



Community Health Implementation Workplan

LCMC Health – Touro Infirmary

2022-2024

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Our Mission

Touro Infirmary, guided by the moral and ethical principles of Judaism, is dedicated to providing compassionate healthcare of the highest quality to the people it serves.

Our Vision

Touro Infirmary will be the premier multi-specialty organization serving New Orleans and the Gulf South by demonstrating quality and value in both clinical and patient satisfaction.

Guiding Principle

The safety of our patients, their needs and dignity will always come first.

Values of Touro

Welcoming Spirit: We provide a healing environment to patients, visitors and other members of the staff that is safe, caring and inviting.

Respect: We treat everyone with courtesy and are sensitive to the cultural differences and diversity.

Integrity: We serve our patients and each other in accordance with the highest ethical standards and in a reliable, accountable and transparent manner.

Professionalism: We pursue excellence in everything we do and project and maintain an appropriate image and demeanor at all times.

Teamwork: We effectively communicate and collaborate for the good of our patients.

Stewardship: We make wise use of our resources and advance Touro's longstanding tradition of community service.

Introduction

LCMC Health is a Louisiana-based, not-for-profit healthcare system serving the needs of the people of Louisiana, the Gulf South, and beyond. LCMC Health currently manages award-winning hospitals including Children's Hospital New Orleans, Touro Infirmary, East Jefferson General Hospital, New Orleans East Hospital (NOEH), University Medical Center New Orleans (UMCNO), and West Jefferson Medical Center (WJMC).

Founded in 1852, Touro Infirmary is New Orleans' only community based, non-profit, faith-based hospital. For more than 165 years Touro has had a special place in the heart of the community, providing high quality, compassionate healthcare to the New Orleans community. As a full-service hospital, Touro offers medical, surgical, intensive care, obstetric, skilled nursing inpatient services, inpatient and outpatient rehabilitation services, and a 24-hour Emergency Department. As an adult, acute care hospital, Touro offers comprehensive healthcare services at every stage of life, from delivering the second most babies in the state for any single hospital to providing cardiac, cancer, and rehabilitation care in a warm and healing environment.

The Patient Protection and Affordable Care Act (PPACA), which went into effect on March 23, 2010, requires tax-exempt hospitals to conduct community health needs assessments (CHNA) and implementation strategies in order to improve the health and well-being of residents within the communities served by the hospital(s). These strategies created by hospitals and institutions consist of programs, activities, and plans that are specifically targeted towards populations within the community. The execution of the implementation strategy plan is designed to increase and track the impact of each hospital's efforts.

Louisiana Public Health Institute (LPHI) was contracted by Metropolitan Hospital Council of New Orleans (MHCNO) to conduct a CHNA for 2021 for River Place Behavioral Health Hospital, LCMC Health, and Ochsner Health System.

The CHNA process undertaken by LCMC Health, along with several other MHCNO members, with project management and consultation by LPHI, included input from representatives who represent the broad interests of the community served by the hospital facilities, including those with special knowledge of public health issues, data related to underserved, hard-to-reach, vulnerable populations, and representatives of vulnerable populations served by each hospital. LPHI worked closely with Working Group members to oversee and accomplish the assessment and its goals. This report fulfills the requirements of the Internal Revenue Code 501(r)(3), established within the Patient Protection and Affordable Care Act (PPACA) requiring that nonprofit hospitals conduct CHNAs every three years.

Data from government and social agencies provides a strong framework and a comprehensive piece to the overall CHNA. The information collected is a snapshot of the health of residents in Southern Louisiana, which encompassed socioeconomic information, health statistics, demographics, and mental health issues, etc. The CHNA report is a summary of primary and secondary data collected for Touro Infirmary while the implementation strategy planning report is a plan for how Touro Infirmary will address the identified needs from the CHNA over the next 3 years.

The requirements imposed by the IRS for tax-exempt hospitals and health systems must include the following:

- Conduct a CHNA every three years.
- Adopt an implementation strategy to meet the community health needs identified through the assessment.
- Report how it is addressing the needs identified in the CHNA and a description of needs that are not being addressed, with the reasons why.

The Department of the Treasury and the IRS require a CHNA to include:

1. A description of the community served by the hospital facilities and how the description was determined.
2. A description of the process and methods used to conduct the assessment.
 - A description of the sources and dates of the data and other information used in the assessment and the analytical methods applied to identify community health needs.
 - A description of information gaps that impact the hospital organization's ability to assess the health needs of the community served by the hospital facility.
 - Identification of organizations that collaborated with the hospital and an explanation of their qualifications.
3. A description of how the hospital organizations considered input from persons who represent the broad interests of the community served by the hospitals. In addition, the report must identify any individual providing input that has special knowledge of or expertise in public health. The report must also identify any individual providing input who is a "leader" or "representative" of populations.
4. A prioritized description of all of the community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing such health needs.
5. A description of the existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA.
6. A description of the needs identified that the hospital intends to address, the reasons those needs were selected, and the means by which the hospital will undertake to address the selected needs.

Key Community Health Priority 1: Mental and Behavioral Health

Mental disorders and substance use disorders affect people of all racial groups and socioeconomic backgrounds. Mental health is defined as a state of well-being in which every individual realizes their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to their community. Mental health affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Good mental health is often noted as freedom from depression, anxiety, and other psychological issues. It also refers to the overall coping mechanisms of an individual. Having a behavioral health condition is not the result of one event but rather multiple linking causes such as genetics, environment, and lifestyle.

People with serious mental and/or substance use disorders often face higher rates of cardiovascular disease, diabetes, respiratory disease, and infectious disease; elevated risk factors due to high rates of smoking, substance misuse, obesity, and unsafe sexual practices; increased vulnerability due to poverty, social isolation, trauma and violence, and incarceration; lack of coordination between mental and primary health care providers; prejudice and discrimination; side effects from psychotropic medications; and, an overall lack of access to health care, particularly preventive care.ⁱ

Providers are approaching patient health with an integrated care model because they realize the importance of treating the whole individual. Behavioral health impacts physical health and vice versa. With proper monitoring and treatment, individuals suffering from behavioral health issues can lead healthy, productive lives and be contributing members of the community. The difficulty lies in identifying these issues and linking these individuals with behavioral health services.

In addition to the growing behavioral health problem in the study region, there is an increased use of drugs. Drug use and its consequences touches every sector of our society. Drug use affects our health and has a significant effect on the criminal justice system. Drug use also endangers the future of our youth. Addiction is a chronic disease, difficult to control as well as being difficult to break. Individuals who take drugs do so for many reasons including environmental influences, genetics, to escape reality, etc. An essential role the community can implement to stem its use is to provide programs towards prevention and reinforcement of keeping drugs and alcohol out of neighborhoods and schools; therefore, providing a safe and secure environment for all community residents. Prevention is a cost-effective approach to promoting safe and healthy communities.

Successful treatment of drug abuse is, most often, a life-long process. Treatment is intensive and expensive and requires a significant investment of time and effort on behalf of health professionals, social services, community-based organizations, the patient's support network, not to mention the patients themselves. Substance abuse treatment often requires multiple attempts to be deemed successful.

Touro Infirmary provides programs and services to many in the parish and surrounding regions. Behavioral health was identified as a top need through the 2021 CHNA. While Touro Infirmary is not the only health care institution in the region, the following strategies were identified and revealed to address the growing issue. Touro Infirmary, in partnership and collaborating with other regional health care organizations, will continue to capitalize on the communities' existing resources to tackle and confront the needs of the region.

Need: Mental and Behavioral Health

What is the Goal? Provide inpatient and outpatient mental and behavioral health services.

Anticipated Impact: Increase number of mental and behavioral health patients receiving services.

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Integrate behavioral health into medical, clinical and obstetric sites.	Residents of communities served by Touro Infirmary	1) Contract with Oceans Behavioral Health to see outpatients as needed and upon discharge	# of clinic patients referred to Oceans Feedback from patients on quality of services Feedback from referring providers on quality of services	Resources: Staff time, materials, supplies Partners: Crescent City Physicians Inc, Oceans Behavioral Health
		2) Contract with Oceans Behavioral Health to consult on Inpatients and with ER patients when needed	# # of inpatient consults referred to Oceans # of ER consults referred to Oceans Feedback from patients on quality of services Feedback from referring providers on quality of services	Resources: Staff time, materials, supplies Partners: Crescent City Physicians Inc, Oceans Behavioral Health, Schumacher
Strategy -2	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Increase programs connecting patients with appropriate health professionals.	Residents of communities served by Touro Infirmary	1) Implemented EPIC EMR In ED and the clinics with improved, validated suicide screening tool and made information available via EMR for access by behavioral health professional and primary care providers	# clinic patients screened Document utilization of EPIC EMR Tool # ED patients screened Document utilization of EPIC EMR Tool Measure of ER patients that test positive in suicide screening tool	Resources: Staff time, materials, supplies Partners: EPIC, Schumacher, Crescent City Physicians, Inc.

		2) Offer Parkinson's Support Group Meetings with Medical Professionals- Goal is 12 per year	# of attendees	Resources: Staff time, materials, supplies Partners: Council on Aging, Crescent City Physicians, Inc
Strategy -3 *	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Actively engage as members of the City of New Orleans Behavioral Health Council. ⁱⁱ	Hospital employees	1) Attend and participate in the relevant sector work group meetings that are held 9-10 times per year.	# of meeting attended # of attendees	Resources: Staff time Partners: City of New Orleans Behavioral Health Council
		2) Attend, participate, and sponsor the annual health forum that is open to the public when held with the goal of 12 forums per year	# of attendees	Resources: Staff time Partners: TBD
Strategy -4 *	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Actively engage as members of the City of New Orleans Opioid Task Force. ⁱⁱⁱ	Hospital employees	1) Attend and participate in task force meetings as scheduled. Anticipated cadence of meetings will be every 3 months.	# of meetings attended # of participants in attendance	Resources: Staff time Partners: City of New Orleans Opioid Task Force
		2) Share de-identified data and trending information to the task force when available and requested.		Resources: Staff time Partners: New Orleans Opioid Task Force

Key Community Health Priority 2: Health Equity and Discrimination in Healthcare

Discrimination in healthcare affects patient engagement, access to care, and quality of care. This analysis found examples of healthcare systems discriminating against marginalized communities based on race, language, immigration status, age, sexual orientation, and gender identity/expression. Previous experiences of discrimination contribute to a lack of trust in the health care system at the personal and community levels. Lack of diversity in the healthcare workforce was identified as a factor that leads to discrimination.

Health equity is achieving the highest level of health for all people. Health equity entails focused societal efforts to address avoidable inequalities by equalizing the conditions for health for all groups, especially for those who have experienced socioeconomic disadvantage or historical injustices.

Inequities are created when barriers prevent individuals and communities from accessing these conditions and reaching their full potential. Inequities differ from health disparities, which are differences in health status between people related to social or demographic factors such as race, gender, income or geographic region. Health disparities are one way we can measure our progress toward achieving health equity.

How do we achieve health equity? We value all people equally. We optimize the conditions in which people are born, grow, live, work, learn and age. We work with other sectors to address the factors that influence health, including employment, housing, education, health care, public safety and food access. Discrimination is very much related to health equity as racism as a force in determining how these social determinants are distributed.

NEED: Health Equity and Discrimination in Healthcare

WHAT IS THE GOAL? Break down barriers in discrimination (and inequities) in health care.

ANTICIPATED IMPACT: Increase ability to meet patient care needs by working to overcome discrimination (and its related inequities)

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Develop expanded and regular education to Leaders and Staff on identifying and breaking down barriers related to discrimination and improving health equity	Hospital employees and Medical Staff	1) We have implemented <i>At the H.E.L.M.</i> (Health Equity Leadership Matters) Training for all LCMC Senior Leaders (AVPs and above). This year long training was designed to: <ol style="list-style-type: none"> a) educate, enlighten and empower senior leadership with knowledge and tools to lead diverse teams b) create equitable and inclusive work environments c) Create culturally competent and meaningful care for all patients. d) Goal is 100% Senior Leader participation/training 	# of Senior Leaders participating # of employees participating % of employees participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.
		2) The <i>At the HELM</i> training will span over three years and will cascade from: <ol style="list-style-type: none"> a) Senior Leaders – Year 1 b) Directors & Managers – Year 2 <ol style="list-style-type: none"> i) Goal is 100% of Directors and Managers trained c) Frontline Workers – Year 3. <ol style="list-style-type: none"> i) Goal is 80% of workers trained 	# of Senior Leaders participating # of employees participating % of employees participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.
		3) We are developing a Health Equity Learning Series which will include sessions to address contributing factors regarding these topics	# of Senior Leaders participating # of employees participating % of employees participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.

		4) We have also implemented a Diversity & Social Responsibility presentation which is incorporate into current New Leader training.	# of Senior Leaders participating # of employees participating % of employees participating # of Medical Staff participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.
		5) Offer executive coaching/leadership training to minority female leaders led by a consultant that specializes in that target audience	# of Senior Leaders participating # of Directors/Middle Managers participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Almost Legacy, LLC
Strategy -2	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Create improved access for certain disadvantaged patients	Residents of communities served by Touro Infirmary	1) Changed Language Services vendors to ensure optimal quality of communication and patient safety for our LEP (Limited English Proficiency) and hearing-impaired patients.	# of patients using language services Patient satisfaction scores and comments	Resources: Staff time, materials, equipment Partners: Crescent City Physicians, Nic., Cyops Language Systems, all credentialed medical providers
Strategy -3	Target Population	Actions	Timeframe/Measures	Potential Resources/ Partners
Create staff training that decreases possible racial bias in healthcare	Hospital employees	1) Provide training of all Patient Access staff throughout the system on the Standardized Methodology for collection of Race Ethnicity and Language (REaL) Data.	# of employees participating % of employees participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.

		2) We are developing training for clinical staff on the Standardized Methodology for the collection of Sexual Orientation Gender Identity (SOGI) Data. Trainings will assist us in obtaining patient self-reported data which enables accurate disaggregation of our data set, opportunities to identify disparities in care and the creation of strategies to ensure health equity.	# of employees participating % of employees participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc.
		3) Have all caregivers complete Implicit Bias training provided by a 3 rd party vendor starting with L&D staff & providers with goal of 100% participation	# of Senior Leaders participating # of employees participating % of employees participating # of Medical Staff participating	Resources: Staff time, materials, supplies Partners: LCMC Health DEI Team, Crescent City Physicians Inc., LSU

Key Community Health Priority 3: Access to Care and Continuity of Care

Access to comprehensive, high-quality health care services is important for promoting and maintaining health, preventing and managing disease, reducing unnecessary disability and premature death, and achieving health equity for all Americans. The Patient Protection and Affordable Care Act (PPACA) of 2010 improved access to health care by providing health insurance for 20 million adults. Despite this increase, significant disparities still exist with all levels of access to care by sex, age, race, ethnicity, education, and family income.^{iv}

Most Americans underuse preventive services and vulnerable populations with social, economic, or environmental disadvantages are even less likely to use these services.^v Both routine preventive and regular primary care are essential to good health; providers are able to detect and treat health issues early; preventing complications, chronic conditions, and hospitalizations. Individuals without insurance or the financial means to pay out of pocket are less likely to take advantage of routine preventive and primary care. These individuals consume more public health dollars and strain the resources of already overburdened facilities dedicated to free and low-cost care.

The level of access a community has to health care has a tremendous impact on the community's overall health. Several factors including, geography, economics, and culture, etc., contribute to how residents obtain care. Geography impacts the number of providers that are available to patients in a given area as transportation options are limited to some residents. Health problems affect productivity resulting in 69 million workers reporting missed days due to illness each year.^{vi} Lack of job opportunities can reduce access to affordable health insurance. Both geographic and economic factors are impacting residents of the Touro Infirmary service area. While there are quality health care resources available to residents within the service area, many residents either cannot afford health services or have additional access issues which affect their ability to obtain and receive care

Characteristically, access to care refers to the utilization of health care services or the ability in which people can obtain health care services. Disparities in health service access can negatively impact and affect an individual's quality of life. High cost of services, transportation issues, and availability of providers are some of the top barriers or problems to accessing health care services. Identifying access to care was a top community need in the Touro Infirmary community; as this community need was a top community concern in the 2015 and 2018 community health needs assessments also.

As part of LCMC Health, Touro Infirmary provides access to health care to many in the parish and surrounding regions. Access to care was identified as a top need through the 2021 community health needs assessment. While Touro Infirmary is not the only health care institution in the region, the following strategies were identified and revealed to address the growing issues. Touro Infirmary working in partnership and collaborating with other regional health care organizations, will continue to capitalize on the communities' existing resources to tackle and confront the needs of the region.

Need: Access to and Continuity of care

What is the Goal? Reduce barriers to care and ensure access to primary care services for the underserved populations continues.

Anticipated Impact: Improve on the number of low-income, vulnerable patients are receiving and link them to patient care providers, services, and resources.

Strategy -1	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Connect underserved patients to appropriate health care services in the region.	Patients receiving care at Touro Infirmary regardless of ability to pay	1) Hire three (3) more OB providers and three (3) more primary care NPs to include and NP in New Orleans East	# of OBs and NPs hired # patients served by clinics annually	Resources: Facility costs, salaries and staff time Partners: Crescent City Physicians Inc.
		2) Create comprehensive senior care program to provide the best care and access to regions elderly (age 65+) population a) GEDA accredited senior ER b) NICHE certified IP unit c) Amazing Agers Program- Offering 12 events per year d) Senior VIP Access Program	# of elderly patients cared for	Resources: Facility costs, salaries and staff time Partners: Crescent City Physicians Inc., Council on Aging, Area Nursing Homes, Woldenberg Village
		3) Via the Touro Infirmary Foundation, continue to match a \$5,000 grant from American Cancer Society to provide free Uber rides to cancer patients who cannot afford or do not have access to transportation. Goal is free transportation for 1,000 patient care visits per year	# of Uber rides provided	Resources: Facility costs, salaries and staff time Partners: Touro Infirmary Foundation, Uber, American Cancer Society
		4) Hire a new Spanish-speaking OB/GYN Provider in a new clinic so to increase Spanish-speaking patient access to include a foundation sponsored clinic for recent immigrants	# of Spanish speaking patients served	Resources: Costs, staff time, funding, and compensation for oversight Partners: Crescent City Physicians Inc., Touro Infirmary Foundation

		5) Restart Health Screenings discontinued during COVID-19 pandemic with an emphasis on the minority community and with a goal of 20 screenings and 500 participants to include: a) Prostate cancer b) Breast cancer c) Diabetes d) Public school Health Fairs	# of screenings # of participants	Resources: Costs, staff time, funding, and compensation for oversight Partners: Crescent City Physicians Inc., Touro Diabetes Center, Touro Infirmary Foundation
Strategy -2	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Increase the number of physicians trained in the Touro Infirmary community.	Physician shortage areas	1) Introduce residents and youth to careers in healthcare through: a) Healthcare Career Camp b) Junior Volunteer Program	# of Healthcare Career Camp participants & schools/zips # of Junior Volunteers and Demographics of participants	Resources: Costs, staff time, funding, and compensation for oversight Partners: LSU, Tulane University, Crescent City Physicians Inc.
		2) Serve as a teaching hospital to provide training and education for physicians in a variety of specialties through: a) Clinical rotations of at least 300 medical students per year b) Graduate Medical Education clinical training to at least 300 residents and 30 fellows per year c) Active physician recruitment of graduating residents/fellows	# students, residents and fellows trained annually # of physicians recruited	Resources: Costs, staff time, funding, and compensation for oversight Partners: LSU, Tulane University, Crescent City Physician Inc.
Strategy -3	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Continue to provide clinical training opportunities to allied Health students enrolled	Community allied health students	1) Create an accredited Clinical Pharmacist residency program in partnership with Xavier University with the goal of increasing pharmacists' exposure to hospitals- Goal is to train 2 residents per year	Create an ASHP accredited program # of pharmacy residents completing the program # of pharmacy students hired	Resources: Facility costs, salaries and staff time Partners: Xavier University

in healthcare provider programs throughout the hospital system.				
		2) Continue to partner with Xavier University to offer Pharmacy Intern training with a goal with training 6 interns per year	# of pharmacy interns trained # of pharmacy interns hired	Resources: Facility costs, salaries and staff time Partners: Xavier University
		3) Increase training access to RN clinical training a) RN Intern Program- Goal is to train at least 24 RN Interns per year	# of RN Interns trained # of RN Interns hired	Resources: Costs, staff time, funding, and compensation for oversight Partners: LSU School of Nursing, Delgado, SUNO, Dillard
Strategy -4	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Offer information and assistance related to the affordability of health services.	Patients receiving care at Touro Infirmary regardless of ability to pay	1) Provide assistance in navigating the healthcare payment system, including Medicaid enrollment.	# of patients served by financial counselor % of uninsured patients to receive Medicaid enrollment	Resources: Salaries, staff time of financial counselors, Unfunded care budget Partners: Conifer Health Solutions, Crescent City Physicians Inc.
		2) Provide patient navigation through case managers and social workers a) Transportation Assistance b) Housing Assistance c) Assisted Living & Nursing Room Placement d) Skilled Nursing Placement e) Home Health Assistance	# of patients receiving navigation services through case management and social workers.	Resources: Salaries, staff time of financial counselors, Unfunded care budget Partners: Crescent City Physicians Inc. Amer. Cancer Society Amer. Diabetes Assoc.

				Amer. Heart Assoc. Amer. Lung Assoc. Brain Injury Assoc. of LA Various Hospice Centers Curahealth Woldenberg Village Susan G. Komen Council on Aging Touro at Home
		3) Provide discounts in billing for the uninsured to including working with hospital-based providers Provide discounts in billing for the uninsured to including working with hospital-based providers	# of financial arrangements made	Resources: Salaries, staff time of financial counselors, Unfunded care budget Partners: Conifer Health Solutions Crescent City Physicians Inc. Schumacher Regional Radiology Delta Pathology
Strategy -5	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Increase access to maternal health Services.	Expecting mothers receiving care at Touro Infirmary regardless of ability to pay	1) Offer a comprehensive, individualized and positive approach to birth preparation, labor and delivery and postpartum care. a) Improved on-line scheduling b) Baby scripts program c) Web resources (educational material, classes, etc.) d) Onsite, internet and community-based classes to improve maternal and child health- Goal is 100+ classes with 1000+ participants per year i) Infant CPR ii) Baby Food Classes iii) Understanding Fatherhood	# of Medicaid/un-insured deliveries # of Web hits # of class offerings annually # of class attendees by ZIP	Resources: Staff time, committed space, medical equipment, website resources Partners: Children's Hospital of New Orleans, Nurse Family Partnership, March of Dimes

		<ul style="list-style-type: none"> iv) Grandparenting 101 v) Sibling Classes vi) Health MomHealth Baby Seminar 		
		<p>2) Improve birth outcomes for patients served by Touro Infirmery through lactation education</p> <ul style="list-style-type: none"> a) Use of Nursing Nest Van b) Baby Cafes' c) Prenatal Breastfeeding Class- Goal is 12 classes per year 	<ul style="list-style-type: none"> # of lactation consults provided # of times Nursing Nest van is used # of Baby Café sessions held # of Breastfeeding classes held 	<p>Resources: Staff time, committed space, medical equipment, website resources</p> <p>Partners: Children's Hospital of New Orleans, Nurse Family Partnership, March of Dimes, Lan Perinatal Quality Collaborative (LAPQC), West Jefferson Medical Center, LSU MFM Physicians, Healthy Start New Orleans</p>
Strategy -5	Target Population	Actions	Timeframe/Measures	Potential Resources/Partners
Increase awareness of supportive programs and services in the area.	Residents of Touro Infirmery community	<p>1) Assist patients to access transportation resources and with discharge medications through Touro Infirmery Foundation, social workers, case managers and patient navigators with the goal of assisting 300 patients</p>	<ul style="list-style-type: none"> # of patients served # of discharge medications paid for 	<p>Resources: Staff time, committed space, medical equipment, website resources</p> <p>Partners: Touro Infirmery Foundation</p>

Conclusion

LCMC Health was founded by Louisiana's only freestanding children's hospital, and currently consists of Children's Hospital, Touro Infirmary, University Medical Center New Orleans, New Orleans East Hospital, West Jefferson Medical Center, and East Jefferson General Hospital. In addition to its six hospitals, LCMC Health significantly expanded its footprint and scope in the past several years through a joint ownership agreement with Crescent City Surgical Centre, an urgent care partnership with Premier Health. In 2017, LCMC Health joined the Health Leaders Alliance clinically integrated statewide network, and in 2018 introduced its own clinically integrated network, LCMC Healthcare Partners, LLC. As a large health system in Louisiana, LCMC Health is uniquely positioned to adapt to the rapidly changing healthcare environment through its size, scale and leadership, and is committed to providing the best care possible for its community.

Touro Infirmary will continue to improve health services for residents by leveraging the region's resources and assets; while existing and newly developed strategies can be successfully employed. The collection and analysis of primary and secondary data armed the Working Group with sufficient data and resources to identify key health needs. Local, regional, and statewide partners understand the CHNA is an important building block towards future strategies that will improve the health and well-being of residents in their region. Touro Infirmary will work closely with community organizations and regional partners to effectively address and resolve the identified needs.

Touro Infirmary took into consideration the ability to address the region's identified needs and viewed the overall short and long-term effects of undertaking the task. Touro Infirmary will address the identified needs and view them as positive and encouraging changes. Touro Infirmary will complete the necessary action and implementation steps of newly formed activities or revise strategies to assist the community's underserved and disenfranchised residents. Future community partnerships and collaboration with other health institutions, organizations, involvement from government leaders, civic organizations, and stakeholders are imperative to the success of addressing the region's needs. The available resources and the ability to track progress related to the implementation strategies will be managed by the health system along with other hospital departments at Touro Infirmary to meet the region's need. Tackling the region's needs is a central focus hospital leadership will continue to measure throughout the years. Touro Infirmary will continue to work closely with community partners, as this implementation strategy planning report is the first step to an ongoing process to reducing the gaps of health disparities and ensuring all residents have access to the high-quality health care resources available in the region.

Endnotes
