

2025

AHA Dick Davidson

NOVAAward

Collaboration for Healthier Communities



AHA Dick Davidson

NOVA Award

Collaboration for Healthier Communities

Each year, the American Hospital Association honors five programs led by AHA-member hospitals as “bright stars of the health care field.” Winners are recognized for their achievements in improving community health status in collaboration with other community stakeholders.

In 2018, the AHA NOVA Award was renamed in memory of Dick Davidson, who led the Association as president and CEO from 1991 to 2007. Davidson championed the role of hospitals in improving the health of their communities and drove the creation of this award in 1994.

The AHA Dick Davidson NOVA Award (www.aha.org/nova) is directed and staffed by the AHA’s field engagement division.



STAFF

SENIOR EDITOR: Suzanna Hoppszallern

WRITER: Mike Sherry

COPY EDITOR: Susan Edge-Gumbel

DESIGNER: Chuck Lazar

Community Resource Center provides a one-stop shop for support, services

Housed in a former furniture store and purchased and rehabbed with the support of a donor for \$2.1 million, Endeavor Health's 20,000-square-foot Community Resource Center (CRC) includes services from the school district, park district and public library. Other agency partners provide programming for youth and seniors, operate a food pantry, assist domestic violence victims and more.

CRC is owned and funded by Endeavor Health, while the nonprofit Partners for Our Communities (POC) manages the center's daily operations. Endeavor Health and POC coordinate a network of agency partners to provide vital resources.

POC Executive Director Seth Moland-Kovash said the fact that everyone is under the same roof makes for closer collaboration among agency staff as well as seamless handoffs for clients who need more than one service. All new clients are offered an intake survey to assess their needs and are connected to appropriate services. This centralization eliminates many barriers that clients face, such as transportation or navigating multiple agencies.

Offering a wide range of services, including chronic disease management, health and wellness support, education and literacy programs, employment opportunities, food and clothing distribution, counseling and youth development programs, the CRC continuously adapts to meet the changing needs of the community.

Fiscal year 2024 data showed that more than 90,000 individuals received food and cloth-

ing assistance from on-site pantries, more than 7,000 people participated in education and literacy programs, and community health workers and nurses helped close to 800 patients.

Beyond day-to-day assistance, the center also is available for the community in crises, such as in the aftermath of a 2022 apartment complex fire that displaced 161 residents.

The center quickly became a distribution hub for clothes, food and other essentials as the partner agencies were familiar with its processes, already having worked with one another, and the victims knew that the center "was going to be a safe place that was going to take care of them," said Moland-Kovash.

Center officials also responded to a double homicide by establishing "Better Together," an annual event that attracts more than 1,200 community members and has participation from 25 agency partners.

The efforts of center personnel are "an example of what is possible when we meet people where they are and connect them to the services and support they need to be their best," said J.P. Gallagher, Endeavor Health president and CEO.

"Their talent and compassion," he added, "help those in our communities break down barriers and empower them with skills and resources not only to be self-sufficient, but thrive."

Front-desk staff members from the community are among those who welcome clients upon entering the building. "The trust of the community and the clients is huge and hiring staff who are from the community helps," Mo-



Photo courtesy of Endeavor Health

RESOURCES AT YOUR FINGERTIPS: Endeavor Health community health workers, Violeta Audelo-Solano and Gloria Perez, assess clients' needs and connect them to appropriate services in the center and at other locations throughout the community.

land-Kovash said. "It's her neighbors who come into the building, so they know her. They've seen her around the apartment building."

"And there's no judgment then," added Karen Baker, Endeavor Health's system director for community impact and engagement, "because [staff from the community] understand the challenges these clients have when they are entering."

"The whole purpose of the center is to give people the tools they need to be active,

vibrant members of the community and be successful," Baker said. "We're not just carrying people. It's not free handouts. We want to help people make their lives better."

Many former clients of the CRC end up working at one of the agency partners housed in the center. Endeavor Health Northwest Community Hospital now employs two community health workers, certified nursing assistants and a nurse who started out as clients of the CRC. ●

Indiana cardiovascular program meets clients where they are

Launched in 2022, iHEART focuses on reducing disproportionately high rates of cardiovascular disease among non-Hispanic, Black and Latinx residents living in three Indianapolis neighborhoods.

The Barbershop 2.0 initiative provides screenings, as well as access to virtual nurse practitioner visits, to individuals who may lack regular primary care access. It expands cardiovascular disease care opportunities in a variety of community settings, including barbershops and salons and local places of worship. Program community health workers conduct health screenings that include blood pressure measurements and point-of-care tests for glucose, lipids and hemoglobin A1C.

Barbershop 2.0 exemplifies iHEART's successful model of building trust among its participants, said Reginald Wesley, a community outreach and engagement consultant. "People get in the chair, and they tell their barber things that they have never told anyone, right?" he said. "It's often the person that you've been going to for a long time. You trust that person."

Barbershop 2.0's community health teams stress that they are not there to drive customers to IU Health, said Health Equity Administrator Tatyana Roberts. "We're trying to serve as a resource," she said. "It's more important to us to serve as a bridge to care for our patrons."

One of the reasons Barbershop 2.0 makes inroads with clients, Wesley said, is because staff show up consistently and gradually break down any mistrust clients may have about the health care system. The customer might not consent to a screening the first time

they are there, but they may come around once staff help with nonmedical needs like directing them to a food pantry.

In its first two years, iHEART completed 4,048 total blood pressure screenings across clinical and community settings. Of the 378 individuals screened through Barbershop 2.0, the majority had previously undiagnosed hypertension, with 62.3% of those participants obtaining medical support, including referrals to primary care physicians or specialists.

Other components of iHEART include IU Health's Convenient Home Evaluation for Cardiovascular Health and Individual Tracking (CHECK-IT) program, which includes virtual medication management and education. Patients manage their own cardiovascular health and set goals with guidance and support from community health workers and social workers. They receive regular text reminders and a structured educational program to help them monitor and evaluate their progress. Since iHEART's inception, hypertension control for Black patients improved from 60.48% to 67.41% across the system.

Initial funding for iHEART is coming through a three-year award from Novartis Pharmaceuticals. IU Health will continue the program through the system's operational budget post-award.

Among its community partners are the Cardiovascular and Diabetes Coalition of Indiana, which facilitated public forums in iHEART communities, and the Indianapolis Diabetes IMPaCT Project, which helped shape the interventions through its relationships with local organizations. Meanwhile, IU's Polis Center has



HAIRCUT AND A BLOOD-PRESURE CHECK: The Barbershop 2.0 initiative provides screenings, as well as access to virtual nurse practitioner visits, to individuals at a local barbershop.

developed public data dashboards delineating neighborhood resources and challenges.

Brownsyne Tucker Edmonds, M.D., vice president and chief health equity officer, purposely included all the moving parts and partners as she envisioned bringing together a variety of "crown jewels" to form iHEART. "It was intended to be a collective action kind of effort to say, 'How do we take the best of what our partners have to offer to be able to do more with less?'" she said, "which is oftentimes the case when you're doing work in community service and community engagement spaces."

Dennis Murphy, IU Health president and

CEO, praised Tucker Edmonds and her team for their "visionary leadership and relentless focus on health outcomes."

Success would not be possible, Murphy said, without community partnerships. "By opening their doors to us," he said, "our partners are signaling to members of the community that IU Health is worthy of their trust."

"The iHeart Collaborative work is a model for other communities around the country to emulate and a testament to the transformative impact that innovative community-based health care can have on public health." ●

Addressing the urgent demand for behavioral health workforce

Staff shortages prevented Mass General Brigham (MGB) from filling more than 10% of its inpatient psychiatric beds, and outpatient waiting lists for mental health services had grown by more than 2,000 patients across the system. The Commonwealth Fund found that MGB was not alone — reporting that across Massachusetts, 13 behavioral health clinicians were leaving the field for every 10 workers entering.

That challenging landscape prompted MGB to establish the Community Behavioral Health Workforce Development Program in January 2022. Through a grant-making process, MGB partnered with 13 community-based agencies and schools of higher education to support the behavioral health workforce, through stipends, scholarships and loan repayment programs, and meet critical service gaps in the community.

“Our Community Behavioral Workforce Development Program addresses the urgent need to expand access to behavioral health services by building a culturally competent workforce. Making care more accessible where people live, work, and go to school is essential to breaking down barriers,” said Anne Klibanski, M.D., president and CEO.

“Our quarterly Learning Community meetings highlight the collaborative spirit of this initiative,” said Klibanski. “The program has already exceeded expectations, and we are confident in reaching our five-year goal of supporting 835 students through our eight educational partnerships.”

“The creativity and truly doing something in a way that is action- and solutions-oriented

is a distinguishing feature of this that we’re incredibly proud of,” said Elsie Taveras, M.D., chief community health and equity officer.

Along with Joy Rosen, enterprise vice president of behavioral and mental health, Taveras has spearheaded a program that is ahead of its five-year goal of supporting 835 students across disciplines that include psychology, human services, nursing, social work and occupational therapy.

“We needed to be very nimble, and we didn’t want to go through lengthy processes to get these programs up and running,” Rosen said. “So, we made a decision to partner with a variety of organizations and let them tell us what would work in terms of really helping with the pipeline of mental health workers across many roles and meet the needs of their communities.”

- The Massachusetts League of Community Health Centers established three programs to recruit and retain clinicians working in the community through salary supplement and loan repayment incentives.
- The Massachusetts Association for Mental Health facilitated partnerships between community behavioral health centers and public schools to create pediatric urgent care services to better meet the mental health needs of school-aged children in high need areas.
- In the Boston College School of Social Work Latinx Leadership Initiative, fellows learn bi-cultural, bilingual evidence-based practices to support Latinx populations in the community.



Photo courtesy of Mass General Brigham

BOLSTERING THE PIPELINE: Mass General Brigham partnered with 13 community-based agencies and schools to develop programs to strengthen the workforce and meet key service gaps.

They participate in a professional development curriculum delivered through monthly workshops and receive stipends for licensure preparation.

MGB convenes grantees quarterly as part of a learning community to foster relationships and exchange ideas.

Another success Rosen cited is that, as MGB hoped, partner organizations have leveraged funds from the workforce development program to attract additional funding.

For instance, the Massachusetts Association for Mental Health received philanthropic

funding to establish two additional pediatric urgent care pilot partnerships. In addition, Bridgewater State University received \$1.9 million in state mental health funds to compensate social work students in their internships.

“I have so many colleagues across the country who are struggling, looking for solutions in their own health systems and the communities that they serve,” Taveras said, “and the ability we have had to show that impact — and not just in the short-term — but in what it means for the long-term and the long game is really fantastic.” ●

Food Rx Program improves lives of patients with diabetes

The mother of young babies and the sole breadwinner for the household presented at MedStar Good Samaritan Hospital with all the signs of hyperglycemia.

Emergency department personnel referred the woman to the hospital's Collaborative Care Program (CCP) upon discharge, and six months later, her dangerously high blood sugar level dropped to below the target for healthy adults.

"That's not just luck, right?" said Angela Roberson, RD, LDN, regional clinical manager, Food Rx, and a dietitian with MedStar Good Samaritan's Food Rx program. "That's somebody who's now fully engaged in acknowledging what they've learned and how to manage [their condition], not just with medication, but mostly they're managing it with food."

Launched in 2021 as part of CCP, Food Rx helps patients address chronic disease by alleviating food insecurity.

To Lucas Carlson, M.D., Food Rx demonstrates MedStar Health's commitment to implementing the findings of its community health assessment. Carlson is the regional medical director for care transformation in the Baltimore region.

"Food Rx exists as part of our hospitals' efforts to promote our mission to bridge gaps to improve the health and well-being of the communities we serve," he said, "and that includes social needs, transitions of care and community partnerships."

Intake includes a 60-minute assessment with a community health advocate and a registered dietitian. Participants receive a tailored care plan, including weekly meal deliveries and ongoing consultations with their care teams.

Now at three MedStar Health locations, with expansion to a fourth in the works, Food Rx has helped 90% of its patients reduce their A1C levels, with more than two-thirds reducing excessive levels to below the healthy level of 7%. Program data also show: 85% of participants reported feeling more confident in their ability to manage their health through diet, and hospital visits decreased by 21%, including trips to the emergency department, observation stays and inpatient admissions.

The success of Food Rx stems from the fact that "our dedicated teams are able to monitor patients' chronic medical conditions to improve their health and reduce hospitalizations," said T.J. Senker, senior vice president of MedStar Health and president of MedStar Good Samaritan Hospital and MedStar Union Memorial Hospital.

Senker also noted that Food Rx "is made possible with support from many community partners, which allow patients to receive a supply of meals for themselves and their families, all at no cost."

Along with the American Heart Association, Food Rx partners include an area food bank, the YMCA and First Fruits Farm in nearby Freeland, Maryland, which provides everything from tomatoes and cucumbers to squash, watermelon, potatoes and green beans.

Roberson said Food Rx tailors fruit and produce bags to each client's tastes.

Corporate partners include Sodexo food services, McCormick & Company, the Maryland-based maker of herbs and spices, and Pompeian Inc., a Baltimore company that



Photo courtesy of MedStar Good Samaritan Hospital

FOOD AS MEDICINE: Angela Roberson, RD, LDN, a population health dietitian with Food Rx, talks with a patient and her daughter about making healthy food choices.

makes oils and vinegars.

"We find synergies all over the place," said Phyllis Gray, MedStar Health's assistant vice president for care transformation in the Baltimore region. She said MedStar Health leveraged existing relationships with McCormick and that Pompeian approached the hospital about helping out.

Gray and her husband even salvaged microwaves from a university partner that was undergoing renovations. They gave them to Roberson for Food Rx clients.

As CCP medical director, Malek Cheikh, M.D., said Food Rx is integral to the success of the program.

"It's very important to keep our patients who have food insecurities away from rebounding back into the hospital where we start all over again," he said. He termed Food Rx the "cherry on top" of other CCP efforts that "enable the patients not only to make better decisions but to understand those decisions and work on achieving [their goals]." ●

Healthy Moms takes whole-person approach to serving at-risk women

Rochester Regional Health is improving the health of moms and pregnant women in some of the area's poorest ZIP codes.

"We want to give our participants the tools not only to be successful in their lives but also advocate for themselves," said LeKeyah Wilson, M.D., vice president of community engagement and social impact.

Rochester Regional Health's Healthy Moms program has evolved into a one-stop care shop since the system initiated the effort nearly 30 years ago through a federal Healthy Start grant. It provides free transportation and onsite childcare, removing key barriers so participants can fully access services. The initiative aims to reduce infant mortality and other poor birth outcomes in Monroe County, New York.

The fact that driver's education is also part of Healthy Moms surprises people, said Katie Sienk, director of maternal and child programs. But it makes perfect sense, she said, when you consider the scenario of a mom struggling on a bus with groceries and children in a Rochester winter.

When a participant gets a driver's license, Sienk said, "it's such an opportunity to celebrate and not just think about what you need, but what do you want? What do you want to be able to do in your life? What are your dreams? Do you want to be able to take your kids to the zoo or the park or do those things that are fun, not just the things that you have to do?"

Project Independence is a service that includes a job training component and a pipeline to employment partnership that originated with the Healthy Moms' participant advisory board.

The program served 84 women in 2023, and it placed five participants in positions at Rochester Regional Health through a partnership established in 2024 with the system's talent acquisition team.

Between 2012 and 2023, Rochester Regional Health estimated that Project Independence saved more than \$2.4 million in tax dollars by transitioning participants off public assistance.

Other successes include graduates of childbirth and pregnancy education classes experiencing premature birth rates 53% lower and low birth weight rates 38% lower than those of other women in inner-city Rochester. Healthy Moms also has seen similar success rates among women receiving assistance through its behavioral health program, which served 340 individuals in 2023.

Behavioral health is an integral component of the program because many participants have no support system at home, said MaryAnn Brady, business development and program operations manager.

"The behavioral health team and the entire Healthy Moms team become their support system," she said. "They build that support system around themselves with other moms in the program who could be a neighbor down the street, and somebody they can rely on as a mom and a friend."

Sienk cited one instance where a mom came into a parenting class wearing a mask to hide the black eye suffered at the hands of her baby's father. Because Healthy Moms has all its services under one roof, staff expeditiously



Photo courtesy of Rochester Regional Health

HEALTHY MOM, HEALTHY BABY: The Healthy Moms program is a one-stop care shop that aims to reduce infant mortality and other poor birth outcomes in Monroe County, New York.

signed up the woman for an initial counseling appointment and provided her with local domestic violence resources.

Sienk also was proud of another case where staff devised a plan in minutes upon hearing that a participant was being discharged from the hospital and needed to move from one shelter to another with no transportation.

Chief Operating Officer Jennifer Eslinger said that while Healthy Moms embodied Rochester Regional Health's commitment to

whole-person care, "the real upside is watching your people shine when they know they are making such a big difference."

CEO Richard "Chip" Davis echoed that sentiment, praising "the dedication of our team and the strong partnerships we've built in our community."

Healthy Moms, he added, "is committed to empowering women and families with comprehensive services that promote physical, emotional and economic well-being." ●



2025 AHA DICK DAVIDSON NOVA AWARD COMMITTEE

CHAIR

Jody Sprague, LMSW

Program Manager for School-based Suicide Prevention
Psychiatry and Behavioral Medicine
Corewell Health, Grand Rapids, Mich.

MEMBERS

Chara Stewart Abrams, MPH

System Director, Community Health and Health Equity
CHRISTUS Health, Irving, Texas

Michael Abrams

President and CEO
Ohio Hospital Association, Columbus, Ohio

Elizabeth Fiordalis

Director, Community Benefit | Community Health Equity
Cleveland Clinic, Cleveland

Brian Li

System Director, Community Health Strategic Initiatives
CommonSpirit Health, San Francisco

Carey Justice Rothschild, CHW

System Director, Community Health Policy and Strategy
Spartanburg (S.C.) Regional Healthcare System

STAFF

Jane Jeffries

Director, Awards and Member Leadership Development
Field Engagement
American Hospital Association, Chicago

AHA Dick Davidson

NOVAAward
Collaboration for Healthier Communities