



Welcome and Logistic

- To ensure broad community participation we have simultaneous Spanish Interpretation and ASL interpretation.
- Directions for ASL interpretation will be provided in the chat
- Community Language Cooperative will describe Spanish interpretation services for today's session from a language justice framework
- Other meeting logistics

- 1. Denver Health Who We Are
- 2. Community Benefit Updates
 - Investment
 - Priorities
 - Actions
- 3. Hospital Transformation Program (HTP)
- 4. Community Engagement & Discussion



Denver Health Who We Are

Thomas MacKenzie - Chief Quality and Safety Officer

Stephanie Phibbs - Hospital Transformation Program Coordinator

Jeremy Springston - Director of Reimbursement



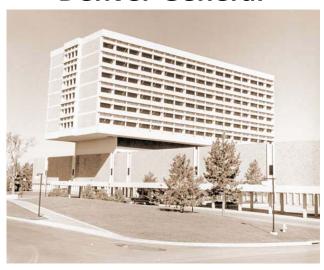
Who Are We? - Our Rich History

1860 **City Hospital**





1969 **Denver General**



1997

Denver Health and
Hospital Authority



An innovative health care system that is a model for success in the nation.

TRUE NORTH

Change the world by transforming the health of our patients and community.

VALUES

EXCELLENCE - We are better every day. COMPASSION - We care for everyone. RELENTLESSNESS - We fight for everyone. STEWARDSHIP - We use resources responsibly.

LEARNING - We educate the next generation.



HEALTH CENTERS

Offering total family care in 10 neighborhood centers where families need it the most - 640,000+ patient visits completed annually



PUBLIC HEALTH INSTITUTE AT DENVER HEALTH

Keeping the public safe through prevention, clinical services, and community outreach



ERNEST E. MOORE SHOCK TRAUMA CENTER

Region's top Level I Trauma Center for adults and Level II Center for children + whole family care



DENVER HEALTH PEDIATRICS AT DENVE **PUBLIC SCHOOLS SCHOOL-BASED HEALTH**

Keeping kids healthy in school by providing vital health care to Denver Public Schools students through 19 in-school clinics, free of charge



ACUTE CENTER FOR EATING DISORDERS AND MALNUTRITION

Proving medical stabilization for patients with life-threatening eating disorders credited with saving more than 2000 lives



DENVER HEALTH MEDICAL CENTER

One of Colorado's busiest hospitals with 23,500+ inpatient admissions annually. ranked in the top 5% for inpatient survival



ROCKY MOUNTAIN CENTER FOR MEDICAL RESPONSE TO TERRORISM

Working every day to plan for the "what If" for 5 states



ROCKY MOUNTAIN POISON AND DRUG SAFETY

Saving Lives with Answers, serving multiple states and over 100 national and international brands



DENVER HEALTH MEDICAL PLAN, INC.

Keeping our community healthy by providing healthcare Insurance to 120,000+



DENVER HEALTH FOUNDATION

Accelerating Denver Health's mission by providing resources for important projects and programs through fundraising and philanthropy



EMERGENCY RESPONSE

Operating Denver's emergency medical response system, the busiest in the state - handling 118,000+ emergency calls and logging over 1.2 million miles on our emergency vehicles each year



DENVER CARES

Providing a safe haven and detax for public inebriates



CORRECTIONAL CARE

Providing medical care to prisoners in Denver's Jalls via telemedicine

23.58



NURSELINE

Registered nurses fielded over 216,000 calls in 2020 - advising on medical information, home treatment, and when to seek additional care - giving patients peace of mind 24/7





In our mission statement is a core responsibility to provide care to everybody.

"To provide care for all, regardless of ability to pay"



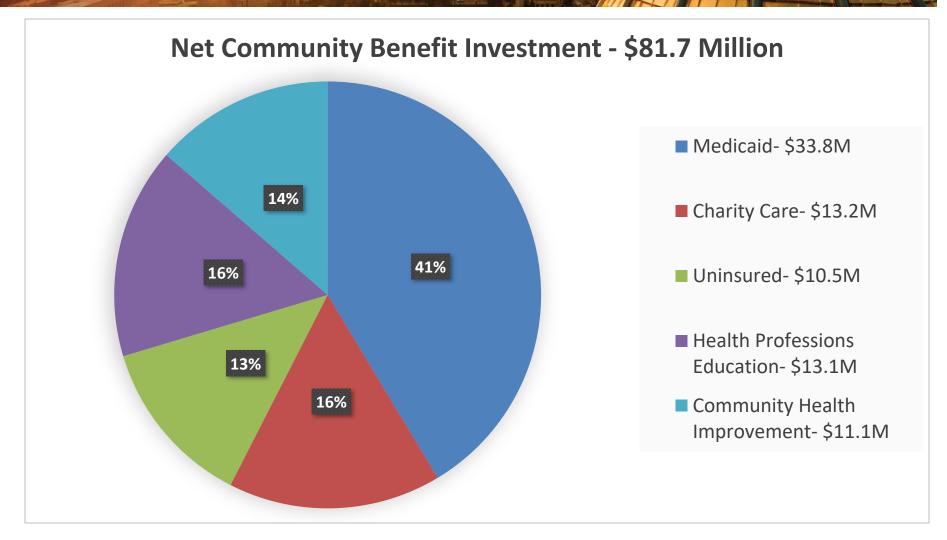
Our patients, staff and community are at the heart of our mission



Community Benefit Updates



Community Benefit Investment FY 2020



The Medicaid, Charity Care and Uninsured Community Benefit amounts for Fiscal Year 2020 are reported net of Medicaid Disproportionate Share and other safety net revenue and payments from the City and County of Denver covering a portion of the cost of treating the medically indigent.



Community Health Priorities





2021 Behavioral Health & Substance Use Actions

Training and Educa	ation S	Service Expansion	Integrating Community Feedback
 Trained Certified Add Counselor (CAC): 76 trainings with 446 pettrained Trained DH staff, inclusive first-responders in training care and addinformed care and addinformed care: Traunseliency informed system training curriculum cannual training upda Expanded interaction between behavioral land DH's pipeline processor youth and young aparticipated in these programs, with 10 his 	behamod Team (STA dediction and and vstem reated; ted Serv One Morn there adults	corted alternative evioral crisis response lels, including Support in Assistance Response R) pilot: Hired 7 full-time cated staff (Caring for ver) Inded Substance Abuse thent Education and ention (STEP) addictions ices programming in DPS-new therapist hired for atbello; in 2021, 8 total apists saw 685 patients 7,153 visits	 Filled in continuum of care to ensure needed services Contracted with sobriety house to establish a workflow from inpatient to sobriety house. Also linking patients to Denver Recovery Group, Behavioral Health Group; Partnering with New Genesis for short-term supportive housing. Integrated community voice and peer support through the CAM Have been holding monthly community advisory meetings since Oct. 2021



2021 Child Health and Well-Being Actions

Multi-Benefit Enrollment

 Leveraged existing Medicaid touchpoints for multi-benefit enrollment: Piloted SNAP enrollment processes partnering with WIC and Medicaid enrollment processes. With grant funding, created and implemented workflows for WIC enrollment Served 583 families (975 people) enrolling in food assistance; WIC services received by 433 families (762 people)

Social Needs Screening Expansion

- Expanded social needs
 screening: Identified 2319
 patients with food insecurity,
 483 with housing insecurity,
 1456 with financial strain, and
 1178 with transportation
 support needs
- Partnered with Metro Denver
 Partnership for Health re:
 inpatient social needs
 screening: Created workgroups
 for Social Health Information
 Exchange Stakeholders &
 defined use cases for 2022
 metro-region planning

DevelopingMessaging

 Partnered with Medicaid beneficiaries to develop messaging, enrollment, and recertification strategies in assistance programs: With COVID continuing, we recruited WIC educators and trained them in specialized communication techniques, e.g., motivational interviewina

A commitment to intentionally apply an institution's long-term, place-based economic power and human capital in partnership with community to mutually benefit the long-term well-being of both.

2021 - Center for Equity, **Diversity and Opportunity (CEDO)** 2022 - Chief Impact Officer

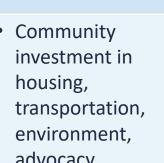
Development Workforce Local Develop. and procurement local hiring, in the education community, and training minority and women owned businesses

Hiring/

Purchasing

 Community investment in housing, especially from environment, advocacy

Investing





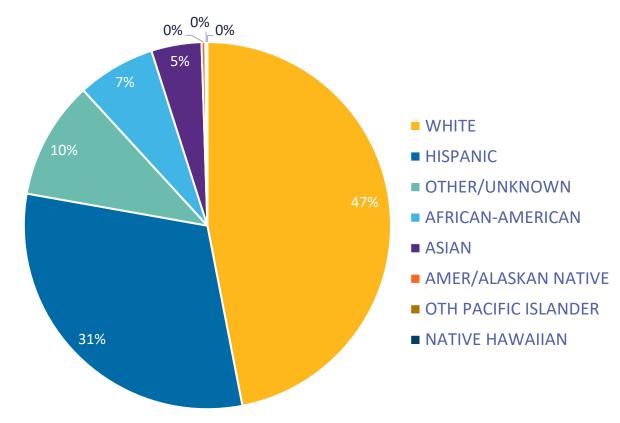


COVID Community Partnership Response

Partnerships:

- Faith-Based
- Government
 - Elected Officials
 - Parks and Recreation
 - Denver Housing Authority
- Community Based Organizations
- Key community leaders / stakeholders
- Neighborhood Associations
- Employers
- Schools
- Federally-Qualified Health Centers

97,545 non-DH Patients Received COVID Vaccines at DH



Please find linked hospital reports for review here:

Denver Health and Hospital Authority

Please contact Stephanie Phibbs for questions and follow-up:

Stephanie.Phibbs@DHHA.org



Hospital Transformation Program (HTP)



Krvsluddwirup dwirq#surjudp

- 1. Health Care Policy & Financing program focusing on Medicaid fee-for-service patients
- 2. Program aims to improve patient care, while reducing costs
- 3. The program requires:
 - Quality improvement planning and implementation
 - Community engagement
 - Meeting performance benchmarks for 10 different measures beginning in Oct 2023.

HTP Performance Measures

- 1. Adult readmission rate
- 2. Social needs screening and referral
- 3. Discharge coordination for patients with behavioral health diagnoses
- 4. Alternatives to Opioids (ALTO's) in hospital EDs
- 5. Avoidable costs
- 6. Length of Stay
- 7. Appointing for follow-up care prior to discharge
- 8. Sharing records with a follow-up provider
- 9. Well-visit rates
- 10. Number of e-Consults

- Submitted an application and implementation plan to HCPF, providing a high-level overview of planned interventions
- Process improvement planning re:
 - Universal inpatient social needs screening and referral
 - Defining role for additional social work staff to support patients with Alcohol Use Disorder
 - Recording follow-up providers and appointing patients for follow-up care before discharge
 - Decreasing opioid administration in the emergency department
 - Improving services to transition patients with diabetes from the inpatient to the outpatient setting
- Ongoing improvements in these areas:
 - Reducing Length of Stay
 - Increasing well-visit rates
 - Increasing e-Consults

HTP Community Engagement

Engaging community partners who may be able to support patient transitions from inpatient to outpatient settings

Working with hospitals and public health in Front Range re: social needs screening and referral

Hospitals convening to partner in meeting community engagement requirements

Working with Colorado Hospital Association and HCPF to clarify and evolve outcome metric specifications



Community Engagement and Discussion



Community Benefits

Based on your experiences and perspective, do the community benefit priorities i.e., behavioral health, child health and economic opportunity still match community priorities?

- Yes, these priorities seem accurate.
- No, these priorities are missing key issues in my community.
- Not sure, I can think of others, but these priorities seem accurate

What other priorities would you suggest we explore in our community health needs assessment next year?

THE OF Shared Priorities Discussion

What do you feel are the most important reasons for hospitals to screen patients for non-medical social needs, like access to housing and healthy foods?

- To connect individuals with community resources.
- To ensure social needs are incorporated into patient medical care plans.
- To identify the top community needs to guide and support the development of related community partnerships and resources.
- A combination of all the above
- Other (please share in chat)

How could Denver Health better partner with the community?

- Better advertise existing opportunities for engagement
- Conduct more 1:1 meetings with community stakeholders
- Host forums on specific topics with other hospitals in the region
- Other

What community organizations would be most important for Denver Health to partner with in meeting Community Benefit priorities and HTP goals?

Please provide your name and contact information if you would like DH to outreach to you to engage in follow-up conversations regarding this presentation.



Thank you!













