



Suburban Community Hospital

Extraordinary People. Extraordinary Care.

2020

Suburban Community Hospital Community Health Needs Assessment

- Montgomery County, Pennsylvania -

TABLE OF CONTENTS

- Perspective / Overview** 03
- Approval & Project Goals** 05
- Community Input & Collaboration Data Collection and Timeline** 06
- Information Gaps** 07
- Participation by Those Representing the Broad Interests of the Community** 08
- Input of Medically Underserved, Low-Income, and Minority Populations** 08
- Input of Those with Expertise in Public Health** 09
- Community Selected for Assessment** 10
- Key Findings** 11
- Process and Methods** 11
- Description of Community Served** 12
- Business Profile** 16
- Tapestry Profile** 18
- Community Input: Individual Interviews** 20
- Health Status Data, Rankings and Comparisons** 25
- Results of the CHNA: Community Health Summit Prioritized Needs** 42
- Prioritization Criteria** 42
- Prioritized Needs** 42
- Impact of 2017 CHNA and Implementation Plan** 44
- Appendix: Community Asset Inventory** 50

Perspective / Overview

About Suburban Community Hospital

Suburban Community Hospital is a not-for-profit, acute care hospital, and a member of the Prime Healthcare Foundation, a 501(c)(3) public charity. For over 65 years, Suburban Community Hospital has been delivering quality healthcare to Montgomery County and the surrounding region.

Suburban Community Hospital, originally named Riverview Hospital, opened in 1944. Chartered at 740 Sandy Street in Norristown, PA, Riverview Osteopathic Hospital would provide medical and surgical services to the sick, afflicted and injured, and would educate persons in the care and nursing.

As Suburban Community Hospital continues to expand the East Norriton location to meet the needs of the community, it is with great pride that we reflect on our beginnings on Sandy Street. With the modern technology and new facilities, patients can be assured that the quality, compassionate care that characterized Riverview Osteopathic Hospital and Suburban General Hospital still embodies Suburban Community Hospital today.

Prime Healthcare is at the forefront of medical excellence, combining clinical expertise with compassion. As members of the Prime Healthcare family, our physicians collaborate with our area network hospitals and specialists. We provide patients with access to state-of-the-art technology and advanced treatment options. We have you covered for you and your family's medical needs.



Creating a culture of health in the community



Action Cycle Source: the Robert Wood Johnson Foundation's County Health Rankings website: <http://www.Countyhealthrankings.org/roadmaps/action-center>

The Community Health Needs Assessment (CHNA) uses systematic, comprehensive data collection and analysis to define priorities for health improvement, creates a collaborative community environment to engage stakeholders, and an open and transparent process to listen and truly understand the health needs of Montgomery County, Pennsylvania.

The Action Cycle shows how to create healthy communities. The rankings later in the document assist in understanding what makes a healthy community.

2020 Community Health Needs Assessment

This document is a hospital facility-specific Community Health Needs Assessment (CHNA) for Suburban Community Hospital (SCH).

Suburban Community Hospital as the sponsors of the assessment, engaged national leaders in community health needs assessments to assist in the project. Stratasan, a healthcare analytics and facilitation company based out of Nashville, Tennessee, provided the analysis of community health data, conducted the interviews and facilitated a community health summit to receive community input into the priorities.

- ✔ Starting on December 22, 2020, this report is made widely available to the community via Suburban Community Hospital's website <https://www.suburbanhosp.org> and paper copies are available free of charge at Suburban Community Hospital, 2701 Dekalb Pike, Norristown, PA 19401 or by phone (610) 278-2000.
- ✔ Suburban Community Hospital's board of directors approved this assessment on December 21, 2020.

PROJECT GOALS

- ① To continue a formal and comprehensive community health assessment process which allows for the identification and prioritization of significant health needs of the community to assist with resource allocation, informed decision-making and collective action that will improve health.
- ② To continue a collaborative partnership between all stakeholders in the community by seeking input from persons who represent the broad interests of the community.
- ③ To support the existing infrastructure and utilize resources available in the community to instigate health improvement in the community.

“ We initiated the Community Health Needs Assessment with the goal to assess the health and needs of the community. This process is an affirmation of what we’ve been doing to improve health and has jumpstarted our next implementation plan,” said Michael Motte, CEO Suburban Community Hospital

The information gathered both from public health data and from community stakeholders provided the insight the community needed to set priorities for significant health issues and will be used by the community to inform and support our implementation plans,” added Dorothy Patzek, COO Suburban Community Hospital

”

Community

Input and Collaboration

Data Collection and Timeline

In May 2020, Suburban Community Hospital began a Community Health Needs Assessment for Montgomery County and sought input from persons who represent the broad interests of the community using several methods:

- Information gathering, using secondary public health sources, occurred in May and June 2020.
- Community members participated in individual interviews for their perspectives on community health needs and issues on June 18-19, 2020.
- A Community Health Summit was conducted on September 24, 2020 with community stakeholders. The audience consisted of healthcare providers, religious organizations, business leaders, government representatives, schools, not-for-profit organizations, employers and other community members.



Photo Credit: SCH

Information Gaps

While this assessment was quite comprehensive, it cannot measure all possible aspects of health in the community, nor can it adequately represent all possible populations of interest. It must be recognized that these information gaps might in some ways limit the ability to assess all the community's health needs.

Participants

Individuals from community and healthcare organizations collaborated to implement a comprehensive CHNA process focused on identifying and defining significant health needs, issues, and concerns of Montgomery County. The several-month process centered on gathering and analyzing data as well as receiving input from persons who represented the broad interests of the community to provide direction for the community and hospital to create a plan to improve the health of the communities.

Participation by those Representing the Broad Interests of the Community

Participation in interviews and the Community Health Summit creating the Montgomery County Community Health Needs Assessment and Improvement Plan included:

- Key Community Stakeholders
- Community physicians
- Schools
- Religious organizations
- Social Services
- Chamber of Commerce
- Department of Health
- Montgomery County Elected Officials
- Other Healthcare workers
- Physicians
- Public Safety

In many cases, several representatives from each organization participated.

Community Engagement and Transparency

Many members of the community participated in individual interviews and the Summit. We are pleased to share the results of the Community Health Needs Assessment with the rest of the community in hopes of attracting more advocates and volunteers to improve the health of our communities. The following pages highlight key findings of the assessment. We hope you will take the time to review the health needs of our community as the findings impact each and every citizen in one way or another; and join in the improvement efforts.

Input of the Medically Underserved, Low-Income, and Minority Populations

Input of medically underserved, low-income and minority populations was received through interviews, and the Community Health Summit. Agencies representing these population groups were intentionally invited to and participated in the interviews and Summit.

Input of those with Expertise in Public Health

Representatives of the Montgomery County Health Department were interviewed as well as attended the community health summit.

The Pennsylvania Department of Health's State Health Improvement Plan 2015-2020 identifies three health priorities:

1. Obesity, physical inactivity and nutrition
2. Primary care and preventive services
3. Mental health and substance use

The State Health Improvement Plan identifies priorities and includes strategies, lead and collaborating organizations and progress measures for each priority.

Problem statement: Obesity, overweight, poor nutrition, and physical inactivity are associated with profound, adverse health conditions. These include high blood pressure, high cholesterol, type 2 diabetes, heart disease, some cancers, and other limiting physical and mental health issues.

In Pennsylvania, two out of three adults (6.2 million residents) and one out of three school-age children (0.5 million) have excess weight. Evidence links obesity, physical inactivity, and poor nutrition to shortened lifespan. Today's youth are in danger of dying at younger ages than their parents.

Problem statement: Limited access to quality health care is a growing issue in many communities in Pennsylvania. Limits relate to the number of primary care practitioners, cultural competency, knowledge, location, affordability, coordination of comprehensive care, reimbursement and technology, among other things. Such limitations prevent many people from obtaining quality preventive and disease management services.

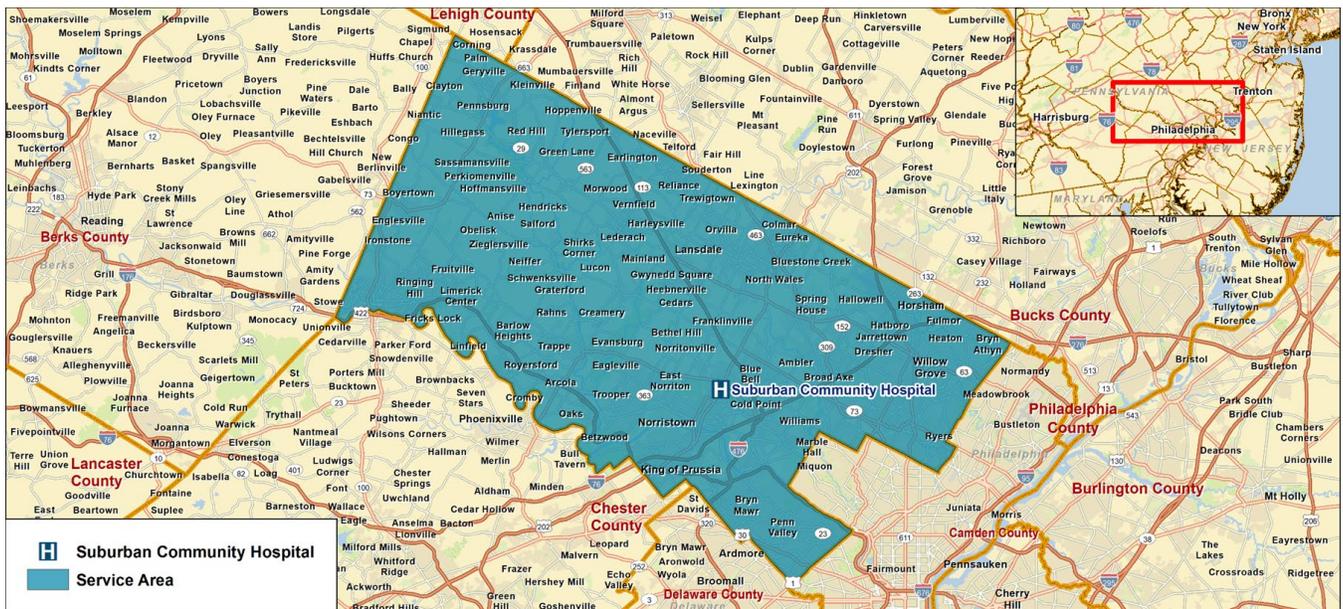
Problem statement: Unmet mental health and substance use needs frequently lead to preventable illness and death in individuals, families and communities.

*Source: Pennsylvania Department of Health State Health Improvement Plan 2015-2020:
<https://www.health.pa.gov/topics/Health-Planning/Pages/State-Health-Improvement-Plan.aspx>*

Community Selected for Assessment

Montgomery County was the primary focus of the CHNA due to the service area of Suburban Community Hospital. Used as the study area, Montgomery County provided 88% of 2019 inpatient discharges. The community includes medically underserved, low-income and minority populations who live in the geographic areas from which Suburban Community Hospital draws patients. All patients were used to determine the service area without regard to insurance coverage or eligibility for financial assistance under Suburban Community Hospital's Financial Assistance Policy.

Suburban Community Hospital Study Area - 2020



Key Findings

Community Health Assessment

Results

Based on the secondary data, interviews and summit prioritization, the SCH board approved the following identified needs to be the focus of the work of the medical center over the next three years.

1. Mental Health – access to resources, adolescent, undocumented (8)
2. Obesity – nutrition (5)
3. Access to care – for minority groups, undocumented, home health (4)
4. Chronic diseases – heart disease, diabetes, obesity, etc. (4) to include smoking

Regarding the selected needs, SCH will develop actionable steps to address local health disparities – Our experience with the local impact of the COVID-19 pandemic, highlighted a disproportionate impact on the Black and Hispanic populations. Other at-risk populations (those with underlying health conditions) were also severely impacted. As a healthcare leader in Montgomery County, SCH will be a catalyst in addressing health disparities and be part of solutions to make positive impacts on social determinants of health.

Process and Methods

Both primary and secondary data sources were used in the CHNA.

Primary methods included:

- Individual interviews with community members
- Community Health Summit

Secondary methods included:

- Public health data – death statistics, County Health Rankings, cancer incidence
- Demographics and socioeconomic – population, poverty, uninsured, unemployment
- Psychographics – behavior measured by spending and media preferences



Photo Credit: SCH

Description of the Communities Served

Demographics

The table below shows the demographic summary of Montgomery County compared to Pennsylvania and the U.S.

	Montgomery County	Pennsylvania	USA
Population	843,245	13,012,438	332,417,793
Median Age	41.9	41.5	38.5
Median Household Income	\$90,762	\$59,112	\$60,548
Annual Pop. Growth (2019-2024)	0.53%	0.23%	0.77%
Household Population	322,657	5,142,419	129,922,162
Dominant Tapestry	Savvy Suburbanites (1D)	Salt of the Earth (6B)	Green Acres (6A)
Businesses	35,660	460,011	12,112,147
Employees	522,038	6,365,688	150,271,675
Health Care Index*	138	100	100
Average Health Expenditures	\$8,167	\$5,907	\$5,934
Total Health Expenditures	\$2.6 B	\$30.4 B	\$742.8 B
Racial and Ethnic Make-up			
White	77%	79%	68%
Black	10%	11%	13%
American Indian	0%	0%	1%
Asian/Pacific Islander	8%	4%	7%
Other	2%	3%	7%
Mixed Race	3%	3%	4%
Hispanic Origin	6%	8%	19%

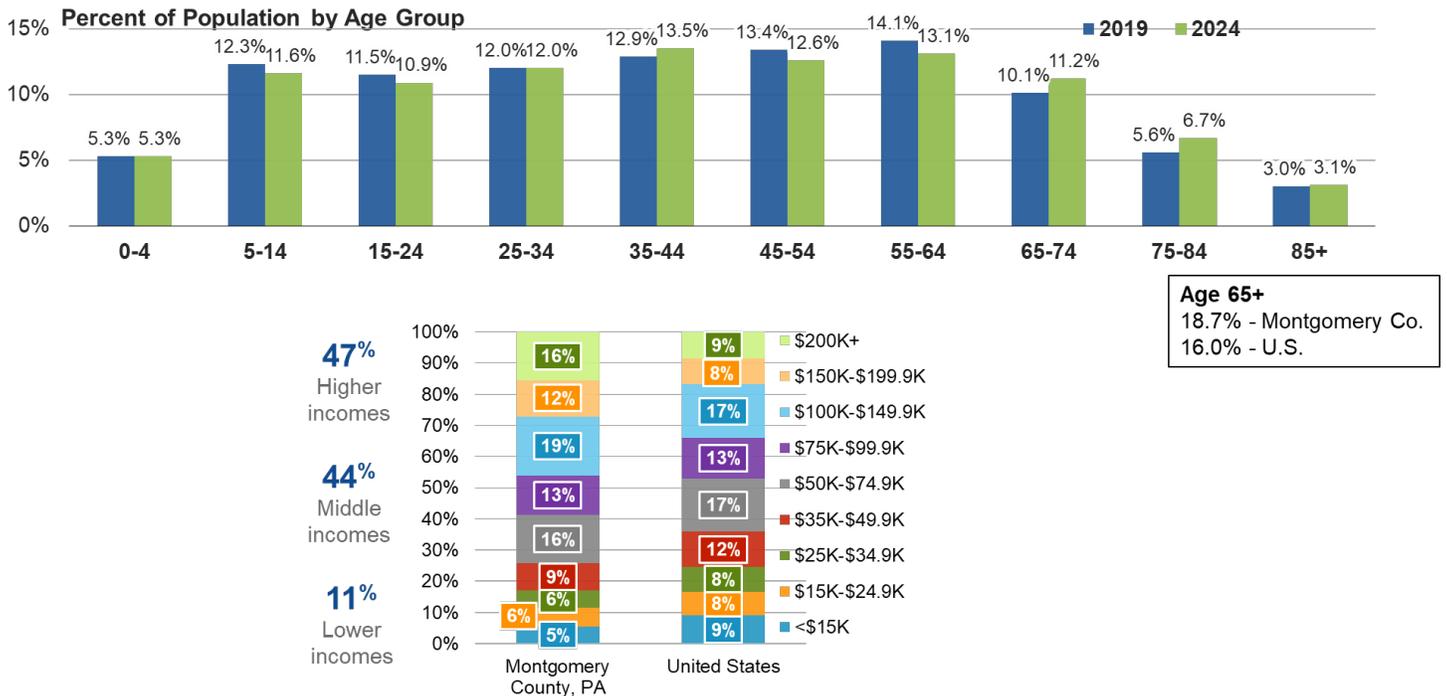
Source: ESRI

*The Health Care Index is household-based, and represents the amount spent out of pocket for medical services and insurance relative to a national index of 100.

The median is the value at the midpoint of a frequency. There is an equal probability of falling above or below the median.

Demographics, cont.

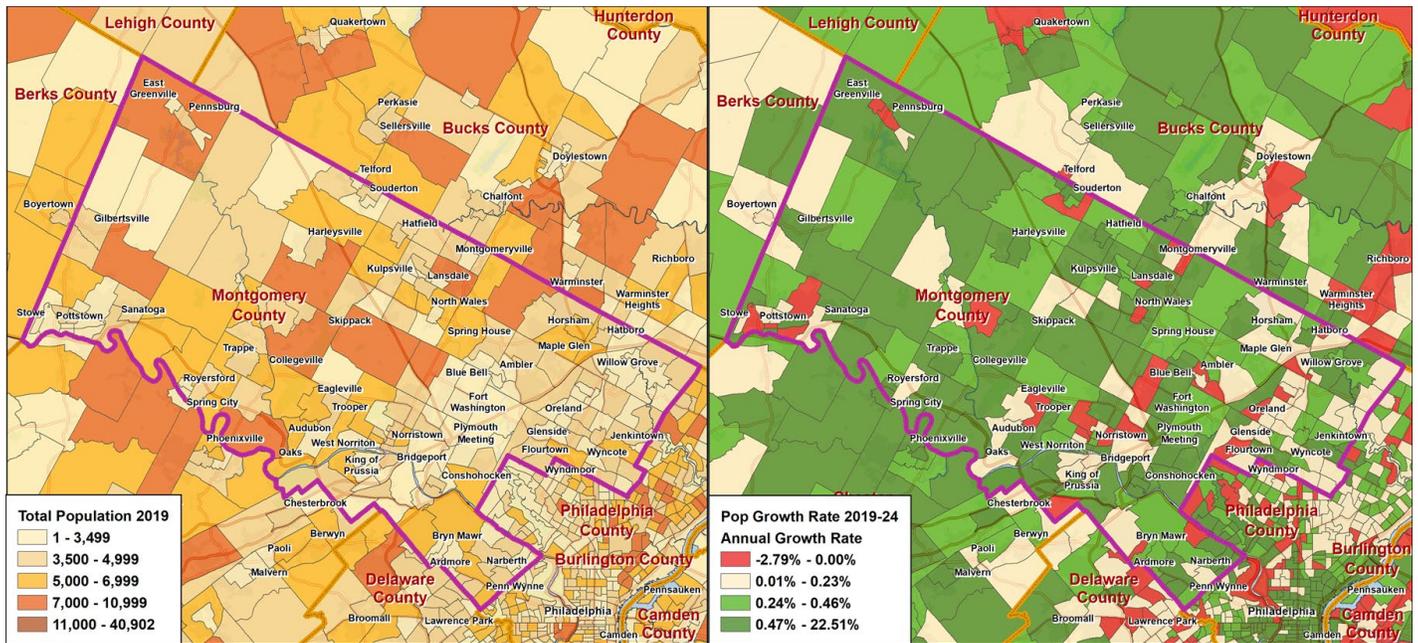
Montgomery County



Source: ESRI

- The population of Montgomery County is projected to increase from 2019 to 2024 (0.53% per year). Pennsylvania is projected to increase 0.23% per year. The U.S. is projected to increase 0.77% per year.
- Montgomery County had a higher median age (41.9 median age) than PA (41.5) and the U.S. (38.5). In Montgomery County the percentage of the population 65 and over was 18.7%, higher than the U.S. population 65 and over at 16.0%.
- Montgomery County median household income at \$90,762 was higher than PA (\$59,112) and the U.S. (\$60,548). The rate of poverty in Montgomery County was 5.9% which was lower than PA (12.2%) and the U.S. (13.1%).
- The household income distribution of Montgomery County was 47% higher income (over \$100,000), 44% middle income, and 11% lower income (under \$25,000).
- The health care index measures how much households spent out-of-pocket on health care services including insurance premiums. The U.S. index was 100. Montgomery County was 139, indicating 39% more spent out of pocket than the average U.S. household on medical care (doctor's office visits, prescriptions, hospital visits) and insurance premiums.
- The racial and ethnic make-up of Montgomery County was 77% White, 10% Black, 6% Hispanic Origin, 3% mixed race, 8% Asian/Pacific Islander, and 2% other. *(These percentages total to over 100% because Hispanic is an ethnicity, not a race.)*

2019 Population by Census Tract and Change (2019-2024)



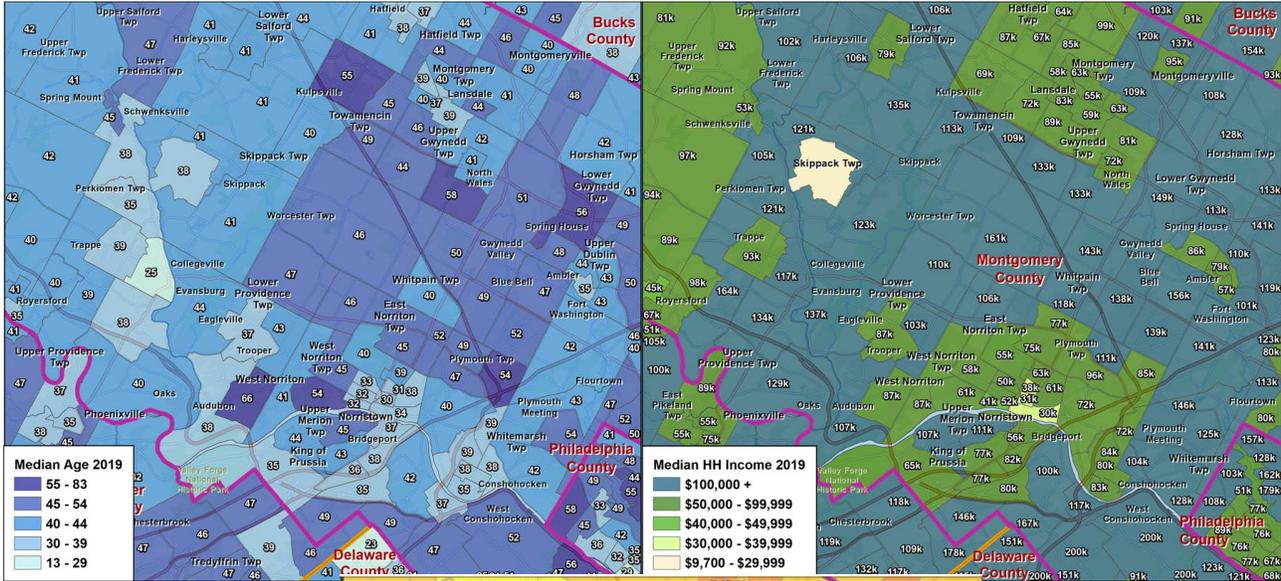
Source: ESRI

Red is population decline
 Yellow is positive up to the PA growth rate
 Green is greater than the PA growth rate
 Dark Green is twice the PA growth rate

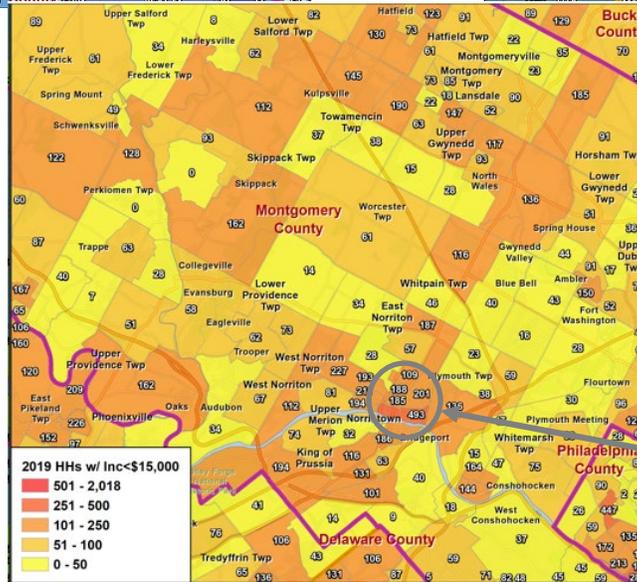
Census tracts generally have a population size between 1,200 and 8,000 people, with an optimum size of 4,000 people.

Montgomery County's population was projected to increase from 2019 to 2024, 0.53% per year. Several census tracks were expected to grow at a rate greater than PA. However, a few tracks were expected to decline in population.

2019 Median Age & Income



Source: ESRI



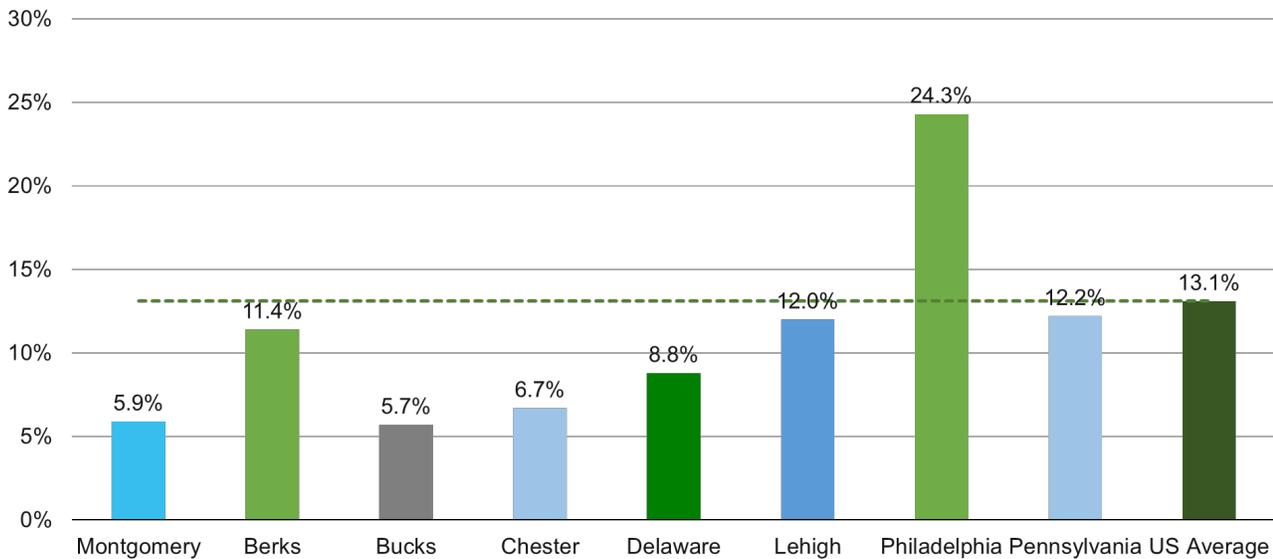
The top two maps depict median age and median income by census tract zoomed into the area SCH has the most influence, the southeastern portion of the county. Looking at age and income by census tract is helpful to demonstrate all areas of a county may have health disparities based on age and income. The health needs may be very different in the census tract in Collegeville with a median age of 25 than the census tract between West Norriton and Audubon with a median age of 66.

Looking at median household income by census tract also gives insight into health status. The lower income areas may require more assistance with health improvement than the higher income tracts. The lower income census tracts were three clustered together located in Norristown near the river.

The lower map is the number of households making less than \$15,000 per year. Again further attempting to identify those areas within the county that may have lower health status. The three census tracts with low median household income contained 866 households making less than \$15K per year.

Demographics, cont.

Montgomery County's 2018 poverty percentage was 5.9% compared to Pennsylvania at 12.2% and the U.S. at 13.1%.



The cost of living was 15% higher in Montgomery County than in the US, with housing being 36% higher.

Business Profile

55.8% percent of employees in Montgomery County were employed in:

- Health Care & Social Assistance (18.0%)
- Retail Trade (12.7%)
- Professional, Scientific & Tech Services (10.1%)
- Manufacturing (8.3%)
- Accommodation & Food Service (6.7%)

Source: Esri

Retail and accommodation & food services offer health insurance at a lower rate than healthcare, manufacturing and professional, scientific & tech services.

Montgomery County's July 2020 preliminary unemployment was 12.2% compared to 12.5% for Pennsylvania and 10.2% for the U.S. These rates are up significantly from March 2020 prior to the significant increase in Covid-19 cases.

It is beneficial to contact people in groups to improve health. There are three primary places people gather during the week, work, church and school. These are three excellent places to reach people to create a culture of health.

Demographics, cont.

The Public Citizens for Children and Youth published a study in June 2019 entitled, Underwater: What's Sinking Families in Montgomery County that outlines the financial struggles and recommendations on improvements to socioeconomic conditions.



Recommendations

To boost families' incomes:

- Create a workforce development strategy to help people move into higher paying jobs
- Increase the State government's payments to agencies that employ low-wage, government-funded professionals, such as Direct Support Professionals and child care workers, so that wages are at least \$15 an hour and ideally \$18 an hour, to increase the ability of these professionals to stay above water while supporting a family

To reduce the child care and early education cost burden:

- Increase funding for Child Care Works, Pre-K Counts and Head Start
- Expand eligibility for Child Care Works
- Implement full day kindergarten in all school districts

To reduce the health care cost burden:

- Expand eligibility for free and subsidized Children's Health Insurance Program
- Preserve the Affordable Care Act

To reduce the cost burden of other living expenses:

- Create more affordable transportation through mobility planning at the County level
- Create affordable housing strategies at the County level

To reduce the tax burden on financially struggling families:

- Expand Pennsylvania's Tax Forgiveness program to incomes of at least \$75,000
- Offset property taxes by increasing State funding for public schools

To improve the financial outlook of public schools:

- Increase State K-12 basic education and special education funding
- Restore the State's charter school reimbursement to school districts

More than a quarter of families in Bucks and Montgomery Counties are likely to be underwater

29% of families raising children in Bucks County and 27% in Montgomery County are likely to be underwater

Their children face long odds of upward mobility due to an education system that is barely treading water

PCCY public citizens for children & youth 2

Child Care is the largest expense. Incomes are flat, while essential expenses rose 27%. 3,422 uninsured children in Montgomery Co. 27% of the County earn less than \$75,000 per year, leaving less than \$50 per week after paying for essentials.

The study recommends boosting families' incomes by:

- Creating a workforce development strategy to help people move into higher paying jobs
- Increase the State government's payments to agencies that employ low-wage, government-funded professionals, such as Direct Support Professionals and child care workers, so that wages are at least \$15 an hour and ideally \$18 an hour, to increase the ability of these professionals to stay above water while supporting a family

To reduce the child care and early education cost burden:

- Increase funding for Child Care Works, Pre-K Counts and Head Start
- Expand eligibility for Child Care Works
- Implement full day kindergarten in all school districts

To reduce the health care cost burden:

- Expand eligibility for free and subsidized Children's Health Insurance Program
- Preserve the Affordable Care Act

To reduce the cost burden of other living expenses:

- Create more affordable transportation through mobility planning at the County level
- Create affordable housing strategies at the County level

To reduce the tax burden on financially struggling families:

- Expand Pennsylvania's Tax Forgiveness program to incomes of at least \$75,000
- Offset property taxes by increasing State funding for public schools

To improve the financial outlook of public schools:

- Increase State K-12 basic education and special education funding
- Restore the State's charter school reimbursement to school districts

Tapestry Segmentation

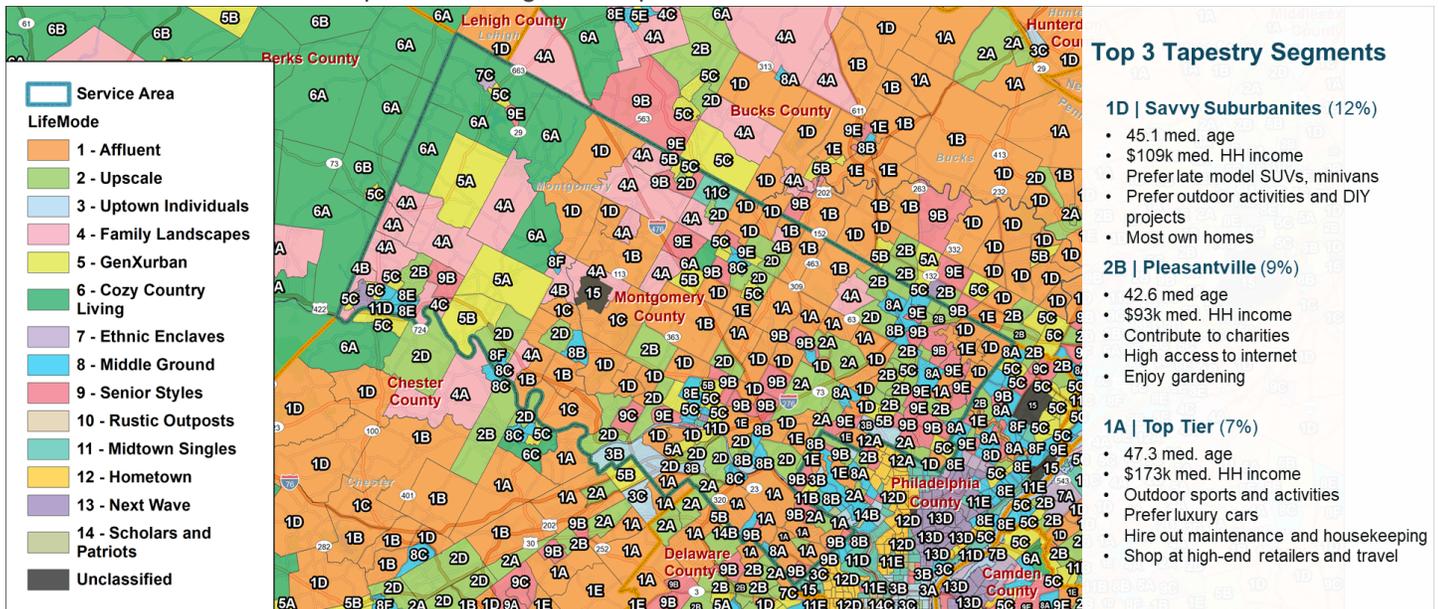
Demographics are population, age, sex, race. Psychographics are adding behavior data in the form of spending habits and survey data on top of demographics. 28% of Montgomery County are included in three Tapestry Segments. The map below is color coded by LifeMode, which are groupings of Tapestry Segments that behave similarly. The dominant Tapestry segment of each census tract is identified by number.

The dominant Tapestry Segments in the county were Savvy Suburbanites 1D(12%), Pleasantville 2B (9%), and Top Tier 1A(8%). The map below shows the dominant Tapestry Segment by census tract.

There is a very brief description of the segments on the right of the map. There is much more information on Tapestry Segments, at <http://doc.arcgis.com/en/esri-demographics/data/tapestry-segmentation.htm>. Studying the Tapestry Segments in the study area helps determine health habits and communication preferences of residents enabling more effective communication and implementation of solutions to improve health. Many spoke of meeting people where they are in the interviews. Studying Tapestry Segments can help do that.

Based on the different LifeModes in the county, this is an affluent community with pockets of fairly diverse populations. The three dominant Tapestry segments in the county are the higher income, more educated population which accounts for the higher median household income in the county. In a CHNA we need to find those populations within a county that may need more focused attention to improve health.

Top three categories represent 28% of total households.



Source: ESRI

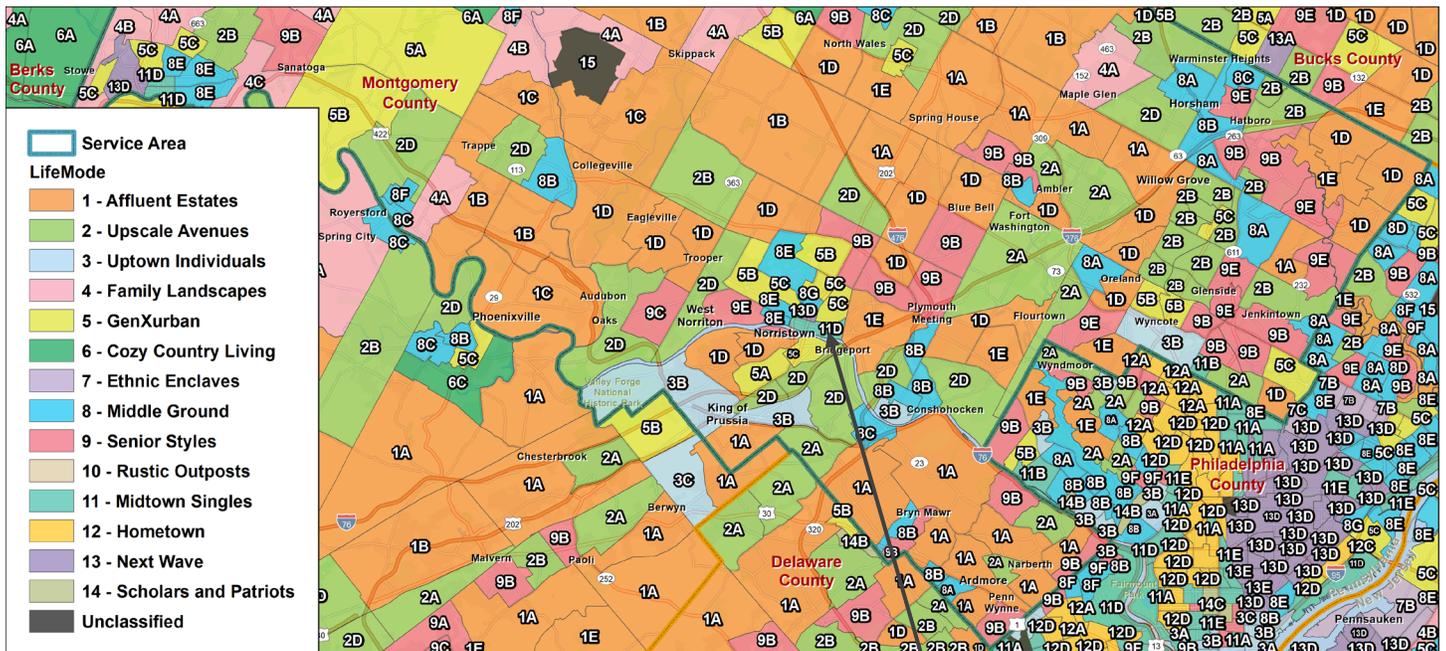
Tapestry Segmentation, cont.

The map below zooms into an area of low income in Norristown. The census tracts of concern based on income have the dominant Tapestry segments of 11D, 13D and 8G.

These are: Set to Impress – 11D median age of 33.9, median HH income \$32,800. These are primarily renters in apartment complexes. The majority have cell phones, no landline, use the Internet for social media, downloading video games, and watching TV programs, and they prefer shopping for bargains at Walmart, including discount stores like Kmart, Big Lots, and the local dollar store.

Fresh Ambitions – 13D, median age of 28.6, median HH income \$26,700. These households are 25% foreign born, supporting a large family on little income. They predominantly rent, are young families, and use cell phones rather than landlines. They must budget for baby food and disposable diapers, and half can access the Internet via home PC and half subscribe to a cable service.

Hardscrabble Road – 8G median age 32.4, median HH income \$28,200. These are primarily renters in single family homes. They favor shopping at their local discount store and search for bargains on the Internet. Diapers, baby food and children’s clothing are priority expenditures.



Source: ESRI

Interview Results

Interviews

Community stakeholders representing the broad interests of the community as well as representing low income, medically underserved and minority populations, and the health department participated in individual interviews on June 18-19, 2020 for their input into the community’s health. Community participation in individual interviews represented a broad range of interests and backgrounds. Below is a summary of the individual interviews.

Interviewed:

Organization Interviewed	Population Represented (kids, low income, minorities, those w/o access)
Suburban Community Hospital (SCH)	All
Catholic Social Services	Low income
Suburban Community Hospital – Tobacco grant	All, tobacco users
Chief of Police	All
Saint Patrick’s Church	Hispanic, low income, seniors
Community physician	Low income & access to care
Community physician	Low income & access to care
Community physician	Low income & access to care
Montgomery County Commissioner	All
School Principal	Kids
SCH Governing Board/community member	All
Norristown Area School District Superintendent	Kids
Volunteer at SCH	Seniors
SCH Governing Board/community member	All
Attorney	All
Chamber of Commerce	Employers, business
Norristown Department of Health	All

1. How do you define health?

- State of wellbeing
- Physical, mental, spiritual, social emotional wellbeing

2. For the purposes of this Community Health Needs Assessment, the community is Montgomery County, generally, how would you describe the community’s health?

- Good health status, but with disparities within the county based on income, race and ethnicity

3. What are the most significant health issues for the community today?

- Substance use disorder – opioid abuse, prescription drugs, alcohol, smoking
- Obesity – healthy eating/active living
- Mental Health – lack of providers, elderly, recognition, stigma, contributes to homeless, suicide
- Access to healthcare services – transportation, insurance, prescriptions, high cost of healthcare, gap in care based on resources, shortage of primary care
- Environmental issues – safety, housing, lead
- Chronic diseases – diabetes, heart disease, high blood pressure, lung disease
- Coronavirus – how to live with it and how to get immunizations out to the community. Contributes to the deterioration of physical and mental health.
- Others –pre and postnatal care, income disparities, lack of awareness of services, health education

4. What are the most significant health issues facing various populations including medically underserved, low-income and minority populations?

- Access to healthcare – cost, fear, language barriers, insurance, children’s insurance lapsing, dental care, primary care
- Obesity – healthy eating/active living, poor diet, processed foods, food insecurity, fast food, access to exercise
- Chronic diseases – diabetes, hypertension
- Housing – growing concern due to unemployment
- Socioeconomics – living wage, access to opportunities, childcare options and cost, lack of maternity and paternity leave
- Safety – neighborhoods
- Education – what’s healthy, food, screening and prevention needs

5. What are the most important health issues facing children/adolescents?

- Mental health – screen time, social media, trauma, crazy world, domestic strife, depression, ADHD, lead exposure, cutting
- Access to care – lack of pediatricians, insurance, vaccines, low income
- Healthy Eating/Active Living – obesity, diet, nutrition, indoors too much on computers and phones, food access
- Child abuse, neglect, bullying
- Substance use - Vaping, drugs, drinking
- Asthma
- Others
 - School system
 - High cost of living
 - Housing
 - Childcare

6. What are the most important health issues facing seniors?

- Isolation & Loneliness – distant from family members
- Access to care – online appointments and results, cost of medication, transportation, physicians' attention on seniors, lack of affordable home care
- Chronic diseases – obesity, diabetes, hypertension, kidney disease
- Lack of mobility, falls
- Nursing home care
- Finances and multigenerational homes

7. The community performed a CHNA in 2017 and identified priorities for health improvement

1. Maternal & child health
2. Mortality – cancers, heart disease, stroke
3. Preventive screenings
4. Poor nutrition & obesity
5. Behavioral health
6. The homeless

What has changed most related to health status in the last three years?

- All still valid, would take any off and are unchanged.
- Added access to care as a priority
- Increase opioid use and abuse in priority

8. What behaviors have the most negative impact on health?

- Healthy Eating – poor diet, nutrition, eating fast food
- Active Living – Lack of exercise, activity, lack of commitment to activity
- Substance Use – opioids, alcohol, nicotine
- Others
 - Violence (domestic & other)
 - Distracted driving
 - High risk sexual behavior
 - Lack of personal responsibility
 - Not social distancing and using masks

9. What environmental factors have the biggest impact on community health?

- Housing – lead, radon, affordable, cleanliness, slum lords, mold, poor quality
- Safety – violence, drugs, online
- Built environment – green space, safe space, parks, sidewalks, revitalization, speeding
- Heavy traffic
- Air and Water – poor air (mixed), good water
- Others
 - Undocumented population
 - Second-hand smoke
 - Access to supermarkets for nutritious foods

10. What do you think the barriers will be to improve health in the communities?

- Language, Cultures, Documentation Status
- Habits/priorities – human nature, don't want to change, not going to happen to me
- Cost/Access to care – primary care, insurance, transportation, fear of doctors
- Socioeconomics – housing, employment
- Education – formal education and health education
- Others
 - Family unit
 - Healthcare reimbursement
 - Abuse – child, spouse, seniors
 - Bureaucracy and big business
 - Lack of social connectivity

11. What community assets support health and wellbeing?

- Social Services and Support – 750 programs
 - Churches
 - BucksMont Collaborative, Tri-County Network, Health Spark Foundation
 - Senior Centers
 - YMCA, Girls Club, Nanna, ACLAMO, Catholic Social Services, HopeWorx, CCATE, Health Spark
- Healthcare and Wellness Services
 - Hospitals
 - Salus mobile vision
 - Free and low-income clinics/health centers
 - Children's Hospital
 - Telehealth
 - Maternal and early childhood collaborative
 - Community Coalitions, Montgomery County Health Alliance
 - Health Promoter Program
- Active Living
 - Trails, parks, fitness centers, Police Athletic League
- Healthy Eating
 - Food banks, pantries
- Schools
- Community Networks

12. Where do members of the community turn for basic healthcare needs?

- Hospital ERs
- Clinics and Healthcare Center
- Urgent Care
- Primary Care Providers
- Churches
- Schools
- Dr. Google

13. If you had a magic wand, what improvement activity should be a priority for Montgomery County to improve health?

- Improve access to care (cost, primary care, insurance)
- Education – break the cycle, health education, what resources are available
- Mental Health – more providers, culturally competent, more resources, beds
- Substance Use Disorder – more support, facilities and treatment
- Social support – investment in community organizations, child protective services, navigators for elderly, more prevention, kids’ afterschool and summer programs, more cooperation
- Family Time – quality time, siesta, back to basics
- Living wages – increase minimum wage, relationship to housing



Photo Credit: SCH

Health Status Data, Rankings and Comparisons

Health Status Data, Rankings and Comparisons

Based on the 2020 County Health Rankings study performed by the Robert Wood Johnson Foundation and the University of Wisconsin², Montgomery County ranked 4th out of 67 Pennsylvania counties for health outcomes (1= the healthiest; 67 = unhealthiest), and 1st for health factors. Health outcomes are composed of length of life and quality of life measures. Health factors are comprised of health behaviors, clinical care, social & environmental factors, and physical environment.

County Health Rankings suggested the areas to explore for improvement in Montgomery County were: higher adult smoking, higher adult obesity, and higher excessive or binge drinking. The areas of strength were identified lower physical inactivity, higher access to exercise opportunities, lower overall teen births, lower percentage of uninsured, lower ratio of population to primary care physicians, dentists and mental health providers, higher mammography screening, higher flu vaccinations, higher percentage with some college, lower overall children in poverty, lower children in single-parent households, and lower overall injury deaths. There are additional opportunities to improve health when looking at these measures by race and ethnicity.

When analyzing the health status data, local results were compared to Pennsylvania, the U.S. (where available), and the top 10% of counties in the U.S. (the 90th percentile). Where Montgomery County's results were worse than PA and U.S., groups and individuals have an opportunity to act and improve these community measures. To become the healthiest community in Pennsylvania and eventually the nation, Montgomery County must close several lifestyle gaps. For additional perspective, Pennsylvania was ranked the 28th healthiest state out of the 50 states. (Source: 2019 America's Health Rankings; lower is better) Pennsylvania strengths were low percentage of uninsured population, high rate of primary care physicians and high immunization coverage among adolescents. Pennsylvania challenges were high levels of air pollution, high prevalence of frequent mental distress, and high drug death rate.

Comparisons of Health Status

Information from County Health Rankings and America's Health Rankings was analyzed in the CHNA in addition to the previously reviewed sociodemographic information and other public health data. Other data analyzed is referenced in the bullets below each category, such as: causes of death, demographics, socioeconomics, consumer health spending, cancer incidence, and interviews. If a measure was better than Pennsylvania, it was identified as a strength, and where an indicator was worse than Pennsylvania, it was indicated an opportunity for improvement. To prevent strengths from becoming opportunities for improvement, it's important to continually focus on them. Opportunities were denoted with red octagons, and strengths were denoted with green stars for easy interpretation. The years displayed on the County Health Rankings graphs show the year the data was released. The actual years of the data are contained in the source notes below the graphs.

² The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Pennsylvania's counties every year since 2003.

Health Status Data, Rankings and Comparisons

In most of the following graphs, Montgomery County will be blue, Pennsylvania (PA) will be red, U.S. grey and the 90th percentile of counties in the U.S. gold.

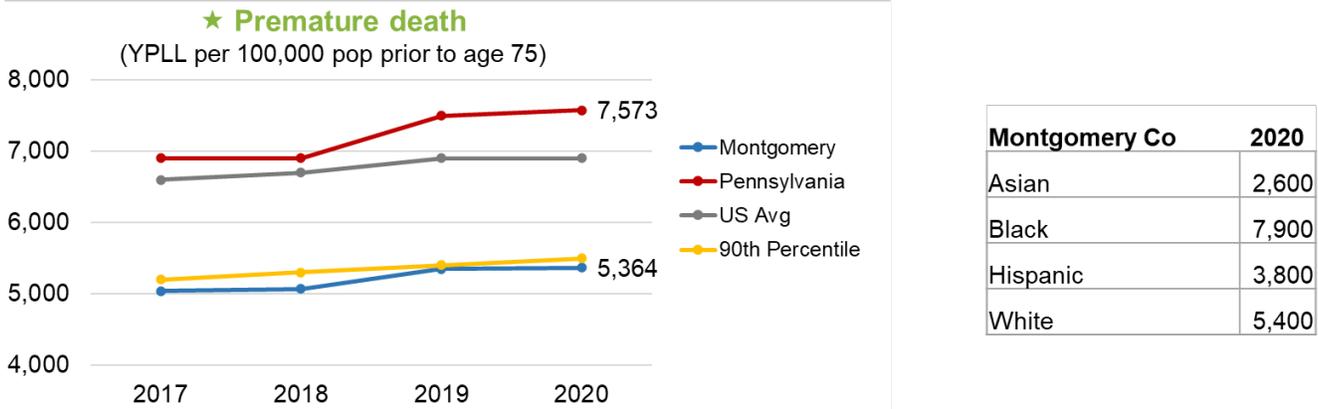
Health Outcomes (Length of Life and Quality of Life)

Health Outcomes are a combination of length of life and quality of life measures. Montgomery County ranked 4th in health outcomes out of 67 Pennsylvania counties.

Length of Life

Length of life was measured by years of potential life lost per 100,000 population prior to age 75, lower is better. For example, if a 25-year-old is killed in an accident, that is 50 years of potential life lost prior to age 75. Montgomery County ranked 4th in length of life in PA. Montgomery County lost 5,364 years of potential life per 100,000 population which is lower than PA and the U.S. However, when analyzing by race and ethnicity, the Black population had 7,900 years of potential life lost compared to 2,600 for the Asian population, 2,800 for the Hispanic population, and 5,400 for the White population.

Montgomery County residents can expect to live 1.8 years more than the average U.S. resident. However the Black population can expect to live 2.3 years less than the White population.



Source: County Health Rankings; National Center for Health Statistics – Mortality File 2016-2018

★ **Life Expectancy** (Average number of years a person can expect to live)

	2020
Montgomery County	80.9
Pennsylvania	78.3
US Avg	79.1
90th Percentile	81.1

Montgomery Co	2020
Asian	89.7
Black	77.7
Hispanic	86.3
White	80.8

Source: County Health Rankings; National Center for Health Statistics – Mortality File 2016-2018

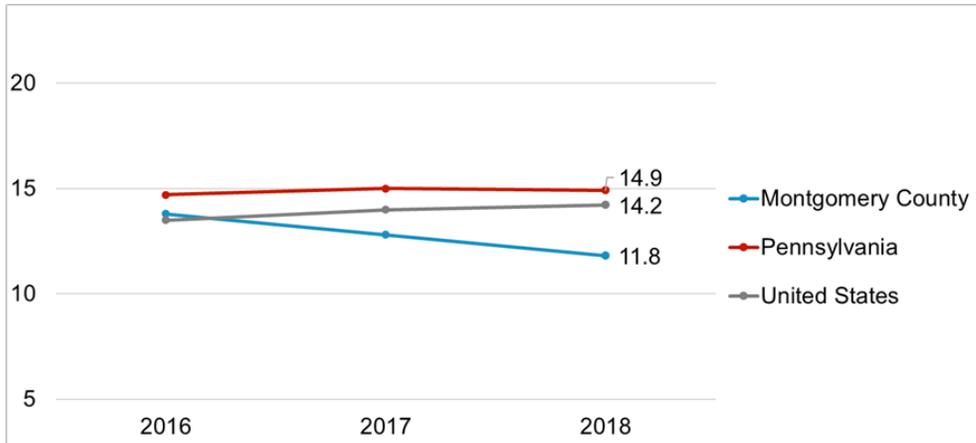
Leading Causes of Death: Age-Adjusted Death Rates per 100,000 Population

Cause of Death	Montgomery County	Pennsylvania	US
Heart Disease	144.0	176.1	163.6
Cancer	137.3	156.6	149.1
Accidents (Unintentional Injuries)	45.7	61.9	48.0
Respiratory Diseases	27.6	35.1	39.7
Stroke	41.7	35.3	37.1
Alzheimer's	20.5	20.7	30.5
Diabetes	14.0	20.2	21.4
Influenza and Pneumonia	12.8	15.5	14.9
Kidney disease	12.6	15.8	12.9
Suicide	11.8	14.9	14.2
Liver disease	4.6	8.2	11.1
Sepsis	11.7	13.2	10.2
Hypertension and Renal Disease	3.2	5.9	8.9

Source: Wonder.cdc.gov. Age-adjusted rates per 100,000 population. Montgomery County data from 2017, 2018 combined. PA, US data from 2018. *Rates that appear in red for a county denote a higher value compared to state data. Age Adjustment Uses 2000 Standard Population.

Red areas had death rates higher than PA. The leading causes of death in Montgomery County was heart disease followed by cancer like PA and the U.S. As of September 22, 2020, 878 deaths related to Covid-19 were recorded in Montgomery County, 104 per 100,000 population. PA – 63 per 100,000 population, and the US – 60 deaths per 100,000 population, making Covid the third leading cause of death. The comparison time periods are different and the Covid rate is a simple rate, not age adjusted. Following the above-mentioned causes of deaths were accidents, stroke, respiratory diseases, Alzheimer’s, Diabetes, influenza and pneumonia, kidney disease, suicide, sepsis, liver disease, and hypertension and renal disease.

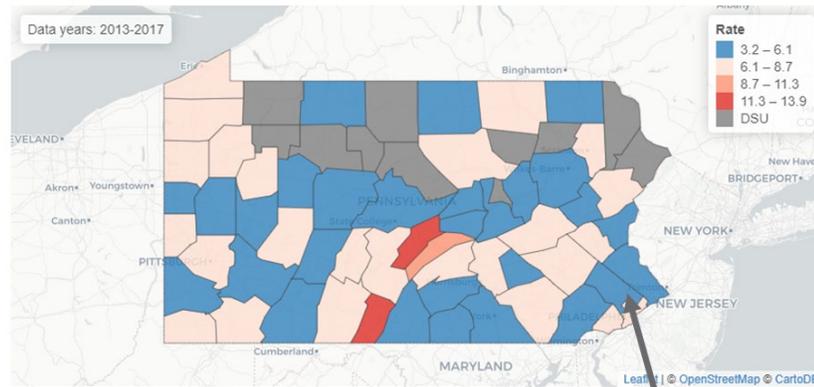
★ **Suicide Rate**
(per 100,000 Population)



Source(s): wonder.cdc.gov (2018), National Center for Health Statistics, period linked birth/infant death data. Retrieved June 30, 2020, from www.marchofdimes.org/peristats.

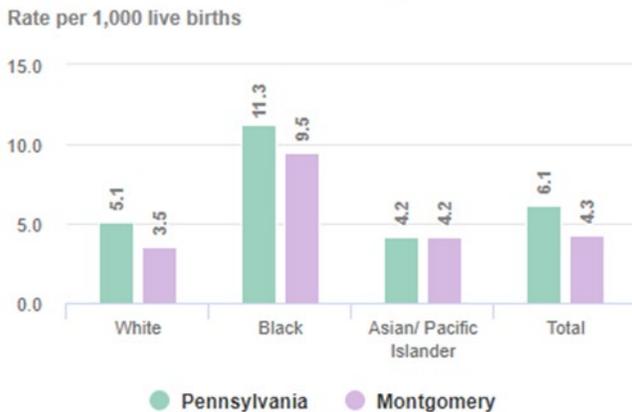
Montgomery County’s suicide rate declined and was lower than PA and the U.S.

Infant Mortality per 1,000 Live Births



4.5 infant mortality per 1,000 live births

Infant mortality rates by race: Pennsylvania and Montgomery, 2015-2017 Average



Black infant mortality is 2.7 x higher than white infant mortality at 9.5.
PA Hispanic infant mortality was 6.2.

• Comparisons only available for categories shown.

Length of Life STRENGTHS

- Montgomery County had lower years of potential life lost than PA and the U.S. at 5,364. The Asian, Hispanic and White population had lower years of potential life lost than PA and the U.S.
 - Montgomery County had higher life expectancy than PA and the U.S. The Asian, Hispanic, and White population had higher life expectancy than PA and the U.S.
 - Montgomery County had lower death rates for heart disease, cancer, accidents, respiratory diseases, Alzheimer's, Diabetes, Influenza and pneumonia, kidney disease, suicide, liver disease, sepsis and hypertension and renal disease than PA.
 - The suicide rate in Montgomery County was 11.8 per 100,000 population, lower than PA (14.9) and the U.S. (14.2).
 - Infant mortality was 4.5 per 1,000 live births, lower than PA.
-

Length of Life OPPORTUNITIES

- Montgomery County had a higher death rate for strokes and death rate due to Covid-19 than PA.
 - The life expectancy for the Black population was 3.1 years lower than the White life expectancy.
 - The years of potential life lost per 100,000 pop prior to age 75 was higher for the Black population at 7,900, higher than PA and the U.S. in general.
 - Black infant mortality is 2.7 times higher than White infant mortality at 9.5 deaths per 1,000 live births. PA Hispanic infant mortality was 6.2 which is higher than the White infant mortality.
-

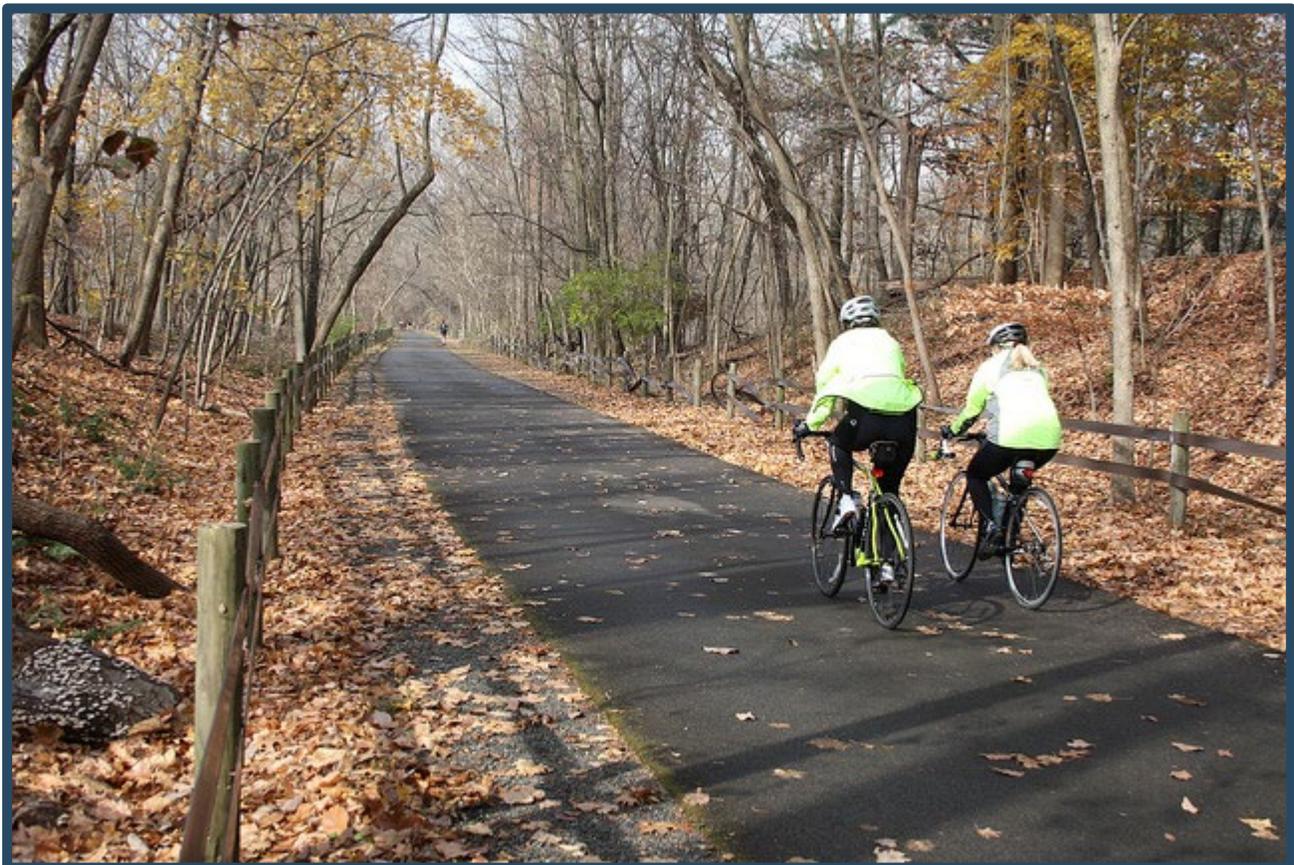
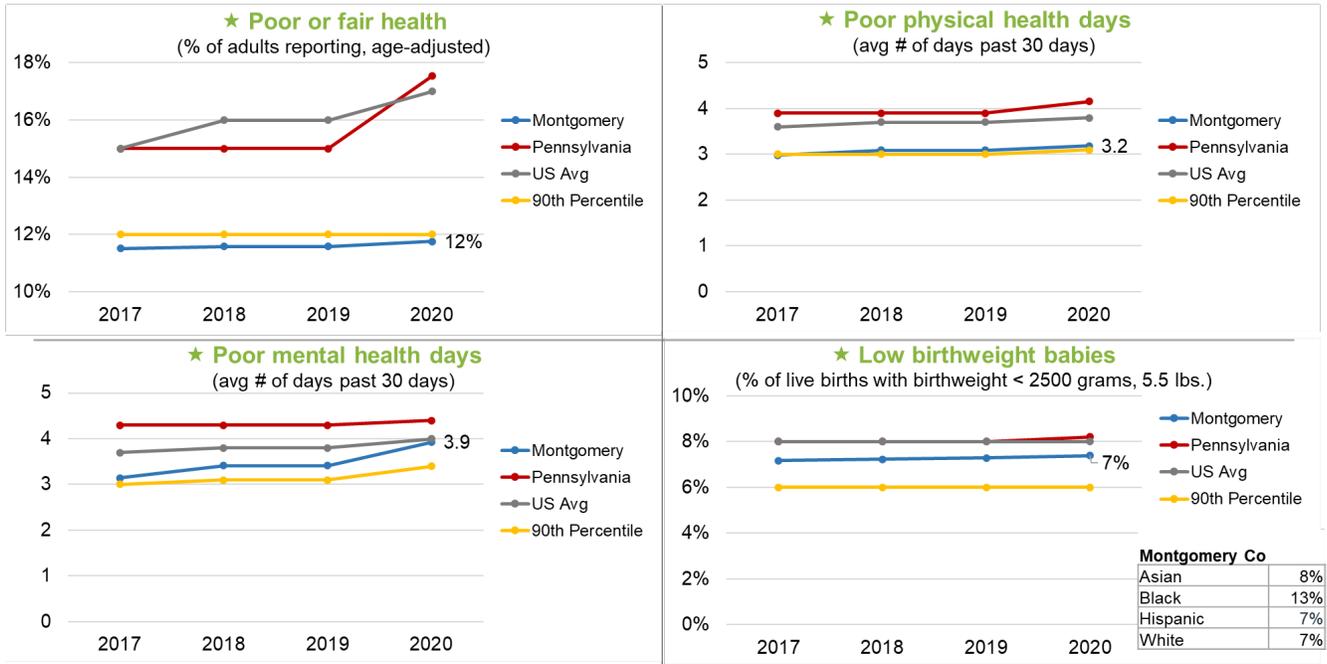


Photo Credit: Montcopa.org

Quality of Life

Quality of life was measured by: % reporting fair or poor health, the average number of poor physical health days and poor mental health days in the past 30 days, and % of live births with birthweight less than 2500 grams, or 5.5 lbs. Montgomery County ranked 2nd in quality of life out of 67 Pennsylvania counties.



Source: County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS) 2017
 Source: County Health Rankings; National Center for Health Statistics – Natality files (2012-2018)

Quality of Life STRENGTHS

- Montgomery County had a lower percentage of low birthweight babies at 7% than PA and the U.S.
- Montgomery County had a lower percentage of adults reporting poor or fair health than PA at 12%.
- Montgomery County had a lower percentage of adults reporting poor mental health days than PA at 3.9.
- Montgomery County had a lower percentage of adults reporting poor physical health days than PA at 3.2.

Length of Life OPPORTUNITIES

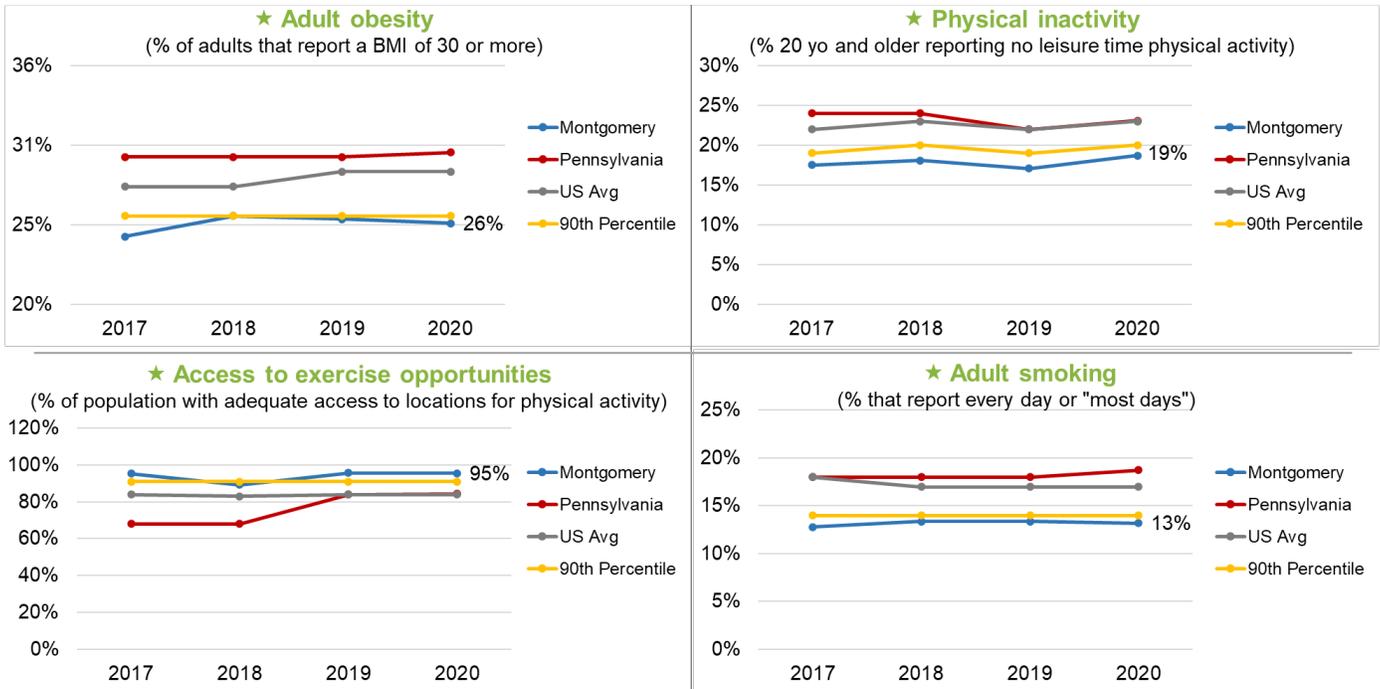
- The Black population had 13% low birthweight babies, higher than overall PA and the U.S.

Health Factors or Determinants

Health factors or determinants rankings are comprised of measures related to health behaviors (30%), clinical care (20%), social & economic factors (40%), and physical environment (10%). Montgomery County ranked 1st in health factors out of 67 Pennsylvania counties.

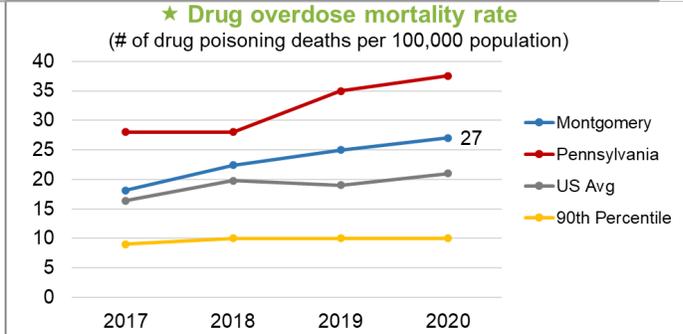
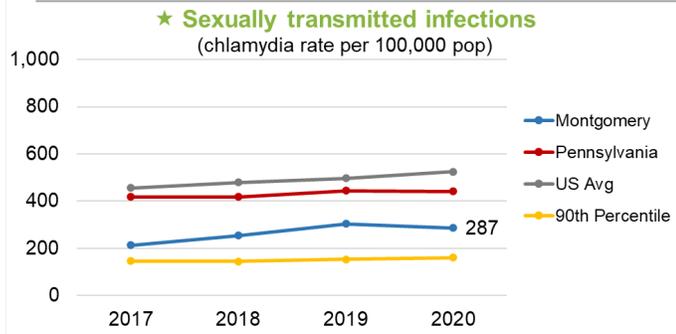
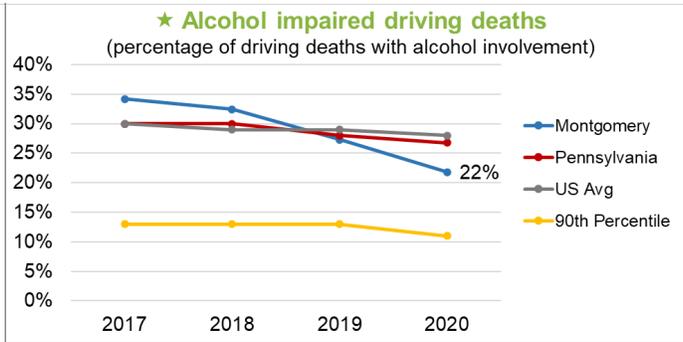
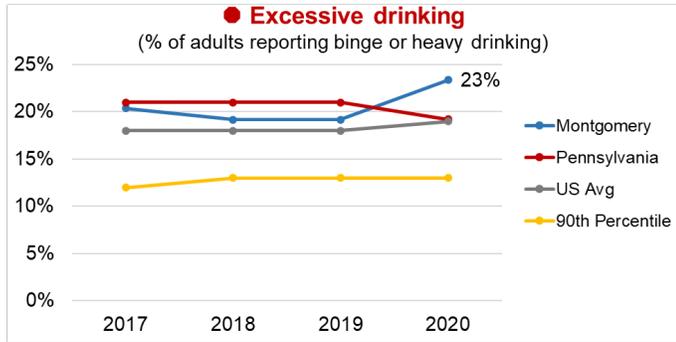
Health Behaviors

Health behaviors are made up of nine measures and account for 30% of the county rankings. Montgomery County ranked 1st in health behaviors out of 67 counties in Pennsylvania.

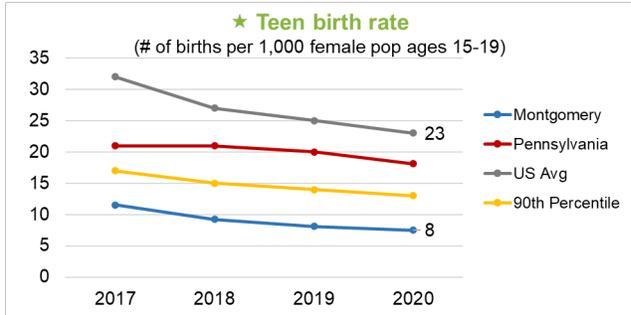
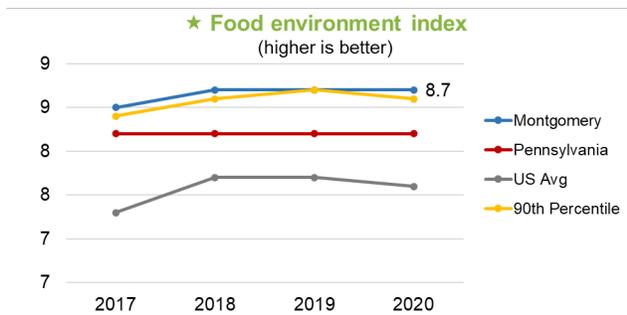


Source: Obesity, physical inactivity - County Health Rankings; CDC Diabetes Interactive Atlas based on responses to BRFSS and Census Bureau's population estimates program, 2016 Source: Access to exercise opportunities - County Health Rankings; ArcGIS Business Analyst, Delorme map data, Esri and U.S. Census Tigerline Files, 2010 and 2019. Measures the percentage of individuals in a County who live reasonably close to a location for physical activity, defined as parks or recreational facilities (local, state national parks, gyms, community centers, YMCAs, dance studios and pools based on SIC codes) Source: Smoking - County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS), 2017

Health Behaviors, Cont.



Source: Excessive drinking - County Health Rankings; Behavioral Risk Factor Surveillance System (BRFSS), 2017 Source: Alcohol-impaired driving deaths - County Health Rankings; Fatality Analysis Reporting System, 2014-2018 Source: STIs - County Health Rankings; National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention, 2017 Drug overdose rate: CDC WONDER mortality data, 2016-2018



★ Teen birth rate
(# of births per 1,000 female pop ages 15-19)

Montgomery Co	2020
Asian	1
Black	19
Hispanic	32
White	4

Source: Food environment: County Health Rankings; USDA Food Environment Atlas, Map the Meal Gap from Feeding America, 2015 & 2017; Source: Teen birth rate – County Health Rankings; National Center for Health Statistics – Natality files, 2012-2018

The food environment index is comprised of % of the population with limited access to healthy foods and % of the population with food insecurity. Limited access to foods estimates the % of the population who are low income and do not live close to a grocery store. Food insecurity is the % of the population who did not have access to a reliable source of food during the past year.

Health Behaviors, Cont.

Adverse Childhood Experiences (ACEs)

Abuse, neglect and household dysfunction have the effect of poor health behaviors as well as poor physical and mental health. The more ACEs a child has the higher risk they are for poor health outcomes.

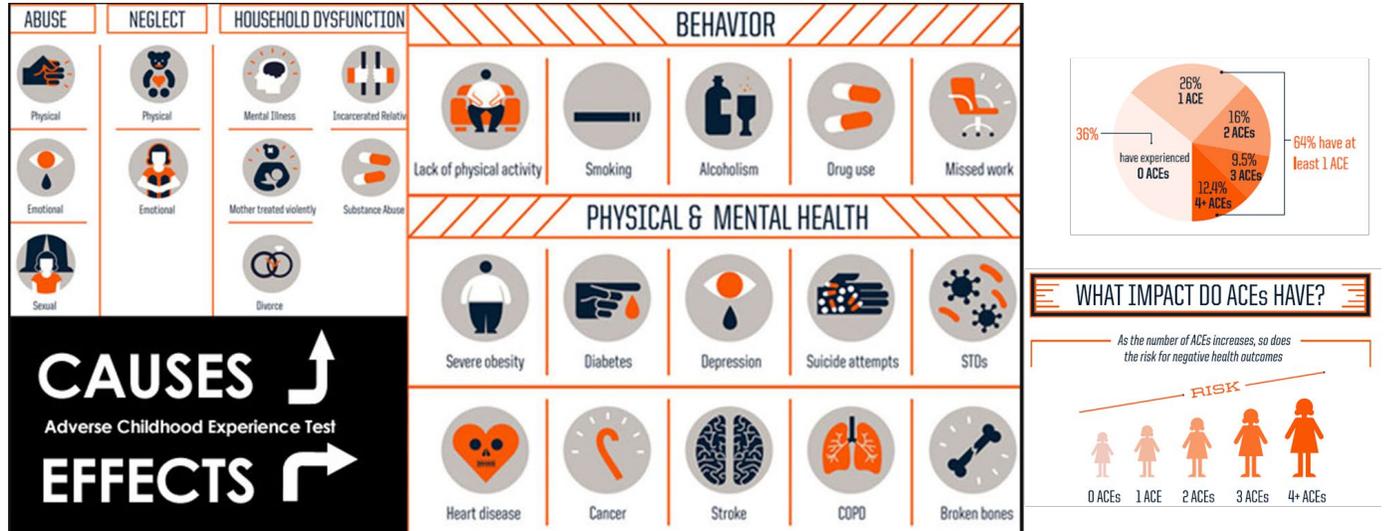


Photo Credit: Montcopa.org

Health Behaviors STRENGTHS

- Adult obesity in Montgomery County was 26%, lower than PA at 30% and the U.S. at 29%. Obesity in Pennsylvania and the U.S. continue to rise, putting people at increased risk of chronic diseases including: diabetes, kidney disease, joint problems, hypertension and heart disease. Obesity can cause complications in surgery and with anesthesia. It has been implicated in Alzheimer's and often leads to metabolic syndrome and type 2 diabetes. County Health Rankings indicates obesity as a concern in the County because obesity leads to many other health indicators.
- Physical inactivity was lower in Montgomery County at 19% than in PA and the U.S. at 23%.
- Access to exercise opportunities in Montgomery County was 95%, higher than PA and the U.S. at 84%.
- Montgomery County adult smoking was 13%, lower than PA at 19% and the U.S. at 17%.
- Alcohol impaired driving deaths were lower in Montgomery County (22%) than in PA and the U.S. (28%).
- Sexually transmitted infections measured by chlamydia rate per 100,000 population were lower in Montgomery County (287) than PA (441) and the U.S. (525). The rate increased since 2017.
- The food environment index was higher (better) in Montgomery County (8.7) than PA (8.2) and the U.S. (7.6).
- The number of drug overdose deaths per 100,000 population was 27 in Montgomery County, lower than PA at 38 but higher than the U.S. at 21.
- The teen birth rate in Montgomery County was 8 births per 1,000 female population ages 15-19, lower than PA at 18 births, and the U.S. at 23 births. The trend decreased since 2017.

Health Behaviors OPPORTUNITIES

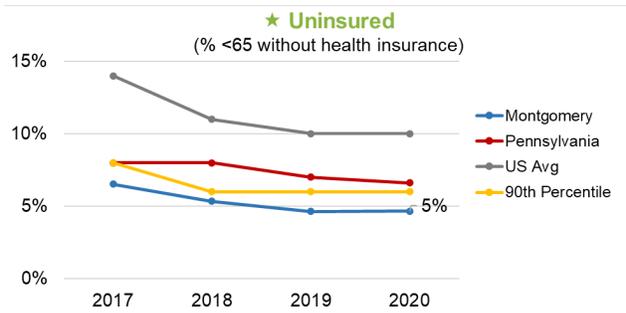
- 23% of Montgomery County reported binge or heavy drinking higher than PA and the U.S. (19%).
- The teen birth rate among Hispanic's was 32 births per 1,000 female population ages 15-19. The Black teen birth rate was 19, while the White teen birth rate was 4.



Photo Credit: Montcopa.org

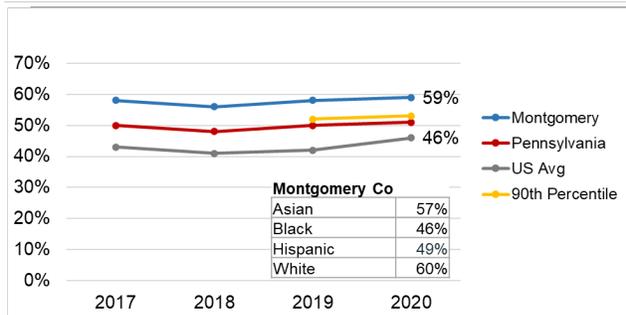
Clinical Care

Clinical care ranking is made up of seven indicators, and accounts for 20% of the county rankings. Montgomery County ranked 2nd in clinical care out of 67 Pennsylvania counties.



★ Preventable hospital stays
(hospitalization rate for ambulatory-sensitive conditions per 100,000 Medicare enrollees)

2020	
Montgomery County	4,061
Pennsylvania	4,655
US Avg	4,710
90th Percentile	2,761



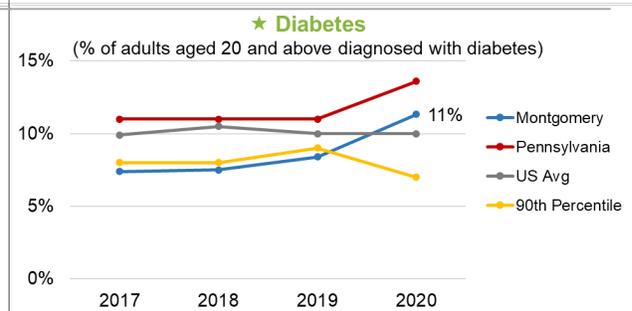
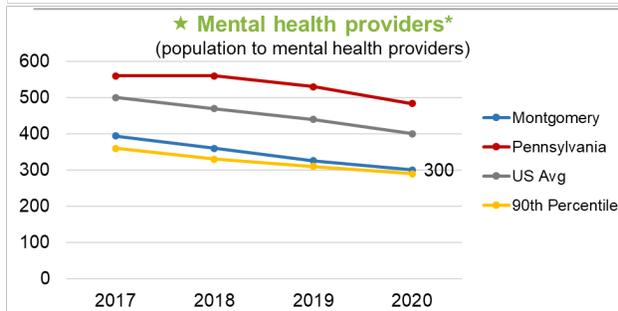
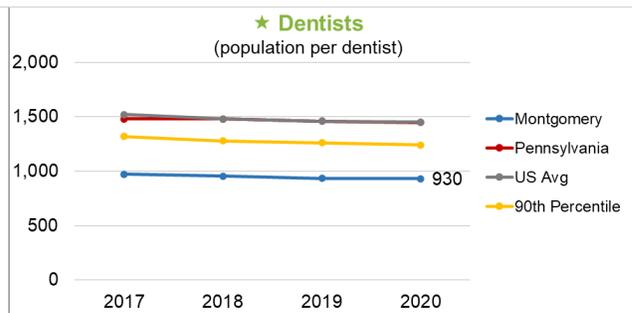
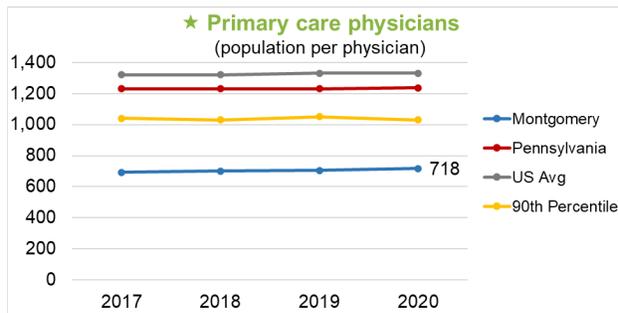
★ Mammography screening
(% female Medicare enrollees receiving mammo screening)
Higher is better

2020	
Montgomery County	48%
Pennsylvania	45%
US Avg	41%
90th Percentile	50%

Source: Uninsured - County Health Rankings; Small Area Health Insurance Estimates, 2011

Source: Preventable hospital stays, mammography screening – County Health Rankings, CMS Mapping Medicare Disparities Tool, 2017

Source: diabetic screening - County Health Rankings; Dartmouth Atlas of Health Care, Medicare claims data, 2017



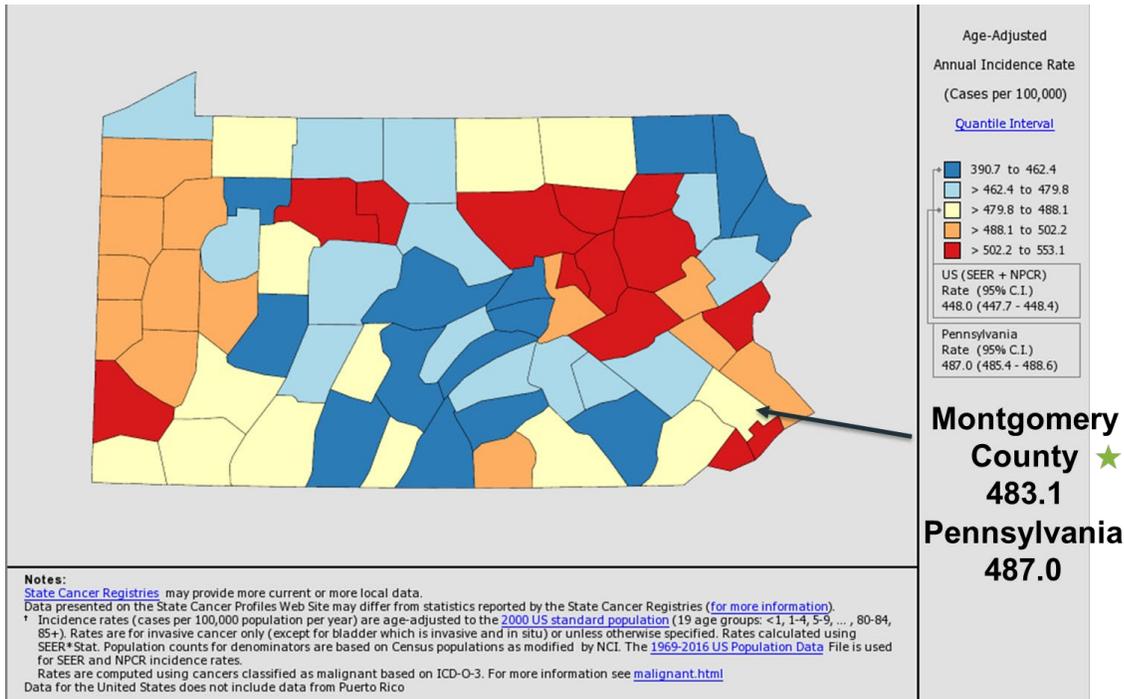
Source: Pop to PCP - County Health Rankings; Area Health Resource File/American Medical Association, 2017

Source: Pop to Dentists - County Health Rankings; Area Health Resource File/National Provider Identification file, 2018

Source: Pop to mental health provider (psychiatrists, psychologists, licensed clinical social workers, counselors, marriage and family therapists and advanced practice nurses specializing in mental health) County Health Rankings; CMS, National Provider Identification, 2019

Clinical Care, cont.

Cancer Incidence Rates – PA Counties



Cancer incidence rates (cases per 100,000 population) were lower in Montgomery County than in PA. Montgomery County’s death rate due to cancer was also lower than PA and the U.S.



Photo Credit: AllTrails.com

Clinical Care, cont.

Clinical Care STRENGTHS

- The percent of population under sixty-five without health insurance was 5% in Montgomery County, lower than PA at 7% and the U.S. at 10%.
- Preventable hospital stays in Montgomery County were 4,061 per 100,000 Medicare enrollees which was lower than PA (4,655) and the U.S. (4,710). Hospitalization ambulatory-care sensitive conditions, which are diagnoses treatable in outpatient settings, suggests that the quality of care provided in the outpatient setting was less than ideal. This measure may also represent a tendency to overuse hospitals as a main source of care. Preventable Hospital Stays could be classified as both a quality and access measure, as some literature describes hospitalization rates for ambulatory care-sensitive conditions primarily as a proxy for access to primary health care. Source: CHR; Brumley R, Enguidanos S, Jamison P, et al. Increased satisfaction with care and lower costs: Results of a randomized trial of in-home palliative care. J Am Geriatric Soc. 2007;55:993-1000.
- The percent of Medicare enrollees with flu vaccines per year was higher in Montgomery County (59%) than PA (53%) and the U.S. (46%).
- Mammography screening was higher in Montgomery County at 48% than PA at 45% and the U.S. at 41%.
- The population per primary care physician, dentist and mental health providers were lower (better) than PA and the U.S.
- The percentage of adults with diabetes in Montgomery County was 11%, lower than PA (14%) but higher than the U.S. (10%). The percentage increased since 2017.
- The cancer incidence rate for Montgomery was lower than PA and in the middle of all PA counties.

Clinical Care OPPORTUNITIES

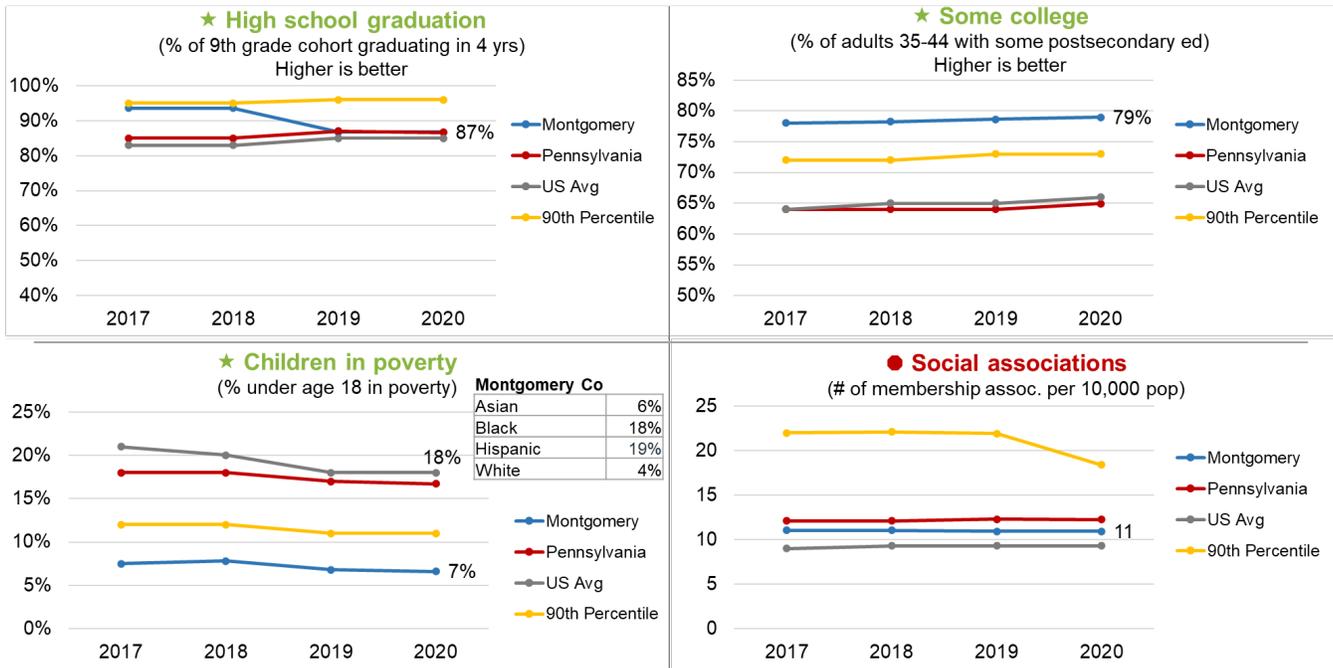
- The percentage of Medicare enrollees vaccinated with the flu vaccine was lower for the Black and Hispanic communities than the White population.



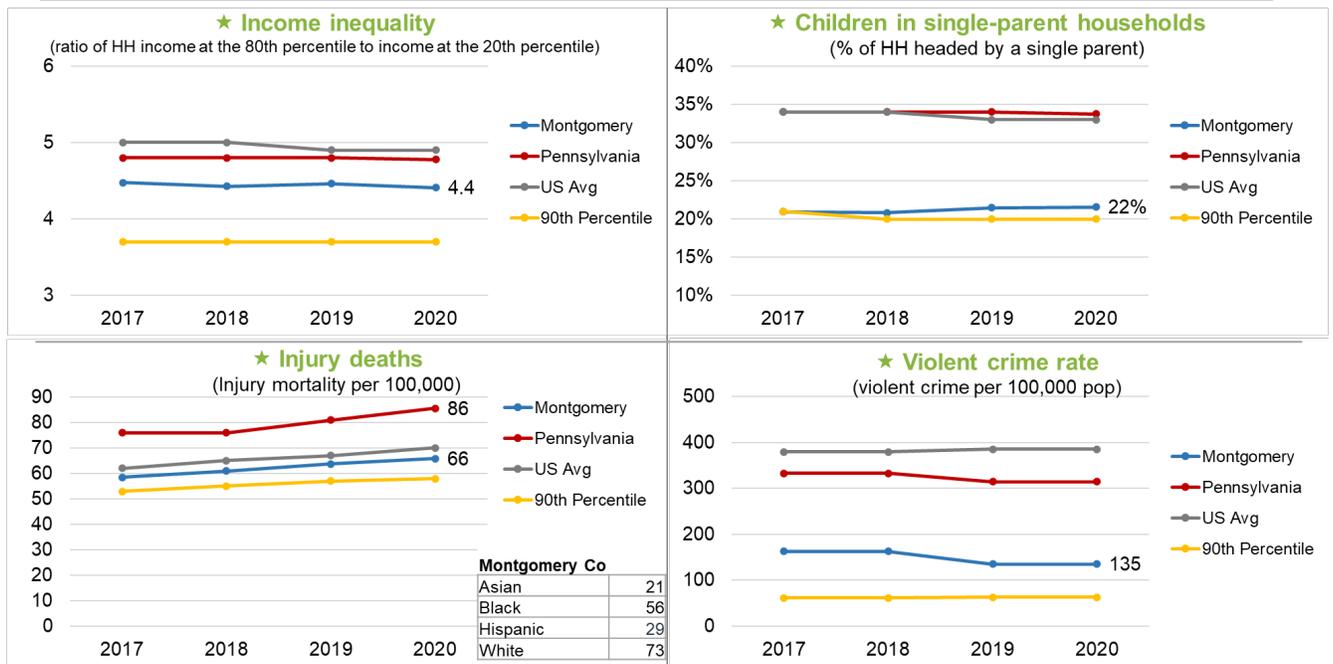
Photo Credit: Montcopa.org

Social & Economic Factors

Social and economic factors account for 40% of the county rankings. There are eight measures in the social and economic factors category, and Montgomery County ranked 4th.



Source: High School graduation – County Health Rankings; PA Dept of Public Instruction, 2016-2017
 Source: Some college - County Health Rankings; American Community Survey, 5-year estimates, 2014-2018.
 Source: Children in poverty - County Health Rankings; U.S. Census, Small Area Income and Poverty Estimates, 2018
 Source: Social associations - County Health Rankings; County Business Patterns, 2017



Source: Income inequality and children in single-parent households - County Health Rankings; American Community Survey, 5-year estimates 2014-2018.
 Source: Injury deaths – County Health Rankings; CDC WONDER mortality data, 2014-2018.
 Source: Violent crime - County Health Rankings; Uniform Crime Reporting – FBI, 2014 & 2016

Social & Economic Factors, cont.

Social & Economic Factors STRENGTHS

- The high school graduation rate was the same as PA in Montgomery County at 87% and slightly higher than the U.S. at 85%.
 - 79% of Montgomery County adults had some postsecondary education which was higher than PA and the U.S. (66%).
 - The children in poverty rate was lower for Montgomery County (7%) than PA (17%) and the U.S. (18%).
 - Income inequality represents the ratio of household income at the 80th percentile compared to income at the 20th percentile. Income inequality was lower in Montgomery County at 4.4 than in PA (4.8) and the U.S. (4.9)
 - The percentage of children in single-parent households was 22% in Montgomery County, which was lower than PA (34%) and the U.S. (33%).
 - Injury deaths were lower in Montgomery County at 66 per 100,000 population than PA (86) and the U.S. (70). The rate in Montgomery County increased since 2017.
 - Montgomery County's median household income at \$90,762 was higher than Pennsylvania's at \$59,112 and the U.S. at \$60,548.
 - The poverty estimates for 2018 showed Montgomery County at 5.9%, lower than PA (12.2%) and the U.S. (13.1%).
 - The violent crime rate in Montgomery County was 135 violent crimes per 100,000 population, which was lower than in PA at 315 and the U.S. at 386.
-

Social & Economic Factors OPPORTUNITIES

- Social associations were lower in Montgomery County at 11 memberships per 10,000 population than PA at 12, but higher than the U.S. at 9 memberships. Associations include membership organizations such as civic organizations, bowling centers, golf clubs, fitness centers, sports organizations, religious organizations, political organizations, labor organizations, business organizations, and professional organizations.
- Injury deaths were higher for the White community at 73 deaths per 100,000 compared to the Hispanic (29) and the Black communities (56).
- The cost of living was 15% higher in Montgomery County than the U.S. with housing 36% more expensive and health care 38% more expensive than the U.S.

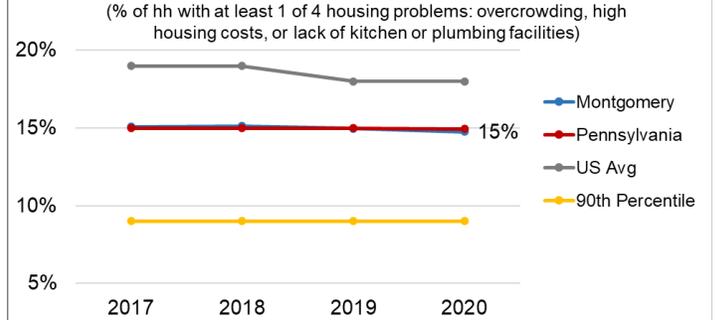
Physical Environment

Physical environment contains four measures in the category and accounts for 10% of the county rankings. Montgomery County ranked 28th in physical environment out of 67 Pennsylvania counties. This is Montgomery County's highest (worst) ranked category.

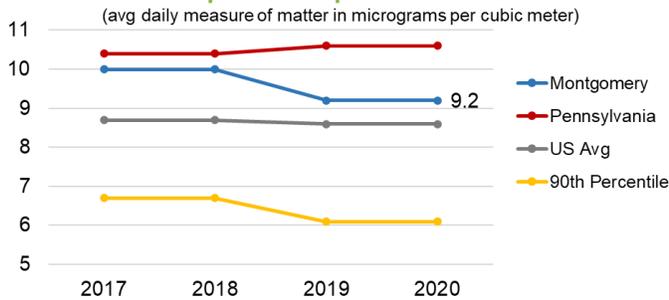
● Drinking water violations

	2018	2019	2020
Montgomery County	Yes	Yes	Yes

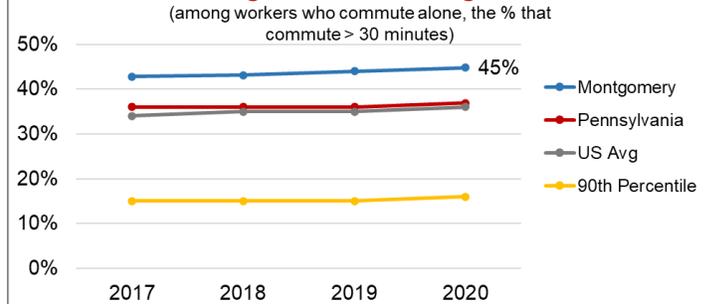
★ Severe housing problems



★ Air pollution - particulate matter



● Long commute- driving alone



Source: Drinking water violations – County Health Rankings; EPA, Safe Drinking Water Information System, 2018. Source: Severe housing problems – County Health Rankings; HUD Comprehensive Housing Affordability Strategy data, 2012-2016. Source: Driving alone to work and long commute – County Health Rankings; American Community Survey, 5-year estimates, 2014-2018. Source: Air pollution – County Health Rankings; CDC National Environmental Health Tracking Network, 2014

Physical Environment STRENGTHS

- Montgomery County had the same percentage of severe housing problems at 15% as PA and lower than the U.S. at 18%.
- Air pollution measured by the average daily measure of matter in micrograms per cubic meter was 9.2 in Montgomery County, lower than PA (11), but higher than the U.S. (8.6).

Physical Environment OPPORTUNITIES

- 45% of workers in Montgomery County commute alone and over 30 minutes, higher than PA at 37% and the U.S. at 36%.
- Montgomery County had drinking water violations.

There were Four Broad Themes that Emerged in this Process:

- Montgomery County needs to continue to create a “Culture of Health” which permeates throughout the towns, employers, churches, and community organizations to engender commitment to health improvement.
 - There is a direct relationship between health outcomes and affluence (income and education). Those with the lowest income and education generally have the poorest health outcomes.
 - While any given measure may show an overall good picture of community health, subgroups such as the lower income census tracts may experience lower health status measures.
 - It will take a partnership with a wide range of organizations and citizens pooling resources to meaningfully impact the health of the community. However, Montgomery County has many assets to improve health.
-



Photo Credit: SCH

Results of the CHNA: Community Health Summit Prioritized Health Needs

Prioritization of Health Needs

Prioritization Criteria

At the Community Health Summit, the attendees reviewed the community health information and used the criteria below to prioritize the health needs in the community.

Magnitude / scale of the problem	How big is the problem? How many people does the problem affect, either actually or potentially? In terms of human impact, how does it compare to other health issues?
Seriousness of Consequences	What degree of disability or premature death occurs because of this problem? What would happen if the issue were not made a priority? What is the level of burden on the community (economic, social or other)?
Feasibility	Is the problem preventable? How much change can be made? What is the community's capacity to address it? Are there available resources to address it sustainably? What's already being done, and is it working? What are the community's intrinsic barriers and how big are they to overcome?

Most Significant Community Health Needs

The following needs were prioritized by attendees at the Community Health Summit. Attendees completed a virtual post-it note exercise to identify the top three health needs. The parentheses indicate the number of post-it notes associated with the topic.

1. Mental Health – access to resources, adolescent, undocumented (8)
2. Obesity – nutrition (5)
3. Substance use disorder – alcohol, substances, opioids, smoking (5)
4. Access to care – for minority groups, undocumented, home health (4)
5. Chronic diseases – heart disease, diabetes, obesity, etc. (4)
6. Socioeconomics – housing, safety, health disparities (4)
7. Abuse – children, etc. (1)
8. Maternal health and education (1)

Results of the CHNA: Community Health Summit Prioritized Health Needs

Hospital Selection of Health Needs

Most Significant Community Health Needs

Of the identified health needs, Suburban Community Hospital has selected the following needs to focus on for the next three years:

1. Mental Health – access to resources, adolescent, undocumented (8)
2. Obesity – nutrition (5)
3. Access to care – for minority groups, undocumented, home health (4)
4. Chronic diseases – heart disease, diabetes, obesity, etc. (4) to include smoking

Regarding the selected needs, SCH will develop actionable steps to address local health disparities – Our experience with the local impact of the COVID-19 pandemic, highlighted a disproportionate impact on the Black and Hispanic populations. Other at-risk populations (those with underlying health conditions) were also severely impacted. As a healthcare leader in Montgomery County, SCH will be a catalyst in addressing health disparities and be part of solutions to make positive impacts on social determinants of health.

Due to a lack of expertise and resources, Suburban Community Hospital will not focus on these needs, but will continue to support ongoing efforts in the community led by other organizations. Additionally, SCH will address smoking as a root cause of chronic diseases, but not the remainder of the substance use disorder substances.

1. Substance use disorder – alcohol, substances, opioids, smoking (5)
 2. Socioeconomics – housing, safety, health disparities (4)
 3. Abuse – children, etc. (1)
 4. Maternal health and education (1)
-

Impact of 2017 CHNA and Implementation Plan

Impact

Southeastern Pennsylvania Tobacco Control Project Impact:

For the past 15 years, in partnership with the Southeastern Pennsylvania Tobacco Control Project, Suburban Community Hospital has provided tobacco cessation, prevention and advocacy/policy services within our local community and throughout Montgomery County. Much of its efforts has been focused on addressing tobacco-related disparities within low-income, minority and behavioral health populations.

Suburban Community Hospital and its Primary Care Practices have made significant strides to address tobacco prevention and control as well as chronic disease prevention and management. Suburban's Tobacco Dependence Program provides educational presentations to the medical residents and medical staff on current trends in tobacco use, emerging tobacco products, tobacco dependence and treatment, and lung cancer screening. In addition to educating physicians, Suburban provides tobacco prevention and cessation presentations to community leaders, worksites, MUH and BH facilities throughout Montgomery County. All tobacco dependence treatment programming (group, individual and virtual) include education on tobacco-related chronic diseases such as COPD, lung cancer, heart disease, stroke, peripheral vascular disease and diabetes. Program participants receive education on healthy eating, physical activity, and healthy lifestyle choices. Participants also receive lung cancer prevention and screening education and individuals who meet screening criteria for low-dose CT lung scans are referred to their PCP.

In consideration of the 2020 Health Needs Assessment, Suburban Community Hospital will remain committed to providing comprehensive tobacco control services in Montgomery County. Suburban will continue working with the behavioral health community to address tobacco-related disparities within this population. More specifically, Suburban will focus its efforts on educating BH providers in the hopes to improve/strengthen tobacco-free policies, foster tobacco treatment integration and offer tobacco dependence treatment services to staff within BH facilities in Montgomery County.

Suburban's Tobacco program is proud of its many accomplishments over these past 15 years. Some highlights include:

- The development and implementation of tobacco use screening and treatment for all inpatients
- Educating state legislators, healthcare providers and community partners on tobacco control and prevention
- Working with drug and alcohol treatment facilities to integrate tobacco dependence treatment into SUD recovery programs
- Conducting a pilot project with the American Lung Association for lung cancer screening integration within tobacco treatment programming
- Providing comprehensive tobacco dependence treatment programs and support groups to over 1,500 individuals seeking assistance for tobacco cessation

Impact of 2017 CHNA and Implementation Plan, cont.

Impact

In collaboration with Southeastern Tobacco Control Project and other community partners Suburban Community Hospital is committed and poised to address the issues surrounding tobacco use through its advocacy efforts, proven programming and services to improve the health and well-being of all residents within its community.

2017-2020 Health Promoter Program Impact:

The Health Promoter Program was included in Suburban Community Hospital's 2017 Community Health Needs Assessment as it serves some of the greatest needs of our community, those without adequate resources who have diabetes, hypertension, or obesity. Since 2017, the Health Promoter Program has expanded. Since its expansion, the program has transitioned from being co-sponsored by the Sisters of Mercy and St. Joseph's University to be run by the parish along with other members of the community. Mike Ball, a parishioner from St. Patrick's Church, has been working with the pastor, Father Gus Puleo, several community leaders and myself to conduct the once monthly Health Promoter Sessions. Along with several other community projects, our residents from Suburban have been working with people in the community to provide education and health screening. Approximately once monthly at St. Patrick's Church in Norristown there is a Health Promoter Session. People are screened for obesity, hypertension, hyperlipidemia, diabetes and chronic kidney disease. Depending on their results, they are either provided with education and advised to follow up at the next session, or if they meet criteria, they are referred to be seen at Suburban Family Medicine at Norristown. They were previously exclusively seen by me, but in 2018, the transition was made to also have them seen by resident physicians in the family medicine program with oversight by myself and the other preceptors. The visit is done at no cost to the patient. Any labs that are required are conducted at Suburban Community Hospital at no cost to the patient. The patients continue to have follow up as needed. In 2018, I was the recipient of the American Osteopathic Foundation's Caring for Communities Grant for our program's Health Promoter Program. We were able to purchase equipment and supplies for the health promoter sessions as well as purchase diabetic testing supplies and blood pressure machines to distribute to patients from the Health Promoter Program. The program was placed on hold due to COVID-19 in April 2020. There are plans to resume when circumstances allow.

Background, Intent, and Progress of the Health Promoter Program:

The Health Promoter Program was a program that was originally piloted at Mercy Fitzgerald/Mercy Philadelphia. They noticed that undocumented immigrants from West Africa were frequently being admitted to the hospital with medical conditions that were very advanced including severe stroke from untreated hypertension and end stage renal disease requiring dialysis. As it is part of the mission of the sisters of Mercy to never turn anyone away, they saw huge financial drain on the system by getting these patients at such a late stage. They thought if they could start a program where they were screening people for chronic conditions such as diabetes, hypertension, and chronic kidney disease, they would be able to better serve the community by capturing these patients at early stage, and help to lighten the financial burden on the system.

Impact of 2017 CHNA and Implementation Plan, cont.

Impact

Physicians and health administrators from Mercy Hospital of Philadelphia instituted the Mercy Hospital Task Force on African Immigration in conjunction with the Institute of Catholic bioethics at St. Joseph's University. From this task force they developed The Mercy Health Promoter Model. They based their program on a program from the American Dominican Sisters and the University of Creighton's Institute for Latin American Concern in the Dominican Republic, and they started a Health Promoter program to work with people within the community to help provide services.

They developed a training program so that members of the community could provide patient education and screening. Many of the people they trained to provide the education had actually been in the health care field back in their home country. The project originally started with a Nigerian community in West Philadelphia and they conducted the screenings through St. Cyprian Church. Patients requiring physician level care were then referred to a clinic in Mercy Catholic Medical Center. They also had social workers who would work with them to obtain insurance and help with services available in the area.

The goals of the original program were:

1. Create a community-based program involving a high degree of community participation
2. Provide quality health care services by partnering with other already established organizations in the area
3. Reduce the costs of health care for uninsured or underinsured individuals and demonstrate cost-effectiveness for all members of the partnership (hospitals, health care providers, sponsors of the program, and members of the community)
4. Improve the health of the poor and marginalized individuals of the immigrant and impoverished communities of Philadelphia using education and increased access to primary health care services in the prevention and/or management of illness

Sister Ann O'Connell and Father Peter Clark (who is a professor at St. Joseph's University and on the Ethics Board for the Sisters of Mercy) thought it would be great program to bring to the undocumented immigrant community in Norristown. Beth Merlini Vitucci, DO had been working with another sister of Mercy, Sister Connie and providing lectures to Latina women in the Norristown community promoting Health. When Sister Ann and Father Peter decided to bring the program to Norristown, they wanted to have a physician who spoke Spanish and since Dr. Vitucci had already been involved in the community, she joined the team starting the program. Since then, the program has expanded, and Sister Ann and Father Peter transitioned the program to be run by the parish. Mike Ball, a parishioner from St. Patrick's Church has been working with Father Gus Puleo, several community leaders, and myself to conduct the once monthly Health Promoter Sessions. Along with several other community projects, our residents from Suburban have been working with people in the community to provide education and health screening.

Impact of 2017 CHNA and Implementation Plan, cont.

Impact

Approximately once monthly at St. Patrick's Church in Norristown there is a Health Promoter Session. People are screened for obesity, hypertension, hyperlipidemia, diabetes and chronic kidney disease. Depending on their results, they are either provided with education and advised to follow up at the next session, or if they meet criteria, they are referred to be seen at Suburban Family Medicine at Norristown. The visit is done at no cost to the patient. Any labs that are required are conducted at Suburban Community Hospital at no cost to the patient. The patients continue to have follow up as needed. In 2018, we were the recipient of the American Osteopathic Foundation's Caring for Communities Grant. We were able to purchase equipment and supplies for the health promoter sessions as well as purchase diabetic testing supplies and blood pressure machines to distribute to patients from the Health Promoter Program. The program was placed on hold due to COVID-19 in April 2020. There are plans to resume when circumstances allow.



Photo Credit: SCH

Community Health Needs Assessment for Montgomery County

Completed by Suburban Community Hospital in partnership with:

Stratasan



Appendix

Community Asset Inventory

The document contains a list of community assets and resources that can help improve the health of the community and assist with implementation of the plan accompanies this document. The focus group also identified community resources to improve health, which are listed on page 23 of the Community Health Needs Assessment.



Photo Credit: Suburban Community Hospital

2020

Montgomery County, PA

Community Asset Inventory/Resource Guide

TABLE OF CONTENTS

Public Safety – Fire, Police, EMS	52
Mental Health Resources	52
Obesity- Nutrition, Physical Activity, Healthy Living	53
Substance Abuse Resources	54
Access to Care	06
Chronic Disease Resources	55
Socioeconomics- Housing, Basic Needs Assistance	56
Abuse Assistance	57
Maternal Health	57
Education	58
Montgomery School Districts Chronic Disease Resources	58
Hotlines	59
Sources	60
Update & Change Form	62

Public Safety

Montgomery Department of Public Safety
50 Eagleville Road
Eagleville, PA 19403
610-631-6500

Police

Montgomery County Sheriff's Office
P.O. Box 311
Norristown, PA 19404
610-278-3331

Norristown Police Department
235 East Airy Street
Norristown, PA 19401
610-270-0977

Fire

Norristown Fire Department
235 East Airy Street
Norristown, PA 19401
610-292-8281

Emergency Management

Montgomery County Emergency
Management
50 Eagleville Road
Eagleville, PA 19403
610-631-6530

Mental Health Resources

Mental Health Association
538 DeKalb St.
Norristown, PA 19401
610-272-7997

Suburban Community Hospital Senior
Behavioral Health
2701 Dekalb Pike
East Norriton, PA 19401
610-278-2000

Brooke Glen Behavioral Health Hospital
7170 Lafayette Ave
Fort Washington, PA 19034
215-641-5300

The Horsham Clinic
722 E Butler Pike
Ambler, PA 19002
215-643-7800

Central Behavioral Health
1100 Powell St
Norristown, PA 19401
610-277-4600

HopeWorx, Inc.
1210 Stanbridge Street, Suite 600
Norristown, Pennsylvania 19401
610-270-3685

Mental Health Partnerships
1001 Sterigere St, Bldg 12, Rm 143
Norristown, Pennsylvania 19401
800-688-4226

Horizon House
601 Dekalb Street
Norristown, PA 19401
610-278-6882

Merakey
350 Sentry Parkway East, Building 640, Suite 103
Blue Bell, PA 19422
888-647-0020

NAMI Montgomery County, PA
100 W Main St, Ste 204
Lansdale, PA 19446
215-361-7784

Montgomery County Suicide Prevention Task Force
Peer Support Talk Line: 1-855-715-8255
Teen Talk Line: 215-703-8411
Crisis Support: 1-855-634-4673

Obesity- Nutrition, Physical Activity, Healthy Living

Montgomery County Parks Office
One Montgomery Plaza
425 Swede St. Suite 613
Norristown, PA 19404
610-278-3555

Audubon YMCA
2460 Boulevard of the Generals
Norristown, PA 19403
610-539-0900

Norristown Recreation Department
235 East Airy Street
Norristown, PA 19401
610-272-8080

Montgomery County Youth Center
540 Port Indian Rd
Eagleville, PA 19403
610-631-1893

Senior Adult Activities Center of Montgomery
County
536 George St
Norristown, PA 19401
610-275-1960

Montgomery County Health Alliance -
Childhood Obesity Plan
1430 DeKalb Street
Norristown, PA 19404-0311
610-278-5117

Norristown Farmer's Market
15 E Main St.
Norristown, PA 19401
610-628-2000

West Norriton Parks and Recreation
Department
1630 W Marshall Street
Jeffersonville, PA 19403
610-630-1251

Norristown Area Aquatic Club
1900 Eagle Dr
Norristown, PA 19403

Parks

Central Perkiomen Valley Park
Green Lane Park
Lorimer Park
Lower Perkiomen Valley Park
Norristown Farm Park
Pennypacker Mills
Peter Wentz Farmstead
Pottsgrove Manor
Upper Schuylkill Valley Park

Programs

Healthy Family
5210 Let's Go
Montco Trail Challenge
Healthy Steps in Motion
Healthy Steps for Older Adults
My Life, My Health
Walk with Ease
A Matter of Balance
National Diabetes Prevention Program



*Photo Credit: www.facebook.com/NorristownFarmersMarket
Norristown Farmers Market*

Substance Use Resources

Montgomery Office of Drug & Alcohol
P.O. Box 311
Norristown, PA. 19404
610-278-3642

Carson Valley Children's Aid
1314 DeKalb St.
Norristown, PA 19401
215-362-8422

Compass Recovery Center PA
901 E 8th Ave. Ste. 203
King of Prussia, PA 19406
610-265-2215

Rise Above
100 Ross Rd # 204
King of Prussia, PA 19406
(484) 681-4040

Gaudenzia Montgomery County Outpatient
166 W Main St
Norristown, PA 19401
610-279-4262

Smashing Addiction Now
133 W. Main St
Norristown, PA 19401
877-643-6449

Montgomery County Recovery Center
316 DeKalb St
Norristown, PA 19401
610-272-3710

New Path Recovery
19 W Chestnut St.
Norristown, Pa 19401
484-674-3359

RHD-Critical Time Intervention
1000 Sandy Hill Rd
Norristown, PA 19401
610-279-4240

Suburban Community Hospital Tobacco
Dependence Program
2701 Dekalb Pike
East Norriton, PA 19401
610-278-2000

Alcoholics Anonymous at Suburban
Community Hospital
2701 Dekalb Pike Ste. 106
East Norriton, PA 19401
610-278-2253

Valley Forge Medical Center and Hospital
1033 West Germantown Pike
Norristown, PA 19403
610-539-8500

Family House
901 DeKalb St.
Norristown, PA 19401
610-278-0700

Eagleville Hospital
100 Eagleville Road
Eagleville, PA 19403
800-255-2019

Access to Care

Hospital

Suburban Community Hospital
2701 Dekalb Pike
East Norriton, PA 19401
610-278-2000

Einstein Medical Center Montgomery
559 W Germantown Pike
East Norriton, PA 19403
(484) 622-1000

Norristown State Hospital
1001 Sterigere Street
Norristown, PA 19401
610-313-1000

Health Department

Montgomery Department of Health and
Human Services Center
1430 DeKalb Street
PO Box 311
Norristown, PA 19404
610-278-5117

Free Medical and Dental Clinics

Community Health and Dental Care
11 Robinson St Ste 100
Pottstown PA, 19464
610-326-9460

Norristown Public Health Center
1430 DeKalb Street
Norristown PA, 19404
610-278-5145

Norristown Regional Health Center
1401 Dekalb St
Norristown PA, 19401
610-278-7787

Planned Parenthood- Norristown Abortion
Center
1221 Powell Street
Norristown, PA 22059
610-279-6095

North Penn VNA
51 Medical Campus Dr
Lansdale, PA 19446
215-855-8296

Uninsured Assistance

Montgomery County Assistance Office
1931 Hope Street
Norristown, PA 19401
610-270-3500

Personal Navigator Program -Prescription Assistance
VNA Community Services Inc.
1109 DeKalb St.
Norristown PA 19401
800-591-8234

St. Patrick's Church (Monthly health screenings)
714 DeKalb St.
Norristown, PA 19401
610- 272-1408

Chronic Disease Resources

Suburban Community Hospital Tobacco
Dependence Program
2701 Dekalb Pike
Norristown, PA 19401
610-278-2000

Primary Stroke Center & Heart Failure Center
Suburban Community Hospital
2701 Dekalb Pike
East Norriton, PA 19401
610-278-2000

National Diabetes Prevention Program-Montgomery
610-278-5926

Fox Chase Cancer Center
2701 Dekalb Pike
East Norriton, PA 19401
877-627-9684

Alzheimer's & Dementia Care
1966 Calamia Dr
Norristown, PA 19401
610-400-8765

Socioeconomics- Housing, Basic Needs Assistance

Montgomery County Partnership
3535 East 30th St
Norristown, PA 87402
505-566-5867

Montgomery United Way
903 W Apache
Norristown, PA 87401
505-326-1195

American Red Cross Montgomery Chapter
2100 Courtland
Norristown, PA 87401
505-325-9605

Human Service Department – Income Support
101 W. Animas St
Norristown, PA 87401
505-566-9600

Big Brothers and Big Sisters of Montgomery County
308 Locke Ave
Norristown, PA 87401
505-326-1508

Montgomery County Partnership
3535 E. 30th St Suite 239
Norristown, PA 87402
505-566-5867

Salvation Army
319 W Broadway
Norristown, PA 87401
505-327-5117

Catholic Charities
353 E Johnson Hwy
Norristown, PA 19401
610-279-7372

Manna on Main Street
606 Main St
Lansdale, PA 19446
215-855-5454

People Assisting the Homeless, Inc. (P.A.T.H)
520 Hydroplant Rd
Norristown, PA 87401
505-327-3104

Montgomery County Partnership: Housing Assistance for the Homeless
100 W Elm
Norristown, PA 87401
505-325-4214

Montgomery County Housing Authority
7450 E Main St Suite C
Norristown, PA 87401
505-327-5654

ACLAMO Family Centers
512 W Marshall St
Norristown, PA 19401
610-277-2570

New Hope Baptist
204 E Oak St
Norristown
610-275-5814

Shiloh Full Gospel Baptist Church
610 George St
Norristown
610-270-9949

Siloam Baptist Church Soup Kitchen
1329 Willow St
Norristown
610-275-8163

North Penn Valley Boys & Girls Club
16 Susquehanna Ave
Lansdale, PA 19446
215-855-7791

Patrician Society
121 E. Chestnut St.
Norristown, PA 19401
610-272-6316

Abuse Assistance

Women's Center of Montgomery County
Office, 107 E Main St,
Norristown, PA 19401
610-279-1548

Laurel House
P.O. Box 764
Norristown, PA 19404
610-277-1860

Victim Services Center
325 Swede St., 2nd floor
Norristown, PA 19401
610-277-0932

LASP Legal Aid of Southeastern PA
625 Swede Street
Norristown, PA 19401
610-275-5400

Montgomery Child Advocacy Project
409 Cherry Street
Norristown, PA 19401
610-279-5525

Maternal Health

Genuardi Family Foundation Maternal Health
Center
1330 Powell St., Ste 507
Norristown, PA, 19401
484-622-7300

Suburban Family Medicine at Norristown
2705 Dekalb Pike, Suite 202
East Norriton, PA 19401
610-275-7240

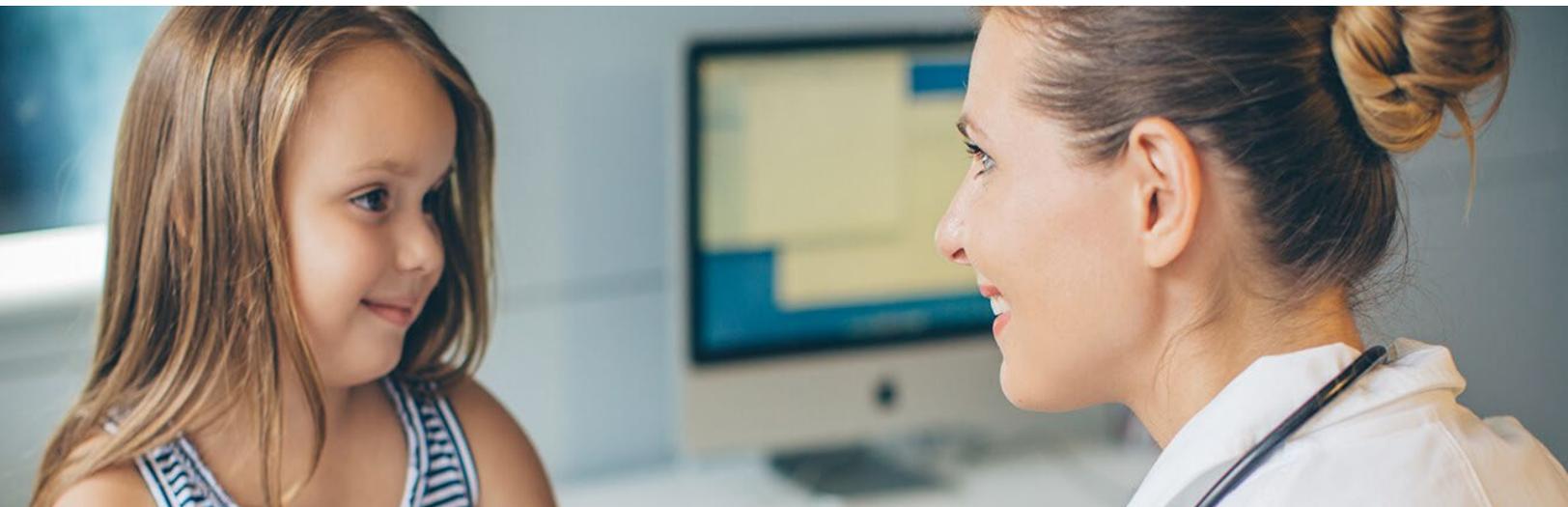


Photo Credit: www.suburbanhosp.org/our-services/ace-program/family-medicine/

Education

Montgomery County Community College
340 DeKalb Pike
Blue Bell, PA 19422
215-641-6300

The Culinary Arts Institute
1400 Forty Foot Road
Lansdale, PA 19446
267-646-5970

Student Assistance Program
Carson Valley Children's Aid
1314 DeKalb St.
Norristown, PA 19401
215-362-8422

Merakey Student Assistance Program
400 North Broad Street
Lansdale, PA 19446
215-378-8549

Montgomery County- Norristown Public
Library
1001 Powell Street
Norristown, PA 19401
610-278-5100

Montgomery County OIC
1101 Arch Street
Norristown, Pennsylvania
610-279-9700

Montgomery College
4601 College Blvd
Norristown, PA 87402
505-326-3311

New Mexico Coalition for Literacy
4601 College Blvd
Norristown, PA 87402
505-566-3385

Montgomery County School Districts

Upper Perkiomen
Boyertown
Pottsgrove
Pottstown
Spring-Ford
Perkiomen Valley
Methacton
Souderton
North Penn
Wissahickon
Norristown
Upper Merion
Lower Merion
Colonial
Springfield
Upper Dublin
Hatboro-Horsham
Upper Moreland
Lower Moreland
Bryn Athyn
Abington
Cheltenham



Photo Credit: www.montgomerynews.com, Blue Bell Elementary Students

National Hotlines

National Suicide Prevention Lifeline

800-273-TALK or 800-237-8255

National Runaway Safeline

1-800-RUNAWAY

National Centers for Disease Control

1-800-232-4636

Gay, Lesbian, Bisexual and Transgender

1-888-843-4564

HIPS Hotline

1-800-676-HIPS

National Sexually Transmitted Disease

1-800-227-8922

Women Alive

1-800-554-4876

AIDS Info

1-800-HIV-0440

Project Inform

1-800-822-7422

DMRS Investigations

1-888-633-1313

Mobile Crisis

1-800-681-7444

Domestic Violence

1-800-356-6767

Spanish Domestic Violence

1-800-942-6908

Poison Control Center

1-800-222-1222

Veterans Crisis Line

800-273-8255 Press 1

National Youth Crisis

800-442-HOPE (4673)

National Missing Children

1-800-235-3535

National Sexual Assault

1-800-656-4673

Alcohol Hotline

1-800-331-2900

Alcohol Treatment Referral

1-800-252-6465

National Drug Abuse

1-800-662-4357

Poison Control

1-800-942-5969

National Homeless

1-800-231-6946

National Elder Abuse

1-800-252-8966



Photo Credit: Norristown Area High School helps Norristown Fire Department; www.timesherald.com/

Sources

Public Safety

<https://www.montcopa.org/>

Mental Health Services

<https://namimontcopa.org/mental-health-resources/>

<https://www.mentalhealthpartnerships.org/locations>

http://mces.org/pages/resources_main.php

<https://namimainlinepa.org/wp-content/uploads/2017/09/Mental-Health-Presentation- Services-in-Montco-2017.pdf>

<https://www.montcopa.org/1439/Suicide-Prevention-Task-Force>

Obesity- Nutrition, Physical Activity, Healthy Living

<https://www.montcopa.org/336/Parks>

<https://www.montcopa.org/3207/Healthy-Lifestyles>

<https://www.valleyforge.org/adventure/parks/>

<https://www.bucksmontcollab.org/resources/montgomery-county-health-alliance-childhood-obesity-plan>

<https://www.westnorritontwp.org/124/Parks-Recreation>

<https://philaymca.org/locations/audubon/>

<https://www.montcopa.org/DocumentCenter/View/12526/Our-System-At-a-Glance-Descriptions?bidId=>

<https://www.montcopa.org/3290/Healthy-Steps-in-Motion>

Substance Abuse Resources

<https://www.freerehabcenters.org/city/pa-norristown>

https://www.rhd.org/program_area/addiction-recovery/

<https://www.montcopa.org/DocumentCenter/View/18482/Student-Assistance-Program-Brochure-17?bidId=>

<https://www.montcopa.org/1339/Drug-Alcohol>

<http://www.norristownnctc.org/drugalcoholresources.php>

Access to Care

<https://www.suburbanhosp.org/>

<https://www.dhs.pa.gov/Services/Assistance/Pages/Norristown-State-Hospital.aspx>

<https://www.montcopa.org/513/Public-Health>

https://www.montcopa.org/DocumentCenter/View/990/Dental_Resource_Guide?bidId=

https://freeclinicdirectory.org/pennsylvania_care/montgomery_pa_county.html

Uninsured Assistance

https://www.needymeds.org/local_programs.taf?_function=list&state=PA

<https://www.montcopa.org/2090/How-to-Find-Help---Adults-18-and-Older>

https://www.timesherald.com/news/st-patrick-s-church-free-health-screenings-continue-to-gather/article_01539cb8-6b69-11e9-8ed0-bf4782d59ddc.html

Chronic Diseases

www.suburbanhosp.org/our-services/heart-failure-care/

<https://norristownweedandseed.montcopa.org/3209/Health-Promotion-Programs>

<http://diabetescareandwellness.com/blog/support-groups/>

Sources Cont.

Socioeconomics- Housing, Basic Needs Assistance

https://www.needhelpayingbills.com/html/montgomery_county_assistance_p2.html

<https://www.umtsd.org/Page/59>

<https://www.welfareoffices.org/ci/pa-norristown>

<https://www.homelesshelterdirectory.org/cgi-bin/id/city.cgi?city=Norristown&state=PA>

<https://www.shelterlistings.org/city/norristown-pa.html>

<https://montgomerycountyalive.com/business/Food-Pantries.cfm>

Abuse Assistance

<https://www.montcopa.org/DocumentCenter/View/9718/DVLN-RESOURCES>

<https://www.victimservicescenter.org/contact>

<https://www.lasp.org/locations>

Maternal Health

<https://genuardifamily.com/>

<https://www.suburbanhosp.org/our-services/ace-program/family-medicine/>

Education

<https://www.mc3.edu/>

<https://www.montcopa.org/DocumentCenter/View/27780/Merakey-Student-Assistance-Program>

<https://www.cvca-pa.org/>

<http://mnl.mclinc.org/>

<https://montcooic.org/>

<https://mainlineschoolnight.org/>

<https://www.montcopa.org/DocumentCenter/View/4380/MAP-School-Districts?bidId=>

Hotlines

<http://www.pleaselive.org/hotlines/>

Pictures

<https://www.daily-times.com/story/news/education/2020/01/17/kiwanis-provides-free-books-animas-elementary-students-Norristown-new-mexico/4503215002/>

<https://northernnavajonationfair.org/>

<https://www.facebook.com/NorristownFarmersMarket/photos/a.437511553247029/719760448355470>

https://www.timesherald.com/news/norristown-high-school-football-team-helps-fire-department-with-smoke-detector-blitz/article_7b8b0a33-e160-57f5-bffc-be6c25438839.html

To update or add information, complete the form below

Name of Organization:

Contact Name:

Phone #:

Fax #:

Email:

Web page:

Mailing Address:

List services:

Please describe your organization's purpose, services, etc.

Submit updated information to: SCH Marketing Dept.

Community Asset Inventory/ Resource Guide

Completed by Stratasan in partnership with:

Suburban Community Hospital

