

# **Community Health Needs Assessment and**

# **Strategic Plan**

June 2015

Completed by:

Dianne Emminger, MBA

### TABLE OF CONTENTS

TABLE	OF CONTENTS	. 2
1.0	INTRODUCTION	3
2.0	RESEARCH METHODS	3
3.0	OVERVIEW OF KEY STATISTICS	. 5
4.0	COMMUNITY PROFILE	. 8
5.0	COMMUNITY STAKEHOLDER INTERVIEWS	13
6.0	FINDINGS - MAJOR HEALTH NEEDS	14
7.0	FINDINGS - UNDERSERVED POPULATIONS	18
8.0	STRATEGIC PLAN TO ADDRESS COMMUNITY HEALTH NEEDS	20
APPENI	DIX A: LIST OF KEY STAKEHOLDERS WHO RESPONDED TO THE ON-LIN	١E
SURVE	Y OR WERE INTERVIEWED	24
APPENI	DIX B: INTERVIEW/SURVEY QUESTIONS	27
REFERI	ENCES	32

#### **1.0 INTRODUCTION**

A community health needs assessment was conducted between July, 2014 and June, 2015 on behalf of ACMH Hospital (ACMH) in an effort to identify the unmet health and wellness needs of Armstrong County. A health needs assessment is defined as a systematic review of the unmet health needs facing a defined population, leading to prioritization of those needs and allocation of resources to accomplish those priorities. The population being reviewed in this assessment is all of Armstrong County, Pennsylvania, which is considered to be the ACMH primary and secondary service areas. The assessment will prove useful for identifying cross-sectional partnerships with other community organizations.

#### **Background and Purpose**

ACMH Hospital is a 501(c)(3), non-profit community hospital founded in 1898 that primarily serves Armstrong County and some surrounding areas. The hospital is committed to improving the emotional and physical health of its patients through superior clinical care and the compassionate management of illness and disability. ACMH Hospital has undertaken a community health needs assessment to comply with the requirements of the Patient Protection and Affordable Care Act enacted March 2010. This act requires that all non-profit, tax exempt hospitals complete needs assessments and adopt an implementation strategy to meet those health needs every three years. This needs assessment and strategic plan accomplishes those objectives.

This community health needs assessment incorporates components of primary and secondary data collection and analysis of community health and wellness needs.

Although the service area being studied encompasses all of Armstrong County, ACMH has determined that 65% percent of the patients seen reside within just a 10-mile radius of the Hospital. 80% of ACMH Hospital patients come from the following subset of zip codes:

Kittanning	16201	Leechburg	15656
Ford City	16226	Rural Valley	16249
Worthington	16262	New Bethlehem	16242
Freeport	16229	Cowansville	16218

#### 2.0 RESEARCH METHODS

#### **Primary Data Collection**

Stakeholder (a key member of the community) interviews and on-line surveys were completed to gather the opinions and perceptions of persons who represent the broad interests of the Armstrong County residents, have experience working in public health or have strong knowledge of public health issues. During a thirty minute, in person interview, or 15-minute online self-completion survey, each participant was asked comprehensive questions regarding the health and wellness of Armstrong County residents and were asked to identify their perceived needs of the community and factors affecting health. More than fifty individuals participated. Most worked within the fields of medical and/or social services. Other participants included representatives from the fields of education, the judiciary system and recreation facilities. A full list of the stakeholders who participated can be found in Appendix A.

Data files spanning a two year period, 2013-2014, consisting of a limited dataset under HIPAA were extracted from ACMH computer files and the electronic computer files of ACMHowned and affiliated physician offices using a method of data aggregation whereby personal identification data was excluded. The purpose of collecting these data files was to determine the major diagnostic characteristics of ACMH patients.

#### **Secondary Data Collection**

Secondary data was collected from many on-line sources which are listed in the references section at the end of this document. The most comprehensive information came from the Robert Wood Johnson Foundation, the CDC, the 2010 census, the Center for Rural Pennsylvania, and Commonwealth of Pennsylvania on-line data sources. This data has enabled us to generate a community profile that identifies morbidity and mortality characteristics, available preventative care, access to health care and social issues affecting health.

For purposes of this community health needs assessment, the community was defined geographically and includes all of Armstrong County.

#### 3.0 OVERVIEW OF KEY STATISTICS

This overview summarizes the significant findings from the primary and secondary statistical data.

#### Demographic Profile (U.S. Census – Quick Facts)

- 98% of the residents in Armstrong County are Caucasian.
- Armstrong County has an aging population with 18.4% currently 65 years or older.
- 52.2% of the population graduated from high school but received no post-secondary education.
- 13% of the community lack basic prose literacy skills.
- When compared to the Commonwealth, levels of poverty are above the Commonwealth average (14.7% in poverty) and 40.8% of children are eligible for free or reduced school meals.

#### **Morbidity and Mortality Profile**

- Diseases of the heart, cancers, and stroke are the three leading causes of death. (PA. Department of health)
- The premature death rate in Armstrong County is high compared to the national benchmark; 7,670 YPLL per 100,000 (nationally: 5,564 per 100,000). (Robert Wood Johnson Foundation)
- The heart disease death rate (3.27 per 1,000) is higher than the Commonwealth death rate (2.66). (CDC)
- The diabetes rate of 10.8% is higher than the rate of any of the five contiguous counties of Allegheny, Butler, Indiana, Clarion and Westmoreland which range between 7.8% and 10%. (CDC)
- The obesity rate of 27.4% in Armstrong County is higher than the rate of any of the five contiguous counties. (CDC)
- The cancer rate in Armstrong County compares unfavorably with the Commonwealth average for certain types of cancer. (Pa. Department of Health.)

- Colorectal cancer –77.82 per 100,000 compared to 53.60 statewide average.
- Esophageal cancer 7.34 per 100,000 compared to 6.49 statewide average.
- Lung cancer 104.24 per 100,000 compared to 81.52 statewide average.
- Breast cancer 104.24 per 100,000 compared to 83.34 statewide average.
- The most common chronic conditions documented in the charts of patients seen at ACMH primary care centers are hypertension, COPD, CAD, diabetes and obesity. (ACMH computer files.)

#### Access to Healthcare Profile (Robert Wood Johnson Foundation)

- Of the population under 65 years old, 11.8% are uninsured.
- There is an 18.2% enrollment rate for medical assistance.
- 40% of the community does not have access to affordable, healthy food choices.
- The food insecurity rate (the percentage of households in Armstrong County unable to acquire enough nutritious food for all members in the home) is 13.9%.
- There is a smaller ratio of primary care physicians in the community (2,073:1) compared to the Commonwealth ratio of 1,249:1.
- There is a severe shortage of mental health providers in the community with a ratio of 1,238:1 compared to the Commonwealth average of 623:1.

#### Preventative Care Profile (Robert Wood Johnson Foundation)

- 32% of adults do not participate in any form of regular physical activity.
- 86.7% of eligible adults have never been screened for colorectal cancer.
- 81% of the population does not eat the recommended daily servings of fruit and vegetables.
- Diabetic compliance is comparatively good among Medicare enrollees of whom 82% regularly receive HbA1C tests to manage diabetes.
- 77% of Medicare enrollees receive regular mammography screenings for breast cancer but the percentages for those between the ages of 50 and 65 are believed to be lower.

#### Social Profile (Robert Wood Johnson Foundation)

• 35% of the adult population are overweight: 30% are obese (BMI  $\ge$  30).

- 35% of primary school children in the Armstrong School District (K-6) are overweight or obese.
- 23% of adults smoke more than 10 cigarettes daily.
- 25.8% of women smoke during pregnancy and only 18.4% quit in their first trimester.
- 24% of adults report that they abuse alcohol by occasional binge drinking.
- Along with alcohol, heroin and prescription drugs are the most common substances abused in Armstrong County.

#### 4.0 COMMUNITY PROFILE

Armstrong County has an estimated population of 65,785 people, which is nearly a 5% decrease in population since the 2000 United States Census. There is an increasingly aging population and seniors (over 65 years) make up 19.7% of the population. New families and young professionals have not been moving into the county, due primarily to a lack of attractive jobs and high property taxes.

**Income levels** - Almost 13% of the population in the county is living below the federal poverty level. 14.7% of residents are considered to be living in poverty. The median household income for Armstrong County is somewhat lower than Pennsylvania at \$45,241 and \$49,501 respectively (US Census, 2013).

<u>Unemployment rates</u> - Only 59.6% of county adults are currently employed and in the labor force. ACMH Hospital is currently the largest employer in Armstrong County with employment of approximately 1000 individuals. Most of those employees live in the county. Over the last several decades, many industries and other large employers have left the county and new businesses have not replaced them (US Census, 2013).

<u>Un- and under-insured</u> - Health insurance coverage in Armstrong County is similar to that of the rest of Pennsylvania with many people in the county lacking any health insurance at all. Of the population under 65 years old, 11% are uninsured. 18.2% of the County's population is eligible for some form of medical assistance. At this time, we have not located a source to assess the effects of the Affordable Care Act on Pennsylvania residents.

The following table, Table 1, depicts the demographics of Armstrong County compared to the Commonwealth of Pennsylvania.

Demographics	Armstrong County	Pennsylvania
Total Population	67,787	12,787,209
Population 2000-2014	-1.7%	0.0%
Median Age (years)	44.5	40.1
Population over 65 years	18.4%	15.4%
Population by Race:		
White	67,565 (98%)	81.9%
Black	553	10.8%
All Ages in Poverty	8,399 (12.5%)	12.5%
Under age 18 in Poverty	2,621 (19.1%)	17.1%
Highest Education attained		
9 <sup>th</sup> to 12 <sup>th</sup> grade, no diploma	4,105 (8.3%)	8.2%
High school graduate	25,681 (52.2%)	86.9%
Some college, no degree	6,868 (13.9%)	16.6%
Bachelor's degree or higher	6,753 (13.7%)	26.0%
Median Household Income	\$42,328	\$49,501
Per Capita Income	\$21,137	\$26,678
Uninsured (under 65 years)	6,347 (11.8%)	11.7%
Medical Assistance Enrollment	12,550 (18.2%)	16.5%
CHIP Enrollment	8.3%	6.1%
Free or Reduced-price school meals	3,546 children	39.1%
eligibility	(40.8%)	
In Labor Force, over 16 yrs. old	33,234 (59%)	63%
Education, healthcare, social assist.	6,839 (22.2%)	
Manufacturing	5,231 (17.0%)	
Retail Trade	4,109 (13.3%)	

Table 1. Demographics of Armstrong County and Pennsylvania

#### **Mortality and Morbidity Characteristics**

Armstrong County is ranked 36th among Pennsylvania's 67 counties in terms of health outcomes by the County Health Rankings developed by the Robert Wood Johnson Foundation through the University of Wisconsin Population Health Institute. Health outcome measures include morbidity and mortality rates and were used to rank the overall health of counties throughout the United States (RWJF, 2015).

The three leading causes of death in Armstrong County are diseases of the heart, cancers and stroke. In Pennsylvania, 67.3% of the population has been diagnosed with hypertension.

Hypertension, or high blood pressure, is the primary risk factor for stroke, which occurs when blood flow to the brain is blocked. Strokes are the third leading cause of death and the third leading cause of disability in Pennsylvania. High blood pressure is also a risk factor for heart attacks, which are at a high rate in Armstrong County. The heart disease death rate in Armstrong County is 3.27 (per 1,000 people), compared to the statewide rate of 2.66 (Center for Rural PA).

Cancers are the second leading cause of death in Armstrong County. The incidence rate for Armstrong County is 678 per 100,000 compared to the lower statewide average of 591. (Pa. Dept. of Health, 2014.)

#### Access to Care and Healthy Life Style Resources

Armstrong County is the 28<sup>th</sup> most rural county in Pennsylvania; in terms of population per square mile. There are dispersed pockets of population outside of a central area. Due to the sparse, rural nature of much of the county, public transportation, recreational facilities, access to affordable, healthy foods and medical services, on average, are somewhat lacking.

Food insecurity adversely affects 9,550 residents of Armstrong County or 13.9% of the county's population. This means that 13.9% of people living in the county have difficulty accessing healthy foods because there are no grocery stores or farmers' markets nearby. In fact, only 40% of Armstrong County has access to healthy, affordable foods within one mile of their homes. In the CDC Behavioral Risk Factor Surveillance System (BRFSS), 81% of people reported eating less than the recommended daily servings of fruits and vegetables (CDC BRFSS, 2006).

ACMH has opened/expanded primary care centers throughout numerous remote areas of the county. Nevertheless, some residents living outside the population centers still reside in medically underserved areas. Because of the county's rural nature–and a highway infrastructure

in which roads often wind around hills and streams—it may take a patient 30 to 45 minutes to reach the nearest primary care physician or specialist. These areas frequently lack medical specialists and public transportation as well.

From July to November 2011, Medicare and Medicaid insurance reimbursed care for the largest percentage of patients at ACMH Hospital, comprising more than 50% of net revenue received by the hospital in FY 2014. The majority of patients seen at ACMH Hospital are over the age of 65 years old. 11% of Armstrong County residents are uninsured.

#### **Preventative Care**

Preventive healthcare service utilization is low, especially among those without health insurance. In the 2010 BRFSS, 86.7% of Armstrong County population over 65 reported never having had a colorectal screening (CDC BRFSS, 2010).

#### Social Issues

Obesity is prevalent in Armstrong County. Of the adult population, 30% are considered obese (BMI  $\geq$  30) and 32% are not physically active (County Health Rankings). Pennsylvania ranks 24th among all states in terms of obesity rates (PA Department of Health). Obesity is considered a major risk factor for Type II diabetes, which is also prevalent in Armstrong County.

In 2012, Armstrong County had the 14th highest percentage of diabetes in Pennsylvania (Center for Rural PA). Currently, 12% of adults in the county are diagnosed with Type II diabetes (CDC, Diabetes Data & Trends, 2012).

Smoking is also still prevalent throughout the county, although it is gradually decreasing. In 2012, 24% of adults reported smoking daily (County Health Rankings) and smoking during pregnancy remains high. In Armstrong County, 25.8% of pregnant women reported smoking and only 18.4% quit during their first trimester (PA Department of Health). The overall trend shows an increasing percentage of pregnant women test positive for the use of drugs such as marijuana and heroin during pregnancy, which subsequently is resulting in increasing numbers of newborns testing positive for drugs.

Over the past several years there has been an increase in abuse of prescription drugs and heroin in Armstrong County, and by a younger population, beginning as young as 13 years old. Heroin use is currently more prevalent than cocaine. Prescription drugs, including oxycodone and hydrocodone, are also abused by many in Armstrong County. The abuse of prescription drugs often leads to addiction and the use of street drugs. Individuals who are addicted to or abuse drugs often have co-existing behavioral or psychological disorders which can negatively impact their efforts toward recovery. The death rate for heroin overdose in Armstrong County is 13.4 per 100,000, greater than the Commonwealth average (Center for Rural Pa.)

In summary, health findings through secondary research include:

- Above average rate of substance abuse and nicotine usage.
- Above average rate of untreated depression and anxiety.
- Above average aging of population, which is resulting in patients with multiple chronic conditions.
- Low rate of colon cancer screenings.
- Above average cancer rates.
- Below average rates of women receiving mammography screenings.

#### 5.0 COMMUNITY STAKEHOLDER INTERVIEWS

The community stakeholders who participated in this community health needs assessment represented a cross-section of the health and human services agencies in Armstrong County. Some participants were chosen specifically because of their public health knowledge and experience. Others were chosen because of their expertise in:

- Chronic health conditions/in Armstrong County.
- Barriers to healthcare.
- Knowledge of underserved population groups in Armstrong County.
- Forming organizational collaborations with ACMH Hospital to meet health needs,
- An awareness of the health concerns of the people utilizing healthcare services,
- Reliable sources of health information,
- Sources where county residents are seeking health and wellness services,

Interviews with these stakeholders revealed certain chronic conditions, barriers to healthcare and underserved population groups in Armstrong County.

#### 6.0 FINDINGS - MAJOR HEALTH NEEDS

#### **Barriers to Health Services**

Interviews with clinicians, physicians and others familiar with healthcare services

identified the following barriers to care:

>95% of the respondents felt that inadequate or no insurance was a major barrier to services. One commented that while the ACMH financial aid program is offered to all patients presenting for care, some patients never come for care because they don't believe they can afford it.

>85% of the respondents felt that many patients lacked a knowledge or understanding of the health services they need and that created a barrier. Patients don't know what questions to ask or how to describe their healthcare needs, especially in areas where there exists a shortage of providers.

>80% of the respondents felt that the lack of public transportation systems in Armstrong County created barriers.

>80% of the respondents believed that patients didn't know where to go or how to access services.

Specific needs identified through the survey/interview process:

- The shortage of providers is especially intense in the fields of mental health, dermatology, neurology and urology.
- Transportation is an especially challenging problem for cancer patients who may require daily treatments.
- Low income patients aren't aware of places to go for transportation and insurance help (i.e. Adagio, MA, Area Agency on Aging, County Assistance Office, etc.).
- Patients are unaware of all of the services ACMH offers.
- Patients need help with chronic pain.
- There is a need for detox services.
- Aging patients with multiple chronic conditions need special attention.

• PCPs need more information on where to refer patients for diabetes, obesity, substance abuse, pain management, free screenings, etc.

#### **Drug Abuse and Addiction**

A frequently stated health concern in Armstrong County is drug abuse and addiction. Some interviewees described heroin and prescription drug abuse beginning as early as thirteen years old. Heroine is considered a cheap street drug and prescription drugs are easy to steal from friends or family members or may be over prescribed. Some interviewees stated a rising concern for the ability of mental health facilities to handle the increasing number of drug addicts with co-existing mental health disorders (depression, anxiety).

#### **Obesity**

Many interviewees were aware of the beneficial work done by ACMH over the previous six years to educate community members in how to address obesity and its co-morbidities.

The "Healthy Armstrong" initiative was designed to educate children in the Armstrong School District on the values of healthy eating and exercise and to have that knowledge reach their families through the children. The "Healthy Armstrong" initiative, which had representation and support from all stakeholders and organizations in the County, gained national attention for its success, hard work and innovation. But, interviewees pointed out that interest seemed to be waning as personnel changed within the supporting organizations and because of the increasing difficulty of obtaining grant funding for ongoing support of the project.

#### **Cancer and Cancer Screenings**

The high cancer rate in Armstrong County, compared to the statewide average, was a concern to many of the stakeholders interviewed. As recorded earlier in this document, ACMH cancer rates exceed the statewide average in the areas of esophageal, colorectal, lung and breast. Of additional concern is the low rate of screenings for breast and colorectal cancer.

#### Lack of knowledge of health conditions and services

Concern was expressed by interviewees that community members, on average, lacked education on many health conditions and services. Although it was acknowledged that ACMH hospital is aware of and has programs in place to mitigate these problems, some interviewees felt that more innovative approaches needed to be developed to become more successful. Some of the concerns were:

- Many residents' lack of education and general physical and mental health knowledge.
- The older population living at home or with family who have multiple health conditions have special educational needs.

#### Lack of transportation

Most of the survey participants and interviewees agreed that transportation is a major barrier to accessing healthcare services in Armstrong County. But it was also recognized that there may be transportation services available that even the interviewees and survey participants were unaware of. ACMH Hospital is located in the most populous center of the County and within that area a small local bus system is accessible for those residents. However, for those living in the more remote locations, transportation to the hospital and other medical/health services can be extremely difficult, especially for those requiring special handicap accessible vehicles. Furthermore, even those residents who receive medical assistance benefits and are aware of the transportation services MA provides find that those services don't include transportation for health education needs (i.e., diabetes self-management class).

#### Lack of the ability to pay for health care services

Interviewees and survey respondents commented that those who can afford commercial insurance or have it through their employers are faced with higher co pays and larger deductibles. And, while the Affordable Care Act is designed to guarantee that all individuals have access to insurance, high co pays and deductibles are still a deterrent to obtaining service under that initiative. Because of these financial hardships, people are increasingly reluctant to visit a doctor or hospital for preventative care. Medication co-pays can also be very costly, even to Medicare recipients, and patients may not be able to afford prescribed medications.

#### Lack of knowledge of where to go for health care services

Patient knowledge of where to go for services is another concern. Overall, stakeholders feel that the majority of needed services are available in Armstrong County. However the community just does not know where to go for the services or whom to ask for a referral. Even many of the stakeholders interviewed acknowledged that they were unaware of the full array of services available throughout the county.

#### 7.0 FINDINGS - UNDERSERVED POPULATIONS

#### Low income

The County's low income population is primarily insured by Medicaid. Many of the stakeholders consider this population to be underserved since the three high priority barriers to accessing healthcare (transportation, finances and knowledge of services) affect them the most. Many people who are considered low income (income does not exceed 150 percent of the federal poverty level) may not have access to a vehicle and must rely on public transportation. This is most challenging for those living in the more remote areas of Armstrong County.

#### **Underinsured/uninsured**

Without adequate insurance, people are less likely to visit the doctor for annual wellness and preventative visits. Those uninsured or on medical assistance have limited choices in healthcare providers as they have difficulty finding providers who will accept MA patients.

#### **Elderly, living at home**

The elderly in Armstrong County, specifically those living at home, are the third population group that is still considered to be underserved even though ACMH Hospital and Lutheran Senior Care have partnered to build a LIFE Armstrong Senior Care Center on the ACMH campus to provide day care services to defined senior populations. This perception may actually exist because the center has only recently opened and many are not yet aware of its existence or the services it provides. There are a number of senior living facilities in Armstrong County, but not all senior citizens can afford to live in these facilities and many do not want to leave their homes. Therefore, the elderly living at home tend to be socially isolated, sometimes lack family support and, as a result, do not always receive the healthcare services they need. At home services for seniors are available throughout the county, however many people are unaware of the services. For those who are aware of services, there may be long waiting lists to receive services such as Meals on Wheels, and transportation.

#### 8.0 STRATEGIC PLAN TO ADDRESS COMMUNITY HEALTH NEEDS

After an overview of the CHNA was presented to the ACMH board of directors at their monthly meeting in April, the planning committee of ACMH Hospital met in May, 2015 to develop a mitigation plan.

The plan covers the following general categories:

- 1. Education of community members regarding their healthcare needs and preventive care services they should be employing.
- 2. Education of community members, health care organizations and health and human service organizations as to what services are available within the County.
- 3. Obesity.
- 4. Diabetes.
- 5. Cancer rates and screenings.
- 6. Transportation.
- 7. Drug and alcohol abuse and addiction.
- 8. Resources available for under- and un-insured.
- 9. Provider shortages.

# Education of community members regarding their healthcare needs and preventive care services they should be employing.

The committee determined that the initial step in mitigation of this problem will be to form a committee to determine what education is lacking and how it can be provided in a way that is easily understood by non-clinical people. This committee will meet during ACMH fiscal year 2016 to determine root causes of this problem and identify solutions that will be implemented in fiscal years 2017 and 2018.

## **Education of community members, health care organizations and health and human** service organizations as to what services are available within the County

The planning committee believes that the development and publication of a catalog of organizations within the community with explanatory information about the services each offers along with relevant contacts would be a helpful and workable solution. ACMH may consider outside support to develop this catalog in fiscal year 2016 and to determine ways in which it can be continually updated and distributed.

#### **Obesity**

ACMH will continue to work through the Healthy Armstrong program to address obesity within the community. It was recognized that renewed efforts are required to generate ongoing interest in the program. Healthy Armstrong is an independent 501(C)(3) organization and that categorization may make funding available to sustain the program.

#### **Diabetes**

A committee will be formed in fiscal year 2016 to address this need and expand upon the work begun by ACMH in 2012 to assist providers with management of this population. The planning committee believes that enhanced education for newly diagnosed patients will have the greatest impact in negating future problems for those patients.

#### **Cancer Rates and Screenings**

During fiscal year 2016, an outside review or support may be considered or utilized to further analyze the rates of all types of cancers in Armstrong County by municipality and that information is to be available and utilized to supplement the ACMH planning committee in its analysis. A subcommittee will additionally be formed to then conduct a root cause analysis/review on the high cancer rates in Armstrong County, mainly colorectal, esophageal, lung and breast. The subcommittee will also attempt to correlate screening needs, education programs and appropriate clinical interventions needs relative to cancer rates. One current mitigation being considered is to engage specialists in esophageal disorders for enhanced screenings and interventions. Subsequent plans of action for other high rate cancers, will also be developed.

#### **Transportation**

ACMH may consider an outside review or outside support may be considered or utilized to analyze transportation needs during fiscal year 2016 and to identify all alternative transportation systems available within Armstrong County. The information collected will be provided to the planning committee for further action in 2017 and 2018

#### Substance abuse and addiction

ACMH will continue to support "Drugs Kill Dreams" and its "Jail Experience" program. ACMH will continue its educational program begun in 2014 addressing youth access to family members' prescription medications. ACMH will work with ARC Manor (Addiction Recovery Center) to address dual diagnosis issues and will consider implementing a hospital-based detoxification service.

#### **Resources available for under- and un-insured individuals**

A committee will be formed in fiscal year 2016 to address this need. The planning committee believes that a feasible solution would be the development of a concierge/navigator service, which would individually guide patients through the healthcare system and determine/access available resources.

#### **Provider Shortages**

ACMH has recently hired a psychiatrist, which somewhat reduces the mental health care provider shortage in Armstrong County.

ACMH will take steps to recruit urologists and neurologists into Armstrong County.

#### APPENDIX A: LIST OF KEY STAKEHOLDERS WHO RESPONDED TO THE ON-

#### LINE SURVEY OR WERE INTERVIEWED

The Executive Team and Board or Directors of ACMH is appreciative of the following individuals who participated in providing information for this Community Health Needs Assessment and for the valuable information they provided.

Kaitlin Zambotti, CRNP, Leechburg Primary Care Center

Lori Wills Gray, CRNP, South Bethlehem Primary Care Center

Donald F. Ehrenberger, DO, Sarver Primary Care Center

Bert C. Hepner, DO, Orthopedic Surgeon, Armstrong Orthopedic Associates

Randy Troup, PA, Armstrong Orthopedic Associates

Paul J. Lobby, OD, Armstrong Eye Care Associates

Robin Houston, Officer Manager, Neurology

Linda McCollough, Operations Manager, ACMH/Glade Run Physician Offices

Phil Gelacek, MD, Internal Medicine and Family Practitioner, Ford City

Joshua A. Brice, DO, Adult Medicine, Kittanning

Jeffrey A. Reyer, DO, Adult Medicine, Sarver

Deana M. Lantz, CRNP, Elderton Primary Care Center

Mary Anne Galonski, MD, Family Counseling Center of Armstrong County

Daniel Rectenwald, Cardiology Associates, Kittanning, Pa.

Karla D. McCann, DO, Primary Care, Kittanning

Mary Kay Palilla, PA, Elderton Primary Care Center

Ryan Oleson, DC, Oleson Chiropratic

Vicki M. Leo, DO, Leechburg Primary Care Center

Jesica Rybarik, Office Manager, Adult Medicine, Sarver

Sonnie Hockenberry, Practice Manager, Main Street Orthopedics

Dana Klingensmith, MSN, RN, OCN, Nurse Manager, Oncology Department

Sharon McKelvey, MS, RDN, LDN, ACSM Certified Exercise Physiologist, Lead Dietitian, ACMH

Rosalyn Huth, RN BSN CNOR, Nurse Manager ASC PACU and Pre testing, ACMH

Kim Crawford, RTR, RDMS, Supervisor Imaging Services, Armstrong Outpatient Imaging Center

Donna Trudgen, CRCE-P, Executive Director, ACMH Physician Practices

Mona Rupert, MBA, Vice President Clinical Services, ACMH

Veronica Stubrik, Office Manager, South Bethlehem Primary Care Center

Janis Reeves, RN, BSN, ACMH

Charity Moore, MPT, Director, Inpatient Rehab Services, ACMH

Amy Stolitza, Office Manager, Primary Care Center, Kittanning

Jeff Lasko, MPT, OCS, Director Outpatient Rehab, ACMH

Andrea Morvik, RN, Nurse Manager, OR, ACMH

Sonnie Fleeger, Manager Adult Medical Associates

Callie Karaica, Executive Director of Physician Practices, ACMH and Glade Run

Jodi Thiry, RN, Nurse Manager, Behavioral Health Unit, ACMH

Dennis Lager, RN, Nurse Manager Emergency Medicine, ACMH

Marcy Green, RTR, Supervisor, ACMH Imaging

Joyce Wright, MSW, Executive Director, Operational Excellence and Healthcare Informatics, ACMH

Sandy Geibel, BS, MT, ASCP, MHA, Technical Director, Lab Services, ACMH

Rich L. Palilla, Executive Director, Planning and Development, Armstrong County Honorable J. Gary DeComo, Magisterial District Judge, 1<sup>st</sup> District, Armstrong County Gary Montebell, Director, Belmont Complex Patricia Kirkpatrick, Member, ACMH Board of Directors Carmen Johnson, Assistant Director, Planning and Development, Armstrong County Jodi Beers, Community Relations/ACMH Foundation Chase McClister, Esq., Heilman and McClister Law Firm JoEllen Bowman, Executive Director, HAVIN Joely Beeker, Executive Director, Richard G. Snyder YMCA Janet Talarico, Director, Area Agency on Aging Cindy McCrea, Executive Director, ARC Manor Linda Reesman, Tumor Registrar, ACMH Trisha Brice, Project Coordinator, HEALTHY Armstrong John Ellenberger, Armstrong County Community Action Agency John I Lewis, President and CEO, ACMH Harold Altman, MD, CMO, ACMH

## APPENDIX B: SAMPLE INTERVIEW/SURVEY QUESTIONS

1. In your opinion, what barriers to healthcare services exist in Armstrong County? Below are some that have been previously identified. Click on the down arrow to indicate whether you have noticed or previously been made aware of such barriers. Please add others that you are aware of.

Provider shortages
Long waits for appointment
Knowing where or how to access health services and/or what services are needed
Inadequate or no insurance coverage and/or the inability to pay expensive co-pays and deductibles for services
Lack of transportation
Lack of understanding and/or knowledge about what healthcare services they need
Other
Other (please specify) or comment on any item above.

1. In your opinion, what barriers to healthcare services exist in Armstrong County? Below are some that have been previously identified. Click on the down arrow to indicate whether you have noticed or previously been made aware of such barriers. Please add others that you are aware of.

Provider shortages	
Long waits for appointment	
Knowing where or how to access health services and/or what services are needed	
Inadequate or no insurance coverage and/or the inability to par expensive co-pays and deductibles for services	y
Lack of transportation	
Lack of understanding and/or knowledge about what healthcar services they need	e
Other	
Other (please specify) or comment on any item above.	



2. On a scale of 1-5, with 1 being poor and 5 being excellent, how would you rate the ACMH programs listed below?

Support groups/education programs
Transportation assistance
Draw stations/imaging centers
Primary stroke center certification
Cardiac cath lab and PCI
LIFEArmstrong
Walk in primary care hours
Other (please specify)

3. Do you have suggestions for ways in which your organization can partner with ACMH Hospital to address the health needs of Armstrong County residents?

4. What is your perception of the overall health of Armstrong County residents?

From a physical perspective		
From a mental		 
Perspective From the perspective of age		
related health issues	8	
From the perspective of drug		
dependency or other		
addictive issues		

5. What are the major health issues that concern you in Armstrong County and what resources are needed to resolve those issues?

6. In your opinion, what is the most important health issue ACMH should be addressing at this time?

#### REFERENCES

- Centers for Disease Control and Prevention. Diabetes data and trends. (2008-2011). http://apps.nccd.cdc.gov/ddtstrs/StatePage.aspx?state=Pennsylvania
- Feeding America. *Map the meal gap*. (2012). http://feedingamerica.org/ hunger-in-America/hunger-studies/map-the-meal-gap.aspx
- Greater Pittsburgh Community Food Bank. *Armstrong county hunger profile* [Data File]. (2012). http://www.pittsburghfoodbank.org/pdf/armstrong.pdf
- Health Resources and Services Administration. *Medically underserved areas & populations* (*MUA/Ps*). http://bhpr.hrsa.gov/shortage/muaps/index.html
- The Center for Rural Pennsylvania. http://www.rural.palegislature.us/news0310.html#7
- The Hospital and Healthsystem Association of Pennsylvania. *Community health needs assessment.* (20 September 2011). http://www.haponline.org/finance/ issues/tax-exempt/needs-assessment/
- Pennsylvania Department of Health, Pennsylvania Cancer Incidence and Mortality Annual Report – 2011,
- Pennsylvania Medicaid Policy Center. *Medical assistance and CHIP enrollment in Armstrong county* [Data File]. (2009). Retrieved from <u>http://www.pamedicaid.pitt.edu/countyupdate/documents/Armstrong.pdf</u>
- Robert Wood Johnson Foundation. *County Health Rankings and Roadmaps 2014 rankings*. http://www.countyhealthrankings.org/pennsylvania/armstrong
- United States Census Bureau. *State & county quick facts* http://quickfacts.census.gov/