

Camden Clark Medical Center

2017 Community Health Needs Assessment (CHNA)

Parkersburg, WV

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Contents

Background and Introduction	2
About Camden Clark Medical Center	3
Previous CHNA Findings	3
Definition of the Community Served	4
Methodology and Community Input Process	6
Secondary Data	6
Primary Methods of Collecting and Analyzing Information	7
Community Health Needs Prioritization	10
Resources Potentially Available to Address the Significant Health Needs Identified	13
Conclusion	15
Appendices	16

List of Tables

Table 1 Select Demographic Data	5
Table 2 Community Health Concerns Survey Results	10
Table 3 Access to Healthcare and Medical Needs by County	11
Table 4 Identified Potential Resources	14

Background and Introduction

Provisions in the Affordable Care Act (ACA) of 2010 require tax-exempt (non-profit) hospitals to conduct a Community Health Needs Assessment (CHNA) and develop an Implementation Plan at least every three years. The regulations for the CHNA include defining the hospital's service area and compiling demographics and analysis of health indicators; taking into account input from the community, including public health professionals; identifying resources; and prioritizing community health needs.

The 2017 Camden Clark Medical Center (CCMC) CHNA incorporates the requirements described above and identifies the following prioritized needs:

1. Substance Use/Abuse (including opioids and tobacco)
2. Cancer
3. Obesity and Chronic Disease

This document serves as a roadmap for the Implementation Plan, which will be developed during the months following the completion of the 2017 CHNA and specify planned actions to be taken by CCMC and collaborators, available resources, anticipated actions, and a plan for evaluating these activities. In addition to the requirement to conduct a CHNA, hospital leadership continually expressed the desire to go beyond regulatory requirements in serving patients and the community at large. To facilitate this goal, CCMC partnered with West Virginia University's School of Public Health (WVU SPH) to complete this Needs Assessment using a robust community based process designed to engage a broad swath of community members. This process was led by Dr. Tom Bias and Dr. Christiaan Abildso in the Health Research Center within the school. A CHNA leadership team was convened by CCMC including hospital and community leadership to inform and guide the process.

About Camden Clark Medical Center

Camden Clark Medical Center was founded in 1898 by the city of Parkersburg. Originally boasting a 40-bed capacity, CCMC soon became the first hospital in West Virginia to support its own School of Nursing, which was in operation from 1898 to 1969. As the community's hospital for now more than a century, Camden Clark maintains a leadership role as the region's primary source for advanced health care and wellness programs. CCMC is now a 327-bed, not-for-profit, acute care facility, and is a learning site for West Virginia University at Parkersburg and other regional teaching facilities.

Previous CHNA Findings

The most recent CHNA was conducted by CCMC in 2015 and included a review of secondary data to assess socioeconomic characteristics and key risk factors facing the county. Additional information was provided by the Mid-Ohio Valley Health Department, West Virginia Partnership for Elder Living, the Mid-Ohio Valley Rural Health Alliance, and other regional hospitals and systems. The final report identified many prevalent community risk factors and outlined strategies for each for reducing risk and improving health outcomes:

- Preventative Health
 - Obesity
 - Tobacco use
 - Sedentary lifestyle
 - High cholesterol, lipids or triglyceride levels
- Cardiovascular Services
 - Stroke
 - High blood pressure
 - Cardiovascular disease
- Oncology Services
 - Lung cancer
 - Breast cancer
 - Colorectal cancer
 - Prostate cancer
 - Bladder cancer

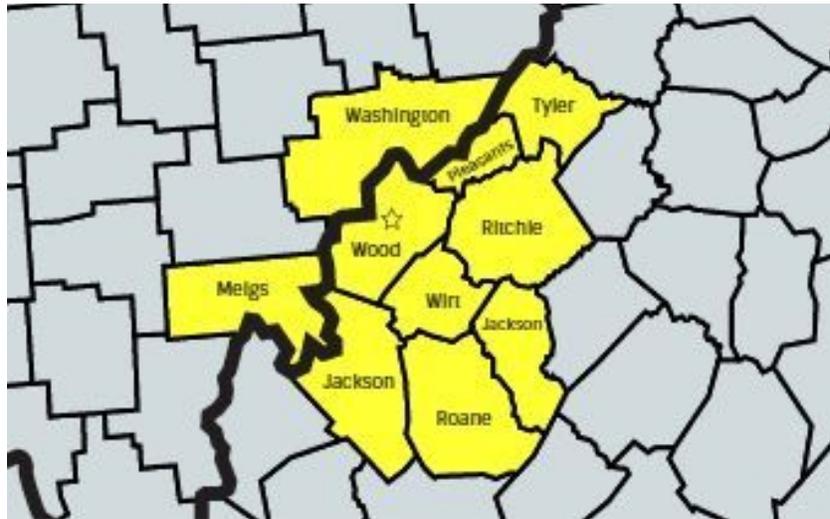
- Internal Medicine
 - Diabetes
 - COPD
 - Dental care
- Emergency Services
 - Nonuse of seatbelts
 - ATV accidents
 - Teen injury and deaths
 - Texting/cell phone use while driving
 - Drug overdoses
 - Suicide attempts
 - Alcohol related accidents
- Women's and Children's Services
 - Low birth-weight infants
 - Teen pregnancy
 - Lactation
 - Pre-39 week births
- Behavioral Health
 - Alcohol misuse
 - Depression
 - Anxiety
 - Drug addiction

Definition of the Community Served

For the 2017 process, the CHNA leadership team collaborated with other CCMC leadership to define the community served as a 10 county area comprised of Calhoun, Jackson, Pleasants, Ritchie, Roane, Tyler, Wirt, and Wood in WV, as well as Washington and Meigs counties in OH. This geographic area is considerably larger than the last CHNA, and fully captures the service area of CCMC. It is worth noting that CCMC also sees a large number of patients from a portion of Athens County, OH, and includes them in overall consideration of populations served by the

hospital (Appendix F). For the purposes of collecting and analyzing data for this report, however, only counties which fall entirely within CCMC’s catchment area were included.

Figure 1. Camden Clark Medical Center’s Service Area



The following table is from the US Census Bureau and shows the most current Quickfacts¹ for all 10 counties. It outlines some basic demographics, as well as information about health insurance coverage and poverty levels.

Table 1. Select Demographic Data

	Calhoun WV	Jackson WV	Pleas. WV	Ritchie WV	Roane WV	Tyler WV	Wirt WV	Wood WV	Wash. OH	Meigs OH
Pop.	7,336	29,152	7,591	9,875	14,208	8,972	5,806	85,643	60,610	23,125
Under 18	19.1%	21.6%	18.7%	19.9%	21.5%	20.0%	21.1%	21.3%	19.8%	21.5%

¹ <http://www.census.gov/quickfacts>, 2016 estimates

	Calhoun WV	Jackson WV	Pleas. WV	Ritchie WV	Roane WV	Tyler WV	Wirt WV	Wood WV	Wash. OH	Meigs OH
Non white or 1+ race	1.6%	2.0%	3.1%	1.7%	2.1%	1.6%	2.3%	3.6%	3.9%	2.8%
Hispanic or Latino	1.2%	0.8%	1.0%	0.7%	1.1%	0.8%	0.8%	1.1%	1.1%	0.7%
HS edu. or +	76.9%	86.6%	87.6%	81.9%	78.2%	87.6%	83.3%	89.6%	90.2%	84.0%
Bach. degree or +	11.9%	17.7%	13.5%	10.4%	11.7%	13.7%	9.7%	20.3%	18.4%	13.4%
Under 65 yrs. and un-insured	8.9%	7.1%	5.5%	8.7%	9.6%	6.8%	7.2%	6.7%	7.7%	9.4%
Persons in poverty	21.8%	15.7%	14.3%	18.2%	22.1%	16.1%	18.1%	17.2%	13.7%	21.1%

Methodology and Community Input Process

The CHNA process began with a thorough review of the previous cycle’s needs assessment report and included review of publicly available secondary data. Primary data collection was comprised of a survey of community members’ perceptions of health issues and a community event focused on identifying sociopolitical forces of change and community assets that impact population health in CCMC’s service area.

Secondary Data

The leadership team reviewed secondary data related to counties within Camden Clark's service area including Census data, County Health Rankings Data (Appendix A), the CDC Community Health Status Indicators, and WV Epidemiological profiles. Using these reports as a springboard, the leadership team started the initial discussion around critical health needs.

Primary Methods of Collecting and Analyzing Information

We utilized two primary sources of data to inform the CHNA: (1) a public input survey and (2) a community meeting. The public input survey was developed by the WVU SPH with the leadership team following an iterative process. During the initial leadership team meeting, each member was asked to develop a list of three of the most pressing health priorities facing the community to ensure those priorities were included in the electronic survey. Survey topics included questions about specific health issues, thoughts on overall health of the community, quality of life, access to healthcare and medical needs (including specialist care), risky behaviors, and demographic information including geographic location and income.

The survey (Appendix B) was collected both online and through hard copies. The survey link was distributed through email lists and social media and made available on Mid-Ohio Valley Health Department computer stations. The survey was also given on iPads by United Way student ambassadors at various community events. Leadership team members distributed hard copies at a United Way backpack event, food pantries, senior centers, churches, and other locations.

The survey was not intended to be a representative, scientific sample of residents of these 10 counties, but rather a mechanism to solicit the community's perception of their health needs. A total of 1301 surveys were completed by community members from the area.

Additional information was collected through a community meeting hosted by CCMC on October 16, 2017. This session, open to the public and with broad stakeholder representation, solicited input on community health needs and sought to identify groups and organizations already providing essential services. Over 40 community members participated in this event. More detail on the makeup of this session is found in the section below.

The survey results were reported back to the leadership team in aggregate, but also broken down by income, age, and education to ensure there were no significant differences in responses between differing groups. Community input from the event was compiled into a document summarizing the work of that day. Feedback was categorized by health concern - along with community input about existing resources, ideas and suggestions for each - for dissemination to the leadership group and those in attendance at the meeting.

Community Organizations Involved

The following organizations were represented on CCMC's CHNA leadership team and provided thorough input throughout the process of developing the CHNA. These individuals informed the public input survey and were instrumental in dissemination. Additionally, they identified and invited members of the community to the community meeting held on October 16th and were charged as a group with collaborative discussion of primary and secondary data to determine health priorities.

Leadership Team

- Public Health Representative: Carrie Brainard, MOV Health Department
- Hospital Foundation, Community Outreach: Kim Couch, Executive Director, Foundation
- Vulnerable Population Representation
 - Christina Smith, Executive Director, The Arc
 - Stacy DeCicco, Executive Director, United Way Alliance of MOV
- Reporting of Community Benefit: Walt Newlon, Director, Mid-Ohio Valley Rural Health Alliance
- Hospital Website: Roger Lockhart, Director of Marketing and Public Affairs
- Sue Mitchell (CCMC Executive Assistant),
- Carolyn Allen (CCMC Chief Financial Officer),
- Amy Goodnite (CCMC Director of Performance Improvement),
- Jill Parsons (MOV Chamber of Commerce) and
- David Kaufman (CCMC Pastoral Care Support)

Additionally, input was collected at the community meeting held in Parkersburg on October 16th. The following organizations from local government, business, and non-profit organizations were represented at this meeting.

Organizations Represented at Community Meeting

- American Cancer Society - Mary Lough, Carmen Hathaway
- American Red Cross - Sharon Kesselring
- Belpre Chamber of Commerce - Karen Waller
- Bernard McDonough Foundation - Bob Boone
- City of Parkersburg - Ricki Yeager
- Family Crisis Center - Emily Larkins
- Highmark BCBS - Jim Fawcett, CEO, Kristy Cramlet, Cindy Heiskell, Cathy Golden
- Healthsouth - Sheila Carroll and Anna Matheney
- Kraton Polymers - Kym Holdren
- Med Express - Becky Misner, Jamie Anderson
- Mid-Ohio Chamber of Commerce - Jill Parsons
- Mid-Ohio Valley Health Department - Eric Walker and Carrie Brainard
- Mid-Ohio Valley Regional Highway Safety Program - Toni Tiano
- Parkersburg Area Community Foundation - Judy Sjostedt and Marian Clowes
- Parkersburg Cardiology Associates - John Vickers
- Pleasants Area Chamber of Commerce - Jody Murphy
- Pleasants County Senior Center - Jessie Ruppert
- Roane County Commission on Aging - Julie Haverty
- Sisters Health Foundation - Sheri Sanchez and Sister Molly Bauer
- United Way - Stacey Decicco
- Washington County Career Center - Lenora Lada and Amy West
- Washington County Health Department - Dick Wittberg
- Westbrook Health Services - Tracy Tynan
- Wirt County Health Services Association - Heath Ashford
- Wood County Schools - Julie Bertram
- WVU Extension Service - Gwen Crum
- WVU Medicine - Shannon Mcallister and Nancy Vest

Community Health Needs Prioritization

The leadership team met in December 2017 to review the data collected through the survey and community event and identify priorities. The WVU SPH presented survey data (Appendix C), including responses to the three most important health problems or issues in Wood and surrounding counties (see table below).

Table 2. Community Health Concerns Survey Results

Wood County	All Other Counties
Drug Abuse (73.5%)	Drug Abuse (65.8%)
Cancers (38.0%)	Cancers (34.4%)
Obesity (37.1%)	Obesity (30.9%)
Diabetes (19.9%)	Diabetes (26.1%)
Heart Disease/Stroke (16.5%)	Low Income (16.7%)
Mental Health Problems (13.9%)	Mental Health Problems (13.9%)

Health issues were largely consistent when comparing Wood County to the whole of the other surrounding counties in the service area. For example, drug abuse, cancers and obesity were ranked as the “top 3” across all areas. Also worth noting was that health problems in aggregate varied slightly across age, income levels, and education (Appendix D).

Quality of life issues were perceived with some differences when comparing Wood County to other surrounding counties as a whole. Respondents from outside of Wood County expressed overall agreement with statements about things like quality of life, neighborhood safety (including safety when walking and biking), access to adequate resources, and statements related to raising children in the area - schools meet health needs, and there are safe places for

children to play. Areas of improvement included access to safe and affordable housing, jobs, adult recreation, and access to healthy food and activities.

When looking only at Wood County respondents, results showed that this group was in overall agreement about many of the the same things, and mostly to a slightly higher degree - especially things like access to healthy food, safe housing, and adequate recreation for all ages. However, at the same time, Wood County respondents reported a slightly less satisfactory quality of life overall (46.4% of respondents agreed that it is satisfactory, compared to 53.8% agreement outside of Wood County). Also noteworthy is that respondents from all counties largely *do not* perceive members of their community as holding the belief that they can change their own quality of life. This feedback is consistent with the health concerns discussed above, and indicates a community mindset that could potentially be shifted by empowering individuals with tools or resources needed to make changes in their lives.

In terms of access to healthcare and other medical needs, residents outside of Wood County expressed greater overall satisfaction and slightly higher access to adequate care overall, while at the same time slightly less able to access specialist care when needed. Wood County residents expressed greater overall ability to get medical care when they need it, but also sometimes have problems paying for their portion of medical care or medication costs than those living outside of Wood County.

Table 3. Access to Healthcare and Medical Needs by County

	Wood County (level of agreement)	All other counties (level of agreement)
I have access to specialists	59.26%	54.56%
I am very satisfied with my medical care	68.15%	69.64%
I have access to adequate care	74.65%	75.06%
At times I can't pay for my portion of my medical care	66.82%	64.12%

At times I can't pay for my portion of my medication	59.38%	58.17%
I am able to get medical care when I need it	72.43%	69.83%

At the December prioritization meeting, leadership team members revisited common priority areas as indicated by survey results. The group then discussed the degree to which the hospital can realistically affect health outcomes for each, as well as level of importance relative to the reach of their impact.

Figure 2. Prioritization Matrix

High importance, but hospital's influence is limited	High importance, something the hospital can influence
Low importance or priority to the community, hospital cannot influence	Low importance or priority to the community but is something the hospital can influence

The prioritization matrix (Figure 2) was worked through by the group. Within this discussion of where and how the hospital realistically have an impact, the list of top health concerns was pared down to the four that will be the focus moving forward with implementation planning.

- 1.) **Substance Use/Abuse (including opioids and tobacco)** – The team sees an ability to have high impact, as well as the need to give this item top priority in acknowledgement of overwhelming community, state, and national concern. It was noted that an ED or case management stakeholder would ideally be present as they move into the implementation phase. Additionally, the team feels that in some ways they do not have much impact on tobacco use. However, recognizing the fact that the health department and state have lost funding for some existing programming, they see that there is void to fill. They wished to combine tobacco cessation with substance abuse/addiction for further community benefit exploration during the implementation process.

- 2.) **Cancer** – The team agrees on prioritization of this item: there is an existing cancer center which already provides some community benefits (free screenings, for example). Recognizing evident community concern, which they note has likely increased since the devastating industrial fire that happened in Parkersburg after survey data collection and community meeting, they wish to prioritize this item.

- 3.) **Obesity and Chronic Disease (diabetes & heart disease)** – The team will combine diabetes and heart disease with obesity to round out the third of their top priority items. For the sake of initial implementation planning, obesity and chronic disease will be treated as a whole. They see several ways in which they can collectively impact both, and realize providing community benefit regarding one can often have a positive health outcome on the other.

Potential Resources

Each of the top priorities identified in the 2017 CHNA are consistent with concerns raised in 2015. Although differing in ranking this time around, obesity and associated chronic disease, cancer, tobacco use, and substance use and abuse all continue to be reported as main health concerns in the area. Thus, resources identified in the 2015 CHNA may be relevant to address needs identified in 2017. For example, continuing public outreach on the topics of smoking cessation and early cancer screenings could address priority area number two. Additionally, 2015 strategies surrounding substance use and abuse could be used as building blocks to

address these ongoing issues, which have risen to priority area number one since completion of the last CHNA.

In addition to resources already available at CCMC, the following table documents organizations with missions aimed at addressing top health concerns identified during the community meeting. Where noted, these organizations could aid in addressing the health priorities identified in this Needs Assessment. Appendix E is a full resource guide with more information about the essential health services and each organization, including contact information. This list is not meant to be exhaustive, but rather a starting off point for drafting potential interventions in the forthcoming implementation plan.

Table 4. Identified Potential Resources

Organization	Health Priority
Al-Anon	1
American Cancer Society	1, 2
Big Brothers / Big Sisters	1
Bonnie’s Bus	2
Boys & Girls Club	1, 3
CCMC Cancer Center and Events	2
CCMC Fitness Programs (Silver Sneakers, etc.)	3
Celebrate Recovery	1
Columbus Springs Treatment Center	1
County Drug Coalitions	1
CRAFT Support Group	1
DHHR	1
Dining with Diabetes	3
Drug Court	1

Farmer's Market	3
Firefly	1
Hearts Made Whole (support group)	1
Help4WV	1
ICE	1
Marietta Memorial Cancer Center	2
Marietta Memorial Lifestyle Programs	3
Mid-Ohio Valley Health Department	1, 2, 3
Narcotics Anonymous	1
Needle Exchanges	1, 3
Oxford House	1
PATCH Program (Roane County)	1
RAZE	1
Recovery Point	1
Relay for Life	2
Sisters Health Foundation	3
Too Good for Drugs	1
Try This WV	3
Westbrook Health Services	1
Wood County WIC	3
WV Food Link	3
WV Partnership for Elder Living, Inc.	3
WV Tobacco Quitline	1, 2
WVU Extension	3

Conclusion

The 2017 CHNA identified three health priorities to guide CCMC's efforts to improve the health of community members. These priorities are:

1. Substance Use/Abuse
2. Cancer
3. Obesity and Chronic Disease

This succinct list of priorities will guide the implementation planning process. Implementation activities will aim to address these issues using existing resources and partnerships with other community organizations where possible and building upon past success, including past efforts to address health needs identified in the 2015 CHNA. In the coming months, this process will lead to the completion of an implementation plan for activities centered on these health needs.

Appendices

- A. Secondary Data by County
- B. Copy of Community Survey
- C. Survey Data Utilized in Prioritization
- D. Slight Variations in Data - Age, Income and Education Breakdowns
- E. Full Resource Guide
- F. Coverage Map - Including Athens County

	Ohio	Athens (AT) , OH	Meigs (MI) , OH	Washington (WS) , OH
Health Outcomes		72	66	37
Length of Life		48	55	29
Premature death	7,600	7,900	8,100	6,800
Quality of Life		86	74	44
Poor or fair health	15%	21%	19%	17%
Poor physical health days	3.7	4.7	4.0	4.0
Poor mental health days	4.0	4.7	4.3	4.0
Low birthweight	9%	8%	9%	7%
Health Factors		68	80	42
Health Behaviors		77	80	49
Adult smoking	22%	23%	21%	19%
Adult obesity**	31%	28%	34%	35%
Food environment index**	7.0	5.3	6.4	7.6
Physical inactivity**	25%	24%	36%	33%
Access to exercise opportunities	83%	85%	33%	85%
Excessive drinking	19%	19%	16%	17%
Alcohol-impaired driving deaths	34%	28%	41%	38%
Sexually transmitted infections**	474.1	664.8	191.5	203.9
Teen births	32	13	44	32
Clinical Care		34	64	30
Uninsured	10%	11%	12%	10%
Primary care physicians	1,300:1	1,200:1	5,830:1	1,390:1
Dentists	1,690:1	4,710:1	3,880:1	2,440:1
Mental health providers	630:1	420:1	2,110:1	1,490:1
Preventable hospital stays	60	64	66	59
Diabetes monitoring	85%	86%	87%	85%
Mammography screening	61%	62%	65%	62%
Social & Economic Factors		68	84	44
High school graduation**	81%	92%	91%	92%
Some college	64%	70%	54%	60%
Unemployment	4.9%	6.2%	8.3%	6.0%
Children in poverty	21%	29%	31%	22%
Income inequality	4.8	7.2	5.0	4.7
Children in single-parent households	36%	38%	33%	28%
Social associations	11.3	10.4	15.4	13.2
Violent crime**	290	94	105	78

Injury deaths	70	60	86	71
Physical Environment		5	14	13
	Ohio	Athens (AT) , OH	Meigs (MI) , OH	Washington (WS) , OH
Air pollution - particulate matter	11.3	10.7	11.0	11.2
Drinking water violations		No	No	No
Severe housing problems	15%	23%	11%	11%
Driving alone to work	83%	70%	85%	86%
Long commute - driving alone	30%	22%	42%	28%

** Compare across states with cautionNote: Blank values reflect unreliable or missing data

2017

County Health Rankings & Roadmaps

Building a Culture of Health, County by County

	West Virginia	Calhoun (CH), WV	Jackson (JA), WV	Pleasants (PL), WV	Ritchie (RI), WV	Roane (RO), WV	Tyler (TY), WV	Wirt (WI), WV	Wood (WO), WV
Health Outcomes		46	11	14	30	37	21	7	32
Length of Life		49	17	25	33	32	13	5	30
Premature death	9,700	12,100	8,300	9,000	10,000	9,500	7,900	7,500	9,400
Quality of Life		41	12	6	24	36	30	15	35
Poor or fair health	24%	23%	20%	21%	23%	25%	21%	21%	21%
Poor physical health days	5.1	5.1	4.5	4.8	5.1	5.4	4.7	4.9	5.0
Poor mental health days	4.8	4.8	4.6	4.5	4.8	5.0	4.7	4.6	4.9
Low birthweight	9%	11%	9%	7%	7%	8%	10%	8%	9%
Health Factors		46	12	8	31	50	18	34	20
Health Behaviors		20	13	18	34	42	11	38	43
Adult smoking	26%	24%	23%	23%	24%	25%	22%	23%	25%
Adult obesity**	35%	33%	32%	39%	36%	36%	33%	37%	36%
Food environment index**	7.2	6.1	7.5	8.2	7.8	6.5	7.6	7.7	7.3
Physical inactivity**	29%	30%	29%	28%	33%	31%	34%	31%	29%
Access to exercise opportunities	58%		37%	63%	26%	34%	65%	34%	68%
Excessive drinking	11%	11%	11%	12%	11%	11%	12%	12%	12%
Alcohol-impaired driving deaths	32%	0%	46%	33%	38%	31%	33%	75%	28%
Sexually transmitted infections**	254.5	145.4	133.7	118.8	178.7	150.1	133.4	118.6	244.9
Teen births	44	50	39	39	43	50	42	41	48
Clinical Care		49	21	6	40	48	19	25	7
Uninsured	11%	12%	10%	8%	13%	13%	10%	11%	10%
Primary care physicians	1,290:1	1,880:1	2,910:1	2,540:1	3,340:1	2,440:1	2,270:1	5,850:1	1,180:1
Dentists	1,960:1	2,490:1	2,440:1	1,920:1	9,980:1	3,610:1	8,980:1	5,880:1	1,700:1
Mental health providers	950:1	7,470:1	2,090:1	1,920:1	2,000:1	1,800:1	4,490:1	5,880:1	850:1
Preventable hospital stays	72	86	75	61	60	95	63	56	58
Diabetes monitoring	84%	84%	85%	88%	89%	83%	84%	84%	86%
Mammography screening	59%	46%	65%	59%	59%	61%	60%	61%	67%
Social & Economic Factors		50	9	15	20	48	27	34	11
High school graduation**	87%	93%	95%	93%	93%	88%	93%	93%	88%
Some college	54%	32%	59%	45%	43%	39%	46%	51%	61%
Unemployment	6.7%	12.5%	7.2%	8.5%	7.0%	11.5%	9.4%	10.3%	6.2%
Children in poverty	25%	30%	23%	20%	26%	30%	23%	27%	25%
Income inequality	4.9	4.9	4.7	4.4	4.4	5.0	5.0	3.4	4.5
Children in single-parent households	34%	26%	27%	29%	34%	26%	26%	34%	38%

Social associations	13.1	5.3	11.0	17.0	14.0	5.5	15.4	10.3	19.4
Violent crime**	306		176	110	131	207	244	359	272
	West Virginia	Calhoun (CH) , WV	Jackson (JA) , WV	Pleasants (PL) , WV	Ritchie (RI) , WV	Roane (RO) , WV	Tyler (TY) , WV	Wirt (WI) , WV	Wood (WO) , WV
Injury deaths	103	108	76	76	79	100	73	79	79
Physical Environment		18	51	31	29	20	35	27	52
Air pollution - particulate matter	9.5	9.3	10.4	10.1	9.7	9.7	10.2	9.7	10.7
Drinking water violations		No	Yes	No	Yes	No	No	No	Yes
Severe housing problems	11%	10%	9%	7%	7%	11%	9%	9%	13%
Driving alone to work	82%	82%	85%	88%	82%	80%	86%	83%	83%
Long commute - driving alone	33%	44%	49%	44%	37%	42%	46%	56%	19%

** Compare across states with cautionNote: Blank values reflect unreliable or missing data

2017

CCMC Community Health Perception Survey

Please take a moment to complete the following survey. The survey should take less than 10 minutes to complete. The purpose of this survey is to get your input about community health topics and concerns in your community. This survey will be used to help guide the Community Health Needs Assessment taking place in your county. The community partners will use the results of this survey and other information to identify the most pressing health issues which can be addressed through community action. Your responses will NOT be associated with you in anyway. If you have previously completed this survey, please ignore this. Remember, your opinion is important to us! Thank you for your time and please contact us if you have any questions concerning this survey. Our contact information is at the end of this survey.

1. Are you a resident of one of the following counties: Calhoun, Jackson, Pleasants, Ritchie, Roane, Tyler, Wirt, Wood, Washington (OH), or Meigs (OH)?

Yes

No

CCMC Community Health Perception Survey

Health Issues in Your County

2. In your opinion, what is the most important health problem or health issue for residents of your County?

CCMC Community Health Perception Survey

County Citizens' Thoughts on Health

3. How would you rate your County as a "Healthy Community"?

Very Unhealthy Unhealthy Somewhat Healthy Healthy Very Healthy

* 4. In the following list, what do you think are the **3 most important "health problems" or "health issues"** in your County?

- | | | |
|---|--|--|
| <input type="checkbox"/> Air quality | <input type="checkbox"/> Employment access | <input type="checkbox"/> Mental health problems |
| <input type="checkbox"/> Aging problems (e.g. arthritis, hearing/vision loss) | <input type="checkbox"/> Food Insecurity/ Hunger | <input type="checkbox"/> Motor vehicle crash injuries |
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Gun-related injuries | <input type="checkbox"/> Obesity |
| <input type="checkbox"/> ATV ("Four Wheeler") Crashes | <input type="checkbox"/> Heart disease/ stroke | <input type="checkbox"/> Respiratory/ lung disease/ asthma |
| <input type="checkbox"/> Bicycle & Pedestrian Safety | <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Cancers | <input type="checkbox"/> HIV/AIDS | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Child Abuse/ Neglect | <input type="checkbox"/> Homelessness | <input type="checkbox"/> Tobacco use - smoking/ vaping |
| <input type="checkbox"/> Dental Problems | <input type="checkbox"/> Inadequate housing | <input type="checkbox"/> Tobacco use - chewing tobacco |
| <input type="checkbox"/> Diabetes ("sugar") | <input type="checkbox"/> Income (low income) | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Drug abuse | <input type="checkbox"/> Infant death | <input type="checkbox"/> Violence (e.g. crime, sexual assault, domestic violence, rape, homicide, suicide) |
| <input type="checkbox"/> Elderly support (in home care, nursing facilities, etc.) | <input type="checkbox"/> Infectious diseases | |

Other (please specify)

CCMC Community Health Perception Survey

Quality of life in your County

Please continue to the next page.

5. Please indicate your level of agreement with each of the following statements about your County:

	Strongly Disagree	Disagree	Agree	Strongly Agree	I don't know/ Not applicable
I am satisfied with the quality of life in my County.	<input type="radio"/>				
All residents believe that they, individually or collectively, can make your County a better place to live.	<input type="radio"/>				
There is sufficient, safe, and affordable housing in my County.	<input type="radio"/>				
There are jobs available in my County.	<input type="radio"/>				
My County is a safe place to live.	<input type="radio"/>				
Neighbors know and trust one another and look out for one another.	<input type="radio"/>				
There are support networks for individuals and families (neighbors, support groups, faith community, outreach, agencies, and organizations) during times of stress and need.	<input type="radio"/>				
My County is a good place to raise children.	<input type="radio"/>				
The public education system in my County adequately meets the health needs of our children. (e.g. school food, PE, etc.)	<input type="radio"/>				
There are an adequate number of safe places for children to play and exercise in my County.	<input type="radio"/>				
My County has adequate and safe access to recreation and exercise opportunities for adults.	<input type="radio"/>				
My County has adequate access to affordable healthy foods.	<input type="radio"/>				
My County has adequate health and wellness activities.	<input type="radio"/>				
My County is a safe place to walk and bike.	<input type="radio"/>				
My County has sufficient public transportation.	<input type="radio"/>				
There are adequate sidewalks in my County.	<input type="radio"/>				

CCMC Community Health Perception Survey

Access to healthcare and medical needs in your County

6. Please indicate your level of agreement with each of the following statements about your County:

	Strongly Disagree	Disagree	Agree	Strongly Agree	I don't know/ Not applicable
I have easy access to the medical specialists I need.	<input type="radio"/>				
I am very satisfied with the medical care I receive.	<input type="radio"/>				
I have access to adequate healthcare.	<input type="radio"/>				
Sometimes it is a problem for me to cover my share of the cost for a medical care visit.	<input type="radio"/>				
Sometimes it is a problem for me to cover my share of the cost of medication.	<input type="radio"/>				
I am able to get medical care whenever I need it.	<input type="radio"/>				

CCMC Community Health Perception Survey

Risky Behaviors in your County

7. In your opinion, from the following list, what do you think are the most important "risky behaviors" in your County? Risky behaviors have the greatest impact on the overall health in a community.

- | | | |
|--|--|--|
| <input type="checkbox"/> Alcohol abuse | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Texting/cell phone while driving |
| <input type="checkbox"/> Dropping out of school | <input type="checkbox"/> Overeating | <input type="checkbox"/> Tobacco use/ or electronic cigarette use |
| <input type="checkbox"/> Drug Abuse | <input type="checkbox"/> Bad eating choices | <input type="checkbox"/> Not using seat belts and/ or child safety seats |
| <input type="checkbox"/> Hand hygiene (washing) | <input type="checkbox"/> Not getting "shots" to prevent disease | <input type="checkbox"/> Unsafe sex |
| <input type="checkbox"/> Impaired Driving (drugs/ alcohol) | <input type="checkbox"/> Exclusion or discrimination based on race, religion, gender, sexual orientation, etc. | |

Other (please specify)

CCMC Community Health Perception Survey

Demographic Information

Please provide the following information. It will be used for demographic purposes only. Keep in mind you will NOT be identified in any way with your answers.

8. In which county do you currently live?

- Calhoun (WV)
- Jackson (WV)
- Pleasants (WV)
- Ritchie (WV)
- Roane (WV)
- Tyler (WV)
- Wirt (WV)
- Wood (WV)
- Meigs (OH)
- Washington (OH)

9. What is your gender?

- Female
- Male

10. What is your age range?

- 18 to 25 Years
- 26 to 39 Years
- 40 to 54 Years
- 55 to 64 Years
- 65 to 80 Years
- Over 80 Years

11. What is your marital status?

- Married/ cohabitating
- Divorced
- Never married
- Separated
- Widowed

Other (please specify)

12. How many children under the age of 18 live in your household?

- 0
- 1
- 2
- 3
- 4
- 5
- Greater than 5

13. Do you care for a live in elderly adult in your household?

- Yes
- No

14. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, not Hispanic or Latino

15. Which of these groups would you say best describes your race?

- White/ Caucasian
- Asian
- Black or African American
- American Indian or Alaskan Native
- Native Hawaiian or Other Pacific Islander

Other (please specify)

16. What is your approximate average household income?

- Less than \$20,000
- \$20,000 To \$29,999
- \$30,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- Over \$100,000

17. What is the highest level of education you have completed?

- Less than high school graduate
- High School Diploma or equivalent
- College degree or higher

Other (please specify)

18. How do you pay for your health care?

- I pay cash
- I have health insurance (e.g. private insurance, Blue Cross Blue Shield, HMO, through my employer)
- Medicaid
- Medicare
- Veterans Administration
- Indian Health Services

Other (please specify)

19. Have you ever been told by a doctor, nurse or other health professional that you have high blood pressure?

Yes

No

20. How many days a week do you eat vegetables?

21. Not counting juice, how many days do you eat fruit a week?

22. How many days a week do you do you get at least 30 minutes of moderate physical activity such as brisk walking, bicycling, gardening or anything else that causes some increase in breathing or heart rate?

23. Do you now smoke cigarettes every day, some days, or not at all?

Every Day

Some Days

Not at all

24. Have you smoked at least 100 cigarettes in your entire life?

Yes

No

25. About how tall are you?

26. About how much do you weigh?

27. Have you ever been told by a doctor, nurse, or other health professional that your blood cholesterol is high?

Yes

No

28. Have you ever been told by a doctor that you have diabetes ("sugar")?

Yes

No

CCMC Community Health Perception Survey

Thank You & Community Event!

Thank you for your time and response!

If you would like to participate in a community event to share additional feedback, please contact us for further information:

eavasile@hsc.wvu.edu or 304-293-0580

WVU School of Public Health

PO Box 9190, Health Sciences Center

Morgantown, WV 26505

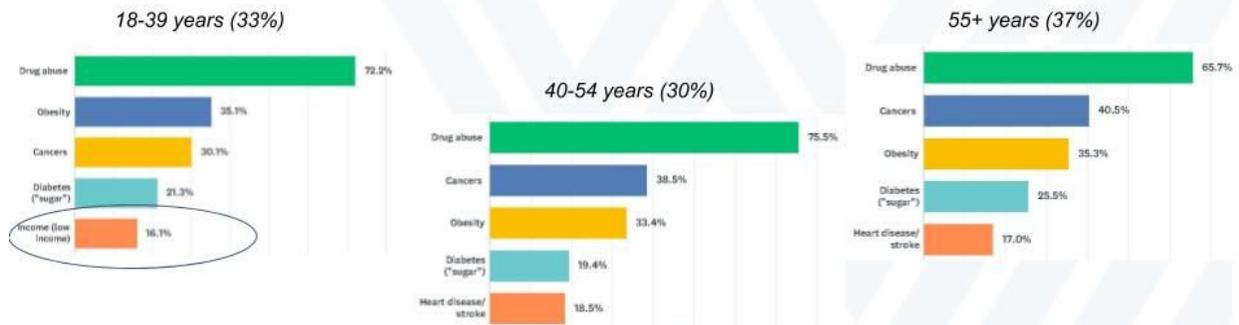
CCMC Health Perceptions Survey Summary of Community-identified “Most Important Health Problems”

Our survey asked respondents to identify what they believe to be the most important community health problem(s) in two different ways:			
“In your opinion, what is the most important health problem or health issue for residents in your county?” - open-ended; second question on survey. 1,092 answered.		“In the following list, what do you think are the 3 most important health problems or health issues in your county?” - list of 32 alphabetized items. 1,118 answered.	
Drug Use/Abuse	44.3% - 484 total	Drug Abuse	70.1% - 784 total
Diet/Obesity	18.3% - 200 total	Cancers	36.3% - 406 total
Cancer	12.6% - 137 total	Obesity	34.3% - 383 total
Heart Problems	9.5% - 104 total	Diabetes	21.6% - 241 total
Diabetes	9.1% - 99 total	Heart Problems	15.6% - 174 total
Cost of Care/Ins.	9.0% - 98 total	Low Income	14.3% - 160 total

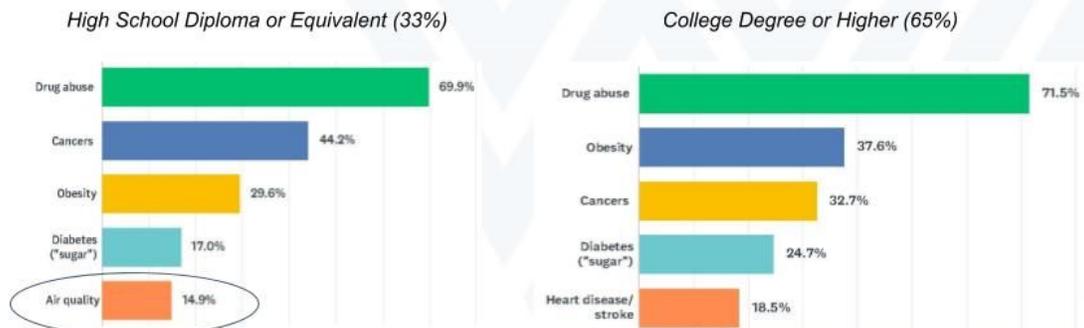
During October’s community meeting the group was presented with the overall top 8 “most important” health problems, as well as some breakdowns to show slight variations by income, age, and education. Also discussed was a question asking survey respondents to choose from a list any number of what they perceive to be the “riskiest behaviors” in their community - selections encompassing substance use, poor exercise and dietary habits, poor automotive safety, and tobacco/e-cigarette use were the highest-ranked among these items. After considering all of this together, the group decided to brainstorm existing resources and new ideas to deal with their **top seven** health concerns.

- 1. Substance Use/Abuse**
- 2. Cancer**
- 3. Obesity**
- 4. Chronic Disease (Diabetes & Heart Disease)**
- 5. Income Inequality**
- 6. Air Quality**
- 7. Tobacco/e-cigarettes**

"Top 5" Health Issues by Age



"Top 5" Health Issues by Education

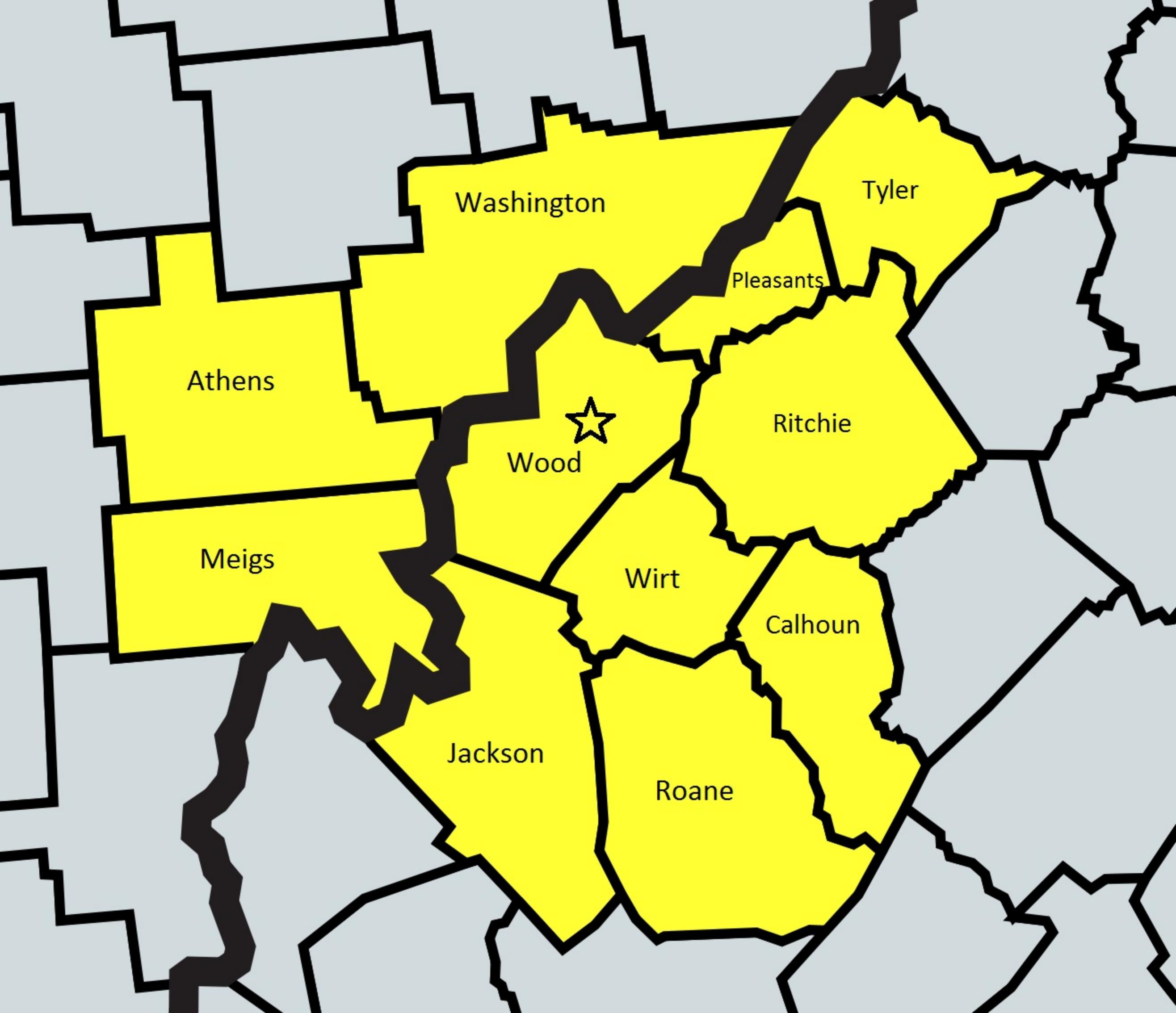


"Top 5" Health Issues by Income



Organization	Priority	Information
Al-Anon	1	http://al-anon.org/
American Cancer Society	1, 2	https://www.cancer.org/
American Cancer Society Healthy Living	1, 2	Monthly e-newsletter: http://www.acsworkplacesolutions.com/healthyliving.asp
Big Brothers / Big Sisters	1	http://www.biglittlevv.org/
Bonnie's Bus	2	http://wvucancer.org/cancer-prevention-control/bonnies-bus/
Boys & Girls Club	1, 3	https://bgcparkersburg.org/
CCMC Cancer Center	2	http://wvumedicine.org/camden-clark/services/outpatient-services/hematology-oncology/
CCMC Foundation Event - Pink by the Poolside	2	http://camdenclarkfoundation.org/zkevent/pink-by-poolside-2017/
CCMC Silver Sneakers	3	http://wvumedicine.org/camden-clark-health-wellness/programs/silver-sneakers/
CCMC SoleMates	3	http://wvumedicine.org/camden-clark/about-us/life-partners/solemates/
CCMC Temple Challenge	3	http://wvumedicine.org/camden-clark/news/article/ccmc-hwc-temple-challenge/
Celebrate Recovery	1	River Valley Community Church, Vienna J.T. Douglas - 304-834-4425
Columbus Springs Treatment Center	1	614-452-5101
County Drug Coalition - Calhoun	1	Primary Contact: Jean Simmers Office: 304-354-7177 ccfrn@frontier.net
County Drug Coalition - Jackson	1	Primary Contact: Amy Haskins Office: 304-372-2634 amy.r.haskins@wv.gov
County Drug Coalition - Meigs	1	http://meigscpc.wixsite.com/mscpc
County Drug Coalition - Pleasants	1	NO Formal Coalition (activities housed in Boys and Girls Club) Primary Contact: Mike Kersteter Office: 304-684-7643 mike.kersteter@bgcpc.net
County Drug Coalition - Ritchie	1	Primary Contact: Hans Straight Office: 304-643-4187 hansrcfrn@yahoo.com Primary Contact: Patty Chester 304-643-4187
County Drug Coalition - Roane	1	Primary Contact: Kim Goodwin Office: 304-927-5200 ext. 404 king@westbrookhealth.com
County Drug Coalition - Tyler	1	Tyler County Prevention Partnership Primary Contact: Sara Wells 304-517-9323 saraaexoh@aim.com
County Drug Coalition - Washington	1	http://www.washingtongov.org/index.aspx?NID=349
County Drug Coalition - Wirt	1	Primary Contact: Kathy Mason Office: 304-275-4833 wirtcountyfrn@frontier.com
County Drug Coalition - Wood	1	Wood County Wellness Coalition Primary Contact: Kelly Shook Office: 304-424-1711 kelly_shook@suddenlink.net
CRAFT Support Group	1	First United Methodist Church Damon Rhodes nomad.rhodes@gmail.com
DHHR - Calhoun County	1	(304) 354-6118
DHHR - Jackson County	1	(304) 373-2560
DHHR - Meigs County	1	(740) 992-6626
DHHR - Pleasants County	1	(304) 684-9244
DHHR - Ritchie County	1	(304) 643-2934
DHHR - Roane County	1	(304) 927-0956
DHHR - Tyler County	1	(304) 758-2127
DHHR - Washington County	1	(740) 373-5513
DHHR - Wirt County	1	(304) 275-6551
DHHR - Wood County	1	(304) 420-2560
DHHR Clean Indoor Air Program	1, 2	http://dhhr.wv.gov/wvdt/clean_indoor_air/Pages/default.aspx
Dining with Diabetes	3	Via local WVU Extension Services https://extension.wvu.edu/wood
Drug Court	1	http://www.courtswv.gov/lower-courts/adult-drug-courts/adult-drug-courts.html
Farmer's Market	3	SNAP benefits accepted at local farmer's markets: https://www.localharvest.org/parkersburg-wv/farmers-markets

Organization	Priority	Information
Firefly	1	Marrietta-based support group
Hearts Made Whole (support group)	1	First Presbyterian Church (304) 422-5426
Help4WV	1	(844) 435-7498
ICE	1Narco	Program in Wood County schools - Alfgeir Kristjansson
Marietta Memorial Hospital Bariatric Program	3	http://www.mhssystem.org/bariatrics
Marietta Memorial Hospital Cancer Center	2	http://www.mhssystem.org/cancer
Marietta Memorial Walk With A Doc	3	http://walkwithadoc.org/our-locations/marietta-ohio/
Memorial Health System's Healthy Eating Program	3	http://www.mhssystem.org/LiveMemorialWell
Mid-Ohio Valley Health Department	1, 2, 3	http://www.movhd.com/ (304) 485-7374
Narcotics Anonymous	1	https://www.na.org/
Needle Exchanges	1, 3	https://nasen.org/directory/wv/
Oxford House	1	http://www.oxfordhouse.org/pdf/wv
PATCH Program (Roane County)	1	http://www.patch21.org/
RAZE	1	https://www.razewv.com/
Recovery Point	1	https://www.recoverypointwv.org/
Relay for Life	2	http://www.relay.acsevents.org
Sisters Health Foundation	3	https://www.sistershealthfdn.org/ Phone: 304.424.6080
Too Good for Drugs	1	https://toogoodprograms.org/
Try This WV	3	http://trythiswv.com/
Westbrook Health Services	1	https://westbrook-health.squarespace.com/ 304-485-1721
Wood County WIC	3	304-428-3688
WV Food Link	3	http://foodlink.wvu.edu/
WV Partnership for Elder Living, Inc.	3	http://www.wvpel.org/
WV Tobacco Quitline	1, 2	1-800-QUIT-NOW
WVU Extension	3	https://extension.wvu.edu/wood



Washington

Tyler

Pleasants

Athens

Ritchie

Wood

Wirt

Meigs

Calhoun

Jackson

Roane