



Denver Health and
Hospital Authority
2024-2026
Community Benefit
Implementation Plan

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INTRODUCTION

Since 1860, Denver Health has provided health and healing to the Denver community, consistently identifying and addressing the city’s most pressing health needs. The work to address these challenges is something we do more fully with strong and deep community connections. This Denver Health 2024-2026 Implementation Plan reflects our connections with the community, to jointly address health needs prioritized in our 2023 Community Health Needs Assessment. Below are our updated vision, mission, values and foundation that guide our initiatives.

Our Vision

To be the most trusted health care provider in Colorado.

Our Mission

Provide all in our community with access to the highest-quality and equitable health care regardless of their ability to pay.

Educate the next generation of health care professionals serving our community.

Engage in research and community partnerships to better deliver the health care needs of our patients.

Our Values

Respect
Belonging
Transparency
Accountability

Our Foundation

Diversity
Equity
Inclusion
Belonging

COMMUNITY HEALTH NEEDS

2023-2025 Community Health Needs Assessment (CHNA)

The Community Health Needs Assessment published by Denver Health in 2023 was informed by both opinions and perspectives collected directly from individual community members and individuals who represent various Denver-area constituencies, as well as secondary data from local, state, and national sources. Together, this process helped identify numerous critical needs in the Denver community.

Prioritizing and Selecting Areas of Focus

After receiving community input from a broad range of individuals and partner organizations, Denver Health set out a process to identify areas of focus for Denver Health's Implementation Plan. The Denver Health Community Benefit Advisory Council applied the Colorado Health Assessment and Planning System Prioritization Scoring Tool, considering factors of health condition burden, health disparities, organizational priorities, evidence-based strategies for addressing needs, and staff and financial resources, to identify the top three priorities for the 2023-2025 CHNA.

Priority Health Needs

Community members independently identified the several health priorities. After review and scoring by the Denver Health Community Benefit Advisory Council and Approval by the Denver Health and Hospital Authority Board on September 21, 2023, the three priority areas of focus for the current CHNA are:

- Access to Care
- Behavioral Health (Mental Health and Substance Misuse)
- Housing and Homelessness

IMPLEMENTATION PLAN

Denver Health’s 2024-2026 Implementation plan addresses the health priorities from our most recent Community Health Needs Assessment (CHNA). This Implementation Plan includes input from our Patient Family and Advisory Council and was approved on March 20, 2024 by the Denver Health Community Benefit Advisory Council, a group of executives and other leaders of the organization. This plan will be monitored for annual reporting on our efforts to address priority areas in accordance with House Bill 1320.

Priority 1: Enhance Community Access to Care

Our 2023 Community Health Needs Assessment re-emphasized Denver’s need for enhanced access to health care services. Addressing this need is consistent with Denver Health’s mission to “provide all in our community with access to highest-quality and equitable health care regardless of ability to pay,” and Denver Health addresses this need through our implementation plan initiatives impacting health care access to high-quality equitable care. Because of Denver Health’s commitment to make health care accessible, Denver Health ended 2023 with \$140 million in uncompensated care for patients who are uninsured or under-insured. Beyond financial access Denver Health also increases access to care by:

- Extensive medical and behavioral telehealth, including a partnership with Denver Housing Authority, where senior adults living in low-income housing receive education on digital literacy and access to technology for virtual healthcare appointments with DH providers. Denver Health
- E-consults, significantly increase access to specialty care
- Transportation assistance to patients in need, including funding DH secured through grants and private funders through the Denver Health Foundation to provide Regional Transportation District (RTD) bus tickets and Lyft ride-share vouchers
- Outpatient care navigators that support patients in addressing social needs and accessing care.

To make care more equitable, Denver Health is committed to having a workforce with a racial/ethnic composition that mirrors the general community. In 2023, Denver Health hired a Chief Diversity, Equity, Inclusion, and Belonging Officer who works within Human Resources both to recruit and promote a diverse workforce and train the existing workforce so there is a stronger feeling of inclusion and belonging for the patients who receive care at Denver Health. This effort, combined with partnerships with community organizations to support health for individuals across the state, helps fulfill Denver Health’s vision of being the most trusted health care provider in Colorado. Denver Health’s Community Benefit Implementation Plan initiatives related to enhancing community access to care are outlined below in Table 1.

Table 1: Access to Care Initiatives

Goal/Priority/initiative	Activities	Impact	Outcome or evaluation metric	Existing or planned collaborations	Resources
<i>Provide patients with access to care regardless of ability to pay</i>	Payment of uncompensated care	Patients are afforded health care that would otherwise be unavailable	Dollars in uncompensated care	Health Care Policy & Financing	Budgeted dollars



Goal/Priority/initiative	Activities	Impact	Outcome or evaluation metric	Existing or planned collaborations	Resources
<i>Provide e-consults for specialty care</i>	Various Denver Health specialty providers conduct e-consults to help reduce appointment demand	Improved specialty care access	Numbers of e-consults provided	Stout St. Clinic	Staff time
<i>Provide access to virtual care</i>	Provide virtual primary and specialty care services.	Improved health care access	Number of people served	Denver Housing Authority (DHA)	Staff time, equipment
<i>Transportation to services when needed</i>	Obtain and distribute transportation vouchers, coordinate Medicaid transport, and arrange ride share for patients in need	Improved appointment attendance	Number of transportation trips provided	RTD, Lyft	Budgeted dollars, grants, state resources
<i>Initiatives from the Chief Diversity, Equity, Inclusion, and Belonging Officer and Chief Patient Experience Officer</i>	Enhance recruitment, training to serve the ethnically/racially diverse population of Denver	Improved patient experience	Patient experience scores; ethnic/racial composition of the DH workforce	Community Based Organizations	Staff time
<i>Metro Denver Partnership for Health (MDPH) participation</i>	Ongoing collaboration with Metro-region public health and health care partners to address priority needs	Collaborative approaches to working with public health and he	Coordinated approaches to addressing community health needs	Seven-county Denver metro collaboration including local public health agencies (LPHAs), health systems, and Regional Accountable Entities	Staff time

Priority 2: Enhance Behavioral Health Services

Behavioral health, including substance misuse and mental health conditions, have been consistently identified as key issues affecting members of our community. Denver Health is the largest provider of behavioral health care and continues to prioritize increasing behavioral health services as part of its community benefit implementation plan.

Denver Health offers integrated behavioral health within our school-based health centers and community based primary health clinics. Denver Health has both adolescent and adult inpatient psychiatric wings and has also created a first in the country youth withdrawal management facility. Specific to youth violence, when youth and adults access the emergency department for violence-related injuries, a time of heightened readiness-to-change, At-Risk Intervention and Mentoring (AIM)s available to patients to help mentor them in breaking the cycle of violence. AIM is Denver’s only hospital-based violence intervention program (HVIP) that uses best practices from the National Network of Hospital-based Violence Intervention Programs (NNHVIP), trauma-informed care and a public health approach that utilizes data and research to interrupt the cycle of violence among Denver’s at-risk youth and young adults.

The Center for Addiction Medicine (CAM), established in 2019, is an executive sponsored initiative responsible for coordinating a broad range of addiction services, research and evaluation, and education across the Denver Health system and the community. The CAM's vision is to be a compassionate model for the prevention and treatment of substance misuse, to transform lives and to educate all. Directed by leadership from Denver Health's outpatient behavioral health services and public health departments, the CAM is an effort to ensure there is no wrong door to optimized treatment services. The CAM operates several cross-sector workgroups and is a pivotal resource in the execution of this priority. The behavioral health initiatives within our Community Benefit implementation plan are outlined in Table 2 below.

Table 2: Denver Health Behavioral Health Initiatives

Goal/Priority/initiative	Activities	Impact	Outcome or evaluation metric	Existing or planned collaborations	Resources
<i>Integrated Behavioral Health</i>	Social workers are integrated into our community and school-based primary care facilities	Increased access to convenient behavioral health care services	Number of people served	Denver Health Federally Qualified Health Centers, including our community and school-based clinics.	Staff time
<i>Substance Use Navigation (SUN) Program</i>	<i>Employ substance use navigators to support community members in their recovery from substance use disorder</i>	Improve rates of recovery services engagement	Number of peers and navigators engaged or hired Number of people served.	City and County of Denver Contract	

<i>At-Risk Intervention and Mentoring Program (AIM)</i>	Collaborate with community partners to access and mentor youth and adults involved with violence at a time when there is heightened readiness to change, i.e., when patients are in the Emergency Department with violence-related injuries	Intervening to interrupt cycles of violence in families and communities	Number of people who receive intervention	Gang Rescue and Support Project (GRASP)	Staff time
<i>Center for Addiction Medicine Academy</i>	Technical assistance and support to help implement comprehensive, trauma-informed treatment for substance use disorders (SUD).	An Educated and informed workforce and community to treat substance use disorder	Number of people trained	Health and Community partners in Colorado and the surrounding region, supporting Iowa, Kansas, Missouri, Nebraska, Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming.	Staff time
<i>CAM Technical Resource and Information Line (TRAIL)</i>	Provide 1) a line for community members/family with substance misuse that are ready to engage in treatment, and 2) an e-consult service for Denver Health healthcare professionals who need help screening and linking their patients with SUD to care.	Expanded access and utilization of behavioral health services	Number of treatment resources in the resource inventory Number of calls to CAM TRAIL by providers and other community members Number of hospital partners	Planning to collaborate city-wide with community resources addressing substance use disorder	Staff time
<i>Access Transformative Outreach Program (ATOP)</i>	Provide intensive case management with a	Reduce use of health care services	Number of patients served	Colorado Access	Staff time

	multidisciplinary team for Colorado Access members with severe substance use disorders (18 visits in 6 months)				
<i>Transforming Health by Reducing Inequities for the Vulnerable (THRIVE)</i>	Inter-agency collaboration and coordination to address social needs of at-risk youth, people who are justice involved and/or experiencing homelessness	Reducing hospital and ED readmissions, self-harm and jail bookings	Number of staff trained in care coordination; Number of FTE hired for patient care; Number of patients supported	Multiple city agencies, e.g., Public Safety, Public Health and Environment, Housing Stability, as well as Colorado Access, Caring for Denver	Staff time
<i>Integrate community voice and peer support through the CAM</i>	Focus groups with community advisory boards for CAM programming; bolster peer support	Ensuring programs meet the needs of people with lived experience	Community voice informs CAM programs, helping address gaps in the continuum of care	DH Community Advisory Boards, Harm Reduction Action Center, Mile High Behavioral Health, DDPHE	Staff time
<i>Family Oriented Resilience Growth and Empowerment (FORGE program)</i>	Train future clinicians in trauma-informed non-stigmatizing care Cultivate strong community relationships to reduce stigma and other barriers to care Advance health system research with these historically marginalized families	Prevent and provide early intervention for children impacted by parental substance misuse, parental incarceration, housing instability, and intimate partner violence	Number of clinicians trained Number of community education programs provided Number of families served	Community organizations interested in hosting educational sessions	Staff time
<i>CAM Continuum of Care Evaluation</i>	Measure the effectiveness of health system protocols and interventions on engaging and	Intervention effectiveness is known and systems for monitoring can be used for	Percentage of different populations engaged and retained in care	Denver Health departments	Staff time

	retaining patients in SUD treatment	ongoing quality improvement			
<i>Beginning Early and Assertive Treatment for Methamphetamine Use Disorder (BEAT Meth)</i>	Develop and evaluate a comprehensive linkage and engagement and retention in treatment program for patients with methamphetamine use disorder	Establishing the effectiveness of the Beat Meth intervention	30 and 90-day treatment retention rates Health and health services outcomes	Denver Cares	Staff time
<i>Transforming Health by Reducing Inequities - Jail to Community Overdose Intervention (THRIVE-JOI)</i>	Care navigation and peer recovery specialists link people who have been incarcerated and have Substance Use Disorders (SUD) to medical, SUD, and other BH care and social supports	Effective linkage, retention in care, recovery, and connections to social needs, supporting overall well-being, health and social needs	Number of people served	Denver Sheriff's Department, Second Chance Center	Staff time
<i>Utilizing Peers for Linkage, Innovation, and to Foster Thriving (UPLIFT), a Peer Support Hub and model of care</i>	Establishing a peer support hub and supporting non-clinical approaches to enhance recovery	Level of cohesion among peer providers Clients are more engaged and retained in care	Peers feeling supported to provide care Numbers of people engaged in non-clinical support approaches	Colorado Health Foundation	Staff time
<i>Screening, Brief Intervention and Referral to Treatment (SBIRT)</i>	Provide screening for patients in the Emergency Room	Improved access to behavioral health care	Number of people screened	Denver Health ED	Staff time
<i>Increase research on healthcare connections with behavioral health patients</i>	Engage patients in research to increase behavioral health care follow-up post discharge.	Improve knowledge and care for patients	Number of research studies happening.	City and county of Denver, Various DH departments	Staff time
<i>Increase access to methadone through a mobile unit available in more locations.</i>	Locate MoMAT unit in at least 2 locations	Improve access to methadone for patients recovering from substance misuse.	Number of people that access the MoMAT unit	Other Denver Health clinics	Staff time

Priority 3: Partnering to Enhance Access to Housing Resources

The Denver Health Community Health Needs Assessment highlighted the paramount importance of addressing homelessness in Denver. With a large percentage of our patients experiencing homelessness, we are dedicated to partnering to provide more immediate housing resources to our patients experiencing homelessness. We plan to continually improve available resources by researching the impact of homelessness on health and health care, and then by using that information to partner appropriately to link patients to housing as efficiently as possible. Below in Table 3 Denver Health’s initiatives to address homelessness are detailed.

Table 3: Initiatives to Address Housing Needs and Unsheltered Homelessness

Goal/Priority/initiative	Activities	Impact	Outcome or evaluation metric	Existing or planned collaborations	Resources
<i>Provide Transitional Housing to Denver Health patients</i>	Lease 14 units at 655 Broadway to provide short-term bridge housing	Decrease time to connections to housing.	Number of patients housed in a 655 Broadway unit	Denver Housing Authority	Leased units
<i>Maintain Recuperative Care Lease to Support Unhoused Patients Discharged from Denver Health</i>	Lease 20 recuperative care beds each month	Provide access to recuperative care for patients	Number of patients discharged to Recuperative Care Beds	Colorado Coalition for the Homeless	Leased Beds
<i>Advocate for Additional Housing Options for Unhoused People who Access Denver Health</i>	Meeting city and state partners to identify additional opportunities to implement door-to-door transitions from Denver Health to Housing	Increase awareness of the types of housing needed by people with high health or complex needs.	Number of additional beds or units, e.g., respite, housing, treatment beds available to Denver Health patients	Colorado Department of Local Affairs, Denver City’s Mayor’s office, Colorado Coalition for the Homeless, Health Care Policy & Financing	Staff time
<i>Advance Research on Homelessness and Health Care and the Impact of Housing Interventions</i>	Point in time counts of unhoused people in the hospital; participate in evaluations of hospital-housing interventions	Provide data to support conversations and advocacy related to linking hospitals to housing	Papers written or presentations provided	Colorado Coalition for the Homeless, other local and state partners	Staff time

CONCLUSION

Denver Health Community Benefit Implementation Plan for 2024-2026 underlines our community to working for and with the communities we serve. This plan provides details of the different ways we will be working over the next three years to improve community health.

This plan will be refined and updated at least annually based on community input and internal updates, all the time working toward our vision of being the most trusted health care provider in Colorado.