

Community Health Strategy

Addressing Community Health Needs Fiscal Year 2020-2022

**Northern Light
Blue Hill Hospital**



**Northern Light
HealthSM**

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Introduction

Northern Light Health and our more than 12,000 employees care deeply about our neighbors and communities. Northern Light Health member organizations work hard to understand and address priority needs. We meet regularly with community partners to plan and implement local solutions that make it possible for people in our communities to lead healthier lives. By working together, we promote a culture of stewardship and foster vibrant communities.

Northern Light Blue Hill Hospital is committed to shaping health improvement efforts in its service area based on sound data, personal and professional experience, and community need. Through collaborative efforts, Northern Light Blue Hill Hospital creates healthier communities through the provision of services, resources, and programs within and beyond the walls of the hospital.

About Northern Light Health

At Northern Light Health, we're building a better approach to healthcare because we believe people deserve access to care that works for them. As an integrated health delivery system serving Maine, we're raising the bar with no-nonsense solutions that are leading the way to a healthier future for our state.

As a statewide integrated healthcare system serving Maine, we provide care to people from Portland to Presque Isle and from Blue Hill to Greenville. We are comprised of nine member hospitals with 584 long-term beds, a single physician-led medical group, eight nursing homes, five emergency transport members, 37 primary care locations, and we employ more than 12,000 people in Maine.

About Northern Light Blue Hill Hospital

Originally donated by Mrs. F.B. Richards in 1922, Northern Light Blue Hill Hospital is committed to improving the health of the communities we serve. Our Blue Hill community is a beautiful place, and the people who live here deserve the best care possible, as close to home as they can be.

At Northern Light Blue Hill Hospital, we listen to our patients, and we also use community health data, like that collected in our Community Health Needs Assessment, to best serve our communities.

We welcome input from various groups and always respond to specific requests from our community partners, including local schools and nursing homes, and the Parker Ridge Retirement Community.

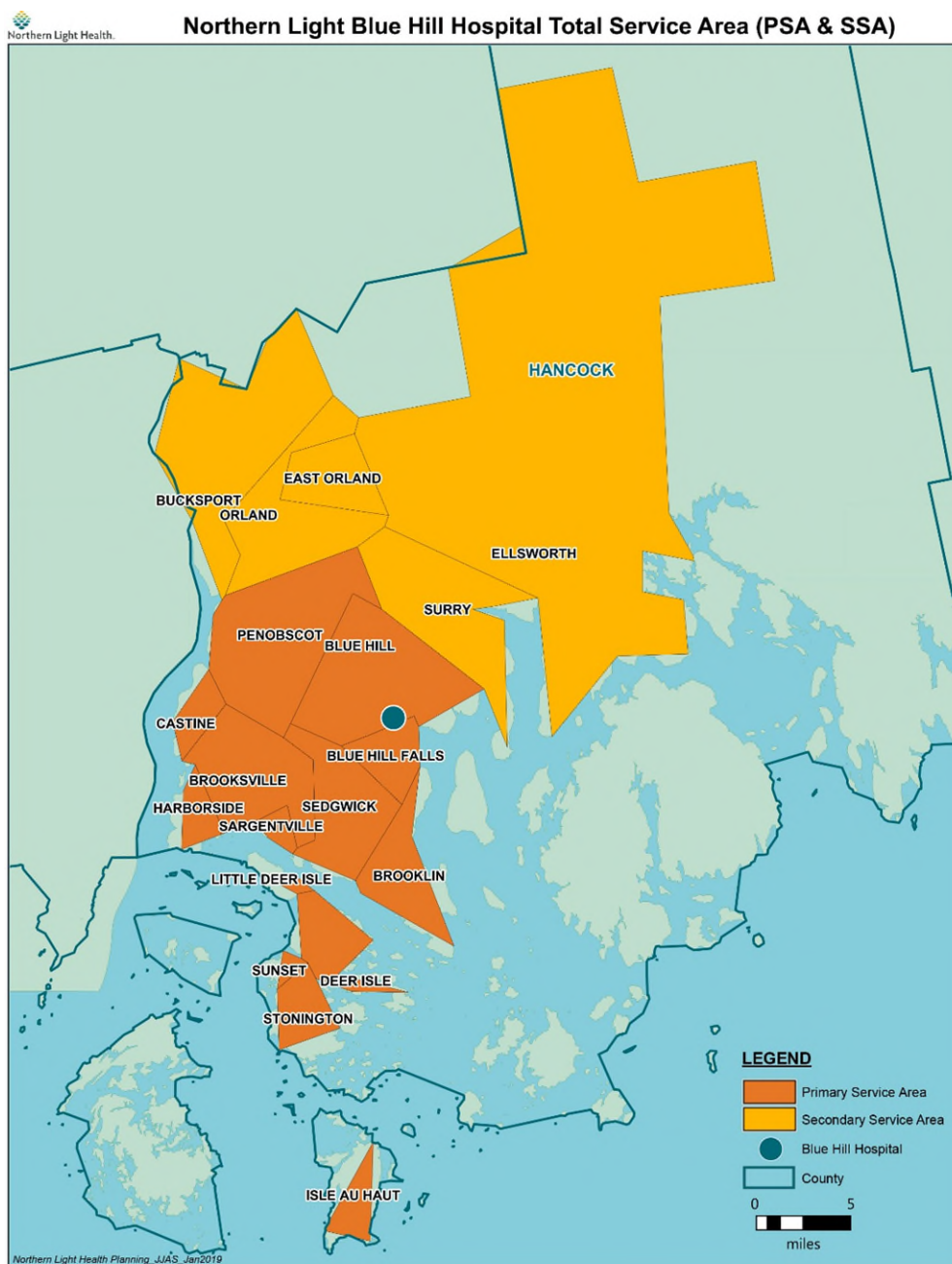
We collaborate with organizations including Healthy Peninsula and Healthy Acadia to deliver educational programs to the people we serve. These provide a significant community benefit at no cost to our local friends and neighbors.

Working closely with our charity care patients, we identify programs that will cover their healthcare costs. When no coverage is available, we offer assistance programs to help ensure that every patient has access to the medical care they need and deserve.

We have outreach activities to keep our communities in the best health possible, including blood pressure screenings, presentations on nutrition, the annual Women’s Wellness Fair, early childhood development health fairs, and talks by our physicians and other providers around the region.

Definition of Community Served

Located in Blue Hill, Maine, Northern Light Blue Hill Hospital has a service area comprised of both primary and secondary service areas, together referred to as the total service area. Total service areas (TSA’s) are developed by the Northern Light Health Planning department based on neighboring zip codes from which a majority of a hospital’s inpatient admissions originate. TSA’s can sometimes overlap due to hospital locations or because of the specialty services provided by the hospitals.



Demographic Data		
HANCOCK COUNTY		
	Percent	Number
American Indian/Alaskan Native	0.4%	211
Asian	1.0%	518
Black/African American	0.6%	320
Hispanic	1.3%	711
Some other race	0.0%	19
Two or more races	1.7%	938
White	96.3%	52,462
County population	54,483	

Social Determinants of Health Data	
HANCOCK COUNTY	
Median household income	\$50,037
Unemployment rate	4.7%
Individuals living in poverty	12.1%
Children living in poverty	15.5%
65+ living alone	46.2%
People living in rural areas	90.1%
Food insecurity	15.3%

Addressing Community Health Needs

Shared Community Health Needs Assessment

In 2019, Maine’s four largest healthcare systems – Northern Light Health, Central Maine Health Care, MaineGeneral Health, and MaineHealth – as well as the Maine Center for Disease Control and Prevention, an office of the Maine Department of Health and Human Services (DHHS) partnered to research and publish a shared Community Health Needs Assessment (Shared CHNA). The Shared CHNA provides a comprehensive review of health data and community stakeholder input on a broad set of health issues in Maine. The Shared CHNA data were made widely available to the public, as community engagement forums were held across the state, gathering additional feedback on priority issues and opportunities for community health improvement. These reports and the community input received are fundamental to achieving our goal of partnering with community, public health entities, and accountable care networks to improve the health and well-being of the communities we serve.

Results of the 2019 Shared CHNA along with community input were used to inform the development of this three-year Community Health Strategy by Northern Light Blue Hill Hospital. The efforts identified within help demonstrate our commitment to our community, as we provide benefits reflective of our mission and tax-exempt status. These benefits include a focus on the clinical, social, and environmental factors that influence the ability of people to lead healthier lives.

Community Health Strategy

This Community Health Strategy was developed with input from community stakeholders including those who serve priority populations, local Public Health District Liaisons, local business leaders, and community advocates.

Priorities were selected after weighing the severity of each priority area, availability of known and effective interventions, determination that the priority area was un-addressed or under-addressed, and community collaborations underway with Northern Light Blue Hill Hospital.

Northern Light Blue Hill Hospital reserves the right to amend this Community Health Strategy as circumstances warrant. For example, certain community health needs may become more pronounced and require enhancements or a refocus to the selected priorities of focus.

Process and Methods for Priority Selection

The community health strategy was developed by a planning team consisting of members both internal and external to our organization. The planning team included representatives with knowledge and insight of the communities served. Northern Light Blue Hill Hospital selected key priorities and strategies based on the county CHNA report, which includes quantitative health profile indicators and qualitative prioritization of need derived from a community engagement process. In addition, shared system-wide priorities were identified in the areas of Substance Use and Social Determinants of Health for all Northern Light Health members. These priorities were identified as shared priorities based on a selection process which considered a review of county level priorities across the state as well as local readiness and capacity to address these needs in partnership with local communities.

Members of Northern Light Blue Hill Hospital's Community Health Strategy team included individuals representing the following positions:

- Director of Communications, Northern Light Blue Hill and Northern Light Maine Coast Hospitals
- Social worker, Northern Light Blue Hill Hospital
- Director of Physician Practices, Northern Light Blue Hill Hospital
- RN, Northern Light Blue Hill Hospital
- Manager, Nutrition Services, Northern Light Blue Hill Hospital
- Senior Physician Executive, Northern Light Blue Hill Hospital
- Director of Primary Care Clinical Quality, Northern Light Blue Hill Hospital
- Director of Rehabilitation Services, Northern Light Maine Coast Hospital
- Director of Quality Management, Northern Light Maine Coast Hospital
- Healthy Peninsula: Director; Board Chair; and project managers
- Healthy Acadia: Executive Director, Food Programs Director, and Community Health Director
- Peninsula Ambulance: Director and EMS Coordinator
- Blue Hill Heritage Trust, Development Director
- Healthy Island Project, Executive Director

The following criteria were used for the health need selection process:

- Shared CHNA prioritization: How the health priority rank in the Shared CHNA
- System-wide priority areas of work as determined by the Community Health Council
- Ability to leverage local community assets: Identification of potential community partnerships to engage in order to address the priority need, or to build on current programs, emerging opportunities, or other community assets
- Expertise: Northern Light Blue Hill Hospital experts and local partnership experts in various priority areas
- Feasibility: Northern Light Blue Hill Hospital has the ability to have an impact given the community benefit resources available

Annually, our internal team will convene to determine if changes need to be considered in order to best address the priority health needs of our community.

NOTE: There were no written comments received related to the most recently conducted CHNA and Community Health Strategy for inclusion in this report.

Evaluation Efforts

Northern Light Blue Hill Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices we plan to document and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work. These quarterly reports will inform our fiscal

year-end Progress Report to Our Community that will be made publicly available on our community health strategy web page.

Feedback Opportunity

Contact communitybenefits@northernlight.org with feedback on this report.

Approval from Governing Board

Northern Light Blue Hill Hospital's Community Health Strategy and Community Health Needs Assessment (CHNA) were reviewed by the hospital's governing board and a resolution was made to approve and adopt both the Shared CHNA and the Community Health Strategy on May 30, 2019.

Selected Priorities of Focus

Priority #1: Social Determinants of Health

Rationale

A community's health can be determined in part by access to social and economic opportunities, the safety and cleanliness of environments, and the resources available in homes, neighborhoods, and communities. These social determinants of health are the conditions in which people are born, live, work, and play, and affect a wide range of health and quality of life outcomes. Examples of social determinants include socioeconomic status, availability of safe housing, education, access to healthcare services, and food insecurity. Over the past two decades, a large and compelling body of evidence has revealed that these factors play a powerful role in shaping health. This has resulted in a greater understanding that medical care is not the only influence on health and suggests that traditional healthcare models may not be enough to adequately improve health outcomes or reduce health disparities without also addressing how people live.

The Northern Light Blue Hill Hospital's Community Health Strategy team has identified Social Determinants of Health as a priority need for our community. There are substantial local community assets and Northern Light Blue Hill Hospital has assets available to be leveraged in support of this need. Also, there are many evidence-based or promising approaches to address the need for interventions on the many facets of Social Determinants of Health. Finally, Social Determinants of Health rated as a high priority to the community and our Northern Light Health system.

Intended action to address the need

We intend to take the following actions in some capacity during this three-year cycle to address this need in our community: understand barriers to social determinants screening, identify best practices in screening (including in community paramedicine setting), assess full integration of the screening tools in EHR, develop screening workflows across relevant care settings, and work with institutional and community resources to address referral resources to meet identified needs.

Anticipated impact of these actions/expected outcomes

We anticipate that the result of these efforts will increase our understanding of social determinants of health needs in our community, to make it easier and more effective for care teams to screen patients consistently, to offer meaningful help to patients in need by connecting them with effective community resources, and to ultimately improve the health of the communities we serve.

Programs and resource allocation

We plan to dedicate necessary Northern Light Blue Hill Hospital internal resources in the form of time devoted to annual community health improvement (CHIP) planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

Planned collaborations

We will continue to partner closely with regional partners including Northern Light Maine Coast Hospital and community health organizations including Healthy Peninsula, Healthy Acadia, and Blue Hill Heritage Trust on an ongoing basis to coordinate plans and activities and to maximize the impact of our CHIPs.

Plan for measuring impact

Northern Light Blue Hill Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches, and resources used, partners engaged, and highlights related to this priority area of work. For example, methods of measurement might include the number of screenings performed, referrals completed, or how many projects directly related to the priorities selected were completed and how many collaborative partnerships happened in the process. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage.

Population of focus

Our population will include patients/community members of all ages, with the intention to particularly identify and reach people with the highest need for support and resources, and highest risk for isolation.

Priority #2: Substance Use

Rationale

Substance Use, including alcohol, tobacco, and other drugs, have a major impact on individuals, families, and communities. Alcohol misuse, smoking and tobacco use cause or increase risk of many diseases, such as cancer, heart disease, diabetes, and respiratory conditions. The effects of substance use often result in social, physical, mental, and public health problems, including domestic violence, child abuse, accidents, crime and suicide. Substance use is now understood to be a complex disease of the brain and body, requiring long-term attention and treatment just like any other chronic illness. There are many effective evidence-based strategies that communities, including healthcare organizations and providers, may employ to prevent, identify, and treat substance use disorders.

The Northern Light Blue Hill Hospital's Community Health Strategy team determined it was feasible to address this need. There are substantial local community assets and Northern Light Blue Hill Hospital has assets available to be leveraged in support of this need. Also, there are many evidence-based or promising approaches to address the need for substance use interventions. Finally, substance use rated as a high priority to the community and Northern Light Health.

Intended action to address the need

We intend to take the following actions to address this need in our community: assess and improve screening practices, strengthen the availability of resources within our practices (and in partnership with outside resources) for helping patients with substance use disorders, develop and implement workflows that support ease of screening, management and referral, and participate in community education.

Anticipated impact of these actions/expected outcomes

We anticipate that our efforts will result in improved identification of people in need, improved access to substance use treatment services, and thus ultimately improve the health of the people we serve and the community at large.

Programs and resource allocation

We plan to dedicate necessary Northern Light Blue Hill Hospital internal resources in the form of time devoted to annual CHIP planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

Planned collaborations

We will continue to partner closely with regional partners including Northern Light Maine Coast Hospital and the Downeast Treatment Hub, and community health organizations (including Healthy Peninsula and Healthy Acadia) on an ongoing basis to coordinate plans and activities and maximize impact of our CHIPs.

Plan for measuring impact

Northern Light Blue Hill Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work. These may include tracking screenings performed, referrals completed, numbers of patients being treated with Medication Assisted Treatment, naloxone prescriptions dispensed, or community programs completed/and how many collaborative partnerships happened in the process. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage.

Population of focus

The population of focus will be adolescents and adults within our community, with emphasis on people identified as being at risk for, or currently affected by, substance use disorders.

Priority #3: Access to Care

Rationale

We recognize that people with poor access to healthcare are at increased risk of a negative health outcome. Access to care was specifically identified as an important priority in Hancock County during the 2019 Community Health Needs Assessment process and was also identified in two recent community health surveys conducted by Healthy Peninsula. In our rural area, access can be negatively affected by a number of factors including transportation challenges, lack of health insurance, long wait times for certain important specialty services, health system challenges in recruiting and retaining clinical staff and primary care providers in very rural areas (in the setting of national shortages or primary care providers and clinical staff), and lack of access to technology (high-speed internet connections) that could facilitate some types of remote services and electronic interactions with health records and care team. Social isolation, health limitations that make leaving the home challenging (like frailty, fall risk, impaired mobility, vision and hearing loss etc.), and prevalence of occupations that make it difficult to seek care during traditional business hours, are also factors.

The Northern Light Blue Hill Hospital's Community Health Strategy team determined it was both important and feasible to address this need. There are substantial local community assets and Northern Light Blue Hill Hospital has assets available to be leveraged in support of this need. Successfully improving access to care in our community is expected to benefit people of all ages, and all demographic categories, with impact on the most vulnerable.

Intended action to address the need

We intend to address access to care in some capacity during this three-year cycle across a broad range of needs

that may touch upon patient populations, types of services, including mental health, diabetes, community paramedicine, palliative care, employee health, and women's and men's wellness.

Anticipated impact of these actions/expected outcomes

We anticipate that our efforts will result in improved access to a variety of important services, and thus in improved health for the people we serve and the community at large.

Programs and resource allocation

We plan to dedicate necessary Northern Light Blue Hill Hospital internal resources in the form of time devoted to annual CHIP planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

Planned collaborations

We will continue to partner closely with regional partners including Northern Light Maine Coast Hospital and other Northern Light Health practices, community health organizations (including Healthy Peninsula and Healthy Acadia), local community education, Emergency management Services, Northern Light Beacon Health, and other partners to be identified based on CHIP specifics, on an ongoing basis, to coordinate plans and activities, and maximize impact of our CHIPs.

Plan for measuring impact

Northern Light Blue Hill Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work that may include tracking the number of programs offered, referrals, or people directly impacted, for example. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage.

We will identify measuring strategies appropriate to the finalized access to care related annual CHIP plans.

Population of focus

Patient and community population at large, with emphasis on people at high risk for barriers to access including older adults, the uninsured, people living in poverty, and people with a high burden of chronic mental health or physical illness.

Health Priorities Not Addressed

Northern Light Blue Hill Hospital considered all priorities identified in the Shared CHNA, as well as other sources, through an extensive review process. While the full spectrum of needs is important, Northern Light Blue Hill Hospital is currently poised to focus only on the highest priorities at this time. Priorities not selected, due to a variety of reasons are listed below:

- Mental Health - Northern Light Blue Hill Hospital has operationalized numerous mental health protocols in many our practices. Including, but not limited to the use of telepsychiatry services and licensed clinical social workers (LCSW) within our primary care sites, routine screenings for depression and suicide risk assessments with associated action plans for patients positively screened, LACE scores (identifies patients that are at risk for readmission or death within thirty days of discharge) across inpatient and outpatient sites of care include behavioral health diagnoses which are then flagged to primary care nurse care managers, a medical social worker who covers both primary care and inpatient settings, and an embedded LCSW who provides services to our local high school. In addition, our Access to Care priority plans will augment mental health access.

Therefore, due to our current and ongoing engagement in a number of mental health initiatives, we have chosen to focus our efforts on other priority areas of need.

- Older Adult Health/Healthy Aging - Northern Light Blue Hill Hospital is currently engaged in numerous Elder Health and Healthy Aging initiatives in our community inclusive of the following initiatives, with whom we collaborate with Healthy Peninsula (HP), a local not for profit agency focused on community health needs such as “Age-Friendly Coastal Communities Collaborative,” “Choices That Matter” (re: Advance Care Planning, end-of-life issues), food insecurity, healthy eating (lunches, Magic Food Bus, etc.), and Catalyzing Rural Healthcare Transformation (MEHAF grant focused on Community Paramedicine). Blue Hill Heritage Trust is also actively addressing Age Friendly Access to exercise and nature in our community through accessible trails in the community, Northern Light Blue Hill Hospital participates in planning and supporting this work. We also provide ongoing cancer screening and chronic disease screening through our Accountable Care Organization and population health activities in primary care; and the Northern Light Palliative Care service line available now in Hancock County. In addition, our Access to Care and Social Determinants of Health priority plans will augment this priority area. Therefore, due to our current and ongoing collaborative work and initiatives focused on elder health and healthy aging, we have chosen to focus our efforts on other priority areas of need.

Conclusion

Northern Light Blue Hill Hospital is thankful for the participation and support of our community members and many area organizations in the Shared CHNA process and for contributing their knowledge of local community health needs. Through existing and future partnerships, collaborative efforts will be essential in addressing the identified community health strategies prioritized within.

Northern Light Blue Hill Hospital will engage in another Shared CHNA in 2022 and looks forward to ongoing community participation in these important efforts.

Appendix

Evaluation of Impact

Progress report on selected priorities from Northern Light Blue Hill Hospital's last (2016) Community Health Needs Assessment.

Northern Light Health and Northern Light Blue Hill Hospital are committed to promoting a culture of community stewardship, and partnering together with community stakeholders to address high priority health issues. In order to do so effectively, we regularly monitor the impact of our community health efforts, and make this information widely available to our communities in the form of annual Community Benefit statements, and this triennial Community Health Strategy report. The following annual Progress Report to Our Community provides a summary evaluation of impact of the actions taken by Northern Light Blue Hill Hospital to address community health priorities adopted in 2016.

Measuring and reporting on progress is critical to making a difference in the communities we serve, and in the lives of those we care for. The following annual Progress Reports to Our Community are provided for:

- Progress Report to Our Community FY17
- Progress Report to Our Community FY18
- Progress Report to Our Community FY19

For additional information, visit <https://northernlighthealth.org/Community-Health-Needs-Assessment/2016-CHNA-Reports/Community-Health-Strategy>

Progress Report to Our Community

Addressing Community Health Needs

Fiscal Year 2017



2019



2018



2017



Blue Hill Memorial Hospital

FY 2017 Progress Report Priority 1: Obesity (Physical Activity and Nutrition)	
Objective	Obesity - Increase the percentage of current BMI management plans among PPC ACO patients with abnormal body mass index (BMIs) for age from 91% to 94% by September 1, 2017.
Status	In Progress
Approaches taken and resources used	In fiscal year 2017 (FY17), we offered high quality weight-related community health programming including an annual Women’s Wellness event, 5K Fun runs, and programs offered by hospital departments throughout the year. Changes with internal reporting mechanisms posed challenges for the originally identified metrics to be tracked. However, BHMH continued its efforts to engage patients in BMI management plans who exhibited abnormal BMIs.
Partners engaged	Blue Hill Memorial Hospital partnered with the following entities on this priority to improve obesity related outcomes in our area: <ul style="list-style-type: none"> • Eastern Maine Medical Center’s Way to Optimal Weight (WOW) • Let’s Go 5210 • Healthy Acadia • Healthy Peninsula • Beacon Population Health • Maine CDC (Downeast Public Health Council) • YMCA • EMHS information systems in our efforts
Highlights	Highlights for FY17 in weight-related programming were the 5K Race Series (co-sponsored with YMCA) and the Women’s Wellness June event.
Outcome Measure	55.8% BMI management plans among PPC ACO patients with abnormal BMIs (in the past year) at the time of their last office visit.
Project lead	Zoe Tenney, FNP, Primary Care Clinical Quality Director Mark Hankinson, VP Operations
Next Steps	In FY18, BHMH plans to continue tracking this metric through our Population Health program (Beacon ACO contracts). However, we plan to change our obesity focus to a collaborative effort with other community health organization in the Blue Hill Peninsula region in order to engage community members in upcoming obesity related efforts.

FY 2017 Progress Report Priority 2: Drug and Alcohol Abuse	
Objective	Drug and Alcohol Abuse - All non-exempt opioid treated patients will be weaned down to < 100 MME by July 1, 2017.
Status	Completed
Approaches taken and resources used	<p>In FY17, BHMH Primary Care practices in Blue Hill, Castine, and Stonington, committed to taking an organized, proactive, and compassionate, approach to helping our patients gradually taper down on opioid doses where appropriate. For patients taking greater than 100 morphine milligram equivalents (MME) per day, Maine State Law requires that doses be reduced to under 100 MME unless a valid exemption was identified (such as a patient on hospice care).</p> <p>During this process of helping patients safely taper, we pursued a number of strategies to encourage success in this challenging effort including: Monthly review with feedback to PCPs and managers regarding patients who need tapering plans put in place, extensive PCP and MA education re: opioid prescribing and laws, comprehensive PMP review program in all sites, completion of a comprehensive revision and update of the BHMH Controlled Substance Management policy, collaboration with Maine Coast Memorial Hospital and other affiliates to share best practices and policies, monthly emailed reminders to employed prescribers detailing Opioid-related CME opportunities, utilization of Licensed Clinical Social Worker and Nurse Practitioner telepsychiatry resources to support patients, and supporting two additional PCPs in getting their suboxone/MAT training.</p>
Partners engaged	<p>Blue Hill Memorial Hospital partnered with the following entities on this priority:</p> <ul style="list-style-type: none"> • Maine Medical Association • Acadia telepsychiatry NP • Maine Coast Memorial Hospital • Hancock County Regional Medical Group • Frenchman's Bay Orthopedics • Maine Medical Association • Maine Quality Counts • Acadia Hospital • Beacon Health
Highlights	We decreased our opioid prescribing by nearly 17,000 morphine milligram equivalents PER DAY over the course of FY17.
Outcome Measure	By the end of FY 2017, all non-exempt patients on opioid medications had been tapered to meet the requirements of Maine state law.
Project lead	Zoe Tenney, FNP, Primary Care Clinical Quality Director
Next Steps	In FY18, BHMH plans to retire the focus of the tapering program's objective and plan to focus on the opioid crisis through provider opioid education.

FY 2017 Progress Report Priority 3: Transportation	
Objective	All patients will be asked two questions about their transportation needs when they check out after a visit with their provider in all family practice clinics. Results will be tabulated monthly to document the percent of our patient population with transportation needs and to identify opportunities for further resource development.
Status	In Progress
Approaches taken and resources used	In FY17, BHMH developed a community Transportation Resource Guide. We reviewed existing local transportation resource guides from other community organizations and websites. Some of these had been developed in the past but not updated recently. We reached out to each listed Transportation provider to verify that the information was accurate and up to date, and developed a current, complete list which is now available on paper for patients.
Partners engaged	Blue Hill Memorial Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • Healthy Peninsula • Healthy Acadia • BHMH Community Relations, and practice managers • Over 15 local transport providers
Highlights	Completion of an accurate, comprehensive Transportation resource.
Outcome Measure	BHMH intended to track patient population in need of transportation options. In doing so, it was determined that there was a need for an updated resource guide. One accurate and comprehensive transportation resource guide was developed.
Project lead	Zoe Tenney, FNP, Primary Care Clinical Quality Director Mark Hankinson, VP Operations
Next Steps	In FY18, BHMH will continue working on our transportation objective by implementing the use of the resource guide across our hospital sites including primary care, emergency department, specialty settings, and the online “Community resource Guide” (hosted on the BHMH website).

FY 2017 Progress Report Systemwide Priority: Opioid Harm Reduction - Provider Education	
Objective	By 9/30/2017, increase the number of EMHS providers receiving education on Maine's new opioid prescribing law (LD 1646, An Act to Prevent Opiate Abuse by Strengthening the Controlled Substances Prescription Monitoring Program).
Status	In Progress
Approaches taken and resources used	In March 2017 BHMH sent out a baseline survey asking all providers if they have completed their three opioid continuing medical education (CME) hours. A follow up survey was done in July. Each month, email reminders were sent to all employed prescribers regarding the CME deadline reminder. The email also contained links to and information about available opportunities to complete their required hours. All information was also been shared with emergency department and hospitalist directors, although they are not formally included in this group of employed prescribers.
Partners engaged	Blue Hill Memorial Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • BHMH Medical Staff office • BHMH primary care and specialty managers • Beacon Health • Maine Quality Counts and Maine Medical Association (content) • Maine Coast Memorial Hospital colleagues
Highlights	Maine Quality Counts and the Maine Medical Association have been proactive in making high quality training readily available around the State. The medical staff has been actively engaged in opioid prescribing issues, and hospital and practice administration has been supportive. Collaboration between local hospitals has been outstanding. And most importantly, the majority of patients have done very well with gradual tapers.
Outcome Measure	42% (11 of 26 possible)
Project lead	Zoe Tenney, FNP, Primary Care Clinical Quality Director
Next Steps	In FY18, BHMH plans to continue with this objective to focus on the opioid crisis through provider opioid education.

FY 2017 Progress Report Systemwide Priority: Food Insecurity - Screen and Intervene	
Objective	Increase the number of patients screened for food insecurity from 0 to 50% of family practice patient population with office visits.
Status	Completed
Approaches taken and resources used	<p>In FY17, BHMH took the following approaches on this objective:</p> <ol style="list-style-type: none"> 1. Successful integration of a food insecurity screening into our standard office visit process at all three BHMH primary care locations. We now screen nearly all patients presenting for care, far above the 50% initial goal. Patients who screen positive are given information regarding local resources, and an emergency box of non-perishable food if appropriate. These boxes are provided by the Eastern Area Agency. 2. BHMH also provided the electricity to power temp-controlled storage (located in a large truck trailer housed on our campus) of food from the Healthy Acadia gleaning project and the Healthy Peninsula Magic Food Bus (programs that supply free food to local people in need). 3. Our Castine primary care site started a garden behind their clinic this summer, and fresh produce is given away to anyone in need. 4. BHMH hosted (provided food and employee volunteers) a free community meal once per month, all year, at the “Simmering Pot” held at the Blue Hill Congregational Church (this is a year round weekly community supper program). We served an estimated 1750 free meals during FY2017.
Partners engaged	<p>Blue Hill Memorial Hospital partnered with the following entities on this priority:</p> <ul style="list-style-type: none"> • Healthy Peninsula • Eastern Area Agency on Aging (provides emergency food boxes for patient/family in need, distributed directly from our sites). • “Simmering Pot” free meal each Monday (coordinated and provided by a local coalition including Blue Hill Congregational Church, Blue Hill Food Coop, Tree of Life Food Pantry and others)
Highlights	Emergency food boxes distributed to people with acute food insecurity, Simmering Pot meals, and the development of the Castine garden.
Outcome Measure	10,428 patients screened for food insecurity
Project lead	Director of Family Practice, Chief Medical Officer, Practice Managers
Next Steps	In FY18, BHMH will retire the tracking of this objective as it has now been “hard-wired” into our normal processes. We will focus on improving the nutritional content of food options offered at our foodservice venues at BHMH.

Fiscal Year 2018

Progress report to our community

Addressing community health needs



Progress report update

FY 2018 Progress Report

Priority #1: Obesity (physical activity/nutrition)

Objective: By September 30, 2018, Northern Light Blue Hill Hospital will sponsor or collaborate with community organizations to cosponsor six or more obesity-related events in the Blue Hill Peninsula community.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Blue Hill Hospital sponsored and participated in a wide variety of obesity related community programs and events. These events included Northern Light Blue Hill Hospital registered nurses partnering with our local Land Trust in an after school kids' club, Northern Light Primary Care, Stonington hosting a "Men's Health" event targeting self-employed lobstermen in the Deer Isle & Stonington community, co-hosting a free healthy meal ("Simmering Pot" program) on an ongoing, monthly basis, providing refrigerated food storage for food distribution to community members in need, co-hosting a race series with the YMCA, and bringing the expertise of our registered dietician and physical therapists to a lunchtime event in a local housing development targeting low-income seniors.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

Healthy Peninsula; Healthy Acadia; Blue Hill Consolidated School; The Bay School; Blue Hill Heritage Trust (land conservation group); Northern Light Primary Care, Stonington; Island Health and Wellness Foundation; Northern Light Blue Hill Hospital nursing, nutrition, physical therapy, quality, and cardiology departments, WOW Pediatric Obesity program; Northern Light Health department of Community Health, Northern; Northern Light Blue Hill Hospital Wellness Committee; community health providers across multiple types of practices (participated in women's health fair), YMCA.

Highlights: In FY18, Northern Light Blue Hill Hospital engaged a number of community partners to sponsor and co-sponsor a wide variety of community programs and events aimed at helping neighbors of all ages follow an active, healthy lifestyle.

Outcome Measure: In FY18, the outcome measure for this CHIP was achieved by Northern Light Blue Hill Hospital to sponsor or collaborate with community organizations to cosponsor six or more obesity-related events in the Blue Hill Peninsula community.

Project Lead: Zoe Tenney, FNP, Primary Care clinical quality director; Kelley Columber, director, Communications

Next Steps: In fiscal year 2019 (FY19), Northern Light Blue Hill Hospital will continue this important work and increase the number and variety of events we sponsor and participate in.

FY 2018 Progress Report

Priority #2: Drug and alcohol abuse

Objective: 100% of Northern Light Blue Hill Hospital-employed prescribers will have received their three hours of continuing medical education, or CME (opioid prescribing) by 12/31/2017.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Blue Hill Hospital Director of Primary Care Clinical Quality and Director of Physician Practices worked with all employed ambulatory prescribers and managers (in family medicine, orthopedics, surgery and women's health) to ensure that they had participated in three or more hours of opioid-related CME in accordance with Maine State Law.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

- Northern Light Beacon Health
- Maine Quality Counts
- Maine Medical Association
- Northern Light Health's community health and advocacy experts

Highlights: As healthcare providers, we have a responsibility to our patients and the community to provide safe, evidence-based, comprehensive and compassionate care to people using controlled substances, including opioids. An important element of providing this care involves staying up to date with current best practices. To that end, the medical staff at Northern Light Blue Hill Hospital diligently participated in opioid-related continuing medical education during 2017 and updated our policies, procedures, and workflows related to controlled substance management.

Outcome Measure: In FY18, 12 employed prescribers (representing all who were applicable) participated in three or more hours of continuing medical education related to opioid prescribing.

Project Lead: Zoe Tenney, FNP, director, Primary Care clinical quality; Mike Murnik, MD, senior physician executive; Tammy Dickey, director Physician Practices

Next Steps: In FY19, and on an ongoing base into the future, Northern Light Blue Hill Hospital will continue to make medical providers aware of opportunities for ongoing opioid-related CME and of relevant updates in Maine law and health system policy.

FY 2018 Progress Report

Priority #3: Transportation

Objective: By September 30, 2018, we will increase the number of Northern Light Blue Hill Hospital care sites offering local transportation resources to patients from zero to nine.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Blue Hill Hospital finalized the updated transportation resource guide, distributed 650 copies to the four family practice clinics, as well as 14 additional departments of the hospital, 10 town offices, and two community health organizations. Later in the year, we followed up with department managers and nurses regarding the use of the form and positive feedback was received.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

- Northern Light Blue Hill Hospital’s community relations department
- Patient Advisory Council
- Managers of ambulatory, emergency department, and in-patient departments
- Local community health organizations
- Local municipal offices

Highlights: Northern Light Blue Hill Hospital was pleased with the enthusiastic response to the form by managers, patients, and frontline staff. Feedback from managers and nurses included “Patients love it and I think it’s great too!”, “This is wonderful!”, and “....this is a big piece of needed resources!”

Outcome Measure: In FY18, the outcome measure for this CHIP achieved by Northern Light Blue Hill Hospital was to reach nine healthcare sites within Northern Light Blue Hill Hospital. We ultimately reached 29 locations; including town offices and community health organizations.

Project Lead: Zoe Tenney, FNP, director, Primary Care clinical quality; Kelley Columber, director, Communications

Next Steps: In FY19, Northern Light Blue Hill Hospital will continue to address patient’s transportation challenges, specifically by improving our support of and referrals to local paramedicine services that offer home-based, non-urgent EMS visits.

FY 2018 Progress Report

Systemwide priority: Healthy food access – healthy hospital food

Objective: Northern Light Blue Hill Hospital will reformulate three recipes to improve the nutritional content of food options offered at foodservice venues (cafeteria, vending, catering), U.S. DHHS and CDC’s Health and Sustainability Guidelines for Federal Concessions and Vending Operations Guidelines by September 30, 2018.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Blue Hill Hospital used the recently purchased software Computrition in collaboration with Northern Light’s community health staff and Healthcare Without Harm’s program- “Less Meat, Better Meat”

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

- Healthcare Without Harm
- Northern Light community health staff

Highlights: In FY18, Northern Light Blue Hill Hospital was able to reformulate three recipes to reduce the amount of animal protein while increasing vegetables and plant based proteins.

Outcome Measure: In FY18, the outcome measure for this objective was achieved by Northern Light Blue Hill Hospital who reformulated three recipes offered in its cafeteria which averaged 101 meals per day. Beef was the focus of two recipes and a reduction of chicken in the third recipe. Not only was saturated fat, cholesterol and sodium reduced, the cost reduction created by limiting animal-based protein allowed for an increase in quality and sustainability. For example, grass-fed beef purchased in Maine replaced conventional ground beef and organic beans replaced conventional beans.

Project Lead: Barb Haskell, CDM, CFPP- executive chef

Next Steps: In FY19, Northern Light Blue Hill Hospital will continue to work on food access through supporting “backpack programs,” which provide free food for children in need over the weekend during the school year, by working with schools, community health organizations, and families on the Blue Hill Peninsula.

Fiscal Year 2019

Progress report to our community

Addressing community health needs



Northern LightSM
Blue Hill Hospital

Progress report update

FY 2019 Progress Report

Priority #1: Obesity (physical activity and nutrition)

Objective: By September 30, 2019, Northern Light Blue Hill Hospital will sponsor or collaborate with community organizations to cosponsor 10 or more obesity-related events or programs in the Blue Hill Peninsula community.

Status: Completed

Approaches taken and resources used: In fiscal year 2019 (FY19), Northern Light Blue Hill Hospital offered many community obesity-related events including a Men's Wellness screening event in Stonington, women's heart health events in Blue Hill, and a monthly free meal at the Simmering Pot. We also wrote supporting letters for Blue Hill Heritage Trust's successful community garden grant application, co-sponsored a free community meal with them, providing free trail guides to guests, and delivered the keynote at the Land Trust's annual meeting on the role of the Trust in promoting community health. We provided in-person education to community volunteers regarding exercising safely in the roadway during spring roadside clean up in Sedgwick and Blue Hill, hosted annual Women's Wellness Fair with nationally known weight-loss expert Lori Schaeffer. Blue Hill Hospital's clinic in Castine grew vegetables on site to donate to families in need.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

Blue Hill Heritage Trust, Healthy Peninsula, Healthy Acadia, Blue Hill Hospital staff from the following departments: quality, medical staff, primary care in Blue Hill, Castine, and Stonington, community relations, rehabilitation, dietary services, social work/discharge planning, and town offices in Sedgwick and Blue Hill

Highlights: In FY19, Northern Light Blue Hill Hospital was pleased to continue to provide obesity-related programming to our communities, and work in partnership with other community organizations.

Outcome Measure: In FY19, Northern Light Blue Hill Hospital achieved completion of over 10 obesity-related events or programs in the Blue Hill Peninsula community.

Project Leads: Zoë Tenney, APRN, Director for Primary Care Clinical Quality and Kelley Columer, Director, Communications

Next Steps: In fiscal year 2020 (FY20), Northern Light Blue Hill Hospital will continue to offer and support these types of free events in our community. Because we have solidified these relationships with our community partners and operationalized provision of these types of programs, we did not select this area as a priority within our 2019 Community Health Strategy.

FY 2019 Progress Report

Priority #2: Drug and alcohol abuse

Objective: By September 30, 2019, increase the number of qualified Medication Assisted Treatment (MAT) prescribers who are currently treating MAT patients from 1 to 6

Status: In progress

Approaches taken and resources used: In FY19, Northern Light Blue Hill Hospital expanded access to treatment for people with opioid use disorders by increasing primary care MAT prescribers from one to four X-waivered providers, and from one to three primary care sites. We also developed and refined Cerner electronic health records (HER) workflows regarding controlled medication monitoring in alignment with System and State requirements, surveyed primary care providers to better understand their barriers and challenges related to MAT prescribing, re-educated staff and providers at all sites regarding controlled medication management policy and State law, and continued to keep prescribers informed of opportunities to complete their required opioid-related Continuing Medical Education (CME).

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

Northern Light Acadia Hospital, Northern Light Clinical Informatics and IS, Northern Light compliance and legal teams, Healthy Acadia, Downeast Treatment Center, Northern Light medical group leadership, Northern Light Blue Hill Hospital's medical staff members, medical staff office, and primary care clinic staff

Highlights: In FY19, Northern Light Blue Hill Hospital was proud to expand access to treatment for people with opioid use disorders by increasing primary care MAT prescribers as well as available locations.

Outcome Measure: In FY19, the outcome measure(s) for this CHIP by Northern Light Blue Hill Hospital was only partly achieved. We had intended to increase prescribers from 1 to 6 but succeeded in increasing only from 1 to 4.

Project Leads: Zoë Tenney, APRN, Director for Primary Care Clinical Quality and Mike Murnik, MD, Senior Physician Executive.

Next Steps: In FY20, Northern Light Blue Hill Hospital aims to further expand access to evidence-based treatment for people with opioid use disorders by helping more primary care providers successfully complete X waiver training and implementing Emergency Department-based MAT treatment initiation.

FY 2019 Progress Report

Priority #3: Transportation

Objective: By September 30, 2019, increase referrals from Northern Light Blue Hill Hospital's family practice offices to local community paramedicine programs by 10%.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Blue Hill Hospital worked in close partnership with Healthy Peninsula, three local ambulance services, and Maine Health Access Foundation to help expand access to community paramedicine services on the Peninsula.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

Healthy Peninsula, Age-friendly Coastal Communities partners (including Friends in Action, At Home Downeast, Healthy Island Project, Beth Wright Cancer Center, Surry Friends Association, and the Blue Hill Chamber of Commerce), Maine Health Access Foundation, Peninsula Ambulance, Memorial Ambulance, Castine First Responders, Blue Hill Hospital staff from the following department; social work, population health/quality, emergency department, discharge planning, social work, primary care, laboratory, and medical staff

Highlights: In FY19, Northern Light Blue Hill Hospital was proud to participate substantively in the development of expanded community paramedicine services on the Blue Hill Peninsula. In addition to external community partner work, we engaged with our emergency department and inpatient nursing leadership, the social work and discharge planning departments, the lab director, and registered nurses from all three primary care locations in the planning process. We have developed a workflow for identifying patients, making referrals, communicating results, engaging social work, and coordinating with community resources. We have completed changes to the electronic health record (EHR) so that we can place referrals specifically for community paramedicine, which will allow us to track referral data going forward. As a result of this work, and the efforts of our partners at Healthy Peninsula and the local ambulance services, community paramedicine services have become available to Blue Hill Hospital primary care patients all across the Peninsula, and access to skilled community health resource support (for helping people manage issues related to social determinants of health) had been significantly strengthened and formalized.

Outcome Measure: In FY19, Northern Light Blue Hill Hospital increased referrals for this service by over 10% and expanded the services to all three ambulance corps and all three primary care locations.

Project Leads: Zoë Tenney, APRN, Director for Primary Care Clinical Quality and Tammy Dickey, Director for Physician Practices

Next Steps: In FY20, Northern Light Blue Hill Hospital will continue to work on expanding patient access to care by increasing the number of patients referred annually to our paramedicine programs from approximately 25 to 45 in FY20.

FY 2019 Progress Report

Systemwide priority: Healthy food access – backpack program

Objective: By September 30, 2019, increase the number of elementary school-aged children on the Blue Hill Peninsula with access to the “backpack program” (provides free food for children in need over the weekend during the school year) to at least 36 families.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Blue Hill Hospital worked with the regional coordinator of the school backpack program to support the provision of food for children in need on the weekends. The food was donated by our local food pantry and delivered to the schools. During the summer months when school was not in session, we continued to facilitate the provision of free food to families in need through participation in the “Mainers Feeding Mainers” program. In this arrangement, our primary care office in Blue Hill shared free fresh produce from a local farm with an estimated thirty families.

Partners engaged: Northern Light Blue Hill Hospital partnered with the following entities on this priority:

Blue Hill Hospital’s dietary, social work, quality and medical staff departments, Tree of Life Food Pantry, Blue Hill Consolidated School, Blue Hill school board, George Stevens Academy, Nichols Day Camp, Healthy Peninsula, Mainers Feeding Mainers program, Good Shepherd Food Bank, and King Hill Farm

Highlights: In FY19, Northern Light Blue Hill Hospital was happy to achieve our goal of increasing access to healthy food for children in our region, while strengthening relationships with community partners including schools and local farms.

Outcome Measure: In FY19, Northern Light Blue Hill Hospital increased the number of families accessing healthy food to approximately 50.

Project Leads: Barbara Haskell, Manager, Food and Nutrition Services and Kelley Columber, Director, Community Relations

Next Steps: In FY20, Northern Light Blue Hill Hospital intends to continue to screen for food insecurity, to offer emergency food boxes directly from clinics to people in need, to expand the Mainers Feeding Mainers program over the summer to Castine and Stonington, and to continue to provide free refrigerated storage for the Magic Food Bus and other local food insecurity-related programs.

Conclusion

Northern Light Blue Hill Hospital continues work on identified priorities through the Community Health Strategy and is thankful for the participation and support of our community members and many area organizations for contributing their knowledge of local community health needs related to our priorities of action. Through existing and future partnerships, collaborative efforts are essential in addressing the identified community health strategies prioritized within.