MISSION
Restoring independence and well-being through quality, caring, advocacy and accessible interdisciplinary services.

VISION
We will optimize quality of life through innovative community integrated services exceeding customer expectations.

VALUES
Patient First, Teamwork, Culture of Safety, Courtesy, Performance and Efficiency
What is a CHNA?
The Affordable Care Act mandated that all 501 (c ) 3 hospitals would have to meet certain requirements to maintain their non-profit status, including preparing a Community Health Needs Assessment (CHNA) and an Implementation Strategy based upon the CHNA findings, at least every three years. The CHNA must include input from people who represent a variety of interests in the community, including public health experts, the population served, collaborating organizations and other community partnerships. The needs of the community should be determined by gathering and analyzing pertinent data, interviewing persons served and identifying gaps and barriers.

Why do we do a CHNA?
Preparing a CHNA allows an organization to thoughtfully and purposefully devote its assets to programs and services that will be of the most benefit to its population. It prevents investing in services that will not be utilized. It avoids duplication and redundancy. A CHNA is proactive rather than reactive; it identifies underlying conditions which, if changed, might lead to healthier communities.
• Identify barriers to good health and access to services for persons with disabilities
• Form partnerships with other providers to address barriers to care or recreation
• Propose programs and services to improve access to care or recreation
Bacharach serves a wide variety of people who present with very complex conditions requiring comprehensive interdisciplinary rehabilitation to regain function and independence.

In our 52-bed acute medical rehabilitation hospital, we treat patients after stroke, spinal cord injury, traumatic brain injury, amputation, joint replacement, heart attack or neurological conditions such as Multiple Sclerosis, Parkinsons, Cerebral Palsy or other neurological conditions. People with such conditions meet the criteria for acute medical rehabilitation. These conditions require intensive interdisciplinary treatment under the care of a physician specializing in physical medicine.

Each patient is cared for by a team that includes physical medicine, physical therapy, occupational therapy, rehabilitation nursing, case management and social services, a registered dietitian and depending upon the diagnosis, psychology, speech therapy, audiology and cardiac rehabilitation.

Bacharach also has a 30-bed nursing home called Renaissance Pavilion. Renaissance Pavilion provides sub-acute rehabilitation to those who are weak and debilitated after accident, illness or surgery. Patients at Renaissance Pavilion have an average length of stay of approximately 14 days. They receive physical and occupational therapy and skilled nursing to regain strength, stamina and function and return to work, home and leisure activities.

Bacharach has 17 physical and occupational satellite locations in Burlington, Ocean, Cumberland, Cape May and Atlantic Counties, as well as a home care program providing physical therapy. Two more centers offer audiology services, and one offers sleep and neuro-diagnostic services.
Bacharach provides outpatient physical therapy, occupational therapy, speech and language therapy and audiology to pediatric patients from birth to age 18. Under some special circumstances, adolescent patients are accepted as inpatients for acute medical rehabilitation.

Each year Bacharach treats approximately 1750 inpatients either in our acute rehabilitation hospital or our sub-acute rehabilitation center. Each year Bacharach provided more than 140,000 outpatient visits.
Atlantic County, New Jersey

• 556 Square miles
• Incorporated 1837
• Population 272,000
• 22 municipalities
• 16 public Atlantic County parks
• 5 public ocean beaches, Lake Lenape, Somers Point Bay public Beach
• 5.5 miles of public boardwalk in Atlantic City and Ventnor
• Atlantic Cape Community College, Mays Landing
• Stockton University, Galloway
• Atlantic City International Airport, Egg Harbor Township

Atlantic County Seniors and the Elder Index

According to the study, “The New Jersey Elder Economic Security Standard Index (Elder Index) is a tool that measures the income older adults require to make ends meet and to remain in their own homes. “

Seniors who do not have an income sufficient to pay for basic needs – housing, food, transportation, and health care are considered to be living below the Elder Index.

In many cases, people living below the Elder Index are living well above Federal Poverty Guidelines, especially in an expensive state like New Jersey.

The report found that in Atlantic County in 2015:

• Economic Insecurity Rate of Atlantic County Single Retired Elder Households 66%
• Economic Insecurity Rate of Atlantic County Retired Elder Couple Households 38%

“Living Below the Line: Measuring Economic Insecurity Among New Jersey’s Retired Seniors” is a study published in November 2017 by the State of New Jersey Department of Human Services.

16.3% of Atlantic County residents are foreign born, up from 15.5% in 2016.

27.2% speak a language other than English at home, up from 26.5%.
6% are not proficient in English.
Gender, Age and Ethnicity
The following demographics offer a snapshot of Atlantic County as compared to the state of New Jersey. Atlantic County trails New Jersey in nearly all income measures, from persons in poverty to per capita income to median household income. Atlantic County median household income is nearly 23% lower than the state as a whole. 31% more people live in poverty in Atlantic County than live in poverty in New Jersey overall.

<table>
<thead>
<tr>
<th>Income Measures</th>
<th>Atlantic Co.</th>
<th>New Jersey</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persons speak Spanish at home</td>
<td>23%</td>
<td>19%</td>
</tr>
<tr>
<td>Children eligible for free lunch</td>
<td>56%</td>
<td>n/a</td>
</tr>
<tr>
<td>Children in single parent households</td>
<td>41%</td>
<td>29%</td>
</tr>
<tr>
<td>Injury deaths per 100,000</td>
<td>80</td>
<td>50</td>
</tr>
<tr>
<td>Persons in poverty</td>
<td>14.4%</td>
<td>10%</td>
</tr>
<tr>
<td>Children in poverty</td>
<td>22%</td>
<td>14%</td>
</tr>
<tr>
<td>Seniors in poverty</td>
<td>10%</td>
<td>8%</td>
</tr>
<tr>
<td>Per capita income</td>
<td>$30,800</td>
<td>$40,657</td>
</tr>
<tr>
<td>Median household income</td>
<td>$61,777</td>
<td>$80,088</td>
</tr>
<tr>
<td>Housing median value</td>
<td>$219,000</td>
<td>$321,000</td>
</tr>
<tr>
<td>Income Median</td>
<td>$57,500</td>
<td>$76,500</td>
</tr>
<tr>
<td>Live in rural area</td>
<td>12.7%</td>
<td>4.6%</td>
</tr>
<tr>
<td>Unemployment 6/19</td>
<td>7.2%</td>
<td>3.0%</td>
</tr>
<tr>
<td>In labor force over age 16</td>
<td>65%</td>
<td>65.5%</td>
</tr>
<tr>
<td>Living with a disability, under age 65</td>
<td>9.3%</td>
<td>6.7%</td>
</tr>
<tr>
<td>No health insurance</td>
<td>10.5%</td>
<td>9%</td>
</tr>
<tr>
<td>High school graduate or higher, percent of persons 25+</td>
<td>86.3%</td>
<td>89.2%</td>
</tr>
<tr>
<td>Bachelor’s degree of higher, percent of persons 25+</td>
<td>26.6%</td>
<td>38.1%</td>
</tr>
<tr>
<td>Veterans</td>
<td>5.2%</td>
<td>6.6%</td>
</tr>
</tbody>
</table>
Health Rankings & Roadmaps, 2019

Every year the Robert Wood Johnson Foundation compiles health data for each county in the United States. Atlantic County, New Jersey consistently ranks very low in the annual County Health Rankings and Roadmaps. In 2019, out of a total of 21 counties in New Jersey, Atlantic County was ranked 18th for overall health outcomes, 19th for health factors, 19th for health behaviors and 20th for social and economic factors.

Atlantic County Overall Rank in New Jersey: 18

Health Outcomes: Rank 18
Measures Include: Diabetes, HIV, premature mortality, infant mortality, child mortality

Length of Life: Rank 18
Premature Death

Quality of Life: Rank 15
Measures Include: Poor or fair health, poor physical health days, poor mental health days, low birthweight

Health Factors: Rank 19
Measures Include: Smoking, obesity, food environment, physical inactivity, access to exercise, excessive drinking, alcohol driving deaths, sexually transmitted infections, teen births, motor vehicle deaths, poisoning

Health Behaviors: Rank 19
Measures Include: Food environment index, physical inactivity, access to exercise, excessive drinking, alcohol-impaired driving deaths, sexually transmitted infections, teen births

Clinical Care: Rank 15
Measures Include: Uninsured, primary care physicians, dentists, mental health providers, preventable hospital stays, flu vaccinations, diabetic monitoring, mammography screening

Physical Environment: Rank 13
Measures Include: Air pollution, drinking water, housing problems, driving alone to work, long commute

Social & Economic Factors: Rank 20
Measures Include: High school graduation, some college, unemployment, child poverty, income inequality, children in single-parent households, social associations, violent crime, injury, deaths
Community Partners

• AtlantiCare, Member of the Geisinger Health System
• Atlantic Center for Independent Living
• Atlantic County Division of Public Health
• Atlantic County Government Intergenerational Services
• Atlantic County Transportation
• Galloway Township
• Shore Medical Center
• Stockton University; Stockton Center on Successful Aging

Collaborations

Bacharach collaborates with a number of organizations in Atlantic County.

Bacharach has strong ties to both major Atlantic County hospitals, AtlantiCare, a Member of the Geisinger Health System, and Shore Medical Center. They are the referring hospitals for approximately 75% of our inpatients.

Bacharach also has important relationships with both Stockton University and Atlantic Cape Community College. We host Atlantic Cape Community College nursing students during their clinical rehabilitation rotations.

Our ties with Stockton University include a wide range of programs and opportunities for their students, including clinical observation hours in either physical or occupational therapy, a requirement for admission to the Stockton health science graduate programs; clinical rotations of third year physical therapy graduate students, and open labs for first and second year physical therapy graduate students. We do the same for Stockton University speech and language pathology students.

Bacharach works closely with Atlantic County Government, especially with its Division of Intergenerational Services. Together, we have created programs at Bacharach that help seniors to remain independent and self-sufficient in their homes. These programs, an Arthritis Pool Exercise Program and a Cardiac Rehab Phase III Exercise Program, are underwritten by the county for individuals who meet certain economic guidelines, such as being enrolled in Medicaid or the PAAD program. The programs are closely monitored by the county and the state of New Jersey, as funding comes through the Older Americans Act.

We join forces with Atlantic County in a consortium of transportation providers working to improve transportation countywide and reduce waste and redundancy. As part of the Regional Coordinated Human Service Transportation Plan, Bacharach participates in all aspects of review, planning and implementation of a coordinated approach to addressing transportation gaps in Atlantic County. We have been part of the transportation consortium for 15 years.
425 residents of Atlantic County responded to our Community Survey in July and August of 2019. The surveys were available online through an eblast to our mailing list, and via Facebook. They were also available on paper.

1. **Do you have a disability?**
   - Yes 31.2%
   - No 68.8%

2. **Does someone in your family have a disability?**
   - Yes 36.1%
   - No 63.9%

3. **What are the biggest challenges that persons with a disability must face? Choose 2.**
   - 50% Lack of transportation
   - 43% Financial hardships
   - 41% Exclusion, isolation
   - 34% Accessibility of stores, sidewalks, parking, buildings

4. **What is your age?**
   - Under 60 31.2%
   - Over 60 68.9%

5. **Do you work?**
   - 47% I do not work because of my disability
   - 28% Full time
   - 11% Part time
   - 10% I am retired
   - 4% I am unemployed

6. **What is your zipcode?**

7. **What makes it difficult to get healthcare?**
   - 53% Other ( Tried to get insurance through job; Unable to work due to disability; Too much paperwork; (Lack of) transportation; Insurance does not cover much; Not knowing where to get it; Cost of insurance is high; Availability; Doctor does not take insurance)
   - 32% Have insurance but can’t afford the deductible and the co-pay
   - 15% No insurance

8. **What keeps you from making health care appointments?**
   - 57% Other (All of the above; Have too many appointments; Cost; Arranging schedule; Laziness; Don’t trust doctors; Provider availability; Finding a person to accompany me; Can’t take time off and can’t arrange care for a dependent family member and do not have transportation; Forgetfulness)
   - 19% Can’t take time off from work
   - 17% Do not have transportation
   - 7% Can’t arrange for care for a dependent member of the family

9. **What kinds of support for persons with disabilities should there be in our community?**
   - 48% Other (Meal prep; Financial assistance and home modification; Cleaning and housework help; Prescription costs; Support for caregivers; Help navigating doctors and accessible information)
   - 16% Transportation programs
   - 14% Financial assistance
   - 10% Home modification programs
   - 7% Support groups
   - 5% Social activities

161 people included transportation in their selection of the most critical kind of support
**Primary Data Sources**

We collected data by offering the same survey in two different formats, an electronic survey and a paper survey. The paper survey was offered to Bacharach outpatients and to visitors, as well as at community events such as screenings and health fairs. The electronic version was offered to Bacharach’s email distribution list and was also available on the Bacharach website. The survey included questions about the respondent’s zip code, disability status, perceived barriers to services, accessibility and so on. The survey questions are listed below.

**Secondary Data Sources**

In preparing the community Health Needs assessment, we also turned to the following county, state and federal resources:

- AtlantiCare Community Health Needs Assessment 2016 Atlantic County NJ
- Atlantic County Community Health Improvement Plan 2014-2018
- Atlantic County Transportation Report: United We Ride 2016
- 2018 County Health Rankings and Roadmaps
- Robert Wood Johnson Foundation
- Shore Medical Center Community Health Needs Assessment: 2016
- Healthy People 2020  www.healthypeople.gov/2020
Bacharach Institute for Rehabilitation
Community Health Needs Implementation Strategy

Adopted by the Bacharach Institute for Rehabilitation Board of Governors on December 10, 2019

Introduction

Bacharach Institute for Rehabilitation conducted a Community Health Needs Assessment in 2019 to comply with the requirements of Section 501(r) of the Internal Revenue Code. The assessment was conducted by the marketing department of Bacharach Institute for Rehabilitation.

The results of the assessment were published to Bacharach’s website in October, 2019. The following implementation strategy outlines Bacharach Institute for Rehabilitation’s plans to address the findings through 2022 in accordance with its mission of restoring independence and well-being through accessible interdisciplinary services.

In addition to the programs described in the implementation strategy, Bacharach provides acute hospital inpatient rehabilitation care to patients admitted for such care, regardless of ability to pay.

Bacharach Institute for Rehabilitation is an acute medical rehabilitation hospital. Bacharach’s acute rehabilitation patients present for admission after stroke, brain injury, spinal cord injury, amputation, major multiple trauma, burns, congenital injury, and some other orthopedic or arthritic surgeries or conditions. Bacharach provides what is known as post-acute care, in other words the care that patients receive after discharge from a traditional hospital setting when they still need round the clock nursing care as well as rehabilitation therapies.

Acute medical rehabilitation then, is secondary, usually, to an earlier hospital admission. In some cases that hospital stay has been lengthy, and the effects on the family, and finances, are extensive. Bacharach offers programs and strategies that will both dovetail with our mission and vision, and complement the strategies of acute community hospitals in our service area, without being redundant.

AtlantiCare Regional Medical Center, A Member of Geisinger, and Shore Medical Center are the two community hospital systems in our primary service area. Their primary service areas overlap somewhat and both offer a wide range of prevention and wellness programs. Like Bacharach, both hospitals are closely aligned with health promotion and disease prevention efforts of Atlantic County.

The timeline for Bacharach’s proposed implementation strategy is 2020 through 2022. It will be prudent to closely monitor both the programs we implement and developments in healthcare processes during that time frame.
Bacharach Institute for Rehabilitation Implementation Strategy

1. Hospital Mission and Vision statement
2. Community served by Bacharach Institute
3. Community health needs identified by the Community Needs Assessment
4. Implementation strategies 2020 – 2022
5. Needs beyond Bacharach’s Mission or Service programs.
6. Collaborations

Bacharach Institute for Rehabilitation Mission Statement

Bacharach is committed to “Restoring independence and well-being through quality, caring, advocacy, and accessible interdisciplinary services.” With many types of care in our continuum, including acute hospital care, sub-acute long term care, day rehabilitation, home therapy and outpatient therapy, Bacharach provides robust interdisciplinary services and streamlined transitions from one service setting to another as dictated by the needs of the patient.

2019 Community Served

Bacharach draws about three fourths of its patients from Atlantic County in every care setting: acute rehab hospital, sub-acute rehab, day rehab, home therapy and outpatient services. While Bacharach has outpatient physical and occupational therapy centers in four southern New Jersey counties, Atlantic, Cape May, Cumberland and Ocean, Atlantic County continues to be our primary service area. Cape May county, southern Ocean county and eastern Cumberland county make up our secondary service area.

In 2019, Atlantic County was home to about 272,000 people, a decrease of about 3,000 since 2016
  Cape May County had 93,000 a decrease of about 1,700 since 2016
  Cumberland County 151,000; a decrease of about 2,500 since 2016
  Ocean County 595,000 an increase of about 15,000 since 2016

In 2019, Bacharach’s 50 acute rehab beds and 30 sub-acute beds is on track to serve 1000 acute medical rehabilitation patients and 700 sub-acute rehabilitation patients for a total of 1700 inpatients.

Bacharach will serve more than 13,000 outpatients by the end of 2019. It will provide well over 140,000 outpatient therapy visits. Outpatient visits include physical therapy, occupational therapy, speech and language therapy, hearing services, sleep studies, and cardiac rehab. Bacharach also has a day rehab program and a pulmonary rehab program. Bacharach’s six doctors or rehabilitation medicine see outpatients as well as care for inpatients during their rehab stay.
Observations from the 2019 CHNA:

The 2019 Community Health Needs Assessment reveals that the population of Atlantic faces many socio-economic factors which keep it near the bottom of the county health rankings for New Jersey.

Atlantic County ranks 18 out of 21 counties in New Jersey overall according to the Robert Wood Johnson Foundation’s annual 2019 Health Rankings and Road Maps.

Median house hold income is only 77.1% of the state median household income.

55.9 percent of Atlantic County is white alone, 17.1 percent is black, 19.2 percent is Hispanic, and 8.3 percent is Asian. That is a 6.9% increase in the Hispanic population since 2016 and a 3.7% increase in the Asian population. Atlantic County is diverse culturally, ethnically, and socially.

27.2% of Atlantic County residents report speaking a language other than English at home, an increase of 4% since 2016

6% of Atlantic County residents are not proficient in English

16.3% of Atlantic County residents are foreign born, up from 15.5% in 2016

10.5% of Atlantic County residents report having no health insurance. This is a drop of more than 50% from 2016.

14.4% of all Atlantic County residents live in poverty, but 22% of the children in Atlantic County live in poverty, and 43% of all children in Atlantic County, nearly half, are eligible for free lunch.

10% of Atlantic County seniors live in poverty.

15.8% of the people in Atlantic County are over age 65, an increase of 7.5%. This is slightly higher than the state of New Jersey.

56.7% of seniors are women.

61% of the seniors in Atlantic County live below the Elder Index, meaning their income is above the poverty level but is less than is needed to cover the most basic needs of housing, food, transportation and healthcare.

34.5% of Atlantic County residents over age 65 report living with a disability.

Data shows Atlantic County holds a low health ranking, 18th overall, among the 21 counties in New Jersey. For Social and Economic Factors, the ranking sinks to 20th. Health Factors, rank of 19, includes smoking, obesity, food environment, physical inactivity, access to exercise, excessive drinking, alcohol driving deaths, sexually transmitted infections, teen births, motor vehicle deaths and poisoning.
Community Health Needs Identified by the Assessment

Using both primary and secondary data resources, and conducting online surveys and paper surveys a number of themes begin to emerge regarding the needs of Atlantic County residents trying to return to independent living in the community after rehabilitation.

The survey centered on the needs of people with physical challenges. The challenges could be either temporary disabilities they hoped to overcome through physical rehabilitation, or permanent disabilities.

31.2% of survey respondents report having a disability

The biggest challenges for persons with a disability are
- 50% Lack of transportation
- 43% Financial hardships
- 41% Exclusion and isolation
- 34% Accessibility of stores, sidewalks, parking, buildings

Of respondents who do not work
- 47% Do not work because of their disability
- 10% Are retired
- 11% Are unemployed

What makes it difficult to get healthcare?
- 32% Have insurance but cannot afford the deductible and the co-pay
- 15% Have no insurance (compared to 9% in New Jersey)

Respondents also commented:
- Tried to get insurance through job
- Unable to work due to disability
- Too much paperwork
- Lack of transportation
- Insurance does not cover much
- Do not know where to get it
- Cost of insurance is high
- Doctor does not take insurance

What keeps you from making healthcare appointments?
- 19% Can’t take time off from work
- 17% Do not have transportation
- 7% Can’t arrange for care for dependent member of the family

What kinds of support for persons with disabilities should there be in our community?
- 16% Transportation programs
- 14% Financial assistance
- 10% Home modification programs
- 7% Support groups
- 5% Social activities
Implementation Strategies 2020 - 2022

Bacharach Institute for Rehabilitation has been restoring independence and well-being to its patients since 1924.

It has also been a provider of ongoing community benefit providing services and programs. These include health education at seminars, screenings and health fairs as well as a wide variety of support groups. Presently, Bacharach groups include stroke support, brain injury support and spinal cord injury support.

Ability Fair: Addressing the Needs of the Disabled Community

In early 2015, the members of Bacharach’s spinal cord group expressed a desire for an event that would bring together vendors with products and services of interest to them. They pointed out that there are annual trade shows for persons with physical challenges but that they are far away and that travel for a person with a spinal cord injury can be arduous. Their group coordinator asked for some help in putting together a small program as the need for an accessible event for persons with physical challenges in South Jersey was clear.

There was also great concern that persons with disabilities lack information about services available to them in the community.

Out of this discussion the concept of an Ability Fair was born.

In September of 2015, Bacharach held its inaugural Ability Fair, with 60 vendors and nearly 500 attendees at Stockton University.

The event is free of charge and open to the public.

The Ability Fair was so successful in meeting a need for the physically challenged community in South Jersey that Bacharach has just scheduled its 6th Annual Ability Fair for July 22, 2020.

Holding the annual Ability Fair is a way to showcase the many programs and services available to the residents of South Jersey, both physically challenged individuals and their families and senior citizens. The fair gathers a broad spectrum of lifestyle solutions under one roof at one time, offering a wealth of information, service and advocacy, and opening doors to people who feel they have been marginalized.

At the Ability Fair, people can connect with representatives from Atlantic County and from the State of New Jersey.

For example, the New Jersey Department of Human Services, Division of Disability Services offers:

- Information & Referral Services
- Traumatic Brain Injury Services
- Managed Long Term Services and Supports
- Personal Assistance Services Program
- NJ WorkAbility
- NJ ABLE
- Disability Health & Wellness
- Community Discharge Initiative
Atlantic County offers:

- Aging Services
- Children’s Services
- Disability Services
- Family Success Services
- Intergenerational Services
- Mental Health Services
- Meadowview Nursing and Rehabilitation Services
- Veterans Services

The many vendors at the Ability Fair offer wheelchair products, communication devices,

**Bacharach Outpatient Transportation Program: Addressing Transportation Needs**

Another critical community benefit program Bacharach offers is a free patient transportation program. Providing free transportation to Bacharach outpatient appointments fills gaps in service that public transportation programs are unable to accommodate.

Again and again, in person and through surveys, our patients report that lack of transportation is one of their greatest obstacles.

Bacharach has been providing transportation to outpatient services since 1988. Patients seeking services at Bacharach are likely to be elderly, low-income, disabled, or some combination of all three. For many, the most daunting part of the therapy process is figuring out how to get there. While Atlantic County has a robust and thriving transportation program, funding for it drops each year, and it becomes harder and harder to meet the community demand. Bacharach’s small and nimble fleet is able to step in and fill the gaps in service that would otherwise leave patients at home without transportation to necessary medical rehabilitation services.

For nearly 12 years, Bacharach has been part of Atlantic County’s transportation system. The collaboration of the County, Bacharach, Access Link, Caring Inc., the City of Atlantic City and a few others is known as TransAtlantic.

The transportation collaborative has led to grant funding through New Jersey 5310 which supplies vehicles to Bacharach’s transportation program. To date, Bacharach has received 5 vehicles and awaits procurement of 2 more. Ultimately, the vehicles will help to reign in the cost of providing the transportation program.

It has also led to discussions about creating a central dispatch for all of the stakeholders, and becoming more inclusive of riders who do not seek our services. While a central dispatch system has yet to be implemented, we are reducing overlap and learning to choose the most efficient vehicles.

In 2019, Bacharach provided 16,806 one way trips to patients attending medical rehabilitation appointments at our main campus and several other strategic locations including Manahawkin, Somers Point, Mays Landing and North Cape May.
Strategic initiatives

Bacharach will strive to see that no patient is denied medical rehabilitation services due to a lack of transportation. We will:

- Provide free transportation to outpatient therapies within a 20-mile radius for patients without other transportation options
- Work with TransAtlantic partners to identify efficiencies and eliminate duplication of services
- Write grants and seek funding for vehicles whenever possible to keep the program viable
- Prioritize transportation for low-income, disabled and elderly patients
- Educate stakeholders such as primary care physicians, nurse practitioners and case managers
- Collaborate with community partners

Other Community Needs Addressed by Hospital Programs

Bacharach offers a wide variety of community benefit programs other than those listed in the initiatives above. Bacharach supports continuing education for its employees and also promotes in-house education for staff in the form of physician lectures and guest speakers conversant with new technologies in therapy products and applications.

To the community, we offer hearing screenings at health fairs, including our ability fair. We have a screening program for balance problems and fall prevention. People at risk are directed to the evidence-based Otago Fall Prevention and Exercise Program. Atlantic County Intergenerational Services has funding to underwrite care for those who are underinsured or uninsured.

Through Atlantic County, we offer an aquatic exercise class for seniors with arthritis. The County covers the cost of the class, which is $10 per class.

In partnership with Atlantic County, Bacharach offer phase III Cardiac Rehabilitation at no cost. This is a maintenance program that insurance does not cover, and it costs $45 per month. For many, $45 is a hardship. Atlantic County covers the cost for eligible Atlantic County residents over 60 years of age.

And finally, Atlantic County has just begun to fund a hearing aid program, supplying free hearing aids to low income seniors with hearing loss.

Bacharach sends out a quarterly newsletter to more than 10,000 people in southern New Jersey with information about our clinicians, our programs and our services.

Bacharach provides meeting space to many groups such as Alcoholics Anonymous, Brain Injury Association of New Jersey Brain Injury support group, and the South Jersey Spinal Cord Injury group.

We offer speakers and education on hearing loss and hearing instruments. Experts from the Bacharach staff appear on radio to share information about services and programs as well as to discuss prevention and making healthy and safe choices.

All told, Bacharach provides approximately $1 million annually in charity care for those in need of acute inpatient rehabilitation who are without the means to pay.
Collaborations with Other Organizations

Bacharach Institute for Rehabilitation has worked closely with other agencies and organizations in Atlantic County for many years.

- Atlantic County Transportation, and TransAtlantic
- Atlantic County Intergenerational Services
- AtlantiCare Health System
- Jewish Family Service
- OceanFirst Foundation
- Southern Regional Emergency Preparedness Consortium
- South Jersey Industries Social Investment Program
- Walmart Foundation
- Ruth Newman Shapiro Heart and Cancer Fund

Anticipated Impacts on Health Needs

- Providing free transportation reduces appointment cancellation rate, ensures access to care, improves patient outcomes
- Community education promotes healthy behaviors and informed decisions
- Continuing education of staff ensures highest level of skill in all care providers, leading to optimal outcomes and functional capability
- Support groups promote self-esteem and independence, offer coping skills and strategies; offer access to outside services and programs
- Seamless access to care reduces cost of care as patients recover in a timely fashion without delays and setbacks
- Aquatic exercise for seniors with arthritis reduces pain and increases mobility and function allowing participants to remain independent and age in place
- Hearing aids allow recipients to remain active and to socialize. They also reduce the risk of dementia and Alzheimer’s
- Fall prevention also allows seniors to stay independent and age in place. Falls are the leading cause of death for seniors because they often lead to a cascade of other problems ending in pneumonia
Needs Beyond the Hospital’s Mission or Service Programs

Atlantic County has a large and varied population with a variety of needs, as is well documented in the Community Health Needs Assessment.

In Atlantic County, 56% of children are eligible for free lunch. Also in Atlantic County 66% of seniors do not have sufficient funds to pay for basic needs – housing, food, transportation, and health care.

The County continues to rank 18th out of 21 counties in New Jersey for Health Outcomes, and Length of Life, 19th for Health Factors and Health Behaviors, and 20th for Social and Economic Factors.

Elected officials and business and community leaders see the need for more and better jobs. The advent of harnessing wind energy, the private/public business partnership to bring Stockton University to Atlantic City and efforts to bring new industry to the Tech Center are steps toward economic improvement in Atlantic County.

Improvement in economic opportunity will be the force that drives better health in Atlantic County.

Resources

Atlantic County Government
- Intergenerational Services
- Transportation Department
- Division of Public Health.

Stockton University
- Wellness Office
- Coordinator of Services for Students with Disabilities

Shore Medical Center Community Health Needs Assessment and the AtlantiCare Community Health Needs Assessment.