

Community Health Strategy

Addressing Community Health Needs Fiscal Year 2020-2022

**Northern Light
Inland 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 Inland 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 Inland 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 Inland Hospital

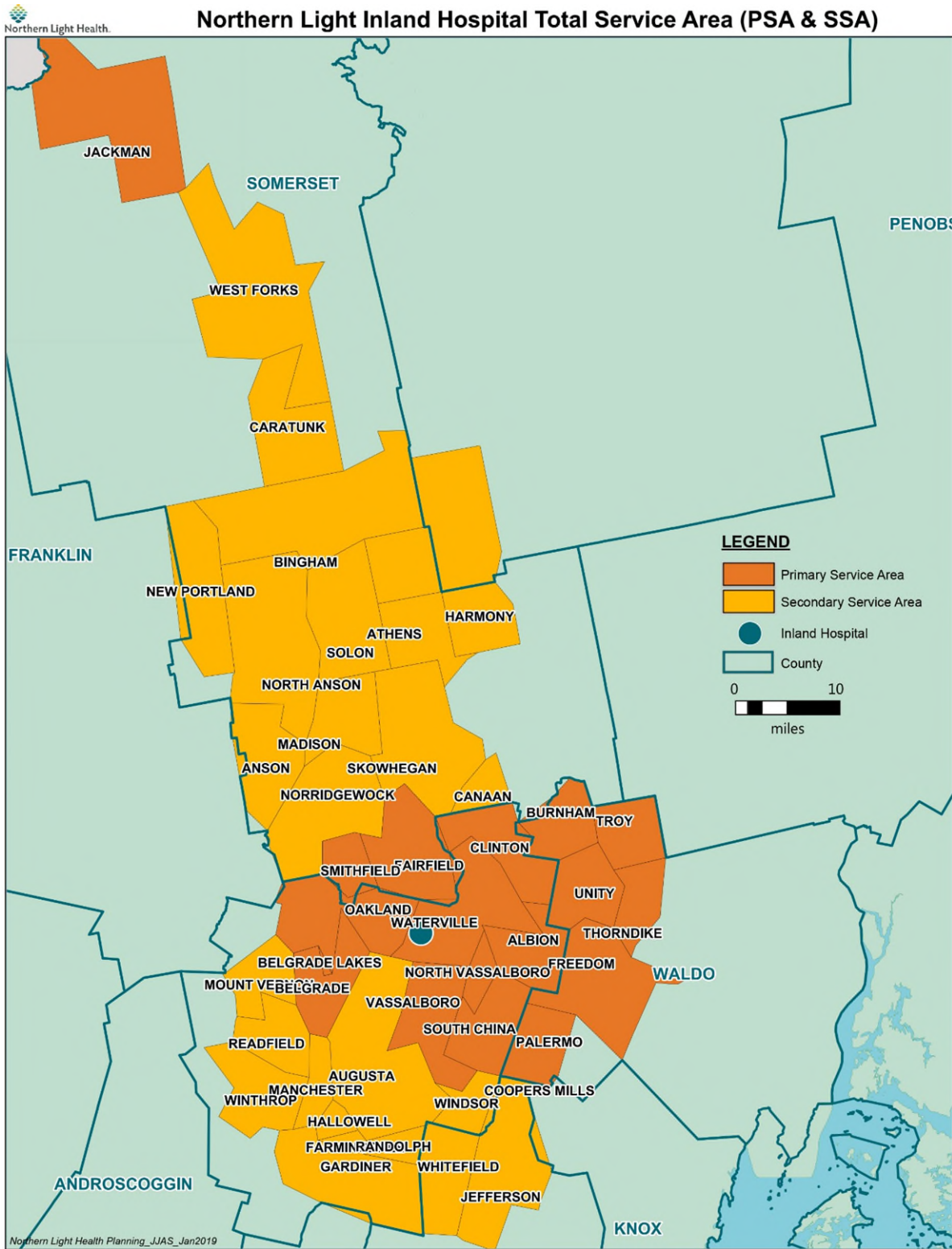
Northern Light Inland Hospital is a 48-bed acute care hospital with 14 primary and specialty care physician offices in Waterville and surrounding communities, and a 105-bed continuing care center. Thanks to its close relationship with Northern Light Eastern Maine Medical Center, Inland patients have seamless access to a higher level of care when needed.

Northern Light Inland Hospital was founded in 1943 by a group of osteopathic physicians with a vision to provide compassionate care that focused on the whole patient. Today, that patient-centered approach is alive and well at Northern Light Inland Hospital, where staff provide the kind of care we all want for our own families. Patients are treated with respect and dignity, and benefit from an open communication process that delivers an extraordinary experience and the best possible outcome. Our mission is to improve the health of the people and communities we serve, and we are committed to making healthcare work for every patient.

Definition of Community Served

Located in Kennebec County, Waterville, Maine, Northern Light Inland Hospital has a service area comprised of both primary and secondary service areas, together referred to as the total service area. Total service areas (TSAs) 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. TSAs can sometimes overlap due to hospital locations or because of the specialty services provided by the hospitals.



Demographic Data		
KENNEBEC COUNTY		
	Percent	Number
American Indian/Alaskan Native	0.6%	685
Asian	0.8%	1,006
Black/African American	0.9%	1,139
Hispanic	1.4%	1,730
Some other race	0.4%	476
Two or more races	1.4%	1,658
White	95.9%	115,938
County population	120,953	

Social Determinants of Health Data	
KENNEBEC COUNTY	
Median household income	\$48,570
Unemployment rate	3.7%
Individuals living in poverty	14.6%
Children living in poverty	20.3%
65+ living alone	46.1%
People living in rural areas	62.8%
Food insecurity	14.7%

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 Inland 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 Inland Hospital.

Northern Light Inland 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 Inland Hospital selected key priorities and strategies based on the county CHNA report, which includes quantitative health profile indicators and qualitative prioritization 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 Inland Hospital's Community Health Strategy team included individuals representing the following positions:

- Director of Community Relations
- VP of Operations
- VP of Medical Affairs
- Practice Administrator
- VP of Quality
- Medical Director Primary Care
- Communication Specialist
- Director of Women's Health
- Chief Dietitian
- Practice Administration Quality Coordinator
- Central District Public Health Liaison

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

- Shared CHNA prioritization: How the health priority ranks in the Shared CHNA
- System-wide priority areas of work as determined by the Northern Light 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 Inland Hospital experts and local partnership experts in various priority areas
- Feasibility: Northern Light Inland 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 Inland 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 Inland 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 23, 2019.

Selected Priorities of Focus

Priority #1: Physical Activity/Nutrition/Weight

Rationale

Being physically active, eating a balanced diet, and maintaining a healthy weight are all essential for promoting good health and well-being. Good nutrition and regular physical activity can reduce the risk of developing serious health conditions such as diabetes, cancer, stroke, heart disease, high cholesterol, and high blood pressure. These and other obesity-related chronic diseases result in significantly higher rates of healthcare utilization and costs, and cause poorer health outcomes and decreased quality of life. A comprehensive approach to improving physical activity and nutrition, including environmental approaches, healthcare system interventions, and community programs, can support healthy choices and behaviors and improve access to healthier options within communities.

Physical activity and nutrition have been identified by the Northern Light Inland Hospital Community Health Strategy team as a priority need for our region. Northern Light Inland Hospital has resources available to be leveraged in support of this need, as well as the ability to use support and assets of our community partners. There are numerous opportunities for implementing effective evidence-based strategies in a variety of settings that will improve physical activity and nutrition options and behaviors for our community members.

Finally, physical activity/nutrition/healthy weight rated as a high priority to the community and Northern Light Health.

Intended action to address the need

Northern Light Inland Hospital will focus on creating active communities by using evidence-based programs focused on increasing access to physical activity and healthy nutrition options.

Anticipated impact of these actions/expected outcomes

Northern Light Inland Hospital intends to partner with community-based organizations to provide access to and promote physical activity and healthy nutrition as a way to reduce the prevalence of chronic disease.

Programs and resource allocation

Northern Light Inland Hospital plans to commit dedicated staff time to support effective evidence-based strategies to improve physical activity and nutrition options.

Planned collaborations

Northern Light Inland Hospital plans to collaborate with local and state organizations to address this priority need, from local schools to community support service groups.

Plan for measuring impact

Northern Light Inland 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

Children between the ages of 0-18, low income populations, families with young children, school staff.

Priority #2: 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 health care.

The Northern Light Inland Hospital Community Health Strategy team recognizes that addressing mental health needs is a priority for our community. There are local community assets and Northern Light Inland 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.

Finally, mental health rated as a high priority to the community and Northern Light Health.

Intended action to address the need

Northern Light Inland Hospital will help normalize mental health by providing educational efforts to raise awareness and access to mental health services.

Anticipated impact of these actions/expected outcomes

Northern Light Inland Hospital intends to improve healthcare staff and community member's confidence with discussing mental health issues and referring patients to resources.

Programs and resource allocation

Northern Light Inland Hospital will use effective evidence-based strategies to help normalize mental health.

Planned collaborations

Northern Light Inland Hospital plans to collaborate with local and state organizations to address this priority need.

Plan for measuring impact

Northern Light Inland 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

Healthcare staff and community members.

Priority #3: Substance Use

Rationale

Substance Use, including alcohol, tobacco, and other drugs, have 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 Inland Hospital's Community Health Strategy team determined it was feasible to address this need. There are local community assets and Northern Light Inland 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

Northern Light Inland Hospital will recruit and train medication-assisted treatment prescribers.

Anticipated impact of these actions/expected outcomes

Northern Light Inland Hospital intends to increase access to medication-assisted treatment as a way to treat substance use disorders.

Programs and resource allocation

Northern Light Inland Hospital will use effective evidence-based strategies to reduce substance use.

Planned collaborations

Northern Light Inland Hospital plans to collaborate with local and state organizations to address this priority need.

Plan for measuring impact

Northern Light Inland 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

Healthcare providers.

Priority #4: 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 Inland 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 Inland 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 Northern Light Health.

Intended action to address the need

Northern Light Inland Hospital will use a validated screening tool to identify patients who are food insecure.

Anticipated impact of these actions/expected outcomes

Northern Light Inland Hospital intends to increase the number of patients screened for food insecurity and referred to community resources.

Programs and resource allocation

Northern Light Inland Hospital plans to commit staff time to support use of the food insecurity screening tool in healthcare practices.

Planned collaborations

Northern Light Inland Hospital plans to collaborate with local and state organizations to address this priority need.

Plan for measuring impact

Northern Light Inland 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

Patients and families, healthcare staff.

Health Priorities Not Addressed

Northern Light Inland 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 Inland 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:

- Access to Care - This identified health need is not being addressed directly as a strategy born out of our community health needs assessment as our hospital has current initiatives focused on improving access to care such as provider recruitment, the establishment of walk-in care (bridging the gap between primary care and emergency room visits), community health navigators (to link vulnerable populations with needed resources) and other efforts that are ongoing and part of our continual mission to improve access to care.
- Older Adult Health/Healthy Aging - We decided not to focus on this priority because it is already a focus of another health system in our community, as well as several local agencies, such as Spectrum Generations.

Conclusion

Northern Light Inland 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 Inland 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 Inland Hospital's last (2016) Community Health Needs Assessment.

Northern Light Health and Northern Light Inland 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 Inland 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



Inland Hospital

FY 2017 Progress Report	
Priority 1: Obesity (Physical Activity/Nutrition)	
Objective	Obesity - Maintain/increase reported rates for increased physical activity by families participating in the annual Let's Go! Family Fun Series program at or above 76.92% by September 30, 2017.
Status	Completed
Approaches taken and resources used	<p>Inland Hospital's popular Let's Go! Family Fun Series started in September, 2012 and has grown to engage 363 participating families in its fifth program year during fiscal year 2017. The Let's Go! Family Fun Series organizes events each month for children ages 4-12 and their families. These free events are held at recreational and community sites to encourage families to access these resources throughout the year. Importantly, equipment is provided to families at no cost to them, for events that feature biking, skiing, snowshoeing, or kayaking. This has allowed families to try new activities without purchasing expensive equipment and has increased the level of participation of all family members in healthy behaviors.</p> <p>The Let's Go! Family Fun Series supports Inland Hospital and EMHS' mission to care for and serve our community by providing a program focused on community health and instilling healthy habits, starting at a young age. Fostering a culture of wellness in the greater Waterville area not only supports our organization's mission, but will reduce risk factors, chronic disease and other illness associated with obesity, ultimately reducing health care costs.</p> <p>363 families (558 adults/646 children) enrolled and participated in the 2016-2017 Let's Go! Family Fun Series (12 events held Sept- Aug). 152 were returning families (who had participated in previous years) and 211 families were new to the program this year. 94 (62%) of 152 returning families in the series answered yes on the physical activity question on program registration cards. ("Has participating in the LET'S GO! Family Fun Series prompted your family to be more active?")</p>
Partners engaged	<p>Inland Hospital partnered with the following entities on this priority:</p> <p>Alfond Youth Center, Waterville Parks & Recreation, Town of Fairfield, Friends of Quarry Road Trails, Central Maine Ski Club, Skowhegan Parks & Recreation, Kennebec Messalonskee Trails, Waterville Creates, Common Street Arts, Colby College, Thomas College, University of Maine Farmington, Snow Pond Community Music School, Waterville Public Library, Somerset Public Health, Move More Kids, Let's Go! Somerset, Hart to Hart Farm, Winterberry Farm, Hannaford, Healthy Communities of the Capital Area, Healthy Northern Kennebec, Kennebec Messalonskee Trails, Nor'easter Kite Club, Snow Pond Center for the Arts, Waterville Pediatrics.</p>

FY 2017 Progress Report Priority 1: Obesity (Physical Activity/Nutrition) <i>continued</i>	
Highlights	<p>Our 5th year-long Let's Go! Family Fun Series has proven to help families in Inland's service area live healthier lifestyles. On an online survey targeting families who participated in two or more of the monthly events, responses indicated that many of the families have adopted the daily 5-2-1-0 healthy habits since joining the program:</p> <ul style="list-style-type: none"> 59% indicated they eat more fruits and vegetables 53% have reduced or limit recreational screen time 65% have increased physical activity 59% have reduced or limit sugary drinks <p>We achieved our goal to have obesity rates for Inland Family Care patient's ages 2-18 level off below 2014 baseline of 30% with year-end overall rates at 29.3. More than two dozen local organizations partnered in our 2016-2017 Let's Go! Family Fun Series to provide staff support, equipment, and access to their facilities for Family Fun Series events.</p> <p>A new full-time Community Health Program Coordinator was hired to provide Let's Go! support for schools, childcares, and out-of-school programs; relationships were rebuilt and new partnerships were formed.</p>
Outcome Measure	62% of families participating in the Family Fun Series reported increased physical activity after joining the program
Project lead	Ellen Wells, Community Wellness Team Leader
Next Steps	<i>We will continue the Let's Go! Family Fun Series with a 6th year-long series of free monthly events in fiscal year 2018; provide ongoing technical assistance for schools, childcares and healthcare sites; set new goal for obesity rate decline.</i>

FY 2017 Progress Report Priority 2: Substance Abuse	
Objective	Substance Abuse - By September 30, 2017 Inland will increase integrated behavioral health staff in women's health and primary care settings from 1 to 3 (total = two Licensed Clinical Social Workers, one Psychiatric Mental Health Nurse Practitioner)
Status	In Progress
Approaches taken and resources used	<p>The goal of integrating behavioral health into primary care practices is to improve access to mental health expertise for medical providers and their patients. The evidence-based model of collaborative care benefits both provider and patient by supporting management of the complex and persistent needs of patients with behavioral health, substance misuse, and co-occurring medical diagnoses. Integration of behavioral health supports populations at high risk for substance abuse problems that can serve as barriers to improving patient health. Patients also get convenience, minimized stigma and improved continuity of care. Integration helps provide whole-patient care in primary care settings.</p> <p>Two licensed clinical social workers were hired in fiscal year 2016 for direct patient care with Inland's primary care and women's health populations. In 2017, a psychiatric mental health nurse practitioner was hired in conjunction with Acadia Hospital to provide telemedicine services to primary care patients. Integrated behavioral health staff provided mental health services for 491 Inland Family Care during fiscal year 2017.</p>
Partners engaged	<p>Inland Hospital partnered with the following entities on this priority:</p> <ul style="list-style-type: none"> • Acadia Hospital
Highlights	One physician reports that integrating behavioral health services in primary care helps patients set and meet goals, stating "when mental health is being better treated overall, that, in turn, reduces drug and alcohol abuse."
Outcome Measure	One (Number of behavioral health staff integrated into Inland's healthcare settings)
Project lead	Belinda Fletcher, Practice Administrator and Dr. Gavin Ducker, Chief Medical Officer and VP of Medical Affairs
Next Steps	We will continue to recruit for open licensed clinical social worker (LCSW) positions and expand Psychiatric Nurse Practitioner's scope to provide services in Inland's primary care settings through additional marketing and increased awareness among providers.

FY 2017 Progress Report Priority 3: Mental Health/Depression	
Objective	Mental Health - Increase the number of individuals receiving Mental Health First Aid training from 0 to 40 by September 30, 2017.
Status	Completed
Approaches taken and resources used	<p>Through collaborative efforts of Inland Hospital, NAMI Maine, and other community partners, Adult Mental Health First Aid classes were held in Waterville in October 2016, June and September of 2017, training 44 community members and healthcare workers to learn a five-step action plan to help patients, loved ones, colleagues, neighbors and others cope with mental health problems.</p> <p>Mental Health First Aid (MHFA) is a national best-practice, evidenced-based certification course that is eight hours in length and leads to a three-year certification issued by the National Council on Behavioral Health. By design, it is intended to mirror the idea of regular first aid to empower individuals with just enough information to respond and help guide someone with a mental health need to the right kind of help.</p>
Partners engaged	<p>Inland Hospital partnered with the following entities on this priority:</p> <ul style="list-style-type: none"> • NAMI Maine • Healthy Northern Kennebec • Kennebec Behavioral Health • Spectrum Generations
Highlights	Through this training, 44 community members, local social service and healthcare workers were trained to help individuals and family members in our community cope with mental health issues and access resources. Awareness of local resources increased and new partnerships around this issue were established. Class participants reported that the class was engaging, useful and enlightening.
Outcome Measure	44 community members, local social service and healthcare workers trained
Project lead	Ellen Wells, Community Wellness Team Leader
Next Steps	In fiscal year 2018, we intend to partner with NAMI Maine and others to provide at least one Mental Health First Aid for Youth class in the coming year.

FY 2017 Progress Report Priority 4: Poverty	
Objective	Poverty - Designate Community Benefit program funding to support public transportation in Somerset County in FY2017.
Status	Completed
Approaches taken and resources used	<p>In FY17, Inland allocated funding to KVCAP to support their public transportation services as one of Inland’s Community Benefit partners addressing community health priorities (i.e. poverty) identified in our Community Health Improvement Plan.</p> <p>Inland has been a long-time partner with KVCAP in supporting and promoting public transportation services provided via the Kennebec Explorer and Somerset Explorer bus systems. Inland Hospital and our family practice in downtown Waterville are regular stops on the bus route and many of our patients take advantage of the service to access healthcare and other local services.</p> <p>The Somerset Explorer public bus system helped people get to work, medical appointments, retail and grocery stores, community events, and more. Public transit service is provided by KVCAP across Southern Kennebec County and in these Northern Kennebec cities and towns: Waterville, Fairfield, Skowhegan, Madison, Anson, Norridgewock, Jackman, Bingham and Moscow.</p>
Partners engaged	<p>Inland Hospital partnered with the following entities on this priority:</p> <ul style="list-style-type: none"> • Kennebec Valley Community Action Program (KVCAP)
Highlights	<p>Kennebec and Somerset Explorer public transit services provide flex-route, accessible public transportation services throughout the Greater Waterville-Augusta region with additional service in the greater Skowhegan-Madison area.</p> <p>The service provided 103,313 during the past year, including 12,832 people who boarded using the vehicle wheelchair ramps or lifts.</p> <p>The service was expanded to include the communities of Manchester, Jackman and Bingham during the past year.</p> <p>This year, Inland’s Community Benefit program provided \$1,000, in addition to previously committed funding, to KVCAP in May, 2017 to support public transportation in Kennebec and Somerset counties, bringing the total for FY2017 to \$3,000 to help address the increasing demand for public transportation services in our region. Because of the higher rates of poverty and related issues in Somerset County, we specified that a minimum of \$1,000 of our annual contribution be designated to support public transportation in that region.</p>

FY 2017 Progress Report Priority 4: Poverty	
Highlights <i>continued</i>	The Explorer public bus service provided a total of 103,313 rides during the past year. <ul style="list-style-type: none"> • 78,671 passengers boarded in the Greater Augusta area • 19,797 passengers boarded in the Greater Waterville area • 4,905 passengers boarded in the Greater Skowhegan Area including 19 in Jackman • 12,832 passengers, included in the above totals, boarded the vehicles using the accessible mobility systems (lifts or ramps) to board the vehicles.
Outcome Measure	\$1,000 community benefit dollars designated to support public transportation in Somerset County
Project lead	Sara Barry, Director, Community Relations
Next Steps	Inland will continue to support KVCAP's transportation services through our Community Benefit program.

FY 2017 Progress Report	
Systemwide Priority: Opioid Harm Reduction - Patient Education	
Objective	By 9/30/2017, increase the number of Inland provider offices providing patient education materials surrounding prescription opiate drug safety.
Status	Completed
Approaches taken and resources used	In fiscal year 2017, in collaboration with Eastern Maine Medical Center, Inland chose opioid education material for our primary care offices from Choosing Wisely, a national Consumer Reports initiative of the American Society of Anesthesiologists. After review from our EMHS Patient Experience team, the brochure was also adopted by the entire system for use in all primary care offices. The materials mirror what Inland/EMMC healthcare providers are communicating to patients about opioids – that they are not always the best choice for all ongoing pain situations, and that there are other pain management options to discuss with your healthcare provider. Inland’s Chief Medical Officer and our Patient and Family Advisory Council reviewed the material and supported its use in offices as a way for patients and family members to start the conversation about pain management and opioid abuse.
Partners engaged	Inland Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • Eastern Maine Medical Center’s Community Relations staff • Choosing Wisely • Inland Family Care office managers • Inland’s Chief Medical Officer • EMHS Community Health Team Task Force • EMHS System Patient Experience team
Highlights	See approaches taken and resources used
Outcome Measure	Eight - Number of provider offices offering patient education materials on prescription drug safety
Project lead	Dr. Gavin Ducker, Chief Medical Officer Bonnie Roundy, practice manager Sara Barry, Director, Community Relations
Next Steps	Our next steps in FY18 include distributing the Choosing Wisely materials to our Specialty Care offices, and then our hospital/outpatient waiting areas. In addition, we are exploring the process for embedding the material into our electronic medical record so healthcare providers have access to it and can include it in a patient’s printed clinical summary.

FY 2017 Progress Report Systemwide Priority: Healthy Food Access - Healthier Hospital Food Service	
Objective	Increase the number of new or improved policies, environments, and systems to improve availability of healthy foods at Inland Hospital from 0 to 3 by 9/30/2017.
Status	Completed
Approaches taken and resources used	In fiscal year 2017, Inland established a Healthy Hospital Food policy to reinforce our ongoing commitment to patients', staff and visitors' health and well-being. The new policy was approved by Administrative leaders in March, 2017 and posted on the policy portal on 4/27/17. The policy includes the exclusion of sugary drinks from the cafeteria menu for patients, consumers, vending machines, meetings and catered events. Sugary drinks have been found to be a leading contributor to the obesity problem. The policy also requires more prominent display of fruits and vegetables in the cafeteria, posting the nutritional information for the "meal of the day", and offering smaller portion options for desserts made in-house. The promotional campaign for the Healthy Hospital Food initiative officially launched on June 1, 2017 with a "Rethink Your Drink" campaign that featured a water bottle give-away for all Inland employees and an educational sugar display. Foodservice staff worked with vendors to ensure availability and exclusion of items per policy.
Partners engaged	Inland Hospital partnered with the following entities on this priority: <ul style="list-style-type: none"> • A community health improvement plan sub-committee was formed consisting of our Foodservice Director; Diabetes & Nutrition Wellness Director/Chief Dietitian; Employee Health Nurse; and Community Wellness Team Leader • Food vendors
Highlights	Progress is being made toward a healthier food environment for our 700+ staff, patients, and visitors! Awareness of sugar content in popular beverages increased among staff, patients, and visitors; we received a (mostly) positive response to the initiative and new policy; and the water bottle give-away was very popular and appreciated.
Outcome Measure	Three - the number of foodservice environment, policy, or procurement activities that improve availability of healthy foods
Project lead	Scott Pearl, Food Service Director and Dan Booth, VP of Operations
Next Steps	<p>In fiscal year 2018, Inland will continue to work in conjunction with EMHS as a new system Healthier Hospital Foodservice initiative was rolled out in October, 2017. The new initiative will integrate and scale best practices across all EMHS foodservice sites, resulting in healthier food choices for patients, staff and visitors; reduced product variation and associated expense; and increased purchasing of local product from Maine food producers.</p> <p>By working together across EMHS sites, we expect to improve recipes, menus, inventory, and production cost while reducing product variation and food waste. The sourcing, quality and nutritional value of the foods we serve holds potential to enhance health and strengthen local economies.</p>

Fiscal Year 2018

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Northern LightSM
Inland Hospital

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FY 2018 Progress Report

Priority #1: Obesity (Physical activity/nutrition)

Objective: Increase number of registered Let's Go! school, out of school, and childcare sites in northern Kennebec County from 21 to 23 by March 9, 2018.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Inland Hospital exceeded our goal of registering 23 Let's Go! sites (schools, out-of-school and childcare). We registered 24 sites in fiscal quarter one, reaching 5,737 students and 900 staff.

Northern Light Inland Hospital's full-time community health coordinator for the Let's Go! program provided support, trainings, and education to students, staff, and families within the Let's Go! registered sites.

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

AOS 92 (Waterville, Winslow, and Vassalboro), RSU 18 (Oakland, Sidney, Rome, China & Belgrade), Mt. Merici School (Waterville), Snow Pond Arts Academy (Sidney), Alford Youth Center (Waterville), Educare (Waterville), The Children's Place (Waterville) Southern Kennebec Child Development Corporation (China and Vassalboro), Let's Go! home office

Highlights: In FY18, Northern Light Inland Hospital's second year of having a full-time Let's Go! coordinator has been successful in expanding the Let's Go! reach throughout schools, childcare, and out-of-school programs as evidenced by exceeding our goal of 23 registered and engaged Let's Go! sites.

Outcome Measure: In FY18, Northern Light Inland Hospital exceeded its goal by registering 24 school, childcare, and out-of-school sites with the Let's Go! 5210 program, reaching 5,737 students and 900 staff. Let's Go!'s evidence-based 5210 healthy eating and active living daily habits are: Five or more fruits and vegetables, two hours or less of recreations screen time, one hour or less of recreational screen time, and zero sugary drinks. Our community health coordinator creates Let's Go! Action Plans with individual sites for ongoing sustainability of the healthy messages and plans policy development and implementation to support the messages.

Project Lead: Baylee Doughty, community health coordinator

Next Steps: In fiscal year 2019 (FY19), Northern Light Inland Hospital will maintain 26 registered Let's Go! school, out-of-school, and childcare sites in Northern Kennebec County.

FY 2018 Progress Report

Priority #2: Substance Abuse

Objective: Increase integrated behavioral health services in primary care settings from 1 to 5 by September 30, 2018.

Status: In Progress

Approaches taken and resources used: In FY18, Northern Light Inland Hospital collaborated with Northern Light Acadia Hospital to hire new behavioral health workers who support patients suffering from substance abuse issues.

Partners engaged: In FY18, Northern Light Inland Hospital partnered with the following entities on this priority:

Northern Light Acadia Hospital

Highlights: In FY18, Northern Light Inland Hospital successfully integrated behavioral health services into four of our five primary care offices.

Outcome Measure: In FY18, Northern Light Inland Hospital hired additional staff (two licensed clinical social workers) which allowed us to offer behavioral health services in four of our five primary care offices. Part of the new support includes tele-mental health services. Integrating behavioral health services into the primary care setting helps increase access to specific and further care that a person facing substance abuse may need for support and healing.

Project Lead: Belinda Fletcher, practice administrator and Gavin Ducker, MD, senior executive physician and vice president of Medical Affairs

Next Steps: In fiscal year 2019 (FY19), Northern Light Inland Hospital plans to expand behavioral health services into our fifth primary care office.

FY 2018 Progress Report

Priority #3: Mental Health/Depression

Objective: Increase by one the number of Mental Health First Aid classes (youth) offered in Greater Waterville by September 30, 2018.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Inland Hospital provided the community with one Mental Health First Aid Class focused on youth.

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

NAMI Maine, Waterville Public Schools, Winslow Public Schools and Vassalboro Community Schoolstaff, RSU 18 staff, Alford Youth Center, and local churches.

Highlights: In FY18, Northern Light Inland Hospital partnered with NAMI Maine to train 28 professionals in Mental Health First Aid (Youth).

Outcome Measure: In FY18, Northern Light Inland Hospital achieved our goal by providing one Mental Health First Aid class to 28 professionals, focused on youth. The training is designed to help everyday people identify, understand, and respond to signs of addiction and mental illnesses.

Project Lead: Baylee Doughty, community health coordinator

Next Steps: In FY19, Northern Light Inland Hospital will host one Mental Health First Aid class in Greater Waterville.

FY 2018 Progress Report

Priority #4: Poverty

Objective: Increase Community Benefit Program KVCAP annual partner funding support for public transportation in Northern Light Inland Hospital's service area.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Inland Hospital decided to commit funds to KVCAP Transportation through our Community Benefit Grant Program.

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

KVCAP Transportation staff; Community Benefit Advisory Group (membership comprised of Northern Light Inland Hospital staff, leadership, board of trustees, and community volunteers)

Highlights: In FY18, Northern Light Inland Hospital contributed \$2,000 to KVCAP Transportation to enhance local ride service for low income and other residents.

Outcome Measure: In FY18, Northern Light Inland Hospital contributed \$2,000 to KVCAP Transportation, matching last year's donation from our Community Benefit Grant Program. The transportation program provided 19,929 rides in Northern Kennebec and 4,296 rides in Somerset County during the fiscal year that ended June 30, 2018. The service is used for rides to medical appointments and other basic needs, such as grocery shopping.

Project Lead: Sara Barry, director, Community Relations

Next Steps: In FY19, Northern Light Inland Hospital plans to increase Community Benefit Grant funding to KVCAP to support public transportation in Northern Light Inland Hospital's service area.

FY 2018 Progress Report

Systemwide priority: Opioid harm reduction – patient education

Objective: By September 30, 2018, increase by four the number of provider sites providing patient education materials surrounding prescription drug safety.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Inland Hospital worked with our member organizations within Northern Light Health and the “Choosing Wisely” program to create and distribute opioid awareness materials for reception areas in all our medical practices. Choosing Wisely is an initiative of the American Society of Anesthesiologists that encourages patients to discuss all options for pain relief with their provider, and points out that opioids are not always the best choice.

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

Northern Light Eastern Maine Medical Center, Northern Light Mercy Hospital, and Choosing Wisely

Highlights: In FY18, Northern Light Inland Hospital received input on the materials from our Patient and Family Advisory Council to ensure readability and public interest level.

Outcome Measure: In FY18, Northern Light Inland Hospital provided “Choosing Wisely” patient education materials on prescription drug safety to 12 medical practice reception areas. Choosing Wisely is an initiative of the American Society of Anesthesiologists that encourages patients to discuss all options for pain relief with their provider, and points out that opioids are not always the best choice.

Project Lead: Sara Barry, director, Community Relations; Gavin Ducker, MD, senior physician executive and vice president of Medical Affairs

Next Steps: In FY19, Northern Light Inland Hospital will increase from 0 to 5 the number of provider sites offering patient education materials on prescription drug safety that are embedded in the electronic health record (EHR) to be available for patient clinical visit summaries.

FY 2018 Progress Report

Systemwide priority1: 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, 2018.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Inland Hospital foodservice team reformulated at least three recipe/menu items to reduce sodium content. The recipes included taco seasoning, tortilla wraps, and chicken tortilla soup.

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

Northern Light Health Food Service Council

Highlights: In FY18, Northern Light Inland Hospital achieved the goal of reformulating three new recipes.

Outcome Measure: In FY18, Northern Light Inland Hospital reformulated three recipe/menu items with the assistance of a new dietetic software tool (Computrition). The software helps staff to create healthier options for patients, employees and visitors. We focused on lowering sodium amounts in some of the most popular menu items. For example, the tortilla wrap was changed to a whole wheat wrap, lowering the sodium from 950mg to 510mg. In addition, the type of salsa in the chicken tortilla soup was changed, resulting in a sodium reduction from 605mg to 368mg.

Project Lead: Scott Pearl, Food & Nutrition Services director and Dan Booth, vice president of Operations

Next Steps: In FY19, Northern Light Inland Hospital plans to reformulate three more recipe/menu items to improve the nutritional content of food options offered at our foodservice venues (cafeteria, vending, catering).

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FY 2019 Progress Report

Priority #1: Obesity (Physical Activity and Nutrition)

Objective: Maintain 26 registered Let's Go! school, out-of-school, and child care sites in Northern Kennebec County as of September 30, 2019. Let's Go! is an evidence-based physical activity and healthy nutrition initiative.

Status: Completed

Approaches taken and resources used: In fiscal year 2019 (FY19), Northern Light Inland Hospital was able to exceed its objective by working with 29 registered Let's Go! school, out-of-school and child care sites in Northern Kennebec County. We built relationships by establishing a regular communication process with all Let's Go! site champions. We worked with our site champions and their individual Let's Go! teams to assess their environments, which helped to inform individual action plans developed by each site. Action plans targeted youth, families and staff and resulted in changes to environment and policies around the 5210 messages (5 or more fruits and veggies, 2 hours or less screen time, 1 hour or more of physical activity, and 0 sugary drinks). We developed a monthly "To Do List" tracking system that highlighted the action steps of each site as well as our coordinators role in the action plan, allowing for accountability and follow through by all parties. We also provided technical support to school districts for the Department of Education's mandated Wellness policies, further helping to support wellness initiatives for our sites and to continue to build relationships. We provided learning opportunities and technical support for all of our sites and recognized them for their efforts.

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

Local K – 12 schools, including their before and after school programs, school nutrition programs, child care sites, provider offices, and the Let's Go! home office.

Highlights: In the Spring of FY19, Northern Light Inland Hospital added the school nutrition programs for the Waterville, Winslow and Vassalboro school districts as Let's Go! registered sites impacting 10 schools in the three school districts, supporting healthy nutrition for students and staff. We added two new child care sites during FY19. There is also a burgeoning staff wellness interest in several of the Let's Go! sites that our Let's Go! coordinator is providing support for. Also, four of our school districts had their new Wellness policies approved by the Department of Education. Seven of our 29 schools and child care sites were recognized at the Gold recognition level (highest engagement) by the Let's Go! home office, while five sites were recognized as Bronze. Three of Northern Light Inland Hospital's practices were recognized by the Let's Go! home office for Advanced recognition (highest engagement), while another site was recognized as a Site of Distinction for addressing most, but not all of the criteria needed to achieve Advanced recognition.

Outcome Measure: In FY19, the outcome measure for this priority work achieved by Northern Light Inland Hospital was 29 registered Let's Go! sites, exceeding our objective of 26.

Project Lead: James Fortunato, TTS-C, Community Health Coordinator

Next Steps: Northern Light Inland Hospital will focus on utilizing evidence-based programs that increase access to physical activity and healthy nutrition options by engaging 26 Let's Go! sites, including school, out-of-school, and child care sites in Northern Kennebec County as of 9/30/20.

FY 2019 Progress Report

Priority #2: Substance Abuse

Objective: Complete integration of behavioral health services in primary care settings by adding service to Northern Light Primary Care, 246 Kennedy Memorial Drive, Waterville by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Inland Hospital expanded the Psychiatric Mental Health Nurse Practitioner's scope to provide services in all primary care settings through additional marketing and increased awareness among providers.

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

Practice Manager at Northern Light Primary Care, 246 Kennedy Memorial Drive.

Highlights: In FY19, Northern Light Inland Hospital completed the integration of behavioral health services in primary care settings by adding service to Northern Light Primary Care, 246 Kennedy Memorial Drive.

Outcome Measure: In FY19, the outcome measure for this priority work achieved by Northern Light Inland Hospital was to complete the integration of behavioral health services into five Northern Light Inland Hospital primary care practices.

Project Lead: Dr. Gavin Ducker, Senior Physician Executive/VP of Medical Affairs

Next Steps: We will not pursue this priority work in fiscal year 2020 (FY20), as we have operationalized this work at Northern Light Inland Hospital in our primary care settings and will continue the work outside of this priority reporting. In FY20, Northern Light Inland Hospital will increase the number of Medication-Assisted Treatment options for opioid use readily available in local communities from three to five.

FY 2019 Progress Report

Priority #3: Mental Health/Depression

Objective: Increase by one the number of Mental Health First Aid classes offered in Greater Waterville by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Inland Hospital collaborated with National Alliance on Mental Illness (NAMI) to hold two Mental Health First Aid trainings. This training is a national best practice, evidence-based certification course that teaches participants how to help someone who has a mental health challenge or is experiencing a mental health crisis. The training helps people identify, understand, and respond to signs of addiction and mental illness, as well as where to turn for help – professional, peer, and self-help resources. Mental Health First Aid teaches about recovery and resiliency – the belief that individuals experiencing these challenges can and do get better and use their strengths to stay well.

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

National Alliance on Mental Illness

Highlights: In FY19, Northern Light Inland Hospital offered two Mental Health First Aid trainings reaching 27 individuals.

Outcome Measure: In FY19, the outcome measure for this priority achieved by Northern Light Inland Hospital was offering two Mental Health First Aid classes, exceeding our objective by one class.

Project Lead: James Fortunato, Community Health Coordinator

Next Steps: In FY20, Northern Light Inland Hospital will offer two Mental Health First Aid trainings.

FY 2019 Progress Report

Priority #4: Poverty

Objective: Increase Community Benefit funding to Kennebec Valley Community Action Program (KVCAP) to support public transportation in Inland's service area by September 30, 2019.

Status: Completed

Approaches taken and resources used: With transportation identified as a priority need, we earmarked funds through our Community Benefit Grant Program for KVCAP. The Community Benefit Advisory Committee reviewed KVCAP's transportation ride data and plans. KVCAP received funds in February, 2019.

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

Northern Light Inland Hospital's Community Benefit Advisory Committee and KVCAP

Highlights: In FY19, Northern Light Inland Hospital paid KVCAP \$3,000 for transportation support for the community as part of its Community Benefit grant funding plan to enhance local ride service for low income and other residents.

Outcome Measure: In FY19, Northern Light Inland Hospital contributed \$3,000, an increase from FY18, Community Benefit funds designated for public transportation.

Project Lead: Sara Barry, Director, Community Relations

Next Steps: In FY20, Northern Light Inland Hospital plans to shift its focus from transportation to other social needs, specifically food insecurity where we will increase the number of medical offices screening for food insecurity and referring patients to community resources from six to eight by September 30, 2020. For individuals with food insecurity challenges who are unable to find transportation, we have some funding available for transportation to and from local food banks as a result of a grant obtained by our Community Health Navigator.

FY 2019 Progress Report

Systemwide priority: Opioid harm reduction – patient education

Objective: Increase from 0 to 5 the number of provider sites offering patient education materials on prescription drug safety that are embedded in the electronic health record (EHR) to be available for patient clinical visit summary by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Inland Hospital continued with its multi-year implementation of a new electronic health record (EHR). As we learned about the educational resources that were already available in the new EHR, it became clear that adding more materials that could be duplicative would not be productive.

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

Northern Light Ambulatory medicine administrators, providers and information officer

Highlights: In FY19, Northern Light Inland Hospital wanted to continue its work to provide patients with valuable information regarding substance use disorder (specifically, opioid use and abuse) and treatment alternatives. Our goal was to embed educational information into the new EHR that would be easily accessible for providers and staff to include with the patient’s clinical visit summary. In our research, we learned that the new EHR already provides a wide variety of opioid educational material.

Outcome Measure: In FY19, the objective for this priority was achieved by Northern Light Inland Hospital. Opioid educational material is now available to five primary care practices through the EHR.

Project Leads: Beth Held-Dobos, PA-C - Lead Provider-Primary Care and Jim Fortunato, Community Health Coordinator

Next Steps: In FY20, Northern Light Inland Hospital plans to engage in the prevention and management of opiate addiction with a focus on provider training in Medically-Assisted Treatment.

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 Inland's foodservice venues (cafeteria, vending, catering) according to 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 Inland Hospital's Food Services Committee reformulated four recipes. All of these recipes are offered on patient menus, sold in the cafeteria, and offered through catering requests.

- Mashed potatoes: We switched our mash potatoes to a lower sodium brand, reducing sodium from 170 mg. per serving to 90 mg. per serving.
- Basic muffin mix: We changed our basic muffin mix to a lower fat and sodium mix. We reduced the sodium from 450 mg. to 270 mg. and the total fat from 14 grams to 2 grams per muffin.
- White sliced bread: We reduced sodium per slice on white bread from 110 mg. to 95 mg.
- Wraps: We changed our wraps to a lower sodium version, reducing sodium from 800 mg. to 650 mg. per wrap.

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

Northern Light Inland Hospital's Food and Nutrition Department, Northern Light Food Services Committee and Northern Light Mercy Hospital

Highlights: In FY19, Northern Light Inland Hospital reformulated four recipes to reduce sodium on mashed potatoes, basic muffin mix, white sliced bread and wraps.

Outcome Measure: In FY19, Northern Light Inland Hospital reformulated four recipes, reducing sodium for these recipes offered on patient menus, sold in the cafeteria and offered through catering requests. We exceeded our objective of three reformulated recipes.

Project Lead: Scott Pearl, Food & Nutrition Services Director

Next Steps: In FY20, Northern Light Inland Hospital's dietitian and food service department will implement a new food initiative called "real. easy. good." It will help patients, staff and other community members identify the healthier menu options.

Conclusion

Northern Light Inland 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.