

Allegheny Health Network



**Saint Vincent**  
Hospital

# COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION STRATEGY PLAN

March 2019





Allegheny Health Network

# Saint Vincent Hospital

## COMMUNITY HEALTH NEEDS ASSESSMENT IMPLEMENTATION STRATEGY PLAN

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## Our Mission

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

## Our Vision

A world where everyone embraces health.

## Our Values

### People Matter

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

### Stewardship

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

### Trust

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

### Integrity

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

### Customer-focused Collaboration

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

### Courage

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

### Innovation

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

### Excellence

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



## INTRODUCTION

Founded by the Sisters of St. Joseph in 1875, Saint Vincent is the Erie area's first hospital. Since then, Saint Vincent has evolved into an integrated healthcare provider, spread across the northwestern Pennsylvania region. Saint Vincent continues to remain a leader in cardiac, neurological and women's services and continues to offer patients several options in primary care and specialty physicians.

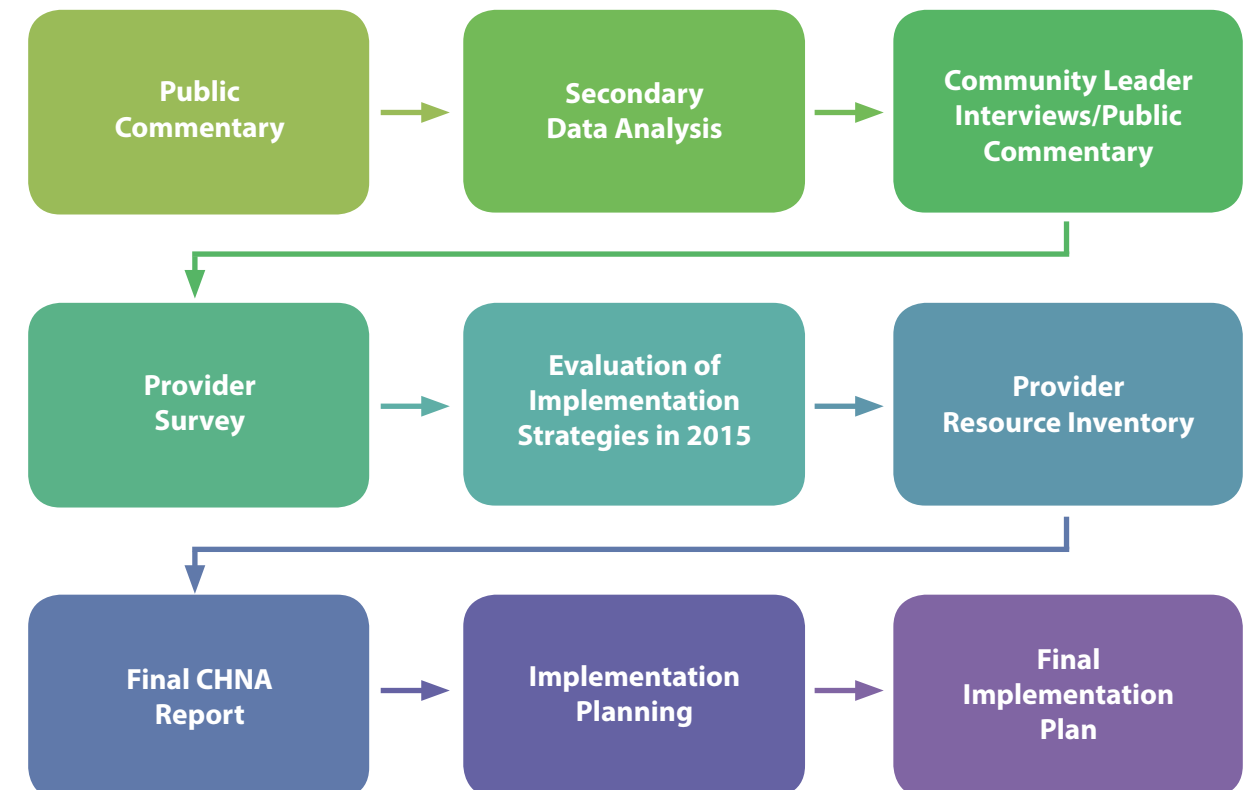
As an AHN member hospital, St. Vincent is committed to continuously improving access to the highest quality care and building upon the tradition of medical excellence. This commitment to the patient experience is demonstrated by the enhancements to the surgical and emergency suites which highlight Saint Vincent's expertise in leading-edge technology. Construction also continues on the 36,474 square-foot Cancer Center that will transform oncology care

and improve access to leading-edge treatments, technologies, and clinical trials for the region.

In 2018, AHN joined together with Tripp Umbach to conduct a comprehensive community health needs assessment and implementation strategy plan for the St. Vincent Hospital service area of Crawford, Erie, and Warren counties.

The CHNA Implementation Strategy Plan process included input from persons who represent the broad interests of the community served by St. Vincent Hospital, including those with special knowledge of public health issues and representatives of vulnerable populations served by the hospital. The overall CHNA involved multiple steps that are depicted in the below flow chart.

GRAPH 1: PROCESS CHART



# IMPLEMENTATION STRATEGIES

The results of the CHNA identified the following as the priorities for the community:



The CHNA and implementation strategy plan meets the requirements of the Patient Protection and Affordable Care Act. The act has changed how individuals are obtaining care and promotes reduced healthcare costs, greater care coordination, and better care and services. Healthcare organizations and systems are striving to improve the health of the community they serve through collaboration with local, state and national partners.

The requirements imposed by the IRS for tax-exempt hospitals and health systems must include the following:

- ◆ Conduct a CHNA every three years.
- ◆ Adopt an implementation strategy to meet the community health needs identified through the assessment.
- ◆ Report how it is addressing the needs identified in the CHNA and a description of needs that are not being addressed, with the reasons why.

Tripp Umbach worked with the St. Vincent staff to complete the community health needs assessment and it was adopted by the board of directors in December 2018. This implementation strategy outlines the needs identified in the CHNA and documents how St. Vincent hospital will be addressing the needs over the next three years. All needs identified in the CHNA will be addressed by St. Vincent Hospital.



# HEALTH PRIORITY ACCESS TO CARE

Approximately 1 in 5 Americans (children and adults under age 65) do not have medical insurance.<sup>1</sup> People without medical insurance are more likely to lack a usual source of medical care, such as a PCP, and are more likely to skip routine medical care due to costs, increasing their risk for serious and disabling health conditions. When they do access health services, they are often burdened with large medical bills and out-of-pocket expenses.

Access to primary health care is perhaps the most important segment of the care continuum. The ability for an individual to access health care is key to having a healthy life. Typically, access to care refers to the opportunity (and ease) in which people can obtain health care, but it can also refer to having or utilizing health care coverage. Disparities in health service access can significantly affect an individual's and a community's quality of life in a negative way. A lack of available health resources, the high cost of services, and being uninsured can serve as some of the top barriers to accessing health care services.

## COMMUNITY NEED Access to Primary Care

Primary care providers (PCPs) play an important role in protecting the health and safety of the communities they serve. PCPs can develop meaningful and sustained relationships with patients and provide integrated services while practicing in the context of family and community. Having a usual PCP is associated with:

- ◆ Greater patient trust in the provider.
- ◆ Good patient-provider communication.
- ◆ Increased likelihood that patients will receive appropriate care.

While PA scores fairly well at access and affordability (15th best in the country), access to Primary Care Physicians is a priority in the Saint Vincent Hospital service area. Crawford, Erie and Warren counties fall below the state average for the number of PCPs per 100,000 with Warren County having the fewest PCPs per 100,000.<sup>2</sup>

Further, portions of Erie and Crawford Counties are designated in health professional shortage area (HPSA), while all of Warren County is designated as health professional shortage area.<sup>3</sup> This indicator is relevant because access to regular primary care is important to preventing major health issues and emergency department visits. Access to clinical preventive services in must address logistic factors such as adequate transportation to help patients access the care they need. Addressing this social determinant is a major key in reducing health disparities and improving the health of all Americans.

The results of the CHNA show that a barrier to accessing primary care services is the lack of affiliation, or attribution, between patients and an appropriate PCP. In other words, patients do not have an assigned PCP, therefore, it is less likely that patients will receive the right care in the right place at the right time. The following strategies will be implemented by St. Vincent Hospital in order to increase the number of patients attributed to a PCP.

## GOAL

Connect unattributed patients to a Primary Care Provider (PCP).

## IMPACT

(1) Increased number of patients assigned to a PCP; (2) increased number of new patient visits in PCP offices; (3) increased number of online scheduled visits; and (4) increased number of same day appointments.

## STRATEGIES AND ACTION STEPS ACCESS TO PRIMARY CARE

Strategies	Action Steps	Measure	Impact
1. Identify and educate patients that do not have a PCP.	<ul style="list-style-type: none"> <li>• Identify unattributed patients through scheduling tool.</li> <li>• Identify unattributed patients through biometric screening process.</li> <li>• Create handoff to call center.</li> <li>• Partner with local businesses to promote PCP engagement.</li> <li>• Utilize Meet Dr. Right events.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of patients connected to a PCP.</li> <li>• Number of participants at community events.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase in number of patients assigned to a PCP.</li> </ul>
2. Increase the number of new primary care patient visits.	<ul style="list-style-type: none"> <li>• Partner with Clinical Access Team.</li> <li>• Implement centralized scheduling.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of new patient visits.</li> <li>• Number of online scheduled calls.</li> <li>• Number of same day appointments.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase access to PCP.</li> <li>• Number of new patients.</li> </ul>
3. Increase number of scheduled PCP appointments.	<ul style="list-style-type: none"> <li>• Partner with Clinical Access Team.</li> <li>• Implement online scheduling.</li> <li>• Increase # of same day slots offered.</li> <li>• Partner with AHN Template team to achieve Template Standardization and Optimization.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of online scheduled calls.</li> <li>• Number of same day appointments.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase access to PCP.</li> <li>• Increase in number of online appointments.</li> </ul>

<sup>1</sup> Healthy People 2020.

<sup>2</sup> Community Commons 2014.

<sup>3</sup> HRSA, <https://data.hrsa.gov/tools/shortage-area/hpsa-find>.



## HEALTH PRIORITY BEHAVIORAL HEALTH

Mental health is a growing issue across the U.S. Approximately one in five adults in the U.S. experiences mental illness in a given year. 21.5% of youth age 13 through 18 experiences a severe mental disorder at some point during their lives.<sup>4</sup> In many instances, mental illness and substance use disorder go hand-in-hand; among the 20.2 million adults in the U.S. with a substance use disorder issue, approximately 10.2 million have a co-occurring mental health issue.<sup>5</sup>

Approximately 20% of youth (13-18) experience severe mental disorders in a given year (13% for ages 8-15) and about 10.2 million adults in the U.S. have co-occurring mental health and addiction disorders. 60% of adults and nearly 50% of youth (8-15) with a mental illness received no mental health treatment in the previous year.<sup>6</sup>

With high rates of mental illness and substance use disorder across the nation and in the state of Pennsylvania, it is increasingly important for residents to be able to seek and obtain quality care and treatments in order to manage their conditions. However, many struggling with mental and behavioral health issues are unable to access treatment. 56.5% of adults with mental illness received no treatment in the past year, and for those seeking treatment, 20.1% continue to report unmet treatment needs.<sup>7</sup>

<sup>4</sup> "Mental Health by the Numbers" National Alliance on Mental Illness, 2016.

<sup>5</sup> "Mental Health by the Numbers" National Alliance on Mental Illness, 2016.

<sup>6</sup> National Alliance on Mental Illness, *Mental Illness Facts and Numbers*, 2016.

<sup>7</sup> *Mental Health American*, 2018.

## COMMUNITY NEED

### Mental Health Services

The results of the CHNA show that the lack of awareness of available community resources and services is a barrier to accessing behavioral health services.

- ◆ 32% of surveyed providers in the Allegheny Health Network reported that mental health services is one of the top three health needs in their service area.
- ◆ Access to mental health services was the second most frequent answer (59.7%) among surveyed AHN providers when asked what types of improvements they would like to see in the current health care system.

Untreated mental health illness may prevent individuals from living productive lives and is detrimental to their well-being. The following strategies will be implemented by St. Vincent Hospital in order to increase the knowledge and access to mental health programs and services.



## GOAL

Increase knowledge and access to mental health programs and services.

## IMPACT

1) Increased number of patients that attend education sessions; (2) increased awareness of available resources to support recovery; and (3) increased admissions to the Geriatric Behavioral Health unit.

## STRATEGIES AND ACTION STEPS MENTAL HEALTH SERVICES

Strategies	Action Steps	Measure	Impact
<p>1. Increase access to community-based mental health education sessions.</p>	<ul style="list-style-type: none"> <li>• Provide community-based seminars and programs on signs of mental health illness.</li> <li>• Provide community events on available services to support recovery.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of events.</li> <li>• Number of participants.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase awareness of signs of mental health illness.</li> <li>• Increased awareness of available resources for recovery.</li> </ul>
<p>2. Increase primary care provider network awareness of geriatric behavioral health services.</p>	<ul style="list-style-type: none"> <li>• Schedule geriatric behavioral health liaison to meet with each practice to provide education on available services.</li> <li>• Primary Care Providers will call geriatric behavioral health liaison for potential admissions.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of geriatric admissions from Primary Care Providers.</li> </ul>	<ul style="list-style-type: none"> <li>• Increased admissions to Geriatric Behavioral Health unit.</li> </ul>

## COMMUNITY NEED

### Substance Use Disorder

Every day, more than 115 people in the United States die after overdosing on opioids. The misuse of and addiction to opioids—including prescription pain relievers, heroin, and synthetic opioids such as fentanyl—is a serious national crisis that affects public health as well as social and economic welfare. The Centers for Disease Control and Prevention estimates that the total “economic burden” of prescription opioid misuse alone in the United States is \$78.5 billion a year, including the costs of healthcare, lost productivity, addiction treatment, and criminal justice involvement.<sup>8</sup>

In 2016, there were 2,235 opioid-related overdose deaths in Pennsylvania a rate of 18.5 deaths per 100,000 persons—compared to the national rate of 13.3 deaths per 100,000 persons. Since 2010, opioid-related overdose deaths have increased in all categories. Heroin overdose deaths have increased from 131 to 926; synthetic opioid overdose deaths have increased from 98 to 1,309; and prescription opioid overdose deaths have increased from 411 to 729 deaths.<sup>9</sup>

<sup>8</sup> National Institute on Drug Abuse.

<sup>9</sup> National Institute on Drug Abuse, *Pennsylvania Opioid Summary*.

<sup>10</sup> SAMSHA, 2018.

In the study area, the opioid epidemic is a health issue that was discussed very frequently – many interviewees were concerned about the perceived growing levels of opioid abuse in the St. Vincent service area.

In addition, nearly 43% of surveyed AHN providers identified alcohol use as a top three health risk/lifestyle behavior. Crawford County reported a higher rate of binge alcohol use (20%) than both Erie (19%) and Warren counties (19%); however, all were below the PA average (21%).<sup>10</sup>

The results of the CHNA show that a barrier to accessing behavioral health services is the lack of awareness of community resources and services. Misuse of and addiction to substances such as opioids, alcohol and tobacco often prevent individuals from living productive lives and is detrimental to their well-being. The following strategies will be implemented by St. Vincent Hospital in order to increase the knowledge and access to available substance use disorder programs and services.

## GOAL

Increase knowledge and access to substance use disorder programs and services.

## IMPACT

(1) Increased number of patients that attend education sessions; (2) increased awareness of available resources to support recovery; (3) increased number of patients that receive the medication assisted therapy; and (4) increased number of patients in the warm hand off program.

## STRATEGIES AND ACTION STEPS SUBSTANCE USE DISORDER

Strategies	Action Steps	Measure	Impact
1. Increase access to community-based education sessions.	<ul style="list-style-type: none"> <li>• Provide community-based seminars and programs on substance use disorder.</li> <li>• Provide community events that increase awareness of available services to support recovery.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of events.</li> <li>• Number of participants.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase awareness of signs of mental health illness.</li> <li>• Increased awareness of available resources for recovery.</li> </ul>
2. Increase number of patients eligible for the warm hand off program.	<ul style="list-style-type: none"> <li>• Screen overdose patients coming to the ED for criteria meeting medication assisted treatment (MAT).</li> <li>• Begin medicating patients that meet criteria and transition to Gaudenzia for detox.</li> <li>• Education to EMS services of this program.</li> <li>• Public education for detox services.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of patients in MAT.</li> <li>• Number of patients in warm hand off program.</li> </ul>	<ul style="list-style-type: none"> <li>• Increase in number of patients who receive medication for addiction.</li> <li>• Increased number of patients in warm hand off program.</li> </ul>







## HEALTH PRIORITY CHRONIC DISEASE

Chronic diseases, generally defined as conditions that last one year or more and require ongoing medical attention or limit daily activities, are the leading causes of death and disability in the United States.<sup>11</sup> Common chronic diseases include hypertension, heart disease, and diabetes. Obesity underlies most chronic diseases. Obesity is a risk factor for type 2 diabetes, hypertension and hyperlipidemia. Although there is not a cure for most chronic diseases, they can be managed in ways that reduce the symptoms of the disease and/or minimize the risk of developing more serious symptoms.

More than half of adults ages 18 and older have at least one chronic condition; more than one-quarter have at least two. Eighty-six percent of the nation's \$2.7 trillion annual health care expenditures in 2014 were on behalf of people with chronic diseases and mental health conditions.<sup>12</sup>

<sup>11</sup> Aspen Health Strategy Group. (2019). *Reducing the Burden of Chronic Disease*. Washington DC: The Aspen Institute. <http://aspeninstitute.org/AHSGreport2019>.

<sup>12</sup> *ibid.*

## COMMUNITY NEED

### Diabetes

Diabetes was the seventh leading cause of death in the United States in 2015 based on the 79,535 death certificates in which diabetes was listed as the underlying cause of death. In 2015, diabetes was mentioned as a cause of death in a total of 252,806 certificates.<sup>13</sup>

The results of the CHNA show that diabetes is a high priority for St. Vincent Hospital as 35.8% of surveyed AHN providers identified diabetes as one of the top three health needs in their service area. Providers also noted that lack of education on proper disease management is a barrier to improving health outcomes. The following strategies will be implemented by St. Vincent Hospital in order to increase the knowledge and access to diabetes management resources.

<sup>13</sup> American Diabetes Association.



## GOAL

Improve management and outcomes for patients diagnosed with diabetes.

## IMPACT

(1) Increased number of patients counseled on diabetes risk factors; (2) decreased emergency room utilization by the managed population; and (3) decreased A1C levels in the managed population.

## STRATEGIES AND ACTION STEPS DIABETES

Strategies	Action Steps	Measure	Impact
<p>1. Promote diabetes prevention programming to the community.</p>	<ul style="list-style-type: none"> <li>Conduct screenings and education at community events.</li> <li>Identify participants through the biometric screening process.</li> </ul>	<ul style="list-style-type: none"> <li>Number of patients counseled on risk factors.</li> </ul>	<ul style="list-style-type: none"> <li>Increase awareness of risk factors of diabetes.</li> </ul>
<p>2. Improve care management of rising risk patients with chronic disease.</p>	<ul style="list-style-type: none"> <li>Identify patients through risk stratification tools.</li> <li>Partner with Population Health Management teams.</li> <li>Develop a tool within the electronic medical records.</li> </ul>	<ul style="list-style-type: none"> <li>ED utilization.</li> <li>Hospital admissions.</li> <li>A1c levels for target population.</li> </ul>	<ul style="list-style-type: none"> <li>Decreased ED utilization.</li> <li>Decreased hospital admissions for diabetes related illness.</li> <li>Decreased A1C levels.</li> </ul>

## COMMUNITY NEED

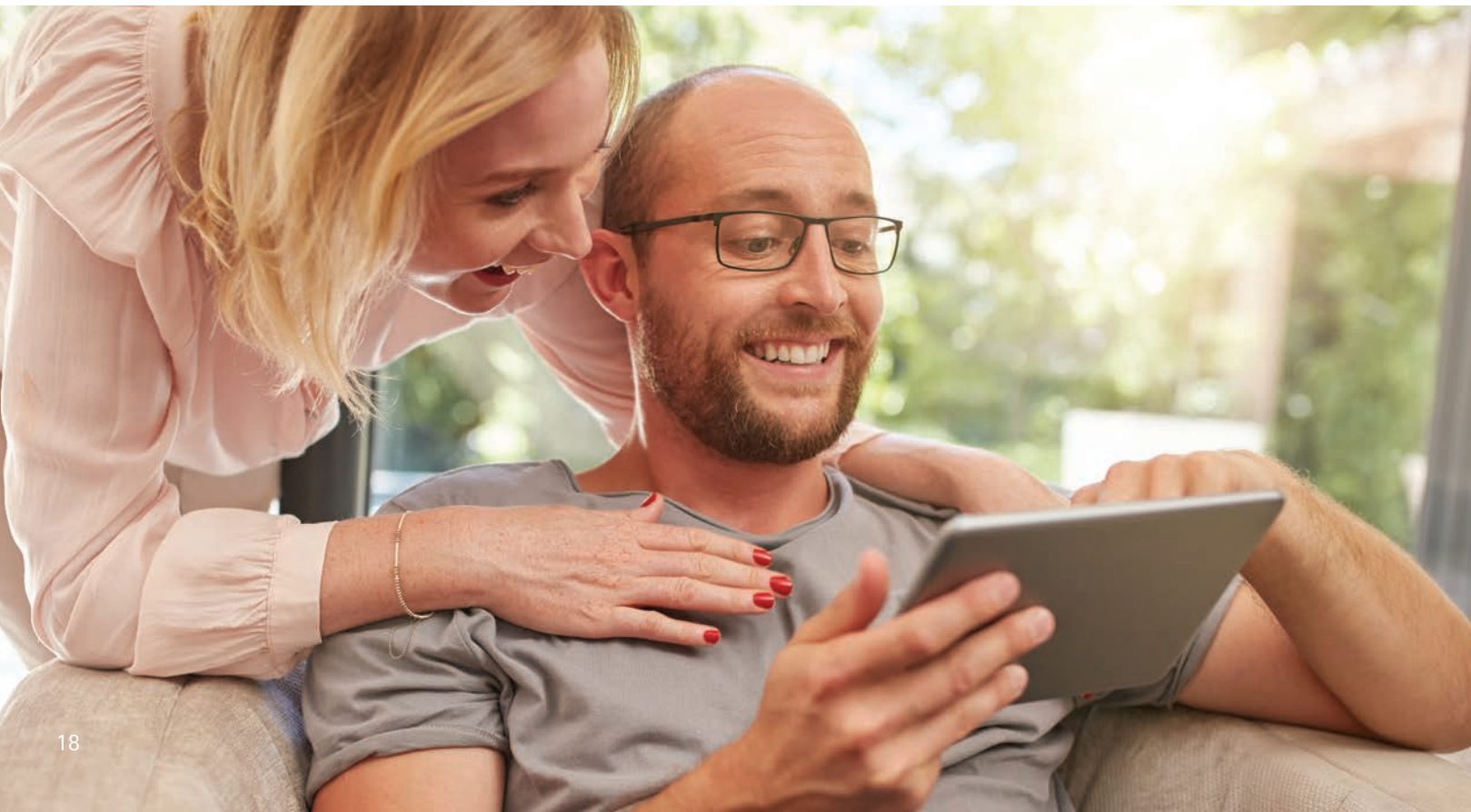
### Cancer

Cancer is a local, national, and worldwide chronic disease that has affected millions of people. In 2018, an estimated 1,735,350 new cases of cancer will be diagnosed in the United States and 609,640 people will die from the disease. In Pennsylvania, there are projected to be 80,960 estimated new cases in 2018 and 28,620 estimated deaths in 2018 alone.<sup>14</sup> The most common cancer diagnoses in Pennsylvania are breast (female), lung, prostate, and colon.<sup>15</sup>

The results of the CHNA show that cancer is one of the top three health needs in the service area and education on proper disease management is a barrier to improving health outcomes. The following strategies will be implemented by St. Vincent Hospital in order to increase the number of adults who receive cancer screenings.

<sup>14</sup> American Cancer Society.

<sup>15</sup> American Cancer Society.



## GOAL

Increase the number of adults who receive age appropriate screenings.

## IMPACT

(1) Increased number of screenings in high risk communities; (2) increased number of lung cancer studies performed; and (3) increased number of patients that receive breast exams.

## STRATEGIES AND ACTION STEPS CANCER

Strategies	Action Steps	Measure	Impact
1. Provide community-based cancer screening events.	<ul style="list-style-type: none"> <li>Provide community cancer screening and education events.</li> </ul>	<ul style="list-style-type: none"> <li>Number of screening events.</li> <li>Number of participants.</li> </ul>	<ul style="list-style-type: none"> <li>Increased number of cancer screening and education events.</li> <li>Increased number of cancer screenings.</li> </ul>
2. Increase CT lung cancer screening utilization.	<ul style="list-style-type: none"> <li>Implement Lung Cancer Screening Navigation.</li> <li>Expand CT Lung Screening access/locations.</li> </ul>	<ul style="list-style-type: none"> <li>Number of studies performed.</li> </ul>	<ul style="list-style-type: none"> <li>Increased number of CT lung screenings.</li> </ul>
3. Increase Screenings with Asymptomatic Breast Ultrasound (ABUS).	<ul style="list-style-type: none"> <li>Promote to public and providers.</li> <li>Increase screening breast ultrasound capacity.</li> <li>Educate primary care providers on screening breast ultrasound.</li> <li>Expand number of sonographers trained on ABUS.</li> </ul>	<ul style="list-style-type: none"> <li>Number of screening breast ultrasounds performed.</li> </ul>	<ul style="list-style-type: none"> <li>Increased number of breast screenings.</li> </ul>

## COMMUNITY NEED

### Obesity

Obesity is one of the largest contributing factors of preventable chronic conditions, including diabetes, hypertension, and stroke. Adults who are overweight are more likely to have high blood pressure and high cholesterol, both of which can lead to major health issues such as heart disease and stroke. As obesity rates are on the rise, so are chronic diseases. The CDC estimates that health care costs due to obesity and the chronic diseases that stem from obesity are estimated to be anywhere between \$147 billion to \$210 billion per year.<sup>16</sup>

The results of the CHNA show that obesity is one of the top three health needs in the St. Vincent Hospital service area. Pennsylvania has the 25th highest adult obesity rate in the nation at 30.3%.<sup>17</sup> While, 34% of Crawford County is considered obese, Warren County measuring at 33.3% and 31% of Erie County is considered obese. All counties' rates of obesity are higher than the state and national averages (27.5%).<sup>18</sup> The following strategies will be implemented by St. Vincent Hospital in order to increase knowledge and access to obesity management resources.

<sup>16</sup> "The Healthcare Costs of Obesity." *The State of Obesity*.

<sup>17</sup> *The State of Obesity, Pennsylvania*, <https://stateofobesity.org/states/pa>.

<sup>18</sup> *Community Commons, 2014*.



## GOAL

Improve management and outcomes for patients with obesity risk factors.

## IMPACT

(1) Increased number of patients counseled on obesity risk factors; (2) increased number of obesity education events; (3) increased number of Meet Dr. Right events; and (4) increased number of health and wellness events.

## STRATEGIES AND ACTION STEPS OBESITY

Strategies	Action Steps	Measure	Impact
1. Increase community-based education programs.	<ul style="list-style-type: none"> <li>Work with local school districts on childhood obesity education.</li> <li>Coordinate programming and BMI screenings for health fairs.</li> <li>Provide nutrition focused lectures.</li> <li>Identify participants through the biometric screening process.</li> </ul>	<ul style="list-style-type: none"> <li>Number of patients counseled on risk factors.</li> <li>Number of BMI screenings.</li> </ul>	<ul style="list-style-type: none"> <li>Increase in awareness of risk factors of obesity.</li> <li>Increase in number of patients screened for BMI.</li> </ul>
2. Educate community on correlation between weight and health.	<ul style="list-style-type: none"> <li>Partner with community organizations to provide education on obesity.</li> </ul>	<ul style="list-style-type: none"> <li>Number of community-based education events.</li> <li>Number of participants.</li> </ul>	<ul style="list-style-type: none"> <li>Increase in number of community-based events.</li> </ul>
3. Increase access to Bariatric Program for treatment of obesity.	<ul style="list-style-type: none"> <li>Increase PCP awareness of the Bariatric Program.</li> <li>Utilize Meet Dr. Right events to increase access to the Bariatric Program.</li> </ul>	<ul style="list-style-type: none"> <li>Number of educational events.</li> <li>Number of participants.</li> <li>Number of patients that schedule appointments at Meet Dr. Right events.</li> </ul>	<ul style="list-style-type: none"> <li>Increase number of evaluations for bariatric program.</li> </ul>
4. Provide opportunities for community members to become involved in events that encourage physical health and wellness.	<ul style="list-style-type: none"> <li>Increase events that encourage health and wellness activities that include physical exercise, nutritional counseling, stress management and prediabetes education.</li> </ul>	<ul style="list-style-type: none"> <li>Number of events.</li> <li>Number of participants.</li> </ul>	<ul style="list-style-type: none"> <li>Increase awareness of physical health and wellness.</li> </ul>



## CONCLUSION

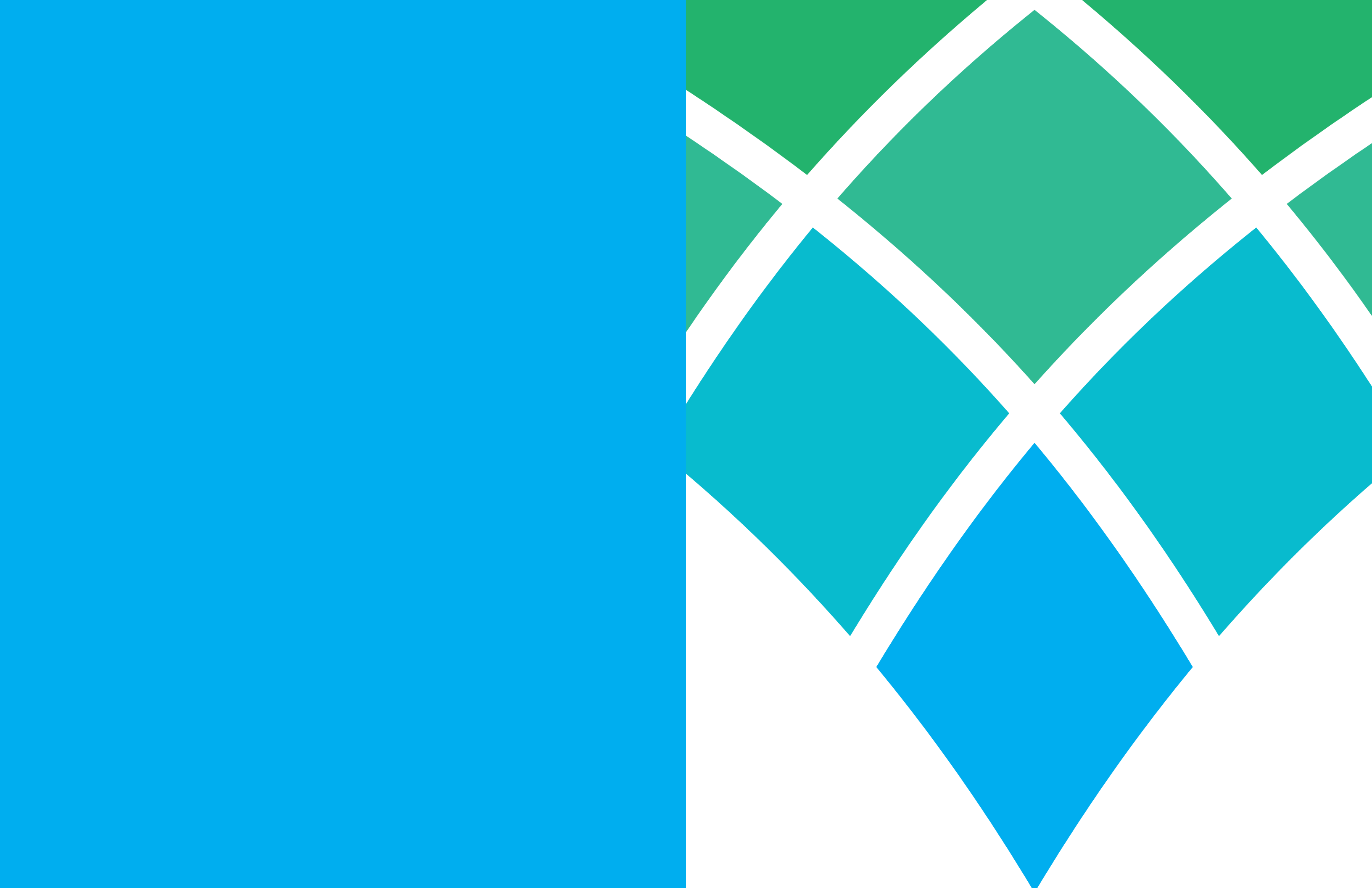
This CHNA Implementation Strategy Plan defines St. Vincent Hospital's commitment to the community, documents how the strategies and goals will meet the identified community needs and ensures that the results of the assessment and its impact on the health of the community are being reported and communicated. Each community strategy and action initiative has a set of measurable objectives and is aligned with the 2018-2019 CHNA priorities. Evaluation and progress on the implementation of these initiatives including updates on the measurable outcomes will be conducted and documented periodically over the next three years.

The hospitals of the Allegheny Health Network will continue to work to close the gaps in health

disparities and continue to improve health services for residents by leveraging the region's resources and assets; while existing and newly developed strategies can be successfully employed. The collection and analysis of primary and secondary data equipped the steering committee and hospital teams with sufficient data and resources to identify key health needs. Local and regional partners understand the CHNA is an important building block towards future strategies that will improve the health and well-being of residents in their region. St. Vincent Hospital will continue to work closely with community partners, as this implementation strategy plan is the first step to an ongoing process to increase access to health care services, address behavioral health issues, and improve health outcomes related to chronic disease.

Through collaboration with community partners, other AHN hospitals, and AHN Institutes, St. Vincent Hospital will complete the necessary actions and implementation steps of newly formed activities or revise strategies to assist the community's residents. The available resources and the ability to track progress related to the implementation strategies will be measured over the next three years.

Upon adoption of the CHNA Implementation Strategy Plan by the hospital board of directors, St. Vincent Hospital is compliant with IRS regulations as outlined by The Patient Protection and Affordable Care Act.





Allegheny Health Network

**Saint Vincent  
Hospital**

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