

2025 – 2029 Hanover County Community Health Improvement Plan

Adopted: June 18, 2025 | Last Revised: March 25, 2026



Table of Contents

Message from the Health Director	3
Executive Summary	4
Acknowledgements	5
About Hanover County	7
What is a CHIP?	8
Implementation Period	8
The Approach	9
Selecting Health Priorities	9
Results	9
Action Plans	10
Health Priority 1: Healthy Eating and Food Security	11
Health Priority 2: Youth Mental Health	25
Health Priority 3: Affordable, Safe, and Available Housing	32
Alignment: VDH and Healthy People 2030	37
Your Role	38
References	39
Glossary	40
Appendices	42

Message from the Health Director

The Chickahominy Health District and the Healthy Hanover Coalition are proud to present the 2025-2029 Hanover County Community Health Improvement Plan (CHIP), a strategic roadmap designed to guide efforts to improve the health and quality of life for all Hanover County community members. The development of the goals, objectives and strategies within the CHIP was a collaborative process involving local and regional partners, and community input to address key priority areas. We are thankful for the participation among the coalition and workgroup members. The CHIP represents the next phase in the continuous cycle of community health improvement, which started after the completion of the 2023-2024 Hanover County Community Health Assessment (CHA).

In the spirit of fulfilling Chickahominy Health District's role as the community's Chief Health Strategist, we are honored to have facilitated the CHA-CHIP process for Hanover County, and we look forward to evaluating progress and reporting on all the successes to come. I invite all community members to review this plan and join us in promoting health through community collaboration.



Thomas Franck, MD, MPH
Health Director



Executive Summary

The Hanover County 2025-2029 Community Health Improvement Plan (CHIP) is a five-year plan to help make the community healthier. The plan focuses on the top three health priorities that were found in the [2023-2024 Hanover County Community Health Assessment \(CHA\)](#). The CHIP was created with the support of three health priority workgroups. Since October 2024, the workgroups have worked together to further understand the county's current health situation, find out what solutions will address the top health priorities identified, and develop a plan to improve the health of community members in Hanover County.

The three main health priorities in the CHIP are:

1. Healthy Eating and Food Security
2. Youth Mental Health
3. Affordable, Safe, and Available Housing

These health priorities shaped the goals, objectives, and strategies in the plan. The CHIP will guide local groups, healthcare providers, non-profits, and government agencies as they work on new and ongoing projects to improve community health.

The plan is led by the Chickahominy Health District's Community Health Team with support from the Healthy Hanover Coalition. The CHIP is a "living document," which means it can change and improve over time. Updates will be made at least once a year, and an annual report will be shared. Community input will remain important to ensure the plan remains valuable and up to date. If you'd like to join the Healthy Hanover Coalition, please email CHDWellness@vdh.virginia.gov. The CHIP is part of an ongoing cycle; a new health assessment is planned to start in 2029.

Acknowledgements

Thank you to all the organizations and individuals for their contributions to the development of the 2025-2029 Hanover County Community Health Improvement Plan. The asterisk (*) signifies those who were facilitators for the health priority workgroups.

Healthy Eating and Food Security Workgroup

Caitlin Hodge (*)	Chickahominy Health District
Aileen Harris	Capital Area Health Network - Community Health & Student Engagement Office
Aliyah Karner	United Way of Greater Richmond & Petersburg
Amelia Swafford	Chickahominy Health District
Dustin Parks	FeedMore
Francisca Carrasco	Bilingual Family Liaison – Hanover County Public Schools
Hannah Tackett	FeedMore
Jennifer Ciminelli	Massey Comprehensive Cancer Center
Katy Wilde	Hanover County Parent Teacher Resource Center – Hanover County Public Schools
Linda Kennedy	First Baptist Church Ashland’s Food Pantry
Melissa Janes	Chickahominy Health District
Missi Boyer	The SPAN Center
Morgan Lindsay	Hanover Community Resources
Phillip Cobb	Patrick Henry Family YMCA
Shanika Reed	Hanover County Department of Social Services

Youth Mental Health Workgroup

Bryanda Amillano (*)	Chickahominy Health District
Aileen Harris	Capital Area Health Network - Community Health & Student Engagement Office
Aliyah Karner	United Way of Greater Richmond & Petersburg
Amelia Swafford	Chickahominy Health District
Courtney Mills	Hanover Community Service Board
Donna Clements	Hanover County Children’s Services Act Coordinator

Ivy Sager
Jackie Harris
Jennifer Sheppard
Karla Allen
Kristin Stubbe
Linda Kennedy

Hanover Community Service Board
Capital Area Health Network
Hanover Community Service Board
Hanover County Public Schools
Hanover County Parent Teacher Resource Center – Hanover County Public Schools
First Baptist Church Ashland Food Pantry

Affordable, Safe, and Available Housing Workgroup

Emily Hines (*)
Amelia Swafford
Carrie Cicuto
Celeste Anderson
Colleen Wilhelm
Juliet Mallory
Morgan Dean

Chickahominy Health District
Chickahominy Health District
Hanover County Public Schools
United Way of Greater Richmond & Petersburg
The SPAN Center
Resources for Independent Living, Inc.
Hanover and King William Habitat for Humanity



About Hanover County

Founded in 1720, Hanover County celebrated its 300th anniversary in 2020. Hanover County is home to 39 sites listed on the National Register of Historic Places or the Virginia Landmarks Register, along with 56 Virginia Historical Markers. The Richmond National Battlefield Park preserves four Civil War battlefields within the county, while Hanover County itself manages historic battlefield parks at the North Anna River and Cold Harbor.⁽¹⁾

As of July 1, 2024, Hanover County has an estimated population of 115,309, reflecting a 1.0% increase from the previous year. According to the U.S. Census Bureau’s 2024 population estimates, 81.6% of residents identified as Non-Hispanic White, 9.5% as Non-Hispanic Black, 4.1% as Hispanic or Latino, 2.7% as Asian, 2.3% identify as two or more races, 0.5% as American Indian and Alaska Native, and 0.1% as Native Hawaiian and Other Pacific Islander See **Table 1**.⁽²⁾

Table 1: Race/Ethnicity in Hanover County and Virginia, 2024

Race/Ethnicity	Hanover County	Virginia
Non-Hispanic White	81.6%	59.1%
Non-Hispanic Black	9.5%	20.0%
Hispanic or Latino	4.1%	11.2%
Asian	2.7%	7.4%
Two or more races	2.3%	3.5%
American Indian and Alaska Native	0.5%	0.6%
Native Hawaiian and Other Pacific Islander	0.1%	0.1%

Table 2: Age Distribution in Hanover County, 2023

Age	Percent of Population
0-4	5.1%
5-19	18.4%
20-34	16.8%
35-44	12.6%
45-54	13.3%
55-64	14.4%
65+	19.4%

English is the primary language spoken by those living in Hanover County. Of the 4.3% of the population who speak another language at home other than English, 46.5% speak Spanish, followed by 22.1% speaking other Indo-European languages, 22.1% Asian and Pacific Island languages, and 9.3% speaking other languages.⁽³⁾ The age groups for Hanover County are shown in **Table 2**.⁽⁴⁾ The largest age group in Hanover County is residents ages 65 years and older. The median age in Hanover County is 42.7 years.⁽⁵⁾

What is a CHIP?

The Community Health Improvement Plan (CHIP) is a long-term, systematic effort to tackle important health priorities identified by the community.⁽⁶⁾ The CHIP is based on the results of the [2023-2024 Hanover County Community Health Assessment \(CHA\)](#).

The Chickahominy Health District's Community Health Team will use the CHIP to guide partners and support progress toward the goals, objectives, and strategies outlined in the action plan. The team will monitor strategy implementation continuously and update progress quarterly. Additionally, the CHIP will be reviewed and revised annually.

Implementation Period

YEAR 1:

July 2025

YEAR 2:

July 2026

YEAR 3:

July 2027

YEAR 4:

July 2028

YEAR 5:

July 2029

The Approach

Selecting Health Priorities

On September 30, 2024, the Healthy Hanover Coalition met virtually to identify the top health priorities for the next five years. These top health issues were proposed by Chickahominy Health District's Community Health Team based on the findings from the 2023-2024 Hanover County Community Health Assessment. Using both qualitative and quantitative data from the assessment, the team identified the top eight health issues listed below.

- Affordable, Safe, and Available Housing
- Built Environment (Transportation, Green Space, Walkability)
- Economic Stability and Workforce Development
- Family, Older Adult, and Social Support
- Healthcare Access and Quality
- Healthy Eating and Food Insecurity
- Mental Health
- Substance Use

After reviewing data and community perspectives on each issue, participants took part in an interactive prioritization activity. Each coalition member received \$1,000 in pretend virtual money to “invest” in one or more of the priorities, based on what they felt was most important to address over the next five years. They allocated their funds by commenting with dollar amounts under each category. The Chickahominy Health District Community Health Team tracked the totals at the end of the activity to determine the top priorities based on collective input.

Results

The top three health priority areas identified through the prioritization process were: 1) Mental Health, which had the most investments with the total of \$2,900; 2) Affordable, Safe, and Available Housing which had \$2,250; and 3) Healthy Eating and Food Security which had a total of \$2,050.

Action Plans

Each priority area in the CHIP includes goals, specific steps, timelines, lead organizations, expected results, and ways to measure success. Setting clear goals and steps, tracking progress, and assigning responsibilities helps turn ideas into real results. It's what makes the difference between just hoping for change and making it happen. For definitions of key terms used throughout this report, please view the glossary starting on page 40.

To keep the community informed, the Chickahominy Health District's Community Health Team will send out e-newsletters every three months with updates on CHIP progress. They will also share successes and talk about any challenges or delays in carrying out the plan. These updates, along with possible solutions, will be discussed at least twice a year during Healthy Hanover Coalition meetings.

The CHIP is a "living document," which means it can change and improve over time. Updates will be made at least once a year, and an annual report will be shared with the community. The structure of the CHIP action plan was based on a planning template from the Minnesota Department of Health.⁽⁷⁾



Health Priority 1: Healthy Eating and Food Security

Background:

The Healthy Eating and Food Security workgroup held its first meeting in October 2024 and met monthly through April 2025. The workgroup included representatives from Capital Area Health Network (CAHN), FeedMore, First Baptist Church Ashland's Food Pantry, Hanover County Community Resources, Hanover County Public School's Parent Teacher Resource Center, Hanover County Department of Social Services, VCU Massey Comprehensive Cancer Center, The SPAN Center, Patrick Henry Family YMCA, United Way of Greater Richmond & Petersburg, and Chickahominy Health District (including the Supplemental Nutrition Program for Women, Infants, and Children (WIC) staff). See **page five** for a complete list of workgroup members.

The group began by describing challenges faced by community members related to healthy eating and food security, defining key terms, and outlining concerns in an issue statement (**see page 12**). They discussed on-going initiatives to address nutrition in Hanover County and who might be at higher risk for food insecurity. They toured the Food Pantry at GoochlandCares to see a "choice model" service in action. The group identified three goals and eleven potential strategies to include in the action plan. These included ways to improve the food pantries and the use of food security programs, to increase access to healthy and nutritious foods, as well as strengthen nutrition resource coordination, and public awareness.

To decide which strategies were most important, the group took a survey. They ranked each strategy by how easy it would be to implement and how acceptable it was to the community. Then, they used a chart called an 'impact and effort prioritization matrix' to help them choose (**see Appendix A – Healthy Eating and Food Security Impact/Effort Matrix**). The group agreed to include three main goals and 10 strategies in their action plan (**see below**).

Issue Statement:

Eating a variety of nutritious foods can improve health, yet some community members have difficulty maintaining healthy eating patterns over their lifetime. Access to healthy food is especially important to address in our community since food insecurity is associated with a higher risk of many health conditions. Providing food to those in need also allows organizations to share resources and make other referrals that can improve our community's health, well-being, and connectedness.



Priority 1	Healthy Eating and Food Security
Goal 1:	Improve the health of Hanover County residents by making nutritious foods, specifically fruits and vegetables, available to those at higher risk of food insecurity.

Objective 1.1: By July 1, 2025, local food pantries will partner with Hanover County Department of Social Services (DSS) to ensure emergency food is available seven days a week (now including Fridays) for community members in need.

Benchmark and Method of Measuring Success: Emergency food was available six days a week as of 2024; changed to seven days a week in 2025 in Hanover County by involving two DSS sites on Fridays; success will be measured by connecting with the Hanover Food Network participating pantries and DSS; and the continuation of emergency food offered seven days/week during 2025-2029.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.1.1: Hanover Food Network Meeting: discussion regarding the ways to address the lack of emergency food options on Fridays.	1/14/2025 COMPLETE	Staff, volunteers, partnerships	Hanover Food Network

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.1.2: Local pantries agree to provide and deliver food boxes to at least two DSS locations. Food boxes include shelf-stable items from a variety of food groups, including vegetables.	1/14/2025	Food boxes, volunteers, storage, transportation	Mechanicsville Churches Emergency Functions, Beaverdam Food Pantry, Hanover County DSS
Strategy 1.1.3: Hanover Food Network members and partner organizations are made aware of the emergency food available on Fridays at two DSS offices (Route 1 and Bell Creek) during business hours, 8:30am-5pm.	2/1/2025 COMPLETE	Staff, volunteers, partnerships	Hanover Food Network
Strategy 1.1.4: Hanover DSS tracks the food box distribution and communicates with the food pantries when new boxes are needed (have on hand at least two food boxes at two DSS offices).	7/1/2025	Staff, technology, partnerships	Hanover County DSS

Objective 1.2: By September 30, 2025, the SPAN Center will improve the reach of their advertising for the Farm Market Fresh Program for seniors in Hanover County by involving at least five partner organizations to promote the program.

Benchmark and Method of Measuring Success: Number of fruit and vegetable vouchers distributed (In 2024, 900 vouchers were provided to the SPAN Center, but ~75 vouchers were not issued/returned to DARS). The plan is to receive 900 vouchers and distribute 100% of them (not return any vouchers to DARS); will begin tracking the number of organizations who share program information; will track the number of vouchers given to Hanover County residents to determine if advertising/partnerships are working. New in 2025: benefits will be digital (using a card or smartphone to scan at farmers markets).

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.2.1: The SPAN Center to confirm with the Department of Aging and Rehabilitative Services (DARS), Division of Aging Services, that the program will continue in 2025.	2/1/2025 COMPLETE	Staff, funding	The SPAN Center
Strategy 1.2.2: The SPAN Center to receive and distribute 900 vouchers (digital version) for 2025 and track the number given in the localities they serve.	5/1/2025 COMPLETE	Staff, technology	The SPAN Center
Strategy 1.2.3: DARS to share with the SPAN Center the participating farmers markets. DARS to train the Span Center on issuing to seniors using the new digital version of the vouchers.	5/16/2025 COMPLETE	Staff	DARS (Department of Aging and Rehabilitative Services)
Strategy 1.2.4: The SPAN Center will connect with the CHIP workgroup members to identify partners to promote the program and share materials; The SPAN Center to track which partner organizations are receiving promotional materials to share with seniors. The SPAN Center will also provide information on this program during their community Listening Sessions.	5/23/2025 COMPLETE	Staff, technology, partnerships	The SPAN Center
Strategy 1.2.5: The SPAN Center to confirm with DARS about the program's continuation in 2026.	12/31/2025	Staff	The SPAN Center; DARS

Objective 1.3: By September 30, 2025, the Chickahominy Health District’s (CHD’s) Supplemental Nutrition Program for Women, Infants, and Children (WIC) will distribute 100% of the Farm Market Fresh Program digital vouchers to WIC clients, to be used for purchasing fruits and vegetables at participating farmers markets in Hanover County.

Benchmark and Method of Measuring Success: Farm Market Fresh has not been offered by CHD’s WIC Program previously; success will be launching the program in 2025 and continuing it through 2029 with a 20% increase in the number of vouchers distributed by 2029 (going from 100 in 2025 to 120 in 2029); inclusion of all four of the district’s counties having markets that accept these vouchers by 2026. All 100 vouchers are distributed by Sept. 30, 2025, and continuing throughout the following years.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.3.1: WIC to confirm with the Department of Aging and Rehabilitative Services (DARS), Division of Aging Services that the program will continue in 2025.	3/1/2025 COMPLETE	Staff, funding	WIC
Strategy 1.3.2: WIC to request 100 vouchers for 2025 and track the number given in the localities they serve.	5/1/2025 COMPLETE	Staff, technology	WIC
Strategy 1.3.3: DARS to share with WIC the participating farmers markets. DARS to train WIC staff on issuing the digital vouchers and how clients can use them at markets.	5/15/2025 COMPLETE	Staff, partners	DARS
Strategy 1.3.4: WIC promotes the program to their clients during appointments; CHD's community health staff and partner organizations promote the program.	07/01/2025	Staff, partners, technology, materials	WIC, CHD

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.3.5: WIC staff and community health staff develop questions to ask clients in 2026 about their experiences in the Farm Market Fresh program so it can be improved in the future.	8/1/2025	Staff	WIC, CHD

Objective 1.4: By December 31, 2025, the Chickahominy Health District (CHD), along with at least one additional care provider in Hanover County, will implement a food insecurity screening tool to determine their clients' need for emergency food and make appropriate referrals.

Benchmark and Method of Measuring Success: Implementation and use of food insecurity screening tool by CHD's Office Support Specialists (OSS); OSS Supervisor reports on the number of OSS trained, number of screenings completed, and number of referrals made, or resources provided; after piloting the screening tool at the Hanover County Health Department, the tool is used at each local health department in the district by November 2026.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.4.1: Receive screening tool and training from FeedMore; training of CHD's Office Support Specialists (OSS). OSS receive resources and education on local food pantries and their specific requirements/schedules.	10/1/2025	Staff, volunteers, partners, technology	FeedMore, CHD

Strategies/Action Steps	By When	Resources Needed	Lead Organization
<p>Strategy 1.4.2: CHD connects with Sentara Community Care Center to learn about their food insecurity screening program; OSS Supervisor determines how to track data (screenings completed, referrals made, OSS trained, health departments using the screening tool, etc.). CHD connects with the Ashland Health Connectors to inquire about care providers who are also interested in screening for food insecurity.</p>	<p>11/1/2025</p>	<p>Staff, volunteers, partners, technology</p>	<p>Ashland Health Connectors, Sentara, CHD</p>
<p>Strategy 1.4.3: CHD and FeedMore determine availability and ability to store/provide food boxes as part of the resources for those identified as food insecure.</p>	<p>11/15/2025</p>	<p>Staff, volunteers, storage, partners</p>	<p>FeedMore, CHD</p>
<p>Strategy 1.4.4: Each local health department in CHD has information on food pantries and referral resources to provide to those they screen for food insecurity. CHD and FeedMore connect with other care providers to encourage their participation.</p>	<p>11/30/2025</p>	<p>Staff, volunteers, referral materials, technology</p>	<p>FeedMore, CHD</p>

Objective 1.5: By December 31, 2025, the SPAN Center will work with community partners to determine ways to increase the number of seniors attending their western (Montpelier) Friendship Café by 10 participants.

Benchmark and Method of Measuring Success: Number of individuals who attended each of the three Friendship Cafés in Hanover County at least once in 2024. Success will be measured using the number of new individuals who attend each of the three Friendship Cafés in 2025, 2026, and 2027 (annual new attendees) and the number of community-based organizations which the SPAN Center contacts per year to increase community awareness of Friendship Cafés.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 1.5.1: Determine total number of participants who have historically attended the Montpelier Friendship Café.	5/23/2025 COMPLETE	Staff, volunteers, partners	The SPAN Center
Strategy 1.5.2: Review Montpelier Friendship Café to determine ways to improve participation and remove barriers (location, access, transportation, etc.)	6/20/2025	Staff, volunteers, partners	The SPAN Center
Strategy 1.5.3: Determine ways to fundraise and partner with organizations to provide more rides to seniors to the cafes.	6/20/2025	Staff, volunteers, partners	The SPAN Center
Strategy 1.5.4: Registered Dietician visits each cafe to provide fresh produce and nutrition education at least twice a year.	8/15/2025	Staff, volunteers	The SPAN Center

Priority 1	Healthy Eating and Food Security
Goal 2:	Launch the Hanover Food Security System to: 1) increase the public’s awareness of and connections to food resources available in the county, and 2) strengthen the coordination of referrals, education, trainings, and resources between food programs.

Objective 2.1: By December 31, 2026, a trained volunteer or staff member will offer Supplemental Nutrition Assistance Program (SNAP) assistance to pantry clients at least three times a year during food pantry operations in Hanover County, along with education about healthy eating and the types of food items SNAP covers.

Benchmark and Method of Measuring Success: Number of food pantries that participate; number of staff and volunteers trained by FeedMore/DSS to assist with applications; number of applications completed at the pantries; number of food pantry clients provided education on the food items SNAP covers and healthy eating.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 2.1.1: FeedMore to meet with CHD and DSS to discuss SNAP application assistance and benefit education as part of developing a SNAP outreach plan to share with local food pantries.	5/16/2025 COMPLETE	Staff	FeedMore
Strategy 2.1.2: SNAP outreach plan presented to the Hanover Food Network members.	9/30/2025	Staff, volunteers, partners	FeedMore, Hanover Food Network
Strategy 2.1.3: FeedMore begins the trainings for staff and volunteers at local food pantries who are interested in participating in the outreach plan.	10/10/2025	Staff, volunteers	FeedMore, Food Pantries (specific ones are TBD)

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 2.1.4: Schedule is made for the 2026 outreach events including the locations and times for SNAP assistance, healthy eating education, and food items covered. FeedMore to provide updates regarding changes to SNAP and visit Hanover Food Network meetings twice a year.	12/1/2025	Staff, volunteers, partners	Hanover Food Network

Objective 2.2: By July 15, 2025, FeedMore will research and share with the Hanover Food Network trauma-informed training options for staff and volunteers who work at local food pantries in Hanover County and interact with community members experiencing food insecurity.

Benchmark and Method of Measuring Success: Each year, a trauma-informed training is offered to food pantry staff and volunteers; gain feedback on the training (usefulness, recommend to others, etc.); prioritize no-cost options.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 2.2.1: FeedMore to recommend trainings that are no cost to non-profits/food pantries (i.e., Leah's Pantry)	6/1/2025 COMPLETE	Staff, partners	FeedMore
Strategy 2.2.2: Hanover County DSS to check with Services Division Director for potential training contacts/options to share.	6/1/2025 COMPLETE	Staff, partners	Hanover County DSS
Strategy 2.2.3: Share options with Hanover Food Network; determine best way to offer and coordinate trainings.	7/15/2025	Staff, partners, technology, materials	Hanover County DSS, FeedMore, Hanover Food Network

Objective 2.3: By June 15, 2026, offer new and additional opportunities for nutrition education to food pantry clients on a variety of topics, based on client feedback, including (but not limited to): healthy meal planning, cooking demonstrations, and creating videos on shopping and/or food safety. This would include researching health and nutrition education models for food pantry settings.

Benchmark and Method of Measuring Success: Lead organizations identified to do the research, gain feedback from clients, and plan for, as well as implement the nutrition education.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 2.3.1: Schedule a meeting to learn more about the SNAP education provided by Virginia Cooperative Extension in the county. Share that information with the Healthy Hanover Coalition.	1/5/2026	Staff, partners	Chickahominy Health District
Strategy 2.3.2: VCU Massey Comprehensive Cancer Center to share information on their specific diet and nutrition outreach that might work well for food pantries during Hanover Food Network Meeting.	2/20/2026	Staff, partners, volunteers	VCU Massey Comprehensive Cancer Center
Strategy 2.3.3: FeedMore to share nutrition education options with Hanover Food Network members (i.e., CHEW; The Underground Kitchen Community First; Shalom Farms).	3/25/2026	Staff, partners, volunteers	FeedMore/others
Strategy 2.3.4: Hanover Food Network members determine which options to utilize and develop a schedule to share with each other and advertise to their clients/partners.	5/5/2026	Staff, partners, volunteers	Hanover Food Network/Community Resources

Objective 2.4: By April 15, 2026, Hanover Food Network pantries and human services agencies in Hanover County will be introduced to and trained on the Unite Us platform, which will streamline community member referrals, increase the number of warm hand-offs for a variety of resources, and provide confidential case management.

Benchmark and Method of Measuring Success: Number of pantries and human services organizations who set up Unite Us; date and number of people trained on Unite Us; tracking of referrals, types of resources, and case management.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 2.4.1: Confirm Unite Us platform will continue to be available at no charge to community organizations/non-profits and gov't agencies.	11/1/2025	Staff, funding	CHD
Strategy 2.4.2: CHD asks Hanover Food Network to put Unite Us presentation on agenda for February 2026 meeting.	12/30/2025	Staff	CHD, Unite Us, Hanover Community Resources
Strategy 2.4.3: Hanover Food Network members determine their capacity for launching the platform and timeline for using Unite Us.	4/15/2026	Staff, partners, technology, volunteers	TBD

Priority 1 Healthy Eating and Food Security

Goal 3:

Enhance engagement with the community members who utilize food security resources to better understand their needs and support their wellness goals.

Objective 3.1: By December 31, 2028, the Chickahominy Health District (CHD) will partner with at least four Hanover County food pantries to hold listening sessions with pantry participants to learn more about their food preferences, cooking questions, and gain insights from clients on resources and services needed to achieving their wellness goals. **Benchmark and Method of Measuring Success:** Listening sessions are held at four different locations with a total of at least 40 participants; gather feedback that can be summarized and shared with the host pantry; larger summary to be shared with the Hanover Food Network members. Identify which other languages the listening session should be held in; see if a short survey distributed at food pantries would enhance feedback.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 3.1.1: Create listening session questions and identify incentives for participants as well as facilitators.	6/1/2025	Staff, interns	CHD
Strategy 3.1.2: Connect with the Hanover Food Network pantries meeting to see which pantries would like to host and promote the sessions; meet to review/customize questions and plan the events. Determine the languages that are commonly spoken at the local food pantries and determine how to accommodate them.	7/1/2025	Staff, volunteers, interns, language resources/interpreters	CHD

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 3.1.3: Hold the sessions; summarize findings to share with the host site. Ask host site for permission to share findings/major themes with partner organizations who have similar goals (i.e. FeedMore, SPAN Center).	12/31/2028	Staff, technology, incentives, participants, volunteers, interns, site/locations	CHD
Strategy 3.1.4: Determine if any of the pantries implemented strategies, added new features, found resources, and/or made new referrals to services in response to recommendations /findings from the listening sessions.	12/31/2028	Staff, volunteers, funding, partners	CHD



Health Priority 2: Youth Mental Health

Background:

In November 2024, the Mental Health Workgroup held their first meeting to review the CHA/CHIP process, discuss Hanover County's top three priority areas, and examine current data on behavioral health surveillance and mental health indicators, comparing trends in Hanover County to those in Virginia and the United States. The workgroup included representatives from Capital Area Health Network (CAHN), Hanover County Community Services Board (CSB), United Way of Greater Richmond & Petersburg, Hanover County Public Schools, Hanover Cares, and Chickahominy Health District. See **page five** for a complete list of workgroup members.

Following the first meeting, the group created an issue statement addressing mental health in Hanover County. Based on the workgroup's expertise and focus areas, they chose to concentrate on youth mental health. The issue statement clarified the challenges facing young people in the community and served as a foundation for developing three primary goals. These goals focus on increasing awareness of youth mental health conditions and available resources, expanding community support and after-school activities, and improving access to affordable mental health treatment. During the planning process, members identified 14 potential strategies to include in the action plan.

To decide which strategies were most important, the group took a survey. They ranked each strategy by how easy it would be to implement and how acceptable it was to the community. Then, they used a chart called an 'impact and effort prioritization matrix' to help them choose (**see Appendix B – Youth Mental Health Impact/Effort Matrix**). After reviewing all proposed strategies, the group finalized 11 strategies to include in the CHIP plan.

Issue Statement:

Youth in Hanover County face barriers to accessing and utilizing available mental health resources. These include limited awareness of the need for mental health services and available services, insufficient access to qualified providers (including transportation, affordability, insurance affordability, and language barriers). Food and housing insecurity further increases these challenges, significantly impacting mental well-being and hindering access to necessary support.



Priority 2 Youth Mental Health

Goal 4: Increase awareness of youth mental health conditions and resources they can access in Hanover County.

Objective 4.1: By June 2029, reduce the rate of self-harm and suicide-related emergency department (ED) visits per 100,000 population among Hanover County residents ages five years and older by 5.0% (from the baseline of 617.3 per 100,000 to 586.4 per 100,000). [Source: Virginia’s Plan for Well-Being (Virginia Department of Health, Syndromic Surveillance Data, Division of Surveillance and Investigation, Office of Epidemiology - Virginia Department of Health, 2023)].⁽⁸⁾

Benchmark and Method of Measuring Success: Twenty Mental Health First Aid (MHFA) and/or Safe TALK training courses completed, five YMCA youth-only education sessions, five Hidden in Plain Sight trainings, one list of all resources sent along with the names of participating schools, and 20 social media posts at the end of the CHIP plan.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 4.1.1: Provide evidence-based mental health and suicide prevention training such as MHFA and/or Safe TALK to individuals in the community and parents once per quarter.	6/30/2029	Staff	Hanover CSB and Chickahominy Health District (CHD)

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 4.1.2: Support Hanover Cares in continuing to offer the <i>Hidden in Plain Sight</i> training at least once annually to educate parents and caregivers in Hanover County on youth mental health warning signs and available resources.	06/30/2026	Staff	Hanover Cares and CHD
Strategy 4.1.3: Partner with the YMCA as a family-oriented space to host youth-only education sessions and events once a year, allowing parents to drop off their children for engagement.	6/30/2026	Staff, educational materials	CAHN
Strategy 4.1.4: Partner with Chickahominy Health District to provide and share mental health resources through Parent Square twice a year to support student and family wellness, and document which schools participate and what resources are distributed.	12/31/2026	Staff	Hanover County Public Schools and CHD
Strategy 4.1.5: Submit a social media request once per quarter to promote county-wide mental health resources such as the 988 Suicide & Crisis Lifeline in both English and Spanish.	09/30/2025	Staff	CHD

Priority 2	Youth Mental Health
Goal 5:	Foster resiliency through school-based education, community support, and after school activities.

Objective 5.1: By June 2029, reduce the overdose emergency department visit rates for all drugs among youths aged 15–19 from 62.4 per 10,000 ED visits in females and 144.8 per 10,000 in males to 53.0 per 10,000 and 123.1 per 10,000, respectively, in Hanover County. [Source: Virginia Department of Health (VDH) Office of Epidemiology – Overdose Emergency Department Visits, 2022.⁽⁹⁾

Benchmark and Method of Measuring Success: Twenty EveryDay Strong framework sessions conducted to support youth mental health of children and teens by utilizing EveryDay Strong strategies to foster emotional safety, connection, and confidence; and offer four virtual presentations on substance use, drinking, and the developing brain to high school students by the end of the CHIP plan.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 5.1.1: Implement EveryDay Strong framework by training caring adults in schools, out-of-school programs, churches, and recreational activities once a quarter to support youth sessions to equip with everyday strategies that foster open communication and create organize safe spaces for youth.	6/30/2029	Staff	United Way of Greater Richmond & Petersburg

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 5.1.2: Offer virtual presentations once a year on substance use, drinking, and the developing brain to high school students, using the opportunity to engage them in conversations about resiliency and gather feedback on strategies to support youth well-being.	6/30/2029	Staff, training materials	CAHN

Priority 2	Youth Mental Health
Goal 6:	Increase access to affordable mental health treatment and support services for youth in Hanover County.

Objective 6.1: By June 2029, decrease the mental health provider ratio from 440:1 to trend towards Virginia's baseline of 380:1. [Source: CMS, National Provider Identification, County Health Rankings, 2024].⁽¹⁰⁾

Benchmark and Method of Measuring Success: Baseline/continuous data for the six Hanover County Public Schools (HCPS) for school-based mental health services; coordinate one meeting with VCU and establish cadence with VCU contacts with the goal of integrating student involvement in community settings and assisting in delivering treatment and supportive services to youth.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 6.1.1: Gather baseline data for the 6 schools (4 High Schools/2 Middle Schools) that are involved with school-based mental health services in partnership with HCPS with the CSB.	6/30/2026	Staff	Hanover CSB

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 6.1.2: Coordinate and meet with VCU contacts from the Psychology and Psychiatry departments to brainstorm and establish opportunities for student involvement in community settings, with the goal of developing supervised programs where students can assist in delivering treatment and supportive services to youth experiencing mental health challenges.	12/31/2025	Staff	CAHN and CHD
Strategy 6.1.3: Integrate health professional students (psychology, psychiatry, and psychiatry residents) seeking community-based experiences to provide treatment and supportive services under supervision, in collaboration with institutions like VCU's psychiatry department.	6/30/2027	Staff, partnerships with VCU	CAHN

Objective 6.2: By June 2029, increase accessibility and awareness of existing telehealth and other mental health services by distributing information through school channels (Parent Square) that are involved with school-based mental health services in partnership with the Hanover Community Services Board (CSB). Begin with the six schools currently participating in school-based mental health services, with the goal of expanding outreach to all 27 schools in Hanover County.

Benchmark and Method of Measuring Success: One assessment completed of the number of current telehealth services available to Hanover County students through the schools and one new list of available tele-mental health services to share through Parent Square.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 6.2.1: Assess the telehealth resources currently provided to students by (HCPS, including details on what services are offered and who provides them.	12/31/2025	Staff	CHD
Strategy 6.2.2: Compile a list of available mental telehealth services in Hanover County and share it with HCPS for distribution through the Parent Square platform.	06/30/2026	Staff	CHD



Health Priority 3: Affordable, Safe, and Available Housing

Background:

In January 2025, the Housing Workgroup held their first meeting to review the CHA/CHIP process, analyze housing data, and create an issue statement to help them understand the housing challenges in the area and guide the creation of the goals. The workgroup included representatives from Hanover County Public Schools, Habitat for Humanity – Hanover & King William, the SPAN Center, Resources for Independent Living, Inc., United Way of Greater Richmond & Petersburg, and Chickahominy Health District. See **page six** for a complete list of workgroup members.

These goals focus on improving access to local and regional housing resources and making homes healthier and safer. During the planning process, members submitted 16 possible strategies to include in the action plan. To decide which strategies were most important, the group took a survey. They ranked each strategy by how easy it would be to implement and how acceptable it was to the community. Then, they used a chart called an ‘impact and effort prioritization matrix’ to help them choose (**see Appendix C – Housing Impact/Effort Matrix**). After reviewing all the strategies, the group selected 11 strategies to include in the Affordable, Safe, and Available Housing section of the CHIP.

Issue Statement:

Hanover County is facing housing challenges due to a shortage of affordable, safe, and quality housing options, including both rental and single-family homes. This issue is making it increasingly difficult for low-income families, working-class individuals, and older adults to remain in the county. Many homes are in poor condition and need repairs or modifications, and there aren’t enough affordable housing options to meet the growing demand. To solve this problem, it is important to create a system that brings together non-profits, local government, and other key partners to improve access to safe, affordable housing, which will enhance the quality of life for everyone in Hanover County.



Priority 3 Affordable, Safe, and Available Housing

Goal 7: Enhance access to stable housing resources and pathways for individuals and families through collaboration in Hanover County.

Objective 7.1: By December 31, 2029, the AARP Livability Index housing ranking for Hanover County will increase from 33 to 36. [Source: AARP Livability Index – Hanover County Housing Affordability and Access]⁽¹¹⁾

Benchmark and Method of Measuring Success: One assessment report detailing current housing resources, one proposal for creating a database/resource on Hanover County website, one list of organizations involved in housing initiatives, meeting minutes from meeting with Hanover County to review Comprehensive Plan.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 7.1.1: Meet with Housing Resource Line and 211 to assess what current housing resources they have.	3/31/2026	Staff	The SPAN Center
Strategy 7.1.2: Research and propose creating a database/resource on the Hanover County website that lists available housing in Hanover and their status (for rent, for lease, etc.).	12/31/2025	Funding, staff	Chickahominy Health District (CHD)
Strategy 7.1.3: Create a list of organizations who are involved in housing initiatives and share with partners.	9/30/2025	Staff, technology	Hanover and King William Habitat for Humanity

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 7.1.4: Meet with Hanover County to learn more about their current housing initiatives, priorities, and explore funding options to assist with strategic planning, market research, gathering data/input from community members, etc.	9/30/2025	Staff, partnerships	CHD

Priority 3 Affordable, Safe, and Available Housing

Goal 8: Improve the health and safety of residents and homes in Hanover County.

Objective 8.1: By December 31, 2029, reduce the percentage of households in Hanover County with at least one of four housing problems - overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities - by 2% (from the baseline of 9% to 7%). [Source: Comprehensive Housing Affordability Strategy]⁽¹²⁾

Benchmark and Method of Measuring Success: Fifteen home repairs completed, one crisis fund proposal drafted, one rental inspection program proposal drafted, meeting minutes from meeting with Town of Ashland.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 8.1.1: Complete at least 15 critical repairs on homes in Hanover County annually.	6/30/2029	Volunteers, staff, partnerships, funding	Hanover and King William Habitat for Humanity

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 8.1.2: Research and propose establishing a crisis fund to complete critical home repairs and assist tenants/residents' application and deposit fees in Hanover County to improve access to safe, stable housing, reducing the overall risk of eviction and homelessness.	9/30/2026	Funding, staff	CHD
Strategy 8.1.3: Research and propose implementing a rental inspection program in Hanover County.	12/31/2025	Staff, partnerships	CHD
Strategy 8.1.4: Meet with the Town of Ashland to understand their current rent regulations policies.	9/30/2025	Staff, partnerships	CHD

Objective 8.2: By June 30, 2026, Chickahominy Health District will submit at least one grant application focused on improving healthy housing conditions for community members in their service area.

Benchmark and Method of Measuring Success: One assessment completed for asthma health education, one grant application submitted, one set of guidelines drafted and shared with five partners and posted on three community platforms.

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 8.2.1: Assess current asthma health education occurring in Hanover County to see if there is additional need for asthma/healthy housing education for the community.	12/31/2025	Staff, partnerships	CHD

Strategies/Action Steps	By When	Resources Needed	Lead Organization
Strategy 8.2.2: Research and potentially apply for grant opportunities to establish a Healthy Homes Program.	03/31/2026	Staff, partnerships	CHD
Strategy 8.2.3: Research and develop guidelines for indoor healthy living spaces and share with at least five partners, and three community platforms.	12/31/2025	Staff, partnerships	CHD

Alignment: VDH and Healthy People 2030

The health priorities identified for Hanover County align with aspects of the 2025-2029 Virginia's Plan for Well-Being, which serves as the State Health Improvement Plan (SHIP).⁽¹³⁾ Virginia's Plan for Well-Being identified various strategies to improve outcomes around six health priority areas identified by the State Health Assessment Advisory Council in August 2022. The 2025-2029 Hanover County CHIP aligns with three of the health priority areas.

VDH's SHIP Health Priority 3: Obesity

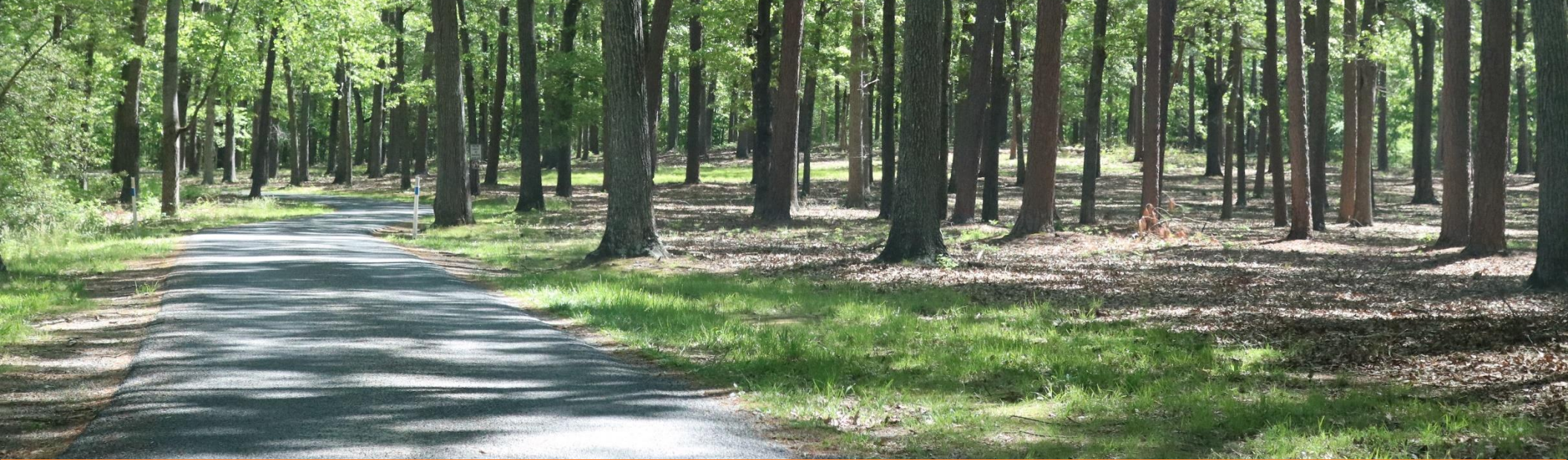
- Promote the adoption of food service/nutrition standards in schools and worksites. Promote healthy eating via incentives in employer wellness programs. Implement policies and practices that create a supportive nutrition environment.

VDH's SHIP Health Priority 4: Mental Health

- Increase the number of school districts and community groups that use evidence-based and best practice programs that promote resilience and healthy decision-making.
- Explore avenues for expanding after-school programming.
- Continue to provide, and where not available develop, prevention and early intervention services to middle and high school students.
- Continue to address the social determinants of health that increase the risk of suicide, self-harm, and adverse health consequences such as adequate housing and economic opportunities and provide support to address food security.
- Provide training to mental health professionals to increase support and referral options for Virginians at risk of suicide or experiencing unmet mental health needs.

VDH's SHIP Health Priority 6: Housing, Transportation, and Economic Stability

- Assess the extent of need for housing-related services.



Your Role



We are encouraging community members to get involved! Email or call us to:

- Join the Healthy Hanover Coalition!
- Send an email to share your ideas on how to address one or all the health priorities!
- Sign up to receive quarterly newsletters providing updates on CHIP progress!

Your unique perspective and ideas can help develop creative and effective solutions that address the root causes of these challenges. We hope you'll join us and contribute to shaping initiatives that aim to improve access to nutritious food, mental health support, affordable housing, and overall wellness. Working alongside diverse stakeholders, you can contribute to an action plan that reflects the needs of the community and ensures that everyone can thrive. Your voice is a critical part of positive change, and by joining a workgroup, you'll be actively contributing to a healthier community for all.

Contact us:  CHDWellness@vdh.virginia.gov  804-365-3240

References

1. History of Hanover County 2006-2025. Available from: <https://www.hanovercounty.gov/684/Hanovers-History>.
2. U.S. Census Bureau Quick Facts - Virginia, Hanover County 2024. Available from: <https://www.census.gov/quickfacts/fact/table/VA,hanovercountyvirginia/PST045224>.
3. United States Census Bureau - S1601 Language Spoken at Home - ACS 5-Year Estimate Subject Tables. 2023.
4. United States Census Bureau - S0101 Age and Sex - ACE 1-Year Estimate Subject Tables. 2023.
5. United States Census Bureau - Hanover County, VA Census Bureau Profile. 2023.
6. Public Health Accreditation Board Glossary of Terms Version 1 September 2011. Available from: <https://www.phaboard.org/wp-content/uploads/PHAB-Acronyms-and-Glossary-of-Terms-Version-1.02.pdf>.
7. Tools and Templates for Assessment and Planning Assessment and Planning for Local Public Health: Minnesota Department of Health; 2017 [Word Document - Template]. Available from: <https://www.health.mn.gov/communities/practice/assessplan/lph/index.html>.
8. Community Health Improvement Data Portal. Available from: <https://virginiawellbeing.com/virginia-community-health-improvement-data-portal/>.
9. Virginia Department of Health (VDH) Office of Epidemiology – Overdose Emergency Department Visits: VDH; 2022. Available from: <https://www.vdh.virginia.gov/drug-overdose-data/emergency-department/locality-overdose-ed-visits/>.
10. CMS, National Provider Identification County Health Rankings 2024. Available from: <https://www.countyhealthrankings.org/health-data/community-conditions/health-infrastructure/clinical-care/mental-health-providers?year=2025&county=51085>.
11. Hanover County, Virginia AARP Public Policy Institute 2024. Available from: <https://livabilityindex.aarp.org/search/Hanover%20County,%20Virginia,%20United%20States>.
12. Severe Housing Problems | Hanover County, VA: Comprehensive Housing Affordability Strategy; 2017-2021 [Available from: <https://www.countyhealthrankings.org/health-data/community-conditions/physical-environment/housing-and-transportation/severe-housing-problems?state=51&year=2025#map-anchor>].
13. 2025-2029 Virginia's Plan for Well-Being 2025 [Available from: <https://virginiawellbeing.com/state-health-improvement-plan/>].

Glossary

Acceptability

The quality of being satisfactory and able to be agreed to or approved of.

Benchmark Measures

How change in behavior, environment, and/or policy will be measured in implementation. Measures include both outputs (project deliverables) and outcomes when possible.

By when

The date the strategy or action step will be completed.

Community Health Assessment (CHA)

Community health assessment calls for regularly and systematically collecting, analyzing, and making available information on the health of a community, including statistics on health status, community health needs, epidemiologic, and other studies of health problems.

Community Health Improvement Plan (CHIP)

Community Health Improvement Plan (CHIP) is a long-term, systematic effort to tackle the most important health priorities identified by the community. The CHIP is based on the results of the 2023-2024 Hanover County CHA.

Deliverables

The tangible or intangible results, products, or services a project aims to produce and report to stakeholders.

Demographics

Statistical data relating to the population and particular groups within it.

Feasibility

Possible to do easily or conveniently.

Goals

Broad statements, describing a desired population condition of well-being.

Health priority

A health issue identified during the CHA process.

Lead Organizations

Organizations and individuals who have agreed to facilitate the work. The strategy owners report their progress, successes, and challenges quarterly to the Chickahominy Health District's staff.

Objectives

Specific, measurable, achievable, relevant statements with a timeframe. Objectives specifically describe what your efforts are intended to accomplish and what change you hope to achieve. They help quantify the achievement of the goal.

Organizational structure

Outlines how an organization is designed to achieve its goals, defining roles, responsibilities, and reporting relationships.

Outcomes

Represents a specific result a program is intended to achieve.

Resources needed

The assets, materials, capabilities, or entities that are required to fulfill a need, achieve a goal, or provide support.

Source

The location or organization where the data is being used originates from.

Strategies

A collection of tangible actions to be carried out that have a reasonable chance of achieving goals and objectives.

Timelines

Sets the parameters for when a strategy will be completed.

Workgroup

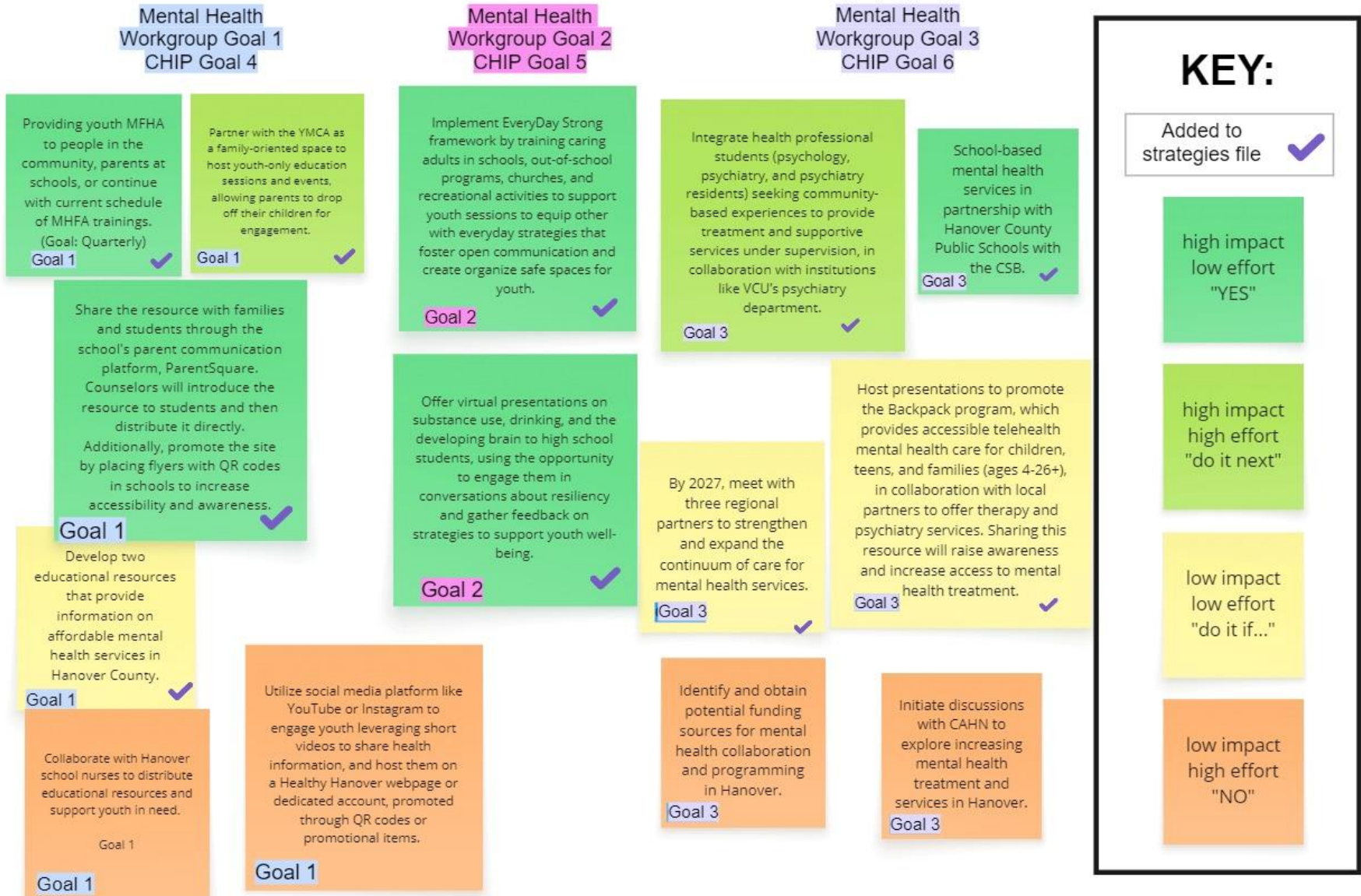
A group of people who work together on a particular piece of work.

Appendices

Appendix A – Healthy Eating and Food Security Impact/Effort Matrix Results



Appendix B – Youth Mental Health Impact/Effort Matrix Results



Appendix C – Housing Impact/Effort Matrix Results





FOLLOW US ON SOCIAL MEDIA!



Website: <https://www.vdh.virginia.gov/chickahominy/community-health-assessment/>

