



and

**Lewis County Health
Department
Community Health Needs
Assessment
2019**

Lewis County, WV

**Stonewall Jackson Memorial Hospital/
Lewis County Health Department
Community Health Needs Assessment 2019**

Table of Contents

Executive Summary	Page 3
PHASE I	Page 5
Lewis County Health	Page 7
Lewis County Demographics	Page 9
Lewis County Education	Page 10
Drug Abuse in WV	Page 10
WV Behavioral Risk Factors	Page 11-17
Other WV Health Highlights	Page 17
Tobacco Use in WV	Page 18-19
PHASE II	
Survey Monkey Results	Page 20
PHASE III	
Focus Group	Page 37
Strategies	Page 39

Executive Summary for Stonewall Jackson Memorial Hospital and Lewis County Health Department's Community Health Needs Assessment

Two leading Lewis County-based healthcare organizations have completed a community health needs assessment (CHNA) that began with a healthcare needs survey in the summer of 2018. Stonewall Jackson Memorial Hospital (SJMH) and the Lewis County Health Department (LCHD) conducted the assessment to identify and prioritize community health needs that each organization can use to better serve their Lewis County, West Virginia regional service area.

Stonewall Jackson is a 70-bed, not-for-profit, acute care hospital, with the mission of providing excellent care to all they serve. The vision of the Hospital is to be a thriving community healthcare organization of excellence ... every person, every time.

The facility is fortunate to have a number of specialists on staff, including orthopedic surgeons, two obstetrician/gynecologists, an otolaryngologist, a pulmonologist, a urologist, two internists, two general surgeons, and five family practitioners. A cardiologist, internist, family practitioner, and a pediatrician have private practices as well. The Hospital has several family practice clinics in the area, as well as a home care agency.

The mission of the Lewis County Health Department is "to protect, promote, and maintain the health of the entire population of Lewis County." This is accomplished by providing a healthier and safer environment, promoting healthier lifestyles, and providing services (i.e., immunizations, pediatric services, etc.) which will improve the health of citizens of the county, resulting in less illness, better overall health, and greater longevity of life. The Department employs a nurse and a sanitarian, as well as support staff.

The SJMH Marketing Department designed the CHNA in three parts – a compilation of federal, state and local information, followed by online and paper response surveys, and concluded with focus groups research.

The online and paper surveys in 2018-19 found that the overwhelming concerns of Lewis County area residents were: drug abuse, obesity, cancer, heart disease, diabetes, and high blood pressure in this order. In the 2013 CHNA, the major concern was obesity, but as the drug epidemic has flourished, the major concern for people is drug abuse.

Suggestions in the third component of the CHNA are gathered from a focus group held in April 2019 at the Fire Department with community leaders to discuss health issues identified in the surveys and research. This information also shows that SJMH and LCHD have spent many years providing healthy education and screenings for our citizens. Both entities have been involved in a number of efforts to combat obesity and the lack of physical activity. However, combatting drug abuse is more difficult. There are some suggestions, which will be considered. Both entities will continue to help area residents tackle this epidemic.

Assessment Approach and Methods

The assessment was conducted in three phases.

The first phase was attaining background information on the healthcare problems of the local area and state. The data has been culled from national and state resources. In general, the health statistics for residents of Lewis County, West Virginia are poor.

The second phase of the assessment was a survey, conducted online and by paper distributed in the area. The population of the county is 16,500 and almost 400 surveys were completed.

The last phase was a focus group conducted at the Weston Volunteer Fire Department in April 2019. The participants were presented with a variety of background health information about West Virginia and the current survey results. The third phase notes areas of concern for residents and also contains information on strategies to combat them. It also explains how the Community Health Needs Assessment (CHNA) results are distributed.

Phase One

Information on the Health of Lewis County and WV Residents

Lewis County History and Geography

Located in North Central West Virginia, Lewis County has a total area of 390 square miles, of which 382 is land and 8 square miles is water. The county was created from part of Harrison County by an act of the Virginia General Assembly on December 18, 1816. (Wikipedia, 2012)

The county was named in honor of Colonel Charles Lewis (1733-1774), who was killed at the Battle of Point Pleasant in 1774. One of the first acts of the newly formed West Virginia state legislature was to change the name of the recently completed Trans-Allegheny Lunatic Asylum, in Weston, to the West Virginia Hospital for the Insane. It began operations in 1864 with nine patients. Later renamed Weston State Hospital, it continued to provide care for the mentally impaired until the old building closed in 1994. The William R. Sharpe Hospital was built as the modern replacement facility for services.

Stonewall Jackson Memorial Hospital and the Lewis County Health Department are both located within the city limits of Weston, WV. The Community Health Needs Assessment represents residents from this community.

First Phase of the Community Health Needs Assessment (CHNA)

The first step was the gathering of quantitative and qualitative information with data provided by the state of West Virginia, the federal government and other resources.

A tool used in this assessment was created by the Robert Wood Johnson Foundation. It is a health comparison called "County Health Rankings & Roadmaps." The following graph provides a comparison of healthcare rankings between our last CHNA in 2013, the one in 2016, and the comparison for 2019. The County has improved in some areas and fallen in others.

Rankings for Lewis County out of 55 WV Counties, Comparing 2013, 2016, and 2019

	2013	2016	2019
Overall Ranking	43rd	39th	44th
Health Behaviors	9th	50th	31st
Health Factors	27th	44th	31st
Clinical Care	54th	49th	34th
Socio/Economic	24th	31st	30th
Physical Environ.	17th	26th	19th

In 2013, Lewis County, WV ranked 43rd overall out of 55 counties in the state according to this comparison. Only twelve counties had worse health categories than Lewis County. Lewis County ranked 9th in health behaviors and 27th in health factors. The County is 54th in clinical care; 24th in socio-economic factors; and 17th in physical environment.

In 2016, Lewis County ranked 39th in health outcomes; 44th out of health factors; 50th in health behaviors; 49th in clinical care; 31st in social and economic factors; and 26th in physical environment.

In 2019, the County dropped to 44th in the overall ranking with improvements in health behaviors, health factors, clinical care, and physical environment. There was a one place improvement in the socio/economic standing.

The following provides a more in-depth ranking.

“County Health Rankings & Roadmaps-2019”

	Lewis County	Error Margin	WV	National Benchmark*	Trend	Rank (of 55)
Health Outcomes						44
Mortality						45
Premature death	12,600	10,500-14,700	10,500	5,400		
Quality of Life						43
Poor or fair health	23%	22-24%	24%	12%		
Poor physical health days	5.1	4.9-5.4	5.2	3.0		
Poor mental health days	5.0	4.8-5.2	5.2	3.1		
Low birth weight	11%	9-13%	9%	6.0%		
Health Factors						31
Health Behaviors						31
Adult smoking	21%	20-22%	25%	14%		
Adult obesity	39%	33-45%	36%	26%		
Food environment index	7.8		6.9	8.7		
Physical inactivity	30%	24-36%	28%	19%		
Access to exercise opportunities	54%		60%	91%		
Excessive drinking	12%	12-13%	12%	13%		
Alcohol-impaired drinking death	26%	17-36%	31%	13%		
Sexually transmitted infections	261.4		261.4	152.8		
Teen birth rate	50	42-58	36	14		
Clinical Care						34
Uninsured	7%	6-8%	7%	6%		
Primary care physicians	1,360:1		1,270:1	1,050:1		
Dentists**	3,250:1		1,860:1	1,260:1		
Mental Health Providers	620:1		830:1	310:1		
Preventable hospital stays	6,737		5,683	2,765		
Flu vaccines	38%		41%	52%		
Mammography Testing	34%		49%	38%		
Social & Economic Factors						30

High school graduation**	88%		89%	96%		
Some college	45%	38-52%	55%	73%		
Unemployment	6.6%		5.2%	2.9%		
Children in poverty	26%	18-34%	24%	11%		
Income inequality	4.0	3.3-4.8	4.9	3.7		
Children in single-parent households	35%	25-45%	34%	20%		
Social associations	14.7		12.9	21.9		
Violent crime rate	79		330	63		
Injury deaths	92	72.115	114	57		
Physical Environment						19
Daily fine particulate matter	9.4		9.6	6.1		
Drinking water violations	No					
Severe housing problems	12%	9-14%	11%	9%		
Driving alone to work	83%	79-87%	82%	72%		
Long commute-driving alone	43%	36-49%	33%	15%		

Explanation of Information

The first entry for the County Health Ratings - premature death - is based on life lost before age 75 per 100,000 population. The Lewis County rate is almost twice the national average for premature death, which sets the tone for the rest of the statistics. Other entries are self-explanatory until the reader finds the percentage for mammography screening. These numbers are based on individuals who are Medicare-insured but do not take advantage of those screenings. The statistic for mammography is poor, with only 34% of eligible Lewis County women taking advantage of the screening. The trend for children in poverty in the county has risen as much as the state and national averages, but is higher than either of those at almost 26% of our children living in poverty.

Lewis County Age, Health Providers and Cost, Income

	Lewis County	WV
Demographics		
Population	16,2266	1,815,857
% below 18 years of age	21.4%	20.4%
% 65 and older	20.1%	19.4%
% Non-Hispanic African American	.6%	3.5%
% American Indian and Alaskan Native	.3%	.2%
% Asian	.4%	.8%
% Native Hawaiian/Other Pacific Islander	0%	0%
% Hispanic	1.2 %	1.6%
% Non-Hispanic white	96.4%	92.2%
% not proficient in English	0%	0%
% Females	50.5%	50.5%
% Rural	69.0%	51.3%
Healthcare Providers		
Mental health providers	16,379:1	11,104:1
Uninsured adults	8%	8%
Uninsured children	3%	2%
Other Factors		
Median household income	\$41,900	\$43,200
High housing costs	10%	10%
Children eligible for free lunch	53%	45%
Homicide rate		5

According to the above comparisons, Lewis County has a slightly higher percentage of residents who are 65 years and older. Another statistic is the lack of mental health providers, though we have had a mental health facility within the city for the past 160 years. Economically, the household income is lower than the state average and we have more children eligible for free lunches. The good news is that there were no homicides and the county seat, Weston, is considered one of the safest cities in the state.

Education in Lewis County, WV

The Lewis County statistics for education are below and were obtained from <https://www.towncharts.com/West-Virginia/Education/Lewis-County-WV-Education-data.html>. Education has impact on many health factors such as smoking, obesity, etc.

No Schooling	1%
Less than High School	11%
High School or GED	49%
Some College or Associates Degree	25%
Bachelor Degree or higher	13.4%

The only post-secondary education available in Lewis County is through classes offered by Pierpor Community & Technical College located at Lewis County High School.

West Virginia State Statistics

According to 2016 US Census Bureau estimates, West Virginia is comprised of 51% males and 49% females (US Census Bureau, 2016b). The median age of West Virginia residents is 41.8 years, and 17% of the population is over the age of 65. West Virginia has a primarily white population (93.6%) with the remaining residents Black or African-American (3.3%), Asian (0.9%), or another race (2.2%). Eighty-six percent of West Virginia residents have attained a high school education or above. The highest proportion of West Virginia residents have attained a high school diploma or equivalent (41%), followed by some college (19%), and any college degree (26%).

Polysubstance Abuse

According to the almost 400 responses to our survey conducted for this Community Assessment, drug addiction is the most pressing problem facing both Gilmer and Lewis County. Though the southern part of the state has seen the worst of this epidemic, every county has had serious issues with it.

In 2016, West Virginia led the United States in overdose deaths per capita, with 41.5 deaths per 100,000 individuals in the population (CDC/NCHS National Vital Statistics System, 2017). In comparison, the second highest state, New Hampshire, had a rate of 34.3.

Preliminary data show that 830 drug overdose-related deaths occurred among West Virginia residents in 2016. From 2015-2016, there was a 20% increase in occurrence overdoses. Drug

overdose was the sixth leading cause of death, behind diseases of the heart, cancer, chronic lower respiratory disease, stroke, and dementia. Approximately 705 (85%), of the overdose deaths that occurred in West Virginia were opioid-related (West Virginia Health Statistics Center, 2017). Moreover, for every fatal poisoning, there are even more non-fatal overdoses, persons abusing opioids, and persons using opioids for non-medical use. These staggering statistics make West Virginia ground zero of a drug epidemic forcing an evolution in the state's public health response.

From 2014 to 2016, 2,248 West Virginia residents died from an overdose. Eleven counties had overdose death rates significantly higher than the state average for that period, and all but one of these counties are in the southern portion of the state. Among the 55 counties in the state of West Virginia, during the period of 2014 to 2016, the highest overdose death rate (88.8 deaths per 100,000 population) was observed in Wyoming County (West Virginia Health Statistics Center, 2017).

West Virginia Behavioral Risk Factors

Health Status

- West Virginia ranked 2nd highest nationally in the prevalence of general health of adults as either fair or poor.
- More than one-fourth of West Virginia adults (26.3%) considered their health to be either fair or poor.
- Fair or poor health was most common among groups of adults aged 55-64, those with less than a high school education, and those who have an annual household income of less than \$15,000.
- The prevalence of fair or poor health was highest in Boone, Fayette, Lincoln, Logan, McDowell, Mercer, Mingo, and Wyoming counties.
- West Virginia ranked 1st highest in the nation for the prevalence of poor physical health, poor mental health, and activity limitations due to poor physical or mental health.

Impairment

- The prevalence of difficulty concentrating, remembering, or making decisions was 16.4% among West Virginians, compared to 10.8% nationally, which ranked the state 1st highest nationally.
- More than one-fifth of West Virginians had serious difficulty walking or climbing stairs (22.3%).
- Approximately 5.7% of West Virginia adults had difficulty bathing or dressing.
- The prevalence of having difficulty doing errands alone among West Virginians was 10.7%, significantly higher than the national prevalence of 6.8%.
- Approximately 8.5% of West Virginia adults are blind or have serious vision impairment, the 2nd highest in the nation.
- The prevalence of deafness or serious hearing impairment was 13.3%, which was 1st highest in the nation.

Insurance

- The prevalence of no health care coverage among West Virginia adults aged 18-64 was at an all time low of 9.3%, compared to 14.1% nationally.
- The prevalence of no healthcare coverage among those aged 18-64 was highest in Barbour and Logan counties.
- Nearly half of West Virginia adults have private insurance (45.1%), followed by Medicare (24.3%) and Medicaid (15.9%).
- Approximately 14.6% of West Virginia adults could not afford needed medical care in the past year.
- More than one-fifth of West Virginia adults did not have a routine checkup in the past year (21.4%).

Weight Status

- The prevalence of obesity in West Virginia was 37.7%, which was 1st highest in the nation. The prevalence of obesity was significantly higher in Fayette, Logan, and McDowell counties than in the rest of the state.
- More than two-thirds (70.9%) of West Virginia adults were overweight or obese, the 2nd highest in the U.S. The prevalence of overweight or obese was highest among men, those aged 45-54, those with a high school education, and those with an annual household income of \$50,000-\$74,999.

Physical Activity

- More than one-fourth of West Virginia adults (28.5%) did not participate in leisure-time physical activity or exercise, which ranked West Virginia 11th highest in the nation.
- The prevalence of physical inactivity was significantly higher among females than males.
- Physical inactivity was highest among those aged 65 and older, those with less than a high school education, and those with annual household income of less than \$15,000.
- The prevalence of physical inactivity was significantly higher in Grant, Logan, McDowell, Mercer, Mingo, Webster, and Wyoming counties than the rest of the state.

Tobacco Use

- West Virginia ranked 2nd highest nationally in the prevalence of general health of adults as either fair or poor.
- More than one-fourth of West Virginia adults (26.3%) considered their health to be either fair or poor.
- Fair or poor health was most common among groups of adults aged 55-64, those with less than a high school education, and those who have an annual household income of less than \$15,000.
- The prevalence of fair or poor health was highest in Boone, Fayette, Lincoln, Logan, McDowell, Mercer, Mingo, and Wyoming counties.
- West Virginia ranked 1st highest in the nation for the prevalence of poor physical health, poor mental health, and activity limitations due to poor physical or mental health.

Alcohol Consumption

- The West Virginia heavy drinking prevalence was 3.5%, which was the 54th highest (equating to 1st lowest) in the nation.
- The prevalence of binge drinking among West Virginia adults was 11.3%, the 54th highest (equating to 1st lowest) in the nation.
- Binge drinking was highest among men, those aged 18-24, college graduates, and those with a household income of \$75,000 or more per year.
- The prevalence of binge drinking was significantly higher in Marshall, Monongalia, and Ohio counties than the rest of the state.

Seat Belt Use

- Approximately 4.1% of West Virginia adults seldom or never wear a seat belt when they drive or ride in a car.
- Men had a significantly higher prevalence of seldom or never wear a seat belt when they drive or ride in a car than women.
- The prevalence of seldom or never wear a seatbelt was highest among those aged 25-34, those with less than a high school or high school education, and those with an annual household income of \$25,000-\$34,999.

Falls

- More than one-fourth of West Virginia adults over age 45 reported falling at least once in the past year (31.8%).
- The prevalence of falling at least once in the past year was highest among those aged 55-64, those with less than a high school education, and those earning less than \$15,000 per year.
- Among those who fell in the past year, the prevalence of having an injury from that fall was 39.0%.

Sleep

- More than one-third of West Virginia adults get an inadequate amount of sleep (39.9%).
- The prevalence of sleep problems and daytime sleep among West Virginia adults was 31.4% and 28.2%, respectively.
- Additionally, 49.1% of West Virginia adults snore and 17.1% have sleep apnea.

Sunburn

- More than one-fifth of West Virginia adults (21.5%) had at least one sunburn in the past year.
- The prevalence of sunburn was highest among men, those aged 25-34, college graduates, and those with an annual household income of \$50,000 or more.

Sugar-Sweetened Beverages

- More than one-fourth of West Virginia adults (28.8%) consume soda or pop on a daily basis.
- The prevalence of daily soda or pop consumption was highest among men, those aged 25-34, and those with less than a high school education.
- Nearly one in five West Virginia adults (19.1%) consume sugar-added beverages on a daily basis.

- The prevalence of daily consumption of sugar-added beverages was highest among males, those aged 18-24, and those with a high school education or less.
- Approximately 39.2% of West Virginia adults consume either soda, pop, or a sugar-added beverage on a daily basis.

Tooth Loss

- More than half of West Virginia adults (59.4%) had one or more teeth removed because of gum disease, the 2nd highest in the nation.
- Approximately 29.3% of West Virginia adults have six or more missing teeth, which was 1st highest in the nation.
- The prevalence of six or more missing teeth was highest among those aged 65 and older, those with less than a high school education, and those with an annual household income of \$15,000 or less.
- About 30.4% of West Virginia adults aged 65 and older have all their teeth missing, which was 1st highest in the nation.
- The prevalence of all teeth missing among those aged 65 and older was highest among those with less than a high school education and among those with an annual income of \$15,000 or less.

HIV Risk

- Few West Virginia adults are at high risk for developing HIV (4.6%), the 52nd highest (equating to 3rd lowest) in the nation.
- The prevalence of high risk for HIV was highest among men, those aged 18-24, and those with less than a high school education.

Dental Visit

- More than half of West Virginia adults had a dental visit in the past year (57.6%), which was the 50th highest (equating to 5th lowest) in the nation.
- The prevalence of a dental visit in the past year was highest among women, those aged 18-24, college graduates, and those earning \$75,000 or more per year.

Diabetes Testing

- Among West Virginia adults who do not have diabetes, 62.9% have had a diabetes test in the past 3 years.
- The prevalence of had a diabetes test in the past 3 years was highest among those aged 65 and older, college graduates, and those with an annual income of \$25,000-\$34,999.

HIV Testing

- More than one-third of West Virginia adults (34.5%) have been tested for HIV.
- The prevalence of HIV testing was highest among those aged 25-34, those with less than a high school education, and those earning less than \$15,000 per year.

Menu Labeling

- Nearly half of West Virginia adults (47.2%) use calorie information provided on menus.
- The prevalence of using calorie information on menus was highest among women, college graduates, and those with an annual household income of \$75,000 or more.

Immunization

- About 44.6% of all adults and 67.5% of seniors had a flu vaccination in the past 12 months.
- The prevalence of ever had a pneumonia vaccination was 39.5% among all adults and 72.7% among those aged 65 and older.
- Approximately 62.3% of West Virginia adults have received a tetanus vaccine since 2005 and 35.8% of those reported they had the Tdap vaccine.

Cancer Screening

- The prevalence of had a mammogram in the past 2 years among women aged 50-74 was 77.8%, similar to the U.S. prevalence.
- The prevalence of had a Pap test in the past 3 years among women aged 21-65 was 79.5%, similar to the U.S. prevalence.
- Among West Virginia men aged 40 and older, 52.9% discussed the advantages of the prostate specific antigen (PSA) test with a doctor, 31.8% discussed the disadvantages of the PSA test with a doctor, 52.5% had a doctor who recommended having the PSA test, and 42.7% had a PSA test in the past 2 years.
- Among adults aged 50-75, 10.0% had a Fecal Occult Blood Test (FOBT) test in the past year and 16.8% had a FOBT test in the past 3 years.
- Among adults aged 50-75, 63.3% had a colonoscopy in the past 10 years, similar to the U.S. prevalence.
- More than two-thirds of West Virginia adults aged 50-75 had at least one of the recommended colorectal cancer screenings (67.0%), which was similar to the U.S. prevalence.

Cardiovascular Disease

- West Virginia ranked 1st highest in the nation in the prevalence of heart attack (7.5%) and coronary heart disease (8.0%).
- West Virginia ranked the highest in the nation in the prevalence of stroke (4.4%).
- The overall cardiovascular disease prevalence was 1st highest in the nation at 14.6%.
- The prevalence of cardiovascular disease was highest among men, those aged 65 and older, those with less than a high school education, and those with an annual household income less than \$15,000.
- The prevalence of cardiovascular disease was significantly higher in Grant, Logan, McDowell, Mingo, and Wyoming counties than the state as a whole.
- More than half of West Virginia adults (50.8%) are currently watching or reducing their sodium intake.

Diabetes

- More than 1 in 10 West Virginia adults had diabetes (15.0%), which ranked West Virginia the 2nd highest nationally.
- The prevalence of diabetes was highest among those aged 65 and older, those with less than a high school education, and those with an annual household income of less than \$15,000.
- The prevalence of diabetes was significantly higher in Grant, Logan, McDowell, and Wayne counties than the state as a whole.

- Among West Virginia adults with diabetes, 24.3% had 2 or more A1C test in the past year and 48.0% have taken a diabetes self-management class.
- Approximately 11.0% of West Virginia adults had borderline or pre-diabetes.
- The prevalence of borderline or pre-diabetes was highest among those aged 65 and older and those with less than a high school education.

Cancer

- Approximately 7.4% of West Virginia adults had ever had skin cancer and 8.1% had ever had some other type of cancer.
- About 1 in 7 West Virginia adults had been diagnosed with cancer, but were still living (14.0%), which ranked West Virginia the 3rd highest for overall cancer prevalence.
- Cancer prevalence was highest among adults aged 65 and older and those with an annual household income of \$25,000-\$34,999.
- Among cancer survivors, 35.4% received a written summary of all cancer treatments and 4.9% participated in a clinical trial.
- Among cancer survivors, 63.9% received instructions about routine cancer check-ups after treatment and 76.2% of those were written instructions.

Respiratory Diseases

- Approximately 16.2% of West Virginia adults have ever been diagnosed with asthma and 11.8% of West Virginia adults currently had asthma.
- Women had significantly higher prevalence of both lifetime and current asthma than men.
- The prevalence of both lifetime asthma and current asthma was highest among those with less than a high school education and those with an annual household income of less than \$15,000.
- The prevalence of current asthma was significantly higher in Harrison and McDowell counties than the rest of the state.
- The prevalence of chronic obstructive pulmonary disease or COPD in West Virginia was 13.9%, which was 1st highest in the nation.
- The prevalence of COPD was highest among adults aged 55-64, those with less than a high school education, and those with an annual household income of less than \$15,000.
- The prevalence of COPD was significantly higher in Fayette, Lincoln, Logan, McDowell, Mercer, and Mingo counties than the rest of the state.

Arthritis

- More than 1 in 3 West Virginia adults had arthritis (38.9%), which ranked West Virginia 1st highest in the nation.
- Arthritis prevalence was highest among those aged 65 and older, those with less than a high school education, and those with an annual household income of less than \$15,000.
- The prevalence of arthritis was highest in Fayette, Logan, McDowell, Mingo, Nicholas, Wetzel, and Wyoming counties.

Kidney Disease

- The prevalence of kidney disease in West Virginia was 3.6% and was the 9th highest in the nation.
- Kidney disease prevalence was highest among seniors, those with low educational attainment, and those with low income.

Depression

- About 23.8% of West Virginia adults had depression, which ranked the state the 2nd highest in the nation.
- The prevalence of depression was significantly higher among women than men.
- The prevalence of depression was highest among those aged 45-54, those with less than a high school education, and those with an annual household income less than \$15,000.
- The prevalence of depression was significantly higher in Boone, Fayette, Raleigh, Wayne, Webster, and Wyoming counties than the rest of the state.

Comorbidities

- Approximately 1 in 6 West Virginia adults (17.3%) were both obese and had arthritis.
- About 1 in 8 West Virginia adults (12.9%) were obese and did not exercise.
- About 1 in 11 West Virginia adults (9.2%) were obese and had diabetes.
- Approximately 1 in 20 West Virginia adults (5.3%) had both cardiovascular disease and diabetes.
- About 1 in 11 West Virginia adults (8.7%) were current smokers who had depression.

From WV BRFSS 2016

Other Highlights of West Virginia's State of Health

According to the most recent report of "America's Health Rankings" reported in 2018, there are strengths, highlights and challenges for health in West Virginia, which was ranked 44 out of the 50 states, such as:

Strengths:

- High percentage of high school graduation
- High per capita public health funding
- Low incidence of chlamydia

Challenges:

- High drug death rate
- High prevalence of obesity
- High prevalence of frequent mental distress

Highlights:

- In the past five years, high school graduation increased 15% from 78.0% to 89.8% of students
- In the past six years, obesity increased 18% from 32.4% to 38.1% of adults
- In the past year, children in poverty increased 8% from 24.0% to 25.9% of children aged 0 to 17
- In the past year, immunizations among children increased 15% from 64.7% to 74.7% of

children aged 19 to 35 months

- In the past year, mental health providers increased 9% from 112.7 to 122.6 per 100,000 population
- In the past year, premature death increased 6% from 10,478 to 11,136 years lost before age 75 per 100,000 population

Ranking:

West Virginia is 44th this year; it was 46th in 2017. The state ranks 45th for senior health and 38th for the health of women and children.

State Health Department Website: www.dhhr.wv.gov

https://assets.americashealthrankings.org/app/uploads/2018ahrannual_020419.pdf

Tobacco use in West Virginia according to the CDC

Cigarette use: West Virginia

- In 2016, 24.8 percent of adults smoked. Nationally, the rate was 17.1 percent.
- In 2017, 14.4 percent of high school students smoked on at least one day in the past 30 days. Nationally, the rate was 8.8 percent.

Other tobacco product use: West Virginia

- In 2015, 3.8 percent of adults used e-cigarettes, 4.8 percent used smokeless tobacco and 1.9 percent smoked cigars.
- In 2017, 14.3 percent of high school students used e-cigarettes, 11.5 percent used smokeless tobacco and 11.4 percent smoked cigars on at least one day in the past 30 days. Nationally, the rates were 13.2 percent, 5.5 percent and 8.0 percent, respectively.

Economics of tobacco use and tobacco control

- West Virginia received \$332 million (estimated) in tobacco settlement payments and taxes in fiscal year 2018.
- Of this, the state allocated \$0 in state funds to tobacco prevention in fiscal year 2018 and did not meet the Centers for Disease Control and Prevention's annual spending target.⁴
- Smoking-caused health care costs: \$1.00 billion per year
- Smoking-caused losses in productivity: \$1.23 billion per years

Tobacco taxes

- West Virginia is ranked 33rd in the U.S. for its cigarette tax of \$1.20 per pack (enacted July 2016), compared to the national average of \$1.73. (Connecticut and New York have the highest tax at \$4.35 and Missouri has the lowest at 17 cents.)
- E-cigarette liquid is taxed at 7.5 cents per milliliter. All other tobacco products are taxed at 12 percent of the wholesale price.

Clean indoor air ordinances

- Smoking is prohibited in schools (public schools only).
- Smoking restrictions are required in government workplaces and childcare facilities.
- There are no smoking restrictions in private workplaces, restaurants, bars, casinos/gaming establishments, retail stores and recreational/cultural facilities.

Youth access laws

- The minimum age of sale for tobacco products in West Virginia is 18.
- Minors and adults are prohibited from possessing, importing, distributing and buying bids.⁶
- Minors are prohibited from buying vapor products.

Quitting statistics and benefits

- The CDC estimates that 48.4 percent of daily adult smokers in West Virginia quit smoking for one or more days in 2016.
- In 2014, the Affordable Care Act required that Medicaid programs cover all quit medications.
- West Virginia's state quit line invests \$2.21 per smoker, compared to the national average of \$2.10.
- West Virginia does not have a private insurance mandate provision for quitting tobacco.⁷

<https://truthinitiative.org/tobacco-use-west-virginia>

Phase Two – Surveying

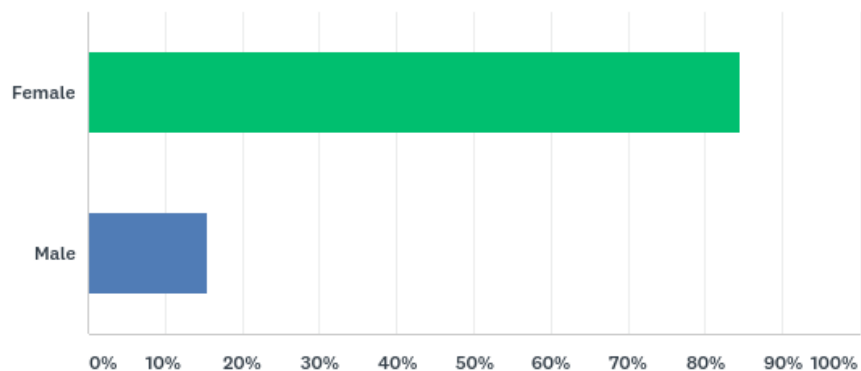
Second Phase

The second step of the Community Health Needs Assessment was to conduct a survey on health issues with public input leading the way. An online company, Survey Monkey, was used for an electronic survey. The survey was created by the SJMH Marketing Department using samples from other health care agencies. There were 37 questions included in the survey, with emphasis on the public's health concerns.

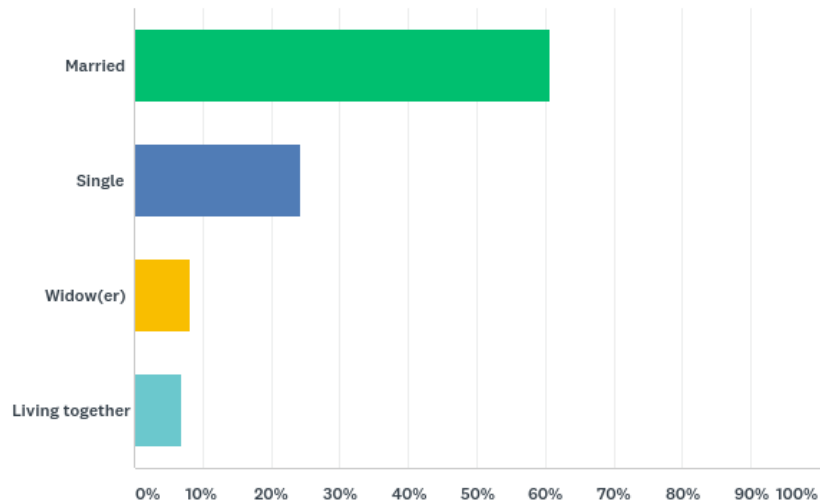
Procedure for Local Survey Collection

Three hundred ninety-two people participated in the survey during from July 2018 to February 2019. The SJMH Marketing Department promoted the survey in the local newspaper with news stories, on the local radio station, on Facebook, and through email invitations. Approximately 320 people participated in the online survey. Another 70 paper surveys were completed at the Lewis County Health Department, the waiting areas in SJMH, physician offices, a senior center, and at “Our Neighbor” - a low-income, Goodwill-type store. Here are the results in graphic form of the answers.

Q1 What is your gender?



Q4 Marital status?

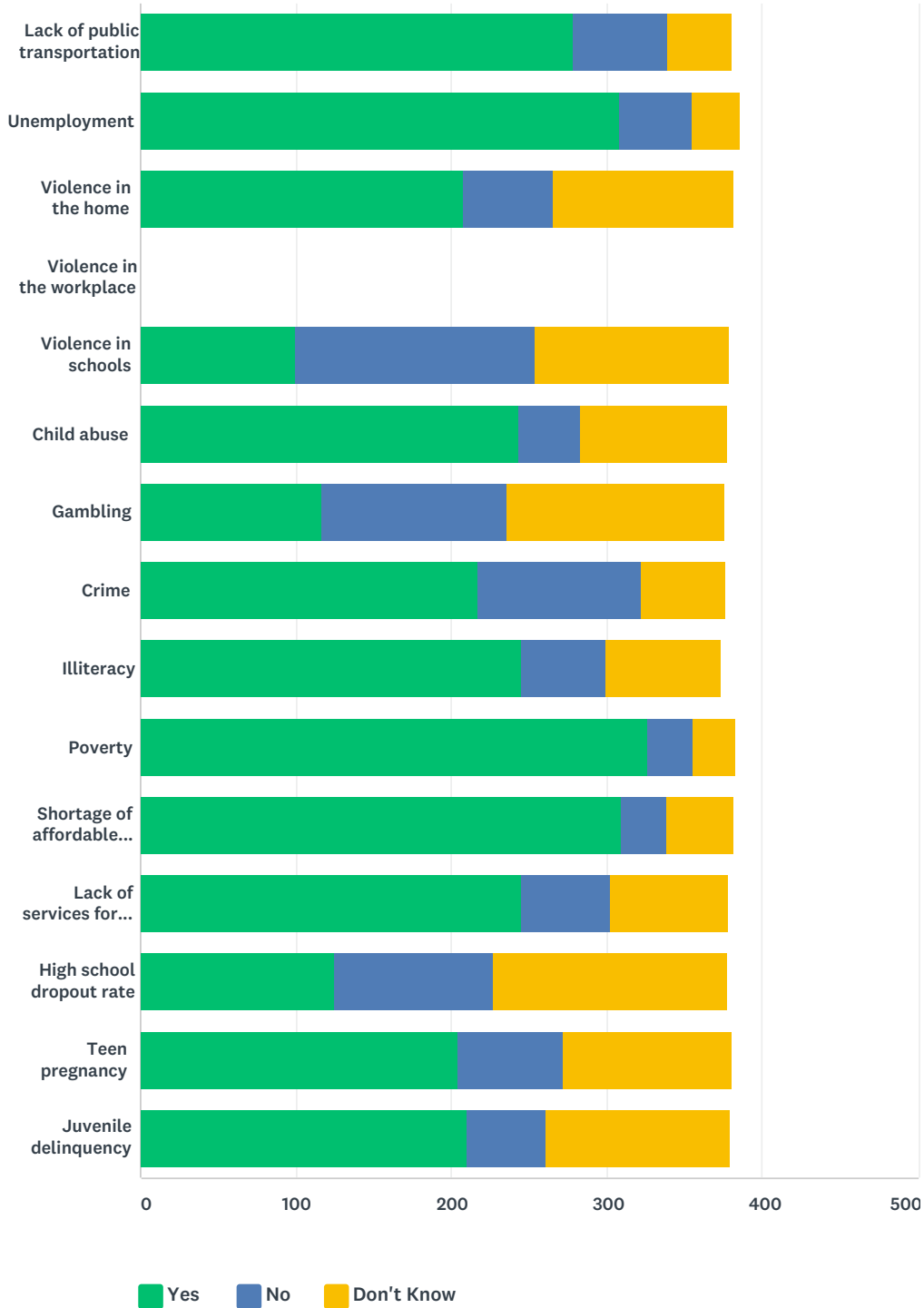


Q5 Please list the top three health problems in this area, naming the most pressing problem first.

diabetic hyperlipidemia alcohol cholesterol Dental diabetes heart problems cardiac
 addicts Diabetes Heart Disease N issues Cancer Heart problems
 weight diab high blood pressure illness Mental Health
 diabetes hypertension addiction htn COPD heart problems
 Heart cancer heart disease Drug health care Cancer
 problems Obesity drug use Diabetes stroke
 drug addiction disease heart disease hypertension
 drug abuse Mental Illness smoking Mental depression
 blood pressure drug abuse obesity DM none high cholesterol
 Obesity Smoking Tobacco Use Lack Poverty cancer heart diabetes
 health type Substance Abuse Diabetes Heart

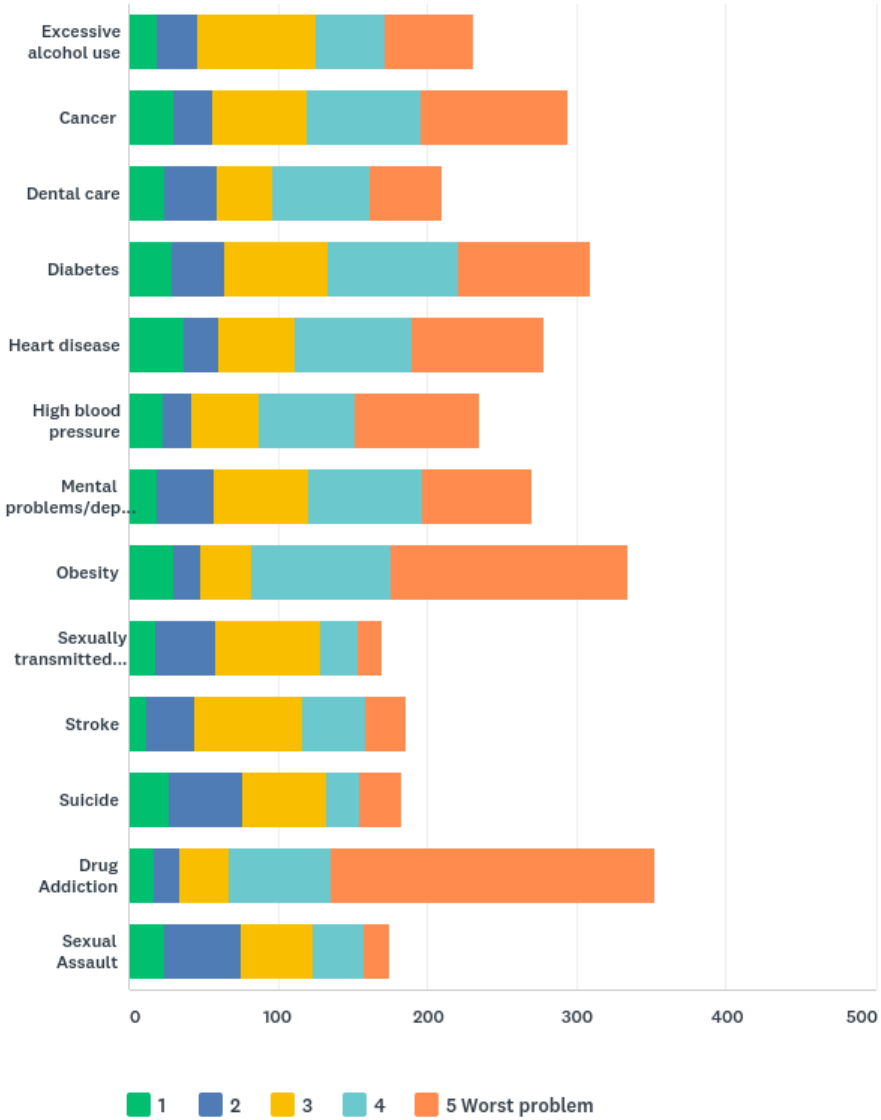
Q6 Please tell whether you believe the topics listed below are problems in this area?

Answered: 389 Skipped: 3

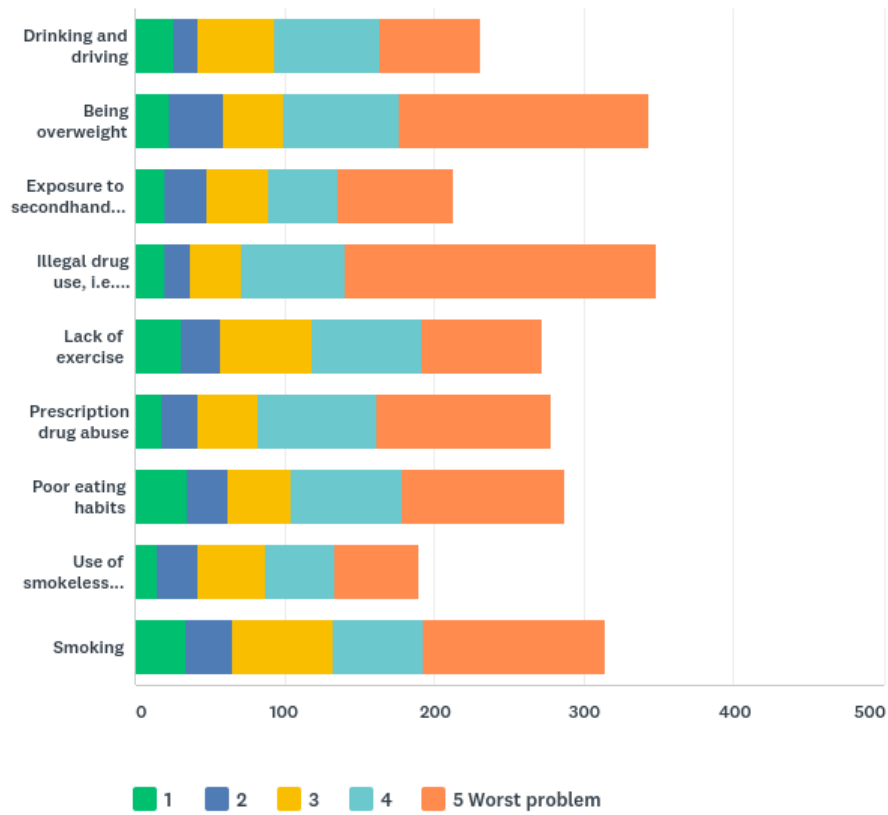


YES	NO	DON'T KNOW	TOTAL RESPONDENTS
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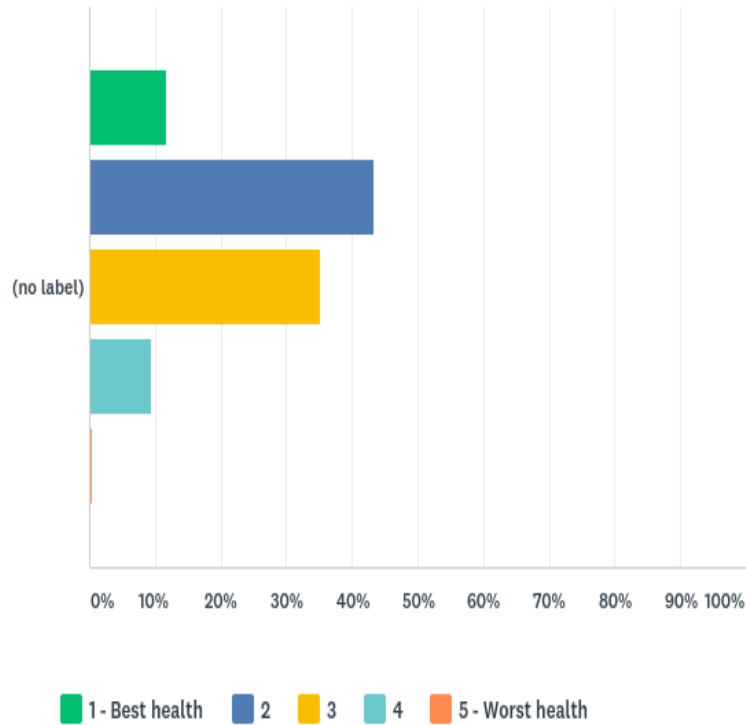
Q7 Below are some common health problems. Please rate on a scale from 1 to 5, with 5 being the worst problem in this area. You should mark only 5 items.



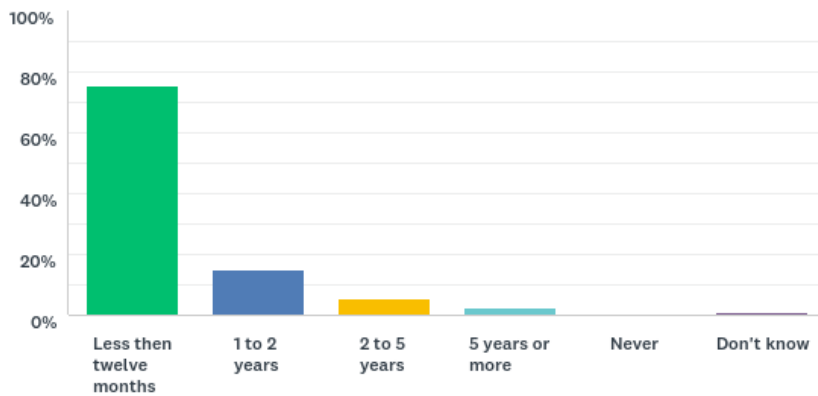
Q8 Below are various types of behavior that could affect one's health. Please rate the behavior on a scale of 1 to 5, with 5 being the biggest problem for this area. You should only have five items marked.



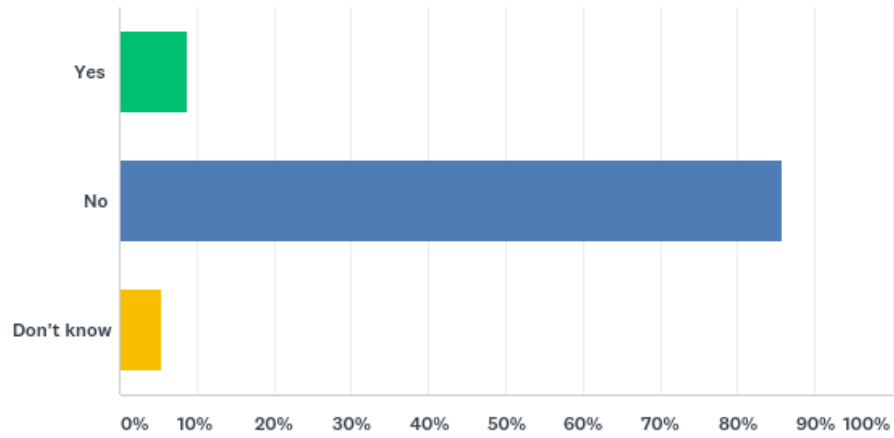
Q9 Rate your health from 1 to 5, with five being the worst health.



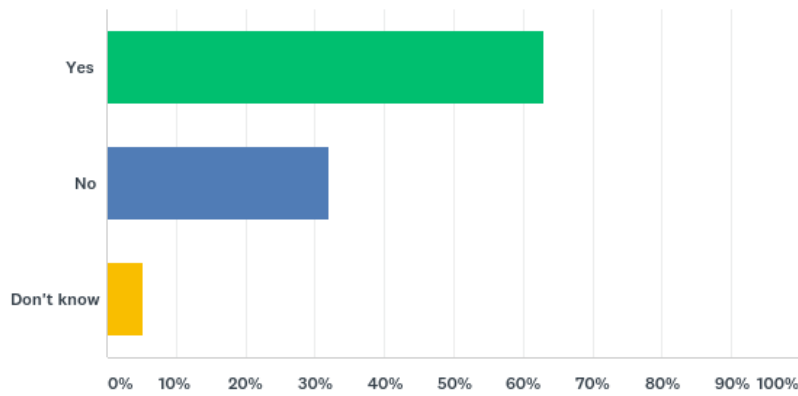
Q10 How long has it been since you visited a doctor for a routine checkup? (A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.)



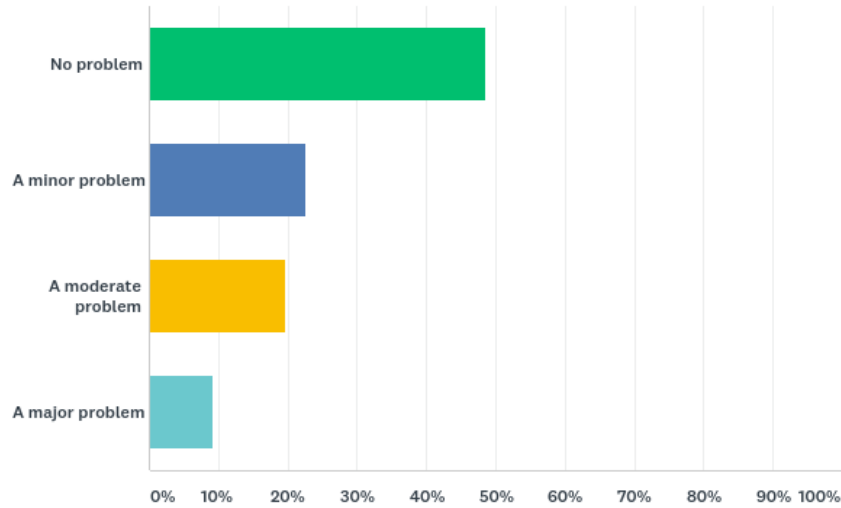
Q11 Do you have healthcare coverage through the Affordable Care Act (Obama Care)?



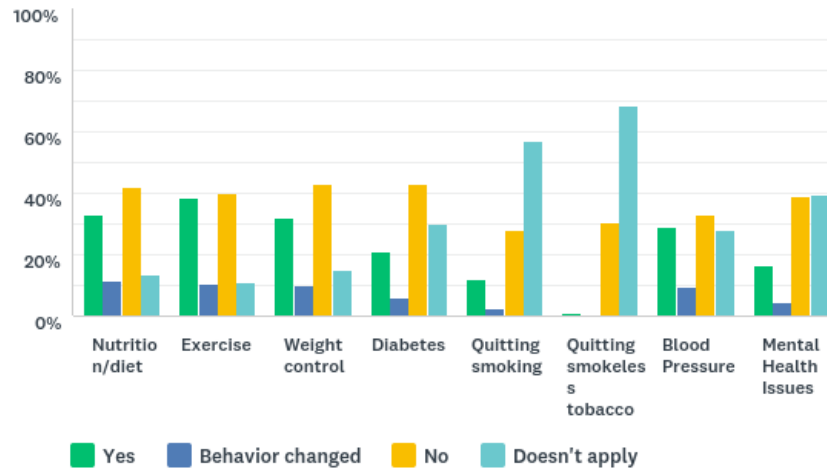
Q12 Do you consider your healthcare coverage "affordable" for your family?



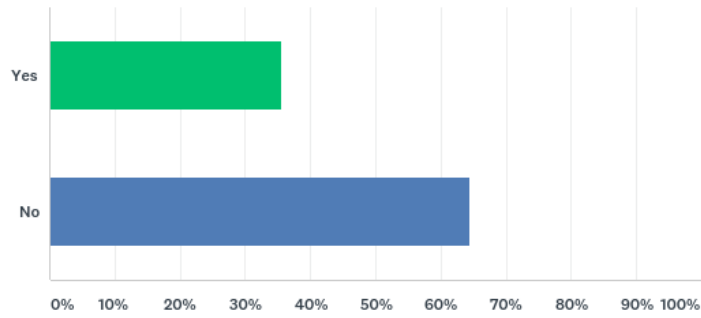
Q13 Because of financial considerations, has getting adequate care for you and your family been:



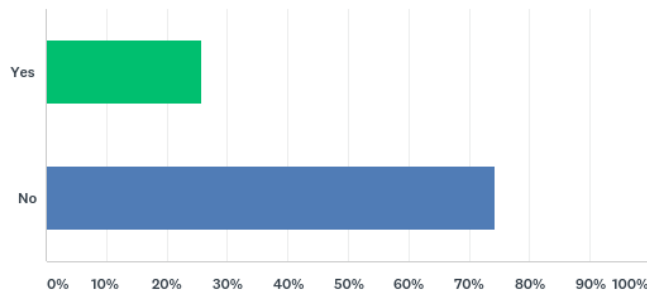
Q14 During the last three years, has your doctor or other health professional talked to you about any of the following? If you mark "yes", please check those in which your doctor's comments actually changed your behavior.



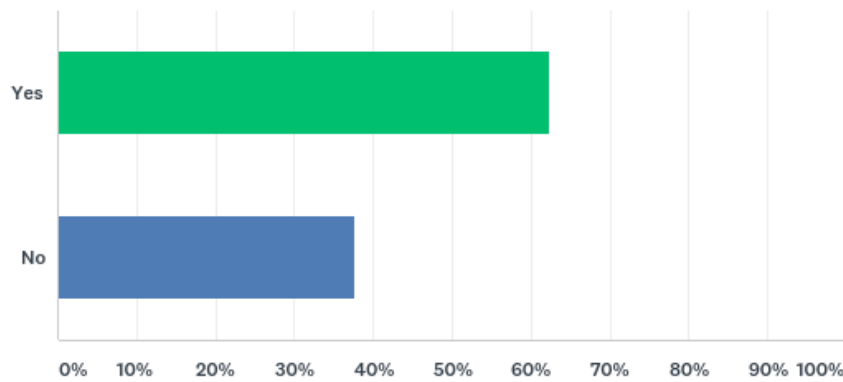
Q15 Do you or any family member suffer from mental health issues?



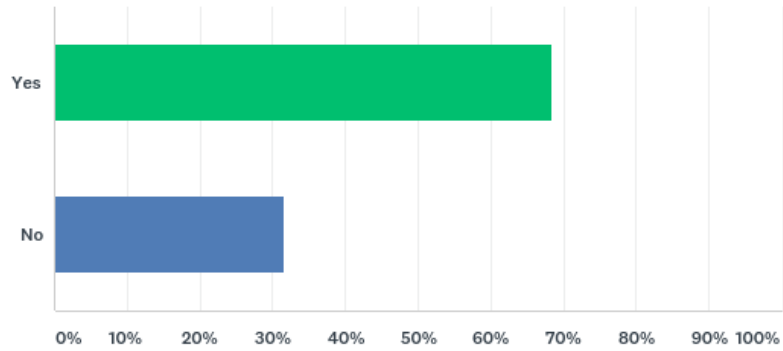
Q16 Do you believe there is adequate help for those who suffer from mental health issues?



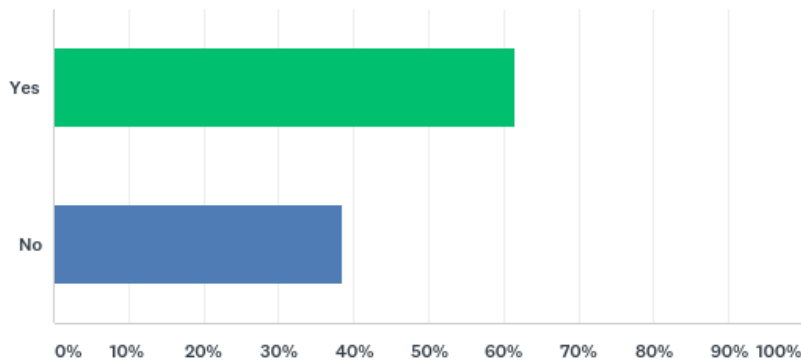
Q17 Do you visit a dentist regularly (at least once a year)?



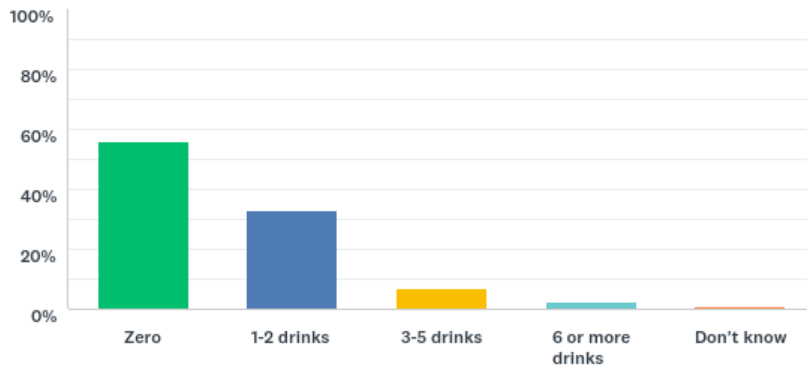
Q18 Do members of your household visit the dentist regularly?



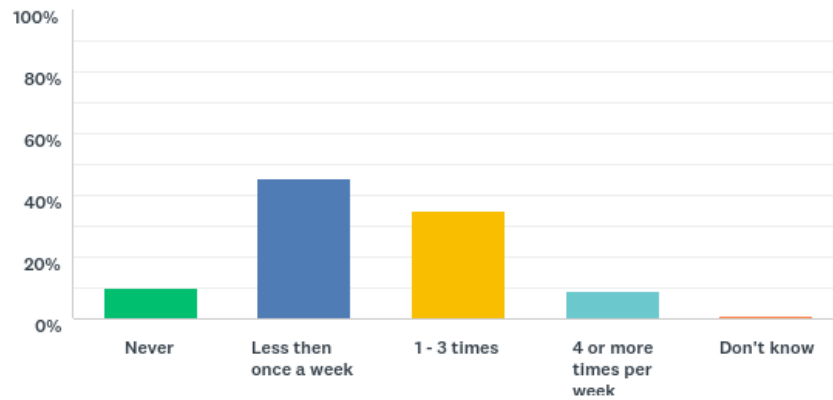
Q19 If you are employed, does your company have a health or wellness program that encourages healthy lifestyle choices?



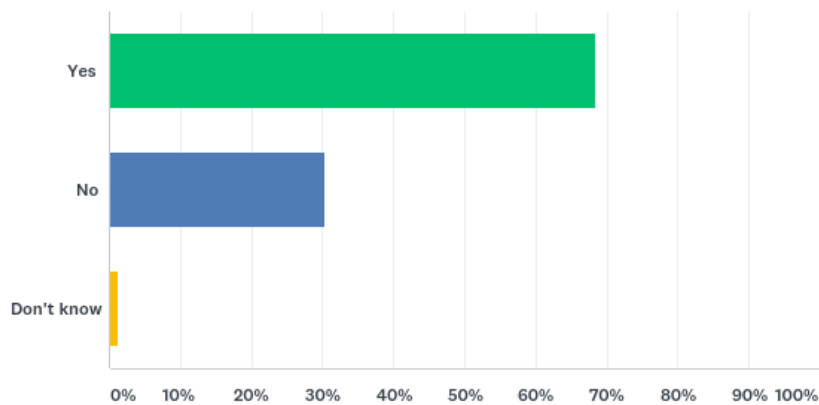
Q20 On an average day, about how many sodas (Coke, Pepsi, etc.) or sweetened drinks such as Gatorade, Red Bull, or Sunny Delight, do you drink? Do not include diet sodas or sugar-free drinks. Please count a 12-oz. as one drink.



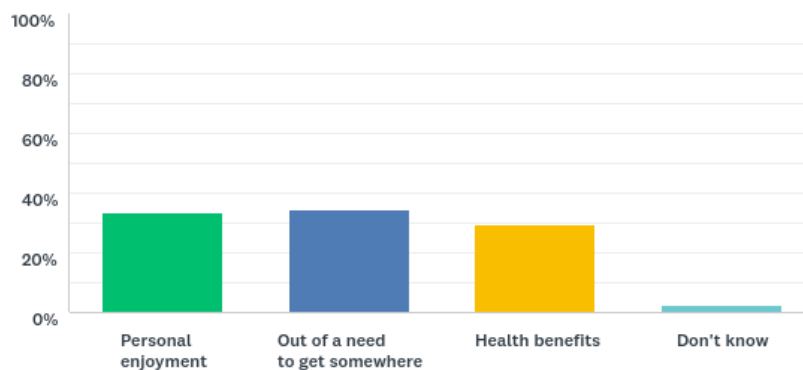
Q21 During an average week, how many times do you eat any food, including meals and snacks, from a fast food restaurant, like McDonalds, Taco Bell, Kentucky Fried Chicken or other similar places?



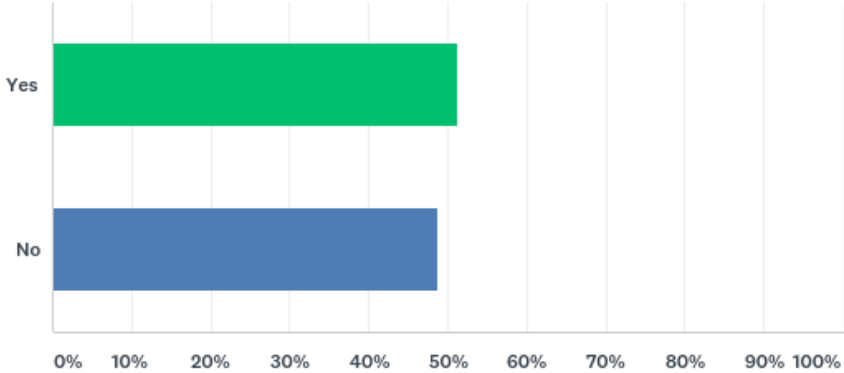
Q22 During the past month, did you participate in any leisure time or recreational activities such as walking, biking, gardening, or golf?



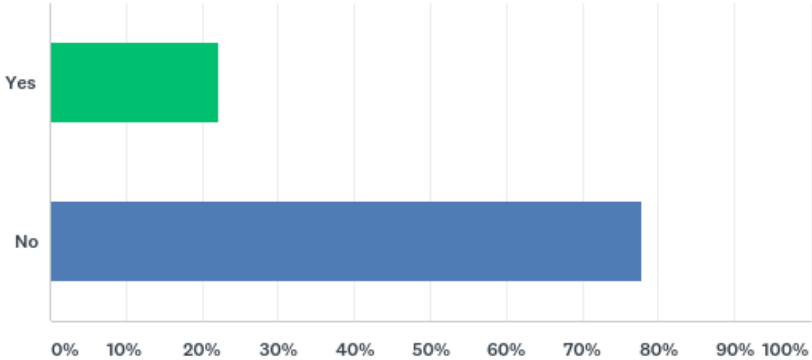
Q23 When you walk, is it normally for:



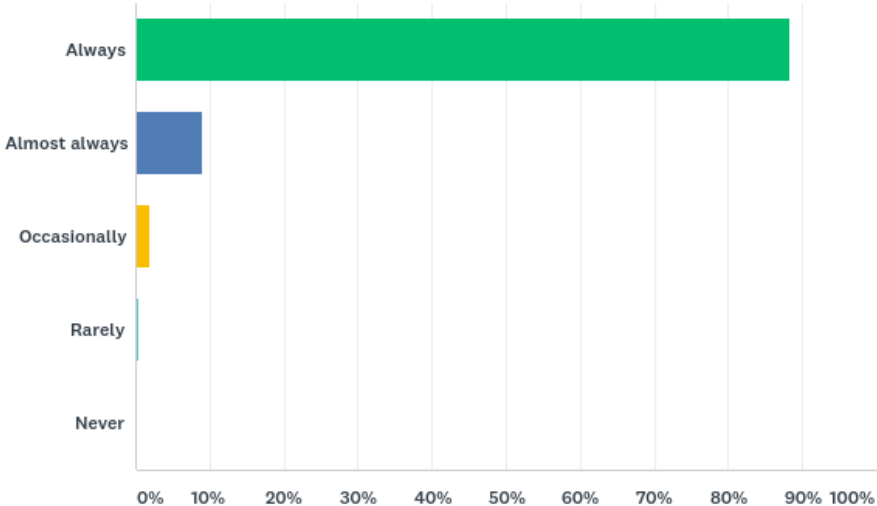
Q24 Have you volunteered in your community in the past 12 months ?



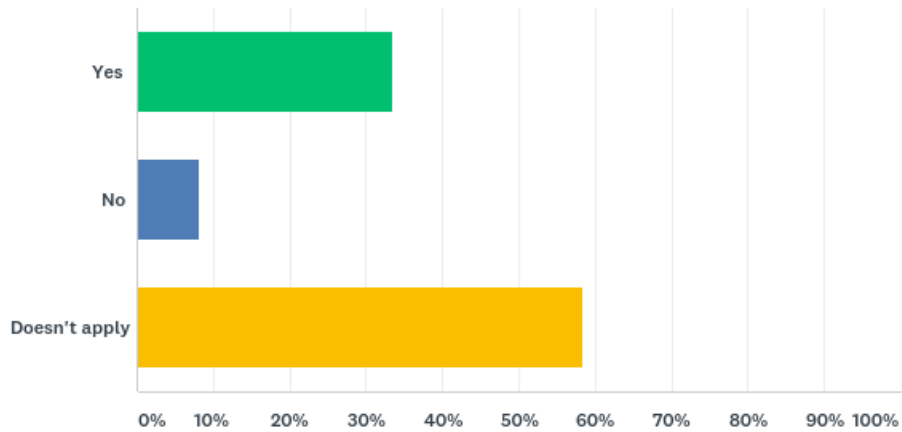
Q25 Do you want to volunteer in your community, but unsure how?



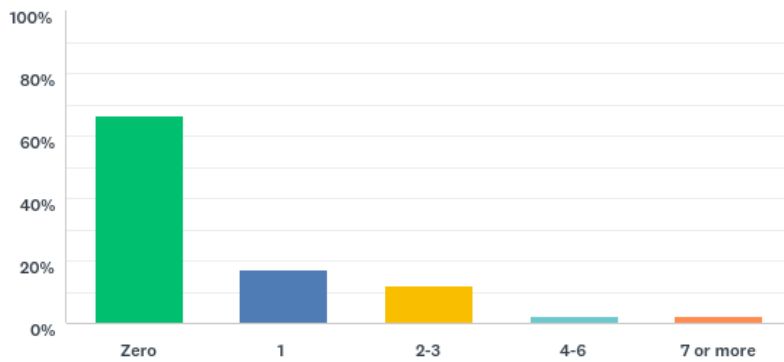
Q26 How often do members of your family use a seatbelt when riding in a car?



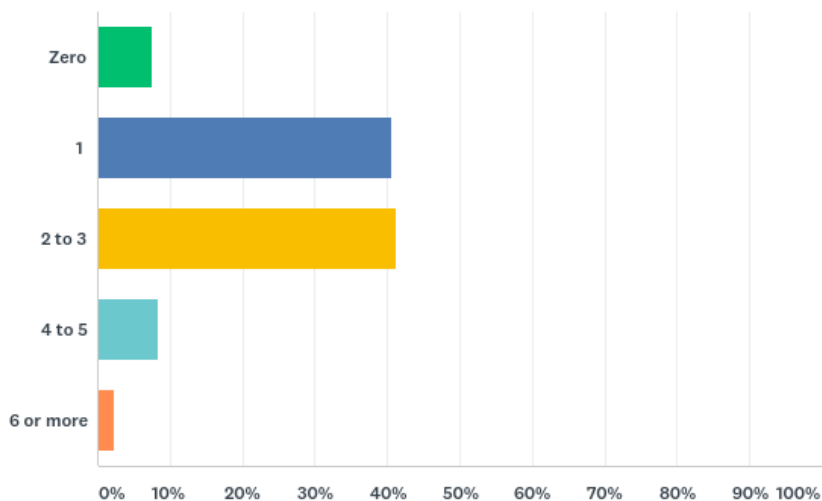
Q27 When riding a bicycle or ATV, do your children wear safety helmets?



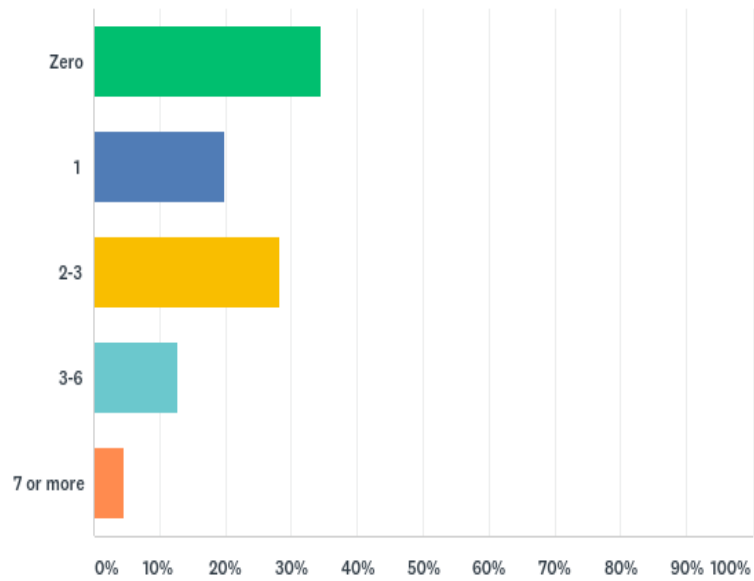
Q28 If you drink, how many drinks of alcoholic beverages do you have in a typical week? (A drink is one beer, or one cocktail)



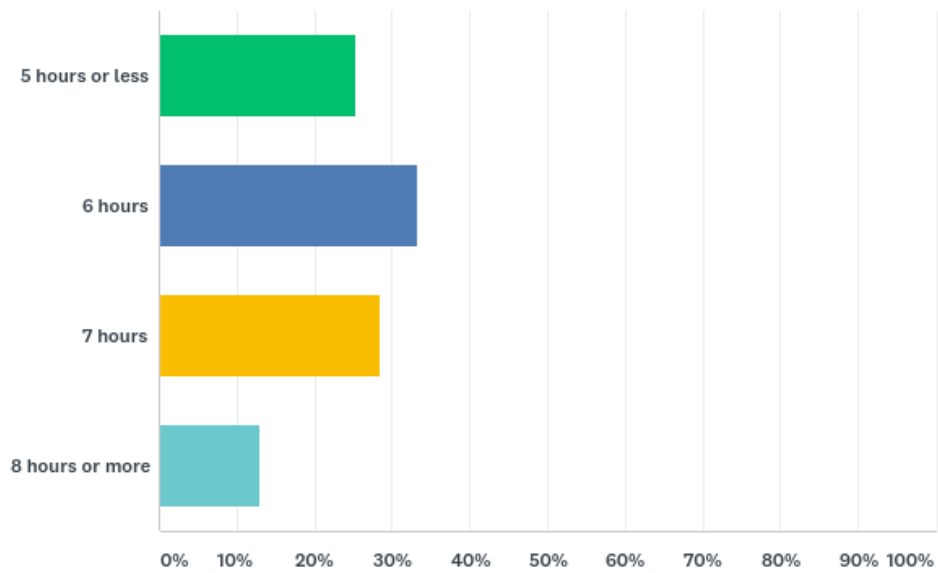
Q29 How many servings of fresh fruit or vegetables do you consume in a day? (a serving is a 1/2 cup)



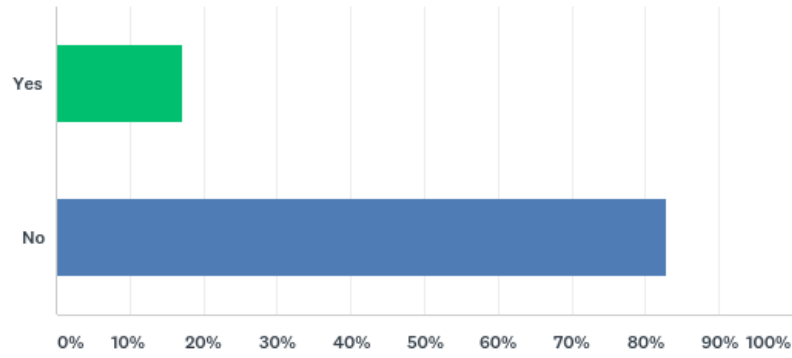
Q30 How many times a week do you engage in at least 30 minutes of strenuous physical activity?



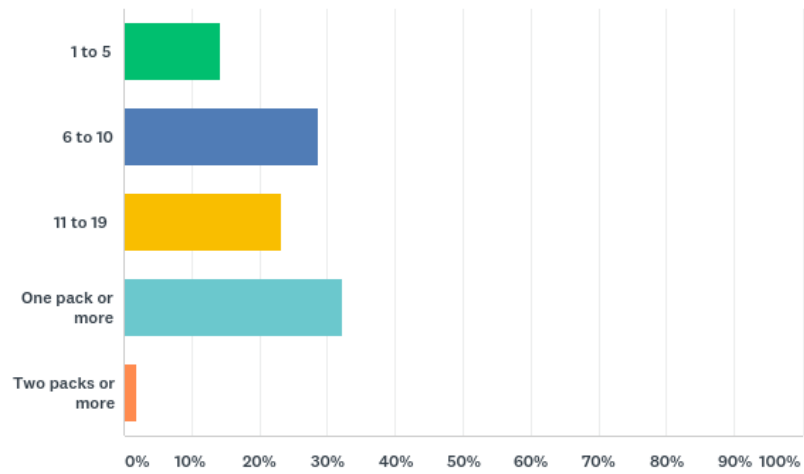
Q31 How many hours of sleep do you get each night?



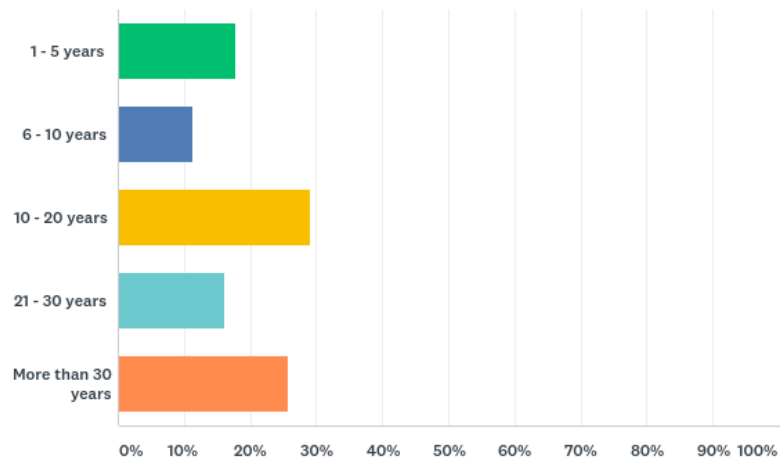
Q32 Do you currently smoke?



Q33 If you still smoke, on average, how many cigarettes do you smoke a day?

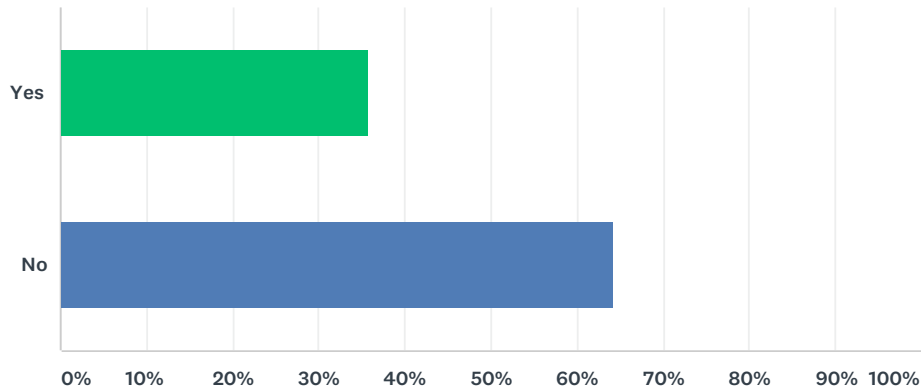


Q34 If you smoke, how many years have you smoked?

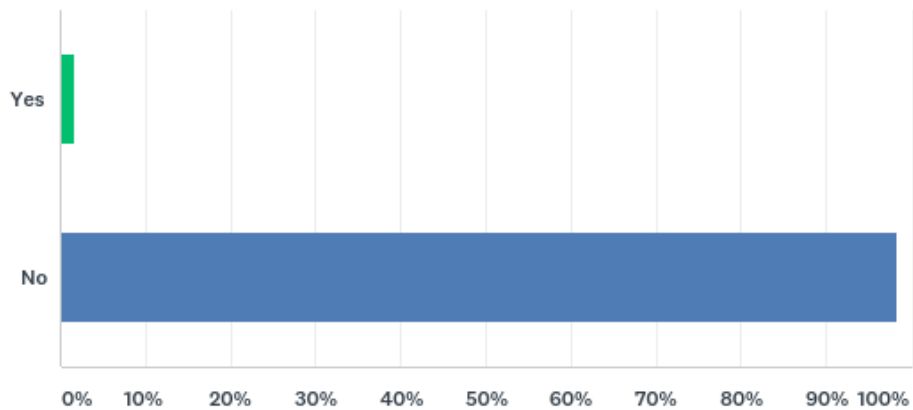


Q35 Have you smoked in the past, but have quit?

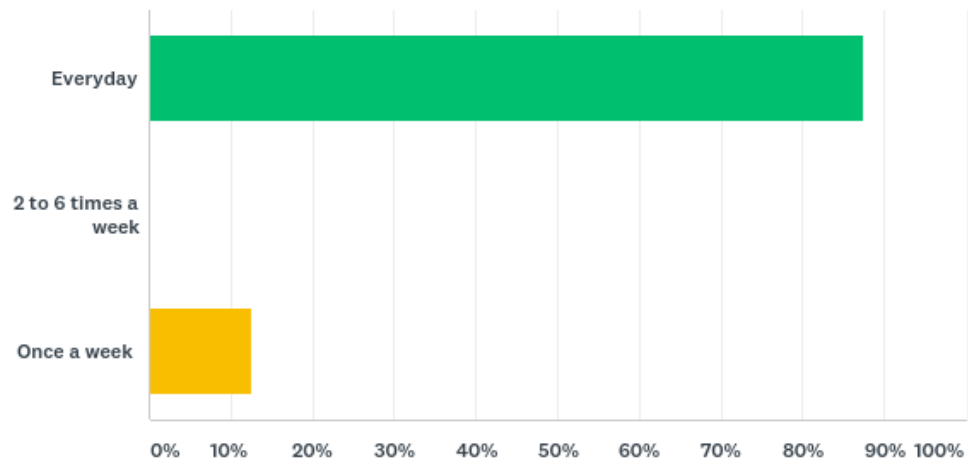
Answered: 302 Skipped: 90



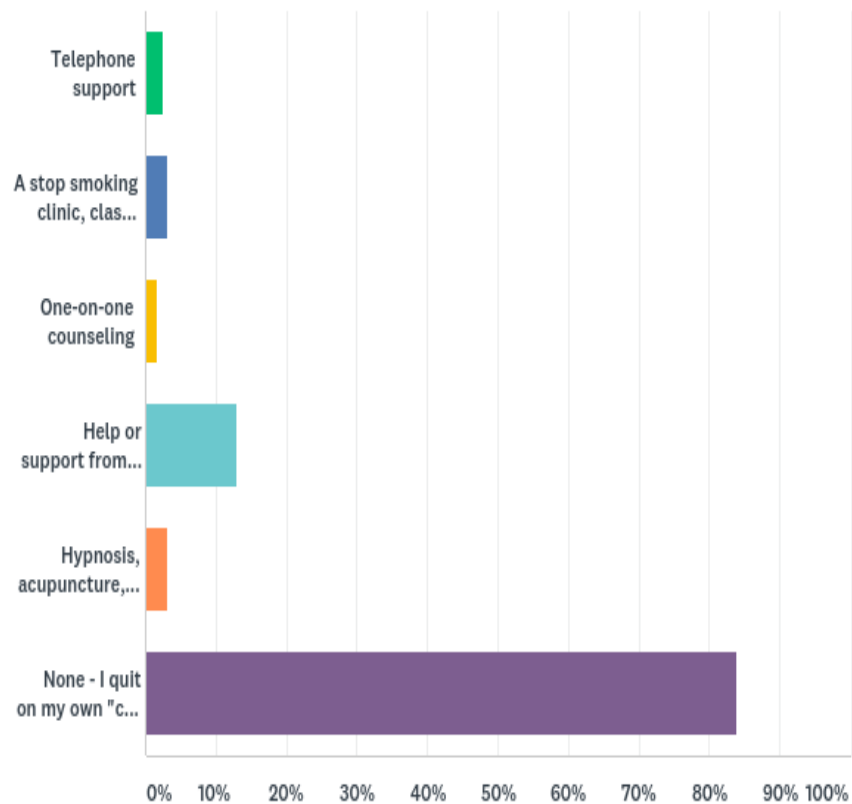
Q36 Do you use smokeless tobacco? If "yes", please answer the next question



Q37 If you use smokeless tobacco, how often do you use it?



Q38 If you indicated that you once smoked, but quit. Thinking back to when you quit, which of the following did you find most helpful? (Check as many as apply)



Phase Three – Focus Group and Implementation for Needs

The information for the Lewis County and Gilmer County Community Assessments began in August 2018 with the implementation of a Survey Monkey survey. Close to 400 residents participated in the survey over seven months. This was the first phase of the Assessment. In April 2019, a staff member from Stonewall Jackson Memorial Hospital coordinated two focus groups. One group met at the Weston Fire Department and the other group met at the Gilmer County Senior Center on successive days. Each of the focus group members were provided the Survey Monkey results and two other national surveys on West Virginia health statistics. This assessment is the third one created by SJMH in cooperation with the Lewis County Health Department. This was the first year that SJMH cooperated with the Gilmer County Health Department in creating an assessment for that County.

2019 Community Assessment Focus Group April 29, 2019 Weston Fire Department

Seven people available for it representing the Lewis County Health Department, Day Report Center, the William R. Sharpe Hospital, city of Weston, and Hospital.

Areas of concern:

Mental Health

1. Drugs
2. Alcohol
3. Rehabilitation availability
4. Smoking
5. Hepatitis

Why are these issues:

1. Starts with drug prescriptions – too many of them
2. Generational drug use...how to break the cycle
3. Can't find enough employees to pass drug tests
4. Easier not to feel the pain by using drugs
5. Self-medication
6. Having a state hospital for 125 years is a problem
7. Family breakdown
8. Lack of supervision for children
9. Social media
10. Alcohol and pot are socially accepted
11. High veteran population – PTSD
12. Newspaper stories
13. Long-term consequences for school system

14. People do not feel they belong
15. A homeless population
16. Illiteracy

Solutions to the issue:

1. Stricter prescribing
2. Using the Vivatrol injection to fight the drub abuse, doesn't work for meth
3. Education in school system
4. Create one portal for all of the resources available for people...EVERYTHING, provide FRN brochures to entire community
5. Need to have a change of cultures
6. Do a round table with BOE members to discuss their issues and goals, strategic plan
7. More laundry services for students
8. More community events

These are the top five concerns. Other concerns were hygiene, vaping, and teen pregnancy.

Health Concerns included:

1. Obesity
2. Cancer
3. COPD

Solutions for these problems

1. More food pantries for area
2. Getting a grant to build more blessing boxes for healthy foods for different communities
3. Do a series of screenings for breast, skin, prostate, lung, and colon cancers and providing HPV vaccines

There is also a lack of resources including:

1. Senior services
2. Dental care
3. Lack of transportation
4. We are a food desert

Implementation Strategies To Tackle The Significant Health Concerns

Three hundred ninety-two individuals answered the question on common health problems. The top five concerns were:

- Drug Abuse (62%)
- Obesity (47.59%)
- Cancer (33.68%)
- Heart Disease (31.77%)
- Diabetes (28.57%)
- High Blood Pressure (35.47%)

Drug addiction is the number one health concern of our residents. The other concerns in order of importance were: obesity, cancer, heart diseases, diabetes, and high blood pressure.

Our next goal is to identify the methods and efforts, which Stonewall Jackson Memorial Hospital and the Lewis County Health Department can strategize to help the community with these issues.

This is a breakdown of the detailed efforts SJMH and the Health Department have developed to promote fitness and combat drug abuse, obesity, diabetes and other preventable illnesses.

Strategies for Combatting Drug Abuse

- The Lewis County Health Department created a Harm Reduction program with support from SJMH.
- SJMH's Emergency Department has adopted the West Virginia Hospital Association Guidelines for Prescribing Opiates.
- Lewis County now has a drug court
- All nursing staff at SJMH is required to complete continuing education on "Drug Diversion Education on Opiates."
- All SJMH pharmacists are required to complete continuing education on "Drug Diversion Education on Opiates" when applying for their licensure.
- All SJMH physicians are registered with the West Virginia Board of Pharmacies.

Strategies for Combatting Obesity/Promoting Physical Activity

- SJMH has an Adult Fitness program, which is conducted Tuesdays and Thursdays in the morning in the Stonewall Jackson Memorial Hospital Cardiac Rehab Department. This is a very low-cost way to modify risk factors.
- SJMH created a county-wide walking group – Pace Yourself Lewis County which has created monthly walk/runs.
- The SJMH Physical Therapy Department provides annual physicals for student athletes in the county at no cost to the child. The Department performed screenings for 152 students this past school year. The physical is comprised of monitoring lung and heart, and detailing a history of injury, or orthopedic problems.
- SJMH has created a safe walking path in the parking lot for the Hospital to promote

physical activity for employees and the community.

- SJMH has worked to refurbish an old playground, created a natural playground, planted an urban orchard, and provided raised gardens for 10 gardeners at the high rise.
- SJMH does not serve pop at activities.
- SJMH provides healthy snacks for a variety of children's events, especially those associated with the Lewis County 4-H program.
- SJMH now provides a healthy salad bar for employees and visitors.
- For five years, the Hospital has attended the Try This Conference in Buckhannon to learn about ways to create healthier choices for our communities, especially our children.

Strategies for Combatting Cancer:

- SJMH has participated in the WV Breast Cancer Awareness Day through promotion, advertising, management, and screenings. This will be the 19th year that SJMH will work on the project in October to provide education and screenings for women.
- SJMH opened an oncology center at the Hospital, which has provided great help for local cancer patients, so that they do not have to travel hours for treatment.
- SJMH provided low cost PSA and no-cost digital exams as part of a prostate cancer screening in September.

Strategies for Combating Cardiac Disease:

- The SJMH Cardiac Department participates in the WV Cardiac Project created by West Virginia University to screen fifth-graders in the County for diabetes, hypertension and hyperlipidemia (cholesterol). This screening identifies the at-risk population and 171 students were enrolled this year.
- The Cardiac Rehab Department goes to Sharpe Hospital, the second largest employer in the county, for a Healthy Heart Fair every February to promote healthy lifestyle choices.
- The Cardiac Department participates with a local college and federal correction center to provide heart disease education.
- The Cardiac Department created a Cardiac Reunion program to encourage health, fitness, and wellness through continued exercise with Cardiac Rehab graduates.

Strategies for Combating Diabetes:

- SJMH conducts three comprehensive blood screenings each year – two in the spring and one in the fall. This is done in cooperation with the Weston Rotary Club.
- The Lewis County Health Department provides very low-cost screenings for the public during office hours. For example, a customer can receive a blood glucose test, blood pressure, weight, and height screening for free. The nurse director can provide nutritional education for customers.
- SJMH provides free annual blood screenings for the SJMH employees.

Strategies for Combatting High Blood Pressure:

- SJMH has a health fair for the public and provides glucose, blood sugar, blood pressure, and hearing screenings, as well as information from vendors for breast/cervical cancer, smoking cessation, and other cancers several times a year.

Strategies to Promote Healthy Choices:

- SJMH has taken a very proactive approach to the recent creation of a Farmers Market in the Weston Downtown area.
- The SJMH Marketing Department, in cooperation with the SJMH ED, conducts a Children's Safety Fair in October. There are a number of screenings available for children.
- SJMH has participated in a 340B prescription program for several years. Patients who are seen by SJMH physicians may participate in the low-cost prescription plan and save as much as 60% on their medications.

Collaborators on these screenings and strategies:

- American Cancer Society
 - Central West Virginia Community Action
 - Center for Organ Recovery and Education (CORE)
 - City of Weston, WV
 - Comprehensive Pharmacy Services
 - Family Resource Network
 - Lewis County Board of Education
 - Partners in Health, Charleston, WV
 - Saint Patrick School/Church
-
- Sharpe Hospital
 - Stonewall Resort
 - The HUB
 - Try This Conference
 - Weston Rotary Club
 - West Virginia Department of Rehabilitation
 - West Virginia University Extension Service

Distribution for Community Health Assessment Results:

The Stonewall Jackson Memorial Hospital/Lewis County Health Department Community Health Assessment was distributed to all employees of both organizations via email. The publication was also marketed in the local newspaper, on radio, and through Facebook. The publication was made available in physician offices. The publication was posted on the Stonewall Jackson Memorial Hospital website – www.stonewalljacksonhospital.com and the Health Department Facebook page. The results were also printed in a booklet and made available at SJMH.