SENTARA MARTHA JEFFERSON HOSPITAL 2016 Community Health Needs Assessment Supplemental Report





SENTARA®

Sentara Martha Jefferson Hospital participated in a collaborative effort to conduct a community health needs assessment (CHNA) of the area that we serve. The assessment, *MAPP2Health*, published in December 2016, is available in its entirety at **www.sentara.com**. This CHNA was adopted by the Martha Jefferson Hospital Board of Directors as the CHNA for both the Sentara Martha Jefferson Hospital and Sentara Martha Jefferson Outpatient Surgery Center.

The community health priority areas identified in 2016 MAPP2Health, include:

- Promote Healthy Eating and Active Living
- Address Mental Health and Substance Use
- Improve Health Disparities and Access to Care
- · Foster a Healthy and Connected Community

A detailed description of the process that led to the identification of these community health priority areas, including population characteristics, risk factors and health indicators is included in the 2016 *MAPP2Health* at **www.sentara.com**.

Our previous CHNA, 2012 *MAPP2Health*, identified several health priorities. This "Sentara Martha Jefferson Hospital, 2016 Community Health Needs Assessment Supplemental Report," includes an update of the health priorities identified in our previous CHNA. Community organizations addressed the priorities. The progress made on meeting priority objectives is included in this supplemental report and includes the most recent data available as of December 2016.

Sentara Martha Jefferson Hospital developed a three year implementation strategy for addressing each priority area found in our previous CHNA. A summary of the hospital's efforts in addressing those areas is also found in this report. The last section outlines Sentara Martha Jefferson Hospital's contributions in developing the 2016 *MAPP2Health* and the Hospital's next steps.

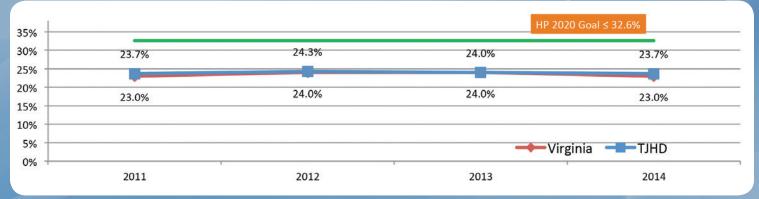
We invite you to read both the 2012 and 2016 *MAPP2Health* reports, adopted as the CHNA for Sentara Martha Jefferson Hospital, at **www.sentara.com**.

Goal: Decrease the percentage of persons who are overweight or obese in Thomas Jefferson Health District by promoting school and corporate wellness policies and by engaging residents in a Move2Health campaign.

Objective 1: By 2017, reduce the percentage of adults living in Thomas Jefferson Health District who are physically inactive from 24% to 20%.

2016 Objective Update:

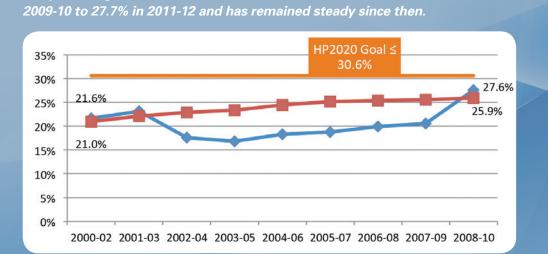
The percentage of adults in PD10 (TJHD) who are physically inactive has been stable since 2011 at approximately 24%. While the percentage for 2014 is above TJHD's goal of 20%, it is below the Healthy People 2020 goal of 32.6%. The Move2Health Campaign recently received a grant to enact wellness policies in schools and worksites within the district.



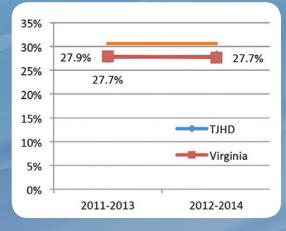
Percent of Adults Aged 20 and Older Reporting No Leisure Time Physical Activity, TJHD and Virginia, 2011–2014. Source: County Health Rankings Health Factors, Health Behaviors, Physical Inactivity, 2016.

Objective 2: By 2017, stop the trend of increasing percentage of Thomas Jefferson Health District residents who are overweight or obese.

2016 Objective Update:



The percentage of obese adults in PD10 (TJHD) decreased from 31.5% in



Percentage of Obese Adults (self-reported BMI >300 Aged 20 and Older, TJHD and Virginia, Three-Year Rolling Averages, 2000–2010 and 2011–2014. Source: Virginia Department of Health, Virginia Behavioral Risk Factor Surveillance System, 2016.

Sentara Martha Jefferson Hospital Strategies to Address An Increasing Rate of Obesity

Strategy #1:

Launch the Sentara Starr Hill Health Center (SSHHC), a wellness center focused on addressing obesity through an advanced practice nurse wellness model.



The SSHHC opened in January 2013. The Nurse Practitioner at the Center has seen an average of 75 new patients and averaged over 790 follow-up visits each year. Successes have included several patients who have achieved and sustained weight loss, including those who have lost in excess of 100 pounds.

Other successes include patients who have decreased or eliminated blood pressure or blood sugar medications. The Center has also been able to make connections for patients to primary care providers, mental health and other community services.

The Center's programming was supplemented with free fresh fruit and vegetable pick-ups, cooking classes, stress reduction sessions, and grocery store tours.

Strategy #2:

Serve on the Move2Health Coalition (www.move2healthcentralva.org), a local health department initiative to promote good nutrition and physical fitness in the community.

2016 Objective Update:

In 2013 The Move2Health Coalition launched a campaign to get the community to become more active. During the campaign, the community logged 3.5 million minutes moved, including over 90,000 minutes logged by Sentara Martha Jefferson Hospital employees.

Fresh Farmacy is a Move2Health initiative that beginning in 2015 provided free fruits and vegetables to patients at three clinic sites, that included the SSHHC. Over 40 patients participated.

In 2016, Sentara Martha Jefferson Hospital received a grant from the Virginia Foundation for Healthy Youth. The grant was awarded to the Hospital, as a member of the Move2Health Coalition, to bring the Coordinated Approach to Child Health (CATCH) Program to after-school and early childhood programs in Charlottesville and surrounding counties. CATCH uses fun, non-competitive games to teach kids how to be physically active and eat healthy. In 2016, the Hospital hired a CATCH Coordinator, trained 15 CATCH facilitators and engaged over 2,000 kids in CATCH programming. The Hospital was able to include the Harrisonburg City Schools in CATCH

programming, therefore making CATCH a Sentara Blue Ridge regional initiative.

The Move2Health Coalition is co-chaired by a Sentara Martha Jefferson Hospital employee.

Strategy #3:

Conduct an elementary school outreach program that includes nutrition, fitness and safety education.

2016 Objective Update:

Sentara Martha Jefferson Hospital representatives conducted over 350 education sessions on nutrition, fitness and safety in City of Charlottesville elementary schools from 2013-2016. Other Sentara Martha Jefferson Hospital programming for children and teens educated well over 500 students on topics related to health and wellness.

Strategy #4:

Community education through group classes and supermarket tours.

2016 Objective Update:

Over 1,700 community members attended a wellness education session offered by Sentara Martha Jefferson from 2013-2016. Diabetes education, stress reduction, and grocery store tours were some of the classes offered. An annual Fashion Show & Health Update designed to attract a targeted group of African American women was held annually with over 150 women educated on important health topics each year that included heart health, diabetes, and obesity.

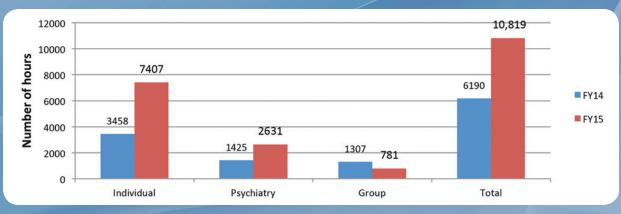
2012 MAPP2Health **PRIORITY #2** INSUFFICIENT ACCESS TO MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

Goal: Decrease the number of poor mental health days among Thomas Jefferson Health District residents by increasing access to mental health services and decreasing stigmas and fears surrounding mental health issues.

Objective 1: By 2017, increase access to mental health services in Thomas Jefferson Health District by increasing the number of mental health service hours provided by the Community Mental Health and Wellness Coalition member agencies.

2016 Objective Update:

The CMHWC member agencies (Charlottesville Free Clinic, On our Own, Region X, The Women's Initiative and Thrive) provided 10,819 mental health service hours, with most of those hours for individual sessions in Fiscal Year 2015.



Community Mental Health & Wellness Coalition.

Objective 2: By 2017, among Thomas Jefferson Health District residents decrease stigma and fears associated with mental health, as demonstrated through pre/post surveys from educational programs.

2016 Objective Update:

During fiscal year 2016, the Region Ten Community Services Board trained 163 people in the adult Mental Health First Aid, and 152 in the Youth Mental Health First Aid. This is a slight decrease over the 364 people trained in fiscal year 2014.

2012 MAPP2Health **PRIORITY #2** INSUFFICIENT ACCESS TO MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

Sentara Martha Jefferson Hospital's Strategies to Address Insufficient Access to Mental Health and Substance Abuse Services

Strategy #1:

Provide in-kind space to The Women's Initiative, a non-profit mental health organization, at the Jefferson School City Center to increase the access and availability of mental health services to the community.

Provide financial support to The Women's Initiative.

2016 Objective Update:

The Women's Initiative was able to provide over 5,000 episodes of care to area women from 2013-2016, due in part to the financial and inkind support Sentara Martha Jefferson Hospital provided.

The Jefferson School City Center satellite office opened in January 2013. Programming at the satellite office has targeted African American women through support groups and individual counseling sessions. The center has been successful in bringing in the target audience for services.

Strategy #2:

Serve on the Mental Health & Wellness Coalition.

2016 Objective Update:

A Sentara Martha Jefferson Hospital representative served on the Mental Health & Wellness Coalition and Steering Committee. The Coalition created a strategic plan, sponsored a mental health navigator, and developed a strategy to track mental health drug use and drug seekers to better coordinate care.

Strategy #3

Develop integrated health primary care practice at Region Ten.

2016 Objective Update:

The Sentara Peterson Health Center is a partnership with Region Ten and Sentara Martha Jefferson Hospital. The goal of the partnership is to offer affordable, comprehensive, coordinated primary health care and behavioral services.

In 2016, Region Ten received a Substance Abuse and Mental Health Services Administration (SAMHSA) grant to continue movement toward a fully integrated primary care and behavioral health clinic at the Peterson Clinic.

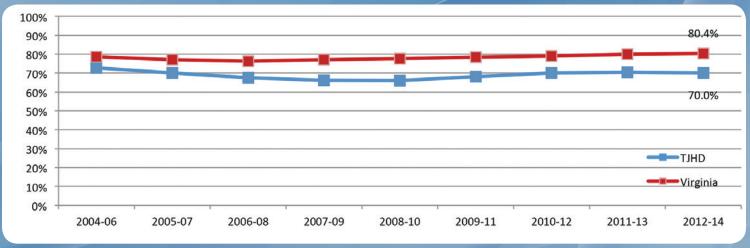
2012 MAPP2Health **PRIORITY #3** LATE AND INSUFFICIENT PRENATAL CARE AND RACIAL DISPARITIES IN PREGNANCY OUTCOMES

Goal: Improve pregnancy outcomes in Thomas Jefferson Health District by increasing the percentage of women who plan pregnancies and receive prenatal care; by targeting interventions towards vulnerable populations; and by promoting clinical smoking cessation interventions.

Objective 1: By 2017, increase the percentage of pregnant women who receive 10 or more prenatal care visits from 66% to 75% of Thomas Jefferson Health District pregnant women.

2016 Objective Update:

From 2012–2014, an average of 70% of mothers in TJHD received at least 10 prenatal care visits which was a decrease from an average of 72.7% from 2004–2006. The percentage of pregnant mothers in TJHD receiving at last 10 prenatal care visits was consistently lower than the average across Virginia from 2004–2014.



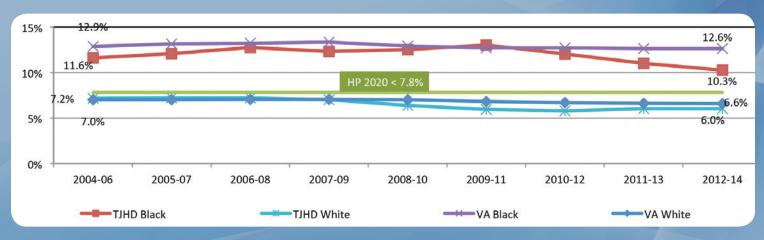
Percentage of PD10 (TJHD) Mothers Who Had 10 or More Prenatal Care Visits, TJHD and Virginia, 3-Year Rolling Average, 2004–2014. Source: Virginia Department of Health, Division of Health Statistics, 2016.

2012 MAPP2Health **PRIORITY #3** LATE AND INSUFFICIENT PRENATAL CARE AND RACIAL DISPARITIES IN PREGNANCY OUTCOMES

Objective 2: By 2017, decrease the percentage of low birth weight black infants from 12.5% to 10% of Thomas Jefferson Health District black births.

2016 Objective Update:

The percent of LBW births decreased to 10.3% among black babies born in TJHD from 2009–2011 to 2012–2014 while it remained at just over 12% in Virginia. The LBW birth among white babies born in TJHD and Virginia remained around 6%.



Percent Low Birth Weight Births by Race Out of Total Live Births By Place of Residence, TJHD and Virginia, 3-Year Rolling Averages, 2004–2014. Source: Virginia Department of Health, National Center for Health Statistics, 2016.

> *Objective 3:* By 2017, increase enrollment in Plan First, a Medicaid program that covers family planning services, in Thomas Jefferson Health District by 5%.

2016 Objective Update:

Within PD10 (TJHD), Plan First enrollment increased by 40% from Fiscal Year (FY) 12 to FY13 and increased by 146% from FY13 to FY14. Updated enrollment for FY15 is not available.

2012 MAPP2Health **PRIORITY #3** LATE AND INSUFFICIENT PRENATAL CARE AND RACIAL DISPARITIES IN PREGNANCY OUTCOMES

Sentara Martha Jefferson Hospital's Strategies to Address Late and Insufficient Prenatal Care and Racial Disparities in Pregnancy Outcomes

Strategy #1:

Serve on the Improving Pregnancy Outcome Workgroup.

2016 Objective Update:

A Sentara Martha Jefferson Hospital representative joined the Improving Pregnancy Outcome Workgroup to address pregnancy access issues and disparities in pregnancy outcomes. From 2013-2016, the group worked with local community agencies on tobacco usage messages focused on women of childbearing age, added a health navigator to a clinic at a local housing development and engaged medical students to help pregnant women navigate the health system.

Strategy #2:

Offer Evidence-based Programming to Address Disparities in Pregnancy Outcomes.

2016 Objective Update:

Sentara Martha Jefferson launched a Baby Basics Moms Club in February 2014. The Club was facilitated by a Child Birth Educator and offered pregnant women a place to meet, talk about their pregnancy and learn from each other.

Thirty-five women joined the club. All the women who participated in a post-delivery interview said the program influenced a behavior change and 75% of them said they were either influenced to breast feed or eat healthier.

Sentara Martha Jefferson Hospital also waived the fee of child birth education class fee for people not able to afford the cost.

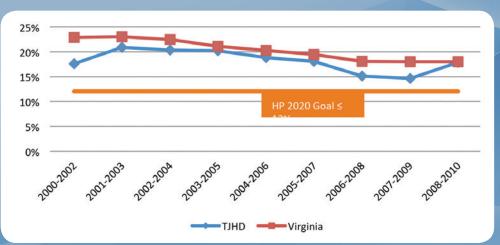
2012 MAPP2Health PRIORITY #4 TOBACCO USE ABOVE THE HEALTHY PEOPLE 2020 GOAL

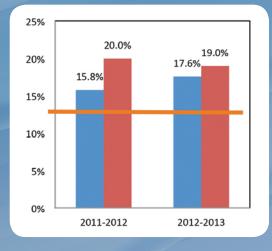
Goal: Decrease the percent of persons who use tobacco in Thomas Jefferson Health District.

Objective 1: By 2017, decrease the percentage of adults who smoke from 18% to 16% of Thomas Jefferson Health District adults.

2016 Objective Update:

The percentage of adult smokers in PD10 (TJHD) decreased from 23.6% in 2009-10 to 17.6% in 2011-13.





Virginia Department of Health, Office of Family Health Services, Virginia Behavioral Risk Factor Surveillance System. Updated 12/2/2014.

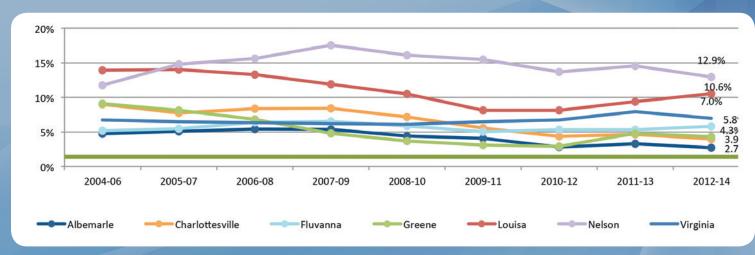
In 2011, BRFSS introduced a new sampling scheme with changes in methodology and weighting procedures that prohibits combining the year 2011 and onward with 2010 and prior data years.

2012 MAPP2Health PRIORITY #4 TOBACCO USE ABOVE THE HEALTHY PEOPLE 2020 GOAL

Objective 2: By 2017, decrease the percentage of pregnant women who report smoking during pregnancy from 7.5% to 6% of Thomas Jefferson Health District pregnant women.

2016 Objective Update:

The percentage of mothers who reported smoking during pregnancy has remained higher than the Healthy People 2020 goal of 1.4% in all PD10 (TJHD) localities. Nelson (12.9%) had the highest percentage of pregnant mothers who reported smoking and Albemarle (2.7%) had the lowest percentage among PD10 (TJHD) localities.



Percent of Live Births to Mothers Who Reported Smoking during Pregnancy, TJHD Localities and Virginia, 3-Year Rolling Averages, 2004–2014. Source: Virginia Department of Health, Division of Health Statistics, 2016.

2012 MAPP2Health **PRIORITY #4** TOBACCO USE ABOVE THE HEALTHY PEOPLE 2020 GOAL

Sentara Martha Jefferson Hospital Strategies to Address Tobacco Use

Strategy #1:

Serve on Tobacco Coalition.

2016 Objective Update:

Sentara Martha Jefferson Hospital representatives served on the Tobacco Coalition, a group facilitated by TJHD. The coalition completed a workplace tobacco use assessment, and partnered with agencies in the planning district to address gaps in tobacco-free policies and/or smoke-free environments.

The workplace assessment found 70% of responding organizations did not provide tobacco cessation support to employees and 69% did not have a tobacco-use control policy in the workplace. The coalition partnered with organizations throughout the planning district to help address the gaps in tobacco-free policies and smoke-free environments.

The Tobacco Coalition hosted a Great American Smokeout event in 2015 & 2016. Approximately 35 people attended each session. Participants developed quit plans and were encouraged to quit through education and outreach activities.

Strategy #2:

Support Community Smoking Cessation Programs.

2016 Objective Update:

Sentara Martha Jefferson Hospital provided financial and in-kind support to smoking cessation programs offered by the Charlottesville Free Clinic. The Hospital hosted annual smoking cessation sessions that included mindfulness training, meditation, acupuncture, and addiction education. Up to 25 people joined the sessions annually and some participants were successful and have continued to live smoke-free. In 2015, a Sentara Martha Jefferson Respiratory Therapist began teaching a smoking cessation program in Louisa County.

Strategy #3:

Be a Leader in Corporate Responsibility.

2016 Objective Update:

Sentara Martha Jefferson Hospital became a smoke-free campus in 2008 and made a commitment in 2010 to not hire smokers.

Patients at Sentara Martha Jefferson Hospital were offered smoking cessation products while inpatients at the Hospital. Discharged patients were offered information on area smoking cessation programs and quit line services.

In 2014, Sentara Martha Jefferson Hospital's Wellness Coordinator completed a tobacco readiness to quit survey for employees and spouses and developed a program to link employees and their spouses to tobacco cessation programs.

Strategy #4:

Educate Elementary School Students on Refusal Skills and the Dangers of Smoking.

2016 Objective Update:

Sentara Martha Jefferson staff completed education sessions for over 500 elementary school students on refusal skills and the dangers of smoking.

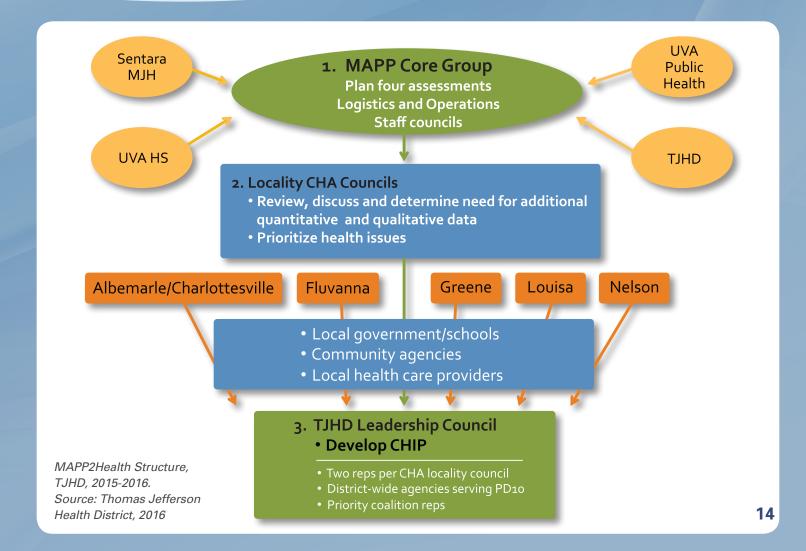
2016 COMMUNITY HEALTH NEEDS ASSESSMENT & NEXT STEPS

Sentara Martha Jefferson Hospital's 2016 community health needs assessment (CHNA), available at www.sentara.com, identifies the priority health issues in Planning District 10 (PD10). PD10 includes the City of Charlottesville and counties of Albemarle, Fluvanna, Greene, Louisa and Nelson, which represents 84% of Sentara Martha Jefferson Hospital inpatients. The journey to complete the 2016 CHNA, *MAPP2Health*, began in the early fall of 2015. At that time, the Hospital joined a group known as the "Core Group" formed by the Thomas Jefferson Health District (TJHD) with responsibilities for planning the four assessments included in the Mobilizing for Action Through Planning and Partnerships (MAPP) framework.

The Core Group consists of staff from the University of Virginia's Department of Public Health Sciences

and Health System, TJHD, and Sentara Martha Jefferson Hospital. This collaboration was not new as a similar collaborative effort led by TJHD also called *MAPP2Health*, produced the last assessment. The 2012 *MAPP2Health* was adopted by the Sentara Martha Jefferson Hospital Board of Directors in early 2013.

Over 100 organizations participated in the 2016 *MAPP2Health.* Locality councils from Albemarle/ Charlottesville, Fluvanna, Greene, Louisa, and Nelson were engaged and a Leadership Council was charged with developing the 2016 community health improvement plan.



2016 COMMUNITY HEALTH NEEDS ASSESSMENT & NEXT STEPS

Sentara Martha Jefferson Hospital was an active participant in the 2016 *MAPP2Health*, both as a Core Group member and on locality and Leadership Councils. The Core Group Representative was responsible for the following specific duties related to the 2016 *MAPP2Health*:

- Facilitated Visioning Session
- Developed Vision Statement
- Developed Logo
- Facilitated and Wrote Forces of Change Assessment
- Participated in Community Themes and Strengths Survey Implementation
- Hosted Three Leadership Council Meetings
- Hired & Supervised Strategic Planner
- Presented Information at Locality Meetings
- Edited portions of Community Health Needs Assessment & Community Health Improvement Plan
- Established Internal Community Health Needs Assessment Committee

Next Steps

The final IRS guidelines require all 501(c)(3) hospital organizations to adopt an implementation strategy to address the community health priority issues identified in the community health needs assessment by the 15th day of the 5th month following the assessment due date. In preparation for this May 15, 2017 deadline, Sentara Martha Jefferson Hospital representatives will communicate with community partners and other stakeholders, both internal and external to develop an implementation strategy focused on improving the health of the communities we serve.