

## 2019 Community Health Needs Assessment Executive Summary – Final

#### **Background & Methodology:**

The Patient Protection and Affordable Care Act of 2010 requires charitable hospital organizations to conduct a Community Health Needs Assessment (CHNA) and to adopt an implementation strategy to meet the community health needs identified through the CHNA at least once every three years. The goal of the assessment is to identify important health challenges in our community. Our CHNA was conducted by the Muhlenberg College Institute of Public Opinion (MCIPO) utilizing a two-pronged research method. First, this study updated and extended information derived from key secondary sources of data. Second, this study included primary qualitative data derived from a community forum of key stakeholders (including people with disabilities, heads of public and private agencies serving the disability community, educators, elected representatives, county officials, advocacy organizations, representatives from the arts, religious, and community organizations), and a series of focus groups in which key informants, people with disabilities and their families were invited to share insight about their own challenges to living fully, independently, and healthfully. An Implementation Plan Development Team (IPDT) was formed, comprised of Good Shepherd Rehabilitation Network's (GSRN) senior leadership team and other key leaders to review the research and determine our health priorities moving forward.

### **Health Priority 1: Improving Data Collection**

- \* The data collected for this CHNA came from community focus groups comprised of key stakeholders.
- \* Since the data collected represents the Lehigh Valley community of people with disabilities, it provides a general overview of challenges that people with disabilities face, leaving a need for GSRN to still appropriately understand our own patient population.

#### Health Priority 2: Improving Universal Accessibility of Bathrooms

- \* Focus group key informants shared widespread agreement on the lack of accessible bathrooms, family bathrooms, and/or gender neutral bathrooms that would permit individuals with disabilities and their caregivers to enter facilities together and/or that offer space for caregivers to assist adults with disabilities who need assistance using a bathroom and/or changing.
- \* These inadequate bathrooms can be found in medical buildings, malls, shopping centers, movie theatres, amusement parks, and some of GSRN's own outpatient facilities.
- \* The short supply of appropriate facilities for people with disabilities can limit individuals' abilities to be included in community programs and events.

# Health Priority 3: Improving Services & Resources for Families with Post-Teenage Children in 21-64 Age Range

- \* Individuals' needs change throughout the aging process.
- \* One parent expressed that it was even more challenging having a child above the age of 21 than it was when his/her son was younger, presenting a "whole new world" of challenges.
- \* Another participant commented that as children age, the extent to which they are accepted by the wider community often changes.

#### **Health Priority 4: Increasing Support Groups**

- \* Many focus group participants shared painful experiences with social isolation and feelings of rejection.
- \* Several parents conveyed distress that their children had few friends and no meaningful mechanisms for making friends.
- \* Caregivers emphasized the need for support groups to enable people to come together to share stories and frustrations, knowing that others there can relate, directly or indirectly.