

SOUTHEASTERN PENNSYLVANIA
COMMUNITY
HEALTH NEEDS
ASSESSMENT

2022



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EXECUTIVE SUMMARY

Identifying and addressing unmet health needs of local communities is a core aspect of the care provided by hospitals and health systems across the U.S. The Affordable Care Act (ACA) formalized this role by mandating that tax-exempt hospitals conduct a Community Health Needs Assessment (CHNA) every three years and implement strategies focused on emergent priorities from the assessment. This assessment is central to not-for-profit hospitals and health systems' community benefit and social accountability planning. By better understanding the service needs and gaps in a community, an organization can develop implementation plans—also mandated by the ACA—that more effectively respond to high priority needs.

Recognizing that hospitals and health systems often mutually serve the same communities, a group of local hospitals and health systems have again collaborated on a Southeastern Pennsylvania (SEPA) Regional CHNA (rCHNA), with specific focus on Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties. This continued collaboration enables continuity of approach, while also providing opportunities to expand and improve upon the last assessment process. Participants recognize that the CHNA is an important part of how health systems, multi-sector partners, and communities work together to achieve meaningful and positive community change. In addition to the shared learning, increased efficiencies, and reduced community burden offered by the collaborative approach, participants have derived particular benefit from mutual support in the face of the COVID-19 pandemic and its cascading impacts. In response to the crises of the past several years, the 2022 rCHNA is explicitly grounded in an approach that seeks to advance health equity and authentic community engagement.

Partnering Health Systems and Hospitals

Children's Hospital of Philadelphia

- Children's Hospital of Philadelphia
- Middleman Family Pavilion at CHOP, King of Prussia

Doylestown Health: Doylestown Hospital

Grand View Health: Grand View Hospital

Jefferson Health

- Einstein Medical Center Elkins Park
- Einstein Medical Center Montgomery
- Einstein Medical Center Philadelphia
- Jefferson Abington Hospital
- Jefferson Bucks Hospital
- Jefferson Frankford Hospital
- Jefferson Hospital for Neuroscience
- Jefferson Lansdale Hospital
- Jefferson Methodist Hospital
- Jefferson Torresdale Hospital
- Magee Rehabilitation Hospital
- MossRehab
- Rothman Orthopedic Specialty Hospital
- Thomas Jefferson University Hospital

Main Line Health

- Bryn Mawr Hospital
- Bryn Mawr Rehabilitation Hospital
- Lankenau Medical Center
- Paoli Hospital
- Riddle Hospital

Penn Medicine

- Chester County Hospital
- Hospital of the University of Pennsylvania
- Hospital of the University of Pennsylvania – Cedar Avenue
- Penn Presbyterian Medical Center
- Pennsylvania Hospital

Redeemer Health: Holy Redeemer Hospital

Temple University Health System

- Fox Chase Cancer Center
- Temple University Hospital
- Temple University Hospital – Episcopal Campus
- Temple University Hospital – Jeanes Campus
- Temple University Hospital – Northeastern Campus

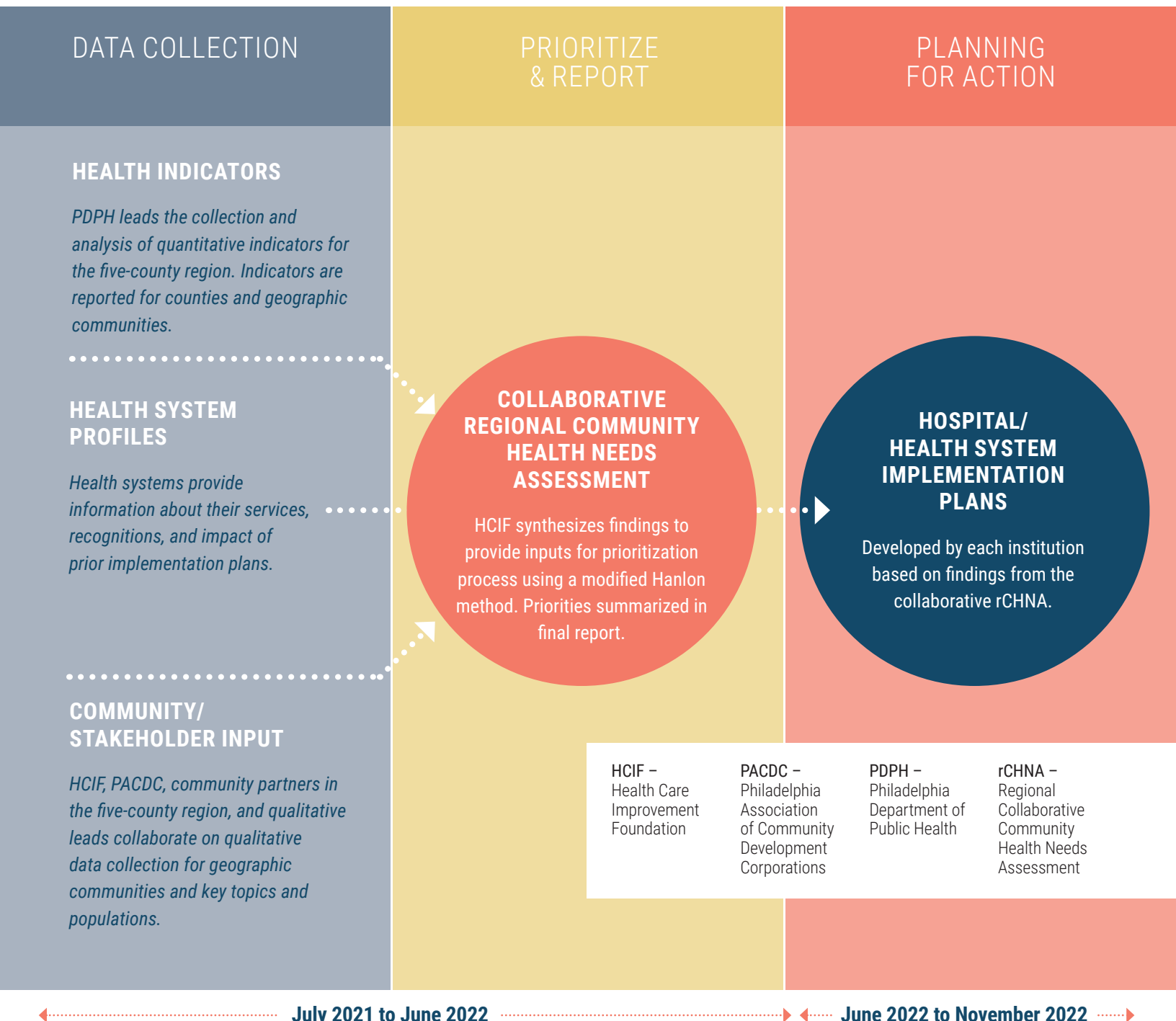
Trinity Health Mid-Atlantic

- Mercy Catholic Medical Center,
Mercy Fitzgerald Hospital Campus
- Nazareth Hospital
- St. Mary Medical Center and St. Mary Rehabilitation Hospital

EXECUTIVE SUMMARY

OUR COLLABORATIVE APPROACH

Hospitals/health systems and supporting partners collaboratively developed the community health needs assessment process and report to identify regional health priorities and issues specific to each participating institution's service area. Based on these priorities, hospitals/health systems produce implementation plans to respond to unmet health needs. These plans may involve further collaboration or coordination to address shared priorities.



EXECUTIVE SUMMARY

In partnership with the Steering Committee of representatives from the partnering hospitals and health systems, the project team—composed of staff from Health Care Improvement Foundation (HCIF), Philadelphia Department of Public Health (PDPH), and Philadelphia Association of Community Development Corporations (PACDC)—developed a collaborative, community-engaged approach that involved collecting and analyzing quantitative and qualitative data and aggregating data from a variety of secondary sources to comprehensively assess the health status of the region. The assessment resulted in a list of priority health needs that will be used by the participating hospitals and health systems to develop implementation plans outlining how they will address these needs individually and in collaboration with other partners.

Quantitative data were acquired from local, state, and federal sources and focused on indicators that were uniformly available at the ZIP code level across the region. The PDPH team, which included experts in epidemiological and geospatial analyses, compiled, analyzed, and aggregated over 60 health indicators encompassing data on community demographic characteristics, COVID-19, chronic disease and health behaviors, infant and child health, behavioral health, injuries, access to care, and social and economic conditions.

HCIF, guided by a Qualitative Team composed of a subset of Steering Committee representatives, coordinated the qualitative components of the assessment, which included:

- 26 virtual focus group-style “community conversations” held to gather input from residents of geographic communities across all five counties.
- 21 virtual focus group discussions centered on “spotlight” topics conducted with community organization and local government agency representatives. Topics covered included behavioral health, chronic disease, food insecurity, housing and homelessness, older adults and care, racism and discrimination in health care, substance use, and violence.

Two experts in qualitative data collection and analysis engaged as Qualitative Lead consultants facilitated all of these discussions, analyzed the qualitative data, and summarized key findings.

In addition, the project team either undertook directly or supported partners with targeted primary data collection to better understand the needs of particular communities or populations. These focus areas and communities were either specific to different type of facilities within participating health systems (i.e., cancer centers, rehabilitation facilities) or reflected gaps in the 2019 rCHNA:

- Cancer
- Disability
- Immigrant, refugee, and heritage communities
- Youth voice

Finally, secondary data in the form of reports and summaries from other community engagement efforts were also incorporated into the report.

All data were synthesized by HCIF staff and a list of 12 community health priorities was presented to the Steering Committee. Using a modified Hanlon ranking method, each participating hospital and health system rated the priorities. An average rating was calculated, and the community health priorities were organized in priority order based on:

- Size of health problem
- Importance to community
- Capacity of hospitals/health systems to address
- Alignment with mission and strategic direction
- Availability of existing collaborative efforts

Potential solutions for each of the community health priorities, based on findings from the qualitative data collection, were also included.

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|--|--|--|
| 1. MENTAL HEALTH CONDITIONS | <ul style="list-style-type: none"> Youth and adult community members and community partners prioritize mental health as their top health need. Significant mental health needs across the region are indicated by high rates of depression among youth and adults, frequent mental distress, and suicide mortality and suicide attempts/ideation among youth. Trends exacerbated by social isolation, stress, and fear experienced due to the COVID-19 pandemic. Pandemic-related trauma particularly compounded for those communities also contending with trauma associated with high levels of poverty, community violence, and racism. Populations particularly affected include youth, older adults, immigrant communities, LGBTQ+ communities, those experiencing homelessness and housing insecurity. There continues to be a significant lack of community-based, integrated mental health treatment options and a particular dearth of resources for youth with mental health needs and their families. | <ul style="list-style-type: none"> Improve care coordination as part of an integrated care model. Increase awareness of behavioral health resources and services. Increase access to safe, structured afterschool activities for youth available on weekends and in the evening. Create spaces for openly discussing mental health for youth to normalize/ destigmatize mental health issues. Co-locate prevention and behavioral health services in community settings ("one stop shop") where families live, work, learn, and socialize. Increase access to support groups to address mental health and substance use. Increase training for healthcare providers, community-based organizations, schools, law enforcement, and others in Mental Health First Aid, trauma-informed care, and cultural competence/sensitivity. Increase behavioral health workforce capacity and diversity (e.g., language, racial, and ethnic). Increase individuals with lived experience in the behavioral health workforce. Provide programming to prevent "burn-out" among behavioral health staff. Support efforts to increase funding to ensure that all families and children can access evidence-based mental health screening, diagnosis, and treatment. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|--|---|--|
| 2. ACCESS TO CARE (PRIMARY AND SPECIALTY) | <ul style="list-style-type: none"> Supply of primary care providers across the region compares favorably to national data and trends with uninsured rates are improving regionally, but challenges remain with increasing provider acceptance of new patients with Medicaid coverage. Barriers to access to primary care for communities are due to lack of providers in neighborhoods, issues of affordability, and language/cultural barriers. Above issues exacerbated with specialty care, with added challenges posed by even more limited availability of appointments, high cost, and lack of care coordination/linkage with primary care. Impacts of COVID-19 pandemic include increased enrollment in Medicaid, longer wait times for appointments (especially for specialty care), and gaps in access to preventive services. | <ul style="list-style-type: none"> Provide education and information about Medicaid (e.g., eligibility, coverage) and assist with enrollment. Create high quality free or low-cost health care options to serve those who may be uninsured or underinsured. Establish comprehensive health centers that would address not only physical health, but also mental health and dental care. Bring more health and social services directly to underserved communities through health clinics in schools or mobile medical clinics. Embed social workers in primary care practices, such as family medicine, pediatrics, and OB/GYN offices. Train all levels of hospital staff and other healthcare providers on delivering “non-biased, culturally appropriate, trauma-informed care.” Provide on-site language interpreters and health education materials in diverse languages. Increase racial, ethnic, and language diversity of staff and providers to better reflect the communities they serve. Increase transportation assistance, including adding options for those not eligible for certain benefits. Expand appointment availability and hours in low access areas. Address barriers to telehealth (e.g., related to internet or device access or digital literacy). |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|---|--|--|
| 3. CHRONIC DISEASE PREVENTION AND MANAGEMENT | <ul style="list-style-type: none"> • Conditions like heart disease, cancer, stroke, and chronic lower respiratory diseases continue to constitute majority of top 5 leading causes of death for all counties. • Rate of premature cardiovascular deaths significantly higher in Philadelphia County. • Cancer mortality rates highest in Delaware and Philadelphia Counties. • Hypertension-related hospitalization rates highest in Bucks, Delaware, and Philadelphia Counties. • Across and within 5 counties, disparities in burden of chronic disease correlate with poverty, which disproportionately affects communities of color. • COVID-19 pandemic has negatively impacted chronic disease prevention and management. Notably, there have been delays in seeking care, as found in qualitative reports and indicated by lower health care utilization in 2020 as compared to previous years. | <ul style="list-style-type: none"> • Better inform, educate, and engage the public regarding chronic disease prevention and management. • Engage trusted community leaders to help spread important messages (for example, promoting cancer screening). • Expand successful innovations from the pandemic, such as virtual wellness programs. • Bring screenings and health education to faith-based institutions or where people shop, recreate, or work. • Integrate mental health services into overall care management for people with chronic diseases. • Before patients leave a hospital or clinic, provide screening, referrals, and “warm hand-offs” to community-based health and social services, as well as resources that assist with lifestyle changes for people managing chronic conditions. • Increase networking and collaboration among community organizations and health system partners to improve resource sharing and coordination of services. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
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| 4. SUBSTANCE USE AND RELATED DISORDERS | <ul style="list-style-type: none"> Substance use disorders often co-occur with mental health conditions. Substance use is associated with community violence and homelessness. Drug overdose rates continue to be high due to the opioid epidemic. The drug overdose rates in Bucks, Delaware, and Philadelphia Counties exceed the overall Pennsylvania rate. It is the leading cause of death for young adults. The opioid epidemic is associated with increases in other health conditions including HIV, Hepatitis C, and Neonatal Abstinence Syndrome (NAS). Use of other substances, especially during the COVID-19 pandemic, was of pressing concern to community members and partners. Binge drinking among adults and youth, as well as cigarette, marijuana, and vape use among youth, were raised as increasingly prevalent. High rates of marijuana vaping among youth in the four suburban counties. | <ul style="list-style-type: none"> Sustain and expand prevention programs, ranging from school-based educational programs to community drug take-back programs. Advocate to increase and sustain funding for drug and alcohol prevention programs in schools and other programs. Broaden and intensify efforts to reduce vaping among youth. Expand Narcan training and distribution. Increase medical outreach and care for individuals living with homelessness and substance use disorders. Encourage use of Certified Recovery Specialists and Certified Peer Specialists in warm handoffs for drug overdose and other behavioral health issues. Develop texting support services that address underlying issues of substance use, provided by trained peers or qualified therapists to individual clients. Streamline system navigation for providers and the population at large to facilitate access to outpatient services after discharge from inpatient facilities. |
| 5. HEALTHCARE AND HEALTH RESOURCES NAVIGATION | <ul style="list-style-type: none"> Community members and partners widely viewed navigating healthcare services and other health resources as a challenge due to general lack of awareness, fragmented systems, and resource constraints. Healthcare providers, particularly in the primary and acute care setting, can play an integral role in linking patients directly to health resources or to community health workers or care coordinators. Navigation includes information as well as transportation. Lack of accessible, affordable transportation options was raised in a large majority (70%) of qualitative meetings, with the need spanning urban and suburban counties. | <ul style="list-style-type: none"> Increase public awareness of community resource directories that local health systems have invested in and support community members with using them. Increase the capacity of healthcare staff to assist community members with navigation by regular education on available resources. Grow the numbers of professionals serving as community resource or healthcare navigators. Create permanent social service hubs that serve as “one-stop-shops” for commonly needed resources. Expand low-cost transportation options. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|--|---|--|
| 6. RACISM AND DISCRIMINATION IN HEALTH CARE | <ul style="list-style-type: none"> Racism recognized as ongoing public health crisis in need of urgent, collective attention. Higher rates of COVID-19 infection, hospitalization, and mortality experienced by Black communities are examples of inequities stemming from structural racism. Representatives of communities of color shared their mistrust of healthcare providers and institutions arising from seeing such disparities and personally experiencing discriminatory treatment in health care settings. Such experiences can lead to forgoing of needed care, resulting in increased morbidity and mortality. Anti-Asian hate crimes increased during the COVID-19 pandemic. Fear of violence among Asian older adults has led to reluctance in leaving their homes, resulting in increased social isolation and adversely affecting mental and physical health. | <ul style="list-style-type: none"> Train and hire people with lived experience to work in communities that have been historically marginalized. Increase hospital investment in grassroots community organizations that are working to address social determinants of health and related needs. Expand and improve the training of healthcare providers around anti-racism, structural racism, implicit bias, diversity awareness, cultural competence, and trauma-informed care. Increase the number of people of color in healthcare leadership positions. Ensure diversity, equity, and inclusion efforts and plans within healthcare institutions include an explicit focus on racism and discrimination, with focus on policies, care practices, and ongoing measurement. Create and fund ongoing forums for community leaders to work with health system partners to address issues of racism and discrimination in health care. |
| 7. FOOD ACCESS | <ul style="list-style-type: none"> Issues of food access focus primarily on food security. Many community members experience challenges obtaining sufficient food of any kind, as well as issues with accessing healthy food more specifically. Financial challenges brought on by the COVID-19 pandemic has led to an increase in rates of food insecurity across all counties and sharply rising demand for emergency food assistance. Nearly a quarter of Philadelphia households are receiving Supplemental Nutrition Assistance Program (SNAP) benefits. Black and Hispanic/Latino communities are disproportionately impacted by food insecurity, as are older adults and immigrant communities. | <ul style="list-style-type: none"> Ensure more equitable access to food assistance programs and resources throughout the region by collecting data. Before patients are discharged from the hospital, provide “warm handoffs” to connect them with community health and social service organizations that address hunger and other needs. Increase collaboration and resource-sharing between hospitals and community groups working on healthy food access. Increase outreach to raise awareness and utilization of food assistance programs. Provide services that distribute food directly to people where they live, especially in neighborhoods with limited or no access to healthy food. Increase affordable transportation options for people who cannot drive or get rides to emergency food or other needed resources. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|--|--|---|
| 8. CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES | <ul style="list-style-type: none"> About 12 percent of the population across the 5 counties were not born in the U.S. As much as 45 percent of residents of some geographic communities report speaking English less than very well. The need for culturally concordant providers and resources to address language barriers was raised in over 50 percent of qualitative meetings. Provision of high quality language services (oral interpretation and written translation) is critical for providing equitable care to these communities. Beyond language access, cultural and religious norms influence individual beliefs about health. Providers and systems equipped to engage patients about these beliefs and integrate them into care is needed. | <ul style="list-style-type: none"> Increase the racial, ethnic, and language diversity of staff and providers to better reflect the communities they serve. Develop organizational language access plans that outline protocols for identifying and responding to language needs. Explore the development of formalized programs to train and credential bilingual staff (employed for other roles) to serve as medical interpreters. Provide on-site language interpreters and health education materials in diverse languages. Develop strong partnerships with community organizations serving diverse communities that involves providing financial support. Train all levels of hospital staff and other healthcare providers on delivering "non-biased, culturally appropriate, trauma-informed care." |
| 9. COMMUNITY VIOLENCE | <ul style="list-style-type: none"> Violent crime and homicide rates are 8-10 times higher in Philadelphia compared to suburban counties. In 2020, Philadelphia lost 447 people to gun violence, the most gun-related homicides in 30 years. It is the leading cause of death for Black men ages 15-43 and Hispanic/Latino men ages 15-31. Community violence driven by community disadvantage disproportionately impacts N, NW, and SW communities in Philadelphia. Trauma associated with exposure to gun violence is widely felt in communities, especially among youth. Significant challenges exist with accessing necessary mental health supports to address negative impacts of such exposure. Women, youth from immigrant communities, and LGBTQ+ communities are at higher risk of interpersonal violence, including intimate partner violence (IPV), sexual assault, and sex trafficking. Reports of increased risk of IPV associated with COVID-19 stay-at-home orders have been shared by local advocates. Negative social media engagement, including cyberbullying, among youth can be a source of community violence. | <ul style="list-style-type: none"> Increase awareness and availability of youth programs to prevent violence, including educational programs, sports, and other recreational activities. Integrate social and mental health services into existing youth activities. Also provide training for individuals who are trusted by and work with youth (e.g., teaching artists, coaches, teachers, parents) in addressing trauma and other violence-related issues. Build youth capacity for healthy conflict resolution and create positive outlets for arguments or anger. Create more safe spaces for people to talk about the violence they experience. Train all levels of hospital staff and other healthcare providers on delivering "non-biased, culturally appropriate, trauma-informed care." Increase advocacy for policies to prevent or reduce violence, including initiatives to address poverty and other social determinants that contribute to violence. Partner with community-based organizations to build on each other's strengths and increase funding opportunities. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|------------------------------|---|---|
| 10. HOUSING | <ul style="list-style-type: none"> • Safe, stable housing is critical for physical and mental health and well-being. Lack of stable housing is associated with 27.3 fewer years of life expectancy. • Health issues associated with housing instability include behavioral health issues (mental distress, depression, developmental delays in children, falls among older adults) and medical conditions such as asthma and lead poisoning. Households may forgo needed health care due to financial strain. • In 2018, 40 percent of Philadelphia households were cost-burdened (when a household spends 30 percent or more of its income on housing costs, including rent, mortgage payments, utilities, insurance, and property taxes). This figure is expected to be higher as a result of the COVID-19 pandemic. • Poor housing conditions like old lead paint, asbestos, infestations, lack of running water or HVAC, and damaged infrastructure disproportionately impact communities with low incomes. • Lack of affordable housing is a major driver of homelessness. • People experiencing homelessness are at increased risk of mental health and substance use disorders and experiencing discrimination and bias in healthcare settings. • Homelessness experienced by youth and older adults are of particular concern for local advocates. | <ul style="list-style-type: none"> • Drive solutions that prevent homelessness, including advocating for livable wages, more affordable housing, and services that support aging in place. • Advocate for and implement responsible and equitable neighborhood development that avoids displacement and segregation. • Increase investments by hospitals, managed care organizations, and others in supportive housing programs known to be effective in reducing housing insecurity and preventing homelessness. • Explore strategies that aggregate funds to support rental assistance. • Explore development of an equitable acquisition fund to preserve and create affordable housing. • Expand programs that support habitability and raise awareness of available resources for housing repair assistance. • Evaluate existing hospital housing programs for potential expansion, including those that provide home repairs and remediation for high risk youth (e.g., with asthma) and older adults. • Train and encourage health care providers to conduct regular housing insecurity assessments for patients and make referrals as appropriate. Train health professionals and social service providers to use a trauma-informed approach when caring for individuals experiencing homelessness or housing insecurity. • Increase Rapid Re-housing Programs. • Invest in respite housing for individuals in urgent need of transitional housing. |

COMMUNITY HEALTH NEEDS

| COMMUNITY HEALTH NEEDS | KEY FINDINGS | POTENTIAL SOLUTIONS |
|--|---|--|
| 11. SOCIOECONOMIC DISADVANTAGE (E.G., POVERTY, UNEMPLOYMENT) | <ul style="list-style-type: none"> Individuals living at or near poverty levels have higher rates of adverse health behaviors and outcomes; poverty resulting from structural racism is the underlying determinant for many racial/ethnic health disparities. Inadequate education, limited opportunities, and unemployment are key drivers of poverty. Poverty among children and adults tends to cluster in communities; these communities collectively experience trauma and toxic stress, lower life expectancy, limited access to healthcare and health resources, and greater exposure to unhealthy living environments. Poverty rates are nearly 4 times higher in Philadelphia compared to suburban counties overall, but pockets of high poverty clusters are seen in suburban counties. | <ul style="list-style-type: none"> Screen for socioeconomic disadvantage and establish systems for linkage to community resources to address needs. Partner with local community-based organizations who provide public benefits enrollment assistance to ensure that residents receive all the benefits (e.g., SNAP, Earned Income Tax Credit) for which they are eligible. Collaborate with community colleges and universities to develop and expand programs focused on skills training and development to increase access to family-sustaining careers. Train and employ returning citizens. Advocate for improvements to the disability system to ensure that people with disabilities are able to work without losing attendant care services. Provide workforce development/pipeline programs with schools. Increase access to Science, Technology, Engineering, Arts, and Mathematics (STEAM) education for youth. |
| 12. NEIGHBORHOOD CONDITIONS (E.G., BLIGHT, GREENSPACE, AIR/WATER QUALITY, ETC.) | <ul style="list-style-type: none"> Greater neighborhood blight (e.g., abandoned homes, vacant lots, trash) is more likely in high poverty areas and is associated with increased community violence. Lack of maintenance of public spaces, like schools, libraries and recreational facilities create additional health hazards. Access to outdoor greenspaces and recreation areas like parks and trails are lower in these neighborhoods. The negative impact of such lack of spaces on mental and physical health was shared by community members. Communities expressed concerns about air pollution and climate change, particularly in S Philadelphia, Delaware County, and flood-prone SW Philadelphia. Rapid gentrification of some historically low-income neighborhoods creates risk of displacement and housing insecurity, and further racial segregation. | <ul style="list-style-type: none"> Support neighborhood remediation and clean-up activities. Collaborate with local advocates engaged in campaigns to improve air quality, especially in areas that have increased exposure to emissions. Invest in infrastructure improvements to support active transit near hospitals. Improve vacant lots by developing gardens and spaces for socialization and physical activity. Advocate for and implement responsible and equitable neighborhood development that avoids displacement and segregation. |

INTRODUCTION

Identifying and addressing unmet health needs of local communities is a core aspect of the care provided by hospitals and health systems across the U.S. The Affordable Care Act (ACA) formalized this role by mandating that tax-exempt hospitals conduct a Community Health Needs Assessment (CHNA) every three years and implement strategies focused on emergent priorities from the assessment. Federal requirements for the CHNA include:

- A definition of the community served by the facility and a description of how the community was determined
- A description of the process and methods used to conduct the CHNA
- A description of how the facility solicited and took into account input received from persons who represent the broad interests of the community it serves
- A prioritized description of the significant health needs of the community identified through the CHNA and a description of the process and criteria used in identifying certain health needs as significant and prioritizing those needs
- A description of resources potentially available to address the significant health needs identified through the CHNA

This assessment is central to not-for-profit hospitals and health systems' community benefit and social accountability planning. By better understanding the service needs and gaps in a community, an organization can develop implementation plans—also mandated by the ACA—that more effectively respond to high priority needs.

At the request of local non-profit hospitals and health systems, the Philadelphia Department of Public Health (PDPH) and the Health Care Improvement Foundation (HCIF) convened an effort to collaboratively develop a regional Community Health Needs Assessment (rCHNA) for four counties of the Southeastern PA (SEPA) region in 2019. This effort represented the first joint CHNA in the region, providing a foundation for future collaboration on both needs assessment and implementation planning to better serve shared SEPA communities.

Once again, local institutions have collaborated on the 2022 rCHNA, enabling continuity of approach, while also providing opportunities to expand and improve upon the last assessment process. Participants recognize that the CHNA is an important part of how health systems, multi-sector partners, and communities work together to achieve meaningful and positive community change. In addition to the shared learning, increased efficiencies, and reduced community burden offered by the collaborative approach, participants have derived particular benefit from mutual support in the face of the COVID-19 pandemic and its cascading impacts. In response to the crises of the past several years, the 2022 rCHNA is explicitly grounded in an approach that seeks to advance health equity and authentic community engagement.

While the basic structure and format of the report are retained from the 2019 effort, the ways in which the 2022 rCHNA departs from the previous process is largely due to a significant increase in size and scope. With the inclusion of additional hospitals and health systems in 2022, the current report not only adds Delaware County to the included service area, but also features full coverage of all ZIP codes in the five-county SEPA region. This has led to the re-defining of geographic communities, as well as increases in the number and types of quantitative and qualitative data in response to the requests of the expanded participant group. Given such differences, as well as the unique impacts of the COVID-19 pandemic on data collection efforts, it is important to note that comparability with the 2019 rCHNA report (especially as related to quantitative data) is limited.



Children's Hospital of Philadelphia

MISSION

Children's Hospital of Philadelphia, the oldest hospital in the United States dedicated exclusively to pediatrics, strives to be the world leader in the advancement of healthcare for children by integrating excellent patient care, innovative research and quality professional education into all of its programs.

VISION

We will distinguish ourselves as the No. 1 children's hospital in the world.

We will put our patients and families at the center of all we do and ensure we meet their unmet needs.

We will grow our footprint and our revenue in order to ensure our ability to invest in and enhance our mission of patient care, research and education.

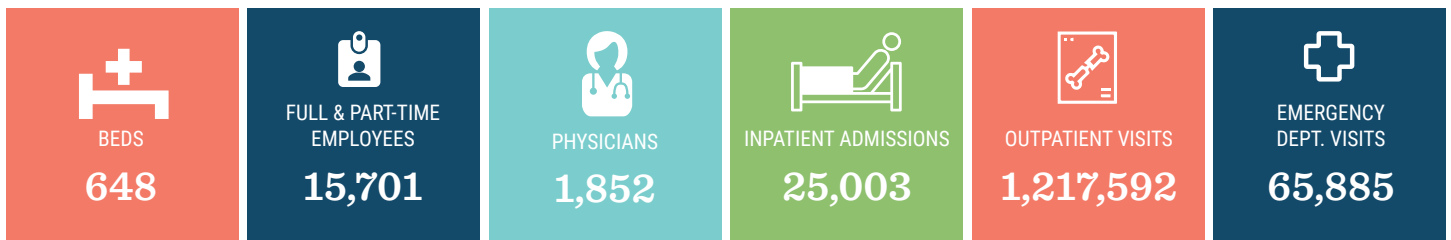
We will be "high touch" and "high tech" and will be digitally accessible to patients around the world and in our backyard.

We will care for the underserved children in our community.

We will define care and discover cures for children over the next 30 years – and beyond.

VALUES

At Children's Hospital of Philadelphia, we are committed to making breakthroughs for children every day. We advance health care for children through the integration of family-centered, safe and high-quality care with innovative research and quality professional education. Every employee has the ability and opportunity to contribute to breakthroughs in care and service. By defining our collective values, we create the framework for delivering these breakthroughs as we partner with the children and families we serve.



CHOP is the only freestanding, independent (i.e., not affiliated with a health system) pediatric hospital in the Commonwealth of Pennsylvania, thus affording it an unparalleled singular focus on pediatric services. It is one of only three pediatric hospitals in its primary service area. CHOP's Care Network extends throughout the region, with Primary Care practices, Specialty Care and Ambulatory Surgery centers, Urgent Care centers, Newborn & Pediatric Inpatient Care sites, and Home Care services available at more than 50 locations in Pennsylvania and New Jersey.

In January 2022, CHOP opened its second hospital in King of Prussia, Pa., featuring the same world class care as our first hospital, with increased access for the local communities we serve. This facility has 52 private patient-rooms and a 24/7 Emergency Department with 20 rooms.

CORE SERVICES

CHOP houses the world's leading pediatric research enterprise, the CHOP Research Institute, that reflects the hospital's deep and long-standing commitment to improve child health. With nearly 2,600 staff, the Institute carries out groundbreaking research on the science, policy, and treatment of childhood illnesses across our scientific pillars: rare and complex diseases, lifespan research, novel therapeutics, and precision medicine. The Institute focuses on patient-driven research that changes lives – both in the hospital setting and beyond our walls, in outpatient care and in the community. It also has a growing portfolio of health services and community-engaged research led by one of its Centers of Emphasis, PolicyLab. A trailblazing group of initiatives known as Frontier Programs are pioneering new advances in children's health at an astonishing pace. Frontier Programs conduct visionary research that translates to cutting-edge clinical care. Some examples of Frontier Programs include Comprehensive Center for the Cure of Sickle Cell Disease (CuRED), Food Allergy Center, and Center for Pediatric Airway Disorders.

CHOP established the first formal medical training program for pediatric doctors in the United States. As part of the residency program, CHOP offers the Community Pediatrics and Advocacy Program. This longitudinal curriculum prepares medical residents to be child and family advocates and work with community partners towards creating prevention and population health programs.

CHOP consistently invests in programs that benefit communities and strongly believes that the hospital's mission must always reach outside its walls to help the children living in and around its primary service area for community benefit. CHOP has more than 100 community programs that strive to ensure that all children, especially the most vulnerable, experience the wonders of childhood. In 2013, CHOP began the CHOP Cares Community Grant Program, in which a CHOP Community Advisory Board comprised of both CHOP employees and local civic leaders advise a competitive grant process. The program awards small grants to CHOP employees to support work in their own communities that specifically address needs identified in the CHNA.



Among many of CHOP's community initiatives, a few notable programs include:

» **Community Asthma Prevention Program (CAPP)**

CAPP conducts community service and education projects, community-based asthma research, and asthma interventions to improve the lives of children in communities most affected by asthma, including the CAPP+ program, which provides repairs to patient family homes in West and Southwest Philadelphia.

» **Center for Violence Prevention (CVP)**

The CVP model works to reduce the incidence and impact of violence and aggression on children and families in the community. CVP includes efforts to reduce: 1) bullying in schools; 2) domestic violence in the home; and 3) violent assault in the community.

» **Homeless Health Initiative (HHI)**

HHI provides health outreach services through a coordinated, multidisciplinary approach that aims to reduce health disparities and improve healthcare access and health outcomes for children residing in homeless shelters. Some of the services provided in family shelters are CHOP Night medical and dental exams and Operation CHOICES, an obesity prevention program (fitness and nutrition education), and art therapy for mothers and children.

» **Karabots Community Garden (Garden)**

The Garden, which opened in 2016, donates produce to the West Philadelphia community and hosts cooking demonstrations and educational events throughout the year. The Garden harvests and distributes 2,400 pounds of organic produce annually to patients and families.

» **Center for Child Protection and Health**

The Center provides services to children and their families for whom a concern for child abuse or neglect has been identified. Services include: Children's Collaborative Clinic for evaluation of suspected child sexual abuse co-located and in partnership with the City of Philadelphia, Safe Place Treatment and Support Program, a comprehensive medical program called Fostering Health Program, and PriCARE, a parent training program to facilitate positive parenting behaviors.

» **Center for Health Equity**

The Center for Health Equity launched in 2021 to discover, implement and disseminate evidence-based practices and policies to ensure equitable care and achieve the best health for every child in Philadelphia.

ACCOLADES RECEIVED

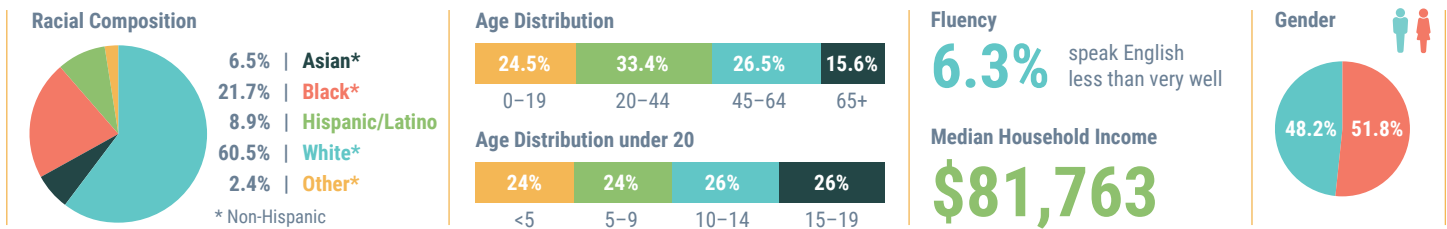
Every year since 2007, when *U.S. News & World Report* published the first ranking of U.S. children's hospitals, CHOP has been among the top-ranked institutions in the country. We are proud to once again be on the prestigious Best Children's Hospitals Honor Roll in the 2021-22 *U.S. News & World Report* rankings as the No. 2 children's hospital in the nation. CHOP also excelled in *U.S. News'* evaluation of specialty areas, ranking in the top eight in each of the 10 areas, with No. 1 rankings for our Division of Endocrinology and Diabetes, Division of Oncology and Division of Orthopedics. A total of five CHOP specialties were ranked in the top three in the nation. *U.S. News* also ranked Children's Hospital No. 1 in the Mid-Atlantic Region, and No. 1 in Pennsylvania.

In recognition as an outstanding employer, CHOP has received several awards, including 2021 Military Friendly Employer designation, 2021 NOD Leading Disability Employer, and has been named "Best Employers for Women" by *Forbes* in 2021. CHOP has also been recognized as No. 2 in the region and No. 2 in the country by *U.S. News & World Report* and, in 2022, CHOP was ranked as the No. 1 employer in the nation by *Forbes*.

For its impact in the community, CHOP has been named a 2021 honoree of The Civic 50 Greater Philadelphia by Philadelphia Foundation as one of the most community-minded organizations in the region. Our efforts have also been recognized by the Association of American Medical Colleges, which awarded CHOP the Spencer Foreman Award for Outstanding Community Service.



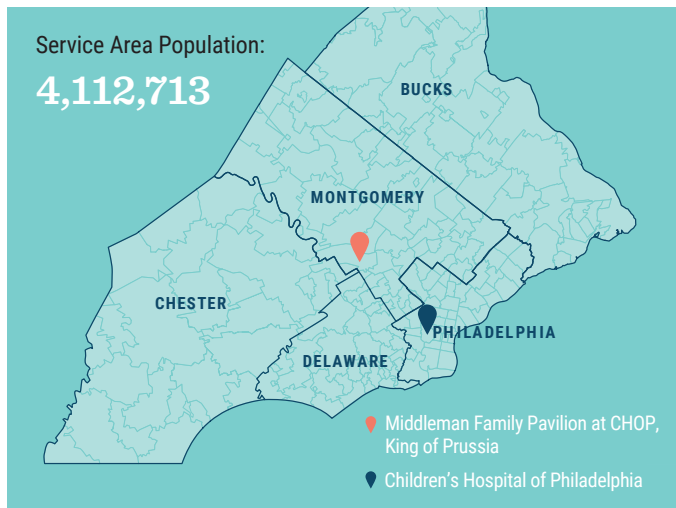
SERVICE AREA DEMOGRAPHICS



PARTNERSHIPS AND AFFILIATIONS

Although the University of Pennsylvania and CHOP are separate corporate entities with no shared ownership or governance, they have had a close collaborative relationship for more than half a century in furtherance of their respective missions. CHOP has officially been the Department of Pediatrics to the University of Pennsylvania's Perelman School of Medicine since 1929. The relationship between CHOP and the University of Pennsylvania includes collaboration on the performance of basic and clinical research, collaboration in patient care, cooperation in education and training of medical students and residents, and multiple arrangements for the joint use of facilities and equipment.

CHOP has affiliations with 10 hospitals in Pennsylvania and 6 in New Jersey whereby CHOP and the community hospitals collaborate to provide high quality, efficient pediatric care at the host hospitals. CHOP provides the hospitals with newborn and pediatric services including physician staffing, clinical program management, as well as education for the host hospital staff and patients. CHOP views these arrangements as an important part of its mission of improving access to and improving the quality of newborn and pediatric care in the communities it serves.



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

CHOP defines its targeted service area for community benefit as all ZIP codes in the Greater Philadelphia five-county region. While the Greater Philadelphia region is CHOP's primary service area for community benefit, as a globally recognized children's hospital, CHOP also serves patients from 100 countries as well as all states and the District of Columbia. CHOP also provides primary patient care beyond the five-county Greater Philadelphia region within 14 counties of Southeastern Pennsylvania, and Southern New Jersey.

Impact of Prior Community Health Needs Assessment and Implementation

The top 10 needs identified in the 2019 rCHNA serve as the focus of CHOP's implementation plan. Due to CHOP's long history of working with the community, many of the health needs uncovered by the rCHNA were not unexpected and are actively being addressed by CHOP's existing programs. In response to the 2019 rCHNA, CHOP has worked on cross-collaborative partnerships in the community, continued investing in strategies from previous implementation plans and new.

In 2019 CHOP launched the Healthier Together Initiative, a \$25 million initiative to tackle social determinants of health as a path to improving the health of children. This umbrella community impact initiative partners with government agencies, nonprofits and community groups to develop programs that focus on improving four key social determinants of health: housing, hunger, trauma and poverty. In the first two years, Healthier Together has directly impacted over 6,800 individuals in the West and Southwest Philadelphia communities.

In 2020, CHOP established outpatient clinics to treat adolescents with opioid use disorder (OUD) and other substances, including nicotine, alcohol, and marijuana, and provided telehealth consultations for Covenant House, a shelter for marginalized youth experiencing homelessness. To better address the mental and behavioral health needs of children, CHOP expanded Healthy Minds, Healthy Kids, co-locating behavioral health services within 15 primary care offices. To ensure patients had continued access to health care, over the past two years, CHOP provided over 300,000 telehealth visits. A full report of CHOP's progress towards addressing these needs can be found on CHOP's website at chop.edu/CHNA-IP-Progress2022.

In the wake of the COVID-19 pandemic, CHOP experts in infection prevention, policy, advocacy, and vaccinology quickly mobilized to provide guidance to the community and policymakers and mitigate the negative impacts on children and families. At the onset of the pandemic in 2020, CHOP PolicyLab launched a model to forecast COVID-19 transmission nationally. The data from the COVID-Lab model was used by regional and national school leaders and officials from all levels of government — including the White House COVID Task Force — to inform policy and make decisions affecting millions of children and families. CHOP operated the Greater Philadelphia Coronavirus Helpline, a free 24/7 hotline, that has fielded 282,000 calls from the public seeking information and advice. In addition to community testing and vaccination sites, CHOP vaccinated 19,000 Philadelphia school personnel to support the plans to safely reopen schools for children across the city. Furthermore, Dr. Paul Offit, Director of CHOP's Vaccine Education Center, who is a member of the FDA Vaccine Advisory Committee, has been integral to providing expert guidance on the COVID-19 vaccine, both nationally and internationally.

CHOP also increased efforts to address the immediate and pressing needs of the community that were exacerbated by the pandemic. CHOP partnered with the City of Philadelphia and a local, minority-owned business to provide 20,000 meals to public housing residents in West and Southwest Philadelphia. It also expanded financial counseling services at the Karabots Pediatric Care Center and invested in services to prevent child abuse and intimate partner violence.



Doylestown Health

MISSION AND VISION

The **mission** of Doylestown Health is to continuously improve the quality of life and proactively advocate for the health and well-being of the individuals we serve.

With a **vision** to enthusiastically pursue healthcare excellence through collaboration and innovation, we strive to inspire a more vibrant and healthier world for our patients and our community.

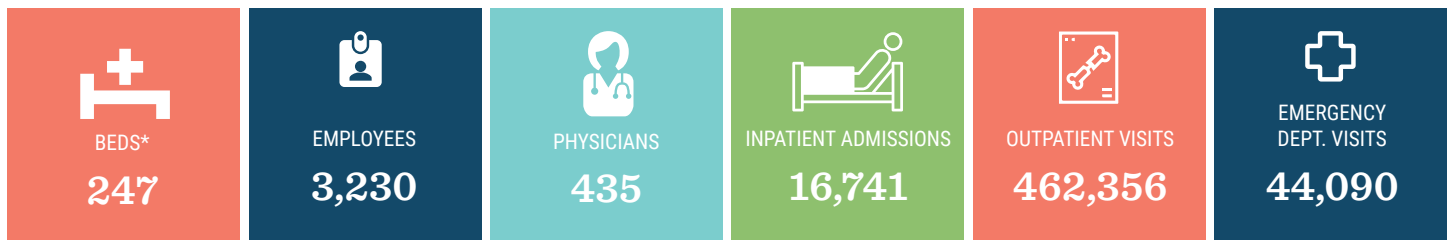
We consistently strive for healthcare excellence and provide a continuum of connected providers, quality and excellence in service and accessibility to the community we serve.

SERVICE VALUES

- » We **serve** the community
- » We strive for **excellence** in our services and programs
- » We **respect** the dignity and privacy of all
- » We provide **value** through high quality, accessible services
- » We seek **innovation** and integration for continuous improvement
- » We are **compassionate**
- » We are committed to the health and wellness **education** of our community

HISTORY

The [Village Improvement Association](#) was the guiding force behind the founding of Doylestown Hospital in 1923, and still governs the operation of the hospital today. Founded in 1895 by a small, but inspired, group of women from Doylestown, the VIA is nationally recognized as the only women's club to own and operate a community hospital. The first meeting was held April 26, 1895 with 14 women present. Since that time the VIA has grown in size and scope to its present membership of over 400 members.



* There are an additional 90 beds at the Pine Run Health Center, 106 at Pine Run Lakeview, and 40 at the Pine Run Garden.

Doylestown Health represents a healthcare network that has delivered high quality care to its service area residents for nearly 100 years, with governance from the same organization, The Village Improvement Association of Doylestown, which has served the community for over 120 years. Doylestown Health is a community-focused healthcare network serving generations of patients and families in the northern suburban communities of Philadelphia, including Bucks and Montgomery Counties in Pennsylvania, and Hunterdon and Mercer Counties in New Jersey. Doylestown Health offers top doctors in primary, specialty, urgent, and emergent care services.

The Doylestown Health System includes:

- » Doylestown Hospital
- » Doylestown Hospital Outpatient Testing
- » Doylestown Health Home Care and Hospice
- » Doylestown Health Palliative Care
- » Doylestown Health Physicians
- » Doylestown Health Urgent Care
- » Pine Run Retirement Community
- » Pine Run Health Center
- » Pine Run The Garden
- » Pine Run Lakeview Personal Care
- » Children's Village — Early Childhood Education



From the beginning, Doylestown Hospital was an emergency and maternity hospital and has continued that emphasis with an expanded emergency department and state-of-the-art VIA Maternity Center where more than 1,200 babies are born each year. The Carol and Louis Della Penna Pediatric Center includes inpatient and outpatient services for children.

Within the Cardiovascular and Critical Care Pavilion, the Woodall Center for Heart and Vascular Care expands the depth and scope of Doylestown Health's nationally recognized cardiovascular services and provides enhanced access to patients throughout the region.

The third floor of the Cardiovascular and Critical Care Pavilion includes the Clark Center for Critical Care Medicine. The state-of-the-art facility allows Doylestown Hospital to accommodate a higher volume of ICU/IMU patients with enhanced patient safety, privacy and comfort.

Doylestown Hospital is designated as a Stroke Resource Center by the American Heart Association and the American Stroke Association, and is also a Joint Commission-certified Primary Stroke Center.

Doylestown Health's Cancer Institute offers patients, families and caregivers access to specialists and advanced screening, diagnostic, treatment and supportive services. It is a nationally accredited Community Cancer Center by the American College of Surgeons (ACoS) Commission on Cancer.



Doylestown Health's Orthopedic Institute offers the latest proven advances in orthopedic medicine to ensure the comfort and safety of patients. On the hospital campus, the Clark Outpatient Rehabilitation Center in the Ambulatory Center offers convenient access to a variety of rehabilitation services.

Doylestown Health Physicians, the staff of employed physicians, continues to grow to meet patient needs throughout our area.

Located just a few miles from the Hospital, the Pine Run Health Center is a short and long-term health center; and even closer is Pine Run Lakeview Personal Care facility. The Pine Run retirement community offers independent living in an active setting with residential apartments and cottages.

ACCOLADES

November 2021 — Doylestown Hospital earned an eleventh consecutive "A" grade for patient safety. Doylestown Hospital received an "A" Leapfrog Hospital Safety Grade for fall 2021. This national distinction recognizes Doylestown Hospital's achievements in protecting patients from harm and error in the hospital. There are only 124 hospitals in the U.S. that have maintained an "A" grade for 11 consecutive cycles and only two in Pennsylvania.

November 2021 — Doylestown Hospital earned a Press Ganey 2021 Guardian of Excellence Award® for Patient Experience. Press Ganey recognizes Doylestown Hospital as a top-performing healthcare organization achieving the 95th percentile or above for performance in patient experience in the Emergency Department.

October 2021 — Doylestown Hospital has received the American College of Cardiology's NCDR Chest Pain—MI Registry Platinum Performance Achievement Award for 2021. Doylestown Hospital is one of only 212 hospitals nationwide to receive the honor.

September 2021 — Doylestown Hospital is ranked 8th in Pennsylvania and 142nd in the U.S. as part of Newsweek's annual list of World's Best Hospitals for 2021. This ranking improved by 2 and 31 places respectively.

August 2021 — Doylestown Hospital received the American Heart Association's Get With The Guidelines®:

- Stroke Gold Plus Quality Achievement Award
- Heart Failure Gold Plus Quality Achievement Award and Target: Heart FailureSM Honor Roll.
- Resuscitation (Adult) Gold Quality Achievement Award for commitment to treating in-hospital cardiac arrest, ultimately helping to improve patient survival rates.
- Mission: Lifeline® STEMI Receiving Center and NSTEMI Gold Achievement Awards for implementing specific quality improvement measures to treat patients who suffer severe heart attacks more efficiently and rapidly.

July 2021 — Doylestown Hospital is again ranked as one of the best hospitals in the region and Pennsylvania in the latest U.S. News & World Report Best Hospitals rankings. Doylestown Hospital is 6th in the Philadelphia Metro Area and 12th in Pennsylvania. Doylestown Hospital also achieved "High Performing" status for Aortic Valve Surgery; Back Surgery (Spinal Fusion); Chronic Obstructive Pulmonary Disease (COPD); Colon Cancer Surgery; Heart Attack; Heart Bypass Surgery; Heart Failure; Hip Fracture; Hip Replacement; Kidney Failure; Knee Replacement, and Stroke, in recognition of care that was significantly better than the national average, as measured by factors such as patient outcomes.

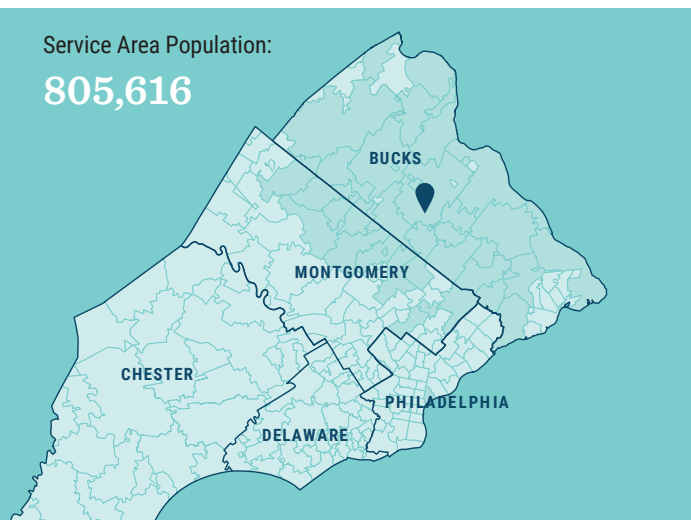
June 2021 — The American College of Cardiology recognized Doylestown Health for its demonstrated expertise and commitment in treating patients who come to an electrophysiology (EP) lab for care. Doylestown Hospital was awarded Electrophysiology Accreditation in June 2021 based on rigorous onsite evaluation of the staff's ability to evaluate, diagnose and treat patients who come to the EP lab.

AFFILIATIONS

- » Penn Radiation Oncology Doylestown Hospital is a state-of-the-art facility located in The Pavilion on the hospital's campus. It serves as Bucks County's satellite location for the most advanced radiation therapies available.
- » Doylestown Health Cardiology at Rockledge in Partnership with Redeemer Health
- » Shriners Children's Orthopedics – Doylestown
- » CHOP neonatologists/Level II Neonatal Intensive Care Nursery
- » MossRehab (12-bed inpatient rehabilitation facility)
- » Center for Wound Healing and Hyperbaric Medicine

Service Area Population:

805,616



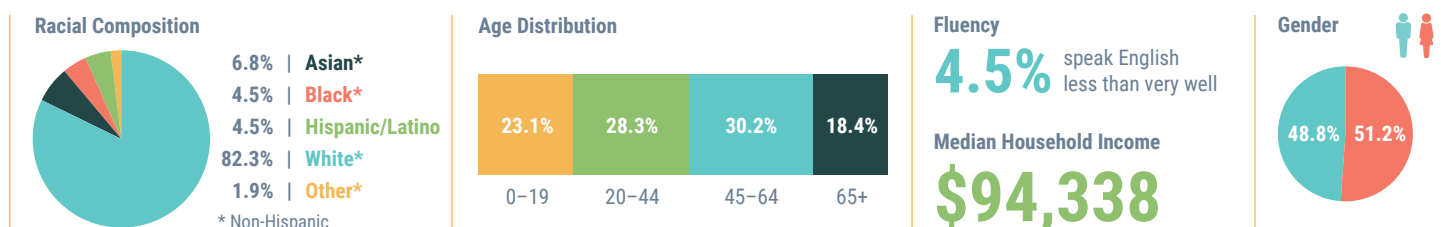
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Doylestown Health defines its targeted service area for community benefit as all the ZIP codes falling with the primary, secondary, and tertiary ZIP codes for providing care and services.

Montgomery County: 18054, 18915, 18936, 18964, 18969, 19001, 19002, 19006, 19038, 19044, 19090, 19438, 19440, 19446, 19454

Bucks County: 18077, 18901, 18902, 18912, 18913, 18914, 18917, 18920, 18923, 18925, 18929, 18932, 18938, 18940, 18942, 18944, 18947, 18951, 18954, 18960, 18962, 18966, 18972, 18974, 18976, 18977, 18980, 19020, 19047, 19053, 19067

SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

Focus Area 1: Healthy Behaviors

1. Nutrition

- » **Education** programs to increase awareness of nutrition's impact on the whole body were implemented, including a healthy meal service for Doylestown Health Associates, interactive demonstrations of healthy sugar/salt consumption amounts, seminars on healthy eating guidelines in varied community settings, and collaboration with United Way Fresh Connect Program involving Doylestown Health registered dietitians providing food, education, and recipes to families with low incomes.
- » **Screening** efforts to increase awareness of metrics like waist circumference, BMI, and body fat percentage were advanced through partnerships enabling onsite screenings in community settings (e.g., satellite offices, senior centers, corporate locations, large community events).
- » **Resources** in the form of expanded access to lifestyle change programs, including spreading of Doylestown Health's "A Healthy Weigh" weight management program to other sites.

2. Physical Activity

- » **Education** programs to raise awareness of the connections between physical activity and health disease, mental health, and overall health and well-being were implemented in various community settings.
- » Increased access to **resources** to advance physical activity by growing partnerships with organizations that focus on physical activity through community outreach and Associate Health and Wellness Program.

3. Tobacco

- » **Education** initiatives focused on developing partnerships with tobacco cessation providers and exploring additional program delivery modalities beyond in-person, increasing awareness of issues such as preventing vaping among children and teens, and considering ways to incentivize family members of staff (e.g., spouse) to not smoke through the Associate Health and Wellness Program.

Focus Area 2: Mental Health

- » **Educational** efforts were focused on increasing awareness of mental and behavioral health conditions and reducing stigma through expansion of the Doylestown Health Mental Health Series to more community partners and Bucks County Health Improvement Partnership Mental Health Stigma Campaign. In addition, Darkness to Light trainings were provided to schools, community organizations, and businesses to prevent child sexual abuse through support from the Beau Biden Foundation and Shoprite of Warminster. Finally, Doylestown Health partnered with Bucks County to offer QPR (question, persuade, refer) suicide prevention training to staff and the community.
- » **Behavior modification** initiatives included implementing mindfulness programs to provide children and teens with stress coping mechanisms in community and school settings and growing the BCARES Warm Handoff program through emergency department (ED) and Penn Foundation to reduce recurring ED visits due to substance abuse.
- » To enable connection to **resources**, use of 211 United Way was expanded to increase access to care through resource guide and community referrals and partnerships with mental and behavioral health partner in community programming and education.

Focus Area 3: Screenings

- » **Education** efforts in community and business settings were increased to address the following focal areas: genetics and breast cancer/genetics and colon cancer, lung cancer, colorectal cancer, skin cancer, blood pressure, and cholesterol.
- » Increased **screenings** for uninsured and underinsured populations were offered through breast cancer screenings and a free mammography program, radon screenings to reduce lung cancer risk, and colon cancer/colorectal screenings. In addition, to increase awareness of risk factors and chronic health conditions, the following were offered: blood pressure screenings, cholesterol screenings, biometric screenings in community settings for those who do not currently utilize a primary care doctor to connect them to health system for preventative care, and biometric screenings in business to promote a culture of awareness, health, and well-being.
- » A colorectal cancer navigator was hired for Doylestown Health to create screening guidelines, among other key **resources**.

Focus Area 4: Older Adult Health

- » **Education** efforts were focused on increasing participation and attendance for programming for older adults (addressing screenings and connecting seniors to physicians and community resources) held in community and business settings, including senior centers, senior expos, senior living facilities, Doylestown Health outreach centers, and Pine Run Retirement Community, a core partner in supporting CHNA outreach efforts.
- » To reduce senior isolation, a project to focus on social interaction and health and wellness led by Doylestown Health, senior volunteers, and community partners was implemented.
- » Seniors were connected with **resources** and received assistance with navigating the health system through utilization of directories, hospital internal navigators, and support resources, as well as educational programs offered in person or online.

Focus Area 5: Access to Care

New programs have been developed to:

- » Increase access to care for those who are uninsured or underinsured, including piloting a platform utilized by Doylestown Health Cancer Navigators to assist cancer patients in accessing transportation for visits and follow-up appointments.
- » Increase access to education and screening events by utilizing technology such as interactive webinars, one-on-one phone calls, and health coaching.
- » Increase access to primary care and specialty care/follow-up visits by partnering with the township and county.
- » Develop collective community partnerships focused on increasing transportation, such as partnering with United Way 211 platform to build out the referral network for community resources.



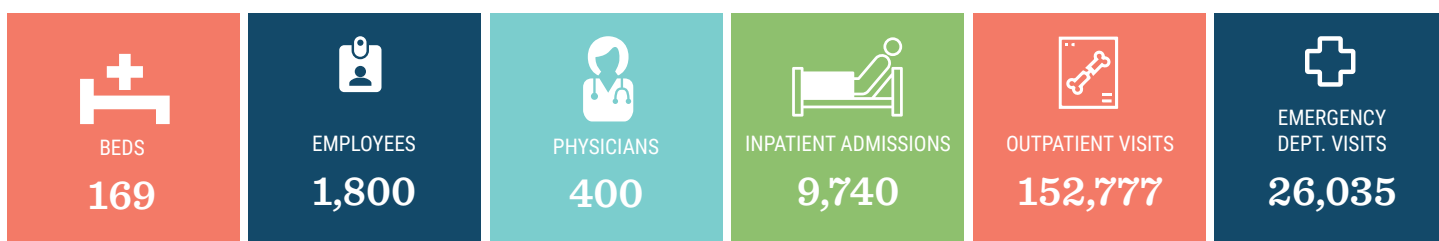
Grand View Health

True to its mission of **leading the community to a healthier future**, Grand View Health provides exceptional care to residents of Bucks and Montgomery Counties. Grand View offers a wide array of inpatient and outpatient services, with specialized expertise in bariatrics, cancer care, cardiology maternity, neurosurgery, orthopedic surgery, women's and children's health, and post-acute care.

In September 2021, the system's flagship location, Grand View Hospital, earned accreditation from the Pennsylvania Trauma Systems Foundation as a Level II Adult Trauma Center, making it possible to deliver lifesaving critical care to the community close to home. The organization is part of the Penn Trauma Network.

Grand View Health has a strategic alliance with Penn Medicine that complements the quality of care delivered across multiple disciplines including orthopedics and cancer. In November 2021, the relationship expanded to include tele stroke emergency consults with Penn Medicine neurologists, and in February 2022, Grand View patients will have access to tele neurology consults as well.

Grand View Health is adding services and opening new facilities to meet the growing demands of the community and accommodate new healthcare technologies. A 190,000-square-foot expansion of Grand View Hospital, scheduled for completion in 2023, will include 52 new patient rooms, a new Emergency Department with 28 treatment rooms and two trauma bays, 10 new operating rooms including four hybrid ORs and a new cardiac catheterization laboratory and diagnostic imaging technology.



Recognized for excellence- chosen for caring.

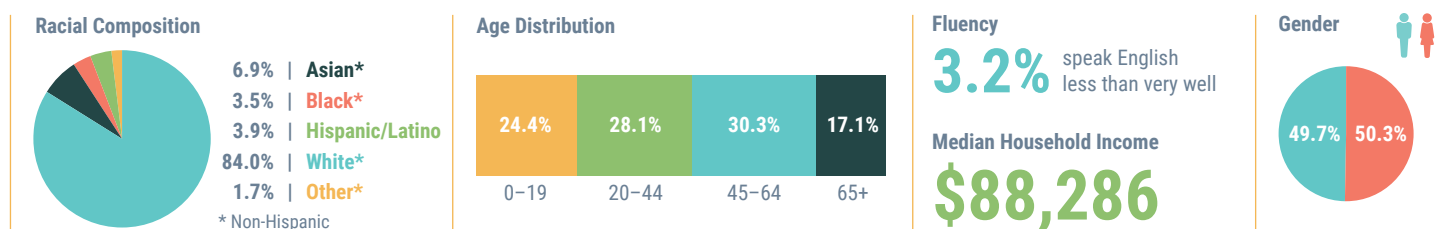


Grand View Health also operates seven outpatient locations in Bucks and Montgomery Counties, many of which offer early morning, evening and weekend hours to make care convenient and highly accessible. The Dublin Outpatient Center opened in October 2021 and the Pennsburg outpatient center opened in August of 2020. The Center for Orthopedics and Neurosurgery is a 12,000-square-foot destination which opened in July 2020. This state-of-the-art center offers patients an extensive array of services, including sports medicine, neurosurgery, and orthopedics experts, physiatry, athletic training and physical therapy, all in one convenient location.

The hospital's cardiology program received the American/Heart/ American Stroke Association's Get With the Guidelines® Heart Failure and Afib Gold Plus Quality Achievement Awards in 2021, while the stroke program, designated a Primary Stroke Center by the American Heart Association and Joint Commission, received Silver Plus recognition for 2021. Grand View's PCI program lab received reaccreditation by Corazon in November 2021.

A CHOP pediatrician is always available on site at Grand View Hospital, allowing access to high quality pediatric and neonatal care.

SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

Grand View Health's 2019 Community Health Needs Assessment identified the following health issues in the community:

1. Behavioral Health Diagnosis and Treatment
2. Substance/Opioid Abuse
3. Chronic Disease Prevention
4. Healthcare and Health Resources Navigation

1. Behavioral Health Diagnosis and Treatment

Suicide risk assessments and depression screening are completed in the ED, inpatient acute care, and maternal/child health and home care with referrals to appropriate agencies. Primary care practices screen for depression with referrals to nurses, social workers, mobile crisis, ED, or Penn Foundation.

Grand View Health's objectives in meeting this need included increasing access to behavioral health services through continued development and growth of community partnerships across the healthcare continuum. Additionally, Grand View provides crisis workers from 7a-1130p in the Emergency Room (ER) 7 days per week. Clinicians have access to a Tele Psych robot to support the care of the behavioral health patient in the ER and inpatient areas.

TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Grand View defines its service area as the following ZIP codes within Bucks and Montgomery counties, which represent the primary and secondary capture areas for the hospital. Additional ZIP codes in Lehigh (18036) and Berks (19504) counties are also part of the Grand View service area and comprise an additional 18,938 residents.

Bucks County: 18901, 18902, 18917, 18923, 18930, 18932, 18942, 18944, 18951, 18955, 18960

Montgomery County: 18041, 18054, 18070, 18073, 18074, 18076, 18964, 18969, 19426, 19438, 19440, 19446, 19454, 19473

Lehigh County: 18036

Berks County: 19504

2. Substance/opioid abuse

Grand View Health partners with outside agencies and services to increase patient and community access to substance abuse disorder services for recovery and ongoing treatment. Additionally, the hospital's Opioid Stewardship Committee collaborates with The Hospital and Healthsystem Association of Pennsylvania to create initiatives to reduce the prescribing and administering of opioids for inpatient and outpatient care.

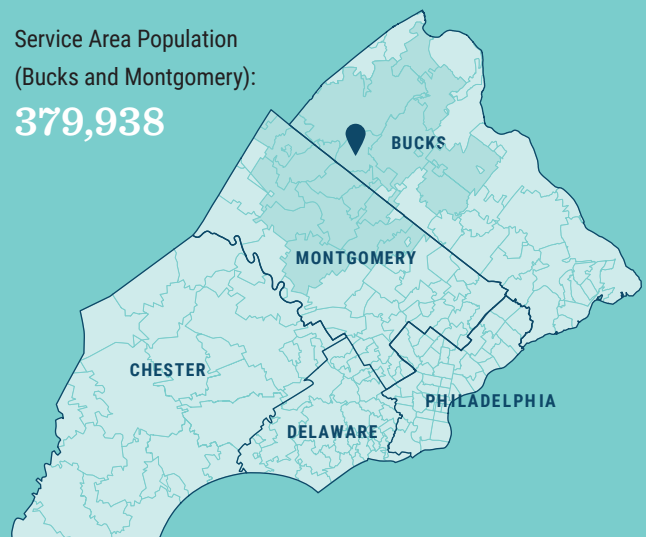
3. Chronic Disease Prevention and Healthcare and Health Resource Navigation

Grand View health objectives to meet this need include increasing awareness of the prevention of chronic diseases through healthy lifestyle choices with a combination of education and community outreach. Additionally, Grand View Health developed community health resource directories to provide more information about services available to patients and community for caregivers and providers to utilize for patient referrals.

Overall, the health needs identified by the CHNA and prioritized by Grand View Health and community stakeholders are being addressed and will continue to be addressed with the incremental resources, outreach and resources of our Trauma program and the completion of the new Pavilion as well as all of the existing services and partnerships in which the GVH health system is engaged.

Service Area Population
(Bucks and Montgomery):

379,938





Jefferson Health

MISSION

We Improve Lives.

VISION

Reimagining health, education and discovery to create unparalleled value.

VALUES

Jefferson Health's values define who we are as an organization, what we stand for and how we continue the work of helping others that began here nearly two centuries ago. These values are:

Put People First:

Service-Minded, Respectful & Embraces Diversity

Be Bold & Think Differently:

Innovative, Courageous & Solution-Oriented

Do the Right Thing:

Safety-Focused, Integrity & Accountability

Jefferson Health, in partnership with Thomas Jefferson University, is dedicated to discovering new treatments and therapies that will define the future of clinical care; providing exceptional primary through complex quaternary care to patients in the communities we serve throughout the Delaware Valley; and educating tomorrow's professionals through transdisciplinary and experiential learning designed for new and emerging fields for the 21st century.

Jefferson Health includes 18 hospitals throughout southeastern Pennsylvania and southern New Jersey. They are: Einstein Medical Center Elkins Park, Einstein Medical Center Montgomery, Einstein Medical Center Philadelphia, Jefferson Abington Hospital, Jefferson Bucks Hospital, Jefferson Cherry Hill Hospital, Jefferson Frankford Hospital, Jefferson Hospital for Neuroscience, Jefferson Lansdale Hospital, Jefferson Methodist Hospital, Jefferson Stratford Hospital, Jefferson Torresdale Hospital, Jefferson Washington Township Hospital, Magee Rehabilitation Hospital, MossRehab, Physicians Care Surgical Hospital, Rothman Orthopaedic Specialty Hospital and Thomas Jefferson University Hospital.

In 2021, Jefferson Health finalized its ownership of Health Partners Plans (HPP), a health maintenance organization that provides CHIP, Medicare Advantage and Dual Eligible Special Needs plans, and a nationally recognized Medicaid plan. Through HPP, Jefferson can continue to advance its value-based care model while reducing costs of healthcare services, particularly among underserved patients and families of the greater Philadelphia region.

Combined, Jefferson Health and Thomas Jefferson University have more than 42,000 employees, which includes nearly 3,500 employed physicians/advanced practice professionals, 9,500 full and part-time nurses and more than 1,900 full and part-time paid faculty. Jefferson is the second largest employer in Philadelphia and the largest health system in Philadelphia based on total licensed beds. Jefferson Health includes over 50 outpatient and urgent care centers; 10 Magnet®-designated hospitals; the NCI-designated Sidney Kimmel Cancer Center; and one of the largest faculty-based telehealth networks in the country that began more than 10 years ago.

Thomas Jefferson University Hospital is one of only 14 hospitals in the country that is a Level 1 Trauma Center and a federally designated Regional Spinal Cord Injury Center.

In 2021, Jefferson Health earned *Digital Health Most Wired* recognition from the College of Healthcare Information Management Executives (CHIME). Jefferson scored in the top 5% of all participating organizations, earning recognition for its technology advancements in acute care, ambulatory care and long-term care.

Also in 2021, nearly 600 Jefferson physicians were named among the region's best by Castle Connolly in *Philadelphia* magazine's 2021 Top Docs™ issue.

COVID-19 Response

Jefferson was able to treat more than 16,000 COVID-19 inpatients — ranking it as the busiest care provider in the Philadelphia region battling this global pandemic. Jefferson was the first health system in the Philadelphia region to institute universal masking guidelines, and at the peak of COVID-19, its infection rate among frontline staff was roughly 1% — a testament to the effectiveness of its safety protocols and the relentless commitment to sourcing adequate supplies of personal protective equipment for staff. This in turn translated to protecting thousands of patients from COVID-19 exposure.

Jefferson was also among the first in the region to arrange external Emergency Department triage tents and mobile-testing sites to keep patient screenings for COVID-19 outside of its hospitals. In parallel, Jefferson, with the largest faculty-based telehealth network in the country, treated more than 500,000 patients virtually throughout the pandemic — keeping both patients and physicians safe. Jefferson Health and the City of Philadelphia also worked closely together to open a COVID-19 testing site in Northwest Philadelphia to offer free, twice-weekly testing throughout the peak of the pandemic.

When the COVID-19 vaccine became available, Jefferson Health assembled a multidisciplinary COVID-19 Vaccine Task Force that worked tirelessly to develop its Real Talk Initiative and Trusted Messenger program to spread accurate and up-to-date information about the vaccine, particularly to Black and Brown communities that had concerns about the vaccine and mistrust of the medical and scientific community. In tandem, Jefferson initiated a mobile community vaccination program that has administered more than 5,200 vaccines in marginalized communities. More than 92% are people of color and 47% non-English speaking.

In the Community

In FY20 Jefferson Health contributed more than \$448 million in charitable care and community benefit. Among Jefferson's many efforts in this area is the work of the Jefferson Collaborative for Health Equity (the Collaborative), the community outreach and engagement arm of Jefferson Health charged with addressing the social and structural determinants of health in Philadelphia. Aligned with the CHNA and CHIP, the Collaborative partners with internal and external stakeholders to address the complex issues facing our communities by aligning resources, building partnerships, and forging trust and relationships that create sustainable change. The Collaborative builds on community strength to improve health and well-being in communities, fostering the local Ecosystem necessary to promote health equity and help every family in our targeted communities reach their full potential.

In 2020, Jefferson, in partnership with Temple, launched The Frazier Family Coalition for Stroke Education and Prevention, which is coordinated through the Collaborative to promote the health of North Philadelphia residents through a multifaceted program aimed at reducing the number of strokes. With its office located in the lowest-income zip code in the city, the coalition is countering the lack of access to providers, unmanaged chronic disease, and limited awareness of risk factors that has allowed the rate of stroke to swell in North Philadelphia.

Jefferson and Novartis also initiated a program called "Closing the Gap" to focus on reducing cardiac health disparities across the city's most vulnerable zip codes. Addressing social determinants of health, the program heavily utilizes Community Health Workers to screen, identify, and navigate individuals at high-risk for cardiovascular disease to the care and preventative services they need. The Jefferson Center for Connected Care was also launched to develop and test innovative approaches for a patient-responsive care delivery system. As part of its Reimagine fundraising campaign, Jefferson has set a goal of raising \$100 million for health equity initiatives in the greater Philadelphia region.

Jefferson is one of the largest providers in Philadelphia for refugee health care and is one of only four programs in the nation recognized by the Centers for Disease Control and Prevention as a Center of Excellence. In addition to its Center for Refugee Health, Jefferson opened the Hansjörg Wyss Wellness Center in 2021. The Center brings free medical and social services to immigrant and refugee communities. In the fall of 2021, Jefferson and other providers supported an extensive volunteer medical operation at the airport for Afghan evacuees. They offered urgent medical care for 1,600 on site, while providing family-centered testing and vaccinations.

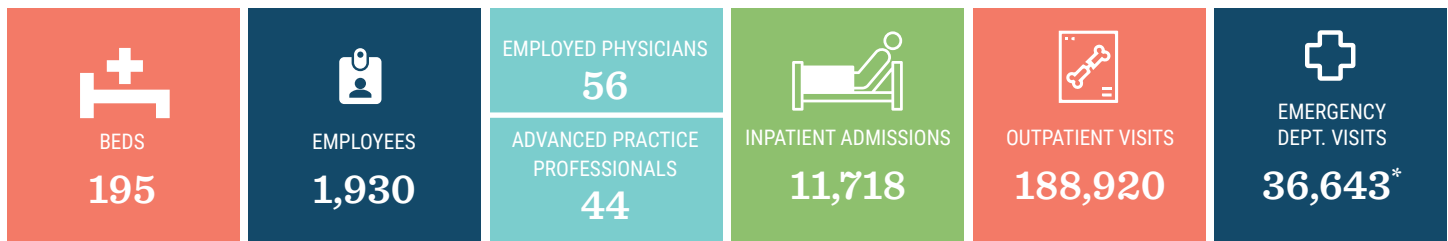


Einstein Medical Center Montgomery

Einstein Medical Center Montgomery (Einstein Montgomery) is a tertiary care medical center located in East Norriton, Montgomery County. Einstein Montgomery opened in September 2012 as part of the Einstein Healthcare Network, a non-profit healthcare organization. As of October 2021 it is part of Jefferson Health.

Einstein Montgomery offers a wide range of healthcare programs and services, from complex care requiring advanced technology and expertise, to preventive medicine and community outreach initiatives. Einstein cares for each person regardless of ability to pay, race, religion or national origin, and recognizes its responsibility to use its resources to elevate the health status of the communities it serves. In addition to Thomas Jefferson University, Einstein Healthcare Network has academic associations with several colleges and universities in the Philadelphia area, including Gwynedd Mercy University, Montgomery County Community College, Philadelphia College of Osteopathic Medicine, University of Pennsylvania and Villanova University.

In July 2019 Einstein Montgomery implemented its first residency programs in family medicine and vascular surgery - the first of many residency programs to transform Einstein Montgomery into a teaching hospital. Anticipated expansion includes emergency medicine, internal medicine, radiology, physical and rehabilitation as well as hospice and palliative care.



*FY21 Statistics

Einstein Montgomery operates one of the most experienced labor and delivery programs in the region. The hospital employs a unique model of doctors working in close collaboration with midwives, maintains low Cesarean section rates, and hosts a Level III Neonatal Intensive Care Unit (NICU) staffed by neonatologists from Children's Hospital of Philadelphia. Our Women's Resource Center provides a wide range of classes and services making care accessible and flexible. Services include lactation consultation and wellness programs along with prenatal/postpartum group support.

Cancer care at Einstein aims to treat the whole person. From patient navigators to guide the process and coordinate care, to pain management, support groups, rehabilitation, counseling and more. Our Cancer Awareness Program is accredited by the Commission on Cancer, has received the American Cancer Society's Cancer Control Award, and the American Society of Clinical Oncology has recognized our cancer program for improving care through high-quality clinical trials.

Einstein's breast health program includes a team of surgeons, medical oncologists, radiation oncologists, pathologists, radiologists and nurse navigators who work together to deliver exceptional, personalized care. Our breast health program is accredited by the National Accreditation Program for Breast Centers, a program of the American College of Surgeons. Einstein Montgomery's Breast Health Program is also an accredited Breast Imaging Center of Excellence by the American College of Radiology. Einstein partnered with Solis Mammography to bring patient-centered breast screening services to the community.

Einstein Montgomery has been the recipient of many awards and accolades. We are a Certified Chest Pain Center by the Society of Cardiovascular Patient Care with the American College of Cardiology. We also received the American Heart Association/American Stroke Association's *Get with the Guidelines®-Stroke Gold Plus With Honor Role Elite Award*. The Joint Commission also awarded their *Gold Seal of Approval®* to Einstein Montgomery's Hip and Knee Joint Replacement Program. Healthgrades published its Specialty Excellence Awards recognizing facilities for top line joint replacement and includes Einstein Montgomery.

Einstein Montgomery is also designated as a Center of Excellence in Bariatric Surgery by the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program. The hospital earned the 2022 *Women's Choice Awards* in: Bariatric Surgery; Heart Care; Orthopedics; Cancer Care; Comprehensive Breast Care; Women's Services; and Mammogram Imaging Center. Other accolades include a *Medication Safety Award* from the Institute for Safe Medication Practices for developing a screening tool to prevent respiratory arrest for patients receiving opioids as part of their treatment.

Einstein is a member of the Healthcare Anchor Network, a group of 70+ healthcare systems nationwide that is committed to intentionally applying our institution's long-term, place-based economic power and human capital in partnership with the community to mutually benefit the long-term well-being of both. Einstein's educational commitment includes providing health education to the community, and training and educating medical school students, graduate and practicing physicians, and other healthcare professionals. Einstein also supports clinical research for the purpose of enhancing the quality of patient care and advancing the science of medicine.



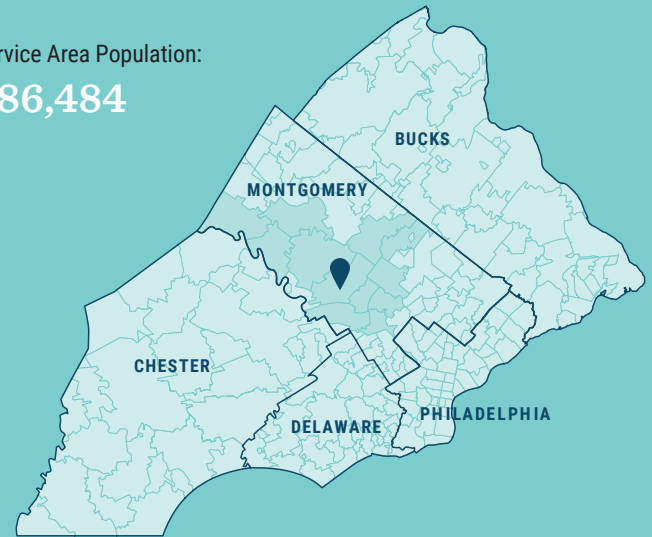
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Einstein Montgomery defines its targeted service area for community benefit by the following ZIP codes that represent 80 percent of inpatient discharges and outpatient cases.

Montgomery County: 19401, 19403, 19405, 19406, 19422, 19426, 19428, 19446, 19454, 19462, 19464, 19468, 19473

Service Area Population:

386,484



Impact of Prior Community Health Needs Assessment and Implementation

Einstein Montgomery continues to address unmet needs in the county by increasing access to care and expanding its reach. The 2019 implementation plan focused on making access to preventive health services and health care more convenient and easier to navigate. As a result of the Community Health Needs Assessment, Einstein focused the priority health needs across three domains:

- 1. Health Issues** – Physical and behavioral health issues that impact the health and well-being of a community.
- 2. Access and Quality of Health Care and Health Resources**
- 3. Community Factors** – Social and economic drivers that influence opportunity and daily living.

As a patient-centered medical home, Einstein adheres to quality measures including health screenings aimed to prevent chronic conditions such as hypertension, diabetes and cardiovascular disease as well as to detect various cancers. Einstein Montgomery supports community efforts to promote a healthy lifestyle and provides expertise through health screenings, health risk assessments and education in the community.

Einstein also provides several programs to minimize the health risks associated with tobacco use. Free smoking cessation classes are provided quarterly and include development of culturally relevant, multilingual education materials. We continue to partner with the American Cancer Society to provide community resources for those preparing to quit or recently completing a cessation course.

Einstein is committed to mitigating circumstances that lead to infant mortality through evidence-based best practice in maternity care. The Nurse-Family Partnership is a community-based program serving low income, first-time pregnant women. Clients are assigned a highly trained nurse who provides home visiting and one-to-one guidance during pregnancy and through the child's second birthday. With over forty years of evidence, the Nurse-Family Partnership program follows model elements that support improved birth outcomes, child health and development and economic self-sufficiency. Neonatologists at Einstein Montgomery are leading a multidisciplinary team to examine best practices surrounding Neonatal Abstinence Syndrome (NAS). The team focuses on building relationships with parents, including prenatal outreach and support post discharge. They work closely with Montgomery County's Office of Children and Youth's Plan of Safe Care initiative.

To make healthcare services more accessible, Einstein has implemented many of the proposed solutions from the CHNA and continues to collaborate internally to improve quality care. Tactics include online appointment scheduling, extended appointment hours, and telehealth care coordination.

EINSTEIN MEDICAL CENTER MONTGOMERY

Einstein provides patient navigation and case management for many chronic conditions and high-burden diseases such as cancer, orthopedics and cardiac care. The Patient Advocates at Einstein provide guidance on issues about access to healthcare services, medical bills or other challenges related to care. Patient Advocates can also help patients and visitors understand Einstein policies, patient rights and responsibilities. Navigation covers physical, psychosocial and economic issues of clinical care, beyond the diagnosis and treatment phases. Financial Counselors are available to assist in applying for public medical assistance, charity care or to help with special circumstances arising from hospitalizations.

Einstein remains committed to improving relationships with community leaders who represent culturally diverse populations and helps bridge gaps in care that may include issues such as health literacy, cultural sensitivity and alternative approaches to accessing services. To better serve the community, Einstein developed multi-language initiatives with program highlights including:

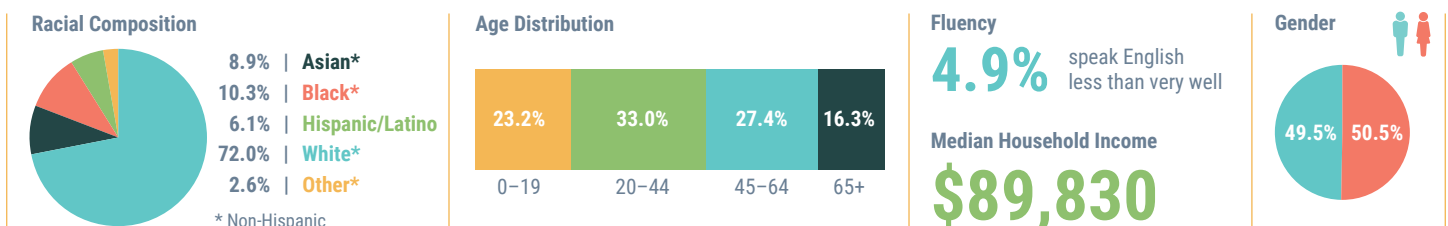
- » **Reducing pediatric visits to the Emergency Department** – Pilot program for Latino families to receive group education on when to seek primary care vs emergency care.
- » **Baby's First Book** – In partnership with the North Wales Area Library, all babies born at Einstein Montgomery receive a book through the One Book, Every Young Child initiative by the Pennsylvania Department of Education. Multilingual books are available.
- » **Community Health Initiatives** – Our ongoing support of community health initiatives include: The International Spring Festival in the North Penn area, Bharatiya Temple's annual healthy heart event, ACLAMO's Family Day, the Korean wellness event in partnership with the Jaisohn Center.

Einstein recognizes that significant population health improvement requires attention to factors beyond clinical care, and continues to address social determinants of health through point of care screenings and community resource development. Care managers work closely with local community resources for food access, housing insecurity and domestic violence. Through partnerships with local agencies, Einstein has also implemented workforce development initiatives that foster career exploration and job readiness. Staff participate in professional development workshops and co-op opportunities with the local vocational schools to provide on the job training and skill development.

Einstein Montgomery was designed to provide a natural healing environment. Located on an 87-acre campus, the award-winning design includes a half-acre healing garden near the main entrance that offers patients and visitors a restful space for conversation and meditation. In Norristown, the Nicholas and Athena Karabots Medical Building houses a produce garden that yields over 500 lbs of fresh produce annually. Garden beds are maintained by Einstein staff and the produce is distributed in the patient waiting rooms. Each year, Einstein Montgomery hosts A Walk Through the Park, an event with proceeds that directly benefit patient needs for cancer care including financial navigation, supportive care and wellness initiatives.

We work collaboratively to explore strategies that promote healthy housing and alleviate homelessness through the existing work initiated by the HealthSpark Foundation's Resiliency Initiative and the Bucks-Mont Collaborative. Einstein continues to leverage internal resources to support local efforts for the health and safety of our homeless population including supplying blankets and hygiene products as well as environmental cleanup efforts within the community.

SERVICE AREA DEMOGRAPHICS



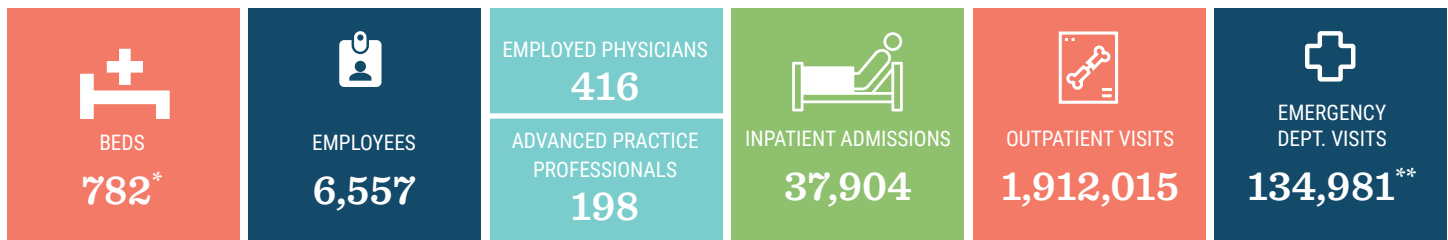


Einstein Medical Center Philadelphia

The Jewish Hospital opened its doors to patients in 1866 in a 22-bed farmhouse in West Philadelphia. These words appeared over the entrance of the Jewish Hospital when it opened: “Dedicated to the relief of the sick and wounded without regard to creed, color or nationality.” This credo was groundbreaking for the time, assuring Jewish Civil War veterans, freed slaves, women and children, rich and poor, that they could rely on the hospital for outstanding medical care delivered with compassion and without discrimination. That commitment remains at the heart of Einstein today and remains its guiding principle.

What started as the Jewish Hospital grew to become Einstein Healthcare Network (EHN), a leading, non-profit healthcare system made up of Einstein Medical Center Philadelphia (EMCP), Einstein Medical Center Elkins Park (EMCEP), Einstein Medical Center Montgomery, MossRehab (a provider of comprehensive rehabilitation services), Willowcrest (named one of the best nursing homes in Philadelphia for short-term rehabilitation care by *U.S. News & World Report*), multiple outpatient care centers, and dozens of physician practices throughout Philadelphia and Montgomery Counties. In October 2021 the Einstein Healthcare Network became part of Jefferson Health.

EMCP is a community-based academic medical center situated in North Philadelphia, serving a diverse and disadvantaged population. It also includes EMCEP and MossRehab. EMCP is considered a private healthcare safety-net hospital, bearing a large share of responsibility for caring for the poor as measured by service to Medicaid, Medicare SSI, and uninsured patients.



*Includes Moss Rehab and Willowcrest **FY21 Statistics

Services include: a full-service maternity unit with a Level III Neonatal Intensive Care Unit; a Level One Trauma Center; advanced heart care, including cardiac catheterization, open heart surgery, and electrophysiology intervention; cutting-edge cancer care; orthopedics and bariatric surgery. Primary care services are provided by Einstein Physicians, a network of physicians, nurses and healthcare specialists dedicated to serving patients throughout every stage of life

EMCP is a tertiary care teaching hospital providing training for more than 450 residents in 35 accredited programs, as well as 800 rotating students from local medical schools. The hospital has established relationships with eight area schools of nursing and provides clinical training for almost 1,400 nursing students each year. EMCP trains more than 3,500 health professional students each year.

EMCEP is a full service medical and surgical specialty hospital. Robotic surgery for urologic and gynecologic procedures and minimally invasive spine and joint replacement surgery. Services include Einstein Bariatrics®, radiology, cardiology, neurology, ophthalmology, neuro-ophthalmology, and more.

EMCP handles many of the area's deliveries, averaging 3,000 births per year. Einstein remains committed to improving perinatal outcomes and the health of infants and toddlers living in the community it serves. To that end, EMCP launched CenteringPregnancy in 2012 and CenteringParenting in 2014. Both programs are models of group care that integrate health assessment, education, and support. Currently, Einstein has the largest CenteringParenting program in the country. EMCP's dedication to obstetrical care has resulted in designation as a Blue Distinction Center for Maternity Care by Independence Blue Cross. EMCP earned designation as a Baby-Friendly birth facility (2019-2023) by the World Health Organization and the United National Fund for providing the best infant care and feeding practices to mothers and babies.

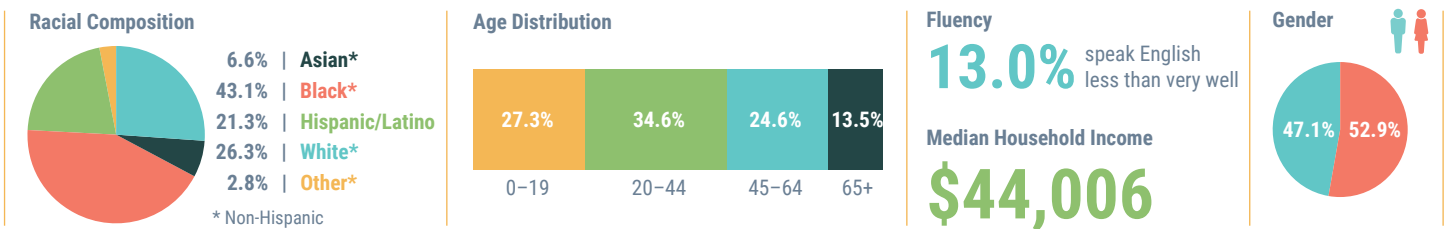


Families Understanding Nutrition (FUN) is a collaborative partnership between Einstein and more than 45 agencies, including the School District of Philadelphia, the Free Library of Philadelphia, and the Montgomery County Intermediate Unit, to provide general nutrition education to low-income families. EMCP provides nutrition education to SNAP-eligible families, primarily focusing on the Head Start and Bright Futures programs.

MossRehab is a national and international leader in rehabilitation medicine, ranked the number one rehabilitation hospital in the region and number nine in the nation by *U.S. News & World Report*. MossRehab provides inpatient and outpatient rehabilitation for stroke and neurological disorders, spinal cord injury, traumatic brain injury, amputation, orthopedic and other conditions. Treatment is personalized and can include physical, occupational, and speech therapy, as well as maintenance and support programs to re-establish independence.

MossRehab offers rehabilitation robotics, helping patients to rehabilitate and transition through inpatient and outpatient care. MossRehab operates six inpatient units and 15 outpatient locations in Philadelphia, Montgomery and lower Bucks counties, as well as in New Jersey and Delaware.

SERVICE AREA DEMOGRAPHICS



Additionally, MossRehab houses the Moss Rehabilitation Research Institute which aims to develop groundbreaking research with rapid translation to clinical application. In acknowledgment of its expertise in the field of spinal cord injuries, MossRehab was selected to partner with the National Spinal Cord Injury Association to create the Philadelphia Chapter of the National Spinal Cord Injury Association, the first hospital-based chapter in the country.

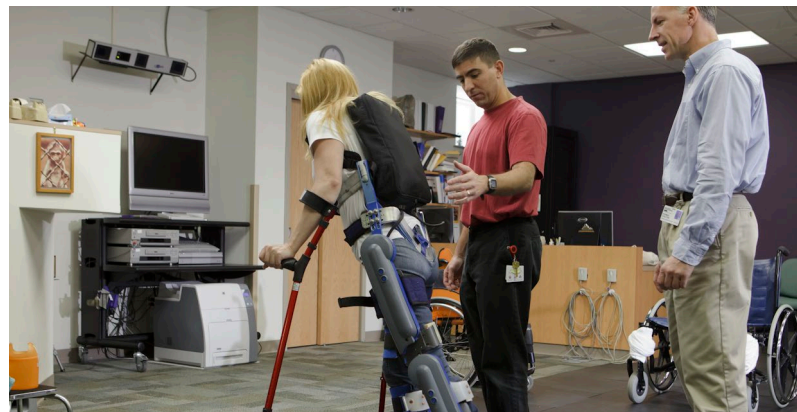
Einstein's Center for Organ Disease and Transplantation is an established leader in kidney, liver and pancreatic transplantation in the Philadelphia region. The center is staffed by physicians and surgeons specializing in nephrology, hepatology and organ transplantation. These team members work closely with patients, families and referring physicians to best manage a patient's individual treatment. Einstein also offers the latest technology, medications and interventions for kidney, liver and pancreatic disease.

Cancer care at Einstein is about more than just treating the cancer — it's about treating the whole person. From navigators to help patients through the process and coordinate their care, to pain management, support groups, rehabilitation, counseling and more. Einstein's Cancer Awareness Program is accredited by the Commission on Cancer, has received the American Cancer Society's *Cancer Control Award*, and the American Society of Clinical Oncology has recognized Einstein's cancer program for improving care through high-quality clinical trials. Along with top doctors and a full range of support services for patients and their families, it's why our outcomes beat national averages in every type of cancer we treat. Using state-of-the-art diagnostic tools and treatments, cancer specialists develop highly personalized treatment plans to help patients overcome their cancer. Treatment may include highly advanced radiation therapy treatments using a Varian TrueBeam® or Varian Trilogy® linear accelerator, the latest in minimally invasive surgical techniques, and some of the most cutting-edge experimental cancer therapies available anywhere, through a variety of clinical trials.

Among the many accolades EMCP achieved, its Cancer Program was accredited by the Commission on Cancer of the American College of Surgeons. EMCP is also a Breast Imaging Center of Excellence as designated by the American College of Radiology and accredited by the National Accreditation Program for Breast Centers by the American College of Surgeons.

EMCP also earned the American Stroke Association's *Stroke Gold Plus and Honor Roll Elite and Target: Type 2 Diabetes Honor Roll*, an *Advanced Therapy Quality Achievement Award* for adherence to standards of care for stroke patients which speeds recovery and saves lives. EMCP is the first hospital in PA and one of only a few in the country to earn The Joint Commission's advanced certification as a Thrombectomy-Capable Stroke Center in collaboration with the American Heart Association/American Stroke Association. The certification signifies that the hospital meets rigorous standards for performing mechanical endovascular thrombectomy, a surgical procedure used to remove a blood clot from the brain during an ischemic stroke.

EMCP and EMCEP both received *Independence Blue Cross Center of Excellence/Blue Distinction* recognition in several areas. EMCP has been designated a Blue Distinction Center for Spine Surgery and both EMCP and EMCEP were acknowledged for Hip & Knee Surgery and Bariatrics.



Impact of Prior Community Health Needs Assessment and Implementation

A Community Health Needs Assessment (CHNA) was performed in the fall of 2019 to determine the health status and healthcare needs of residents in the Einstein Medical Center Philadelphia and Einstein Medical Center Elkins Park service areas. As a result of this CHNA, EMCP/EMCEP adopted strategies to address the following needs:

- » Early prenatal care to reduce infant mortality through implementation of CenteringPregnancy® and a CenteringParenting® programs and Baby Friendly Designation.
- » Primary care for low-income adults through the Einstein Community Health Associates primary care network.
- » Prescriptions for older adults and low-income populations through Einstein's 340B program.
- » Mental health treatment through Einstein's two adult inpatient units, the Outpatient Center, the Community Practice Center and the Crisis Response Center.
- » Behavioral health treatment for school-age children through our school-based student assistance programs.
- » Services addressing activities of daily living limitations among older adults through multiple programs at MossRehab that include Moss Muscle Builders, arthritis support services, program for individuals with mobility disorders, fall risk assessments and navigation programs for Multiple Sclerosis and Parkinson's diseases.

Einstein's educational commitment includes providing health education to the community, and training and educating medical school students, graduate and practicing physicians, and other healthcare professionals. Einstein also supports clinical research for the purpose of enhancing the quality of patient care and advancing the science of medicine.

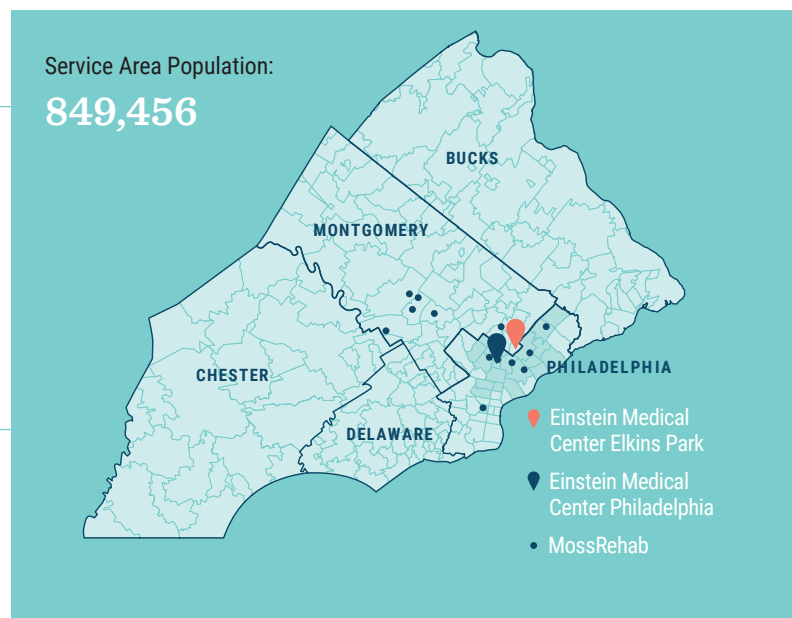
With growing recognition that significant population health improvement requires attention to factors beyond clinical care, Einstein is exploring approaches to identifying and addressing non-medical determinants of health. Such efforts are especially critical in Philadelphia, where high rates of poverty, chronic disease, and obesity persist. Einstein is actively working to implement programs and partnerships to address food insecurity, economic development, education and housing.

TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Einstein Medical Center Philadelphia defines its targeted service area for community benefit as ZIP codes that represent 75 percent of inpatient discharges and outpatient cases.

Philadelphia County: 19111, 19115, 19116, 19119, 19120, 19121, 19124, 19126, 19132, 19133, 19134, 19135, 19136, 19138, 19140, 19141, 19144, 19149, 19150, 19152

Montgomery County: 19027





Jefferson Abington Hospital

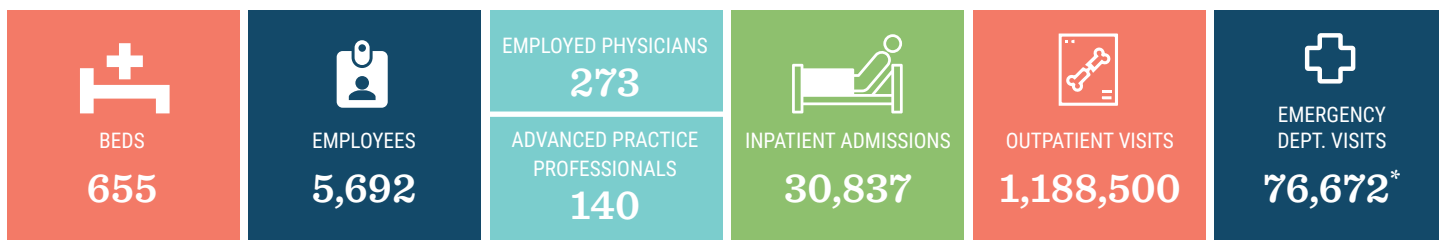
Jefferson Abington Hospital is a regional referral center and teaching hospital located in Abington, Montgomery County, and has served the residents of Bucks and Montgomery counties for over 100 years. Jefferson Abington Hospital offers comprehensive healthcare services at a level not often found in a community hospital, including advanced robotic and minimally invasive surgical techniques, neurovascular care, a Level III neonatal intensive care unit and more. Additional services and specialties include: primary care, obstetrics and gynecology, cardiovascular, orthopaedic and spine, neuroscience, metabolic and bariatric surgery, senior health and more.

Jefferson Abington Hospital, part of Jefferson Health, is committed to improving lives and providing high quality, compassionate care that is easily accessible to the community. The commitment to providing accessible care during the COVID-19 pandemic is what led the hospital to launch a COVID-19 Community Testing Site in March 2020 - the first of its kind in the Philadelphia area.

In 2019, the hospital opened its newest outpatient health center located in Horsham, Montgomery County. Jefferson Health – Horsham is the seventh outpatient facility of its kind that the organization operates in Montgomery and Bucks counties. The 20,000 square-foot, state-of-the-art facility includes three medical practices and a full service laboratory on site.

Also in 2019, Jefferson Health – Abington partnered with Nemours Children's Health to provide pediatric services to infants, children and adolescents of Bucks and Montgomery counties. Through this collaboration, Nemours pediatric hospitalists provide advanced medical care for children in Jefferson Abington Hospital's 15-bed pediatric unit, pediatric consultations in the hospital's Emergency Trauma Center and more.

JEFFERSON ABINGTON HOSPITAL



*FY21 Statistics

In addition to this collaboration, as a major regional teaching facility, Jefferson Abington Hospital also maintains associations with Philadelphia College of Osteopathic Medicine and Sidney Kimmel Medical College at Thomas Jefferson University.

In FY20 and FY21, Jefferson Abington Hospital received numerous awards and accolades for high quality patient care, excellence and safety, including recognition from the Institute for Healthcare Improvement as an *Age-Friendly Health System* (2019). Age-Friendly Health Systems work to implement a set of evidence-based interventions specifically designed to improve care for older adults.

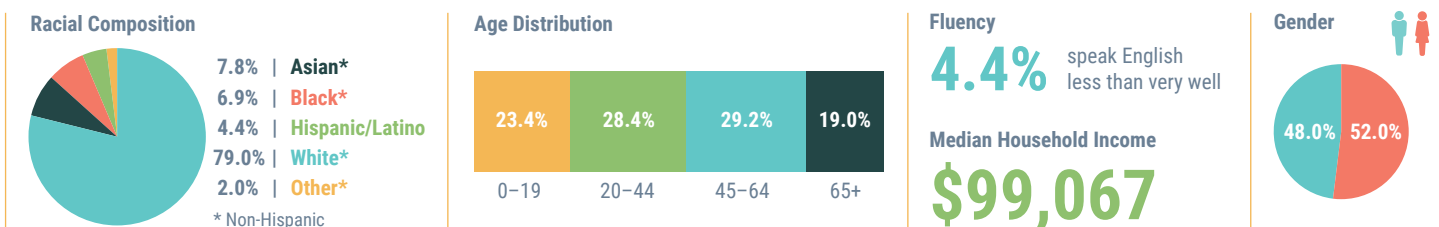
In the area of maternity care, Jefferson Abington Hospital was named to *Newsweek's* 2020 list of "Best Maternity Care Hospitals," one of fewer than 250 hospitals nationwide to receive this honor. In addition, the Hospital and Healthsystem Association of Pennsylvania (HAP) awarded Jefferson Abington Hospital the *2020 Excellence in Care Achievement Award*, one of three awards the hospital's maternity program earned for its work to reduce opioid use among women who give birth by cesarean section.

In FY21, Jefferson Abington Hospital earned the *Mission: Lifeline-STEMI Receiving Center – Gold Plus Quality Achievement Award* from the American Heart Association for applying the most up-to-date evidence-based treatment guidelines to improve patient care and outcomes in the community. The Hospital was also granted the American Heart Association/American Stroke Association's *Get with the Guidelines Stroke Gold Plus with Target: Stroke Elite Honor Roll* and *Target: Type 2 Diabetes Honor Roll* designations.



Jefferson Abington Hospital was ranked seventh in the Philadelphia region and thirteenth in the state in *U.S. News & World Report's* annual "Best Hospitals" ranking in 2021. The Hospital scored high-performing in 10 categories: aortic valve surgery, congestive heart failure, colon cancer surgery, chronic obstructive pulmonary disease, diabetes, heart attack, hip replacement, knee replacement, kidney failure and stroke. Additionally, Jefferson Abington Hospital was rated high performing in one specialty area: Diabetes & Endocrinology.

SERVICE AREA DEMOGRAPHICS

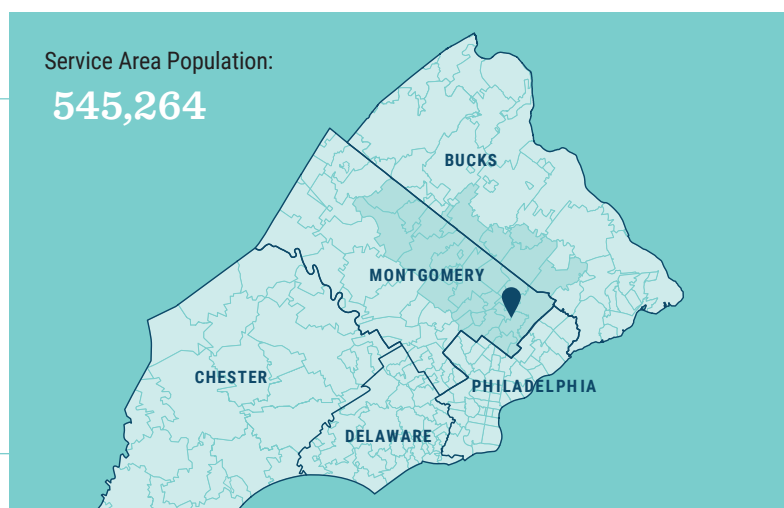


TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Montgomery County: 18915, 18936, 18964, 18969, 19001, 19002, 19006, 19009, 19012, 19025, 19027, 19031, 19034, 19038, 19040, 19044, 19046, 19075, 19090, 19095, 19422, 19436, 19437, 19438, 19440, 19446, 19454, 19477

Bucks County: 18914, 18929, 18932, 18966, 18974, 18976



Impact of Prior Community Health Needs Assessment and Implementation

Jefferson Abington Hospital develops targeted health outreach programs and screenings in response to the identified needs of our community in concert with the mission of Jefferson Health: We Improve Lives. We work to create the healthiest community by orchestrating targeted outreach for maximum community benefit, while reducing health disparities.

In fiscal year 2020, Jefferson Abington Hospital provided over \$101.7 million to individuals in our communities seeking resources for care and education, in alignment with our Community Health Implementation Plan developed in response to our 2019 Community Health Needs Assessment:

- » Over \$76.2 million in financial assistance and subsidized health services was provided to members of the community. Jefferson Abington Hospital provides access to affordable primary/preventative/specialty care through the following programs:
 - Abington Family Medicine
 - Abington Dental Clinic
 - Corinne Santerian Newborn Center
 - Hartnett Health Services, which recently expanded space to provide better services
 - OB/GYN Clinic
- » Jefferson Abington Hospital provides many free or low-cost programs throughout the year designed to educate the community regarding health risk factors, chronic disease prevention or to support early detection through health screenings. In addition to cardiovascular-related health screenings, a free Cancer Screening Day is held annually. Jefferson Abington Hospital collaborates with many community organizations to support community health improvement initiatives.

- » Jefferson Abington Hospital also provides programs and services designed to support seniors with activities, information and care close to home. A low-cost “Memory Fitness” program offers physical and social activities on an outpatient basis to sharpen the memory skills of older adults who are experiencing early memory loss. A faith-based advisory council, led by Jefferson Abington Hospital, works together to support and provide/coordinate programming at specific sites for over 300 members of Faith Community Ministries to address chronic disease management.
- » Partnering with the Montgomery County Public Safety and the Abington Health Foundation Women’s Board, Narcan® kits were made available to patients in Jefferson Abington Hospital’s Emergency Trauma Center.
- » Throughout fiscal year 2020, Jefferson Abington Hospital provided more than \$2.7 million in free health education, screenings, in-kind donations and other community support.
- » As a teaching hospital, Jefferson Abington Hospital educates many physicians, nurses and allied healthcare professionals. The Hospital maintains residency programs in family medicine, internal medicine, OB/GYN, general surgery and dentistry. In fiscal year 2020 Jefferson Abington Hospital provided over \$22.5 million in medical education programs.

Detailed reports of community benefit activity at both Jefferson Abington Hospital and Jefferson Lansdale Hospital, as well as the Community Health Needs Assessments and Action Plans are available at <https://www.abingtonhealth.org/about-us/communitybenefit/>.



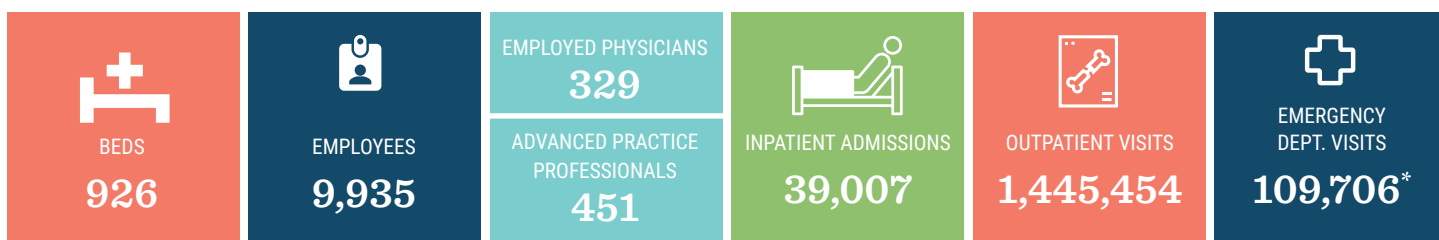
Jefferson Health – Center City

Jefferson Health - Center City has major programs in a wide range of growing clinical specialties that have been offered to the community for nearly 200 years. Services are provided at Thomas Jefferson University Hospitals, Inc., which includes Thomas Jefferson University Hospital, Jefferson Hospital for Neuroscience and Jefferson Methodist Hospital.

As part of Jefferson Health, Thomas Jefferson University Hospitals, Inc. is the academic medical center for Thomas Jefferson University, a professional, R2 national doctoral university focused on transdisciplinary, experiential education designed to deliver high-impact education and value in architecture, business, design, engineering, fashion and textiles, health, science and social science.

As an academic medical center, Thomas Jefferson University Hospitals stands out among the nation's best hospitals as ranked by *U.S. News & World Report*. In 2021-22, the hospital ranked nationally in six specialties: Cancer; Diabetes and Endocrinology; Gastroenterology and GI Surgery; Ophthalmology; Orthopedics; and Pulmonology. Thomas Jefferson University Hospital also continues to rank highly in the list of top hospitals in Pennsylvania (3rd) and the Philadelphia metro area (2nd). Jefferson Health – Center City hospitals are Magnet®-designated for nursing excellence; less than 7% of hospitals nationwide are Magnet® designated. Additionally, Thomas Jefferson University Hospital has received a 4/5 star rating from Medicare, based on how the hospital performs across different areas of quality, such as treating heart attacks and pneumonia, readmission rates and safety of care.

Several clinical programs have also been recognized for outstanding performance and outcomes. The Sidney Kimmel Cancer Center, nationally ranked by *U.S. News & World Report*, is one of only 70 designated National Cancer Institute (NCI) Centers, and one of only eight NCI-designated Prostate Centers of Excellence in the country. The Center has also received accreditation from the American College of Surgeons National Accreditation Program for Breast Centers (NAPBC) and has top outcomes in bone marrow and stem cell transplantation.



*FY21 Statistics

Thomas Jefferson University Hospitals' Transplant Institute is among the top-rated transplant programs in the region. For FY20, the Institute achieved a 5/5 rating from the Scientific Registry of Transplant Recipients for one-year liver patient survival transplantation outcomes, and is among the top 8% in the country. The kidney and pancreas transplant programs received a 4/5 rating — also placing them among the top-rated programs in the region for transplant outcomes.

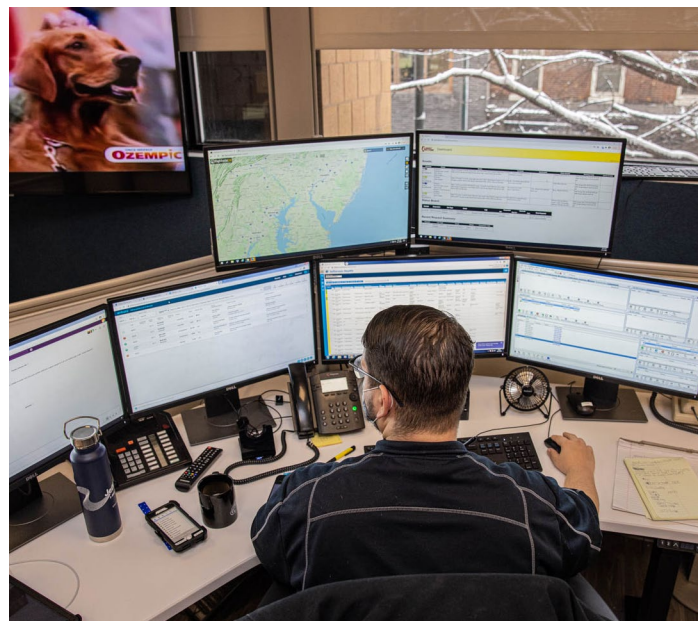
The United Network for Organ Sharing (UNOS) has designated Jefferson as a kidney transplant center for both living and deceased donor kidneys. The Transplant Institute is also part of the American Society of Transplantation's *The Living Donor Circle of Excellence Program* that recognizes organizations with policies to support the wages of a living donor employee who donates a kidney, or a part of their liver.

Rothman Orthopaedics at Jefferson Health includes the Philadelphia Hand to Shoulder Center at Jefferson, 3B Orthopaedics and the Abington Orthopedic & Spine Institute – Jefferson Health. Jefferson's Orthopaedic program located at TJUH is currently ranked #10 by *U.S. News & World Report* and has been seated in the top 20 orthopedic programs for 17 years running. Jefferson's orthopedic program was also the first to earn the advanced Joint Commission certification for Total Hip & Total Knee Replacement. The program is also recognized as a Blue Distinction Center for Spine Surgery. Together, TJUH and Magee Rehab make up one of only 14 federally designated Model Spinal Cord Injury (SCI) Centers in the nation.

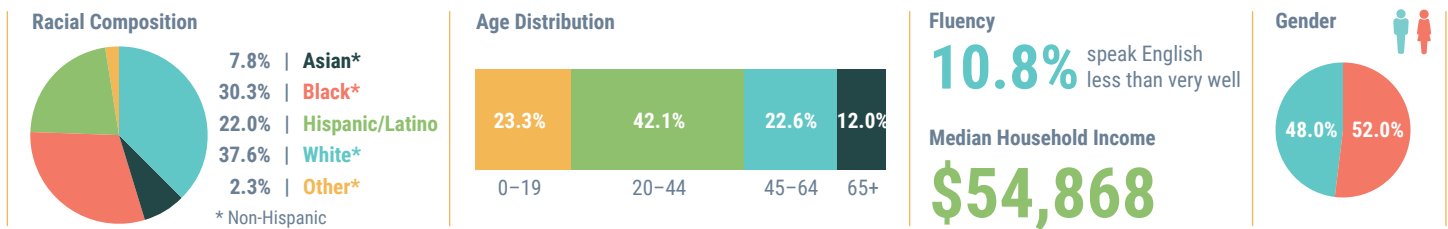
The Vickie & Jack Farber Institute for Neuroscience is nationally renowned for expertise in treating brain tumors, spinal cord injuries, aneurysms and arteriovenous malformations. The Institute received the *Get With The Guidelines®–Stroke Gold-Plus Quality Achievement Award* for consistent compliance with quality measures outlined by the American Heart Association/American Stroke Association for the diagnosis and treatment of stroke. Jefferson also received the Association's *Target: Stroke Honor Roll* which recognizes hospitals that achieve improved stroke outcomes through reduced time to treatment with IV thrombolytic (clot buster).

The Institute is also home to the first and only center in Philadelphia dedicated solely to ALS research — the Frances & Joseph Weinberg Research Unit within the Jefferson Weinberg ALS Center. Jefferson is an ALS Association Certified Treatment Center of Excellence. The Institute also includes a comprehensive Parkinson's Disease & Movement Disorder Center — also recognized as a Center of Excellence by the Parkinson's Foundation.

Among this year's *U.S. News & World Report's* top-ranked programs in pulmonology, the Jane & Leonard Korman Respiratory Institute, in partnership with National Jewish Health, the top respiratory program in the world, provides comprehensive respiratory care and treatment. The Jane & Leonard Korman Respiratory Institute is also one of a select group of specialized centers in the country for the treatment of cystic fibrosis, and one of only two centers in the Philadelphia region.



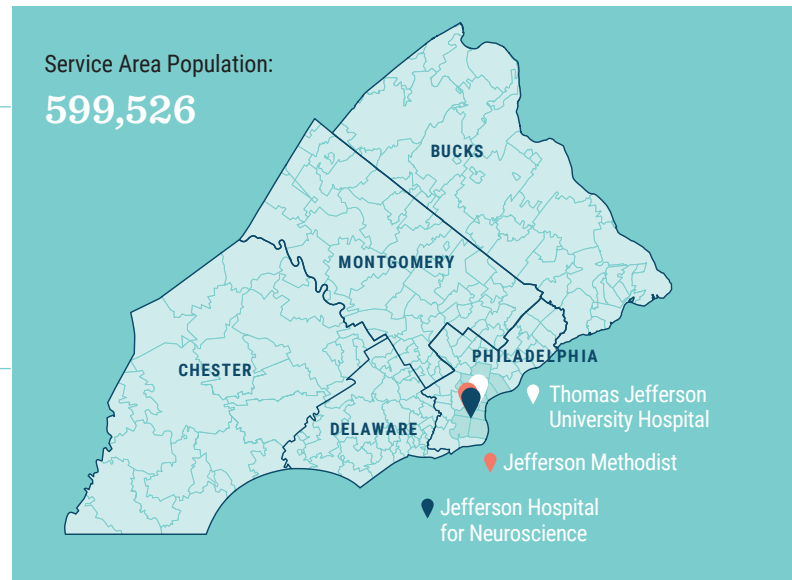
SERVICE AREA DEMOGRAPHICS



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Philadelphia County: 19102, 19103, 19106, 19107, 19121, 19122, 19123, 19124, 19125, 19130, 19132, 19133, 19134, 19140, 19145, 19146, 19147, 19148



Impact of Prior Community Health Needs Assessment and Implementation

At Jefferson, community benefit is delivered in three distinct ways: charity care and financial aid for individuals and families who cannot afford the cost of hospital services; contribution towards healthcare providers; and a variety of programs and services offered to the community including support groups, health screenings, wellness education and programs that address social determinants of health.

From the 2019 regional Community Health Needs Assessment, Jefferson identified the following priority areas in the three-year implementation plan:

- » Substance use and abuse
- » Behavioral health
- » Access to affordable, culturally appropriate primary and specialty care
- » Chronic disease prevention and management
- » Social determinants of health

Highlights of the implementation plan include:

Jefferson Opiate Task Force

Jefferson Opiate Task Force focuses on reducing access to opiate pain killers and raising public awareness about addiction enterprise-wide. The Task Force successfully implemented electronic methods to dramatically impact prescribing behavior and provide real-time feedback on guideline adherence. A multi-disciplinary care program with staff, pharmacists and a behavioral health team was implemented. One hundred percent of primary care clinicians were certified on medication-assisted treatment. Patient education materials have been developed and delivered for patient and families regarding pain medication and other methods of pain management. Jefferson's onsite pharmacy continued to provide a drug take back program that is open to all community members.

Mindfulness Program

The Myrna Brind Center for Mindfulness is Philadelphia region's leading provider of mindfulness-based stress reduction programs. To meet the demand of behavioral services arising from the COVID-19 pandemic, the Center has offered free online mindfulness sessions to support the public. During the first three months of the pandemic, nearly 2,300 participated in this online program. The program continues to offer on-going guided mindfulness meditation practices for the community.

Community Health Education

In partnership with community organizations, Jefferson brings healthcare services such as blood pressure screenings, health information and resources, flu vaccinations and other services to community sites. Due to COVID, the number of community events has decreased dramatically, but Jefferson has increased its online educational workshops and offers assistance to overcome technology barriers for patients and community members. To review the list of programs and classes, please visit JeffersonHealth.org/Events

Diabetes Prevention and Management

Multiple programs are open to the community free of charge. JeffPEERS (People, Empowered, Educated, and Ready to Support) is a chronic disease self-management program designed to help adults better manage chronic medical conditions. Diabetes Prevention Program (DPP) supports participants in losing weight and preventing diabetes. Over five cohorts have benefited from this program in the three- year period. The *Learning to Manage and Live with Diabetes* program provides individuals and families living with diabetes and prediabetes with education tools and resources to better self-manage diabetes, reduce complications and improve quality of life.

Cancer Screening and Support

Through the HealthyWomen grant, free mammograms are offered to uninsured and underinsured women. Our Cancer Welcome Center serves patients, families and community members. Comprehensive services including support groups, educational workshops, fitness and wellness sessions, legal assistance and more are offered without charge.

Serving people who experience homelessness

The JeffHOPE (Health Opportunities, Prevention & Education) program supports four homeless shelters and one needle exchange harm reduction program in Philadelphia every week. The team provides acute and basic medical care and helps individuals and families experiencing homelessness access other health and social resources and healthcare providers who are better equipped to care for them long-term. Jefferson also donated lab and pharmaceutical services. In FY20, JeffHOPE served 1,679 people who were experiencing homelessness.

Health Literacy Training

Jefferson participates in a grant-funded partnership with Health Care Improvement Foundation (HCIF) to facilitate a regional coalition of hospitals and community members to improve written and oral communication with patients. This partnership helped to facilitate the initiation of the PA State Health Literacy Coalition. Through this collaboration with HCIF, the health literacy needs of refugee/immigrant communities were assessed in partnership with community-based organizations serving these communities.

Workforce Development and Health

Jefferson's Community Health Worker (CHW) Program aims to transform the way community members engage with healthcare providers and the way healthcare providers engage with the community. Jefferson-trained CHWs meet the unique medical and social needs of the patients and the communities they serve. CHWs are in the Jefferson Emergency Department to provide social determinants of health screenings and connect patients with needed resources, while helping them navigate health care and social service systems.

Community Building

Jefferson has also engaged in a variety of community building activities to improve the community's health and safety by addressing poverty, food insecurity, homelessness, workforce development, built environment and substance abuse. Community building activities are also focused on providing opportunities for youth to explore careers in health care through health awareness education, mentoring and internships.



Jefferson Health – Northeast

Jefferson Health – Northeast, comprised of Jefferson Bucks Hospital, Jefferson Frankford Hospital, and Jefferson Torresdale Hospital, is a division of Jefferson Health and serves patients in Northeast Philadelphia and lower Bucks County.

Jefferson Health – Northeast recently launched several high-quality healthcare specialty services never before available in the immediate Northeast Philadelphia and Bucks County communities.

In October 2020, the newest Sidney Kimmel Cancer Center – Jefferson Health location opened its doors at Jefferson Torresdale Hospital. The facility has already proven to be incredibly important to patients in Northeast Philadelphia and Bucks County, providing them with nationally recognized oncological care - designated by the National Cancer Institute (NCI) - as well as access to a broad range of clinical trials.

In fall 2020, Jefferson Torresdale – in collaboration with the Vickie & Jack Farber Institute for Neuroscience – also launched a Thrombectomy Program. The facility can now evaluate patients and perform endovascular thrombectomy (retrieval of a blood clot from a blood vessel in the brain), followed by individualized, post-procedural care. This life-saving, university-level treatment has had a significant and restorative impact on victims of ischemic stroke in the Northeast Philadelphia and lower Bucks County community.

Also serving Northeast Philadelphia, Jefferson Frankford Hospital has expanded its imaging services to include state-of-the-art 3D mammography. This sophisticated system provides low-dose mammography that takes many images from different angles, showing breast tissue in layers. As a result, women in Northeast Philadelphia have convenient access to more precise, efficient and advanced breast imaging and diagnostics.

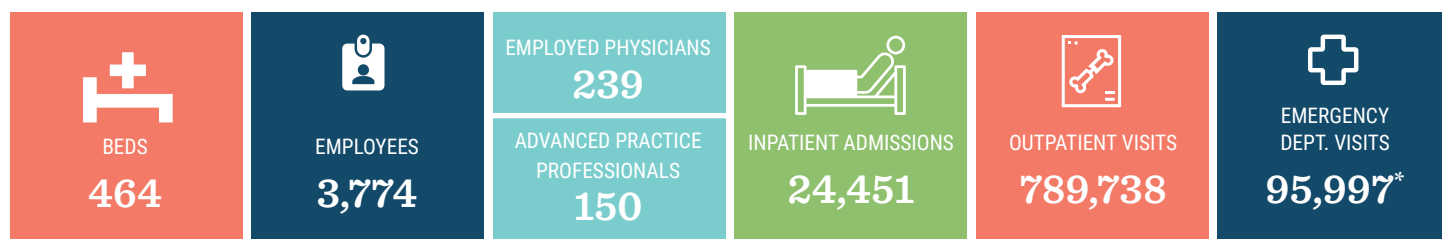
In addition, Jefferson Bucks Hospital continues to offer the Bucks County

community world-class, orthopedic care delivered by 3B Orthopaedics. In partnership with the Vickie & Jack Farber Institute for Neuroscience, Jefferson Bucks also expanded neurosurgery and neuro-spine services in 2019 with the addition of world class, fellowship-trained surgeons and highly experience support staff. Since its inception, the program has offered the latest surgical techniques to provide exceptional care, outstanding outcomes, and a better quality of life for our patients.

For 2021-2022, Jefferson Health – Northeast hospitals rank among the best in the nation according to the annual *U.S. News & World Report*. Overall, they ranked 12th in the Philadelphia Metro area, 20th in Pennsylvania and high performing in: Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, Diabetes, Heart Attack, Knee Replacement, Kidney Failure and Stroke.

In addition, the Stroke Program at Jefferson Health – Northeast was recognized with the 2021 *Get With The Guidelines® - Stroke GOLD PLUS with Honor Roll* and *Target: Type 2 Diabetes Honor Roll Achievement Award*. Jefferson Bucks Hospital and Jefferson Torresdale Hospital's Heart Center have also received the 2021 Mission: Lifeline® STEMI (ST Elevation Myocardial Infarction) Center Gold Plus Recognition Award for implementing specific quality improvement measures outlined by the American Heart Association for the treatment of patients who suffer severe heart attacks.

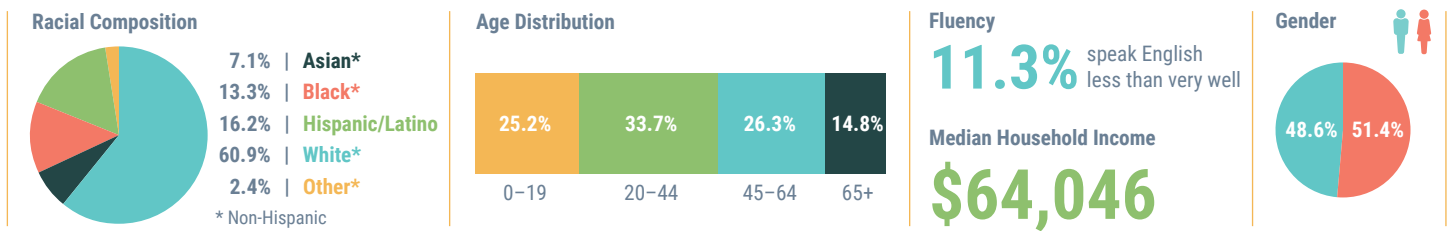
These awards demonstrate the organization's dedication to using the most up-to-date evidence-based treatment guidelines to improve STEMI and stroke patient care and outcomes in the community we serve.



*FY21 Statistics



SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

Jefferson Health – Northeast recognizes that by providing quality health care to patients, and education and outreach to the community, it is also enriching the lives and future of our surrounding community. Through many partnerships, Jefferson Health – Northeast seeks to improve the health and well-being of young and older Philadelphia residents through prevention and wellness programs, health education seminars, screenings, and assessments that identify barriers to health, and efforts to address the upstream factors that impact the health of everyone in the community.

Jefferson Health – Northeast completed and published its third Community Health Needs Assessment and three-year Implementation Plan in 2019, which addresses the following priority health needs for the population of Jefferson's Community Benefit area:

- » Chronic disease management (diabetes, heart disease and hypertension, stroke, asthma)
- » Healthy lifestyle behaviors and community environment
- » Access to care
- » Health screening
- » Mental health assessment
- » Early detection

TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

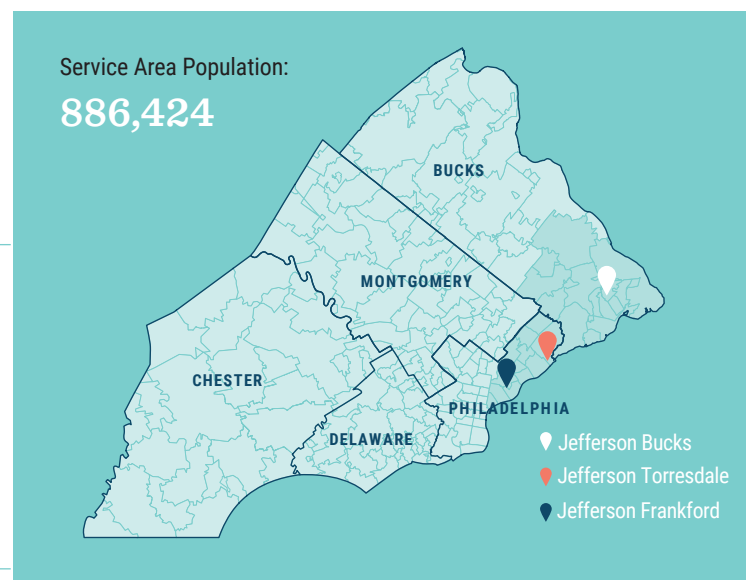
Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Bucks County: 18940, 18954, 18966, 19007, 19020, 19021, 19030, 19047, 19053, 19054, 19055, 19056, 19057, 19067

Philadelphia County: 19111, 19114, 19115, 19116, 19124, 19125, 19134, 19135, 19136, 19137, 19149, 19152, 19154

Jefferson Health - Northeast provided community benefit and charitable care in three distinct ways:

- » Dollar support for individuals and families who can't afford the cost of hospital services, including those who seek care from our Emergency Medicine Department
- » The hospital's contribution towards the education of doctors, nurses and other health professionals
- » A variety of programs and services offered to the community including support groups, health screenings and wellness education





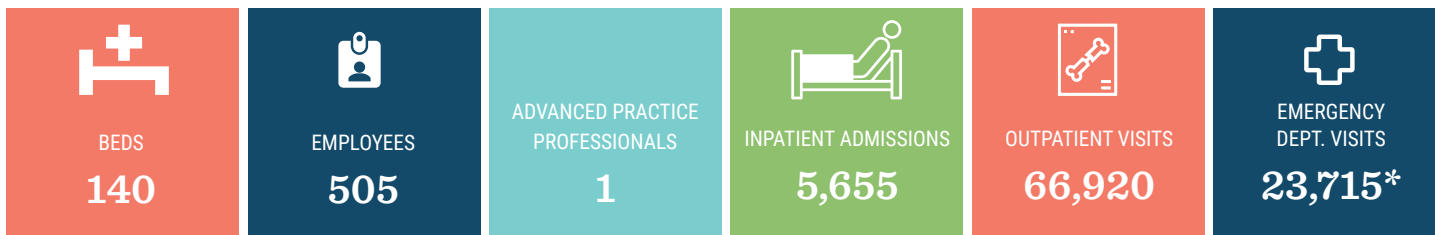
Jefferson Lansdale Hospital

Located in Lansdale, Montgomery County, Jefferson Lansdale Hospital provides primary, emergency and specialty care to patients and families in the North Penn community. Specialty care includes an 18-bed Orthopaedic and Spine Institute, a wound care center, gynecology, endocrinology, urology, pulmonology, gastroenterology, general surgery and more.

Jefferson Lansdale Hospital, part of Jefferson Health, is dedicated to improving lives and caring for the community. Jefferson Lansdale Hospital's commitment to the community was evidenced during the COVID-19 pandemic when it began offering COVID-19 vaccines as soon as they became available. A COVID-19 Vaccination Center opened at Jefferson Lansdale Hospital by mid-December 2020 in order to administer vaccines to both employees and community members.

Jefferson Lansdale Hospital is also home to three, impactful Community Health programs for children's health, dental care and elder care. All three programs provide easily accessible care to local underinsured or uninsured patients of all age groups:

- » The Children's Clinic provides a full range of affordable primary/preventive care services to children from birth to their 22nd birthday, and a social worker is available to assist families with insurance applications, charity care applications and more.
- » The Dental Access Program is designed to provide basic dental services to underinsured and uninsured residents of the greater North Penn community through a network of participating local dentists from the Montgomery-Bucks Dental Society.
- » The Adult Day Services Program provides an economic and family-friendly alternative for seniors in need of in-home care, care in a nursing home or an assisted living facility, such as those who are unable to be left at home during the workday due to behavioral health needs, chronic illness or disability.



*FY21 Statistics

In FY21, Jefferson Lansdale Hospital began its pursuit of Age-Friendly status. Age-Friendly Health Systems is an initiative of the John A. Hartford Foundation and the Institute for Healthcare Improvement, in partnership with the American Hospital Association and the Catholic Health Association of the United States. Age-Friendly Health Systems and facilities aim to follow an essential set of evidence-based practices and align them with what matters most to older adults patients and their caregivers.

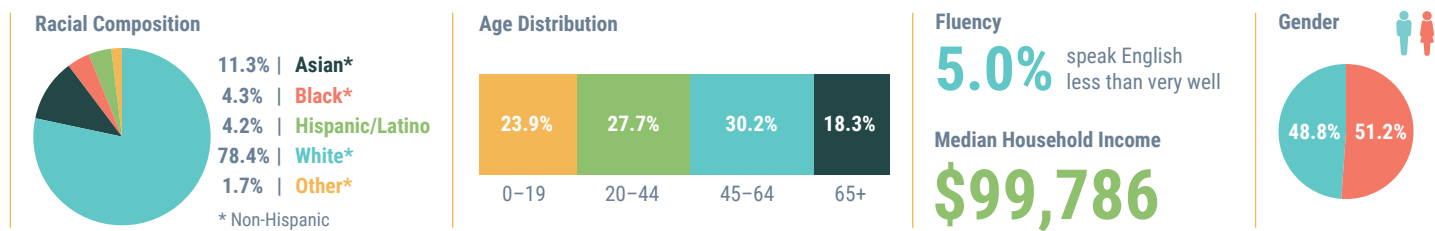
In FY20 and FY21, Jefferson Lansdale Hospital received numerous awards and accolades for high quality patient care, excellence and safety. In 2019, Jefferson Lansdale Hospital was the first in the nation to earn the Joint Commission's *Gold Seal of Approval*® and the American Heart Association's *Heart-Check mark for Acute Heart Attack Ready Certification* in recognition of its care of heart attack patients.

Also in 2019, Jefferson Lansdale Hospital's renowned stroke program earned The American Heart Association/American Stroke Association's *Get With The Guidelines Stroke Gold Plus & Target: Stroke Elite Honor Roll Award* for excellence in providing quality stroke care.

In 2020, Jefferson Lansdale Hospital earned Healthgrades' *Pulmonary Care Excellence Award* for superior clinical outcomes in treating COPD and pneumonia. Additionally, the Gift of Life donor program and Hospital and Healthsystem Association of Pennsylvania (HAP) honored Jefferson Lansdale Hospital with their *Platinum Award*.

Jefferson Lansdale Hospital maintains academic associations with Montgomery County Community College and Gwynedd Mercy University for Nursing and Allied Health Professions.

SERVICE AREA DEMOGRAPHICS

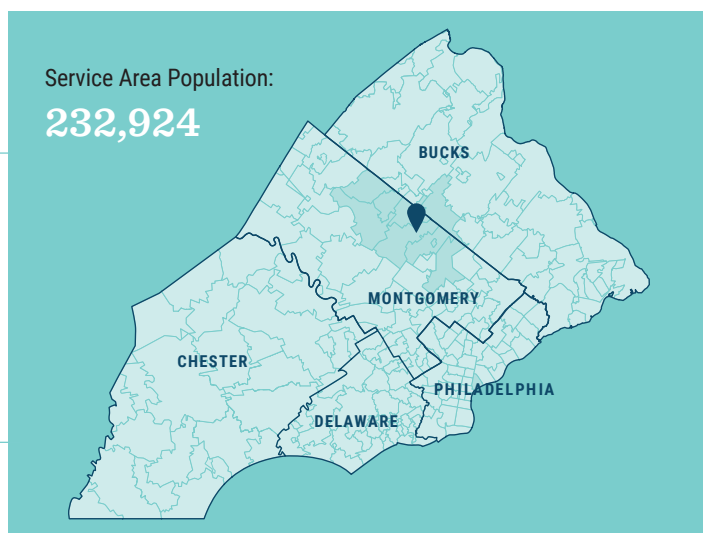


TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Bucks County: 18914, 18932

Montgomery County: 18915, 18936, 18964, 18969, 19002, 19422, 19438, 19440, 19446, 19454



Impact of Prior Community Health Needs Assessment and Implementation

Jefferson Lansdale Hospital develops targeted health outreach programs and screenings in response to the identified needs of our community in concert with the mission of Jefferson Health: We Improve Lives. We work to create the healthiest community by orchestrating targeted outreach for maximum community benefit, while reducing health disparities.

In fiscal year 2020, Jefferson Lansdale Hospital provided over \$8.7 million to individuals in our communities seeking resources for care and education, in alignment with our Community Health Implementation Plan developed in response to our 2019 Community Health Needs Assessment:

- » More than \$7.8 million was provided to the community in uninsured and underinsured health services, including through Jefferson Lansdale Hospital's Children's Clinic, Adult Day Services Program and Dental Care Access Program. In addition, the Children's Clinic screens all families for food insecurity and provides opportunities for these families to access fresh fruits and vegetables through a partnership program with the Montgomery County Office of Public Health.
- » Jefferson Lansdale Hospital provides many free or low-cost programs throughout the year designed to educate the community regarding health risk factors, chronic disease prevention or to support early detection through health screenings. In addition to cardiovascular-related health screenings, a free Cancer Screening Day is held annually.

- » Jefferson Lansdale Hospital collaborates with many community organizations to support community health improvement initiatives. A faith-based advisory council, led by Jefferson Abington Hospital, works together to support and provide/coordinate programming at specific sites at over 300 members of Faith Community Ministries to address chronic disease management.
- » Partnering with the Montgomery County Public Safety and the Abington Health Foundation Women's Board, Narcan® kits were made available to patients in Jefferson Lansdale Hospital's Emergency Department.
- » Throughout fiscal year 2020, Jefferson Lansdale Hospital provided over \$79,000 in free health education, screenings, in-kind donations and other community support.
- » Jefferson Lansdale Hospital provided over \$87,000 in medical education programs in fiscal year 2020, ensuring that students in medical professions have opportunities for internships and clinical rotations.

Detailed reports of community benefit activity at both Jefferson Abington Hospital and Jefferson Lansdale Hospital, as well as the Community Health Needs Assessments and Action Plans are available at <https://www.abingtonhealth.org/about-us/communitybenefit/>.



Magee Rehabilitation

Magee Rehabilitation, a member of Jefferson Health, is the Philadelphia region's first rehabilitation hospital, opening its doors in 1958. Magee is nationally ranked by *U.S. News & World Report* as among the best in the nation in physical and cognitive rehabilitation.

Comprehensive inpatient and outpatient services are structured to provide lifetime rehabilitation and wellness programs for individuals with:

- » Spinal Cord Injury
- » Multiple Sclerosis
- » Brain Injury
- » Work-Related Injury
- » Stroke
- » Guillain-Barré Syndrome
- » Multiple Trauma
- » Parkinson's Disease

Magee is home to the nation's first brain injury rehabilitation program to be accredited by the Commission on the Accreditation of Rehabilitation Facilities (CARF). Magee has been accredited by CARF for its rehab programs in:

- » Comprehensive Integrated Inpatient Rehabilitation
- » Spinal Cord Rehabilitation System of Care
- » Brain Injury Program
- » Stroke Program (Awarded CARF's Stroke Specialty Program Certification)



*FY21 Statistics

With thousands of former patients with spinal cord injuries in its follow-up system, Magee has the clinical experience and the unique peer resources that no other greater Philadelphia rehabilitation program can offer. Since 1978, Magee has partnered with Thomas Jefferson University Hospital to form The Regional Spinal Cord Injury Center of the Delaware Valley. The Center provides for the multidisciplinary coordination of emergency and acute medical/surgical care, rehabilitation beginning at the onset of acute care, vocational-evaluation and training, and lifetime follow-up care for persons with spinal cord injury. Magee is also a founding member of The Christopher Reeve Foundation NeuroRecovery Network.

In 2020, Magee was recognized by Press Ganey with the *Guardian of Excellence Award for Patient Experience*. Magee was also honored by the Studer Group as a *Healthcare Organization of Distinction* in nursing excellence.

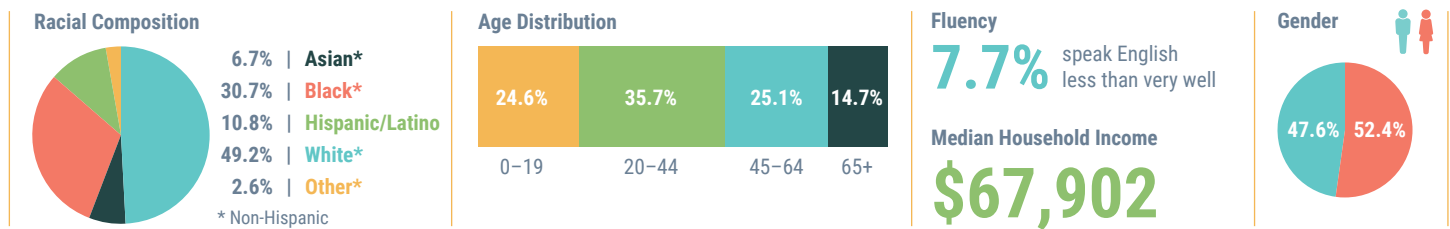
A multi-year construction project was completed in early 2020 to enhance patients' rehabilitation experience, making it as comfortable and home-like as possible. The project touched almost every area of the hospital, from the main entrance lobby to the rooftop Creative Therapy and Healing Gardens. Patient floors were completely renovated with 83 private suites with high-tech room automation capabilities and an array of hotel-like amenities. New therapy gyms include a brand new suite for practicing activities of daily living.

Inpatient services are delivered at Magee's main facility located at 1513 Race Street, in Center City Philadelphia. Outpatient programs are provided in a variety of community settings including the Magee Riverfront outpatient center at 1500 South Columbus Boulevard, Magee at Watermark at 18th and Callowhill Streets and Magee at Oxford Valley which is located at 400 North Buckstown Road in Langhorne. Work injury and pain management services are offered at Magee Riverfront.

Magee Rehabilitation Hospital primarily defines its community as Philadelphia County, surrounding Southeastern Pennsylvania counties, as well as Southern New Jersey and Delaware. The special population served includes adults with disabilities, many of whom have incurred life-changing injuries and illness including, but not limited to, spinal cord injury, stroke, acquired brain injury, amputation, major orthopedic issues and others.



SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

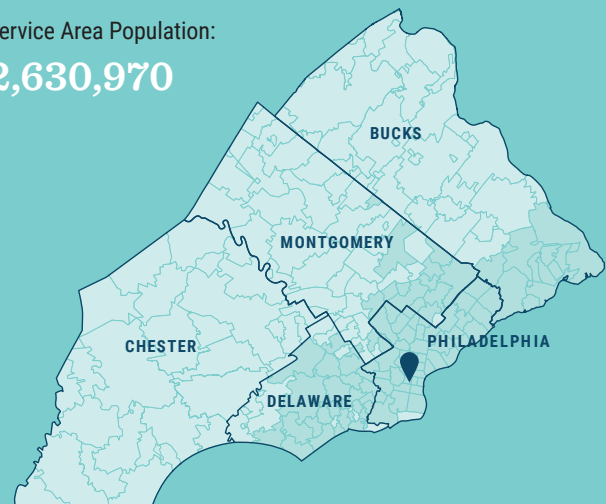
Magee Rehabilitation Hospital develops targeted health outreach and screening programs in response to the identified needs of our community in concert with the mission of Jefferson Health: We Improve Lives.

Magee Rehabilitation Hospital completed and published its Community Health Needs Assessment and three-year Implementation Plan in 2019, which addresses the following priority health needs for the population of the Hospital's Community Benefit area:

- » Magee Medical Home: Lifetime follow up services for patients with 'one stop' for specialized medical care commonly needed by individuals living with a disability (e.g., urology, pressure wound management, clinical nutrition).
- » Online educational resources provided for persons living with disability and their families.
- » Support groups and peer mentor programming to provide education and to decrease isolation.
- » Professional educational opportunities with continuing education credits for healthcare industry staff, specifically focused on serving individuals with disabilities.
- » Opportunities for exercise and improved healthy living through the Wellness Center at Magee's Riverfront Outpatient facility.
- » Access to health screening and preventive health services.
- » Wheelchair custom seating clinic.
- » Vision clinic.
- » Hosted free community events, such as the Wash N Tune, to benefit individuals with disabilities.

Service Area Population:

2,630,970



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Bucks County: 19007, 19020, 19021, 19030, 19047, 19053, 19054, 19055, 19056, 19057, 19067

Delaware County: 19008, 19010, 19013, 19014, 19015, 19018, 19022, 19023, 19026, 19029, 19032, 19036, 19050, 19060, 19061, 19063, 19064, 19070, 19073, 19076, 19078, 19079, 19081, 19082, 19083, 19086, 19087, 19094

Montgomery County: 19001, 19002, 19003, 19004, 19006, 19027, 19031, 19038, 19040, 19044, 19046, 19072, 19075, 19090, 19095

Philadelphia County: 19102, 19103, 19104, 19106, 19107, 19111, 19114, 19115, 19116, 19118, 19119, 19120, 19121, 19122, 19123, 19124, 19125, 19126, 19127, 19128, 19129, 19130, 19131, 19132, 19133, 19134, 19135, 19136, 19137, 19138, 19139, 19140, 19141, 19142, 19143, 19144, 19145, 19146, 19147, 19148, 19149, 19150, 19151, 19152, 19153, 19154



Rothman Orthopaedic Specialty Hospital



Rothman Orthopaedic Specialty Hospital (ROSH) strives to be an innovative specialty hospital dedicated to the needs of the communities it serves. As a musculoskeletal facility, Rothman Orthopaedic Specialty Hospital is dedicated to delivering efficient, high-quality, cost-effective health care. ROSH is part of Jefferson Health.

ROSH strives to provide quality and compassionate care for our patients, incomparable service to our physicians, an empowering workplace for our employees, many of whom live in our community, and a commitment to engagement with our community, setting the standard for superior, patient-focused health care. The hospital's healthcare team is committed to treating each other with honesty, respect and dignity.

Physician-owned hospitals are anomalous in the United States healthcare sector. In 2009, the Rothman Orthopaedic Institute partnered with ValueHealth of Leawood to create just such a hospital in Bensalem, Pennsylvania. The idea was to create a physician-led hospital focused on providing patients with superior surgical outcomes alongside operational efficiencies that increase the number of patients served. Today, ROSH performs over 5,000 elective surgeries each year, amplifying the Rothman Orthopaedic Institute's ability to meet the needs of the greater Philadelphia market.

ROSH is a 24-bed surgical hospital located in Bensalem, Pennsylvania. The 65,000 square-foot facility, with six operating rooms, has the latest medical instrumentation for elective orthopaedic surgery including joint replacements, spine surgery, sports medicine, foot and ankle surgery, shoulder and elbow surgery, hand and wrist and pain management procedures. Ancillary services include laboratory, imaging, MRI, pharmacy and physical therapy.

ROSH is accredited by The Joint Commission for demonstrating compliance with the Joint Commission's national standards for health care, quality and patient safety in hospitals. The Joint Commission's hospital regulations address important functions relating to the care of patients and the management of the hospital organization. The standards are developed in consultation with patients, healthcare experts, providers and measurement experts.



BEDS
24



EMPLOYEES
140



PHYSICIANS
35



INPATIENT ADMISSIONS
2,250



OUTPATIENT VISITS
2,300*

*FY21 Statistics

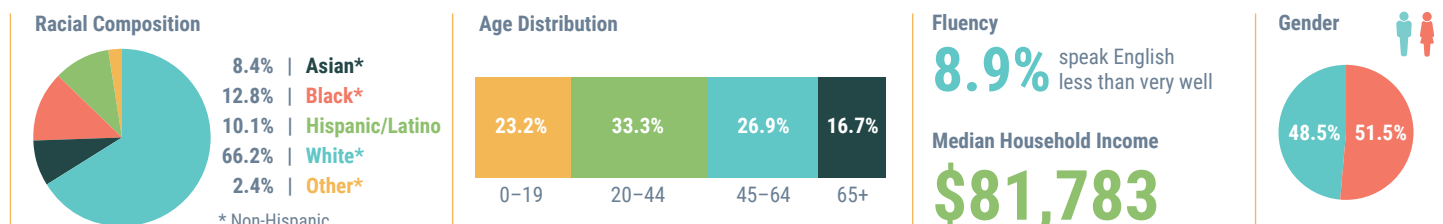
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL

ROSH has consistently been recognized by Healthgrades for excellence and outstanding achievements. These include:

- » Healthgrades America's 100 Best Hospitals for Joint Replacement 2021-2022
- » Healthgrades Joint Replacement Excellence 2013-2022
- » Healthgrades Outstanding Patient Experience Award 2017-2021
- » Healthgrades Patient Safety Excellence Award 2019-2021



SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

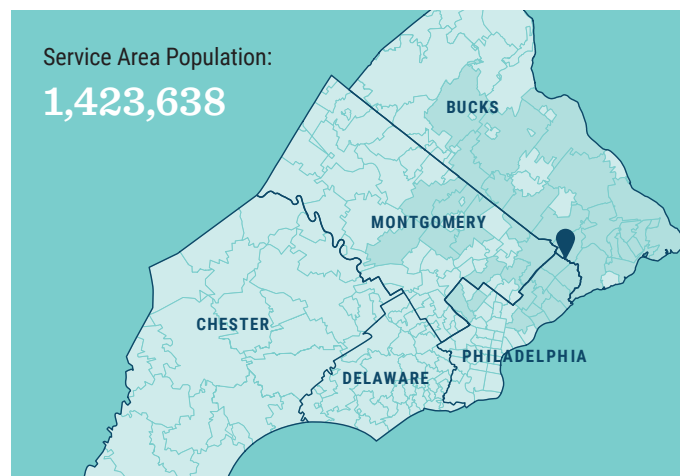
In the hospital's 2019 CHNA, the following priority health needs within the scope of ROSH services for the population of the ROSH Community Benefit areas:

- » Substance Abuse, especially Opioid addiction stemming from addiction to pain relievers

Towards the goal of making a positive contribution to reducing the opioid addiction crisis in our community, ROSH:

- » Partnered with the Bensalem Community Response Unit to fund responders to substance-related 911 calls. The program pairs a paramedic or EMT with a Certified Recovery Specialist to provide recovery support, education, resources and treatment options.
- » Worked collaboratively with pharmacists, surgeons and anesthesia providers to order multi-modality pain relief solutions in lieu of opioids.
- » Proactively worked with surgeons to set patient expectations to expect some pain and to seek relief through non-opioid medications.
- » Coordinated and marketed drug-take back days to employees and patients through displays and repeat e-mail campaigns.

ROSH community benefit also included financial assistance for elective surgery to individuals in need in our community.



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Health systems within Jefferson Health define their service areas as ZIP codes including 75% of admissions, and/or ZIP codes most proximate to all hospitals.

Bucks County: 18901, 18914, 18938, 18940, 18944, 18966, 18974, 18976, 19007, 19020, 19030, 19047, 19053, 19054, 19056, 19057, 19067

Montgomery County: 19002, 19006, 19038, 19040, 19046, 19403, 19422, 19446, 19454

Philadelphia County: 19111, 19114, 19115, 19116, 19119, 19124, 19128, 19135, 19136, 19145, 19146, 19147, 19148, 19149, 19152, 19154

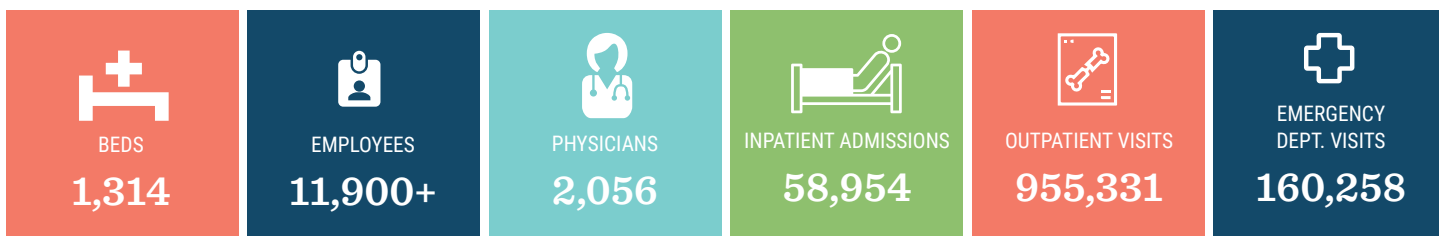


Main Line Health

Founded in 1985, Main Line Health is a not-for-profit health system serving portions of Philadelphia and its western suburbs. Main Line Health consists of 5 hospitals, 6 health centers, 40+ offices, 2,000+ physicians and over 11,500+ employees.

At its core are four of the region's most respected acute care hospitals – *Lankenau Medical Center*, *Bryn Mawr Hospital*, *Paoli Hospital* and *Riddle Hospital* – as well as one of the nation's premier facilities for rehabilitative medicine, *Bryn Mawr Rehabilitation Hospital*. Main Line Health also consists of: *Mirmont Treatment Center*, *HomeCare & Hospice*, *Main Line Health Centers* (Broomall, Collegeville, Concordville, King of Prussia, Exton and Newtown Square), *Lankenau Institute for Medical Research* and *Main Line HealthCare*. Across our Acute Care hospitals, our core service lines include: Cardiology, Orthopedics & Neurosciences, Cancer, Women's Health, and Behavioral Health. Additionally, Main Line Health fosters key partnerships with Jefferson Health for Cancer, Neurosciences, Trauma, and Transplant; Nemours Pediatrics (but will now be partnering with Children's Hospital of Philadelphia); and Independent Physician groups that serve on our Medical Staff.

Main Line Health has been consistently ranked and recognized among the top hospitals in the Philadelphia region by *U.S. News and World Report*, *The Leapfrog Group*, *Healthcare Equality Index (HEI)*, for equity and inclusion of LGBTQ patients, visitors and employees, the *American Heart Association Mission*, for cardiovascular care, and has system designations for *Magnet*, by *NICHE (Nurses Improving Care for Healthsystem Elders)*. Our physicians also continuously rank among the Top Doctors by *Philadelphia Magazine* and *Main Line Today*.



MISSION

To provide a comprehensive range of safe, high-quality health services, complemented by related educational and research activities, that meet the health care needs and improve the quality of life in the communities we serve.

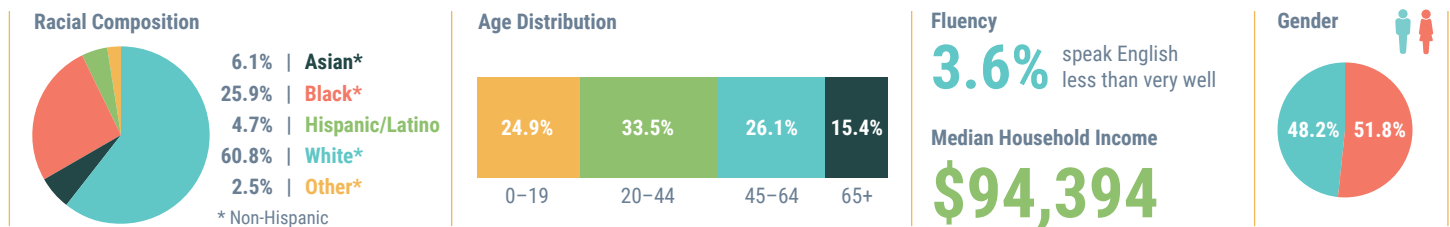
VISION

Be the health care provider of choice in our communities by eliminating harm, achieving top decile performance, delivering equity for all and ensuring affordability.

VALUES

- » Keep our patients, employees, and medical staff safe
- » Deliver high-quality, compassionate care
- » Foster an environment of diversity, respect, equity, and inclusion
- » Work together as a system to achieve common goals
- » Innovate, embrace change, and do the right thing

SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

The information provided by community members and leaders informed the 2019 Community Health Needs Assessment for the Main Line Health Acute Care Hospitals and helped us develop 56 initiatives across 8 overall priorities to focus on over the three-year cycle. A separate Community Health Needs Assessment was pursued for our Bryn Mawr Rehab Hospital facility for the 2019 CHNA Implementation Plan, however for the next Community Health Needs Assessment cycle, there will be one implementation plan for the system.

Main Line Health cares for the health and well-being of individual patients, families and communities. Highlighted are Main Line Health initiatives to address needs identified through our 2019-2022 Community Health Needs Assessment:

Behavioral Health

To improve access and care, Main Line Health is:

- Opening of a new 40-bed inpatient psychiatric unit within our Bryn Mawr Hospital campus in February 2022
- Increasing access to outpatient Behavioral Health services at Main Line Health's Women's Emotional Wellness Centers by adding more convenient locations and expanding the number of providers
- Growing the number of primary care practices with integrated Behavioral Health services.
- Expanding outpatient therapy services at Bryn Mawr Hospital, scheduled to open in 2022
- Focusing on screening for depression and other mental illness using measurement-based outcomes, connecting patients to appropriate care

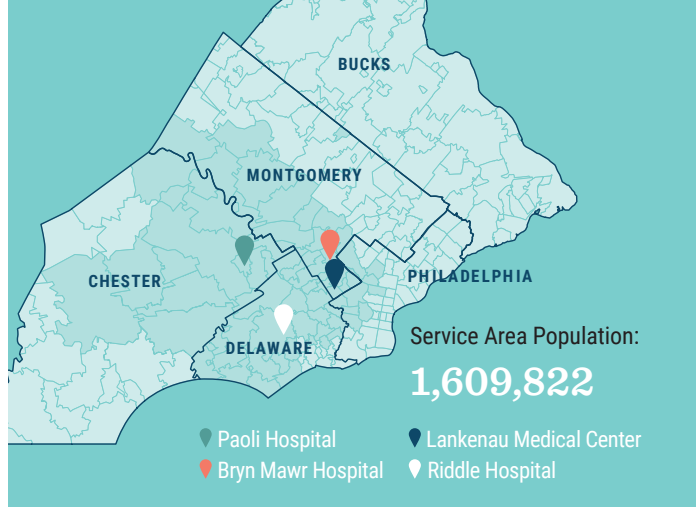
Chronic Disease Prevention and Management

Main Line Health's service lines are focused on initiatives identifying and addressing chronic conditions in our community:

- Main Line Health conducts ongoing screenings to identify and address chronic conditions affecting the Cardiovascular System and Cancer affecting the lung, colon, rectum and breast
- Early detection of diabetes and management of the condition as measured by HbA1C levels is a system priority

Health Care Access and Affordability

Main Line Health has sustained efforts to address food insecurity in our patients. Main Line Health has a farm, The Deaver Farm, on the Lankenau Medical Center Campus. Local farmers grow nutritious produce on campus and, through our Deaver Farm Health Nutrition Program, deliver farm produce directly to our patients' homes, helping our patients who face food insecurity. The Farm also partners with other community partners to host education events and create community awareness about food insecurity.



SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Main Line Health defines its service area for acute hospitals as 75 percent of each hospitals' discharge market area, resulting in an area that accounts for approximately 85 percent of total discharges. Four parent ZIP codes surrounding Physician's Care Surgical Hospital were also incorporated into the service area.

Chester County: 19301, 19312, 19320, 19333, 19335, 19341, 19355, 19372, 19380, 19382, 19383, 19425, 19460, 19465, 19475

Delaware County: 19008, 19010, 19013, 19014, 19015, 19018, 19023, 19026, 19036, 19050, 19060, 19061, 19063, 19064, 19073, 19082, 19083, 19085, 19086, 19087, 19317, 19319, 19342, 19373

Montgomery County: 19003, 19004, 19035, 19041, 19066, 19072, 19096, 19401, 19403, 19405, 19406, 19426, 19428, 19444, 19453, 19462, 19464, 19468, 19473

Philadelphia County: 19104, 19127, 19128, 19129, 19131, 19132, 19139, 19143, 19144, 19151

Home Care & Hospice

Main Line Health's Home Care & Hospice team has focused on providing convenient care at home through enhanced remote monitoring services for Congestive Heart Failure homebound patients by providing remote monitoring units and tracking usage, and reducing rehospitalization rates for this patient population.

Maternal Health

Main Line Health is focused on providing and improving maternal care in our community by:

- Improving access by adding more OB/GYN providers to our network of providers serving community offering maternal health and prenatal care.
- Offering more access to underserved patients at all MLH facilities and employed practices. We are also working with our independent physician partners to increase access to underserved communities.
- Increasing postpartum depression screening efforts in our outpatient settings

Neurosciences:

Main Line Health is offering comprehensive stroke care to our community by investing in developing thrombectomy capable stroke centers at Bryn Mawr Hospital and Paoli Hospital to increase stroke care services in the community.

Senior Services:

Main Line Health continues ongoing work to reduce falls for patients 65 and older through Fall prevention interventions across our acute care settings.

Diversity, Respect, Equity & Inclusion:

Main Line Health has embedded the DREI principles in our Values:

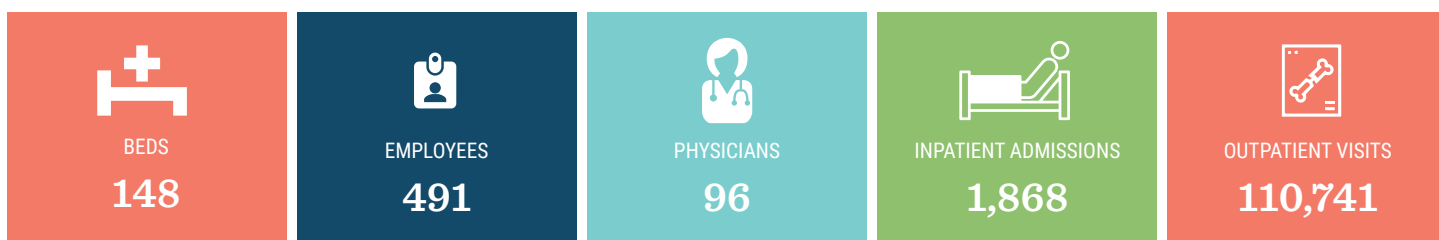
- Main Line Health has made 9 DREI commitments embedded in our system strategic plan and operationalized by our system steering committee.
 - Re-examining policies and procedures and making changes, with an equity lens, that promote equality, opportunity and inclusion for all.
 - Improving access to primary and specialty care for people in underserved communities.
 - Building trust through community partnerships with the goal of addressing chronic conditions that impact communities of color.
 - Advocating for investments that create innovative solutions to improve access, and provide safe, high-quality health outcomes for all communities in Southeastern Pennsylvania.
 - Hiring and promoting leaders of color and increasing diversity in governance
 - Renewing and expanding each organization's commitment to providing anti-racism, and implicit/unconscious bias training for all staff, volunteers and physicians.
 - Bridging relations between law enforcement and community by offering events aimed at encouraging conversations improving relations and creating trust.
 - Increasing the collection and use of race, ethnicity, language preference and other socio-demographic data.
 - Increasing business partnerships with diverse vendor partners across the organization. Cultivating new relationships, expand current partnerships and continue to monitor MLH progress on diverse spend.
- Main Line Health has established 5 LGBTQ Inclusive Care sites among our primary care practices, and continues to grow, while also focusing on LGBTQ patient-specific education among clinicians and staff across our health system.



Bryn Mawr Rehab Hospital

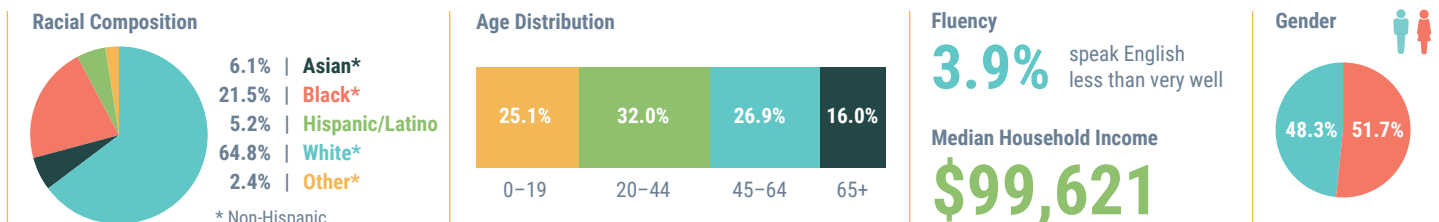
Bryn Mawr Rehab Hospital is Main Line Health's rehabilitation center, and a leader in the field of physical medicine and rehabilitation, offering both inpatient and outpatient rehab services.

Bryn Mawr Rehab recently ranked as the Best Physical Rehabilitation Center in Pennsylvania by *Newsweek* (#1 in 2020 and #2 in 2021). With more than 50 years of clinical excellence, Bryn Mawr Rehab Hospital provides outstanding therapy and medical care for conditions and injuries as diverse as spinal cord injury, traumatic brain injury, chronic pain and pre-joint replacement. Bryn Mawr Rehab offers a full range of outpatient services, including cancer rehab, post-COVID recovery, comprehensive concussion rehabilitation, driver rehabilitation, assistive technology and vestibular (balance) rehabilitation.



*FY21 Statistics

SERVICE AREA DEMOGRAPHICS

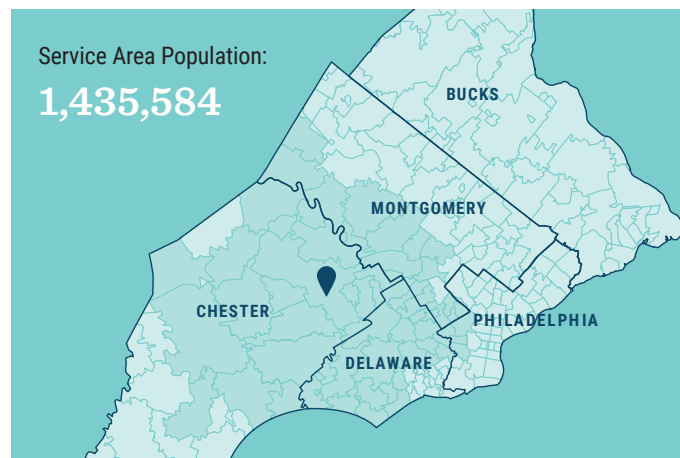


Impact of Prior Community Health Needs Assessment and Implementation

The information provided by community members and leaders informed the 2019 Community Health Needs Assessment for Main Line Health's Bryn Mawr Rehabilitation Hospital and helped us develop 14 initiatives across 3 overall priorities to focus on over the three-year cycle.

Main Line Health has been able to have direct impact on the long-term health and well-being of individual patients, families, and communities through our CHNA initiatives, and here are some key highlights from this cycle:

- » **Community Health & Living:**
Hosting ongoing support group activities for rehab patients and families to offer emotional support and regular social contact to help reclaim an active and satisfying life.
- » **Diversity, Respect, Equity & Inclusion:**
Embedding and highlighting Diversity, Respect, Equity & Inclusion activities and education into regular employee communication and leadership assemblies
- » **Injury Prevention:**
Continuing to enhance Driver Rehab Program, and support patients who are recovering from major injuries or living with a range of disabilities to be able to travel independently again



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Bryn Mawr Rehabilitation Hospital's service area is defined as ZIP codes representing 75 percent of discharge market area for the hospital.

Chester County: 19301, 19312, 19320, 19333, 19335, 19341, 19343, 19344, 19348, 19355, 19372, 19380, 19382, 19383, 19390, 19425, 19460, 19465, 19475

Delaware County: 19008, 19010, 19013, 19014, 19015, 19018, 19026, 19050, 19060, 19061, 19063, 19064, 19073, 19082, 19083, 19085, 19086, 19087, 19317, 19319, 19342, 19373

Montgomery County: 19003, 19004, 19041, 19066, 19072, 19096, 19401, 19403, 19405, 19406, 19426, 19428, 19453, 19462, 19464, 19468, 19525

Philadelphia County: 19131, 19139, 19143, 19151



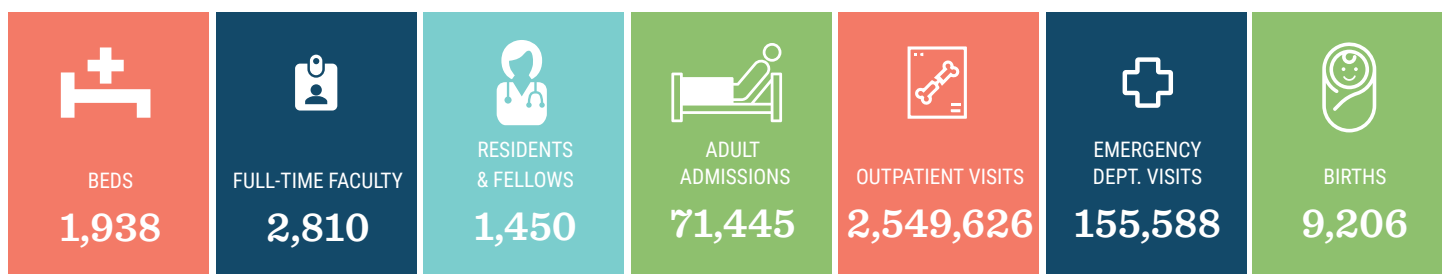
Penn Medicine

Penn Medicine is one of the world's leading academic medical centers, dedicated to the related missions of medical education, biomedical research, and excellence in patient care.

Penn Medicine consists of the Raymond and Ruth Perelman School of Medicine at the University of Pennsylvania, founded in 1765 as the nation's first medical school, and the University of Pennsylvania Health System (UPHS), which together form a \$8.9 billion enterprise.

The Perelman School of Medicine and UPHS are committed to improving lives and health through clinical care, research, medical education, and community service. In the 2020 fiscal year, Penn Medicine provided more than \$560 million in benefit to the community. The Perelman School of Medicine has been ranked among the top medical schools in the United States for more than 20 years, according to *U.S. News & World Report's* survey of research-oriented medical schools. The School conducts more than \$890 million in annual sponsored research and is consistently among the nation's top recipients of funding from the National Institutes of Health, with \$495 million awarded in the 2020 fiscal year.

The School of Medicine has more than 775 M.D. students, 1,450 residents and fellows, and 2,800 full-time faculty members. In the City of Philadelphia, UPHS' patient care facilities include: The Hospital of the University of Pennsylvania, Hospital of the University of Pennsylvania – Cedar Avenue, Penn Presbyterian Medical Center, and Pennsylvania Hospital. At the end of fiscal year 2021, UPHS had 1,938 licensed beds in Philadelphia; it is a valued health care resource in the community.



UPHS Philadelphia FY21 Profile

The Hospital of the University of Pennsylvania (HUP) was established in 1874 as a teaching hospital to complement the medical education received by students at the Perelman School of Medicine. Today, it has 20 clinical departments and provides training in more than 40 clinical specialties. Major areas of clinical focus across HUP include cardiac care, oncology, neurosciences, and women's health. HUP is one of the only hospitals in this region that performs transplants of all major organs. HUP's campus is a hub for innovative medical care, with a new hospital building, the Pavilion, that opened October 30, 2021. The Pavilion is one of the largest hospital projects in the U.S.—and the largest in the Philadelphia region. The building rises 17 stories on Penn Medicine's West Philadelphia campus as a place where Penn's world-renowned researchers, clinicians, and faculty will continue to pioneer advanced patient care. The \$1.6 billion facility houses 504 private patient rooms and 47 operating rooms.

In March 2021, Hospital of the University of Pennsylvania – Cedar Avenue opened as part of a partnership with Public Health Management Corporation (PHMC) offering continuity in access to care and services in West and Southwest Philadelphia in place of a longstanding community hospital that needed to close. This site offers 121 licensed beds and continues to evolve into a multi-faceted and innovative public health campus. Penn Medicine manages the emergency department, inpatient services, and hospital-based behavioral health programming as HUP-Cedar. PHMC has opened a federally qualified health center at the site, which is staffed by clinicians from the Penn Medicine Department of Family Medicine and Community Health, providing community members with access to high-quality, integrated, patient-centered health care. A key element of the campus is a robust community engagement plan that includes regular and ongoing community outreach with stakeholders, thus supporting the engagement of community-based, non-profit social services that address key issues, such as health and wellness education and food insecurity.

Penn Presbyterian Medical Center (PPMC) is consistently recognized as a center of excellence for cardiac care, ophthalmology, and neurosciences. PPMC's campus includes the Musculoskeletal Center's outpatient facility at Penn Medicine University City and the Pavilion for Advanced Care, home to Penn Medicine's Level 1 Trauma Center. The PA Accredited Trauma Center operates around the clock to care for patients who have been critically injured in car accidents, falls, gunshot wounds and through other blunt and penetrating traumas. The Trauma Center at Penn Presbyterian Medical Center serves as a regional resource for injured patients caring for more than 3,000 patients annually, several hundred of whom are transferred from other area hospitals and trauma centers.

Pennsylvania Hospital is the nation's first hospital. Founded in 1751 by Benjamin Franklin and Dr. Thomas Bond, Pennsylvania Hospital has been a leader in patient care, treatment techniques, and medical education for over 270 years. Today its clinical programs include the Spine Center, orthopedics, the Center for Transfusion-Free Medicine, maternity and newborn services, and behavioral health. Pennsylvania Hospital is also home to Penn Medicine Washington Square, the hospital's outpatient facility.



Within our Philadelphia facilities, in keeping with our charitable purpose, UPHS accepts patients in serious need of medical care regardless of their financial status. UPHS also provides care to patients who do not have health insurance or meet the criteria to qualify for its charity care policy. In fiscal year 2020, Penn Medicine, as an institution, provided \$300.7 million in charity and underfunded care for patients in need.

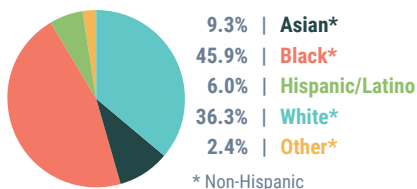


The COVID-19 pandemic has reshaped our world and community. In the face of a historic health crisis, Penn Medicine took care of its neighbors in West and Southwest Philadelphia, which like other communities of color across our nation had been unfairly burdened by the pandemic and faced inequity in the COVID-19 testing access and vaccine distribution. As the pandemic spread through the region, Penn Medicine immediately responded by opening community-based testing sites, providing critical access to testing for Philadelphia. In addition, Penn Medicine supported the Sayre Health Center's testing site, one of the longest standing testing sites in the city with non-appointment based access. The Penn Medicine Community Vaccination set up vaccine clinics partnering with trusted neighborhood venues, embracing walk-in appointments and low-tech registration, and operating clinics outside of traditional business hours to vaccinate the most vulnerable members of our community.

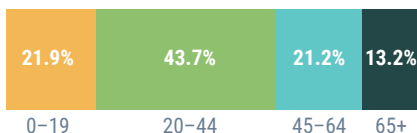
Penn Medicine's distribution of the vaccines mirrors Philadelphia's racial composition, and according to city figures, 42 percent of all shots administered to Black patients in Philadelphia came from Penn Medicine. Faculty and staff also launched new initiatives to support community members. Care teams provided nutritional assistance to seniors and other vulnerable populations who were unable to grocery shop during stay-at-home orders at the height of the pandemic, as well as helped local, essential business owners who needed to establish safety protocols and maintain costly supplies of personal protective equipment (PPE) to serve the community during the pandemic.

SERVICE AREA DEMOGRAPHICS

Racial Composition



Age Distribution



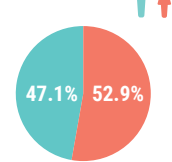
Fluency

6.5% speak English less than very well

Median Household Income

\$54,868

Gender



Impact of Prior Community Health Needs Assessment and Implementation

Propelled by our missions of patient care, education, and research, and in response to the needs of our community, Penn Medicine has driven a number of programs to care for our neighbors and improve the well-being of our region:

The Penn Center for Surgical Health (CSH) aims to create sustainable infrastructure for access to high-quality, cost-conscious surgical care before it becomes an emergency, despite socioeconomic, political, racial, cultural or gender-based disparities. CSH pairs patients with a Personal Patient Navigator (PPN)—typically a medical student who has undergone CHS's PPN Training Program—to help patients through obtaining insurance or other funding and understanding and navigating from preoperative through to postoperative care. In its first 8 months, beginning in Fall 2021, CSH has helped 86 patients get 95 surgical procedures.

Puentes de Salud is a 501c3 nonprofit organization providing health, education, and wellness services to uninsured/uninsurable Spanish speakers in Philadelphia. The mission of Puentes is to improve key health and social inequities in the community by direct service provision & partnership with the community. Grounded in addressing the social determinants of health, Puentes advances their mission holistically via three interlocking service areas: a healthcare clinic, education services, and wellness branch. Healthcare services at Puentes include primary, specialty/surgical, and dental care. Their wellness services span art and culture, behavioral health, case management, and food access programs, as well as a robust promotora (community health worker) program. Puentes served more than 6,300 clients and patients in 2021.

The United Community Clinic (UCC) in the First African Presbyterian church is a student-run preventive care clinic founded by medical students and professors that has been treating neighborhood residents for nearly 25 years. For years, partner HIV organizations, like Philadelphia FIGHT, camped out in the clinic to offer testing for patients, but in late 2019, with the help of a Penn Medicine CAREs grant, UCC volunteers certified the space to be a Centers for Disease Control and Prevention-approved testing site so it could be performed by Penn staff. Today, patients who walk through the door are offered free testing during their clinical visit in a private area away from the other services.

In 2020, there were more than 93,000 drug overdose deaths in the United States, and in Philadelphia, death rates increased as well. Penn Medicine's **Center for Opioid Recovery and Engagement (CORE)** provides free peer support for individuals struggling with opioid use and their loved ones. The program provides multiple pathways to recovery by removing barriers and facilitating access to recovery resources. CORE offers hands-on medical and behavioral help to ensure individuals receive continued treatment and are supported within their communities. CORE's opioid use disorder (OUD) care team is made up of Certified Recovery Specialists who use their personal OUD experiences to provide participants with long-term guidance for recovery. CORE also offers enhanced case management services, providing assistance with obtaining housing, education, social service needs, support groups and access to treatment.

The Penn Center for Community Health Workers IMPaCT Program is a standardized, scalable community health worker (CHW) program in which Penn Medicine hires, trains, and deploys trusted laypeople from local communities to help patients address the social determinants of health, including food, housing, transportation, and chronic disease prevention. The program has been delivered to nearly 10,000 high-risk patients and proven in three randomized controlled trials to improve chronic disease control, mental health, and quality of care while reducing total hospital days by 65%. More than 1,000 organizations have accessed Penn's CHW toolkit, and we provide technical assistance to help organizations around the country create, launch, and sustain effective CHW programs.



TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Penn Medicine defines its service area for Philadelphia-based hospitals as the following ZIP codes in the City of Philadelphia. This targeted service area comprises ZIP codes within a 1.5 miles radius of each of Hospital of the University of Pennsylvania, Penn Presbyterian, and Pennsylvania Hospital.

Philadelphia County: 19102, 19103, 19104, 19106, 19107, 19123, 19130, 19131, 19139, 19142, 19143, 19145, 19146, 19147, 19148, 19151

Inequities in access to cancer screenings for early detection, to cutting-edge treatments, and to participation in clinical trials for the next generation of treatments, contribute to persistent inequities in outcomes for underserved and minority patients. Black patients are 20 percent more likely to get colorectal cancer and 40 percent more likely to die of the disease, and uninsured or underinsured women are 60 percent more likely to die from breast cancer due to barriers to early detection. Penn Medicine's multifaceted efforts to address colorectal cancer screening disparities through the actions of **Abramson Cancer Center** have included community outreach and partnership with the Enon Tabernacle Church for drive-through/walk-through giveaways of at-home screening kits paired with navigation support for patients who need follow-up screening and care, partnership with Black-owned radio station WURD, and mailed at-home kits with research-backed text-messaging protocols to ensure screening in neighborhoods with low rates. The result is a higher rate of screening for Black patients ages 50-75 during the last fiscal year despite the pandemic, compared to the last available pre-pandemic national rate. The Penn Medicine Breast Health Initiative offers free breast cancer screenings and breast health education, among other support services that have reached more than 3,000 uninsured and underinsured women in the region since 2014. Abramson has also engaged in numerous community outreach efforts to boost enrollment of Black patients in research, resulting in nearly doubling of participation rates in the last five years.

Despite well-intentioned providers and advancements in medicine, health and healthcare disparities persist today. While disparities are often viewed through the lens of race and ethnicity, they can occur across many dimensions including socioeconomic status, age, geography (neighborhood), gender identity, sexual orientation, disability status, religious affiliation, primary language, and/or mental health status.

To ensure that Penn Medicine will continue to grow and invest in this priority area, the **Center for Health Equity Advancement** (CHEA) was founded. CHEA is the cornerstone for advancing high quality patient/family-centered care for all, regardless of their personal characteristics, supports community partnerships to tackle barriers to achieving optimal health for all communities we serve, and aims to provide equitable healthcare within inclusive environments that support a diverse workforce and student body. In order to build support for and align mutually reinforcing equity initiatives across the enterprise, Penn Medicine incorporates its Center for Health Equity Advancement Blueprint for Equity and Inclusion within the areas of delivering health care, engaging with our community, creating a diverse workforce, creating the evidence-base to achieve equitable and inclusive care, and empowering stakeholders to advance equity.

The **Penn Medicine CAREs Grant program** was established to offer institutional support to individuals and programs in the form of grants – awarded quarterly – that can be used for the purchase of supplies and other resources needed to perform this important work in the community. Since its inception in 2011, the CAREs program has funded over 800 service initiatives across the region Penn Medicine serves, including programs in community centers, farmers markets, and places of worship from Philadelphia, Lancaster, and Chester counties to the suburbs and shore communities of New Jersey. For a list of our most recently-funded programs, please visit <https://www.pennmedicine.org/cares>

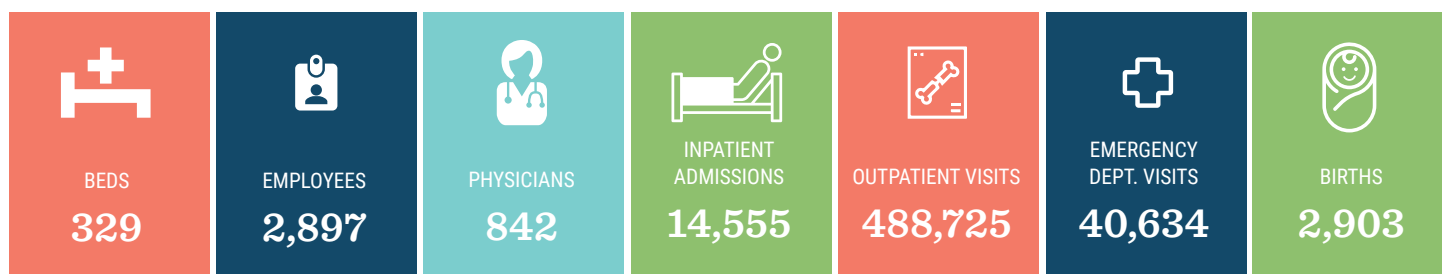
To read more ways Penn Medicine serves its community, please visit <https://communityimpact.pennmedicine.org/>



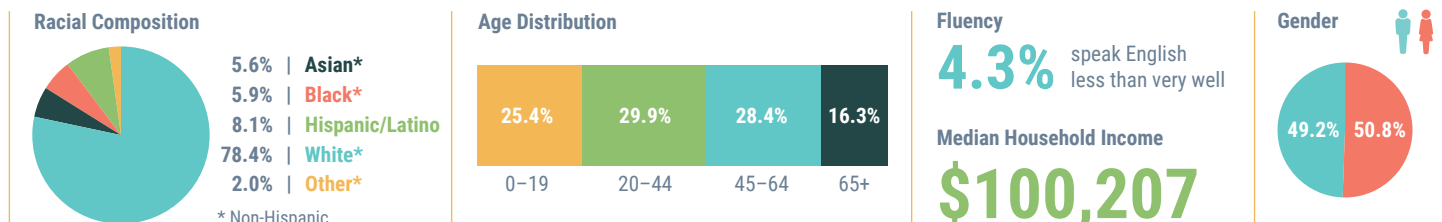
Chester County Hospital

Chester County Hospital is a Penn Medicine hospital dedicated to the health and well-being of the people in Chester County, Pennsylvania, and the surrounding areas.

Chester County Hospital is a 329-bed inpatient facility in West Chester. Its outpatient services extend to satellite locations in Exton, West Goshen, New Garden, Jennersville and Kennett Square. Chartered in 1892 as a 10-bed dispensary, the hospital has been serving Chester County and its surrounding communities for more than 125 years. Chester County Hospital joined the University of Pennsylvania Health System in 2013 as part of its ongoing effort to provide the most progressive services available. In 2020, the hospital completed the largest expansion in its history. The project welcomed a state-of-the-art procedural platform with 15 operating room suites, a 99-bed patient tower, a new main entrance and an expanded and renovated Emergency Department.



SERVICE AREA DEMOGRAPHICS



Chester County Hospital offers an array of inpatient and outpatient medical and surgical services, including interventional and structural heart and vascular services; open heart surgery; advanced spine surgery; general, bariatric, orthopaedic and oncological surgery; medical and radiation oncology; wound care and hyperbaric medicine; and comprehensive maternal/infant health services. The hospital also provides home health and hospice care through Penn Medicine at Home; occupational and employee health care; professional and technical education; outpatient laboratory services; radiology and physical therapy services; prenatal and gynecological care for all; and cardiopulmonary rehabilitation.

True to its commitment to provide ways for people to maintain a healthy life, Chester County Hospital makes available a broad scope of high-quality health education programs for the community. Physician lectures give people the opportunity to meet the medical staff and learn about important health concerns. A wide variety of wellness programs and services are available that address specific life-cycle needs, mental health challenges, and chronic disease management.

Cardiovascular, cancer, blood pressure and other screenings are held throughout the year to help identify risk at an early stage. Support groups offer individuals the opportunity to share their experiences with others and learn from a skilled professional about how to manage and cope with health problems. During the COVID pandemic, the hospital quickly transitioned all in-person programming to virtual platforms.

Chester County Hospital also partners with many entities, including local government, foundations, and fellow non-profit organizations to extend the reach of its services in the community.

VISION STATEMENT

To be the leading provider of care in the region and a national model for quality, service excellence and fiscal stewardship.

OUR VALUES

Chester County Hospital focuses on five foundational values that preserve key aspects of its corporate culture while reinforcing and clarifying expectations for the future.

The values are: Innovation, Collaboration, Accountability, Respect, and Excellence and are known internally by their acronym, ICARE.

AWARD-WINNING CARE

Chester County Hospital is continually recognized and awarded for health care excellence. Here are just a few of the honors and acknowledgments we have received.

Centers for Medicare and Medicaid Services

Chester County Hospital has been awarded a five-star rating — the highest possible score — by the Centers for Medicare & Medicaid Services (CMS).

Cancer Commendation

In 2019, the cancer program at the Abramson Cancer Center at Chester County Hospital was granted a three-year accreditation with commendation by the Commission on Cancer (CoC) of the American College of Surgeons. The Breast Health Program was also reaccredited by the National Accreditation Program for Breast Cancers

Chester County Hospital Baby-Friendly

Chester County Hospital has received prestigious international recognition as a designated Baby-Friendly birth facility by Baby-Friendly USA.

Diabetes Education Program: Reaccreditation

The Diabetes Self-Management Program achieved accreditation by the Association for Diabetes Care and Education Specialists (ADCES). Accreditation represents a high level of quality and service to the community, and the ability to better meet the needs of those affected by diabetes.

Magnet Team: Reaccreditation

Chester County Hospital's nursing staff has been recognized by the American Nurses Credentialing Center's (ANCC) Magnet Recognition Program® for its excellence in patient care.

National Diabetes Prevention Program (NDPP)

The Center for Disease Control (CDC) has designated Chester County Hospital with Full Plus Recognition for its diabetes prevention program. This designation is reserved for programs that have effectively delivered a quality, evidence-based program that meets all of the standards for CDC recognition and additional retention thresholds.

Primary Stroke Center

Chester County Hospital has been certified as a Primary Stroke Center by The Joint Commission.

50 Top Cardiovascular Hospitals 2022

Chester County Hospital was named as one of the nation's top performing hospitals by *Fortune* and *IBM Watson Health*. The annual "Fortune/IBM 50 Top Cardiovascular Hospitals" study spotlights leading short-term, acute care, non-federal US hospitals that treat a broad spectrum of cardiology patients.

U.S. News & World Report: 2020/2021

Chester County Hospital is ranked #14 in Pennsylvania and #8 in the Philadelphia Metro Area. The hospital is recognized as High Performing in gastroenterology (GI) and GI surgery, neurology and neurosurgery, pulmonology and lung surgery, as well as heart failure, heart attack, stroke, back surgery, hip replacement, chronic obstructive pulmonary disease (COPD) and pneumonia.

TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

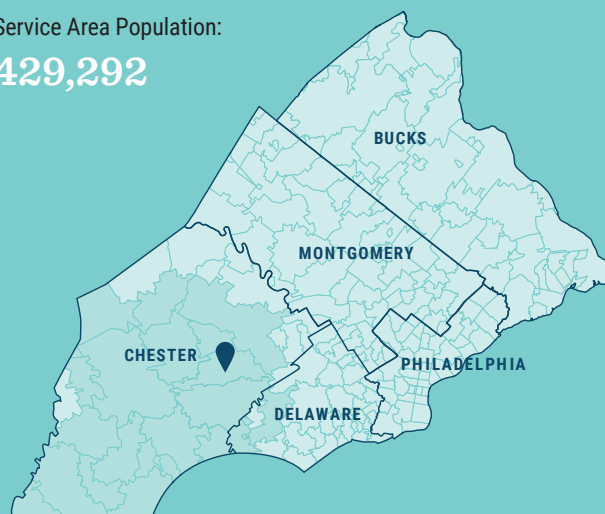
Chester County Hospital's market area is comprised of West Chester and surrounding ZIP codes where the Hospital has greater than 50% share of the market and/or the market contributes greater than 4% of inpatient volumes.

Chester County: 19311, 19316, 19320, 19330, 19335, 19341, 19343, 19344, 19348, 19350, 19352, 19355, 19358, 19362, 19363, 19365, 19367, 19372, 19374, 19375, 19380, 19382, 19390, 19425

Delaware County: 19317, 19319, 19342

Service Area Population:

429,292



Impact of Prior Community Health Needs Assessment and Implementation

The 2019 CHNA and resulting three-year implementation plan identified multiple priorities and actions to address the health needs affecting our community. Highlights of the impact of this plan include the following:

Access to Affordable Specialty Care/ Primary and Preventive Care

- » Collaboratively planned with community partners to provide free screenings, labs, and diagnostic radiology services for the underserved population.
- » Chester County Hospital's staff and physicians worked closely with local church and civic leaders to provide education about COVID-19 virus and vaccines in order to reduce vaccine hesitancy within our region. Over 20,000 community members were immunized - at the hospital, churches, and community centers.

Chronic Disease Prevention

- » Delivered a yearly average of 459 wellness and health education programs that targeted chronic disease prevention and mental health to 8,569 individuals.
- » Provided a yearly average of 1,249 nutrition counseling visits with a registered dietitian at no charge to cancer patients in treatment.

Healthcare and Health Resources Navigation

- » Expanded nurse navigator capacity by 39% to coordinate high quality, patient-centered care within major disease-specific teams.
- » Provided free transportation to an average of 1,680 cancer treatment patients per year.
- » Provided convenient access to Medical Assistance and Financial Representatives for enrollment in public benefits and programs.

Linguistically and Culturally Appropriate Healthcare

- » The Diversity, Equity and Inclusion Council conducted monthly diversity awareness for all employees.
- » Provided a bilingual diabetes educator and dietitian to counsel Spanish-speaking patients with culturally appropriate care for the management of gestational diabetes.

Maternal Morbidity and Mortality

- » Implemented the Heart Safe Motherhood Program to enable doctors to remotely monitor new mothers with high blood pressure from the comfort of their own homes. Patients in the hospital's OB clinic, many who are Spanish-speaking, were initially targeted since they have a higher incidence of developing hypertension.
- » Provided care for free or at a reduced cost for a yearly average of 406 prenatal patients at the hospital's OB Clinic.

Substance/Opioid Misuse and Use Disorder

- » Partnered with Chester County Drug and Alcohol Services to provide education on Opioid Use Disorder (OUD). These quarterly programs also provided participants with NARCAN (naloxone) for the treatment of known or suspected opioid overdose emergencies.
- » Provided multiple education programs on OUD to all clinical staff including providers, nurses, pharmacists, case managers and social workers.



Redeemer Health

With an emphasis on providing a continuum of care, Redeemer Health remains true to the mission to Care, Comfort, and Heal that its founders, the Sisters of the Redeemer, began in our region in 1924 — to provide high quality, compassionate care.

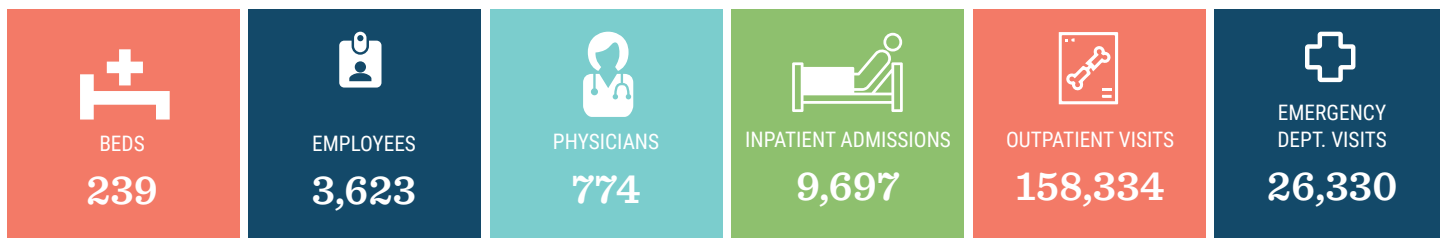
As a Catholic healthcare provider, Redeemer Health offers a wide range of healthcare and health-related services, including an acute care hospital, home health and hospice services, three skilled nursing facilities, personal care, a retirement community, low-income housing, an independent living community, a transitional housing program for homeless families, and multiple homes for independent, intellectually disabled adults. With corporate offices in Huntingdon Valley, Pennsylvania, Redeemer Health serves southeastern Pennsylvania and 11 counties in New Jersey, from Union County south to Cape May County.

Among its wide array of clinical services, Redeemer Health places a particular focus on cancer care, women's health, cardiovascular health and orthopedics.

In 2021 Cooper University Health Care and Redeemer Health announced a partnership, creating an integrated cancer program at Holy Redeemer Hospital that is overseen by MD Anderson Cancer Center at Cooper. The partnership expands advanced cancer care in Philadelphia, Montgomery, and Bucks counties by offering access to proven cancer treatment protocols, cancer experts, clinical research, and patient support and education resources through MD Anderson at Cooper.

The hospital has highly regarded programs in obstetrics and gynecology, overseeing 2,836 deliveries in FY21; high-risk maternal-fetal medicine; neonatal intensive care; breast and heart health; and gynecologic oncology.





MISSION

As a Catholic health system, rooted in the tradition of the Sisters of the Redeemer, we Care, Comfort, and Heal following the example of Jesus, proclaiming the hope God offers in the midst of human struggle.

Redeemer Health also maintains a cutting-edge cardiovascular center at Holy Redeemer Hospital. In August 2021, the health system launched a joint venture with Doylestown Health to expand access to high-quality cardiovascular care in the region from its location in Meadowbrook.

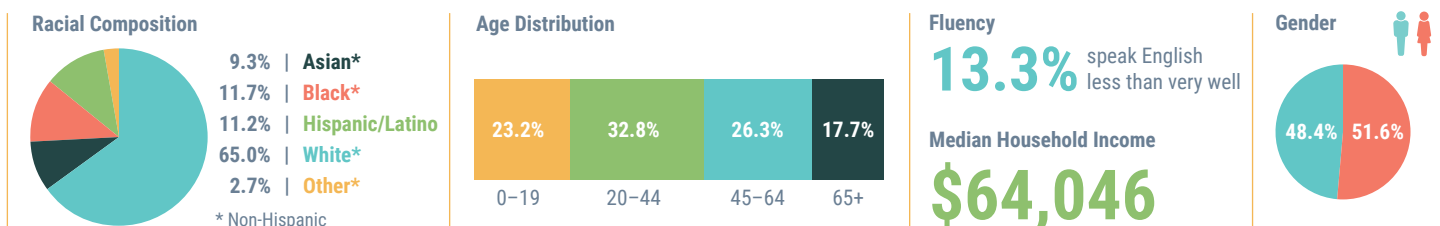
The hospital houses a 24-bed inpatient senior behavioral health unit, a 21-bed transitional care unit, and a wound care center to address the needs of the community it serves. Its orthopedics offerings encompass surgical and nonsurgical treatments and a Sports Medicine Center including therapeutic aquatic facilities.

In recognition of the care it provides, Holy Redeemer Hospital is accredited with commendation by the Commission on Cancer of the American College of Surgeons. The hospital's breast health program is accredited with the National Accreditation Program for Breast Centers. Holy Redeemer Hospital has also been honored with the Get with the Guidelines®-Stroke Gold Plus Quality Achievement Award, the Target: Stroke Honor Roll Elite award, the Target: Type 2 Diabetes Honor Roll award, and the Mission: Lifeline Gold Award STEMI, all from the American Heart Association. It achieved DNV GL certification as a primary stroke center and earned Accreditation for Cardiovascular Excellence. It is designated as an Aetna Institute of Quality in Orthopedics and a Blue Cross Blue Shield Blue Distinction Center for Spine Surgery. The hospital has repeatedly earned an A grade for safety by the Leapfrog Group, a national independent watchdog organization. Additionally, it has earned recognition from the Hospital and Healthsystem Association of Pennsylvania for excellence in patient safety.

Holy Redeemer Hospital holds academic affiliations in nursing with several local colleges and universities, including Drexel University, Gwynedd Mercy University, Holy Family University, Johns Hopkins University, Thomas Jefferson University, LaSalle University, and Villanova University.



SERVICE AREA DEMOGRAPHICS





TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Holy Redeemer Hospital defines its targeted service area as the following ZIP codes in Bucks, Montgomery, and Philadelphia counties. These areas represent 75 percent of Holy Redeemer Hospital's inpatient admissions plus nearby areas.

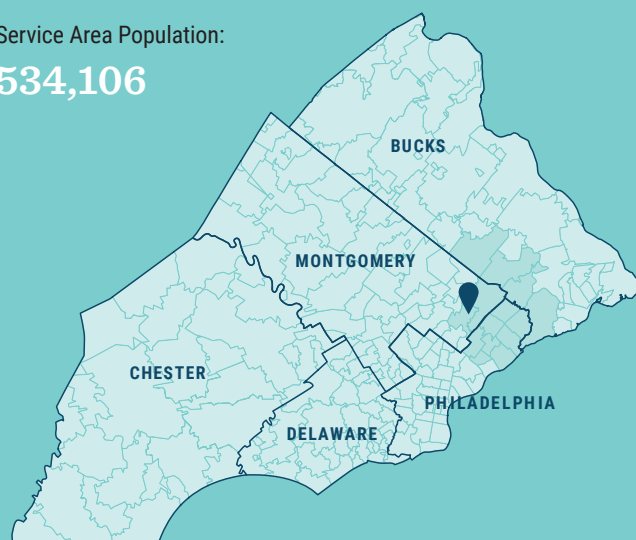
Bucks County: 18966, 18974, 19020, 19053

Montgomery County: 19006, 19009, 19046

Philadelphia County: 19111, 19114, 19115, 19116, 19136, 19149, 19152, 19154

Service Area Population:

534,106



Impact of Prior Community Health Needs Assessment and Implementation

Redeemer Health's 2019 priorities were based on three criteria: problem magnitude; strategic plan alignment; and resource availability. Ranked needs and actions performed since the development of the implementation plan include the following:

Chronic Disease Prevention

Included a focus on nutrition, exercise, screenings, and smoking cessation activities to have an impact on prevention, identification and management of health conditions. Activities included a five-week Healthy Kids run in person and virtually; healthy cafeteria committee with consumer education, food labels and recipes; diabetic and nutrition counseling; partnership with Simplex Health to provide intensive diet management services for community members and staff; free smoking cessation classes; added two certified smoking counselors; free breast cancer screenings to the un/underinsured; free Zoom webinars on cancer topics including breast, colon, lung, and cervical; participated in community events providing education and resources; community garden; and education through social media and email publications, among other activities.

Behavioral Health Diagnosis and Treatment

Continued colocation of behavioral health therapists in physician practice offices; increasing access during the pandemic by providing telehealth appointments which have continued at the convenience of patients; 24/7 telephone support line; Zoom support group meetings; through the COACH collaborative pursuing trauma informed care training in multiple areas throughout the system; and information on support resources through social media and email publications.

Substance/Opioid Use and Abuse

Developed a program for prenatal and postpartum women addicted to opioids, using a trauma informed approach which will include providing support for neonatal abstinence syndrome babies and connection to supportive services for the mothers and families. Hired an OB navigator and a behavioral health counselor. Established resources and a referral process from the physician practices as well as established a screening tool to identify women in need.

Maternal Morbidity and Mortality

Developed a program for prenatal and postpartum women addicted to opioids as a support for their NAS babies and families. Participated in the PA Perinatal Quality Collaborative with other organizations, using best practices, monthly and quarterly learning sessions, and support of a PA-PWC coach to improve the clinical conditions which increase morbidity and mortality. Opened a location in northeast Philadelphia with co-located obstetric, pediatric urgent care, lab and diagnostic services, providing improved access for women to obtain prenatal and postpartum services.

Access to Affordable Specialty Care

Opened a location in northeast Philadelphia with multiple services to increase access to care. In the cancer center, added a social worker who identifies social determinants, access to transportation services, added two nurse navigators to help patients access care, as well as a financial counselor to identify patients with financial needs, connecting them to pharmaceuticals, food, grants and copay assistance. Single electronic health record implemented to coordinate care and call center added for ease of scheduling. A full-time Russian and Ukrainian interpreter was hired, more documents were translated into other languages and more language lines were added.

Food Access and Affordability

Continued to operate our three food pantries throughout the pandemic, delivering food when able through the newly developed Food Access Support Technology platform, a project of Penn Medicine's Center for Health Equity Advancement. Provided fresh produce and when able a choice model. Continued working with the COACH collaborative on identifying and providing resources for food insecure patients. Added a comfort cupboard with food and other basic needs in the cancer center. All cancer patients are assessed by the financial counselor and given access to the comfort cupboard.

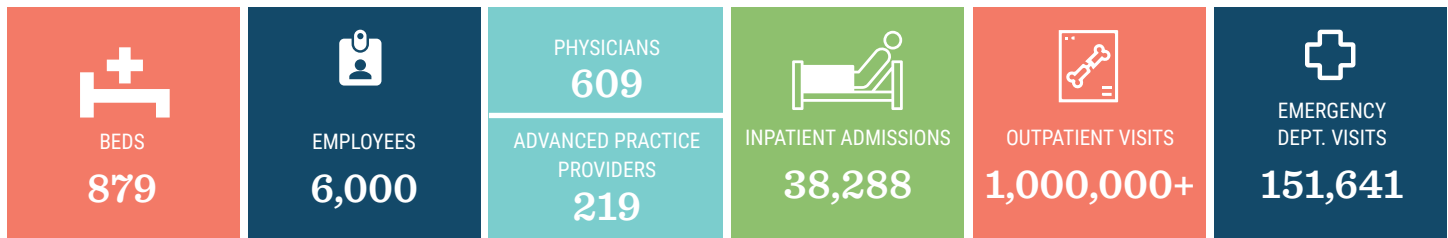


Temple University Hospital

Temple University Health System's mission is to provide access to the highest quality of health care in both community and academic settings. In furtherance of the mission of Temple University Health System, the mission of Temple University Hospital is to support Temple University and its Health Sciences Center's academic programs by providing the clinical environment and service to support the highest quality teaching, training and research programs for health care students and professionals. We embrace our values of Respect, Service and Quality.

As the chief clinical training site for the Lewis Katz School of Medicine at Temple University, Temple University Hospital (TUH) is a nonprofit academic medical center that trains the next generation of healthcare professionals. We are an indispensable provider of healthcare for America's largest city without a public hospital. Dedicated to improving the health and quality of life in our neighborhoods, we provide access to medical care across all specialties with the same high quality care regardless of economic status. TUH is a Level 1 Trauma Center, Burn Center verified by the American Burn Association and has a Neo-Natal Intensive Care Unit.

Temple University Hospital's commitment to healthcare equity transcends every aspect of our business model. This includes decisions around access points, care delivery, operations, employment and workforce training from entry level throughout the spectrum of health professions education. At Temple, this is resulting in quality outcomes and opportunity that exceed those in less challenged communities.



In addition to Temple University Hospital's main campus in North Philadelphia, our Episcopal Campus is home to Temple Hospital's behavioral health services, including a Crisis Response Center, emergency room and offers a wide range of adult psychiatric services. Episcopal's Behavioral Health program is recovery treatment oriented, offering a welcoming approach and hope for those afflicted with mental illness and co-occurring substance use disorders.

Temple University Hospital's Jeanes Campus, located in Northeast Philadelphia, is the nation's only Quaker-founded hospital. Operating for over 90 years, Jeanes combines the services of a community hospital with the advanced capabilities of an academic medical center. Our Northeastern Campus provides outpatient services in a convenient neighborhood setting.

As our chief clinical teaching site, Temple University Hospital has 46 accredited medical specialty residency programs training over 670 medical residents and fellows each year. Our medical residency programs focus on the "human side" of medicine, teaching residents to treat the whole patient by considering the cultural experiences and communities of those served. Residents enhance their clinical education by engaging in service projects benefiting our communities, preparing them to care for a wide range of populations and health conditions.

In addition to our medical residency programs, we provide clinical rotations to thousands of nursing, social work, physician assistant and behavioral therapy students annually from Temple University, the Community College of Philadelphia and many other academic institutions.

Our affiliated Temple Center for Population Health promotes our health equity and population health efforts. Its mission is to attain a sustainable model of health care delivery through clinical and business integration, community engagement, and academic distinction to promote healthy populations. The Center includes a comprehensive inpatient and outpatient community health worker program, chronic disease management programs for at risk populations and more.



NOTABLE AWARDS AND DISTINCTIONS

In recognition of our business model and inclusive culture, TUH is ranked the most racially inclusive hospital in Pennsylvania and the 12th most inclusive hospital in the United States in 2021 by the Lown Institute.

TUH also received a Leapfrog Safety Grade "A" and is in the top 20% in Safety and top 10% in Efficiency in the nation on Vizient's academic medical center scorecard.

Among our many other national and regional recognitions, Leapfrog designated TUH a Top Teaching Hospital with its 2021 Leapfrog Top Hospital Award for Outstanding Quality and Safety. TUH is the only academic medical center in Philadelphia to earn this award, widely acknowledged as one of the most competitive awards U.S. hospitals can receive, bestowed upon less than 7% of eligible hospitals.

Temple University Hospital offers an extensive range of nationally and regionally renowned medical and surgical services to meet the needs of patients in the Philadelphia region and beyond, a few of which we highlight below.

Temple Heart & Vascular Institute

Our Heart & Vascular Institute is a hub of innovative clinical care, research, and education. The Institute has 27 specialized programs and over 100 cardiovascular caregivers, many nationally renowned. Our staff draw upon their collective experience and our state-of-the-art facilities and technology to deliver high-quality, personalized care for the entire range of cardiovascular conditions from high blood pressure to advanced heart failure and transplantation. We offer patients the newest minimally invasive procedures, mechanical assist devices, artificial hearts, and advanced surgeries, including complex hybrid procedures and multi-organ transplantation.

Temple Lung Center

Temple is an international leader in developing new therapies for serious lung diseases. Our Lung Center has over 20 specialized lung disease programs that provide highly focused care from physicians who are trained in specific conditions. A distinguishing feature of the Center is its innovative research program that is unraveling the mechanisms of lung disease, discovering new treatments and testing lifesaving devices. Our robust slate of clinical trials – the largest in the nation for non-cancer related pulmonary disease – provides patients with access to novel therapies. TUH also has the nation's # 1 lung transplant program in volume with the best one-year survival rates in the Philadelphia region and state of Pennsylvania.

Transplant Program

Temple University Hospital has a nearly 40-year history of excellence in organ transplantation, having performed Philadelphia's first heart transplant in 1984. Today, in addition to hearts, we transplant lungs, livers, kidneys, and pancreases with excellent results. The Fox Chase-Temple University Hospital Bone Marrow Transplant Program has among the best outcomes in the nation. Our transplant teams have pioneered methods to improve organ donor health and avoid post-transplant complications.

Digestive Disease Center

Our Digestive Disease Center's large clinical practice and active research program enable us to apply the latest techniques to treat even the most challenging cases involving the esophagus, stomach, small intestine, gallbladder, colon, and liver. Our areas of specialization include colorectal surgery, esophageal disorders, bariatric surgery, gastrointestinal cancer, inflammatory bowel disease, motility disorders, and therapeutic endoscopy. In addition, our thoracic surgeons are part of the Digestive Disease Center team, performing upper gastro intestinal surgeries, often robotically. These include surgeries for esophageal cancers, Barrett's esophagus, gastroesophageal reflux disease and achalasia.

Neurosciences Center

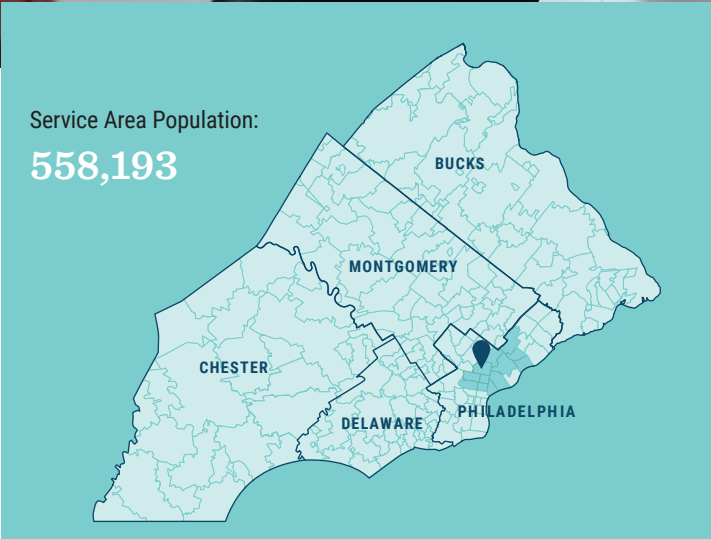
The Temple Neurosciences Center offers advanced care for conditions of the brain, spine, and nerves. Specialized neurological programs contained within our Center address medical conditions such as stroke, multiple sclerosis, epilepsy, movement disorders, neuromuscular disease, and amyotrophic lateral sclerosis (ALS). Our Center is home to the nationally respected Muscular Dystrophy Association/ALS Center of Hope and a stroke program that has been nationally recognized for its high success rate in treating complex stroke patients. The Center's strong basic science and clinical research program provide patients with options for complex neurological conditions that other hospitals may not offer.

Orthopedics & Sports Medicine

Temple's Orthopedics and Sports Medicine team includes many of Southeast Pennsylvania's most respected surgeons and rehabilitation specialists. Our team provides advanced, personalized treatments for a wide range of injuries and conditions. This includes injuries of the foot and ankle, hand, knee, shoulder, elbow, and spine. Our orthopedic specialists also have special expertise in orthopedic trauma, joint replacement, sports medicine, and physical therapy. Our experts combine their experience and research with the latest technology and minimally invasive treatment techniques to help patients achieve a pain-free life.

TUH PATIENT PROFILE

| HEALTH COVERAGE | AGE | CHRONIC CONDITIONS | LANGUAGES | BEHAVIORAL HEALTH | SUBSTANCE MISUSE |
|---|--|---|--|--|---|
| 86% have government health coverage: 45% Medicaid; 41% Medicare | 62% are 50 years of age or older | 70% suffer from one or more chronic health conditions | 12% do not speak English as primary language | 51% have behavioral health diagnosis | 25% have substance use disorder diagnosis |

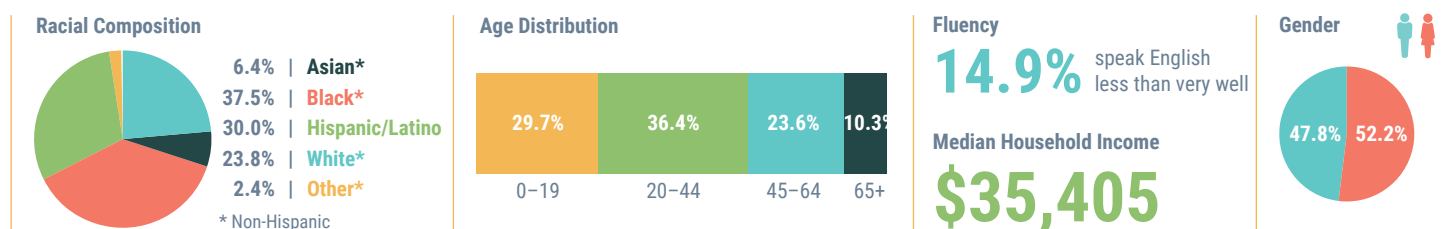


TARGETED SERVICE AREA FOR
COMMUNITY HEALTH IMPROVEMENT

Temple University Hospital's primary service area is comprised of 12 ZIP codes representing where approximately 70% of patients seen on an inpatient and observation basis reside.

Philadelphia County: 19111, 19120, 19121, 19122, 19124, 19125, 19132, 19133, 19134, 19135, 19140, 19149

SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

In TUH's 2019 CHNA, six areas of focus were prioritized based on our community's greatest needs:

1. Chronic Disease
2. Access to Healthcare
3. Mental Health Treatment Access and Education
4. Substance Use Disorder Treatment Integration
5. Violence Prevention and Intervention
6. Moms and Newborns

Through a collaborative process with community stakeholders, TUH developed an implementation plan with numerous strategies, goals and programs to address community needs including those described in our Community Benefit Report. See: <https://www.templehealth.org/locations/temple-university-hospital/about/community-health> Additional programs developed since the 2019 CHNA include the following innovative programs to improve outcomes and advance health equity:

» Multi-Visit Patient Clinic

Provides a full continuum of care for patients with high emergency department use and frequent inpatient admissions. Upon discharge, Community Health Workers link patients with follow-up healthcare and provide meals, transportation, home lists and other social supports. Patients enrolled in the clinic show a 40% reduction in emergency department use, 21% reduction in inpatient utilization and over 50% increase in outpatient services use, demonstrating they are seeking more appropriate care in effective settings.

» Trauma Victim Advocate Program

We provide social, emotional, and material support to violently-injured patients and patients from their time of entry into our hospital through discharge. Our 24/7 advocate team offers counseling and facilitate access to victim's services that aid with post-traumatic recovery and community re-integration. They provide referrals to crime agencies to assist with relocation, recovery of lost wages, unpaid medical bills and mental health services.

» Certified Peer Recovery Specialist Team

We hired a team of Recovery Specialists with lived experience and specialized training that link overdose patients and families with needed services after treatment in our Emergency Departments and Crisis Response Center.

» Vision Program

Our Volunteers in Spiritual Interactions from Our Neighborhood (VISION) program trains community members to serve as volunteer chaplains in our hospital. They support patients and families during crisis by providing spiritual and cultural services.

» Healing Through Work

Our partnership with the Pennsylvania Commission on Crime and Delinquency and Philadelphia Works connects victims of gun violence with gainful employment to disrupt the cycle of interpersonal violence, open pathways and bring stability to lives. A full-time workforce development specialist on our trauma team enrolls participants, help set career goals, creates access to career pathways, and provides ongoing training and mentorship.

More detail on TUH's past CHNA Implementation Plan, Community Benefit Programs and progress in addressing community needs can be found on our Community health page. See: <https://www.templehealth.org/locations/temple-university-hospital/about/community-health>



Fox Chase Cancer Center

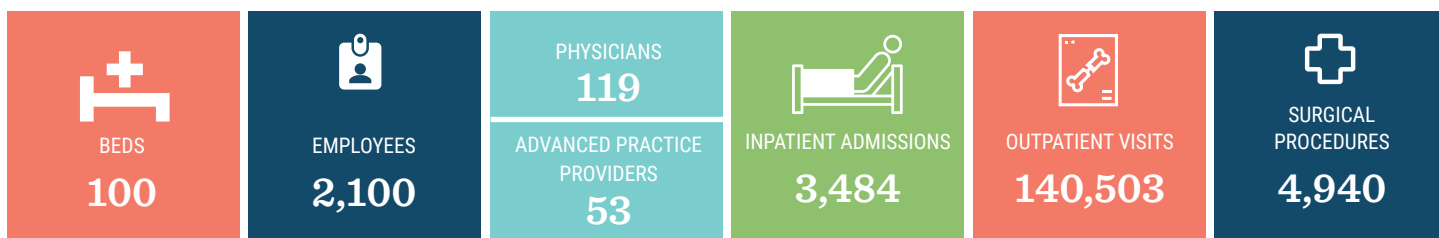
MISSION

To prevail over cancer,
marshaling heart and mind
in bold scientific discovery,
pioneering prevention,
and compassionate care.

Fox Chase Cancer Center is committed to clinical excellence, research expertise, and community health. Fox Chase was founded in 1904 as the American Oncologic Hospital by a group of prominent Philadelphia physicians and laymen concerned with rising cancer deaths in the city. In 1974, the hospital combined with the *Institute for Cancer Research*, founded in 1927, to create Fox Chase Cancer Center as one of the nation's first Comprehensive Cancer Centers designated by the National Cancer Institute. Fox Chase joined Temple University Health System in 2012, which furthered expanded its research and treatment expertise and accomplishments.

Throughout its history, Fox Chase has been committed to treating all individuals for cancer regardless of race, creed, or color. The center has created a legacy of nationally competitive basic, translational, and clinical research, as well as special programs in cancer prevention, detection, survivorship, and community outreach.

Located in the heart of Northeast Philadelphia, Fox Chase's main campus serves the surrounding community with state-of-the-art cancer technology, leading physicians, novel therapies, and cutting-edge clinical trials. Patients outside of the main campus's immediate area can also access this one-of-a-kind care through Fox Chase's campuses on Broad Street in North Philadelphia, East Norriton, and Buckingham.



Fox Chase medical teams know that a cancer journey does not end once a patient finishes treatment. That is why cancer care at Fox Chase extends across the cancer spectrum, from diagnosis through survivorship. With nurse navigators to help patients find their way through facilities, translators to assist patients with critical communication, and support groups for patients in all stages of the cancer journey, Fox Chase creates a welcoming environment for those it serves.

A leader in cancer prevention and risk assessment, Fox Chase established one of the first risk programs in the country in 1991 for individuals with a family history of breast and/or ovarian cancer. This program serves as a national model and led to risk-assessment services at Fox Chase for other cancer types. Today, Fox Chase's *Department of Clinical Genetics* builds on this pioneering spirit to offer the most comprehensive risk assessment program in the greater Philadelphia area. Its cancer risk-assessment team of physicians, nurses, and genetic counselors helps individuals and families determine their risk of getting cancer through clinical and genetic evaluation and screening. The team then designates steps to help an individual reduce their cancer risk.

In addition to providing outstanding oncology care, Fox Chase is an epicenter for cancer research. Over the last 90 years, Fox Chase's *Institute for Cancer Research* has made several seminal discoveries that shaped the future of cancer prevention and treatment, including identifying tumor suppression, reprogramming tumor cells, understanding genetic cancer risks, advances in radiotherapy, and many others. Two Fox Chase researchers have been Nobel Prize recipients and the center has received many other research accolades.

The translational research of Fox Chase's research institutes and programs impacts patients directly. *The Cancer Epigenetics Institute* at Fox Chase facilitates academic-to-industry and academic-to-academic partnerships with the goal of promoting discovery in cancer epigenetics. Its discovery efforts aim to reduce the morbidity and mortality associated with cancer by focusing on biomarker research and therapeutic interventions.



Fox Chase's *Marvin & Concetta Greenberg Pancreatic Cancer Institute* is another asset of a center committed to achieving breakthroughs in early detection and treatment. The Pancreatic Cancer Institute features collaboration between Fox Chase scientists, researchers, and physicians. The institute's vision includes finding new ways to detect cancer earlier, extend the lives of pancreatic cancer patients, and to eventually find a cure.

Fox Chase has also been designated a *National Pancreas Foundation Center* by the National Pancreas Foundation, a nonprofit organization that provides support for patients with pancreatic cancer and other pancreas-related diseases. Fox Chase is the only institution in the Philadelphia region to earn this designation.

In addition to these research strengths, Fox Chase has many programs in-house and offsite as part of its commitment to community health improvement. Fox Chase's Community Outreach programs are available to everyone, but the center makes a special effort to reach populations and neighborhoods that experience health disparities, which includes populations that experience a higher cancer burden, because Fox Chase believes that everyone deserves the same access to high-quality health care. The center's *Mobile Screening Unit*, in partnership with the Flyers Charities, provides cancer screening and prevention to community members in Philadelphia and beyond.



As part of its community health improvement efforts, Fox Chase Cancer Center has many programs to address cancer disparities and encourage diversity in research. These programs include the *Cancer Prevention Project of Philadelphia (CAP3)*, which educates community members on the importance of cancer prevention and screening. It helps the community better understand the value of cancer disparity research and participation in research studies.

In 2006, a Fox Chase researcher founded the *African Caribbean Cancer Consortium* to investigate and respond to increasing cancer vulnerability among African-descended populations worldwide. The group is in the process of establishing a *Caribbean Regional Center of Research Excellence* in partnership with the University of the West Indies-Mona in Jamaica. It is the planned first step toward developing a broader network of Caribbean centers of excellence that will grow to address diabetes, heart disease, and stroke.

Fox Chase recognizes that the beginning of its compassionate culture begins with cultivating interest among young adults in STEM programs. Under the *Immersion Science Program*, Fox Chase established classroom laboratories in 11 Philadelphia schools with support from the Howard Hughes Medical Institute.

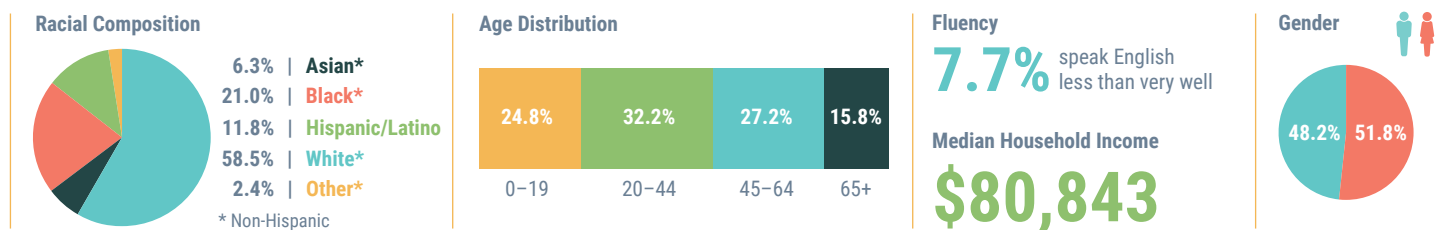
The program enhances the science and math foundation of participants, thus building confidence and preparing students for rigorous science, technology, engineering, and math majors. *Of the 1,000 students who benefit from the program annually, 80% are from the School District of Philadelphia; 75% receive paid positions in research labs as undergraduates and 22% become published authors prior to college graduation.*

NOTABLE RECOGNITIONS

The special brand of care offered at Fox Chase has earned it widespread recognition. Fox Chase doctors are consistently ranked among the best in their specialties in *Philadelphia Magazine's* Top Doctors list, and the center's nursing teams have received the Magnet designation for excellence in nursing services by the American Nurses Credentialing Center's Magnet Recognition Program. Fox Chase is the first in Pennsylvania and first acute specialty hospital in the United States to receive Magnet status.

Fox Chase programs are frequently recognized for excellence among their peers. For two years in a row, the *Fox Chase Bone Marrow Transplant Program's* performance for one-year survival has been above the expected survival rate when compared to similar programs in the United States. It is the only center with this distinction in the tristate area of Pennsylvania, New Jersey, and Delaware.

SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

As a result of Fox Chase's 2019 Community Health Needs Assessment, the center strategically focused on the following four (4) priority areas:

» Improve cancer screening, navigation, and education:

To address health insurance issues and lack of access to care, Fox Chase enhanced community access to preventive cancer screening and programs and provided navigation services to those patients that need follow-up services or have financial, language, or other barriers. In addition, Fox Chase delivers evidence-based cancer education and resources to address the regional cancer burden. The center's *Community Cancer Screening Program* provides community-based breast cancer and other types of screening through the Mobile Screening Unit (MSU). The MSU helps ensure equal access to care among the medically underserved populations that may have many barriers to obtaining proper health care, including a lack of health insurance.

» Reduce chronic disease through cancer prevention

Fox Chase delivers evidence-based cancer screening, smoking cessation services, and nutrition education. One example of this is the *Community Tobacco Treatment Program*. This five-week smoking cessation program is delivered by a health educator with a national certificate in tobacco treatment practice and a certified nurse practitioner. This program was brought into community partner sites in underserved areas where smoking rates are high to help address barriers to seeking cessation counseling. It has also been run virtually in order to further increase access.

» Provide caregiver support

Fox Chase addresses mental health concerns among caregivers through support groups and a patient-to-patient network. The *Caregiver Network* is a telephone-based support program that connects trained caregivers to new caregivers.

» Prevent prescription drug abuse

Fox Chase established an *Opioid Stewardship Committee* that developed a hospital-wide education campaign to educate patients and family members about the use of opioids in cancer care. In addition, providers prescribe less opioids in an effort to reduce the quantity of these medicines prescribed to opioid-naïve surgical patients.

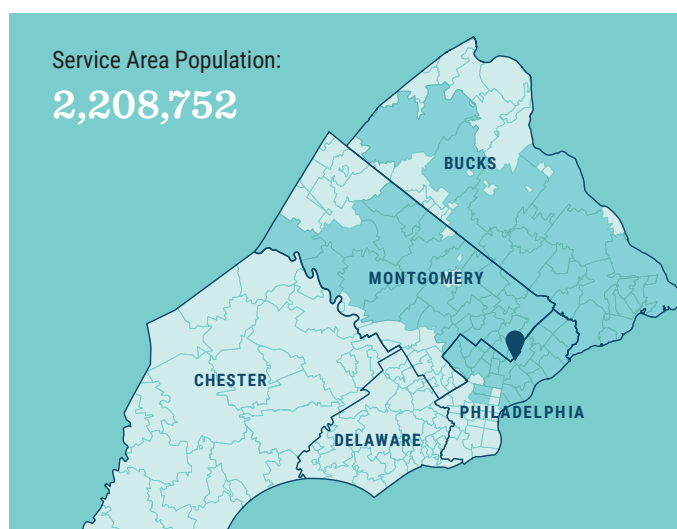
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

The Fox Chase Cancer Center's Service Area is comprised of 80 ZIP codes. These are the ZIP codes from which about 67% of our patients seen on an inpatient or outpatient basis reside. These ZIP codes span Philadelphia, Bucks and Montgomery counties.

Bucks County: 18901, 18902, 18914, 18925, 18929, 18938, 18940, 18944, 18951, 18954, 18966, 18974, 18976, 19007, 19020, 19021, 19030, 19047, 19053, 19054, 19055, 19056, 19057, 19067

Montgomery County: 18964, 18969, 19001, 19002, 19006, 19012, 19025, 19027, 19031, 19034, 19038, 19040, 19044, 19046, 19075, 19090, 19095, 19401, 19403, 19422, 19426, 19438, 19440, 19444, 19446, 19454, 19462, 19464, 19468, 19473

Philadelphia County: 19111, 19114, 19115, 19116, 19118, 19119, 19120, 19121, 19124, 19125, 19126, 19128, 19132, 19133, 19134, 19135, 19136, 19137, 19138, 19140, 19141, 19144, 19149, 19150, 19152, 19154



Full copies of the past Community Health Needs Assessment, related implementation plan, and progress reports are available at <https://www.foxchase.org/community/community-health>.



Mercy Catholic Medical Center, Mercy Fitzgerald Hospital Campus

Mercy Fitzgerald Hospital is guided by its Catholic-health core values of reverence, stewardship, integrity, safety, justice, and commitment to the underserved. It is a community teaching hospital that offers a full array of acute-care services and health programs to promote the physical and spiritual well-being of its patients.

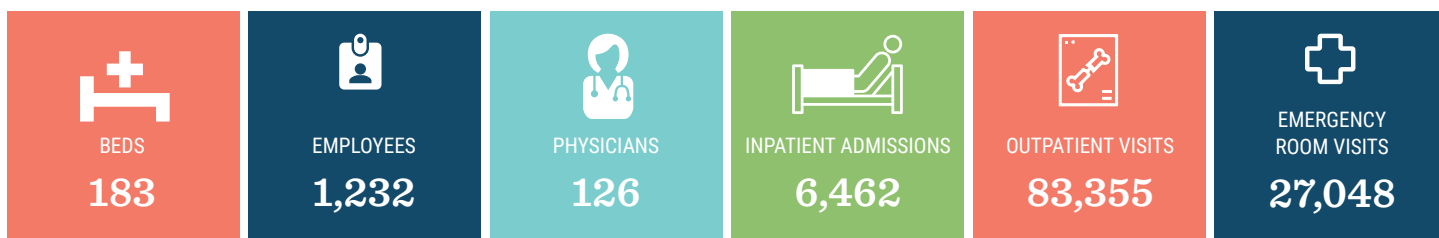
Trinity Health Mid-Atlantic is a Regional Health System that includes Mercy Fitzgerald Hospital in Darby, Pa.; Nazareth Hospital in Northeast Philadelphia; Saint Francis Hospital in Wilmington, Del.; St. Mary Medical Center in Langhorne, Pa. and home health and LIFE programs. Trinity Health Mid-Atlantic is a member of Trinity Health, one of the largest multi-institutional Catholic health care delivery systems in the nation.

MISSION:

All Trinity Health Mid-Atlantic hospitals and Trinity Health serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

CHNA RESPONSE:

Each of the hospitals will use the community health needs assessment findings to develop community benefit programs and services to address the top three prioritized health needs and social influencers of health needs. Those selected will be those that are within the hospital's area of expertise and aligns with its mission to serve the vulnerable and underserved in the area.



Established in 1933 by the Sisters of Mercy, the 183 bed hospital is located in Darby, Pa. and is a certified Primary Stroke Center. Mercy Fitzgerald Hospital offers comprehensive cardiovascular care, emergency care, the nationally accredited cancer care with Mercy Cancer Center which is affiliated with a nationally accredited cancer center, a NAPBC-accredited breast health program, orthopedic care, advanced diagnostic and interventional radiology, physical rehabilitation, wound care, community outreach programs and more.

- » **Named a high-performing hospital by U.S. News & World Report 2021–22** in four specialty areas: heart failure, kidney failure, diabetes and COPD
- » **Best Hospital in Delco** for 2018-2021 as voted by the readers of *Delaware County Daily Times*

For further information on how Mercy Fitzgerald Hospital will address unmet health and social influencers of health needs, we invite you to review our Community Health Improvement Plan at: [Mercy Catholic Medical Center CHNAs \(trinityhealthma.org\)](https://trinityhealthma.org/MercyCatholicMedicalCenterCHNAs)

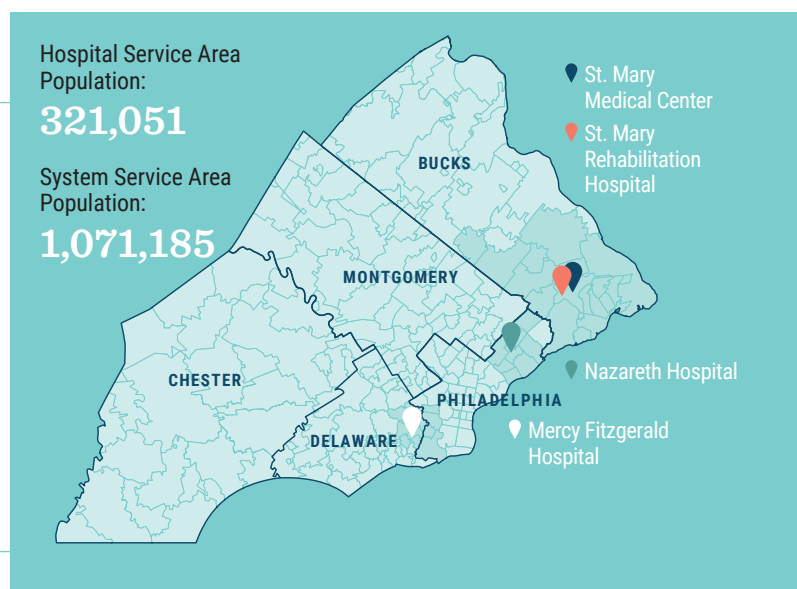
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

Trinity Health Mid-Atlantic defines its service area in the metro region as the ZIP codes from which the following percents of inpatient discharges are derived from each facility: St. Mary Medical Center and St. Mary Rehabilitation Hospital (88 percent), Nazareth Hospital (79 percent), and Mercy Fitzgerald Hospital (84 percent).

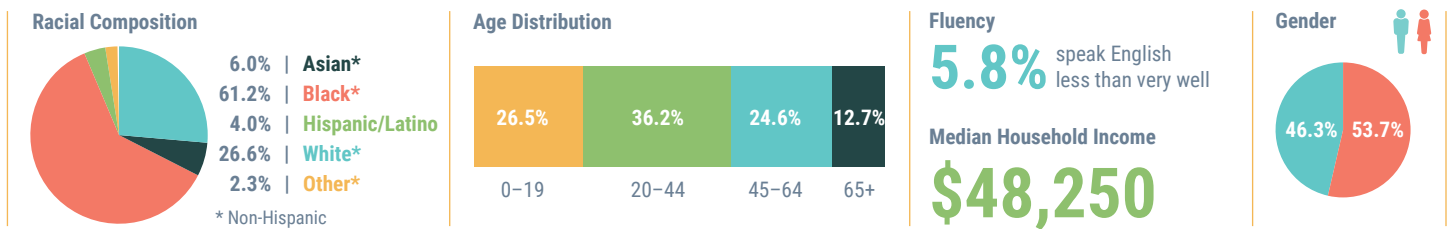
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HOSPITAL SERVICE AREA DEMOGRAPHICS



Impact of Prior Community Health Needs Assessment and Implementation

Mercy Catholic Medical Center identified and prioritized their significant health needs in the 2019 CHNA. The Trinity Health of the Mid-Atlantic Region prioritization work group then ranked the needs by prevalence, severity, available data, magnitude of persons affected, and the ability of the hospital to impact the need. The needs were categorized and ranked under three categories: (1) Navigational & Equitable Access to Care; (2) Healthy Living; (3) Behavioral Health.

» Navigational & Equitable Access to Care

Improve access to healthcare services for persons who are poor and vulnerable by addressing the following three needs:

- (1) Access to health care for low-income residents and the uninsured
- (2) Access to health care for the elderly; and
- (3) Access to health care for the immigrant population.

In Fiscal Year 2021, Mercy Fitzgerald Campus and Mercy Philadelphia Campus provided Medicaid enrollment for 2,026 uninsured eligible patients and access for uninsured and underinsured at Mercy Physician Network clinic. The continuation of COVID-19 necessitated direction of resources to assist with access to care and COVID-19 vaccines in underserved communities. Mercy Fitzgerald participated in COVID-19 vaccines and education for 2,799 individuals as part of the "It Starts Here Campaign" in collaboration with faith-based organizations and the Delaware County Task Force. Mercy Fitzgerald donated the use of their Heli-pad site to Delaware County for community-based vaccines.

» Healthy Living

- (1) Address Overweight and Obesity
- (2) Nutrition, specifically Food Insecurity

Playworks, a school-based program, continued to remain on pause due to COVID-19. Mercy Fitzgerald continued to address the social influencer of health, food insecurity. Although the hospital-based program was paused due to COVID-19, food insecurity was addressed in vulnerable communities through coordination of nonprofit local and regional food distribution weekly with food and produce donations to assist those in need as identified by local faith leaders, and through distribution of thousands of grocery store gift cards and holiday turkeys to those in need.

» Behavioral Health

Improve access to Mental and Behavioral Health Care by addressing the need for this service for community residents.

In Fiscal Year 2021, Mercy Fitzgerald's "PREVENT" opioid prevention program remained on pause due to school closures related to COVID-19. The substance use disorder drug relapse prevention program, Positive Recovery Solutions, was expanded to Philadelphia and Montgomery Counties and administered Vivitrol to adults monthly. The remaining behavioral health community engagement activities have been paused, including campus-based National Alliance for Mental Illness (NAMI)-led mental health support groups, addiction counselor and Mental Health First Aid training.



Nazareth Hospital

Founded in 1940, Nazareth Hospital is guided by its Catholic-health core values of reverence, stewardship, integrity, safety, justice, and commitment to the underserved.

Trinity Health Mid-Atlantic is a Regional Health System that includes Mercy Fitzgerald Hospital in Darby, Pa.; Nazareth Hospital in Northeast Philadelphia; Saint Francis Hospital in Wilmington, Del.; St. Mary Medical Center in Langhorne, Pa. and home health and LIFE programs. Trinity Health Mid-Atlantic is a member of Trinity Health, one of the largest multi-institutional Catholic health care delivery systems in the nation.

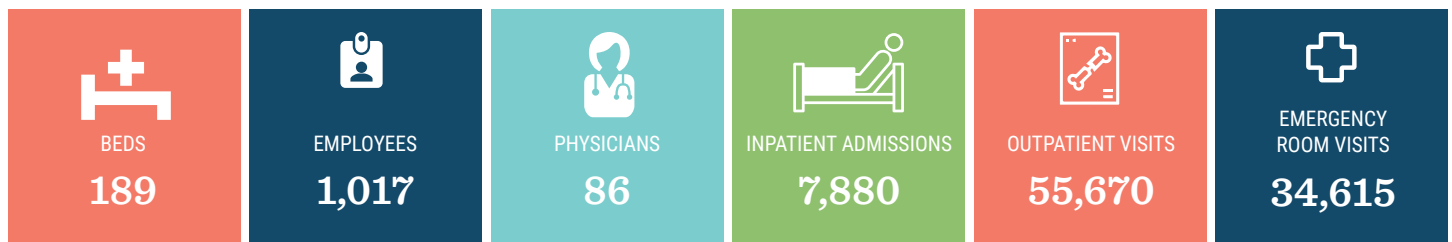
MISSION:

All Trinity Health Mid-Atlantic hospitals and Trinity Health serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

CHNA RESPONSE:

Each of the hospitals will use the community health needs assessment findings to develop community benefit programs and services to address the top three prioritized health needs and social influencers of health needs. Those selected will be those that are within the hospital's area of expertise and aligns with its mission to serve the vulnerable and underserved in the area.

NAZARETH HOSPITAL



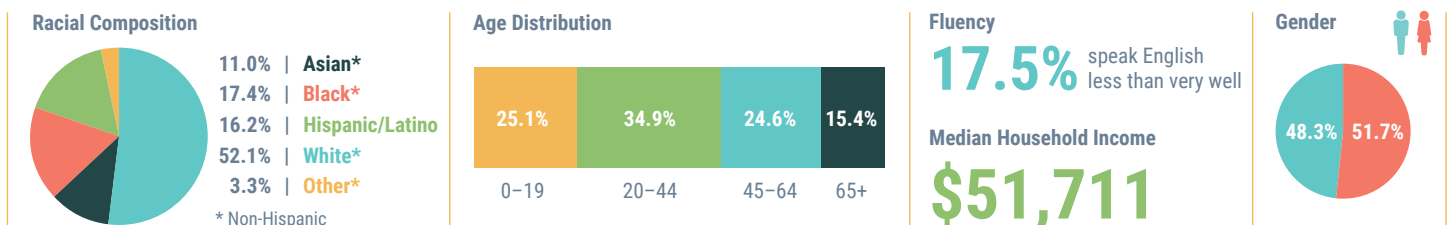
Located in Northeast Philadelphia, and with 189 licensed beds and 28 skilled nursing beds, Nazareth Hospital is a community teaching hospital and provides a full array of healthcare services, including emergency care, surgery, vascular services, wound care services, cardiac care, orthopedic and rehabilitation services, and cancer care.

Nazareth Hospital is a nationally certified Primary Stroke Center and Chest Pain Center and has earned national accreditations for heart failure care and PCI.

- » **U.S. News 2021 High Performing Hospital - Kidney Failure**
Nazareth Hospital earned the distinction from U.S. News & World Report as a "high-performing hospital" for kidney failure.
- » **Recipient of the Get with The Guidelines® - Stroke Gold Plus with Honor Roll and Target: Type 2 Diabetes Honor Roll** from the American Heart Association/American Stroke Association.

For further information on how Nazareth Hospital will address unmet health and social influencers of health needs, we invite you to review our Community Health Improvement Plan: [Nazareth Hospital CHNAs \(trinityhealthma.org\)](https://trinityhealthma.org/Nazareth-Hospital-CHNAs)

HOSPITAL SERVICE AREA DEMOGRAPHICS



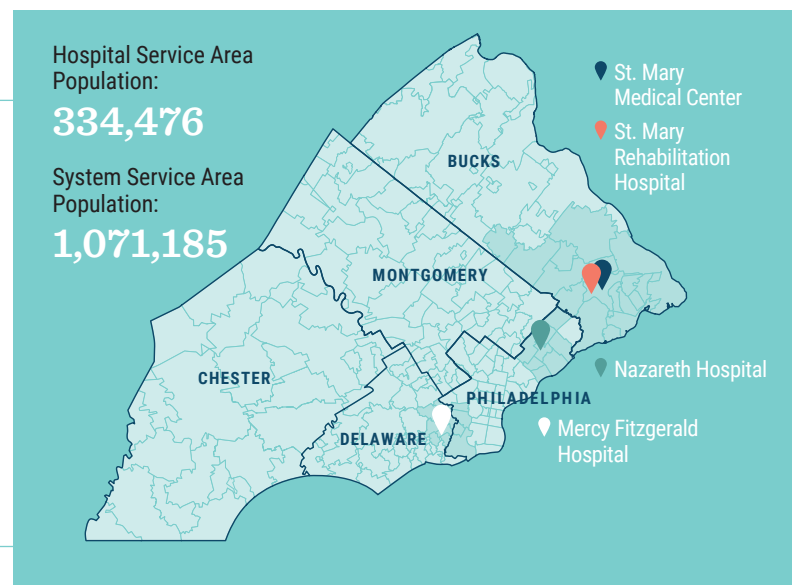
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

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Impact of Prior Community Health Needs Assessment and Implementation

The CHNA conducted in 2019 identified 13 significant health needs within the Nazareth Hospital community. The needs were prioritized based on a cross-functional workgroup comprised of internal and external stakeholders' vigorous group discussion and consensus-building to rank and prioritize the unmet health needs. Based on group discussion and agreement utilizing the nominal group planning and simplex methods, the health needs were grouped and ranked into three categories from 1 to 3, beginning with the most important to address for this CHNA cycle: (1) Navigational and Equitable Access to Care, (2) Healthy Living, (3) Behavioral Health.

Navigational and Equitable Access to Care

In Fiscal Year 2021, Nazareth Hospital enrolled 1,259 eligible patients in Medicaid through a contract with Healthcare Receivables Specialists, Inc (HRSI). Patients in the target population were provided with assistance (as needed) in scheduling primary care and specialty care visits, and a resource list for securing lower cost prescription medications. Transportation was provided for 114 established patients for medically necessary care. Space was identified at Nazareth Hospital for a medical clinic. GME Residency clinic has been established.

Emergence of COVID-19 necessitated direction of resources to assist with access to care and COVID-19 vaccines in underserved communities. Nazareth Hospital participated in COVID-19 vaccines and education for 3,019 individuals as part of the "It Starts Here Campaign" to address those in need.

Healthy Living: (1) Nutrition, (2) Overweight and Obesity, and (3) Physical Activity

In Fiscal Year 2021, Nazareth Hospital addressed social influencers of health including access to healthy food through distribution of grocery store gift cards and a food drive to benefit 100 families assisting those in need with access to healthy foods. In partnership with Holmesburg United Methodist Church & Caring for Friends, meals were packed and distributed weekly in the Northeastern Philadelphia community. The Playworks school-based program training continues to remain on pause due to school closure related to COVID-19.

Behavioral Health: Improve access to mental and behavioral health care for community residents.

Substance use disorder drug relapse prevention program, Positive Recovery Solutions, was expanded to Philadelphia Department of Corrections and administered Vivitrol to inmates monthly. The prevention program for school-aged youth remained on hold due to COVID-19. Adjustments in Trinity Health of the Mid-Atlantic Region to behavioral health leadership, along with hospital visitor restrictions due to COVID-19, resulted in deferral of both the NAMI support group meetings and Mental Health First Aid training for colleagues.

Our community benefit activities included going directly into underserved communities/populations and providing COVID vaccine education and administration. Part of our community benefit portfolio includes providing access to primary care physicians in a medically underserved area. In addition, we maintain a 24-hour emergency room, an open medical staff, and a board comprised largely of independent members of the community. The organization extends privileges to all qualified physicians in the community.

Nazareth Hospital continued implementing a Smoke Free Campus that includes all buildings and was expanded to include all tobacco and smokeless tobacco products including e-cigarettes, vapors, and chewing tobacco. In addition, the New Hire Policy encourages all new colleagues to take advantage of smoking cessation classes and smoking cessation aids.

Mercy Health System, now Trinity Health of the Mid-Atlantic Region as of July 1, 2019, is a member of The Breathe Free Pennsylvania Coalition, a combined group representing the American Heart Association, the American Stroke Association and the American Cancer Society in Pennsylvania and contiguous states. The Coalition is focused on improving the existing Clean Indoor Air Law in Pennsylvania by reducing the loopholes and exceptions that allow for smoking indoors in establishments such as casinos, eliminating exceptions to the statewide smoking ban, and providing for local ordinances.



St. Mary Medical Center and St. Mary Rehabilitation Hospital

Established in 1973, St. Mary Medical Center is guided by its Catholic-health core values of reverence, stewardship, integrity, safety, justice, and commitment to the underserved. Located in Langhorne, Pa., and with 371 licensed beds, St. Mary is a community teaching hospital and offers state-of-the-art technology and highly skilled physicians and clinical professionals to provide advanced care for complex cases.

Trinity Health Mid-Atlantic is a Regional Health System that includes Mercy Fitzgerald Hospital in Darby, Pa.; Nazareth Hospital in Northeast Philadelphia; Saint Francis Hospital in Wilmington, Del.; St. Mary Medical Center in Langhorne, Pa. and home health and LIFE programs. Trinity Health Mid-Atlantic is a member of Trinity Health, one of the largest multi-institutional Catholic health care delivery systems in the nation.

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CHNA RESPONSE:

Each of the hospitals will use the community health needs assessment findings to develop community benefit programs and services to address the top three prioritized health needs and social influencers of health needs. Those selected will be those that are within the hospital's area of expertise and aligns with its mission to serve the vulnerable and underserved in the area.

St. Mary offers advanced non-invasive treatments, adult and pediatric emergency services, inpatient medical and rehabilitation facilities, along with supportive health and wellness programs.

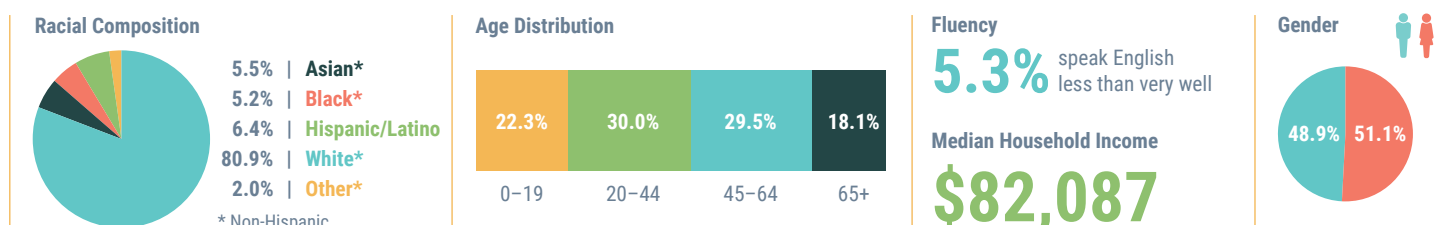
St. Mary is designated by the Commonwealth of Pennsylvania as a Level II Trauma Center. St. Mary has a nationally accredited hip and knee replacement program, an NAPBC-accredited breast program, a Commission on Cancer-accredited cancer program and is a member of the Penn Cancer Network.

- » **U.S. News & World Report – High-Performing Hospital**
Named a high performing hospital in kidney failure, heart failure, heart attack, knee replacement, diabetes and COPD.
- » **Get With The Guidelines® – Target: Stroke Honor Roll Elite Plus/Gold Plus Quality Achievement Award**
- » **Get With The Guidelines® Heart Failure Gold Quality Achievement Award**

St. Mary Rehabilitation Hospital is a free-standing 50 bed inpatient rehabilitation facility which offers highly specialized and comprehensive care to patients facing the challenges of recovering from complex illness or injury. This state-of-the-art hospital opened in spring 2014 in partnership with Center Healthcare Corporation (St. Mary Medical Center joint venture 59%).

For further information on how St. Mary Medical Center and St. Mary Rehabilitation Hospital will address unmet health and social influencers of health needs, we invite you to review our Community Health Improvement Plan: [St. Mary Medical Center CHNAs](http://St.MaryMedicalCenterCHNAs.trinityhealthma.org) (trinityhealthma.org)

HOSPITAL SERVICE AREA DEMOGRAPHICS



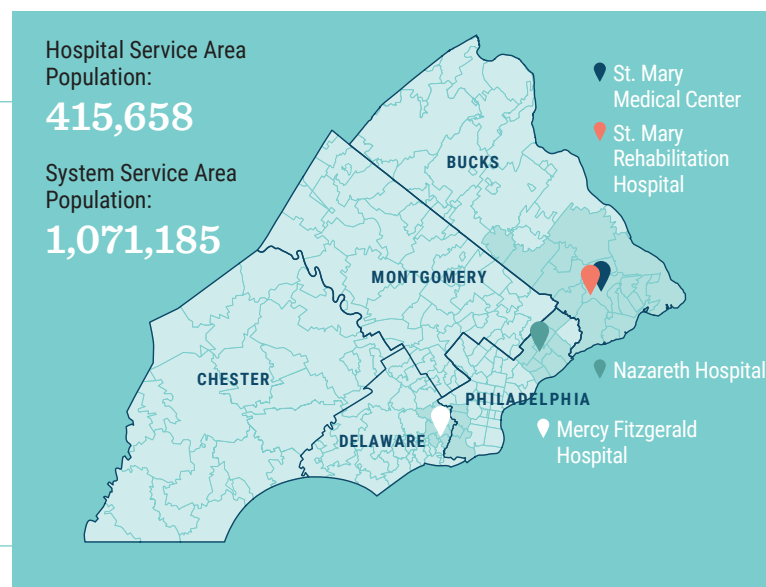
TARGETED SERVICE AREA FOR COMMUNITY HEALTH IMPROVEMENT

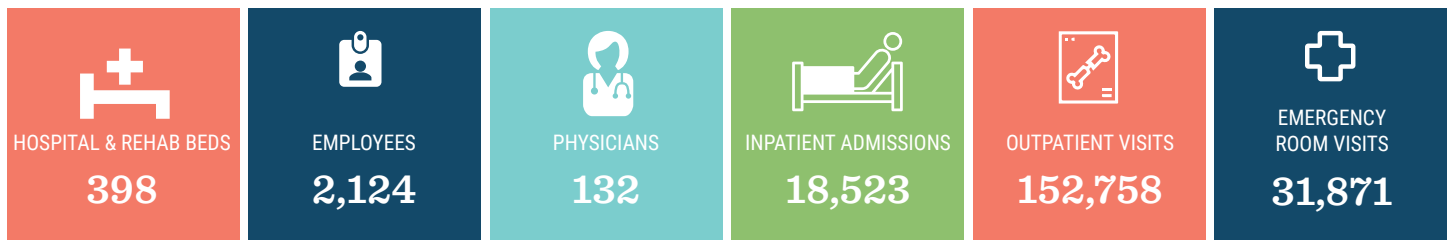
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Impact of Prior Community Health Needs Assessment and Implementation

St. Mary Medical Center:

SMMC addressed the following three unmet health needs from the 2019 CHNA:

1) Access to mental health care

SMMC provided access to quality mental health services for low-income uninsured persons diagnosed with a behavioral health disorder, in partnership with health and social service agencies through our community benefit grants program. Family Service Association (FSA) provided mental health counseling and treatment for 95 individuals at the St. Mary Adult Health and Children's Health Centers. Mental health screening and intervention included assessment, individual and family therapy, medication monitoring, depression screenings, and psychiatric referral as needed for low-income uninsured patients at the above referenced health centers. SMMC also awarded grant support to FSA for school-based mental health counseling services for 23 students in crisis. Paired t-test showed significant improvements in problem severity and in day-to-day functioning following counseling. There was a 28% reduction in severity of issues; 7% increase in functional score, able to handle daily issues; 27% improvement in hopefulness. SMMC is continuing to explore co-location of medical and behavioral health services through expansion of St. Mary Family Medicine Residents at the Family Service Association Behavioral Health Clinic. A new Program Director Family Medicine Residency was hired to oversee these residents in Spring 2021.

2) Access to substance abuse treatment

SMMC purchased a motorhome to establish mobile drug and alcohol relapse prevention services in partnership with Positive Recovery Solutions. Positive Recovery Solutions provided monthly drug relapse prevention services in the motorhome for 11 patients. Lenape Valley Foundation Crisis Services continues to provide detox/recovery stabilization services for patients presenting with substance use disorder in St. Mary ED.

3) Access to care for the uninsured, especially those living in poverty

SMMC provided primary and preventive health care services for low-income uninsured eligible adults and children through support and enrollment into Medicaid and St. Mary financial assistance programs. In FY21, 31,174 Medicaid beneficiaries received services at St. Mary, and 11,671 patients qualified and received St. Mary financial assistance. At the St. Mary Children's Health Center, 4,427 children received medical care, and the Mother Bachmann Maternity Center delivered 315 babies. St. Mary also provided primary and preventive care for 821 at the St. Mary Adult Health Center. Trinity Health has partnered with FindHelp.org social network platform to promote connection to health care and social services.

St. Clare pharmacy provided free or reduced cost prescription medications through both the St. Mary financial assistance program and the Dispensary of Hope free medication program (uninsured living at or below 300% federal poverty level). A monthly social media campaign was launched to further promote the Dispensary of Hope program to help reach eligible patients and community members during the COVID pandemic. Monthly outreach continued to July 2021.

St. Mary Rehabilitation Hospital:

SMRH addressed the following unmet health need in fiscal year 2021:

Access to substance abuse treatment

Positive Recovery Solutions mobile drug and alcohol relapse prevention services is available on St. Mary campus for local residents and patients from St. Mary Medical Center and Rehabilitation Hospital.

PARTNER ORGANIZATIONS

In addition to the participating hospitals and health systems, the organizations below provided support to the rCHNA process. More details about each organization's role are highlighted below.

Chester County Health Department

The [Chester County Health Department](#)'s mission is to provide public health leadership as well as personal and environmental health services to residents and visitors so that they may grow, live and work in healthy and safe communities. Since its founding in 1968, Chester County Health Department has consistently provided exceptional public health leadership, programs and services to Chester County residents. The Health Department embraces the public health principle of "community as client," promoting the health of families, populations, and communities through coordinated efforts across the Bureaus of Administrative and Support Services, Personal Health Services, Environmental Health Protection, and Population Health. The Health Department provides a full range of public health programs, including nurse home visiting; immunization clinics; food supplements through the Women, Infants and Children program; sexually transmitted disease testing; restaurant inspections; sewage and water permits; disease investigation and surveillance; emergency planning and response; community health assessment and planning; health promotion; and much more.

Chester County Health Department supported community engagement for focus group-style community conversations with Chester County residents and community organization representatives.

Delaware County Health Department

The central focus of the new [Delaware County Health Department](#) is to create thriving and healthy communities. Priorities such as health equity, education, safe and affordable housing, nutrition, green space, racial justice, and employment opportunities will lead to positive health outcomes for all Delaware County residents and have a meaningful impact on their quality of life. As the first health department established in Pennsylvania in 33 years, the Delaware County Health Department has the unique opportunity to provide public health leadership that embodies the principles of Public Health 3.0, a national model for public health in the 21st Century. Through coordinated efforts across the Environmental Health Division, Personal Health Division, Population Health Division, and with strong support from a dedicated Epidemiology Team, the health department will offer public health capacities and services for residents to achieve health equity, maintain healthy environments, support the health of moms and babies, control communicable diseases, respond to health emergencies, and promote safe and healthy lifestyles. The Health Department provides a full range of public health programs including Vaccines for Children (VFC), STI testing and education, retail food service inspections, emergency planning and response, disease investigation and surveillance, health education, and more. The Delaware County Health Department will partner with other government agencies such as municipal health entities, aging, mental health, and criminal justice agencies, non-profits, small businesses, and major employers, public schools, trade schools, colleges and universities, hospitals, and other healthcare facilities, community partners, groups, and individuals- to ensure an authentic community voice is present to drive the positive health outcomes every single resident deserves.

Delaware County Health Department supported community engagement for focus group-style community conversations with Delaware County residents and community organization representatives.

Health Care Improvement Foundation

The [Health Care Improvement Foundation](#) (HCIF) is an independent nonprofit organization based in Philadelphia that is dedicated to the vision of healthier communities through equitable, accessible, and quality health care. HCIF seeks to drive superior health care through collaboration and shared learning. Using skills in program design, coaching, facilitation, measurement, and evaluation, HCIF's team of experts convenes diverse partners around common goals for healthcare improvement to implement solutions that no market participant could achieve individually. Since its inception, HCIF has been recognized as an outstanding example of how advances in quality care can be achieved through large-scale collaboration.

HCIF's population health work is grounded in collaborative initiatives advancing health literacy, chronic disease prevention and management, and community health improvement. HCIF facilitates the Collaborative Opportunities to Advance Community Health (COACH) initiative sponsored by the Hospital and Healthsystem Association of Pennsylvania. Through COACH and other initiatives, HCIF builds system capacity and cross-sector partnership opportunities to more effectively address social determinants of health and advance health equity in the five-county southeastern Pennsylvania region.

HCIF provided overall project management and led qualitative data collection, synthesis, health need prioritization, and report development processes.

Montgomery County Office of Public Health

It is the Mission of the [Montgomery County Office of Public Health](#) (OPH) to provide public health services and foster collaborative actions that empower our community to improve its health and safety. Our Vision is to optimize the health and wellness of individuals and families through innovative practices. The OPH takes great pride in being ranked #1 in Health Factors and #4 in Health Outcomes in the state of Pennsylvania by the Robert Wood Johnson Foundation.

The OPH is Project Public Health Ready (PPHR) certified and recognized by the National Association of County and City Health Officials (NACCHO) for our capacity and capability to plan for, respond to, and recover from public health and other emergencies.

OPH supported community engagement for focus group-style community conversations with Montgomery County residents and community organization representatives.

Philadelphia Association of Community Development Corporations

[Philadelphia Association of Community Development Corporations](#) (PACDC) works to create an equitable city where every Philadelphian lives, works, and thrives in a neighborhood that offers an excellent quality of life. As a membership association, we foster strong community development corporations and non-profit community organizations by enhancing their skills and advocating for resources and policies to create a just and inclusive Philadelphia.

The work of community development improves health outcomes by improving the context in which people live and the quality of lives that they lead. PACDC has played a leadership role in securing more than \$640 million for affordable homes and neighborhood economic development, and worked to reform the city's vacant property system to get blighted properties back in productive reuse. Our Community Development Leadership Institute has trained more than 3,000 people representing community development corporations, civic associations, and other practitioners looking to better understand issues affecting lower-income residents and neighborhoods, ranging from gentrification and blight to neighborhood-driven real estate development, and their intersection with arts, health, education, and community engagement.

PACDC led community engagement efforts for focus group-style community conversations with Philadelphia residents.

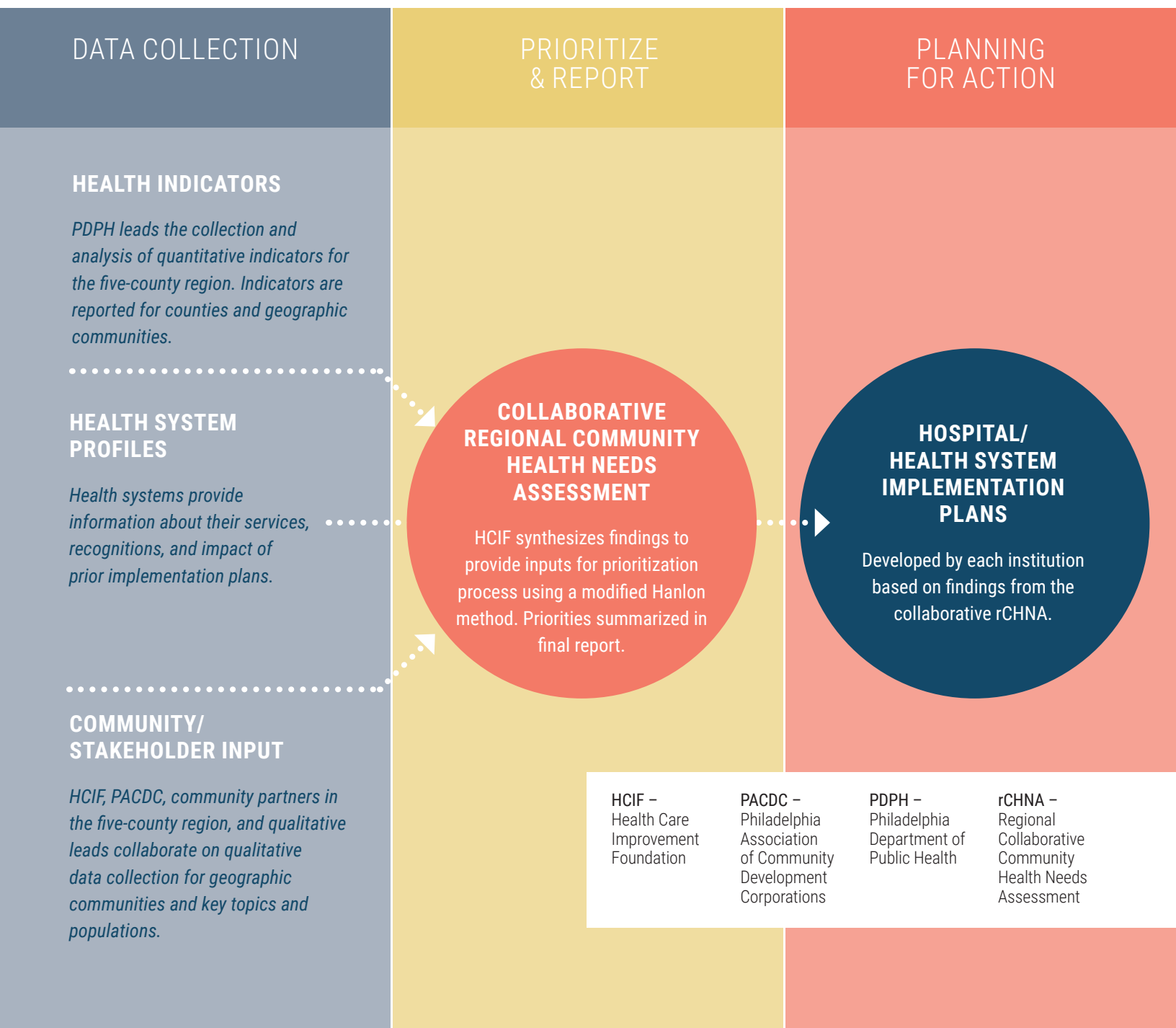
Philadelphia Department of Public Health

The [Philadelphia Department of Public Health](#) (PDPH) promotes and protects the health of all Philadelphians and provides a safety net for the most vulnerable. The agency leads programs to prevent communicable diseases; prevent chronic diseases and promote healthy behaviors; prevent environmental health risks; investigate outbreaks of disease; respond to public health emergencies; and promote the health of women, children, and families. In addition, the department operates the eight City Health Centers that provide primary care to more than 80,000 Philadelphians. PDPH has been on the vanguard of public health, proposing policy solutions to problems like smoking and obesity, and intends to continue that tradition with creative solutions to both long-standing urban health problems and new crises.

PDPH led the integration process to extract, transform, and load (ETL) data to a unified repository from multiple sources. PDPH also conducted analyses of quantitative metrics used to inform the status of health and well-being in the five-county region and contributed to the report's development.

OUR COLLABORATIVE APPROACH

Hospitals/health systems and supporting partners collaboratively developed the community health needs assessment process and report to identify regional health priorities and issues specific to each participating institution's service area. Based on these priorities, hospitals/health systems produce implementation plans to respond to unmet health needs. These plans may involve further collaboration or coordination to address shared priorities.



July 2021 to June 2022

June 2022 to November 2022

GOVERNANCE

A Steering Committee, composed of representatives from participating hospitals/health systems and supporting partner organizations, guided the development of the regional community health needs assessment (rCHNA). The Steering Committee met regularly to plan, provide feedback, and reach consensus on key decisions about approaches and strategies related to data collection, interpretation, and prioritization. Staff from Health Care Improvement Foundation (HCIF), Philadelphia Department of Public Health (PDPH), and Philadelphia Association of Community Development Corporations (PACDC) comprised the project team.

Steering Committee Representatives

| Name | Title | Institution |
|--------------------------------------|--|--|
| Jeanne Franklin, MPH, PMP | Public Health Director | Chester County Health Department |
| Ashley Orr, MPH | Population Health Director | Chester County Health Department |
| Meghan Smith, MPH | Health Planning & Promotion Supervisor | Chester County Health Department |
| Falguni Patel, MPH | Manager, Community Impact | Children's Hospital of Philadelphia |
| Rebecka Rosenquist, MSc | Health Policy Director, PolicyLab | Children's Hospital of Philadelphia |
| Rosemarie Halt, MPH | Chair | Delaware County Board of Health |
| Monica Taylor, PhD, MS | Chair | Delaware County Council |
| Allyson Gilmore, MBA | Director, Marketing & Outreach | Doylestown Health |
| Kellye Remshifski, MS, CHES, NBH-HWC | Wellness and Outreach Manager | Doylestown Health |
| Joan Boyce | Senior Director, Government Relations & Public Affairs | Einstein Healthcare Network (Jefferson Health) |
| Brandi Chawaga, M.Ed. | Director, Community Wellness | Einstein Healthcare Network (Jefferson Health) |
| Donna Manning | Executive Director, Post Acute Care | Grand View Health |
| Cynthia Westphal, MSN, RN, NE-BC | Chief Nursing Officer/Vice President, Patient Care Services | Grand View Health |
| Susan Choi, PhD | Senior Director, Population Health | Health Care Improvement Foundation |
| Mojisola Delano, MPH, MS | Consultant | Health Care Improvement Foundation |
| Kelsey Salazar, MPH | Director | Health Care Improvement Foundation |
| Cassidy Tarullo, MPP | Project Coordinator | Health Care Improvement Foundation |
| Marianna Calabrese, MA | Manager, Community Benefit | Jefferson Health |
| U. Tara Hayden, MHSA | Vice President, Community Health Equity, Jefferson Collaborative for Health Equity | Jefferson Health |
| Sasha Mendez | Program Manager, Community Health Benefits & Engagement, Jefferson Collaborative for Health Equity | Jefferson Health |

| | | |
|-------------------------------------|---|--|
| Yawei Song, MSW, LSW* | Former Community Benefits Coordinator, Center for Urban Health | Jefferson Health |
| Sharon Larson, PhD | Professor and Executive Director, Main Line Health Center for Population Health Research at Lankenau Institute for Medical Research | Main Line Health |
| Robert Lorenz* | Former Manager, Strategic Planning and Analytics | Main Line Health |
| Debbie McKetta, MS, CLSSGB | Manager, Strategic & Service Line Planning | Main Line Health |
| Ruth Cole, RN, MPH | Director, Division of Clinical Services | Montgomery County Office of Public Health |
| Nicole Rafalko, MPH, CPH | Epidemiology Research Associate | Montgomery County Office of Public Health |
| Laura Lombardo | Manager, Community Relations | Penn Medicine |
| Courtney Summers, MSW | Administrator, Division of Community Health | Penn Medicine |
| Garrett O'Dwyer | Health Programs & Special Projects Manager | Philadelphia Association of Community Development Corporations |
| Frank Franklin, PhD, JD, MPH | Deputy Health Commissioner | Philadelphia Department of Public Health |
| Jonas Miller, MGIS, PMP | Data Visualization Engineer | Philadelphia Department of Public Health |
| Claire Newbern, PhD, MPH* | Former Chief Epidemiologist | Philadelphia Department of Public Health |
| Anne Catino, RN, BSN, MS, NEA-BC | Vice President/Chief Nursing Officer | Redeemer Health |
| Barbara Tantum, MBA, MHA | Director of Planning | Redeemer Health |
| Andrew Kunka, JD, MPAP | Community Benefit & Special Projects Manager | Temple Health |
| Lakisha Sturgis, RN, BSN, MPH, CPHQ | Director, Community Care Management, Temple Center for Population Health | Temple Health |
| Laureen Carlin | Director, Community Health and Well-Being and Volunteer Services | Trinity Health Mid-Atlantic |
| Joann Dorr, RN, BSN | Regional Director, Community Health and Well-Being | Trinity Health Mid-Atlantic |
| Lisa Kelly, RN, MBA* | Former Director, Community Health and Well-Being and Volunteer Services | Trinity Health Mid-Atlantic |

* Some institutions experienced staffing transitions during the year; this list represents all those who represented an entity during the rCHNA planning process.

METHODS: DATA COLLECTION AND ANALYSIS

HEALTH INDICATORS

PDPH advised the Steering Committee on the selection of quantitative health indicators. The list of indicators for the 2019 report provided a starting point, and indicators were removed and added based on the following considerations:

- **Availability of the data source.** Some indicators were not included due to discontinued data sources, lack of updated data, or inaccessibility of the data.
- **Uniqueness.** Some indicators that were redundant with other measures were removed.
- **Granularity and quality of the data.** For new indicators, those with data available at the ZIP code level for all five-county ZIP codes and for which data quality and completeness could be verified were prioritized. For some indicators of strong interest, if only county-level data were available, those estimates were included as well.
- **Current interest.** Indicators related to COVID-19 were added.

The PDPH team, which included experts in epidemiological and geospatial analyses, compiled, analyzed, and aggregated over 60 health indicators from varied data sources. The table below presents information about the included indicators.

| Indicator | Details | Year(s) | Source |
|--|--|------------|---|
| ABOUT THE COMMUNITY | | | |
| Population | Total population size | 2019 | American Community Survey, Census Bureau (5-yr) |
| Age distribution by gender | | 2019 | American Community Survey, Census Bureau (5-yr) |
| Race/ethnicity | | 2019 | American Community Survey, Census Bureau (5-yr) |
| Educational attainment | High school as highest education level (26+ years) | 2019 | American Community Survey, Census Bureau (5-yr) |
| Income | Median household income | 2019 | American Community Survey, Census Bureau (5-yr) |
| Social Vulnerability Index | Percentile ranking of 4 socioeconomic indicators | 2018 | CDC/ATSDR Social Vulnerability Index |
| Foreign-born status | Born outside of United States | 2019 | American Community Survey, Census Bureau (5-yr) |
| Ability to speak English | Speak English less than "very well" (5+ years) | 2019 | American Community Survey, Census Bureau (5-yr) |
| Disability status | With a disability | 2019 | American Community Survey, Census Bureau (5-yr) |
| Leading causes of death | Top 5 causes | 2019, 2020 | Vital Statistics, PA Department of Health |
| GENERAL | | | |
| All-cause mortality | Rate per 100,000 | 2019, 2020 | Vital Statistics, PA Department of Health |
| Life expectancy by gender | Years | 2019, 2020 | Vital Statistics, PA Department of Health |
| Years of potential life lost before 75 | Years | 2019, 2020 | Vital Statistics, PA Department of Health |
| COVID-19 | | | |
| COVID-19 fully covered vaccination | Rate per 100,000 (as of 11/30/21) | 2020-2021 | Pennsylvania Department of Health |
| COVID-related emergency department utilization | Rate per 100,000 | 2020 | HealthShare Exchange |
| COVID-related hospitalization | Rate per 100,000 | 2020 | PA Health Care Cost Containment Council |
| COVID-related mortality | Rate per 100,000 | 2020 | Pennsylvania Department of Health |

| CHRONIC DISEASE & HEALTH BEHAVIORS | | | |
|--|--|------------|---|
| Adult obesity prevalence | Body mass index 30-99.8 among adults 18+ years | 2018 | Behavioral Risk Factor Surveillance System |
| Diabetes prevalence | Told by a doctor that they have diabetes | 2018 | Behavioral Risk Factor Surveillance System |
| Diabetes-related hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Hypertension prevalence | Told by a doctor that they have high blood pressure | 2017 | Behavioral Risk Factor Surveillance System |
| Hypertension-related hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Potentially preventable hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Premature cardiovascular disease mortality | Death before 65 years, rate per 100,000 | 2019, 2020 | Vital Statistics, PA Department of Health |
| Major cancer incidence | Prostate, breast, lung, colorectal cancers; rate per 100,000 | 2019 | Vital Statistics, PA Department of Health |
| Major cancer mortality | Prostate, breast, lung, colorectal cancers; rate per 100,000 | 2019 | Vital Statistics, PA Department of Health |
| Mammography screening | Mammogram in the past 2 years among women 50-74 years | 2018 | Behavioral Risk Factor Surveillance System |
| Colorectal cancer screening | Fecal occult blood test, sigmoidoscopy, or colonoscopy among adults 50-75 years | 2018 | Behavioral Risk Factor Surveillance System |
| Physical inactivity prevalence | No leisure time physical activity | 2018 | Behavioral Risk Factor Surveillance System |
| INFANT & CHILD HEALTH | | | |
| Asthma hospitalization | Children <18 years, rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Infant mortality | Deaths before age 1 per 1,000 live births | 2019, 2020 | Vital Statistics, PA Department of Health |
| Low birthweight births | Percent low birthweight (<2,500 grams) births out of live births | 2019, 2020 | Vital Statistics, PA Department of Health |
| Preterm births | Percent preterm (before 37 weeks gestation) births out of live births | 2019, 2020 | Vital Statistics, PA Department of Health |
| BEHAVIORAL HEALTH | | | |
| Adult binge drinking | 5+ (men) or 4+ (women) alcoholic drinks on one occasion in past 30 days | 2018 | Behavioral Risk Factor Surveillance System |
| Adult smoking | Current smoker status | 2018 | Behavioral Risk Factor Surveillance System |
| Drug overdose mortality | Rate per 100,000 | 2019, 2020 | Vital Statistics, PA Department of Health |
| Opioid-related hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Substance-related hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Poor mental health | Poor mental health for 14+ days in past 30 days | 2018 | Behavioral Risk Factor Surveillance System |
| Suicide mortality | Rate per 100,000 | 2019, 2020 | Vital Statistics, PA Department of Health |
| Youth binge drinking | 5+ alcoholic drinks in a row on ≥1 days in past 30 days among teens, county-level only | 2019 | Youth Risk Behavior Surveillance System, Pennsylvania Youth Survey* |
| Youth ever attempted suicide | Suicide attempt ever among teens, county-level only | 2019 | Youth Risk Behavior Surveillance System, Pennsylvania Youth Survey* |
| Youth mental health | Depressed/sad most days or sad/hopeless almost every day 2+ weeks in past 12 months among teens, county-level only | 2019 | Youth Risk Behavior Surveillance System, Pennsylvania Youth Survey* |
| Youth smoking | Smoked cigarettes in past 30 days among teens, county-level only | 2019 | Youth Risk Behavior Surveillance System |
| Youth vaping | Used electronic vapor products in past 30 days among teens, county-level only | 2019 | Youth Risk Behavior Surveillance System |

| INJURIES | | | |
|--|--|------------|---|
| Fall-related hospitalization | Rate per 100,000 | 2019, 2020 | PA Health Care Cost Containment Council |
| Gun-related emergency department utilization | Rate per 100,000 | 2019, 2020 | HealthShare Exchange |
| Homicide mortality | Rate per 100,000 | 2019, 2020 | Vital Statistics, PA Department of Health |
| ACCESS TO CARE | | | |
| Health insurance (public) status - Adults | Adults 19-64 years with Medicaid | 2019 | American Community Survey, Census Bureau (5-yr) |
| Health insurance (public) status - Children | Children <19 years with public insurance | 2019 | American Community Survey, Census Bureau (5-yr) |
| Health insurance status - Population | Population without insurance | 2019 | American Community Survey, Census Bureau (5-yr) |
| Health insurance status - Children | Children <19 years without insurance | 2019 | American Community Survey, Census Bureau (5-yr) |
| Emergency department utilization | Rate per 100,000 | 2019, 2020 | HealthShare Exchange |
| High emergency department utilization | 5+ visits in 12 months, rate per 100,000 | 2019, 2020 | HealthShare Exchange |
| SOCIAL & ECONOMIC CONDITIONS | | | |
| Poverty status - Population | Population in poverty | 2019 | American Community Survey, Census Bureau (5-yr) |
| Poverty status - Children | Children <18 years in poverty | 2019 | American Community Survey, Census Bureau (5-yr) |
| Employment status | Adults 19-64 years unemployed (not in labor force) | 2019 | American Community Survey, Census Bureau (5-yr) |
| Household type | Householders living alone who are 65+ years | 2019 | American Community Survey, Census Bureau (5-yr) |
| Food insecurity | Population experiencing food insecurity, county-level only | 2019 | Feeding America |
| Households receiving food assistance | Households receiving Supplement Nutrition Assistance Program (SNAP) benefits | 2019 | American Community Survey, Census Bureau (5-yr) |
| Housing cost burden | Households who spend >30% of income on housing | 2019 | American Community Survey, Census Bureau (5-yr) |
| Housing lead risk | Homes with potential lead risk | 2019 | American Community Survey, Census Bureau (5-yr) |
| Housing occupancy status | Vacant housing units | 2019 | American Community Survey, Census Bureau (5-yr) |
| Violent crime rate | Rate per 100,000, county-level only | 2018 | PA Uniform Crime Reporting System |

Note: Only crude rates are reported.

** Youth Risk Behavior Surveillance System data only for Philadelphia County; similar items collected for Bucks, Chester, Delaware, and Montgomery County through the Pennsylvania Youth Survey (data limited to high school students only)*

Depending on the availability of the data, indicators were summarized at these levels:

- **County level** – For all five counties
- **Geographic community level** – These represent clusters of ZIP codes grouped into 46 distinct geographic communities, based on guidance from Steering Committee members.

The Steering Committee had a strong interest in examining how indicators varied by race, ethnicity, or other demographic characteristics to identify potential disparities. However, many geographic communities did not have a sufficient sample size for specific racial/ethnic groups to enable rigorous comparison for a given health indicator. In addition, the availability and quality of such demographic data was inconsistent across indicators. The health indicators are therefore not disaggregated by these characteristics for the current report. Wherever possible and appropriate, secondary analyses comparing health outcomes or factors by such characteristics are presented in relevant sections throughout the report.

COMMUNITY INPUT

A critical complement to the quantitative data represented by the health indicators is qualitative data that capture the perspectives, priorities, and ideas of those who live, learn, work, and play in local communities. Though no formal written comments on the 2019 rCHNA were received upon solicitation, feedback from partners provided to Steering Committee and project team members informed the development of the current process. Building on the qualitative data collection approach developed for the 2019 rCHNA, the Steering Committee and project team sought to expand, enhance, and refine strategies to thoughtfully gather and incorporate community input into the 2022 rCHNA. A subset of the Steering Committee, as well as several additional representatives from participating health systems, formed a Qualitative Team to guide the planning process. HCIF also engaged two experts in qualitative data collection and analysis as consultants to serve as Qualitative Leads.

Qualitative Team Members

| Name | Title | Institution |
|--------------------------------------|--|---|
| Kathy Gorman | Sr. Vice President, Strategic Planning and Marketing | Chester County Hospital |
| Falguni Patel, MPH | Manager, Community Impact | Children's Hospital of Philadelphia |
| Rebecka Rosenquist, MSc | Health Policy Director, PolicyLab | Children's Hospital of Philadelphia |
| Kellye Remshifski, MS, CHES, NBH-HWC | Wellness and Outreach Manager | Doylestown Health |
| Allison Zambon, MHS, MCHES | Program Manager, Office of Community Outreach | Fox Chase Cancer Center - Temple University Health System |
| Keith Hammerschmidt | Executive Director, Grand View Healthcare Partnership | Grand View Health |
| Rickie Brawer, PhD, MPH | Qualitative Lead Consultant | Health Care Improvement Foundation |
| Susan Choi, PhD | Senior Director, Population Health | Health Care Improvement Foundation |
| Mojisola Delano, MPH, MS | Consultant | Health Care Improvement Foundation |
| Kelsey Salazar, MPH | Director | Health Care Improvement Foundation |
| Cassidy Tarullo, MPP | Project Coordinator | Health Care Improvement Foundation |
| Jean Wallace, PhD, MPH | Qualitative Lead Consultant | Health Care Improvement Foundation |
| Marianna Calabrese, MA | Manager, Community Benefit | Jefferson Health |
| U. Tara Hayden, MHSA | Vice President, Community Health Equity, Jefferson Collaborative for Health Equity | Jefferson Health |
| Sasha Mendez | Program Manager, Community Health Benefits & Engagement, Jefferson Collaborative for Health Equity | Jefferson Health |
| Yawei Song, MSW, LSW* | Former Community Benefits Coordinator, Center for Urban Health | Jefferson Health |
| Deborah Mantegna, RN, MSN | System Director, Community Health and Outreach; Manager, Volunteer Services, Riddle Hospital | Main Line Health |
| Debbie McKetta, MS, CLSSGB | Manager, Strategic & Service Line Planning | Main Line Health |
| Heather Klusaritz, PhD, MSW | Director of Community Health Services, Penn Medicine Center for Health Equity Advancement; Associate Director, Center for Community & Population Health, DFMCH | Penn Medicine |
| Barbara Tantum, MBA, MHA | Director of Planning | Redeemer Health |
| Joann Dorr, RN, BSN | Regional Director, Community Health and Well-Being | Trinity Health Mid-Atlantic |

* Some institutions experienced staffing transitions during the year; this list represents all those who represented an entity during the rCHNA planning process.

Special thanks to Michele Francis, MS, RD, CDCES, LDN, Director, Community Health & Wellness Services at Chester County Hospital and Maureen Hennessey, Ed.D., MPA, Manager, Community Health and Outreach at Bryn Mawr Hospital (Main Line Health) for invaluable assistance with community outreach and engagement.

Recognizing that no single data collection effort could comprehensively reflect the unique experiences and specific needs of all communities in the region, the approach was grounded in mixed methods that incorporated focus group discussions, interviews, surveys, and a wide array of secondary sources. The core of the primary data collection process again focused on hearing from geographic community residents and staff from local organizations who serve these communities, as well as more closely examining particular topics and populations. However, several changes were made in order to accommodate situational realities, as well as increase the depth and breadth of coverage:

- Primary data collection was undertaken by the project team October 2021 – February 2022. To ensure the safety of participants in light of the COVID-19 pandemic, all focus group discussions were held virtually, using the Zoom platform.
- Focus group-style, 90-minute “community conversations” were held to gather input from residents (and in some cases, those who provide services for those residents) of a subset of the 46 geographic communities. The Steering Committee guided the selection of communities, with higher need communities for whom recent qualitative data was not available being identified for inclusion. To accommodate the expanded service area, the number of conversations increased to 26: Bucks (3), Chester (4), Delaware (3), Montgomery (5), and Philadelphia (11). In addition, several interviews were conducted with key informants unable to join a session.
- To capture the insights of those who provide important health, human, and social services in each of the counties, 21 60*-minute focus group discussions centered on “spotlight” topics were conducted with organization and local government agency representatives. (Again, a limited number of interviews were conducted with those who were unable to participate in the focus groups.) A list of potential topics was generated by the Steering Committee based on priorities from past CHNAs. From this list, four topics were selected per county through consensus vote by Steering Committee members whose organizations serve that county.

The topics selected for each county are as follows:

| Topic | Bucks | Chester | Delaware | Montgomery | Philadelphia |
|--|-------|---------|----------|------------|--------------|
| Access to care | | | X | | |
| Behavioral health | X | X | X | X | X |
| Chronic disease | X | X | X | X | X** |
| Food insecurity | | X | X | X | |
| Housing and homelessness | | | | | X |
| Older adults and care | X | | | | |
| Racism and discrimination in health care | | | | | X |
| Substance use | X | X | | X | |
| Violence | | | | | X |

* For those counties opting not to have a separate substance use discussion (Delaware and Philadelphia), the behavioral health discussion was extended to 90 minutes, in recognition of the interrelationship between these topics.

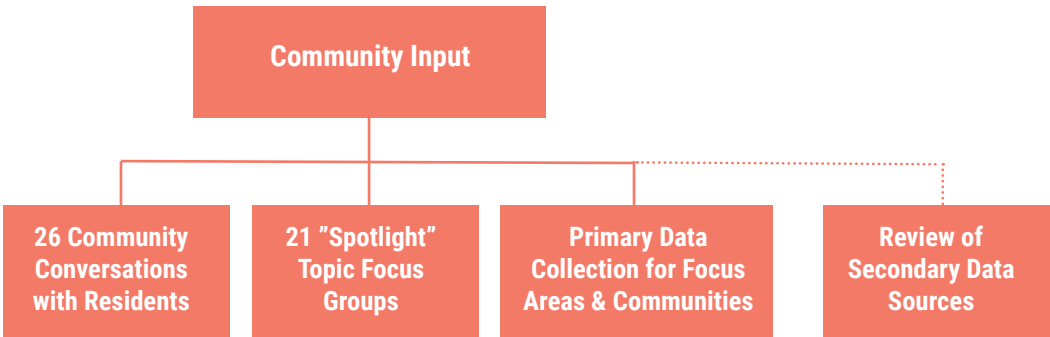
** Chronic disease was also discussed in a focus group discussion conducted in Philadelphia as part of data collection supporting the cancer focus area, to be addressed in the section below.

The project team either undertook directly or supported partners with targeted primary data collection to better understand the needs of particular communities or populations. These focus areas and communities were either specific to different type of facilities within participating health systems (i.e., cancer centers, rehabilitation facilities) or reflected gaps in the 2019 rCHNA:

| | | | |
|---|--|---|--|
| Cancer. New to the 2022 rCHNA. In addition to cancer-related information gathered from community conversation and spotlight discussions described above, partner cancer centers shared findings from focus groups with community advisory board members they conducted. | Disability. HCIF worked with a subcommittee of rehabilitation facilities to develop and administer an online survey of people with disabilities. | Immigrant, refugee, and heritage communities. Community organizations were provided support and funding to collect data about health needs in their communities (through surveys, focus groups, and interviews) or share relevant secondary data. | Youth voice. Recognizing the opportunity to grow from the small-scale effort in the 2019 rCHNA, HCIF supported youth-serving organizations with funding and resources to conduct discussions about health with youth and report back findings. |
|---|--|---|--|

Secondary data in the form of reports and summaries from other community engagement efforts were important inputs for this report. For example, the 2020 Pennsylvania LGBTQ Health Needs Assessment served as a key data source for the LGBTQ+ Communities section. A full list of sources incorporated is included in the “Resources” section.

The graphic below summarizes the major components of community input for the report:



QUALITATIVE DATA COLLECTION AND ANALYSIS

The Qualitative Team guided the development of discussion guides (see online Appendix) for both the community conversations and the spotlight discussions. These were adapted from those used for the 2019 rCHNA and included questions addressing community assets; community health challenges and barriers (including those related to social determinants of health, access to care, COVID-19); specific needs of older adults, children and youth, and additional underrepresented groups; and potential solutions for particular needs.

In light of the unique challenges posed by the virtual format of the discussions, the Qualitative Team provided critical feedback on the development of materials such as Zoom how-to guides and flyers to promote the discussions and facilitate online registration. Anticipating the challenges of the digital divide and potential discomfort with the online format, the project team and the Qualitative Team also prioritized strategies such as offering additional preparation sessions for interested participants needing technical support, as well as working closely with trusted community organizations who could facilitate community resident participation. Those organizations interested in serving in this role and more generally assisting with recruitment were offered funding to support their time. In Philadelphia, PACDC led community engagement efforts through its network of community development corporations and other partners.

Values guiding participant engagement included valuing community members' time and expertise (one expression of this was providing community members with \$25 Visa gift cards for their participation) and ensuring that voices of marginalized communities were well-represented in the discussions. With these values in mind, Steering Committee members contributed suggestions of partner organizations for outreach (to participate in meetings themselves or assist with community member engagement), which were organized into a centralized partner database. HCIF conducted outreach based on this database, researched additional organizations, and employed a snowball technique to elicit other potential partners. Steering Committee members, PACDC, partner organizations, and HCIF used varied methods to promote the discussions, including phone and email outreach, social media posts, intranet outreach, listserv posts, and posting flyers in community locations.

In advance of discussions, HCIF fielded questions, assisted with registration, and provided regular reminders to registrants to maximize participation rates. Despite best efforts, it is important to note limitations to the data collection process:

- Ensuring sufficient numbers of participants (at least 5-6) for all sessions was challenging. Despite significant outreach, some meetings had lower registrations; feedback from community organizations indicated their own challenges with having enough time to devote to recruitment (owing largely to increases in their work due to COVID-19-related impacts) and community members' reluctance to join an online meeting (whether due to online meeting fatigue or unfamiliarity with Zoom). In addition, higher no-show rates relative to in-person meetings were observed, suggesting that registrants may have found it easier to forget or change their minds about participation.

- To begin to assess representation in the discussions, optional demographic questions were added to the online registration form for each session. Given the extent of missing data it is difficult to draw firm conclusions, but a lack of racial/ethnic diversity in the spotlight topic discussions with organization representatives was evident, suggesting important opportunities for intentional and thoughtful engagement in future data collection efforts.

The Qualitative Leads facilitated all discussions with technical support by the HCIF team. All discussions were recorded and transcribed for later analysis; only the project team and Qualitative Leads had access to the recordings and transcripts. Transcripts were imported as Word documents into NVivo software (release 1.5.1, QSR International) to manage, code, and interpret qualitative data from focus groups and interviews. Both Qualitative Lead consultants identified recurrent themes from the transcripts, agreed on a set of codes, coded for these themes, and generated summaries featuring themes and accompanying quotes. To ensure confidentiality, participants were assigned numbers in the transcripts to replace names, and care was taken to avoid disclosing any individual's identity in the summaries.

Based on the coding, the consultants identified significant overlap in common themes across geographic communities and spotlight topics. To minimize redundancy and ensure summaries were based on adequate sample size, the Qualitative Leads developed the following for each type of discussion for inclusion in the report:

- **Geographic communities** – County-level summaries for Bucks, Chester, Delaware, and Montgomery Counties; five summaries for distinct geographic sections of Philadelphia County (individual summaries for each of the 26 community conversations are available in the online Appendix)
- **Spotlight topics** – Topic summaries that aggregates across counties; given the overlap between Behavioral Health and Substance Use, these topics were combined into one summary.

Summaries are organized around key sections of the discussion guide. Within each section, themes are generally presented in order of greatest frequency of mention; in some cases, for reasons of flow, related topics may be presented together. Themes are accompanied by illustrative quotes to capture participants' voices as much as possible.

DETERMINING AND PRIORITIZING COMMUNITY HEALTH NEEDS

The project team synthesized a full list of community health needs based on the health indicators and findings from the community engagement components. Related community health needs were consolidated to produce the final list of 12 high priority community health needs, representing three categories: health issues, access and quality of healthcare and health resources, and community factors.

A modified Hanlon rating method was used to prioritize the community health needs.

- For each health need, the project team assigned scores for both Criterion 1: Size of the Health Problem (based on relevant health indicators) and Criterion 2: Importance to Community (based on the frequency a given community health need was mentioned during qualitative data collection).
- Each participating hospital/health system scored the remaining three criteria (Capacity to Address, Alignment with Hospital/Health System Mission and Strategic Direction, Existing Collaborations/Interventions) using the below ranking guidance and with input from internal stakeholders and external partners. A final score was computed for each health need by weighting the score for each criterion (see percentages in table below) and adding the weighted scores.

| Ranking Guidance | | Size of Health Problem Magnitude of health priority based on size of population(s) impacted (15%) | Importance to Community Magnitude of health priority based on community input (30%) | Capacity to Address Availability of effective/feasible interventions (25%) | Alignment with Hospital/Health System Mission and Strategic Direction (20%) | Existing Collaborations/Interventions (10%) |
|------------------------|---------|--|--|---|--|--|
| | 9 or 10 | >25% | >40 | High Effectiveness/High Feasibility | Very consistent with mission AND strategic direction | Yes, strong existing partnerships AND initiatives |
| | 7 or 8 | 10 to 25% | 31 - 40 | High Effectiveness/Moderate Feasibility | Relatively consistent with mission AND strategic direction | Yes, existing partnerships AND initiatives |
| | 5 or 6 | 1 to 9.99% | 21 - 30 | Effective/Feasible | Consistent with mission AND strategic direction | Yes, existing partnerships OR initiatives |
| | 3 or 4 | 0.1 to 0.99% | 11 - 20 | Low Effectiveness /Low Feasibility | Relatively consistent with mission NOT strategic direction | Yes, existing partnerships, no current initiatives |
| | 1 or 2 | 0.01 to 0.09% | 1 - 10 | Low Effectiveness/Not Feasible | Consistent with mission NOT strategic direction | Weak, existing partnerships OR initiatives |
| | 0 | <0.01% | 0 | Not Effective/Not Feasible | Not consistent with mission OR strategic direction | No, existing initiatives or partnerships |
| Community Health Needs | Need 1 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 |
| | Need 2 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 |
| | Need 3 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 |
| | Need 4 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 |
| | Need 5 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 | Score 0-10 |

- An aggregate score for each community health need was calculated as an average of the scores for that health need across all participating hospitals/health systems. The health needs were then prioritized from highest to lowest final aggregate score.
- As a final check, the 'PEARL' test was applied to each health need to screen out any community health needs that did not meet the following feasibility factors:
 - Propriety – Is a program for the health problem suitable?
 - Economics – Does it make economic sense to address the problem? Are there economic consequences if a problem is not carried out?
 - Acceptability – Will a community accept the program? Is it wanted?
 - Resources – Is funding available or potentially available for a program?
 - Legality – Do current laws allow program activities to be implemented?

No health needs were eliminated based on the PEARL test.

FINAL REPORT

- The final CHNA report was drafted by the HCIF team and presented to the hospital/health systems for review and revision.
- This report was presented and approved by the Board of Directors of each hospital/health system.

ABOUT THE SERVICE AREA

The overall service area includes Bucks, Chester, Delaware, Montgomery, and Philadelphia and represents a diverse population of 4,111,039. All ZIP codes in the five counties were grouped into 46 distinct geographic communities, as shown below. In the next section, each quantitative county profile is followed by relevant summaries of qualitative data collected through geographic community conversations in that county, as well as quantitative profiles of the geographic communities within each county.

