

# Community Health Strategy

## Inland Hospital

Addressing Community Health Needs

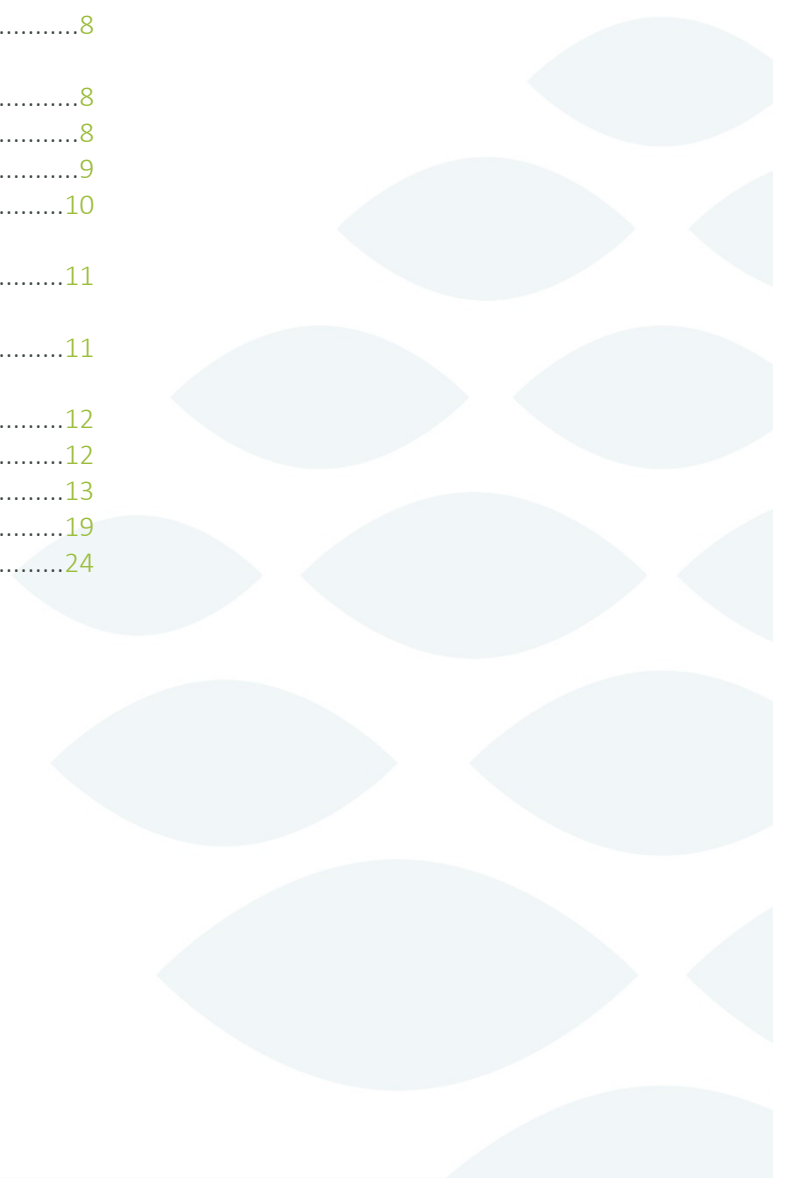
Fiscal Year 2023-2025



Northern Light Health<sup>SM</sup>

# Table of Contents

Letter from the president and board chair .....	3
Introduction.....	4
About Northern Light Health .....	4
About Northern Light Inland Hospital.....	4
Definition of community served .....	5
Addressing Community Health Needs .....	6
Shared Community Health Needs.....	6
Community Health Strategy .....	7
Process and methods for priority selection.....	7
Evaluation efforts .....	8
Feedback opportunity .....	8
Approval from governing board .....	8
Selected Priorities of Focus.....	8
Priority: Mental Health .....	8
Priority: Social Determinants of Health .....	9
Priority: Substance Use .....	10
Health Priorities Not Addressed .....	11
Conclusion .....	11
Appendix.....	12
Evaluation of Impact.....	12
Progress Report FY20 .....	13
Progress Report FY21 .....	19
Progress Report FY22 .....	24





## Letter from the President and Board Chair

We believe in providing Mainers with what they truly deserve—the absolute best in healthcare. This means actively engaging in our communities and working with partners to reduce external barriers that may prevent our neighbors from living their healthiest life.

Every three years, through the Maine Shared Community Health Needs Assessment (CHNA), Northern Light Health collaborates with Central Maine Healthcare, MaineGeneral Health, MaineHealth, and the Maine Center for Disease Control and Prevention to work with local organizations to engage communities to help identify priority health needs through a statewide assessment of community health needs. The data collected informs our community health improvement strategy for the next three years, resulting in this Community Health Strategy report—our road map towards building healthier, thriving communities. Within, you will find our identified data-driven areas of priority, rationale for each selected area, and intended actions to address the need.

We hope that you will take a moment to review the content within and please reach out with any questions or ideas you may have at [communitybenefits@northernlight.org](mailto:communitybenefits@northernlight.org). We believe Maine will become one of the healthiest states in the nation, but that starts with collaboration and a shared conviction that we can make a difference. By addressing priority areas of need, breaking down barriers, and promoting health equity for all Maine people, we are well on our way towards a brighter future.



Tricia Mercer, MBA, FACHE  
President, Northern Light Inland Hospital  
Senior Vice President, Northern Light Health



Crystal Olsen  
Chair, Board of Trustees  
Northern Light Inland Hospital

# Introduction

Northern Light Health and our more than 12,000 employees care deeply about our neighbors and communities. Our 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. Our more than 12,000 team members are committed to making healthcare work for you: our patients, communities, and employees.

We provide care to people from Portland to Presque Isle and from Blue Hill to Greenville. We are comprised of ten member hospitals and 585 long-term beds, a single physician-led medical group, eight nursing homes, six emergency transport members, and 41 primary care locations.

## About Northern Light Inland Hospital

At Northern Light Inland Hospital, our mission is to make healthcare work for you, and that means we are committed to providing you with high-quality care that meets your individual needs. Putting you first is how we approach everything we do.

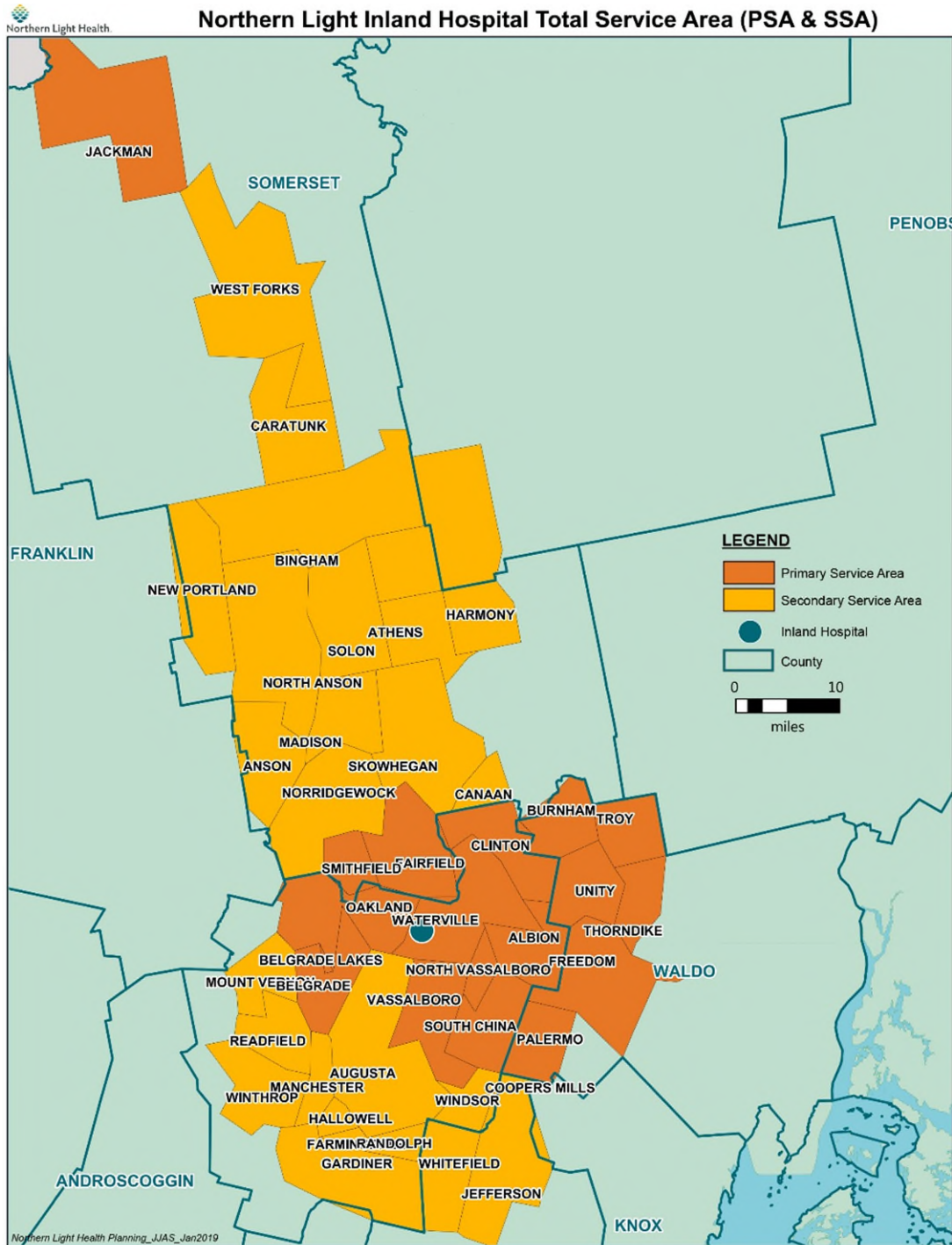
We are a 48-bed community hospital with 14 primary and specialty care physician offices in Waterville and three surrounding communities. Thanks to its close relationship with Northern Light Eastern Maine Medical Center, Inland patients have seamless access to a higher level of care when needed.

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 here, where staff are dedicated to providing 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.

Since 1998, Inland Hospital has been part of Northern Light Health, a statewide health delivery system with 12,000+ employees serving Maine.

## Definition of Community Served

Located in 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 (TSA's) are developed by the Northern Light Health Planning department based on neighboring zip codes from which a majority of a hospital's inpatient admissions originate. TSA's can sometimes overlap due to hospital locations or because of the specialty services provided by the hospitals.



### Demographic Data

KENNEBEC COUNTY		
	Percent	Number
American Indian/Alaskan Native	0.5%	661
Asian	0.9%	1,108
Black/African American	0.9%	1,039
Native Hawaiian or Pacific Islander	0.1%	85
White	95.7%	116,530
Some other race	0.2%	224
Two or more races	1.7%	2,106
Hispanic	1.6%	1,900
Non-Hispanic	98.4%	119,853
County population	121,753	
Veterans	9.9%	
Gay, lesbian, and bisexual (high school students)	12.7%	
Gay, lesbian, and bisexual (adults)	3.0%	
Transgender youth (high school students)	1.4%	
Persons with a disability	16.6%	

### Social Determinants of Health Data

KENNEBEC COUNTY	
Median household income	\$55,365
Unemployment rate	5.0%
Individuals living in poverty	12.8%
Children living in poverty	13.9%
65+ living alone	31.5%

## Addressing Community Health Needs

### Shared Community Health Needs Assessment

In 2022, Maine’s four largest healthcare systems – Northern Light Health, Central Maine Healthcare, MaineGeneral Health, and MaineHealth – as well as the Maine Center for Disease Control and Prevention 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 perspective on a broad set of health issues in Maine.

The Shared CHNA data was made widely available to the public, as county-level community engagement forums were held across the state, gathering additional feedback on priority issues and opportunities for community health improvement. New this cycle was an expanded effort to reach those who may experience systemic disadvantages and therefore experience a greater rate of health disparities. Two types of outreach were piloted in this effort. One effort included nine community sponsored events hosted by organizations having statewide reach representing the following communities: Black or African Americans; people who are homeless or formerly homeless; older adults; people who are deaf or hard of hearing; people who define themselves or identify as lesbian, gay, bisexual, transgender, and queer and/or questioning (LGBTQ+); people with a disability; people with a mental health diagnosis; people with low income; and youth. In addition to these events, 1,000 oral surveys were conducted in collaboration with eight ethnic-based community organizations’ community health workers in order to better reach Maine’s immigrant population. These reports and the community input received are fundamental to achieving our goal of being a trusted and valued partner to improve the health of the people and communities we serve.

Results of the 2022 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, district public health liaisons, 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

As a member of a partnering healthcare system in the Maine Shared Community Health Needs Assessment (Shared CHNA) effort, Northern Light Health's Community Health Council recognized the value, reach, and influence of aligned engagement efforts with a shared purpose. Review of the county CHNA forum priority voting revealed that mental health, social determinants of health, and substance use were among the top four priorities in almost every county CHNA forum. These three priority areas were adopted as shared priorities where Northern Light Health member organizations would engage in common strategy to achieve greater statewide effect.

Northern Light Inland Hospital's community health strategy was developed to include our systemwide shared priority areas of work reflecting upon the quantitative health profile indicators and qualitative prioritization derived from the Shared CHNA's community engagement process. We also considered local readiness and capacity to address these needs in partnership with our local communities. Our planning team included representatives with knowledge and insight of the communities we serve.

Members of Inland Hospital's Community Health Strategy team included individuals representing the following positions:

- Community Health Coordinator, Inland Hospital
- Director of Community Health, Inland Hospital
- Community Health Navigator, Inland Hospital
- Director of Women's Health, Inland Hospital
- Community Health Coordinator, Sebasticook Valley Hospital
- VP of Finance, Inland Hospital
- Director of Marketing and Communications, Inland Hospital
- Communications Specialist, Inland Hospital
- Primary Care Practice Managers, Inland Hospital
- Director of Quality/Risk Management, Inland and Sebasticook Valley Hospital
- Quality Support Coordinator, Inland Hospital
- Clinical Diabetes and Endocrinology Clinic Manager, Inland Hospital
- VP of Nursing and Patient Care Services, Inland Hospital
- Infection/Prevention RN, Inland Hospital
- Clinical Educator, Inland Hospital
- Central District Public Health Liaison
- Local teachers, staff, and administrators from RSU 18, MSAD 59, and RSU 3 districts
- Local teachers, staff, and administrators from Waterville/Winslow Schools
- Various staff from Kennebec Valley Community College, Colby College, and Thomas College

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

- Shared CHNA prioritization: How the health priority rank in the Shared CHNA
- Systemwide priority areas of work as determined by the Community Health Council
- Health equity: Which populations are disproportionately affected by the priority's area of focus; which populations may be experiencing unique barriers to resolve the issue; and what data or themes emerged from the CHNA Forums and County Health Profile that reinforce selecting one or more populations of focus
- Ability to leverage local community assets: Identification of potential community partnerships to engage 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 effect given the community benefit resources available

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

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

## Evaluation Efforts

Northern Light Inland Hospital will monitor and evaluate the strategies related to priority areas of work for the purpose of tracking the implementation of these strategies as well as to document the anticipated effect. Through internal quarterly reporting practices, we plan to document and track measures, approaches and resources used, partners engaged, and highlights related to these priority areas 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](mailto: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 19, 2022.

## Selected Priorities of Focus

### Priority 1: Mental Health (also referred to as Behavioral 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. Mental health can affect an individual's ability to practice good health behaviors and seek care or resources when needed. 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.

Northern Light Inland Hospital's Community Health Strategy team recognizes that addressing mental health needs is a priority for our community with a focus on health equity especially for those who may be experiencing health disparities. There are substantial local community assets and 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.

### **Intended actions to address the need**

Northern Light Inland Hospital will partner with schools and other community organizations to ensure children and their families have improved access to mental health prevention, early intervention, and treatment services. For example, efforts will be made to increase suicide awareness and mental health and wellbeing through the promotion of various mental health resources (e.g., Suicide Prevention Resource Center, Acadia CARES packages and videos, National Alliance of Mental Illness trainings, Beacon Health Videos, etc.). Inland Hospital will also offer tools and resources to increase provider and clinical staff confidence and comfort when discussing mental health and referring patients to resources. Inland will work collaboratively with community partners to bring training and education opportunities in our service area.

### **Anticipated impact of these actions/expected outcomes**

The anticipated impact of these actions includes increased awareness and accessibility of mental health prevention, intervention, and treatment options within our community and our hospital staffs' ability to address and respond to mental health and illnesses for our patients. Suicide awareness and prevention efforts through community education will increase.

### **Programs and resource allocation**

Staff time and our relationship with Northern Light Acadia Hospital will be engaged to address this health need.

### **Planned collaborations**

Inland Hospital will collaborate with local schools and school districts to offer the trainings and resources. Inland Hospital will also collaborate with other businesses or organizations to provide mental health trainings for their staff members.

### **Population of focus**

Inland Hospital has resources and partnerships available to be leveraged in support of this need. Families and children within our service area, including parts of Kennebec, Waldo, and Somerset counties, will be the primary population of focus. In addition, Inland's staff and other community organizations will be offered mental health training opportunities.

## **Priority: 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 and affordable housing, reliable transportation, access to healthcare services, and food security. 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 a person’s social and environmental factors.

Northern Light Inland Hospital’s Community Health Strategy team has identified Social Determinants of Health as a priority need for our community with a focus on health equity, especially for those who may be experiencing health disparities. There are substantial local community assets and 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 partner with the community to improve equitable access to social supports, community resources and healthcare services. Inland Hospital will leverage its relationship with other area organizations and programs to ensure increased access to resources such as housing, transportation, food, and other social determinants of health. For example, Inland may look to increase social determinants of health screening for patients to distribute resources such as toiletries or food bags. Inland Hospital will work with physicians and providers within our network to ensure that these accessible resources are being promoted effectively in order to meet patients’ needs. Other opportunities may include facilitating enrollment of other organizations in the FindHelp.org directory and other efforts to improve access and quality of care for underserved patient groups.

### **Anticipated impact of these actions/expected outcomes**

Increased participation in identifying social needs along with increasing the amount of social determinant resources in our community and their accessibility.

### **Programs and resource allocation**

Staff time will be committed to addressing the health need of social determinants of health.

### **Planned collaborations**

Inland Hospital will collaborate with local community-based initiatives to increase availability of housing, transportation, food, and other resources. Inland Hospital also plans to collaborate with local schools and organizations to bring awareness to the resources offered.

### **Population of focus**

Individuals disproportionately affected by various social determinants of health within the Northern Light Inland Hospital service area, including parts of Kennebec, Waldo, and Somerset counties.

## **Priority: Substance Use**

### **Rationale**

Substance use, including opioids, alcohol, tobacco, and other drugs, have a major influence on individuals, children, other family members, 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.

Northern Light Inland Hospital's Community Health Strategy team determined it was feasible to address this need with a focus on health equity, especially for those who may be experiencing health disparities. There are substantial local community assets and 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

Inland Hospital will leverage community partnerships to reduce barriers and improve access to and availability of substance use prevention, treatment, recovery, and harm reduction services. For example, one effort may include the recruitment and training of providers in medication-assisted treatment to treat and reduce substance use disorders in our community. Another intended action may include adopting a practice for rapid induction of buprenorphine/naloxone in the emergency department for individuals with substance use disorder. Efforts will be made to connect and work with community groups to increase partnerships to help individuals navigate treatment and recovery services.

### Anticipated impact of these actions/expected outcomes

Strengthening current collaborations and engaging new partnerships that will result in a reduction of deaths, disability, and suffering associated with substance use disorder in our community.

### Programs and resource allocation

Staff time will be used to address the health need of substance use disorders.

### Planned collaborations

Northern Light Inland Hospital will engage existing partners such as Northern Light Sebecook Valley Hospital and develop relationships with new community partners to further expand efforts related to substance use disorders.

### Population of focus

Individuals disproportionately affected by substance use disorders within the Northern Light Inland Hospital service area, including parts of Kennebec, Waldo, and Somerset counties.

## 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. Priorities not selected, due to a variety of reasons are listed below:

- Access to care: Access to care was not selected as an independent priority of focus as many of our efforts identified in our strategy are connected to access issues. In addition, our hospital has current initiatives that are ongoing and part of our continual mission to improve access to care such as provider recruitment, engagement of navigators or the equivalent, and other efforts that support this priority.

## 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 2025 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 (2019) 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. To do so effectively, we regularly monitor the effect 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 Inland Hospital to address community health priorities adopted in 2019.

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 Fiscal Year 2020
- Progress Report to Our Community Fiscal Year 2021
- Progress Report to Our Community Fiscal Year 2022

For additional information, visit <https://northernlighthealth.org/2019-Community-Health-Strategy>

Fiscal Year 2020

# PROGRESS REPORT TO OUR COMMUNITY

Addressing community health needs



# Progress report update

## FY 2020 Progress Report

### Priority #1: Physical Activity, Nutrition, Weight

**Objective:** Active Communities: 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 childcare sites in Northern Kennebec County as of 9/30/20.

**Status:** Completed

**Strategy to achieve the objective (approaches taken, and resources used):** Let's Go! is an evidence-based, multi-sectoral initiative designed to reduce childhood obesity, with an emphasis on physical activity and healthy nutrition education, policy and environmental change. In Fiscal Year 2020 (FY20), Northern Light Inland Hospital's Let's Go! coordinator met frequently in person with all of our Let's Go! site champions before COVID-19 resulted in the cancellation of schools, some childcare sites and out-of-school programs. At that point, we kept sites supported through e-mail and virtual mediums such as Skype or Zoom. A major key to our success in meeting our objective revolved around relationship building, with consistent and persistent communication and support. In addition, holding sites accountable for their action plans by following up and offering support was well appreciated by sites. Follow through by the Let's Go! coordinator with his responsibilities and commitments also served to enhance relationships.

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

- RSU 18 school district
- Waterville school district
- Winslow school district
- Vassalboro school district
- Maine Arts Academy
- Mount Merici Academy
- Alfond Youth Center
- Eight early care and education sites
- Four out-of-school program sites
- Nutrition program for Waterville, Winslow, Vassalboro
- Six Northern Light Inland Hospital healthcare sites
- Colby College
- Northern Light Acadia Hospital
- Northern Light Inland's Hospital's Community Health Navigator
- Healthy Communities of the Capital Area
- Healthy Northern Kennebec
- Somerset Public Health
- Let's Go! home office
- Local SNAP Educators

**Highlights:** In FY20, Northern Light Inland Hospital, despite COVID 19, was able to increase the number of Let's Go! sites from 26 to 28 over the course of the fiscal year. In addition, we had six more sites complete action plans with specific goals during FY20 versus FY19. Our primary success revolved around relationship

building. With the start of the 2020/2021 school year, Inland Hospital's Let's Go! coordinator has been successful engaging sites, despite the challenges associated with COVID-19. Other Let's Go! coordinators across Maine have not had similar success reaching sites. A budding partnership with Colby College and the Colby Cares mentors, who mentor students in our local schools, was developed. When the mentoring program is able to resume in local schools, our Let's Go! coordinator will provide training to approximately 400 Colby College student mentors around Let's Go! initiatives. This will enable them to support wellness with the youth that they work with. In addition, we supported Maine Arts Academy in developing a Department of Education compliant wellness policy. Support was provided to all Let's Go! sites during COVID-19. We provided information and support for students, staff and families in managing stress, increasing physical activity, eating healthy and limiting recreational screen time.

**Outcome measure:** In FY20, Northern Light Inland Hospital increased the number of registered Let's Go! sites from 26 in FY19 to 28. We reached approximately 14,600 people.

**Project lead:** Jim Fortunato, community health coordinator

**Next steps:** In fiscal year 2021 (FY21), Northern Light Inland Hospital will look to "maintain the number of evidence-based programs focused on increasing access to and availability of physical activity at one through 9/30/21." We will continue to support the Let's Go! program to schools, early care and education, out-of-school and healthcare provider sites.

## Priority #2: Mental Health

**Objective:** Normalize Mental Health: Help normalize mental health by providing educational efforts to raise awareness and access to mental health services by maintaining two Mental Health First Aid classes offered in Northern Kennebec County by 9/30/20.

**Status:** Completed

**Strategy to achieve the objective (approaches taken, and resources used):** In FY20, Northern Light Inland Hospital cancelled its Adult Mental Health First Aid training, planned for June 1, 2020 due to COVID-19. This training was to be provided by the National Alliance for Mental Illness (NAMI), allowing us to meet our mental health objective of offering the community two Adult Mental Health First Aid trainings during FY20. We were able to offer the community an Adult Mental Health First Aid training on October 9, 2019 at Educare that was attended by 17 individuals.

Despite the setback from COVID-19, we addressed our Mental Health objective by utilizing two alternative strategies to normalize mental health, help recognize signs and symptoms and provide strategies to support those needing support. First, nine Inland Hospital leaders were trained to recognize stress and other mental health challenges with staff and learned tips and tools for providing support. This training was provided through the "My Strength Healthy Life Resources" program.

In addition to the Adult Mental Health First Aid and My Strength Healthy Life Resources programs, we offered a third mental health training opportunity during FY20, helping us exceed our original objective of offering two mental health trainings. Inland Hospital's community wellness coordinator sent information about the live webinar and YouTube link for Northern Light Acadia Hospital's webinar titled "Supporting Youth and Families-Managing Stress and Anxiety in the Age of COVID-19" to all of the 28 registered Let's Go! sites in

northern Kennebec County, including schools, childcare and out-of-school sites. Many of the sites forwarded the link to caregivers. The live webinar had an audience of 950 people and the YouTube offering added another 1,109 hits, resulting in a total audience of 2,059 participants in this program.

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

- National Alliance of Mental Illness (NAMI)
- Educare
- Northern Light Acadia Hospital
- Northern Light Inland Hospital leadership
- Northern Light Human Resources
- All 28 registered Let's Go! sites including school, childcare and out-of-school program sites

**Highlights:** In FY20, Northern Light Inland Hospital had 17 individuals attend an Adult Mental Health First Aid training, nine Inland Hospital leaders attend a "My Strength Healthy Life Resources" program to support the mental health of staff, and 2,059 individuals attend the "Supporting Youth and Families-Managing Stress and Anxiety in the Age of COVID-19".

**Outcome measure:** In FY20, Northern Light Inland Hospital helped normalize mental health by providing educational programming to raise awareness and access to mental health services by providing three mental health educational programs in northern Kennebec County by 9/30/2020. We exceeded our objective of offering two programs.

**Project lead:** Jim Fortunato, community health coordinator

**Next steps:** In FY21, Northern Light Inland Hospital will increase educational programs to raise awareness, readiness and access to mental health services that support middle and high school youth and their families from zero to one by 9/30/2021. Inland Hospital will partner with Northern Light Acadia Hospital and one local school district to offer a virtual forum around the content in the Acadia Cares kits, a youth behavioral health support resource for caregivers and school staff, designed to help identify signs and symptoms of behavioral health issues of middle and high school students and learn strategies to support them.

### Priority #3: Substance Use

**Objective:** Increase the number of Medication Assisted Treatment (MAT) options for opioid use readily available in local communities from three to five by 9/30/20.

**Status:** Completed

**Strategy to achieve the objective (approaches taken, and resources used):** In FY20, Northern Light Inland Hospital intended to make mandatory Medication Assisted Treatment (MAT) training a key performance indicator for all primary care providers by September 2020 and was looking to offer MAT in all five primary care practices by March 2020. COVID-19 impacted progress on this initiative. However, we persisted to encourage MAT, despite the pandemic. Though COVID-19 was a factor in not having all primary care providers MAT trained, our persistence paid off in that we met our objective of increasing the number of MAT options for opioid use from three to five sites by 9/30/20.

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



All Northern Light Inland Hospital primary care providers  
All Northern Light Inland Hospital practice managers

**Highlights:** In FY20, Northern Light Inland Hospital met its Substance Use objective by increasing the number of primary care practices offering Medication Assisted Treatment (MAT) from three to five. In addition, we increased the number of primary care providers who are MAT trained from five to seven.

**Outcome measure:** In FY20, Northern Light Inland Hospital met its Substance Use objective by increasing the number of Medication Assisted Treatment options for opioid use readily available in local communities from three to five by 9/30/20.

**Project leads:** Gavin Ducker, MD, senior physician executive/vice president of medical affairs; Beth Held-Dobos, PA-C, medical director of primary care

**Next steps:** In FY21, Northern Light Inland Hospital will increase the number of Medication Assisted Treatment options for opioid use readily available in local communities from seven to 11 providers by 9/30/21.

#### Priority #4: Social Determinants of Health

**Objective:** Increase the number of sites screening for food insecurity and referring patients to community resources from six to eight by 9/30/20.

**Status:** Completed

**Strategy to achieve the objective (approaches taken, and resources used):** In FY20, Northern Light Inland Hospital expanded the number of practices asking patients the two-question food insecurity screening due to conversation and collaboration amongst Northern Light Inland Hospital practice managers, providers, leadership, and Inland's Community Health Navigator. Clinical and support staff, both internally and throughout Northern Light Health, recognize food insecurity as a priority health challenge in our communities.

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

- Five Northern Light Primary Care practices in Waterville, Oakland, Unity, Madison
- Northern Light Women's Health
- Northern Light Endocrinology and Diabetes Care
- Northern Light Walk-In Care
- Northern Light Rheumatology
- Northern Light Orthopedics
- Northern Light Podiatry
- Northern Light Inland Hospital's community health navigator
- Northern Light Inland Hospital's community wellness coordinator
- Northern Light Community Health Council
- Good Shepherd Food Bank
- Local food banks
- KVCAP

**Highlights:** In FY20, Northern Light Inland Hospital had 12 sites engage 34,715 individuals with the two-question food insecurity screening and referred them to community resources. 968 positive screenings were identified during FY20.

**Outcome measure:** In FY20, Northern Light Inland Hospital surpassed its outcome measure of increasing the number of sites screening for food insecurity and referring patients to community resources from six to eight by 9/30/20. We had a cumulative total of 12 sites participate during FY20.

**Project lead:** Beth Held-Dobos, PA-C, medical director of primary care

**Next steps:** In FY21, Northern Light Inland Hospital will look to maintain the number of patients screened for food insecurity and referred to community resources at 34,715 by 9/30/21.

## Conclusion

Northern Light Inland Hospital continues work on identified priorities through its 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.

Fiscal Year 2021

# PROGRESS REPORT TO OUR COMMUNITY

Addressing community health needs



**Northern Light**<sup>SM</sup>  
Inland Hospital

# Progress report update

## FY 2021 Progress Report

### Priority #1: Physical Activity, Nutrition, Weight

**Objective:** Maintain the number of evidence-based programs focused on increasing access to and availability of physical activity at one through 9/30/21.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In fiscal year 2021 (FY21), Northern Light Inland Hospital focused on the evidence-based Let's Go! program, which promotes healthy eating and active living to reduce childhood obesity rates. The hospital's Let's Go! coordinator met in-person or virtually with Let's Go! site champions from schools and childcare centers. Sites were primarily supported virtually, through emailing or virtual meeting platforms. The main focus of this year was to continue building relationships with these sites and be available for support through the year as they navigated challenges with COVID-19 while trying to implement Let's Go! 5210 strategies encouraging individuals to consume five fruits or vegetables per day, two hours or less of recreational screen time, one hour of physical activity every day, and zero sugary beverages. The coordinator worked with site champions and other engaged staff to develop action plans for their various schools/early childcare programs/school nutrition programs for the year, with plans aimed at increasing physical activity and nutritious choices. The coordinator assisted in keeping the sites accountable by following up on their goals and offering persistent communication and support.

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

- Alfond Youth Center
- Central Maine Chapter of the New England Mountain Bike Association
- Healthy Communities of the Capital Area
- Healthy Northern Kennebec
- Let's Go! Home Office
- Maine Arts Academy
- Northern Light Acadia Hospital
- RSU 18 school district
- Six early care and education sites
- Somerset Public Health
- Three Northern Light Inland Hospital healthcare sites
- Waterville Parks and Rec
- Waterville school district
- Waterville, Winslow, and Vassalboro school nutrition program
- Winslow school district

**Outcome measure:** In FY21, Inland Hospital maintained the number of evidence-based programs aimed at increasing physical activity and nutritious choices at one. The hospital increased the number of registered Let's Go! sites by four throughout FY21, for a final total of 22 registered sites. The program reached approximately 10,950 individuals.

**Project lead:** Sherry Tardy, director of Business Development and director of Community Health

**Next steps:** In fiscal year 2022 (FY22), Inland Hospital will look to maintain the number of evidence-based programs focused on increasing access to and availability of physical activity at one through 9/30/22. We will continue to offer the Let's Go! program to schools, early care and education, out-of-school, and provider sites, supporting our returning sites and increasing recruitment efforts to register new sites.

## Priority #2: Mental Health

**Objective:** Increase educational programs to raise awareness, readiness, and access to mental health services that support middle and high school youth and their families from zero to one by 9/30/21.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY21, Northern Light Inland Hospital's Community Wellness coordinator worked to develop a behavioral health program for a local school district, to address topics of anxiety, suicide prevention, bullying, and resiliency. They partnered with Northern Light Acadia Hospital and Acadia's associate vice president of Pediatric Services to facilitate a behavioral health program for 25 staff at the Maine Arts Academy in Sidney on April 30, 2021. The program addressed stressors for students, staff, and caregivers related to the COVID-19 pandemic. The staff who attended the presentation were provided tools and strategies for self-care and supporting the 201 students at the high school.

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

- Maine Arts Academy staff and students
- Northern Light Acadia Hospital
- Northern Light Sebecook Valley Hospital
- RSU 18 school district
- Winslow school district

**Outcome measure:** In FY21, Inland Hospital collaborated with Acadia Hospital and held one facilitated behavioral health training at a local school for 25 staff who taught 201 additional students.

**Project lead:** Sherry Tardy, director of Business Development and director of Community Health

**Next steps:** In FY22, Inland Hospital will aim to increase the number of sites receiving mental health programming from one to two by 9/30/22, by engaging another school district in collaboration with Acadia Hospital.

## Priority #3: Substance Use

**Objective:** Increase the number of Medication-Assisted Treatment (MAT) options for opioid use readily available in local communities from seven to eleven by 9/30/21.

**Status:** In progress

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY21, Northern Light Inland Hospital aimed to recruit and train MAT prescribers at the hospital's primary care sites. They were able to maintain seven MAT trained providers at the beginning of FY21 despite COVID-19 challenges but had to adapt and focused on developing provider engagement strategies to involve more providers in MAT, resulting in a net of five MAT trained providers at the end of FY21.

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

All Inland Hospital primary care providers and practice managers

**Outcome measure:** In FY21, Inland Hospital worked toward its substance use objective of increasing the number of primary care practices offering MAT and increasing the number of MAT trained primary care providers and was able to maintain a net of five primary care providers certified in MAT.

**Project lead:** Beth Held-Dobos, PA-C, medical director – Primary Care

**Next steps:** In FY22, Inland Hospital aims to recruit and train MAT prescribers at Inland Hospital's primary care sites and increase the number of MAT options for opioid use readily available in local communities from five in FY21 to seven in FY22.

#### Priority #4: Social Determinants of Health

**Objective:** Maintain the number of patients screened for food insecurity and referred to community resources at 34,715 by 9/30/21.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY21, Northern Light Inland Hospital engaged 18 healthcare partner sites throughout the year to conduct a two-question screening for food insecurity at patient intake using the hospital's Cerner medical record platform. They aimed to expand this outreach from 12 partner sites in FY20, as food insecurity continues to be a major challenge to the Waterville area community. The COVID-19 pandemic caused an increased awareness in food insecurity in this community as well. Early in FY21, Inland Hospital partnered with the Good Shepherd Food Bank and the USDA Farmers to Families Food Box program to host a drive-up food pantry event. Community members could drive up and food supplies were put directly into their vehicle. 1,150 boxes of free food were distributed.

**Partners engaged:** Inland Hospital partnered with the following Northern Light members and community organizations:

- Inland Hospital Community Health Navigator
- Primary Care Practices (Unity, Madison, Oakland, Waterville)
- Women's Health
- Physical Medicine
- Endocrinology and Diabetes
- Walk-In Care
- Rheumatology and Neurology
- Orthopedics
- Podiatry

Good Shepherd Food Bank  
Healthy Northern Kennebec  
RSU #18, Winslow, Vassalboro, and Waterville School Districts  
Greater Waterville Area Early Education Sites  
Local Food pantries and food banks

**Outcome measure:** In FY21, Inland Hospital measured the number of food insecurity screenings conducted at 41,852 at 18 different hospital sites. This surpassed the goal of 34,715 patients being screened for food insecurity, resulting in 744 positive screens, reaching 41,852 individuals.

**Project lead:** Beth Held-Dobos, PA-C, medical director, Primary Care

**Next steps:** In FY22, Inland Hospital aims to maintain the number of patients screened for food insecurity and referred to community resources at 41,852 by 9/30/22.

## 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.

Fiscal Year 2022

# PROGRESS REPORT TO OUR COMMUNITY

Addressing community health needs



**Northern Light**<sup>SM</sup>  
Inland Hospital



# Progress report update

## FY 2022 Progress Report

### Priority #1: Physical Activity, Nutrition, Weight

**Objective:** Maintain the number of evidence-based programs focused on increasing access to and availability of physical activity at one through 9/30/22.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In fiscal year 2022 (FY22), Northern Light Inland Hospital was able to maintain the number of evidence-based programs focused on increasing access to and availability of physical activity at one by maintaining the Let's Go! 5-2-1-0 program for the northern Kennebec County region. Inland's Community Health coordinator served as the local county coordinator for Let's Go! and brought programming and activities to schools and childcare centers across northern Kennebec County. The FY22 school year still posed challenges due to local schools and centers being short-staffed and not always allowing visitors inside their buildings because of the COVID-19 pandemic. However, throughout the year our coordinator was able to disseminate information to registered sites to distribute to families, spreading the word about healthy living, physical activity, and healthy choices. Our coordinator was also able to offer professional development trainings to center/school staff, along with activities promoting healthy choices and increasing physical activity, such as Story Walks, sugary beverage displays, policy reviews, and healthy eating games. In addition, we planned community activities to increase physical activity, including family fun outdoor events on local trail systems, and maintained our own trail system at the hospital to bring more free physical activity opportunities to the community.

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

- Happy Days Childcare
- Educare Central Maine
- George J. Mitchell Before/After School Program
- Lake Region Head Start, SKCDC
- American Basics Childcare
- Little Angel's Family Childcare
- Alfond Youth and Community Center
- The Neighborhood, Vassalboro and Winslow
- Centerpoint Daycare
- Belgrade Central School
- China Middle School
- China Primary School
- James H. Bean School
- Messalonskee High School
- Messalonskee Middle School
- Albert S. Hall School
- Atwood Primary School
- Williams Elementary School
- Vassalboro Community School
- Maine Arts Academy

Winslow Elementary School  
Winslow High School  
Winslow Junior High School  
Winslow, Waterville, and Vassalboro School Nutrition Programs  
Healthy Communities of the Capital Area

**Outcome measure:** In FY22, Northern Light Inland Hospital was able to engage 29 local sites to deliver active living and healthy eating programming, reaching approximately 5,000 children through the outreach, along with 7,000 individuals including families, staff, and other individuals reached through programming.

**Project lead:** Hanna Bouchard, Community Health/Let's Go! Northern Kennebec coordinator

**Next steps:** In fiscal year 2023 (FY23), Northern Light Inland Hospital will not be pursuing physical activity, nutrition, and weight as a formalized community health improvement plan as other priority strategies have been identified through our community health needs assessment process that will be pursued as part of our mission to improve our communities' health and access to care. We will continue to promote healthy living, eating, and physical activity through the foundational work laid out by this effort.

## Priority #2: Mental Health

**Objective:** Increase the number of sites receiving educational programs to raise awareness, readiness, and access to mental health services from one to two by 9/30/22.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY22, Northern Light Inland Hospital provided interested local schools with Acadia CARES (Child Adolescent Resource and Education Series) toolkits to increase awareness of suicide prevention and mental health resources in the community. We also promoted other educational programs to raise awareness, readiness, and access to mental health services, including promoting Healthy Life Resources from Northern Light Acadia Hospital, mental health first aid training from National Alliance of Mental Illness Maine, and trauma-informed practice and adverse childhood experiences (ACES) training from Maine Resilience Build Network. Stress less suggestions were provided to partnered schools and childcare sites, as well as suggestions and assistance with promoting staff mental health and wellbeing.

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

Vassalboro Community School  
Madison Elementary, Junior High, and High School (MSAD 59)  
Let's Go! 5210 registered sites in Northern Kennebec County  
Northern Light Acadia Hospital

**Outcome measure:** In FY22, Northern Light Inland Hospital was able to increase the number of sites with access to mental health training programs from one to four. Overall, approximately 11 staff were reached through the educational trainings on the Acadia CARES program, and approximately 29 individuals were reached through the promotion of other educational trainings and available resources. These individuals provided additional outreach to community members as they passed along information to other site staff, parents and families, and the children in their programs.

**Project lead:** Sherry Tardy, director, Community Health

**Next steps:** In FY23, Northern Light Inland Hospital will again focus on mental health as a priority area, as it was identified through our community health needs assessment. Our objective is to educate and empower others to recognize, support, and respond to mental and behavioral health needs of children. Our goal is to provide children and families with the mental and behavioral health resources they need to thrive, and our strategy to achieve this will be to partner with schools and other community organizations to ensure children and their families have improved access to mental health prevention, early intervention, and treatment services. Our shared objective includes increasing the number of individuals trained to support the mental health needs of children and youth by training 20 individuals in youth mental health identification and referral.

### Priority #3: Substance Use

**Objective:** Increase the number of Medication-Assisted Treatment options for opioid use readily available in local communities from three to six by 9/30/22.

**Status:** In progress

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY22, Northern Light Inland Hospital aimed to train and certify providers in Medication-Assisted Treatment options to provide increased access to treatments and resources for individuals in the community with substance use disorder.

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

- Northern Light Primary Care Unity
- Northern Light Primary Care Waterville
- Northern Light Primary Care Madison

**Outcome measure:** In FY22, Northern Light Inland Hospital engaged three sites and five providers in offering Medication-Assisted Treatment.

**Project leads:** Beth Held-Dobos, PA-C, lead provider, Primary Care; Tim Lecrone, director, Physician Practices

**Next steps:** In FY23, Northern Light Inland Hospital will continue to implement efforts surrounding substance use as a priority area. With the new objective of improving pathways to prevention, treatment, and recovery for individuals with substance use disorder, we aim to improve distribution and preventive access to the state-sponsored Naloxone kits, increase the number of primary care practice teams trained in trauma informed care, and engage in meaningful, trusted partnerships with other community organizations.

### Priority #4: Social Determinants of Health

**Objective:** Maintain the number of patients screened for food insecurity and referred to community resources at 34,715 by 9/30/22.

**Status:** Completed

**Strategy (approaches taken, and resources used) and highlights from this effort:** In FY22, Northern Light Inland Hospital screened patients at their appointments for food insecurity and related challenges at 18 different sites. Key to our success was reaching out to all primary care and specialty sites to ensure that we had many sites using our screening question to identify needs. Food bags were given to patients if they had a positive response to the screening, along with additional resources on food access in the area.

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

- Good Shepherd Food Bank
- Northern Light Diabetes and Endocrinology Nutrition/Education
- Northern Light Neurology Waterville
- Northern Light Orthopedics Waterville
- Northern Light Osteopathic Care Waterville
- Northern Light Podiatry Waterville
- Northern Light Primary Care Madison
- Northern Light Primary Care Oakland
- Northern Light Primary Care Unity
- Northern Light Primary Care Waterville
- Northern Light Rheumatology Waterville
- Northern Light Surgery Waterville
- Northern Light Walk-In Care Waterville
- Northern Light Women’s Health Waterville
- Northern Light Physical Medicine Waterville
- Northern Light Primary Care Concourse West
- Northern Light Primary Care KMD

**Outcome measure:** In FY22, Northern Light Inland Hospital had 18 different sites conduct 40,846 screenings, resulting in 601 positive screens.

**Project leads:** Beth Held-Dobos, PA-C, Medical director, Primary Care; Tim Lecrone, director, Physician Practices

**Next steps:** In FY23, Northern Light Inland Hospital will pursue social determinants of health as a priority area, working to connect patients with community resources they need to improve health and well-being by partnering with community organizations to improve equitable access to social supports, community resources, and healthcare services. This will include increasing community partner engagement with findhelp.org.

## 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.