

Fiscal Year  
2017-2019

# Community Health Strategy

Addressing Community Health Needs



Mercy Hospital



# Table of Contents

Introduction.....	3
About EMHS.....	3
About Mercy Hospital.....	3
Addressing Community Health Needs.....	4
Shared Community Health Needs Assessment.....	4
Community Health Strategy.....	4
Feedback Opportunity.....	4
Evaluation Efforts.....	5
Approval from Governing Board.....	5
Selected Priorities of Focus.....	5
Priority #1: Substance Abuse Treatment.....	5
Priority #2: Affordable Housing and Homelessness.....	7
Priority #3: Medical Neighborhood.....	8
Priority #4: Preventive Screenings and Immunizations.....	9
Priority #5: Enrollment Activities and Coverage Counseling.....	10
Priority #6: Health Education.....	11
Health Priorities Not Addressed.....	12
Conclusion.....	12
Appendix (Evaluation of Impact).....	13

# 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.

Mercy 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, Mercy 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 Mercy Hospital

Mercy Hospital is a community hospital comprised of two acute inpatient locations, six primary care practices, five Express Care facilities, and 14 specialty practices. Mercy's service area is the greater Portland metropolitan area, roughly comprised of Maine's Cumberland County. The Portland area is experiencing an increase in diversity, with at least six percent of area residents born outside of the United States. Many of these new Mainers are refugees and asylum-seekers, who bring a unique set of circumstances and health needs to the community. Approximately 11 percent of Cumberland county households fall below the federal poverty level.



Mercy is a Roman Catholic hospital founded by the Sisters of Mercy. Its mission is to carry out “the healing work of Christ by providing clinically excellent, compassionate health care for all, with special concern for the poor and disadvantaged.” It has fulfilled that mission for nearly 100 years, both in the hospital and in the community.

# 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.



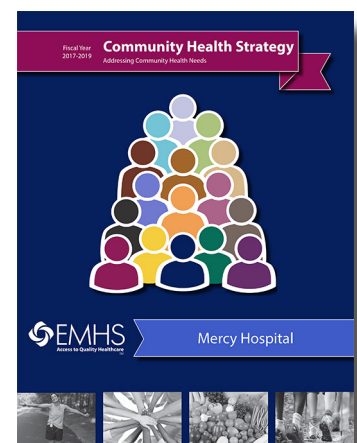
Results of the 2016 Shared CHNA along with community input were used to inform the development of this three-year Community Health Strategy by Mercy Hospital. The efforts identified within help demonstrate our commitment to our community, as we provide benefits reflective of our mission and tax-exempt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

Mercy 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, Mercy Hospital will be able to monitor and evaluate progress over time.

## Approval from Governing Board

Mercy 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 **April 21, 2016**.

# Selected Priorities of Focus

## Priority #1: Substance Abuse Treatment

### Rationale:

The goal is to create a successful integrated and comprehensive substance abuse treatment model for the Greater Portland community.

### Intended action to address the need:

In June 2015, Mercy Hospital moved Partial Hospitalization and Intensive Outpatient Services to the State Street Campus and closed the Recovery Center in Westbrook. Melissa Skahan, Vice President of Mission Integration at Mercy Hospital, convened the Greater Portland Addiction Collaborative (GPAC) steering committee to build capacity for addiction treatment in Greater Portland. GPAC focuses on four key goals: the effective use of existing resources, lowering cost while increasing the availability of high quality treatment, filling the gaps by expanding the continuum, and ensuring accountability for services delivered.

At a series of three meetings from December 2015 through February 2016, GPAC outlined Portland's unmet need for addiction services for uninsured or under-insured persons; developed a comprehensive, low-cost model to meet that need; and determined the cost, funding strategy, accountability, and governance required for success.

*continued on next page*

## Priority #1: Substance Abuse Treatment *continued*

### Programs and resource allocation:

Mercy Hospital has agreed to serve as the backbone organization to ensure integration and optimization of the collaborative model. GPAC participants agreed upon a collaborative model for addiction services. Highlights of each partner's role are as follows:

- **Portland Police Department:** PPD hired a Substance Abuse liaison to refer residents in need of service to the addiction collaborative and provide those residents ongoing support, saving on high-cost incarceration. This clinician responds with police officers to all overdoses and works closely with street outreach and all providers.
- **The Opportunity Alliance:** This team of professional mobile outreach clinicians responds around-the-clock to crises and refer clients to the collaborative, working with hospitals, EMS, and police, promoting greater engagement in treatment and services.
- **Milestone Foundation:** The Milestone Foundation offers emergency shelter, medically managed detoxification and long-term treatment. Their detoxification center will add bed capacity and additional nursing staff in an effort to serve more uninsured persons. The Homeless Mobile Outreach Team provides critical street outreach and transport for much of the target population.
- **Portland Recovery Community Center (PRCC):** PRCC offers healthy community and peer support to individuals seeking varied recovery pathways. Sustained peer support for all participants beginning at detox, including individual and group recovery support and coaching, at Milestone and in structured sober housing, will be offered.
- **Amistad:** Peer Coaching Initiative provides daily intentional peer support and provides the oversight in the GPAC structured sober housing.
- **Community Housing of Maine (CHOM):** is the largest provider of supportive housing in Maine. They will develop four properties for structured sober living for a total of 48 beds in year one, to reduce length of stay in detoxification without requiring housing assistance.
- **Preble Street Services:** Outreach and case management staff from Preble Street serve homeless individuals in and out of shelter: veterans, trafficking victims, youth, and tenant/families in a number of sites in Greater Portland.
- **Catholic Charities:** provides intensive outpatient, medication assisted treatment, and ongoing counseling in a lower cost community-based setting. Catholic Charities will add clinical staff and additional slots into intensive outpatient to serve more uninsured.
- **Integrated Addiction Services of Mercy Hospital, Maine Health and Greater Portland Health:** All providers will integrate addiction services into their primary care program to expand services and medication assisted treatment.

*continued on next page*

# Selected Priorities of Focus

## Priority #1: Substance Abuse Treatment *continued*

### Planned collaborations:

Drawing on Portland's strength as a small city where people know and trust one another, the collaborative aligns the efforts of the following organizations currently addressing the opioid crisis: Mercy Hospital, Milestone Foundation, Portland Community Health Center, Catholic Charities of Maine, Portland Recovery Community Center, The Opportunity Alliance, Portland Police Department, The City of Portland, Maine Medical Center, Amistad, Preble Street, and Community Housing of Maine.

### Population of focus:

Treatment model for the Greater Portland community

## Priority #2: Affordable Housing and Homelessness

### Rationale:

McAuley Residence serves homeless women, who are battling substance use disorder with or without their children. The majority of women are addicted to opiates with ten or more years of active use and significant trauma, including rape, sex trafficking, and domestic violence. The program provides housing, access to comprehensive care, and promotes healthy lifestyles and self-sufficiency.

### Intended action to address the need:

McAuley Residence, a department of Mercy Hospital, is a comprehensive two-year program with transitional housing for women in early recovery with or without children. In the newly-renovated space, McAuley Residence has fifteen apartments with beautiful common space for the residents to gather such as a community kitchen and large playroom for the children. Each woman sets measurable goals around sobriety, parenting, education, employment, and financial stability and is held deeply accountable for their personal success.

### Programs and resource allocation:

Mercy Hospital provides the staffing (LMSW, LADC, and Peer) at McAuley Residence and provides resources to operate the program annually. Women and their children also have access to the resources of Mercy Primary Care and Specialty Care; and New England Eating Disorders Program as needed.

### Planned collaborations:

McAuley Residence partners with several area primary care and mental health providers, hosts Alcoholics and Narcotics Anonymous meetings, and welcomes community volunteers as both sponsors and mentors. The Opportunity Alliance provides parenting coaches for families; and local colleges, universities, and Portland Adult Education services provide educational opportunities and counseling services. Key Bank provides individualized financial mentoring for the women to ensure financial literacy and self-sufficiency. Community Housing of Maine (CHOM) owns the property and provides apartments, office space, community kitchen and playroom space.

*continued on next page*

# Selected Priorities of Focus

## Priority #2: Affordable Housing and Homelessness *continued*

Community Housing of Maine (CHOM, our housing partner) is a non-profit charitable organization that as its core mission provides advocacy, supportive housing, community inclusion, and stability for homeless and special needs populations across the state. Catherine Morrill provides reduced child care services for the children at McAuley Residence. Weekly seminars around women's health issues, yoga, art lessons, and nutrition provide another venue for local artists, professionals, and chefs to volunteer at McAuley Residence.

### Population of focus:

The program serves women who have experienced addiction, homelessness, trauma, sex trafficking, and domestic violence.

## Priority #3: Medical Neighborhood: Affordable options for people who are uninsured or under-insured

### Rationale:

The intent of this model is to provide access to care, leverage sustainable community assets, and promote rational utilization of all services.

### Intended action to address the need:

Mercy's Medical Neighborhood seeks to provide access to quality healthcare for all uninsured patients in the Greater Portland community through the expansion of our flexible care delivery system. The intent of this model is to promote healthy relationships and rational utilization of services. The model seeks to reduce out of pocket costs associated with insurance plans, develop concrete supports, and reduce the overall cost associated with care of uninsured and underinsured patients.

### Programs and resource allocation:

Mercy's Vice President of Mission facilitates the work of the medical neighborhood. The weekly meetings of the neighborhood team discuss the needs of individual high users, system issues, and trends across the care delivery system. Mercy's Emergency Department Care Manager and Financial Counselors play a critical role in developing a rapport with uninsured patients in the acute setting and engaging the necessary neighborhood resources such as peers, street outreach, or CHOWs to begin the desired transition to a medical home. Financial Counselors routinely meet patients in community to complete a comprehensive screen for resources.

The Utilization Review Team reviews all requests for care for uninsured persons to determine if the request meets medical necessity and to ensure that care is coordinated with community resources and providers.

*continued on next page*



## Selected Priorities of Focus

### Priority #3: Medical Neighborhood: Affordable options for people who are uninsured or under-insured *continued*

In 2015, utilization review process resulted in cost avoidance of \$1.3M in unnecessary or duplicative care. The medical neighborhood team advanced 444 individuals for disability, which provides access to a wide array of services, housing, and resources.

#### Planned collaborations:

Experts from Amistad's Peer Support Program, Milestone's Homeless Outreach & Mobile Engagement (HOME) Team, outreach workers from the City of Portland, Preble Street, and the Oxford Street Shelter; and Community Health Outreach Workers (CHOWs) from Portland's Health Equity Department respond to the unique needs of the vulnerable patients in Mercy's Medical Neighborhood and provide the necessary consumer insight to actively guide the response of the healthcare delivery system. The Patient Centered Medical homes at Portland Community Health Center (PCHC) and Mercy's Portland Internal Medicine (PIM) have integrated social interventions into their care delivery models with behavioral health services, community care teams, and care management; and remain committed to continually improving the patient experience for uninsured populations. Mercy's Financial Counselors offer marketplace enrollment services and advocate for governmental resources such as Medicaid Disability and Social Security benefits for all neighborhood patients. Patients access Mercy's medical neighborhood services through any partner agency, building upon existing relationships.

#### Population of focus:

All uninsured patients in the Greater Portland community.

### Priority #4: Preventive Screenings and Immunizations

#### Rationale:

Preventive screenings and immunizations help identify hidden disease risks for improved health and provide protection against infection with viruses.

#### Intended action to address the need:

- Mercy Hospital participates in health education events in Greater Portland and other health fairs within parishes, non-profits such as Amistad, and faith communities.
- All of Mercy's Primary Care Centers have achieved Patient Centered Medical Home certification and measure progress for all patients regarding engagement in preventive screenings, preventive care, and immunizations.

*continued on next page*

## Selected Priorities of Focus

### Priority #4: Preventive Screenings and Immunizations *continued*

**Programs and resource allocation:**

Mercy Hospital provide administrative staff and clinical staff for flu clinics, outreach events, and health fairs. Mercy Hospital provides trans disciplinary staff in primary care sites to deliver integrated behavioral health services and social interventions to ensure comprehensive care and improved quality of life.

**Planned collaborations:**

Mercy Hospital partners with the Cumberland County District Public Health Council, local public health departments, city leaders, schools districts, parishes, and public housing to provide flu clinics and participate in health fairs. Mercy's Primary Care sites partners with local behavioral health providers and Community Care Teams. Through the work of the CDPHC, collaboration occurs to ensure access throughout the county to needed immunization clinics.

**Population of focus:**

All patients

### Priority #5: Enrollment Activities and Coverage Counseling

**Rationale:**

Raise awareness of affordable coverage options and promote its enrollment and financial counseling services to the community at large.

**Intended action to address the need:**

Mercy Hospital welcomes all uninsured persons to provide education on affordable coverage options on the marketplace and provide application counseling services on Monday through Friday from 8-4pm.

**Programs and resource allocation:**

Mercy has trained twenty staff to serve as Certified Application Counselors (CACs). The CACs are available from 8-4pm for scheduled and walk-in appointments; and have a dedicated phone line, and e-mail address.

**Planned collaborations:**

Mercy Hospital will partner with local parishes, insurers, city leaders, libraries, and providers to raise awareness of affordable coverage options and promote its enrollment and financial counseling services to the community at large. Collaboration continues with the CDPHC to bring all insurers from the exchange to the Council for education, updates, and discussion aimed at outreach to encourage enrollment and access to coverage.

**Population of focus:**

All uninsured persons.

## Priority #6: Health Education

### Rationale:

Health education motivates patients to improve and maintain their health, prevent disease, and reduce risky behaviors.

### Intended action to address the need:

Mercy Hospital participates in community events with the Portland's Health Equity and Public Health Departments, providers, and non-profits to deliver health education sessions for the general public and vulnerable populations several times throughout the year.

### Programs and resource allocation:

Below is a listing of ongoing programs and events that require resources.

- Mercy's New England Foot and Ankle provides foot care, diabetic screening, and new shoes and socks for 200 homeless persons at the Oxford Street Shelter in Portland in December.
- Mercy Hospital's Gastroenterology practice has partnered with Portland Community Health Center to develop Colon Cancer Screening Education and Awareness to increase prevention in patients over age 50 and those at high risk. This project includes translation of documents, training for medical assistants and staff regarding cultural awareness, and funding for uninsured persons for screening diagnostics. Screenings at area parishes occur to identify high risk patients and deliver the necessary services.
- Mercy Hospital partners with the City of Portland's Health Equity Department at an upcoming health fair event for the Latino community in Southern Maine. At the event, community members will receive an array of health screenings including nutrition counseling, dental screening, blood pressure screening, vision screening and free adjustable glasses for those that need them, child evaluation for growth and development, and more.

### Planned collaborations:

Mercy Hospital partners with local non-profits, public health entities, civic leaders, and social service providers to deliver health education throughout the year at health fairs and events.

### Population of focus:

The general public and vulnerable populations.

## Health Priorities Not Addressed

Mercy 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, Mercy Hospital is currently poised to focus only on the highest priorities at this time. A number of priorities not selected, are listed below:

1. Unemployment/economic opportunity
2. Oral Health
3. Dental Care
4. Fear

While we support the non-selected priorities, we are not positioned to impact them directly. Our CHNA recognized the significant need for oral health services for the vulnerable, but the task force felt that Mercy Hospital was not positioned to address directly.

## Conclusion

Mercy 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.

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

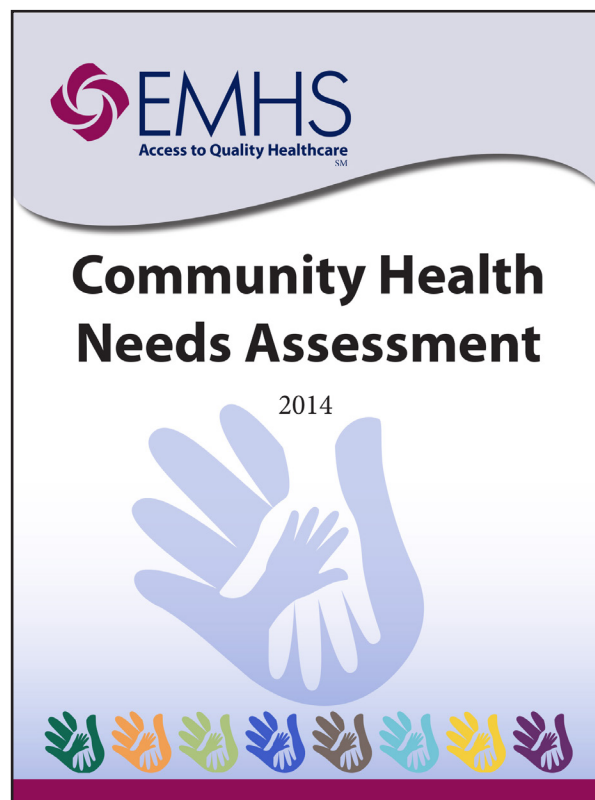


# Appendix - Evaluation of Impact

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

EMHS and Mercy 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 Mercy 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

## Community Health Strategy - Evaluation of Impact Since 2014

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:** Mercy Hospital

**Date:** July 15, 2016

2014 CHNA Priority of Focus	2014 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>Substance Abuse Treatment</b>	Mercy's Recovery Center offers the largest substance abuse treatment center in Maine for adults and treats the entire spectrum of substance abuse, from alcoholism to drug addiction. Our specialized Substance Abuse Treatment services include detoxification, group therapy, treatment of withdrawal symptoms, and long-term therapies designed to reduce an individual's chance of relapse and help patients through the tough transition from illness to recovery. Our programs encourage the participation of key family members at the appropriate point in treatment, while always remaining mindful of patient confidentiality. Special programs have been developed for pregnant and post-partum women and DEEP counseling for DUI/DWI offenders. Services include:		
	Skilled assessments/substance abuse evaluation	Yes	These services are provided by Mercy's addictionologist in primary care, the Emergency Department, and the acute setting.
	Medical management of withdrawal	Yes	Mercy Hospital has developed a protocol for management in the outpatient setting.
	Detoxification with the latest medications and comfort measures	Yes	Patients who meet the criteria for admission to the acute setting are managed in the hospital. Patients in the outpatient environment are provided addiction services in their primary care medical homes.
	Outpatient counseling and support services	Yes	Mercy Hospital provides integrated addiction services in primary care offices.
	Ongoing support needed to stay clean and sober	Yes	GPAC will add 48 beds for structured sober housing with wrap around services to include intentional peer support, recovery-oriented groups, and employment services.

# Appendix - Evaluation of Impact *continued*

## Community Health Strategy - Evaluation of Impact Since 2014

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:** Mercy Hospital

**Date:** July 15, 2016

2014 CHNA Priority of Focus	2014 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>Substance Abuse Treatment</b>	Mercy's Recovery Center offers the largest substance abuse treatment center in Maine for adults and treats the entire spectrum of substance abuse, from alcoholism to drug addiction. Our specialized Substance Abuse Treatment services include detoxification, group therapy, treatment of withdrawal symptoms, and long-term therapies designed to reduce an individual's chance of relapse and help patients through the tough transition from illness to recovery. Our programs encourage the participation of key family members at the appropriate point in treatment, while always remaining mindful of patient confidentiality. Special programs have been developed for pregnant and post-partum women and DEEP counseling for DUI/DWI offenders. Services include:		
	Skilled assessments/substance abuse evaluation	Yes	These services are provided by Mercy's addictionologist in primary care, the Emergency Department, and the acute setting.
	Medical management of withdrawal	Yes	Mercy Hospital has developed a protocol for management in the outpatient setting.
	Detoxification with the latest medications and comfort measures	Yes	Patients who meet the criteria for admission to the acute setting are managed in the hospital. Patients in the outpatient environment are provided addiction services in their primary care medical homes.
	Outpatient counseling and support services	Yes	Mercy Hospital provides integrated addiction services in primary care offices.
	Ongoing support needed to stay clean and sober	Yes	GPAC will add 48 beds for structured sober housing with wrap around services to include intentional peer support, recovery-oriented groups, and employment services.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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>Substance Abuse Treatment</b>	Mercy's Recovery Center provides \$3.6 million dollars in uncompensated care annually and provides comprehensive services to over 1600 patients with 73 staff.	Yes	In June of 2015, Mercy Hospital closed the Mercy Recovery Center in Westbrook as the program was not financially sustainable or the recommended care delivery model for addiction services. Mercy Hospital convened the Greater Portland Addiction Collaborative (GPAC) steering committee to build capacity for addiction treatment in Greater Portland for uninsured and under-insured persons. GPAC focuses on four key goals: the effective use of existing resources, lowering cost while increasing the availability of high quality treatment, filling the gaps by expanding the continuum, and ensuring accountability for services delivered. GPAC's shared commitment is to deliver evidence-based, low-cost treatment across the continuum with focus on system accountability. GPAC is poised to provide this coordinated substance use disorder treatment for uninsured persons from detoxification at the Milestone Foundation with seamless transition to Intensive Outpatient Treatment at Catholic Charities, continuing in primary care with integrated addiction services at Mercy Hospital, Maine Health, or Greater Portland Health with medication assisted treatment.
	Mercy's Recovery Center partners with volunteers from the recovery community. The volunteers are trained to facilitate daily groups and Alcoholics Anonymous meetings occur on site.	Yes	GPAC will add 48 beds for structured sober housing with wrap around services to include intentional peer support and employment services.
	Cumberland District Public Health Council collaborates to sponsor brochures listing resources for Substance Abuse Treatment options.	Yes	



## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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
Affordable Housing and Homelessness	<p>McAuley Residence, a department of Mercy Hospital, is a comprehensive two-year program for women in early recovery with or without children. In the newly-renovated space that is owned by Community Housing of Maine (CHOM), McAuley Residence has expanded from six apartments to fifteen apartments with beautiful common space for the residents to gather such as a community kitchen and large playroom for the children. The program serves women who have experienced addiction, homelessness, trauma, and domestic violence.</p>	Yes	<p>Mercy Hospital provides the staffing (LMSW, LADC, and Peer) at McAuley Residence and provides resources to operate the program annually.</p>
	<p>Mercy Hospital's Development Director seeks grant funding, leads annual fundraising events and campaign to support McAuley Residence.</p>	Yes	<p>Annual events in September and several grants are submitted throughout the year to support concrete needs, childcare, education, and housing costs.</p>
	<p>Women and their children also have access to the resources of the Mercy Recovery Center, Mercy Primary Care and Specialty Care; and New England Eating Disorders Program as needed.</p>	Yes	<p>All women and children must identify primary care, mental health services, and substance use disorder providers in Phase One of McAuley Residence.</p>

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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>Affordable Housing and Homelessness</b>	McAuley Residence partners with several area mental health providers, hosts Alcoholics and Narcotics Anonymous meetings, and welcomes community volunteers as both sponsors and mentors.	Yes	Recovery community volunteers and mental health providers offer recovery-oriented supports and evidence-based groups weekly.
	DHHS Child Services and The Opportunity Alliance provide parenting coaches for families; and local colleges, universities, and Portland Adult Education services provide educational opportunities and counseling services.	Yes	Parenting coaches are provided for all women with children. Both individual and group counseling is provided daily and weekly based on individual family needs. Family reunification remains a priority at McAuley Residence.
	Key Bank provides individualized financial mentoring for the women to foster self-sufficiency and independence.	Yes	Women meet individually with bank managers from Key Bank to develop a financial recovery plan. These meetings continue throughout the two year stay to ensure women have the acumen to become self-sufficient.
	Community Housing of Maine (CHOM, our housing partner) is a non-profit charitable organization that as its core mission provides advocacy, supportive housing, community inclusion, and stability for homeless and special needs populations across the state. CHOM also provides workforce housing for people who can't afford to live near their work.	Yes	Women at McAuley Residence sign a lease with CHOM for the apartment. Through support from CHOM and Mercy Hospital, women have the opportunity to successfully manage their leases.
	Business community provides education funding for women in college and Catherine Morrill provides reduced child care services for the children at McAuley Residence.	Yes	Fairchild Semiconductor and others provide direct support for books and other expenses associated with education. 58% of women who enter McAuley Residence enroll in higher education.
	Weekly seminars around women's health issues, yoga, art, and nutrition provide another venue for local artists, professionals, and chefs to volunteer at McAuley Residence.	Yes	Community artists, chefs, mental health providers, and local volunteers provide a weekly seminar to advance healthy lifestyles and coping skills for the women of McAuley Residence.

# Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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>Medical Neighborhood: Affordable options for people who are uninsured or under-insured</b>	Mercy's Medical Neighborhood seeks to provide access to quality healthcare for all uninsured patients in the Greater Portland community through the expansion of our flexible care delivery system. The intent of this model is to promote healthy relationships and rational utilization of services. The model seeks to reduce out of pocket costs associated with insurance plans and the overall cost associated with care of uninsured and underinsured patients.	Yes	Through legal structure and data sharing agreement, the partners are able to communicate seamlessly and respond in realtime to advance access for uninsured and underinsured. In 2015, 444 were secured insurance coverage and a medical home. Through a process of utilization review, \$1.3 million was avoided in unnecessary or duplicative costs.
	Mercy's Vice President of Mission facilitates the work of the medical neighborhood. The weekly meetings of the neighborhood team discuss the needs of individual high users, system issues, and trends across the care delivery system.	Yes	Mercy's Emergency Department Care Managers play a critical role in developing a rapport with uninsured patients in the acute setting and engaging the necessary neighborhood resources such as peers, street outreach, or CHOWs to begin the desired transition to a medical home.
	Experts from Amistad's Peer Support Program, Milestone's Homeless Outreach & Mobile Engagement (HOME) Team, outreach workers from the City of Portland, Preble Street, and the Oxford Street Shelter; and Community Health Outreach Workers (CHOWs) from Portland's Health Equity Department respond to the unique needs of the vulnerable patients in Mercy's Medical Neighborhood and provide the necessary consumer insight to actively guide the response of the healthcare delivery system.	Yes	Partners meet patients in community, at the hospitals, or local service providers. Average weekly referrals are 25-30 patients.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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>Medical Neighborhood: Affordable options for people who are uninsured or under-insured</b>	The Patient Centered Medical homes at Portland Community Health Center (PCHC) and Mercy's Portland Internal Medicine (PIM) have integrated social interventions into their care delivery models with behavioral health services, community care teams, and care management; and remain committed to continually improving the patient experience for uninsured populations.	Yes	Patients access Mercy's medical neighborhood services through any partner agency, building upon existing relationships.
	Case management provided by staff from The Opportunity Alliance helps uninsured patients connect with community mental health services, resources, and providers, who are willing to provide ongoing care for uninsured patients.	Yes	Opportunity Alliance is no longer a part of the Medical Neighborhood team. Mercy Care managers and Behavioral Health staff make necessary connections for patients.
	Mercy's Coverage Counselors and staff from Preble Street offer marketplace enrollment services and advocate for governmental resources such as Medicaid Disability and Social Security benefits for all neighborhood patients.	Yes	Staff routinely travel to meet uninsured persons at local shelters or agencies to complete enrollments and applications.
<b>Preventive Screenings and Immunizations</b>	VNA Home Health and Hospice will hold its annual flu shot clinics in school districts, senior housing, parishes, and meal sites where seniors gather. In 2013, they provided 7523 immunizations and are poised to continue this very important public service in 2014/2015.	Yes	VNA is no longer affiliated with Mercy Hospital. The organization continues to provide this valuable public service as part of EMHS.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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 Screenings and Immunizations</b>	Mercy Hospital and VNA Home Health and Hospice participate in Health on the Move events in Greater Portland and other health fairs within parishes, non-profits such as Amistad, and faith communities.	Yes	VNA is no longer affiliated with Mercy Hospital. Mercy Hospital participates in community events with the Greater Portland Immigrant and Refugee Health Collaborative, Public Health Departments, non-profits, local parishes, and Portland's Health Equity Department to deliver health education sessions for the general public and vulnerable populations several times throughout the year. Mercy Hospital provided five education sessions around Second Hand Smoke, Smoking Cessation, and low-cost Lung Cancer screenings for diverse communities in Portland at health fairs.
	All of Mercy's Primary Care Centers have achieved Patient Centered Medical Home certification and measure progress for all patients regarding engagement in preventive screenings, preventive care, and immunizations.	Yes	Mercy Primary Care Centers track annually the percent of patients that complete preventive screenings, preventive care, and immunizations.
	Mercy Hospital and VNA Home Health and Hospice provide administrative staff, clinical staff, and flu vaccinations for flu clinics, outreach events, and health fairs.	Yes	Mercy Hospital provides administrative and clinical staff at health fairs and flu clinics each year.
	Mercy Hospital provides trans disciplinary staff in primary care sites to deliver integrated behavioral health services and social interventions to ensure comprehensive care and improved quality of life.	Yes	Mercy Hospital's Gastroenterologists partner with Greater Portland Health to provide patient education and free colonoscopy screenings for high risk persons. Mercy Gastro trained staff at Greater Portland, translated documents in several languages, held outreach events at local parishes, and provided access to preventive screenings for high risk patients.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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	Mercy Hospital and VNA Home Health and Hospice partners with the Cumberland County District Public Health Council, local public health departments, city leaders, schools districts, parishes, and public housing to provide flu clinics and participate in health fairs.	Yes	Mercy Hospital provided administrative and clinical staff at health fairs and flu clinics each year.
	Mercy's Primary Care sites partners with local behavioral health providers and Community Care Teams.	Yes	Mercy Primary Care Centers meet weekly with members of the Community Care Teams and has integrated behavioral health providers.
Enrollment Activities and Coverage Counseling	Mercy Hospital will host two community events and hold office hours at the Portland Public Library to educate the public about affordable coverage options on the marketplace and provide application counseling services on Monday through Friday from 8-4pm.	Yes	Mercy Hospital offered enrollment services at the local public library and at local parishes. Mercy Hospital's CACs are available from 8-4pm for scheduled and walk-in appointments; and have a dedicated phone line, and e-mail address. Uninsured persons who present at the Emergency Department or Express Cares are offered financial counseling and enrollment services.
	Mercy has trained twenty staff and volunteers to serve as Certified Application Counselors (CACs). The CACs are available from 8-4pm for scheduled and walk-in appointments; and have a dedicated phone line, and e-mail address.	Yes	Mercy Hospital's CACs are available from 8-4pm for scheduled and walk-in appointments; and have a dedicated phone line, and e-mail address. Uninsured persons who present at the Emergency Department or Express Cares are offered financial counseling and enrollment services.
	Mercy Hospital will partner with local parishes, insurers, city leaders, libraries, and providers to raise awareness of affordable coverage options and promote its enrollment and financial counseling services to the community at large.	Yes	Events at local parishes, library, and at the hospital are offered for enrollment and financial counseling services.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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>Health Education</b>	Mercy Hospital participates in community events with the Greater Portland Immigrant and Refugee Health Collaborative, Public Health Departments, non-profits, and Portland's Health Equity Department to deliver health education sessions for the general public and vulnerable populations several times throughout the year.	Yes	Mercy providers, administrative staff, and clinicians provided several education events through the year as described below.  Mercy's Oncology Department provided education and outreach annually around nutrition, cancer prevention, and skin cancer screenings.
	Mercy providers Dr. Craig Brett from Cardiology and Dr. Ben Grasso from Behavioral Health Services present discuss the impacts of stress and how you can best manage your symptoms on @MPBN Maine Calling.	Yes	Mercy providers Dr. Craig Brett from Cardiology and Dr. Ben Grasso from Behavioral Health Services discussed the impacts of stress and how you can best manage your symptoms on @MPBN Maine Calling.
	Mercy provides diabetic education and primary care materials at Amistad's Health Dinners and at Health on the Move events.	Yes	Mercy provided diabetic education and primary care materials at Amistad's Health Dinners and at Health on the Move events.
	Mercy's New England Foot and Ankle provides foot care, diabetic screening, and new shoes and socks for 200 homeless persons at the Oxford Street Shelter in Portland in December.	Yes	Mercy's New England Foot and Ankle provided foot care, diabetic screening, and new shoes and socks for 200 homeless persons at the Oxford Street Shelter in Portland in December.

## Appendix - Evaluation of Impact *continued*

2014 CHNA Priority of Focus	2014 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
Health Education	<p>Mercy Hospital provides Colonoscopy education to show support for colon health and as a conclusion to National Colorectal Cancer Awareness Month. Visitors are able to stroll through an inflatable, larger-than-life colon replica, taught lifesaving information about colon health, and offered four educational sessions followed by stories from survivors as follows:</p> <p><b>The Truth About Colon Cancer</b> – Dr. Karin Cole  <b>Early Detection Saves Lives</b> – Dr. Chris Kleeman  <b>Cutting Edge Treatment</b> – Dr. Roger Inhorn  <b>Nutrition and Exercise Saves Lives</b> – Joan Lavery McLaughlin and Jennifer Daggett</p>	Yes	<p>Mercy Hospital provided Colonoscopy education to show support for colon health and as a conclusion to National Colorectal Cancer Awareness Month. Visitors are able to stroll through an inflatable, larger-than-life colon replica, taught lifesaving information about colon health, and offered four educational sessions followed by stories from survivors as follows:</p> <p><b>The Truth About Colon Cancer</b> – Dr. Karin Cole  <b>Early Detection Saves Lives</b> – Dr. Chris Kleeman  <b>Cutting Edge Treatment</b> – Dr. Roger Inhorn  <b>Nutrition and Exercise Saves Lives</b> – Joan Lavery McLaughlin and Jennifer Daggett</p>
	<p>Mercy and VNA partner with local non-profits, public health entities, civic leaders, and social service providers to deliver health education throughout the year at health fairs and events such as Health on the Move.</p>	Yes	<p>In partnership with Portland's Public Health Department, local parishes, Amistad, and MAIN, Mercy Hospital provides ongoing education each year.</p>
	<p>VNA has a long history of providing health education aimed at the elderly population. Particular attention is paid to reach our immigrant population by hosting a regular health screening, health education session at the Root Cellar in Portland.</p>	Yes	<p>VNA is no longer affiliated with Mercy Hospital, but continues to provide this valuable service.</p>