



**UVA Health Haymarket Medical  
Center  
Community Health Needs Assessment  
Prince William, Fauquier and Manassas City, Virginia  
2022-2024**

**Approved by the Unified Community Board on 9/1/2022 and UVA Community Health Inc. Board 9/8/2022  
Update approved by the Unified Community Board on 5/15/24 and UVA Community Health Inc. Board 5/15/24**

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## I. Introduction

UVA Prince William Medical Center doing business as UVA Health Haymarket Medical Center (HAMC), in partnership with the Community Healthcare Coalition of Greater Prince William inclusive of Prince William Health District, Sentara Northern Virginia Medical Center and UVA Health Prince William Medical Center, conducted a Community Health Needs Assessment (CHNA) in 2022 to determine the most pressing health needs in the community. The assessment identifies significant health needs of vulnerable populations in the greater Prince William area. UVA Health Haymarket Medical Center will strengthen the community's health by offering health and wellness programming, clinical services, and financial support in response to the specific health needs identified.

### ***a. Organizational overview***

On July 1, 2021, UVA Health Haymarket Medical Center became part of UVA Health along with two additional medical centers located in greater Prince William and Culpeper. This means that our combined network of physician offices, outpatient facilities and medical centers are now UVA Health which also includes UVA Medical Center in Charlottesville – an academic health system, UVA School of Medicine, UVA School of Nursing, UVA Physicians Group and the Claude Moore Health Sciences Library.

UVA Health exists to transform health and inspire hope for all Virginians and beyond. Our employees and physician partners strive every day to bring our mission, vision and values to life. We demonstrate this commitment to our patients by working together to be the nation's leading public academic health system and best place to work – while transforming patient care, research, education and engagement in the diverse communities we serve.

Our organization:

- Maintains an active community health outreach program
- Demonstrates superior outcomes for many health conditions as indicated by our state and national quality scores
- Develops nationally recognized innovative programs that address significant health issues
- Seek partnerships that aim to reduce health inequities
- Invests in non-profit organizations that address identified health needs
- Is committed to its responsibility to work with community organizations and governmental agencies to make our communities better places to live, work and play.

UVA Health Haymarket Medical Center (formerly Novant Health UVA Health System Haymarket Medical Center) is a 60-bed acute care community hospital with a comprehensive offering of services. This includes a 24/7 emergency department, outpatient surgery center, and comprehensive specialty services. We bring together world-class technology and clinicians to provide a high-quality healthcare experience so patients can focus on healing and wellness.

**b Our defined community**

UVA Health Haymarket Medical Center defines the community it serves by the zip codes that represent 75% to 85% of the hospital's in-patient population outlined below.

Zip Code	City	County/Jurisdiction
20110	Manassas	Manassas City
20109	Manassas	Prince William
20136	Bristow	Prince William
20155	Gainesville	Prince William
20169	Haymarket	Prince William
20181	Nokesville	Prince William
20187	Warrenton	Fauquier

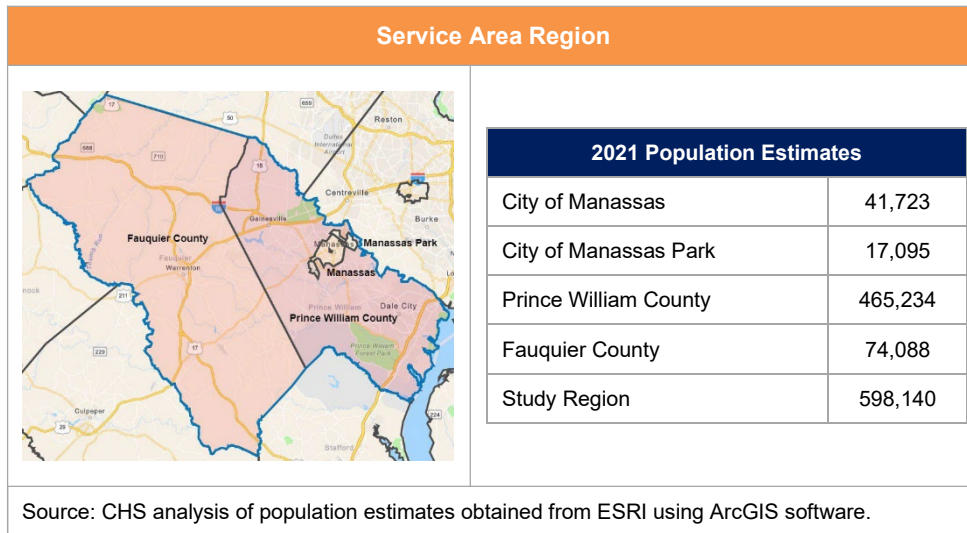
A comparison of county data from each geographic area from which the hospital draws its patients was conducted. Based on county populations, comparison of race/ethnicity, median income, educational attainment, persons in poverty and foreign-born individuals, greater Prince William residents represents the highest population of potentially underserved, low-income and minority individuals.

Demographic factors such as age, income, and other characteristics can influence health and well-being for individuals and populations. This section presents a demographic profile of the population residing in the CHNA study region.

Section Outline	
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**i. Total Population and Projected Growth**

The study region for the CHNA study includes the cities of Manassas and Manassas Park, Prince William County, and Fauquier County. As shown, the study region was home to an estimated 598,140 people as of 2021. The projected population growth in the study region is an estimated 36% between 2021 and 2040, as compared to 14% for Virginia.



**Service Area Population Projections, 2021-2040**

Location	2021 Estimate	2030 Projection	2040 Projection	% Change 2021-2040
City of Manassas	41,723	46,332	48,916	17%
City of Manassas Park	17,095	20,284	23,153	35%
Prince William County	465,234	571,844	656,178	41%
Fauquier County	74,088	78,698	84,851	15%
Region Total	598,140	717,158	813,098	36%
Virginia	8,695,186	9,331,266	9,876,728	14%

Source: CHS analysis of population estimates and projections produced by ESRI (for 2021) and by the Weldon Cooper Center for Public Service at the University of Virginia (for 2030 and 2040).

**ii. Demographic Snapshot Profile**

As outlined in the demographic snapshot profile chart, UVA Health Haymarket Medical Center serves patients from the greater Prince William area which includes the City of Manassas, Prince William County and Fauquier County. As of 2021, the greater Prince William area is home to an estimated 598,140 people with a projected population growth of 36% between 2021 and 2040 as compared to a 14% population growth for the state Virginia.

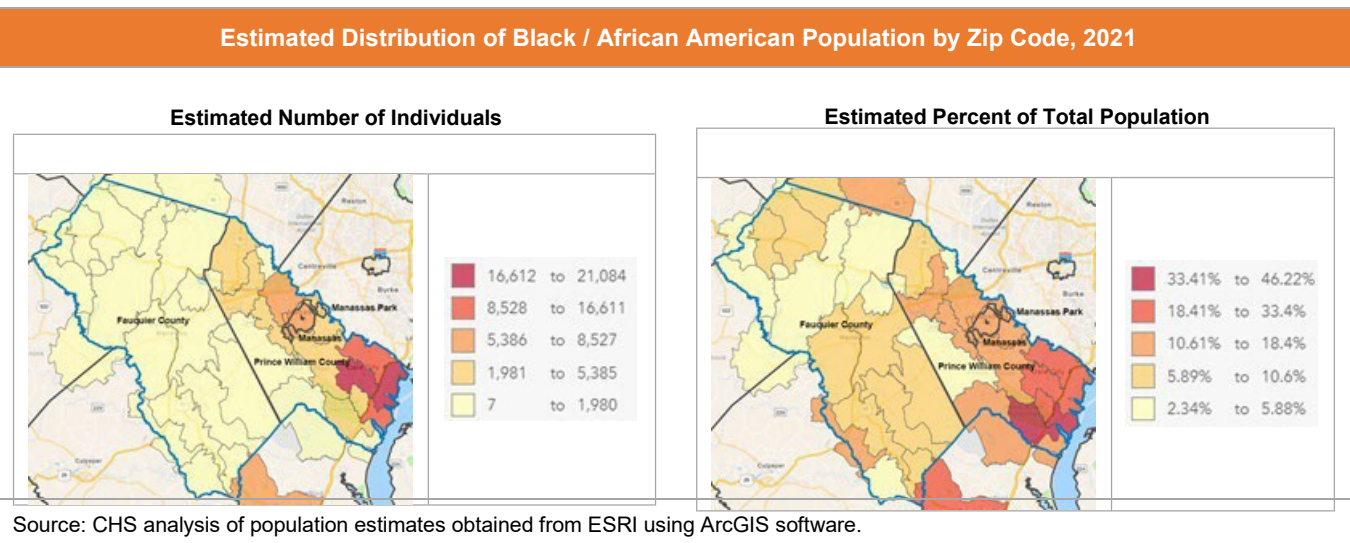
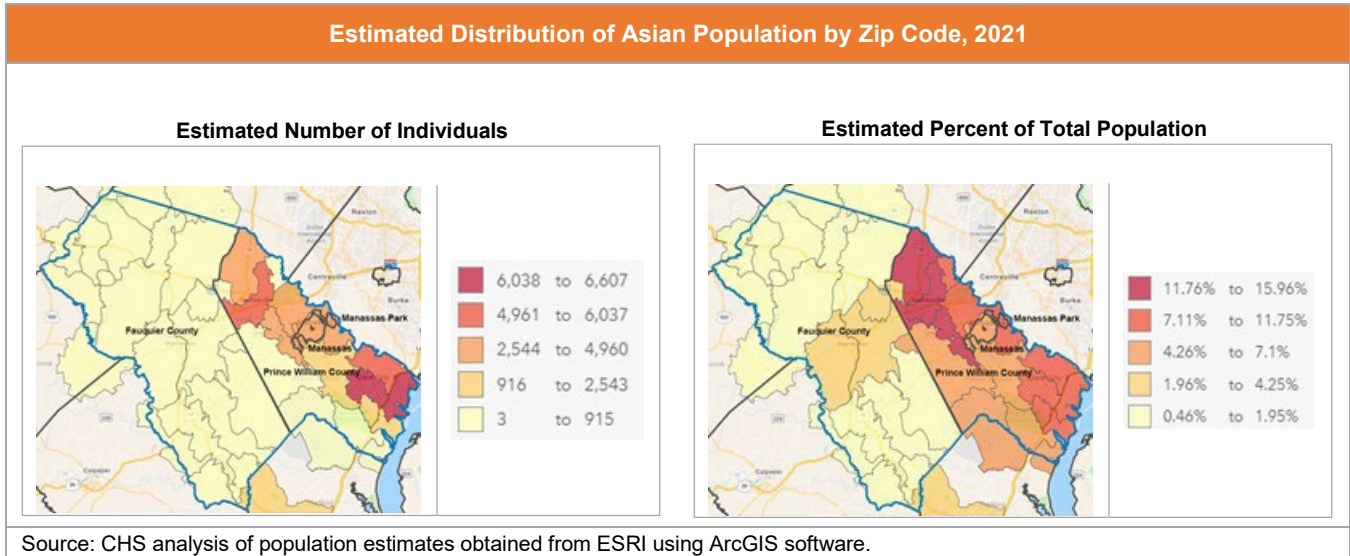
The table below is a demographic profile of the region as of 2021 unless otherwise noted.

Demographic Snapshot Profile					
Indicator (Note: All definitions from US Census Bureau)	City of Manassas	City of Manassas Park	Prince William County	Fauquier County	Virginia
2021 Total Population	41,723	17,095	465,234	74,088	8,695,186
<b>Age</b>					
2021 Median Age	34.6	32.7	35.6	43.2	39.2
2021 Child Population (Age <18)	25.8%	26.8%	26.4%	21.7%	21.2%
2021 Working-Age Population (Age 18-64)	62.9%	64.9%	62.4%	60.0%	62.0%
2021 Senior Population (Age 65+)	11.3%	8.3%	11.2%	18.3%	16.8%
<b>Sex</b>					
2021 Male Population	50.2%	50.5%	49.5%	49%	49.2%
2021 Female Population	49.8%	49.5%	50.5%	51%	50.8%
<b>Race and Ethnicity</b>					
2021 American Indian/Alaska Native Population	0.7%	0.5%	0.5%	0.4%	0.4%
2021 Asian Population	6.2%	11.4%	9.7%	1.8%	7.0%
2021 Black/African American Population	14.3%	14.2%	21.2%	7.5%	19.5%
2021 Pacific Islander Population	0.2%	0.1%	0.2%	0.1%	0.1%
2021 Other Race Population	18.6%	21.7%	10.9%	3.7%	4.1%
2021 White Population	54.9%	46.2%	51.3%	83.0%	65.1%
2021 Population of Two or More Races	5.1%	5.9%	6.3%	3.5%	3.9%
2021 Race Other than White Alone	45.1%	53.8%	48.8%	17.0%	34.9%
2021 Hispanic Population	40.1%	43.8%	25.9%	10.2%	10.3%
2019 Pop 18-64 Speak Spanish & No English	2.0%	0.5%	0.9%	0.1%	0.3%
<b>Educational Attainment</b>					
2021 Population Age 25+: Less than 9th Grade	8.4%	7.3%	5.3%	2.4%	3.6%
2021 Population Age 25+: 9-12th Grade/No Diploma	8.1%	9.0%	5.4%	4.7%	6.1%
2021 Population Age 25+: No Diploma	16.5%	16.3%	10.7%	7.0%	9.8%
<b>Income</b>					
2021 Per Capita Income	\$35,097	\$35,986	\$43,388	\$47,498	\$41,359
2021 Median Household Income	\$84,376	\$89,109	\$106,704	\$104,260	\$76,448
2021 Median Disposable Income	\$63,627	\$67,151	\$80,821	\$79,132	\$58,392
2019 Households Below the Poverty Level	8.4%	4.4%	5.8%	5.9%	10.3%
2019 Population Below 100% Poverty Level	8%	6%	7%	6%	11%
2019 Population Below 200% Poverty Level	24.6%	23.3%	18.4%	12.9%	24.8%

Source: CHS analysis of population estimates and projections obtained from ESRI using ArcGIS software

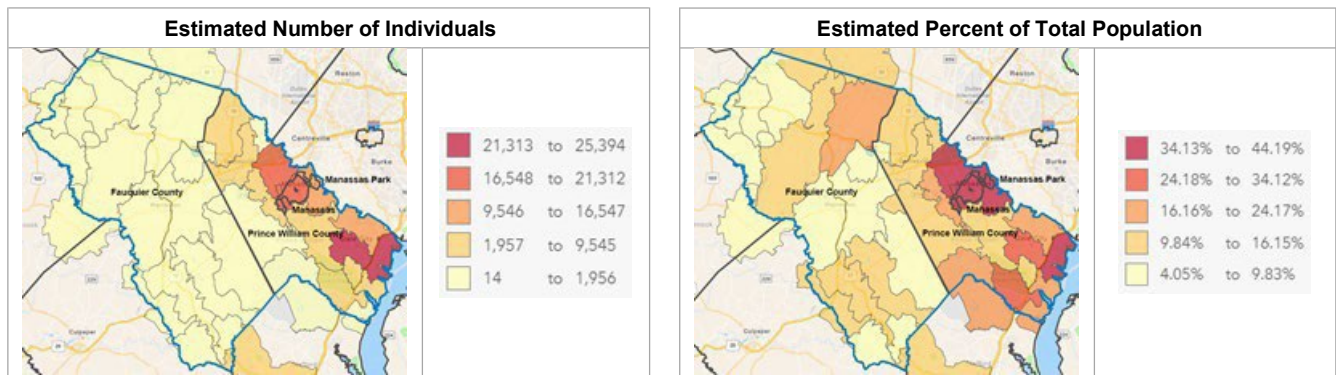
**iii. Racial, Ethnic, and Language Diversity**

The graphs below illustrate variation in the presence of community population segments by race, ethnicity, and language as of 2021. In these maps the red-shaded areas indicate a higher presence of each population, and the yellow-shaded areas indicates a lower presence. The maps indicate that members of the Asian, Black / African American, and Hispanic population segments are present throughout the region, but there are wide variations in both the estimated numbers and percentages represented by each group at the zip code level.



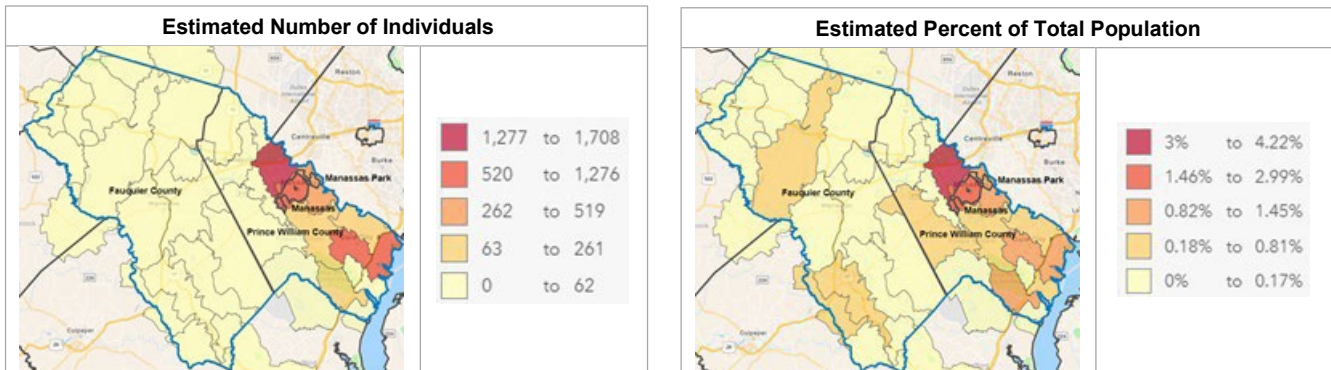


**Estimated Distribution of Hispanic Population by Zip Code, 2021**



Source: CHS analysis of population estimates obtained from ESRI using ArcGIS software.

**Estimated Population Age 18-64 Speaking Spanish with No English by Zip Code, 2019**



Source: CHS analysis of population estimates obtained from ESRI using ArcGIS software.

**Greater Prince William County and City of Manassas Population: Demographics**

As outlined in the demographic snapshot profile chart, UVA Health Haymarket Medical Center serves patients from the greater Prince William area which includes the City of Manassas, Prince William County and Fauquier County. As of 2021, the greater Prince William area is home to an estimated 598,140 people with a projected population growth of 26% between 2021 and 2040 as compared to a 14% population growth for the state Virginia. HAMC’s patient population is composed of the highest number of potentially underserved, low-income and minority individuals from the Primary Service Area who also experience language barriers with limited English proficiency. As the majority of patients also reside in the greater Prince William community, it will be the sole focus of demographic, health and social indicators.

To develop a deeper understanding of local demographics, it can be helpful to ‘look inside’ city and county boundaries for diversity in population demographics by zip code. By exploring this type of demographic diversity, it is possible to appreciate the rich diversity of the community, and also identify geographic areas with a higher presence of populations who may be more vulnerable to various health conditions.



The average median age of people from the City of Manassas, City of Manassas Park, and Prince William County is 34 years old. The median age of residents in Fauquier is higher at 43 years old as compared to the state's average age of 39 years old. Older adults use far more health care services than do younger groups. Although older adults vary greatly in terms of health status, the majority of this demographic group have at least one chronic condition that requires care.<sup>1</sup>

The diverse race and ethnicity of residents in the geographic area HAMC patients come from is higher compared to the Virginia's average. In 2021, 18.6% of people identified as 'other race population', 5.1% Population of two or more races, 45.1% race other than white along, and 40.1% Hispanic.

Educational attainment in the City of Manassas and City of Manassas Park is approximately 7% lower than the state average while Prince William County lags almost 1% below Virginia's 9.8%. Adults with higher educational attainment live healthier and longer lives compared to their less educated peers.<sup>2</sup>

At first glance, income levels for people living in the greater Prince William areas exceeds the Virginia average of \$76, 488 with the City of Manassas (\$84,376) and the City of Manassas Park (\$89,109). Prince William and Fauquier incomes remain the highest at \$106,704 and \$104, 260 respectively. Despite the higher levels of income, 8% of the people living in the City of Manassas are living 100% below the federal poverty level. This may be due to the high cost of living and other factors.

## II. Assessment process

The following are excerpts and findings from the study report produced by the collaboration of Community Healthcare Coalition of Greater Prince William inclusive of Prince William Health District, Sentara Northern Virginia Medical Center, UVA Health Haymarket Medical Center, and UVA Health Prince William Medical Center (see Appendix). To access the full report, please visit <https://uvahealth.com/services/community-relations>

### ***a) Collaborative Community Partners***

A community health needs assessment study was conducted as a partnership between the Community Healthcare Coalition of Greater Prince William (CHCGPW) inclusive of Prince William Health District, Sentara Northern Virginia Medical Center, UVA Health Haymarket Medical Center, and UVA Health Prince William Medical Center. A collaborative approach was employed in the partnership because our organizations are equally dedicated to improving the health inequities and health outcomes of our community through targeted efforts aimed at the social determinants of health, such as access to healthcare, economic stability, neighborhood and physical environment, access to education, and healthy food. Collectively, we serve the needs of all of Prince William County, surrounding counties and cities. By working together on this project, the partners streamlined the CHNA process to make the best use of available resources to identify community health needs and strategies for bridging gaps. Community Health Solutions, a research and consulting firm, provided research and consulting support for the project.

<sup>1</sup> Health Status and Health Care Service Utilization; <https://www.ncbi.nlm.nih.gov/books/NBK215400/>

<sup>2</sup> The relationship between education and health: reducing disparities through a contextual approach; <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5880718/>

**b) Solicitation**

In assessing the community's health needs, input was solicited from persons who represent the broad interests of the community, including those with special knowledge of or expertise in public health. Both community members, professionals and stakeholders shared their insights about community health, and their ideas for how to improve health and health care in greater Prince William County. In addition, the Virginia Department of Health Prince William District (CHCGPW member), with knowledge, information, and expertise relevant to the health needs of the community participated along with members of medically underserved, low-income, and minority populations in the community served by the hospital facility, individuals and organizations representing the interests of these populations. The CHNA documents written comments received on the hospital facility's most recently conducted 2019-2021 CHNA and most recently adopted implementation strategy.

Please note that by design, the report does not include every possible indicator of community health. The analysis is focused on a set of community indicators that provide broad insight into community health and for which there were readily available data sources. However, nearly all of the available community health indicators are dated prior to the onset of the COVID-19 pandemic in 2020. Consequently, the numbers alone do not capture the impact of the pandemic on community health needs and capabilities across the community.

In this context, the community insights provided by community residents and community professionals are especially important for understanding the current state of community health in the region. Hundreds of community stakeholders shared their insights about community health, and their ideas for how to improve health and health care in the region. The results can be helpful for understanding the scope and magnitude of health concerns within the community, especially at this moment in time when the community is recovering from the profound impacts of the pandemic.

**c) Data Collection and analysis**

The survey of community residents was designed to capture insights about community health needs and opportunities for improvement. The study was conducted as a partnership between the Community Healthcare Coalition of Greater Prince William inclusive of Prince William Health District, Sentara Northern Virginia Medical Center, UVA Health Haymarket Medical Center, and UVA Health Prince William Medical Center.

A guiding aim of the survey was to be as inclusive as possible by gathering insights from all demographic groups, including low-income and minority populations. To help accomplish this aim, the survey was distributed through multiple channels including online and in local settings with the help of local partners.

Surveys were administered in paper copy in both English and Spanish. The survey was also made available online in available to be translated in any language. Links and QR code technology were employed to create easy access. Targeted distribution of paper surveys was utilized in an effort to reach areas of the population that may not have been able to access the online survey. Paper surveys were made available at local libraries, community events, at partner locations, through media outlets, at health fairs and to local community groups representing the medically underserved to ensure that participants surveyed represented the medically underserved, uninsured, low-income and minority populations.

It should be noted that the survey was conducted using convenience sampling methods. Convenience sampling is a practical approach for obtaining insights from as many people as possible. It differs from

probability sampling, which involves random selection of a smaller group of respondents that should be representative of the broader population. Consequently, the survey results are instructive for understanding the perceptions of a diverse cross-section of community members, but they are not presented as a definitive representation of the entire community population.

### III. Identifying and Prioritizing Health Needs

The CHNA survey identified the following key data points from participant responses:

- When asked to choose from a list of 18 health concerns that may affect children or adults in their community, respondents identified the top five health concerns: 1) Behavioral/Mental Health, 2) Dental/Oral Care, 3) Diabetes, 4) Overweight/Obesity, 5) Substance Use
- When asked to identify up to five factors that would keep themselves and their family healthy and improve their community, respondents identified the top five factors: 1) Access to mental health providers, 2) Affordable childcare, 3) Access to health and human services, 4) Access to community health education, 5) Access to parenting education and support programs
- The mortality rate in Virginia – a measure of the frequency of deaths in a defined population over a certain period of time, reveals health disparities, especially in the City of Manassas and the City of Manassas Park. Residents of greater Prince William experienced the highest mortality indicators as compared to other Virginians across the state. The leading causes of death are: 1) Heart Disease, 2) Cancer, 3) Cerebrovascular Disease (Stroke), 4) Unintentional Injury, 5) Alzheimer’s Disease, 6) Lung Cancer, 7) Prostate Cancer, 8) Chronic Lower Respiratory Disease, 9) Influenza and Pneumonia

#### ***a) Community Prioritization***

On March 29, 2022 and March 31, 2022, virtual community insight events were held to present CHNA survey results and receive input from community members and stakeholders representing the broad interests of the medically underserved, low-income, and minority populations. These town halls provided an opportunity to hear directly from the community in their own words.

The responses during these events highlighted the top five issues. The identified issues will be evaluated as part of the community benefit implementation planning process.

- 1) Behavioral/mental health (substance use)
- 2) Health education
- 3) Community partnerships
- 4) Affordable housing
- 5) Transportation

As with the survey of community residents, a survey of community professionals was designed to capture insights about community health needs and opportunities for improvement. A total of 77 persons representing community interests submitted a survey response, although not every respondent completed every survey item. Two town halls were also conducted, attended by stakeholders who are critically important to understanding and assessing the current state of community health in the region. Hundreds of community stakeholders shared their insights about community health, and their ideas for how to improve health and healthcare in the region. These results are helpful for understanding the scope and magnitude of health concerns within the community.

*UVA Health Haymarket Medical Center is committed to the health and wellness of its community. However, HAMC is unable to directly address affordable housing and transportation due to resource constraints, a lack of expertise and effective interventions.*

**b. Facility prioritization**

In addition to the community rankings, UVA Health Haymarket Medical Center (HAMC) reviewed the top five diagnosis codes for inpatient and outpatient hospital emergency room visits year- to-date July 1, 2021 to April 15, 2022.

UVA Health Haymarket Medical Center  
Emergency Department Top 5 Diagnoses YTD July-April 2022

Inpatient		Outpatient	
Diagnosis	Volume	Diagnosis	Volume
Sepsis, unspecified organism	115	COVID-19	976
COVID-19	54	Other chest pain	705
Acute kidney failure, unspecified	45	Headache, unspecified	266
Hypertensive heart disease with heart failure	45	Acute upper respiratory infection, unspecified	264
Unspecified bacterial pneumonia	39	Nausea with vomiting, unspecified	237

A review of the hospital emergency room visits indicates the top inpatient diagnosis codes are correlated with chronic issues that typically affect the aging population and also symptoms related to heart disease. Upon analysis of the outpatient diagnosis codes, it was apparent that many of the patients seen had symptoms that could be related to a number of chronic conditions,

including (but not limited to) chronic stress, heart disease, obesity, diabetes and other chronic issues related to aging. In addition, community stakeholders and community members' request to prioritize behavioral/mental health aligns with the community benefit implementation planning committee subject matter expert observed needs.

Upon a comprehensive review of the community's recommended prioritized outcomes, written comments from the previous CHNA and the Medical Center's emergency department top 5 diagnosis codes, UVA Health Haymarket Medical Center leadership team, Unified Community Board and UVA Community Health Inc. boards evaluated this information based on the scope, severity, health disparities associated with the need, and the estimated feasibility and effectiveness of possible interventions. Through this thorough evaluation, the team agreed on the following two top significant health priorities for HAMC community benefit implementation plan:

1. Behavioral/Mental Health (Substance Use)
2. Chronic Disease - Management and prevention

#### IV. Addressing needs

In the following section UVA Health Haymarket Medical Center will address each of the top two prioritized needs in the 2022-2024 community benefit implementation strategy. Each need includes actions that must be taken to achieve improved community health. Outlined within each need, HAMC will identify the description of need, programs, resources and intended actions, anticipated impact, priority populations, evaluation plan, intervention strategies, tactics for achievement, growth targets, and community partners. The following action plans were developed through evaluation of HAMC programs and resources. Further, Healthy People 2030 objectives<sup>3</sup> were reviewed and integrated into each priority area.

##### **a) Priority 1: Behavioral/Mental Health (Substance Use)**

About half of all people in the United States will be diagnosed with a mental disorder at some point in their lifetime.<sup>4</sup> In the Community Health Needs Assessment Survey, community residents were asked a series of questions related to health concerns. 60% of residents identified access to mental health providers as an area they would like to see added or improved and selected Behavioral / Mental Health (Anxiety, Depression, Bullying, Psychoses, Suicide) as a top concern for children (13%) and adults (18%). Another community health concern survey respondents shared was Substance Use (Alcohol, Drugs) was a top concern (47%). Participants of the town hall events confirmed this critical need. Additionally, the 2019 Virginia Youth Survey health indicators for Northern Virginia region show 30% of high school youth felt sad or hopeless every day for two weeks or more and 12% of high school youth considered attempting suicide.

##### **b) Priority 2: Chronic Disease – Management and Prevention**

Six in ten Americans live with at least one chronic disease, like heart disease and stroke, cancer, or diabetes. These and other chronic diseases are the leading causes of death and disability in America. In

<sup>3</sup> U.S. Department of Disease Prevention and Health Promotion. (2020). *Mental Health and Mental Disorders*. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/mental-health-and-mental-disorders>

<sup>4</sup> Centers for Disease Control and Prevention. (2022). *Mental Health: Data and Statistics*. [https://www.cdc.gov/mentalhealth/data\\_publications/index.htm](https://www.cdc.gov/mentalhealth/data_publications/index.htm)

the Community Health Needs Assessment Survey, respondents noted their most important community health concerns as cancer (47%), Overweight/Obesity (44%), Respiratory Disease (33%), and Heart Conditions (24%). Additionally, mortality indicators show Cancer and heart disease were the leading causes of death in local communities and for the state of Virginia in the timeframes shown. The City of Manassas had higher age-adjusted death rates for cancer, heart disease, and a number of other chronic conditions.

All programs, resources and intended actions to address both behavioral/mental health (substance use) and chronic disease in the implementation strategy are intended to assist the community with varying needs.

UVA Health Haymarket Medical Center is committed to working to address each of the identified areas of need through resource allocation and support of the following programs:

IDENTIFIED PRIORITY:	PROGRAM:	ACTION:	INTENDED OUTCOME:
1. Mental Health, Substance Use	Mental Health, Substance Use Education	Provide basic mental health education to individuals from various community sectors	Create awareness of the impact of substance use and mental health conditions and provide tools to build resiliency
2. Chronic Disease - Management and Prevention	Wellness Education and Screenings	Working in collaboration with community partners, to offer health education and subject matter expertise regarding healthy behaviors, chronic disease management and access to care.	Increase awareness of chronic disease prevention management and strategies.

In addition to the partnering with non-profit organizations to implement programs offered to the community through UVA Health Haymarket Medical Center, there are several existing community assets available throughout the Prince William Health District, City of Manassas City and City of Manassas Park that have additional programs and resources tailored to meet all of the identified health needs. The following is a list of community agencies that address those prioritized and non-prioritized needs:

Health Needs	Local Community Resources Addressing Needs
<ul style="list-style-type: none"> <li>• Access to Healthcare</li> <li>• Other Chronic Health Conditions</li> </ul>	<ul style="list-style-type: none"> <li>• American Cancer Society</li> <li>• Anthem Blue Cross and Blue Shield</li> <li>• Community Healthcare Coalition of Greater Prince William</li> <li>• Department of Social Services, Prince William County, City of Manassas and City of Manassas Park</li> <li>• Fauquier Free Clinic</li> <li>• George Mason University</li> <li>• Greater Prince William Community Health Center</li> <li>• Human Services Alliance of Greater Prince William</li> <li>• Independent Empowerment Center</li> <li>• Manassas Midwifery</li> <li>• Mason and Partners (MAP) Clinics</li> <li>• Mother of Mercy Free Clinic (Catholic Charities)</li> <li>• Northern Virginia Family Services (NVFS) SERVE Campus</li> <li>• UVA Health</li> <li>• PATH Foundation (Fauquier County)</li> <li>• Potomac Health Foundation</li> <li>• Prince William Area Free Clinic</li> <li>• Prince William County Community Services Board</li> <li>• Sentara Northern Virginia Medical Center</li> <li>• Virginia Department of Health - Prince William Health District</li> <li>• Women, Infants and Children (WIC)</li> </ul>
<p>Mental health resources including:</p> <ul style="list-style-type: none"> <li>• Alcohol use/abuse</li> <li>• Drug or Opiate use/abuse</li> </ul>	<ul style="list-style-type: none"> <li>• Action in Community Through Service (ACTS)</li> <li>• Alcoholics Anonymous</li> <li>• Alzheimer's Association</li> <li>• Celebrate Recovery</li> </ul>



	<ul style="list-style-type: none"> <li>• Chris Atwood Foundation</li> <li>• City of Manassas Police Department</li> <li>• Come As You Are (CAYA)</li> <li>• Court Appointed Special Advocates (CASA)</li> <li>• Fauquier Mental Health Collaborative (The Mental Health Association of Fauquier County)</li> <li>• Hispanic Organization for Leadership &amp; Action (HOLA)</li> </ul>
	<ul style="list-style-type: none"> <li>• National Alliance on Mental Illness - Prince William <b>(NAMI-PW)</b></li> <li>• Narcotics Anonymous</li> <li>• Northern Virginia Veterans Association</li> <li>• PRS Crisislink</li> <li>• Prince William County Police Department</li> <li>• Prevention Alliance of Greater Prince William</li> <li>• Prince William County Community Services Board</li> <li>• Serve Our Willing Warriors</li> <li>• Youth for Tomorrow</li> <li>• Trillium Drop-In Center</li> <li>• Why Inc.</li> </ul>
<p>Social Needs addressing:</p> <ul style="list-style-type: none"> <li>• Education Opportunities</li> <li>• Housing</li> <li>• <b>J</b>obs</li> </ul>	<ul style="list-style-type: none"> <li>• ACTION in Community Through Service (ACTS)</li> <li>• Capital Area Food Bank</li> <li>• Carried To Full Term</li> <li>• Catholics for Housing</li> <li>• Department of Aging and Rehabilitative Services</li> <li>• Didlake</li> <li>• Habitat for Humanity Prince William County</li> <li>• Haymarket Food Pantry</li> <li>• HireGround, Inc.</li> <li>• IMPACTO Youth</li> <li>• Literacy Volunteers of America - Prince William</li> <li>• Manassas Park Family Market</li> <li>• Northern Virginia Family Service (NVFS) SERVE Campus</li> <li>• Prince William Area Agency on Aging</li> <li>• Prince William County Housing and Community Development</li> </ul>

	<ul style="list-style-type: none"> <li>• Prince William County Public Schools-Head Start</li> <li>• Project Mend-A-House</li> <li>• The ARC of Greater Prince William</li> <li>• United Way of the National Capital Area</li> <li>• Virginia Cooperative Extension - Prince William County</li> <li>• Youth For Tomorrow</li> </ul>
<p>Wellness Resources addressing:</p> <ul style="list-style-type: none"> <li>• Lack of exercise</li> <li>• Obesity</li> </ul>	<ul style="list-style-type: none"> <li>• Boys &amp; Girls Clubs of Fauquier</li> <li>• Boys &amp; Girls Clubs of Greater Washington</li> <li>• City of Manassas Park Dept. of Parks &amp; Recreation</li> <li>• Girls on the Run of NOVA</li> <li>• George Mason University Freedom Fitness &amp; Aquatic Center</li> </ul>

## V. 2019-2021 CHNA and implementation plan update

### COVID Vaccinations

The pandemic impacted the 2019-2021 community implementation plan. Novant Health UVA Health System Haymarket Medical Center (now UVA Health Haymarket Medical Center) pivoted its community engagement, refocusing efforts to prioritize coordination of community vaccinations across the UVA Health service areas in response to the health crisis facing the community, especially the most vulnerable. Just over 82,000 vaccinations given to the community to include all local public school system teachers that were willing to receive it, clinics for students with special needs who were at higher risk, and all high school students that were seniors to get them back in schools for their final year. The primary goal set for each priority area was to increase the number of community members reached through screenings and health education. All activities listed below addressed for each priority area.

### Mental Health – substance use

- Participated in Drug Take Back Day
- Participated in health education programs, classes, and health fairs
- Provided programs for stress management/depression
- Partnership with governmental agencies to provide behavioral health trainings
- Smoking cessation programming support
- Speakers' bureau support for mental health and substance use health talks

### Chronic Disease – management and prevention

- Participated in health education program, classes, and health fairs to promote health and wellness. Topics included: nutrition, cholesterol, cancer, consumer health, matter of balance, caregiver support, child safety, weight management, heart health, stroke, COPD
- Health & wellness screenings: diabetes, mammography, blood pressure, BMI checks
- Speakers' bureau support for chronic disease health talks
- Community Care Cruiser implemented provided mobile well-child checks, immunizations
- Provided education to students in medical and health sciences.

## VI. Role of the board and administration

UVA Health, UVA Community Health, Inc., Unified Community Board, and UVA Health Haymarket Medical Center administration are active participants in the community benefit process. Through strategic planning initiatives focused on chronic disease, community health outreach, and access to care, leadership provides direction on actions and intended impact, and serves as the approving body for the community health needs assessment and community benefit implementation plan. Administrative leaders serve on the assessment process teams, priority setting committee and action planning team and hospital board members participate and provide input to the community benefit plans. All members are actively involved in the priority setting discussion and outreach planning process. Additionally, community benefit reports are provided to the board and facility leadership teams throughout the calendar year for ongoing education.

**VII. Appendix : Community Healthcare Coalition of Greater Prince William**

Agency
George Mason University
Greater Prince William Community Health Center * *
UVA Health Haymarket Medical Center
UVA Health Prince William Medical Center
Potomac Health Foundation
Prince William Area Free Clinic**
Sentara Northern Virginia Medical Center
Virginia Department of Health Prince William Health District*

\*Representative of a state, local, tribal, or regional governmental public health department (or equivalent department or agency)

\* \* Members of medically underserved, low-income, and minority populations in the community served by the hospital facility, or individuals or organizations serving or representing the interests of such populations