

Fiscal Year  
2017-2019

# Community Health Strategy

Addressing Community Health Needs



Maine Coast Memorial Hospital



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# Introduction

EMHS and our more than 11,000 employees care deeply about our neighbors and communities. EMHS 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.

Maine Coast Memorial 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, Maine Coast Memorial Hospital creates healthier communities through the provision of services, resources, and programs within and beyond the walls of the hospital.

## About EMHS

EMHS is an integrated health delivery system serving the state of Maine. EMHS offers a broad range of health delivery services and providers, including: acute care, medical-surgical hospitals, a free-standing acute psychiatric hospital, primary care and specialty physician practices, long-term care and home health agencies, ground and air emergency transport services, community and population health.



## About Maine Coast Memorial Hospital

Located in Ellsworth, Maine, Maine Coast Memorial Hospital is a member of EMHS. The 64-bed, full-service hospital serves Hancock and western Washington Counties. Opened in 1956, our comprehensive healthcare facility provides emergency, primary and specialty care, acute inpatient, diagnostic, and surgical services.

Maine Coast Memorial Hospital is accredited by The Joint Commission, reflecting our commitment to meeting the highest performance standards for patient safety and quality, and has received both national and state recognition for patient safety, outcomes, and patient satisfaction levels.



Maine Coast Memorial Hospital strives to provide access to healthcare and improve the quality of health in the communities it serves. It does this through robust partnerships with other health care facilities and public service organizations. 2013 data shows Hancock County with a population of 54,845, 14 percent of whom live in poverty (21.5 percent of children in the county live in poverty.) 61.7 percent of the population is over age 18, and 20.7 percent of the population is over age 65. Statistically, residents of Hancock County are more likely to be uninsured than the rest of the state (14.7 percent versus 10.4 percent) and MaineCare enrollment is 23.6 percent, with 40.4 percent of children relying on MaineCare for access to healthcare.

Residents of Hancock County are more prone to acute myocardial infarction (AMI) and higher rates of mortality related to AMI and coronary heart disease than the rest of the state of Maine. Statistically aligned with the rest of the state, Hancock County reports that 21.1 percent of adult residents have a history of depression, 15.7 percent have suffered from anxiety, and currently 14.9 percent of the population is receiving outpatient mental health treatment. Substance and alcohol misuse data shows that the county population aligns with the majority of the state in regards to substance abuse with an alcohol induced mortality rate of 8.7 per 100,000 and a drug induced mortality rate of 11.6 per 100,000. Per 100,000: emergency medical service overdose response in 2014 was 301.7. Emergency department visits and opiate poisoning per 100,000 population between 2009 and 2011 were 21.5 and 11.6, respectively. Overall substance misuse hospital admissions per 100,000 population were 184.4.

# Addressing Community Health Needs

## Shared Community Health Needs Assessment

In 2016, Maine's four largest healthcare systems – EMHS, 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.



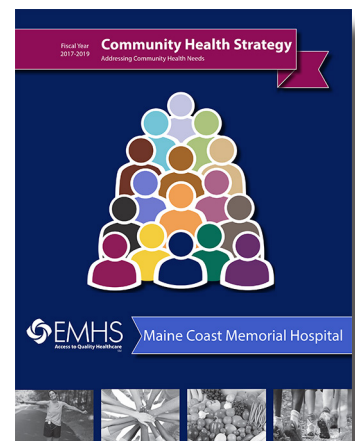
Results of the 2016 Shared CHNA along with community input were used to inform the development of this three-year Community Health Strategy by Maine Coast Memorial Hospital. The efforts identified within help demonstrate our commitment to our community, as we provide benefits reflective of our mission 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 Maine Coast Memorial Hospital.

Maine Coast Memorial 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.



## Feedback Opportunity

Contact [communitybenefits@emhs.org](mailto:communitybenefits@emhs.org) with feedback on this report.

# Addressing Community Health Needs

## Evaluation Efforts

The priorities identified in the next section will guide the development of a community health improvement plan. This annual plan defines the operational approach to be taken to address the goals and strategies articulated within. By using SMART Objectives (Specific, Measurable, Achievable, Realistic, and Time-Bound) to guide the intervention approach deployed, Maine Coast Memorial Hospital will be able to monitor and evaluate progress over time.

## Approval from Governing Board

Maine Coast Memorial Hospital's Community Health Strategy was reviewed by the hospital's governing board and a resolution was made to approve and adopt both the Shared CHNA and the Implementation Strategy on **May 24, 2016**.

# Selected Priorities of Focus

## Priority #1: Substance Use Disorders

### Rationale:

These combined efforts seek to reduce the number of people struggling with substance use disorders in our community.

### Intended action to address the need:

Maine Coast Memorial Hospital (MCMH) seeks to provide support and access to care for those struggling with substance use disorders by working with partners to: develop a hub and spoke model for treatment in Hancock and Washington counties, and develop and/or distribute of resource guides for prevention, education, and treatment. MCMH will also foster support group meetings (AA, NA, etc) by providing space when possible and disseminating information about meetings to the community, as well as continued work with our PT/Rehab Pain Control Program, the introduction of substance misuse screening in the primary care setting for use in regular check-ups, and education around medication free pain control alternatives.

### Programs and resource allocation:

MCMH leadership has committed to working with partners to facilitate the development of the treatment hub, this will require time and expertise for development of a care delivery model that best serves the needs of our patient populations. Provider support, development and education, and possible recruitment of providers with substance misuse treatment experience will be integral to ensuring the program's success. Additional needs may include physical space and/or remodeling of existing space for treatment, and securing the funding to make this possible.

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# Selected Priorities of Focus

## Priority #1: Substance Use Disorders *continued*

### Planned collaborations:

Success of the substance use disorders treatment hub and other programming will rely heavily on the coordinated efforts of many local healthcare resources including, but not limited to the task force and steering committee developed in partnership with the Down East Substance Treatment Network made up of several organizations including MCMH, Blue Hill Memorial Hospital, Mount Desert Island Hospital, and Healthy Acadia. All of these groups currently act as resources for patients with substance use disorders and are key stakeholders in ensuring the success of the program to serve our community, each providing support and resources at different stages of care. Additional partnerships with local facilities with space for support group meetings will be necessary to ensure access.

### Population of focus:

Community members challenged by substance use disorder, directly as a patient, or indirectly as a family member, or support person for a patient.

## Priority #2: Physical Activity, Nutrition, and Obesity

### Rationale:

Reduce the rate of obesity in our service area and increase physical fitness in our patients and reduce incidence of health conditions resulting from obesity and inactivity.

### Intended action to address the need:

MCMH will support the development and implementation of education programs around nutrition and obesity, as well as support activities to encourage healthy and safe physical activity in our community.

### Programs and resource allocation:

MCMH's Medical Nutrition Therapy group, along with primary care providers, will explore, develop, and implement results proven programs and resources to address this health need. (eg: the WOW (Way to Optimal Weight) program, Let's Go!) Pediatricians and other physicians have an established relationship with patients and their families in a personal setting that fosters conversation and sharing around the issues of obesity, nutrition, and physical activity. The Medical Nutrition Therapy group has been specially trained in the area of nutrition and weight management, they have access to tools and resources (eg: the Certified Diabetes Program) that patients can learn to use independently to establish life style changes. Current Occupational Health resources offered to local businesses will be expanded.

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# Selected Priorities of Focus

## Priority #2: Physical Activity, Nutrition, and Obesity *continued*

### Planned collaborations:

MCMH will partner a number of groups to make an impact in this area, including EMHS as a resource for their WOW program for pediatric patient weight management. Healthy Acadia, who also provides diabetes education and nutrition education is an important partner and leading resource for our success in addressing these issues. In addition the Down East Family YMCA, Acadia National Park, and volunteer based exercise programs will be important partners for physical activity education and venues.

### Population of focus:

Patients with unhealthy weight and challenges with maintaining an active lifestyle, and patients with or at risk of developing Type II Diabetes

## Priority #3: Mental Health

### Rationale:

The intent of these services and education is to remove stigma around the treatment of mental health, increase awareness of mental health needs, and provide care for patients who may otherwise go without treatment.

### Intended action to address the need:

MCMH will provide mental health services to community members in the primary care setting by implementing new delivery methods and bolstering existing services and screenings through provider and patient education.

### Programs and resource allocation:

Primary care practices will provide space, and MCMH will explore the technology needed to ensure tele-psych services access in each clinic location. All providers will engage in supplementary training regarding the diagnoses and treatment of mental health, including the referral process for external resources outside of those that can be provided by MCMH. Additional education around suicide prevention will be available for providers. All treatment spaces will be marked as safe spaces for LGBTQ patients. MCMH will invest in time and tools for providers to connect with educators and local school systems to strengthen mental health resources for adolescents.

### Planned collaborations:

MCMH will continue to partner with Community Health and Counseling Services to provide in practice treatment for community members, as well as build on the established relationship with Acadia Hospital to expand tele-psych services, particularly for those community members with transportation challenges. NAMI Maine and Crisis Response will be a vital resource to provide education and resources for providers and staff as experts in mental health and suicide prevention, as they have established protocol and best practices that we can implement.

### Population of focus:

Patients with mental health needs in the MCMH service area.

## Priority #4: Health Literacy

### **Rationale:**

All of these measures will ensure that patients not only understand their health care needs and conditions, but why they are being prescribed specific treatments and medications, and how to use them to best improve their quality of life.

### **Intended action to address the need:**

MCMH intends to increase the health literacy of our patient population through a variety of activities including: hosting and/or staffing free Know Your Numbers health fairs, hosting free community health education forums in a variety of settings, providing materials for patients to write down their questions and answers, and facilitating access to evidence based online health education resources. In addition to these actions MCMH will invest in provider communication training to simplify communication with patients.

### **Programs and resource allocation:**

MCMH will designate staff to facilitate testing and results counseling at Know Your Numbers health fairs in non-clinical settings. The Public Relations Department will explore additional venues for health education events, and engage health care providers to present in these locations. Enhancements will be made to the MCMH website for patient education through the purchase of a health resource library and/or web space dedicated to directing patients to existing evidence based online resources.

### **Planned collaborations:**

The Down East Public Health Council Clinical Health Care Systems will help determine places of need for Know Your Number health fairs and provide additional resources for public health education and services at events. Local libraries, the Down East Family YMCA, Healthy Acadia, and patient advisory committees will provide feedback for locations for health forums and website enhancements.

### **Population of focus:**

All patients of MCMH



## Health Priorities Not Addressed

Maine Coast Memorial 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, Maine Coast Memorial Hospital is currently poised to focus only on the highest priorities at this time. A number of priorities not selected, due to a variety of reasons are listed below:

1. Transportation was not selected by Maine Coast Memorial Hospital as this focus area is being addressed in the community by a panel of experts comprised of people from multiple organizations.
2. Health Care Insurance was not selected by Maine Coast Memorial Hospital. While MCMH assists patients in obtaining MaineCare when appropriate and directs users to other resources to pay for care, we are unable to provide health insurance.
3. Poverty was not selected by Maine Coast Memorial Hospital as this focus area is outside the scope of services for an acute care hospital.
4. Employment was not selected by Maine Coast Memorial Hospital as this focus area is outside the scope of services for an acute care hospital.

## Conclusion

Maine Coast Memorial 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.

Maine Coast Memorial Hospital will engage in another Shared CHNA in 2019 and looks forward to ongoing community participation in these important efforts.



EMHS MEMBER

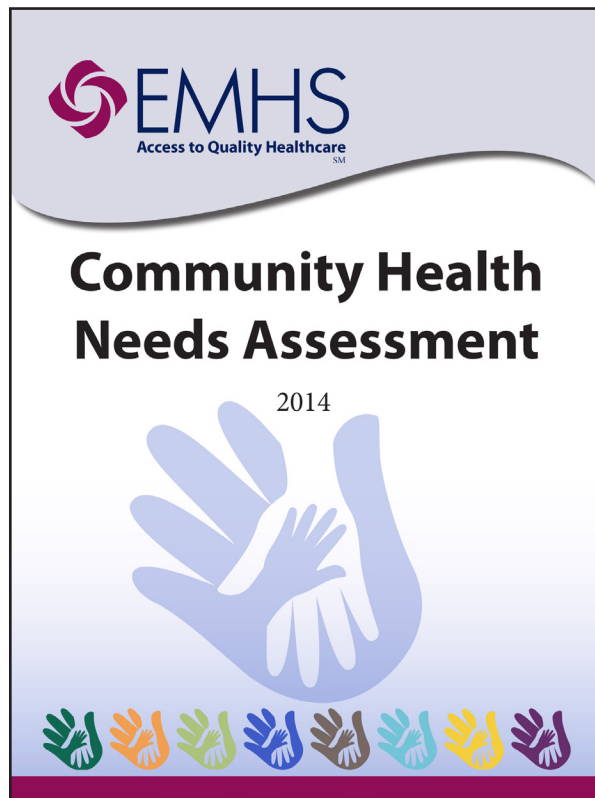


# Appendix - Evaluation of Impact

Progress report on selected priorities from Maine Coast Memorial Hospital's last (2014) Community Health Needs Assessment.

EMHS and Maine Coast Memorial 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 table provides a summary evaluation of impact of the actions taken by Maine Coast Memorial Hospital to address community health priorities adopted in 2014.

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.



# Appendix - Evaluation of Impact *continued*

## Community Health Strategy - Evaluation of Impact Since 2015

Evaluation of impact of actions taken by the organization to address selected health priorities identified in the 2014 Community Health Needs Assessment (CHNA) Report is an important part of the community health improvement cycle. The following progress on activities to address priority areas identified in the 2014 CHNA are as follows:

<b>White Cells:</b> description of actions the hospital intends to take to address the health need.
<b>Grey Cells:</b> identified programs/resources the hospital plans to commit to address the health need.
<b>Green Cells:</b> planned collaborations between the hospital and other organizations to address the health need.

**EMHS Member Organization:** Maine Coast Memorial Hospital  
**Date:** July 15, 2016

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Social Concerns: Substance Abuse</b>	Maine Coast Memorial Hospital (MCMH) is in the process of identifying a suboxone prescriber, either internal or external, to work with patients who are undergoing drug detox.	No	Patients needing suboxone were referred to providers outside the primary service area. The ability to have suboxone prescribers in the primary service area has been delayed due to the lack of coordinated support services. A support HUB is in development, which will lead to local provider support.
	Maine Coast Memorial Hospital plans to continue to refer patients to Open Door and Crisis Response and work closely with these groups to ensure that patients with substance abuse issues have appropriate treatment and access to care.	Yes	Our relationships with Open Door and Crisis Response continue to be positive and benefit our patients. Crisis response is used frequently, and our relationship with them is strong. On average there are 15 referrals a month.
	CEO and CMO attend monthly meetings with Downeast Substance Treatment Network.	Yes	The CEO attends these meetings.
	Healthy Acadia – Downeast Substance Treatment Network (DSTN): MCMH representatives will work with the DSTN to discuss local substance abuse issues and work together to find solutions.	Yes	Maine Coast Memorial Hospital, along with other members of the DSTN have started working towards a community resource for patients struggling with addiction. Plans have started for a "hub and spoke" model for prevention and treatment.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Social Concerns: Substance Abuse</b>	Open Door: MCMH providers will continue to refer patients to Open Door for resources, and will promote their services to patients in need.	Yes	Patients with need are referred to Open Door.
	Crisis Response: MCMH and Crisis Response will continue to work together for those patients in need of the resources and services provided by Crisis Response.	Yes	The Emergency Department continues to refer patients to Crisis response for assistance and support. This relationship continues to be strong, making the process easy to use for staff and patients.
<b>Social Concerns: Hunger and Food Insecurity</b>	Ensuring that patients are aware of local resources. (e.g.: loaves and fishes, meals on wheels programs, WIC benefits when applicable.)	Yes	The Disease Management Group continues to keep patients informed of local resources.
	Ensuring that patients are aware of programs facilitated by the hospital for patients. (e.g.: meals on wheels assessment, meal supplies for discharged patients over 60.)	Yes	The Disease Management Group continues to keep patients informed of local resources.
	Hospital and Medical Office departments volunteer to provide a meal monthly for the Emmaus shelter.	Yes	Volunteers from hospital departments prepare and serve meals monthly at the shelter, the volunteer list is managed by Dr. Whittaker.
	Maine Coast Pediatrics assists with patient referrals to WIC.	Yes	MCP staff continue to make referrals to WIC for patients who qualify/meet need. Typically, this is done pre-natally.
	MCMH Disease Management Group has been trained to do meals on wheels assessment, on Tuesdays the Eastern Area Agency on Aging distributes meals from the freezer/supplies in the Hurley House.	Yes	Yes, 180 patients were enrolled in the past year. Eastern Area Agency on Aging continues to distribute meals from MCMH location.
	MCMH Disease Management Group provides Pantry Boxes for patients in need.	Yes	576 pantry boxes were distributed in the past year.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Social Concerns: Hunger and Food Insecurity</b>	All patients 60 and over being released from the hospital are eligible to receive 10 freezer meals worth of food.	No	This program was not started.
	MCMH Disease Management Group assists patients 60 and over in CSA registration.	Yes	125 patients were signed up for CSA memberships.
	MCMH Disease Management Group, in conjunction with the Elks Club, assist patients to register with the food commodity program to obtain 30 lbs. of food a month, including produce.	Yes	2,376 bags of food were distributed to patients in the past year.
	Seniors in need can receive pet food assistance, in collaboration with Walmart.	Yes	Yes, 85 patients were assisted.
	Elks Club, Emmaus Shelter, Eastern Area Agency on Aging, Walmart	Yes	We continue to work closely with all of these groups to manage the programs above. Groups assist with transit of goods, funding, and donation of time to manage programs.
<b>Social Concerns: Physical and Social Isolation</b>	Promotion of Lifeline with our patients and scholarship assistance for the service.	Yes	Lifeline and LiveSafe brochures are available for patients. In waiting rooms. Physicians refer patients to this program.
	Connecting people with case managers to help with behavioral issues and isolation.	Yes	MCMH utilizes case managers, as well as partners with Community Health and Counseling Services to provide support for patients with need.
	Continued referrals to the YMCA and Friends in Action as local support networks offering activities and community engagement.	Yes	Information on YMCA and FIA programs are available to patients, and referrals are made for their access to physical wellness programs and support groups.
	Continued development and use of the “Patient Centered Medical Home” model of care.	Yes	All MCMH primary care practices are recognized as Patient Centered medical Homes.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Social Concerns: Physical and Social Isolation</b>	The Rehabilitation Services Department offers an extended after care program for their physical, occupational, and speech therapy patients for a nominal, out of pocket fee that allows for exercise and social bridge building for those unable to utilize community resources.	Yes	Yes, 832 visits per year, 1.25 hours staff time per visit, total staff time = 1,040 hours X \$15.50 tech avg. rate = \$16,120/year
	The Diabetes Management Group offers free Pre-Diabetes Support classes and Diabetes Support Group services. These classes build support networks between patients.	Yes	An additional Pre-DM class was offered after a local business reached out to the diabetes and nutrition department and requested the program for 21 of their employees. We currently have four classes per year with a total of 46 participants. Per our annual CDC report evaluation 86 percent of class participants completing the program have met goal of seven percent weight loss and 30 minutes of activity five days per week. Diabetes support group continues with a time change to help capture more participants. Participation has increased from two - three to seven - eight per month.
	The Coastal Care Team will continue to play a role in the Patient Centered Medical Home Model.	Yes	Maine Coast Memorial Hospital continues to refer patients to the Coastal Care Team for their services.
	MCMH will continue to refer patients to Friends in Action for socialization, support groups, and other outreach programs, as well as participating in FIA's Senior Resource Fairs to keep their members informed of local healthcare resources.	Yes	MCMH participated on the BDN's Ellsworth Senior Expo on September 24, 2015. Representatives from Public Relations, Diabetes Management, Nursing, and Orthopedics were on hand to discuss available resources and provide cholesterol and blood sugar screening and counseling on results.
	MCMH and EMHS continue to ensure that elderly patients in Hancock County receive the right care in the right place, at the right time. MCMH will continue to collaborate with EMHS and promote the LifeLine program.	Yes	Marketing and Public Relations stays in communication with the LiveSafe representative from EMHS and ensures that brochures are available.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Social Concerns: Physical and Social Isolation</b>	MCMH Ethics committee sponsors bi-annual meetings with agency staff from WHCA, Friends in Action, EMHS Outreach Home Health Care, DHHS Adult Protection, Bucksport Bay Healthy Communities, Healthy Acadia, and Coastal Care Team looking at concerns and discussing isolation of our frail elderly.	Yes	MCMH has an Ethics Speaker Program annually, these speakers are sourced from local groups. A chaplaincy program is being developed with input from these groups, as well as Hospice of Hancock County.
	MCMH works closely with Next Step Domestic Violence Project to ensure that isolated victims can obtain the help they need.	Yes	Referrals for patients in need of assistance continue. Materials for self referral are made available for those who choose to do so anonymously.
<b>Preventive Screenings and Immunizations: Drug Misuse Screenings</b>	Drug misuse screenings are completed as a part of the patient/primary care provider appointment.	Yes	Adolescents are screened using the CRAFFT tool at all check ups. Adults are asked about drug and alcohol use.
	Opioids screenings are completed as part of pain management treatment.	Yes	All pain management patients are screened and monitored closely. A new opioid policy has been put in place to reduce use of opioid medications.
	ADHD Meds contract are signed for all patients on ADHD medications, and include urine testing as indicated.	Yes	ADHD contracts continue to be used. Revision is underway to ensure compliance with updated governing laws around these drugs.
	Space is provided in the medical office building for AA meetings.	Yes	Space is provided for AA and Al-Anon on a weekly basis in the Medical Office Building.
	Healthy Acadia – Downeast Substance Treatment Network: MCMH representatives will work with the DSTN to discuss local substance abuse issues and work together to find solutions.	Yes	CEO has been an active participant in this network, engaging MCMH in related projects with these groups.
	Open Door: MCMH providers will continue to refer patients to Open Door for resources, and will promote their services to patients in need.	Yes	Patients with need are referred to Open Door, and brochures are available in waiting rooms.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
Preventive Screenings and Immunizations: Drug Misuse Screenings	Crisis Response: MCMH and Crisis Response will continue to work together for those patients in need of the resources and services provided by Crisis Response.	Yes	The Emergency Department continues to refer patients to Crisis response for assistance and support. This relationship continues to be strong, making the process easy to use for staff and patients.
	MCMH will continue to provide space for Alcoholics Anonymous/Al-Anon resources to meet.	Yes	Meetings are booked by a member of the group.
Preventive Screenings and Immunizations: Alcohol Misuse Screening	Alcohol misuse screenings are completed as a part of the patient/primary care provider appointment.	Yes	Adolescents are screened using the CRAFFT tool at all check ups. Adults are asked about alcohol use at check ups.
	Space is provided in the medical office building for AA meetings	Yes	Space is provided for AA and Al-Anon on a weekly basis in the Medical Office Building.
	Healthy Acadia – Downeast Substance Treatment Network: MCMH representatives will work with the DSTN to discuss local substance abuse issues and work together to find solutions.	Yes	CEO has been an active participant in this network, engaging MCMH in related projects with these groups.
	Open Door: MCMH providers will continue to refer patients to Open Door for resources, and will promote their services to patients in need.	Yes	Patients with need are referred to Open Door, and brochures are available in waiting rooms.
	Crisis Response: MCMH and Crisis Response will continue to work together for those patients in need of the resources and services provided by Crisis Response.	Yes	The Emergency Department continues to refer patients to Crisis response for assistance and support. This relationship continues to be strong, making the process easy to use for staff and patients.
	MCMH will continue to provide space for Alcoholics Anonymous/Al-Anon resources to meet.	Yes	Meetings are booked by a member of the group.



## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
Preventive Screenings and Immunizations: Oral Health	Maine Coast Memorial Hospital has partnered with Mount Desert Island Hospital in order to ensure the availability of low cost, quality dental care in our communities. MaineCare and sliding scale fees.	Yes	MCMH and Mount Desert Island Hospital continue to partner to meet the dental needs of Hancock County. 1544 patients were seen at the Ellsworth location in 2015, 230 of these visits were emergencies.
	From the First Tooth visits are done in the Maine Coast Pediatrics office including: fluoride varnishes on baby's teeth, exams, and referrals to dentist as early as possible	Yes	Fluoride varnishing is done from first tooth through three years of age.
	MCMH has secured grant funding specifically for elderly patients for dental services.	Yes	Grant funding was obtained and used to purchase two pieces of equipment to be used in portable environments, such as nursing homes.
	The Give Kids a Smile (GKAS) program provides a day of free dental care for children at the Maine Coast Dental Center.	Yes	The February 22, 2016 GKAS Day saw seven patients and resulted in \$2,587 in treatment provided. 21 sealants, six cleanings, six x-rays, seven fluoride varnishes.
	The Maine Coast Dental Center "pop up" dental center program goes into schools to educate children about dental health and provide free screenings, sealants, and referrals to dentist for restorative needs.	Yes	Eight pop up dental events were held, utilizing equipment and staff time.  2015 June 49 students, October eight students, November 20 students, December 101 students 2016 February 17 students, March 21 students, April four students, May 16 students
	The Maine Coast Dental Center provides Adult Free Dental Day for free dental exams.	Yes	Washington and Hancock Counties \$20,032.00 worth of treatment rendered 152 separate services of various types 27 patients

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
Preventive Screenings and Immunizations: Oral Health	MCMH has applied for and provides grant funding for dental care for those over 60.	Yes	MCMH Development Staff wrote, submitted, and obtained grant funding for senior services.
	From the First Tooth visits are done in the Maine Coast Pediatrics clinic exam rooms.	Yes	From the first tooth visits are held in Maine Coast Pediatric and Primary Care offices, utilizing trained staff.
	MCMH and MDI Hospital will continue to work together to ensure that dental needs are met in our communities.	Yes	MCMH and MDI Hospital continue to work closely together to ensure that dental needs are met for the under served in Hancock and Washington Counties.
	MCMH will continue to work with EMHS to support the From the First Tooth program.	Yes	Maine Coast Continues to promote this program with the assistance of EMHS home office.
Preventive Screening and Immunizations: Aging Related Screening	Age related screenings are completed as part of annual physicals.	Yes	Age appropriate screenings are completed during physicals.
	Continuing outreach as part of the ACO program to get people to come in for screenings and ensuring that people are making their appointments.	Yes	MCMH is an active participant in the ACO program.
	Launch of new inpatient "catch a falling star" program to educate patients about fall prevention and safety.	Yes	This program launched in October of 2015.
	The PT/Rehab group will continue to educate the public about their falls program, as well as their dementia/Alzheimer's program, this will also facilitate older patients staying in their homes longer which can lead to a better quality of life/longer life expectancy.	Yes	Yes, all new providers are oriented to these programs. The fall prevention and dementia programs are promoted in PCP visits.
	Know Your Numbers Screenings will continue to be held multiple times a year in multiple locations to maximize reach.	Yes	MCMH participated on the BDN's Ellsworth Senior Expo on September 24, 2015. Representatives from Public Relations, Diabetes Management, Nursing, and Orthopedics were on hand to discuss available resources and provide cholesterol and blood sugar screening and counseling on results.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Preventive Screening and Immunizations: Aging Related Screening</b>	True Health Screenings will be held annually for internal for employees, as well as local business partners.	Yes	Employee health has migrated to the Virgin Pulse program. We contract with 20 businesses and 18 area fire departments to provide Occupational Health including screenings.
	Grant funding and services aimed at dental health for the elderly.	Yes	MCMH Development staff secured grant funding to assist in treatment of elderly dental patients.
	PT/Rehab personnel will continue to participate in public health events, health fairs, and health forums to educate the public.	Yes	PT/Rehab attended the BDN Senior Expo and performed balance testing for four hours on September 24, 2015.
	Patient Rounding will include patient education about falls and the “To Catch a Falling Star” fall prevention program.	Yes	Yes hourly rounding performed and which includes fall prevention interventions based on the Catch a Falling Star prevention program policy.
	MCMH will partner with Maine Public Health Counsel to complete additional Know Your Numbers Screenings at additional locations.	Yes	Yes, we have developed a standardized protocol to use for screenings to allow for meaningful data comparison.
	MCMH will continue to include Healthy Acadia in Know Your Numbers events, and educate patients about H.A. programs for the elderly.	Yes	Our relationship with Healthy Acadia remains strong, and they are extended an invitation to participate in all of our public health education events.
	MCMH will continue to partner with EMHS through the BeaconHealth ACO.	Yes	Since the affiliation of MCMH with EMHS this relationship has continued to grow stronger.
<b>Preventive Screening and Immunizations: Depression Screening</b>	Depression Screenings are completed as a part of the patient/primary care provider appointment.	Yes	Standard annual screening is completed for patients regarding depression.
	Maine Coast Memorial Hospital continues to employ a staff psychiatrist and providers make referrals to appropriate resources for those patients who need additional assistance.	No	MCMH no longer has a psychiatrist on staff, however MCMH has partnered with Community Health and Counseling Services to provide mental health support in all primary care offices.
	MCMH has partnered with Open Door in order to provide resources for Dual Diagnosis patients.	Yes	Referrals to Open Door are made as needed.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Preventive Screening and Immunizations: Depression Screening</b>	For inpatient care, the nursing intake form screens for depression.	Yes	On the history and physical admission assessment depression, anxiety, mood disorders, bipolar, schizophrenia is addressed and documented . Within the physical admission assessment there is a question regarding self harm, suicide as well.
	MCMH continues to employ a staff psychiatrist.	No	MCMH no longer has a psychiatrist on staff, however MCMH has partnered with Community Health and Counseling Services to provide mental health support in primary care offices. This utilizes office space, as well as Foundation staff time to secure funding for the program.
	MCMH staff devotes time to securing grant funding with CHCS to increase access to counseling programs for those who cannot afford it.	Yes	The John T. Gorman Foundation granted \$25,000 in August 2015 to allow for underinsured and uninsured individuals to receive free counseling services by a CHCS professional.
	MCMH is currently in negotiations with CHCS to provide space at the Resort Way facility is CHCS staff to meet with patients.	Yes	CHCS began seeing patients at Resort Way in 2015.
	CHCS currently has space to meet with patients at the EWD facility in Gouldsboro.	Yes	CHCS continues to see patients at EWD in Gouldsboro.
	Space is provided in the primary care clinics for patients to meet with members of the Coastal Care Team there, if they are not comfortable with the team coming into their home.	Yes	Maine Coast Memorial Hospital continues to refer patients to the Coastal Care Team for their services. When needed, the Coastal Care Team uses space in MCMH primary care settings.
	The Coastal Care Team has access to the MCMH EMR system in order to ensure better collaborative care of patients.	Yes	The Coastal Care Team has access to our EMR system to ensure collaborative care of our patients.
	MCMH works closely with Community Health and Counseling Services, often on site, to ensure that patients have access to services.	Yes	The relationship with CHCS has been formalized to meet patient needs.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
Preventive Screening and Immunizations: Depression Screening	MCMH works closely with the Coastal Care Team as part of the Patient Centered Medical Home program to ensure that patients receive well rounded care. This is part of the “team” approach to patient care, for patients with underlying factors that may create health issues/make chronic conditions more difficult to manage.	Yes	Maine Coast Memorial Hospital continues to refer patients to the Coastal Care Team for their services. When needed, the Coastal Care Team uses space in MCMH primary care settings.
	Open Door: MCMH providers will continue to refer patients to Open Door for resources, and will promote their services to patients in need.	Yes	MCMH continues to work with Open Door to ensure that patient needs are met.
Tobacco Use Screening	Tobacco Use Screenings are completed as a part of the patient/primary care provider appointment.	Yes	Standard annual screening is completed for patients regarding tobacco use.
	All MCMH health fair events have tobacco resistance information available.	Yes	Maine Coast Memorial Hospital continues to partner with Healthy Acadia for tobacco cessation resources at health fairs and events. Healthy Acadia was present at the Senior Expo on September 24.
	Learn more about the TAMC “Beat the Pack” program, in order to see if it would be feasible for MCMH to adopt.	No	Although this program was not set up in 2015-2016, MCMH is now working with EMHS to implement the Kicking Butts program.
	Development of Youth Health Fair with YMCA in order to continue tobacco resistance and education for minors.	No	Youth health fair program was discussed and the YMCA is interested in participating in a future event, but personnel resources were unavailable to hold the event in this calendar year.
	Both inpatients and out-patients are given smoking cessation information post screening.	Yes	As part of screening cessation information resources are shared with tobacco users.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
Tobacco Use Screening	At least one booth at each health fair will have information on smoking cessation and personnel available to discuss quitting/resistance.	Yes	Maine Coast Memorial Hospital continues to partner with Healthy Acadia for tobacco cessation resources at health fairs and events. Healthy Acadia was present at the Senior Expo on September 24.
	MCMH refers patients to Tobacco Free Maine tools and resources to help with smoking cessation.	Yes	Tobacco Free Maine continues to be an excellent resource for patients.
	Healthy Acadia partners with MCMH at health fair events to supply information and education about smoking cessation.	Yes	Maine Coast Memorial Hospital continues to partner with Healthy Acadia for tobacco cessation resources at health fairs and events. Healthy Acadia was present at the Senior Expo on September 24.
Preventive Screening and Immunizations: Obesity Screening	Obesity Screenings are completed as a part of the patient/primary care provider appointment.	Yes	All patients are screened for BMI at check ups.
	BMI/Body Composition screenings and counseling are made available at all community health fairs.	Yes	Diabetes and Nutrition personnel attended that Senior Expo on September 24 with the Tanita Machine to provide this service.
	Continuation of the True Health Program, offering guidance for MCMH employees as well as local business partners.	No	The True Health Program was replaced with EMHS system programs and resources for employees and family's. Services and resources are comparable to True Health.
	Hannaford Healthy Shopping Basket program/booth is held every Monday evening to offer nutrition education and teach food label reading.	Yes	This is offered weekly, as described.
	Supermarket Tours will be given at least twice a year to educate the public about healthy eating and label reading.	Yes	The diabetes and Nutrition Group continues to lead tours, and is working with store/department managers to increase shopper attendance.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Preventive Screening and Immunizations: Obesity Screening</b>	Our diabetes and nutrition department offers one on one nutrition counseling, as well as free group sessions to help people manage diet. This department also offers supermarket tours throughout the year, and spends time each week in the local grocery store educating people about healthy food and food labeling.	Yes	The diabetes and nutrition department is actively working on all of these. We did provide a store tour for our diabetes support group in April 2016 with ten attending
	At a minimum two free, monthly health forums each year are dedicated to healthy nutrition and/or movement.	Yes	Weight Management and Fad Diets health forum was held on November 12, 2015. In February 2016 a weekly Heart Healthy cooking class was held, conducted by Diabetes and Nutrition with information about reading food labels, different kinds of fats, and cooking instruction from kitchen staff.
	Maine Coast Pediatrics regularly refers patients to the WOW program in Bangor.	Yes	Maine Coast Pediatrics has begun standing up a local WOW program in order to more conveniently meet the needs of patients, with the support of EMHS/EMMC established program protocols.
	MCMH has partnered with Healthy Acadia to assess food sourcing and waste in our cafeteria, to encourage healthy habits with our staff and patients, as well as visitors.	Yes	MCMH participates in the gleaning program to reduce food waste, and provide organic waste to a local pig farm for reuse/feed.
<b>Preventive Screening and Immunizations: Cardiovascular Screening</b>	Risk factor screenings are completed as a part of annual physicals.	Yes	Screenings for cardiovascular issues are completed based on age, and as part of the annual physical.
	Screenings related to blood pressure and cholesterol are offered at all health fair events.	Yes	MCMH partnered with the BDN and FIA for the Senior Expo on September 24, 2015 to ensure health care professionals were on hand to perform tests.
	True Health screenings for blood pressure and cholesterol for MCMH employees and employees of participation local business partners.	Yes	Employee health has migrated to the Virgin Pulse program. We contract with 20 businesses and 18 area fire departments to provide Occupational Health including screenings.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Preventive Screening and Immunizations: Cardiovascular Screening</b>	Education about the impact of diet on heart health at during Heart Health Month (February) as part of the Free Community Health Forum series.	Yes	In February 2016 a weekly Heart Healthy cooking class was held, conducted by Diabetes and Nutrition with information about reading food labels, different kinds of fats, and cooking instruction from kitchen staff.
	MCMH will continue to hold health fairs to provide free blood pressure and cholesterol screenings to communities in Hancock County.	Yes	While no stand alone health fairs were held in 2015-2016, MCMH participated in the Senior Expo.
	The Diabetes and Nutrition group will continue to provide public education events, and resources to educate patients about the impact of diet on heart health.	Yes	February 2016 a weekly Heart Healthy cooking class was held in the cafeteria - one member of the diabetes and nutrition group presented, along with one member of the kitchen staff.
	At least one free, community Health Forum each year will focus on heart health and cardiovascular risk prevention.	Yes	A member of the Cardiac Rehab staff gave a health forum presentation on February 12, 2016.
	MCMH works closely with North East Cardiology to ensure that Cardiology patients can receive services in Ellsworth, minimizing travel and increasing access to cardiology services and screenings.	Yes	We were able to increase coverage in Ellsworth to two days per week, but due to staffing changes coverage has been reduced to one day per week. We are actively recruiting a full time cardiologist.
	MCMH has partnered with Down East Family YMCA to provide Phase III Cardiac Rehab in their facility.	Yes	Cardiac Rehab patients are still referred to this program, and MCMH and the Down East Family YMCA work together to ensure their success.
<b>Gaps in Healthcare Services: Behavioral and mental health services for children and adults</b>	MCMH is currently negotiating with Community Health and Counseling to have a counselor at their Resort Way for outpatient services. These services would include pediatric patients, adolescent patients, and adult patients.	Yes	Community Health and Counseling Services now provides mental health care and support for patients at all MCMH primary care clinics.



## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Gaps in Healthcare Services: Behavioral and mental health services for children and adults</b>	CHCS sees patients on site at the EWD clinic in Gouldsboro.	Yes	Community Health and Counseling Services now provides mental health care and support for patients at all MCMH primary care clinics.
	MCMH is an active participant in the Infant Mental Health Coalition.	Yes	MCMH CMO, is an active participant in this coalition.
	MCMH will provide space and funding to incorporate the CHCS services in our Resort Way facility, and continue to provide space in the EWD clinic for these services.	Yes	Grant funding was secured by the MCMH Development staff to ensure that services could be provided in all MCMH primary care clinics.
	Dr. Whittaker serves on the board of the Infant Mental Health Coalition.	Yes	CMO attends all coalition meetings.
	MCMH works closely with Community Health and Counseling Services, often on site, to ensure that patients have access to services.	Yes	The relationship with CHCS has been formalized to ensure that these services are provided.
<b>Gaps in Healthcare Services: Dental Care</b>	Maine Coast Memorial Hospital has partnered with Mount Desert Island Hospital in order to ensure the availability of low cost, quality dental care in our communities. MaineCare and sliding scale fees.	Yes	MCMH and Mount Desert Island Hospital continue to partner to meet the dental needs of Hancock County. 1,544 patients were seen at the Ellsworth location in 2015, 230 of these visits were emergencies.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Gaps in Healthcare Services: Dental Care</b>	From the First Tooth visits are done in the Maine Coast Pediatrics office including: fluoride varnishes on baby's teeth, exams, and referrals to dentist as early as possible.	Yes	Fluoride varnishing is provided from the first tooth through three years of age. Patients are referred to local dental practices.
	The Give Kids a Smile (GKAS) program provides a day of free dental care for children at the Maine Coast Dental Center.	Yes	February 22, 2016 GKAS Day saw seven patients and resulted in \$2,587 in treatment provided. 21 sealants, six cleanings, six x-rays, seven fluoride varnishes.
	The Maine Coast Dental Center "pop up" dental center program goes into schools to educate children about dental health and provide free screenings, sealants, and referrals to dentist for restorative needs.	Yes	Eight pop up dental events were held, utilizing equipment and staff time. 2015: June 49 students, October eight students, November 20 students, December 101 students 2016 : February 17 students, March 21 students, April four students, May 16 students
	The Maine Coast Dental Center provides Adult Free Dental Day for free dental exams.	Yes	Washington and Hancock Counties \$20,032.00 worth of treatment rendered 152 separate services of various types 27 patients
	Maine Coast Memorial Hospital has applied for and provides grant funding for dental care for those over 60.	Yes	MCMH Development Staff wrote, submitted, and obtained grant funding for senior services.
	From the First Tooth visits are done in the Maine Coast Pediatrics clinic exam rooms.	Yes	These exams continue to be done on site.
	MCMH and MDI Hospital will continue to work together to ensure that dental needs are met in our communities.	Yes	MCMH and MDI Hospital continue to work closely together to ensure that dental needs are met for the under served in Hancock and Washington Counties.
	MCMH will continue to work with EMHS to support the From the First Tooth program.	Yes	EMHS continues to provide formal structural support for this program.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Gaps in Healthcare Services: Substance Abuse Treatment and Detoxification</b>	Maine Coast Memorial Hospital is in the process of identifying a suboxone prescriber, either internal or external, to work with patients who are undergoing drug detox.	No	Patients needing suboxone were referred to providers outside the primary service area. The ability to have suboxone prescribers in the primary service area has been delayed due to the lack of coordinated support services. A support HUB is in development, which will lead to local provider support.
	Maine Coast Memorial Hospital plans to continue to refer patients to Open Door and Crisis Response and work closely with these groups to ensure that patients with substance abuse issues have appropriate treatment and access to care.	Yes	Our relationships with Open Door and Crisis Response continue to be positive and benefit our patients. Crisis response is used frequently, and our relationship with them is strong. On average there are 15 referrals a month.
	PT/Rehab Services provides an Alternative Pain Control Program consisting of six sessions.	Yes	Yes, pain control protocol is in use and education provided to providers at clinic meetings throughout the year.
	CEO and CMO attend monthly meetings with Downeast Substance Treatment Network.	Yes	CEO and CMO both attend these meetings regularly.
	Healthy Acadia – Downeast Substance Treatment Network: MCMH representatives will work with the DSTN to discuss local substance abuse issues and work together to find solutions.	Yes	CEO and CMO work closely with this group to develop action plans in order to find solutions, and implement them.
	Open Door: MCMH providers will continue to refer patients to Open Door for resources, and will promote their services to patients in need.	Yes	Referrals to Open Door are made as needed, they continue to be a great resource for patients in need.
	Crisis Response: MCMH and Crisis Response will continue to work together for those patients in need of the resources and services provided by Crisis Response.	Yes	Patients with need are referred to Open Door.
	Aroostook Mental Health provides services and support for patients with dual diagnoses, MCMH works closely with AMH for patient referrals and treatment options.	Yes	The Emergency Department continues to refer patients to Crisis response for assistance and support. This relationship continues to be strong, making the process easy to use for staff and patients.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Lack of Insurance and/or Inability to Pay for Care</b>	Maine Coast Memorial Hospital has a free care program, as well as payment plan options, and assistance for patients looking to enroll in ACO affiliated insurance programs.	Yes	Patient Access devotes between 40-45 hours a week, between two employees for free care administration.
	MCMH will continue to support their Prescription Assistance Program/Bridge the Gap program.	Yes	MCMH sought municipal support from 14 towns within Hancock and Washington County to provide financial support for the Prescription Assistance Program. Town support was very favorable, with all municipalities approving financial contributions, for total support of \$18,560.
	Patient Billing and Accounting assists with Free Care enrollment and payment plans.	Yes	Patient Access devotes between 40-45 hours a week, between two employees for free care administration.
	The Disease Management Group has been trained to assist patients in ACO program enrollment.	No	The person running this part of the program is no longer with the Disease Management Group. However, patient registration has information about ACO and Free Care that they counsel patients on.
	The Disease Management Group operates the Prescription Assistance Program.	Yes	The Disease management Group manages patient enrollment in the prescription assistance program.
	The Development Department will continue the grant writing process and Town Meeting lobbying for funding for the Bridge the Gap program.	Yes	MCMH Development staff attended town meetings to secure signatures and request funding from townships.
	Members of the Patient Billing and Accounting Group are working with the local VFW to educate veterans and their families about tools available to them to receive affordable care.	Yes	Members of billing and patient access conducted three veteran education events.
	Various Townships provide Bridge the Gap funding for Prescription Assistance.	Yes	Town support was very favorable, with all municipalities approving financial contributions.
	WHCA	Yes	Partnered with WHCA to hold education event/provide materials around free care.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Transportation</b>	MCMH must maintain and develop relationships with local resources (Logistic are, Friends in Action, Island Care) to help patients find transportation options.	Yes	Logisticare, FIA, and Island Care continue to be instrumental partners in ensuring travel for patients.
	Alternative patient appointment options should be researched when possible.	Yes	Weekend Clinic hours have been expanded to include Sunday hours.
	Ongoing assessment of specialty services lacking in Hancock County that could be provided at MCMH, either by adding services or bringing in specialists from a partner agency.	Yes	Partnership with CHCS to provide mental health services on site is an example of how this is working to benefit patients. Additional specialists being assessed.
	Pediatric patients are seen in the least restrictive environment possible – at Daycare etc.	Yes	Pediatric patients are seen in a variety of settings to ensure ease of access and comfort related to care.
	Some primary care physicians do in home visits and assessments.	Yes	Some primary care physicians continue to see patients in the home setting.
	MCMH provides gas cards for patients in need with collaboration from Eastern Area Agency on Aging, Beth C. Wright Cancer Center, and generous donors.	Yes	Gas cards are obtained/distributed on an as needed basis.
	MCMH Development Group has obtained the Elizabeth Jones Grant which provides a .23 per mile reimbursement for patients in need.	Yes	This grant was obtained and used to end.
	Logisticare, Coastal Care Team, Eastern Area Agency on Aging, Beth C. Wright Cancer Center, Susan G. Komen of Maine and MCMH all work together to find and secure resources for patients with transportation challenges.	Yes	MCMH applied and received \$20,000 in grant funding from Susan G. Komen Foundation. A portion of the grant was restricted to providing transportation assistance to patients with breast cancer to obtain treatment and survivorship program services.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Transportation</b>	MCMH partners with North East Cardiology Associates and Cancer Care of Maine to provide enhanced Cardiology and Oncology services, respectively, on site to limit travel required by patients.	Yes	Working with NECA has allowed us to provide cardiology services and appointments in Ellsworth two days a week. Our oncology program remains well staffed and utilized with support from Cancer Care of Maine.
<b>Issues Preventing Access to Care: Understanding the Value and Importance of Healthcare</b>	Increase education and awareness around preventive care and chronic disease management.	Yes	Education for patients continues - both in office at visits, as well as at Health Forum events held monthly, and other public speaking engagements.
	Continuation of Community Health Forums and Community Health Fairs.	Yes	12 Health Forums were held in the 2015-2016 fiscal year in the classroom of the Medical Office Building for 60-90 minutes apiece. Each of these presentations were given by a health care professional including PT/Rehab Specialists, RNs, and physicians. Participation in the BDN Senior Expo on September 24 included health screenings and counseling, as well as participation in a local church health event on October 6 which included blood pressure screening and counseling.
	Continuation of Nutrition and Diabetes education programs including meetings and grocery shopping out reach.	Yes	There is a working goal of one session of each pre-dm class to meet at a grocery store for a store tour. Have been able to do this with our Monday afternoon class with great positive feedback.
	Education during annual exams regarding the importance of vaccinations and herd immunity.	Yes	Patients are encouraged to get appropriate immunizations at appropriate times, and are educated as to why they are important.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Understanding the Value and Importance of Healthcare</b>	Healthy Acadia participates in all MCMH Health Fairs to assist in health care education. Two members of MCMH staff sit on the Healthy Acadia Advisory Council, and one has a seat on their board.	Yes	Although MCMH did not host any stand along health fairs in 2016, Healthy Acadia was present at the Senior Expo on 9/24. Director of Rehabilitation Services and the Director of Marketing and Public Relations continue to attend meetings as members of the Advisory Council, and the Director of Philanthropy serves on the board of Healthy Acadia.
	MCMH works with several local businesses to provide preventive care screening and offer health guidance to their employees.	Yes	Yes, we have developed a standardized protocol to use for screenings to allow for meaningful data comparison.
<b>Issues Preventing Access to Care: Inconvenience</b>	Increased access to healthcare facilities and services.	Yes	Weekend Clinic hours have been expanded to include Sunday hours. Some primary care providers continue to offer home visits.
	Continued provision of practitioner home visits.	Yes	Some primary care providers continue to offer home visits.
	Ped PT/Rehab visits in the least restrictive space possible.	Yes	Yes, to treat the pediatric population we provide services in the least restrictive environments possible, including schools, day care centers, and the YMCA.
	Continued development of the Patient Portal.	Yes	A patient portal team was reinstated and a plan was developed for updates and relaunch in 2016. Enhancements include improved messaging ability with physicians, and possible appointment scheduling. Training for physicians has been scheduled, and a promotional plan for staff and patients is being developed.
	Extended clinic hours – including evening and weekend services.	Yes	Resort Way continues to offer weekend appointments and walk-in services. Gouldsboro continues to offer evening/extended hour primary care appointments.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Inconvenience</b>	Increased physical presence, expanding services into North Ellsworth.	Yes	Coastal Skin Care and Coastal Health Care, a clinic in North Ellsworth, joined MCMH in 2015. The additional space in this office has physician recruiting, to begin work to add additional providers and increase service availability to patients.
	Recruitment and employment of additional physicians – both primary care and specialists.	Yes	Additional primary care providers, and specialists (including ortho, rheumatology and general surgery) were recruited. In addition to primary care current searches include: Cardiology, GI, Pulmonary.
	Health Fairs and other Health Screening events available in a variety of towns and venues.	Yes	The Director of Rehabilitation Services has worked with the Downeast public health council, led by the Maine CDC Liaison, and the clinical subcommittee of that body to create a protocol for general health.
	MCMH will partner with the Public Health Counsel for Know Your Numbers health fair events starting in 2015.	No	We have worked with the Downeast public health council, led by Al May, and the clinical subcommittee of that body to create a protocol for general health. We created the protocol so that all of the data (de-identified of course) would be standardized and would help us to further quantify and qualify the needs of the community. We are preparing to schedule these events. Another goal is to perform these screenings at non-traditional events with the hope that we can reach groups that are not usually aware of such issues. To reach this audience we will consider performing screenings at events such as the Blue Hill Fair, the Machais Blueberry festival, and area Mud Runs just to name a few potential targets. These events will start in 2016.



## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2015 Implementation Strategy Planned Actions (Impact Initiatives) to Address Priority of Focus	Was the Action Implemented (Yes/No)	If <b>YES</b> - Describe actions taken; Results from those actions; Progress made based on those actions If <b>NO</b> -Provide a reason why no action was taken
<b>Issues Preventing Access to Care: Inconvenience</b>	<p>MCMH works closely with the Coastal Care Team as part of the Patient Centered Medical Home program to ensure that patients receive well rounded care. This is part of the “team” approach to patient care, and includes working to ensure that patients have access to mental health services they need. The Coastal Care team will frequently visit patients in home to do assessments and facilitate access to tertiary services.</p>	<p>Yes</p>	<p>Maine Coast Memorial Hospital continues to refer patients to the Coastal Care Team for their services. When needed, the Coastal Care Team uses space in MCMH primary care settings.</p>