



Empowering Communities:

Unveiling Health Needs, Driving Positive Change

IMPLEMENTATION STRATEGY PLAN (ISP)

IN RESPONSE TO THE PENN HIGHLANDS MON VALLEY COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)



2024

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MISSION STATEMENT

To provide you with exceptional care through our community-based health system while maintaining a reverence for life.





VISION STATEMENT

To be the integrated health system of choice through excellent quality, service, and outcomes.

Penn Highlands Healthcare's mission statement focuses on improving regional access to a wide array of premier primary care and advanced services; it does so while supporting a reverence for life and the worth and dignity of each individual. The linkage provides the ability to keep control of the hospitals in the hands of a local board and provides many other community benefits. Increased local access to physician specialists, improved quality, coordination of care, and increased physician recruitment and retention are significant benefits of the linkage.

INTRODUCTION

PENN HIGHLANDS HEALTHCARE

Penn Highlands Healthcare, established in 2011, is a health system in Northwestern/Central/Southwest Pennsylvania. Penn Highlands Healthcare serves a 26-county region that brings together the services of Penn Highlands Brookville, Penn Highlands Clearfield (a Campus of Penn Highlands DuBois), Penn Highlands Connellsville, Penn Highlands DuBois, Penn Highlands Elk, Penn Highlands Huntingdon, Penn Highlands Mon Valley, Penn Highlands Tyrone, and Penn Highlands State College (a Campus of Penn Highlands Huntingdon). Through this partnership, Penn Highlands Healthcare has evolved into an organization with over 6,200 employees in more than 100 regional locations, including community medical buildings, outpatient facilities, surgery centers, and physician practices.

Penn Highlands Healthcare provides exceptional quality care to the region. Its staff includes 764 physicians and 389 advanced practice providers. The facilities have over 742 inpatient beds, 388 long-term care beds, 276-person care beds, and 174 independent living units.

Penn Highlands Healthcare provides residents access to the region's best hospitals, physicians, two nursing homes, a home care agency, and other affiliates who believe that healthcare should be managed by board members who live and work in their communities. The hospitals of Penn Highlands Healthcare have been serving the residents of Northwestern/Central/Southwest Pennsylvania as nonprofit community organizations for more than 100 years, a valued and cherished commitment.



PENN HIGHLANDS MON VALLEY

On October 1, 2021, Penn Highlands Mon Valley, formerly known as Monongahela Valley Hospital, officially joined Penn Highlands Healthcare. Penn Highlands Mon Valley will continue to play a vital role in the local community by providing high-quality healthcare services and maintaining its strong presence as a trusted healthcare provider. As a member of Penn Highlands Healthcare, Penn Highlands Mon Valley gains access to expanded resources, advanced medical technologies, and specialized care, ensuring that the community benefits from a broader range of services while receiving personalized care.

As such, the Penn Highlands Mon Valley involvement in the Community Health Needs Assessment (CHNA) becomes even more impactful.¹ Penn Highlands Mon Valley can leverage additional resources, expertise, and data to conduct more comprehensive assessments of the community's health needs as part of a larger health system. The integration allows for greater collaboration across Penn Highlands Healthcare, ensuring that best practices and innovative strategies are shared to address health disparities and improve outcomes. Penn Highlands Mon Valley can tap into the broader system's resources to implement targeted health programs, prioritize key issues such as chronic disease management or access to care, and allocate funding more efficiently to meet the identified needs. Penn Highlands Mon Valley can foster stronger partnerships with other public health agencies and community organizations. This approach enhances the hospital's ability to drive initiatives that are sustainable and aligned with the health priorities identified in the CHNA.

Penn Highlands Mon Valley has a rich history of serving the healthcare needs of the Mon Valley community. Over the decades, the hospital evolved to meet the growing and changing demands of the region, undergoing numerous expansions and modernization efforts. Today, Penn Highlands Mon Valley offers a comprehensive range of services, including cardiology, oncology, orthopedics, and emergency medicine. Its dedicated team of healthcare professionals is committed to delivering compassionate and effective care, reflecting the institution's longstanding tradition of excellence. Through community outreach and health education initiatives, Penn Highlands Mon Valley continues to play a crucial role in enhancing the health and well-being of the Mon Valley population.

The Penn Highlands Mon Valley CHNA employed a structured approach to identify and prioritize the needs of underserved communities throughout its service area. The findings and the Implementation Strategy Plan (ISP) report aim to improve health outcomes and address social and environmental health challenges.

Penn Highlands Mon Valley extends its sincere thanks to the stakeholders, community providers, and organizations whose contributions were vital to the assessment's success. Their input is greatly valued and appreciated throughout this important process.

¹ It is important to note that Penn Highlands Mon Valley, according to its previous 2020-2022 ISP, addressed diabetes, stroke, mammography/breast cancer, and colorectal cancer deaths; therefore, in 2024, these needs will be nested under chronic diseases/conditions in addition to access to care and behavioral health. The Penn Highlands Mon Valley CHNA comprehensively reset its community health needs, ensuring a fresh, data-driven approach to addressing emerging priorities as a new hospital under Penn Highlands Healthcare. The Penn Highlands Mon Valley needs were streamlined and prioritized. Pressing concerns were ranked higher for the broader community's needs. Resource limitations also constrained the hospital's ability to focus on multiple health areas simultaneously, leading them to allocate funding and efforts to issues that affect a larger portion of the population.

PENN HIGHLANDS MON VALLEY SERVICES

Acute Inpatient Rehabilitation
Behavioral Health
Breast Health
Cancer Care – Outpatient Infusion Center. Hematology, Medical Oncology
Cardiac Rehab
Cardiology
Cardiovascular-Thoracic Surgery
Concussion Treatment
Diabetes and Nutrition Wellness Center
Emergency Care
Gastroenterology
General Surgery
Heart Catheterization
Hyperbaric Oxygen Therapy
Imaging Radiology Services
Infusion Services
Intensive Care Unit
Interventional Radiology

Inpatient Care
Lab Services
Mammography
Medical Imaging (Radiology)
Neurosurgery
Occupational Therapy
Orthopedics and Sports Medicine
Pulmonary Rehab
Sleep Center
Venus Ablation
Walk-in Care
Women's Health Services
Wound Center

Community Programs

Innovations in Medicine Monthly Community Presentations
Living with Diabetes Support Group
Prostate Screening



PENN HIGHLANDS MON VALLEY AWARDS

2023 Healthgrades -- America's 100 Best Pulmonary Care

2023 American Heart Association Get With the Guidelines -- Heart Failure GOLD PLUS with Target: Heart Failure Honor Roll and Target: Type 2 Diabetes Honor Roll

2023 American Heart Association/American Stroke Association -- Get With The Guidelines-Stroke Gold Plus with Target Type 2 Diabetes Honor Roll

2023 HAP Achievement Award - Community Care Network Transitions of Care

2023 Top Hospitals In Pennsylvania 4-Star Rated

2023 U.S. News & World Report Cath PCI Registry

2022 Women's Choice Award - Best Hospitals for Orthopedics for the eighth consecutive year

2022 Women's Choice Award - Best Hospitals for Patient Safety

2022 Women's Choice Award - Best Hospitals for Heart Care

2022 Women's Choice Award - Best Breast Imaging Centers

2021 One of America's Best Hospitals Stroke Center – Women's Choice Award

2020 A-Rating on the Hospital Safety Scorecard – The Leapfrog Group

2021 One of American's Best Hospitals for Bariatric Surgery – Women's Choice Award

2021 One of American's Best Hospitals for Orthopedics – Women's Choice Award

2021 One of American's Best Hospitals for Mammogram Imaging – Women's Choice Award 2020 Blue Distinction Center for Bariatric Surgery – Highmark Blue Cross Blue Shield

PENN HIGHLANDS MON VALLEY

ACCREDITATIONS

2024-2026 Association for the Advancement of Blood and Biotherapies (AABB) - Blood Bank Laboratory

2024-2026 College of American Pathologists (CAP) - Laboratory/Blood Bank

2024-2026 College of American Pathologists (CAP) - Respiratory Care/Blood Gas Laboratory

2025 American College of Radiology (ACR) CT

2025 American College of Radiology (ACR) CT Low Dose Lung Cancer Screening Center

2024 Corazon Cardiac Cath Lab PCI Accreditation

2024 American College of Radiology (ACR) MRI Breast

2023-2025 The Joint Commission Advanced Certification for Inpatient Diabetes

2023 ACR Accreditation for Vascular Ultrasound including Peripheral Venous, Cerebrovascular, and Renal Vasculature - HealthPlex Imaging

2023 American College of Radiology (ACR) Ultrasound

2023 American College of Radiology (ACR) Mammography - Stereotactic Biopsy

2023 American College of Radiology (ACR) Nuclear Medicine

2023 American College of Radiology (ACR) PET

2023 Mammography Quality Standards Act (MQSA) Certification - Mammography - PHMV and HealthPlex Women's Imaging

2023 American College of Radiology (ACR) Accreditation- All Digital/3D Mammography

2023 American College of Radiology (ACR) MRI - Rostraver Imaging and California Imaging

2025 American College of Radiology (ACR) CT Lung Cancer Screening Center - Rostraver Imaging and California Imaging

2023 American College of Radiology (ACR) Mammography - HealthPlex Women's Imaging

2023 American College of Radiology (ACR) Ultrasound - HealthPlex Women's Imaging

2022-2023 The Joint Commission Advanced Primary Stroke Center Certification

2022-2023 The Joint Commission Advanced Primary Heart Attack Center Certification

2022-2023 The Joint Commission COPD Certification

2022-2023 U.S. News & World Report Best Hospitals - Heart Failure, COPD



2022 Percutaneous Coronary Intervention (PCI) Program Reaccreditation – Corazon, Inc.

2022 Association for the Advancement of Blood & Biotherapies (AABB)

2022 American College of Radiology (ACR) Accreditation - Nuclear Medicine

2022 Inter-societal Accreditation Commission (IAC) - Cardiology

2022 Get With The Guidelines-Stroke Gold Plus Quality Achievement Award With Target: Stroke Honor Roll Elite: Target: Type 2 Diabetes Honor Roll – American Heart Association/American Stroke Association

2022 Get With the Guidelines – Afib Gold – American Heart Association

2021 Get With The Guidelines-Stroke Quality Achievement Award – American Heart Association/American Stroke Association

2021 Get With the Guidelines – Afib Gold – American Heart Association

2021 Get With The Guidelines-Stroke Gold Plus Quality Achievement Award With Target: Stroke Honor Roll Elite: Target: Type 2 Diabetes Honor Roll – American Heart Association/American Stroke Association

2021-2025 American Diabetes Association Recognition for Diabetes Self Management Education program

2021 Percutaneous Coronary Intervention (PCI) Program Reaccreditation – Corazon, Inc.

BACKGROUND

Under the Patient Protection and Affordable Care Act (PPACA), all nonprofit hospitals must perform a Community Health Needs Assessment every three years. This process ensures that hospitals stay responsive to the evolving health needs of their communities. The CHNA must define the hospital's community, gather input from a wide range of stakeholders, including public health experts and community members, and assess the most pressing health needs in the area. Once the health needs are identified, hospitals must prioritize them based on their significance and develop an implementation strategy to address them. The implementation strategy plan should include potential measures, partnerships, and resources available to effectively tackle the identified issues, helping hospitals align their efforts with the well-being of their communities.

IMPLEMENTATION STRATEGY PLAN REPORT PURPOSE

The ISP report for a CHNA is a critical document that outlines how identified health priorities will be addressed within a community. The ISP report aims to identify the goals, objectives, and strategies that Penn Highlands Mon Valley will use to address the health priorities identified in the recent CHNA. The findings from the CHNA will outline actionable steps that healthcare organizations and their community partners will take to improve health outcomes. The ISP report details strategies, resources, and partnerships necessary to tackle the most pressing health issues, ensuring the proposed initiatives are impactful. By providing a clear roadmap, the ISP fosters collaboration among various sectors, aligning efforts to create meaningful improvements in the health and well-being of the community.

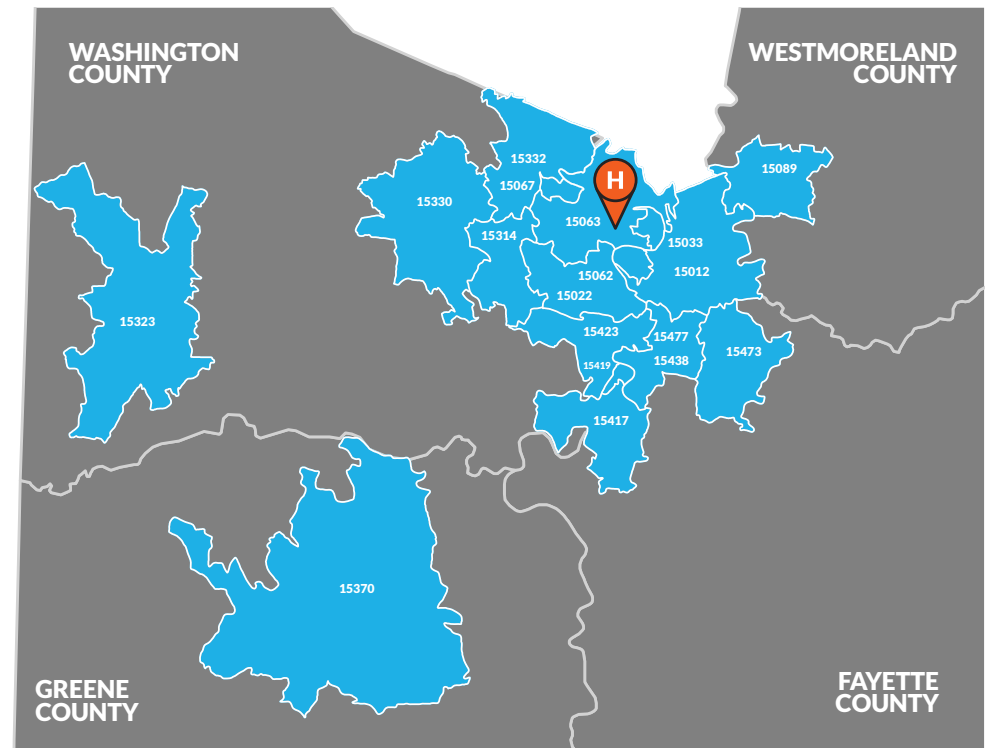
DEFINED COMMUNITY

A community is a geographic area where many patients who utilize hospital services reside. Although the CHNA includes other types of healthcare providers, the hospital remains the largest provider of acute care services. Consequently, hospital service usage offers the clearest definition of the community. In 2024, 18 ZIP codes were identified as the primary service area for Penn Highlands Mon Valley. The following table highlights the study area focus for the Penn Highlands Mon Valley CHNA, with these ZIP codes accounting for 80% of the hospital’s patient discharges. While most discharges are from Fayette, Greene, Washington, and Westmoreland counties, patients also come from neighboring counties.

The following table and map of the Penn Highlands Mon Valley geographical location display the hospital’s defined community related to the 18 ZIP codes.

Table 1: Penn Highlands Mon Valley Primary Service Area


| ZIP Code | Town | County |
|----------|--------------|--------------|
| 15012 | Belle Vernon | Fayette |
| 15022 | Charleroi | Washington |
| 15033 | Donora | Washington |
| 15062 | Monessen | Westmoreland |
| 15063 | Monongahela | Washington |
| 15067 | New Eagle | Washington |
| 15089 | West Newton | Westmoreland |
| 15314 | Bentleyville | Washington |
| 15323 | Claysville | Washington |
| 15330 | Eighty-Four | Washington |
| 15332 | Finleyville | Washington |
| 15370 | Waynesburg | Greene |
| 15417 | Brownsville | Fayette |
| 15419 | California | Washington |
| 15423 | Coal Center | Washington |
| 15438 | Fayette City | Fayette |
| 15473 | Perryopolis | Fayette |
| 15477 | Roscoe | Washington |



PENN HIGHLANDS HEALTHCARE

OVERALL PRIORITIZED NEEDS

Extensive primary and secondary research identified key regional priorities for community members, leaders, and project leadership. The research illustrated the need to address access to care, behavioral health, and chronic diseases/conditions. Each key need area had subareas of concentration. The table below illustrates how each hospital within Penn Highlands Healthcare will address the needs within its region.

|  Penn Highlands Healthcare | ACCESS TO CARE | | | BEHAVIORAL HEALTH ² | CHRONIC DISEASES/CONDITIONS ³ | |
|--|-----------------------------|-------------------------------------|-----------------------------|--------------------------------|--|--|
| | Infrastructure ⁴ | Lack of PCP/Specialist ⁵ | Specialty care ⁶ | | Health Behaviors ⁷ | Social Determinants of Health ⁸ |
| Penn Highlands Brookville | ● | ● | ● | ● | ● | ● |
| Penn Highlands Clearfield/Penn Highlands Dubois | ● | ● | ● | ● | ● | ● |
| Penn Highlands Elk | ● | ● | ● | ● | ● | ● |
| Penn Highlands Huntingdon/Penn Highlands State College | ● | ● | ● | ● | ● | ● |
| Penn Highlands Tyrone | ● | ● | ● | ● | ● | ● |
| Penn Highlands Connellsville | ● | ● | ● | ● | ● | ● |
| Penn Highlands Mon Valley⁹ | ● | ● | ● | ● | ● | ● |

² Behavioral health (Mental Health & Substance Abuse)

³ Chronic diseases/conditions (e.g., diabetes, chronic obstructive pulmonary diseases, high blood pressure)

⁴ Infrastructure (e.g., care coordination, navigation, and transportation)

⁵ Lack of primary care physicians (PCP)/Physician specialists

⁶ Specialty care (e.g., cancer care, women’s health)

⁷ Health behaviors (e.g., nutrition, physical activity, obesity)

⁸ Social determinants of health (e.g., education, income etc.)

⁹ PH Mon Valley CHNA needs are Diabetes Deaths, Stroke Deaths, Mammography/Breast Cancer, and Colorectal Cancer Deaths. Therefore, it has been classified under Chronic Diseases/Conditions.



2024-2027 PENN HIGHLANDS MON VALLEY **PRIORITIZED NEEDS**

Senior leaders from Penn Highlands Mon Valley reviewed the previous implementation strategy plan and refined and reinforced key strategies. They prioritized specific initiatives and explored ways to sustain and enhance services for the broader community through the updated plan. Senior leadership from Penn Highlands Healthcare and Penn Highlands Mon Valley actively contributed to the CHNA/ISP working group. Moving forward, senior leaders will regularly evaluate the strategy plan, making adjustments as needed to better align with the evolving health needs of the community.

The community health needs for Penn Highlands Mon Valley highlighted the following community needs. This assessment evaluated the community's health status and developed direct initiatives and planning strategies to enhance it. Through this assessment, new partnerships were established, and existing relationships with local and regional agencies were strengthened, all with the overarching goal of improving health outcomes for residents in the region.

PENN HIGHLANDS MON VALLEY CHNA NEEDS

| ACCESS TO CARE | BEHAVIORAL HEALTH | CHRONIC DISEASES/CONDITIONS |
|--|--------------------------|--|
| Infrastructure Lack of Primary Care Physicians/Physician Specialists Specialty Care | | Health Behaviors Social Determinants of Health (SDOH) |



IMPLEMENTATION STRATEGY ADDITIONAL NOTES

The ISP is not meant to provide an exhaustive list of how each hospital addresses the community's needs. Instead, it highlights specific actions the hospital commits to pursuing and tracking in response to the identified priorities. While the strategy tables list internal and external partners, numerous clinical departments will collaborate on these efforts. Their involvement may include participation in clinical programs and protocols or contributing to educational outreach by sharing knowledge individually or as a team, all with the goal of addressing the community's health needs.

PENN HIGHLANDS HEALTHCARE HOSPITALS

The Penn Highlands Healthcare hospitals conducted a CHNA and ISP; however, each report varies due to the distinct characteristics and needs of each hospital's primary service area and the research and discovery process used to determine the community health needs. A workgroup of representatives from the Penn Highlands Healthcare hospitals collaborated to define a consistent format and approach to the CHNA and ISP.

ACCESS TO CARE

Access to healthcare is essential for fostering a healthy community by ensuring individuals receive timely and appropriate medical services. It involves factors such as the availability of healthcare providers, affordability of services, transportation options, and insurance coverage. When access is optimized, people can benefit from preventive care, manage chronic conditions effectively, and receive urgent treatment, leading to improved health outcomes and reduced healthcare costs. However, barriers to access can result in delayed diagnoses, untreated conditions, and increased reliance on emergency services, negatively impacting health and driving up medical expenses. The Office of Disease Prevention and Health Promotion emphasizes the importance of comprehensive, high-quality healthcare services in preventing disease, managing chronic conditions, and promoting health equity. Meeting these challenges is becoming increasingly complex, particularly in states like Pennsylvania, where physician shortages are projected to exacerbate access issues. The Association of American Medical Colleges predicts a nationwide shortage of 86,000 physicians by 2036 due to a growing elderly population and physician retirements.¹⁰ To maintain current care levels, Pennsylvania alone will need an additional 1,039 primary care physicians by 2030, an 11% increase from the 2010 workforce.¹¹

Primary and specialty physicians are essential for comprehensive healthcare management, with primary care providers often serving as the first point of contact, offering preventive care, routine check-ups, and early intervention for common conditions. On the other hand, specialty physicians provide advanced expertise for diagnosing and treating complex conditions requiring specialized care. Access to these services reduces the burden on emergency departments and ensures more cost-effective and efficient healthcare. Specialty care, such as cancer treatment and women's health services, is critical in addressing unique health needs by offering early detection and tailored treatment plans, significantly improving patient outcomes. However, transportation challenges can pose significant barriers to accessing care, especially for vulnerable populations in rural and low-income areas. Penn Highlands Mon Valley is committed to overcoming these barriers by expanding primary and specialty care availability, enhancing specialty services, and addressing transportation gaps to ensure equitable access to healthcare. This focus on community-specific needs fosters sustainable health improvements and promotes overall well-being for the populations it serves.

¹⁰ [Association of American Medical Colleges](#)

¹¹ [The Robert Graham Center](#)

Goal: Improve access to care for Penn Highlands Healthcare service area residents.

| CHNA Need | Subcategory | Target Population | Objectives/Strategies | Evaluation Methods/Metrics (Goals) | Partners |
|----------------|-------------------------|--|---|--|---|
| Access to Care | Specialty Care | Women 40 and older needing routine mammography | Offer walk-in mammograms every weekday for women with and without a prescription. | <ul style="list-style-type: none"> Track the number of walk-ins for mammograms | <ul style="list-style-type: none"> Health Plex Imaging |
| | Specialty Care | General Public | Screening/services are available at PH Mon Valley for the participants at the Ducoeur Breast Cancer Walk. | <ul style="list-style-type: none"> Track and analyze the number of participants who registered and attended the walk. Measure the total amount of funds raised through the walk, including registration fees, donations, sponsorships, and additional fundraising activities (e.g., auctions and merchandise sales). Total funds raised compared to set goals and previous years. Evaluate the number, size, and engagement of corporate or organizational sponsors. | <ul style="list-style-type: none"> Penn Highlands Healthcare Department of Marketing and Communications (MAR-COM) Penn Highland Healthcare MAR-COM Southwest Region Office of Fund Development Ducoeur Breast Cancer Walk committee |
| | Specialty Care | General Public | Maintain the Breast Imaging Center of Excellence designation and continue to pass the annual Mammography Quality Standards Act (MQSA) Inspection. | <ul style="list-style-type: none"> Monitor the quality and performance of imaging equipment through regular maintenance, calibration, and quality control checks. Track outpatient satisfaction surveys through Press Ganey. Address actionable items from patient satisfaction surveys. Provide regular training sessions for staff to ensure they are aware of and understand the Mammography Quality Standards Act (MQSA) requirements and their role in maintaining compliance. Track the number of training sessions provided. Track the number of training session attendees | <ul style="list-style-type: none"> Outpatient Mammography staff Penn Highlands Health Plex Imaging. PHH Radiologists PHH Physics Department PHH Mon Valley Imaging |
| | Lack of PCP/ Specialist | Men age 40-75 | Provide education and early detection and treatment of prostate cancer by providing PSA Lab draw and Digital Rectal Exam (DRE). | <ul style="list-style-type: none"> Ensure the results of the PSA and physical exam results of every participant are reviewed and forwarded to their Primary Care Physician and the Medical Director of the screening program for the appropriate follow up. Track the PSA lab results sent to the PCP/Medical Director Track physical exam results sent to PCP/Medical Director Track the number of attendees | <ul style="list-style-type: none"> Penn Highlands Healthcare Department of Marketing and Communications (MAR-COM) Penn Highland Healthcare MAR-COM Southwest Region PH Mon Valley Oncology Department PH Mon Valley Lab Services Department PH Mon Valley Urology Department |
| | Infrastructure | General Public | Continue to offer and expand transportation to residents who need shuttle/van services. | <ul style="list-style-type: none"> Track the number of residents who use the services Track the geographic scope of where patients are picked up/ dropped off | <ul style="list-style-type: none"> PH Mon Valley Outpatient Services |

BEHAVIORAL HEALTH

Behavioral health, encompassing mental health and substance use disorders, plays a vital role in shaping overall community health and well-being. Conditions such as depression, anxiety, and bipolar disorder, along with substance use disorders, can lead to significant physical health problems, disability, and reduced productivity. In Pennsylvania, nearly 20% of adults reported experiencing a mental illness in the past year, with mental health-related issues increasing over time.¹² The percentage of adults reporting poor mental health for 14 or more days in a month rose from 12% in 2014 to 14% in 2021, with higher rates among those earning less than \$15,000 and individuals identifying as lesbian, gay, or bisexual. Suicide remains a pressing public health issue, with 1,686 Pennsylvanians dying by suicide in 2020, marking a 5% increase over the previous decade. Particularly concerning are rising suicide rates among Black, Hispanic, and older adults. Concurrently, Pennsylvania continues to grapple with the opioid crisis, recording 5,168 overdose deaths in 2021, underscoring the urgency of addressing behavioral health issues.¹³

Including behavioral health in CHNAs allows communities to better understand the prevalence and impact of these conditions, facilitating targeted interventions and resource allocation. Stigma, lack of insurance, and insufficient provider availability often prevent individuals from accessing necessary behavioral health services, with rural areas facing an acute shortage of mental health professionals. By identifying these gaps, communities can advocate for increased funding, policy reforms, and implementing programs that improve access to behavioral health services. A multifaceted approach to behavioral health involves integrating services with primary care to provide holistic treatment, expanding access through telehealth, and reducing financial barriers. Fostering support networks, such as peer and family support programs, can strengthen community resilience. Through these strategies and leveraging data to address service gaps, communities can enhance behavioral health outcomes, promote well-being, and build healthier, more resilient populations.

¹² [Pennsylvania Department of Health](#)

¹³ [Pennsylvania Department of Health: The State of our Health, A Statewide Health Assessment of Pennsylvania](#)

Goal: Increase access to behavioral health services with a focus on developing best practices to identify, treat, and refer patients presenting with behavioral health

| CHNA Need | Subcategory | Target Population | Objectives/Strategies | Evaluation Methods/Metrics (Goals) | Partners |
|--------------------------|-------------------|--------------------|--|--|--|
| Behavioral Health | Behavioral Health | General Population | Implement telehealth in the ED for our central intake. All psychiatric patients will be seen by a mental health provider prior to admission. | <ul style="list-style-type: none"> Track the number of telehealth visits | <ul style="list-style-type: none"> Emergency Department |
| | Behavioral Health | General Population | Implement telehealth for psychiatric consults for In-house patients. | <ul style="list-style-type: none"> Track the number of inpatient consults | <ul style="list-style-type: none"> Behavior Health Department |



CHRONIC DISEASES/CONDITIONS

Chronic diseases are long-lasting conditions that develop gradually, significantly affecting an individual’s quality of life. These health issues, which persist for over a year and require ongoing medical attention or limit daily activities, include heart disease, diabetes, cancer, and respiratory conditions. Chronic diseases are the leading causes of death and disability worldwide, driven by a combination of genetic, environmental, and lifestyle factors. Key risk factors—such as poor nutrition, physical inactivity, smoking, and excessive alcohol consumption—exacerbate these conditions. In the United States, chronic diseases like heart disease, cancer, and diabetes are significant contributors to healthcare costs, with 90% of the nation’s \$4.5 trillion annual healthcare expenditure going toward treating individuals with chronic and mental health conditions.¹⁴ However, engaging in healthy behaviors—such as regular physical activity, a balanced diet, and eliminating tobacco and alcohol use—can reduce the risk of chronic disease and improve quality of life.

Healthy lifestyle choices, including physical activity and balanced nutrition, are essential for managing chronic diseases and maintaining overall well-being. Although regular physical activity can help prevent conditions like heart disease, type 2 diabetes, and obesity, only one in four U.S. adults meets recommended physical activity guidelines.¹⁵ Obesity affects 20% of children and 42% of adults, increasing their risk for chronic conditions, and more than 25% of young people aged 17 to 24 are too overweight to qualify for military service.¹⁶ Effective management of chronic diseases involves regular screenings, patient education, and adherence to treatment plans. Penn Highlands Mon Valley’s comprehensive approach includes monitoring patients’ health, promoting education, and coordinating care among providers. Community-based programs focused on lifestyle changes, such as improved nutrition and increased physical activity, have led to better management of conditions like diabetes, hypertension, and heart disease. These initiatives have resulted in fewer hospital admissions, enhanced quality of life, and reduced healthcare costs. Collaboration among healthcare providers, government agencies, and community organizations fosters a supportive environment, encouraging residents to participate actively in their health management and promoting sustainable, positive health outcomes.

| Goal: Expand awareness and services to promote preventive health and wellness throughout the community. | | | | | |
|---|------------------|---|--|---|---|
| CHNA Need | Subcategory | Target Population | Objectives/Strategies | Evaluation Methods/Metrics (Goals) | Partners |
| Chronic Diseases/ Conditions | Health Behaviors | Adult Patients with a history of diabetes. | Continue to conduct a satisfaction survey on diabetes education. | <ul style="list-style-type: none"> Track the satisfaction of patients who responded to the surveys Address the doable needs of patients from the monthly outpatient survey results. | <ul style="list-style-type: none"> PH Mon Valley Certified Diabetes Care & Education Specialists |
| | Health Behaviors | Adult inpatient with a history of diabetes. | Maintain The Joint Commission Certification for Inpatient Diabetes Management. | <ul style="list-style-type: none"> Maintain The Joint Commission’s Certificate of Distinction for Inpatient Diabetes Care | <ul style="list-style-type: none"> Joint Commission Disease-Specific Certification PHMV staff Physicians and APPs Quality & Risk Management Certified Diabetes Care & Education Specialists (CDCES) acronym) |
| | Health Behaviors | Community members with a diagnosis of diabetes. | Develop strategies to increase attendance at diabetes support groups. | <ul style="list-style-type: none"> Continue PH Mon Valley’s Living with Diabetes support group schedules meetings beginning February every other month. Track the number of attendees | <ul style="list-style-type: none"> Penn Highlands Healthcare Department of Marketing and Communications (MAR- COM) Penn Highland Healthcare MAR-COM Southwest Region Diabetes support group participants CDCES |

Goal: Expand awareness and services to promote preventive health and wellness throughout the community.

| CHNA Need | Subcategory | Target Population | Objectives/Strategies | Evaluation Methods/Metrics (Goals) | Partners |
|-------------------------------------|------------------|---------------------|---|--|--|
| Chronic Diseases/ Conditions | Health Behaviors | Community residents | Continue the Stroke Telemedicine Program. | <ul style="list-style-type: none"> Track the clinical outcomes of patients treated through the stroke telemedicine program. Track the number of stroke patients who access the telemedicine program. | <ul style="list-style-type: none"> PH Mon Valley's Stroke Care Coordinator PH Mon Valley's ED physicians & Staff |
| | Health Behaviors | Community residents | Provide diagnostic screenings to identify people at risk for stroke. | <ul style="list-style-type: none"> Track the number of individuals participating in diagnostic screenings to identify stroke risk. Measure the percentage of screened individuals identified as at risk for stroke based on diagnostic results. RN to follow up via phone call to identify a list of individuals post-stroke or Transient ischemic attack. | <ul style="list-style-type: none"> PH Mon Valley Stroke Department American Heart Association |
| | Health Behaviors | Stroke patients | Provide general stroke support and education. | <ul style="list-style-type: none"> Track the number of individuals participating in diagnostic screenings for stroke risk over a specified period (e.g., monthly, quarterly, or annually). Measure the percentage of individuals identified as being at risk for stroke based on the screening results. | <ul style="list-style-type: none"> PH Mon Valley Education Outreach PH Mon Valley Stroke Care Coordinator |
| | SDOH | Adults | Develop an SDOH screening tool in the electronic health record to track responses to questions. | <ul style="list-style-type: none"> Track the number of "yes" responses to the screening tool questionnaire. Track the number of resources provided to patients. | <ul style="list-style-type: none"> Social workers Case managers Nurses |
| | SDOH | Adults | Screen inpatients 18 years or older for health-related social needs. | <ul style="list-style-type: none"> Track the number of patients 18 years or older on the date of admission who are screened for all of the following health-related social needs (HRSNs): food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety during their hospital inpatient stay Track the admitted inpatients 18 years or older on the admission date. | <ul style="list-style-type: none"> Social workers Case managers Nurses |
| | SDOH | Adults | Provide and document community resources given to patients to assist with identified needs. | <ul style="list-style-type: none"> Track the number of community resources provided. Track the number of patients who were provided resources. | <ul style="list-style-type: none"> Social workers Case managers Nurses |
| | SDOH | PH MV Staff | Implement Netlearning to educate staff on SDOH and how it impacts patients. | <ul style="list-style-type: none"> Track the number of Netlearning education sessions. Track the number of staff members who attended Netlearning education sessions. | <ul style="list-style-type: none"> Social workers Case managers Nurses Training and Education |
| | SDOH | Adults | Implement a resource-sharing element as part of the patient's discharge orders. | <ul style="list-style-type: none"> Track the number of resources shared/distributed. Track the number of patients who received resources Track the number of shared distributors. | <ul style="list-style-type: none"> Social workers Case managers Nurses Training and Education Information Systems |

¹⁴ [Centers for Disease Control and Prevention](#)

¹⁵ [Centers for Disease Control and Prevention](#)

¹⁶ [Centers for Disease Control and Prevention](#)

STRATEGIES **NO LONGER BEING ADDRESSED**

Penn Highlands Mon Valley streamlined and combined some strategies from their implementation planning documents to enhance the report's clarity, focus, and overall effectiveness. By consolidating overlapping or related strategies, the ISP document avoids redundancy and presents a more cohesive and unified approach to achieving the desired goals. The final report helps to simplify the execution process by aligning resources and efforts, reducing confusion or fragmentation across different teams. It also enables clearer communication of priorities to stakeholders, making it easier to track progress and measure success. Furthermore, integrating strategies allows for better allocation of resources, as efforts are concentrated on the most impactful actions, improving overall efficiency. A more streamlined report also demonstrates a strategic vision, showcasing an organization's ability to adapt, innovate, and implement solutions in a coordinated, impactful manner.



Penn Highlands Mon Valley acknowledged a number of health needs that emerged from the CHNA process. Penn Highlands Mon Valley focused on areas of need where effective use of existing knowledge and resources offered the greatest potential impact. Accordingly, some objectives and strategies from the previous ISP were discontinued or are no longer offered due to unforeseen challenges, including resource constraints, lack of engagement, shifting priorities, and insufficient resources (staffing limitations and financial limitations/restrictions). As such, Penn Highlands Mon Valley can no longer implement the following:

UNDER ACCESS TO CARE:

- Perform a risk assessment before every woman has a mammogram.
 - No longer offered as vendor cost was too absorbent.
- Offer genetic testing to women who are identified to be at risk for developing breast cancer.
 - No longer offered as vendor cost was too absorbent.
- UPMC Health Plan Mammography Outreach Events to close the mammography gap in care.
 - The partnership with UPMC Health Plan Mammography Outreach partnership dissolved since the PH Mon Valley merger.
- Vale-U-Health Mammography Outreach Event to close the mammography gap in care.
 - Saturday screenings are no longer offered due to staffing cuts.
- Sponsor Mamm & Glamm an event where women can have mammograms with an afternoon of pampering.
 - Saturday screenings are no longer provided due to staffing cuts.

CANCER:

- Conduct free colorectal cancer screenings and distribute take-home testing kits.
 - No longer offered as vendor cost was too absorbent.
- Revised Objective/Strategy: Provide education and early detection and treatment of prostate cancer by providing PSA Lab Draw and Digital Rectal Exam (DRE). The hemoccult study was part of the strategy but was costly to maintain. Therefore, the strategy was discontinued.

Penn Highlands Mon Valley will continue supporting community partners with the expertise, capacity, and focused resources to address the region's needs effectively.

MOVING FORWARD

The Penn Highlands Mon Valley community health needs, identified in the CHNA are multifaceted. Reducing/decreasing, eliminating, or improving access to care, behavioral health, and chronic diseases/ conditions requires continued collaboration between the local health, human, and social services agencies, community partners, and residents.

With continued alignment and partnership with organizations and community residents, Penn Highlands Mon Valley will continue to engage residents as part of the CHNA and ISP. The implemented strategies and initiatives will strengthen Penn Highlands Mon Valley for all citizens within the service area.

RESOURCE COMMITMENT

Penn Highlands Mon Valley will commit in-kind and financial resources during to implement the identified initiatives and programs. Resources may include clinical and non-clinical services, partnerships, collaboration for solutions, dedicated staff time to advance the Penn Highlands Mon Valley work, charitable contributions, and volunteerism that will occur naturally within the ISP phase.

Penn Highlands Healthcare welcomes and values your feedback regarding the Community Health Needs Assessment and the Implementation Strategy Plan. Your insights are essential in helping us better understand the community's needs and ensuring our strategies effectively address them. Please share your thoughts, suggestions, or concerns to help us refine our efforts and create a healthier, more vibrant community.



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