

AdventHealth Hendersonville

2026 – 2028 Community Health Plan



AdventHealth

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Acknowledgements

This community health plan was prepared by DeLaina Lewkowicz with contributions from members of the Collaborative with Henderson County Department of Public Health, UNC Health Pardee and Henderson County Partnership for Health, and Hospital Health Needs Assessment Committee, representing health leaders in the community and AdventHealth Hendersonville 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 from March 2024 to June 2025. The assessment identified the health-related needs of the community, including low-income, minority and other underserved populations. The priorities were defined in alignment with Healthy People 2030, the national initiative aimed at improving the health and well-being of people in the United States.

In order to ensure broad community input, AdventHealth Hendersonville took part in a Collaborative with Henderson County Department of Public Health (HCDPH) UNC Health Pardee, and the Henderson County Partnership for Health, to help guide the Hospital through the assessment process. 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.

AdventHealth Hendersonville also convened a Hospital Health Needs Assessment Committee (HHNAC) to help select the needs the Hospital would most effectively address to support the community. The HHNAC made this decision by reviewing the priority needs selected by the CHNAC and the internal Hospital resources available.

The Collaborative met throughout 2025. The members reviewed the primary and secondary data, helped define the priorities to be addressed and helped develop the Community Health Plan (CHP) to address those priorities. Learn more about Healthy People 2030 at 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 CHNAC, and input was received from stakeholders across sectors, including public health, faith-based, business and those 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 defined goals and activities were carefully crafted, considering evidence-based resources and sought to align with AdventHealth’s organizational and strategic plans. AdventHealth Hendersonville is committed to addressing the needs of the community, especially the most vulnerable populations, to bring wholeness to our communities.



Executive Summary

Priorities Addressed

The priorities addressed include:

1. Dementias
2. Economic Stability — Housing
3. Mental Health

See page 10 for the defined strategies and next steps for each priority selected to be addressed.

Priorities Not Addressed

The priorities not addressed include:

1. Cancer
2. Diabetes
3. Drug and Alcohol Use
4. Heart Disease and Stroke
5. Overweight and Obesity
6. Respiratory Disease
7. Social and Community Context
8. Violence Prevention

See page 18 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 and priorities. 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.



Executive Summary

Board Approval

On January 28, 2026, the AdventHealth Hendersonville Board approved the Community Health Plan goals, activities and next steps. A link to the 2026-2028 Community Health Plan was posted on the Hospital's website on May 15, 2026.

Ongoing Evaluation

AdventHealth Hendersonville's fiscal year is January 1 – December 31. For 2026, the Community Health Plan will be deployed beginning January 28, 2026, and evaluated at the end of the calendar year. In 2027 and beyond, the CHP will be evaluated annually for the 12-month period beginning January 1 and ending December 31. 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 adventhealth.com/community-health-needs-assessments.

About AdventHealth

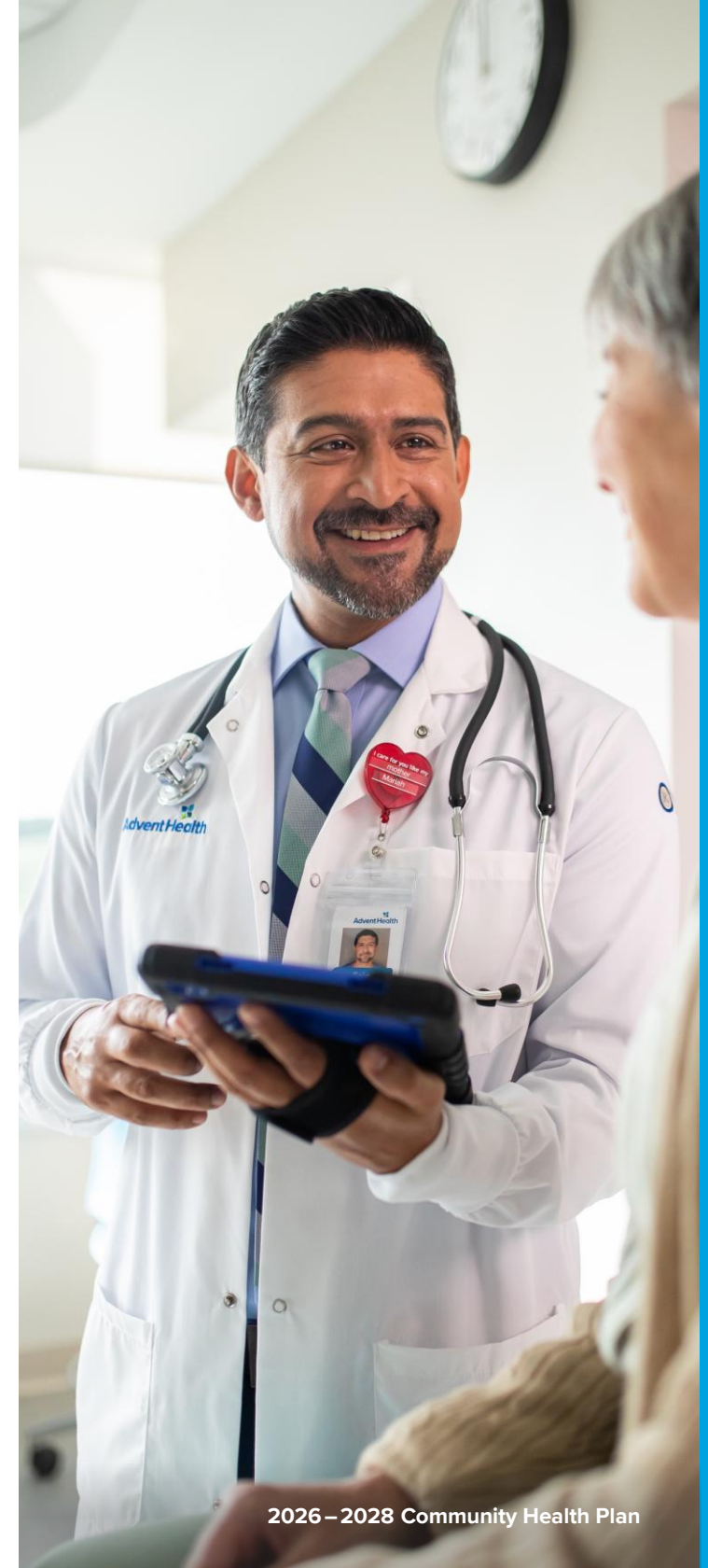


About AdventHealth

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 100,000 talented and compassionate team members serve over 8 million patients annually. From physician practices, hospitals and outpatient clinics to skilled nursing facilities, home health agencies and hospice centers, AdventHealth provides individualized, whole-person 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 new technologies, research and the brightest minds to redefine wellness, advance medicine and create healthier communities.

In a 2020 study by Stanford University, physicians and researchers from AdventHealth were featured in the ranking of the world's top 2% of scientists. These critical thinkers are shaping the future of health care. Amwell, a national telehealth leader, named AdventHealth the winner of its Innovation Integration Award. This telemedicine accreditation recognizes organizations that have identified connection points within digital health care to improve clinical outcomes and user experiences. AdventHealth was recognized for its innovative digital front door strategy, which is making it possible for patients to seamlessly navigate their health care journey. From checking health documentation and paying bills to conducting a virtual urgent care visit with a provider, we're making health care easier — creating pathways to wholistic care no matter where your health journey starts.

AdventHealth is also an award-winning workplace aiming to promote personal, professional and spiritual growth with its team culture. Recognized by Becker's Hospital Review on its "150 Top Places to Work in Healthcare" several years in a row, this recognition is given annually to health care organizations that promote workplace diversity, employee engagement and professional growth. In 2024, the organization was named by Newsweek as one of the Greatest Workplaces for Diversity and a Most Trustworthy Company in America.



About AdventHealth Hendersonville

Founded in 1910, AdventHealth Hendersonville is part of a connected, not-for-profit network of care that helps people feel whole – body, mind and spirit. As a proud member of AdventHealth since 1984, our wholistic approach to improving the health and prosperities of our Western North Carolina community is inspired by our mission of Extending the Healing Ministry of Christ.

Our team of more than 1,800 caregivers delivers compassionate, whole-person care through a growing network of services, including cardiac care and rehabilitation, emergency services, nationally accredited 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.

AdventHealth Hendersonville is one of more than 2,000 care sites across the country that make up AdventHealth’s national footprint, supported by more than 100,000 team members. Together, we care for nearly nine million people annually through hospitals, physician practices, outpatient clinics, home health and hospice agencies, and the AdventHealth app. To learn more or find a provider, visit AdventHealthNC.com or call 855-774-LIFE (5433).



Priorities Addressed



Dementias

By 2050, a significant portion of the population will be aged 65 and older, with 13.7% between 65 – 75, 11.6% between 75 – 84, and 6.7% aged 85 and above. Alzheimer’s Disease remains a major concern, ranking as the 7th leading cause of death and showing a higher mortality rate among women. Dementia and cognitive decline were identified as moderate to major health issues by 96.6% of key informants. Additionally, unintentional falls pose a serious risk, with 233 deaths reported — 94% of which occurred in individuals aged 65 and older — and 69% of key informants recognizing falls as a significant health problem.

Dementias, including Alzheimer’s disease, are increasingly affecting the health and well-being of Henderson County residents. With a rapidly aging population and growing caregiver demands, the need for coordinated, compassionate dementia care and prevention has become a clear community priority.

Goal

Improve community understanding of dementia prevention and support by expanding access to healthy aging education, resources, and awareness initiatives.

Activity

Provide healthy-aging food and cooking classes that teach dementia-friendly nutrition and brain-health practices.

Output

- Number of dementia education classes held.
- Number of Care Crew volunteers supporting classes.
- Number of participants attending classes.
- Amount of funding received (cash and in-kind).

Outcome

By December 31, 2028, demonstrate year-over-year growth in dementia friendly healthy aging classes from Year 1 baseline of two classes, as documented through annual class counts.

Hospital Contributions

- Provide \$10,000 annually to support program operations.
- Supply volunteers for educational and cooking classes.
- Collaborate with community-based organizations (CBOs) to host and promote classes.
- Create and distribute Brain Health information flyers for the public.
- Support community engagement efforts through Caja Solidaria.

Community Partnership

- Caja Solidaria.

Dementias

Activity

- Provide dementia awareness and prevention classes for community members.
- Distribute healthy aging and dementia-prevention educational materials to clinics, community organizations, and AdventHealth team members.

Output

- Number of healthy aging flyers distributed throughout clinics and the community.
- Number of dementias-prevention classes conducted each year by Dr. Anna Hicks.

Outcome

By December 31, 2028, demonstrate year-over-year growth in community engagement with dementia awareness and prevention education from a Year 1 baseline, as measured by the number of classes offered and the number of educational materials distributed.

Hospital Contributions

- Provide an annual donation of \$5,000 to support Mountain Aging Partners Community Dining.
- Contribute \$3,000 annually to Henderson County Parks and Recreation for the Senior Games.
- Offer training to team members on screening tools.
- Dr. Anna Hicks, Age-Friendly Physician, to lead education classes.
- Contribute six volunteer hours per year to support educational activities.

Community Partnership

- Mountain Aging Partners.
- Henderson County Parks and Recreation.
- Henderson County Chronic Disease Task Force.
- Henderson Department of Health and Human Services.

Economic Stability — Housing

Housing affordability and stability are major concerns in the community, identified as a 2021 CHA Health Priority and a Healthy NC 2030 Indicator. A significant portion of residents are financially burdened by housing costs, with 40.2% of renters and 25.8% of homeowners spending 30% or more of their income on housing. Fair market rent in 2024 ranges from \$1,428 for a studio to \$2,160 for a three-bedroom unit — among the highest in Western North Carolina. Housing stress disproportionately affects Hispanic (54.2%), Black (42.7%), and LGBTQ+ (20.6%) populations. Many adults reported living in unsafe conditions (13.9%), experiencing utility disruptions (11.1%), or facing housing emergencies that led them to stay with others (10.1%) or live in temporary shelters or on the streets (4%). In 2024, 176 individuals were counted as homeless, and in early 2025, Hurricane Helene caused damage to over 3,000 structures, with 296 completely destroyed, further exacerbating housing instability.

Goal

Increase stability among individuals experiencing homelessness by providing housing and supportive services.

Activity

Partner with Asheville Buncombe Community Christian Ministry (ABCCM) to enhance access to the Safe Haven and Transformation Village programs through funding to assist individuals experiencing homelessness.

Output

- Number of individuals housed at the Safe Haven and permanent Transformation Village.
- Number of individuals being supplied with basic living necessities.

Outcome

By the end of 2028, support a minimum of 80 individuals per quarter in maintaining stable housing through partnerships with Safe Haven, Transformation Village, and other supportive housing programs.

Hospital Contributions

- Donate \$25,000 annually to the Asheville-Buncombe Community Christian Ministry (ABCCM) to support the Rapid and Supportive Housing Program.
- Provide quarterly volunteer support at Transformation Village.

Community Partnership

- Asheville-Buncombe Community Christian Ministry.

Economic Stability — Housing

Goal

Increase the number of at-risk individuals who are supported through expanded emergency housing options.

Activity

Partner with Safelight to expand supportive emergency housing by increasing bed capacity.

Output

- Amount of funding allocated toward the creation of 16 additional beds.
- Number of individuals served through emergency housing.
- Number of new beds added at Safelight to expand emergency housing capacity.
- Number of referrals made through the Community Connect initiative.

Outcome

By December 31, 2028, increase emergency housing capacity for women and children at Safelight by 40% from a baseline of 40 beds.

Hospital Contributions

- AdventHealth Hendersonville leadership serves on the Safelight Board of Directors.
- Provide a \$10,000 donation to support the expansion of emergency housing beds.
- Increase screening through the Community Connect initiative.

Community Partnership

- Safelight.

Economic Stability — Housing

Goal

Enhance stability for at-risk individuals by expanding access to psychosocial rehabilitation services that reduce hospitalizations, decrease emergency service use, and promote long-term housing stability.

Activity

Provide funding for Thrive’s case management services to expand psychosocial rehabilitation for unhoused, underserved, and high-utilizer individuals.

Output

- Number of individuals housed by Thrive each quarter.
- Amount of funding allocated to Thrive to support case management services.
- Number of referrals made to Thrive and the Housing Assistance Coalition.

Outcome

By the end of 2028, ensure that at least 100 individuals engaged in Thrive’s case management program secure or maintain stable housing each quarter.

Hospital Contributions

- Provide an annual donation of \$7,500 to support Thrive’s case management services.

Community Partnership

- Thrive.
- Housing Assistance Coalition.

Mental Health

Mental health and suicide continue to be pressing concerns in the community, with 100% of key informants identifying mental health and 96.8% identifying suicide as moderate to major health problems. Nearly a quarter (24.9%) of adults are currently receiving mental health treatment, while 16.5% reported unmet mental health needs in the past year — rates were notably higher among Hispanic (21.4%), Black (18.2%), and LGBTQ+ (31.5%) populations. Although 63.7% of adults report receiving adequate social/emotional support, 15.4% experienced more than seven days of poor mental health in the past month, and 10.3% expressed dissatisfaction with life. Alarming, 8.4% of adults considered suicide in the past year, with LGBTQ+ individuals disproportionately affected (31%). The suicide mortality rate stands at 19.0 per 100,000 — nearly 41% higher than the state average — with males experiencing significantly higher rates than females. Between 2019 and 2023, eight children aged 10 – 17 died by suicide, three of whom were in 2023 alone, underscoring the urgent need for targeted mental health support.

Goal

Improve mental health awareness and prevention among children and adolescents by expanding access to school-based education and support resources.

Activity

Provide school-based mental health, child abuse, and neglect prevention education in partnership with Safelight for students in Henderson County Public Schools.

Output

- Number of children reached within Henderson County Public Schools.
- Number of educational classes being provided.
- Amount of funding provided to support program.

Outcome

By the end of 2028, expand educational outreach in Henderson County Public Schools by 5% over the baseline of 5,881 student touchpoints, strengthening awareness and prevention of child abuse and neglect.

Hospital Contributions

- Provide an annual donation of \$10,000 to support the program.
- Implement the “I Matter” sticker initiative in elementary schools.
- Support AdventHealth provider Meredith Bremner, Physician Assistant at the Child Advocacy Center (CAC) , in delivering services as needed.
- Ensure AdventHealth Hendersonville leadership serves on the Safelight Board of Directors.
- Offer an access point for workforce development through the Certified Medical Assistant program.

Community Partnership

- Safelight.
- Henderson County Public Schools.
- Henderson County Department of Health and Human Services/Behavioral Health Coalition.
- Girls on the Run Program – Western North Carolina.
- Henderson County Pathfinders Mentoring Program.

Mental Health

Goal

Increase equitable access to mental health resources, with a focus on outreach to underserved and at-risk populations.

Activity

Provide funding to The Free Clinics to support the addition of a mental health provider and to assist in operating mobile pop-up clinics.

Output

- Amount of funding allocated to expand mental health provider capacity at The Free Clinics.
- Number of mental health assessments completed through The Free Clinics and mobile pop-up clinics.

Outcome

By December 31, 2028, increase the number of completed mental health assessments at The Free Clinics by 3% each year, based on a baseline of 5,000 assessments.

Hospital Contributions

- Donate \$10,000 annually to provide financial support for the program
- Provide volunteers to help support the mobile pop-up clinics
- Funding available (\$90,000) to support patients referred from The Free Clinics and to expand to include Outpatient Behavioral Services

Community Partnership

- The Free Clinics

Priorities Not Addressed



Priorities Not Addressed

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

Cancer

Cancer remains a significant health concern in the community, with a slight increase in the overall mortality rate to 144.7 per 100,000. The cancer incidence rate is notably higher than both the Western North Carolina (WNC) and North Carolina (NC) averages, making it the second leading cause of death in the area. Additionally, 90.3% of key informants identified cancer as a moderate to major health problem, highlighting its impact and the need for focused attention.

While cancer remains a significant health concern in Henderson County, it was not selected as a priority area in this CHNA. The hospital and its partners are always working toward stronger cancer screening, treatment, and support services. Local data shows that cancer-related outcomes are being actively addressed through existing initiatives. During community engagement, cancer was not consistently identified as a top concern compared to other emerging issues such as mental health, housing instability, and aging-related conditions. By focusing on areas with greater unmet needs and community urgency, the hospital aims to maximize its impact while continuing to support cancer care through ongoing programs and partnerships.

Diabetes

Diabetes continues to be a growing health concern in the community, identified as both a 2021 CHA Health Priority and a Healthy NC 2030 Indicator. Currently, 13.4% of adults report having borderline or pre-diabetes, while 9.1% have been diagnosed with diabetes — rates are notably higher among Hispanic (15.2%) and Black (13.5%) populations compared to White

adults (8.5%). The diabetes mortality rate has risen from 11.2 per 100,000 in 2015 to 16.9 per 100,000 in 2022, making it the ninth leading cause of death. Additionally, 96.8% of key informants identified diabetes as a moderate to major health issue, emphasizing the need for continued prevention and management efforts.

While diabetes continues to be a significant health issue in Henderson County, it was not selected as a priority in this CHNA. The hospital and its community partners already offer a range of diabetes prevention, education, and management programs that are addressing local needs. During community engagement, diabetes was not consistently identified as a top concern compared to other emerging issues such as mental health, housing instability, and aging-related conditions. The hospital will continue to emphasize the importance of diabetic prevention, education and treatment. By focusing on areas with greater unmet needs and community urgency, the hospital aims to maximize its impact while continuing to support diabetes care through existing initiatives.

Drug and Alcohol Use

Substance use is a critical health issue in the community, identified as a Healthy NC 2030 Indicator and recognized by 100% of key informants as a moderate to major concern. Smoking and vaping rates have significantly increased since 2021, with 13.3% of adults currently smoking and 8.5% using vaping products — rates are especially high among Black adults. Alcohol misuse is prevalent, with 17.5% of adults reporting binge drinking and 22%

Priorities Not Addressed

engaging in excessive drinking, contributing to 31% of fatal vehicle crashes in 2023. Prescription opioid use affected 10% of adults in the past year, and nearly half (47.1%) reported that substance use — either their own or someone else’s — negatively impacted their lives, with LGBTQ+ individuals most affected (73.2%). The unintentional poisoning mortality rate has reached its highest level at 30.1 per 100,000, and 84.4% of overdose deaths in 2023 involved illicit opioids, underscoring the urgent need for prevention and intervention efforts.

While drug and alcohol use remain serious public health concerns, they were not selected as priority areas in this CHNA. Community feedback and local data indicated that substance use, while important, can be closely related to overall mental health. Additionally, the Hospital and its partners support a range of substance use prevention and treatment programs, including behavioral health services and community-based initiatives. By focusing CHNA efforts on areas with greater gaps in care and community urgency, the Hospital aims to make the most meaningful impact while continuing to support substance use services through existing programs.

Heart Disease and Stroke

Heart disease and stroke remain critical health concerns in the community, ranking as the first and fourth leading causes of death, respectively, with a combined mortality rate of 146.9 per 100,000. A significant 93.3% of key informants identified these conditions as moderate to major health problems. Mortality rates are disproportionately higher among men and Black/African American populations, with Black males experiencing the highest rate at 248.5 per 100,000. Additionally, 44% of adults reported having high blood pressure, and 38.8% reported high cholesterol — both major risk factors contributing to cardiovascular disease.

While the hospital continues to grow in services in support around heart disease and stroke prevention, it was not chosen as a priority because of community engagement, residents and stakeholders voicing greater concern for emerging issues such as mental health, housing instability, and aging-related conditions. By focusing on areas with growing unmet needs, the hospital aims to make the greatest impact on community well-being while continuing to support ongoing efforts in heart health through existing initiatives.

Overweight and Obesity

Obesity, physical inactivity, and food insecurity are major health concerns in the community, identified as a 2021 CHA Health Priority and a Healthy NC 2030 Indicator. Nearly all key informants (96.9%) recognized obesity as a moderate to major issue. Over one-fifth (21.7%) of adults reported no leisure-time physical activity in the past month, with particularly high rates among Black (74.4%) and Hispanic (37.7%) populations. Only 29% of adults meet physical activity guidelines, and 64.4% are overweight or obese, with 30.2% classified as obese — rates highest among Hispanic adults (41%). Nutrition remains a challenge, with just 4.5% of adults consuming five or more servings of fruits and vegetables daily. Food insecurity affects 24.1% of adults, disproportionately impacting Hispanic (53.3%), Black (45.9%), and LGBTQ+ (43.5%) individuals. Additionally, Hurricane Helene caused significant agricultural losses, including the destruction of 30 farms and over 54,000 apple trees, totaling an estimated \$169 million in damages.

While overweight and obesity are important contributors to chronic disease, they were not selected as priority areas in this CHNA. The Hospital and its partners offer a variety of programs focused on nutrition, physical activity, and chronic disease prevention that address these concerns. By focusing on these

Priorities Not Addressed

emerging priorities, the Hospital aims to make the greatest impact while continuing to support healthy lifestyle initiatives through existing efforts.

Respiratory Disease

Chronic lower respiratory disease is the sixth leading cause of death in the community and has been identified as a 2021 CHA Health Priority. A significant portion of key informants view respiratory health as a concern, with 76.7% identifying chronic lung disease, 48% identifying respiratory disease, and 37% identifying asthma as moderate to major health problems. The prevalence of asthma and chronic obstructive pulmonary disease (COPD) has increased in Henderson County, alongside a rise in adult tobacco use, further contributing to respiratory health challenges.

While respiratory diseases such as asthma, COPD, and chronic bronchitis are important health concerns, they were not selected as priority areas in this CHNA. The Hospital has existing clinical programs and partnerships that are addressing respiratory health through prevention, treatment, and education efforts. Additionally, community feedback did not identify respiratory disease as a top concern when compared to more urgent issues such as mental health, housing instability, and aging-related conditions. The Hospital will continue to support respiratory care through ongoing services while focusing CHNA efforts on areas with unmet needs and community impact.

Social and Community Context

Community inclusivity and equity remain areas of concern, with 14.6% of adults expressing that the community is not welcoming to people of all races and ethnicities — this sentiment is especially pronounced among LGBTQ+ individuals (37.1%). Experiences of harassment and unfair treatment are also reported, with 5.9% of

adults feeling threatened or harassed, and 4.5% treated unfairly when receiving medical care, particularly among Hispanic and LGBTQ+ populations. Unfair treatment in schools affected 3.7% of adults, with higher rates among Hispanic (10.2%) and Black (11.9%) individuals. These experiences have led to physical symptoms for 18.1% of adults, with race and appearance cited as the most common reasons for discrimination. These findings highlight the need for continued efforts to promote equity, safety, and inclusion across all community settings.

While Community and Social Context were not included in the hospital's CHNA, the hospital is always prioritizing inclusivity in all facets. The hospital supports equity across all its partnerships and will continue with this work. While community and social context — including factors like social support, civic engagement, and discrimination — play a critical role in overall health, this area was not selected as a standalone priority in the CHNA. Many of the underlying issues related to social context are already being addressed through other prioritized areas such as housing, mental health, SDOH and aging. The hospital remains committed to fostering strong community connections and equity through its ongoing programs and partnerships, even as it focuses its CHNA efforts on areas with the most urgent and unmet needs.

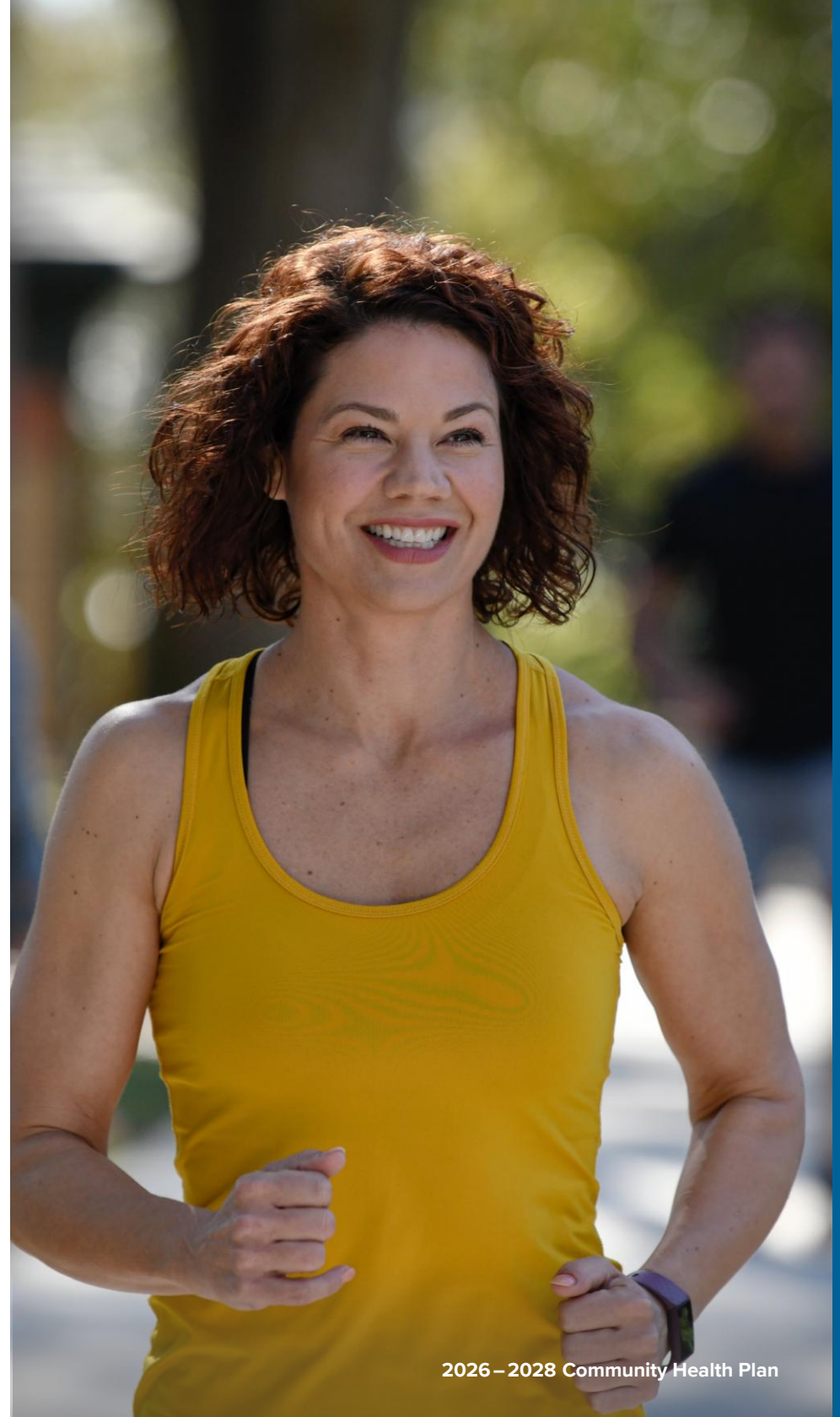
Violence Prevention

Injury and violence are recognized as significant health concerns in the community, with 76.7% of key informants identifying them as moderate to major issues. Safelight, a local crisis support organization, received 661 hotline calls and served 912 clients during FY 2022 – 2023, including 21% under the age of 18, 82% female, and 6% Hispanic. Additionally, 7.4% of CHA survey participants reported that someone in their household had experienced abuse or exploitation in the past three years. These issues are often exacerbated by disasters such as COVID-19 and

Priorities Not Addressed

Hurricane Helene, highlighting the need for continued support and prevention efforts.

While violence prevention is a critical component of public health, it was not selected as a priority in this CHNA. Community input and local data did not identify violence — such as domestic violence, youth violence, or crime — as a top concern compared to other pressing issues like mental health, housing instability, and aging-related conditions. Additionally, existing partnerships with law enforcement, schools, and social service agencies are actively addressing violence prevention through mature targeted programs. The hospital remains committed to supporting safe environments, partnerships with IPV prevention/support organizations, and trauma-informed care, while focusing CHNA efforts on areas with unaddressed health needs.





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

CHP Approved by the Hospital Board on: January 28, 2026

For questions or comments please contact:
corp.communitybenefit@adventhealth.com