



Community Health Needs Assessment (CHNA)

Implementation Strategy

Fiscal Years FY 24-26



Trinity Health
Mid-Atlantic

Saint Francis
Hospital

Saint Francis Hospital completed a comprehensive Community Health Needs Assessment (CHNA) that was adopted by the Trinity Health Mid-Atlantic Regional Board of Directors on May 25, 2023. Saint Francis Hospital performed the CHNA in adherence with applicable federal requirements for not-for-profit hospitals set forth in the Affordable Care Act (ACA) and by the Internal Revenue Service (IRS). The assessment considered a comprehensive review of secondary data analysis of patient outcomes, community health status, and social influencers of health, as well as primary data collection, including input from representatives of the community, community members and various community organizations.

The complete CHNA report is available electronically at

<https://www.trinityhealthma.org/assets/documents/community-benefit/chna-sfh-2023.pdf>

or printed copies are available at Saint Francis Hospital in person at 701 North Clayton Street, Wilmington, DE 19805.

Our Mission

We, Trinity Health Mid-Atlantic, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Our Hospital

Located in Wilmington, Del., and with 219 licensed beds, Saint Francis Hospital a member of Trinity Health Mid-Atlantic offers numerous outpatient services, a primary care physician network and is a member of the Sidney Kimmel Cancer Network at Jefferson. Saint Francis Hospital offers the shortest ER wait time in New Castle County, Del., and is designated by the state and American College of Surgeons (ACS) as a Level III Trauma Center. The hospital is the basic life support EMS provider for the cities of Wilmington and Dover, Del. Additionally, the hospital partners with Nemours- Children’s Hospital for Level II neonatology care, and partners with Thomas Jefferson University Hospitals for maternal-fetal medicine. Trinity Health Mid-Atlantic is a Regional Health System that includes Mercy Fitzgerald Hospital in Darby, Pa.; Nazareth Hospital in Northeast Philadelphia; Saint Francis Hospital in Wilmington, Del.; St. Mary Medical Center in Langhorne, Pa. and home health and LIFE programs. Trinity Health Mid-Atlantic is a member of Trinity Health, one of the largest multi-institutional Catholic health care delivery systems in the nation.



Our Community Based Services

Saint Francis at Home, a member of Trinity Health Mid-Atlantic, strives to restore patients' health and independence from the comfort of home with award-winning clinical services. Saint Francis at Home, along with other Trinity Health Mid-Atlantic home health programs, delivers a range of home-based health care services to nearly 35,000 patients annually through nearly half a million patient visits. Saint Francis at Home serves New Castle County, Del. Saint Francis LIFE (Living Independence for the Elderly), a nationally recognized Program of All-inclusive Care for the Elderly (PACE), offers all-encompassing medical and social services that enable older adults to remain independent in their homes and communities. Saint Francis LIFE, a member of Trinity Health Mid-Atlantic, serves New Castle County, Del.

Our Community

Saint Francis Hospital primarily serves the City of Wilmington, which has some of the highest socioeconomic needs zip codes in the State of Delaware — 19801, 19802 and 19805. Saint Francis Hospital is in 19805, just blocks from Census Tract 22, a high needs neighborhood. Zip codes considered high needs generally have poorer health outcomes than zip codes in more affluent neighborhoods.

Health and Social Needs of the Community

The CHNA conducted in early 2023 identified the significant needs for health and social drivers of health within the Wilmington community. Community stakeholders then prioritized those needs during a facilitated review and analysis of the CHNA findings. The significant health needs identified, in order of priority include:

1. Behavioral Health	<ul style="list-style-type: none"> • Within the report area, there were 14.56% of adults 18 and older who reported poor mental health in the past month of the total population age 18 and older compared to the US with 13.90%.
2. Housing	<ul style="list-style-type: none"> • Of the 133,930 total households in the report area, 41,384 or 30.90% of the population live in cost burdened households.
3. Food Access	<ul style="list-style-type: none"> • The food insecurity rate for Wilmington is 11.7% compared to the state at 9.7% and the US at 10.22%.
4. Access to Care	<ul style="list-style-type: none"> • The percentage of the population with insurance enrolled in Medicaid (or other means-tested public health insurance) in Wilmington is 24.34% compared to the US with 21.99%.
5. Senior Care Isolation	<ul style="list-style-type: none"> • The county’s senior (65+) population is projected to grow to 30.5 percent between 2020 and 2030, resulting in an increased demand for more seniors focused on health and social services.
6. Chronic Conditions	<ul style="list-style-type: none"> • According to the County Health Rankings, the following New Castle County indicators benchmark unfavorably compared to the US (percentage of the adult population with BMI>30), (percentage of adults reporting no leisure time physical activity)
7. Linguistically & culturally appropriate services	<ul style="list-style-type: none"> • Of the 252,824 total population aged 5 and older in the report area, 12,524 or 4.95% have limited English proficiency when compared the US with 8.25%.
8. Education	<ul style="list-style-type: none"> • In the report area 21.12% or 6,029 children were chronically absent (missing 15 or more school days) during the 2017-18 school year.
9. Health & Health Resource Navigation	<ul style="list-style-type: none"> • A stakeholder from a community-based organization commented, “we need better access to affordable healthy food at more locations”. This speaks to systemic issues such as poverty, income inequalities, and other structural problems requiring coordinated policy and environmental changes.
10. Racism & discrimination in healthcare settings	<ul style="list-style-type: none"> • A stakeholder serving the Hispanic/Latino population commented, “There is a gap in behavioral health and mental health services and resources for the black and brown community.” There is still a stigma among the community leading black and brown people less likely to seek care via the traditional healthcare system.

11. Socioeconomic disadvantage

- The Area Deprivation Index (ADI) for the selected area is 49 compared to the state which is 43.

12. Community violence

- According to County Health Rankings, reported violent crime offenses per 100,000 population have been much higher in New Castle County (542.90) than in the US (416)
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Hospital Implementation Strategy

Significant health and social needs to be addressed

Saint Francis Hospital, in collaboration with community partners, will focus on developing and/or supporting initiatives and measure their effectiveness to improve the following needs:

- 1 Housing – CHNA pages 105-115.
- 2 Food Access – CHNA pages 74-75, 80-83, 102-104.
- 3 Access to Care – CHNA pages 53-68.

Significant health and social needs that will not be addressed

Saint Francis Hospital acknowledges the wide range of priority health and social issues that emerged from the CHNA process and determined that it could effectively focus on only those needs which are the most pressing, under-addressed and within its ability to influence. Saint Francis Hospital does not intend to address the following needs:

- **Behavioral Health** – Saint Francis Hospital through the Healthy Village transformation will partner with Merakey and Amanecer Counseling & Resource Center to address this significant health need.
- **Senior Care/Isolation** - Saint Francis Hospital will not directly address this need to avoid duplication of efforts currently underway through the Saint Francis Life Program.
- **Chronic Conditions**- Saint Francis Hospital does not plan to directly address this need because of competing priorities, and it was not ranked as highly as other needs chosen.
- **Linguistically and culturally appropriate services** Saint Francis Hospital does not plan to directly address this need because of competing priorities, and it was not ranked as highly as other needs chosen.
- **Health & Health resource navigation**- Saint Francis Hospital will not directly address this need to avoid duplicating efforts already underway.
- **Racism and discrimination in healthcare settings**- Saint Francis Hospital does not plan to directly address this need because of competing priorities, and it was not ranked as highly as other needs chosen.
- **Socioeconomic disadvantage**- Saint Francis Hospital will not directly address this need because the hospital lacks expertise or competencies to effectively address the need.
- **Community violence**- Saint Francis Hospital will not directly address this need because of the system's relative lack of expertise or competency to effectively address the need.
- **Education** - Saint Francis Hospital through the Healthy Village transformation will partner with and Education Institution to address this significant health need.

This implementation strategy specifies community health needs that the hospital, in collaboration with community partners, has determined to address. The hospital reserves the right to amend this implementation strategy if circumstances warrant. For example, certain needs may become more pronounced and require enhancements to the described strategic initiatives. During these three years, other organizations in the community may decide to address certain needs, indicating that the hospital should refocus its limited resources to best serve the community.

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Housing



Goal: Saint Francis Hospital will partner with community-based organizations in support of housing preservation, housing development, and advocacy efforts that focus on the disadvantaged communities where the need is great, but the conventional market is not able to meet that need. This work will advance affordable housing as a platform for creating more equitable and healthier communities.

CHNA Impact Measures	2024 Baseline	2026 Target
Decrease the percentage of occupied housing units in the Saint Francis Hospital service area with one or more substandard condition (Data Source: US Census Bureau, American Community Survey. 2017-21.)	30.50%	28.76%
Increase the financial resources dedicated to improving access to affordable home ownership with use of funds from the Transforming Communities Initiative.	\$50,000	Invest full amount of the award (up to \$350,000 annually)
Increase referrals of patients and residents of the Westside of Wilmington to financial literacy and homeownership education programs.	0	30

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Partner with community-based organization to complete affordable interior and exterior home repairs and modifications that increase the safety, accessibility, condition, and livability of the home for low income and elderly homeowners to advance housing and health equity.	X	X	X	Saint Francis Hospital	\$30,000 per year will be given to Cornerstone West CDC to complete home repairs
	X	X	X	Saint Francis Hospital	Durable Medical Equipment through the Trinity Health Mid-Atlantic CARES program
	X	X	X	Cornerstone West CDC	In-kind (staff time)
				Focus location(s)	Focus Population(s)
				Zip codes 19801, 19802 and 19805	Low/moderate income seniors Seniors living in high priority zip

					codes
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Working with a collaborative we will define 2-3 strategies and develop a workplan to address at least one policy, system, and environmental transformation initiative to improve access to home ownership to preserve a mixed-income community through the Transforming Communities Initiative.	X	X	X	Saint Francis Hospital	In-kind (staff time), TCI match funding
	X	X	X	Westside Grows Together	In-kind (staff time) & Volunteer time
	X	X	X	Cornerstone West CDC	In-kind (staff time)
	X	X	X	Trinity Health	Grant funding through TCI
				Focus location(s)	Focus Population(s)
				Zip codes 19801, 19802 and 19805	Residents of West Side Wilmington
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Partner with area nonprofits to provide home buyer education and financial literacy programs. Providing outreach and resource dissemination to hospital clients and community.	X	X	X	Saint Francis	In-kind (staff time)
	X	X	X	NeighborGood Partners	In-kind (staff time), Virtual training
	X	X	X	Cornerstone West CDC	In-kind (staff time)
		X	X	Interfaith Housing	In-kind (staff time)
	X	X	X	West Side Neighborhood House	In-kind (staff time)
					Focus location(s)
				Zip codes 19801, 19802 and 19805	Residents of West Side Wilmington

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Food Access



Goal: Expand resources during the CHNA cycle that are directed at this priority topic so that we can increase capacity of community-based organizations to address present barriers to equitable food access including high cost of foods, limited food options within a neighborhood, and limited ability to navigate via transportation to food resources.

CHNA Impact Measures	2024 Baseline	2026 Target
Decrease the number of food insecure community members in predominantly black & brown neighborhoods with limited or no access to healthy food by 2 percentage points by the year 2026 to align with DE state numbers. (Feeding America, 2020)	11.7%	9.7%
Increase number of trusted food network partners within the community resource directory accepting food resource referrals by 5 by 2026 (Find Help).	2	7
Increase number of social needs screenings to 60% for patients with a focus on screening patients living in Saint Francis Hospital service area.	42.85%	60%

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Provide services which distribute food directly to people where they live, especially in neighborhoods with limited or no access to healthy food. Ensuring more equitable access to food assistance programs and resources in Wilmington.	X	X	X	Saint Francis Hospital	In-kind (staff time) and financial resources as needed
	X	X	X	Lancaster Farm Cooperative	In-kind (staff time)
	X	X	X	Food Bank of DE	In-kind (staff time)
	Focus location(s)				Focus Population(s)
	Zip codes 19801, 19802 and 19805			Seniors and those who are food insecure	
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Screen patients using Epic social needs screening tool to support those in need of food resources and programs supporting access to healthy foods.	X	X	X	Saint Francis	In-kind (staff time)
	X	X	X	Find Help	In-kind (staff time)
	X	X	X	ACO/CIN	In-kind (staff time)
	Focus location(s)				Focus Population(s)
	Zip codes 19801, 19802 and 19805			Seniors and those who are food insecure	
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Ensure that that community is able to access community-based	X	X	X	Saint Francis Hospital	In-kind (staff time) and financial resources as needed

resources by partnering with CBOs and to provide services including: Cooking Courses, Community Garden, Nutrition Education at the Food Pantry & food pharmacies	X	X	X	Food Bank of DE	In-kind (staff time)
	X	X	X	Cornerstone West CDC	In-kind (staff time)
	X	X	X	Green for the Greater Good	In-kind (volunteer time)
	Focus location(s)				Focus Population(s)
	Zip codes 19801, 19802 and 19805				Seniors and those who are food insecure

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Access to Care



Goal: Prioritize access to high-quality, equitable and affordable health care and social services when and where they need it, for the residents of Wilmington.

CHNA Impact Measures	2024 Baseline	2026 Target
Increase number of Lyft rides to healthcare services & appointments for patients identified by THMA Care Coordination team by 10% annually.	54	72
Increase the number of translation and interpreter services used in ambulatory and community settings with high concentration of immigrant and refugee populations by 2% from baseline through 2026.	Establish baseline in 2024	Increase 2% annually over next 3 years
Increase community health worker integration into the Healthy Village at Saint Francis, ambulatory services, and in community partners with high volume of uninsured or underinsured from 1 to 6 CHWs in three years.	1 CHW	6 CHWs
The number of un or under insured persons receiving health & social care through mobile services and co-located partners within the Healthy Village at Saint Francis	Establish baseline in 2024	Increase 2% annually over next 3 years

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Increase transportation assistance, including adding options for those not eligible for certain benefits.	X	X	X	Saint Francis Hospital	\$6,000 annually
	X	X	X	Lyft	In-kind (staff time)
	X	X	X	THMA Care coordination team	In-kind (staff time)
	Focus location(s)			Focus Population(s)	
	Zip codes 19801, 19802 and 19805			Safety-nets patients, ACO/CIN	
Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Provide onsite language interpreters by certifying colleagues for in person translation and health education materials in diverse languages.	X	X	X	Saint Francis Hospital	In-kind (staff time)
	X	X	X	Language Service Associates	In-kind (staff time)
	X	X	X	Language Testing International	In-kind (staff time)
	Focus location(s)			Focus Population(s)	
	Zip codes 19801, 19802 and 19805			Low or Non-English Speaking patients Immigrant/refugee population	
Strategy	Timeline	Hospital and Committed Partners		Committed Resources	

	Y1	Y2	Y3	(align to indicate committed resource)	(align by hospital/committed partner)
Embed Community Health Workers into the Healthy Village at Saint Francis, primary care practices & community partner's SIOH resource sites.	X	X	X	Saint Francis Hospital	In-kind (staff time)
		X	X	Merakey	In-kind (staff time)
	X	X	X	ACO/CIN	In-kind (staff time)
				Focus location(s)	Focus Population(s)
				Zip codes 19801, 19802 and 19805	Homeless, under or uninsured

Strategy	Timeline			Hospital and Committed Partners (align to indicate committed resource)	Committed Resources (align by hospital/committed partner)
	Y1	Y2	Y3		
Provide health and social services directly to underserved communities via mobile social & health services co-located in the Healthy Village at Saint Francis.	X	X	X	Saint Francis Hospital	In-kind (staff time)
	X	X	X	Merakey	In-kind (staff time)
		X	X	Amanecer	In-kind (staff time)
	X	X	X	Community Aid Refurbished Equipment Store	Durable medical equipment
		X	X	Catholic Charities	In-kind (staff time)
					Focus location(s)
				Zip codes 19801, 19802 and 19805	Homeless, under or uninsured

Adoption of Implementation Strategy

On September 28, 2023, the Trinity Health Mid-Atlantic Regional Board of Directors for Saint Francis met to discuss the 2024-2026 Implementation Strategy for addressing the community health and social needs identified in the 2024 Community Health Needs Assessment. Upon review, the Board approved this Implementation Strategy and the related budget.



James Woodward, President & CEO Trinity Health Mid-Atlantic

10/10/2023

Date

