

Spectrum Health Gerber Memorial Hospital Implementation Plan July 2018-June 2021
Summary of Key Findings (Significant Health Needs) Identified in the Community Health Needs Assessment (CHNA)

A hospital facility's implementation strategy to meet the community health needs identified through the hospital facility's CHNA is a written plan that, with respect to each key finding (significant health need) identified through the CHNA, either –

- (1) Describes how the hospital facility plans to address the health need; or
- (2) Identifies the health need as one the hospital does not intend to address and explains why the hospital facility does not intend to address the health need.

Information needed to identify and determine the community's key findings (significant health needs) was obtained by sending out community health surveys to residents, interviews, and online surveys with community healthcare professionals and community leaders. Secondary data was gathered from state, local, and national databases to supplement the overall findings and needs identified.

Key Findings (Significant Health Needs) Addressed in Implementation Plans:

- i. Obesity and weight issues
- ii. Health care access
- iii. Mental Health
- iv. Substance use and abuse

Other Key Findings (Significant Health Needs) Identified in the CHNA But Not Addressed in this Plan – Each of the health needs listed below is important and is being addressed by numerous programs and initiatives operated by the Hospital, other organizations within Spectrum Health, and other community partners of the Hospital. However, the Hospital will not address the following key findings identified in the CHNA as part of this Implementation Plan due to limited resources and the need to allocate significant resources to the priority health needs identified above.

- i. Chronic Conditions
- ii. Maternal, child and teen health
- iii. Negative Social Indicators
- v. Integrated, holistic or biopsychosocial perspective
- vi. Health disparities

Spectrum Health Gerber Memorial Health Needs Assessment Implementation Plan July 2018-June 2021
Obesity and Nutrition

Key Findings (Significant Health Needs)	Population Served	Action	Measurable Impact
Obesity and weight issues	Adults with emphasis on disparities	<p>Reducing Adult obesity through:</p> <ol style="list-style-type: none"> 1. Make Newaygo County the healthiest county in Michigan in the County Health Rankings. <ol style="list-style-type: none"> a. Continue the current collaborative relationships with community partners. b. Actively participate in the healthcare collaborative group. 2. Integrate primary care and the medical fitness center for patients that need lifestyle support services <ol style="list-style-type: none"> a. Expand healthy lifestyle prescriptions from providers to well-defined pathways at Tamarac. 3. Expand free or low cost options for weight management <ol style="list-style-type: none"> a. Offer a variety of weight management programs at Tamarac, the Center for Health and Wellness. 4. Improve the experience and outcomes for patients with diabetes <ol style="list-style-type: none"> a. Wrap around care through appropriate referrals into structured programs at Tamarac. 	<ol style="list-style-type: none"> 1. Continuous improvement in integration matrix and County Health Rankings. 2. Improve health outcomes through 70% patient goal achievement annually by 6/30/2019, 6/30/2020 and 6/30/2021. 3. Engage 30 new adults per year with 40% of participants achieving their predetermined goal by 6/30/2019, 6/30/2020 and 6/30/2021. 4. Improving diabetes outcomes <ol style="list-style-type: none"> a. 50% of diabetes management patients have a 0% increase in weight or BMI annually by 6/30/2019, 6/30/2020 and 6/30/2021. b. 50% of patients who receive further intervention will achieve a 7% weight loss on average each year.
Obesity and weight issues	All with emphasis on disparities	<p>Improving nutrition by:</p> <ol style="list-style-type: none"> 1. Improve school health environment through education, policy and program development; utilizing CATCH (Coordinated Approach to Child Health) program. <ol style="list-style-type: none"> a. Using the collection impact framework, partner with all Newaygo County school districts (Fremont, White Cloud, Hesperia, Newaygo, Grant). 	<ol style="list-style-type: none"> 1. Utilizing CATCH <ol style="list-style-type: none"> a. Facilitate the creation of Wellness Committee's while implementing 1 new nutrition or physical activity policy at each school district by 6/30/2020. b. Teachers achieve 70% positive change in behavior observed (Teacher Observation & Behavioral Report), related to nutrition and healthy food consumption of students participating in CATCH. c. 0% increase in BMI of children participating in CATCH from 6/30/2019 to 6/30/2021.

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Obesity and Nutrition

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		<ol style="list-style-type: none"> 2. Improve the nutrition of food offered to children 3 and under <ol style="list-style-type: none"> a. Continue Early Childhood Nutrition program, developed in partnership with Nestle Health Sciences, and support WIC efforts led by District Health Department # 10. 3. Demonstrate how to use and cook more nutritious food options such as vegetables <ol style="list-style-type: none"> a. Offer Cooking Classes and food demonstrations to teens, adults, families, special populations and underserved individuals in Newaygo County. 4. Expand breastfeeding support for mothers who breastfeed <ol style="list-style-type: none"> a. Continue to support SHGM and DHD #10 WIC collaboration. 5. Expand support for all new mothers and their infants <ol style="list-style-type: none"> a. Continue to support Michigan Department of Health and Human Services WIC program Coffective Initiative: Implement perinatal care best practices as a part of client and staff education, and early postpartum referrals to the local WIC office. 	<ol style="list-style-type: none"> 2. Engage 20 new mothers each year, with 50% changing/improving dietary habits 6 months post intervention. 3. 50% of Cooking Class participants changing/improving dietary habits 6 months post intervention. 4. SHGM to support 2 OB nurses to complete advanced lactation education/certification by 6/30/2020. 5. WIC office will receive referrals for 100% of women delivering at SHGM by 6/30/2021.
Obesity and weight issues	All with emphasis on disparities	<p>Eliminating barriers to exercise through:</p> <ol style="list-style-type: none"> 1. Improve access and remove financial barriers to exercise facilities for vulnerable populations <ol style="list-style-type: none"> a. Offer sliding fee scale fitness memberships to Tamarac for low income individuals and families. 2. Address and change policies that help make the healthy choice the easy choice <ol style="list-style-type: none"> a. Partner with local schools and governments, <i>for example:</i> adding bike lanes to roads, expanding bike paths, Safe Routes to School, Walking Buses. 	<ol style="list-style-type: none"> 1. Provide financial assistance to 50 individuals and/or families with 70% maintaining active use of the facility 6 times per month. To be completed annually by 6/30/2019, 6/30/2020 and 6/30/2021. 2. Implement 1 new policy related to increasing opportunities for physical activity in 3 townships, cities, or school districts by 6/30/2021.

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Access to Care

Key Findings (Significant Health Needs)	Population Served	Action	Measurable Impact
Health care access	All	<ol style="list-style-type: none"> 1. Increase access for low acuity primary care visits <ol style="list-style-type: none"> a. Expand direct to consumer telemedicine services for acute care visits. 2. Improve access in rural areas <ol style="list-style-type: none"> a. Add public kiosks for telemedicine in designated underserved townships. 3. Improve primary care provider to population ratio <ol style="list-style-type: none"> a. Continue to recruit primary care Providers. b. Form a Primary Care Physician Task Force to support the recruitment plan. 4. Increase availability of preventative screenings <ol style="list-style-type: none"> a. Provide free screening services across the county. b. Engage community members with positive screening results with the healthcare system. 	<ol style="list-style-type: none"> 1. Increase # of direct to consumer visits in Newaygo County by 20% using Telemedicine data dashboard to measure volume and miles saved. To be completed annually by 6/30/2019, 6/30/2020 and 6/30/2021. 2. Add Acute Care Telemedicine Kiosks: 2 in 6/30/2019, 2 in 6/30/2020, 2 in 6/30/2021. 3. Add 2 new primary care providers by the end of 6/30/2021, while maintaining current volume of Providers. 4. Offer 6 screenings per year in underserved locations, screening 30 people annually, and engaging 90% with abnormal readings, with the healthcare system. To be completed annually by 6/30/2019, 6/30/2020 and 6/30/2021.
Health care access	All	<ol style="list-style-type: none"> 1. Increase access to specialists <ol style="list-style-type: none"> a. Expand Telemedicine outpatient specialist services. b. Expand inpatient telemedicine specialist services. 2. Improve number and type of physician specialists <ol style="list-style-type: none"> a. Continue to recruit physician specialists. 3. Expand support for patients with specific conditions <ol style="list-style-type: none"> a. Continue to expand access to support groups (Parkinson's, Alzheimer's, Cancer, Stroke, etc.). 	<ol style="list-style-type: none"> 1. Increased access through <ol style="list-style-type: none"> a. Increase # of outpatient specialty types: 4 by 6/30/2020 b. Increase # of inpatient specialist services: 2 by 6/30/2021. 2. Recruit 1-2 new physician or service specialist by 6/30/2021. 3. Add 4 new referral pathways for support groups by 6/30/2020.

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Access to Care

Key Findings (Significant Health Needs)	Population Served	Action	Measurable Impact
Health care access	All with emphasis on disparities	Access to health promotion 1. Expand access to Diabetes Prevention <ul style="list-style-type: none"> a. Partner with community agencies to expand the Diabetes Prevention Program. 2. Improve the community service events for the elderly <ul style="list-style-type: none"> a. Address the needs of the aging population, including falls/balance concerns. 	1. Add 2 new Diabetes Prevention or Diabetes Intervention series' and increase attendance by 20% by 6/30/2020. 2. Provide 4 balance screening events each year, with an educational component addressing fall prevention. To be completed annually by 6/30/2019, 6/30/2020 and 6/30/2021.
Health care access	All with emphasis on disparities	1. Improve Health Literacy: the use of a wide range of skills that improve people's ability to act on information in order to live healthier lives. <ul style="list-style-type: none"> a. Develop a program that includes reading, writing, listening, speaking, numeracy, and critical analysis, as well as communication and interaction. 2. Operationalize health literacy in the primary care, ED and inpatient Gerber facilities <ul style="list-style-type: none"> a. With support of community partners, develop health literacy program. 3. Expand end of life discussions <ul style="list-style-type: none"> a. Continue to offer First Steps Advance Care Planning. 	1. Health literacy improvements <ul style="list-style-type: none"> a. Complete baseline literacy assessment tools from the CDC by the end of 6/30/2019. b. Health literacy program is developed and implemented by the end of 6/30/2020. 2. Improve assessment scores by 10% in 6/30/2020 and 6/30/2021. 3. Complete 30 new First Steps Advance Care Planning facilitated conversations by 6/30/2021.
Health care access	All	1. Improve our patient experience by completing an A3 to drive change in improving the likelihood to recommend in the primary care, ED and inpatient setting. 2. Improve patient engagement for vulnerable populations <ul style="list-style-type: none"> a. Use MI Way to Thrive for disengaged individuals with low socioeconomic status who struggle with how to access and navigate the system. 	1. Improve overall LTR by 7% by 6/30/2021. 2. Improve patient activation measures for 30% of individuals participating in MI Way to Thrive, and re-engage 75 community members with the healthcare system by 6/30/2021.

Spectrum Health Gerber Memorial Health Needs Assessment Implementation Plan July 2018-June 2021
Behavioral Health inclusive of Substance Use Disorder

Key Findings (Significant Health Needs)	Population Served	Action	Measurable Impact
Mental Health	All with emphasis on disparities	<ol style="list-style-type: none"> 1. Expand access to psychiatry services <ol style="list-style-type: none"> a. Use telemedicine across the inpatient units and the Emergency Department. b. Partner with local agencies to support further access. 2. Improve resources for Postpartum Depression <ol style="list-style-type: none"> a. Screen all mothers by 2 months post-delivery. b. Add support group. 	<ol style="list-style-type: none"> 1. Psychiatry service access through <ol style="list-style-type: none"> a. Increase # of visits to 50 by 6/30/2021. b. In partnership with Newaygo County Mental Health (NCMH), engage 5 school districts to provide them with referral information for accessing behavioral health services (this would include those who are indigent, have Medicaid, or commercial insurance); resulting in a 10% increase of school referrals to NCMH by 6/30/2021. 2. Launch a Postpartum Depression support group in 6/30/2019.
Mental Health	All with emphasis on disparities	Increase resources to prevent suicide by offering suicide prevention training to individuals across the county.	<ol style="list-style-type: none"> 1. In partnership with local organizations, add 2 community partners located at high risk areas in Newaygo County, as trained in suicide prevention. 2. Support and promote community partner efforts with suicide prevention across Newaygo County.
Substance use and abuse	All with emphasis on disparities	<ol style="list-style-type: none"> 1. Expand tobacco treatment services (TTS) by partnering with local coalition, BreatheWell, to continue to address tobacco prevention and cessation. 2. Expand tobacco treatment services for pregnant women <ol style="list-style-type: none"> a. Continue SCRIPTS program in partnership with OB/GYN providers. 3. Increase and expand access to tobacco quit initiatives by adopting technology (example: Pro-Change, Telemedicine, WebEx). 4. Reduce the impact of second hand smoke in the environment by increasing smoke-free parks in Newaygo County 	<ol style="list-style-type: none"> 1. Expand tobacco treatment services through <ol style="list-style-type: none"> a. Participants achieve 25% decrease in smoking/vaping/tobacco use annual, between 6/30/2019 and 6/30/2021, with 10% quitting all together (exceeding CDC average) by 6/30/2021. b. Train and certify an additional individual as a TTS by 6/30/2020. 2. 10% of pregnant women quit smoking during the term of their pregnancy. 3. Implement the use of technology by 6/30/2020 to increase engagement of tobacco quit services; and achieve >10% quit rate with those who utilize the technology by 6/30/2021. 4. Make 2 additional public parks smoke-free by 6/30/2021.

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Behavioral Health inclusive of Substance Use Disorder

Key Findings (Significant Health Needs)	Population Served	Action	Measurable Impact
Substance use and abuse	All with emphasis on disparities	<ol style="list-style-type: none"> 1. Improve services for pregnant women with substance use by increasing screening of OB patients for substance abuse at prenatal visits and time of delivery. 2. Initiate opioid prevention for youth by implementing an evidence-based program for preventing youth substance abuse. 	<ol style="list-style-type: none"> 1. Screen all new pregnant women for substance abuse, and of those who have positive indicators, refer 100% for treatment in 6/30/2021. 2. Launch/support evidence based program that addresses youth substance abuse by 6/30/2021, and determine baseline and success metrics within year 1.

Spectrum Health Hospitals Community Health Needs Assessment (CHNA) Implementation Plan Glossary of Definitions

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Advanced directive	A legal document (as a living will) signed by a competent person to provide guidance for medical and health-care decisions (such as the termination of life support or organ donation) in the event the person becomes unable to make such decisions.
Advanced Practice Provider (APP)	Mid-level practitioners who are health care providers who have received different training and have a more restricted scope of practice than physicians and other health professionals in some states, but who do have a formal certificate and accreditation through the licensing bodies in their jurisdictions. Examples include, but may not be limited to, Nurse Practitioners, Physician Assistants, and Nurse-Midwives. A Nurse Practitioner is a registered nurse who has acquired the knowledge base, decision-making skills, and clinical competencies for expanded practice beyond that of an RN, the characteristics of which would be determined by the context in which he or she is credentialed to practice. Physician Assistants are concerned with preventing and treating human illness and injury by providing a broad range of health care services under the supervision of physician or surgeon. They conduct physical exams, diagnose and treat illnesses, order and interpret tests, develop treatment plans, perform procedures, prescribe medications, counsel on preventive health care and may assist in surgery. Nurse-Midwives are advanced practice registered nurses who provide counseling and care during pre-conception, pregnancy, childbirth and the postpartum period.
Bariatrics	The branch of medicine that deals with the causes, prevention, and treatment of obesity.
Behavioral Health	Covers the full range of mental and emotional wellbeing- for the basics of how we cope with the challenges of day-to-day life, to the treatment of mental illnesses, such as depression or personality disorders, as well as substance abuse and other addictive behaviors.
Blue Envelope	Spectrum Health created an innovative approach to Suicide Prevention by designing a Suicide Safety Behavior Kit (SSBK). This SSBK is kept in an easily identified Blue Envelope and contains guidelines and crisis response protocols for a First Responder, Second Responder and Clinical Lead (a provider, social worker, physician assistant, registered nurse, etc.), instructing each team member in an office setting on how to respond to a person who reveals suicidal thoughts or behaviors. These comprehensive protocols can be quickly and compassionately activated by each team member at a moment's notice when someone uses the code words "Please get me a Blue Envelope".
Cardiovascular and Thoracic (CVT)	A field of medicine focused on the heart, lungs, esophagus, and other organs in the chest. This includes specialists such as cardiothoracic surgeons, cardiovascular surgeons, general thoracic surgeons, and

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	congenital heart surgeons.
Chaplaincy Program	A member of the clergy trained to listen to the patient's story, to be present to the patient's values, and to reframe the crisis in the context of these values. These areas include risk assessment, crisis intervention, advocacy, cultural and religious diversity, ethics, integration of the patient's story into a larger faith perspective, ritual support, end-of-life issues, and bereavement and grief.
Chronic disease	A persistent or recurring disease that affects a person for at least three months.
Colon cancer screenings	Tests to detect polyps and early cancers in the intestines. This type of screening can find problems that can be treated before cancer develops or spreads. Regular screenings may reduce the risk of pain and death caused by colorectal cancer.
Convenient Care	Clinics that are a category of walk-in clinics that treat uncomplicated minor illnesses and provide preventative healthcare services.
Emergency Department (ED)	The department of a hospital responsible for the provision of medical and surgical care to patients arriving at the hospital in need of immediate care.
Federally Qualified Health Center (FQHC)	Federally qualified health centers (FQHCs) include all organizations receiving grants under Section 330 of the Public Health Service Act (PHS). FQHCs qualify for enhanced reimbursement from Medicare and Medicaid, as well as other benefits. FQHCs must serve an underserved area or population, offer a sliding fee scale, provide comprehensive services, have an ongoing quality assurance program, and have a governing board of directors.
FitKids360	FitKids360 is a healthy lifestyle program for overweight children and their families.
Full Time Equivalent (FTE)	A unit that indicates the workload of an employed person (or student) in a way that makes workloads or class loads comparable across various contexts. An FTE of 1.0 is equivalent to a full-time worker while an FTE of 0.5 signals half of a full work.
HBA1C	The A1c test (also known as HbA1c, glycated hemoglobin or glycosylated hemoglobin) is a blood test that correlates with a person's average blood glucose level over a span of 90 days.

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Health Literacy	The use of a wide range of skills that improve the ability of people to act on information in order to live healthier lives. These skills include reading, writing, listening, speaking, numeracy, and critical analysis, as well as communication and interaction skills.
Institute for Healthcare Improvement (IHI)	IHI is a nonprofit organization focused on motivating and building the will for change, partnering with patients and health care professionals to test new models of care, and ensuring the broadest adoption of best practices and effective innovations.
Integrating behavioral health collaborative care programs	The systematic coordination of general and behavioral healthcare. Integrating mental health, substance abuse, and primary care services produces the best outcomes and proves the most effective approach to caring for people with multiple healthcare needs.
Low birth weight (LBW)	Low birth weight (LBW) is defined as a birth weight of a live born infant of less than 2,500 g (5 pounds 8 ounces) regardless of gestational age.
Mammogram	The process of using low-energy X-rays to examine the human breast, which is used as a diagnostic and screening tool. The goal of mammography is the early detection of breast cancer, typically through detection of characteristic masses and/or microcalcifications.
Marketplace	Also known as the Health Insurance Exchange — is the place where people without health care insurance can find information about health insurance options and also purchase health care insurance.
Maternal Infant Health Program	Programs to improve women’s health before, during, and after pregnancy to reduce both short- and long-term problems.
Medicaid	A United States federal health care program for families and individuals with low income and limited resources.
Medicare	A United States federal system of health insurance for people over 65 years of age and for certain younger people with disabilities.
Mental Health	Also referred to as Behavioral Health, covers the full range of mental and emotional wellbeing- for the basics

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	of how we cope with the challenges of day-to-day life, to the treatment of mental illnesses, such as depression or personality disorders, as well as substance abuse and other addictive behaviors.
Metrics	A standard for measuring or evaluating something, especially one that uses figures or statistics
MI Way to Thrive	A program that works with community members in need to address social determinants and provide assistance navigating the complicated healthcare system. Through social services and in-home support, our team works with strategic community partners to help MI Way to Thrive participants connect with the resources they need to become self-sufficient and thrive. The goal is to improve self-sufficiency, quality of life and health outcomes while reducing healthcare costs and the need for public assistance.
Mothers Offering Mothers Support (MOMS)	A Spectrum Health Healthier Communities program that serves Medicaid beneficiaries who are pregnant and their newborns who are most likely to experience serious health problems due to psychosocial, socio-economic and/or nutritional risk factors.
Next third available appointment	A measurement of the patient's ability to seek and receive care with the provider of their choice, at the time they choose, regardless of the reason for their visit. Counting the third next available appointment is the healthcare industry's standard measure of access to care and indicates how long a patient waits to be seen.
Newaygo County Mental Health	An organization that provides support services for those who have severe and persistent mental illness, development disabilities, and substance use disorder needs by including a holistic assessment identifying the consumer's needs, helping to link to appropriate resources in the community, monitoring and assistance to maintaining optimal mental/physical health within the community.
Obstetrics/Gynecology (OB/GYN)	An obstetrician/gynecologist is a physician specialist who provides medical and surgical care to women and has particular expertise in pregnancy, childbirth, and disorders of the reproductive system.
Oncology Distress Screening	Cancer patients are screened to assess the psychological, social, financial, and behavioral issues that may interfere with a patient's treatment plan and adversely affect treatment outcomes so that patients are given appropriate resources and/or referral for psychosocial needs.
PAP Smear	A screening test for cervical cancer. Cells scraped from the opening of the cervix are examined under a microscope. The cervix is the lower part of the uterus (womb) that opens at the top of the vagina.
Primary Care	The day-to-day health care given by a health care provider. Typically this provider acts as the first contact

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	and principal point of continuing care for patients within a health care system, and coordinates other specialist care that the patient may need.
Primary Care Emergency Department (ED) Sensitivity	Patients using the hospital emergency departments for non-urgent care and for conditions that could have been treated in a primary care setting.
Psychiatry Behavioral Medicine Integrated (PBM+)	Embedding behavioral health services into a care setting that includes universal screening for depression, anxiety, and substance abuse. It enables triage to appropriate behavioral health resources based on risk. This will allow for improved health outcomes and the identification and treatment of conditions that were previously unknown (that impact overall health).
Question. Persuade. Refer (QRP)	A training program to reduce suicidal behaviors and save lives by providing innovative, practical and proven suicide prevention training to help decrease stigma and empower all people, regardless of background, to make a positive difference in the mental health of the people that they know.
Readmission	A subsequent admission to the hospital that occurs within 30 days of a previous admission's discharge.
Referral	An act of referring someone or something for consultation, review, or further action.
Sliding fee scale	Variable pricing for products, services, or taxes based on a customer's ability to pay.
Smoking cessation	Discontinuation of the habit of smoking, the inhaling and exhaling of tobacco smoke.
Tamarac	Tamarac is a Medical Fitness Association certified wellness center operated by Spectrum Health Gerber Memorial Hospital in Newaygo, Michigan. This 55,000-square-foot facility houses a state-of-the-art gym with certified fitness instructors; a full outpatient rehabilitation services center; a pool that is heated to accommodate physical therapy programs; a community health program staffed by registered nurses, diabetes educators, registered dietitians, community health specialists and a tobacco treatment specialist; fitness classes with certified instructors; and a child watch center with certified staff. The Skincare Center and Spa is also located within Tamarac.
Telehealth or Telemedicine	The use of medical information exchanged from one site to another via electronic communications to improve a patient's clinical health status. Telemedicine includes a growing variety of applications and

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	services using two-way video, email, smart phones, wireless tools and other forms of telecommunications technology.
Trimester	A period of three months, especially as a division of the duration of pregnancy.
Triple Aim	The pursuit of improving the experience of care, improving the health of populations, and reducing per capita costs of health care.
WIC (Women, Infants & Children)	The Special Supplemental Nutrition Program for Women, Infants, and Children is a federal assistance program of the Food and Nutrition Service of the United States Department of Agriculture for healthcare and nutrition of low-income pregnant women, breastfeeding women, and children under the age of five.
Very low birthweight (VLBW)	A birth weight of a live born infant of less than 1,500 g (3 pounds 5 ounces) regardless of gestational age.