St. Joseph's Hospital, Buckhannon, WV

Upshur County 2016 Community Health Needs Assessment

Prepared by the WVU School of Public Health

Submitted: March 31, 2016

Contents

Introduction	2
About St. Joseph's Hospital	2
Previous CHNA Findings	3
Definition of Community Served	4
Methodology and Community Input Process	5
Secondary Data	6
Primary Methods of Collecting and Analyzing Information	6
Identifying Priorities	7
Significant Community Health Needs Identified	11
Resources Potentially Available to Address the Significant Health Needs Identified	14
Conclusion	15
Appendices	17

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 Implementation Plan to address the needs 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 and public health; identifying resources; and prioritizing needs. After completing the CHNA, hospitals develop an Implementation Plan on those needs they will address; justify those they do not address; and describe strategies, collaborators, resources, and evaluation plans.

The 2016 Upshur County CHNA incorporates the requirements described above and identifies the following prioritized needs:

- 1. Access to Wellness Opportunities
- 2. Obesity/ Diabetes

Additionally, it was a goal of the St. Joseph's Hospital (SJH) Leadership Team to incorporate sensitivity to issues of limited transportation and poverty, especially children in poverty, into the overall CHNA.

This document should serve as a roadmap in the development of the Implementation Plan, which will be developed during the months following the completion of the 2016 CHNA and specify planned actions to be taken by St. Joseph's Hospital and collaborators, available resources, anticipated actions, and a plan for evaluating these activities.

Because St. Joseph's Hospital recently became a part of the West Virginia United Health System, Inc. ("WVUHS"/ WVU Medicine system), it was important that a CHNA be completed in the first quarter of 2016 (three-month period). Thus, the CHNA presented below could be considered a "rapid" CHNA.

About St. Joseph's Hospital

Founded in 1838, the Pallottine Missionary Society was created to assist Roman Catholic Priest Vincent Pallotti with his life's mission of serving the sick and poor. The first Pallottine Sisters made their way to the United States in 1912, passing the wreckage of the Titanic, as their own ship, the Bremen, made its way safely between the icebergs and debris field.

In 1920, they were invited to open a hospital in Buckhannon, West Virginia. Four Sisters followed the call and on February 15, 1921, purchased the beautiful Barlow estate on a hilltop overlooking the town. "The Overlook" consisted of a four-story wooden building faced with yellow brick on nine acres of land. The rather large private home was converted into an eightbed hospital and convent for the Sisters with the help of good friends and benefactors.

Over the past 95 years, St. Joseph's Hospital has developed from an eight-bed hospital to a medical community dedicated to serving the needs of the residents of central West Virginia. The Hospital's Vision statement: "St. Joseph's Hospital will be the best small-town hospital in West Virginia" reflects the belief that the size of an organization is only important if organizations apply limitations.

St. Joseph's Hospital remains committed to its mission with an ever-vigilant focus on its Christ values. With the addition of new physicians and the opening of a new Skilled Nursing Facility, the organization is working to ensure that St. Joseph's Hospital continues to meet the long-term needs of the communities it serves. The transfer of sponsorship to United Hospital Center (UHC), a founding member of West Virginia United Health System (WVUHS), in the fall of 2015 provides patients high quality care with easy and coordinated transfer of care when more specialized care is needed. By joining forces with WVUHS/United Hospital as part of WVU Medicine, St. Joseph's Hospital can ensure its long-term sustainability.

Previous CHNA Findings

St. Joseph's Hospital completed a Community Health Needs Assessment during the 2012-13 calendar years. SJH engaged Arbor Associates, Inc. to gather data on the topics of: utilization of healthcare, physicians, and medical care services available beyond the local area including identification of unmet healthcare needs, financial and transportation barriers to care, and willingness to use SJH for available care.

A total of 200 phone interviews were completed at random from residents from the primary service area. Secondary data on disease incidence and mortality, as well as behavioral risk factors were also gathered from the West Virginia Department of Health, the West Virginia Cancer Registry, the US Census Bureau, the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. A "Community Advisory Group" convened three times in the summer of 2013 to gather data and validate findings.

The following issues were identified as priority areas of focus in the 2012-13 CHNA:

- 1. access to primary care services;
- perceived lack of access to cardiology services;
- 3. perceived lack of access to urology services;
- 4. lack of orthopedic services;
- 5. improved coordination of oncology services;
- 6. weight management programs; and
- 7. tobacco cessation programs.

The SJH Board adopted areas of focus for strategy and program development on September 19, 2013. The final report included an "Action Strategies and Plan" section with tables that divided the report findings into two priority groups. The first table included priority areas with resources and strategies available. The second table included areas of needs identified as beyond current resources to pursue. These items included: dermatology, non-emergent transportation, substance abuse, mental health services, and gastroenterology coordination of care. It is important to note that the 2012-13 CHNA was published prior to the requirement for an in depth implementation plan.

Definition of Community Served

For the 2016 process, the CHNA Leadership Team, in collaboration with SJH defined the community served as the Upshur County geographic area. The CHNA presented here includes the perceived and data-supported health needs of the entire geographic county with special attention in data collection focused on the vulnerable populations of those living in the more rural areas of Upshur County. This special area was defined by the Leadership Team as being outside of the Buckhannon, WV city limits. The entire county of Upshur is designated rural by the Health Research Services Administration's (HRSA) Office of Rural Health Policy.¹ However, the population of Buckhannon is more dense than the rest of the county. The following table is from the US Census Bureau and shows "Quickfacts" of Upshur County:

¹ ftp://ftp.hrsa.gov/ruralhealth/Eligibility2005.pdf

Table 1 - Select Demographics

Population 2015	24,758
Under 18	20.6%
Race non-white or more than 1 race	2.6%
Hispanic or Latino	1.0%
High School Education or Higher	83.7%
Bachelor's Degree or Higher	15.8%
Under 65 Uninsured	18.0%
Persons in Poverty	19.7%

Source: US Census Quickfacts

Summarizing these demographics, Upshur County is a largely rural county with a small population. It is overwhelmingly white in race and has few ethnic or racial minorities. The percentage of Upshur County residents living below the poverty rate is also significantly higher than the national average. The number of individuals with a high school diploma or more is slightly lower than the national average as well.

Methodology and Community Input Process

St. Joseph's Hospital partnered with West Virginia University's School of Public Health (WVU SPH) to complete this Needs Assessment using a robust community based process. This process was led by Dr. Lillian Smith in the Department of Health Policy, Management, and Leadership. The CHNA process began with a thorough review of the previous cycle's needs assessment report. Although there were very pertinent and important findings in the report, it was agreed that this CHNA process would try to surpass the input from the previous needs assessment and focus on reaching a substantial number of individuals for input outside of the Buckhannon area. The process included review of secondary data and the collection of primary data, with a survey of community members' perceptions of health issues and a community event on forces and assets that impact community health.

Secondary Data

The Leadership Team reviewed secondary data related to Upshur County including Census data (Table 1), County Health Rankings Data (Appendix B), the CDC Community Health Status Indicators (Appendix C) and, Community Commons.² Presentation of these reports started the initial discussion around critical health needs in Upshur County.

Primary Methods of Collecting and Analyzing Information

The SPH used an iterative process to develop the public input survey. During the initial Leadership Team meeting, each member was asked to develop a list of three of the most pressing health priorities facing the county. This list was used for dual purposes, first to see if the Leadership Team's assessment would match public input solicited later. Second, the list helped make sure no major health need would be missed during the survey development period. As a result of the initial meeting of the Leadership Team, it was decided to take a very broad look at the community's health needs via input from the public.

An electronic survey was developed (Appendix A) and collected both online and through hard copies. The survey link was distributed through email lists, social media, and local media such as newspapers. It was also mentioned in at least one television news coverage piece and posted on SJH's website. Leadership Team members distributed hard copies at local meetings such as the Chamber of Commerce, and surveys were also collected in the SJH main lobby and the emergency department.

The survey was not intended to be a representative, scientific sample of Upshur County residents but rather a mechanism to solicit the community's perception of their health needs. The survey asked participants to assess the overall quality of health in Upshur County, highest priority areas around health, and risk factors associated with health. A total of 547 surveys were completed by community members, far surpassing the original goal of 200.

Additional information was collected through a community meeting held at West Virginia Wesleyan College in Buckhannon. This session, open to the public and with broad stakeholder representation, solicited input on community health needs, including forces of change in Upshur County, and to identified groups and organizations already providing essential services around the identified priority areas. Approximately 50 community members (including the Leadership Team) were present at this session.

² http://www.communitycommons.org/chna/

The survey results were reported back to the Leadership Team in aggregate, but also broken down between those who lived in Buckhannon and outside, as well as by income and age, to ensure there were no significant differences in responses between the two areas. Community input from the event was compiled into several documents summarizing the work of that day. This input was compiled in a fashion to make prominent priorities mentioned multiple times for dissemination to the leadership group.

Identifying Priorities

From the initial meeting of the Leadership Team, a preliminary list of priorities was identified as described above. Figure 1 shows the priorities ranked by the number of times it was mentioned with larger text indicating greater number of times a particular word or issue was mentioned.

Figure 1 Leadership Team Priorities Identified at Initial Meeting



SJH partnered with WVU-SPH to obtain community input about residents' perspective on the most pressing public health needs in Upshur County. A survey was developed by the WVU-SPH and shared with the Leadership Team for input at the first meeting in February, 2016. The priorities identified at this meeting were used in the survey.

Community Organizations Involved

A Leadership Team was convened by SJH and included members from the following groups listed below. SJH selected representatives from multiple sectors to serve on the Leadership team.

- A community oriented doctor: Robert Blake, Physician Emergency Medicine/Board Member (SJH)
- SJH Board member: Steve Foster
- Public health representative: Sara Chua, Physician Family Practice (SJH)
- Person in charge of hospital foundation, community outreach: Lisa Wharton, Vice President of Public Relations, Marketing & Foundation SJH
- Several community members representing vulnerable populations:
 - O Alicia Rapking, Parish House Buckhannon
 - o Kathy McMurray, Mountain CAP
 - O Lori Ulderich Harvey, Upshur County Family Resource Network
 - Kathy White, United Way of Gilmer, Lewis, and Upshur Counties
- Person in charge of reporting community benefit: Lisa Wharton (above) or Renee Hofer,
 Chief Financial Officer SJH
- Person who can provide hospital data: Renee Hofer (above)
- Person in charge of hospital website: Brian Williams, Service Leader for Corporate Information Systems (SJH)

The Leadership Team members selected potential priorities to include in the community survey and finalized the priorities using the community input survey and available data. Additionally, Leadership Team members proved instrumental in obtaining the 547 community input survey responses and mobilizing community members to attend the community event.

A community event was held on March 14, 2016 at West Virginia Wesleyan College. A flyer (Appendix D) was circulated by Leadership Team members and approximately 50 community members attended. The following organizations and individuals attended and provided input:

St. Joseph's Hospital

- Eric Strother, Director of Pharmacy, SJH
- Lisa Wharton, VP Marketing, Public Relations & Foundation SJH
- Brian Williams, Site IT Manager, WVU Medicine SJH
- Dennis Xander, Board Member (SJH and UHC)
- Brenda Bauer, Quality and Survey Readiness Director-SJH

- Terry Cronin, St. Joseph's Hospital Board of Trustees
- Angela Heavner, Retired Recruitment, SJH
- Amberly Rolenson, Director of Obstetrics, SJH

Other Community Members and organizations representing medically underserved, low-income, and/or minority populations

- Carol Bush, Navigator in Upshur County
- Robin Criss, Caring Manor (Legally Unlicensed Health Care Home)
- Buck Edwards, Community Volunteer
- James Farrell, Upshur County OEM
- Patty Hewitt, Retired Educator
- Kathy McMurray, Executive Director, Mountain CAP
- Mary Alice Andrews, Director of In Home Care Services, Mountain CAP
- Matt Kerner, Executive Director, Opportunity House
- Heather Kessler, Professional Photographer
- Yvonne Loudin, Horizons Celebrate Recovery
- Mindy Mall, Nutrition Outreach Instructor, Upshur County Extension
- Shannon McDaniels, Owner, Sealcoat Concepts
- Joseph Reed and Sue McKisic, Upshur County Health Department
- Laura Meadows, Executive Director, Upshur County Visitor's Bureau
- Melissa Parsons, Aerobics instructor at Buckhannon Fitness Center
- Ron Pugh, Buckhannon City Council member
- Sue Pugh, Community Member
- Alicia Rapking, Director Parish House Buckhannon
- Linda Reigel, Retired educator
- Dawn Robinson, Retired FBI
- Joe Second, WV Hospice
- Rick Simon, Executive Director, Community Care of West Virginia
- Donna Woody, Homemaker

The following organizations provided input at the community event and have missions that incorporate serving potentially underserved, low income, and minority populations in Upshur County.

Community Care of West Virginia is a non-profit corporation, managing primary healthcare centers throughout north central West Virginia. Community Care offers a sliding fee scale program for people who are uninsured or underinsured, as well as offering outreach for enrollment through the Health Insurance Marketplace. The sliding

fee scale is based on family size and income and subsidies through the Marketplace are available for individuals and families up to 138 percent of the federal poverty level.

Opportunity House is a non-profit organization dedicated to providing a safe and supportive environment to those working to recover from addiction, offering holistic care for those in recovery.³

Horizons Celebrate Recovery is "a Christ-centered 12-step program that focuses on recovery through the "8 Recovery Principles..." offered through Horizons Church. ⁴

The Parish House provides a variety of resources to individuals, local churches and other organizations including office space for the Buckhannon River Habitat for Humanity, supplies for eligible parents of newborns, youth outreach, after school programs, and religious reference materials.⁵

Mountain CAP of WV is a community development corporation (CDC) focused on local and state leader advocating for positive growth in rural communities in West Virginia. According to their website, they "promote and empower family and individual success through a comprehensive approach to education, employment, community health, social involvement and safe, affordable housing" and "create partnerships within our communities to maximize existing resources, to improve infrastructures and to encourage long-term economic expansion." ⁶

Caring Manor is a "legally unlicensed health care home" that provides accommodations, personal assistance, and supervision for elderly community members.⁷

The mission of the **Upshur County Health Department** is to protect, promote, and maintain the health of the entire population of Upshur County. They provide a variety of health services to community members who may not otherwise have access (including immunizations, family planning, STD testing, blood pressure tests).

Upshur County Extension "provides programs in 4-H Youth Development, Families and Health, Agriculture and Natural Resources, Community, Economic and Workforce Development with support from West Virginia University faculty and staff."⁸

³ http://opphousewv.org/housing-programs.html

⁴ http://www.horizonschurch.net/celebrate-recovery/

⁵ http://www.upshurparishhouse.org/NewPage

⁶ http://www.mountaincapwv.org/

⁷ http://thecaringmanor.wix.com/personalcare

⁸ http://upshur.ext.wvu.edu/

Navigator in Upshur County from **WV Healthy Start Navigation Project** is a unit of the WV Healthy Start/ HAPI Project funded by the Health REsources and Services Administration (HRSA), one of 96 Healthy Start Projects nationally focused on prenatal and postpartum women in several WV counties including Upshur. The Navigator Project employs a navigator focused on Upshur County, aimed at enrolling residents in health insurance plans through the Health Insurance Marketplace.⁹

Additionally, the survey received responses from 53 individuals with incomes less than \$20,000 and 42 between \$20,000 and \$29,999. One definition of low income is working families earning up to twice the federal poverty level $(2016--$24,300 \text{ for a family of four})^{10}$, 11 .

Significant Community Health Needs Identified

The Leadership Team met in March, 2016 after the community event to review results of community input from the event and the survey, as well as review publicly available health data. The WVU SPH presented the data collected in the survey, including responses to the three most important health problems or issues in Upshur County (see Appendix E). The top five priorities identified through public input were:

- 1. Drug abuse by adults
- 2. Drug abuse by youth
- 3. Obesity
- 4. Diabetes
- 5. Cancers

Additionally, the survey results indicated that residents feel there are inadequate access to health and wellness opportunities, as well as insufficient public transportation. This is consistent with the 2012-13 CHNA.

Leadership Team members were separated into two groups to review and discuss the results presented in Appendix E. The groups then reported noteworthy points to the larger group where results were written on a large sheet of paper. These large, umbrella issues were:

- Drug abuse
- Obesity
- Diabetes

⁹ http://medicine.hsc.wvu.edu/obgyn/the-wv-healthy-starthapi-project/

¹⁰ https://aspe.hhs.gov/poverty-guidelines

¹¹ http://www.nccp.org/profiles/US profile 6.html

- Transportation
- Cancer
- Heart Disease
- Access to exercise opportunities
- Access to specialist care in the county
- Children in poverty

Next, the two groups reviewed County Health Rankings data for Upshur County, Community Health Status Indicators (CHSI), and WV Department of Health and Human Services Behavioral Health and Epidemiological County data for trends. After small group discussion, the teams reported back to the larger group to highlight items where the county data supported community survey results. These items were highlighted for the group to share. These items were:

- Diabetes
- Access to exercise opportunities
- Access to specialist care in the county
- Children in poverty

Of substantive note is that data were very difficult to find related to substance abuse in Upshur County. Although it was identified by community members and the Leadership Team as a significant issue facing the county, data at the county level is not very forthcoming. The federal government does not report these data at the county level and state public health indicators were not sufficient to address the question of substance abuse in-depth.

Finally, the two groups were given prioritization matrices (Appendix F) to identify each health issue and score it based on a series of criteria listed below.

<u>Criteria</u>
Size: how many people are affected?
Seriousness: death, hospitalizations, disability
Equity: are some groups affected more than others?
Importance
Control

Figure 2 was presented to illustrate the relationship between knowledge of the issue (importance) and control, aiming to help the Leadership Team focus on health issues where they had more control over possible interventions.

Figure 2

Prioritization of Health Issues

	Control	No Control
Knowledge	Do It	Influence
No Knowledge	Get Help	Stay Away

The prioritization matrix was filled out by each group and reported to the larger group for discussion. Results of the prioritization exercise are presented in Table 2. Note that averages are used where both groups ranked the same issue. The group highlighted the issues with the highest scores and discussed each.

Table 2 Results of Leadership Team Prioritization Exercise

	Total
Health Issue	
Access to Wellness Opportunities	35
Obesity/ Diabetes	31
Drug Abuse	28
Children/ poverty	27
Transportation	23
Specialty Services	22

The two highest scoring issues identified were:

- 1. Access to Wellness Opportunities
- 2. Obesity/ Diabetes

Leadership Team members felt that the health issues of diabetes and obesity were intertwined and could very likely be addressed using complementary interventions. Additionally, access to wellness opportunities was identified as a highly ranked issue that leadership team members felt they had the capacity to address through the implementation planning process.

Substance abuse was recognized to be a top community health priority by all three data prioritization activities (Leadership Team meeting, community event, and community survey). At the same time, there were limited secondary data to describe or further investigate the issue in a county-wide fashion. Additionally, the Leadership Team felt St. Joseph's may have minimal control over the issue and thus would not choose to prioritize it for purposes of this report.

Resources Potentially Available to Address the Significant Health Needs Identified

One of the major findings from the community event at WV Wesleyan and the following conversations among the Leadership Team was that many significant and important resources exist in the community, especially around social services. These resources, outlined in the forces of change and essential health service documents available as Appendices G and H, provide support for many of the community health priorities identified through this Rapid CHNA. Discussions also indicated, however, that these resources are often underutilized and

the public (including target recipients of these services) may not be aware of the scope or number of services available. Future activity in Upshur County needs to focus on increasing awareness of these services, especially in disseminating consistent information across multiple entities. The list of essential services created by the working groups at the community event will serve as a baseline for creating avenues of increasing awareness and aligning activities of multiple organizations tackling the priorities addressed.

Many services in the community existed that, at least in some form, touched on the issues of poverty (including childhood poverty) and transportation. While these were seen as top priorities of the Leadership Team, it seems as though they are largely being addressed from outside St. Joseph's hospital. There was a clear decision made to not include these as specific priority issues, but rather keep them as considerations in all activities by St. Joseph's hospital moving forward to address community health needs. For example, when addressing the priority of "Access to Wellness Activities", each decision would have to clearly consider the implications of limited transportation and the number of individuals within Upshur County living at or below the poverty level. Then, targeted activities would be accessible to as many people in the community as possible.

An extraordinary number of service providers were identified across all ten essential services as a result of the community meeting, especially considering the small population base of Upshur County. During the implementation planning phase, the Leadership Team will identify specifically which essential service providers can address the main priority areas chosen as focus areas in this CHNA. As the Implementation Plan is developed, the team will sort, coordinate, and describe the activities of these resources around the areas of diabetes/obesity and access to wellness opportunities.

Conclusion

The 2016 CHNA process successfully identified two priorities in which SJH will focus on impacting community health:

- 1. Access to Wellness Opportunities
- 2. Obesity/ Diabetes

It was important to keep this list small in order to make it manageable and to focus the forthcoming implementation plan around items that could be tackled successfully and with sufficient resources, rather than overcommitting to many different issues. Additionally, it was determined that all activities aimed at impacting these two significant health needs would incorporate special concern for the lack of transportation and high number of individuals living

below the poverty level within Upshur County. In the coming months, this process will lead to the completion of an implementation plan for activities centered on these health needs. A cornerstone of this plan will involve coordination and awareness of existing resources and partners in the community.

Approvals

As supported by the Upshur County Community Health Needs Assessment Leadership Team dated March 31, 2016.

Approved by the Board of Trustees at its May 19, 2016 meeting of the Board.

Chairman, St. Joseph's Hospital Board of Trustees

Secretary, St. Joseph's Hospital Board of Trustees

Administrator, St. Joseph's Hospital

Appendices

Upshur County 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 Upshur 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 Upshur County resident?
Yes
○ No
Upshur County Community Health Perception Survey
Health Issues in Upshur County
2. In your opinion, what is the most important health problem or health issue for residents of Upshur County?
Upshur County Community Health Perception Survey
Upshur County Citizens' Thoughts on Health
3. How would you rate Upshur County as a "Healthy Community"?
Very Unhealthy Unhealthy Somewhat Healthy Healthy Very Healthy

* 4. In the following list, what do you in Upshur County?	think are the 3 most important "hea	lth problems" or "health issues"
Air quality	Drug abuse by youth	Infectious diseases
Aging problems (e.g. arthritis, hearing/vision loss)	Elderly support (in home care, nursing facilities, etc.)	
Alcohol abuse by adults	Employment access	Motor vehicle crash injuries Obesity
Alcohol abuse by youth	Food Insecurity/ Hunger	Pedestrian Safety
Bicycle Safety	Gun-related injuries	Respiratory/ lung disease/ asthma
Cancers	Heart disease/ stroke	Sexually transmitted diseases
Child Abuse/ Neglect	High blood pressure	Teenage pregnancy
Connectivity to infrastructure through public transit/ walking/ biking	HIV/AIDS	Tobacco use
Dental Problems	Homelessness	Transportation
Diabetes ("sugar")	Inadequate housing Income (low income)	Violence (e.g. crime, sexual assault,
Doctors (access to provider care)	Infant death	domestic violence, rape, homicide, suicide)
Drug abuse by adults		
Other (please specify)		
Upshur County Community I	Health Perception Survey	
Quality of life in Upshur County	/	

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

Upshur County Community Health Perception Survey

Access to healthcare and medical needs in Upshur County

		Strongly Disagree	e Disagree	Agree		I don't know/ No applicable
I have easy access to the medical s	pecialists I need.					
I am very satisfied with the medical	care I receive.					
I have access to adequate healthca	re.					
Sometimes it is a problem for me to visit.	cover my share of the cost for a medical care					
I am able to get medical care when	ever I need it.					
	ity Health Perception Survey					
,	owing list, what do you think are the n	•		•		in
. In your opinion, from the foll	·	verall he		commu	unity.	
. In your opinion, from the foll lpshur County? Risky behavi	owing list, what do you think are the niors have the greatest impact on the o	verall he	alth in a d	phone	unity. while driv	ing
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Please provide the following information. It will be used for demographic purposes only. Keep in mind you will <u>NOT</u> be identified in any way with your answers.

8. Which elementary school is closest to your home?
Union Elementary
Buckhannon Academy Elementary
Tennerton Elementary
French Creek Elementary
Hodgesville Elementary
Rock Cave Elementary
Washington District Elementary
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 an elderly adult in your household?
	Yes
	No
11	Are you of Higheria or Letine origin or descent?
14.	Are you of Hispanic or Latino origin or descent?
\bigcirc	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
Othe	er (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)
Outer (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)
Upshur County 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

County Health Rankings & Roadmaps Building a Culture of Health, County by County

Upshur (UP)

opsnur (or)					
	Upshur County	Error Margin	Top U.S. Performers^	West Virginia	Rank (of 55)
Health Outcomes					7
Length of Life					16
Premature death	8,086	6,739-9,433	5,317	9,351	
Quality of Life					4
Poor or fair health	19%	15-24%	10%	22%	
Poor physical health days	3.7	2.9-4.4	2.5	4.9	
Poor mental health days	3.2	2.2-4.1	2.4	4.4	
ow birthweight	7.3%	6.2-8.5%	6.0%	9.5%	
Health Factors					25
Health Behaviors					10
Adult smoking	21%	16-26%	14%	26%	
Adult obesity	32%	<mark>26-37%</mark>	25%	33%	
Food environment index	8.2		8.7	7.7	
Physical inactivity	37%	31-43%	21%	34%	
Access to exercise opportunities	59%		<mark>85%</mark>	<mark>52%</mark>	
Excessive drinking			10%	10%	
Alcohol-impaired driving deaths	46%		14%	35%	
Sexually transmitted infections	160		123	232	
Γeen births	34	30-39	20	45	
Clinical Care					40
Jninsured	20%	17-22%	11%	18%	
Primary care physicians	1,871:1		1,051:1	1,306:1	
Dentists	2,720:1		1,392:1	2,130:1	
Mental health providers	1,748:1		521:1	1,291:1	
Preventable hospital stays	84	73-95	46	103	
Diabetic monitoring	<mark>74%</mark>	65-84%	<mark>90%</mark>	83%	
Mammography screening	58.7%	48.9-68.5%	70.7%	57.4%	
Social & Economic Factors					29
High school graduation	70%	0/	93%	78%	
Some college	39.0%	32.7-45.3%	70.2%	52.1%	
Unemployment	7.1%	10.0=0/	4.4%	7.3%	
Children in poverty	27%	19-35%	13%	25%	
nadequate social support	19%	15-25% 20-34%	14%	19%	
Children in single-parent households Violent crime	27%	20-34%	20%	31%	
	57 76	61-93	64	305 86	
njury deaths	70	01-93	49	00	
Physical Environment					38
Air pollution - particulate matter	13.3		9.5	13.2	
Drinking water violations	5%	0/	0%	3%	
Severe housing problems	10%	7-12%	9%	11%	
Driving alone to work	85%	83-87%	71%	82%	
Long commute - driving alone	33%	28-38%	15%	32%	

^{^ 10}th/90th percentile, i.e., only 10% are better. Note: Blank values reflect unreliable or missing data

Upshur County, WV



The following Summary Comparison Report provides an "at a glance" summary of how the selected county compares with **peer counties** on the full set of **Primary Indicators**. Peer county values for each indicator were ranked and then divided into quartiles.

	Better (most favorable quartile)	Moderate (middle two quartiles)	Worse (least favorable quartile)
Mortality	Alzheimer's disease deaths Coronary heart disease deaths Male life expectancy Motor vehicle deaths Unintentional injury (including motor vehicle)	Cancer deaths Chronic kidney disease deaths Diabetes deaths Female life expectancy Stroke deaths	<u>Chronic lower respiratory</u> <u>disease (CLRD) deaths</u>
Morbidity	Alzheimer's diseases/dementia Cancer Gonorrhea HIV Preterm births Syphilis	Adult obesity Adult overall health status Older adult depression	<u>Adult diabetes</u> <u>Older adult asthma</u>
Health Care Access and Quality	Cost barrier to care	Older adult preventable hospitalizations Primary care provider access Uninsured	
Health Behaviors	Adult physical inactivity Adult smoking Teen Births		Adult female routine pap tests
Social Factors	Children in single-parent households High housing costs Inadequate social support Unemployment Violent crime	<u>Poverty</u>	On time high school graduation
Physical Environment	Access to parks Housing stress Limited access to healthy food	Annual average PM2.5 concentration Living near highways	

Centers for Disease Control and Prevention 1600 Clifton Rd. Atlanta, GA 30333, USA 800-CDC-INFO (800-232-4636) TTY: (888) 232-6348 - Contact CDC-INFO

Source: http://wwwn.cdc.gov/CommunityHealth/profile/currentprofile/WV/Upshur/

What do you see as the Major Health Challenges Facing Upshur County?



Join us for a Round Table Discussion
Monday, March 14th, 2016
9 am to 11 am
West Virginia Wesleyan College
Social Hall, Benedum Campus Center
A light breakfast will be provided

Your Input is Needed!



RSVP to
Eavasile@hsc.wvu.edu
or to 304-293-0580
by March 11, 2016

Facilitated by the WVU School of Public Health as part of the Upshur County Community Needs Assessment for St. Joseph's Hospital

Appendix E

Upshur County Community Health Perception Survey

Monday, March 21, 2016

498

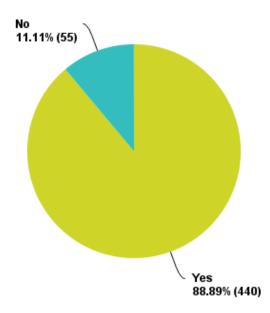
Total Responses

Date Created: Wednesday, February 10, 2016

Complete Responses: 401

Q1: Are you an Upshur County resident?

Answered: 495 Skipped: 3



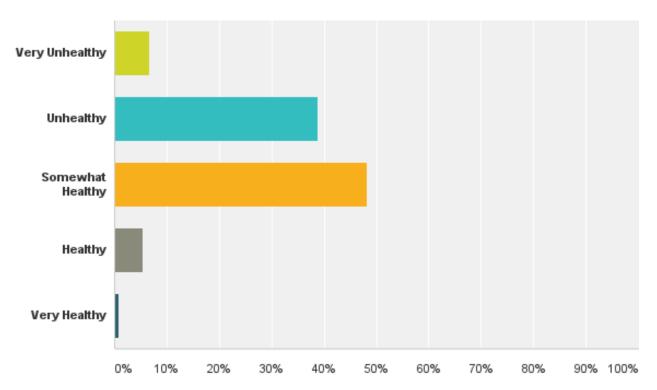
Q2: In your opinion, what is the most important health problem or health issue for residents of Upshur County?

Answered: 369 Skipped: 129

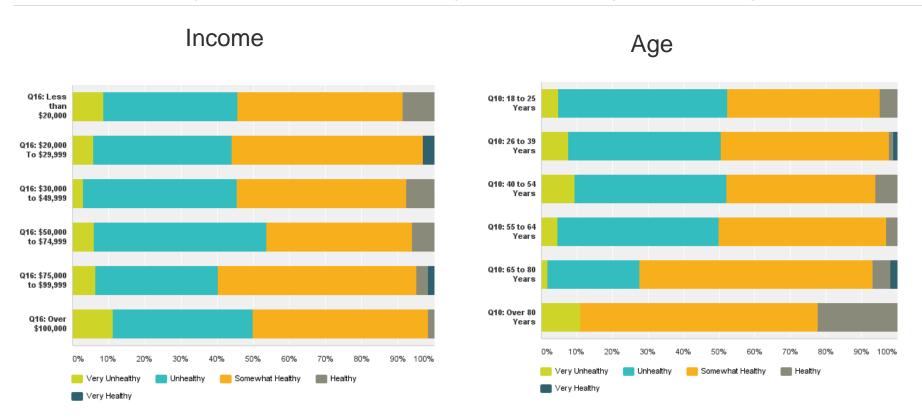
Sick Weight Physicians Poverty Insurance Fat Smoking Diet Cancer Hospital Care Eating Obesity Community Drug Overweight Health Specialists Diabetes Education Doctors Heart Attacks Heart Disease Sugar Afford Family Practice Substance Abuse

Q3: How would you rate Upshur County as a "Healthy Community"?

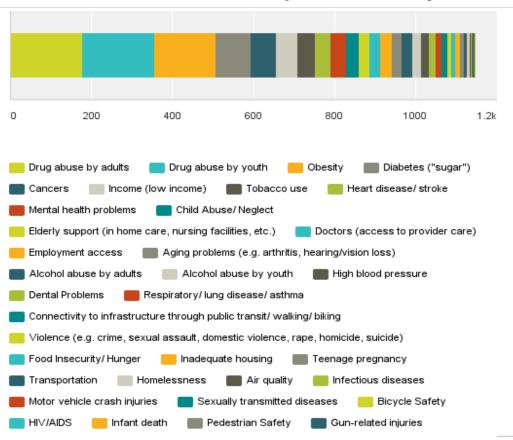
Answered: 388 Skipped: 110



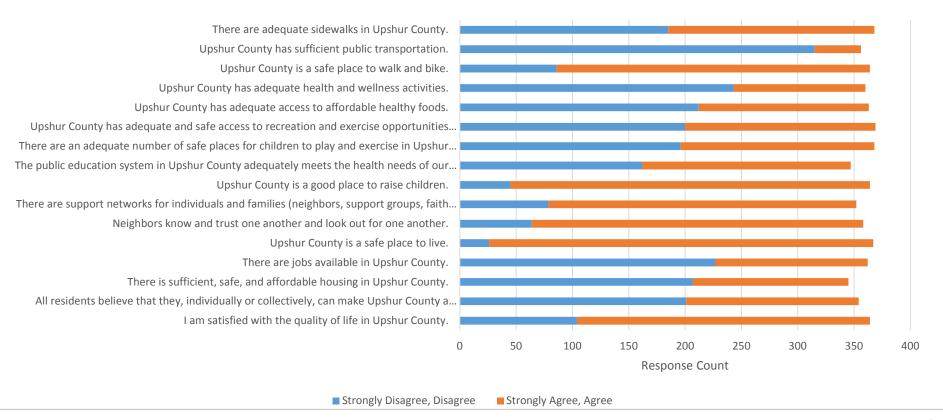
Q3: How would you rate Upshur County as a "Healthy Community"?



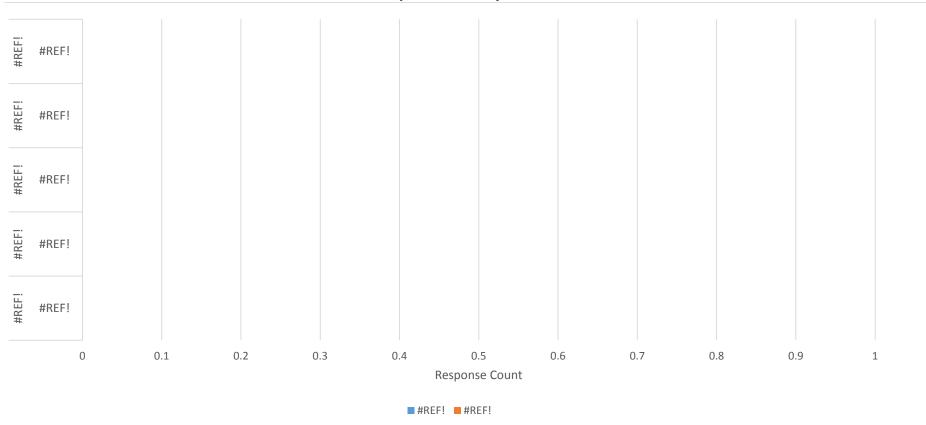
Q4: In the following list, what do you think are the 3 most important "health problems" or "health issues" in Upshur County?



Q5: Please indicate your level of agreement with each of the following statements about Upshur County:

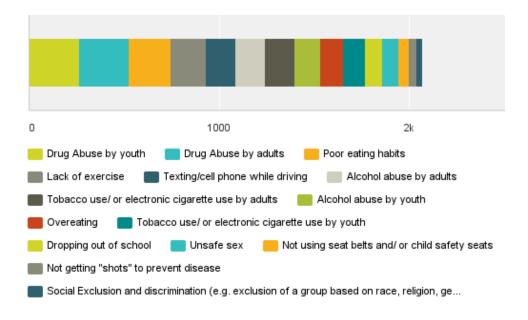


Q6: Please indicate your level of agreement with each of the following statements about Upshur County:



Q7: In your opinion, from the following list, what do you think are the most important "risky behaviors" in Upshur County? Risky behaviors have the greatest impact on the overall health in a community.

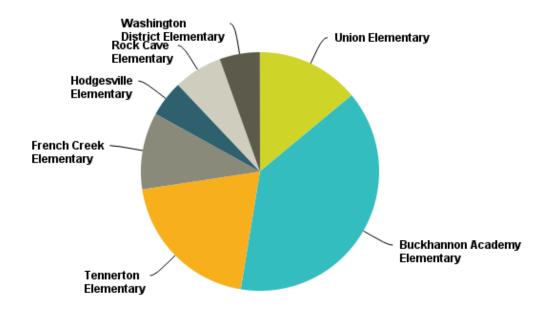
Answered: 372 Skipped: 126



Demographics

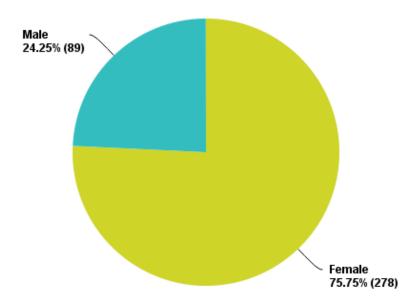
Q8: Which elementary school is closest to your home?

Answered: 365 Skipped: 133



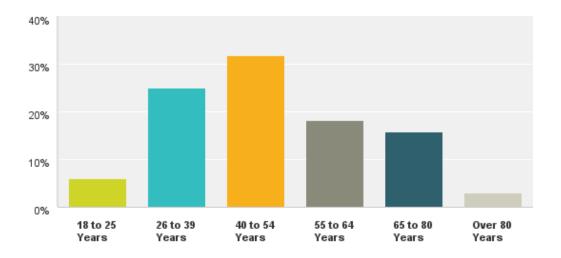
Q9: What is your gender?

Answered: 367 Skipped: 131



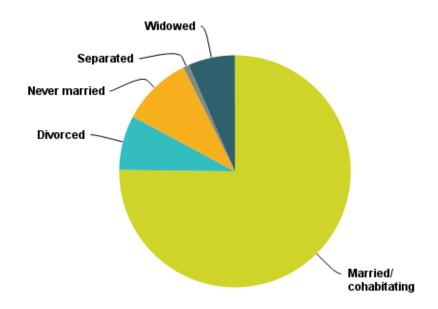
Q10: What is your age range?

Answered: 367 Skipped: 131



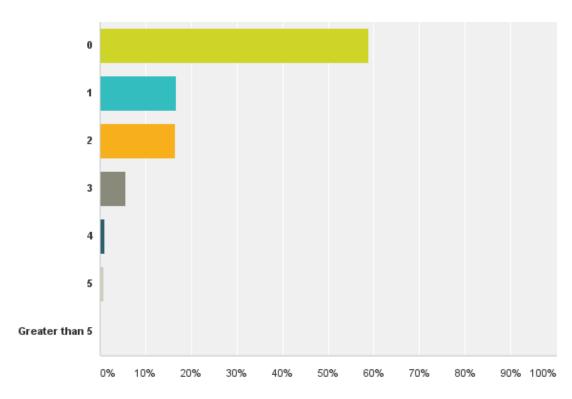
Q11: What is your marital status?

Answered: 367 Skipped: 131



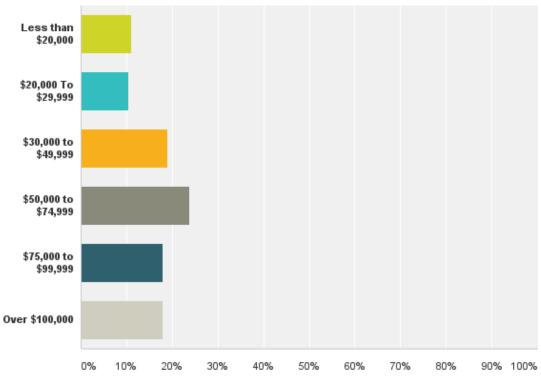
Q12: How many children under the age of 18 live in your household?

Answered: 370 Skipped: 128



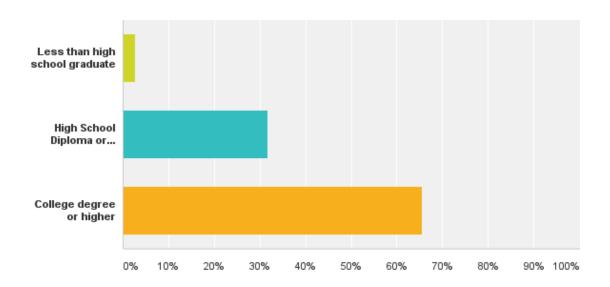
Q16: What is your approximate average household income?





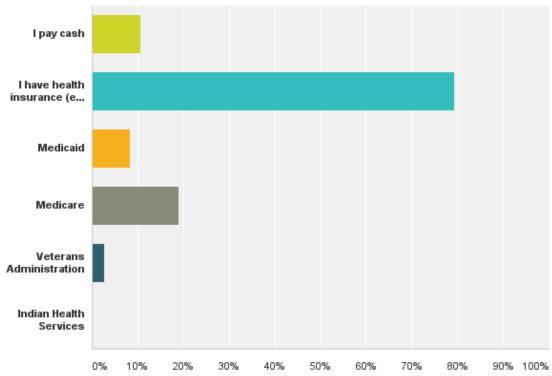
Q17: What is the highest level of education you have completed?

Answered: 360 Skipped: 138



Q18: How do you pay for your health care?





Appendix F

Prioritization Matrix

•	Impo	rtance	e	Cont	rol		Serious	Size	Equity	Total
Health Issue	3	2	1	3	2	1	1-10	1-10	1-10	

Appendix G

Upshur County Community Health Needs Assessment for St. Joseph's Hospital

Local Public Health Systems (what businesses/services are already in the area that address the 10 essential public health services) – Results

Essential service #1: Monitor health status to identify community health problems

- St. Joseph's Hospital
- Upshur Co. Health Department
- State office of Epidemiology
- WV Healthy Start Navigation Project (304) 614-6848 (US Dept. HHS/ Marketplace Navigation and Education Insurance)
- Certified Emergency Response Team (CERT)

Essential service #2: Diagnose and investigate health problems and health hazards in the community

- Office of Emergency Management
- Red Cross
- Upshur Co. Health Department
- St. Joseph's Hospital
- City Council
- Community Care of WV

Essential service #3: Inform, educate, and empower individuals and communities about health issues

- WVU Extension
- WV Healthy Start Navigation Project Carol Bush (304) 614-6848 (Marketplace Insurance and Medicaid Assistance/ Health education and outreach)
- Fitness Centers
- Create Buckhannon (Healthy Eating and Try This partnership)
- St. Joseph's Hospital
- Upshur Co. Health Department
- Rotary
- County schools

- Head Start
- Opportunity House
- Regional Educational Service Agency (RESA)
- Celebrate Recovery (Horizons Church, Living Word Church of God)
- Mountain CAP
- Right from the Start
- Chamber of Commerce
- WV Hospice
- Community Care of WV

Essential service #4: Mobilize community partnerships to identify and solve health problems

- Upshur Co. Health Department
- Family Resource Network
- St. Joseph's Hospital
- Major employers of Upshur County
- WV BHHF
- US Attorney
- Mountain CAP of WV Kathy McMurray (304) 472-150 (WV Housing Policy Task Group)

Essential service #5: Develop policies and plans that support individual and community health efforts

- Upshur Co. Health Department
- City of Buckhannon Planning Commission
- Office of Emergency Management
- Fitness Centers
- City Council
- County Commission
- St. Joseph's Hospital
- Units of local government
- Mountain CAP of WV Kathy McMurray (304) 472-150

Essential service #6: Enforce laws and regulations that protect health and ensure safety

- Upshur Co. Health Department
- Local police
- County inspectors
- Federal oversight agencies
- DHHR (child and adult protective services)

Essential service #7: Link people to needed personal health services and assure the provision of health care when otherwise unavailable

- Create Buckhannon
- Central WV Aging Services
- St. Joseph's Hospital dietitian
- DHHR
- St. Joseph's Hospital social worker
- Mountain CAP
- WV Health Start Navigator Project Carol Bush (304) 614-6848 (Marketplace Insurance and Medicaid Assistance/ Health education and outreach)
- Upshur Co. Health Department
- Right from the Start (in home education and referral to community services) this program is within Mountain CAP of WV Lora Mathes (304) 472-1500
- Head Start
- Family Resource Network (FRN)
- Cardiac program in Elementary Schools School nurses coordinate
- Opportunity House
- Parrish House
- Senior Center
- County School System
- WV Hospice

Essential service #8: Assure a competent public and personal health care workforce

- WV Wesleyan Bachelor of Science in Nursing (BSN) Program
- Fred W. Eberle Technical Center Licensed Practical Nurse (LPN) Program
- County Health Care
- Upshur Co. Health Department
- St. Joseph's Hospital
- Behavioral Health Providers
- WV Hospice
- WVU Dept. of Food and Nutrition for dietetic majors

Essential service #9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services

- Upshur Co. Health Department
- St. Joseph's Hospital (Abor Evaluation)
- WVU
- Mountain CAP
- DHHR

Essential service #10: Research for new insights and innovative solutions to health problems

- Upshur Co. Health Department
- Emergency Management Services
- WV Healthy Start Navigation Project Carol Bush (304) 614-6848 ccbush@hsc.wvu.edu
- WV Wesleyan College
- WVU
- City Council
- Mountain GAP of WV (2015 pilot program for health homes related to asthma/COPD)

Upshur County Community Health Needs Assessment for St. Joseph's Hospital

Forces of Change Brainstorming Results

Underemployment and unemployment Youth leaving the state Access to healthy food and food insecurity Substance abuse Lack of reliable transportation Volunteer restrictions for Meals on Wheels — in the city implemented in 2 — 3 years Volunteer restrictions for Meals on Wheels which may hinder some county residents from benefiting from this service No quality education Teaching mandated from the feds to the state, etc. Social media Lack of family engagement Lack of family engagement Community groups Mental health stigma Limited resources Lack of public transportation Rural population Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography) Medical & Scientific Emergency Medical Records Pestination graduation Sackpack program for students Backpack program for students Backpack program for students Sackpack program for feaths Sacial media Sacial	Forces (trends, events, factors)	Threats Posed	Opportunities Created
Access to healthy food and food insecurity Substance abuse Lack of reliable transportation Volunteer restrictions for Meals on Wheels which may hinder some county residents from benefiting from this service No quality education Teaching mandated from the feds to the state, etc. Social media Lack of family engagement Mental health stigma Limited resources Lack of public transportation Rural population Technology & Environmental Technology & Environmental Access to healthy food and food insecurity Access to healthy food and bestination scholars or school and in page of the state of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography) Destination graduation School Health to be implemented in 2 – 3 years Social media School Health to be implemented in 2 – 3 years Social media School Health to be implemented in 2 – 3 years Social media School Health to be implemented in 2 – 3 years Social media Social media Church programs for community groups Summer food program Cormunity groups Summer food program Increase the number of afterschool programs Corridor H Increase affordable/low income housing Electronic medical records Develop/implement a prescription drug monitoring program Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)			Palatine Foundation
Food insecurity Substance abuse Lack of reliable transportation Volunteer restrictions for Meals on Wheels which may hinder some county residents from benefiting from this service No quality education Teaching mandated from the feds to the state, etc. Social media Peer interaction Lack of family engagement Community groups Mental health stigma Limited resources Increase the number of afterschool programs Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		Youth leaving the state	Meals on Wheels – in the city
Social & Educational Volunteer restrictions for Meals on Wheels which may hinder some county residents from benefiting from this service No quality education Teaching mandated from the feds to the state, etc. Social media Peer interaction Lack of family engagement Community outreach Social media Peer interaction Community groups Mental health stigma Limited resources Increase the number of afterschool programs Lack of public transportation Rural population Teach of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)			Backpack program for students
Social & Educational Volunteer restrictions for Meals on Wheels which may hinder some county residents from benefiting from this service No quality education Teaching mandated from the feds to the state, etc. Social media Peer interaction Lack of family engagement Mental health stigma Limited resources Lack of public transportation Rural population Rural population Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography) Social media Social media Cocial media Social media		Substance abuse	Destination graduation
Social & Educational on Wheels which may hinder some county residents from benefiting from this service No quality education Family engagement Teaching mandated from the feds to the state, etc. community outreach Social media Peer interaction Lack of family engagement Community groups Mental health stigma Summer food program limited resources Increase the number of afterschool programs Lack of public transportation Rural population Increase affordable/low income housing Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		Lack of reliable transportation	
Teaching mandated from the feds to the state, etc. Social media Peer interaction Lack of family engagement Community groups Mental health stigma Summer food program Limited resources Increase the number of afterschool programs Lack of public transportation Corridor H Rural population Increase affordable/low income housing Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)	Social & Educational	on Wheels which may hinder some county residents from	Social media
feds to the state, etc. Social media Peer interaction Lack of family engagement Community groups Mental health stigma Summer food program Limited resources Increase the number of afterschool programs Corridor H Rural population Rural population Increase affordable/low income housing Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		No quality education	Family engagement
Lack of family engagement Mental health stigma Limited resources Lack of public transportation Rural population Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography) Summer food program Corridor H Increase affordable/low income housing Electronic medical records Develop/implement a prescription drug monitoring program Telehealth Telehealth Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		_	. •
Mental health stigma Limited resources Limited resources Lack of public transportation Rural population Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Aging populations/communication challenges Internet access is expensive, limited service (which might be due to topography) Summer food program Increase the number of afterschool programs Electronic medical records Develop/implement a prescription drug monitoring program Telehealth Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		Social media	Peer interaction
Limited resources Increase the number of afterschool programs Lack of public transportation Corridor H Rural population Increase affordable/low income housing Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		Lack of family engagement	Community groups
Technology & Environmental Te		Mental health stigma	Summer food program
Rural population Increase affordable/low income housing Lack of safe walkways/parks, bike trails, etc. to exercise The NRAO is a hard barrier to call service, especially in the southern part of the county. Telehealth Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography) Increase affordable/low income housing Electronic medical records Develop/implement a prescription drug monitoring program Telehealth Telehealth Telehealth		Limited resources	
Technology & Environmental Telehealty program Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		Lack of public transportation	Corridor H
Technology & Environmental Telehealty in the prescription drug monitoring program Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)	Technology & Environmental	Rural population	
Technology & Environmental call service, especially in the southern part of the county. Telehealth Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		• • •	Electronic medical records
Aging populations/ communication challenges Internet access is expensive, limited service (which might be due to topography)		call service, especially in the	prescription drug monitoring
communication challenges Internet access is expensive, limited service (which might be due to topography)		Telehealth	Telehealth
limited service (which might be due to topography)			
		limited service (which might be	
	Medical & Scientific		Emergency Medical Records

Coordination of information between hospitals/etc.	New CEO/transition to WVUH	
Coordination between hospital and colleges (both WVU and Wesleyan)	School based health centers	
No chronic disease support groups	Expansion of medical specialties through WVU hospital system and foundation	
Drug issues/substance abuse	Need registry for special population that does not interfere with HIPPA regulations	
Lack of off hour appointment times for area doctors except for urgent care		
Lack of local mental health services such as substance abuse detox		
Lack of Employees (drug testing,	Businesses cater to aging	
work ethic)	population	
Aging population	Have Upshur Co. recognized as "all age friendly community"	
Unreliable power supply	Have businesses recognize seniors as valuable employees	
Limited grants for community outreach	Increase the business diversity	
Decline in Oil & Gas Industry	Increase the number of skilled trade workers	
Lack of business diversity	Support and promote local business and small farmers	
Lack of skilled trade workers	Start an adult daycare to give caregivers a rest	
WV Contractor's License too hard to obtain and costly	Increased tourism with the completion of Corridor H	
Lack of growth in unskilled labor workforce	Better collaboration between service business to provide better overall services to the community (share information, refer client/customer to another service or business that they would benefit from)	
	Improve food service distribution (partnerships with WVDA, WVU, Local Economic Development, locally grown foods, aggregation center, food coop, warehousing and distribution, access to health local food)	

Economics & Business

	Healthcare reform/repeal with elections	Increase addiction and treatment centers in the communities	
	Purchasing "Obamacare" is financially hurtful	Initiate 2 nd chance driver's license program	
	Insurance scale, fees, enrolment – conflicting opportunities	Review, improve, and implement a Hazard Analysis and Critical Control Points (HACCP) plan	
	Reporting challenges, increasing costs	Develop and implement a way for local business to provide affordable health insurance to full and par-time employees	
Political & Legal	Classifying patients as "drug seekers"	Enforce no smoking policy in the workplace	
_	Drug programs/centers limited		
	No control with legislation of "Obamacare"		
	Regulation of illegal drugs/intent		
	Issues – drugs, education, unemployment		
	Over regulation – "one size does not fit all"		
	Grant reporting overly complicated		
	Coding for insurance billing is too complicated and cumbersome		