



UNIVERSITY of MARYLAND
CAPITAL REGION HEALTH



COMMUNITY HEALTH

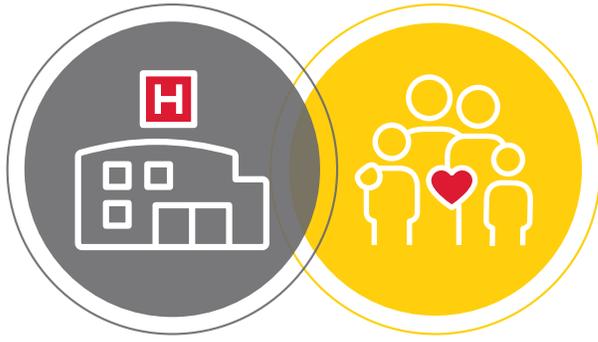
— Improvement —

Report

2020

University of Maryland Capital Region is the newest affiliate of the University of Maryland Medical System.

Established in 1982, University of Maryland Capital Region Health (UM Capital) is an integrated, not-for-profit health care system serving residents of Prince George's County, Maryland and the Southern region of Maryland. It is the largest not-for-profit provider of health care services in Prince George's County.



ONE HOSPITAL. THREE CAMPUSES. ONE COMMUNITY.

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University of Maryland Capital Region Health (UM Capital) is deeply committed to our mission to address the health care needs of residents in Prince George's County as well as the surrounding region. With the opening of our new hospital, University of Maryland Capital Region Medical Center, in Largo, MD in 2021 and the opening of the new University of Maryland Laurel Medical Center, a part of the Laurel Health & Wellness Campus, in Laurel, MD in 2022—we are ushering in a new era of health care across the region. As we strengthen the alignment of our campuses and community wellness initiatives, we are better equipped to serve the long-term health needs of residents in this region. We are pleased to present UM Capital's Community Health Improvement Report for fiscal year 2020.

The COVID-19 pandemic has accelerated unprecedented change. Now more than ever, the health of businesses and our community is inextricably linked to the health and wellness of its workforce and residents. Such uncertain times have compelled us to adapt quickly and identify creative and unconventional ways to continue to meet the health improvement needs of our community. This year's report reflects our steadfast dedication to our County-wide health priorities, our most vulnerable community members including our stakeholders and the patients we serve.

In fiscal year 2020, UM Capital took aggressive steps to strengthen our capacity to deliver high-quality, community-based care. This included increasing our capabilities to provide Diabetes Prevention Programming (DPP); receiving both local and federal program funding from Prevention Link, a program that integrates clinical practice with evidence-based public health programs to improve health outcomes for patients at risk for chronic disease, to include diabetes and heart disease. Our long-standing partnership with Carefirst has enabled us to expand access to perinatal services through the expansion of our Mama and Baby Bus Program into Wards 7 and 8 in Washington DC. Additionally, we have collaborated with internal and external partners to provide virtual access to a variety of health education seminars, classes and workshops in an effort to not only sustain access to health educational resources, but bolster emotional and mental health supportive services at a time where mental health has taken a front seat at a National level.

Despite the pandemic's potential for long-standing effects locally and around the globe, we are committed to forging ahead in moments of uncertainty, by maintaining our mission to enhance the health and wellness of our patients and communities, with an emphasis on health promotion and chronic disease prevention.



Nathaniel Richardson Jr.

Nathaniel Richardson, Jr.
President & CEO
University of Maryland
Capital Region Health



Sabra Wilson

Sabra Wilson
Director of Community Health
University of Maryland
Capital Region Health

Activities

COVID-19 Relief Efforts

The COVID 19 pandemic has had a wide-range and devastating impact on Maryland's families and economy. Prince George's County was hit hard with the Coronavirus pandemic; leading the Washington DC/Maryland region in the number of coronavirus cases. Prior to the pandemic food insecurity rates in Prince George's County were among some of the highest in the Washington Metropolitan area at 30%. Job loss and other economic crises associated with the pandemic have only magnified such challenges.



UM Capital provided a combined **\$32,000** in funding to assist in providing food items to our most vulnerable residents.



The University of Maryland Medical System and each of its 13 affiliates, including UM Capital, worked collectively to provide relief services across the state of Maryland. More specifically, UM Capital partnered with two local food pantries; Mission of Love Charities located in Capital Heights MD and the Capital Area Food Bank, located in Washington DC. We provided a combined \$32,000 in funding to assist in providing food items to our most vulnerable residents. This allowed for the purchase of 40,000lbs of foods, assisting 10,000 families. The funding provided to our organization has helped fill a significant gap in services during this time. We are truly grateful for your generous donation” stated Deborah Martinez CEO, Mission of Love charities. In addition to food insecurity, we partnered with the DC Diaper Bank to implement a no-contact diaper distribution giveaway. Our Suitland Medical Group hosted the distribution, providing a total of 40,000 diapers free of charge to residents and families in need.



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Activities

Mama and Baby Bus Program

UM Capital Region Health continues to partner with CareFirst in the operation of the Mama & Baby Bus program. The Mama & Baby Mobile Unit continues to serve as a health care access point for underinsured and uninsured women and children; providing basic, uncomplicated maternal and child health services through partnerships with local community-based organizations, shelters, food pantries, faith institutions, schools and institutions of higher learning. The majority of the services rendered on the bus include well-women exams, breast exams and flu vaccinations.



In fiscal year 2020, the bus saw a 50% increase in patient visits, 87% of the total number of patients seen received preventive screenings and preconception counseling and 27% of the patients seen successfully completed referrals for follow-up for other specialty care services. During the initial three-year partnership commitment to provide care to low-income and uninsured women in Prince George's County, the bus served approximately 1,200 patients.

We are pleased to report that CareFirst has extended the partnership an additional three years and awarded UM Capital funding to expand services to Washington DC residents. In partnership with community-based organizations, we will begin providing Supportive



Pregnancy Care to expectant moms, residing in Wards 7 and 8; home to the highest rates of pre-term birth and infant mortality in the district. The Supportive Pregnancy Care Program brings expectant women with similar due dates together for prenatal care, social support and education. During group sessions, women learn to take and record their own vital signs, receive a private physical and build skills related to pregnancy, birth and infant care. The expansion will be supported by funding made available through RB Health (US) LLC and Mead Johnson and Company, LLC. **To learn more about locations of services, please visit our website at umms.org/capital or call 301-437-5788 for appointment information.**

In 2020, the Mama & Baby Mobile Unit saw a **50% increase** in patient visits, **87%** of the total number of patients seen received preventive screenings and preconception counseling and **27%** of the patients seen successfully completed referrals for follow-up for other specialty care services.



Activities

Physical Health & Chronic Disease Management

Obesity in Maryland was estimated at 31.1%, substantially lower than the 42.0% in Prince George's County. Prince George's County has higher rates of weight-related chronic diseases than the state overall. In 2017, diabetes was the fifth leading cause of death in the county, with 253 deaths (3.9% of all resident deaths).

Visible and sustainable partnerships and collaborations are needed to address many of the health concerns in the County. And to that end, UM Capital partners with a variety of key organizations to create meaningful, health-driven, community-based programs and initiatives such as Dine Learn & Move (DLM) and the National Diabetes Prevention Program (DPP). The Dine, Learn and Move program is a free 11-month program presented in partnership with the Maryland

National Capital Parking and Planning Commission and the Prince George's County Health Department. This program aims to promote healthy eating, active living, and reinforce healthy behaviors to reduce the prevalence of various diseases among county residents. In 2020, DLM covered various topics such as Health on the Go, Debunking Health Myths, Budget for Health, and Holiday Recipe Makeover. Approximately, 70 participants participated in the program and showed a 50% knowledge increase at the completion of the last session.

The National Diabetes Prevention Program (National DPP) is a partnership of public and private organizations working to prevent or delay type 2 Diabetes. The National DPP features a CDC-recognized lifestyle change program; a research-based program focusing on healthy eating and physical activity. In 2020, UM Capital's Office of Community Health became a CDC-recognized organization in pending recognition. In addition to participating in the National DPP, UM Capital Region Health Diabetes Prevention Program (DPP) received local funding and support from PreventionLink and Totally Linking Care in Maryland, LLC (TLC-MD). PreventionLink is a county-wide program that integrates clinical practice with evidence-based public health



Approximately, **70 participants** participated in the Dine, Learn and Move program and showed a **50%** knowledge increase at the completion of the last session.



programs to improve health outcomes for patients at all levels of risk for chronic disease such as diabetes or heart disease. As part of TLC-MD, UM Capital joins a coalition of hospitals in southern Maryland that receive funding to provide programming and services free of charge to eligible patients. **UM Capital will launch virtual DPP classes beginning in Fall 2020, with additional offerings in 2021.**

Community Health Needs Assessment (CHNA)

In 2016, for the first time, the Prince George’s County Health Department (PGCHD) led a County-wide, joint community health needs assessment in collaboration with all hospitals in Prince George’s County Maryland. The Hospitals and the Health Department (the core team) agreed to again work collaboratively to update the 2016 Community Health Needs Assessment for 2019.

Process

The PGCHD structured the CHNA process to maximize community input, learn from community experts, utilize existing local, state and national data, and ensure a comprehensive community prioritization process as well as meet all federal and State requirements related to community benefit plans. Elements of the Mobilizing For Action through Planning and Partnerships (MAPP) process was used in the 2019 CHNA to shift data collection towards community perceptions of health and consideration of the local health system.

The PGCHD led the data collection and analytical process with input from

hospital representatives. Data for completing the CHNA was obtained from both primary and secondary sources which included:

- County resident survey administered in English, Spanish and French
- Secondary data from local, state, and national data sets
- Hospital Service Profiles to detail the residents served by the core team;
- A Community expert survey and key informant interviews; and a prioritization process.

Key Findings & County Wide Health Priorities

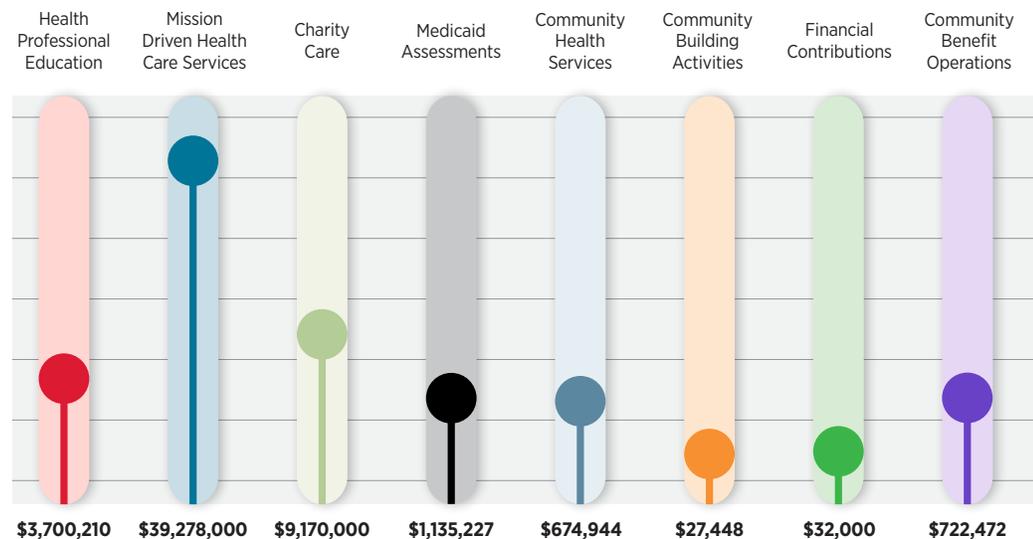
The County-wide CHNA found that many of the health disparities in the County were driven by social determinants of health (poverty, food insecurity, lack of access to healthy food, affordable housing, low employment), access to health insurance through the Affordable Care Act and poor navigation of both the health care system and available resources.

The leading health challenges identified through the data analyses and County-wide prioritization process are: chronic conditions, behavioral health and health disparities in cancer, HIV, and Substance Abuse.

After initially reviewing the data collection results for 2019, the core team determined that the priorities selected in the 2016 CHNA should remain the 2019 priorities based on the community and expert input in the process that focused on these areas, the challenges remaining in the county from the population and health indicators, and acknowledgment that such priorities require a substantial shift in both social norms and behavior change and therefore, require more than three years to address.

The full CHNA and Community Health Implementation Plan (CHIP) can be found on the umms.org/capital website under Community. We solicit community feedback on the most recent CHNA and Implementation Plan. Please submit comments to: umcapitalcommunityhealth@umm.edu

Financials



\$54,740,301
TOTAL COMMUNITY
BENEFIT

CHNA Implementation Plan

Although the joint CHNA encompassed the needs of the County's hospitals as a whole it is not a series of hospital-specific needs assessments. Each hospital used the data compiled from the Joint CHNA to produce its own Community Health Implementation Plan (CHIP), which outlines the priorities for each hospital and initiatives it will implement to address the needs identified in the CHNA.

The 2019 UM Capital Region CHIP was developed to not only align with County's priorities but the Strategic Annual Operating Plans and objectives of UM Capital, the Maryland State Health Improvement Plan (SHIP) and Healthy People 2020. A summary of our CHIP implementation plans are as follows:

UM Capital Region FY 2020-2023 CHIP Priorities

Priority Area 1: Social Determinants of Health Risk Factors

Promote Wellness, Behavior Change, and Engagement In Appropriate Care (Physical, mental, emotional, and behavioral health)

Key Initiatives Include: Participation in health fairs for enhanced screening, health literacy and community education, collaborate with community partners and schools to organize education and awareness events

Priority Area 2: Physical Health and Chronic Disease Management

Improve Chronic Disease Management

Key Initiatives Include: Diabetes Prevention & Management, Cardiovascular Disease and other chronic conditions.

Reduce Cancer Disparities

Key Initiatives Include: Supporting the developing of cancer screening and peer support programs.

Improve Transitional Care

Key Initiatives Include: Care Coordination and Care Transitions Support Program, providing community based support services.

Improve HIV/AIDS Prevention and Disease Management

Key Initiatives Include: Screening, education, counseling and treatment for services & support for men and women living with HIV/AIDS.

Priority Area 3: Behavioral Health

Develop Behavioral Health Outreach and Education Programs in Clinical and Community-based Settings

Key Initiatives Include: Implement health education and primary prevention activities in response to behavioral health needs.



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