2023-2025 CHNA IMPLEMENTATION STRATEGY REPORT

Questions, comments and collaborative interests may be directed to Afaf Qasem, Director of Health Promotion at Afaf.Qasem@TMH.ORG or 850-431-3720.

Approved by the Tallahassee Memorial HealthCare Board of Directors February 2023.

TALLAHASSEE MEMORIAL HEALTHCARE

Contents

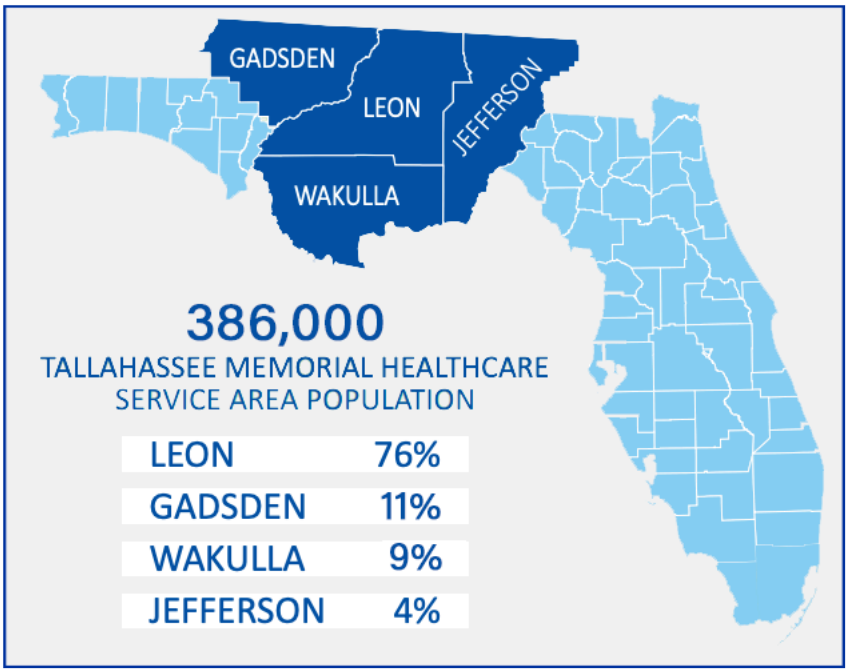
Introduction

Tallahassee Memorial HealthCare (TMH) located in Tallahassee, FL is a private, not-for-profit community healthcare system committed to transforming care, advancing health and improving lives with an ultimate vision to be known as the most engaged and supportive organization in America. TMH is comprised of a 772-bed acute care hospital, a psychiatric hospital, multiple specialty care centers, three residency programs, 38 affiliated physician practices and partnerships with Doctors' Memorial Hospital, Weems Memorial Hospital, Calhoun-Liberty Hospital, Florida State University, Wolfson Children's Hospital, Apalachee Center, Big Bend Hospice and Radiology Associates. TMH is a key anchor institution focusing on improving the health of the communities we serve. With ongoing dedication to the health of our region, we advance care through clinical services, medical education, research and community health investments. The purpose of this Implementation Strategy is to describe what Tallahassee Memorial HealthCare plans to do to address the community health needs identified in the Community Health Needs Assessment (CHNA), published September 29, 2022. It is our intention to work diligently with stakeholders and partners to address as many of the complex health needs identified as possible with the greatest community impact.

Community Served

Tallahassee Memorial HealthCare's primary service area, comprised of Gadsden, Jefferson, Leon and Wakulla counties, has a total population greater than 386,000, according to the most recent American Community Survey by the United States Census Bureau. Seventy-six percent of the population lives in Leon County, with Gadsden, Wakulla and Jefferson counties comprising 11%, 9% and 4%, respectively. The four counties differ greatly in age, race, socioeconomic status and health outcomes of residents. Please visit TMH.ORG/CHNA to view the full report.

Tallahassee Memorial HealthCare is based in Tallahassee, the core city in the Tallahassee Metropolitan Statistical Area (MSA), which is made up of the four counties that comprise TMH's primary service area. The Tallahassee MSA is in Florida's Big Bend region, which stretches across northern Florida from the Aucilla River westward to the Apalachicola River, encompassing St. Marks National Wildlife Refuge and the Apalachicola National Forest. Leon County is bordered to the south by Wakulla County and to the east by Jefferson County.



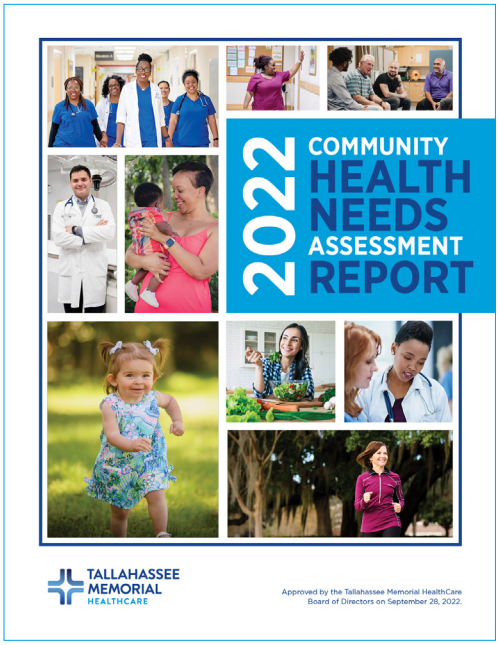
Gadsden County lies to the west and, like both Leon and Jefferson counties, is bordered to the north by southwest Georgia. Jefferson and Wakulla counties are on the Gulf of Mexico and their landscapes include salt marshes and oyster reefs, as well as a mix of agricultural land, hardwood and pine forests, lakes, swamps and freshwater springs that characterize much of the region.

Tallahassee Memorial HealthCare determined the definition and scope of the community served by assessing the geographic area representing 80% of its inpatient discharges and outpatient services (ambulatory surgery services). For this CHNA, the defined service area includes Gadsden, Jefferson, Leon and Wakulla counties. These counties comprised nearly 80% of Tallahassee Memorial's annual patient volume from 2019 to 2021, with Leon County alone accounting for almost 55% of patient volume. (Data Source: Agency for Healthcare Administration, Florida Inpatient State Data)

The target populations for TMH's CHNA project consist of the following groups: low-income individuals, uninsured and under-insured individuals, populations with barriers to accessing healthcare and other necessary resources, populations living with chronic diseases and minority groups facing significant health disparities. Partners and stakeholders were engaged to assist in reaching these target populations because barriers such as transportation, language, literacy, health and financial situation may limit participation.

Community Health Improvement Process

Community Health Needs Assessment



Tallahassee Memorial's Community Health Needs Assessments are community-driven projects. The success of the CHNAs is highly dependent on the involvement of citizens, health and human service agencies, businesses and community leaders. The TMH CHNA Advisory Committee directed the planning and execution of the CHNA process and activities. The assessment included primary and secondary data collection, analysis and prioritization of significant health needs.

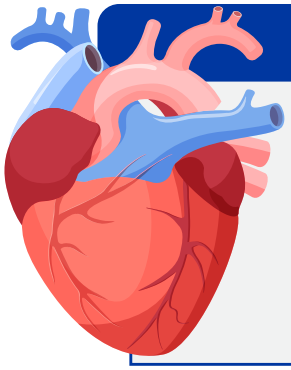
Community partner and stakeholder collaborations were essential in distributing and collecting community health surveys and soliciting valuable input through health department groups. The partners and stakeholders consist of health and human service agency leaders, persons with special knowledge of or expertise in public health, local health departments and leaders/representatives of those who are medically underserved, people with chronic diseases, and low-income and minority populations. The CHNA Advisory Committee invited partners and stakeholders to attend both the CHNA Community Health Partners Meeting in May 2022 and the Prioritization of Needs Meeting.

The TMH Board of Directors approved the 2022 CHNA on September 25, 2022. Please visit TMH.ORG/CHNA to view the final report.

Significant Health Needs of the Community

Compared to the findings of the 2019 CHNA, the 2022 CHNA shows that there remain vast and distinct disparities for community members based on locality of residence (both county and specific neighborhoods/areas), age and race/ethnicity. Disparities in the social determinants of health – including higher poverty rates, lower academic attainment rates and higher unemployment rates – are more evident in Gadsden and Jefferson counties, compared to Leon and Wakulla counties and statewide averages.

Like the 2019 CHNA survey, the 2022 CHNA data continues to reveal that residents of all four counties report high rates of missed activities due to poor physical and/or mental health days. Adult obesity rates in all four counties exceed the state average. Fewer than 20% of adults are eating the recommended fruit and vegetable servings per day and well below half of Community Health Survey (CHS) respondents reported meeting minimum physical activity recommendations in all four counties.



HEART DISEASE

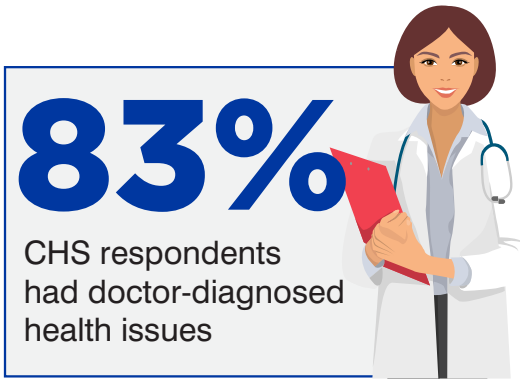
Heart disease is the leading cause of death in Leon, Wakulla and Gadsden counties.
The mortality rate due to heart disease in Wakulla County is 46% higher than Florida's rate

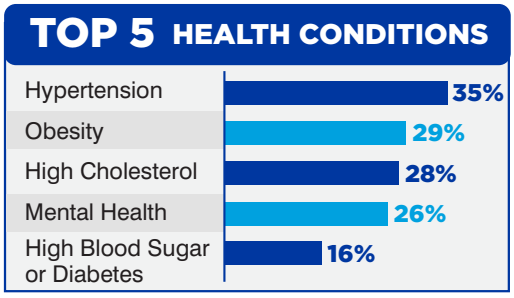
Heart disease is the leading cause of death in all counties except Jefferson County, where cancer is the leading cause of death. The mortality rate due to heart disease in Wakulla County is notably higher than the rate of the other counties and the state. Cancer was the second leading cause of death in the primary service area for Gadsden, Leon and Wakulla counties.

Half of CHS respondents indicated they were not able to access healthcare services when needed and cited cost, wait times, scheduling constraints and lack of convenient appointment times as barriers to care.

Reported preventive health screening rates were also notably lower among Black or African American respondents. In women between ages 40 and 75 who had a mammogram in the past one to two years, almost 20% fewer Black or African American respondents reported having the screening compared to White respondents. Colon cancer screening rates showed a similar disparity with a more than 20% gap between screening rates of Black or African American respondents and White respondents.

Eighty-three percent of CHS respondents had doctor-diagnosed health issues. The five most prevalent health conditions reported were hypertension (35%), obesity or overweight (29%), high cholesterol (28%), mental health problems such as depression and anxiety (26%) and high blood sugar or diabetes (16%).





Partners and stakeholders cited lack of transportation, poverty, high cost of medical services or prescriptions, lack of or insufficient health insurance and limited health literacy as the top five major barriers to the populations they serve. The Community Stakeholder Survey also indicated a significant portion of the populations served experience discrimination, specifically racism, resulting in a negative impact on health outcomes due to denial of services or mismanagement of care.

To prioritize change, partners and stakeholders indicated strategies to address access to care, cost of care, health equity challenges and health education, which aim to reduce barriers to health and close gaps in care in the communities served. By meeting communities and individuals where they are, targeting at-risk communities and providing more cost-effective healthcare, healthcare and health services providers may be able to drive improvements in community health more effectively.

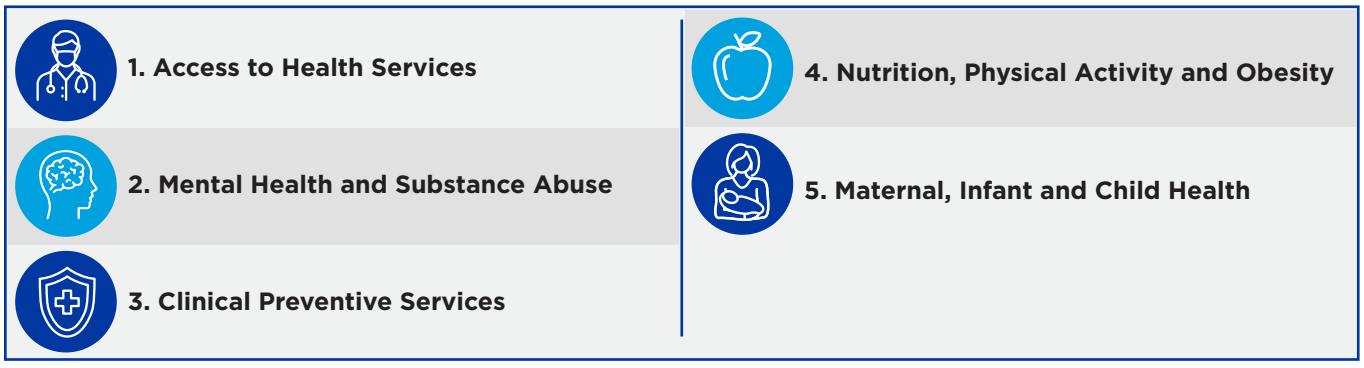
Significant Health Needs to be Addressed

On May 24, 2022, the CHNA Advisory Committee, partners and stakeholders participated in an interactive exercise to identify the greatest needs in the service area based on the primary and secondary data presented. Over 70 people attended the meeting and participated in the exercise. The top five significant needs that emerged from this meeting include:

1. Access to Health Services
2. Mental Health
3. Preventive Health Services
4. Nutrition, Physical Activity and Obesity
5. Substance Abuse

The top needs from the prioritization exercise mirrored those identified by community members in the Community Health Survey. Participants were also asked if they considered maternal, infant and child health services a need that should also be addressed and 100% of respondents agreed.

The CHNA Advisory Committee reviewed and discussed the results of the priority rankings and TMH's Mission, Vision and Strategic Plan. After this review and discussion, the CHNA Advisory Committee recommended the following final priorities:



Implementation Strategy Development

The TMH CHNA Implementation Strategy Steering Committee, along with committee members from the designated priority areas, developed this Implementation Strategy document and plan based on a full review of the CHNA data, significant health needs to be addressed, existing programs and services, and gaps in care/services. The committee attended strategic planning sessions beginning September 2022. The Implementation Strategy Development was guided by the TMH CHNA Advisory Committee. The following team members participated in the Implementation Strategy development:

Advisory Committee

Tallahassee Memorial HealthCare CHNA Advisory Committee

- Committee Lead: Afaf Qasem, Director of Health Promotion
- Committee Lead (until 2/15/2022): Melissa Dancer, Director of Health Promotion
- Committee Co-Lead (until October 2022): Nate Myers, Director of Strategy and Business Planning

Committee Members

- Lauren Faison-Clark, Administrator of Regional Development, Population Health and Telemedicine
- Bob Carton, Director of Employee Assistance Program
- Russ Cole, MD, Faculty Physician, Family Practice Residency Program
- Maria Andrews, MD, Faculty Physician, Family Practice Residency Program
- Rachel Francis, Controller
- Jenny Lannom, Director of Spiritual Care
- Mary Matthews, Corporate Compliance and Privacy Officer
- Greg Salyer, Public Relations/Communications Strategist
- Paige Stewart, Child Health Educator/Safe Kids Big Bend Coordinator
- Kelly Leffler, Population Health Manager
- Destiney Burt, Public Relations/Communications Strategist

Steering Committee

- Afaf Qasem, Director of Health Promotion
- Nate Myers, Director of Strategy and Business Planning (through October 2022)
- Kelly Leffler, Manager of Population Health
- Lauren Faison-Clark, Administrator of Regional Development, Population Health and Telemedicine

Committee Leads and Members of Each Health Priority Area

1. Access to Health Services

Leads

- Jared Cotton, Assistant Director of Health Information Management, Medical Records
- Faith Cruz, Director of Clinical Services, TMH Physician Partners
- Justin Sharpe, Physician Recruiter

Members

- Ashley Duke, Nurse Practitioner, TMH Physician Partners – Primary Care in Quincy
- Kristen Booker, Director of Business Development, Marketing and Communications
- Paul MacFarlane, MD, Chief Resident Physician, Family Medicine Residency Program
- Amanda Maxwell, Physician Assistant, TMH Physician Partners – Hospital-Based Care
- Amre Ghiba, Project Manager, Project Management Office

2. Nutrition, Physical Activity and Obesity

Leads

- Cierra Mathis, Clinical Dietitian, Metabolic Health Center
- Dawn Springs, Director, Metabolic Health Center
- Tonya Little, Program Development & Communications Strategist, Premier Health & Fitness Center

Members

- Amy Jacobs, Dietitian, Metabolic Health Center
- Karin D'Amico, Nurse Practitioner, Metabolic Health Center
- Todd DelCalzo, Executive Director, Premier Health & Fitness Center
- Christine Morse, Fitness Coordinator, Premier Health & Fitness Center
- Stephen Smith, Clinical Nutrition Manager, Food and Nutrition Department

3. Clinical Preventive Services

Leads

- Tammy Boisseau, Quality Assurance Coordinator, Practice Management
- Corban Duggar, Quality Assurance Coordinator, Practice Management

Members

- Shewanda Sanders, Practice Manager, TMH Physician Partners – Primary Care in Quincy
- Tamara MetCalf, Practice Manager, TMH Physician Partners – Primary Care in Wakulla
- Tsige Tadesse, Quality Assurance Manager, Family Medicine Residency Program
- Regina Campbell, Lean Six Sigma Advisor, Organizational Improvement
- Tracey Holleman, Director of Digital Strategy, Marketing and Communications
- Maria Andrews, MD, Faculty Physician, Family Medicine Residency Program

4. Maternal, Infant and Child Health

Leads

- Kim Outlaw, Administrator, Women's and Children's Services
- Sherry Kendrick, Manager of Outpatient Education and Community Service
- Paige Stewart, Child Health Educator, Population Health Department

Members

- Breanna Darnell, Social Worker, Family Medicine Residency Program
- Hope Richards, Lactation Consultant, Family Care Unit
- Miriam Gurniak, Certified Nurse Midwife, Family Medicine Residency Program
- Millie Bruce, Nurse, Family Medicine Residency Program

5. Mental Health and Substance Abuse

Leads

- Heather Lincicome, Administrator, Behavioral Health Center and Chief Liaison Officer, Apalachee Center
- Jay Reeve, CEO, Apalachee Center
- Mary Matthews, Corporate Compliance Officer and Health Information Management (HIM) Executive

Members

- Sue Conger, Chief of Operations, Apalachee Center
- Amberly Smith, Improvement Advisor, Apalachee Center
- Andrea Brooks-Tucker, Director of Inpatient Services, Behavioral Health Center
- Jamesica Perry, Nurse Manager, Behavioral Health Center
- Lindy Burnett, Improvement Advisor, Behavioral Health Center
- Kenneth Speights, Manager of Social Work, Behavioral Health Center
- Leanne Adkins, Director of Project Management, Project Management Office

Fiscal Years 2023 – 2025 CHNA Implementation Strategy

Priority Area: Access to Health Services

Long-Term Goals:

1. Decrease barriers to access healthcare
2. Provide more flexible and accessible options to access healthcare

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Increase utilization of telemedicine	Persons with diabetes living in rural areas of Gadsden, Jefferson and Wakulla counties	Provide telemedicine visits with diabetes educators	Increase number of telemedicine visits with a diabetes educator	Tallahassee Memorial Metabolic Health Center Rural ambulatory clinics
	Residents of Leon County experiencing homelessness	Providing telemedicine services to address immediate healthcare needs	Increase access to non-emergent care as measured by the number of telemedicine clinic visits completed at the Kearney Center	The Kearney Center Connecting Everyone with Second Chances (CESC) Apalachee Center Leon County Emergency Services
	Patients of TMH's inpatient, outpatient and ambulatory clinics	Create a multidisciplinary Telemedicine Advisory Board	Develop superusers and standardize and improve workflows Evaluate technology to improve functionality Increase total number of meetings Increase telemedicine utilization	TMH Physician Partners TMH Population Health/ Regional Development
Increase access to healthcare services for residents of Wakulla County and 32304 ZIP code	Residents of Wakulla County and 32304 ZIP code	Develop an Urgent Care Center that will be more accessible to residents of Wakulla County and 32304 ZIP code Offer extended hours through Urgent Care Centers and walk-in clinics	Increase in number of residents from 32304 and Wakulla County utilizing TMH's Urgent Care Centers Decrease in number of residents from 32304 and Wakulla County utilizing TMH's ERs Increase volume of same-day appointments	TMH Ambulatory Care Leon County Health Department Residents of 32304 TMH Physician Partners in Wakulla

Priority Area: Access to Health Services

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Improve access to transportation to medically related services	Vulnerable populations	Establish additional programs/services to reduce transportation barriers and increase affordable transportation options	Increase number of rides available for vulnerable populations Decrease cost per ride	Rideshare providers, taxi companies TMH Foundation 211 Big Bend
Evaluate disparities to address and identify existing gaps in services	TMH's primary service area	Collaborate with TMH's Diversity, Equity and Inclusion (DEI) Council to develop and implement project "assessment" questions related to diversity, equity and inclusion (DEI) Develop a standard to review data through an equity lens for the reporting of race, ethnicity, age, language (REAL), ZIP code and county data.	Reduction in health disparities among target populations Identify health disparities and gaps in care	FSU College of Medicine TMH's DEI Council
Improve health literacy related to access to healthcare	TMH's primary service area	Collaborate with stakeholders to develop multi-lingual educational resources to help patients navigate the healthcare system	Increased availability of educational resources in different languages	Local Health Departments International Rescue Committee Federally Qualified Health Centers (FQHCs) TMH Patient Experience, Corporate Compliance and Marketing City of Tallahassee Neighborhood Affairs

Priority Area: Nutrition, Physical Activity and Obesity

Long-Term Goals:

1. Increase access to nutritious food
2. Increase fruit and vegetable consumption
3. Increase participation in physical activity
4. Increase water consumption and decrease sugar-sweetened beverage consumption

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Educate and support elementary school students in increasing water consumption (and decreasing sugar-sweetened beverage consumption)	Children in Title 1 schools	Implement Happy Hydrators curriculum and supply water bottles in one additional school per year Improve water consumption in target population (children) Evaluate the need to supply Hydration Stations at schools at an additional two schools per year	Improve water consumption and decrease sugar-sweetened beverage consumption in target population (children)	Leon County Schools, Title 1 schools TMH Foundation
Support and promote community walking programs	General population	Develop walking program(s) focusing on free and accessible local options Expand local opportunities into four counties	Promote free, accessible outdoor physical activity options Increase physical activity levels of residents	MOVE Tallahassee Premier Health & Fitness Center and other fitness centers or wellness organizations Trail and running organizations
Educate and support low-income families in increasing fruit and vegetable consumption at local farmers markets	Low-income families (target ZIP code: 32304)	Partner with Second Harvest of the Big Bend to offer SNAP-Ed at farmers markets located in underserved areas (in four counties)	Increase in education offered at farmers markets	Community stakeholders (i.e., county residents, Frenchtown and Southside community) Second Harvest of the Big Bend

Priority Area: Nutrition, Physical Activity and Obesity

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Increase access to nutritious food by addressing food insecurity in the Big Bend region	Employees and community members in the Big Bend region	Implement food insecurity intervention (nutrition and financial planning education) through TMH's Employee Assistance Program Implement community-based seminars in TMH's primary service area (Leon, Gadsden, Wakulla and Jefferson counties) Conduct one community food security summit Recruit dietetic and social work student interns to provide education to participants of grant intervention	150 employees over four years will graduate from program with skills on navigating food insecurity Community members will attend six seminars a year over four years; 720 total seats Number of seminars conducted in the four counties Two community summits conducted Five dietetic students and 3-5 social work students recruited each semester	UF/IFAS Extension Office TMH's Employee Assistance Program FL Blue Foundation TMH Foundation Sodexo Community stakeholders/partners Florida State University

Priority Area: Mental Health and Substance Abuse

Long-Term Goals:

1. Expand prevention and support services for emotional and social wellbeing
2. Increase awareness and skills to assist individuals experiencing mental health or substance use-related crisis
3. Raise public awareness of issues and resources

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Improve access to community-based, preventive emotional and social wellbeing services	Community members	Partnership with the Apalachee Center and Bethel Missionary Baptist Church (servicing individuals residing in 32304 ZIP code and the Frenchtown area) to provide outpatient mental health services	Increase in the number of participants each year	Apalachee Center Bethel Missionary Baptist Church TMH's Behavioral Health Center
		Establish Intensive Outpatient Program in 2023, providing treatment for co-occurring mental health and substance use disorders	Establish baseline participation with increase in the number of participants each year	
		Establish Partial Hospitalization Program in 2025, providing intensive treatment for co-occurring mental health and substance uses disorders	Establish baseline participation with increase in the number of participants each year	
		Expand individual child and adult psychotherapy and medication management services (virtual and in-person)	Establish baseline participation with increase in the number of participants each year	
		Expand Florida Assertive Community Treatment Team (FACT) into Gadsden and Wakulla Counties	Establish baseline participation with increase in the number of participants each year	
		Expand referrals to NAVIGATE program	Establish baseline participation with increase in the number of participants each year	
		Implement Bradley REACH Program at Apalachee Center's Virtual Adolescent Partial Hospitalization and Intensive Outpatient programs		

Priority Area: Mental Health and Substance Abuse

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Improve community members' knowledge and skills to assist individuals in crisis and connect to mental health services	Target vulnerable population based on need	Collaborate with organizations and other community groups to offer Mental Health First Aid (adult/adolescent) for all surrounding counties	Increase in two classes offered each year	Apalachee Center TMH's Behavioral Health Center
Participate in Mental Health Council (MHC) of the Big Bend	Community stakeholders, providers	The aim of the MHC is to foster an evidence-based approach to determine needs and solutions to mental health and substance abuse and to provide a think tank for stakeholders in this region	Attendance at 90% of monthly Mental Health Council meetings Attendance and participation in the "Be Kind to Your Mind" annual event	Apalachee Center TMH's Behavioral Health Center
Expand education and services available through TMH's Employee Assistance Program (EAP) and Behavioral Health Center	Community stakeholders	Organize and execute education for stakeholders on how to access resources provided through the Employee Assistance Program and the Behavioral Health Center	Develop educational materials and focused education on EAP and behavioral health programming Develop and disseminate monthly leadership newsletters for EAP community stakeholders	TMH's EAP TMH's Behavioral Health Center TMH Marketing
Expand Critical Incident Stress Management (CISM) program and services available to community stakeholders to support wellbeing	EAP contract stakeholders	Continue expansion of CISM program into community and stakeholders	Offer at least three CISM debriefings Members of CISM team will meet quarterly	TMH's EAP TMH's Behavioral Health Center

Priority Area: Clinical Preventive Services

Long-Term Goal:

1. Increase community awareness of preventive health services, including their purpose and how to access them

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Assess and intervene on social determinants of health (SDOH) – transportation, housing, utilities, food and safety	All TMH patients	Begin assessing SDOH in both inpatient and ambulatory care settings Develop and implement an intervention plan for each SDOH assessed Assess the utilization of a software solution to connect with community partners on SDOH interventions	**Screening**: TMH's systems (Cerner and AllScripts) will be able to report the total number of patients assessed for SDOH **Reporting**: The systems (Cerner and AllScripts) will be able to report the number of positive screenings for each SDOH and interventions provided **Interventions**: The group will identify evidence-based intervention strategies and/or referrals to community organizations to address the SDOH needs identified during screening **Communication**: Members of the patient's care team will be able to see the outcome of community-based referrals/interventions	211 Big Bend

Priority Area: Clinical Preventive Services

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Increase education and access to clinical preventive services associated with low compliance Healthcare Effectiveness Data & Information Set (HEDIS) Measures **Focus areas may include but are not limited to:** **Colon Cancer Screening, Diabetic Retinal Eye Exams, Diabetic A1C Control**	Community members	Complete three (evaluate number pending marketing availability) marketing posts/publications per year focused on educating the community on why the screenings are important and how to access services Employ a Rural Health Network Marketing Strategist; target clinical preventive services and access in rural counties	Impact report for each marketing post/ publication a. Content Area b. Focus Population c. Reach d. Engagement e. Marketing Markers	TMH Marketing Local News Partners
Complete a needs assessment to increase access to targeted clinical preventive services in each of the four CHNA counties	Community members	Develop a needs assessment tool to determine the availability of clinical preventive services (and associated follow-up pathways) in each CHNA county Select at least one clinical preventive service per year to develop a strategy to increase access (focus on underserved populations)	Complete a needs assessment for access to clinical preventive services: 1. Identify 5-10 targeted clinical preventive services 2. Develop a list of available resources in each county for each target population 3. Compare population size, and any associated utilization data 4. Determine areas of need for additional access 5. Complete a Focused Strategic Plan to increase access to clinical preventive services in at least one focus area	Diabetes Empowerment and Smoking Cessation – Big Bend AHEC Infectious disease screening and treatment, family planning, immunizations, breast and cervical cancer screenings County Health Departments – Leon, Gadsden, Jefferson and Wakulla

Priority Area: Clinical Preventive Services

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Provide preventive health education/ screening in TMH's primary service area	Community members	Compile a list of current/past community health screening events with TMH participation Determine strategy for selecting with/engaging in community requests (focus on underserved areas or targeted disparities including 32304) Create a consolidated community calendar with all outreach events Participate in at least four community events per year in each of the counties Develop a strategy to increase TMH colleague participation Develop new partnerships with community organizations that currently provide clinical preventive services	Impact report for each event a. Date/Time b. Location c. Content Focus Area(s) d. Estimated Number of Participants Present e. Number of referrals to or screenings complete f. Number of events in community benefit reporting system	TMH's Trauma Team and Leon County EMS – Operation Prom Night American Heart Association – Heart Walk Southside Farmers Market TMH Marketing – Baby & Family Fair TMH Colleague Health

Priority Area: Maternal, Infant and Child Health

Long-Term Goals:

1. Improve maternal health literacy and multi-lingual educational resources available to patient population
2. Expand asthma-friendly education resources into community
3. Better connect new and expectant mothers with external resources

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Address need for multi-lingual educational resources among patient populations served by the Women's & Children's Service Line to address health equity and health disparities among underserved communities	Women's and Children's Services patients	Work with Patient Experience, Corporate Compliance and Marketing & Communications to expand hospital-wide translation services (in house or contract) Work with other healthcare facilities and partners to determine if they have shareable resources in other languages Connect with DEI Council concerning lack of translated materials and which languages are top priority for translation Work with Women's and Children's Service Line leaders to determine which materials need to be translated and prioritize them	Increase number of translated materials for women's & children's services Identify healthcare partners willing and able to assist with resources in other languages (i.e., Wolfson Children's Hospital) DEI Council will provide input and feedback regarding the plan and process used Several resources will be identified and translated based on population needs identified	Translation company (Language Line) TMH Patient Experience, Corporate Compliance and Marketing TMH's DEI Council Wolfson Children's Hospital
Create avenues to increase education related to asthma management among parents and children	Community members	Build targeted outreach education opportunities in the community with focus on education provided in four counties (Leon, Gadsden, Wakulla, Jefferson) Topics include: supplies (inhalers/ spacers); how to use them for both parents and children; education on environmental cleanliness	Impact report for each education opportunity a. Content Area b. Focus Population c. Reach d. Engagement e. Marketing Markers	Department of Health School districts in TMH's primary service area Wolfson Children's Hospital Physician groups TMH's Respiratory Therapy Department Big Bend AHEC

Priority Area: Maternal, Infant and Child Health

Strategy	Target Population	Activities	Expected Outcomes	Partners or Collaborative Interests
Increase smoking cessation education with expectant and new mothers admitted	Expectant and new mothers admitted	Explore current and new approaches utilized by Big Bend AHEC to identify expectant and new mothers who need smoking cessation Identify referral volume and explore ways for outpatient/ ongoing smoking cessation support for new parents after discharge Educate staff on smoking cessation to educate patients Develop new smoking cessation materials to be reviewed in childbirth and baby care classes Work with marketing team to include smoking cessation education and resources in pregnancy and parenting communications	Better understand current processes and identified approaches Increase in number of referrals and education on smoking cessation through women's and children's services provided Increase in number of staff trained on smoking cessation Increase awareness of the impacts of smoking on parent/ child Increase awareness of the impacts of smoking on parent/ child	Big Bend AHEC Tobacco Free Florida TMH Women and Children's Services TMH Marketing
Collaborate with state Connect Partner and local resources to address the gap in connecting new and expectant mothers with community resources	New and expectant moms	Work with Connect Partner and Healthy Start to place a Connect Partner representative in hospital Establish a plan to improve enrollment rate of patients who are identified as high risk to appropriate community resources such as SNAP, WIC, transportation services, etc.	Increase in hospital's rate of identified high-risk new and expectant mothers connected with community resources available	Connect Partner TMH Women and Children's Services Healthy Start
Standardize patient education on sexual wellness and perinatal care	County Health Departments, rural hospitals, target communities (32304)	Identify community resources available through community-based organizations and determine the gaps	Updated resources available to women's and children's service line	County Health Departments Family Medicine Residency Program

Community Partnerships

Tallahassee Memorial HealthCare has a deep appreciation for collaborative efforts and partnerships. Collaboration with stakeholders, partners and community members is essential in addressing the complex needs of the communities we serve. Tallahassee Memorial HealthCare continues to participate in and provide financial and in-kind support to many coalitions, non-profit organizations, local government and other entities that address health needs and social determinants of health in our region.

Community Benefit Programs Description

Southside Farmers Market and Fresh Fruit and Vegetable Rx Program

The Southside Farmers Market and Fresh Fruit and Vegetable Rx (FFVRx) Program are two initiatives designed to improve access to local, affordable fresh fruits and vegetables and to increase consumption of these foods by Southside Tallahassee residents. Both initiatives began in May 2018 and are implemented in partnership with TMH, City of Tallahassee Neighborhood Affairs and Florida A&M University (FAMU). In addition to healthy foods, each market features entertainment, health education, cooking demonstrations and exhibitors offering education and resources. Since its inception, the Southside Farmer's Market has served over 8,000 participants and infused over $20,000 worth of fresh, local produce and goods into the Southside community.

The FFVRx Program expands the concept and provides educational and skill building experience for participants to manage behaviors affecting nutrition and health. Class participants learn how to select local produce as well as how to prepare these foods in a delicious and cost-effective way. All classes are hands-on and interactive with discussion on preparation, cooking and eating. Class participants receive vouchers to shop for produce at the Farmers Market.

Happy Hydrators

The Happy Hydrators Challenge was initially developed and implemented as part of the Leon County Health Department's Community Health Improvement Plan (CHIP), working collaboratively with Early Childhood Obesity Prevention Work Group (ECOP), Big Bend Area Health Education Center (AHEC), Whole Child Leon, Department of Health in Leon County, FAMU Cooperative Extension and UF/IFAS Extension. TMH has continued this effort and plans to expand this programming into other Title 1 schools as part of the 2023-2025 CHNA Implementation Strategy.

To promote a positive culture of health and inspire students to make healthy choices, the Happy Hydrators challenge has engaged over 830 students, teachers and staff since its inception in 2018. This educational campaign offers third graders from two Title 1 schools a fun and easy way to #swapwaterforsoda and #rethinkyourdrink. Students are taught the benefits and importance of drinking more water and have the opportunity to get creative and "bling" their Happy Hydrator water bottles.

Happy Hydrators have the goal of drinking at least 6 cups of water a day and reducing consumption of sugar-sweetened beverages to one or fewer a day. Prior to the COVID-19 pandemic, when the program had to be put on hold, the program was a huge success with the following results:

1. 93% of children reported that having the Happy Hydrators bottle helped them drink more water
2. 75% of children reported reducing their sugar-sweetened beverage consumption
3. 72% of children said they would recommend this program to other children and schools

In the wake of the COVID-19 pandemic, Tallahassee Memorial HealthCare's Health Promotion Department is evaluating the program to offer a more comprehensive approach to educating students and will continue to offer this program in Title 1 schools in Leon County. We are working on expanding to other counties within TMH's service area.

Safe Kids Big Bend

Safe Kids Big Bend, founded in April 2018, and led by Tallahassee Memorial HealthCare, is part of an extensive network of more than 400 coalitions in the United States. Safe Kids coalitions work to reduce the number of unintentional injuries and death in children 0-19 years of age through community partnerships, advocacy, public awareness, distribution of safety equipment and education of proper use.

The Safe Kids Big Bend coalition works diligently to be a resource to communities and create a safe environment for children. With the expertise of individuals from various organizations such as law enforcement, EMS, service groups, schools, childcare providers, parents and many others, the overall goal is to collectively carry out the Safe Kids mission by addressing safety at home, school, play and "on the way." In addition to various community outreach activities, Safe Kids Big Bend participates in annual programs dedicated to raising awareness on injury prevention.

Nutrition Education for School Children

The Health Promotion team offers school-based lessons that encourage and empower pre-school and elementary school aged children to develop healthy nutrition habits and vital safety skills to improve overall physical and social wellbeing. Since 2018, nutrition presentations have been delivered to over 1,000 students in schools, community centers and after school programs. This program was paused during the COVID-19 pandemic and TMH plans to resume this offering in 2023. We offer the following programs to elementary school students:

I Can Eat a Rainbow

Audience: Preschool through first grade

Goals: By the end of nutrition presentations children:

- Understand the importance of eating five colorful fruits and vegetables daily
- Practice packing a healthy meal
- Reinforce the colors of the rainbow through fruits and vegetables

Mission Nutrition

Audience: Grades 4-5

Goals: By the end of nutrition presentations children:

- Utilize the USDA's MyPlate to make healthy food choices
- Understand how to read food labels and their importance
- Know the difference between serving size and portion size

TMH Health and Wellness at Community Events

Tallahassee Memorial continues to offer health education at community health and wellness events. During the height of the COVID-19 pandemic, TMH was unable to participate in community events. However, the organization was able to participate in many virtual education opportunities and resumed participation in events in 2022. Target populations for community education continue to be driven by the Community Health Needs Assessment as well as partner and stakeholder requests. The most common requests include education on nutrition, smoking cessation, exercise, preventive health services, stroke and heart health.

Worksite Wellness

Tallahassee Memorial supports worksite wellness initiatives through board participation in Working Well, Inc., a local, non-profit organization that helps organizations and businesses design and deliver worksite wellness programs. Working Well also provides free health screenings and other services to employer groups in the community. TMH sponsors the Working Well CEO Breakfast (CEOB) and the Corporate Cup Challenge each year.

The Working Well CEOB is an annual meeting that gathers community business and government leaders to learn about a topic relevant to the health and wellbeing of individuals and functional organizations. The Corporate Cup Challenge is a physical activity challenge that gathers teams of coworkers from different organizations to compete for awards and recognition. In addition, TMH offers customized worksite wellness events, screenings and other activities for employer groups.

Implementation and Measurement

The CHNA Advisory Committee is responsible for oversight of Implementation Strategy execution, measurement and reporting. The Advisory Committee will meet regularly to review processes and progress toward goals. Tallahassee Memorial will report Implementation Strategy progress on each annual Internal Revenue Service Form 990.

Resources

Tallahassee Memorial dedicates staff time and financial resources toward programming and services that are executed as part of this Implementation Strategy.

Priority Areas Not Being Addressed and Why

The following are priority areas not being addressed as part of this Implementation Strategy and the reasons they have not been identified as part of the five priority areas.

Sexually transmitted infections (STI): Although STIs are a significant issue in TMH's primary service area, Tallahassee Memorial believes local health departments and other specialized clinical programs are better equipped to address this issue. TMH actively supports the initiatives of the health departments and coalitions doing this work through in-kind and financial contributions.

Poverty, lower academic attainment and higher unemployment rates in specific locations and populations: While TMH acknowledges the critical importance these social determinants of health play in one's overall health and wellbeing, we assert that these issues must first be addressed at a higher system-wide level with policy changes and supporting infrastructure.

Cost of services: Tallahassee Memorial recognizes this issue and the important role this barrier plays in access to care; however, TMH chose not to address this challenge at this time due to resource constraints and lack of effective interventions to address the needs independently.

Dental services: Although stakeholders and providers have expressed that more dental services for underinsured and uninsured individuals are needed to support the current infrastructure, TMH is not able to provide the resources needed to fill this gap in oral health services available in the TMH primary service area. However, TMH will continue to work with local Federally Qualified Health Centers (FQHCs) to refer patients for dental services needed.

TALLAHASSEE MEMORIAL HEALTHCARE

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