



BUTLER HEALTH SYSTEM

2019

**COMMUNITY HEALTH
NEEDS ASSESSMENT**

Executive Summary;

The 2019 edition of Butler Memorial Hospital's community health needs assessment sought input from multiple engaged community organizations and their membership. We would like to express our deep appreciation for their support in this effort. Although multiple areas of opportunity were identified to improve the health and well-being of our community, there were three areas of particular concern and added importance for the involved community members.

First, mental health and access to resources to improve mental and behavioral health. Though Butler Memorial Hospital commits significant resources to this need, areas of opportunity for improvement exist. Community members had significant concern relative to mood disorders and their treatment, rather than primary psychiatric conditions. Mood disorders include the general categories of anxiety and depression. Access to affordable medications, medical and psychiatric care, counseling services and opportunities for support of families dealing with such conditions were a concern. The data around behavioral health in our schools, and awareness of the growing need to support our children, adolescents and younger adults is particularly striking. The fact that 25% of tenth graders surveyed in the Butler Area School District responded positively to contemplation of suicide within the past year, demonstrates the significant need of support in this arena.

Next, the issue of substance abuse was uncoupled from the above as an area that Butler Memorial Hospital should add additional focus. The opioid epidemic and associated overdoses would appear to have peaked, but will remain a significant problem. Continued efforts at controlling prescription narcotic access are ongoing. Experts within this arena are particularly concerned with their observed surge in those using cocaine within the community. Noting efforts at controlling prescription narcotic medication access are being limited by the flood of cheaper illicit drugs within the community. It was noted that as individuals attempt to escape their suffering, by the use of illicit drugs, there would be a continued stress on the hospital's resources in dealing with complications.

Finally, a knowledge deficit to understanding, implementing, and leading a healthy lifestyle is quite prevalent in our local community. As a result, a rise in chronic diseases like diabetes, obesity, and hypertension are straining the healthcare resources available within our community. The lack of timely access to primary care physicians and their support teams, demonstrates another growing need within our community. Access to healthy, nutrient dense food is an additional growing concern. Throughout the hospital's service area, multiple food deserts exist. Access to healthy food coupled with lack of activity and areas for exercise, contribute to the growing demand on health care resources provided through Butler Memorial Hospital. Addressing these areas within the community will go a long way to reducing demand for acute care services and complications from these and other conditions associated with lifestyle.

Butler Health System (BHS), the parent of Butler Memorial Hospital (BMH), has been committed to the community it serves for over 120 years. Butler Memorial Hospital is a 294 bed acute care facility. The hospital provides services that include those associated with most general community hospitals, as well as many associated with more advanced specialty care. Advanced procedures include those within structural heart disease, advanced treatment for coronary artery disease, robotic surgical approaches, radiology, obstetrics and gynecology, critical care, and orthopedics.

A clear emphasis exists, on the part of Butler Memorial Hospital, to provide support of behavioral and mental health needs, evidenced by devoted hospital units for: adult psychiatry, geriatric psychiatry, and substance use disorder.

While BMH has always considered the needs of the region it serves, it has formally been conducting Community Health Needs Assessments for nearly 30 years. These assessments have allowed the organization to appropriately allocate resources, and develop services that best suit the needs of Butler County and the surrounding regions. Some of the past major initiatives that have resulted from these assessments include:

Past Major Initiatives	Year Started
Maternal Services Program	1990
Family First (Support)	1992
Mammography Outreach	1996
Women’s Imaging Center	1999
Cardiovascular Surgery	1999
Best Practices Stroke Care	2005
Community Hospital Comprehensive Cancer Program	2006
Tumor Registry	2006
Community Health Clinic (Support)	2008
Pediatric Hospitalist Program	2012
Lung Cancer Screening	2014
Maternal Fetal Health Disparity Investigation	2016

Table 1: Previous Initiatives Developed from Community Assessments

2016 Community Health Needs Assessment Follow up

The previous assessment, completed in 2016, identified multiple areas of health concern in Butler County. Butler Memorial Hospital used this information to develop plans to help meet those needs. Topics identified in the 2016 assessment included:

- Asthma in Children
- Maternal Fetal Health
- High Rates of Osteoporosis Fractures
- Low Rates of Early Childhood Immunization
- Opioid Overdose

The following outlines efforts towards those needs.

A) Asthma in Children

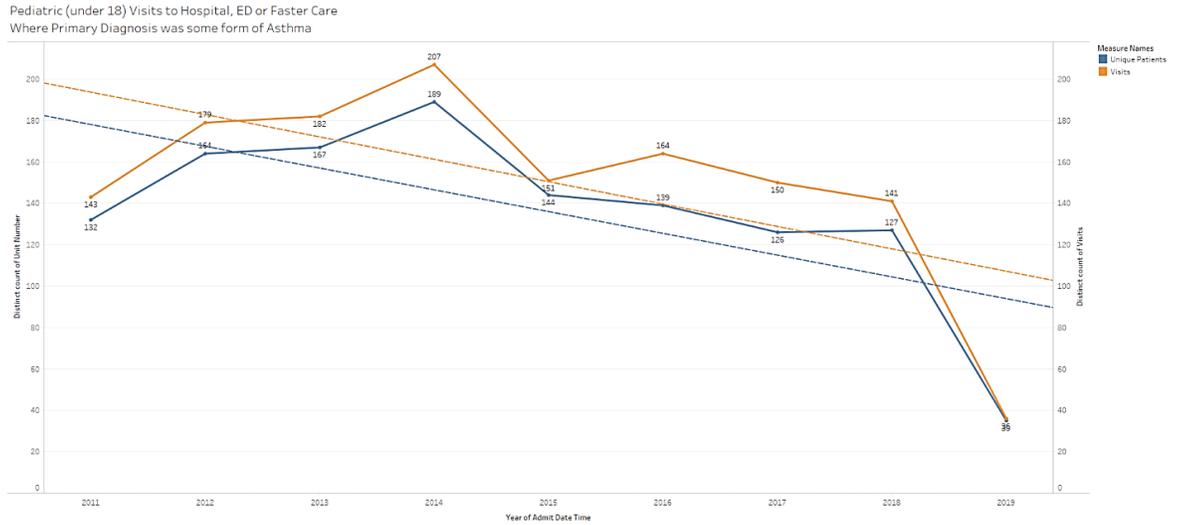
- Standardized assessment and educational material were provided to area school nurses, emphasizing a more standardized, team-based approach to asthma.
- A focus on maintenance therapy utilization by patients.
- The Family Educational Rights and Privacy Act (FERPA) as well as The Health Insurance Portability and Accountability Act of 1996 (HIPAA) created some limitations for additional, more individualized improvement plans. Due to privacy concerns, schools were limited in their ability to share individualized health information with the hospital.
- In the 2016-2017 school year, 2,247 students in Butler County had a medical diagnosis of asthma. These students accounted for 8.55% of the school’s population. School nurses administered 2,900 doses of asthmatic medications according to the PA Department of Health. The following table (#2) shows how these statistics have changed over the years leading up to the 2016 assessment. Overall, there has been a slight decrease in the number of students diagnosed with asthma.

School year	Students with Asthma	Percent	Doses Administered
2013-2014	2,446	9.17%	3,025
2014-2015	2,376	8.81%	3,097
2015-2016	2,381	8.98%	3,281
2016-2017	2,247	8.55%	2,900

Table 2: Butler County School Children with Asthma
[\(<https://www.health.pa.gov/topics/school/Pages/Statistics.aspx>\)](https://www.health.pa.gov/topics/school/Pages/Statistics.aspx)

- Additionally, we looked at the number of visits, and unique patients with a visit for asthma within BMH and its urgent care locations. There has been a continued decline since the last assessment in 2016. (2019 is data January- May of 2019)
- An emphasis on the appropriate use of inhaled medication for maintenance therapy of asthma has occurred within the medical community. We have seen a corresponding decrease in visits to our emergency department and urgent cares for those under 18 because of appropriate use of asthma maintenance therapies.

(Figure 1)



B) Maternal Fetal Health

- Of the 22 Healthy People 2020 indicators, Butler County has not met six of the goals. Listed below. (Table 3)

Healthy People 2020 Maternal, Infant and Child Health Indicators	2020 Goal	2012-2016 Butler County
Fetal mortality rate per 1,000 live births and non-induced fetal deaths of 20+	5.6 (less than)	5.8
Percent of live births to mothers who did not smoke during pregnancy	98.6 (greater than)	85.8
Percent of live births to mothers who breastfed their babies	81.9 (greater than)	78
Young adult death rate per 100,000 age 20 to 24	88.3 (less than)	122.5
Percent of low-risk first-time mothers giving birth by cesarean	23.9 (less than)	28.1
Percent of low-risk women giving birth by cesarean with a prior cesarean birth	81.7 (less than)	82.2

Table 3: Healthy People 2020 MICH unmet goals- Butler County

(<https://www.health.pa.gov/topics/HealthStatistics/HealthyPeople/Documents/current/country/maternal-infant-and-child-health.aspx>)

- Understanding that there exists significant disparity of health within our community, Butler Memorial Hospital engaged an epidemiology doctoral student studying at The University of Pittsburgh Graduate School of Public Health to investigate areas within the county where differences in maternal and child health exist. She found statistically significant variation across the county, at a census tract sublevel between geographic location and Healthy People 2020 Maternal,

Infant and Child health indicators. This suggests that similar outcomes cluster by neighborhoods.

- For Healthy People 2020 goals, a significant association between goal metric attainment and neighborhoods included; live infants with 1st trimester prenatal care, infants born to adolescents 15-17, live infants to non-smokers, and infants who breastfed. Suggesting a geographic focus of support to direct towards these issues.
- Dr. Minion’s research on behalf of the 2016 community health needs assessment, confirmed the mothers of the census block group of infants, who had prenatal care, tended to have higher rates of marriage and a college education. These block groups also had lower rates of Medicaid.
- There is also geographic variability when it comes to the percent of infants who were born to a mother that smoked during pregnancy. Shown graphically below.

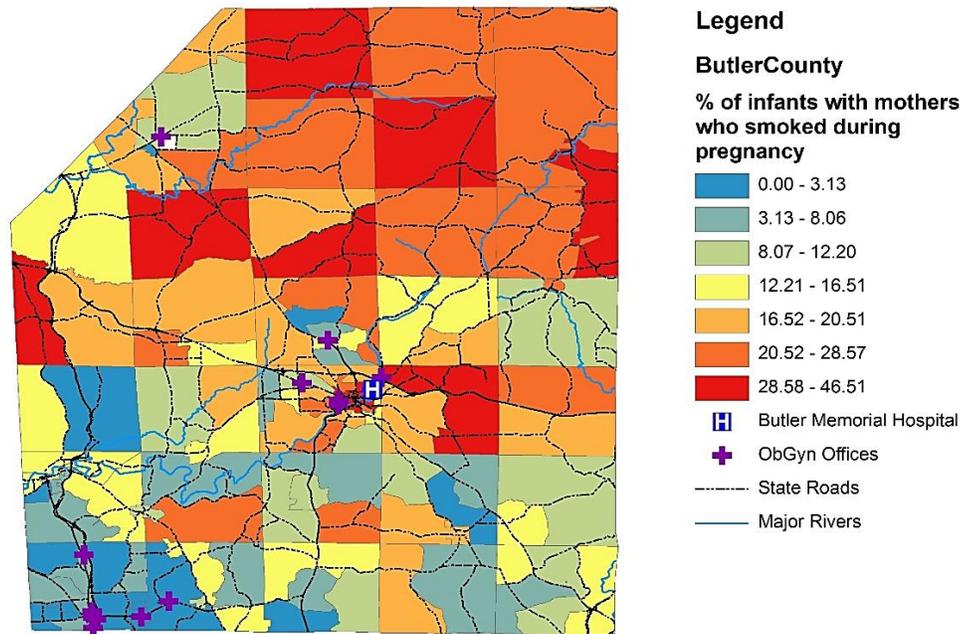


Figure 2: Percent of infants with mothers who smoked during pregnancy by census block group

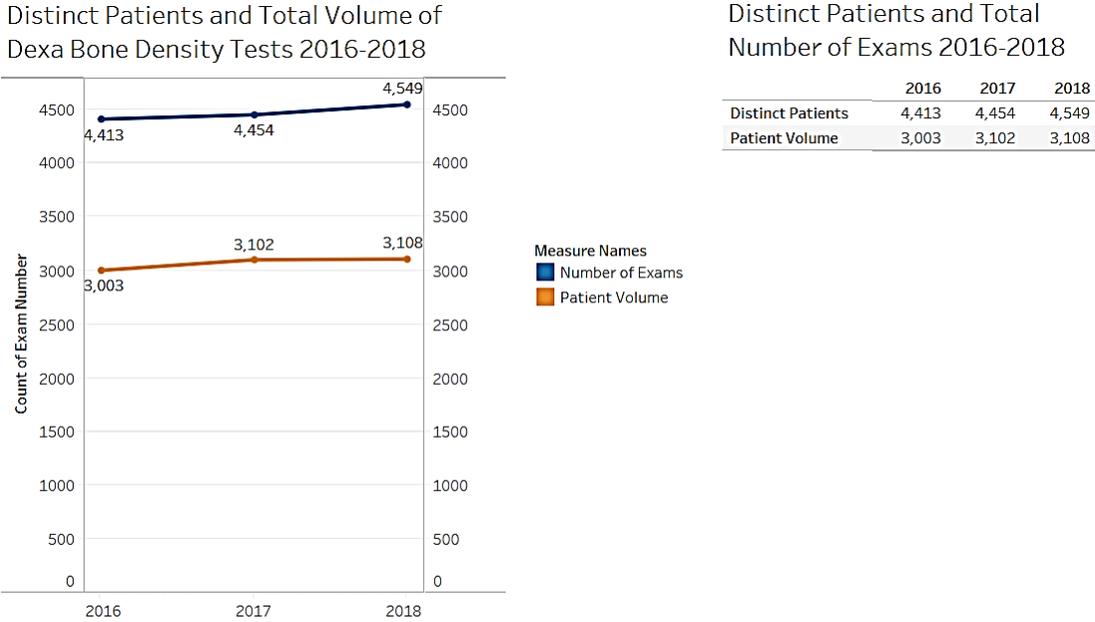
C) High Rates of Osteoporosis Fractures

- a. Bone fractures contribute significant morbidity and cost to our community. Both in terms of medical dollars spent and lost wages.
- BHS increased the number of annual wellness visits, where the fall risk was able to be assessed. This information is important for individuals to address with a

physician, because a simple fall for those with advancing age, or osteoporosis is more likely to result in a fracture. When patients and physicians understand the patients’ fall risk, they can create a care plan that includes therapies that will reduce their risk of falling and sustaining a fracture. Improvement in home safety is an additional benefit.

- BMH increased annual DEXA scans 166.67% because of the 2016 community health assessment and interventions taken. A DEXA scan is a type of x-ray that shows bone loss and is used to diagnose osteoporosis. Providing those with the highest risk of fracture with additional knowledge that can be leveraged towards reducing fractures.
- Physical Therapy Department within BMH continues to supplement the Area Agency on Aging programs to lower fall risk for those most in need.

Figure 3: Number of distinct patients and number of DEXA bone scans



Despite these screening efforts and therapy interventions, there has been an overall increase in the absolute number of hip fracture admissions to Butler Memorial Hospital over the past 3 years (Figure 4). This is a direct result of the aging demographics within the community served by the hospital. This aging demographic underscores the need to continue to screen for fall risk and provide areas of opportunity for those most at risk. Figure 5 demonstrates, among those presenting to BMH with a hip fracture, there exists a sharp increase in the population greater

than 65 years of age within our community. This information provides a defined subpopulation for BMH to focus annual wellness visits and fall risk assessments.

Figure 4: Hip Fracture admissions by year

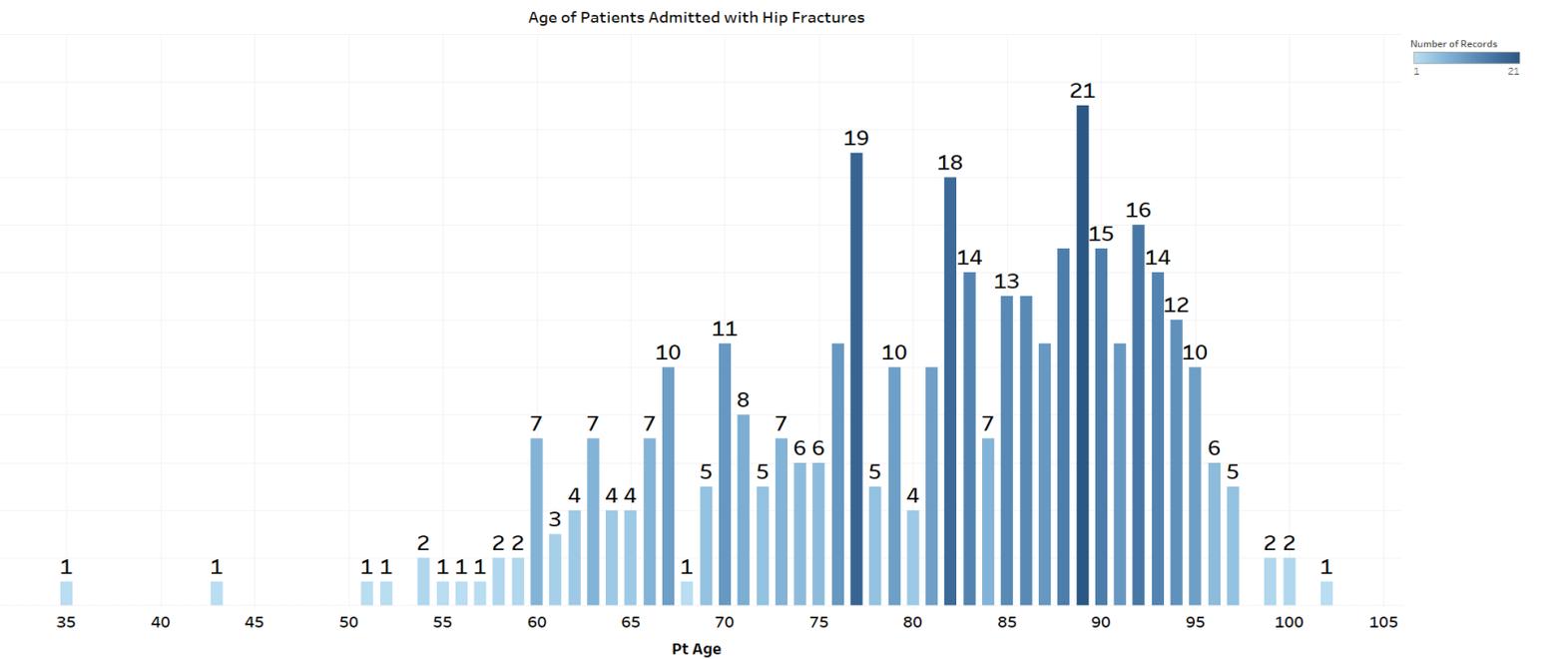
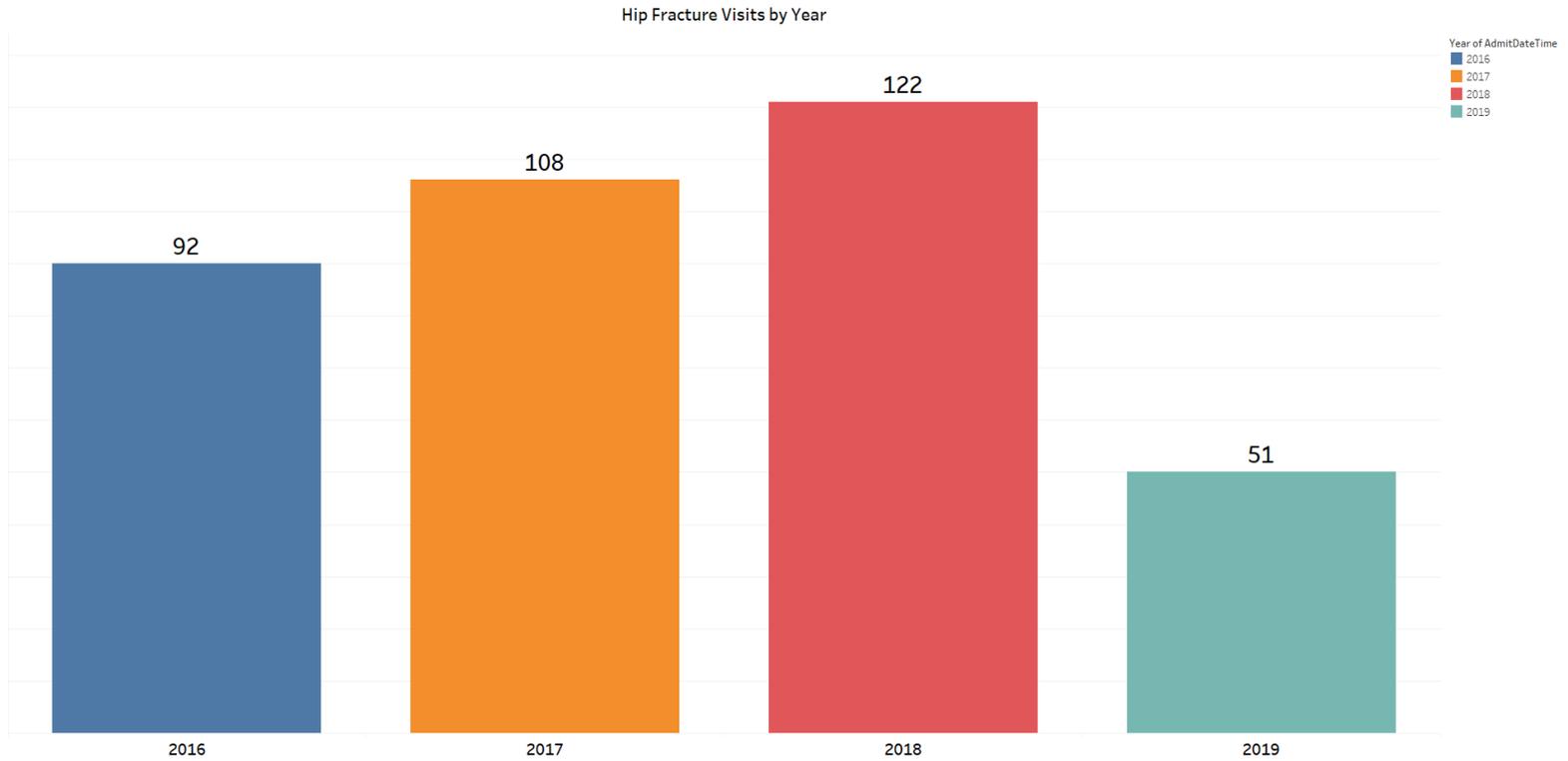


Figure 5: Age of patients admitted with hip fractures

D) Low Rates of Early Childhood Immunization

- Vaccination rates for the state and county are available in the Pennsylvania School Immunization Law Report through the Pennsylvania Department of Health. Improving these rates has been a focus of the medical staff of BMH.
- The rates of immunization in Butler County have increased since the previous assessment in 2016, particularly among Butler County Kindergartners.
- One data point for BMH to continue to monitor, given Pennsylvania vaccination law continues to allow for religious and philosophical exemptions, is the number of students receiving non-medical exemptions.
 - As of the 2017-2018 school year, 0.7% of kindergarten and 7th grade students received medical exemptions, 1.4% received religious exemptions and 3.0% received philosophical exemptions in Butler County. This is more than Pennsylvania averages, which are 0.5%, 1.3% and 1.7% respectively.
 - This is also an increase from the previous school year in Butler County where 0.5% of kindergarten and 7th grade students received medical exemptions, 1.6% received religious exemptions and 2.0% received philosophical exemptions.

2017-2018 School year	DT 4 doses	Polio 4 doses	MMR 2 doses	Hepatitis B 3 doses	Varicella 2 doses
PA Kindergarten	97.0%	96.6%	96.8%	97.5%	96.4%
Butler Kindergarten	95.8%	95.2%	95.1%	95.3%	94.6%
PA 7th Grade	97.1%	96.6%	97.0%	97.1%	95.9%
Butler 7 th grade	98.6%	97.6%	98.2%	98.4%	97.2%

Table 4: 2017-2018 School Year Butler County vaccination rate
<https://www.health.pa.gov/topics/programs/immunizations/Pages/Rates.aspx>

E) Opioid Overdose

- Conducted medical staff training and education on opioid prescribing
- Mandatory use of Prescription Drug Monitoring Program by BMH physicians
- Established a Pennsylvania Center of Excellence in opioid addiction treatment
- BMH implemented several tracking tools, aimed at appropriate utilization of narcotic medications inside of BMH. Monitoring “average morphine equivalent dosing” ordered by members of the hospital’s medical staff, and need for the reversal agent, Narcan.

- There has been an overall reduction in emergency department admissions with overdose diagnoses month- by-month year over year from 2016 (Table 5, Figure 6).

	Annual Total	Total through June
2016	328	130
2017	321	187
2018	204	107
2019	TBD	88

Table 5: Number of admissions to the emergency department with a diagnosis of overdose. Includes accidental

Admission to ED with "Overdose" Diagnosis, Month by Month, Year Over Year for Butler Community

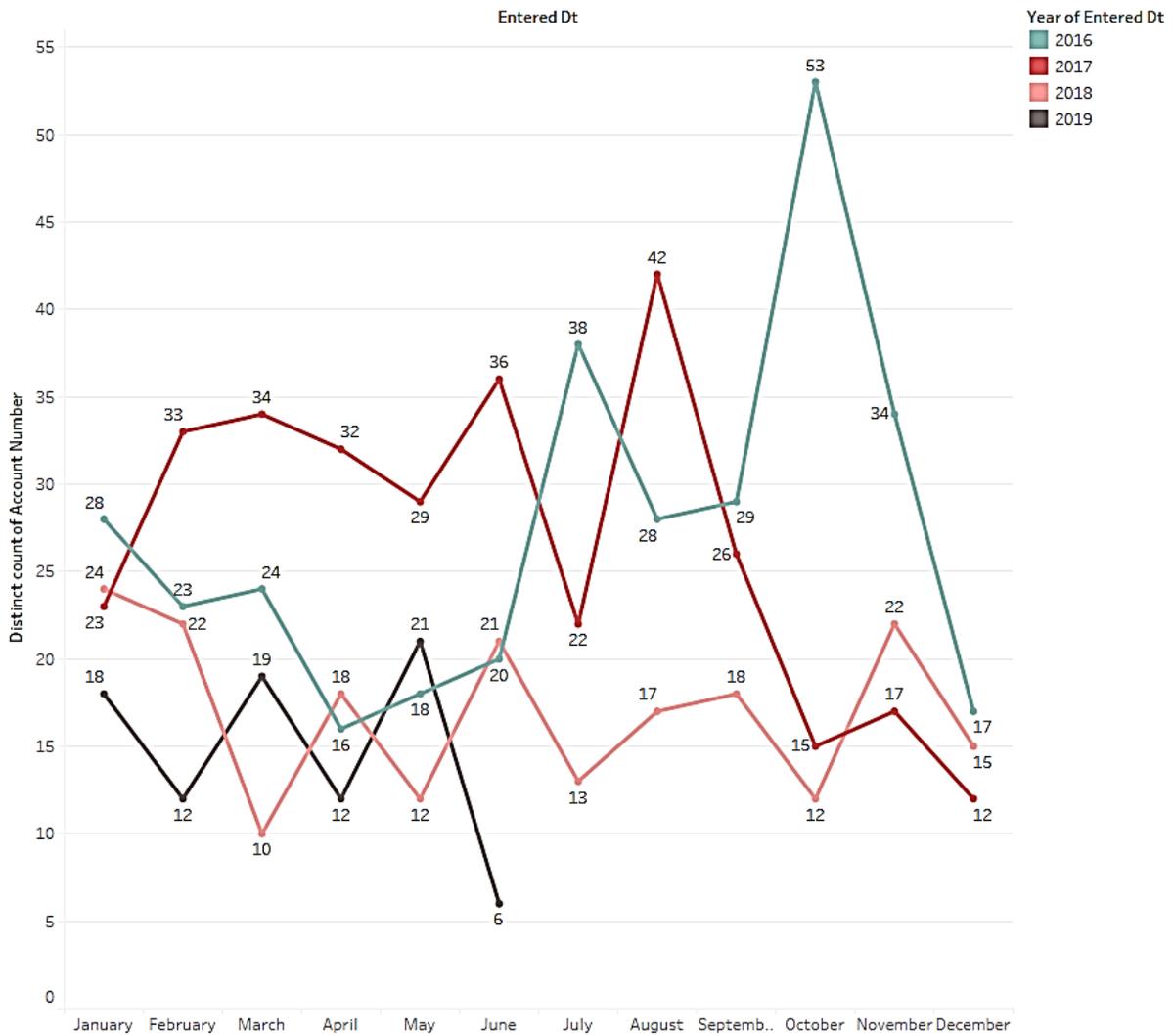


Figure 6: Overdose ED Admissions 2016-2019

2019 Community Health Needs Assessment

This community health assessment was conducted throughout the spring and summer of 2019. Qualitative and quantitative data was gathered from general community members, stakeholder organizations in the Butler County region, employees and providers of Butler Memorial Hospital and Butler Health System, and multiple secondary data sources.

Assessment Committee Membership

Elliot L. Smith, MD; Erin Stewart, RN; Sydney Lukus, JD, MPH candidate; Sydney Pack, MHA candidate; Stephanie Smith, Courtney McQuaide, Michael Keyes, MBA; Sarah Minion, PhD candidate; Amy Hortert, RN

Methods

The assessment committee gathered input from individuals and organizations that represent the broad interests of the region; this was completed through a variety of methods.

- A “kick-off meeting” with representatives from thirteen community-focused organizations was held. This identified top health priorities within the primary service area. Seven additional meetings with representatives from organizations that were unable to attend the kickoff meeting were held individually with BMH which allowed maximum opportunity for input.
- BMH collected health data from the Pennsylvania Department of Health, the US Census Bureau, the Pennsylvania Commission on Crime and Delinquency and the Robert Wood Johnson Foundation’s County Health Rankings. This information was used to refine the opportunities as identified by the community meetings.
- 104 employees and 651 community members completed electronic and paper surveys to provide an additional data source of information.
- Focus groups met and discussed the data collected from all the above sources. The main themes that arose out of the focus groups were mental/behavioral health, access to care, substance use disorder, obesity and health education.

Input of Public Health Officials

There is no county health department operating within Butler County or the hospital’s primary service area. Currently, Pennsylvania has six county health departments (Allegheny, Bucks, Chester, Erie, Montgomery, and Philadelphia) and four municipal health departments (Allentown, Bethlehem, Wilkes-Barre, and York). We sought direct input from experts in public health during the assessment. Because of those efforts, several public health professionals were able to provide their direct input during the process of this assessment. Sarah Minion, an epidemiology Ph.D. candidate from The University of Pittsburgh Graduate School of Public Health was consulted for her research on maternal and fetal health. At the stakeholder meeting, a representative from the Lions Club of Butler County with a Doctorate of Public Health provided input. Lastly, one of the leads on the project is a master of public health and juris doctor

candidate at The University of Pittsburgh. Multiple medical experts on staff at the hospital provided direct input.

Population served

The primary service area for Butler Memorial Hospital (BMH) was identified as Butler County, Pennsylvania. A majority of patients and visits originate from the city of Butler and the surrounding zip codes. In addition, many patients come from the areas surrounding Butler County for our more advanced services. This includes individuals from Armstrong, Westmoreland, Clarion, Beaver, Lawrence, Mercer, Venango and Allegheny. For the purpose of secondary data collection, Butler County was determined to be the community served. Approximately 80 % of the hospital’s patients reside within the county.

2018 Butler & Cranberry BMH Visits

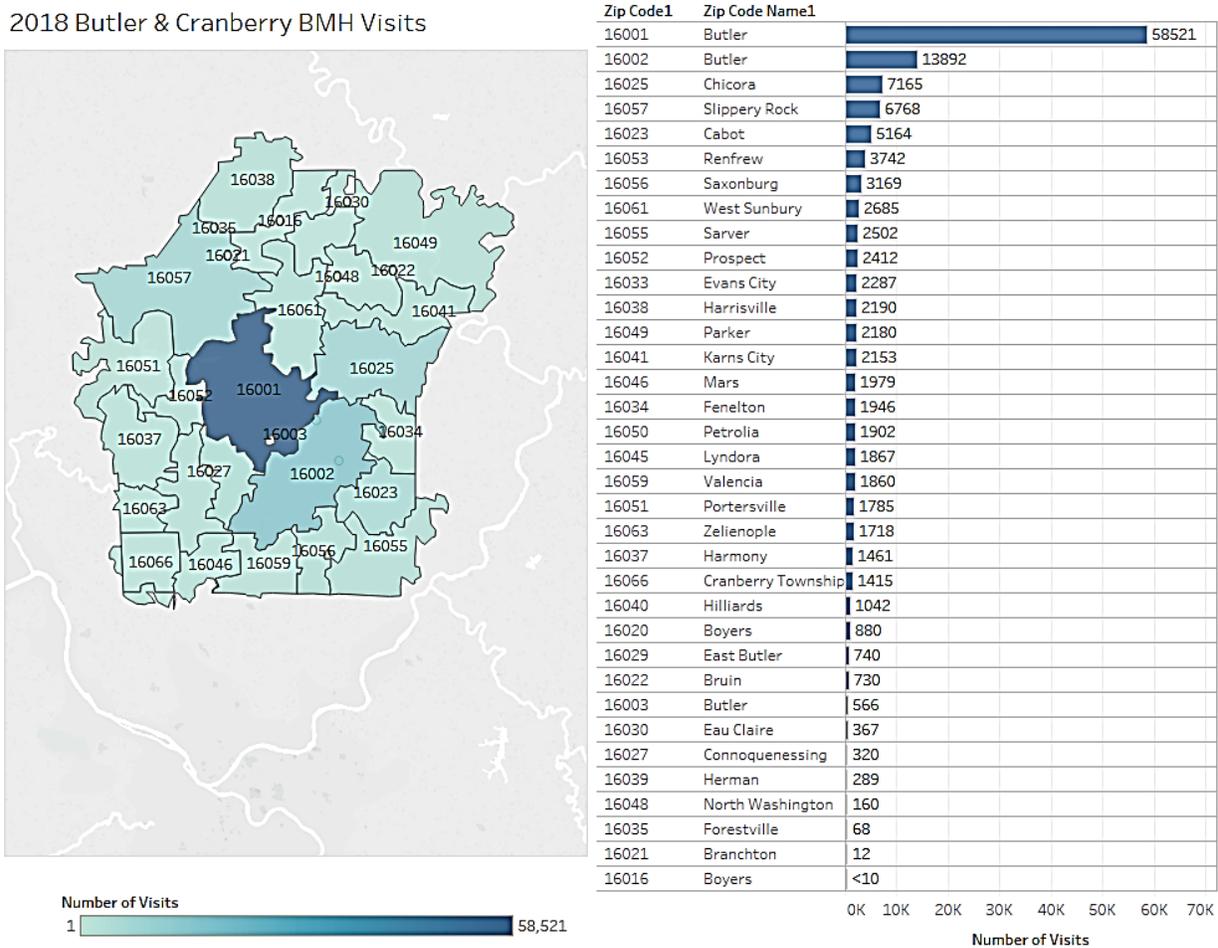
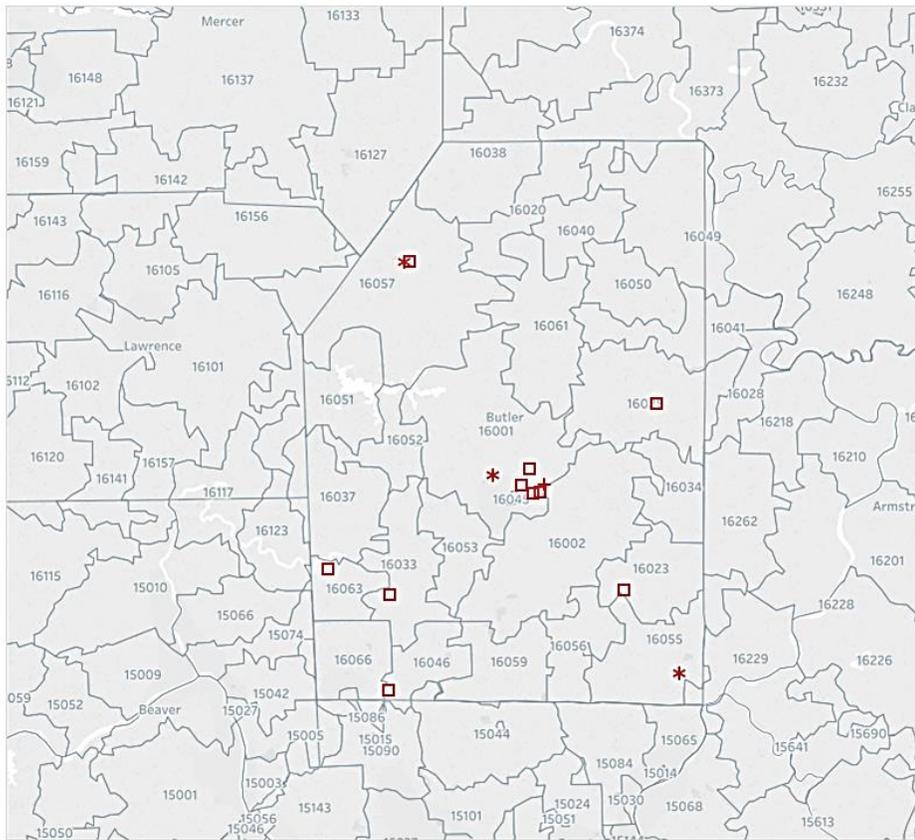


Figure 7: Heat Map indicating the number of visits from each zip code in Butler County

- A large proportion of BMH patients originate from the 16001 zip code (Figure 7). As such, Butler Health System has placed several service locations within this area to meet the demand of its primary population. In addition to the hospital, Butler City and its associated zip code, 16001, houses a hospital supported urgent care facility, several primary care clinics and outpatient specialty offices (Figure 8).

BHS Locations in the Butler Community

Location Type
 * Faster Care
 + Hospital
 □ Primary Care

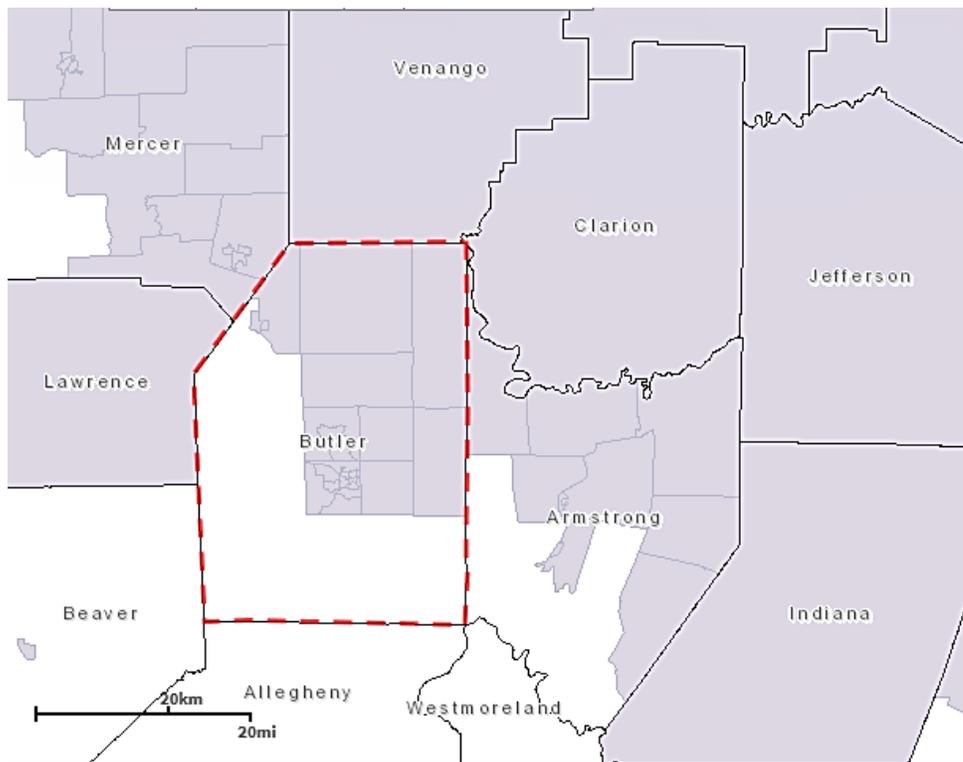


BHS Butler Community Locations

Location Name (group)	Street Address	Zip Code
BHS Faster Care PLLC	100 INNOVATION DR	16057
	147 MULONE DR	16055
	250B BUTLER COMMONS	16001
BHS Nallathambi Medical Associates	131 E CUNNINGHAM ST	16001
BHS Seven Fields	300 NORTHPOINTE CIRCLE	16046
BHS Slippery Rock Family Medicine	100 INNOVATION DR	16057
BHS Zelenople	322 SOUTH MAIN ST	16063
Butler Family Practice	116 WOODY DRIVE	16001
Butler Medical Providers	1022 NORTH MAIN ST	16001
Butler Memorial Hospital	ONE HOSPITAL WAY	16001
Chicora Medical Center	160 MEDICAL CENTER ROAD	16025
Concordia Luthern Home	134 MARWOOD RD	16023
East Jefferson Street	480 E JEFFERSON ST	16001
Elliot Smith, MD & Associates	217 EAST MAIN STREET	16033

Figure 8: Butler Health System Locations within Butler County

- The Health Resource & Service Administration (HRSA) is an agency within the U.S. Department of Health and Human Services. HRSA provides programs and grants to help to improve health care to geographically isolated, and medically or economically underserved individuals. Rural healthcare is a focus of HRSA. The Federal Office of Rural Health Policy identifies a little less than half of Butler County as a Rural Health Area. (Figure 8)
- BMH is a current awardee of a HRSA grant focused on chronic care management in our communities.
- Butler County has a land area of 788.6 square miles and is located about 25 miles north of Pittsburgh. Twenty-two census tracts are considered rural within Butler County. The location of Butler Memorial Hospital is within one of the many rural census tracts within the county. (Figure 9)



*Shaded represents HRSA rural areas

Figure 9: HRSA Rural Health Areas (<https://data.hrsa.gov/hdw/tools/MapTool.aspx>)

The following demographic data was compiled from the US Census Bureau American Fact Finder and Quick Facts, and the Robert Wood Johnson Foundation’s County Health Rankings. Below is a table (#6) summarizing the county population data compared to data specific to the State of Pennsylvania as a whole.

	Butler County	Pennsylvania
2018 Population Estimate	187,888	12,807,060
Population Percent Change April 2010-July 2018	2.2%	0.8%
Median Age	43.1	40.7
Percent under 18	20.3%	20.8%
Percent 65 years and older	18.2%	17.8%
Race & Origin		
White alone, not Hispanic or Latino, Percent	94.8%	76.5%
Black or African American alone, Percent	1.3%	11.9%
American Indian & Alaska Native alone, Percent	0.1%	0.4%
Asian Alone, Percent	1.4%	3.6%
Hispanic or Latino, Percent	1.5%	7.3%
Two or More Races, Percent	1.1%	2.0%
Veterans (2013-2017)	14,034	803,420
Education		
High School Graduate or Higher	94.1%	89.9%
Bachelor's Degree or Higher	34.6%	30.1%
Median Household Income	\$66,037	\$56,951
Per Capita Income in Past 12 Months	\$35,101	\$31,476
Persons in Poverty, percent	8.4%	12.5%
Percent with a Disability, under age 65, 2013-2017	7.8%	9.6%
Persons without Health Insurance under age 65, Percent	4.6%	6.6%
Percent Rural	42%	21.3%

Table 6: Butler County Demographics

(<https://www.census.gov/quickfacts/fact/table/butlercountypennsylvania,PA/PST045218>)

(<https://www.countyhealthrankings.org/app/pennsylvania/2019/rankings/butler/county/outcomes/overall/snapshot>)

- IRS tax returns for Butler County in tax year 2016 indicate the household income distribution was 33.5% lower income households (under \$24,999), 44.9% middle-income households (between \$25,000 and \$99,999) and 21. 6% higher income households (over \$100,000).
- Within the county, there is significant variability amongst many of the social and economic determinants of health depending on the location within the county because of the large geographic area that Butler County encompasses.
 - A recurring theme among community stakeholders was the access and resources in the southern area of the county differ remarkably from the central and northern areas within the county. Because of these stark differences, it should be remembered that county level data on health related issues, might be tilted towards the affluence in the south.
- The table below shows just some of the disparity that exists within the primary service area of BMH. The four areas compared below include, Adams Township, Cranberry Township, Butler City and Center Township. (Table 7). Adams Township/Mars and Cranberry are in southern Butler County. Butler City is the immediate area surrounding Butler Memorial Hospital, located in central Butler County, and Center Township is in northern Butler County.

	Adams Township (16046)	Cranberry Township (16066)	Butler City (16001)	Center Township (16061)
High School Graduate or higher, percent	98.6%	96.7%	89.4%	95.2%
Bachelor’s Degree or higher	61.7%	57.9%	18.0%	29.6%
Median Household Income, 2013-2017	\$117,790	\$101,342	\$30,266	\$65,670
Per Capita Income Past 12 months, 2013-2017	\$55,385	\$47,869	\$20,206	\$34,279
Persons in Poverty, Percent	1.4%	3.4%	29.6%	7.7%
Percent with a Disability, Under age 65, 2013-2017	3.8%	4.6%	15.6%	12.7%
Persons without health insurance	1.6%	3.3%	7.6%	1.9%
Households with broadband internet subscription 2013-2017	91.1%	92.8%	66.2%	79.1%

Table 7: Demographic Disparity in Butler County
 (<https://www.census.gov/quickfacts/fact/table/butlercountypennsylvania,PA/PST045218>)

- By looking at data only at the county level, a significant portion of our service population goes under-represented. The rather dramatic differences in factors like income, education and disability across the county, create a different picture of health and the health needs of defined subpopulations within the county.

Healthcare Facilities in Butler County

Hospitals

- Butler Memorial Hospital
- UPMC Passavant- Cranberry

Urgent Cares

- BHS FasterCare (Butler, Slippery Rock, and Sarver)
- MedExpress (Butler, Mars)

Skilled Nursing Facilities and other services (Listed in Appendix)

Health Factors and Outcomes

Data surrounding health factors and outcomes was evaluated using the Robert Wood Johnson Foundation's County Health Rankings and the Pennsylvania Department of Health's Vital Statistics. The leading cause of death in Butler County is heart disease. Cancer is the second leading cause of death, with accidents being the third leading cause.

The cancer mortality rate is 156.9 per 100,000 people. This is slightly lower than the State of Pennsylvania overall, which has a mortality rate of 168.5 per 100,000. The age-adjusted rates in Butler County for many cancers are similar to the rates of cancer incidence in the State of Pennsylvania. This includes the incidence of common cancers like breast, colon, uterine, lung, Non-Hodgkin lymphoma and urinary specific cancers. Butler County's rate of melanoma of the skin is slightly higher than the state in both men and women. The melanoma rate for men is 36.4 per 100,000 and the rate for women is 31.1 per 100,000. The rate of melanoma amongst men in Pennsylvania is 30.0 per 100,000; for women the rate is 19.9 per 100,000.

The fourth leading cause of death in Butler County is chronic lower respiratory disease, primarily Chronic Obstructive Pulmonary Disease or Emphysema; this rate of 43.8 per 100,000 is greater than the State of Pennsylvania's rate of 37.8 per 100,000. Butler County also has a higher rate of Alzheimer's disease when compared to the state average; 25.2 per 100,000 versus 19.4 per 100,000 respectively.

An area of increasing interest, the incidence of Lyme disease is significantly higher in Butler County than in other parts of Pennsylvania. The rate is 310.5 per 100,000 in Butler County, while the state as a whole has a rate of 85.4 cases per 100,000. The medical issues relative to chronic Lyme related symptoms, and how best to approach them remains controversial in the medical literature.

There are 21.0 hospitalizations per 10,000 in Butler County, while the state has a rate of 17.6 per 10,000. (Table 8)

	Butler County	Pennsylvania	Comparison
Heart Disease Mortality	172.9	176.2	Similar
Cancer Mortality	156.9	168.5	Lower
Melanoma Incidence- Male	36.4	30.0	Higher
Melanoma Incidence-Female	31.1	19.9	Higher
Chronic Lower Respiratory Disease Mortality	43.8	37.8	Higher
Alzheimer’s Disease Mortality	25.2	19.4	Higher
Lyme Disease Incidence	310.5	85.4	Higher
COPD Hospitalizations (Per 10,000)	21.0	17.6	Higher

*Table 8: Disease Specific Mortality and Incidence. All Rates are per 100,000 people unless otherwise noted
(<https://www.health.pa.gov/topics/HealthStatistics/VitalStatistics/CountyHealthProfiles/Documents/current/Butler.aspx>)*

According to the Robert Wood Johnson Foundation County Health Rankings, Butler County is ranked as number 7 out of 67, in both health outcomes and health factors (1 being the healthiest, 67 being unhealthiest). County Health Rankings highlight areas for improvement within our primary service area; for Butler County these areas are-- **adult smoking, adult obesity and excessive drinking**. County Health rankings also identified areas of strength for Butler County; these strengths are primarily linked to social and economic determinants of health. Butler County has high rates in the areas of -- **physical inactivity, teen births, percent uninsured, education (graduating from high school and some college), and percent of children in single parent households**.

Stakeholder Meetings

In June of 2019, representatives from many organizations within Butler County came together to discuss the strengths and needs of the community. Several organizations were unable to attend the initial meeting, so individual meetings were set up to discuss issues that pertain to their respective populations. The following organizations were represented during the assessment; the vulnerable populations served by the respective organizations are identified as well.

- **Alliance for Non-Profit Resources (ANR)-** Food Insecure Individuals
- **ARC of Butler County-** individuals with intellectual and developmental disabilities
- **Butler Area School District**
- **Butler County Children’s Center-** Children and low income families
- **Butler County Community College**
- **Butler County Human Services-** Aging, Drug and Alcohol, Children & Youth, Fair Housing
- **Butler County Parks and Recreation**
- **Butler Memorial Hospital-Care Management**
- **Butler Transportation Authority**
- **Catholic Charities of Butler County-** People living in shelters, homeless or at risk of being homeless. Expectant and new mothers
- **Center For Community Resources (CCR)-** Homeless, children and adults with mental illness (including substance use), intellectual and developmental disabilities, veterans, HIV + individuals
- **Community Care Connections-** infants, children and adults who have developmental delays or disabilities
- **Community Options Inc.-** Individuals with disabilities
- **Grapevine Center-** Individuals with mental illness, co-occurring dependencies, formerly incarcerated, homeless
- **Lions Club of Butler County**
- **Mars Area School District**
- **Meals on Wheels of Butler County-** Homebound individuals
- **Moniteau School District**
- **National Alliance on Mental Illness(NAMI)-** Individuals with severe mental illness and their families
- **Seneca Valley School District**
- **Veterans Services-** Veterans

At these meetings, individuals were asked to describe the overall health of the region. Each organization was also asked to identify the top health priorities for our community. These answers were then compared, analyzed and discussed amongst the groups. Individuals were also asked to indicate any ongoing efforts to address the concerns, and if there were community groups focusing efforts on the issues. The group also discussed barriers that exist, or may arise in trying to implement improvements. In the discussion, obesity and chronic disease were subsequently grouped together, however it is clearly a large enough issue to recognize each, on its own. The top three health issues stakeholders identified were chronic disease (including obesity), mental health and substance abuse. Stakeholders also identified issues grouped under

health education, access, children's health needs, transportation and care transitions across locations of care in the health system.

Topics Identified Under Chronic Disease

- Cancer
- Diabetes and Childhood Diabetes
- Chronic Obstructive Pulmonary Disease and the need for lifestyle prevention and smoking cessation
- Heart Disease
- Heart Failure

Topics Identified Under Obesity

- Obesity related to little activity and sedentary lifestyle
- Obesity related to poverty and food access
- Obesity and the lack of healthy food
- Obesity and its impact on mental health, and mental health's impact on obesity
- Childhood obesity related to little outside play time

Topics Identified Under Mental Health

- Mental health education, acceptance and understanding the resources that are available
- Lack of mental health services
- Mental illness and behavioral disorders
- Emotional stress and behavioral health
- PTSD/Trauma
- Mental health services that accept Medicare
- No dual diagnosis (drug addiction/ mental health)
- Access to a pediatric psychiatrist
- General apathy towards school

Topics Identified Under Substance Use & Abuse

- Opioid use and working to prevent it by developing better coping skills
- General drug use
- Alcohol abuse
- Bed availability and knowledge of how to access treatment
- Overdose and the impact it has on others (users, family, peers)
- External factors that impact sobriety and recovery (Housing, unemployment)
- Vaping amongst teens

Topics Identified Under Health Education

- Stereotyped opinion of people with intellectual disabilities
- Food Allergies
- Insurance education
- Access to education on healthcare
- Nutrition Education
- Education around subsidies (Food stamps are not the entire food budget for the month)

Topics Identified Under Access

- Access to basic healthcare for students
- Access to financially affordable healthcare
- Hunger (access to health and inexpensive foods)
- Affordable and accessible housing that is safe (especially for the older population)
- Free/Affordable access to wellness care (services like gyms require memberships)

Topics Identified Under Children's Health Needs

- Affordable childcare
- Childcare for off-shifts
- Social media and electronic devices and the negative impacts on mental health
- A rise in the need for occupational therapy related to usage of technology

Topics Identified Under Transportation

- Transportation for rural residents for healthcare and food
- Qualifications for some transport services exclude some populations who need the services
- Getting patients to appointments
- Transportation is not always conducive to working hours
- People are only allowed to carry 2 bags of groceries on the buses

PAYS Data analysis

The Commonwealth of Pennsylvania conducts the Pennsylvania Youth Survey, or PAYS, every two years. This surveys students' behavior and knowledge around alcohol, tobacco, drugs and violence. It also captures important mental health data at a district, county, and state level. A number of stakeholders mentioned the importance of the PAYS data and the growing issue of substance abuse and mental illness, particularly among adolescents and young adults in our communities' schools. In addition to the anecdotal statements, PAYS provides more qualitative data supporting these issues. The following graphs compare 2017 PAYS data from Butler Area School District (BASD), Butler County and Pennsylvania (PA). Butler Memorial Hospital focused on Butler Area School District as representative given the geographic relationship to the

hospital. A significant proportion of BMH’s patient population resides within the school district. PAYS graphs are included to demonstrate the significance of the findings.

Percentage of Students Within the Butler Area School District, County and State Who Have Felt Depressed or Sad Most Days in the Past 12 Months

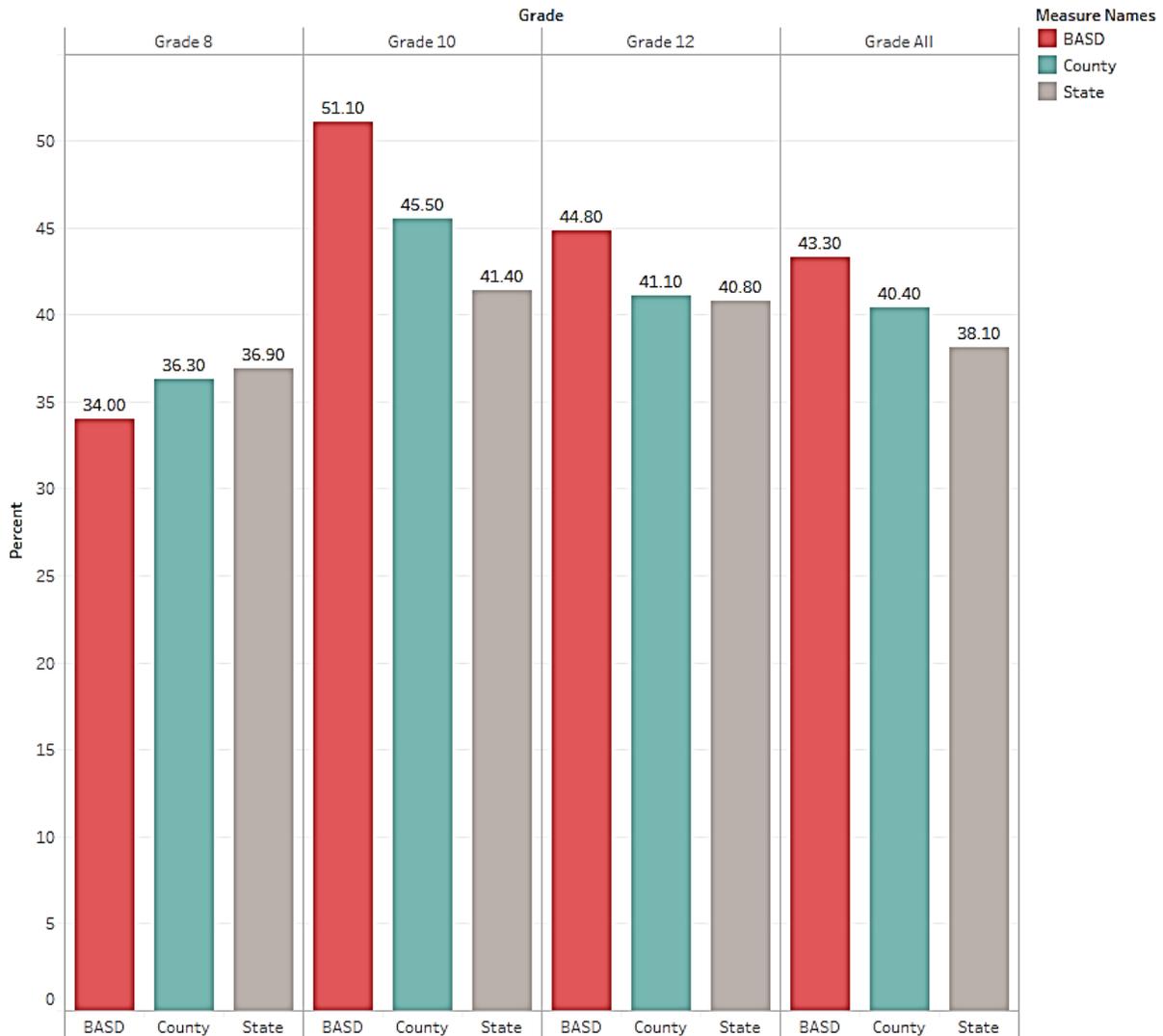


Figure 10: PAYS- Percentage of students who have felt depressed or sad most days in the past 12 months

- The state average among 8th graders who have felt depressed in the past 12 months is higher than that of the county and district for the same age.
- District and County levels of depression become higher than the reported state average, beginning in 10th grade, where there is almost a 10 percent difference between BASD and PA (Figure 10).
- 51% of BASD 10th graders reported that they felt depressed or sad most days.

**Percentage of Students Within the Butler Area School District, County and State
Who Within Their Lifetime Reported Being So Sad, They Lacked Interest in
Performing Their Usual Activities**

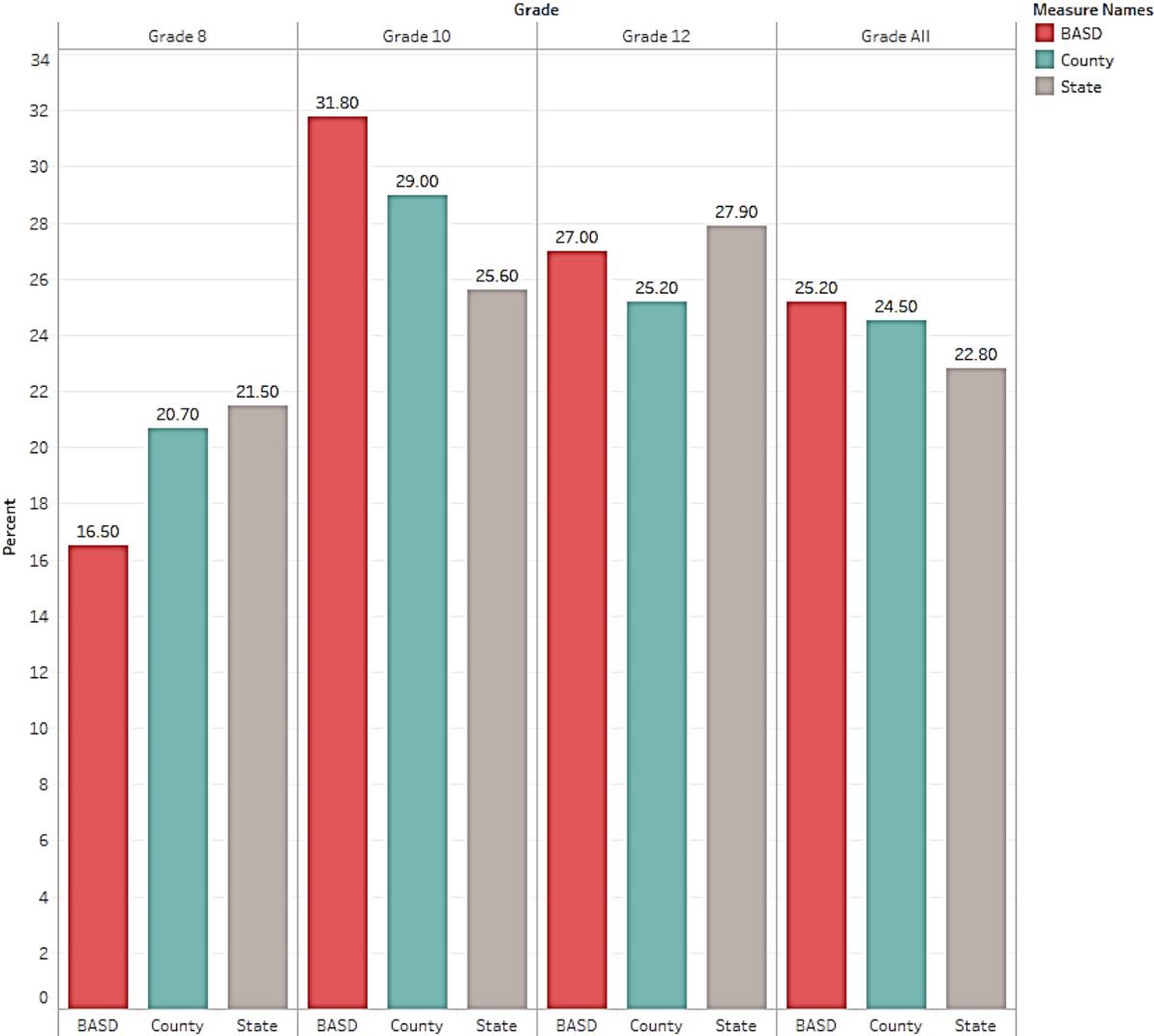


Figure 11: PAYS- Lacked interest in performing usual activities within lifetime

- The percentage of students that stopped participating in usual activities due to lack of interest follows a similar trend to the number of students who have felt depressed (Figure 11)
- The main difference is there were less students overall who stopped participating in usual activities.

Percentage of Students Within the Butler Area School District, County and State Who Have Harmed Themselves Within in the Past 12 Months

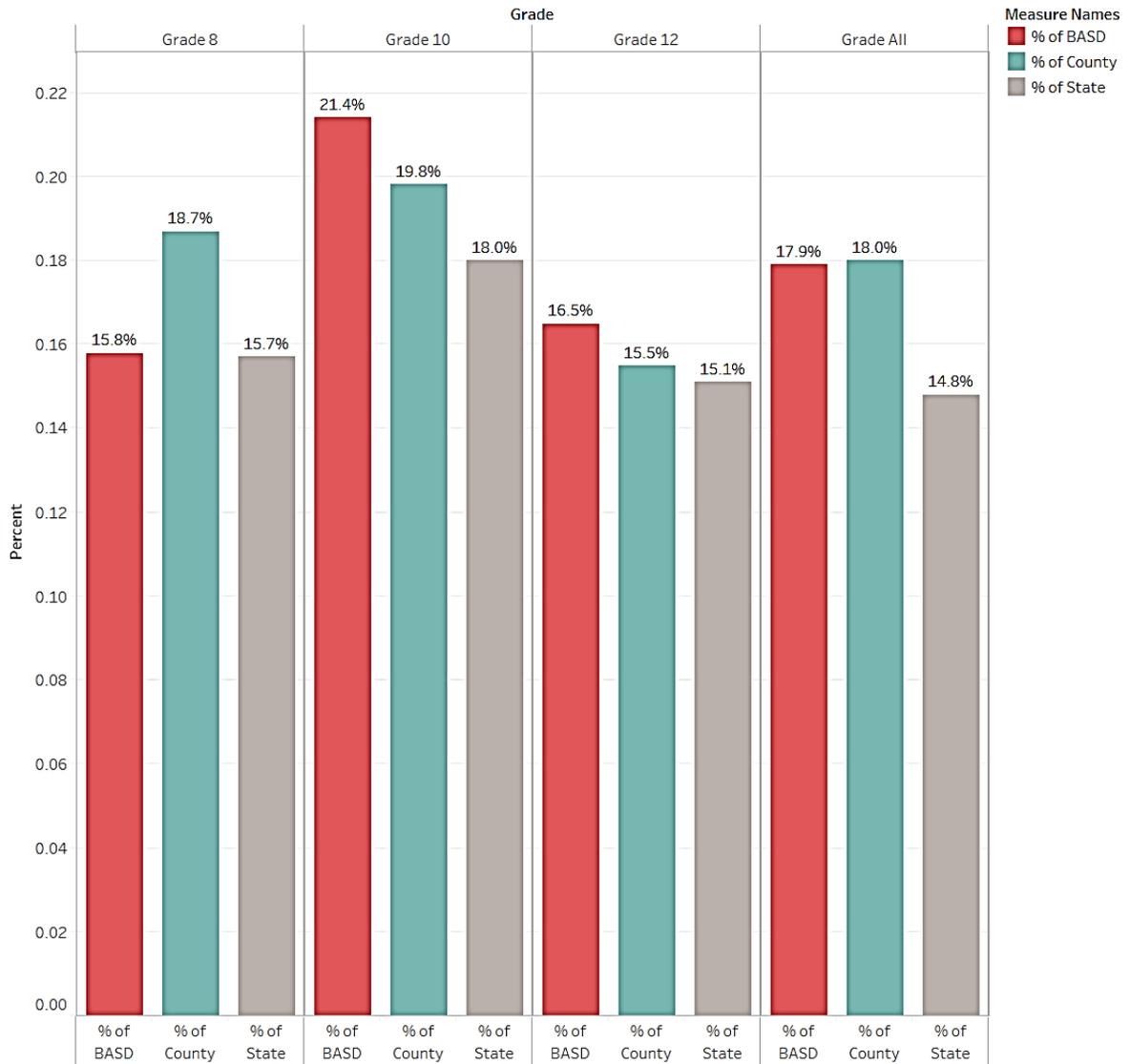


Figure 12: PAYS: Self Harm within past 12 months

- Both BASD and Butler County are higher than state averages across all grade levels.

Percentage of Students Within the Butler Area School District, County and State Who Have Considered Suicide Within Their Lifetime

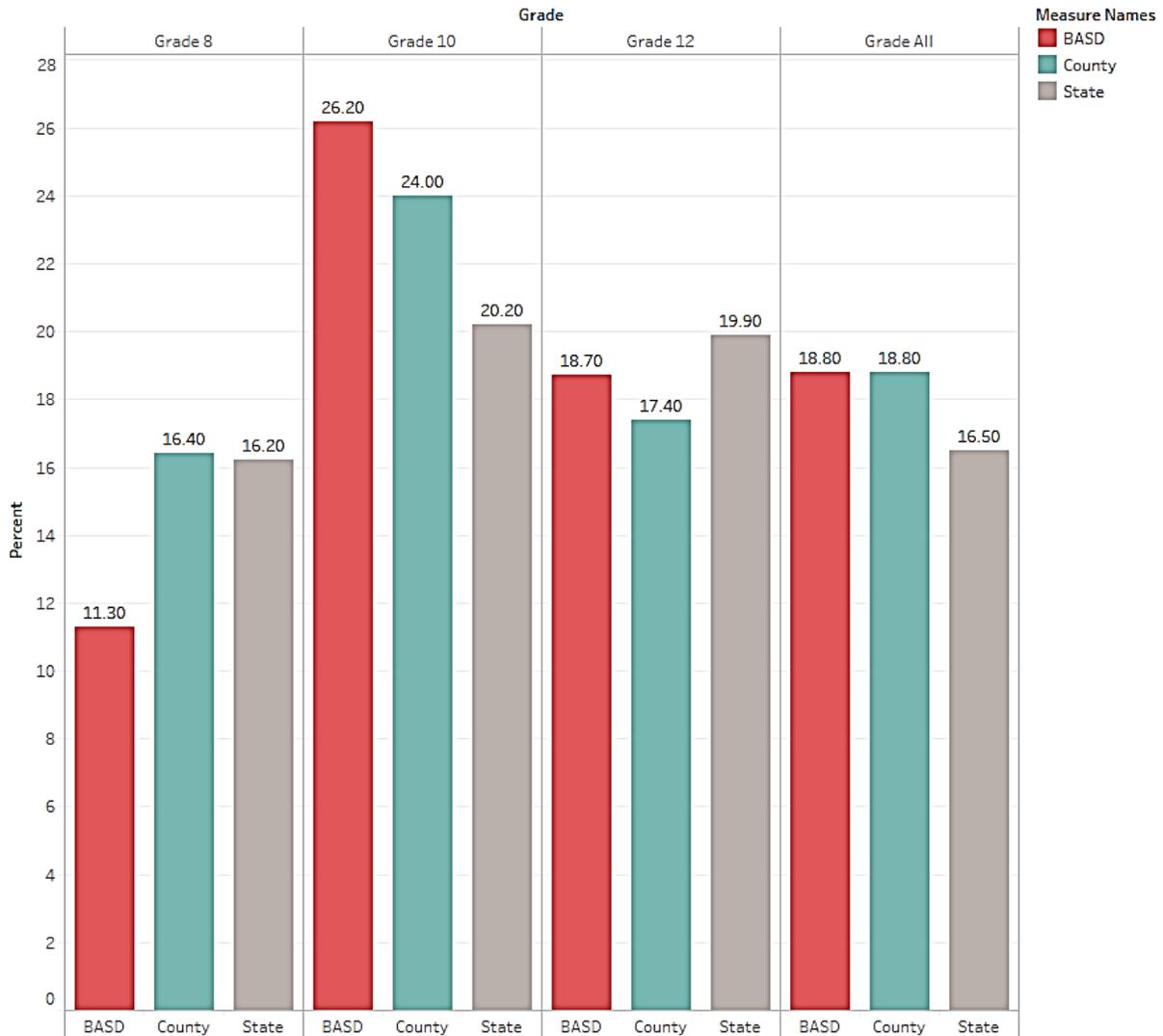


Figure 23: PAYS- Percentage of students who have considered suicide within their lifetime

- The county and district have generally a larger percentage of students reporting that they have considered suicide as compared to the state.
- Around a quarter of 10th grade students in Butler County have considered suicide within their lifetime (Figure 13). Around 13 % (13.8 for BASD and 12.4 for the county) of Butler County 10th grade students have attempted suicide within their lifetime (Figure 14).

Percentage of Students Within the Butler Area School District, County and State Who Have Attempted Suicide Within Their Lifetime

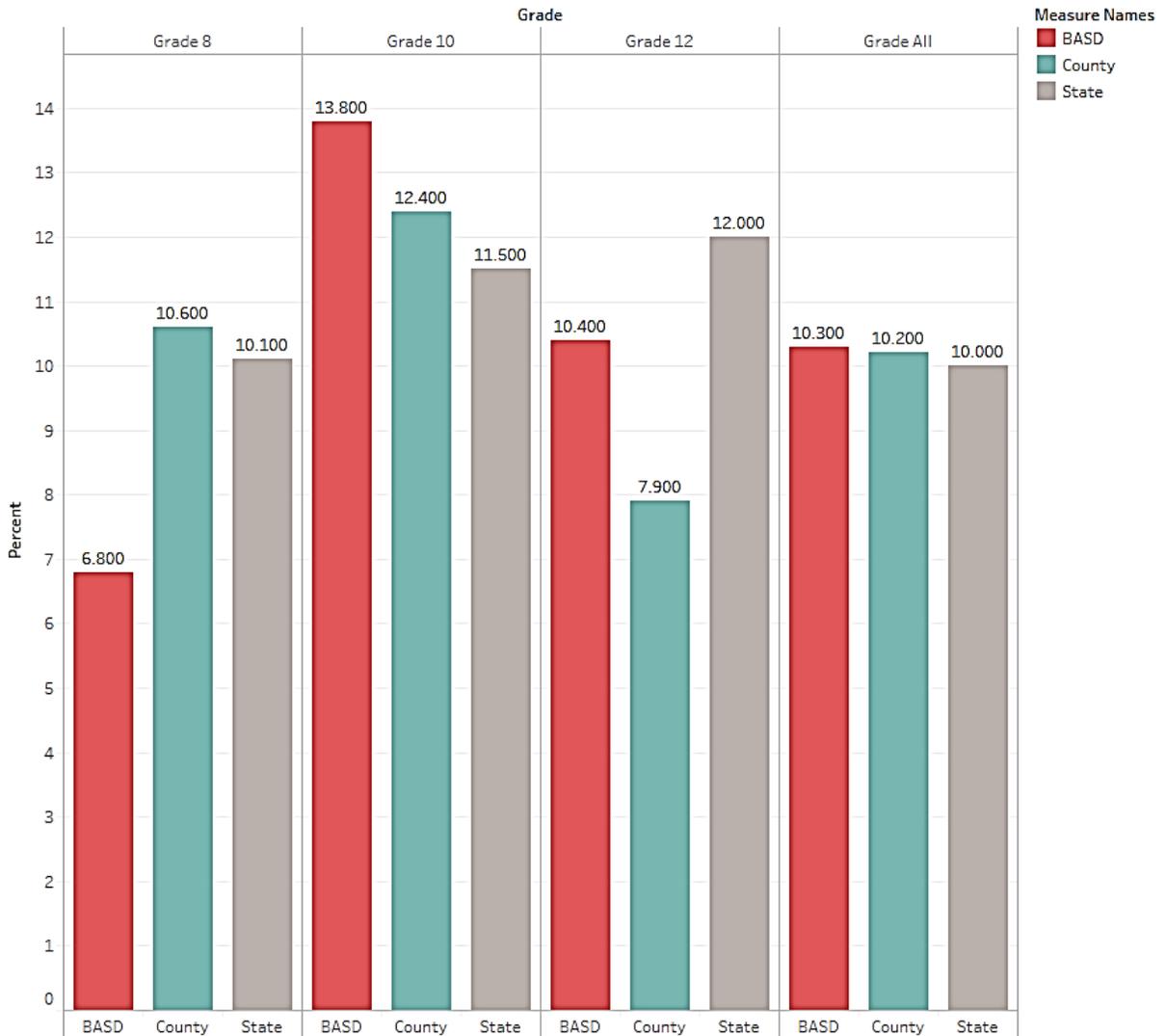


Figure 14: PAYS- Percent of students who have attempted suicide

- While the percentage of students who have attempted suicide is less than the percentage of students who contemplated suicide, the county rates are higher than state average in 8th grade students, 10th grade students, and overall.

Substance use is another issue that came up with stakeholders. PAYS asked several questions pertaining to recent and lifetime use of alcohol, tobacco and other drugs.

Percentage of Students Within the Butler Area School District, County and State Who Reported Using Cigarettes Within Their Lifetime

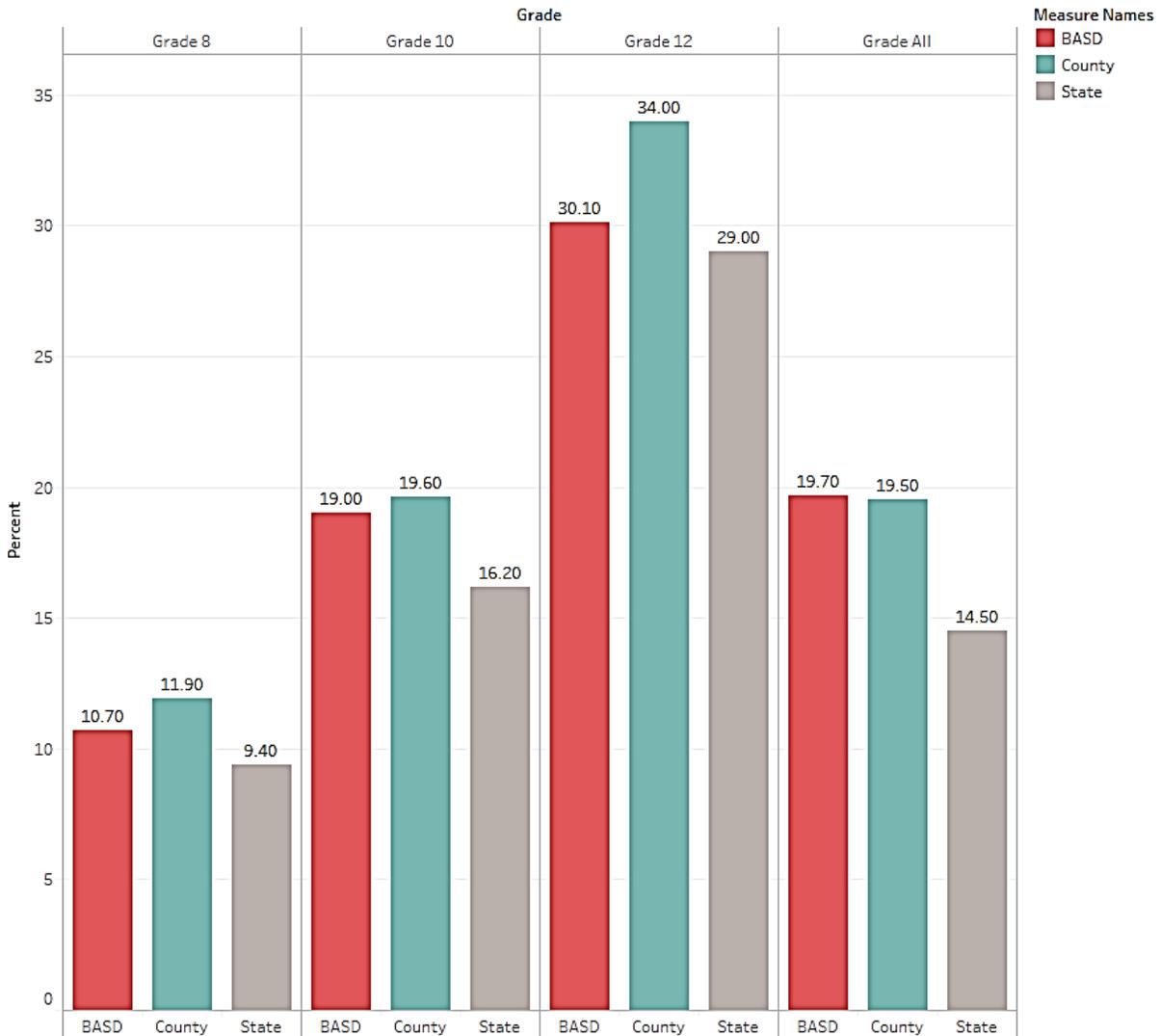


Figure 15: PAYS- Percent of students who reported use of cigarettes in their lifetime

- Butler County and BASD had higher rates of students reporting using cigarettes in their lifetime at all grade levels (8th, 10th, 12th and overall)
- 1 in 3 12th graders in Butler County report using cigarettes in their lifetime (Figure 15)

Percentage of Students Within the Butler Area School District, County and State Who Reported Using Ecigarettes Within the Past 30 Days

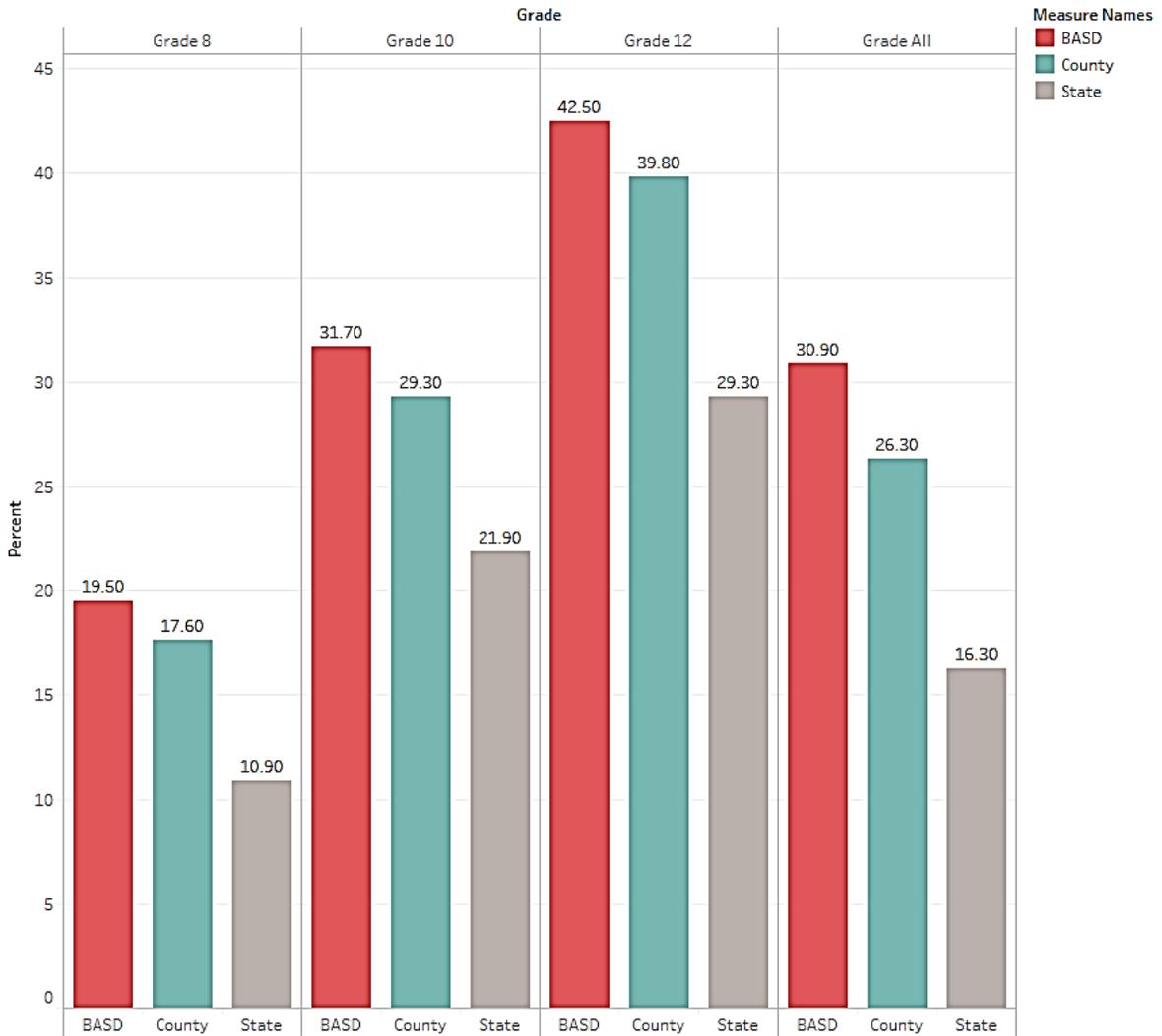


Figure 16: PAYS- Percent of students who have used E-Cigarettes in the past 30 days

- Reported E-cigarette usage in the past 30 days is much higher in Butler County and BASD than it is in the state.

Percentage of Students Within the Butler Area School District, County and State Who Reported Using Smokeless Tobacco Within Their Lifetime

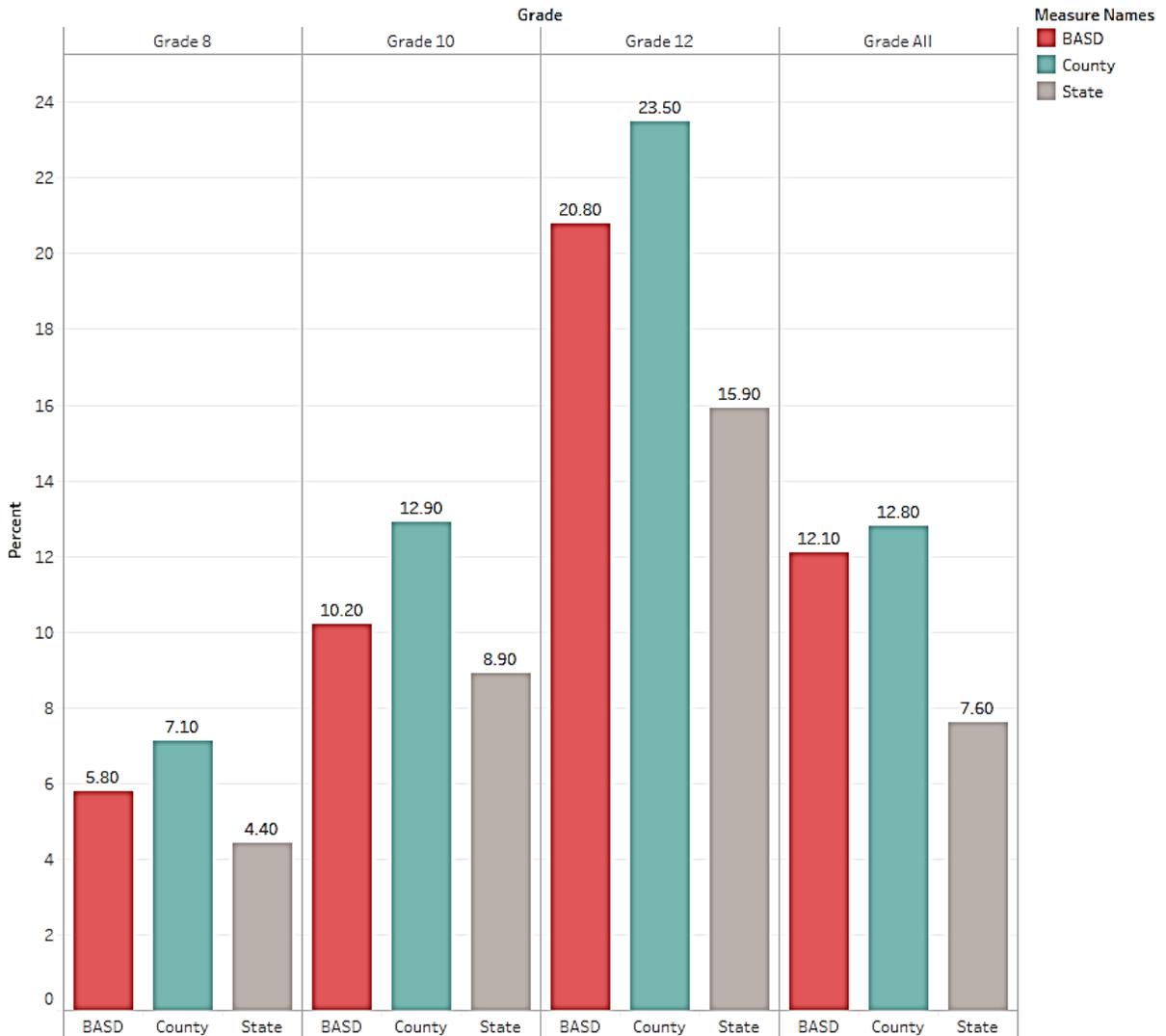


Figure 37: PAYS- Percent of students who reported using smokeless tobacco in their lifetime

- Butler County has higher rates of smokeless tobacco usages compared to the BASD alone and the state.
- The highest reported usages across all levels (BASD, County, and State) occur amongst 12th grade students. A potential explanation for this is Pennsylvania tobacco purchasing laws, which dictates individuals must be 18 or older to purchase. Most students turn 18 during their senior year of high school, greatly increasing the overall access to tobacco products. This would have an effect on cigarettes, e-cigarettes and smokeless tobacco usage (Figure 15,16,17)

Percentage of Students Within the Butler Area School District, County and State Who Have Consumed Alcohol Within Their Lifetime

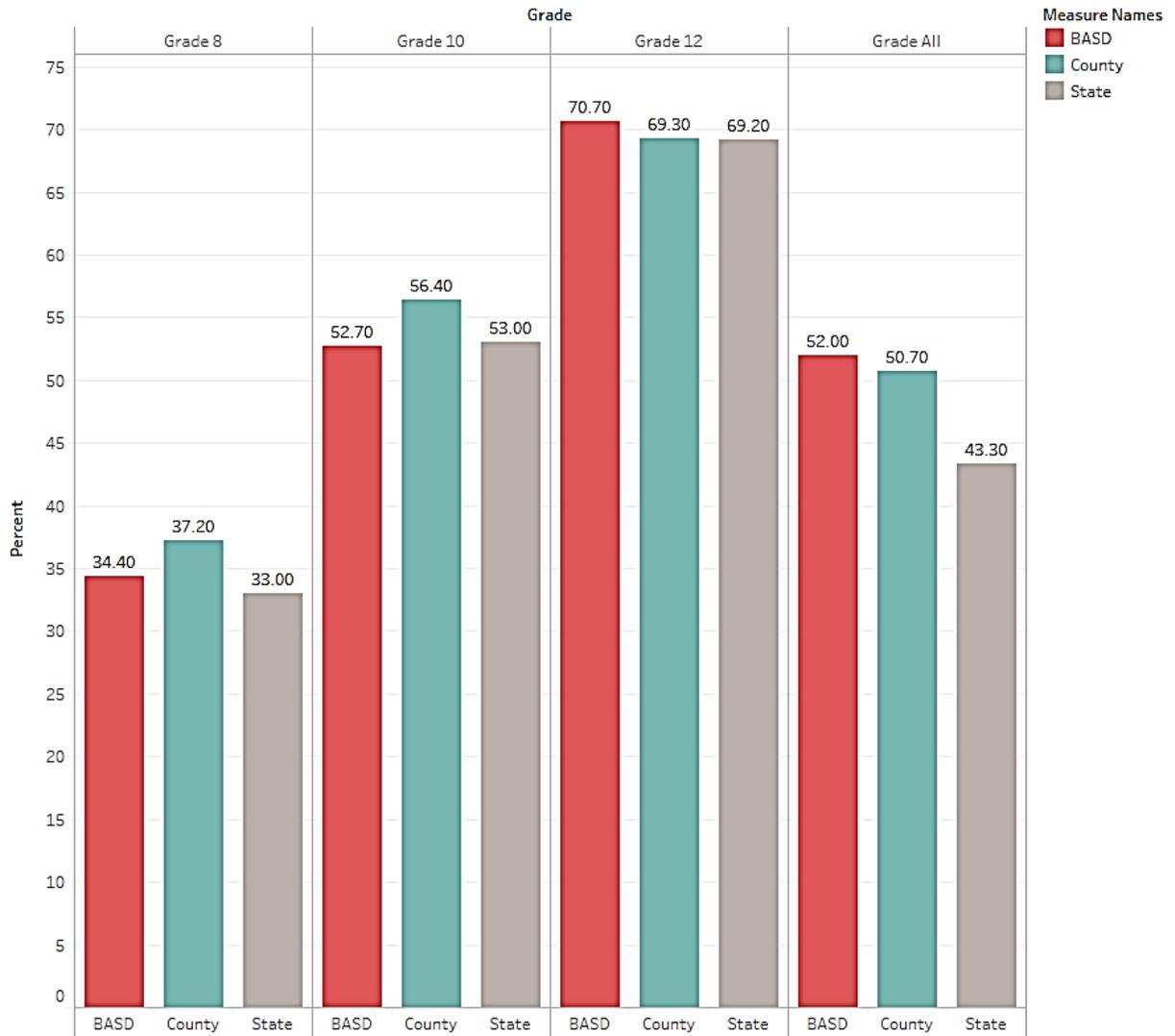


Figure 48: PAYS-Percent of students who have consumed alcohol within their lifetime

- Rates of students reporting having consumed alcohol within their lifetime are only slightly higher in the county and BASD when compared to the state average.
- By 12th grade nearly 70% of all students (BASD, County & State) have consumed alcohol.

Percentage of Students Within the Butler Area School District, County and State Who Reported Using Marijuana Within Their Lifetime

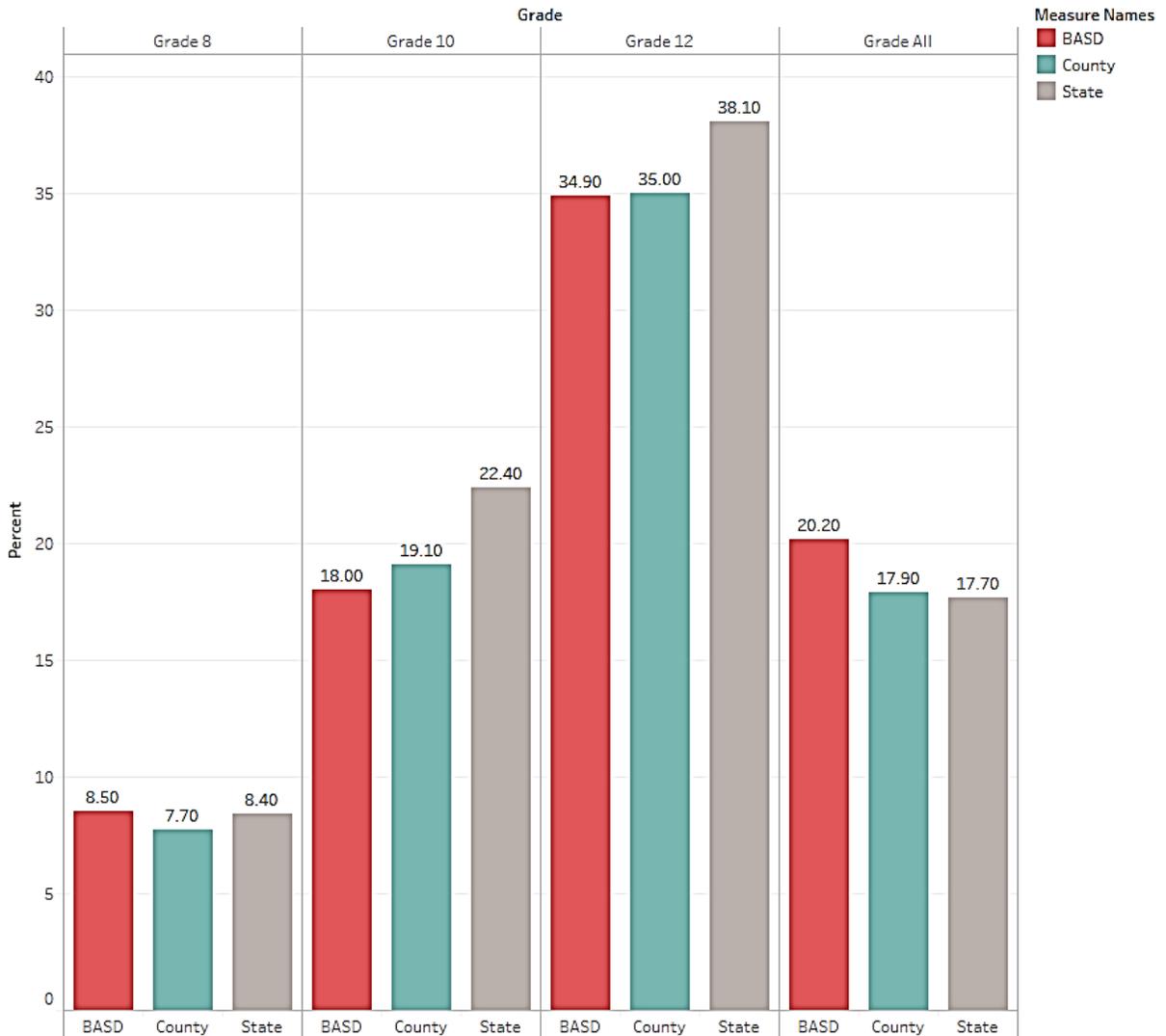


Figure 59: PAYS- Percent of students who reported using marijuana in their lifetime

- Reported rates of marijuana use are lower than state average in both Butler County and BASD (Figure 19)

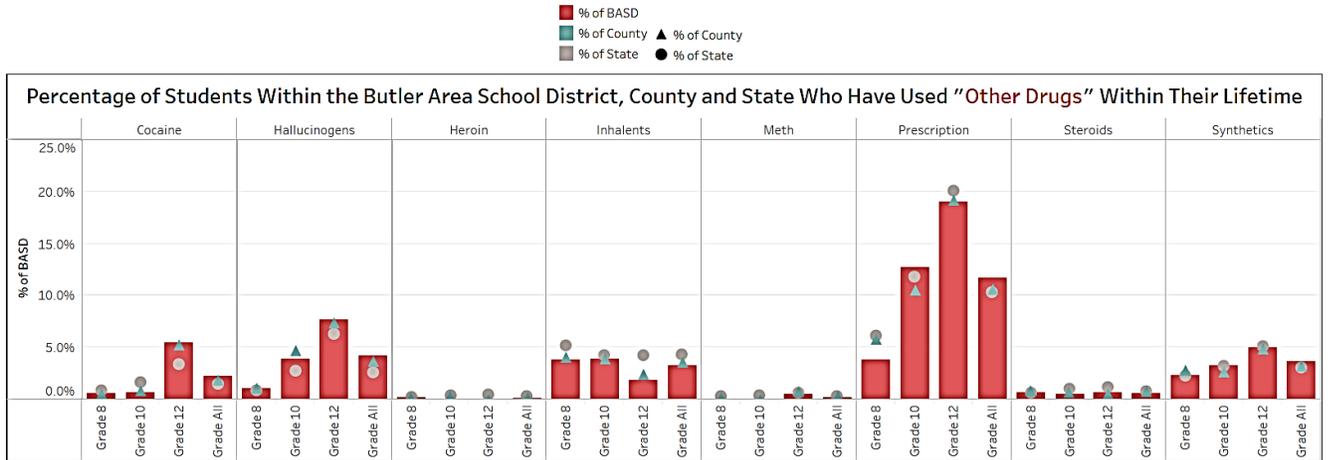


Figure 206: PAYS- Percent of students reporting other drug usage during their lifetime

- The rates of drug usage depend largely on the type of drug. Prescription drugs are the most common; 19% of BASD seniors had used prescription drugs in their lifetime (Figure 20).
- Most of the other drug usage aligns with county and state level usage; however, hallucinogen usage is higher in BASD and the county than the state (Figure 20).

Several stakeholders brought up food insecurity and access to healthy food as being a major issue, particularly in Butler City and in some of the more rural areas of the county. A couple of questions in PAYS addressed this issue.

Percentage of Students Within the Butler Area School District, County and State Who Reported Within Their Lifetime Having to Skip A Meal Due to Their Family's Financial State

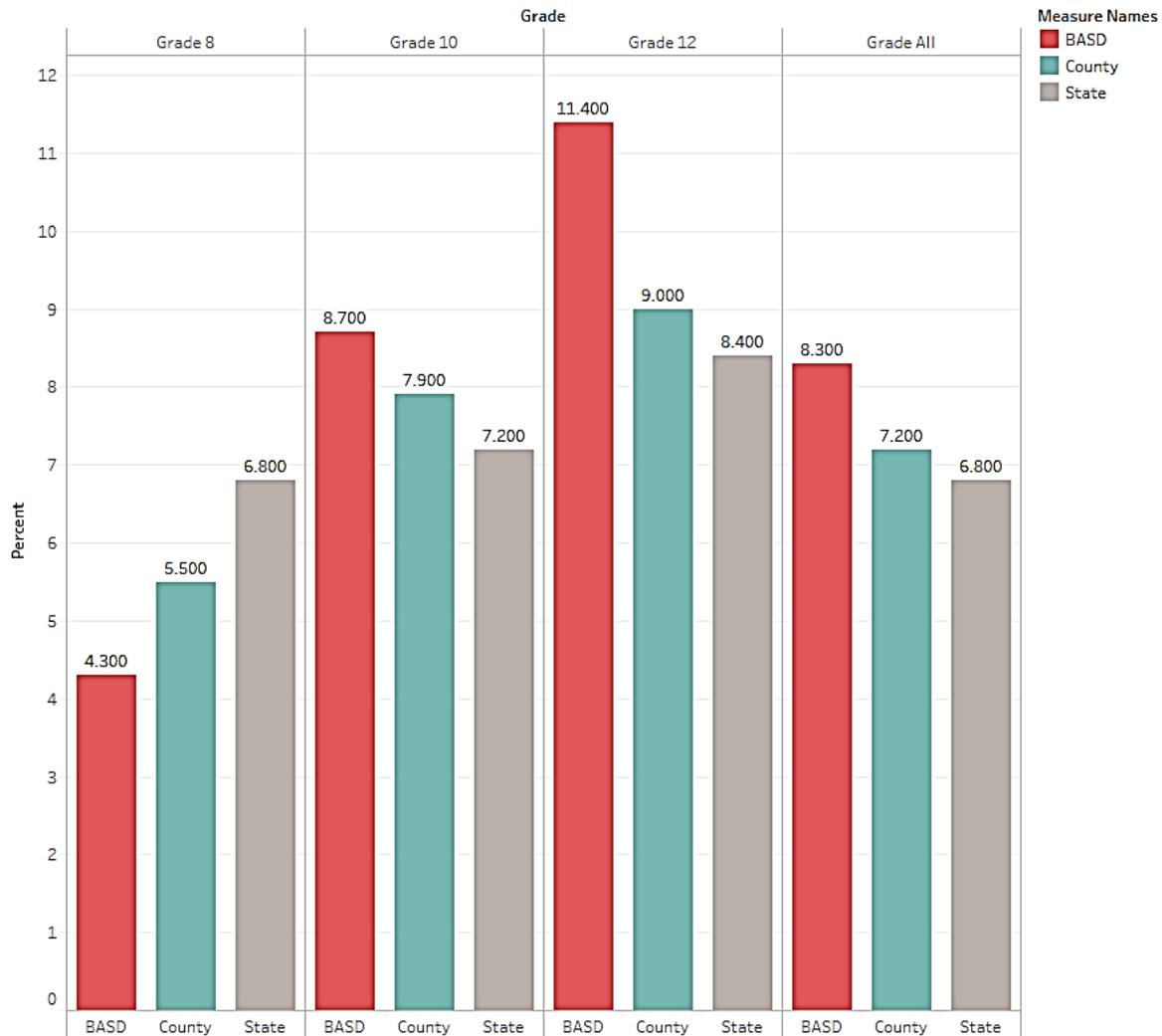


Figure 71: PAYS- Percentage of students who skipped a meal due to their family's finances

- Butler County and BASD 10th, 12th and overall students had higher percentages of students reporting that they have skipped a meal due to family finances, than the state (Figure 21).
- The trend is similar in the percentage of students who reported having to worry about running out of food within their lifetime (Figure 22).

Percentage of Students Within the Butler Area School District, County and State Who Reported Within Their Lifetime Having to Worry About Running out of Food

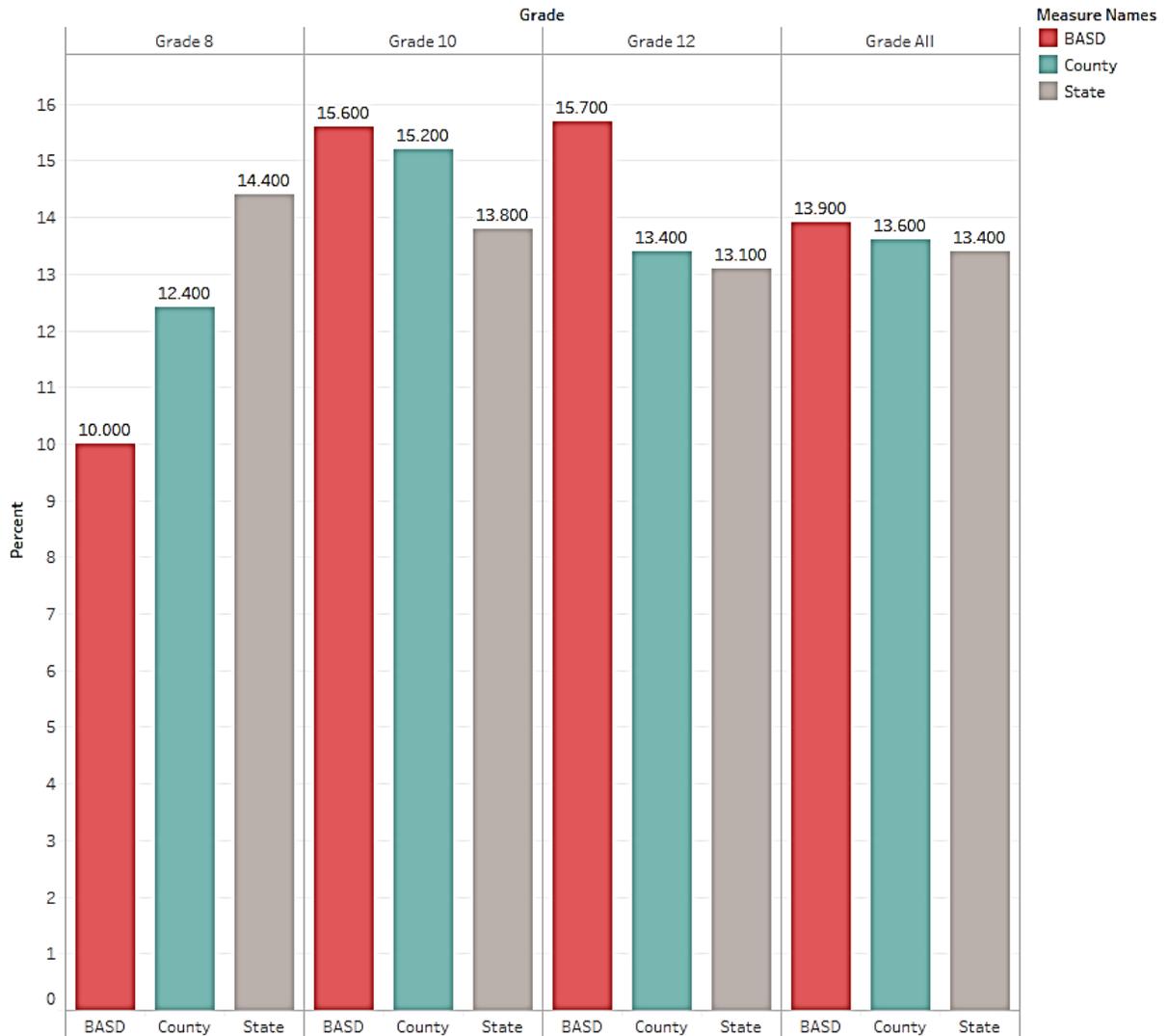


Figure 82: PAYS- Percentage of students reporting having to worry about running out of food

Community Survey

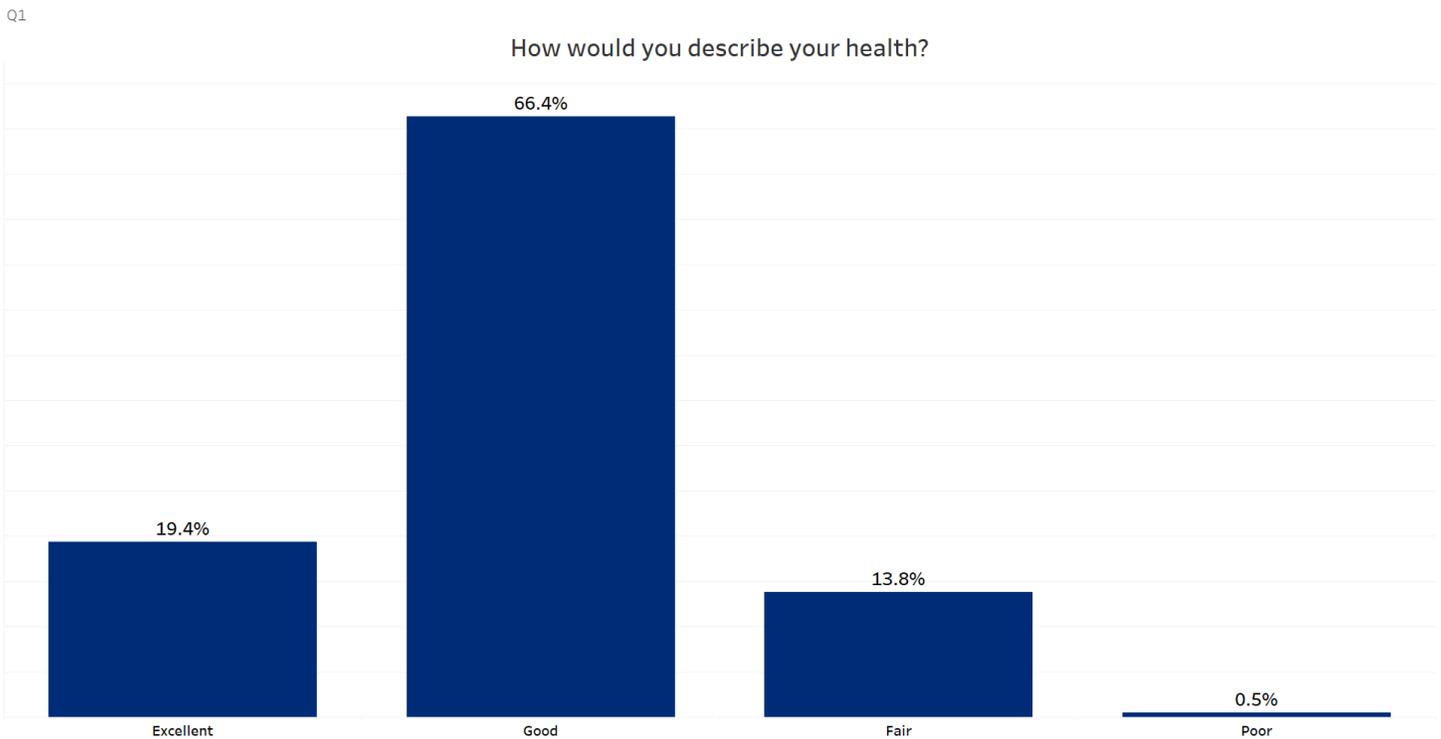
In attempt to reach as many people and distinct populations as possible, BMH distributed the survey using a variety of methods. Census data showed that only 66.2% of households in Butler City had broadband internet, so paper surveys were circulated in addition to the online version. Stakeholders at the initial meeting were given surveys to distribute to their respective populations. They were also encouraged to promote the online version of the survey amongst their organization. The Butler County Collaborative for Families also distributed the link to the online survey through their email distribution list. The Butler County Collaborative for Families is a multi-agency network that collaborates to provide services for individuals and families in

Butler County. BHS population health care managers delivered surveys and flyers to primary care offices in our service area.

The employee survey prompted employees who live in Butler County to take the general community survey upon completion of the employee specific questionnaire. General community surveys were also taken to outpatient physician offices for additional data collection. Butler Memorial Hospital collected 651 surveys that community members completed. The survey asked several questions regarding the individual's health status and other factors linked to health, like demographics and proximity to stores with fresh fruits and vegetables. The following is a summary of the results found through the community survey.

Survey Results

Figure 93: Community Survey- How would you describe your health



- 19.4% of respondents described their health as excellent. 66.4% described their health as good. 13.8% described their health as fair and 0.5% described their health as poor.

Where do you turn for basic healthcare needs?

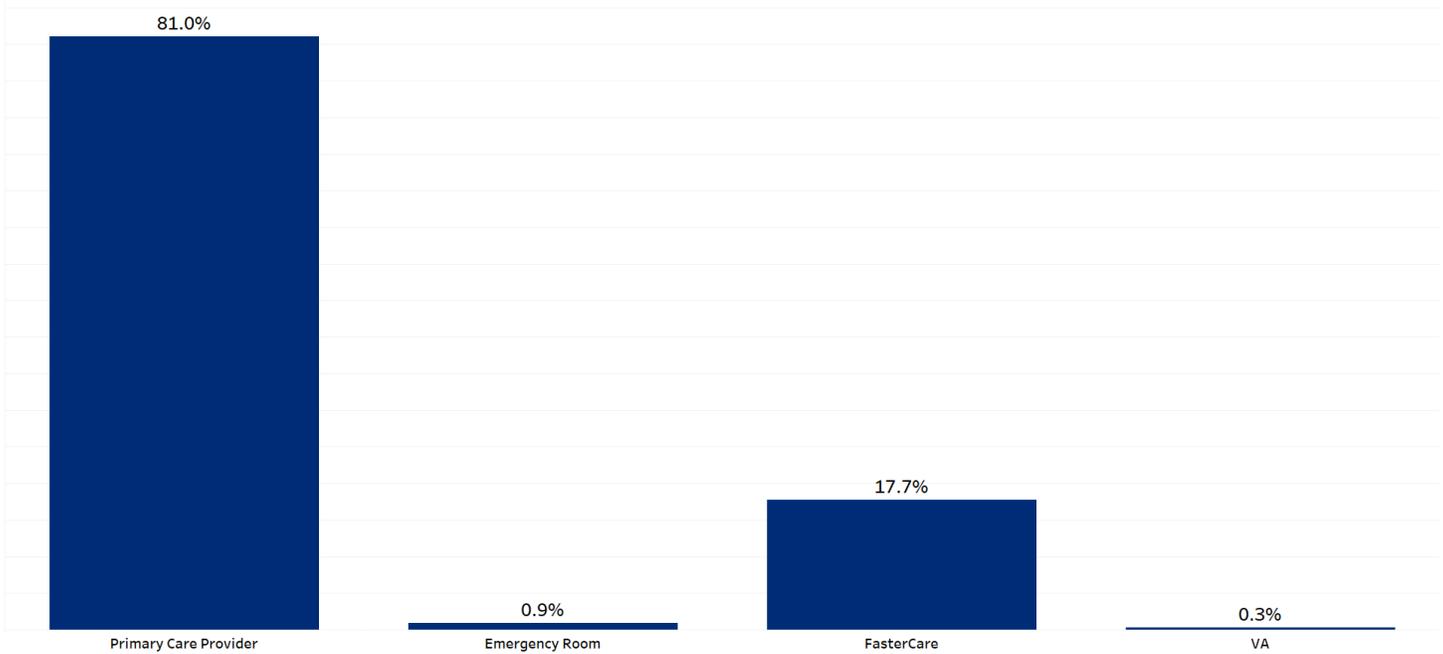


Figure 104: Community Survey- Basic healthcare needs

- 81% of respondents use a primary care provider for their basic healthcare needs. 17.7% use FasterCare or an Urgent care equivalent. 0.9% use the emergency room and 0.3% of respondents use the VA for their basic healthcare needs.
- Population Health statistics show a larger percentage seeking primary care from locations ill equipped to provide such services.

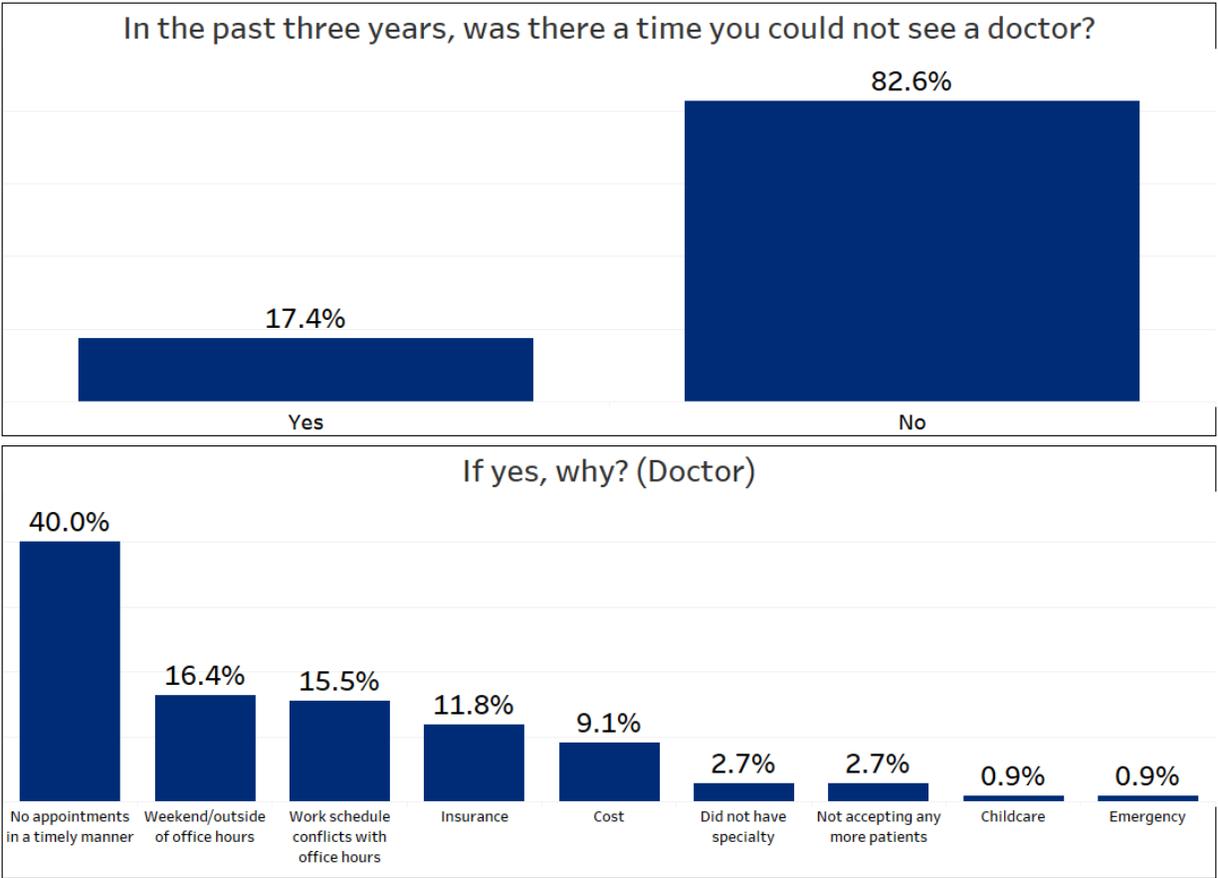


Figure 115: Community Survey- unable to see a doctor

- Of the 650 respondents for this question (Figure 25), 113 reported that they were unable to see a doctor in the past three years.
- The primary reason for being unable to see a doctor was that there were no appointments available within a timely manner (40%). Other reasons included needing care outside of the typical office hours, having a work schedule that conflicts with the physician office hours, insurance coverage, cost of care, specialty unavailable and the physician was not accepting new patients.
- Providing additional access points where primary care is available to all members of the community is an area of opportunity determined by the assessment committee.

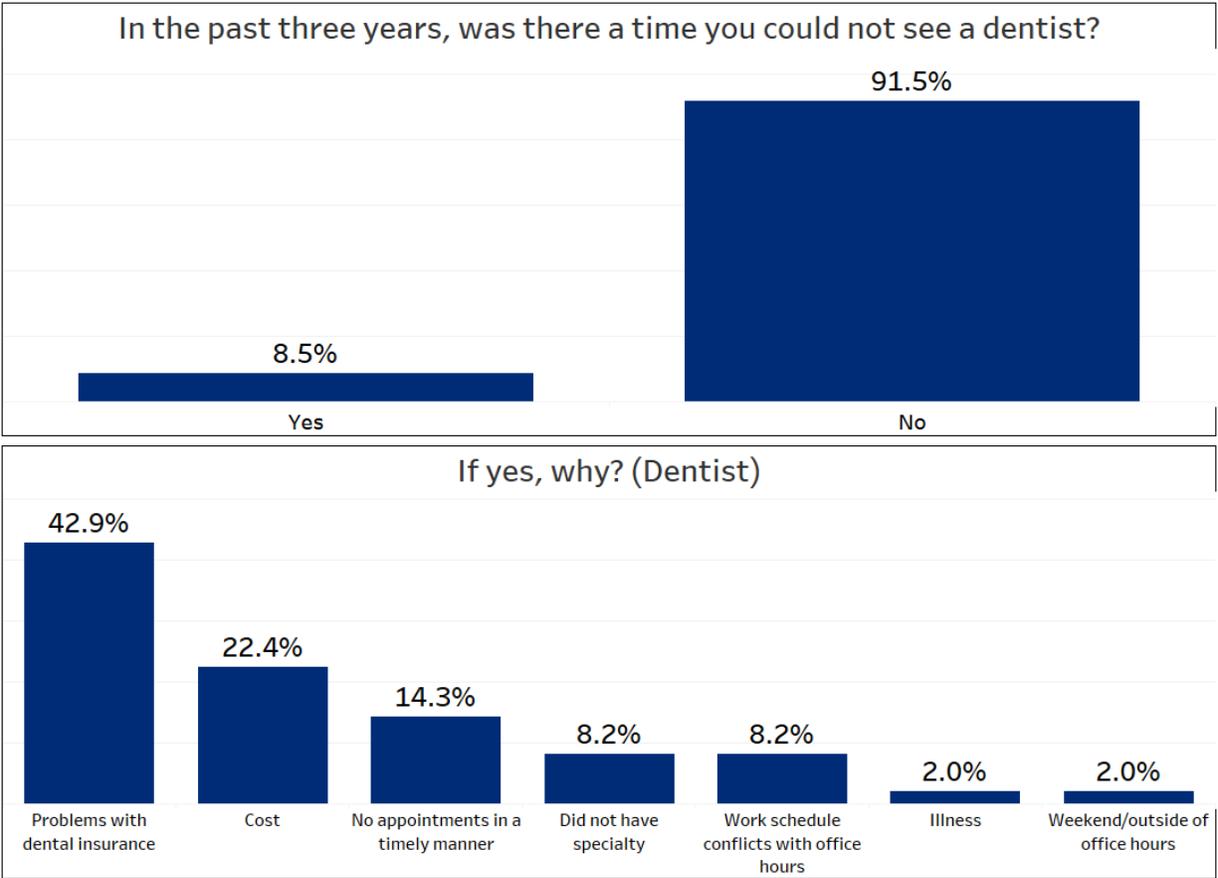


Figure 126: Community Survey- Unable to see a dentist

- 55 respondents indicated that they were unable to see a dentist in the past three years (figure 26)
- The primary reason for individuals being unable to see a dentist related to lack of dental insurance coverage (42.9%). The cost of dental care is the second most cited reason for being unable to see a dentist.

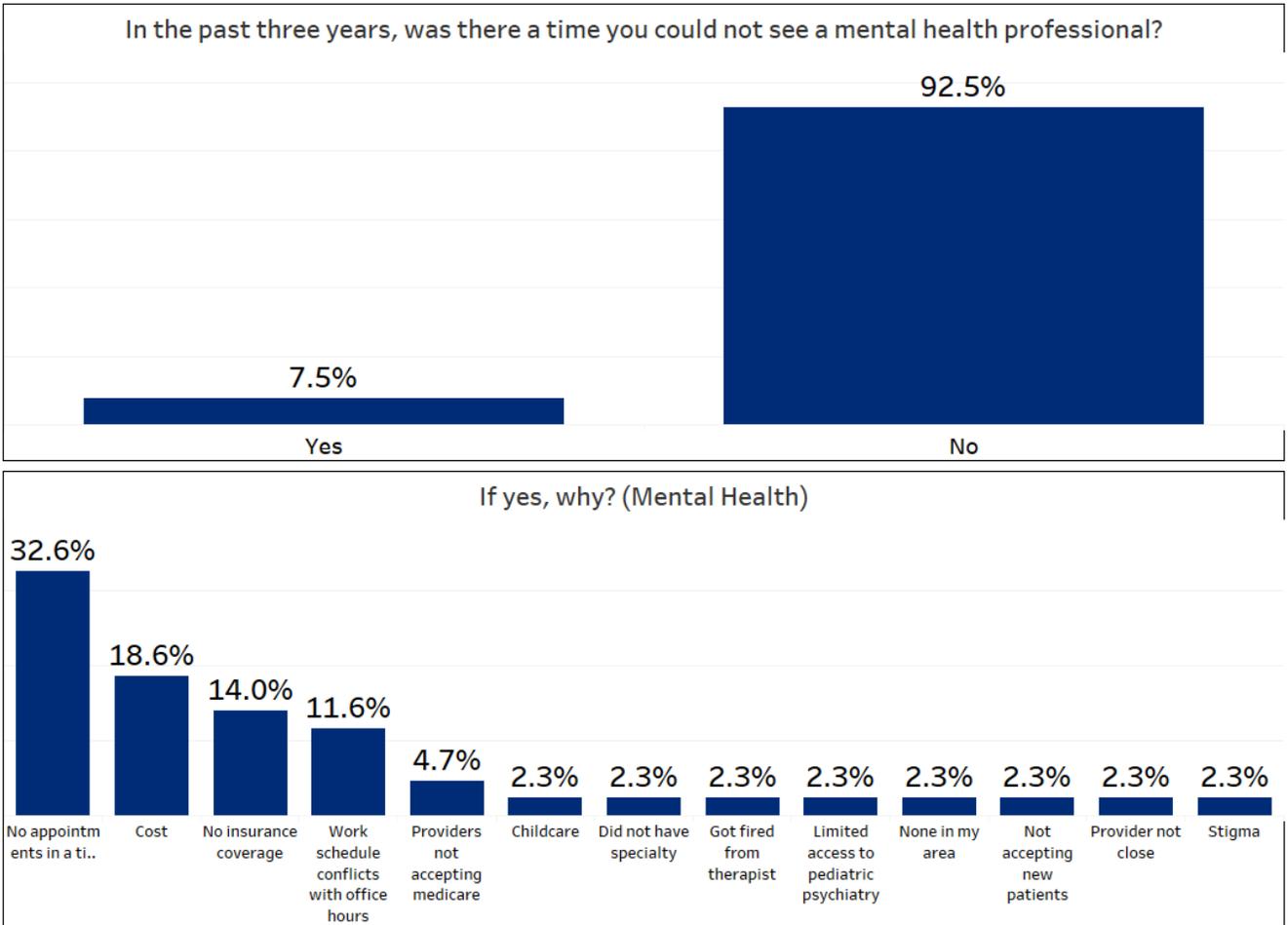


Figure 27: Community Survey- Unable to see a mental health professional

- Only 20 people indicated that they were unable to see a mental health professional in the past three years. This result seems to contradict some of the other information BMH received through the focus groups and responses to other questions within the survey. Possible reasoning behind this could be: stigma associated with needing a mental health professional, different individual definitions of mental health professionals, or individuals seek treatment with a PCP instead.
- The most common reason persons were unable to see a mental health provider was that there was a significant wait (average 2-3 months) for available appointments.
- Ensuring access to mental health professionals provides an additional opportunity for BMH to focus efforts moving forward.

Q6

How far, in miles, are you willing to drive for a Primary Care visit?

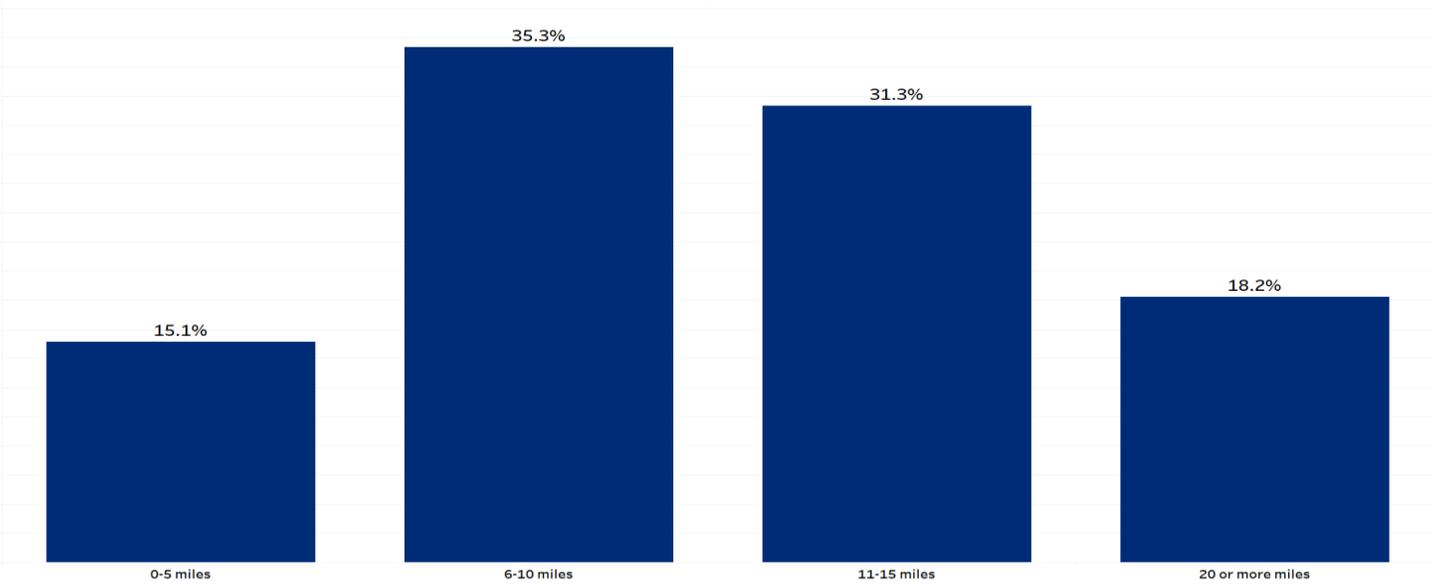


Figure 138: Community Survey- willing to drive for a primary care visit

- The BMH survey asked questions about an individual’s willingness to drive to different services to assess the access to health services within the county.
- People are more willing to travel farther distances for specialists than they are for primary care and emergency rooms (Figures 28, 29, 30)

Q7

How far, in miles, are you willing to drive for a Specialist?

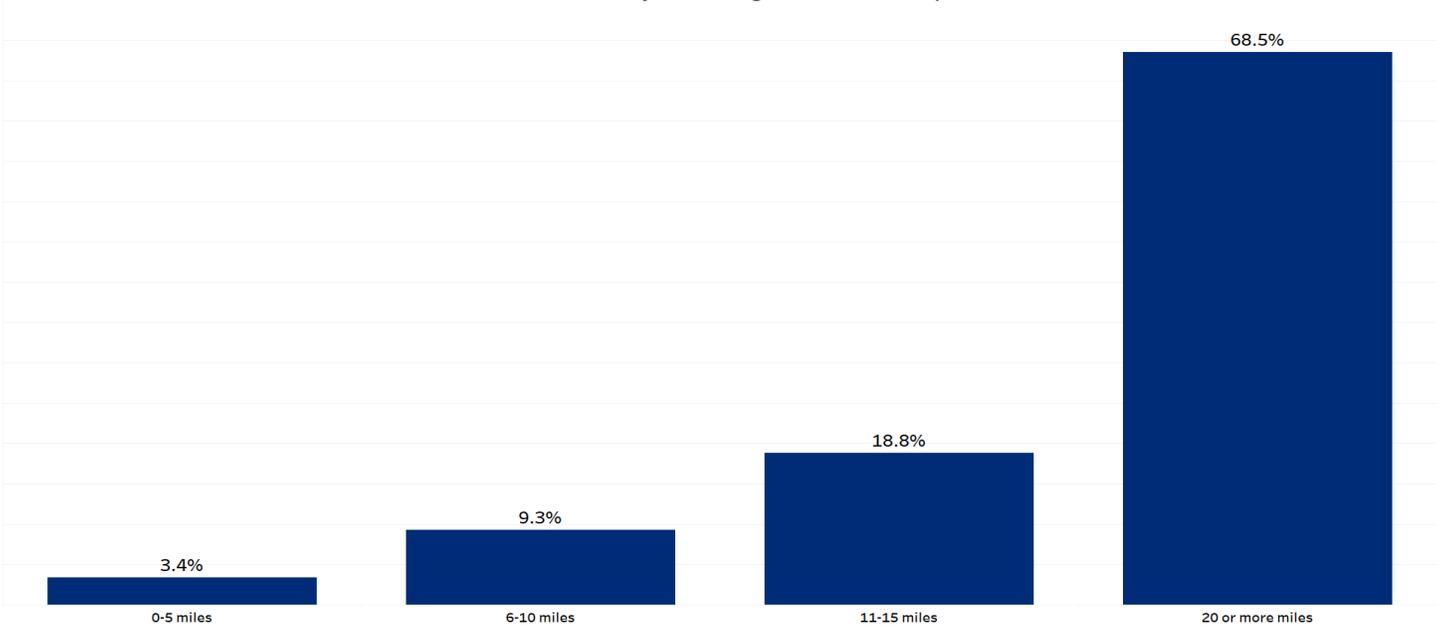


Figure 29: Community Survey- willing to drive for a specialist

Q8

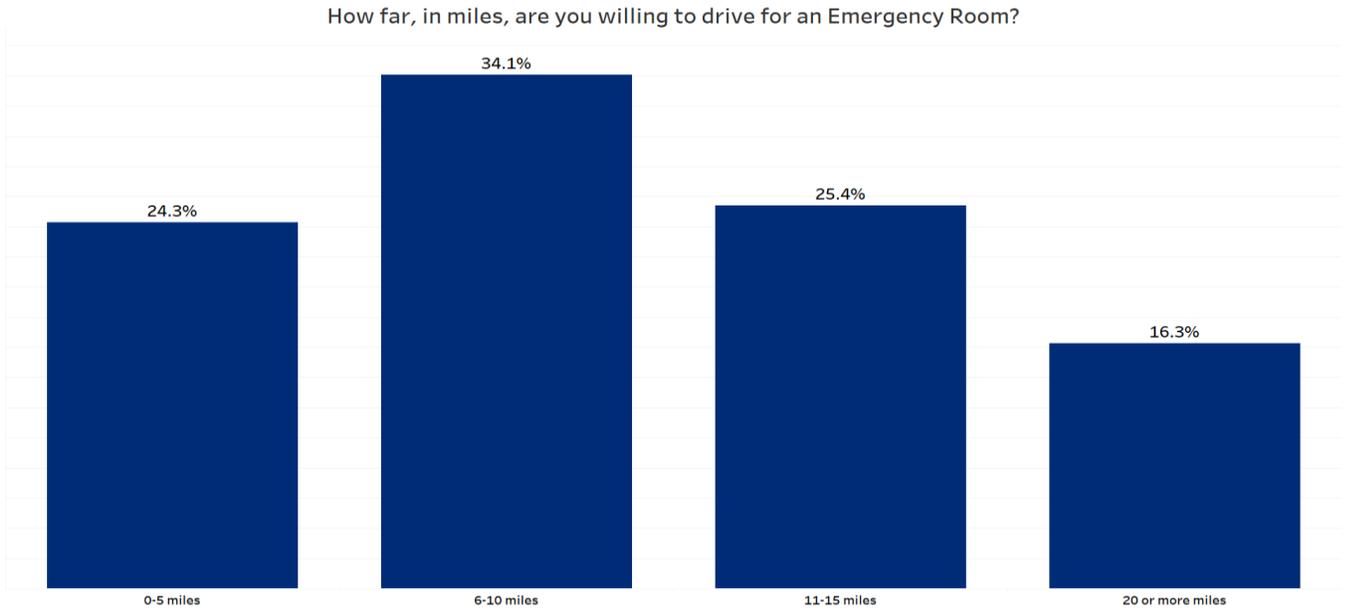


Figure 30: Community Survey- willing to drive for emergency room

Q9

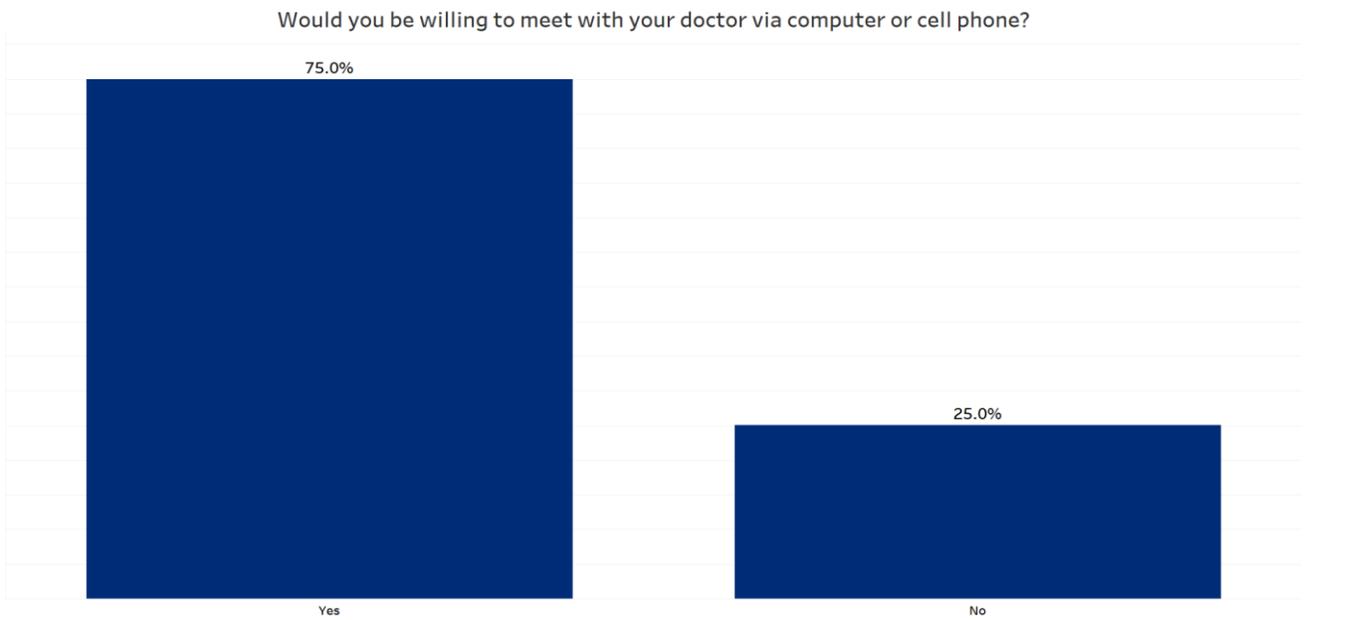


Figure 141: Community Survey- willing to meet with doctor via technology

- 640 individuals responded to the question “Would you be willing to meet with your doctor via computer or cell phone?”
- 161 of those respondents indicated that they would not be willing to do a virtual visit.

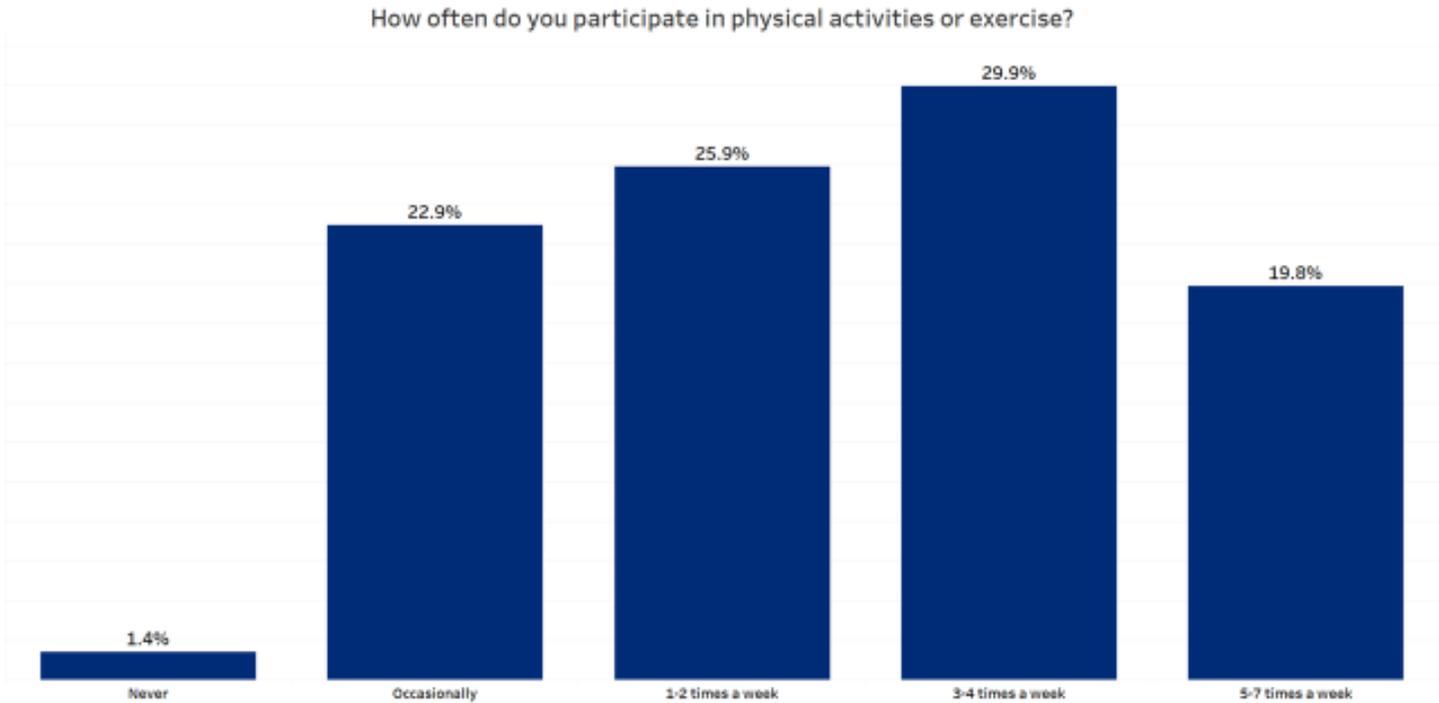


Figure 152: Community Survey- participation in physical activities

- The response to the question about physical activities seemed to contradict some other data from the focus groups and responses to other survey questions (Figure 31).
- Current recommendations of 240 minutes of aerobic exercise weekly, is being met by only a fraction of our community.
- The absence of safe outdoor parks and recreational locations were identified as barriers to improving physical activity.

Q11

How often do you smoke?

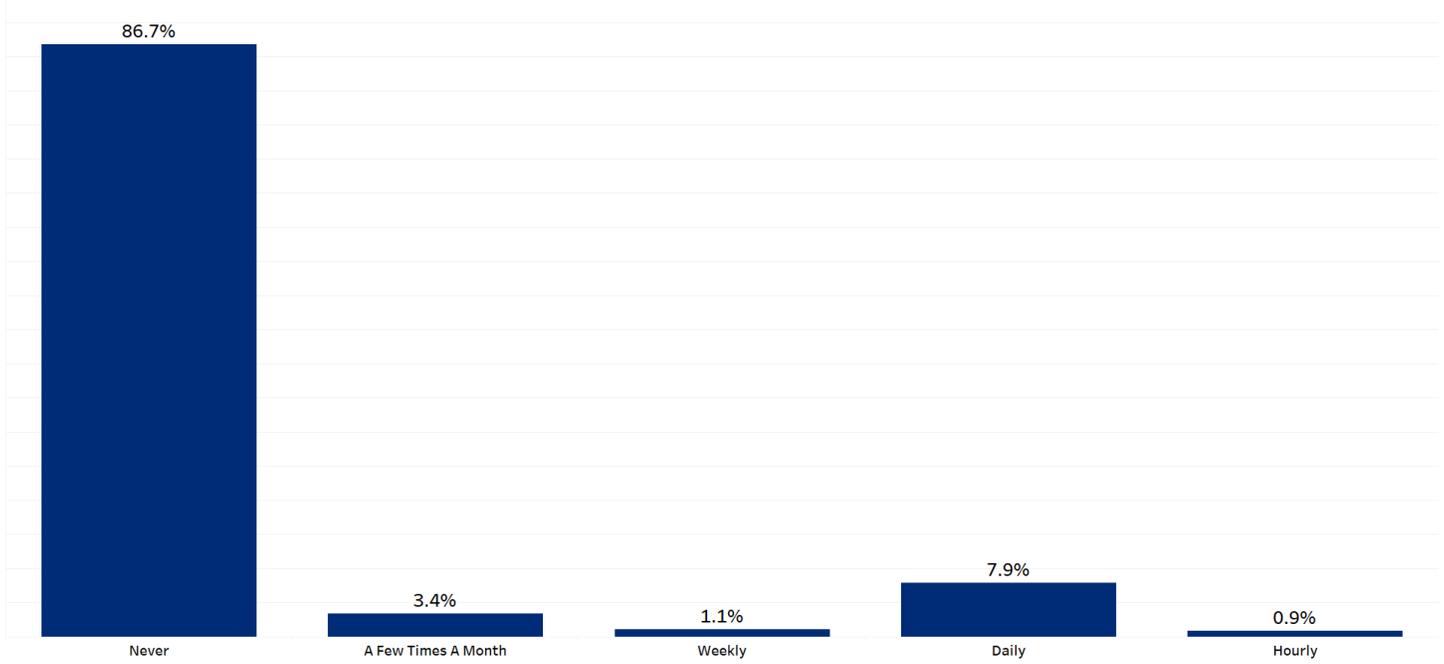


Figure 163: Community Survey- Smoking frequency

Q12

Do you use e-cigarettes? (Vape pens, Juul, etc.)?

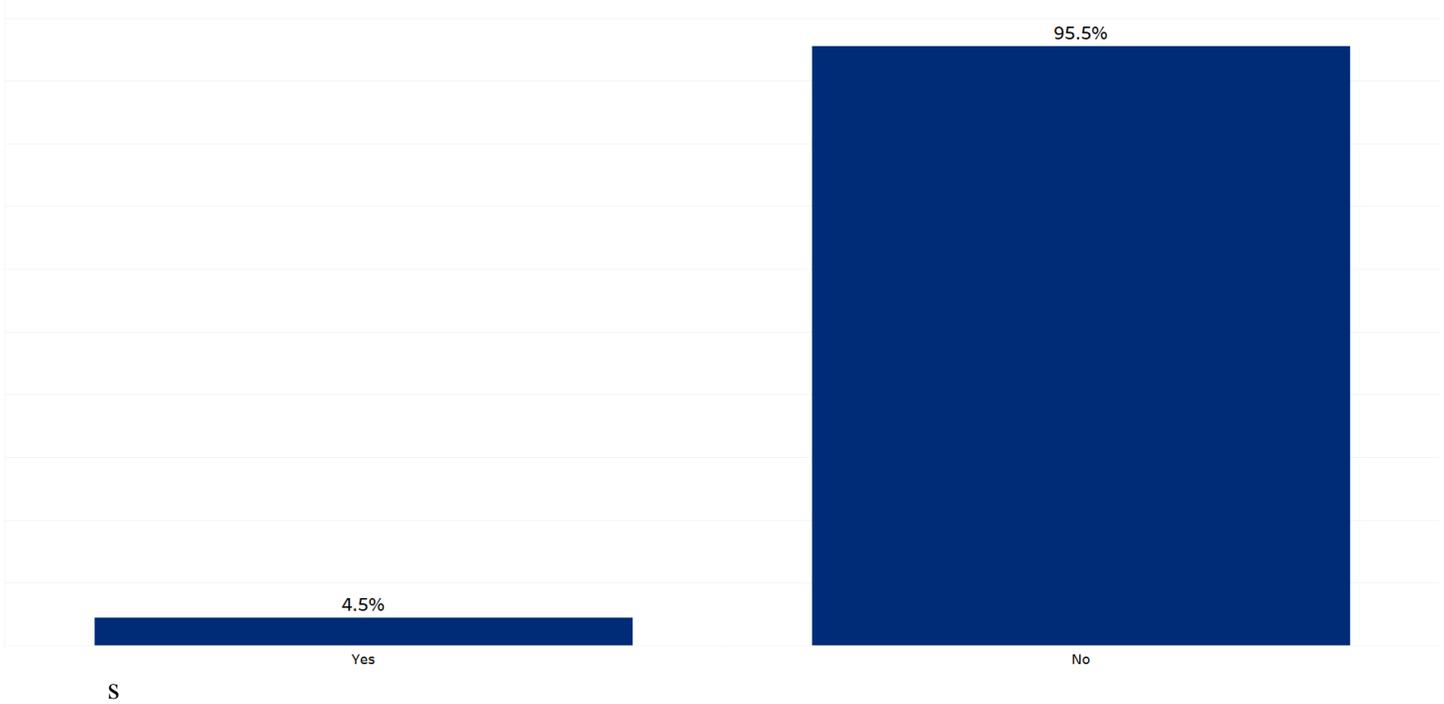


Figure 174: Community Survey- E-cigarette usage

How close is the nearest store that offers fresh fruit and vegetables?

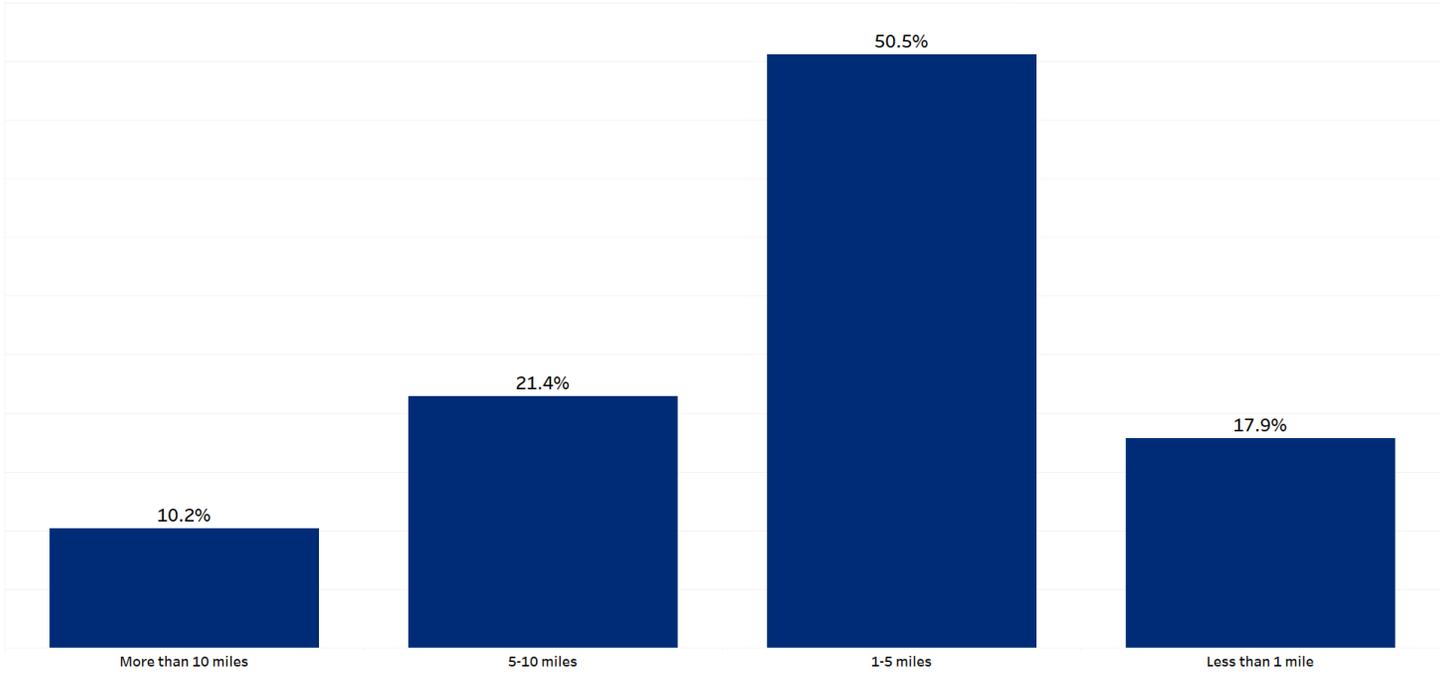


Figure 185: Community Survey- Food Access

- Lower income individuals rely on public transportation to gain access to groceries.
- Lack of locations for healthy, nutritious foods was repeatedly identified as an issue within the immediate vicinity of the hospital.
- Individuals identified a knowledge deficit on how to prepare fresh produce for meals.

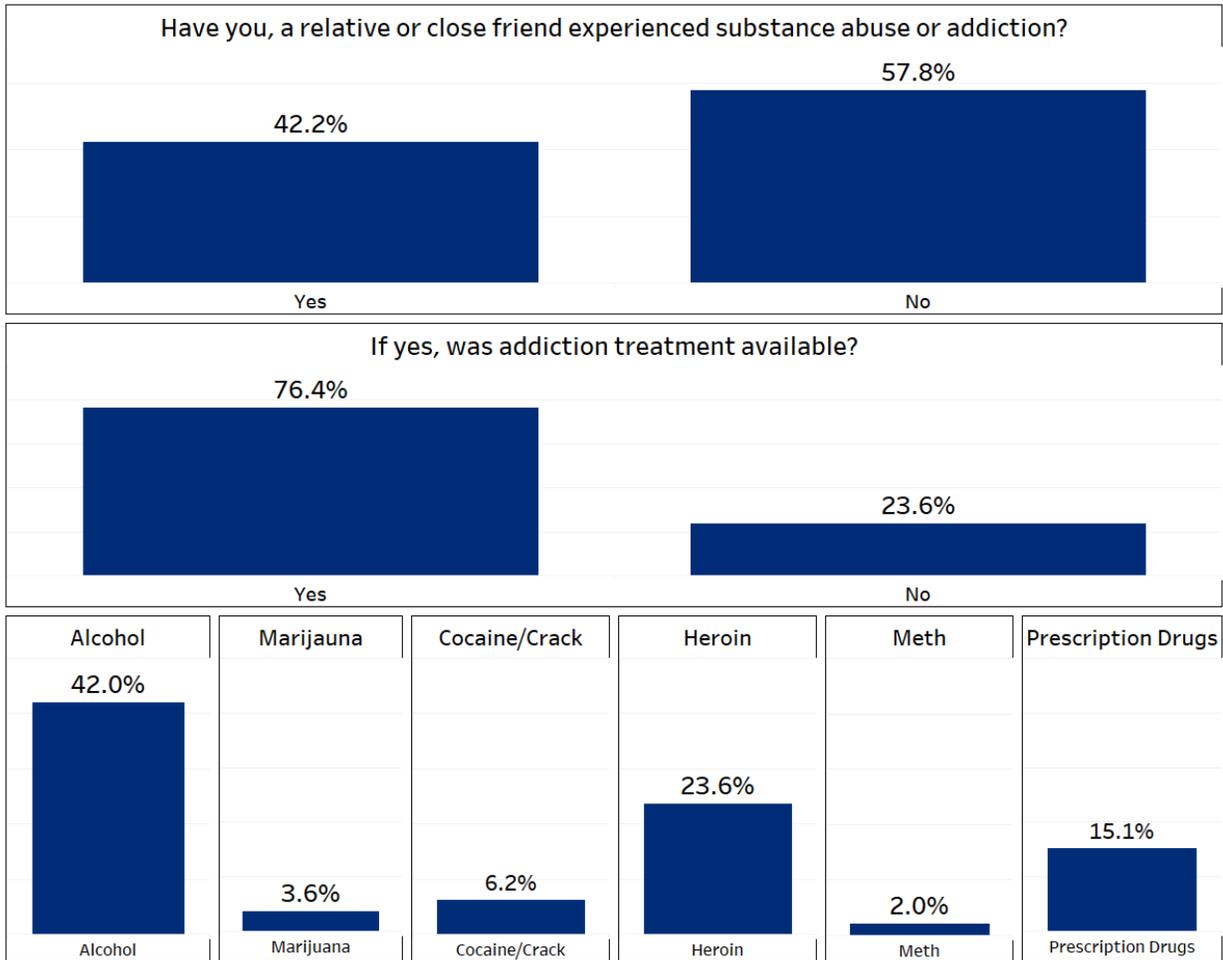


Figure 196: Community Survey- Substance Abuse

- Substance Use Disorder and its associated issues remains high on the list of opportunities for BMH to assist in community efforts.

What are the top issues that impact your health?

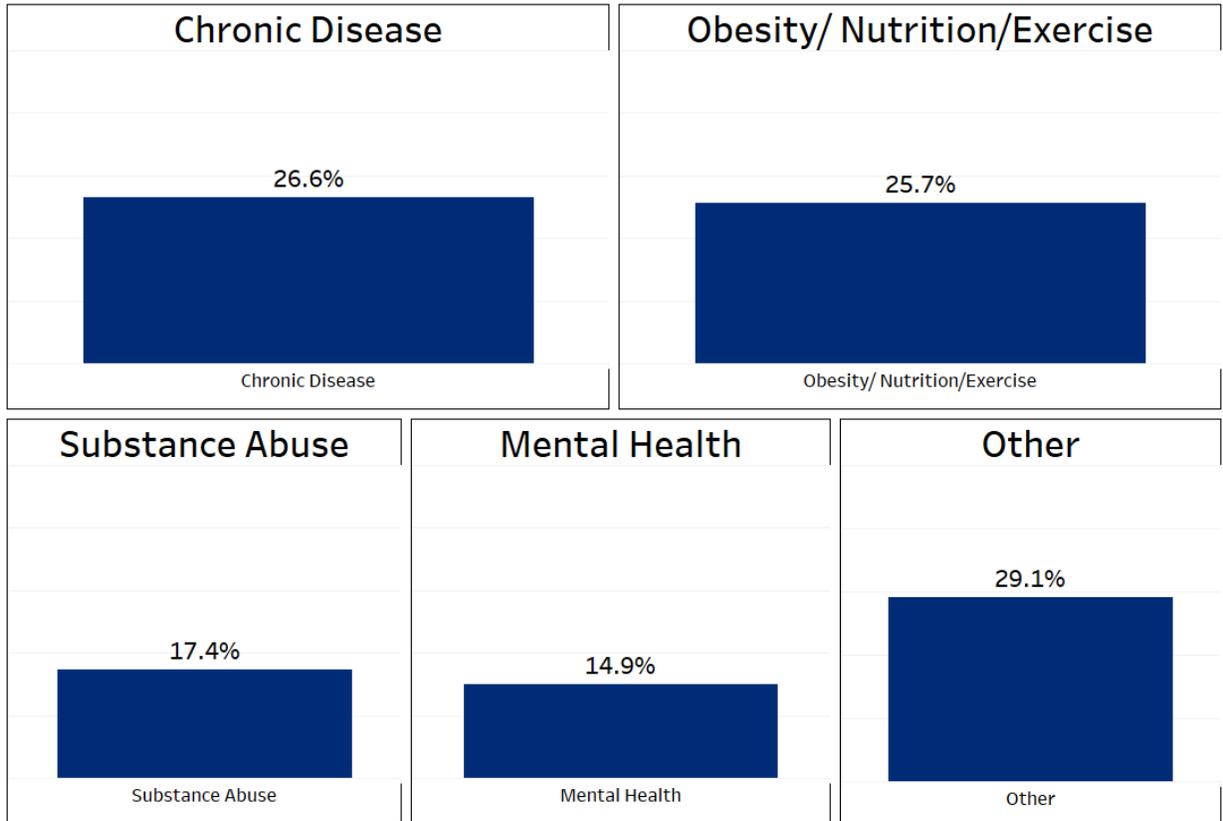


Figure 207: Community Survey- Top issues that impact your health

- Chronic Health Conditions, Healthy Lifestyles and Mental Health and Substance abuse were consistent themes noticed throughout the surveys.

Have you ever been told by a doctor you have any of the following conditions, diseases, or challenges?
(Choose all that apply)

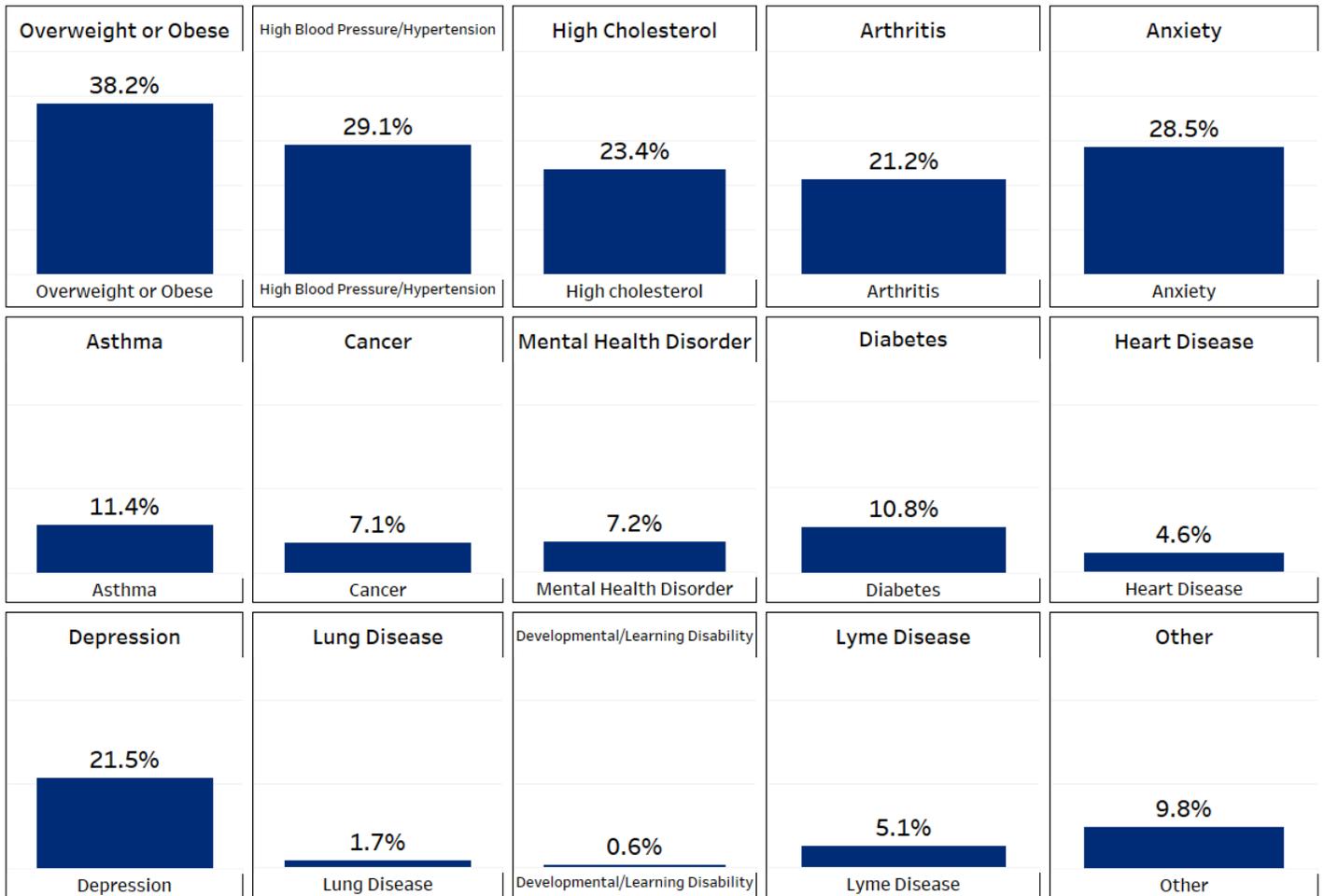


Figure 218: Community Survey- Disease Prevalence

- Conditions associated with lifestyle and social determinants of health surfacing as medical conditions within the survey participants.
- Metabolic complications of improper diet and lack of exercise frequently contribute to the identified medial conditions.

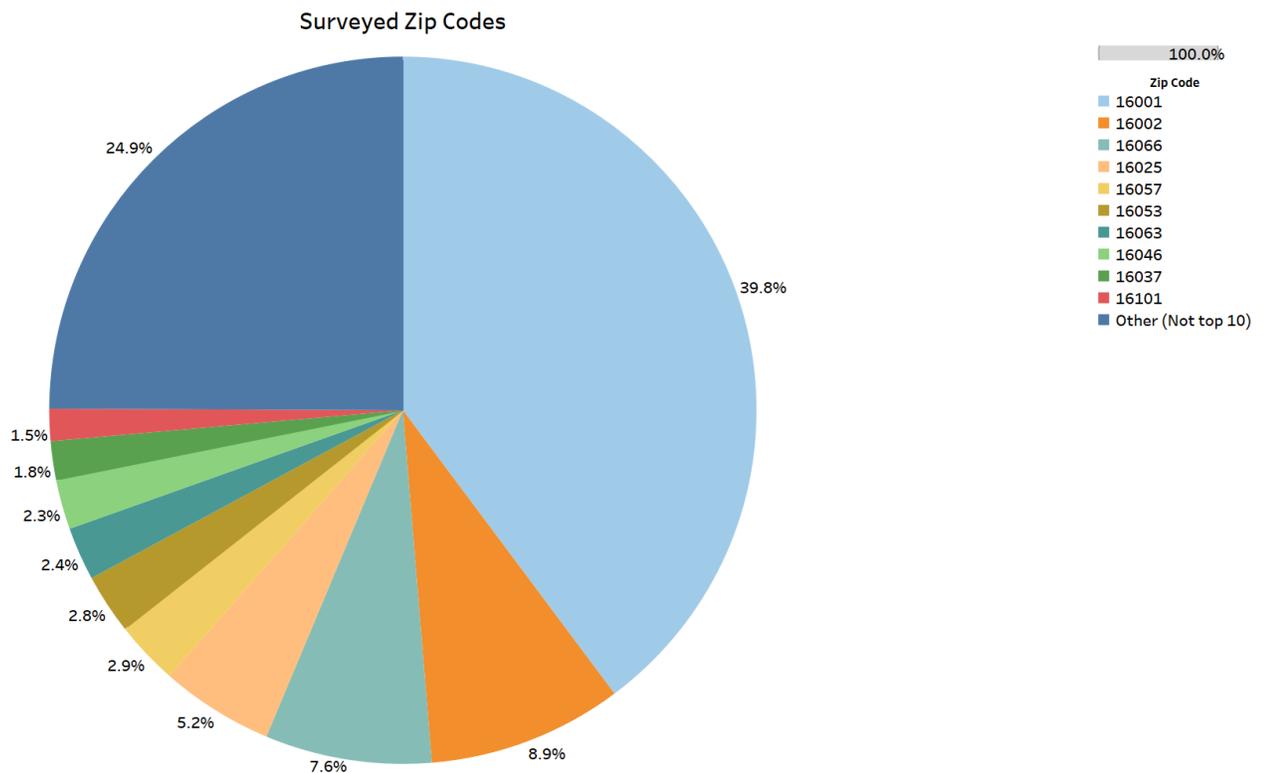


Figure 3922: Community Survey- Zip code

Employee Survey

In order to capture additional information concerning the needs of the community, BMH also surveyed its workforce. Clinical and non-clinical staff answered questions about the top health and wellness issues they notice in the community, and what barriers are affecting a patient’s ability to be healthy or access healthcare. Over a hundred employees completed surveys, both online and by paper.

Focus Groups

Butler Memorial Hospital hosted focus groups with members of the community, healthcare experts from BMH, and the community health needs assessment team. There were three independent themes consistently brought forward to these focus groups. An additional session and group was assembled comprised of representatives from BMH Behavioral Health units and the Butler City Police Department to identify additional areas of opportunity and collaboration with law enforcement. The purpose of these focus groups was to review both the primary data collected from the survey, the secondary data pulled to evaluate opportunities, as well as to begin generating ideas and relationships for how Butler Memorial Hospital might address the identified issues.

We conducted a focus group meeting centered on substance abuse. In attendance were representatives from BMH case management, BMH Drug and Alcohol Unit, Moniteau School District, The Center for Community Resources, Butler Human Services, and Butler Community Partnership. A consistent message from this group was; that despite the slight decline in opioid overdoses since 2017, substance use disorder remains a significant problem in our community.

It was observed that there has been a decline in overdoses, and resultant overdose deaths. This appears to be a statewide and perhaps nationwide trend. This improvement has been attributed to many factors: including increased access to naloxone (Narcan) as an antidote. The introduction and improved utilization by physicians of the prescription drug-monitoring program (PDMP) has contributed by diminishing access to prescription narcotics. Finally, the improvement in awareness and education of the issue has shed new light and opened opportunities for treatment not previously accessible.

The increased availability of Narcan, and its use by police, fire, EMS and civilians, allows many overdoses to be reversed outside the walls of the hospital. The representatives from BMH drug and alcohol program suggested that even though there is a decline in opioid overdoses and usage, there is growing concern regarding their observations relative to an increase in use of cocaine, crack and methamphetamine currently developing within our community. They also notice there have been continued problems with stigma and patient communication around substance abuse by providers of healthcare within the community. One of the suggested explanations for this is because of the “silos” that exist within healthcare and an opportunity to educate primary locations of healthcare exists within our community. These “silos” can be best addressed with increased collaboration, specifically with the ongoing efforts to unify the electronic health record across the locations of care that comprise Butler Health System. Allowing providers access to information across the continuum of healthcare will benefit efforts towards a consistent message in patient care.

A second focus group discussed mental health in Butler County. Many of the representatives from the substance abuse group also attended the mental health focus group given the frequent commingling of these disorders. In attendance were representatives from BHS Case Management, BMH Drug and Alcohol, Moniteau School District, Butler County Children’s Center, Butler County Human Services, the Center for Community Resources, the Community Health Center and Butler Community Partnership. Many of the members of this focus group brought up the extremely limited access to psychiatrists and other mental health professionals within our county, especially for vulnerable populations like children and Medicaid and Medicare members. Another theme from the meeting was the issue of insurance coverage overall. Issues of lack of coverage and general education on understanding health and mental health benefits was a significant problem identified.

The local community health clinic offers behavioral health services for individuals who are uninsured; their capacity frequently exceeded by the demand. They also see patients on a transitional basis and serve as a bridge back to traditional locations of healthcare. For example, inmates that are released from prison may go to the clinic to continue their medication until they are able to get an appointment with a doctor, which can be upwards of two to three months. This focus group also noted the significant mental health impact that food insecurity may be having,

particularly among adolescents. Access to healthy food is a growing concern for Butler County residents, especially for individuals in Butler City and rural residents. Food insecurity is something that the Butler County Food Council is trying to address through their collaboration with Penn State Extension.

An additional focus group discussed the issues of obesity and related chronic diseases as well as opportunities that require support in augmenting health education. Representatives from Butler County Community Partnership, BHS Endocrinology, BHS Lifestyle Coaching, BHS Case Management, the Community Health Center and Butler County Tourism contributed to this discussion. When discussing obesity, the focus group found it important to acknowledge the issue of food insecurity and lack of access to affordable healthy food. The main food options in Butler City are the Dollar General, local convenience stores, and fast food restaurants, as the primary grocery store within the city limits closed in 2018. The options available at these locations are mostly inexpensive, highly processed, empty-calorie foods; a diet based around these foods is strongly linked to obesity and chronic diseases like diabetes and hypertension. For residents of Butler City, to shop at a store with fresh produce, individuals must have vehicle access or rely on the bus. An additional limitation on those requiring the bus system is that riders are limited to carrying only two bags of groceries on a trip.

In addition to the City of Butler, several other more rural areas in the county are also experiencing food insecurity. The issue of food insecurity is something that the county and other partners are looking to address by exploring opportunities to open a grocery store in downtown Butler. The food bank also does monthly Produce to People distributions, which allows families to receive up to 50 pounds of food, most of which is fresh produce, at no cost to them. Other ongoing efforts to address food insecurity include weekend backpack programs, senior food boxes and free meals, offered every day of the week, throughout the community. In addition to the community programs to address food insecurity, Butler Health System offers ongoing lifestyle-coaching classes throughout the year to address the need for health education in the community. These sessions are free to the public and range in topics including diabetes, weight management, plant-based eating and the Mediterranean diet.

Food Insecurity in Butler County

The Greater Pittsburgh Community Food Bank estimates that 19,280 Butler County Residents are food insecure on a daily basis (<https://www.pittsburghfoodbank.org/learn/hunger-by-county/butler-county/>). The overall rate of food insecurity in the county is 10.4% and the food insecurity rate among children in the county is 16.3%.

The United States Department of Agriculture (USDA) definitions:

- **Food Security:** “households had access, at all times, to enough food for an active, healthy life for all household members.
- **Food Insecure:** “households were uncertain of having, or unable to acquire, enough food to meet the needs of all their member because they had insufficient money or other resources for food.” Includes those with low food security and very low food security

- **Low Food Security:** “households obtained enough food to avoid substantially disrupting their eating patterns or reducing food intake by using a variety of coping strategies, such as eating less varied diets, participating in federal food assistance programs, or getting emergency food from community food pantries.
- **Very Low Food Security:** “normal eating patterns of one or more household members were disrupted and food intake was reduced at times during the year because they had insufficient money or other resources for food.

The following figures of Butler County are from the USDA’s Food Access Research Atlas, which geographically maps food access by census tract. This data was most recently updated in 2015, prior to the closing of many community supermarkets, so these may be an underrepresentation of the problem in Butler County. All graphs can be found at <https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/>

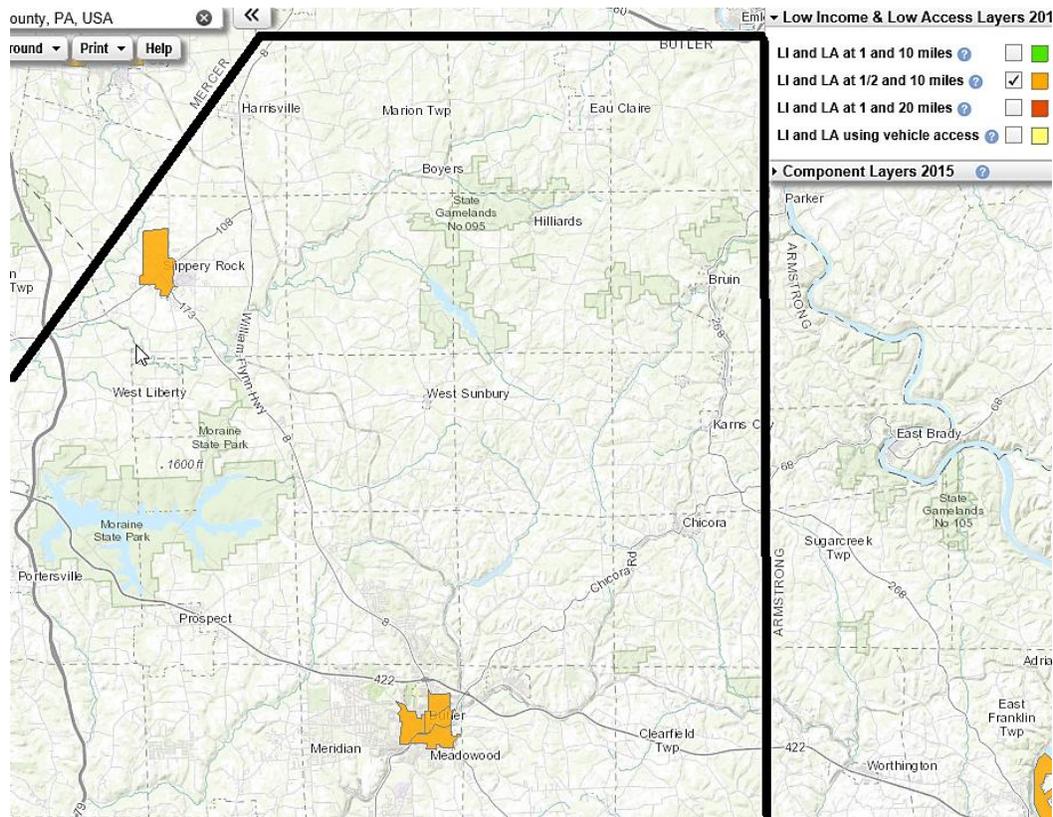


Figure 230: Food Access Research Atlas- LI and LA at 1 and 10 miles

- The orange-shaded areas in the above figure indicates low-income census tracts where a significant number of people are more than 1/2 mile (urban) or 10 miles (rural) from the nearest supermarket.

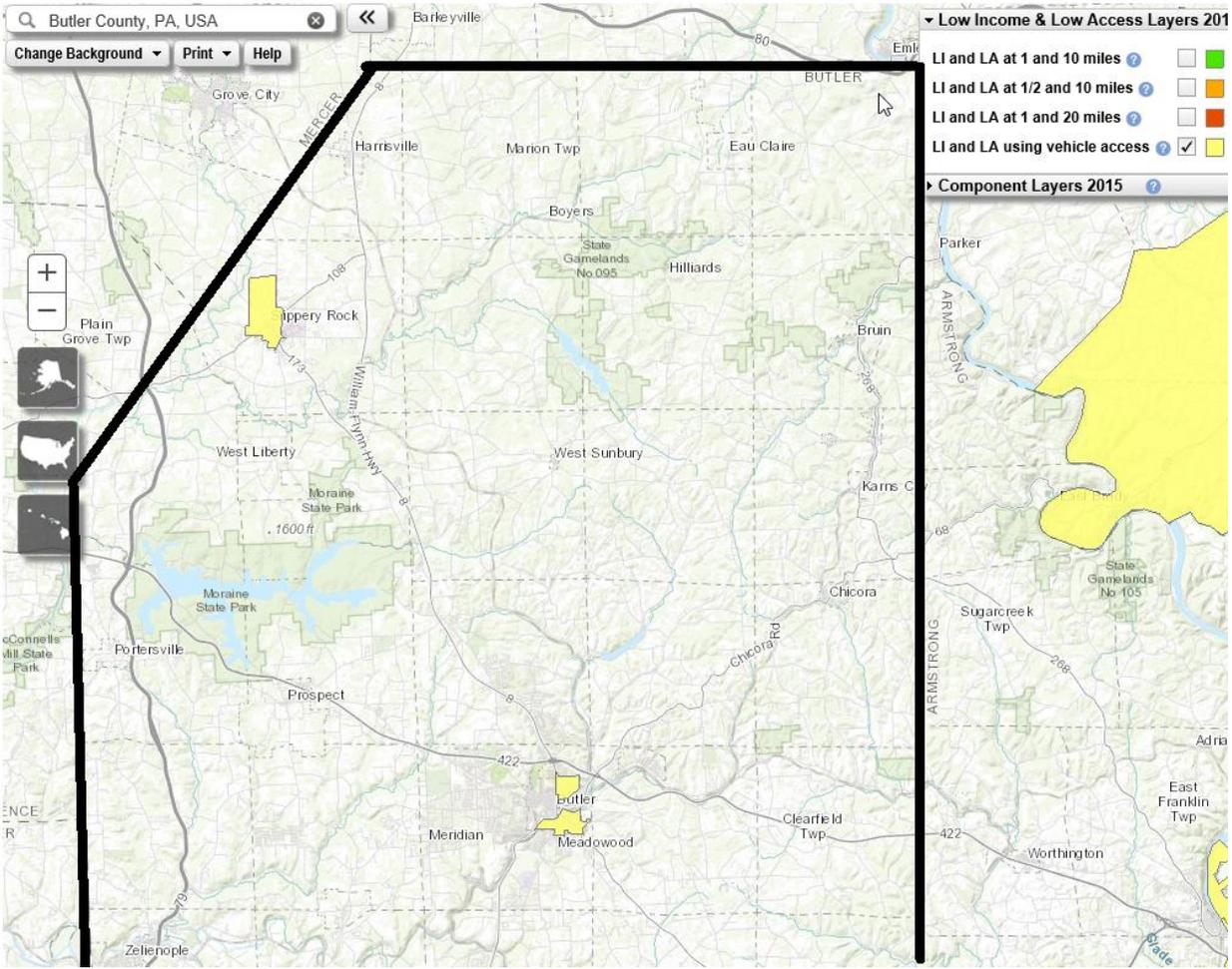


Figure 241: Food Access Research Atlas- LI and LA using vehicle access

- The yellow-shaded areas in this figure show the low-income census tracts where more than 100 housing units do not have a vehicle and are more than ½ mile from the nearest supermarket, or a significant number of people are more than 20 miles from the nearest supermarket.

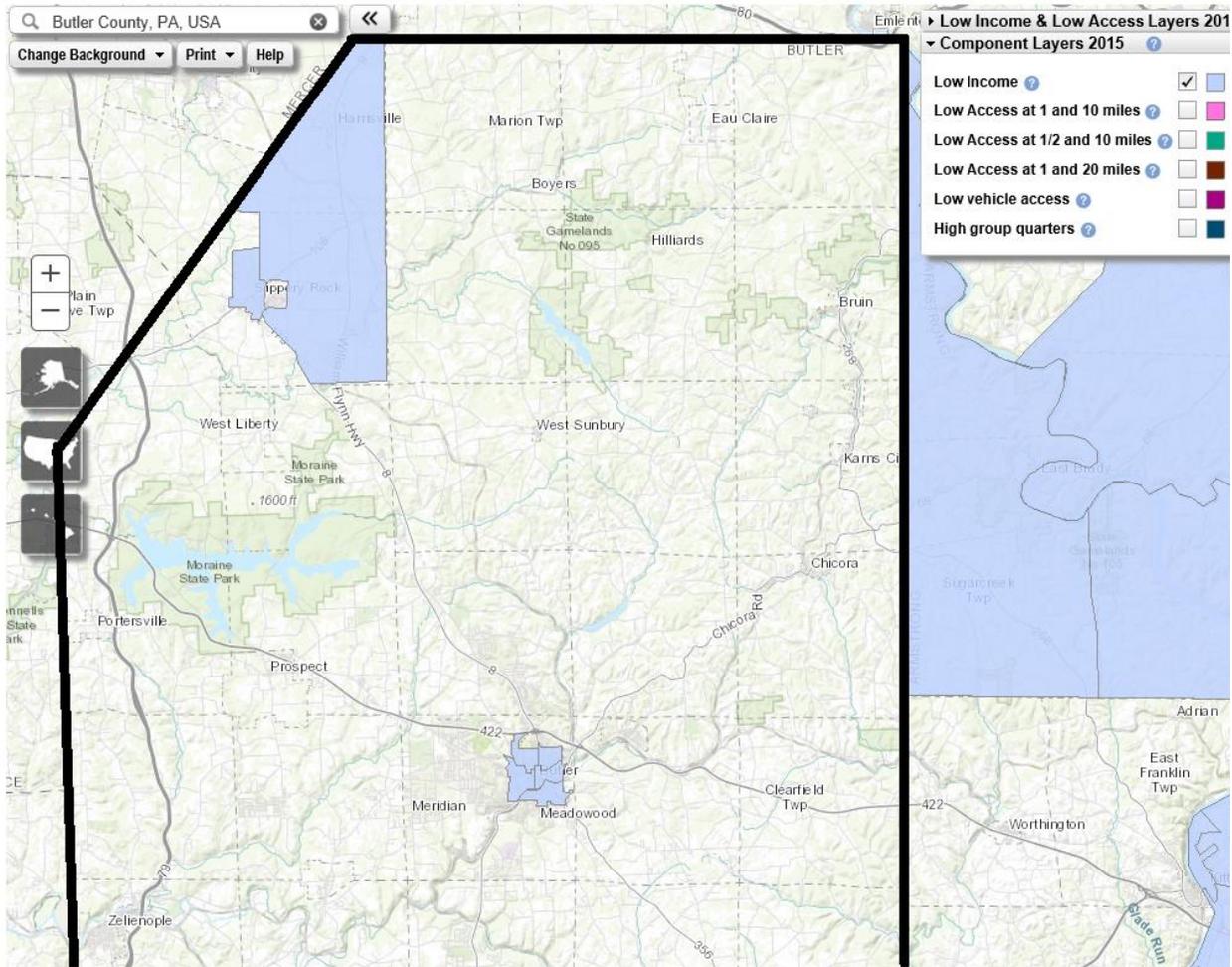


Figure 252: Food Access Research Atlas- Low Income

- The light blue-shaded areas in this figure show census tracts with a poverty rate of 20% or greater, or census tracts with a median family income less than 80% of the median family income for the state or metropolitan area.

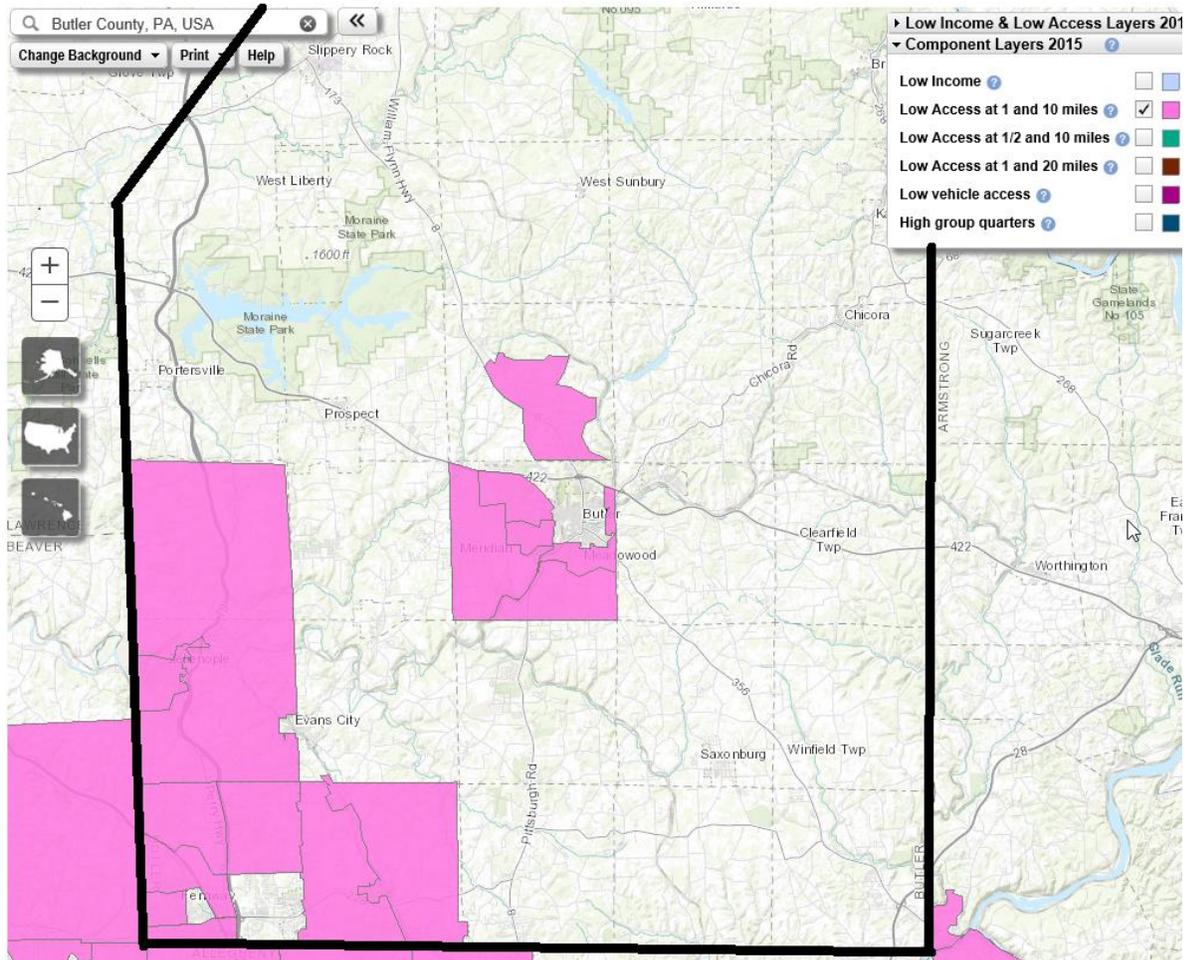


Figure 263: Food Access Research Atlas- Low Access at 1 and 10 miles

- The pink-shaded areas show the census tracts in which at least 500 people or 33% of the population live farther than 1 mile (urban) or 10 miles (rural) from the nearest supermarket.

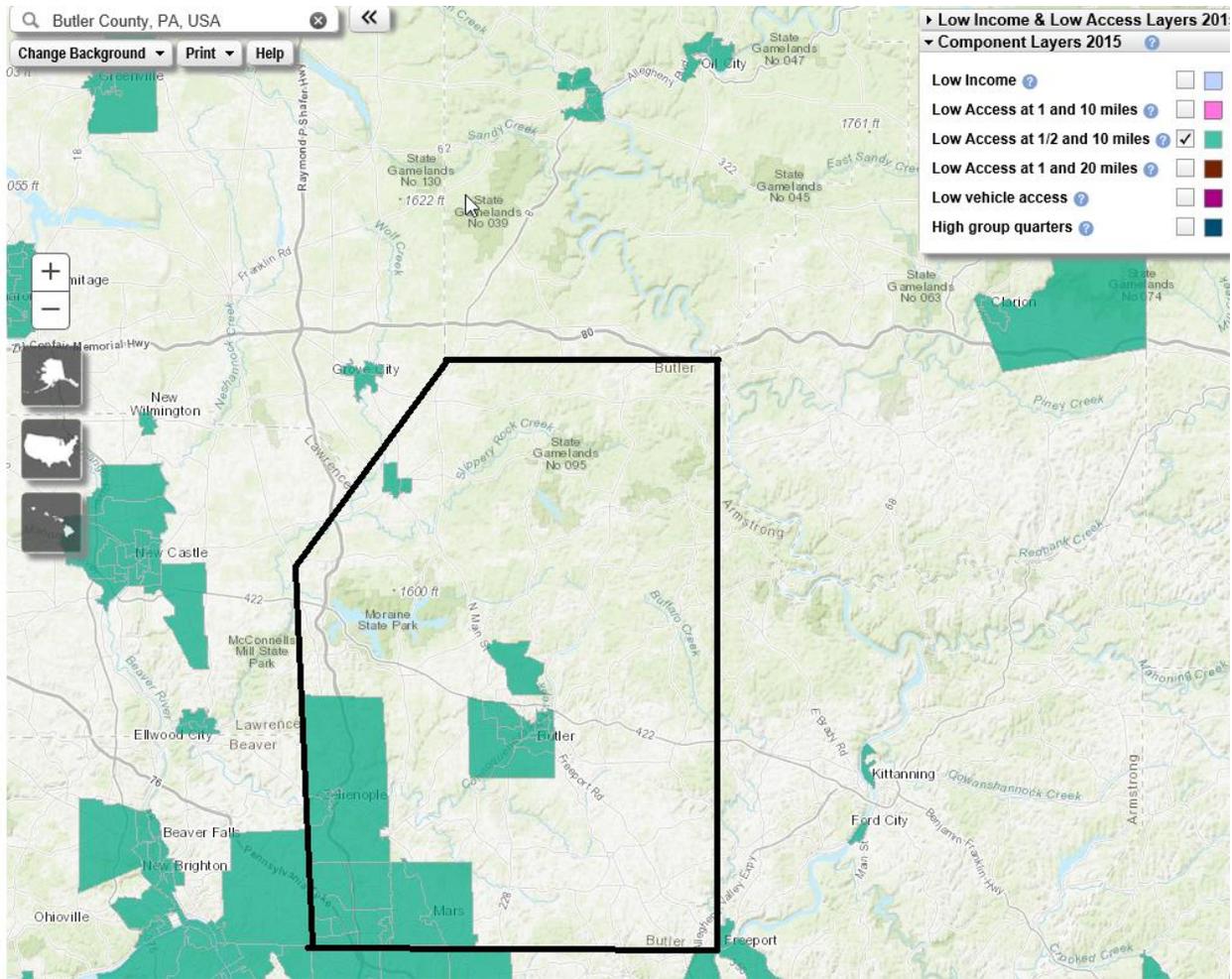


Figure 44: Food Access Research Atlas- Low Access at 1/2 and 10 miles

- The green-shaded areas show census tracts in which at least 500 people or 33% of the population lives farther than 1/2 mile (urban) or 10 miles (rural) from the nearest supermarket

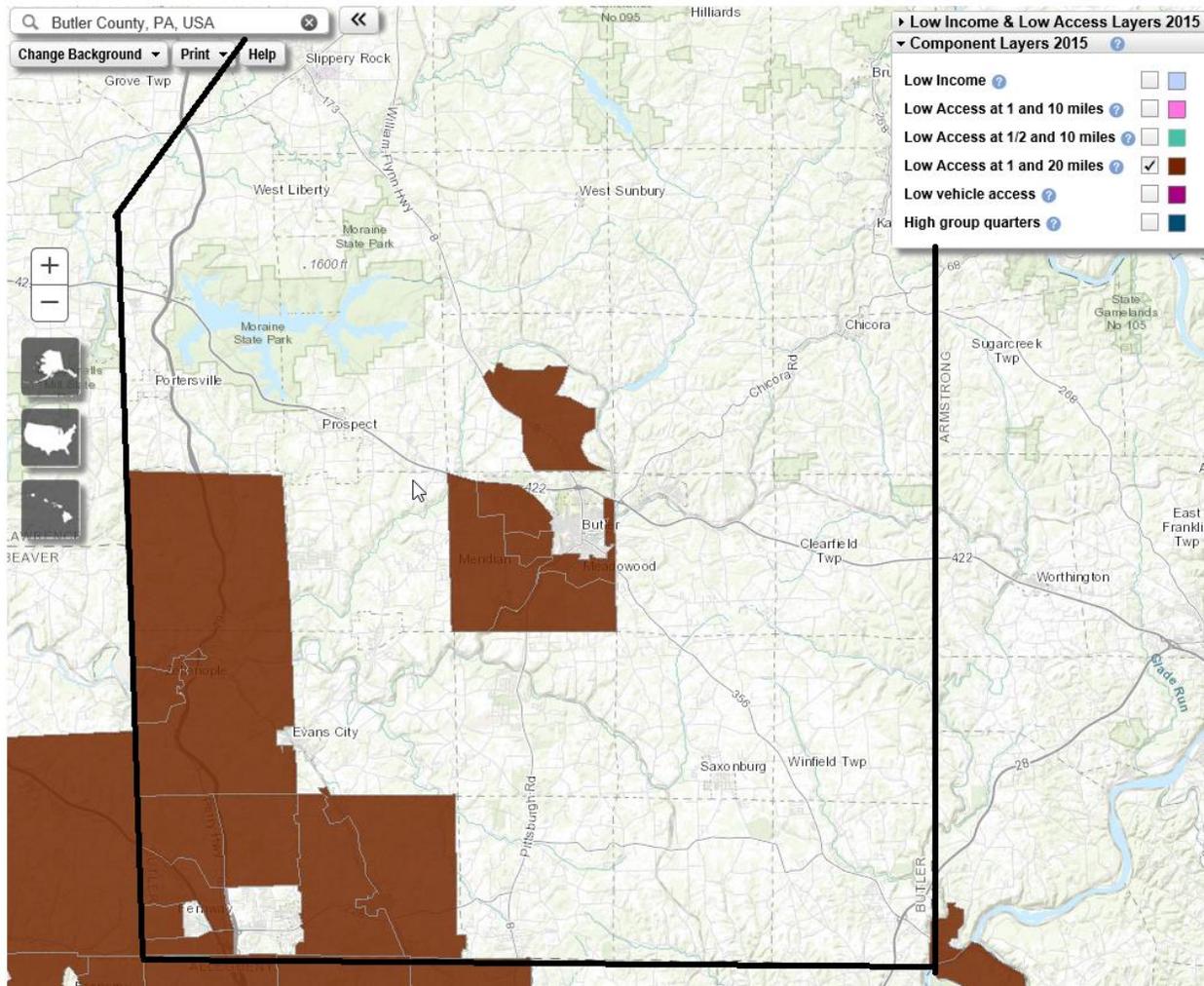


Figure 45: Food Access Research Atlas- Low Access at 1 and 20 miles

- The brown-shaded areas show the census tracts in which at least 500 people or 33% of the population lives farther than 1 mile (urban) or 20 miles (rural) from the nearest supermarket.

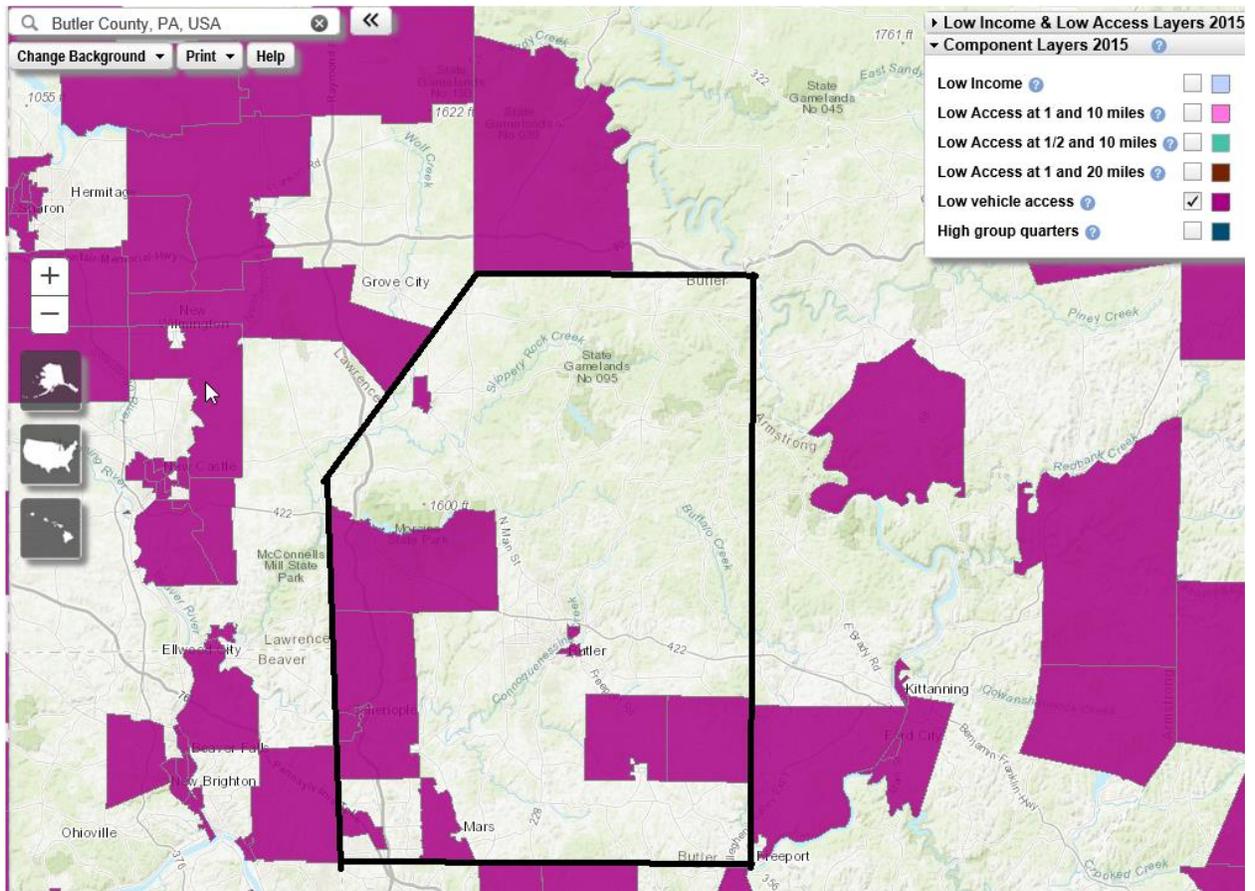


Figure 46: Food Access Research Atlas-Low Vehicle Access

- The purple-shaded areas show census tracts in which more than 100 households have no access to a vehicle and are more than ½ mile from the nearest supermarket.

Implementation Plans

- Health and Wellness Educational Opportunity;
 - Develop and implement educational teams for community support
 - Advance lifestyle medicine initiatives to support community needs
 - Utilize PHO, Population Health Care Managers to connect chronic disease patients with educational opportunities.
 - Grow Educational outreach through partnerships within the community
 - Collaborate with Payer partners to bring healthy initiatives into the community.

- Physician Access
 - Recruit and grow Primary Care Physician network
 - Expand use of Advanced Practice Providers
 - Support team-based care initiatives
 - Grow and Expand BMH Care Center to enhance access to care
 - Implement system wide electronic health record to improve patient to provider communication.
 - Develop Care Plans to support care across the continuum

- Substance Use Disorder Efforts;
 - Support BMH Drug and Alcohol professionals
 - Provide support to access available grants to fund and support initiatives.
 - Continue support of Opioid Center of Excellence
 - Expand community outreach

- Mental and Behavioral Health Support
 - Grow and enhance access to psychiatric health professionals
 - Augment team based group efforts
 - Collaborate to ensure timely, focused, care efforts.

Appendix A

Human Service Guide for Butler County

Compiled by:

Butler Health System for the 2019 Community Health Assessment

Abuse/Protection

Butler Co. Children & Youth	724-284-5156
Childline- 24 hour hotline	800-932-0313
Butler Area Agency on Aging	724-282-3008
VOICe – 24 hour hotline (Victim Outreach Intervention Center)	800-400-8551

Advocacy

The Arc of Butler County	724-282-1500
Community Care Connections	724-283-3198
Lifesteps, Inc	724-285-4819
Mental Health Association	724-287-1965
Disability Rights Pennsylvania or	800-692-7443 412-391-5225
Society of St. Vincent de Paul	724-287-3994

Children/Adolescents

Butler Co. Children's Center	724-287-2761
Butler Co. Children & Youth	724-284-5156
Butler Co. Head Start	724-287-2761
Butler Co. Juvenile Probation	724-284-5355
Child Care Information Services or	724-285-9431 888-864-1654
Community Care Connections	724-283-3198
Family Pathways	724-284-9440
BHS Family Services	724-284-4894
Grace Youth and Family Foundation	724-282-0507
Merakey-Behavioral Health for Children	724-282-2441
Special Kids Network- PA Elks	800-986-4550
WIC of Butler	866-942-2778

Education

Butler Area School District	724-287-8721
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Butler Co. Vo-tech	724-282-0735
Early Intervention	800-692-7288
Education Law Center- Pittsburgh	412-285-2120
Disability Rights Pennsylvania	800-692-7443
BHS Family Services	724-284-4894
Freeport Area School District	724-295-5141
Karns City School District	724-756-2030
Mars Area School District	724-625-1518
Midwestern Intermediate Unit IV	724-458-6700
Moniteau School District	724-637-2091
PA Dept of Education	717-783-6788
PaTTAN -Pittsburgh	800-446-5607
Seneca Valley School District	724-452-6040
Slippery Rock Area School District	724-794-2960
St. Stephen's Academy	800-371-0545

Elderly

Butler Area Agency on Aging	724-282-3008
BHS Transitional Care Facility	724-284-4307
Community Health Clinic	724-841-0980
Lifesteps Adult Day Services	724-283-1010
LIFE Butler County	724-287-5433
Lutheran SeniorLife	724-776-1100
Meals on Wheels-Butler Co.	724-285-3815
VNA, Western Pennsylvania	724-282-6806

Emergency

24 Hour Response	911
Center for Community Resources	724-431-3700
Crisis Hotline	800-292-3866
Poison Control	800-222-1222
Suicide Prevention Lifeline	800-273-8255
VOICe – 24 hour hotline (Victim Outreach Intervention Center)	800-400-8551
Veterans Crisis Line	800-273-8255
Warmline (6pm-9pm)	724-431-2488

Evaluation/Assessment

Blind Association of Butler County	724-287-4059
Butler Co. Drug/Alcohol Program	724-24-5114
Butler Health System	724-283-6666
Center for Community Resources	724-431-3700
Children's North	412-692-7337
BHS Family Services	724-284-4894

Glade Run Lutheran Services	800-371-0545
The CARE Center- SPHS	724-234-1370
Lifesteps(Speech, language & hearing)	724-283-1010
Midwestern Intermediate Unit IV	724-458-6700
Vocational Rehabilitation Services	724-656-3070 or 800-442-6351

Health

Amedisys Home Health	724-284-4663
Adagio Health	724-282-2730
Butler Heath System	724-283-6666
BHS Maternal Services	724-284-4867
Community Health Clinic	724-841-0980
Concordia Visiting Nurses	724-352-1571
Red Cross of West Central PA	724-283-2810
VNA, Western Pennsylvania	724-282-6806
WIC of Butler	866-942-2778

Housing/Homeless

Catholic Charities	724-287-4011
Housing Authority/ Deshon Place & Franklin Court	724-287-6797
Center for Community Resources or	724-431-0095 844-360-4372
Lighthouse Foundation	724-586-5554
Salvation Army Butler County	724-287-5532
Society of St. Vincent de Paul	724-287-3994

Information/Referral

Center for Community Resources	724-431-0095
BHS Family Services	724-284-4894
Mental Health Association	724-287-1965
Social Security Administration	800-772-1213
Society of St. Vincent de Paul	724-287-3994
United Way of Butler County	724-285-4883
Weatherization	724-342-6222

Legal Services

Disability Rights Pennsylvania	800-692-7443 or 412-391-5225
District Attorney of Butler County	724-284-5222
Family Court	724-284-5181
Education Law Center- Pittsburgh	412-285-2120
Juvenile Court Services	724-284-5355
Neighborhood Legal Services	724-282-3888 or 866-761-6572
PA Bar Association- Western PA	412-914-8840

PA Health Law Project 800-274-3258
Butler Co. Public Defender's Office 724-284-5335
Butler County Victim Services 724-284-5232

Mental Health Services

Butler County MH/DA 724-284-5114
The CARE Center- SPHS 724-234-1370
Center for Community Resources 724-431-009 or 844-360-4372
Glade Run 724-452-4453
Kids Count Family Psychological 724-287-1880 or 724-284-0076
Mental Health Association 724-287-1965
PBS Mental Health Associates 724-282-1627
Butler VA Mental Health 800-362-8262
Vocational & Psychological Services 724-287-5604
Wellness Works Counseling 724-282-0332

Psychiatric Hospital Services Adult

Butler Health System 724-284-4266
Butler Health System 724-284-4321
Torrance State Hospital 866-816-9212
Butler VA Mental Health 800-362-8262

Psychiatric Hospital Svs Children/ Adolescents

Armstrong County Memorial Hospital 724-543-8437
Clarion Psychiatric Center 800-253-4906
Southwood Psychiatric Hospital 844-853-1527
UPMC Western Psychiatric 412-624-1000

Recreation

Boy Scouts Moraine Trail Council 724-287-6791
Butler County YMCA 724-287-4733
Butler County Parks and Recreation 724-284-5383
Community Care Connections 724-283-3198
Girl Scouts Western Pennsylvania 800-248-3355
MHA Compeers 724-287-1965
Grace Youth and Family Foundation 724-282-0507

Residential/Adults

ARC Butler County 724-282-1500
The Care Center-Housing Support 724-285-3200
The Care Center-Long Term Residence 724-283-7083
Catholic Charities 724-287-4011
Center for Community Resources 844-360-4372
Community Care Connections 724-283-3198

Deshon Place & Franklin Court	724-287-6797
Ellen O'Brien Gaiser Addiction Center	724-287-8205
Lifesteps	724-283-1010
Lighthouse Foundation	724-586-5554
Merakey Allegheny Valley School	412-299-7777
Sunnyview Home	724-282-1684

Residential/ Children

Butler County Children and Youth	724-284-5156
Community Care Connections	724-283-3198
Glade Run Lutheran Services	724-452-4453
Kids Count Family Psychological	724-543-1888
MHY Family Services	724-625-3141

Special Services

American Cancer Society	800-227-2345
American Heart Association	412-208-3550
Arthritis Foundation- Western PA	412-250-3345
Blind Association of Butler County	724-287-4059
Butler County Assistance Office	724-284-8844
Catholic Charities	724-287-4011
Community Action and Development	724-284-5125
Crisis Hotline	800-292-3866
Lifeline Pregnancy Support	724-282-1200
Lighthouse	724-586-5554
March of Dimes	888-663-4637
Meals on Wheels-Butler Co.	724-285-3815
Red Cross-Butler Co.	724-283-2810
Representative Payees (MHA)	724-287-3380
Salvation Army of Butler County	724-287-5532
Society of St. Vincent de Paul	724-287-3994
Suit Yourself	724-287-4871 Ext. 4018
Warmline (6pm-9pm)	724-431-2488

Substance Abuse Support

Butler County AA	724-679-5647
Butler County Drug & Alcohol	724-284-5114
Butler Regional Recovery Program	724-284-4357
Butler Alcohol Countermeasures	724-287-8952
Crisis Hotline	800-292-3866
Ellen O'Brien Gaiser Addiction Center	724-287-8205
Grace Youth and Family Foundation	724-282-0507
Butler Family Support	724-284-4016
Reality Tour- Candle inc	724-679-1788

Seeds of Hope 724-283-6160

Transportation

Butler Area Rural Transit 724-282-6060

Butler Area Transit Authority 724-283-0445

Medical Assistance Transport Program 724-431-3692

Vocational Services

PA CareerLink- Butler County 724-431-4000

Career Opportunities for the Disabled 724-431-4060

Career TRACK-Butler County 724-431-4040

Vocational Rehabilitation Services 800-442-6379 or 866-412-4072

Skilled Nursing Facilities

Amedisys Home Health 724-284-4663

Amedisys Hospice Care 724-431-4170

Lutheran Senior Life- Zelienople 724-452-5400

Lutheran Senior Life- Mars 724-625-1571

Quality Life Services- Chicora 724-445-2000

Quality Life Services- Sarver 724-353-1531

Transitions Healthcare- Harrisville 724-735-4224