

Maria Parham Health 2025

Community Health Needs Assessment

-Vance, Granville, & Franklin Counties, North Carolina-

MARIA PARHAM
HEALTH

Duke LifePoint Healthcare

Adopted by Board 12/16/25



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Letter to the Community

Dear Community,

The mission of Maria Parham Health (Maria Parham) is *making communities healthier*. Our patients can expect quality health care with a personal touch, and we continually work to expand services to better meet the needs of patients and local residents.

Every three years, we conduct a community health needs assessment to gain insight and feedback from those we serve. This allows us to understand how our efforts have impacted local residents and what changes are needed to continue progress toward a healthier community.

The 2025 community health needs assessment not only highlights local health needs but also provides an action plan outlining how Maria Parham will respond. We believe it is of utmost importance that people are able to access as much care as possible without having to leave their community. Through expanded service offerings, telemedicine and partnerships with other organizations we strive to be your hub for healthcare in Vance, Granville, Franklin Counties, and beyond. Our implementation strategy outlines the need, the overview of how we will address the need and the measures we will use to gauge success.

At Maria Parham, we are committed to working with our local governments, nonprofits and other key stakeholders to address larger community issues such as affordable housing, access to affordable childcare and other social determinants that often have an adverse effect on people's health and wellbeing.

Maria Parham is a diverse facility that strives to create places where people who choose to come for healthcare, physicians and providers want to practice, and employees want to work. I am committed to leading your health system to continue improving and growing to meet your healthcare needs. We all enjoy this wonderful community and, together, we can make our community healthier for all.

Sincerely,

Bert Beard

Market CEO | Maria Parham Health & Person Memorial Hospital

Community Health Needs Assessment (CHNA) Overview

In 2025, Maria Parham Health (“MPH”) performed a Community Health Needs Assessment (CHNA) in partnership with Strata Decision Technology (“Strata”) to determine the health needs of the local community and develop an accompanying implementation plan to address the identified health needs of the community.

CHNA Purpose

A CHNA is part of the required hospital documentation of “Community Benefit” under the Affordable Care Act for 501(c)(3) hospitals. It uses systematic, comprehensive data collection and analysis to provide information about the community including health status, needs, and disparities. The CHNA also offers a targeted action plan to address areas of need and allows the hospital to truly understand the health needs of the community it serves.

CHNA Facility Benefits



- Identify health disparities and social determinants to inform future initiatives, programs, and outreach strategies
- Identify gaps in healthcare
- Develop an understanding of perceptions and ideas among community members
- Form collaborations with community organizations to address local health needs

The core elements of a CHNA include:

- a definition and description of the community served
- a description of the process and methods used to conduct the CHNA
- a description of how the hospital facility solicited and took into account input received from community members
- a description of the identified significant health needs of the community, including selection process and criteria
- a description of resources available to address the significant health needs
- an evaluation of the impact of any actions that were taken to address the significant health needs identified in the immediately preceding CHNA

Community Health Needs Assessment (CHNA) Overview

The CHNA Process

The process to conduct the CHNA included the following:



Maria Parham Health’s health priorities identified through the 2025 process are:

- 1 Mental Health & Drug/Substance Abuse
- 2 Chronic Diseases – Heart Disease
- 3 Chronic Diseases – Obesity

This report was approved by the Board on 12/16/25

Process and Methods used to Conduct the Assessment

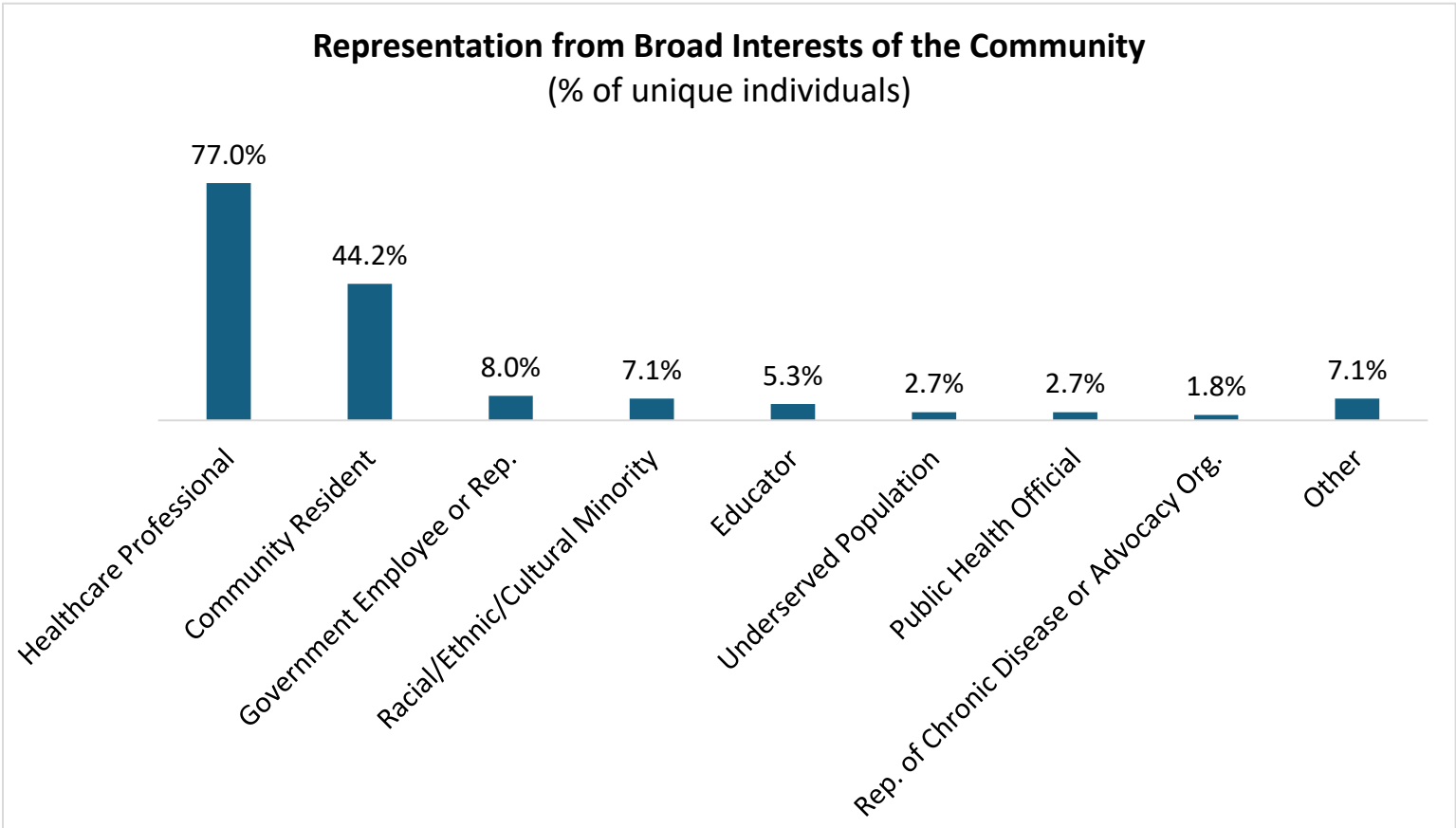
To assess the health needs of the community, a comprehensive approach was utilized. This included collecting community health data via secondary sources and a survey of community members to assess healthcare needs. A community summit was then held to review these inputs with community stakeholders to prioritize the health needs of the community and create action plans.

Community Health Data Collection and Analysis

Maria Parham Health relied on secondary source data to define and assess the community. This data was sourced at the county level from available public sources, including www.countyhealthrankings.org and ESRI.

A community survey was deployed by Maria Parham Health to gain input on local health needs, including those of priority populations such as the medically underserved, low-income, and minority populations. The survey received feedback from 94 community members. The survey was open from June 16, 2025 to July 25, 2025 and distributed digitally. The Community Summit was held on September 15, 2025 and had 19 participants.

Survey respondents and summit participants represented the stakeholder groups below:



About Maria Parham Health

Maria Parham Health, a Duke LifePoint Hospital, is the region's healthcare leader. Fully accredited by The Joint Commission, Maria Parham has combined the qualities necessary to offer the best in community medicine - physicians representing a wide range of specialties, highly trained nurses and clinical specialists, and the latest technology.

Maria Parham has the region's largest and most comprehensive Emergency Department staffed by Board Certified emergency physicians, with 40 beds across two campuses in Henderson and Louisburg, to serve every emergency need. With 29 of those ED beds in Henderson, we also offer you the leading Maternity Center in the four-county area, featuring 19 beds, focusing on the needs of both mother and baby. We have the largest and most advanced Intensive Care and Progressive Care Services, with 20 patient rooms equipped with the best technology and staffed by specially trained nurses and physicians. Maria Parham Health offers a 52-bed Medical/Surgical unit where our staff provides comprehensive care and treatment for patients with various medical conditions, inclusive of inpatient dialysis. For those patients recovering from a surgical procedure, our specifically trained pre and post-operative surgical teams offer quality care for those initial days after a surgical procedure. To complement our inpatient rehab services, Maria Parham also offers inpatient rehabilitation services with an 11-bed acute inpatient rehab unit, and offers state-of-the-art physical, occupational, and speech therapy on an outpatient basis.

One of Maria Parham's newer features is our Maria Parham Franklin facility in Louisburg. The stand-alone Emergency Department, housing 11 beds, is fully staffed and equipped to accommodate emergency situations with speed and efficiency, also offering an array of outpatient testing and diagnostics. Additionally, Maria Parham Franklin includes a unique Behavioral Health unit to serve the mental health needs of our area's population, divided between 20 adult psychiatric units, a 13-bed geriatric unit, and an Intensive Outpatient Program (IOP).

Providing the very best in healthcare to a community demands more than just quality patient care in a hospital setting – it also means answering the needs of the people you serve. With 205 licensed beds, Maria Parham Health is equipped for every health care need one can encounter. As you spend time with us, we are sure you will see Maria Parham Health, A Duke LifePoint Hospital, is committed to excellence and to providing the QUALITY, EXPERTISE and COMMITMENT you deserve.

Mission

Making communities healthier®

Vision

We want to create places where people choose to come for healthcare, physicians and providers want to practice, and employees want to work.

Values



Champion
Patient Care



Do the
Right Thing



Embrace
Individuality



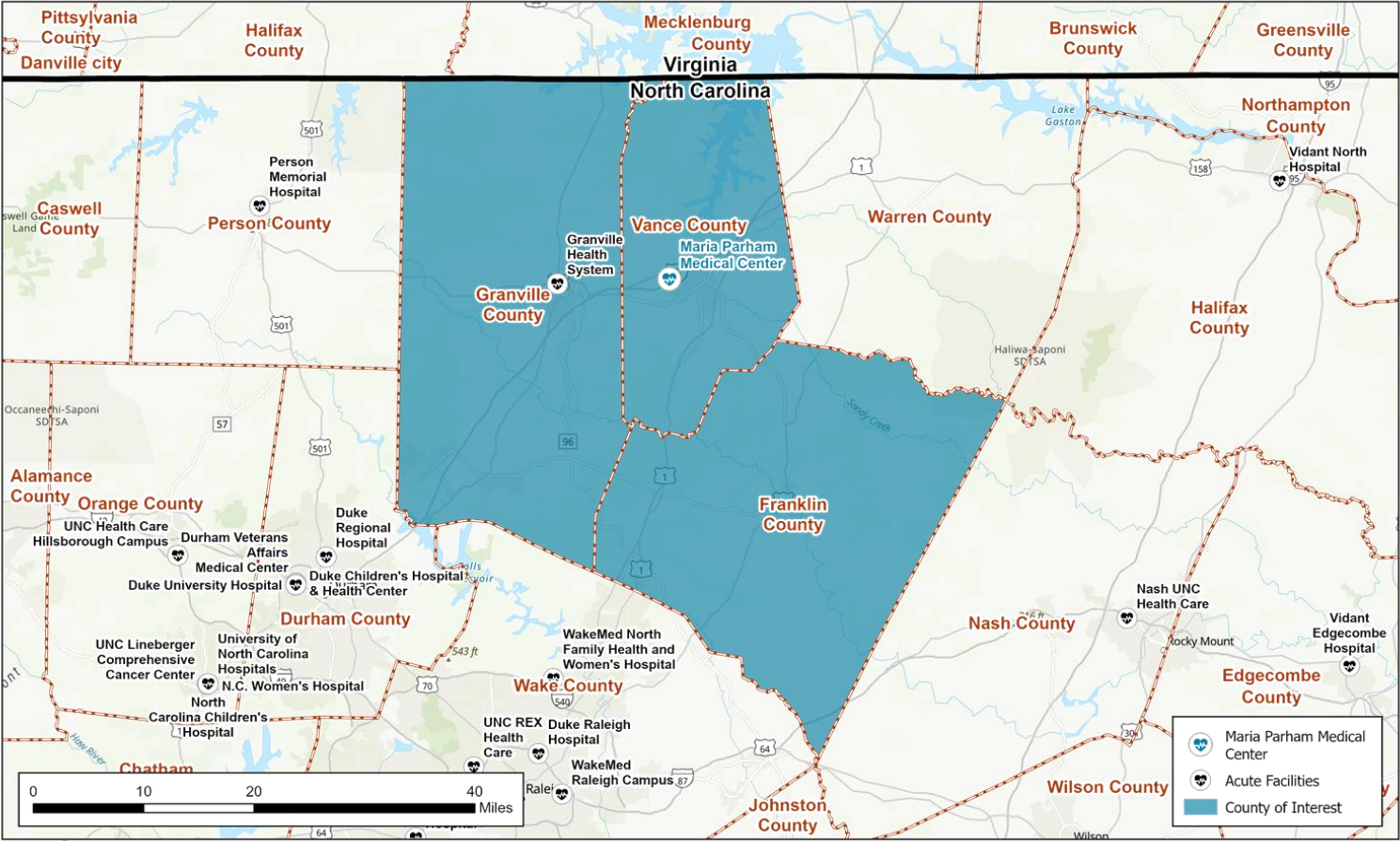
Act with
Kindness



Make a
Difference
Together

Community Served

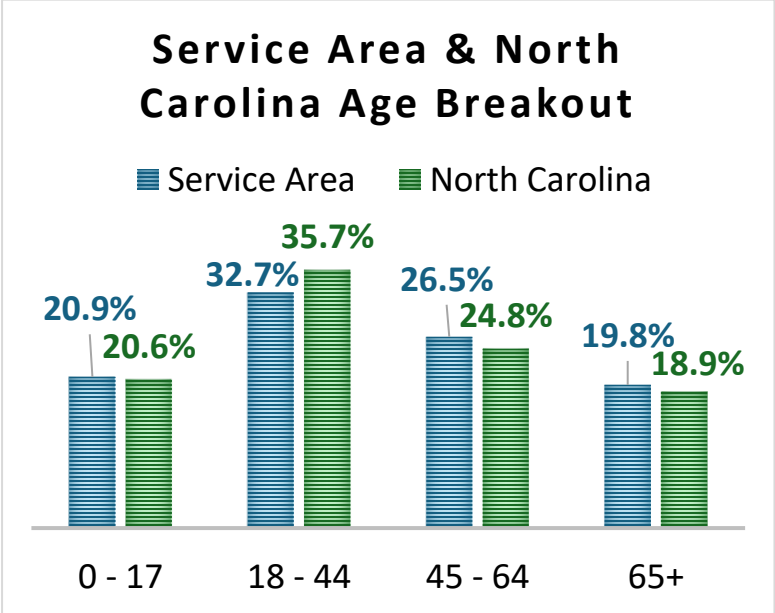
For the purpose of this study, Maria Parham Health defines its service area as Vance, Granville, and Franklin Counties, North Carolina.



2025 Total Service Area Population: 183,323
2030 Projected Total Service Area Population: 192,502

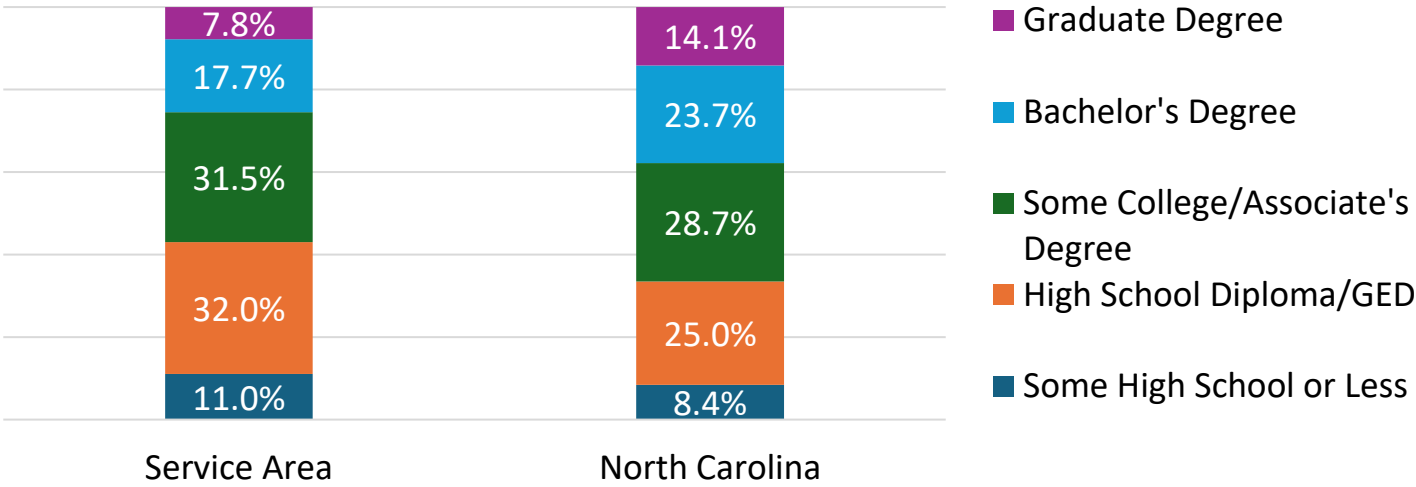
1.0%
change
per year

Race & Ethnicity		
	Service Area	North Carolina
White	54.2%	60.9%
Black	31.4%	20.6%
American Indian	0.6%	1.3%
Asian/Pacific Islander	0.9%	3.7%
Other Race	7.1%	6.3%
Two or More Races	5.8%	7.3%
Hispanic Origin	11.4%	11.5%

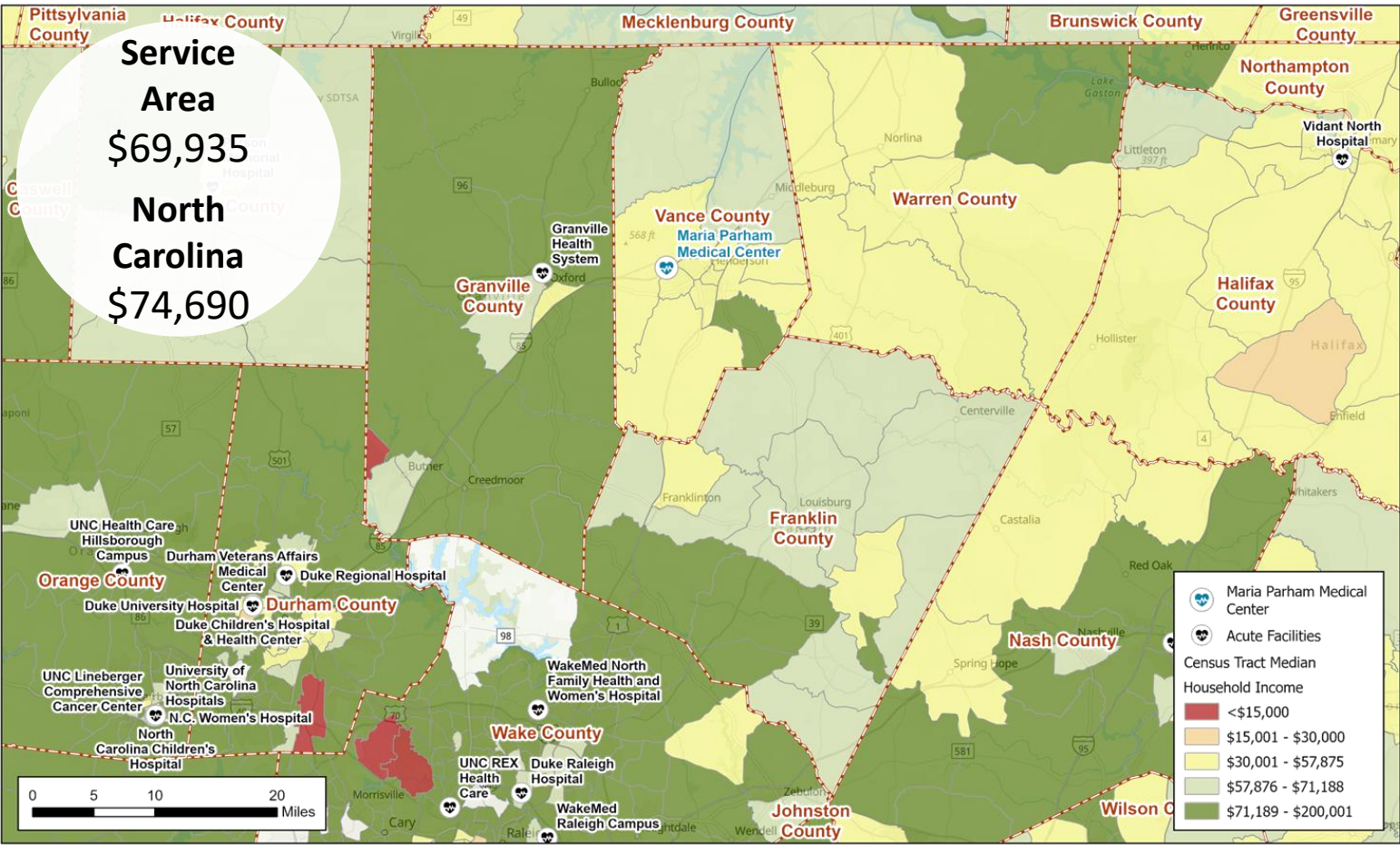


Community Served

Service Area & North Carolina Education Breakout



2025 Median Household Income {by Census Tract}



Census Tract: small, relatively permanent statistical subdivisions of a county uniquely numbered; average about 4,000 inhabitants

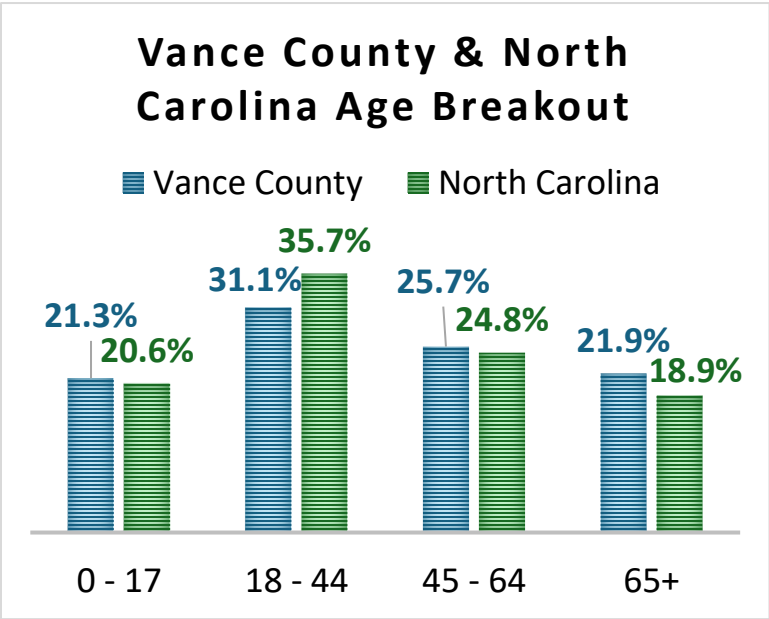
Community Served: Vance County



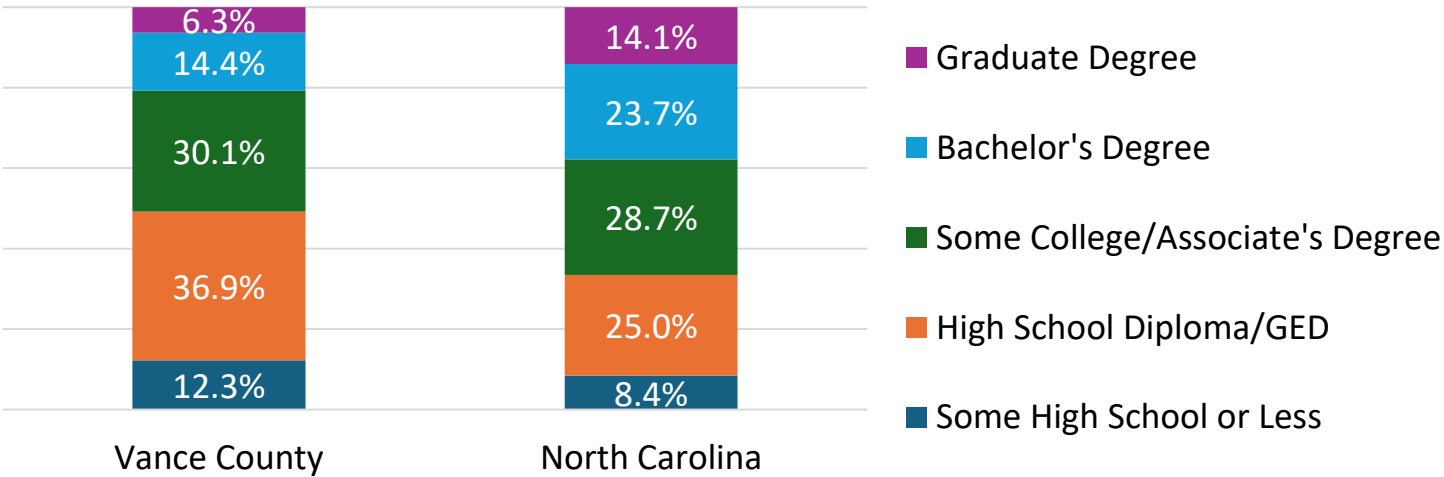
2025 Total Vance County Population: 41,370
2030 Projected Total Vance County Population: 40,675

-0.3%
change
per year

Race & Ethnicity		
	Vance County	North Carolina
White	38.0%	60.7%
Black	49.7%	20.5%
American Indian	0.5%	1.2%
Asian/Pacific Islander	0.8%	3.8%
Other Race	6.7%	6.4%
Two or More Races	4.4%	7.3%
Hispanic Origin	10.0%	11.6%



Vance County & N.C. Education Breakout



Population % Female
52.2%

Population % Rural
53.3%

Median Household Income
\$49,638

Population % <18 years
21.3%

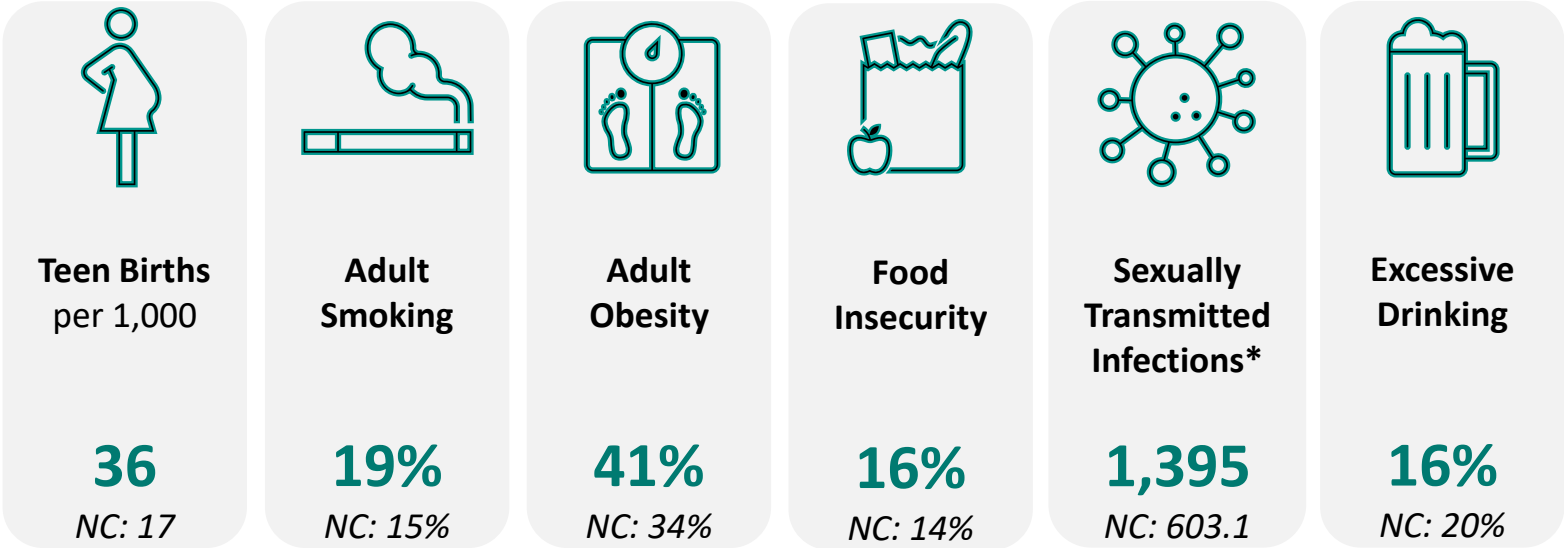
Population % 65+ years
21.9%

Vance County Community Health Characteristics

The data below provides an overview of Vance County’s community health including health behaviors, quality of life, socioeconomic factors, access to health and physical environment. For detailed descriptions and dates for each measure, please visit <https://www.countyhealthrankings.org/app/north-carolina/2025/overview>. Each indicator impacts the health of the entire community.

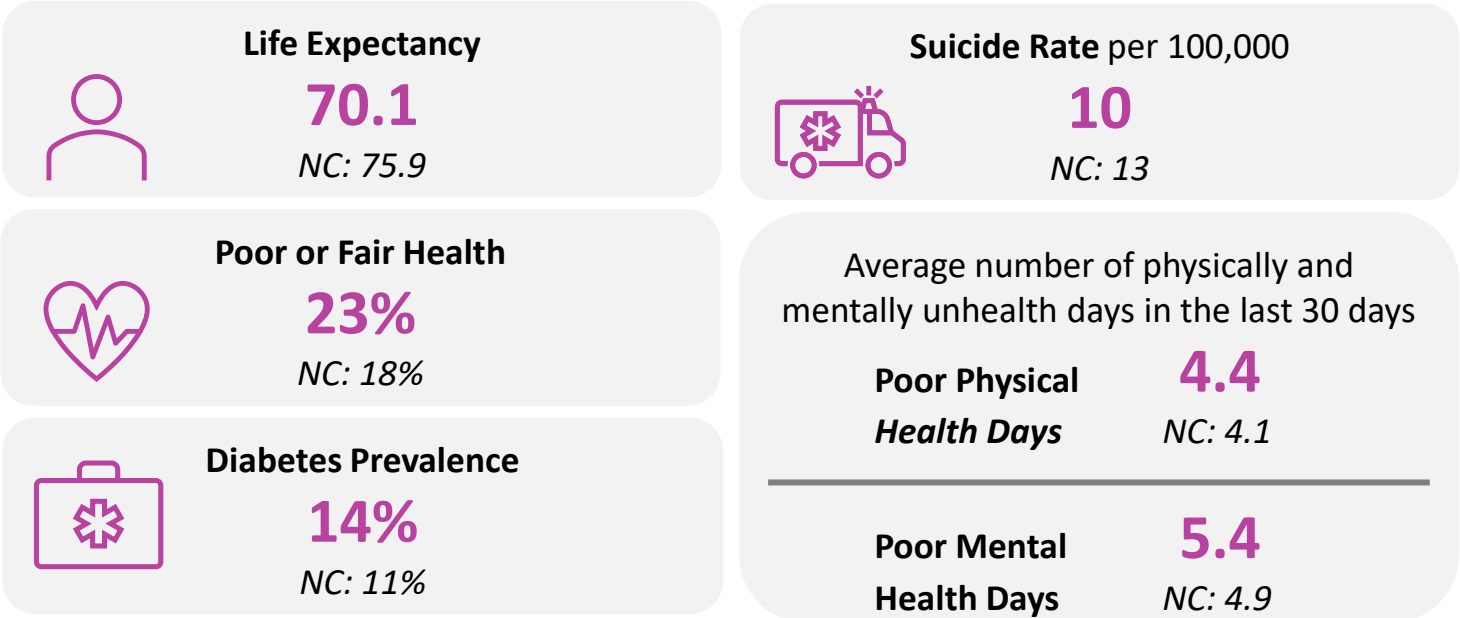
Health Status Indicators

Health Behaviors



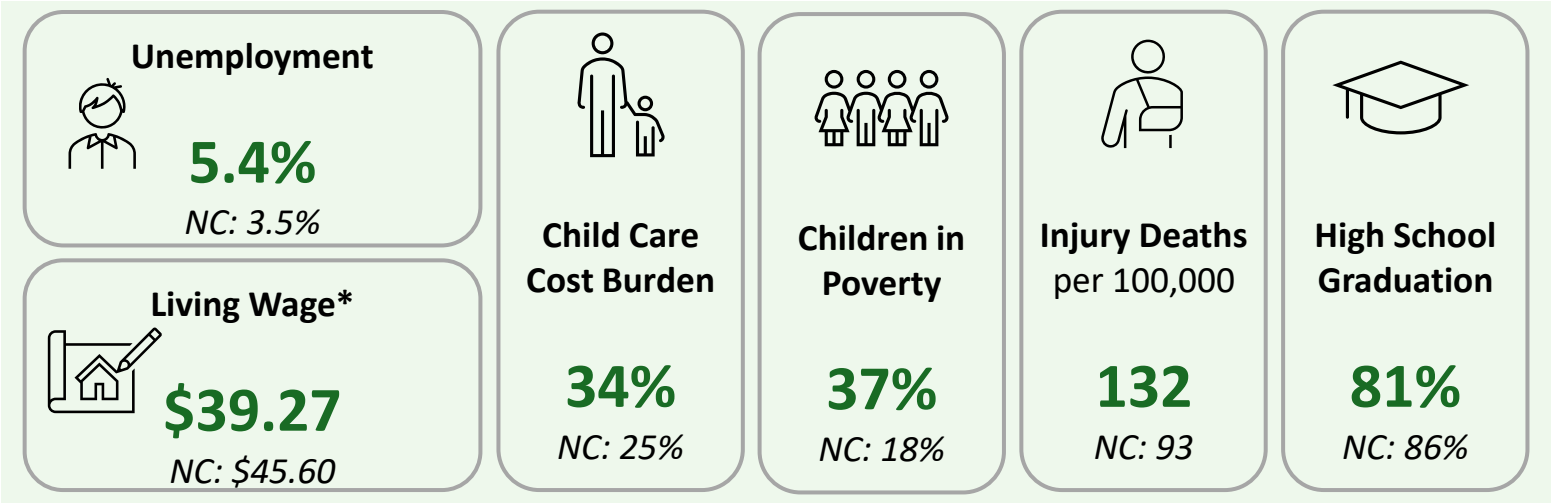
*New cases of chlamydia diagnoses per 100,000

Quality of Life

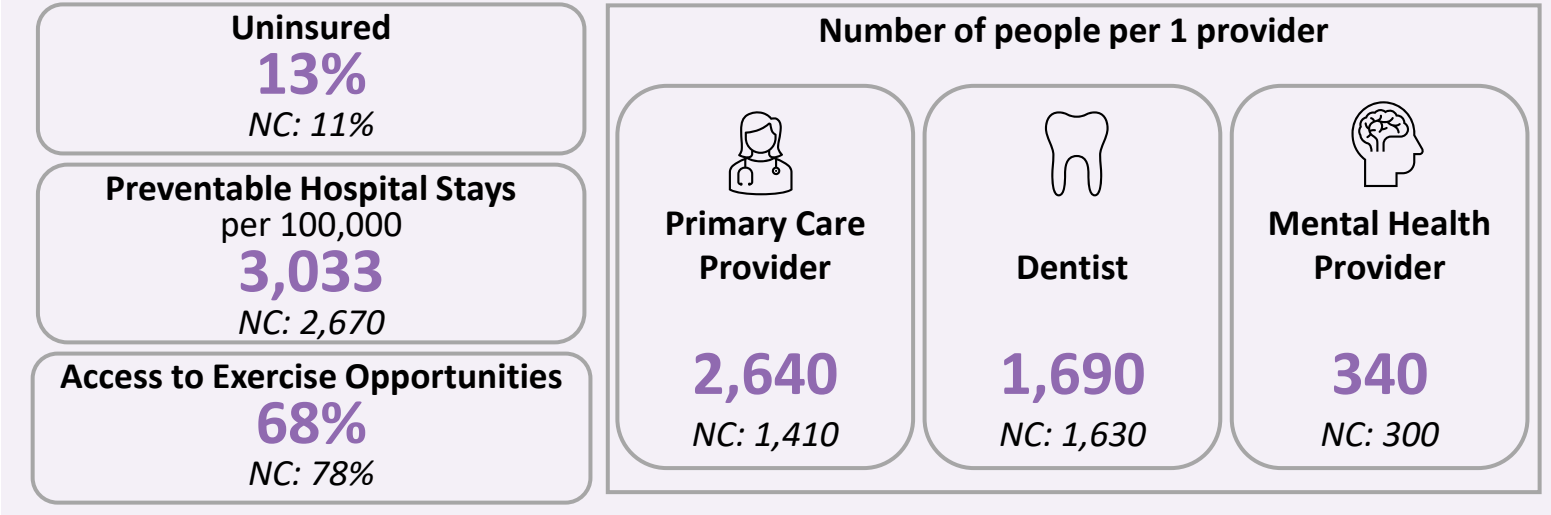


Vance County Community Health Characteristics

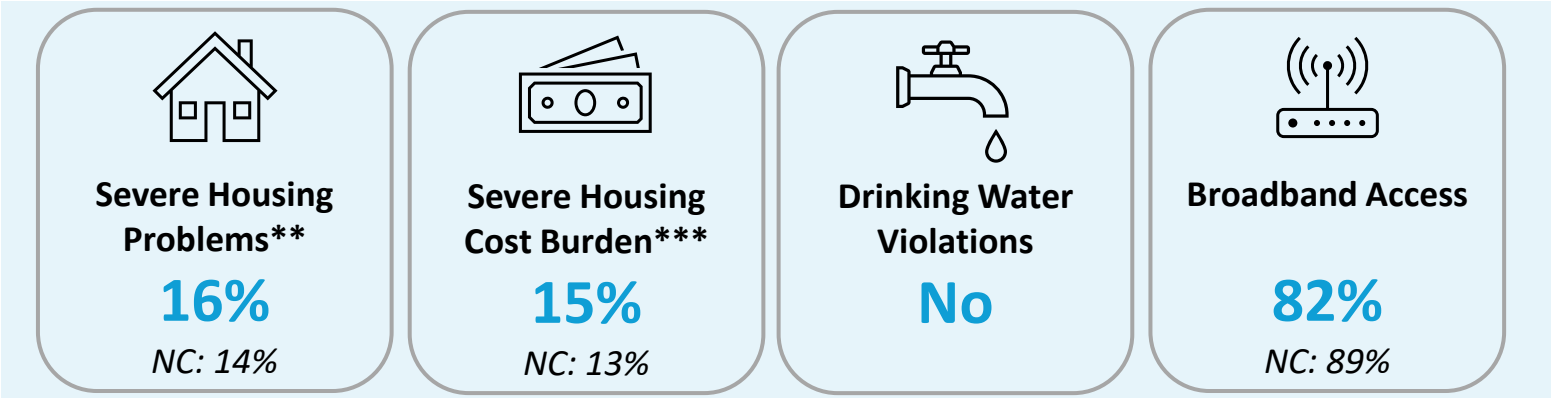
Socioeconomic Factors



Access to Health



Physical Environment



*The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.
**% of households with at least 1/4 of problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities
***% of households that spend 50% or more of their household income on housing

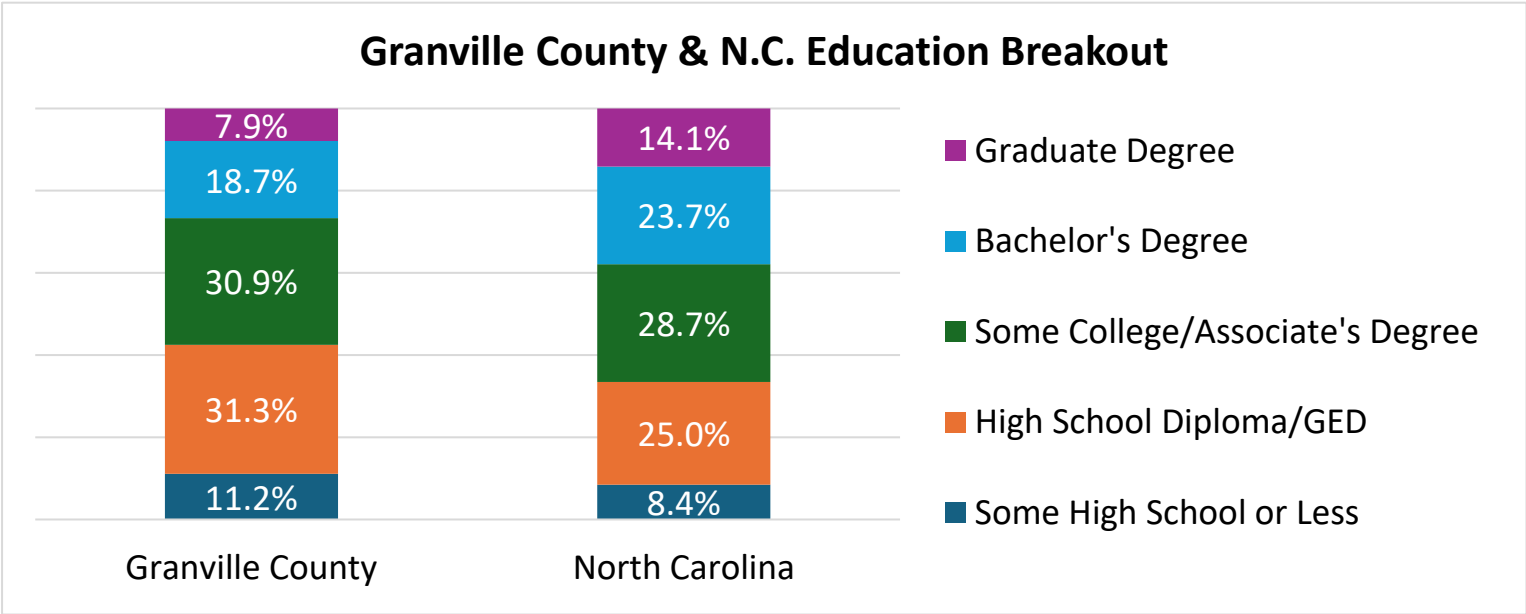
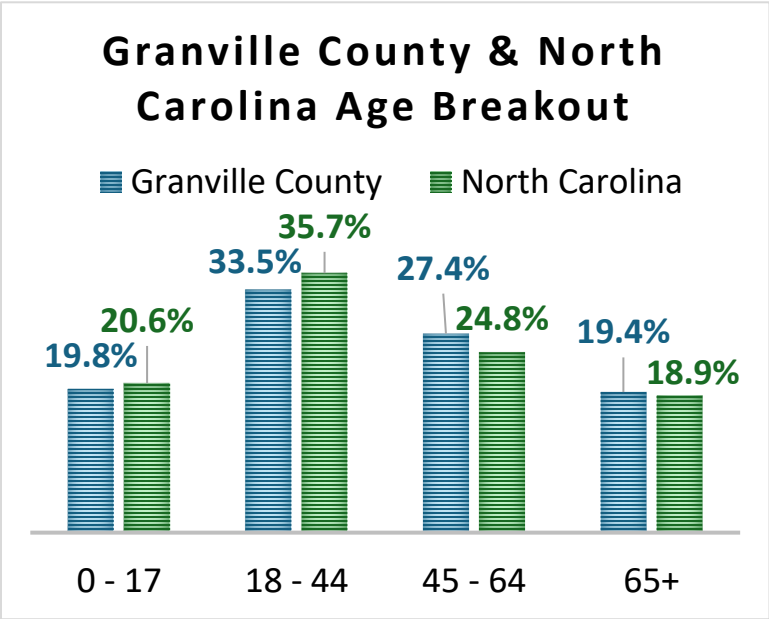
Community Served: Granville County



2025 Total Granville County Population: 62,575
2030 Projected Total Granville County Population: 64,239

0.5%
change
per year

Race & Ethnicity		
	Granville County	North Carolina
White	55.6%	60.7%
Black	29.7%	20.5%
American Indian	0.7%	1.2%
Asian/Pacific Islander	0.8%	3.8%
Other Race	7.4%	6.4%
Two or More Races	5.9%	7.3%
Hispanic Origin	11.5%	11.6%



Population % Female
49.0%

Median
Household
Income
\$79,056

Population % <18 years
19.8%

Population % Rural
71.4%

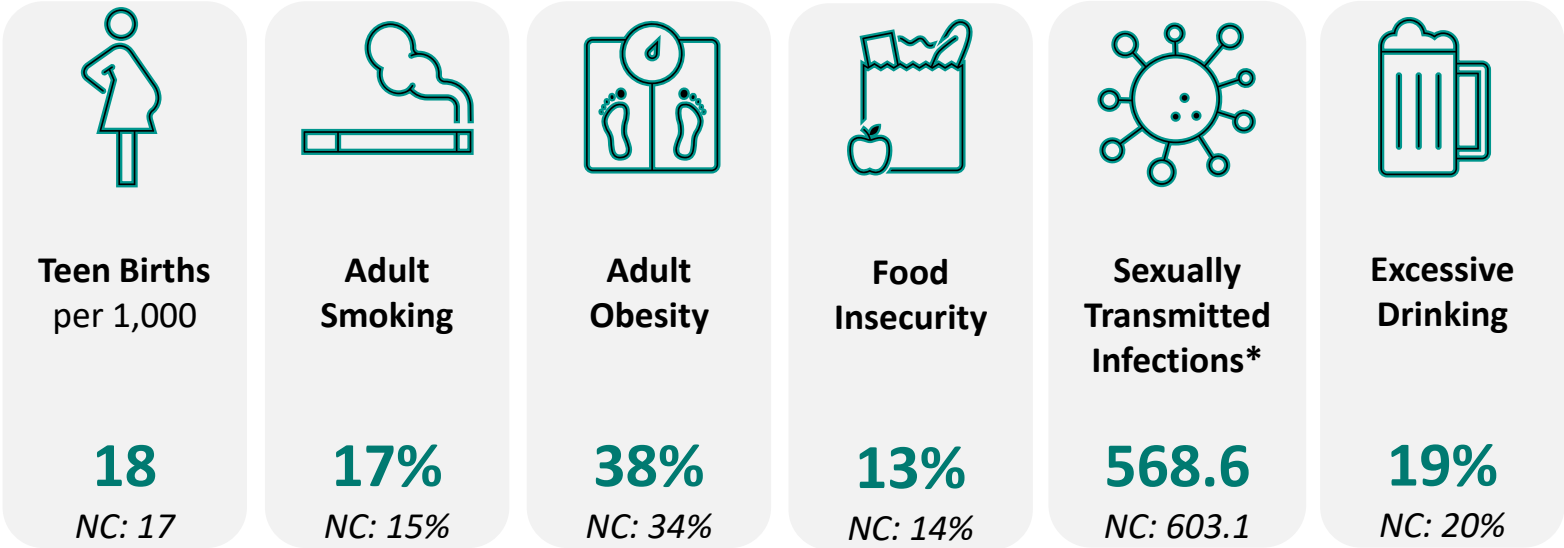
Population % 65+ years
19.4%

Granville County Community Health Characteristics

The data below provides an overview of Granville County’s community health including health behaviors, quality of life, socioeconomic factors, access to health and physical environment. For detailed descriptions and dates for each measure, please visit <https://www.countyhealthrankings.org/app/north-carolina/2025/overview>. Each indicator impacts the health of the entire community.

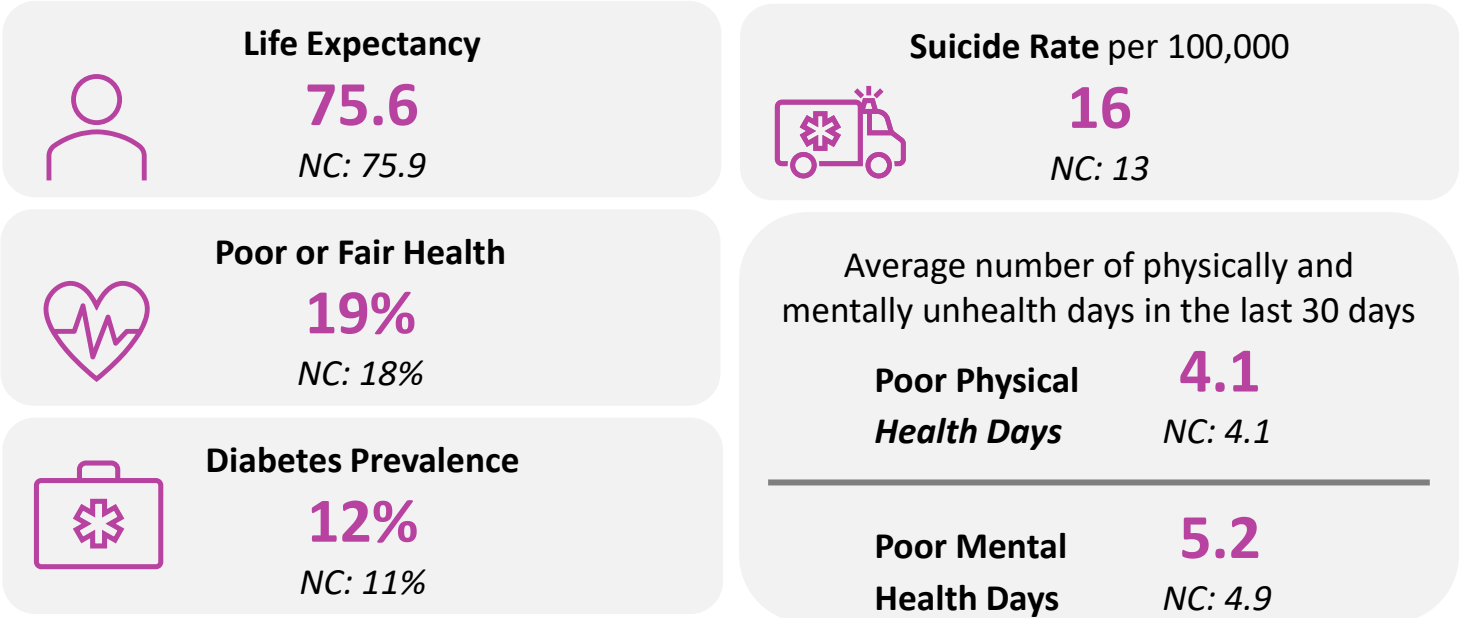
Health Status Indicators

Health Behaviors



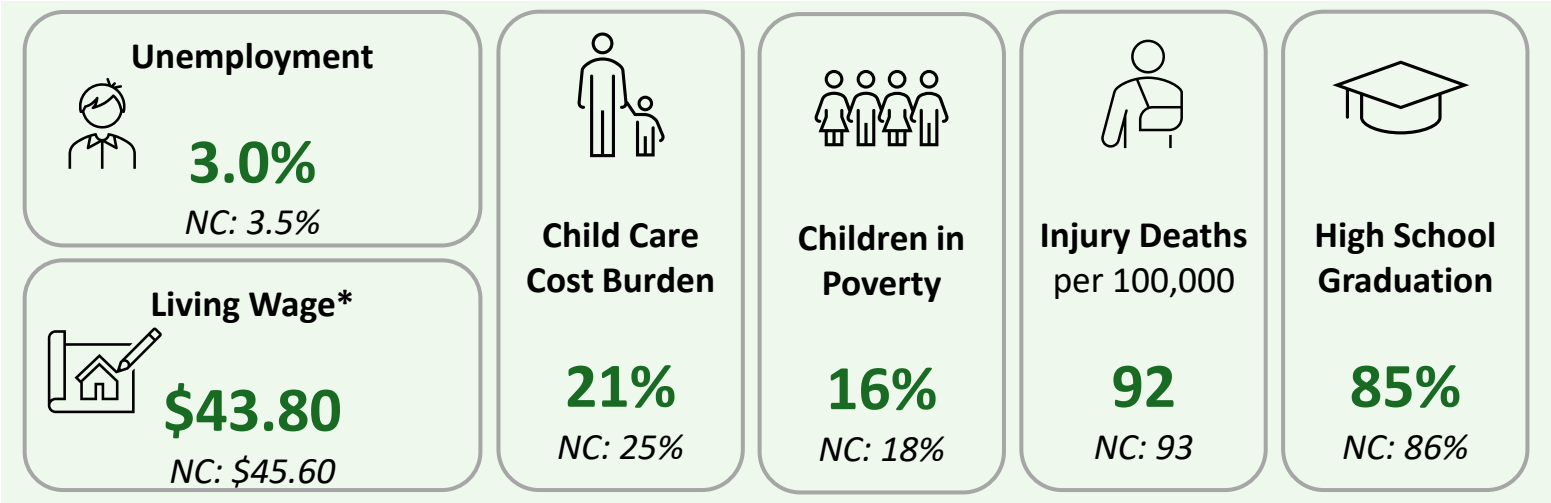
*New cases of chlamydia diagnoses per 100,000

Quality of Life

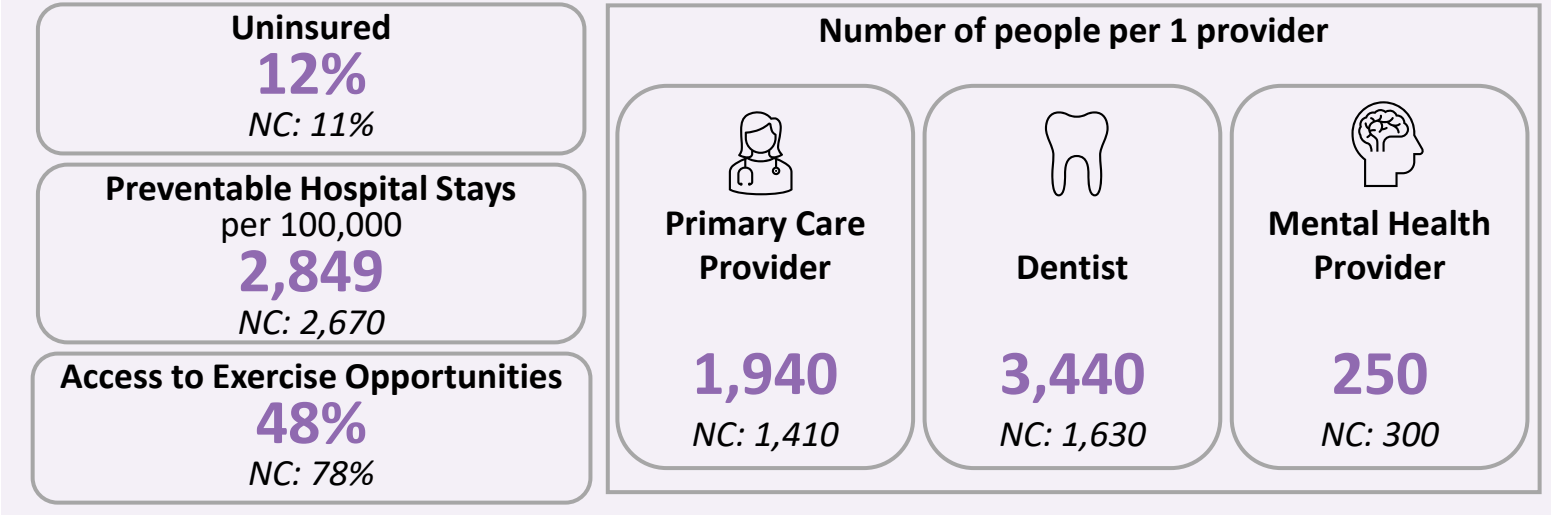


Granville County Community Health Characteristics

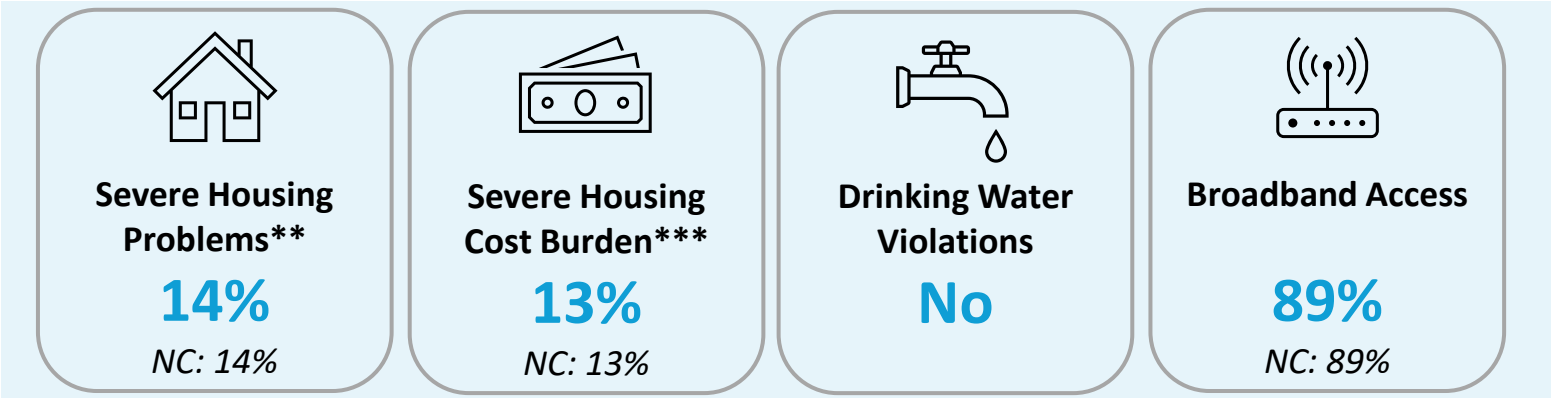
Socioeconomic Factors



Access to Health



Physical Environment



*The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.
**% of households with at least 1/4 of problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities
***% of households that spend 50% or more of their household income on housing

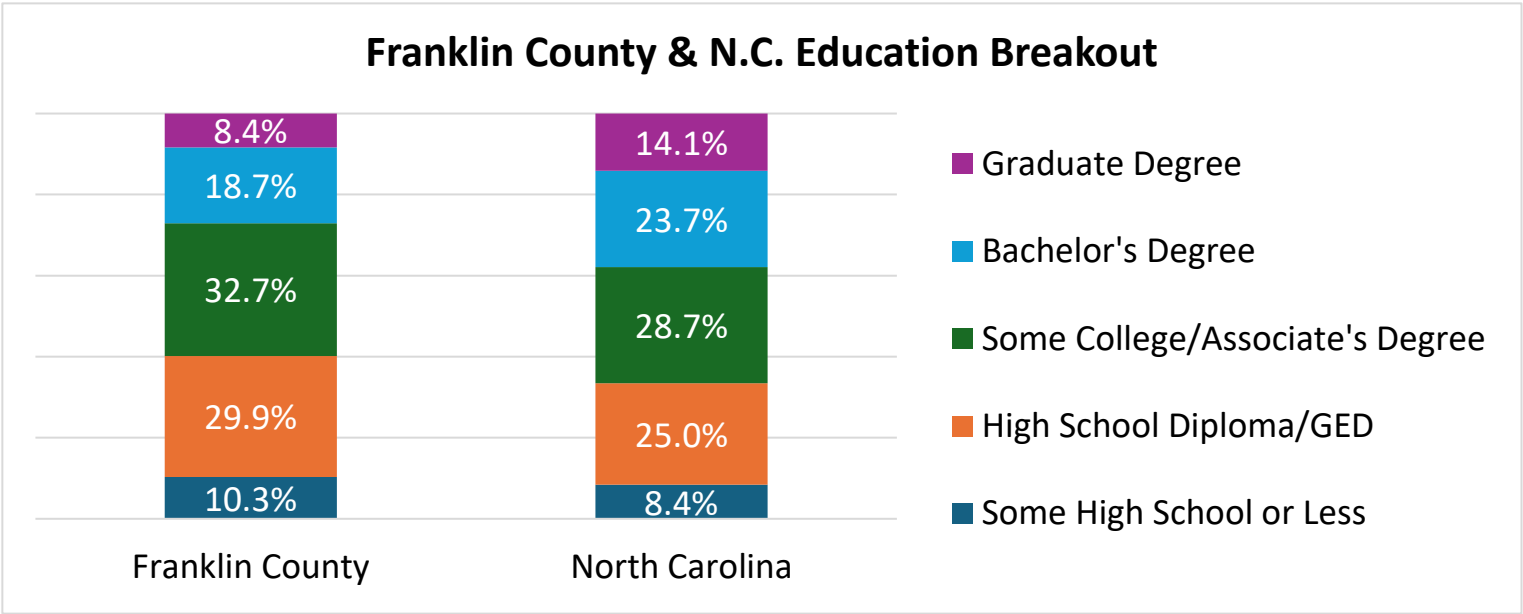
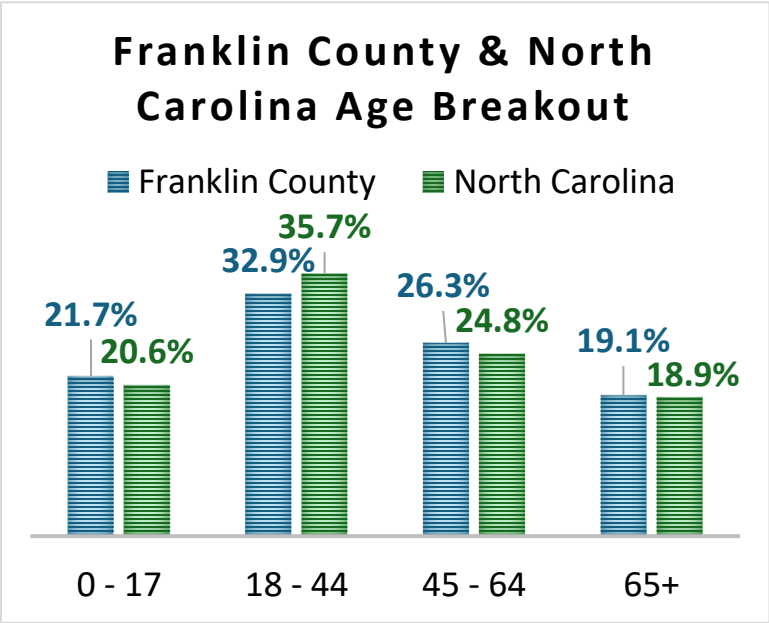
Community Served: Franklin County



2024 Total Franklin County Population: 79,378
2029 Projected Total Franklin County Population: 87,588

2.1%
change
per year

Race & Ethnicity		
	Franklin County	North Carolina
White	61.7%	60.7%
Black	23.2%	20.5%
American Indian	0.7%	1.2%
Asian/Pacific Islander	0.9%	3.8%
Other Race	7.0%	6.4%
Two or More Races	6.4%	7.3%
Hispanic Origin	12.0%	11.6%



Population % Female
50.0%

Median
Household
Income
\$73,324

Population % <18 years
21.7%

Population % Rural
78.9%

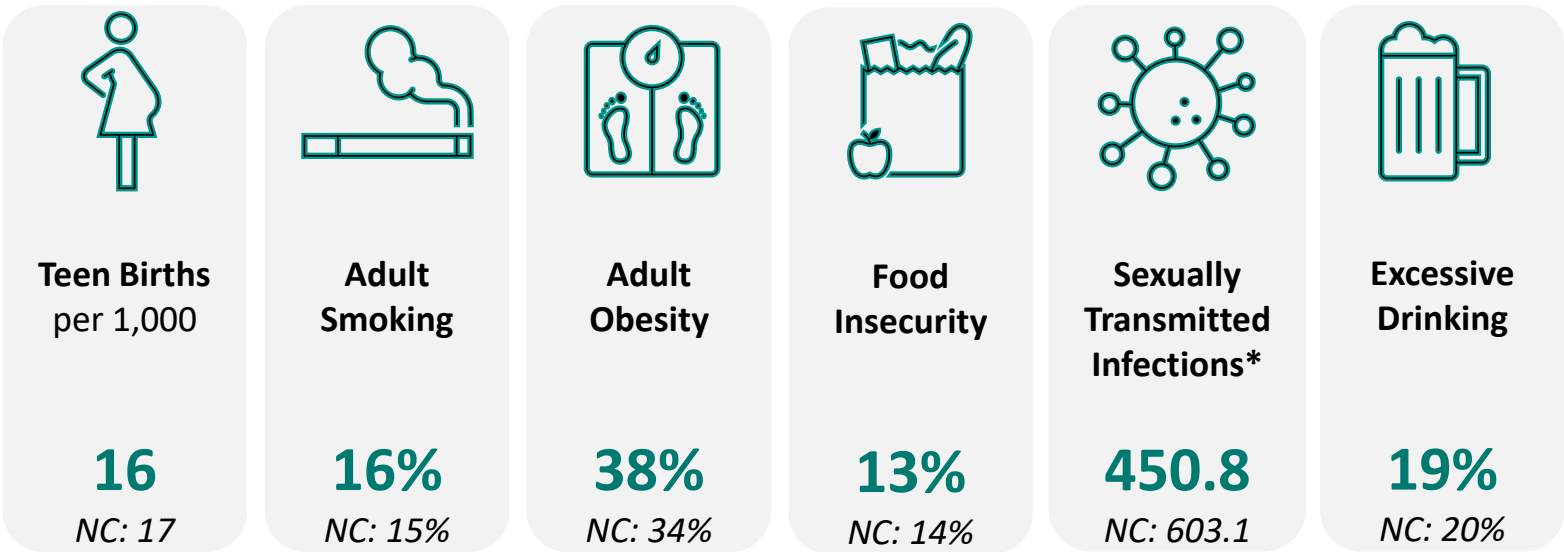
Population % 65+ years
19.1%

Franklin County Community Health Characteristics

The data below provides an overview of Franklin County’s community health including health behaviors, quality of life, socioeconomic factors, access to health and physical environment. For detailed descriptions and dates for each measure, please visit <https://www.countyhealthrankings.org/app/north-carolina/2025/overview>. Each indicator impacts the health of the entire community.

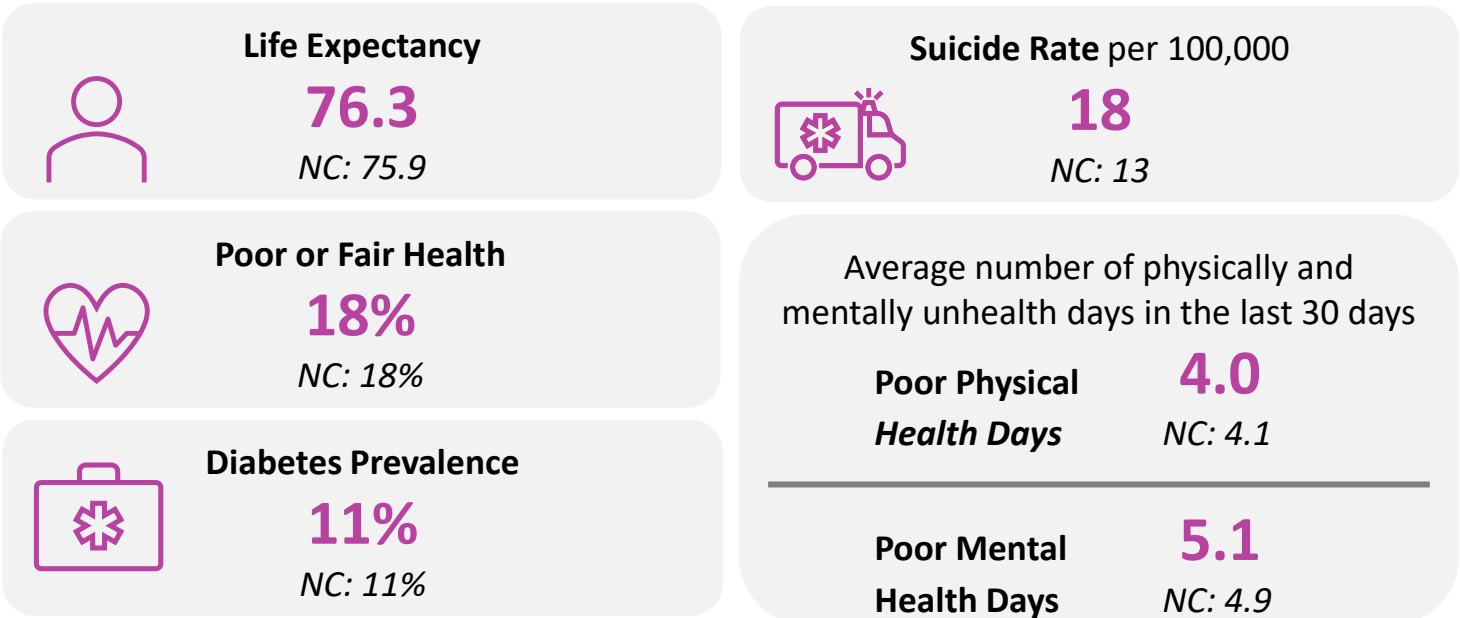
Health Status Indicators

Health Behaviors



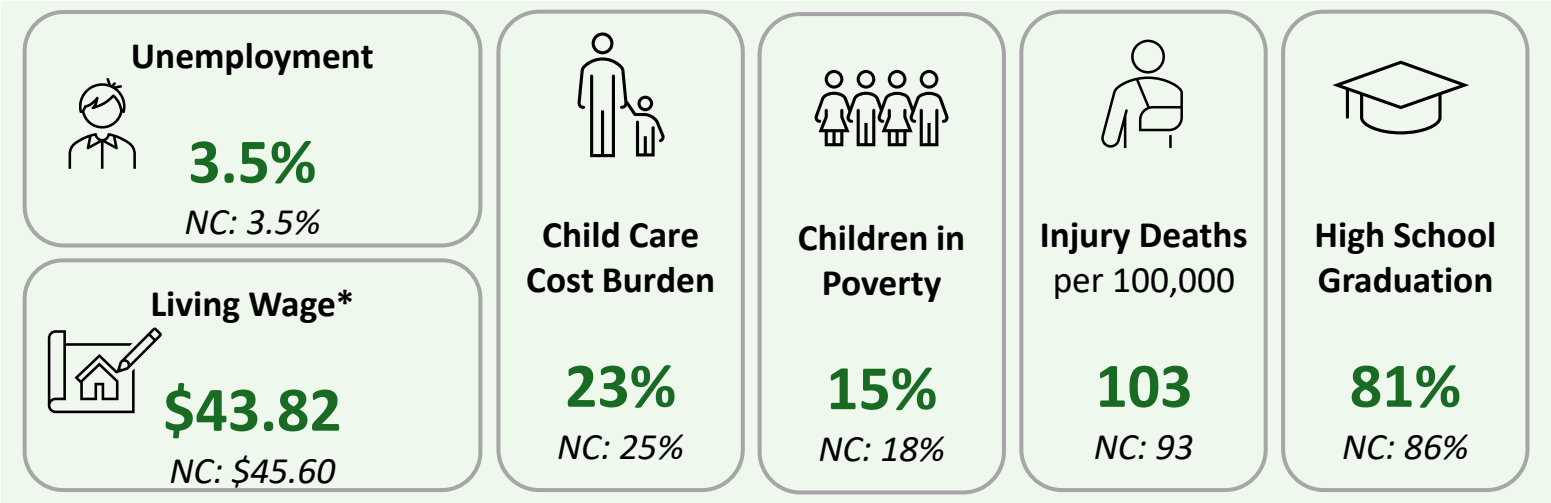
*New cases of chlamydia diagnoses per 100,000

Quality of Life

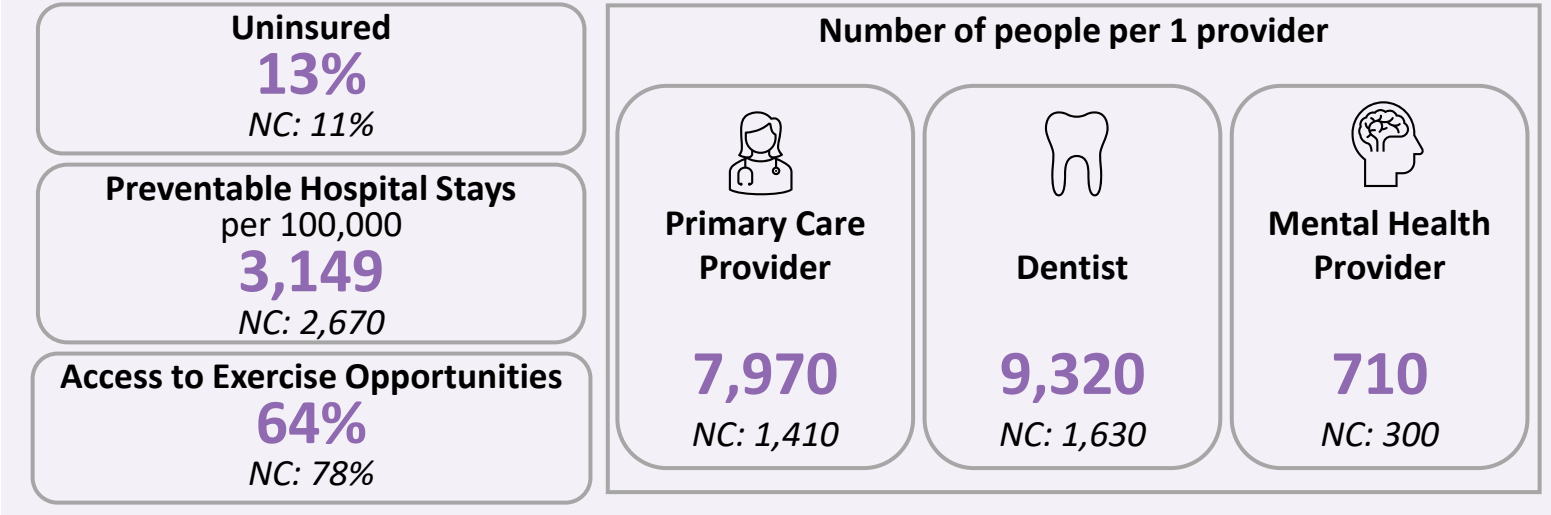


Franklin County Community Health Characteristics

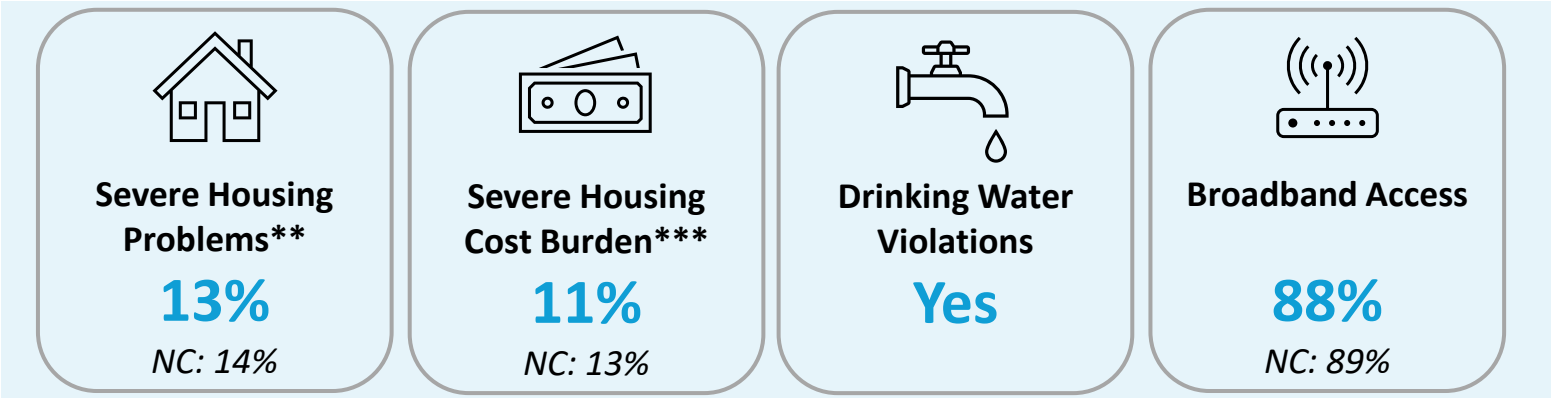
Socioeconomic Factors



Access to Health



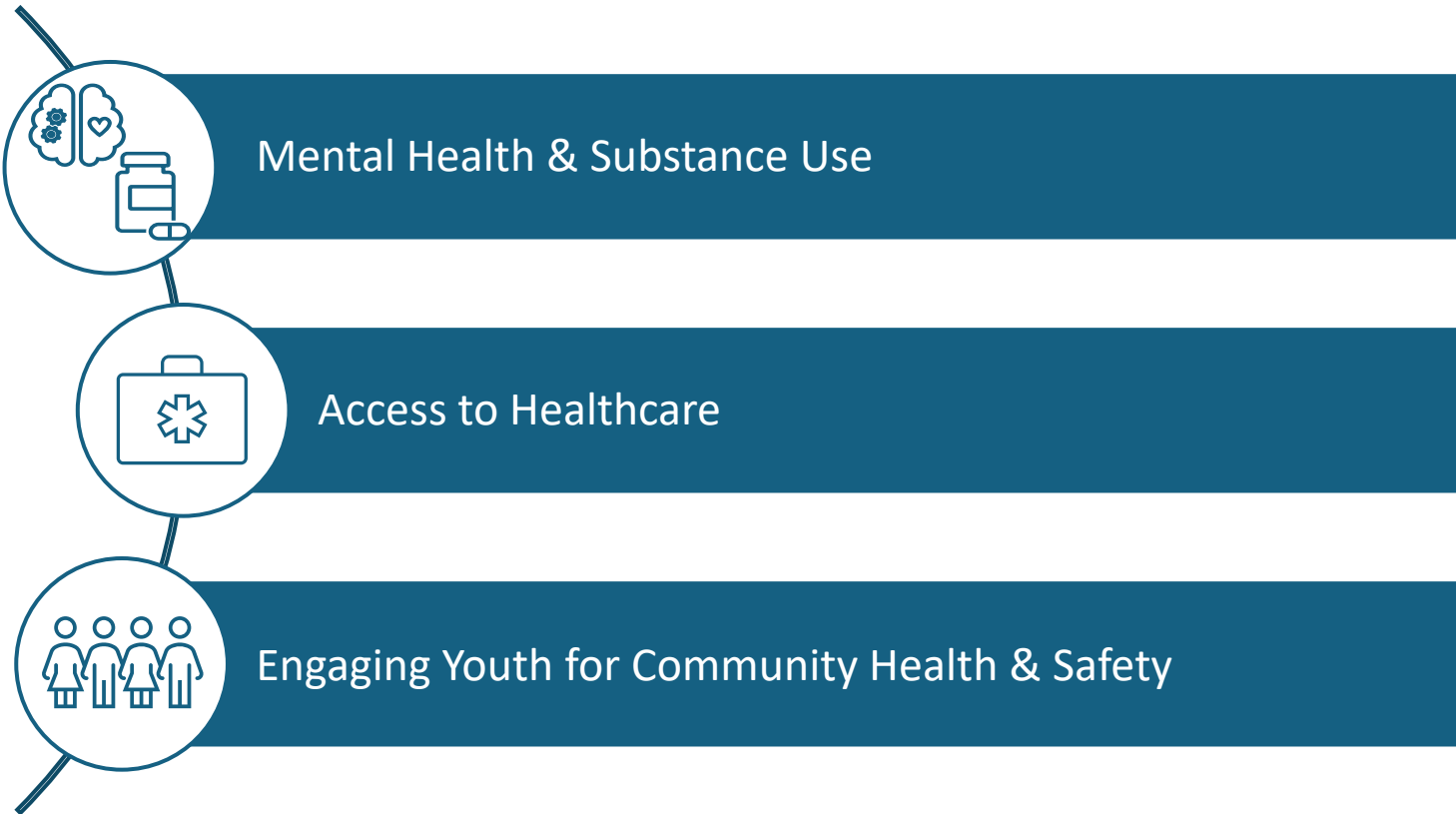
Physical Environment



*The hourly wage needed to cover basic household expenses plus all relevant taxes for a household of one adult and two children.
**% of households with at least 1/4 of problems: overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities
***% of households that spend 50% or more of their household income on housing

Impact Since Last CHNA

The IRS requires there to be an evaluation of the impact of any actions that were taken to address the significant health needs identified in the immediately preceding CHNA. The health priorities identified in the 2022 CHNA are listed below.



Written comments and insights were gained from community members through the Maria Parham Health Survey regarding the 2022 identified health priorities and implementation plan. Details of the comments and actions Maria Parham has taken to address the identified health priorities can be found on the next page.

Impact Since Last CHNA

Mental Health & Substance Use

1. Maria Parham Behavioral Health expansion

Themes from Community Survey Comments (23 responses)*:

- Addition/expansion of behavioral health are to ED (9)
 - Behavioral health at Franklin campus, ED renovation at both Henderson and Louisburg campuses from grant money to assist IVC patients' safety
 - The expansion of mental health services at Maria Parham is HUGE for our community!
 - Why can't Franklin hospital renovate the upper floors to accommodate BH patients
- BH unit at Franklin campus (5)
- Intensive outpatient expansion and introduction to Franklin (4)
- Criticism of efforts (3)
 - Too many resources spent on Mental Health
 - Treatment of patients unable to pay
- Inpatient behavioral health in Henderson (2)

Access to Healthcare

1. Maria Parham Women's Care expansion via satellite clinic
2. Maria Parham Primary Care expansion

Themes from Community Survey Comments (12 responses)*:

- Expansion of clinics/more accessibility (specialty and primary care) (8)
 - Multiple options for affordable PCP and women's care within the community
 - Women's clinic not well used since opening satellites
- Offices/hospital in Louisburg (2)

Engaging Youth for Community Health & Safety

1. Involvement with local schools for resource fairs, career fairs, etc.

Themes from Community Survey Comments (5 responses)*:

- None, but comments focused on student athlete health screenings and community events involving youth

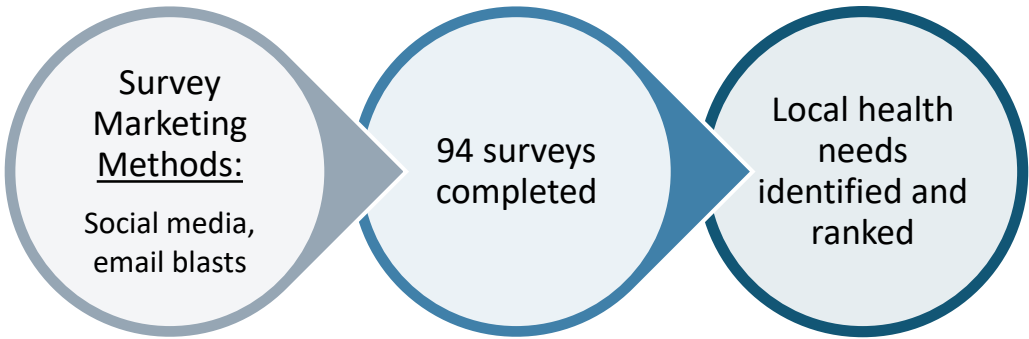
Methods of Identifying Health Needs

Analysis of existing data

Utilization of secondary data sources to gain analytical insights of the community

Data source: County Health Rankings

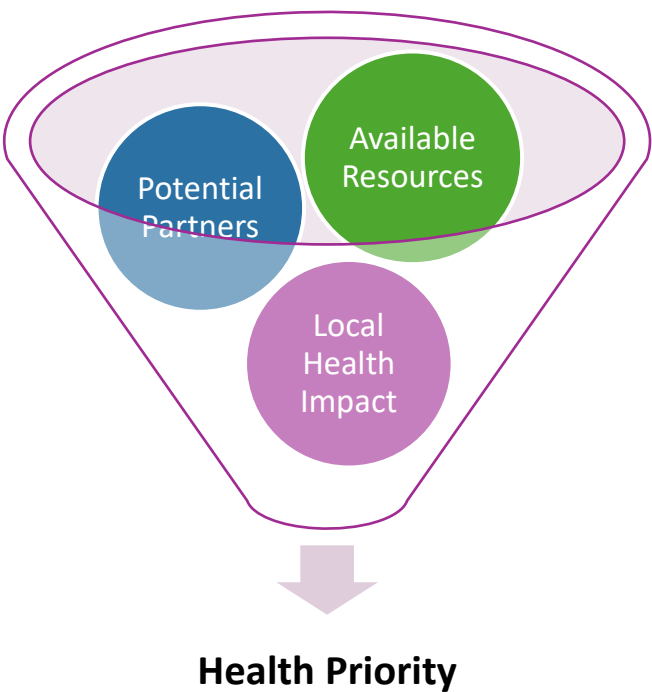
Collection of new data



Evaluate indicators and responses on below criteria



Select priority health needs for implementation plan



Maria Parham Health’s Health Priorities

Mental Health & Drug/Substance Abuse

Chronic Diseases – Heart Disease

Chronic Diseases – Obesity

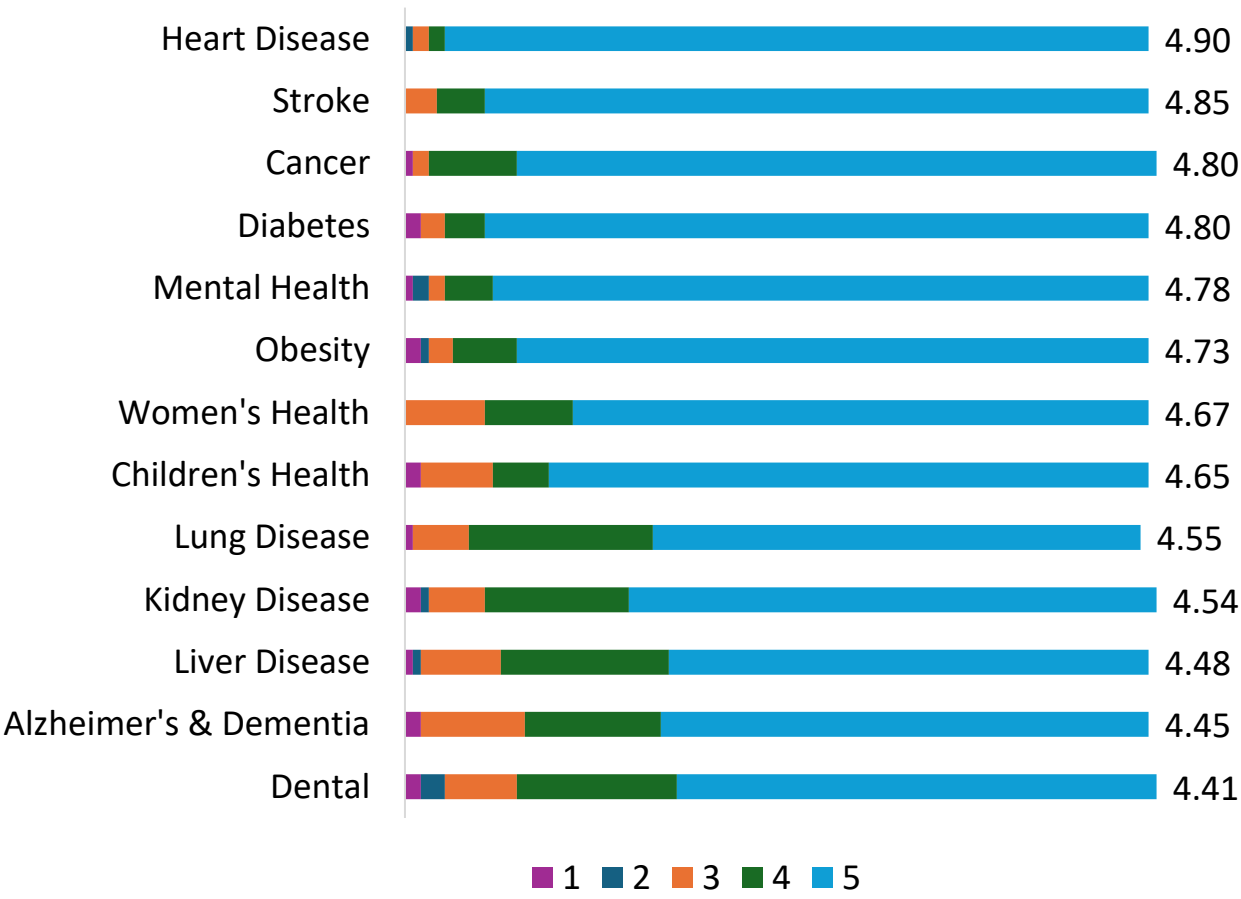
Community Survey Data

The health needs of the community include requisites for the improvement and maintenance of health status both in the community at large and in particular parts of the community, such as particular neighborhoods or populations experiencing health disparities. The community survey asked questions regarding health factors, lifestyle and personal factors, and community and healthcare services factors to better understand the local needs for the health status including groups with the highest health needs.

Health factors addressed areas such as chronic conditions, health conditions, and physical health. Lifestyle and personal factors addressed areas that affect the individual's health outcomes such as physical inactivity and substance abuse. Community and healthcare services factors addressed social determinants that influence community health, such as access to care, safety, and affordability.

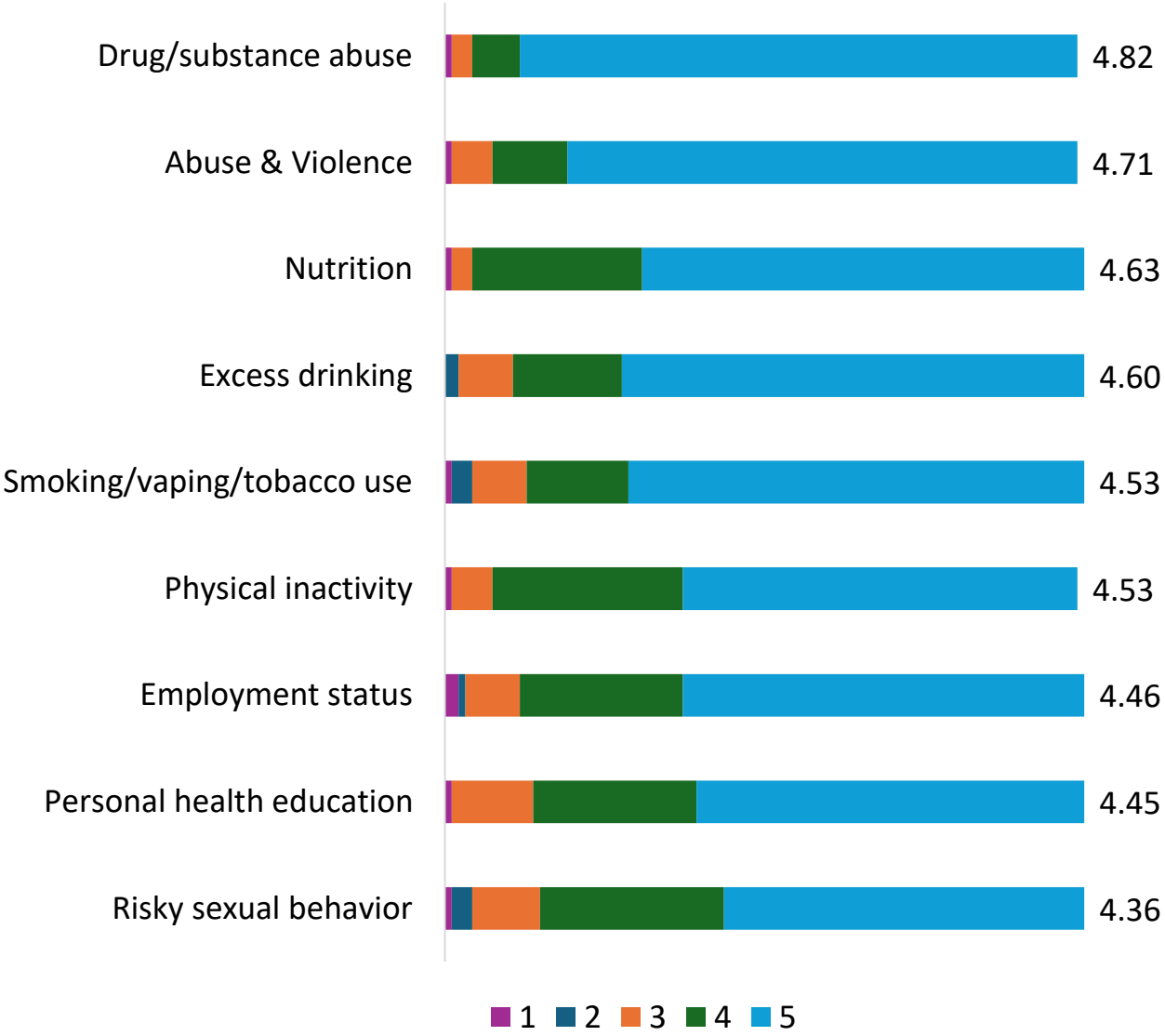
In our community survey, respondents had the opportunity to rate the importance of addressing different components of each factor. Results of the rankings are below.

Survey Question: Please rate the importance of addressing each Health Factor on a scale of 1 (not important) to 5 (very important).



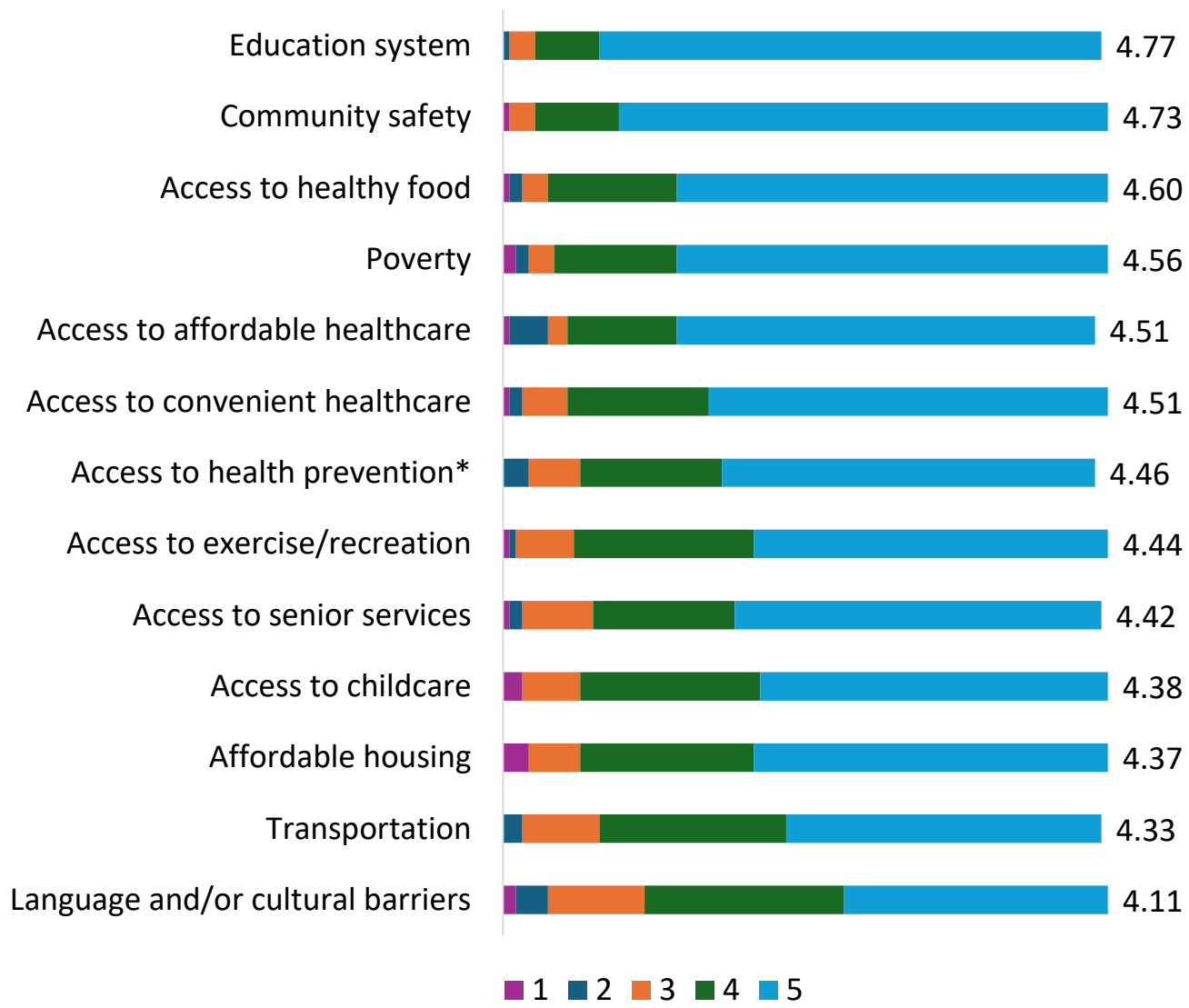
Community Survey Data

Survey Question: Please rate the importance of addressing each Lifestyle & Personal Factor on a scale of 1 (not important) to 5 (very important).



Community Survey Data

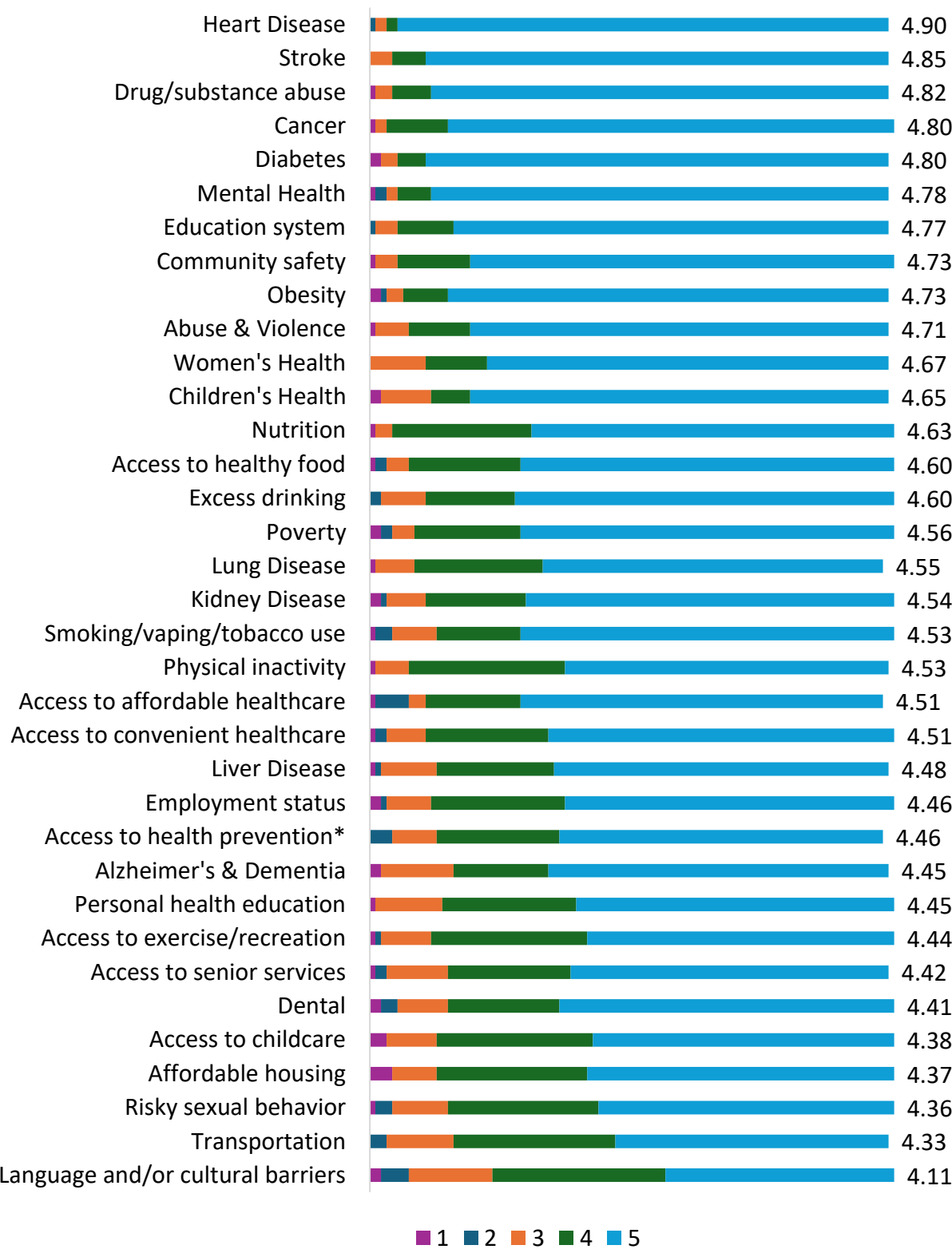
Survey Question: Please rate the importance of addressing each Community & Healthcare Services Factor on a scale of 1 (not important) to 5 (very important).



**Access to health prevention & education services*

Community Survey Data

Overall Health Priority Ranking (includes all three factor categories)



Community Summit

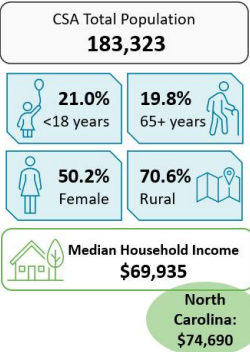
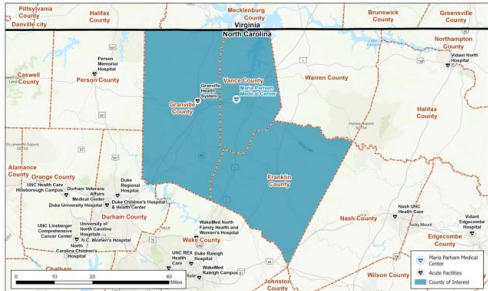
Maria Parham Health held a Community Summit on September 15, 2025.

Below are topics of discussion and key takeaways.

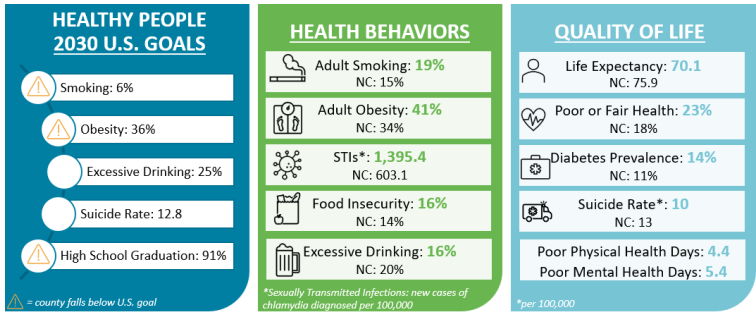
Demographics*

Slide examples

For the purpose of this CHNA, Maria Parham Health defines its service area as Vance, Granville, & Franklin Counties, NC.

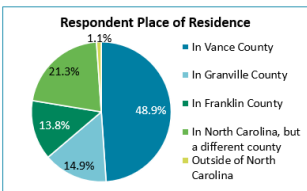


Community Analysis: Vance County, North Carolina

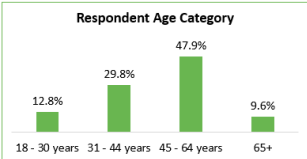


Survey Analysis**

Slide examples

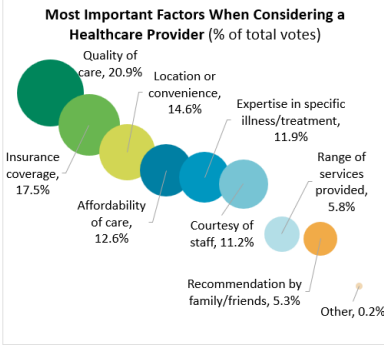


Respondent Community Role	% of Respondents
Healthcare Professional	83.0%
Community Resident	45.7%
Government Employee or Representative	5.3%
Racial/Ethnic/Cultural Minority	4.3%
Educator	3.2%
Underserved Population	3.2%
Public Health Official	2.1%
Rep. of Chronic Disease Group or Advocacy Org	1.1%
Other^	3.2%



Services Utilized for Basic Health Needs	% of Total Votes
My primary care doctor or family physician	47.4%
Urgent care center	15.8%
Hospital (including ER)	12.1%
Retail clinic (CVS, Walgreens, etc.)	11.1%
Alternative healthcare providers (chiropractors, etc.)	7.4%
Health department	2.6%
Free clinic	1.6%
School/university nurse	1.1%
I do not have a healthcare provider	0.5%
Other*	0.5%

*Other - Virtual



Prioritizing Health Needs

Focus areas for identified health needs

Health Need	% of Votes
Mental Health	70.6%
Drug/Substance Abuse	70.7%
Heart Disease	58.8%
Obesity	52.9%
Diabetes	29.4%
Cancer	11.8%
Stroke	5.9%

Addressing Health Needs

Participant created goals

- ☐ **Mental Health & Drug/Substance Abuse:** Increase outpatient services for mental health/drug/substance abuse for all ages and decrease ED visits for mental health/drug/substance abuse by 5% over the next 3 years.
- ☐ **Chronic Disease Prevention (heart disease, obesity, diabetes):** Focus on reduction of chronic diseases status, specifically obesity and diabetes, through public-private coordination and resourcing to reduce prevalence rates within 3 years.

Community Summit: Participants

During the community summit, prioritized health needs were assigned to breakout groups. Each group was tasked with developing action plans to address their assigned health issue. Participants were able to draw on their existing knowledge of the community as well as the information presented during the summit, including impacts from the prior CHNA, community demographics and social determinants of health data, and community survey results.

Participation in the community summit included:

Organization	Population(s) Represented
Henderson-Vance County Economic Development Commission	Government Employee, Racial/Ethnic/Cultural Minority
Granville-Vance Public Health	Healthcare Professional, Government Employee or Representative, Educator, Racial/Ethnic/Cultural Minority, Public Health Official, Representative of Chronic Disease Group or Advocacy Organization Other: UNCQ & THWF
Ascendant Healthcare Advisors	Consulting Firm
WIZS	N/A
Vance-Granville Community College	Educator, Racial/Ethnic/Cultural Minority
Vance County Cooperative Extension	Government Employee or Representative, Educator, Racial/Ethnic/Cultural Minority
Maria Parham Health	Community Resident, Healthcare Professional, Government Employee or Representative Other: YMCA, Maria Parham Health Board

Input of medically underserved, low-income, and minority populations was received through both the community survey and summit.

Evaluation & Selection Process

Severity or urgency of health need

Health need has a higher severity, urgency, or burden and if addressed, could be positively impacted

Feasibility and effectiveness

Pressing health needs where hospital interventions are feasible and impactful

Impact on health disparities

Priority population health needs that have the ability to be positively impacted if addressed

Importance identified by community

Health needs with online survey higher rankings or frequently mentioned by community members

Maria Parham Health’s Health Need Evaluation				
	Severity or urgency	Feasibility and effectiveness	Impact on health disparities	Importance identified by community
Heart Disease	✓	✓	✓	✓
Stroke	✓	✓	✓	✓
Drug/Substance Abuse	✓	✓	✓	✓
Cancer	✓	✓	✓	✓
Diabetes	✓	✓	✓	✓
Mental Health	✓	✓	✓	✓
Education System	✓			
Community Safety	✓		✓	
Obesity	✓	✓	✓	
Abuse & Violence	✓		✓	

Overview of Priorities

Mental Health

Mental health was the sixth highest ranked health need in the community with a ranking of 4.78.

The following data points provide insight regarding mental health in the service area.

- Access to a mental health provider (2024):
 - Vance County: 340 people per mental health provider
 - Granville County: 250 people per mental health provider
 - Franklin County: 710 people per mental health provider
 - Nort Carolina: 300 people per mental health provider
- Suicide rate (2018-2022)
 - Vance County: 10 deaths by suicide per 100,000
 - Granville County: 16 deaths by suicide per 100,000
 - Franklin County: 18 deaths by suicide per 100,000
 - Nort Carolina: 13 deaths by suicide per 100,000
- Poor mental health days (2022):
 - Vane County: adults reported their mental health was not good on 5.4 of the previous 30 days
 - Granville County: adults reported their mental health was not good on 5.2 of the previous 30 days
 - Franklin County: adults reported their mental health was not good on 5.1 of the previous 30 days
 - Nort Carolina: adults reported their mental health was not good on 4.9 of the previous 30 days
- Frequent mental distress (2022):
 - Vance County: 19% of adults reported experiencing poor mental health for 14 or more days of the last 30 days
 - Granville County: 17% of adults reported experiencing poor mental health for 14 or more days of the last 30 days
 - Franklin County: 17% of adults reported experiencing poor mental health for 14 or more days of the last 30 days
 - Nort Carolina: 16% of adults reported experiencing poor mental health for 14 or more days of the last 30 days

Overview of Priorities

Drug/Substance Abuse

Drug/Substance Abuse was the third highest ranked health need in the community with a ranking of 4.82.

The following data points provide insight regarding drug/substance abuse in the service area.

- Between 2020-2022, the drug overdose death rate in Vance County was 45 deaths due to drug poisoning per 100,000 people compared to North Carolina at 36 deaths per 100,000.
- Between 2020-2022, the drug overdose death rate in Granville County was 33 deaths due to drug poisoning per 100,000 people compared to North Carolina at 36 deaths per 100,000.
- Between 2020-2022, the drug overdose death rate in Franklin County was 32 deaths due to drug poisoning per 100,000 people compared to North Carolina at 36 deaths per 100,000.

Heart Disease

Heart Disease was the highest ranked health need in the community with a ranking of 4.90.

The following data point provides insight regarding heart disease in North Carolina.

- The 2022 mortality rate for heart disease in North Carolina was 165.8 deaths per 100,000 people (21,763 deaths), which was the 24th highest rate in the United States.

Obesity

Obesity was the ninth highest ranked health need in the community with a ranking of 4.73.

The following data points provide insight regarding obesity the service area.

- In 2022, the adult obesity rate, defined as adults with a BMI of 30 or greater, was 41% in Vance County compared to North Caolina at 34%.
- In 2022, the adult obesity rate, defined as adults with a BMI of 30 or greater, was 38% in Granville County compared to North Caolina at 34%.
- In 2022, the adult obesity rate, defined as adults with a BMI of 30 or greater, was 38% in Franklin County compared to North Caolina at 34%.

Overview of Priorities

Not Selected Health Priorities

Maria Parham Health understands the need to address all health needs and is committed to making impacts across the community where possible. For the purpose of this CHNA, Maria Parham Health has decided to focus efforts toward the previous four health priorities.

The health priorities not selected are:

- ☐ **Stroke** - This is not addressed directly but has the potential to be indirectly impacted by the efforts of our other initiatives.
- ☐ **Cancer** - This is not addressed directly but has the potential to be indirectly impacted by the efforts of our other initiatives.
- ☐ **Diabetes** - This is not addressed directly but has the potential to be indirectly impacted by the efforts of our other initiatives.
- ☐ **Education System** - While we recognize the importance of this need, it is outside the scope of services the facility provides.
- ☐ **Community Safety** - While we recognize the importance of this need, it is outside the scope of services the facility provides.
- ☐ **Abuse & Violence** - While we recognize the importance of this need, it is outside the scope of services the facility provides.

Implementation Plan Framework

Executive and clinical leadership at Maria Parham Health gathered to discuss plans to address the identified health priorities. The leaders decided to breakout the health priorities into sub-categories to effectively create action plans to make positive community impacts. The next three pages outline the implementation plan for each identified health need seen below.

Maria Parham Health Health Need Evaluation

	Severity or urgency	Feasibility and effectiveness	Impact on health disparities	Importance identified by community
Mental Health	✓	✓	✓	✓
Drug/Substance Abuse	✓	✓	✓	✓
Heart Disease	✓	✓	✓	✓
Obesity	✓	✓	✓	

This implementation plan was approved by the Board on 12/16/25

Implementation Plan: Mental Health & Drug/Substance Abuse

Initiative: Access to mental health and drug/substance abuse care

Goal: Improved access to mental health and drug/substance abuse care through expansions and continued partnerships

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Completion of intake holding unit within the Emergency Department	December 1, 2025	➤ Maria Parham Health Nursing Leadership	➤ Law Enforcement ➤ District Attorney's Office ➤ Referral Partners at Vaya ➤ Public Health
Strategy 2: Initiation of intensive outpatient psychiatry services at Franklin campus	December 1, 2025	➤ Lifepoint Behavioral Health Management	➤ Referral Partners at Vaya ➤ Public Health
Continue marketing on intensive outpatient psychiatry services	Ongoing	➤ Maria Parham Health Marketing Team	
Strategy 3: Collaboration with local management entity (Vaya) on regional crisis center and behavioral health urgent care	October 1, 2026	➤ Maria Parham Health Executive Leadership	➤ Vaya ➤ Public Health
Strategy 4: Support establishment of a substance abuse outpatient psychiatry program located at regional crisis center	October 1, 2026	➤ Maria Parham Health Executive Leadership	➤ Vaya ➤ Public Health
Strategy 5: Explore opportunity to re-establish a local pain management clinic affiliated with Maria Parham Health	Ongoing	➤ Maria Parham Health Executive Leadership	

Anticipated Impact:

- Increased utilization in available local mental health and drug/substance abuse services

Implementation Plan: Chronic Diseases

Initiative: Heart Disease

Goal: Improve access to care for chronic heart disease patients and community residents

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Continue recruiting heart failure advanced practice provider	April 1, 2026	➤ Maria Parham Health Recruiting/Medical Group Services Team & Cardiovascular Services Director	
Strategy 2: Establish a heart failure clinic to manage chronic disease and reduce readmission	April 1, 2026	➤ Maria Parham Health Recruiting/Medical Group Services Team & Cardiovascular Services Director	➤ Referral Partners

Anticipated Impact:

- Improved access for the community in relation to heart disease

Implementation Plan: Chronic Diseases

Initiative: Obesity

Goal: Increase access to exercise opportunities to promote physical activity

Strategies Actions facility plans to implement	Goal Completion Date	Accountable Organization/Team	Community Resources & Partnerships
Strategy 1: Support Foundation funding for YMCA campus renovations and promote community and employee utilization	Quarter 4, 2028	➤ Maria Parham Health Executive Leadership and Joint Venture Board	➤ Triangle North Healthcare Foundation ➤ Henderson Family YMCA
Strategy 2: Explore walking paths for integrated “wellness” campus with a goal of promoting community and employee utilization	Quarter 4, 2028	➤ Maria Parham Health Executive Leadership	➤ Triangle North Healthcare Foundation ➤ Henderson Family YMCA ➤ City of Henderson
Strategy 3: Promote and facilitate cohesive and collaborative efforts to align public, private and non-profit entities toward specific community-wide health and wellness goals and objectives. Use existing efforts and work as examples of and catalyst for advancement and engagement Engage in initial meeting with quarterly interface	Quarter 4, 2028	➤ Maria Parham Health ➤ MPH Board of Trustees ➤ Public Health Departments	➤ Triangle North Healthcare Foundation ➤ Henderson Family YMCA ➤ City of Henderson ➤ Public Health Departments ➤ Non-profit collaborative group organized through the Chamber

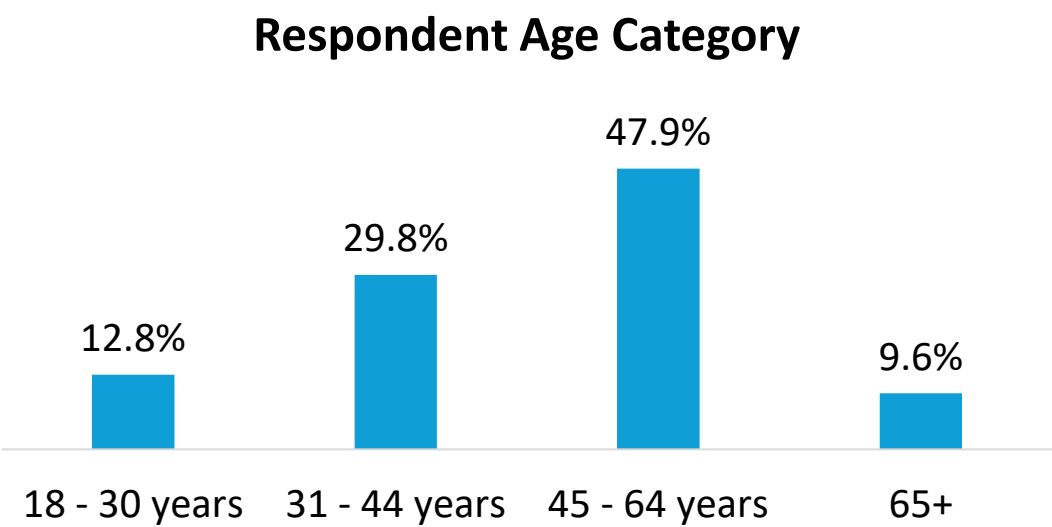
Anticipated Impact:

- Increased utilization of exercise opportunities by the community and Maria Parham Health employees
- Improved collaborative forums for cross-section of entities with like goals and objectives, yielding the most efficient possible use of available resources (i.e. people and funding)

Appendix: Survey Results

Survey Results

Survey Question 1: Please provide your age.



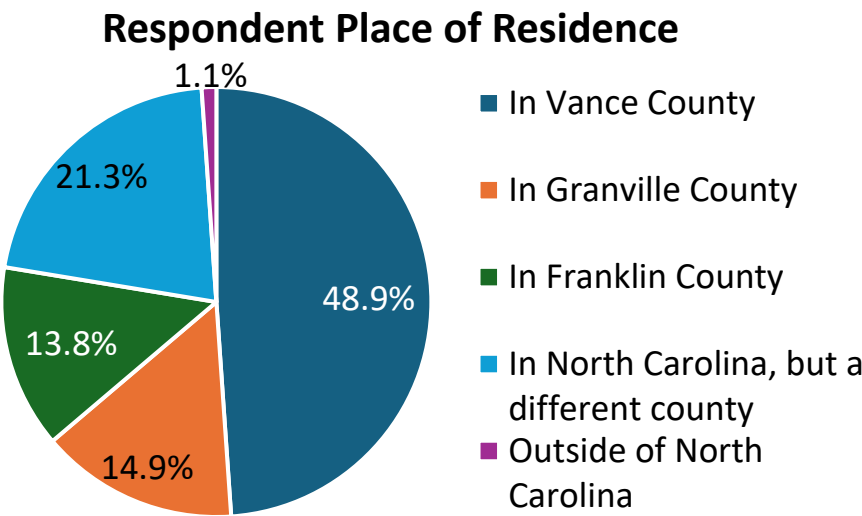
Survey Question 2: Please select which roles apply to you. [Check all that apply]

Respondent Community Role	% of Respondents
Healthcare Professional	83.0%
Community Resident	45.7%
Government Employee or Representative	5.3%
Racial/Ethnic/Cultural Minority	4.3%
Educator	3.2%
Underserved Population	3.2%
Public Health Official	2.1%
Rep. of Chronic Disease Group or Advocacy Org	1.1%
Other^	3.2%

^Other – Finance, hospital employee, clerical non-clinician

Survey Results

Survey Question 3: Where is your primary residence?



Survey Question 4: How would you describe your health? (1 star = Poor; 5 stars = Excellent)



Survey Question 5: How would you describe the overall health of your community? (1 star = Poor; 5 stars = Excellent)



Survey Results

Survey Question 6: Please rate the importance of addressing each Health Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes	
Heart Disease	4.90
Stroke	4.85
Cancer	4.80
Diabetes	4.80
Mental Health	4.78
Obesity	4.73
Women's Health	4.67
Children's Health	4.65
Lung Disease	4.55
Kidney Disease	4.54
Liver Disease	4.48
Alzheimer's & Dementia	4.45
Dental	4.41

Factor is in the overall top 10

Survey Question 7: If there is another Health Factor that needs addressing, please specify

- Mental/behavioral health (including child & adolescent) (4)
- Autoimmune including Rheumatology (2)
- Musculoskeletal pain & chronic pain/disability (2)
- Diet and how it relates to overall health
- Hepatology
- Hypertension
- Infectious Diseases
- Orthopedics
- Pregnancy prevention
- STD's
- Substance abuse
- Vision

Survey Results

Survey Question 8: Please rate the importance of addressing each Lifestyle & Personal Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes	
Drug/substance abuse	4.82
Abuse & Violence	4.71
Nutrition	4.63
Excess drinking	4.60
Smoking/vaping/tobacco use	4.53
Physical inactivity	4.53
Employment status	4.46
Personal health education	4.45
Risky sexual behavior	4.36

Factor is in the overall top 10

Survey Question 9: If there is another Lifestyle & Personal Factor that needs addressing, please specify

- Adequate housing
- Family dynamic/healthy social support structures
- Inpatient healthcare providers
- Personal hygiene
- Poverty and lower education level
- Substance abuse

Survey Results

Survey Question 10: Please rate the importance of addressing each Community & Healthcare Services Factor on a scale of 1 (not important) to 5 (very important).

Weighted average of votes	
Education system	4.77
Community safety	4.73
Access to healthy food	4.60
Poverty	4.56
Access to affordable healthcare	4.51
Access to convenient healthcare	4.51
Access to health prevention & education services	4.46
Access to exercise/recreation	4.44
Access to senior services	4.42
Access to childcare	4.38
Affordable housing	4.37
Transportation	4.33
Language and/or cultural barriers	4.11

Factor is in the overall top 10

Survey Question 11: If there is another Community & Healthcare Services Factor that needs addressing, please specify

- Abandoned cars risk factors in the Community
- Access to clean, safe drinking water
- Hepatology
- Medical care compliance
- Mental health facilities- more access & open longer hours to stop having them repeatedly staying in the ER
- Transportation to services

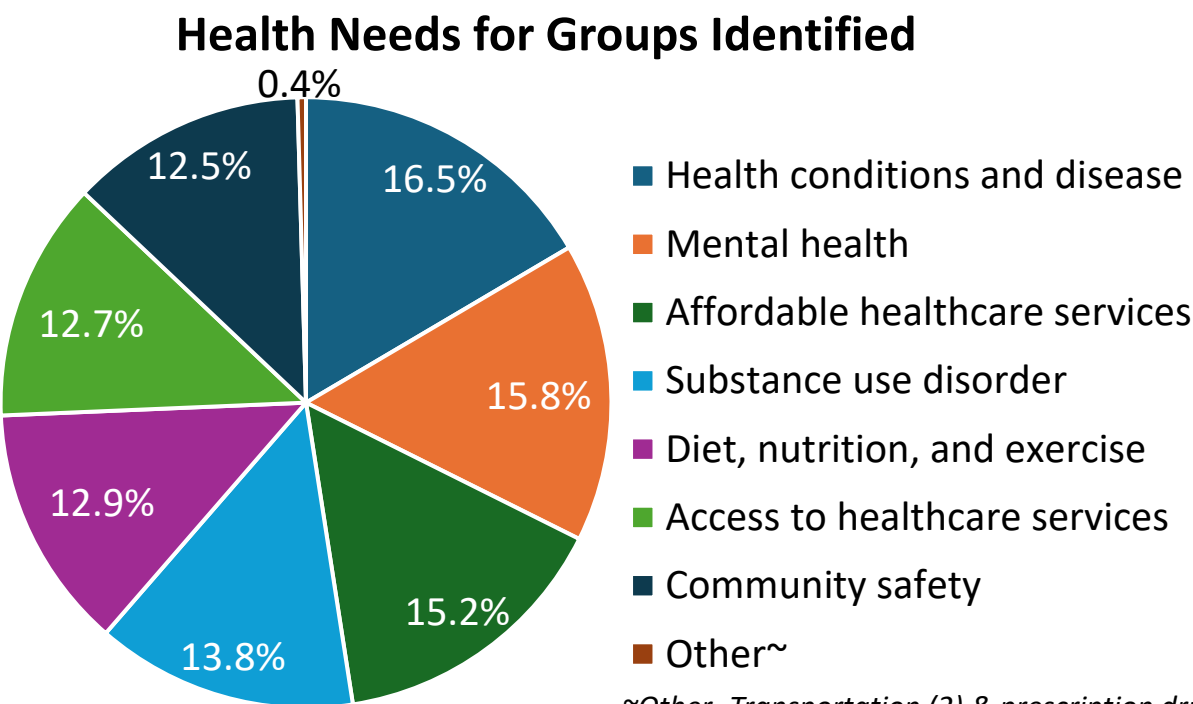
Survey Results

Survey Question 12: Which groups have the highest health needs in your community? (Select all that apply)

Groups with Highest Health Needs	% of Total Votes
Low-income groups	26.3%
Older adults	24.4%
Individuals requiring additional health support	14.1%
Racial and ethnic minority groups	10.9%
Women	10.3%
Children	9.7%
LGBTQIA+	3.8%
Other^	0.6%

^Other- Substance abusers and non compliance with healthcare & men

Survey Question 13: What are the health needs, if any, for the group(s) selected above? (Select all that apply)



~Other- Transportation (2) & prescription drug costs

Survey Results

Survey Question 14: How would you rate the quality of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)



Survey Question 15: How would you rate the convenience of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)

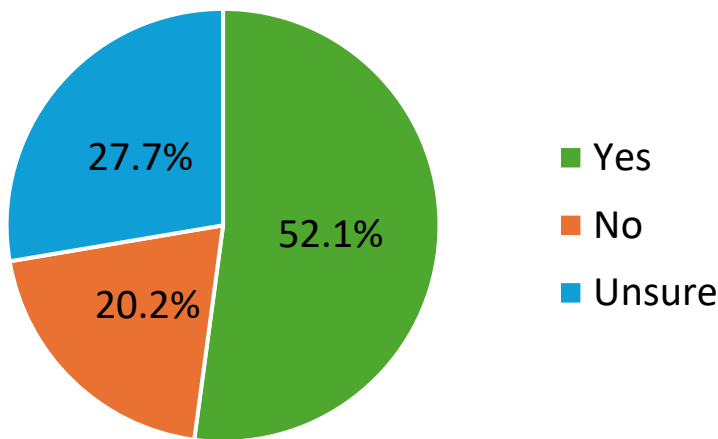


Survey Question 16: How would you rate the affordability of healthcare services in your community? (1 star = Poor; 5 stars = Excellent)



Survey Results

Survey Question 17: Are you aware of efforts to address Mental Health & Substance Use in your community in the last 3 years?



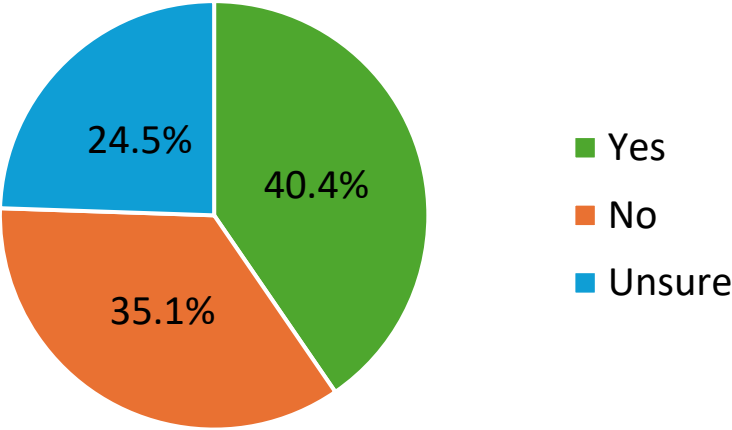
Survey Question 18: If yes, please share comments or observations about the positive changes you have seen in the community.

- Themes from Comments (23 responses):**
- 1. Addition/expansion of behavioral health are to ED (9)
 - ☐ Behavioral health at Franklin campus, ED renovation at Henderson campus from grant money to assist IVC patients' safety
 - ☐ The expansion of mental health services at Maria Parham is HUGE for our community!
 - ☐ Why can't Franklin hospital renovate the upper floors to accommodate BH patients
 - 2. BH unit at Franklin campus (5)
 - 3. Intensive outpatient expansion and introduction to Franklin (4)
 - 4. Criticism of efforts (3)
 - ☐ Too many resources spent on Mental Health
 - ☐ Treatment of patients unable to pay
 - 5. Inpatient behavioral health in Henderson (2)

- Additional Comments:**
- First time this year they have mental health program offered with our health insurance
 - Good progress to sustain and build on a previously closed facility
 - Outreach to community agencies
 - Partnership with Vaya for onsite development of additional community programs, services and wrap around care
 - Team member participation in monthly crisis services meeting
 - Maria Parham Stomp the Stigma Run
 - Safe Spaces is a great addition!
 - Great care from ED social workers
 - Need efforts in Vance County
 - Need more mental health availability in the outpatient setting

Survey Results

Survey Question 19: Are you aware of efforts to address Access to Healthcare in your community in the last 3 years?



Survey Question 20: If yes, please share comments or observations about the positive changes you have seen in the community.

Themes from Comments (12 responses):

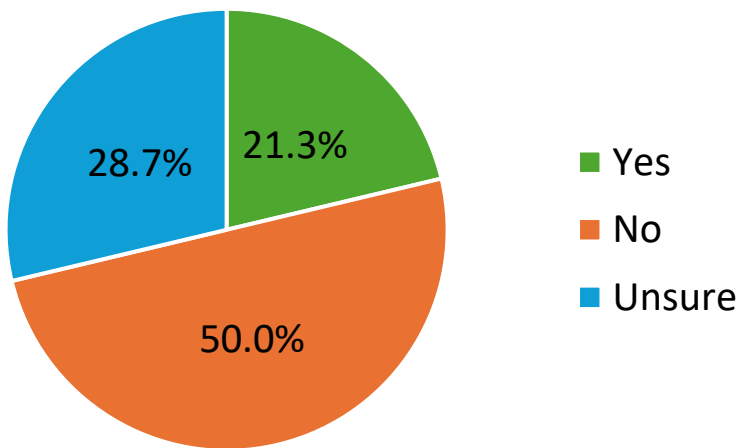
- 1. Expansion of clinics/more accessibility (specialty and primary care) (8)
 - ☐ Multiple options for affordable PCP and women's care within the community
 - ☐ Women's clinic not well used since opening satellites
- 2. Offices/hospital in Louisburg (2)

Additional Comments:

- Would love to see after-hours primary care options beyond Vance Family.
- Access to local providers needs improvement to prevent patients from seeking care in the ED
- Maria Parham Cancer Center does well to make sure patients have access to their appointments
- Physician recruitment and program development, coordination of care

Survey Results

Survey Question 21: Are you aware of efforts to address Engaging Youth for Community Health & Safety in your community in the last 3 years?



Survey Question 22: If yes, please share comments or observations about the positive changes you have seen in the community.

Themes from Comments (5 responses):

- None

Additional Comments:

- Free health screenings for athletes
- I think it is great that Maria Parham is addressing this issue and is actively involved in the community.
- MPH attends multiple career fairs, school days, and community events to promote health, educate and teach hands only CPR
- Not enough is being done to educate the community about the appropriate facilities and what services are offered at which facilities
- Trunk or treat

Survey Results

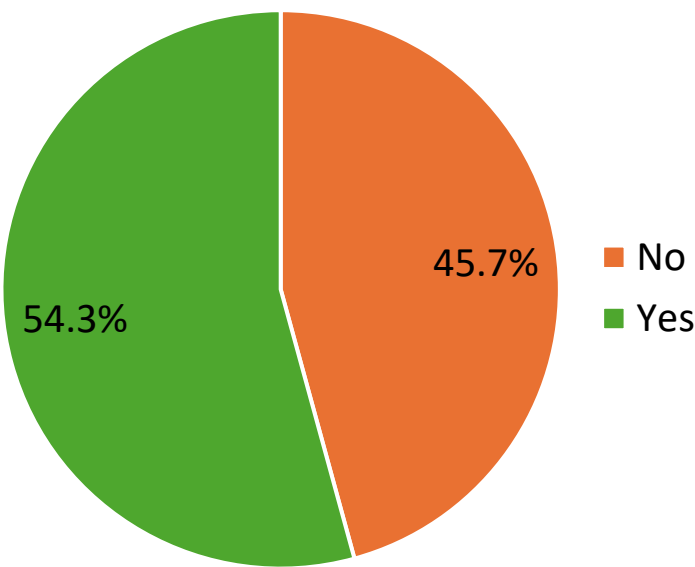
Survey Question 23: Which services do you use for basic health needs? (Select all that apply)

Services Utilized for Basic Health Needs	% of Total Votes
My primary care doctor or family physician	47.4%
Urgent care center	15.8%
Hospital (including ER)	12.1%
Retail clinic (CVS, Walgreens, etc.)	11.1%
Alternative healthcare providers (chiropractors, etc.)	7.4%
Health department	2.6%
Free clinic	1.6%
School/university nurse	1.1%
I do not have a healthcare provider	0.5%
Other*	0.5%

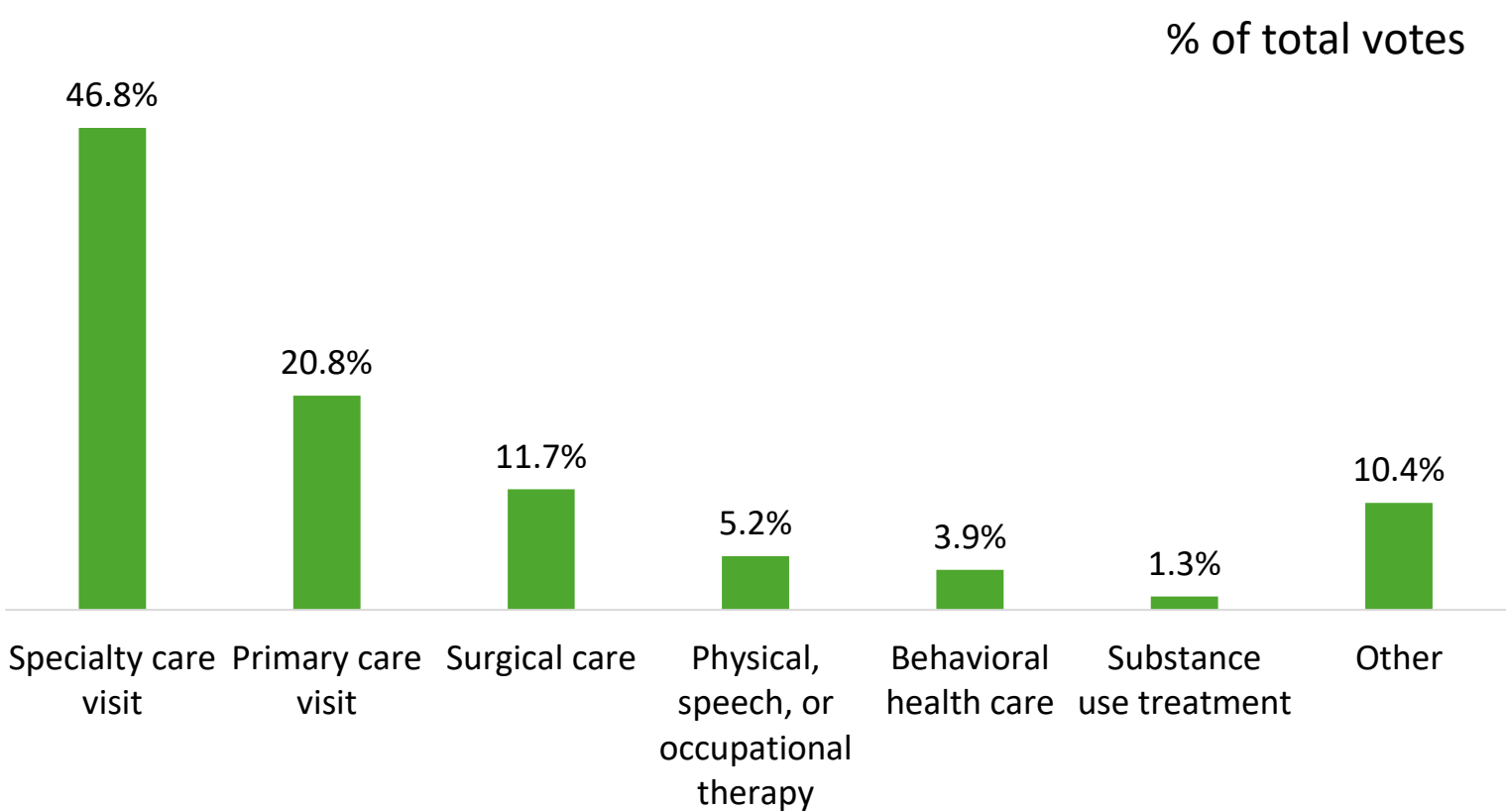
**Other – Virtual*

Survey Results

Survey Question 24: In the last 12 months, have you received healthcare outside of your community?



Survey Question 25: Which of the following services did you receive outside the community? (Select all that apply)



Survey Results

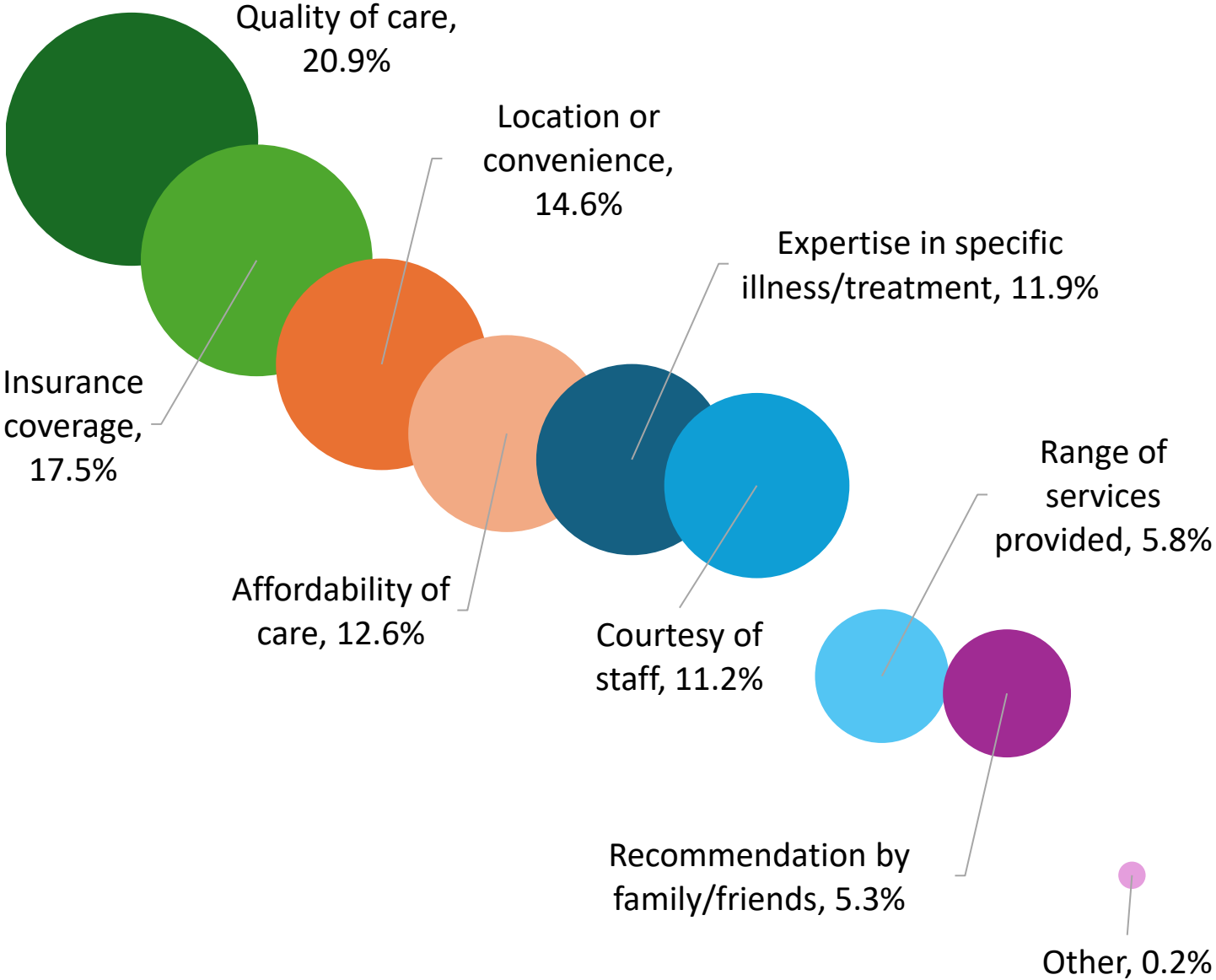
Survey Question 26: If you selected yes to seeking specialty care or surgical care outside the community, please specify what services you are seeking.

Pediatrics {including endocrinology, dental, ENT} (4)	Dermatology (3)	Neurology (3)	OB/GYN (2)
Cardiology (2)	Dental Care/ Orthodontics (2)	Imaging {including mammography} (2)	Orthopedics (2)
Pulmonology (2)	Sleep Disorder/ Medicine (2)	Urgent Care (2)	Child Psychotherapy
Duke	Eye Care	Gastroenterology	Hand Surgeon & Therapy
Healthcare with higher level of care	Hematology	Hepatology	Management of ADD/ADHD for adults
Midwife	Plastic Surgery	Speech Therapy	UroGyn

Survey Results

Survey Question 27: What do you consider to be the most important when considering a healthcare provider? (Select all that apply)

(% of total votes)



Survey Results

Survey Question 28: Which of the following public health services should Maria Parham Health and its community partners focus on improving? (Select all that apply)

