



2023-2025
AdventHealth
Hendersonville
Community
Health Plan

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Acknowledgements

This community health plan was prepared by Graham Fields, with contributions from members of AdventHealth Hendersonville’s Community Health Needs Assessment Team, the Henderson County Department of Health, Pardee UNC Health Care, and Henderson County Partnership for Health, all representing health leaders in the community and hospital leaders.

We are especially grateful for the internal and external partners who helped guide the development of the community health plan which will enable our teams to continue fulfilling our mission of Extending the Healing Ministry of Christ.



EXECUTIVE SUMMARY



Executive Summary

Fletcher Hospital Inc. d/b/a AdventHealth Hendersonville will be referred to in this document as AdventHealth Hendersonville or the “Hospital”.

Community Health Needs Assessment Process

AdventHealth Hendersonville in Hendersonville, North Carolina, conducted a community health needs assessment in 2022. The assessment identified the health-related needs of the community including low-income, minority and other underserved populations. This assessment process was the most comprehensive to date and included survey questions related to diversity, equity and inclusion. In addition, the priorities were defined, when possible, in alignment with Healthy People 2030, national public health priorities to improve health and well-being.

In order to ensure broad community input, AdventHealth Hendersonville partnered with Henderson County Department of Health, Pardee UNC Health Care and the Henderson County Partnership for Health to help guide the Hospital through the assessment process. This group, referred to as the Collaborative included representation from the Hospital, public health experts and the broad community. This included intentional representation from low-income, minority and other underserved populations. The prioritization process sought to balance our ability to impact the greatest number of people who are facing the greatest disparities.

The Collaborative met throughout 2021-2022. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan to address those priorities. Learn more about Healthy People 2030 at <https://health.gov/healthypeople>.

Community Health Plan Process

The Community Health Plan (CHP), or implementation strategy, is the Hospital’s action plan to address the priorities identified from the CHNA. The plan was developed by the Hospital, and input received from the Collaborative and stakeholders across sectors including public health, faith-based, business and individuals directly impacted.

The CHP outlines targeted interventions and measurable outcomes for each priority noted below. It includes resources the Hospital will commit and notes any planned collaborations between the Hospital and other community organizations and hospitals.

The identified goals and objectives were carefully crafted, considering evidence-based interventions and AdventHealth’s Diversity, Equity, and Inclusion and Faith Accountability strategies. AdventHealth Hendersonville is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to all we serve.



Executive Summary

Priorities Addressed

The priorities addressed include:

1. Mental Health
2. Substance Misuse
3. Physical Activity and Nutrition
4. Safe and Affordable Housing
5. Interpersonal Violence

Although not chosen as a priority directly, health disparities were recognized as a common concern among all priorities and an equity-based approach to improve health outcomes will be an inherent part of our strategy for forthcoming action plans.

See page 9 for goals, objectives and next steps for each priority selected to be addressed.

Priorities Not Addressed

The priorities not addressed include:

1. Healthy Aging

See page 22 for an explanation of why the Hospital is not addressing these issues.



The Community Health Plan is a three-year strategic plan and may be updated during implementation based on changing community needs or availability of resources. AdventHealth recognizes community health is not static and high priority needs can arise or existing needs can become less pressing. The Hospital may pivot and refocus efforts and resources to best serve the community.

I Executive Summary

Board Approval

On May 10, 2023, the AdventHealth Hendersonville Board approved the Community Health Plan goals, objectives and next steps. A link to the 2023 Community Health Plan was posted on the Hospital's website prior to May 15, 2023.

Ongoing Evaluation

AdventHealth Hendersonville's fiscal year is January – December. For 2023, the Community Health Plan will be deployed beginning May 15, 2023, and evaluated at the end of the calendar year. In 2024 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1st and ending December 31st. Evaluation results will be attached to the Hospital's IRS Form 990, Schedule H. The collective monitoring and reporting will ensure the plan remains relevant and effective.

For More Information

Learn more about the Community Health Needs Assessment and Community Health Plan for AdventHealth Hendersonville at <https://www.adventhealth.com/community-health-needs-assessments>.



ABOUT ADVENTHEALTH



| About AdventHealth

AdventHealth Hendersonville is part of AdventHealth. With a sacred mission of Extending the Healing Ministry of Christ, AdventHealth strives to heal and restore the body, mind and spirit through our connected system of care. More than 80,000 skilled and compassionate caregivers serve 4.7 million patients annually. From physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, wholistic care at more than 50 hospital campuses and hundreds of care sites throughout nine states.

Committed to your care today and tomorrow, AdventHealth is investing in research, new technologies and the people behind them to redefine medicine and create healthier communities.



About AdventHealth Hendersonville

AdventHealth Hendersonville (formerly Park Ridge Health) was built by Henderson County residents in 1910 as the community's first health care provider, and more than 100 years later is providing quality, compassionate care in an environment rated by patients among the top 15% in the nation, according to the US Department of Health & Human Services. AdventHealth Hendersonville is a 103-bed, state of the art hospital that includes cardiac care & rehabilitation, emergency services, nationally awarded cancer care, state-of-the-art surgical care, full-service orthopedic care, an award-winning labor & delivery experience and a full range of imaging services to help people across our region experience whole health.

Leading the way in many medical firsts for the region, AdventHealth Hendersonville is the first hospital in Western North Carolina to earn The Joint Commission's Gold Seal of Approval® for five orthopedic specialties including Spine Surgery, Total Ankle Replacement, Total Hip Replacement, Total Knee Replacement and Total Shoulder Replacement. It is also the first to use the Mazor X™ and Navio™ Robotic Guidance Platforms. AdventHealth Hendersonville consistently earns national ranking for its commitment to patient safety, earning the overall Five-Star rating in Quality from the Centers for Medicare & Medicaid (CMS), 13 consecutive "A" grades in Leapfrog Group's Safety Grade survey, and the 2021 and 2022 Leapfrog Top Hospital Award for outstanding quality and safety.

PRIORITIES ADDRESSED



Mental Health

In the Hospital’s community, 17% of residents reported seven days or more of poor mental health in the last month on the 2021 Community Health Survey, compared to 9.2% in 2015. A similar percentage (16.8%) reported not getting needed mental health care or counseling in the past year. The assessment also found that 22.3% of adults in the community are currently taking medication or receiving treatment for mental health and almost six percent have considered suicide in the past year. The suicide mortality rate in the community has been steadily climbing. As the suicide mortality rate has climbed, the gender disparity in suicide trends has intensified. From 2015 to 2019, the male suicide rate was five times that of females. Suicide stands as the 7th overall leading cause of death in Henderson County, and the 3rd leading cause of death among individuals ages 20 to 39.

Goal 1: Improve health by increasing access to mental and behavioral health services for all people in the community.

Objective 1.1: By December 31, 2025, reduce the percentage of adults in Henderson County reporting an inability to get needed mental health care or counseling from a baseline of 16.8% to 15.9% in the next CHNA community survey.

Target Population: All adults in the community with a focus on individuals living in poverty, those experiencing severe and persistent mental illness and historically marginalized populations.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
The Henderson County Behavioral Health Action Team will continue hosting quarterly Behavioral Health Summits with regional behavioral health providers and support agencies to increase access to mental health care and counseling in the region.	Reduction in percentage of adults reporting an inability to access mental health services. Number of collaborations developed amongst partners.	The hospital will continue its participation in the Henderson County Behavioral Health Action Team and the quarterly summits.	Henderson County Partnership for Health, Pardee UNC Healthcare, Henderson County Department of Public Health, Henderson County Public Schools, Henderson County Sheriff’s Department, City of Hendersonville, Henderson County Department of Social Services, Crossnore Communities for Children, United Way of Henderson County, Vaya Health, Blue Ridge Health, Safelight, Thrive, Interfaith Assistance Ministries (IAM), Blue Ridge Community College, The Free Clinics, Community Foundation of Henderson County, Hope Coalition, Council on Aging of Henderson County, Children and Family Resource Center, Smart Start Partnership for Children, Family Preservation Services and numerous other community organizations.	X	X	X

Mental Health

Goal 1 continued: Improve health by increasing access to mental and behavioral health services for all people in the community.

Objective 1.2: By December 31st, 2025, increase the number of individuals with severe and persistent mental illness served by Thrive in its Clubhouse Day Program by 10%.

Objective 1.3: By December 31st, 2025, increase the number of patient encounters through The Free Clinics' Behavioral Health Care programs by at least 5% from a baseline of 5,311 encounters to 5,576 encounters.

Target Population: All adults in the community with a focus on individuals living in poverty, those experiencing severe and persistent mental illness and historically marginalized populations.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Thrive and their work to increase access to mental health services in the region.	Number of individuals with severe and persistent mental illness participating in Thrive's Clubhouse Day Program	The hospital will continue its support of Thrive and the Clubhouse Day Program through an annual donation of \$7,500.	Thrive	X	X	X
Support The Free Clinics and their work to increase access to mental health services in the region through their Behavioral Health Care programs.	Number of patient encounters	The hospital will continue its support of The Free Clinics through an annual donation of \$10,000 and provide in-kind donations of physician, diagnostic imaging and surgical services for the organization's patients.	The Free Clinics	X	X	X

Mental Health

Goal 2: Increase public awareness of behavioral health needs in the community and work to change associated stigmas.

Objective 2.1: By December 31, 2025, increase the number of Mental Health First Aid classes through Henderson County Public Schools from a baseline of 3 classes per year to 6 classes per year.

Objective 2.2: By December 31, 2025, Henderson County will begin implementing Crossnore’s Trauma Resilient Communities (CTRC) pilot program. CTRC engages with individuals and organizations to embed and embody the science of trauma resilience into their individual and collective practice. In this way, relationships between people as well as cultures of organizations can grow into healthier and safer communities.

Target Population: All people in the community with a focus on individuals living in poverty, students and children in foster care.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Partner with Henderson County Public Schools to increase the number of community members trained in mental health first aid.	The annual number of mental health first aid classes	The hospital will continue to help fund (\$2,500 annually) the facilitation of mental health first aid classes	Henderson County Public Schools	X	X	X
Support Crossnore Communities for Children as they begin implementation of their Trauma Resilient Communities program in Henderson County.	Crossnore will begin training local organizations and agencies to participate in the initiative.	The hospital will support the initiative through an annual donation of \$10,000.	Crossnore Communities for Children, Dogwood Health Trust and numerous community organizations and agencies.	X	X	X

Substance Misuse

Slightly more than 42% of survey respondents report that their life has been negatively impacted by substance misuse. While unintentional opioid overdose deaths in community have been steadily increasing yearly, now at 26.4 deaths per 100,000 residents. This accounts for deaths by all types of opioids. However, illicit substances such as heroin, fentanyl and fentanyl analogues are increasingly contributing to overdose deaths. In 2020, 83.9% of all overdose deaths in the community were contributed to illicit opioid involvement.

Goal 1: Increase access to recovery support programs in the region.

Objective 1.1: By December 31, 2025, increase the number of individuals served through Asheville Buncombe Community Christian Ministries’ (ABCCM) Steadfast House residential substance abuse program by at least 5% from a baseline of 208 women and children.

Objective 1.2: By December 31, 2025, increase the number of individuals receiving substance abuse treatment and family counseling programs through First Contact Addiction Ministries from a baseline of 2,382 clients to 2,501 clients.

Target Population: All adults in the community with a focus on women with children living in poverty, individuals struggling with substance misuse and historically marginalized populations.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Asheville Buncombe Community Christian Ministries (ABCCM) as they continue growing their Steadfast House residential substance misuse treatment program.	Number of women and children served by Steadfast House	The hospital will continue supporting ABCCM through its annual donation of \$15,000.	Asheville Buncombe Community Christian Ministries (ABCCM)	X	X	X
Support First Contact Addiction Ministries as they expand their substance misuse treatment and family counseling programs.	Number of clients served by First Contact Addiction Ministries	The hospital will continue supporting First Contact Addiction Ministries through its annual donation of \$10,000.	First Contact Addiction Ministries	X	X	X

Substance Misuse

Goal 2: Support substance misuse education and early intervention programs in the region.

Objective 2.1: The Hospital will provide an annual donation of \$15,000 to support Hope Coalition’s education and prevention programs—namely the annual Week of Hope, a student-led substance misuse initiative for middle and high school students in Henderson County. A partnership with Henderson County Public Schools, Week of Hope is a weeklong series of programs and activities designed to help students understand the dangers of drugs and commit to healthy life choices.

Objective 2.2: By December 31, 2025, increase the number of the Hope Coalition’s substance misuse education programs in the region by at least 10% from a baseline of 23 events.

Target Population: All people in the community with a focus on youth, those living in poverty, the uninsured and underinsured and historically marginalized populations.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Continue to support the Hope Coalition and Henderson County Public Schools’ annual Week of Hope program for middle and high school students in Henderson County.	Annual Week of Hope initiative. Number of students participating.	Hospital will continue its annual donation of \$15,000 in support of the program and serve on the organization’s education committee.	Hope Coalition, Henderson County Public Schools	X	X	X
Expand the number of substance misuse education events through the Hope Coalition.	Number of substance misuse education events through Hope Coalition.	Hospital will continue its annual donation of \$15,000 in support of the program and serve on the organization’s education committee.	Hope Coalition and numerous community non-profits, local governments and business partners.	X	X	X

Physical Activity and Nutrition

The assessment found that 17.2% of adults in the community were food insecure, meaning they ran out of food in the past year and/or were worried about running out of food. In the Community Health Survey, only 4.6% of respondents also reported consuming the recommended servings of fruits and vegetables daily, this was a more than a 50% decrease from the last assessment. One fifth of survey respondents also reported participating in no leisure time physical activity in the last month. Just slightly more than a quarter of survey respondents reported getting the recommended 150 minutes of moderate aerobic physical activity per week.

Goal 1: Increase access to healthy, nutritious foods to address food insecurity in the region.

Objective 1.1: By December 31, 2025, increase the number of unique households receiving meals from Interfaith Assistance Ministries (IAM) from a baseline of 4,294 households to 4,508 households.

Objective 1.2: By December 31, 2025, increase the number of food boxes distributed by Asheville-Buncombe Community Christian Ministries (ABCCM) by at least 5% from a baseline of 68,438 boxes.

Target Population: Focus on adults and children living in poverty, who are uninsured or underinsured and experiencing food insecurity.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Interfaith Assistance Ministries (IAM) as they expand their food pantry program to address food insecurity in Henderson County.	Number of unique households receiving meals from IAM.	The Hospital will continue supporting IAM through volunteerism and an annual \$10,000 donation.	Interfaith Assistance Ministries (IAM)	X	X	X
Support Asheville-Buncombe Community Christian Ministries (ABCCM) as they grow their food distribution program in Asheville and Buncombe County.	Number of food boxes distributed by ABCCM	The Hospital will continue supporting ABCCM through volunteerism and an annual \$15,000 donation.	ABCCM	X	X	X

Physical Activity and Nutrition

Goal 1 continued : Increase access to healthy, nutritious foods to address food insecurity in the region.

Objective 1.3: By December 31, 2025, increase the number of hot meals served by Western Carolina Rescue Ministries from a baseline of 70,830 meals to 74,371 meals.

Objective 1.4: By December 31, 2025, increase the number of food boxes distributed by The Storehouse from a baseline of 9,710 food boxes to 10,681 food boxes.

Target Population: Focus on adults and children living in poverty, who are uninsured or underinsured and experiencing food insecurity.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Western Carolina Rescue Ministries as they expand their hot meal program in Asheville and Buncombe County.	Number of hotel meals served by Western Carolina Rescue Ministries	The Hospital will continue supporting Western Carolina Rescue Ministries through volunteerism and an annual donation of \$10,000.	Western Carolina Rescue Ministries	X	X	X
Support The Storehouse as they increase the number of food boxes the organization distributes in the community.	Number of food boxes distributed by The Storehouse	The Hospital will continue supporting The Storehouse through volunteerism and an annual donation of \$5,000.	The Storehouse	X	X	X

Physical Activity and Nutrition

Goal 2: Encourage active and healthy living for everyone in the region.

Objective 2.1: By December 31, 2025, increase the number of girls participating in Girls on the Run programs in the region by at least 20% from a baseline of 177 girls to 213 girls.

Objective 2.2: The Hospital will invest \$10,000 annually in Interfaith Assistance Ministries (IAM) to support the implementation of a new mobile food pantry designed to reach geographically underserved communities in Henderson County with food resources and healthy living programs.

Target Population: All people in the community with a focus on families and youth—specifically those living in poverty, the uninsured and underinsured and historically marginalized communities.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Increase the number of girls participating in Girls on the Run programs in Western North Carolina.	Number of girls participating in Girls on the Run programs	Hospital will continue supporting Girls on the Run through volunteerism and an annual \$5,000 donation.	Girls on the Run of Western North Carolina	X	X	X
Support Interfaith Assistance Ministries (IAM) as they create a mobile food pantry to increase access to food resources and healthy living education programs for geographically underserved communities in Henderson County.	Creation of a mobile food pantry	The Hospital will continue supporting IAM through volunteerism and an annual \$10,000 donation.	Interfaith Assistance Ministries (IAM)	X	X	X

Safe and Affordable Housing

The need for safe and affordable housing in the community is significant. Housing can affect a wide range of health and quality of life outcomes and regardless of age, job, race, ability, income or position in life everyone needs a place to live. A quarter of homeowners and 42.8% of renters are paying over 30% of their income towards housing. On average, community residents spend more on housing compared to the rest of the region, with the exception of those in Buncombe County. The Community Health Survey also found almost a quarter of respondents were worried or stressed about paying their rent or mortgage in the last year. While almost 10% reported having a time in the past year when their home was without electricity, water or heating.

Goal 1: Increase access to emergency housing in the region.

Objective 1.1: By December 31, 2025, increase the number of annual safe beds through Western Carolina Rescue Ministries from a baseline of 26,480 annual safe beds to 27,804.

Objective 1.2: By December 31, 2025, increase the number of adults and children served by Safelight in its emergency shelter by at least 5% from a baseline of 162 adults and children.

Target Population: Focus on adults and children living in poverty, who are uninsured or underinsured and experiencing homelessness.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Western Carolina Rescue Ministries' goal of serving additional people through its emergency shelter in Buncombe County.	Number of annual safe beds through Western Carolina Rescue Ministries	The Hospital will continue supporting Western Carolina Rescue Ministries through volunteerism and an annual \$10,000 donation.	Western Carolina Rescue Ministries	X	X	X
Support Safelight's goal of serving additional people through its emergency shelter in Henderson County.	Number of adults and children served in Safelight's emergency shelter	The Hospital will continue its support of Safelight with volunteerism, serve on the organization's board and give an annual donation of \$17,000.	Safelight	X	X	X

Safe and Affordable Housing

Goal 2: Residents of Henderson County and the region have access to safe, affordable and adequate housing.

Objective 2.1: By December 31, 2025, increase the number of clients served by Thrive’s Housing Case Management program by at least 10% from a baseline of 203 clients.

Objective 2.2: By December 31, 2025, increase the number of home repairs completed through Henderson County Habitat for Humanity’s home repair program by at least 30% from a baseline of 21 repairs.

Target Population: All people in the community with a focus on families and youth—specifically senior adults living in poverty and the uninsured and underinsured.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Grow the number of participants in Thrive’s Housing Case Management program.	Number of clients served by Thrive’s Housing Case Management program.	Hospital will continue supporting Thrive through an annual donation of \$7,500.	Thrive	X	X	X
Support Henderson County Habitat for Humanity as they expand their newly created home repair program for senior adults living in poverty.	Number of home repairs through Henderson County Habitat for Humanity	The Hospital will continue supporting Henderson County Habitat for Humanity through volunteerism and an annual donation of \$5,000.	Henderson County Habitat for Humanity	X	X	X

Interpersonal Violence

Interpersonal violence was identified as a new priority in the assessment and has not been directly addressed before. The priority rose to the top as a result of data provided by Safelight, a nonprofit agency in the community providing support to survivors of interpersonal violence. In 2021, Safelight served 1,219 unique clients across all of their programs. Nearly a third (29%) of the clients served were under the age of 18. More than half (54%) of clients served were between the ages of 25 and 59. Most of Safelight’s clients were female (84%) with 74% being non-Hispanic, White and 12% being Hispanic/Latino.

Goal 1: Increase access to domestic violence and sexual assault prevention and treatment programs in the region.

Objective 1.1: By December 31, 2025, increase the number of sexual abuse survivors served by Our Voice through its recovery programs by at least 5% from a baseline of 549 survivors.

Objective 1.2: By December 31, 2025, increase the number of domestic violence survivors receiving safe, effective and timely victim advocacy services to address the effects of trauma through Helpmate from a baseline of 3,660 domestic violence survivors to 3,843.

Target Population: Focus on adults and children living in poverty, historically marginalized populations and the uninsured or underinsured.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Support Our Voice’s goal to grow its recovery programs to serve additional sexual abuse survivors in Buncombe County.	Number of sexual assault survivors served.	The Hospital will continue its support of Our Voice by serving on the organization’s board and giving an annual donation of \$5,000.	Our Voice	X	X	X
Support Helpmate as they expand their work in Buncombe County to serve domestic violence survivors in their shelter.	Number of domestic violence survivors served.	The Hospital will continue its support of Helpmate through an annual donation of \$5,000.	Helpmate	X	X	X

Interpersonal Violence

Goal 2: Increase access to child abuse prevention and treatment.

Objective 2.1: By December 31, 2025, increase the number of child medical exams through the Believe Child Advocacy Center (CAC) by at least 10% from a baseline of 220 exams.

Objective 2.2: By December 31, 2025, increase the number of children served by Crossnore’s school-based mental health counseling program by 10% from a baseline of 140 children.

Target Population: Focus on adults and children living in poverty, historically marginalized populations and the uninsured or underinsured.

Activities/Strategies	Outputs	Hospital Contributions	Community Partnerships	Timeline		
				Y1	Y2	Y3
Expand the capacity of the Believe Child Advocacy Center (CAC) to provide child medical exams in the region.	Number of child medical exams.	Hospital will continue supporting Safelight and the Believe Child Advocacy Center through volunteerism, service on the organization’s board, an annual donation of \$17,000 and employing clinical staff (Physician Assistants) for the program.	Safelight, Believe Child Advocacy Center (CAC)	X	X	X
Grow the capacity of Crossnore’s school-based mental health counseling program.	Number of children served	The Hospital will support Crossnore through an annual \$10,000 donation.	Crossnore Communities for Children	X	X	X

PRIORITIES NOT ADDRESSED



I Priorities Not Addressed

AdventHealth Hendersonville also identified the following priorities during the CHNA process. In reviewing the CHNA data, available resources, and ability to impact the specific identified health need, the Hospital determined these priorities will not be addressed.

Healthy Aging

Adopting healthy habits and behaviors, staying involved in your community, using preventive services, managing health conditions and understanding all your medications can contribute to a productive and meaningful life as an individual's age. The assessment found by 2050, almost one third of the community is projected to be over the age of 65. As the population ages, it is important to have the resources and infrastructure for individuals to age in a safe and healthy way in the community. The Hospital did not select healthy aging as a priority, as the county has several ongoing, existing efforts that are effectively addressing the issue (Council on Aging, etc.). The Hospital will continue to support this work.





**Fletcher Hospital, Inc. d/b/a
AdventHealth Hendersonville**

CHP Approved by the Hospital Board on: May 10, 2023

For questions or comments please contact:
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