

Community Health Improvement Plan

Well Focused

Meeting the needs of Central Pennsylvania's communities

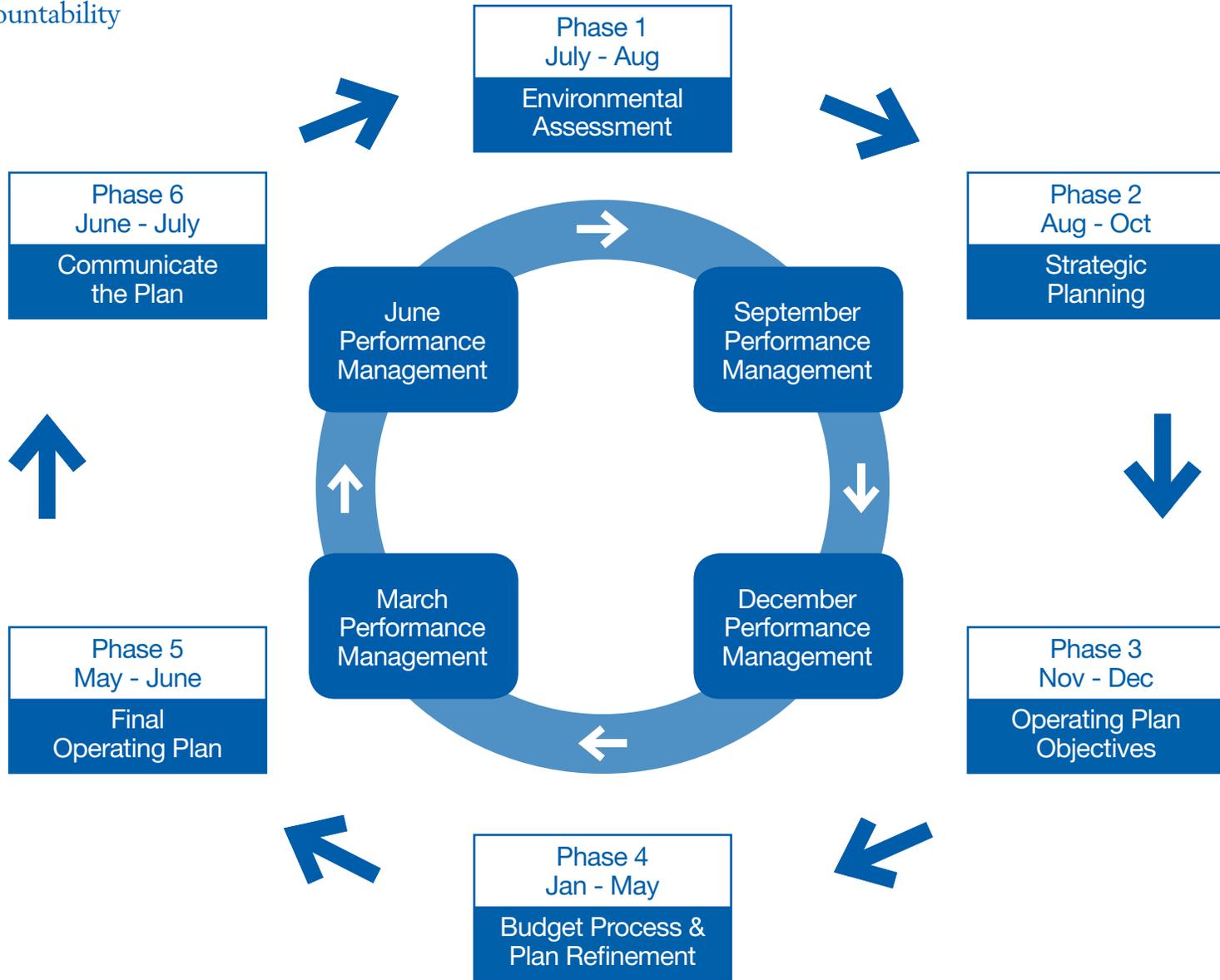
WellSpan Medical Group
WellSpan Ephrata Community Hospital
WellSpan Good Samaritan Hospital
WellSpan York Hospital

WellSpan Surgery & Rehabilitation Hospital
WellSpan VNA Home Care
Philhaven



WellSpan Health Planning Process

A continuous cycle of assessment, planning, implementation accountability



WELLSPAN'S MISSION

Working as one to improve health
through exceptional care for all,
lifelong wellness and
healthy communities.

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Introduction

At WellSpan Health, we recognize that the pursuit of better health requires a focus that goes well beyond the walls of our hospitals, physician offices and health centers. That's why we work as one with the communities of Adams, Lancaster, Lebanon and York counties to understand local health care needs and create healthier places to live, work and play

This commitment to the good health of our friends and neighbors has been the driving force behind our evolution and transformation as a comprehensive, coordinated community health system.

WellSpan's journey in community health improvement spans decades. What began in the early 1990s has evolved into a core value of the health system, a network of innovative programs, and a sustainable model that has a strategic, continuous focus.

Evidence of this commitment can be seen in the health system's mission, governance, planning strategies, processes, and organizational structure. For example, a commitment to improving community health and serving local communities is embedded into the nine core strategies of the organization's strategic plan. Through these strategies and a cyclical planning process, board members, community members, managers and physicians engage in the community health assessment, develop priorities for meeting the communities' most significant needs, and review community health performance at least twice a year.

Incentivized to achieve results, leaders ensure that interventions are impactful, integrated and sustainable via continuous improvement, investment, partnerships and long-term development. This commitment has been championed by the system's Board of Directors, which holds management accountable, allocates resources and actively participates in the health system's mission-driven programs. Assessment and reporting guidelines enable the integration of community health priorities into strategic planning processes and system-wide adoption by various WellSpan entities

Community Health Needs Assessment (CHNA) Methodology

History of the Community Health Needs Assessment

Conducting a Community Health Needs Assessment (CHNA) every three years has been core to WellSpan's community health and benefit strategy since the early 1990s. Through collaborations with local health coalitions and community partners, WellSpan Health acquires diverse information from community members pertaining to health, lifestyle behaviors, finances, access to health services, and other related topics. Previous CHNAs were conducted as follows:

- Adams and York counties – a regional CHNA, with county-specific data, was conducted in partnership with Healthy Adams County and the Healthy York County Coalition (county health coalitions) for the last two cycles. This CHNA uses a combination of primary and secondary data sources.
- Ephrata area – WellSpan Ephrata Community Hospital has partnered with Lancaster General Health (LGH) and Healthy Communities Institute to regularly collect, update and make secondary data available to community members online. This partnership continues although WellSpan conducts a local CHNA of the Ephrata area population that WellSpan serves.
- Lebanon County – WellSpan Good Samaritan Hospital has engaged community leaders and stakeholders in interviews related to secondary data, community resources and potential priorities.

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- Philhaven – this behavioral health system utilized secondary data and two community forums to determine and prioritize needs of a four-county region – Dauphin, Lancaster, Lebanon and York – in southcentral Pennsylvania.

Like many other health care systems in the region and across the United States, WellSpan Health has recently expanded its ability to reach community members in south central Pennsylvania by affiliating with two additional healthcare organizations – Ephrata Community Hospital in 2013 and Good Samaritan Health System in 2015. As a result, WellSpan Health coordinated its data collection and prioritization processes, while ensuring that data review, input into the context of the data and development of priorities occurred at the local level. Community Health & Wellness staff are actively engaged in local CHNA processes, including survey development, data collection and analysis, and result dissemination. In addition, Board members support identified priorities by communicating them to their respective organizations and to the general public.

Although CHNAs are not new to WellSpan and the communities it serves, the Patient Protection and Affordable Care Act of 2010 (PPACA) required that all non profit, tax exempt hospitals in the United States conduct an assessment every three years, determine health priorities, and prepare a multi-year strategic plan to address selected priorities. WellSpan’s nearly two decade history of conducting CHNAs ably prepared it to respond to these requirements.

Planning for the 2015 CHNA

Input from diverse stakeholders and a commitment to the overall process is vital when conducting a community-wide CHNA. Numerous stakeholders from the four communities in which the CHNA was conducted participated in the planning and data review process, and represented the following community sectors:

	Adams County	Lebanon County	Northern Lancaster County	York County
Behavioral Health	X	X	X	X
College / University	X			X
County/ Municipal Government	X			X
Faith-based Community			X	
Federally Qualified Health Center (FQHC)	X	X	X	X
Health Coalition / Partner	X	X		X
Healthcare Providers	X	X	X	X
Philanthropic Organization				X
Recreation Centers (YMCA/YWCA)	X	X	X	X
Schools (Elementary-High)			X	
United Way		X		X

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Implementation of the CHNA occurred through a contract with the Floyd Institute for Public Policy at Franklin and Marshall College. Berwood Yost, director of the institute and project consultant for the 2015 CHNA, has an extensive background conducting and analyzing community and corporate surveys, and has led past CHNAs. Community stakeholders collectively determined the battery of survey questions; discussed data collection methodology, including sample size and method of obtaining data; reviewed the raw data and supporting charts and graphs; and identified the priority setting process to be utilized in community forums.

Planning for the 2015 CHNA included processes that captured community interests, reflected industry standards, and were consumer friendly. Committee members in Adams and York counties utilized a similar process to the 2012 CHNA, in which core questions from the Behavioral Risk Factor Surveillance System (BRFSS) were supplemented by additional questions in key focus areas (e.g., end of life care, nutrition, physical activity). These questions were previously validated and utilized by the Centers for Disease Control and Prevention (CDC) in national and state-wide survey instruments. In addition, the Committee felt it was essential to utilize the same questions, when possible, as in previous CHNAs to monitor data trends. Selected questions were then organized into four key areas – access, health behaviors, health conditions, and prevention behaviors – as determined by the CHNA planning committee. This process was adopted for use in the northern Lancaster and Lebanon County CHNAs

Survey Implementation and Data Analysis

A statistically significant sample size was obtained for each of the four counties assessed and interviews were conducted over several months, as below:

	Adults Interviewed	Dates Interviewed
Adams County	769	October 27- December 12, 2014
Lebanon County	896	February 23- May 5, 2015
Northern Lancaster County	729	February 23- May 5, 2015
York County	1,028	October 27- December 12, 2014

The sample size represented the adult, non-institutionalized population of each county. Supplemental data were compiled to expand upon the data collected from interviewees and enabled the development of a comprehensive CHNA. Examples of additional data collected include demographic information from the U.S. Census Bureau; trending data related to lifestyle and health derived from the Pennsylvania Department of Health (DOH); and vital statistics related to birth and death rates, also from the Pennsylvania Department of Health. Much of the comparative health data utilized the Robert Wood Johnson Foundation's County Health Rankings, annual rankings which demonstrate the performance of each Pennsylvania county in comparison to one another. These rankings provide information on health factors and health outcomes specifically.

Data analyzed by the Floyd Institute for Public Policy included breakdowns by age, gender, geographic area, race/ethnicity and income level. Additional cross-tabulations were conducted to demonstrate the complexities of some of the most striking CHNA results, such as the influence of disparities on particular variables. Results were shared with the CHNA planning committee in PowerPoint presentation and written reporting formats. Subsequent reports were modified slightly before dissemination to community stakeholders and at community forums. All CHNA reports are available online through the WellSpan Health website.

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Priority Identification Process – Community and WellSpan Health

WellSpan Health is fortunate in that it has cultivated the collaborative support of many community members to resolve community health priorities and improve the current and future health of their counties. In order to facilitate community support on key health issues, stakeholders in each respective community reviewed the CHNA results and developed an initial list of community health priorities, based on:

- Who is affected (The prevalence and reach of the health issue or concern);
- How we will react (The ability of the community to respond to the priority);
- How many people we can help (The number of potential community members influenced by the priority);

- What happens if we do not respond (The consequences of not responding to the priority),
- What disparities exist and how we can ensure that the disparities will be addressed.

A similar approach was used by WellSpan Health when identifying community health priorities for the integrated healthcare system (Table 1). CHNA results were presented to the WellSpan Health Board of Directors Planning Committee for review and prioritization. Planning Committee members were also apprised of the health priorities selected by the community at large in order to identify opportunities to support community-wide efforts to address key issues. In addition, hospital and entity board members further commented on and prioritized needs based upon their respective communities' needs.

Although the priority identification process was similar

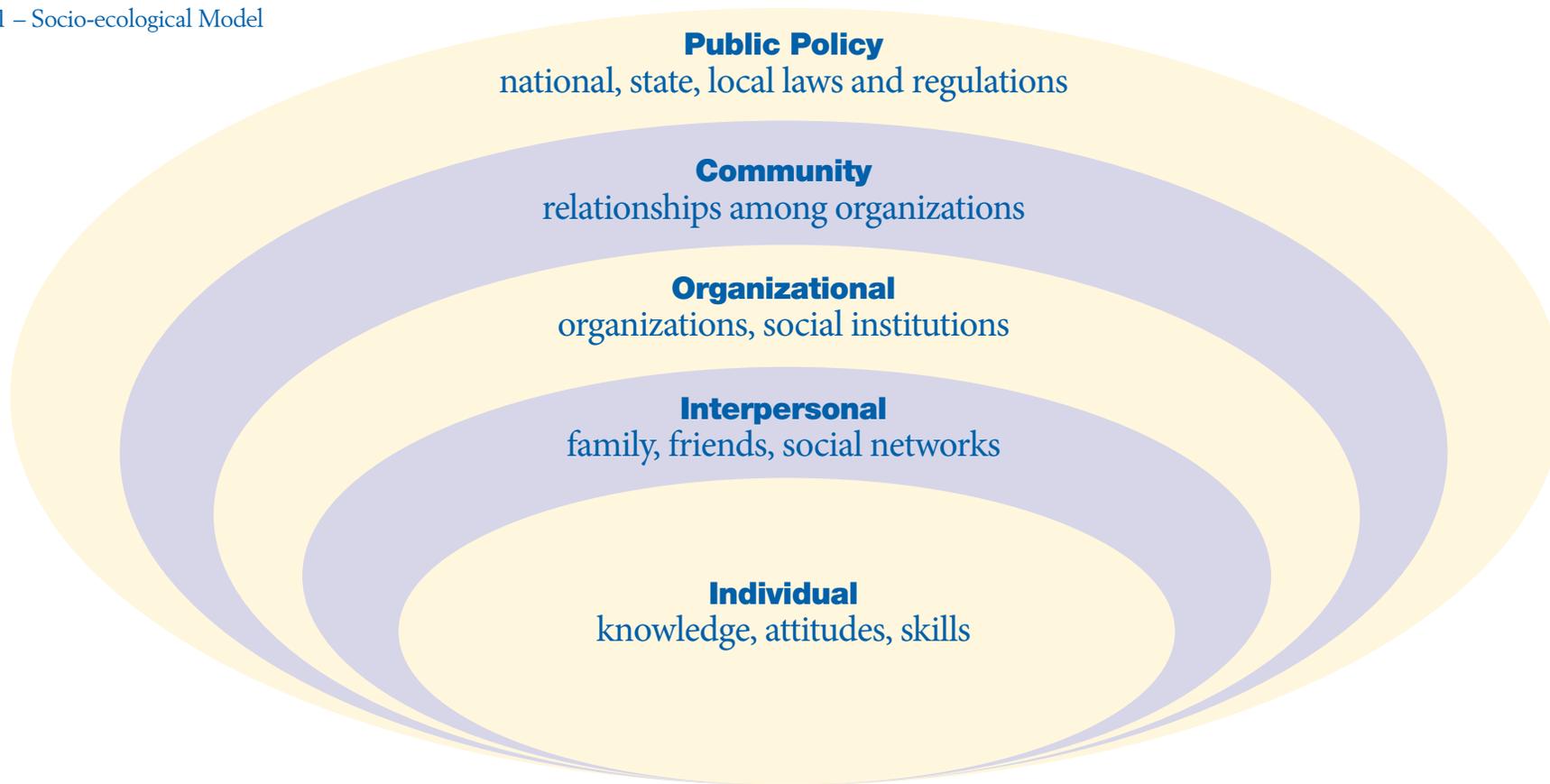
between the community setting and WellSpan Health, the approach to addressing the identified priorities will vary slightly. As a health care system, WellSpan Health will respond to health and lifestyle issues as they relate to healthcare, access to care, education, and community capacity building. Comparatively, communities will primarily focus on influencing CHNA results through a policy and systems approach. By coordinating these approaches, WellSpan hopes to reach each layer of the socio-ecological model (Figure 1), thus maximizing the potential impact on an individual's behaviors and overall health.

Table 1: Community Health Needs Assessment (CHNA) Priorities

	Access (high deductible plans)	Adult overweight and obesity	Behavioral health	Chronic disease management	Dental care	Emerging drug use and abuse	Maternal child health
Ephrata Community Hospital	X	X	X	X		X	
Gettysburg Hospital	X	X	X				
Good Samaritan Hospital		X	X		X	X	
Philhaven	X	X	X			X	
WellSpan Medical Group	X	X	X	X		X	X
WellSpan Surgery & Rehab Hospital	X	X	X	X		X	X
York Hospital	X	X	X	X		X	X

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Figure 1 – Socio-ecological Model



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Community Health Priorities for FY2017-2019

WellSpan's Community Health Improvement Plan (page 10) provides a framework for the organization's programs and activities that promote health and wellness in response to the needs identified in the Community Health Needs Assessment. These areas of focus meet at least one, and often several, of the community benefit guidelines of a nonprofit health system, as outlined by the Catholic Health Association: improving access to healthcare services; enhancing the health of the community; advancing medical or healthcare knowledge, or relieving or reducing the burden of government or other community efforts. Specific priorities are then incorporated into WellSpan's annual operating plan and budget.

In addition, seven core principles are: foundational to planning; reflected in each of the strategic areas and priorities; and will enable WellSpan to meet the needs identified in the Community Health Needs Assessment. These principles are:

- Adoption of a broad population health definition
- Integration of cultural competency and health literacy tenets
- Emphasis on vulnerable populations and addressing unmet health-related needs
- Collaboration with diverse populations and stakeholders

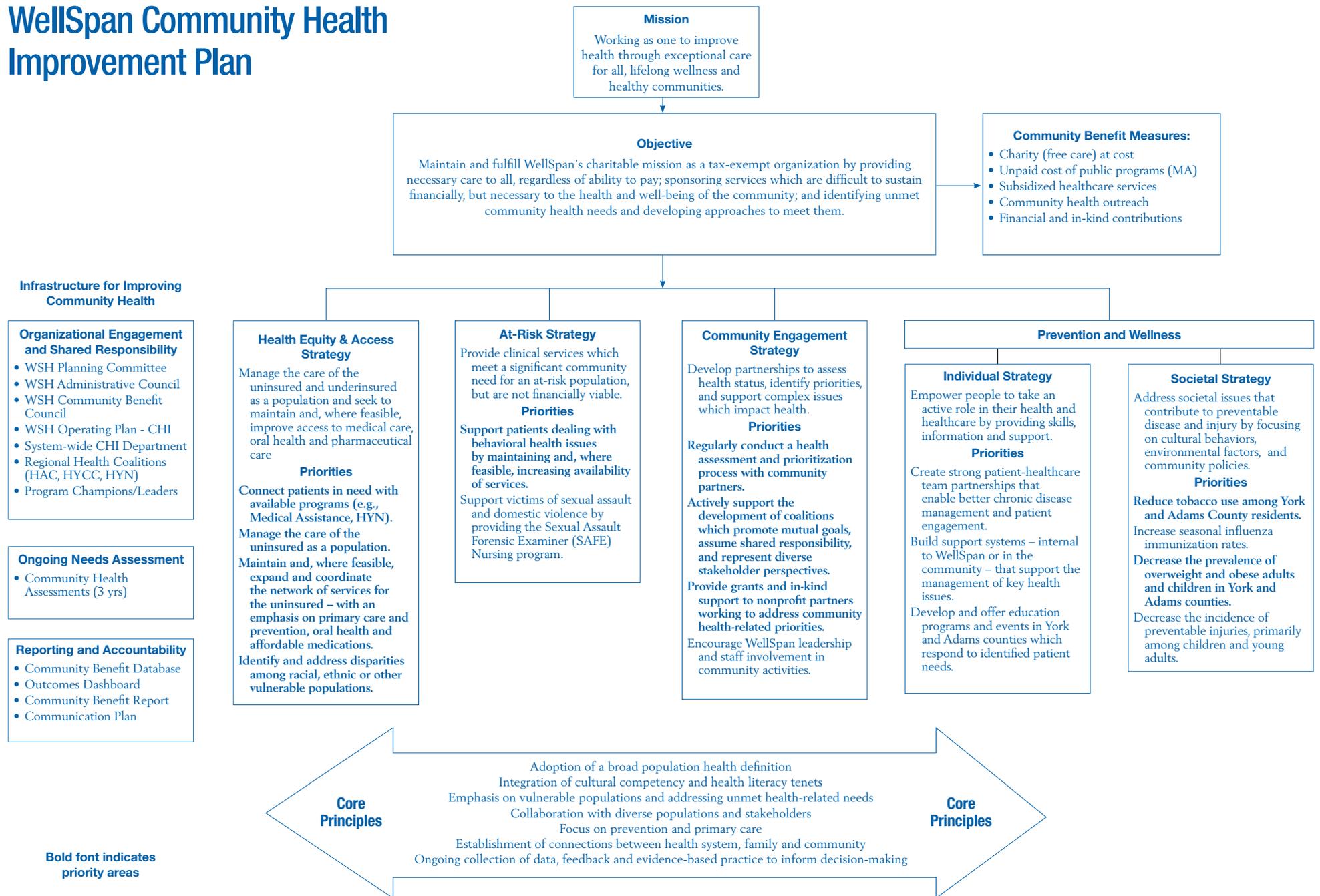
- Focus on prevention and primary care
- Establishment of connections among health system, family and community
- Ongoing collection of data, feedback and evidence-based practice to inform decision-making

Based on Community Health Needs Assessment results, WellSpan's three-year priorities within its Community Health Implementation Plan include:

- **HEALTH EQUITY AND ACCESS: Manage the care of the uninsured and underinsured as a population and seek to maintain and, where feasible, improve access to medical care, oral health and pharmaceutical care**
 - FY2017-2019 Focus: Develop and maintain a strong safety net while identifying and addressing gaps being created due to the emergence of high deductible plans and disparities in social determinants of health.
- **AT RISK POPULATIONS: Provide clinical services which meet a significant community need for an at-risk population, but are not financially viable**
 - FY2017-2019 Focus: Improve access to behavioral health services through the recent affiliation with WellSpan Philhaven.

- **COMMUNITY ENGAGEMENT: Develop partnerships to assess health status, identify priorities and support complex issues which impact health**
 - FY2017-2019 Focus: Engage the community, through coalitions and partnerships, to address the following issues: healthy food availability; horizon planning (end of life care); pediatric injury prevention, physical activity, and; social determinants of health.
- **PREVENTION AND WELLNESS: Increase the number of people who are healthy and well by empowering people to take an active role in their health and addressing issues which contribute to preventable disease and injury**
 - FY2017-2019 Focus: Develop initiatives and resources that demonstrate improvements in three areas: adult overweight/obesity, maternal-child health, and opioid/prescription drug use and abuse.

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Health Equity and Access Strategy

PRIORITY: ACCESS

WellSpan Health values the patient-provider relationship and has worked diligently, over the last decade, to increase access to primary care providers and specialists. According to the 2015 Community Health Needs Assessment (CHNA), between 88 percent and 91 percent of adults in the communities that WellSpan serve indicated that they had a personal physician. In addition, more than 920,000 patient visits were made to WellSpan Medical Group primary care providers, a network of nearly 1,000 primary care providers and specialists across the region. Promoting the patient-provider relationship extends beyond the health care system though, as WellSpan partners with Family First Health and Welsh Mountain, local Federally Qualified Health Centers (FQHC), and other clinics to implement strategies that increase patient access to local providers.

Access to health care insurance in the area served by WellSpan Health also is high, with 88 percent to 92 percent of respondents advising that they have health care coverage. However, the definition for “health care coverage” is ambiguous and may include commercial insurance, Medical Assistance, Medicare and Healthy Community Network. The advent of government health exchanges and state expansion of Medicaid, while effectively transitioning many previously uninsured community members to insurance options, has also created gaps in care due to the “purchase” of high deductible plans. WellSpan Health has recognized this disparity and intends to develop system-wide strategies to address the issue.

As the delivery of health care shifts nationally to a population health model, WellSpan Health has developed accountable care relationships with diverse partners to improve the health of certain populations (i.e., employer groups, Medicare), and is exploring the impact of social determinants of health (e.g., culture, education, employment, housing, language and literacy, public safety transportation) on an individual’s health as well as that of the community at-large. This approach – in which health extends beyond the care and treatment of episodic events – is dependent upon a community-based model that engages stakeholders and seeks to transform our communities into healthier places to live, work and play.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Develop and maintain a strong safety net of services that improve access to care among vulnerable populations.	1.1: Partner with local Federally Qualified Health Centers (e.g., Family First Health and Welsh Mountain) and other organizations and clinics to support the diverse health needs of this population.	X	X	X	X	X	X	X	X
	1.2: Advance Healthy Community Network as a partnership between WellSpan Health, physicians and community partners to support prospective enrollment, the management and support of patients, and coordination of care, with a focus on expansion into northern Lancaster County and Lebanon County.	X	X	X	X		X	X	X
	1.3: Maintain and broadly communicate WellSpan Health’s financial assistance policy, providing free or discounted care for qualifying patients.	X	X	X	X	X	X	X	X

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Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
2. Understand how gaps in patient care created by the emergence of and enrollment in high deductible plans impact vulnerable populations.	2.1: Identify, evaluate and implement strategies to understand and address medication access.	X	X	X	X		X	X	X
3. Improve patient care by focusing on underlying cultural and environmental conditions.	3.1: Improve access to culturally-appropriate care, with a focus on ensuring access to and compliance with quality interpretation services.	X	X	X	X		X	X	X
	3.2: Collaborate with community coalitions and stakeholders to identify, collect, and analyze data to better understand social determinants of health (i.e., education, housing, poverty, etc.), their impact on patient health, and opportunities to coordinate how any gaps could be addressed.	X							

System-wide refers to all WellSpan Health entities, including: Corporate functions; Ephrata Community Hospital (ECH); Gettysburg Hospital (GH); Good Samaritan Hospital (GSH); Philhaven Behavioral health; Population Health services; Visiting Nurse Association (VNA); WellSpan Medical Group (WMG); WellSpan Surgery and Rehabilitation Hospital (WSRH) and York Hospital (YH).

At-Risk Strategy

PRIORITY: Behavioral Health

In 2015, nearly one in five adults – approximately 120,000 community members in our region – reported that they were diagnosed with some form of depression. Similarly, nearly the same number of adults have been diagnosed with anxiety. Given the stigma often associated with these conditions, this statistic is believed to be relatively low. Data demonstrate that women were more likely to be diagnosed with depression, possibly since they may have sought care and treatment, as well as individuals living in poverty and those who have been diagnosed with heart disease, heart attack or stroke. Comparatively, individuals who are married are less likely to have a depressive disorder.

Behavioral health issues impact our communities much like others across the United States. As the largest health care and behavioral health provider in our area, WellSpan Health cares for many patients suffering from depression, anxiety and other behavioral health issues. Most regional health systems no longer sponsor behavioral health services because of the low-level at which they are reimbursed. WellSpan Health has provided a network of behavioral health services which meets a significant need in the local population. This network expanded in 2016 when WellSpan Health affiliated with Philhaven, the nation’s 13th largest behavioral health provider. This new relationship will

enhance WellSpan’s ability to identify and refer those with anxiety and depression, explore and implement alternate behavioral health care models, strengthen the pipeline of behavioral health providers serving our communities and expand community partnerships to address complex behavioral health issues.

Effectively managing behavioral health issues is further complicated by a shortage of behavioral health providers. WellSpan Health recognizes this local concern and is developing strategies to improve access to and the quantity of behavioral health providers in the community it serves, both nationally and locally.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Increase the number of primary care patients who are screened for anxiety/depression and, when appropriate, referred to effective resources.	1.1: Integrate a standardized anxiety/depression screening tool (e.g., PHQ-9) into the electronic health record and monitor collected data for population trends.	X	X	X	X		X	X	X
	1.2: Expand the model for integrating behavioral health providers within WellSpan Medical Group patient-centered medical homes.						X		
	1.3: Expand behavioral health training resources within the WellSpan Medical Group health coach curriculum.	X					X		
2. Improve the availability and provision of behavioral health services to residents across the region.	2.1: Explore alternate models for providing behavioral health services, such as telepsychiatry in emergency departments.	X	X	X	X	X	X		X
	2.2: Identify opportunities to expand inpatient and outpatient services, including the timeliness of appointments.	X	X	X	X	X	X		X

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Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
3. Develop innovative methods to partner with community stakeholders and to develop the capacity to address behavioral health issues.	3.1: Identify opportunities to expand mental health first aid training to community members across WellSpan's service area.	X				X			
	3.2: Research the feasibility of utilizing a behavioral health decision support tool (e.g., NavWell) within the community.	X				X			
	3.3: Expand the existing community-wide depression awareness campaign (e.g., Feeling Blue) to focus on supporting targeted populations, to be determined (i.e., adolescent resources, provider-education toolkit).	X				X			
	3.4: Evaluate the efficacy of developing new or strengthening existing community partnerships to address substance abuse or related behavioral health topics (i.e., alcohol/binge drinking, suicide, tobacco).	X				X			
4. Increase the availability of behavioral health professionals in the region.	4.1: Develop and implement a local training strategy that may include internships and residency/training programs for clinical staff, nurses and physicians.	X				X	X		X

Community Engagement Strategy

Cultivating mutually beneficial partnerships throughout the community it serves is integral to the mission of WellSpan Health, the largest employer and health care organization in York and Adams counties. The partnerships that WellSpan forms and cultivates have demonstrated the ability to maximally impact the health of the community.

WellSpan’s commitment to community partnerships is evident in many ways, including the operational and funding support provided to Healthy Adams County and the Healthy York County Coalition, the entities responsible for co-leading the 2012 CHNA, and in serving as the catalyst and primary resource for other collaborative community health initiatives.

Maintaining and strengthening these partnerships is essential to our organization and the health of the community. As new partnership opportunities present themselves, WellSpan will continue to assess its role in and support of them.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH	
1. Actively support the development of coalitions and partnerships which promote mutual goals, assume shared responsibility, and represent diverse stakeholder perspectives.	1.1: Continue to build community capacity to address health priorities through staffing and financial support, as appropriate, to county-level health coalitions, and collaborative partnerships with diverse community stakeholders.	X								
	1.2: Identify opportunities to partner with community stakeholders to impact the social determinants of health on key community health issues, especially among urban populations (Lebanon and York cities) that may be disproportionately affected.	X			X				X	
	1.3: Decrease the incidence of preventable injuries among children in key areas: bicycle safety; child-passenger safety; Cribs for Kids (infant safety); distracted driving among adolescents, and; home safety by coordinating initiatives as the lead agency (Safe Kids York County), supporting existing programs, or identifying opportunities for developing new resources, when appropriate (i.e., Ephrata).	X	X	X	X					X
	1.4: Strengthen collaborative relationships through WellSpan Health’s Sexual Assault Forensic Examiner (SAFE) initiative to ensure the effective and timely collection of data related to abuse, the prosecution of individuals, and the reduction of abuse among diverse populations.	X	X	X	X					X

Prevention and Wellness Strategy

The delivery of health care in the United States is shifting from a predominantly care and treatment model to one focused on prevention and wellness. While continuing to ensure that the acutely sick receive appropriate care, hospitals and health care systems are also employing strategies designed to keep healthy individuals and those with chronic disease healthier longer. As a result, WellSpan Health is transforming care for the community members it serves. Creating

patient-centered medical homes within WellSpan Medical Group primary care practices, implementing patient engagement initiatives, and redesigning work based on a population health approach are a few of the tactics that WellSpan believes will enhance prevention and wellness throughout our organization and in the community beyond.

PRIORITY: **ADULT OVERWEIGHT / OBESITY**

Approximately two out of three adults in the four communities WellSpan serves – 68 percent in Adams County, 66 percent in Northern Lancaster County, 70 percent in Lebanon County, and 68 percent in York County– were classified as overweight or obese in 2015. The prevalence of overweight and obesity crosses county lines and does not discriminate by age, gender, race or ethnicity, or socioeconomic status. However, recent data suggest that some population groups are more affected by this concerning health issue:

- Non-Hispanic Black residents of the community have a much higher probability of being obese than do members of other racial and ethnic categories;

- Adults with diabetes, who have a circulatory or heart disorder, or have asthma are more likely to be obese
- The likelihood of obesity increases among individuals with low health literacy.

Adult overweight and obesity rates in our communities increased about a decade ago, but have remained relatively stable since the last CHNA was conducted. The increased focus that WellSpan and its community partners have placed on improving unhealthy eating and physical activity behaviors may attribute to this recent plateau. However, being overweight or obese increases the risk of chronic conditions such as diabetes, high blood pressure, high cholesterol, cancer, heart disease and stroke. These obesity-related conditions

may require significant healthcare resources to manage and may negatively impact the cost of healthcare.

WellSpan is committed to reversing the upward trend in adult overweight and obesity in our communities, but recognizes the challenges inherent in this goal. We believe that educating patients about how to reach and maintain a healthy weight, improving the management of patients who are overweight or obese, redesigning community systems to encourage healthy eating and physical activity behaviors, and promoting a healthy workforce are a few evidence-based strategies that will enable us to continue reversing the negative impact of overweight and obesity in our communities.

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Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Implement a system-wide approach to the identification, prevention, and management of adults at-risk of or classified as overweight or obese (BMI ≥25).	1.1: Collect and monitor adult Body Mass Index (BMI) data for WellSpan Health patients through the use of EPIC (electronic health record). This data may be segmented by populations (i.e., age, gender, geographic location, primary care provider/practice, or race/ethnicity) to identify programmatic opportunities.	X	X	X	X		X	X	X
	1.2: Identify and refer people most at-risk to WellSpan Health and community resources that enable them to appropriately manage their weight. This may include, but is not limited to: provider-directed guidance and/or embedding the WellSpan weight management/treatment algorithm into EPIC.	X	X	X	X		X	X	X
	1.3: Develop and implement a whole-person approach to the management of adult overweight/obesity through the coordination and promotion of behavioral and physical health resources.	X	X	X	X	X	X	X	X
2. Improve the care and treatment of overweight/obese adults who are managed by WellSpan Medical Group practices.	2.1: Expand the Market Bucks program to additional primary care practices in all counties which WellSpan serves. Through this program, low-income patients, as identified through established criteria, are provided with healthy eating guidance and fruit & vegetable vouchers redeemable at participating farmers' markets.	X					X		
	2.2: Explore and, if feasible, partner with a primary care practice to address medical/surgical weight management among a vulnerable population, to be determined by available data.	X					X		
	2.3: Identify and implement, where possible, a pilot program to promote healthy eating and physical activity behaviors among expectant mothers who are at risk for having low birth weight babies.	X							X

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Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
3. Increase the proportion of community members who engage in healthy eating and physical activity behaviors as a means of managing their weight.	3.1: Incorporate technological enhancements into the 10 Lb. Throwdown social marketing campaign that interactively engage community members in improving their healthy eating and physical activity behaviors, and managing their weight status.	X							
	3.2: Explore the feasibility of developing a community garden initiative in which a portion of harvested foods are distributed to low-income populations residing in the communities that WellSpan serves. This may necessitate local level collaboration and partnerships to ensure appropriate resource availability and allocation, education on community gardening, and harvest distribution logistics.	X	X	X	X				X
	3.3: Improve system-wide coordination, enhancement and promotion of WellSpan Health healthy eating, physical activity, and weight management programs, and support, when appropriate, with targeted marketing.	X	X	X	X		X		X
	3.4: Continue partnerships with community organizations to support the development and implementation of environment and policy changes that support healthy eating and physical activity, including but not limited to: active living design principles; safe routes to schools programming; community gardener and local growers' engagement, and; healthy food distribution processes.	X							
4. Increase the proportion of WellSpan employees who engage in healthy eating and physical activity behaviors as a means of managing their weight.	4.1: Expand utilization of “Guidelines for Offering Healthy Foods at Meetings and Functions” at WellSpan Health facilities, including new affiliates (i.e., Ephrata Community Hospital, Good Samaritan Hospital and Philhaven).	X	X	X	X	X		X	X
	4.2: Develop additional “farm-to-work” initiatives, in each community and in partnership with local growers, which increases WellSpan employee access to fruits and vegetables.	X							
	4.3: Encourage WellSpan Health employees to participate in community physical activity opportunities (e.g., walking parties in Adams and Lebanon counties; York County Walks).	X							

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PRIORITY: DENTAL CARE / ORAL HEALTH

Millions of Americans annually are impacted by the consequences of poor dental hygiene. Oral diseases, from cavities to cancers, may lead to pain and the development of several chronic diseases, including cardiovascular disease and diabetes. Additionally, poor oral health in pregnant women may result in premature births and low birth weight babies.

Community stakeholders in Lebanon County understand the relationship between proper dental care and good physical health. Through the identification of county priorities, these stakeholders shared that, while dental services are available, many community members, especially those from vulnerable populations, do not know about or how to access them. CHNA

data from Lebanon County does not suggest that a considerable community health issue exists. However, the input of community members into the prioritization process has elevated this underlying public health concern. Collaborative strategies to improve access to and utilization of available dental / oral health services will be explored.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Increase utilization of dental/oral health services, especially among vulnerable populations.	1.1: Establish partnerships with the local Federally Qualified Health Center (FQHC), free clinic, and other community organizations serving vulnerable populations to identify and implement education and promotion strategies that increase awareness of available dental/oral health services.				X				

PRIORITY: MATERNAL CHILD HEALTH

Secondary data collected by the University of Wisconsin in their annual County Health Rankings shows that, in 2015, the teen birth rate and the percentage of low birth weight babies was comparable, if not higher, than state and national rates. Increasing

the age at which teens conceive and give birth, ensuring adequate access and utilization of prenatal services, and improving the health of pregnant mothers may be effective in impacting these rates. WellSpan Health prides itself in the exceptional care it provides to those

accessing its maternal child health services, including its Level 3 NICU at York Hospital. Understanding the underlying conditions affecting these rates is tantamount to addressing them, improving overall care, and managing newborns and their families.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Improve birth outcomes by specifically focusing on reducing teen births and low birth weight babies.	1.1: Identify, evaluate and implement evidence-based strategies to reduce teen births and/or low birth weight babies.	X							X

PRIORITY: OPIOID AND PRESCRIPTION DRUG MISUSE AND ABUSE

The misuse and abuse of opioid and prescription drugs across the United States has escalated in the last three years. Once viewed positively for their ability to effectively manage pain, these medications are now the subject of controversy due to recent increases in overdoses and deaths, and how they have become a “gateway drug” to heroin use. Although primary data from the CHNA demonstrates relatively low rates of

illegal drug use, the region WellSpan Health serves has not been immune to this trend and has noticed similar increases in each of its communities. In fact, York County recently ranked fourth in Pennsylvania for the number of heroin-related deaths, according to a November 2015 report from the Drug Enforcement Administration (DEA). Heroin and prescription drug abuse and related overdoses are not isolated to

one demographic or population, but affect numerous community members regardless of age, education, employment, poverty, and race and ethnicity. Multi-faceted strategies that assist in better managing chronic pain, improve the safety and management of prescription-opioid medications, and supporting community collaborations that address the issue must be maintained and strengthened.

Objective	Tactic	Corp.	ECH	GH	GSH	Phil	WMG	WSRH	YH
1. Reduce the prevalence of opioid - heroin and prescription drug - overdoses and deaths (mortality).	1.1: Improve opioid safety and management of prescription-opioid medications within WellSpan Medical Group practices and WellSpan emergency departments.	X	X	X	X		X		X
	1.2: Identify gaps in chronic pain management among WellSpan patients in each community.	X	X	X	X	X	X	X	X
	1.3: Develop tools and resources to educate WellSpan Health providers about the issue and available services to assist them in patient management.	X					X		
	1.4: Support community-level partnerships (e.g., task forces) developed to address heroin and prescription drug overdoses in the community. If necessary, develop new partnerships.	X	X	X	X				X

Past Successes Translate into Future Opportunities

WellSpan Health's commitment to the overall health of the community it serves is evident in the initiatives with which it has been involved and the financial resources it has allocated over the last 15 years. In 2015, more than 60,440 individuals were reached through community education and outreach programs costing the system an estimated \$6.4 million. WellSpan Health also provided approximately \$274 million in care for the uninsured and underinsured, as follows:

- \$17.8 million in free care to patients who participated in the charity care program
- \$84.9 million and \$118.7 million in cost greater than what was reimbursed through Medicare and Medicaid, respectively
- \$29.6 million in services to patients who received care for which they could not pay and who did not participate in the charity care program
- \$16.5 million to support services that provided discounted medical, dental, and pharmaceutical care to those in need

A sample of recent initiatives addressing recent CHNA priorities and demonstrate WellSpan's ability to engage the community and promote health is listed below. Additional details may be found in the annual Community Benefit Reports from each of WellSpan's facilities, prior to affiliations with Ephrata Community Hospital in 2013 and Good Samaritan Hospital in 2015.

CHNA Indicators Not Addressed Root Cause Approach

Public health research recommends that a root cause approach be utilized to address many chronic diseases such as cardiovascular disease, diabetes, respiratory ailments, and overweight/obesity. A focus on improving healthy eating and physical activity behaviors and reducing tobacco use has demonstrated efficacy in reducing the impact of various chronic conditions. Although a few cardiovascular indicators – those who have high blood pressure and high cholesterol, and those who have been told they have heart disease, heart attack or stroke – have high rates, WellSpan Health decided to focus on two root causes of these conditions – unhealthy eating and physical inactivity – under the adult overweight/obesity priority.

Community Priorities and Partnerships

As previously mentioned, WellSpan believes that its impact on community health can, at times, be greater by partnering to address a health issue, rather than managing it alone. Issues such as the management of chronic diseases such as asthma and diabetes, although ranking high, may require a more “global” response. In addition, asthma concerns are compounded environmental air quality issues for which community stakeholders may need to assume an advocacy role.

Intended Impact & Evaluation

Impact evaluation and outcome measurement must occur to create accountability with WellSpan leadership and to demonstrate ongoing commitment to the health of the community. Since it would be unrealistic to believe that marked changes to the CHNA indicators could occur in three years, shorter-length measurable objectives will be derived from this plan and integrated into the annual system and department planning processes. These objectives may account for specific populations to be reached and the social determinants of health impacting the target population. Additionally community constructs – unhealthy environments and weak or no policy controls – prohibit healthy behavior choices. WellSpan Health understands that promoting good health requires a comprehensive approach that engages diverse aspects of one's life, much like the socio-ecological model demonstrates.

The recent expansion of WellSpan Health into two new communities has resulted in disparate electronic health records (EHRs) across our facilities and the communities we serve. As a result, WellSpan has embarked on a multi-year project to transition to a new system-wide electronic health record (EHR), which is anticipated to be available in late 2017. How to potentially integrate the collection of data that supports the identified community health priorities into the EHR is underway. The availability of one repository to collect key data will be beneficial to monitoring trends, demonstrating outcomes, and designing initiatives to address areas of need.

The WellSpan Community Health Improvement Plan



