

Q1.

Introduction:

COMMUNITY BENEFIT NARRATIVE REPORTING INSTRUCTIONS

The Maryland Health Services Cost Review Commission's (HSCRC's or Commission's) Community Benefit Report, required under §19-303 of the Health General Article, Maryland Annotated Code, is the Commission's method of implementing a law that addresses the growing interest in understanding the types and scope of community benefit activities conducted by Maryland's nonprofit hospitals.

The Commission developed a two-part community benefit reporting system that includes an inventory spreadsheet that collects financial and quantitative information and a narrative report to strengthen and supplement the inventory spreadsheet. The guidelines and inventory spreadsheet were guided, in part, by the VHA, CHA, and others' community benefit reporting experience, and was then tailored to fit Maryland's unique regulatory environment. This reporting tool serves as the narrative report. The instructions and process for completing the inventory spreadsheet remain the same as in prior years. The narrative is focused on (1) the general demographics of the hospital community, (2) how hospitals determined the needs of the communities they serve, (3) hospital community benefit administration, and (4) community benefit external collaboration to develop and implement community benefit initiatives.

The Commission moved to an online reporting format beginning with the FY 2018 reports. In this new template, responses are now mandatory unless marked as optional. If you submit a report without responding to each question, your report may be rejected. You would then be required to fill in the missing answers before resubmitting. Questions that require a narrative response have a limit of 20,000 characters. This report need not be completed in one session and can be opened by multiple users.

For technical assistance, contact HCBHelp@hilltop.umbc.edu.

Q2. Section I - General Info Part 1 - Hospital Identification

Q3. Please confirm the information we have on file about your hospital for FY 2018.

	Is this information correct?		If no, please provide the correct information here:
	Yes	No	
The proper name of your hospital is: UM Capitol Region Health	<input checked="" type="radio"/>	<input type="radio"/>	
Your hospital's ID is: Laurel - 210055, Prince George's 210003	<input type="radio"/>	<input checked="" type="radio"/>	The facility at Laurel is no longer a hospital effective January 1, 2019. It is now a Freestanding Medical Facility. The 210055 CMS CCN was deactivated at the time of conversion. Laurel Medical Center is now under Prince George's CCN, which remains 210003.
Your hospital is part of the hospital system called University of Maryland Medical System.	<input checked="" type="radio"/>	<input type="radio"/>	

Q4. The next two questions ask about the area where your hospital directs its community benefit efforts, called the Community Benefit Service Area. You may find [these community health statistics](#) useful in preparing your responses.

Q5. (Optional) Please describe any other community health statistics that your hospital uses in its community benefit efforts.

Transforming Health in Prince George's County, Maryland: A Public Health Impact Study, University of Maryland School of Public Health, July 2012

Q6. (Optional) Please attach any files containing community health statistics that your hospital uses in its community benefit efforts.

[TransformingHealth.pdf](#)
1.1MB
application/pdf

Q7. Section I - General Info Part 2 - Community Benefit Service Area

Q8. Please select the county or counties located in your hospital's CBSA.

- | | | |
|---|--|--|
| <input type="checkbox"/> Allegany County | <input type="checkbox"/> Charles County | <input checked="" type="checkbox"/> Prince George's County |
| <input checked="" type="checkbox"/> Anne Arundel County | <input type="checkbox"/> Dorchester County | <input type="checkbox"/> Queen Anne's County |
| <input type="checkbox"/> Baltimore City | <input type="checkbox"/> Frederick County | <input type="checkbox"/> Somerset County |
| <input type="checkbox"/> Baltimore County | <input type="checkbox"/> Garrett County | <input type="checkbox"/> St. Mary's County |
| <input type="checkbox"/> Calvert County | <input type="checkbox"/> Harford County | <input type="checkbox"/> Talbot County |

- Caroline County
- Howard County
- Washington County
- Carroll County
- Kent County
- Wicomico County
- Cecil County
- Montgomery County
- Worcester County

Q9. Please check all Allegany County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q10. Please check all Anne Arundel County ZIP codes located in your hospital's CBSA.

- | | | | |
|---|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 20701 | <input type="checkbox"/> 20776 | <input type="checkbox"/> 21062 | <input type="checkbox"/> 21146 |
| <input type="checkbox"/> 20711 | <input type="checkbox"/> 20778 | <input type="checkbox"/> 21076 | <input type="checkbox"/> 21225 |
| <input type="checkbox"/> 20714 | <input type="checkbox"/> 20779 | <input type="checkbox"/> 21077 | <input type="checkbox"/> 21226 |
| <input checked="" type="checkbox"/> 20724 | <input type="checkbox"/> 20794 | <input type="checkbox"/> 21090 | <input type="checkbox"/> 21240 |
| <input type="checkbox"/> 20733 | <input type="checkbox"/> 21012 | <input type="checkbox"/> 21106 | <input type="checkbox"/> 21401 |
| <input type="checkbox"/> 20736 | <input type="checkbox"/> 21032 | <input type="checkbox"/> 21108 | <input type="checkbox"/> 21402 |
| <input type="checkbox"/> 20751 | <input type="checkbox"/> 21035 | <input type="checkbox"/> 21113 | <input type="checkbox"/> 21403 |
| <input type="checkbox"/> 20754 | <input type="checkbox"/> 21037 | <input type="checkbox"/> 21114 | <input type="checkbox"/> 21404 |
| <input type="checkbox"/> 20755 | <input type="checkbox"/> 21054 | <input type="checkbox"/> 21122 | <input type="checkbox"/> 21405 |
| <input type="checkbox"/> 20758 | <input type="checkbox"/> 21056 | <input type="checkbox"/> 21123 | <input type="checkbox"/> 21409 |
| <input type="checkbox"/> 20764 | <input type="checkbox"/> 21060 | <input type="checkbox"/> 21140 | <input type="checkbox"/> 21411 |
| <input type="checkbox"/> 20765 | <input type="checkbox"/> 21061 | <input type="checkbox"/> 21144 | <input type="checkbox"/> 21412 |

Q11. Please check all Baltimore City ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q12. Please check all Baltimore County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q13. Please check all Calvert County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q14. Please check all Caroline County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q15. Please check all Carroll County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q16. Please check all Cecil County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q17. Please check all Charles County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q18. Please check all Dorchester County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q19. Please check all Frederick County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q20. Please check all Garrett County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q21. Please check all Harford County ZIP codes located in your hospital's CBSA.

Q22. Please check all Howard County ZIP codes located in your hospital's CBSA.

- | | | |
|---|--------------------------------|--------------------------------|
| <input type="checkbox"/> 20701 | <input type="checkbox"/> 21041 | <input type="checkbox"/> 21150 |
| <input checked="" type="checkbox"/> 20723 | <input type="checkbox"/> 21042 | <input type="checkbox"/> 21163 |
| <input type="checkbox"/> 20759 | <input type="checkbox"/> 21043 | <input type="checkbox"/> 21723 |
| <input type="checkbox"/> 20763 | <input type="checkbox"/> 21044 | <input type="checkbox"/> 21737 |
| <input type="checkbox"/> 20777 | <input type="checkbox"/> 21045 | <input type="checkbox"/> 21738 |
| <input type="checkbox"/> 20794 | <input type="checkbox"/> 21046 | <input type="checkbox"/> 21765 |
| <input type="checkbox"/> 20833 | <input type="checkbox"/> 21075 | <input type="checkbox"/> 21771 |
| <input type="checkbox"/> 21029 | <input type="checkbox"/> 21076 | <input type="checkbox"/> 21784 |
| <input type="checkbox"/> 21036 | <input type="checkbox"/> 21104 | <input type="checkbox"/> 21794 |

Q23. Please check all Kent County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q24. Please check all Montgomery County ZIP codes located in your hospital's CBSA.

- | | | | | | |
|--------------------------------|--------------------------------|--------------------------------|--------------------------------|---|--------------------------------|
| <input type="checkbox"/> 20058 | <input type="checkbox"/> 20824 | <input type="checkbox"/> 20850 | <input type="checkbox"/> 20872 | <input type="checkbox"/> 20891 | <input type="checkbox"/> 20907 |
| <input type="checkbox"/> 20207 | <input type="checkbox"/> 20825 | <input type="checkbox"/> 20851 | <input type="checkbox"/> 20874 | <input type="checkbox"/> 20892 | <input type="checkbox"/> 20910 |
| <input type="checkbox"/> 20707 | <input type="checkbox"/> 20827 | <input type="checkbox"/> 20852 | <input type="checkbox"/> 20875 | <input type="checkbox"/> 20894 | <input type="checkbox"/> 20911 |
| <input type="checkbox"/> 20777 | <input type="checkbox"/> 20830 | <input type="checkbox"/> 20853 | <input type="checkbox"/> 20876 | <input type="checkbox"/> 20895 | <input type="checkbox"/> 20912 |
| <input type="checkbox"/> 20783 | <input type="checkbox"/> 20832 | <input type="checkbox"/> 20854 | <input type="checkbox"/> 20877 | <input type="checkbox"/> 20896 | <input type="checkbox"/> 20913 |
| <input type="checkbox"/> 20787 | <input type="checkbox"/> 20833 | <input type="checkbox"/> 20855 | <input type="checkbox"/> 20878 | <input type="checkbox"/> 20898 | <input type="checkbox"/> 20914 |
| <input type="checkbox"/> 20810 | <input type="checkbox"/> 20837 | <input type="checkbox"/> 20857 | <input type="checkbox"/> 20879 | <input type="checkbox"/> 20899 | <input type="checkbox"/> 20915 |
| <input type="checkbox"/> 20811 | <input type="checkbox"/> 20838 | <input type="checkbox"/> 20859 | <input type="checkbox"/> 20880 | <input type="checkbox"/> 20901 | <input type="checkbox"/> 20916 |
| <input type="checkbox"/> 20812 | <input type="checkbox"/> 20839 | <input type="checkbox"/> 20860 | <input type="checkbox"/> 20882 | <input type="checkbox"/> 20902 | <input type="checkbox"/> 20918 |
| <input type="checkbox"/> 20814 | <input type="checkbox"/> 20841 | <input type="checkbox"/> 20861 | <input type="checkbox"/> 20883 | <input type="checkbox"/> 20903 | <input type="checkbox"/> 20993 |
| <input type="checkbox"/> 20815 | <input type="checkbox"/> 20842 | <input type="checkbox"/> 20862 | <input type="checkbox"/> 20884 | <input checked="" type="checkbox"/> 20904 | <input type="checkbox"/> 21770 |
| <input type="checkbox"/> 20816 | <input type="checkbox"/> 20847 | <input type="checkbox"/> 20866 | <input type="checkbox"/> 20885 | <input type="checkbox"/> 20905 | <input type="checkbox"/> 21771 |
| <input type="checkbox"/> 20817 | <input type="checkbox"/> 20848 | <input type="checkbox"/> 20868 | <input type="checkbox"/> 20886 | <input type="checkbox"/> 20906 | <input type="checkbox"/> 21797 |
| <input type="checkbox"/> 20818 | <input type="checkbox"/> 20849 | <input type="checkbox"/> 20871 | <input type="checkbox"/> 20889 | | |

Q25. Please check all Prince George's County ZIP codes located in your hospital's CBSA.

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> 20233 | <input checked="" type="checkbox"/> 20710 | <input checked="" type="checkbox"/> 20742 | <input checked="" type="checkbox"/> 20772 |
| <input type="checkbox"/> 20389 | <input checked="" type="checkbox"/> 20712 | <input checked="" type="checkbox"/> 20743 | <input type="checkbox"/> 20773 |
| <input type="checkbox"/> 20395 | <input checked="" type="checkbox"/> 20715 | <input checked="" type="checkbox"/> 20744 | <input checked="" type="checkbox"/> 20774 |
| <input type="checkbox"/> 20588 | <input checked="" type="checkbox"/> 20716 | <input checked="" type="checkbox"/> 20745 | <input type="checkbox"/> 20775 |
| <input type="checkbox"/> 20599 | <input type="checkbox"/> 20717 | <input checked="" type="checkbox"/> 20746 | <input checked="" type="checkbox"/> 20781 |
| <input type="checkbox"/> 20601 | <input type="checkbox"/> 20718 | <input checked="" type="checkbox"/> 20747 | <input checked="" type="checkbox"/> 20782 |
| <input type="checkbox"/> 20607 | <input checked="" type="checkbox"/> 20720 | <input checked="" type="checkbox"/> 20748 | <input checked="" type="checkbox"/> 20783 |
| <input type="checkbox"/> 20608 | <input checked="" type="checkbox"/> 20721 | <input type="checkbox"/> 20749 | <input checked="" type="checkbox"/> 20784 |
| <input type="checkbox"/> 20613 | <input checked="" type="checkbox"/> 20722 | <input type="checkbox"/> 20750 | <input checked="" type="checkbox"/> 20785 |
| <input type="checkbox"/> 20616 | <input type="checkbox"/> 20724 | <input type="checkbox"/> 20752 | <input type="checkbox"/> 20790 |
| <input type="checkbox"/> 20623 | <input type="checkbox"/> 20725 | <input type="checkbox"/> 20753 | <input type="checkbox"/> 20791 |
| <input type="checkbox"/> 20703 | <input type="checkbox"/> 20726 | <input type="checkbox"/> 20757 | <input type="checkbox"/> 20792 |
| <input type="checkbox"/> 20704 | <input type="checkbox"/> 20731 | <input type="checkbox"/> 20762 | <input type="checkbox"/> 20799 |
| <input checked="" type="checkbox"/> 20705 | <input checked="" type="checkbox"/> 20735 | <input type="checkbox"/> 20768 | <input type="checkbox"/> 20866 |
| <input checked="" type="checkbox"/> 20706 | <input checked="" type="checkbox"/> 20737 | <input type="checkbox"/> 20769 | <input type="checkbox"/> 20903 |
| <input checked="" type="checkbox"/> 20707 | <input type="checkbox"/> 20738 | <input checked="" type="checkbox"/> 20770 | <input checked="" type="checkbox"/> 20904 |
| <input checked="" type="checkbox"/> 20708 | <input checked="" type="checkbox"/> 20740 | <input type="checkbox"/> 20771 | <input type="checkbox"/> 20912 |
| <input type="checkbox"/> 20709 | <input type="checkbox"/> 20741 | | |

Q26. Please check all Queen Anne's County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q27. Please check all Somerset County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q28. Please check all St. Mary's County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q29. Please check all Talbot County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q30. Please check all Washington County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q31. Please check all Wicomico County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q32. Please check all Worcester County ZIP codes located in your hospital's CBSA.

This question was not displayed to the respondent.

Q33. How did your hospital identify its CBSA?

Based on ZIP codes in your Financial Assistance Policy. Please describe.

Based on ZIP codes in your global budget revenue agreement. Please describe.

Based on patterns of utilization. Please describe.

UM Prince George's Hospital Center and UM Laurel Medical Center primary and secondary service areas, based on Patient Care analyst data.

Other. Please describe.

The CBSA also, includes zip codes/geographic areas where the most vulnerable populations (including but not necessarily limited to medically underserved, low-income, and minority populations) reside, based on the SocioNeeds Index, updated for 2019. The 2019 SocioNeeds Index, created by Conduent Healthy Communities Institute, is a measure of socioeconomic need that is correlated with poor health outcomes. The SocioNeeds Index is calculated by Conduent Healthy Communities Institute using data from Claritas

Q34. (Optional) Is there any other information about your hospital's Community Benefit Service Area that you would like to provide?

Portions of Prince George's County Maryland border the District of Columbia- wards 7 and 8. Data provided based on Patient Care Analyst indicate portions of the district that border PGC are also included in both our primary and secondary service areas. These zip codes include: 20019, 20020, 20032, 20002.

Q35. Section I - General Info Part 3 - Other Hospital Info

Q36. Provide a link to your hospital's mission statement.

<https://www.umms.org/capital/about/mission-vision-values>

Q37. Is your hospital an academic medical center?

- Yes
- No

Q38. (Optional) Is there any other information about your hospital that you would like to provide?

UNIVERSITY OF MARYLAND CAPITAL REGION HEALTH University of Maryland Capital Region Health (formerly Dimensions Healthcare System), is the largest not-for-profit provider of healthcare services in Prince George's County, Maryland. UM Capital includes University of Maryland Prince George's Hospital Center, Cheverly, MD; University of Maryland Laurel Medical Center, Laurel, Maryland; and University of Maryland Bowie Health Center, Bowie, Maryland. University of Maryland Capital Region Health is wholly owned by the University of Maryland Medical System. Leadership: Chairman, UM Capital Board of Directors – Judge Alexander Williams President & CEO (Interim), UM Capital Region Health, Senior Vice President and Chief Medical Officer – Dr. Joseph L. Wright, MD, MPH, FAAP Senior Vice President Strategic Planning & Business Development - Jeffrey L. Johnson, MBA, FACHE Chief Nurse Officer – Katie Boston-Leary, PHD, MBA, MHA Senior Vice President Clinical Integration and Ambulatory Services - Tiffany Sullivan, MPH UNIVERSITY OF MARYLAND PRINCE GEORGE'S HOSPITAL CENTER: Located in Cheverly, Maryland, University of Maryland Prince George's Hospital Center (UM PGHC) is a private not-for-profit acute care teaching hospital and regional referral center which has been providing quality healthcare services to the southern Maryland region since 1944. Over the past 70 years, University of Maryland Prince George's Hospital Center has grown to become the region's major tertiary care center and one of its largest employers. UM PGHC is a member of the University of Maryland Capital Region Health (UM Capital), formerly Dimensions Healthcare System. Location: 3001 Hospital Drive, Cheverly, Maryland 20785 Facility type: Acute care teaching hospital and regional referral center Specialty services: A comprehensive range of inpatient and outpatient medical and surgical services including: • Emergency and trauma services (designated Level II regional trauma center for southern Maryland) • Critical care services • Cardiovascular Care Center (comprehensive cardiac care – only program of its kind in the County) • Open-heart surgery • Two cardiac catheterization labs (diagnostic & therapeutic cardiac cath, cardiac stenting) • 10 bed CCU and 66 telemetry beds • Cardiac diagnostic evaluation center • Cardiac rehabilitation • Laboratory and pathology testing • Medical and surgical services (virtually all adult specialties performed) • Maternal and child health • Labor and delivery postpartum units • Perinatal diagnostic center • Diabetes and pregnancy program • Neonatal intensive care unit (designated Level III, regional center for Prince George's County) • Inpatient pediatric unit • Chronic pediatric inpatient unit and outpatient program Other specialty services: • Ambulatory and outpatient services • Surgical short-stay center • Special procedures • Diabetes treatment center • Mt. Washington Pediatric Hospital at UM Prince George's Hospital Center • University of Maryland Bowie Health Center • University of Maryland Capital Region Surgery Center (a freestanding ambulatory surgery center located on the University of Maryland Bowie Health Center campus) • University of Maryland, Capital Region Health Medical Group, Bowie, Cheverly, Suitland and Laurel Maryland. • Behavioral health services • Inpatient psychiatric unit for adults • Hospital-based sexual assault center • Partial hospitalization program • Emergency psychiatric services • Domestic Violence and Sexual Assault Center • Graduate medical education, internal medicine and family medicine residency programs Facilities: • The Surgical Services and Critical Care Center Pavilion houses a 24 bed intensive care unit, 10 operating suites, a 15 bay Post Anesthesia Care Unit, 11 private room Short Stay Center, two state-of-the-art cardiac catheterization labs with 10 Transcare bays and 2 endoscopy suites with 9 recovery bays. • The UM PGHC Emergency Department includes 15 acute care rooms, 4 hall area beds, a 4 bed resuscitation area, 2 isolation rooms, 2 dedicated trauma rooms, an 8 bed ambulatory emergency area, with 2 minor trauma/suture rooms and a designated ENT room, point-of-care testing, a 16-bed distinct observation unit and a blood bank. • UM PGHC also has a licensed, freestanding emergency department, located on the Bowie Health Center campus. The emergency department includes 27 beds, including two cardiac rooms, 2 suture rooms and an isolation room. The department also has a stat lab, and radiology services, including CT and ultrasound. UNIVERSITY OF MARYLAND LAUREL MEDICAL CENTER: Effective January 1, 2019 the Laurel facility transitioned from a full service hospital to a not-for-profit, free standing medical facility serving residents of Prince George's County and portions of Anne Arundel, Howard, and Montgomery counties. The Laurel Medical Center is now under UM Prince George's Hospital's CMS Certification Number (CCN). Leadership: Site Executive & Vice President Medical Affairs, UM LRH (Interim) – Trudy Hall, M.D. Location: 7300 Van Dusen Road, Laurel, Maryland 20707 Facility type: Free-standing Medical Facility Services: University of Maryland Laurel Medical Center provides a comprehensive range of outpatient services including: Behavioral Health Services (outpatient partial hospitalization program) Emergency Services (24-hour emergency care) Observation care (24-48 hour length of stay) Wound Care & Hyperbaric Medicine Center (wound treatment and healing services) Facilities: The emergency services has 27 total rooms (ambulatory care) that includes one resuscitation/trauma room; 4 behavioral health rooms, 4 isolation rooms and 3 more that can be converted to negative pressure isolation rooms; POC (Point of Care) lab, and blood bank located in the main lab. Surgical services houses 2 operating suites and 2 procedure rooms/endoscopy suites.

Q39. (Optional) Please upload any supplemental information that you would like to provide.

Q40. Section II - CHNA Part 1 - Timing & Format

Q41. Within the past three fiscal years, has your hospital conducted a CHNA that conforms to IRS requirements?

- Yes
- No

Q42. Please explain why your hospital has not conducted a CHNA that conforms to IRS requirements, as well as your hospital's plan and timeframe for completing a CHNA.

This question was not displayed to the respondent.

Q43. When was your hospital's most recent CHNA completed? (MM/DD/YYYY)

06/1/2019

Q44. Please provide a link to your hospital's most recently completed CHNA.

<https://www.umms.org/capital/~media/files/um-capital/community/community-health-assessment-2019.pdf?upd=20190702140715&la=en&hash=894B8FCED4641B36B25846EF26B995663AA51186>

Q45. Did you make your CHNA available in other formats, languages, or media?

- Yes
- No

Q46. Please describe the other formats in which you made your CHNA available.

Printed copies are provided on demand.

Q47. Section II - CHNA Part 2 - Participants

Q48. Please use the table below to tell us about the internal participants involved in your most recent CHNA.

	CHNA Activities										Other - If you selected "Other (explain)," please type your explanation below:
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	
CB/ Community Health/Population Health Director (facility level)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
CB/ Community Health/ Population Health Director (system level)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Senior Executives (CEO, CFO, VP, etc.) (facility level)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Senior Executives (CEO, CFO, VP, etc.) (system level)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Board of Directors or Board Committee (facility level)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Board of Directors or Board Committee (system level)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:

	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Member of CHNA Committee	Participated in development of CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Hospital Advisory Board	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Q49. Section II - CHNA Part 2 - Participants (continued)

Q50. Please use the table below to tell us about the external participants involved in your most recent CHNA.

	CHNA Activities										Click to write Column 2
	N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)	Other (explain)	Other - If you selected "Other (explain)," please type your explanation below:
Other Hospitals -- Please list the hospitals here: Doctor's Community Hospital, Fort Washington Medical Center, Medstar Southern Maryland Hospital Center	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Local Health Department -- Please list the Local Health Departments here: Prince George's County Health Department	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Local Health Improvement Coalition -- Please list the LHICs here: Prince George's Health Action Coalition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Maryland Department of Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Maryland Department of Human Resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Maryland Department of Natural Resources

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of the Environment

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of Transportation

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of Education

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Area Agency on Aging -- Please list the agencies here:
Prince George's County Area Agency on Aging

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Local Govt. Organizations -- Please list the organizations here:
Totally Linked Care (TLC)
MarylandSeventh Judicial Circuit of Maryland, Prince George's Department of Family Services, Division on Aging City of Benwyn Heights City of Brentwood Town of Comar Manor City of Mount Rainier
Prince George's Healthcare Alliance
Prince George's Health Department
Family Health Services Prince George's Health Department Behavioral Health
Prince George's Department of Corrections Maryland Dental Action Coalition Prince George's Parks and Recreation Prince George's Department of Social Services MD-National Capital Park and Planning Commission Prince George's County Planning Department Maryland General Assembly Prince George's County Health Connect

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Faith-Based Organizations

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - K-12 -- Please list the schools here:
Prince George's County Public Schools

N/A - Person or Organization was not involved
Member of CHNA Committee
Participated in the development of the CHNA process
Advised on CHNA best practices
Participated in primary data collection
Participated in identifying priority health needs
Participated in identifying community resources to meet health needs
Provided secondary health data
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Colleges and/or Universities -- Please list the schools here:
University of Maryland, Bowie State University

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School of Public Health -- Please list the schools here:
University of Maryland School of Public Health

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Medical School -- Please list the schools here:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Nursing School -- Please list the schools here:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Dental School -- Please list the schools here:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Pharmacy School -- Please list the schools here:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Behavioral Health Organizations -- Please list the organizations here:
Prince George's County Health Department

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Social Service Organizations -- Please list the organizations here:
Friends of the Earth, Independence Now

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Post-Acute Care Facilities -- please list the facilities here:

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Community/Neighborhood Organizations -- Please list the organizations here:

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Consumer/Public Advocacy Organizations - Please list the organizations here:
 Laurel Advocacy and Referral Services, African Women's Cancer Awareness Association, La Clinica del Pueblo, Hope Connections for Cancer Support

N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Other -- If any other people or organizations were involved, please list them here:
 Marys Center, Giant Food, MGM National Harbor, NAMI Prince George's County, Pregnancy Center Konterra Realty, LLC The Bridge center at Adam's House, Langely Park Multi-Service Center CCI Health & Wellness Services Gerald Family Care, PC

N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

N/A - Person or Organization was not involved	Member of CHNA Committee	Participated in the development of the CHNA process	Advised on CHNA best practices	Participated in primary data collection	Participated in identifying priority health needs	Participated in identifying community resources to meet health needs	Provided secondary health data	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Q51. Section II - CHNA Part 3 - Follow-up

Q52. Has your hospital adopted an implementation strategy following its most recent CHNA, as required by the IRS?

- Yes
- No

Q53. Please enter the date on which the implementation strategy was approved by your hospital's governing body.

June 25, 2019

Q54. Please provide a link to your hospital's CHNA implementation strategy.

<https://www.umms.org/capital/community/community-health-needs-assessment-and-implementation-report>

Q55. Please explain why your hospital has not adopted an implementation strategy. Please include whether the hospital has a plan and/or a timeframe for an implementation strategy.

This question was not displayed to the respondent.

Q56. Please select the health needs identified in your most recent CHNA. Select all that apply even if a need was not addressed by a reported initiative.

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Access to Health Services: Health Insurance | <input checked="" type="checkbox"/> Environmental Health | <input checked="" type="checkbox"/> Oral Health |
| <input checked="" type="checkbox"/> Access to Health Services: Practicing PCPs | <input type="checkbox"/> Family Planning | <input checked="" type="checkbox"/> Physical Activity |
| <input checked="" type="checkbox"/> Access to Health Services: Regular PCP Visits | <input checked="" type="checkbox"/> Food Safety | <input checked="" type="checkbox"/> Respiratory Diseases |
| <input checked="" type="checkbox"/> Access to Health Services: ED Wait Times | <input type="checkbox"/> Global Health | <input checked="" type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Access to Health Services: Outpatient Services | <input checked="" type="checkbox"/> Health Communication and Health Information Technology | <input type="checkbox"/> Sleep Health |
| <input checked="" type="checkbox"/> Adolescent Health | <input checked="" type="checkbox"/> Health Literacy | <input checked="" type="checkbox"/> Telehealth |
| <input type="checkbox"/> Arthritis, Osteoporosis, and Chronic Back Conditions | <input checked="" type="checkbox"/> Health-Related Quality of Life & Well-Being | <input checked="" type="checkbox"/> Tobacco Use |
| <input checked="" type="checkbox"/> Behavioral Health, including Mental Health and/or Substance Abuse | <input checked="" type="checkbox"/> Heart Disease and Stroke | <input checked="" type="checkbox"/> Violence Prevention |
| <input checked="" type="checkbox"/> Cancer | <input checked="" type="checkbox"/> HIV | <input type="checkbox"/> Vision |
| <input type="checkbox"/> Children's Health | <input checked="" type="checkbox"/> Immunization and Infectious Diseases | <input type="checkbox"/> Wound Care |
| <input checked="" type="checkbox"/> Chronic Kidney Disease | <input checked="" type="checkbox"/> Injury Prevention | <input checked="" type="checkbox"/> Housing & Homelessness |
| <input checked="" type="checkbox"/> Community Unity | <input checked="" type="checkbox"/> Lesbian, Gay, Bisexual, and Transgender Health | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Dementias, including Alzheimer's Disease | <input checked="" type="checkbox"/> Maternal & Infant Health | <input type="checkbox"/> Unemployment & Poverty |
| <input checked="" type="checkbox"/> Diabetes | <input checked="" type="checkbox"/> Nutrition and Weight Status | <input checked="" type="checkbox"/> Other Social Determinants of Health |

Disability and Health

Older Adults

Other (specify)

Educational and Community-Based Programs

Q57. Please describe how the needs and priorities identified in your most recent CHNA compare with those identified in your previous CHNA.

In 2016, the first inclusive CHA was completed. The Prince George's County Health Department and Hospitals agreed to again work collaboratively to update the 2016 CHNA in 2019. All four hospitals and the Health Department appointed staff to facilitate the 2019 CHA process. The core team began meeting in September 2018 and included leadership from the Prince George's Healthcare Action Coalition during the data review and prioritization process. The Health Department staff led the CHNA process for a second time, in developing the data collection tools and analyzing the results with input from the hospital representatives. In 2019, The process again included: •A community resident survey available in English, Spanish, and French distributed by the hospitals and health department; •Secondary data analyses that included the county demographics and population description through socioeconomic indicators, and a comprehensive health indicator profile; •Hospital Service Profiles to detail the residents served by the core team; •A community expert survey and key informant interviews; •A prioritization process that included the Core Team and Prince George's Healthcare Action Coalition leadership. After initially reviewing the data collection results (the data reviewed is available in the Prioritization Process section of the CHNA), 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 it is realistic for such substantial priorities to require more than three years to show improvement, as a result of the investment of long-term resources to improve the health & well-being of our communities. The 2019 priorities will continue to be: • Social determinants of health • Behavioral health, • Obesity and metabolic syndrome

Q58. (Optional) Please use the box below to provide any other information about your CHNA that you wish to share.

In 2019, UM Capital Region Health again completed a joint Community Health Needs Assessment (CHNA) for Fiscal Years 2020- 2023 in collaboration with other area hospitals (Doctor's Community Hospital, Fort Washington Medical Center, MedStar Southern Maryland Hospital Center). The joint community health needs assessment process was led by the Prince George's County Health Department. The CHNA stakeholders engaged in a collaborative process to conduct a comprehensive community health needs assessment process in Prince George's County, Maryland that complies with the CHNA requirements as set forth by the Internal Revenue Code and Public Health Department certification requirements. The process involves the collection and analysis of valid data (quantitative and qualitative) to ascertain residents' health status, identify trends in health problems, as well as the social and economic determinants impacting the health of Prince George's County residents. A written report of the community health needs assessment process and findings was prepared and presented in May of 2019. The report included recommendations and key findings that were not much different than what was found to be the priorities in the 2016 CHNA. Drivers of Poor Health Outcomes Include • Social determinants of health drive many of our health disparities. o Poverty, food insecurity, access to healthy food, affordable housing, employment, lack of educational attainment, inadequate financial resources, access to care, and a disparate built environment result in poorer health outcomes o Growth in the county, while benefiting some, may harm others. For example, in just 3 years the income needed for an efficiency rental has grown by over \$13,000. However, the median renter household income has grown by only \$3,000, potentially making affordable housing less attainable for some residents. o Education was a consistent concern for residents and key informants; resident surveys ranked good schools as the third most important aspect of a healthy community. There is notable disparity in high school graduation rates, with only 66% of Hispanic students graduating compared to 85% and higher for other groups. o Resources available in communities with greater needs continue to be perceived as lower quality, such as healthcare and fresh food. • Access to health insurance through the Affordable Care Act has not helped everyone. o Many residents still lack health insurance (some have not enrolled, some are not eligible). o Those with health insurance struggle to afford healthcare (such as co-pays, high premiums, and deductibles) and prescriptions, and difficulty accessing care due to transportation challenges. • Residents lack knowledge of or how to use available resources. o The healthcare system is challenging to navigate, and providers and support services need more coordination. o There are services available, but they are perceived as underutilized because residents do not know how to locate or use them. o Low literacy and low health literacy contribute to poor outcomes. • The county does not have enough healthcare providers to serve the residents. o There is a lack of behavioral health providers, dentists, specialists, and primary care providers (also noted in the 2015 Primary Healthcare Strategic Plan for the county3). While there has been some growth in providers, it has struggled to keep pace with the population growth and has been unable address deficits. • There is a perception that the county lacks quality healthcare providers. o Surrounding jurisdictions are perceived to have better quality providers; residents with resources are perceived as often traveling outside the county for healthcare needs. o There is a lack of culturally competent and bilingual providers. • Lack of ability to access healthcare providers o There are limited transportation options available, and the supply does not meet the need. There is also a lack of transportation for urgent but nonemergency needs that cannot be scheduled in advance. o The distribution of providers is uneven in the county; some areas have a high geographic concentration of providers, while other areas have very few or no providers available nearby. • Disparities in health outcomes are complicated o Even though Black, non-Hispanic residents are more likely to be screened for cancer, they still have higher cancer mortality rates. The infant mortality rate for Black, non-Hispanic residents is significantly higher compared to other race/ethnic groups. It is challenging to determine how elements such as stress, culture, structural racism, and implicit bias contribute to health disparities along with the social determinants of health, healthcare access, and healthcare utilization, for example.

Q59. (Optional) Please attach any files containing information regarding your CHNA that you wish to share.

Q60. Section III - CB Administration Part 1 - Participants

Q61. Please use the table below to tell us about how internal staff members were involved in your hospital's community benefit activities during the fiscal year.

	Activities										Other (explain)	
	N/A - Person or Organization was not Involved	N/A - Position or Department does not exist	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)		
CB/ Community Health/Population Health Director (facility level)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Other - If you selected "Other (explain)," please type your explanation below:
CB/ Community Health/ Population Health Director (system level)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other - If you selected "Other (explain)," please type your explanation below:
Senior Executives (CEO, CFO, VP, etc.) (facility level)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of Natural Resources

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of the Environment

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of Transportation

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Maryland Department of Education

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Area Agency on Aging -- Please list the agencies here:
Prince George County Area Agency on Aging

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Local Govt. Organizations -- Please list the organizations here:
Maryland National Capital Parks and Planning, Prince George's County Economic Development Corporation, Prince George's County Health Department, Prince George's County Department of Social Services, Prince George's County Public Schools, Prince George's County Fire/EMS

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

Faith-Based Organizations

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - K-12 -- Please list the schools here:
Bladensburg High School, Potomac High School, Laurel High School, Parkdale High School, Fairmont Heights High School

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Colleges and/or Universities -- Please list the schools here:
University of Maryland, Bowie State University, Prince George's Community College

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School of Public Health -- Please list the schools here:
University of Maryland School of Public Health

N/A - Person or Organization was not involved
Selecting health needs that will be targeted
Selecting the initiatives that will be supported
Determining how to evaluate the impact of initiatives
Providing funding for CB activities
Allocating budgets for individual initiatives
Delivering CB initiatives
Evaluating the outcome of CB initiatives
Other (explain)

Other - If you selected "Other (explain)," please type your explanation below:

School - Medical School -- Please list the schools here:
Ross University School of Medicine

Other - If you selected "Other (explain)," please type your explanation below:

School - Nursing School -- Please list the schools here:
Bowie State University , Prince George's Community College, University of Maryland

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

School - Dental School -- Please list the schools here:

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

School - Pharmacy School -- Please list the schools here:
University of Maryland School of Pharmacy

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Behavioral Health Organizations -- Please list the organizations here:
Prince George's County Health Department Behavioral Health

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Social Service Organizations -- Please list the organizations here:
March of Dimes, Access to Wholistic and Productive Living Institute, United Communities Against Poverty, Laurel Advocacy and Referral Services, Salvation Army, La Union Multi-Service Center

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Post-Acute Care Facilities -- please list the facilities here:

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Community/Neighborhood Organizations -- Please list the organizations here:
Access to Wholistic and Productive Living Institute

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Consumer/Public Advocacy Organizations - Please list the organizations here:
Prince George's County Chamber of Commerce

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Other -- If any other people or organizations were involved, please list them here:

N/A - Person or Organization was not involved	Selecting health needs that will be targeted	Selecting the initiatives that will be supported	Determining how to evaluate the impact of initiatives	Providing funding for CB activities	Allocating budgets for individual initiatives	Delivering CB initiatives	Evaluating the outcome of CB initiatives	Other (explain)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other - If you selected "Other (explain)," please type your explanation below:

Q64. Section III - CB Administration Part 2 - Process & Governance

Q65. Does your hospital conduct an internal audit of the annual community benefit financial spreadsheet? Select all that apply.

- Yes, by the hospital's staff
- Yes, by the hospital system's staff
- Yes, by a third-party auditor
- No

Q66. Does your hospital conduct an internal audit of the community benefit narrative?

- Yes
- No

Q67. Please describe the community benefit narrative audit process.

The community benefit narrative is prepared by the executive in charge of community benefit at UM Capital Region Health. The narrative is then submitted for review and approval to the UM Capital Region Health President and CEO and the University of Maryland Medical System Senior Vice President, Government, Regulatory and Community Health. After review, the community benefit narrative is presented to the Board of Directors for review and approval. Once approved by the Board, the community benefit narrative is final and approved for submission.

Q68. Does the hospital's board review and approve the annual community benefit financial spreadsheet?

- Yes
- No

Q69. Please explain:

This question was not displayed to the respondent.

Q70. Does the hospital's board review and approve the annual community benefit narrative report?

- Yes
- No

Q71. Please explain:

This question was not displayed to the respondent.

Q72. Does your hospital include community benefit planning and investments in its internal strategic plan?

- Yes
- No

Q73. Please describe how community benefit planning and investments are included in your hospital's internal strategic plan.

UM Capital Region Health is in the process of developing its new multi-year strategic plan. With the installation of a new Board of Directors in January 2019, the process of establishing a new strategic plan recently started. The new strategic plan will guide UM Capital on how to move forward in its desire to improve the health status of its service area. However the mission, vision and core strategies remain the same until the new plan is developed. UM Capital began implementing an organizational Annual Operating Plan in Fiscal Year 2019 with the goal of providing the institution with a set of guiding performance indicators. The FY 20 Annual Operating Plan includes 5 different Pillars of strategic performance improvement: 1.) Quality 2.) Integration 3.) Market 4.) Workforce and 5.) Finance. Each pillar consists of an executive leader and contains a specific set of performance metrics. The implementation of the FY 20-23 community health implementation plan, is housed within the Integration pillar. This pillar is under the leadership of the Senior Vice President of Ambulatory Care and Integration— the population health management arm of UM Capital Region Health. Furthermore, the development of the FY 20-23 community health implementation plan included a committee of physicians, nurses, and administrators, from a steering body, to determine the internal community health priorities, strategies, and tactics aligned with the Annual Operating Plan and overall University of Maryland Medical System strategic initiatives.

Q74. (Optional) If available, please provide a link to your hospital's strategic plan.

Q75. (Optional) Is there any other information about your hospital's community benefit administration and external collaboration that you would like to provide?

Q76. (Optional) Please attach any files containing information regarding your hospital's community benefit administration and external collaboration.

[UM Capital Region FY20 Annual Operation Plan Graphic.pdf](#)

349.3KB
application/pdf

Q77. Based on the implementation strategy developed through the CHNA process, please describe *three* ongoing, multi-year programs and initiatives undertaken by your hospital to address community health needs during the fiscal year.

Q78. Section IV - CB Initiatives Part 1 - Initiative 1

Q79. Name of initiative.

Domestic Violence and Sexual Assault

Q80. Does this initiative address a community health need that was identified in your most recently completed CHNA?

- Yes
 No

Q81. In your most recently completed CHNA, the following community health needs were identified:

Access to Health Services: Health Insurance, Access to Health Services: Practicing PCPs, Access to Health Services: Regular PCP Visits, Access to Health Services: ED Wait Times, Adolescent Health, Behavioral Health, including Mental Health and/or Substance Abuse, Cancer, Chronic Kidney Disease, Community Unity, Diabetes, Educational and Community-Based Programs, Environmental Health, Food Safety, Health Communication and Health Information Technology, Health Literacy, Health-Related Quality of Life & Well-Being, Heart Disease and Stroke, HIV, Immunization and Infectious Diseases, Injury Prevention, Lesbian, Gay, Bisexual, and Transgender Health, Maternal & Infant Health, Nutrition and Weight Status, Older Adults, Oral Health, Physical Activity, Respiratory Diseases, Sexually Transmitted Diseases, Telehealth, Tobacco Use, Violence Prevention, Housing & Homelessness, Other Social Determinants of Health

Other:

Using the checkboxes below, select the needs that appear in the list above that were addressed by this initiative.

- | | |
|---|--|
| <input type="checkbox"/> Access to Health Services: Health Insurance | <input checked="" type="checkbox"/> Heart Disease and Stroke |
| <input type="checkbox"/> Access to Health Services: Practicing PCPs | <input checked="" type="checkbox"/> HIV |
| <input type="checkbox"/> Access to Health Services: Regular PCP Visits | <input type="checkbox"/> Immunization and Infectious Diseases |
| <input type="checkbox"/> Access to Health Services: ED Wait Times | <input checked="" type="checkbox"/> Injury Prevention |
| <input type="checkbox"/> Access to Health Services: Outpatient Services | <input checked="" type="checkbox"/> Lesbian, Gay, Bisexual, and Transgender Health |
| <input type="checkbox"/> Adolescent Health | <input checked="" type="checkbox"/> Maternal and Infant Health |
| <input type="checkbox"/> Arthritis, Osteoporosis, and Chronic Back Conditions | <input type="checkbox"/> Nutrition and Weight Status |
| <input checked="" type="checkbox"/> Behavioral Health, including Mental Health and/or Substance Abuse | <input type="checkbox"/> Older Adults |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Oral Health |
| <input type="checkbox"/> Children's Health | <input type="checkbox"/> Physical Activity |
| <input type="checkbox"/> Chronic Kidney Disease | <input type="checkbox"/> Respiratory Diseases |
| <input type="checkbox"/> Community Unity | <input checked="" type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Dementias, including Alzheimer's Disease | <input type="checkbox"/> Sleep Health |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Disability and Health | <input type="checkbox"/> Tobacco Use |
| <input checked="" type="checkbox"/> Educational and Community-Based Programs | <input checked="" type="checkbox"/> Violence Prevention |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Vision |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Wound Care |
| <input type="checkbox"/> Food Safety | <input checked="" type="checkbox"/> Housing & Homelessness |
| <input checked="" type="checkbox"/> Global Health | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Health Communication and Health Information Technology | <input type="checkbox"/> Unemployment & Poverty |
| <input type="checkbox"/> Health Literacy | <input type="checkbox"/> Other Social Determinants of Health |
| <input checked="" type="checkbox"/> Health-Related Quality of Life & Well-Being | <input checked="" type="checkbox"/> Other (specify) Human Trafficking, Survivors of Trauma, Sexual Abuse |

Q82. When did this initiative begin?

For more than 45 years the Domestic Violence and Sexual Assault Center has existed as the certified rape crisis center for Prince George's County. In 2011 we became a hospital based domestic violence program and instituted a screening and consultation process for all patients.

Q83. Does this initiative have an anticipated end date?

- No, the initiative has no anticipated end date.
- The initiative will end on a specific end date. Please specify the date.
- The initiative will end when a community or population health measure reaches a target value. Please describe.

- The initiative will end when a clinical measure in the hospital reaches a target value. Please describe.

- The initiative will end when external grant money to support the initiative runs out. Please explain.

- The initiative will end when a contract or agreement with a partner expires. Please explain.

- Other. Please explain.

Q84. Please describe the population this initiative targets (e.g. diagnosis, age, insurance status, etc.).

The target population includes all Prince George's County residences, specifically targeting undeserved populations such as immigrants and refugees, mentally and physically disabled, and persons who identify as LGBTQ. In addition, the Domestic Violence and Sexual Assault program focuses on providing trauma informed care; targeting survivors of trauma (physical & emotional) victims of human trafficking, sexual abuse as well as those who subsequently are at an increased risk of contracting HIV.

Q85. Enter the estimated number of people this initiative targets.

580,371

Q86. How many people did this initiative reach during the fiscal year?

4,000

Q87. What category(ies) of intervention best fits this initiative? Select all that apply.

- Chronic condition-based intervention: treatment intervention
- Chronic condition-based intervention: prevention intervention
- Acute condition-based intervention: treatment intervention
- Acute condition-based intervention: prevention intervention
- Condition-agnostic treatment intervention

Social determinants of health intervention

Community engagement intervention

Other. Please specify.

Q88. Did you work with other individuals, groups, or organizations to deliver this initiative?

Yes. Please describe who was involved in this initiative.

Prince George's County Family Justice Center
Maryland National Capital Park Police
Prince George's County Sheriff's Department
Prince George's County Police
University of Maryland College Park CARE Center
Bowie State University Wellness Center
Prince George's County Community College
Joint Base Andrews Air Force Base
Prince George's County Department of Social Services Child Advocacy Center
Prince George's County Department of Housing and Community Development

No.

Q89. Please describe the primary objective of the initiative.

The objective of DV/SAC is to provide trauma informed response care to respond to the needs of survivors of sexual and domestic violence and exploitation and provide resources and education that promote a safer community.

Q90. Please describe how the initiative is delivered.

• 24/7 hotline • Victim Advocates and Crisis Counselors who provide medical accompaniment to navigate through the medical treatment and forensic exams, as well as conduct case management, safety planning, and accompany to court proceedings. • Health Fairs, Schools, Churches, and other community activities • Community partnerships such as the Prince George's County Family Justice Center where we provide an on-site counselor and exams 20 hours per week. • Partner with HIV Program at Health Fairs and other events to also screen for possible victims of domestic and sexual violence and human trafficking. • Forensic Nurse Examiners (FNE) who have specialized training and are certified to collect evidence for criminal cases and provide critical medical treatment to victims of sexual and domestic violence • Providing case management and life skills training to survivors.

Q91. Based on what kind of evidence is the success or effectiveness of this initiative evaluated? Explain all that apply.

- Count of participants/encounters
- Other process/implementation measures (e.g. number of items distributed)
- Surveys of participants
- Biophysical health indicators
- Assessment of environmental change
- Impact on policy change
- Effects on healthcare utilization or cost
- Assessment of workforce development
- Other

Q92. Please describe any observed outcome(s) of the initiative (i.e., not intended outcomes).

•Counseling clients report reduced trauma symptoms and better quality of life. •Clients report feeling better informed about their rights as a victim. •Clients report feeling more safe as a result of advocacy support and receiving information regarding their medical condition, the judicial process, and resources that are available. •Participants and attendees of community education events and professional training report having learned more about the law, victim's rights, how trauma impacts a victim's responses. •Attendees report learning new information that they would use in appropriate circumstances such as techniques for bystander intervention, recognizing signs of abuse, and understanding and respecting the importance of consent.

Q93. Please describe how the outcome(s) of the initiative addresses community health needs.

This initiative addresses community health needs by responding to a broad spectrum of needs as it relates to Trauma by adopting a holistic approach, providing education, prevention and treatment for survivors of trauma. Components of the initiative include, identifying victims of Domestic Violence, Violence prevention, Survivors of Trauma, Human Trafficking, Sexual Abuse and the impact it has on one's behaviors. In addition, the 2019 CHNA has indicated in 2017 Prince George's County had the second highest rate of HIV diagnoses (41.90 per 100,000 population) in the State after Baltimore City. The initiative works in partnership with the UM Capital HIV/HEP C Program to identify individuals who are at an increased risk of contracting HIV due to risky sexual behaviors. In addition, due to the complexities of the Domestic Violence and Sexual assault program and the level of outreach required to reach those who are at risk, there is a great deal of partnership and community collaborations required to reach those most in need (as outlined above). Thus, this initiative demonstrates the success of community partnerships and the impact meaningful collaborations can have on the communities we serve, as recommended in both the 2016 and 2019 CHNA Statistics reported in the 2019 CHNA as it relates to Domestic Violence/Violence: There were 2,949 violent crimes (includes homicide, rape, robbery, and aggravated assault) in 2017, and 93 residents in the county died by homicide (MD Vital Statistics). In 2017, there were 1,711 reports of domestic violence in the county, and from July 2016 to June 2017 there were 5 domestic violence-related deaths. (Maryland Network Against Domestic Violence). The county's age-adjusted death rate due to homicide in 2017 was 11.6, compared to the state overall at 10.2 and the U.S. at 6.0 per 100,000 population. The county's violent crime rate in 2017 was 385.3, below the state rate of 481.9 per 100,000.

Q94. What was the total cost to the hospital of this initiative in FY 2018? Please list hospital funds and grant funds separately.

Hospital: \$315,054 Grant Funds: \$773,927

Q95. (Optional) Supplemental information for this initiative.

Q96. Section IV - CB Initiatives Part 2 - Initiative 2

Q97. Name of initiative.

UM Capital Region Women's Health Specialty Services (Mama and Baby Bus Program)

Q98. Does this initiative address a need identified in your most recently completed CHNA?

- Yes
 No

Q99. In your most recently completed CHNA, the following community health needs were identified:

Access to Health Services: Health Insurance, Access to Health Services: Practicing PCPs, Access to Health Services: Regular PCP Visits, Access to Health Services: ED Wait Times, Adolescent Health, Behavioral Health, including Mental Health and/or Substance Abuse, Cancer, Chronic Kidney Disease, Community Unity, Diabetes, Educational and Community-Based Programs, Environmental Health, Food Safety, Health Communication and Health Information Technology, Health Literacy, Health-Related Quality of Life & Well-Being, Heart Disease and Stroke, HIV, Immunization and Infectious Diseases, Injury Prevention, Lesbian, Gay, Bisexual, and Transgender Health, Maternal & Infant Health, Nutrition and Weight Status, Older Adults, Oral Health, Physical Activity, Respiratory Diseases, Sexually Transmitted Diseases, Telehealth, Tobacco Use, Violence Prevention, Housing & Homelessness, Other Social Determinants of Health
Other:

Using the checkboxes below, select the needs that appear in the list above that were addressed by this initiative.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Access to Health Services: Health Insurance | <input type="checkbox"/> Heart Disease and Stroke |
| <input checked="" type="checkbox"/> Access to Health Services: Practicing PCPs | <input checked="" type="checkbox"/> HIV |
| <input checked="" type="checkbox"/> Access to Health Services: Regular PCP Visits | <input type="checkbox"/> Immunization and Infectious Diseases |
| <input type="checkbox"/> Access to Health Services: ED Wait Times | <input type="checkbox"/> Injury Prevention |
| <input type="checkbox"/> Access to Health Services: Outpatient Services | <input type="checkbox"/> Lesbian, Gay, Bisexual, and Transgender Health |
| <input type="checkbox"/> Adolescent Health | <input checked="" type="checkbox"/> Maternal and Infant Health |
| <input type="checkbox"/> Arthritis, Osteoporosis, and Chronic Back Conditions | <input type="checkbox"/> Nutrition and Weight Status |
| <input type="checkbox"/> Behavioral Health, including Mental Health and/or Substance Abuse | <input type="checkbox"/> Older Adults |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Oral Health |
| <input type="checkbox"/> Children's Health | <input type="checkbox"/> Physical Activity |
| <input type="checkbox"/> Chronic Kidney Disease | <input type="checkbox"/> Respiratory Diseases |
| <input type="checkbox"/> Community Unity | <input checked="" type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Dementias, including Alzheimer's Disease | <input type="checkbox"/> Sleep Health |
| <input type="checkbox"/> Diabetes | <input checked="" type="checkbox"/> Telehealth |
| <input type="checkbox"/> Disability and Health | <input type="checkbox"/> Tobacco Use |
| <input checked="" type="checkbox"/> Educational and Community-Based Programs | <input type="checkbox"/> Violence Prevention |

Environmental Health

Family Planning

Food Safety

Global Health

Health Communication and Health Information Technology

Health Literacy

Health-Related Quality of Life & Well-Being

Vision

Wound Care

Housing & Homelessness

Transportation

Unemployment & Poverty

Other Social Determinants of Health

Other (specify)

Q100. When did this initiative begin?

The partnership agreement was executed in winter of 2016 and programming launched in the summer 2017.

Q101. Does this initiative have an anticipated end date?

No, the initiative does not have an anticipated end date.

The initiative will end on a specific end date. Please specify the date.

The initiative will end when a community or population health measure reaches a target value. Please describe.

The initiative will end when a clinical measure in the hospital reaches a target value. Please describe.

The initiative will end when external grant money to support the initiative runs out. Please explain.

UM Capital Region Health signed a three-year partnership agreement to provide health services in Prince George's County through the Mama & Baby Mobile Unit; a traveling mobile health unit owned by the March of Dimes. The three year partnership Grant funds will end December of 2019. However, The March of Dimes fully intends to renew for another grant funding cycle, extending this initiative through the FY 20 fiscal year (July 1st 2019- June 30th, 2020)

The initiative will end when a contract or agreement with a partner expires. Please explain.

Other. Please explain.

Q102. Please describe the population this initiative targets (e.g. diagnosis, age, insurance status, etc.).

Communities in Prince George's County with a poverty rate at 16% or higher based on Community health needs assessment data and input from community partners. The following communities are also home to relatively large proportions of uninsured women and children according the US Census Bureau 2015 data report. o Target areas include: Lahnam (20706), laurel/Beltsville (20707,20787), Fort Washington (20744), Hyattsville/Langley Park (20783,20784,20785). o Disparities in Maternal/Fetal and Infant Health exist in Prince George's County: Mothers who received early pre-natal care is 53.1% in Prince George's compared to 62.2% in Maryland and 77.1% in U.S.; infant Mortality in Prince George's is 8.9/deaths per 1,000 live births compared to 6.7 in Maryland and 5.9 in U.S.

Q103. Enter the estimated number of people this initiative targets.

468,002

Q104. How many people did this initiative reach during the fiscal year?

346

Q105. What category(ies) of intervention best fits this initiative? Select all that apply.

- Chronic condition-based intervention: treatment intervention
- Chronic condition-based intervention: prevention intervention
- Acute condition-based intervention: treatment intervention
- Acute condition-based intervention: prevention intervention
- Condition-agnostic treatment intervention
- Social determinants of health intervention
- Community engagement intervention
- Other. Please specify.

Q106. Did you work with other individuals, groups, or organizations to deliver this initiative?

- Yes. Please describe who was involved in this initiative.
- No.

March of Dimes & the UM Capital Region Health Medical Group as well as a host of community organizations. Key partnering organizations include: Prince George's Community College, Prince George's County Health Department, Laurel Advocacy & Referral Services, La Union Multi-Service Center, United Communities Against Poverty/ Shepherd's Cove, Southern Management Corporation & Oak Ridge Apartments/Townhomes, Crossroads Farmer's Market, Laurel Municipal Center. Maryland National Capital Parking & Planning Commission (Parks & Recreation) and Prince George's Community College as well as a host of churches and community organizations who request the mobile unit's participation in various health screening events throughout the year.

- No.

Q107. Please describe the primary objective of the initiative.

The Mama & Baby Mobile Unit serves as a healthcare access point for under-insured, uninsured and under-served women and children. The Mama & Baby Mobile Unit provides 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.

Q108. Please describe how the initiative is delivered.

The Mobile health services team consists of a variety of providers including a team of Midwives, Family Medicine and Ob/Gyn Providers. Prince George's County partnering organizations also work in collaboration with the mobile health unit to provide community health workers and health insurance navigators to assist patients with aspects related to social determinants of health. The bus midwives manage low-risk patients using protocols developed consistent with recommendations of the American College of Obstetricians and Gynecologists (ACOG), which allow a minimum number of visits in the schedules for prenatal care. This approach accommodates a variety of life challenges the women must overcome to attend regular prenatal care appointments and minimizes the some of the barriers these women may face. For women who are at high and medium risk the bus staff follows the pregnancy management guidelines of the America College of Obstetricians and Gynecologist related to those specific populations. The staff will also employ ACOG's well women visit guidelines. Patients will be routinely screened for HIV per the preventive health guidelines from the Centers of Disease Control and Prevention. Postpartum care will follow ACOG guidelines and address breastfeeding support, level of available social support, depression, physical activity, contraception etc. in addition to the patients overall health. Every attempt will be made to link women to a full range of supportive services provided by the bus's partners so that they and their infants will attain optimal health outcomes.

Q109. Based on what kind of evidence is the success or effectiveness of this initiative evaluated? Explain all that apply.

- Count of participants/encounters

346

-

Other process/implementation measures (e.g. number of items distributed)

Proportion of uninsured patients who are assisted to apply for insurance. Proportion of patients who are screened for depression screening. Proportion of patients who smoke, who are linked to tobacco cessation services. Proportion of patients who receive HIV Testing and counseling Proportion of patients who receive recommended preventive- flu vaccines, mammograms, diabetes and hypertension screenings. Proportions of patients who receive an annual well woman visits. Proportions of patients who are screened for domestic violence Proportion of patients with social support needs Number of women served Proportion of patients referred to dental care Proportion of Infants and children receiving well child visits Proportion of patients who return for follow-up visits

- Surveys of participants
- Biophysical health indicators
- Assessment of environmental change
- Impact on policy change
- Effects on healthcare utilization or cost
- Assessment of workforce development
- Other

Q110. Please describe any observed outcome(s) of the initiative (i.e., not intended outcomes).

346 Patients seen on mobile unit: 24% referred to insurance services and social support needs 30% received a depression screening 5% received smoking cessation referrals 27% received HIV Testing 100% received preventive screenings (Diabetes, Flu vaccines Blood Pressure, breast exams, birth control and pre-conception counseling.) 17% received well women exams Less than 5% referred for dental care. Less than 5 % of Infants and children receiving well child visits

Q111. Please describe how the outcome(s) of the initiative addresses community health needs.

Key findings from the CHNA indicate significant concerns with Maternal and infant health indicators in Prince George's County. The infant mortality rate in the 2016 CHNA for Prince George's county was reported at 6.9%. In the 2019 CHNA it is reported at 8.2; an increase of approximately 19%. The Healthy People (HP) 2020 Goal is 6.3% and the MD State Health Improvement Plan (SHIP) Goal is 6.0%. The percent of low birth weight infants in Prince George's county was reported at 9.2% in the 2016 CHNA compared to the 2019 CHNA that was even higher at 9.8%. The Healthy People 2020 goal is 7.8% and the MD SHIP goal is 8.0% . In addition, the percent of low birth weight infants of black non-Hispanic race has also increased from 11.0% in the 2016 CHNA to 12.1 in the 2019 CHNA. Our UM Capital Community Health Implementation Plan includes specific Maternal and Infant Health Long term goals supporting Maryland SHIP and Healthy People 2020.

Q112. What was the total cost to the hospital of this initiative in FY 2018? Please list hospital funds and grant funds separately.

FY 19 Hospital funds: 222,790.13 March of Dimes Grant Funds:50,000 UM Capital Region Foundation: 100,000

Q113. (Optional) Supplemental information for this initiative.

q114. Section IV - CB Initiatives Part 3 - Initiative 3

Q115. Name of initiative.

HIV Testing Program

Q116. Does this initiative address a need identified in your most recently completed CHNA?

- Yes
- No

q117. In your most recently completed CHNA, the following community health needs were identified:

Access to Health Services: Health Insurance, Access to Health Services: Practicing PCPs, Access to Health Services: Regular PCP Visits, Access to Health Services: ED Wait Times, Adolescent Health, Behavioral Health, including Mental Health and/or Substance Abuse, Cancer, Chronic Kidney Disease, Community Unity, Diabetes, Educational and Community-Based Programs, Environmental Health, Food Safety, Health Communication and Health Information Technology, Health Literacy, Health-Related Quality of Life & Well-Being, Heart Disease and Stroke, HIV, Immunization and Infectious Diseases, Injury Prevention, Lesbian, Gay, Bisexual, and Transgender Health, Maternal & Infant Health, Nutrition and Weight Status, Older Adults, Oral Health, Physical Activity, Respiratory Diseases, Sexually Transmitted Diseases, Telehealth, Tobacco Use, Violence Prevention, Housing & Homelessness, Other Social Determinants of Health
Other:

Using the checkboxes below, select the needs that appear in the list above that were addressed by this initiative.

- | | |
|---|--|
| <input type="checkbox"/> Access to Health Services: Health Insurance | <input type="checkbox"/> Heart Disease and Stroke |
| <input type="checkbox"/> Access to Health Services: Practicing PCPs | <input checked="" type="checkbox"/> HIV |
| <input type="checkbox"/> Access to Health Services: Regular PCP Visits | <input type="checkbox"/> Immunization and Infectious Diseases |
| <input type="checkbox"/> Access to Health Services: ED Wait Times | <input type="checkbox"/> Injury Prevention |
| <input type="checkbox"/> Access to Health Services: Outpatient Services | <input checked="" type="checkbox"/> Lesbian, Gay, Bisexual, and Transgender Health |
| <input checked="" type="checkbox"/> Adolescent Health | <input checked="" type="checkbox"/> Maternal and Infant Health |
| <input type="checkbox"/> Arthritis, Osteoporosis, and Chronic Back Conditions | <input type="checkbox"/> Nutrition and Weight Status |
| <input checked="" type="checkbox"/> Behavioral Health, including Mental Health and/or Substance Abuse | <input type="checkbox"/> Older Adults |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Oral Health |
| <input type="checkbox"/> Children's Health | <input type="checkbox"/> Physical Activity |
| <input type="checkbox"/> Chronic Kidney Disease | <input type="checkbox"/> Respiratory Diseases |
| <input type="checkbox"/> Community Unity | <input checked="" type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Dementias, including Alzheimer's Disease | <input type="checkbox"/> Sleep Health |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Disability and Health | <input type="checkbox"/> Tobacco Use |
| <input checked="" type="checkbox"/> Educational and Community-Based Programs | <input checked="" type="checkbox"/> Violence Prevention |
| <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Vision |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Wound Care |
| <input type="checkbox"/> Food Safety | <input type="checkbox"/> Housing & Homelessness |
| <input type="checkbox"/> Global Health | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Health Communication and Health Information Technology | <input type="checkbox"/> Unemployment & Poverty |
| <input type="checkbox"/> Health Literacy | <input checked="" type="checkbox"/> Other Social Determinants of Health |
| <input checked="" type="checkbox"/> Health-Related Quality of Life & Well-Being | <input type="checkbox"/> Other (specify) <input type="text"/> |

Q118. When did this initiative begin?

The State funded Rapid HIV Testing program began in 2008. The Gilead Sciences HIV/Hepatitis C Grant program began in 2018

Q119. Does this initiative have an anticipated end date?

- No, the initiative does not have an anticipated end date.
- The initiative will end on a specific end date. Please specify the date.
- The initiative will end when a community or population health measure reaches a target value. Please describe.

- The initiative will end when a clinical measure in the hospital reaches a target value. Please describe.

The initiative will end when external grant money to support the initiative runs out. Please explain.

The initiative will end when a contract or agreement with a partner expires. Please explain.

Other. Please explain.

A continuation of funding for the Gilead Sciences grant is currently being proposed. The State Program is funded annually at the start of the calendar year.

Q120. Please describe the population this initiative targets (e.g. diagnosis, age, insurance status, etc.).

The Gilead Grant targets all UM Prince George's Emergency Department patients, providing Opt out testing to patients between the ages of 17-84. The State funded rapid HIV testing targets all Prince George's County residents and is provided both internally and externally (in the community).

Q121. Enter the estimated number of people this initiative targets.

580,371

Q122. How many people did this initiative reach during the fiscal year?

4,400

Q123. What category(ies) of intervention best fits this initiative? Select all that apply.

- Chronic condition-based intervention: treatment intervention
- Chronic condition-based intervention: prevention intervention
- Acute condition-based intervention: treatment intervention
- Acute condition-based intervention: prevention intervention
- Condition-agnostic treatment intervention
- Social determinants of health intervention
- Community engagement intervention
- Other. Please specify.

Q124. Did you work with other individuals, groups, or organizations to deliver this initiative?

Yes. Please describe who was involved in this initiative.

Prince George's County Health Department,
AIDS Healthcare Foundation,
La Clinica del pueblo,
Prince George's Community College,
Access to Wholistic and Productive Living Institute,
Us Helping US,
Heart to Hand

No.

Q125. Please describe the primary objective of the initiative.

The primary objective for both programs is to reduce the number of newly diagnosed HIV and HEP C and link to care the positive cases by developing best practice algorithms, normalizing testing, and establishing community partnerships for linkages to care. a. The primary objective for the Gilead Focus Program is to screen and test patients for HIV and HEPC and link the positives to care as well as provide education for those who are not positive so that they remain negative. b. The primary objective for the State is to reduce the transmission of HIV and help Marylanders with HIV live longer, healthier lives.

Q126. Please describe how the initiative is delivered.

The Gilead Grant screens patients in the emergency department and provides free testing and counseling for HIV and HEPC. In addition linkages to care are provided for positive patients. The State Rapid HIV Testing program can be provided anywhere in Prince George's county. The program will service any individual that presents for testing at the hospital. The program also provides free testing at health fairs and community events.

Q127. Based on what kind of evidence is the success or effectiveness of this initiative evaluated? Explain all that apply.

- Count of participants/encounters 4,400
- Other process/implementation measures (e.g. number of items distributed)
- Surveys of participants
- Biophysical health indicators
- Assessment of environmental change
- Impact on policy change
- Effects on healthcare utilization or cost
- Assessment of workforce development
- Other

Q128. Please describe any observed outcome(s) of the initiative (i.e., not intended outcomes).

Gilead Grant Sciences - Of the 3100 screened, 61 individuals have identified as positive. Of the 61, 29 individuals have been linked to care. State Funded Program- Of the 3100 screened, 61 have tested positive for HIV, 60 have been linked to care.

Q129. Please describe how the outcome(s) of the initiative addresses community health needs.

In 2017, Prince George's County had the second highest rate of HIV diagnoses (41.9 per 100,000 populations) in the state after Baltimore City. In terms of the number of new cases, the county had the highest number of actual cases in the state, 320, followed by Baltimore City with 231. The rate of HIV diagnoses in other Maryland counties range from 0.0 (Somerset and Talbot counties) to 44.7 per 100,000 population (Baltimore City). The state overall had a rate of 20.4 per 100,000 population and the U.S. had a rate of 11.8 per 100,000.

Q130. What was the total cost to the hospital of this initiative in FY 2018? Please list hospital funds and grant funds separately.

The Gilead Grant: 344,989.00 State Funded Rapid HIV Testing: 50,000 annually.

Q131. (Optional) Supplemental information for this initiative.

Q132. Section IV - CB Initiatives Part 4 - Other Initiative Info

Q133. Additional information about initiatives.

Q134. (Optional) If you wish, you may upload a document describing your community benefit initiatives in more detail, or provide descriptions of additional initiatives your hospital undertook during the fiscal year. These need not be multi-year, ongoing initiatives.

Q135. Were all the needs identified in your most recently completed CHNA addressed by an initiative of your hospital?

- Yes
- No

Q136.

In your most recently completed CHNA, the following community health needs were identified:
Access to Health Services: Health Insurance, Access to Health Services: Practicing PCPs, Access to Health Services: Regular PCP Visits, Access to Health Services: ED Wait Times, Adolescent Health, Behavioral Health, including Mental Health and/or Substance Abuse, Cancer, Chronic Kidney Disease, Community Unity, Diabetes, Educational and Community-Based Programs, Environmental Health, Food Safety, Health Communication and Health Information Technology, Health Literacy, Health-Related Quality of Life & Well-Being, Heart Disease and Stroke, HIV, Immunization and Infectious Diseases, Injury Prevention, Lesbian, Gay, Bisexual, and Transgender Health, Maternal & Infant Health, Nutrition and Weight Status, Older Adults, Oral Health, Physical Activity, Respiratory Diseases, Sexually Transmitted Diseases, Telehealth, Tobacco Use, Violence Prevention, Housing & Homelessness, Other Social Determinants of Health
Other:

Using the checkboxes below, select the needs that appear in the list above that were NOT addressed by your community benefit initiatives.

- | | |
|--|---|
| <input type="checkbox"/> Access to Health Services: Health Insurance | <input type="checkbox"/> Heart Disease and Stroke |
| <input type="checkbox"/> Access to Health Services: Practicing PCPs | <input type="checkbox"/> HIV |
| <input type="checkbox"/> Access to Health Services: Regular PCP Visits | <input type="checkbox"/> Immunization and Infectious Diseases |
| <input type="checkbox"/> Access to Health Services: ED Wait Times | <input type="checkbox"/> Injury Prevention |
| <input type="checkbox"/> Access to Health Services: Outpatient Services | <input type="checkbox"/> Lesbian, Gay, Bisexual, and Transgender Health |
| <input type="checkbox"/> Adolescent Health | <input type="checkbox"/> Maternal and Infant Health |
| <input checked="" type="checkbox"/> Arthritis, Osteoporosis, and Chronic Back Conditions | <input type="checkbox"/> Nutrition and Weight Status |
| <input type="checkbox"/> Behavioral Health, including Mental Health and/or Substance Abuse | <input type="checkbox"/> Older Adults |
| <input checked="" type="checkbox"/> Cancer | <input type="checkbox"/> Oral Health |
| <input type="checkbox"/> Children's Health | <input type="checkbox"/> Physical Activity |
| <input type="checkbox"/> Chronic Kidney Disease | <input type="checkbox"/> Respiratory Diseases |
| <input type="checkbox"/> Community Unity | <input type="checkbox"/> Sexually Transmitted Diseases |
| <input type="checkbox"/> Dementias, including Alzheimer's Disease | <input checked="" type="checkbox"/> Sleep Health |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Disability and Health | <input type="checkbox"/> Tobacco Use |
| <input type="checkbox"/> Educational and Community-Based Programs | <input type="checkbox"/> Violence Prevention |
| <input type="checkbox"/> Environmental Health | <input checked="" type="checkbox"/> Vision |
| <input type="checkbox"/> Family Planning | <input type="checkbox"/> Wound Care |
| <input type="checkbox"/> Food Safety | <input type="checkbox"/> Housing & Homelessness |
| <input checked="" type="checkbox"/> Global Health | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Health Communication and Health Information Technology | <input type="checkbox"/> Unemployment & Poverty |
| <input type="checkbox"/> Health Literacy | <input type="checkbox"/> Other Social Determinants of Health |
| <input type="checkbox"/> Health-Related Quality of Life & Well-Being | <input type="checkbox"/> Other (specify) <input type="text"/> |

Q137. Why were these needs unaddressed?

Q138. Do any of the hospital's community benefit operations/activities align with the State Health Improvement Process (SHIP)? Specifically, do any activities or initiatives correspond to a SHIP measure within the following categories?

See the SHIP website for more information and a list of the measures:
<https://pophealth.health.maryland.gov/Pages/SHIP-Lite-Home.aspx>

	Select Yes or No	
	Yes	No
Healthy Beginnings - includes measures such as babies with low birth weight, early prenatal care, and teen birth rate	<input type="radio"/>	<input type="radio"/>
Healthy Living - includes measures such as adolescents who use tobacco products and life expectancy	<input type="radio"/>	<input type="radio"/>
Healthy Communities - includes measures such as domestic violence and suicide rate	<input type="radio"/>	<input type="radio"/>
Access to Health Care - includes measures such as adolescents who received a wellness checkup in the last year and persons with a usual primary care provider	<input type="radio"/>	<input type="radio"/>
Quality Preventive Care - includes measures such as annual season influenza vaccinations and emergency department visit rate due to asthma	<input type="radio"/>	<input type="radio"/>

Q139. (Optional) Did your hospital's initiatives in FY 2018 address other, non-SHIP, state health goals? If so, tell us about them below.



Q140. Section V - Physician Gaps & Subsidies

Q141. As required under HG §19-303, please select all of the gaps in physician availability in your hospital's CBSA. Select all that apply.

- No gaps
- Primary care
- Mental health
- Substance abuse/detoxification
- Internal medicine
- Dermatology
- Dental
- Neurosurgery/neurology
- General surgery
- Orthopedic specialties
- Obstetrics
- Otolaryngology
- Other. Please specify:

Q142. If you list Physician Subsidies in your data in category C of the CB Inventory Sheet, please indicate the category of subsidy, and explain why the services would not otherwise be available to meet patient demand.

Hospital-Based Physicians	UM PGHC's emergency departments, and other specialties including intensive care, anesthesia, cardiology, endocrinology, internal medicine, neurology, orthopedics, otolaryngology psychiatry, pathology, physical medicine and radiology, are staffed by Hospital-based physicians, with whom the hospital has exclusive contracts, seeking guaranteed levels of compensation through hospital provided subsidies
Non-Resident House Staff and Hospitalists	The subsidies cover gaps in physician services due to lack of adequate community providers who practice within the hospital. Additionally the hospital supports a disproportionate share of underinsured or uninsured patients.
Coverage of Emergency Department Call	The subsidies cover gaps in physician income that are the outcome of UM PGHC's disproportionate share of underinsured or uninsured patients.
Physician Provision of Financial Assistance	The provision of physician reimbursement subsidies to cover free or discounted care through the Hospital's FAP is consistent, appropriate and essential to the execution of the Hospital's mission, vision, and values, and is consistent with its tax-exempt, charitable status.
Physician Recruitment to Meet Community Need	The UM PGHC physician subsidies also include expenses incurred for ongoing physician recruitment consistent UM Capital Region Health's Medical Staff Development Plan.
Other (provide detail of any subsidy not listed above)	<input type="text"/>
Other (provide detail of any subsidy not listed above)	<input type="text"/>
Other (provide detail of any subsidy not listed above)	<input type="text"/>

Q143. (Optional) Is there any other information about physician gaps that you would like to provide?

An adequate supply of primary care physicians can reduce rates of complications that can result in high cost ED visits and hospitalizations. In recent years, the per capita number of primary care physicians has declined in Prince George's County. Also, the per capita number of primary care physicians in Baltimore, Howard, and Montgomery counties, and the District of Columbia, exceeded that of Prince George's County by one and a half to two times. The Prince George's County Health Department prepared the 2019 Prince George's County Community Health Needs Assessment. Key findings from the 2019 and previous 2016 county-wide report indicated many drivers of poor health outcomes, including inadequate supply of providers to serve the number of residents. There is a lack of behavioral health providers, dentists, specialists, and primary care providers (also noted in the 2015 Primary Healthcare Strategic Plan for the county³). While there has been some growth in providers, it has struggled to keep pace with the population growth and has been unable address deficits and the trend is worsening. Provider to Resident ratios: • Primary Care: o 2016 Assessment: 1,860:1 o 2019 Assessment: 1,910:1

Q144. (Optional) Please attach any files containing further information regarding physician gaps at your hospital.

[Primary Healthcare Strategic Plan \(PDF\) 201811141316494825.pdf](#)
 5.3MB
 application/pdf

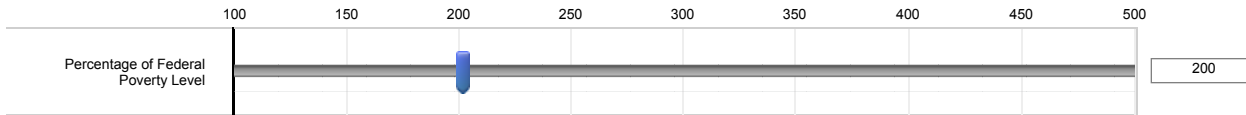
Q145. Section VI - Financial Assistance Policy (FAP)

Q146. Upload a copy of your hospital's financial assistance policy.

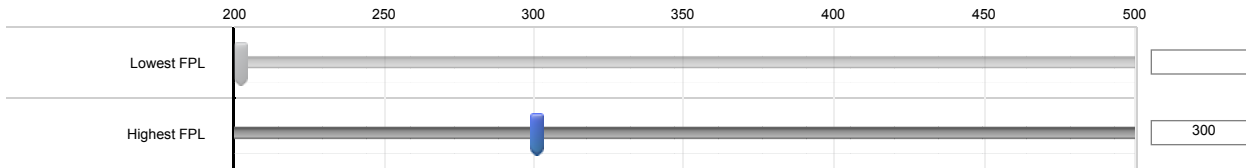
Q147. Upload a copy of the Patient Information Sheet provided to patients in accordance with Health-General §19-214.1(e).

[1-136_What You Should Know As A Patient - Final 2.pdf](#)
234.8KB
application/pdf

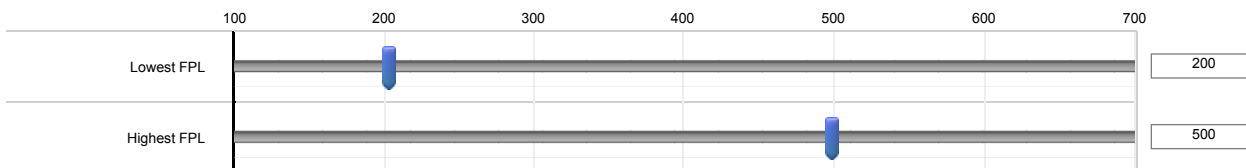
Q148. Maryland hospitals are required under COMAR 10.37.10.26(A-2)(2)(a)(i) to provide free medically necessary care to patients with family income at or below 200 percent of the federal poverty level (FPL). Please select the percentage of FPL below which your hospital's FAP offers free care.



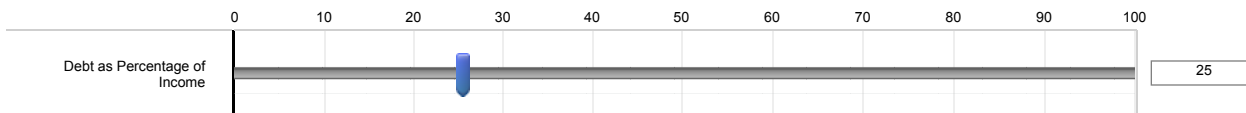
Q149. Maryland hospitals are required under COMAR 10.37.10.26(A-2)(2)(a)(ii) to provide reduced-cost, medically necessary care to low-income patients with family income between 200 and 300 percent of the federal poverty level. Please select the range of the percentage of FPL for which your hospital's FAP offers reduced-cost care.



Q150. Maryland hospitals are required under COMAR 10.37.10.26(A-2)(3) to provide reduced-cost, medically necessary care to patients with family income below 500 percent of the federal poverty level who have a financial hardship. Financial hardship is defined as a medical debt, incurred by a family over a 12-month period that exceeds 25 percent of family income. Please select the range of the percentage of FPL for which your hospital's FAP offers reduced-cost care for financial hardship. Please select the threshold for the percentage of medical debt that exceeds a household's income and qualifies as financial hardship.



Q151. Please select the threshold for the percentage of medical debt that exceeds a household's income and qualifies as financial hardship.



Q152. Has your FAP changed within the last year? If so, please describe the change.

No, the FAP has not changed.

Yes, the FAP has changed. Please describe:

Effective 2019, UM Capital Adopted the UMMS Financial Assistance Policy, as consistent with all UMMS operated entities.

Q153. (Optional) Is there any other information about your hospital's FAP that you would like to provide?

Medical Financial Hardship Assistance is available for patients who otherwise do not qualify for Financial Assistance under the primary guidelines of the UMMS FAP, but for whom: 1) Their medical debt incurred exceeds 25% of the Family Annual Household Income, which is creating Medical Financial Hardship

Q155. Summary & Report Submission

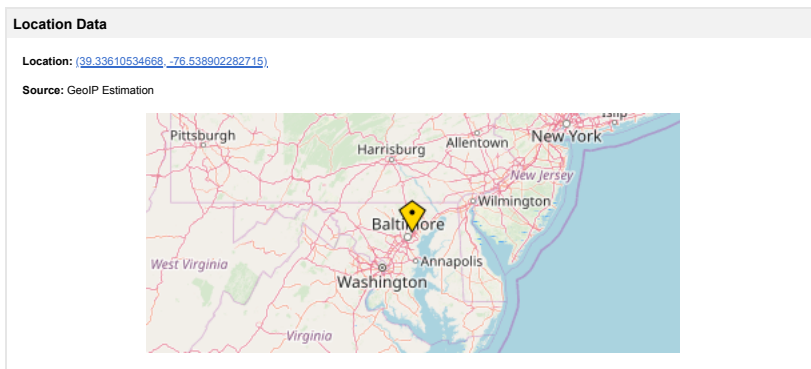
Q156.

Attention Hospital Staff! IMPORTANT!

You have reached the end of the questions, but you are not quite finished. Your narrative has not yet been fully submitted. Once you proceed to the next screen using the right arrow button below, you cannot go backward. You cannot change any of your answers if you proceed beyond this screen.

We strongly urge you to contact us at hcbhelp@hilltop.umbc.edu to request a copy of your answers. We will happily send you a pdf copy of your narrative that you can share with your leadership, Board, or other interested parties. If you need to make any corrections or change any of your answers, you can use the Table of Contents feature to navigate to the appropriate section of the narrative.

Once you are fully confident that your answers are final, return to this screen then click the right arrow button below to officially submit your narrative.



From: [Davidson, Kimberly](#)
To: [Hilltop HCB Help Account](#)
Cc: [Jacobs, Donna](#); [Wilson, Sabra](#)
Subject: UM Capitol Region FY 19 CB Narrative- Clarified Response
Date: Wednesday, March 4, 2020 8:13:47 AM

[Report This Email](#)

Responses are indicated as requested below in **red**. Please let me know if you require anything additional. -Kim

Question 50, where you indicate how external organizations were involved in your CHNA process, on page 10 of the attached you did not select any boxes for "Community/Neighborhood Organizations." Please indicate whether and how organizations of this type were involved.

N/A. Neighboring organizations are listed under "Other."

Question 81 on page 18 of the attached, where you select the CHNA needs addressed by the Domestic Violence and Sexual Assault initiative, you indicated that one of the CHNA needs addressed by this initiative is "Global Health." Your response to Question 56 on page 11 does not include "Global Health" as one of the needs identified in the CHNA. Please indicate whether "Global Health" should have been selected in Question 56, or should not have been selected in Question 81.

Global Health should not have been selected in Q81.

In Question 99 on page 21 of the attached, where you select the CHNA needs addressed by the Mama and Baby Bus Program, you indicated that one of the CHNA needs addressed by this initiative is "Family Planning." Your response to Question 56 on page 11 does not include "Family Planning" as one of the needs identified in the CHNA. Please indicate whether "Family Planning" should have been selected in Question 56, or should not have been selected in Question 99.

Family Planning should not have been selected in Q99.

In Question 136 on page 28 of the attached, where you select the CHNA needs that were unaddressed by the hospital, you selected a number of needs that were not selected in Question 56 on page 11. These needs include "Arthritis, Osteoporosis, and Chronic Back Conditions," "Global Health," "Sleep Health," and "Vision." Please indicate whether these needs should have been selected in Question 56, or should not have been selected in Question 136.

Should not have been selected in Q136.

Question 137 on page 28 had no response. Please provide a response.

Telehealth- The telehealth grant funded pilot program ended at the conclusion of 2017. The program included neurology consultations in partnership with various outpatient community practices as well as nursing facilities, providing FM/IM consultations. The UM Capital Region Health Ambulatory team is engaged in a strategic planning initiative in partnership with the University of Maryland Medical System to re-engage the telemedicine program in the next 6 to 12 months.

Environmental Health- In FY19 this institution primarily focused its efforts and resources on the environmental and safety needs of its facilities.

Oral Health- The Dental provider of the institution left the organization in FY18. Dental Health was

not selected as a priority for the institution, at this time.

Question 138 on page 28 had no response. Please provide a response.

Healthy Beginnings – YES

Healthy Living--YES

Healthy Communities—YES

Access to HealthCare—YES

Quality Preventive Care--YES

In Question 149 on page 30, your response as to the “Lowest FPL” is not clear. Please confirm that you intended that to read “200.” If not, please provide the FPL percentage that forms the lower bound of this aid category.

200

From: Hilltop HCB Help Account <hcbhelp@hilltop.umbc.edu>

Sent: Friday, February 28, 2020 2:48 PM

To: Davidson, Kimberly <Kimberly.Davidson@umm.edu>; Jacobs, Donna <djacobs@umm.edu>

Cc: Hilltop HCB Help Account <hcbhelp@hilltop.umbc.edu>

Subject: Clarification Required - UM Capitol Region FY 19 CB Narrative

CAUTION: This message originated from a non UMMS, SOM, or FPI email system. Hover over any links before clicking and use caution opening attachments.

Thank you for submitting University of Maryland Capitol Region Health’s FY 2019 Community Benefit Narrative Report. Upon reviewing your report, we require clarification of certain issues:

- In Question 50, where you indicate how external organizations were involved in your CHNA process, on page 10 of the attached you did not select any boxes for “Community/Neighborhood Organizations.” Please indicate whether and how organizations of this type were involved.
- In Question 81 on page 18 of the attached, where you select the CHNA needs addressed by the Domestic Violence and Sexual Assault initiative, you indicated that one of the CHNA needs addressed by this initiative is “Global Health.” Your response to Question 56 on page 11 does not include “Global Health” as one of the needs identified in the CHNA. Please indicate whether “Global Health” should have been selected in Question 56, or should not have been selected in Question 81.
- In Question 99 on page 21 of the attached, where you select the CHNA needs addressed by the Mama and Baby Bus Program, you indicated that one of the CHNA needs addressed by this initiative is “Family Planning.” Your response to Question 56 on page 11 does not include “Family Planning” as one of the needs identified in the CHNA. Please indicate whether “Family Planning” should have been selected in Question 56, or should not have been selected in Question 99.
- In Question 136 on page 28 of the attached, where you select the CHNA needs that were unaddressed by the hospital, you selected a number of needs that were not selected in Question 56 on page 11. These needs include “Arthritis, Osteoporosis, and Chronic Back Conditions,” “Global Health,” “Sleep Health,” and “Vision.” Please indicate whether these needs should have been selected in Question 56, or should not have been selected in Question 136.
- Question 137 on page 28 had no response. Please provide a response.

- Question 138 on page 28 had no response. Please provide a response.
- In Question 149 on page 30, your response as to the “Lowest FPL” is not clear. Please confirm that you intended that to read “200.” If not, please provide the FPL percentage that forms the lower bound of this aid category.

Please provide your clarifying answers as a response to this message. Thank you for your attention to this matter.

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