



2013 Community Health Needs Assessment Summary & 2013-2016 Implementation Plan

Background

The Children's Hospital of Philadelphia (CHOP) was established in 1855 as the first pediatric hospital in the United States. The Hospital has consistently been a world leader in the advancement of healthcare for children by integrating its mission of excellent patient care, innovative research and quality professional education into all of its programs. Directly or in partnership with others, CHOP seeks to provide accessible, comprehensive, innovative, and high-quality medical and surgical care throughout our region, nation and the world. Today, CHOP, a not-for-profit institution, is one of the largest healthcare networks for children in the world, providing comprehensive inpatient and outpatient care for children from before birth through young adulthood. With more than 500 beds and over 50 outpatient CHOP Care Network locations, the Hospital admits more than 28,000 inpatients a year and conducts nearly 1.2 million outpatient visits.

The Affordable Care Act requires each not-for-profit hospital to conduct a Community Health Needs Assessment (CHNA) at least once every three years to retain its tax exempt status. CHOP's individualized CHNA, conducted in 2012, was prepared by Delaware Valley Healthcare Council (DVHC) and Public Health Management Corporation (PHMC). Through the use of extensive data collection and analysis, CHOP's CHNA identified the needs of its surrounding community. The Hospital is then required by law to develop a plan outlining the strategies it will implement to meet these identified community needs. This plan will be followed with an annual update on the progress made toward addressing these needs until the next CHNA and implementation plan is released in 2016. Both the CHNA and implementation plan must be approved by CHOP's Board of Trustees, submitted to the Internal Revenue Service (IRS), and made available to the public on our website.

To meet the needs assessment requirement, PHMC conducted a household health survey via telephone interviews of people age 18 and older living in 10,018 households in the five county area of Southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery and Philadelphia counties). When needed, interviews were conducted in Spanish and a total of 2,745 interviews took place in households with a child under the age of 18. PHMC also collected information through community meetings with residents, public health representatives, service providers and advocates throughout the five county area. Seventeen such meetings were conducted between June and September 2012. Asset mapping and quantitative information from the U.S. Census and Pennsylvania vital statistics were also used to identify the unmet needs of children in Southeastern Pennsylvania.

CHOP's Surrounding Community & Service Area

CHOP's main hospital is located in West Philadelphia, in Philadelphia County. However, our clinicians see many children from the surrounding suburbs in Bucks, Chester, Delaware and Montgomery counties, Southern New Jersey and more than 40 states and over 50 countries. The metropolitan Philadelphia area is a very diverse community, with Philadelphia County being the main urban center. Nearly all of CHOP's patients are under the age of 18; however, our clinicians do see some young adults, many of whom have a chronic condition that originated at birth or during childhood.

The CHNA was conducted in the five-county region of Southeastern Pennsylvania. However, since CHOP is a freestanding children's hospital with over 50 ambulatory locations, including a pediatric research institute and homecare program, our implementation plan and accompanying strategies expand beyond the service area defined in the CHNA to include Southern New Jersey.

Community Health Needs Assessment Results

The total population of CHOP's service area is approximately 3,998,000 residents as of 2010 and is expected to increase to 4,044,200 in 2013. Twenty-three percent of the residents in the CHOP service area -- and throughout Pennsylvania -- are between the ages of 0 and 17 and 37% are between the ages of 18 and 44. In our service area, approximately 60% of residents identify themselves as white, 22% identify themselves as African-American, 8% as Latino, 5% as Asian and 2% as other. Philadelphia County, like the service area, has a higher percentage of African-American and Latino residents and a lower percentage of white residents than Pennsylvania as a whole.

In regard to poverty status, 9% of families without children and 14% of families with children are living in poverty in CHOP's service area, though there is a large variation throughout the area. In Philadelphia County, 27% of families with children are living in poverty. For the purpose of this needs assessment, poverty was defined as families living at or below 150% of the Federal Poverty Level (FPL) or an annual household income of \$33,525 for a family of four. The 2010 median household income was \$62,500 for the entire service area; however was only \$38,000 for Philadelphia County with 37% of the households in this county making less than \$25,000 annually. Please see the complete CHNA for additional details.

Health Status and Identified Needs

While the majority of children (95.4%) in the CHOP service area are in excellent, very good or good health, there are still approximately 42,000 who are in fair or poor health. Those children living at or below 150% of the FPL are disproportionately more likely to be in poor or fair health (10.9% versus 2.7%, respectively). Also, Latino (12.2%), Asian (6.9%), and African-

American (6.8%) children are more likely to be in fair or poor health. The health needs of the children in the CHOP service area were identified in the CHNA and compared to results for the county and state and the Healthy People 2020 goals for the nation.

Due to CHOP's long history of working with the community and ability to conduct health services and community-based participatory research, many of the health needs uncovered during the CHNA were not unexpected and are actively being addressed by a number of CHOP's existing and proposed programs and initiatives. We also continuously explore new partnerships to address the growing healthcare needs of children in our service area. In an effort to expand our reach to continue to meet the evolving needs of the children in CHOP's surrounding communities, we will reinforce our current community partnerships, maximize and improve the internal coordination of existing resources, and more effectively leverage and publicize innovative programs.

The following is a list of eight areas of focus in response to the CHNA results. This list is based on need, internal resources and our ability to improve the quality of life for a particular population in our community.

Eight Areas of Focus

1. Access to primary care and health education
2. Cultural and language barriers to access care
3. Chronic disease management for asthma
4. Overweight/obesity prevention and intervention
5. Access to special programs for adolescents
6. Access to behavioral and mental health services
7. Navigating the complex health-care system
8. Access to dental, vision and specialty care for children

MAJOR COLLABORATING PARTNERS

THE CITY OF PHILADELPHIA
UNIVERSITY OF PENNSYLVANIA
HEBREW IMMIGRANT AID SOCIETY (HIAS) PENNSYLVANIA
DREXEL UNIVERSITY
VILLANOVA UNIVERSITY
FAMILY PLANNING COUNCIL
PENNSYLVANIA DEPARTMENT OF LABOR & INDUSTRY
PHILADELPHIA AREA SCHOOLS

**Priorities 1: Access to primary care and health education; and
2: Cultural and language barriers to access care**

In CHOP's service area, 3% of children (27,100) lack a regular source of healthcare. Children who are living in poverty (5%), Latino (6.1%) and Asian (6.5%) have more trouble receiving care than those who are white (2%) and African-American (1.8%). Community members also reported a need for health services and education provided in schools.

Objective: Increase access to primary care and to a regular source of care

Anticipated Impact: Increase the number of children with a primary care provider (Particularly those living in poverty, those with special health needs, those of Latino origin and those with cultural/language barriers)

Strategies

- A. The Children's Hospital of Philadelphia's Nicholas and Athena Karabots Pediatric Care Center—CHOP opened this facility in West Philadelphia at 48th and Market Streets in January 2013. Seventy-five percent of patients seen at the Karabots Center are on medical assistance and the building houses many CHOP programs specifically for children living in lower-income households including Early Head Start, Reach Out and Read, the Homeless Health Initiative, The Children and Moms Project, the Medical Home and Care Coordination Program and the Community Asthma Prevention Program. CHOP also has two Primary Pediatric and Adolescent Care practices in medically underserved areas in West and South Philadelphia where 72% of the patients seen at these Centers are on medical assistance.
- B. CHOP Primary Care, Norristown—In response to a demonstrated need for more pediatric primary care services in Montgomery County; on March 1, 2013, CHOP opened a primary care site in Norristown.
- C. Language Services—CHOP's Language Services Department initiated a project to require our ambulatory locations serving a high volume of Spanish speaking people to be staffed with onsite medical interpreters starting in July 2013. This meets an identified need to improve cultural and language barriers for patients and their families, enabling them to receive proper care.
- D. CHOP Primary Care, Springfield—In 2015, this practice will move to a larger office to provide additional space for primary care services.
- E. South Philadelphia Health Center (anticipated opening in late 2015)—The City of Philadelphia and CHOP will join together to provide health care to South Philadelphia adults and children in a unique arrangement that could include a new library and recreation center. The plan relocates two existing clinics, one a CHOP pediatric primary care practice in South Philadelphia and the other a city health center that mainly serves adults, into one building that would be constructed by the Hospital on city land and outfitted by both. Integrating a

health center, a library and a recreation center would allow the City and CHOP to create a complex with clinical care, wellness, prevention and literacy services.

- F. Homeless Health Initiative—Since 1988, the Homeless Health Initiative (HHI) has served as a volunteer outreach program coordinated by CHOP's Community Education Department. Volunteers provide medical and dental services to children in area shelters and assist families in accessing important health care services including health insurance, primary care and specialty care.

New HHI Initiatives:

1. CHOP is conducting a needs assessment to evaluate a potential expansion of HHI into Camden, N.J., a city with high crime rates and a considerable low-income population;
 2. Research is being conducted to identify the rate of homelessness for female veterans and their children in CHOP's service area; and
 3. HHI recently launched the Healthy Baby Project, a pilot program that includes a weekly nurse visit to a shelter to check on 0 to 4 month-old babies and provide support and education to new mothers.
- G. Puentes de Salud—CHOP refers patients to Puentes de Salud, a nonprofit health clinic in South Philadelphia that serves the Latino community. Due to the clear need for services for the Latino population, as evidenced by the CHNA results, CHOP has recently explored a stronger partnership with this Clinic. CHOP agreed to support the clinic's after-school educational programs, which provide a safe haven for adolescents as well as important education on health-related topics such as nutrition, asthma and diabetes.
 - H. Refugee Health Program—CHOP's Refugee Health Program is staffed by primary care pediatricians, nurses and social workers, and case workers from Philadelphia's refugee resettlement agencies. This program is one of the few in the area that sees refugee and asylum-seeking children, groups identified as in need of primary care. The program provides the first point of medical contact and includes a health screening, immunizations and preparation for adjustment of status. Students from the University of Pennsylvania School of Dental Medicine also provide oral health assessments.

Priority 3: Chronic disease management for asthma

Nearly one in five children in the CHOP service area has asthma (17.6%) representing 161,300 children. Asthma disproportionately affects children in Philadelphia County (23.6%), those who are living in poverty (24.3%), those who are Latino (24.9%) and African-American (23.9%) and those children who are older (ages 6-17).

Objectives: **To better diagnose asthma and increase access to asthma care;
To better manage asthma in children with more targeted health
education for children and parents**

**Anticipated Impact: Increase the number of children with access to the appropriate
treatment for asthma**

Strategies

- A. Creation of an Electronic Shared Decision Making Portal for Asthma—Asthma is both the most prevalent chronic illness in childhood and the most common reason for CHOP inpatient admission. Therefore, CHOP implemented an electronically coordinated management system, MyChart and EpicCare, to be used in inpatient, emergency, and outpatient settings by clinical teams and families to monitor asthma control between doctor visits. The portal gathers information on treatment, symptoms and side effects from families at home, provides condition-specific educational content, provides tools to track progress and identify obstacles, and provides decision support based on medical evidence.
- B. Community Asthma Prevention Program (CAPP)—CHOP's CAPP, targeted to areas where asthma has a disproportionate impact, is a community-driven asthma management program to limit hospital visits for children with asthma and keep them breathing freely. The program provides asthma education in the community, a home visitor program in Philadelphia, a school program and primary care provider education.
- C. Asthma Navigator Project—Asthma Navigators are assigned to the Karabots, South Philadelphia and Cobbs Creek Care Network sites to meet families of children with high risk asthma and coordinate asthma management. The Navigator completes a needs assessment and conducts home visits to provide asthma education and facilitate communication between the patient, physician, school nurse and other providers.
- D. Asthma Care Plan (ACP)—The asthma care plan is being developed in Epic (CHOP's electronic health record) that will be more user friendly for both the provider and the patient/family. All providers across the continuum of care will now have access to the same Asthma Care Plan so that care will be consistent. Two committees meet regularly to discuss and plan CHOP's approach to the diagnosis of asthma for all patients in CHOP's network.

Priority 4: Overweight & obesity prevention and intervention

One in five children between the ages of 6 and 17 is obese with another 15.6% categorized as overweight. Just as for asthma, overweight/obesity disproportionately affects those children in Philadelphia County (overweight: 12.9%/ obese: 24.5%), and those who are living in poverty are more likely to be obese (31.6%). Younger children ages 6-12 (25.4%) are more likely to be obese than older children ages 13-17 (9.5%). Community members reported a weak link between schools and community groups focused on obesity.

Objective: Increase children and adolescents' access to healthy living education and healthy weight programs

Anticipated Impact: Decrease the number of children categorized as overweight or obese

Strategies

- A. Healthy Weight Program—The Healthy Weight Program, located in West Philadelphia, advances the prevention and treatment of childhood obesity by integrating excellence in clinical care, research, quality education, and community advocacy. The clinic, with 2,500 patient visits annually, strives to improve the health and quality of life of children ages 2 to 18 who are overweight or obese. In fall 2012, the Program opened a new fitness center and a teaching kitchen and Healthy Weight Program staff members are now working in some CHOP primary care sites in an effort to reach more children. The program has a number of community partnerships in development including with the Community Supported Agriculture (CSA) project at CHOP and the fitness-promoting group Philly Girls in Motion.
- B. Early Head Start—CHOP's Early Head Start Program, located in the newly built Karabots Center, has a six-week cooking class series provided by the Healthy Weight Program as an obesity intervention.
- C. Operation CHOICES—Since homeless women and children are disproportionately affected by obesity and food insecurity, HHI created Operation CHOICES, an evidence-based nutrition and fitness program, uniquely tailored for the shelter environment. Programs under the Operation CHOICES umbrella include: Safe Physical Activity and Recreation for Kids (SPARK) and Women's Wellness. SPARK is a weekly program teaching children about exercise and good nutrition through fun activities to help break the cycle of obesity in children experiencing homelessness. Women's Wellness is an educational program that combines nutrition and fitness for mothers living in shelters.
- D. School-based nursing support—To enhance health and wellness in schools throughout the service area, CHOP has partnered with the Independence Blue Cross Foundation to launch "Healthy Futures." Beginning in fall 2013, CHOP nurses will support the "Stay Well" component of Healthy Futures by providing health and wellness screenings, referrals to relevant healthcare resources and education about healthy choices and healthy living.

Priority 5: Access to special programs for adolescents

In the CHOP service area, the adolescent birth rate is 8.4 per 1,000 women ages 10 to 17 years of age, as compared to the state rate at 6.9. The rate is highest in Latina women (28.8) and is higher for young women in Philadelphia County (17.1). During the Lower Bucks County meeting, community members reported a surge in teenage pregnancies, stating that in some school districts they have gone from three to five per year to 35. Also, in the Southeastern Pennsylvania region, more than 330 children ages 0 to 19 are living with HIV or AIDS with the majority (88%) living in Philadelphia County.

Objectives: **To encourage adolescents to get tested & treated for HIV and STIs;
To increase education about teen pregnancy, HIV and STI
prevention; and to help adolescents transition to adult care**

**Anticipated Impact: To contribute to decreasing the teen pregnancy, birth, STI and
HIV rates**

Strategies

- A. iKnowUshould2—A Philadelphia Health Department study showed that Philadelphia's teens' rates of sexually transmitted infections were in some cases 50% higher than anywhere else in the nation. Accordingly, CHOP launched the iKnowUshould2 campaign in September 2012 to increase teen awareness about STIs and direct them to clinics for testing.
- B. I Matter Philly—CHOP partnered with the Family Planning Council on a new CDC funded Teen Pregnancy Prevention Initiative in Philadelphia in 2011. It seeks to reduce teen birth rates for adolescents between ages 13 and 19 in West and South Philadelphia by increasing access to adolescent family planning services through community partnerships. In addition, CHOP has established clinical tools to improve provider resources as they relate to adolescent reproductive health.
- C. Connect to Protect (C2P)—The Connect to Protect Project of the Adolescent Trials Unit at CHOP is a research initiative to collaborate with community agencies to perform critical HIV primary prevention in community settings. The outcomes look at the current risk behaviors and changes in risk behaviors in youth in Philadelphia. One study specifically targets undiagnosed asymptomatic HIV infection in Hispanic/Latino adolescents and young adults.
- D. CHOP's REACH (Rapport, Empowerment, Advocacy through Connections and Health)—This program prepares teens and young adults with special healthcare needs for a successful transition into adulthood by providing peer support, guidance and resources.
- E. Med-Peds Clinic—The Karabots Center houses a Joint Med-Peds Clinic with the Hospital of the University of Pennsylvania (HUP), specifically for young adults ages 18 to 24 who are in the process of transitioning to adult care.

Priority 6: Access to behavioral and mental health services

Community members, particularly those in Montgomery County, listed access to mental health as an unmet need. In Delaware County, community members mentioned that families experiencing domestic violence are in need of mental health services. Also, Lower Bucks County community members reported that suicide is on the rise, particularly among males ages 15 to 55. Also, in general, death rates for children in CHOP's service area are similar to the state as a whole with accidents being the leading cause of death; however, the homicide death rate for children is slightly higher in CHOP's service area (7.9 deaths per 100,000 children) versus Pennsylvania as a whole.

Objective and Anticipated Impacts:

To increase access to mental and behavioral health services for children and adolescents in the service area ensuring that children get the treatment they need for emotional, behavioral, substance abuse and mental health needs;
To curb the impact of violence on children and adolescents and advocate for societal change to keep our children safe

Strategies

- A. Expand access—CHOP is actively working to expand access to pediatric mental health practitioners at all of its outpatient sites, most recently at the Karabots Pediatric Care Center. Since community members in Delaware County expressed a need for mental health services, CHOP has added psychology interns at its CHOP Care Network location in Cobbs Creek. Other places CHOP is actively increasing staffing includes its King of Prussia and Exton, Pa. locations and Princeton, N.J. Specialty Care Center locations.
- B. Inpatient treatment—CHOP is expanding inpatient treatment for mental health and behavioral disorders by admitting more patients for such conditions.
- C. CIEBP—CHOP's Children's Intensive Emotional and Behavioral Program (CIEBP), located in Atlantic County, N.J., provides comprehensive partial hospital services in a behaviorally based therapeutic setting for children between the ages of 5 and 12. CHOP also has a comprehensive Child and Adolescent Psychiatry and Behavioral Science Department providing emotional and behavioral health services for all children.
- D. Center for Fetal Diagnosis and Treatment, N/IICU, SDU—CHOP identified a need for family counseling for those experiencing a high-risk pregnancy or those with a fetus that might require prenatal intervention. Therefore, CHOP has recently added a counselor for families being treated in our Center for Fetal Diagnosis and Treatment. In addition, CHOP mental health providers offer parents of children in the Newborn/Infant Intensive Care Unit (N/IICU) and Special Delivery Unit (SDU) screening for post-traumatic stress and post-partum depression as well as psychosocial treatment.
- E. Youth Suicide Prevention in Primary Care (YSP-PC)—The Pennsylvania Model-YSP-PC is a multidimensional systems change approach focusing on suicide prevention in primary care for youth (ages 14 to 24). The project has four aims including developing a stakeholder's task force, facilitating partnerships between medical providers and local

mental health providers, training staff about suicide risk assessment, and implementing a web-based screening tool on suicide. The screening tool, used for about 350 adolescents per month, has become a standard of care in CHOP's Emergency Department. In CHOP's primary care system, YSP-PC has screened 2,717 adolescents, identifying 433 youth at risk for suicide.

- F. Substance abuse outpatient treatment program—CHOP will begin a pilot in September 2013 that will include co-morbid mental health and substance use treatment for adolescents.
- G. Tele-mental health—In an effort to reach patients that live in rural communities, CHOP is actively exploring tele-mental health services.
- H. City school partnership—CHOP is exploring a partnership with the City of Philadelphia to provide mental health support in city schools.
- I. Violence Prevention Initiative—In response to needs assessment findings demonstrating the escalating violence affecting youth in CHOP's service area, particularly in Philadelphia County, CHOP's leadership convened Hospital experts to develop a comprehensive, coordinated, trauma-informed plan. This plan incorporates CHOP's existing programs that aim to reduce and prevent peer bullying, aggression, violence, intimate partner violence, and child abuse. It also incorporates current work being done to apply a resilience based, trauma-informed, and strength-building model to address adverse childhood experiences. The plan, expected to be launched in late 2013, is intended to take a trauma-informed approach to curb violence and advocate for societal change to keep children safe.

Priority 7: Navigating the complex health care system

The majority of children (96.9%) in the CHOP service area have health insurance coverage; however, 3.1% of children 0 to 17 years of age are uninsured, representing 28,000 children. Philadelphia County has the highest child uninsured rate at 4.4%, with children living in poverty (6.9%) and particularly Latino (11.4%) children much more likely to be uninsured than other children (African-American (3.7%) and white (1.8%)). Community members at all meetings indicated a lack of insurance for children as problematic, particularly for Asian children and those children that are not legal U.S. residents. These community members stated that while CHIP is available, some children lack a permanent residence which is required for enrollment. Many of the children who lack insurance do qualify for coverage, but their families are unsure of the best way to apply.

Objective: Continue to provide children and their families with assistance in navigating the health care system including finding them a primary source of care and determining insurance eligibility

Anticipated Impact: Increase the percent of children with insurance coverage and with a primary source of care

Strategies

- A. Family Health Coverage Program (FHCP)—The FHCP at CHOP helps uninsured and underinsured families work through the application and enrollment process for financial assistance programs such as Medical Assistance (Medicaid), the Children's Health Insurance Program (CHIP), Pennsylvania Health Choices, New Jersey Family Care and children's health coverage programs in New Jersey. CHOP widely advertises this financial assistance program and 70% of the families served through the FHCP complete MA or CHIP applications.
- B. The Refugee Clinic and Homeless Health Initiative, among others, also provide assistance to children and families in unique situations. (Please refer to Priority 1)

Priority 8: Access to dental, vision and specialty care for children

Approximately 9.3% of children in the CHOP service area did not visit a dentist in the past year, representing 68,000 children. Children living in poverty are more likely to not have visited a dentist (14.8%). Four percent of children in the service area did not get dental care due to the cost of the visit. Community members in all meetings reported difficulty accessing dental services for their children, particularly those who are low-income and those with disabilities or special needs. In addition, community members, particularly in suburban areas, reported difficulty accessing specialty care.

Objective: Increase access to dental, vision and specialty care for children

Anticipated Impact: Decrease in waiting time to schedule appointments and provide better care

Strategies

- A. Ambulatory Care Center—CHOP is currently building an Ambulatory Care Center on the Hospital's Main Campus in Philadelphia which will house many current and new outpatient programs for our patients and their families and will allow CHOP to see even more patients on an outpatient basis. It is scheduled to open in 2015.
- B. Vision screening—All of CHOP's Pediatric and Adolescent Care Centers perform a vision screening for patients. If a problem is found, CHOP refers the patient to the ophthalmology department which cares for patients on our Main Campus at CHOP, as well as at CHOP subspecialty centers in Exton, King of Prussia and Bucks County, Pa, and in Princeton and Voorhees, N.J.
- C. Homeless Health Initiative (HHI)—HHI helps children access dental care and other crucial specialty care as needed. CHOP is exploring expanding this service into other low-income surrounding areas, particularly Southern New Jersey.
- D. Fluoride treatment—CHOP offers fluoride treatments in most of its Pediatric and Adolescent Care Centers to patients 6 months to 5 years old.

- E. KidsSmiles—CHOP's Karabots Center partners with KidsSmiles, an urban dental provider in West Philadelphia that provides dental services and accepts all Medicaid plans. A Dental Community Educator from KidsSmiles provides patients in the Karabots waiting room with interactive education about gum and teeth health, oral hygiene, and brushing.
- F. Dental urgent care—CHOP contracts with the University of Pennsylvania School of Dental Medicine to provide on-call dental services to CHOP patients in the Emergency Department who need to be seen for a related dental urgent care visit.
- G. Appointment availability—In 2010, CHOP overhauled its appointment access tracking system to include a weekly internal audit that checks appointment availability across the entire CHOP Network. This ensures a reasonable timeframe to obtain the next available appointment.
- H. CHOP Specialty Care-Chadds Ford—In 2015, CHOP is scheduled to open a larger Specialty Care Center in Chadds Ford to expand specialty care services to patients living in Chester and Delaware counties.

Needs not being addressed

In CHOP's service area, 9.1% of infants are born at a low birth weight. This does not meet the Healthy People 2020 target goal of 7.8%. The percentage of low birth weight infants is highest among African-American infants at 13.7%. In addition, every year an average of 444 infants in Southeastern Pennsylvania die before their first birthday, representing an infant mortality rate of 8.7 infant deaths per 1,000 live births. This also does not meet the Healthy People 2020 target goal of 6.0 infant deaths per 1,000 live births.

CHOP clinicians do not care for pregnant women, other than those whose babies have been diagnosed before birth or prenatally with a condition or disease that must be monitored closely by our Center for Fetal Diagnosis and Treatment (CFDT). Therefore, we will not be able to impact the service area's overall birth rate, the rate of infants born at low birth weights (other than caring for them after birth), the rate of preterm births (other than those mothers and babies being followed by our CFDT), or the rate of pregnant women receiving pre-natal care (other than those seen by the CFDT). We do care for babies born at low birth weights and preterm infants that need hospitalization in the N/IICU on Main Campus and in the infant nurseries or NICUs in 10 community hospitals in the region.

Final Note

The Hospital reserves the right to amend this implementation plan at any time as circumstances warrant. Community health needs may evolve, requiring adjustments to the described strategic initiatives.