COMMUNITY HEALTH IMPROVEMENT PLAN 2023-2025

Community Health Needs Assessment (CHNA) 2022:

Providing the best possible health care for the community requires a deep understanding of the individuals and families in the region and identifying any barriers that limit them from living their healthiest-possible lives.

To address this, the 2022 South Jersey Health Collaborative (SJHC) CHNA reviewed health indicators, hosted focus groups with diverse populations, including youth, and solicited feedback through key informant survey and stakeholder interviews to interpret the quantitative and qualitative information collected through a lens of health equity – and opportunities to work toward equitable outcomes for all people. The impact of the inequities in social determinants of health are most evident among health outcomes in key areas: access to care, chronic disease, behavioral health, mental health among youth and maternal and child health.

KEY FOCUS AREAS

Access to Care	Chronic Disease	Behavioral Health	Maternal Child Health

The ALICE (Asset Limited Income Constrained) Index measures working households that do not earn enough to meet all of their needs given the cost of living. **1 in 4 South Jersey households met the ALICE threshold before the COVID-19 pandemic, and all South Jersey Counties had lower life expectancies than New Jersey as a whole.** COVID-19 exposed long-standing inequities that taught us we need a more equitable healthcare response. The rapid pace of societal change due COVID-19 has dramatically exposed and worsened the underlying inequities that have existed for generations that continue to fuel disparities in health outcomes.

Virtua Health, as a comprehensive not-for-profit healthcare system with a mission to help the community to Be Well, Get Well, and Stay well, embraces the opportunity to utilize its resources to assist its SJHC partners. The CHNA team collaborated with colleagues and leaders across the Virtua system to identify resources that could be leveraged to address some needs identified by South Jersey residents. This collaboration validated ongoing work within Virtua and the opportunity to coordinate and align to best address the needs identified in the latest CHNA. The Community Health Improvement Planning Team (CHIP Team), comprising of multi-disciplinary groups of Virtua leaders, developed the following goals, objectives, strategies as part of the Community Health Improvement Plan (CHIP) for 2023-2025 period.

PRIORITIES FOR ACTION: BUILDING TRUST AND EQUITY

Health Equity Approach:

- Achieve equitable outcomes for all residents regardless of race, ethnicity, age, insurance, zip code, income, gender or language by challenging structural and institutional inequities

- Leverage collaboration to counteract social drivers of health
- Change processes and policies to redefine equitable distribution of services

ACCESS TO CARE

The South Jersey area has an abundance of high-quality health and social services, education, and businesses, which contribute to creating a healthy place to live. However, not everyone has the same access to these community resources. A closer look at the data shows disparities among Black and brown communities and those with lower incomes in receiving the services they need when they need them. The barriers that keep people who need services from receiving them are varied and many. We know that social determinants of health, lack of access to a computer or internet connection, limited English language capacity, lack of childcare or transportation, and lack of health insurance persist as barriers to accessing care. Preventive care, such as prenatal care and cancer screenings, can detect small problems that can be treated more easily and effectively than if treatment is delayed. While the percent of all populations without health insurance is steadily decreasing, more than 1 in 10 people in the City of Camden lack health insurance.

GOAL: Achieve equitable access to services for all people regardless of race, ethnicity, age, insurance, zip code, income, gender or language.

OBJECTIVES:

- Reduce transportation barriers addressing the areas of most need
- Maintain preventative health screenings and services through mobile fleet and on-site services
- Improve navigation of healthcare and social services to link individuals to appropriate, transparent and cost-effective care
- Collect and utilize data to drive action

STARTEGIES:

Continue to provide transportation services for patients experiencing transportation barriers

> **Ride Health Program:** Free rides for eligible patients at discharge from hospitals and for medical appointments

Improve access to services and resources in the community via mobile fleet and on-site services

> **Early Intervention Program/Pediatric Mobile Services:** Improve and increase influenza Vaccination; Lead Poisoning screening; Oral preventive healthcare; Developmental Screenings in Early Childhood
>
> **Mobile Health & Cancer Screening Services:** Increase the number of individuals who are screened for cancer
>
> **Community Connection: Track** connection to resources and services within the community via FindHelp application

Increase a uniformed data collection and validation framework to systematically drive action

Enterprise-wide REaL (Race, Ethnicity and Language), SGN (Sex, Gender, Naming) and SDoH (Social Determinants of Health) data

CHRONIC DISEASE AND LIFE EXPECTANCY

Prior to 2020, the top leading causes of death among all populations in the U.S. were chronic diseases. Across South Jersey, it is clear that preventive care, early diagnosis, and comprehensive treatment are effective at managing disease and prolonging the length and quality of life. While great innovations expanded the use of home-based monitoring of chronic conditions and telehealth services helped connect people with providers more easily than before, these interventions were not equally accessible for all people for a variety of reasons. The restrictions put in place to help prevent the spread of COVID-19 made accessing screenings and maintenance care for many chronic conditions more challenging. The data reinforce that social determinants of health directly impact health outcomes for chronic disease, resulting in inequities in life expectancy by race and neighborhood.

GOAL: Achieve equitable life expectancy for all people regardless of race, ethnicity, zip code, insurance, income, gender or language.

OBJECTIVES:

- Increase chronic disease and behavioral health screenings
- Improve control of chronic disease
- Improve communication with patients and providers to establish clearer patient understanding of their care plan
- Increase access to care via mobile fleet

STRATEGIES:

Increase diabetic and hypertension screening and control targeting specific primary care practices

Improvement in Diabetic Screening and Control; Controlling Hypertension metrics tracked at certain primary care locations

Assist patients in obtaining and understanding information regarding their healthcare focusing on the most vulnerable population

My Chart: Increase utilization of My Chart at primary care practices

Healthy Neighbor: Advance enrollment into Healthy Neighbor via community health workers providing an innovative approach to how health care is delivered

Mobile Outreach: Increase outreach of Virtua mobile fleet of community-health programs in under-resourced communities

Virtua Integrated Network- NJ QIP Program: QIP-NJ - preventive care and screening for depression in the Emergency Departments and improvements in connections to behavioral health services post-discharge

BEHAVIORAL HEALTH, TRAUMA AND ADVERSE CHILDHOOD EXPERIENCES

Mental and behavioral disorders span a wide range of diagnoses, including anxiety disorders, Schizophrenia, and other delusional disorders, as well as mood disorders such as depression or personality disorders. The disorders are not induced by alcohol and other psychoactive substances, but they may co-occur with or be exacerbated by substance use disorder. Having health insurance reduces some barriers to accessing care, but having enough providers and capacity among available providers are also critical components. Underlying inequities and social determinants of health have a notable impact on negative outcomes from mental distress and behavioral health impacts. The social isolation that stemmed from the efforts to reduce the spread of COVID-19 took its toll on the emotional well-being of people of all ages. Across the spectrum of age, income, and neighborhood, respondents across South Jersey reported an overall increase in anger as a common response in many situations.

Alcohol use disorder is the most prevalent addictive substance among adults. Substance use disorder is both a cause of and outcome from Adverse Childhood Experiences (ACES). Therefore, the prevalence of substance use disorder suggests the opportunity for interventions to both address current issues and underlying ACES to build resilience and prevent trauma through community-level interventions.

GOAL: Foster community building opportunities to ameliorate the impact of traumatic events designed for all ages.

OBJECTIVES:

- Improve behavioral health screenings and assessments
- Focus on behavioral health care transitions post patient discharge
- Address access to behavioral health care and treatment
- Provide behavioral health and substance abuse treatment services

STARTEGIES:

Provide screenings in the emergency departments

Screening for tobacco, drug, alcohol use and suicide in all Virtua emergency departments

Connect Behavioral Health patients within 72 hours post hospital discharge

Virtua Integrated Network- NJ QIP Program: Increase patient follow-up connections post-discharge by improving connections to behavioral health services

Increase access to behavioral health treatment in pediatrics

CASTLE: Improve access to treatment for vulnerable children in our communities in the partial day program from referral to intake

Increase access to substance use treatment

VMG Medication for Addictions Treatment (MAT): Increase total outpatient substance use visits especially in vulnerable populations within our practices

WOMEN AND CHILDREN'S HEALTH

Having a healthy pregnancy is the best way to have a healthy birth. According to the March of Dimes, infants born to mothers who have not received prenatal care have an infant death rate five times the rate of infants born to mothers accessing prenatal care starting in the first trimester of pregnancy. The Healthy People 2030 target is 80.5% of pregnant mothers accessing prenatal care during the first trimester. None of the South Jersey counties have met this goal yet. When broken down by race and ethnicity, differences throughout the area regarding prenatal care become more evident.

Infant mortality is widely regarded as an important community health indicator because it is particularly sensitive to structural factors including social and economic factors and quality of life conditions. The high rate of infant deaths in Camden County, particularly among Black/African American babies, represents a substantial inequity that results in lives lost, suffering for families, and community absence lasting decades.

GOAL: To reduce disparities resulting in increased equitable outcomes and support for all babies and people who give birth.

OBJECTIVES:

- Impact equitable access to care by improving the rate of initiation of prenatal care in pregnant people
- Improve control of hypertension in all people who give birth
- Improve NSTV C-section rates to align with Healthy People 2030 goals

STRATEGIES:

Improve prenatal care initiation

Virtua Integrated Network (VIN) & Camden Coalition Pilot- Increase outreach to women with no evidence of prenatal care, increase the number of women successfully contacted and increase the number of women who accept prenatal care

Reduce disparities resulting in increased equitable outcomes for all babies and people who give birth through improved prenatal care and access to perinatal services

Improve hypertension control: provide recommended medication during delivery and improve prenatal care and services

Improve NSTV C section rates: meet or exceed Healthy People 2023 targeted NSTV C-section rate through best-practices of following recommended management and provider education with feedback

Midwifery care model: continue to nurture the community's relationship with healthcare by promoting the midwifery care model in Camden City

Maternal Fetal Medicine services: Continue to improve to access to high-risk perinatal services to reduce preterm birth and low birth weight babies

Doula program: In partnership with the Community Doulas, establish a Virtua-sponsored doula program through outreach to community stakeholders, providing employment opportunities and perinatal support services

Over the next three years, Virtua Health, in collaboration with community partners and local public health agencies will work toward implementing these strategies to address the concerns identified by our community providing the resources to Be Well, Get Well and Stay Well.