



Penn
Highlands
Tyrone

Empowering Communities:

Unveiling Health Needs, Driving Positive Change

IMPLEMENTATION STRATEGY PLAN (ISP)

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



2024

PREPARED BY TRIPP UMBACH



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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 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 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.

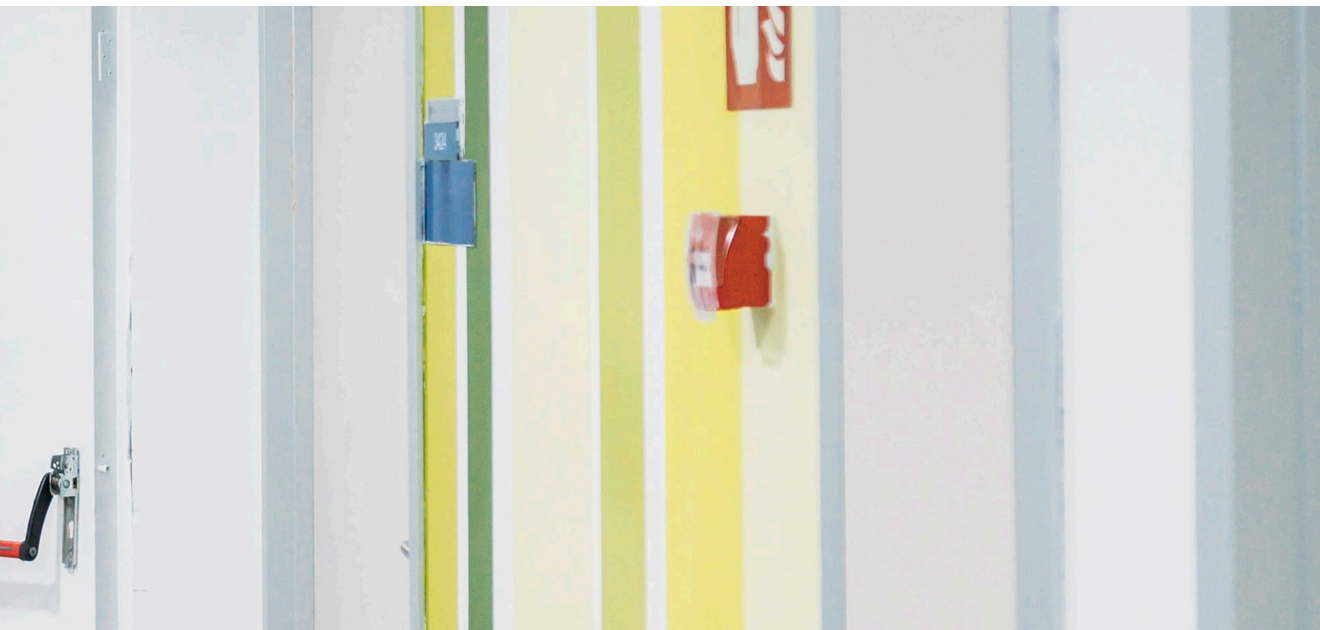


PENN HIGHLANDS TYRONE

Founded by the community in 1954, Penn Highlands Tyrone, formerly known as Tyrone Hospital, was a twenty-five-bed community hospital that provides general medical and surgical care, three primary care physician offices, which included Tyrone Rural Health Center, Pinecroft Medical Center, and Houtzdale Rural Health Center. Its services included the Breast Cancer & Women's Health Institute, an orthopedic clinic, a cardiology clinic, Company Healthcare, and the Tyrone Fitness & Wellness Center. On November 4, 2020, Tyrone Hospital joined Penn Highlands Healthcare to expand its premier services available throughout more of Pennsylvania.

The Penn Highlands Tyrone 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 Tyrone 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.



PENN HIGHLANDS TYRONE SERVICES

Breast Health
Cardiology
Emergency Care
Family Medicine
Gastroenterology
Imaging Services
Infusion Services
Internal Medicine
Lab Services
Mammography
Nephrology
Neurology
Occupational Health
Ophthalmology

Oral-Maxillofacial Surgery
Orthopedics and Sports Medicine
Otorhinolaryngology (ENT)
Outpatient Surgery
Pediatric Care
Physical Medicine and Rehabilitation
Plastic and Reconstructive Surgery
Podiatry
Primary Care
Pulmonary Care
Respiratory Therapy
Surgical Services
Swing Bed



PENN HIGHLANDS TYRONE **AWARDS**

2022 The Chartis Center for Rural Health - Performance Leadership Award in Patient Perspective

PENN HIGHLANDS TYRONE **ACCREDITATIONS**

2021-2024 American College of Radiology - Computed Tomography Services Accreditation

2023 Mammography Quality Standards Act (MQSA) Certification - Mammography

2023 American College of Radiology (ACR) Accreditation- All Digital/2D Mammography

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 Tyrone 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 defined as the geographic area from which 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, nine ZIP codes were identified as the primary service area for Penn Highlands Tyrone. The following table highlights the study area focus for the Penn Highlands Tyrone CHNA, with these ZIP codes accounting for 80% of the hospital’s patient discharges. While most discharges are from Blair and Centre counties, patients also come from neighboring counties.

The following table and map of the Penn Highlands Tyrone geographical location display the hospital’s defined community, which relates to the nine ZIP codes.

Table 1: Penn Highlands Tyrone Primary Service Area


ZIP Code	Town	County
16686	Tyrone	Blair
16601	Altoona	Blair
16602	Altoona	Blair
16617	Belwood	Blair
16651	Houtzdale	Blair
16877	Warriors Mark	Blair
16661	Madera	Blair
16680	Smithmill	Blair
16870	Port Matilda	Centre



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 ¹	CHRONIC DISEASES/CONDITIONS ²	
	Infrastructure ³	Lack of PCP/Specialist ⁴	Specialty care ⁵		Health Behaviors ⁶	Social Determinants of Health ⁷
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	●	●	●	●	●	●

¹ Behavioral health (Mental Health & Substance Abuse)

² Chronic diseases/Conditions (e.g., diabetes, chronic obstructive pulmonary diseases, high blood pressure)

³ Infrastructure (e.g., care coordination, navigation, and transportation)

⁴ Lack of primary care physicians (PCP)/Physician specialists

⁵ Specialty care (e.g., cancer care, women's health)

⁶ Health behaviors (e.g., nutrition, physical activity, obesity)

⁷ 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 TYRONE **PRIORITIZED NEEDS**

Senior leaders from Penn Highlands Tyrone 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 Tyrone 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 community’s evolving health needs.

The CHNA for Penn Highlands Tyrone 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 TYRONE 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

Each Penn Highlands Healthcare hospital conducted a CHNA and ISP; however, each report varies because of 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 because of a growing elderly population and physician retirements.⁹ To maintain current care levels, Pennsylvania will need an additional 1,039 primary care physicians by 2030, an 11% increase from the 2010 workforce.¹⁰

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 checkups, 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 Tyrone 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.

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

CHNA Need	Subcategory	Target Population	Objectives/Strategies	Evaluation Methods/Metrics (Goals)	Partners
Access to Care	Lack of PCP/ Specialist	Northern Blair and surrounding communities	Recruit primary and specialty care providers using PHH recruitment plan.	<ul style="list-style-type: none"> Number of providers recruited Track decreases in number transfers out of the system for specialty care 	<ul style="list-style-type: none"> Penn Highland Healthcare (PHH) Penn Highlands Physician Network (PHPN)
	Infrastructure	Northern Blair and surrounding communities	Evaluate the need to enhance current van transportation service.	<ul style="list-style-type: none"> Number of patients transported annually by FY24 Track number of transport partners 	<ul style="list-style-type: none"> Senior Centers Community Action External healthcare providers (DaVita) Internal education with case management
	Infrastructure	Northern Blair and surrounding communities	Strengthen ALS/BLS transports within PHH system.	<ul style="list-style-type: none"> Number of ALS/BLS patient transfers annually by FY24 	<ul style="list-style-type: none"> PHH
	Specialty care	Northern Blair and surrounding communities	Implement infusion center for cancer care.	<ul style="list-style-type: none"> Number of patients receiving infusion treatment 	<ul style="list-style-type: none"> PHH PHPN

Goal: Early Detection and Prevention.

CHNA Need	Subcategory	Target Population	Objectives/Strategies	Evaluation Methods/Metrics (Goals)	Partners
Access to Care	Specialty Care/ Cancer	Adults Elderly and at-risk population Residents with suspected cancer conditions	Increase community awareness and engagement regarding cancer prevention and screening.	<ul style="list-style-type: none"> • Number of public speaking events • Number of attendees • Pre-and post-test results 	<ul style="list-style-type: none"> • Advanced Practice Provider Physicians • Registered nurses
	Specialty Care/ Cancer	Adults Elderly and at-risk population	Seek opportunities for public speaking engagements.	<ul style="list-style-type: none"> • Number of speaking events • Number of attendees 	<ul style="list-style-type: none"> • APP • Physicians • Registered nurses
	Specialty Care/ Cancer	Adults Elderly and at-risk population	Progressively expand advocacy groups including community volunteers and patient groups to cover all regions	<ul style="list-style-type: none"> • Number/type of advocacy groups • Number of new advocacy groups • Track region of coverage 	<ul style="list-style-type: none"> • APP • Physicians • Registered nurses
	Specialty Care/ Cancer	General Population	Tri-County Sunday Education Articles for The Community Radio Education Spots.	<ul style="list-style-type: none"> • Number of radio spots advertised • Number of education articles 	<ul style="list-style-type: none"> • Area Agency on Aging • GI Lab physician leaders • GI Lab admin leaders • Marketing • Pharmaceutical companies • Practice Management
	Specialty Care/ Cancer	General Population	Increase cancer awareness among influential groups and the public.	<ul style="list-style-type: none"> • Number of presentations made • Number of participants reached 	<ul style="list-style-type: none"> • APP • Physicians • Registered nurses
	Specialty Care/ Cancer	General Population	Monthly social committee meetings.	<ul style="list-style-type: none"> • Number of attendees • Number of meetings held 	<ul style="list-style-type: none"> • APP • Physicians • Registered nurses
	Specialty Care/ Cancer	Community partners in the cancer community	Engage and mobilize key stakeholders within the cancer community who will champion the development and implementation of an awareness plan for cancer prevention.	<ul style="list-style-type: none"> • Increase in number of partnerships with stakeholders in the cancer community • Number of new stakeholders identified 	<ul style="list-style-type: none"> • Community Stakeholders
	Specialty Care/ Cancer	General Population	Develop relationships with stakeholders within the cancer community.	<ul style="list-style-type: none"> • Track number of new partnerships 	<ul style="list-style-type: none"> • Community Stakeholders

⁹ [Association of American Medical Colleges](#)

¹⁰ [The Robert Graham Center](#)

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.¹¹ 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.¹²

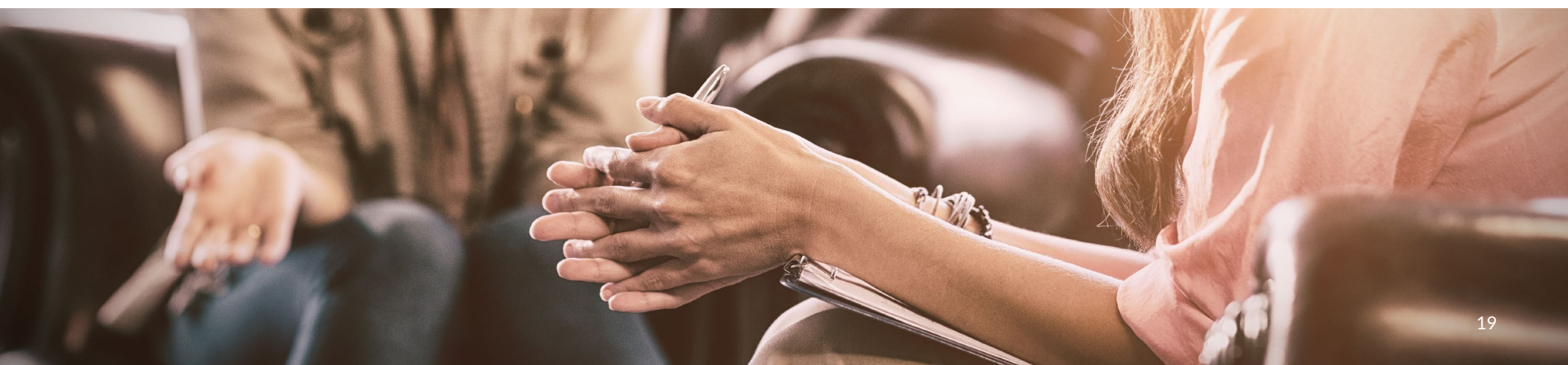
Including behavioral health in CHNAs allows communities to better understand the prevalence and impact of these conditions, facilitating targeted interventions and resource allocation. Stigma, lack of insurance, and insufficient provider availability often prevent individuals from accessing necessary 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.

¹¹ [Pennsylvania Department of Health](#)

¹² [Pennsylvania Department of Health: the State of our Health. A Statewide Health Assessment of Pennsylvania](#)

Goal: Collaborate with community substance abuse providers to reduce substance abuse.

CHNA Need	Subcategory	Target Population	Objectives/Strategies	Evaluation Methods/Metrics (Goals)	Partners
Behavioral Health	Behavioral Health	Schools At-risk youth Justice Department Homelessness Free Clinic Community residents	Address barriers that impede the ability to meet the assessment and treatment demand.	<ul style="list-style-type: none"> Collaborate with the education system three times per year Number of new partners Number of partners no longer participating Increase mental health services in rural health clinics in the service area and track number of visits. Increase the use of telemedicine technology to enhance service utilization and track number of visits. 	<ul style="list-style-type: none"> Cen Clear Drug and Alcohol Clearfield Jefferson Drug & Alcohol Commission Cove Forge Elk County Drug and Alcohol Health and Human Service Agencies Opioid Task Force Pyramid Healthcare Rural Hospital Opioid Program (RHOP) Tri County Drug and Alcohol
	Behavioral Health	Patients in the local ED Patients at the Free Clinic	Identify available transportation to treatment.	<ul style="list-style-type: none"> Develop partnerships with local transportation providers, Constable, Uber, D&A & Pyramid Health Care Number of new partnerships in fiscal year 	<ul style="list-style-type: none"> Drug and alcohol treatment providers Local constables Uber Social service agencies
	Behavioral Health	Patients at Free Clinic Clearfield Jefferson Drug and Alcohol referrals ED referrals	Develop a list of hospital detox beds and rehabs in the area.	<ul style="list-style-type: none"> Up-to-date list of detox and rehab beds for hospital staff to reference. 	<ul style="list-style-type: none"> Cen Clear Drug and Alcohol. Clearfield Jefferson Drug & Alcohol Commission Pyramid Healthcare Work with local VISTA (AmeriCorps funded program Junita College – MH throughout community)
	Behavioral Health	Health care staff, emergency room, physicians and nurses	Educate the staff on drug trends and treatment.	<ul style="list-style-type: none"> Number of education sessions per year Number of attendees Track number of materials distributed 	<ul style="list-style-type: none"> Net Learning on drugs trends and treatment Staff



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 such as 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.¹³ 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 such as heart disease, type 2 diabetes, and obesity, only one in four U.S. adults meets recommended physical activity guidelines.¹⁴ 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.¹⁵ Effective management of chronic diseases involves regular screenings, patient education, and adherence to treatment plans. At Penn Highlands Tyrone, a 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 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.

¹³ [Centers for Disease Control and Prevention](#)

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

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

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	Adults with diabetes	Explore personnel resources to ensure adequate coverage by a registered dietician.	<ul style="list-style-type: none"> • Number of resources needed to fill position 	<ul style="list-style-type: none"> • PHH
	Health Behaviors	Adults with diabetes	Expand process for individualized education (through the use of a discharge packet) for diabetes patients including teaching on disease process, medication management, self-care activities, DME need and use, and symptom recognition as well as coordination of follow-up appts.	<ul style="list-style-type: none"> • Program implemented • Number of materials distributed • Number of programs initiated 	<ul style="list-style-type: none"> • Inpatient units • Case Management • PHPN
	Health Behaviors	Adults with diabetes	Incorporate process of review on health literacy to investigate and support better understanding for patient self- management.	<ul style="list-style-type: none"> • Program implemented • Number of residents interested in seeking additional information • Number of participants 	<ul style="list-style-type: none"> • Regional organizations
	SDOH	Adults with diabetes	Strengthen care coordination through community partnerships, including use of referral software/website to support e-referral process to community resources to address SDOH needs.	<ul style="list-style-type: none"> • Number of referrals/e-referrals 	<ul style="list-style-type: none"> • Commercial payers • Community programs



STRATEGIES NO LONGER BEING ADDRESSED

Penn Highlands Tyrone 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 Tyrone acknowledged a number of health needs that emerged from the CHNA process. Penn Highlands Tyrone 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 because of unforeseen challenges, including resource constraints, lack of engagement, shifting priorities, and insufficient resources (staffing limitations and financial limitations/restrictions). As such, Penn Highlands Tyrone can no longer implement the following:

UNDER ACCESS TO CARE:

- Strengthen swing bed services and increase acuity to include ventilator services.
 - Not pursuing swing ventilator patients.
- Strengthen swing bed services and increase acuity to include ventilator services.
 - Not pursuing swing ventilator patients.

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



MOVING FORWARD

The Penn Highlands Tyrone, community health needs, identified in the 2024 CHNA are multifaceted. Reducing/decreasing, eliminating, or improving access to care, behavioral health, and chronic diseases/ conditions requires continued collaboration among the local health, human, and social services agencies, community partners, and residents.

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

RESOURCE COMMITMENT

Penn Highlands Tyrone will commit in-kind and financial resources during FY24-27 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 Tyrone 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.



Danyell Bundy

System Executive Director Fund Development

Penn Highlands Healthcare

100 Hospital Avenue

DuBois, PA 15801

814-375-6146

DLBundy@phhealthcare.org

phhealthcare.org





phhealthcare.org

