MaineGeneral Health

Community Health Implementation Plan

FY2019 Annual Report

MaineGeneral Health

In This Report

From Our CEO, Chuck

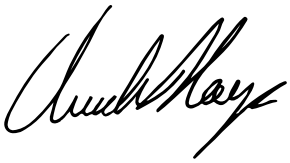
While the Affordable Care Act mandated community health needs assessments beginning in 2012, MaineGeneral Health (MGH) has a 30-year history of engaging our communities and developing annual Community Health Implementation Plans to guide our work. In addition, Maine is currently one of the few states in the country that collaborates every three years on a statewide community health needs assessment process. The four largest health care systems in the state and the Maine Center for Disease Control and Prevention pool their resources, develop common metrics and conduct community forums to inform the direction of our health care, prevention and public health efforts.

I'm proud to share this 2018-19 MaineGeneral community health report with you. This is our second annual report on goals and strategies developed as a result of the community health needs assessment process.

With the support of private, state and federal grants, and the Peter Alfond Foundation and Community Health Fund endowments, MGH has addressed chronic disease prevention and management and substance use prevention and management. Through outreach, education and engagement, our teams strive to meet people in the community where they are at and link them to care, transportation and food resources.

I hope you enjoy reading this report, developed by MGH's Prevention & Healthy Living leaders: Laura Mrazik, director of Accountable Care, and LeeAnna Lavoie, director of Prevention Services. I'm proud of the work that MGH does to enhance, every day, the health and well-being of people in the Kennebec Valley.

Sincerely,



Chuck Hays,
CEO, President
MaineGeneral Health

Acknowledgements

Thank you to the following individuals who contributed to the development of this annual report:

Jane Allen
Veronica Boucher
Anne Conners
Rebecca Cook
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MaineGeneral Endowments

- The Community Health Fund
- The Peter Alfond Foundation

State Grants

- Maine Department of Health & Human Services
  - » Office of Substance Abuse
  - » Maine Center for Disease Control and Prevention

Federal Grants

- Health Resources and Services Administration
- United States Department of Agriculture

Private Grants

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- Davis Family Foundation
- Elmina B. Sewall Foundation
- Harvard Pilgrim Health Care
- Health Equity Alliance
- Institute for Healthcare Improvement
- Maine Cancer Foundation
- Maine Economic Development Fund
- Maine Health Access Foundation
- Maine Oral Health Funders
- Stephen & Tabitha King Foundation
- United Way of Mid-Maine
- United Way of Kennebec Valley

Donations

- MaineGeneral's Farms, Forks & Friends annual fundraiser

Purpose

The purpose of this report is to describe MaineGeneral Health's (MGH) progress of its Community Health Implementation Plan (CHIP) for Fiscal Year 2019 (July 1, 2018 – June 30, 2019). These priorities were developed in collaboration with the other major health care systems in the state, the Maine Center for Disease Control and Prevention (Maine CDC), and through a series of community forums designed to reach the public, including the underserved and vulnerable populations. MGH's FY17-FY19 Community Health Needs Assessment (CHNA) priorities were:

- Chronic Disease Prevention and Management
- Obesity Prevention
- Tobacco Use and Exposure
- Substance Use Disorder
- Access to Care

By collecting and sharing data on the goals and objectives for each of our five priorities, we hold ourselves accountable for our impact on community health in our region. We also hope this information is useful to our community partners in their efforts to improve the health and well-being of people in the Kennebec Valley.

Melissa Emmons, Alicia Rice and Jane Allen host a table of information and resources at the Healthy Kids Day event at the Alfond Youth & Community Center in Waterville

Annual Report

Chronic Disease Prevention & Management

Goal 1

Prevention and management of chronic disease (diabetes, cardiovascular disease and cancer) via health system strategies

Goal 2

Prevention and management of obesity via physical movement and healthy eating policies, programs and services

Strategies/Activities: Chronic Disease, Cancer and Obesity
Use MaineGeneral Outpatient Staff Education to develop outpatient clinical staff education plan to ensure a competent workforce to implement population health strategies
Expand clinical community linkages to chronic disease risk and referral to new evidence-based services and resources to improve health
Expand and sustain the use of Community Health Workers in linking patients and practices to chronic disease management prevention and treatment resources in the MGH service area
Expand the Hub model to serve the Central Public Health District (CPHD) Somerset and Kennebec Counties.
Use EMR to identify patients with or at risk for chronic disease who are appropriate for all prevention and healthy living programs
Partner with community-based organizations to expand health education delivery sites throughout CPHD and increase capacity to offer evidence-based programs in reference to increasing the number of coaches trained to offer classes
Prioritize high utilizers with diabetes, COPD and cardiovascular disease for care management interventions
Expand and sustain evidence-based healthy cooking and eating and physical movement programs and group health coaching
Increase collaboration with community agencies such as Alfond Youth & Community Center, Kennebec Valley YMCA, Spectrum Generations, Healthy Northern Kennebec and Good Shepherd Food Bank to ensure obesity prevention programs are sustained in the community

Impact in FY 19

250

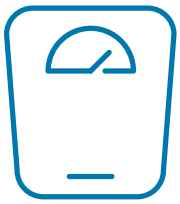
clinical & non-clinical staff participated in outpatient education trainings

700

referrals received from practices for chronic disease prevention & management services*

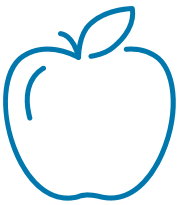
3,300

enrolled in chronic disease prevention & management services



7.6%

average weight loss for Diabetes Prevention Program participants



145

healthy living classes offered

26

class delivery locations offered where people live, work & play outside of the health care system

40

trained lifestyle coaches who deliver chronic disease prevention & management programs

230

people scheduled a colonoscopy

* Diabetes Prevention, Chronic Disease Self-Management, Tobacco Cessation, Healthy Living classes, Needle Exchange, Drug Overdose Prevention, Oral Health, Primary Care, Women, Infants and Children Nutrition Program, Transportation

Goal 3

Reduce lung disease mortality, by reducing disease risk factors for COPD and lung cancer via primary care and community-based strategies

Strategies/Activities: Tobacco Use & Exposure
Expand tobacco exposure screening and referrals to lung disease risk reduction and screening services via primary care and community outreach
Connect at-risk patients from MGH primary care practices and community settings to cessation, primary care, prevention services and lung cancer screening (i.e. use of Community Health Workers)
Educate primary care practices on MGH lung cancer screening program process, resources and follow-up support, including tobacco cessation
Establish standard primary care workflows, screening/referral and documentation for tobacco treatment and cessation

Impact in FY 19

1,200
patients age 55 and older received a LDCT scan

297
at-risk patients took a lung-cancer risk reduction action*

135
referrals for tobacco cessation

* Maine Tobacco Helpline referral, testing home for radon/arsenic, screening for lung cancer

Community Health Worker Mark Bourassa and Radiology Technican Brandon Colby prepare for a patient

Social Determinants of Health

Goal

Increase access to primary care, food, oral health and mental health services

Strategies/Activities: Social Determinants of Health
Expand Prevention & Healthy Living HUB staffing to support linking Emergency Department and Express Care patients with no primary care physicians to appropriate follow-up and primary care and staffing the MGH Info Line
Partner with Good Shepard Food Bank (GSFB) to conduct food insecurity screening at point of care and provide emergency food packs to those in need
Expand and sustain efforts to increase enrollment of at-risk children in WIC (Womens, Infants & Children) nutrition programming
Expand use of Community Health Workers to address access-to-care barriers related to medical care and oral health
Implement collaboration strategies and referrals among oral health service providers and primary care to ensure dental health service access to children up to age 9 and pregnant women
Participate in public transportation planning process to address transportation barriers to ensure access to prevention and medical care services

Impact in FY 19

770

ED & Express Care patients linked to primary care

2,700

people served monthly by WIC on average

7,900

patients screened for food insecurity; 20% screened positive

52%

of farmer's market checks distributed to WIC participants were used

610

patients linked to community & state nutrition resources

240

children and pregnant women linked to a dental home through Community Health Worker intervention

290

patients given an emergency food bag, equaling 3,500 lbs of food

6

patients assisted with transportation to programs and classes

Substance Use

Goal

Reduction in overdose mortality by implementation of health system strategies reducing the number of pain prescriptions per capita, substance use risk screening and provision of treatment in primary care

Strategies/Activities: Substance Use Disorder
Establish a comprehensive medical staff plan for opiate prescribing, pain management and risk reduction, opiate treatment of patients and prescription of naloxone
Expand medication-assisted treatment capacity by providing provider and primary care office staff training
Implement overdose prevention and naloxone education in all MaineGeneral clinical settings targeting patients and families at increased risk
Implement overdose prevention and naloxone education in all MaineGeneral clinical settings targeting patients and families at increased risk
Examine underlying stigmas of Opioid Use Disorder (OUD) that impact both individuals accessing services and availability of treatment for providers

Impact in FY 19

22

practices in the Kennebec Region Health Alliance offered opioid treatment services

144

free Narcan kits distributed to MaineGeneral practices, departments & Emergency Department

10

medical staff trained to offer office-based opioid treatment services

650

people attended community overdose prevention events/ activities

54

medical staff offered office-based opioid treatment services

170

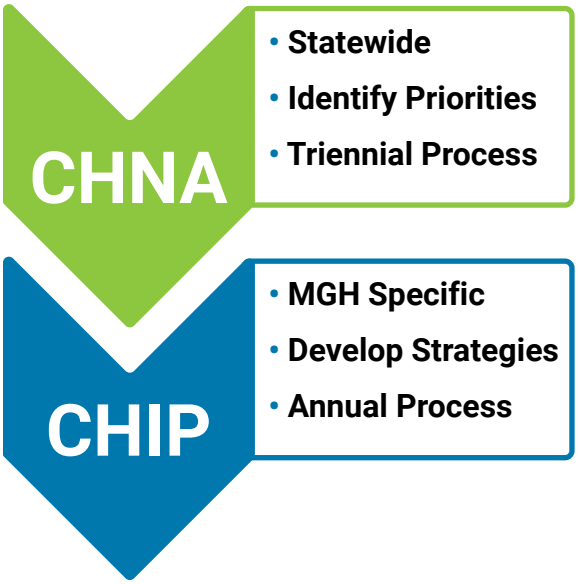
people used needle exchange services

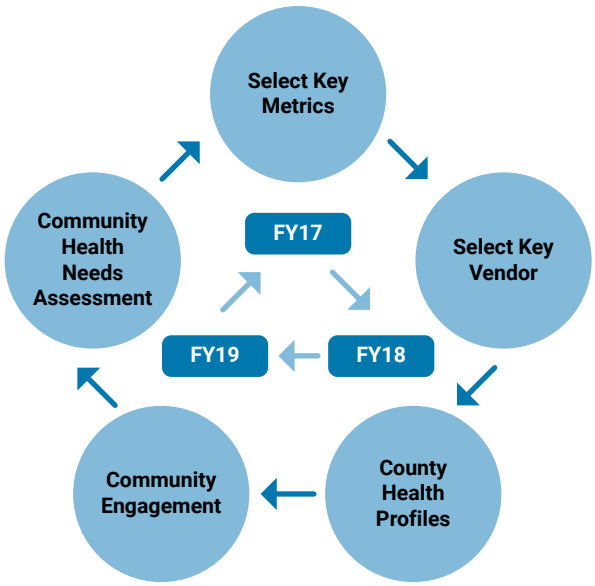
767

patients received office-based opioid treatment services

Community Health Needs Assessment Update

The Maine Shared Community Health Needs Assessment process was completed during this reporting period. MaineGeneral played a leadership role in hosting two community forums in Kennebec and Somerset Counties, in October 2018. These forums engaged members of the community to identify their top health concerns. Additionally, key informant interviews were completed statewide to engage stakeholders working with underserved populations.



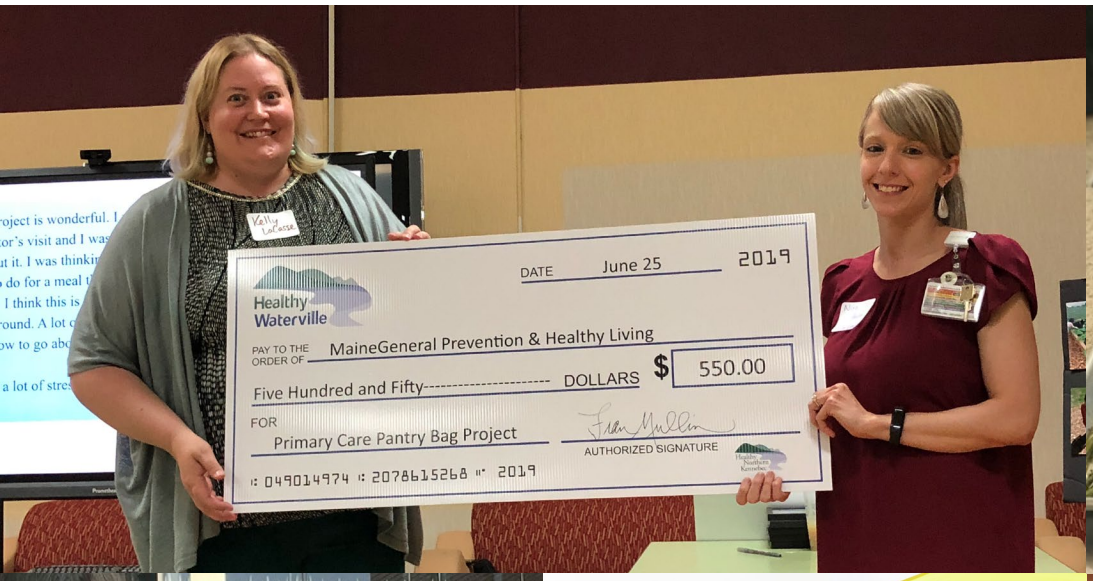


Based on the community's top health concerns and internal engagement with MaineGeneral leaders and medical staff, we decided on the following community health priorities for the next three years (2020 - 2022).

Health Priority	Goal
Chronic Disease Prevention and Management (cancer, diabetes, heart disease, tobacco)	To improve the prevention and management of chronic disease to reduce incidence
Mental Health	To further the integration of mental health and physical health to increase well-being and quality of life
Physical Activity, Nutrition and Healthy Weight	To improve access to prevention programs throughout the community to reduce the incidence of chronic disease
Social Determinants of Health (access to care, food insecurity, transportation)	To enhance health care system capacity and community partnerships in order to address social determinants of health for populations served
Substance Use	To improve the prevention, screening, management and treatment of substance use within an integrated care delivery network

Conclusion

In summary, MGH continues to devote resources and leadership to promoting community health and well-being in the Kennebec Valley. However, much work remains for MGH and our community partners. In light of the need for prevention services and challenges to public health funding, MGH leadership is committed to the continued development of strategies and grant opportunities to sustain the many efforts listed throughout this report.

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