2025-2029

CRATER

REGIONAL HEALTH



Petersburg



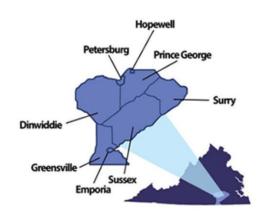
Sussex



Hopewell



Dinwiddie



Prince George



Surry



Greensville/Emporia

IMPROVEMENT PLAN







Table of Contents

| Acknowledgments | 3 |
|---|----|
| Glossary of Key Terms | 4 |
| Background | 5 |
| Community Health Assessments | 5 |
| Regional Health Improvement Planning Process | 6 |
| Regional Health Improvement Plan | 6 |
| Vision for Crater Region | 7 |
| Strategic Health Priorities Identified | 7 |
| Overarching Strategic Approaches Applied to All Goals and Objectives | 9 |
| Goals and Objectives | 9 |
| Strategic Issue 1: Equitable Access to Healthy Foods | 9 |
| Strategic Issue 2: Address Crime and Public Safety | 10 |
| Strategic Issue 3: Access to Quality, Affordable Healthcare | 11 |
| Strategic Issue 4: Youth Prepared to Thrive in Adulthood | 13 |
| Strategic Issue 5: Improvements to the Built Environment and Green Infrastructure | 13 |
| Implementation of the Regional Heath Improvement Plan | 15 |
| Conclusion | 15 |

Acknowledgments

Monique Lindsey-Howell

The Regional Health Improvement Plan would not have been possible without the support and contributions of many individuals and organizations. This includes community members who responded to surveys, participated in a focus group, or provided feedback and information, and all of the participants in the Community Health Assessment teams across the district, as well as members of the Crater Health Advisory Council. Thank you to everyone who made this plan possible.

Marquis AllenGenevieve LohrWendy AustinBrian ManningKeith BloweKevin MassengillTheresa CaldwellShanika McClellandMarco CallenderAnnie Mickens

Katie Chlan Jennifer Murphy-James

Thurman Collier
Tiffany Copeland
Lynn Parker
Stacie Desper
Lili Quintana
Melissa Diggs-Perez
Mike Rae
Amy Burke Donnellan
Tara Rose
Jay Ellington
Keith Rotzoll

Andrew Franzyshen Fota Sall

MaRendia Garner Norris Stevenson
Sheriff Ernest Giles Terrelle Stewart

Marie GrantKelly StockDr. Melody HackneyLaJeune StoneRobert HamlinTabitha TaylorDr. Alton Hart, Jr.Julie ThackerRustin JesseeDr. Phyllis Tolliver

Beatrice Johns

William Johnson

Cathy Jones

Christy Lemay

Paula Tomko

Andrea Torres

Kristin Vaughan

Ray Vines

Horace Wade

Kathleen Ware

Jennifer Lewis Marlene Waymack
Valerie Liggins Shantae Wheeler

Jackie Lipford Dr. Charlette Woolridge

LaSonya White

Glossary of Key Terms

Ad Hoc Committees – Temporary, locality-specific working groups formed to conduct Community Health Assessments, composed of community members and representatives from the local public health system.

Active Transportation – Forms of travel that involve physical activity, such as walking, biking, and wheelchair use, often supported by safe and accessible infrastructure.

Built Environment – Human-made surroundings, such as buildings, parks, roads, and transportation systems, that influence health and quality of life.

CHAC (Crater Health Advisory Council) – A multi-jurisdictional, cross-sector council established to review assessment findings, set a shared vision, determine strategic priorities, and guide implementation of the Regional Health Improvement Plan.

CHA (Community Health Assessment) – A systematic process for collecting and analyzing information on a community's health status, needs, and assets to guide planning and policy.

CHNA (Community Health Needs Assessment) – An assessment similar to a CHA, often conducted by hospitals or foundations, to identify and prioritize community health needs.

CHSA (Community Health Status Assessment) – A quantitative assessment analyzing health data and quality-of-life indicators to identify key health issues.

CTSA (Community Themes and Strengths Assessment) – A qualitative assessment that gathers community perspectives on health needs, assets, and priorities through surveys, focus groups, and asset mapping.

Equity / Health Equity – The state in which everyone has the opportunity to be as healthy as possible, requiring removal of barriers such as poverty and discrimination.

Food Deserts - Geographic areas where residents have limited access to affordable and nutritious food.

FOCA (Forces of Change Assessment) – A process to identify external trends, events, and factors that could affect the community's health and quality of life.

Green Infrastructure – Natural and semi-natural systems (e.g., parks, trees, trails, waterways) that provide environmental, health, and social benefits.

MAPP (Mobilizing for Action through Planning and Partnership) – A community-driven strategic planning framework for improving public health, developed by the National Association of County and City Health Officials.

Public-Private Partnership – A cooperative arrangement between public agencies and private-sector entities to address community needs, such as healthy food access.

RHIP (Regional Health Improvement Plan) – A long-term, regional, community-driven plan to address health priorities identified in a region's CHAs.

Social Determinants of Health – Conditions in which people are born, grow, live, work, and age that affect health outcomes, such as housing, education, and transportation.

Background

The Crater Health District—encompassing the cities of Emporia, Hopewell, and Petersburg, as well as the counties of Dinwiddie, Greensville, Prince George, Surry, and Sussex—is committed to improving public health through collaborative partnerships. Twenty-first-century public health emphasizes cross-sector collaboration to tackle health inequities, with a focus on the social determinants of health. These determinants include access to preventive healthcare, quality schools, healthy and affordable foods, quality and affordable housing, lower crime rates, and factors related to the built and natural environments.

To align priorities and resources across all Crater Health District communities, the Crater Health District established the multi-jurisdictional, cross-sector Crater Health Advisory Council (CHAC) on August 21, 2023.

In 2023, the Crater Health District completed Community Health Assessments (CHAs) in all eight localities through collaboration with The Cameron Foundation, which completed its fifth Community Health Needs Assessment (CHNA) the same year. With these assessments as the foundation, the Crater Health Advisory Council was convened to:

- Review the findings from these assessments;
- Develop a unified vision for a healthier Crater region;
- Determine data-driven strategic priorities based on CHA findings; and
- Create and mobilize the implementation of a plan to address the strategic priorities.

This undertaking has resulted in this unified Regional Health Improvement Plan.

Community Health Assessments

A Community Health Assessment (CHA) is a comprehensive evaluation that captures the overall health and well-being of a community. Typically led by health departments or similar organizations, CHAs help identify local health challenges, prioritize needs, and guide long-term health improvement strategies. On average, completing a CHA takes 12 to 18 months due to its detailed and collaborative nature.

The Crater Health District completed seven CHA processes between February and July 2023 for all eight localities. The process was guided by the *Mobilizing for Action through Planning and Partnership* (MAPP) framework, developed by the National Association of County and City Health Officials (NACCHO). This framework structures the CHA process into six phases, with the first three focused on assessment and the final three on community health improvement planning (CHIP).

To meet local needs and timelines, the Crater Health District adapted the MAPP model to align with The Cameron Foundation's concurrent Community Health Needs Assessment (CHNA). The district collaborated with The Cameron Foundation and the Institute for Public Health Innovation (IPHI), participating on the CHNA Steering Committee and assisting with data collection.

The CHA began with the formation of diverse, locality-specific Ad Hoc Committees composed of community members and representatives of the local public health system. Committees were organized into regional pairs for efficiency (e.g., Petersburg/Dinwiddie, Hopewell/Prince George, Surry/Sussex, and

Greensville/Emporia), though each locality developed its own vision and completed individual assessments—except for the combined Greensville/Emporia CHA.

Each committee developed vision statements to guide its locality's health priorities, then conducted two key assessments:

- 1. **Community Health Status Assessment (CHSA)** Analyzed quantitative health data and quality-of-life indicators to identify pressing health issues. Each group reviewed over 100 indicators and prioritized 10–15 based on health impact, disparities, and feasibility.
- 2. **Community Themes and Strengths Assessment (CTSA)** Gathered qualitative insights from surveys, focus groups, and community asset maps. Committees synthesized this information to identify issues, assets, and perceptions.

Regional Health Improvement Planning Process

Typically, a community health assessment process yields a single Community Health Improvement Plan (CHIP). However, Crater recognized the need for an innovative approach. The Crater region—home to just over 160,000 residents—comprises five rural counties and three small cities, stretching from 23 miles south of Richmond, Virginia, to the North Carolina border. The area is chronically underserved and under-resourced, with a low tax base and high need, as many localities experience significantly worse-than-average health outcomes.



Chronic workforce shortages meant that neither the localities nor the Health District had the capacity to implement seven separate CHIPs. Additionally, many community organizations serve more than one locality and have overlapping footprints. For these reasons, the Crater Health District determined that a single, unified Regional Health Improvement Plan was the best approach and convened the Crater Health Advisory Council (CHAC) to guide the process.



The CHAC began the planning process in October 2023 by completing a third assessment, the **Forces of Change Assessment (FOCA)**. This facilitated process reviewed regional trends, factors, and events—past and potential—that could impact health and quality of life.

Next, the Council reviewed "cross-walked" data from the seven CHAs, created a single unified vision for the region, and, using the assessment data, determined strategic priorities, goals, and objectives.

Regional Health Improvement Plan

The Regional Health Improvement Plan that follows is intended to guide the local public health system's implementation of the five-year plan. Annual reviews will be conducted by the Crater Health Advisory Council to track progress and make adjustments as needed. This plan is a "living document," with all revision dates noted in the footer.

Vision for Crater Region

Visioning was the first step in creating the Regional Health Improvement Plan. Establishing a shared vision for improved health and quality of life set the stage for the planning process. The vision was crafted to be aspirational but achievable. The Advisory Council created a statement describing a healthier Crater region 10 years in the future, drawing on vision statements from each locality's CHA committees.

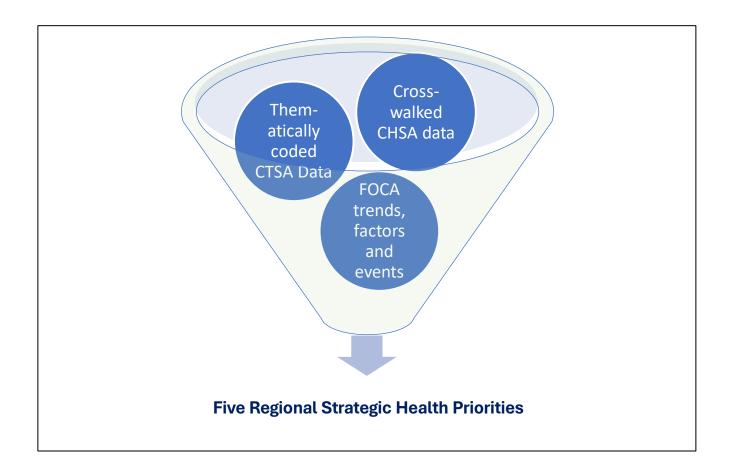
Vision Statement:

Crater is a healthy, diverse, welcoming, and active community making strides towards an equitable future for all.

Strategic Health Priorities Identified

The Crater Health Advisory Council reviewed data from three main sources to determine the strategic issues to include in the Regional Health Improvement Plan:

- 1. **Cross-walked CHSA data** from the seven Community Health Status Assessments. The "cross-walk" compiled all health indicators that at least three localities had prioritized. For each indicator, data from all Crater localities were provided, along with an explanation and benchmarks (state, federal, and—when available—health disparity data).
- 2. **Thematically coded CTSA data** from the seven Community Themes and Strengths Assessments. This included common assets, issues, perceptions, survey results, asset maps, and focus group comments.
- 3. FOCA data from the regional Forces of Change Assessment completed by the Advisory Council.



The Council extensively reviewed all the data to establish key themes. Strategic issues were defined as fundamental policy choices or critical challenges that must be addressed to achieve the vision for a healthier region. Each issue had to be supported by data from at least two of the three assessments.

The strategic health issues, phrased as questions, are:

- → How can we ensure equitable access to healthy foods throughout the Crater region?
- → What regional strategies can we utilize to address crime and public safety?
- → How can public health systems partners enhance access to quality, affordable healthcare, including medical, dental, and mental healthcare?
- → How can our communities **prepare our youth to thrive in adulthood**?
- → What improvements to the built environment (e.g., transportation access and affordable housing) and green infrastructure will advance health equity in our region?

Overarching Strategic Approaches Applied to All Goals and Objectives

There are three overarching strategic approaches that will be applied to all of the following goals and objectives. These strategic approaches are designed to foster community and stakeholder buy-in by increasing public knowledge and build capacity for the implementation of high-impact tactics.

Educate

Educate the public and stakeholders, including local leadership, on the issues addressed in the regional health improvement plan by creating and disseminating region-specific information on the topics in the plan. This includes planning, creating, and sharing podcasts, live webcasts, town halls and other information sources throughout the Crater region.

Formalize Partnerships

Create formalized partnership agreements to ensure that the organizations, rather than just the individuals representing them, are committed to long-term support for implementing the objectives in the Regional Health Improvement Plan.

Policy Briefs

Create policy briefs for each goal, prioritizing briefs based on strategic alignment with extant initiatives or opportunities.

Goals and Objectives

The following goals and objectives were developed by the Crater Health Advisory Council over the course of several months, which included reaching out to additional partners for subject matter expertise, identifying opportunities for alignment with other planning processes, and small group and whole group discourse and review. The goals are intended to be achieved by the end of the duration of the five-year plan; however, the majority of the objectives are intended to be achieved within the first two or three years, unless otherwise stated. Some objectives are supported by bulleted tactics that describe how to accomplish the objective. The plan will be reviewed annually by the Crater Health Advisory Council and additional objectives will be developed as the work evolves.

Strategic Issue 1: Equitable Access to Healthy Foods

Goal 1.1: Increase accessibility, availability, and affordability of healthy foods to reduce food insecurity throughout the Crater region.

Objective 1.1.1: Create a regional public-private partnership to address food insecurity in the Crater region and take the ownership of Goal 1 objectives.

- Starting with Crater Health Advisory Council, use snowballing to find partners who are interested in working on food insecurity.
- Create an inventory of potential food system assets and resources (e.g. PHOP's (Petersburg Health Options Partnership) van, refrigerators, storage spaces).

- Tap into existing partnerships and collaborations for opportunities for alignment (e.g. the regional collaboration initiated by Greensville-Emporia Community Health Action Team (CHAT).
- Determine what is already happening, what is working and what is not, and what can be sustained through local funding opportunities.

Objective 1.1.2: Identify barriers to healthy food access by engaging those living in food deserts throughout the Crater region.

- Review completed Crater area food system related analyses to determine what information we already have and know.
 - o Identify geographic areas of greatest need for implementation.
- Host 3 regional (2 rural and 1 city) town halls or community conversations in 2025 to get community member feedback on barriers to healthy food access.
 - Provide meals for participants.
 - o Explore virtual or webcast options and Uber eats home delivery vouchers for participants.

Objective 1.1.3: Increase the number of healthy food vendors (e.g. markets, healthy corner stores, indoor farmer's markets) throughout the district by 5 in the first two years of implementation.

- Build a rural regional network of farmers.
 - o Connect with farmers to determine interest and capacity.
- Utilizing information from the town halls, develop locality-specific strategies for food vendors.
- Meet with local leaders to share the results from the town halls and garner support for new initiatives.
- Find regional funding opportunities to fund regional collaborations and healthy food initiatives.

Objective 1.1.4: Increase the number of healthy eating supports (e.g. healthy food literacy initiatives, food as medicine programs, etc.) throughout the district by 5 in the first two years of implementation.

- Establish partnerships with schools, churches and community centers to promote farmer markets and food distribution sites.
- Explore "Food as Medicine" delivery model for Crater, including healthcare reimbursement options.
- Explore Uber Eats and Door Dash to provide support to families with limited transportation.
- Connect with potential local organizers and churches to establish new farmer's markets yearround.
- Explore Voucher system as a resource for families.

Strategic Issue 2: Address Crime and Public Safety

Goal 2.1: Improve social connectedness and community resilience throughout Crater.

Objective 2.1.1: Increase participation in mentorship and youth programs.

- Create an inventory of youth-centered programs in Crater.
 - o Create baseline measure in year and review after two years of implementation.
- Look at existing models, such as The Well, to learn about collaborations that work.
- Connect with regional funders to replicate programs that work.

- Connect students to existing underutilized community assets (e.g. Dinwiddie Recreation Center).
- Utilize sports activities in existing programs that implement social/emotional learning.
- Incentivize participation by having participants pay at a low cost.
- · Remove transportation barriers and provide food.
- Provide accommodations for youth with special needs.

Objective 2.1.2: Increase the percentage of adults living in Crater who are participating in a social and civic organizations.

- Create an inventory of social and civic organizations, including the number of participants.
 - o Create baseline measure in year and review after two years of implementation.
- Connect with organizations that build communal spaces to learn about how to replicate what they do.
- Create grassroots opportunities for civic engagement.
 - Partner with Legal Aid's program Equal Justice and Virginia Interfaith Center for Public Policy.
- Assess adults social and civic engagement interests, self-efficacy, and readiness to engage.
- Increase education and awareness about why social and civic engagement are crucial to health and wellbeing.

Objective 2.1.3: Increase the number of positive interactions with law enforcement in the Crater region.

- Create an inventory of violence prevention and community policing programs throughout the district.
 - o Create baseline measure in year and review after two years of implementation.
- Reach out to REAL Life violence prevention program to learn about their projects and programs.
- Utilize national night out program as a foundation for community connectedness.
- Connect with local businesses, civic organizations, and faith-based organizations.
- Train law enforcement throughout the district in trauma-informed practices, Mental Health First Aid, and similar trainings.
 - Connect with District 19 Community Services Board to find opportunities for alignment and partnership.
- Research restorative justice models for policing.
- Assess readiness for change and training among criminal justice officials in the region.
- Research grant opportunities, such as the Centers for Disease Control's Violence Prevention Coaching Boys into Men, and the Substance Abuse and Mental Services Administration's How Being Trauma-Informed Improves Criminal Justice Responses.

Strategic Issue 3: Access to Quality, Affordable Healthcare, Including Medical, Dental, and Mental Healthcare

Goal 3.1: Increase utilization of available medical, dental, and mental healthcare services throughout Crater.

Objective 3.1.1: Improve service navigation throughout Crater Region

- Mobile units to increase access to medical service in communities.
- Support Regional Area Medical (RAM) clinics or similar initiatives and develop a follow up system or plan with organizations and patients to connect to a primary care service provider.
- Repurpose church facilities to utilize as a pop-up health hub for medical services in low access communities.
- Partner with CVS minute clinics.
 - Determine what other potential partners exist and/or develop new partnership opportunities.

Objective 3.1.2: Improve access to telehealth services, prioritizing high need

- Set up telehealth stations in libraries, churches, and other potentially confidential sites to increase accessibility to telehealth services.
 - Centers will have access to health literacy information, such as the Weekly Wellness Check.
 - Health stations set up with credible health information to promote health literacy.
- Coordinate with existing library checkout programs, such as mobile hotspots and blood pressure cuff checkouts, to support access to telehealth appointments at home.
- Offering digital literacy trainings and guides directed at senior citizens and link this information to telehealth sites.
- Explore connecting remote telehealth hubs with language access services and patient advocates.
- Pilot for Rural Communities for telehealth services or community health hub.
- Provide opportunities to cover the co-pays for telehealth services for those uninsured and underinsured.
- Develop transportation options to telehealth sites.
- Research funding opportunities and secure funding for telehealth sites, support staff, and marketing.

Objective 3.1.3: Increase health literacy of high risk, high need populations, including digital literacy, chronic disease management, medication management, healthcare navigation, and other topics.

- Establish programs for Community Health Workers (CHWs) to offer appointment-based virtual telehealth appointments to provide health education, health literacy, and linkages to resources.
- Identify a comprehensive listing of medical and dental services and marketing those services that are available in the community.
- Host evening and weekend information and health literacy sessions to engage community members and assess their health care knowledge.
- Partner with local community organizations to provide health care on site to their clients (building trust with community members who have trust in the local organization).
- Provide transportation.
- Deliver training on cultural sensitivity and communication with non-native English speakers to providers.

Strategic Issue 4: Youth Prepared to Thrive in Adulthood

Goal 4.1: Increase partnerships that provide opportunities for youth/young adults to access life skills education, including financial, workforce, social-emotional, health literacy, etc.

Objective 4.1.1: Increase opportunities for and participation in programmatic supports providing life skills education and hands-on experiences.

- Create baseline inventory of existing youth programs and assess gaps and needs.
- Increase career days in schools for ages Pre-K through grade 12.
- Increase opportunities for field trips.
- Provide opportunities for real life experiences.
- Increase the number of partnerships that lead to employment.
- Assess and enhance career and technical education opportunities (CTE) throughout the district.

Objective 4.1.2: Develop a multi-sector adolescent health and wellness stakeholder group to develop policy, systems, and environmental change strategies aimed at increasing youth and young adult access to life skills development.

- Develop a comprehensive list of organizations to invite to the adolescent stakeholder group that encompasses community members and subject matter experts in a variety of youth-related fields.
- Host adolescent health focus groups throughout the region.
- Convene adolescent health stakeholder group to develop priorities and actions.
- Align with existing groups, such as the Emporia Community Health Action Team (CHAT) and Petersburg Healthy Communities Action Team (HCAT).

Strategic Issue 5: Improvements to the Built Environment and Green Infrastructure to Advance Health Equity

Goal 5.1: Increase community utilization of green spaces, including parks, trails, and waterways.

Objective 5.1.1: Develop and enhance welcoming community spaces that promote equitable access to opportunities for community connections and physical activity.

- Review planning documents from each locality for mentions of green spaces and related goals.
 - Find opportunities for alignment with existing planning documents and regional health improvement efforts.
 - Bring partners together to discuss opportunities for partnership and alignment.
- Prioritize localities for land conservation efforts (for public use).
- Encourage localities to enhance and build green spaces (using existing lands and newly acquired lands).
- Find and support funding opportunities for facility development and/or enhancement and the development and/or enhancement of parks, green spaces, and waterways.

Objective 5.1.2: Create events and activities that are designed to increase equitable access to green spaces, including parks and trails throughout the Crater region.

- Create joint use agreements between local government and community-based organizations for multifunctional community facilities.
- Develop an education campaign that encourages everyone to get out and use parks and recreation spaces.
- Develop an environmental education campaign.
- Partner with localities, sports and outdoors organizations, and green spaces education organizations to create activities to promote equitable outdoor activity and conservation.
- Partner with existing walking groups to provide tours of trails, outdoor spaces, and historic sites.

Goal 5.2: Increase active transportation options.

Objective 5.2.1: Develop a harmonious transportation network for the Crater region.

- Create awareness of existing policies and plans.
 - Connect with Petersburg Healthy Option's Partnership's Active Transportation group, Tri-City Area Metropolitan Planning Organization, and other groups to learn about their work and opportunities to build upon that work.
 - o Increase public and political will for expanded active transportation options.

Goal 5.3: Improve housing quality and affordability.

Objective 5.3.1: Ensure that every Crater locality has policies focused on improving housing quality and affordability.

- Study regional housing needs (Crater Planning District Commission).
- Create uniform policies for affordable housing that localities can use as local guidelines.

Goal 5.4: Increase options for persons at-risk of and/or experiencing homelessness.

Objective 5.4.1: Support the regional task force of those working within homeless services (providers, community stakeholders, funders, local governments) to develop universal definition and plan to maximize existing providers/funding and develop capacity of new providers/partnerships using best practices, to include data collection.

- Determine the current state of the Crater Area Coalition on Homelessness (CACH).
- Meet with the Department of Housing and Community Development (DHCD) to understand the current state of funding allocated to Crater for services.

Objective 5.4.2: Develop an emergency response to address immediate needs of those experiencing homelessness in each locality.

- Identify shelters and transitional housing options in the region and share with key stakeholders.
- Explore funding opportunities to address the need for emergency housing.

Implementation of the Regional Heath Improvement Plan

No person, organization, or coalition acting alone will be able to successfully address the critical health and quality of life issues addressed in the Crater Regional Health Improvement Plan. This plan was developed by the Crater Health Advisory Council with significant input from the community through the community health assessment process. Successful implementation of the Crater Regional Health Improvement Plan will require broad support and involvement. The following graphic describes the roles and responsibilities of the Crater Health Advisory Council, the Crater Health District, and our stakeholder partners and Crater communities.

Crater Health Advisory Council

- Mobilize effective partnerships and initiatives to support the implementation of the plan
- Create policy briefs and provide outreach to decision makers
- Annually review the Regional Health Improvement Plan and make necessary updates
- Measure progress toward achieving plan goals and provide updates to partners and stakeholders

Crater Health District

- Staff the Crater Health Advisory Council, which includes providing meeting facilitation, Advisory Council communication, data support for continued measurement toward progress of achieving the plan's goals, and evaluation support
- Drives the process

Stakeholder Partners and the Community

- Supporting the implementation of the plan by participating in or leading efforts to address plan goals and objectives
- Finding opportunities for alignment with other community initiatives
- Devleoping and sustaining resources that support plan objectives

Conclusion

For many years, public health has emphasized the need for cross-sector collaboration, acknowledging that our nation's health challenges are deeply rooted and multi-faceted. In an under-resourced region such as Crater, public health leadership understood that regional collaboration would be critical to achieve true community health improvement. The seven community health assessments completed in 2023 can be found here: https://www.vdh.virginia.gov/crater/2023-community-health-assessments/

Thank you for reading the Crater Regional Health Improvement Plan.