

Community Health Needs Assessment 2012

Healthy Northeast Pennsylvania Initiative

The **INSTITUTE** for
Public Policy & Economic Development

A partnership among Keystone College, King's College, Luzerne County Community College, Marywood University, Misericordia University, Penn State Wilkes-Barre, The Commonwealth Medical College, University of Scranton, & Wilkes University

Steering Committee

Community Needs Health Assessment Steering Committee 2012

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Steve Szydowski - HNPI Executive Director

Kris Augustine - Greater Scranton Chamber of Commerce

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Dr. Linda Thomas - The Wright Center

Dr. Janet Townsend – The Commonwealth Medical College

Mary Wetherall - The Wright Center

Dan West- University of Scranton

Tracey Wolfe – Geisinger Health System

Purpose

- Community Health Needs Assessment
 - Assess the need
 - Align the resources
 - Identify the intervention
- Outmigration of Care
 - Patient perception
 - Provider perception
 - Type and location of external service providers

Survey

- Household Survey
 - Random Sample
 - 12,000 residents in Lackawanna and Luzerne Counties
 - 12.1% response rate

Survey Results

- Over 95 percent of respondents had personal doctor or healthcare provider
- Over 93 percent of respondents had been examined by a medical doctor during the past 12 months
- Good wait times for appointment scheduling
- Many respondents waited 15-30 minutes to be seen by a physician when they arrive for an appointment
- Most seek health information from the Internet or a relative/friend

Survey Results

- Average Body Mass Index (BMI) was 28.5
- When asked about their health in general, 46 respondents said it was good while 23 said their health was average
- 46 percent said there were no days when their physical health was not good, while 34 percent indicated there were between one and five days
- 56 percent no days when their mental health was not good

Survey Results

- Chronic conditions

Please check if you have been diagnosed with a condition and what, if any, treatment(s) you have received.

| Chronic Condition | % |
|--------------------------------------|-----|
| High Blood Pressure | 51% |
| High Cholesterol | 45% |
| Arthritis | 29% |
| Type 2 Diabetes | 14% |
| Angina or Coronary Artery Disease | 9% |
| COPD or Pulmonary Disease | 8% |
| Heart Attack (Myocardial Infraction) | 8% |
| Asthma | 7% |
| Type 1 Diabetes | 3% |

Survey Results

- Cancer
 - 19 percent of respondents
 - Most common types of cancer were prostate (23.3 percent) breast (13 percent) melanoma (5 percent) and skin (12 percent)
 - Most common treatments for those with cancer diagnoses were surgery (70 percent), radiation (28 percent) and chemotherapy (21 percent)
 - 40 percent left the region for medical care

Survey Results

- Physical activity discussions with doctor high
- Good access to fruits and vegetables.
- One-third said they eat fast food a few times per month
- Most take daily vitamins or supplements.

Survey Results

■ Screenings/Prevention

| Have you received any of the following in the past year? | |
|--|-----|
| Screenings/Preventions | % |
| Blood test | 79% |
| Check up/Physical | 76% |
| Cholesterol test | 66% |
| Flu shot | 58% |
| Urinalysis | 48% |
| EKG | 33% |
| Mammogram (Females only) | 26% |
| Prostate test (Males only) | 25% |
| Pneumonia vaccination | 22% |
| Colonoscopy | 20% |
| Pap smear (Females only) | 20% |

Survey Results

- Mental health

| Has a doctor or other healthcare provider EVER told you that you have any of the following conditions? | |
|--|-----|
| Conditions | % |
| Anxiety/Stress disorders | 16% |
| Depression | 15% |
| Substance abuse | 4% |
| Bipolar disorder | 2% |
| Schizophrenia | 1% |

Survey Results

- Most respondents (84 percent) did not smoke cigarettes.
- A total of 64 percent of survey respondents said they had an alcoholic beverage during the past month.
- Most respondents (85 percent) said they do not know how to obtain illegal drugs.

Survey Results

- Over 90 percent have health insurance
- Most had insurance through an employer (46%) or Medicare (42%)
- Only 8 percent of respondents had time during the past twelve months with no health insurance.
- Biggest health problems facing community was cost of healthcare and cost of insurance.

Survey Results

- More elder care specialists needed
- More education on cancer prevention, diet/exercise, Alzheimer's, and stress management

Survey Results

| Distribution of Gender and Age, and Race/Ethnicity as compared to population | | |
|--|------------|--------|
| Variable | Population | Sample |
| Gender | | |
| Female | 51% | 48% |
| Male | 49% | 52% |
| Age | | |
| Median Age | 42 | 63 |
| Race/Ethnicity | | |
| White | 92% | 94% |
| Hispanic/Latino | 6% | 4% |
| Black/African American | 3% | 2% |
| Asian | 1% | 1% |

Interviews

- Interviews: 26 stakeholders
 - Major employers
 - Federally Qualified Health Center and a free medical clinic
 - Pennsylvania Department of Public Health
 - Social scientists/researchers
 - Philanthropist and health policy advisor
 - Disease-based organizations
 - Social service organizations
 - Mental and behavioral health organizations
 - Epidemiology/Environmental specialists
 - Primary care physicians
 - Surgeon
 - Medical technologist

Interviews

- Vision for a healthy community included people getting health services regardless of insurance status, income or race/ethnicity
- Poverty is a major health challenge
- Lack of primary care and dental insurance
- Autism and Autism Spectrum Disorders are a large problem in the region
- Hard living population – drinkers, smokers and overweight

Interviews

- Pennsylvania has a limited number of physicians moving into primary care
- Lack of patient compliance a problem
- Mental health issues surpassing physical
- Language is a barrier both from the provider perspective and also at the state and local government level

Focus Groups

- Focus Groups (10 groups convened)
 - Hispanic/Latino
 - African American (2)
 - Impoverished
 - Aging
 - Physically/Mentally challenged
 - Youth
 - Chronic disease/Public health organizations
 - Major employers
 - Behavior Based (Substance abuse) organizations

Focus Groups

- Obesity related diseases and cancer are the top two health problems in the region
- Negative view of doctors in the region
- Significant substance abuse problem in this region
- Much greater access to drugs now than there used to be
- More inpatient mental health and drug and alcohol treatment programs needed

Focus Groups

- While there are many free clinics in the area those without insurance still feel they do not have access to healthcare
- Individuals with mental health issues face a stigma that discourages them from seeking treatment
- While many employers in the region offer employees wellness programs, diabetes is an issue
- Minority groups feel there is a lack of cultural sensitivity

Secondary Data

- Demographic, economic, health status, incidences of disease, and insurance status
- Benchmarked against statewide indicators
- Region falling behind Commonwealth in key areas
- Region is slightly older and less diverse
- Fewer primary care physicians and physicians per 100,000
- County Health Rankings show that neither Lackawanna County nor Luzerne County are among the state's top counties

Secondary Data

- Region contains more smokers, excessive drinkers and its residents are less physically active than the Commonwealth overall
- Cancer and heart disease continue to be a main causes of death for the region's adult population
- A diet lacking fruits and vegetables and high blood pressure are the two highest factors contributing to premature death

Outmigration of Care

- Series of questions in survey, focus groups, and interviews
- Electronic survey distributed to members of the Lackawanna and Luzerne County Medical Societies; 4.4% response
- Provider Interviews
- Patient Interviews

Patient Perception

- Local hospital environment – 76 percent good or excellent
- 60 percent quality of care good or excellent
- 67 percent quality of doctors good or excellent
- One quarter sought care out of the region
- Higher education level most likely to have care outside of region

Type of care

| What was the specialty of care you received? | |
|--|-----|
| Type of Care | % |
| General Medicine | 19% |
| Orthopedic | 16% |
| Internal Medicine | 14% |
| Cardiac | 14% |
| Neurology | 12% |
| Oncology | 10% |
| Ophthalmology | 9% |
| Gynecology | 8% |
| Trauma | 4% |
| Infectious Disease | 3% |

Provider Surveys/Interviews

- Almost all physicians have or would refer patients out of the area for care
- Neurology and neurosurgery were key services referred outside of the area
- Many facilities were identified as referral destinations.
- Disrespecting the patient and fragmentation of care were identified as issues by primary care physicians and patients

Patient Perception - Patient

- Patients left the region for medical care of the advice of a physician
- General consensus that patient must leave for “quality care”
- Hospitals were perceived as “outdated”
- Fragmentation is an issue

Exports

- Utilization data outside and inside BCNEPA's thirteen-county service area
- Increases in either patients or visits in 2010 and decreases the following year
- Most common conditions for which residents sought care outside service area were cancer, musculoskeletal, gastrointestinal and "other" in an out-patient setting and musculoskeletal, gastrointestinal, and cardiovascular in an in-patient setting

Exports

- Lackawanna and Luzerne Counties have a reciprocal relationship. Each county receives the highest number of patients from the other than any other county
- More residents leave the BCNEPA services for outpatient cancer service than stay inside it.
- Residents from both counties were most frequently treated within the Commonwealth of Pennsylvania for inpatient and outpatient services

Asset Map

- Searches of providers and programs
- Detailed health care programs, resources and initiatives coordinated by non-profit organizations and government
- The categories included aging, disease based, teen pregnancy, suicide, low-income, behavioral and mental health
- Duplication in many programs
- Gap in non-profit initiatives for the aging, mental health programs for youth, and behavioral programs for young adults

Analysis: Strengths

- Both counties ranked average in clinical care
- The respondents perceived the region has overall good health
- The region has a variety of medical specialists and hospital facilities.
- The two major insurers are focusing on preventative care
- Several free health clinics in region
- There are a variety of services available to area residents

Analysis: Weaknesses

- Region falls behind Commonwealth
- Obesity
- Depth of specialty doctors varies between hospitals
- Drinking alcohol prevalent
- Low numbers on screenings
- Residents believe better quality outside of region
- Substance abuse a problem
- Limited number of all doctors accepting MA
- Funding and programs not increasing with demand
- Need for more physicians and specialists
- Information on these programs and how to use them can be difficult to find.
- Scope of most specialists limited
- No research, innovation or collaboration noted
- No world-renowned physicians or techniques noted locally
- Lack of communication and cooperation between primary and specialists

Analysis: Opportunities

- High school graduates can be trained in health careers
- Increase number of physicians per capita
- Create a network of specialists fill gaps and keep patients
- Provide more elder care specialists
- Provide education on cancer, diet/exercise, Alzheimer's, stress management, child abuse/family violence
- Create a more diverse healthcare workforce
- Health education youth programs
- Increase inpatient mental health and drug treatment facilities
- Add more health programs at work
- Increase cultural and language training for health care workers
- Work with public transportation
- Strategically plan to re-write how mental health challenges are coordinated
- Increase health literacy
- Create a network for residents to find the help that they need.

Analysis: Threats

- High regional poverty rate
- Smoking, drinkers less physical activity
- Hospitals with more depth in specialties and better reputations
- Chronic diseases put a financial drag on the system
- Income related to health status
- Few ways to obtain knowledge about health programs
- Low opinion of doctors
- Lack of bilingual providers an issue
- Patient compliance problematic
- Limited mental health resources
- Hospitals outdated
- Physician quality is poor
- Mental health resources lacking locally
- Local physicians do refer patients to specialists out of area
- Local specialists limited in quantity
- Physicians show lack of respect for patients

Recommendations

- Healthcare delivery system
 - Promote team approach
 - Encourage mental health training for health care workers
 - Develop 2nd language training programs
 - Documents produced in Spanish
 - Diverse workforce
 - Availability of specialists in the region
 - Collaborative initiatives with major research hospitals.
 - Increase the number mental health specialists.
 - Increase number of providers accepting medical assistance.
 - Evaluate and enhance the physical environment of older hospitals.
 - Need larger network of local specialists, especially geriatrics.
 - Open primary care clinics for medical assistance patients only

Recommendations

- **Regional Collaborative Initiatives**
 - Regional database of resources
 - Coordinate social services, public transportation, healthcare, chronic disease organizations, local free clinic network, and workforce development
 - Create a regional health education series in multiple languages
 - Create mental health awareness programs
 - Develop healthcare occupation programs

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