

TEMPLE UNIVERSITY HOSPITAL



Community Health Needs
Implementation Strategy
May 2013

 **TEMPLE HEALTH**

Temple Health refers to the health, education and research activities carried out by the affiliates of Temple University Health System and by Temple University School of Medicine.

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Temple University Hospital Community Commitment

Temple University Hospital was founded in 1892 as “Samaritan Hospital,” with the mission of caring for patients with limited incomes and ensuring access to medical care in its surrounding neighborhoods. Today, Temple University Hospital is a 714-bed non-profit acute care hospital that provides a comprehensive range of medical services to its North Philadelphia neighborhoods, as well as a broad spectrum of secondary, tertiary, and quaternary care to patients throughout Southeastern Pennsylvania.

Temple University Hospital serves one of our nation’s most economically challenged and diverse urban populations. About 84% of the patients served by Temple University Hospital are covered by government programs, including 31% by Medicare and 53% by Medicaid. We are an indispensable provider of health care in the largest city in America without a public hospital. Among Pennsylvania’s full-service safety-net providers, Temple University Hospital serves the greatest volume and highest percentage of patients covered by Medicaid.

Temple University Hospital also serves as a critical access point for vital public health services. Last year we handled more than 130,000 patients in our Emergency Department; 11,000 patients in our psychiatric Crisis Response Center; 2,100 discharges from our inpatient Behavioral Health unit; 700 victims of gun and stab violence in our Trauma Unit, the highest number in Pennsylvania; and more than 300 patients in our Burn Center. We also delivered about 3,400 babies, of whom 90% were covered by Medicaid. TUH also provides access to essential health clinics to patients with limited financial resources coping with diseases that pose threats to public health. Consistent with its public service mission, Temple University Hospital provides substantial charitable care to its community, with nearly \$68 million in charity and unreimbursed care, at cost, provided last year.

Temple University Hospital is located in a federally designated *Medically Underserved Area*. Its Episcopal Campus is located in a *Federal Empowerment Zone*. About 35% of individuals in Temple’s primary service area live below the federal poverty level.

Temple University Hospital is staffed by 400 employed physicians of the Temple University School of Medicine’s practice plan. Temple University Physicians represents 17 academic departments including subspecialties in emergency medicine, family practice and pediatrics, cardiology, gastroenterology, oncology, obstetrics and gynecology, orthopedics, neurosurgery, neurology, general and specialty surgery, and psychiatry. All Temple University Physicians care for patients covered by Medicaid in both the inpatient and outpatient settings.

Programs to Promote Access to Care and Community Health

Temple University Hospital takes great pride in the broad array of community services that we provide to our economically challenged neighborhoods and the Southeast Pennsylvania region. Below is a summary of some of our programs and activities that promote healthy living in the communities we serve:

- Providing Critical Resources. Temple connects thousands of people with community-based social services, including free transportation services, legal services, and clothing to destitute patients upon discharge. For our most vulnerable patients, we also assist with pharmaceuticals, co-pays and medical supplies to connect them with resources they need upon discharge.
- Reaching out to our Communities. Temple University Hospital reaches about 20,000 people each year through outreach, support groups, and community education programs. These efforts focus on such topics as alcoholism, narcotics abuse, behavioral health disorders, cancer and other diseases; childbirth, mental health, burn prevention, diabetes care and other topics; and providing many other outreach activities. We also work with the Philadelphia Department of Health to help provide free immunizations, and with key community organizations to provide free health screenings as available. In collaboration with local food banks, public schools, and community organizations, we also conduct numerous food, new clothing, and school supply drives to benefit children and adults living in our impoverished neighborhoods.
- Connecting Patients with Financial Resources. Temple employs 35 Financial Counselors dedicated to helping un- and under-insured patients obtain medical coverage. This team processes about 5,500 applications annually.
- Addressing Gun Violence. Philadelphia leads nation's 10 largest cities in homicides per capita. Last year Temple treated more than 500 gunshot wound victims, the highest number in Pennsylvania. To address this epidemic, Temple's *Cradle to Grave* program works with at-risk youth to help break the cycle of gun violence. In addition, our *Turning Point* intervention program takes advantage of teachable moments that exist during the post-injury/pre-discharge period for survivors of violence.
- Promoting Multi-Cultural Services. Temple University Hospital has 339 language-proficient staff, all who have been credentialed through the Linguistic and Cultural Services Department, including 10 full-time medical interpreters, 2 medical interpreters in leadership roles, 47 active dual-role interpreters, 160 language proficient physicians, 21 RNs, 2 social workers, and 97 other language proficient bi-lingual staff.
- Developing a Tomorrow's Frontline Workforce: Temple University Hospitals is a leader in several initiatives to help build a diverse workforce at all levels of care, such as the following programs:
 - In collaboration with Temple University School of Social Policy, the American Health Information Community (AHIC) and Local 1199C Training and Upgrade

Fund, we are developing a program to certify Community Health Peer Coaches. This program trains community members to work with providers to help coordinate care, improve patient compliance, and encourage wellness.

- Through our investment in I199C's *Community Healthcare Workforce* program, we help provide comprehensive training and education to help frontline workers living in the community adapt and build skills to enable them to participate in a changing healthcare workplace. About half of the students are union members, and half from the general community, many of whom are laid-off workers and Welfare recipients.
- Temple University Hospital's Northeastern School of Nursing RN Diploma Program, provides an affordable option for community members who would not otherwise be able to attend traditional collegiate programs. By building a diverse front-line workforce, we further our goals of delivering quality care to our vulnerable community.
- Emergency Preparedness and Research. This program helps ensure that our staff and hospital facilities are prepared to continue to provide safe, quality patient care even under the most austere conditions. We work on many levels educating our communities about the importance of personal preparedness. Temple's Emergency Preparedness and Research Program is a critical link in the federal, state, and local disaster response plans.
- Philadelphia MOM Program: Temple's nursing staff and social workers assist the Philadelphia department of Health in enrolling the new mothers shortly after delivering their infant and prior to discharge. New mothers and their babies from birth through age 5 are connected with social, educational, and healthcare supports.
- Smoking Cessation: Temple University Hospital maintains dedicated resources for addressing smoking cessation in the North Philadelphia This program is a collaborative effort with the pharmacy program, with sessions scheduled monthly for new enrollees. The program consists of a support group, medical management, and pharmaceuticals to manage smoking withdrawal. All enrollees are followed by a physician. Temple University has implemented a smoke-free policy and has limited smoking on campus to a single location, which will soon be eliminated, creating a smoke-free environment across the campus.
- Improving Population Health. Temple University Hospital is partnering with government on the following innovative programs to improve care delivery and reduce costs:
 - In partnership with Centers for Medicare and Medicaid Services, the Albert Einstein Medical Center and the Philadelphia Corporation for Aging, our Community-based Care Transitions program will improve transitions of beneficiaries from the inpatient setting to other care settings, improve care quality, reduce readmissions for high-risk Medicare beneficiaries;

- Temple's Episcopal Campus is participating in the "Extended Acute Care Pilot" with the City of Philadelphia and its contractor Community Behavioral Health to improve patient care and recovery, to reduce long-term behavioral health costs and integrate patients into community settings;
- Along with selected high-volume Medicaid Hospitals in other states, Temple is assisting the United States Agency for Healthcare Quality and Research in a project focused on implementing best practices for reducing readmission in hospitals serving a high volume of Medicaid patients.
- Temple is aligning with the City of Philadelphia Health Centers and the Federally Qualified Health Centers to assure access to healthcare for the community. Patients discharged from Temple University Hospital are scheduled appointments with physicians prior to discharge. This program will be expanded in July 2013 to include telephonic follow-up and the use of community health workers to navigate application processes, community programs and health center resources. This process is designed to assure patients discharges from the hospital have appropriate follow-up care.
- Temple Health System has collaborated with the Pennsylvania PACE program to assure that eligible individuals have access to free or low cost medications. Patients are being identified in in our community-based practices of Temple Physician, Inc., in our faculty-based practices of Temple University Physicians, and in Temple University Hospital. Applications are being completed with the patients or a significant others. PACE eligible individual are also identified through the community transition programs and use of the community health workers.

Community Health Needs Assessment Summary

With support from the Public Health Management Corporation, Temple University Hospital completed its Community Health Needs Assessment in April 2013 (CHNA), which is available online at: http://tuh.templehealth.org/content/community_health_information.htm.

As indicated in the CHNA, findings from the Southeast Pennsylvania Household Health Survey were statistically worse for the TUH service area in the following areas:

- Percentage of uninsured adults and adults without drug coverage;
- Overweight and obese adults and children;
- Cigarette smoking and problem drinking among adults;
- Adults and older adults in fair or poor health and with asthma, diabetes, and high blood pressure; and,
- Dental visits among children.

Preliminary analysis of qualitative and quantitative data also shows that unmet healthcare needs of residents in our service area include the following prioritized needs:

- Access to primary and preventative care for adults and children, particularly those children living in poverty, and who are uninsured or under-insured; and.
- Access to dental care, prescription coverage for adults and children, and mental health services for women and adults.

Priority unmet needs in our service area also include increased educational programs to address:

- Cultural; or language barriers, particularly among non-English speakers;
- Heart disease and cancer management;
- Smoking prevention, interventions, and cessation programs;
- Overweight and obese children and adults;
- Access to low-cost health insurance; and
- Health education about healthy lifestyles and disease management.

As indicated in the CHNA, many of these unmet needs are already being addressed in our service area by Temple University Hospital, other healthcare providers, government, and local non-profits. In addition, some are not within Temple University Hospital's mission.

Through a consensus-building process among that included leaders of Temple University Hospital and its affiliated Jeanes Hospital and the Hospital of the Fox Chase Cancer Center, all hospital determined their areas of focus they develop initiatives to address unmet needs. We considered whether an issue is the root cause of other problems; internal resources of each hospital, external resources in the community, academic resources of Temple University, the community's ability to respond to the issues, and the consequences of not responding to an issue.

As a result of this process, TUH has developed comprehensive plans to address many of these needs as part of its efforts to improve the health of its vulnerable population. In some cases, it was determined that we do not have sufficient resources to address certain unmet needs as an area of high priority. In such cases, however, we will continue to work in appropriate partnership with other community based organizations and governments agencies, as well as

with our Temple University and Health System affiliates, to strengthen access to these programs and enhance the health and quality of living in the communities we serve.

Plan to Improve Health of Moms and Newborns

Priority: Reduce the incidence of infant mortality and improve access to community resources for mothers and newborns.

Rationale: The infant mortality rate in the North Philadelphia Community is the highest rate as compared to the city itself, and the county as a whole. Access to existing community resources, such as nutritional supplements, and life style choices are contributing factors. Through changing behaviors and increasing access to appropriate nutrition and encouraging breast feeding, the focus on good nutritional habits and reduction of poor choices will improve infant health though improving the infant's immune status thereby reducing the potential for infection.

Goals:

1. Improve the success of breastfeeding through both patient and nursing staff education programs.
2. Create a hospital and community – partnership for the development of a breast feeding resource center, as well as a community support group offered at Temple University Hospital and Episcopal Hospital.
3. Implement an obstetric based community health worker program within the Temple obstetric practice to focus on women who are at high risk for poor pregnancy outcomes.

Available Resources:

- Access to community resources for food and nutrition through Pennsylvania's Women's Infant and Children program (WIC).
- Access to an International Board certified Lactation Consultant for training nursing staff on teaching successful lactation skills.
- Nursing training and education staff for program development and implementation
- Parenting classes, through Temple University Hospital's Northeastern Campus
- Smoking Cessation through Philadelphia Department of Health's Smoke Free Philadelphia program
- Community health workers knowledgeable in effective communication skills and community resources to identify woman at risk, and coordinate with both practice based and community resources.

Partnership with Community Organizations or Government agencies:

- The obstetrical chairpersons of Philadelphia's academic medical centers have collaborated to establish standard policy and procedure across the city for the delivery of effective prenatal, delivery and postpartum care
- Temple Physician's Inc., Maria De Los Santos and Esperanza Health Centers have a collaborative practice agreement to share clinical information and the plan of care for pregnant women who present to Temple for delivery
- City of Philadelphia Health Centers (Health District 5, 6 Strawberry Mansion);
- Maternity Care Coalition
- Pennsylvania Department of Public Welfare

- Pennsylvania WIC program
- Breast Feeding Resource Center

Implementation Team:

Executive Sponsors:

- Dr. Enrique Hernandez., Chairman, Obstetrics and Gynecology, Temple University Hospital
- Elizabeth Craig, RN, MSN, CRNP, VP and Chief Nursing Officer, Temple University Hospital

Team Members:

- Dr. Gail Herrine
- Dr. Nancy Robinson
- Dr. Dionne Cash
- Cheryl Seiden – Klein, RN
- Tosha Lee, RN
- Danielle Healy, PA
- Patricia McMahan, PA
- Lydia Adams, RN
- Jerrel Cox, RN
- Kareemah Hammond, RN
- Sandra Lyons, RN
- Charlotte Morris, CNM
- Sami Paricher, RD
- Lorna Braunsar, Nurse Manager, TUH,
- Tish Brown, Nurse Manager, Labor and Delivery
- Sue Roberts, Nurse Manager, Infant Intensive Care unit,

Community participants

- Maternity Care Coalition
- Naima Black
- Bette Begleiter
- Katja Pajur

Action Plans:

1. Implement an obstetric based community health worker program within the Temple obstetrics practice to focus on woman at high risk for delivering a high risk infant
2. Collaborate with community partners to improve access to healthy food and promote physical activity.
3. Improve communication on the health status of pregnant mothers through collaborative practice arrangements.
4. Reduce smoking and alcohol consumption through promoting smoking cessation and alcohol use awareness
5. Establish a Doula program.
6. Continue our support of the City of Philadelphia's MOM program, which connects mothers and their babies from birth through age 5 are connected with social, educational, and healthcare supports.

Objectives:

- Improve the number of prenatal visits, by 20 %.
- Achieve the Healthy People 2020 target of breast feeding initiation to a rate of 40 %.

Communication:

- Focused breast feeding education for Attending Obstetricians and Resident physicians
- Actively engage in the Maternity Care Coalition Doula training program
- Monthly review of progress and outcome data at departmental meetings
- Establish a quality dashboard for regular reporting
- Utilize the Temple University Hospital Nursing newsletter to communicate progress
- Unit based staff meetings
- Community Lactation meetings
- Quarterly Health Center updates

Estimated Budget: We expect our year one expenses to be about \$210,000.00 to cover the salary and benefits of nursing staff, community health workers, patient and community education materials, transportation, meetings with patients and families, and other related costs.

Plan to Address the Dangers of Obesity and Overweight BMI

Priority Area: Improve general knowledge of healthy food choices, and identify resources to aid in nutrition education.

Rationale: Obesity is an epidemic that has disproportionately affected our community and cuts across all age groups. Programs that raise awareness as to the health dangers and morbidity created by overweight and obesity, including diabetes and heart disease, are the focus of this priority area.

Weight control and prevention of an abnormal body mass index (BMI) begins with healthy food choices. Community members would like more access to information and training surrounding dietary needs and nutrition.

Goal:

- Meet the goal of Health People 2020 to reduce adult obesity to 30.6 %
- Collaborate with community efforts focused on nutrition and weight management
- Integrate nutrition education into all patient classes and group session (for example: pre-operative joint replacement classes, transplant support groups)
- Include an educational program on nutrition and weight management as part of the TIGR patient education programming available through the internal TV programming at TUH
- Collaborate with human resource programs at TUH to address employee obesity and provide nutritional education opportunities

Available Resources:

- Hospital Nutrition Services, certified nutritionists
- TIGR programming
- Department of Nursing, Education Department
- TUHS Government and Community Relations.

Partnership with Community Organizations or Government agencies:

- Joslin Diabetes Center, focusing on nutritional education utilizing certified diabetes educators.
- Temple University Center for Obesity Research and Education (CORE)
- Women Christian Alliance (Improving health outcomes for children)
- Tioga United (Community based resident organization)
- Mayor's Office of Community Service

Implementation Team:

- Executive Sponsors
 - Elizabeth Craig, RN, CRNP, VP and Chief Nurse Executive
- Team Members and Community Participants
 - Joseph Molesky, Director Food and Nutrition
 - L. Harrison Jay, Temple University Office of Community Relations

- LuAnn Kline, Associate Hospital Director
- Jeff Slocum (Nurse Navigator)
- Temple University Center for Obesity Research and Education
- Women's Christian Alliance
- Tioga United
- Nicetown-Tioga Community Improvement Team

Action Plans:

1. Develop a hospital / community work group to identify methods to establish a healthy choice nutrition platform.
2. Inventory Community resources available to support nutritional education programs outside the hospital
3. Establish healthy menu choices in the hospital cafeteria; identify healthy foods for both employees and visitors inside the hospital
4. Implement 2 community based nutrition education programs.
5. Implement nutrition chapters for current patient education programs
6. Implement a TIGR education program on nutrition for inpatients.

Objectives:

1. Implement two community education programs related to nutrition
2. Complete assessment of resources
3. Establish two additional collaborative relationships to broad reach and effect community obesity rate

Communication:

- Communications tools to reach all Temple Health and Temple University stakeholders are already established and available for use.
- Communications, PR and Marketing teams at Temple Health will be utilized to develop and market nutrition education programs and promote the efforts of this team.

Budget: We expect our year one expenses to be about \$100,000.00 to cover the salary and benefits of nursing and food and nutrition staff. Patient and community education materials, transportation, meetings with patients and families, and other related costs.

Plan to Improve Heart and Vascular Health

Priority: To improve the heart and vascular health of our communities by strengthening access to hospital and community-based services and building patient navigation services.

Rationale: Heart Disease is the leading cause of death in the Temple University Hospital (TUH) service area. TUH will focus on Plan to Improve Heart and Vascular Health.

Goals:

1. Maintain community support for patients discharged with congestive heart failure and improve access to medical follow-up post hospitalization.
2. Expand navigation services to include patients who have a high risk of cardiovascular disease, such as hypertension, diabetes and renal disease; each influencing heart and vascular health.
3. Improve access to community resources that will enable patients to gain knowledge regarding nutrition, available transportation services, and medications to support their care requirements.
4. Improve access to primary and specialty care, to provide longitudinal care, reducing the impact of chronic conditions.

Available Resources:

- Temple University Hospital will maintain its heart failure navigation program and expand its infrastructure to include patients who are high risk of admission and re-admission.
- Program efforts include a team of dedicated nurse navigators and community health workers that will identify and provide both inpatient education and post hospitalization follow-up to assure compliance with physician appointments, management of medications and access to community resources.
- As part of this collaborative effort, Temple University Hospital is expanding its program to include a total of three Community Health Workers. These individuals will serve as the liaison between patients and their community based health care providers. By the end of FY 14 we expect to dedicate two Registered Nurse Navigators and three Community Health Workers to this initiative.

Temple will also collaborate with key health care payers and organizations that have a large number of individuals who live in the community with congestive heart failure. These efforts will enable patients to link directly into programs that support a smooth transition across sites of care and prevent gaps in care coordination.

Partnership with Community Organizations or Government Agencies:

Initial partnering organizations with the heart failure program include:

- 1199C Training and Education Fund
- Bravo (Health Springs) Health Plan
- Health Partners Health Plan
- VNA of Greater Philadelphia
- Philadelphia Corporation of the Aging

Implementation Team:

Executive sponsors

- Dr. Paula Stillman, Vice President, Health Services, Temple University Health System

Team Members

- Steven Carson, Vice President, Clinical Integration
- Jeffery Slocum, RN (Nurse Navigator)
- Dr. Edmond Lafer (Medical Director – Utilization)
- Margaret Kerper, RN (Nurse Navigator)
- Mary Theresa Mintz, RN (Case Management Director)
- Ross Shuster, Sr. Analyst
- Shivani Darji, Systems Manager

Community participants

- Edie Premivera, Vice President, Bravo Health Plan
- Andrea D'Angelo, Vice President, Health Partners
- Mimi Scheible , Vice President, VNA of Greater Philadelphia
- Steven Touzell, Director, Philadelphia Corporation of Aging

Action Plans:

During Fiscal Year 13, several pilot programs were implemented and studied:

1. An AHRQ research project for providing care to medical assistance patients using the delivery model Project Red.
2. An expanded community based care transition program established with the Philadelphia Corporation of Aging and the heart failure navigation program.
3. Established programs that coordinate care for Bravo (Health Spring) Health Plan and Health Partners members in disease specific programs.
4. Trained an initial cohort of Community Health Workers (CHWs) and placed in various physician practices and in the TUH congestive heart failure program.

Based upon initial data analysis, the following programs are planned for Fiscal Year 2014:

1. CHWs will coordinate community based services, such as:
 - Medical Assistance Application
 - Meals on Wheels
 - Utility assistance
 - Food Assistance
 - Smoking Cessation programs
 - Mental health services
 - Transportation assistance
2. Establish a home care program for patients with chronic diseases, organize nursing staff by zip code and link staff with a community health worker.
3. Allocate the CHWs to highest risk utilizers of emergency and hospital services.
4. Expand the Transition Care Center staff by adding three community health workers, who will call patient after being seen in the ED, after being discharged from the observation unit, or after hospital discharge.

5. The Transition Care Center will also schedule all follow up appointments for physicians as well as diagnostic studies.

Objectives:

- Reduce congestive heart failure readmissions by 10 % from the existing base line of 10.8 %.
- Capture 45 % of patients eligible for program services.
- Improve compliance with scheduled appointments at community based primary care providers by 20 %.
- Coordinate identified social service needs on 100 % of patients enrolled in the program.

It is anticipated that improved results will be seen within the first 6 months of final implementation. TUH expects to meet or exceed the defined goals by the end of year two of the program.

Communication: Program communication will occur at a variety of levels across the organization and within the community, such as the following venues:

- Formal physician and hospital newsletters
- Community Health Workers meeting with physician practices in their assigned catchment area to discuss program and coordinate patient activity
- Physician forums with program leadership
- Open forums with the health ministry in local churches

Estimated Budget: We expect our year one expenses to be about \$500,000.00 to cover the salary and benefits of community health workers and nurse navigators, patient education materials, transportation, medications, and other related costs.

Plan to improve Access to Mental Health Resources

Rationale: The Temple University Health System Community Needs Assessment reflected that 24% of adults in the Temple service area have been diagnosed with a mental health condition, and more than 34.1% of them were not receiving treatment. Community members cited a lack of knowledge of available resources, long wait lists for services, barriers to services, and inadequate services for the elderly suffering from depression. Community members also addressed concerns related to the mental health care of children due to funding cuts in the schools.

Goal: Increase community knowledge of mental health resources and access to mental health care.

Available Resources: The Episcopal Campus of Temple University Hospital is the primary location for behavioral health services within the Temple University Health System. The Episcopal Campus has 74 adult acute psychiatric and 44 adult extended acute psychiatric beds. In addition, a Crisis Response Center that is open 24 hours per day, 7 days a week serves is available to treat adults 18 years of age and older who are in a psychiatric emergency. Children and adolescents experiencing psychiatric emergencies can be triaged on the campus and are then sent to the one city sponsored child and adolescent crisis response center which is located within 10 miles. The Campus is also the site for the Temple University Medical School Department of Psychiatry Out-Patient Clinic. This clinic is primarily a teaching site for the department's residency program and provides care for adults, children and adolescents. Each entity within the health system also has consultation liaison psychiatrists who care for inpatients at each site. Temple University Hospital-Episcopal Campus provides comprehensive inpatient services and refers patients for after care treatment to mental health outpatient and substance services through linkage agreements with more than 40 outpatient, rehabilitation and substance abuse treatment facilities in the Delaware Valley.

Partnership with Community Organizations or Government agencies:

The City of Philadelphia, Department of Behavioral Health and Intellectual Disabilities (DBHIS) has developed a comprehensive behavioral health system which includes its own behavioral health managed care company, Community Behavioral Health (CBH). Its catchment area includes community mental health centers and five contracted Crisis Response Centers, all of which are located in Philadelphia. These are responsible for providing services to those that are managed by medical assistance programs and those without insurance. CBH contracts with mental health providers to provide specific behavioral health services to meet the needs of Philadelphians. They have contracts with hundreds of providers within the Philadelphia County area to provide services for each age group. As needs are identified, staff members within the DBHIS work to address them with contracted agencies. Temple University Hospital-Episcopal Campus actively participates in these discussions and plans as a contractor of CRC and adult inpatient psychiatric services. The Temple University Department of Psychiatry's outpatient clinic is a part of the provider panel for outpatient services. As a part of that working relationship, Temple will share the findings of the Community Needs Assessments with DBHIS and CBH. Because Temple University Hospital and its Episcopal Campus work primarily with adults, we would focus our efforts on access to mental health care for adults and offer our support as DBHIS takes the lead in addressing the issues related to mental health needs of

children and adolescents. As a member of the Bravo Insurance Company Provider network, we will work with this insurer on the care management of its Medicare population.

Temple University Hospital's Episcopal Campus has ongoing relationships with over 40 provider agencies in the Delaware Valley who provide mental health and substance abuse services. There are a core group of about 10 agencies and community providers who are utilized frequently by Temple Staff for aftercare placement

Implementation Team:

- **Executive Sponsors**
 - William R. Dubin, MD, Chair and Chief Medical Officer, Temple University Hospital-Episcopal Campus
 - Kathleen Barron, Executive Director, Temple University Hospital - Episcopal Campus
- **Team Members**
 - Team Leader, Doris Quiles, MSN, Director of Behavioral Health
 - Jay Finestone, MSW, Director of Social Work
 - LJ Rasi, MSW, Director of Utilization Management
 - Yasser Al-Khatib, MSN, Nurse Manager, Crisis Response Center
 - Neil Sanuck, MD, Medical Director of Crisis Response Center
 - Cheryl Mongillo, Project Manager, Center for Population HealthOne
 - designee from Temple University Department of Social Work

Community Participants

- Robert Miele, M.ED., Vice President for Patient Services, COMHAR Inc. Community Mental Health Center
- Laura Jones, Vice President for Behavioral Health System, North Philadelphia Health Systems
- Designee from Northeast Treatment Center
- Designee from Community Behavioral Health
- Designee from Temple Episcopal Family Advisory Committee

Action Plans:

1. Finalize members of the work group team by June 28, 2013. *Responsible party- Director of Behavioral Health.*
2. Conduct first meeting of work group team by August 30, 2013. *Responsible party- Director of Behavioral Health.*
3. Participate in orientation program for Temple University Hospital - Community Health workers by August 2013, and each orientation thereafter-responsible party-Director of Social Work.
4. Initiate ongoing meeting of all Behavioral Health providers in the Temple Episcopal catchment area to discuss access to mental health care and facilitate creation of drop in

appointments and welcome centers for those in immediate need. Starting August 30, 2013. *Responsible party- Director of Behavioral Health.*

5. Revise comprehensive manual of behavioral health resources in the Delaware Valley by October 30, 2013, and then update once a year. *Responsible party- Director of Social Work.*
6. Place revised comprehensive resource manual on Temple Intranet and assure access to all Temple Health System employees by January 30, 2014 and update annually. *Responsible party – Director of Social Work.*
7. Develop consumer version of behavioral health resource guide in English and Spanish by March 30, 2014 and update annually. *Responsible party- Director of Social Work.*
8. Make consumer version of behavioral health resource guide available for distribution to all TUHS Emergency Departments, and outpatient practices and clinics via IKON by July 30, 2014, update annually. *Responsible Party- Director of Social Work.*
9. Provide educational sessions on Behavioral Health Resources to all Temple University Health System Social Work Departments by July 30, 2014. *Responsible party- Director of Social Work and ETAL.*
10. Provide educational sessions on Behavioral Health Resources to at least 3 Temple University Health System outpatient providers, office managers and departments per year, starting August 2014. *Responsible party - Director of Social Work and ETAL.*
11. Work with community behavioral health providers to provide education on mental health resources and depression screenings during community health fairs, Senior Expo's, on Mental Health Resources at least 3 per year, starting October 2013. *Responsible party - Director of Behavioral Health and Director of Social Work.*

Objectives:

- Provide information in user friendly formats via resource manuals, website links and participation in community health fairs.
- Partner with other community mental health providers in North Philadelphia area to distribute information about mental health resources and increasing access to mental health care.

Communication:

- We will provide training to social work departments throughout the health system on available resources and will make them available on line for review at all times.
- We will notify departments of the availability of resource materials via blast emails, and information in existing Temple Newsletters, magazines and websites.
- All the material will be available for viewing on the Temple Intranet or for ordering from IKON, our in-house printing department.

- User friendly resource manuals will be made available to all community outreach programs throughout the health system.

Estimated Budget: Much of the costs for guidebook development and provision of training will be absorbed within our operating budgets since we will use existing staff. We expect additional costs to be in the range of \$15-20,000.00 for guidebook development, training, printing, meeting with patients and families, and other related expenses.

Plan to Strengthen Awareness of Gun Violence

Priority: To strengthen awareness of the dangers of gun violence in an effort to reduce hospitalizations, reduce barriers to preventative health care, and to improve quality of living in our underserved community.

Rationale: At least 1,500 people have been shot in Philadelphia each year since 2003. An overwhelming number of these victims will be young people in the primes of their lives. Gun homicide is the leading cause of death for Philadelphia's inner-city youth. During a recent 10-year span, nearly 1,200 of the city's shooting victims were just 19 years old, representing the largest percentage of all shooting victims during this span.

Goal: Reduce the number of young people in the city generally, and in North Philadelphia specifically, who suffer gun-related injuries. Temple University Hospital has committed to a plan to strengthen awareness of gun violence.

Available Resources:

- Temple University Hospital has dedicated administrative and physician resources within the hospital's Department of Surgery to focus on reducing gun violence.
- Temple University Hospital also collaborates with the Temple University School of Medicine in the coordination of its Philadelphia CeaseFire program.
- Philadelphia CeaseFire focuses its efforts in North Philadelphia through the employment of credible messengers, included former felons. These messengers are responsible for interrupting and stopping the cycle of violence by canvassing neighborhoods, mediating conflicts, and working one-on-one with youth in high-crime neighborhoods.
- Additionally the program partners with community and governmental agencies.

Partnership with Community Organizations or Government Agencies:

Temple is partnering with juvenile justice programs, traditional and alternative schools, and community organizations throughout Philadelphia to participate in the program.

Scheduling priority is regularly given to programs working with youth considered to be at greatest risk of becoming either the perpetrators or victims of gun violence.

Philadelphia CeaseFire also collaborates with the United States Department of Justice, the City of Philadelphia Police Department.

Implementation Team:

The Cradle to Grave (C2G) program is an initiative of Temple University Hospital's Trauma Program; it depends on the contribution of the following staff:

- Amy J. Goldberg, MD – Director of Trauma Program
- Scott P. Charles, MAPP – Trauma Outreach Coordinator
- Dionne Tyler – Manager, Surgical Pathology
- Fourth- and fifth-year trauma resident volunteers

The Philadelphia CeaseFire program is overseen by Kathleen Reeves, MD and Marla Davis Bellamy of the Temple University School of Medicine.

Action Plans:

1. TheC2G program will bring young people into the hospital as students – and ultimately improve their attitudes towards gun violence – in order to offer a countermeasure to the cultural influences that might bring them here as patients.
2. During this interactive two-hour experience participants see representative images of violent injuries, as well as reflect on the value their lives hold for their friends and families.

Objectives:

- Between fall 2013 and summer 2014, educate at least 1,000 individuals using the programs education methods.
- Improve knowledge on the impact of gun violence as a result of participation in the program. (A pre-post/control design will be utilized to measure improvement in individuals' attitudes)

Communication:

- **Website.** Promote the Cradle to Grave website (cradletograveprogram.com) enabling agencies, schools and hospitals to learn more about this violence prevention initiative.
- **Mailing.** During the year, Cradle to Grave will mail out informational packets to schools within Temple University Hospital's "footprint," as well as those schools that have been deemed persistently dangerous. A substantial number of the relationships that Cradle to Grave has with its partner schools have come as a result of these mailings.
- **Media.** The Cradle to Grave program will continue to utilize local and national media outlets to both raise awareness about the issue of gun violence in Philadelphia and to inform the public about our efforts to address this issue. The program has been recognized on The Philadelphia Inquirer, WHYY Radio, 6ABC News, as well as in such national media as The New York Times, CNN and MSNBC.

Estimated Budget: We expect our year one expenses to be in the range of \$114,000.00 to cover the salary and benefits of Cradle to Grave staff, education materials, and other related program costs.

Plan to Strengthen Practices for Culturally Competent Care

Priority: To strengthen practices for providing culturally competent care.

Rationale: A 2002 report from the Commonwealth Fund entitled *Cultural Competence in Health Care: Emerging Frameworks and Practical Approaches* defined cultural competence in health care as a system's ability to provide care to patients with diverse values, beliefs and behaviors, including tailoring delivery to meet patients' social, cultural, and linguistic needs.

The hospitals of the Temple University Health System (TUHS) serve a large, ethnically diverse community that continues to grow with each census. The United States Census Bureau estimates that approximately 1,536,471 people reside in Philadelphia county of which 45% is white, 44% is documented as Black, 12.6% Hispanic, 6.6 Asian. Data for the deaf community are difficult to isolate as current metrics also include individuals hard of hearing, not deaf.

In our efforts to serve the needs of our diverse population, Temple University Hospital is committed to strengthening the educational and training programs for our physicians and employees.

Goals:

1. To educate staff and physician about the diversity of the clients/patients we serve.
2. To provide high quality safe care to patients with language needs including the deaf and hard of hearing.

Available Resources:

- Employed, Professional Spanish Medical Interpreters for use by our hospitals, TPI, TUP
- Employed, Language Proficient Staff in many languages who are credentialed as Dual Role Medical Interpreters and serve as extenders to our staff interpreters.
- We also have language proficient clinicians who can treat their patients without the use of an interpreter. The language proficient clinicians cannot interpret for their colleagues.
- Language phones which provide fast access 24/7 for 196 languages using credentialed interpreters
- Agency interpreters for 50 different languages, including certified American Sign Language, with whom we have a contract to provide interpretations for TUHS' patients/clients
- Interpreters serve as cultural brokers for both patients and our clinicians to ensure that cultural beliefs are highlighted during the patient/clinician encounter. This facilitates mutual understanding for patient/clinician and provides better clinical outcomes.
- Video Remote Interface for American Sign Language interpretation
- Contract with certified translation company to translate documents for over 50 different languages
- TTY Phone for the deaf and hard of hearing
- Head set for use by the hard of hearing patients/clients

Partnership with Community Organizations or Government Agencies:

- Pennsylvania Immigration & Citizenship Coalition
- Latino-Jewish Committee (American Jewish Committee)
- Pennsylvania Department of Health (TUHS presentations for the Office of Health Equity)

Implementation Team for Action Plans:

- Executive sponsor: Susan L. Freeman, MD, MS; Chief Medical Officer, TUHS
- Team Members: Sherry Mazer, Regulatory Officer; Angel Pagan, Director, Linguistic Services; Raquel Diaz, Manager, Interpreter Training
- Representatives of our diverse communities

Objectives:

1. To provide a comprehensive symposium on Cultural Competence.
 - CEUs and CMEs provided.
 - We designed the Cultural Competence in Healthcare Symposium to equip physicians, nurses and all staff who interact with patients with the necessary tools to meet the needs of diverse patient populations and strengthen the quality of care for all TUHS hospitals and physician practices.
 - Content focused on increasing staff competence when working with persons of different races, ethnicities, values, beliefs and disabilities using national frameworks set forth by the HHS Office of Minority Health (OMH) and The Joint Commission.
2. To provide Comprehensive training to all employees of TUHS, TUP, and TPI on language access service and resources.
 - Review and revise as appropriate the existing presentation and handouts to ensure that participants will be equipped with the necessary information and tools to provide care and services to all patients who need language assistance including the deaf and hard of hearing.
 - The presentation will include the proper method of documentation for all language resources, including interpreters and auxiliary aids.
 - Information will be provided for the staff to use when scheduling the patient for tests and other appointments to inform the patient that language services and auxiliary aids will be provided to the patient free of charge to them as well as their insurance company.
 - Additional information will be provided on cultural diversity for the top ethnic populations for TUHS.
3. To provide an annual mandatory employee competency on Language Assistance Services and resources.
 - Review and revise as appropriate the existing competency tutorial and quiz questions to ensure that participants will be equipped with the necessary information to provide care and services to all patients who need language assistance including the deaf and hard of hearing.
 - The tutorial will state the proper method of documentation for all language resources, including interpreters and auxiliary aids.
 - The tutorial will also remind staff to inform patients/clients that language services and auxiliary aids will be provided free of charge to them as well as their insurance company.

4. To provide a training program for bilingual employees interested in becoming dual role medical interpreters.
 - Provide initial language skills testing for interested bilingual employees .Must have their manager's approval, pass language proficiency test, and a medical terminology quiz.
 - The Manager, Interpreter Training works with the employee and his/her supervisor to schedule the 40 hour classes. Upon on completion of 40 hour training, competency verification tests are conducted both orally and written by the Manager, Interpreter Training and a national language services company.
 - Once the employee passes this credentialing process, he/she is then observed as an interpreter the Manager, Interpreter Training to be able to be fully accredited to perform in the capacity of Dual Role Medical Interpreter.
 - If needed, along the way, remediation plans are developed, implemented, and monitored by the Manager, Interpreter Training.
 - A determination is made whether or not to allow the employee to continue along the DRMI credentialing process or not.

5. Continuing education for Dual Role Medical Interpreters (Brown bag lunches).
 - To provide continuing education on a variety of language and cultural competence topics to enhance employee skills and knowledge.
 - Classes held at all TUHS facilities to accommodate employees with their time.
 - Upon on completion of sessions, the employee is able to use acquired skills and knowledge with patient/provider interventions/encounters.
 - Classes to be held once a month throughout calendar year.

Communication:

- Employees and physicians of the TUHS, Temple University, and Temple Physicians, Inc. (community-based physician organization) invited via broadcast email and postings.
- Physicians and staff also encouraged to participate during leadership and departmental staff meetings.
- E-mails direct to all Dual Role Medical Interpreters by Manager of Interpreter Training for classes and location information.

Budget: TUHS dedicates about \$1.5 million annually to support its Multi-cultural services department, which includes language and interpretive services across its hospitals. We expect costs of the above initiatives to be about \$150,000 for salaries, benefits, and conference materials to strengthen cultural competency at TUH and its affiliated Jeanes Hospitals and The hospital of the Fox Chase Cancer Center.

Approach to Unmet Needs

Cancer Management. The American Oncologic Hospital of the Fox Chase Cancer Center, a member of the Temple University Health System, has established this as one of its health priorities, and is implementing programs to serve all our member hospitals and communities. Located on the same campus as Jeanes Hospital, we will work with Fox Chase to strengthen access to cancer care in our communities.

Dental visits among children. The provision of dental care is beyond the mission and available resources of Jeanes Hospital. However, the Temple University Kornberg School of Dentistry (KSOD), is a major provider of care for Philadelphia's underserved residents. It serves about 23,000 patients annually in an immersive environment that enables students to hone diagnostic and clinical skills. The KSOD contains the largest orthodontic clinic for patients covered by Medicaid in the region. Agreements with dental companies allow the school to provide dental implants to underserved patients at a relative low cost. The KSOD's emergency clinic is the largest in the state, treating approximately 7,200 patients annually. The KSOD also has a strong collaboration with local FQHCs and City of Philadelphia Health Centers.

Uninsured adults without prescription coverage. Temple University Hospital Social Services Departments can connect destitute patients with community-based social services, including free transportation services and clothing to destitute patients upon discharge, and free pharmaceuticals, co-pays and medical supplies that provide our most vulnerable patients with the resources they need to help them heal after discharge.

In addition, our Financial Counseling Department's counselors screen all uninsured and underinsured patients (including those with high deductibles and co-pays) who are hospitalized or require elective outpatient hospital services to determine their eligibility for government funded medical insurance coverage such as Medicaid, CHIP, and Adult Basic. While we will continue to connect our patients with insurance options, we do not have the resources to mount an extensive outreach into the community. This function can be carried out by area health insurers, who are expected to conduct significant outreach efforts in connection with the implementation of health insurance exchanges as provided for under the Affordable Care Act of 2010. In addition, the Temple University Health System, in response to the Center for Medicare and Medicaid Services request for proposals for "Marketplace Navigator" grants, is forming a proposal to develop a network of navigators, in collaboration with other community-based organizations, to connect uninsured patients with Medicaid and other insurance options made available under the Affordable Care Act.

Smoking Prevention, interventions and cessation programs: Although Temple University Hospital did not identify this as a priority for standalone new programming, we are continuing our smoking cessation programs as described Section 2, which outlines our current programs to improve community health. In addition, we are weaving these programs into other programs described above such as our plans to improve the health of moms and newborns, and our plans to improve heart and vascular health.

Access to Primary and Preventative Care: As a hospital, Temple University Hospital does not have the resources to address the comprehensive primary care needs in our community. However, as discussed in Section 2, we developed many programs to reduce barriers to care,

such as our Cradle to Grave, social services, community outreach, and financial counseling. In addition, our affiliated network of community physicians, Temple Physician's, Inc., as well as the faculty practice plan of Temple University Physicians, provides access to our low income community for both primary and specialty services. All Temple physicians, whether community or faculty based, accept patients covered by Medicaid. Temple University Hospital is also a partner with the City of Philadelphia, the Philadelphia Corporation for Aging, and the Agency for Healthcare Quality and Research, the Centers for Medicare and Medicaid Services, other hospitals and community stakeholder in efforts to strengthen access to primary and preventative care.

Looking Forward to a Healthier Population

Temple University Hospital is committed to improving the health of the communities we serve. While our Implementation Strategy provides a broad outline of our current plans, we will continue to develop and refine our approach moving forward. In so doing, we plan to work with the City of Philadelphia Department of Public Health to integrate our community outreach and education initiatives with theirs to make more efficient and effective use of resources already available, and to align our efforts, as appropriate, with the City's health priorities.

In partnership with community organizations, other health providers, the City of Philadelphia, and the Temple family of hospitals and physicians, we hope to improve the health of our population and the quality of living in the neighborhoods we serve.