



FISCAL YEAR 2024 (JULY 1, 2023 - JUNE 30, 2024)

Community Impact Report



who we are

OUR MISSION

We serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities

OUR CORE VALUES

Reverence

Commitment to Those Experiencing Poverty

Safety

Justice

Stewardship

Integrity

OUR VISION

As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.

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LETTER FROM OUR PRESIDENTS

Dear Friends,

Being a compassionate and transforming healing presence within our communities means extending our reach well outside the walls of our hospitals and health centers. It compels us to provide care wherever it's needed to whoever's in need. Mount Carmel Community Health & Well Being is the instrument of that mission.

In 2024, our CHWB programs and providers continued and advanced their amazing work throughout central Ohio, making the lives and health of our neighbors and communities that much better.

Our Street Medicine program provided free quality care to more than 6,000 uninsured and underinsured patients, reducing unnecessary emergency room visits and helping them create a more vital, harmonious, and sustainable life.

By offering new moms and babies a special, free in-home or telehealth visit, the nurses in our Welcome Home program made sure our newborns were healthy and safe and their moms were healing, recovering, and supported.

Our Housing Outreach specialists met with dozens of patients living on the land to connect them with shelter, assist them with housing program applications, and provide transportation and documentation assistance so they could enter housing. Their efforts helped 98 community members successfully move from street homelessness to housing this year.

Through our Social Needs Screening program, more than 98,000 patients were screened and identified for needs like food access, financial assistance, and social isolation so they could be connected with supportive community programs. And our Community Resource Directory continued to connect community members with free and reduced-cost health resources and social services close to home.

These are just some of the truly transformative CHWB programs and services you'll read about in this report, and none of them would be possible without your selfless and generous support. Thank you for your investment, your partnership, and your prayers as we continue this essential work and the eternal mission behind it.

With gratitude,



A handwritten signature in black ink that reads "Tauana McDonald".

Tauana McDonald

President and CEO,
Mount Carmel Health System



A handwritten signature in black ink that reads "Brian Pierson".

Brian Pierson

President and COO,
Mount Carmel Grove City



Through our Social Needs Screening program, more than 98,000 patients were screened and identified for needs like food access, financial assistance, and social isolation so they could be connected with supportive community programs.

ABOUT COMMUNITY HEALTH & WELL-BEING

Mount Carmel's Community Health & Well-Being strategy promotes optimal health for people experiencing poverty and other vulnerabilities in the communities we serve by investing in our communities, addressing patient social needs, and impacting social influencers/determinants of health to achieve health and racial equity. Our departments extend our reach into the community and helps to provide free health services to those in need. Among the services the program provides are physical exams, diagnoses and treatments, health assessments and screenings, health education, referrals, and social service assistance.

These programs bring comfort and hope to more than 125,000 central Ohioans each year and is as considerable a benefit to the community as it is to the patients and families it serves.

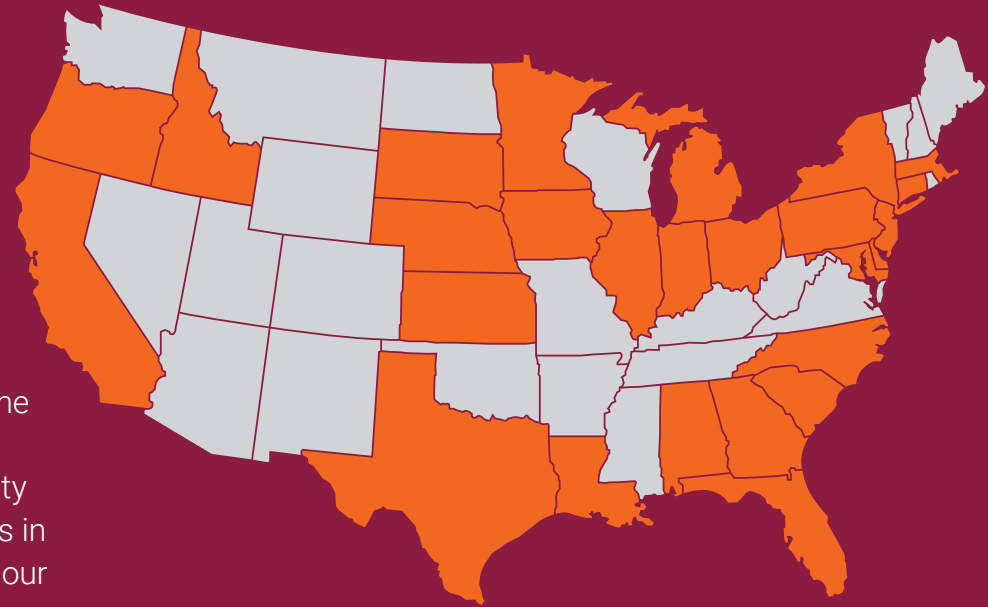
In FY24, the impact Mount Carmel's Community Health & Well-Being programs provided to central Ohioans through free health services, outreach programs and other initiatives exceeded \$3.4 million.



Mount Carmel's Street Medicine mobile coach.

MOUNT CARMEL IS A MEMBER OF TRINITY HEALTH
**ONE OF THE LARGEST CATHOLIC
HEALTH SYSTEMS IN THE NATION**

Our Ministry benefits from being a member of Trinity Health through educational opportunities offered by our national partners such as the Healthcare Anchor Network, National Partnership to Align Social Care, the Healthcare Transformation Taskforce, Catholic Health Association and many more. We also benefit from national initiatives such the Community Investing Program - making low-interest rate loans to improve conditions in our communities and through Shareholder Advocacy where we amplify our shareholder voice to advance improvements in corporate social behavior that ultimately advance health equity across the United States.



26 States



1.4M Attributed lives



\$2.2B in Community Impact
including \$1.3B in IRS-defined Community Benefit



153 Community Health Workers



93 Hospitals*



15 Clinically Integrated Networks



60 Safety Net Health Centers



10 Diabetes Prevention Programs

*Owned, managed or in JOAs or JVs.

MOUNT CARMEL AT A GLANCE



8,200 Colleagues



5 Hospitals*



60+ Medical Practices



3 Urgent Care Centers



1 Mobile Health Unit



8 Speciality Services



11 Subspecialty Services



Community Impact

Our Community Impact includes both our investments in serving patients experiencing poverty and investing in our communities that have been, and continue to be, disinvested due to racism and discrimination.

Until the conditions in the communities we serve are safe and all community members have access to high-quality education, health care, affordable food and housing, achieving improvements in health outcomes (individually or as a community) is not possible. This is why Mount Carmel prioritizes integrating social and clinical care and investing in the social influencers of health, we must support individuals and work to improve community conditions – as access to health care and quality of care accounts for only 20% of a person's health.

We recognize the intersection of poverty and racism; therefore, we are committed to applying an equity lens to our interventions and decision making to ensure we are not perpetuating harm but rather promoting health and healing. Our goal is to achieve racial equity - when race can no longer be used to predict life outcomes. This requires the intentional and continual practice of changing policies, practices, systems, and structures by prioritizing measurable change in the communities we serve.

COMMUNITY IMPACT



Our **Community Impact** is more than Community Benefit

There is mounting pressure and criticism of hospital community benefit, however community benefit - as defined by the Internal Revenue Service (IRS) - doesn't tell the entire story of how not-for-profit health care impacts its communities.

Mount Carmel is committed to ensuring we comprehensively report all the IRS-defined community benefit happening across our system, as well as its total Community Impact to fully demonstrate the services and supports we provide in our communities.

Our ultimate goal in sharing our Community Impact is to demonstrate how we are making a difference in the communities we serve – focusing on impacting people experiencing poverty - through our financial investments.



\$141.3M in IRS-defined Community Benefit

The IRS has clearly defined standards for reporting community benefit which includes Unpaid Medicaid Financial Assistance, and other community programs.

\$116.3M in Community Impact Activities

Community Impact meets the spirit of community benefit and acknowledges the investments made that are making an impact in the community that the IRS does not consider.

FINANCIAL ASSISTANCE



Financial Assistance expanded in early 2024, to include insured patient's co-pays, co-insurance, and deductibles for patients with incomes up to 400% of the Federal Poverty Level.

In FY24, Mount Carmel provided
\$31.5M in financial assistance
34,503 patients benefited
51% for emergency care

Patients can now sign-up for Financial Assistance in MyChart. Scan here





INTEGRATING SOCIAL AND CLINICAL CARE

Addressing Patient Social Needs

Only 20% of our overall health and well-being in the United States is affected by the medical care we receive. The remaining 80% is related to social influencers of health (housing needs, financial insecurity) and individual behaviors. Mount Carmel goes beyond our hospital walls to serve our communities and our patients, especially to optimize health for people experiencing poverty and other vulnerabilities. Everyone deserves to live their healthiest life. And, a healthy life means so much more than receiving care in a healthcare facility.

Social Needs Screening

We are committed to annually asking our patients about their health-related social needs. These include things that make it hard to be healthy like problems with work, housing, food, safety, and transportation. This information helps us:

- Understand our patients' needs and their barriers to care
- Connect patients to helpful resources and services specific to their needs

Mount Carmel screened over 98,000 patients for social needs in primary care settings. If patients identify a need, our teams are able to connect them to community resources through the Trinity Health Community Resource Directory, community health workers and other social care professionals.

25.14% of those screened identified at least one need. Top needs included food access, financial assistance, and social isolation.

INTEGRATING SOCIAL AND CLINICAL CARE



Understanding Our Patients Needs Leads to Better Care

Social Care/Clinically Integrated Network - Community Health Worker Story

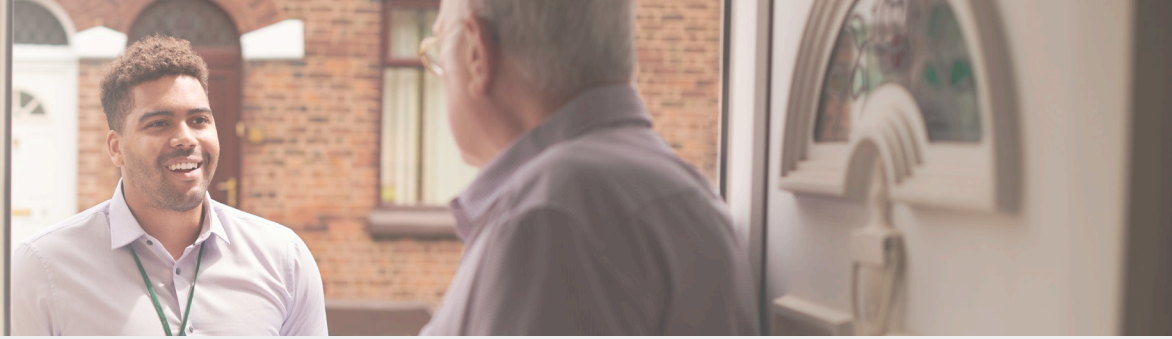
I received a referral for a patient needing housing assistance who was currently living with their mother. When I met the patient, we had a tough conversation about the dire lack of availability of affordable housing options. The patient had an SSI income totaling less than the average market rate for a one-bedroom apartment and did not qualify for most senior housing options because of the age requirements. Caught between a rock and a hard place, the patient also feared losing the housing arrangement with their mother due to the mother's declining health. Waitlist times for a housing choice voucher also spanned multiple years, so it was not a reliable option for the patient either.

Over several visits I worked with the patient to develop a strategy to make many calls to housing options that may be more lenient with age requirements. The patient's sister saw their effort and joined in, leading to the patient applying for and getting accepted for a brand new apartment in Columbus. The apartment is a tax credit apartment with rent based on the patient's income. The patient now has stable housing, and our team was able to coordinate a referral to the local furniture bank via our interagency partnership.



INTEGRATING SOCIAL AND CLINICAL CARE

CONNECTING PEOPLE TO RESOURCES



Community Health Workers

Community Health Workers (CHWs), serve as liaisons between health/social services and the community to address patients' social needs and mitigate barriers to health. CHWs are trusted members of the community and work closely with a patient by assessing their social needs, home environment and other social risk factors, and ultimately connect the patient (and their family) to services within the community.

Mount Carmel employs 7 CHWs as part of our care teams. Our Ohio Board of Nursing Certified CHWs have all completed a minimum of 100 classroom hours, a minimum of 130 clinical experience hours, and an emphasis on chronic disease management. Many CHWs received additional training in motivational interviewing, cultural competency, and risk assessment or screening.

Community Resource Directory

Using the Findhelp network, the Community Resource Directory connects community members to free and reduce-cost health resource and social services close to their zip code. Thousands of non-profit organizations are listed and claimed. Claiming allows community-based organizations to take ownership of their programs on the platform to maintain its information and indicate how they would like to be contacted. This could be directly on their website, emails, direct phone calls or direct referrals on the platform.

COMMUNITY RESOURCE CARD



Whether you're looking for a doctor, ready for a new career, or an impactful volunteer experience, Mount Carmel is here for you.



Scan the QR code

to discover the many ways we care for all of you.

mountcarmelhealth.com/about-us/community-benefit

INTEGRATING SOCIAL AND CLINICAL CARE



Street Medicine Program – Colleague Story

I recently served a patient at the Mid-Ohio Food Collective (MOFC) Clinic, who had run out of her anti-depressant and anti-anxiety medication 1-2 weeks prior. As a result, she was feeling increased symptoms of anxiety/depression. She had called her PCP, but couldn't get a refill, as she was overdue in seeing her PCP. The patient wasn't able to pay for a follow up visit with her PCP, because she would have to pay out of pocket as her medical insurance had lapsed. The patient had acquired a new job, and she would not be insured for 30 days.

When the patient discovered that our mobile coach was on site at MOFC, she registered for care to see if we'd be able to help her. She had no other resources or knowledge of how to get her medications, and prior to meeting us, her plan was to continue going without her meds for the next several months and to try to "deal" with her unmanaged and worsening symptoms.

We were able to assist the patient with refills until her insurance was reinstated with her new job. The patient was elated, tearful, and grateful that our team could help her during a time of need, and she shared that we lightened heaviness she admitted feeling before meeting our team.

This is exactly what makes our program so special and vital to our community. We were able to unconventionally help her with managing her mental health by breaking through the typical barriers that many patients face with conventional medicine practices.



The Street Medicine team is comprised of a comprehensive team of healthcare professionals, including an emergency medicine physician, a family nurse practitioner, a psychiatric nurse practitioner, registered nurses, medical technicians, bilingual case workers, and a community paramedic who are prepared to provide the most needed care and support. The Street Medicine program is a proud member of the International Street Medicine Institute and is a vital part of Franklin County's healthcare safety net, providing free quality care to more than 6,000 uninsured and underinsured patients annually. The goal of the team is to reduce unnecessary emergency department visits, and to support and empower community members to create a more vital, harmonious, and sustainable life.

INTEGRATING SOCIAL AND CLINICAL CARE



Welcome Home – Patient Story

This is my second time utilizing the Mount Carmel Welcome Home Program (June 2022 with my first born and May 2024 with my second born). I can't express my gratitude enough, so I wanted to share how valuable and helpful it has been to me. I continue to tell all the other expecting mothers I know about it. Both times I was lucky enough to have Nurse Jo whose warmth, knowledge, wisdom, and sincere care made my family and me feel so supported and confident as we welcomed our precious little ones.

Even as an experienced second time mom, this program was immensely helpful as every baby is unique and I had new questions that didn't come up with my first born. The ease and comfort of having an expert come directly to your home, makes it so much easier to ask questions compared to a clinical office environment. Every question and concern is met with respect, helpful information, and recommendations about further resources if needed.

My favorite part of the program is how it checks on both the baby and the mother. Normally after childbirth mothers don't have any medical appointments for themselves until their 6 week checkup. It feels reassuring to have a nurse take your vitals and do health screenings with you to make sure everything is going well before then. I truly believe that the health and well-being of a mother and child are so interconnected to each other. Taking care of both is so good for the health and happiness of the entire family. I wish every mother and child had this type of community support.

Thank you for being a special part of our family's most special transitions— not once, but twice!



Welcome Home offers mom and baby a special visit by a registered nurse via telehealth or in person. During time with families, the Welcome Home nurse checks baby's weight and umbilical cord. Safe sleep and eating habits are discussed, as well as mom's healing and recovery, including blood pressure, and postpartum depression screening.



INVESTING IN OUR COMMUNITIES

Community Health Needs Assessment and Implementation Strategy Update

Furthering our commitment to achieving racial equity – we are committed to authentically engaging with our community members, organizations and leaders. Every three years, our hospital (s) conduct a Community Health Needs Assessment (CHNA) which identifies community assets, needs, and the current state of health and social well-being of a community. The process requires input, from those who live in the community, on both identifying and prioritizing the needs that will be addressed in the three year Implementation Strategy. Our process applies a racial equity lens in addressing the identified need in order to advance health equity.

Together, the CHNA and Implementation Strategies foster collective action for the equitable allocation of resources from the hospital and other community sources, directed toward needs being addressed and for those most impacted.

Identified Priority Health Needs from the 2022 CHNA

1. Basic Needs
- 2a. Racial Equity
- 2b. Behavioral Health
3. Maternal – Infant Health

INVESTING IN OUR COMMUNITIES

COMMUNITY HEALTH NEEDS ASSESSMENT & IMPLEMENTATION STRATEGY UPDATE & COMMUNITY COLLABORATION

In partnership with the Community Shelter Board, Mount Carmel's Housing Outreach program serves community members experiencing street homelessness who wish to enter shelter or housing. Our team of Housing Outreach Specialists meet with patients on the land to connect community members with shelter, complete the program enrollment process and support with completing housing program applications. While this housing process typically takes six months or more due to the limited availability of affordable units, the team provides transportation and assistance for community members to obtain the required IDs & documentation to enter housing.

98 community members successfully entered housing from street homelessness via our Housing Outreach program.



Mount Carmel Social Care addresses the physical, spiritual, and behavioral health needs of people who lack transportation, housing, food security, safety, and education or who face language or socio-economic barriers in the Columbus, Ohio, area. These barriers, the Social Determinants of Health, often impact health, functioning, and quality-of-life outcomes.

Our Social Care team works to identify and address these barriers with innovative processes which align with Mount Carmel's mission. Through programming, referrals and service coordination, our team strives to build individual and community self-sufficiency and well-being.

Make **YOUR IMPACT**

SUPPORT YOUR LOCAL COMMUNITY HEALTH & WELL-BEING FUND

Not all communities have equal opportunities to be healthy, or the same needs. That's where Mount Carmel Foundation steps in and steps up. We do what is necessary to promote good health for everyone.

Community Health & Well-Being teams listen, partner, and make it easy to identify and meet patients' health-related social, and collaborate with local organizations to address community needs and demonstrate community impact.

When you donate to the Community Health & Well-Being Fund, you are directly supporting services to patients experiencing poverty and other vulnerabilities and investments in communities to improve community conditions such as basic needs, maternal care, and access to healthcare.

**To donate, visit donor.mountcarmelfoundation.org
or call 614-546-4500.**





FISCAL YEAR 2024
**Community Health
& Well-Being
Impact Report**



MOUNT CARMEL

A Member of Trinity Health