## Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td>3</td>
</tr>
<tr>
<td>- The process and methods used to conduct the assessment</td>
<td></td>
</tr>
<tr>
<td><strong>Overview of Health Priorities Identified for the Community</strong></td>
<td>4-6</td>
</tr>
<tr>
<td>- Criteria, Supporting Observations and Process for Selecting Priorities</td>
<td></td>
</tr>
<tr>
<td><strong>Population and Demographics</strong></td>
<td>7-22</td>
</tr>
<tr>
<td>- Description of Community Served</td>
<td></td>
</tr>
<tr>
<td><strong>Community Analysis</strong></td>
<td>23-34</td>
</tr>
<tr>
<td>- Health Status and Chronic Conditions</td>
<td></td>
</tr>
<tr>
<td>- Preventive Health</td>
<td>35-52</td>
</tr>
<tr>
<td>- Access to Care</td>
<td>53-63</td>
</tr>
<tr>
<td>- Children’s Health</td>
<td>64-74</td>
</tr>
<tr>
<td>- Older Adults</td>
<td>75-88</td>
</tr>
<tr>
<td>- Mental Health</td>
<td>89-94</td>
</tr>
<tr>
<td><strong>Input from the Community: Perception of Health Care Related Issues</strong></td>
<td>95-116</td>
</tr>
<tr>
<td><strong>Appendix</strong></td>
<td>118-120</td>
</tr>
<tr>
<td>- Data Sources and Dates, Data Gaps</td>
<td></td>
</tr>
<tr>
<td>- Input from the Community - Organizations</td>
<td>121-127</td>
</tr>
<tr>
<td>- Contributors with Special Knowledge</td>
<td>128-129</td>
</tr>
<tr>
<td>- Community Resources</td>
<td>130-132</td>
</tr>
<tr>
<td>- Priorities not being addressed at this time</td>
<td>133-134</td>
</tr>
</tbody>
</table>
Main Line Health System (MLH) has conducted a Community Health Needs Assessment (CHNA) at each of its hospitals with the purpose to better understand and respond to the health care needs of its communities. This CHNA, finalized in March 2013, is specific to Lankenau Medical Center (LMC) and builds upon a previous System-wide Main Line Health CHNA, which was completed and published in 2009.

**The Process**

The CHNA was compiled by analyzing population and demographic data and comparing health indicators such as health status, health conditions, and incidence and mortality rates to local, regional and national rates. Additional comparisons were made to understand influences on health, such as the use of preventive health services, access to care, mental health, children’s health and factors influencing the health of older adults. Some select economic, educational and behavioral influences were also reviewed. The data presented in the report were obtained from both public and proprietary sources. Input was also sought to represent broad interests of the community and obtained via a series of community surveys.

The LMC report contains information and commentary specific to four sub-areas in the LMC community health needs assessment area, including Suburban Core, Suburban Lawrence Park, Urban West and Urban North West. Four separate areas were reviewed, as these populations have varying attributes and health needs. MLH also conducted a CHNA report for each of its other system hospitals: Bryn Mawr Hospital (BMH), Bryn Mawr Rehabilitation Hospital (BMRH), Paoli Hospital (PH) and Riddle Hospital.
Community Health Needs

This CHNA contains information on numerous health indicators in various sections of the report including population and demographics, community-based data and community survey results. This information was utilized to understand the health status and identify the health needs of the community. Subsequently, the following criteria was considered to select community health need priorities.

- The health indicator is at lower performance than the regional, state and national benchmark, or the Healthy People 2020 target (HP2020)
- The health indicator reflects a national focus for improvement
- There are community stakeholder interests in the health indicator
- A special population was identified that warrants additional services

Additionally, a number of data observations were developed from which the following priorities were identified. The priorities are of equal importance.

Based on this criteria, the health priorities targeted for improvement include:

- Cardiovascular Health / Stroke
- Obesity / Diabetes
- Lung Disease
- Cancer
- Senior Care
- Cultural / Diversity

Supporting data for the selection of the above priorities follows. This information is also contained throughout the CHNA document.
Obesity / Diabetes

- The LMC Urban West population has the highest percent, (34.0%) of adults that are obese. This is higher than the Healthy People 2020 target (30.6%) and for Southeastern PA (SEPA) (26.3%). This area also has the highest percent of adults that do not exercise. Additionally, obesity was identified as one of the top concerns by community leaders, school nurses and other community members. Individuals who are overweight and obese have an increased risk for type 2 diabetes, heart disease and certain types of cancer.

Cardiovascular Health / Stroke

- Adults in both the Urban West (42.0%) and Urban North West (36.0%) are substantially above the SEPA percentage for high blood pressure. Residents in the Urban North West were also least likely to have their blood pressure checked. Additionally, mortality rates are higher for heart disease and stroke in the Urban West area than for SEPA. Heart disease is the leading cause of death in the US and stroke is the third leading cause of death. Controlling risk factors such as high blood pressure and high cholesterol for cardiovascular disease is critical to impacting the health of the community.¹
Cancer
• In Urban West the incidence rate for breast cancer is below SEPA, while the mortality rate is higher than SEPA. The Urban West and Urban North West are the areas that have the highest percent of adults who have never received a colonoscopy or sigmoidoscopy. This indicates an opportunity to increase screening for both breast and colon cancer. Reducing risk factors, early detection and providing a continuum of care from evidence-based screening to appropriate follow up can increase survival rates and reduce the burden of cancer in the U.S.¹

Lung Health
• There is a high incidence of lung cancer in the Suburban Lawrence Park and Suburban Core areas. The mortality rates for pneumonia are also higher in the Suburban Lawrence Park area. The percent of adults that smoke in the Suburban Lawrence Park, Urban West and Urban North West areas exceeds the HP2020 target of 12%¹.

Senior Care
• Older adults are the fastest increasing age segment in the LMC CHNA sub-areas and the Suburban Core has 18.1% age 65+, higher than in SEPA (13.5%). Older adults have a higher percentage of high blood pressure and high cholesterol and one in three older adults are coping with a chronic condition across all LMC sub areas. There is a national focus on the older adult population emphasizing the importance to promote healthy outcomes through a variety of programs such as disease and injury prevention education, promotion of self management, socialization, caregiver support and collaboration among hospitals, older adults, government, community and advocacy resources.¹

¹ Healthy People 2020: www.healthypeople.gov/2020/topicsobjectives2020
Cultural / Diversity

- There are diverse populations in the LMC community. Two sub-populations include the African-American population in Urban West Philadelphia comprising 74% compared to 21.8% in SEPA and the Jewish population in the Suburban Core comprising 21.8% verses 4.9% in SEPA. Changing demographics with varying health needs has prompted LMC, as part of the MLH System, to make cultural diversity a priority.

*Lankenau Medical Center will address these priorities with action plans to positively influence the health and well-being of the LMC community. These plans also have specific recommendations for addressing the health needs of low income and uninsured individuals.*

---

1 Healthy People 2020: www.healthypeople.gov/2020/topicsobjectives2020
Population and Demographics
## Population counts and projections

<table>
<thead>
<tr>
<th>Areas</th>
<th>2012 Pop</th>
<th>2017 Pop</th>
<th>Change</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>90,475</td>
<td>90,385</td>
<td>-90</td>
<td>-0.1%</td>
</tr>
<tr>
<td>Suburban LP</td>
<td>204,117</td>
<td>204,507</td>
<td>390</td>
<td>0.2%</td>
</tr>
<tr>
<td>Urban West</td>
<td>259,951</td>
<td>257,222</td>
<td>-2,729</td>
<td>-1.0%</td>
</tr>
<tr>
<td>Urban NW</td>
<td>61,780</td>
<td>62,137</td>
<td>357</td>
<td>0.6%</td>
</tr>
<tr>
<td>SEPA</td>
<td>4,041,357</td>
<td>4,122,948</td>
<td>81,591</td>
<td>2.0%</td>
</tr>
</tbody>
</table>

The total population in the Lankenau CHNA sub-areas is mostly expected to remain flat except for a 1% loss in the Urban West area.

Source: Truven Health.
Socio-demographics

The four Lankenau CHNA sub-areas range from wealthy households with median household incomes of $101,597 to households with median incomes of $29,323. This range of income is reflected in the following map.

The affluence of households is represented by the percentage of adults with a college degree; with the percentage of adults ranging from 75.7% to 25.8%.

<table>
<thead>
<tr>
<th>Areas</th>
<th>No. of Households</th>
<th>Median Income</th>
<th>Pct of Adults with College Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>33,794</td>
<td>$101,597</td>
<td>75.7%</td>
</tr>
<tr>
<td>Suburban LP</td>
<td>77,794</td>
<td>$61,165</td>
<td>43.1%</td>
</tr>
<tr>
<td>Urban West</td>
<td>99,842</td>
<td>$29,323</td>
<td>25.8%</td>
</tr>
<tr>
<td>Urban NW</td>
<td>28,294</td>
<td>$53,623</td>
<td>56.0%</td>
</tr>
<tr>
<td>SEPA</td>
<td>1,551,576</td>
<td>$68,192</td>
<td>42%</td>
</tr>
</tbody>
</table>

Note: CHNA area median household incomes are reflective of the zip codes in the areas but should be used as reference only.
Sources: Truven Health; PHMC Southeastern Pennsylvania Household Health Survey, 2010.
LMC Median Household Income by Census Tract 2006-2010*

**Median Household Income**
- Under $25,000
- $25,000 – 49,999
- $50,000 – 74,999
- $75,000 – 100,000
- Over $100,000

**Acute Hospital**
- MLH
- Non-MLH

*Five Year Inflation-Adjusted Income to 2010. Note: Census tracts with small sample sizes are non-shaded. Source: US Census Bureau.

Created July 2012
For all CHNA sub-areas, the largest age segment is 18 to 44.

The Suburban Core has a higher percentage of its population age 65 and over (18.1%) than does SEPA (13.5%). Urban West has the smallest percentage of the population in the age 65+.

Source: Truven Health.
Projected shift – 2012 to 2017

Percentage change of population by age group

For all sub-areas, the 65+ age segment shows the largest percentage growth, and this is also the only segment to increase in every service area.

This represents the continued aging of the baby boomer generation.

The 0-17 is expected to increase only in the Urban NW sub-area.

Source: Truven Health.
Race/Ethnicity

Percentage of population by racial and ethnic group – 2012

<table>
<thead>
<tr>
<th>Area</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Asian</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>82.8</td>
<td>5.3</td>
<td>3.2</td>
<td>6.6</td>
<td>2.1</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>65.0</td>
<td>22.1</td>
<td>3.2</td>
<td>7.6</td>
<td>2.1</td>
</tr>
<tr>
<td>Urban West</td>
<td>14.5</td>
<td>74.0</td>
<td>3.0</td>
<td>5.7</td>
<td>2.7</td>
</tr>
<tr>
<td>Urban NW</td>
<td>78.2</td>
<td>13.1</td>
<td>3.4</td>
<td>3.2</td>
<td>2.1</td>
</tr>
<tr>
<td>SEPA</td>
<td>62.6</td>
<td>21.8</td>
<td>7.9</td>
<td>5.7</td>
<td>2.1</td>
</tr>
</tbody>
</table>

The majority of the population in three of the sub-areas is white; the population of Urban West is predominately black. The Suburban Lawrence Park sub-area is 7.6% Asian.

Source: Truven Health.
LMC Percentage Asian by Census Block Group – 2010

Percentage Asian
- 0 - 2%
- 3 - 10%
- 11 - 20%
- 21 - 40%
- Over 40%

Acute Hospital
- MLH
- Non-MLH

Source: US Census Bureau.
### Religion

#### Percentage of population by religion – 2010

<table>
<thead>
<tr>
<th>Area</th>
<th>Christian*</th>
<th>Catholic</th>
<th>Jewish</th>
<th>None</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>25.1%</td>
<td>23.9%</td>
<td>21.8%</td>
<td>19.5%</td>
<td>9.6%</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>29.8%</td>
<td>47.9%</td>
<td>3.8%</td>
<td>9.4%</td>
<td>9.1%</td>
</tr>
<tr>
<td>Urban West</td>
<td>53.4%</td>
<td>11.1%</td>
<td>1.9%</td>
<td>14.9%</td>
<td>18.7%</td>
</tr>
<tr>
<td>Urban NW</td>
<td>34.3%</td>
<td>36.1%</td>
<td>4.4%</td>
<td>18.5%</td>
<td>6.8%</td>
</tr>
<tr>
<td>SEPA</td>
<td>36.4%</td>
<td>33.9%</td>
<td>4.9%</td>
<td>14.2%</td>
<td>10.6%</td>
</tr>
</tbody>
</table>

The religious make-up of the four Lankenau CHNA sub-areas varies. Notable is the large Jewish population in the Suburban Core sub-area as compared to SEPA.

*Includes Protestant, Presbyterian/Baptist/Other Christian Denominations
Immigration

**Percentage of adults born in another country***

The range of foreign born residents is 6.9% in Urban NW to 10.4% in Suburban Core and Urban West. In comparison, the SEPA percentage is 9.2% and the U.S. is 12.7%.

*Q: “In what country were you born?”

Higher education levels, as seen in the Suburban Core, are associated with jobs that provide health insurance. All sub-areas except Urban West exceed the SEPA percentage. Numerous public health studies link educational attainment with health and well-being. Those who are better off in both education and income have the best health outcomes, including decreased mortality-morbidity and longer life spans.

Home ownership

Percentage of adults who own their own home by year

Home ownership equals or exceeds the SEPA rate in three of the four sub-areas; the percentage in Urban West is significantly below SEPA.

The rate of homeownership mirrored a national trend toward increased homeownership through 2008, and continues to imitate a national trend during the recent decline.

Observations – community characteristics

Geography -- The Lankenau Medical Center (LMC) Community Health Needs Assessment (CHNA) area touches upon a wide range of communities – both suburban and urban. The CHNA area is divided into four sub-areas because each of the sub-areas has sub-populations different from the others. The division will allow Lankenau to identify specific needs, if any, of each sub-population. The four sub-areas are Suburban Core, Suburban Lawrence Park, Urban Northwest and Urban West. The sub-area zip codes included in the assessment area are those zip codes where LMC provides health care services to 10% or more of the population as well as zip codes served by the medical and OB clinics. These 27 USPS defined geographic zip codes account for 69.5% of inpatients, 84.7% medical clinic patients and 79.8% of OB clinic patients.

Community Characteristics -- The sub-areas range from highly affluent (Suburban Core) to very poor (Urban West) households. The household median income map illustrates this range of socio-demographics served by Lankenau.

Aging -- The Lankenau CHNA sub-areas have substantial older (age 65+) populations which are projected to be the fastest growing age segment in each sub-area.

Pediatrics -- The age 0-17 population is the second largest cohort in Urban West; only in Urban NW is the pediatric population expected to increase.

Sub-Populations -- There are a variety of sub-populations in the Lankenau CHNA areas including low income households, African- Americans, Asians, Jewish religion, pediatrics and seniors.
Community Analysis

Health Status and Chronic Conditions
Approximately 27% of the Urban West population reports their health status as fair or poor which is greater than all other LMC suburban areas and SEPA.

Twelve percent of an on-line panel of persons residing in the LMC suburban areas self-reported their health status is “fair or poor” which is similar to these results.

Self-reported health status correlates with socio-economic indicators, such as poverty. Respondents from the 2010 PHMC Household Health Survey are nearly three times more likely to report fair or poor health if living under the 200% FPL (31.1%) compared to respondents over the 200% mark (11.1%). Fair or poor health is also correlated with chronic conditions. For instance, 44.0% of adults with a chronic condition are in fair/poor health vs. 11.5% without a chronic condition (2008 survey – SEPA area).

Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010; “My Healthcare Voice” online panel, November 2011.
Chronic condition – adults by age group

About one in three older adults are coping with a chronic condition across all sub-areas.

About 27% of younger adults in Urban West report having at least having one chronic condition, which is greater than younger adults in SEPA.

Types of chronic conditions – all adults

Arthritis is the most common chronic condition among adults across Lankenau CHNA sub-areas.

The rate for diabetes is above the SEPA rate in the Urban West sub-area.

Q1: “Have you ever been told by a doctor or other health professional that you have or had: a. Asthma; b. Heart disease, including angina, congestive heart failure, a heart attack or other heart problems; c. Diabetes?” Q2: “Do you have arthritis, such as osteoarthritis, rheumatoid arthritis, gout, fibromyalgia, or lupus?”

Note: The heart disease survey question is not comparable to BRFSS because BRFSS includes stroke.

## Diabetes by age

### Percentage of adults diagnosed with diabetes by age*

<table>
<thead>
<tr>
<th></th>
<th>18-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>7.3</td>
<td>3.5</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>7.0</td>
<td>19.4</td>
</tr>
<tr>
<td>Urban West</td>
<td>11.8</td>
<td>32.0</td>
</tr>
<tr>
<td>Urban NW</td>
<td>4.9</td>
<td>19.5</td>
</tr>
<tr>
<td>SEPA</td>
<td>8.2</td>
<td>21.9</td>
</tr>
</tbody>
</table>

Diabetes is higher for both younger and older adults in the Urban West CHNA sub-area compared to SEPA.

The percentage of diabetes for older adults should be monitored in the Suburban Lawrence Park and Urban NW CHNA sub-areas.

---

*Q: “Have you ever been told by a doctor or other health professional that you have or had diabetes?”

# Prevalence of heart disease

## Heart Disease Estimates: 2011 Prevalence Rates (Per 1,000)*

<table>
<thead>
<tr>
<th>Area</th>
<th>Population</th>
<th>Arrhythmias</th>
<th>Congestive Heart Failure</th>
<th>Hypertension</th>
<th>Ischemic Heart Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>90,948</td>
<td>54.79</td>
<td>23.97</td>
<td>273.78</td>
<td>53.69</td>
</tr>
<tr>
<td>Suburban LP</td>
<td>198,496</td>
<td>48.32</td>
<td>22.53</td>
<td>255.83</td>
<td>48.26</td>
</tr>
<tr>
<td>Urban West</td>
<td>271,570</td>
<td>40.37</td>
<td>20.50</td>
<td>235.32</td>
<td>40.83</td>
</tr>
<tr>
<td>Urban NW</td>
<td>65,727</td>
<td>46.59</td>
<td>24.37</td>
<td>268.60</td>
<td>49.36</td>
</tr>
<tr>
<td>SEPA</td>
<td>4,066,681</td>
<td>46.41</td>
<td>21.47</td>
<td>254.28</td>
<td>47.84</td>
</tr>
</tbody>
</table>

The heart disease prevalence rates for all conditions are higher in the Suburban Core, Suburban Lawrence Park and Urban NW CHNA sub-areas than in SEPA.

*Prevalence is the number of persons with a specified condition in the population at any one time. Note: CHNA area rates are calculated on county age/sex rate applied to the age/sex zip code populations in the CHNA sub-area. These rate may not reflect variations in local cases. Source: Thomson Reuters.
Screening for heart disease risk factors

Shown in the chart are the percentage of adults who have had their blood pressure tested in the past two years.

Residents in the Urban NW CHNA area were least likely to have had their blood pressure checked, although all sub-areas are above the Healthy People 2020 goal.

Heart disease risk factors

Adults with high blood pressure and high cholesterol

Adults in both the Urban West (42%) and Urban NW (36%) are substantially above the SEPA percentage for high blood pressure.

All LMC CHNA sub-areas except the Suburban Core (21.3%) are above the Healthy People target for high blood pressure (26.9%). All LMC CHNA sub-areas percentage of high cholesterol also compare poorly to the Healthy People target (13.5%).

Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010 High BP and 2008 for High Cholesterol.
Hypertension & high blood pressure by age

Percentage of adults diagnosed with hypertension or high blood pressure*

<table>
<thead>
<tr>
<th>Area</th>
<th>18-64</th>
<th>65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>16.1</td>
<td>43.6</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>22.9</td>
<td>63.1</td>
</tr>
<tr>
<td>Urban West</td>
<td>34.4</td>
<td>74.4</td>
</tr>
<tr>
<td>Urban NW</td>
<td>31.2</td>
<td>60.8</td>
</tr>
<tr>
<td>SEPA</td>
<td>25.0</td>
<td>58.9</td>
</tr>
</tbody>
</table>

There is a higher percentage of older adults with hypertension or high blood pressure in three of the four Lankenau CHNA sub-areas compared to SEPA. The two urban sub-areas have higher percentages for younger adults than SEPA.

*Q: “Have you ever been told by a doctor or other health professional that you have high blood pressure or hypertension?”
Cancer incidence

Cancer Estimates - 2011 Incidence Rates (Per 100,000)*

<table>
<thead>
<tr>
<th>Area</th>
<th>Population</th>
<th>Breast</th>
<th>Cervical</th>
<th>Colorectal</th>
<th>Lung</th>
<th>Pancreas</th>
<th>Prostate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>90,948</td>
<td>78.64</td>
<td>5.39</td>
<td>53.33</td>
<td>67.43</td>
<td>17.36</td>
<td>92.20</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>198,496</td>
<td>103.78</td>
<td>5.02</td>
<td>65.52</td>
<td>68.79</td>
<td>15.19</td>
<td>108.02</td>
</tr>
<tr>
<td>Urban West</td>
<td>271,570</td>
<td>49.39</td>
<td>6.58</td>
<td>43.25</td>
<td>42.99</td>
<td>14.31</td>
<td>64.32</td>
</tr>
<tr>
<td>Urban NW</td>
<td>65,727</td>
<td>59.29</td>
<td>5.72</td>
<td>45.75</td>
<td>46.71</td>
<td>14.29</td>
<td>61.28</td>
</tr>
<tr>
<td>SEPA</td>
<td>4,066,681</td>
<td>61.61</td>
<td>5.25</td>
<td>49.67</td>
<td>53.24</td>
<td>15.08</td>
<td>80.19</td>
</tr>
</tbody>
</table>

The cancer incidence rates are generally higher in the Suburban Core and Suburban Lawrence Park CHNA sub-areas than in SEPA.

* Incidence equals the number of new cases occurring each year in a given population. Note: CHNA area rates are calculated on county age/sex rate applied to the age/sex zip code populations in the CHNA area. County rates may not totally synch to local cases. Source: Thomson Reuters.
Leading causes of death

Average age-adjusted mortality rates per 100,000 people

<table>
<thead>
<tr>
<th>Area</th>
<th>All causes</th>
<th>Heart</th>
<th>Stroke</th>
<th>Lung cancer</th>
<th>Breast cancer</th>
<th>Accidents/drugs</th>
<th>Pneumonia</th>
<th>Suicide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>513.52</td>
<td>129.84</td>
<td>38.26</td>
<td>30.51</td>
<td>26.39</td>
<td>17.22</td>
<td>11.27</td>
<td>4.55</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>711.82</td>
<td>192.73</td>
<td>44.66</td>
<td>48.40</td>
<td>22.01</td>
<td>29.38</td>
<td>21.19</td>
<td>7.66</td>
</tr>
<tr>
<td>Urban West</td>
<td>963.76</td>
<td>248.70</td>
<td>54.37</td>
<td>60.75</td>
<td>30.59</td>
<td>33.90</td>
<td>16.92</td>
<td>7.71</td>
</tr>
<tr>
<td>Urban NW</td>
<td>768.10</td>
<td>195.64</td>
<td>46.18</td>
<td>56.11</td>
<td>23.22</td>
<td>31.41</td>
<td>14.46</td>
<td>7.17</td>
</tr>
<tr>
<td>SEPA</td>
<td>788.71</td>
<td>201.30</td>
<td>47.44</td>
<td>52.01</td>
<td>26.55</td>
<td>34.22</td>
<td>16.86</td>
<td>9.04</td>
</tr>
</tbody>
</table>

The mortality rates are worse in the Lankenau Urban West CHNA sub-area for all causes except accidents/drugs and suicide. The mortality rate for pneumonia in the Suburban Lawrence Park CHNA sub-area is higher than the SEPA rate.

Source: PHMC Community Health Data Base - Pennsylvania Department of Health official death records 2003-2006. Details about age adjustment methodology are available for review.
Observations – chronic conditions

Health Status -- The health status is varied, especially between the Suburban Core and Urban West segments of the LMC CHNA area. This is also evident as the Robert Wood Johnson Foundation “County Health Rankings & Roadmaps” website ranks Philadelphia County as the least healthy county in PA and Montgomery County as the 5th healthiest county.

Chronic Conditions -- About one in three older adults have a chronic condition in the Lankenau CHNA area. Interestingly, about 27% of younger adults in the Urban West sub-area have a chronic condition.

Arthritis -- It is the most common of the chronic conditions for adults.

Diabetes -- Diabetes is a major chronic condition of both younger and older adults in Urban West. The percentage of adults with diabetes should be monitored in both the Suburban Lawrence Park and Urban Northwest CHNA sub-areas. The CDC has reported that the number of Americans diagnosed with diabetes has tripled since 1980. This increase has been linked to obesity, inactivity and old age. However, between 1997 and 2006, deaths rates for people with diabetes dropped substantially.

Heart Disease -- Heart disease is a major issue in all Lankenau sub-area zones. While the symptoms of heart health are most prevalent in the suburban and Urban NW CHNA sub-areas, high blood pressure is a major issue in the Urban West sub-area. High blood pressure is of particular concern for older adults in the Lankenau area. Fortunately, residents are getting their blood pressure checked. Heart disease is the leading cause of death in the Lankenau CHNA sub-areas.

Stroke -- Stroke is another primary cause of mortality. The age adjusted mortality rate for Urban West is higher than for SEPA.

Cancer -- Cancer is a leading cause of mortality in the Lankenau area as it is in the country. There are higher mortality rates for lung and breast cancer in the Urban West sub-area than SEPA; Urban NW has higher lung cancer mortality than SEPA. Public health efforts regarding cancer focus on prevention and detection of the disease by addressing factors such as smoking cessation, diet and exercise. These issues are covered in detail in the next section.
Community Analysis

Preventive Health
Cervical cancer screening

The majority of women 21 to 65 years of age have received a PAP test within the last two years. PAP screening rates are similar throughout the Lankenau sub-areas and SEPA.

Note: According to the American Cancer Society (ACS) guidelines, PAP tests should not begin until age 21 and will vary by age and previous diagnosis.

Among all women 18 years of age and older, there is a consistently high percentage of having had a recent clinical breast exam. The percentage of woman having a mammogram is lower for women 40 and older which is the recommended age to begin getting a mammography screening. The percentage for mammography has varied on a year-to-year basis and should be monitored in all Lankenau CHNA sub-areas.

Note: According to the American Cancer Society (ACS) guidelines, CBE should occur about every three years for women in their 20s and 30s and every year for those over the age of 40. The ACS continues to recommend that yearly mammograms begin for women at age 40.

*Screenings within last two years.

Cancer screenings: prostate

Men who received prostate exam within the past two years (age 50+)

The percentage of men receiving prostate cancer screenings is highly variable by and within sub-areas. Men in the suburban sub-areas have been more compliant on average than those in the urban sub-areas.

The prostate exam is a PSA and/or digital rectal exam. The American Cancer Society (ACS) recommends that beginning at age 50, men should discuss with their doctor the pros and cons of testing for prostate cancer; for black men, the discussion should occur at age 45 if there is a family history before age 65. Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2002, 2004, 2006, 2008, 2010.
Cancer screenings: colon

Adults who have received a colonoscopy or sigmoidoscopy* (age 50+)

The trend for use of colon cancer procedures is increasing in all Lankenau CHNA sub-areas.

*Q: “About how long has it been since you last had a colonoscopy or a sigmoidoscopy? These tests are performed to screen for colorectal cancer.”

Recommended screening intervals vary by test but should begin for men and women at age 50.

Cancer screenings: colon

Adults who have received a colonoscopy or sigmoidoscopy (age 50+)

The majority of adults who have been screened in the Lankenau CHNA sub-areas were screened in the last five years.

Recommended screening intervals vary by test after age 50.


Healthy People 2020: 70.5% (Ages 50-75)
Colon cancer screenings by age

Adults who have never received a colonoscopy or sigmoidoscopy (age 50+)

The age group of 50-59 is less likely to have received a colon cancer screening than those in the age group 60-74 or 75 plus.

The Urban NW area has a higher percentage of the age group 50-59 that has never received a colon cancer screening.

Adult obesity

The percentage of obese adults is higher in the Urban West than the state (29%); and the Healthy People target (30.5%). There is also an increasing trend of obese adults in all LMC areas.

Obesity is a risk factor for poor health and chronic conditions such as heart disease, diabetes, and stroke.

Adult obesity

Young adults in the urban sub-areas are more likely to be obese than young adults in SEPA.

The CDC has reported that obesity in older adults is related to the increase in diabetes in this age group.

The majority of adults who report being “physically active” on a regular basis varies by sub-area as does those not exercising. Urban West has the highest percentage of non-exercisers and the highest percentage of obese young adults.
The barriers to exercise vary by age – older adults are more likely to report that “health problems” prevent them from getting exercise, whereas younger adults say they don’t have the time or they are too busy.

Some of the “other” barriers include a perception that exercise is too expensive, that the individual is already in good health and doesn’t need to exercise, that there is no place in the neighborhood to walk, run or bike and no child care.

Nutritional goal

Servings of fruits and vegetables eaten on a daily basis

Urban West residents eat fewer fruits and vegetables than SEPA and the other Lankenau CHNA sub-areas.

Children’s consumption of fruits and vegetables tends to be similar to adults’.

Nutrition, exercise, chronic condition & obesity

Percentage of adults by BMI group in SEPA compared to nutrition, exercise and chronic condition

Adults in SEPA who are considered to have a normal weight, tend to eat more fruits and vegetables, exercise more, and be less likely to have a chronic condition than those who are overweight or obese.

Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010; 2008 for chronic condition and obesity comparison.
Smoking in the Lankenau CHNA sub-areas is generally declining. However, the percent of adults who smoke remains above the Healthy People target of 12% for most of the Lankenau sub-areas.

Smokers who are advised to quit by their doctor and smokers who attempt to quit

The percentage of smokers in the Lankenau CHNA sub-areas who tried to quit is similar to that of SEPA. A smaller percentage tried to quit in Urban NW. The Healthy People target for this indicator is 80%, or four out of five adult smokers should attempt to quit smoking in a given year.

Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010 Tried to quit, 2008 for doctor recommended.
How tried to quit

Methods smokers used while trying to quit

Among former smokers in the Lankenau CHNA sub-area, most have tried to quit either on their own or with “nicotine replacement.”

Note: Some of the “other” methods used include Internet counseling, “Quit net,” self help books, a combination of methods, and other unspecified.

Adults who report restless sleep

About one out of six adults in the suburban sub-areas report restless sleep; about one in five adults in the urban sub-areas report restless sleep.

Poor quality sleep is increasingly connected to a host of serious health problems. Some studies have connected poor sleep to cancer, heart disease and obesity as well as to other hazards such as occupational and automobile accidents.

Observations – preventive health

**Cancer Screenings** -- Among the major cancer screenings studied, mammography and colonoscopy are the two tests that are underused, although colon cancer screening has been increasing each survey period. The data show that the 50 to 59 age group is least likely to have been tested for colon cancer. Note: Recent decisions by various medical bodies have created a wide variation in “best practices” for the timing of cancer screenings.

**Obesity** -- Adult obesity continues to increase in the Lankenau CHNA sub-areas. Obesity in all adult ages is a particular concern for the Urban West sub-area. Some increase in obesity is related to the growing older adult population in the CHNA areas.

**Smoking** -- The percentage of adults who smoke has been generally declining. However, there is a continuing need to encourage and support smokers in their cessation efforts.

**Sleep** -- Restless sleep is a concern in all sub-areas and particularly the urban sub-areas. Lack of sleep may manifest itself with health care issues or unintentional injuries.
Community Analysis

Access to Care
Regular source of care

Adults who have a regular source of care*

All Lankenau sub-areas are above the Healthy People goal of 84%. Residents of the urban sub-areas have the lowest percentage of a regular source of care.

*Q: Is there one person or place you usually go to when you are sick or want advice about your health?
Insurance status

Insurance coverage estimates (all ages) – 2011

While private insurance is the primary insurance type for the Suburban Core, Suburban LP and Urban NW sub-areas, the Urban West sub-area has a higher percentage of its residents covered by Medicaid or who are uninsured.

Source: Truven Health.
The majority of families in the Urban West sub-area have income at less than 200% of the federal poverty level (FPL). While having a lower percentage than SEPA, Suburban LP has about 20% of its families at less than 200% of the FPL.

In 2010, a family of four earning $22,050 would be living at the FPL.
No prescription coverage

Lack of prescription drug coverage is an issue for residents of the Urban West sub-area regardless of age. Coverage for older adults may be an issue in the Suburban Core sub-area.

No dental coverage

Lack of dental coverage for the age 18-64 population is similar to SEPA.

An Institute of Medicine report indicates lack of oral health can lead to increase risk of respiratory and heart disease as well as inappropriate use of emergency departments for dental care.

Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2008; Advancing Oral Health in America, Institute of Medicine, April 2011.
Changes in insurance coverage - 2012

Adults in the MLH service area who report that their health insurance coverage changed during the past year

More than two thirds of the respondents reported some kind of change to their health insurance benefits.

Note: The Community Economic Survey results are specific to the Lankenau CHNA suburban sub-areas. Similar changes are likely occurring elsewhere in SEPA.

Source: “My Healthcare Voice” consumer panel, March 2012.
Insurance changes - 2012

Reasons for change in health care coverage in the MLH area

- Higher Premium
- Increased Co-pay
- Change in Rx Coverage
- Change in Plan Type
- Became Medicare Eligible
- Other

The main reason for loss of coverage is unemployment, but respondents also lost health insurance benefits due to employer discontinuation or a change in jobs.

Source: “My Healthcare Voice” consumer panel, March 2012.

Note: The Community Economic Survey results are specific to the Lankenau CHNA suburban sub-areas. Similar changes are likely occurring elsewhere in SEPA.
Price sensitivity - 2012

Respondents saying “YES” to increased avoidance

Q. “In the past 12 months, have you or a member of your household avoided or delayed receiving any of the following health care services because of cost?”


There has been a general improvement from 2011 of residents reporting delaying or avoiding health care because of cost, however, care is still being avoided. Census data supports these findings.

Note: The Community Economic Survey results are specific to the Lankenau CHNA suburban sub-areas. Similar changes are likely occurring elsewhere in SEPA.
Concern about seeking care – time off work

Adults who would be concerned about seeking health care for a medical condition that would require short- or long-term disability leave in today’s economic climate

Almost three out of four adults are concerned about taking time off from work to receive medical care.


Note: The CES results are specific to the Lankenau CHNA suburban sub-areas. Similar changes are likely occurring elsewhere in SEPA.
Observations – access to care

**Routine source of care** -- All Lankenau CHNA sub-areas are above the Healthy People goal. However, the need for health care services remains in all sub-areas.

**Health Care Affordability** -- There is a wide range of health care affordability issues among the Lankenau CHNA sub-areas. The affordability of health care most impacts the Urban West sub-area but pockets of health care needs exist in the other zones.

Survey data from the suburban sub-areas indicate that more persons with health insurance continue to see changes in their polices, usually higher premium and co-pay costs. Almost 75% of surveyed consumers indicated they are very or somewhat concerned about scheduling time away from work to receive health care. This concern may indicate the need for non-traditional office hours from health care providers.

Consumers in the area are also indicating they are delaying or avoiding health care services because of cost. Although the Philadelphia western suburbs remain more affluent than SEPA, consumers are still delaying or avoiding care because of costs.

The CDC also reports that unemployed adults have poorer health and access to health care.
Community Analysis

Children’s Health
The higher birth rates in the Suburban LP and Urban West reflect the demographic make-up of these communities. The Urban West sub-area has multiple issues relating to natality and mortality rates.

<table>
<thead>
<tr>
<th>Area</th>
<th>Birth rate: All women</th>
<th>Birth rate: teens</th>
<th>Low birth-weight</th>
<th>Prenatal care - % received</th>
<th>Infant mortality (1 year)</th>
<th>Neonatal mortality (27 days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>17.13</td>
<td>0.27</td>
<td>61.53</td>
<td>79.31</td>
<td>1.75</td>
<td>1.46</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>26.00</td>
<td>4.63</td>
<td>78.31</td>
<td>72.74</td>
<td>5.90</td>
<td>4.24</td>
</tr>
<tr>
<td>Urban West</td>
<td>27.17</td>
<td>20.03</td>
<td>138.02</td>
<td>48.20</td>
<td>12.91</td>
<td>9.04</td>
</tr>
<tr>
<td>Urban NW</td>
<td>18.81</td>
<td>5.36</td>
<td>90.51</td>
<td>70.85</td>
<td>6.01</td>
<td>4.00</td>
</tr>
<tr>
<td>SEPA</td>
<td>25.09</td>
<td>8.71</td>
<td>92.49</td>
<td>66.38</td>
<td>6.56</td>
<td>4.53</td>
</tr>
</tbody>
</table>

The rates shown above are per thousand (unless otherwise noted) based on an average of four consecutive years (2003-2006).
Source: Data provided by PHMC and based on information collected from official records from the Pennsylvania Department of Health.
The Urban West sub-area has the highest percentage of uninsured children (age 0-17).

Although adults may be more susceptible to losing their health insurance due to current economic conditions, children will not because of the Children’s Health Insurance Program (CHIP). CHIP covers the full spectrum of care from routine, preventive care, including dental and eye exams, to diagnostic imaging tests, mental health services and emergency care and inpatient stays.

While 96% of children in the Suburban Core receive their care in a physician’s office, some children in the other sub-areas, particularly in the Urban West, receive care at clinics or in the emergency room. Access to care was identified by school nurses survey as an issue for children in the Lankenau CHNA area.
Dental care and eye exams

At least 90% of the children in the sub-areas have received a dental exam within the past year.

The percentage of children receiving eye exams is lower because not all children will be required to get an annual exam. Children above the age of four are generally recommended to get an eye exam every two years unless a problem is suspected by parents or detected during routine screenings. The percentage of children receiving eye exams varies among sub-areas.

Questions asked about children four and older.
Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010 for Dental Care and 2008 for Eye Exam.
Asthma

The percentage of children who have asthma in the Urban West sub-area is significantly higher than the percentage in SEPA. Asthma was identified by school health nurses as a major health issue for children.

Asthma – trips to emergency department

**Percentage of children with asthma who had to visit the emergency department for treatment in the past year (age 0-17)**

Asthmatic children in the urban sub-areas show a high ER use rate, which may indicate that their condition is poorly controlled.

*Out of the respondents, no one reported any visits due to asthma in the ED.
Source: PHMC Southeastern Pennsylvania Household Health Survey, 2010.*
Nutritional goal

Servings of fruits and vegetables eaten on a daily basis

Children’s consumption of fruits and vegetables is similar to adults’. More than 50% of children in Suburban Lawrence Park and Urban West eat two or fewer servings of fruits and vegetables on a daily basis.


Childhood obesity reflects the obesity of adults in the Lankenau CHNA sub-areas; like adults, Urban West has the highest percentage of childhood obesity.

Obesity is listed among the top children’s health care concerns by school health nurses in the Lankenau area.
Children who are less physically active

Percentage of children who are “physically active” four or fewer times per week (age 3+)

The level of inactivity is similar to that reported in SEPA, although children in the Urban NW sub-area are the least active. The ideal target for physical activity among children is one hour every day.

Question asked about children three years of age or older. Sources: PHMC Southeastern Pennsylvania Household Health Survey, 2010; “Childhood Obesity,” Main Line Link, Spring 2009.
Birth Rate -- The birth rate for the women in the Urban West and Suburban LP sub-areas is higher than the comparable sub-areas and to the rate in SEPA.

Maternity and Neonatal Care -- The birth-related indicators in this report for the Urban West CHNA sub-area show that there are multiple issues relating to natality and morality rates.

Source of Care – Some children in the Suburban Lawrence Park, Urban West and Urban NW sub-areas receive their regular source of care in clinics or a hospital emergency department. School nurses rate “access to care” as a major concern for children in their communities.

Healthy Weight – Like with adults, childhood obesity is highest in the Urban West CHNA sub-area. Also, the percentage of children who are obese is increasing in the Urban NW sub-area. School nurses rate obesity as one of their top concerns.

Asthma -- Asthma is the most common chronic condition among children. It can also be the most serious, requiring ongoing medication administration – a stated concern of school nurses surveyed, and can result in trips to the emergency department. School nurses rate asthma as one of their top concerns.

Physical Activity -- Physical activity is important for maintaining a good health. Physical activity burns calories and creates muscle mass, which both help in maintaining body weight. The Urban NW sub-area has a higher percentage of children who are inactive compared to SEPA.
Community Analysis

Older Adults
Older adults (65+) who plan on staying in their current homes for 10+ years – and those who report difficulty affording housing costs

Most adults plan to stay in their current home for 10+ years, however, cost can be an issue.

This preference, combined with the graying of the baby boomer generation, represents a potential surge in demand for home care services.

*Represents the sum of very difficult and somewhat difficult.
Awareness and use of programs – Suburban Core

Older adults (65+) in the Suburban Core area who have used and are aware of various social service programs available

*Did not ask if activity programs at senior centers were needed.
**PACE: Prescription Drug Program for the Elderly.
Older adults (65+) in the Suburban LP area who have used and are aware of various social service programs available

Older adults in the Suburban LP sub-area have used all of the listed services, however, about 5% of older adults are not aware of transportation services for the elderly.

*Did not ask if activity programs at senior centers were needed. 
**PACE: Prescription Drug Program for the Elderly.
Awareness and use of programs – Urban West

Older adults (65+) in the Urban West area who have used and are aware of various social service programs available

Older adults in the Urban West sub-area are more likely to have used transportation services than other sub-areas; senior centers are also used by older adults in the sub-area. Over 10% of the older adults have used a food program.

Did not ask if activity programs at senior centers were needed.

**PACE: Prescription Drug Program for the Elderly.

Awareness and use of programs – Urban NW

Older adults (65+) in the Urban NW area who have used and are aware of various social service programs available

Older adults in the Urban NW sub-area use transportation services followed by senior centers.

*Did not ask if activity programs at senior centers were needed.

**PACE: Prescription Drug Program for the Elderly.

Awareness and use of programs – SEPA

Older adults (65+) in SEPA who have used and are aware of various social service programs available

*Activity: Did not ask if activity programs at senior centers were needed.

**PACE: Prescription Drug Program for the Elderly.


*Activity: Did not ask if activity programs at senior centers were needed.

**PACE: Prescription Drug Program for the Elderly.

The percentage of all adults (18 years of age or older) caring for an adult 60 or older with a long-term disability or illness is steadily increasing.

### Use of formal in-home care

#### Percentage of older adults (65+) who use formal care and how services were paid

<table>
<thead>
<tr>
<th>Area</th>
<th>Uses formal care</th>
<th>Medicare</th>
<th>Medicaid</th>
<th>Private insurance</th>
<th>Out of pocket (Self/Family)</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suburban Core</td>
<td>6.6%</td>
<td>71.2</td>
<td>0.0</td>
<td>28.8</td>
<td>0.0</td>
<td>0.0</td>
</tr>
<tr>
<td>Suburban Lawrence Park</td>
<td>11.6%</td>
<td>65.9</td>
<td>0.0</td>
<td>6.4</td>
<td>22.1</td>
<td>5.6</td>
</tr>
<tr>
<td>Urban West</td>
<td>8.0%</td>
<td>35.3</td>
<td>7.0</td>
<td>23.6</td>
<td>16.1</td>
<td>17.9</td>
</tr>
<tr>
<td>Urban NW</td>
<td>11.7%</td>
<td>13.6</td>
<td>0.0</td>
<td>72.6</td>
<td>0.0</td>
<td>13.8</td>
</tr>
<tr>
<td>SEPA</td>
<td>7.7%</td>
<td>47.2</td>
<td>4.2</td>
<td>20.2</td>
<td>19.8</td>
<td>8.5</td>
</tr>
</tbody>
</table>

The percentage of older adults receiving in-home formal care varies from 6.6% in the Suburban Core sub-area to 11.7% in the Urban NW sub-area. In-home care is paid by a variety of private and public sources.

Note: “Formal” care is defined as having someone provide services in your home, such as medical injections, changing bandages, help with grooming, cooking or shopping. The person could be someone from an agency or someone you hired. Source: PHMC Southeastern Pennsylvania Household Health Survey, 2010.
Transportation

Older adults (65+) who had to cancel a doctor’s appointment due to a transportation problem

Transportation as a barrier to health care varies by sub-area. Older adults living in the Urban West sub-area are most likely to have canceled a doctor’s appointment due to transportation problems.

Public transportation may or may not be helpful to frail elderly in successfully reaching a destination.

Older adults (65+) who have fallen within the past year

Falls can be a barrier to independent living. About one in five older adults reported falling in the previous year in SEPA. Older adults living in the Urban West are more likely to have fallen; the other sub-areas are below the percentage of falls for older adults in all of SEPA.

Falls can lead to visits to the emergency room or a hospital stay. As such, falls may be a cause for additional monitoring.

Employment

The employment rate reveals the other types of lifestyle demands that may weigh on older adults, in addition to health care needs. Working may be the result of being an active adult or may be out of necessity.

The percentage of employment varies greatly by sub-area. Older adults in the Suburban Core and Urban NW are more likely to work than the percentage in SEPA. Data is unavailable specific to the CHNA sub-areas as to whether current economic conditions are impacting older adults who need employment for household expenses.

## Nursing homes and Continuing Care Retirement Communities (CCRCs) in the LMC CHNA area

<table>
<thead>
<tr>
<th>Suburban Core - Nursing Homes</th>
<th>Licensed Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brighten at Bryn Mawr</td>
<td>160</td>
</tr>
<tr>
<td>Byran Mawr Terrace</td>
<td>170</td>
</tr>
<tr>
<td>Golden Living Center</td>
<td>76</td>
</tr>
<tr>
<td>Saunders House</td>
<td>180</td>
</tr>
<tr>
<td>Mary J. Drexel Home</td>
<td>30</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Suburban Core – Continuing Care Retirement Communities (CCRCs)</th>
<th>Licensed Nursing Home Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beaumont at Bryn Mawr</td>
<td>46</td>
</tr>
<tr>
<td>The Quadrangle</td>
<td>78</td>
</tr>
<tr>
<td>Waverly Heights</td>
<td>60</td>
</tr>
<tr>
<td>Rosemont Presbyterian Village</td>
<td>146</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Urban West - Nursing Homes</th>
<th>Licensed Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bala Nursing and Retirement Center</td>
<td>180</td>
</tr>
<tr>
<td>Inglis House</td>
<td>297</td>
</tr>
<tr>
<td>Simpson House</td>
<td>154</td>
</tr>
<tr>
<td>Kearsley Long Term Care Center</td>
<td>84</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Urban NW - Nursing Homes</th>
<th>Licensed Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cathedral Village</td>
<td>148</td>
</tr>
</tbody>
</table>


A Continuing Care Retirement Community (CCRC) is a residential community for adults that offers an independent living unit (an apartment or cottage) and access to a continuum of long-term care services (assisted living or nursing home care) that meet the residents' health and social needs as they change over time. These services are provided via a contract between the resident and the “Community.”
Older Adults -- Older adults are the fastest increasing age segment in the Lankenau CHNA sub-areas.

Aging in Place – Older adults generally respond that they would prefer to stay in their current homes. Cost is an issue for those older adults wishing to remain in their current homes.

Caregiving -- As the population ages, formal and informal caregiving will continue to be an important issue. There is a steady increase in the number of adults who report that they provide care for an older adult. As the health care needs of these older adults increase, they may transition to the need for formal home care services, assisted living, or skilled nursing home care. There may be a need for respite care, as caretakers need a break from their care-taking duties.

Falls -- Falls by older adults should be a concern that is worth monitoring. Falls can result in increasing visits to emergency rooms or an inpatient hospital stay.

Nursing Homes & CCRCs -- There are 15 nursing homes and four continuing care retirement communities (CCRCs) in the Lankenau CHNA sub-areas. Coordination of care with these facilities is important to maintain an individual’s health and prevent hospital re-admissions.
Community Analysis

Mental Health
Diagnosed mental health conditions

Adults diagnosed with depression and other mental health issues

Adults in the suburban sub-areas have less depression/other mental health condition as compared to SEPA. The highest percentage of mental health issues is in the Urban West sub-area.

Receiving treatment for mental health conditions

When asked, “Are you currently taking medication or receiving any other type of treatment for your clinical depression or other mental health condition?” nearly six out of ten adults said “yes.” Adults in the Urban NW sub-area were less likely to be receiving a treatment for their condition.

Mental health

Data from the 2010 Pennsylvania Behavioral Risk Factor Surveillance System (BRFSS) survey indicates that adults in the suburban SEPA counties are significantly less likely to have emotional support and life satisfaction issues than adults in Pennsylvania.

Mental health: high stress

There has been an upswing in high stress levels in adults in all sub-areas since the 2008 economic crisis began. The American Psychological Association (APA) indicates that job insecurity and money are two key stressors. Based on its most recent “Stress in America” survey, the APA concludes that the “declining state of the nation’s economy is taking a physical and emotional toll on people nationwide.”

Stress was identified as a top issue impacting the quality of health of area adults in an online study of local adults as well as the Main Line Health physician medical staff.

Note: High stress is defined as a rating of 8, 9, or 10 on a 10-point scale, where “10” indicates an extreme stress level during the past year.

Observations – mental health

**Stress** -- According to the Journal of the American Medical Association (JAMA), stress hormones have damaging effects if the heart is exposed to elevated levels of them for an extended period of time. Stress can cause increased oxygen demand on the body, spasm of the coronary (heart) blood vessels, and electrical instability in the heart’s conduction system, among other ill effects. Stress is a mental and behavioral lifestyle component that contributes to disease in the population.

Roughly one in four adults responded in the Southeastern Pennsylvania Household Health Survey to be under “high stress.” Stress is increasing in all of the CHNA sub-areas. Respondents to the “My Healthcare Voice” online panel survey identified stress as a having a major impact of the quality of health in the area. Stress was also identified as a health care concern by medical staff physicians at Main Line Health.

**Mental Health Conditions** -- Depending on the sub-area, between 11% to 17% of adults in the Lankenau CHNA area report having been diagnosed with depression or a mental health condition. Overall, of those with a condition, about 60% are taking medication or receiving another type of treatment for the condition. Adults in the Urban NW sub-area are least likely to be receiving treatment for the condition.

The Substance Abuse and Mental Health Administration reports* that 20% of adults in the U.S. experienced mental illness.

Input from the Community

Perception of Health Care Related Issues
In addition to data sources utilized in the community analysis section, LMC and MLH sought input from persons located in the community such as community organizations, public safety officers (fire, ambulance and police), school nurses, public officials, MLH physicians and individuals residing in the community that participated in an on-line survey. The following summarizes the community’s perception of the top health care issues and the top issues impacting the quality of health. Issues identified via community input reinforce many of the data findings and observations in the preceding analysis.

<table>
<thead>
<tr>
<th>Top Health Care Issues</th>
<th>Community</th>
<th>School Nurses</th>
<th>Public Officials</th>
<th>Community Leaders</th>
<th>Public Safety Officers</th>
<th>MLH Physicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Care</td>
<td></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Obesity</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Nutrition</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heart</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Drug &amp; Alcohol</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Mental/Behavioral Health</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Cancer</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatric Asthma</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Top Issues Impacting Quality of Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Affordability</td>
</tr>
<tr>
<td>Healthy Choices</td>
</tr>
<tr>
<td>Stress / Busy Schedules</td>
</tr>
<tr>
<td>Access to Care</td>
</tr>
<tr>
<td>Unemployment</td>
</tr>
<tr>
<td>Patient Compliance</td>
</tr>
<tr>
<td>Smoking</td>
</tr>
</tbody>
</table>
Lankenau Medical Center Community Health Needs Assessment

Community Surveys
- Community Health (Survey specific to Suburban Core & Suburban Lawrence Park)
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
Percentage of respondents whose health status is fair and poor*

The survey results are similar to the PHMC Southeastern Pennsylvania Household Health Survey, 2010 in the suburban LMC CHNA sub-areas.

*Poor: no respondents from the survey said that they had poor physical and mental health. 
Health status changed in the past year

About 18% of respondents indicate that their health status declined in the past year; this was partially offset by 12% whose health status improved.

Source: My Healthcare Voice online panel survey, November 2011.
Health status changed since 2008

Source: My Healthcare Voice online panel survey, November 2011.

Among other causes, it appears that stress and delay of receiving health care resulting from the economic downturn has impacted the health of about 30% of respondents.
Top disease and health related problems

Top percentage of health care issues as identified by respondents throughout the CHNA service area

<table>
<thead>
<tr>
<th>Health Condition</th>
<th>Total Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obesity*</td>
<td>24.0%</td>
</tr>
<tr>
<td>Cancer</td>
<td>9.0%</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>8.0%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>8.0%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>7.0%</td>
</tr>
<tr>
<td>Alcohol / Drug Abuse</td>
<td>7.0%</td>
</tr>
</tbody>
</table>

*Obesity: includes both childhood and adult obesity.
Source: My Healthcare Voice online panel survey, November 2011.

The top issues identified in this on-line community survey are similar to the issues identified in the data analysis.
Top issues impacting quality of health

Top percentage issues that affect the quality of health as identified by respondents throughout the CHNA service area

<table>
<thead>
<tr>
<th>Health Condition</th>
<th>Total Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Care Affordability</td>
<td>18.0%</td>
</tr>
<tr>
<td>Too much stress</td>
<td>17.0%</td>
</tr>
<tr>
<td>Unemployment</td>
<td>14.0%</td>
</tr>
<tr>
<td>Busy Schedules</td>
<td>14.0%</td>
</tr>
</tbody>
</table>

The issues identified by the community as impacting the quality of health care are all noted elsewhere in the assessment. For instance, survey results from community leaders show their concern about health care affordability as well as the community health care economic survey which shows community residents are delaying health care decisions because of cost. Further, Main Line Health physicians identified stress and busy schedules as impacting the health of their patients and the community.

Source: My Healthcare Voice online panel survey, November 2011.
Most common ways that hospitals could improve the health of the community

Percentage of common ways hospitals could be improved

<table>
<thead>
<tr>
<th>Health Condition</th>
<th>Total Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordability</td>
<td>15.0%</td>
</tr>
<tr>
<td>Health education</td>
<td>11.0%</td>
</tr>
<tr>
<td>Health fairs and screenings</td>
<td>9.0%</td>
</tr>
</tbody>
</table>

Health care affordability is the top response for how hospitals can improve the health of the community. MLH has previously conducted a health care economic survey which revealed that persons are delaying health care treatment because of cost.

Residents of the area are also looking for hospitals to provide them with information to make informed health care decisions.

Source: My Healthcare Voice online panel survey, November 2011.
Community Surveys
- Community Health
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
Major health care concerns for students

Top issues identified by school nurses

<table>
<thead>
<tr>
<th>LMC</th>
<th>OVER ALL TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asthma</td>
<td>Asthma</td>
</tr>
<tr>
<td>Obesity</td>
<td>Obesity</td>
</tr>
<tr>
<td>Mental/Behavioral Health</td>
<td>Mental/Behavioral Health</td>
</tr>
<tr>
<td>Access to Health Care</td>
<td>Keeping Healthy/ Safe Choices</td>
</tr>
<tr>
<td>Keeping Healthy/ Safe Choices</td>
<td>Nutrition</td>
</tr>
<tr>
<td>Nutrition</td>
<td></td>
</tr>
</tbody>
</table>

The list of top health care concerns for children as identified by school health nurses is similar to a prior survey conducted for all MLH Hospitals in 2009.

Access to health care is a concern specific to school nurses in the Lankenau CHNA area.

Source: School Nurse Survey, June 2012. Overall total includes total MLH service area.
Community Surveys

- Community Health
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
Top health care concerns for constituents

The top health care issues identified by local elected & appointed officials

<table>
<thead>
<tr>
<th>Top Issues</th>
<th>Additional Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Affordability</td>
<td>Insurance</td>
</tr>
<tr>
<td>Senior Care</td>
<td>Education</td>
</tr>
<tr>
<td></td>
<td>Prevention</td>
</tr>
<tr>
<td></td>
<td>Obesity</td>
</tr>
<tr>
<td></td>
<td>Mental Health</td>
</tr>
<tr>
<td></td>
<td>Addiction</td>
</tr>
</tbody>
</table>

The top issues along with the other issues reported also reflect issues identified throughout the assessment and are most likely top-of-mind of the public official’s constituents.

Source: Community Leaders Survey, August 2012.
Lankenau Medical Center Community Health Needs Assessment

Community Surveys
- Community Health
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
The top health care issues identified by leaders of local community organizations

<table>
<thead>
<tr>
<th>Top Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Care</td>
</tr>
<tr>
<td>Affordability / Insurance</td>
</tr>
<tr>
<td>Healthy Living (wellness, exercise, fitness, stress management)</td>
</tr>
<tr>
<td>Obesity (adult &amp; childhood)</td>
</tr>
<tr>
<td>Access to health services</td>
</tr>
<tr>
<td>Cardiac (Heart) care</td>
</tr>
</tbody>
</table>

The list of top health care concerns for local communities as identified by community leaders in the Main Line Health hospitals’ CNHA areas reflect issues identified throughout the assessment.

Source: Community Leaders Survey, August 2012.
Lankenau Medical Center Community Health Needs Assessment

Community Surveys
- Community Health
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
Top health care concerns for constituents

The top health care issues identified by local public safety officers (ambulance, fire and police)

<table>
<thead>
<tr>
<th>Top Issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Having enhanced first responder and EMS services in the community</td>
</tr>
<tr>
<td>Affordability / Insurance</td>
</tr>
<tr>
<td>Alcohol or Drugs</td>
</tr>
<tr>
<td>Senior Care</td>
</tr>
</tbody>
</table>

Source: Community Leaders Survey, August 2012.

Three of the top four health care concerns expressed by local public safety officers reflect issues identified throughout the assessment. The top issue identified is the concern of local public safety officers in having sufficient and well maintained first responder and EMS services in their communities.
Community Surveys
- Community Health
- School Nurse
- Elected and Appointed Officials
- Community Leaders
- Public Safety Officers - Ambulance, Fire and Police
- Main Line Health Care Providers
**Major findings from the MLH physician medical staff**

**The top issues impacting the quality of health of patients and the community**

<table>
<thead>
<tr>
<th>Lankenau</th>
<th>OVERALL TOTAL*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Busy schedules, no time to make healthy choices;</td>
<td>Busy schedules, no time to make healthy choices</td>
</tr>
<tr>
<td>Patient compliance &amp; motivation</td>
<td></td>
</tr>
<tr>
<td>Unemployment or underemployment</td>
<td>Patient compliance &amp; motivation</td>
</tr>
<tr>
<td>Access to mental health care; Access to medical health care;</td>
<td>Stress</td>
</tr>
<tr>
<td>Affordability of dental care; Affordability of medical/surgical health care;</td>
<td></td>
</tr>
<tr>
<td>Availability of primary care</td>
<td>Affordability of medical / surgical health care</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Availability of primary care;</td>
</tr>
<tr>
<td></td>
<td>Underemployment or unemployment</td>
</tr>
</tbody>
</table>

MLH physicians noted what they thought were the top issues impacting the health of the community. Their responses generally reflect the issues found throughout the assessment. However, residents taking the Community Survey did not directly mention their own compliance to medical regiments or healthy lifestyles as impacting their health.

*Overall Total includes responses from the entire Main Line Health medical staff. Source: MLH Health Care Providers Survey, September 2012.*
Major findings from the MLH physician medical staff

The top medical issues that have the greatest impact on the health of the community

<table>
<thead>
<tr>
<th>Lankenau</th>
<th>OVERALL TOTAL*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes; Obesity</td>
<td>Obesity</td>
</tr>
<tr>
<td>Substance abuse: smoking</td>
<td>Diabetes</td>
</tr>
<tr>
<td>Substance abuse: drug and alcohol</td>
<td>Heart Disease</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>Substance Abuse: Smoking</td>
</tr>
<tr>
<td></td>
<td>Cancer</td>
</tr>
<tr>
<td></td>
<td>Substance Abuse: Drugs &amp; Alcohol</td>
</tr>
</tbody>
</table>

MLH physicians selected these as the top medical issues that have the greatest impact on the health of the community. They are also similar to those identified throughout the assessment.

*Overall Total includes responses from the entire Main Line Health medical staff. Source: MLH Health Care Providers Survey, September 2012.
Major findings from the MLH physician medical staff

The top pediatric health issues that are most concerning

<table>
<thead>
<tr>
<th>Lankenau</th>
<th>OVERALL TOTAL*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug, tobacco, alcohol;</td>
<td>Drug, tobacco, alcohol</td>
</tr>
<tr>
<td>Mental / Behavior Health;</td>
<td></td>
</tr>
<tr>
<td>Poor Dietary or Exercise choices</td>
<td></td>
</tr>
<tr>
<td>Obesity</td>
<td></td>
</tr>
<tr>
<td>Poor dietary or exercise choices;</td>
<td></td>
</tr>
<tr>
<td>Mental / behavior health</td>
<td></td>
</tr>
</tbody>
</table>

Drugs, tobacco and alcohol and obesity are top pediatric health issues in the CHNA areas as identified by medical staff of the hospitals. These top issues are found throughout the assessment.

*Overall Total includes responses from the entire Main Line Health medical staff. Source: MLH Health Care Providers Survey, September 2012.
Major findings from the MLH physician medical staff

The top senior health issues that are most concerning

<table>
<thead>
<tr>
<th>Lankenau</th>
<th>OVERALL TOTAL*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiving support</td>
<td>Caregiving support</td>
</tr>
<tr>
<td>Chronic conditions</td>
<td>Smoking, Dementia, Chronic conditions, Obesity</td>
</tr>
</tbody>
</table>

“Caregiving support” is the top senior health issue identified by the Lankenau medical staff. The PHMC Household survey data also indicate that the percentage of adults caring for an adult 60 or older continues to increase.

*Overall Total includes responses from the entire Main Line Health medical staff. Source: MLH Health Care Providers Survey, September 2012.
COMPREHENSIVE REPORT
APPENDIX
Data sources utilized to compile the Community Health Needs Assessment

• Community-based public health data (Community Health Data Base) provided by Public Health Management Corp (PHMC) including data from the Southeastern Pennsylvania Household Health Survey (2002 to 2010)
  • One of largest, local health surveys in the country
  • Assesses health needs of local population
  • Provides “public health expertise”

• Truven Health (formerly Thomson-Reuters prior to June 2012)
  • Population data with projections
  • Insurance estimates

• Pennsylvania Department of Health

• Select national and state comparative data
  • CDC: Behavioral Risk Factor Surveillance System (BRFSS) 2010
  • CDC: Healthy People Targets 2020
Comparative benchmarks utilized in the Community Health Needs Assessment

United States: Healthy People 2020 is a joint initiative managed by the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH) that provides target measures. Public health goals, established by the Healthy People 2020 initiative, are provided where similar indicators are available.

Pennsylvania: Some benchmarks are provided to the state population per the 2010 Behavioral Risk Factor Surveillance System (BRFSS), which is a part of a national health monitoring initiative supported by the CDC.

Regional/Southeastern PA (SEPA): Where state and national indicators are not available, a regional benchmark is provided based on the five counties included in the PHMC Southeastern Pennsylvania Household Health Survey (Bucks, Chester, Delaware, Montgomery and Philadelphia).
Data Availability and Data Gaps

Despite having access to numerous data resources, data specific to the mental health status and mental health needs of the population are significantly lacking for the zip code-based hospital CHNA areas. Available data reviewed included general statistics on adults diagnosed with depression or other mental health issues; adults receiving treatment (undefined) for mental health issues; and adults with stress. Mental health issues of prevention and treatment involve multi-dimensional societal and health issues that make determining need for services difficult to assess.

Sample sizes within the PHMC Community Health Data Base for certain ethnic and religious sub-populations were too small to draw meaningful conclusions on certain indicators. The Lankenau Medical Center (LMC) area was divided into four sub-areas which focus on the various communities served by LMC, specifically the poor and uninsured, the Jewish community and racial sub-populations; the data in each sub-area analysis generally reflect the health status of these populations.
Input utilized to compile the Community Health Needs Assessment

• Community Economic Survey
• Community Health Survey
• School Nurses Survey
• Elected and Appointed Officials Survey
• Community Leaders Survey
• Public Safety Officers - Ambulance, Fire and Police Survey
• MLH Health Care Provider Survey
INPUT FROM THE COMMUNITY: ORGANIZATIONS PROVIDING INPUT VIA SURVEY OR INTERVIEW– COMMUNITY LEADERS*

**Public Health Departments or Organizations**
- Chester County Health Department
- Delaware County Intercommunity Health Coordination
- Montgomery County Health Department
- Montgomery County Aging and Adult Services

**Organizations Serving Persons in Need**
- ARCH (Area Residents Caring and Helping)
- Adult Care of Chester County
- Audubon YMCA
- Brandywine Valley YMCA, Jennersville Branch
- Bryn Mawr Partnership
- Bryn Mawr Presbyterian Church
- Cancer Support Community (formerly The Wellness Community of Phila)
- Caring People Alliance @WPCC
- Catholic Social Services
- Christ Lutheran Church
- Community Volunteers in Medicine

**Organizations Serving Persons in Need (continued)**
- Community YMCA of Eastern Delaware
- ElderNet of Lower Merion and Narberth
- Elwyn
- First Baptist Church of Malvern
- Golden Slipper Center for Seniors
- Great Valley Senior Center
- Health Promotion Council
- Kindred Hospital- Havertown
- Lower Merion Counseling Services
- Maternal and Child Health Consortium of Chester County
- Maternity Care Coalition
- New Courtland Elder Services
- New Horizons Senior Center
- Pennsylvania Home of the Sparrow
- Pennsylvania State Police
- Phoenixville Community Health Foundation
- Positive Aging in Lower Merion Senior Center

*List includes respondents from the MLH Service Area*
### Organizations Serving Persons in Need (continued)
- Pottstown Area Health and Wellness Foundation
- Project Outreach
- St Norbert Parish
- Surrey Services for Seniors
- The Church of the Good Samaritan
- The Clinic of Phoenixville
- United Way of Chester County
- Upper Main Line YMCA
- Upper Merion Senior Service
- Wayne Senior Center
- Women's Resource Center

### Other Organizations Active in the Community
- Colonial Electric Supply
- Delaware County Library System
- Delaware County Chamber of Commerce
- Dunwoody Village
- Maris Grove
- Penn Liberty Bank
- The Conestoga Group
- TriCounty Area Chamber of Commerce

*List includes respondents from the MLH Service Area*
The public safety survey responses are from a wide geography and include community first responders that provide emergency services and community outreach

- Aston-Beechwood Fire Company
- Berwyn Fire Company
- Brandywine Hospital Medic 93
- Brookhaven Police
- Broomall Fire Company
- Bryn Mawr Fire Company
- Downingtown Police Dept
- East Brandywine Fire Company
- Easttown Township Police Department
- Garden City Fire Company
- Good Fellowship Ambulance
- Goshen Fire Company
- Honey Brook Fire Company EMS
- Limerick Township Police
- Ludwigs Corner Fire Company
- Malvern Fire Company
- Marple Township Ambulance Corps
- Media Fire Company
- Newtown Township Police Department
- Penn Wynne- Overbrook Hills Fire Company
- Radnor Fire Company
- Tredyffrin Township Police Department
- Upper Providence Township Dept of Fire & Emergency Services
- Upper Providence Township Police
- West Goshen Township Police Department
- West Whiteland Fire Company

*List includes respondents from the MLH Service Area*
The public officials survey responses came from a wide geography. Public officials serve the public’s interest.

- Borough of West Chester
- County of Delaware
- East Caln Township
- Lower Merion Township
- Media Borough
- PA House of Representatives- District 188
- PA House of Representatives- District 157
- PA House of Representatives- District 160
- Spring City Borough
- Swathmore Borough

*List includes survey respondents from the MLH Service Area
The school nurse survey responses came from a wide geography and include schools that have attendance from children of all socio-economic backgrounds.

- Aronimink Elementary School
- Arrowhead Elementary School
- Bayard Rustin High School
- Benjamin B. Comegys School
- Beverly Hills Middle School
- Bradford Heights Elementary School
- Brandywine-Wallace Elementary School
- Charles F. Patton Middle School
- Charles Kelly Elementary School
- Coebourn Elementary School
- Concord Elementary School
- Culbertson Elementary School
- Delaware County Christian School
- Devon Elementary School
- Downingtown Area High School - East Campus Downingtown High School West
- Downingtown Middle School
- Drexel Hill Middle School
- Eagleville Elementary School
- East Goshen Elementary School
- East Vincent Elementary School
- Episcopal Academy
- Fern Hill Elementary School
- Friends Central Lower School
- Friends School Haverford
- Garnet Valley Elementary School
- Glenwood Elementary School
- Great Valley School District
- Henderson High School
- High School of the Future
- Highland Park Elementary
- Hill Top Preparatory School
- Hillcrest Elementary School
- Hillendale Elementary
- Hillside Elementary School
- Holy Child Academy
- Immaculate Heart of Mary
- Indian Lane Elementary School
- John Bartram High School
- John S Jenks School

*List includes respondents from the MLH Service Area*
The school nurse survey responses came from a wide geography and include schools that have attendance from children of all socio-economic backgrounds (cont’d)

- Lamberton School
- Limerick Elementary
- Lionville Elementary School
- Lionville Middle School
- Manoa Elementary School
- Marple Newtown High School
- McMichael Elementary School
- Mitchell Elementary School
- Morton Elementary School
- Nether Providence Elementary School
- Norristown High School
- Oaks Elementary School
- Paul Robeson High School for Human Services
- Paul V. Fly Elementary School
- Penncrest High School
- Radnor Elementary School
- Roxborough High School
- Schuylkill Elementary
- Shaw Anna H. Middle School
- Shawmont School
- Springfield High School
- St. Donato's School
- St. Francis de Sales School
- St. Francis of Assisi School
- St. Laurence School
- Stetson Middle School
- Stonehurst Hills Elementary School
- Sugartown Elementary School
- Upper Darby High School
- Upper Darby Kindergarten Center
- Upper Providence Elementary
- Uwchlan Hills Elementary School
- Valley Forge Military Academy
- West Bradford Elementary School
- West Chester East High School
- Westbrook Park Elementary School
- William Levering School
- Woodland Academy
- Woodlynde School
- Worcester Elementary School
- Worrall Elementary School

*List includes respondents from the MLH Service Area
**Chinwe Onyekere:** Onyekere is Director of Ambulatory Services and Business Development at LMC. She is responsible for implementing innovative models for primary care medicine at the LMC Clinical Care Center, developing a robust community health program and building relationships with community-based organizations in the Philadelphia area. Onyekere’s professional experience has focused on creating and managing programs that impact on people's health, the quality of care they receive and the systems that provide that care. In a prior position as a Program Officer at the Robert Wood Johnson Foundation, she focused on reducing health care disparities, reversing the childhood obesity epidemic and identifying innovative ideas for breakthroughs in health and health care. Onyekere has also served as the Executive Director for Health Leads New York, where she established a new model of health care delivery in which patients' unmet resource needs are addressed as a standard element of patient care.

**Berwood Yost:** Yost is Director of the Floyd Institute for Public Policy and also the Director of the Center for Opinion Research at Franklin and Marshall College where he also teaches courses in research methods and public health. He has substantial applied experience designing and implementing public opinion research using both qualitative and quantitative methods, and has conducted funded research on behalf of government, business, nonprofit organizations, public utilities, higher education and the media.
• Lynne Kotranski, Ph.D.: Kotranski is Managing Director for Research and Evaluation for the Public Health Management Corporation. She has over 25 years of experience conducting and managing diverse research, program evaluation and related technical assistance projects on the local, state and national level. The Research and Evaluation Group works with study design, quantitative and qualitative data collection and analysis, development of surveys and other instruments, conducting community and population needs assessments and working with individuals and organizations to address research and training needs. Kotranski and her staff provide assistance in identifying data needs, measure outcomes, and produce practical reports for program monitoring and planning.

• Francine Axler: Axler is Senior Research Associate for Public Health Management Corporation. She has been actively involved in the field of public health and health promotion, specifically in the collection and dissemination of health status, health behaviors, and utilization of health services data for residents of Southeastern Pennsylvania. Her focus is on teaching health providers how to utilize community level health data to develop needed, effective and targeted health promotion programs for vulnerable populations. She directs the PHMC Community Health Data Base, has a degree in sociology and a graduate degree in public health education.
There are a variety of local and county government agencies, community service organizations, non-profit public health organizations and advocacy groups that provide needed services to individuals and families in the community. LMC has working relationships with many of these organizations and will continue to enhance its working relationship with these community resources to improve the health status of its community. Some of these resources include, but are not limited to:

- American Heart Association
- OPIC: Our Patients In Common: group of community/hospital/long term care facilities working toward improved coordinated care
- Philadelphia Corporation for Aging
- Local townships and government organizations
- Local Universities and Schools
- ElderNet of Lower Merion and Narberth
- Jewish Federation of Children’s Services
- Kaiserman Jewish Community Center of Philadelphia
- YMCA West Philadelphia and Main Line
- Junior League of Philadelphia
- Food Trust
- Surrey Services
- Ardmore House
- Area Faith Based Organizations
- United Way of Southeastern Pennsylvania
COMMUNITY RESOURCES: HEALTH CARE FACILITIES IN THE REGION

MLH Hospitals serve populations in counties including, but not limited to: Chester, Delaware, Montgomery and Philadelphia. These hospitals provide services and additional resources for the community.

Chester County
- Brandywine Hospital
- Chester County Hospital
- Devereux Children's Health Center
- Jennersville Regional Hospital
- LifeCare Hospitals of Chester County
- Main Line Health - Paoli Hospital
- Main Line Health - Bryn Mawr Rehabilitation Hospital
- Phoenixville Hospital

Delaware County
- Crozer Chester Medical Center
- Delaware County Memorial Hospital
- Kindred Hospital - Delaware County
- Kindred Hospital - Havertown
- Mercy Fitzgerald Hospital
- Main Line Health - Riddle Hospital
- Springfield Hospital
- Taylor Hospital

Montgomery County
- Abington Memorial Hospital
- Brooke Glen Behavioral Hospital
- Eagleville Hospital
- Holy Redeemer Hospital and Medical Center
- Horsham Clinic
- Lansdale Hospital
- Main Line Health - Bryn Mawr Hospital
- Main Line Health - Lankenau Medical Center
- Mercy Suburban Hospital
- Montgomery County MH / MR Emergency Service
- Montgomery Hospital Medical Center
- Physicians Care Surgical Hospital
- Pottstown Memorial Medical Center
- Valley Forge Medical Center and Hospital
MLH Hospitals serve populations in counties including, but not limited to: Chester, Delaware, Montgomery and Philadelphia. These hospitals provide services and are additional resources for the community.

**Philadelphia County**
- Albert Einstein Medical Center
- Aria Health
- Belmont Center for Comprehensive Treatment
- Chestnut Hill Hospital
- CTCA-Eastern Regional Medical Center
- Fairmount Behavioral Health System
- Friends Hospital
- Good Shepherd Penn Partners Specialty Hospital
- Hahnemann University Hospital
- Hospital of Fox Chase Cancer Center
- Hospital of the University of Pennsylvania
- Jeanes Hospital
- Kensington Hospital
- Kindred Hospital - Philadelphia
- Kindred Hospital/South Philadelphia

**Philadelphia County (continued)**
- Kirkbride Center
- Magee Rehabilitation Hospital
- Mercy Philadelphia Hospital
- Methodist Hospital Moss Rehabilitation Hospital Nazareth Hospital
- Penn Presbyterian Medical Center
- Pennsylvania Hospital
- Roxborough Memorial Hospital
- Saint Joseph's Hospital - Philadelphia
- Shriners Hospital for Children - Philadelphia
- St. Christopher’s Hospital for Children
- Temple University Hospital
- The Children's Hospital of Philadelphia
- Thomas Jefferson University Hospital
The following community health needs are important to the community. However, they will not be addressed with specific implementation plans since these needs are already being addressed throughout the LMC and MLH System communities or action items have been developed under the heading of another priority (i.e. “uninsured” being addressed within the health need priorities of obesity, cardiovascular disease, cancer, etc.)

Behavioral Health
As noted, there are some data gaps to thoroughly understand the specific behavioral health issues in the community. Regardless, Main Line Health has several uniquely designated behavioral health centers, each specializing in a level of care and treatment. For families and individuals coping with issues like psychiatric disorders, addictions or other problems which affect one's sense of well-being and participation in life, the Main Line Health Behavioral Health network provides numerous services for the LMC and MLH community. Additionally, LMC provides services and referrals via the Lankenau Clinical Care Center, which serves patients residing in the Urban West area where the highest rates of stress are reported.
Uninsured
As noted, most patients seen at the Lankenau Clinical Care Center reside in the Urban West area, a disadvantaged community where 28% of the population is uninsured. This population also reports higher rates of fair or poor health. Embedded in the implementation plans for the selected priorities of obesity, cardiovascular disease, lung and cancer are specific action items addressing the uninsured residing in the Urban West and other LMC areas. These action items are specific for persons that utilize the LCCC and for uninsured persons that may not be accessing health services due to financial and other barriers. Some of these action items include eliminating disparities of care, free health screenings and health education, counseling at local community organizations and events to identify risk factors, make healthy choices and seek treatment when needed in the most appropriate setting.

Prescriptions
Filling prescriptions is not an area that LMC can address directly. However, LMC works closely with the Deavers Fund which provides free of low-cost prescriptions to persons in need.