Community Health Needs Assessment Implementation Strategy

St. Mary Rehabilitation Hospital, Langhorne, PA
Community Health Needs Assessment Implementation Strategy Fiscal Years 2017-2019

St. Mary Medical Center (St. Mary) and St. Mary Rehabilitation Hospital (SMRH) completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by both the SMRH Board of Directors on April 28, 2016 and the St. Mary Board of Directors on May 9, 2016. St. Mary and SMRH performed the CHNA in adherence with certain federal requirements for not-for-profit hospitals set forth in the Affordable Care Act and by the Internal Revenue Service. The assessment took into account input from representatives of the community, community members, and various community organizations. The complete CHNA report is available electronically, or printed copies are available from St. Mary Community Health Services.

The Community Health Implementation Plan, approved by the St. Mary Rehabilitation Hospital Board of Directors on October 20, 2016, is representative of the programs and services that will be provided by St. Mary Rehabilitation Hospital to help meet the needs of our community that are within their field of expertise.

St. Mary Rehabilitation Hospital Information and Mission Statement

St. Mary Rehabilitation Hospital (SMRH) is a free-standing 50 bed inpatient rehabilitation facility which offers highly specialized and comprehensive care to patients facing the challenges of recovering from complex illness or injury. The state-of-the-art hospital opened in spring 2014 in partnership with Kindred Healthcare Corporation (St. Mary Medical Center joint venture 59%).

St. Mary is the only Catholic Hospital in Bucks County. As a not-for-profit faith based organization, we take great pride in our commitment to reinvest our resources for the benefit of the community and to provide those less fortunate free access to medical care and other supportive services that can improve their health and empower them to become independent and self-sufficient. Our community benefit includes uncompensated medical care and financial assistance (charity care) for the uninsured and underinsured and community education and wellness programs. The population of the hospital’s primary service area is estimated at 445,513 persons.
MISSION

We, St. Mary Health and Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities. As a community of caring people, we are committed to extending and strengthening the healing ministry of Jesus.

HEALTH NEEDS OF THE COMMUNITY

The CHNA, conducted over a 6-month time period and SMRH Board approved April 28, 2016, identified five significant health needs within the St. Mary community. Those needs were then prioritized based on both perceived and measured importance and alignment with St. Mary mission and objectives. The five significant health needs identified in our service area, in order of priority include:

| Behavioral Health | 16.2% of adults (56,800) diagnosed with a mental health condition (depression, anxiety, bipolar disorder) |
|                  | 35% of patients diagnosed with a mental health condition are not receiving treatment |
|                  | Social service provider focus groups noted that stress-related depression is often an underlying issue in the lower income population, placing them at increased risk for substance abuse, suicide, and more subtle behavior health issues that affect their relationships with people and their physical health |
|                  | Suicide rate in the St. Mary service area (12.3 per 100,000) is higher than SEPA as a whole (10.9), and does not meet the Healthy People 2020 goal of 10.2 or fewer |

| Cancer Screening & Awareness | Leading cause of death in service area is all cancers combined at an average rate of 955 deaths annually |
|                             | Among all cancer deaths in the service area, lung cancer has the highest site-specific mortality rate (46 per 100,000; 253 deaths annually) followed by female breast (25 per 100,000; 78 deaths annually) |
|                             | 39.5% (55,105) of low income uninsured women age 40+ are not receiving routine mammogram screening annually |
|                             | 48% (87,542) of women ages 18 and up do not receive routine pap screening yearly |
### Heart Healthy Lifestyle Education
- Obesity-related conditions include heart disease, stroke and type-2 diabetes. Heart disease is second leading cause of death (85 per 100,000; 496 deaths annually)
- More than 1 in 5 adults (22%, age-adjusted, or 101,300 adults) have been diagnosed with high blood pressure
- Among adults with high blood pressure, 4% report not taking all or nearly all of their medication all of the time
- 51% (56,000) of older adults age 60+ have been diagnosed with high blood pressure
- 28.3% (102,800) of adults are obese
- 15.9% (9,700) of children are obese; children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems
- 12.7% (44,900) of adults have been diagnosed with diabetes
- More than 1 in 5 (21%) older adults (age 60+) have diabetes; this represents 23,300 older adults.
- 52% of adults (183,800) exercise fewer than 3 days a week
- 75% of adults do not reach the recommended goal of consuming 4-5 servings of vegetables and fruit daily

### Access to Care
- 4.9% of adults lack of health insurance
- 9.7% of adults delay medical care due to cost
- 11.4% of adults have no prescription drug coverage
- 2.6% of children do not have a routine source of care

### Homelessness
- 530 individuals reported as homeless during annual Point-in-Time Count (9% increase from PIT 2015 Count)

*Adults - Ages 18-64 years  
Older Adults - Age 60+

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**St. Mary Rehabilitation Hospital Implementation Strategy**

St. Mary Rehabilitation Hospital resources, and overall alignment with the hospital’s mission, goals and strategic priorities, were taken into consideration along with the significant health needs identified through the most recent CHNA process.

**Significant health needs to be addressed**

St. Mary Rehabilitation Hospital will focus on developing and/or supporting initiatives and measure their effectiveness, to improve the following health needs:
- Heart Healthy Lifestyle Education – Detailed need specific Implementation Strategy on page 5
Significant health needs that will not be addressed
St. Mary Rehabilitation Hospital (SMRH) acknowledges the wide range of priority health issues that emerged from the CHNA process, and determined that it could effectively focus on those health needs which it deemed most pressing, under-addressed, and within its ability to influence. SMRH will not take action on the following health need:

- **Access to Care** – Duplication of services.
- **Behavioral Health** – Not area of expertise.
- **Cancer Screening & Awareness** – Not area of expertise.
- **Homelessness** – Not area of expertise.
- **Falls Older Adults** - Duplication of services, St. Mary Trauma Department provides balance education and home safety programs in the community.
- **Asthma in Adults** – Not area of expertise.
- **Affordable Food & Safe Places to Play** – Not area of expertise, this was noted at a community meeting and no trend can be established.

This implementation strategy specifies community health needs that SMRH has determined to meet in whole or in part and that are consistent with its mission. SMRH reserves the right to amend this implementation strategy as circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During the three years ending 2019, other organizations in the community may decide to address certain needs, indicating that St. Mary then should refocus its limited resources to best serve the community.
### CHNA IMPLEMENTATION STRATEGY FISCAL YEARS 2017-2019

**HOSPITAL FACILITY:** St. Mary Rehabilitation Hospital, Langhorne, PA  
**CHNA SIGNIFICANT HEALTH NEED:** Heart Healthy Lifestyle Education  
**CHNA REFERENCE PAGE:** Electronic page #69  
**PRIORITIZATION** 3  

**BRIEF DESCRIPTION OF NEED:** Increased rates of obesity contributing to chronic disease risk (heart disease, stroke and type-2 diabetes). Children and adolescents who are obese are likely to be obese as adults and are therefore more at risk for adult health problems as noted above.

**GOAL:** Promote wellness through the consumption of balanced diets, recommended physical activity and achievement and maintenance of healthy body weights in adults and children.

**OBJECTIVE:** St. Mary Rehabilitation Hospital will engage the community via educational offerings that promote healthy mind, body and spirit.

**ACTIONS THE HOSPITAL FACILITY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:**
1. Utilize clinical therapy staff to educate community members about the importance of safe and appropriate exercise and activity. Introduce walking programs using the community walking path on the St. Mary Rehabilitation Hospital campus.
2. Utilize nutritional services staff to educate community members about the importance of a healthy and balanced diet. Introduce healthy meal preparation via hands on preparation and tastings.
3. Utilize nursing staff to educate community members on meditation and mindfulness to decrease stress. Offer hands on meditation session in on-site therapy gyms.
4. Outreach to local Senior Centers/Senior Residential Housing in immediate service area (within 10 mile radius) regarding health promotion opportunities.

**ANTICIPATED IMPACT OF THESE ACTIONS:**
1. Increase physical activity of participants in a safe and effective manner.
2. Promote healthy diets of participants.
3. Decrease stress via introduction to meditation and mindfulness.

**PLAN TO EVALUATE THE IMPACT:**
1. Monitor participation by community members. Year 1 goal to engage > 100 community members in educational offerings. Increase by 10% each year.
2. Offer initial blood pressure and weight screenings with bi-monthly follow up to assess positive change of healthy diet, exercise and meditation.
3. Provide written evaluation of sessions by participants, including suggestions for additional offerings.
4. Monitor attendance by local Senior Center/Senior Residential Housing members engaged in St. Mary Rehabilitation Hospital health promotion programs.

**PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT (FY17):**
- **Operational Support:** 12 one hour sessions annually provided by clinical staff. Approximately $1800.00 labor costs.
- **Grant Support:** $0

**COLLABORATIVE PARTNERS:** Senior Centers/Senior Residential Housing in immediate service area, St. Mary Communications Department, St. Mary Rehabilitation Nursing and Nutrition Colleagues.