

Community Health Strategy

Addressing Community Health Needs Fiscal Year 2020-2022

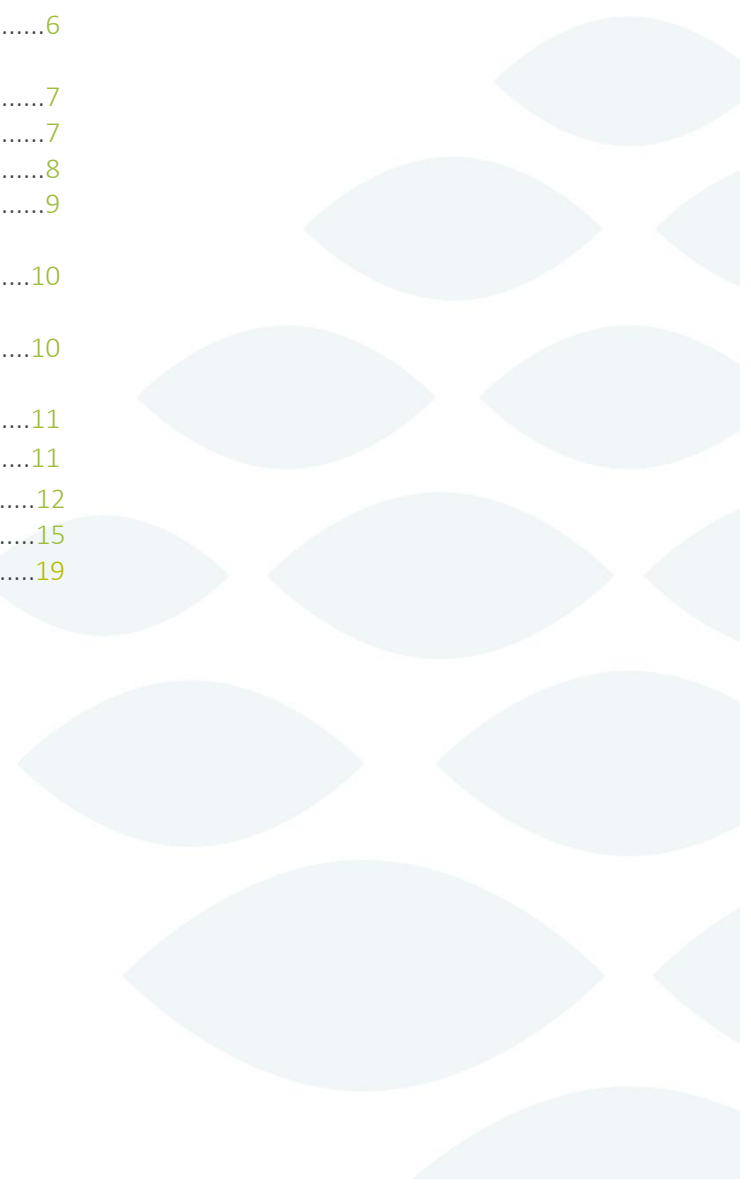
**Northern Light
Acadia Hospital**



**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 Acadia 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 Acadia 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.

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 Acadia Hospital

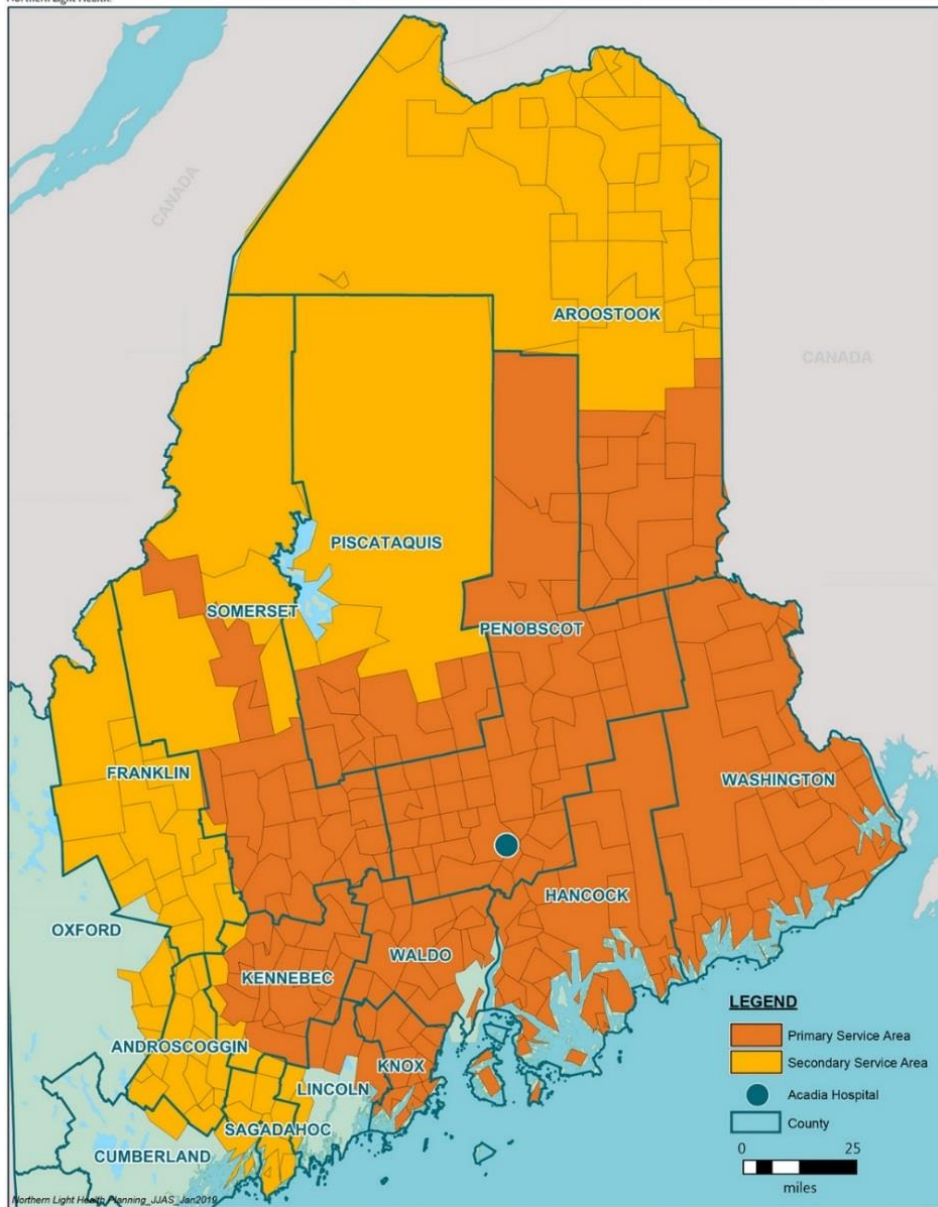
Northern Light Acadia Hospital is a psychiatric hospital in Bangor, Maine. Acadia provides inpatient and outpatient behavioral health services for children, teens, and adults while specializing in the treatment of mental illness and substance abuse.

Northern Light Acadia Hospital employs more than 700 professionals. For more than 25 years, Acadia has offered a full continuum of mental health services and an exceptional team of providers to support the needs of our community members. Acadia's mission is to empower people to improve their lives.

Definition of Community Served

Located in Bangor, Maine, Northern Light Acadia 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. Acadia patients are community members from all 16 counties in Maine.

Northern Light Acadia Hospital Total Service Area (PSA & SSA)



Demographic Data		
PENOBSCOT COUNTY		
	Percent	Number
American Indian/Alaskan Native	1.1%	1,751
Asian	1.1%	1,724
Black/African American	0.8%	1,174
Hispanic	1.2%	1,895
Some other race	0.2%	258
Two or more races	1.7%	2,571
White	95.1%	145,472
County population	152,978	

Social Determinants of Health Data	
PENOBSCOT COUNTY	
Median household income	\$45,302
Unemployment rate	4.3%
Individuals living in poverty	16.3%
Children living in poverty	18.3%
65+ living alone	44.5%
People living in rural areas	57.7%
Food insecurity	16.2%

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 Acadia 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 Acadia Hospital.

Northern Light Acadia 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 Acadia 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 Acadia Hospital's Community Health Strategy team included individuals representing the following positions:

- President
- Associate Vice President, Community Partnerships and Service Line Development
- Chief Medical Information Officer (CMIO) and Medical Director, Community Services

- Director, Communications

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 Acadia Hospital experts and local partnership experts in various priority areas
- Feasibility: Northern Light Acadia 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 Acadia 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 webpage.

Feedback Opportunity

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

Approval from Governing Board

Northern Light Acadia 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 April 24, 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 Acadia 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 Acadia 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

Initiate food insecurity screening protocol for clients in the Behavioral Health Home program to assess the extent of food insecurity on this population in order to later create a more personalized treatment approach which incorporates this social determinant of health.

Anticipated impact of these actions/expected outcomes

Caseworkers within Northern Light Acadia's Behavioral Health Home program will work with clients who have been identified as at risk for food insecurity.

Programs and resource allocation

Northern Light Acadia will utilize Information Systems to activate the screening tool. Staff will be trained in this tool. Data will be collected and impact on behavioral health outcomes reviewed.

Planned collaborations

Partnerships will be developed based on identified patient needs.

Plan for measuring impact

Northern Light Acadia 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 webpage.

Population of focus

The population is comprised of clients in Northern Light Acadia Hospital's Behavioral Health Home.

Priority #2: Substance Use

Rationale

Substance use, including alcohol, tobacco, and other drugs, has a major effect 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 Acadia Hospital's Community Health Strategy team determined that substance use was a priority area to address. Northern Light Acadia 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 our Northern Light Health system.

Intended action to address the need

Northern Light Acadia Hospital has just opened an Opioid Health Home program to further address opiate addiction challenges in northern, eastern, and central Maine. This program is evidence-based and wraps multi-disciplinary resources around individuals with opiate addiction whose challenges are complex enough that primary care practices may have difficulty engaging directly with the patient with Medication Assisted Treatment (MAT). The Opioid Health Home will provide daily Suboxone dosing to patients at Acadia's Narcotic Treatment Program until the patient is well stabilized and can be referred to primary care for continued MAT.

Anticipated impact of these actions/expected outcomes

Northern Light Acadia's Opioid Health Home will positively impact the opioid epidemic by providing safe and effective care for individuals struggling with opioid addiction.

Programs and resource allocation

Northern Light Acadia is committing administrative and multi-disciplinary clinical resources to develop this innovative model. It will continue to be a site that can teach and support the primary care community for the broadening and continuance of MAT in rural Maine. There will be 50 slots at any one time within this program available for people without health insurance. Northern Light Acadia also provides resources to help people complete applications towards acquiring health insurance and addressing barriers to recovery caused by various social determinants of health.

Planned collaborations

Collaboration partners shall include the State of Maine including its Office of Substance Abuse and Mental Health Services, regional primary care practitioners, and recovery and social service organizations.

Plan for measuring impact

Northern Light Acadia 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 webpage.

The percentage of negative drug screens will be a measure of impact, signifying patient stability in recovery.

Population of focus

Individuals with opiate addiction whose challenges are complex enough that primary care practices may have difficulty engaging directly with the patient with Medication Assisted Treatment (MAT).

Priority #3: Mental Health

Rationale

Mental health conditions, including depression, are leading causes of injury, illness, and disability in the United States and around the world. These illnesses are common and are caused by a complex combination of biological, psychological, and environmental factors. Untreated mental illness can result in severe health problems, including but not limited to heart disease and other chronic conditions, weakened immunity, social isolation, legal and financial problems, self-harm and harm to others, poverty, and homelessness. There is also a strong connection between mental illness and substance use, with more than one in four adults experiencing these co-occurring disorders. Limited healthcare options, lack of support, and fear of stigma may prevent individuals from seeking help, indicating an ongoing need to increase mental health awareness and address barriers to accessing mental healthcare.

The Northern Light Acadia Hospital Community Health Strategy team recognizes that addressing mental health needs is a priority for our community. Northern Light Acadia Hospital has resources available to be leveraged in support of this need. Furthermore, there are many options for evidence-based mental health interventions and services that promote appropriate and effective prevention, identification, and treatment for mental illnesses.

Intended action to address the need

Northern Light Acadia Hospital created a video campaign called, Acadia Hospital CARES (Child-Adolescent Resources and Educational Series). The videos address a variety of youth mental health topics, and are designed to be viewed primarily by adults who work or spend a lot of time with children and adolescents. Topics include suicide prevention, eating disorders, bullying, and LGBTQ issues. These videos will continue to be promoted and shared via social media and community and school presentations. Additionally, Acadia is developing CARES packages that will bring together multiple aspects of the video series and allow the hospital to deliver to interested schools and community agencies.

Anticipated impact of these actions/expected outcomes

By sharing these videos and related materials, Northern Light Acadia Hospital seeks to raise awareness about important youth mental health topics, as well as provide resources for further action.

Programs and resource allocation

Produced videos will continue to be offered on Acadia's website and YouTube channels. Acadia will also send experts to share the videos and lead discussions at schools, conferences, and community forums. Acadia plans to expand the reach of the videos by creating CARES packages for distribution to schools and other interested organizations. The CARES packages will contain a DVD and flash drive with the videos pre-loaded, as well as printed educational materials and curricula.

Planned collaborations

Northern Light Acadia Hospital will work with any interested agency, organization, or school to show videos and hold presentations.

Plan for measuring impact

Northern Light Acadia 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 webpage.

Acadia will track viewer rates on its YouTube channel, and will also collect feedback from attendees at presentations. Impact based on number of online views and value of videos pertaining to what attendees learn from videos and presentations will be obtained. Additionally, feedback will be gathered from those receiving and using a CARES package.

Population of focus

All adults who work with children and adolescents or are parents of children and adolescents

Health Priorities Not Addressed

Northern Light Acadia 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 Acadia 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:

- Chronic Disease – as a psychiatric hospital, mental health was deemed most appropriate
- Physical Activity, Nutrition and Healthy Weight - As a psychiatric hospital, mental health was deemed most appropriate
- Access to Care - While important, access to care was not chosen because the three that were chosen were deemed to be higher priorities

Conclusion

Northern Light Acadia 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 Acadia Hospital will engage in another Shared Community Health Needs Assessment 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 Acadia Hospital's last (2016) Community Health Needs Assessment.

Northern Light Health and Northern Light Acadia 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 Acadia 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



Acadia Hospital

Progress Report Update

FY 2017 Progress Report Priority 1: Drug and Alcohol Abuse	
Objective	By October 1, 2017, Acadia Hospital will: <ol style="list-style-type: none"> 1. Pursue and participate in Suboxone expansion grants when available (receive award for one grant) 2. Partner with others (e.g. primary care providers) to expand access to Suboxone treatment by two PCP clinics/providers
Status	Completed
Approaches taken and resources used	In fiscal year 2017 (FY17), Acadia Hospital held ongoing collaboration meetings between Acadia Hospital, Eastern Maine Medical Center, St. Joseph Hospital, and the City of Bangor in order to accomplish the goal of the Maine Community Foundation (MCF) grant for preparing and training two to four primary care providers to start delivering Suboxone to patients in their practices.
Partners engaged	Acadia Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • Eastern Maine Medical Center • St. Joseph Hospital • City of Bangor
Highlights	Upon completion of the Suboxone certification, providers started treating patients.
Outcome Measure	Four providers received certification as Medication Assisted Treatment (MAT) providers
Project lead	Doug Townsend, LCPC, Administrator of Adult Services Jesse Higgins, Director, Behavioral Health Integration
Next Steps	In fiscal year 2018 (FY18), Acadia Hospital will focus on increasing the number of patients served in Suboxone Daily Dosing Program. This is an innovative, grant-funded pilot which allows Suboxone access to patients who would otherwise be too acute to treat in a prescription-to-home Suboxone approach that is successfully utilized with less acute patients.

FY 2017 Progress Report Priority 2 and 3: Mental Health, and Access to Behavioral Care/Mental Healthcare Obesity	
Objective	Increase the number of people who receive behavioral health and substance abuse services in Aroostook, Penobscot, Washington, Kennebec, Hancock, Piscataquis, and Somerset Counties by providing 605 tele-psychiatry appointments and 2,750 behavioral health integrated encounters and 25 telemental health encounters at Restorative health by October 1, 2017.
Status	Completed
Approaches taken and resources used	In FY17, Acadia Hospital engaged in ongoing emergency department tele-psychiatry evaluations, integrated care encounters and tele-psychiatry to home through Acadia's Restorative Health practice (offering mental health services, including depression treatment, substance abuse counseling, and psychiatric medication management to assist individuals in making favorable changes in their life.)
Partners engaged	Acadia Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • Eastern Maine Medical Center's Internal Medicine & Family Medicine, Pediatrics and Cancer Care of Maine (Bangor, Orono, Brewer, Hampden) • Blue Hill Memorial Hospital (Blue Hill, Castine and Island Family Medicine) • Sebasticook Valley Health Family Care • Mercy Hospital (Portland) • Charles A. Dean Memorial Hospital (Greenville) • Inland Hospital (Waterville) • Maine Coast Memorial Hospital (Ellsworth) • Down East Community Hospital (Machias) • Bucksport Regional Health Center (Bucksport) • Katahdin Valley (Patten, Millinocket, Houlton, Brownville and Ashland)
Highlights	During FY17, Acadia Hospital was able to bring more integrated sites and emergency departments on board for this initiative.
Outcome Measure	1,173 Emergency department tele-psych. encounters, 11,015 integrated encounters, 116 home sessions
Project lead	Doug Townsend, LCPC, Administrator Adult Services Jamie Boyd, Director, Clinical Operations Support
Next Steps	In FY18, Acadia Hospital plans to increase the number of people who receive behavioral health and substance abuse services in Maine by providing 1,200 tele-psychiatry appointments and 12,000 behavioral health integrated encounters and 150 tele-mental health encounters at Restorative health by October 1, 2018.

Fiscal Year 2018

Progress report to our community

Addressing community health needs



Northern LightSM
Acadia Hospital

Progress report update

FY 2018 Progress Report

Priority #1: Drug and alcohol abuse: access to medication assisted therapy

Objective: By September 30, 2018, increase the number of patients served in Suboxone Daily Dosing Program. Suboxone Daily Dosing is an innovative, grant-funded pilot which allows Suboxone access to patients who would otherwise be too acute to treat in a prescription-to-home Suboxone approach that is successfully utilized with less acute patients. With the grant being limited to fifty slots at a time, increasing access to these slots relies upon efficient processes combined with clinical acumen that moves patients to less intensive forms of Suboxone treatment as their acuity diminishes or other forms of treatment when Suboxone Daily Dosing proves to not be the best course for a particular patient.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Acadia Hospital treated a total of 93 patients in this Suboxone Daily Dosing pilot while not exceeding the cap of 50 patients at any one time.

Partners engaged: Northern Light Acadia Hospital partnered with a variety of primary care practices in the region that are certified to prescribe Suboxone. They also worked closely within its own substance abuse continuum and community substance abuse programs.

Highlights: In FY18, Northern Light Acadia Hospital learned a great deal in this pilot phase about how to implement and manage a Suboxone daily dosing program. One lesson learned is that it takes longer than anticipated to reach a point of stability which would allow for patients to be transferred to a lower level of care intensity. The program also discovered some additional tools and resources that aid a person in early recovery to reach a point of stability.

Outcome Measure: In FY18, the outcome measure for this objective achieved by Northern Light Acadia Hospital was the number of patients seen in this program.

Project Leads: Doug Townsend, LCPC, MBA, associate vice president, Adult Services; Nicole Wimberger, MD, medical director, Adult Outpatient Services

Next Steps: For the duration of the pilot, Northern Light Acadia Hospital will continue to operate this Suboxone Daily Dosing program, but will also be exploring program enhancements that could enhance service delivery.

FY 2018 Progress Report

Priority #2: Mental health, and access to behavioral care and mental healthcare

Objective: Access to behavioral/mental healthcare: Increase the number of people who receive behavioral health and substance abuse services in Maine by providing 1,200 tele-psychiatry appointments and 10,000 behavioral health integrated encounters and 150 tele-mental health encounters at Restorative health by October 1, 2018.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Acadia Hospital provided over 17,000 tele-mental health and integrated behavioral health encounters.

Partners engaged: Northern Light Acadia Hospital partnered with the following entities on this priority: 37 primary and specialty care practices, 15 hospital emergency and inpatient departments, and individual customers receiving tele-therapy services in their homes.

Highlights: In FY18, Northern Light Acadia Hospital changed its telehealth delivery platform to a new vendor which improved the reliable and signal quality.

Outcome Measure: In FY18, the outcome measure for this objective achieved by Northern Light Acadia Hospital was that programs using these services tended to increase their referral volume which is an indicator of both need as well as quality.

Project Leads: Rick Redmond, associate vice president of Community Partnerships and Service Line Development; John Campbell, MD, chief medical informatics officer and medical director of Community Services

Next Steps: In fiscal year 2019, Northern Light Acadia Hospital will continue to provide these services.

FY 2018 Progress Report

Systemwide priority: Healthy food access – healthy hospital food

Objective: 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 fiscal year 2018 (FY18), Northern Light Acadia Hospital revised its cafeteria menu to offer new, healthy menu options.

Partners engaged: Northern Light Acadia Hospital partnered with its food supply vendors to create these new, healthy options.

Highlights: In FY18, three cafeteria menu options reduced the average sodium content in these offerings from 538 mg. per serving to 218 mg. per serving.

Outcome Measure: In FY18, three cafeteria menu options reduced average sodium content in these offerings from 538 mg. per serving to 218 mg. per serving.

Project Lead: Colleen Dahl, co-director of Nutrition Services

Next Steps: In fiscal year 2019, Northern Light Acadia Hospital will continue to explore menu items that are lower in sodium. Its food suppliers offer additional low sodium ingredients that can be employed.

Fiscal Year 2019

Progress report to our community

Addressing community health needs



Northern LightSM
Acadia Hospital

Progress report update

FY 2019 Progress Report

Priority #1: Drug and alcohol abuse: Access to Medication-Assisted Treatment

Objective: By September 30, 2019, Northern Light Acadia Hospital will increase the number of patients served in Suboxone Daily Dosing Program. Suboxone Daily Dosing is an innovative, grant-funded pilot which allows Suboxone access to patients who would otherwise be too acute to treat in a prescription-to-home Suboxone approach that is successfully utilized with less acute patients. With the grant being limited to fifty slots at a time, increasing access to these slots relies upon efficient processes combined with clinical acumen that moves patients to less intensive forms of Suboxone treatment as their acuity diminishes or other forms of treatment when Suboxone Daily Dosing proves to not be the best course for a particular patient.

Status: Completed

Approaches taken and resources used: In fiscal year 2019 (FY19), Northern Light Acadia Hospital, with the advent of a new program out of Maine Department of Health and Human Services, was able to convert its daily suboxone dosing program to an Opioid Health Home which wraps more services and structure around the person receiving daily dosing.

Partners engaged: Northern Light Acadia Hospital's Medication-Assisted Treatment program refers out to primary care all over the region, as long as they have their X waiver and openings, once the patient is stabilized and can move to a structure less intensive than daily dosing

Highlights: In FY19, Northern Light Acadia Hospital established an Opioid Health Home.

Outcome Measure: In FY19, the outcome measure for this priority achieved by Northern Light Acadia Hospital was surpassed by serving 86 individuals compared to a target of 70.

Project Leads: Doug Townsend, AVP, Adult Services and Nicole Wimberger, Service Medical Director

Next Steps: In fiscal year 2020 (FY20), Northern Light Acadia Hospital will continue to serve individuals needing more intensive forms of Medication-Assisted Treatment via its Opioid Health Home.

FY 2019 Progress Report

Priority #2: Mental health and access to behavioral care and mental healthcare

Objective: Access to behavioral/mental healthcare: Increase the number of people who receive behavioral health and substance abuse services in Maine by providing 1,400 tele-psychiatry appointments and 12,000 behavioral health integrated encounters and 200 tele-mental health encounters at Restorative Health for a total of 13,600 by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Acadia Hospital expanded partnerships to a few more primary care practices and emergency departments. There was a heavy reliance on televideo engagement with an improved platform. Acadia Hospital was able to increase tele-therapy to home.

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

17 emergency department's inside and outside of Northern Light Health member organizations. In addition, 40 primary and specialty care practices were engaged both inside and outside of Northern Light Health on this priority.

Highlights: In FY19, Northern Light Acadia Hospital increased the volume of emergency department consultations as some emergency departments began recognizing the value of bringing psychiatry to the bedside 24/7. Acadia Hospital increased tele-therapy to home as the platform allowed for easier access to care and commercial payers began allowing for this service more readily.

Outcome Measure: In FY19, the outcome measure for this priority achieved by Northern Light Acadia Hospital exceeded the target goal; providing over 25,000 psychiatric encounters in targeted areas to an estimated 13,000 unique individuals at rural primary care practices, emergency departments, and to people in their homes.

Project Lead: Rick Redmond, AVP, Community Partnerships and Service Line Development

Next Steps: In FY20, Northern Light Acadia Hospital will focus its community health objectives in more newly developing areas that warrant further attention. This current measure that will be discontinued as a community health improvement plan is well established and continues to have much momentum.

FY 2019 Progress Report

Systemwide priority: Healthy food access – healthy hospital food

Objective: Reformulate three recipes to improve the nutritional content of food options offered at foodservice venues (cafeteria, vending, catering), using U.S. DHHS and CDC's Health and Sustainability Guidelines for Federal Concessions and Vending Operations Guidelines by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Acadia Hospital used evidence based nutritional practices.

Highlights: In FY19, Northern Light Acadia Hospital changed ingredients in two recipes to offer lower sodium content: Nacho pie reduced from 833mg per serving to 584mg. Chili reduced from 549mg per serving to 441mg. In addition, by reducing sodium in its gravy mix, Acadia Hospital was able to reduce sodium in its pork tenderloin with gravy offering from 564mg per serving to 304mg. Finally, Acadia Hospital added a new soup to the menu, Chipotle Sweet Potato Soup which was low in calories (150 calories per 8 ounces) and a good source of fiber (3gm per 8 ounces). Consumer feedback was excellent.

Outcome Measure: In FY19, the outcome measure for this priority achieved by Northern Light Acadia Hospital was implementation of four new healthier menu offerings in its cafeteria serving patients, families, and staff.

Project Lead: Colleen Dahl, co-director of Nutrition Services

Next Steps: In FY20, Northern Light Acadia Hospital will continue to explore and implement new, healthier menu options while moving its community health improvement focus to measuring patients' food insecurity by implementing a screening tool in at least one department.

Conclusion

Northern Light Acadia 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.