

Quakertown Campus Community Health Needs Assessment

Executive Summary

Background & Methodology:

As part of the Patient Protection and Affordable Care Act, all non-profit hospitals are required to conduct a Community Health Needs Assessment (CHNA) every three years in order to remain a tax-exempt organization under section 501(c)(3) of the Internal Revenue Code. The goal of the assessment is to identify critical health disparities faced amongst residents within the community. The needs assessment must state every health priority addressed by community stakeholders, hospital professionals, and public health experts. Additionally, campus specific implementation plans have been crafted for each of the St. Luke's University Health Network (SLUHN) campuses in order to determine how resources will be allocated to address the specified health needs.

Our CHNA is comprised of both primary and secondary data. The primary data was collected through our community health surveys, where approximately 3,000 surveys were conducted in our seven campus geographic region. Primary data was also collected through 6 campus specific key stakeholder focus groups, where the main priority health needs were identified for each entity. Secondary data included the use of county level, state level, and national level data.

Description of service area:

- The service area was defined by the patient zip codes for the top 80% of the population served by St. Luke's Quakertown.
- The top five counties served by St. Luke's Quakertown include Northampton, Lehigh, Berks, Bucks, & Montgomery.
- There are a total of 17 zip codes included.
- According to the US Census Bureau:
 - A total of 185,316 people live in the 360.34 square mile report area defined for this assessment
 - 51% are female and 49% are male
 - 22% are less than 18 years of age, 64% are 18-65, and 14% are 65 and over
 - 91% identify as White, and 9% identify as Non-White (approximately 2% identify as Black, and approximately 2% identify as Asian)
 - 93% identify as Non-Hispanic, and 7% identify as Hispanic
 - 21% fall at or below 200% of the Federal Poverty Level (FPL) in the St. Luke's Quakertown service area. (30.51% of the population in PA and 34.24% of the U.S.)
- St. Luke's Quakertown patient data (inpatient and outpatient) indicates – 5% of patients are on Medical Assistance and 43% are on Medicare.

There are various socioeconomic, cultural, and environmental factors that constitute the social determinants of health, and they undoubtedly influence the health and well-being of our St. Luke's Quakertown service area population. We live in an area where poverty is a prevalent issue, and a large percentage of our patients utilize medical assistance. We were able to categorize the identified health needs into the following five major categories for the 2016-2019 CHNA cycle.

Health Priority #1: Improving Access to Care and Reducing Health Disparities

- The overall rate of primary care physicians per population for the St. Luke's Quakertown service area (100.11) is greater than the average for Pennsylvania (80) and the U.S. as a whole (74.5) (Area Health Resource File, 2012).
- According to CHNA Survey data:
 - 70% of respondents saw their primary care provider in the past year; 66% of respondents with private insurance, 76% of respondents with Medicaid, 86% of respondents with Medicare, and 41% of uninsured respondents saw their primary care provider in the past year.
 - 65% of respondents saw a dentist in the past year; 78% of respondents with private insurance, 42% of respondents with Medicaid, and 47% of respondents who were uninsured for dental care saw a dentist in the past year.
 - 24% of respondents did not get eyeglasses due to high cost; 19% of respondents with private insurance, 36% of respondents with Medicaid, and 65% of uninsured respondents did not get eyeglasses due to high cost.
 - Postponement of care was strongly tied to insurance issues, with copay being too high (9%) and not having health insurance (10%) being in the top responses.
 - 15% of our respondents were unemployed; this unemployment rate is much greater than that reported for Pennsylvania (6%).
 - 23% of respondents have only a high school diploma and 13% did not finish high school.
 - 36% of respondents in the St. Luke's Quakertown service area reported household incomes less than \$24,999, and according to the US. Census Bureau, the median household income for 2010-2014 in Bucks County was \$76,824.

Health Priority #2: Promoting Healthy Lifestyles and Prevent Chronic Disease

- In Bucks County, accidents were the leading cause of death for people ages 5-44 in 2012. For people ages 45 and older, the top two leading causes of death were heart disease and cancer, with cancer as the number one leading cause of death for those ages 45-64. Heart disease was the number one cause of death for those ages 65 and older (Pennsylvania Department of Health –Division of Health Informatics, 2014).
- According to 2015 RWJ County Health Rankings, 16% of Bucks County adults reported smoking, which is greater than the Healthy People 2020 target of 12%.
- According to CHNA Survey data:
 - Only 10% of respondents meet the FDA recommended consumption 5 or more fruits/vegetables per day.
 - Only 14% are exercising 5 or more days per week, as recommended by the Healthy People 2020 target of exercising 30 minutes per day 5 days a week (set at 48%).
 - 36% of respondents were obese and 30% were overweight. Obesity rates are higher than national (28.3%) and state (30%) levels - additionally, 7% were recognized as being severely obese and 8% were morbidly obese, overall morbidly obese respondents had more chronic disease (73%) compared to those with healthy BMI's (40%).

Health Priority #3: Improving Mental/Behavioral Health

- Survey data revealed that 36% reported one or more days of poor mental health in the past month.
- The ratio of the county population to the number of mental health professionals for Lehigh County (600:1:1) and Berks County (840:1) are both worse than that of Montgomery County (390:1), Bucks County (490:1) and Northampton County (540:1) and Pennsylvania (580:1). U.S. top performers are at 370:1 (RWJ County Health Rankings 2015).
- CHNA Survey data also revealed a staggering 28% reported 1 or more episodes of binge drinking in the past month (5 or more drinks in one occasion), compared to 2015 RWJ County Health Rankings which reports Pennsylvania at 17% and counties performing at the 90th percentile nationally at 10%.

Health Priority #4: Improving Child & Adolescent Health

- 12% of children under 18 are living at or below 100% of the Federal Poverty Level (FPL) (ACS 2009-13). This is lower than PA (19%) and the U.S. (22%): Living at 100% below FPL is \$24,250 for a family of 4.
- According to the 2015 RWJ County Health Rankings, Bucks County has an 8% Low Birth Weight rate, when compared to Pennsylvania (8%) and a higher percentage than counties performing at the 90th percentile nationally (6%).
- In the St. Luke's Quakertown service area as a whole, 25% of children are eligible for free/reduced price lunch. This percentage is lower than the percent of children eligible for free or reduced lunch in PA which is 44% and the national average of 52% (National Center for Education Statistics, Common Core of Data 2013-14).
- Lifetime usage of alcohol consumption amongst students in Bucks County was 49% and marijuana was 21%. In terms of prescription drug use - narcotics (i.e. pain management drugs) were the most commonly used at 5% (PAYS, 2013).
- According to 2015 PSSA scores, the percentage of third graders reading below grade level ("Basic" or "Below basic" scores) ranged from 11% to 36% among Quakertown Community School District elementary schools.

Health Priority #5: Improving Elder Health

- CHNA Survey data showed that 79% of our respondents over age 65 have a chronic disease.
 - 61% report having High Blood Pressure
 - 39% report having Arthritis
 - 25% report having Diabetes
- When reviewing 2015 RWJ County Health Rankings, social associations per 10,000 population, Bucks County is only at 8 compared to 12 for Pennsylvania and 22 for the counties performing at the 90th percentile nationally.

We already have many great services available to help improve health in our region, but a concentrated and sustained effort will be necessary amongst all those who contribute to our community's health to create new programs and continue existing programs to try even harder to address the current concerns. The needs discussed within the health categories will serve as our guide in creating an implementation program to best address the needs of the St. Luke's Quakertown service area.