In 2006, hospital leaders across the country received their first Community Connections resource—a collection of programs that demonstrate the various ways hospitals provide for and benefit their communities. This case example book is the eleventh in a series and highlights many more innovative programs. For more examples or to share your own story, visit www.ahacommunityconnections.org.

Photos in this publication are courtesy of Doug Haight, photographer, and illustrate programs from recent Foster G. McGaw Prize-winning organizations. Since 1986, the Foster G. McGaw Prize has honored health delivery organizations that have demonstrated exceptional commitment to community service. The 2016 Prize is sponsored by The Baxter International Foundation, the American Hospital Association and the Health Research & Educational Trust.
Across the country, hospitals are improving the health of their communities and finding new and innovative strategies to support individuals in reaching their highest potential for health. The American Hospital Association’s Community Connections highlights the varied and innovative ways that hospitals are reaching out to meet the needs of their communities.

Many factors combine together to affect the health of individuals and communities. And whether people are healthy or not is in large part determined by their circumstances and by where they live, work and play, in addition to their genetics and behaviors. The case studies in this year’s Community Connections booklet have been divided into four categories that together form the determinants of health: the range of personal, social, economic and environmental factors that influence health status.

- **Access and Quality**
  Clinical care, mobile health clinics, screenings

- **Health Behaviors**
  Tobacco use, diet & exercise, alcohol & drug use, sexual activity

- **Socioeconomic Factors**
  Education, employment, income, family & social support, community safety

- **Physical Environment**
  Air & water quality, housing & transit

Overall health is made up of much more than only traditional health care, and hospitals everywhere are stepping up to support the many factors that go into health and wellbeing. We hope that the following stories help to inform and inspire the good work that you are doing every day to improve the health of your communities.
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Access and Quality

Includes clinical care, mobile health clinics, screenings
Andalusia Regional Hospital – Andalusia, Alabama

Program: The Children’s Advocacy Center (CAC)

What is it? The CAC provides a child-friendly environment where families can go in cases of suspected abuse. The CAC is capable of performing a forensic interview by trained personnel, while law enforcement, district attorneys and other pertinent parties can view from a separate room via closed-circuit TV. Andalusia Regional Hospital donated the space for the CAC and renovations were completed by the City of Andalusia.

Who is it for? Area children in cases of suspected abuse.

Why do they do it? Prior to having locally trained staff at Andalusia Regional Hospital, children who were allegedly abused had to leave the area to be medically examined, creating a significant hardship for the child and parents/caregivers.

Impact: Since opening in April, the CAC has served 26 children, with 38 forensic interviews completed. Plans over the next fiscal year include expansion of services to include counseling for children served by the CAC, family advocate services and prevention programs.

Contact: Patty Ashworth
Director, Physician Services
Telephone: 334-428-7001
Email: patty.ashworth@lpnt.net

Ashley Medical Center – Ashley, North Dakota

Program: Tele-Health

What is it? Ashley Medical Center uses sophisticated Tele-Health technology to serve its remote community in several ways. Technology is used for E-Emergency, providing instant consultations; Virtual Pharmacy services; and the Tele-Health Network, in conjunction with CHI-St. Alexius and Archway, which provides specialized psychiatric care. The technology also has been used for free community education, including classes on Stress Management, What’s New with Diabetes and Realities of Rural Stress, as well as a paramedic training program.

Who is it for? Residents of the community and surrounding area.

Why do they do it? Ashley Medical Center serves a remote rural area and is committed to providing essential care to the members of the community.

Impact: Utilizing services of Tele-Health has saved patients thousands of dollars in transportation costs, and eases time lost from work for both the employee and employer.

Contact: Jerry Lepp
Chief Executive Officer
Telephone: 701-288-3433
Email: jlepp@primecare.org

Avera St. Luke’s Hospital – Aberdeen, South Dakota

Program: Warm Water Therapy

What is it? Avera St. Luke’s Therapy Center offers the region’s largest warm water therapy pool within 200 miles. The water in the pool ranges from three to six feet deep. A therapist accompanies the patient during treatment and ensures safety. Flotation devices are used in the shallow water to allow patients to lay completely supported on their backs or in a sitting position.

Who is it for? Athletes healing from sports injuries; people with chronic back pain, disabling illnesses or injuries; people suffering from chronic diseases such as arthritis, fibromyalgia or muscular dystrophy; and those dealing with balance problems, developmental delays, recovery after surgery and many other issues.

Why do they do it? This pool combines the benefits of warm water, gentle exercise and decreased gravity to reduce pain and maximize a patient’s physical abilities.

Impact: The warm water pool attracts 800 to 1,000 visits per month. Many people come several times a week.

Contact: Leonard Suel, P.T., D.P.T.
Physical Therapy & Sports Medicine Director
Telephone: 605-622-5878
Email: leonard.suel@avera.org

Baptist Memorial Health Care – Memphis, Tennessee

Program: Baptist Operation Outreach

What is it? Baptist Operation Outreach is a mobile health care clinic for the homeless, the result of a partnership between Baptist Memorial Health Care and Christ Community Health Services. The van provides free acute and primary health care, information on disease prevention and guidance, and a medical home to thousands of area residents without permanent housing. Patients have direct and immediate access to medical examinations, health information, illness prevention and medications, as well as vision, dental and referral services. A certified nurse practitioner delivers screenings, health and developmental assessments for children, immunizations and other preventive care, diagnosis of medical problems, and treatment and management of specific disease problems and minor injuries.

Who is it for? Homeless residents of Memphis, Shelby County and surrounding areas.

Why do they do it? For many of the thousands of people without homes in Memphis, Baptist Operation Outreach is the only option for health care.
Impact: The mobile clinic provides about 3,000 patient visits a year, making Baptist Operation Outreach one of Memphis’ largest health care providers for the homeless.

Contact: Jason Little
President & Chief Executive Officer
Telephone: 901-227-5134
Email: jason.little@bmhcc.org

Bonner General Health – Sandpoint, Idaho

Program: Art for the Soul

What is it? The Art for the Soul program enhances the hospital experience for patients, staff and visitors. Bonner General is considered to have the largest collection of fine art in North Idaho. Sandpoint has a very active artist community, so the collection concentrates on local art. The hospital initially used grant funds to purchase art when a small group of women initiated the program in 1999. Since then, the program has been self-sustaining through gifts from residents and very generous artists.

Who is it for? Hospital patients, visitors and staff.

Why do they do it? Studies about the impact of art in the hospital environment show that patients have experienced reduced stress and anxiety, have an increased tolerance of pain, decreased blood pressure and a shortened length of stay.

Impact: Hospital facilities currently display 520 paintings, drawings, prints, photographs and quilts. A collection of art created by local elementary schoolchildren also is displayed.

Contact: Terri Fortner
Executive Director, Community Development & Foundation
Telephone: 208-265-3390
Email: terri.fortner@bonnergeneral.org

Brattleboro Memorial Hospital – Brattleboro, Vermont

Program: Comprehensive Breast Care

What is it? The hospital’s Comprehensive Breast Care program provides a multidisciplinary spectrum of services including screening, prevention, surgery, post-surgical treatments and complementary supports that promote long-term survivorship. Through a breast nurse navigator, patients are connected with services from partners including the National Breast Cancer Foundation, the American Cancer Society, the Fanny Holt Ames and Edna Louise Holt Fund, Susan G. Komen for the Cure and local wellness practitioners. Ladies First Vermont offers free mammograms; new bras and breast prostheses are donated; and local businesses and students hold fundraisers to offer gas cards. Because many women lack reliable transportation, the team is a presence at community events and mammogram appointments.

Who is it for? Women in the community, regardless of ability to pay.

Why do they do it? Windham County is among the counties in Vermont with the highest rate for breast cancer: 123.7 per 100,000 population, according to the Vermont Cancer Registry.

Impact: More than 4,000 patients are served by the program every year.

Contact: Gina Pattison
Director, Development & Marketing
Telephone: 802-251-8485
Email: gpattison@bmhvt.org

Centegra Health System – Crystal Lake, Illinois

Program: McHenry County Crisis Program

What is it? The McHenry County Crisis Program has been a service of Centegra Health System for more than 20 years. It serves as the point of access for all behavioral health emergencies in McHenry County. The program consists of: a 24/7 crisis line for referrals and information, a suicide hotline and a dispatch line for on-site crisis support, a 24/7 mobile response unit to any location in McHenry County; and Psychiatric Emergency Services, an innovative, new program at Centegra Hospital-Woodstock focused on crisis intervention with patients who arrive at the emergency department.

Who is it for? McHenry County residents who need emergency behavioral health services.

Why do they do it? The primary goals are to provide prompt, compassionate and effective behavioral health services to individuals so they can get past the immediate crisis and function safely in the community.

Impact: In FY 2015, the crisis line assisted more than 13,600 callers, and on-site associates assessed and linked 5,545 individuals to appropriate services.

Contact: Erin Williams, Psy.D.
Licensed Clinical Psychologist,
Clinical Manager of Crisis Services
Telephone: 815-334-5088
Email: ewilliams@centegra.com

Columbia Memorial Hospital – Astoria, Oregon

Program: Sports Medicine Outreach

What is it? The Columbia Memorial Hospital Sports Medicine Outreach Program, which began in 2012, provides a Certified Athletic Trainer (ATC) to local schools at no cost to them and pays for each school to have electronic concussion management testing (ImPACT). The ATC attends sporting events, practices and parent/coach meetings; provides on-the-field emergency assistance; performs baseline and post-injury concussion assessments; and
makes recommendations and referrals for necessary medical care.

**Who is it for?** Student athletes at the area’s four high schools and middle schools.

**Why do they do it?** Having an ATC available means injuries will be addressed, and injured athletes will get the help they need sooner, so they can heal faster and return to sport safely.

**Impact:** Since implementation, the ATC has performed more than 1,000 baseline ImPACT tests, post-tested more than 100 athletes due to suspicions of a head injury or concussion, and performed hundreds of orthopedic injury evaluations and treatments.

**Contact:** Jarrod Karnofski, P.T., D.P.T., A.T.C.  
Vice President, Ancillary & Support Services  
Telephone: 503-338-4519  
Email: jkarnofski@columbiamemorial.org

**Emory Healthcare – Atlanta, Georgia**

**Program:** Emory Healthcare Veterans Program

**What is it?** On Sept. 1, the Emory Brain Health Center launched the Emory Healthcare Veterans Program, a free, comprehensive care and treatment program for post-9/11 veterans with post-traumatic stress disorder, traumatic brain injury and other service-related conditions. It combines behavioral health care, including psychiatry and neurology, with rehabilitative medicine, wellness and family support to help heal the invisible wounds of war. The program is a member of the newly established Warrior Care Network, a national network funded by the Wounded Warrior Project. The Emory program has two patient-care formats: outpatient services for veterans who can drive to weekly appointments and an intensive two-week outpatient program for veterans from across the country coming to Atlanta.

**Who is it for?** Qualified post-9/11 veterans, regardless of discharge status, deployment history or length of service.

**Why do they do it?** It is important to be able to meet a veteran where he or she is and provide individualized treatment plans using a collaborative approach.

**Impact:** The program plans to serve 1,000 veterans over the next three years.

**Contact:** Robin Reese  
Associate Director, Media Relations  
Telephone: 404-727-9371  
Email: robin.j.reese@emory.edu

**Frisbie Memorial Hospital – Rochester, New Hampshire**

**Program:** Frisbie Smiles

**What is it?** Since 1999, Frisbie Memorial Hospital’s school-based dental education program, Frisbie Smiles, has partnered with local community schools to provide fluoride treatments, sealants and screenings, and oral hygiene and nutrition education to children in 11 schools.

**Who is it for?** First- through third-grade children in Rochester, Somersworth and Milton.

**Why do they do it?** The goal is to improve awareness of the importance of good dental hygiene and overall health through education and prevention.

**Impact:** Since its inception, Frisbie Smiles has provided dental education to thousands of children as well as increased access to preventative dental services. As a result, there has been a steady decrease in untreated decay reported as well as an increase in the number of children receiving dental sealants. During the 2014-2015 school period, Frisbie Smiles applied a total of 187 sealants to 24 students. Data indicate that 20% of students screened had untreated decay, which is a 23% decrease since 2003.

**Contact:** Michelle Landry  
Marketing & Communications  
Telephone: 503-330-8986  
Email: m.landry@fmhospital.com

**Graham Hospital – Canton, Illinois**

**Program:** Health & Wellness Connection of Fulton County (HWCFC)

**What is it?** The HWCFC is a care management facility that works closely with Graham Health System. The facility assists qualified individuals with free services including help with medication costs and diabetic supplies, vision and dental care costs, health education classes, transportation costs, blood pressure checks, flu shots, weight monitoring, provider follow-up and co-payments. Individuals not qualifying for services are referred to appropriate organizations.

**Who is it for?** Fulton County residents ages 19 to 64 whose income is at or below 250% of current federal poverty guidelines.

**Why do they do it?** HWCFC previously was a clinic that provided services to uninsured residents. Now that most of the clinic’s patients have some sort of medical coverage, the facility has modified its services to meet community need.

**Impact:** From January through September 2015, HWCFC has provided patients/clients with a combined total of more than $10,000 in medication and supplies, dental care, eye care, diabetic supplies, transportation fees and personal supplies.
Community Connections

- **Grand Strand Medical Center – Myrtle Beach, South Carolina**
  
  **Program: HealthFinders**
  
  **What is it?** HealthFinders is Grand Strand Health's community health resource center, located in Coastal Grand Mall. It offers a variety of health seminars, screenings, classes and special events. HealthFinders provides a convenient way to obtain low-cost screenings, hospital information, health education and more. Hospital personnel and physicians on staff at Grand Strand Medical Center are monthly speakers at HealthFinders. Activities at HealthFinders include childbirth classes, diabetes education, daily screeners, Annual Health Fair, free health assessments (stroke, peripheral arterial disease and foot), CPR training, yoga classes, support groups and Ask the Pharmacist. HealthFinders is open 10 a.m. to 8 p.m. Monday through Friday, and 10 a.m. to 7 p.m. on Saturday.
  
  **Who is it for?** Horry County and surrounding communities.
  
  **Why do they do it?** HealthFinders’ purpose is to provide the community with hospital information, health education and free or low-cost screenings.
  
  **Impact:** In 2014, more than 13,000 people participated in an event, seminar, screening or class at HealthFinders.
  
  **Contact:** Caroline Preusser
  
  **Telephone:** 843-839-9933
  
  **Email:** caroline.preusser@hcahealthcare.com

- **Health First – Melbourne, Florida**
  
  **Program: Adult Dental Clinic**
  
  **What is it?** In 2011, Health First identified a need with low-income Brevard County residents without dental insurance. Because demand was far exceeding the availability of free or low-cost dental services, these residents routinely went to Health First’s emergency department (ED) presenting with acute dental pain, seeking treatment with either pain medication or antibiotics. Without an appropriate referral for follow-up, the patient’s dental problem was only temporarily resolved. Health First’s Adult Dental Clinic, a partnership with the Florida Health Department, is a weekly clinic for patients to receive follow-up treatment by a licensed dental hygienist and dentist.
  
  **Who is it for?** Low-income Brevard County residents without dental insurance and a regular dentist.
  
  **Why do they do it?** Often, patients returned to the ED with the condition worse than before – sometimes with a potentially life-threatening condition.
  
  **Impact:** Since its inception in 2011, the dental clinic has provided nearly 1,540 appointments, 1,000 examinations, 1,120 X-rays and 1,100 extractions, at an estimated savings to patients of $343,430.
  
  **Contact:** Maureen Tills
  
  **Email:** maureen.tills@health-first.org

- **Holy Rosary Healthcare – Miles City, Montana**
  
  **Program: SmileSavers**
  
  **What is it?** Since 2005, the Holy Rosary Healthcare Foundation has partnered with local dental practices and the Ronald McDonald Care Mobile to provide dental services for eligible youth in the community. Care is provided by a committed team of dental assistants, dental hygienists and dentists who provide complete dental care (except orthodontia) to children onsite; this includes fluoride treatments, tooth removal and cavity filling. Each child also receives take-home floss, toothbrush, toothpaste and a timer. Also, the program sends dental experts into classrooms annually to provide brief educational sessions. In 2015, the program was expanded to two free dental days, during which uninsured adults in the region receive care from local dentists.
  
  **Who is it for?** Youth with dental needs living in a 10-county area in eastern Montana.
  
  **Why do they do it?** Recent census data indicate that approximately 74% of children in Montana do not have dental insurance.
  
  **Impact:** More than 1,600 children have received free dental care.
  
  **Contact:** Jackie Muri, C.F.R.E., C.G.P.A., M.S.L.
  
  **Email:** hrh-foundation@sclhs.net

- **Kingman Regional Medical Center – Kingman, Arizona**
  
  **Program: Women’s Health Expo**
  
  **What is it?** At Kingman Regional’s annual Women’s Health Expo, more than 35 organizations participate in the free event, offering screenings and information to enhance the health and well-being of women in the community. Attendees can receive a free flu vaccination and schedule a free mammogram. Women also can enter to win a $100 grocery card by taking the Women’s Health Pledge. Among the many offerings, participants can obtain information on exercise, nutrition, stress relief, osteoporosis and family planning; they also can learn more about their health insurance options.
  
  **Who is it for?** Area women.
  
  **Why do they do it?** The goal is to encourage area women to take care of themselves like they take care of others.
Impact: Nearly 400 people attended the 2015 event, taking advantage of the free health-related screenings and information.

Contact: Teri Williams
Public Relations
Telephone: 928-681-5061
Email: twilliams@azkrmc.com

**Lakes Regional Healthcare – Spirit Lake, Iowa**

**Program:** Hearing Check Kiosk

**What is it?** Lakes Regional Healthcare (LRH) and Precision Hearing Center (PHC) hosted a hearing check kiosk during May, which is National Better Hearing Month. A portable kiosk was stationed in various areas of the LRH campus, where individuals were able to check their hearing for free. The check took about five minutes and involved simply putting on headphones and touching the iPad screen located in the kiosk. Results were sent to PHC, where hearing specialists mailed a report to each participant or called to set up an appointment to have a hearing test, based on the option chosen at the kiosk.

**Who is it for?** Community residents and visitors.

**Why do they do it?** According to the National Institutes of Health, one in eight people in the United States ages 12 years and older has hearing loss in both ears.

**Impact:** Many people completed the hearing check. Of those, roughly one out of every seven people ultimately had a full evaluation of their hearing and received hearing aids and implants.

**Contact:** Jennifer Gustafson
Vice President, Marketing & Retail Services
Telephone: 712-336-8799
Email: jennifer.gustafson@lakeshealth.org

**Mount Carmel Health System – Columbus, Ohio**

**Program:** Street Medicine

**What is it?** An extension of the Outreach Mobile Coach Program, the Street Medicine team serves individuals in homeless camps by providing them with free, on-site medical care and resources. The team offers extensive case management services, helping homeless persons overcome barriers to obtaining housing, for example. The patient advocate works with patients to help them accomplish many things, including acquire IDs, get transportation to medical and mental health appointments scheduled by the team and connect with a Medicaid application specialist.

**Who is it for?** Homeless individuals in Columbus.

**Why do they do it?** Many homeless individuals do not seek medical attention until a situation escalates and requires emergency care and/or hospitalization. By reaching patients where they are, the Street Medicine team is able to treat symptoms before they become more serious, as well as fulfill the mission of the Mount Carmel Health System to serve the vulnerable and underserved.

**Impact:** Street Medicine has more than 800 encounters each year.

**Contact:** Ladonya Brady, R.N., B.S.N.
Mount Carmel Outreach Clinical Manager
Telephone: 614-546-4236
Email: lbrady@mchs.com

**North Oaks Health System – Hammond, Louisiana**

**Program:** Annual Physical Days for Student-Athletes

**What is it?** North Oaks has sponsored the Tangipahoa Parish Physical Day for 24 years and the Livingston Parish Physical Day for five years for students to fulfill Louisiana High School Athletic Association requirements to participate in school athletic programs. Approximately 30 providers, as well as 200 North Oaks employees and Southeastern Louisiana University (SLU) Athletic Training Program students, volunteer to conduct the free physicals.

**Who is it for?** Area junior high and high school student-athletes, cheerleaders, dance team and band members.

**Why do they do it?** The physical requirement presents a barrier to sports participation for some students. By partnering with area providers, the parish school systems and SLU, resources are combined to perform physicals as a community service.

**Impact:** On average, nearly 2,000 student-athletes from more than 30 schools participate annually. Families benefit from the cost savings (average physical exam cost of $78), North Oaks benefits from the brand exposure and providers/team physicians benefit from the efficiency of the physicals.

**Contact:** Melanie Lanaux Zaffuto
Manager, Public Relations
Telephone: 985-230-6555
Email: zaffutom@northoaks.org

**Our Lady of Lourdes Regional Medical Center – Lafayette, Louisiana**

**Program:** St. Bernadette Clinic

**What is it?** Established in 1995 in collaboration with the Diocese of Lafayette and Our Lady of Lourdes, the St. Bernadette Clinic provides non-emergency, acute medical services to the homeless and the poor at no charge, including limited screening for early detection of cancer and limited dental services to low-income, uninsured and underinsured individuals living in Acadiana. The clinic coordinates services to provide chronic care, follow-up care of other illnesses and health care problems, dental care, eye care referrals, pharmacy referrals for medication assistance and...
resources for other needs. Open five days a week, the clinic is staffed by a nurse practitioner, a registered nurse, a medical assistant and volunteers.

Who is it for? Homeless, sheltered and uninsured poor.

Why do they do it? The clinic was created to meet needs identified in a community health assessment survey.

Impact: The clinic provides approximately 3,200 medical visits per year valued at $324,000 and 550 dental visits per year valued at $250,000.

Contact: Elisabeth Arnold
Associate Vice President, Marketing & Corporate Communications
Telephone: 337-470-2251
Email: elisabeth.arnold@lourdesrmc.com

PeaceHealth Ketchikan Medical Center – Ketchikan, Alaska

Program: Saturday Pediatrics Clinic

What is it? The PeaceHealth Medical Group Pediatric team in Ketchikan offers a Saturday Pediatrics Clinic from 10:00 a.m. to 2:00 p.m. Sometimes parents simply don’t want to wait until Monday to have their child see a doctor. Or maybe a child needs a follow-up visit to change a bandage or check on progress after being in the hospital or emergency department (ED). This is also the perfect time for parents to schedule a well-child exam or sports physical so that their child does not miss any school.

Who is it for? Area infants and children.

Why do they do it? PeaceHealth is working hard to improve access to care. In Ketchikan, where there are no urgent care clinics, this includes helping patients avoid unnecessary visits to the ED over the weekend for issues best handled by their primary care physician or pediatrician.

Impact: Since beginning to offer the Saturday clinic in early 2015, physicians have seen 8 to 12 children each weekend.

Contact: Mischa Chernick
Marketing & Communications Manager
Telephone: 907-228-8300, ext. 7176
Email: michernick@peacehealth.org

Phoenix Children’s Hospital – Phoenix, Arizona

Program: Crews’n Healthmobile (CNH)

What is it? In 2000, the CNH was created to provide free, primary and preventative health care to homeless and at-risk youth. The program has grown from four half-day clinics to serving nearly 2,000 youth each year through 29 weekly clinics located at schools, shelters, resource centers and group homes.

Who is it for? Youth up to 24 years old who are homeless or at risk of homelessness, regardless of insurance status or ability to pay.

Why do they do it? Thousands of youths live on the streets of Phoenix, with many in desperate need of medical care. Most of these youth do not have health insurance and have major barriers in accessing health care.

Impact: In the past year, CNH served nearly 2,000 patients through 14,400 encounters. CNH began utilizing two mobile medical units six months ago; there has been a 28% increase in patients seen compared with the same time period last year.

Contact: Randy Christensen, M.D., M.P.H.
Medical Director, Crews’n Healthmobile
Division Chief, Pediatric & Adolescent Medicine
President, Medical Staff
Telephone: 602-933-5345
Email: rchriste@phoenixchildrens.com

Rehabilitation Hospital of the Pacific – Honolulu, Hawaii

Program: Creative Arts Program

What is it? Established in 1994, the Creative Arts Program uses a variety of art media, such as painting or ceramics, as a treatment modality. This innovative therapeutic art studio complements the hospital’s existing therapy programs to enhance the rehabilitative process and improve the quality of life of individuals recovering from neurological injury or illness such as spinal cord injury, traumatic brain injury or stroke.

Participants work with the program coordinator to identify physical and/or cognitive therapeutic goals to include in their individualized treatment plans.

Who is it for? The hospital’s current inpatients and outpatients recovering from a neurological condition or illness.

Why do they do it? Patients benefit from the creative process by identifying challenges, learning to adapt with new skills and developing proficiency with their abilities.

Impact: More than 700 patients have benefitted from more than 70,000 art sessions. Several of their art pieces are displayed and available for purchase in the hospital and outpatient clinic areas (with 50% of proceeds going to the program).

Contact: Sheri Matsumoto
Marketing Manager
Telephone: 808-566-3549
Email: smatsumoto@rehabhospital.org

Renown Regional Medical Center – Reno, Nevada

Program: Pregnancy Center

What is it? Renown’s Pregnancy Center provides prenatal care to expectant mothers in the community who are underserved or are in a
Access and Quality

Rochester Regional Health – Rochester, New York
Program: Refugee Healthcare Program
What is it? To help treat the unique needs of refugees, the Refugee Healthcare Program hired previously resettled refugees as “patient navigators” to offer interpretation and care coordination. They also share resources among many partners including the area’s primary refugee resettlement agency, the Department of Human Services and the Department of Public Health. The program recently launched the Center for Refugee Health to care for refugee and immigrant populations in Rochester.
Who is it for? Refugees in the Rochester area.
Why do they do it? The number of refugees continues to grow. Approximately 10% of Rochester’s residents are former refugees with unique needs that include inadequate past medical care, exposure to untreated diseases and experiences that include torture and terrorism.
Impact: Since 2008, 96% of the more than 5,000 refugees arriving in Rochester have established care with a primary care provider, and the number of culturally competent providers has drastically increased.
Contact: James Sutton
President & Chief Executive Officer
Telephone: 585-922-6400
Email: james.sutton@rochesterregional.org

Rice Medical Center – Eagle Lake, Texas
Program: School-Based Telemedicine
What is it? A partnership among Rice Medical Center, Episcopal Health Foundation and school districts in the county, this school-based telemedicine program can see 50 to 60 children in a couple of days, some as far away as 400 miles. Doctors in Eagle Lake provide primary care services and urgent care when needed, treating everything from fevers and rashes to sprained ankles. The available tools – such as a stethoscope with Bluetooth technology and a high-definition camera – allow for accurate diagnosis and treatment across the miles.
Who is it for? All students on seven campuses throughout Colorado County.
Why do they do it? Many of the students are uninsured or underinsured. Before, they would probably stay home, miss school and not be seen by a physician. Now, they have access to high-quality care.
Impact: The program had set a goal of 36 patient encounters for the first year. Between the first encounter on March 23, 2015, and Oct. 15, 2015, Eagle Lake doctors conducted more than 100 school-based encounters.
Contact: Jim Janek
President & Chief Executive Officer
Telephone: 979-234-5571
Email: jjanek@ricomedicalcenter.net

Rutland Regional Medical Center – Rutland, Vermont
Program: Advance Directive Explainer
What is it? In 2012, the Rutland Community Health Team started an Advance Directive (AD) Explainer program that uses trained hospital volunteers to facilitate the completion and filing of ADs for healthy adults. Program volunteers navigate the process, explain the forms, help clients express their wishes and file with the Vermont Advance Directive Directory, a web-based database that supports electronic access for providers. Volunteers also increase awareness about the importance of planning and documenting end-of-life choices.
Who is it for? Self and provider-based referrals in the Rutland Regional service area.
Why do they do it? The foundation of Vermont’s Blueprint for Health and development of Community Health Teams is to provide patient-centered care. Advance directives allow patients to plan the care they want in situations where they cannot speak for themselves.
Impact: During the fiscal year ending September 2015, the four trained AD explainer volunteers, who
work three to four hours per week, addressed more than 300 referrals.

**Contact:** Debbie Schoch
Volunteer Services Manager
**Telephone:** 802-747-3857
**Email:** dschoch@rrmc.org

♦ **Saint Francis Medical Center – Cape Girardeau, Missouri**

**Program:** Free Health Screenings

**What is it?** Saint Francis offers free health-screening opportunities for lung, breast and skin cancers, heart disease, stroke and more throughout the year and annually. Lung cancer screenings are available to individuals who have smoked in the past or who currently smoke. Computed tomography screenings are free and offer an opportunity for members of the community to detect lung cancer in its earliest stages, when it is most treatable. Saint Francis offers free skin cancer screenings in Cape Girardeau and other locations in the region each year.

**Who is it for?** At-risk members of the community.

**Why do they do it?** A community health needs assessment ranked cancer, heart disease and stroke as priority concerns for the region.

**Impact:** One hundred forty-three individuals have participated in free lung cancer screenings. Skin cancer screenings serve 150 to 200 participants per year. In 2014, nearly 200 individuals participated and five potential skin cancer cases were identified.

**Contact:** Emily Blattel
Communications Specialist
**Telephone:** 573-331-5327
**Email:** eblattel@sfmc.net

♦ **St. Joseph Health Queen of the Valley Medical Center – Napa, California**

**Program:** Integrated Behavioral Health Initiative

**What is it?** The hospital has integrated behavioral health screenings and services into its programs and collaborates with community partners to address service gaps. In 2006, the hospital launched a postpartum depression program with local providers to screen all pregnant and postpartum women in the county and offer free counseling and referral services to at-risk women. In 2008, the hospital integrated behavioral health into the CARE Network to provide free assessment and mental health services to low-income, chronically ill or high-risk recently hospitalized clients. The hospital recently partnered in implementing the “Healthy Minds, Healthy Aging Program,” a community-based behavioral health initiative for underserved older adults at risk for behavioral or cognitive health issues.

**Who is it for?** Underserved individuals needing access to behavioral health services.

**Why do they do it?** There is a critical gap in access to mental health services for low-income, Spanish-speaking or older individuals.

**Impact:** Last year, the programs screened 1,650 individuals and served more than 230 clients with nearly 1,130 therapy sessions. Of the clients that completed services, 90% demonstrated improvement in depression symptoms.

**Contact:** Dana Codron
Executive Director, Community Outreach
**Telephone:** 707-251-2013
**Email:** dana.codron@stjoe.org

♦ **University of Pennsylvania Health System – Philadelphia, Pennsylvania**

**Program:** Puentes de Salud (Bridges of Health)

**What is it?** Since it opened a decade ago, Puentes de Salud has grown to be recognized as a national model for immigrant health and wellness. The new 7,000-square-foot clinic and education center opened its doors in April 2015 as the program’s permanent home. Penn Medicine donated space to establish the clinic and assisted with its $1.2 million renovation. The facility offers an array of treatment, diagnostics, and educational and language services, and partners with Latina Community Health Services to provide comprehensive prenatal and obstetrical care.
Who is it for? Latino immigrants in the Philadelphia region.

Why do they do it? Puentes was created to provide low-cost primary care and a range of educational and social services to the city's Latino immigrants.

Impact: Nearly 5,000 patients are in Puentes’ electronic medical records system and more than 4,500 patient visits were registered last year. With the transition to the new health and wellness center, clinicians should be able to see more than 10,000 patients annually.

Contact: Steven Larson, M.D.
Executive Director
Telephone: 215-454-8000
Email: puentes.de.salud@gmail.com

♦ Virginia Commonwealth University Medical Center – Richmond, Virginia

Program: VCU House Calls

What is it? Since 1984, VCU House Calls has been providing longitudinal primary care medical home visits, both scheduled and urgent, for patients too ill or disabled to get to a doctor's office. House Calls’ clinical staff members make home visits every weekday.

Who is it for? Medicare beneficiaries who have decreased mobility and high illness burden, and who cannot travel to a clinic without great effort.

Why do they do it? House calls create timely access and allow providers to gain a better understanding of the care environment as well as patients’ needs and goals.

Impact: As part of CMS's Independence at Home demonstration, which the VCU House Calls team helped design and develop, the team met all quality measures, had very high patient satisfaction, and reduced total Medicare costs in a group of seriously ill people by 20%. The demo reported year-one savings of $25 million from about 5,600 cases at 17 sites. The demonstration is now in a two-year extension through 2017.

Contact: Carissa Etters
Assistant Director, Public Affairs, VCU Health
Telephone: 804-828-7823
Email: cdetters@vcu.edu

♦ West Kendall Baptist Hospital – Miami, Florida

Program: The Healthy Hub

What is it? The Healthy Hub is a one-stop screening and referral-to-care kiosk that arms residents with information about their health. Free to the public, the Hub operates in the hospital lobby five days a week. Visitors receive screenings including BMI, blood pressure, glucose and cholesterol levels, smoking, exercise and diet. They also take an assessment for a heart score and recommendations for lifestyle improvements. A nurse counsels those in need on lifestyle changes and, when indicated, makes referrals to primary care or non-clinical resources such as fitness programs.

Who is it for? Western Miami-Dade County’s 300,000 residents.

Why do they do it? The Healthy Hub was developed as part of Healthy West Kendall, a hospital initiative to create the healthiest community in Florida.

Impact: Since the Hub opened in October 2014, more than 4,000 people have taken the assessment, 54% of whom have had findings that require education or referral. About one-quarter of Hub users are referred to primary care. Additional Healthy Hubs are planned in 2016.

Contact: Javier Hernandez-Lichtl
Chief Executive Officer
Telephone: 786-467-2011
Email: javierh@baptisthealth.net

♦ WVU Hospitals – Morgantown, West Virginia

Program: Bonnie’s Bus

What is it? Bonnie's Bus is a self-contained, mobile digital mammography unit that travels across the rural, underserved areas of West Virginia, offering breast cancer screenings in a comfortable, convenient environment.

Who is it for? Women throughout the state who have private insurance, Medicaid and Medicare, and uninsured women who are participants in the West Virginia Breast and Cervical Cancer Screening program. With funding from grants and donations, mammograms are provided for women without coverage, so that no woman age 40 or over is ever turned away.

Why do they do it? Mammograms can be difficult to access for women in rural West Virginia. Some of the program’s patrons admitted that they probably would never have had a mammogram without Bonnie’s Bus.

Impact: Since the program began in 2009, Bonnie's Bus has provided more than 10,000 mammograms to West Virginia women and has led to the detection of 35 cases of breast cancer.

Contact: Amy Johns
Director, Public Affairs
Telephone: 304-293-7087
Email: johnsa@wvmmedicine.org
Health Behaviors

Includes tobacco use, diet and exercise, alcohol and drug use, sexual activity
Healthy Behaviors

♦ Allegheny Health Network – Pittsburgh, Pennsylvania

Program: Healthy Ride

What is it? Started in July 2015, Healthy Ride is a bike-sharing program featuring 500 bikes located at 50 docking stations around Pittsburgh. The bikes have chubby tires to tackle rough streets, a cushy seat to soften the ride, a front rack for carrying groceries, fenders to keep puddle spatter off riders’ clothes, front and rear lights for safety, step-through frames and seven gears to handle hills. Bikes cost $2 per half-hour and can be returned at any of the 24/7 self-service kiosks.

Who is it for? All city residents and visitors.

Why do they do it? The program was funded in part by a $1.9 million grant from the Federal Highway Administration to reduce traffic congestion and improve air quality, with additional funding provided by Highmark, Allegheny Health Network and local foundations. By providing a means of active, self-powered transportation, the program promotes a healthier lifestyle through exercise and stress relief.

Impact: The service is averaging more than 12,000 rides a month.

Contact: John Paul
President & Chief Executive Officer
Telephone: 412-330-2432
Email: john.w.paul@ahn.org

♦ Aurora West Allis Medical Center – West Allis, Wisconsin

Program: Transition in Care

What is it? Transition in Care is a community paramedic program implemented by Aurora West Allis Medical Center and the West Allis Fire Department to help reduce hospital readmissions. Specially trained nurses refer recently discharged seniors to paramedics, who conduct a home visit to ensure that patients understand their medications and instructions from their physicians. They also assess the patient’s health and living environment. Findings are then reported to the nurses for follow-up, if needed.

Who is it for? High-risk seniors recently discharged from Aurora West Allis Medical Center.

Why do they do it? Many older patients struggle when they return home after a multi-day stay at the hospital. This program offers hands-on coaching and support from local first responders who can answer questions and welcome patients home.

Impact: After 124 home visits with 29 patients, the fire department saw an 86% decrease in non-vital 911 calls and a 71% decrease in visits to the emergency department.

Contact: Rick Kellar
President
Telephone: 414-328-6000
Email: rick.kellar@aurora.org

♦ Baptist Health – Little Rock, Arkansas

Program: Healthy Children’s Initiative

What is it? The Healthy Children’s Initiative encourages children and adolescents to improve their health through good nutrition and physical activity. We Can® is the primary component of this initiative and includes two after-school programs: CATCH Kids Club® for elementary school-age children encourages a healthy diet and regular, moderate-to-vigorous physical activity; Media-Smart Youth: Eat, Think, and Be Active® is an interactive program for 11- to 13-year-olds that focuses on media awareness and its influence on health. As part of the initiative, children receive a fast food guide that makes it easy to select healthier options at fast food restaurants and incentives.

Who is it for? Children and adolescents.

Impact: After 124 home visits with 29 patients, the fire department saw an 86% decrease in non-vital 911 calls and a 71% decrease in visits to the emergency department.

Contact: Teresa Conner
System Manager, Community Outreach
Telephone: 501-202-2815
Email: teresa.conner@baptist-health.org

♦ The Barbara Bush Children’s Hospital at Maine Medical Center – Portland, Maine

Program: Let’s Go!

What is it? Let’s Go! works to decrease childhood obesity by increasing healthy eating and active living. The program focuses on sustainable environmental and policy changes in child care programs, schools, out-of-school programs, health care practices, workplaces and communities, while educating families on the following daily recommendations: five or more fruits and vegetables, two hours or less of recreational screen time, one hour or more of physical activity, zero sugary drinks, and more water. Successful statewide implementation is supported by partners such as MaineHealth.

Who is it for? Children of Maine.

Why do they do it? A 2011 study recorded obesity rates of 23% among kindergarteners and 24% among fifth-graders in Maine.
Impact: Surveys show that awareness levels and healthy behaviors improved. Children consuming five or more fruits and vegetables a day increased from 28% in 2009 to 33% in 2013 and parent awareness of “5-2-1-0” more than doubled from 26% in 2010 to 53% in 2014.

Contact: Caitlin Loveitt
Marketing Manager
Telephone: 207-662-3825
Email: cloveitt@mmc.org

Berkeley Medical Center – Martinsburg, West Virginia

Program: Annual Apple Trample 5K
What is it? Oct. 17, 2015, marked the 36th year the Apple Trample 5K was held in Martinsburg. The event includes a noncompetitive walking event, followed by the competitive, timed race (“run, walk or roll!”) that offers age group awards. The Wellness Center at Berkeley Medical Center and Two Rivers Treads, in conjunction with a grant received by Healthy Berkeley, offered a “0 to 5K” Training Program to help participants train for the 5K.

Who is it for? All members of the community.

Why do they do it? The Apple Trample is a long-standing tradition, part of a larger community event that celebrates the history and heritage of the area. The training program provided participants the opportunity to get in shape, gain cardiovascular endurance, improve running or walking form and/or improve their time so they would be ready for the Annual Apple Trample 5K.

Impact: In the 2015 Apple Trample 5K, 464 runners and 171 walkers participated.

Contact: Teresa McCabe
Vice President, Marketing
Telephone: 304-264-1223
Email: tmccabe@wvuhealthcare.com

Billings Clinic and St. Vincent Healthcare – Billings, Montana

Program: Healthy By Design
What is it? St. Vincent Healthcare, Yellowstone City-County Health Department (RiverStone Health) and Billings Clinic launched Healthy By Design to encourage, recognize, educate and create a standard of excellence for promoting and improving health by working across sectors of the community. Three concurrent cycles of community health needs assessments have been completed, a community coalition has been built, and priority work has been diversifying and growing. Current priorities include: mental health and substance abuse, healthy weight and access to health services.

Who is it for? Yellowstone County residents.

Why do they do it? A collective-impact framework consisting of shared agenda, measurement and reinforced activities, continuous communication and backbone support, allows the community to embrace and sustain change.

Impact: Accomplishments include: multi-sector coalition engagement, a Complete Streets policy, a gardeners market in a federally recognized food desert, implementation of trauma-informed care strategies, community education on lifestyle activity and a refined medication assistance program.

Contact: Heather Fink
Community Health Improvement Manager, Healthy By Design
Telephone: 406-247-3272
Email: heather@healthybydesignyellowstone.org

Bingham Memorial Hospital – Blackfoot, Idaho

Program: Memorial Field Ballpark
What is it? Bingham Memorial Hospital (BMH) partnered with city officials to have a new ballpark constructed. Since 2007, BMH has donated a total of $250,000 to the city’s baseball complex, with additional funds provided by the city of Blackfoot. Construction on Memorial Field began in spring 2007, and the first full season of use for three completed diamonds began in 2009. Now there are six diamonds for game play at the alcohol-, tobacco- and drug-free facility. In the future, the city hopes to build a concession stand, add a paved parking lot, and install lighting.

Who is it for? Area baseball and softball players.

Why do they do it? In 2006, the City of Blackfoot recognized the need to increase the number of baseball fields to accommodate for the city’s growth.

Impact: The ballpark promotes a healthy lifestyle and provides a safe space for community youth. The complex also is expected to bring increased economic activity and support to this rural community.

Contact: Mark Baker
Director, Public Relations & Marketing
Telephone: 208-785-3858
Email: mbaker@binghammemorial.org

Castle Medical Center – Kailua, Hawaii

Program: Live Well Tobacco-Free Program
What is it? Castle Medical Center’s Wellness & Lifestyle Medicine Center offers a free Live Well Tobacco-Free program for the community and hospitalized patients. The program uses evidence-based strategies for tobacco cessation. Lifestyle behavior changes also are incorporated to promote a healthy body, mind and spirit. Coaching sessions are available either in person at the Wellness Center or via telephone, by certified
tobacco treatment specialists who help clients create a personalized plan to quit tobacco and support them throughout the process.

Who is it for? Oahu residents and hospitalized patients who want to quit using tobacco and/or electronic smoking devices.

Why do they do it? The goal is to help people quit all forms of tobacco, thus improving overall health.

Impact: Data from January 2013 to June 2015 show that 80% of participants complete a 24-hour quit attempt, and 32% are able to quit for at least 30 days. Of that group, more than 53% achieve prolonged abstinence beyond 30 days.

Contact: Jasmin Rodriguez
Director, Marketing & Communications
Telephone: 808-263-5118
Email: jasmin.rodriguez@ah.org

♦ CentraState Healthcare System – Freehold, New Jersey

Program: Teen Drug Prevention and Education

What is it? CentraState’s Student Health Awareness Center (SHAC) has a seven-year history of providing drug-prevention and education events for students, school staff and parents. Through collaborations with other community organizations, programs have included educational events, classroom lessons and speaker presentations. In 2014, the SHAC provided in-class programming for “Life Skills Training,” a substance abuse prevention program for students and parents. The focus for programs has remained on educating youth so they can make empowered decisions.

Who is it for? Youth and teens, administration, staff and community members in Monmouth County area.

Why do they do it? Youth abuse of prescription drugs and heroin is a growing problem in New Jersey.

Impact: A “Red Ribbon Day” educational event was provided to 150 children. More than 200 students and staff from 10 high schools participated in the SHAC’s Annual Teen Summits with speakers on various topics. “Life Skills Training” was provided to more than 200 students.

Contact: Maryellen Dykeman, R.N., M.S.N.
Manager, Community Wellness
Telephone: 732-637-6385
Email: mdykeman@centrastate.com

♦ Children’s of Alabama – Birmingham, Alabama

Program: Southeast Child Safety Institute (SCSI)

What is it? The SCSI, a cooperative program sponsored by Children’s of Alabama and Blue Cross and Blue Shield of Alabama, provides research, education and community services to prevent childhood injuries. Its programs also provide support to other professionals and agencies statewide that advocate for children’s health and safety. In addition, the SCSI distributes printed and electronic educational materials on injury and poison prevention.

Who is it for? Alabama children.

Why do they do it? Childhood injuries are the leading cause of child death, disability and health care expenditures. Numerous models of injury prevention have demonstrated impactful outcomes.

Impact: The SCSI has supported activities leading to child safety legislation, statewide car seat instruction and installation; head injury prevention programs in schools; a 24/7, statewide 800 number for poison information; and assistance to the public and health care professionals. Results include increased car seat and booster seat usage, decreased teen driver fatalities and improved safety awareness among Alabamians.

Contact: Garland Stansell
Chief Communications Officer
Telephone: 205-939-6250
Email: garland.stansell@childrensal.org

♦ Cheshire Medical Center/Dartmouth-Hitchcock Keene – Keene, New Hampshire

Program: Cheshire Coalition for Tobacco-Free Communities

What is it? For 20 years, the Cheshire Coalition for Tobacco-Free Communities has worked to comprehensively address the burden of tobacco through youth prevention, cessation treatment, environmental change and policy advocacy. The coalition, composed of school officials, students, law enforcement, health care providers, school nurses and concerned local citizens, collaborates with local substance abuse coalitions and organizations to work on youth prevention initiatives. The coalition leads tobacco-cessation programs at work sites and in the greater community, works with area employers to implement tobacco-free policies, and partners with property managers to increase the numbers of smoke-free homes throughout the region.

Who is it for? All Cheshire County residents.

Why do they do it? New Hampshire had the third highest rate of teen smokers in the nation at 36% when the coalition was formed. Local school-based risk appraisals confirmed that smoking among youth was a significant issue in local communities.

Impact: The teen smoking rate in 2011 had decreased to 18.1%.

Contact: Kate McNally
Program Manager
Telephone: 603-354-6513
Email: kmcnally@cheshire-med.com
Children’s Hospital & Medical Center – Omaha, Nebraska

Program: Preventing Childhood Obesity
What is it? Children’s Hospital & Medical Center implements proactive solutions to the childhood obesity epidemic, ranging from education in the classroom to multidisciplinary clinical intervention. Children’s annually awards $250,000 in grants to community non-profit partners to support programs that improve the health of children. The Healthy Kohl’s Kids initiative champions healthy eating and fitness through school and community events, an interactive website and extensive advertising. Online health education resources HealthTeacher and GoNoodle are available to area teachers and parents, thanks to a Children’s sponsorship. Free cooking and nutrition classes for families are held at the hospital, led by professional chefs and dietitians.

Who is it for? Children and families in the greater Omaha metro area.

Why do they do it? According to a health assessment, a majority of metropolitan Omaha parents identified childhood obesity as the top health issue facing families.

Impact: Through a wide range of initiatives and collaborations, Children’s program has moved thousands of children toward a healthier lifestyle.

Contact: Celia Ferrel
Marketing Manager
Telephone: 402-955-6955
Email: cferrel@childrensomaha.org

Dixie Regional Medical Center – St. George, Utah

Program: Prescription for Exercise
What is it? Organized by Dixie Regional and implemented by Family Healthcare Clinics, providers prescribe aerobic activity and recommend muscle-strengthening exercise. Clinics track outcomes and encourage activity at every visit.

Who is it for? Patients with chronic disease, obesity, an unhealthy lifestyle or individuals at risk for these factors at the four clinics in southern Utah.

Why do they do it? The 2012 community health needs assessment showed chronic disease and obesity among the most significant health concerns in the community. Research also showed that low-income and food-insecure populations were more likely to be clinically obese. In addition, 2013 baseline clinic records showed that the average patient exercised two or fewer times a week.

Impact: Outcomes for 2014 showed that 15,797 patients were asked about exercise and 6,754 prescriptions were issued. This resulted in an 8.47% increase in patients exercising, the majority of which were getting more than 150 minutes of aerobic exercise a week.

Contact: Terri Draper
Regional Director, Communications
Telephone: 435-251-2108
Email: terri.draper@imail.org

Choctaw Nation Health Care Center – Talihina, Oklahoma

Program: Going Lean
What is it? Going Lean’s main focus is on preventing obesity and promoting healthy lifestyles. The program includes weight-loss initiatives, exercise classes, community gardens, healthy lifestyle coaching, running/walking groups, a cycling team, cooking classes and nutrition education.

Who is it for? The entire Choctaw Nation coverage area consisting of 10½ counties in Southeast Oklahoma, with a special emphasis on youth.

Why do they do it? A 2010 report showed a growing frequency of diabetes, heart disease, high blood pressure and other diseases linked to poor nutrition and obesity among Indian peoples, which are occurring in increasingly younger tribal members.

Impact: Among its many successes, Going Lean has more than 3,000 active members in the PACE (Promoting Active Communities Everywhere) program; to remain active, the member must participate in an event (5K, 10K, 15K or half-marathon) every six months. Going Lean also hosts a three-day/two-night fitness and cultural camp for youth ages 9 to 11 that involves more than 100 youth annually.

Contact: Tammie Cannady
Director, Preventative Health
Telephone: 918-567-7121
Email: tkcannady@cnhsa.com

Duncan Regional Hospital – Duncan, Oklahoma

Program: Hands on Health Interactive Center
What is it? Since September 2008, the Hands on Health Interactive Center has been a place where children can discover the world of health care through “hands-on” play. This 2,400-square-foot facility, located on the hospital campus, is the only interactive learning center completely dedicated to health care. One example of the many high-tech, high-touch exhibits is the Surgical Suite, where students don surgical gowns, masks and caps; view their germ-laden hands under a black light and then see the actual result of handwashing; and then put on surgical gloves to go into the operating room to participate in heart or knee surgery on a life-like mannequin.
Health Behaviors

Who is it for? First- through fifth-grade students.

Why do they do it? The center was created to effectively teach children about personal responsibility for maintaining a healthy body, and to inspire young people to enter the medical field.

Impact: More than 8,400 students have visited the Center since it opened.

Contact: Cyndi Crook
Director, DRH Health Foundation
Telephone: 580-251-8844
Email: cyndi.crook@drhhealthfoundation.org

♦ FirstHealth of the Carolinas – Pinehurst, North Carolina

Program: FirstReach

What is it? FirstHealth of the Carolinas developed FirstReach, a comprehensive, multidisciplinary approach to diabetes outreach and education. FirstReach goals are to increase awareness of signs and symptoms of diabetes and pre-diabetes, implement early diagnosis through screenings and referrals, and improve diabetes management and compliance through intensive education and coordination with primary care providers. FirstReach has created a non-traditional glucose screening program, offers home visits and linkages to primary care for individuals with abnormal results and embeds certified diabetes educators into primary care settings.

Who is it for? Underserved Montgomery County diabetic patients.

Why do they do it? More than 20% of county residents report having diabetes, and nearly 72% are overweight or obese.

Impact: Since 2008, thousands have been screened and hundreds of educational encounters have been conducted. In 2011, 3,279 individuals were screened, with 684 abnormal results detected. From 2007 to 2011, the diabetes rate rose from 16.1 to 20.9 per 10,000; however the diabetes mortality rate went from 40.8 to 22.8 per 10,000.

Contact: Roxanne Elliott
Policy Director
Telephone: 910-715-3487
Email: rmelliot@firsthealth.org

♦ Great Plains Health – North Platte, Nebraska

Program: GPFit!

What is it? Since 2012, the GPFit! initiative has offered many low-cost or no-cost options for people of all ages to engage in healthier lifestyles, create awareness and action around disease prevention and better manage chronic illness. The programs, screenings, education and events through GPFit! are designed to inspire long-term solutions for improving health. Partnering with local organizations, Great Plains Health offers programs such as community wellness events, screenings, free smoking-cessation classes and fun activities year round that encourage fitness and healthy eating.

Who is it for? All residents in the North Platte area.

Why do they do it? GPFit! engages the community to promote healthy lifestyle choices through a variety of programs, education and events.

Impact: To date, nearly 300 community members have completed the GPFit! Couch-to-5K walk or run series, and several hundred people have attended the Community Wellness Series offered quarterly.

Contact: Fiona Libsack
Vice President, Marketing & Support Services
Telephone: 308-696-7498
Email: libsackf@gphealth.org

♦ Hartford HealthCare – Hartford, Connecticut

Program: HealtheMinder App and Pandora Wellness Radio

What is it? Hartford HealthCare provides a free HealtheMinder app and a custom Wellness Radio Pandora station. HealtheMinder, available for iOS and Android platforms (healtheminderapp.com), makes it easy to track many aspects of health, including weight, BMI, calorie intake, blood pressure and glucose levels, and medicine usage. Hartford HealthCare curated the Wellness Radio station, available on Pandora, in collaboration with Pandora’s Music Creation team. A custom music mix was developed, using energetic songs that motivate people to get moving.

Who is it for? Anyone looking for ways to track and motivate better health.

Why do they do it? The goal is to support Hartford HealthCare’s commitment to helping people “connect to healthier” in many different ways.

Impact: The HealtheMinder app was downloaded almost 1,000 times in its first year. More than 6,700 Pandora listeners have signed up for the Wellness Radio station since its launch – and they’ve spent more than 6,300 hours listening to it.

Contact: Rebecca Stewart
Director, Media Relations & Marketing
Telephone: 860-972-4285
Email: rebecca.stewart@hhchealth.org

♦ Kosair Children’s Hospital – Louisville, Kentucky

Program: Bike Safety Rodeos

What is it? The hospital’s Bike Safety Rodeos provide hands-on opportunities for children to learn the rules of the road and the importance of safety measures when cycling. Bike safety
Rodeos are taught by a child advocate through Safe Kids Louisville, a program led by Kosair Children’s Hospital. Each 45-minute rodeo teaches students the importance of wearing a helmet and essential cycling skills, including: mounting and dismounting the bike, changing direction, turning in circles, steering through tight spaces, weaving, stopping quickly, balancing while riding slowly and maneuvering tight turns.

**Who is it for?** Third- through fifth-graders.

**Why do they do it?** Many children in the region do not wear bicycle helmets.

**Impact:** Last year, more than 145 bicycle rodeos were conducted in 50 counties in Kentucky and Southern Indiana, attended by more than 17,000 children. Since the program’s inception, the number of children treated at Kosair Children’s Hospital for bicycle-related injuries has decreased by 45%.

**Contact:** Sharon Rengers, R.N.
Manager, Children’s Hospital Foundation Office of Child Advocacy of Kosair Children’s Hospital
Telephone: 502-629-7337
Email: sharon.rengers@nortonhealthcare.org

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**Legacy Health – Portland, Oregon**

*Program:* My Street Grocery

*What is it?* My Street Grocery is a mobile grocery store (“Molly the Trolley”) that brings fresh, affordable food to people throughout Portland. Molly accepts cash, credit and debit cards, and SNAP/EBT food benefits.

*Who is it for?* Low-income, high-needs, high-risk patients and others who may have trouble accessing fresh, nutritious food.

*Why do they do it?* My Street Grocery was founded independently by Amelia Pape in 2011 as a way to provide people with better access to food. Barriers to access can include cost, mobility, transportation, cooking skills and other life circumstances.

*Impact:* In 2013, Pape partnered with Legacy Medical Group-Good Samaritan, which provided grocery vouchers to patients. Later that year, Whole Foods Market hired Pape as a “food access coordinator” and took over operations of the cart, expanding its reach and its days of operation. The partnership has been so successful, two more Legacy Medical Groups are offering vouchers to their patients, and My Street Grocery now also partners with social service agencies, faith-based organizations and schools.

**Contact:**
Megan Turnell
Public & Community Relations
Telephone: 503-413-7742
Email: mturnell@lhs.org

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**L+M Westerly Hospital – Westerly, Rhode Island**

*Program:* Cardiac Risk Factor Reduction Program

*What is it?* The hospital’s Cardiac Rehabilitation Department, in partnership with the Ocean Community YMCA in Westerly, offers a six-week Cardiac Risk Factor Reduction Program that includes a six-week membership at the Y, a heart rate monitor, three medically monitored telemetry sessions, an individualized exercise prescription created by exercise physiologists and personal trainers, and multiple educational lectures on Risk Factor Reduction and Heart Healthy Eating.

*Who is it for?* Adults of all ages and fitness levels who have at least one of the following risk factors: high blood pressure, diabetes, overweight/obesity, stress, family history of heart disease, sedentary lifestyle and smoking.

*Why do they do it?* The goal is that individuals will build upon their increased physical activity through association with the YMCA and reduce their cardiac risk.

*Impact:* Benefits may include reduced cholesterol and blood pressure, improved control of blood cholesterol, improved quality of sleep, weight loss, increased cardiovascular endurance, increased flexibility and increased muscular strength.

**Contact:**
Bruce Cummings
President & Chief Executive Officer
Telephone: 860-442-0711, ext. 2221
Email: bcummings@lmhosp.org

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**Massachusetts General Hospital – Boston, Massachusetts**

*Program:* Revere CARES

*What is it?* Revere CARES is a community coalition founded in 1997 to reduce substance abuse by empowering the community of Revere, Mass. With support from Massachusetts General Hospital, the coalition engages multiple sectors to successfully advocate for policy, systems and environmental changes to reduce and prevent alcohol, tobacco and other drug use, opioid addiction and overdose among teens and adults. Programs have included after-school alternative activities, social marketing campaigns, changes to liquor licensing policies, medication take-back events and adolescent treatment programs. Revere CARES also has addressed obesity prevention since 2008.

*Who is it for?* Local teens and adults.

*Why do they do it?* In the late 1990s, assessments revealed spiking rates of substance use among teens. Revere CARES was formed to mobilize community assets and reduce risk factors.

*Impact:* Between 1999 and 2013, youth using alcohol in the past 30 days declined from 59% to
## Health Behaviors

<table>
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<tr>
<th>Program</th>
<th>Vietnam Community Outreach</th>
<th>Program</th>
<th>Healthy Eating</th>
<th>Program</th>
<th>Diabetes Self-Management Education</th>
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<tr>
<td>What is it?</td>
<td>The hospital offers specialized services for the area's vulnerable Vietnamese community, which include: supporting Vietnamese-language radio and TV shows promoting health and wellness featuring physicians; collaborating with physicians to provide free health and wellness classes in Vietnamese; offering free clinical breast exams and flu shots, screenings for stroke risk, prostate cancer, hepatitis and bone density; collaborating with the Vietnamese American Cancer Foundation for community health screenings and clinical breast exams; Vietnamese-language cancer support groups; and attending community health fairs.</td>
<td>What is it?</td>
<td>Healthy Eating addresses the cost and accessibility of produce for low-income households, uses food and nutrition as a provider resource to prevent and treat chronic disease and supports the local food system through partnerships with growers. Strategies include: supporting community gardens, mobile farmers' markets, cooking education, prescribing fruits and vegetables for families with overweight children through a FreshRx program and sponsoring a program that provides coupons to purchase produce at local farmers' markets.</td>
<td>What is it?</td>
<td>Diabetes Self-Management Education includes individual and group education on topics such as understanding the diabetes disease process, the relationship between diabetes and food, healthy meal planning, using monitoring results to manage one's diabetes, medication use, how to prevent or delay complications and ways to reduce other health risks related to diabetes. Group education uses</td>
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the interactive and behavioral-based Conversation Maps™. This method addresses topics the participants consider most relevant to their own lives.

Who is it for? People diagnosed with diabetes.

Why do they do it? Diabetes Self-Management Education can help people with diabetes gain confidence in managing their own personal health. Studies show that people with diabetes who have education have better outcomes.

Impact: Education is offered in several locations: Rapid City, Custer, Lead/Deadwood, Sturgis and Spearfish. Last year, the Rapid City Program educated 530 people with an average reduction in A1C of 1.35.

Contact: Brent Phillips
President & Chief Executive Officer
Telephone: 605-755-1000
Email: bphillips@regionalhealth.com

◆ Sakakawea Medical Center – Hazen, North Dakota

Program: Journey to Wellness

What is it? This worksite wellness program was developed to empower individuals to take ownership and responsibility for improving their health. The program works with local business/industry and communities to create a culture of wellness in the workplace to put individuals on a path to success.

Who is it for? Residents of Mercer, Oliver, Dunn and parts of McLean counties.

Why do they do it? The program’s goal is to improve population health specifically related to obesity, physical inactivity and its effect on wellness. The intent is to reduce risk factors for disease and poor health.

Impact: Journey to Wellness has worked with 12 different businesses, some from large industries. Activities have included wellness screens, educational presentations and 1:1 coaching. These employers have shown much progress in changing their culture, and individuals have improved their biometrics through their participation.

Contact: Bert Speidel, R.N., B.S.N.
Certified Worksite Wellness Consultant
Telephone: 701-748-7224
Email: bspeidel@smcnd.org

◆ Sentara Martha Jefferson Hospital – Charlottesville, Virginia

Program: Health and Wellness Services for Stress

What is it? Health and Wellness Services offers programs that help patients manage and decrease their stress, especially following a heart attack or other major disease event. Patients exercise and are monitored by staff, and many participate in free educational forums, classes and support groups focused on stress reduction. Classes address how to identify triggers, anticipate and avoid them if possible, and how to develop and make good use of coping mechanisms.

Who is it for? Any adult suffering from stress.

Why do they do it? Research has shown that as much as 90% of all U.S. doctor visits are stress related. Especially after a major disease event, stress can be life threatening; for example, patients who experience depression following a heart attack are up to four times more likely than patients without depression to die within the next six months.

Impact: Approximately 200 people participate in stress-related wellness forums, classes and support groups every year.

Contact: Cathy Reece
Manager, Health & Wellness Services
Telephone: 434-654-4510
Email: cxlamber@sentara.com

◆ Southeastern Regional Medical Center – Lumberton, North Carolina

Program: Project H.E.A.L.T.H.

What is it? Project H.E.A.L.T.H. (Healthy Eating and Active Lifestyles for Tomorrow’s Health) was designed to encourage schools and communities to eat healthier and increase physical activity to reduce the risk of childhood/adolescent obesity. Educational activities include grocery store tours, promotion of local growers and farmers’ markets, and the installation and promotion of walking trails on school grounds. In 2014, Project H.E.A.L.T.H. established walking trails at 23 elementary schools and 10 middle schools with signage promoting fruit/veggie consumption and activities.

Who is it for? Families in the Robeson County area.

Why do they do it? At the time of the project’s start in 2004, Robeson/Columbus Health Service Area ranked in the top nine for both coronary heart disease (7th) and stroke (9th).


Contact: Reid Caldwell
Government Affairs & Organization Policy Office
Telephone: 910-671-5676
Email: caldwe01@srmc.org

◆ St. Anthony Summit Medical Center – Frisco, Colorado

Program: Summit County Injury Prevention Network

What is it? St. Anthony Summit Medical Center has been the lead agency of the Summit County Injury Prevention Network (SCIPN), which promotes occupant protection within the Central Mountains.
Region. SCIPN launched an eight-week teen seat belt challenge and promoted the campaign to local high schools. Prizes to the schools, social media, sign campaigns and a T-shirt design contest were components of the competition. Fire, emergency medical services, law enforcement and trauma centers provided staffing and expertise to high schools to conduct a peer-led challenge.

Who is it for? Teen drivers in this rural area.

Why do they do it? A community assessment found that teen drivers have the highest risk for motor vehicle crashes, injury and death per miles traveled. This is compounded by the area’s year-round hazardous mountain driving conditions.

Impact: Seat belt use increased from 80% to 92%, representing 300 additional people wearing seat belts.

Contact: Shelly Almroth, R.N., B.S.N.
Trauma Program Manager
Telephone: 970-668-2869
Email: shellyalmroth@centura.org

St. John’s Medical Center – Jackson, Wyoming

Program: Wellness Works

What is it? Wellness Works is a worksite wellness program that promotes stress reduction, healthy eating, physical activity and behavior change. Primary objectives are: (1) reward employees already making healthy lifestyle choices; (2) encourage medium- and high-risk employees to make positive lifestyle changes; and (3) establish a culture of wellness throughout the workplace.

Who is it for? Employees of the Medical Center, the Teton County School District and Teton Science Schools (approximately 1,300 individuals).

Why do they do it? Escalating health care costs have become a primary concern for many employers. With preventable illness accounting for 80% of all health care expenditures, the best hope for reversing this trend is to focus on disease prevention.

Impact: Hospital employees collectively have lost nearly 2,000 pounds, the percentage of employees with no risk factors increased from 20.0% to 28.3% and the percentage of employees reporting stress has dropped from 27.5% to 16.7%.

Contact: Julia Heemstra
Director, Wellness Department
Telephone: 307-739-7244
Email: jheemstra@tetonhospital.org

Texas Health Harris Methodist Hospital Azle – Azle, Texas

Program: Healthy Education and Lifestyles Program (HELP)

What is it? HELP provides access to routine health care, culturally competent care and education, and a support group. HELP care plans are customized based on the individual’s needs, and high-risk program participants receive a kit containing an electronic tablet and other necessary medical equipment to monitor their chronic disease. These tablets are wirelessly linked to the HELP care team, who can then monitor participants’ conditions outside the clinic.

Who is it for? Uninsured patients with a chronic disease.

Why do they do it? Many of these patients had been relying on the hospital’s emergency department (ED) to manage their chronic disease.

Impact: Eighty-one percent of HELP patients have not had any ED visits, inpatient stays among HELP patients have decreased 94%, 77% of diabetic patients’ A1c numbers have improved or stayed the same, and 92% of HELP patients with diabetes have their blood pressure under control.

Contact: Marsha Ingle
Director, Community Relations
Telephone: 817-444-8668
Email: marshaingle@texashealth.org

University Medical Center – Las Vegas, Nevada

Program: You Drink, You Drive, You Lose

What is it? Partnering with more than 20 local organizations, University Medical Center sponsors “You Drink, You Drive, You Lose” to promote safe driving and demonstrate the dangers of drinking and driving. The event uses victim-impact speakers who have lost loved ones as a result of drunk-driving crashes. Additional demonstrations include county firefighters using “jaws of life” to extricate a crash victim from a car, the “seat belt convincer” that allows someone to “feel” the impact of a crash without a seat belt on and various simulations so that teens can learn firsthand how little alcohol it takes to become impaired.

Who is it for? Las Vegas area high school students.

Why do they do it? In 2014, 54 people in Las Vegas died in drug- or alcohol-related traffic crashes. Demonstrations and real stories bring home the message that bad decisions can have a lifetime of impact.

Impact: In 2014, approximately 150 local high school students attended the event.
Waverly Health Center – Waverly, Iowa

**Program:** Youth Tobacco Prevention Program

**What is it?** The program’s goal is to empower local youth to become peer role models by choosing to be free of nicotine dependence. It is designed for peer-to-peer education (high school student to high school student) or mentor students leading lessons and activities in the grade school (high school to middle/elementary school). Waverly Health Center provides training and resources for local schools and organizations to provide these educational opportunities.

**Who is it for?** Youth and student organizations in Bremer County.

**Why do they do it?** Youth are extremely susceptible to nicotine addiction. Research shows that if they do not start before 25 years of age, they will not become addicted to tobacco.

**Impact:** Since the program’s start, hundreds of students have been trained to be leaders in their communities – to live a life free of nicotine dependence.

**Contact:** Brian Pins
Community Health Specialist
Telephone: 319-483-1361
Email: bpins@waverlyhealthcenter.org

Winona Health – Winona, Minnesota

**Program:** Community Care Network (CCN)

**What is it?** Winona Health’s CCN was developed to improve individual health and quality of life, prevent hospitalization and emergency department (ED) visits and avoid unnecessary health care costs. In partnership with Winona State University, CCN trains students to become health coaches. CCN helps people struggling with chronic health conditions that may have a negative impact on all areas of their lives. Health coaches meet with clients in their homes and become non-clinical members of the individual’s care team.

**Who is it for?** Residents in Minnesota and Wisconsin within a 25-mile radius of Winona.

**Why do they do it?** Health coaches are familiar faces who can help clients grasp the big picture of their overall health. CCN supports and empowers clients to take ownership of their health and to make positive changes.

**Impact:** Forty-two trained health coaches have made more than 6,000 visits to 103 clients. ED visits and hospitalizations for CCN clients have declined by more than 85%.

**Contact:** Betsy Midthun
Vice President, Community Engagement
Telephone: 507-457-4116
Email: bmidthun@winonahealth.org
Socioeconomic Factors

Includes education, employment, income, family and social support, community safety
Socioeconomic Factors

*Bradley County Medical Center – Warren, Arkansas*

Program: M*A*S*H Camp

What is it? M*A*S*H (Medical Applications of Science for Health) Camp is a free, one-week summer enrichment program that allows rising high school juniors and seniors to shadow health professionals and attend workshops that enhance their experience in the health care field. M*A*S*H students participate in dissections, casting, suturing, intubation and ventilation, CPR training, job shadowing and much more. The program is sponsored state-wide by the University of Arkansas for Medical Sciences (UAMS) and the Arkansas Farm Bureau Federation.

Who is it for? High school students in 10th or 11th grade that meet program requirements.

Why do they do it? Introducing area youth to careers in health care is crucial to reducing the shortages that have affected the family-practice physician and nursing professions.

Impact: BCMC held its second annual camp in June 2015. Eleven students participated, all expressing interest in health-related fields. The UAMS pre-health recruiter for the region remains available to help these students as they prepare for and enter college.

Contact: Tiffany Holland
Chief Nursing Officer
Telephone: 870-226-4100
Email: tholland@bcmed.org

*Children’s Hospital of Wisconsin – Milwaukee, Wisconsin*

Program: Project Ujima

What is it? Project Ujima is a multidisciplinary collaboration addressing youth and adult violence in Milwaukee using individual, family and community intervention and prevention strategies. Services include hospital-based crisis intervention and case management for youth victims of violence; home-based counseling and referrals for medical follow-up and psychological support; Camp Ujima, a summer day camp for youth exposed to violence; a leadership development group that does community outreach; and a grief program for children and families impacted by the loss of a loved one due to community violence.

Who is it for? Victims of violence and their families.

Why do they do it? The program started in 1996 with the goal of stopping the cycle of violence by offering a complete continuum of services for this population.

Impact: Project Ujima receives an average of 300 yearly referrals, predominantly for youths under 18, for both fatal and nonfatal injury. Services are offered to the victim’s entire family, yielding more than 500 service relationships annually.

Contact: Robert Duncan
Executive Vice President, Children’s Community Services
Telephone: 414-337-8634
Email: rduncan@chw.org

*Children’s National Health System, Howard University Hospital, Providence Hospital, Sibley Memorial Hospital and United Medical Center – Washington, District of Columbia*

Program: District of Columbia Healthy Communities Collaborative (DCHCC)

What is it? The DCHCC is a collaborative of DC hospitals and federally qualified health centers sharing the goal of reducing health disparities and increasing health equity for vulnerable DC populations. In addition, the DCHCC conducted a community health needs assessment and developed a community health improvement plan addressing identified needs. DCHCC also sponsors “DC Health Matters,” an interactive web portal providing actionable local health information along with resources, best practices and information about community events.

Who is it for? The DC community with a focus on the most vulnerable residents.

Why do they do it? The community benefits from DCHCC members working together and sharing resources to advance health in an efficient and community-centered manner.

Impact: In 2014 alone, dchealthmatters.org attracted more than 3,770 unique visitors, 5,700 visits and 18,700 page views. Actionable community health data ensures focus on areas with the largest health disparities.

Contact: Marti Bailey
Director, Sibley Senior Association & Community Health
Sibley Memorial Hospital
Telephone: 202-660-5658
Email: mbaile35@jhmi.edu

*Children’s National Health System – Washington, District of Columbia*

Program: Brainy Camps Association

What is it? Brainy Camps Association, a nonprofit subsidiary of Children’s National Health System, is a consortium of medically managed, condition-specific, residential summer camps and services for children with chronic health conditions. Located in West Virginia, each camp provides children and teens opportunities for them to gain confidence and build self-esteem.
Campers participate in numerous activities, from the traditional – swimming, hiking, arts and crafts, and team sports – to the more novel – trapeze flying, rock wall climbing, go-cart driving and horseback riding. 

Who is it for? Children, teens and young adults with any of 10 types of chronic health conditions.

Why do they do it? Brainy Camps enables participants to meet others with the same conditions, form support groups, learn directly from experts in the field and become partners in managing their own care.

Impact: Brainy Camps has served thousands of children over its 20 years of operation and inspired hundreds of young adults to pursue health-related careers. Campers gain skills to become counselors, leaders and self-advocates, serving as role models in the camps and their communities.

Contact: Sandra Cushner Weinstein
Director, Brainy Camps Association
Telephone: 202-476-5142
Email: scushwei@childrensnational.org

- **CHRISTUS St. Vincent Regional Medical Center – Santa Fe, New Mexico**

- **Program:** Healthcare Exploration Program
- **What is it?** St. Vincent Hospital Foundation’s Healthcare Exploration Program (HEP) is an extraordinary opportunity at CHRISTUS St. Vincent Regional Medical Center for a small, highly motivated, diverse group of high school students to expand and develop their interests in health care. In a rigorous, professional environment, students observe staff in more than 30 different departments. With patient permission, students observe surgery in the operating room, care in rehabilitation and patient care in other departments. Students also learn about the pharmacy, labs and various administrative and non-clinical areas.

- **Who is it for?** Santa Fe County students with an interest in health care.

- **Why do they do it?** Encouraging students to develop their interests in health care enriches their lives and supports a highly skilled workforce in local communities.

- **Impact:** At least 30 HEP alumni in college plan to pursue a career in health care as a physician, nurse or other clinical provider.

- **Contact:** Gina Hayes
  HEP Coordinator
  Telephone: 505-913-4995
  Email: gina.hayes@stvin.org

- **Christiana Care Health System – Wilmington, Delaware**

- **Program:** Helping the Homeless at St. Patrick’s Center
- **What is it?** Christiana Care addresses the medical and social needs of Wilmington’s homeless population through a long-time partnership with St. Patrick’s Center, a community center in one of the city’s poorest neighborhoods. Three Wednesdays each month, Christiana Care volunteers prepare and serve bagged lunches for the homeless at the center. Several times each month, a Christiana Care nurse practitioner takes blood pressure readings and does wellness checks on-site. Social workers and a community educator regularly visit the center to help participants identify available services.

- **Who is it for?** Wilmington’s homeless population.

- **Why do they do it?** On cold winter nights, homeless people would arrive at Christiana Care’s Wilmington Hospital emergency department (ED) seeking assistance with shelter, food and clothing.

- **Impact:** St. Pat’s is now able to provide vital social and medical support services to the homeless. Since Christiana Care teamed up with St. Pat’s, the number of people using the ED for social needs has dropped by 83%.

- **Contact:** Rose Mili
  Senior Manager, Communications & Marketing
  Telephone: 302-327-3320
  Email: rmili@christianacare.org

- **Cincinnati Children’s Hospital – Cincinnati, Ohio**

- **Program:** Therapeutic Interagency Preschool (TIP) Program
- **What is it?** For 26 years, TIP has provided educational, developmental, mental health and safety monitoring services to very young children in need. Currently, TIP cares for 60 children at a time, with a constant waiting list, making use of psychiatrists, mental health, speech, occupational and physical therapists from Cincinnati Children’s; teachers from Hamilton County Head Start; and caseworkers from Hamilton County Children’s Services.

- **Who is it for?** Children under six who have been victims of severe abuse or neglect.

- **Why do they do it?** Overburdened caseloads and court system can mean that decisions on permanent placement can take four years or more. Integrated continuity of care is needed for children who remain in unstable placements, or experience frequent changes in placement.

- **Impact:** Data show that children who participate in TIP for one year, even those who begin the program as the most at-risk, make the most developmental
and behavioral progress of any preschoolers in the County Head Start.

**Contact:** Jane Sites, Ed.D., L.S.W.
**Telephone:** 513-636-4200
**Email:** jane.sites@cchmc.org

**Ellsworth County Medical Center – Ellsworth, Kansas**

**Program:** CampMed

**What is it?** Ellsworth County Medical Center (ECMC) annually hosts a one-day CampMed for students interested in health care careers. The event includes hands-on activities, job shadowing tracks, a college fair, scholarship competition and a grand finale that reenacts an emergency department scenario. Students pay $30 to cover the cost of a T-shirt or scrub top, lunch, snacks and prizes. Colleges participate by providing hands-on demonstrations and having booths. Volunteer judges determine the winning essays during the camp, and scholarships are awarded at the end of the day to the winners.

**Who is it for?** Area high school students interested in health care careers.

**Why do they do it?** CampMed was created by following the best practice of local hospitals staying strategically involved in local high schools to recruit future employees.

**Impact:** The camp helps students clarify which careers they want to pursue. In 2015, CampMed had 80 students from 22 high schools, 12 colleges, 10 hands-on centers, 10 job shadowing tracks, 55 health care careers and $2,500 awarded in scholarships.

**Contact:** Beth Vallier
**Education/Communication/Emergency Preparedness Coordinator**
**Telephone:** 785-472-3111
**Email:** bvallier@ewmed.com

**Gillette Children’s Specialty Healthcare – St. Paul, Minnesota**

**Program:** CurePity® Movement and “It’s Okay to Ask!”

**What is it?** The CurePity Movement is Gillette’s initiative to move attitudes forward – away from pity – and toward acceptance and inclusion for children who have disabilities. In 2014, Gillette published a children’s book that embodies the themes of its CurePity Movement titled “It’s Okay to Ask!” The book gives children and parents a tool to answer questions about disabilities and encourages the formation of positive opinions through friendship.

**Who is it for?** Children, families and communities benefit by fostering a more inclusive world.

**Why do they do it?** The CurePity Movement and “It’s Okay to Ask!” are the cornerstones of Gillette’s commitment to not only provide exceptional care, but also to advocate on behalf of its patients.

**Impact:** Thousands of people have signed the CurePity Pledge to support people who have disabilities. Every elementary school and public library in Minnesota received a copy of “It’s Okay to Ask!” thanks to Gillette’s partnership with CenturyLink.

**Contact:** Dennis Jolley
**Vice President**
**Telephone:** 651-229-1738
**Email:** dennisjolley@gillettechildrens.com

**Hospital Corporation of America – Nashville, Tennessee**

**Program:** Community Resource Centers

**What is it?** In September 2013, HCA became a Jason Foundation, Inc. (JFI) National Community Affiliate and announced plans to establish Community Resource Centers at 10 hospitals to provide adolescent behavioral health services. The
Community Resource Centers serve as hubs where parents, teachers, guidance counselors, students, churches and other community organizations can get educational materials on suicide prevention and learn about training programs available through JFI.

**Who is it for?** Youth and soldiers struggling with mental illness and suicidal thoughts.

**Why do they do it?** According to the U.S. Surgeon General, more teenagers and young adults die from suicide than from cancer, heart disease, AIDS, birth defects, stroke, pneumonia, influenza and chronic lung disease combined.

**Impact:** In 2015 alone, HCA's 10 Community Resource Centers have signed 19 suicide-prevention curriculum agreements with schools and touched more than 46,000 lives through their suicide prevention trainings and outreach efforts.

**Contact:**
- **Ed Fishbough**
  - Assistant Vice President, Communications
  - **Telephone:** 615-344-2810
  - **Email:** ed.fishbough@hcahealthcare.com

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**Ivinson Memorial Hospital – Laramie, Wyoming**

**Program:** Suicide Prevention Task Force

**What is it?** The task force created Suicide Prevention Community Forums to address topics such as community efforts to prevent suicide, how people respond when tragedy strikes, available resources and what to do if you or someone you know might be at risk. Mental health professionals from Ivinson Memorial’s Behavioral Health Services (BHS) and representatives from local schools and community agencies present information and answer questions.

**Who is it for?** The community and surrounding area.

**Why do they do it?** Suicide is the second-leading cause of death for Wyoming youth, who have a suicide rate twice the national average. After five tragic youth suicides in Laramie in 2014-2015, the community came together to form the task force.

**Impact:** An adolescent text line, where teens exchange texts with a member of the BHS staff, has been a great success. The task force plans to advance mental wellness education in the schools to help teachers and youth notice the signs of mental health issues and start prevention early.

**Contact:**
- **Mark Holder**
  - Director, Behavioral Health Sciences
  - **Telephone:** 307-755-4367
  - **Email:** markholder@ivinsonhospital.org

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**Mat-Su Regional Medical Center – Palmer, Alaska**

**Program:** Mat-Su Project SEARCH

**What is it?** Mat-Su Project SEARCH is a community collaborative program that provides training to young adults with disabilities, so they can gain marketable skills and obtain competitive employment within their local community, including Mat-Su Regional Medical Center (MSRMC). Designed as an unpaid internship program, Project SEARCH provides intensive mentoring and hands-on job training through an immersion process. MSRMC provides internships in 16 areas for participants. Individualized job development and placement occurs based on the student’s experience, strengths and skills.

**Who is it for?** Young adults ages 18 to 27 who experience disabilities.

**Why do they do it?** The Mat-Su Project SEARCH team collaborated with the goal of increasing vocational training and employment opportunities for young adults with disabilities.

**Impact:** Students who have completed the program have a 100% employment placement rate. MSRMC has led the community in hiring more than 30% of the Project SEARCH alumni. Mat-Su Project SEARCH currently has the capacity to support 12 students per school year.

**Contact:**
- **Cathy Babuscio**
  - Human Resources Director
  - **Telephone:** 907-861-6576
  - **Email:** c.babuscio@msrmc.com

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**Mount Desert Island Hospital – Bar Harbor, Maine**

**Program:** Coastal Care Team (CCT)

**What is it?** In 2012, Mount Desert Island Hospital partnered with nonprofit organizations in three counties to launch the CCT. The team works closely with patient-centered medical home practices to identify complex, high-need patients who may benefit from additional services. Patients are encouraged to set goals and to make small, consistent changes to aid in successfully managing their chronic disease. CCT is a multidisciplinary model consisting of registered nurses, social workers and health coaches. The team provides assessment, education and assistance with linking individuals to available community resources.

**Who is it for?** Underserved patients with chronic or complex health conditions.

**Why do they do it?** CCT is a lifeline for patients who live in geographic and social isolation. Many have care needs that extend beyond the capabilities of primary care practices.
Impact: CCT has served nearly 2,000 patients on a free and uncompensated basis.
Contact: Lynn Leighton, R.N.
Director of Care Management
Telephone: 207-288-5082, ext. 7801
Email: lynn.leighton@mdihospital.org

Mountain View Hospital – North Payson, Utah
Program: Answers
What is it? Answers is a free seminar series on suicide prevention that helps participants notice the signs that a loved one might be in pain and develop the confidence to ask questions and the skills to help.
Who is it for? Individuals or caregivers who may know a person at risk for suicide.
Why do they do it? The tragedy of a suicide is not only the loss of life, but also the missed opportunity to help. In most suicide situations, at least one attempt was made to reach out. A struggling person’s words or subtle signs are frequently missed, dismissed or avoided. The trainer is herself a survivor of suicide – her father took his own life, and she has made multiple attempts to take her own. Now, she has dedicated her life to this issue and is the founder of the Utah Chapter of the American Foundation for Suicide Prevention.
Impact: The first of these quarterly seminars brought in 30 participants.
Contact: Brett Williams
Director, Outpatient Mental Health
Telephone: 801-465-7178
Email: brett.williams@mountainstarhealth.com

Nemours/Alfred I. duPont Hospital for Children – Wilmington, Delaware
Program: Paralympic Sport Club Designation
What is it? The United States Paralympics Committee, a division of the U.S. Olympic Committee, has designated Nemours/Alfred I. duPont Hospital for Children as a Paralympic Sport Club. With this designation, Nemours joins a community-based club network in 48 states and D.C. offering competitive opportunities for athletes with visual and physical disabilities. Paralympic programs create a larger platform for physical engagement beyond just high-end competition. The clubs are open to children of all ages and participants receive assistance and direction from physical therapists, occupational therapists and athletic trainers.
Who is it for? Children with visual and physical disabilities.
Why do they do it? The designation supports Nemours’ commitment to helping children of all ability levels grow up healthy.
Impact: More than 8,000 participants under 21 are currently involved in Paralympic Sports Clubs. At this time, the program is evolving at Nemours and they are accepting applicants.
Contact: Timothy Duer
Outpatient Therapy Services Manager
Telephone: 302-298-7019
Email: timothy.duer@nemours.org

Newark-Wayne Community Hospital – Newark, New York
Program: Wayne County Rural Health Network
What is it? Since 1997, the Wayne County Rural Health Network, a collaborative partnership of health and human service providers, has provided a forum for the exchange of information among organizations and individuals to identify and address emerging and unmet health and human service needs. The Network develops and implements innovative solutions that one provider alone could not undertake, ranging from registered nurse (RN) workforce development to discounted prescription programs to dental operatory creation, among others.
Who is it for? Wayne County residents.
Why do they do it? The imperative to collaborate, consolidate and share services among providers was driven by rising costs and the need to increase efficiencies to improve community health.
Impact: The Network has benefited thousands of residents and successfully implemented 17 community health programs. Examples include the prescription drug cost savings, which is currently more than $1.5 million saved; and the 25 RNs who received free tuition and work within Wayne County.
Contact: Emilie Sisson
Manager
Telephone: 315-483-3266
Email: emilie.sisson@rochesterregional.org

Spaulding Rehabilitation Network – Charlestown, Massachusetts
Program: Differing Abilities Disability Awareness Program
What is it? Since 2003, the Differing Abilities Disability Awareness Program has helped children develop mutual respect for people with disabilities by fostering a greater understanding of the challenges faced by people with disabilities and creating a more inclusive environment. The program teaches children and educators that all people have different abilities and the importance of including peers with disabilities in everyday activities. Through small-group activities, reading personal stories and other educational tools, children learn to celebrate differences.
Who is it for? Children in Eastern Massachusetts.
Why do they do it? More than 15% of students in Massachusetts public schools have a disability.
Impact: In 2013, the program reached 1,000 students and added one new middle school to the program. Feedback from teachers, students and parents has been overwhelmingly positive.
Contact: Laura Kelly
Differing Abilities Program Director
Telephone: 508-872-2200
Email: lkelly5@partners.org

Contact: Oswald Mondejar
Senior Vice President, Mission & Advocacy
Telephone: 617-952-5882
Email: omondejar@partners.org

St. Mary's Health System – Evansville, Indiana
Program: St. Mary's Kempf Bipolar Wellness Center
What is it? Thanks to a generous donation from the Edwina Kempf family, St. Mary's Kempf Bipolar Wellness Center was created in 2006. Since that time, St. Mary's, in conjunction with Mental Health America (MHA), has provided opportunities for education, networking and services for people living with bipolar disorder. The Wellness Center and MHA facilitate a free, twice-monthly Bipolar Support Group meeting. A clinician from the St. Mary's Inpatient Adult Mental Health Unit attends each meeting to answer questions from the group. The Wellness Center also offers a small library of books, pamphlets and magazines.
Who is it for? Adults living with bipolar disorder, and friends and family members affected by bipolar disorder.
Why do they do it? Early intervention and professional medical treatment offer the best chances for children and adults with bipolar disorder to achieve stability and gain the best possible wellness.
Impact: Through support groups, conferences and medication services, the Wellness Center has had more than 5,000 contacts with those coping with bipolar disorder. In addition, $150,000 has been given to the local chapter of MHA to pay for medications for the region's mental health patients.
Contact: Kammie Barton
Nurse Manager, St. Mary's Behavioral Health
Telephone: 812-485-5025
Email: kamala.barton@stmarys.org

Tidelands Health System – Murrells Inlet and Georgetown, South Carolina
Program: CenteringPregnancy Group Care
What is it? An innovative model of group care, CenteringPregnancy allows a pregnant woman to meet regularly with a nurse-midwife and several women in similar stages of pregnancy for health assessments, education and peer support. The program empowers the mother-to-be by teaching her how to be an active partner in her prenatal care. She learns how to check her blood pressure and test her urine sample, and work with the nurse-midwife to review her medical records, listen to her baby and measure her belly. Expectant mothers receive information about pregnancy stages, breastfeeding and caring for newborns from pediatricians, nutritionists and lactation consultants.
Who is it for? Pregnant women in the area.
Why do they do it? The program is linked to increased birth weight and gestational age of pre-term newborns.
Impact: In Greenville, S.C., a cohort study of almost 4,000 women suggested that women who receive their prenatal care in groups have a 40% lower risk of preterm birth.
Contact: Mary Buono
Practice Manager
Telephone: 843-357-5048
Email: mbuono@carolinaobgyn.com

Swedish Medical Center – Englewood, Colorado
Program: Swedish Community Partnership
What is it? In May 2013, Swedish Medical Center (SMC) partnered with Well-fed Inc., an organization that strives to connect with children physically and emotionally through nutritional and community support. The goal is to provide healthy means for students that are in need of supplemental food during the weekends, holidays and summer months. SMC set a goal to raise 10,000 pounds of food for the Well-fed program over 12 months and on an ongoing basis. SMC hosts supply drives for food, personal care items and winter coats. Employees and physicians also can make cash donations. In addition, every employee that volunteers three hours at the Food Bank of the Rockies earns 20 pounds of food for the Well-fed program.
Who is it for? Struggling Englewood School District families served by Well-fed Inc.
Why do they do it? By aligning with Well-fed Inc., Swedish is making an impact and an investment in Englewood.
Impact: As of September 2015, donations totaled 25,803 pounds of food through 1,358 volunteer hours. Cash donations totaled more than $25,500.
Contact: Nicole Williams
Assistant Vice President, Marketing & Public Relations
Telephone: 303-788-5944
Email: nicole.williams@healthonecares.com
Socioeconomic Factors

♦ University of Maryland Medical Center – Baltimore, Maryland
  
  Program: Violence Intervention Program
  What is it? The Violence Intervention Program is an intensive hospital-based intervention that provides social assistance to victims of violent injury. Victims receive assessment, counseling and social support from a multidisciplinary team to help make critical changes in their lives. Although this intervention is initiated in the hospital, case managers or outreach workers continue to work with patients after discharge to create an individualized action plan designed to reduce risk factors of violent recidivism. Also, participants have peer support groups to practice new skill sets and to celebrate personal accomplishments.
  Who is it for? Victims of violence in Baltimore.
  Why do they do it? Violence is the leading cause of death for young adults in Baltimore.
  Impact: Participants had an 83% decrease in repeat hospitalization, exhibited a 67% decrease in violent crime, a 75% reduction in criminal activity and an 82% employment rate at the time of follow-up.
  Contact: Ruth Adeola
  Violence & Injury Prevention Program Coordinator, R. Adams Cowley Shock Trauma Center
  Telephone: 410-328-9833
  Email: radeola@umm.edu

♦ Western Maryland Health System – Cumberland, Maryland
  
  Program: The Center for Clinical Resources
  What is it? The Center for Clinical Resources is a centralized, interdisciplinary approach to care coordination for individuals who have one or more chronic health conditions. A multidisciplinary team provides patients with the interventional care, education and support needed to manage chronic conditions and reduce patient use of emergency department (ED), observation unit and inpatient services. The team also links patients to community-based services and agencies to address socioeconomic needs such as food, housing and utilities. All services are provided at no charge.
  Who is it for? Chronic disease patients at high risk for ED visits, hospital admissions and readmissions.
  Why do they do it? Care coordination improves health outcomes and decreases costs.
  Impact: In the first 18 months, diabetic patients experienced a 12% decrease in admissions, and congestive heart failure admissions were down 27%. Of the anticoagulation patients, 64% have not had any hospital visits since being managed by the team.
  Contact: Jo Wilson
  Vice President, Operations
  Telephone: 240-964-7223
  Email: jowilson@wmhs.com
Physical Environment

Includes air and water quality, housing, and transit
**Atlantic Health System – Morristown, New Jersey**

**Program:** Healthy Communities

**What is it?** In 2014, Atlantic Health System launched Healthy Communities, an initiative dedicated to improving health equity through culturally specific health services and community-based care coordination. The initiative also makes it easier for communities to lead healthy lifestyles by investing in built environment and policy change through Healthy Communities grants for local communities working to promote healthy eating and active living.

**Who is it for?** Underserved communities in Northern New Jersey.

**Why do they do it?** Healthy Communities supports eliminating health disparities as part of its disease prevention and health promotion efforts.

**Impact:** Culturally specific health outreach workers provide health education and community-based care coordination to 8,000 individuals each year. Healthy Community grants funded eight local communities in 2014, with projects including walkability audits and the creation of walking paths and community gardens. In 2015, in partnership with the New Jersey Healthy Communities Network, 10 to 15 additional grants will be provided to communities throughout the Atlantic Health System service area.

**Contact:**
- Ashley Anglin
  - Coordinator, Healthy Communities
  - Telephone: 908-522-5355
  - Email: ashley.anglin@atlantichealth.org

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**Children's Mercy – Kansas City, Missouri**

**Program:** Center for Environmental Health (CEH), Healthy Homes Program

**What is it?** The Healthy Homes program is a partnership between the CEH, other Children’s Mercy staff, health care providers, community organizations and families to identify and reduce indoor environmental exposures that may cause or worsen health. With the holistic healthy homes approach, CEH staff have been trained to observe and characterize environmental exposures, and recommend action steps to eliminate exposures to create and maintain a safe, healthy home.

**Who is it for?** Children in the Kansas City area and throughout the region.

**Why do they do it?** The initial focus was home assessments for Children’s Mercy patients with asthma, looking solely for asthma-related triggers. The program has expanded to include children throughout the region with a focus that includes other environmental hazards such as lead-based paint and carbon monoxide, providing a more complete picture of environmental risk related to health.

**Impact:** More than 1,000 families have participated in the healthy homes program since its inception.

**Contact:**
- Lisa Augustine
  - Manager, Media Relations
  - Telephone: 816-302-0197
  - Email: laugustine@cmh.edu

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**Deaconess Health System – Evansville, Indiana**

**Program:** Homeless Medical Respite Program

**What is it?** Deaconess Health System partnered with United Caring Services (a men’s homeless shelter) to create a six-bed Homeless Medical Respite Program (HMRP). The purpose of the program is to reduce hospital readmission rates for the homeless population and connect the men with community/homeless services.

**Who is it for?** Homeless men who need a safe, sanitary place to recover following an inpatient hospital stay. The men must meet admission criteria to be referred to HMRP.

**Why do they do it?** Before this program, physicians would discharge the men to their previous environment. Without sanitation, medication management or support services, these patients would return to the hospital quickly.

**Impact:** From Nov. 2014 to Jul. 2015, 29 men spent a collective total of 898 nights in the respite. Upon discharge from the respite, 10 men had permanent supportive housing and two went to a nursing home. Readmission rates for the men were cut in half. Plans are being made to expand the HMRP to women.

**Contact:**
- Ashley Johnson
  - Corporate Communications Specialist
  - Telephone: 812-450-7520
  - Email: ashley.johnson@deaconess.com

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**Hayes Green Beach Memorial Hospital – Charlotte, Michigan**

**Program:** Charlotte Step by Step

**What is it?** Led by Hayes Green Beach Memorial Hospital, Charlotte Step by Step is a network of regional partnerships to improve walkability, improve air quality and build a non-motorized transportation plan. Working across an organization, across the community, and then across the region, a multi-faceted plan for non-motorized transportation sets the stage for improving safety, fitness, air quality and access to services.

**Who is it for?** Mid-Michigan residents.

**Why do they do it?** According to the 2000 Census, roughly 18% of the local population have disabilities and are in dire need of pedestrian accommodation.

**Impact:** Charlotte Step by Step created a non-motorized transportation plan in collaboration with
Regional organizations and agencies. It has produced a historical walking tour and map, engaged a local artist to paint a mural that promotes a walking path, and is currently placing way-finding signs around town to encourage more walking and biking as a means for transportation and recreation.

**Contact:** Barbara Fulton
Director, Community Development
Telephone: 517-543-1050
Email: b Fulton@hg B health.com

**Mary Bridge Children’s Hospital/MultiCare Health System – Tacoma, Washington**

**Program:** Clean Air for Kids (CAFK)

**What is it?** CAFK is an asthma-management program that works to reduce asthma morbidity and mortality by mitigating and eliminating environmental triggers. They also provide prevention education and management services to families with chronic respiratory concerns and/or allergies by conducting free home visits and outreach classes. Families that participate receive medical adherence education, air quality measurements, environmental assessments, recommendations and supplies to improve asthma management. CAFK is a partnership between Mary Bridge Children’s Hospital, Tacoma-Pierce County Health Department, Puget Sound Asthma Coalition and MultiCare service area providers.

**Who is it for?** Families with children diagnosed with chronic respiratory conditions.

**Why do they do it?** An estimated 20,000 children have asthma in Pierce County. The region has unique environmental challenges including a damp climate, mold, and particulate matter that can trigger asthma and/or allergies.

**Impact:** From 2013 to 2015, CAFK provided more than 200 home visits. Hospital data shows a 72% decrease in hospital utilization among participants.

**Contact:** Mary Quinlan
Director, Community Services
Telephone: 253-403-1354
Email: mary.quinlan@multicare.org

**St. Catherine Hospital – Garden City, Kansas**

**Program:** Finney County Community Health Coalition (FCCHC)

**What is it?** The FCCHC brings together more than 50 community partners on a regular basis to identify community needs and find funding to support them. The coalition began by framing three major community needs: reducing risky behaviors for young people, including teen pregnancy, smoking and drinking; improving transportation; and supporting families and children through two agendas – literacy training and preventing domestic violence.

**Who is it for?** All Finney County community members.

**Why do they do it?** A small group of community leaders came together in early 2000 to develop a teen pregnancy-prevention initiative. Its success led to the formation of the coalition.

**Impact:** From its beginning in 2000, the FCCHC has undertaken numerous initiatives such as helping to pass a no-smoking ordinance within the city limits, creating a fixed-route bus service and developing its Center for Children and Families.

**Contact:** Lee Ann Shrader
Chief Executive Officer, Finney County Community Health Coalition
Telephone: 620-765-1185
Email: leeshrader@centura.org

**Roger Williams Medical Center – Providence, Rhode Island**

**Program:** Senior-Friendly Emergency Departments

**What is it?** It has been two years since Roger Williams Medical Center and Fatima Hospital – both part of the CharterCARE system – opened the state’s first senior-friendly emergency departments (EDs). Both departments underwent physical renovations and modifications, while staff received enhanced training and assessment tools. A multi-disciplinary team now performs assessments to gauge whether patients have poly-pharmacy issues, are at risk for falls or suffer from ailments like dementia and depression.

**Who is it for?** Emergency patients 65 years of age and older.

**Why do they do it?** One in five Rhode Island residents will be 65 or older by 2030.

**Impact:** From July 2012 to March 2013, the overall rating mean average given by patients 65 and over in the ED at Roger Williams was 84%; the average at Fatima was 83.7%. From April 2013 to October 2015, following implementation of the senior-friendly ED at both hospitals, Roger Williams’ average increased to 86.3% and Fatima’s average rose to 86.5%.

**Contact:** Kimberly O’Connell
President
Telephone: 401-456-2000
Email: koconnell@chartercare.org
Taylor Regional Hospital – Campbellsville, Kentucky

Program: Hospitality Transportation Service

What is it? Taylor Regional Hospital (TRH) offers free transportation services to qualifying individuals who need a ride to treatment, testing or appointments at Taylor Regional Hospital, Rehab Services, Cancer Center and other TRH-affiliated services. This includes doctor appointments to physicians associated with TRH. Partnerships with local businesses help pay for gas and vehicle maintenance.

Who is it for? Non-Medicaid patients needing transportation to TRH appointments.

Why do they do it? Hospital leaders recognized that some patients desperately needed rides to get to their important medical appointments.

Impact: Last year, the vans traveled more than 84,300 miles. Currently, 11 sponsors support the service with monthly contributions for gasoline. The hospital holds an annual golf scramble with all proceeds going to purchase new vans and other expenses. Patients not only benefit from the transportation service but from the social interaction with the drivers and other patients.

Contact: Cindy Rose
Director, Public Relations
Telephone: 270-789-5814
Email: carose@trhosp.org

University of Michigan Health System – Ann Arbor, Michigan

Program: Housing Bureau for Seniors (HBS)

What is it? HBS is a resource for older adults in search of sustainable housing. Staff social workers conduct assessments, provide appropriate information and offer decision-making tools to help find and maintain stable, affordable living arrangements. Through the HomeShare, Foreclosure Prevention, and Housing Counseling/Eviction Prevention programs, HBS provides resources and helps find community support systems for those planning or making housing transitions, and/or those handling housing-related crises.

Who is it for? Adults 55 and older.

Why do they do it? Stable housing, especially for vulnerable older adults, is imperative to physical health and mental well-being. Studies show that lack of stable housing contributes to increased ED visits and prolonged hospital stays.

Impact: In fiscal year 2015, HBS helped approximately 1,000 seniors by: reaching out to underserved older adults with materials in Mandarin and Spanish, partnering with Washtenaw County Treasurer’s Office and State of Michigan to prevent 40 tax foreclosures, and providing housing via the HomeShare Program for 100 people.

Contact: Janet Hunko
Director
Telephone: 734-998-9337
Email: jmhunko@med.umich.edu

Yale-New Haven Hospital – New Haven, Connecticut

Program: Revitalizing Our Neighborhoods

What is it? Yale-New Haven Hospital (YNHH) has initiated comprehensive programs to revitalize New Haven’s Hill neighborhood. The hospital also participates in public and private projects that provide affordable housing and safe, healthy living conditions. Programs include Habitat for Humanity volunteers and funding; the Rowe Residence Project, a 104-unit, mixed-income housing complex, where YNHH swapped hospital-owned land and provided in-kind staff support; a Lead Poisoning and Regional Treatment Center, and HOME (Home Ownership Made Easier), which provides YNHH employees with up to $10,000 in five-year forgivable loans to purchase a home in the city of New Haven.

Who is it for? Area residents and stakeholders.

Why do they do it? There is a correlation between healthy neighborhoods and good health.

Impact: Habitat for Humanity and YNHH have jointly built seven homes, with more planned for the near future. Rowe Residences comprises subsidized and market-rate apartments housing nearly 45 elderly or disabled tenants. Since 2005, YNHH’s Lead Program decreased pediatric lead poisoning cases from 1,200 to 120 annually. The HOME program has created more than 120 new homeowners in a city where less than 30% of its residents own their home.

Contact: Kyle Ballou
Executive Director, Community & Government Relations
Telephone: 203-688-2503
Email: kyle.ballou@ynhh.org
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If you have a program you are proud of and want others to know about, please visit www.ahacomunityconnections.org to submit a case example.