Fiscal Year 2018

Progress report to our community

Addressing community health needs





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Scott A. Oxley, MBA, CPA President

Northern Light Acadia Hospital We are proud to announce that EMHS has become Northern Light Health! More than a name change, the new brand conveys our promise to lead Maine on a path to better health. We have come together to move healthcare in a new direction, creating a system that works for our patients, our people, and our communities.

In 2016, EMHS partnered with <u>three other Maine healthcare systems</u> and the Maine Center for Disease Control and Prevention to create a <u>Community Health Needs Assessment (CHNA)</u>. We used that assessment and public input to develop a three-year strategy to improve the health and well-being of the communities that we serve.

The following is an update on the progress of that community health improvement plan for our fiscal year 2018. Northern Light Acadia Hospital has its own unique set of priorities that we are addressing, including:

- Drug and Alcohol Abuse
- Mental Health, and Access to Behavioral Care and Mental Healthcare

We are also working together with other Northern Light Health members throughout the state to prevent and treat opioid addiction and to improve access to healthy food for patients, families and communities.

As Northern Light Acadia Hospital, we are striving for better: better access to health services, better care for our patients, and better ways to address the health issues that affect our communities. With the strength of our system and the relationships built with our communities, we know that together we'll create a healthier Maine.

Sincerely,

A cout A. Oylen

Scott Oxley, MBA President, Northern Light Acadia Hospital

Progress report update

FY 2018 Progress Report Priority #1: Drug and alcohol abuse: access to medication assisted therapy

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

Status: Completed

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

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

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

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

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

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

FY 2018 Progress Report Priority #2: Mental health, and access to behavioral care and mental healthcare

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

Status: Completed

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

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

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

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

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

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

FY 2018 Progress Report Systemwide priority: Healthy food access – healthy hospital food

Objective: Reformulate three recipes to improve the nutritional content of food options offered at foodservice venues (cafeteria, vending, catering), U.S. DHHS and CDC's Health and Sustainability Guidelines for Federal Concessions and Vending Operations Guidelines* by September 30, 2018.

Status: Completed

Approaches taken and resources used: In fiscal year 2018 (FY18), Northern Light Acadia Hospital revised its cafeteria menu to offer new, healthy menu options.

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

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

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

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

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

Conclusion

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

Northern Light Acadia Hospital 268 Stillwater Avenue Bangor, ME 04401

northernlighthealth.org