2024 Lehigh Valley Health Network

Community Health Symposium Findings



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Introduction

Introduction

On Nov. 20, 2024, Lehigh Valley Health Network (LVHN) held its third annual community health symposium in the Hazleton community.

The hospital in Hazleton was established by the Commonwealth of Pennsylvania to care for the region's coal miners in 1891. From 1996 to 2014, the hospital was part of the Greater Hazleton Health Alliance. The hospital joined LVHN in January 2014 and marked a major step forward in lowering health care costs and improving the quality of care in the Hazleton area. LVHN community health symposiums are designed to convene the local community and to take an assets-based approach to discussing opportunities for improving health. LVHN recognizes that the strengths and needs of each community it serves are unique. Having local symposia acknowledges the uniqueness of the communities served by LVHN and helps the health system plan for how to best support each region within its service area. We aim to recognize and embrace the already existing resources in the community while also learning of potential gaps and further opportunities to convene resources. At the same time, we focused the day on solution-focused conversations.

This report describes the processes associated with planning and holding the symposium and presents an analysis of the thoughts and ideas collected from the event. The report also proposes several suggested next steps that will continue the momentum that was achieved through the symposium and will enable LVHN to support efforts that address the social determinants of health (SDOH) in Luzerne County. During the symposium, we considered the local services that support community members and social determinants that have a lasting impact on community health. Social determinants of health (SDOH) are the nonmedical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, worship, and age (Centers for Disease Control and Prevention [CDC], 2024).

Symposium Objectives

The four main objectives of LVHN's Annual Community Health Symposia were:

- 1. Learn from local community partners about their insights into factors that influence health
- 2. Identify ways in which local community partners are addressing the factors that impact health over time
- 3. Discuss the evolving leadership role of large complex health care systems in addressing SDOH
- 4. Summarize a collective path forward and short-term next steps that allow all partners to contribute to improving community well-being

In convening the leaders of the regional hospitals and local community-based organizations, LVHN's Community Health Symposia are designed to strengthen existing relationships between organizations that are working to positively address the SDOH for the region as well as the health outcomes of community residents. We aim to generate excitement among participants, solidify their commitment to community health, facilitate new and renewed connections among participants, and help to define actionable next steps. For the 2024 Hazleton Symposium, the speakers and small-group discussion topics were all informed by Luzerne County's Community Health Needs Assessment (CHNA) (LVHN, 2022).

Methodology

Methodology

Planning Committee

The planning committee for the 2024 Hazelton Community Health Symposium included LVHN colleagues from the Lehigh Valley Hospital (LVH)-Hazleton region including representatives from the Operations Team, Marketing, Patient Care Services, Trauma Program, and Physician Practice. The staff of the Leonard Parker Pool Institute for Health (LPPIH), a subsidiary of LVHN, facilitated the planning sessions and collaborated with the LVH-Hazleton team.

Approach

The approach to the symposium was to create a day that was discussion-based and focused on collaborative solutions to improving health. Our aim was to create an immersive experience that provided a deep dive into community health in one specific community, Hazleton. Facilitators, who were local leaders in health care and community-based settings, engaged the participants in conversations designed to elicit their thoughts and concerns about the health of Hazleton residents and their ideas for actionable next steps. The qualitative information collected at the symposium focused on both the participants' current experiences and on the emerging process of improving the factors that impact health over time.

Participants

The invitation list for the symposium was compiled by the planning committee based on their knowledge of their community. They focused on those who are knowledgeable about and involved in Luzerne County and whose work is aligned with the goals of the symposium, striving for a diversity of sectors, perspectives and expertise. Using this purposive sampling, 155 local leaders from LVHN and partnering organizations were invited to the symposium.

The morning began with a few local speakers who each brought experience with and passion for the purpose and content of the symposium. Speakers' remarks were intended to inform and inspire participants, provide context and align them with the day's purpose. Throughout the remainder of the day, participants

attended three small group discussion sessions and a wrap-up session. The discussion topics for the breakout groups were aligned with LVH-Hazleton's current CHNA and included the following topics:

- 1. School-based Prevention and Mental Health
- 2. Language Barriers and Access to Care
- 3. Transportation and Access to Care

Each small group session was co-led by one or two LVHN colleagues and at least one leader from a community-based organization. Facilitators and recorders were trained by LPPIH colleagues prior to the symposium. At each of the sessions, facilitators provided brief presentations on their topic areas to begin interactive discussions. The bulk of each session was dedicated to facilitators engaging in conversation with participants. Guiding questions were provided to the group facilitators to ensure the conversations stayed focused on community health issues and collaboration. Facilitation questions included:

- 1. What is known or not known on your topic from the perspective of the community?
- 2. Where are opportunities for cross-sector collaboration?
- 3. What are some possible short-term next steps?

Following the afternoon small-group discussion sessions, a facilitated wrap-up session provided the day's final opportunity for attendees to bring forward their thoughts, concerns and ideas.

Highlights of the Day

Sixty-two people attended the symposium, which was held at Capriotti's Palazzo in McAdoo. Ten different sectors were represented including health care, government, mental health, K-12 education, academia, social services, workforce and economic development, and philanthropy.

The symposium featured an opening from Samantha Shaak, PhD, Executive Director of LPPIH and VP, Community Health. Shaak welcomed participants and set the tone for the day by introducing the topics of community, partnerships and equity. This welcome was followed by two speakers: Pennsylvania state Rep. Dane Watro, R-116th state Rep. Dane Watro, R-116th, and Tammy Torres, DNP, RN, President, LVH—Hazleton.

Watro spoke of the importance of working together to address the social determinants of health within our community. He expressed an interest in learning more about the work being done by local nonprofits to support housing, food, education, mental health and

other related factors. Watro expressed a willingness to lend support to initiatives that are designed to improve the health of residents of his district.

Torres presented the highlights of LVH–Hazleton's community-based activities and the priorities identified by Luzerne's Community Health Needs Assessment (CHNA). Torres explained the current state of health behaviors, health outcomes and health conditions in Luzerne County, and explained how Luzerne County compares with others in the state and nation. Torres highlighted progress made in addressing the current CHNA priorities: 1) school-based behavioral health and preventive care, and 2) language barriers to health care and improving outcomes for vulnerable populations.

Music and visual art provided additional, unique highlights of the day. The Black Diamond Chorale, a group of middle and high school students from the local MMI Preparatory School, provided choral and instrumental music during the lunch break. Participants felt this provided "a nice touch and reminded us to take time and smell the roses." Chrissie Bonner, a graphic illustrator, graphically recorded the keynote and breakout sessions of the day to illustrate key takeaways from the symposium. Participants engaged with her throughout the day as she worked on her visual summary of the discussions, and Bonner shared her work with the whole group during the wrap-up session.





What did we hear?

The LPPIH team completed a thematic analysis of the qualitative discussions that occurred throughout the day. The following inputs were included in the analysis: all notes from the recorders who documented the day's conversations, flip chart discussion notes, and thoughts and ideas expressed by participants at the wrapup session. A draft version of this report was also reviewed and edited by the facilitators. Key themes that emerged throughout the symposium are detailed in the following pages.

Trust is essential

The idea of "trust" emerged as a theme throughout the day. Trust was seen as a necessary component of collaboration, which in turn is needed for creating systemic improvements. Gatherings like the symposium bring people together in a productive way, allowing them to share information and learn about resources. This familiarity helps to build trust among professionals. Professionals also need to build trusting relationships with the clients and patients they serve.

Trust was also acknowledged as important for the Hazleton area as diverse cultures are coming together within this community. Cultural awareness and humility are aspects of building trust with individuals who may have recently come to the community. At times, community members may not understand or agree with visitation rules in the hospital and in doctor's offices. Recent immigrants to the U.S. may not have a job yet and may not trust financial arrangements related to medical treatment. Trust was also mentioned in discussing the role of translators in working with both families and hospital staff. Regarding transportation, some individuals lack trust in any municipal service and are unwilling to share their

Social Security numbers on application forms. Although there is a workaround for this, the individual filling out the form would not know that.

Finally, trust is of course paramount in clients' clinical relationships with their mental health counselors. Counselors are currently addressing this by offering anonymous, virtual group sessions. Counselors also need to be aware that some individuals in the Latino/a community may avoid therapy due to stigma. Additionally, student therapy clients need to understand what information from their therapy sessions may be shared and with whom. Psychoeducational presentations for the public have the best attendance when they are offered virtually, where participants can be anonymous.

For all topics that were discussed at the symposium, having trusting relationships was seen as key to effective service delivery. Trust building requires taking the time to get to know one another better and being clear and transparent about what each organization can or cannot do as we work to develop collective solutions that will improve health. Along with trust, community members must also have awareness of the services available to them.



People need to be more aware of available services

Breakout Group Topic Disucssions



School-Based **Prevention and** Mental Health



Language **Barrier** and **Access to Care**



Transportation and Access to Care

For each of the topic areas at the symposium – schoolbased mental and preventive health, transportation access and language – it was expressed that community awareness of existing services needs to be expanded. In the transportation session, many of the participants were unaware of the transportation options available locally when they came to the session. It was noted that if the people in the room were unaware of transportation resources, community members are also unaware. It was noted that word-of-mouth is the key way that people learn about transportation services. Participants said: "The biggest priority and the biggest issue is getting the word out." "Education and getting the information out to the community is the biggest roadblock."

Regarding school-based mental and preventive health, it was noted that communications from the schools may not always get back to the home.

However, the schools are now doing more with online communication with parents, which is helping. It was suggested that word-of-mouth communications about available services could come from both trusted community members and trusted agencies. One resource that was called out as being important for people to know about is the suicide prevention hotline. While communication with community members could be improved, the same is true for communication and collaboration among service providers.

Interagency collaboration needs to be deepened

Symposium participants identified interagency collaboration as something that needs to be continually addressed and nurtured, as conditions, services, agencies, clients and personnel are always changing. Limited collaboration leads to people missing services they need. It also leads to inefficiency and unnecessary duplication of services. During the symposium, those in attendance eagerly participated in the discussions—learning from one another, sharing ideas and concerns, and requesting additional

information and follow-up from one another. It will be important to continue to create spaces where organizations can come together in a way that emphasizes collaboration over competition. Health care, the United Way and other organizations may be able to serve as neutral conveners to help agencies provide services effectively and efficiently. This deepened connection and awareness would also allow the community to better understand what gaps in services truly exist and work together to help address those gaps.



Opportunities

Opportunities

Symposium participants are positioned to follow-up on the connections they made at the symposium and the resources they learned about. They expressed interest in attending one another's meetings and events and shared details. This can help improve utilization and decrease duplication of services.

- There are Spanish and English-as-a-Second Language (ESL) classes available in the community through the Hazleton Integration Project. CareerLink also offers ESL classes. Encouraging agency staff and other community members to take advantage of these classes could help to bridge the language gap.
- In all interactions there are opportunities to build trust, whether among colleagues or between professionals and community members. Individual, one-to-one communications are important. Community members need to be actively engaged and feel welcomed into interactions and services.
- Agencies can do more to spread the word about available resources in the community. The goal would be to immerse people in the messages and share information and valuable resources widely and across multiple platforms. It is important to go where the people are by providing bilingual print materials about resources in places like barber shops and beauty parlors, school meetings, places of worship, and senior lunch-and-learns. The goal would be to immerse people in the messages and share information and valuable resources widely and across multiple platforms. Some seniors might benefit from assistance in overcoming technological barriers. Some people with visual or hearing disabilities might benefit from assistance in following directions given at medical appointments. Social media can be helpful in reaching many young people. The state representative's office and the offices of other elected officials can also help to distribute information to residents. Waiting rooms could use the scrolling content on their TV screens to promote awareness of resources.
- A pipeline of bilingual staff needs to continue to be nurtured. This might include providing career exploration for bilingual students to expose them to career opportunities in health care. Students might ride along with emergency medical technicians to learn about their jobs. LVH-Hazleton's Bridging the Gap program trains bilingual individuals who want to be trained as medical interpreters. Students could also be incentivized to pursue careers in interpretation.
- Additional interpretation services would help in addressing the great need in Hazleton. It should be remembered that different dialects add complexity to translations. Translation services would be especially helpful on LVHN shuttles, which do not currently offer the service.
- Parents need to be supported to meet the needs of their children. They might benefit from educational programs, especially if they are offered virtually in the evening. They could also benefit from helping them access insurance. Parents may be responsive to having incentives for attending events.
- Stigma still exists around mental health issues. More events about stopping stigma could be helpful as could education on medications and adverse childhood experiences. It is also important to be aware of any generational or cultural attitudes toward mental health. Increasing the use of anonymous, virtual services would be helpful.
- There is a need for more outreach and clarification for services available to people. There are always challenges to updating and distributing this information. The range of transportation services available was unknown, even to many symposium participants.

Evaluation Survey

Symposium participants were provided with an anonymous survey and invited to provide their feedback. Twelve participants responded to the survey. The survey items and a summary of replies are below:

- 1) What ideas or suggestions were you not able to mention in the breakout sessions that you would want incorporated in health improvement strategies?
 - Participants felt they were able to share their suggestions.
- 2) What sectors or organizations were missing today that you feel are critical for real progress to be made?
 - Survey respondents mentioned several sectors that were not included. These include law enforcement; parents, teachers, school guidance counselors and nurses; organizations serving people with disabilities; high school and college students; local clinicians; and the Department of Health.
- 3) What level of partnership best reflects where you feel your organization is at it pertains to working across sectors to address social determinants? (Respondents could choose coordination, cooperation, or collaboration.)
 - Nine survey respondents selected collaboration - co-design and co-execute with multiple sectors/partners.
 - Three selected cooperation share information about what you are doing.
- 4). How are you feeling after today's conversation?
- Ten respondents left the event feeling motivated positive. Four each left feeling hopeful or interested/curious. No survey respondents left feeling confused/overwhelmed or angry/upset.

- 5) Would you participate in a future Community Health Symposium?
 - All 12 respondents replied that they would attend another symposium.
- 6) What is the one thing you would like to see from LVHN over the next year in terms of our work in the community?
- Survey respondents would like to see LVHN increase outreach and early intervention; expand translation services; increase ExpressCARE to reduce wait times in the Emergency Department; hold more community functions such as the symposium; increase programming around disease prevention; continue to focus on social determinants of health; expand health prevention, education and awareness; implement ideas from the symposium; and engage more community health workers.
- 7) What would you like to see in the next Community Health Symposium?
 - More voices from drug rehabilitation; focus on elders and baby boomers accessing services; include community members/patients; discuss pregnancy and dental services for people who are uninsured; update CHNA measurements and results; and invite community members who have benefitted from resources provided to briefly tell their story and describe how the resources helped.

Next Steps

Next Steps

The most immediate next step is to ensure that LVH-Hazleton continues to engage in meaningful conversations with stakeholders across multiple sectors in the county to support and grow the momentum that resulted from the symposium. One way that LVH-Hazleton can play its part in achieving this is by leveraging its CHNA working group. A new CHNA will be released soon. This will give LVH-Hazleton the chance to re-engage with symposium participants and prioritize implementation efforts based on the discussions held at the symposium along with the focus group and interview data from the CHNA.

- Leaders and key stakeholders have opportunities to deepen existing collaborations and seek opportunities for new ones. Collaborations can help us look at social and health-related issues in new and diverse ways. Specifically, organizations can contribute to the new Hazleton area interagency meeting.
- Deepen understanding of available services and ensure that they are being utilized to the fullest extent. Then, identify gaps and apply for grants/support to fill in those gaps.
- Since schools are such an important part of the community, strengthening partnerships with them is key to successful community engagement. In general, collaboration around services for youth can be expanded. Of interest to symposium participants was the Stop the Silence film available for screenings. The YMCA might also play a role in supporting or developing youth programming, especially in the after-school time slot.
- LVHN and other key community service groups need to continue to translate their materials (especially after-visit summaries, other instructions and health insurance information) as well as integrate cultures so that everyone feels welcome and that services are accessible to them.

- A widespread and creative messaging campaign, in spaces where people already share valuable information, would help ensure that people access available services.
- Partner organizations must continue to advance workforce development efforts to nurture the future workforce.
- As LVH-Hazleton serves Hazleton and the surrounding areas, partner organizations will need to continue to consider the specific needs of those who live in rural areas.

Dissemination of This Report

All participants, facilitators, recorders and attendees will receive a copy of this report. The report will also be sent to any invitee who was unable to attend. The report will be posted on the Leonard Parker Pool Institute for Health's website. We encourage all those receiving the report to share it with multiple audiences.

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Planning Committee

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School-based Preventive and Mental Health Callout Box

- Mental health issues, including anxiety, have increased since the height of the COVID pandemic.
- Stigma, transportation, lack of providers and language are key barriers to treatment.
- It is recognized that the school system can be an invaluable partner in addressing adolescent mental health issues.
- Participants learned about several existing youth mental health programs, including Between the Bells and the 988 Hotline.
- Opportunities for cross-sector collaboration include after-school and peer-led activities and educational programming for parents, employers and other community members.
- Short-term next steps could include participation on the newly formed, regional, interagency meeting; coordinating of efforts between the YMCA and the school district; reinvigorating existing programming; providing film screenings to engage youth and families.
- Primary care and urgent care sites could all be encouraged to distribute youth mental health resources through print and through their scrolling content on their waiting room televisions. The school district can send information to families electronically.

Language Barriers and Access to Care

- Language barriers can limit individuals' access to care and negatively impact the quality of the care they receive.
- Addressing language barriers and cultural preferences helps to build trust.
- · Some patients may be new immigrants or undocumented workers who are not insured and who avoid seeking care.
- Translation through iPads makes it more challenging to build a relationship between patient and clinician. The technology does not always work great and can be hard for some patients.
- There are opportunities to continue to offer English and Spanish classes.
- We must look for ways to ask people about their preferred language and then use that language.

- It is important that patients understand that using an interpreter will not result in them being billed.
- Providing educational opportunities for bilingual students will help build the pipeline of workers.

Transportation and Access to Care

- Options for transportation including shared ride, fixed route and paratransit were explained.
- Limitations of the various options were explained, including hours, routes and eligibility.
- Many people present at the symposium were not aware of the transportation options, and they expect that the people they work with are also unaware.
- Luzerne County Transportation Authority (LCTA) has interpreters in-house that drivers can access. LVHN shuttles do not have interpreter services.
- Participants expressed interest in receiving updated print materials from LCTA and their willingness to help distribute them.





