

**Adventist HealthCare Fort Washington  
Medical Center Community Health  
Needs Assessment: *Implementation  
Strategy 2023-2025***

*Adopted on April 10, 2023.*



***Adventist HealthCare Fort Washington Medical Center completed a comprehensive Community Health Needs Assessment (CHNA) process in collaboration with the Prince George's County Health Department and county hospitals.***

***Complete CHNA reports are available online at:***

***<https://www.adventisthealthcare.com/about/community/health-needs-assessment/>***

# Introduction

Prince George’s County is located in the State of Maryland and is part of the Washington, D.C. metropolitan area. Home to nearly one million diverse residents, the County includes urban, suburban, and rural regions. The County, while overall considered affluent, has many communities with higher needs and poor health outcomes.

In 2015, the Prince George’s County government and Maryland-National Capital Park and Planning Commission conducted a special study to develop a Primary Healthcare Strategic Plan in preparation for enhancing the health care delivery network. A key recommendation from the plan was to “build collaboration among Prince George’s County hospitals,” which included conducting a joint community health needs assessment (CHNA) with the Prince George’s County Health Department. In 2016, the first inclusive CHNA was completed. The hospitals and Health Department agreed to work collaboratively to update the 2016 CHNA in 2019 and again in 2022.

There are four hospitals located within the County: Adventist HealthCare Fort Washington Medical Center, Luminis Health Doctors Community Hospital, MedStar Southern Maryland Hospital Center, and University of Maryland Capital Region



## CHNA CORE TEAM:

- Adventist HealthCare Fort Washington Medical Center
- Luminis Health Doctors Community Hospital
- MedStar Southern Maryland Hospital Center
- Prince George’s County Health Department
- University of Maryland Capital Region Health

Medical Center with two freestanding emergency facilities in Laurel and Bowie. All four hospital systems and the Health Department appointed staff to facilitate the 2022 CHNA process.

# Organizational Overview

## About Us

Adventist HealthCare, based in Gaithersburg, Md., is a faith-based, not-for-profit organization of dedicated professionals who work together each day to improve the health and well-being of people and communities through a ministry of physical, mental and spiritual healing.

Founded in 1907, Adventist HealthCare is the first, largest and only health system headquartered in Montgomery County, Maryland and operates:

- Three nationally accredited acute-care hospitals:
  - *Adventist HealthCare Fort Washington Medical Center*
  - *Adventist HealthCare Shady Grove Medical Center*
  - *Adventist HealthCare White Oak Medical Center*
- A nationally accredited rehabilitation hospital
  - *Adventist HealthCare Rehabilitation Hospital*
- Mental health services
- Home health agencies
- Physician networks
- Urgent Care Centers
- Imaging Centers

## Mission & Values

### Our Mission

We extend God's care through the ministry of physical, mental and spiritual healing.

### Our Values

Adventist HealthCare has identified five core values that we use as a guide in carrying out our day-to-day activities:

1. **Respect:** We recognize the infinite worth of each individual.
2. **Integrity:** We are conscientious and trustworthy in everything we do.
3. **Service:** We care for our patients, their families and each other with compassion.
4. **Excellence:** We do our best every day to exceed expectations.
5. **Stewardship:** We take ownership to efficiently and effectively extend God's care.

## Our Hospital

### Fort Washington Medical Center

In the late 1970s, residents in Fort Washington explored the idea of establishing a hospital in the area. Their dream was partially realized when the Fort Washington Ambulatory Care Center opened in 1983 as a 16-hour emergency treatment facility with outpatient surgery.

The Center was expanded in 1991 creating what is now Fort Washington Medical Center - an acute care hospital, admitting patients 24 hours a day.

In October 2019, Fort Washington Medical Center became part of the Adventist HealthCare system and was renamed Adventist HealthCare Fort Washington Medical Center.

Today, the hospital provides general inpatient services including adult medical and surgical care, ambulatory surgical services, laboratory, radiology and diagnostic services, as well as bariatric, cardiovascular, gastrointestinal, orthopedic, rehabilitation, and respiratory therapy. In addition, Fort Washington operates one of the busiest emergency rooms in the metropolitan area, seeing more than 40,000 patients each year, and has just over 400 employees.

Adventist HealthCare is excited to open the Adventist HealthCare Surgery Center at National Harbor in 2023. Specialty services including podiatry, ophthalmology, urology and more will be offered at this location. This expansion aligns with our strategy to provide quality compassionate care throughout the metropolitan area.

This health destination will serve as a link between nearby Adventist HealthCare Fort Washington Medical Center and its new primary care facility, located just minutes away from the hospital. Together, the facilities will provide the critical services that are essential to meeting the healthcare needs of the community.

## Communities Served

Fort Washington Medical Center serves patients in the Fort Washington, Oxon Hill, Accokeek, and Temple Hills areas, as well as parts of southeast Washington, DC.

As a community-based hospital, health professionals at Fort Washington engage monthly in activities and services including free health screenings, educational workshops, and health fairs. They also offer an Infectious Diseases Program that provides free HIV and Hepatitis C testing and education.

# Process Overview

The CHNA process was developed to 1) maximize community input, 2) learn from community experts, 3) utilize existing data, and 4) ensure a comprehensive prioritization process. Elements of the Mobilizing for Action through Planning and Partnerships (MAPP) process was used in the 2022 CHNA for inclusion of community perceptions of health and consideration of the local health system. At the start of the process, the Core Team reviewed the shared vision:

**“A community focused on health and wellness for all.”**

The group agreed upon retaining the five shared values to provide focus, purpose, and direction for the CHNA process:

✓ **Collaboration**      ✓ **Equity**      ✓ **Trust**      ✓ **Safety**      ✓ **Prevention**

The Core Team was also asked to review the previous survey tools and provide feedback and from this, questions about discrimination were included to reflect resident lived experiences. The effect of the COVID-19 pandemic was also discussed in depth, however much of the data available is only through 2020 and will not reflect the full effect of the pandemic, from exacerbation of the social determinants of health to potential poorer health outcomes due to missed screenings and timely treatment of a variety of health conditions.

The Health Department staff led the CHNA process in developing the data collection tools and analyzing the results with input from the hospital representatives. The process included:

- A community resident survey available in English, Spanish, and French distributed by the hospitals and Health Department.
- Secondary data analyses that included the County demographics and population description through socioeconomic indicators, and a comprehensive health indicator profile.
- Hospital Service Profiles to detail the residents served by the Core Team.
- A community expert survey and key informant interviews; and
- A prioritization process that included the Core Team and Prince George’s Healthcare Action Coalition leadership.

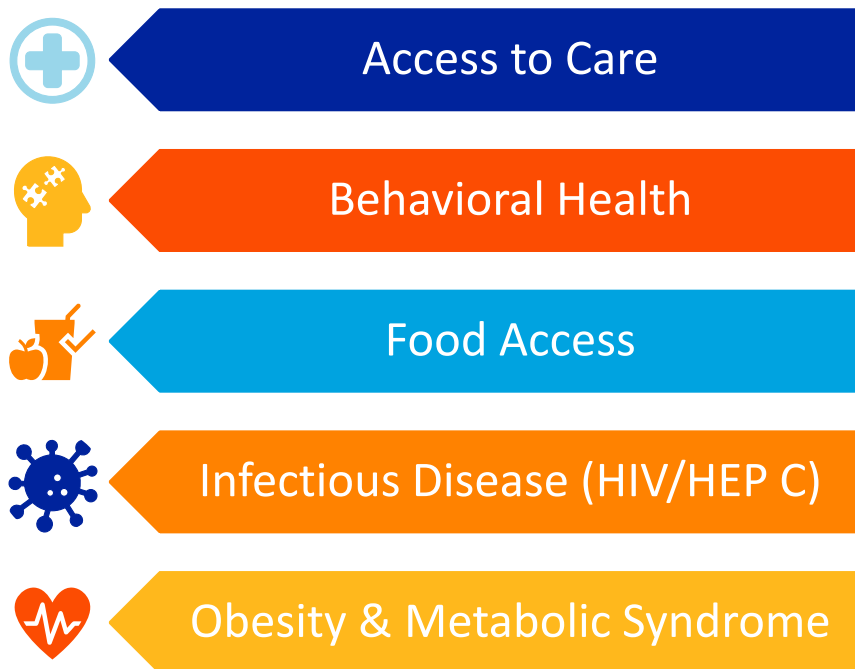
While the Core Team led the data gathering process, there was recognition that health is a shared responsibility. The community data collection strategies and the prioritization process were intentionally developed with this consideration and set the foundation for coordination moving forward.

Due to the pandemic, the Core Team determined to maintain the same priorities from 2019 since they are still relevant and much of the planned work from 2019 had to be suspended. The 2023-2025 priorities will continue to be:

- Social Determinants of Health
- Behavioral health
- Obesity and Metabolic Syndrome
- Cancer

The results of this process will guide the Health Department and hospitals in addressing the health needs of the County and pave the way for opportunities for further collaboration. The Core Team also acknowledged that due to the Maryland Department of Health's cyberattack in December 2020, much of the local data will need to be updated as it becomes available, which can provide further opportunities to address the priorities together.

After several planning sessions with hospital leadership, Adventist HealthCare Fort Washington Medical Center will focus specifically on the following five areas:



## Action Plan 2023-2025

The following table outlines the major activities Adventist HealthCare Fort Washington Medical Center is implementing to address the unmet needs identified through the collaborative Community Health Needs Assessment. The objectives listed for each priority area derived from Healthy People 2030. The Implementation Strategy should be considered a living plan that is updated and evaluated, at a minimum, each year or as emerging needs arise.



**FWMC Implementation Plan 2023-2025**

**Priority 1: Access To Care**

CHNA Impact						2022 CHNA Baseline	Target	Actual
Reduce the number of people who can't afford to see a doctor						MD: 7.5%	3.3%	MD: 7.5%
Increase the proportion of people with a usual primary care provider						PGC: 78.9%	84.0%	PGC: 78.9%
Program Name	Program Goal	Timeframe			Metrics/Population	Existing and Potential Partners	Status <i>(This information will be updated at the end of every year)</i>	
		Year 1	Year 2	Year 3				
Diabetes Primary Care Clinic	Increase access to Diabetes complication prevention services and self-management resources.	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li>• # of educational sessions provided in the community</li> <li>• % of diabetic patients referred to the diabetes-related Cardiovascular Clinic</li> <li>• % of diabetic patients seen at the diabetes-related Cardiovascular Clinic</li> <li>• # of diabetic patients seen at the diabetes-related Cardiovascular Clinic</li> <li>• % of patients with poor control</li> </ul>	• Adventist Medical Group (AMG)	Year 1:	
					<b>Focus Population:</b> National Harbor & surrounding Ft. Washington service area		Year 2:	
							Year 3:	
Medication Assistance Program	To provide medication assistance for low-income patients with chronic illnesses to improve medication compliance and overall health.	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li>• # of participants</li> </ul>	• Allentown Discount Pharmacy	Year 1:	
					<b>Focus Population:</b> FWMC Service Area		Year 2:	
							Year 3:	

**FWMC Implementation Plan 2023-2025**  
**Priority 2: Food Access**

CHNA Impact						2022 CHNA Baseline	Target	Actual
Decrease percent of households that are food insecure						PGC: 7.3%	6.0%	PGC: 7.3%
Program Name	Program Goal	Timeframe			Metrics/Population	Existing and Potential Partners	Status <i>(This information will be updated at the end of every year)</i>	
		Year 1	Year 2	Year 3				
Feed the Fridge	Increase access to fresh meals in the Glassmanor Oxon Hill neighborhood while supporting locally owned restaurants.	✓			<b>Metrics:</b> • # of meals supplied through the grant	• Feed the Fridge	<b>Year 1:</b>	
					<b>Focus Population:</b> Oxon Hill neighborhood		<b>Year 2:</b>	
					<b>Year 3:</b>			

**FWMC Implementation Plan 2023-2025**

**Priority 3: Infectious Diseases**

**Overarching Goal:**

CHNA Impact	2022 CHNA Baseline	Target	Actual
Reduce the number of new HIV infections	N/A	3,000	N/A
Reduce the number of new HIV diagnoses	29 per 100,000	3835	N/A

Program Name	Program Goal	Timeframe			Metrics/Population	Existing and Potential Partners	Status <i>(This information will be updated at the end of every year)</i>
		Year 1	Year 2	Year 3			
HIV/HEP C Screening Program	Improve the care of individuals living with HIV and Hepatitis C Virus by providing a private, safe, and effective means of testing.	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li>• Every ED person offered HIV screening</li> <li>• Complete 2500 HIV screenings and 2500 Hep C screenings yearly</li> <li>• % of patients who tested positive that receive education</li> <li>• % of patents who tested positive that are linked to care</li> </ul> <b>Focus Population:</b> FWMC service area	<ul style="list-style-type: none"> <li>• Gilead</li> <li>• Prince George's County Health Department</li> <li>• Dr. Iman Choudhoury (?)</li> <li>• Heart to Hand</li> </ul>	<b>Year 1:</b>
							<b>Year 2:</b>
							<b>Year 3:</b>

**FWMC Implementation Plan 2023-2025**

**Priority 4: Behavioral Health**

CHNA Impact					2022 CHNA Baseline	Target	Actual
Decrease mental health related ER visits					PGC: 1,955.6	3,152	PGC: 1,955.6
Program Name	Program Goal	Timeframe			Metrics/Population	Existing and Potential Partners	Status <i>(This information will be updated at the end of every year)</i>
		Year 1	Year 2	Year 3			
Reverse the Cycle	Decrease the number of drug and alcohol abuse in the community by screening everyone patient that comes into the ED for drug and alcohol abuse and connect the patient to treatment.	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li>• % of patients coming through ED are screened (75%)</li> <li>• % who received interventions (60%)</li> <li>• % referred to TX (15%)</li> <li>• % linkage to treatment (50%)</li> </ul>	• MOSAIQ	Year 1:
					<b>Focus Population:</b> FWMC service area		Year 2:
					Year 3:		

**FWMC Implementation Plan 2023-2025**  
**Priority 5: Obesity**

CHNA Impact					2022 CHNA Baseline	Target	Actual
Reduce the proportion of adults aged 20 and older who are obese					TBD	TBD	TBD
Reduce the proportion of children and adolescents who are obese or overweight					PGC: 35.5%	15.5%	PGC: 35.5%
Program Name	Program Goal	Timeframe			Metrics/Population	Existing and Potential Partners	Status <i>(This information will be updated at the end of every year)</i>
		Year 1	Year 2	Year 3			
Bariatric Service Line	Provide needed bariatric services in the community which otherwise would not be available. This includes evaluation, treatment, and management of obesity-related health conditions (diabetes, hypertension, and sleep apnea), as well as the provision of surgical and non-surgical weight loss options.	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li># of targeted bariatric screening events</li> <li># of referrals from community doctors</li> <li># of patients/encounters per condition</li> <li># of gastrectomy sleeve laparoscopic procedures</li> </ul>	<ul style="list-style-type: none"> <li>Adventist HealthCare Medical Group (AMG)</li> </ul>	Year 1:
					<b>Focus Population:</b> FWMC service area		Year 2:
							Year 3:
Community Outreach and Screening Events (farmers market and other community events)	Promote health through screenings, education, and building awareness and connections to local resources	✓			<b>Metrics:</b> <ul style="list-style-type: none"> <li># of events attended</li> <li># of blood pressure readings</li> <li># of education encounters</li> <li>% of elevated BP readings that were referred to care</li> </ul>	<ul style="list-style-type: none"> <li>Fort Washington Forward</li> </ul>	Year 1:
					<b>Focus Population:</b> FWMC Service Area		Year 2:
							Year 3:
Target BP		✓			<b>Metrics:</b> TBD	<ul style="list-style-type: none"> <li></li> </ul>	Year 1:
					<b>Focus Population:</b> FWMC Service Area		Year 2:
							Year 3: