

Geisinger

Geisinger Wyoming Valley Medical Center

Community Health Needs Assessment



Dear friends,

Listening is an important component in delivering effective healthcare. At Geisinger, we listen not only when our patients talk with us about their individual health histories and symptoms, but also when our community shares information regarding areas in need of improvement so we all can become healthier and happier. To that end, we work cooperatively with other organizations to conduct community health needs assessments. Based on the feedback provided — whether it is the need for increased access to medical services or educational programming — we take action to make things better.

This is not simply the right thing to do. It is also who we are and what we are all about. And as we begin our second century of service at Geisinger, we remain committed to our patient care, education, research and community service mission.

We are pleased to share our latest Community Health Needs Assessment brochure, and hope you will take the time to review it. You can also visit geisinger.org/chna to learn more about Geisinger's ongoing efforts to enhance the health and well-being of the communities we serve.

Thank you for your interest.

Take care,

David Feinberg, MD
President and Chief Executive Officer

Compassionate caring. That's our commitment to you when you come to Geisinger Wyoming Valley Medical Center and South Wilkes-Barre for care. Our physicians' and practitioners' dedication to serving the community and providing care to all in need has never been stronger.

Geisinger's well-being is closely tied to the health of the community, which is why we seek to understand and respond to identified community health needs. Our role is to be good corporate citizens and work with the community to tackle the most critical health and social problems. We are invested in community partnerships, job creation and support for local governments.

Geisinger's community support also includes the provision of free, uncompensated care to patients who cannot afford to pay; care to the elderly and poor not paid by Medicare or Medicaid; allied health, medical residency and fellowship educational programs to train physicians and other healthcare professionals; healthcare research; and community health, education and outreach programs.

As you read more about Geisinger's response to the community health needs assessment, we welcome your ideas regarding how we can better serve you, your family, your friends and your neighbors.

Be in good health,

Gerald Maloney, DO
Chief Medical Officer

Ronald R. Beer, MHA
Chief Administrative Officer



You talked and we listened

Providing the best possible healthcare means understanding the needs of the people that Geisinger Health System (GHS) serves. It means caring about what their everyday lives are like. It means communicating with them to assess what they think about the services and programs we provide. Finally, it means identifying barriers to how they access and use the comprehensive healthcare resources that GHS offers.

That's why Geisinger Health System collaborated with outside organizations across a 13-county region to contract Tripp Umbach, a private healthcare consulting firm and nationally recognized leader in health needs assessments. They assisted us in conducting our Community Health Needs Assessments.

Between October 2014 and March 2015, information was gathered from key community stakeholders using a variety of methodologies, including interviews, hand-distributed surveys and analysis of secondary data. The information we collected indicated three distinct areas on which to focus:

- Addressing needs related to behavioral health and substance abuse
- Increasing access to/affordability of healthcare
- Reducing the negative impact of lifestyle choices on health

In terms of behavioral health, the study indicated that

there are not enough providers to meet demand. Where care is available, providers are often fragmented, with better coordination needed between primary care providers, behavioral health specialists and substance abuse counselors. Too strong a reliance on pharmacology was also cited as an issue when it came to care.

Residents, many of whom live in rural areas, complained of problems finding transportation to appointments. Some were resistant to seeking care for behavioral health concerns due to cost and perceived social stigma. This combination of factors led to higher-than-average rates of issues with anxiety, depression and bipolar disorders. Suicides and relapses into substance abuse were also of serious concern.

Increasing access to healthcare was determined to be the second-greatest need in our community. In addition to problems with transportation, residents cited not enough local providers, lengthy waits for service and problems having insurance plans accepted. Cost of care is a major concern for many. Uninsured care can be unaffordable, and even moderate income earners cannot always afford health insurance.

Poverty is an issue for many in our community — and unfortunately, it is often an indicator of poor health status. Our studies indicated that other social determinants, such as cultural and religious affiliations, also provide barriers to care. In many cases, people are simply unaware of the health services that are available.

The third-largest need we discovered was for finding



means of reducing the impact of questionable lifestyle choices on health. Smoking, lack of exercise, substance abuse and bad eating habits all contribute to poor health and can lead to chronic conditions such as diabetes, obesity, cancer, heart disease and respiratory problems. According to our study, every county in the region, with the exception of Schuylkill, showed significantly lower rates of physical activity than those reported for the state, and rates for smoking are high throughout the region. Meanwhile, there has been an increase in the rates of lifestyle-related illnesses since 2012.

So now that we've learned so much about the communities we serve, what do we do next? Create solutions that will enable us to serve them better. In the words of Geisinger Health System CEO Dr. David Feinberg, "I want us to exceed every patient's and family's expectations."

This brochure presents a sampling of programs developed to address the needs of the communities we serve. Some of them are new, but many of them were already in existence. Some may be improved or expanded based on the new data. The brochure also details additional programs put in place at Geisinger facilities throughout central and northeast Pennsylvania to address needs that are specific to those locations.

You talked. We listened. Now let us show you how we plan to care for you and your loved ones — not only when you are a patient, but every day.

An innovative approach to caring for the aging brain

"Our consciousness, our personality — everything that give us value as a person is dependent on the functions of the brain," says Glen R. Finney, MD, director of the Geisinger Aging Brain & Behavioral Neurology Institute. "However, with age comes greater risk of cognitive diseases, which rob us of our very selves."

Dr. Finney is spearheading a program dedicated to the prevention, detection and stabilization of brain diseases such as Alzheimer's and vascular dementia. The program will involve creating numerous centers of excellence dedicated to caring for the aging brain. The first, in Wilkes-Barre, should be complete by the end of 2016. The center will be a hub for interdisciplinary specialties, including behavioral neurology, neuropsychology, neuropsychiatry and many types of therapy. "There will also be an important pharmacological component," Dr. Finney says. "Too often, elderly patients are taking medications that have cognitive side effects. Our pharmacists, trained and

certified in medication therapy management, will wean them off these prescriptions and develop new regimens, if necessary. Often, with this approach, symptoms disappear."

Participants will be screened for depression and will be given driving tests to ensure that they are not a danger to themselves or to others. "Another important aspect of the program is education," says Dr. Finney. "Neurologists' offices are full of patients who have fallen victim to what I call the 'four horsemen of the neurological apocalypse': high blood pressure, high cholesterol, diabetes and smoking. Learning to make better lifestyle choices early in life can lead to a healthier brain later on."

Patients who do not live near an Aging Brain center of excellence can benefit from telemedicine. "Each center will be outfitted with the latest in technology, including secure teleconferencing capabilities — something we're already putting to use throughout the Geisinger system," says Dr. Finney.

The final stage of geriatric care involves end-of-life planning. Specialists at the Aging Brain centers will work with families to help keep loved ones at home with the help of hospice, when possible. This, according to Dr. Finney, is the most dignified solution.

"Geisinger Health System is in the position to merge traditional behavioral neurology with modern informatics such as genomics and the electronic health record," he says. "Over time, this will revolutionize the way we care for the aging brain."

Finding better ways to communicate with our patients

"The Community Health Needs Assessments determined that better access to health services is an important need in all communities we serve," says Rebecca Ruckno, director of Patient Experience for Geisinger Health System. "When it comes to access, many factors are involved, including issues with insurance and challenges finding transportation. But in some cases, the problem boils down to patients not being able to communicate effectively with healthcare providers."

Ms. Ruckno points out that there can be many reasons for miscommunication. Some patients do not speak English, others cannot read it well even though they are native speakers and some are sight-challenged.

"Health literacy is something we've been addressing for a while," says Diane Harlow, director of Geisinger Wellness. "At the moment, we're working to formalize a cohesive, structured approach to enhancing health literacy that can be replicated throughout our system — and elsewhere."

For foreign-language-speaking patients, Geisinger has implemented an online system called Stratus Video Interpretation, which uses technology to connect healthcare providers with interpreters in over 175 spoken and signed languages. "Stratus is an application that we've loaded onto tablets," explains Ms. Ruckno. "It's available 24/7, on demand."

Ruckno and Harlow say they're also developing a training program for employees to help them communicate more effectively with patients. "For most people, coming to the hospital is very stressful," says Ms. Ruckno. "We're teaching staff members to take emotional states into consideration and [to] ask questions to make sure patients understand the information they're being given."

New strategies are also being discussed to help make patients' needs more obvious. "We've talked about having a patient's preferred language appear on the first page of his or her electronic medical record," says Ms. Harlow. She adds that if a patient is sight- or hearing-impaired, that should come up, too. "The more we do to facilitate and optimize patient experience, the better," Ms. Harlow says.

Helping patients dispose of old medications safely

Cleaning out your medicine cabinet is a way of protecting your loved ones from harm. Unused and expired prescriptions may end up in the hands of young children or get abused by teenagers looking for a quick high.

But flushing them down the toilet or throwing them in the trash sends them to local waterways and landfills, where they can harm the environment.

Luckily, Geisinger has a solution. MedSafe and MedReturn collection bins are in place or being installed at many Geisinger locations for safe, eco-friendly disposal of all unused and expired medications. The program, which has collected more than 4,000 lbs. of expired and unused prescriptions over the past 4 years, is entirely free of charge.

"More than 440 million prescription drugs are improperly disposed of each year," says John Jones, RPh, vice president of Enterprise Pharmacy at Geisinger. "We want to make it as easy as possible for people to dispose of their unwanted medications responsibly."

MedSafe units are available Monday through Saturday during normal pharmacy hours on the Geisinger Medical Center campus. They will soon be installed at the Geisinger Clinic in Dallas and a second MedReturn location is planned for Wilkes-Barre.

Integrating substance abuse counselors into primary care

With substance abuse and behavioral health issues topping the list of needs to be addressed, finding a way to reach more people is key. That's the idea behind the Geisinger Marworth outreach program, which integrates addiction treatment counselors into primary care settings.

Michelle Kwiec, LSW, sees patients at five Geisinger locations weekly. These include the urban Mt. Pleasant Clinic in Scranton and the more rural Geisinger Tunkhannock. She also visits the Kistler Clinic in Wilkes-Barre, Geisinger Mt. Pocono and the Woodbine Interventional Pain clinic in Danville.

As a counselor at Geisinger's Marworth Alcohol and Chemical Dependency Treatment Center for 11 years before starting the outreach program, Ms. Kwiec recognizes the signs of substance abuse. "I see many patients who are taking high doses of opioids to deal with chronic pain," she says. "It's hard for their regular doctors to know if these patients are misusing or abusing their medications without specialty training in addiction or pain medicine. Those patients get referred to me."

Ms. Kwiec also sees a lot of patients who are addicted to alcohol and/or drugs. "Sometimes there's a stigma involved with seeking help for problems like these," she says. When Ms. Kwiec sees people in a doctor's office, they are more



receptive to treatment. She can also assess whether they may have other forms of mental illness.

The program has been growing steadily each year. During fiscal year 2014–2015, 47 patients were referred for inpatient addiction treatment, 102 for outpatient addiction treatment, 152 to 12-step programs, 2 for inpatient mental health treatment, 52 for outpatient mental health treatment and 187 to pain medication management therapy. “We’ve helped a lot of people, but there’s still a great need for behavioral health care — particularly in psychiatric services — within our service area, and there’s still much work to be done,” says Ms. Kwiec.

Looking ahead, Ms. Kwiec says she sees potential to develop better treatment options for chronic pain sufferers. “Pain control needs to include physical, behavioral and psychological interventions. And with Geisinger and Marworth, we have an integrated health system poised to create comprehensive, interdisciplinary programs.”

Program has paramedics make non-emergency house calls

“The Mobile Health Paramedic Program lets patients who meet certain criteria get the care they need right in their homes,” says David J. Schoenwetter, DO, medical director for Geisinger EMS and Geisinger Life Flight, who heads up the program. “The program prevented 42 hospital admissions and 33 trips to the Emergency Department during its 14-month pilot phase alone.”

The program was developed to meet the needs of the elderly, patients with complex medical issues and those with heart problems. “These are the groups who most frequently sought care in the Emergency Department,” explains Kathleen Sharp, CPC, senior performance innovation consultant. “It was hard on them and on staff dealing with other emergencies.”

Paramedics visiting patients’ homes check vital signs, perform blood work and give IV diuretics. If hospitalization is needed, they give detailed reports to ambulance crews and Emergency Department staff. “Once we get to know a person, we can tell immediately if he or she is in trouble,” says Roni Koval, a responder with the program. “That’s one of the benefits of seeing the same people over and over again. We know what’s normal for them.”

Under the supervision of a physician, the paramedics can offer a higher level of care than traditional home care nurses can. If a doctor wishes to see a patient, mobile videoconferencing technology makes live conversations possible.

Patient response has been very positive, with near-perfect satisfaction scores on surveys. “It was very convenient to have them come to my home,” says Wayne Hiller of Scranton, who had congestive heart failure. “They were very professional. It was a good experience and I got good results from it.”

Marjorie Dominick, a heart-failure patient from Pocono Lake, was also impressed with the program. “I’d been in and out of hospitals so much with everything over the years. This was a godsend,” she says.

The Mobile Health Paramedic Program has won national awards, including the 2015 Emergency Care Innovation of the Year Award. “Being honored — and by unanimous vote, no less — is further justification that Geisinger has created a new and improved way to care for patients, at the right time and in the right setting,” says Dr. Schoenwetter.

Get Fresh Markets make it easy to eat healthy

Good nutrition can have a tremendous impact on health and well-being. But it can be a challenge to fit in shopping and learning how to cook new options that are good for you and taste good, too. With so many in our community suffering from chronic health conditions such as diabetes, high blood pressure and heart disease, we feel it’s our mission to not only educate people on the subject of better lifestyle choices, but to also make those choices easy — and fun.

Our Get Fresh Markets do just that.

“Get Fresh Markets is a partnership between Foodservices, Clinical Nutrition, the Sustainability Program and Geisinger Wellness,” explains Diane Harlow, director of Geisinger Wellness. “The markets are held throughout the summer and feature seasonal and, when available, locally grown produce. There are cooking demonstrations, recipe cards and tips for recycling.”

At each market, Foodservice highlights a different type of produce in their daily menus. Customers are taught how to prepare and store the featured item, and nutrition information sheets are distributed. “The team also comes up with a minimum of six recipes using the featured produce,” says Ms. Harlow. “That way, if someone in the family doesn’t like one option, there are other possibilities.”

According to Ms. Harlow, many visitors bring their children and grandchildren to the Get Fresh Markets. “The more people we can get involved, the better. It’s all about supporting a culture of health and wellness,” she says.



It’s such an old idea
it almost seems brand new.

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Geisinger Wyoming Valley Medical Center

1000 East Mountain Blvd.

Wilkes-Barre, PA

570-808-7300

geisinger.org