FISCAL YEAR 2025

(JULY 1, 2024 – JUNE 30, 2025)

Community Impact Report

Holy Cross Health

A Member of Trinity Health

OUR MISSION

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

OUR CORE VALUES

Reverence
Commitment to Those Experiencing Poverty
Safety
Justice
Stewardship
Integrity

OUR VISION

As a mission-driven innovative health organization, we will become the national leader in improving the health of our communities and each person we serve. We will be the most trusted health partner for life.

CONTENTS

OUR COMMITMENTS

Trinity Health remains steadfast in supporting the most vulnerable in the communities we serve by integrating clinical and social care and investing in initiatives that promote optimal health for all.

Fiscal Year 2025 was met with uncertainty and, at times, a sense of scarcity. Yet, our teams demonstrated remarkable resilience—adapting to evolving needs while remaining deeply committed to our Mission and Core Values, especially Stewardship, Justice and Commitment to those Experiencing Poverty.

Through our Community Health & Well-Being efforts, we expanded our Community Health Worker team to address patients' health-related social needs and advance the delivery of the National Diabetes Prevention Program. We advocated vigorously to preserve Medicaid and other social safety net programs that ensure access to essential needs, such as healthcare, housing, food, education and income. Additionally, our Shareholder Advocacy Program continued to influence positive change within the corporate sector.

While resources across healthcare and other industries continue to retract, the needs of people experiencing poverty and other vulnerabilities persist – and so does our commitment. In FY25, Trinity Health invested $2.9 billion in Community Impact, including $1.4 billion in Community Benefit. Notably, our Financial Assistance Program assisted over 442,000 individuals, a 42% increase compared to FY24.

We are proud to present our Annual Community Impact Report, which reflects the compassion, breadth, depth and impact of our services across Trinity Health.

Michael Slubowski
President & Chief Executive Officer

Daniel Roth, M.D.
Executive Vice President, Chief Clinical & Community Division Operations Officer

Jaime Dircksen
Vice President, Community Health & Well-Being

A LETTER FROM OUR CEO

Dear Community Partners and Friends: At Holy Cross Health, we have always been devoted to service—caring for, uplifting and empowering the communities we call home. This year's Community Impact Report reflects not only the work we've done—but the lives we've touched, the partnerships we've built and the progress we've made together.

From expanding access to care and launching new wellness initiatives, to supporting local families through education, housing and food security programs, our commitment to this community runs deep. We've invested in people, resources and culturally responsive outreach—meeting people where they are, and working to ensure no one is left behind.

Our efforts are driven by a simple but powerful belief: health is more than medicine. It's safe neighborhoods, strong schools, economic opportunity and a sense of belonging. That's why we've worked hand-in-hand with local leaders, nonprofits and residents to build solutions that reflect the real needs of our community.

This report is a celebration of that work—and a call to keep going. The numbers tell a story of growth, but the real impact is found in the stories of individuals who now have access to care, support and hope.

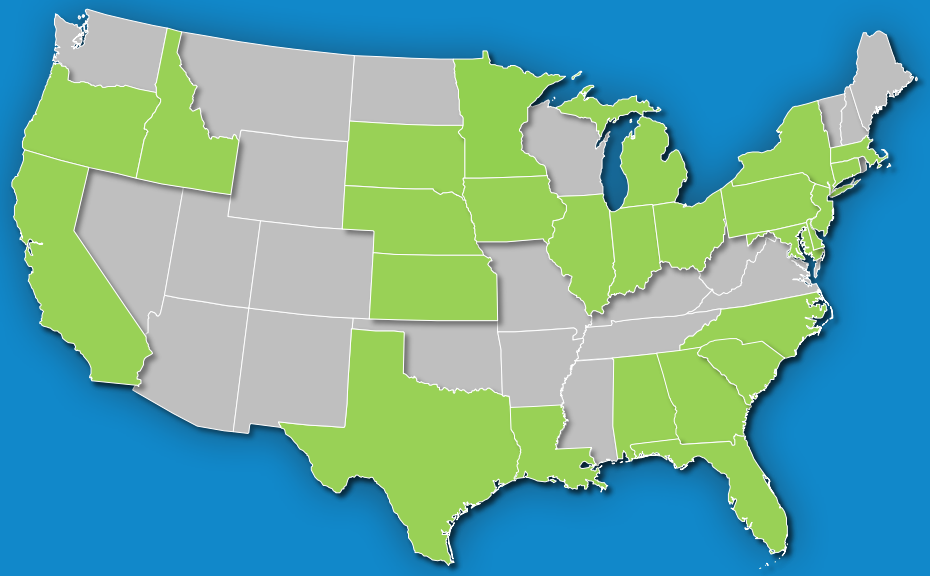
We are proud of what we've accomplished, but we know there is more to do. As we look ahead, we remain committed to equity, innovation and collaboration. Together, we will continue to build a healthier, stronger and more vibrant future for South Florida.

Thank you for being part of this journey.

Warmly,

Pierre Monice
President and CEO

TRINITY HEALTH
ONE OF THE LARGEST CATHOLIC HEALTH SYSTEMS IN THE NATION



25 States

1.1M Attributed Lives

$2.9B in Community Impact**

162 Community Health Workers

92 Hospitals*

12 Clinically Integrated Networks

41 Safety Net Health Centers

12 Diabetes Prevention Programs

*Owned, managed or in JOAs or JVs. **including $1.4B in IRS-defined Community Benefit

HOLY CROSS HEALTH
AT A GLANCE

Holy Cross Health is a Catholic health care ministry with 557-bed community-based, teaching, not-for-profit hospital established in 1955 on the east side of Fort Lauderdale, Broward County. The Joint Commission approved hospital provides traditional medical and surgical services in addition to state-of-the-art robotic surgery and several service lines have achieved national recognition by accredited certification groups. Since its inception, Holy Cross has been responsive to the dynamic and diverse needs of its community. Today, the hospital sits at the center of a nexus that includes a comprehensive continuum of inpatient and ambulatory care.

In May 2013, Holy Cross Health became a member of one of the nation's largest Catholic Health systems with the merger of Catholic Health East and Trinity Health. Holy Cross' colleagues, physicians and volunteers work diligently to serve the needs of those living in the tri-county South Florida community, and especially Broward County.

- **1** Hospital*
- **1** Ambulatory Surgery Center
- **7** Outpatient Rehab Centers
- **1** Urgent Care Location
- **35** Medical Group Practices
- **3,381** Colleagues
- **245** Allied Health Members
- **697** Credentialed Physicians
- **185** Medical Group Physicians

*Owned, managed or in JOAs or JVs.

Community Impact

The Community Health & Well-Being team champions health equity by responding to Broward County's most pressing community needs. Guided by a mission of compassion and partnership, the team develops impactful programs and policy innovations that serve vulnerable populations—empowering healthier lives through outreach, strategic collaboration and culturally responsive care.

The Community Health & Well-Being team is committed to advancing health equity across Broward County by addressing the most pressing needs of vulnerable populations. With compassion at its core, the team leads initiatives to improve access to affordable health care, enhance food security and respond to patients' outstanding social needs including housing instability, transportation barriers and economic hardship.

Through trusted partnerships and focused outreach, the team works closely with local organizations, government agencies and the medical group to ensure coordinated care and support. One major focus is chronic disease management, especially hypertension control among populations at highest risk. By integrating culturally responsive education, regular screenings and data-driven interventions, the team empowers individuals to take control of their health and promotes long-term wellness.

Every effort is designed to uplift the community through inclusive services, strategic collaboration, and a shared vision of health as a human right. The team's work is not only responsive it is transformative, laying the foundation for healthier futures across every ZIP code in Broward.

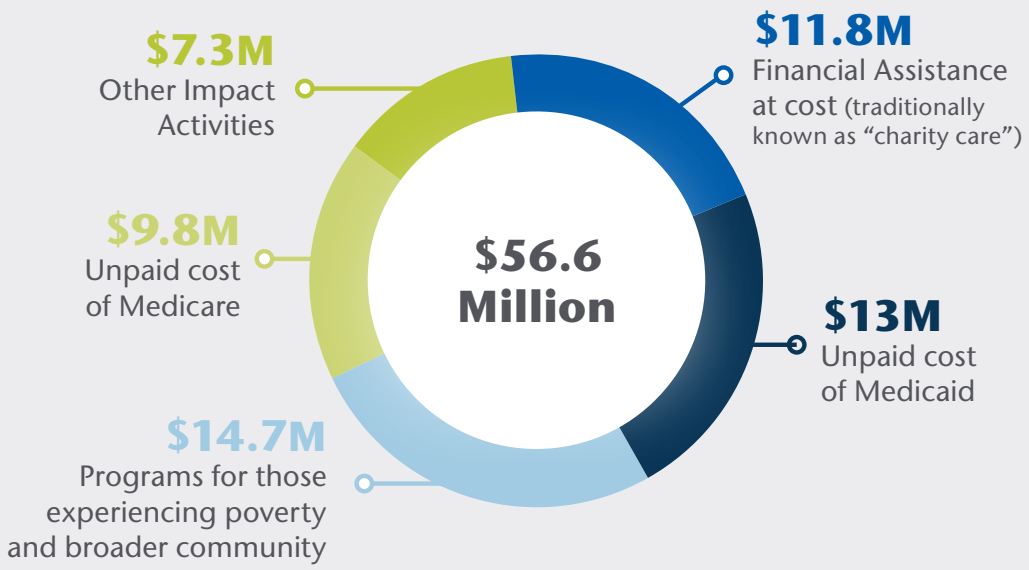
Our Community Impact

Holy Cross Health measures Community Impact to bring awareness of our financial investments in the communities we serve and is committed to ensuring we comprehensively report all the IRS-defined Community Benefit happening across our system.

Our ultimate goal in sharing our Community Impact is to fully demonstrate the services and supports we provide in the communities we serve – focusing on impacting people experiencing poverty—through our financial investments.

In Fiscal Year 2025, Holy Cross Health invested $56.6 million in Community Impact, including $39.5 million in IRS-defined Community Benefit*.

TOTAL COMMUNITY IMPACT



*Community Benefit data per audited Financial Statements

Our Financial Assistance program supports patients with incomes up to 200% (full assistance) to 400% (partial assistance) of the Federal Poverty Level to receive both routine and emergency care.

In FY25, Holy Cross Health provided:

$11.8M in financial assistance at cost

17,330 patients benefited

Integrated Care Model

In our integrated care model, patients are referred to the Community Health Worker (CHW) program from hospitals or medical group offices, creating a seamless connection between clinical care and community-based support.

Once enrolled, patients receive personalized assessments to identify outstanding social needs such as housing, food access or transportation. CHWs then work diligently to resolve these barriers or connect patients to trusted community resources. To ensure coordinated care and accountability, all updates are documented within the electronic medical record (EMR), keeping the referring team informed and maintaining a closed-loop process.

This model strengthens continuity of care, enhances health outcomes and deepens trust between patients and providers—especially for vulnerable populations. By addressing the full spectrum of social influencers, the team empowers healthier lives and fosters lasting community resilience. **This year, the team received more than 1,800 referrals.**

Planning for the Future While Supporting Recovery

When Chivante was admitted to the ICU with pneumonia, Community Health Worker Brittany Dixon (left) visited daily, offering support to Chivante and her grandmother. Born with HIV and a mother of two HIV-negative children, Chivante faced uncertainty about her family's future. Brittany guided her grandmother through essential paperwork, including health care surrogacy and guardianship forms, and connected her with legal aid. Thankfully, Chivante's health improved, and these measures weren't needed—but the planning brought peace of mind. Today, Brittany continues home visits, ensuring Chivante and her children remain supported and secure.

FROM CRISIS TO STABILITY: HOW COMMUNITY HEALTH & WELL-BEING MADE A DIFFERENCE

When Dr. Basu raised urgent concerns about Pearl (left), a patient with severe colorectal conditions who had not showered for 30 days, our Community Health Worker (CHW), Alexis Hunter (right) acted immediately. Pearl's water had been shut off, and her disability payments discontinued. Alexis identified that she was eligible for Ryan White services and helped her enroll in the program, securing short-term utility assistance and transitional housing through a community-based agency. Today, Pearl has 24/7 access to showers, three meals a day and is preparing to resume disability payments. This is the power of coordinated care—turning barriers into opportunities for health and dignity.

Reclaiming Health: How Coordinated Care Changed One Life

After 25 emergency visits in FY25, Brooke—an unhoused individual experiencing diabetes, HepatitisC and battling substance use—was critically admitted with extremely high blood sugar. Through coordinated care by Holy Cross Health's FOCUS Coordinator and CHW, Brooke entered rehab, re-engaged in HepatitisC and diabetes care and today celebrates 50+ days of sobriety and stability.

Recognizing Brooke's unmet HepatitisC care needs, Jose, the FOCUS Program Team Leader, stepped in. After assessing Brooke, Jose brought in Mina, a trusted Community Health Worker (CHW), to help coordinate his next steps. Together, they worked urgently to find a substance abuse rehab facility able to take him once medically stable and able to care for his diabetic needs.

Two weeks later, Brooke was picked up from the hospital by the rehab center. During his six-week inpatient stay, Mina stayed in touch with Brooke's assigned social worker, ensuring continuity of support. Before discharge, Jose and Mina visited Brooke—providing encouragement and reinforcing his new path toward recovery. He was successfully transferred to a long-term outpatient rehab facility, where he continues care and support.

Since his life-threatening emergency in April, Brooke has not been hospitalized again. As of today, he celebrates 50 days sober and clean—a milestone that marks not just personal resilience, but the power of coordinated, compassionate community health

This year the FOCUS program provided via the Holy Cross Health Emergency Department:

1,225 HIV tests with a 10% positivity*

1,451 Hepatitis tests resulting in a 4.85% positivity*

833 Syphilis tests resulting in a 8.2% positivity*

*may reflect new or known diagnosis requiring linkage to care and treatment

The screening and linkage to care program is funded in part by Gilead Sciences' FOCUS Program funding (supported HIV and HCV testing and linkage to the first appointment after diagnosis) and the Florida Department of Health.

Left to right: Jose Javier, Mina Valdes, Yazmina Llanos Dir. Operations at Aloha Detox and Brooke

FROM 25 ER VISITS TO 50 DAYS OF SOBRIETY: BROOKE'S TURNAROUND

Coordinating medical, social, and rehabilitative care is an intricate task that requires more than routine scheduling—it requires compassion, dedication and a unified mission to serve the patient first. Teams working to reduce emergency department utilization, hospital re-admissions and unnecessary length of stay must collaborate seamlessly. This means synergizing efforts between physicians, nurses, case managers, social workers, community health professionals and all those under the Community Health & Well-Being umbrella.

It's not just about responding to crises—t's about preventing them. Proactive disease management, preventive screenings and consistent follow-up care form the foundation of improved health outcomes. And at the heart of this ecosystem is the patient: centered, heard and involved in their own care journey.

Such work transforms health systems from reactive to relational. It's in the coordination, the compassion and the commitment that healing truly begins.

From Crisis to Comeback: Radha's Journey to Health & Hope

Radha moved from Delaware to Florida confident she wouldn't need to see a doctor anytime soon. She had prepared by bringing a year's supply of her hypertension and acid reflux medications. But over a year later, out of medication and feeling unwell, Radha contacted her insurance, selected a new primary care provider and scheduled an appointment at Sistrunk Health Center.

Valerie, APRN, received a late-evening call from the lab with alarming results: Radha's A1c was over 16.5 and her blood glucose exceeded 538. Valerie immediately reached out to Radha to share the critical findings. At follow-up, Radha was started on medications for both conditions and received education on diet and lifestyle changes. Despite Valerie's guidance and nurse Vanessa's educational interventions, Radha was hesitant. Influenced by family experiences with diabetes medications and skeptical about taking two antihypertensive drugs, she tried managing her health on her own and took only one. "I thought I could fix it myself," she said. "I changed my diet—cut out all fruit—and tried it my way."

After returning from a business trip, Radha felt worse and attended her three-month follow-up. Her blood sugar had climbed even higher, and while her blood pressure had improved slightly, it remained above normal. Confronted with the reality of her condition, Radha thought, "I have family to take care of—I want to live," and went to the ER as highly suggested by Valerie. **Terrified—it was her first time ever in a hospital—Radha was shaken by the emergency doctor's blunt question: "Would you rather have some GI discomfort or be in a coma?" The gravity of her situation hit hard.**

Back at Sistrunk, Radha shared her struggles with Valerie and Vanessa, including gastrointestinal side effects from her diabetes medication. "I can't eliminate fruit, rice, pasta, bread... I'm Indian," she explained. Valerie listened and adjusted her treatment, switching her to a GLP-1 medication and discussing realistic activity goals given Radha's weight challenges.

Today, Radha is transformed. Her A1c is 5.7. She can walk, climb stairs in her townhome and the numbness and tingling in her feet have resolved. "I used to take my elderly parents to the mall and had to sit because of the pain in my feet," she says. "Today, I could walk to California!" After 6 years in menopause, her weight has reduced from 243 lbs to 167 lbs. In Radha's own words, "Valerie and Vanessa saved my life and I am and will always be so grateful to them." **This year, the Sistrunk Health Center had 2,374 patient encounters with some of the most vulnerable individuals living in our community.**

Left to right: Valerie Fox, APRN & Vanessa Graham, RN

> I adore them—they saved my life. I trust Valerie (APRN) and Vanessa (RN) completely. When I follow their advice, I know it's going to work. They genuinely want to make a difference. They're attentive, they listen and they truly want to help—that's the magic.

Partners in Breast Health: Advancing Equity & Saving Lives

Left to right: Daughter Camila and mother, Maria.

Holy Cross Health's Partners in Breast Health program is committed to eliminating disparities in breast cancer outcomes by ensuring equitable access to screening and diagnostic services for all women, with a focus on historically underserved populations. The program provides screening and diagnostic breast services to women who lack access, with a clear goal: to prevent late-stage diagnoses and reduce deaths, especially among underserved populations. This year, 590 women received intakes to the program and by addressing barriers such as cost, transportation, and health literacy, Partners in Breast Health ensured that early detection is not a privilege, but a right.

This initiative goes beyond clinical care. It fosters trust through culturally sensitive outreach and education, empowering women to take proactive steps toward their health. The program also collaborates with community organizations to reach those most at risk, creating a network of support that extends far beyond the exam room.

This year, Partners in Breast Health hosted its first Celebration of Life, honoring survivors and remembering those lost to breast cancer. The event served as a powerful reminder of why this work matters—because behind every statistic is a life, a family and a story worth fighting for.

Through innovation, compassion and a commitment to equity, Holy Cross Health continues to lead the way in breast cancer prevention and care. Together, we can ensure that every person, regardless of race or income, has access to the screenings and support needed to live a healthier, longer life.

Disease Prevention

HIV Prevention: Education as a Tool for Empowerment

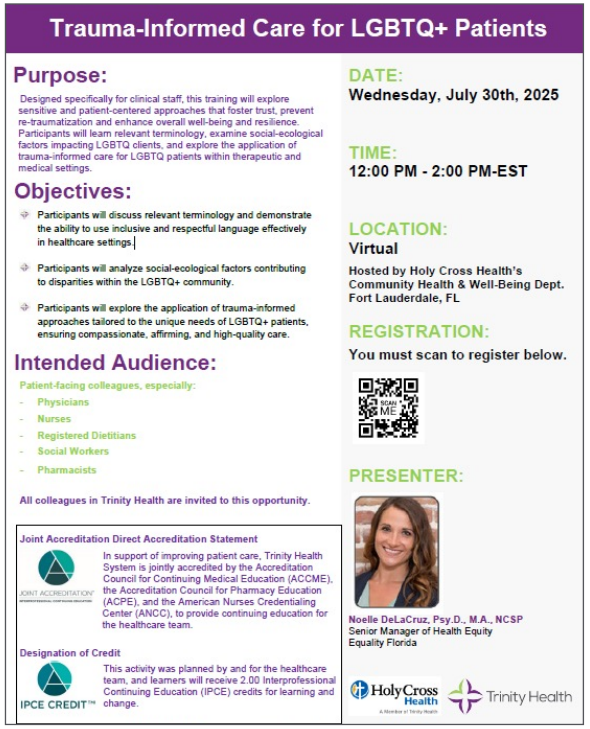
A question posed by an ophthalmology student during a recent college talk—asking whether HIV can be transmitted through tears or saliva—highlights a critical gap in infectious disease education. The answer is clear: HIV is not transmitted through tears, saliva, or casual contact. Yet the fact that such questions still arise in academic settings underscores the need for comprehensive, accessible public health education.

Community Health & Well-Being plays a vital role in bridging these gaps. When accurate information is delivered by trusted voices in schools, clinics and public forums, it empowers individuals to make informed decisions and helps dismantle stigma. Education is not just a tool—it is a form of prevention.

By prioritizing health literacy and ensuring that all communities have access to reliable, culturally sensitive information, we strengthen public health systems and promote overall well-being. Community Health Workers, educators, and advocates are essential in translating complex medical facts into everyday understanding, especially in underserved areas where misinformation can thrive.

Questions like these remind us that education must extend beyond textbooks and into the heart of our communities. It must be proactive, inclusive, and rooted in empathy. When we invest in public health education, we invest in healthier futures where knowledge leads to prevention, and prevention leads to equity.

HIV Prevention and Outreach efforts engaged more than 2,374 community members at 16 events and 130 education sessions. Additionally, 313 HIV self-test kits were provided.



TRAINING FOR EQUITY: TRAUMA-INFORMED CARE FOR LGBTQ+ PATIENTS

Partnering with Equality FL, the CHWB team presented a 2-hour virtual class, "Trauma Informed Care for LGBTQ+ Patients."

136 Trinity Health clinical staff members and colleagues joined from across the nation were trained to explore sensitive and patient-centered approaches that foster trust, prevent re-traumatization and enhance overall well-being and resilience. Participants learned relevant terminology, examined social-ecological factors impacting LGBTQ clients and explored the application of trauma-informed care for LGBTQ patients within therapeutic and medical settings.

Navigator Network: Building Connections for HIV Care

Launched in January, the Navigator Network was created to strengthen support for peers and professionals serving people living with HIV/AIDS. This collaborative initiative ensures case managers and navigators work together across systems to improve access to essentials for patients such as housing, food, medical care, medications and transportation.

As HIV cases continue to rise, Holy Cross Health's Community Health & Well-Being department remains committed to addressing these challenges. Many individuals living with HIV face barriers navigating a complex and evolving health care system. The Navigator Network provides quarterly in-person meetings and monthly virtual sessions, creating a space for case managers, peers, community health workers and other client-facing specialists to share resources, discuss challenges and celebrate successes.

Future plans include developing tools to simplify access to services and strengthen provider connections, ensuring patients receive comprehensive, coordinated care. As resources become scarcer, collaboration is paramount. Our patients' health depends on shared expertise, trust and a unified goal: improving health and well-being. **The program has already engaged 19 HIV community-based agencies and their case managers, peers, and navigators in virtual and in-persons trainings.**

Empowering Health Through Diabetes Prevention and Management

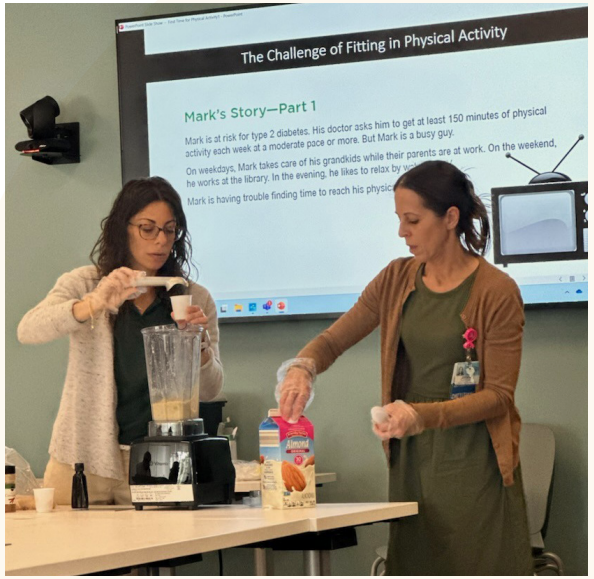
Holy Cross Health is committed to addressing health disparities and improving outcomes for individuals at risk for or living with diabetes through two impactful programs: National Diabetes Prevention Program (DPP) and Diabetes Self-Management Education and Support (DSMES).

The National DPP is designed to help individuals at risk for type 2 diabetes make sustainablelifestyle changes that reduce their risk. Offered both in-person and virtually, the program is easily accessible to a wide range of participants, removing barriers related to transportation, scheduling and location. Through group sessions led by trained lifestyle coaches, participants learn about nutrition, physical activity, stress management and goal setting all within a supportive, community-based environment. This program was made possible through funding from the Centers for Disease Control and Prevention to prevent or delay the onset of type 2 diabetes in communities served.

For those already diagnosed with diabetes, the DSMES program provides personalized education and support to help manage the condition effectively. Services include one-on-one counseling, group education sessions, and telehealth appointments, ensuring that care is tailored to individual needs and circumstances. Participants gain practical skills in blood sugar monitoring, medication management, meal planning and problem-solving strategies to improve their quality of life and reduce complications.

Both programs are delivered by Holy Cross Health's Healthy Programs team, which includes registered dietitians (RDs), registered nurses (RNs) and health and wellness professionals. This multidisciplinary team not only addresses the physical aspects of diabetes but also recognizes and responds to the social needs that impact participants' ability to manage their condition such as food insecurity, housing instability and access to care.

By offering these programs in flexible formats and through culturally sensitive, community-rooted approaches, Holy Cross's Community Health & Well-Being team is closing gaps in care and empowering individuals to take control of their health. These initiatives reflect a broader commitment to health equity and the belief that everyone deserves the tools and support to live a healthier life. **The National DPP provided in-person and distance classes to 106 participants. The DSMES program provided 224 patient individual patient encounters in addition to education and support groups.**



Left to right: DPP Lifestyle Coaches Samantha Willins, MPH and Jennifer Sawyer, RD

Healthy food demonstrations are a powerful tool for improving health literacy and promoting behavior change. They make nutrition education engaging and practical, showing participants how to prepare affordable, culturally relevant meals. By connecting knowledge with action, these demonstrations help reduce diet-related disparities and empower communities to make healthier choices every day.

Chronic Disease Management: Closing the Gap in Hypertension Disparities—A Collaborative Success

Holy Cross Health launched an initiative to address the persistent disparities in hypertension outcomes. This collaborative effort focused on culturally sensitive, patient-centered care and leveraged evidence-based tools to drive measurable impact.

Central to the initiative was the implementation of the American Medical Association's MAP BP program, which emphasizes Measure Accurately, Act Rapidly, and Partner with Patients. Community Health Workers (CHWs) played a pivotal role in educating patients about hypertension, its risks and the importance of consistent blood pressure monitoring. Education sessions were tailored to meet patients where they were—both physically and emotionally—ensuring that health literacy and cultural relevance remained at the forefront.

In addition to clinical education, CHWs conducted comprehensive assessments of social needs, identifying barriers such as food insecurity, housing instability and limited access to transportation. These challenges were addressed through referrals, resource navigation, and advocacy, reinforcing the holistic nature of the intervention.

A key component of the program was home visits, during which CHWs demonstrated the proper use of blood pressure cuffs and engaged patients in "teach-back" exercises to confirm understanding. This hands-on approach not only built trust but also empowered patients to take ownership of their health.

The close relationships formed between CHWs and patients fostered a supportive environment that encouraged sustained engagement and behavior change. By prioritizing health literacy, cultural sensitivity and community-based care, the initiative successfully improved blood pressure control among participants and narrowed the gap in hypertension outcomes.

The results of this project affirm the power of collaboration, education and culturally competent care in advancing health equity. Holy Cross Health remains committed to expanding this model to reach even more communities in need.

Your CHW Team

Left to right: Marlene Lewis, Brittany Dixon, Alexis Hunter, Mina Valdes

Transforming Community Health Through Food Equity: The REACH Project

Center front: Virginia Wiley, HCH CHWB. Left to Right: Michael Farver, Founder & CEO So FL Hunger Coalition, Jolene Mullins, COO So FL Hunger Coalition, Tenille Brown, Kim Saiswick, HCH CHWB, and Aaron Johnson, Nova Southeastern University

Holy Cross Health's Transforming Community Initiative (TCI) is a bold, multisector effort aimed at addressing food insecurity and advancing health equity in vulnerable communities. Funded by Trinity Health, TCI provides grassroots funding and technical assistance to support systemic change. At its core, TCI empowers community-based organizations and residents to lead solutions that reflect lived experiences and local needs.

One of the flagship efforts under TCI is the REACH project, which focuses on the Sistrunk community in Ft. Lauderdale, Broward County. REACH brings together community members, leaders, and organizations to confront the deep-rooted impacts of historic inequities particularly as they relate to health access, nutritional status and food security.

Ft. Lauderdale City Commissioner and REACH committee member, Pamela Beasley-Pittman is a long-time Broward County resident. **She captured the essence of the challenge: "This isn't just a food desert, it's food apartheid. Deserts form naturally. This? This is by design."** Her words reflect the reality that food insecurity in Sistrunk is not accidental, but the result of decades of disinvestment and inequitable policies.

Through REACH, Holy Cross Health and partner the South Florida Hunger Coalition engages trusted community voices to co-create solutions. These include expanding access to fresh produce, supporting local food cooperatives and advocating for policy changes that promote equitable food systems. The initiative also integrates health education, screenings and wraparound services to address the broader social influencers of health.

By prioritizing health literacy, community empowerment and equity, TCI and REACH are transforming how food security is addressed—not just as a matter of access, but as a matter of justice. This work is a testament to what's possible when communities are given the tools, trust and resources to lead their own change.

Building Healthy Futures with Nurse-Family Partnership

Holy Cross Health's Nurse-Family Partnership (NFP) is a proven, evidence-based program that transforms the lives of first-time mothers and their families. By pairing specially trained registered nurses with first time expectant mothers early in pregnancy and continuing through the child's second birthday, NFP provides consistent, personalized support during one of life's most critical transitions.

Left to right: NFP Nurses: Brittany Williams, Natalie Blake, Symone Ambrose

The foundation of NFP's success lies in the trusted relationship between nurse and mother. Nurses offer guidance and education on prenatal care, childbirth preparation, infant development and parenting strategies—all tailored to the unique needs of each family. This ongoing support helps mothers navigate challenges, build confidence and make informed decisions that promote long-term health and stability.

Research consistently shows that NFP leads to measurable improvements in maternal and child health outcomes. These include reduced rates of preterm birth, improved breastfeeding practices, increased immunization rates and enhanced child development. The program also contributes to economic and social stability by helping mothers set and achieve goals related to education, employment and housing.

Beyond clinical care, NFP nurses become trusted allies—providing emotional support, connecting families to community resources and fostering resilience. Families often describe their nurse as more than a health care provider: a mentor, advocate and friend.

> "One client shared, "Because of the NFP program, I gained not just a nurse, but an extension of my support system. Brittany was kind, knowledgeable and always there when I needed her."

Holy Cross Health is proud to offer Nurse-Family Partnership as part of its commitment to advancing health equity and supporting vulnerable populations. By investing in early intervention and relationship-based care, NFP helps build stronger families and healthier communities—one mom, one baby and one nurse at a time.

Holy Cross Health's NFP program continues to uplift families, one relationship at a time proving that personalized care can change lives. This year the NFP team provided 56 new mothers with 794 visits and welcomed 38 healthy babies into our world.

Make Your Impact

Holy Cross Health listens, partners and makes it easy to identify and meet patient's health-realted social needs, and collaborate with local organizations to address community needs and demonstrate Community Impact.

Not all communities have equal opportunities to be healthy, or the same needs. That's where Holy Cross Health steps in and steps up. We do what is necessary to promote health for everyone.

When you donate to Holy Cross Health, you are directly supporting services to patients, including those who are experiencing poverty and other vulnerabilities such as access to healthy, affordable food, housing and transportation.

To make a donation, visit holy-cross.com/about-us/ways-to-give.

FISCAL YEAR 2025

Community Health & Well-Being Impact Report

Holy Cross Health

A Member of Trinity Health