



 BUTLER HEALTH SYSTEM

**2022** | **COMMUNITY HEALTH  
NEEDS ASSESSMENT**





BUTLER HEALTH SYSTEM



## **Executive Summary:**

Butler Memorial Hospital (BMH), a member of the Butler Health System (BHS) is proud to present its 2022 Community Health Needs Assessment (CHNA) report. This edition sought input from multiple engaged community organizations, stakeholders, public health and health care providers, businesses, religious institutions and consumers interested in improving the health of the Butler community. We would like to express our sincere appreciation for their support in this endeavor.

This report is a comprehensive review and analysis of health status indicators, public health, socioeconomic, demographic and other qualitative and quantitative data from the primary service areas of BMH. This assessment identified the health needs and issues facing our community.

The overarching goal is to identify community health priorities, develop interventions and commit resources to promote a healthier community. It will take all of us to make this happen.

Although multiple areas of opportunity were identified to improve the health and well-being of our community, there were three areas of significant concern and importance identified.

Mental health and access to resources to improve mental and behavioral health was once again a top priority. Since the 2019 Needs Assessment several programs were put in place. BMH negotiated a new three year contract with the psychiatrists. Human resources responded to requests for more recruitment and faster hiring processes. BHS family services participated in the COVID 19 telehealth expansion to ensure that individuals received necessary behavioral health services during the pandemic.

The issue of substance abuse was highlighted again this year as a major problem plaguing our community. This issue has been worsened by the COVID pandemic. BMH and drug and alcohol leadership met quarterly with county officials to discuss new treatment needs, barriers with current treatment options and ways to communicate services with the public.

Finally the need for ongoing health education and access to healthy foods was seen as a top priority for our community. The chronic disease of diabetes, obesity, and hypertension are straining the health care resources in our community. Throughout the hospital's service area, food deserts exist. Access to healthy food along with lack of activity and areas for exercise, contribute to the growing demand on health care resources provided by Butler Health System. The BHS Food Institute was developed to address food insecurity and nutrition education.

We would be remiss if we did not mention the almost three year COVID pandemic and its effect on the health care system. COVID presented an unprecedented strain on health care system resources and took a physical and emotional toll on all health care providers. As of 5/2/22 there were 33,659 confirmed cases of COVID in Butler County resulting in 740 deaths.

In 2020, BHS made a significant financial and time investment in the electronic health record (EHR), Meditech Expanso to improve patient to provider communication. This upgrade unifies all patient records including the inpatient, surgical, outpatient, ambulatory and emergency departments.

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

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

BMH has been formally conducting Community Health Needs Assessment for over 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:

<b>Past Major Initiatives</b>	<b>Year Started</b>
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
Clarion Hospital and Provider Group Acquisition	2019
Telehealth Services for Primary and Specialty Care	2020
System Wide EHR Upgrade to Expanse	2020
Primary Care Office Expansions	2020
Food Institute Butler Hospital Campus	2021

*Table 1: Previous Initiatives Developed from Community Assessments*



## **2019 Community Health Needs Assessment Follow Up**

The previous assessment, completed in 2019, identified multiple areas of health concerns in Butler County. BMH used this information to develop and implement those needs. Topics identified in the 2019 assessment included:

### **Butler CHNA Implementation Objectives:**

1. Health and Wellness Educational Opportunities
2. Physician Access
3. Substance Use Disorder Efforts
4. Mental and Behavioral Health Support

The following outlines efforts towards those needs.

### **1. Health and Wellness Educational Opportunities**

- A. Develop and implement educational teams for community support
  - Heart Healthy Diet Seminars – Mediterranean, DASH, Plant-Based, Flexitarian, Heart Healthy Lifestyles – BHS Lifestyle Coaching Classes
  - Diabetes Lifestyle Coaching 4 week series – BHS Endocrinology Partnership with Lifestyle Coaching
  - Brain Health Seminars – BHS Stroke Center
  - Ongoing Volumetric Weight Management Program – BHS Lifestyle Coaching
  - Self-Care – BHS Employee Assistance Program
  - Menu Planning – BHS Food Institute staff
  - Longevity Lessons – BHS Lifestyle Coaching
- B. Advance lifestyle medicine initiatives to support community needs
  - All classes pivoted to virtual to address lifestyle education needs during COVID restrictions
  - Weight management program: Changed to ongoing program instead of a 4 week program as evidence based guidelines recommend at least 6 months of intervention to allow behavior change
  - Added Self-Care series to address stressors associated with COVID
  - Updated Diabetes series to reflect Association of Diabetes Care & Education Specialists (ACDES) curriculum ADCES7 self-care behaviors for people with diabetes
  - Video series on Lifestyle Coaching seminars and classes advertised on social media, in physician offices patient point, and Lifestyle Coaching website
  - Advertise 6 month Lifestyle Coaching flyer to community on social media



- C. Grow Educational outreach through partnerships within the community
  - Partnership with local church (Covenant church in Butler), local YMCAs, Butler County library, Slippery Rock University Institute for Nonprofit Leadership
  - Local radio interviews and newspaper articles
  - HRSA grant partnership with Indiana Regional Medical Center
  - Outreach to all surrounding counties including Clarion, Armstrong, Indiana and Venango
- D. Utilize PHO, Population Health Care Managers to connect chronic disease patients with educational opportunities
- E. Collaborate with Payers to bring healthy initiatives into the community

## 2. Physician Access

- A. Grow and Expand BHS Care Center to enhance access to care
  - Transitioned almost all of primary care and all of specialty care to the BHS Care Center
  - Provide undisturbed, patient focused, and timely responses to patient calls
  - 85% success rate in meeting patient scheduling needs after the first call
  - Provide access to clinical support, messaging providers, requesting refills, and scheduling appointments during expanded hours even with the practice is closed
  - Provided insight to practice providers and leadership to increase patient access by adding availability to their schedules
  - Build the patient portal support team to assist patients in providing immediate access to message their providers and request appointments outside of business hours
  - Provided a one call number 833-602-CARE to locate a provider, PCP or Specialist that meets the patients' needs both clinically and geographically
- B. Implement system wide EHR to improve patient to provider communication
  - On November 1<sup>st</sup> 2020, BHS went live with Meditech Expanse, a state-of-the-art healthcare information system that displaced many separate EHR systems used across the organization with a single EHR. Expanse unifies the patient records for all patients including inpatient, surgical, outpatient, ambulatory and emergency departments. This system allows patient's providers to coordinate care regardless of location or physician specialty
  - BHS provides patients with a free patient portal app called My BHS Health. Through this app (or web browser), patients can request appointments, review records of care, ask providers questions, and participate in virtual-visits from the comfort of home
  - In April 2021, BHS expanded the footprint of the EHR by onboarding providers from Clarion Hospital creating a larger network of connected physicians and further improving the care capabilities of BHS



- C. Develop Care Plans to support care across the continuum
  - Care plans for Heart Failure and COPD were completed and used by our Care Transition Coordinator and ambulatory Care Managers. These have been approved and will be implemented at Clarion Hospital. A Care Transition Coordinator position was added at Clarion to work with COPD patients within the Pennsylvania Rural Health Model (PARHM) goals
  - Developed a team of physicians, case managers, care managers and care center staff to develop a pathway for Pneumonia
  - Developed a separate group of providers (PCPs and Specialists) on development of pathways for COVID long-haul symptom management
  
- D. Primary Care Office Expansion:
  - July 2019 New Primary Care location, Valencia
  - June 2020, New Primary Care office expansion, Ellwood City
  - May 2020 New Primary Care office Construction Project, Benbrook
  - June 2021 office renovations to Primary Care Zelienople to accommodate growth
  
- E. Primary Care Physician and APP Recruitment:
  - Jerome Scherer, MD and Leslie Archer, PA-C Practice, July 2019 establishing practice in Valencia, growth along Route 8 South corridor
  - Veronica Vezzani, MD, Family Practice Jan 2021, establishing practice in Zelienople, growth and expansion of primary care in South Butler market.
  - Andrew Hall, DO, Internal Medicine, April 2021, establishing practice at 133 Cunningham Street, Butler, PA
  - Brittany Bielewicz, DO September 2021 BMA North Main Street, Butler
  - Hired Advanced Practice Providers at various Primary Care offices to support growth and access (Ongoing)
  
- F. Support Team-Based Care Initiatives:
  - Developed processes with Care Center team to assist patients searching for Primary Care Providers
  - Work in Process:
    - Standardize workflows
    - Provider Scheduling templates
    - Analyze data to drive opportunities (reduce outmigration)
  - Patient and Provider Engagement with telehealth/video visits
  - COVID 19 High Risk discharge project – Multi-disciplinary team developed discharge process for CV19 high risk patients, care coordination, reduce readmissions
  - Work in Progress: Use of team based care model for other high risk diagnoses to reduce readmissions



### 3. Substance Use Disorder Efforts

#### A. BMH supports Drug and Alcohol (D&A) professionals by:

- Negotiated a new 3 year contract with the Psychiatrists
- Reformulated staffing models to meet ASAM criteria. (American Society of Addiction Medicine)
- Provided equipment and IT support to convert services to Telehealth during the COVID pandemic

#### B. Expand Community Outreach:

- BMH and the D&A leadership met quarterly with County officials to discuss new treatment needs, barriers with current treatment options, and ways to communicate services to the public
- Participation in Recovery Events throughout the year sponsored by various human service agencies
- Discuss addiction and treatment options on local radio (WISR)
- Participated in a Public Service Announcement with Knoch High School to educate the public on the dangers of substance use
- Participated in the yearly October Recovery Information insert in the Butler Eagle
- Met with PCPs to discuss ways to embed substance abuse professionals in their offices for consultation and service

#### C. Access to available grants and support initiatives:

- Regular discussions with the Chief Community Health Officer for potential grant opportunities to increase access to service for community unmet needs

#### D. Support of Opioid Center of Excellence:

- The Opioid Center of Excellence participated in the Butler County Coalition on Overdose. This is a multi-agency collaborative working in conjunction with the program evaluation and research unit (PERU) at the University of Pittsburgh School Of Pharmacy to identify community needs and resources necessary to address the opioid epidemic
- Participated in forums on current data and statistics and regular participation in community recovery events
- Reviewed current access to treatment, recovery and prevention strategies in the community

### 4. Mental and Behavioral Health Support

#### A. BHS–Family Services Out-Patient Mental Health Program-Transition to Telehealth

- In response to the Covid-19 State of Emergency, BHS Family Services provided Telehealth Services within the Department of Human Services

(DHS) and Office of Mental Health and Substance Abuse Services (OMHSAS) Guidelines

- Individuals received necessary behavioral health services during COVID and BHS Family Services participated in the Covid-19 Telehealth Expansion
- Telephonic video technology commonly available on smart phones and other electronic devices were utilized

B. Social Determinants of Health (SDOH) pilot program with Center for Community Resources (CCR)

- Complex needs of Behavioral Health clients were assigned a SDOH case manager that worked with the individual for 3 months to connect them with resources and services

## **COVID-19**

As part of the evaluation process of the implementation strategies, it should be noted that due to the implications of the COVID-19 pandemic beginning in March, 2020, several community outreach events and initiatives were put on hold for safety reasons. These safety restrictions have continued into 2022 and have further limited our ability to continue programs that are regularly implemented to address the health needs of our community. Furthermore, many of the outreach initiatives had to be adjusted and shifted due to the new challenges that the hospital and community faced in light of the pandemic. The information presented below will expand on the impact of the COVID-19 pandemic on the health and wellness of our hospital and community at large.

The following data outlines the impact of COVID-19 on Butler County as of 5/2/2022.

- 33,695 confirmed cases of COVID
- 740 deaths
- Over 56,000 COVID PCR tests performed at BMH lab
- Over 28,000 COVID antigen tests have been performed.

On a positive note, the hospital was able administer over 146,000 doses of vaccine (12 years and up) and over 1,500 pediatric doses (ages 5-11) as of March 2022. The hospital and health system experienced declines of emergency visits as high as 60% of typical Pre-COVID volumes. There was a mandatory pause in elective procedures that was government mandated as well as times of self-imposed restrictions due to capacity challenges and the need to pull extra staff to the bedside.

Butler Health System quickly pivoted to meet the changing needs for access to care (such as a robust telemedicine response), as well as virtual platforms for public health education and lifestyle coaching. However, we anticipate an increase in the mental health issues due to financial hardship and worsening overall individual health postponing routine care. These problems will present new challenges for us as we enter the post-pandemic era.



As COVID-19 spread across the US in 2020, emergency room visits declined steeply. An analysis of data from the National Syndromic Surveillance Program demonstrated a 42% decrease in overall weekly emergency room visits nationwide during the early COVID-19 pandemic. Other studies showed a substantial decline in volume relative to 2019, including decreases in presentation for syncope, CVA, MI, pneumonia, and exacerbation of COPD and heart failure.

Furthermore, mental health implications that occurred during the pandemic may stem from many psychosocial factors such as:

- Fear of infecting family members
- Lack of access to testing and medical care
- Physical distancing, home confinement, quarantining, and loneliness
- Inconsistent messaging regarding public health measures such as mask wearing
- Increased workloads
- Economic hardship and insecurity
- Shortages of available resources- food, paper products, personal protective equipment
- Continual media reports about the pandemic and the uncertainty surrounding its eventual outcome

Other mental health issues included those patients with pre-existing psychiatric conditions prior to the pandemic who experienced deterioration of their illness due to delayed or interrupted care with their clinicians. Patients were unable to obtain refills and may have been forced to reduce medication dosage or stop them altogether. Some patients may have not had the opportunity to see their clinician for adjustments to medications if they were ineffective or causing adverse side effects.

Additional challenges for our health system included our efforts to keep our patients and staff safe while maintaining our quality of service:

- Low hospital enrollment
- Non-essential healthcare employees working remotely
- Outpatient testing put on hold
- Elective procedures were put on hold
- Outpatient provider appointments were moved to virtual
- Many of our outreach efforts focused on providing employee support and adjusting community services to a virtual format
- Virtual workforce support groups for employees
- “No one Dies Alone” program
- Virtual Lifestyle Coaching classes with new content, marketing strategies and adaptations specific to the pandemic
- Compassion Care Rounds for patients who were admitted to the hospital when visitors were not allowed. The health system initiated the use of tablets for patients to connect with their loved ones

In finalizing the content of the COVID-19 implications surrounding the community health needs assessment, it is important to note that this pandemic has created an increased awareness of SDOH and the need for community-integrated care. In January 2021, the health system developed a new position of Chief Community Health Officer to focus on initiatives specific to SDOH.

### **2022 Community Health Needs Assessment (CHNA)**

This CHNA was conducted in the spring of 2021 through the spring of 2022. Qualitative and quantitative data was gathered from community members, stakeholder organizations in the Butler County region, employees and providers of BMH and BHS and multiple secondary data sources.

#### **Assessment Committee Membership**

Kathy Selvaggi, MS MD FAAHPM; Erin Stewart, RN; Allison Roth, MHA candidate

#### **Methods**

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

- Multiple meetings were held with the BHS Butler Community Assessment team to identify the top health priorities within the primary service area of Butler County
- BMH collected health data from County Health Rankings, Centers for Disease Control and Prevention, World Life Expectancy, PAYS, and US Census
- 529 community members completed electronic and paper surveys to provide additional data and 36 community stakeholder surveys were also completed
- Focus groups met via ZOOM and discussed the data collected from all the sources above. The main themes that arose out of the focus groups were mental/behavioral health, food insecurity, access to care, transportation, COVID-19, substance abuse and addiction, diabetes, obesity, child care, and health education



## Population Served

The primary service area for 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 surrounding counties to receive 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. This is illustrated in figure 1.

Butler Memorial Hospital Inpatient Hospitalizations Fiscal Year 2021

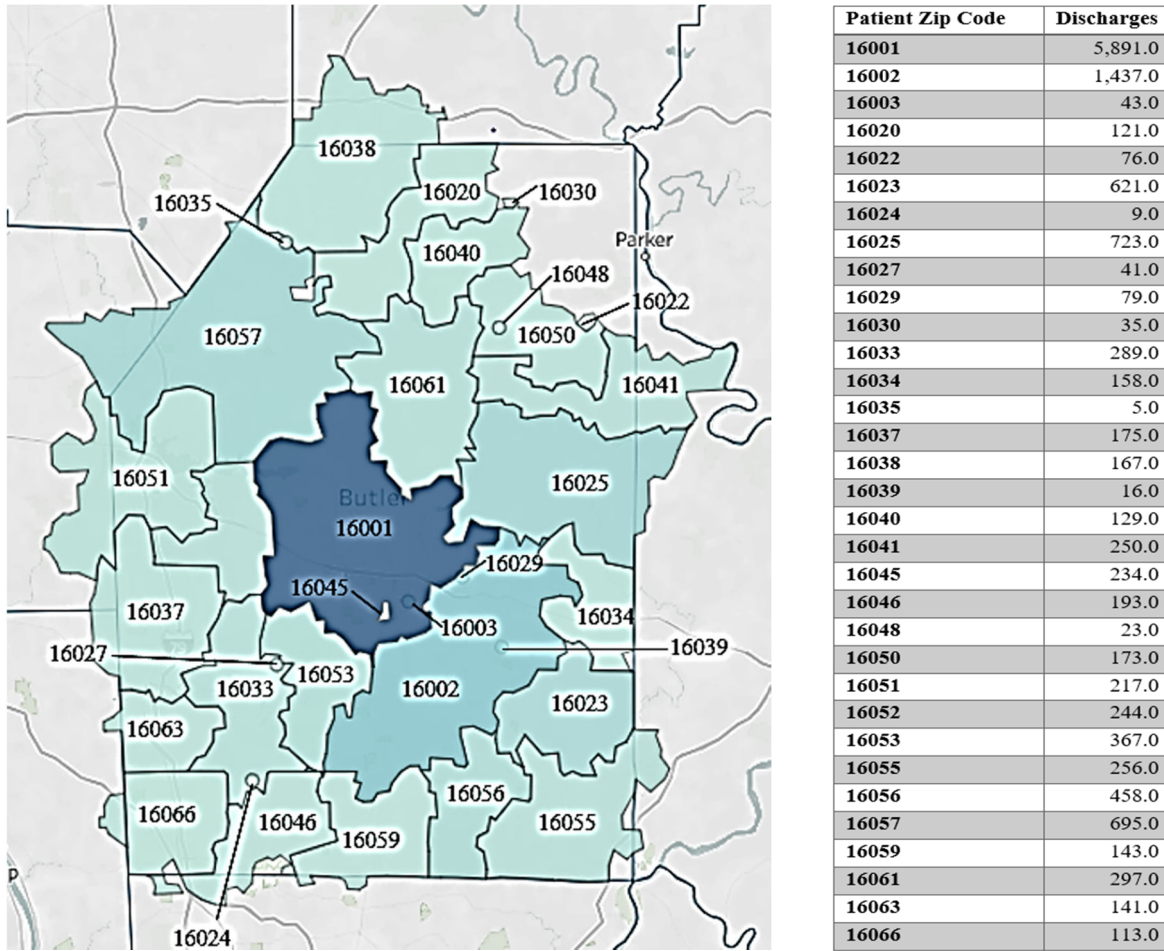


Figure 1: Heat Map indicating the number of inpatient hospitalizations from each zip code in Butler County

A large proportion of BMH patients originate from the 16001 zip code. As such, BHS has placed several service locations within this area to meet the demand of the primary population. The following demographic data was compiled from the Government’s Census.

Below is Table 2, summarizing the county population data compared to data specific to the state of Pennsylvania as a whole.

	<b>Butler County</b>	<b>Pennsylvania</b>
<b>2021 Population Estimate</b>	194,273	12,964,056
Population Percent Change: April 2020-July 2021	0.3%	-0.3%
<b>Median Age (2019)</b>	43.3 years	40.8 years
<b>Percent under 18</b>	19.7%	20.6%
<b>Percent 65 years and older</b>	19.4%	18.7%
<b>Race and Origin</b>		
White alone, not Hispanic or Latino, Percent	95.8%	81.6%
Black or African American, Percent	1.4%	12%
American Indian & Alaskan Native alone, Percent	0.2%	0.4%
Asian alone, Percent	1.5%	3.8%
Hispanic or Latino, Percent	1.6%	7.8%
Two or More Races, Percent	1.2%	2.1%
<b>Veterans (2016-2020)</b>	12,838	731,411
<b>Education</b>		
High School Graduate or Higher	95.4%	91.0%
Bachelor's Degree or Higher	37.5%	32.3%
<b>Median Household Income</b>	\$72,642	\$63,627
<b>Per Capital Income in Past 12 Months</b>	\$39,906	\$35,518
<b>Persons in Poverty, Percent</b>	7.4%	10.9%
<b>Percent with a Disability under age 65, 2016-2020</b>	8.5%	9.8%
<b>Persons without Health Insurance under age 65, Percent</b>	4.8%	7.0%

*Table 2: Butler County Demographics*

*(<https://www.census.gov/quickfacts/fact/table/PA,butlercountypennsylvania/BZA210219>)*

- Within the county, there is significant variability amongst many of the social and economic determinants of health depending on the location in the county because of the large geographic area Butler County encompasses.
  - A recurring theme among community stakeholders was the access and resources in the southern part of the county differs within the county from the central and northern areas. Because of these differences, it should be remembered that county level data on health related issues might be tilted towards the affluence of the south.
- The table below shows a select number of disparities that exist within the primary service area of BMH. These areas include: Adams Township, Cranberry Township, Butler City, and Center Township. Butler City is the immediate area surrounding BMH, and Center Township is in northern Butler County.

	<b>Adams Township (16046)</b>	<b>Cranberry Township (16066)</b>	<b>Butler City (16001)</b>	<b>Center Township (16061)</b>
High School Graduate or higher, percent	98.8%	97.3%	91.0%	96.8%
Bachelor's Degree or higher	66.2%	62.0%	22.7%	36.1%
Median Household Income, 2016-2020	\$124,982	\$108,160	\$32,746	\$76,100
Per Capita Income Past 12 months, 2016-2020	\$69,935	\$53,744	\$22,127	\$42,109
Persons in Poverty, Percent	3.6%	3.1%	24.2%	4.1%
Percent with a Disability, Under age 65, 2016-2020	3.8%	4.7%	20.4%	10.8%
Persons without health insurance	0.8%	2.2%	6.1%	2.6%
Households with broadband internet subscription, 2016-2020	93.3%	94.9%	78.5%	85.3%

*Table 3: Demographic Disparity in Butler County*



<https://www.census.gov/quickfacts/fact/table/adamstownshipbutlercountypennsylvania,cranberrytownshipbutlercountypennsylvania,butlercitiypennsylvania,centertownshipbutlercountypennsylvania/BZA210219>

- Looking at data at the county level, there is a significant portion of our service population being under-represented. There are dramatic differences in factors like income, education, and disability across the county creating 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
- AHN Wexford

### 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 the health factors and outcomes was evaluated using County Health Rankings and World Life Expectancy. The leading cause of death in Butler County is heart disease. Cancer and accidents are the second and third leading causes of death respectively.

The heart disease mortality rate is 203.41 per 100,000 people, which is significantly higher than Pennsylvania and the US Median at 172.91 and 161.52, respectively.

The cancer mortality rate is 173.89 per 100,000 people, which again is higher than the Pennsylvania and US Median coming in at 153.45 and 146.15, respectively. The age-adjusted rates in Butler County for many types of cancer are higher than the rates of cancer incidence in Pennsylvania.

The mortality rates for stroke and lung disease are significantly higher in Butler County compared to Pennsylvania and the US. The mortality rate for stroke, the fourth leading cause of death in Butler County, is 43.79 per 100,000 people for Butler County compared to the Pennsylvania and US stroke rates of 35.34 and 36.96 per 100,000 people, respectively. The mortality rate for lung disease is 43.69 per 100,000 people in Butler County, while Pennsylvania and the US lung disease rates are 34.22 and 38.18 per 100,000 people.

	<b>Butler County</b>	<b>Pennsylvania</b>	<b>US Median</b>
<b>Heart Disease</b>	203.41	172.91	161.52
<b>Cancer</b>	173.89	153.45	146.15
<b>Accidents</b>	45.2	61.22	49.29
<b>Stroke</b>	43.79	35.34	36.96
<b>Lung Disease</b>	43.69	34.22	38.18
<b>Alzheimer's</b>	24.96	21.16	29.85
<b>Diabetes</b>	23.6	20.37	21.59
<b>Nephritis/Kidney</b>	16.6	15.97	12.71
<b>Influenza-Pneumonia</b>	17.69	13.41	12.32
<b>Blood Poisoning</b>	12.16	12.58	9.51
<b>Suicide</b>	11.77	14.06	13.94
<b>Parkinson's</b>	9.58	8.67	8.83
<b>Liver Disease</b>	7.96	8.74	11.34
<b>Hypertension/Renal</b>	5.43	6	8.91
<b>Homicide</b>	1.41	6.09	6.03

*Table 4: Disease Specific Mortality and Incidence. All Rates are per 100,000 people  
(<https://www.worldlifeexpectancy.com/usa/pennsylvania>)*

## **County Health Rankings**

Health Factors: The overall rankings in health factors represent what influences the health of a county. They are an estimate of the future health of counties as compared to other counties within a state. The ranks are based on four types of measures: health behaviors, clinical care, social and economic, and physical environment factors.

Health Outcomes: The overall rankings in health outcomes represent how healthy counties are within the state. The healthiest county in the state is ranked #1. The ranks are based on two types of measures: how long people live and how healthy people feel while alive.

### **Summary:**

According to the County Health Rankings, Butler County is ranked 6 out of 67 in both health factors and 7 out of 67 for health outcomes (1 being the healthiest and 67 being the unhealthiest). In the health outcomes, Butler County ranked 75% to 100% in the higher range of counties in Pennsylvania for health outcomes. For health factors, Butler County ranked in the higher range at 75% to 100% (0% being the unhealthiest and 100% being the healthiest). It is important to note that South Butler is more affluent than the areas in North and Central Butler, which could alter how “healthy” the county may seem. County Health Rankings also identified areas of strength for Butler County, which include teen births, uninsured, primary care, preventable hospital stays, and physical activity. Some areas of improvements were adult smoking, adult obesity, and excessive drinking.

(<https://www.countyhealthrankings.org/app/pennsylvania/2022/overview>)

## Social Vulnerability Index (SVI)

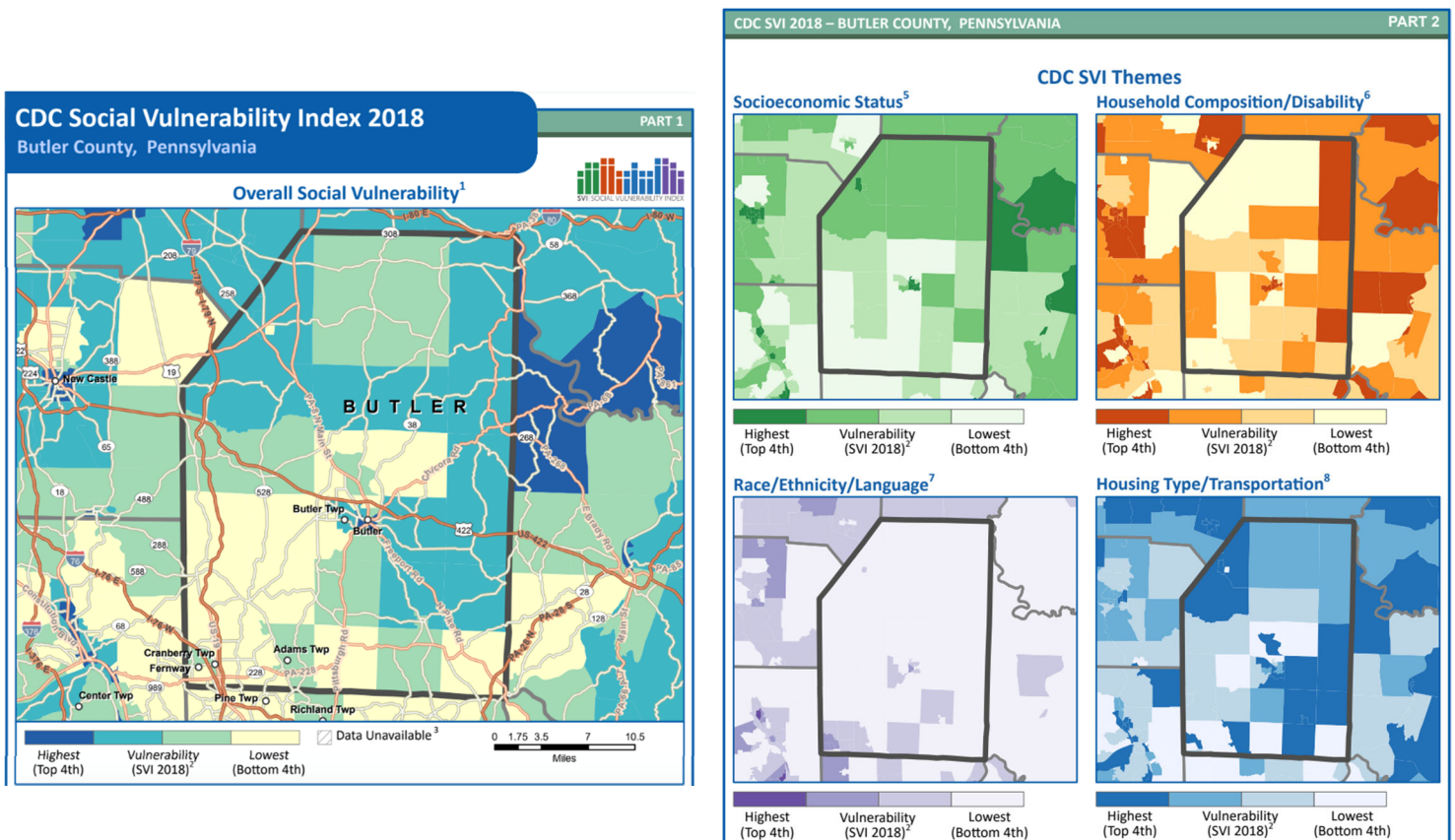


Figure 2: Social Vulnerability Index

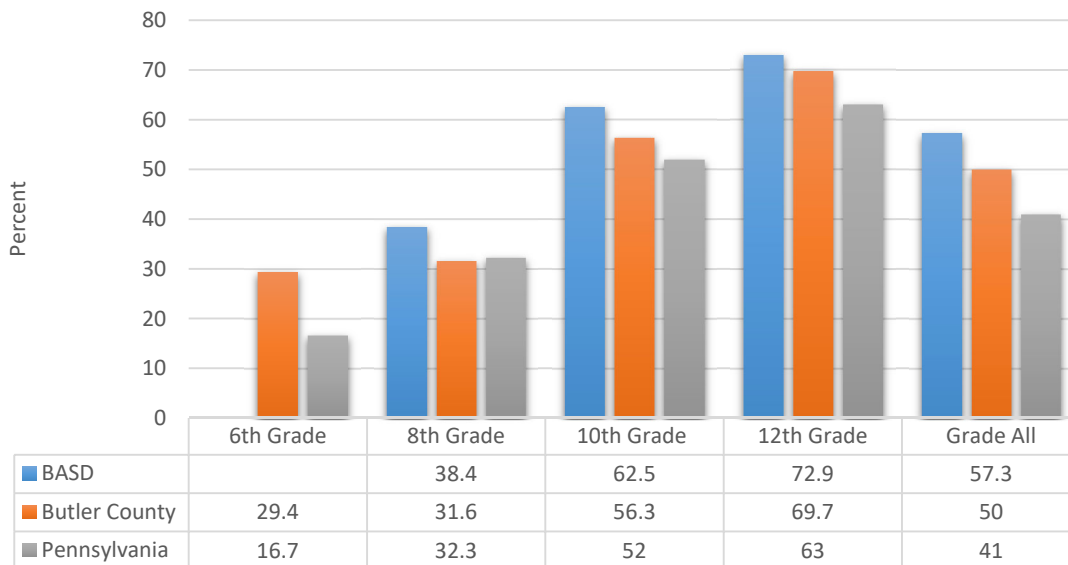
([https://svi.cdc.gov/Documents/CountyMaps/2018/Pennsylvania/Pennsylvania2018\\_Butler.pdf](https://svi.cdc.gov/Documents/CountyMaps/2018/Pennsylvania/Pennsylvania2018_Butler.pdf))

- **Social vulnerability:** is a community's capacity to prepare and respond to the stress of hazardous events ranging from natural disasters to human threats.
- There are four themes that summarize the SVI: these include socioeconomic status, housing/transportation, family characteristics, and language/race/ethnicity.
- The figure on the left is the overall SVI for Butler County. This combines all the themes to show a comprehensive assessment on the well-being of the county.
- This data was collected in 2018 and the overall SVI for Butler County was 0.0426, which is on a 0 to 1 scale. With 0 being the lowest vulnerability and 1 being the highest. Having a 0.0426 SVI indicates a low level of vulnerability. However, Butler City is in a high level of vulnerability.
- Socioeconomic Status and Housing Type/Transportation have the highest vulnerability within Butler County coming in at .1361 and .1598, respectively.
- Household Composition/Disability's SVI is .1228 and Race/Ethnicity/Language's SVI is .0396.

## PAYS Data Analysis

The Commonwealth of Pennsylvania conducts the Pennsylvania Youth Survey (PAYS) every two years. This surveys students' behavior and knowledge around alcohol, tobacco, drugs, and violence. It also captures the students' mental health at a county and state level. The analysis of the Butler County Schools included 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> grade results from the Butler Area School District, Freeport Area School District, Karns City Area School District, Moniteau School District, Seneca Valley School District, Slippery Rock Area School District, and South Butler County School District. Specific data for Butler Area School District (BASD) surveyed 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades only. BMH focused on the BASD given the geographic relationship to the hospital.

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

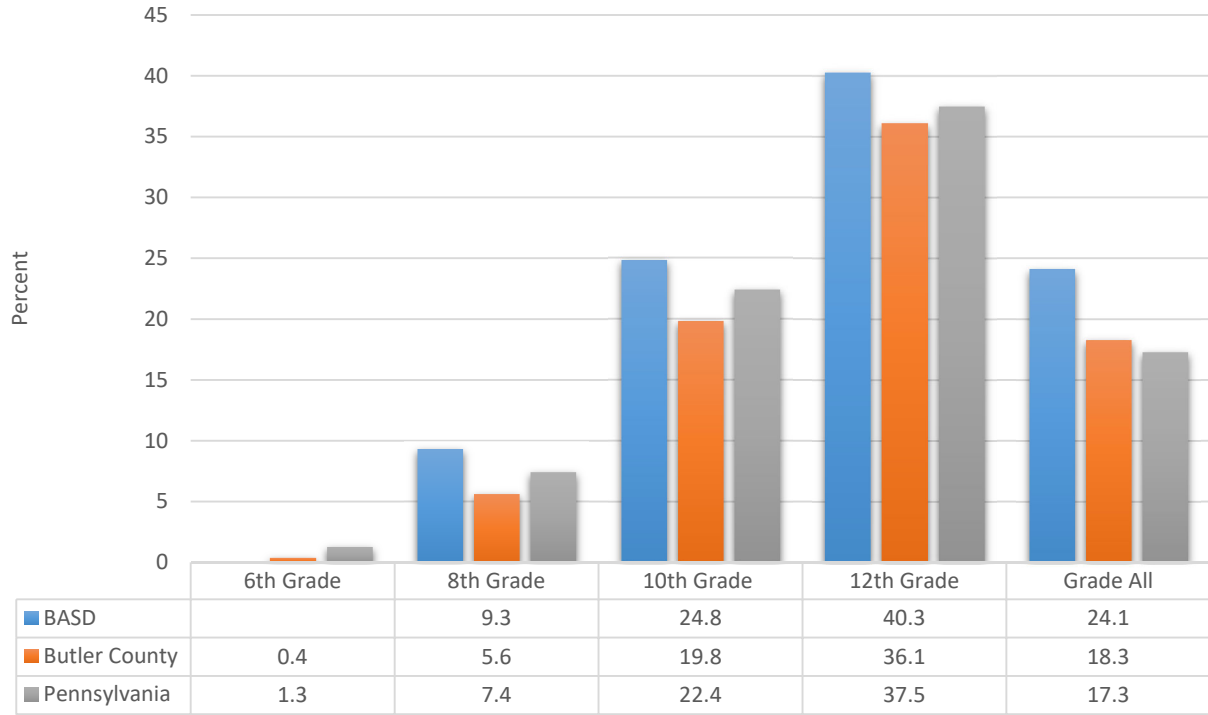


*Figure 3: PAYS- Percent of students who have consumed alcohol within their lifetime*

- Percentage of students in Butler County who have consumed alcohol within their lifetime is higher than the Pennsylvania average at all grade levels above except 8<sup>th</sup> grade
- By 12<sup>th</sup> grade, nearly 70% of the students (Butler County) have consumed alcohol
- The 6<sup>th</sup> grade consumption of alcohol in Butler County is almost 30% significantly higher than the PA state percentage
- Percentage of students in BASD consuming alcohol in their lifetime is higher in 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades compared to the county and state



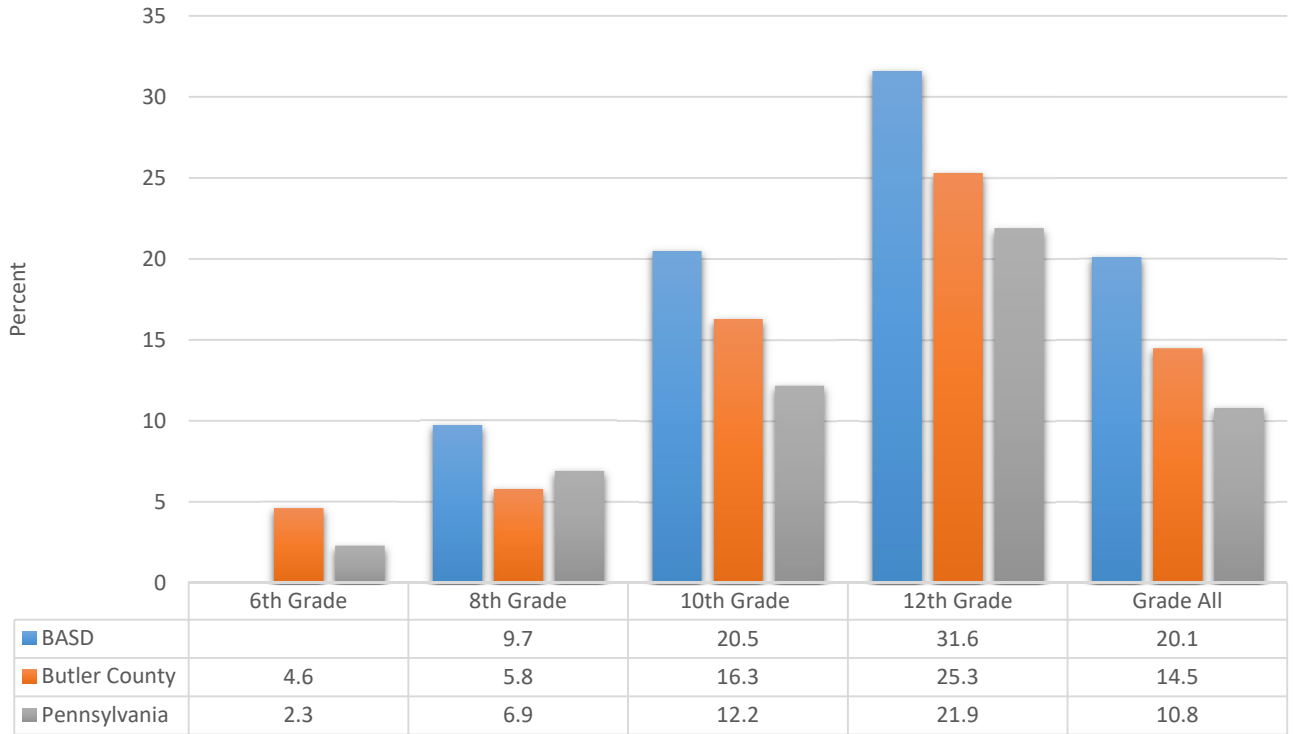
**Percentage of Students Within the Butler Area School District, County and State Who Have Used Marijuana Within Their Lifetime**



*Figure 4: PAYS- Percent of students who reported using marijuana in their lifetime*

- For 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades in BASD the use of marijuana is higher than in the county and state.

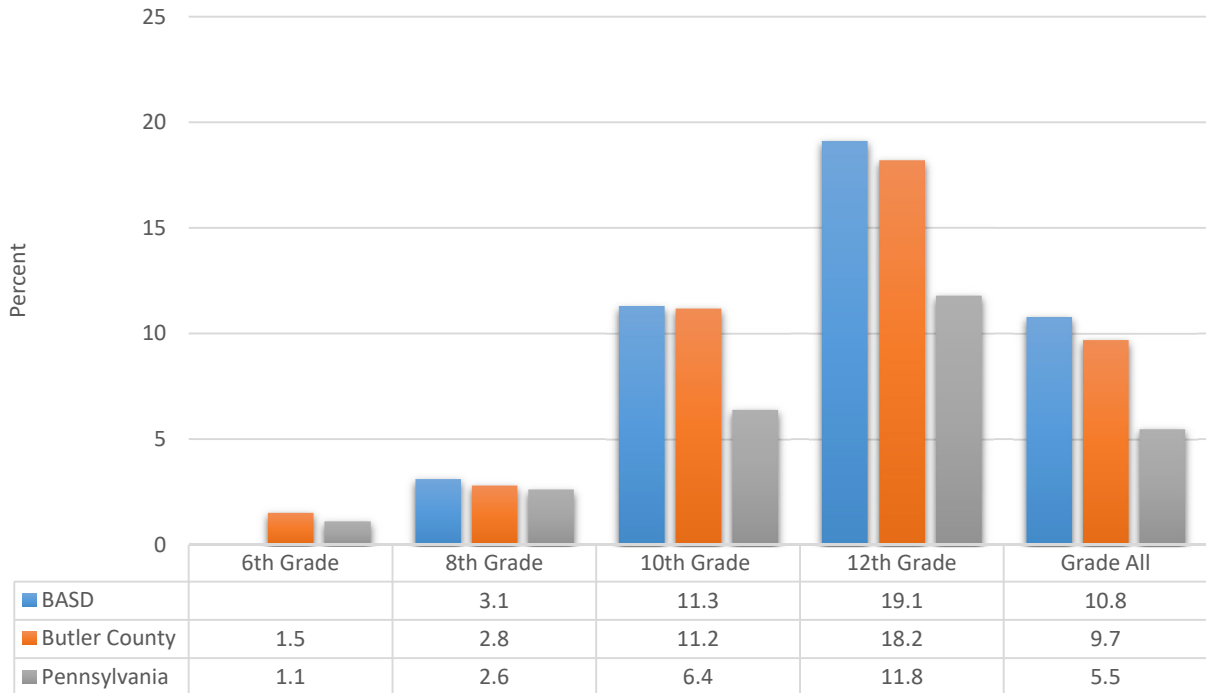
**Percentage of Students Within the Butler Area School District, County and State Who Have Used Cigarettes Within Their Lifetime**



• *Figure 5: PAYS- Percent of students who reported use of cigarettes in their lifetime*

- Butler County had higher rates of students using cigarettes in their lifetime at all grade levels, except 8<sup>th</sup> grade than state
- Cigarette usage in the 6<sup>th</sup> grade in Butler County compared to the state is double
- Percentage of BASD using cigarettes in the 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades exceeds both the county and state

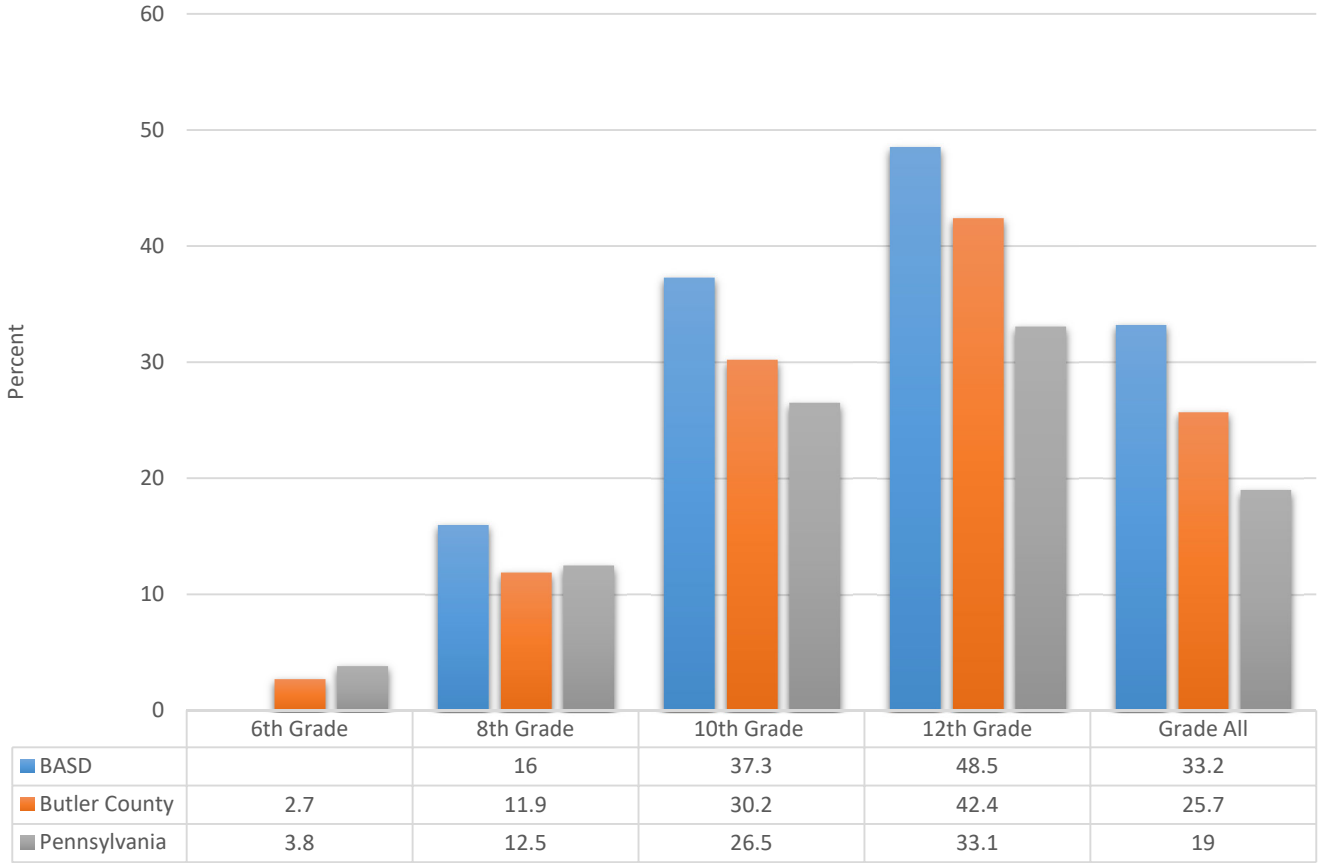
**Percentage of Students Within the Butler County Area School District,  
County and State Who Have Used Smokeless Tobacco Within Their  
Lifetime**



*Figure 6: PAYS- Percent of students who reported using smokeless tobacco in their lifetime*

- BASD has the highest rates of smokeless tobacco use compared to Butler County and the state.

**Percentage of Students Within the Butler Area School District,  
County and State Who Have Used Vapes/E-Cigarettes in the Past 30 Days**



*Figure 7: PAYS- Percent of students who have used Vapes/E-Cigarettes in the past 30 days*

- Reported Vape/E-Cigarette usage in the past 30 days is higher in the BASD than the county and state for 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades.



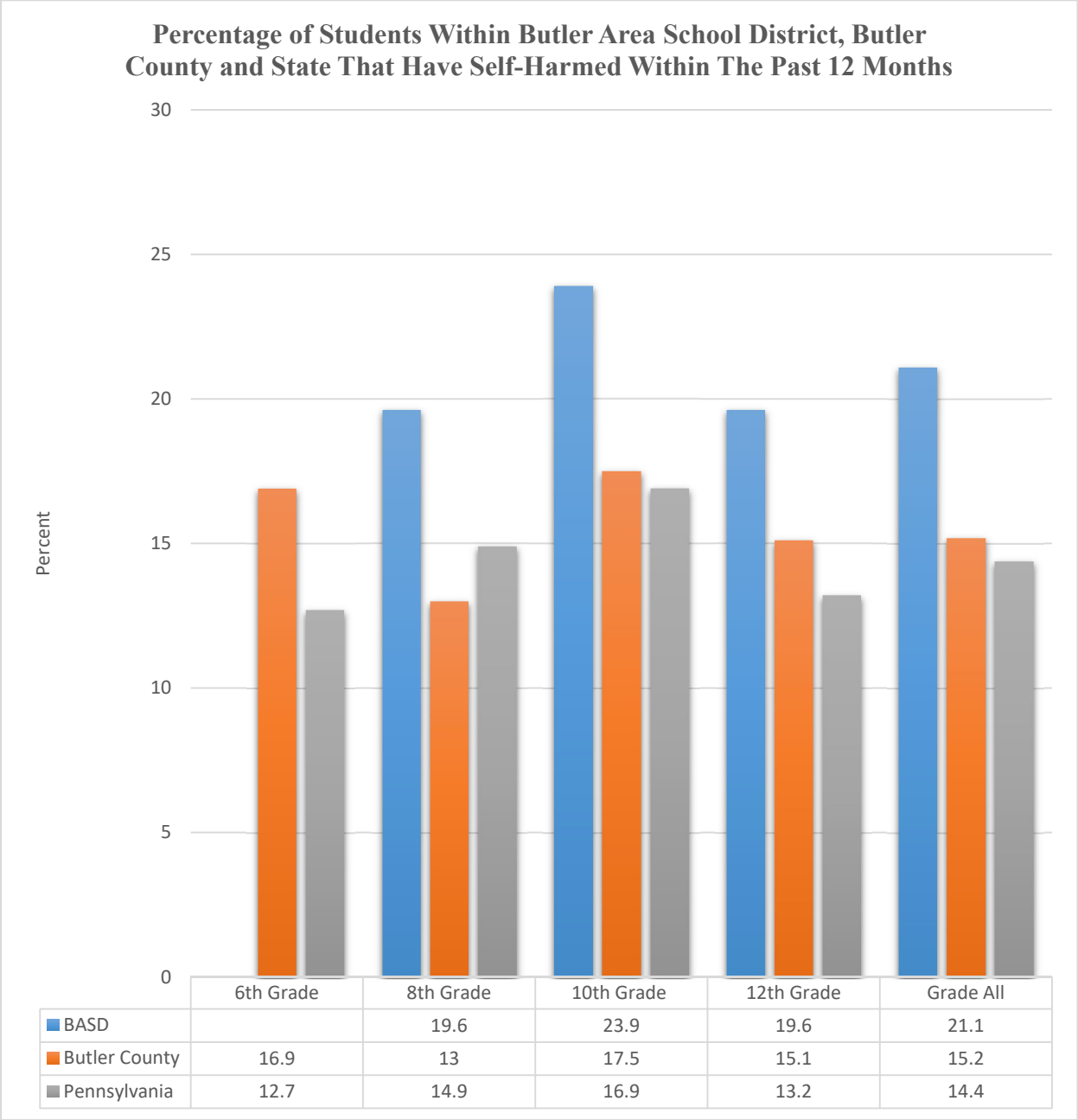


Figure 8: PAYS- Self Harm within the past 12 months

- For BASD the percentage of students in 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades who have self-harmed exceed the county and state levels.
- The percentage of students in Butler County who have self-harmed exceed the state percentages except for 8<sup>th</sup> grade students.

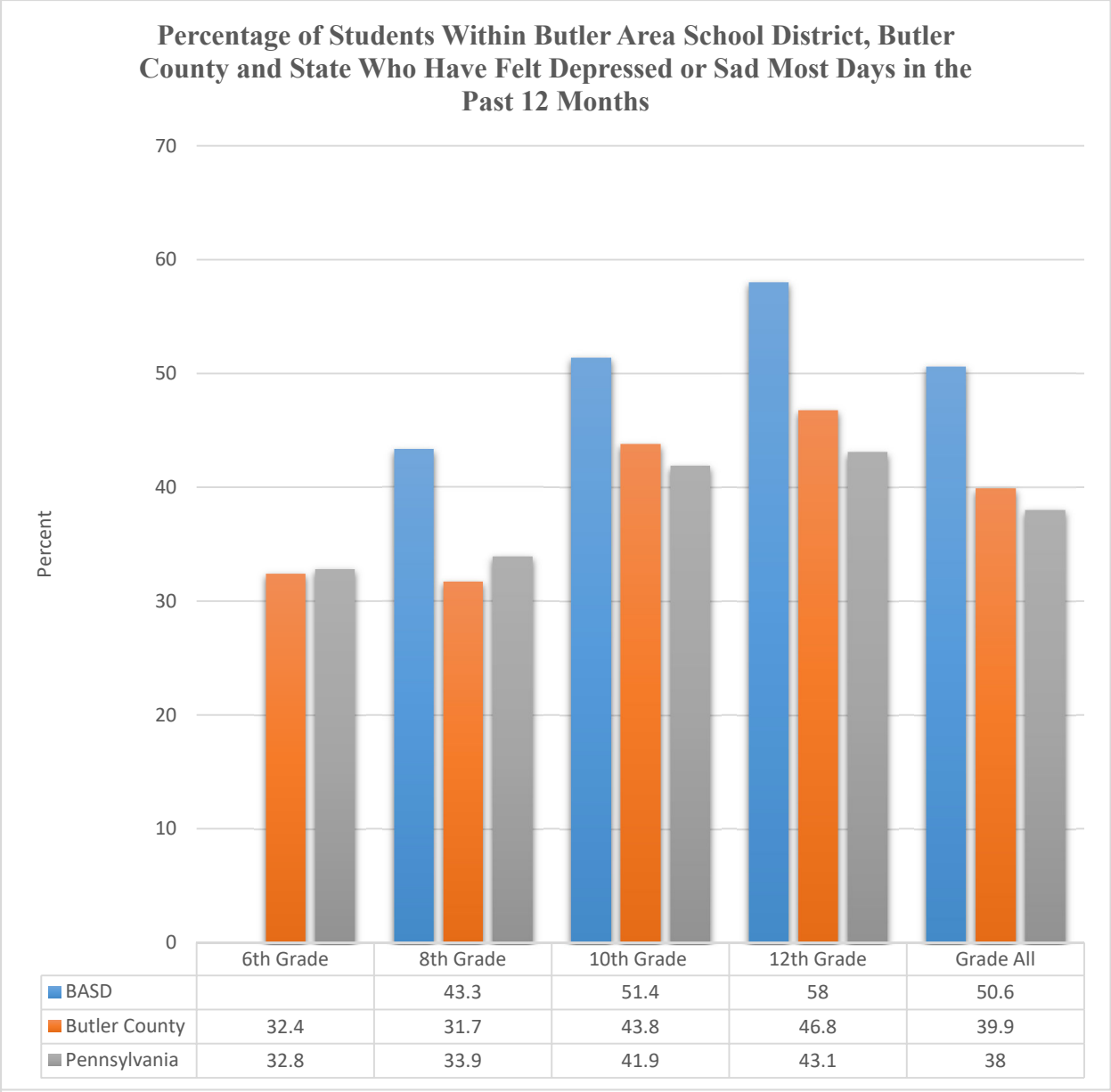
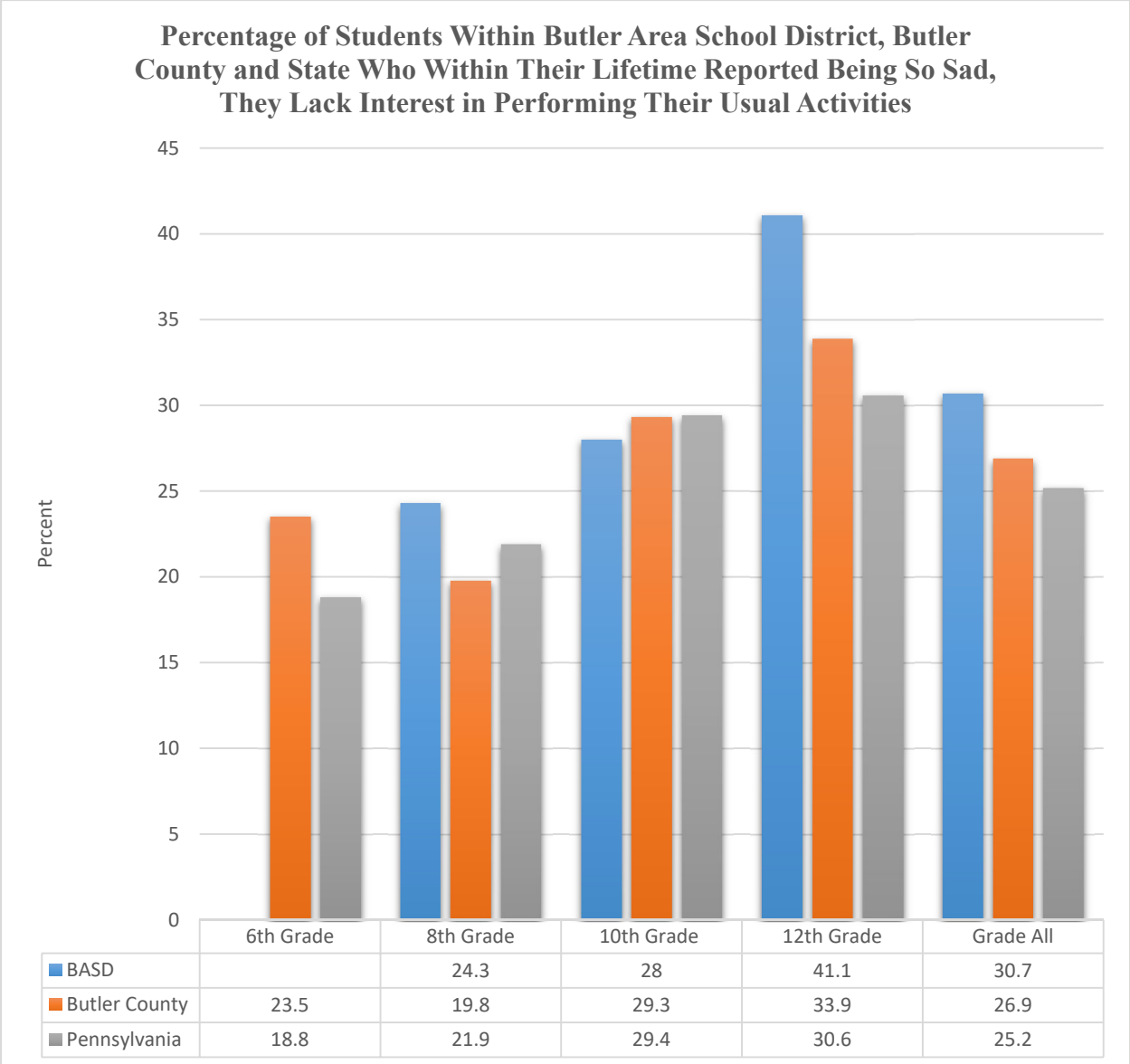


Figure 9: PAYS- Percentage of students who have felt depressed or sad most days in the past 12 months

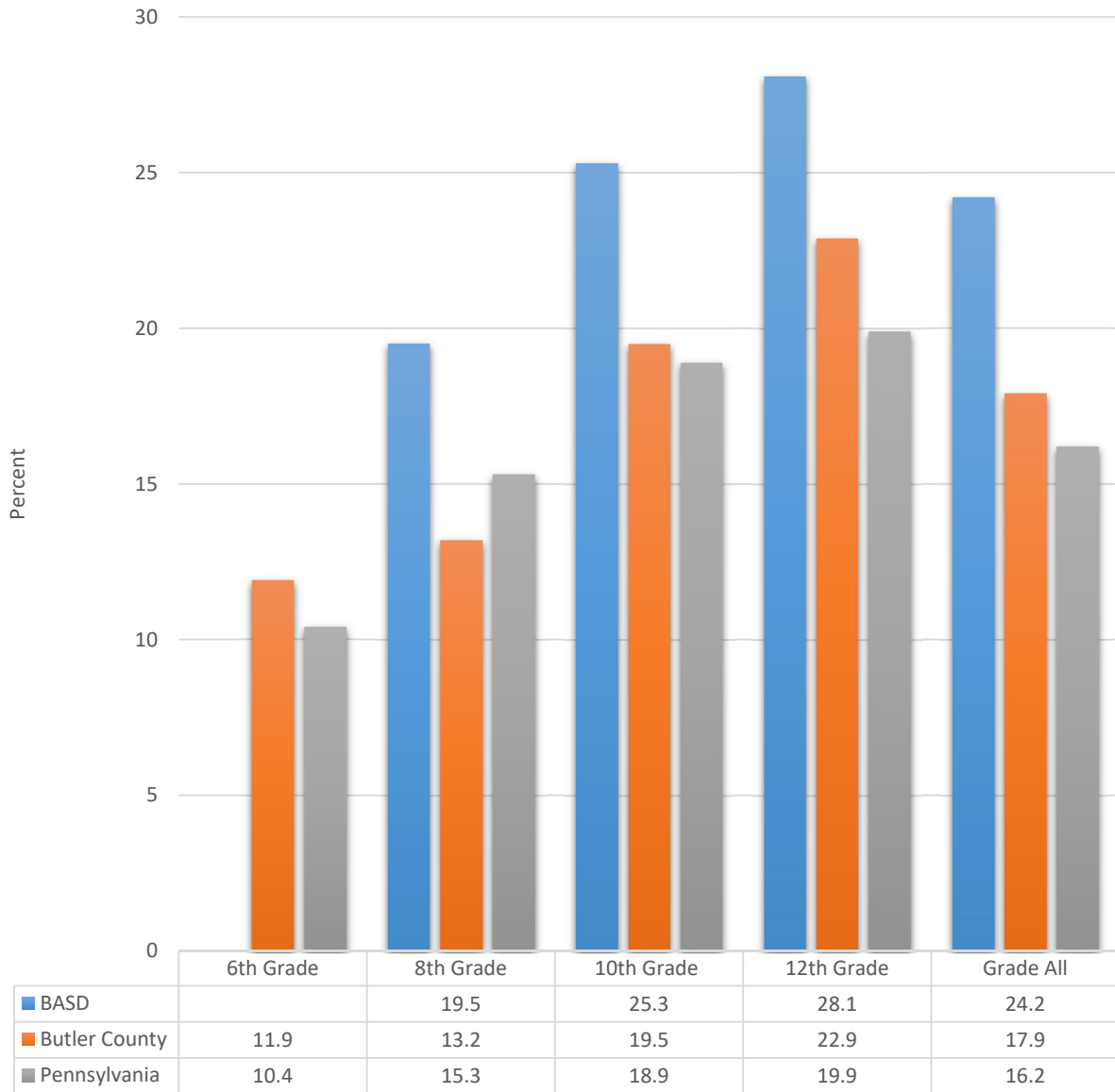
- The county average for 10<sup>th</sup> and 12<sup>th</sup> grade students who have felt depressed in the past 12 months is higher than the state.
- The percentages of 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grade BASD students that have felt sad or depressed in the past 12 months exceed county and state percentages.



*Figure 10: PAYS- Percentage of students who have felt depressed or sad, they lacked interest in performing their usual activities*

- The county average for 6<sup>th</sup> through 12<sup>th</sup> graders who have felt depressed in the past 12 months is higher or the same as the state for the same grades.
- 40% of BASD students in the 12<sup>th</sup> grade reported feeling so sad or depressed they lacked interest in performing their usual activities.

**Percentage of Students Within Butler Area School District, Butler County and State Who Have Seriously Considered Suicide**



*Figure 11: PAYS- Percentage of students who have considered suicide within their lifetime*

- Nearly 20% of 10<sup>th</sup> graders and 23% of 12<sup>th</sup> graders in Butler County have considered suicide.
- The percentages of students in the 8<sup>th</sup>, 10<sup>th</sup> and 12<sup>th</sup> grades in BASD who have considered suicide exceeded the county and state percentages.



### Percentage of Students Within Butler Area School District, Butler County and State Who Have Planned Suicide

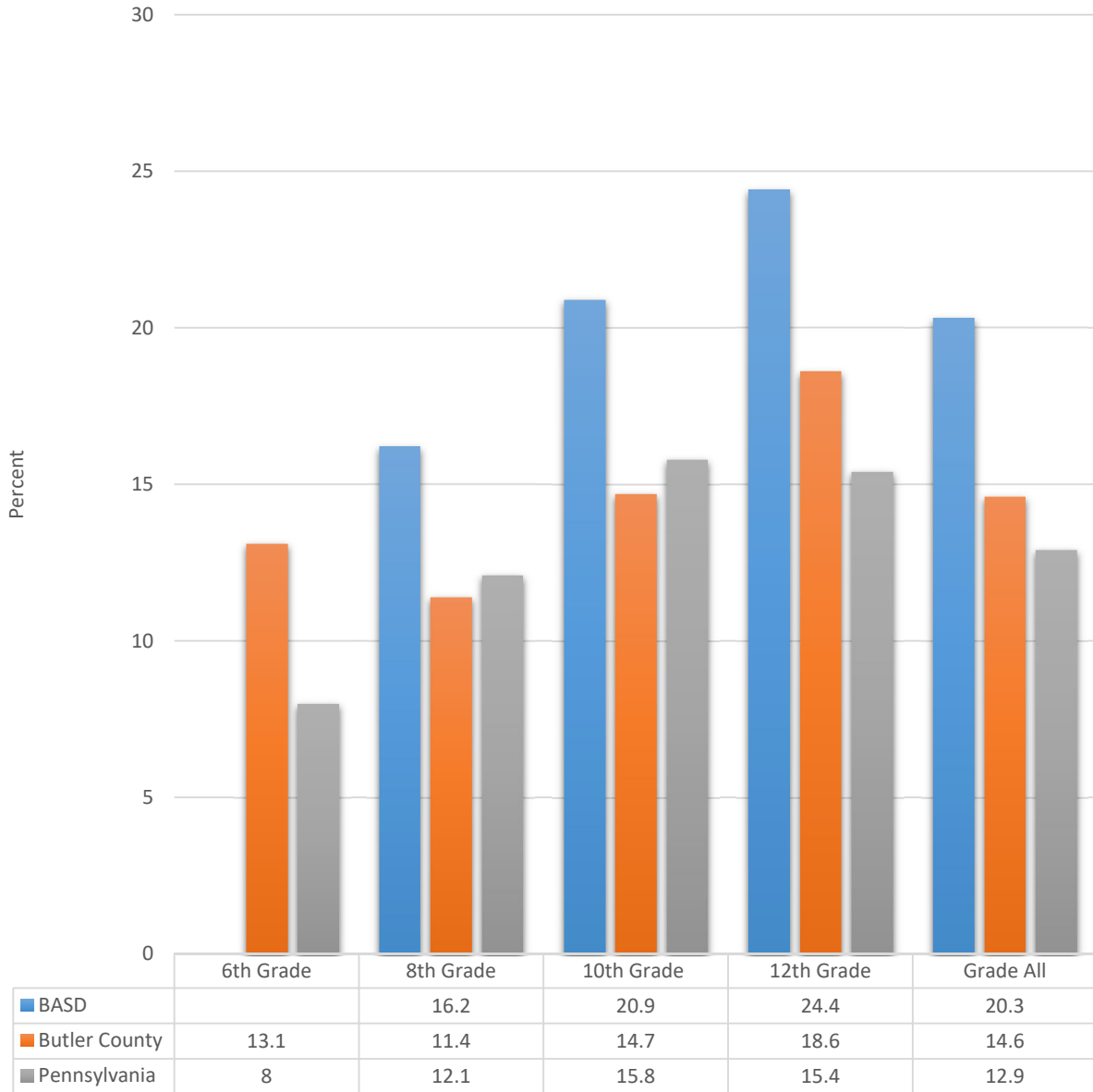
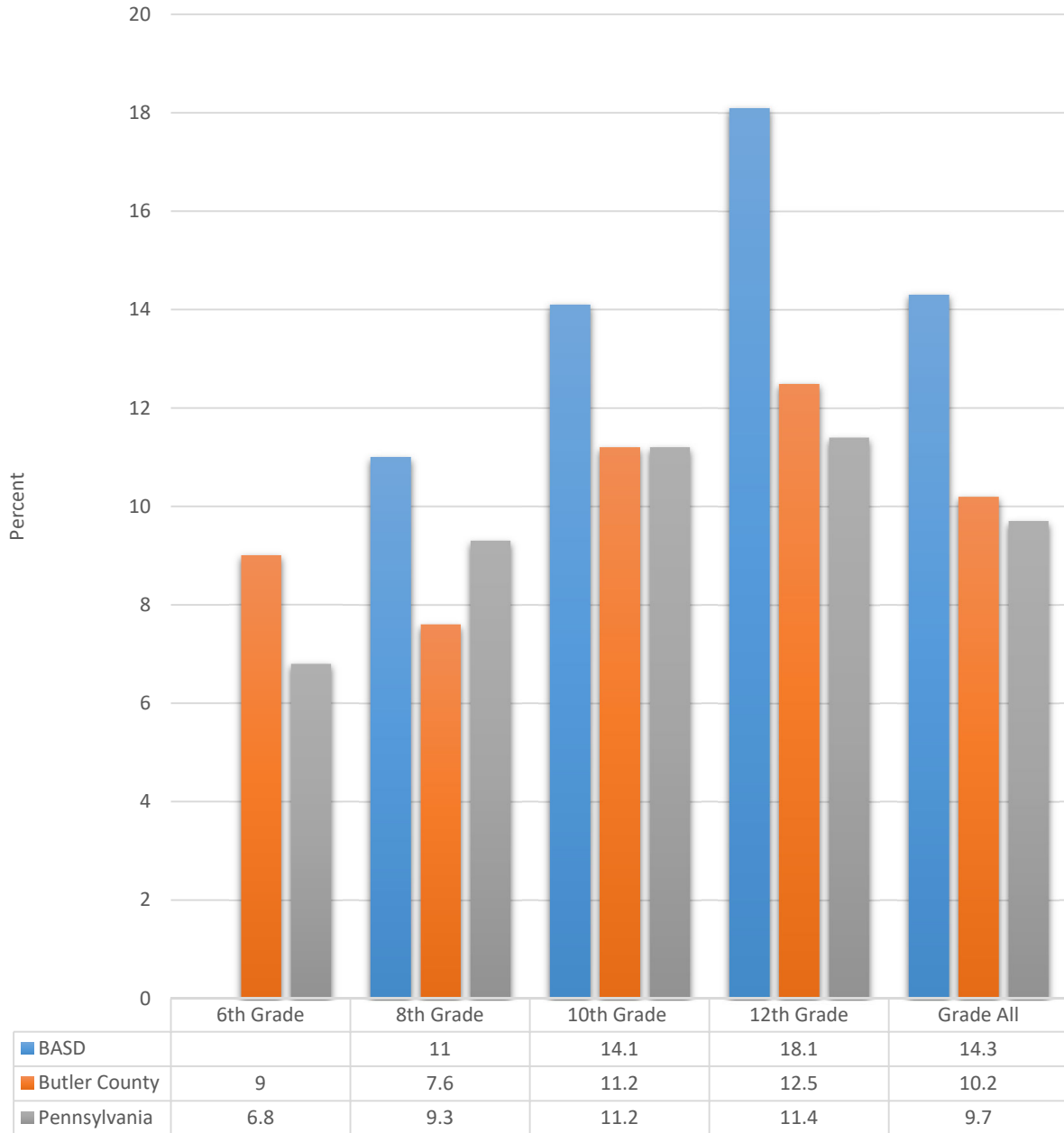


Figure 12: PAYS- Percent of students who have planned suicide

- The percentage of students who have planned suicide in Butler County is higher than the state average by around 2% while the student percentage for BASD is alarmingly higher at 7%.
- Almost 25% of 12<sup>th</sup> grade students in the BASD have planned suicide.

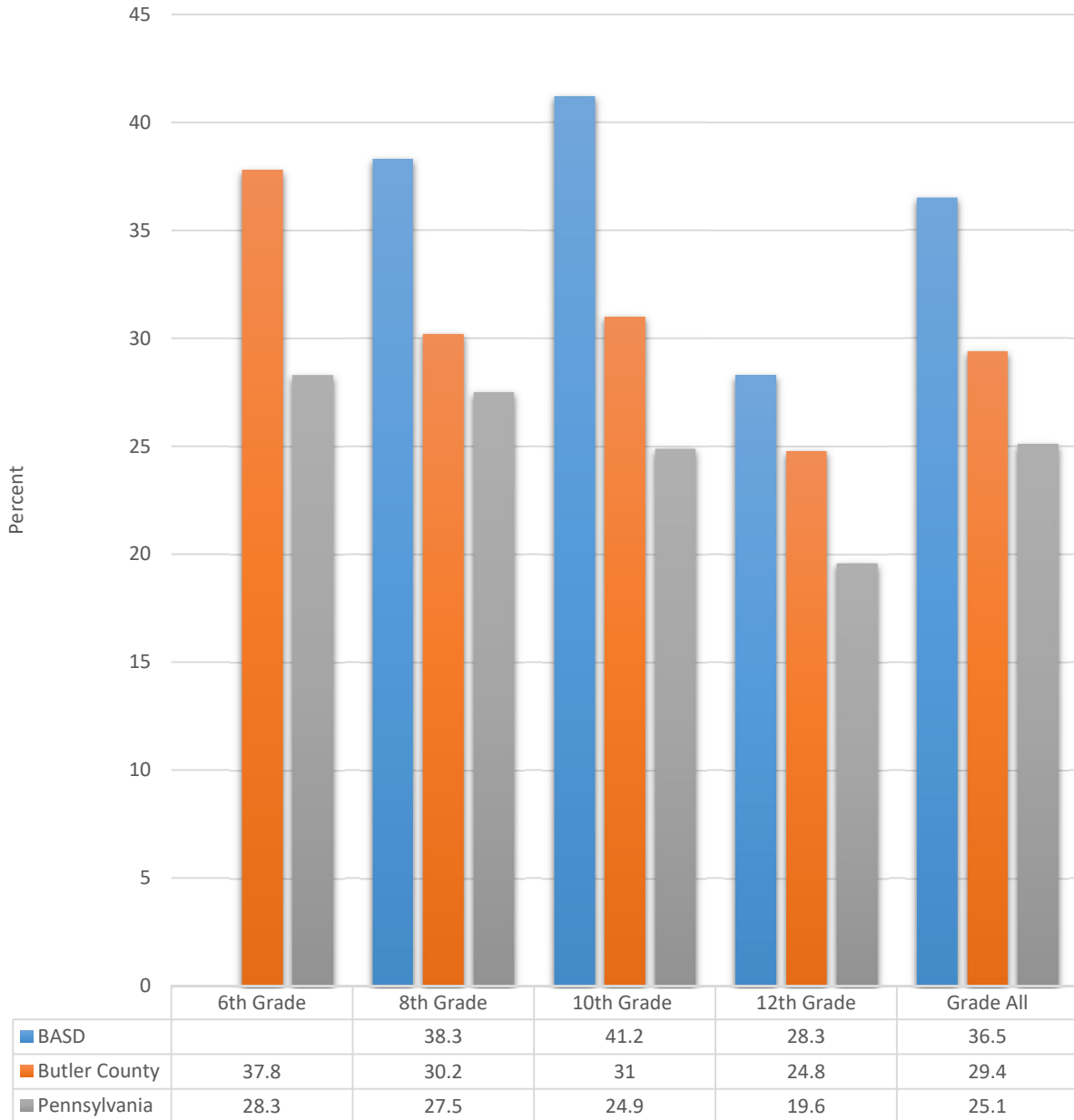
**Percentage of Students Within Butler Area School District, Butler County and State Who Have Attempted Suicide Within Their Lifetime**



*Figure 13: PAYS- Percent of students who have attempted suicide*

- 6<sup>th</sup> and 12<sup>th</sup> graders in Butler County have attempted suicide rates that are higher than the state averages for 6<sup>th</sup> and 12<sup>th</sup> graders.
- For all grades, BASD has the highest rates of attempted suicide compared to the county and state with the highest percentage occurring in the 12<sup>th</sup> grade at 18.1%

**Percentage of Students Within Butler Area School District, Butler County and State Who Have Been Bullied in the Past 12 Months**



*Figure 14: PAYS- Percent of students who have been bullied in the past 12 months*

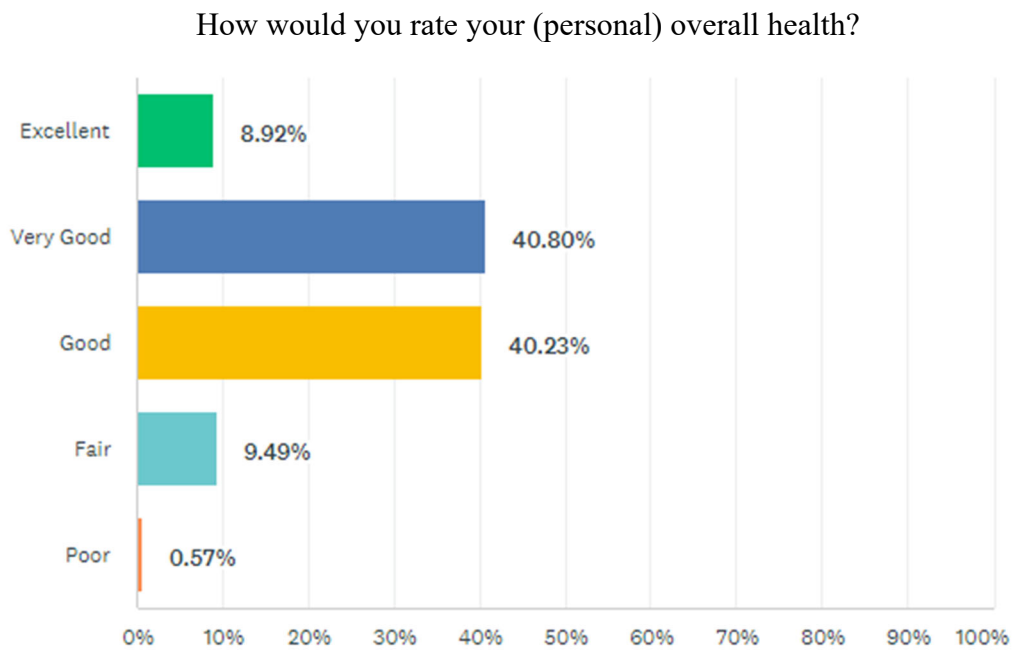
- Overall, Butler County sees higher rates of bullying than the state average for all grades.
- For all grades, BASD has higher rates of bullying compared to the county and state.

## Community Survey

In attempt to reach as many people and distinct populations as possible, BMH promoted the survey through focus groups, emails and physician office visits. BMH distributed the survey electronically and it could be accessed from a link or QR code.

BMH employees who live in Butler were also asked to fill out the survey. BMH collected 529 surveys completed by community members. The survey asked several questions regarding the individual's health status and other factors linked to health, like demographics, and consumption of fresh fruits and vegetables. The following is a summary of the results found through the community survey.

### Survey Results



*Figure 15: Community –Personal health status*

- 8.92% of respondents described their health as excellent. 81.03% described their health as good or very good. 9.49% described their health as fair and 0.57% described their health as poor.

How would you rate the health status of the community?

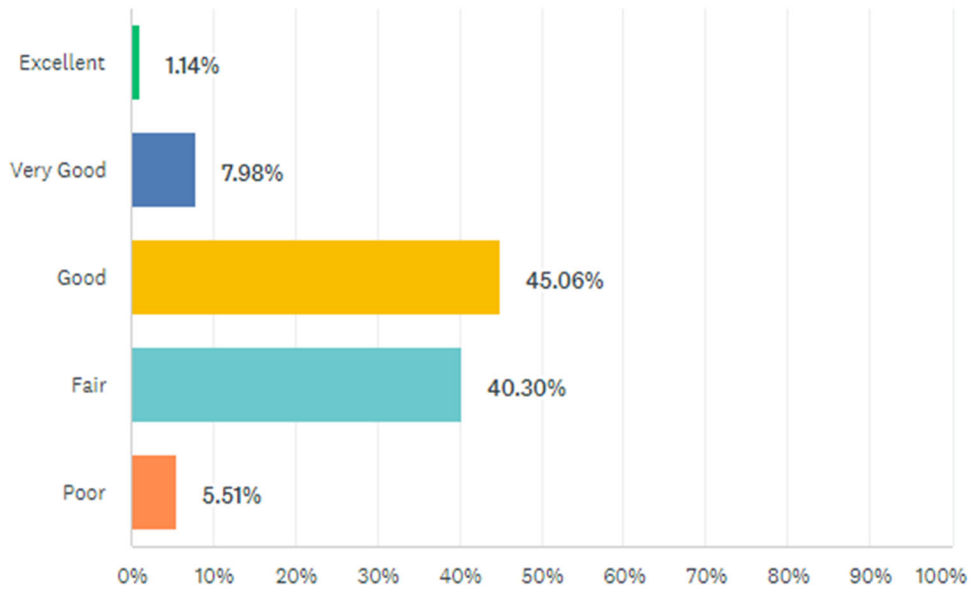


Figure 16: Community – health status of the community

- 1.14% of respondents described the health status of the community as excellent. 53.04% described the health of the community as good or very good. 40.3% described overall community health as fair and 5.51% described their community health as poor.

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

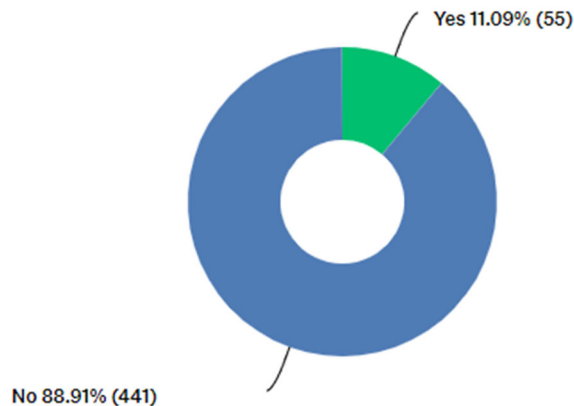


Figure 17: Community – Individuals that smoke or use e-cigarettes (Vape pens, Juul, etc.)

- Majority of the community members surveyed do not smoke or use e-cigarettes (89%).

About how long has it been since you last visited a doctor for a routine checkup?

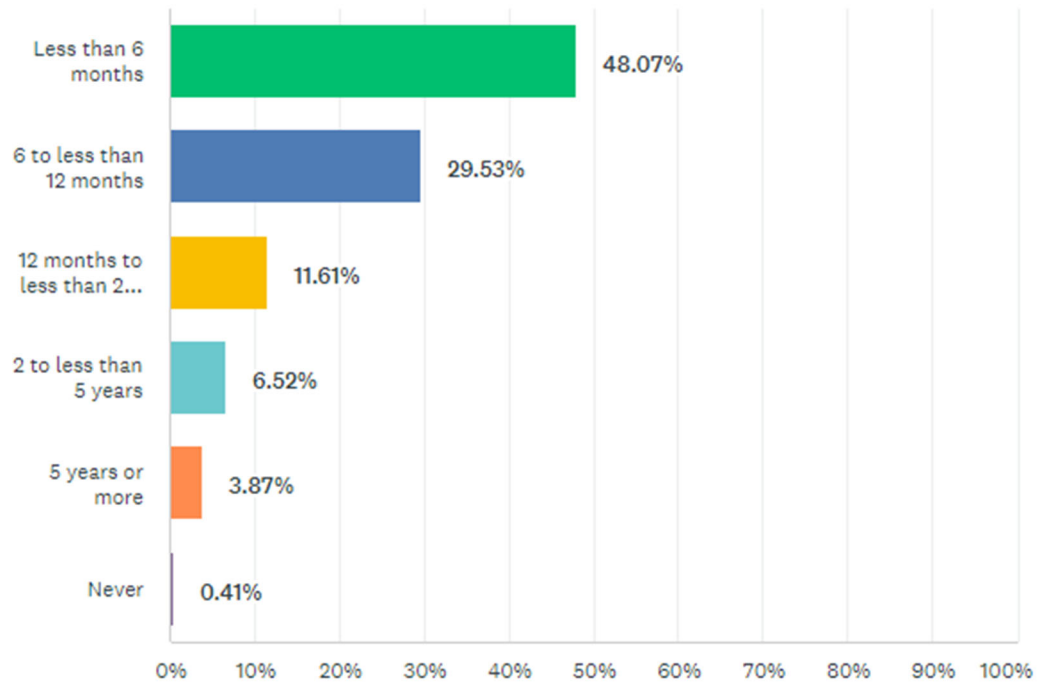


Figure 18: Community – Routine check up

- Approximately 78% of Butler County community members surveyed received a routine checkup within the past 12 months.



Do you have any kind of health care coverage, including health insurance, prepaid plans, such as HMO's or government plans such as Medicare?

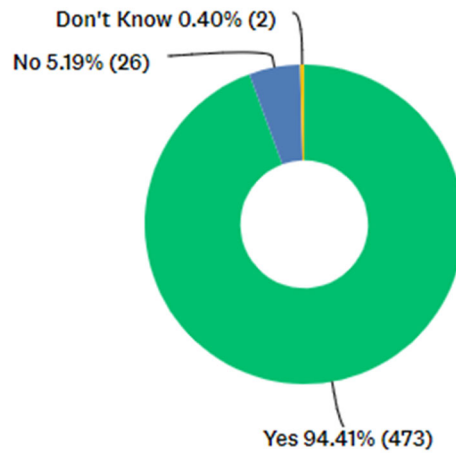


Figure 19: Community – Health care coverage

- Approximately 95% of those surveyed have some type of healthcare coverage while 5% have no health insurance.

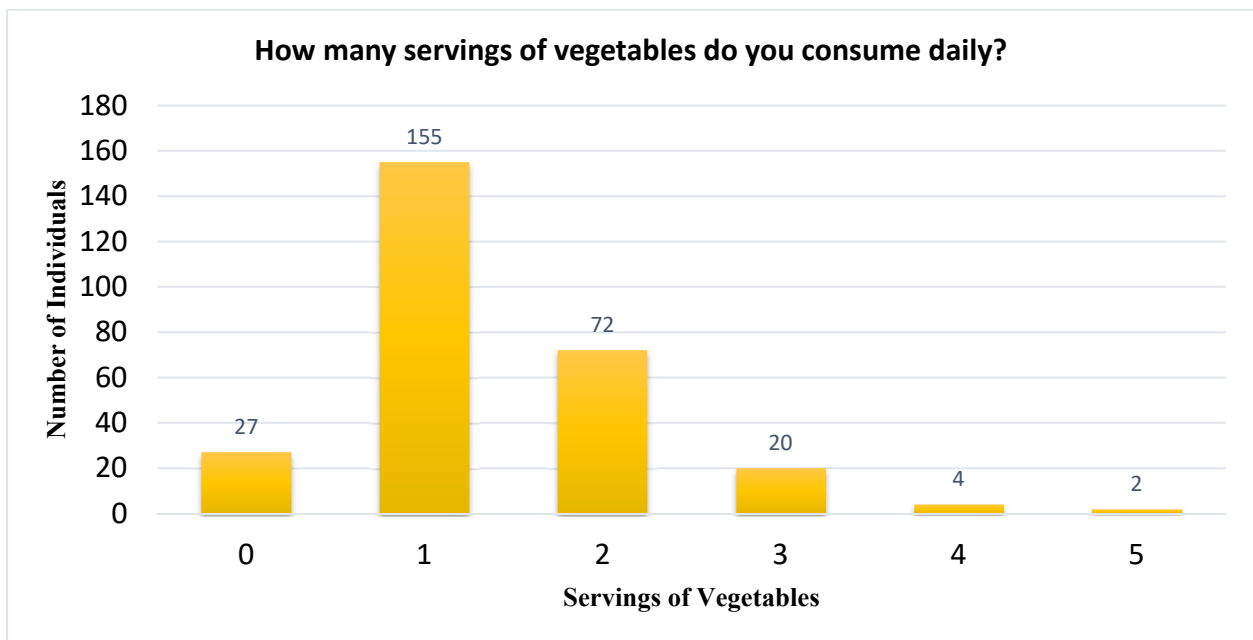


Figure 20: Community- Average Vegetable Servings Consumed Daily

- Of the 283 respondents, most people eat only 1-2 servings of vegetables daily.

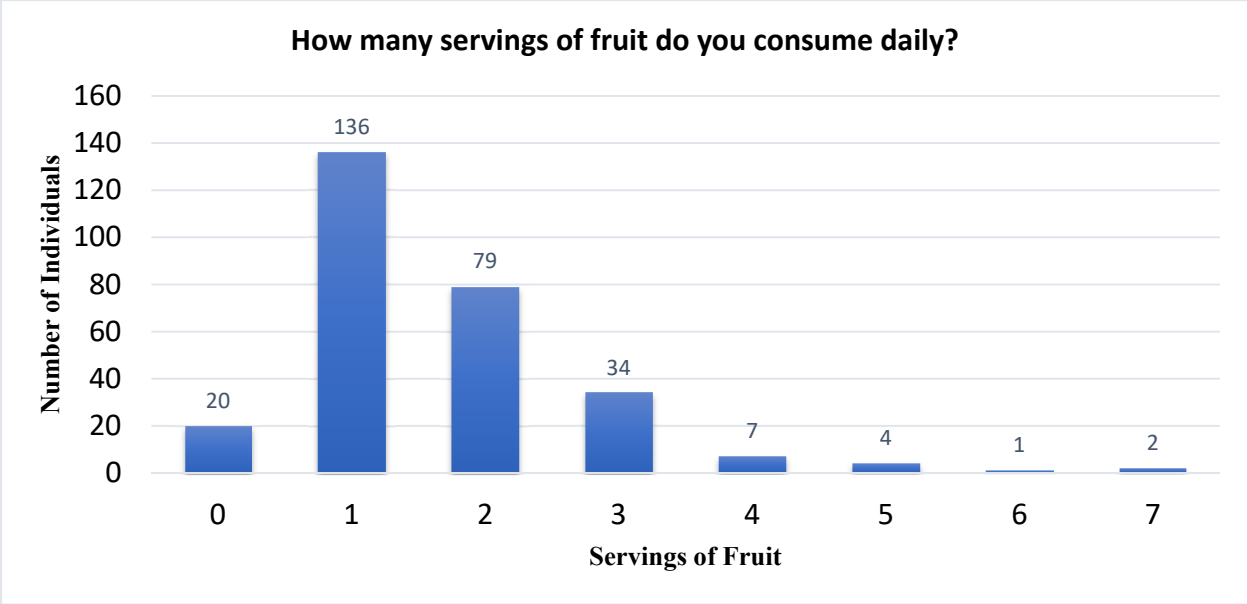


Figure 21: Community- Average Fruit Servings Consumed Daily

- Of the 283 responses, 215 consume 1-2 servings of fruit daily.

Social and Environmental Issues

	VERY SERIOUS PROBLEM	SERIOUS PROBLEM	SOMEWHAT OF A PROBLEM	SMALL PROBLEM	NOT AT ALL A PROBLEM	TOTAL
Affordable and adequate housing	9.55% 38	20.85% 83	44.97% 179	15.83% 63	8.79% 35	398
Homelessness	5.34% 21	13.23% 52	36.64% 144	32.32% 127	12.47% 49	393
Employment opportunities/lack of jobs	3.52% 14	9.55% 38	23.12% 92	25.63% 102	38.19% 152	398
Poverty	7.83% 31	29.29% 116	36.62% 145	18.69% 74	7.58% 30	396
Recreation opportunities	5.06% 20	13.92% 55	35.19% 139	22.78% 90	23.04% 91	395
Safe roads and sidewalks	5.28% 21	13.82% 55	27.14% 108	33.92% 135	19.85% 79	398
Early childhood development/child care	5.32% 21	13.42% 53	29.37% 116	31.90% 126	20.00% 79	395
Access (including driving distance) to affordable foods, including fresh fruit and vegetables	7.81% 31	10.83% 43	24.94% 99	27.20% 108	29.22% 116	397

Table 5: Community- Social and Environmental Issues

- The three issues with the highest priority for survey participants were affordable and adequate housing, poverty, and access to healthy foods.

## Behavioral Issues

	VERY SERIOUS PROBLEM	SERIOUS PROBLEM	SOMEWHAT OF A PROBLEM	SMALL PROBLEM	NOT AT ALL A PROBLEM	TOTAL
Alcohol Abuse	18.48% 73	35.70% 141	30.63% 121	8.10% 32	7.09% 28	395
Prescription drug abuse	28.86% 114	35.19% 139	23.80% 94	5.32% 21	6.84% 27	395
Child abuse	11.79% 46	23.59% 92	37.18% 145	19.23% 75	8.21% 32	390
Crime	11.34% 45	27.46% 109	37.78% 150	15.87% 63	7.56% 30	397
Domestic Violence	13.08% 51	29.23% 114	35.38% 138	14.10% 55	8.21% 32	390
Illegal drug use	42.39% 167	32.74% 129	14.97% 59	3.81% 15	6.09% 24	394
Lack of exercise/physical activity	21.41% 85	38.79% 154	26.70% 106	7.05% 28	6.05% 24	397
Sexual behaviors (unprotected, irresponsible/risky)	11.22% 44	28.32% 111	36.48% 143	14.80% 58	9.18% 36	392
Teenage pregnancy	5.90% 23	17.44% 68	44.87% 175	23.85% 93	7.95% 31	390
Tobacco use	29.70% 117	36.29% 143	19.29% 76	7.87% 31	6.85% 27	394
Violence	12.85% 50	27.51% 107	33.68% 131	18.51% 72	7.46% 29	389
Tobacco Use in Pregnancy	14.03% 55	23.47% 92	33.67% 132	18.88% 74	9.95% 39	392
Delinquency/Youth Crime	11.99% 47	22.96% 90	39.03% 153	17.35% 68	8.67% 34	392
Motor Vehicle Crash Deaths	6.11% 24	17.05% 67	39.44% 155	28.50% 112	8.91% 35	393

*Table 6: Community- Behavioral Issues*

- The top three issues under the behavioral category are drug abuse, lack or exercise/physical activity, and tobacco use.

## Access to Health Care

	VERY SERIOUS PROBLEM	SERIOUS PROBLEM	SOMEWHAT OF A PROBLEM	SMALL PROBLEM	NOT AT ALL A PROBLEM	TOTAL
Access to Insurance coverage	6.91% 27	21.74% 85	34.02% 133	23.27% 91	14.07% 55	391
Access to Adult Immunizations	4.07% 16	5.34% 21	21.63% 85	32.06% 126	36.90% 145	393
Access to Childhood Immunizations	3.11% 12	3.63% 14	15.80% 61	34.20% 132	43.26% 167	386
Access to General health screenings including blood pressure, cholesterol, colorectal cancer and diabetes	3.58% 14	9.46% 37	24.04% 94	31.97% 125	30.95% 121	391
Access to Mental health care services	24.37% 96	24.11% 95	19.80% 78	15.74% 62	15.99% 63	394
Access to Prenatal care	4.64% 18	11.08% 43	22.68% 88	33.51% 130	28.09% 109	388
Access to transportation to medical care providers and services	11.70% 46	19.34% 76	27.23% 107	22.39% 88	19.34% 76	393
Access to Women's health services	6.68% 26	14.65% 57	26.99% 105	28.53% 111	23.14% 90	389
Access to primary medical care providers	4.85% 19	11.22% 44	25.26% 99	31.89% 125	26.79% 105	392
Availability of Specialists/specialty medical care	8.65% 34	18.58% 73	27.23% 107	26.21% 103	19.34% 76	393
Access to affordable health care (related to copays and deductibles)	18.58% 73	25.95% 102	24.17% 95	19.59% 77	11.70% 46	393
Access to dementia care services	11.79% 46	21.54% 84	27.95% 109	23.08% 90	15.64% 61	390
Access to dental care	9.72% 38	15.86% 62	23.27% 91	30.43% 119	20.72% 81	391

*Table 7: Community- Access to Health Care*

- In the category of access to health care the high priority issues are mental health care services, transportation, affordable health care, and dementia care services.

## Health Problems

	VERY SERIOUS PROBLEM	SERIOUS PROBLEM	SOMEWHAT OF A PROBLEM	SMALL PROBLEM	NOT AT ALL A PROBLEM	TOTAL
Asthma/COPD related issues	7.20% 28	30.33% 118	35.22% 137	17.22% 67	10.03% 39	389
Cancer	18.67% 73	33.50% 131	31.46% 123	7.93% 31	8.44% 33	391
Diabetes	26.10% 101	38.24% 148	21.19% 82	6.46% 25	8.01% 31	387
Influenza and Pneumonia	6.68% 26	20.57% 80	39.33% 153	20.82% 81	12.60% 49	389
Heart Disease	21.71% 84	37.73% 146	24.81% 96	7.75% 30	8.01% 31	387
Obesity and overweight	41.84% 164	34.18% 134	14.29% 56	4.34% 17	5.36% 21	392
Childhood Obesity	31.04% 122	35.37% 139	22.39% 88	4.33% 17	6.87% 27	393
Cardiovascular Disease and Stroke	23.45% 91	37.63% 146	25.77% 100	5.93% 23	7.22% 28	388
High Cholesterol	21.24% 82	37.82% 146	27.20% 105	7.25% 28	6.48% 25	386
Hypertension/High Blood Pressure	24.55% 95	38.24% 148	24.03% 93	5.94% 23	7.24% 28	387
Lyme Disease	20.77% 81	31.03% 121	27.95% 109	13.59% 53	6.67% 26	390
Dental Hygiene/Dental Problems	14.43% 56	24.48% 95	35.05% 136	16.75% 65	9.28% 36	388

*Table 8: Community- Health Problems*

- Conditions associated with lifestyle and SDOH lead the list of health problems. These include obesity and overweight within adults and children as well as diabetes and cardiovascular conditions.

What do you feel are the top three community health priorities for the county you live in?

diabetes  
poverty jobs motivation smoking housing  
cancer employment opportunities mental health substance abuse  
heart disease diet & lifestyle health care poor diet obesity  
health insurance food insecurity high blood pressure government  
education support group children abuse transportation covid-19

*Figure 22: Community – Health Priorities*

- This is a collection of the respondents' thoughts on the top community health priorities for Butler County
- The top health priorities from community members are substance abuse, increased mental health need, and the metabolic complications of improper diets (obesity and diabetes), lack of exercise, and lack of health education.



## Stakeholder Survey

To capture additional information about Butler County, BMH surveyed stakeholders within the community. These individuals come from a vast range of backgrounds with clinical and non-clinical backgrounds. There were 36 completed Stakeholder surveys. Other stakeholders were interviewed in a focus group setting to provide further insight regarding problems within the community and the development of strategies for improvement.

### Survey Results

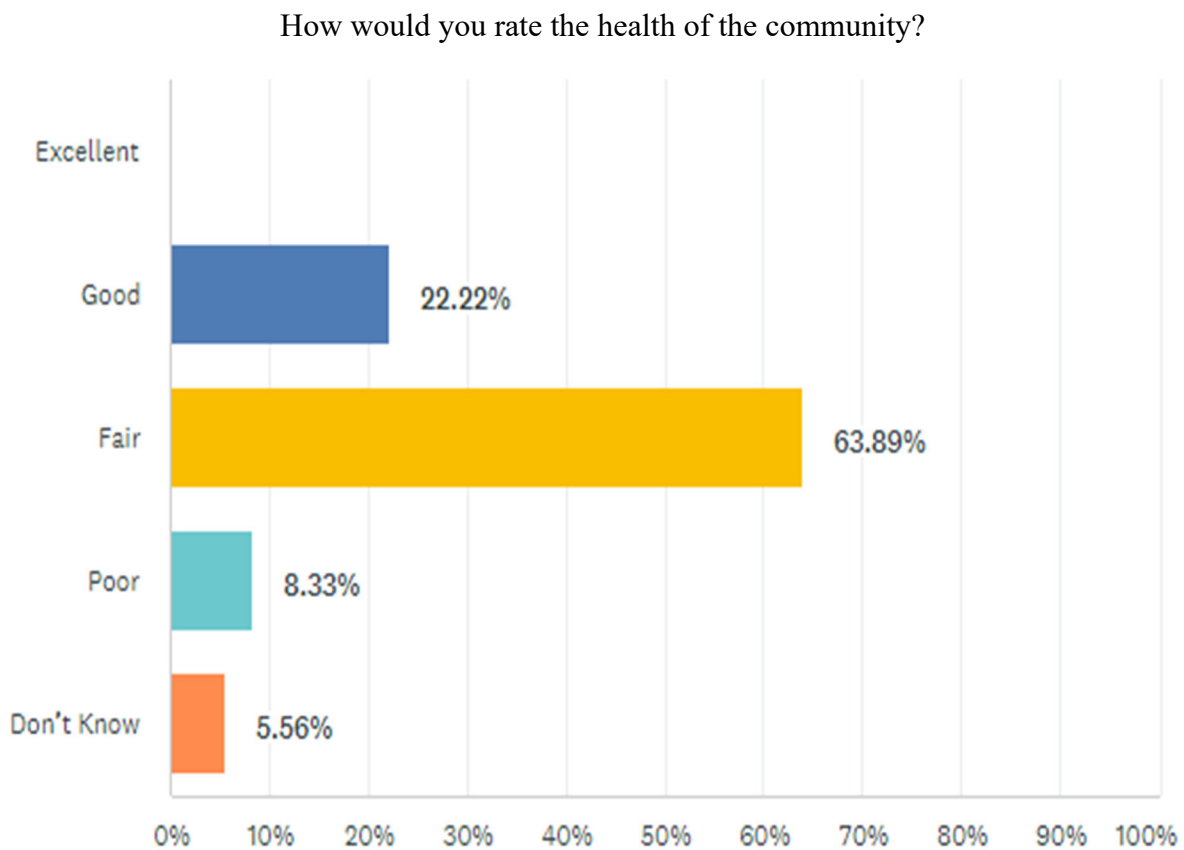


Figure 23: Stakeholder – Overall Health Status

- The majority of stakeholders rated the health of the community as fair (~64%) or good (~22%).

In your opinion, what is the most prevalent disease, condition or health issue the community is facing?

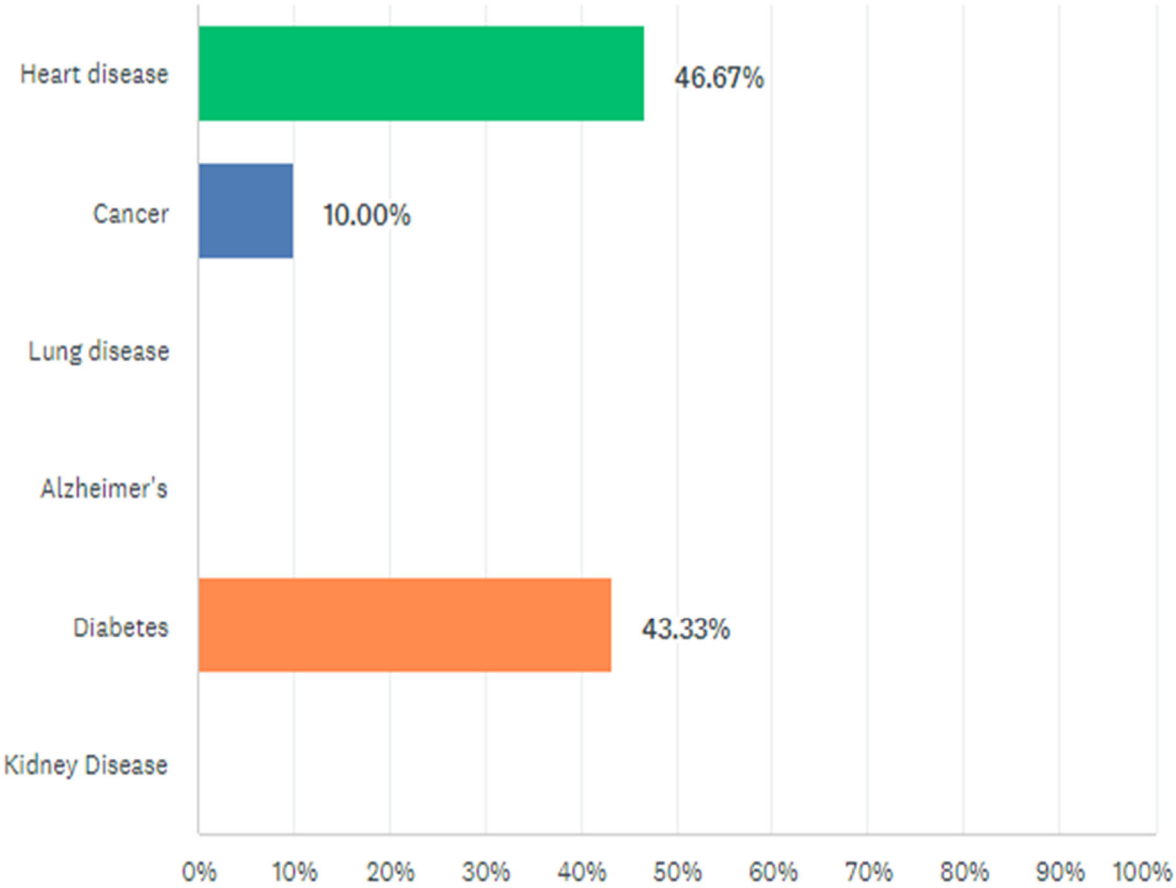


Figure 24: Stakeholder – Most Prevalent Disease

- BMH stakeholders view the three biggest health issues in Butler County are heart disease (~47%), diabetes (~43%), and cancer (10%).

What do you think are the top 3 community health needs for Butler County?

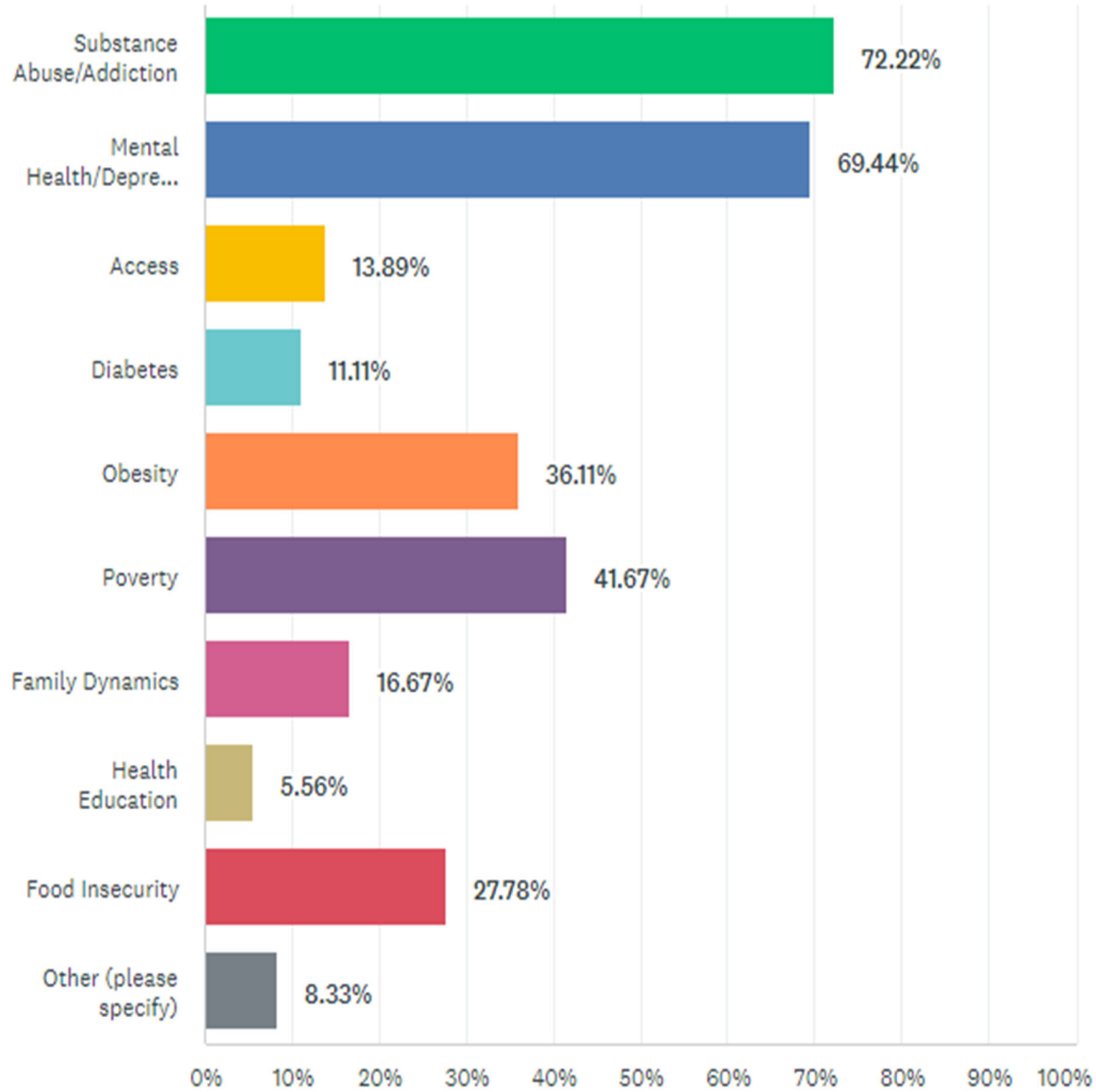


Figure 25: Stakeholder – Top health needs

- The stakeholders view substance abuse/addiction (~72%), mental health (~69%), and poverty (~42%). However, obesity (~36%) and food insecurity (~28%) are also high impact issues.
- The “other” category contained answers that chose more than 3 community health needs.

What are the barriers to individuals accessing health care services?

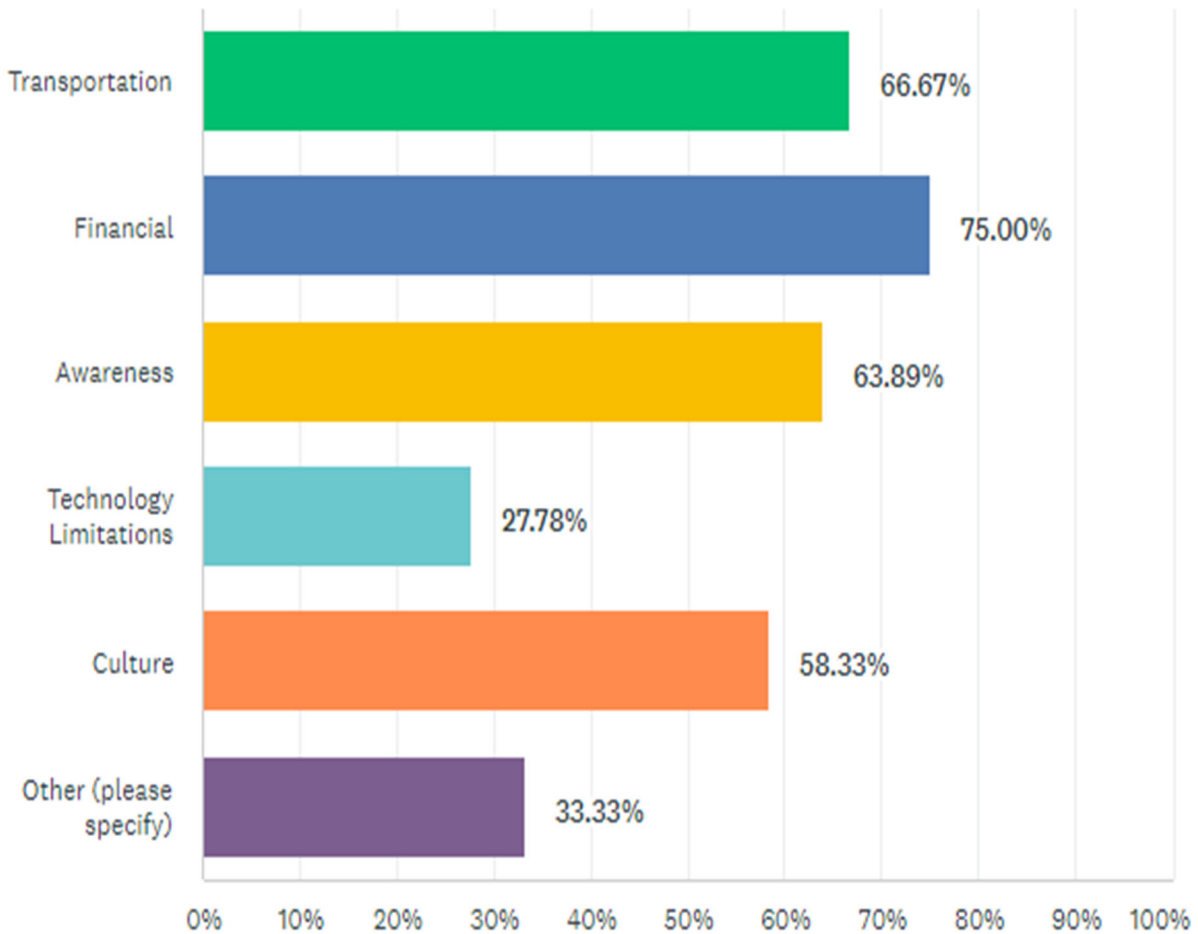


Figure 26: Stakeholder – Barriers Impacting Needs

- Transportation, financial, awareness, and culture are seen as the issues impacting the community’s health overall needs.
- The “other” category contained motivation, ignorance, misguided priorities, education, lack of realization, fear of judgment, what we think they “need” is different what they “need”, and unbroken cycles of poverty/abuse.

## **Focus Groups**

BMH conducted focus groups via ZOOM with key members of the community, healthcare experts from BMH and the BMH Behavioral Health Units and the community health needs assessment team. The focus groups reviewed the primary and secondary data collected from surveys to evaluate opportunities for BMH to collaborate with the community to address the identified issues. They focused on the top three identified issues: mental health, chronic disease and health education, and substance abuse.

### Mental Health

This first focus group meeting was held on December 10<sup>th</sup> 2021. We had 21 participants including BMH Drug and Alcohol Unit, Butler Area School District, The Center for Community Resources, Butler Human Resources, Butler County Community College, Butler Community Partnership and the Community Health Center.

A major theme of this focus group was the limited access to psychiatrists and other mental health professionals within our county, especially for the vulnerable populations like children and Medicaid and Medicare members. In the world of social media and the need to be “perfect and socially accepted” rates of stress, anxiety, depression and suicide are increasing amongst our youth across all socioeconomic demographics.

It was noted that children are more willing to discuss mental health issues if asked age-appropriate questions by adults sensitive to these issues. When adults ask mental health questions children feel safe knowing that someone cares about them and acknowledges that mental health is important for the overall health of every person. There is no need to hide their mental health problems. Another resource called “Safe to Say,” allows students to text and anonymously report that they or someone they know needs help. The schools in Butler County inform the students of this resource during general orientation and throughout the school year.

The COVID-19 pandemic has also caused increased feelings of loneliness and isolation in our school age children given the restrictions associated with social gatherings and sporting events felt to be necessary for their psychosocial growth and development. Parents, schools and the community discontinued many gatherings to keep kids “safe from getting or spreading COVID.”

### Future Strategies to Improve Mental Health Issues

- Implement a system to communicate to parents and students of school and community events to increase participation in extracurricular activities.
- Develop social networks for children to connect with each other to help create meaningful relationships for those who do not have the social skills to do it on their own.
- Develop better referral processes to access mental health specialists. Wait lists can be long and it is difficult for people to receive proper care in a timely fashion.
- The Butler Area School District is in the process of hiring behavioral modification specialists to help children develop and improve their social skills and interactions.

## Substance Abuse

The second focus group centered on substance abuse. Many of the representatives from the mental health group also attended the substance abuse group given the frequent commingling of these disorders. The focus group meeting (11 participants) was held on January 13<sup>th</sup>, 2022.

Substance use disorder remains a significant problem in our community. Of particular concern are those individuals on a fixed income or low wage jobs who have little to no reliable transportation to access recovery programs. Lack of knowledge on how or where to get help was also identified.

The focus group felt social media is a major contributor to substance abuse due to bullying, peer pressure and misinformation regarding the long term consequences of drugs and alcohol use.

A worrisome trend in the Butler Area School District is the increasing use of THC pens. It is reported that students are using these vaping pens as a coping mechanism to deal with the stress associated with peer pressure and the isolation due to COVID-19.

## Future Strategies to Improve Substance Abuse Issues

- Provide education to parents on the signs and symptoms of substance abuse. Schools educate students but parents need education as well.
- Provide easier access and availability to recovery programs. We need to address barriers such as lack of transportation and ongoing mental health issues that prevent people from seeking help.
- Continue ongoing engagement and collaboration with law enforcement to help individuals obtain the basics like employment and a driver's license for those who have a history of incarceration.

## Health Education and Chronic Illness

The third and final focus group addressed the need for ongoing health education to stem the tide of chronic illnesses such as obesity, diabetes, and heart disease. The focus group meeting was held on January 28<sup>th</sup> 2022. We had 17 participants from various backgrounds, including Butler Area School District, Center for Community Resources, Butler County Community College, Community Health Center and Butler Human Resources.

Focus group members identified poverty as a significant barrier to nutritious foods and nutrition education. Healthy foods are expensive and there is no grocery store within walking distance in downtown Butler. Transportation to and from the nearest grocery store is also problematic for many community members.



Due to COVID-19 there has been an increase in SNAP benefits and food distribution via food banks. However, with expiration of the CARES act there is concern that food insecurity will increase due to a decrease in SNAP benefits. Prior to the increase in SNAP benefits food distribution centers saw 700 to 800 families per week. The subsequent increase in SNAP benefits saw a reduction in need to 200 to 300 families per week.

The Butler Area School District has been actively involved with providing children with lunches and breakfast throughout the year. During school closings due to the Covid-19 Pandemic the issue of access to food was highlighted. The school placed tremendous efforts on ensuring food insecurities were met and has continued these efforts when school resumed.

### Future Strategies to Improve Health Education and Chronic Illness

- Engage Butler county farms with food insecure residents. This pilot study of 15 families required families to be at the 200% federal poverty line. The goal of this program was to provide nutrition education and healthy meals to food-insecure families on a limited budget. A barrier identified by this program was that qualified families did not want to identify themselves as needing assistance.
- Institute more farmers markets in the community to increase access to fresh fruits and vegetables and providing healthy recipes.

### ***Food Insecurity in Butler County***

The Greater Pittsburgh Food Bank estimates that the overall rate of food insecurity in the county is 10.1% in 2021. The food insecurity among children is 12.1%. The estimated meals distributed in fiscal year 2021 was 1,438,488 meals. (<https://www.pittsburghfoodbank.org/learn/hunger-by-county/butler-county/>)

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 50.
- **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 2019. All graphs can be found below.

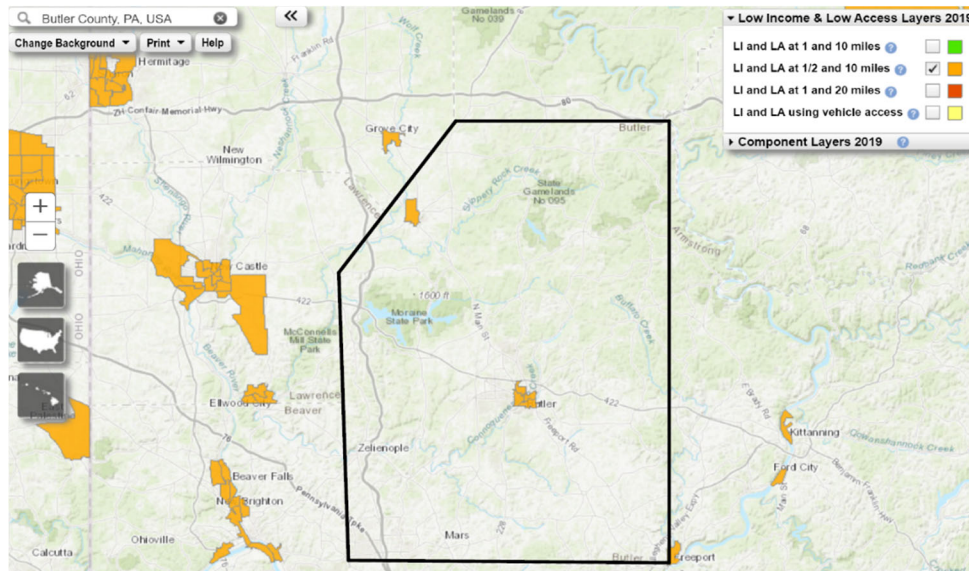


Figure 27: Food Access Research Atlas- LI and LA at 1 and 10 miles  
[\(https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/\)](https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/)

- 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.

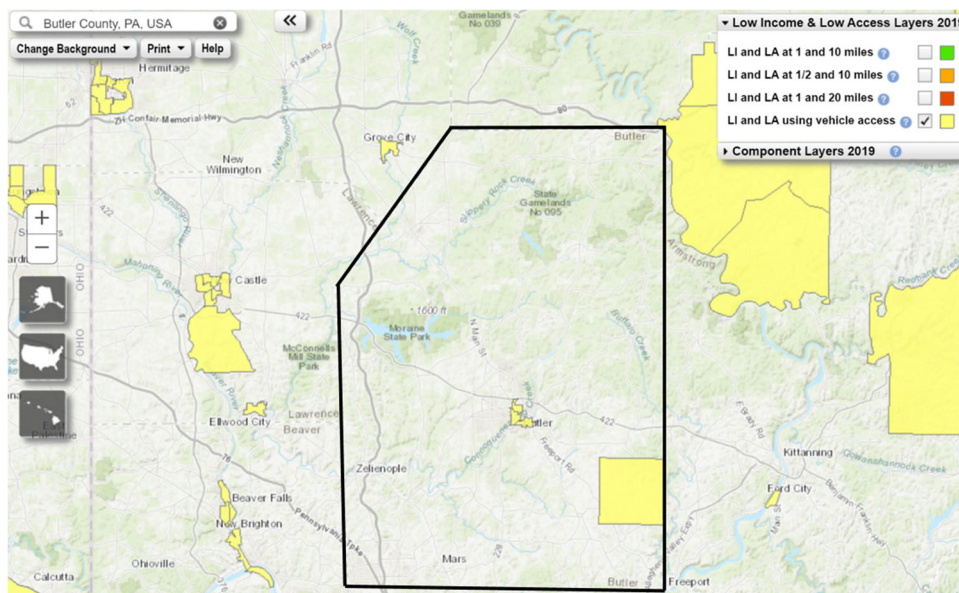


Figure 28: Food Access Research Atlas- LI and LA using vehicle access  
[\(https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/\)](https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/)

- 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.

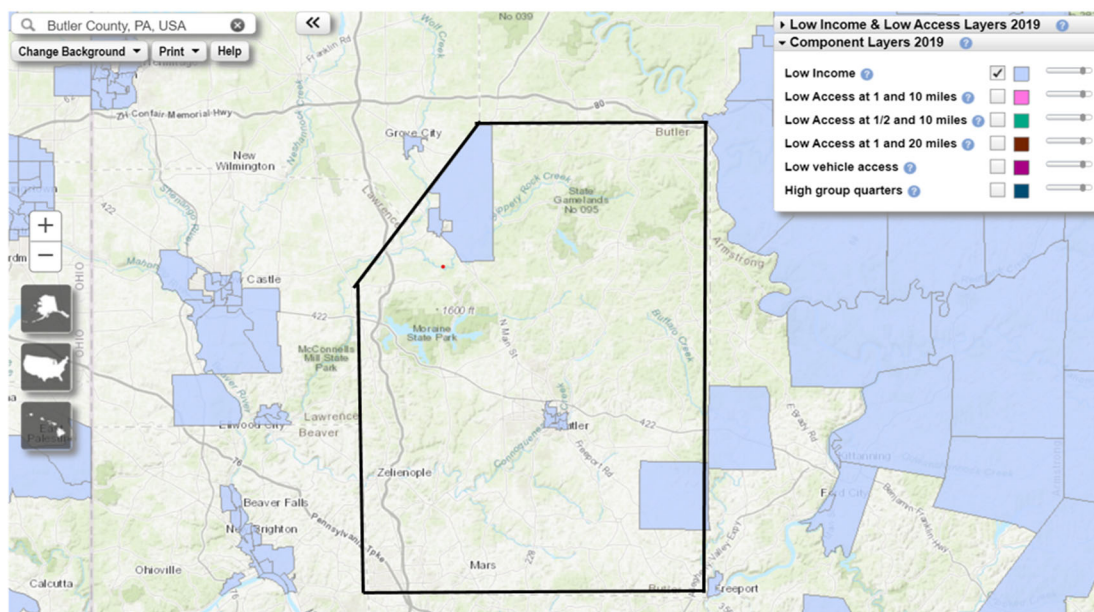


Figure 29: Food Access Research Atlas- Low Income  
[\(https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/\)](https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/)

- 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.

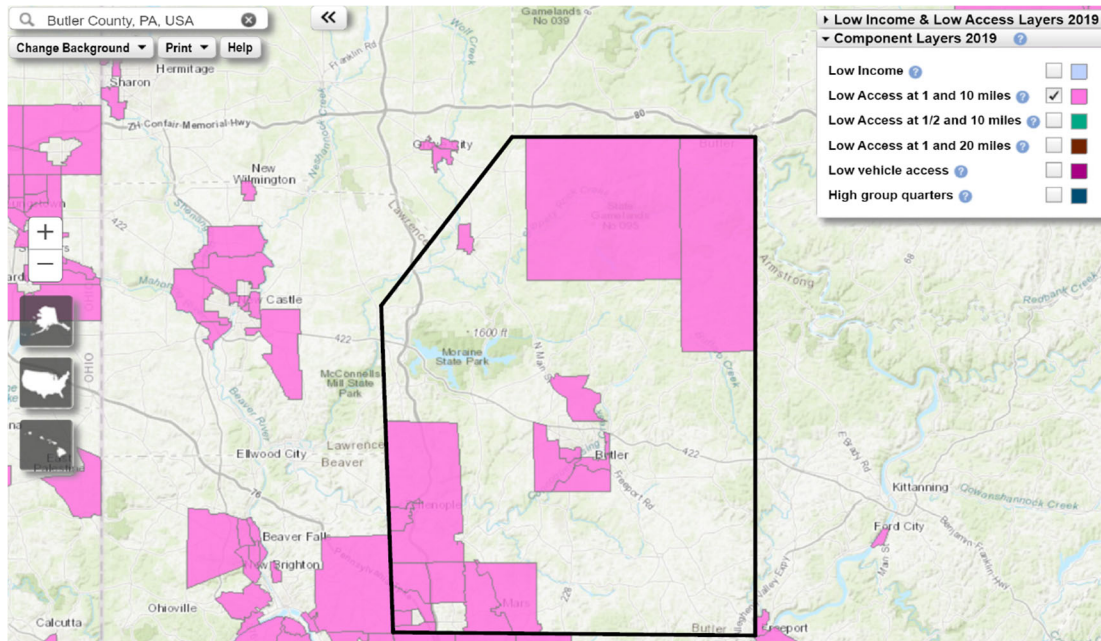


Figure 30: Food Access Research Atlas- Low Access at 1 and 10 miles  
<https://www.ers.usda.gov/data-products/food-access-research-atlas/go-to-the-atlas/>

- 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.



## **The Development of the BHS Food Institute – Pilot Program**

On April 1<sup>st</sup>, 2021, the hospital opened its doors to the BHS Food Institute (FI) with the goal of providing nutrition education, healthy foods and recipes and needed utensils to those facing food insecurity. The hope is that over time the health system will see a decrease in the chronic illnesses of obesity, diabetes and heart diseases.

In the first year, the institute has had 362 referrals with a 70% participation rate. Referrals to the FI are through BHS providers. Patients are asked the following screening questions:

1. Within the past 12 months we worried whether our food would run out before we got money to buy more.
2. Do you have difficulty accessing fresh fruits and vegetables?
3. Do you rely on foodbanks, food pantries, or other programs for you/your family to get food?

An answer of yes to any of these three questions can generate a referral to the FI if the patient so chooses. The referral is good for one visit per month for six months. At each visit the patient meets with a nutrition liaison, receives basic nutrition education and counselling (ex. label reading, My Plate, low sodium diets) and receives fresh produce and shelf-stable foods. If other SDOH issues are identified the patient is referred to the Center of Community Resources for further support. Patients are also given a list of the free Lifestyle Coaching classes (see below) for further education on a variety of healthcare topics and chronic disease education.

Phase two includes the health system developing a Food Institute on the Clarion campus.

### **BHS Evidence-Based Lifestyle Coaching Programs**

**Volumetrics Weight Management:** The Volumetrics diet was created by Dr. Barbara Rolls, a nutrition researcher and professor at Penn State University. It's based on the principle of energy density, meaning the amount of calories per gram of food. This evidence based diet recommends eating larger portions of low energy-dense foods, and smaller portions of high energy-dense foods. Water content of whole foods also containing fiber, vitamins, minerals and phytonutrients replace high sugar, highly processed, high fat (especially animal fat) foods for a lower calorie density diet. Other evidence based approaches include incorporating daily physical activity and behavior modification for permanent change to take weight off and keep it off.

**Diabetes Lifestyle Coaching:** The Association of Diabetes Care and Education Specialists (ACDES) ACDES7 self-care behaviors for people with diabetes is the basis of this 4 week series. The 7 behaviors include reducing risk, monitoring, taking medication, healthy eating, being active, healthy coping, and problem solving. This series is taught by a team of diabetes education specialist including team members from BHS endocrinology including a physician assistant and certified diabetes care and education specialist along with a registered dietitian from BHS Lifestyle Coaching and a social worker from BHS Employee Assistance Program.

**DASH:** The DASH diet (Dietary Approaches to Stop Hypertension) is a dietary pattern promoted by the National Heart, Lung, and Blood Institute (part of the National Institutes of

Health (NIH), to prevent and control hypertension. The DASH diet is rich in fruits, vegetables, whole grains, and low-fat dairy foods. It includes meat, fish, poultry, nuts, and beans, and is limited in sugar-sweetened foods and beverages, red meat, and added fats. In addition to its effect on blood pressure, it is designed to be a well-balanced approach to eating for the general public. The AHA considers the DASH diet "specific and well-documented across age, sex and ethnically diverse groups."

**Heart Healthy Eating Lifestyles:** American Heart Association “Life’s Simple Seven” research based approach to identify and control risk factors for Cardiovascular Disease is the platform for this seminar. The American Heart Association has defined ideal cardiovascular health based on seven risk factors that people can improve through lifestyle changes: smoking status, physical activity, weight, diet, blood glucose, cholesterol, and blood pressure. Studies show people in optimal ranges of Life’s Simple 7 have a lower risk of heart disease and stroke compared to people in poor ranges.

**Mediterranean Lifestyle:** The 2015-2020 US Dietary Guidelines, listed the Mediterranean diet as one of three healthy diets that they recommend for the American Population which also include the DASH diet or a vegetarian diet. According to an NIH evidence based, systemic review: “The Mediterranean diet is effective in preventing obesity and metabolic syndrome in healthy and at-risk individuals, in reducing mortality risk in overweight or obese individuals, in decreasing the incidence of type 2 diabetes and cardiovascular disease in healthy individuals, and in reducing symptom severity in individuals with type 2 diabetes or cardiovascular disease.”

**Plant-Based Eating/Flexitarian:** Plant-based eating has evolved to ensure an understanding that plant-based diets without highly processed vegan foods have multiple health benefits. The research is overwhelming that a healthy plant-based diet can prevent and even reverse many diseases. According to an NIH review of 11,879 participants of the NHANES III, the NIH concluded that: “Healthy Plant-Based Diets Are Associated with Lower Risk of All-Cause Mortality in US Adults”.

**Self-Care:** Self-Care was created during the COVID pandemic to address the 4 pillars of health. Eat right, move more, stress less and sleep well. This foundation is important for emotional and physical wellbeing and has also been incorporated into our Volumetrics Weight Management Ongoing series.

**Brain Health Seminars:** The brain health seminar are taught by a nurse practitioner from the BHS Stroke Center. These evidence based seminars teach participants research proven ways to lower their risk of brain disease. The seminars include: Mindfulness for Brain Health and Brain Healthy Lifestyles.

## **2022 Implementation Goals & Implementation Strategies**

### **1. Mental Health and Substance Abuse Support**

BHS seeks to incorporate an integrated model to help better meet the needs of the community.

The Integrated Health Care Model is simply a holistic approach to care, attempting to meet both the Physical and Behavioral Health needs of individuals under one umbrella, the Primary Care Office.

The two primary goals are:

- A) To support the Primary Care Physicians who are currently attempting themselves to manage their patient's Behavioral Health needs in their own office or attempting to refer them out without success.
- B) Access: To offer another door for patients to receive needed Behavioral health treatment as the Mental Health system is currently saturated resulting in people experiencing significant delays in services or not receiving treatment at all.

In this model, a Licensed Mental Health Therapist would be embedded within the Primary Care Office. They would be individually credentialed with each third party payer / insurance, and will bill under their own license. This eliminates the need for the site to be licensed as a "satellite" Mental Health center which would entail licensure, occupancy, obtaining a Promise number etc. There would be a separate and unique cost center for the Behavioral Health Therapist/s.

The Therapist would conduct an assessment of patients referred within the Primary Care office and make recommendations regarding treatment, interventions and referrals and develop an individualized treatment plan. The Treatment Plan will include an effective continuum of Therapeutic interventions, support, education and other services/ resources as indicated. This licensed clinician would have the ability to provide brief/short-term therapy – 5-8 sessions, using Evidenced Based treatment approaches. If long term treatment is indicated, a referral will be made to an appropriate agency. If it appeared that the individual could benefit from psychotropic medication, the Therapist would consult with a contracted psychiatrist.

The clinician would be able to provide an initial assessment to children, adolescents and adults. If the treatment recommendation is outside of the Therapist's scope of practice or determined to require long-term treatment, a referral would be made. Specialized treatment such as addiction and eating disorders would require a referral.

Supervision would be provided by BMH Department of Behavioral Health, however this Therapist would be physically stationed in the Primary Care office, in order to facilitate a warm hand off and expedite treatment.



## 2. Food Insecurity

Address the issue of food insecurity and chronic disease by giving community members access to healthy foods and nutrition education.

1. Provide Evidence based lifestyle education in a group setting (virtually and/or in person) for the community and employees.
2. Continued support and development of the Food Institute (FI) at Butler Health System. The FI specializes in nutrition education, meal planning and preparing healthy recipes on a budget. Participants receive healthy ingredients and cooking instructions to prepare meals on their own for up to 10 meals per month for 6 months.
  - a. Develop revenue stream to support salaries and supplies ( food and marketing) of the FI
  - b. Increase referrals to the FI
3. Normalize the issues of Social Determinants of Health (SDOH) through education and marketing.
4. Develop knowledge and understanding of health care inequities in our county
5. Implement Good Food Healthy Hospital an Initiative in collaboration between Hospital Association of Pennsylvania and Butler Health System.
  - a. Increase offering of healthier and more sustainable food and beverage choices
  - b. Eliminate industrially produced trans fats
  - c. Decrease the sodium content in available foods
  - d. Decrease the added sugar in beverages and dessert offerings
  - e. Allow individuals to make informed choices about what they are purchasing, selecting, and eating through labeling of menu items.

## Appendix A

### Human Service Guide for Butler County

#### Compiled by:

#### Butler Health System for the 2022 Community Health Needs Assessment

	<b>Abuse/Protection</b>
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
	<b>Advocacy</b>
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	800-692-7443
or	412-391-5225
Society of St. Vincent de Paul 7	24-287-3994
	<b>Children/Adolescents</b>
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	724-285-9431
or	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
	<b>Education</b>
Butler Area School District	724-287-8721
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

Amedisys Home Health  
Adagio Health  
Butler Heath System  
BHS Maternal Services  
Community Health Clinic  
Concordia Visiting Nurses  
Red Cross of West Central PA  
VNA, Western Pennsylvania  
WIC of Butler

### **Health**

724-284-4663  
724-282-2730  
724-283-6666  
724-284-4867  
724-841-0980  
724-352-1571  
724-283-2810  
724-282-6806  
866-942-2778

Catholic Charities  
Housing Authority/  
Deshon Place & Franklin Court  
Center for Community Resources  
or  
Lighthouse Foundation  
Salvation Army Butler County  
Society of St. Vincent de Paul

### **Housing/Homeless**

724-287-4011  
  
724-287-6797  
724-431-0095  
844-360-4372  
724-586-5554  
724-287-5532  
724-287-3994

Center for Community Resources  
BHS Family Services  
Mental Health Association  
Social Security Administration  
Society of St. Vincent de Paul  
United Way of Butler County  
Weatherization

### **Information/Referral**

724-431-0095  
724-284-4894  
724-287-1965  
800-772-1213  
724-287-3994  
724-285-4883  
724-342-6222

Disability Rights Pennsylvania  
District Attorney of Butler County  
Family Court  
Education Law Center- Pittsburgh  
Juvenile Court Services  
Neighborhood Legal Services  
PA Bar Association- Western PA  
PA Health Law Project  
Butler Co. Public Defender's Office  
Butler County Victim Services

### **Legal Services**

800-692-7443 or 412-391-5225  
724-284-5222  
724-284-5181  
412-285-2120  
724-284-5355  
724-282-3888 or 866-761-6572  
412-914-8840  
800-274-3258  
724-284-5335  
724-284-5232

Butler County MH/DA  
The CARE Center- SPSHS

### **Mental Health Services**

724-284-5114  
724-234-1370

Center for Community Resources	724-431-009 or 844-360-4372
Glade Run	724-452-4453
Kids Count Family Psychological Mental Health Association	724-287-1880 or 724-284-0076 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
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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

Amedisys Home Health  
Amedisys Hospice Care  
Lutheran Senior Life- Zelienople  
Lutheran Senior Life- Mars  
Quality Life Services- Chicora  
Quality Life Services- Sarver  
Transitions Healthcare- Harrisville

**Skilled Nursing Facilities**

724-284-4663  
724-431-4170  
724-452-5400  
724-625-1571  
724-445-2000  
724-353-1531  
724-735-4224





BUTLER HEALTH SYSTEM





Butler Health System is privileged to be a healing presence in the communities we serve. We exist to make a positive difference in the lives of people by providing compassionate, high-quality care and comfort and inspiring health and wellbeing.

**2022** | **COMMUNITY HEALTH  
NEEDS ASSESSMENT**

1 Hospital Way, Butler, PA 16001

 [ButlerHealthSystem.org](https://www.ButlerHealthSystem.org)