Greater Prince William Community Health Improvement Plan

2020 - 2024 •



Brought to you by
COMMUNITY HEALTHCARE COALITION OF GREATER PRINCE WILLIAM

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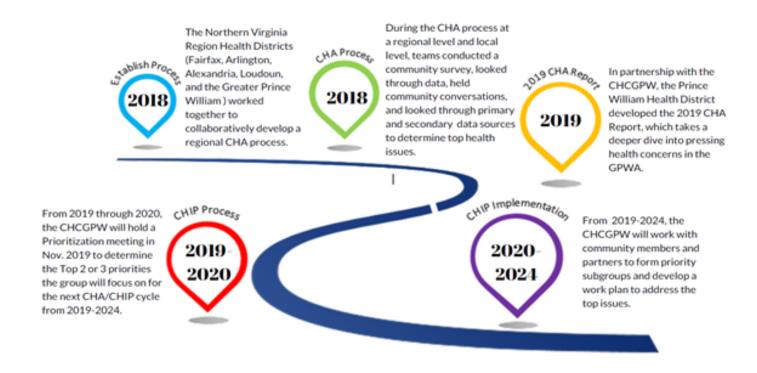


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Introduction

In 2019, the Community Health Care Coalition (CHCGPW) used the framework of Mobilizing for Action through Planning and Partnerships (MAPP) to collectively develop a picture of the health of our community by utilizing methods to collect and analyze both qualitative and quantitative data. Using this framework, the community prioritized public health issues so that as a community under the coalition's leadership, can develop and implement strategies unique to our community to address these priority issues. The coalition will lead this effort using an equity lens in an effort to achieve health equity. This comprehensive community focused process provided the framework to go from the Community Health Assessment (CHA) to developing the Community Health Improvement Plan (CHIP).

The CHCGPW used assessments data form the MAPP process to identify the public health community concerns that will be addressed through a multisector involvement to implement strategies to affect change. The three priorities: Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing.



A Message from the CHCGPW

In 2019 through early 2020, the Community Health Care Coalition of Greater Prince William (CHCGPW) engaged the community and lead the 2019 to 2024 Community Health Assessment (CHA) and planning for the Community Health Improvement Plan (CHIP). The coalition used the Mobilizing for Action through Planning and Partnerships (MAPP) to develop the CHA and begin to develop the CHIP. This process has several phases:

- ·Partnership development
- ·Visioning
- ·Four assessments using qualitative, and quantitative methods to understandthe health of the community
- ·Identify public health issues
- ·Formulate goals and strategies

The CHCGPW is made up of community healthcare entities, foundations, educational entities, community members, non-profits, health insurance companies, community leaders, chamber, faithbased organizations, and members of governmental entities.

Vision: CHCGPW supports health equity, where all that live in the GPWA are thriving and have the opportunity to be healthy.

Mission: The Community Healthcare Coalition of Greater Prince William ("CHCGPW" or "the General Members") will work collectively to ensure all have the opportunity for health and wellbeing, utilizing limited resources most efficiently and effectively. We understand that we all share the responsibility of creating a healthy community where all can have an equal opportunity for health and well-being.

The goal of the CHCGPW is to improve the health of the residents of the Greater Prince William Area and jurisdictions served by the participating entities.

The purpose of the CHCGPW is to bring together a group of multidisciplinary agencies, entities, and stakeholders to identify and prioritize community health issues. This will be accomplished through periodically conducting community health needs assessments, and developing, implementing, and evaluating community health improvement plans. The Coalition will also be responsible for identifying ways to utilize limited resources efficiently and effectively to address these identified community public health issues of concern.

The CHIP focuses on three identified priority areas to improve the health and well-being for all those in the Greater Prince William Area. Many factors impact health besides access to quality healthcare. Our community prioritized Education, Neighborhood and Built Environment, and Communications and Advocacy.

We hope the community will join the coalition in our journey as we address the public health issues that impact the health of our community. We are so proud of the community's understanding that there is more to health than healthcare.

CHCGPW

Acknowledgements

The CHCGPW would like to acknowledge the participation of other community members, agencies, non-profits that are dedicated to making the Greater Prince William Area a healthier place to live, work and play.

Prince William Health District

Alison Ansher, MD, MPH,

Sarah Fenno

Joya Patel

All PWHD employees and Medical Reserve Corps volunteers who participated in our surveying efforts and community events



Community Members & Partners

Canek Aguirre, Anthem
Lee Hopkins, CASA de Virginia
Tammy Rowland, Freedom Center
Rebecca Sutter, George Mason University
Judy Merring, Community Member
Salwa Ahmad, Community Member
Mary Catherine Hunnicutt, Greater Prince
William Community Health Center
Jose Pedro Guallar, HOLA Prince William
Rachel Lynch, MPH, Inova
Brittany Giles Cantrell, Kaiser Permanente
Pat Victorson, NAMI Prince William
McIntyre-Hall, Ondrea, Northern Virginia
Family Service

Kim Golanski, Novant UVA Health System Erin Matthew Thomas, Potomac Health Foundation

Susie Lee, Potomac Health Foundation
Sally Wood, PWC Parks and Recreation
Seth Hendler-Voss, PWC Parks and Recreation
Heather Martinsen, PWC Community Services
LeNelle Mozell, PWC Community Services
Angie Mendez, PWC Community Services
Elijah Johnson, PWC Government
Mark Meye, Greater Prince William Community
Health Center

Prioritization

More than 60 community members gathered to review the findings of the Greater Prince William Area Community Health Assessment (CHA) and reviewed qualitative and quantitative data pertaining to the ten top public health issues identified by the community. The participants broke up into smaller groups based upon the priority they felt was most important, brainstormed and developed a presentation to convince the rest of the community members that their public health issue needed to be addressed. Part of their presentation had to address the feasibility, potential impact, and who would benefit. Participants learned about these top ten health issues, and the local conditions and disparities that impacts each one. Each participant cast votes to select the top priority areas. The three priority areas chosen were Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing. Feasibility requires other interested community partners collaborating by committing time, resources and expertise to help move the needle in a positive direction. Impact is determined by who will be positively impacted, and does it advance equity.

CHIP Priorities

Educational Opportunities



 Neighborhood & Built Environment

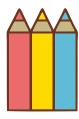


Communications
 & Marketing



GREATER PRINCE WILLIAM AREA

Educational Opportunies







Why Education Matters to Health:

People who have more education live longer and healthier lives than those who have fewer years of schooling. Levels of education have a direct impact on income, skills, and opportunities that people have to lead healthier lives in their communities. Measures include levels of schooling, on-time graduation rates, and enrollment in post-secondary education programs.

The home environment, socioeconomic status, and other factors can create stress, cause illness, and deprive individuals and families of resources for success and optimal health. For example, access to high-quality early childhood programs has been linked to school readiness, achievement, success, and broader well-being over a person's lifetime.

Having access to education and vocational training increases the likelihood of employment that provides health-promoting benefits such as insurance, paid leave, and retirement as opposed to high-risk occupations with fewer benefits. A person's income can affect their ability to purchase healthy foods, exercise regularly, establish social networks, and pay for health services, transportation, and safe housing which directly impacts access to resources for good health and well-being. Additionally, people with more education are more likely to understand their health needs and engage in behaviors to maintain optimal health.

Quick Stats in Greater Prince William Area:

Educational opportunities ranked 4th as a quality of life concern for survey respondents. The Forces of Change discussion identified the lack of alternative secondary education and other educational opportunities in our community.

Hispanic/Latino students had lower on-time graduation rates compared to their white counterparts, as well as a lower percentage receiving an advanced studies diploma (*Virginia Department of Education*, 2017-2018 estimates).

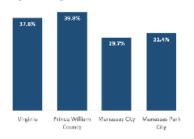
The percentage of 3rd grade students proficient in math and reading are below the state averages in Manassas City and Manassas Park City (*Virginia Department of Education, 2017-2018 estimates*). The percentage of 8th grade students proficient in math and reading are below in the state averages in Manassas City (*Virginia Department of Education, 2017-2018 estimates*).

Educational attainment varies based on race/ethnicity. For example, in Prince William County the percent of individuals with a high school degree or higher in whites was 95.8%, blacks was 93.7%, and Hispanics/Latinos was 66.1%. (*U.S. Census Bureau, American Community Survey, 2013–2017 5-year estimates*).

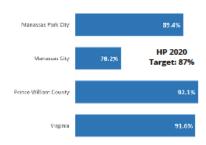
Manassas City and Manassas Park City show an increase in the student-to-teacher ratio in comparison to prior years (*National Center for Education Statistics*, 2016-2017 estimates).

Educational Measures in Greater Prince William Area:

Percent Of Individuals with a Bachelor's Degree or Higher



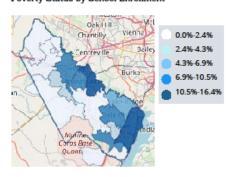
On-time Graduation



4-Year-Olds Served by the Virginia Preschool Initiative



Poverty Status by School Enrollment



Resources:

- Virginia Department of Education: http://www.doe.virginia.gov/statistics_reports/index.shtml
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
 Annie E. Casey Foundation, Kids Count Data Center: https://datacenter.kidscount.org/
- Voices for Virginia's Children: https://vakids.org/



GREATER PRINCE WILLIAM AREA

Neighborhood & Built Environment





Why Neighborhood & Built Environment Matters to Health:

This category describes the conditions where community members live, work, learn, and play. Measures include rates of racial segregation, access to grocery stores, availability of public transit, and cost and quality of housing.

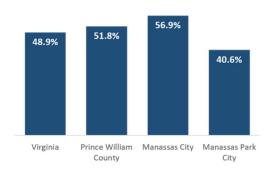
Community conditions can create either opportunities or barriers to living a healthy life. Clean, safe neighborhoods with ample green space, complete sidewalks, and low crime rates support physical activity. Alternately, a high density of fast-food restaurants, easy access to alcohol and tobacco products, and a lack of public transportation can encourage unhealthy habits. In addition, an individual's health is greatly shaped by their housing quality, cost, stability, and safety. For example, poor quality housing with issues such as lead paint, mold, and pests can trigger asthma flare-ups, particularly in children. The high cost of housing is also a major issue in Northern Virginia, and individuals or families who pay substantially higher portions of their income on housing are forced to make difficult decisions on healthy lifestyle choices and medical care.

Quick Stats in Greater Prince William Area:

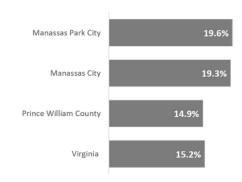
- Housing that is affordable was the number one quality of life concern for survey respondents across all demographics.
- The Forces of Change discussion highlighted the effect of housing on health, specifically focusing on the need for access to affordable and safe housing, senior housing, workforce housing, and homeless services.
- In Prince William County, 51.8% of renters spend 30% or more of household income on rent, 56.9% in Manassas City, and 40.6% in Manassas Park City (U.S. Census Bureau, American Community Survey, 2013-2017 5-year estimates).
- In the Prince William Health District, 32.2% of individuals indicated they were worried or stressed about having enough money for their rent/mortgage in the past 12 months (*Virginia Behavioral Risk Factor Surveillance Survey*, 2014 estimates).
- The Northern Virginia region is known for long commutes to work, with a mean commute time of 33.2 minutes. In Prince William County, the mean commute time to work is 39.1 minutes, 34.1 minutes in Manassas City, and 37.3 minutes in Manassas Park City (U.S. Census Bureau, American Community Survey, 2013-2017 5-year estimates).
- The Greater Prince William Area rates highly in the Food Environment Index, which combines two measures of food access: the percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year. However, there are pockets in the community (such as children and people 65+ years old) that have low access to a grocery store, especially in Manassas Park City (U.S. Department of Agriculture, Food Environment Atlas, 2015 estimates).

Neighborhood & Built Environment Measures in Greater Prince William Area:

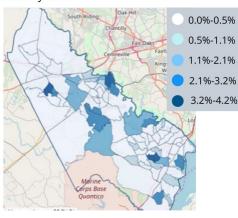
Renters Spending 30% or More of Household Income on Rent



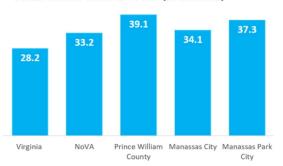
Severe Housing Problems



Households with No Car and Low Access to a Grocery Store



Mean Travel Time to Work (in minutes)



Solo Drivers with Long Commutes

Virginia: 39.4%

Prince William County: 62.7%

Manassas City: 55.3% Manassas Park City: 59.0%



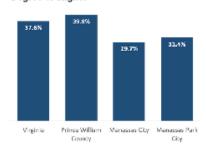
Resources:

- Virginia Department of Housing and Development: https://www.hud.gov/states/virginia
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
- County Health Rankings: https://www.countyhealthrankings.org/
- Feeding America: https://www.feedingamerica.org/
- VA BRFSS: http://www.vdh.virginia.gov/brfss/data/
- U.S. EPA: https://www.epa.gov/
- Urban Institute: https://www.urban.org/

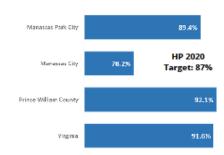
Please reach out to Sarah Fenno for any questions or data needs: Sarah.Fenno@vdh.virginia.gov

Educational Measures in Greater Prince William Area:

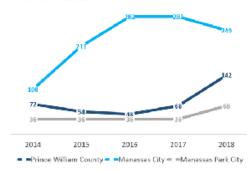
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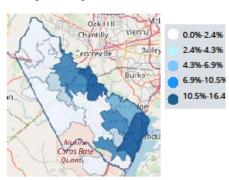
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- Annie E. Casey Foundation, Kids Count Data Center: https://datacenter.kidscount.org/
- Voices for Virginia's Children: https://vakids.org/



Aging Measures in Greater Prince William Area:

AARP LIVABILITY INDEX

This score rates the overall livability of a selected neighborhood, city, county, or state on a scale from 0 to 100. It is based on the average score of seven livability categories—housing, neighborhood, transportation, environment, health, engagement, and opportunity—which also range from 0 to 100. We score communities by comparing them to one another, so the average community gets a score of 50, while above-average communities score higher and below-average communities score lower.

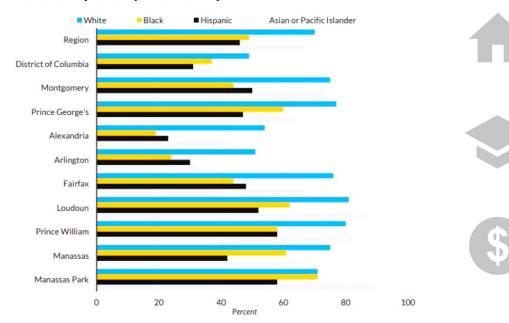
Prince William County Manassas City Manassas Park City TOTAL INDEX SCORE TOTAL INDEX SCORE TOTAL INDEX SCORE HOUSING HOUSING 50 Affordability and access Affordability and access Affordability and access NEIGHBORHOOD **NEIGHBORHOOD NEIGHBORHOOD** Access to life, work, and play Access to life, work, and play Access to life, work, and play TRANSPORTATION TRANSPORTATION TRANSPORTATION Safe and convenient options Safe and convenient options Safe and conve **ENVIRONMENT** ENVIRONMENT **ENVIRONMENT** Clean air and water Clean air and water Clean air and water HEALTH HEALTH HEALTH Prevention, access and quality Prevention, access and quality Prevention, access and quality **ENGAGEMENT ENGAGEMENT ENGAGEMENT** Civic and social involvement Civic and social involvement Civic and social involvement **OPPORTUNITY** OPPORTUNITY **OPPORTUNITY** Inclusion and possibilities Inclusion and possibilities Inclusion and possibilities

Dig deeper into the data! Check out the AARP Livability Index and explore what makes a community livable!

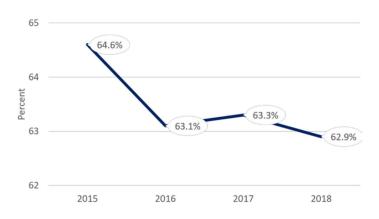
https://livabilityindex.aarp.org/

SDoH Measures in Greater Prince William Area:

Homeownership Rates by Race/Ethnicity



Homeownership Rates for the DC-VA-MD-WV Statistical Area: 2015 to 2018



Prince William County

74% owner-occupied units **\$394,800** median value of owner-occupied housing units

Manassas City

65% owner-occupied units **\$313,100** median value of owner-occupied housing units

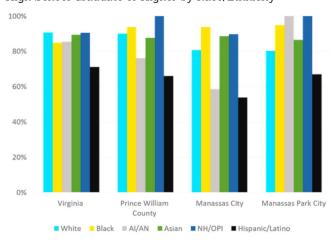
Manassas Park City

66% owner-occupied units **\$281,500** median value of owner-occupied housing units



SDoH Measures in Greater Prince William Area:

High School Graduate or Higher by Race/Ethnicity



Below Poverty Level by Race/Ethnicity



Note: For some race categories, the value was 0.0%.

Resources:

- Urban Institute: https://www.urban.org/
- U.S. Census Bureau, American FactFinder: https://factfinder.census.gov/faces/nav/jsf/pages/index.xhtml
- Census Reporter: censusreporter.org
- BeHealthyBeHappy Dashboard: http://www.behealthybehappyprincewilliam.com/
- County Health Rankings: https://www.countyhealthrankings.org/

Please reach out to Sarah Fenno for any questions or data needs: Sarah.Fenno@vdh.virginia.gov



Looking for more data?

For more information about demographics in Greater Prince William Area, please refer to **Appendix B** of the Community Health Assessment.

The complete report can be found on our **data dashboard**!
BeHealthyBeHappyPrinceWilliam.com







Vision:

The Community Healthcare Coalition of Greater Prince William (CHCGPW) supports health equity, where all that live in the Greater Prince William Area are thriving and have the opportunity to be healthy.

Mission:

CHCGPW will work collectively to ensure all have the opportunity for health and well-being, utilizing limited resources most efficiently and effectively. We understand that we all share the responsibility of creating a healthy community where all can have an equal opportunity for health and well-being.

Goals and Purpose:

The goal of the CHCGPW is to collectively improve the health of the residents of the Greater Prince William Area and jurisdictions served by the participating entities.

The purpose of the CHCGPW is to bring together a group of multidisciplinary agencies, entities, and stakeholders to identify and prioritize community health issues. This will be accomplished through periodically conducting community health needs assessments, and developing, implementing, and evaluating community health improvement plans. The Coalition will also be responsible for identifying ways to utilize limited resources efficiently and effectively to address these identified community public health issues of concern.

Finding a Brand for Our Coalition:

- · Deliver our message clearly and effectively
- · Confirm our credibility as a coalition in the community
- · Connect with our intended audiences
- Motivate our intended audiences
- · Create an audience following and loyalty

We need an agreed upon look and personality, font, colors, and frequency and methods communication.

Core Communications:

We need consistent, timely, and relevant communications about our work and strategies for impact in the community.

- Who will be responsible for this?
- · What platforms do we want to use?
- Frequency of communications?
- What do we want the content to look like?
- What is the purpose of the communications?
- How will communications get approved before distribution?

Communication Channels

- Electronic communications (emails, newsletters)
- Social media (Facebook, Twitter, etc)
- Online webinars
- In-person meetings, events, conferences
- Press or media coverage
- Paid media (advertisements, etc)
- · Other methods

Outreach in the Community:

Community Outreach Plan

- Define goals and objectives
- Identify your targets
- Create your message
- Package your message
- · Distribute your message
- Evaluate your plan

How will we measure our impact throughout all this?

What is Our Role in Advocacy:

- What is our plan for advocacy?
- How will we chose what issues we support?
- How will we sustain our efforts?
- How will we measure our impact?
- Etc.

What is Next?

The Community Health Improvement Plan (CHIP) is a living document and changes will be made to this document based on updates that occur during the implementation of the chosen public health initiatives over the next five years. The chosen priorities, Educational Opportunities, Neighborhood and Built Environment, and Communications and Marketing. The development of strategies, goals, objectives, and action steps of each priority will take into consideration, feasibility, impact and equity.



List of Appendices

Appendix A: CHCGPW CHIP Timeline

Appendix B: Going from CHA to CHIP

Highlights from the 2019 Community Health Assessment

Appendix C: CHIP Prioritization Activity

Appendix D: Heading from the CHA to the CHIP January 2020

Appendix E: CHIP Workgroup ToolKit

<u>Appendix F: CHIP Priorities Alignment with Other Plans throughout Greater</u>
<u>Prince William Area and the State</u>

All appendices can be found at **BeHealthyBeHappyPrinceWilliam.com**

