



Healthy York Fall Forum

Wednesday, October 1st, 2025

8:00 am – 3:30 pm

@Wyndham Garden York



Welcome

FORUM AGENDA



www.healthyyork.org

SLIDO.COM

#3733 486



<https://app.sli.do/event/sfr8Pe81CkzwhxsJ9XePDA>



Test- Highlight of your summer?

Thank you!



REACH

Welcome

Jenny Englerth

***Family First Health, President &
CEO***

Chair, Healthy York Coalition



Welcome

Scott Burford

***York County Commissioners,
Vice President***



Status of York County Healthcare

Dr. Alyssa Moyer

***President WellSpan York Hospital,
WellSpan Health***





Healthy York Coalition Fall Forum

October 1, 2025

Alyssa Moyer, M.D.
Vice President, WellSpan Health
President, WellSpan York Hospital

Surgical and Critical Care Tower Renderings



S. George Street looking east



West Drive looking east

SCCT Progress

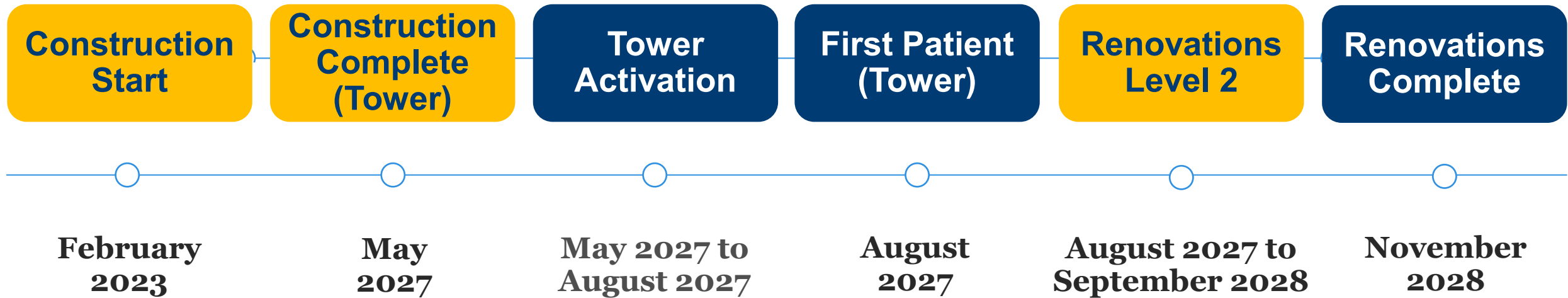


November 2024



July 2025

Surgical and Critical Care Tower – Milestones



Surgical and Critical Care Tower in Numbers (in 17 months!)

86

Foot Deep
Hole Excavated

104,000

Cubic Yards of
Earth Removed

5,200

Truckloads
of Earth!

170

Tiebacks
installed

11,000

Yards of
Concrete

1,100

Concrete
Trucks

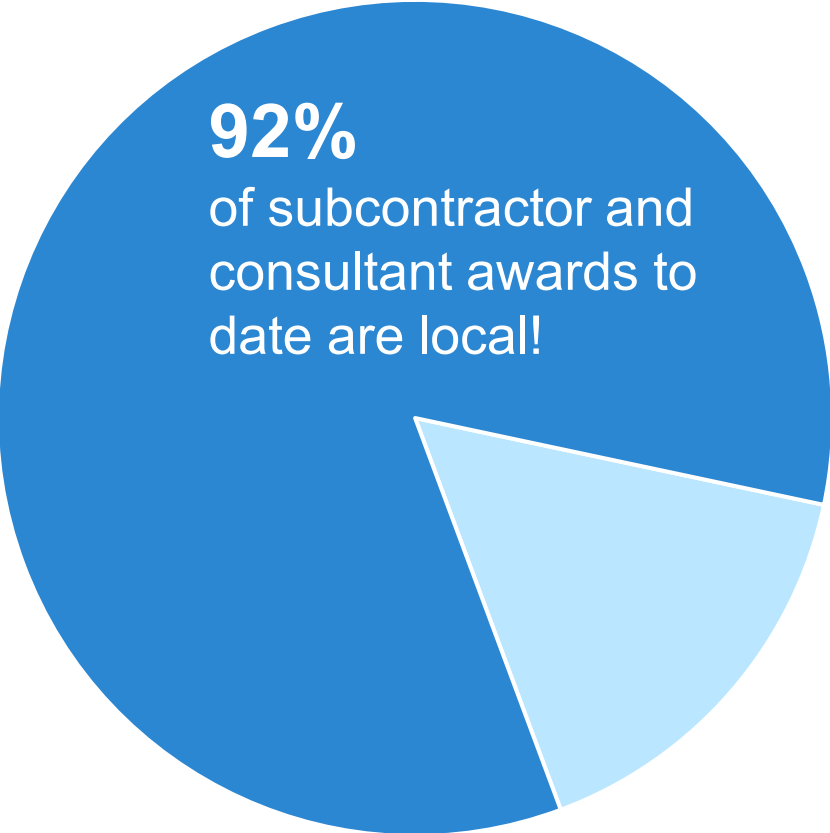
50

(More Concrete
Trucks to go)

3,000

Tons of Steel
Installed

Investing in Our Local Community



Local and diverse supplier participation is positively impacting the community

Local Participation (as of July 2025)	
No. local subcontracts awarded	33
% local subcontracts awarded	92%
\$\$ local subcontracts awarded	\$170 million

Sustainability

- LEED Gold Certification – On Target
 - *2nd LEED Gold in-patient hospital in commonwealth*
- Key Design Elements:
 - Habitable Green Roof: 12,000 sf
 - Designed for stormwater management*
 - Diversion of Construction Materials from Landfills
 - Energy Efficiency
 - 20% reduction from standard new hospital*
 - Water Use Reduction
 - 35% reduction from standard new hospital*
 - 100% Lead Free Building
 - Bird Glass
 - Bird safety feature*



Behavioral Health Update



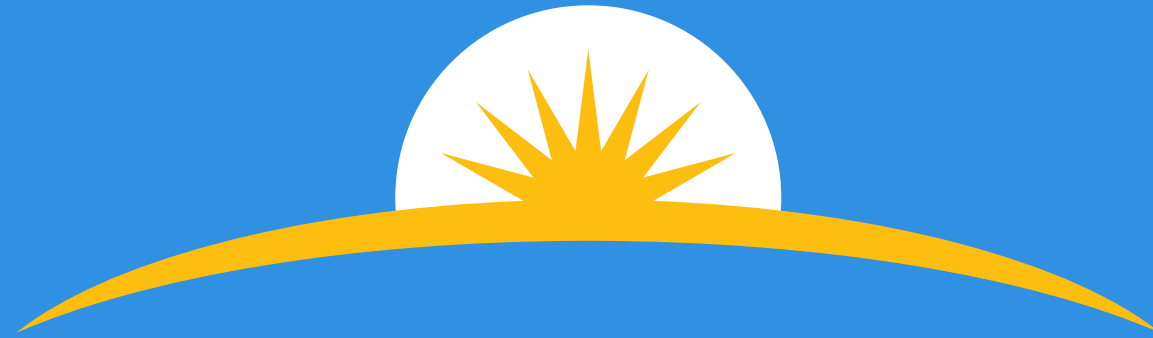
Neighborhood Hospitals



Recognition in U.S. News & World Report

- Recognized in the U.S. News & World Report's 2025-26 Best Hospitals rankings!
- YH achieved a remarkable 14th place in Pennsylvania, surpassing previous 20th place ranking!
- Six of our hospitals earned “High Performing” status in various procedures and conditions.





WELLSPAN[®]
HEALTH

Community Health Needs Assessment Data

Stephanie Voight
Director, System
Community Health

WellSpan Health

Natalie Williams

Executive Director,
Healthy York Coalition





Community Health Needs Assessment & Community Health Improvement Plan

Natalie Williams, Executive Director, Healthy York Coalition

Stephanie Voight, Systems Director, Community Health

October 2025

HEALTHY/ORK

The Coalition for a Healthier York County

mission

The Healthy York Coalition assesses health needs, convenes community partners and facilitates action towards better health for all.

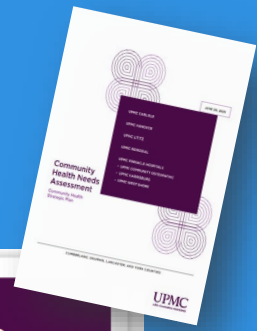
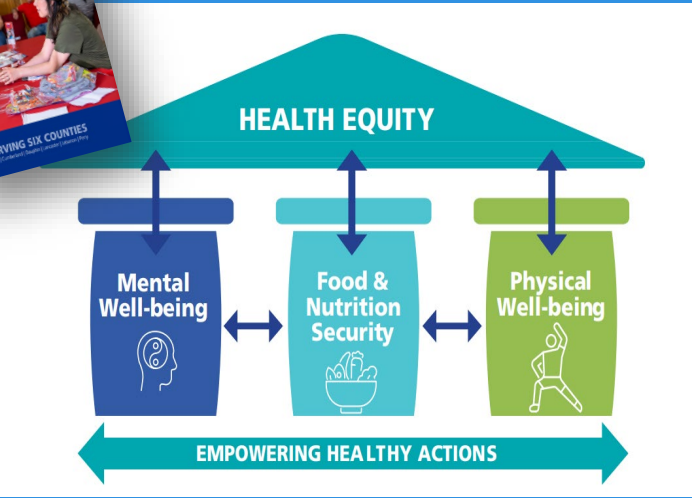
vision

Working together to champion a healthier York County.



Needs Assessments = Health Coalition “Road Map”

HEALTHY/ORK



UPMC PINNACLE HOSPITALS

COMMUNITY-WIDE HEALTH NEEDS: 2025-2028

- ACCESS TO CARE AND NAVIGATING RESOURCES
- PREVENTION AND COMMUNITY-WIDE HEALTHY LIVING



Before we dig into the bulk of the presentation today- What are you hoping to hear about?

WellSpan 2025 Community Health Needs Assessment



Scan the QR code to view the full report or visit: <https://www.wellspan.org/About-WellSpan/Improving-Healthy-Communities/Community-Benefit>



Reflecting On Our Journey

- Enhanced Methodology
- Improved Community Representation
- Life Expectancy Alignment
- Early Data Findings
 - Demographic changes
 - Children's Health
 - Access to Healthcare
 - Social Drivers of Health
 - Health Equity and Inequity
 - County Health Rankings

MIXED METHODS

LEVERAGING WHAT WE ALREADY
KNOW WITH WHAT WE WANT TO
LEARN

CULTURALLY RELEVANT

ENSURING OUR METHODS ARE
INCLUSIVE AND FINDINGS ARE
REPRESENTATIVE

COORDINATED

LOCALIZED APPROACH WITH
COMMUNITY STAKEHOLDER
ENGAGEMENT AND REGIONAL
PERSPECTIVE

ACTION ORIENTED

POSITIONING OUR LEARNINGS WITH
STRATEGIC PLANNING, LIFE
EXPECTANCY GOALS AND HEALTH
EQUITY FRAMEWORK

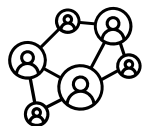
Leveraging Innovation Through AI Technology to Enhance our CHNA



- 275% Increase in survey responses



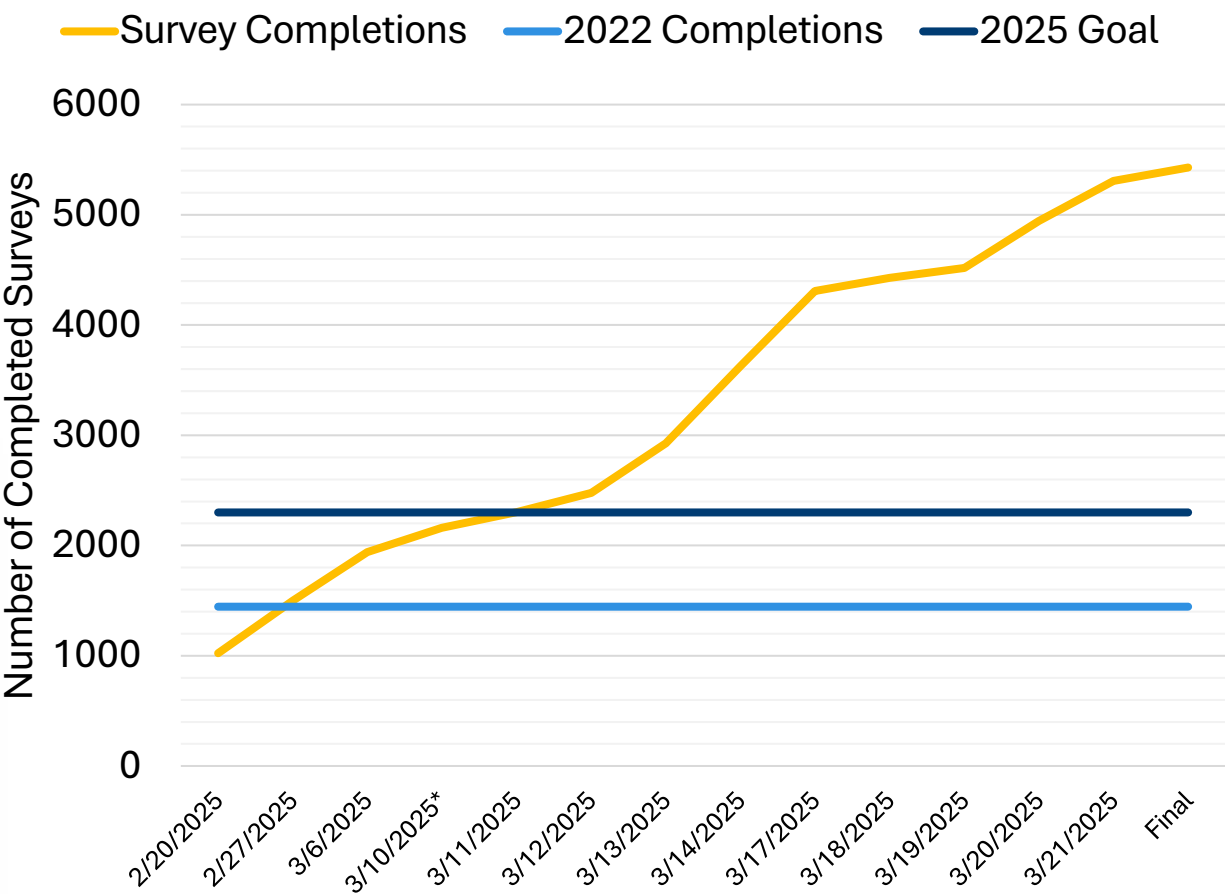
- Estimated 640,000 community members called



- 40% connect rate



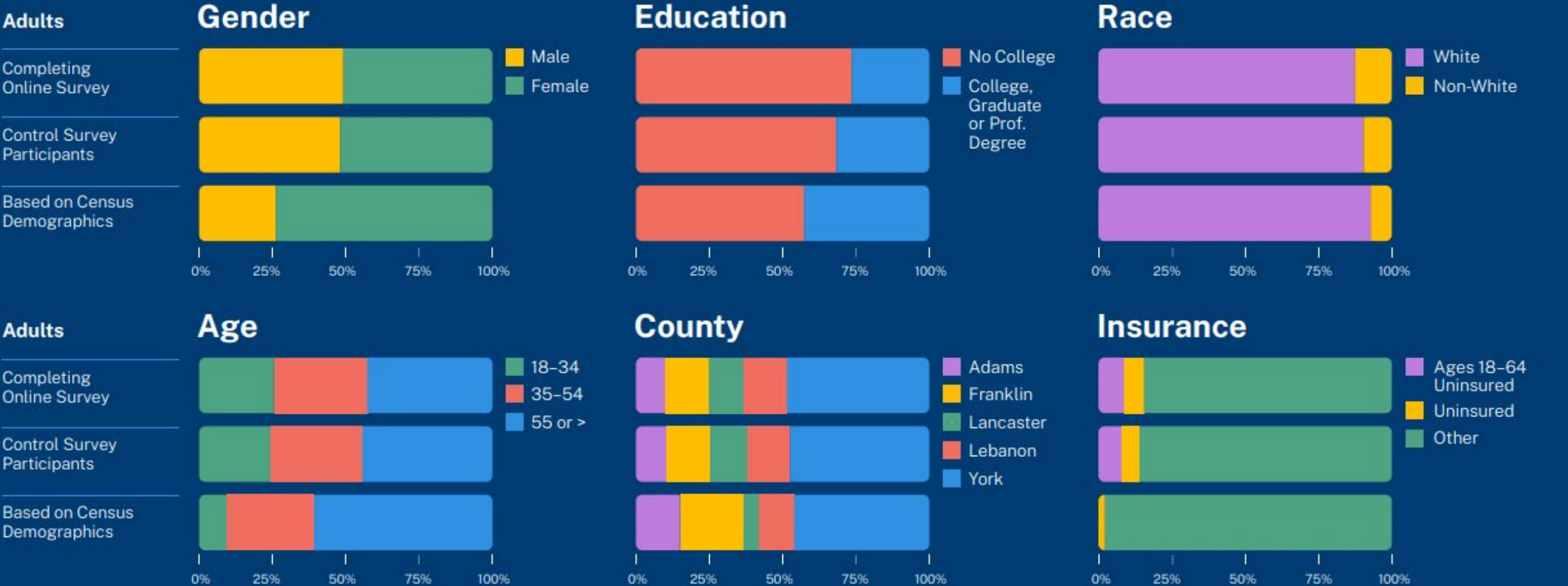
Community Needs Survey Completion



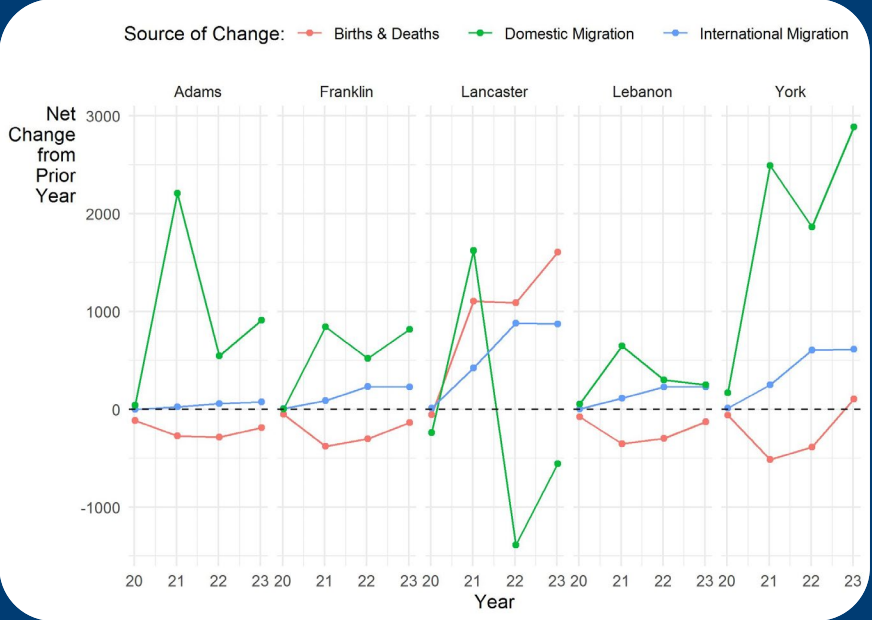
Selected Adult Survey Participant Characteristics

Figure 1.

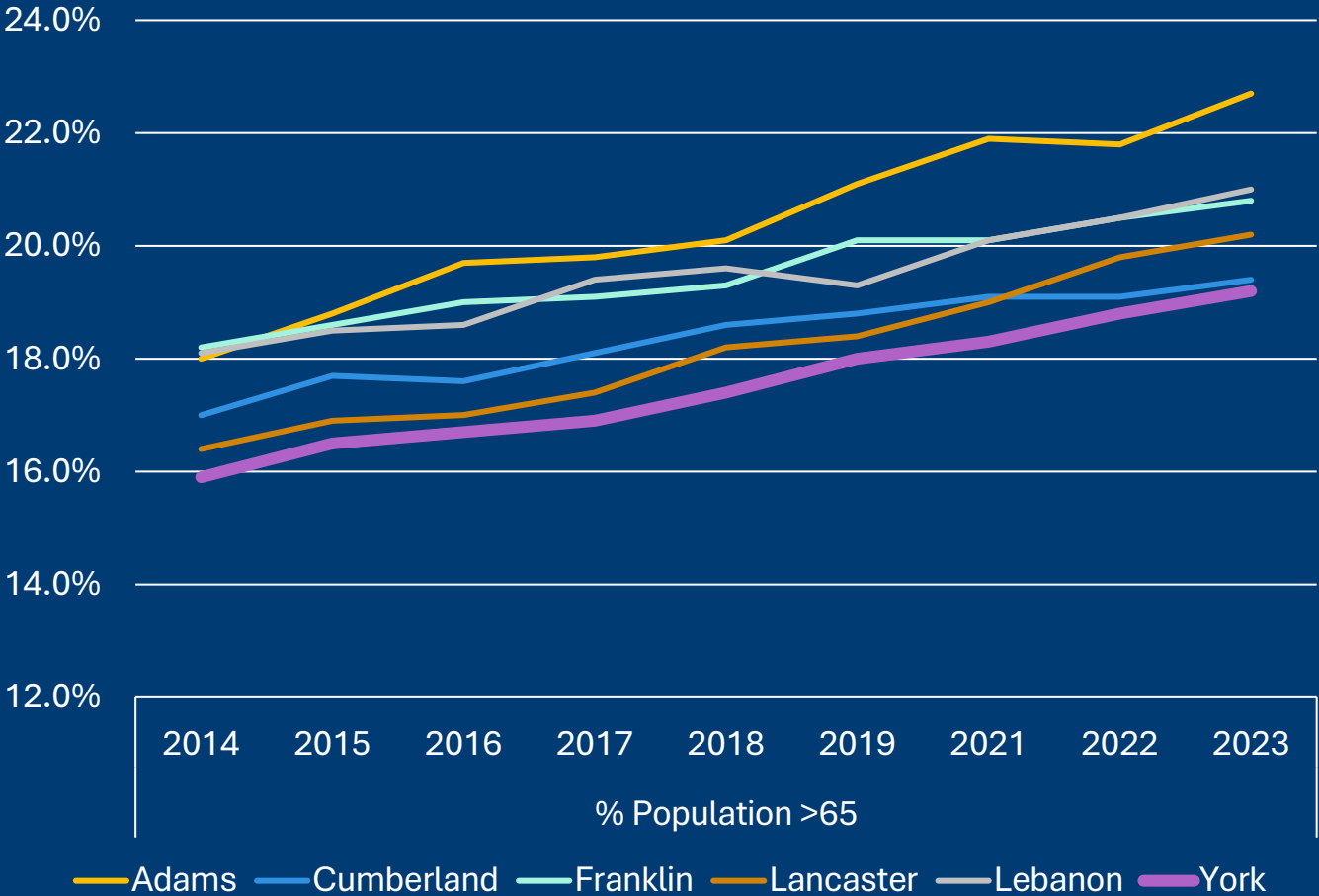
Note: All estimates are from the U.S. Census Bureau, 2018-2023 American Community Survey 5-Year Estimates. Proportions are the share of adults in the study area.



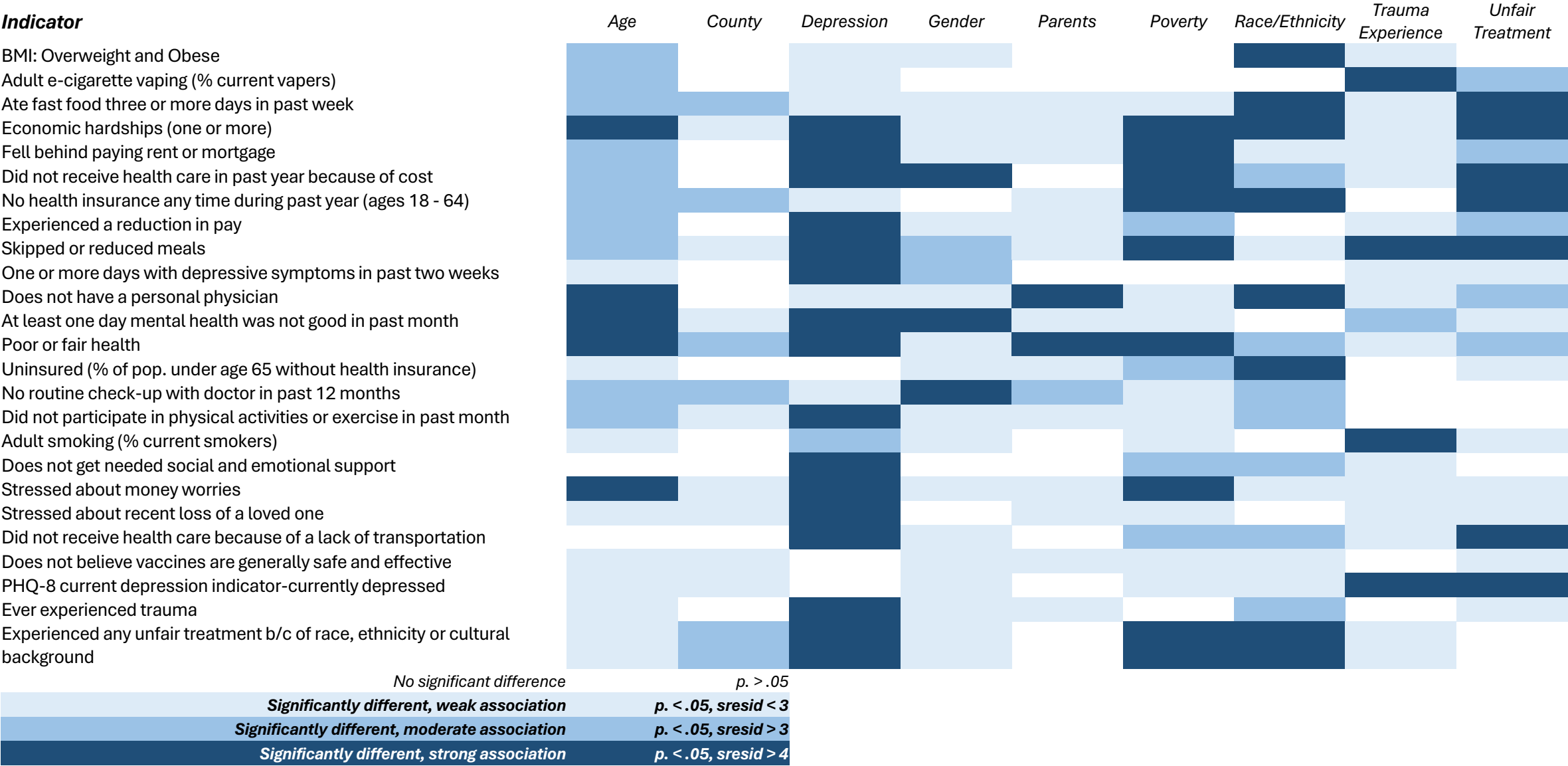
Demographic Changes



65 and Over Population Growth



Understanding Trends and Disparities



Trending Data

- Organized by largest percentage of population impacted to smallest percentage
- Consistency in many observed trends for more than 10 years
- Social drivers and concerns about cost worsening
- Interesting story emerging related to smoking and marijuana use

Indicator	Total			Trends
	2017	2022	2025	
Did not exercise 30 minutes on five days in past week	83%	81%	82%	
BMI: Overweight and Obese	71%	71%	72%	
One or more days with depressive symptoms in past two weeks	59%	64%	71%	
No strength training in past month	51%	61%	55%	
Stressed about money worries	46%	41%	53%	
At least one day physical health was not good in past month	41%	41%	49%	
At least one day mental health was not good in past month	36%	40%	48%	
Did not participate in physical activities or exercise in past month	28%	37%	33%	
Economic hardships (one or more)	31%	26%	32%	
Stressed about recent loss of a loved one	32%	33%	31%	
Has a high-deductible health plan	22%	22%	30%	
Has not seen a dentist in past year	28%	31%	28%	
Used marijuana one or more days in past month		19%	24%	
No routine check-up with doctor in past 12 months	26%	25%	18%	
Poor or fair health	16%	15%	17%	
Does not believe vaccines are generally safe and effective		20%	17%	
Experienced a reduction in pay	13%	12%	15%	
Skipped or reduced meals		8%	14%	
Binge drinking behavior	14%	13%	14%	
Does not get needed social and emotional support	7%	11%	13%	
Does not have a personal physician	14%	14%	13%	
Experienced any unfair treatment b/c of race, ethnicity or cultural background		8%	11%	
No health insurance any time during past year (ages 18 - 64)	16%	10%	11%	
PHQ-8 current depression indicator-currently depressed	10%	8%	10%	
Did not receive health care in past year because of cost	8%	6%	9%	
Ate fast food three or more days in past week	10%	9%	9%	
Adult smoking (% current smokers)	16%	12%	9%	
Uninsured (% of pop. under age 65 without health insurance)	13%	12%	8%	
Fell behind paying rent or mortgage		4%	7%	
Used illegal drugs in past year	4%	4%	5%	
Adult e-cigarette vaping (% current vapers)	6%	4%	4%	
Did not receive health care because of a lack of transportation	5%	2%	3%	

Indicator	York					Trends
	2011	2014	2017	2022	2025	
Did not exercise 30 minutes on five days in past week	79%	83%	84%	82%	82%	
One or more days with depressive symptoms in past two weeks	61%	59%	64%	65%	73%	
BMI: Overweight and Obese	66%	68%	72%	73%	71%	
Experienced any symptoms of not getting enough sleep				71%	68%	
Stressed about money worries				44%	52%	
At least one day physical health was not good in past month	39%	39%	45%	45%	52%	
At least one day mental health was not good in past month	45%	38%	40%	46%	51%	
No strength training in past month	60%	56%	53%	61%	51%	
Ever experienced trauma					49%	
Stressed about recent loss of a loved one				38%	34%	
Did not participate in physical activities or exercise in past month	20%	24%	26%	37%	32%	
Economic hardships (one or more)	39%	36%	37%	27%	31%	
Has a high-deductible health plan			25%	23%	31%	
Used marijuana one or more days in past month				17%	24%	
Has not seen a dentist in past year	24%	26%	27%	25%	24%	
Binge drinking behavior	15%	16%	19%	14%	16%	
Poor or fair health	14%	17%	16%	16%	16%	
No routine check-up with doctor in past 12 months	31%	26%	24%	27%	15%	
Does not believe vaccines are generally safe and effective				13%	15%	
Experienced a reduction in pay				13%	14%	
Does not get needed social and emotional support	8%	7%	7%	10%	14%	
Skipped or reduced meals				11%	13%	
Experienced any unfair treatment b/c of race, ethnicity or cultural background				12%	13%	
Needs help reading health materials at least occasionally				16%	12%	
Does not have a personal physician	12%	12%	16%	12%	11%	
Did not receive health care in past year because of cost	12%	13%	12%	9%	10%	
No health insurance any time during past year (ages 18 - 64)		18%	14%	9%	10%	
PHQ-8 current depression indicator-currently depressed	9%	9%	13%	10%	9%	
Adult smoking (% current smokers)	22%	24%	19%	15%	8%	
Fell behind paying rent or mortgage				5%	8%	
Ate fast food three or more days in past week		14%	14%	12%	7%	
Used illegal drugs in past year		5%	7%	4%	6%	
Adult e-cigarette vaping (% current vapers)			6%	4%	5%	
Uninsured (% of pop. under age 65 without health insurance)		11%	10%	5%	5%	
Did not receive health care because of a lack of transportation		7%	6%	4%	3%	

York County Trends over time

York County By The Numbers

Median Age
41.0

Median Home Value
\$220,700

Over 65
18.3%

Experienced Trauma
49%

Money Worries
52%

Currently Depressed
9%

Used Marijuana in
past month
24%

Economic Hardships
31%

County Health Ranking

Robert Wood Johnson — out of 67 PA counties

31

Residential Population



Median
Household Income

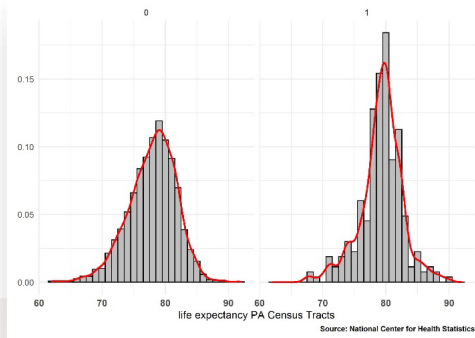
\$79,183

Poverty
Rate

8.4%



Does this align with what you know about York County and how people may be feeling?

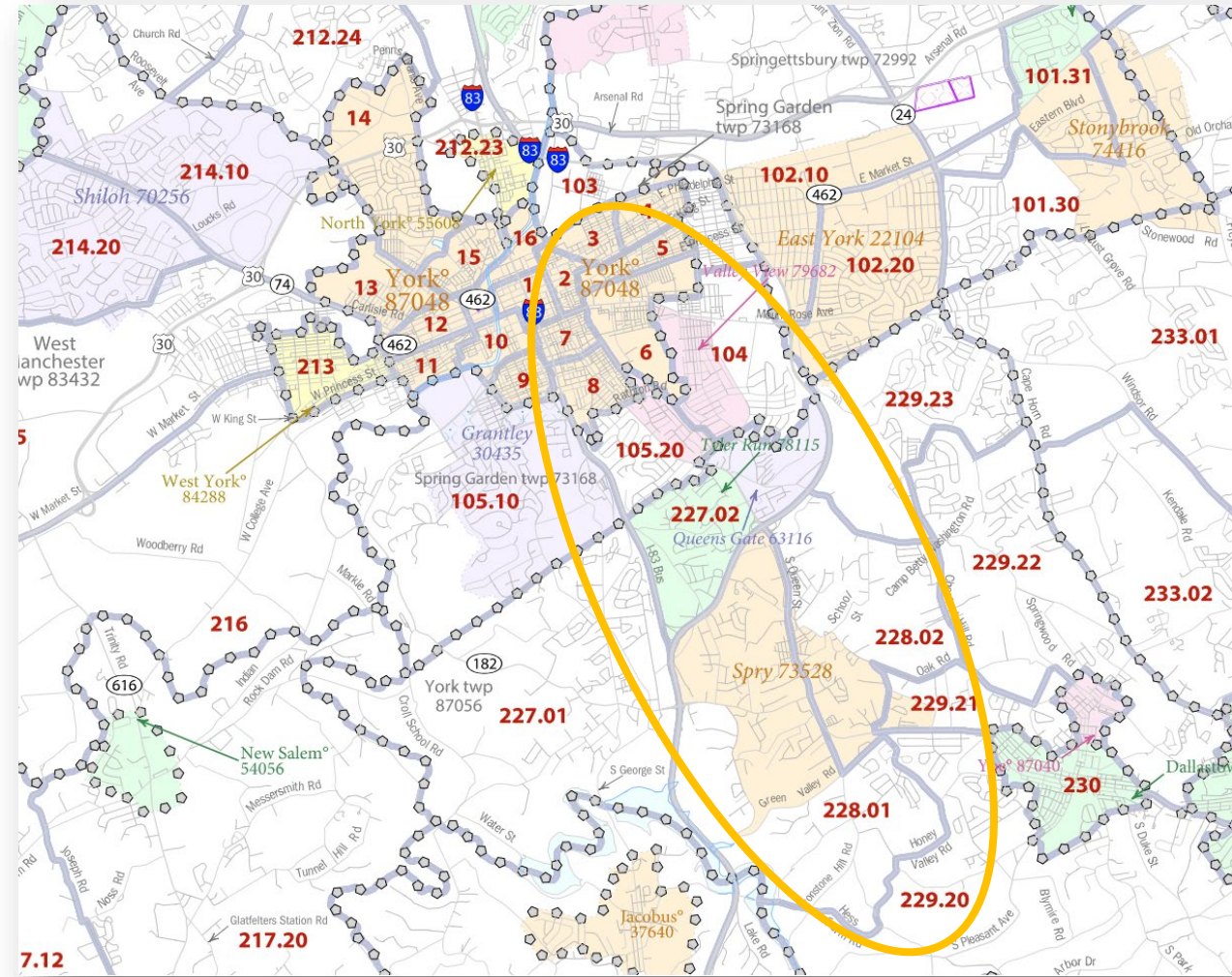


Differences in Life Expectancy

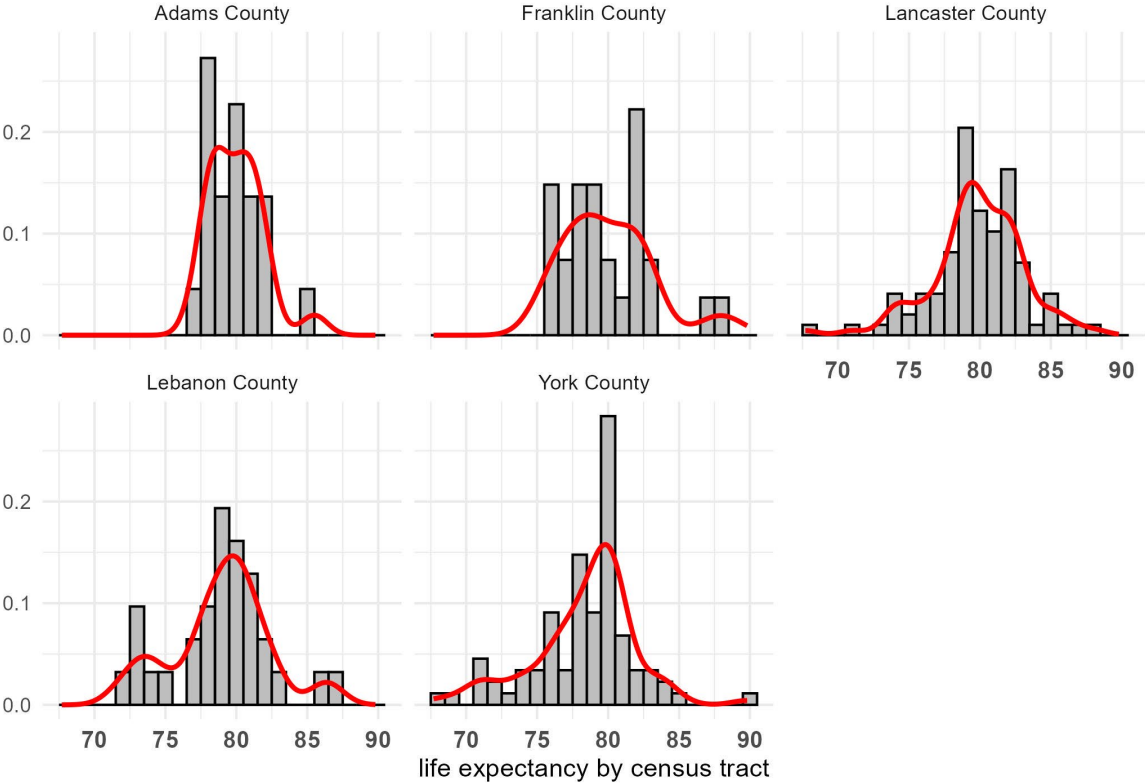
Case Study Example

- WellSpan footprint LE exceeds State
- York County
- LE Difference of 22 Years
- 6.7 miles between the highest and lowest LE

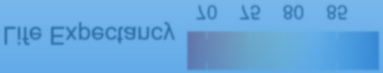
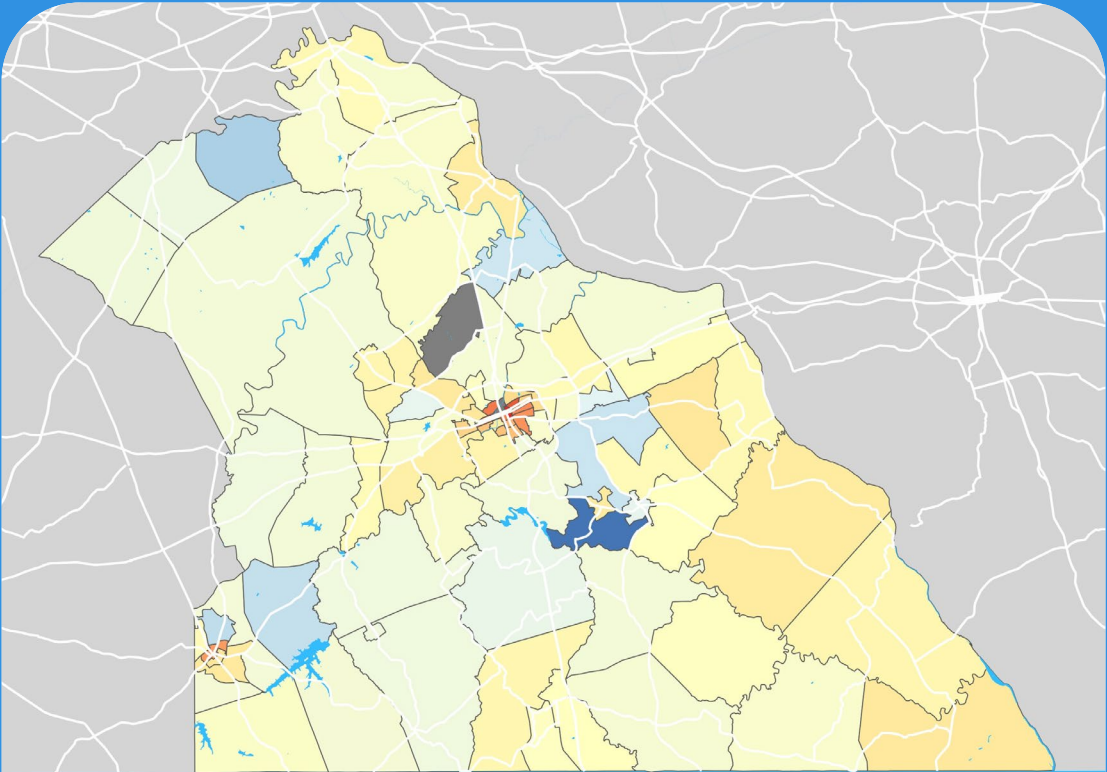
	York City	Dallastown
Median Household Income	\$42,351	\$94,219
Living in Poverty	24.5%	8.0%
Non-White	~ 50%	~ 13%
Uninsured	12.3%	5.3%
College Degree or Higher	16.1%	34.1%



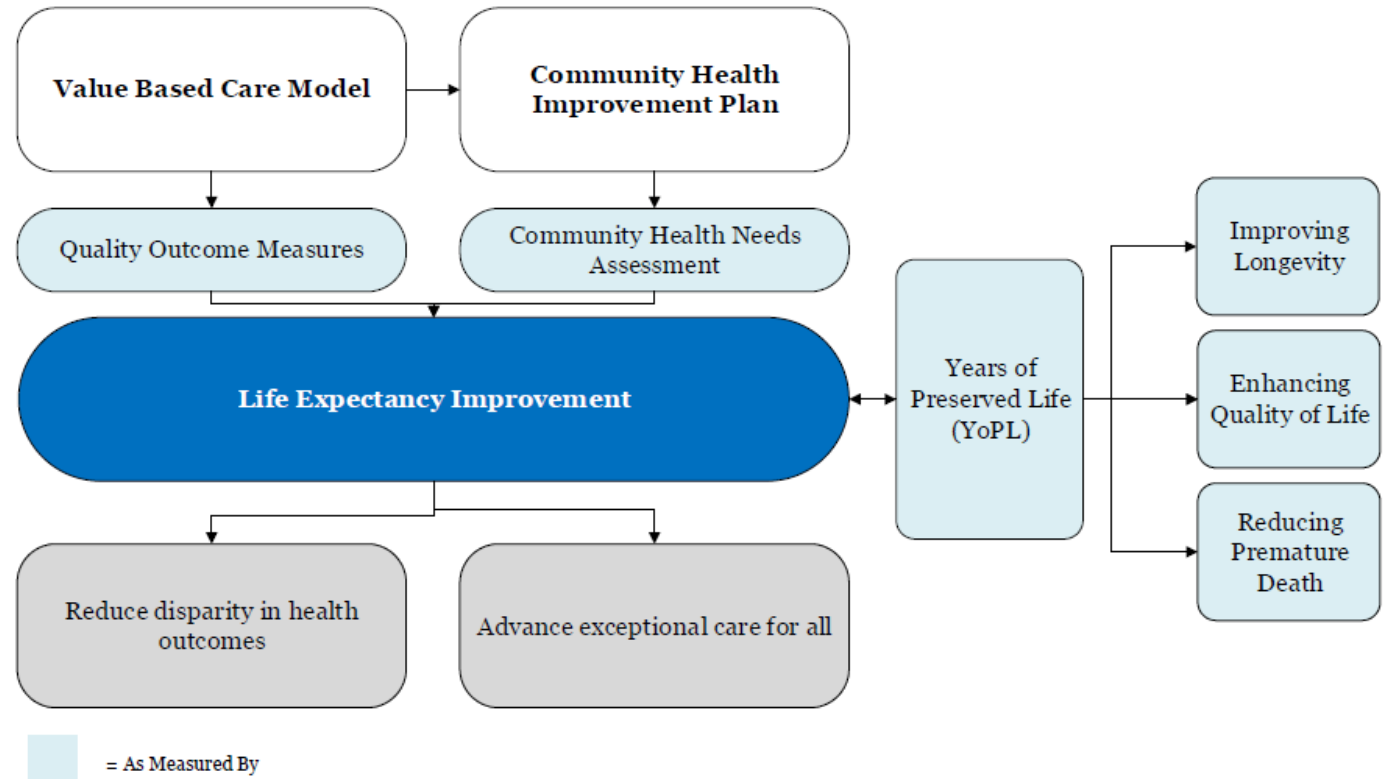
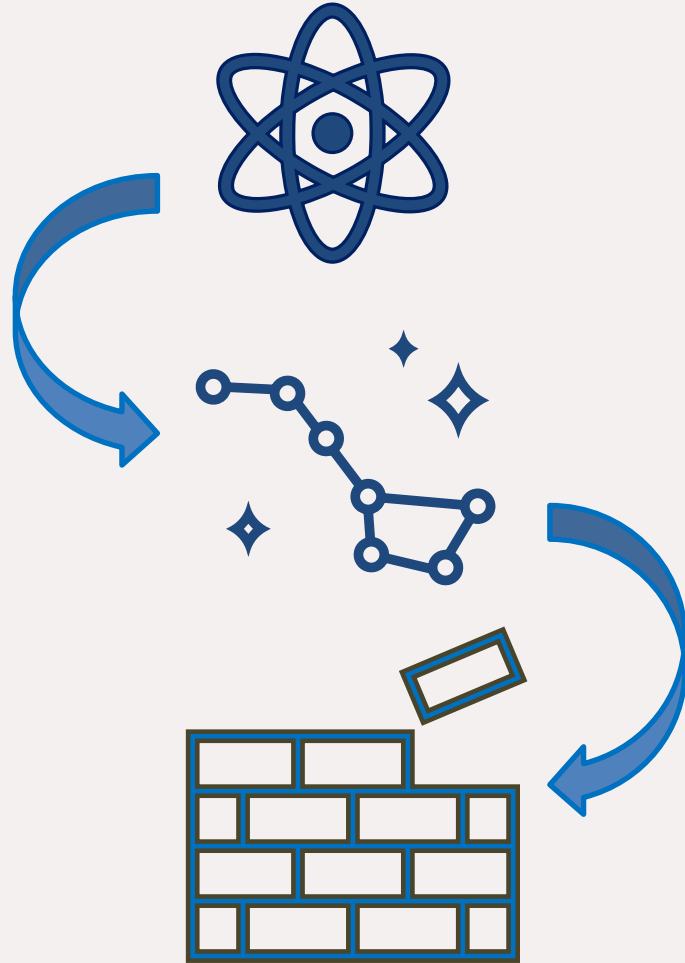
Life Expectancy in York County



Source: National Center for Health Statistics

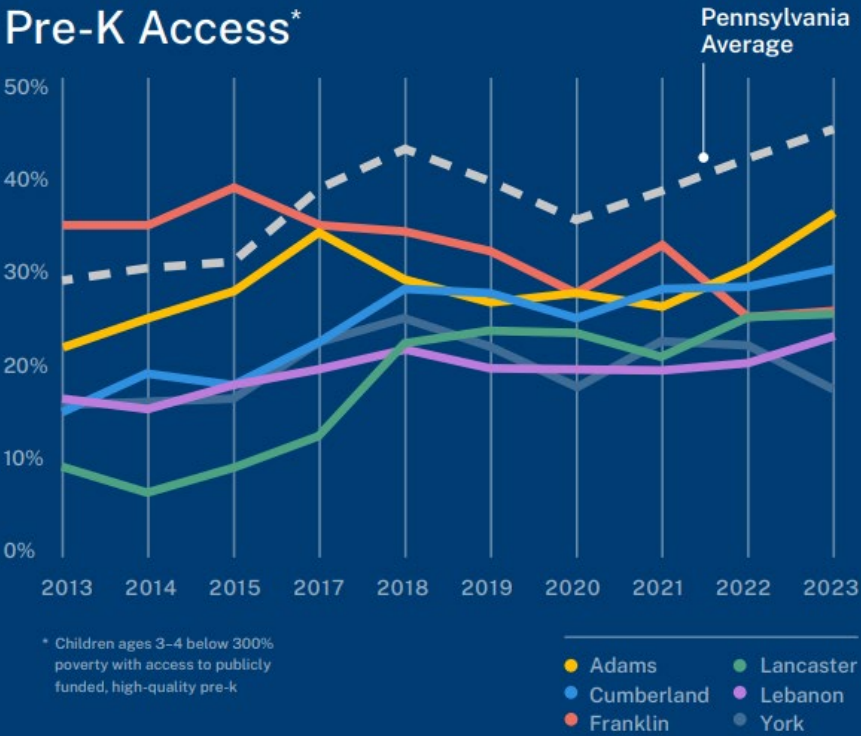


Constructing WellSpan's Life Expectancy Framework

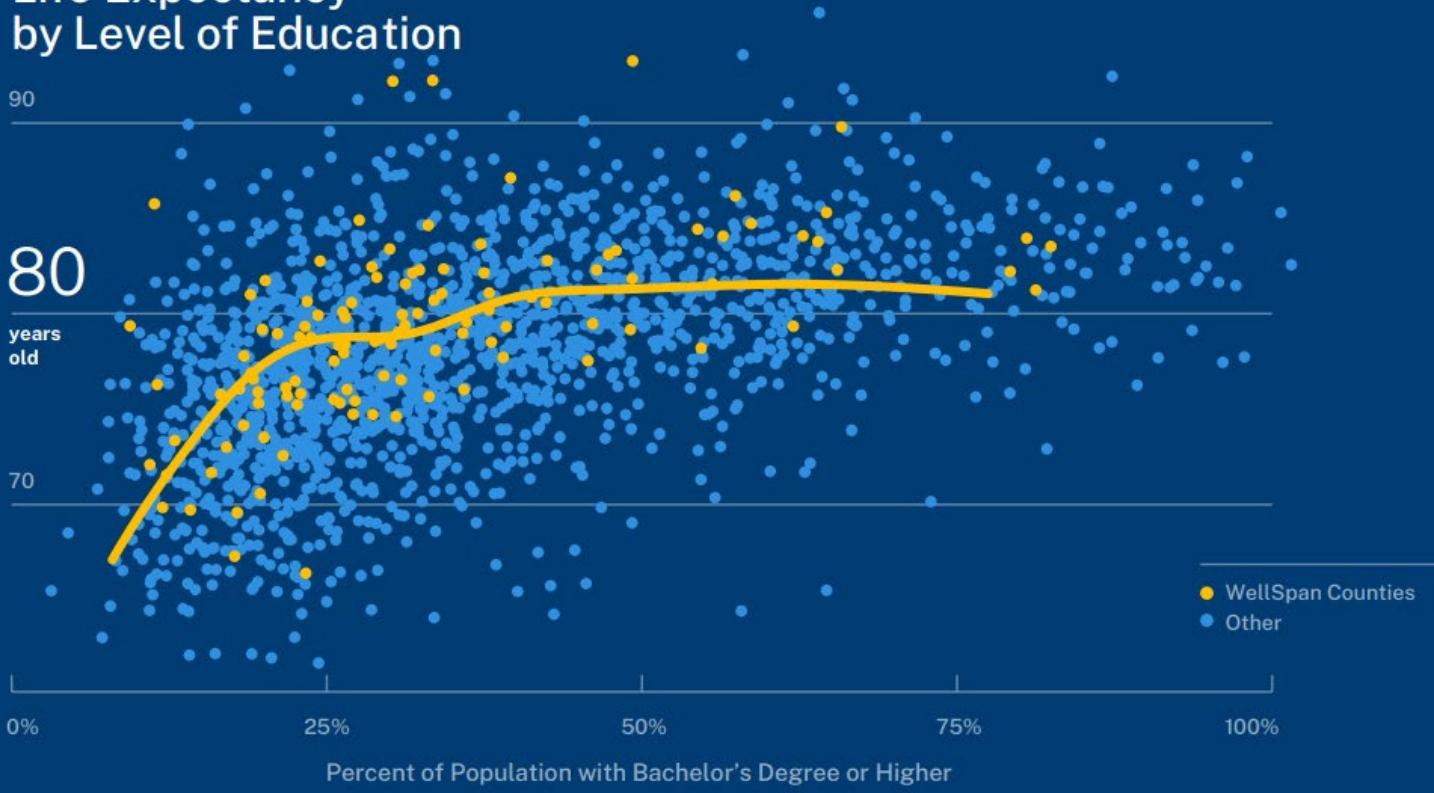


Social Complexities and Indicator Relationships

Pre-K Access*

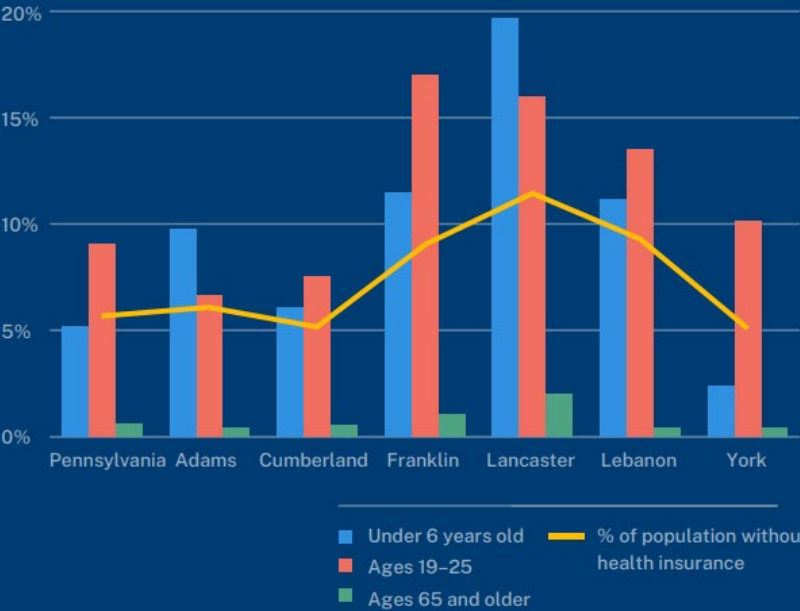


Life Expectancy by Level of Education



Additional Regional Trends

Uninsured by Age



2023 Health Ranking Summaries

Table 1.

	Health Outcomes	Health Factors	Length of Life	Quality of Life	Health Behaviors	Clinical Care	Social & Economic Factors	Physical Environment
Adams	11 ●	9 ●	9 ●	11 ●	15 ●	16 ●	7 =	46 ●
Franklin	14 ●	20 ●	16 =	25 ●	31 ●	49 ●	10 ●	38 ●
Lancaster	9 =	12 ●	8 ●	8 ●	10 ●	24 ●	9 ●	66 ●
Lebanon	26 ●	17 ●	19 =	37 ●	21 ●	18 ●	16 ●	59 ●
York	31 ●	16 ●	22 ●	40 ●	29 ●	8 ●	15 ●	57 ●
Cumberland	5 ●	4 =	6 ●	7 ●	5 ●	5 ●	4 =	56 ●

Legend

- 1 = Best (statewide)
- Improved since last CHNA
- Worsened since last CHNA

Community Health Needs Assessment Executive Summary



Demographic Trends

The population of adults over 65 years of age is growing, as is the presence of single-female-headed households with children.

Lancaster County is the only county in the region with a birth rate that exceeds the death rate.

Population fluctuations are largely attributed to domestic and international migration.

Observations of population growth indicate the community is becoming slightly more racially and ethnically diverse.



Access to Health Care

Most residents (92%) report having health care coverage and a personal physician (87%).

A growing number of residents report having a high-deductible plan (30%), and 9% of residents report having avoided health care in the past year because of cost.

More than 70% of insured adults across the region report having private health insurance, demonstrating a stark contrast from the payor mix observed in health care financials.

An average of 50% of households regionally report having broadband, and 96% of households report having some access to broadband.

18% of survey respondents did not have a routine check-up in the past 12 months.

Preventive cancer screenings demonstrate some improvement — 24% of community members who are recommended for colorectal cancer screenings received them, and 94% of women over 40 years of age have had a mammogram.



Children's Health

Uninsured rates for children under six continue to show increases and exceed the state, ranging from 2.4% in York County to 19.7% in Lancaster County.

Around 38% of children in kindergarten to 12th grade are overweight or obese.

Fewer than a third of children living in poverty have access to high-quality pre-k.

Decline in math, reading and science test scores has been consistent from 2006 to the present, with rising numbers of students testing below basic proficiency levels.



Non-Medical Factors

Data demonstrates notable and persistent health variances across multiple geographies.

The median household income has risen significantly, though the gap between the highest income quintile and the lowest continues to grow.

More than a quarter of households are living "paycheck to paycheck," and an additional 7% of households sometimes do not have enough money for basic items.

Nearly half of renters and nearly a quarter of homeowners are spending more than 30% of their income on rent or mortgage expenses.

Over half of the housing inventory across the region was built before 1979, and occupancy rates across the region exceed the state and the nation.

Roughly 32% of residents are currently experiencing one or more economic hardships, and 53% are stressed about money.

For many residents, food purchases were cost-prohibitive (9%), while others expressed concern that their food would run out before they received more money to purchase food (10%).

For 3% of our community, utilities were shut off due to their inability to pay.



Health Behaviors, Chronic Disease and Behavioral Health

Most adults experience high levels of stress, do not eat healthy recommended foods, do not exercise regularly and do not get adequate sleep.

Our communities also show rising rates of heart disease, diabetes, pulmonary disease, stroke and being overweight or obese.

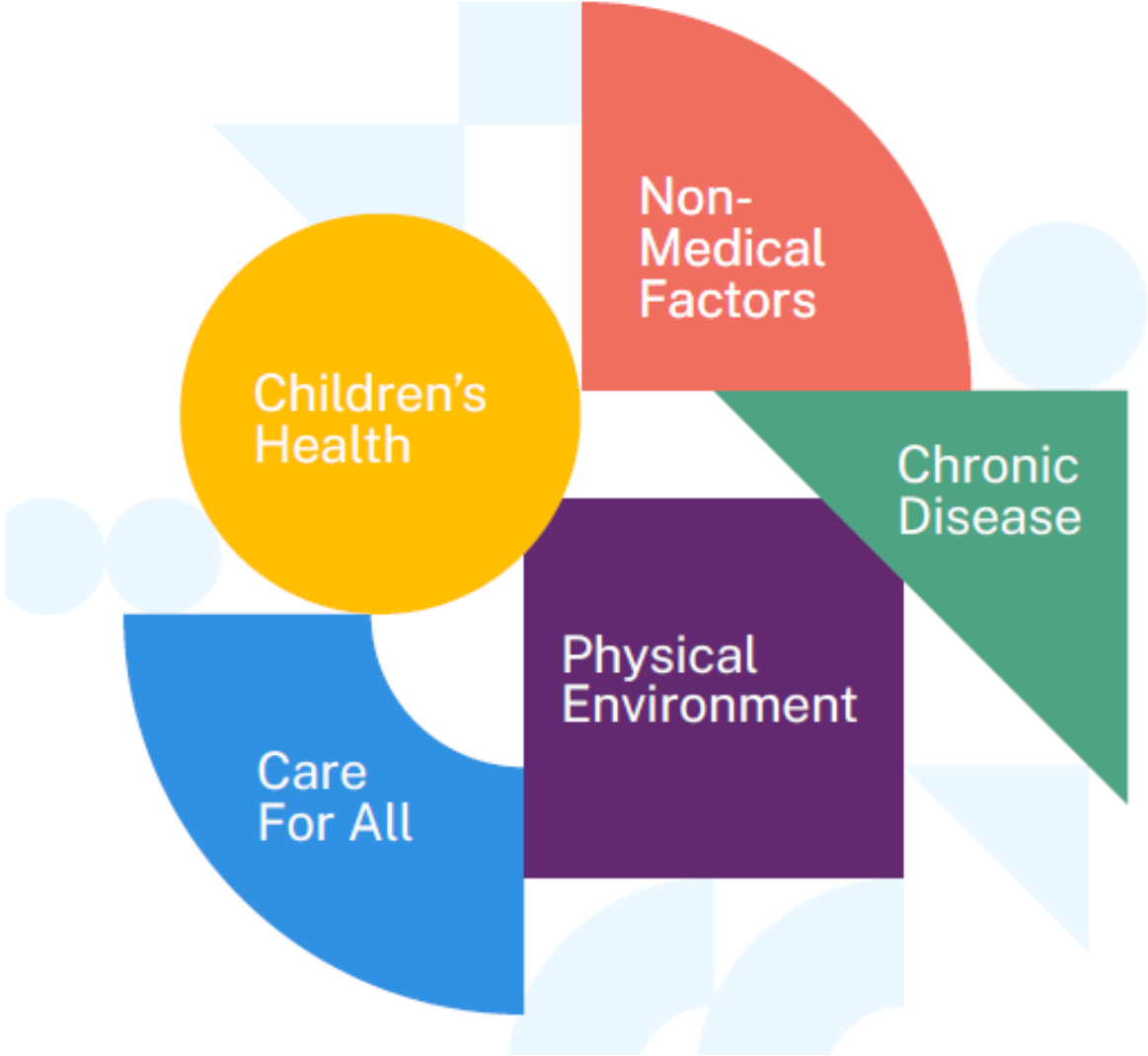
Rising trends of depression, anxiety, substance use, trauma, stress and grief have been observed for the past several years.

Binge drinking and illegal drug use show modest increases.

While smoking rates have reportedly declined in recent years (from 16% in 2017 to 9% in 2025), there is concern for nearly a quarter of the community (24%) reporting marijuana use within the past month.

Nearly half of the community reports having experienced trauma, 11% report unfair treatment because of their race, ethnicity or cultural background, and 10% were identified as currently depressed.

2025 WellSpan Community Health Priorities



2025- 2025 CHIP Summary of Accomplishments

Non-Medical Factors	Mental Well-being
<p>More than 67,000 searches for resources on our white label #HeretoHelpall strong social service referral network</p> <p>Develop and implement new approaches for collaborating with community-based organizations to impact the most pressing non-medical factors affecting our patients and community</p> <p>More than 1 million patients screened for non-medical factors, also called social drivers of health</p> <p>Partnered with Giant Foods for a six-month fruit and vegetable voucher pilot program which demonstrated a 110% increase in produce purchases for participants</p> <p>\$2.2 million awarded in community grants for 57 projects addressing non-medical factors influencing health</p> <p>Three transformational food insecurity projects supported by \$1.5 million investment</p> <p>Received more than \$10 million in grants to address non-medical factor needs</p> <p>Achieved Good Food, Healthy Hospitals distinction across WellSpan hospitals by demonstrating an increase in healthy options for patients and visitors.</p> <p>More than 6,600 shelf-stable meals distributed to patients in need</p> <p>Supported over 600 housing-insecure patients in need of medical and social support through the Arches to Wellness Recuperative Care Program by leasing 22 shelter beds, with 97% of participants being placed in temporary or permanent housing, 96% having resolved acute medical issues, and 100% having a primary care physician at program completion.</p>	<p>Through county health coalitions, distributed more than 7,000 resource guides and window clings encouraging better navigation to local mental health resources</p> <p>Support personal well-being and whole person health by making it easier for people to recognize and get support for mental health and addiction issues</p> <p>Invested \$627,151.32 in grants to support mental well-being programs in the community</p> <p>Achieved a 19% decrease in waitlist length to improve patient care access to behavioral health services</p> <p>Launched expansion of behavioral health unit at York Hospital, which will add 56 patient beds and 30,000 sq. feet</p> <p>WellSpan crisis counselors began responding to 911 calls for mental health emergencies.</p> <p>Provided support for nicotine cessation and drug treatment for youth</p> <p>Recognized for our commitment to a supportive and inclusive work environment by Mental Health America</p> <p>More than 2,000 community members trained to address mental well-being</p> <p>Partnered with Giant Foods for a six-month fruit and vegetable voucher pilot program which demonstrated a 110% increase in produce purchases for participants.</p> <p>Demonstrated a 10% decrease in emergency room visits for behavioral health patients by expanding mobile crisis teams, incorporating peer support and addiction recovery specialists into crisis services and expanding walk-in crisis center access.</p> <p>Expansion of walk-in crisis centers improved access to immediate care for behavioral health crisis and realized a 21% increase in visits. Reduced the average length of stay in emergency rooms for patients seeking behavioral health care by 50%, from 34 hours to 16 hours.</p> <p>Received \$9 million in grant funds to address mental well-being</p>

Care For All

A Trusted Partner. Reimagining Healthcare. Inspiring Health.

Our WellSpan vision exemplifies our commitment to building trusted relationships with each other, individuals, organizations and communities to achieve more together while leading the way through innovation, expert clinical care and personalized experiences for our patients. As we strive for our community to be their healthiest, access to affordable and equitable health care is necessary.

Our needs assessment demonstrates that some community members face challenges accessing affordable, quality health care when they need it. Ensuring that every resident can afford and obtain health care is a necessary step toward building a healthy and productive community. WellSpan desires to improve ease of use by addressing ongoing and emerging barriers experienced by community members so they can seek and receive care they need in a manner that is reliable, tailored to them, accessible and affordable. Understanding the needs and barriers in our community is an important first step.

The findings of our needs assessment point to concerns in our community related to health care, housing, food and transportation throughout our region. With more than half our adult population currently experiencing stress related to money, roughly a third of our population reports one or more economic hardships, and 9% of our community avoided health care in the last year because of cost. Knowing that the rate of individuals in our community with a high-deductible plan or no insurance is also increasing, the need for WellSpan to deliver on their commitment to providing accessible and affordable care is heightened.

WellSpan desires to eliminate barriers, improve access to affordable care and create a personalized experience for every person in our community to access the exceptional care they need to be healthy.

Reward healthier outcomes to make health care more affordable

- Expand and diversify financial models to support value-based care options for our patients.
- Increase proportion of patients who receive necessary preventative screenings.

A strong safety net of services and programs that address access and financial barriers to care for all

- Provide easy access to WellSpan's Financial Assistance Policy and patient support programs.
- Increase price transparency for out-of-pocket expenses.
- Partner with local Federally Qualified Health Centers to deliver comprehensive care to our community's at-risk and historically underrepresented groups (HUGs).
- Enhance the proactive engagement of patients to improve ability to pay for necessary health care.

Improve life expectancy by identifying and addressing observed gaps

- Utilize quality measures in premature death rates to prioritize efforts that will close the gap on life expectancy variation.
- Improve HEDIS measures that are directly correlated with years of life preserved by increasing screenings for cancer, testing of children for lead and identification of genetic conditions, among others.

Children's Health

WellSpan is committed to fostering the health and well-being of children by ensuring they grow up in safe, stable and nurturing environments. Through strong partnerships and community-based initiatives, WellSpan works to build systems of support that promote healthy development and long-term success. The launch of the Spotlight on Children's Health Initiative in 2022 serves as evidence of WellSpan's commitment to leading the region in addressing the physical, emotional, intellectual and developmental needs of children.

Evidence points to the significance of the first years of life as a precursor of lifelong health and wellness. Adverse childhood experiences, trauma and living in poverty are demonstrated to decrease life expectancy, impact childhood development, increase the risk of chronic conditions and increase the risk of poor health in adulthood. Ensuring our youngest community members have a healthy start is a way to influence the community's health and to ensure our next generation is equipped for success.

WellSpan will engage in focused and impactful opportunities to advance children's health. We understand that the health of a community is dependent upon collaboration with diverse stakeholders. Together, we can strategically partner to build a safe environment for our current neighbors and future generations to thrive.

Ensure children (ages 0-6) get a healthy start and are ready to thrive as they approach kindergarten.

- Actively engage caregivers of patients to ensure more children receive well visits on time and school-required vaccinations.
- Continue to partner with the community to support early childhood education access.
- Ensure school readiness through standardized developmental screening and promotion of early literacy (for example, Read Out and Read program expansion).
- Explore opportunities to support families with uninsured children.
- Partner with the community to address non-medical factors and safety issues for families with young children.

Improve access to pediatric health care resources.

- Simplify access to preventive care for children during primary care visits (for example, RSV vaccine, point of care bilirubin measurements and universal lead testing).
- Increase pediatric online urgent care usage as appropriate.
- Enhance access to resources and education related to breastfeeding.

Non-Medical Factors

Factors such as housing insecurity, food insecurity, transportation barriers and economic hardship continue to impact health outcomes across our region. These non-medical factors, also called social drivers of health (SDoH), not only influence access to care, but also contribute to increased levels of chronic stress, mental health concerns and worsening overall well-being. To date, we have screened over one million patients for housing, food insecurity and transportation challenges across our ambulatory and inpatient settings. These screenings have deepened our understanding of patient and community needs, revealed critical resource gaps and informed the development of more equitable, responsive care models.

Our CHNA demonstrates that roughly 14% of residents across the region have skipped or reduced meals in the past year because of cost, 7% have fallen behind in paying their rent or mortgage and 3% were unable to get to a health care appointment in the last year because of a lack of transportation. Individuals with children under 18, living in poverty and/or experiencing depression

disproportionately report challenges with food, housing and transportation. Our data underscores a consistent pattern: concerns about cost are pervasive and impact non-medical factors such as housing, food and transportation, as well as contribute to delays in care and avoidance of preventive health.

Addressing the intersectionality of medical and non-medical factors is essential to improving long-term health outcomes and the health of our community. Through strategic partnerships, targeted investments and innovative programming, WellSpan is leading efforts to collaborate with community-based organizations to mitigate social barriers and strengthen the overall health and resilience of our communities. WellSpan remains focused on supporting patients in removing non-medical barriers that impact health and delivering more holistic, person-centered support.

Demonstrate improvements in the navigation of patients between care teams and community programs.

- Strengthen HeretoHelpAll social service referral network for patients and community members.
- Demonstrate outcome measures associated with closed loop navigation system to identify opportunities for improvement.

Enhance organizational commitment to non-medical drivers of health such as food, housing and transportation infrastructure in our communities.

- Build capacity and strength of community-wide food, housing and transportation eco-system through partnership, advocacy and program innovation.
- Expand reach of WellSpan's social programs and build community partnerships for projects addressing non-medical factors such as food, housing and transportation insecurity for patients and community members.
- Monitor the impact of organizational investment in food and housing infrastructure.

Address housing insecurity as systemwide health issue.

- Support community-level initiatives addressing housing affordability, access, safety and infrastructure.
- Demonstrate increased investment in community partnerships focused on housing projects.
- Explore innovative housing opportunities for WellSpan to collaborate with community partners for transformational solutions.

Chronic Disease

Chronic diseases are among the leading causes of death and disability in our region and are often driven by preventable risk factors. Health behaviors such as diet, exercise, substance use and sleep are powerful predictors of long-term health — but many community members face barriers to maintaining healthy routines. According to our CHNA, 80% of adults did not engage in regular physical activity, nearly one in four report marijuana use and many residents are not getting enough sleep to support their overall well-being.

The consequences of these trends are clear. Nearly three out of four adults in our region are overweight or obese, and half report at least one recent day of poor physical or mental health — a significant increase compared to previous assessments. Behavioral risk factors like high BMI and substance use are also the leading contributors to chronic conditions such as cancer, cardiovascular disease, diabetes and chronic respiratory illnesses. When reflecting on the leading causes of death in our communities, we understand that chronic

disease contributes to premature death, reduces the longevity of our community and diminishes the quality of life for our community. Reducing the incidence of, and better management of, chronic disease would improve life expectancy.

To address these challenges, WellSpan is committed to improving health and well-being through proactive, people-centered strategies that focus on prevention, early intervention and chronic disease management. Our approach emphasizes both physical and mental wellness, recognizing the strong connection between the two. By empowering individuals to take charge of their health, and by aligning clinical, behavioral and community resources, WellSpan is working to reduce the burden of chronic disease and ensure more people in our region can live longer, healthier lives.

Improve management of chronic conditions for patients and community members to avoid preventable hospitalizations.

- Partner with community-based organizations to promote healthy lifestyles and mental well-being through nutrition, physical activity, sleep hygiene and tobacco cessation.
- Monitor patient data to proactively identify opportunities to improve chronic condition outcomes that correlate with life expectancy.

Enhance education and clinical care coordination to improve chronic disease management

- Explore opportunities to address maternal health through pre-, peri-, postnatal education and chronic disease management.
- Personalize the experience of managing a patient's chronic condition through education and clinical care coordination.

Decrease the number of community members experiencing poor mental health in our community.

- Advance innovative clinical pathway models that improve access and provide evidence-based practices to patients experiencing anxiety and depression.
- Evolve depression monitoring to manage patient progress through functional assessment tools.

Provide consistent access to comprehensive and coordinated treatment services for substance use disorders.

- Maintain commitment to optimal pathways for patients and community members seeking treatment services for substance use disorder.
- Foster collaborations among community providers to reduce the burdens of mental illness and other mental health challenges in our community.

Physical Environment

Environmental factors play a critical role in shaping the health and well-being of individuals and communities across our region. Elements such as air and water quality, access to green spaces and safe, supportive built environments significantly influence chronic disease risk, mental health and overall quality of life. Recognizing this, WellSpan is committed to advancing environmental health efforts and investing in the physical conditions that promote healthy living.

Our priority is clear: to foster a healthier, more resilient community by improving our environmental health and collaborating to strengthen community infrastructure. This work is grounded in a core belief: a healthy environment is not a luxury — it is a necessity for long-term community health. By embedding environmental health within health care and aligning with public health and regional planning efforts, we are helping to build a stronger, healthier future for all who live and work in our region.

Together with our partners, we are creating a physical environment where health can truly flourish — supporting not just clinical outcomes, but the overall well-being of our communities and enhancing the life expectancy of the region.

Advance WellSpan's organizational commitment to environmental health and enhance our reporting of outcomes.

- Expand organizational commitment to planning and measuring progress with development of Sustainability and Strategic Energy Management plans as well as enhanced emissions reporting.
- Strengthen community collaboration for climate risks that pose a health challenge for our community.

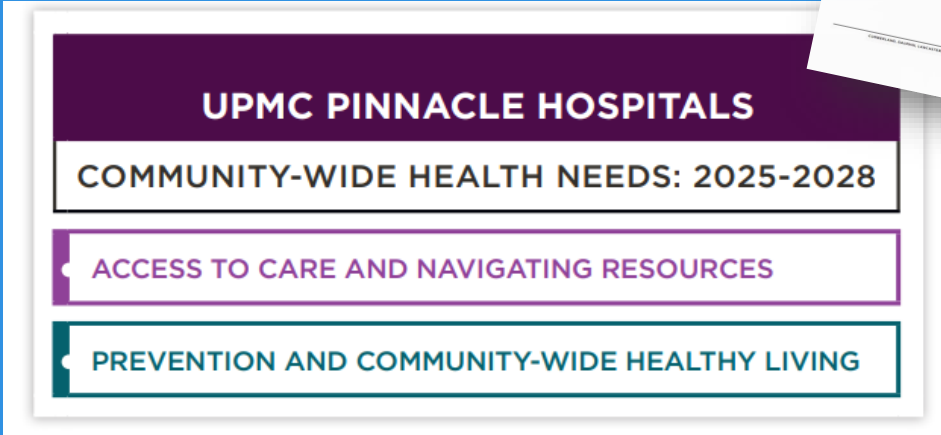
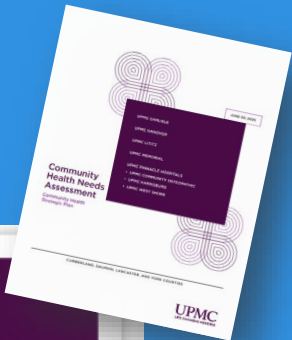
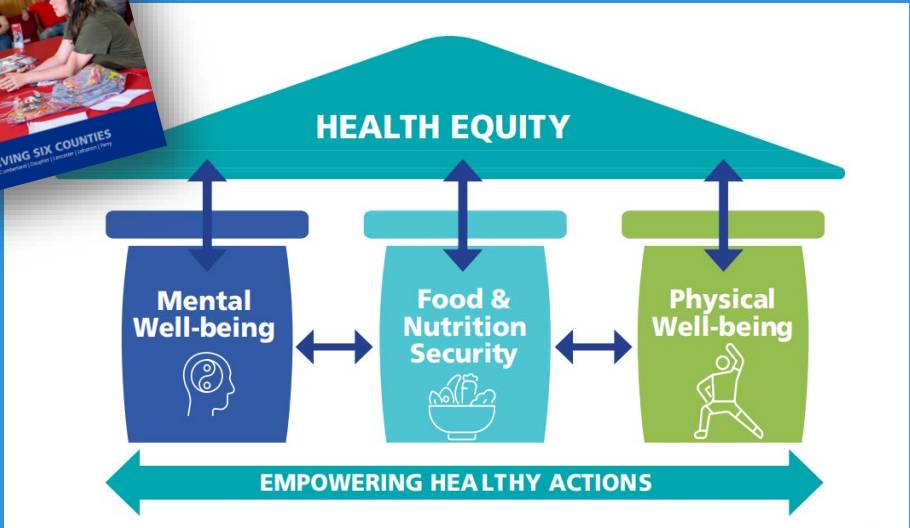
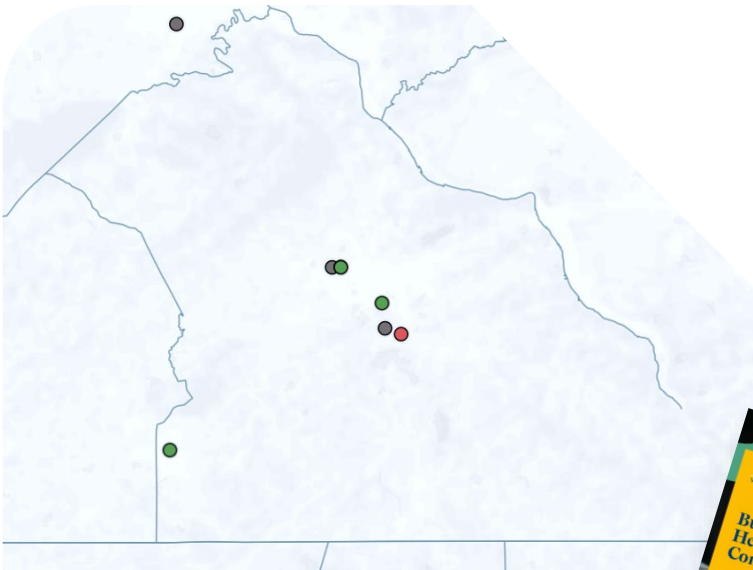
Leverage local community and agricultural assets to invest in local and healthy food.

- Continue to advance the Good Food, Healthy Hospitals initiative by increasing local food purchases and using source reduction methods to reduce food waste.
- Evolve WellSpan's Food as Medicine model to align food insecurity tactics with sustainability practices and local food procurement.

Strengthen our community's infrastructure and built environment through thoughtful investment to support healthy living.

- Leverage grant investments to support development of safe and active community spaces that promote healthy living.
- Engage in and convene community efforts that will advance the economic development of our communities in meaningful ways that reduce the impact of non-medical factors on health.
- Support the advancement of transportation focused infrastructure changes that will improve access to care for the community while simultaneously improving air quality.

Regional Synergy







Audience Q&A

① The Slido app must be installed on every computer you're presenting from

slido

Connect. Collaborate. Discover.



Mission: Find different attendees who match each of the descriptions below. When you find someone, **write their name** in the block. Complete the card and hand it in at the registration table today by 2 p.m. for your chance to win a prize!

Find a someone who...

Has worked at their organization for over 20 years	Regularly enjoys walking, biking or running	Learned a data fact they did not know until today	Knows a health related joke and is willing to share it
Has participated in a collaborative meeting in the past 30 days	Has a favorite health related app	Has enjoyed York County Parks or Rail Trail in the past 6 months	Has presented at a recent conference, local event or meeting
Volunteers for a community organization	Has a unique hobby or interest outside of work	Has exercised in the last 3 days	Can recommend a great health centered podcast

Break
15 mins

Social Drivers of Health: Transportation Study

Laura O'Grady

***VP, Impact & Strategy
United Way of York County***



York County Transportation Study 2024

Improving Access, Affordability, and
Mobility in York County



Our mission is to assist working households on their journey to financial stability by collaboratively and equitably reducing barriers to prosperity

FINANCIAL HARDSHIP IN OUR COMMUNITY

YORK COUNTY

In York County, there are 63,643 households, or 35%, that can't afford the basics. These households fall below the ALICE Threshold, which includes households in poverty and ALICE[®] (Asset Limited, Income Constrained, Employed). Struggling yet hidden in plain sight, ALICE earns above the poverty level, but less than the cost of basics.

9%
IN POVERTY

HOUSEHOLDS
BELOW THE
ALICE THRESHOLD

26%
ALICE

JUST TO GET TO WORK...





Early Childhood Ed.

Accessibility and affordability for high-quality early learning.



Financial Wellness

Because every dollar matters.



Transportation

To get to work and maintain employment.



Community

For a thriving York County.

Projected 2025 Transportation Investments

\$400
K

Transportation access is critical for economic mobility and quality of life in York County.

WHY

The Goals of the Study



- Identify key strengths and challenges in our transportation ecosystem
- Gather community input to share recommendations
- Develop actionable strategies to improve accessibility

Methodology



- Reviewed Existing Reports & Data
- Geospatial & Mapping Analysis
- Community Engagement & Stakeholder Input
 - Public Survey
 - Street Interviews
 - Stakeholder Interviews
 - Steering Committee

Steering Committee

- Alex Hernandez-Siegel, Director of the Office of Student Diversity and Inclusion, York College of Pennsylvania
- Brian Grimm, President, United Way of York County
- Daysha Illarza, Impact Manager, United Way of York County
- David Gonzalez, Director of Economic Initiatives, York County Economic Alliance
- Demietra Middleton, HR Business Services Manager, Harley-Davidson
- Eric Menzer, President, York Revolution
- Eric Saunders, Executive Director, New Hope Ministries
- Jim Sponaugle, Executive Vice President and Chief People Officer, Utz
- Jules Tolbert, Board Chair, York County Economic Alliance and United Way of York County
- Ken Seaman, Vice President Human Resources, Wolfgang Confectioners
- Kristy Fasano, Vice President and Chief Operating Officer, Bailey Coach
- Laura O'Grady, Vice President of Impact and Strategy, United Way of York County
- Laura Heilman, Mobility Education Specialist, Commute PA
- Mike Pritchard, Assistant Director, York County Planning Commission
- Raymond Rosen, Board Member, rabbittransit
- Rich Farr, Executive Director, rabbittransit
- Scott Burford, Vice President County Commissioner
- Silas Chamberlin, Chief Strategy Officer, York County Economic Alliance
- Samira Sankaran, Impact Associate, United Way of York County
- Sherry Welsh, Central PA Transportation Authority
- Tammy Ballard, ES3
- TaTyana Abreu, VITA and Community Engagement Manager, United Way of York County
- Tim Staub, Assistant Vice President of HRG, Municipal Planning Engineer

Thank you to all the members of the public who took the public survey and the community partners who shared the link to get over 490 resident responses.

United Way of York County (UWYC), founded over a hundred years ago as the York Welfare Federation, is committed to improving the lives of York County residents by addressing immediate needs and driving lasting, meaningful change. From our early days of supporting seventeen local agencies, we have grown into a trusted partner for both public and private organizations, dedicated to tackling complex community challenges. Today, we focus on helping working families manage basic living expenses, enhancing their financial stability and long-term resilience. Learn more at unitedway-york.org

1

Key Finding: Strengths





STRENGTHS

- **Strong local focus on transportation**
 - Over 30 organizations actively working on transportation access in York County.
 - Collaboration between nonprofits, transit providers, employers, and local government.
- **Public transit investments and innovations**
 - Rabbittransit programs improving access
86% of low- and moderate-income residents live near a transit stop.
- **Growing multimodal options (biking, walking, EVs)**
 - 28.7% increase in bus riders bringing bicycles (2020-2023).
 - Expansion of bike lanes, pedestrian infrastructure, and trails like the Heritage Rail Trail.

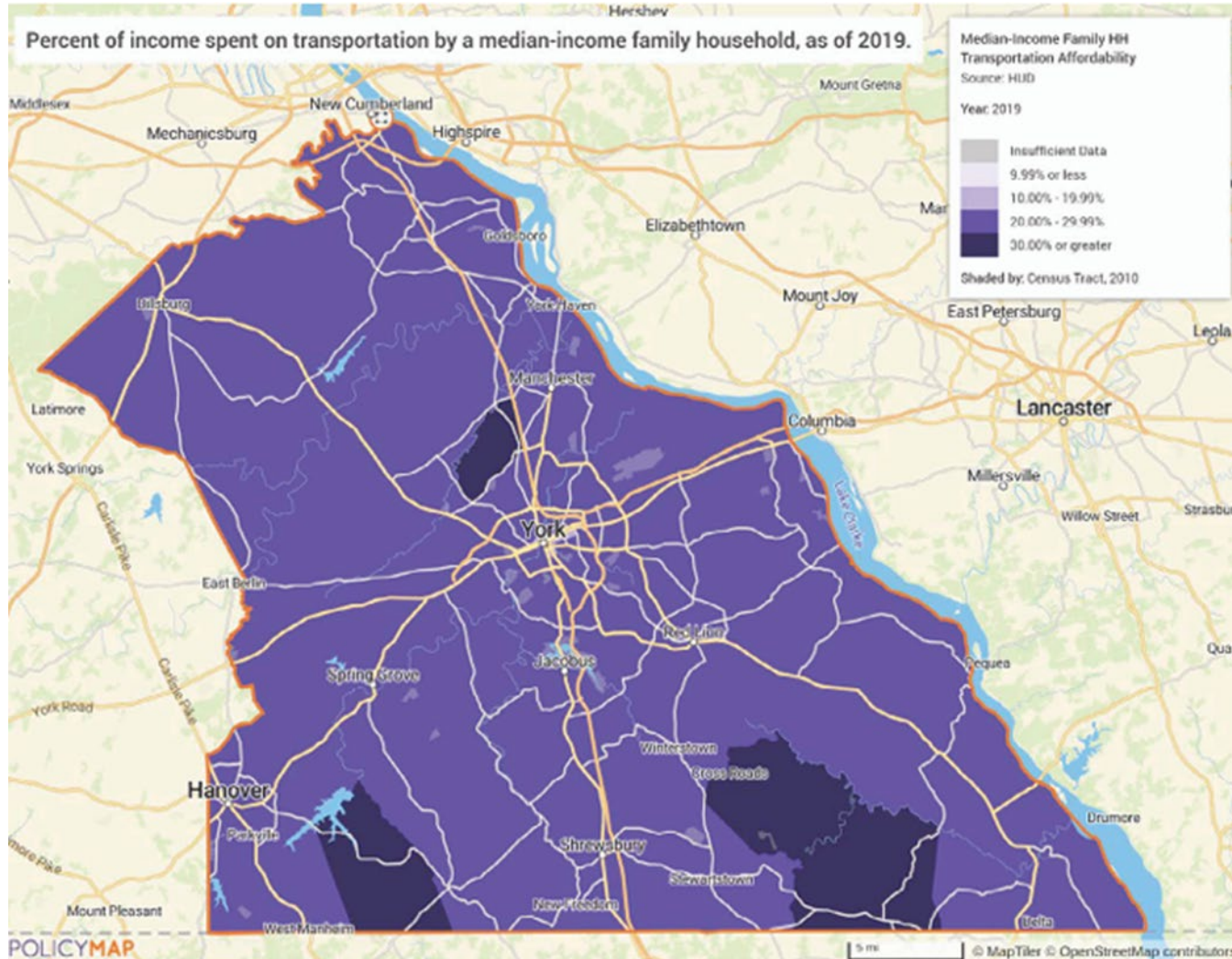
2 Key Finding: Challenges



CHALLENGES

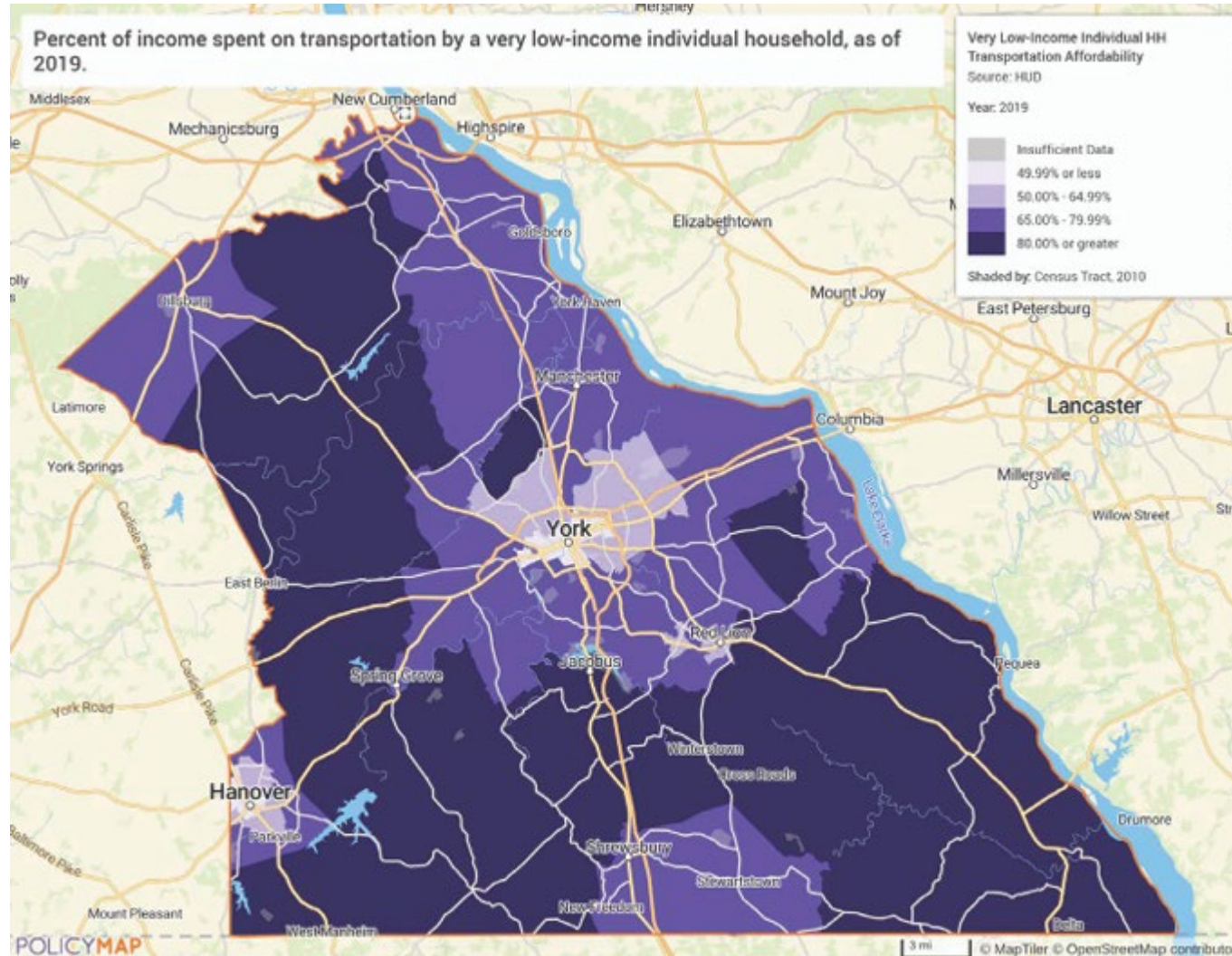
- **Personal vehicle access and affordability**
 - Over 10,000 households lack access to a personal vehicle
 - Disparity between residents with multiple vehicles and residents with no vehicles
- **Public transit limitations**
 - Only 1% of workers in York County use public transit to commute
 - Long travel times & limited bus frequency
 - 84% of York County residents live in “car dependent areas”
 - Public transit workforce shortages
- **Economic Development Barriers**
 - Many job centers are located far from transit routes
 - Land use is incompatible with transportation
 - Employer transportation support is limited

Transportation Affordability: Median-Income Residents

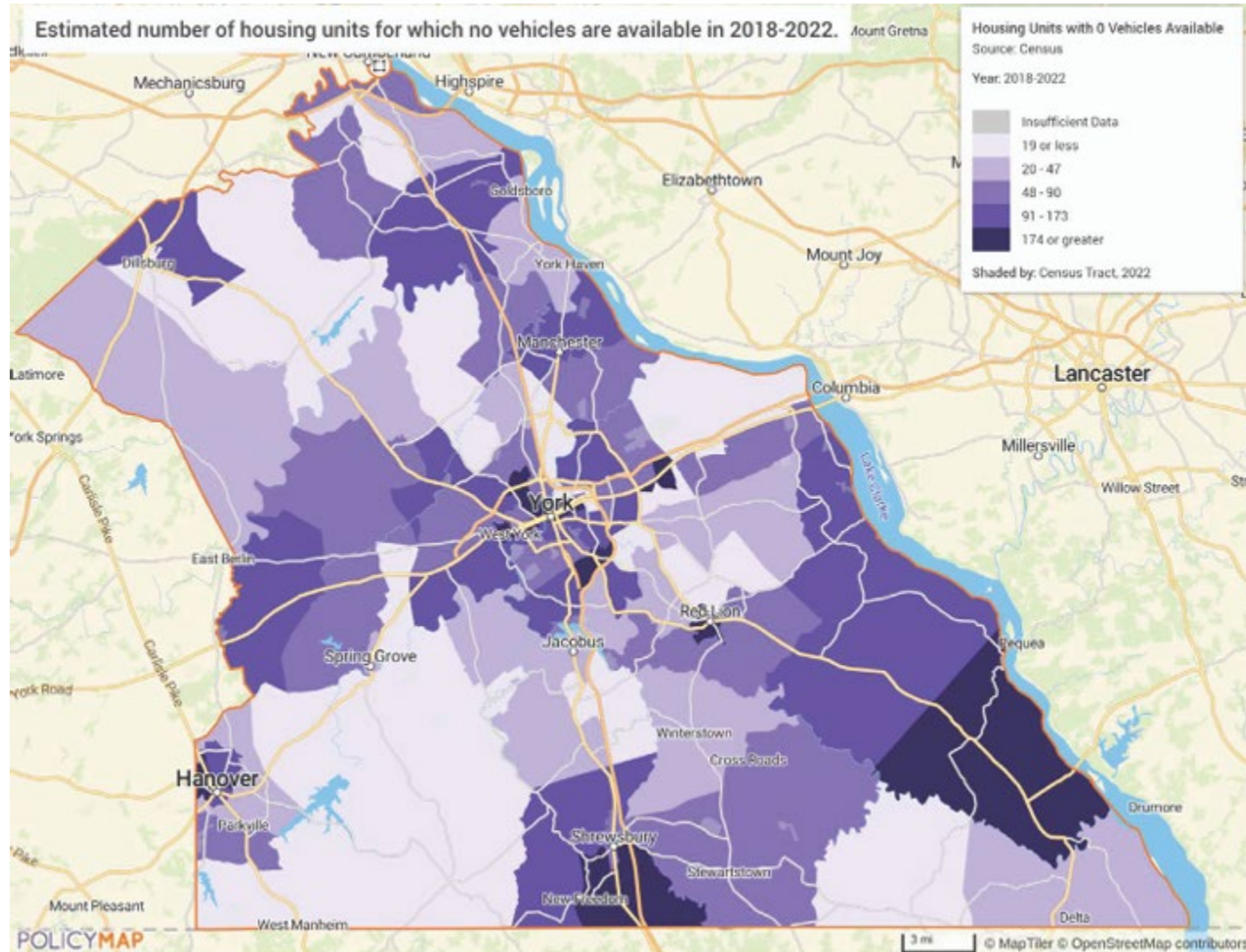


Source: Fourth Economy Analysis of ACS 5-Year Estimates, 2018-2022

Transportation Affordability: Very Low-Income Residents



Household units with no vehicles



3 Recommendations



Short Term Recommendations

- Direct Support
- Employer-led solutions
- Carpooling & ride services

Medium Term Recommendations

- Expand public transit
- Invest in bike & pedestrian friendly infrastructure
- Land use planning

Long Term Vision

- Regional connectivity
- Sustainable funding
- Cross-sector collaboration



SHORT TERM

- **Direct Support: Reduce transportation costs and barriers**
 - UWYC Ride United Micro Grant – *140K Distributed to 15 organizations*
- **Direct Ride Service & Carpooling: Encouraging shared & cost-effective mobility**
 - Expand employer sponsored shuttle programs
 - Implement ride-matching services to jobs, medical care, childcare
 - UWYC Transportation Innovation Grant – *Applications being reviewed*
- **Galvanize Employer Engagement**
 - Incentivize businesses to provide transit benefits
 - Encourage flexible work schedules & telecommuting
 - Strengthen employer partnerships with transit agencies to align bus schedules with shift work



MEDIUM TERM

- **Public Transit Expansions & Adjustment**
 - Invest in high-intensity mobility corridors
 - Expand Stop Hopper & on-demand transit services
- **Expand Active Transportation Infrastructure**
 - Develop safer bike lanes & pedestrian pathways
 - Reintroduce a countywide bikeshare program
 - Improve crosswalks, sidewalks & trail connectivity
- **Land Use & Transportation Planning**
 - Encourage mixed-use zoning
 - Align new job centers with existing public transit networks
 - Advocate for policies that promote transit-oriented development



LONG TERM

- **Identify Sustainable Funding for Transportation Solutions**
 - Advocate for increased state & federal funding
 - Explore dedicated local funding sources
 - Secure long-term grants & philanthropic support
 - Leverage innovative financing models
- **Continue Ongoing Cross-Sector Collaboration**
 - Strengthen partnerships between government, nonprofits, employers, and transit agencies
 - Develop a Transportation Access Coalition (TAC)
 - Engage Large Employers
 - Encourage regional planning coordination

4 Next Steps



Transportation Access Coalition (TAC)

Members:

Laura Heilman – Commute PA

Rich Farr – rabbittransit

Mike Pritchard – York County Planning Commission

Jennifer Johnson – York County Libraries

Tami Ballard – ES3

Tim Staub – HRG

David Gonzales – YCEA

Silas Chamberlin – YCEA

Julia Kint – WellSpan

Eric Saunders – New Hope Ministries

Cathy Bollinger – YCCF

Robin Shearer – JRA Collaboration

Kelly Blechertas – York County Planning Commission

Jules Tolbert – United Way of York County

Rick Roth – New Hope Ministries

Sue Fornicola – New Hope Ministries



Direct Service

Lead: United Way of York County
and Funded Impact Partners



Municipal Outreach

Lead: David Gonzales & Cathy
Bollinger



Business Engagement

Lead: Tammy Ballard & Laura
Heilman



Mapping Informal Transportation

Lead: Jennifer Johnson

Short-Term Recommendations

- ✓ Direct Support
- ✓ Employer-led solutions
- ✓ Carpooling & ride services

Medium-Term Recommendations

- Expand public transit
- ✓ Invest in bike & pedestrian friendly infrastructure
- ✓ Land use planning

Long-Term Vision

- Regional connectivity
- Sustainable funding
- ✓ Cross-sector collaboration

Join us!

- Connect your business or organization to this work
- Help us advocate for long-term improvements



Plan Coordination

- York County Economic Action Plan (YCEA)
- Transportation Improvement Plan (YCPC)
- York County Age-Friendly Action Plan (YCCF)
- York County Comprehensive Plan (YCPC)
- Community in Motion (York-Adams Coordinated Plan)



Questions?

Website: <https://www.unitedway-york.org/transportation-programs>

Email: logrady@unitedway-York.org





Table Discussions

Status of York County Healthcare

Karen Wastler

***VP, Operations, Community &
Ambulatory
UPMC***



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Volunteers for a community organization	Has a unique hobby or interest outside of work	Has exercised in the last 3 days	Can recommend a great health centered podcast

Lunch



Status of York County Healthcare

Jenny Englerth

***President and CEO
Family First Health***



Connecting the Dots: Outdoor Recreation & Health/Wellness



***Silas Chamberlin,
Moderator***

***York County
Economic Alliance***



***Sandy Gladfelter,
WellSpan Health***



***Peter Miele,
Susquehanna
National Heritage
Area***



***Brandon Hoover,
Pennsylvania
DCNR***

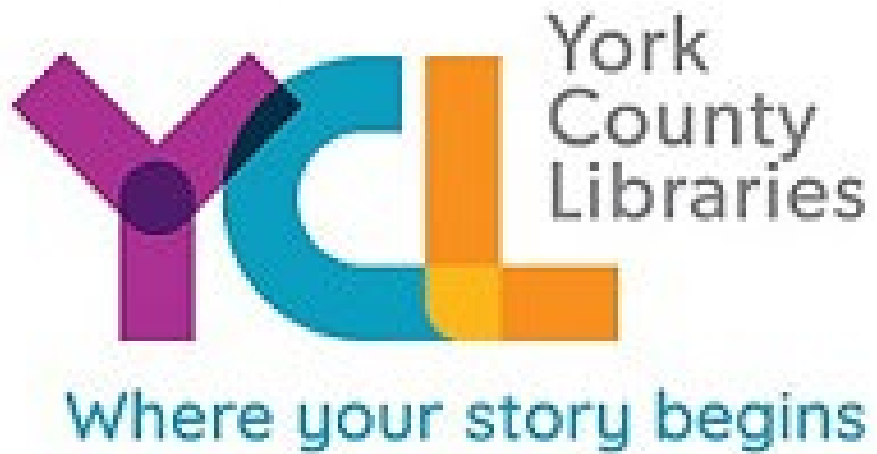


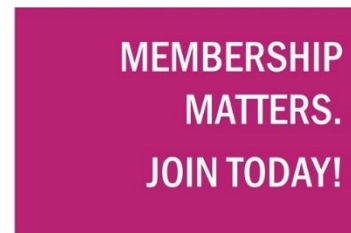
WELLSPAN[®]
HEALTH

Get Outdoors



Community Collaboration





Awards/Recognition







Skyscraper

Stadium

Transit Station

Water Tower

09

Family time







Started at 1-year old, just completed his 200th hike in 2022





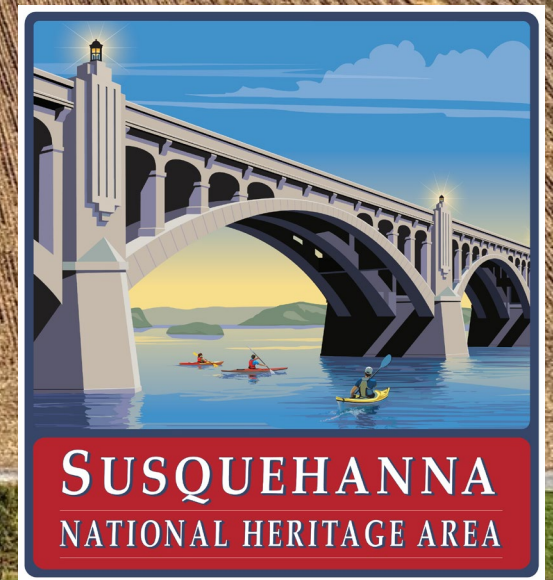
Questions?

Contact Sandy Gladfelter
sgladfelter4@wellspan.org

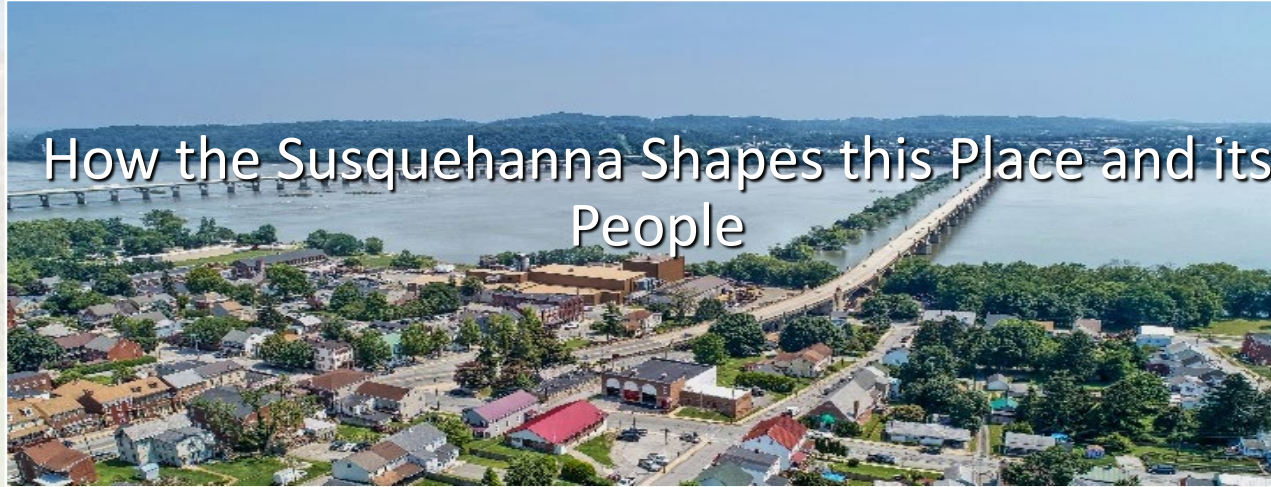


Susquehanna Discovery Center & Heritage Park at the Historic Mifflin Farm

A New Gateway Visitor Destination Celebrating
the Unique Stories of America's 55th National Heritage Area



How the Susquehanna Shapes this Place and its People



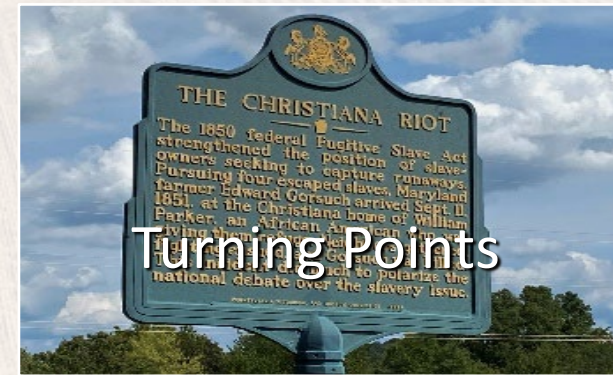
Native Landscapes



Creating an American Identity



Turning Points





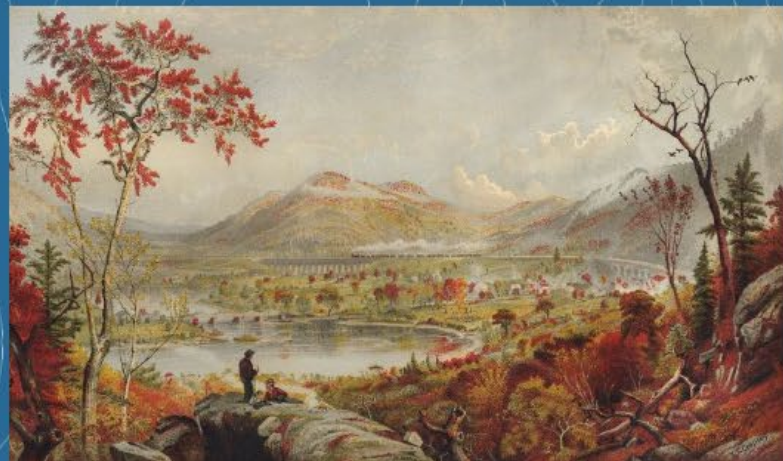
NATIONAL
UNDERGROUND RAILROAD
NETWORK TO FREEDOM







Susquehanna River Art Museum

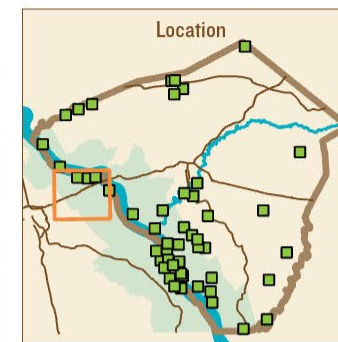
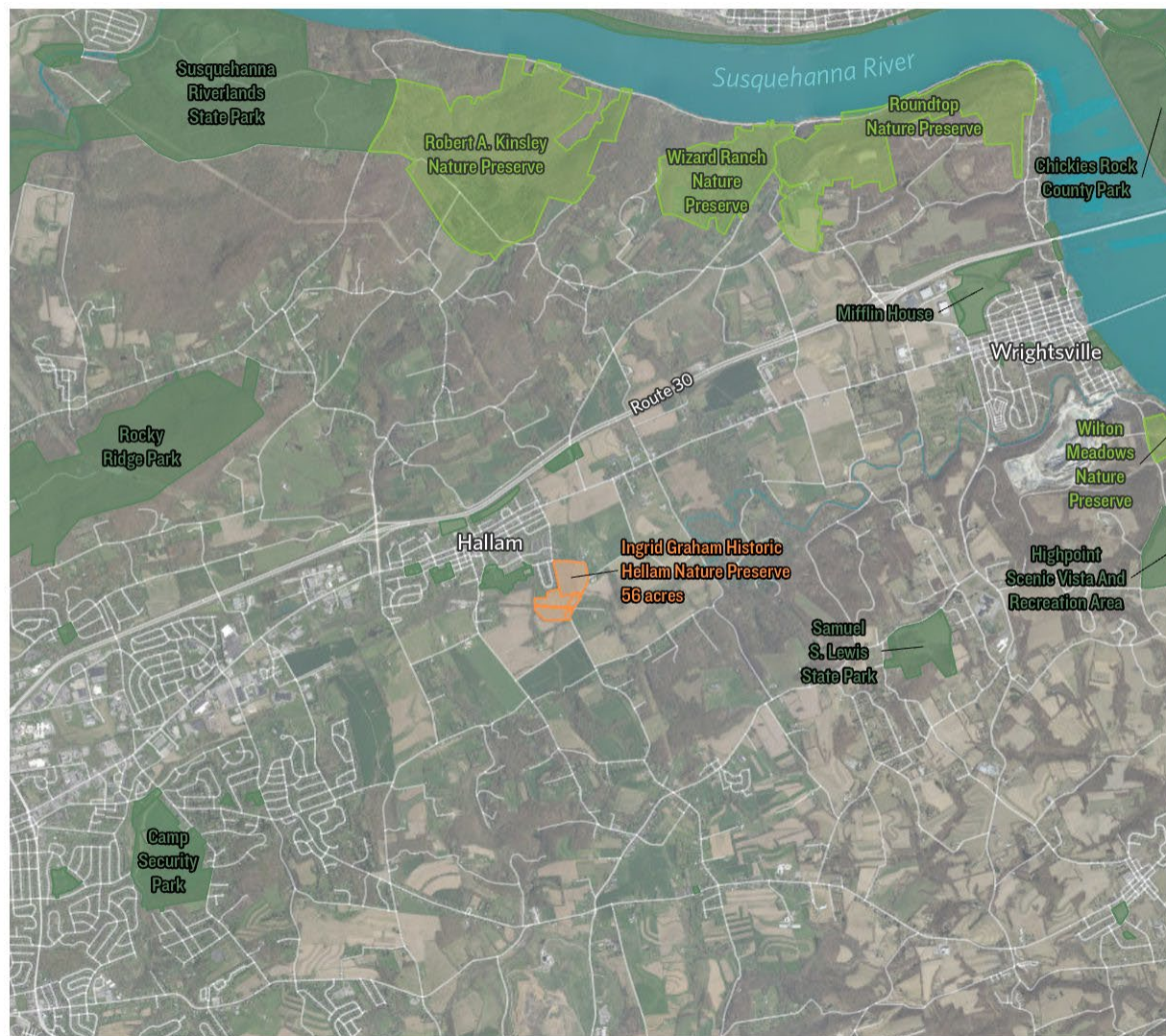


- Celebrating the creative legacy of the art and artists inspired by the Susquehanna River Valley.
- Through its collections and exhibitions the Museum will examine the Susquehanna River landscape, interpreted through various artistic styles, movements, media from 1600 to today



Ingrid Graham Historic Hellam Nature Preserve Acquisition Map

LANCASTER
CONSERVANCY



Ingrid Graham Historic Hellam Nature Preserve

56 total acres

47 acres, Hellam Township, York County

9 acres, Hallam Borough, York County


Legend

- Public Road
- Acquisition Tract
- Conservancy Preserve
- External Open Space
- Stream



0 1 2
Miles

Map date 2/13/2025. © Lancaster Conservancy 2025. Data credits: PEMA, USGS, WeConservePA, York County. Disclaimer: Map is for graphical purposes only. It does not represent a legal survey. While every effort has been made to ensure the data are accurate and reliable, the Lancaster Conservancy cannot assume liability for any damages caused by any errors or omissions in the data, nor as a result of the failure of the data to function on a particular system. The Lancaster Conservancy makes no warranty, expressed or implied, nor does the fact of distribution constitute such a warranty.

An aerial photograph of a large dam and reservoir. The dam is a long, straight structure with many small spillways, stretching across a wide river. The water in the reservoir is a deep blue. In the foreground, there are green fields, a small town with houses, and a large industrial building with a green roof and two tall silos. The text is overlaid on a semi-transparent green rectangle in the center of the image.

This project offers a unique and innovative opportunity to embrace historic preservation, inclusive storytelling, artistic appreciation, economic development, outdoor recreation, and watershed protection across one cohesive, preserved, historic landscape.



Pennsylvania

**Department of Conservation
and Natural Resources**

Outdoor Places, Shared Spaces

Pennsylvania's Statewide Comprehensive
Outdoor Recreation Plan (SCORP)

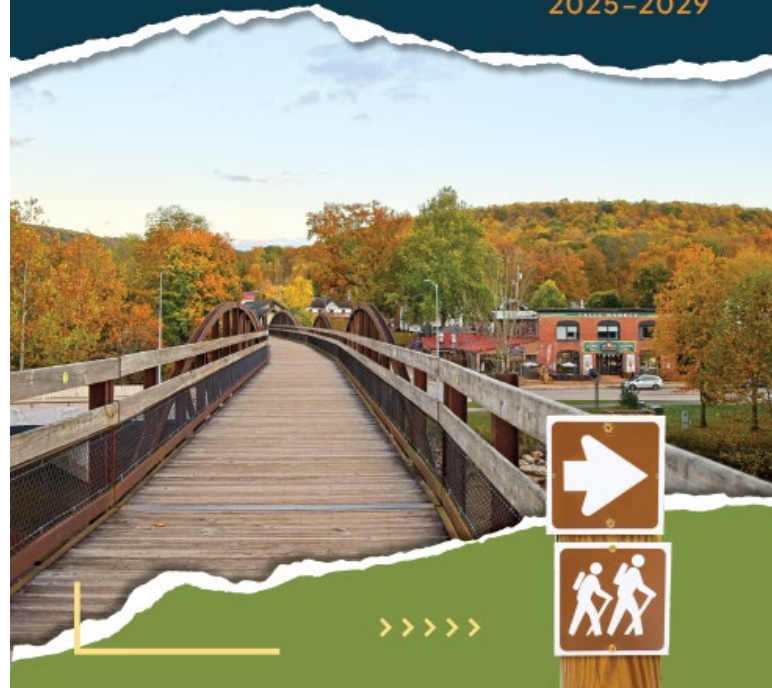


OUTDOOR PLACES, SHARED SPACES

Pennsylvania's 2025-2029 Statewide
Comprehensive Outdoor Recreation Plan



PENNSYLVANIA Land and Water Trail Network Strategic Plan 2025-2029



- Established in the 1960s as a tool to guide the development and management of outdoor recreation resources
- LWCF (1964); Dingell Act (2019); Great American Outdoors Act (2020)
- For Pennsylvania this means approximately \$12M annually
- Federal Recreational Trails Program requires states to have a trail plan. Pennsylvania Recreational Trails Program is ~\$2 million annually.
- These plans guide DCNR's Community Conservation and Partnership Grant Program

Overview of SCORP



Promoting Community and Economic Development



Advancing Health and Wellness



Supporting Access and Inclusion



Addressing Infrastructure and Maintenance



Progressing on Sustainability and Climate

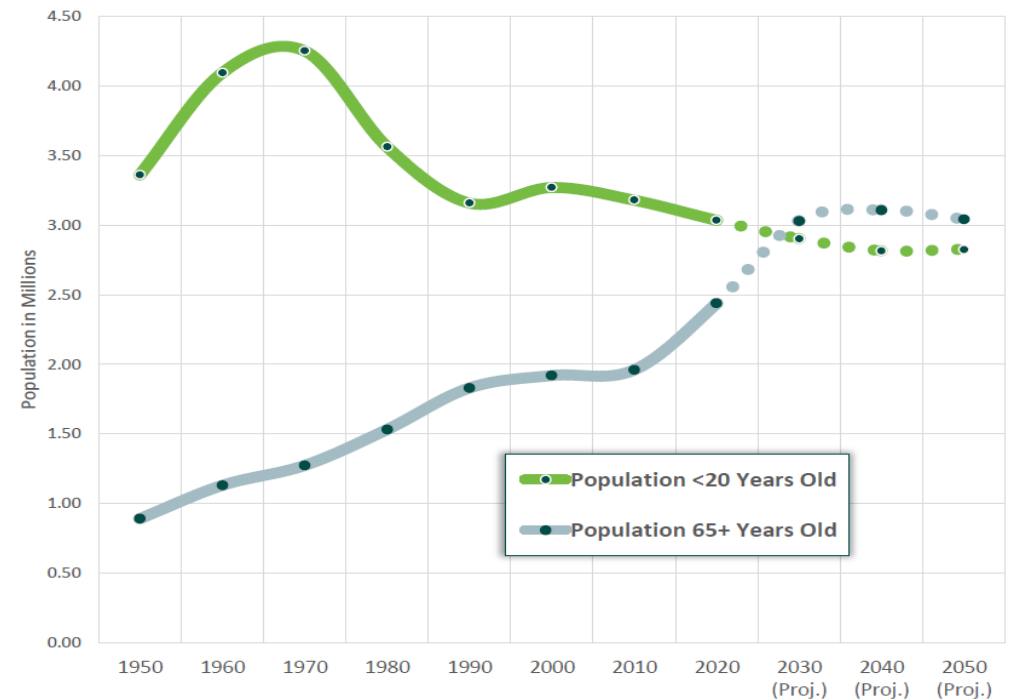
- 40-member Technical Advisory Committee
- Pennsylvania Trails Advisory Committee
- 12 months of research
 - 4 Surveys
 - 2 focus groups
 - 2 geo spatial case studies in York and Centre Counties
- 1 month Public Comment period
- Approval/Adoption by the Governor's Office and National Parks Service July 2025

Commonwealth Demographic Trends



- In 1965 (first ever SCORP), PA population was 11.3 million. Now close to 13 million.
- Population shifts
 - Southeastern Shift
 - Urban Shift & Rural Decline
 - Growth from outside the state (low birth rates)
 - Becoming more diverse
- Population is growing near State Forests (970k in 1960; 1.3m in 2020)
- Parity by 2030 between those who are less than 20yrs and 65+ (~20% for each)

Number of Youth and Senior Citizens in Pennsylvania, 1950 to 2050 (Projected)



What prevents people...



1) Other than sitting through this presentation (time), what prevents you from outdoor recreation?

2) What do people experience as the top barriers to outdoor recreation?

	All	White	Black/African American	Latino	Asian	Men	Women
Nothing prevents me from participating in outdoor recreation	34.7%	37.28%	24.42%	15.53%	14.74%	43.43%	30.48%
Finding places that are not crowded	25.3%	25.98%	23.26%	36.89%	31.58%	25.25%	27.68%
Environmental hazards	20.9%	21.64%	23.26%	33.01%	34.74%	13.37%	29.64%
Nobody to go with	19.2%	19.50%	27.91%	29.13%	22.11%	15.69%	23.01%
Cost to participate	13.6%	13.69%	22.09%	16.50%	18.95%	12.56%	15.24%
Health limitations	10.5%	11.18%	8.14%	9.71%	4.21%	8.63%	13.24%
I do not have places to participate in outdoor recreation near me	10.4%	10.52%	20.93%	14.56%	14.74%	13.58%	8.27%
Transportation barriers	8.7%	8.61%	19.77%	21.36%	33.68%	8.29%	9.37%
Limited skill or confidence to participate in an activity	8.7%	8.86%	18.60%	17.48%	15.79%	4.20%	13.40%
Safety concerns	7.3%	7.15%	26.74%	16.50%	11.58%	3.58%	11.37%
I don't know where to go for outdoor recreation	5.7%	5.72%	13.95%	13.59%	13.68%	4.61%	7.14%
No interest / I don't want to participate in outdoor recreation	2.6%	0.18%	1.16%	0%	1.05%	0.17%	0.23%
I don't feel welcomed in outdoor recreation spaces or activities	1.8%	1.59%	12.79%	7.77%	3.16%	1.60%	1.90%
Don't know / Not sure	1.6%	1.55%	1.16%	1.94%	0%	1.77%	1.30%

Advancing Health & Wellness



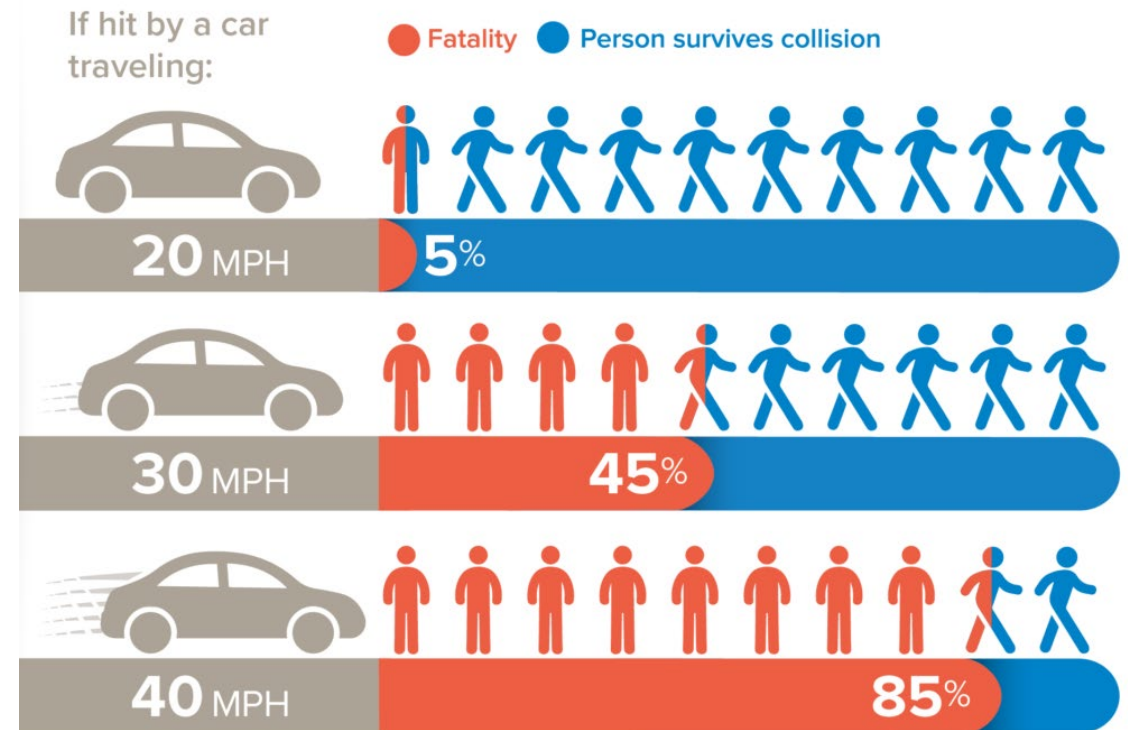
“Organisms, when housed in unfit habitats, undergo social, psychological, and physical breakdowns.”

- E.O. Wilson

Goal 1: Prioritize safe access to recreation spaces and facilities by creating walking and biking networks that support healthy and active lifestyles for all Pennsylvanians



- A) Work with 45 new local municipalities to adopt Active Transportation plans
- B) Build and connect Pennsylvania's major greenways and smaller trail networks to local parks and communities.
- C) Expand recreation in priority communities with unique open access strategies in schools, universities, public gardens and more to achieve the goal of having a park within a 10-minute walk of every Pennsylvanian.



National Traffic Safety Board (2017) Reducing Speeding-Related Crashes Involving Passenger Vehicles. Available from: <https://www.nts.gov/safety/safety-studies/Documents/SS1701.pdf>

Goal 2: Promote outdoor recreation as an essential part of the physical and mental healthcare system



- A) Connect and resource mental health care providers with parks professionals and professional development opportunities.
- B) Pilot data collection associated with access to recreation and mental health outcomes
- C) Conduct mobile health clinics and targeted health events in local parks and recreation spaces to educate about the health benefits of recreation.
- D) Expand collaborative recreation programming with health care providers such as residential nursing home facilities, local hospitals, recovery centers, physical therapy, and Universities.



Goal 3: Create environments where everyone feels safe to recreate



A) Create safer community recreation spaces with enhanced lighting, sightlines, appropriate speeds, and passive recreation opportunities.

B) Expand education and prevention measures to reduce exposure to environmental hazards, like ticks, mosquitos, heat, and sun in recreation spaces.

C) Support safe water ways by investing in pool and natural water access, swim education, and water safety training.

D) Create gender, racial, and culturally inclusive recreation spaces with welcoming design

E) Promote safe parks, trails, and waterways through anti-discrimination education and transparent reporting procedures





Supporting Accessible & Inclusive Recreation



“When we create a beloved community, environments that are anti-racist and inclusive, it need not matter whether those spaces are diverse. What matters is that should difference enter the world of beloved community it can find a place of welcome, a place to belong.”

- Bell Hooks

Supporting Access and Inclusion



- 10.8% of population is African-American, a **3% increase** from the 2010 census
- 8.1% of the population is Latino; a **45.8% increase** from 2010 census
- 3.6% of the population is Asian; a **46.2% increase** from 2010 census
- 77% of the population is white; a **6.3% decline** from the 2010 census
- 8% of the population is foreign born; 55% naturalized citizen and 45% not a U.S. citizen
- Approximately 13% of Pennsylvanians speak a language other than English at home, with Spanish being the primary (6%), Asian or Pacific Islander languages (2.2%), and German or West Germanic (1%)



17% of recreation enthusiast respondents indicated they experience a disability or chronic health condition

Goal 1: Create safe access to recreation for all skill levels, abilities, and experiences

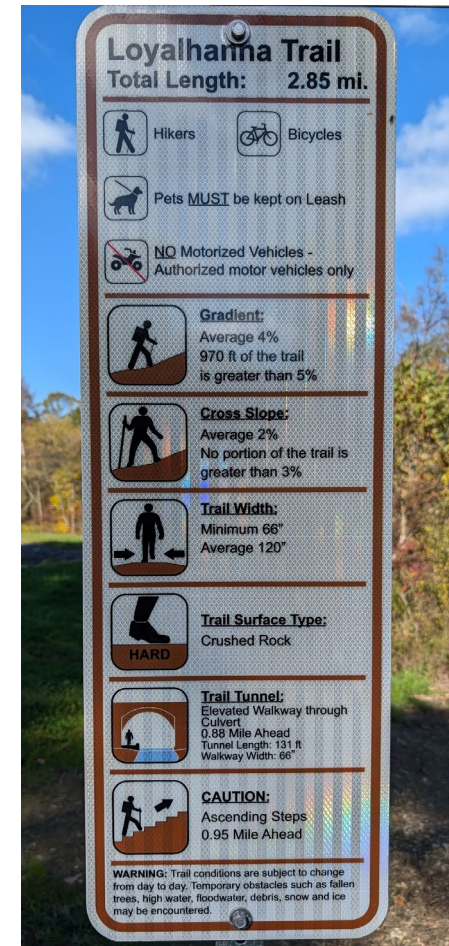


A) Develop progressive skill trail systems for walking, hiking, and biking in local parks, state parks, and other outdoor recreation spaces.

B) Establish and implement a standard trail communication system to help users more easily determine level of difficulty

C) Improve information wayfinding signage and cell/GPS reception for improved navigation and safe recreation

D) Lower barriers for beginners by supporting local parks, clubs, and organizations to create "try-it" opportunities, gear loaner programs, and enhance communication about social networks in outdoor recreation spaces.



Goal 2: Create greater recreation opportunities for aging populations and people who experience disabilities or chronic health conditions



- A) Increase availability of passive and adaptive recreation facilities on water ways, hiking trails, walking paths, local parks and playgrounds, and other recreation facilities.
- B) Support the development of outdoor sensory opportunities at parks, trails, long-term care facilities, and environmental centers.
- C) Engage with disability and adaptive needs community to facilitate recreation infrastructure and training for recreation providers.
- D) Expand mass transit connections to local parks, state parks, waterways and public lands
- E) Create an accessibility field guide for aging recreation users or those experiencing disabilities or chronic conditions



Goal 3: Strengthen relationships and support systems amongst historically marginalized and underrepresented communities and the outdoors



A) Increase grant outreach, writing support, management capacity and technical assistance for projects supporting underrepresented communities.

B) Enhance partnerships with historically marginalized communities by supporting and engaging with cultural events, art integration, diverse recreational programming, environmental justice, workforce development, and equitable access.

C) Broaden storytelling of ancestral and multi-cultural relationship to land, conservation, and recreation

D) Translate more recreation materials into multiple languages



Vaccines: Innovation & Local Efforts



***Monica Kruger,
Moderator***

***City of York,
Bureau of Health***



***Dr. William Calo,
Penn State College
of Medicine***



***Dr. Chris Russo,
WellSpan Health***

General vaccine attitudes and the importance of provider recommendation

William A. Calo, PhD, JD
Associate Professor



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Potential conflict of interest statement

Dr. Calo manages a research grant from Merck for an HPV vaccine communication study.

Paid speaker for Roche for a non-vaccine product.



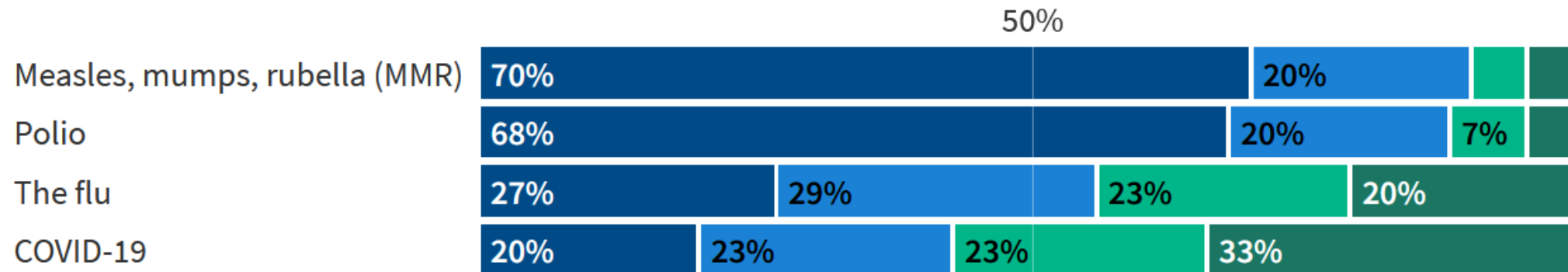
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Parents' Views of Vaccine Importance

How important do you think it is for children in your community to be vaccinated for each of the following?

■ Very important ■ Somewhat important ■ Not too important ■ Not at all important



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)



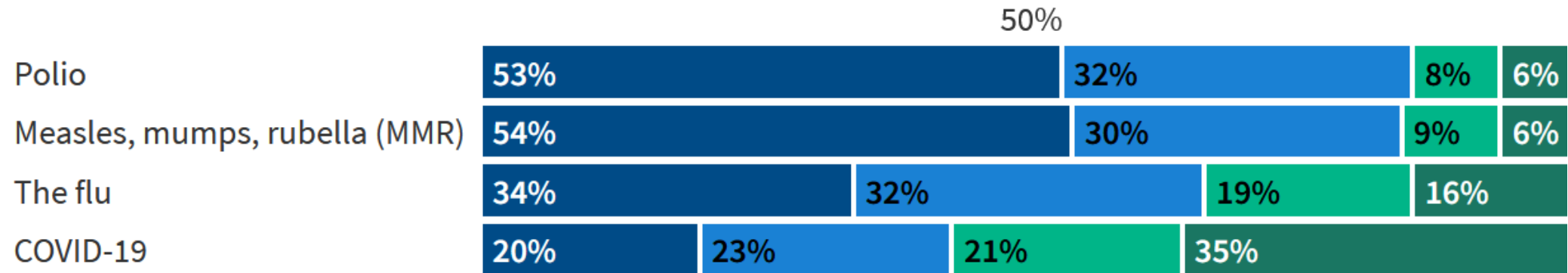
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Parents' Views of Vaccine Safety

How confident are you, if at all, that vaccines for each of the following are safe for children?

■ Very confident ■ Somewhat confident ■ Not too confident ■ Not at all confident



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)

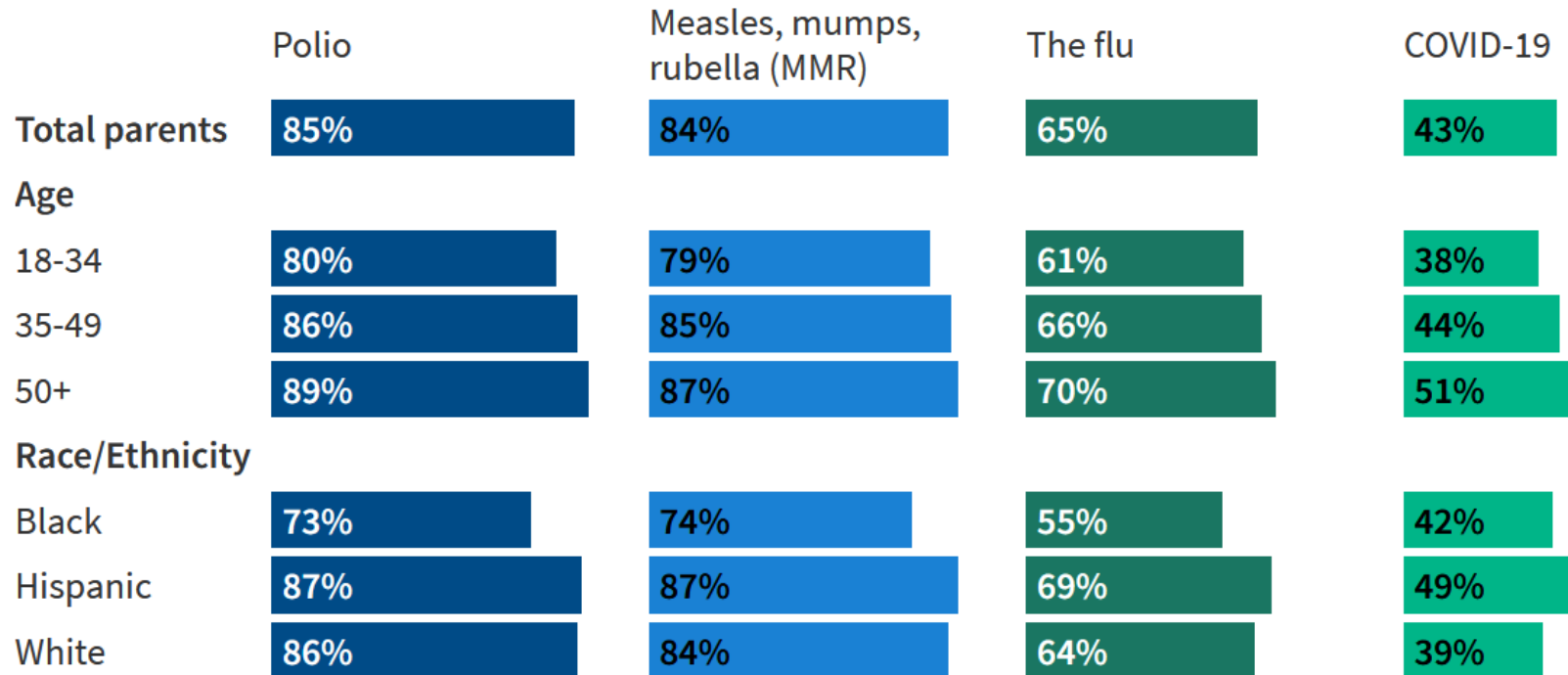


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Parents' Views of Vaccine Safety by Age and Race/Ethnicity

Percent who say they are **very** or **somewhat confident** that vaccines for each of the following are safe for children:



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)

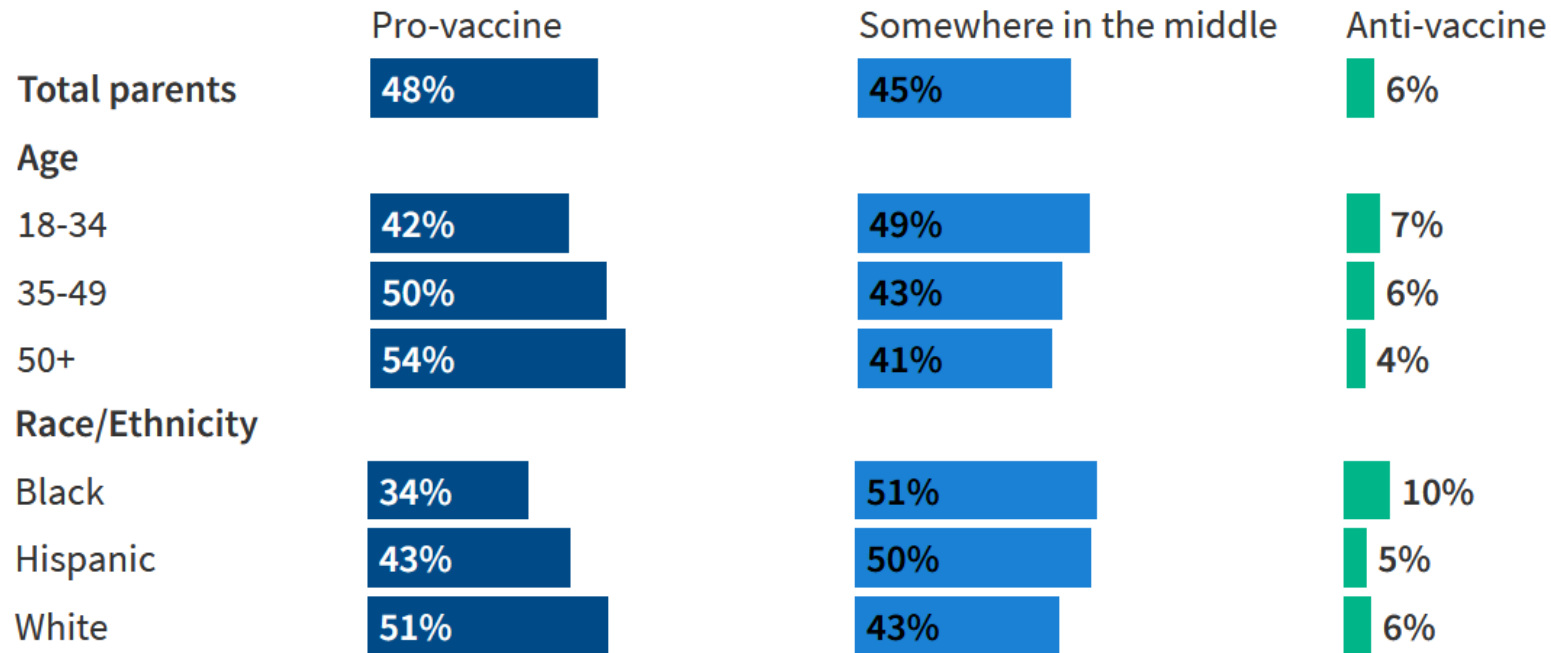


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How Parents Identify Themselves When It Comes to Vaccine Views

Do you consider yourself to be pro-vaccine, anti-vaccine, or somewhere in the middle?



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)



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Skipping and Delaying Childhood Vaccines

Not counting COVID-19 or flu vaccines, have you ever skipped or delayed a recommended childhood vaccine for any of your children, or have you always kept all your children up to date with recommended childhood vaccines like MMR and polio?

■ Have delayed or skipped some vaccines

■ Kept children up to date with recommended childhood vaccines

Total parents



Age

18-34



35-49



50+



Race/Ethnicity

Black



Hispanic



White



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)

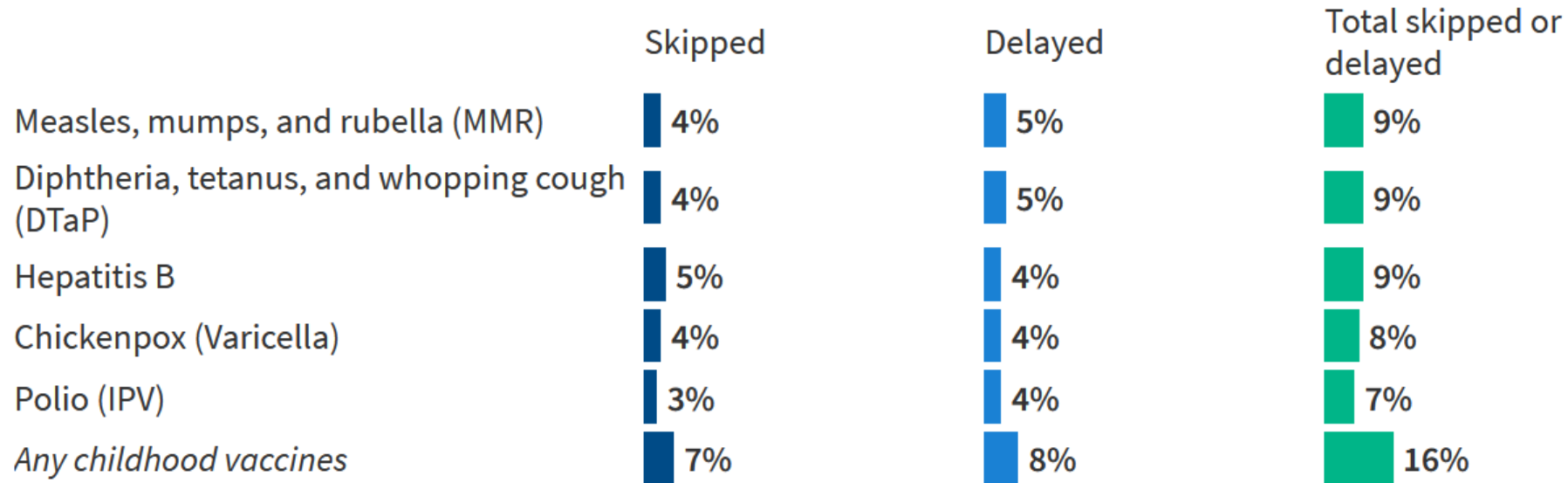


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Skipping and Delaying Childhood Vaccines

Percent who have skipped or delayed each of the following vaccines for at least one of their children:



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)



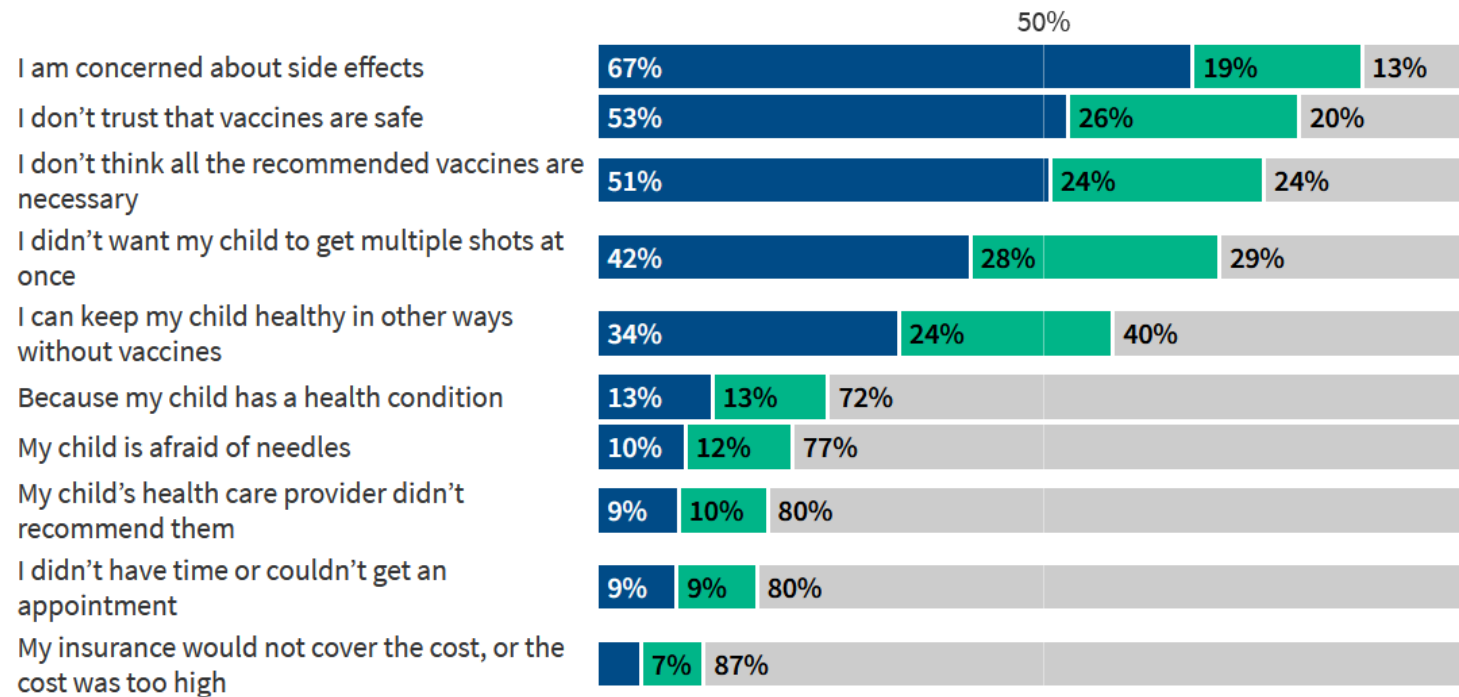
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Skipping and Delaying Childhood Vaccines - Reasons

Is each of the following a major reason, minor reason, or not a reason why you delayed or skipped some vaccines for your child or children?

■ Major reason ■ Minor reason ■ Not a reason



Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)



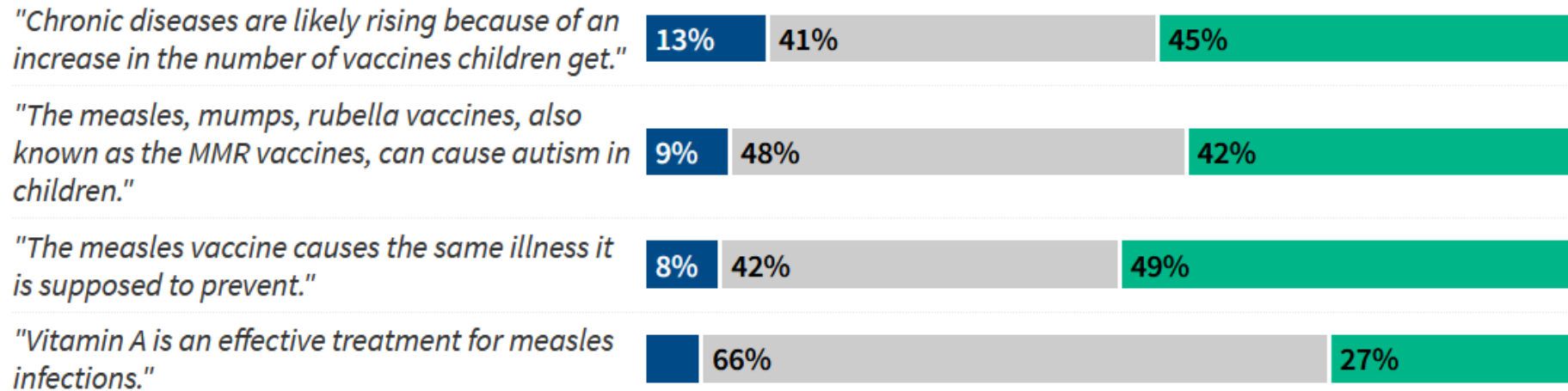
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Belief in False and Misleading Claims About Measles and Vaccines

Do you think each of the following statements is true, false, or do you not know enough to say?

■ True ■ Don't know enough to say ■ False



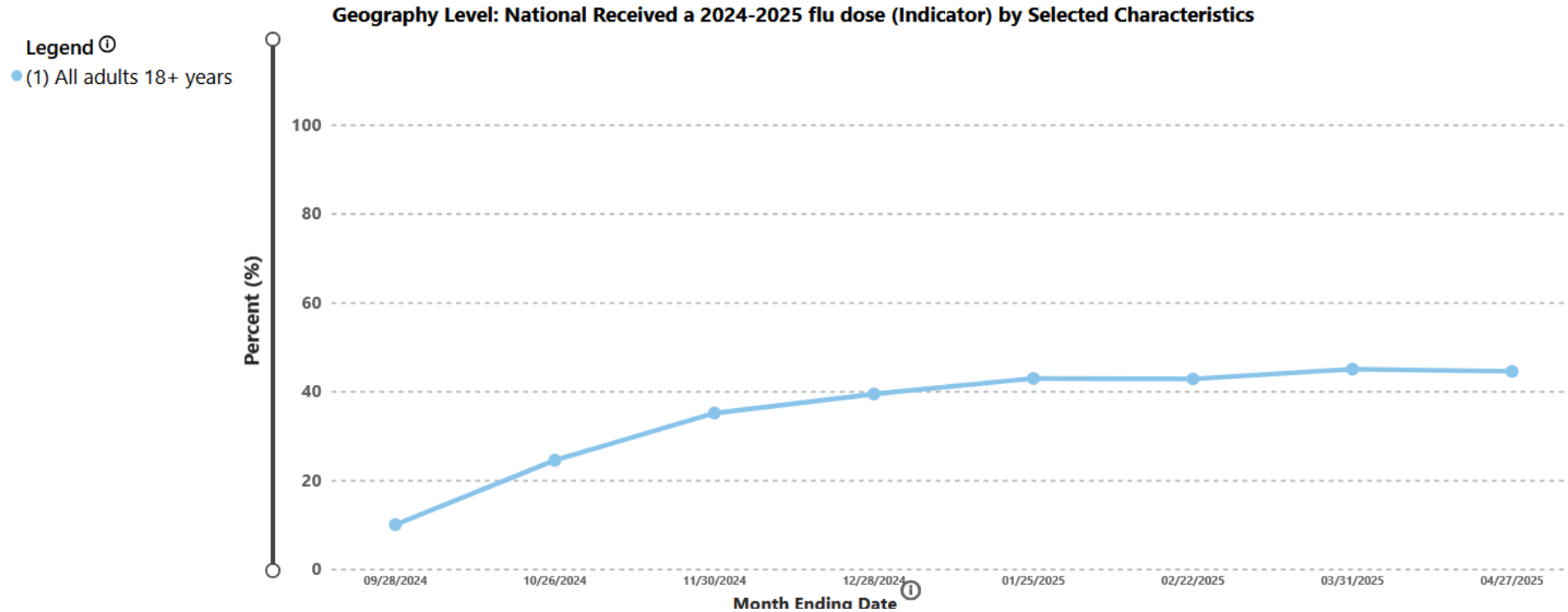
Source: KFF/The Washington Post Survey of Parents (July 18-August 4, 2025)



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Flu Vaccination – Monthly Trends



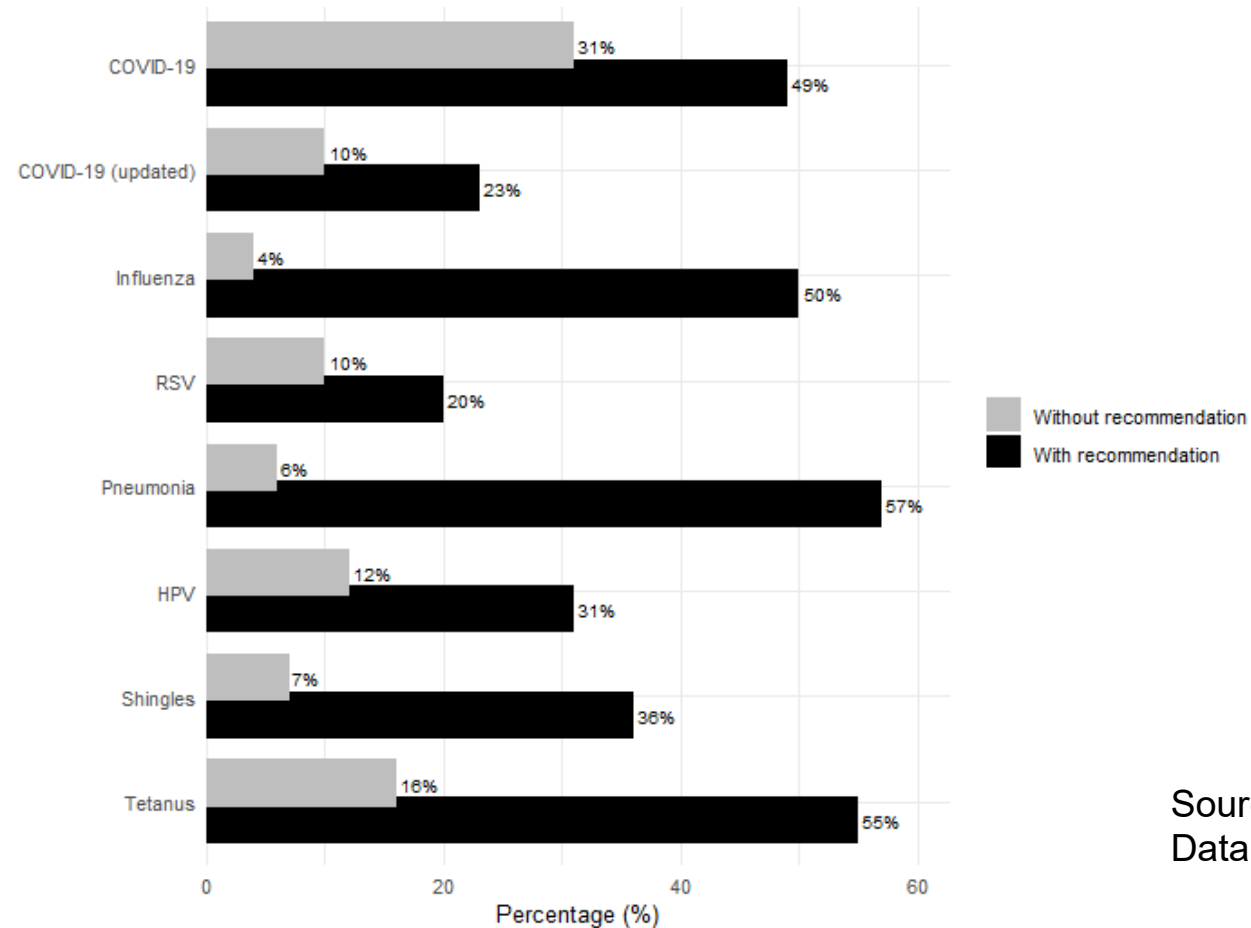
Source: CDC



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Vaccination rate by provider recommendation



Source: Penn State REACH.
Data for York, Lebanon, Berks, and Dauphin



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Wendy's Video



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ENGLISH-LANGUAGE STORIES

DR. HORVATH'S STORY | OBGYN



ERIN'S STORY | NURSE PRACTITIONER



2024-2025 Vaccine Educational Items

- Immunization schedule magnets
- Activity book for children
- Tabletop displays
- Vaccine communication training via Podcast (CME, MOC Points, Nursing credits)



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Key points

- Large majorities of parents have positive views of long-standing childhood vaccinations for MMR and polio, saying these vaccines are important and that they are safe for children.
- Views on seasonal vaccines (flu and COVID-19) are more divided.
- One in six parents say they have ever skipped or delayed at least one childhood vaccine other than seasonal vaccines.
- Provider recommendation is key for vaccine uptake.



Questions?

wcalo@pennstatehealth.psu.edu



PennState



HEALTHY/ORK

Fall Forum

Innovations and Local Efforts

Christopher Russo MD MBA CPE FAAP

Director of Pediatrics, Women and Children Services
Medical Director for Quality and Innovation



Why Are We Here?



Overview: Approaching the Problem





Planning: Key Themes from Kaizen Event

combatting
vaccine hesitancy

community
education

incentives to
parents/
caregivers

optimize
scheduling

**increasing
trust**

using Epic Tools

marketing and
signage
promoting
vaccines

staff education

provider
education

Problem Analysis

- difficulty scheduling
- unaware of need to schedule
- cancelled appointments not rescheduled appropriately

Appointments

- staff not identified to run reports
- unaware of need to run reports
- no standard work for outreach

Staffing

- not cleaning up panels
- not identifying failing patients early enough to intervene

Metric Compliance

**Declining
Vaccination
Rates**

- post-COVID hesitancy
- knowledge of diseases protected against
- alternative schedules

Vaccine Hesitancy

- staff unaware of scheduling parameters
- providers not all vaccine promoters
- parents/caregivers not given consistent messaging

Education

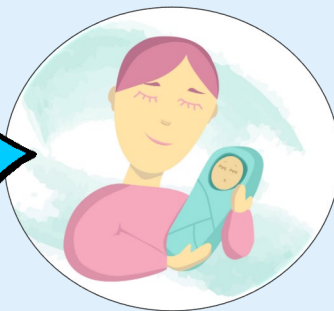
- no automated reminders for vaccines
- no pre-visit preparation for parents/caregivers
- no automated outreach for missed vaccines

Epic

Problem State Mapping



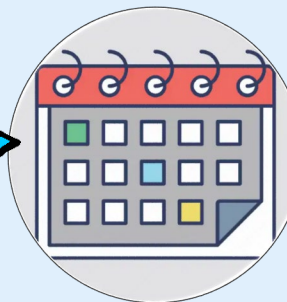
Prenatal
begin discussion
of vaccines



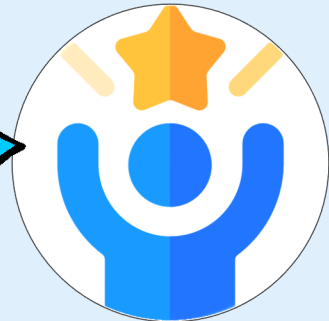
Perinatal
• first vaccine given
• guidance about
future vaccines



First Visits
guidance about
future vaccines



Scheduling
future appointments
made on schedule



all vaccines
given



Community
decrease overall vaccine
hesitancy and health
system mistrust



Partners
create incentives
for completion



Education
• providers
• staff
• parents/caregivers



Care
Companion
pre-visit
information



targeted
reminders
through
MyWellSpan

Engaging Families through EHR

Benefits

- ✓ lower cost than other outreach efforts
- ✓ can be customized for different audiences
- ✓ able to measure process and impact easily
- ✓ able to automate and repeat

Caveats

- ✓ may require investment of time from IT developers and EHR builders
- ✓ patients often saturated with digital messages
- ✓ digital technology may not be accessible to some

Example: Measles

Problem to Solve

How can we improve the rates of MMR vaccination in order to protect against a measles outbreak?

Background

- Measles cases are rising in the United States.
- The best protection against measles is vaccination.
- Two doses are needed.

Approach

Offer parent/caregiver the opportunity to vaccinate their unvaccinated or undervaccinated child for MMR.

Example: Measles

Measles Reminder

Measles is very contagious and can be deadly for children who are not vaccinated. A single dose of the measles vaccine results in immunity in 93% of people, and a booster dose increases that to 97%. If your child has not received the measles vaccine or has not received their booster, please click [here](#) to schedule.

☞ 2,850 messages sent

☞ 66 completed MMR care gap

☞ 35 scheduled nurse visit



Combo-10 Metric Overview

☞ National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS) metric

☞ The percentage of children who, by their 2nd birthday, have received the following ten vaccines:

- | | |
|---|--|
| ☞ 1) four diphtheria, tetanus, acellular pertussis (DTaP) | ☞ 6) two or three rotavirus (RV); [depends on brand] |
| ☞ 2) four pneumococcal conjugate (PCV) | ☞ 7) two influenza (flu) |
| ☞ 3) three polio (IPV) | ☞ 8) one measles, mumps and rubella (MMR) |
| ☞ 4) three haemophilus influenza type B (HiB) | ☞ 9) one chicken pox (VZV) |
| ☞ 5) three hepatitis B (HepB) | ☞ 10) one hepatitis A (HepA) |

14 diseases vaccinated against

24 to 25 vaccine components

16 injections and 3 oral doses

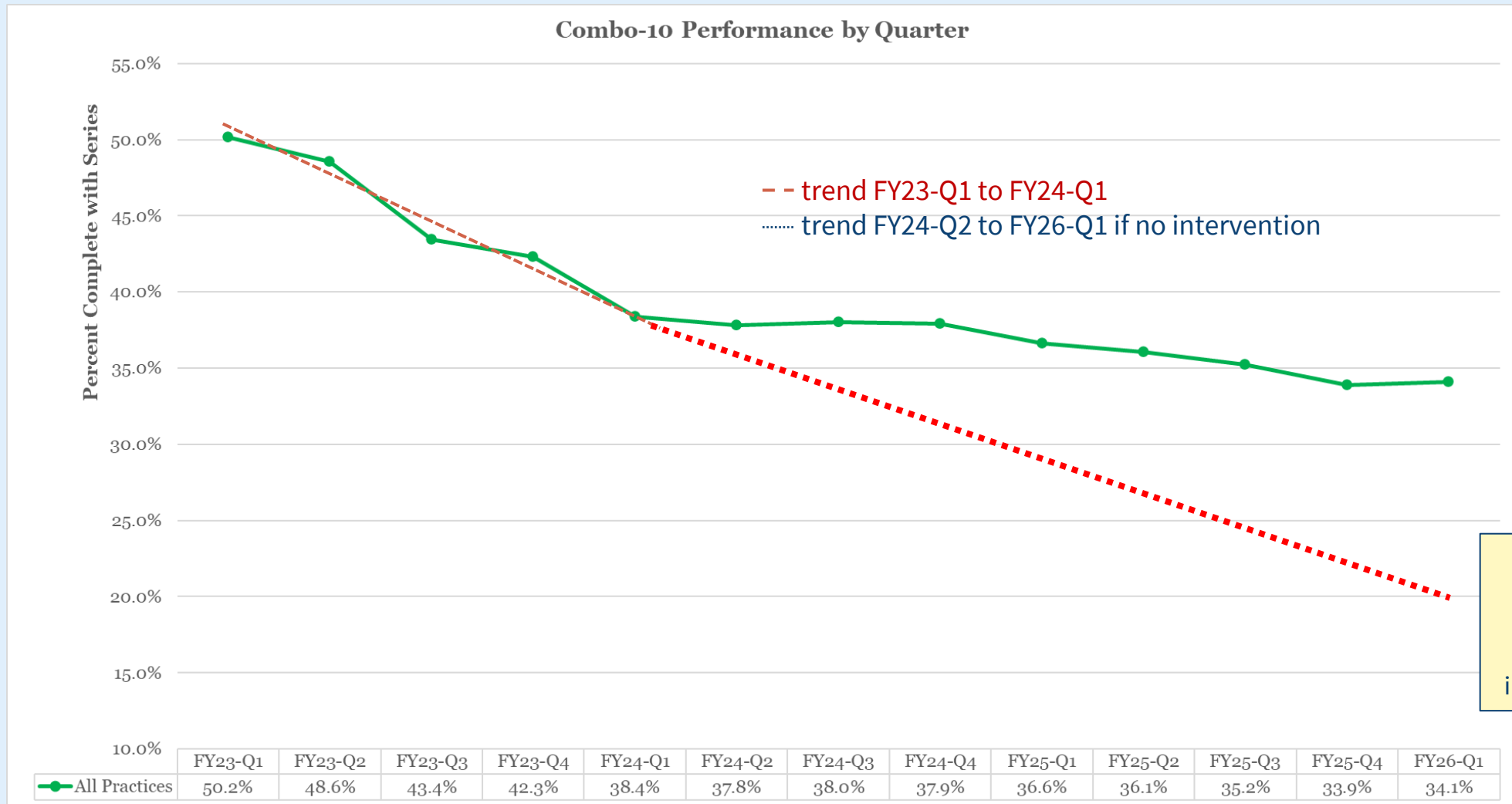
Vaccine Schedule Challenges

- ☞ rotavirus vaccine series must be started before 15 weeks of age and finished by 8 months of age
- ☞ influenza vaccine must be given at least 1 month apart and is only available during the flu season
- ☞ if third pneumococcal vaccine (PCV) is given after 12 months of age, cannot give fourth dose

Metric Challenges

- ☞ parental refusal/religious exemptions are not excluded from metric
- ☞ WellSpan does not dismiss patients who choose not to vaccinate.
- ☞ It takes 50 children completing the metric to increase by 1.0%.

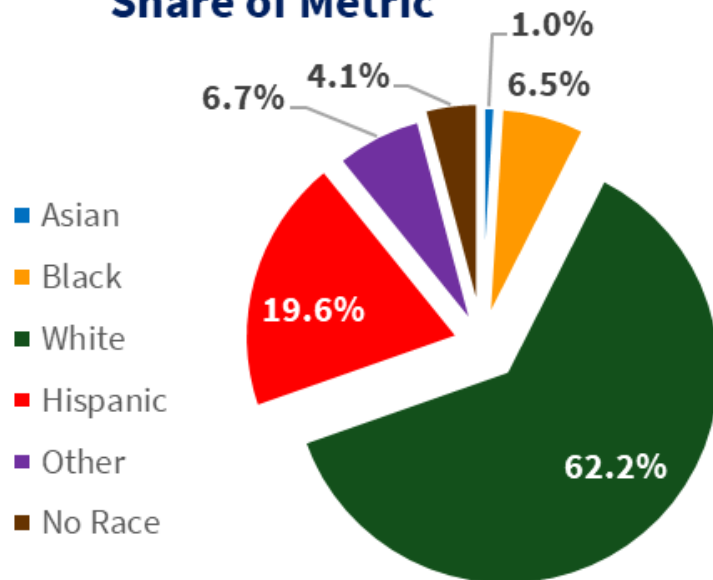
Combo-10 Results



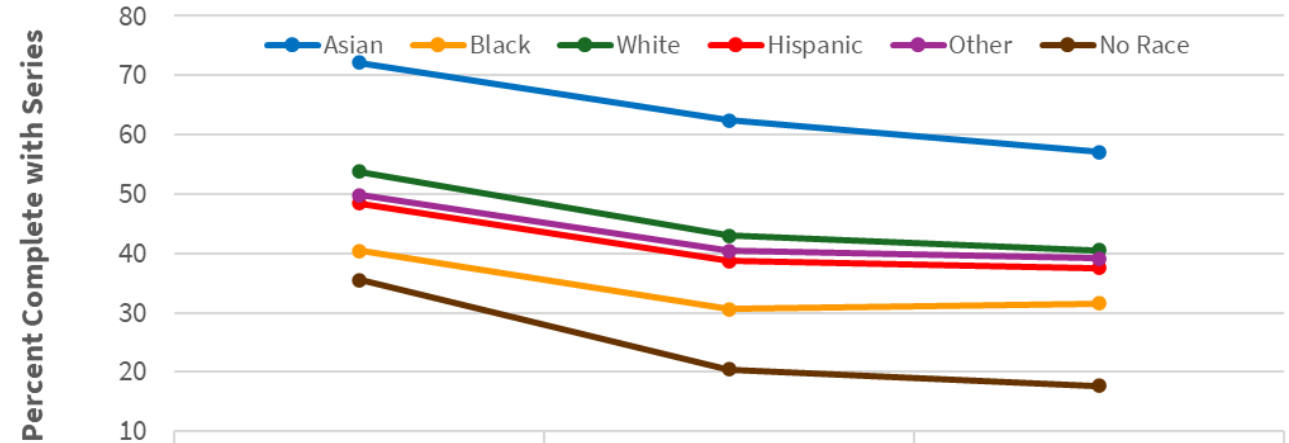
Combo-10: Results by Race/Ethnicity

- Since FY22, declines have been seen across all racial/ethnic groups.
- Black children have seen the lowest decline and increased by 1.0% from FY23 to FY24.

Share of Metric



Combo-10 Performance by Race/Ethnicity

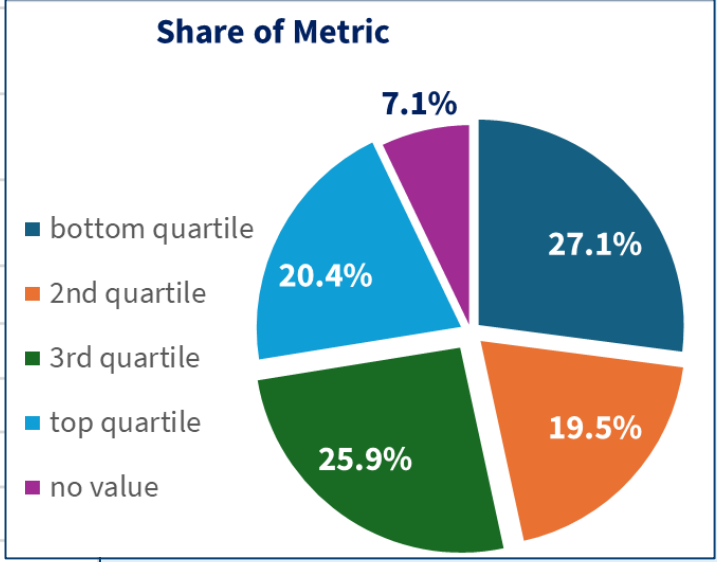
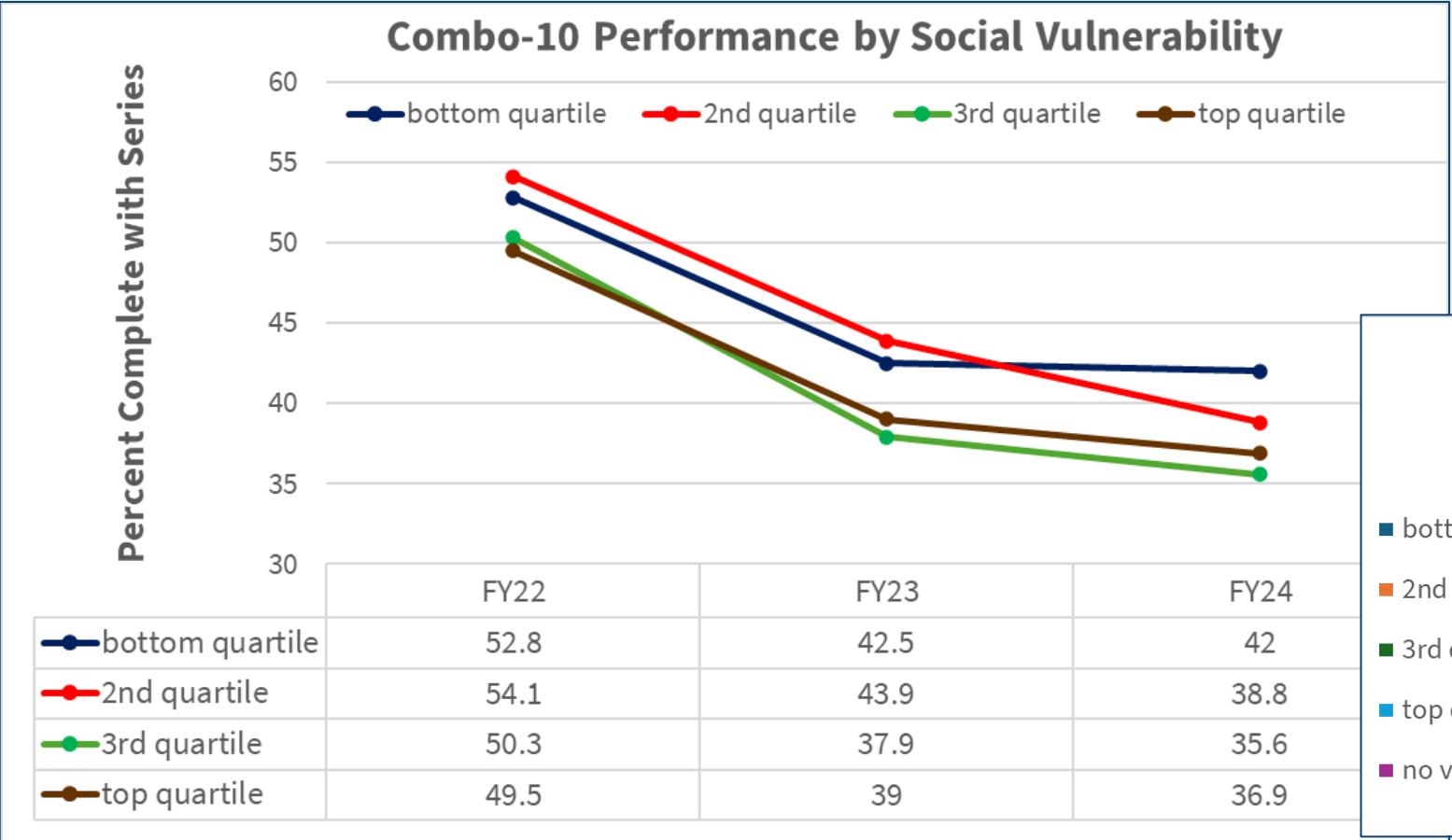


	FY22	FY23	FY24
Asian	72.1	62.4	57.1
Black	40.4	30.6	31.6
White	53.8	43	40.5
Hispanic	48.4	38.7	37.5
Other	49.8	40.4	39.1
No Race	35.5	20.4	17.7



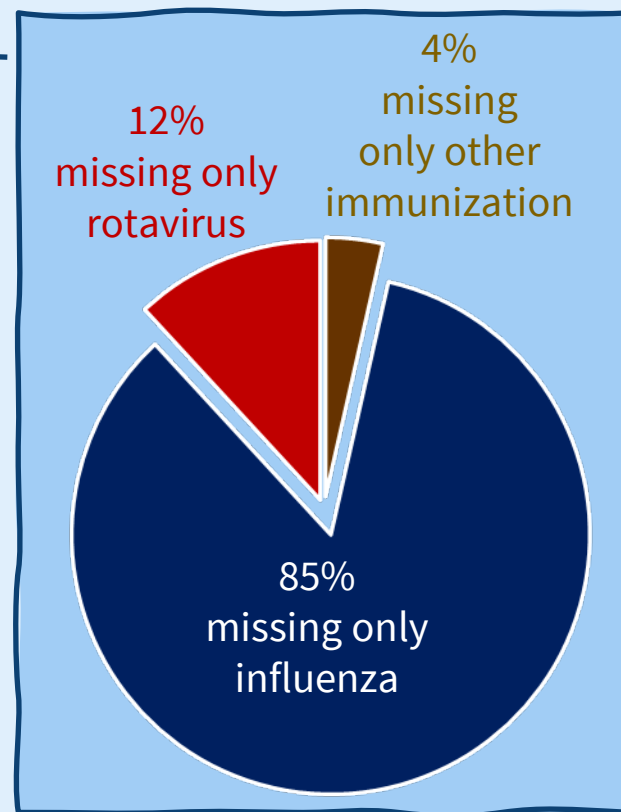
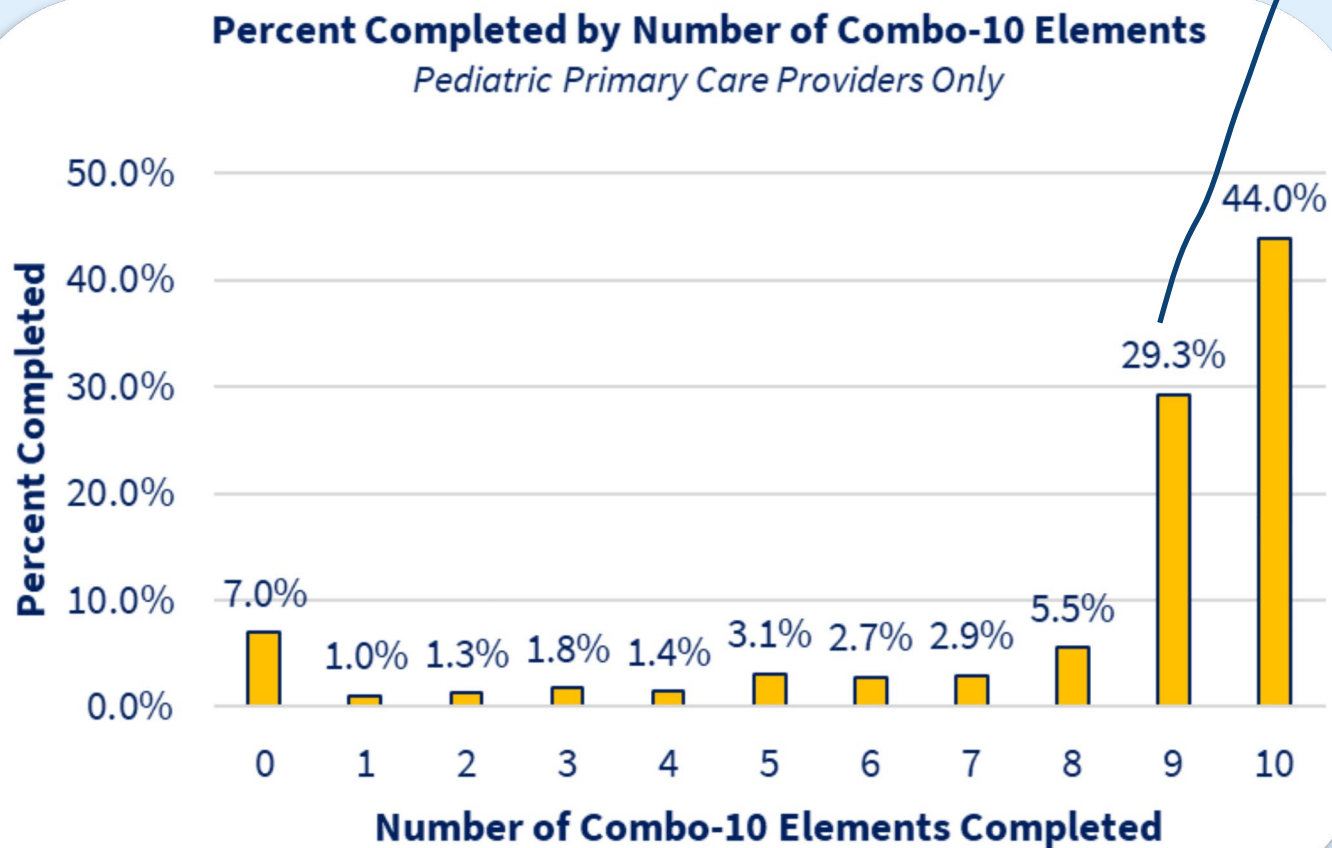
Combo-10: Results by Social Vulnerability

- Since FY22, declines have been seen across all social vulnerability percentiles.
- Children in lowest quartile (most vulnerable) saw only a 0.5% decline from FY23 to FY24.



Combo-10 Component Data

- 7% of patients with pediatric providers refused all vaccinations
- 29% of patients missed **just one** component of Combo-10, the vast majority (85%) of whom only did not get influenza.





Example: Influenza

Problem to Solve

How can we work to improve the rates of influenza vaccination to reduce infant flu and related deaths?

Background

- During the 2024-2025 flu season, there had been at least 216 pediatric flu deaths.
- All eligible children 6 months and older should receive a flu vaccine.

Approach

Offer parent/caregiver the opportunity to vaccinate their unvaccinated child for flu.

Example: Influenza

1st message:

*“Protect your crew:
schedule your family’s
flu shots online today”*

Online Scheduling for Flu Shots

9/18/24 10:15 AM

Did you know that flu is more dangerous for children than the common cold, especially for children under the age of 2? Each year, the flu leads to thousands of children needing to be admitted to the hospital.

As flu season approaches, we want to remind you of the importance of getting your child vaccinated against the flu. The best way to protect your child is by getting their flu vaccination beginning when they are 6 months or older. Children need three doses of the flu vaccine before the age of 2 to ensure the best protection.

Flu shot appointments are now open with a trusted WellSpan primary care provider – and with online scheduling, getting your family’s flu shots couldn’t be easier.

epich<http://scheduling?workflow=Procedure&selRfvld=16>[\[Click here\]](#) to choose a convenient appointment time and location.

WellSpan offers the flu shot from September through May. Getting your child vaccinated early during the flu season is key, as it takes about two weeks from getting the vaccine for your child’s immune system to be activated fully. Act now to take care of your child’s health and help prevent the spread of the flu through our schools and communities.

Your WellSpan provider’s office is always available to answer any questions or concerns you may have.

We look forward to seeing you soon and keeping you and your family healthy this flu season.

Last read by [REDACTED] at 10:15AM on 9/18/2024.

Example: Influenza

2nd message:

“Flu season is still here: schedule your family’s flu shot online today”

Online Scheduling for Flu Shots

11/8/24 2:16 PM

It's not too late to get protected. We are still a long way from the end of flu season and getting a flu shot is a safe and essential part of keeping your family healthy.

Did you know that flu is more dangerous for children than the common cold, especially for children under the age of 2? Each year, the flu leads to thousands of children needing to be admitted to the hospital.

As we head into winter and the rest of flu season, the best way to protect your child is by getting their flu vaccination beginning when they are 6 months or older and getting at least two flu vaccinations before they turn 2 years old.

Flu shot appointments are open with a trusted WellSpan primary care provider – and with online scheduling, getting your family's flu shots couldn't be easier.

epichttp://scheduling?workflow=Procedure&selRfvid=16[[Click here](#)] to choose a convenient appointment time and location.

Already had your flu shot? epichttp://healthadvisories[[Click here](#)] to update your Preventive Care reminder for the Influenza vaccine.

We look forward to seeing you soon and helping you and your loved ones stay healthy this flu season.

This MyWellSpan message has not been read.

49% scheduled online and completed visit



Example: Rotavirus

Problem to Solve

How can we improve the completion of the rotavirus vaccination?

Background

- rotavirus vaccine series must be started before 15 weeks of age and finish by 8 months
- not receiving rotavirus is the #2 reason for children not receiving all recommended early childhood immunizations

Approach

Create and run a report monthly identifying at-risk children to facilitate outreach to family and scheduling.

Example: Rotavirus

- ❧ EHR report created for front-office staff
- ❧ staff runs each month to identify patients at-risk

Overdue for Rotavirus

DOB	Age (wks)	PCP Dept	Last Appt	Last Day for Dose 1	Last Day for Dose 2	Last Day for Dose 3	Next Appt	Doses Rec'd	Status
09/30/23	31.57	WPM – Market	04/11/24	01/12/24	04/30/24	05/30/24	05/11/24	2	none
10/01/23	31.43	WPM – George	03/27/24	01/13/24	05/01/24	06/01/24	07/02/24	2	CONTACT

Patients Identified	Patients Scheduled	Success Rate
113	59	52.2%

Example: RSV Provider/Staff Education



FAQs (for parents/caregivers)

Why get immunizations when my child is so young?

- Children are developing their immune systems in the first two years of life.
- The first two years of life are when they are at highest risk for illness and serious complications.

Why is WellSpan pushing vaccines?

- Vaccines are proven to keep children safe.
- We believe in quality care.

FAQs (for providers)

Why are focusing on age 2?

- The first two years are when the majority of the child's well-child visits occur.
- Childhood immunizations are front-loaded in the schedule to boost the child's immune system when they are most vulnerable.

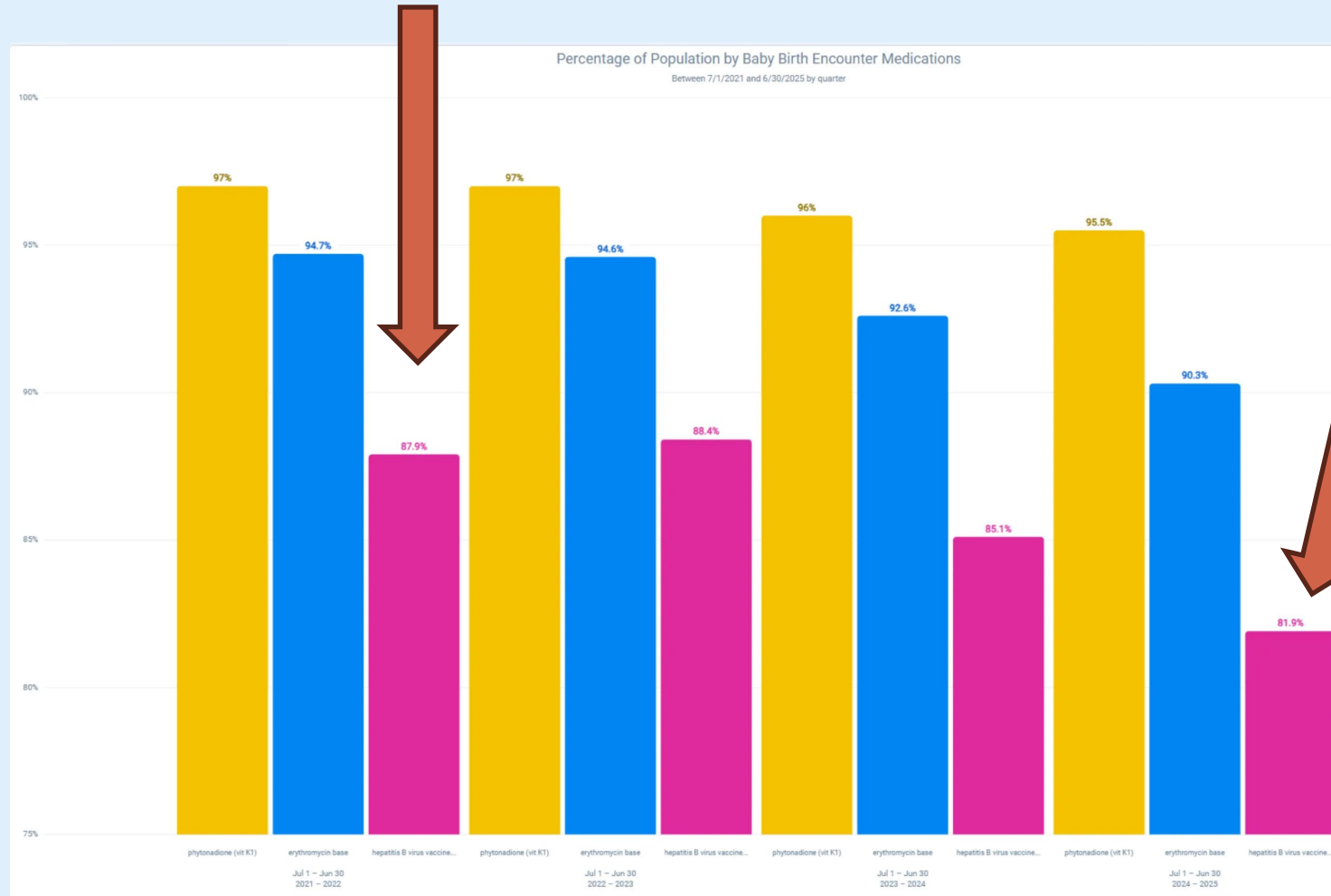
Why is WellSpan doing this?

- We believe vaccines are good medicine.
- This is a national quality metric that many other health systems use.
- Success on this metric shows payors that we provide quality care.



Birth Dose Hepatitis B

FY2022: 87.9% of newborns received HepB prior to nursery discharge



FY2025: 81.9% of newborns received HepB prior to nursery discharge

Closing Thoughts/Reflections

- What can I control? Where am I getting in my own way?
- Don't hold on to things which are not working.
- Don't neglect the individual level.
- Celebrate wins!
- Make sure everyone is aligned on the mission.





thank
you!