



Empowering Communities:

Unveiling Health Needs, Driving Positive Change

IMPLEMENTATION STRATEGY PLAN (ISP)

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



2024

PREPARED BY TRIPP UMBACH



TABLE OF CONTENTS

Mission Statement	4
Vision Statement	5
Introduction	6
Penn Highlands Elk Services	8
Penn Highlands Elk Awards	9
Penn Highlands Elk Accreditations	9
Background	10
Implementation Strategy Plan Report Purpose	10
De ined Community	11
Penn Highlands Healthcare	12
Overall Prioritized Needs	12
2024-2027 Penn Highlands Elk Prioritized Needs	14
Implementation Strategy Additional Notes	15
Penn Highlands Healthcare Hospitals	15
Access to Care	16
Behavioral Health	20
Chronic Diseases/Conditions	22
Strategies No Longer Being Addressed	24
Moving Forward	26

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 ELK

Penn Highlands Elk has a long history of providing quality care to the region, with a campus in St. Marys and physician offices in several locations, it proudly serves the residents of Elk and Cameron counties. The hospital was created in 1918 due to the Spanish Influenza epidemic. The town had no hospital, and untrained volunteers often cared for the desperately sick.

In April 1922, the local dormant Benedictine monastery was turned into a hospital. The Benedictine Sisters from St. Joseph Convent owned and operated the hospital until 1978, when it was turned over to a public, nonprofit corporation owned by the community. In 1994, the name was changed to St. Marys Regional Medical Center. After the merger with the Elk County General Hospital in Ridgway, the name was again changed to Elk Regional Health Center. In 2011, a Penn Highlands Healthcare partnership was formed. This allowed Elk Regional Health Center to become Penn Highlands Elk in 2013. Penn Highlands Elk has been serving Elk and Cameron counties for 95 years.

The Penn Highlands Elk 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 Elk 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 ELK SERVICES

Acute Inpatient Rehabilitation
Adult Behavioral Health
Breast Health
Breastfeeding Education and Support
Bronchial Thermoplasty
Cancer Care – Outpatient Infusion Center. Hematology, Medical Oncology
Cardiac Rehab
Cardiology
Diabetes and Nutrition Wellness Center
Emergency Care
General Surgery
Healthcare at Home
Inpatient and Intermediate Care
Lab Services
Lymphedema Management
Mammography – 3D Mammography
Medical Imaging (Radiology)
Nuclear Medicine
Occupational Therapy
Ophthalmology

Orthopedics and Sports Medicine
Physical Therapy
Plastic and Reconstructive Surgery
Primary Care
Pulmonary Care
QCare St. Mary's (Walk-in Clinic)
Rehabilitation Services
Senior Care – Skilled Nursing
Sleep Center
Speech Therapy
Surgical Services
Swing Bed
Walk-in Care
Women's Health Services
Wound Care

Community Programs

Bereavement Support Group
Breast Cancer Support Group
Get Screened Community Blood Analysis



PENN HIGHLANDS ELK AWARDS

2024 Lilypad Award - Cameron County Rural Health Center
2023 HAP Donate Life Pennsylvania Hospital Challenge Platinum Designation
2023 Becker's Top Hospital (five stars) for Staff Responsiveness
2023 The Chartis Center for Rural Health Top 100 Rural and Community Hospitals
2023 National Rural Health Association (NRHA) Top 20 Critical Access Hospitals (CAHs)
2022 The Chartis Center for Rural Health - Performance Leadership Award in Quality, Outcomes and Patient Perspective
2022 Healthgrades Outstanding Patient Experience Award
2022 Get With The Guidelines® – Stroke Gold Plus Award
2022 Titanium Designation in the Hospital and Healthsystem Association of Pennsylvania's (HAP) Donate Life Pennsylvania Hospital Challenge
2022 National Rural Health Association (NRHA) Top 20 Critical Access Hospitals (CAHs)
2022 The Chartis Center for Rural Health Top 100 Rural and Community Hospitals

PENN HIGHLANDS ELK ACCREDITATIONS

2023-2026 American College of Radiology (ACR) Accreditation- CT
2023 American College of Radiology (ACR) Accreditation- All Digital/3D Mammography
2021-2024 American College of Radiology (ACR) Accreditation-MRI
2021-2024 American College of Radiology (ACR) Accreditation- Breast MRI
2021-2024 American College of Radiology (ACR) Accreditation-Ultrasound
2021-2024 American College of Radiology (ACR) Accreditation- PET
2023 Mammography Quality Standards Act (MQSA) Certification - 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 Elk 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, 13 ZIP codes were identified as the primary service area for Penn Highlands Elk. The following table highlights the study area focus for the Penn Highlands Elk CHNA, with these ZIP codes accounting for 80% of the hospital’s patient discharges. While most discharges are from Elk and Cameron counties, patients also come from neighboring counties.

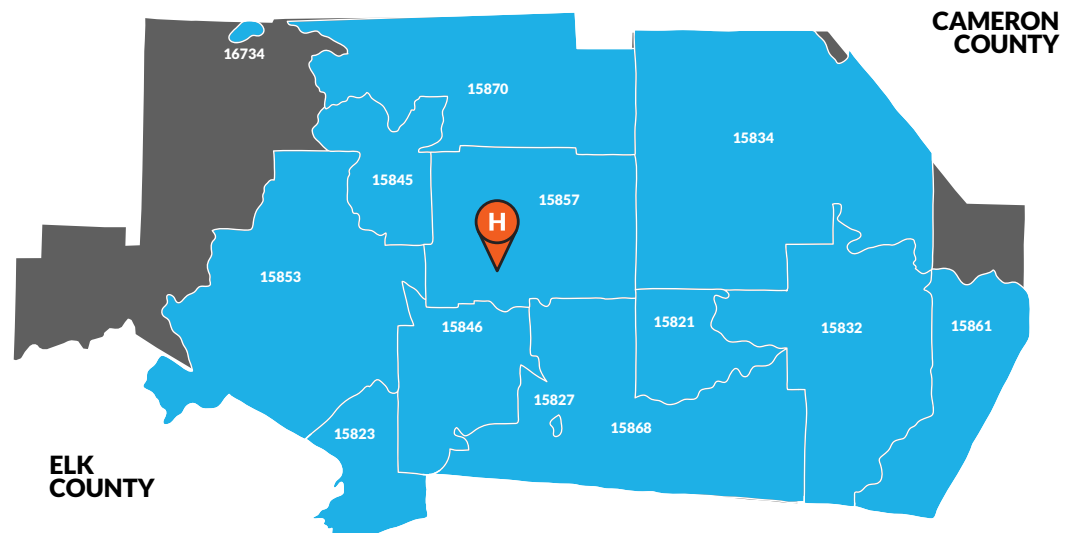
The following table and map of the Penn Highlands Elk geographical location display the hospital’s defined community related to the 13 ZIP codes.

Table 4: 2024 The Penn Highlands Elk Primary Service Area

ZIP Code	Town	County
15832	Driftwood	Cameron
15834	Emporium	Cameron
15861	Sinnamahoning	Cameron
15821	Benezett	Elk
15823	Brockport	Elk
15827	Byrnedale	Elk
15845	Johnsonburg	Elk
15846	Kersey	Elk

ZIP Code	Town	County
15853	Ridgway	Elk
15857	St. Marys	Elk
15868	Weedville	Elk
15870	Wilcox	Elk


ZIP Code	Town	County
16734	James City	Elk



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 Valley⁸	●	●	●	●	●	●

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.)

⁸ 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 PENN HIGHLANDS ELK **PRIORITIZED NEEDS**

Senior leaders from Penn Highlands Elk 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 Elk 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 Elk 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 ELK 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 Elk 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 for Penn Highlands Healthcare service area residents.					
CHNA Need	Subcategory	Target Population	Objectives/Strategies	Evaluation Methods/Metrics (Goals)	Partners
Access to Care	Infrastructure	General population	Distribution of information regarding transportation provided.	<ul style="list-style-type: none"> Track the number of transports 	<ul style="list-style-type: none"> Senior agencies Primary Care Physicians (PCPs) Health Fairs
	Infrastructure	Penn Highlands Elk patients without social support and non-compliance with follow-up.	Improve utilization of PHH Van transportation services by 3% over 3 years.	<ul style="list-style-type: none"> Track the number of transportation/ trips annually for patients in a 70-mile one way radius from PHD. Goal is to increase by 3 percent per yr. Track the number of patients annually transported by FY2025 	<ul style="list-style-type: none"> Senior Centers Community Action Area Agency on Aging (AAA) Internal education w/ social workers for discharge planning

⁹ [Association of American Medical Colleges](#)

¹⁰ [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	Infrastructure	General population	Meet with PHH practice management to inform patients of services.	<ul style="list-style-type: none"> Track the number of meetings with PHH practice managers 	<ul style="list-style-type: none"> Senior Centers Community Action Area Agency on Aging Internal education w/ social workers for discharge planning Senior Leadership/Administration
	Infrastructure	General Population	Distribute information regarding PHH Connect.	<ul style="list-style-type: none"> Track the number of patients transported Track the number of materials distributed Track number of van appointments scheduled and completed 	<ul style="list-style-type: none"> Senior Centers Community Action AAA Internal education w/ social workers for discharge planning Senior Leadership/ Administration PHH
	Infrastructure	Residents who are considered at-risk without social support system/ transportation	Expand neurology service to Elk County residents by offering consultation through Telemedicine.	<ul style="list-style-type: none"> Track the number of telemedicine consults 	<ul style="list-style-type: none"> AAA Senior Centers Housing Authority
	Infrastructure	General Population	Telemedicine commitment to Penn Highlands Elk.	<ul style="list-style-type: none"> Written commitment to implement telemedicine service Availability of eHealth app throughout PH service area 	<ul style="list-style-type: none"> AAA Senior Centers Housing Authority
	Infrastructure	General Population	Work with IT to implement existing equipment.	<ul style="list-style-type: none"> IT infrastructure in place 	<ul style="list-style-type: none"> AAA Senior Centers Housing Authority
	Specialty Care	Elk County residents who meet the medical criteria for lung cancer screening and have not been screened.	Improve the number of baseline lung screenings by 3% over 3 years.	<ul style="list-style-type: none"> Increased percent of baseline lung screenings annually in Elk County. 	<ul style="list-style-type: none"> Senior agencies PCPs Health Fairs (with COVID restrictions)
	Specialty Care	Elk County patients who meet the criteria for a mammogram and have not had one.	Improve the number of baseline mammogram screenings by 3% over 3 years.	<ul style="list-style-type: none"> Track the number of mammograms 	<ul style="list-style-type: none"> Community Groups Health Fairs Women's services
	Specialty Care	General population	Acute Stroke Ready Certification	<ul style="list-style-type: none"> Stroke Quality Measures – American Heart Association Clinical Practice Guidelines Accreditation by the Joint Commission 	<ul style="list-style-type: none"> PH DuBois Primary Stroke Center UPMC Telestroke Services
	Lack of PCP/ Specialist	Anesthesia Family Medicine Orthopedics	Meet with PHH Practice Management and Physician Recruitment to support the recruitment needs of PHH	<ul style="list-style-type: none"> Track the number of signed Letters of Intent Track the number of provider interviews 	<ul style="list-style-type: none"> Physician Recruiters PHH Practice Management

Goal: Early Detection and Prevention.

CHNA Need	Subcategory	Target Population	Objectives/Strategies	Evaluation Methods/Metrics (Goals)	Partners
Cancer	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"> Track the number of public speaking events Track the number of attendees Pre-and post-test results 	<ul style="list-style-type: none"> Physicians Advanced Practice Provider Registered nurses Community Agencies
	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"> Track the number /type of advocacy groups Track the number of new advocacy groups Track region of coverage 	<ul style="list-style-type: none"> Physicians Advanced Practice Provider Registered nurses Community Agencies
	Specialty Care/ Cancer	Elderly and at-risk population Residents with suspected cancer conditions	Feature monthly awareness campaigns to the community regarding specific cancer month. <i>Example: March Colon and October Breast</i>	<ul style="list-style-type: none"> Increase in number of colonoscopies conducted across PHH Increase in number of mammograms across PHH 	<ul style="list-style-type: none"> Pharmaceutical companies GI Lab physician leaders GI Lab admin leaders Area Agency on Aging Practice Management
	Specialty Care/ Cancer	General Population	Tri-County Sunday Education Articles for The Community Radio Education Spots.	<ul style="list-style-type: none"> Track the number of radio spots advertised Track the number of education articles 	<ul style="list-style-type: none"> Pharm companies GI Lab physician leaders GI Lab administration leaders Area Agency on Aging Practice Management Marketing
	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 Track the number of new stakeholders identified 	<ul style="list-style-type: none"> Stakeholders in the cancer community Hahne Cancer Center to facilitate
	Specialty Care/ Cancer	General Population	Develop relationships with stakeholders within the cancer community.	<ul style="list-style-type: none"> Track the number of new partnerships 	<ul style="list-style-type: none"> Stakeholders in the cancer community
	Specialty Care/ Cancer	General Population	Increase cancer awareness among the public.	<ul style="list-style-type: none"> Track the number of presentations made Track the number of participants reached 	<ul style="list-style-type: none"> Physicians APP's Registered nurses



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 annually Track the number of new partners Track the 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 and Alcohol Commission Pyramid Healthcare Health and Human Service Agencies Tri-County Drug and Alcohol Opioid Task Force Cove Forge Elk County Drug and Alcohol Rural Hospital Opioid Program (RHOP)
	Behavioral Health	Health care staff Emergency room Physicians and nurses	Educate the staff on drug trends and treatment.	<ul style="list-style-type: none"> Track the number of education sessions per year Track the number of attendees Track the number of materials distributed 	<ul style="list-style-type: none"> Staff Net Learning on drugs trends and treatment
	Behavioral Health	Patients at Free Clinic Clearfield Jefferson Drug and Alcohol referrals ED referrals	Use internal specialists at PHH to identify and refer patients to 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 and Alcohol Commission Pyramid Healthcare Work with local VISTA (AmeriCorps funded program Junita College – MH throughout community)

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 Elk, 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	Referred patients Elk County and surrounding areas with nutrition needs and/or diabetes.	Expand diabetes and nutrition education services within the Penn Highlands service area. Utilize Telehealth services	<ul style="list-style-type: none"> • Comparison of the number of patients seen in the ZIP codes areas before and after implementation.(EX: FY17-18 visits: DuBois/ Brookville = 1,092) 	<ul style="list-style-type: none"> • Providers in the geographical area
	Health Behaviors	Patients enrolled in Cardiac Rehabilitation	Provide nutrition care and improve overall patient outcomes through providing group education sessions on nutrition for heart health on a monthly basis.	<ul style="list-style-type: none"> • Number of Participants; number of patients coded with billable CPT codes 98797, 93798. 	<ul style="list-style-type: none"> • Cardiac Rehabilitation
	Health Behaviors	Patients limited access to transportation for diabetes management	To alleviate need for multiple stops to ensure compliance and easy access to recommended supplies	<ul style="list-style-type: none"> • Measure inventory/purchases 	<ul style="list-style-type: none"> • PH Community Pharmacies • Diabetes management supply manufacturers
	Health Behaviors	General Population	Provide nutritional resources electronically to partners for distribution to their recipients.	<ul style="list-style-type: none"> • Track the number of partners to whom nutritional resources are shared • Request patient volume that would receive the education 	<ul style="list-style-type: none"> • PHH Marketing/ Communication • PHHD Outpatient Informatics • Dollar Store owners • Area Agency on Aging • Managers of Low- Income Housing • Food Banks • Churches

STRATEGIES **NO LONGER BEING ADDRESSED**

Penn Highlands Elk 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 Elk acknowledged a number of health needs that emerged from the CHNA process. Penn Highlands Elk 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 Elk can no longer implement the following:

CANCER:

- Seek opportunities for public speaking engagements.
 - Discontinued as resource partners are not available.
- Monthly social committee meetings.
 - Discontinued as resource partners are not available.

BEHAVIORAL HEALTH:

- Identify available transportation to treatment.
 - Discontinued as transportation providers are not available in the area.

CHRONIC DISEASES/CONDITIONS:

- Open satellite sites of the Diabetes & Nutrition Wellness Center in Brookville & Clarion, and Elk and provide diabetes/ nutrition education on a bimonthly basis at each location.
 - Discontinued due to insufficient staffing resources.
- Continue enrollment with the Center for Medicare and Medicaid Services for Diabetes Prevention Program.
 - Discontinued due to insufficient staffing resources.
- Offer Diabetes Prevention Programming throughout the PHH Service area by beginning with one cohort per year.
 - Discontinued due to insufficient staffing resources.

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

MOVING FORWARD

The Penn Highlands Elk, 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 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 Elk will continue to engage residents as part of the CHNA and ISP. The implemented strategies and initiatives will strengthen Penn Highlands Elk for all citizens within the service area.

RESOURCE COMMITMENT

Penn Highlands Elk will commit in-kind and financial resources during this CHNA cycle 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 Elk 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.

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

