MetroHealth
Institute for H.O.P.E.™

2023 IN REVIEW

Strong Like Bull. Black Like Crow is an original artwork by Cleveland artist Perris Mackey commissioned for the MetroHealth Glick Center. You can learn more about Perris Mackey at immortalnerd.com.

2023 Year in Review

2023 has been a year of progress, recognition and transition.

This year, we marked the retirements of our leaders, inaugural President Sue Fuehrer and founding Medical Director Jim Misak, MD. Their vision and pursuit of excellence guided the groundbreaking work that has defined the Institute for H.O.P.E.™ Since 2019, under their leadership, the Institute has established itself as a strong community contributor and gained a presence on the national stage. They have left us with a solid foundation to build upon and further our mission of identifying and acting on the social drivers of health (SDOH), combating health disparities and improving the health and lives of our patients and neighbors.

This year, we advanced that mission through initiatives like Ohio Health Improvement Zone (OHIZ) projects funded with support from the Ohio Department of Health. OHIZ projects build local capacity to help remove barriers to health in some of Ohio's communities facing the greatest risk of poor health outcomes.

Working with 32 community partners, we sponsored 28 community health events, engaging more than 2,993 people in Cleveland's Clark-Fulton and Buckeye neighborhoods. In addition to creative activities and health-promoting services, each of the events provided opportunities to conduct SDOH screens to identify individuals struggling with life circumstances – like food insecurity, unsafe housing and lack of access to reliable transportation – that can be barriers to good health.

To ensure we are reaching as many patients as possible with our screening questionnaire, we piloted a home mail campaign to connect with patients who lack digital access to MyChart. These screenings, and our robust efforts to respond to the needs they reveal, continue to be our core work. In 2023, 6.5% of patients with health-related social needs who wanted assistance were successfully connected to services and resources.

Our successes drew the national spotlight this year when two organizations chose to hold their conferences in Cleveland, drawn in large part by the chance to learn about MetroHealth and Institute for H.O.P.E. programming.

Our Center for Arts in Health was instrumental in bringing the annual conference of the National Organization for Arts in Health to Cleveland, convening more than 300 people from throughout the United States to learn, share best practices and highlight exemplary programs like ours. The elite Scottsdale Institute brought its members and executives from top health systems throughout the United States to tour the Institute for H.O.P.E. and learn about our initiatives to address SDOH. This visit was part of the organization's national summit focused on health equity strategies.

We are proud of the work we did in 2023, highlights of which are showcased in the following pages. Our efforts have served as a model for others working to eradicate health inequities and improve the health and lives of everyone regardless of their background or where they live.

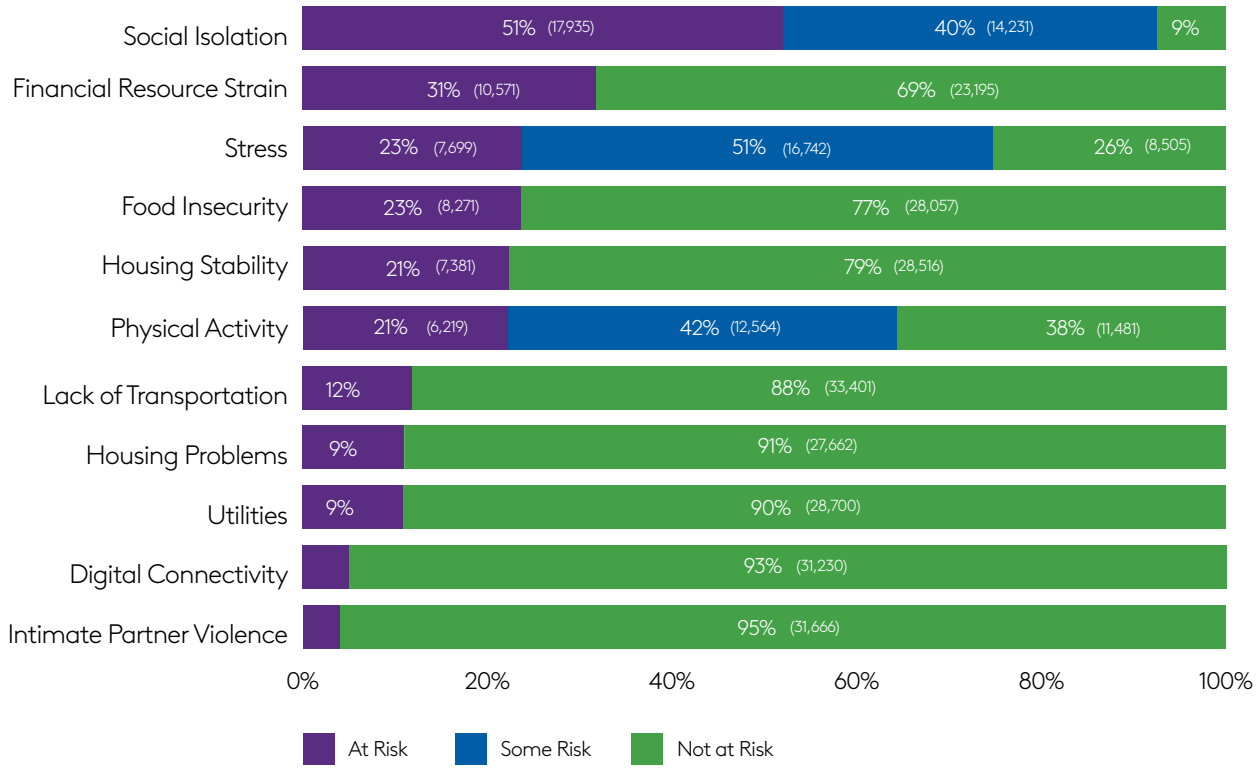
Karen Cook
Interim President
Institute for H.O.P.E.

Screening for the Social Drivers of Health

MetroHealth aims to screen all patients for their health-related social needs – things like access to food, safe housing, transportation and job opportunities. We also ask about stress, social isolation and intimate partner violence.

With this data, we can tailor our programming and elevate the work of our partners to address the community's most pressing needs. In 2023, we screened **42,245** patients.

Here's what we found:



UNITE OHIO

In 2020, MetroHealth partnered with Unite Us to build Unite Ohio – a coordinated care network of health and social care providers designed to link individuals with resources they need to live healthier lives, including fresh food, utility help, transportation and more. Today, the network has expanded throughout the state.

2,147 registered users in Cuyahoga County

325 community partners serving Cuyahoga County

6,927 referrals by MetroHealth users

4,108 unique MetroHealth patients served

From 2023 data
To learn more, visit ohio.uniteus.com.

Financial Resource Strain and Digital Connectivity

What We Are Doing

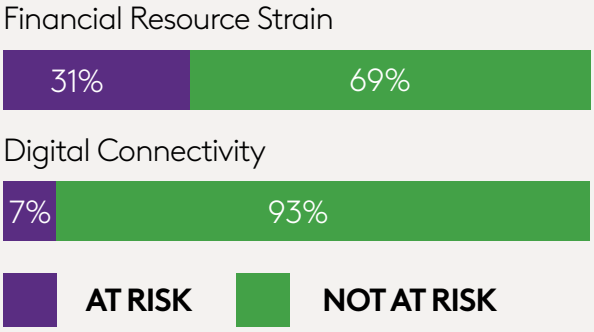
Financial Coaching

- Through a team of financial coaches based at our Opportunity Center, we offer a personalized, non-judgmental financial coaching service. Trained professionals collaborate with coaching participants to help them reach their financial goals, including credit building or repair, reducing debt, increasing savings, creating a spending plan/budget, making a major purchase (i.e., home, car), starting a business, general banking needs, managing student loan debt and claiming the Earned Income Tax Credit.

Digital Connectivity

- Our **Digital Connectivity Initiative** works to address digital equity through partnerships with **DigitalC, Cleveland Metropolitan Housing Authority (CMHA)** and **Dollar Bank**, providing installation of affordable high-speed internet, device distribution and digital literacy education.
- Our **FCC Connected Care Pilot** is expanding the installation of affordable high-speed internet service, in partnership with **CMHA**, to six sites over a three-year period. In 2023, we concentrated our efforts on two public housing locations that cater to the residential needs of senior citizens.

Patients at Risk



Why it Matters

More than one-third of Americans say finances prevent them from living a healthy lifestyle, including the ability to afford internet connectivity – a necessity for communicating with healthcare providers, connecting with families and friends, applying for jobs and more.

Impact

Financial Coaching

Financial coaching clients in 2023: **50**

Financial goals met by clients in 2023: **270**

Most Frequently Achieved Financial Outcomes

Average credit score change: **+23 points**

Increased net income by: **$199**

Digital Connectivity

- Connected **1,283** households in Cleveland to affordable internet for $18/month.
- Engaged more than **278** participants in Digital Skills Training.
- Through the FCC Connected Care Pilot this year, we worked with **49** Phoenix Village CMHA households.

Food Insecurity

Patients at Risk

Food Insecurity

Why it Matters

Food insecurity is a strong risk factor for chronic disease and makes managing chronic illnesses more difficult.

What We Are Doing

Our **Food as Medicine Clinic** provides nutritious food packages to patients who are experiencing food insecurity and have been diagnosed with a chronic illness affected by diet, such as Type 2 diabetes and high blood pressure. Eligible patients can visit our on-site food pantries every two weeks for up to one year to choose foods for their households that support their health goals. Participants have achieved meaningful improvements to their diets and better health outcomes.

Our **School Health Program** received funding from the **School-Based Health Alliance** and the **No Kid Hungry** campaign to create Youth Advisory Councils at three local high schools for the 2023-24 school year. The Advisory Councils will provide feedback on the health services offered at their schools, promote the School Health Program to their peers and create a project to improve access to food and increase food security in their school or community.

Impact

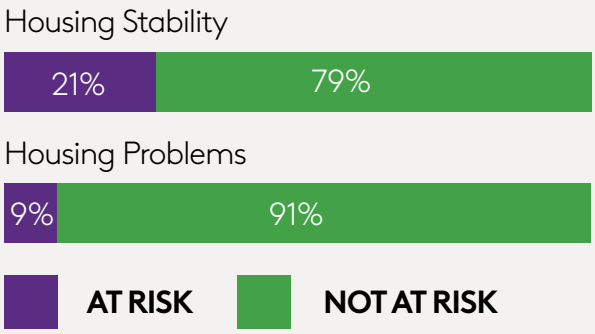
Our monthly mobile pantry program distributed **113,445** meals worth of fresh produce in 2023, a **40%** increase over 2022.

400 lbs. of vegetables and herbs grown in our **HOPE & Healing Garden** were given to patients during the 2023 growing season.

We conducted outreach to **8,500** patients through our SNAP enrollment text campaign in partnership with the **Greater Cleveland Food Bank**.

Housing Stability and Housing Problems

Patients at Risk



Why it Matters

The ability to access safe and stable housing has a direct impact on health outcomes. Poor quality housing contributes to health problems, including chronic disease and injury, and can have harmful effects on childhood development.

What We Are Doing

Our **Lead Screening Project** works to identify and address residential lead hazards, so newborns can be discharged to a lead-safe environment. We work closely with our Obstetrics Department to ensure patients who are pregnant receive education and screening related to potential lead hazards in the home. Supports are in place to provide home inspections and basic interventions as well as connection to resources for mitigation if needed.

Our Home Repairs for Asthma Control - **Safe and Healthy Homes Program** provides housing modifications for vulnerable populations affected by asthma. The goal is to reduce the factors in the home that may be triggering asthma and other breathing conditions in children by removing and repairing the causes of poor air quality through efforts like duct cleaning and measures aimed at pest control.

Impact

1,944 pregnant patients have been screened through the **Lead Screening Project**, and **93** interventions have been conducted at MetroHealth's Main Campus Obstetrics Clinic.

34 referrals for services to make home repairs have been made through the **Safe and Healthy Homes Program.**

Intimate Partner Violence

Presenters at Ohio Attorney General Conference **Two Days in May**

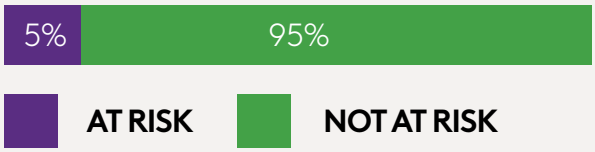
What We Are Doing

Our **Trauma Recovery Center** (TRC) provides survivor-centered services at bedside and removes barriers to care, focusing on reaching underserved communities and providing aid to victims of violence. TRC provides assertive outreach to patients who screen as at-risk for intimate partner violence. This outreach includes:

1. conducting a safety assessment.
2. providing crisis intervention and emotional support.
3. educating about victims' rights in the State of Ohio.
4. sharing victim-specific resources.
5. offering support for other social drivers of health risks that the victim may be facing.
6. referring for mental health therapy and to community-based organizations with consent.

Patients at Risk

Intimate Partner Violence



Why it Matters

Intimate partner violence is a public health issue that affects people from all backgrounds and requires understanding and coordination for prevention at all levels – individual, family and the community.

Impact

TRC team members have successfully reached **57%** of patients screening at risk for IPV.

57%

Of those patients, **95%** received a service, such as victims' rights education, emotional coaching or crisis intervention.

95%

31% of the patients received a community-based organization referral.

31%

Social Isolation

Patients at Risk

Social Isolation

Why it Matters

A lack of social connection is associated with negative health outcomes, including higher rates of depression, anxiety, suicide, stroke and heart disease.

What We Are Doing

Arts in Health expanded its **Creative Arts Therapies** services to ambulatory settings. Providers refer patients to group art therapy and music therapy sessions at various MetroHealth Senior Care sites, including two Spry Senior locations.

Our Center for Healthy Families and Thriving Communities leads **Calls for HOPE**, a program that connects trained and vetted volunteers with MetroHealth patients identified as at high risk for social isolation. Through weekly calls via a secure private platform, volunteers chat with patients and help them explore ways to engage with others. Patients are identified through our social drivers of health screening tool as well as provider referrals.

Impact

Creative Arts Therapies Sessions – Referred patients **498** and community participants **65**.

Calls for HOPE successfully connected **122** enrolled patients with volunteers. On average, calls lasted **11** minutes.

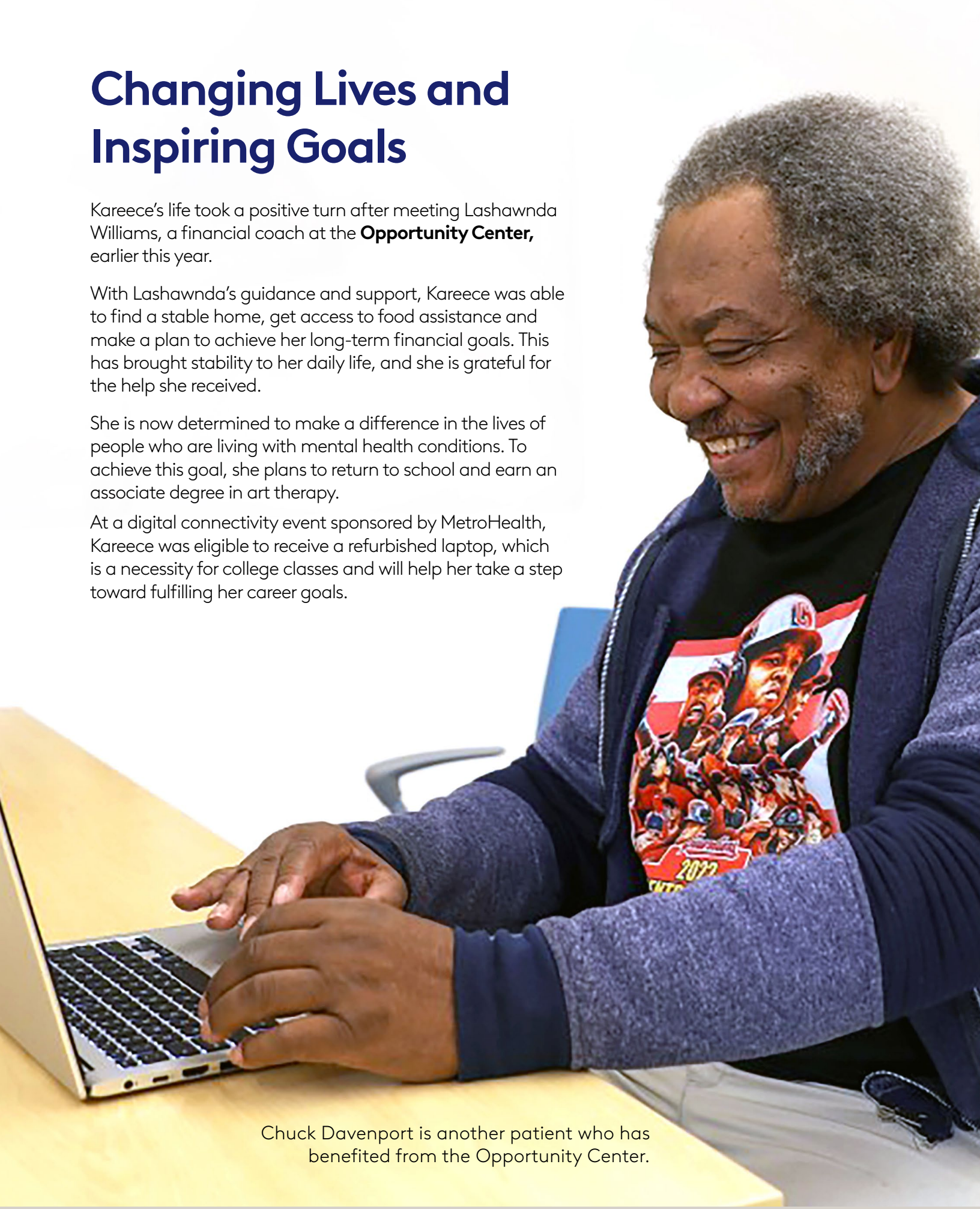
Changing Lives and Inspiring Goals

Kareece's life took a positive turn after meeting Lashawnda Williams, a financial coach at the **Opportunity Center,** earlier this year.

With Lashawnda's guidance and support, Kareece was able to find a stable home, get access to food assistance and make a plan to achieve her long-term financial goals. This has brought stability to her daily life, and she is grateful for the help she received.

She is now determined to make a difference in the lives of people who are living with mental health conditions. To achieve this goal, she plans to return to school and earn an associate degree in art therapy.

At a digital connectivity event sponsored by MetroHealth, Kareece was eligible to receive a refurbished laptop, which is a necessity for college classes and will help her take a step toward fulfilling her career goals.



Chuck Davenport is another patient who has benefited from the Opportunity Center.

Bringing Care to the Community

Why It Matters:

Research shows that social drivers of health (SDOH) not only impact health outcomes, but also limit a patient's ability to access healthcare services.

What We Are Doing:

The Institute for H.O.P.E. has closed access gaps and improved healthcare outcomes by taking health services into the community where our patients live, work and play. We support whole-person care through innovative Community and Corporate Health and Arts in Health programs in our hospitals, ambulatory sites and neighborhoods.

The Center for Community and Corporate Health:
Community Health Workers (CHWs) have connections to the neighborhoods where they serve and are integral to addressing SDOH for our patients and community. Last year, 11 CHWs worked in various areas across the Institute for H.O.P.E., including school health, trauma recovery, Food as Medicine and in our Opportunity Center. CHWs work to provide patient outreach, education and care coordination with an emphasis on SDOH. With support from a nearly $3 million Health Resources and Services Administration grant for CHW training, MetroHealth is coordinating a collaborative effort with key partners across the region to expand, retain and upskill the CHW workforce.

The **Mobile Clinic Outreach Program** takes primary care services on community mobile units directly to Cuyahoga County's most vulnerable populations at more than **15** sites, including homeless shelters, social service organizations and local schools, with a focus on health equity to meet health and social needs. In 2023, the program facilitated **1,721** patient visits and brought **719** new patients to MetroHealth.

The **School Health Program's** mobile units provide access to health care at more than **25** schools throughout the county. Reaching **4,850** students in 2023, the program has improved both health and education outcomes, including a history of increased attendance and decreased emergency department utilization.

The Center for Arts in Health: The performing and visual arts are known to have a positive, transformative impact on patients' health and quality of life. We are dedicated to bringing the benefits of the arts to everyone in our community.

- **Arts Kits** were distributed at **14** community sites including homeless shelters and permanent supportive housing sites. In addition to art- and music-making supplies, the **500** kits included important clinical and social resources.

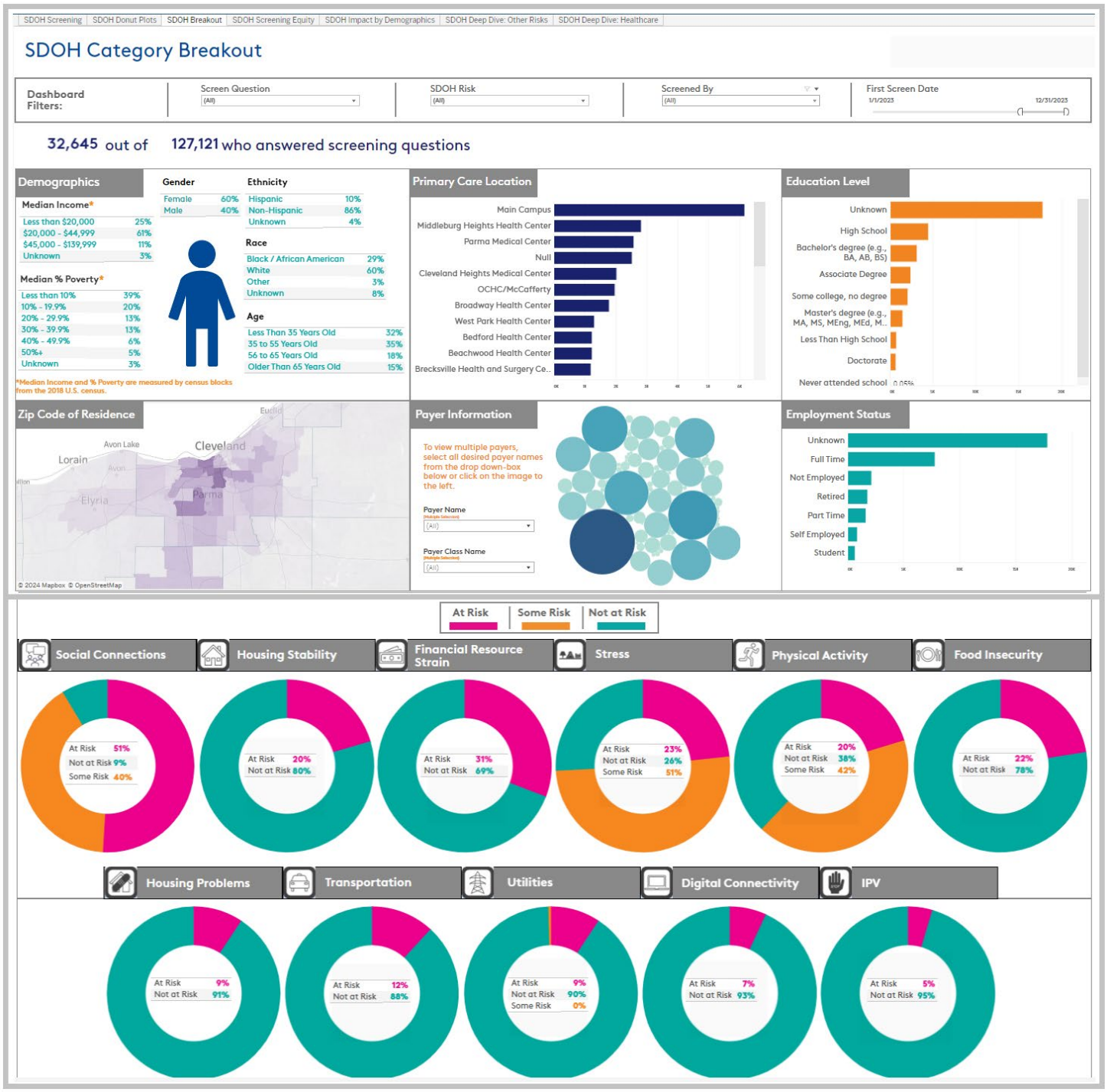
- **The SAFE (Students Are Free to Express) Project** is an arts-based, psychologically informed program created to foster resilience in urban youth who have been exposed to chronic stressors, including individual and community trauma. In 2023, through the support from the National Endowment for the Arts, we partnered with Cleveland State University to complete a research study, which showed that SAFE is emerging as a promising evidence-based program. Last year, we served **740** students at four Cleveland Metropolitan School District schools in partnership with multiple community arts organizations.

- **10 Children – Art For Change** is a global social art project founded to give children living in poverty around the world the possibility to put their lives, daily struggles and ideas for the future at the center of attention. Our Center for Arts in Health was influential in the selection of Cleveland as host for the first of 10 events to be held throughout the world. The multimedia festival brought awareness of the impact of poverty on children's health while engaging children and families in Cleveland.

Social Drivers of Health Dashboard

The Institute for H.O.P.E. has developed advanced capabilities in data and analytics to help identify and address social drivers of health (SDOH) in our community. Our data and analytics approach helps us better understand the impact of SDOH on our patients and the wider community, develop effective programs and partnerships to address the health-related social needs of our patients and evaluate the impact of this work. Program staff also can conduct advanced health equity research.

To achieve this, our team of analytics experts has created an interactive real-time dashboard that provides a detailed look at the screening results and examines the relationships between individual SDOH risks, patient and healthcare characteristics and healthcare utilization patterns. This information helps us to inform and evaluate our work so that we can assist MetroHealth in providing the best possible care for our patients.



Education and Evaluation

As a national leader in its field, the Institute for H.O.P.E. is committed to rigorous evaluation and broad dissemination of our work.

In 2023, we:

31 Conducted 31 presentations at national and regional conferences

Published five articles in academic journals and one textbook chapter

Delivered six webinars on various aspects of our work

12 Participated in 12 external media pieces that highlighted the importance of Social Drivers of Health

4 Hosted or sponsored four national & international conferences or learning tours

Funding Highlights

The Trauma Recovery Center received **$551,790.86** from Governor Mike DeWine's Community Violence Prevention Grant Program, administered by the State of Ohio Office of Criminal Justice Services. This funding will be used to expand and improve the services provided by TRC to victims of violent crime.

The U.S. Department of Health and Human Services' Administration for Community Living awarded the Institute for H.O.P.E. **$446,671** over three years to address the needs of older adults at risk for food insecurity and malnutrition. This work is being carried out in partnership with MetroHealth's Senior Care and the Western Reserve Area Agency on Aging*.

A collaboration of MetroHealth's Institute for H.O.P.E., Population Health Care Management and Obstetrics was awarded **$356,006** from the Ohio Department of Health. This funding expands the work of a lead-screening and primary-prevention program focusing on healthy housing for pregnant patients and their future newborns.

*This project is supported by the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $446,672 with 74% funded by ACL/HHS and $156,479 amount and 26% funded by non-government source(s). The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by ACL/HHS, or the U.S. Government.

Institute for H.O.P.E. 2023 Donors and Grantors

Thank you, donors and grantors! The following individuals and organizations provided generous support to help make our work possible. Those listed below contributed $5,000 or more in 2023.

Bank of America

Karen and Chip Chaikin

The CIGNA Corporation

William and Jennifer Clawson

Cleveland Metropolitan School District

Carol A. Crowe

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Dollar Bank Foundation

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Fifth Third Bank Foundation

Irving and Gloria Fine Foundation

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Hott Associates

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Mort* and Iris November, in celebration of Debra Ann November

Ohio Arts Council

Ohio School-Based Health Alliance

Ohio Department of Health

The Reuter Foundation

Roetzel & Andress

Share Our Strength

The Sherwin-Williams Foundation

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U.S. Department of Health and Human Services

U.S. Department of Justice, Office of Justice Programs through the State of Ohio Attorney General, Office for Victims of Crime

**Deceased.*

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