Doctors Community Hospital
Community Health Needs Assessment Report

June 27, 2013

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Updated June 30, 2014: To include improvements in format and explanation of methodology, only. No survey data was changed
EXECUTIVE SUMMARY

Doctors Community Hospital has a 37-year tradition of providing quality medical and surgical care to the residents of Prince George’s County. To address the dominant healthcare needs of this community, the hospital recently performed both primary and secondary research to gauge the general market environment as well as the healthcare realities and perceptions of county members. With such information, tactics can be reinforced or developed to address the findings.

Among its 863,420 residents, Prince George’s County’s population includes predominately minorities – African Americans (65 percent) and Latinos (15 percent). About 74 percent of those who are ages 16 or older are employed – contributing to a medium income of $69,545, which is higher than the national average. Additionally, approximately 81 percent of residents are insured.

Even with these statistics, there are significant health disparities among Prince George's County residents. In fact, according to the Department of Health and Mental Hygiene’s vital statistics report, the county is ranked 18 out of 24 among Maryland counties and leads in deaths caused by heart disease, cancer, cerebrovascular diseases, diabetes, accidents, assaults, influenza/pneumonia, HIV and hypertension/hypertensive renal disease. Moreover, the county has high incidences of obesity, diabetes, cardiovascular disease, breast cancer, tobacco use and asthma. (Appendix A has been included in this report, which further reflects disparities in Prince George’s County relating to health and education as compared with residents of the District of Columbia and Virginia.)

In addition to the above data, the hospital conducted its own survey from December 2012 to April 2013. With a goal of identifying the dominant healthcare concerns of residents, respondents’ top five issues were high blood pressure, weight loss/obesity, diabetes, nutrition/exercise and heart disease.

Dedicated to passionately caring for its patients and the community, Doctors Community Hospital has established tactics that addressed many of these health issues and concerns. These tactics included initiatives conducted by its specialty programs, support groups, community outreach coordinators and partnerships. This report will detail these programs as well as provide details regarding the aforementioned data.

HOSPITAL OVERVIEW

Doctors Community Hospital (DCH) is a not-for-profit corporation that was founded in 1975 by leading physicians who were committed to ensuring that county residents had convenient access to a wide range of medical and surgical services. In addition to the main hospital located in Lanham, it also has offices in Greenbelt, Bowie and Largo in Maryland.
In fiscal year 2012, the hospital employed about 1,462 employees with more than half being Prince George’s County residents. Also, Doctors Community Hospital had a medical staff of 505 physicians.

Within a patient-centered environment, the hospital has focused on continuously elevating its high standards of quality. Accredited by the Joint Commission, the hospital has earned the Delmarva Excellence Award for Quality and Press Ganey Top Improver Award. Moreover, the hospital was ranked #1 for quality by Prince George’s County residents in a University of Maryland survey.

THE COMMUNITY DCH SERVES

There is an estimated 834,000 residents in Prince George’s County, which represents 15 percent of all Marylanders. This county represents 93 percent of the hospital’s service market.

In fiscal year 2012, the hospital had 12,052 total admissions and performed 13,098 surgical services procedures. Also, in Doctors Community Hospital’s Emergency Department, it had 54,312 visits. Generally, the major health conditions encountered in typical emergency departments include:

- Diabetes
- Cardiac
- Asthma and other pulmonary
- Cancer
- Renal failure
- Septicemia, influenza and other infections

THE COMMUNITY HEALTH NEEDS ASSESSMENT BACKGROUND

The purpose of the Community Health Needs Assessment (CHNA) was to gather information about the health needs, behaviors and conditions of Prince George’s County residents.

The CHNA was comprised of both quantitative health information and qualitative feedback from the community. This multi-faceted approach ensured a profile of the county’s health that examined various perspectives and data sources. The three research components included secondary data, community surveys and focus group testing.

With insight about the overall health status of Prince George’s County, DCH can investigate strategies to address some of those concerns.
**PROCESS AND METHODS USED TO CONDUCT THE ASSESSMENT**

In this section we will describe the process and method to conduct the assessment including a description of the sources and dates of the data, analytical methods applied, gaps in information, and prioritization methods.

**Secondary Data**

One of the initial steps in developing the CHNA was collecting secondary data from reputable sources such as the United States Census Bureau and the Maryland Department of Health and Mental Hygiene (DHMH).

This report integrated not only more traditional physical health statistics including cancer rates, it also included demographic and household information. When reviewed collectively, this data revealed that social determinants such as income and education impacted health status, behaviors and outcomes. In fact, research showed that lower educational levels, poverty levels and race/ethnicity are risk factors for certain health conditions.

**Demographic Statistics**

Prince George’s County is located in Maryland. Specifically, it is immediately north, east and south of Washington, D.C., and 18 miles from Baltimore City. The county is 485 square miles in size with 863,420 residents – making it the second most populous county in Maryland.

Some of the demographic information about this county includes:

- **Diversity** - Prince George’s County is one of the most diverse of Maryland counties. With residents who speak more than 150 languages, residents come from all parts of the world, especially Mexico, Central America, Africa, South America, Haiti and other Caribbean nations.

- **Race/Ethnicity** – Minorities represent more than 80 percent of residents – African Americans (64.9 percent) and Hispanics/Latinos (16.9 percent). Also, this population consists of Caucasians (17.4 percent), Asian-American/Pacific Islanders (4 percent) and Native Americans (less than 1 percent).

- **Education** - The educational backgrounds of residents are comparable to national averages. This county’s residents include 85 percent who have high school diplomas. Also, an estimated 27-30 percent of residents who are ages 25 and older have a bachelor’s degree or higher. In the United States, the educational background of citizens include 84 percent who have high school diplomas with about 29 percent of those ages 25 and older having a bachelor’s degree or higher.

- **Income** - The population in the county is relatively affluent with a medium household income of $69,545 in comparison to the average of $50,740 in the United States.
However, the county has a substantial number of low income “working poor” who reside primarily in the densely populated communities of District Heights, Capital Heights and Hyattsville located inside the Capital Beltway. About 10 percent of county children live in poverty with about 43 percent of their families qualifying for the free lunch program. Also, approximately 17.5 percent of adults who live in the county are unable to afford to seek treatment from a doctor, which results in a lack of routine medical care and higher than average emergency department visits for treatment.

- **Employment** – A large percentage of the population is in the workforce with 74 percent of residents ages 16 and older being gainfully employed versus the 65 percent national average.

- **Insurance** – The Small Area Health Insurance Estimate revealed that the county has the highest percentage and absolute number of uninsured people in Maryland. Data from the 2008 Behavioral Risk Factor Surveillance System (BRFFS) showed that 19 percent of the county’s population was uninsured (16 percent of African American and 12 percent of Caucasian adults).

- **Community Type** - The county had a mix of urban, suburban and rural communities. However, the majority of residents lived inside the Capital Beltway adjacent to the District of Columbia.

- **Recreational Facilities** – The county had an extensive array of parks and recreational facilities operated by the Maryland-National Capital Park and Planning Commission. They included more than 40 miles of trails, 27,000 acres of parklands, 43 community recreational centers, 10 aquatic facilities and a state-of-the-art sports complex.

- **Educational Facilities** – The county was home to the University of Maryland School of Public Health, Bowie State University School of Nursing and Prince George's County College’s Nursing Program. It was also within close proximity to other academic and medical institutions that could provide resources to address community health needs.

Source: *Blueprint for a Healthy Prince George’s County 2011-2014*

### 2013 Population by Single Race and Ethnicity

<table>
<thead>
<tr>
<th>Single Race/Ethnicity</th>
<th>Population</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Black/African American</td>
<td>571,380</td>
<td>64.91 percent</td>
</tr>
<tr>
<td>White</td>
<td>153,542</td>
<td>17.44 percent</td>
</tr>
<tr>
<td>Hispanics/Latinos</td>
<td>149,109</td>
<td>16.94 percent</td>
</tr>
<tr>
<td>Race</td>
<td>Population</td>
<td>Percentage</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>------------</td>
<td>------------</td>
</tr>
<tr>
<td>Some Other Race</td>
<td>84,722</td>
<td>9.63 percent</td>
</tr>
<tr>
<td>Asian</td>
<td>36,153</td>
<td>4.11 percent</td>
</tr>
<tr>
<td>2+ Races</td>
<td>29,284</td>
<td>3.33</td>
</tr>
<tr>
<td>American Indians/Alaskan Natives</td>
<td>4,565</td>
<td>.52 percent</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islanders</td>
<td>577</td>
<td>.07 percent</td>
</tr>
</tbody>
</table>

Source: Health Communities Institute Dashboard

Health Status Indicators

- **Overall Health Rankings and Health Disparities** – A health report ranked Prince George’s County 18 out of 24 among other Maryland counties. (The lowest score was 24.) This report gave the county an overall comparative poor health ranking for death rates occurring before the age of 75; percentage of people who reported being in fair or poor health; the number of days people reported being in poor physical health, smoking, obesity, binge drinking and receipt of clinical care; violent crime; liquor store density; unemployment rates; the number of children living in poverty; air pollution levels; and access to healthy foods.

According to the DHMH Vital Statistics Annual Report, the leading causes of death in Prince George’s County in 2009 included:

<table>
<thead>
<tr>
<th>Cause of Death</th>
<th>Ranking by Cause Death</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diseases of the heart</td>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
<tr>
<td>Malignant neoplasms (cancer)</td>
<td>2&lt;sup&gt;nd&lt;/sup&gt;</td>
</tr>
<tr>
<td>Cerebrovascular diseases</td>
<td>3&lt;sup&gt;rd&lt;/sup&gt;</td>
</tr>
<tr>
<td>Diabetes mellitus</td>
<td>4&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Accidents</td>
<td>5&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Assaults (homicides)</td>
<td>8&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>Influenza and pneumonia</td>
<td>11&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
<tr>
<td>HIV</td>
<td>12&lt;sup&gt;th&lt;/sup&gt;</td>
</tr>
</tbody>
</table>
Data from the 2009 Maryland Chartbook of Minority Health and Minority Health Disparities showed significant differences in mortality rates among specific groups. For example, from 2002 to 2006, African Americans in the county had higher mortality rates than Caucasians for all causes including for six of the top eight causes of death (excluding chronic lung disease and liver disease).

The mortality ratio disparity was greatest for HIV and kidney disease. African Americans experienced 4.3 times the HIV death rate than Caucasians. Also, African Americans experienced 2.4 times the kidney disease death rate than Caucasians.

**Chronic Diseases and Related Conditions**

- **Overweight/Obesity** – The percentage of overweight or obese county residents was among the highest in Maryland and the nation. This rate has steadily increased since 1995 for both adults and children. From 1995 to 2007, the number of overweight/obese county residents increased by 13 percent.

  Among children ages 18 or younger, about 48 percent were at risk for becoming obese or were currently overweight. African Americans were disproportionately affected by obesity. In fact, data from the 2008 BRFFS study showed that 76 percent of African Americans versus 62 percent of Caucasians were either overweight or obese.

- **Diabetes** – Twelve percent of county residents were diabetic. According to DHMH’s Vital Statistics Administration, significant disparities existed in the county regarding diabetes-related deaths. The age-adjusted death rate for diabetes among African Americans was 47.1 per 100,000 and 21.9 per 100,000 for Caucasians. This rate was significantly higher than the Maryland age-adjusted diabetes death rates of 34.3 per 100,000 for African Americans and 21.7 per 100,000 for Caucasians. (Age-adjustment is a methodology used to compare rates among populations with differing age distributions.)

  The 2009 Vital Statistics Administration report indicated that Prince George’s County had the highest number of actual diabetes deaths in the state (197), which was followed by Baltimore City (196) and Baltimore County (192).

- **Cardiovascular Disease and Related Risk Factors** – Cardiovascular disease was the leading cause of death in Prince George’s County, and it was a key contributor to the county’s disparity in life expectancy. About 28 percent of county residents had cardiovascular disease with related age-adjusted death rates that were significantly higher than the Maryland average (280.4 versus 252.8 per 100,000).
For African Americans, the age-adjusted death rate was 338.4 per 100,000 compared to 228.7 per 100,000 for Caucasians.

A comparison of BRFSS data from 2009 and 2010 showed that rates for certain chronic disease risk factors had an increasing trend in the county.

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever told you had a stroke?</td>
<td>1.2 percent</td>
<td>1.6 percent</td>
</tr>
<tr>
<td>Ever told you had diabetes?</td>
<td>10.9 percent</td>
<td>11.9 percent</td>
</tr>
<tr>
<td>Did not meet the Healthy People 2010 objective for moderate or vigorous physical activity?</td>
<td>56.5 percent</td>
<td>62.0 percent</td>
</tr>
</tbody>
</table>

- **Cancer** – Malignant neoplasms (cancers) were the second leading cause of death among county residents. In 2008, the county’s age-adjusted mortality rate for all malignant neoplasms was 175.9 per 100,000. Among African Americans, the age-adjusted mortality rate was 202.2 per 100,000 compared to 151.6 per 100,000 for Caucasians.

  African-American women had higher breast cancer mortality (38.3 per 100,000) than Caucasian women (17.3 per 100,000). Regarding prostate cancer, African-American men had higher mortality rates (43.2 per 100,000) than those of Caucasian men (23.7 per 100,000). Such disparities were mirrored relating to African Americans with colorectal, pancreatic, and liver and biliary cancers.

- **Tobacco Use** – Approximately 12 percent of children ages 18 and younger smoked. Among adults ages 19 and older, about 16 percent smoked according to the 2010 County Health Rankings report. The percentage of African Americans in the county who currently smoked cigarettes daily was 4 percent compared to 16 percent of Caucasians.

- **Asthma** – Between 2004 and 2006, approximately 15 percent of county adults were diagnosed with asthma and 8 percent reported currently having asthma according to a DHMH profile. In 2006, this condition caused more than 6,000 asthma-related emergency department visits and 1,300 hospitalizations among county residents. The asthma-related emergency department visits were four times higher among African-American residents than among Caucasians. Accordingly, the hospitalization rate was approximately three times higher among African Americans than Caucasians.
Community Health Assessment Surveys

From December 2012 to April 2013, a community health assessment survey was distributed among community members, faith-based organizations, business leaders as well as current patients and their families.

With more than 500 surveys completed, respondents provided demographic information and selected their top four healthcare concerns. As shown in the below table, the five concerns that were most frequently selected were high blood pressure, weight loss/obesity, diabetes, nutrition/exercise and heart disease.

<table>
<thead>
<tr>
<th>Health Issues</th>
<th>Percentage Selected by Respondents in Their Top Four</th>
</tr>
</thead>
<tbody>
<tr>
<td>High blood pressure</td>
<td>16 percent</td>
</tr>
<tr>
<td>Weight loss/obesity</td>
<td>15 percent</td>
</tr>
<tr>
<td>Diabetes</td>
<td>14 percent</td>
</tr>
<tr>
<td>Nutrition and Exercise</td>
<td>13 percent</td>
</tr>
<tr>
<td>Heart disease</td>
<td>11 percent</td>
</tr>
<tr>
<td>Cancer – breast</td>
<td>10 percent</td>
</tr>
<tr>
<td>Sleep disorder</td>
<td>5 percent</td>
</tr>
<tr>
<td>Asthma</td>
<td>4 percent</td>
</tr>
<tr>
<td>Stroke</td>
<td>4 percent</td>
</tr>
<tr>
<td>Cancer – prostate</td>
<td>3 percent</td>
</tr>
<tr>
<td>Cancer – other</td>
<td>2 percent</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>2 percent</td>
</tr>
<tr>
<td>Sickle cell</td>
<td>1 percent</td>
</tr>
</tbody>
</table>
Focus Group Testing

Approximately 15 community members participated in a four-hour focus group. The participants identified five healthcare issues of most concern to them:

- Expanded community outreach and programs
- Mental health services
- Fitness and wellness programs
- Health promotion and nutrition classes
- Support groups for diabetes education and stress management

Methodology for prioritizing data collected

Members of the Community Health Needs Assessment committee used a criteria-based scoring system to prioritize the data collected into initiatives.

The Criteria-Based scoring System Tool:

<table>
<thead>
<tr>
<th></th>
<th>Triple Aim (30 Points)</th>
<th>Prince George’s County Health Plan (20 Points)</th>
<th>Community Partner (15 Points)</th>
<th>Internal Human and Financial Resources (15 Points)</th>
<th>Survey Responses (10 Points)</th>
<th>Direct Community Request (10 Points)</th>
<th>TOTAL POINTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer (Breast)</td>
<td>30</td>
<td>20</td>
<td>15</td>
<td>15</td>
<td>10</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>Diabetes</td>
<td>30</td>
<td>20</td>
<td>15</td>
<td>15</td>
<td>10</td>
<td>10</td>
<td>100</td>
</tr>
<tr>
<td>Cancer (Colorectal)</td>
<td>30</td>
<td>20</td>
<td>15</td>
<td>15</td>
<td>0</td>
<td>10</td>
<td>90</td>
</tr>
<tr>
<td>Cardiovascular Disease and Related Risk Factors</td>
<td>30</td>
<td>20</td>
<td>5</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>80</td>
</tr>
</tbody>
</table>
EXISTING HEALTH CARE FACILITIES AND OTHER RESOURCES

Appendix B is a listing of the existing health care facilities and other resources, other than our hospital, within the community that could help meet the health needs identified in the CHNA.

IMPLEMENTATION STRATEGY

The implementation strategy was approved by the CHNA Committee on June 27, 2013. The authorizing governing body of the hospital also approved the strategy.

Health Needs Addressed by the Hospital

Many of the chronic illnesses and healthcare concerns mentioned in this report have been addressed as part of Doctors Community Hospital’s ongoing commitment to care for the residents of Prince George’s County. As part of our strategic planning process, the hospital will continue to assess the continuation of current as well as addition of new programs to favorably impact the health of the community.

The following chart is as a result of the prioritization of the data received from our community assessment survey processes following our methodology

<table>
<thead>
<tr>
<th>Issue</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes</td>
<td>100</td>
</tr>
<tr>
<td>Cancer (Breast)</td>
<td>90</td>
</tr>
<tr>
<td>Cardiovascular Disease and Related Risk Factors</td>
<td>81.6</td>
</tr>
<tr>
<td>Overweight/Obesity</td>
<td>81.6</td>
</tr>
<tr>
<td>Nutrition and Exercise</td>
<td>80</td>
</tr>
<tr>
<td>Education</td>
<td>80</td>
</tr>
<tr>
<td>Cancer (Colorectal)</td>
<td>75</td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td>75</td>
</tr>
<tr>
<td>Stroke</td>
<td>68.3</td>
</tr>
</tbody>
</table>
Below is a summary of each of the initiatives.

• **Diabetes** – The hospital’s Joslin Diabetes Center in collaboration with the Prince George’s County Health Department launched the On the Road Diabetes Program in April 2013. Participants received free diabetes screenings and in-depth education classes at various locations throughout the county. The program’s goals were to serve at least 500 residents during 25 to 30 sessions in calendar year 2013.

• **Cancer (Breast)** – The first of its kind in Prince George’s County, the hospital’s Center for Comprehensive Breast Care provided free digital mammograms to underinsured and uninsured women in the county. With a one million dollar grant from Susan G. Komen, the center’s goal was to provide free mammograms to 100 female residents monthly. Additionally, the center provided monthly support groups – one for women who were newly diagnosed with or receiving breast cancer, and the other for male caregivers of those who have breast cancer.

• **Cardiovascular Disease and Related Risk Factors** – Each quarter, the hospital offered a cardiac rehab support group to help people regain their strength and mobility after treatment for a cardiovascular condition.

• **Overweight/Obesity** – It’s Bariatric and Weight Loss Center offered free seminars throughout the year. Participants learned about various weight loss options including nutrition, exercise and surgery. Also, given the relationship between obesity and diabetes, the hospital’s Joslin Diabetes Center had a nutritionist who helped patients learn how to make healthy dietary decisions.

• **Nutrition and Exercise** – Nutrition and exercise were important components of various outreach and educational programs provided by the hospital’s Joslin Diabetes Center, Bariatric and Weight Loss Center and Cardiovascular Rehabilitation Program.

• **Education** – The hospital’s Job Sampling Program provided opportunities for high school students to observe various vocations and work on skills-enriching projects. Along with evaluations that were part of each student’s academic grades, this program focused on exposing students to career opportunities while helping those who had learning or socialization challenges.
• **High Blood Pressure** – The hospital participated in about five blood pressure screening events yearly; and it is investigating approaches to provide more screenings to better meet the growing requests from surrounding community churches, local businesses and government agencies.

• **Stroke** – The hospital offered a monthly stroke support group. Participants included stroke survivors and caregivers who were empowered to share their experiences while reinforcing their optimism, resiliency, determination and independence.

• **Cancer (Prostate)** – The hospital offered free prostate screenings. Conducted by board-certified urologists, these screenings included general education about prostate and urologic health.

• **Cancer (Colorectal)** – In partnership with Prince George’s County’s Health Department, the hospital provided free colonoscopies to low income county residents who were ages 50 or older; or younger than age 50 with a family history of colorectal cancer. This initiative resulted in 86 screenings with gastroenterologists identifying two cases of cancer.

• **Rehabilitation** – The hospital’s lymphedema support group met quarterly at various times and dates to better accommodate participant’s schedules. It offered an open and friendly environment for patients, friends and family members to discuss ideas, give hope, provide support and share information. Also, guest speakers presented on various lymphedema-related topics.

• **Sleep Disorders** – The hospital’s Sleep Center performed several community screenings throughout the year. Also, it provided two educational opportunities. A support group focused on encouraging interactive discussions among people suffering from sleep apnea. A lecture series included speakers who addressed the health risks of various sleep disorders. At each educational group, participants learned how proper sleep and sleep disorder treatments reduced health-related problems such as diabetes, high blood pressure, heart disease and stroke.

**Unmet Health Needs**

Illiteracy—Illiteracy was identified in Prince George’s County and Doctors Community Hospital will continue to work with the county officials to see how we can assist.

The hospital does not have the specialized resources needed to provide a program.
APPENDIX A: GEOGRAPHIC DISPARITIES

United Way of the National Capital Area Report
When compared to jurisdictions within a wider geographic area, numerous health and educational disparities that increasingly impact Prince George’s County are further highlighted. In a May 2013 report, the United Way of the National Capital Area published a “Community Snapshot” with such information.

- Education – Approximately 30 percent of Prince George’s County adults ages 25 and older had bachelor’s degrees. In the District of Columbia, Montgomery County and four Virginia jurisdictions, a range of 37 to 70 percent of adults ages 25 and older had bachelor’s degrees. These statistics represented a 7 to 40 percent gap.

- Health – Approximately 33.4 percent of Prince George’s County adults were obese. In the District of Columbia, Montgomery County and four Virginia jurisdictions, a range of 11.2 to 20.1 percent of adults were obese. These statistics represented a 13.3 to 22.2 percent gap.
PERCENT OF ADULTS WITH A BODY MASS INDEX > 30 (OBESE), 2009*

<table>
<thead>
<tr>
<th>Location</th>
<th>% of Adults</th>
<th>Location</th>
<th>% of Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dist of Columbia</td>
<td>20.1%</td>
<td>Montgomery</td>
<td>17.5%</td>
</tr>
<tr>
<td>Prince George's</td>
<td>33.4%</td>
<td>Arlington</td>
<td>11.2%</td>
</tr>
<tr>
<td>Alexandria</td>
<td>16.2%</td>
<td>Fairfax</td>
<td>19.4%</td>
</tr>
<tr>
<td>Fairfax</td>
<td>13.8%</td>
<td>Loudoun</td>
<td>17.9%</td>
</tr>
<tr>
<td>Prince William</td>
<td>17.9%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* No data were reported for Alexandria or Loudoun in 2009; Alexandria figure is from 2007 & Loudoun is from 2008. Sources: Centers for Disease Control, National Center for Health Statistics

Source: United Way of National Capital Area’s May 2013 Community Snapshot
If you live in Prince George’s County, Maryland, our health services are for you!

Your County Health Department is here to help protect you from injury, disease and disability by assuring that you have access to quality health care.

Our staff is equipped to provide you with an array of specialized services—from immunizations to health insurance. We educate individuals and communities about disease prevention and assure that public facilities are safer through inspection, licensing and complaint investigations.

We encourage you to take charge of your health; to adopt a healthier lifestyle by educating yourself about healthy behaviors, getting routine screenings, and seeking help when you need it.

Keep this directory handy for reference, and take special note of emergency public health phone numbers.

If you need help or have any questions, just give us a call. We care about you!
LOCATIONS

ADELPHI
Judy Hoyer Center
8908 Riggs Road
Adelphi, MD 20783

ANDREWS AIR FORCE BASE
1191 Menoher Drive
Room 116
Andrews AFB, MD 20769

CAPITOL HEIGHTS
CAP
501 Hampton Park Blvd.
Capitol Heights, MD 20743

CHEVERLY
Cheverly Health Center
3003 Hospital Drive
Cheverly, MD 20785

CLINTON
D. Leonard Dyer
Regional Health Center
9314 Piscataway Road
Clinton, MD 20735

HYATTSVILLE
Metro Building 1
525 Belcrest Road
Suite 660
Hyattsville, MD 20782

SUITLAND
Suitland Health
and Wellness Center
5001 Silver Hill Road
Second Floor
Suitland, MD 20746

LARGO
Headquarters Building
1701 McCormick Drive
Largo, MD 20774

Largo Government Center
9201 Basil Court
Suite 318
Largo, MD 20774

Landrover
Largo West Building
425 Brightseat Road
Landover, MD 20785

7824 Central Avenue
Landover, MD 20785

7836 Central Avenue
Landover, MD 20785

NOTE: Not all of the following services are available at all locations. Call the service listing in advance for more information.

VOLUNTEER OPPORTUNITIES

Recruitment and training of Medical Reserve Corps (MRC) Volunteers, both medical and non-medical.

301-883-7802

IMPORTANT PHONE NUMBERS

Rabies exposure or incidence of other communicable/infectious disease outbreaks or emergency
301-583-3750
Mon-Fri 8:00 a.m.-4:30 p.m.
240-508-5774
All other hours

Fire, loss of water, or sewage overflow in any food service facility
301-883-7690
Mon-Fri 7:30 a.m.-4:00 p.m.
240-508-5868
All other hours

Special medical waste improper disposal
301-883-7606
Mon-Fri 7:30 a.m.-4:00 p.m.
240-508-5868
All other hours

Well water or septic system problems (lack of water or overflow) at private residences and commercial businesses
301-883-7681
Mon-Fri 7:30 a.m.-4:00 p.m.
240-508-5868
All other hours

General information—Voice
301-883-7879
All hours

General information—TTY/STS via Maryland Relay
Dial 711
All hours
### FOR ALL WOMEN AND CHILDREN

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction, mental health, rehabilitation and case management services for adult women, including pregnant women and women with children.</td>
<td>301-324-2872</td>
</tr>
<tr>
<td>Addictions and mental health services for adult County residents age 18 years and older with substance abuse and related mental health problems including assessments, treatment, and case management; urinalysis and breathalyzer testing; individual, family and group counseling.</td>
<td>301-583-5920, 301-856-9400</td>
</tr>
<tr>
<td>Breast and cervical cancer screening, including mammograms and PAP tests, for women age 40 and over who meet financial criteria; breast cancer support groups in English and Spanish.</td>
<td>301-883-3525</td>
</tr>
<tr>
<td>Coordination of health care services (case management) including hospital and home nursing visits for high-risk mothers and infants, especially substance abusers, HIV-positives, premature infants, pregnant and parenting teens.</td>
<td>301-618-2464</td>
</tr>
<tr>
<td>Early intervention services for children 0-3 years with special needs or developmental delays and are County residents; developmental evaluations, service coordination, family support and training, referrals to community programs, educational and therapy services.</td>
<td>301-856-9465</td>
</tr>
<tr>
<td>Family planning including contraceptive counseling and devices, emergency contraception, pregnancy options information, Pap tests and abnormal Pap follow-up.</td>
<td>301-583-3340, 301-856-9520</td>
</tr>
<tr>
<td>FREE health insurance for pregnant women and children up to age 19 with low-to-average incomes.</td>
<td>Healthline 1-888-561-4049</td>
</tr>
<tr>
<td>Health insurance for children up to 19 years old who do not qualify for Medical Assistance for routine physical exams, laboratory tests, well-child health care, immunizations and X-rays.</td>
<td>301-883-7858</td>
</tr>
<tr>
<td>Health screenings for women of childbearing age to ensure optimal health prior to pregnancy, including family planning information; cholesterol, diabetes and high blood pressure screenings; nutritional counseling; folic acid supplements and referrals to other services.</td>
<td>301-583-3313</td>
</tr>
<tr>
<td>HIV services including counseling, testing, treatment and prevention.</td>
<td>301-583-3700</td>
</tr>
<tr>
<td>Immunizations against childhood diseases are provided free through scheduled appointments to children age 6 weeks to 20 years.</td>
<td>301-583-3300</td>
</tr>
<tr>
<td>Lead poisoning prevention including coordination of care for children with elevated blood lead levels from exposure to lead paint or lead products; community education.</td>
<td>301-883-7230</td>
</tr>
<tr>
<td>Medical services for uninsured children under 19 years of age who are County residents, and who cannot afford private insurance and do not qualify for any government health insurance program.</td>
<td>301-883-7858</td>
</tr>
</tbody>
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### FOR PREGNANT WOMEN AND THEIR CHILDREN

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<tr>
<th>Service Description</th>
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<tbody>
<tr>
<td>Nutrition and breastfeeding education and support to low-income pregnant, breastfeeding and postpartum women, and children age birth to 5 years who are at nutritional risk.</td>
<td>301-856-9600</td>
</tr>
<tr>
<td>Pregnancy case management services for women at risk of poor birth outcomes including counseling, parenting information and referrals to other services.</td>
<td>301-883-7230</td>
</tr>
<tr>
<td>Reproductive health services for young women age 10 to 24 years, including comprehensive reproductive health services; education and counseling promoting cooperative relationships, good nutrition and healthy behaviors.</td>
<td>301-324-5141</td>
</tr>
<tr>
<td>Re-entry assistance services for ex-offenders transitioning back to the community including family planning, health education, relationship counseling, child support counseling, parenting groups, career development, job preparation and placement.</td>
<td>301-817-1900</td>
</tr>
<tr>
<td>Sexually-transmitted infection (STI) and HIV services including testing, counseling and treatment services for any age County resident (parental consent not required).</td>
<td>301-583-3150, 301-583-7752</td>
</tr>
<tr>
<td>Tobacco use prevention and cessation including free nicotine patches for County residents age 18 years and older.</td>
<td>301-324-2989</td>
</tr>
<tr>
<td>Case management services and home visits for pregnant women at risk of poor birth outcomes and at-risk children up to age 2 years including counseling, parenting information and referrals to other health services.</td>
<td>301-883-7230</td>
</tr>
<tr>
<td>General dental services including dental treatment and referrals to specialty care for maternity patients referred from the Health Department’s Maternal Health and Family Planning Program, uninsured children age 0-18 years, and children age 0-21 years enrolled in the Maryland Medicaid Healthy Smiles Program.</td>
<td>301-583-5900</td>
</tr>
<tr>
<td>Prenatal care and reproductive health services for uninsured and underinsured women including pregnancy testing, pre- and post-natal care, hospital delivery arrangements, referral to childbirth classes, family planning and emergency contraception, nutrition counseling, sexually-transmitted infection (STI) testing and counseling.</td>
<td>Healthline 1-888-561-4049</td>
</tr>
</tbody>
</table>
# ADOLESCENTS

## FOR ALL TEENS

<table>
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<tr>
<th>Service</th>
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<tbody>
<tr>
<td><strong>Case management and support services</strong> for juvenile offenders who qualify to reduce their risk of becoming perpetrators or victims of violence.</td>
<td>301-817-1900</td>
</tr>
<tr>
<td><strong>Educational programs for teens and their families</strong> addressing injury prevention due to underage drinking and distracted driving.</td>
<td>301-324-2989</td>
</tr>
<tr>
<td><strong>FREE health insurance</strong> for children up to age 19 with low-to-average incomes.</td>
<td>Healthline 1-888-561-4049</td>
</tr>
<tr>
<td><strong>High school-based health and social services</strong> for students attending Bladensburg, Fairmont Heights, Northwestern and Oxon Hill High Schools.</td>
<td>301-883-7887</td>
</tr>
<tr>
<td><strong>HIV services</strong> including counseling, testing, treatment and prevention.</td>
<td>301-583-3700</td>
</tr>
<tr>
<td><strong>Immunizations</strong> against childhood diseases are provided free through scheduled appointments to teens up to age 20 years.</td>
<td>301-583-3300</td>
</tr>
<tr>
<td><strong>Medical services</strong> for uninsured children under 19 years of age who are County residents, and who cannot afford private insurance and do not qualify for any government health insurance program.</td>
<td>301-883-7858</td>
</tr>
<tr>
<td><strong>Mental health and family counseling</strong> for children under age 18 and their families.</td>
<td>301-498-4500</td>
</tr>
<tr>
<td><strong>Sexually-transmitted infection (STI) and HIV services</strong> including testing, counseling and treatment services for any age County resident (parental consent not required); referrals for adolescent HIV care.</td>
<td>301-583-3150 301-583-7752</td>
</tr>
<tr>
<td><strong>Substance abuse treatment services (outpatient)</strong> for County residents age 11 to 18 years including assessments, crisis counseling, individual, family and group counseling; urinalysis and breathalyzer testing.</td>
<td>301-583-5941 301-434-4890 301-856-9400</td>
</tr>
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## FOR FEMALES

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<tr>
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<tr>
<td><strong>Reproductive health services</strong> for young women age 10 to 24 years, including comprehensive reproductive health services; education and counseling promoting cooperative relationships, good nutrition and healthy behaviors.</td>
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## FOR MALES

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<tr>
<td><strong>Health services</strong> for male adolescents and young fathers including male family planning and health education, child support counseling, relationship counseling and parenting groups, G.E.D. preparation, career development and skill-building, job preparation and placement.</td>
<td>301-817-1900</td>
</tr>
<tr>
<td><strong>Addictions and mental health services</strong> for substance abuse and related mental health problems for adult County residents age 18 years and older including assessments, treatment, and case management; urinalysis and breathalyzer testing; individual, family and group counseling.</td>
<td>301-583-5920 301-856-9400</td>
</tr>
<tr>
<td><strong>Health and social services</strong> for men and fathers, including male family planning and health education, relationship counseling, child support counseling, parenting groups, sports physicals, G.E.D. preparation, career development, job preparation and placement.</td>
<td>301-817-1900</td>
</tr>
<tr>
<td><strong>HIV services</strong> including counseling, testing, treatment and prevention.</td>
<td>301-583-3700</td>
</tr>
<tr>
<td><strong>Re-entry assistance services</strong> for ex-offenders transitioning back to the community including crisis intervention, assistance with domestic violence, and anger management.</td>
<td>301-817-1900</td>
</tr>
<tr>
<td><strong>Sexually-transmitted infection (STI) and HIV services</strong> including testing, counseling and treatment services for any age County resident (parental consent not required).</td>
<td>301-583-3150 301-583-7752</td>
</tr>
<tr>
<td><strong>Tobacco use prevention and cessation</strong> including free nicotine patches for County residents age 18 years and older.</td>
<td>301-324-2989</td>
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## MEN

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<td><strong>Addictions and mental health services</strong> for substance abuse and related mental health problems for adult County residents age 18 years and older including assessments, treatment, and case management; urinalysis and breathalyzer testing; individual, family and group counseling.</td>
<td>301-583-5920 301-856-9400</td>
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<tr>
<td><strong>Health and social services</strong> for men and fathers, including male family planning and health education, relationship counseling, child support counseling, parenting groups, sports physicals, G.E.D. preparation, career development, job preparation and placement.</td>
<td>301-817-1900</td>
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<td><strong>HIV services</strong> including counseling, testing, treatment and prevention.</td>
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<td><strong>Tobacco use prevention and cessation</strong> including free nicotine patches for County residents age 18 years and older.</td>
<td>301-324-2989</td>
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</table>
SENIORS

Colorectal cancer screening for County residents over age 50 who meet financial criteria. 301-883-3526

Comprehensive evaluation of the chronically-ill or older adults who are at risk for nursing home placement. 301-856-4730

EVERYONE

DOCUMENTS

Birth and death certificate certified copies. 301-324-2940

Maryland Public Information Act requests for Prince George’s County Health Department Records. 301-883-7832

Medical record consent and release for patients. 301-324-2940

Review of fetal/infant death records by a professional panel to identify possible underlying causes of death. 301-583-3380

HEALTH INSURANCE

Health insurance for families who live in Maryland and who meet income criteria; includes psychosocial assessments, referrals and certification to other programs. Healthline 1-888-561-4049

Temporary health care coverage for individuals who cannot afford it and are not eligible for any other health care coverage, through Kaiser Bridge. 301-856-9427

MEDICAL ASSISTANCE (MA)-RELATED

Personal in-home care for chronically-ill or disabled persons on Medical Assistance who qualify. 301-856-4732

Transportation of individuals on Medical Assistance to scheduled medical appointments. 301-856-9555

DISEASE CONTROL

Animal bite and animal exposure investigation and follow-up. 301-583-3750

Communicable disease outbreak investigation and follow-up on hepatitis A and B, salmonellosis and other food/water-borne illnesses, meningitis, vaccine-preventable diseases, anthrax and other unusual disease outbreaks; assistance with disease reporting procedures. 301-583-3750

Influenza (flu) and pneumococcal (pneumonia) vaccination clinics. 301-583-3750

Lyme disease information. 301-583-3750

Rabies vaccination clinics for cats, dogs and ferrets, and rabies pre- and post-exposure immunizations for individuals at-risk. 301-583-3750

Tuberculosis (TB) services, including chest X-rays and treatment for County residents of all ages who have suspected or confirmed TB disease, been in contact with a person with suspected or confirmed TB disease, a positive TB test or may be at high risk for TB disease. 301-583-3110

ENVIRONMENTAL HEALTH

Air quality complaint investigations. 301-883-7681

Food service facility inspections of restaurants, grocery stores, carry outs, convenience stores, processing plants, warehouses, mobile units, carnivals and fairs, farmers markets, vending locations; temporary food service facility permits; facility-related complaints or illegal operations investigations. 301-883-7690

Food service manager training for food handlers working in non-profit, charitable organizations and temporary event operations. 301-883-7650

Environmental lead assessments in the homes of children with confirmed elevated blood lead levels. 301-883-7662

Permits and plan review for licensed food facilities, public pools and spas and new well/septic system installations; ID cards for Certified Food Service Managers and Licensed Pool Operators. 301-883-7630

Public health emergency preparedness and response community education and training. 301-883-7838

Public swimming pool and spa inspections, permits and complaint investigations. 301-883-7606

Rodent and other disease vector education. 301-883-7681

Solid and hazardous waste inspections, permits and complaint investigations. 301-883-7606

Tanning facility complaint investigations. 301-883-7681

Well and septic system inspections, permits and complaint investigations. 301-883-7681
COLLABORATIONS AND SOURCES

Local Government and Health Departments
- Pamela B. Creekmur, Health Officer, Prince George’s County Health Department
- Judith Davis, Mayor, City of Greenbelt
- Anne Healy, Maryland State Delegate
- Sarah Potter Robbins, City of New Carrollton

Minority Outreach
- Charlene Dukes, PhD, President Prince George’s Community College
- Dwayne Leslie, General Conference of Seventh Day Adventist, Silver Spring, Maryland

Community Leaders and Programs
- Brian Mentzer, Pastor, Riverdale Baptist Church, Largo, MD
- Mary’s Center, Hyattsville, MD

Breast Center Initiatives – Community Leaders
- Dr. Regina Hampton – professional fees for reading mammogram screenings as part of Susan G. Komen grant
- Center for Comprehensive Breast Care – share of the cost for a community navigator, van access and van
- African Women’s Cancer Awareness Association – shares the cost for a community navigator
- Denise Whalen-White, Executive Director, All Shades of Pink Inc.

Surgical Services Improvements – Physician Leaders
- Dr. Ricardo Scartascini, OB-GYN, Greenbelt, Maryland
- Dr. Jonah Murdock, Urologist, Greenbelt, Maryland
- Capital Orthopaedics Specialists, Lanham, Maryland

Technical Assistance
- Jennifer Belforte, MPH, Account Manager, Healthy Communities Institute
- The Advisory Board staff – Crimson Quality and Utilization products
- Intellimed Software – utilization reports
- County Health Rankings – services offered to county residents

Websites Visited and Resources Used for Secondary Data:
- Blueprint for a Healthy Prince George’s County
- Centers for Disease Control and Prevention
- Healthy Communities Institute
- Maryland Vital Statistics Administration
- Rand Report on Prince George’s County
- U.S. Health and Human Services
- University of Maryland’s Prince George’s County Health Environment Report
Website for Existing Health Care Facilities and other resources

- http://www.princegeorgescountymd.gov/sites/Health/Services/HealthServices/Pages/default.aspx

Community Benefit Committee – Doctors Community Hospital Representatives

- Robyn Webb-Williams, Vice President, Doctors Community Hospital Foundation
- Mary P. Dudley, Director, Community Relations and Volunteer Services
- Sabra Wilson, Community Resources Coordinator, Community Relations
- Sherri Moore, Development Officer, Doctors Community Hospital Foundation
- Angela Wilson, Director, Marketing and Communications
- Keith Mitchell, Web Support Specialist

Approved: Doctors Community Hospital Executive Staff June 27, 2013