

Implementation Strategy Plan 2022



AHN CANONSBURG

Report





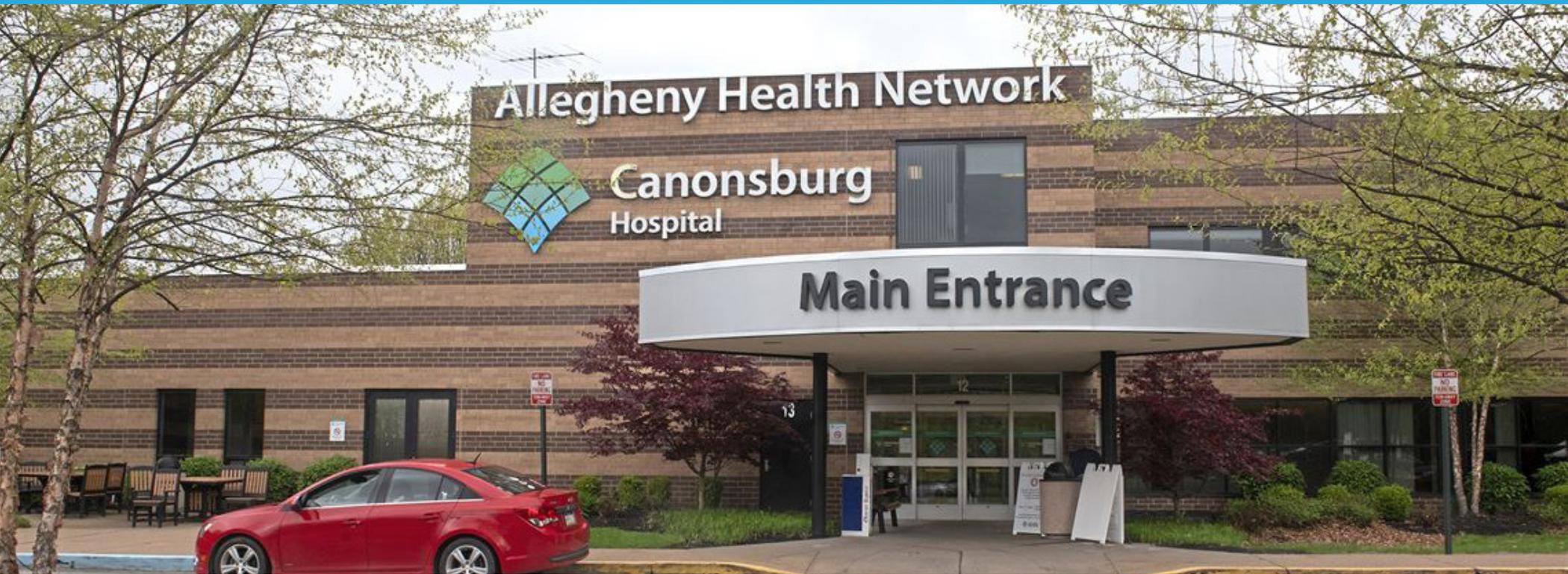
About Allegheny Health Network (AHN)

The hospitals of Allegheny Health Network, as they have for decades, provide exceptional health care to help people live healthy lives and continue to extend their reach, offering a broad spectrum of care and services. The tradition continues by using the latest medical innovations to treat patients. Gaining knowledge through research to constantly improve how to prevent, diagnose, and treat illness, AHN staffs each hospital with experienced, expert, and compassionate physicians, nurses, and other health care professionals dedicated to medicine, people, and healing.

AHN can extend its reach to more people as a health network by offering a broad spectrum of care and services. AHN has 14 hospitals and more than 200 primary- and specialty-care practices. AHN has approximately 2,400 physicians in every clinical specialty, 21,000 providers, and 2,000 volunteers. AHN provides world-class medicine to patients in their communities, across the country, and around the world.

AHN's physicians continually explore and develop new treatments that allow us to bring medical discoveries from the laboratory directly to patients. These breakthroughs help save lives and give patients access to the latest treatments for disease and medical conditions. Allegheny Health Network is also committed to educating and training the next generation of doctors by serving as the clinical campus for both Lewis Katz School of Medicine at Temple University and Drexel University College of Medicine.

Allegheny Health Network is an integrated health care system that serves patients from across a four-state region that includes Pennsylvania and portions of New York, Ohio, and West Virginia. AHN has more than 80 medical, surgical, and radiation oncology physician practices; one of the state's most extensive bone marrow transplant and cellular therapy programs; and the nation's largest – and western Pennsylvania's only – radiation oncology network accredited by both the American Society for Radiation Oncology and American College of Radiology. Allegheny Health Network's cancer program has more than 200 clinical trials offered throughout its network of hospitals and clinics.



About AHN Canonsburg

AHN Canonsburg is a 104-bed community hospital located 25 miles southwest of Pittsburgh, in Strabane Township. Founded in 1904, AHN Canonsburg serves residents primarily from northern Washington and southern Allegheny counties. AHN Canonsburg also employs more than 400 members of the community and has more than 235 physicians. With a singular dedication to providing high-quality medical care to the community, AHN Canonsburg's physicians and staff never lose sight of what's most important – their patients and families. For more than 100 years, Canonsburg Hospital has worked hard to earn the communities' trust by providing excellent patient care.

As part of Allegheny Health Network, AHN Canonsburg offers access to leading medical experts and the newest technology close to home. AHN Canonsburg is a top provider of excellent medical services. AHN Canonsburg provides the community with the best health care in a small, intimate setting. People turn to AHN Canonsburg for a wide range of health services. At AHN Canonsburg, residents have access to expert health care providers from multiple medical specialties, including ambulatory care center, heart disease, orthopedics, pulmonary and sleep services, therapy and rehabilitation services, surgery, and women's health.



Mission

To create a remarkable health experience, freeing people to be their best.

Vision

A world where everyone embraces health.



Values

People matter

Every person contributes to our success. We strive for an inclusive culture, regarding people as professionals, and respecting individual differences while focusing on the collective whole.

Stewardship

Working to improve the health of the communities we serve and wisely managing the assets that have been entrusted to our care.

Trust

Earning trust by delivering on our commitments and leading by example.

Integrity

Committing to the highest standards encompassing every aspect of our behavior including high moral character, respect, honesty, and personal responsibility.

Customer-focused collaboration

Because no one person has all the answers, we actively seek to collaborate with each other to achieve the right outcomes for our customers.

Courage

Empowering each other to act in a principled manner and to take appropriate risks to do what is right to fulfill our mission.

Innovation

Committing to continuous learning and exploring new, better, and creative ways to achieve our vision.

Excellence

Being accountable for consistently exceeding the expectations of those we serve.



Introduction

Serving the community since 1904, Canonsburg Hospital has evolved into a 104 licensed bed hospital with 400 physicians and over 430 staff members. The leadership and staff are dedicated to providing high quality medical care to the community and maintaining the trust of the patients and their families.

In 2022, AHN partnered together with Tripp Umbach to conduct a comprehensive community health needs assessment for AHN Canonsburg's service area. The CHNA process included input from persons who represent the broad interests of the community served by the hospital, including those with special knowledge of public health issues and representatives of vulnerable populations. The overall CHNA involved multiple steps that are depicted in the below flow chart.

Figure 1: Overall CHNA and Implementation Strategy Plan (ISP) Process Flow Chart



The CHNA and implementation strategy plan meets the requirements of the Patient Protection and Affordable Care Act. The act has changed how individuals are obtaining care and promotes reduced healthcare costs, greater care coordination, and better care and services. Health care organizations and systems are striving to improve the health and social needs of the community they serve through collaboration with local, state and national partners. The implementation strategy plan outlines the needs identified in the CHNA and documents how AHN Canonsburg will be addressing the needs over the next three years. All needs identified in the CHNA will be addressed by AHN Canonsburg.

ISP Strategies that will not be addressed

AHN Canonsburg will continue to provide efforts and care related to heart disease and diabetes but will not pursue the creation of a specialty center denoted in the 2019 ISP plan.

2021 Prioritized Findings

Allegheny Health Network (AHN)	Social Determinants of Health					Behavioral Health			Chronic Disease					Health Equity
	Transportation	Workforce Development	Cost of Care	Access to care*	Food Insecurity, Diet, and Nutrition	Substance Use Disorder	Mental Health Services	Postpartum Depression	Diabetes	Heart Disease	Cancer	COPD	Obesity	Diversity, Equity, and Inclusion**
Allegheny General Hospital	X	X			X	X			X	X	X			X
Allegheny Valley Hospital	X					X	X		X	X				X
Canonsburg Hospital	X			X		X			X	X				X
Forbes Hospital	X					X	X		X	X		X		X
Grove City Medical Center				X			X		X	X			X	X
Jefferson Hospital	X	X	X		X	X					X		X	X
Saint Vincent Hospital	X	X		X	X	X	X	X	X		X		X	X
West Penn Hospital		X			X			X	X		X		X	X
Westfield Memorial Hospital						X	X		X	X	X			X
Wexford Hospital					X	X	X	X		X				X
Brentwood Neighborhood Hospital			X	X										
Harmar Neighborhood Hospital			X	X										
Hempfield Neighborhood Hospital			X	X										
McCandless Neighborhood Hospital			X	X										

* Access to care includes primary care, specialty care, and access to general services.

**Diversity, Equity, & Inclusion includes LGBTQ+ and cultural competency.



A) Social Determinants of Health

The [World Health Organization \(WHO\)](#) defines social determinants of health as the economic and social conditions that influence individual and group differences in health status. These economic and social conditions under which people and groups live may increase or decrease the risk of health conditions or diseases among individuals and populations.

Social and economic factors contribute 40% to our health, health behaviors 30%, genetics 10%, the physical environment 10% and clinical care 10%, according to the Center for Health and Learning (CHL), an outgrowth of an initiative by the Center for Disease Control and Prevention's (CDC) Division of Adolescent and School Health. According to the CDC, poverty limits access to healthy foods and safe neighborhoods, while higher educational attainment is a predictor of better health. Differences in health and health outcomes are striking in communities with poor social determinants of health such as unstable housing, low-income levels, unsafe neighborhoods, or substandard education. Addressing SDOH is paramount to creating a healthier community.



Access to care

Access to high-quality, comprehensive health care services is essential for maintaining health and preventing and managing disease. Obtaining primary care services and having a primary care physician is a vital part of health care maintenance. Almost one in four Americans do not have a primary care provider (PCP) or health center where they can receive regular medical services. Approximately one in five Americans (children and adults under age 65) does not have medical insurance.¹ Transportation issues, cost, coverage, timeliness of services, and availability of providers are barriers to obtaining health care services.

Across the United States, the projected shortage of 46,900 to 121,900 physicians by 2032 includes both primary care (21,100 to 55,200) and specialty care (24,800 to 65,800). Among specialists, the data project shortages of 1,900 to 12,100 medical specialists; of 14,300 to 23,400 surgical specialists; and of 20,600 to 39,100 other specialists, such as pathologists, neurologists, radiologists, and psychiatrists, by 2032.² The Robert Graham Center reports that to maintain current rates of utilization, Pennsylvania will need an additional 1,039 primary care physicians by 2030, a 11% increase compared to the state's current (as of 2010) 9,096 PCP workforce.³

SDOH: Access to Care				
Goals: Improve access to primary care physicians (PCPs).				
Impact: Increased number of patients have a PCP.				
Target Population	Strategies	Action Steps	Measure	Partners
General Population	Enhance PCP availability.	<ul style="list-style-type: none"> Expand PCP office hours to include weekends. Move hospital-based PCPs back to office base only. Utilize CRNPs 	<ul style="list-style-type: none"> Number of office visits with PCP. Number of Certified Registered Nurse Practitioner (CRNP) visits. 	<ul style="list-style-type: none"> PCPs CRNPs

¹ Healthy People: www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Access-to-Health-Services

² Association of American Medical Colleges: www.aamc.org/news-insights/press-releases/new-findings-confirm-predictions-physician-shortage

³ Robert Graham Center: www.graham-center.org/content/dam/rgc/documents/maps-data-tools/state-collections/workforce-projections/Pennsylvania.pdf



Transportation

Access to health care services has a significant impact on health, including improved overall physical, social, and mental health status, prevention of disease and disability, and better quality of life. Transportation affects residents in rural and urban communities. Having adequate transportation is often a barrier to accessing services and can significantly affect the quality of people's lives. The lack of vehicle access, cost, long distances, and lengthy times to reach needed services impact travel for residents.

SDOH: Transportation

Goals: Improve transportation services for the community.

Impact: (1) Increased access to transportation resources/access to care.

Target Population	Strategies	Action Steps	Measure	Partners
General population	To demonstrate the importance of our transportation services for community members to and from the hospital (Medi-Van).	<ul style="list-style-type: none">Partner with the Medi-Van team for data collection.	<ul style="list-style-type: none">Number of patients using the Medi-Van per month.Types of patients using the Medi-Van per month.	<ul style="list-style-type: none">Medi-Van teamCommunity members



B) Behavioral Health

Falling under the umbrella of behavioral health, substance use, and mental health impact the lives of families and individuals throughout the United States. The percentage of residents diagnosed with behavioral health problems has grown exponentially. Along with the growth, the need for mental health services and substance use programs has not diminished. Genetics and socioeconomic factors play vital roles in individuals diagnosed with a mental health problem, and frequently societal factors increase the likelihood of one engaging in unhealthy life choices such as alcohol and drug use. According to the American Hospital Association, behavioral health disorders affect nearly one in five Americans and have community-wide impacts. Hospitals and health systems provide essential behavioral health care services to millions of Americans every day.

Substance Use Disorder

Although progress has been made in lowering rates of substance use in the United States, the use of behavior-altering substances continues to take a major toll on the health of individuals, families, and communities nationwide.

Behavioral Health: Substance Use Disorder				
Goals: Strengthen ED patient access to drug and alcohol resources.				
Impact: (1) Improved access of drug/alcohol resources; (2) patients more educated on drug/alcohol resources.				
Target Population	Strategies	Action Steps	Measure	Partners
Emergency Department (ED) patients with drug/alcohol problems.	Strengthen access to drug and alcohol to ED patients.	<ul style="list-style-type: none"> Provide access from ED to appropriate inpatient or outpatient treatment programs. Collaborate with Washington Drug & Alcohol Center (WDAC) to have drug and alcohol counselor available to the ED or offsite. 	<ul style="list-style-type: none"> Number of patients seen on site. Number of patients referred off site. Number of Narcan kits issued. Number of return overdose patients in the ED. Number of return patients showing symptoms of drug use in the ED. Number referred to WDAC. 	<ul style="list-style-type: none"> WDAC



C) Chronic Diseases

Chronic diseases are a significant cause of disability and death in Pennsylvania and the United States. The seven leading causes of death are heart disease, cancer, stroke, chronic lower respiratory disease (CLRD), unintentional injury, Alzheimer’s disease, and diabetes. According to the Pennsylvania Department of Health, chronic disease accounts for about 70.0% of all deaths annually in Pennsylvania. With Pennsylvania’s aging population and the advances in health care enabling people to live longer, the cost associated with chronic disease will increase significantly if no changes are made. Clinical preventive services, such as routine disease screening and scheduled immunizations, are key to reducing the effects of chronic disease and reducing death. Preventive services both prevent and detect illnesses and diseases in their earlier, more treatable stages, significantly reducing the risk of illness, disability, early death, and medical care costs.

Chronic Conditions: Diabetes				
Goals: Increase access to diabetes education and resources.				
Impact: (1) Increased awareness and knowledge of diabetic care/resources.				
Target Population	Strategies	Action Steps	Measure	Partners
Diabetic patients and families	Provide education on site and in the community on the health risks of diabetes.	<ul style="list-style-type: none"> Partner with the community to provide diabetes education classes. Conduct health fairs. 	<ul style="list-style-type: none"> Number of education classes provided. Number of health fairs. Number of communities and patients reached. 	<ul style="list-style-type: none"> Community partners Health fair participants
	Reduce the number of hypoglycemic episodes due to the use of older diabetes medications.	<ul style="list-style-type: none"> Screen home medications list to identify patients for use of first generation (older) anti-diabetic medications. Conduct interviews with eligible patients regarding hypoglycemic episodes. When appropriate, convert diabetic patients to newer diabetic medications that have lower potential for hypoglycemia. 	<ul style="list-style-type: none"> Number of diabetes patients screened and interviewed. Number of patients interviewed regarding hypoglycemic episodes. Number of patients educated on medication. 	<ul style="list-style-type: none"> Hospital staff

Chronic Diseases: Heart Disease

Goals: Increase access to heart disease education and resources.

Impact: (1) Increased knowledge of heart disease resources.

Target Population	Strategies	Action Steps	Measure	Partners
General Population	Provide education on site and in the community on the health risks of heart disease.	<ul style="list-style-type: none"> Partner with the community to provide heart disease education classes. Conduct health fairs. 	<ul style="list-style-type: none"> Number of education classes provided. Number of attendees. Number of health fairs. 	<ul style="list-style-type: none"> Health fair participants Community partners





D) Health Equity

Diversity, Equity, & Inclusion (DEI)

In recent years, health systems, public and private agencies, and community-based organizations have increasingly focused on the concept of “health equity.” Health equity is described as “both the absence of systematic obstacles and the creation of opportunities for all to be healthy.” [The American Medical Association \(AMA\) Center for Health Equity](#) imagines health equity as “providing health care that values people equally and treats them equitably and a nation in which all people live in thriving communities where resources work well; systems are equitable and create no harm nor exacerbate existing harms; where everyone has the power, conditions, resources, and opportunities to achieve optimal health.”

Significant effort is required to provide equitable and culturally/linguistically appropriate care to a variety of racial and ethnic communities, each with its own cultural traits, health beliefs, and barriers to health care access. Improving health equity extends well beyond the walls of the hospital, reaches deep into the community sectors, and involves both local and state governments where health policies and protocols are developed.



Health Equity: Diversity, Equity, and Inclusion (DEI)

Goals: To increase health needs/services/resources to minority community members.

Impact: (1) increased access to health care to the minority community.

Target Population	Strategies	Action Steps	Measure	Partners
Local minority community members	In support of the AHN DEI initiative, want to determine the health needs of our local minority community members	<ul style="list-style-type: none"> • Work closely with a local community church to help determine the health needs. • Conduct assessments to identify social determinants of health (SDOH) needs. • Prioritize health needs • Connect with community resources to address needs. 	<ul style="list-style-type: none"> • Number of needs/types of needs identified. • Number of people to connect with resources. • Number of community partners served. • Number of referrals and connections to community agencies and resources. 	<ul style="list-style-type: none"> • Churches • Community centers



E) Conclusion

AHN Canonsburg places a strong emphasis on providing exceptional care, ensuring access to equitable health care services, and programs for its surrounding communities. Its efforts to address challenges and complexities of care in serving vulnerable populations such as the homeless, elderly, unemployed/underemployed, ethnic, low-income and diverse populations are recognized at community, state, and national levels.

AHN Canonsburg aspires to improve health, well-being, and health equity for all and understands that “health is more than the absence of disease.” Health is based not only on geographic factors- where people were born, live, work and play- but also on economic, cultural, educational, and social factors. By addressing barriers and identifying social and economic factors called social determinants of health that hinder access to equitable health care, AHN Canonsburg aims to heighten overall community health status and to improve quality of life for the diverse communities they serve. The health system may provide a plethora of recognized physicians, best practice services, noteworthy programs and services but if residents lack transportation and insurance, access to care can be difficult. There is a direct correlation between the ease of accessing health care and the overall health of a community.

AHN Canonsburg has addressed many obstacles and accomplished a measurable impact on the community, however, there are still many community health issues that need to be addressed to achieve health equity and anticipated health outcomes. With a focus on the top priorities mentioned above, major and meaningful health concerns for the AHN Canonsburg communities will be addressed.



AHN Canonsburg Hospital

100 Medical Boulevard
Canonsburg, PA 15317

