



Mt. Washington  
Pediatric Hospital

*Where Children Go to Heal and Grow*

An affiliate of University of Maryland Medical System and Johns Hopkins Medicine



SUPPORTING OUR COMMUNITIES



## A Message to Our Community:



At Mt. Washington Pediatric Hospital (MWPH), we believe that hospitals have a responsibility to improve the health and quality of life for children and their families within the communities they serve. We serve Baltimore City, Prince George's County and the greater metropolitan Maryland region, including patients with in-state and out-of-state referrals.

Within our walls, as well as in our community, you will find evidence of our commitment to community benefit in our organizational structure; training of staff and volunteers; and participation in state and national advocacy efforts focused on children with complex medical conditions. MWPH has a proud tradition of providing community benefit and specialized care for children that dates back to the hospital's founding in 1922.

We are pleased to share with you the MWPH Community Health Improvement Report for Fiscal Year 2017. This report includes information about our Community Health Needs Assessment and Implementation Plan along with highlights of community advocacy efforts such as an increasingly popular Diabetes clinic, the creation of a youth empowerment program called Abilities Adventures that takes participants to brave new places, and the development of another custom curriculum that includes local police as mentors.

Performing these activities is our way of being accountable to the Greater Baltimore community and demonstrating the value and impact of our many community-based services and partnerships. We provided nearly \$2 million in community benefit services in fiscal year 2017, an increase of \$500,000 from fiscal year 2016 contributions, and hope to continue to widen our impact in the years to come.

Every day is a privilege and we are humbled to serve this special group of children alongside our committed staff. MWPH is a regional leader in pediatric specialty care and is a jointly owned corporate affiliate of the University of Maryland Medical System (UMMS) and Johns Hopkins Medicine. Together, with our owners and board members, we continue to evolve to meet the health care needs of today's children and are proud to be a part of this important transition.

Sincerely,



Sheldon Stein  
President and CEO  
Mt. Washington Pediatric Hospital



Melissa Beasley  
Community Advocacy Manager  
Mt. Washington Pediatric Hospital

### Mt. Washington Pediatric Hospital

(MWPH) is a post-acute care facility serving children with a variety of medical and rehabilitative needs. Located off a quiet street in one of Baltimore City's nicest neighborhoods, the hospital provides rehabilitation and medical care for patients from ages neonatal to young adult. Our workforce includes more than 600 individuals and we treat nearly 9,000 patients annually on both an inpatient and outpatient basis.

MWPH's illustrious history dates back almost a century. In 1922, a medical social worker named Hortense Kahn Eliasberg sought to open a home where children could safely recover from illness or surgery. That same year, this vision became a reality and the Happy Hills Convalescent Home for Children opened in Northwest Baltimore. It has since evolved into a 102-bed post-acute hospital and is recognized as a leader in pediatric specialty care.

Today, MWPH remains committed to the mission Eliasberg established so long ago — improving the health and well-being of children who are ill, injured, or in need of specialized help. And, to improve the continuum of care across many disciplines, social determinants of health are taken into consideration to provide more comprehensive care.

### Our Mission

MWPH is dedicated to maximizing the health and independence of the children we serve.

### Our Vision

Mt. Washington Pediatric Hospital will be a premier leader in providing specialty health care for children, as distinguished by our:

- Quality of care
- Service excellence
- Innovation
- Multidisciplinary approach
- Family focus
- Outstanding workforce

### Our Values

Mt. Washington Pediatric Hospital will act in a manner consistent with these values:

- Quality: Adhere to the highest standards of care in a safe environment
- Integrity: Act with honesty and truthfulness in all patient care and business activities
- Respect: Treat all individuals with compassion, dignity and courtesy
- Education: Promote lifelong learning

## MWPH DO-GOODERS: EMPOWERING THE COMMUNITY THROUGH ADVOCACY AND EDUCATION

Since 2010, MWPH's Community Advocacy Program has taken a proactive approach to child injury prevention and safety awareness education. The program establishes and maintains relationships with community leaders and government agencies who help create and promote programs that advocate for safety awareness and injury prevention; educate families, providers, and communities on safety and best practices; foster new partnerships and coalitions; improve organizational practices and influence policy and legislation.

MWPH's Community Advocacy Program manager is responsible for the overall management of the Do-Gooders program, monitors legislative activities relating to children's health care issues and serves as our liaison between the hospital and collaborating community organizations.

### End of Year Outcomes

# of Families Impacted: 31,773

### Highlights:

- Participated in 33 Child Safety Seat Checks, up from 22 last year. Onsite surveys indicate an average 89% misuse rate for participating families. Now, 100% of the seats are installed safely and correctly.
- Hosted 16 Safety Baby Showers that provided safety kits and educational talks on injury prevention to 222 families and an audience that included parents and grandparents. Onsite surveys indicate a 50% increase in injury prevention knowledge following the event.
- Participated in 35 community health fairs and events, more than twice the stated goal, and met local businesses and residents where they are.
- Provided 35 presentations and talks on topics such as preventable injuries, asthma, lead poisoning, obesity prevention, and safe sleep — up 33% from two years ago, illustrating the growing demand for services.
- Engaged 90 children in our second Bully & Violence Prevention Program, up from 72 last year. The concept is to empower children to be advocates and to help them understand that there is power in their words and actions.
- Provided 15 classes to parents at risk for child maltreatment. The program was initially offered at the St. Jerome's and Baltimore City Head Start Programs, and then expanded to include St. Vincent DePaul, Union Baptist, and St. Bernadine's and Dayspring Head Start Programs.
- Developed custom training and educational materials for several schools and community-based organizations. This targeted pedestrian, poisoning and fair safety, for instance, as well as diabetes and weight management, bullying prevention and autism awareness.



### MWPH PROVIDES UNIQUE MENTORS

Health care professionals are working proactively to deal with the growing visibility of racial bias and hate crimes in the media.

Take MWPH's custom-crafted MENTOR program, which pairs elementary-age students with officers from the Community Collaboration Division of the Baltimore Police Department.

The program arose from an interesting observation. During patient visits, MWPH staff heard comments that youths were afraid to play outside or feared local officers. This followed several well-publicized events including the death of 25-year-old Freddie Gray, which in April 2015 led to street riots and a community-wide curfew. Overall, crime rates are on the rise and fears have escalated.

"Pediatric psychologists are increasingly working with families to manage the consequences of race-based stress and racial trauma," notes Elizabeth Getzoff, PhD, a licensed psychologist at MWPH. "In hospital and primary care settings across the country, clinicians and researchers have been reporting encounters with children and teens where racial stress contributed significantly to their physical and/or emotional distress."

"We're seeing children and adolescents presenting with physical symptoms such as headaches, tension, insomnia, and GI distress; emotional symptoms that include worrying, nightmares and depression; and behavioral issues such as anger and withdrawal — symptoms directly related to racial stress experienced personally or witnessed indirectly. Clinical examples include Hispanic youths worried about their undocumented relatives being deported, African-American teenagers worried about being harassed, assaulted, or harmed by law enforcement officers or hate-inspired private citizens, and Muslim girls fearing harassment or intimidation while walking in their communities or schools."



MWPH's MENTOR program, which stands for Mindfulness Engaging N Trusting Open-minded Relationships, provides an outlet to talk more openly about stress management techniques. The involvement of police volunteers provides positive encounters and helps instill greater trust between local residents and law enforcement professionals.

Police initially arrive in plain clothing attire to participate in activities with the pre-teens that include everything from simple crafts and conversation to yoga and trying new foods.

And, with each passing week, they add items from their traditional uniforms to look more and more like an officer.

Getzoff remembers a critical moment which revealed the success of the program.

*"You're a police officer," one of the kids asked?  
"You knew that," she responded.  
"I thought you were just a person."  
"I am."  
"It was like a light bulb went off," says Getzoff.  
"You're both."*

Getzoff recently shared MWPH's positive experiences with the MENTOR program at a meeting of the American Psychological Association.

"I'm hoping to make it a movement within my field," she says. "It's something we at MWPH are championing based on the results we've seen with the MENTOR program and the positive feedback from participants.

### ADVENTURE ANYONE?

MWPH knows that the recovery of its young patients often continues long after their discharge. And, for those who've suffered traumatic brain injury, regaining their strength and mobility becomes an exercise unto itself. So, shouldn't it be fun?

Such was the thinking when MWPH launched an innovative new program called Abilities Adventures that takes participants on an adventure of a lifetime — literally. Think ski slopes and sunshine.

Lindie McDonough, CTRS, CBIS, CPST, a Senior Therapeutic Recreation Specialist at MWPH, had volunteered at the National Ability Center, a nonprofit sports recreation site that caters to individuals with disabilities — and knew it would be perfect for her young patients.



The center sits on 26 acres of pristine open terrain in Park City, Utah, where participants can ski, tube and snowboard as well as ride horses, practice yoga, go rock climbing — and meet Paralympians.

Thanks to funding from the Mt. Washington Pediatric Foundation, MWPH's inaugural trip to the center was scheduled — and then a second.

"Before each trip, many of the participants spoke about the fact that though their bodies have healed, they still felt 'stuck,'"



says McDonough, "and they wanted to use this opportunity to feel less isolated, to meet other people with similar experiences and to challenge themselves both mentally and physically."

To date, 15 youths have participated in two separate outings — and the feedback has been phenomenal.

"The most impressive thing," McDonough adds, "was seeing these kids grow, mature, connect with each other and gain confidence as the week progressed. It was beautiful to watch them sort through their challenges and to see how they supported and helped nurture one another."



### DIABETES EDUCATION A HUGE HELP

There's an old saying that if you build it, they will come. And that certainly was the case when MWPH began to offer a Diabetes education class.

Adena Goldstein, RN, BSN, CDE, a MWPH pediatric nurse and certified diabetes nurse educator, said the course, which was initially created for newly diagnosed pediatric patients, soon attracted interest from fellow family members as well as local case managers and social workers — all happy to learn more about a chronic condition with huge implications.

Bradley Schwimmer, PsyD, a MWPH pediatric psychologist, says the typical symptoms for youths diagnosed with diabetes can include weight loss, excessive thirst and urination.

"Most end up in the hospital for a few days to get their bodies to a state of homeostasis and to be educated on managing the diagnosis," he says. "They spend a week learning about this new life-changing condition. But they still need much more time to process that information."

MWPH's free three-hour class, scheduled four times a year, helps them do just that and draws about a dozen participants every time it's offered.

And, while the class focuses predominately on ways to better manage the disease — through diet, exercise and medication treatment — MWPH staff says the real beauty of the class is that it empowers young patients to take to heart that they can still do all the things kids like to do.

"This is a massive lifestyle change for young patients," says Schwimmer. "Unfortunately, diabetes dominates their lives, but what we teach them is how to dominate diabetes. Something I always tell our patients is that you can let diabetes own you or you can own it. And when they hear they can live their life normally, you see them 'breathe.' They get less tense. They realize they can still play soccer, eat at restaurants and have sleepovers."

## COMMUNITY HEALTH NEEDS ASSESSMENT

To complete a comprehensive assessment of the needs of the community, MWPH utilized the Association for Community Health Improvement's (ACHI) 6-step Community Health Assessment Process as an organizing methodology. The University of Maryland Medical System's (UMMS) Community Benefit Team (CBT) served as the lead team to conduct the Community Health Needs Assessment (CHNA) with input from other UMMS Baltimore City-based hospitals, community leaders, the academic community, the public, health experts and the Baltimore City Health Department. An executive summary was shared with the MWPH Foundation Board. MWPH adopted the following ACHI 6-step process to lead the assessment:

- I. Establishing the Assessment and Infrastructure
- II. Defining the Purpose and Scope
- III. Collecting and Analyzing Data
- IV. Selecting Priorities
- V. Documenting and Communicating Results
- VI. Planning for Action and Monitoring Progress
  - a) Priorities and Planning
  - b) Unmet Needs

The data was collected from five major areas — Community Perspective, Health Experts, Community Experts, Social Determinants of Health & Trends and Health Statistics & Indicators — to complete a comprehensive assessment of the community's needs.

Despite the larger regional patient mix of MWPH, for purposes of community benefits programming and this report, the Community Benefit Service Area (CBSA) of MWPH is within the northwest quadrant of Baltimore City.

The community's perspective was obtained through two surveys offered to the public during health fairs throughout Baltimore City. A 3-item survey asked respondents to identify their top health concerns and their top barriers in accessing health care. A longer survey was also created and posted on the public website. The methods included:

- 3-item survey distributed to the public at a variety of outreach events in FY15 (Short Form) and made available in Maryland's Health Matters publication N=1,212
- 25-item online survey posted to SurveyMonkey and the UMMC website for the community to complete (Long Form)
- Attended neighborhood meetings hosted by The Baltimore City Health Department and other local community organizations

Focus groups with community stakeholders, health experts, and public health professionals provided insight on the MWPH Community Benefit Service Area, as well as direction and guidance with regard to the CHNA Implementation Plan.

The complete CHNA can be found on the MWPH website at [mwph.org/about/community-advocacy](http://mwph.org/about/community-advocacy).

To obtain a copy of the CHNA, please contact the Community Advocacy Manager, Melissa Beasley via email: [melissa.beasley@mwph.org](mailto:melissa.beasley@mwph.org).



## CHNA IMPLEMENTATION PLAN

In April 2015, the MWPH Community Empowerment Team met to review data and discuss priorities that MWPH would focus on for the next three years.

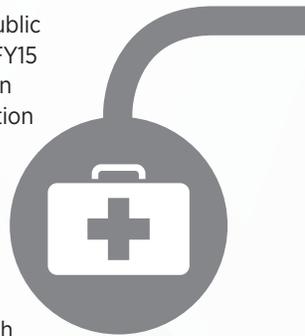
Analysis of all quantitative and qualitative data identified these top seven areas of need within Baltimore City. These top priorities represent the intersection of documented unmet community health needs and the organization's key strengths and mission. The priorities listed below were identified and approved by the MWPH Community Empowerment Team (4/30/15) and validated by health experts from the Baltimore City Department of Health, local schools of medicine, nursing, rehabilitation, social work and MWPH employees who engage in community affairs.

MWPH priorities were identified as follows:

1. Education/Health Literacy/Outreach
2. Access to Health Care
3. Chronic Disease/Obesity/Diabetes
4. Maternal and Child Health
5. Lead Poisoning & Asthma
6. Behavioral & Mental Health
7. Injury Prevention

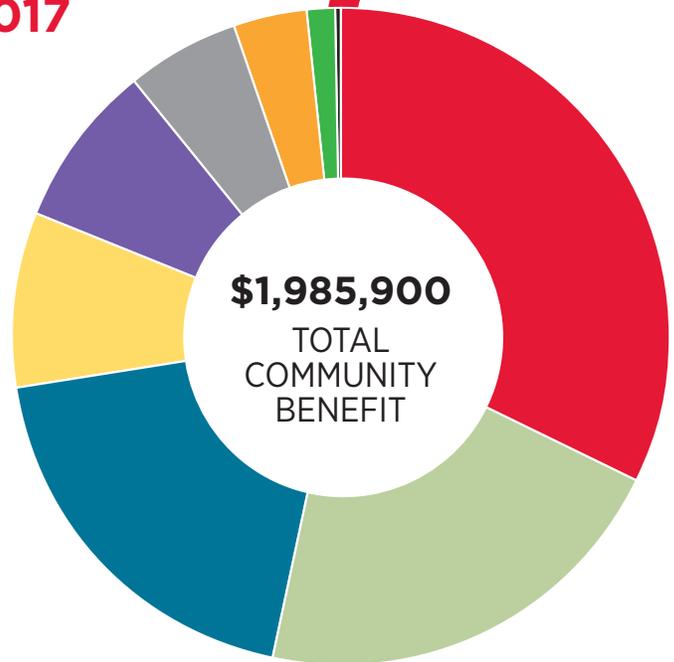
Key Activities to help address these identified needs include:

1. **Community Advocacy & Outreach Program:** Create incentives that provide pictures and/or low-literacy techniques to help families better understand how to navigate the health care system.
2. **Weigh Smart<sup>®</sup>, Weigh Smart Jr.<sup>®</sup>, Jump Start<sup>®</sup>, Healthy Living Academy (HLA):** Educate and engage community on the importance of daily physical activity guidelines using evidence-based research and programs. Provide HLA to at least three elementary and middle schools annually. Provide pedometers to key community physicians for children 10-18 years of age.
3. **Support Groups:** SPACE (Supporting Parents and Children Everywhere); Baby's First Year: Support Group for Parents With Medically Fragile Children; Family Happy Hour; Autism Speaks.
4. **Safety Baby Showers:** Provide car seat installation by nationally-certified child passenger safety technicians at safety baby showers along with talks on behavior management, appropriate toys/play, baby signing, and a resource guide to parents that outlines free resources in the community to equip parents with the skills and tools required to be better and more engaged parents.



# Community Benefits Financial Contributions for Fiscal Year 2017

Mission Driven Health Care Services	\$ 644,639
Health Professional Education	\$ 417,601
Charity Care	\$ 382,465
Community Health Services	\$ 167,390
Community Building Activities	\$ 158,823
Community Benefit Operations	\$ 112,470
Foundation Funded Community Benefit	\$ 74,655
Financial Contributions	\$ 26,771
Research	\$ 1,086



## FINANCIAL ASSISTANCE POLICY

If you cannot pay for all or part of your care from our hospital, you may be eligible to get free or lower cost services.

When you visit us for your child's care, we can help explain how much of the cost is covered by insurance and how much of the cost you will have to pay. You must give us all of the information about your health insurance, and we will do our best to help you. You may still need to talk to your insurance company directly about the health care services they cover. Only your insurance company can confirm what is covered. You need to be certain you completely understand your child's insurance coverage. The hospital cannot make any promises about what your insurance company covers. If your health insurance changes, you must give us the new information as soon as possible.

You will receive one bill for hospital services and a second bill for doctor services. We can offer patient financial help for hospital bills and doctor services. If you do not have insurance, we will not charge you more for hospital services than we charge people with health insurance. Usually, we will ask you to pay 1/2 of any expected costs on the first day of care, then we will divide up the rest to be paid while your child is being treated.

If you cannot pay what you owe for the health care costs of your child's care, you can apply to Mt. Washington Pediatric Hospital for financial help with those costs. We will:

1. Give you information about our financial assistance policy and/or
2. Offer you the help of a counselor, who will help you with the application.

### How We Review Your Application

We will look at your ability to pay for hospital care. We look at your income and family size. You may receive free or lower costs of care if:

1. Your income or your family's total income is low for the area where you live, or
2. Your income falls below the federal poverty level if you had to pay for the full cost of your hospital care, minus any health insurance payments.

We offer free care if your/your family income is below a certain amount and lower cost care if your income is a little bit higher. We also give cost discounts based on special family factors. You may receive help in the following ways:

1. **Payment Plan:** You pay the full cost of care, but this option lets you make smaller payments over a longer period of time, or
2. **Patient Financial Assistance:** You will not pay any costs or you will pay less than the full cost of care.

**PLEASE NOTE:** If you can get financial help, we will tell you just how much you can get. If you are not eligible to get financial help, we will tell you why not. The hospital must check all patients to see if they can get Medicaid before giving their own financial help.



### How To Apply For Financial Help

1. Fill out a Financial Assistance Application Form.
2. Give us all of the information we need to understand your financial situation. We will need information from each responsible parent/guardian of the child, including:
  - Your last two pay stubs, and
  - Your most recent bank statement from any/all of your bank accounts.
3. Turn the Application Form into us at 1708 W. Rogers Ave., Baltimore, MD 21209.

### Other Helpful Information

You can get a free copy of our Financial Assistance Policy and Application Form:

- Online at [mwph.org](http://mwph.org)
- In person at:
  - The Admissions Office or Outpatient Registration desk at our main location at 1708 W. Rogers Ave., Baltimore, MD 21209 or
  - The Nursing Station or Outpatient Registration desk at our unit in UM Prince George's Hospital Center, located at 3001 Hospital Dr., Cheverly, MD 20785.
- By mail (by sending a request to: Patient Accounting Office, MWPH, 1708 W. Rogers Ave., Baltimore, MD 21209.

You can call the following resources if you have questions or need help applying. You can also call if you need help in another language.

Mary Miller Vice President of Finance 410-578-5163	Debbie Fike Credentialing & Payer Relations 410-578-5334
Linda Ryder Manager of Patient Accounting 410-578-5206	Joanne Carper Outpatient Manager 410-578-5281
Denise Pudinski Director of Collaborative Care 410-578-2669 (inpatient only)	Katine Brown Outpatient Financial Counselor 410-578-7859



## Mt. Washington Pediatric Hospital

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An affiliate of University of Maryland Medical System and Johns Hopkins Medicine

### **Mt. Washington Pediatric Hospital**

1708 W. Rogers Ave.  
Baltimore, MD 21209  
410-578-8600

### **MWPH at UM Prince George's Hospital Center**

3001 Hospital Center Dr.  
4th and 6th Floors  
Cheverly, MD 20785  
301-618-3866

[mwph.org/about/community-advocacy](http://mwph.org/about/community-advocacy)