

COMMUNITY BENEFIT Annual Report 2024



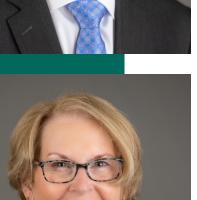
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## A MESSAGE FROM John B. Chessare, MD, MPH and Cathy Hamel, MA

This has been an exciting year for us! Over an 8-month period, we conducted our triennial Community Health Needs Assessment (CHNA). The CHNA process was a collaborative process in which we gathered new and existing data to assess the health of our community. It was a reminder that our health and quality of life are shaped by many factors that take place outside of





the clinical environment.

GBMC continues to invest in the communities we serve. In the last two years, we have invested over \$134 Million in community benefit activities that include community health services, health professions education, mission driven initiatives and charity care. We also fund local organizations in their efforts to promote healthy behaviors and address the social drivers of health.

We do not do this work alone. Our partners include many organizations representing the nonprofit, public and private sectors. These organizations provide a safety net for our patients and the GBMC community.

This report highlights GBMC's investment activities to promote health and improve the communities we serve.

John B. Chessare, MD, MPH President and CEO **GBMC** HealthCare

John B. Chenare MD Cathine of Harref

Catherine Y. Hamel, MA President, Gilchrist and Executive Vice President of Continuing Care Education, GBMC HealthCare

# ABOUT US

GBMC is a 211-bed licensed hospital providing acute and sub-acute care in Towson, Maryland. Since its founding in 1965, GBMC's accomplishments have validated the vision of its founders to combine the best of community and university-level medicine. It is home to an award-winning cancer institute; the community's only center for victims of domestic violence; extensive labor and delivery services; and strong surgical and medical programs, including residencies. It cares for about 75,000 patients annually.

GBMC Health Partners is a collective of more than 300 primary care providers, specialists, advanced practice clinicians, and hundreds of support staff. All GBMC primary care practices are NCQA Certified Medical Care Homes with embedded nurse care managers and behavioral health specialists. GBMC Health Partners cares for more than 84,000 patients annually.

Gilchrist is Maryland's leading nonprofit provider of serious illness and end-of-life care. Gilchrist provides medical care, counseling and support to patients and their families at every stage of serious illness, even well before hospice is needed. Gilchrist serves more than 7,600 patients each year—in homes, residential care communities and other medical settings, and at our three inpatient hospice centers in Towson, Howard County and Baltimore. In addition, Gilchrist provides grief counseling and other bereavement services to 6,500 families throughout central Maryland.

All three of GBMC HealthCare's work systems are reliable resources for filling service gaps in our community.





# OUR MISSION / VISION / VALUES

### Mission

The mission of GBMC HealthCare is to provide medical care and service of the highest quality to each patient and to educate the next generation of clinicians, leading to health, healing, and hope for the community.

#### Vision

As our national healthcare system evolves, for GBMC to maintain its status as a provider of the highest quality medical care to our community, we must transform our philosophy and organizational structure to develop a model system for delivering patient-centered care.

### Values

GBMC HealthCare has formalized a series of specific behaviors that support its Greater Values of Respect, Excellence, Accountability, Teamwork, Ethical Behavior, and Results. The Greater Values are intended to serve as the foundation upon which GBMC creates and sustains a culture of Service Excellence.

# COMMUNITY BENEFIT REPORTING

Community benefit activities are planned, organized, and measured approaches to meeting identified community health needs within a given service area. It most often requires collaboration with other non-profit and public community-based organizations and meets the following parameters:

- Improves the health status and well-being of specific vulnerable populations
- Generates a low or negative margin
- Is not provided for marketing purposes
- Supports services or programs that would likely be discontinued if the decision were made on a purely financial basis

Each year, we report our community benefit activities to the Maryland Health Services Cost Review Commission (HSCRC). The HSCRC compiles the data collected from Maryland hospitals and makes this information available to the public.



# COMMUNITY BENEFIT REPORTING BY CATEGORY

### **Community Health Services**

Community Health Education Health Care Supports Services Child Life Specialist

\$30 -

\$20

\$10 -

\$0

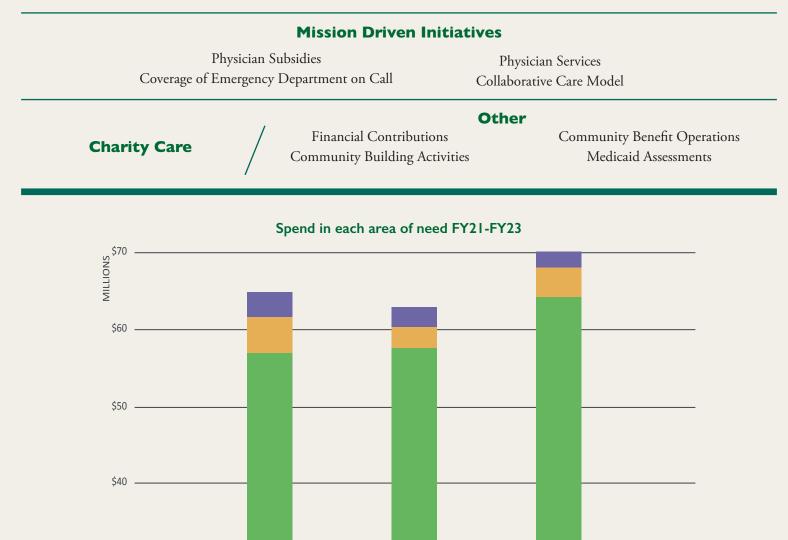
FY 21

Community Health Health Professionals

Oncology Transport Program Oncology Social Work Program

### **Health Professional Education**

Physicians/Medical Students Nurses/Nursing Students Other Health Professionals



FY 22

Mission Driven Charity Care

FY 23

Other

# COMMUNITY BENEFIT FUNDING

GBMC's Community Benefit Program directly funds local organizations and initiatives. These efforts align with the CHNA health priorities to improve the health and well-being of the community.

In Fiscal Year 2024, GBMC funded 19 nonprofit and community-based organizations for a total of \$131,850.

## ORGANIZATIONS FUNDED BY HEALTH PRIORITY

# Health Disparities \$30,500

### Behavioral Health \$15,500

Gilchrist (Welcome Home Veterans) National Alliance on Mental Illness, Inc. (NAMI)

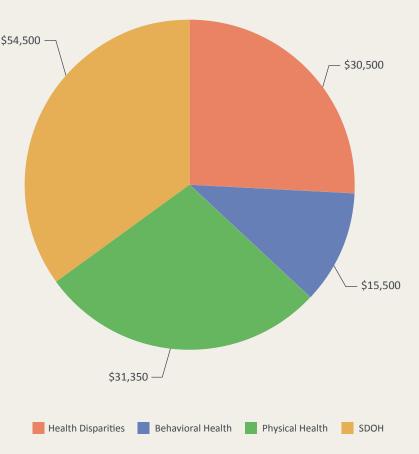
American Heart Association Associated Black Charities Baltimore Health Start Govans Ecumenical Development Corporation Horizon Day Camp The Pride Center of Baltimore

### Social Determinants of Health \$54,500

Associated Black Charities Cristo Rey Jesuit High School Liberty Community Development Corporation The BIT Center

### Physical Health \$31,350

Alzheimer Association Bikur Cholim Chase Brexton Down Syndrome Association of Maryland Essex-Stembridge Recreation Council Ulman Foundation Y of Central Maryland



## TESTIMONIALS

### From Recipients of Community Benefit Funding

"GBMC, Gilchrist and Health Partners demonstrate to the AHA, our referring hospital partners and the community at large our commitment to supporting and helping people who suffer from cardiac disease."

– American Heart Association

"We are grateful for the support of GBMC for the Step Up for Down Syndrome Walk-a-Thon in Baltimore in 2023! From supporting new babies with Down syndrome, to adults and families who receive excellent medical care at GBMC - you are here for our community, and we appreciate it."

– Down Syndrome Association of Maryland

"That celebration will never be forgotten. I feel completely honored and appreciated for the sacrifices that we made but afraid to feel pride until your event."

– Veteran, Welcome Home Veterans

"Ulman Foundation is grateful for the steadfast support from GBMC. The generous sponsorship from GBMC ensures that young adults throughout Maryland do not have to face cancer alone."

– The Ulman Foundation

"The camp was a blessing for our family in many ways—the girls returned home happy and exhausted, allowing us, as parents, to focus on work during the day and enjoy peaceful evenings. They made friends and enjoyed special experiences all summer long."

– Horizon Day Camp

"I work on a college campus, and I feel more prepared to discuss the features of 988 and the efforts NAMI is making to bring equity to mental health care."

- NAMI

"We recognize that the whole of our community is only as strong as each of its parts and that the success of a community as a whole is dependent on the health and well-being of each human being and family within it."

– The Y of Central Maryland

# COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA)

The 2024 Baltimore County CHNA was a collaborative effort of GBMC, the Baltimore County Department of Health, MedStar Franklin Square Medical Center, Northwest Hospital of LifeBridge Health, Sheppard Pratt and the University of Maryland St. Joseph Medical Center. Several staff from each organization comprised the CHNA Steering Committee. The purpose of the CHNA was to understand, quantify, and articulate the health needs of Baltimore County residents and then determine health priorities.

More than 2,200 community members and stakeholders contributed to the CHNA. The data was collected through focus groups and web-based surveys. Access to healthcare, food insecurity, and transportation were identified as the top needs that impact the health and wellbeing of people living in Baltimore County.

In addition to new data from the community, more than 100 data indicators were analyzed. Some of the data sources include the Maryland Department of Health, Robert Wood Johnson Foundation, County Health Rankings, and the Centers for Disease Control and Prevention. Top community needs identified through secondary data analysis included social determinants of health, access to healthcare, behavioral health, and health equity.

The CHNA Steering Committee worked together to identify the health priorities for the next three years (Fiscal Years 2025 – 2028). Along with analyzing a wealth of information, needs were identified based on many factors including: severity of need, the ability for hospitals or health departments to make an impact, associated health disparities, and importance to the community. The Steering Committee selected three top priority health needs: behavioral health, physical health, and access to care. The complete CHNA Report is available at www.gbmc.org/chna.



**Behavioral Health** 



**Physical Health** 

Y

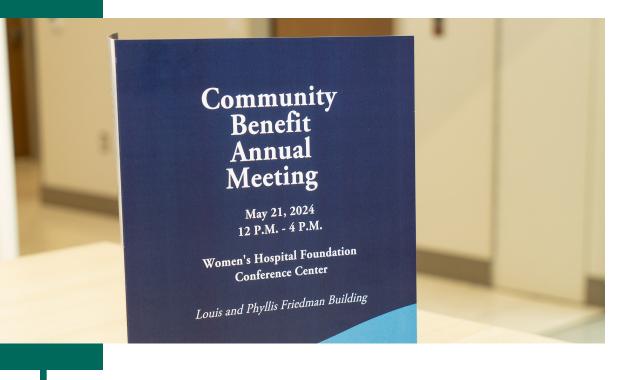
Access to Care

# ANNUAL COMMUNITY BENEFIT MEETING

The Community Benefit Annual Meeting was held on May 21, 2024 at GBMC HealthCare. The meeting took place in the Women's Hospital Foundation Conference Center in the new Louis and Phyllis Friedman Building. There were 69 attendees representing healthcare, government, community-based organizations, and private industry.

There were many highlights of the meeting that began with a Welcome by Dr. John Chessare and an overview of the community benefits system by Cathy Hamel. A key focus of the meeting was a review of the 2024 Baltimore County Community Health Needs Assessment. There was a moderated panel discussion on Behavioral and Mental Health with panelists from the Baltimore County Department of Health, Behavioral Health Systems Baltimore, and NAMI of Metropolitan Baltimore. The audience engaged in a Question-and-Answer session with the panelists to learn more about the topic and their services.

Throughout the meeting, a health resource fair was held to create an opportunity for participants to network and to share health information.











# HEALTHCARE MADE EASY

Through \$1.5 Million funding made available from the Maryland Community Health Resource Commission, GBMC has improved the health and quality of life of those in Baltimore. With the Pathways to Health Equity Program, GBMC established a collaborative relationship between GBMC's advanced primary care practice in Jonestown and numerous community partners in underserved communities. The program also focused on primary care in the home through Gilchrist's Elder Medical Care Program. Community partners served as trusted advisors to the community and addressed social drivers of health such as food, housing, and transportation.

Pathways to Health Equity Program highlights and successes

- Total cost reduction of \$10.2 Million
- 1525 new patients enrolled in primary care
- 100 health promotion events held
- 57,076 pounds of food distributed

In 2024, GBMC was awarded \$3.5 Million by the CHRC to become a Health Equity Resource Community (HERC). Over the next 5 years, the grant will expand the work that began with Pathways in underserved communities in Baltimore. As a HERC community, our goal is to enroll 3,025 new patients in primary care in the Jonestown practice and through Gilchrist's Elder Medical Care Program..



# COMMUNITY BENEFIT COMMITTEE MEMBERS

### **Committee** Leadership

Catherine Hamel Karen Thompkins D'Ambra Anderson

### Committee Members

Carolyn Candiello Meghan Chan Laura Clary Jenny Coldiron Kimberly Davenport Leana Hoover Carl Prazenica Diane Sancilio Dr. Gregory Small Kelly Truax Rachael Whiteside Shannon Wollman Erlene Washington

