



BON SECOURS RICHMOND HEALTH SYSTEM COMMUNITY HEALTH NEEDS ASSESSMENT 2016-2018 IMPLEMENTATION PLAN

The Bon Secours Richmond Health System Community Health Needs Assessment (CHNA) Implementation Plan utilizes the findings from the 2016 CHNA to identify priority areas that will be addressed over the next three years.



Bon Secours Richmond Health System

Community Health Needs Assessment Implementation Plan

2016 – 2018

The Bon Secours Richmond Health System Community Health Needs Assessment (CHNA) Implementation Plan utilizes the findings from the 2016 CHNA to identify priority areas that will be addressed over the next three years.

The CHNA examines qualitative input provided by community members coupled with quantitative data on health conditions in the area. Input from the community was obtained through an online survey, five community conversations, and interviews with key stakeholders most knowledgeable about vulnerable populations. Together the information formed a snapshot of important areas of health concern.

A Community Health Needs Assessment Advisory Board was convened and data on health conditions in the area was compared to the needs identified by the community. Recommendations by the Community Advisory Board were shared with the Bon Secours Richmond Health System leadership and the following topics were prioritized as significant needs in our service area to be addressed:

- Access to Care for the Uninsured with Chronic Disease
- Mental Health
- Transportation
- Education

The Implementation Plan which follows includes many Bon Secours programs and initiatives but also incorporates community partnerships, resources, and advocacy to help drive impact.

PRIORITY: ACCESS TO CARE FOR THE UNINSURED WITH CHRONIC DISEASE

GOAL: Improve access to high quality health care services

OBJECTIVE #1: Support community partners working with uninsured populations

BACKGROUND ON STRATEGY

Research shows that high rates of health insurance coverage positively impact a community's overall health status. Access to health care services improves quality of life, school and work productivity and overall mortality rates.¹ The Healthy People 2020 goal for health insurance aims for 100% of the population to have some form of health insurance coverage. Compared to Virginia where 17% of adults are uninsured, in the City of Richmond, the percentage of uninsured adults is higher.² In the other Richmond Core Service Area counties, the rate of uninsured adults is aligned with the rate in Virginia.

Access to health care services is also impacted by the availability of physicians. The rate of primary care providers per 100,000 residents in the City of Richmond, Chesterfield, Henrico and Hanover counties is lower when compared to the rate in Virginia. The City of Richmond, Chesterfield and Henrico contain Medically Underserved Areas as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA).

Chronic diseases and conditions—such as heart disease, stroke, cancer, type 2 diabetes, obesity, and arthritis—are among the most common, costly, and preventable of all health problems.³

The three leading causes of death in the metropolitan Richmond area are cancer, heart disease and stroke. Diabetes is the 7th leading cause of death. Twenty-eight percent (28%) of Virginians are obese which is consistent with the percentage in the metropolitan Richmond area. The Healthy People 2020 goal is 25% or lower.⁴

Lack of health insurance coverage is a significant barrier to seeking needed health care services particularly in the management of a chronic condition.

Evidence Based Sources:

Centers for Disease Control and Prevention:

- <http://www.cdc.gov/nchs/fastats/access-to-health-care.htm>
- <http://www.cdc.gov/chronicdisease/overview/index.htm>

¹ www.healthypeople.gov Access to Health Services

² www.countyhealthrankings.org, Richmond City, 2013

³ <http://www.cdc.gov/chronicdisease/overview/index.htm>

⁴ <https://www.healthypeople.gov/2020/topicsobjectives/topic/diabetes>

- <http://www.cdc.gov/obesity/strategies/index.html>

County Health Rankings:

- <http://www.countyhealthrankings.org/app/virginia/2016/overview>

Healthy People 2020:

- <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/heart-disease-and-stroke/ebrs>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/cancer>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/diabetes>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/respiratory-diseases>

Virginia’s Plan for Well-Being 2016 – 2020

- <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Support Free Clinic Network with funding and in-kind services	Ongoing	<ul style="list-style-type: none"> • Enable uninsured patients with chronic diseases to manage their health conditions • Facilitate patients’ ability to acquire affordable medications • Enhance understanding of chronic conditions and the prevention thereof • Reduce emergent health care visits
Advance pediatric asthma initiative with the Community Health Collaborative	Fall, 2016	<ul style="list-style-type: none"> • Coordinate programs with VCU Health & HCA to address pediatric asthma in the metro Richmond area • Reduce the number of pediatric patients in the community with uncontrolled asthma symptoms • Support initiatives to reduce asthma triggers in the home
Discharge uninsured patients to Medical Homes	Ongoing	<ul style="list-style-type: none"> • Reduction of readmissions due to lack of appropriate follow up care
Facilitate Health Insurance Enrollment	Ongoing and Marketplace open	<ul style="list-style-type: none"> • Increase the number of residents with Medicaid or Marketplace insurance products • Enhance understanding of insurance usage to first time consumers

	enrollment period	
Advocate for Medicaid reform	Ongoing	<ul style="list-style-type: none"> Increase the number of insured residents in the metropolitan Richmond area through Medicaid expansion
Resources Required Funding, Staff, Advocacy		
ALIGNMENT WITH NATIONAL/STATE PRIORITIES		
Health People 2020		Virginia’s Plan For Well-Being 2016 – 2020
AHS-1 Increase the proportion of persons with health insurance AHS-3 Increase the proportion of persons with a usual primary care provider AHS-5 Increase the proportion of persons who have a specific source of ongoing care AHS-6 Reduce the proportion of persons who are unable to obtain or are delayed in obtaining, necessary medical care, dental care, or prescription medicines		AIM 4: System of Health Care Goal 4.1 Virginia has a strong primary care system linked to behavioral health care, oral health care and community support systems By 2020, the percent of adults in Virginia who have a regular health care provider increases from 69.3% to 85.0% By 2020, the rate of avoidable deaths from heart disease, stroke, or hypertensive disease in Virginia decreases from 46.76 to 40.00 per 100,000 persons
PARTNERSHIPS		
Access Now Capital Area Health Network Creighton Court Resource Center Crossover Clinic Community Pharmacy Chesterfield, Chickahominy, Goochland, Henrico and City of Richmond Health Departments Crossover Clinic Daily Planet Health Brigade (formerly Fan Free Clinic)		Free Clinic of Powhatan Goochland Clinic Hanover interfaith clinics HCA Center for Healthy Hearts (formerly Richmond Area High Blood Pressure Center Medical Society of Virginia VCU Health
OBJECTIVE #2: Provide services to the uninsured through the Care-A-Van, St. Joseph’s Outreach Clinic and Community Nutrition programs		

Evidence Based Sources:

Centers for Disease Control and Prevention:

- <http://www.cdc.gov/nchs/fastats/access-to-health-care.htm>
- <http://www.cdc.gov/chronicdisease/overview/index.htm>
- <http://www.cdc.gov/obesity/strategies/index.html>

County Health Rankings:

- <http://www.countyhealthrankings.org/app/virginia/2016/overview>

Healthy People 2020:

- <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/heart-disease-and-stroke/ebrs>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/cancer>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/diabetes>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/respiratory-diseases>
- <https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status>

Virginia’s Plan for Well-Being 2016 – 2020:

- <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Provide primary care services to the uninsured through Care-A-Van and St. Joseph’s Outreach Clinic	Ongoing	<ul style="list-style-type: none"> • Provide timely access to care to the uninsured • Reduce preventable hospitalizations
Provide chronic disease management services to Care-A-Van and St. Joseph’s Outreach patients	Ongoing	<ul style="list-style-type: none"> • Provide timely access to care for patients with chronic health condition • Provide access to affordable medications • Provide insulin teaching to newly diagnosed diabetics • Pilot group diabetes visits (FY 2017)
Work in collaboration with the Diabetes Treatment Center	Ongoing	<ul style="list-style-type: none"> • Increase access to care for diabetic patients • Increase educational opportunities

Provide patient referrals to Bon Secours Community Nutritionists	Ongoing	<ul style="list-style-type: none"> • Provide clinical nutrition therapy to chronic disease patients • Enhance understanding of nutrition for chronic disease patients
Conduct Heart Aware Screenings	Ongoing	<ul style="list-style-type: none"> • Increase knowledge of cardiac disease risk factors amongst metro Richmond residents • Provide care to residents with newly diagnosed cardiac conditions
Required Resources		
Maintain existing funding		
ALIGNMENT WITH NATIONAL/STATE PRIORITIES		
Health People 2020		Virginia’s Plan For Well-Being 2016 – 2020
<p>AHS-3 Increase the proportion of persons with a usual primary care provider</p> <p>AHS-5 Increase the proportion of persons who have a specific source of ongoing care</p> <p>AHS-6 Reduce the proportion of persons who are unable to obtain or delay in obtaining necessary medical care, dental care, or prescription medicines</p>		<p>AIM 3: Preventive Actions</p> <p>Goal 3.1 Virginians follow a healthy diet and live actively</p> <p>By 2020, the percent of Virginia adults who are overweight or obese decreases from 64.7% to 63.0%</p> <p>AIM 4: System of Health Care</p> <p>Goal 4.1 Virginia has a strong primary care system linked to behavioral health care, oral health care and community support systems</p> <p>By 2020, the percent of adults in Virginia who have a regular health care provider increases from 69.3% to 85.0%</p> <p>By 2020, the rate of avoidable deaths from heart disease, stroke, or hypertensive disease in Virginia decreases from 46.76 to 40.00 per 100,000 persons</p>
PARTNERSHIPS		
<p>Care-A-Van churches http://www.bonsecours.com/about-us-mission-and-outreach-community-health-services-care-a-van.html Diabetes Treatment Center</p>		<p>Shalom Farms St. Joseph’s Villa Thirty-first Street Baptist Church Tricycle Garden</p>

PRIORITY: MENTAL HEALTH

GOAL: Improve mental health status by ensuring access to appropriate, quality mental health services.

OBJECTIVE #1: Increase the proportion of people who receive appropriate treatment for mental health disorders

BACKGROUND ON STRATEGY:

According to the National Institute of Mental Health (NIMH), an estimated 13 million American adults (approximately 1 in 17) have a seriously debilitating mental illness. Mental health disorders are the leading cause of disability in the United States, accounting for 25 percent of all years of life lost to disability and premature mortality.

In 2014, Substance Abuse and Mental Health Services Administration's (SAMHSA) National Survey on Drug Use and Health (NSDUH) showed that 15.7 million adults reported having a major depressive episode (MDE) in the past 12 months. About one-third of those adults (33.2%) did not seek professional help during the preceding 12 months.⁵

Untreated mental health disorders are shown to have a serious impact on physical health and are linked with the prevalence, progression, and outcome of some of the most pressing chronic diseases, including diabetes, heart disease, and cancer.⁶

In the 2016 Bon Secours Community Health Needs Assessment online survey, Mental Health was identified by the community as the number one priority needing to be addressed in the Richmond Core Service Area. Mental Health disorders are health conditions characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning.

The Virginia Department of Health's (VDH) Virginia Behavioral Risk Factor Surveillance System (BRFSS) asks participants "have you ever been told that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?" The data shows a higher percentage of respondents who have a depressive disorder residing in Richmond, Henrico and Chesterfield compared to Virginia.

The 2013 suicide rate per 1,000 is higher in Chesterfield and Hanover compared to Virginia. The suicide rates have increased slightly in the Richmond Core Service Area from 2003 to 2013.

Evidence Based Sources:

County Health Rankings:

⁵ <http://www.samhsa.gov/treatment>

⁶ <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

- www.CountyHealthRankings.org

Healthy People 2020:

- www.healthypeople.gov

Substance Abuse and Mental Health Services Administration (SAMHSA):

- <http://www.samhsa.gov/treatment>

Virginia’s Plan for Well Being 2016 – 2020:

- <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Increase Depression screening by primary care providers	Ongoing	<ul style="list-style-type: none"> • Track number of patients who receive depression screening in primary care settings
Develop strategies to overcome mental health provider shortage	Ongoing	<ul style="list-style-type: none"> • Improve Mental Health provider stability • Decrease wait time for patients • Ensure behavioral health practitioners are available in Emergency Departments
Integrate behavioral health with primary care	Ongoing	<ul style="list-style-type: none"> • Enhance capacity for the treatment of anxiety/depression in primary care settings • Ensure behavioral health practitioners are available in primary care • Increase number of mental health patients who receive counseling following their Primary Care Physician’s recommendation • Collaborate with the City of Richmond Health Department to refer patients to the Care-A-Van LCSW • Track the number of Care-A-Van patients receiving mental health counseling onsite
Collaborate with the Daily Planet by referring patients to the LCSW at St. Joseph’s Villa	Ongoing	<ul style="list-style-type: none"> • Continue partnership with the Daily Planet • Increase the number of Mental Health patients who will have access to appropriate health services

Formalize and fund Community Health Coalition to bring ACEs programming to the region	Start Fall, 2016	<ul style="list-style-type: none"> • Advance a plan in collaboration with the Community Health Coalition that will address Adverse Childhood Experiences
Enhance collaboration with community partners to impact mental health awareness	Ongoing	<ul style="list-style-type: none"> • Provide additional screenings, support groups and programs in collaboration with National Alliance on Mental Illness (NAMI) and Richmond Behavioral Health Authority (RBHA) in an effort to support Mental Health access for the East End community at the Parsley’s Center for Healthy Communities • Enhance the current relationship with Hanover and Richmond City CSB and pursue opportunities with Henrico and Chesterfield CSB • Continue partnership with the Hanover CSB and local law enforcement officials with the Hanover Crisis Intervention Center (HCIC) at MRMC • Track the number of Bon Secours Medical Group patients served by United Methodist Family Services counselors
Required Resources Funding, Partnership, Advocacy		
ALIGNMENT WITH NATIONAL/STATE PRIORITIES		
Health People 2020	Virginia’s Plan For Well-Being 2016 - 2020	
MHMD-5 Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral MHMD-9 Increase the proportion of adults with mental health disorders who receive treatment MHMD-11 Increase depression screening by primary care providers	AIM 4: System of Health Care Goal 4.1: Virginia has a strong primary care system linked to behavioral health care, oral health care, and community support systems.	

PARTNERSHIPS

The Daily Planet
VCU Health System
Hospital Corporation of America
City of Richmond Department of Health
National Alliance on Mental Health
Hanover Community Services Board
Bon Secours Bereavement Center
United Methodist Family Services

Richmond Behavioral Health Authority
Henrico Area Mental Health and Developmental
Services
Chesterfield Department of Mental Health Support
Services
Childsavers
Stop Child Abuse Now (SCAN)

PRIORITY: TRANSPORTATION

GOAL: Increase safe, healthy, and reliable transportation options for residents in the Richmond service area.

OBJECTIVE #1: Promote active transportation through advocacy for and provision of place making in the neighborhoods we serve.

BACKGROUND ON STRATEGY:

The Centers for Disease Control and Prevention supports implementation of active transportation initiatives and changes to transportation policy as a means of improving overall health of a community. By expanding access, availability and safety of a variety of transportation options a community can prevent chronic disease, reduce motor-vehicle-related injury and deaths, improve environmental health, and increase access to basic needs.⁷

An absence of alternatives to automobile travel has a greater adverse effect on vulnerable populations including the poor, the elderly, people who have disabilities, and children. This immobility results in limited access to jobs, health care, social interactions, and healthy foods.⁸

A Harvard University study conducted in 2015 by economist Raj Chetty found that individuals raised in communities that limit a child’s physical, economic, and educational potential contributes to a greater incidence of poor health and chronic disease. According to this study, transportation related factors proved to have a stronger relationship to upward social mobility than crime, elementary-school test scores, and single-parent households.⁹

As identified in Virginia’s Plan For Well-Being 2016-2020, place (where people live, work, and play) has a critical impact on health. Places are critical for social gatherings, physical activities that shape well-being, and provide safety and connectedness to one’s family, neighborhood, and community.¹⁰

In the 2016 Community Health Needs Assessment Online Survey, individuals were asked to “Choose the TOP 5 priorities you think should be addressed in your community.” From the list of thirty-four (34) health concerns, transportation was identified by the community and ranked 2nd as a top priority need.

⁷ http://www.cdc.gov/healthyplaces/transportation/access_strategy.htm

⁸ <http://www.cdc.gov/transportation/docs/transportation-fact-sheet.pdf>

⁹ <http://philasocialinnovations.org/journal/articles/editorials/828-place-matters-how-u-s-department-of-transportation-secretary-anthony-foxx-is-challenging-the-narrative-of-transportation-policy-to-promote-opportunity-and-address-health>

¹⁰

<http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

Evidence Based Sources:

Centers For Disease Control and Prevention:

- <http://www.cdc.gov/transportation/recommendation.htm>
- http://www.cdc.gov/healthyplaces/transportation/access_strategy.htm
- <http://www.cdc.gov/transportation/docs/transportation-fact-sheet.pdf>

Virginia’s Plan For Well-Being 2016 – 2020:

- <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

U.S. Department of Transportation:

- <http://philasocialinnovations.org/journal/articles/editorials/828-place-matters-how-u-s-department-of-transportation-secretary-anthony-foxx-is-challenging-the-narrative-of-transportation-policy-to-promote-opportunity-and-address-health>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Open Parsley’s Center for Healthy Communities	Fall, 2016	<ul style="list-style-type: none"> • Improve streets, parking, lighting, and sidewalks • Enhance community oneness and collaboration • Provide space for Health Education and workforce development • Improve aesthetics of neighborhood
Provide financial support and advocacy to open a grocery store in the East End food desert	2017-2018	<ul style="list-style-type: none"> • Increased access to healthy foods and basic necessities • Enhance walkability • Improve streets, parking, lighting, and sidewalks • Improved aesthetics of neighborhood • Enhance community oneness and collaboration
Enhance hospital greenspace to improve community livability	Ongoing	<ul style="list-style-type: none"> • Utilize MOB Green Space at RCH for National Night Out and community gatherings
Advocate for greenspace development throughout the	Ongoing	<ul style="list-style-type: none"> • Align support with state and local priorities

region		
Advocate with the City of Richmond to bring bike share to underserved communities	2016-2017	<ul style="list-style-type: none"> Establish Bike Share in low income neighborhoods at low or no cost (i.e. Parsley's, Grocery Store)
Partner with Sports Backers to advocate for the installation of "Complete Streets"	Ongoing	<ul style="list-style-type: none"> Support bicycle infrastructure planning that utilizes mixed use roads, widened sidewalks, and improved street lighting for new development projects Increase well-lit sidewalks, shared-use paths, and safe roadway crossings Create safe pedestrian and bicycling connections to schools, public transportation and public park and recreation areas
Support SEED grant awards in underserved communities	2017-2018	<ul style="list-style-type: none"> Award grants to certain projects in alignment with Community Health Needs Assessment identified priorities. Promote economic growth and improved neighborhood livability
Required Resources Funding, Partnership, Advocacy		
ALIGNMENT WITH NATIONAL/STATE PRIORITIES		
Centers for Disease Control and Prevention		Virginia's Plan For Well-Being 2016 – 2020
http://www.cdc.gov/transportation/recommendation.htm http://www.cdc.gov/transportation/docs/transportation-fact-sheet.pdf		Addresses the need for transportation laws and infrastructure that promote well-being
PARTNERSHIPS		
Sports Backers Church Hill Activities & Tutoring (CHAT) City of Richmond		Local Initiatives Support Corporation (LISC) New Vision Jim's Local Market

OBJECTIVE #2: Advocate for the expansion of public transportation options to increase access for those in underserved areas and improve ridership through a community-based design

BACKGROUND ON STRATEGY:

As identified in Virginia’s Plan For Well-Being 2016 – 2020, access to public transportation is a condition that fosters well-being.¹¹ Coordinated transportation is essential to both building our economy and maintaining a high quality of life. The Richmond region is home to nearly 1.2 million residents making the city the 44th largest in the country. However, Richmond’s transportation system ranks 92nd among the top 100 systems.¹²

The Robert Wood Johnson Foundation’s County Health Rankings uses the measures “Driving alone to work” and “Long commute – driving alone” to monitor the progress of health as related to transportation in the community. It is through both the available transportation options in a community and the transportation choices made by an individual in a community that impact active living, air quality, and traffic crashes. Walking, biking, public transportation, and carpooling have all been identified as safer and healthier options than commuting alone. Additionally, the farther individuals commute alone, the higher their blood pressure and body mass index. With each additional hour spent in a car per day there is a 6% increase in the likelihood of obesity.¹³

As expressed by the United States Secretary of Transportation, Anthony Foxx, it is through transportation that we move closer to equal opportunity and for those willing to work, the American Dream is still within reach.¹⁴

Evidence Based Sources:

County Health Rankings:

- <http://www.countyhealthrankings.org/>

Capital Region Collaborative:

- <http://www.equality-of-opportunity.org/index.php/executive-summaries>

Virginia’s Plan For Well-Being 2016 – 2020:

- <http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

Others:

¹¹<http://www.vdh.virginia.gov/Administration/VPfWB/documents/pdf/Virginia's%20Plan%20for%20Well-Being.pdf>

¹² <http://www.equality-of-opportunity.org/index.php/executive-summaries>

¹³ <http://www.countyhealthrankings.org/>

¹⁴ <http://philasocialinnovations.org/journal/articles/editorials/828-place-matters-how-u-s-department-of-transportation-secretary-anthony-foxx-is-challenging-the-narrative-of-transportation-policy-to-promote-opportunity-and-address-health>

- <http://www.rvarapidtransit.org/>
- <http://philasocialinnovations.org/journal/articles/editorials/828-place-matters-how-u-s-department-of-transportation-secretary-anthony-foxx-is-challenging-the-narrative-of-transportation-policy-to-promote-opportunity-and-address-health>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Advocate for increased bus stops in underserved areas	Ongoing	<ul style="list-style-type: none"> • Work with GRTC and community partners to explore the installation of full-service bus stops (i.e. charging stations, etc.) in areas of need identified by the community (at Parsley’s or the East End grocery store)
Provide civic support of Rapid Transit System (PULSE)	Fall , 2016	<ul style="list-style-type: none"> • Become advocates with RVA Rapid Transit • Reduction in County Health Rankings metric “driving alone to work” • Reduction in County Health Rankings metric “long commute – driving alone” • Reduction in vehicle miles traveled per capita
Engage the Capital Region Collaborative partners to advance regional initiatives	Fall, 2016	<ul style="list-style-type: none"> • Become an advocate for priorities within the region
Support GRTC redesign of transportation network in alignment with community needs	2016-2017	<ul style="list-style-type: none"> • Advocate for GRTC redesign plan in alignment with the vote of the community
Partner with Sports Backers and RVA Rapid Transit to become an advocate for future transit-oriented developments	Ongoing	<ul style="list-style-type: none"> • Align Bon Secours’ advocacy efforts with national and regional initiatives
Provide patient transportation for Richmond Community Hospital patients	Ongoing	<ul style="list-style-type: none"> • Provide no cost transportation services to the community living around Richmond Community Hospital

Required Resources

Funding, Partnership, Advocacy

ALIGNMENT WITH NATIONAL/STATE PRIORITIES	
Centers For Disease Control and Prevention	Virginia’s Plan For Well-Being 2016 – 2020
http://www.cdc.gov/transportation/recommendation.htm http://www.cdc.gov/transportation/docs/transportation-fact-sheet.pdf	Addresses the need for transportation laws and infrastructure that promote well-being
PARTNERSHIPS	
Capital Region Collaborative GRTC CARE Greater Richmond Transit Authority RVA Rapid Transit Richmond Hill	Partnership for Smarter Growth County Supervisors Richmond Regional Transportation Planning Organization

PRIORITY: EDUCATION

GOAL: Promote student success in schools to improve health and quality of life for the Richmond community and future generations

OBJECTIVE #1: Increase the percentage of 3rd graders who pass the SOL reading test to align with the Health People 2020 goal of 80%.

BACKGROUND ON STRATEGY:

Studies have shown that students are 4 times more likely to drop out of school if they are unable to read at the third grade reading level by the end of the third grade. For every year that a child lives in poverty, they are 26% more likely not to graduate high school, over 6 times the rate of proficient readers at the same age.¹⁵ Although 76% of students in the Richmond Core Service Area in 2014 passed the 3rd grade reading of the SOLs, African Americans and low-income residents living in the City of Richmond fell well below the goal. Hispanic populations across all jurisdictions also fell below the Healthy People 2020 goal, with Hispanics in the City of Richmond and Henrico County doing most poorly. In the Richmond region, 20% of children ages 0-5 live in poverty totaling over 16,000 children. Of those, almost 900 students in 2013-2014 were held back before the 3rd grade costing over \$9.4 million to the region.¹⁶

In the 2016 Community Health Needs Assessment Online Survey, individuals were asked to “Choose the TOP 5 priorities you think should be addressed in your community.” From the list of thirty-four (34) health concerns, Education was identified by the community and ranked 5th as a top priority need.

Additionally, in the 2016 Community Health Needs Assessment Community Conversations, attendees were asked to 1) rank the top 10 health issues identified in the survey according to which issues impacted them and the people close to them most and 2) rank the issues according to a community view, which issues should be addressed to improve the overall health of the region. In both scenarios the top 3 concerns were identical and included Education as a top concern.

Evidence Based Sources:

County Health Rankings:

- <http://www.countyhealthrankings.org>

Capital Region Collaborative:

- <http://www.capitalregioncollaborative.com/>

Virginia Department of Labor and Industry:

- <http://www.doli.virginia.gov/>

¹⁵<http://vaperforms.virginia.gov/indicators/education/hsGraduation.php>

¹⁶<http://www.capitalregioncollaborative.com/>

Virginia Department of Education:

- <http://vaperforms.virginia.gov/indicators/education/hsGraduation.php>

Others:

- http://www.doe.virginia.gov/statistics_reports/graduation_completion/cohort_reports/
- <http://www.aecf.org/resources/early-warning-why-reading-by-the-end-of-third-grade-matters/>

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Convene not-for-profit community partners engaged in educational efforts	Ongoing	<ul style="list-style-type: none">• Align the work of community partners with national, state, and local priorities
Engage school leadership to enhance understanding of correlation between education and health	Ongoing	<ul style="list-style-type: none">• Build relationships with school system leadership• Provide opportunities to work collaboratively
Gather, analyze, and share education data through the HCI database	2016-2017	<ul style="list-style-type: none">• Develop HCI snapshots for each of the four Community Health Needs Assessment priorities• Become a liaison for the sharing of educational data and broader public support of best practices across school systems
Support Smart Beginnings Greater Richmond priorities in alignment with Governor McAuliffe's School Readiness and SOL Innovation Committees	Ongoing	<ul style="list-style-type: none">• Provide Smart Beginnings board representation to align educational and health priorities• Provide School Readiness and Standards of Learn Innovation Committee members• Advocate for an increase in quality and number of day care slots available in the East End• Explore partnership opportunities in the East End to establish child care center at Richmond Community Hospital
Engage the Capital Region Collaborative partners to advance regional initiatives	Fall 2016	<ul style="list-style-type: none">• Become an advocate for priorities within the region
Formalize and fund Community Health Coalition initiative to bring ACEs programming to the	Fall 2016	<ul style="list-style-type: none">• Partnership with VDH, VCU, HCA, and other community partners to bring ACE's programming to the region

region		<ul style="list-style-type: none"> Integrate ACE’s evidence-based practices into Bon Secours facilities
Support Community Partners engaged in pre-K readiness through funding and in-kind support	Ongoing	<ul style="list-style-type: none"> Inform community partners of needs identified in Community Health Needs Assessment Align community partners with goals and objectives of Implementation Plan
Enroll eligible children in FAMIS to ensure school readiness	Ongoing	<ul style="list-style-type: none"> Provide two social workers (one bilingual) at Care-A-Van sites to enroll all eligible children in FAMIS
Provide no cost vaccines and school physicals to children to ensure school readiness	Ongoing	<ul style="list-style-type: none"> Care-A-Van to provide vaccines and school physicals to all uninsured children that present to the Care-A-Van.
Required Resources Funding, Partnerships, Advocacy		
ALIGNMENT WITH NATIONAL/STATE PRIORITIES		
Health People 2020		Virginia’s Plan For Well-Being 2016 – 2020
AH-5.3.1 Increase the proportion of 4th grade students whose reading skills are at or above the proficient achievement level for their grade EMC-2.3 Increase the proportion of parents who read to their young children		AIM 2: Strong Start for Children Goal 2.2: VIRGINIA’S CHILDREN ARE PREPARED TO SUCCEED IN KINDERGARTEN By 2020, the percent of children in Virginia who do not meet the PALS K benchmarks in the fall of kindergarten and require literacy interventions decreases from 12.7% to 12.2% By 2020, the percent of third graders in Virginia who pass the Standards of Learning third grade reading assessment increases from 69% to 80%
PARTNERSHIPS		
Commonwealth Parenting Excel VCU Faison School for Autism Friends Association Richmond Cycling Corps First Things First		Reach Out and Read Sacred Heart Center Virginia Literacy Foundation YMCA YWCA Peter Paul Development Center

OBJECTIVE #2: Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade

BACKGROUND ON STRATEGY:

The Healthy People 2020 goal for Education Level/Graduation Rates aims for at least 82.4% graduation rate for students attending public schools with a regular diploma 4 years after starting the 9th grade.¹⁷ While African Americans in Virginia overall are reaching the Healthy People 2020 High School Graduation goal, the African American population in the City of Richmond is falling below that goal. Hispanic populations across all jurisdictions are also falling below the Healthy People 2020 goal, with Hispanics in the City of Richmond and Henrico County doing most poorly.

Although, 83.4% of African Americans in the Richmond Core service area graduate High School, only 54.2% go on to attain higher education degrees and while 74.4% of African American's in the City of Richmond's graduate High School only 41.9% go on to attain a higher education degree. Latinos have an even lower percentage of graduates going on to attain a higher education degree.

The Robert Wood Johnson Foundation found the following to be true:¹⁸

1. The higher the education of the mother, the more likely her infant is to survive and thrive.
2. Infant mortality rate for women who never graduate high school is nearly double that of women with college degrees.
3. Children with less-educated parents are less likely to succeed in school. The US is the only industrialized nation where young people are less likely than members of their parents' generation to be a high school graduate.
4. Each additional year of schooling represents 11% increase in income. High earnings increase access to healthier foods and safer homes, and can even lower uncertainty and stress.

Higher levels of education are directly correlated to better jobs, higher income, and longer, healthier lives with fewer chronic conditions. Education also has a multigenerational implication on health as the education of a parent impacts overall health and educational attainment of their children. Those who graduate college can expect to live at least 5 years longer than individuals who have not finished high school. Additionally, many social and psychological factors, including self-perception, personal control, and social standing, are positively impacted by higher levels of education.¹⁹

Evidence Based Sources:

Healthy People 2020:

¹⁷ <https://www.healthypeople.gov/>

¹⁸ http://www.rwjf.org/en/culture-of-health/2012/08/better_educationhea.html

¹⁹ <http://www.countyhealthrankings.org/>

- <https://www.healthypeople.gov/>

County Health Rankings:

- <http://www.countyhealthrankings.org/>

Robert Wood Johnson Foundation:

- http://www.rwjf.org/en/culture-of-health/2012/08/better_educationhea.html

Capital Region Collaborative:

- http://www.capitalregioncollaborative.com/wp-content/uploads/2016/2016_RVA_Snapshot_-_CRC_-_2016-02-26.pdf

ACTION PLAN

Activity	Target Date	Anticipated Impact or Result
Convene Community Partners working with at risk populations to better understand dropout prevention strategies	Ongoing	<ul style="list-style-type: none"> • Align community partner’s strategies to unite initiatives for at risk youth
Support the Cristo Rey feasibility study through personnel and funding	2017	<ul style="list-style-type: none"> • Conduct Cristo Rey feasibility study • Support Cristo Rey initiative as advanced
Provide financial and in-kind support to CHAT	Ongoing	<ul style="list-style-type: none"> • Provide space for education and community collaboration
Engage the Capital Region Collaborative partners to advance regional initiatives	2016	<ul style="list-style-type: none"> • Become an advocate for priorities within the region
Support Community Partners through funding and in-kind support	Ongoing	<ul style="list-style-type: none"> • Align partners towards implementation plan initiatives

Required Resources

Funding, Partnerships, Advocacy

ALIGNMENT WITH NATIONAL/STATE PRIORITIES

Health People 2020	Virginia’s Plan For Well-Being 2016 – 2020
<p>SDOH-2 Proportion of high school completers who were enrolled in college the October immediately after completing high school</p> <p>AH-5.1 Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade</p>	<p>AIM 1: Healthy, Connected Communities</p> <p>Goal 1.1: VIRGINIA’S FAMILIES MAINTAIN ECONOMIC STABILITY</p> <p>By 2020, the percent of Virginia high school graduates enrolled in an institute of higher education within 16 months after graduation increases from 70.9% to 75.0%</p>
<p>PARTNERSHIPS</p>	
<p>Armstrong Priorities Freshman Academy Anna Julie Cooper School Capital Region Collaborative Church Hill Activities & Tutoring (CHAT) Great Aspirations Scholarship Program (GRASP) The Hanover Center for Trades and Technology United Way of Greater Richmond & Petersburg</p>	<p>Henrico County Public Schools Career & Technical Education Higher Achievement Partnership for Non-Profit Excellence Peter Paul Development Center Salvation Army Boys and Girls Club Science Museum of Virginia</p>