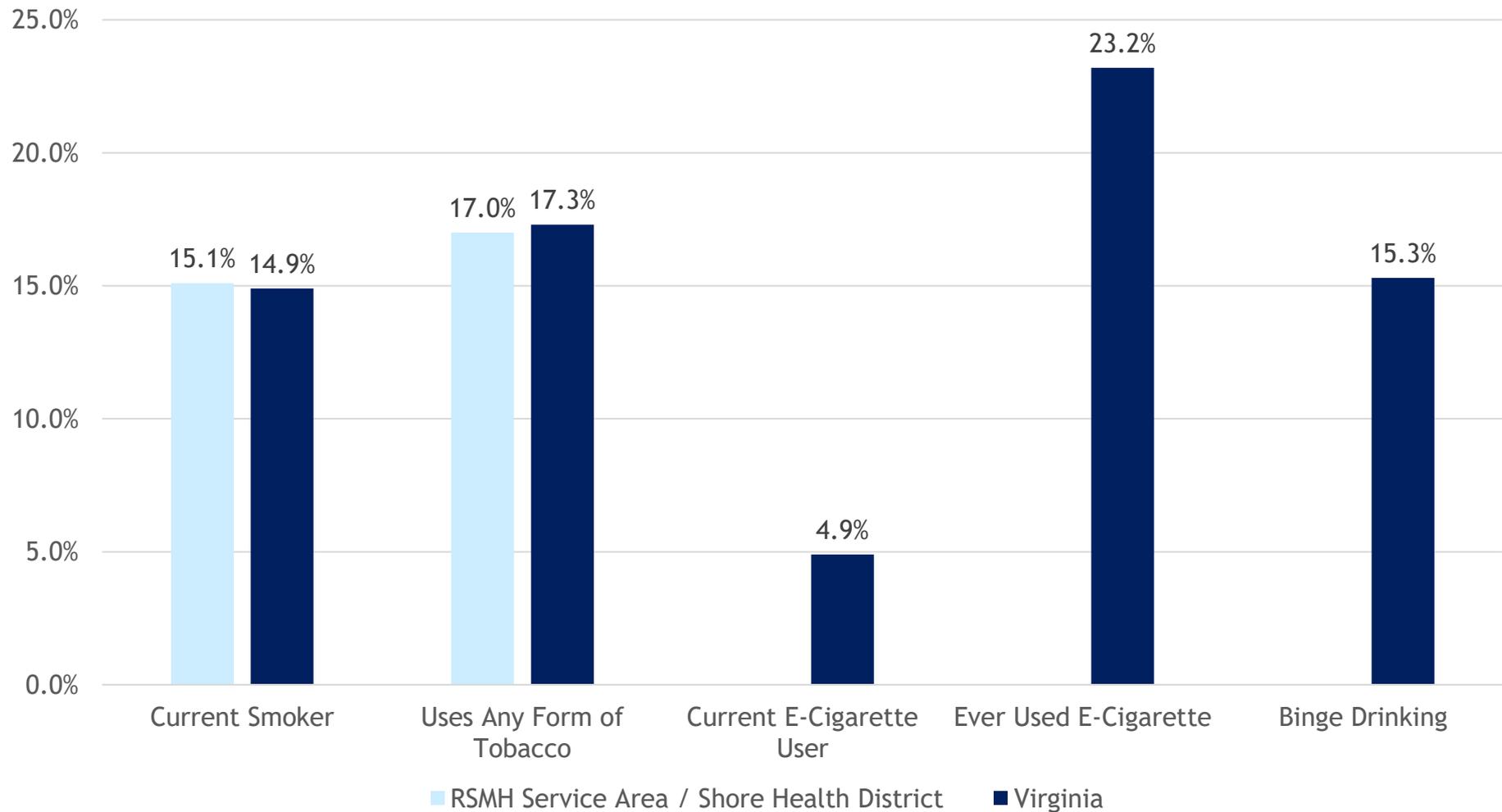


# HIV / AIDS

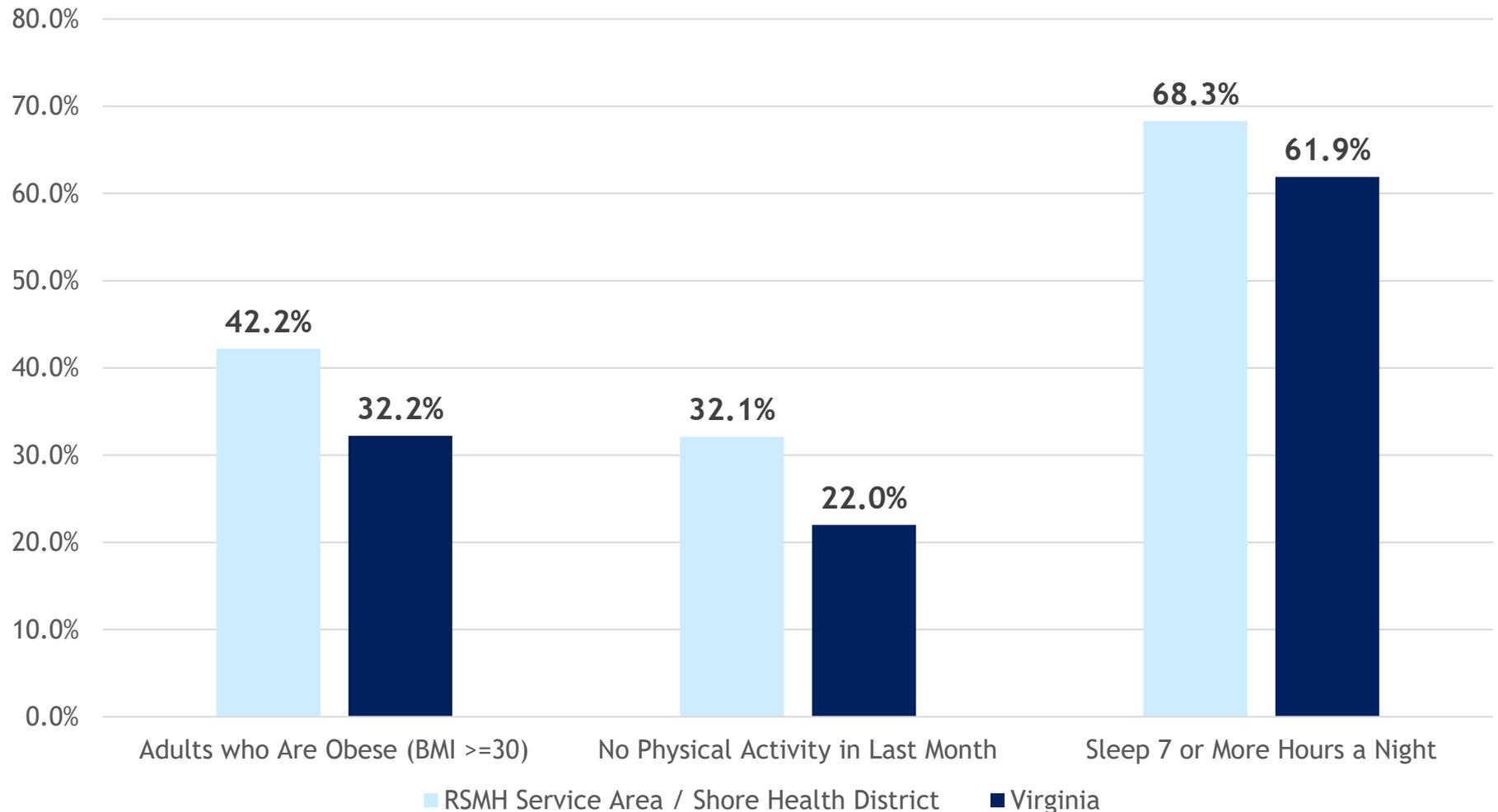
All HIV+ and AIDS Cases Rate per 100K



# Tobacco, Alcohol and E-Cigarette Use

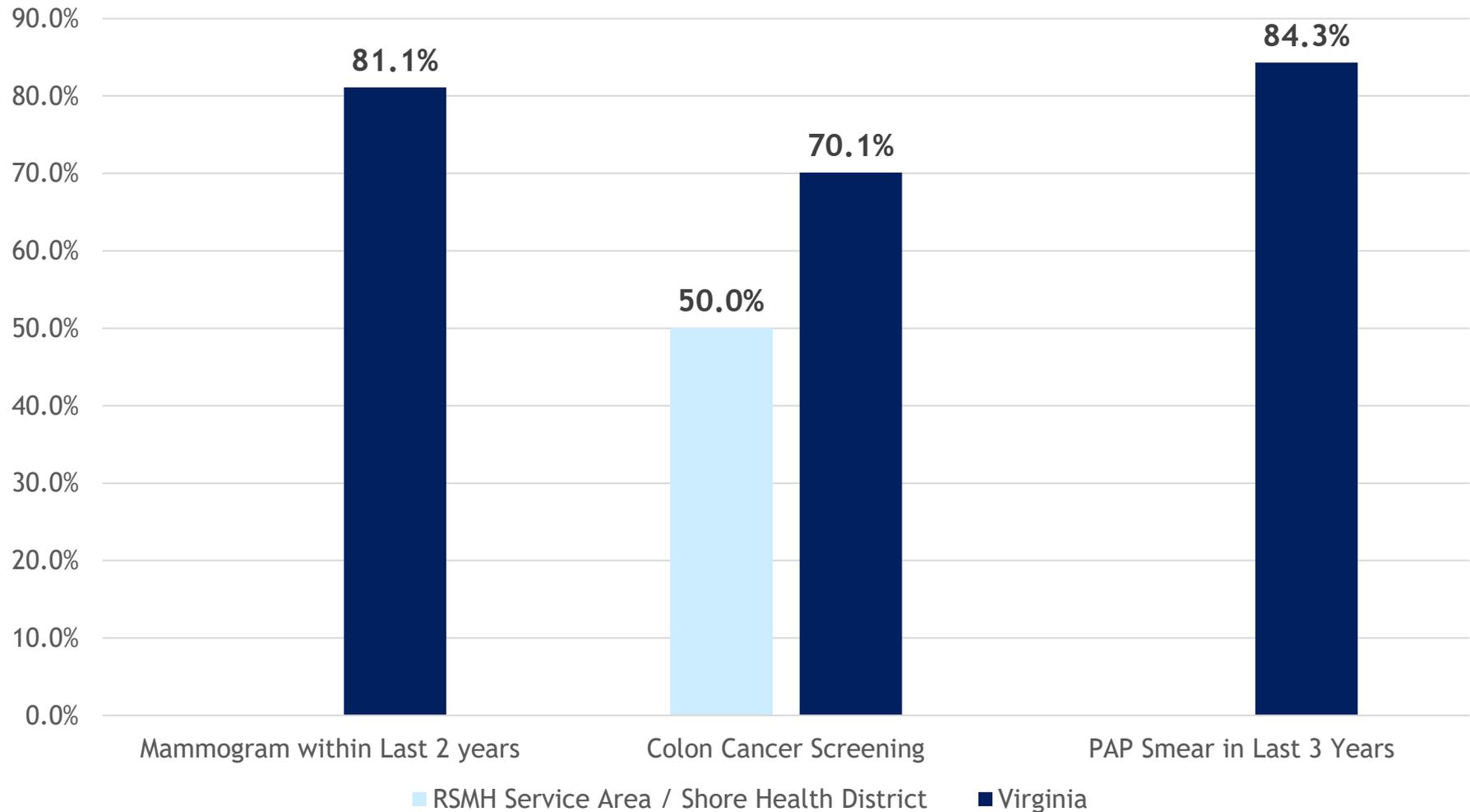


# Obesity, Physical Inactivity and Adequate Sleep Rates



# Cancer Screening Rates

*Mammography In last 2 Years, Colorectal Screening & PAP Smear within last 3 Years*



# The RSMH Community

## Hampton Roads Community Survey

# About the Community Survey

Riverside, Sentara, CHKD, Bon Secours and the Virginia Department of Health worked together to create an online survey using Survey Monkey to obtain community input.

There were 2 forms of the online survey:

**The Community Stakeholder version of the survey** was emailed to a wide variety of community leaders and stakeholders including individuals who work in education, public health, health care, mental and behavioral health, local government, first responders, business leaders and others.

**The Community Member version of the survey** was promoted to community members via social media and websites.

Both versions of the survey were open from late November 2021 through February 2022.

The survey was created to accept all input and was not structured as a representative sample. **All results should be taken as qualitative, directional data and should not be considered statistically significant without additional research.**

As the data shows, the respondents reflect a sample that is not reflective of the entire service area. This should be kept in mind as the survey results are considered as part of a any planning process.

Respondents to the survey in the Riverside Shore Memorial Service Area:

On the Stakeholder Survey, 126 Individual indicated they served individuals Accomack or Northampton County. Multiple individuals noted they served individuals in multiple areas

On the Community Member Survey, 78 individuals responded that they resided in Accomack or Northampton County.

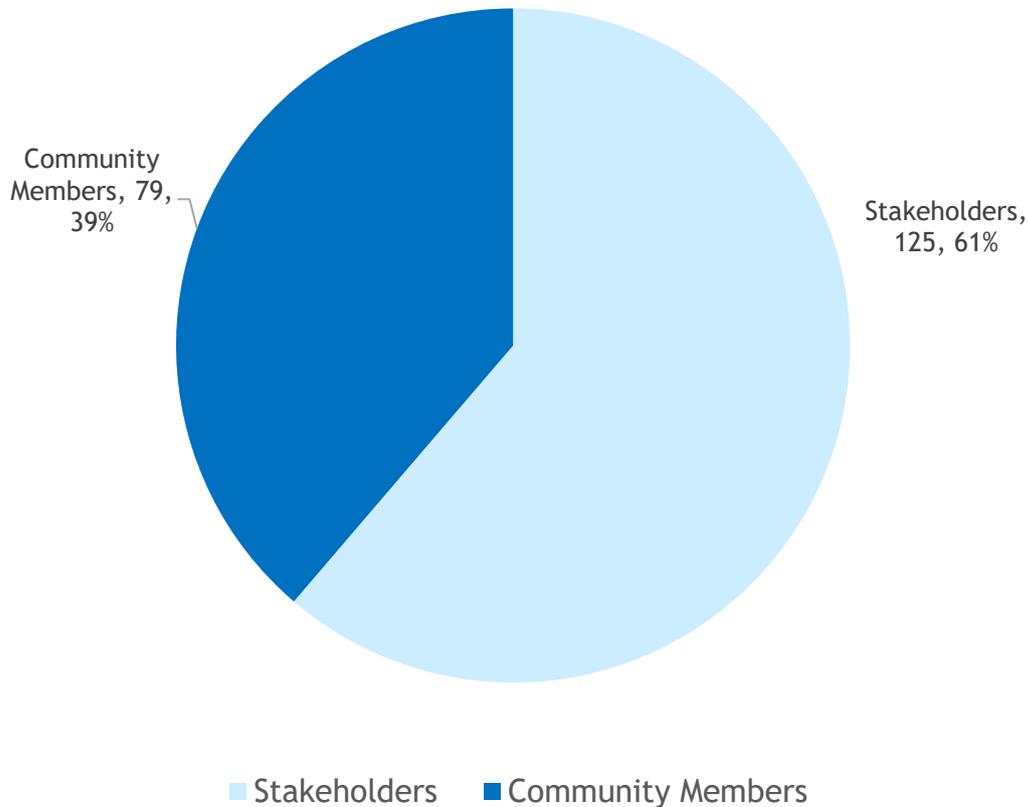
This combines for a total of 204 responses to the combined survey. This is an increase from all prior CHNA cycles

	2013	2016	Change from 2013 - 2016	2019	Change from 2016 - 2019	2022	Change from 2019- 2022
RSMH TOTAL	31	37	19.4%	60	62%	204	240%

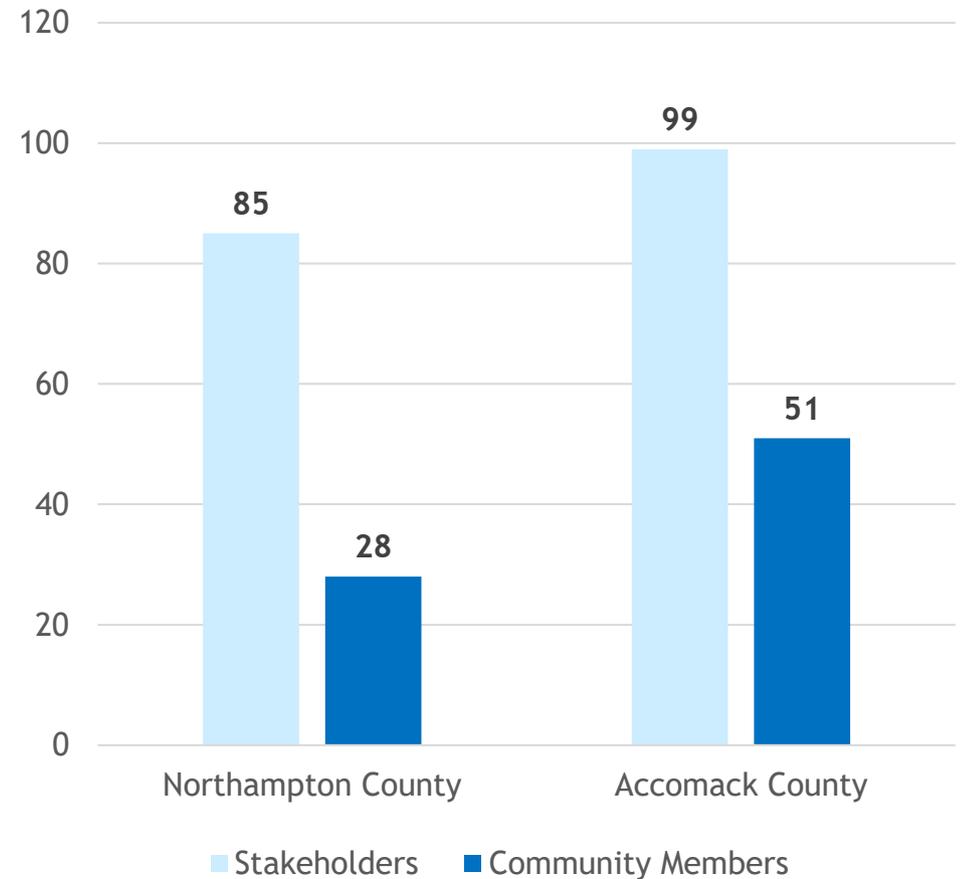
# Community Survey: Respondent Type and Geographic Affiliation

Note: Multiple respondents indicated they were answering from the perspective of more than one locality.

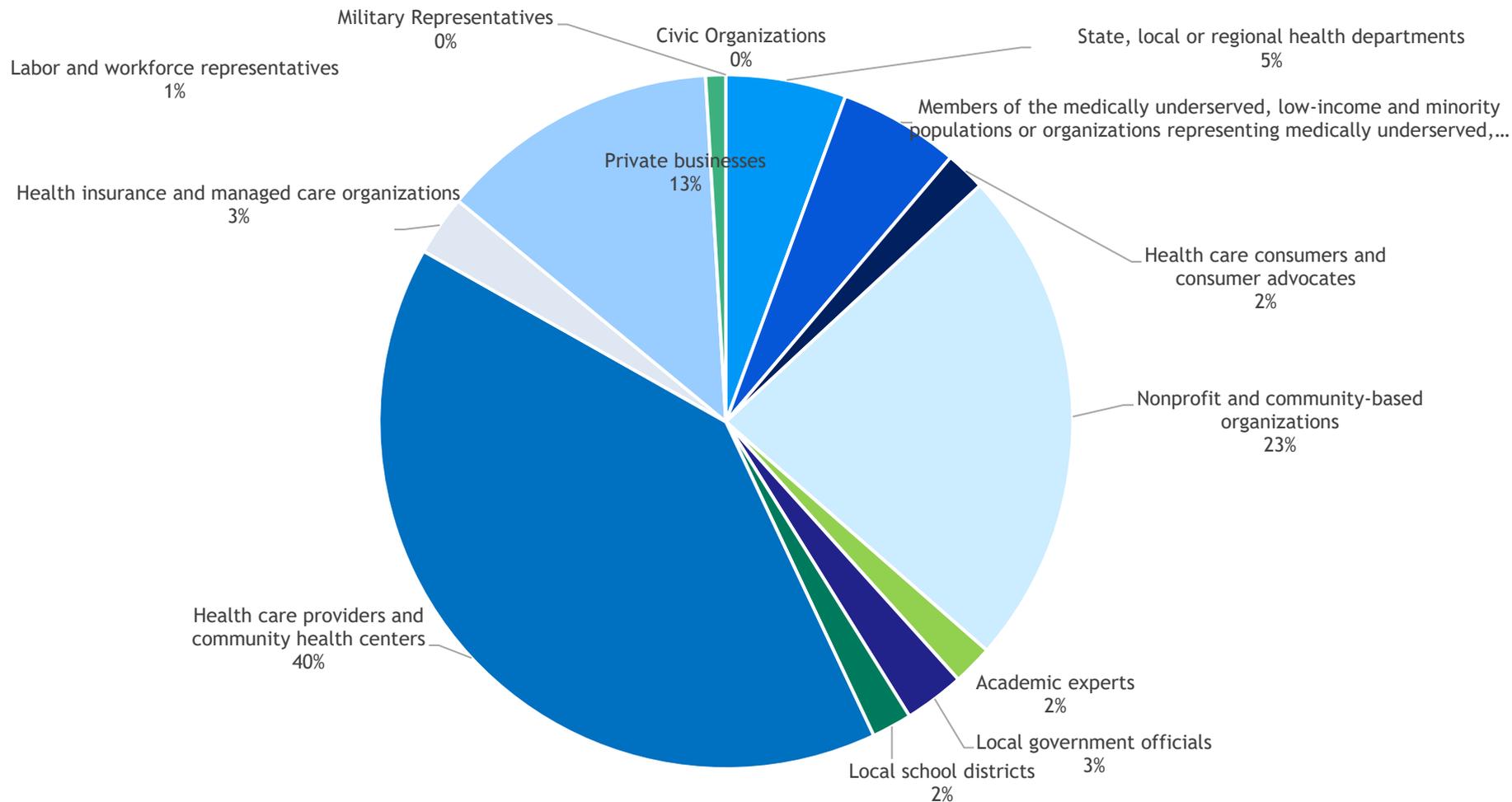
County of Residence (Community Members) /  
County or Counties Served (Community Stakeholders)



County of Residence (Community Members) /  
County or Counties Served (Community Stakeholders)



# Community Survey: Business & Organizational Affiliations of Those Who Completed the Stakeholder Survey



# Community Stakeholder Survey

## Affiliated Businesses & Organizations of Those Who Completed the Stakeholder Survey

211 Virginia / The Planning Council

A&N Electric Cooperative

Accomack County Public Schools

Alphatec Surveyors Ltd

Alzheimer's Association Southeastern Virginia Chapter

Asthma & Allergy Foundation of America

Bay Rivers Telehealth Alliance

Bon Secours Mercy Health

Boys & Girls Clubs of Southeast Virginia

Brain Injury Association of Virginia (x2)

Celebrate Healthcare LLC

Children's Specialty Group (x2)

Child Care Aware of Virginia (x2)

CHKD (x9)

CINCH

Cooper & Humbles Funeral Co., Inc.

Dilon Technologies, Inc

Dominion Psychological Associates, LLC

Eastern Shore Community College

Eastern Shore Community Services Board

Eastern Shore Health District

Eastern Shore Radio

Eastern Shore Regional Jail

Eastern Shore Rural Health System, Inc.

EVMS (x3)

Fashing, Fashing and McCoy

Foodbank of Southeastern Virginia and the Eastern Shore

His or Hers Salon and Spa

Jewish Family Service

Local School Districts

Lox Salon LLC

Moms In Motion

Mother Nurture Midwifery

Northampton County

Northampton County Sheriff's Office

Onley Preschool

Optima Health (x2)

Pineapple Babies Birth Services

Rivermont Schools

Riverside (x23)

Riverside

Sentara (x9)

The Milieu Therapeutic Services

The Planning Council

The Up Center

The Village Midwife

United Healthcare Community and State

United Negro College Fund (UNCF)

Virginia Affiliate of The American College of Nurse-Midwives

Virginia Department of Health (x3)

Virginia Health Catalyst

Virginia Hope

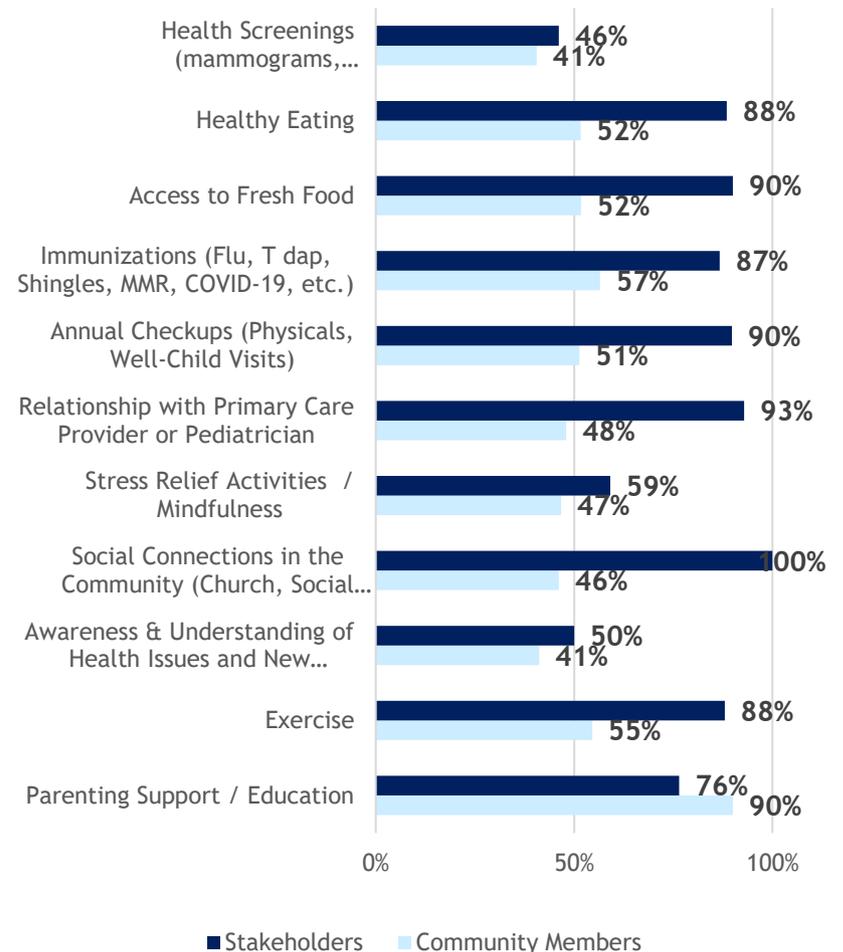
# Community Survey:

## Top 3 Items You Feel Are Important to the Health of Your and Your Family (Community Member) / the Adults and Children You Serve (Community Stakeholder)

### For Adults In The Family / That I Serve



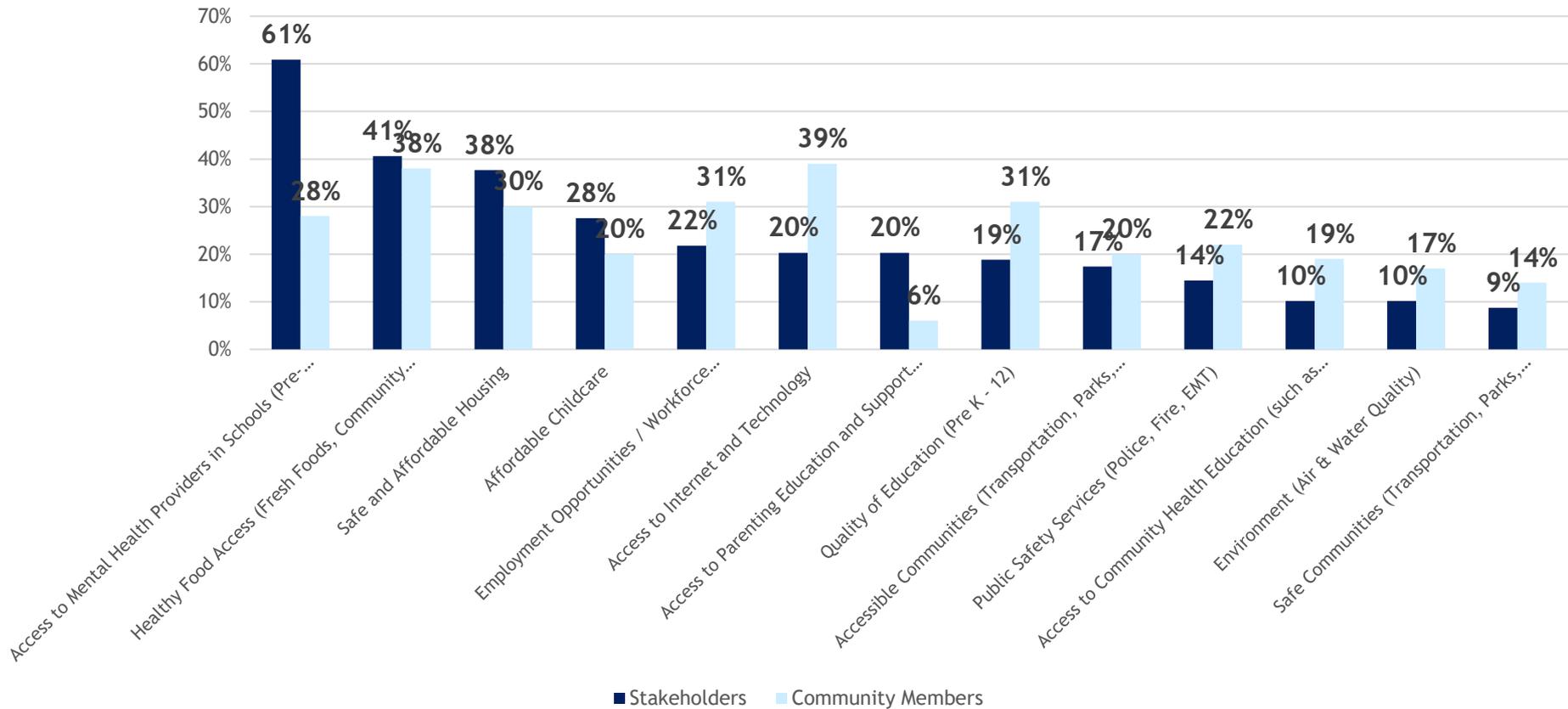
### For Children In The Family / That I Serve



# Community Survey:

## Top 3 Items You Would Like to See Added or Improved in the Community to Keep You and Your Family (Community Member) / BOTH the Adults AND Children You Serve (Community Stakeholder) Healthy

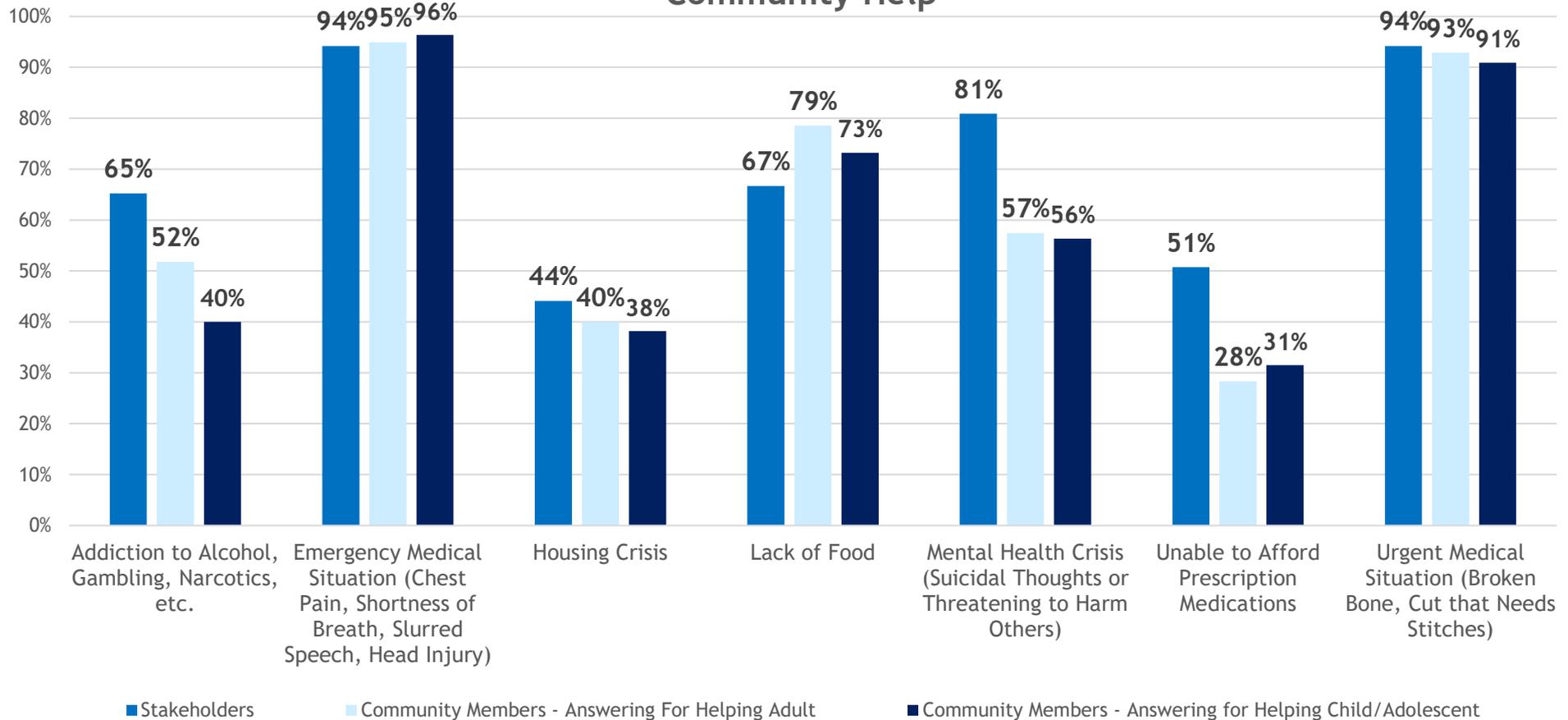
Top 3 Items You Would Like to See Added or Improved in the Community to Keep You and Your Family (Community Member) / BOTH Adults and Children You Serve (Stakeholders) Healthy



# Community Survey:

## If Someone Were to Experience Any of These Situations, Would You Know How To Get Community Help?

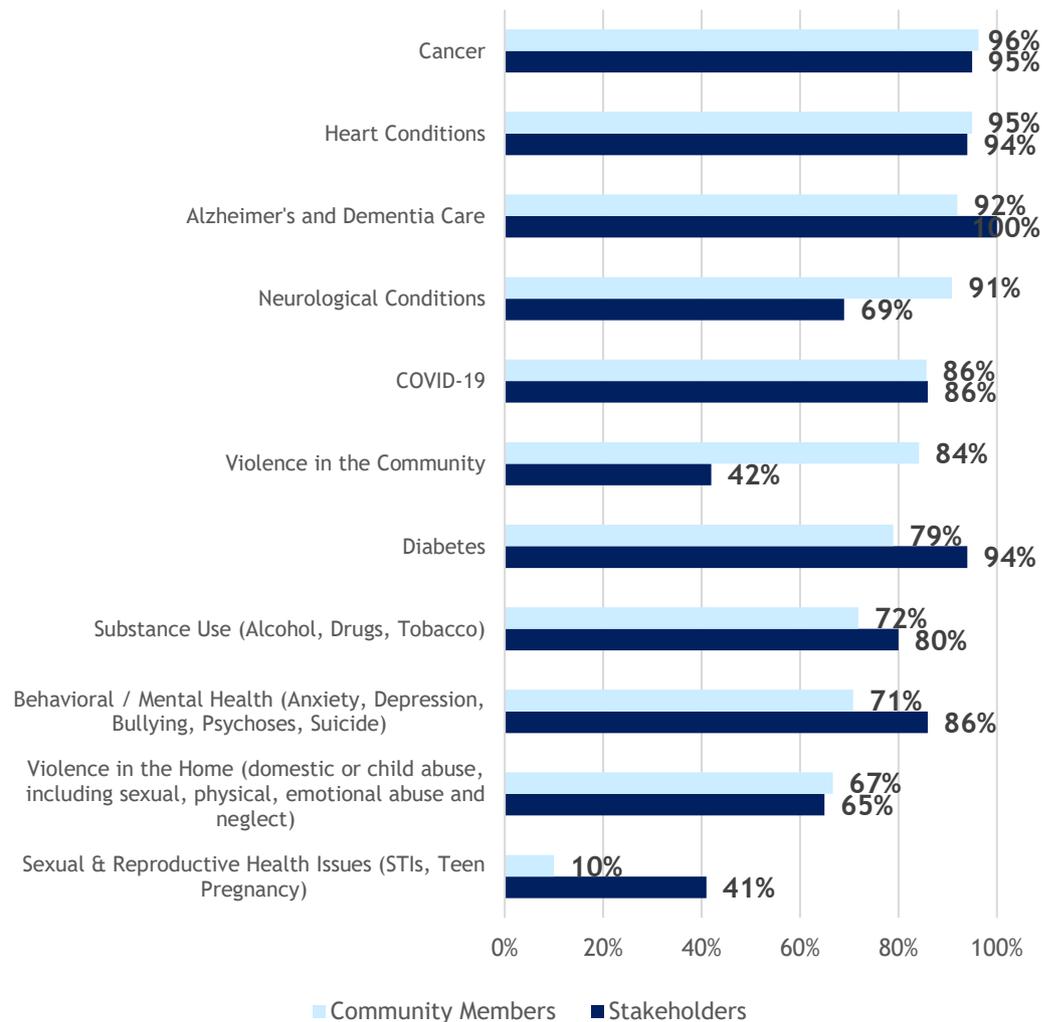
% of Respondents Who Said Yes, They Would Know How to Access Community Help



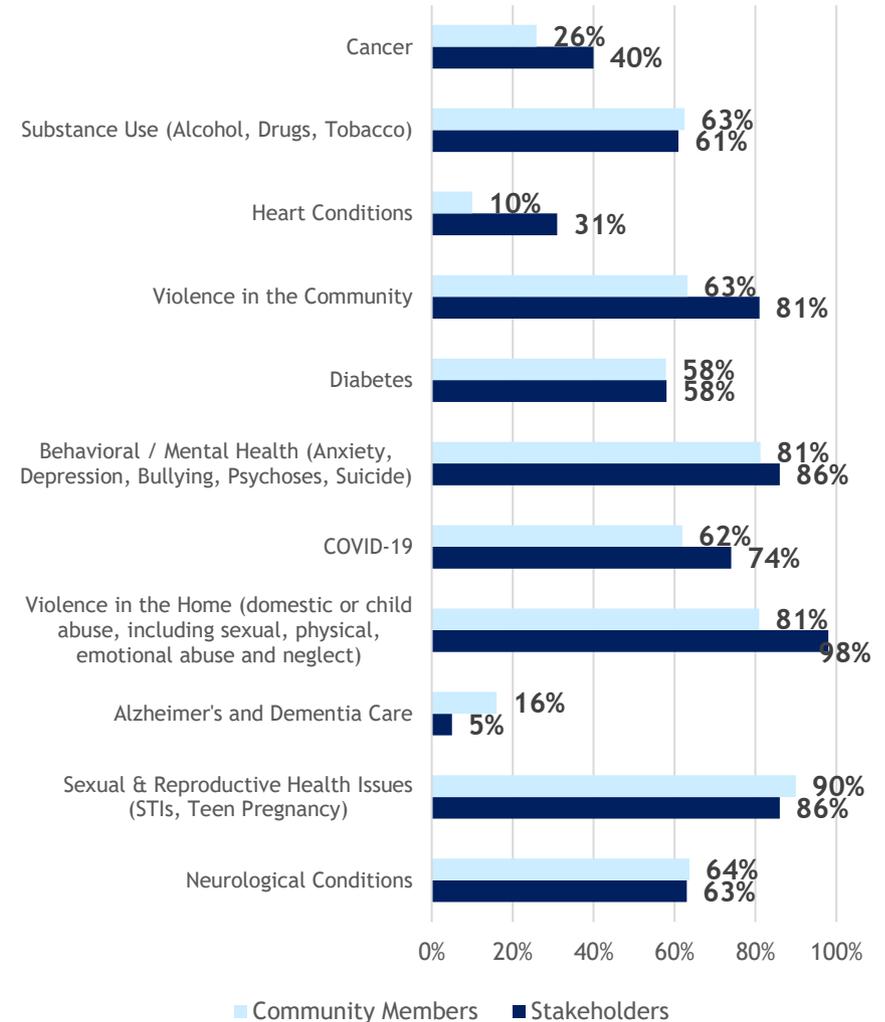
# Community Survey:

Please Select the Top 3 Most Important Health Concerns in Your Community

## For Adults



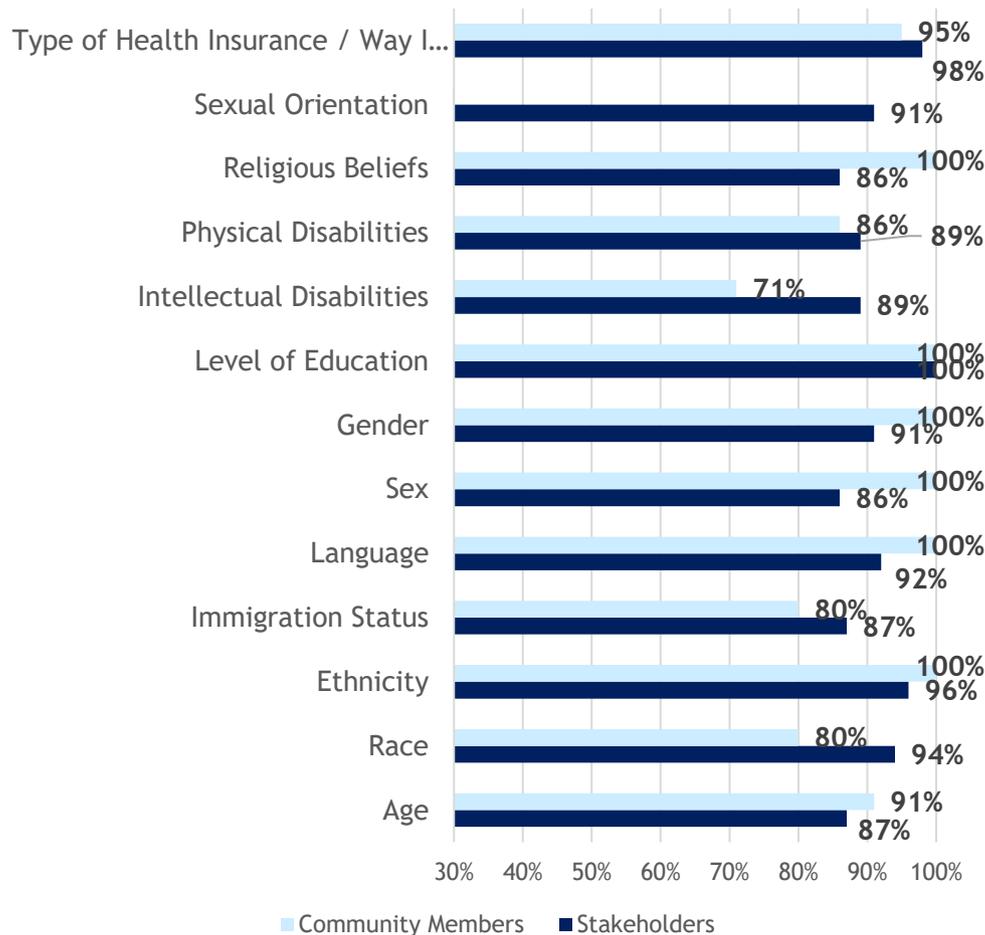
## For Children



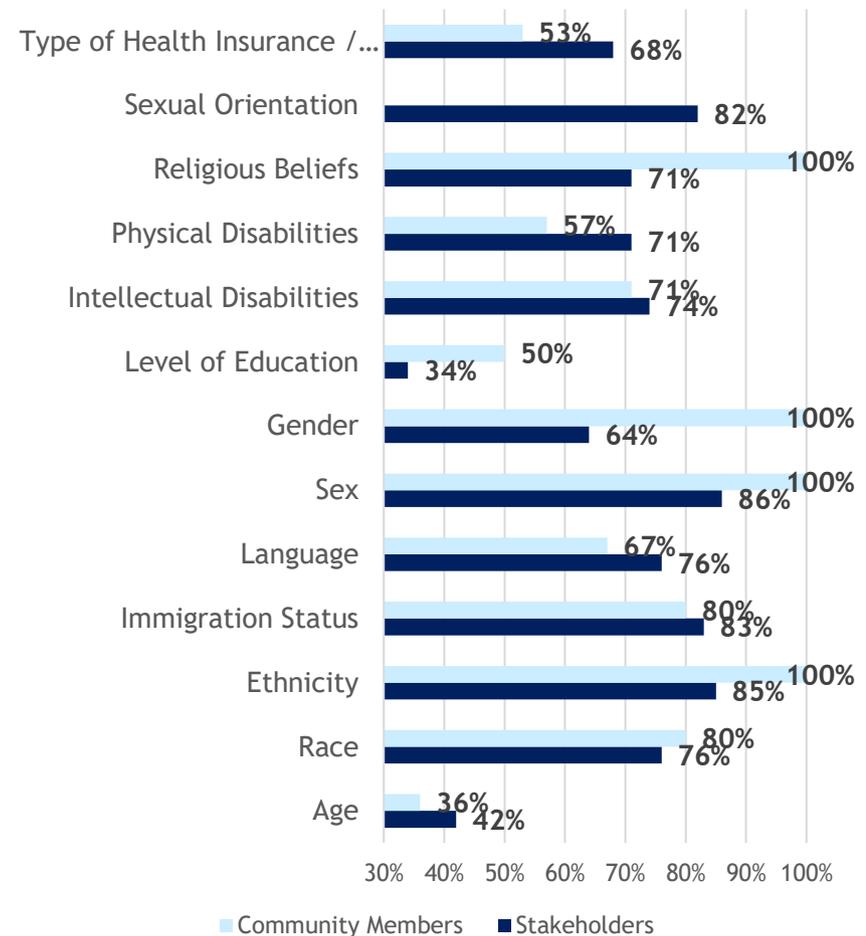
# Community Survey:

## Considering Implicit Bias - What Personal Factors do You Think Impact the Care Received by Adults or Children in Your Family Receive (Community Members) / the Adults and Children You Serve (Community Stakeholders)

For Adults

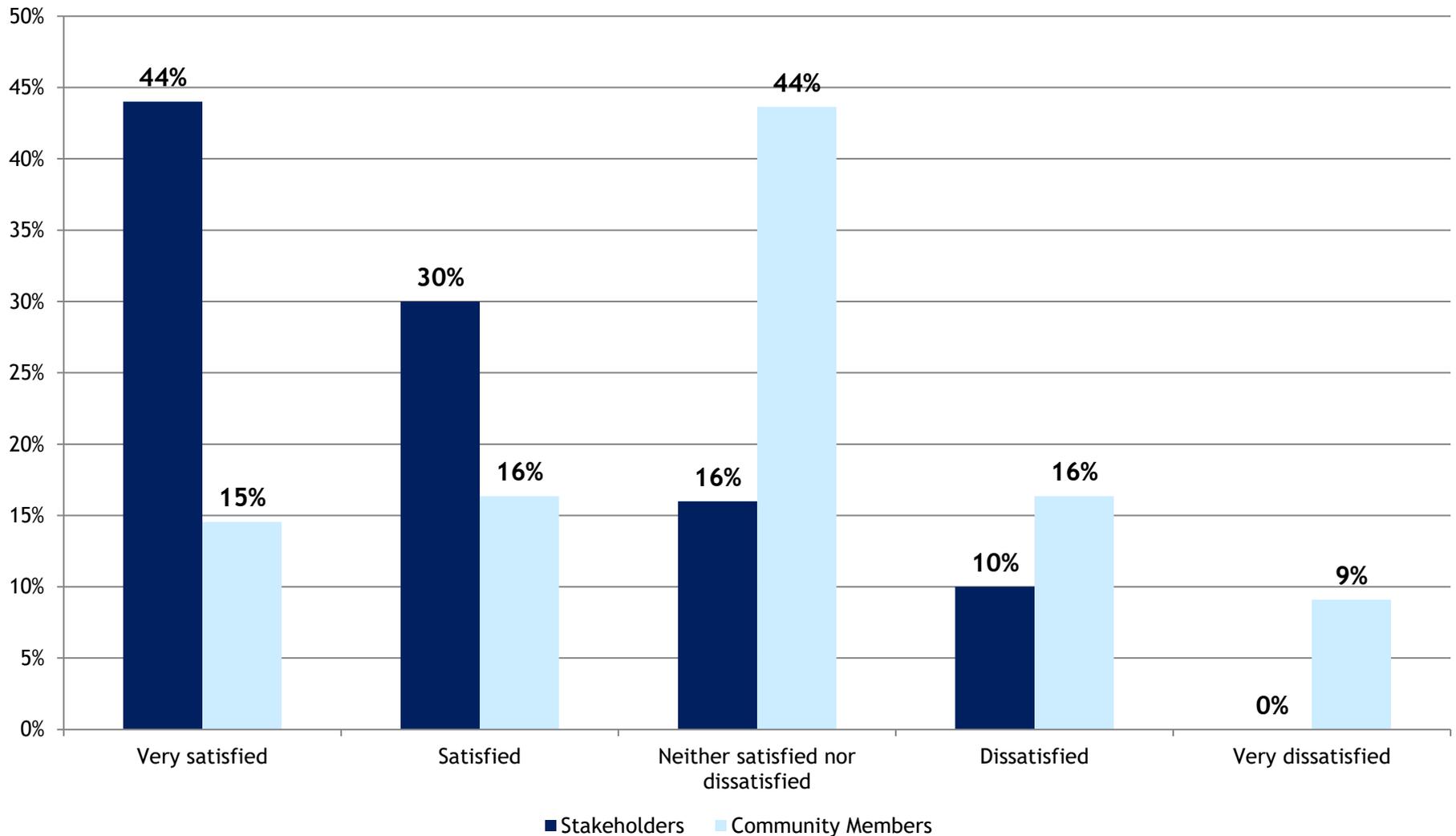


For Children



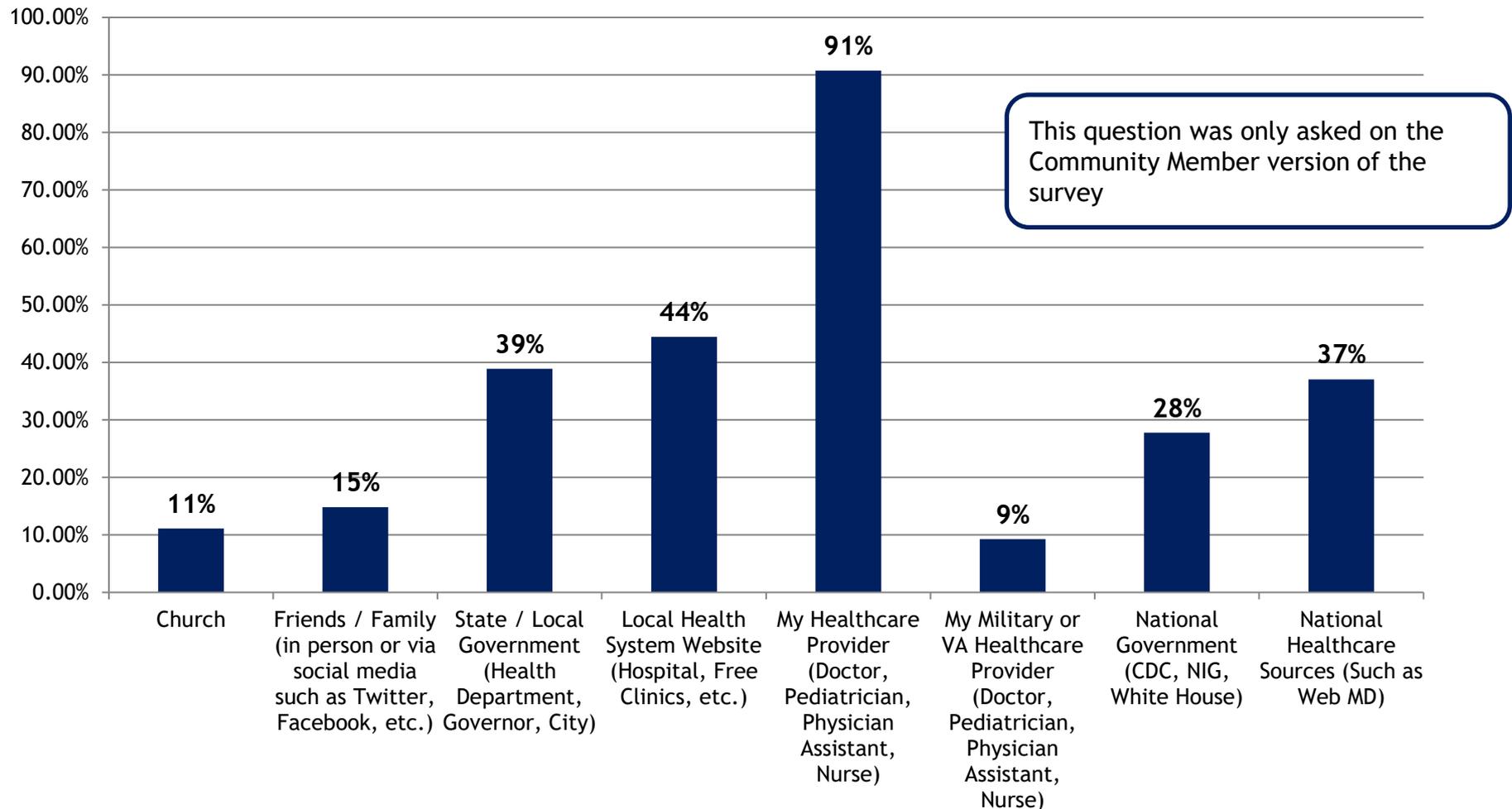
# Community Survey:

Indicate Satisfaction with How Your Community (Community Members) / Organization (Community Stakeholders) Is Addressing Diversity, Equity & Inclusion



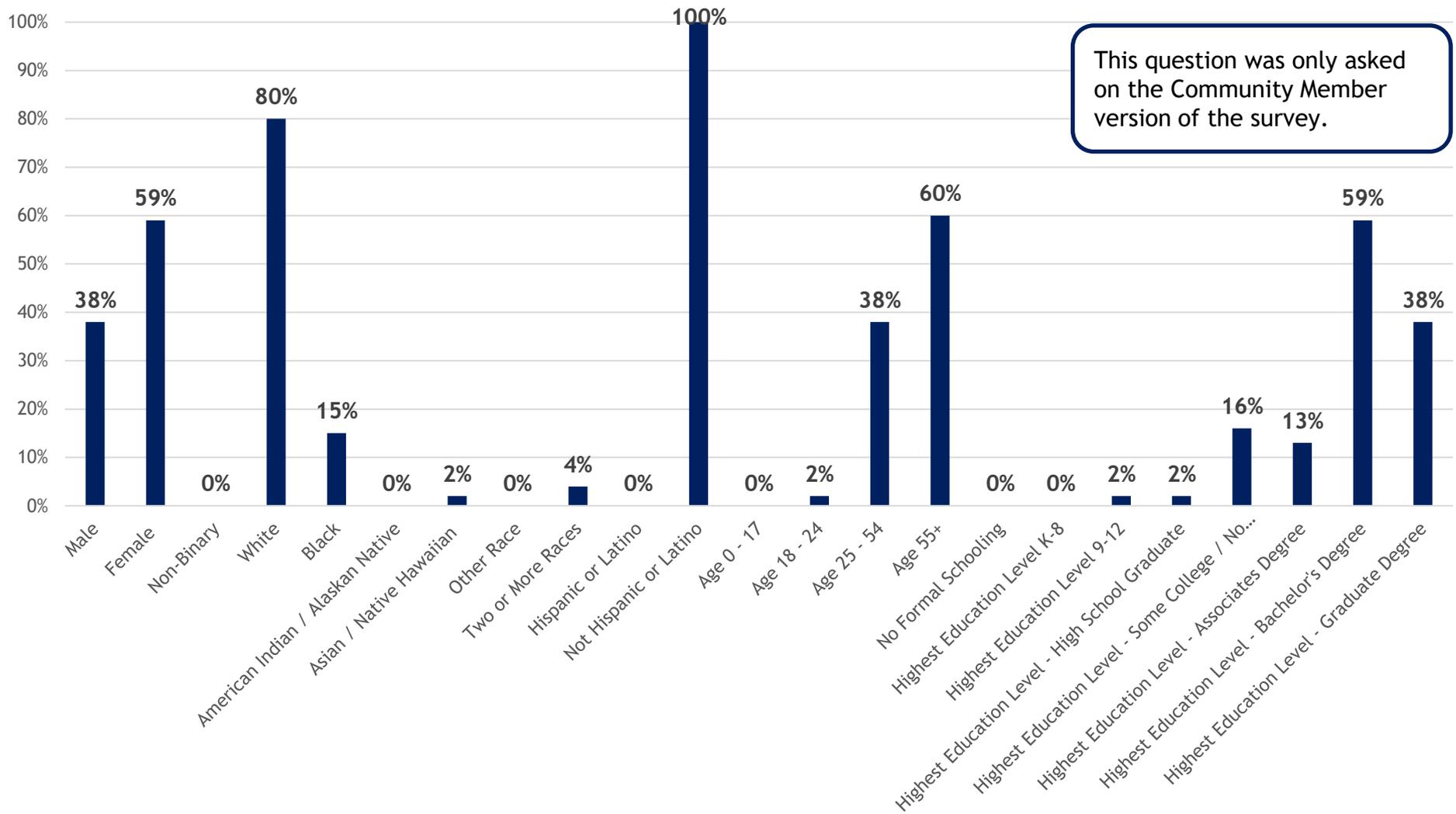
# Community Member Survey:

## Which of the Following Do You Consider to be a Trusted Source of Health Information?



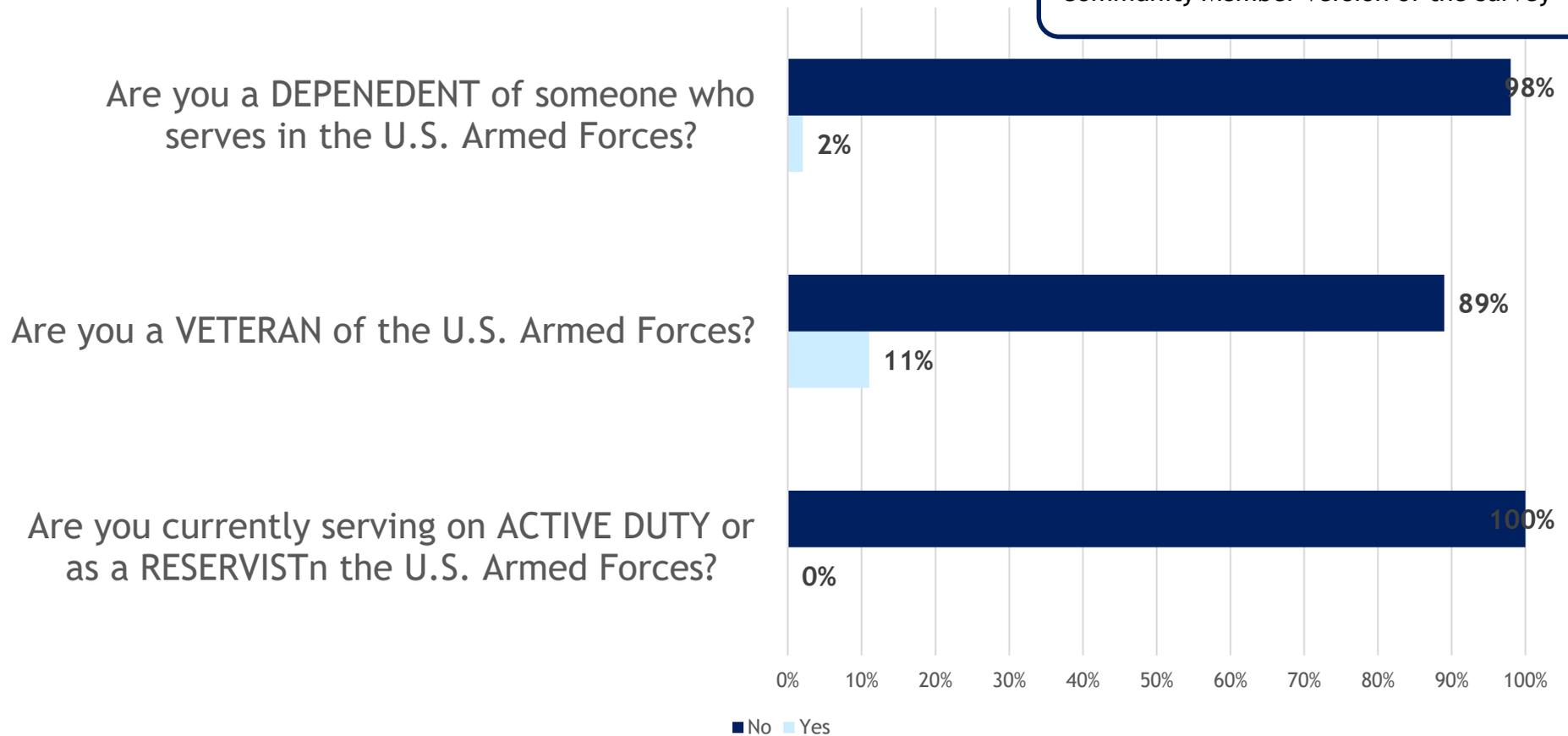
# Community Member Survey:

## About Respondents - Sex, Race, Ethnicity, Age, Education Level



# Community Member Survey: Respondents Relationship with Armed Forces

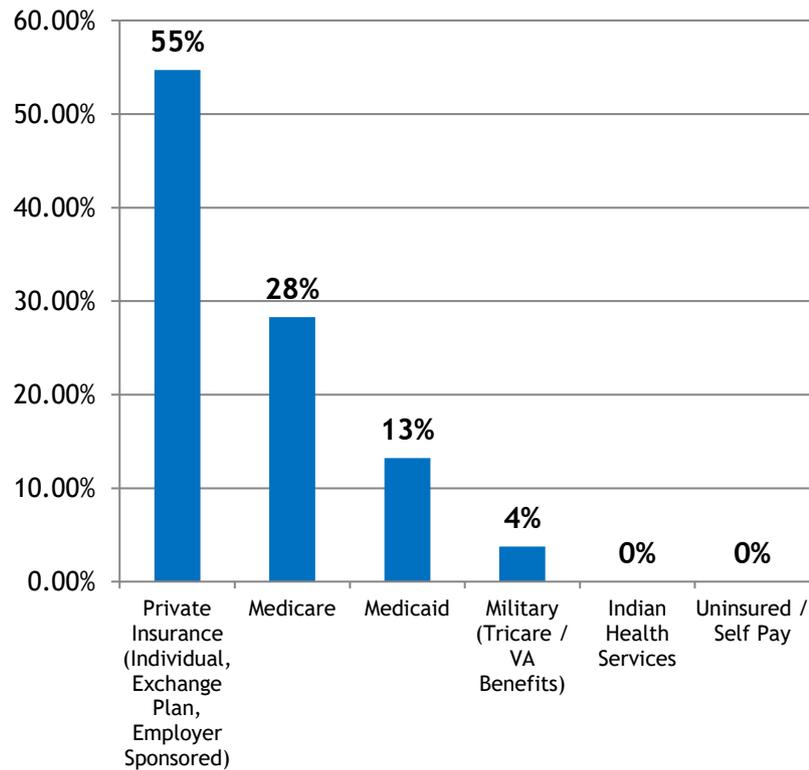
This question was only asked on the Community Member version of the survey



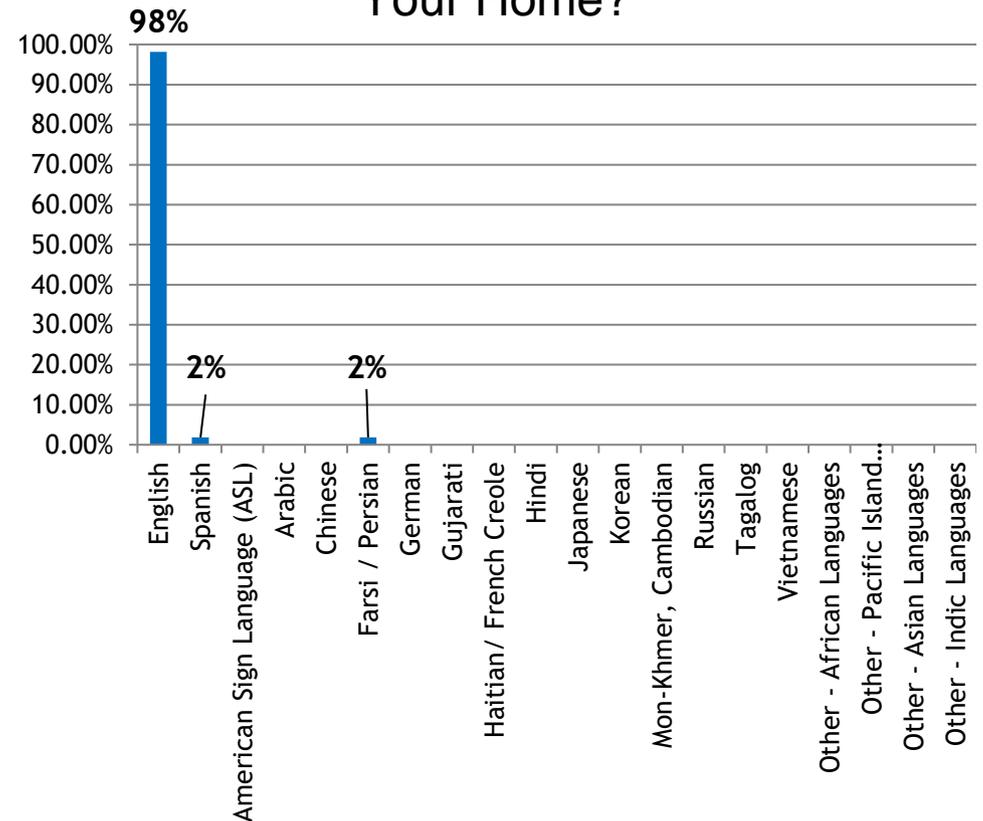
# Community Member Survey:

## About Respondents - Insurance and Languages in the Home

### Insurance



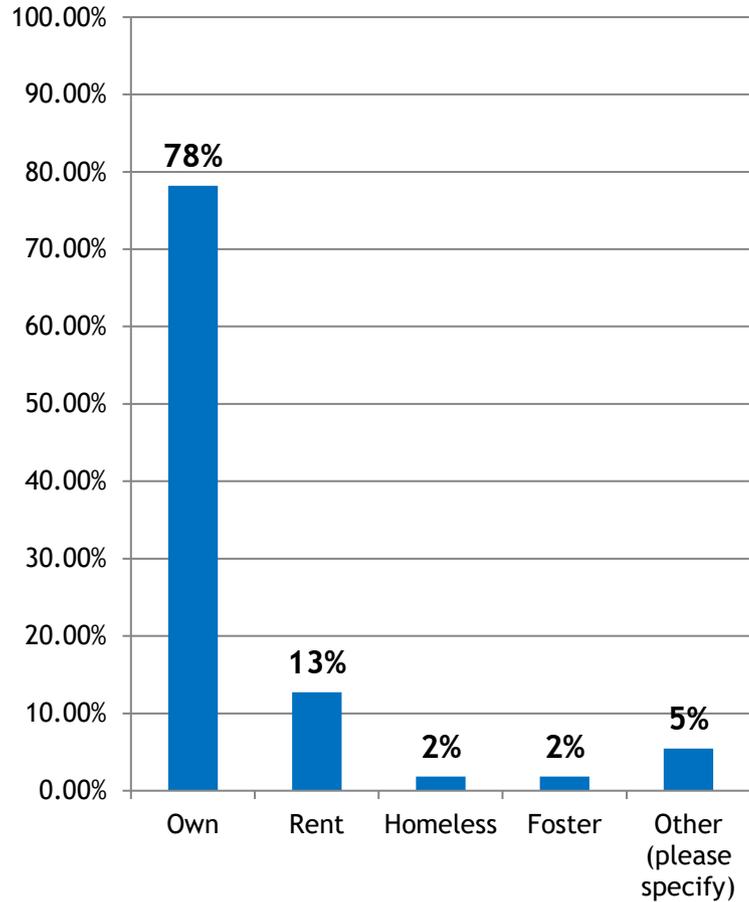
### Primary Language(s) Spoken in Your Home?



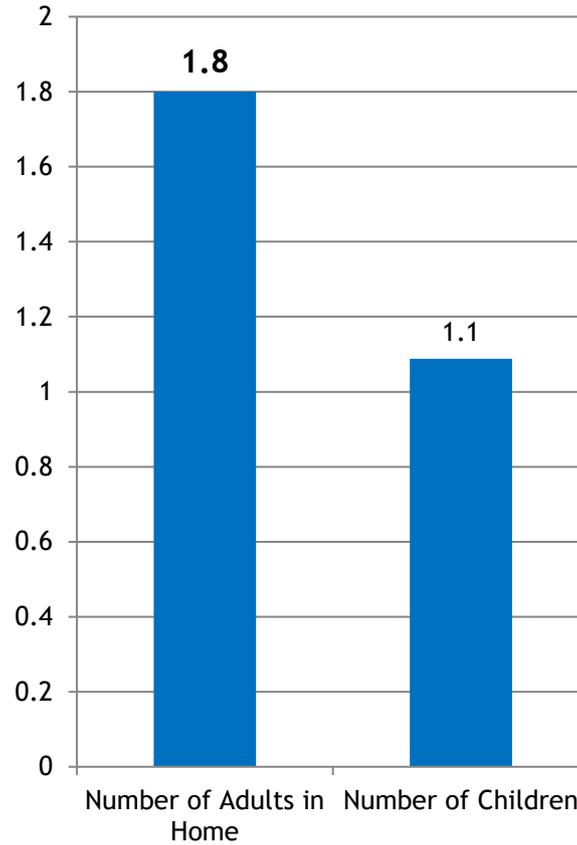
These questions were only asked on the Community Member version of the survey.

# Community Member Survey: About Respondents - Who Lives in the Home

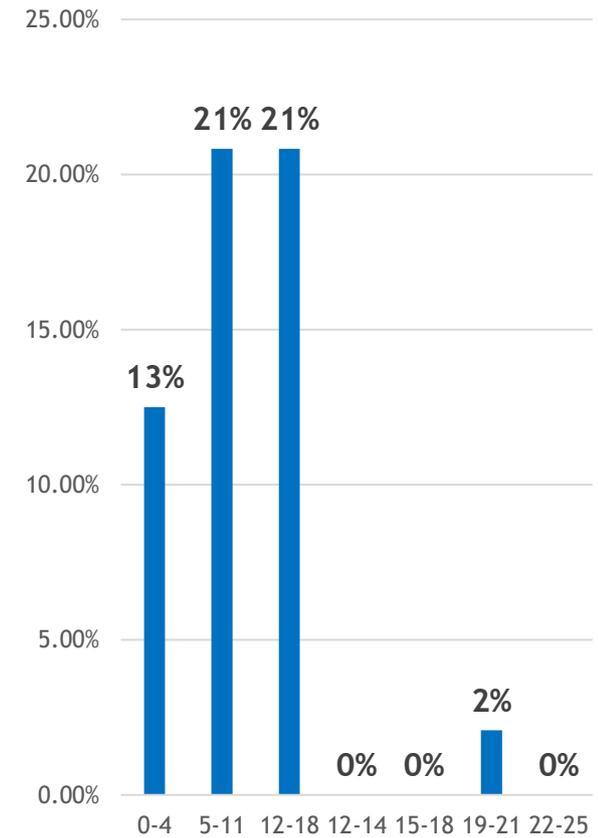
### Housing



### Who Lives In The Home



### Ages of Children Living in the Home



These questions were only asked on the Community Member version of the survey

# Implementation Plan Progress Report

## Progress on RSMH 2020-2022 CHNA & Implementation Plan

# RSMH Community Health Work 2020-2022: Unprecedented Times Required Unprecedented Response

- Not long after the 2020-2022 planning process was complete, the world heard the first news stories about a new coronavirus.
- The demands of the COVID-19 pandemic required incredible coordination, collaboration and adaptability on the public health system and the healthcare facilities across the globe.
- As such, the plan created in 2019 for the focus of community health outreach had to be drastically adjusted on the fly as RSMH worked to care for the population of Virginia's Eastern Shore.
- After the worst of the pandemic, and when limits on social gatherings were lifted, some of the initial plans were implemented as intended, and some had to be adapted.

# RSMH Community Health Work 2020-2022: COVID-19 Pandemic Response



Riverside partnered with other health systems in the area to promote masking, social distancing and vaccinations

COVID-19 hit the Eastern Shore of Virginia hard, especially impacting the poultry processing plants in the area. RSMH earned national attention for its response to the crisis. With support of the other hospitals in the health system, Riverside was able to care for the members of the community.



Once the vaccine became available, RSMH played a key role in vaccinating the residents of the Eastern Shore.



# RSMH Community Health Work 2020-2022: Lifelong Wellness

**2020-2022 Commitment:** Riverside has been and will continue to be a strong participant in the Eastern Shore Healthy Communities Coalition of organizations and agencies as it focuses on promoting better health on the Eastern Shore.

## 2020-2022 Community Partnerships Update:

- RSMH continued to actively engage with Eastern Shore Healthy Communities in support of their focus on the community's health, as well as supporting the Community Partners of the Eastern Shore through board participation.
- RSMH strengthened relationships with existing partners during the pandemic as well as built new connections with local industry leaders in order to care for the people of the Eastern Shore of Virginia.
- RSMH participated in community events as social distancing requirements were eased, such as the traditional St. Patrick's Day celebration.



# RSMH Community Health Work 2020-2022: Lifelong Wellness

**2020-2022 Commitment:** Riverside will continue to offer healthy lifestyle education to the public and in the schools, as well as support other organizations that promote healthy lifestyles.

## 2020-2022 Healthy Lifestyle Education Update:

- RSMH implemented a Wellness Connections program offering wellness education and information to community representatives who agreed to then flow the information to the group they represented (church group, school groups, civic clubs, etc) using whatever means of communication was appropriate for that group. Information was offered in a variety of formats so the Connectors could choose what worked for their group.
- As it became safe to do so, in-person events started back in 2021. The Riverside Medical Group team offered prostate cancer screening and education. Nurse educators also started to meet with small community groups to help people learn about topics such as stroke, cardiovascular health, women's health, prediabetes and diabetes and cancer prevention.



# RSMH Community Health Work 2020-2022: Lifelong Wellness

## 2020-2022 Healthy Lifestyle Education Update (continued):

- With in-person gatherings suspended for most of the three-year period, the community talks, gatherings and classes had to move online. Videos of physician talks, patient testimonial videos, blogs and other health education content are shared via the riversideonline.com website as well as various social media channels. This also aided in sharing information on the pandemic.
- A multidisciplinary team offered tobacco and vaping prevention education to middle and high school students in two local schools in 2019. Plans had to be delayed for COVID for 2020 and 2021 but was restarted in 2022.

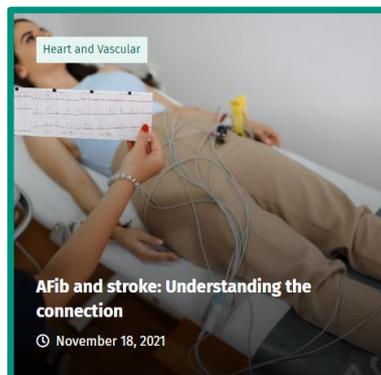


**I Survived a Stroke: Charles' Story**  
Charles Baines shares his personal experience of having a stroke earlier this year. As a Deputy Sheriff and internationally acclaimed kickboxer, he never thought it would happen to him. But, strokes can happen to anyone at any time. Would you recognize the signs and symptoms if a friend or co-worker was having a stroke?



**Does vaping cause lung cancer?**  
October 29, 2021

Cancer Lungs and Breathing +1 More



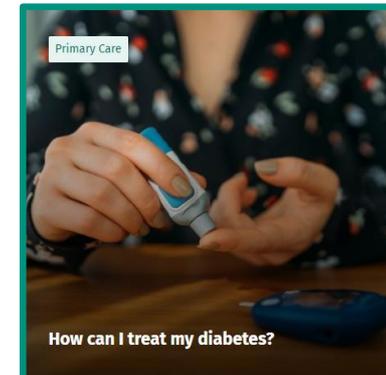
Heart and Vascular

**AFib and stroke: Understanding the connection**  
November 18, 2021



Primary Care

**How to deal with your high blood pressure**



Primary Care

**How can I treat my diabetes?**

# RSMH Community Health Work 2020-2022: Mental and Behavioral Health

**2020-2022 Commitment:** Riverside will continue to be supportive of the Community Services Board and other organizations serving the mental and behavioral health needs of the Eastern Shore population. Riverside may partner with the CSB and others to provide needed services and education for the community as opportunities arise to address issues such as suicide, substance abuse disorders, ADD/ADHD and opioid abuse.

## 2020-2022 Mental and Behavioral Health Update:

- Riverside Shore Memorial Hospital's pharmacy team partnered with local law enforcement, Walgreens and the Community Services Board to offer a Drug Take Back Day in April 2022. By safely disposing of unwanted or expired medications, the ground water is protected from contamination due to flushing medications, and local humans and animals do not have access to medications that are thrown away in the garbage or left in medicine cabinets.
- The emergency department at RSMH has an officer with Crisis Intervention Training to help de-escalate patients who are in crisis and acting out.



# RSMH Community Health Work 2020-2022: Mental and Behavioral Health

## 2020-2022 Mental and Behavioral Health Update (Continued) :

- Riverside partners at an organizational level and at the patient level with the Community Services Board (CSB). Additionally, the CSB has a seat on RSMH's Patient and Family Advisory Council for their perspective on how the hospital can better serve their patient population.
- Riverside in Newport News is constructing a Psychiatric Emergency Department that will serve the region including the Eastern Shore. In addition, Riverside's Behavioral Health Center has many programs to serve people with addiction problems in the region and is adding more programs regularly. Shore residents have access to these services via telemedicine and through the Riverside network.



# RSMH Community Health Work 2020-2022: Parental Engagement and Education

**2020-2022 Commitment:** Riverside will continue to partner with Eastern Shore Rural Health, local school systems, Smart beginnings Eastern Shore and other organizations to provide the best possible start in life through education and access to local resources

## 2020-2022 Parental Engagement and Education Update:

- Riverside has continued to provide the only Labor & Delivery services on Virginia's Eastern Shore, meaning women in labor don't have to leave the state or cross the more than 17-mile-long Chesapeake Bay Bridge Tunnel, which can close in high winds. The OB/GYN clinicians care for the women of the Eastern Shore, including during pregnancy and childbirth. During the pandemic, breastfeeding and childcare classes continue though in a virtual format.
- Riverside Shore Memorial Hospital offers a new mother support group on Facebook for any new mom in the region.



# RSMH Community Health Work 2020-2022: Parental Engagement and Education

## 2020-2022 Parental Engagement and Education Update (Continued):

- Pregnant women on the Shore were invited to two community baby showers, one in person and one virtual, where education on many childbirth-related topics was available. Smart Beginnings Eastern Shore offers diaper bags with resources, baby books, and coupons to every mother who delivers at Riverside Shore Memorial Hospital.
- Riverside's partnerships with ES Rural Health, the local school systems, Smart Beginnings and other organizations are strong, including ensuring all kids have the supplies they need for school.



# RSMH 2023-2025 Implementation Plan

## Process Overview

# Riverside CHNA & Implementation Plan 2023 - 2025: Planning Process

## Community Health Needs Assessment Process

- To complete a full community health needs assessment Riverside examined a wide range of quantitative data sources addressing socioeconomic, health and safety issues. The full list of these sources is available in the report addendum.
- In addition to the quantitative analysis, Riverside partnered with other area facilities and health departments to survey both community health leaders as well as community members on their perspectives, viewpoints, experiences and ideas.

## Focusing the Full Resources of the Health System on Key Community Health Issues

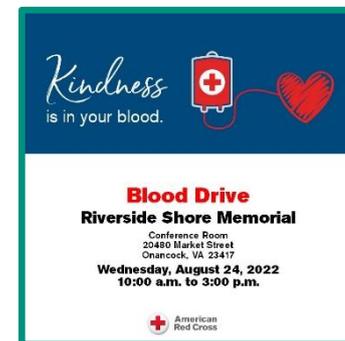
- The COVID-19 pandemic experience demonstrated the impact Riverside could have on the health of our community when all of the resources across the health system were focused on solving the same problem.
- While during previous CHNA cycles each hospital across Riverside Health System identified unique priorities for each hospital, the 2023 - 2025 cycle will focus on 2 key community health issues across the health system in order to leverage the full strength of the organization to impact the problems.
- Each hospital across the health system will continue to address other community health issues outside of the CHNA process. This may include things like community education and outreach, health screenings, providing critical services, health professions education and partnering with local organizations to address issues of health equity.

# Riverside CHNA & Implementation Plan 2023 - 2025: Identifying & Selecting Significant Health Needs to Address

- A team consisting of clinical and non-clinical staff reviewed all of the data and identified significant issues that were consistent across all of Riverside's markets.
- These included: mental health and wellness, opioids and substance use disorder, care of patients living with dementia as well as their caregivers, cardiovascular health and wellness and cancer.
- The CHNA Steering Committee reviewed the potential areas of focus as well as discussed internal projects underway that might allow areas of overlap to enhance existing community efforts.
- For cardiovascular health & wellness and cancer, it was determined that the plans to address these community health needs were already being addressed through our service line programs focused on these areas. Activities such as screenings, community talks, education on risk factors and signs of stroke and heart attack, exercise opportunities and healthy eating promotion are already a part of RSMH's community work.
- For mental health and wellness, Riverside has been focused on expanding these services to the broader community by expanding it's Hampton facility, Riverside Behavioral Health Center, which is part of Riverside Regional Medical center but located on a separate campus. There is current construction of a psychiatric emergency department and the ongoing recruitment of additional mental health practitioners to the region and both a newly identified Associate VP and Service Line Physician Chief for the program. While this is not located on the Eastern Shore, as the health system expands its resources in this area, RSMH will continue to benefit through telemedicine access and support as well as being able to tap into the clinical expertise of experts in the field.
- The remaining two areas were selected for focus as part of the CHNA process - Opioid Stewardship and Memory and Dementia Services.

# Riverside CHNA & Implementation Plan 2023 - 2025: Identifying & Selecting Significant Health Needs to Address

- While only two areas were selected to officially be part of the CHNA Implementation Plan, other community health initiatives will continue outside of the CHNA process. These include addressing areas such as :
  - Public health education on wellness and prevention, including nutrition and healthy food
  - Public education on symptom recognition of signs & symptoms of heart attack and stroke
  - Mental health and wellness
  - Vaccinations
  - Healthy parenting
  - Cancer prevention & screening
  - Health equity issues



# RSMH 2023-2025 Implementation Plan

## Focus Areas

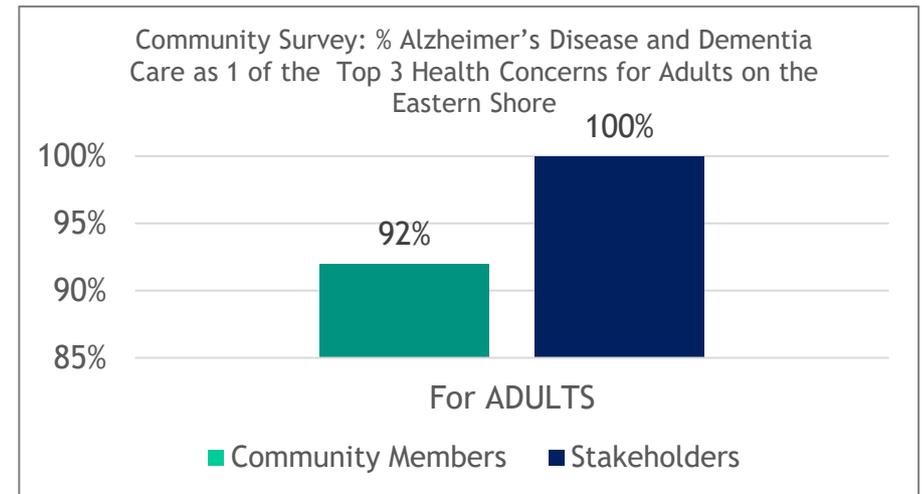
# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 1 - Memory and Dementia Services

As noted on slide 39, multiple forms of dementia were noted among the top causes of death on the Eastern Shore in 2020. Unspecified dementia, Alzheimer’s disease (unspecified), vascular dementia and Alzheimer’s disease (late onset) are all included in the top 20 cases of death in 2020. When examined together, there were 60 deaths on the Eastern Shore from a form of dementia, with a Crude Death Rate per 100K (not Age Adjusted) of 136.6—which is 69% higher than seen in Virginia as a whole.

	Eastern Shore		Virginia	
	Deaths in 2020	Crude Death Rate per 100k	Deaths in 2020	Crude Death Rate per 100k
Unspecified Dementia	22	50.1	3,549	41.3
Alzheimer's Disease (unspecified)	18		2,738	31.9
Vascular Dementia	10		562	6.5
Alzheimer's Disease (late onset)	10		112	1.3
<b>4 Top Dementia Types Combined</b>	<b>60</b>	<b>136.6</b>	<b>6,961</b>	<b>81.03</b>

As noted on slide 65, 92% of community respondents and 100% of stakeholder respondents identified Alzheimer’s Disease and Dementia care as one of the most important health concerns for adults in the Eastern Shore community.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 1 - Memory and Dementia Services

Caring for dementia patients is complex and an ever-moving target. The experience varies by cause and type, individual patient, setting and caregiver support among other variables. With the combined expertise of Riverside's Neurological and Spine Institute, Riverside Senior Living and the Center for Excellence and in Aging and Lifelong Health, Riverside has many key components in place to provide the best care, support and experience for dementia patients and their loved ones.

In the 2023-2025 timeframe, Riverside will be delineating a more detailed vision of what memory and dementia services can become, including building additional connections between the different areas of the health system for seamless care.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 1 - Memory and Dementia Services

Memory and dementia care projects will be piloted at different hospitals and facilities across the health system, with the successful programs then implemented at the other facilities.



### Memory Cafés

While initially planned for the last CHNA process, Memory Cafés had to be put on hold due to concerns about social distancing. Moving forward, RSMH will explore implementing these opportunities in conjunction with community partners so that both patients with dementia issues and caregivers can come together in a relaxed, social environment to share experiences and support each other. These have been successful in the Peninsula and Williamsburg markets, and we look forward to bringing this to the Eastern Shore.

# Riverside CHNA & Implementation Plan 2023 - 2025: Focus Area 1 - Memory and Dementia Services

## Purple Flower Project

The Alzheimer's Association notes that Alzheimer's Disease isn't a "red" or "blue" issue, but one that impacts all Americans, making it a purple issue. A flower - based on a forget-me-not-is chosen to represent those dealing with memory issues or those remembering loved ones lost to dementia.

One of RSMH's sister facilities will be piloting a project to use a small purple flower on a door or chart as a way to quietly notify staff that the patient or resident in the room has a memory issue. This notification system along with special training for team members will help staff and volunteers adjust their communications with and expectations of the individual.

Following a successful implementation at the other facility, RSMH hopes to implement the same program on the Eastern Shore.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 1 - Memory and Dementia Services

### Utilizing Primary Care Health Coaches

RSMH will evaluate the possibility of having the primary care health coaches at each PCP location on the Eastern Shore go through Teepa Snow training to learn how to best support and care for patients with dementia. If successful, it will be rolled out at other primary locations in the health system.



# Riverside CHNA & Implementation Plan 2023 - 2025:

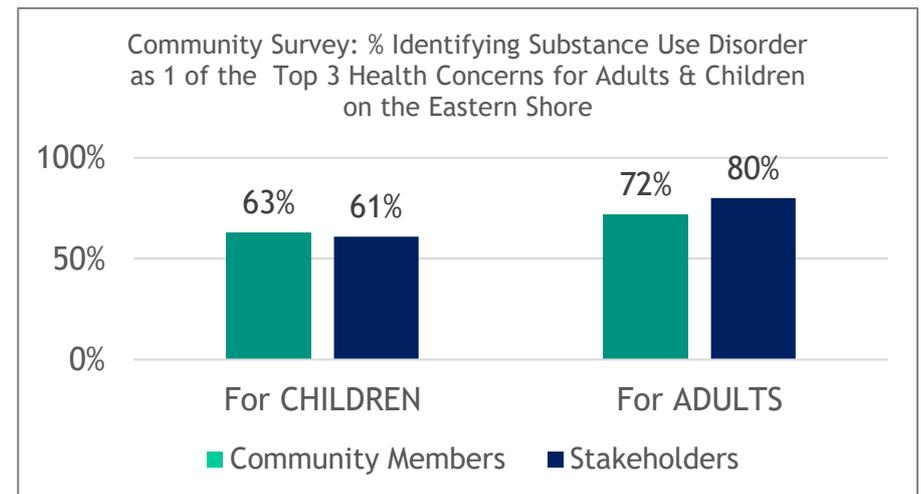
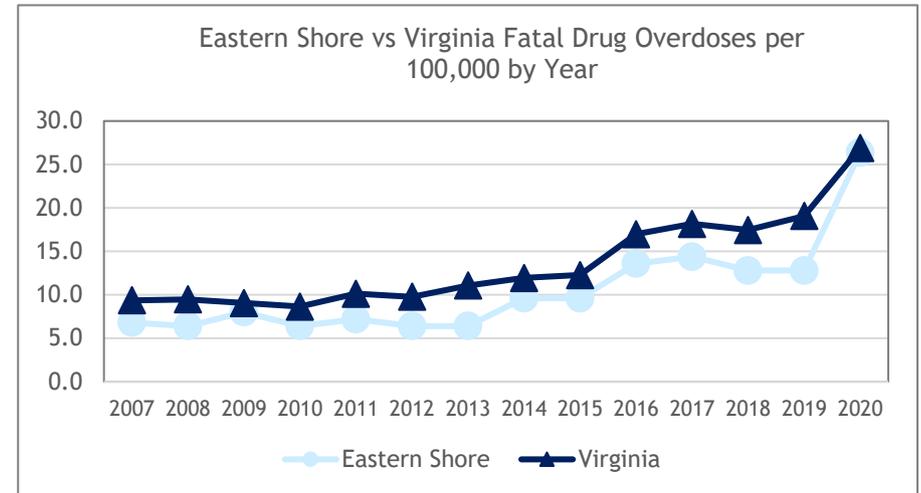
## Focus Area 2 - Opioid Stewardship and Substance Use Disorder

The importance of this issue was clear in both the quantitative data and qualitative input.

As noted in slides 44 and 45, the fatal drug overdoses on the Eastern Shore, in Virginia and across the country have risen rapidly in the past 13 years, with a very high increase during the pandemic.

As noted on slide 65, 72% of community respondents and 80% of stakeholder respondents identified substance use disorder as one of the most important health concerns for adults in the Eastern Shore community. Additionally, 63% of community members and 61% of stakeholders identified substance use disorder as one of the most important health issues for children on the Eastern Shore.

One hospital or health system cannot solve such a complex crisis that is seen in every town, but there are multiple steps Riverside has identified that it can take to begin to impact some of the factors involved.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 2 - Opioid Stewardship and Substance Use Disorder

To build the plan for the health system to address this issue in a cohesive manner, the VP of Pharmacy led an interdisciplinary team that included inpatient and outpatient physicians, nurses, pharmacists, mental and behavioral health experts and others representing all the hospitals as well as critical support areas such as the electronic medical record (EMR) team.

The team pulled from the National Quality Partners™ (NQP) Opioid Stewardship Action Team's *NQP™ Playbook: Opioid Stewardship* as well as from research, presentations and case studies shared nationally including the great work done by Carillion in the western part of Virginia. The Virginia Department of Health's 2021 *Best Practices for Opioid Related Emergencies in the Emergency Department* was also used as an important resource.

The team reviewed and learned about recommended areas of Primary, Secondary, and Tertiary overdose prevention strategies. Primary strategies focus on preventing the onset of substance use disorder by avoiding exposure to opioids with tactics such as developing evidence-based prescribing guidelines to promote alternate pain management approaches where appropriate, monitoring prescriptions, preventing diversion, executing pain management agreements for chronic pain patients, and educating the public on storage and disposal. Secondary strategies focus on screening for individuals who are high risk for substance use disorder so that more aggressive prevention and treatment approaches can be pursued. Tertiary strategies focus on helping individuals with substance use disorders prevent fatal overdoses using measures to reduce harm and to get off the drug using medication assisted treatment, naloxone prescriptions, and other strategies.

There are additional factors that impact this national crisis, such as increasing supply of illegally manufactured opioids available to the public without a prescription, that are outside the scope of this plan at this time. Due to the nature of opioids as an addictive and controlled substance, not every aspect of the implementation plan will be publicly detailed. Nonetheless, the team identified projects in each of the prevention areas (primary, secondary, and tertiary).

# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 2 - Opioid Stewardship and Substance Use Disorder

**Primary Overdose Prevention Strategies** *(Primary strategies focus on preventing the onset of substance use disorder by avoiding exposure to opioids):*



### Internal Health System Projects:

- While not as visible to the public, Riverside has identified areas to continually monitor and design evidenced based processes to track prescriptions, appropriate use, policy adherence and diversion prevention. This will be done by the pharmacy team, Riverside Medical Group and RSMH staff, the EMR team and other internal support areas.

### Community Partnership Projects:

- RSMH will continue partnering with law enforcement and the DEA in hosting a Riverside Drug Take Back Day.
- Riverside will create and maintain local partnerships to combat opioid addiction in the community. Riverside will continue working with the Hampton Roads Opioid Working Group, a regional collaborative that uses a community-based and action-oriented approach to reduce opioid-related deaths.
- Led by the new Mental and Behavioral Health Service Line leadership, Riverside will identify opportunities throughout Riverside and the community for community outreach and education.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 2 - Opioid Stewardship and Substance Use Disorder

**Secondary Overdose Prevention Strategies** (*Identifying those at increased risk of SUD so that more aggressive prevention and treatment approaches can be pursued*):

### Internal Health System Projects:

- Working across the health system, RHS will develop and implement consistent screening processes to identify those individuals at high risk for developing SUD.
- This processes need to be tailored to each setting such as the Emergency Department, surgical patients, inpatient, and in RMG offices; therefore, the process developed for each setting and the resulting next steps will be appropriate for that setting.
- Once piloted and finalized at other RHS facilities, these may be implemented at RRMC as well.



# Riverside CHNA & Implementation Plan 2023 - 2025:

## Focus Area 2 - Opioid Stewardship and Substance Use Disorder

**Tertiary Overdose Prevention Strategies** (*Assisting individuals living with SUD prevent fatal overdoses using measures to reduce harm and to get off the drug using medication assisted treatment, naloxone prescriptions and other strategies*):



### Internal Health System Projects:

- Across the health system, there will be different pilot projects addressing this issue. Once a program is successfully implemented and shown to be beneficial, it will be replicated at RSMH. For example, a sister-facility will be piloting a program trialing Medication Assisted Therapy (MAT) beginning in the ED to bridge individuals from the initial emergency visit through the first few days it takes to get into an outpatient MAT program.
- Riverside will continue to facilitate access to inpatient and outpatient addiction services.
- The entire health system will also be able to draw on the expertise of the clinical staff at the Riverside Behavioral Health Center in Hampton. As materials, protocols, telemedicine programs or other opportunities are developed, RSMH will be able to build off those to better serve the individuals on Virginia's Eastern Shore dealing with SUD.

# RSMH 2022-2025 CHNA & Implementation Plan

## Appendices

# Riverside CHNA & Implementation Plan 2023 - 2025 :

## Appendix 1: Notes on Data and Quantitative Data Sources

### Notes on Data Use and Availability

- This report is a summary of a year long study of the community.
- Note that the most recent available data was used for each data element, but public health data is often 2-3 years old. With the pandemic in 2020, some data was delayed more than usual so resources could be devoted to managing COVID-19 in the community.
- Depending on the source, data is reported either at the locality level (Virginia city or county) or at the Virginia health district level.

### Quantitative Data Sources

Specific sources are listed with the data sets or graphs in the appendices, but some of the major sources for demographic, economic and health data included:

- US Census
  - Utilizing 2010 Census, 2020 Estimates, 2025 Projections and ACS (American Community Survey) data. The data was pulled utilizing Buxton software that allows reporting by city, county, ZIP or Census Tract.
  - Small Area Health Insurance Estimate Program
- Virginia Department of Health
  - Office of the Medical Examiner
  - Equality at a Glance Housing Insights
  - Behavioral Risk Factor Surveillance Survey (BRFSS)
  - Maternal & Child Reporting
  - COVID-19 Reporting
  - HIV Surveillance Annual Report

# Riverside CHNA & Implementation Plan 2023 - 2025 :

## Appendix 1: Notes on Data and Quantitative Data Sources

### Quantitative Data Sources (Continued)

- Centers for Disease Control and Prevention (CDC)
- United States Health Resources and Service Administration
- County Health Rankings
- Virginia Employment Commission
- Virginia State Police - Crime in Virginia 2020 Report
- Virginia Health Information
- Virginia Department of Education, Office of School Nutrition
- Feeding America, Map the Gap
- National Center for Education Statistics, Program for the International Assessment of Adult Competencies
- Limited English Proficiency (lep.gov)

# Riverside CHNA & Implementation Plan 2023 - 2025 :

## Appendix 2: Qualitative Community Input

Riverside Health System (Riverside Shore Memorial Hospital, Riverside Regional Medical Center, Riverside Walter Reed Hospital, Riverside Doctors' Hospital of Williamsburg and the Joint Venture facilities including Riverside Rehabilitation Institute and Hampton Roads Specialty Hospital), Sentara Healthcare, Children's Hospital of the Kings' Daughters (CHKD), Bon Secours Mercy Health and the Virginia Department of Health worked together to create the Hampton Roads Community Survey online using Survey Monkey to obtain community input.

There were 2 forms of the online survey:

The Community Stakeholder version of the survey was emailed to a wide variety of community leaders and stakeholders including individuals who work in education, public health, health care, mental and behavioral health, local government, first responders, business leaders and others.

The Community Member version of the survey was promoted to community members via social media and websites.

Both versions of the survey were open from late November 2021 through February 2022.

**The survey was created to accept all input and was not structured as a representative sample. All results should be taken as qualitative, directional data and should not be considered statistically significant without additional research.**

Of all of the surveys completed, the data was filtered so the data included in the Riverside Shore Memorial Hospital indicated they lived in Accomack or Northampton county or that they worked serving adults or children in those same localities.

# Riverside CHNA & Implementation Plan 2023 - 2025 :

## Appendix 2: Qualitative Community Input

On the Stakeholder Survey, 126 individual indicated they served individuals in Accomack or Northampton County. Multiple individuals noted they served individuals in multiple areas. Individuals completing the stakeholder survey were asked to include information on the government, organization or company they worked for and their job title. A list of all organizations represented, along with other detailed information on the demographic and geographic breakdown of the respondents is included in the appendices.

On the Community Member Survey 78 individuals responded that they resided in Accomack or Northampton County.

This combines for a total of 204 responses to the combined survey for RSMH. This is an increase from all prior CHNA cycles.

	2013	2016	Change from 2013 - 2016	2019	Change from 2016 - 2019	2022	Change from 2019-2022
RSMH TOTAL	31	37	19.4%	60	62%	204	240%

This Community Health Needs Assessment and Implementation Plan was adopted by the Riverside Shore Memorial Hospital Board of Directors on October 25, 2022.