Armstrong Center for Medicine and Health (ACMH) Community Health Needs Assessment (CHNA) Results of Action 2015 - 2017

The purpose of a community health assessment (CHNA) is to collect information about a community's current health status, needs, and issues. The ACMH executive team is required to conduct a CHNA every three years and use the findings to develop health improvement programs and acquire technology. This report describes the programs developed and equipment acquired that resulted from the findings of the 2015 needs assessment. www.acmh.org

In 2015, nine areas of need were identified:

- Community members needed education about what preventive care and wellness screenings they should be receiving; what treatment options are available for the diseases they have; and where to go to receive those services.
- Programs were needed to prevent and reverse trends in weight gain and obesity.
- Diabetic patients needed information to better understand and control their disease.
- New technology was needed to take advantage of improvements in the detection and treatment of cancer.
- Many community members needed more accessible means of transportation for medical care.
- To prevent and treat addiction, the community needed ACMH Hospital's healthcare experts to collaborate with other organizations in the county.
- Un- and under-insured community members needed financial help when seeking care.
- Because of a shortage of physicians in Armstrong County, ACMH Hospital was needed for the recruitment of qualified medical personnel

ACMH aggressively pursued programs to address these needs and while improvement in the overall health status of a community can take decades to achieve, significant strides were made over the past three years, especially in the areas of community health education and in the acquisition of new technology.

Education of community members - disease treatment and prevention

ACMH developed educational campaigns on the need for breast and colon cancer screenings, the identification of stroke symptoms, knowing when to call 911, and the emotional and economic impact of the opioid epidemic.

Breast Cancer Screening and Detection

Breast cancer is the most commonly diagnosed cancer in women and is the second leading cause of cancer death among women. Cancer can, however, be treated, and survivors often enjoy long, fruitful lives. Thus, early detection is critical. Breast cancer screening and detection involves a series of steps, each requiring a technology more sophisticated than the next. For example, breast tissue abnormalities are identified using x-ray technology—mammography. If an abnormality is detected, ultra sound technology may be used to determine if the abnormality is either a fluid-filled cyst or a tumor. If a tumor is detected, a biopsy removes a small tissue sample to determine if it is cancerous.

A "Pinkie Swear" campaign developed by the Maurer Foundation was conducted to encourage women to regularly get mammograms. Educational flyers were produced to generate public awareness of technology available at ACMH for detection of breast cancer--technology such as three-dimensional 3D Mammography™, breast magnetic resonance imaging (MRI) and ultrasound, sentinel node imaging, stereotactic breast biopsies, and ultrasound guided breast biopsies.

3D Mammography[™] allows radiologists to see layers of dense breast tissue and identify abnormal structures from normal ones. It improves the detection of tumors and reduces the need for repeat mammograms. Breast ultrasound uses high-frequency sound waves to produce higher definition images of the inside of the breasts and helps a doctor determine whether an abnormality seen in a mammogram is a fluid-filled cyst or a solid tumor. But, the ultrasound cannot usually be used to determine if a tumor is cancerous. That requires a biopsy—the removal of a very small piece of tissue to be studied under a microscope. At ACMH, a breast tumor biopsy does not require a trip to the O.R. or an incision that leaves a scar. A specially trained radiologist at ACMH can remove a small portion of a tumor using a narrow hollow needle that is guided by ultrasound. If cancer is diagnosed, breast MRI, which uses magnetic waves to produce the most highly defined images of tissue inside of the breast, can be used to assess the extent of breast cancer. Finally, ACMH offers sentinel node imaging, a nuclear medicine procedure to help doctors determine where and if breast cancer has spread.





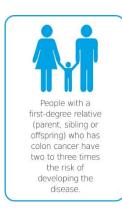


Colon Cancer Risk Factors and Screening

Colon cancer is cancer of the large intestine (colon), the lower part of the digestive system. It is the second leading cause of cancer-related deaths and is the third most commonly diagnosed

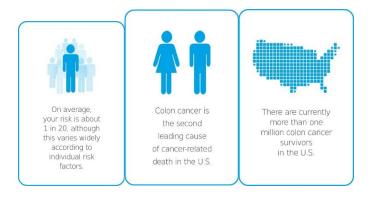
cancer in the United States. People over





the age of 50 as well as those who have a parent, sibling, or child with colon cancer have a higher risk of developing colon cancer. If colon cancer is detected early, it can often be cured. ACMH distributed brochures to generate awareness of the risk factors associated with colon cancer and the importance of early detection.





The Need to Call 911 for Stroke and Heart Attack Symptoms

People in Armstrong County often frequently drive themselves to the emergency department or have relatives take them. This is not uncommon when symptoms are vague and when people think they can easily "make it on time." However, people with heart attack and stroke symptoms







should call 911 instead. **Paramedics** emergency medical technicians are trained to begin life-saving treatment and, when needed, can arrange for special-care teams to be waiting at the hospital when, or soon after, the patient arrives. ACMH personnel created billboards and flyers to educate the public on the importance of calling 911 when stroke and cardiac symptoms are present.





Stroke – Identification of Symptoms

A stroke occurs when blood flow to a portion of the brain stops. Without the oxygen in the blood, brain cells and tissue become damaged and begin to die within minutes. Stroke is a brain attack, but the symptoms of stroke happen in the body parts controlled by the affected portion of the brain. Awareness of the most common stroke symptoms is critical: paralysis; numbness or weakness in the arm, leg or face—especially when on one side of the body; slurred speech; trouble speaking and/or understanding others; vision problems; confusion; loss of balance and/or coordination (*Source:* healthline.com.)

ACMH is a certified primary stroke center and has the highly-trained staff, resources, and processes to care for acute stroke. The resources include interdisciplinary treatment strategies, medications and tele-medicine. Research indicates that patients receiving care at primary stroke centers have a higher incidence of survival and recovery than those treated in hospitals without this type of specialized care (*Source:* CDC, "A Summary of Primary Stroke Center Policy in the United States"). So, it is important for a stroke victim to call 911 FAST. "FAST" is an easy-to-remember method of identifying the most common stroke symptoms.

- "F" Face Drooping (Ask the person to smile)
- "A" Arm Weakness (Ask the person to raise both arms)
- "S" Speech Difficulty (Ask the person to repeat a simple sentence)
- "T" Time to call 911 (If the person demonstrates any of these symptoms, even if the symptoms go away. Also make note of the Time when the person was last "normal

ACMH personnel have created flyers and billboards that continuously educate the public as to the signs and symptoms of stroke and the need call 911 FAST.





Education of the Community—Where to Go for Services

ACMH has expanded the role of case managers and nurse managers to work closely with other health and human service organizations in Armstrong County to identify and provide follow-up care for inpatients, surgical patients, and cancer patients. Often referred to as navigators, these employees guide patients through the network of all aftercare services including help finding the right doctor to help from the ACMH Foundation to pay for rent and utilities while receiving cancer treatment.

Preventing and Reversing Trends in Weight Gain and Obesity



The HEALTHY Armstrong program collaboration, which includes the school district, county government officials, Head Start, Children's' Community Care pediatricians, and ACMH personnel, continues to meet regularly. HEALTHY is an acronym that stands for Healthy Eating Active Lifestyles Together Helping Youth. The

collaborative addresses obesity in children and adolescents. More information can be found on the HEALTHY Armstrong web site www.healthyarmstrong.com.

ACMH is conducting a feasibility study to determine the potential for developing a medical weight loss clinic for adults that would include a physician certified in weight loss, dietitians, a program

of physical exercise, either a psychologist or psychiatrist, and a referral process with follow-up care for gastric sleeve surgery.

<u>Diabetes – Helping Diabetics Understand and Control Their Disease</u>

ACMH employs a certified diabetes educator (CDE)--a health care professional who is specialized and certified to teach people with diabetes how to manage their condition. The CDE is an asset for those who need to learn the tools and skills necessary to control their blood sugar and avoid long-term complications caused by high blood sugar levels. Education is provided through speaking engagements and one-on-one visits with patients in both ACMH rural health centers and in the endocrinologist's office. Patients are referred to the CDE by their primary care doctor if they are either diabetic or are pre-diabetic—at high risk for diabetes. Most insurances cover the cost of this education.

The education provided includes instruction on the use of new technology for diabetes management, such as continuous glucose testing. Continuous glucose testing is done via an arm patch that records blood sugar levels automatically at certain intervals. The information is stored in the patch that is scanned at the next office visit for review by the CDE and the physician, who may adjust patient medications. Sometimes the report shows signs of dangerously low blood sugar levels, especially during the night. This information enables the CDE to educate the patient regarding late-evening nutritional needs.

Additionally, ACMH is collaborating with the YMCA in programs that address pre-diabetes. The YMCA receives its referral base from ACMH and physician offices. The program consists of nutrition counseling, weight loss counseling, and a personal exercise program.

Cancer—Detection and Treatment

Low dose CT for lung cancer screening

ACMH began offering low dose CT (LDCT) for lung cancer screening in 2013. At that time if a patient wanted to have it completed, it was not paid for by most insurances. ACMH was an early adopter of accreditation achievements. In 2014, ACMH was granted the funds to develop the American College of Radiology (ACR) Designated Lung Screening Center and the Lung Cancer Alliance Screening Center of Excellence. In February 2015, Medicare issued a final decision to pay for the low dose CT because of the significant number of premature deaths that could be prevented.

Lung cancer statistics:

- Lung cancer is the leading cause of cancer death in the United States for both men and women, exceeding the number of combined deaths from cancers of the breast, colon, and prostate.
- Approximately 85% of lung cancers are associated with cigarette smoking.
- The smoking rate in Southwest Pennsylvania, not including Allegheny County, is 22%.
- Screening for current and former smokers via LDCT is the only method proven to reduce lung cancer mortality in this high-risk population,
- LDCT can assist in avoiding up to 8,100 premature lung cancer deaths per year.

The United States Preventive Services Task Force (USPSTF) recommends annual LDCT screening for adults aged 55 to 80 years who have a 30 pack-year smoking history and currently smoke or have quit within the past 15 years.

Positive patient cases are reviewed and followed by a multidisciplinary team that is trained and experienced in providing a continuum of care for lung cancer, including image interpretation, diagnostic procedures, pathology specimen, treatment, and follow-up based upon best practices established in the National Lung Screening Trial. The team includes a radiologist who interprets x-ray and other imaging results, a pathologist who views tissue specimens microscopically, a pulmonologist, who is a lung specialist, a medical oncologist who provides chemo-therapy to cancer patients, a radiation oncologist who provides radiation treatments to cancer patients, and a thoracic surgeon who specializes in organs within the chest wall.

Digital Breast Tomography (DBT) - also known 3D-Mammography™

ACMH began offering DBT in September of 2016. As with most diagnostic screenings, early detection saves lives. Breast cancer is the most commonly diagnosed cancer in women and is the second leading cause of cancer death among women. Each year, more than a quarter of a million women in the United States will be diagnosed with breast cancer and more than 40,500 will die from the disease.

Digital breast tomosynthesis is different from a standard 2-D mammogram in the same way that a CT scan of the chest is different from a standard chest X-ray. Dense breasts qualify for DBT, which should be combined with 2-D mammography. One of the advantages of DBT is that a tumor can be detected that might be hidden within overlapping tissues that are the result of the compression of the breast during mammography. Another advantage of DBT is that one to two additional cancers per thousand women screened are detected, thus reducing the need for repeat mammograms.

An ongoing, large-scale, randomized breast screening trial will compare 3-D Mammography™ with 2-D mammography. The Tomosynthesis Mammography Imaging Screening Trial (TMIST) will compare the number of advanced cancers detected in women screened for four years with DBT with that detected in women screened with standard digital mammography.

DEXA Scanner

ACMH purchased a new DEXA, also known as a Bone Density Scanner and Hologic Discovery. A DEXA is used to diagnosis osteoporosis--a condition where bone strength weakens and is thus susceptible to fracture. Osteoporosis is a growing healthcare crisis. Fortunately, early detection and treatment of osteoporosis can mean a lifetime of strength.

Facts and Statistics about osteoporosis:

- Osteoporosis affects an estimated 75 million people in Europe, USA and Japan.
- 30-50% of women and 20-30% of men will suffer a fracture related to osteoporosis in their lifetimes.
- Women who develop a vertebral fracture because of osteoporosis are at a substantially higher risk for additional fracture within a year.

Hologic is the gold standard for spine and hipbone screening around the world. Consistently, from exam to exam, Hologic performs continuous, automatic calibration, ensuring precise measurements and results. This system helps identify patients at risk for osteoporosis and fractures so that primary care physicians can work with patients to develop the proper diet and exercise regime for overall bone health.

DEXA can also measure body composition. Regularly scheduled body composition scans during a patient's weight management program will show if weight loss is either from fat stores or from muscle. Weight loss patients should lose body fat, not muscle mass, for a more successful and healthier long-term weight loss. The service is not covered by insurances but is available on a self-pay basis at a reasonably low cost.

Linear Accelerator Upgrade

As reported by Dr. Tracy Klayton, an oncologist at ACMH who spoke at the linear accelerator ribbon-cutting ceremony, January 2018, ACMH purchased a new accelerator that greatly eases the burden of radiation treatment for cancer. The addition of a bariatric table capable of holding up to 500 lbs. enables ACMH to treat patients of all shapes and sizes. Inoperable patients with early stage lung cancers will soon be able to receive stereotactic radiosurgery, a highly-effective treatment with minimal side effects, via this accelerator. Previously, these patients would have had to travel to Pittsburgh for radiation.

The new linear accelerator is also improving the quality of our existing cancer programs. Most notably, the new linear accelerator has a 'cone beam' CT scanner, which allows us to directly visualize the target each day, immediately before treatment delivery. This daily image guidance ensures that the target is getting the needed dose, and the nearby critical structures are not getting more radiation than intended. Ultimately, this results in better tumor control with fewer side effects.

With this new accelerator, ACMH can offer hypo fractionated prostate radiotherapy, which reduces the treatment duration for prostate cancer from eight weeks to 5½ weeks, lessening the inconvenience of a prolonged treatment course. Additionally, the new machine offers volumetric arc therapy, a way to deliver complicated radiation treatment plans rapidly and precisely. This results in less time spent on the treatment table and less discomfort for the patient.

Concussion Care

Concussion Care is both a screening program and a treatment program. Concussion Care opened at ACMH in December 2015 in the Snyder Institute and attends to about 35 patients per month. A concussion is a type of traumatic brain injury caused by either a bump, a blow, or a jolt to either the head or the body that causes the head and brain to move rapidly back and forth. This sudden movement can cause the brain to bounce around and twist in the skull, stretching and damaging the brain cells and creating chemical changes in the brain. A person does not necessarily lose consciousness with a concussion.

ACMH uses the C3 Logix application that was developed at the Cleveland Clinic. The application utilizes an iPad's gyroscope and accelerometer to collect biomechanical data that are used to objectively quantify postural stability while a patient performs balance tests with an iPad secured at the waist. C3 Logix also assesses cognitive function through tasks performed with a stylus on the iPad screen.

Originally developed for concussion assessment in athletes, the application's use has been expanded to assess any head injury, which can include a blow to the head during a fall, a vehicle accident, and whiplash. The focus of the program continues to be managing people suffering from acute concussions and acute post-concussion symptoms. While most concussions will resolve within 7-14 days, some people continue to experience worrisome and prolonged symptoms. But, left untreated, concussions can cause long-term health problems.

Transportation

Transportation for health care continues to be a problem within Armstrong County, especially for low-income patients, cancer treatment patients who undergo many weeks of therapy and may be unable to work, and those suffering from substance abuse disorders.

Some long-term care and day care facilities provide transportation to and from ACMH Hospital. Ambulance services provide much of the transportation for patients who use wheelchairs. Personnel from the Addiction Recovery Mobile Outreach Team (ARMOT) frequently arrange transportation for those who have been diagnosed with substance abuse disorders.

Under the auspices of the Armstrong Indiana Behavioral and Developmental Health Program, a community transportation solution workgroup has been formed to address the needs of transportation within Armstrong County. Partners include ACMH staff, Area Agency on Aging, Department of Public Welfare, a county commissioner, and Town and Country Transit.

Substance abuse and addiction

Opening of a detoxification unit

The Commonwealth Office of Mental Health and Substance Abuse in Pennsylvania recently awarded \$250,000 in reinvestment funds to ACMH to open and operate a 4-bed hospital-based detoxification unit. The facility will be classified as a Level 4 WM (withdrawal management) unit, meaning the patient must be in acute withdrawal (or the potential to withdraw) from alcohol, opioid and or benzodiazepine and have a concurrent medical condition that would require the need for hospital care. Admission to the unit will be voluntary, however, all admissions will be physician ordered. The average length of stay on the unit will be 3-5 days but will be based on the patient's assessed needs and discharge plan. ASAM (American Society of Addiction Medicine) criteria will be used to admit patients to this level of care. Staffing will be multi-disciplined consisting of registered nurses, nurse aides and drug and alcohol trained counselors. A physician will round daily and be accessible to the unit 24 hours a day. Referrals will originate from the ACMH emergency department.

Partnership with ARMOT

ACMH has partnered with the Addiction Recovery Mobile Outreach Team (ARMOT) to address substance abuse. ARMOT staff conduct an assessment when requested by a hospital physician to determine the likelihood that a patient may have a substance abuse problem. ARMOT provides two types of service--case management and recovery support services to individuals with substance use disorders as well as education and support services to rural hospital staff, patients, and their loved ones. For more information on ARMOT go to www.ruralhealthinfo.org – type ARMOT into the search box.

The Installation of Medication Return Units

ACMH installed medication return units within the hospital to enable patients to safely discard unwanted and unneeded prescription medications, reducing the risk to children and adolescents in the household.





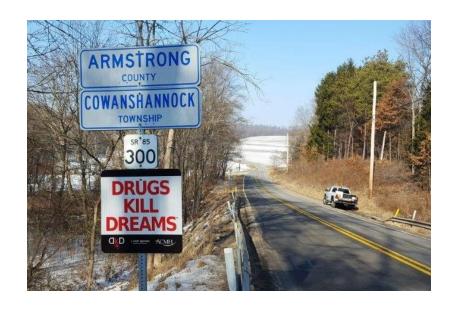
Drugs Kill Dreams® Program

ACMH continues to support the Drugs Kill Dreams® and the Drugs Kill Dreams® Jail Experience Programs through billboards and educational signage.















Coping with Addiction

ACMH has partnered with the Richard G. Snyder YMCA to provide family support services for substance abuse and addiction.



Resources Available for Under- and Un-insured Individuals

More than 75 patients per month, on average, receive financial counseling from the ACMH billing office to find resources to help pay for health care services at ACMH Hospital and at Glade Run Medical Service provider offices. More than 60% of those patients ultimately receive free or reduced prices for care.

Free breast cancer screenings and free cervical cancer screenings are regularly provided. Free skin cancer screenings are frequently offered to the public as well.

Physician Shortages

ACMH is continually in search of providers to address the needs of Armstrong County residents. Primary care, mental, and dental health providers are especially scarce in Southwestern Pennsylvania. As such, ACMH often continues the practices of many primary care physicians after they retire and has staffed rural health centers throughout the county. ACMH has hired a psychiatrist and neurologist and has recruited medical staff to treat esophageal disease at ACMH hospital. ACMH is increasing its use of telemedicine services where appropriate. ACMH continues to seek urologists, surgeons, and mental health professionals.