

2023-2026

Community Health Needs Assessment

Montgomery County, PA

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Perspective / Overview

About Suburban Community Hospital

Suburban Community Hospital (SCPA) is a not-for-profit, acute care hospital, and a member of the Prime Healthcare Foundation, a 501(c)(3) public charity. For over 65 years, Suburban Community Hospital has been delivering quality healthcare to Montgomery County and the surrounding region.

Suburban Community Hospital, named initially Riverview Osteopathic Hospital, opened in 1944. Chartered at 740 Sandy Street in Norristown, PA, Riverview Osteopathic Hospital would provide medical and surgical services to the sick, afflicted and injured.

Mission Statement

To deliver compassionate, quality care to patients and better healthcare to communities.

Values

Quality - We are committed to always providing exceptional care and performance.

Compassion - We deliver patient-centered healthcare with compassion, dignity and respect for every patient and their family.

Community - We are honored to be trusted partners who serve, give back and grow with our communities.

Physician Led - We are a uniquely physician-founded and physician-led organization that allows doctors and clinicians to direct healthcare at every level.



Source: SCPA

Creating a Culture of Health in the Community



Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings website: http://www.Countyhealthrankings.org/roadmaps/action-center

The Community Health Needs Assessment (CHNA) uses systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of Montgomery County, Pennsylvania.

The Action Cycle shows how to create healthy communities. The rankings later in the document assist in understanding what makes a healthy community.

2023 Community Health Needs Assessment

Collaborators

Suburban Community Hospital, Inc., as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and services company based out of Nashville, TN, provided the analysis of community health data and facilitated the interviews.

This is a single facility CHNA for Prime Healthcare Services – Suburban Hospital, LLC d/b/a Suburban Community Hospital. EIN: 47-2819044.

Making the CHNA Widely Available to the Public

Starting on September 22, 2023, this report is made widely available to the community via the Suburban Community Hospital website: https://www.suburbanhosp.org, and paper copies are available free of charge at Suburban Community Hospital, 2701 DeKalb Pike, Norristown, PA 19401 or by phone 610-278-2000.

Board Approval

Suburban Community Hospital's board of directors approved this assessment on September 21, 2023.

Key Findings

Most Significant Health Priorities

Based on the Health Department priorities, secondary data, and community interviews, the community selected the following significant health needs with the number of votes received by the issue. There is a complete summary of findings with prioritization criteria later in the document.

- 1. Substance use
- Mental health
- 3. Access to care (tied with healthy eating)
- 4. Healthy eating/active living for healthy weight (tied with access to care)
- 5. Chronic disease
- 6. Unhoused population
- 7. Social determinants of health
- 8. Health inequities (last four tied with 1 vote each)
- 9. Proper and educated caregivers for the elderly
- 10. Gun violence
- 11. Long commute driving alone

Community Input and Collaboration

Methods and Dates

In April 2023, Suburban Community Hospital began a Community Health Needs Assessment for Montgomery County and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in May 2023.
- Community members participated in interviews for their perspectives on community health needs and issues on June 1, 2023.
- A community health summit was held on June 22, 2023, to create a common database of understanding of health needs, prioritize the most significant health needs and to

brainstorm ways to improve the community's health. The audience consisted of healthcare providers, business leaders, government representatives, schools, not-forprofit organizations, employers, and other community members.

Participation by Those Representing the Broad Interests of the Community

Twenty-six individuals from fourteen community organizations participated in the interviews and the summit. The interviews were aimed at identifying and defining significant health needs, issues, and concerns of Montgomery County. Additionally, a community health summit was held to create a common understanding of health needs, and the community prioritized the health needs of the community. The three-month process centered on gathering and analyzing data, as well as receiving input from persons who represented the broad interests of the community, to provide direction for the community and hospital to create a plan to improve the health of the communities.

Participants

| Organization | Population Represented (kids, low income, minorities, those w/o access) | How Participated |
|--|---|--------------------|
| Action Committee Latin American Montgomery County | Latino Community | Interviews |
| Board Member, Business Owner | All | Interviews, Summit |
| Brandywine Living | Seniors | Summit |
| Emergency Department | All | Interviews |
| Hospital Association of Pennsylvania | All | Summit |
| Montgomery County Aging and Adult Services | Senior adults | Interviews |
| Montgomery County Commissioner | All | Interviews |
| Montgomery County Department of Health and Human Services, Office of Public Health | All | Interviews, Summit |
| Norristown Hospitality Center | Unhoused | Interviews |
| Norristown Police Department | All | Interviews, Summit |
| Regional EMS Director, Department of Public Safety | All | Interviews |
| Suburban Community Hospital | All | Interviews, Summit |
| Suburban Community Physician Association | Seniors | Summit |
| Tobacco Dependence Program Manager, SCH | Tobacco users | Interviews |

Input of the Medically Underserved, Low-Income, and Minority Populations

Input of medically underserved, low-income and minority populations was received though interviews. Agencies representing these population groups were intentionally invited to the interviews and the community health summit.

Input of Those with Expertise in Public Health

The Montgomery County Department of Health participated in the interviews, the health summit, and in selection of the most significant health priorities.

Input on the Most Recently Conducted CHNA and Most Recently Adopted **Implementation Strategy**

Suburban Community Hospital did not receive any written comments on its most recent CHNA or implementation plan.

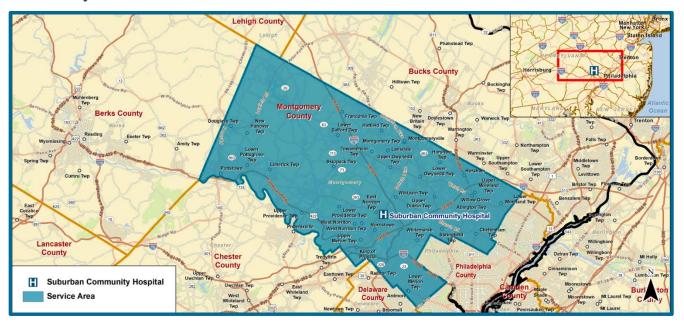
Process and Methods Used

Community Selected for Assessment

Montgomery County was the primary focus of the CHNA due to the service area of Suburban Community Hospital. Used as the study area, Montgomery County provided 83.1% of January 1, 2022, through December 31, 2022, inpatient discharges. The community includes medically underserved, low-income, and minority populations who live in the geographic areas from which Suburban Community Hospital draws their patients.

All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Suburban Community Hospital's Financial Assistance Policy.

SCH Study Area - 2023



Data and Other Information Used in the Assessment

Primary methods included:

- Interviews with community members for their perspectives on community health
- Community health summit for prioritization and brainstorming

Secondary methods included:

- Public health data death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomics population, poverty, uninsured, unemployment
- Psychographics behavior measured by spending and media preferences.

Information Gaps

While this assessment was quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all the community's health needs.

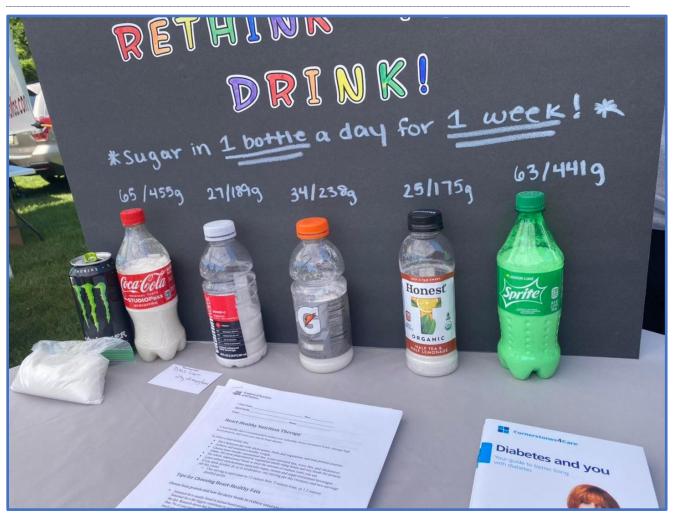


Photo Source: SCPA



Photo source: SCPA

Description of the Communities Served

Demographics and Economic Indicators

The table below shows the demographic summary of Montgomery County compared to PA and the U.S.

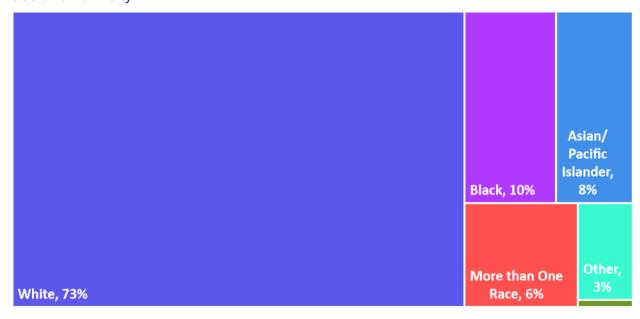
| | Montgomery County | Pennsylvania | USA |
|------------------------------|-------------------|--------------|-------------|
| Population | 866,361 | 13,027,451 | 335,707,897 |
| Median Age | 42.2 | 41.9 | 38.9 |
| % 85 and over | 3.0% | 2.7% | 2.1% |
| % 65 and over | 19.8% | 20.2% | 17.5% |
| % 19 and under | 23.2% | 22.5% | 24.4% |
| Median Household Income | \$101,842 | \$69,170 | \$72,414 |
| Annual Pop. Growth (2022-27) | 0.27% | -0.02% | 0.25% |
| Household Population | 332,986 | 5,232,785 | 128,657,669 |
| Businesses | 37,244 | 473,530 | 12,609,070 |
| Employees | 526,093 | 6,280,390 | 151,363,907 |
| Health Care Index* | 130 | 99 | 100 |
| Average Health Expenditures | \$9,187 | \$6,991 | \$7,087 |
| Cost of Living | 114.1 | 94.6 | 100 |

Source: Esri; Sterling's Best Places (2021)

*The Health Care Index is household-based, and represents the amount spent out of pocket for medical services and insurance relative to a national index of 100.

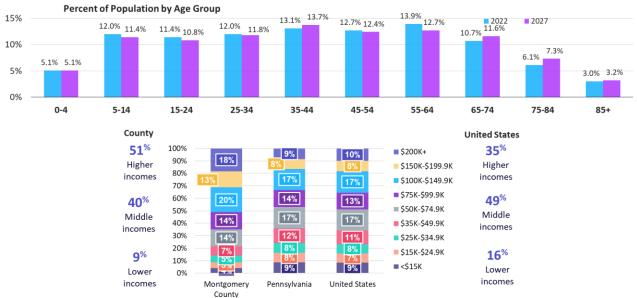
The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.

Race and Ethnicity



Source: Esri

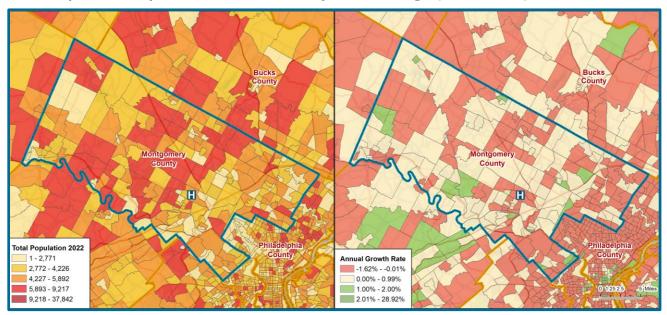
Percent of Population by Age Group



Source: Esri

- The population of Montgomery County is projected to increase from 2022 to 2027 (0.27% per year). Pennsylvania is projected to decrease 0.02% per year. The U.S. is projected to increase 0.25% per year.
- The 65+ population will comprise a larger percentage of total population by 2027.
- Montgomery County had a higher median age (42.2 median age) than PA (41.9) and the U.S. (38.9). In Montgomery County the percentage of the population 65 and over was 19.8%, higher than the U.S. population 65 and over at 17.5%. Montgomery's 85+ age population was 3% of total population compared to 2.7% for PA and 2.1% for the U.S.
- Montgomery County median household income at \$101,842 was higher than PA (\$69,170) and the U.S. (\$72,414). The rate of poverty in Montgomery County was 7% which was lower than PA (12%) and the U.S. (12.8%).
- The household income distribution of Montgomery County was 51% higher income (over \$100,000), 40% middle income, and 9% lower income (under \$25,000). The largest income group is the 20% making \$100,000 to \$149,999.
- The health care index measures how much the population spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Montgomery County was 130, indicating 30% more spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The cost of living in Montgomery County was 14.1% more than the U.S. and 19.5% more expensive than PA.
- The racial and ethnic make-up of Montgomery County was 73% White, 10% Black, 8% Asian/Pacific Islander, 7% Hispanic origin, 6% more than one race, and 3% other. (These percentages total to over 100% because Hispanic is an ethnicity, not a race.)

2022 Population by Census Tract and Projected Change (2022-2027)

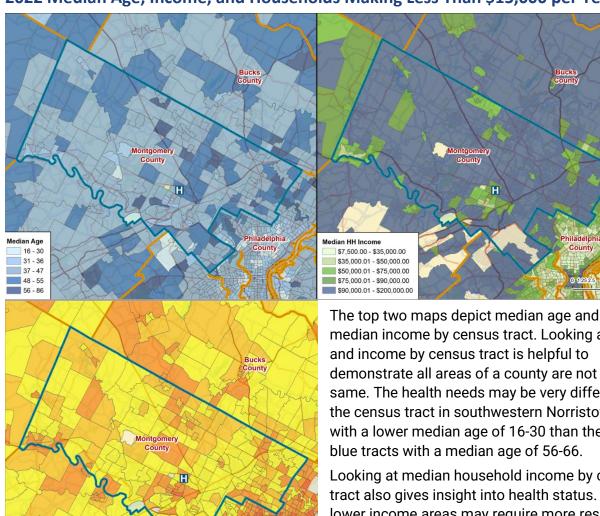


Source: Esri Red is population decline Yellow is positive up to .99% Green is 1-2%

Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people. The higher populated census tracts are smaller geographically and the less populated census tracts are larger in geography. The highest populated census tracts are in Norristown, primarily west.

Montgomery County had 10 census tracts projected to increase from 1-2% from 2022 to 2017, the majority of census tracts were projected to increase to .99%. Several census tracts were projected to decrease in population, those in red.

2022 Median Age, Income, and Households Making Less Than \$15,000 per Year



median income by census tract. Looking at age and income by census tract is helpful to demonstrate all areas of a county are not the same. The health needs may be very different in the census tract in southwestern Norristown with a lower median age of 16-30 than the dark blue tracts with a median age of 56-66.

Looking at median household income by census tract also gives insight into health status. The lower income areas may require more resources than the higher income tracts. The dark blue census tracts with a higher median household income of over \$90,000 will probably have different needs than that of the tracts south of

the hospital making up to \$35,000.

The lower map is the number of households making less than \$15,000 per year. Again, further attempting to identify those areas within the county that may have a lower health status. The census tract located in southern Norristown shows 301-600 households making less than \$15,000 per year.

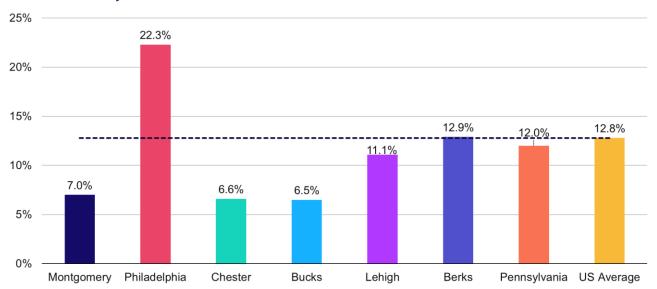
2022 HH w/ Inc<\$15,000

51 - 100

101 - 300 301 - 600

Economic Indicators

Percent in Poverty 2021



Montgomery County's 2021 poverty percentage was 7.0% compared to PA at 12.0% and the U.S. at 12.8%. The cost of living in Montgomery County was 19.5% higher than PA and 14.1% higher than the U.S.

Business Profile

54.7% percent of employees in Montgomery County were employed in:

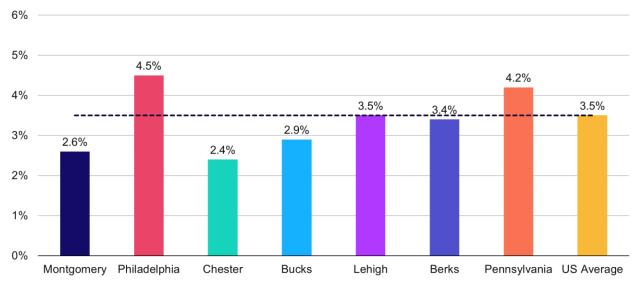
- Health Care & Social Assistance (17.0%)
- Retail Trade (12.2%)
- Professional, Scientific & Tech Services (10.1%)
- Manufacturing (8.1%)
- Finance & Insurance (7.3%)

Source: Esri

Retail, accommodation, and food service offer health insurance at a lower rate than healthcare, professional, scientific and tech services, finance and insurance, and manufacturing.

It is beneficial to contact people in groups to improve health. There are three primary places people gather during the week: work, church, and school. These are three excellent places to reach people to create a culture of health.

Unemployment March 2023



Source: BLS, March 2023, preliminary, not seasonally adjusted

Montgomery County's March 2023 preliminary unemployment was 2.6% compared to 4.2% for Pennsylvania and 3.5% for the U.S.



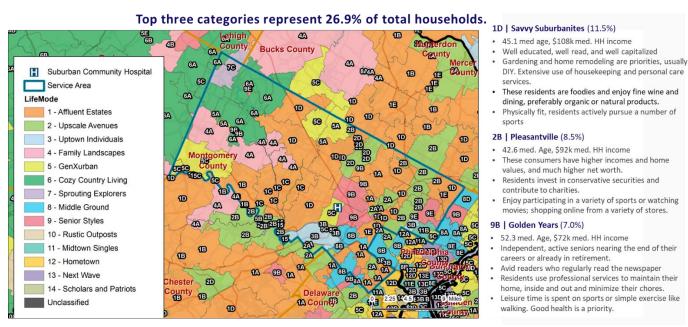
Photo source: SCPA

Psychographics - Tapestry Segmentation

Demographics are population, age, sex, and race. Psychographics are adding behavior data in the form of spending habits and survey data combined with demographics. Twenty-seven percent of Montgomery County are included in the top three Tapestry Segments. The map below is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly. The dominant Tapestry Segment of each census tract is identified by number and name.

The dominant Tapestry Segments in the county were Southern Satellites (14.9%), Hometown Heritage (13.3%), and Midlife Constants (12.6%).

There is a very brief description of the segments on the right of the map. There is much more information on Tapestry Segments, at http://doc.arcgis.com/en/Esri-demographics/data/tapestrysegmentation.htm. Analyzing the Tapestry Segments in the study area helps determine health habits, technology, and communication preferences of residents, enabling more effective communication and implementation of solutions to improve health. Many spoke of meeting people where they are in the Interviews. Studying their Tapestry Segment can help do that.



Source: Esri

Interviews Summary

Community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in interviews on June 1, 2023, for their input into the community's health. Community participation in the interviews represented a broad range of interests and backgrounds. Below is a summary of the interviews.

The participants defined health as mental, physical, social, and emotional wellbeing of a person. They believe the health of the county ranges from very good to unhealthy and poor, acknowledging that good health isn't enjoyed equally by all and is dependent somewhat on socioeconomics.

The most significant health issues for the communities were:

- Access to care primary care, specialists, affordability, and access to insurance
- Chronic conditions heart disease, high blood pressure, diabetes, asthma, cancer, renal failure, and stroke
- Diet and nutrition contribute to chronic conditions, access to healthy foods, processed foods leading to obesity
- Mental health higher demand for fewer services, especially for children and youth and dementia, isolation, and loneliness for the elderly
- Substance use disorders opioids, fentanyl, alcohol, heroin, smoking, increase in overdoses
- Social determinants of health housing, food, childcare, utilities
- Maternal and infant mortality
- Healthcare associated infections and STIs
- Gun violence
- Transportation
- Health literacy
- Lack of confidence and trust in the healthcare system
- Health inequities lower life expectancy, higher communicable diseases, higher rates of infant mortality and chronic diseases for minorities

If given a magic wand and no resource restrictions, the participants identified the following solutions to improve health.

- Improve access to healthcare locally primary care and specialists (GI, neuro, cardiac, endocrinology)
- Improve access to mental health services.
- Improve coordination, cooperation, and communication among services and programs
- Improve children's health provide meals, healthcare in schools, asthma treatment, remove guns, training for those who work with kids and for parents
- More support for the elderly
- More education and resources
- Support social determinants of health-housing, transportation, food, universal basic income.
- Health equity and belonging



Photo Credit: SCPA

Health Status Data, Rankings, and Comparisons

Health Status Data

Based on the 2022 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin², Montgomery County ranked 4th out of 67 Pennsylvania counties ranked for health outcomes (1= the healthiest; 67 = unhealthiest), and in the top 25% for health factors. Health outcomes are composed of length of life and quality of life. Health factors are comprised of health behaviors, clinical care, social & environmental factors, and physical environment. To become the healthiest community in PA and eventually the nation, Montgomery County must close two lifestyle gaps.

County Health Rankings suggested the areas to <u>explore for improvement</u> in Montgomery County were:

- higher adult smoking
- higher percentage of adult obesity

The strengths were:

- higher food environment index
- lower percentage of physical inactivity
- higher percentage of access to exercise opportunities
- lower percentage of teen births
- lower percentage of uninsured
- lower population per primary care physician, dentists and mental health providers
- higher percentage of flu vaccinations
- higher percentage of high school completion and some college
- lower percentage of children in poverty
- lower injury deaths

When analyzing the health status data, local results were compared to PA, the U.S. (where available), and the top 10% of counties in the U.S. (the 90th percentile). For additional perspective, PA was ranked the 25th healthiest state out of the 50 states. (Source: 2020 America's Health Rankings; lower is better)

PA challenges were:

- High Black/white residential segregation
- High prevalence of insufficient sleep
- High levels of air pollution

The strengths were:

- Low percentage of household food insecurity
- Low percentage of adults who avoided care due to cost
- High prevalence of having a dedicated healthcare provider

Information from County Health Rankings and America's Health Rankings was analyzed in the CHNA in addition to the previously reviewed sociodemographic information and other public health data. Other data analyzed is referenced in the data below, such as: causes of death, demographics, socioeconomics, consumer health spending, and primary research. If a measure was better than PA, it was identified as a strength, and where an indicator was worse than PA, it was indicated as an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it's important to continually focus on them. Opportunities were

denoted with red titles, and strengths were denoted with green titles for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

² The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Pennsylvania's counties every year since 2003.

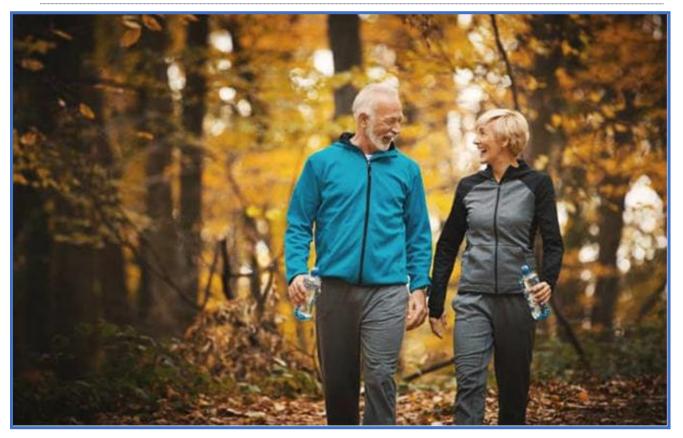


Photo Credit: SCPA/Getty Images

Rankings and Comparisons of Health Status

In most of the following graphs, Montgomery County will be navy blue, PA will be purple, U.S. will be teal and the 90th percentile of counties in the U.S. will be blue.

Health Outcomes (Length of Life and Qualify of Life)

Health Outcomes are a combination of length of life and quality of life measures. Montgomery County ranked 4th in health outcomes out of 67 Pennsylvania counties.

Length of Life

Length of life was measured by years of potential life lost per 100,000 population prior to age 75; here, lower is better. For example, a 25-year-old killed in an accident equates to 50 years of potential life lost prior to age 75. Montgomery County ranked 5th in length of life in PA. Montgomery County lost 5,400 years of potential life per 100,000 population which was lower than PA and the U.S.

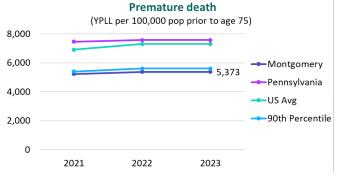
Montgomery County residents can expect to live 2.0 years longer than the average U.S. resident.

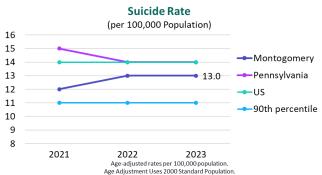
Life Expectancy (Average number of years a person can expect to live) 2018-2020 Montgomery County 80.5 Pennsylvania 78.0 US Avg* 78.5 90th Percentile 80.6

*Due to impacts of COVID, life expectancy in the US decreased 1.8 years from 2019

Life Expectancy by Race and Ethnicity (Average number of years a person can expect to live)

| | 2018-2020 |
|--------------------------|-----------|
| Montgomery County | |
| White | 80.5 |
| Black | 76.3 |
| Hispanic | 84.1 |
| Native American | NR |
| Asian/Pacific Islander | 87.5 |





Source: County Health Rankings; National Center for Health Statistics – Mortality File 2018-2020

Leading Causes of Death: Age-Adjusted Death Rates per 100,000 Population

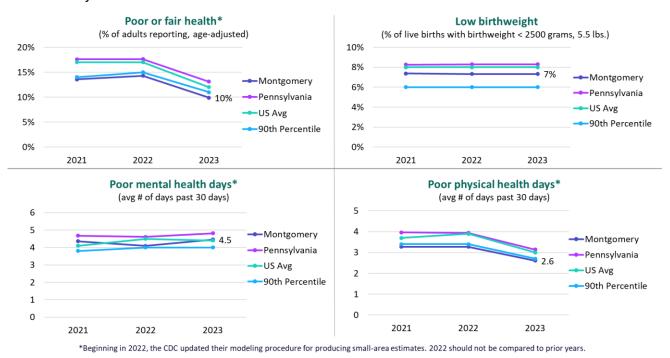
| Cause of Death | Montgomery County | Pennsylvania | US |
|------------------------------------|--------------------------|--------------|-------|
| Heart Disease | 144.8 | 175.7 | 168.2 |
| Cancer | 138.8 | 153.2 | 144.1 |
| COVID-19 | 92.9 | 88.1 | 85.0 |
| Stroke | 42.4 | 36.7 | 38.8 |
| Accidents (Unintentional Injuries) | 46.3 | 69.0 | 57.6 |
| Respiratory Diseases | 21.2 | 32.8 | 36.4 |
| Alzheimer's | 17.7 | 23.2 | 32.4 |
| Nephritis, nephrosis | 13.3 | 15.6 | 12.7 |
| Sepsis | 12.7 | 12.6 | 9.7 |
| Diabetes | 12.7 | 23.6 | 24.8 |
| Influenza and Pneumonia | 11.5 | 12.9 | 13.0 |
| Parkinson Disease | 10.5 | 9.6 | 9.9 |
| Suicide | 12.3 | 12.6 | 13.5 |
| Liver | 5.7 | 9.9 | 13.3 |

Rates in red represent higher death rates higher than PA. The leading causes of death in Montgomery County were heart disease, cancer, COVID-19, strokes, and accidents.

Source(s): Wonder CDC.gov (2019) Age-adjusted rates per 100,000 population. Age Adjustment Uses 2000 Standard Population.

Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. Montgomery County ranked 2nd in quality of life out of 67 Pennsylvania counties.



Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2019 Source: County Health Rankings: National Center for Health Statistics – Natality files (2014-2020)

PA Youth Risk Behavioral Survey - 2021

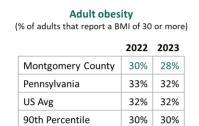
| Question | % |
|--|-------|
| Felt sad or hopeless | 43.7% |
| Seriously considered attempting suicide | 22.7% |
| Made a plan about how they would attempt suicide | 18.1% |
| Actually attempted suicide | 9.5% |
| Ever used electronic vapor products | 19.2% |
| Currently use elector vapor products frequently | 8.9% |
| Currently drink alcohol | 22.4% |
| Ever used marijuana | 37.8% |
| Ever had sexual intercourse | 32.1% |

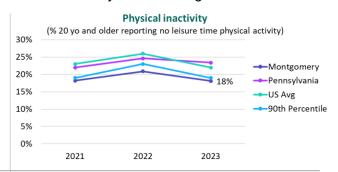
Health Factors or Determinants

Health factors or determinants rankings are comprised of measures related to health behaviors (30%), clinical care (20%), social & economic factors (40%), and physical environment (10%). Montgomery County ranked 1st in health factors out of 67 Pennsylvania counties.

Health Behaviors

Health behaviors are made up of nine measures and account for 30% of the county rankings. Montgomery County ranked 1st in health behaviors out of 67 counties in Pennsylvania. Although Montgomery County's percentage of obesity was 30%, which is high, the percentage was lower than PA. Montgomery County's health behavior issues are obesity and smoking.





| (% of po | | ess to exercise o | | |
|----------|------|-------------------|------|-----------------|
| 100% | | | 96% | |
| 90% | | | | |
| 80% | | | | |
| 70% | | | | Montgomery |
| 60% | | | | Pennsylvania |
| 50% | | | | → US Avg |
| 40% | | | | _ |
| 30% | | | | 90th Percentile |
| 20% | | | | |
| | 2021 | 2022 | 2023 | |

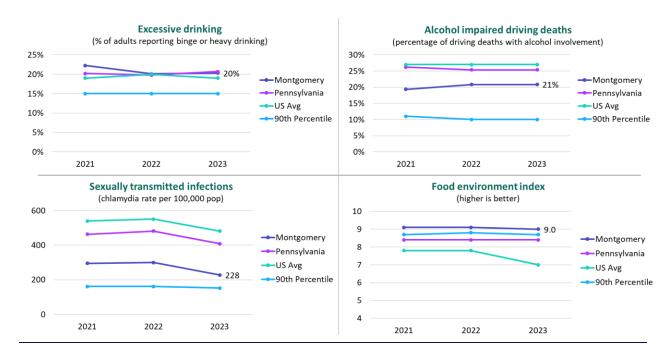
(% that report every day or "most days") 2022 2023 Montgomery County 15% 13% Pennsylvania 18% 17% US Avg 16% 16% 90th Percentile 15% 15%

Adult smoking

 $In \ 1965, 45\% \ of the \ US smoked$ Beginning with 2022 CHR, the CDC has updated their modeling procedure for producing small-area estimates. 2022 released data should not be compared to prior years.

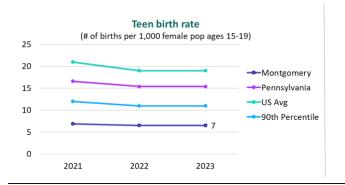
Source: Obesity & Physical Inactivity – CHR, Behavioral Risk Factor Surveillance System, 2019
Source: Access to exercise opportunities – CHR, Business Analyst, Delorme map data, Esri, & US Census Tigerline Files, 2010 and 2021. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools based on SIC codes)

Source: Smoking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019



Source: Excessive drinking - CHR; Behavioral Risk Factor Surveillance System (BRFSS), 2019
Source: Alcohol-impaired driving deaths - CHR; Fatality Analysis Reporting System, 2016-2020
Source: STIs - CHR; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2019
Source: Food environment: CHR; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2019

The food environment index is comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.



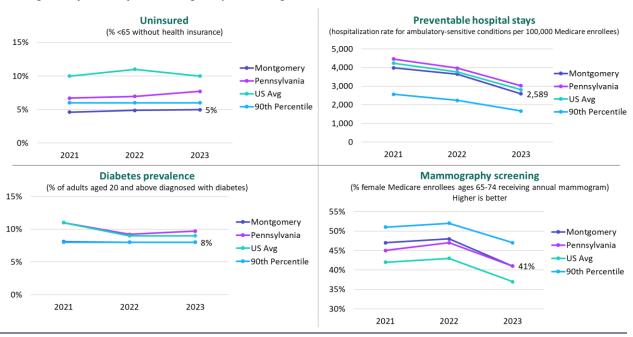
| leen birth rate | |
|----------------------------|-----------|
| oirths per 1,000 female po | p ages 15 |
| Montgomery County | 2023 |
| Asian | 1 |
| Black | 17 |
| Hispanic | 30 |
| White | 3 |

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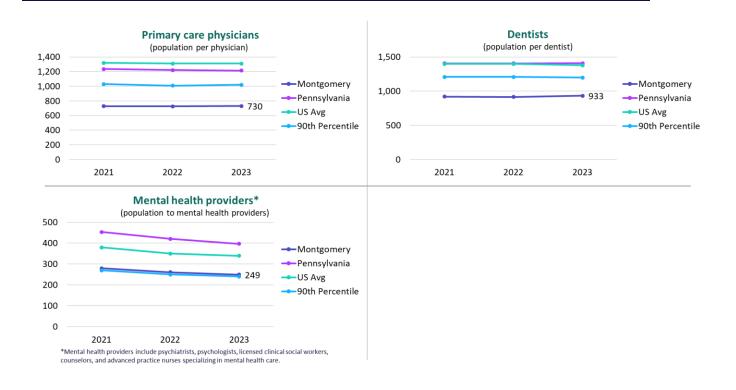
Source: Teen birth rate - CHR; National Center for Health Statistics - Natality files, 2014-2020

Clinical Care

Clinical care ranking is made up of seven indicators, and account for 20% of the county rankings. Montgomery County ranked 2nd in clinical care out of 67 Pennsylvania counties. Montgomery County had a higher percentage of flu and COVID-19 vaccinations than PA.



Source: Uninsured - CHR; Small Area Health Insurance Estimates, 2019 Source: Preventable hospital stays, mammography screening, flu vaccinations – CHR, CMS Mapping Medicare Disparities Tool, 2019



Source: Pop to PCP - CHR; Area Health Resource File/American Medical Association, 2019
Source: Pop to Dentists - CHR; Area Health Resource File/National Provider Identification file, 2020
Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) CHR; CMS, National Provider Identification, 2021
Source: Diabetes prevalence – Behavioral Risk Factor Surveillance System, 2019

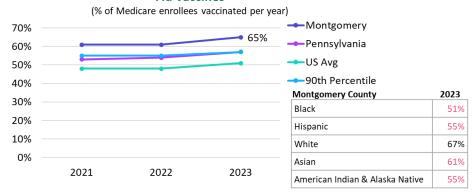
Vaccination Rates

COVID-19 Vaccination Rates

| Geography | % Fully Vaccinated |
|-------------------|--------------------|
| Montgomery County | 93% |
| Pennsylvania | 91% |
| U.S. | 79% |

As of 5/3/23

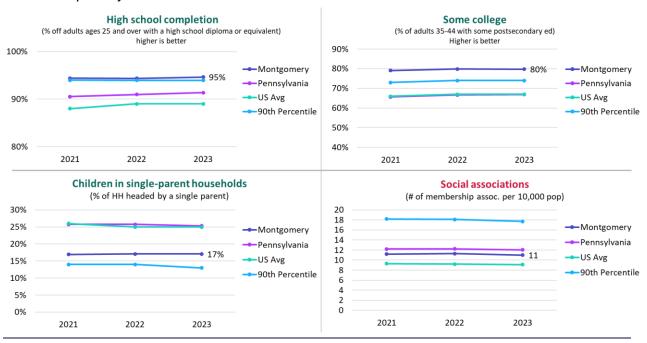
Flu Vaccines



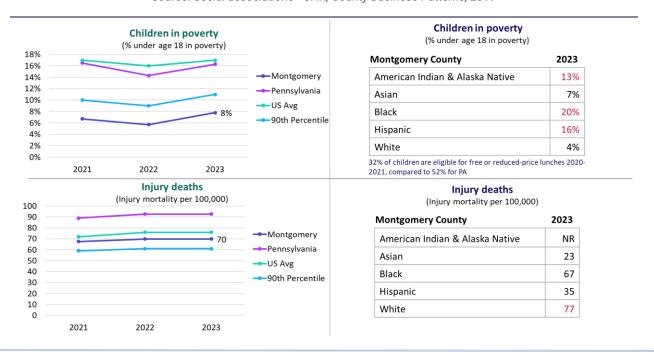
Source: covidactnow.org

Social and Economic Factors

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category. Montgomery County ranked 3rd in social and economic factors out of 67 Pennsylvania counties. The social and economic opportunity for improvement was increasing social associations and decreasing minority percentage of children in poverty.

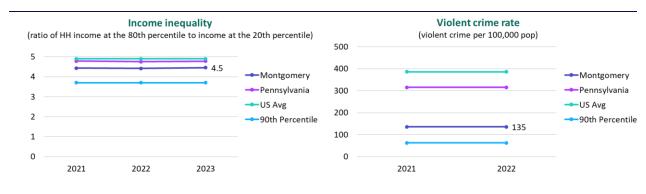


Source: High school completion— CHR, American Community Survey, 5-yr estimates, 2016-2020 Source: Some college CHR; American Community Survey, 5-year estimates, 2016-2020. Source: Children in poverty - CHR; U.S. Census, Small area Income and Poverty Estimates, 2020 Source: Social associations - CHR; County Business Patterns, 2019



Source: Income inequality and children in single-parent households - CHR; American Community Survey, 5-year estimates 2016-2020

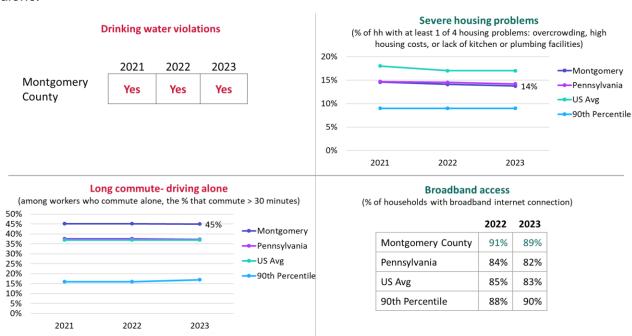
> Source: Injury deaths - CHR; National Center for Health Statistics - Mortality Files, 2016-2020 Source: Violent crime - CHR; Uniform Crime Reporting - FBI, 2014 & 2016





Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the county rankings. Montgomery County ranked 29th in physical environment out of 67 Pennsylvania counties. The concerns were drinking water violations and long commute-driving alone.



Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 2020 Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2014-2018. Source: Driving alone to work and long commute – County Health Rankings: American Community Survey, 5-year estimates, 2016-2020. Source: Air pollution – County Health Rankings: CDC National Environmental Health Tracking Network, 2018

Source: Broadband access - CHR; American Community Survey, 5-yr estimates, 2016-2020

Summary of Most Significant Health Needs from all Sources

Below is a summary of the significant health needs identified by the community in 2020, secondary data, Accion Comunal Latino Americano de Montgomery County (ACLAMO) priorities, and the interview responses. The health issues are color coded across the sources for easier analysis. The community used this analysis to prioritize the most significant health issues in the county at the community health summit.

| 2020 CHNA | Secondary Data | ACLAMO | Interviews |
|--|---|---|--|
| Mental Health – access to resources, adolescent, undocumented Obesity – nutrition Substance use disorder Access to care Chronic diseases – heart disease, diabetes, etc. Socioeconomics – housing, safety, health disparities | Adult smoking Adult obesity Life expectancy for black population Social associations Long commute driving alone | Housing or housing case management Rental or utilities assistance Youth programs (afterschool) or childcare Immigration services | Access to care and insurance Chronic diseases – heart, diabetes, high blood pressure, asthma, cancer Diet and nutrition Mental health Substance use SDOH – housing, food, childcare, utilities Maternal and infant mortality Healthcare associated infections Gun violence |
| Green = access; Blue = healthy weight; On | range = SDOH; Teal = mental health/add | iction; Yellow =diseases; Pink = child/infant; F | Purple = substance misuse; gray= other |



Photo Credit: SCPA

Results of the CHNA: Prioritized Health Needs

Prioritization Criteria

The hospital leadership reviewed the community health information and used the criteria below to prioritize the health needs in the community.

| Magnitude | How big is the problem? How many individuals does the problem affect, either actually or potentially? |
|---------------------------------|--|
| Seriousness of the Consequences | What would happen if the issue were not made a priority? |
| Equity | Does this affect one group more than others? |
| Feasibility | Is the problem preventable? How much change can be made? What is the community's capacity to address it? |

Most Significant Community Health Needs

The community participants at the community health summit reviewed the community health information and used the criteria above to prioritize the health needs in the community.

The following needs were prioritized by attendees at the Community Health Summit. Using a nominal group technique, each attendee received three post-it notes to record their top three priorities.

- 1. Substance use 9
- 2. Mental health -8
- 3. Access to care 7
- 4. Healthy eating/active living for healthy weight -7
- 5. Chronic disease 6
- 6. Unhoused population 2
- 7. Social determinants of health 2
- 8. Health inequities 1
- 9. Proper and educated caregivers for the elderly 1
- 10. Gun violence 1
- 11. Long commute driving alone 1

Community Health Summit Brainstorming

Once the stakeholders had prioritized the most significant health issues, the table groups discussed what might be done to improve the health issue. The attendees brainstormed solutions for the top six issues. Below are notes from the brainstorming session.

Significant Health Need 1: Substance Use Disorder (opioid crisis)

Goal 1 - Increase the number of client referrals to appropriate resources

Action 1 – Improve warm handoffs to those resources for smoother transitions

Action 2 – Increase Narcan education and distribution from the ER

Resources/Collaborators Needed: County Substance services, County rehab facilities, partner with drug companies to increase availability of Narcan for distribution

Goal 2 - Increase information and education

Action 1 – Participate in county/township events providing education/resources for Narcan distribution

Action 2 - Explore educational opportunities /resources for children in middle school

Action 3 – Explore utilization of peer recovery specialists in the hospital

Resources/Collaborators Needed: County school districts, state and local grants

Significant Health Need 2: Mental Health

Goal 1 - Improve resources

Action 1 – Provide patients with resources – determine how to get patients into facilities across county lines

Action 2 – Educate staff on how to deal with mental health patients and remove stigma Resources/Collaborators Needed: Marketing and communication leadership

Goal 2 - Increase partnership with community mental health resources

Action 1 – Develop partnership with NAMI

Action 2 – Provide support groups at the hospital

Action 3 – Increase communication about resources - NAMI, mobile crisis services, 988

Resources/Collaborators Needed: School systems, educators, mental health agencies and providers

Significant Health Need 3: Access to care

Goal 1 - 10% increase in access to care

Action 1 – Focus on the southeast side of Norristown, partnering with food pantries and the FQHC (Norristown Regional Medical Center) to get people care

Action 2 – Determine what is keeping people from accessing care – cost, distrust, fear

Action 3 - Increase telehealth access

Goal 2 - 10% increase in access to medications

Action 1 – Determine medication resources available

Action 2 – Distribute GoodRx cards to more people

Resources/Collaborators Needed: County Health Department, local churches, food pantries, Montgomery County government, Norristown Chamber of Commerce

Significant Health Need 4: Healthy weight and chronic disease prevention

Goal 1 - Increase physical activity to achieve the recommended amount of activity on a weekly basis

Action 1 - Launch/engage actively participate in campaign to encourage outdoor activity

Action 2 - Launch walk with a doctor initiative, support PA Walk Works (campaign to increase outdoor recreation), Health Promotion Council (growing outdoor recreation in PA)

Resources/Collaborators Needed: County Office of Public Health, Department of Conservation of Natural Resources, hospital staff and doctors

Goal 2 - Increase the percentage of teens and adults consuming the recommended amount of fresh fruits and vegetables

Action 1 – Build referral linkage to healthy food sources when screened for food insecurity

Action 2 - Join Good Foods, Healthy Hospitals Initiative from Hospital Association of Pennsylvania (HAP)

Resources/Collaborators Needed: SHARE food program, MontCo Anti-Hunger network, MontCo Office of Public Health/Health and Human Services, local farms, MANNA (medically-nutritious, medically appropriate meals), health insurers, farmers market food bucks program



Photo credit: SCPA

Impact of 2020 CHNA and Implementation Plan

| Impact Since Previous CHNA | | Update: 6/2/23 |
|---|--|---|
| Significant Health Need Identified in Preceding CHNA | Access to care for minority groups, undocumented, home health | |
| Goals for significant need improvement | Activities to Address Health Needs identified in Preceding Implementation Strategy | Results, Impact, & Data Sources |
| Develop and implement a community-wide Medicaid enrollment and retention strategy | Case Management and Registration instituted processes to accommodate this need. | July-Dec. 2022: 29 referrals Jan-May 2023: 31 referrals |
| 2. Promote programs that improve access to care and services in the communities we serve | Our medical residents hold monthly health screenings at a local church. | Approximately 30 screening completed each month |
| 3. Simplify scheduling appointment: texts, emails | Registration instituted processes to accommodate this need. | Process in place |
| 4. Offer same-day services, including telehealth medicine | TelePsychiatry service began 12/22 | For 12/22-3/23, 20 patients have received this service. |
| | Family Medicine office accepts walk-ins as schedule permits | Ongoing |
| 5. Direct and assess high-risk populations for appropriateness for referral to Suburban Community Hospital's Health Promoter program (Free medical screenings for chronic diseases) | Our medical residents hold monthly health screenings at a local church. | Approximately 30 screening completed each month |

| Significant Health Need Identified in Preceding CHNA | Behavioral Health-Access to resources, adolescent, undocumented | |
|---|---|---|
| Goals for significant need improvement | Planned Activities to Address Health Needs identified in Preceding Implementation Strategy | Results, Impact, & Data Sources |
| 1.Identify and document existing community resources and gaps in behavioral health services | a. Brochure created & disseminated with discharged patient; includes information about psych providers in the area as well as a directory list of services that can be offered to the population identified in the gap analysis | a. Approximately 175 pamphlets distributed to discharged BHU patients, 2022 |
| | b. Had a conference call with NAMI Montgomery County representatives, discussed their involvement on transition of care; | b. NAMI brochures provided to BHU pts. |
| | c. Hospital and NAMI going out to community college and having an educational session about substance abuse, where to get help, etc. | c. December, 2021 – Was handled by Abby Grasso, Executive Director, NAMI Montgomery County, PA |
| 2. Expand telehealth options and education, including school personnel, correctional facilities, and other members of the community. | TelePsychiatry service began 12/22 | For 12/22-3/23, 20 patients have received this service. |
| 3. Integrate behavioral health into primary care offices to increase access and decrease stigma. | When patients visit Family Medicine (FM), if determined they need psych. care, the patient will be sent to SCPA ED for evaluation by Psy. NP | Psy NP for ED on hold. FM refers patients to SCPA BHU as needed, mostly seeing teens who are in need of these services. |
| 4. Compile and disseminate behavioral health resource list, complete gap analysis and expand options for behavioral health services in the community. | List created and given to patient at discharge | Approximately 175 pamphlets distributed to discharged BHU patients, 2022 |

| Significant Health Need Identified in Preceding CHNA | Obesity | |
|---|--|---|
| Goals for significant need improvement | Planned Activities to Address Health Needs identified in Preceding Implementation Strategy | Results, Impact, & Data Sources |
| Provide education on healthy eating to schools, churches and community organizations | SCPA Dietitian provided education sessions to: Montco Seniors (SAAC) and Eisenhower Middle School career day | session canceled by school, they did not reschedule |
| Collaborate with local food organizations to target the vulnerable populations | Select 3 closest food organizations; ask them what we can do for them? | Organizations contacted, but declined assistance |
| 3. Support a health challenge event offering BMI screening and dietary assessments by licensed dieticians | Residents involved in screening for chronic disease as they participate in the Health Promoter program that we run in conjunction with St. Patrick's Church, where they screen for HTN, DM, HLD and BMI screening. People screened meeting criteria are then seen in our family medicine office. | Approximately 30 screening completed each month |
| 4. Partner with primary care on tactics to reduce obesity and improve mind, body and spiritual wellness | Obtain a list of dietitians and their insurance; provide same to PCPs | List provided to PCPs |

| Significant Health Need Identified in Preceding CHNA | Chronic Diseases-heart, diabetes, obesity | |
|--|---|---|
| Goals for significant need improvement | Planned Activities to Address Health Needs identified in Preceding Implementation Strategy | Results, Impact, & Data Sources |
| 1. Health Promoter program | Residents give monthly education sessions @ St. Patrick's Church | An avg. of 25 community members are seen each month. |
| 2. Community members meeting criteria will be referred to Family Medicine in Norristown | Residents involved in screening for chronic disease as they participate in the Health Promoter program that we run in conjunction with St. Patrick's Church where they screen for HTN, DM, HLD and BMI screening. People screened meeting criteria are then seen in our family medicine office. | Approximately 30 screening completed each month |
| 3. Provide education via multiple sources: digital media, health fairs, senior centers, and publications | Weight Loss lecture-Montco Seniors | This activity was provided by residents prior to dietitian arrival. |
| 4. Screen for tobacco use and enroll in smoking cessation program | Provide pamphlet at St. Patrick's Church including Spanish versions; Tobacco Education Treatment for Central Behavior Health Center; Plymouth Day Health Fair; Young Lungs Program, Montco/Parks-Rec. program; Tobacco Education to Del Val Trust Co.; Tobacco Quit Kits supply to each Montco. State Reps offices. | Ongoing |



Photo Credit: SCPA/Getty Images

Appendices

- 1. Interview Summary
- 2. Community Asset Inventory

1. Interview Results

Seventeen community stakeholders representing the broad interests of the community as well as those representing low income, medically underserved, and minority populations participated in interviews on June 1, 2023, for their input into the community's health. Community participation in the interviews represented a broad range of interests and backgrounds. Below is a summary of the interviews.

1. How do you define health?

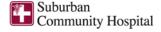
- Community wellbeing with few obstacles to pursue their life
- Wholistic, mental, physical, social, emotional wellbeing
- Need to identify basic needs then can move up the needs hierarchy. There is a homeless community here
- Ability to attain wellness, mental, physical access to stable housing, food, income, education, safety net to catch you.
- WHO definition optimal physical, mental, social wellness of a person a community
- Not being hungry, well-groomed, clean, being happy with a stable family life.

2. For the purposes of this Community Health Needs Analysis, the community is Montgomery County, generally, how would you describe the community's health?

- We are an aging population with a lot of extended care facilities with all the different issues of seniors.
- Poor for the homeless and those in poverty. Huge gap in services available to needs.
- Good for most, terrible for some, and not as good as could be for everyone else.
- Ranges from very good to unhealthy depending on sociodemographics
- · Not so healthy in Norristown
- As a whole, Montgomery County ranks among the healthiest counties in the Commonwealth (4th per the County Health Rankings). When looking at the population as a whole, Montgomery County has lower rates of chronic conditions, communicable illnesses, substance use disorders, and other health concerns. Again, looking at the county as a whole, Montgomery County has stronger access to health care and other providers. When we disaggregate the data, however, we see that not all county residents enjoy the same level of health and the same level of access to care and resources.

3. What are the biggest health needs, concerns, or issues for the communities today?

- Access to care and insurance
 - Access to affordable healthcare
 - Especially those with low income
 - Access to primary care and specialists e.g., GI
 - Lack of affordable insurance
 - hourly jobs not offering health insurance
 - o Insurance to cover needed services
 - Medicare crisis and case management for mental health and substance use
 - Private insurance to cover needed services
 - Capacity of the health care system and delayed prevention in the wake of COVID
- Chronic and acute conditions
 - Chronic disease
 - Diabetes
 - High blood pressure
 - Asthma
 - Cancer
 - Renal failure
 - Acute conditions
 - Chest pain



- Abdominal pain
- Stroke
- Heart disease that goes undetected. Results of having COVID, correlation to heart disease.
- Healthcare associated infections, sexually transmitted infections, Hepatitis A, and syphilis

Diet and Nutrition

- Diabetes, high blood pressure, obesity due to diet. Eating processed foods high in carbs and
- Access to healthy foods; access to corner store versus grocery store with whole foods and produce
- Food is the second highest requested support service in the county

Mental health

- More and more demand for fewer mental health services, patients staying in the ER with no psychiatric care.
- Demand for mental health growing, suicides increasing, and due to workforce issues, long waits for services.
- Lack of understanding of paying attention to mental health and wellness, early intervention, awareness of trauma responses

Substance use disorders

- Opioids, heroin, and fentanyl
- Alcoholism
- Increase in overdoses and overdose deaths
- Drug use usually intersects with mental health.
- 0 Smokina
- Increase in demand for substance use disorder services. Group recovery living with not enough help/counseling or food education
- Naloxone and Narcan are band aids on the problem. Some feel they can recover from an overdose now. It doesn't work all the time.

Social Determinants of Health

- Safe, affordable housing
- Affordability for basic needs: housing, food, childcare, utilities 0

Others

- Maternal and infant mortality
 - Particularly disparities impacting Black and African-American residents
- Need for diversity in the workforce- i.e., Spanish speakers
- Decrease in recruited workers due to mills along the river that went out of business 0
- Income in the county is high, but there is a population of undocumented individuals
 - Low-income in Norristown
- Lack of exercise
- Education on resources needed, prescribed medications, and healthy lifestyles throughout the diverse population
- Effects of gun violence
- Strive to keep primary care physician residents local

4. What are the most important health issues facing various populations including medically underserved, low-income populations?

- Access to care
 - Primary care
 - Indigent and immigrants not in the system
 - Lack of preventive care
 - Trouble accessing care for non-English speaking populations, e.g., East Asian population
 - Affordability and accessibility to healthcare and medications

- Especially for underserved, immigrants, and those undocumented
 - Build trust between providers and patients
- Education of medical assistance programs
- Undocumented population can't access public assistance, which leads to increase in end stage diabetes and heart disease
- Transportation
- Chronic diseases
 - Diabetes and hypertension
- Mental health and substance use
 - Mental health
 - Addiction, in part contributing to homelessness
- Health education and Literacy
 - Health literacy is poor
 - Community health education needed
 - Education regarding a healthy lifestyle since resources are available
- Others
 - See injuries or lack of follow up in younger population
 - Lack of confidence in the healthcare system
 - Need a trusted resource like a health navigator from people in their community
 - Take care of all incoming patients 0
 - Violence in Norristown
 - Geographic & sociodemographic higher social vulnerability index (SVI from the CDC)

5. What are the most important health issues facing various populations including minority populations?

- **Health inequities**
 - Lower life expectancy
 - Higher communicable and chronic diseases
 - Higher rates of infant mortality
 - Some minority populations feel treated differently leading to lower preventive tests
 - Informed data reporting systems that have gender, sexual orientation, race, ethnicity, specific diseases associated with different groups like diabetes, depression and have informed staff to properly assess different patients
- Communication and Cultural Differences
 - Need interpretive services
 - Lack of communication on follow up care post-COVID
 - Need for bilingual staff and cultural intelligence
 - Need for trust building between providers and patients
- Access to care
 - o Immigrant population in Norristown doesn't have insurance
 - Access to primary care providers
 - Transportation
 - Lack of closeness to urgent care facilities, especially on the west end of town
 - Childcare for doctor visits
 - Education on flu shots and COVID vaccines
- Lifestyle
 - Smoking rate is higher
 - Heathy diets- access to grocery stores
- Mental health and substance use
 - Mental health issues 0
- Others
 - More age related than race or ethnicity related

- Access to education
- Asian, Hispanic, and Black are the minority populations

6. What are the most important health issues facing children?

- Mental Health
 - Mental health-highly effected community by COVID
 - Depression, suicidality, and social anxiety
 - Mental and emotional instability
 - Decrease in behavioral health staff
 - Adolescents in ERs with acute mental health needs
 - Excessive screen time
- Substance Use
 - o Drug use
 - More susceptible to vaping and drugs
- Prevention/Vaccinations
 - Vaccinations are down lower than pre-COVID
- Diet and Nutrition
 - Obesity and diabetes at younger ages due to poor diets
 - Affordable healthy meals
- Social Determinants of Health
 - Need for clean housing
 - Abuse, neglect, gun violence, and family conflict
 - Education
- Others
 - Increase in asthma and allergies
 - Lack of exercise
 - Less parenting and increased child use of electronics
 - After school program shortages
 - Lack of family support for pediatric healthcare needs
 - Access to nearby children's hospital
 - Sense of entitlement

7. What are the most important health issues facing seniors?

- Chronic diseases and conditions
 - More fragile
 - Heart disease
 - Stroke
 - Diabetes
 - Arthritis
 - Hypertension
- Mental Health
 - Dementia 0
 - Behavioral health support and stigma regarding mental health issues
 - Social isolation 0
 - Cognitive help with the elderly population
 - Suicide prevention
- Access to Care/Transportation
 - Transportation and cost of transportation
 - Increase focus on elderly care, especially with the shift to NPs and PAs
 - Increasing appointment wait times for specialty appointments
- <u>Lifestyle Diet and Exercise</u>
 - Education on lifestyle changes

- Lack of exercise and areas for exercise
- Food insecurity 0

<u>Others</u>

- Mobility concerns
 - Obesity & illnesses
- Lack of stable affordable senior housing
- Childcare due to seniors caring for grandchildren
- Education for the senior population regarding emergency and non-emergency contacts
- Care for the caregivers
- Healthcare acquired infections because of the LTC facilities in the county
- Veterans 75+ years old in crisis unable to safely age at home without safeguard
- Long-term care inadequate staffing

8. The community performed a CHNA in 2020 and identified priorities for health improvement,

- 1. Mental Health access to resources, adolescent, undocumented
- 2. Obesity nutrition
- 3. Substance use disorder alcohol, substances, opioids, smoking
- 4. Access to care for minority groups, undocumented, home health
- 5. Chronic diseases heart disease, diabetes, obesity, etc.
- 6. Socioeconomics housing, safety, health disparities

What has changed most related to health status in the last three years?

- May have more resources
- All have stayed the same or gotten worse, e.g., mental health since COVID, especially with kids
- Benefit access and eligibility granted during COVID now being revoked, e.g., food access
- Decreasing healthcare staff
- Unsupervised social media
- Increased substance abuse
- Lack of support for veterans including housing, substance use, mental health

9. What environmental factors have the biggest impact on community health?

- Infrastructure parks, roads
 - Lack of green spaces for kids
 - Accessibility to safe walk paths
 - Need public transportation.
 - Have lots of recreation, bike paths, walking paths

Safety/violence

- Violence associated with drugs and domestic violence
- Protection and safety for all communities including parks
- Underlying contributors to violence income, jobs, social isolation, radicalization, racism, emotional regulation
- Access to healthy foods
 - Lack of access to farms and nutritious food
 - Preservatives in food
 - Increasing cost of healthy food with wages not increasing
- Social determinants of health
 - o Safe, affordable housing
 - Employment
 - Education
 - Access to food
 - Access to childcare

- Cost of living
 - Inflation and wages not increasing at the same rate
- Less active since the pandemic

10. What do you think the barriers will be to improve health in the communities?

- Resources
 - Finances
 - Time, commitment systems, organizations, people charged with health improvement
- Access to Care and Services
 - Government rules and regulations
 - Decrease in hospital staff and qualified physicians
 - o Decrease in health insurance reimbursement and patient payments
 - Access to affordable healthcare and medications
 - Healthcare structures are intimidating to unhoused populations, e.g., strict appointment times and long forms
- Cost of food and housing
 - Availability of food with expensive copays and deductibles
 - Health needs come second to housing and food needs
 - Increasing homelessness
 - Affordable housing
- Chronic stress due to finances, transportation, and linguistically and culturally appropriate care
- Access to information, e.g., online, television, and social media
- Environmental and social factors
- Lack of utilization of offered help

11. What community assets support health and wellbeing?

- Healthcare Facilities and services
 - Extended care facilities

 - Hospital and hospital networks 4 systems and 9 hospitals
 - Meals on Wheels
 - Shannondale senior living community
 - o Family Med Clinic and primary care clinics with education and screenings
 - Norristown Regional Health Center
 - Great 911, public safety, fire, police, EMS
 - Physicians
- Parks and Trails
 - Bike path along the river
 - Schuylkill River and trail
 - Parks and Recreation
 - Several parks, trails, and recreation
- **Community Services**
 - o Community outreach services, e.g., mental health and shelters
 - Homeless organization sees 1,000 individuals/year
 - Programs in the community, e.g., County Health and Human Services with access to bike helmets and education
 - Food Banks and MAHN Montgomery County Anti-Hunger Network
 - **Tobacco Cessation programs**
 - Nonprofit organizations
 - Health programs and resources available
 - o Avenues for socialization, parks, museums, public spaces, auditoriums

- Garden partnerships
- Community coalitions Montgomery County Health Alliance, Pottstown Area Health and Wellness, MC multi-faith coalition, Pottstown Beacon of Hope, Neighbors Helping Neighbors
- o ACCESS services mobile/street medicine partnership with Tower Health
- RSVP services provided by volunteers to support seniors in their homes
- Transportation hub in Norristown
- Stronger presence of certified peer recovery specialists that focus on the different communities that are linguistically and culturally responsive to their needs and build community

12. What, if any, health inequities exist in the community?

- Homeless population with several health issues and fear of seeking care
- The unhoused population has the greatest challenges, e.g., contact, transportation, health
- Access to COVID testing & vaccines
- Lower life expectancy, higher infant mortality, and chronic conditions such as diabetes in minority populations
- Social determinants of health (SDOH) and your ZIP Code
- Treat all incoming patients
- Financial disparities and access to affordable healthcare and insurance

13. If you had a magic wand, what improvement activities should be a priority for the county to improve health? What would you do with unlimited resources?

- Access to healthcare services (locally)
 - o Improve access to care and increase availability of primary care and specialists, especially outside the city such as GI, Cardiology, Neurology, and Endocrinology
 - Transportation and easy, innovative access to care
 - Address barriers to accessing care 0
 - Low insurance reimbursement rates
 - Increase prevention services
 - Mental health
 - Build a 24-hour mental health and substance abuse observation center
 - Increase access to mental health services in a safe environment
 - Create a mental health response team since 50% of police calls are mental health related
- Coordination/cooperation/communication
 - County-wide initiatives to address mental health and substance abuse
 - Create robust partnerships in the community to increase coordination among services
 - o Increase program information and education in the community
 - Improve communication and provide resources for the diverse population
- Children's health
 - Access to meals
 - Gun regulations
 - o Implement asthma treatment and health care in schools
 - Increase resources including funding and staffing, for childcare programs and early learning programs, especially for those with challenging behaviors
 - Unlimited training for those who work with children and parents
- Senior health
 - Elderly support
 - Create safe spaces for senior and intergenerational gatherings
 - Conversations with the population about individual, specific needs
- Help with social determinants of health
 - Affordable housing

- Food deserts and transporting food home
- Need for more education and resources
- Increase in homeless population deaths since COVID
- Universal basic income to alleviate stress associated with food, housing, and raising families
- Health equity/belonging
 - o Implement consistent services in the community
 - No health and human service bias by sexual orientation, gender identity, race, ethnicity
 - Create safe spaces where people feel welcome
- Support the safety net advocate and champion for police and EMS being well funded
- Tear down the health and wellness infrastructure and start over
- Develop self-motivated, self-starters who set a goal and achieve it, focused on follow-through

Community Asset Inventory

The section contains a list of community assets and resources relative to the most significant health issues that can help improve the health of the community and assist with implementation of the plan that accompanies this document. This asset inventory is not exhaustive and may have inadvertently omitted community resources. There is a form for making changes after the inventory at the end of this section.

Substance Use

Crossroad of Norristown 152 West Main Street Norristown, PA 19401 800-805-6989

Valley Forge Medical Center & Hospital 1033 West Germantown Pike Norristown, PA 19403 610-539-8500

Central Behavioral Health 1201 Dekalb Street Norristown, Pennsylvania 19401 610-279-9270

Montgomery County Outpatient 166 West main Street Norristown, PA 19401 610-239-9600

Mental Health

Hopeworx 1210 Stanbridge Street, Suite 600 Norristown, PA 19401 610-270-3685

Montgomery County Mental Health 1430 Dekalb Street, Norristown, PA 19404 610-278-3000

Lifestance Health 140 West Germantown Pike, Suite 160 Plymouth Meeting, PA 19462 484-440-9187

Regional Mental Health Services Coordination Office 537 Foundry Road, Suite 1B Norristown, PA 19403 610-313-5520

Access to Care

Einstein Medical Center Montgomery 559 West Germantown Pike East Norriton, PA 19403 484-622-1000

Suburban Community Hospital 2701 Dekalb Pike Norristown, PA 19401 610-278-2000

Patient First Primary and Urgent Care Montgomeryville 713 Bethlehem Pike Montgomeryville, PA 18936 267-695-3944

Delphi Family Health Center 1000 Gravel Pike Route 29, Suite 400 Schwenksville, PA 19473 610-287-6650

Norristown Regional Health Center 1401 Dekalb Street Norristown, PA 19401 610-278-7787

Healthy Eating/Active Living

Healthy Eating Resources

The Vitamin Shoppe 757 Bethlehem Pike Montgomeryville, PA 18936 215-368-8144

Trader Joe's 1460 Bethlehem Pike North Wales, PA 19454 215-646-5870

Holy Hills Health Foods, Inc. 1200 Welsh Road Suite North North Wales, PA 19454 215-361-7770

Grocery Outlet 2917 Swede Rd East Norriton, PA 19401 484-684-6337

Sprouts Farmer's Market 2001 Welsh Rd Dresher, PA 19025 267-715-0602

Simple Again 59 Airport Road Pottstown, PA 19464 888-732-9151

Whole Foods Market 1575 The Fairway Jenkintown, PA 19046 215-481-0800

Kimberton Whole Foods 222 E Main St Collegeville, PA 19426 484-971-6055

Recreation Centers/Community Centers

Montgomery Township Parks & Recreation 1030 Horsham Road Montgomeryville, PA 18936 267-649-7200

Skippack Township Parks & Recreation 4089 Heckler Road Skippack, PA 19474 610-454-0909

Upper Providence Township Community Center 499 Hopwood Road Collegeville, PA 19426 484-391-2390

Upper Merion Township 431 West Valley Forge Road King of Prussia, PA 19406 610-265-1071

Greater Plymouth Community Center 2910 Jolly Road Plymouth Meeting, PA 19462 610-277-4312

Parks

Lorimer Park 183 Moredon Road Huntingdon Valley, PA 19006

Green Lane Park 2144 Snyder Road Green lane, PA 18054

Windlestrae Park 1147 Kenas Road North Wales, PA 19454

Central Perkiomen Valley Park 1 Plank Road. Schwenksville, PA 19473

Fischer's Park 2235 Bustard Road Harleysville, PA 19438

Mondauk Common Park 1451 Dillon Road Ambler, PA 19002

Lower Perkiomen Valley Park 101 New Mill Road Oaks, PA 19456

Stony Creek Park 200 East Hancock Street Lansdale, PA 19446

Upper Salford Park 559 Salford Station Road Schwenksville, PA 19473

Miles Park 303 Germantown Pike Lafayette Hill, PA 19444

Charles L Reed Memorial Park 155 Clemens Road Lower Salford Township, PA 19438

Friendship Park 200 Enclave Boulevard North Wales, PA 19454

Manderach Memorial Playground 180 Swamp Pike Neiffer, PA 19473 Lansdale, PA 19446

Lock 60 Recreation Area 400 Tow Path Road Mont Clar, PA 19453

Mermaid Park - Springfield Township 800 East Mermaid Lane Wyndmoor, PA 19038

Eagleville Park 100 Parklane Drive Norristown, PA 19403

Flat Rock Park 122 River Road Gladwyne, PA 19035

Masons Mill Park 3500 Masons Mill Road Willow Grove, PA 19090 Ashbridge Park 1301 Montgomery Avenue Bryn Mawr, PA 19010

Evansburg State Park 851 Mayhall Road Collegeville, PA 19426

Lukens Park 540 Dresher Road Horsham, PA 19044

Firehouse Park 1601 Bustard Road Harleysville, PA 19438

Parkside Place Park 1 Parkside Place North Wales, PA 19454

Whites Road Park 400 Whites Road Lansdale, PA 19446

Eskie Park 500 Church Road Eagleville, PA 19403

Fellowship Park 199 Meadowood Drive Lansdale, PA 19446

Prophecy Creek Park 205 West Skippack Pike Ambler, PA 19002

Heuser Park 694 West Beidler Road King of Prussia, PA 19406

Lenape Park 4991 West Skippack Pike Collegeville, PA 19473

Chronic Disease

Freeman Endocrinology 2705 Dekalb Pike, Suite 309 Norristown, PA 19401 215-871-1916

Montgomery Family Practice 1330 Powell Street Nicholas and Athena Karabots Medical Building, Suite 409 Norristown, PA 19401 484-622-7510

Einstein Heart and Vascular Care 559 West Germantown Pike East Norriton, PA 19403 484-622-1000

Einstein Cancer Care 559 West Germantown Pike East Norriton, PA 19403 484-622-1000

Sources

Substance Use

https://locations.crossroadstreatmentcenters.com/pa/norristown/PA129/

https://vfmc.net/

https://www.centralbh.org/

https://www.gaudenzia.org/location/montgomery-county-outpatient/

Mental Health

https://www.hopeworxinc.org/what-we-do/overview.html

https://www.montgomerycountypa.gov/1219/Mental-Health

https://lifestance.com/

https://dvch.org/norristown-regional-health/

Access to Care

https://www.einstein.edu/einstein-medical-center-montgomery

https://suburbanhosp.org/?utm_source=GMBlisting&utm_medium=Organic&utm_campaign=G

MBWebsite

https://www.patientfirst.com/locations/eastern-

pennsylvania/montgomervville?v source=1 NTI1NTU2MzAtNzE1LWxvY2F0aW9uLndlYnNpdGU %3D

https://dvch.org/

https://towerhealth.org/locations/delphi-family-health-center

Healthy Eating/Active Living

https://locations.vitaminshoppe.com/pa/montgomeryville/vitamins-supplements-

montgomeryville-pa-53.html?utm_source=gmb&utm_medium=local

https://locations.traderjoes.com/pa/north-

wales/639/?utm_source=gmb&utm_medium=organic&utm_campaign=local

https://hollyhillvitamins.com/

https://www.groceryoutlet.com/circulars/storeid/729

https://www.sprouts.com/store/pa/dresher/upper-dublin/

https://www.simpleagain.com/

https://www.wholefoodsmarket.com/stores/jenkintown?utm_source=google&utm_medium=or

ganic&utm_campaign=listings

https://www.kimbertonwholefoods.com/locations/collegeville/

https://www.skippacktownship.org/parks-recreation/

https://www.uprov-montco.org/213/Parks-Recreation

https://www.tclf.org/landscapes/awbury-recreation-center

https://www.umtownship.org/departments/parks-recreation/community-center/

https://www.plymouthtownship.org/greater-plymouth-community-center/

Chronic Disease

https://www.freemanendocrinology.com/norristown/

https://www.einstein.edu/locations/primary-care/montgomery-family#

https://www.einstein.edu/cancer

https://www.einstein.edu/heart-and-vascular

Change Form

| To update or add information, complete the form | n below |
|---|-------------|
| Name of Organization: | |
| Contact Name: | |
| Phone #: | Fax #: |
| Email: | |
| Web page: | |
| Mailing Address: | |
| List services: | |
| Please describe your organization's purpose, ser | vices, etc. |
| Submit updated information to: Suburban Community Hospital Marketing Depart | |

Community Health Needs Assessment for Montgomery County

Completed in partnership with:



