STAMFORD HEALTH

2026-2028 Community Health Improvement Plan
Stamford & Darien

This report presents Stamford Health's Community Health Improvement Plan (CHIP) for 2026-2028. This document accompanies the 2025 Community Health Needs Assessment (CHNA), a comprehensive evaluation of the different populations of the city of Stamford and the town of Darien, and serves as a framework for implementing strategies to address and improve health outcomes in Stamford and Darien.

WHAT IS A COMMUNITY HEALTH IMPROVEMENT PLAN?

Following the triennial CHNA, hospitals are required under the Affordable Care Act (ACA) to implement a CHIP to address prioritized needs. The CHIP outlines the hospital's strategy, in collaboration with community partners, to address the identified health needs, focusing on attainable goals and measurable outcomes.

CHNA & CHIP: A SHARED COMMUNITY EFFORT

Although the hospital leads the process, both the CHNA and CHIP are community-driven documents. The CHNA identifies shared priorities, while the CHIP outlines collective actions by the hospital and its community partners. Developing the CHIP requires collaboration among hospitals, public health agencies, nonprofits, local government, schools, faith-based groups, and community leaders. These partners contribute through programs and services that address identified needs, policy advocacy, participation in coalitions and work groups, financial investments, and initiatives that strengthen community capacity.

Our CHIP is grounded in priorities identified through our CHNA. Throughout both the CHNA and CHIP processes, community members provided diverse perspectives on health trends, shared experiences from historically underserved populations, and highlighted service gaps. The key needs identified include:

- **Behavioral Health**
  - Youth Mental Health
  - Access to services
  - Alcohol use amongst adults
- **Access to Healthcare**
  - Insurance & cost of care
  - Access to primary & preventative care
  - Access to specialty care
  - Navigation of healthcare system
- **Housing**
  - Affordable / deeply affordable housing
  - Access to shelters
  - Housing for seniors & at-risk populations
  - Housing Quality & safety

These priorities guide the CHIP as a strategic framework for improving health and well-being across the community.

Behavioral Health

YM Youth Mental Health

AS Access To Services

AU Alcohol Use Amongst Adults

GOAL: Optimize and expand Stamford Health's behavioral health services.

Tactic: **AS**

Expand outpatient behavioral health services and begin planning for inpatient care expansion to ensure the community has access to comprehensive mental health services.

Tactic: **AS** **YM**

Create a specialized pediatric emergency unit to provide immediate support for children experiencing behavioral health crises, accompanied by an outpatient program that helps children transition to long-term outpatient care for ongoing support.

Tactic: **AU**

Continue to explore partnerships with local community organizations to provide substance use care.

Tactic: **AS** **YM**

Integrate behavioral health expertise into pediatric practices by providing training and adding licensed clinical social workers (LCSWs) to support children's emotional and mental well-being.

GOAL: Reduce barriers to accessing care.

Tactic: **AS**

Work with state partners to share transparent reports on the impact of new Medicaid policies and explain what they mean for behavioral health services in our community.

Tactic: **AS**

Work with community partners to explore shared funding opportunities that expand access to behavioral health services for those who need them most.

GOAL: Explore opportunities to address behavioral health of our senior population. **AS**

GOAL: Improve community factors that influence youth behavioral health.

Tactic: **AS** **YM**

Partner with community organizations to identify risk factors and collaborate on potential solutions.

Tactic: **AS** **YM**

Explore opportunities to increase training and awareness for individuals catering to our youth population (e.g., school system employees).

GOAL: Increase awareness of available resources via education.

Tactic: **AS**

Host at least one community-wide provider event focused on behavioral health to raise awareness, share resources, and connect individuals with support services.

Access to Healthcare

(IC) **Insurance Coverage & Cost of Care**

(AP) **Access To Primary & Preventative Services**

(AC) **Access to Specialty Care**

(NH) **Navigation of the Health System**

GOAL: Reduce barriers to accessing care.

Tactic: (IC) (NH)

Assist patients in understanding coverage options and navigating application processes, while identifying opportunities to connect them with additional resources as needed.

Tactic: (IC) (NH)

Assess potential approaches to help patients meet new federal community engagement requirements by identifying partnerships and resources that could support opportunities to maintain Medicaid eligibility and related documentation.

Tactic: (AP) (AC) (IC) (NH)

Work with statewide and local stakeholders to develop approaches for sharing clear, accessible information with community partners, care teams, and patients about new federal requirements and available options to meet them.

Tactic: (NH)

Collaborate with community organizations to host quarterly enrollment events.

Tactic: (AP) (AC)

Provide financial support for safety net organizations that help expand access to primary and preventative care services.

Tactic: (AP) (AC)

Identify ways to address social factors that impact access to care, including transportation and other essential resources.

Tactic: (IC) (NH)

Develop communication mechanisms that help patients understand options for care when coverage is limited or unavailable.

GOAL: Enhance cultural awareness and sensitivity.

Tactic: (AP) (NH) (AC)

Continue Stamford Health's Community Health Worker (CHW) program to assist patients in navigating care and connecting to resources.

Tactic: (AP) (NH) (AC)

Optimize and expand language services for telehealth visits to ensure patients can communicate effectively and receive care in their preferred language.

Tactic: (AP) (NH) (AC)

Enhance reporting on the use of Language Line services to ensure resource availability.

Tactic: (NH)

Develop and provide training and resources to improve the availability and effective use of patient language services.

Tactic: (AP) (NH) (AC)

Improve the collection of patient demographic information through EMR and provide training to ensure accurate data capture.

GOAL: Advance patient navigation through better care connections and communication.

Tactic: (AP) (AC)

Leverage Epic electronic health records to improve patient engagement and scheduling.

Tactic: (AP) (AC)

Utilize digital tools for automated communications following visits and discharges to remind patients of care instructions and upcoming follow-up appointments.

Tactic: (AP) (NH) (AC)

Complete proactive appointment scheduling before patients leave the hospital to support continuity of care, reduce readmissions, and improve satisfaction.

Tactic: (AP) (NH) (AC)

Explore opportunities to simplify language in Stamford Health documents, such as discharge instructions, to help patients better understand their care and follow treatment plans.

GOAL: Increase awareness and knowledge of primary and preventative care.

Tactic: (NH)

Organize physician or CHW public speaking events to share information on primary and preventive care and engage the community in understanding the importance of regular health checkups.

Tactic: (NH)

Continue to leverage community relationships to share information and support residents.

GOAL: Improve access to primary, preventative, and specialty care.

Tactic: (AP) (AC)

Conduct community screening and vaccination events in partnership with local organizations to improve access to preventative care and protect community health.

Tactic: (AC)

Expand access to primary care and specialty care via expansion of Stamford Health's ambulatory network.

Housing

(AH) **Affordable / Deeply Affordable Housing**

(AS) **Access To Shelters**

(HS) **Housing for Seniors & At-Risk Populations**

(HQ) **Housing Quality & Safety**

GOAL: Advocate for an increase in the availability of affordable housing in Stamford, with an emphasis on safe living conditions.

Tactic: (AH) (HQ)

Advocate for safe and affordable housing by working with community partners at the local, state, and national levels to increase access to safe and stable living conditions.

Tactic: (AH) (HQ)

Engage key stakeholders to collaborate on housing policy solutions that increase affordable, safe, and accessible living options for the community.

Tactic: (HS)

Leverage insights from the DataHaven Housing Study to better understand the needs of specific populations.

Tactic: (AH) (AS) (HS) (HQ)

Partner with the City of Stamford to implement the 2035 Comprehensive Plan by:

a) Diversifying housing options,
b) Making affordability a citywide priority,
c) Supporting aging in place, and
d) Designing neighborhoods for accessibility and walkability

GOAL: Support economic opportunities for vulnerable populations to improve access to housing.

Tactic: (AS) (HS)

Provide leadership and expertise through board service with workforce and economic development organizations to help create opportunities that improve access to housing for vulnerable populations.

GOAL: Identify opportunities to improve access to homeless shelters.

Tactic: (AS) (HS)

Provide board leadership and financial support for local shelter organization boards to improve access to safe housing for individuals in need.

Tactic: (AH) (AS) (HS) (HQ)

Assist clients in securing housing and connecting to essential resources through Stamford Health's Community Care Team.

Monitoring of the CHIP Process

To ensure the Community Health Improvement Plan (CHIP) delivers measurable impact, Stamford Health has established a structured approach for monitoring and reporting progress.

Measurement:

- Impact will be assessed through the next Community Wellbeing Survey and tracked using key performance indicators (KPIs) tied to specific initiatives.

Monitoring:

- A detailed tactical plan outlines clear accountabilities for leaders within Stamford Health and partner organizations.

Reporting:

- Reporting occurs at multiple levels in alignment with ACA requirements, reinforcing accountability and transparency.

Appendix A: Engagement of Internal and External Stakeholders

Thank you to the partners and internal teams who contributed their insight and collaboration to guide the development of this CHIP. In addition to the continued collaboration with the town of Darien and city of Stamford, we also engaged a number of community organizations to partake in the development of the CHIP. Their shared commitment helps us align efforts and create lasting impact for a healthier community.

Community Organizations:

- Americares
- At Home Darien
- B1C
- Boys & Girls Club
- Catalyst The HUB
- Charter Oak Communities
- Community Health Center
- Darien School System
- Family Centers
- Herbert & Nell Singer Foundation
- Liberation Programs
- Optimus
- Pacific House
- Silversource
- Stamford Boys & Girls Club
- Stamford Public Schools
- Stamford Senior Center

Appendix B: Overview of the Full Cycle of a CHNA & CHIP

The CHNA and CHIP represent a full cycle of planning and action designed to improve community health.

Steps 1-6:

The process begins with the CHNA, which helps identify the most pressing health priorities for the populations we serve. This step ensures that available services align with community needs and fosters collaboration among local partners.

Step 7:

Building on these findings, the CHIP provides a strategic roadmap for addressing the identified priorities. It coordinates resources across hospitals and community organizations, clarifies roles, and outlines actionable strategies to improve health outcomes. The CHIP is reviewed and approved by the Board of Directors to ensure alignment with organizational goals.

Steps 8-9:

Finally, implementation brings the plan to life. Initiatives are executed, refined as needed, and adapted to meet evolving community needs. Additional resources are incorporated as opportunities arise, ensuring that the plan remains dynamic and responsive. Together, this cycle promotes shared accountability and collective impact in advancing community health.