

**Excelsa Health
Community Health Needs Assessment
2019**



2019 Community Health Needs Assessment



Excelsa Health Community Health Needs Assessment 2019

Message to Community

Excelsa Health is proud to present their 2019 Community Health Needs Assessment (CHNA) Report. This report summarizes a comprehensive review and analysis of health status indicator, public health, socioeconomic, demographics and other qualitative and quantitative data from Westmoreland County. The report was developed with research collaboration from the Center for Applied Research (CFAR) at the University of Pittsburgh at Greensburg and the Healthy Communities Institute (HCI), Conduent. This report provides findings at multiple levels of analyses. The data review and analysis determined the top priority needs and issues facing the community-at-large. The process ensured consistent data collection for Excelsa Health following the current IRS 990 guidelines, a federal requirement for non-profit health organizations and hospitals. However, the primary purpose of this assessment was to identify the health needs and issues of Westmoreland County. In addition, the CHNA provides useful information for public health and health care providers, policy makers, business leaders, community groups, social services agencies, educational and religious institutions and Westmoreland County residents who are interested in learning more about improving the health status of the community and region.

Improving the health and well-being of the community and region is a top priority of Excelsa Health and other stakeholders. Providing education on health care, improving patient care and implementing program improvements are ways in which Excelsa Health is working toward providing community resources in efforts to strengthen community health.

The complete 2019 – 2021 CHNA, including all data collection, methodology and proposed implementation plan has been reviewed and approved by the Excelsa Health Board of Trustees in November 2019.

Excelsa Health Community Health Needs Assessment 2019

Executive Summary

This report provides findings of the Community Health Needs Assessment at multiple levels of analyses. Data was collected and analyzed from primary data sources such as: structured interviews with stakeholders, focus groups with demographically representative community members, a resident and patient survey, and an employee health survey. Secondary data sources were collected and analyzed using data sources from Conduent Health as a starting point for the analyses of demographic, economic, health, and social variables relevant to the CHNA in Westmoreland County conducted by CFAR. The CHNA process then included a data review with the CHNA Steering Committee followed by developing a detailed implementation plan. This plan was then crafted to allow for the implementation of best practices toward issues most concerning Excelsa Health in their service of Westmoreland County.

This CHNA allows Excelsa Health to meet the requirements of the IRS 990, a federal requirement for non-profit health organizations and hospitals. However, the main purpose of the CHNA is to identify the health strengths and weaknesses of Westmoreland County to determine opportunities and threats, which may impact developing and enacting an implementation plan. The CHNA also provides business leaders, community groups, public health and health care providers, educational and religious institutions, policy makers and social service agencies, and Westmoreland County residents with detailed information to allow for improving community health. Developing an implementation plan will further permit these stakeholders to work toward health care outcomes based on strategic decision making.

For Excelsa Health and other stakeholders in Westmoreland County, improving the health of the community remains an important priority. Providing education on health care, improving patient care, and implementing program improvements are ways in which Excelsa Health is working toward providing community resources in efforts to strengthen community health.

Excelsa Health Community Health Needs Assessment 2019

Background

In December of 2014, the IRS issued final regulations providing guidance regarding the requirements for charitable hospitals added by the Patient Protection and Affordable Care Act of 2010. The requirements include the completion and implementation of a Community Health Needs Assessment (CHNA). The initial CHNA for Excelsa Health was approved by the Board in May, 2013 and focused on the Community Health concern of Obesity which has been linked to Diabetes, Hypertension and Coronary Heart Disease. To address this Community Health concern, Excelsa Health entered into partnerships with our Excelsa Health Medical Group physicians, Regional Employers, School Districts and Community -based organizations. These partnerships focused on primary physician support of lifestyle changes, healthy eating, and improved access to exercise and fitness support. Improvements have been measured and these initiatives will continue.

Excelsa Health worked with the Center for Applied Research (CFAR) at University of Pittsburgh, Greensburg to complete the last CHNA, which included the time period from 2016-2019. With the support of CFAR, we have reviewed secondary data collected through our partnership with the Healthy Communities Institute and primary data collected through surveys, focus groups and interviews. As a result of these findings and input from our diverse and very knowledgeable Community Health Steering Committee, in May, 2016 the Excelsa Health Board of Trustees approved that the next CHNA focus on three Community Health Issues as priorities:

- 1) Build on our present community partnership initiatives and continue our focus on reducing “Obesity” and the negative impacts of Diabetes, Hypertension and Coronary Heart Disease. Implementation Initiatives will include continued partnerships with our Excelsa Health Medical Group with a focus on prevention and medical management of Diabetes. It will also include continued Partnerships with Regional Employers to provide wellness services, School Districts to support Project Fit America Programs and Regional YMCA 's to expand the Diabetes Prevention Programs and continued outreach programs such as Mall Walkers.
- 2) Add a focus on “Substance Abuse”. Implementation Initiatives will include Partnerships with Westmoreland County and the Drug Task Force and efforts from our Excelsa Health Medical Group and professional staff regarding developed guidelines and education for our physicians to follow and to support their medical decision in the hope of reducing the prescribing of these medications.

Excelsa Health Community Health Needs Assessment 2019

- 3) Add a focus on Women's Health primarily related to reducing the "Incidence of Breast Cancer". These Implementation Initiatives will include documentation and measurement of many of the initiatives presently under way through Excelsa Health to improve access to the diagnoses and treatment of this health concern.

This 2016-2019 CHNA included detailed data collection, analysis, and evaluation of the following relevant community health areas:

- Access to Quality Health Care
- Chronic Disease
- Demographic and Socio-Economic Indicators
- Environmental Concerns and Constraints
- Infectious Disease
- Injury
- Mental Health
- Nutrition
- Older Adults and Aging
- Physical Activity and Nutrition
- Substance Use and Abuse
- Transportation
- Women's Health

Further details on the 2016-2019 Excelsa Health CHNA and Implementation Plan are available on the Excelsa Health website under the community wellness tab.

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2019-2021 CHNA Timeline and Process

CHNA Timeline

Infrastructure Development (May—June 2018)

- Formalize work plan with tasks and timelines specified

- Reconsider Steering Committee Members to assure inclusion of appropriate community level representation

- Specify data parameters for secondary data collection

Refine Scope and Planning (June—July 2018)

- Finalize primary data collection plan

- Revised primary data tools

- Implement new data tools

- Finalize secondary data collection plan

Implement Data Collection Plan (August—December 2018)

- Present Data Collection Plan to Steering Committee for feedback

- Schedule and conduct structured interviews, focus groups, and community surveys

- Collect, process, and refine secondary data

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Data Analysis Plan (January—April 2019)

- Analyze primary and secondary data

- Develop Findings Section for inclusion in Final Report

- Deliver Data Findings to Steering Committee for feedback and the prioritization of SWOT community health needs

Develop Draft Report (May—June 2019)

- Complete draft report

- Deliver presentation to Steering Committee

- Assist with the development/refinement of Implementation Plan

Implement and monitor the Community Action Plan (July 2019—April 2020)

- Develop Final CHNA Report for presentation to Excela Health Board for consideration and approval of Implementation Plan

- Assist Excela Health with implementing, measuring, and monitoring program and service activities

- Assist with Continuous Quality Improvement (CQI) on the development of the next CHNA

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CHNA Data Collection

Primary Data Collection

During the CHNA period, data was collected through a series of key stakeholder interviews, community focus groups, a patient and resident survey, and an employee survey. Primary qualitative data collected for the CHNA includes 10 focus groups and 15 stakeholder interviews. These individual and group interviews were held with respondents to include a variety of Westmoreland County resident's interests and viewpoints based on opinions on community health issues. Questions posed during these sessions allowed us to gather detailed information on knowledge and perceptions on the strengths and weaknesses of community health as well as ways in which opportunities could be utilized, and threats avoided.

In addition to focus groups and interviews, a paper-based patient and resident survey was used to gather information from residents. Questions asked on the survey were designed to gather detailed information on knowledge and perceptions of community health in a similar design to the focus groups and interviews. Once these data were collected, data were sorted by theme and responses to questions were grouped into categories. This allowed for the content analysis of data, which was then presented to the CHNA Steering Committee for comment and feedback. Details on the data collection tools used for interview, focus group, or survey instruments is available upon request.

Secondary Data Collection

Using secondary data obtained through HCI-Conduent, CFAR analyzed and interpreted county level data in several key areas relevant to community health indicators. These areas of interest included access to health services, rates and details on diseases, non-health outcomes, demographic details, and economic outcomes. HCI also provided details on how certain health issues can be ranked using an indicator scoring system which allowed us to measure how Westmoreland County is doing in comparison to the state and nation on health indicators. Details on the methodology or data instruments are available upon request.

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Findings

Highlights of Findings from Primary Data Sources

Interviews and Focus Groups Analyses

CFAR conducted interviews and focus groups of key stakeholders and community members. The questions asked during these interviews and focus groups are provided below. Following each question underlined below, the pooled key concepts and ideas from individual interviews and focus groups are detailed. The numbers to the right of the response in parenthesis is the number of times a concept or indicator was mentioned during an interview or focus group.

What does a healthy community mean to you?

- Access to healthcare (10)
- Education about healthcare (7)
- Services for all, easily accessible (7)
- Preventative care (5)
- Adequate nutrition (3)
- Proactive involvement
- Better connection between providers
- Access to housing
- Caring community and staff in hospitals
- Community that values and treats needed people
- Able to live fullest life
- Individual action on health care issues

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What would you identify as the top three community health needs?

- Opioid/substance abuse (13)
- Obesity (12)
- Transportation (11)
- Aging population (6)
- Mental health care (5)
- Universal health care (5)
- Preventative Care (4)
- Diabetes (4)
- Access to health care (4)
- Poverty (3)
- Education (2)
- Health disease (2)
- Access to good nutrition
- Access to housing
- Smoking
- Cancer
- People not exercising
- Air quality
- Lack of healthcare providers
- High price of health care insurance
- Medication management and evaluation
- More outreach to county rural areas
- Access for prenatal and pregnancy care

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What issues are driving these community health needs?

- Economy (7)
- Cost of healthcare (5)
- Lack of transportation (5)
- Rural culture of obesity (5)
- Lack of education about opioids (2)
- Split between Highmark and UPMC (2)
- Lack of high quality food options
- UPMC and Excelsa monopolies
- Multiple co-pays at same location: insurance issues
- Large number of elderly patients
- Lack of transportation for elderly patients
- Lack of employment
- Drug testing and employees cannot pass
- Mental Health issues
- Local politics
- Rise of Spanish speaking residents
- Smoking
- Access to healthy food and nutritional information
- Poor healthcare integration

What community health activities are currently underway?

- Mall walkers and project fit America (4)
- Ongoing Westmoreland Drug and Alcohol Commission involvement (3)
- Prenatal clinic
- Routine clinics
- Better local service options

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- MAPS program, waive co-pays in some cases
- Potential solutions to transportation
- County 211 connection
- Excelsa literature, brochures, and outreach

What else needs to be done with respect to community health?

- Expand existing programs (8)
- Include all players in county on healthcare discussions (4)
- Medication assisted treatment for opioid addiction (4)
- Better coordination with EMS services (3)
- Better follow-up on existing program like Mall Walkers and Project Fit America (3)
- Company engagement (2)
- Partner with restaurants for healthier food options (2)
- Better community transportation options (2)
- Extend Project Fit America (2)
- More focus on underrepresented and disadvantaged populations
- One site with multiple services
- Uneven county services north of rt. 30 in Westmoreland County
- Access to nurses
- Better transportation for seniors
- Balance toward client care, away from controlled doctor interactions
- More programs like mall walkers and silver sneakers
- Community outreach
- Improve funding streams for services
- Ligonier services are lacking
- Better education on health and preventative care
- Focus on seniors more
- Walk-in mammography, breast care center

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- Develop programs throughout county, not just urban areas
- More psychiatrists to engage mental health problems
- Lack of healthcare providers
- Better communication between facilities
- Better education and access to opioid overdose prevention remedies
- Expand Excelsa Health acceptance of insurance and providers

Are resources adequate to expand or sustain community health needs?

- Accessible services (3)
- Lack of resources in rural areas
- Lack of financial capital
- Lack of case managers at Excelsa Health
- Lack of behavioral treatment resources
- Social services rich county
- Size of county problematic
- Expand county food bank
- Get more employers involved in efforts
- Better transportation needed

The responses to the interviews and focus groups show the opinions of respondents on questions related to community health activities, needs, and resources in Westmoreland County as part of the Excelsa Health CHNA. The themes identified allowed us to better understand the perceptions of key stakeholders and community focus group participants on issues of community health.

Excelsa Health Community Health Needs Assessment 2019

Excelsa Health CHNA 2018-2020 Employee Online Survey Analysis

In addition to interviews and focus groups, CFAR conducted an Excelsa Health employee online survey to learn the perceptions of employees toward community health concerns in the county. 779 employee respondents completed the survey with details on both questions posed and answers received indicated below. The number in parenthesis shows the top three responses for each of the questions in the survey.

Question 1: How much of a problem is each of the following in your community?

1. Drug Abuse (358)
2. Obesity (214)
3. Access to Medical Care Providers (176)
4. Tobacco (170)
5. Heart Disease (160)

Question 2: What are the three most important factors for a healthy community?

1. Access to health care (141)
2. Good job/healthy economy (99)
3. Strong family life (77)

Question 3: What are the three most important health problems in our community?

1. Drug Use and Abuse (248)
2. Cancer (64)
3. Aging Problems (37)

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Question 4: What are the three most important risky behaviors in our community?

1. Drug Use and Abuse (327)
2. Being Overweight (54)
3. Alcohol Abuse (41)

Question 5: What barriers do people in your community face when they seek health care?

1. High Cost of Care (231)
2. No Insurance Coverage (125)
3. Fear of Health Condition Itself (27)

Question 6: What is needed to improve the health of your family and neighbors?

1. Insurance Coverage (124)
2. Free or Affordable Health Screenings (74)
3. Job Opportunities (61)

Excelsa Health CHNA 2018-2020 Patient Community Health Survey

CFAR also conducted a paper and pencil survey with residents and patients who visited hospitals or care centers to ascertain their opinions on community health. 409 respondents completed the survey with questions posed and answers provided details below.

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Question 1: What do you think are the three most important factors for a healthy community?

1. Access to Health Care (195)
2. Good jobs and healthy economy (40)
3. Low crime safe neighborhoods (27)
4. Strong family life (25)
5. Low adult deaths and disease rates (23)

Question 2: What do you think are the three most important health problems in our community?

1. Drug use/abuse (125)
2. Cancers (84)
3. Aging problems (75)
4. Care of elderly (30)
5. Mental health problems (14)

Question 3: What do you think are the three most important risky behaviors in your community?

1. Drug abuse (187)
2. Alcohol abuse (76)
3. Being overweight (48)
4. Bullying (24)
5. Poor eating habits (19)

Question 4: What barriers do people in your community face when they seek healthcare?

1. High cost of care (194)
2. Inadequate or no insurance coverage (85)
3. Transportation (26)
4. Fear (not ready to discuss health problems (21)
5. Do not know how to find doctors (20)

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Question 5: What is needed to improve the health of your family and neighbors?

1. Free or affordable health screenings (120)
2. Insurance coverage (114)
3. Mental health services (34)
4. Job opportunities (33)
5. Healthier food (24)

Question 6: How would you rate our community as a healthy community?

1. Healthy (247)
2. Unhealthy (134)

Question 7: How would you rate your own personal health?

1. Healthy (299)
2. Unhealthy (83)

Question 8: During the past month, other than your regular job, did you participate in any physical activities or exercise such as running, calisthenics, golf, gardening, or walking for exercise?

1. Yes (293)
2. No (90)

Questions 9: Do you have a regular health care provider?

1. Yes (367)
2. No (16)

**Excela Health
Community Health Needs Assessment
2019**

Question 10: Please enter zip code where you live.

- 1. 15601 (84)
- 2. 15650 (82)
- 3. 15666 (24)
- 4. 15644 (19)
- 5. 15642 and 15658 (17)

Question 11: Age

- 25 or less (17)
- 26-39 (34)
- 40-54 (58)
- 55-66 (114)
- 67-79 (151)
- 80 or higher (25)

Question 12: Gender

- Male (100)
- Female (292)

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Community Health Needs Assessment
2019**

Question 13: Highest education level completed

- Less than HS (9)
- HS or GED (153)
- Vocational/Technical degree (66)
- BA (93)
- MA or higher (58)

Question 14: Ethnic Group

- White (277)
- None (43)
- Black (3)
- Hispanic (1)

Question 15: Marital Status

- Married/ co-habiting (260)
- Not married/ single (91)
- Other (40)

**Excelsa Health
Community Health Needs Assessment
2019**

Question 16: Household Income

- Less than 20k (57)
- 20k-29,999 (61)
- 30k-49,999 (89)
- 50k-79,000 (74)
- Over 80k (92)

Question 17: Currently employed

- Yes (145)
- No (241)

Question 18: Employee of Excelsa Health

- Yes (12)
- No (378)

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Question 19: Where did you complete this survey?

Excela Square (89)

Mall (70)

Frick (18)

Work (12)

Excela Square La Trobe (12)

Highlights of Findings from Secondary Data Sources

Excela Health CHNA 2018-2020: Secondary Data Analysis of HCI Platform Data

CFAR obtained secondary data source from HCI, Conduent on demographic, economic, health, and social indicators in Westmoreland County for the most recent period each indicator was available for analyses. The narrative below discusses ways in which these secondary data illuminate comparison of Westmoreland County with state and national level statistics.

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Access to Health Services:

Adults with Health Insurance:

In regards to adults with health insurance, Westmoreland County values are higher than state values, with 94.7% of adults having any type of health insurance coverage, placing Westmoreland County in the best 50% of all Pennsylvania and US counties and shows an overall improvement from previous values. However, this does not meet the HP 2020 target of 100%. The disparities seen amongst age and gender categories are not significantly different than the overall value; however, racial disparities amongst those who self-identified as Black or African American (88.1%) are significantly lower than the overall population.

The primary care provider (practicing physicians specializing in general practice medicine, family medicine, internal medicine, and pediatrics) rate for Westmoreland County in 2015 is 79 providers/100,000 people (in best 50% of all U.S. counties). This value is lower than the state level of 81 providers/100,000; however, the Non-physician primary care provider rate (Primary care providers who are not physicians include nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists) is 68/100,000 people showing which is an increase from the previous measurement of 63, which falls within the lower 25-50% amongst PA counties and upper 50% of all U.S. Counties.

Diseases:

Cancer:

In Westmoreland County, the age adjusted cancer rate is 172.3 deaths per 100,000 population. Of these, breast cancer (21.5 deaths per 100,000), lung cancer deaths (45.9 deaths per 100,000), prostate cancer deaths (18.3 deaths per 100,000), and colorectal cancer deaths (16.5 deaths per 100,000) contribute to the greatest number of annual deaths. The incidence of prostate cancer deaths is the only HP 2020 cancer target met.

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There are many gender and racial disparities with cancer at the county level. Overall, there is a significantly higher death rate amongst males (208.7 deaths per 100,000) than females (148.4 deaths per 100,000) as well as a significantly higher incidence of prostate cancer amongst those who identified as Black. Screenings and other preventative measures may need increased in certain populations.

Diabetes:

It is reported that 12% of those living in Westmoreland County have Diabetes. This value is slightly larger than the PA value but is remaining consistent to its prior measurements. Children with Type 1 Diabetes (0.42%) in the country is relatively low and similar to values seen across PA; however, the incidence of Type 2 (0.07%) amongst children are higher than those of PA and prior values. The Medicare population in the area has a lower incidence of Diabetes (23.3%) compared to PA and national values.

The age adjusted death rate due to diabetes in Westmoreland County (20.3 deaths per 100,000) ranks within the 25-50th percentile of PA counties and shows a slight non-significant increase from the previous values reported. The death rate due to diabetes is higher in males as well as those 65 and older.

Heart Disease & Stroke:

Within Westmoreland County, Coronary Heart disease has the highest age-adjusted death rates (115.4 deaths per 100,000) of all the heart disease categories followed by Stroke (34.3 deaths per 100,000). Males have a significantly higher risk of death due to CHD over females in the population. Both of these rates fall within the middle 25th-50th percentile in comparison to PA counties. CHD is higher in Westmoreland County than the average in PA but Stroke deaths is lower than the PA average and also meet HP2020 Target values.

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Heart disease is prevalent amongst the Medicare population of Westmoreland county. Age- adjusted hospitalization rate due to heart attack is 35 per 10,000.

Of the Medicare population, 50.7% experience Hypertension, 40.8% have Hyperlipidemia, 13.4% have Heart Failure, 25.5% have Ischemic Heart disease, and 9.3% experience Atrial Fibrillation.

Immunizations and Infectious Disease:

Age-adjusted death rates (14.4 deaths per 100,000) due to influenza and Pneumonia for Westmoreland County are above PA and national values.

Sexually transmitted diseases, chlamydia (214.1 cases per 100,000) and gonorrhea (37.4 cases per 100,000) have significantly lower incidence rates in the county compared to the state and national values. Age and Gender disparities exist for both of these STDs with highest incidence rates in those 15-24 years old. Rates of chlamydia are higher in females and Gonorrhea higher in males. HIV age-adjusted death rates are 1.0 deaths per 100,000, which is lower than PA and national values and meets the HP 2020 Target.

Lyme disease is significantly higher in the county (162.3 cases per 100,000) compared to the state and national values. There is also an increase in Lyme from prior reported values. Lyme infections were highest in those 55 years and older.

The incidence rate of salmonella infection due to food safety in Westmoreland county is 12.7 cases per 100,000. This is slightly higher than the PA value but does not meet the HP 2020 target (11.4).

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Respiratory Diseases:

Asthma is a prevalent respiratory problem in the U.S. that is often exacerbated by poor environmental conditions. During 2015, 7.7% of adults in Westmoreland County reported that a health care provider told them that they had asthma amongst those is the Medicare population (in the best 50% of PA counties), which is below the state and national values. COPD amongst the Medicare population in Westmoreland county is 11.6%. This is above both PA and US values.

Mental Health & Mental Disorders:

Age-adjusted rates due to suicide in 2016 were 19.1 deaths per 100,000. This falls within the 25th -50th percentile for all PA counties and is higher than both state and national rates. Suicide deaths are significantly higher in male population, but did not reach the HP 2020 target value of 10.2%. The percentage of Medicare beneficiaries who were treated for depression in 2015 in Westmoreland County is 16.6 % (in top 50th percentile of PA U.S. counties). This percentage is lower than the state value of 17.8% but is increasing since the last measurement period.

Those in the Medicare population <65 have a higher incidence of depression than older Medicare population. 11.2% of individuals within the county experience frequent mental distress which is significantly lower than PA and national values.

Maternal, Fetal, & Infant Health:

In the maternal, fetal, and infant health category, the percentage of babies born with low birth weight (less than 2,500 grams) in Westmoreland County in 2016 is 7.2% (in the best 50% of PA Counties). This value is lower than the state value of 8.2% and meets the target HP 2020 value of 7.8%.

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The percentage of mothers whom breastfed their new baby after delivery in 2016 is 75% (between 25th -50th percentile of all PA Counties), this is lower than the state value of 81.1% and the HP 2020 value of 81.9% was not met. When examining maternal age, mothers 15 to 17 breastfeed the least (57.9%) while mothers 35 to 39 breastfeed the most (80.8%). Racial disparities also existed with 89.2% of those self-identifying as Asian or Pacific islander having the highest percent breast feeding and those who self-identifying as Black having the lowest (60.5%).

The percent of mothers who did not smoke during pregnancy in Westmoreland County in 2016 was 84.3%. This is not meet the HP 2020 target value of 98.6% and is lower than both the PA and national percentages. Those who self-identified as Asian or Pacific Islander had the highest non-smoking rate in the county (97.3%) and the lowest rates were seen in those who identified with multiple races (73.4%).

The percent of mothers who received early prenatal care (81.3%) was in the highest 50th percentile amongst all PA counties and higher than both national and PA values. This meets the HP 2020 Target of 77.9%.

Women's Health:

The expected life expectancy for women living in Westmoreland County is 81.1 years old. This is about the same as the PA value and slightly lower than the national value. Breast (133.5 cases per 100,000) and cervical (7.9 cases per 100,000) cancer incidence rates are higher for women in Westmoreland county than PA and national values. Cervical incidence rates do not meet the HP 2020 Target.

Excelsa Health

Community Health Needs Assessment

2019

Adults with Disability:

Of adults 65 + in Westmoreland county, 33.2% report having a disability. This value is lower than both the PA and national values. Disabilities are seen more in adults over the age on 75 (47.2%) as well as in those who identify as Black or African American (45%). Primary disabilities include hearing difficulties (15.3%), self-care difficulties (7.1%), vision difficulties (5.5%), and independent living difficulties (12.6%).

Alzheimer's disease or Dementia affects 10.7% of those in the Medicare population. This value is higher than the PA and national values and falls within the lower 25 percentile in both PA and US counties. Rates of Alzheimer's disease and Dementia are higher in those 65 + (12.7%).

Weight Obesity:

Obesity is continuing to be a concern in Westmoreland County. HP 2020 targets for obesity in adults (30.5%), children (15.7%), and teens (16.1%) have not been met. The percentages of individuals in the county that are overweight or obese are greater than or equal to state values for all age categories. The adult obesity percentage (67%) ranks around the 50th percentile and only slightly above the PA value, and remaining consistent since prior measurement. 17.8 % of children grades K-6 are identified as being obese, and 33.2% overweight. 19.7 % and 38.4% of teens are identified has being obese or overweight in the county, respectively.

Substance abuse:

Lifestyle habits contribute to many disease outcomes. In Westmoreland County, 18 % of adults report binge drinking, this meets the HP 2020 Target of 24.2%. 19% of individuals smoke, which is larger than PA and national values. This did not meet the HP 2020 Target.

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Drug abuse and its related problems are among society's most pervasive health and social concerns. Deaths due to drug use occur with both legal and illegal drugs as well as from medically prescribed drugs. The age-adjusted death rate due to drug use in Westmoreland County during the measurement period from 2014-2016 is 47.6 deaths per 100,000. This value is in the worst 25% of all counties and higher than the state rate (29.2 per 100,000) and national value (17.9 per 100,000). The target HP 2020 value of 11.3 has not been met. A gender disparity exists for this indicator as the age-adjusted death rate is higher in males (59 deaths per 100,000) than females (35.8 deaths per 100,000).

Wellness and Lifestyle:

In Westmoreland County, 10.1% of individuals express frequent physical distress and 35.5% of adults indicate insufficient sleep. These values are both significantly lower than PA and national values. Life expectancies for both genders fall within the upper 50th percentile for the state. Females life expectancy is greater than the males (91.1 v. 76.6 years). Both of these values fall below the national value.

Non-Health Related Outcomes:

Prevention & Safety Falling:

The age-adjusted death rate due to falls in Westmoreland County during the measurement period from 2014-2016 is 14.1 deaths per 100,000 people (in the worst 25% of PA Counties), which is higher than the state rate of 8.4 deaths per 100,000, and does not meet the HP 2020 target of 7.2. Rates of death due to falls is higher in males (18 deaths per 100,000) than females (11.1 deaths per 100,000).

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The age-adjusted death rate due to firearms in Westmoreland County is 12.5 deaths per 100,000. This is in the 25th-50th percentile amongst all PA counties and is above the average rate in PA and is significantly higher in males (21 deaths per 100,000) than females (4.5 deaths per 100,000). This value does not meet the HP 2020 target of 9.3.

Adjusted death rates due to unintentional poisonings in the county is 45.1 deaths per 100,000. This value is significantly higher than PA and national values and much higher in males (57.3 deaths per 100,000) than females (32.5 deaths per 100,000).

Motor Vehicle Collisions:

Overall, there were 12.1 per 100,000 people killed by motor vehicle collisions in 2016. A disparity can be seen between gender with males having higher rates (18.8 deaths per 100,000) than females (8.1 deaths per 100,000). This value is higher than that of the state and shows a slight decrease since previous measurements.

Violent Crimes:

Violent crimes include murder and non-negligent manslaughter, forcible rape, robbery, and aggravated assault. Westmoreland County's violent crime rate was 169.6 crimes per 100,000 people, which PA (315.6 crimes per 100,000) and national (383.3 crimes per 100,000) values.

Violent crime has a negative effect on the community by reducing productivity, reducing property values and disrupting social services. Westmoreland County's violent crime rate is below the U.S average and is much lower than the surrounding counties of Allegheny and Indiana.

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Alcohol-Impaired Driving:

35.6% of all of Westmoreland County's deaths resulting from motor vehicle crashes during the years of 2012-2016 involved alcohol-impaired driving, which was higher than the PA and national values. There has been a subtle but steady decrease in alcohol-impaired driving deaths in Westmoreland County. The incidences decreased from 37.7% in the year's 2008-2012 to 35.6% from 2012-2016.

Child Abuse Rate:

The number of incidents of abuse or neglect is 12.3 cases per 1,000 children in Westmoreland county. This looks at children younger than 18 years of age, which may include multiple incidents of abuse per child victim during the time period, and includes reported incidents of suspected child abuse through the Childline and Abuse Registry. It does not include General Protective Service reports, which include less severe general neglect reports. This is a significant increase from previously reported values of 8.3 cases per 1000 children. Westmoreland county falls below the PA value in child abuse rate.

Food Insecurity Rate:

The food security value for the county is 11.1%. This indicates the percentage of the population that experienced food insecurity at some point during the year. This economic and social indicator of the health of a community. The U.S. Department of Agriculture (USDA) defines food insecurity as limited or uncertain availability of nutritionally adequate foods or uncertain ability to acquire these foods in socially acceptable ways. Food insecurity is associated with chronic health problems in adults including diabetes, heart disease, high blood pressure, hyperlipidemia, obesity, and mental health issues including major depression and is usually associated with poverty and unemployment.

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Built Environment:

Proximity to exercise opportunities is associated with increased physical activity and improved health outcomes. 57% of individuals in Westmoreland county live within walking distance of park or recreational facility. This is expectantly lower to that of PA and National values due to the rural nature of the area.

Access to grocery stores also may have correlations with health outcomes.

The food environment index combines measures of food access: the percentage of the population that is low-income and has low access to a grocery store, and the percentage of the population that did not have access to a reliable source of food during the past year to create a numeric score ranging from 0 (worst) to 10 (best). The Food Environment Index score in Westmoreland county is an 8.0. This is lower than the PA value but above the national average.

Demographics:

Population:

Westmoreland County's population saw a total decrease of 2161 residents between in 2017 from previous measurements. Westmoreland County has a lower percentage of persons under 5 years and a lower percentage of persons less than 18 years than PA and National values but a higher proportion of the population over the age of 65 (22.1%). The county also has a veteran population (9.5%) that is higher than both PA and National values. It appears that Westmoreland County's population is becoming increasingly older. Although there is no data about the percent of middle-aged residents in Westmoreland County and Pa, it is reasonable to conclude that less young couples are choosing to stay in Westmoreland County, and therefore there are less children being raised there.

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Racial Demographics:

Westmoreland County has a larger percentage of white persons alone, including Hispanics and Latinos who are white, at 94.9% as compared to Pennsylvania at 82.1%. Of those who are white, excluding Hispanics or Latinos, Westmoreland County is at 93.9% and PA is at 76.5%. Hispanics and Latinos account for a very small amount of those who identify as white alone. Westmoreland County has a significantly smaller percentage of Black or African American persons alone (reporting only one race) at 2.5% as compared to Pennsylvania at 11.9% and a significantly lower percentage of Asian and Hispanic/Latino populations (1.0% and 1.2%, respectively) as compared to PA (3.6% and 7.3%, respectively). In addition, Westmoreland County is 0.1% American Indian and Alaska Native alone; whereas, in PA, this group accounts for 0.4% of the population. The percent of racial minorities in Westmoreland County's is noticeably smaller than in PA, which suggests that the county has a lack of diversity. Considering that Westmoreland County has an even smaller percent than PA of whites alone, not Hispanic or Latino, it seems even clearer that Westmoreland County is disproportionately white.

Foreign-born Persons:

The percentage of foreign-born persons from 2011 to 2015 in Westmoreland County was 1.5%, as compared to 6.3% in PA. Westmoreland County appears to have a lack of diversity, specifically in regards to foreign-born persons compared to the National average.

Households:

The homeownership rate in Westmoreland County (69.3%) is larger than that in PA (61.1%) and nationally with median house values of \$144,900. Westmoreland County has a lot of suburbs and rural areas, and the totality of PA includes many cities where people are more likely to rent. In Westmoreland county 6.9% of families live below poverty level.

Excelsa Health

Community Health Needs Assessment

2019

This is below the PA and National values. Of all people living below poverty, age and racial disparities exist. There is a significantly higher percentage of poverty seen in those younger than 44 as well as in those who self-identified as Black or African American or Two or more races.

The average household size for Westmoreland county is 2.3 persons per household, this is slightly lower than the PA and National values of 2.5 and 2.6 persons respectively, but has remained consistent over the past 10 years. The amount of single parent households (27.2%) has remained consistent from previous values and are below values for PA and nationally.

Housing affordability & supply:

In Westmoreland county, 42.7% of individuals spend 30% or more of their household income on rent. This is in the upper 50th percentile of PA and national counties but falls below the PA and national values. Amongst these individuals those who are 65 years or older have a much higher proportion of their population spending 30% or more on rent (49.5%).

Income:

The overall median income of the county is \$56,702. This income is in the upper 50th percentile amongst all PA and national counties but falls below the values for the state and nationally. Of the seven race and ethnicity groups, only those who self-identified as White (\$57,582) and Asian (\$113,413) median scores were higher than the Westmoreland county value. Those who self-identified as Black or African American, Hispanic, or Two or more races made significantly less than the median for the County. When compared to the median income, the overall per capita income for the county (\$31,827) by race/ethnicity is distributed in an identical manner.

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Poverty:

The percent of children living below the poverty level in Westmoreland county is 14.3%. The percentage of children between the ages of 12-17 have significantly lower rates than the other age categories (11.6%). There is no significant gender; however, racial disparities are present. The largest groups of children living below poverty in the county are those who self-identified as Black or African American (45.7%) and two or more races (43%). Significantly lower poverty levels are observed in self-identified Asian (1.7%) and White (12.2%) populations.

Education:

In Westmoreland county 93.6% of individuals over the age of 25 have a high school degree or higher. This is higher than both state and national averages and places the county in the top percentiles in the state for high school graduates or higher. 28% of individuals living in Westmoreland county obtain a Bachelor's degree or higher. Individuals 65+ have the lowest percentage of Bachelor's Degree or higher attainment (19.6%). Those ages 45-64 (27.2%), 35-44 (38.7%), and 25-34 (35.8%). This value is lower than both the PA and national values. Racial disparities are observed for individuals 25+ with at least a Bachelor's Degree. The percent of individuals with degrees are highest in the Asian population (66.1%) and lowest for those who identified as American Indian (15.8%), Black or African American (13.8%), and Hispanic or Latino (22%).

Mean Travel Time to work:

Mean travel time in Westmoreland county is 26.3 minutes, which is lower than both PA and national levels. Males have a significantly longer average commute (28.4 minutes) than females (24.0 minutes). The majority of individuals drive to work alone (84.5%) which is higher than both PA and national values. The smallest incidence of driving alone is amongst those 16-19 years old (67.8%) and minority groups: American Indian (36%), Black or African American (68.1%), Hispanic or Latino (61.4 %), Others (63.3%). Overall, only 2.3% of workers walk to work. As might be expected, the largest incidence in walking to work are those individuals aged 16-19 (8.2%) with the smallest being those 45-54 (1.4%).

Excelsa Health Community Health Needs Assessment 2019

Racial trends are also observed with minority groups being more likely to use alternative modes of transit to get to their places of employment. Public transportation in the county is not heavily utilized (1.1%) which does not meet the HP 2020 target of 5.5%. Walkers only compose of 2.3% of the population. This does not meet the HP 2020 Target of 3.1%. Lengthy commutes cut into workers' free time and can contribute to health problems such as headaches, anxiety, and increased blood pressure. Longer commutes require workers to consume more fuel, which is both expensive for workers and damaging to the environment.

Economic Outcomes:

Unemployed Workers in Civilian Labor Force:

In Westmoreland county, 60.9 % of those 16 and older are in the civilian labor force. This value is lower than PA and national values but ranks in the top 50th percentile for all PA and national counties. Westmoreland county has 126,336 paid employees which reflects a total employment change of 2.1% from 2014-2015. This change is larger than the average in PA but less than the change percent's seen nationally.

Businesses:

Westmoreland county consists of 8,675 employer establishments consisting of 27,796 hiring firms. These companies are largely owned by males (59.7%), Non-minority (93.5%), and Nonveterans (84.1%).

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Households with Cash Public Assistance:

The median percentage of households receiving public assistance in Westmoreland County is 2.7%, which is slightly higher than the national average of 2.6%. This percentage ranks amongst the 50-75th percentile amongst all counties nationally, based on American Community Survey measurements from 2013-2017. Although a relatively small percent receives cash public assistance, 34.1% of students are eligible for the free lunch program. This value is significantly lower than PA and national values.

Excela Health CHNA 2018-2020: Ranking of Secondary Data Indicators using HCI, Conduent Platform Data

The table below shows grouped indicators of community health issues by theme so that a comparison of Westmoreland County, Commonwealth of PA, and US National level data can be made. Scores of orange and yellow indicate places where Westmoreland County is underperforming, while scores of green indicate areas where Westmoreland County is exceling relative to other places. These data, in combination with community perceptions obtained via interview, focus group, and survey with county patients, residents, and stakeholders allowed for the developed of the Excela Health CHNA Implementation Plan for 2019-2021.

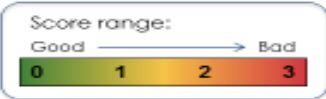
Excelsa Health Community Health Needs Assessment 2019

Indicator Scoring

Indicators

Each indicator is given a score based on the scores of its comparisons

Comparison	Score
US County Distribution	1
IN County Distribution	2
US Value	2
IN Value	2
HP2020 Target	3
Trend	3
Indicator Score	2.1



Community Health Solutions

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Community Health Needs Assessment
2019**

Topic	Indicators	Score
Substance Abuse	4	2.31
Prevention & Safety	6	2.10
Transportation	7	1.83
Mortality Data	19	1.80
Women's Health	4	1.75
Public Safety	5	1.68
Exercise, Nutrition, & Weight	20	1.66
Mental Health & Mental Disorders	5	1.64
Cancer	13	1.57
Environment	17	1.57
Children's Health	9	1.53
Environmental & Occupational Health	4	1.53
Immunizations & Infectious Diseases	6	1.35
Respiratory Diseases	7	1.35

**Excela Health
Community Health Needs Assessment
2019**

Older Adults & Aging	18	1.30
Maternal, Fetal & Infant Health	7	1.25
Heart Disease & Stroke	8	1.22
Diabetes	3	1.21
Wellness & Lifestyle	4	1.19
Teen & Adolescent Health	3	1.18
Access to Health Services	7	1.17
Other Chronic Diseases	3	1.13
Economy	27	1.05
Education	4	1.04
Men's Health	3	0.94
Social Environment	19	0.94

Excelsa Health Community Health Needs Assessment 2019

Excelsa Health Proposed CHNA Implementation Action Plan

As part of the *Patient Protection and Affordable Care Act of 2010*, non-profit hospitals, such as Excelsa Health, are required to complete a Community Health Needs Assessment (CHNA) survey every three years. Based on the survey, results are studied and a plan is put into place to attend to those identified needs with the goal of improving community health by meshing health system planning with public health and community planning. The first CHNA implementation plan was established in 2013.

In 2016, Excelsa Health launched their second CHNA implementation plan, using the data submitted through employee and public surveys and the secondary statistics analysis compiled by University of Pittsburgh's Center for Applied Research. The implementation plan spans a three-year period in which Excelsa Health and their strategic community partners identify and address socioeconomic and health and wellness issues affecting residents of Westmoreland County. By targeting specific issues, the CHNA steering committee is better equipped to evaluate their organizational and community resources, align those resources with the county's strategic goals, and apply those resources in the form of educational and preventative programs and initiatives.

After reviewing the primary and secondary data results and identifying and prioritizing the three most prevalent issues in Westmoreland County, the CHNA steering committee has prepared the implementation action plan for 2019-2021. The top three issues that were selected were as follows: Opioid/Substance Abuse, Obesity and Prevention and Wellness. The 2019-2021 implementation plan includes detailed goals and objectives for each of the elected key issues.

1. Opioid/Substance Abuse

GOAL: To reduce the number of drug overdoses in Westmoreland County through education, prevention, partnerships and treatments.

OVERVIEW: The 2016 CHNA implementation plan that focused on drug overdose deaths in Westmoreland County and programs/activities that Excelsa Health and the Westmoreland County Drug Overdose Task Force put into place are in part responsible for a decrease in the number of drug overdose deaths. Overdose deaths in Westmoreland County for 2019 are on pace to fall short of 100 for the first time since 2014, according to Coroner Ken Bacha's office. (Tribune Review, 2019) Overdose deaths drastically fell by 37% from a record 193 in 2017 to 122 in 2018, and the number of deaths recorded in the first four months of 2019 have dropped another 21% compared to the same period in 2018. (Tribune Review, 2019)

- The age-adjusted death rate due to drug use in Westmoreland County during the 2014-2016 period is 47.6 deaths per 100,000, which is higher than the state rate of 29.2 and the national rate, 17.9. (PA DOH, 2018)

Excelsa Health Community Health Needs Assessment 2019

- In 2018, there were a total of 122 drug overdose deaths in Westmoreland County. Fentanyl related overdoses decreased 40% from 2017. Prescription opioid related overdoses decreased 28% from 2017. (Westmoreland County Government Website, 2019)
- As of June 3, 2019, 24 drug overdoses have been confirmed in Westmoreland County – seven deaths involved opioids and 17 deaths involved heroin. Cause of death was the result of a combination of multiple drugs found in the decedents' toxicology reports. (Westmoreland County Government Website, 2019)
- Costs due to drug overdose deaths in Westmoreland County came in under \$1 million in 2018. (Tribune Review, 2019)

Objective	Action	Measures	Partners
1. Provide community education to increase public awareness of the risks of prescription drug usage, safe use/storage and disposal and available resources for help.	Excelsa Health will provide educational resources/handouts at health fairs/senior expos/other related events that touch on prescription drug use/storage/disposal. Host business symposium in 2020 on drug epidemic update in Westmoreland County	Participation Outcomes Annually: 1. Number of attendees at community outreach events 2. Number of attendees at 2020 business symposium	1. Excelsa Health Marketing & Communications Department, and other EH service lines 2. Westmoreland County Drug Overdose Task Force

2016 – 2018 Accomplishments: Excelsa Health participated in seven opioid/substance abuse awareness/prevention events between fiscal years 2016 and 2018 and there were a total of 694 individuals who attended/participated in these events. Of those seven events, two business symposiums were held in 2016 and 2017, one on Substance Abuse in the Workplace and the other on the Employer’s Guide to Keeping Drug Testing Standards High and Health Care Costs Low. 335 people were in attendance for the symposiums, which is reflected in the total number of individuals who participated in drug-related education events featured above. In 2018, Excelsa Health created a high-quality, documentary-style video in partnership with Norwin School District to raise awareness about the public health epidemic of opioid addictions. Aimed at student-athletes, the video features footage of Norwin student-athletes and interviews with Norwin coaches, principals, and administrators, as well as Excelsa Health’s Dr. Scott Berry and North Huntingdon Police Department Acting Chief Rod Mahinske. Ms. Abbey Zorzi, a Norwin graduate and former student-athlete, bravely shares her personal story of recovery in the video. This video was used as a training resource at a conference presentation given by a Norwin High School administrator and is posted on the Norwin High School public website: <https://www.norwinsd.org/apps/video/watch.jsp?v=187925> (Norwin High School District Public Website, 2019)

Excelsa Health Community Health Needs Assessment 2019

Another awareness/education opportunity provided to the public was the implementation of the “*MedSafe Drug Disposal*” program. A media press conference was held in April 2018 to announce the installment of drug disposal units in Westmoreland and Latrobe Hospitals, where the community could safely dispose unwanted or unused prescription medications.

2019 – 2021 Future State Plans: The Excelsa Health Marketing & Communications Department will continue to promote education and resources surrounding public awareness of prescription drug use/misuse and proper drug storage/disposal methods at upcoming health fairs, senior expos and other related community outreach events. Additionally, the Excelsa Health Marketing and Communications Department, along with other supporting Excelsa Health service lines and the Westmoreland County Drug Overdose Task Force, plans to host a business symposium on the drug epidemic update in Westmoreland County. The symposium will be held in 2020. Excelsa Health will continue to monitor the efforts of the “*MedSafe Drug Disposal*” program.

Objective	Action	Measures	Partners
<p>2. Educate and train health care professionals on best practice guidelines for safe prescribing and identifying prescription drug misuse through screenings.</p>	<p>Continue the Physician to Physician Prescribing Practice program for all Excelsa Health physicians and physician extenders.</p> <p>Offer additional CME sessions (2 hours of education) to provide more education opportunities for physicians to meet licensure requirements</p>	<p><u>Participation Outcomes</u> <u>Annually:</u></p> <p>1. Number of sessions held</p> <p>2. Number of physicians that meet requirements of licensure</p>	<p>1. Frick Hospital Medical Staff Office</p> <p>2. Latrobe Hospital Medical Staff Office</p> <p>3. Westmoreland Hospital Medical Staff Office</p> <p>4. Excelsa Health Behavioral Health Department</p> <p>5. Physician to Physician Prescribing Program</p>

2016 – 2018 Accomplishments: The “*Physician to Physician Prescribing Practice*” program originated in 2014 and is available to Excelsa Health physicians and physician extenders to learn best practices for safe prescribing of medications and identifying drug abuse through screenings. In 2017, Excelsa Health formed an internal taskforce comprised of 18 clinicians to address prescription drug misuse among patients and discuss and resolve the barriers and gaps related to limited opioid prescription access (or lack thereof) within Excelsa Emergency Departments and EHMG physician practices.

Excelsa Health Community Health Needs Assessment 2019

A series of continuing medical education seminars were established to drive conversation regarding these obstacles and implementation of solutions, and the taskforce team members were required to attend and participate in at least three (3) of those sessions. From 2016-2018, 13 seminars were completed as part of the program's initiative. Allied health professionals, physician assistants and nurses were encouraged and invited to attend and participate in these sessions as well. Approximately 555 health care professionals participated in the series from 2016-2018.

2019 – 2021 Future State Plans: The program will continue to offer physicians the opportunity to earn additional CME seminars. Physicians will be able to complete these sessions and pursue achievement of licensure by meeting the necessary requirements.

Objective	Action	Measures	Partners
<p>3. Provide timely access to the continuum of care for individuals addicted to prescription drugs</p>	<p>Continue participation in the Mobile Case Manager program in conjunction with the Westmoreland County Drug & Alcohol Commission (WeDAC):</p> <ul style="list-style-type: none"> - Expand services to Frick and Latrobe Hospital Emergency Departments - Embed WEDAC employees into Westmoreland Hospital Crisis Center and Emergency Department - Train Westmoreland Hospital Medical Case 	<p><u>Participation Outcomes:</u></p> <ol style="list-style-type: none"> 1. Report on number of individuals referred to Mobile Case Manager Program 2. Report on number of admissions to Gateway Rehabilitation inpatient program <p><u>Health Outcomes:</u></p> <ol style="list-style-type: none"> 1. Number of referred patients accepting D&A treatment 	<ol style="list-style-type: none"> 1. WeDAC Mobile Case Management Program 2. Westmoreland Hospital Crisis Center 3. Westmoreland Hospital Medical Case Management 4. Westmoreland Hospital Hospitalists 5. Frick Hospital Emergency Department 6. Latrobe Hospital Emergency Department 7. Gateway Rehabilitation Center – Frick Hospital 8. Westmoreland County Drug Overdose Task Force

Excelsa Health Community Health Needs Assessment 2019

	Managers on program and develop order sets for Hospitalist staff		
	Partner with community centers to promote drug and alcohol rehabilitation programs in Westmoreland County		

2016 – 2018 Accomplishments: The “*Mobile Case Manager*” program, in partnership with the Westmoreland Drug and Alcohol Commission, started in 2016 with one Drug and Alcohol case manager working daylight hours. The program expanded in 2016-2017 to include 24/7 access to treatment. Reinvestment (health choices) dollars were utilized to increase staffing to include two dedicated overnight positions (full time) and two daylight positions in 2016-2017. In 2017-2018 the program further expanded to include weekend coverage at Westmoreland Hospital and onsite coverage for all three hospitals in the Excelsa Health system. Beginning in 2017, staff training was initiated for acute nursing staff, ED staff, and clinical resource managers on the “Warm Hand-Off” process. This year, the Drug and Alcohol (D&A) Case Management Unit was added to Quartet referral system enabling primary care physicians and specialists the ability to make direct referrals to Drug and Alcohol Case Management. Additionally, the program is being integrated into the Cerner electronic medical record system.

To summarize, there have been 700 total D&A assessments/screenings completed since June 2014 (this does not include referrals, only completed assessments). Seventy-six percent of those individuals were referred to drug and alcohol treatment. Sixty-one percent of those individuals attended the recommended level of care and 42% successfully completed. Excelsa Health proudly partnered with **Gateway Rehabilitation** in October 2016 to open an inpatient drug and alcohol rehabilitation program at Frick Hospital, offering residential treatment to the community. The facility, funded by \$400,000, started with 16 inpatient beds and has expanded to 35 inpatient beds in 2018, doubling in size. Ten of the inpatient beds are utilized for detoxification and the remaining beds are used for rehabilitation purposes.

2019 – 2021 Future State Plans: Excelsa Health will continue to monitor drug overdose treatments/death rates for 2019-2021. Excelsa Health Emergency Departments have worked closely with mental health and drug and alcohol teams to create a comprehensive program to identify substance abuse disorder patients and fit them with the proper follow-up. A medicated assisted treatment plan has been developed to aid patients with opioid addiction and fit them into immediate detox or outpatient detox within 24 hours. Partnerships with local detox centers (with drug and alcohol's help) assure immediate follow-up for most at-risk patients.

Excelsa Health Community Health Needs Assessment 2019

Excelsa Health continues to provide home Narcan for patients and family use if needed, and continues to partner with EMS to assist them with programs matching at-risk patients with services in the community who refuse transport to the hospital after EMS interacts with them. Excelsa Health has provided speakers for several local school districts for parent and student education in partnership with local law enforcement, the Westmoreland Drug and Alcohol Commission, and others regarding substance abuse, and, most recently, teen vaping trends.

Objective	Action	Measures	Partners
4. Increase data collection and information sharing across organizations to enhance data driven practices and support funding requests	Provide Excelsa Health data to the Westmoreland County Drug Overdose Task Force: <ul style="list-style-type: none"> • Number of drug overdoses treated • Number of drug overdose deaths • Number of babies born addicted to drugs • Demographics of above populations 	<u>Health Outcomes:</u> <ol style="list-style-type: none"> 1. Reports to Westmoreland County Drug Overdose Task Force on: <ol style="list-style-type: none"> a. Number of drug overdoses treated b. Number of drug overdose deaths c. Number of babies born addicted to drugs d. Demographics of above populations 	<ol style="list-style-type: none"> 1. Westmoreland County Drug Overdose Task Force 2. Frick Hospital Emergency Department 3. Latrobe Hospital Emergency Department 4. Westmoreland Hospital Emergency Department 5. Westmoreland Hospital Maternity Department

2016 – 2018 Accomplishments: Data regarding drug overdose treatments and deaths have been reported through the Westmoreland County Drug Task Force. In 2016, there were 377 drug overdoses treated within Excelsa Health Emergency Departments. In 2017, 373 drug overdoses were treated. In 2018, the number of drug overdoses treated experienced a significant decline: 160 treated. Overdose deaths totaled 174 in 2016, 193 in 2017 and 122 in 2018. (Westmoreland County Government Website, 2019) From 2016-2018, there were 67 babies born at Westmoreland Hospital that were addicted to drugs.

Excelsa Health Community Health Needs Assessment 2019

2019 – 2021 Future State Plans: Excelsa Health will continue to monitor drug overdose treatments/death rates and the number of babies born addicted to drugs for 2019-2021.

2. Obesity

GOAL: Reduce overweight and obesity through screening, education, healthy eating and physical activity initiatives. These initiatives will be conducted through partnerships with primary care physicians, employers, school districts and community organizations. A focus on Type II diabetes education, intervention and prevention will be included as part of the goal, since obesity-related medical conditions include diseases such as Type II diabetes. (CDC, 2018)

NOTE: Excelsa Health includes three acute care hospitals; Excelsa Westmoreland, Excelsa Latrobe and Excelsa Frick Hospitals. The CHNA initiatives related to each of these three hospital service areas have been identified in this implementation plan. Other initiatives will be supported system wide and will be implemented to improve community health in all three Excelsa Health hospital service areas.

OVERVIEW: Partnerships with Primary Care, Excelsa Health Diabetes Team and District 14-E Lions Club

- In a study from 2015-2017, 67% of adults were considered overweight or obese in Westmoreland County – slightly higher than 66% for the state of Pennsylvania. The Westmoreland County rate has statistically remained unchanged over the last measurement period from 2014-2016. (PA DOH, 2018)
- Obesity-related medical conditions include Type II diabetes, heart disease, stroke, and certain types of cancer, some of the leading causes of preventable deaths. (CDC, 2018)
- Medical costs and lost work and wages for people with diagnosed diabetes total \$327 billion yearly. (CDC, 2018)
- Medical costs for people with diabetes are twice as high as for people who don't have diabetes. (CDC, 2018)
- In the last 20 years, the number of adults diagnosed with diabetes has more than tripled as the American population has aged and become more overweight or obese. (CDC, 2018)
- Diabetes is the seventh leading cause of death in the United States (and may be underreported). (CDC, 2018)
- Adults with diabetes in Westmoreland County make up 12% of the total population. Pennsylvania's adult diabetes population has a rate of 11%. (PA DOH, 2018)
- The majority of adults living with diabetes in Westmoreland County are age 65 and older. The diabetes rate is significantly higher in men than in women. (PA DOH, 2018)
- In 2016, the age-adjusted death rate for diabetes in Westmoreland County rose to 20.3 deaths per 100,000 individuals, an increase from 18.4 deaths in 2015. (PA DOH, 2018)

Excelsa Health Community Health Needs Assessment 2019

Objective	Action	Measures	Partners
<p>1. Improve diabetes care for patients with Type II diabetes being managed by the Excelsa Health Medical Group primary care physicians</p>	<p>Continue to monitor the AMGA Together to Goal program in all EHMG primary care offices</p>	<p><u>Participation Outcomes:</u></p> <p>1. Number of primary care offices participating in the Together to Goal program</p> <p><u>Health Outcomes:</u></p> <p>1. Percent of patients receiving statin therapy</p> <p>2. Percent of patients with an HbA1c < 8.0%</p> <p>3. Percent of patients with a blood pressure > 140/90</p> <p>4. Percent of patient's having a nephrology screening</p> <p>5. Percent of patients meeting all of the above four goals</p>	<p>1. Excelsa Health Medical Group primary care offices</p> <p>2. American Medical Group Association</p>

Excelsa Health Community Health Needs Assessment 2019

2016 – 2018 Accomplishments: In 2016 the American Medical Group Association (AMGA) launched the national “*Together to Goal*” program for people with Type II diabetes. This three-year program challenges leading healthcare organizations to work together to transform diabetes care for one million people with Type II diabetes by 2019 and set them on a better path to live longer, healthier lives.

Evidenced-based practices derived from the AMGA’s Best Practices in Managing Diabetes Collaborative will guide participating medical groups and health systems in improving care for people with Type II diabetes. Approximately 28 Excelsa Health primary care offices participated in this initiative beginning 2015-2016. Below is a chart with the results of the program to date and includes the percentage of patients receiving services from 2015-2016 and 2017-2018 and percentage of patients meeting all four goals for 2018 ranking.

	Measure	Excelsa		2018 Ranking
		2015/2016	2017/2018	--
AMGA Together-2-Goal	Nephropathy Attn.	92.0%	94.1%	10/88
	Lipid Management	76.6%	86.3%	6/88
	BP Control	68.2%	74.1%	54/88
	HbA1c Control	66.9%	66.7%	65/88
	Diabetes Care Bundle	36.0%	43.5%	19/88

2019 – 2021 Future State Plans: Excelsa Health plans to continue monitoring the outcomes from the AMGA “*Together to Goal*” program through 2020.

Excelsa Health Community Health Needs Assessment 2019

Objective	Action	Measures	Partners
2. Improve diabetes care for patients with Type II diabetes through the efforts of the Excelsa Health Diabetes Team	<p>Increase the number of diabetes education/prevention workshops & events available to the community</p> <p>Have representation from the Diabetes Team at community events, such as health fairs, senior expos, etc.</p>	<p><u>Participation Outcomes Annually:</u></p> <p>1. Number of workshops/events held in a year</p> <p>2. Number of attendees per workshop/event held</p> <p>3. Number of community outreach events where the Diabetes Team represented</p> <p>4. Number of attendees per outreach event with Diabetes Team representation</p>	<p>1. Excelsa Health Marketing & Communications</p> <p>2. Excelsa Health Diabetes Team</p>

2016 – 2018 Accomplishments: The **Excelsa Health Diabetes Team** assists with the needs of Westmoreland County’s diabetic population, about 12% of the total county population. (PA DOH, 2018) In fiscal year 2016, a total of 3,764 people were educated as a result of the diabetes education workshops and programs provided to the community. In fiscal year 2017, there were a total of 2,496 people and in fiscal year 2018, there were 1,721 people. The number of diabetes workshops held each year amount to 36 sessions. Education consisted of outpatient education services, medical nutrition therapy and personal care home sessions.

Additionally, the Diabetes Team represented at multiple community health fairs and senior expos from fiscal years 2016-2018, 26 events with approximately 7,800 lives touched.

Excelsa Health Community Health Needs Assessment 2019

2019 – 2021 Future State Plans: Excelsa Health, in conjunction with the Diabetes Team, will offer opportunities for the residents of Westmoreland County to receive diabetes care and education through community events and resources in 2019-2021.

Objective	Action	Measures	Partners
3. Provide diabetes education and resources for patients in Westmoreland County with Type II diabetes through partnership with the District 14-E Lions Club	Host diabetes education classes and workshops available to people with Type II diabetes, funded by grants through partnership with Lions Club	<u>Participation Outcomes Annually:</u> 1. Number of diabetes education classes/workshops funded through the Lions Club 2. Number of attendees per class/workshop funded through the Lions Club	1. Excelsa Health Marketing & Communications 2. Excelsa Health Diabetes Team 3. District 14-E Lions Club

2016 – 2018 Accomplishments: Excelsa Health developed a partnership with the **District 14-E Lions Club** in 2018. Excelsa Health also participated in the Lions Club senior health fairs throughout Westmoreland County.

2019 – 2021 Future State Plans: In 2019, Excelsa Health received a small grant to fund a diabetes education workshop. This workshop invited individuals who have Type II diabetes to learn about how to manage their blood sugar levels and maintain a low-carbohydrate diet through proper meal planning. Additional workshops/events may be held in 2019-2021.

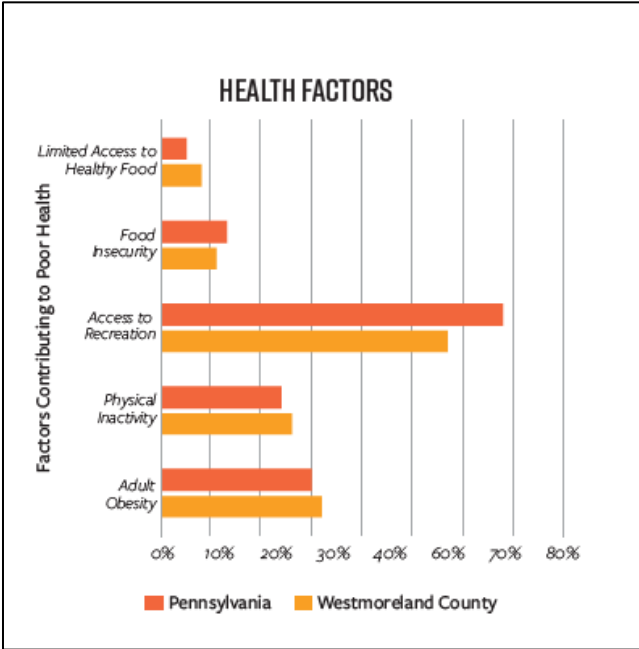
OVERVIEW: Partnerships with Schools/Community Organizations

- In a 2016-2017 study, 32.6% of children in grades K-6 in Westmoreland County were considered overweight or obese. This is a slight increase from the state level of 31.9%. (PA DOH, 2019)
- The overweight/obesity rate for teenagers in Westmoreland County for 2016-2017 was reported to be lower than previous year’s statistics, moving from 38.4% in 2015-2016 to 36.5% for the current measurement period. However, the rate for the current period is somewhat higher than the state rate of 35.5%. (PA DOH, 2019)

Excela Health Community Health Needs Assessment 2019

- In 2016-2017, the percentage of children in grades K-12 in Westmoreland County who have Type II diabetes was 0.06%, a slight decline from 0.07% in 2015-2016. (PA DOH, 2019)

Factors Contributing to Poor Health in Adults (Reimagining Our Westmoreland, 2018)



Regular physical activity in childhood and adolescence improves strength and endurance, helps build healthy bones and muscles, helps control weight, reduces anxiety and stress, increases self-esteem, and may improve blood pressure and cholesterol levels (CDC, 2018).

Excelsa Health Community Health Needs Assessment 2019

Objective	Action	Measures	Partners
<p>1. Continue partnership with schools and community groups to provide health education</p>	<p>Continue to provide “Healthy Habits” program to Westmoreland County students as well as local community groups</p> <p>Continue to provide education information and resources/risk assessments related to obesity/diabetes at community events</p>	<p><u>Participation Outcomes:</u> <u>Annually:</u></p> <ol style="list-style-type: none"> 1. Number of school districts participating 2. Number of children educated 3. Number of community events attended 4. Number of lives touched from attended community events <p><u>Health Outcomes</u> <u>Annually:</u></p> <ol style="list-style-type: none"> 1. Percent increase post education knowledge scores 2. Percent reporting at least one healthy behavior change post education 	<ol style="list-style-type: none"> 1. Westmoreland County school districts 2. Westmoreland County community/civic groups 3. Excelsa Health Marketing & Communications Department – provide Registered Dietitian 4. Westmoreland/Frick Hospital Foundation 5. Latrobe Hospital Foundation

2016 – 2018 Accomplishments: For approximately 19 years, Excelsa Health has provided education to area high school classes on the signs and symptoms of heart attack and stroke through the “*Golden Hour*” Student Scholarship Program. In 2016, there were 12 area school districts and a total of 914 students who were engaged in the program. There were also six community sessions held and 387 people who attended the community sessions.

Excela Health Community Health Needs Assessment 2019

From 2016-2017, the “**Healthy Habits**” nutrition series, provided to students in Westmoreland County, was offered to seven school districts, nine classrooms participated and a total of 431 students were in attendance. A pre-test is given to students before the first session to examine their current knowledge of nutrition and wellness. After completion of the program, a post-exam is given along with a behavioral goal to measure students’ application of healthy nutrition and wellness lifestyles. Average post-test knowledge score for 2016-2017 was 88% and the behavioral goal post-education was 90%, exceeding the baseline goal of 80%. From 2017-2018, the program was offered to nine school districts, 12 classrooms participated and 603 students were in attendance. Average post-test knowledge score for 2017-2018 was 85% and behavioral goal post-education was 86%, exceeding the baseline goal once again. In 2018, the “**Golden Hour**” education program was added to the school-based “**Healthy Habits**” nutrition series. The combined program effort encompasses all aspects of a healthy lifestyle, from nutrition and exercise to stroke/heart attack awareness and prevention.

2019 – 2021 Future State Plans: From 2018-2019, the program was offered to five school districts, 12 classrooms and 617 students. Average post-test knowledge score was 86% and the behavioral goal post-education was 85%, exceeding the 80% baseline goal. Excela Health will continue to sponsor the “**Healthy Habits**” program in Westmoreland County schools and in the community.

Objective	Action	Measures	Partners
<p>2. Continue promotion of health education and physical activity in the community</p>	<p>Continue to sponsor the monthly Mall Walkers program at Westmoreland Mall</p>	<p><u>Participation Outcomes:</u> <u>Annually:</u></p> <p>1. Number attending monthly programs</p> <p>2. Number of new members</p> <p>3. Number of returning members (based on survey responses)</p> <p>4. Number of blood pressures taken</p> <p>5. Number of biometric screenings completed</p>	<p>1. Excela Health Marketing & Communications Department and Outpatient Rehabilitation Department</p> <p>2. Speakers/displays provided by Excela Health medical staff and departments</p> <p>3. Blood pressures provided by volunteer RNs</p> <p>4. Food donated by community restaurants</p>

Excela Health Community Health Needs Assessment 2019

		<u>Health Outcomes</u> <u>Annually:</u> 1. Overall results of the biometric screenings	5. Health information displays provided by community agencies
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Excela Health’s “*Mall Walkers*” community outreach program continues to provide health and wellness education and recreational opportunities for residents in Westmoreland County. Now in its eighth year, Mall Walkers is making strides to improve the physical health and well-being of the program’s participants through discussions surrounding specific health conditions and treatments and general health and wellness prevention and maintenance, nutrition counseling, health screenings, and exercising opportunities. The program averages about 200-275 attendees each month. One of the many factors of the program’s success rate is based off of the number of biometric screenings completed each year and the correlation of program participation and individual wellness goals to positive improvements resulting from the screenings.

On average for 2016-2018, there were a total of 33 Mall Walkers sessions, approximately 9,000 attendees, approximately 90 new Mall Walker member registrations, and approximately 3,000 blood pressure screenings. Biometric screenings for 2017 totaled 126 screenings and, in 2018, totaled 148 screenings. Overall results did not meet desired outcomes, indicating opportunity for improvement.

2019 – 2021 Future State Plans: Excela Health plans to host Mall Walkers events in 2019-2021 and will monitor the number of biometric screenings completed, the aggregate screening report and the personal success stories from the Mall Walkers who attend and participate in the program.

The following statements regarding Excela Health’s employee wellness program and county wellness program are the outcomes from the 2016 Community Health Needs Assessment Implementation Plan, under the goal of reducing obesity.

2016 – 2018 Accomplishments: Excela Health, the largest employer in Westmoreland County, implemented an **employee wellness program** in 2005. Excela insured employees and spouses who have medical coverage have the opportunity to enroll in the program to receive medical incentives, such as lower pay period insurance deductions (4,011 people for 2017-2018, an increase from the previous 2016-2017 wellness year, 3,865 people). The point-based program options include an annual health risk assessment, biometric screening opportunities, health coaching, on-site gyms, education and exercise programs and benefit design to promote participation in the program. From October 2016 – September 2017, 3,483 (approximately 90%) people completed the wellness platform program. As of October 2017 - September 2018, 3,549 (approximately 88.4%) people fulfilled the necessary requirements to achieve completion. Insurance premiums increases have decreased resulting in a significant cost savings to the organization. Excela Health is proud to have been named a Healthiest Employer in the region for the past eight years and a Healthiest 100 Employer nationally for the past five years. Since 2016, Excela Health has also been recognized as a recipient of the Best and Brightest in Wellness awards, a showcase that “strives to recognize the most influential, trend-setting companies across the country and regionally in focused programs. (The Best and Brightest, 2019)

Excelsa Health Community Health Needs Assessment 2019

A second component to Excelsa Health wellness initiatives is the “**Worksite Wellness**” program offered to Westmoreland County government and regional employees. This initiative began with a goal to improve the health and quality of life for our community workforce. The program includes health-based services that can be suited to individual workplaces based on interests and preferences, including but not limited to: health risk assessments/screenings, wellness/health coaching, nutrition counseling, and tobacco cessation and weight management programs. In 2016, 967 county employees participated in the “**Worksite Wellness**” program, and there were 813 employees in 2017. In 2018, the number of participating employees increased to 1,069. 872 screenings were completed and 20 events were held in 2016 and 1,287 screenings were completed and 40 events were held in 2017. The aggregate biometric screening report card grade for all participants in 2016 averaged a B-, and in 2017, the same grade was given and no change occurred. In 2016, 20 mammograms were scheduled during county government screening events. In 2017, only 10 mammograms were scheduled. No program screenings or events were completed/held in 2018.

Objective	Action	Measures	Partners
3. Continue promotion of healthy, dining out meal alternatives to the community through the Dining Out program	Retain current participating restaurants and recruit additional partners for the program	<p><u>Participation Outcomes</u> <u>Annually:</u></p> <p>1. Number of restaurants involved in program</p> <p><u>Health Outcomes</u> <u>Annually:</u></p> <p>1. Number of readmits in EDs due to CHF</p>	<p>1. Excelsa Health Marketing & Communications – provide Registered Dietitian</p> <p>2. Community restaurants and eateries in Westmoreland County</p>

2016 – 2018 Accomplishments: The “**Dining Out**” program was established in 2013 as a method to educate people with congestive heart failure and the overall community, and it continues to be a vital initiative in promoting healthy, dining out food alternatives, focusing on meal choices that are “heart healthy” and contain lower sodium volumes. Excelsa Health continues to partner with local restaurants and eateries in Westmoreland County to offer specialty food items on their menu that meet dietary criteria based on guidelines and recommendations from the American Heart Association. In 2016, there were 24 participating restaurants across Westmoreland County, six of which were new restaurants added to the program. In 2017, there were 25 participating restaurants, five of which were new restaurants. In 2018, there were 25 participating restaurants, four of which were new restaurants.

Excelsa Health Community Health Needs Assessment 2019

One of the factors for the program's evaluation is the number of readmissions to Excelsa Health Emergency Departments due to Congestive Heart Failure. Based on a 72-hour readmission window, there were 52 readmission cases in 2016, 33 cases in 2017 and 37 cases in 2018.

2019 – 2021 Future State Plans: In 2019, 23 restaurants participated in the Dining Out program, three of which were new restaurants. The program will continue in 2020-2021.

In accordance with the Reimagining Our Westmoreland project, Excelsa Health plans to continue collaboration with Westmoreland County to ***“identify areas in the County with limited access to physical activity, healthy foods, and work with municipalities to resolve barriers”*** and ***“promote healthy eating and physical activity at Westmoreland County schools, worksites, and other settings where the public is served.”*** (Reimagining Our Westmoreland, 2018)

3. Prevention and Wellness

GOAL: To boost individual workforce and community interest within the county regarding care and concern for general health activity and wellness prevention measures as part of routine health maintenance and disease prevention.

OVERVIEW: Partnerships with Employers/Civic Organizations/Community at Large

- Worksite wellness programs can simultaneously improve the health of employees while also reducing health care costs for employers and improving worker productivity. (CDC, 2019)
- Maintaining a healthy workforce can lower direct costs, such as insurance premiums and worker compensation claims, and have a positive effect on many indirect costs, such as absenteeism and worker productivity. (CDC, 2019)
- With employees spending 7.6 hours a day on average at their place of employment, worksites provide a unique setting to promote practices that can significantly increase physically active employees and potentially affect the health of millions of working adults. (CDC, 2019)

Excela Health Community Health Needs Assessment 2019

Objective	Action	Measures	Partners
<p>1. Promote worksite wellness at Excela Health</p>	<p>Continue to enhance the Excela Health employee wellness program</p>	<p><u>Participation/Health Outcomes Annually:</u></p> <p>Just Lose It/Exercise/Personal Fitness/Nutrition Counseling:</p> <ul style="list-style-type: none"> • Number of people who completed the Just Lose It Challenge for Excela • Number of exercise classes offered/number of participants • Nutritional counseling sessions and number of participants specifically for Excela’s employee wellness program • Number of personal training sessions/individuals • Aggregate BMI and waist circumference data comparing 2019, 2020, and 2021 	<p>1. Excela Health Employee Wellness Steering Committee</p> <p>2. Human Resources Department</p> <p>3. Excela Health Well Being Center</p>

Excelsa Health Community Health Needs Assessment 2019

		<p>Stress:</p> <ul style="list-style-type: none"> • Number of Unplug and Recharge classes offered and location (also what EH departments participated in which location) • Number of Unplug and Recharge participants (both employee and community) • Aggregate blood pressure screening results for Excelsa Health comparing 2019 (introduction of Stress targeting courses) comparing 2019, 2020, and 2021 <p>Ideal Protein:</p> <ul style="list-style-type: none"> • Aggregate BMI and waist circumference data comparing 2019, 2020, and 2021 • Aggregate lipid and glucose data comparing 2019, 2020, and 2021 • Participation across Excelsa Health employees
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Excelsa Health Community Health Needs Assessment 2019

		<ul style="list-style-type: none"> • Participation across community/patients – Bariatric dept provided 	
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2019 – 2021 Future State Plans: The Well-Being Center plans to rebrand and develop a more robust employee wellness program to include stress management through Unplug and Recharge sessions, upgrades to the Well-Being Center facility to incorporate employee fitness, exercise and wellness opportunities, implementation of specialized programs tailored to specific interdepartmental units, and engaged partnerships with Excelsa Health service lines.

Objective	Action	Measures	Partners
2. Promote worksite wellness program in Westmoreland County Government	Continue partnership with Westmoreland County Government and their nearly 2,000 employees to enhance the employee wellness program To partner with regional employers to provide Worksite Wellness services	<u>Participation/Health Outcomes Annually:</u> 1. Number of total participants in program 2. Number of participants in Just Lose It program 3. Number of Lunch and Learn Sessions and total number of people attended <u>Health Outcomes:</u> 1. Aggregate report results from biometric screenings	1. Excelsa Health Employee Wellness Steering Committee 2. Excelsa Health Well Being Center 3. Westmoreland County Government 4. Regional employers

2019 – 2021 Future State Plans: The Well-Being Center plans to revamp the “*Worksite Wellness*” program for 2019 and beyond. As a part of the revamp, a nine-week Just Lose it weight loss program was initiated for county employees. County employees will also have an opportunity to participate in Lunch and Learn information sessions facilitated by Well-Being Center employees on a variety of health and wellness topics.

Excela Health Community Health Needs Assessment 2019

The Well-Being Center plans to reinstate biometric screening testing into the county's wellness program for 2020.

Objective	Action	Measures	Partners
3. Promote worksite wellness in Westmoreland County industry employers	Continue to partner with and enhance the Excela Health WORKS Occupational Medicine service line to increase employer partnerships	<u>Participation Outcomes Annually:</u> 1. Number of employers utilizing Occupational Medicine services <u>Health Outcomes Annually:</u> 1. Number of physicals completed 2. Number of immunizations/vaccinations completed 3. Number of drug screenings completed	1. Excela Health WORKS Occupational Medicine 2. Regional employers

2016 – 2018 Accomplishments: *Excela Health WORKS* originated on December 7, 2015 at Excela Square at Norwin with seven staff members rendering services to the community. The goal for this division is to protect one of the most important assets in the community, which would be the employees' workforce, by keeping them safe and healthy in the workplace. Excela Health currently has two locations in Westmoreland County: Excela Square at Norwin and Excela at Abbey View, Latrobe region. Excela Health WORKS performs services such as workers' compensation and case management (acute and follow-up care and panel development), physicals (DOT, Post Offer, Fit for Duty, and OSHA), vision testing, vaccines and immunizations and drug and alcohol screenings. In 2016, there were 154 employers utilizing Excela Health WORKS as their occupational medicine provider. From 2017-2018, 259 employers utilized occupational medicine services from Excela Health. The number of physicals completed in 2016 was 665 and vaccines/immunizations totaled 315. Physicals and vaccinations/immunizations increased in 2017, 1,190 and 959. In 2018, there were 1,645 physicals and 1,324 vaccinations/immunizations completed. Drug test screenings totaled 367 in 2016, 508 in 2017, and 640 in 2018.

Excelsa Health Community Health Needs Assessment 2019

2019 – 2021 Future State Plans: For the 2018-2019 period, the number rose to 447 active employers in the Excelsa Health WORKS database. Occupational Medicine also performed 23 on-site test visits in the community for its customers so far for fiscal year 2019. The Occupational Medicine service line will hire one nurse practitioner and two medical assistants to keep up with the high demand for services. Future plans include opening up another location for 2021-2022. Excelsa Health will continue to market the Occupational Medicine service line to the community and encourage participation in preventative health screenings and immunizations for our county workforce employees.

Objective	Action	Measures	Partners
4. Promote community wellness in Westmoreland County through community outreach events/screenings and partnerships with local civic groups	<p>Continue to partner with local civic groups to enhance the Wellness Check program</p> <p>Offer health screenings/risk assessments at upcoming senior fairs/health expos/other related outreach events</p>	<p><u>Participation Outcomes</u> <u>Annually:</u></p> <p>1. Number of Wellness Checks scheduled</p> <p>2. Number of participants at each Wellness Check</p> <p>3. Number of outreach events with screenings offered</p> <p>4. Number of participants at each event with screenings offered</p>	<p>1. Excelsa Health Marketing & Communications</p> <p>2. Local civic organizations</p>

2019 – 2021 Future State Plans: The Wellness Check program will continue to provide the community with opportunities for low-cost health risk screenings in 2019-2021. This program will help people gauge their health status through a multiphasic blood analysis that allows for the detection of many potential health problems. Excelsa Health will also offer health screenings and risk assessments at upcoming senior fairs, health expos and other related community outreach events.

Excelsa Health

Community Health Needs Assessment

2019

Other Needs Identified in the CHNA But Not Addressed in This Plan: Each of the three identified 2019-2021 overall community health goals are important and are being addressed by numerous programs and initiatives through the health system and other community partners. However, limited resources and the need to allocate significant resources to the priority needs listed in the above plan does not permit inclusion of the additional needs in this implementation plan. Several initiatives to address other identified needs have already been implemented or will be implemented by Excelsa Health.

Maternal, Fetal & Infant Health in Westmoreland County: The current low birth weight rate in Westmoreland County for 2017 was 7.8%, an increase from 7.2% in 2016. However, the most current rate is on target with the Healthy People 2020 goal of 7.8%. (PA DOH, 2019) Low birth weight babies have a higher risk of developing medical problems after birth and require care in a specialized neonatal unit. The primary causes of low birth weight are prematurity and conditions which restrict fetal growth.

Breast milk is recognized as the single best way to feed infants. (World Health Organization, 2019) Breast milk is even more important for vulnerable babies, such as premature infants and those with medical conditions. In situations where there is no mother's milk available, milk banks can provide donated breast milk for these infants.

In 2017, the Family Additions Maternity Department staff at Westmoreland Hospital instituted a mother's milk bank at Excelsa Square at Norwin to provide optimal nutrition to this vulnerable population. From 2017-2018, 8,179 ounces of breast milk have been donated to the milk bank. For 2019, 2,830 ounces of breast milk have been donated as of June.

Excelsa Health, along with UPMC, Allegheny Health Network, St. Clair Hospital, and local and regional agency partners, are in the beginning stages of developing a predictive model that would measure incidents of infant mortality in rural areas from a human services, social services and healthcare perspective, as well as on a neighborhood level. This predictive model would assist in identifying and possibly reducing the rate of infant mortality by providing programs and services to care for the needs of expectant and current mothers and their children. The model would first be implemented in Westmoreland County as a pilot study and would continue throughout southwestern Pennsylvania and surrounding communities if the results are favorable and the model succeeds.

In 2019, Excelsa Health was invited to submit an application for a planning grant from the Richard K. Mellon Foundation to start the planning process for the predictive model. Excelsa Health, under the direction of Primary Investigator Dr. Andrea Willeitner, will explore with key stakeholders to include Nursing, OB, Women's Health, the Family Additions Maternity Center, Excelsa Health Administration and community service agencies how best to partner with the Children's Hospital of Philadelphia (CHOP), Research and Development (RAND), and Stanford University to reduce infant mortality rates in Westmoreland County. The goal is to validate the predictive model against its own maternal and child health statistics and to have a working model prepared and budgeted for implementation at the end of the planning phase. The pilot study team has yet to develop a mechanism for measuring outcomes; however, this will be one of the priorities during the planning phase.

Excelsa Health

Community Health Needs Assessment

2019

Excelsa Westmoreland Hospital, based in Greensburg, is the only hospital system in Westmoreland County delivering babies. The proposal will include mothers/families with certain socioeconomic risk factors (ethnicity, income, borough, etc.), which will need to be established in this planning grant. Screening of all births will still be necessary. From an Excelsa/Westmoreland County perspective, this is more feasible: focusing on non-white families (black families have twice the infant mortality of white mothers would result in 250-300 families/year in Westmoreland County – roughly 50% of which could be expected to give birth at Westmoreland Hospital). On a side note, these numbers also imply the need for close cooperation with providers in Allegheny County – only about 50% of mothers living in Westmoreland County give birth in the County, with Westmoreland Hospital being the only birth hospital.

Access to Health Services in Westmoreland County Part 1 - Wellness Program: About 5.3% percent of adults in Westmoreland County do not have health insurance, compared to 94.7% of those who have health insurance. (American Community Survey, 2018) Of those with health insurance, many have high deductible plans. To help, Excelsa Health co-sponsors “**Wellness Checks**”, a multiphasic blood analysis that allows for the detection of many potential health problems at a low cost.

The primary focus of the Wellness Check is the 33 panel multiphasic blood screening which includes a comprehensive chemistry profile, lipid testing and complete blood count. Additional screenings are also offered with the program.

The multiphasic blood screening can assist the physician in the detection of many potential health problems such as heart disease, parathyroid disease, anemia, liver disease, electrolyte imbalance, bleeding disorders, diabetes, neuromuscular disease, leukemia, kidney disease and others as well as help the public understand their health profile, identify possible risks and make changes for a healthier life. Future plans to continue Wellness Checks can be found under the goal Prevention and Wellness, Objective Four.

Access to Health Services in Westmoreland County Part 2 - Transportation Services: The relationship between transportation and access to health care services continues to emerge as an ongoing trend in Westmoreland County. The Westmoreland County Transit Authority (WCTA) is one of the many resources available to county residents, but according to recent studies, public transit has experienced a “decrease in ridership” since 2014. Public transit was also identified as one of the top three disadvantages to living in Westmoreland County by 30% of survey takers. (Reimagining Our Westmoreland, 2018) Excelsa Health plans to partner and collaborate with the county to ensure all residents have total access to travel to and from Excelsa Health facilities. Currently, Excelsa Square at Frick is not one of the transit stops in the Mount Pleasant area, which poses a problem for our patients in the southern market. Excelsa Health would like to include this facility as part of transit routes so residents of Westmoreland County, especially individuals with limited mobility or transportation access, can utilize community health and wellness services and resources efficiently. Excelsa Health also has partnered with the United Way of Southwestern Pennsylvania’s “Give Your Heart to a Senior” program for \$10,000+ and Laurel Faith in Action for \$24,000. Both of these partnerships also aid in providing transportation to older residents of Westmoreland County or individuals with limited transportation opportunities. Additionally, Excelsa Health has contracts with Veteran’s Cab Company and Uber services to assist with transportation access for residents in the community.

Excelsa Health Community Health Needs Assessment 2019

Additional needs identified by the CHNA that are not being addressed through these planning efforts are already being addressed by existing community assets, necessary resources to meet these needs are lacking, or these needs fall outside of the Excelsa Health hospitals' areas of expertise.

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