



**COMMUNITY HEALTH NEEDS
ASSESSMENT**



2022-2025 IMPLEMENTATION PLAN



Einstein Medical Center Philadelphia Einstein Medical Center Elkins Park

Community Health Needs Assessment Implementation Plan 2022-2025

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About Einstein

The overall mission of Einstein Healthcare Network (“Einstein” or “Network”), now part of Jefferson Health, is to provide compassionate, high-quality healthcare to residents of the greater Philadelphia region and deliver care in a manner, which is personally satisfying to patients and their families.

Einstein offers a wide range of healthcare programs and services, ranging from community health education and preventive medicine to complex and specialized care requiring advanced technology and highly expert staff. Einstein cares for each person regardless of race, religion, national origin, gender, LGBTQ status or ability to pay. To continue to meet those responsibilities, the Network must remain financially viable. We recognize our responsibility to use our resources to elevate the health status of the communities we serve.

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

Albert Einstein Medical Center (AEMC) is comprised of Einstein Medical Center Philadelphia (EMCP), Einstein Medical Center Elkins Park (EMCEP), MossRehab, Willowcrest and Center One. The needs assessment was conducted in partnership with multiple healthcare systems, agencies, and the Philadelphia Department of Public Health. The purpose of the needs assessment is to identify and prioritize community health needs so Einstein can develop strategies and implementation plans that benefit our community.

*With Humanity, humility and honor, to
heal by providing exceptionally intelligent
and responsive healthcare and education
for as many as we can reach*



Our population is defined by the communities in Philadelphia most geographically proximate to EMCP and EMCEP campuses. These communities represent 75% of inpatient admissions and a total population of almost 850,000 residents.

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

Montgomery County: 19027

- This is a culturally and ethnically diverse area with 37.3% African Americans, 18.5% Hispanics, 35.1% Caucasians, 1.9% Asians, 1% Native American, 4.7% Two or More Races, and 1.4% Other.
- One third of the adults (33%) report a household income of \$29,700 or less and almost two thirds (64.5%) had a household income of \$56,640 or less, compared with 22% and 43% of those in SE PA respectively.
- Life expectancy ranges from 68 – 79 years, but the area contains the zip codes with the five lowest life expectancies in the city: 19132 – 68 years, 19121 – 69 years, and 19133 and 19134 – 71 years.
- In Philadelphia, eight of the 10 zip codes with the highest rates of COVID-19 cases by population were in North Philadelphia and in the project area.
- 84% of EMCP discharges are Medicare/Medicaid
- 27.4% of residents in EMCP’s service area rely on SNAP benefits. Only nine other places in the country are more SNAP-dependent. Nationally, only about 12 percent of people are food insecure.

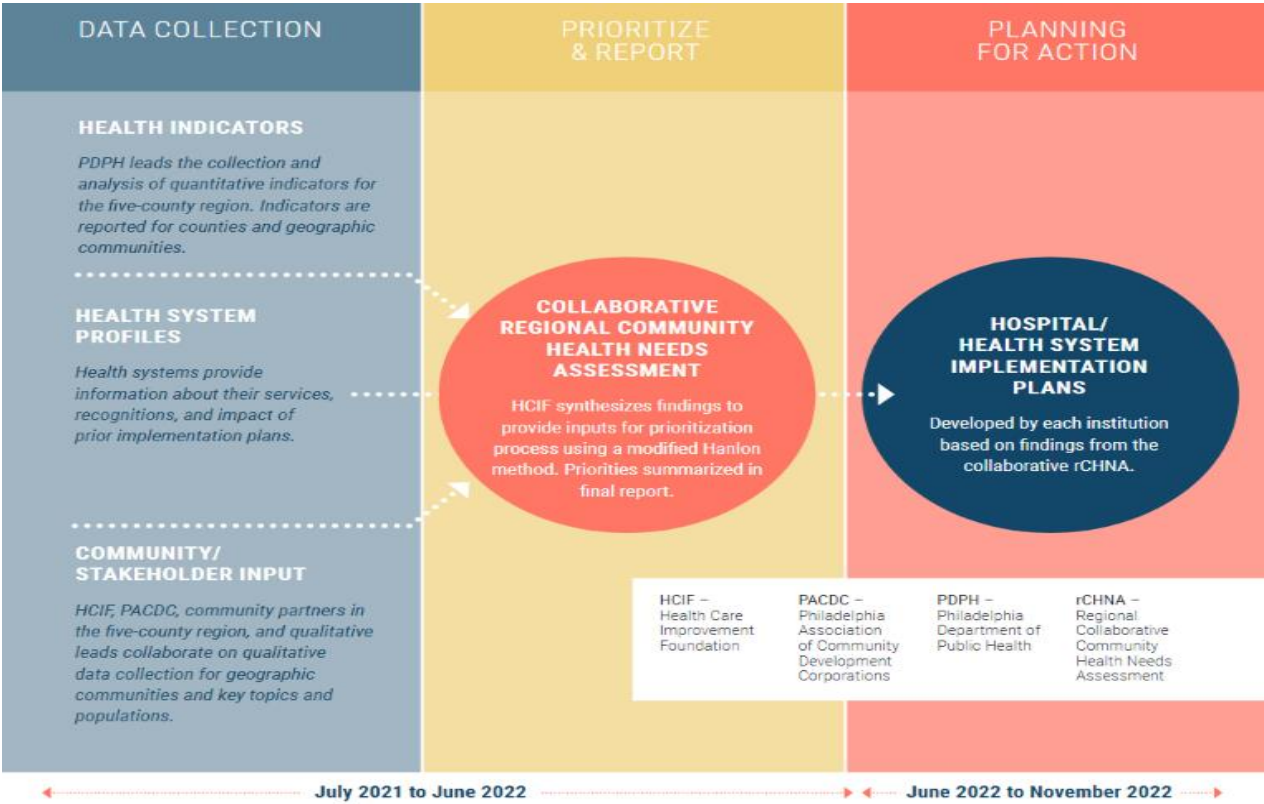
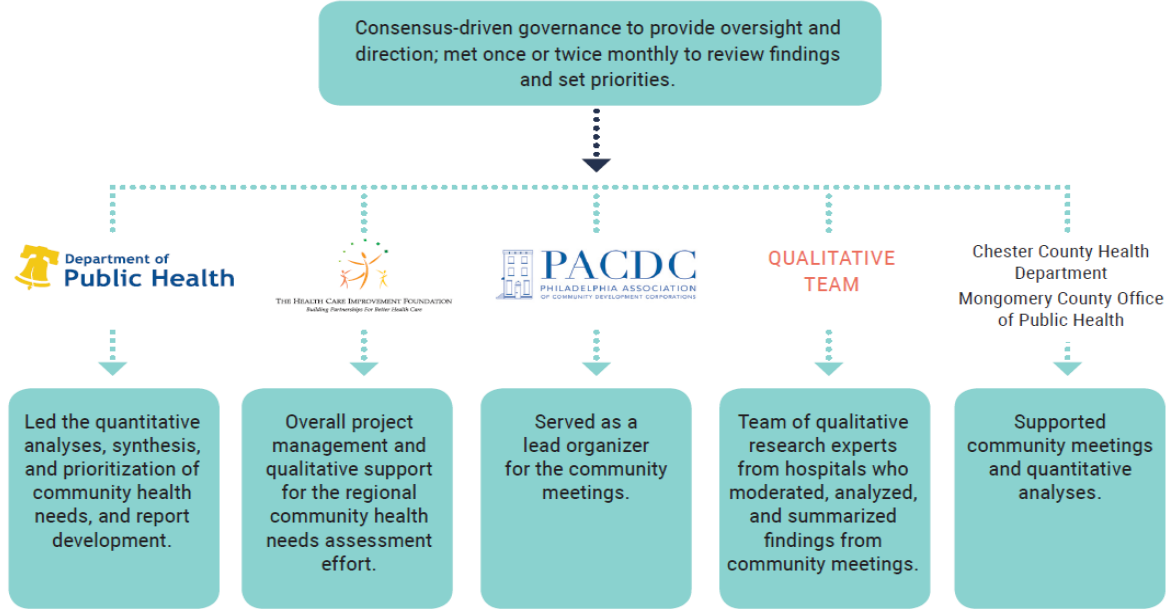
Overview of the Community Health Needs Assessment and Prioritization Process

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

Recognizing that hospitals and health systems often mutually serve the same communities, a group of local hospitals and health systems have again collaborated on a [Southeastern Pennsylvania \(SEPA\) Regional CHNA \(rCHNA\)](#), with specific focus on Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties. This continued collaboration enables continuity of approach, while also providing opportunities to expand and improve upon the last assessment process.

A steering committee was formed, and participants developed a collaborative, community-engaged approach as indicated below:

**SEPA REGIONAL CHNA
STEERING COMMITTEE**



Participants recognize that the CHNA is an important part of how health systems, multi-sector partners, and communities work together to achieve meaningful and positive community change. In addition to the shared learning, increased efficiencies, and reduced community burden offered by the collaborative approach, participants have derived particular benefits from mutual support in the face of the COVID-19 pandemic and its cascading impacts. In response to the crises of the past several years, the 2022 rCHNA is explicitly grounded in an approach that seeks to advance health equity and authentic community engagement.

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

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

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

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

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

Using these five criteria, an average rating was calculated for each priority area.

The 12 community health priorities for the region are presented below in ranked order:

2022 Regional CHNA PRIORITY HEALTH ISSUES/NEEDS
1. Mental Health Conditions
2. Access to Care (Primary & Specialty)
3. Chronic Disease Prevention & Management
4. Substance Abuse and Related Disorders
5. Healthcare & Health Resources Navigation
6. Racism & Discrimination in Healthcare
7. Food Access
8. Culturally & Linguistically Appropriate Services
9. Community Violence
10. Housing
11. Socioeconomic Disadvantage
12. Neighborhood Conditions

RCHNA – Health Needs Categories

Health Issues	Access and Quality of Healthcare and Health Resources	Community Factors
Mental Health Conditions	Access to Care (<i>Primary and Specialty</i>)	Community Violence
Chronic Disease Prevention and Management	Healthcare and Health Resources Navigation	Housing
Substance Use and Related Disorders	Racism and Discrimination in Health Care	Socioeconomic Disadvantage (<i>e.g., Poverty, Unemployment</i>)
	Food Access	Neighborhood Conditions (<i>e.g., Blight, Greenspace, Air and Water Quality, etc.</i>)
	Culturally and Linguistically Appropriate Services	

HEALTH ISSUES

Mental Health Conditions	
Goal: Identify individual strengths and interests that support recovery, resiliency, and self-determination	
Objective: Identify and care for patients with suicidal ideation	
Strategy/Action	Increase the number of inpatients screened utilizing the Columbia Suicide tool embedded in Einstein’s Electronic Medical Record to screen patients for suicide prevention and make early referrals to appropriate resources.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of patients screened, and referrals made.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Psychiatry External Partners:
Objective: To help students overcome barriers so that they may achieve, advance, and remain in school	
Strategy/Action	Connect Einstein’s School-Based Assistance Program (SAP) to schools with behavioral health needs focusing on elementary / middle school students
Target Population	EMCP & EMCEP Service Area
Outputs	Number of schools connected; Number of referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Psychiatry External Partners: PA Department of Education

Objective: Implement a Trauma Informed approach to healthcare	
Strategy/Action	Implement Trauma Informed and Healing Centered Practices (TIHCP) training activities so that all staff understand, and are working to apply, trauma-informed and healing-centered communication practices with patients and colleagues.
Target Population	EMCP & EMCEP staff
Outputs	Number of staff trained.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: External Partners: Collaborative Opportunities to Advance Community Health (COACH)

Einstein’s **Department of Behavioral Health** offers one of the largest arrays of mental health services in the Philadelphia area. We offer: Inpatient, outpatient and crisis center, including electroconvulsive care for adults at Einstein Medical Center Philadelphia, care for adults and older adults at Einstein Center One and Einstein Medical Center Elkins Park; Long-term Structured Residence at our Germantown location; Women's behavioral health services and LGBTQ+ competent psychiatry and therapy through our PRIDE Program; Child and adolescent mental health and have co-located psychiatrists in our Pediatric and Medicine clinics. Our programs identify individual strengths and interests that support recovery, resiliency, and self-determination. Everyone is encouraged to take an active role in their treatment. We provide comprehensive, round-the-clock care for mental and behavioral health, including Anxiety Disorders; Bipolar Disorder; Borderline Personality Disorder; Cognitive Deficiencies Co-occurring with Psychological Disorders; Depression, Geriatric Mental Health; Mood Disorders; Obsessive Compulsive Disorder; Post-Traumatic Stress Disorder; Schizophrenia and other Psychotic Disorders. We also provide mental health as a part of other medical conditions in other programs such as: Bariatrics; Cancer; Transplant; Neurological Conditions (Brain Injury, Stroke) and Pregnancy. Einstein has a 75-year tradition of caring for all ages, around-the-clock. We offer a wide range of therapy options, including Diagnostic re-evaluation; Family consultation; Pharmacotherapy and education about medication and Internal medicine

Our programs identify individual strengths and interests that support recovery, resiliency and self-determination.

consultation and pharmacotherapy. Additionally, Einstein maintains linkage agreements with a substantial network of service providers for referral as necessary throughout the region.

Our **Crisis Response Center (CRC)** provides fast, expert assessment for individuals in crisis 24/7/365. Like a hospital's emergency room, no one is turned away. CRC services are available to all people, regardless of health insurance coverage or ability to pay. No appointment is needed. People are seen on a walk-in basis in a safe and secure environment.

Einstein's Crisis Response Center is:

- One of five CRCs designated by Philadelphia to provide ready access to mental health crisis evaluation and treatment for adults;
- One of the most utilized CRCs by Intellectual Disability Services (IDS), for Philadelphia citizens with intellectual disability, and
- Inclusive of the first sensory response room in a CRC.



School-Based Student Assistance Program (SAP)

- Designed to identify and assist students who are having school related problems resulting from drug or alcohol abuse or other mental health problems.
- SAP evaluators go to the schools with written parental permission and meet with the parents and student.
- The evaluator then helps parents obtain any recommended services.

Collaborative Opportunities to Advance Community Health (COACH)

SHARED IMPLEMENTATION STRATEGY: In collaboration with key partners and stakeholders, participating health systems, including Einstein will adopt a multi-pronged approach to improving behavioral health in vulnerable populations, consisting of two areas of focus:

- Development/strengthening of a **community-based partnership** that is focused on prevention and addressing root causes of poor mental health or substance abuse and/or establishment of a network of community-based support for early identification and response to behavioral health needs.
- Engagement in **policy advocacy** aimed at lowering barriers to effective clinical and community-based behavioral health care by improving data sharing, communication, and access.

Chronic Disease Prevention and Management

Goal: Ensuring each patient lives their healthiest life.

Objective: Provide early detection and prevention of chronic diseases

Strategy/Action	Strengthen and expand partnership with Congresso Health Center to increase awareness in early detection/prevention for hypertension and diabetes in the Latino community.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of programs developed; Number of people reached; Number of referrals made to primary and specialty care.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: External Partners: Congresso
Objective: Provide early detection/prevention of chronic diseases	
Strategy/Action	Strengthen and expand partnership with the American Heart Association (AHA) and leverage their work in the community including their Social Impact Fund.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of initiatives partnered with the AHA; Number of patients reached in EMCP service area.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Cardiology External Partners: American Heart Association

Objective: Provide early detection/prevention of chronic diseases	
Strategy/Action	Continue the roll-out of free blood pressure cuffs to patients to manage their blood pressure at home.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of blood pressure cuffs distributed.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Cardiology External Partners:

The many health conditions associated with being obese - including diabetes, sleep apnea, hypertension, high cholesterol, joint pain, and infertility - are often improved or even reversed by successful weight loss surgery. Einstein is a leader in bariatric surgery and has two locations in Montgomery County (Elkins Park and East Norriton). Our skilled surgeons have performed thousands of successful bariatric surgeries, making us one of the busiest weight loss surgery centers in the Philadelphia area that also has one of the lowest complication rates. Einstein is **Nationally Recognized for Laparoscopic Bariatric Weight Loss Surgery.**

Additionally, Einstein works throughout the community to provide health behavior education, screenings, and immunizations. Our primary care practices are committed to ensuring each patient lives their healthiest life. Wellness exams and preventive plans are encouraged. As patient centered medical homes, we adhere to a strict set of quality measures including health education and preventive screenings aimed to prevent chronic conditions such as hypertension, diabetes, and cardiovascular disease. Other screenings include eye exams, colon cancer screening, mammograms, osteoporosis, and vaccinations.

Substance Use and Related Disorders

Goal: Develop comprehensive procedures, policies, training workflows, and support to address opioid use disorder.

Objective: Expand Medication-Assisted Treatment

Strategy/Action	Strengthen and expand services from the Welcome MAT program (Medication-Assisted Treatment) to support individuals dependent on Opioids.
Target Population	EMCP Service Area
Outputs	Number of patients served
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Community Practice Center (CPC), EMCP Department of Emergency Medicine, EMCP Department of Psychiatry External Partners:

Objective: Screen pregnant women and their partners to identify substance use disorder and psycho-social stressors during and after pregnancy and connect those with positive screens to services and community resources that can help them address these issues before and after their babies are born

Strategy/Action	Implement an integrated program for pregnant patients with opioid use disorder that provides ongoing chronic disease management, prenatal, post-delivery care for mom and baby.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of patients screened, and referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.

Potential Partners	Internal Partners: Primary and Specialty care (ECHA & EPPI), EMCP Department of Psychiatry External Partners: Philadelphia Department of Public Health
Objective: Improve community health by reducing the prevalence of adverse consequences of substance misuse	
Strategy/Action	Expand screening through SAFE Program (Screening and Action for Everyone) to include all patients seen in the practices for alcohol, tobacco, substance use and depression. Behavioral Health Consultants and Peer Specialists will provide support for patients with positive screens.
Target Population	Adult and Adolescent patients
Outputs	Number of patients screened; Number of warm handoffs to behavioral health support
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Primary and Specialty Care (ECHA & EPPI), EMCP Department of Psychiatry External Partners:

A single Einstein Healthcare Network working group was established in 2018 to develop comprehensive procedures, policies, training, workflows, and support to address opioid use disorder. The Opioid Management Committee identified three broad opportunities:

- Reduce the risk of new patient dependence with prescribing guidelines;
- Identify and support best practices in management of chronic pain;
- Fix the problem already created – Treat opioid use disorder
 - Chronic pain population who are opioid dependent
 - Medication Assisted Treatment (MAT) for patients with Opioid Use Disorder (OUD)

Our work is coordinated in three domains with representation from all campuses

- Inpatient – including ordering guidelines for pain management and post discharge prescriptions
- Ambulatory with focus on chronic pain/opioid dependent

WelcomeMAT is the Network Project for Prevention, Treatment and Management of Opioid Use Disorder

- Emergency Department/Crisis Response Center – with opioid guidelines and MAT induction

INPATIENT INITIATIVES

- Comprehensive pain management guidelines for opioid naïve patients developed and approved;
- Comprehensive post discharge guidelines developed and approved;
- Physician dashboard tracking provider prescribing developed;
- Opioid Stewardship Program designed

AMBULATORY INITIATIVES

- Chronic pain management and controlled substance guidelines developed and approved;
- Controlled substance prescribing as part of quality audits and chart reviews;
- Clinic offering MAT to patients as part of primary care in the Community Practice Center

EMERGENCY DEPARTMENT/CRC INITIATIVES

- Implementation of PA Department of Human Services HQIP pathways for opioid management including specialized pathways for pregnant women with OUD, patients willing to initiate MAT induction in the ED, warm hand off to community providers for MAT and inpatient MAT pathway;
- Toxicology support for MAT inpatients;
- Naloxone Distribution Program

Access and Quality of Healthcare and Healthcare Resources

Access to Care (Primary and Specialty)	
Goal: Increase access to comprehensive, high-quality health care services.	
Objective: Provide more efficient operations and reduce wait time for patients.	
Strategy/Action	Continue to optimize and expand Einstein’s utilization of the central scheduling department to ensure quick access to a representative for appointment scheduling and improved patient access to Einstein providers.
Target Population	EMCP & EMCEP Service Area

Outputs	Number of providers utilizing centralized scheduling
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Primary and Specialty providers (ECHA & EPPI) External Partners:
Objective: Identify patients in the early stage of disease	
Strategy/Action	Screen patients for Peripheral Vascular Disease and refer at risk patients for follow-up care.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of patients screened, and referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Primary care providers (ECHA), Department of Cardiology External Partners:

Einstein believes preventive and primary care are crucial for the ongoing health of our community. We have an extensive infrastructure in place to meet this need and will work to better integrate these services into our community through increased outreach and communication.

Einstein Community Health Associates (ECHA) is the primary care network of Einstein Healthcare Network and currently consists of 16 practices at 14 locations.

- These practices consist of 9 internal medicine providers, 20 family practice providers, and 14 pediatric providers. Of the 51 providers, 8 are either nurse practitioners or physician assistants.
- In Fiscal year 2022 ECHA providers saw approximately 148,464 patients for both well and sick visits.

The newly renovated and expanded **Germantown Professional Association** now includes eight Primary Care providers and a state-of-the-art clinical practice with 18 exam rooms and two dedicated labs.



Services include:

- Cardiology, Heart and Vascular Care
- Endocrinology
- Joint Replacement
- Mental & Behavioral Health
- Obstetrics and Gynecology
- Pain Management
- Primary Care
- Rehabilitation and Physical Therapy
- Surgery

The Community Practice Center (CPC) is the Internal Medicine Primary Care Practice for Einstein Medical Center Philadelphia. The primary care roster includes 88 residents and 9 attending physicians. The CPC has other specialty programs including, Immunodeficiency, Infectious Disease, Nephrology, fully integrated Behavioral health, Substance Abuse Treatment Program, Comprehensive Diabetes Clinic, Smoking Cessation Program, Refugee Health Clinic and The Pride Program (LGBT).

There are 17 unique languages spoken among our interns with 63% of our interns speaking two or more languages.

The mission of Einstein's **Living with Diabetes** education program is to enhance the quality of life for those people with diabetes. We provide quality comprehensive diabetes self-management education, Medical Nutrition Therapy, and support to those in our community living with diabetes. We strive to empower our patients with the self-management skill necessary to manage their condition and improve their quality of life. The program is a **Diabetes Education Accredited Program** provided by the American Association of Diabetes Educators. An accreditation recognizes that we meet the National Standards of Diabetes Self-Management and Support. The program offers 10 hours of classroom instruction. All instructors are Certified Diabetes Educators (CDE) or CDE-eligible. A physician referral to the program is required and is covered by most health insurances. We work with people who have diabetes, their families, and their primary care physicians to develop safe effective and personalized diabetes self-management plan.

Einstein offers an array of complete services for Women



Across the Einstein Healthcare Network, you will find these services:

- Wellness for women
 - Gynecology (including adolescent gynecology and menopausal care)
 - Maternity care
 - High-risk pregnancy care
 - Family planning
 - Preconception counseling
 - Urogynecologic care
 - Female Incontinence
- 3D Mammograms
 - Breast Surgery Consultations
 - Bone Density Scans
 - Gastroenterology
 - Breast Health
 - Mammography
 - Psychology/counseling
 - Uterine fibroid embolization
 - Minimally invasive myomectomy
 - Minimally invasive hysterectomy

Patients under age 18 are eligible for Einstein's free family planning program in the Philadelphia region, which offers examinations, pregnancy testing, birth control and treatment for infections. The program is available through Einstein's Teen Health Center at EMCP and Einstein Healthcare Network Germantown.

Maternal Morbidity and Mortality: Since 1997, the Philadelphia region has seen 20 hospitals close maternity services. Every year, about 700 women in this country die during or following childbirth¹ – and the number is rising despite a global trend of decreasing maternal deaths.²

1 | <https://www.inquirer.com/health/pregnancy-complication-rates-hospitals-philadelphia-pennsylvania-usa-today-20190318.html>

Furthermore, in the U.S., black women are three to four times more likely to die in childbirth, and twice as likely to suffer severe complications.¹

Einstein is one of only five remaining hospitals in the city still delivering babies. Einstein's rates for maternal morbidity and mortality are the lowest in Philadelphia, and among the lowest in the state and the country. Einstein has created a culture that allows *all* people to speak up freely, identify problems and near misses, propose solutions and implement change when that change improves care. We stay focused on best practices and have created systems to allow us to nimbly react and create clinical changes to enhance the care that we provide for ALL our patients, independent of insurance status or race.

In conjunction with our efforts to address maternal morbidity and mortality, Einstein is committed to mitigating circumstances that lead to infant mortality. To that end, Einstein has implemented a CenteringPregnancy® program at our prenatal clinic in the hospital and a CenteringParenting® program at our pediatric clinic.

The Centering programs 1) screen pregnant women to identify psycho-social stressors during and after pregnancy, 2) connect those with positive screens to services and community resources that can help them address these issues before and after their babies are born and 3) provide group healthcare services for women during pregnancy (CenteringPregnancy®) and to their babies (CenteringParenting®) so that women are supported in a way that increases their caregiving abilities, promotes personal empowerment and builds community.



CenteringPregnancy is a multifaceted model of group care that integrates the three major components of care: health assessment, education, and support, into a unified program within

² https://www.americashealthrankings.org/explore/health-of-women-and-children/measure/maternal_mortality/state/ALL

a group setting. Eight to twelve women with similar gestational ages meet, learning care skills, participating in a facilitated discussion, and developing a support network with other group members. Each Pregnancy group meets for a total of 10 sessions throughout pregnancy and early postpartum. The practitioner, within the group space, completes standard prenatal physical health assessments.

Healthcare and Health Resources Navigation	
Goal: To link patients/families to primary care services, specialist care, and community-based health and social services to provide more holistic patient-centered care and identify and resolve patient barriers to care.	
Objective: Offer comprehensive care for the physical, emotional, and cognitive changes that can accompany trauma to the head.	
Strategy/Action	Launch a comprehensive program through MossRehab to provide interdisciplinary care to military Veterans and First Responders experiencing the long-term health effects of Traumatic Brain Injury (TBI). The program is based on a national model designed by the Marcus Institute for Brain Health.
Target Population	MossRehab
Outputs	Number of patients screened and, referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: MossRehab External Partners:
Objective: Provide an opportunity for people to share personal experiences and feelings, coping strategies, or firsthand information about diseases or treatments.	
Strategy/Action	Restart in-person Cardiology patient support group sessions to provide support and access and resources for Cardiology patients.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of participants

FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Cardiology External Partners:
Objective: To improve patient experience and reduce preventable medical costs believed to be related to lack of coordination between physical health and behavioral health services.	
Strategy/Action	Implement Community-Based Care Management Program to improve coordination between physical health and behavioral health services.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of patients screened; Number of patients referred
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Pediatric and Adolescent Ambulatory Center (PAAC), Community Practice Center (CPC) External Partners: Health Partners Plan Inc
Objective: Provide an opportunity for people to share personal experiences and feelings, coping strategies, or firsthand information about diseases or treatments.	
Strategy/Action	Expand the number of Quality-of-Life Support Groups for MossRehab patients; various groups offered include Brain Injury Family Education, Amputation, Spinal Cord Injury, MS, and Stroke.
Target Population	MossRehab patients and their families
Outputs	Number of support groups
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.

FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: MossRehab External Partners:

Einstein provides nurse and lay navigation for many chronic conditions and high-burden diseases such as cancer as well as community health workers to help link people to needed health care information and services.

Cancer Center: Patient navigation is formally structured for our

Einstein cares for each person regardless of race, religion, national origin gender, LGBTQ status or ability to pay.

breast, lung, colorectal and prostate cancer patients and begins with a confirmed diagnosis or



through the diagnostic workup if necessary. Patients are navigated through

diagnostic and treatment processes to assure timely, convenient, and efficient care provision. We are in the process of shifting from disease-based navigation to acuity driven patient navigation in which we review all new patient charts and give each a score based on clinical and disease factors to determine their navigation needs

Community Based Care Management Program: Community Health Workers work with nurse navigators, pharmacists, and behavioral health specialists to reduce preventable medical costs believed to be related to a lack of coordination between physical health and behavioral health services.

Access to affordable specialty care: Einstein Healthcare Network has 523 Physicians/Dentists and 120 Advanced Practice Providers. We also have 538 residents and fellows in the network (EMCM and EMCP) and over 3,500 student rotations from a variety of health care disciplines - medical students (1,700), Physician Assistant students, Nurse Practitioner students, nursing students, CRNA students, OT students, PT students, and rad tech students. The scope of services provided includes:

Anesthesia Pain Care
Anesthesiology
Cardiology
CT Surgery
Dental
Primary Care
Emergency
Endocrinology
Nephrology
Neurology
Neurosurgery
OB/GYN
Occupational Health
Ophthalmology
Palliative Care
Pathology
Pediatrics
Neonatology

General Surgery
Geriatrics
Gastroenterologists
Hepatology
Hospitalists
Infectious Disease
Internal Medicine
Medical Oncology and Hematology
Neuro-Ophthalmologic
Physical Medicine and Rehabilitation
Psychiatry
Pulmonology
Radiation Oncology
Radiology
Rheumatology
Transplant
Urology

Einstein has multi-specialty sites throughout Philadelphia and Montgomery Counties. We have made a significant investment to bring care to the neighborhoods.

National Health Service Corps recommends using a sliding fee scale for patients whose income falls between 100% and 200% of the federal poverty level. At Einstein, patients falling in that category qualify for charity care, and there is no charge. For uninsured patients who do not qualify for our charity care and that we are unable to obtain coverage for, we offer a discounted rate. The rate for inpatient is 150% of the MA payment rate and 200% of the MA payment rate for outpatient services. The charity care policy for Einstein Healthcare Network is also posted on www.einstein.edu.

Racism and Discrimination in Health Care	
Goal: Improve awareness and promote diversity and inclusion in the workplace	
Objective: Provide accredited trainings for physicians and staff	
Strategy/Action	Leverage recognition as a top performer in LGBT+ Equality in the Human Rights Campaign Foundations Annual Healthcare Equality Index (HEI) to promote access to more than 60 online (Continuing Medical Education) CME accredited trainings for physicians and staff.
Target Population	EMCP & EMCEP Staff and Service Area

Outputs	Number of CME sessions completed by Einstein staff
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Einstein PRIDE Program External Partners:
Objective: Create a diverse, equitable and inclusive workforce	
Strategy/Action	Increase diversity and inclusion of healthcare workforce leadership through recruitment, mentorship, and training.
Target Population	EMCP & EMCEP Staff and Service Area
Outputs	% of diverse leaders working at Einstein
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Human Resources; Diversity, Equity, and Inclusion (DEI) Council External Partners:
Objective: Create a diverse, equitable and inclusive workforce	
Strategy/Action	Develop an action plan through the newly launched Urban Core (Philadelphia) DEI Council to improve cultural competency of staff in treating diverse populations, help with recruitment of a workforce that reflects the communities served and expanding Einstein's presence in the community through engagement.
Target Population	EMCP & EMCEP Service Area
Outputs	Number of initiatives implemented through the Council

FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: DEI Council External Partners:

Einstein's Pride Program in Philadelphia offers the LGBTQ+ community a professional, safe and caring home to address their healthcare needs.



- Cancer screening: Sensitive, basic gynecological care designed to catch cancer early enough for treatment to be effective.
- Pelvic health: Experienced, comprehensive, state-of-the-art services to diagnose a variety of bladder and pelvic floor disorders, and treatment to relieve painful symptoms.
- Menopause counseling and treatment: Effective health assessments and personalized treatment for menopause symptoms.

- Reproductive healthcare: We can support you and your family’s needs for family planning and pregnancy.

When we set out to develop this program at [Einstein Medical Center Philadelphia](#), we did so by working with the LGBTQ+ community to better understand their health concerns including:

- Confidentiality
- Respectful and compassionate care
- Access to care

We used those concerns as the foundation for our new program. We offer a full scope of obstetric and gynecologic care, surgical services, hormone therapy, [outpatient mental healthcare](#), and patient navigator support. We are conveniently located in Philadelphia, where you will find a safe, professional, and innovative medical practice, dedicated to your specific health needs.

As our country continues to examine the root causes and long-term effects of disparities in healthcare, the role of implicit bias in these disparities must be addressed. Most healthcare professionals believe they are not affected by bias because their primary intent is to help people be healthier, to alleviate suffering, and most of all, to “do not harm.” Yet, like any other human beings, healthcare practitioners are not immune to negative, unconscious associations based on race, gender, religion, sexual orientation, age, or culture. These unconscious associations reflect, in part, the way in which the human brain processes information, and they can have a significant impact on the quality of care delivered to patients. These associations also tend to have the greatest negative impact on vulnerable populations, such as the frail elderly, persons living in poverty or immigrants.

“Equality is giving everyone the same pair of shoes. Equity is giving everyone a pair of shoes that fit.”
Author unknown

In a systematic review, thirty-five of the articles reviewed found evidence of implicit bias in healthcare professionals. All the studies which examined the relationship between the level of implicit bias and lower quality of care found a positive association between these two measures.² For decades, researchers have examined the role effects of socioeconomic factors such as education and income, on health status and outcomes. Health systems have invested resources to mitigate social determinants of health such as housing and food insecurity; however, few systems have implemented interventions directed to unconscious bias as a determinant of these disparities.

² FitzGerald and Hurst *BMC Medical Ethics* (2017) 18:19 DOI 10.1186/s12910-017-0179-8.

Einstein is committed to:

- Increase diversity and inclusion of healthcare workforce at all levels through recruitment, mentorship, and training.
- Implement activities to promote awareness among individual members of the healthcare workforce of their unconscious biases, using validated tools.
- Develop interprofessional education and practice activities to 1) increase mindfulness among healthcare professionals about their unconscious biases; and 2) expose healthcare professionals to the evidence indicating that such mindfulness mitigates the negative effect of unconscious bias on healthcare outcomes.



Einstein’s Pride Program is a multidisciplinary LGBTQ+ healthcare initiative providing compassionate and competent care of the highest caliber across healthcare networks in Philadelphia. Our Program is comprised of six service lines uniquely tailored to meet the needs of our LGBTQ+ patients. In addition to direct patient care, the Pride Program’s team offers educational opportunities to all Einstein employees, facilitates external trainings,

participates in national and international conferences, and conducts outreach across the region. The Pride Program also collaborates with experts in LGBTQ+ healthcare and provides advocacy for the LGBTQ+ community at large.

It’s Just Respect, MossRehab’s Disability Etiquette Training Program answers questions such as Is it OK to pet a service dog? Should I help my colleague who uses a wheelchair propel up that hill? Is it rude to ask my customer to repeat her order if I don’t understand what she’s saying? MossRehab’s “It’s Just Respect” program aims to educate people about disability etiquette. It’s about making people comfortable in their interactions with people with disabilities. It also makes good business sense for anyone who has customers, patients or colleagues with disabilities.

- Restate tips for communicating with and about persons with disabilities.
- Use person first language.
- Remember: It’s Just Respect.

City Councilwoman Cherelle L. Parker introduced a resolution for the City of Philadelphia to utilize a new accessible icon logo, developed by **MossRehab**, for all new public works projects.



Food Access

Goal: Prioritize food and diet in an individual’s health plan to prevent, reduce symptoms of, or reverse disease states.

Objective: Identify patients who may be food insecure and connect them to resources

Strategy/Action	Increase the number of inpatients screened for food insecurity. Connect patients identified as having some form of food insecurity with community resources.
Target Population	EMCP Service Area
Outputs	Number of patients screened; Number of referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: External Partners: COACH Collaborative
Objective: Provide healthy food options at no cost to our community	
Strategy/Action	Provide direct food services to 400 families per month. Expand to offer nutritional education classes.
Target Population	EMCP Service Area
Outputs	Number of families served per month; Number of nutritional education classes offered
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.

FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: A Better Start; Fresh for All External Partners: Philabundance; MANNA
Objective: Integrate Food as Medicine into ambulatory practices	
Strategy/Action	Expand the Philly Food Bucks Rx program, a fresh produce prescription incentive program for SNAP eligible participants
Target Population	EMCP Service Area
Outputs	Number of patients provided with Philly Food Bucks; Number of Philly Food Bucks redeemed
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Community Practice Center (CPC); Pediatric and Adolescent Ambulatory Center (PAAC) External Partners: The Food Trust

Access to and affordability of healthy foods is a driver of poor health in many communities. Low access is largely driven by poor food environments which lack grocery stores or other sources of fresh food and produce.



- *Einstein's Fresh for All* is a free, weekly market held year-round on EMCP's campus for community members.
- *Philly Food Bucks Rx Program* is a fruit and vegetable prescription program that connects healthcare partners and fresh food retailers around the common goal of increasing access to fresh produce. This program is currently being utilized in the CPC but will expand to the PAAC.

Collaborative Opportunities to Advance Community Health (COACH): In collaboration with key partners and stakeholders, Einstein will continue and expand upon our food access pilots over the next three years. Continuation of existing implementation strategies includes:

- Screening for food insecurity through a validated two-item tool administered in clinical settings.
- Increasing food access through referral to partners or direct provision of food resources.
- Collecting and submitting a common set of metrics, as agreed upon by COACH participants.
- Participating in shared learning through the COACH Food Insecurity workgroup.

Culturally and Linguistically Appropriate Services	
Goal: To improve the quality of services provided to all individuals, which will ultimately help reduce health disparities and achieve health equity.	
Objective: Provide language and cultural diversity training to all staff.	
Strategy/Action	Offer language and cultural diversity training in required annual employee training
Target Population	EMCP & EMCEP staff
Outputs	Number of staff completing annual competency
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Human Resources; Urban Core DEI Council External Partners:

Einstein provides multiple screenings and education programs designed to increase the health and quality of life for the residents in our community. Einstein will leverage our marketing resources to bring greater awareness to our community and partners of our services. EHN has a Marketing & Public Relations Department consisting of individuals whose primary responsibility is to keep stakeholders informed of all the programs and services offered by the Network. In addition to staff, we hire consultants who have expert knowledge in branding, marketing, social marketing, and health promotion in minority populations. Einstein operates on a neighborhood healthcare model. We make healthcare services available where our target populations can easily access them. This model makes us part of a community and helps build trust and understanding with our constituents.



We provide information, educational materials and advertise in multiple languages. Einstein’s Language and Cultural Services Program stands out in the world of healthcare as being on the cutting edge in the provision of linguistically and culturally appropriate healthcare. On-staff interpreters provide interpretation for the five most commonly spoken languages; interpretation for other languages is provided through third party agencies and vendors, and telephonic interpretation is provided throughout the network. Additionally, Einstein staff are trained to understand how cultural values and differences can affect patients’ views of their diagnosis and treatment, and when necessary, “culture brokers” may be brought in to facilitate the most helpful communication possible between a patient, their family/friends, and the care providers.

Einstein has extensive initiatives within the Russian community. We established the **Outpatient Russian Language Care Coordination program at Einstein Geriatric – Prime Health**. The program is designed to bridge patient care across settings, from outpatient visits at the Prime Health physician practice, to homecare for homebound patients and inpatient care for hospitalized patients. It combines medical expertise paired with the support of a patient services representative who are fluent in Russian and English. The major focus of this program is to keep patients at home for as long as possible. The doctor visits patients in their homes and, based on their needs, can arrange Meals on Wheels, home health aides, adult day care program services, prescription refills, or other homecare interventions.

Partnerships with local physicians and other health professionals help us to reach those in our community and we often become a resource for these providers. Our facilities are offered to community groups for meetings and other activities, and we are often called upon to provide

speakers for multiple venues such as Health Fairs, Symposia, Martin Luther King Day of Service, etc. We publish newsletters, and design direct mail campaigns about important health issues, and other news and opportunities.

Delivering Culturally Appropriate Care for Jewish Women

Chani Yondorf, MD, is an Orthodox Jewish woman and a fully trained obstetrician and gynecologist practicing at Einstein Medical Center Philadelphia. She's also one of very few doctors in her field providing women's health care that honors Jewish tradition. With the support of Einstein's Office of Development and Spiritual Department, Dr. Yondorf and Department Chair Dr. David Jaspán have since worked to create a program to meet the very specific needs of the Jewish community. The new program kicked off in December 2018 with a Mezuzah hanging event at Einstein's Center One office.

Community Factors

Social and economic factors account for anywhere between 15-40 percent of an individual's health.³ With growing recognition that significant population health improvement requires attention to factors beyond clinical care, healthcare organizations such as Einstein are increasingly exploring approaches to identifying and addressing non-medical determinants of health. Such efforts are especially critical in Philadelphia, where high rates of poverty, chronic disease, and obesity persist. Despite promising models of clinical-community linkages emerging from local hospitals, the scale of impact is currently limited by fragmented systems and lack of the infrastructure necessary to effectively intervene on patients' unmet social needs in clinical settings.

Community Violence

Goal: Prevent violence and related injuries and deaths.

³McGinnis JM, Williams-Russo P, Knickman JR. "The Case for More Active Policy Attention to Health Promotion." *Health Affairs*. Vol. 21, No. 2. March/April 2002.

Objective: Reduce intimate partner violence (i.e., contact sexual violence, physical violence, and stalking).	
Strategy/Action	Expand screening and referral services for Intimate Partner Violence (IPV) to inpatient areas at EMCP. Provide screenings, counseling, and resources for patients.
Target Population	Inpatients experiencing IPV
Outputs	Number of patients screened; Number of referrals made
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: EMCP External Partners: Lutheran Settlement House
Objective: To improve symptoms of posttraumatic stress, depression, and traumatic grief due to witnessing or being a direct victim of one or more types of violence.	
Strategy/Action	Provide continued support to at risk youth through Einstein’s Trauma Intervention Program (TIP). Program provides support to victims of violent injury (stabbings/shootings) as well as bystanders to such violent episodes who may display acute symptoms of trauma.
Target Population	Adolescents and young adults from ages 14-30
Outputs	Number of patients screened and engaged; Number of patients discharged from the program
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Emergency Medicine External Partners:
Objective: To prevent gun violence and related injuries and deaths.	

Strategy/Action	Continue to support policy reform surrounding gun violence through Einstein’s Gun Violence Task Force. Promote proper gun use through PSAs and outreach, while partnering with local community organizations on initiatives to decrease gun violence in the community.
Target Population	EMCP Service Area
Outputs	Number of community partners identified; Number of outreach efforts implemented
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Gun Violence Task Force External Partners: Northwest Victims Services; Legislative Offices

Einstein’s **Trauma Intervention Program (TIP)** is a hospital-based violence intervention program that provides an integrated care model of trauma focused healing services (therapeutic and supportive case management) to victims of violent injury (stabbings, shootings) as well as bystanders to such violent episodes who may display acute symptoms of trauma. TIP services are designed to reduce re-injury, retaliation, and long-term emotional disruption and trauma symptoms (including PTSD) and to improve personal mastery, coping skills, and engagement and compliance with medical and mental health systems as needed. TIP employs a trauma-informed approach that considers the trauma and adversity that clients have experienced over their lives and recognizes that addressing these issues is critical to breaking the cycle of violence and supporting individuals in moving towards healing. Einstein TIP is tailored to the needs of adolescents and young adults from ages 14-30.



TIP innovatively addresses these critical gaps in services for young victims of violence, many of whom are young males of color, in a unique capacity. TIP utilizes a 4-phase model designed to help individuals recovering from the physical and psychological sequelae of violent injury to engage in culturally competent, relevant, and innovative services that promote healing and recovery. TIP uses the hospital as a point of engagement and identification and incorporates an assertive outreach component to engage a population that generally does not seek out traditional follow up services (physical and psychological) post injury. By utilizing this point of engagement,

and bringing trauma informed clinical and supportive services to the outside of the traditional clinic setting, TIP strives to engage a population that historically has not shown up in the traditional outpatient clinic setting until a time of crisis. While the event that often triggers intervention is showing up in the medical/healthcare setting, TIP is designed to upstream services and provide earlier intervention post injury, in order to decrease potential long-term service needs of the behavioral health system for challenges that occur as a result of the injury and unaddressed trauma.

Housing

Goal: Promote healthy and safe home environments.

Objective: Address housing insecurity as a pathway to improve health outcomes and reduce costs.

Strategy/Action	Screen inpatients for housing security and provide referrals to community partners for assistance with rent, utilities, placement, and repairs.
Target Population	EMCP Patients and families experiencing housing insecurity
Outputs	Number of patients referred for services
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.

Potential Partners	<p>Internal Partners:</p> <p>External Partners: Philadelphia Office of Homeless Services; Habitat for Humanity; Trades for a Difference; Germantown Crisis Ministry</p>
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Housing as Health: Recognizing that individuals with unstable and/or unsafe housing experience an increased risk of disease, worse health outcomes, worse mental health, and higher health costs, Einstein is developing a plan to strengthen the connection with organizations that focus on housing.

One of our major partnerships is with the **Face to Face Organization (F2F)**. From its origins as a soup kitchen in 1985, Face to Face has evolved into a multi-service organization that offers free human services to more than 2,500 low income and homeless individuals each year. They offer a Dining Room which serves a hot meal restaurant-style Fridays through Tuesdays. Doors open at 9am Mondays, Tuesdays, Fridays, Saturdays and at 11am on Sundays, allowing guests to socialize over coffee while they wait for their meal.



receive a new set of clothes. Each program is designed to interact with others to comprehensively meet the needs of their guests.

In addition to the Dining Room F2F offers a nurse managed Health Center, a Social Services Center, a Legal Center, a Neighborhood Arts Studio and a Summer Camp program. They also have a Washeteria where people can take a hot shower and

Socioeconomic Disadvantage <i>(e.g., poverty, unemployment)</i>	
Goal: Support building an inclusive and sustainable local economy.	
Objective: Participation in the national Healthcare Anchor Network initiative.	
Strategy/Action	Identify opportunities to strengthen the economic environment of the EMCP/EMCEP community service areas by leveraging our hiring, purchasing, investing, and other key assets to build an inclusive local economy to address economic and racial inequities in community conditions that create poor health.
Target Population	Community surrounding EMCP & EMCEP
Outputs	Number of Anchor Institution initiatives
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: External Partners: Healthcare Anchor Network; Habitat for Humanity; Trades for a Difference
Objective: Expand healthcare career options to middle/high school students	
Strategy/Action	Increase healthcare career opportunities to local middle/high school students through leadership lectures, mentorship/work-ready programs, Career Days, tours of the Simulation Center and reimplementation of the Healthcare Discovery Program.
Target Population	EMCP & EMCEP service areas
Outputs	Number of students reached through activities
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.

FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: External Partners: School District of Philadelphia; Cristo Rey Private High School; Mercy Catholic Technical High School
Objective: Decrease health disparities for disadvantaged populations accessing healthcare services	
Strategy/Action	In response to the new Joint Commission Standard in 2023, identify an action plan focused on patient populations with socioeconomic disadvantages to improve access to healthcare services to decrease health care disparities.
Target Population	EMCP & EMCEP service areas
Outputs	Number of partners identified; Number of initiatives implemented; Number of patients supported.
FY 23 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 24 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
FY 25 Updates	Implement community suggestions, continual documentation of the process, and re-assess community priority needs.
Potential Partners	Internal Partners: Department of Care Management; Department of Quality; Community Practice Center (CPC) External Partners:

Community and Economic Development: We know that where you live shouldn't determine how long you live, but it does. Many households in the Einstein community service area struggle financially. Although the median income is just over \$46,000, more than one in five (22%) of households with children have incomes under the poverty line, as did more than one in seven (15%) households without. Einstein is working to identify opportunities to strengthen the economic environment of Einstein's community and better leverage Einstein's role as an anchor institution.

Healthcare Anchor Network: Einstein is a participating member of the Healthcare Anchor Network (HAN) which is comprised of almost 80 health systems across the country. The HAN catalyzes health systems to leverage their hiring, purchasing, investing, and other key assets to build inclusive local economies to address economic and racial inequities in community

conditions that create poor health. The HAN convenes health systems to share best practices for advancing an anchor mission approach within our health institutions, address common challenges, co-develop new tools, and identify areas where collaborative efforts may be possible.

HAN exists to incubate and scale strategies that establish the anchor mission as a healthcare sector priority and to lead innovation in anchor mission implementation, both internally and in partnership with community. We aim to define the healthcare leadership standard and promote industry collaboration for proactively addressing economic and racial inequities in community conditions that create poor health (or what is sometimes referred to as structural determinants of health).

The long-term goal is to reach a critical mass of health systems adopting an institutional priority to improve community health and well-being by leveraging all their assets, including hiring, purchasing, and investment for equitable, local economic impact.

We seek to address root causes: economic and racial inequities that create barriers to health and thriving for people and communities. We value equity, community well-being, and sustainability as core principles of healthy communities.

Founding members of the Healthcare Anchor Network include Advocate Aurora Health, CommonSpirit Health, Henry Ford Health System, Kaiser Permanente, ProMedica, Providence St. Joseph Health, Rush University Medical Center, RWJBarnabas Health, Trinity Health, and UMass Memorial Health Care. Today, over 70 hospitals and health systems are Network members.

Bridge to Employment:

Einstein has a partnership with JEVS Human Services. The goal of this school-to-career transition program is to place youth on a path leading to career opportunities, financial stability, and personal fulfillment in the health care field. Upon completing JEVS's three-month comprehensive educational and skills training phase, then a month-long, hands-on internship experience at Einstein, these eager young adults are placed into entry-level positions as patient services representatives throughout Einstein's network of medical facilities. The program prepares them to be well-rounded and effectively serve as the first point-of-contact for patients upon entering the facility by covering related soft skills, customer service know-how, and topics of instruction including insurance, medical terminology, ethics/HIPAA regulations, medical office database, office essentials and more.



Education:

The relationship between education and health is never a simple one. Poor health not only results from lower educational attainment, but it can also cause educational setbacks and interfere with schooling. For example, children with asthma and other chronic illnesses may experience recurrent absences and difficulty concentrating in class. Disabilities can also affect school performance due to difficulties with vision, hearing, attention, behavior, absenteeism, or cognitive skills.

Early childhood is a period in which health and educational trajectories are shaped by a nurturing home environment, parental involvement, stimulation, and early childhood education, which can foster the development of social skills, adjustment and emotional regulation as well as learning skills. Einstein is working to strengthen our relationship to the community it serves through programming and volunteer opportunities that connect entire families to Einstein and connect to mission through the following initiatives:

Adopt-A-Class – supports elementary schools through the donation of school supplies for children in need

Dr Seuss Day – Four to five Einstein leaders read their favorite Dr Seuss book to a kindergarten or first grade class in selected schools

Families Understanding Nutrition (FUN) - School based nutrition education programs reaching more than 10,000 SNAP-eligible families per week

Exploring Health – Coordinating Einstein Simulation Center tours for 9-12th grade students with an interest in health care

Neighborhood Conditions (e.g., blight, greenspace, air/water quality, etc.)	
Goal: Create neighborhoods and environments that promote health and safety.	
Objective: Decrease the number of neighborhoods experiencing blight and improve greenspace.	
Strategy/Action	Identify opportunities to demonstrate social standing in the community that has a positive impact on the environment, community safety and beautification.
Target Population	Community surrounding EMCP & EMCEP
Outputs	Number of Einstein Clean Sweep projects
FY 23 Updates	Number of partners identified; Number of initiatives implemented
FY 24 Updates	Engage and survey internal and external community stakeholders to develop inclusive action plan initiative timelines and metrics for impact.
FY 25 Updates	Report impact findings, invite feedback from program stakeholders and continue intentional partnership development.
Potential Partners	Internal Partners: External Partners: Legislative offices; Philadelphia Streets Department



Einstein has been a member of this community for more than 150 years. We have deep roots and have committed substantial resources to better our community. Einstein maintains Clarkson Park in front of the Medical Center as an oasis of calm and green along Broad Street. Our campus is maintained 24 hours a day, 7 days a week. It is a place of safety and healing, with more than 10,000 visitors a day. We also have multiple green spaces throughout our urban campus to allow our patients

and visitors to experience the calm and healing of nature.

We understand our role as an anchor institution and our responsibility to foster community development. To that end, Einstein participates as a Board Member or as Advisory Council, provides support and/or meeting space to organizations such as the following:

Belfield Logan Olney Collaborative (BLOC)
Community Renaissance Alliance (Community House)
Community Clean Up Initiative 5th Street
Face to Face
Logan Community Support
North 5th Corridor
35th Police District
Philadelphia 2035



Overview of Jefferson Health



Jefferson Health recognizes that by providing quality health care to our patients, and education and outreach to our neighbors, we are also enriching the lives and future of our surrounding communities. The work extends beyond the bedside. By partnering with the community, Jefferson Health seeks to improve the health and well-being of young and older Philadelphia and suburban residents through a variety of interventions including prevention and wellness programs, health education seminars, and screenings, as well as efforts that identify and address barriers to health, including the upstream factors (social determinants of health) that impact the health of everyone in the community.

MISSION: *We Improve Lives*

VISION: *Reimagining health, education, and discovery to create unparalleled value.*

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

- ***Put People First: Service-Minded, Respectful & Embraces Diversity***
- ***Be Bold & Think Differently: Innovative, Courageous & Solution-Oriented***
- ***Do the Right Thing: Safety-Focused, Integrity & Accountability***

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

Jefferson Health includes 18 hospitals throughout southeastern Pennsylvania and southern New Jersey. They are:

- Einstein Medical Center Elkins Park
- Einstein Medical Center Montgomery
- Einstein Medical Center Philadelphia
- Jefferson Abington Hospital
- Jefferson Bucks Hospital
- Jefferson Cherry Hill Hospital
- Jefferson Frankford Hospital
- Jefferson Hospital for Neuroscience
- Jefferson Lansdale Hospital
- Jefferson Methodist Hospital
- Jefferson Stratford Hospital
- Jefferson Torresdale Hospital
- Jefferson Washington Township Hospital
- Magee Rehabilitation Hospital
- MossRehab
- Physicians Care Surgical Hospital
- Rothman Orthopaedic Specialty Hospital
- Thomas Jefferson University Hospital

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

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

Thomas Jefferson University Hospital is one of only 14 hospitals in the country that is a **Level 1 Trauma Center** and a federally designated Regional Spinal Cord Injury Center. In 2021, Jefferson Health earned Digital Health Most Wired recognition from the College of Healthcare Information Management Executives (CHIME). Jefferson scored in the top 5% of all participating organizations, earning recognition for its technology advancements in acute care, ambulatory care and long-term care. Also in 2021, nearly 600 Jefferson physicians were named among the region's best by Castle Connolly in Philadelphia magazine's 2021 Top Docs™ issue.

COVID-19 RESPONSE

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

In parallel, Jefferson, with the largest faculty-based telehealth network in the country, treated more than 500,000 patients virtually throughout the pandemic — keeping both patients and physicians safe. Jefferson Health and the City of Philadelphia also worked closely together to open a COVID-19 testing site in Northwest Philadelphia to offer free, twice-weekly testing throughout the peak of the pandemic. When the COVID-19 vaccine became available, Jefferson Health assembled a multidisciplinary COVID-19 Vaccine Task Force that worked tirelessly to develop its [Real Talk Initiative](#) and [Trusted Messenger program](#) to spread accurate and up-to-date information about the vaccine, particularly to Black and Brown communities that had concerns about the vaccine and mistrust of the medical and scientific community. In tandem, Jefferson initiated a [mobile community vaccination program](#) that has administered more than 5,200 vaccines in marginalized communities.

IN THE COMMUNITY

In FY20 Jefferson Health contributed more than \$448 million in charitable care and community benefit. Among Jefferson’s many efforts in this area is the work of the [Jefferson Collaborative for Health Equity](#) (the Collaborative), the community outreach and engagement arm of Jefferson Health charged with addressing the social and structural determinants of health in Philadelphia. Aligned with the CHNA and CHIP, the Collaborative partners with internal and external stakeholders to address the complex issues facing our communities by aligning resources, building partnerships, and forging trust and relationships that create sustainable change. The Collaborative builds on community strength to improve health and well-being in communities, fostering the local Ecosystem necessary to promote health equity and help every family in our targeted communities reach their full potential. In 2020, Jefferson, in partnership with Temple, launched [The Frazier Family Coalition for Stroke Education and Prevention](#), which is coordinated through the Collaborative to promote the health of North Philadelphia residents through a multifaceted program aimed at reducing the number of strokes. With its office located in the lowest-income zip code in the city, the coalition is countering the lack of access to providers, unmanaged chronic disease, and limited awareness of risk factors that has allowed the rate of stroke to swell in North Philadelphia.

Jefferson and Novartis also initiated a program called “Closing the Gap” to focus on reducing cardiac health disparities across the city’s most vulnerable zip codes. Addressing social determinants of health,

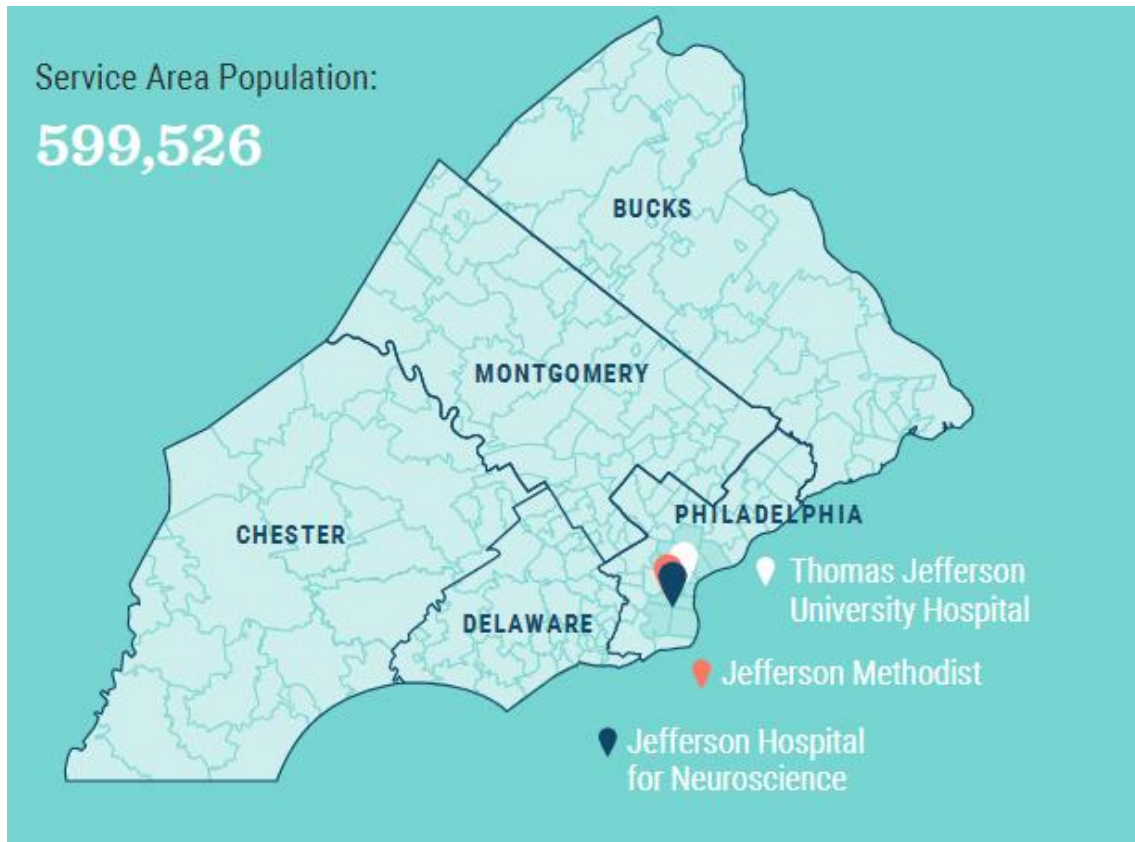
the program heavily utilizes Community Health Workers to screen, identify, and navigate individuals at high-risk for cardiovascular disease to the care and preventative services they need. The [Jefferson Center for Connected Care](#) was also launched to develop and test innovative approaches for a patient-responsive care delivery system. As part of its Reimagine fundraising campaign, Jefferson has set a goal of raising \$100 million for health equity initiatives in the greater Philadelphia region.

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

Geographic Regions & Zip Coded Services by Jefferson Health

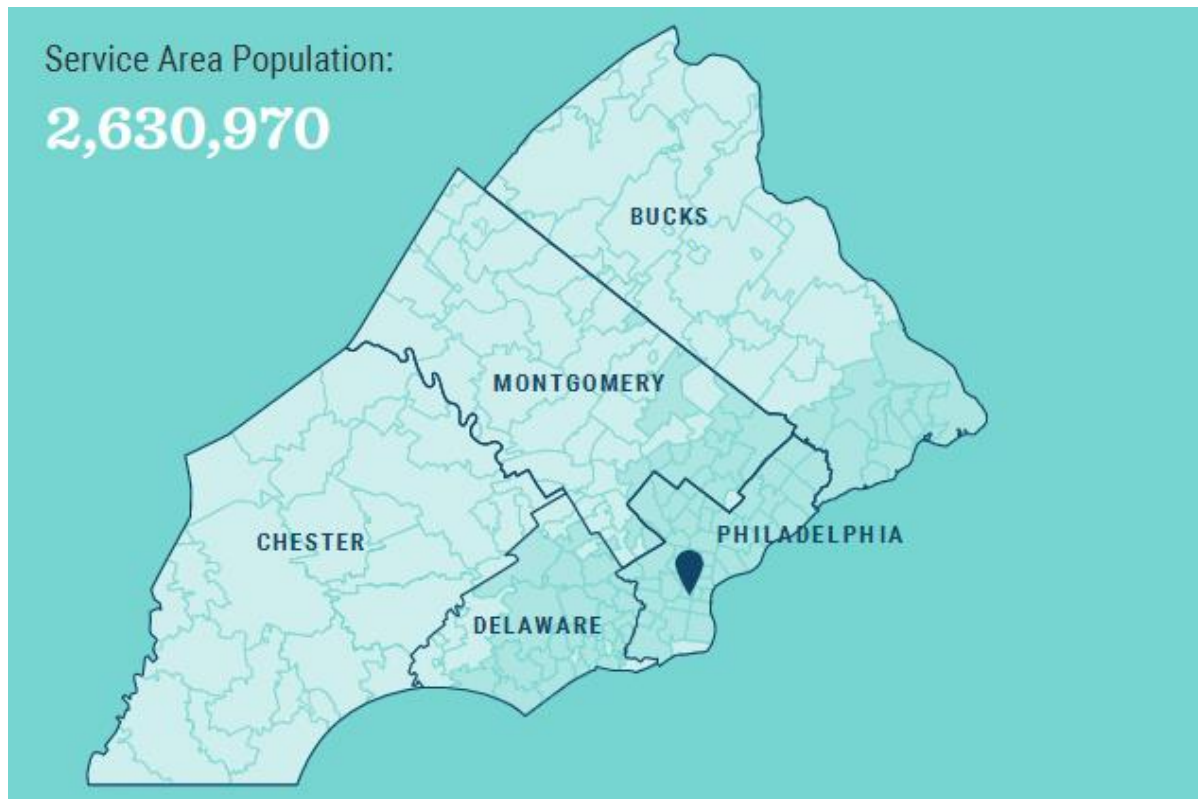
 **Jefferson Health – Center City**

Thomas Jefferson University Hospital, Jefferson Methodist, Jefferson Hospital for Neuroscience



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

 Jefferson Health – Magee Rehabilitation



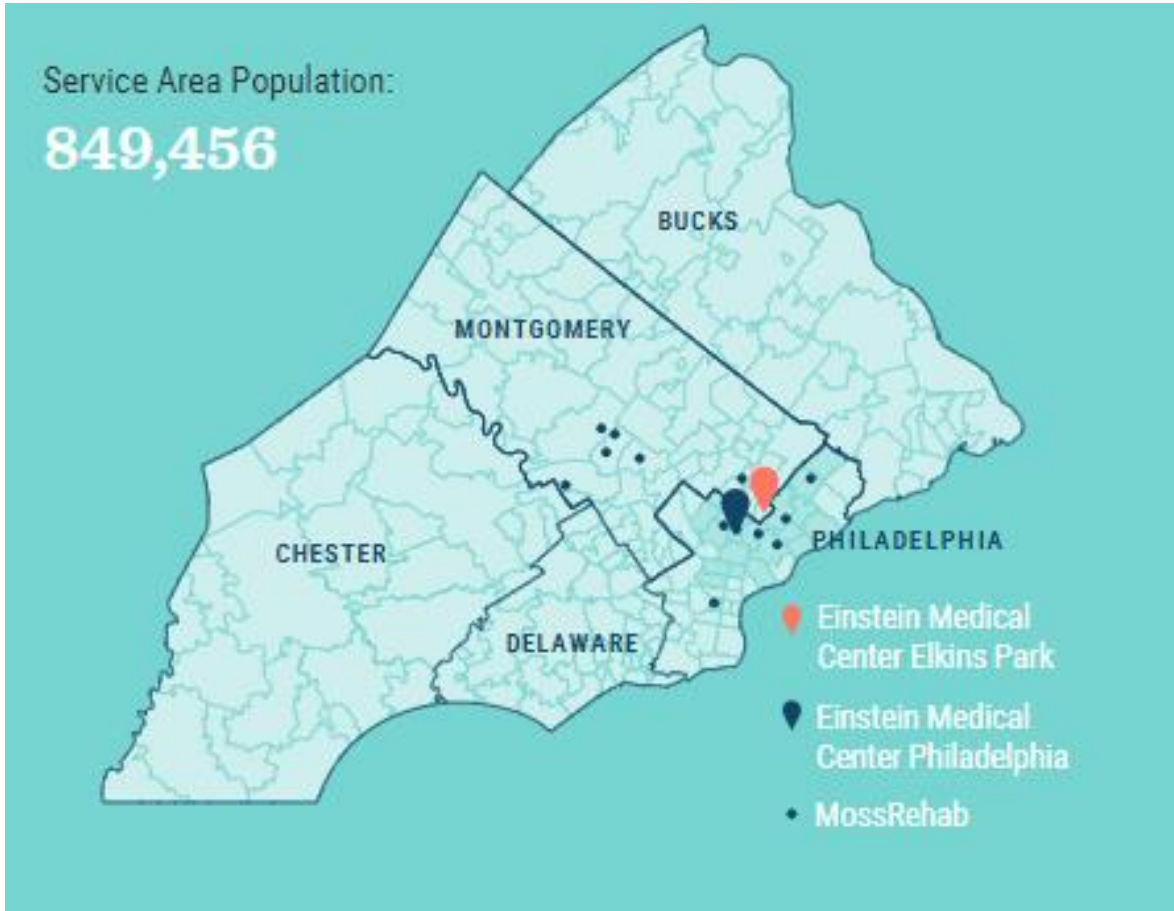
Bucks County: 19007, 19020, 19021, 19030, 19047, 19053, 19054, 19055, 19056, 19057, 19067
Delaware County: 19008, 19010, 19013, 19014, 19015, 19018, 19022, 19023, 19026, 19029, 19032, 19036, 19050, 19060, 19061, 19063, 19064, 19070, 19073, 19076, 19078, 19079, 19081, 19082, 19083, 19086, 19087, 19094

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

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



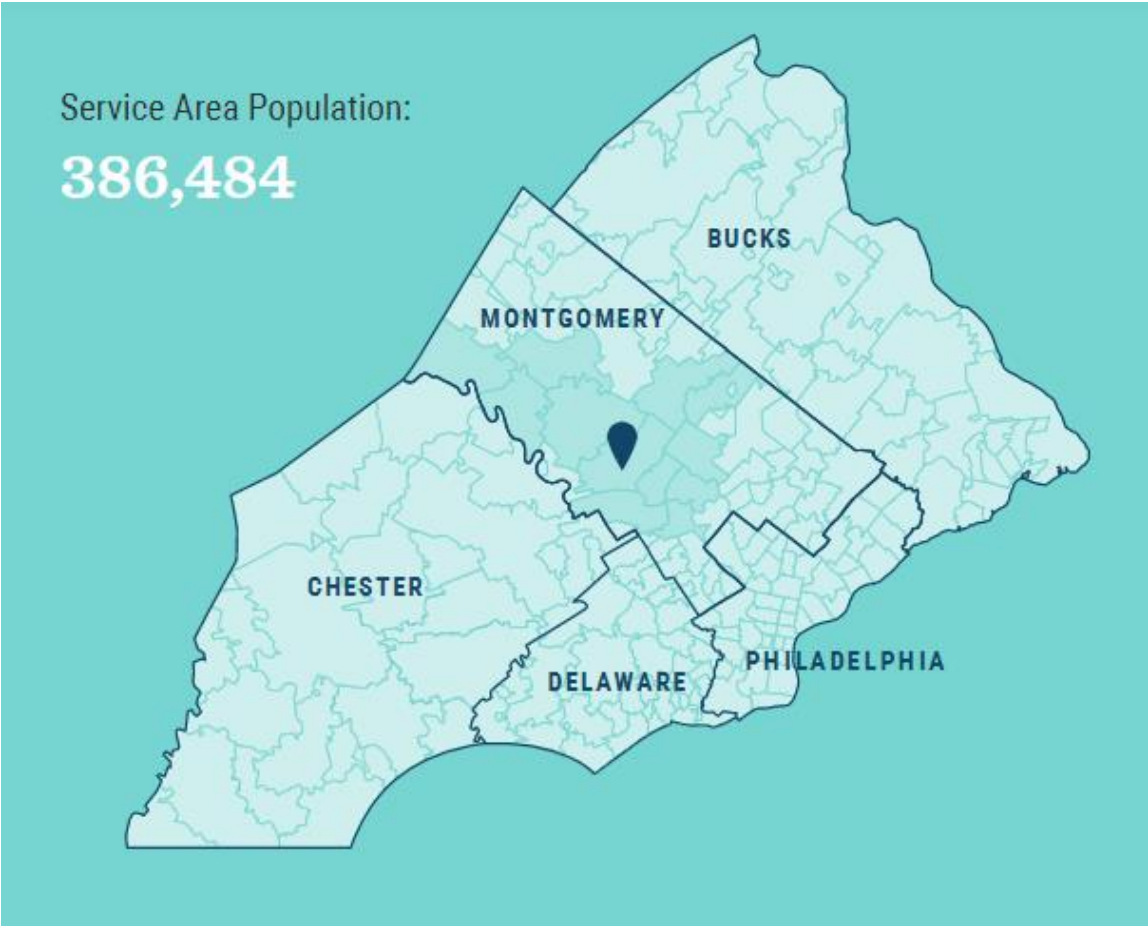
Jefferson Health – Einstein Medical Center Philadelphia



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

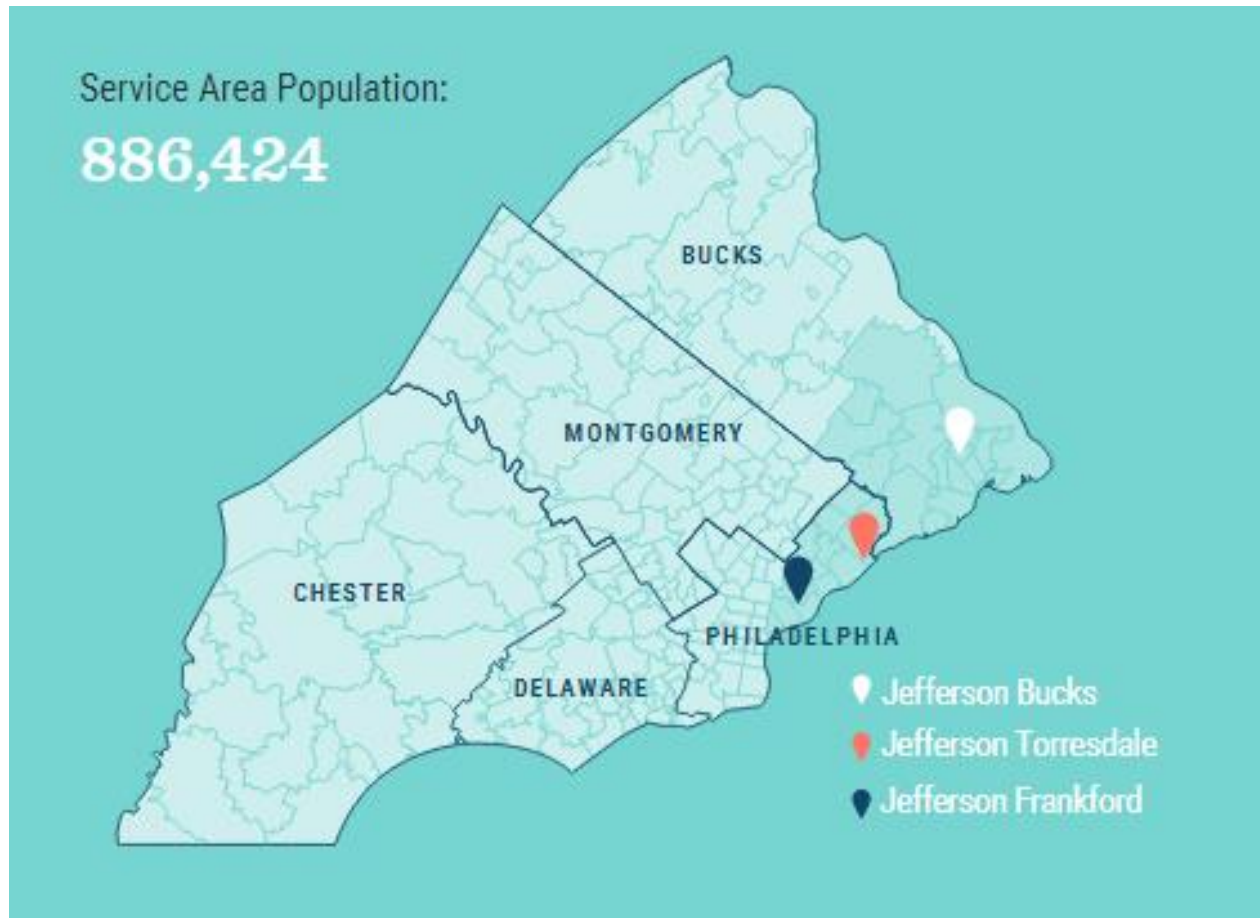
Montgomery County: 19027

 **Jefferson Health – Einstein Montgomery**



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

 Jefferson Health – Northeast



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

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



Jefferson Health – Rothman Orthopaedic Specialty Hospital

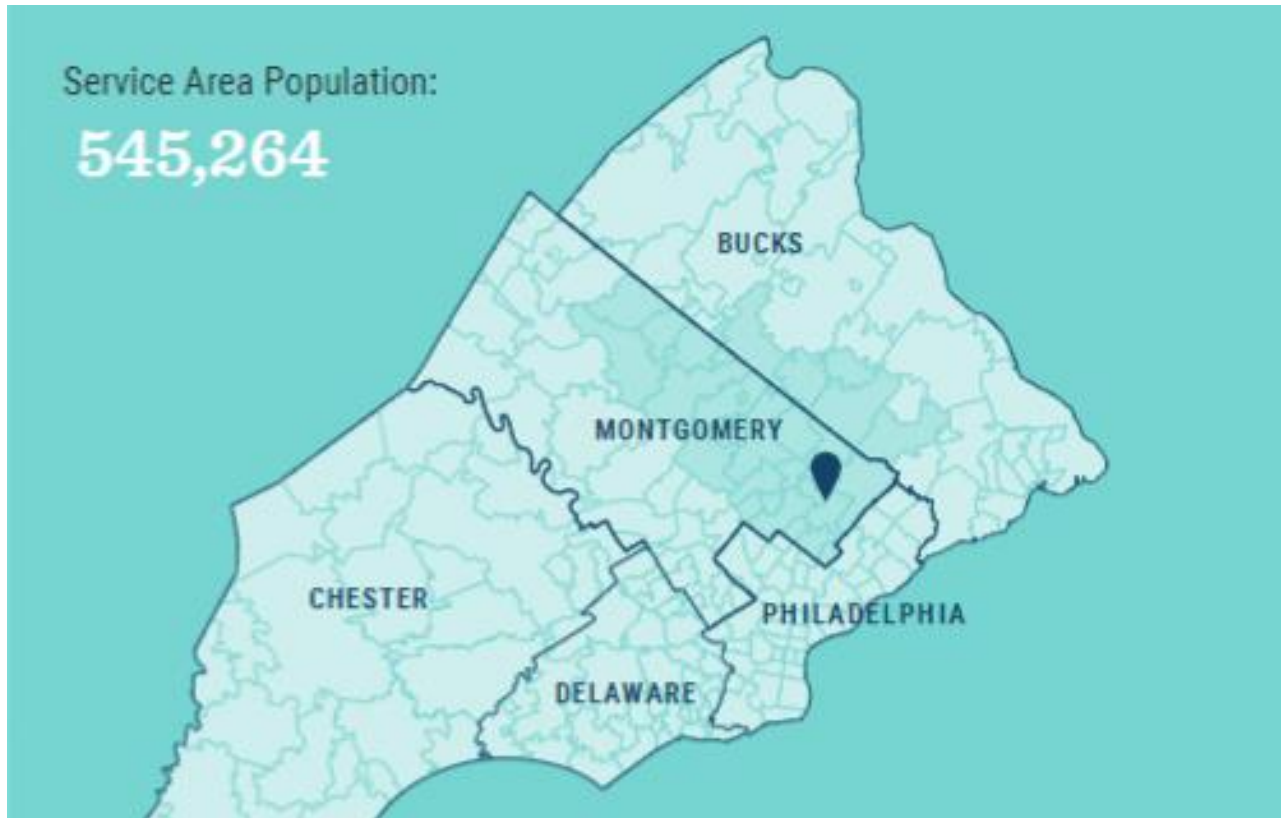


Bucks County: 18901, 18914, 18938, 18940, 18944, 18966, 18974, 18976, 19007, 19020, 19030, 19047, 19053, 19054, 19056, 19057, 19067

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

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

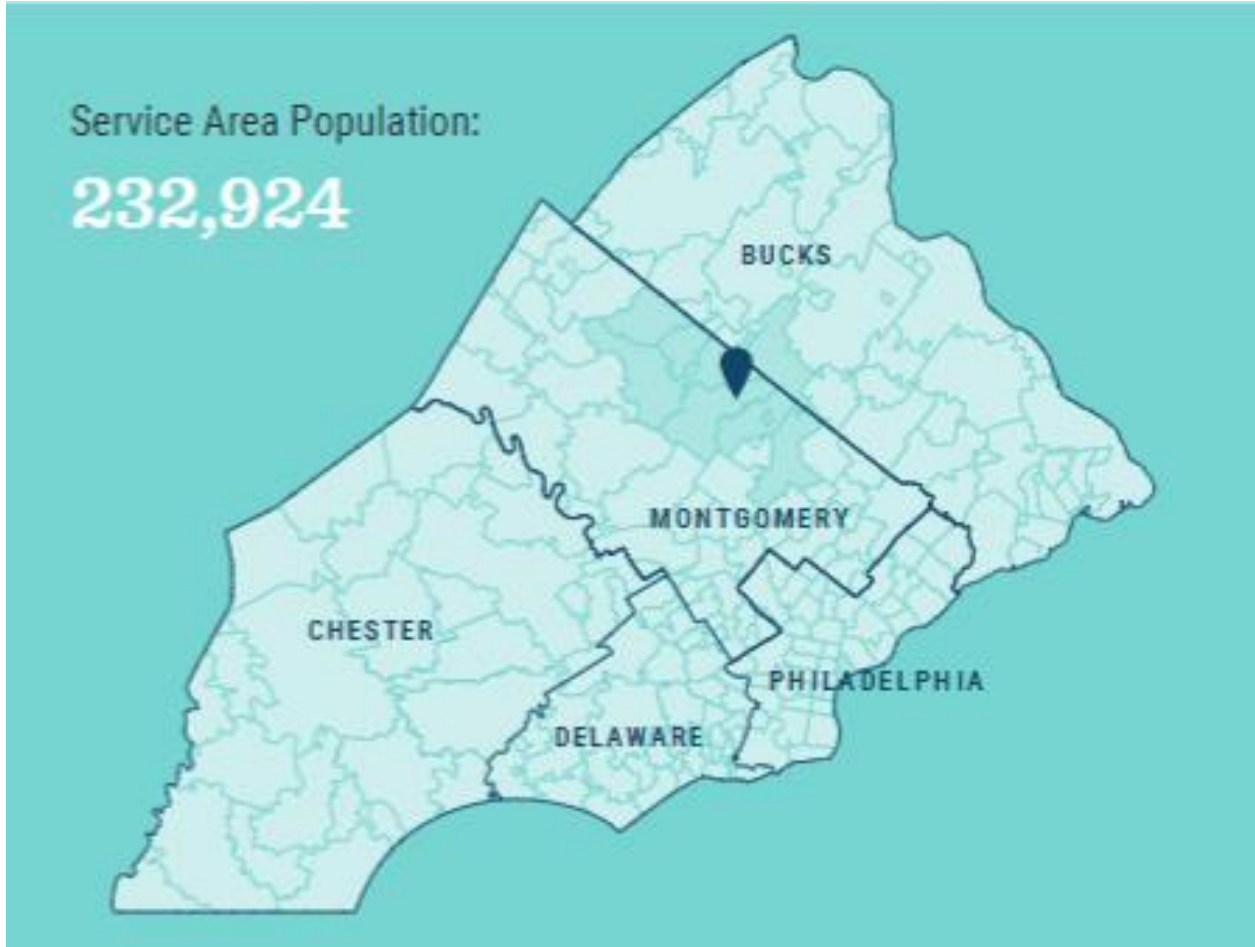
 Jefferson Health – Abington Hospital



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

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

 Jefferson Health – Lansdale Hospital



Bucks County: 18914, 18932

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