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Introduction

Northern Light Health and our more than 12,000 employees care deeply about our neighbors and communities. Northern Light Health member organizations work hard to understand and address priority needs. We meet regularly with community partners to plan and implement local solutions that make it possible for people in our communities to lead healthier lives. By working together, we promote a culture of stewardship and foster vibrant communities.

Northern Light Maine Coast Hospital is committed to shaping health improvement efforts in its service area based on sound data, personal and professional experience, and community need. Through collaborative efforts, Northern Light Maine Coast Hospital creates healthier communities through the provision of services, resources, and programs within and beyond the walls of the hospital.

About Northern Light Health

At Northern Light Health, we’re building a better approach to healthcare because we believe people deserve access to care that works for them. As an integrated health delivery system serving Maine, we’re raising the bar with no-nonsense solutions that are leading the way to a healthier future for our state.

As a statewide integrated healthcare system serving Maine, we provide care to people from Portland to Presque Isle and from Blue Hill to Greenville. We are comprised of nine member hospitals with 584 long-term beds, a single physician-led medical group, eight nursing homes, five emergency transport members, 37 primary care locations, and we employ more than 12,000 people in Maine.

About Northern Light Maine Coast Hospital

Northern Light Maine Coast Hospital in Ellsworth, is a full-service, non-profit hospital, serving both Hancock and western Washington Counties.

Our 64-bed Maine Coast facility provides emergency, primary and specialty care, acute inpatient, diagnostic, and surgical services.

Northern Light Maine Coast Hospital is dedicated to providing exceptional medical care with the personal touch and convenience only a community hospital can offer. Maine Coast has earned both national and state recognition for patient safety, outcomes, and patient satisfaction levels.

At Northern Light Maine Coast Hospital, we listen to our patients, and we also use community health data, like that collected in our Community Health Needs Assessment, to best serve our communities.

We welcome input from various groups, such as the Community Advisory Council and we work to respond to specific requests from our community partners, including local schools and nursing homes.
We collaborate with organizations including The Jackson Laboratory and Healthy Acadia to deliver educational programs to the people we serve. These provide a significant community benefit at no cost to our local friends and neighbors.

Working closely with our charity care patients, we identify programs that will cover their healthcare costs. When no coverage is available, we offer assistance programs to help ensure that every patient has access to the medical care they need and deserve.

We have outreach activities to keep our communities in the best health possible, including blood pressure screenings, presentations on nutrition, early childhood development, health fairs, and talks by our physicians and other providers around the region.

**Definition of Community Served**

Located in Ellsworth, Maine, Northern Light Maine Coast Hospital has a service area comprised of both primary and secondary service areas, together referred to as the total service area. Total service areas (TSA’s) are developed by the Northern Light Health Planning department based on neighboring zip codes from which a majority of a hospital’s inpatient admissions originate. TSA’s can sometimes overlap due to hospital locations or because of the specialty services provided by the hospitals.
Addressing Community Health Needs

Shared Community Health Needs Assessment

In 2019, Maine’s four largest healthcare systems – Northern Light Health, Central Maine Health Care, MaineGeneral Health, and MaineHealth – as well as the Maine Center for Disease Control and Prevention, an office of the Maine Department of Health and Human Services (DHHS) partnered to research and publish a shared Community Health Needs Assessment (Shared CHNA). The Shared CHNA provides a comprehensive review of health data and community stakeholder input on a broad set of health issues in Maine. The Shared CHNA data were made widely available to the public, as community engagement forums were held across the state, gathering additional feedback on priority issues and opportunities for community health improvement. These reports and the community input received are fundamental to achieving our goal of partnering with community, public health entities, and accountable care networks to improve the health and well-being of the communities we serve.

Results of the 2019 Shared CHNA along with community input were used to inform the development of this three-year Community Health Strategy by Northern Light Maine Coast Hospital. The efforts identified within help demonstrate our commitment to our community, as we provide benefits reflective of our mission and tax-exempt status. These benefits include a focus on the clinical, social, and environmental factors that influence the ability of people to lead healthier lives.

Community Health Strategy

This Community Health Strategy was developed with input from community stakeholders including those who serve priority populations, local Public Health District Liaisons, local business leaders, and community advocates.

Priorities were selected after weighing the severity of each priority area, availability of known and effective interventions, determination that the priority area was un-addressed or under-addressed, and community collaborations underway with Northern Light Maine Coast Hospital.
Northern Light Maine Coast Hospital reserves the right to amend this Community Health Strategy as circumstances warrant. For example, certain community health needs may become more pronounced and require enhancements or a refocus to the selected priorities of focus.

**Process and Methods for Priority Selection**

The community health strategy was developed by a planning team consisting of members both internal and external to our organization. The planning team included representatives with knowledge and insight of the communities served. Northern Light Maine Coast Hospital selected key priorities and strategies based on the county CHNA report, which includes quantitative health profile indicators and qualitative prioritization of need derived from a community engagement process. In addition, shared system-wide priorities were identified in the areas of Substance Use and Social Determinants of Health for all Northern Light Health members. These priorities were identified as shared priorities based on a selection process which considered a review of county level priorities across the state as well as local readiness and capacity to address these needs in partnership with local communities.

Members of Northern Light Maine Coast Hospital’s Community Health Strategy team included individuals representing the following positions:

- Director of Communications, Northern Light Blue Hill and Northern Light Maine Coast Hospitals
- VP-Senior Physician Executive
- Director of Physician Practices, Northern Light Maine Coast Hospital
- Manager, Nutrition Services, Northern Light Maine Coast Hospital
- Director, Rehabilitation Services, Public Health Liaison Northern Light Maine Coast Hospital
- Clinical Supervisor of Physical Therapy, Northern Light Maine Coast Hospital
- Director of Clinical Quality, Northern Light Blue Hill Hospital
- Executive Director, Food Programs Director, and Community Health Director, Healthy Acadia
- Downeast Public Health Liaison, Division of Public Health Operations, State of Maine

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

- Shared CHNA prioritization: How the health priority rank in the Shared CHNA
- System-wide priority areas of work as determined by the Community Health Council
- Ability to leverage local community assets: Identification of potential community partnerships to engage in order to address the priority need, or to build on current programs, emerging opportunities, or other community assets
- Expertise: Northern Light Maine Coast Hospital experts and local partnership experts in various priority areas
- Feasibility: Northern Light Maine Coast Hospital has the ability to have an impact given the community benefit resources available

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

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

**Evaluation Efforts**

Northern Light Maine Coast Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices we plan to document and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work. These quarterly reports will inform our
fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage.

Feedback Opportunity

Contact communitybenefits@northernlight.org with feedback on this report.

Approval from Governing Board

Northern Light Maine Coast Hospital’s Community Health Strategy and Community Health Needs Assessment (CHNA) were reviewed by the hospital’s governing board and a resolution was made to approve and adopt both the Shared CHNA and the Community Health Strategy on May 30, 2019.

Selected Priorities of Focus

Priority #1: Social Determinants of Health

Rationale
A community’s health can be determined in part by access to social and economic opportunities, the safety and cleanliness of environments, and the resources available in homes, neighborhoods, and communities. These social determinants of health are the conditions in which people are born, live, work and play, and affect a wide range of health and quality of life outcomes. Examples of social determinants include socioeconomic status, availability of safe housing, education, access to health care services, and food insecurity. Over the past two decades, a large and compelling body of evidence has revealed that these factors play a powerful role in shaping health. This has resulted in a greater understanding that medical care is not the only influence on health and suggests that traditional healthcare models may not be enough to adequately improve health outcomes or reduce health disparities without also addressing how people live.

The Northern Light Maine Coast Hospital’s Community Health Strategy team has identified Social Determinants of Health as a priority need for our community. There are substantial local community assets and Northern Light Maine Coast Hospital has assets available to be leveraged in support of this need. Also, there are many evidence-based or promising approaches to address the need for interventions on the many facets of Social Determinants of Health. Finally, Social Determinants of Health rated as a high priority to the community and our Northern Light Health system.

Intended action to address the need
We intend to take the following actions in some capacity during this three-year cycle to address this need in our community: understand barriers to social determinants screening, identify best practices in screening, assess full integration of the screening tools in our electronic health records, develop screening workflows across relevant care settings, work with institutional and community resources to address referral resources to meet identified needs.

Anticipated impact of these actions/expected outcomes
We anticipate that the result of these efforts will be to increase our understanding of social determinants of health needs in our community, to make it easier and more effective for care teams to screen patients consistently, to offer meaningful help to patients in need by connecting them with effective community resources, and to ultimately improve the health of the communities we serve.

Programs and resource allocation
We plan to dedicate necessary Northern Light Maine Coast Hospital internal resources in the form of time devoted
to annual community health improvement (CHIP) planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

**Planned collaborations**
We will continue to partner closely with regional partners including Northern Light Blue Hill Hospital and community health organizations, including Healthy Acadia and the DownEast Public Health Council on an ongoing basis to coordinate plans and activities to maximize the impact of our CHIPS.

**Plan for measuring impact**
Northern Light Maine Coast Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage. Specific metrics to be tracked could include screenings performed or referrals completed, for example.

**Population of focus**
Our population will include patient’s/community members of all ages, with the intention to particularly identify and reach people with the highest need for support and resources, and highest risk for isolation.

**Priority #2: Substance Use**

**Rationale**
Substance Use, including alcohol, tobacco, and other drugs, have a major effect on individuals, families, and communities. Alcohol misuse, smoking and tobacco use cause or increase risk of many diseases, such as cancer, heart disease, diabetes, and respiratory conditions. The effects of substance use often result in social, physical, mental, and public health problems, including domestic violence, child abuse, accidents, crime and suicide. Substance use is now understood to be a complex disease of the brain and body, requiring long-term attention and treatment just like any other chronic illness. There are many effective evidence-based strategies that communities, including healthcare organizations and providers, may employ to prevent, identify, and treat substance use disorders.

The Northern Light Maine Coast Hospital’s Community Health Strategy team determined it was feasible to address this need. There are substantial local community resources and Northern Light Maine Coast Hospital has services and resources available to be leveraged in support of this need. Also, there are many evidence-based or promising approaches to address the need for substance use interventions. Finally, substance use rated as a high priority to the community and Northern Light Health.

**Intended action to address the need**
We intend to take the following actions to address this need in our community: assess and improve screening practices, strengthen the availability of resources within our practices (and in partnership with outside resources) for helping patients with substance use disorders, develop and implement workflows that support ease of screening, management and referral, and participate in community education.

**Anticipated impact of these actions/expected outcomes**
We anticipate that our efforts will result in improved identification of people in need, improved access to substance use treatment services, and thus ultimately improve the health of the people we serve and the community at large.

**Programs and resource allocation**
We plan to dedicate necessary Northern Light Maine Coast Hospital internal resources in the form of time devoted
to annual CHIP planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

**Planned collaborations**
We will continue to partner closely with regional partners including Northern Light Blue Hill Hospital, the DownEast Treatment Hub, and community health organizations (including Healthy Acadia) on an ongoing basis to coordinate plans and activities and maximize impact of our CHIPS.

**Plan for measuring impact**
Northern Light Maine Coast Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work. These may include tracking screenings performed, referrals completed, numbers of patients being treated with Medication Assisted Treatment, naloxone prescriptions dispensed, or community programs completed, for example. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy web page.

**Population of focus**
The population of focus will be adolescents and adults within our community, with emphasis on people identified as being at risk for, or currently affected by, substance use disorders.

**Priority #3: Access to Care**

**Rationale**
We recognize that people with poor access to healthcare are at increased risk of negative health outcomes. Access to care was specifically identified as an important priority in Hancock County during the 2019 Community Health Needs Assessment process. In our rural area, access can be negatively impacted by a number of factors including transportation challenges, lack of health insurance, long wait times for certain important specialty services, health system challenges in recruiting and retaining clinical staff and primary care providers in very rural areas (in the setting of national shortages of primary care providers and clinical staff), and lack of access to technology (high-speed internet connections) that could facilitate some types of remote services and electronic interactions with health records and care team. Social isolation, health limitations that make leaving the home challenging (like frailty, fall risk, impaired mobility, vision and hearing loss etc.), and prevalence of occupations that make it difficult to seek care during traditional business hours, are also factors.

The Northern Light Maine Coast Hospital’s Community Health Strategy team determined it was both important and feasible to address this need. There are substantial local community assets and Northern Light Maine Coast Hospital has assets available to be leveraged in support of this need. Successfully improving access to care in our community is expected to benefit people of all ages, and all demographic categories, with particular impact on the most vulnerable.

**Intended action to address the need**
We intend to address access to care in some capacity during this three-year cycle across a broad range of needs that may touch upon patient populations, types of services, including mental health, diabetes, community telemedicine, palliative care, employee health, and women’s and men’s wellness.

**Anticipated impact of these actions/expected outcomes**
We anticipate that our efforts will result in improved access to a variety of important services, and thus in improved health for the people we serve and the community at large.
Programs and resource allocation
We plan to dedicate necessary Northern Light Maine Coast Hospital internal resources in the form of time devoted to annual CHIP planning, implementation, and evaluation, within the community health, population health, clinical, and administrative departments.

Planned collaborations
We will continue to partner closely with regional partners including Northern Light Blue Hill Hospital and other Northern Light Health practices, community health organizations (including Healthy Acadia), local education community, Emergency Management Services, Northern Light Beacon Health, and other partners to be identified based on CHIP specifics, on an ongoing basis, to coordinate plans and activities, and maximize impact of our CHIPs.

Plan for measuring impact
Northern Light Maine Coast Hospital will monitor and evaluate the strategies related to this priority area of work for the purpose of tracking the implementation of those strategies as well as to document the anticipated impact. Through internal quarterly reporting practices, we plan to document, and track measures, approaches and resources used, partners engaged, and highlights related to this priority area of work that may include tracking the number of programs offered, referrals, or people directly impacted, for example. These quarterly reports will inform our fiscal year-end Progress Report to Our Community that will be made publicly available on our community health strategy webpage.

We will identify measuring strategies appropriate to the finalized access to care related annual CHIP plans.

Population of focus
Patient and community population at large, with emphasis on people at high risk for barriers to access including older adults, the uninsured, people living in poverty, and people with a high burden of chronic mental health or physical illness.

Health Priorities Not Addressed
Northern Light Maine Coast Hospital considered all priorities identified in the Shared CHNA, as well as other sources, through an extensive review process. While the full spectrum of needs is important, Northern Light Maine Coast Hospital is currently poised to focus only on the highest priorities at this time. Priorities not selected, due to a variety of reasons are listed below:

- Mental Health - Northern Light Maine Coast Hospital has operationalized numerous mental health protocols in a number of our practices. Including, but not limited to the use of telepsychiatry services within our primary care sites, routine screenings for depression and suicide risk assessments with associated action plans for patients positively screened, and the institution of a Psychiatric Mental Health Nurse Practitioner in our primary care practice. In addition, our Access to Care priority plans will augment mental health access. Therefore, due to our current and ongoing engagement in many mental health initiatives, we have chosen to focus our efforts on other priority areas of need.

- Older Adult Health/Healthy Aging - This is an area that is being heavily and proactively addressed in our area on a sustained basis. Northern Light Maine Coast Hospital is participating in numerous healthy-aging related projects including the following Healthy Acadia collaborations: Aging in Place “Age -Friendly Coastal Communities Collaborative”, “Choices That Matter” (re: Advance Care Planning, end-of-life issues), Food security, healthy eating etc. (lunches, Magic Food Bus etc.), We also provide ongoing cancer screening and chronic disease screening through ACO and population health activities in primary care; and the Northern Light Palliative Care service line available now in Hancock County. Additionally, some of the work underway to augment elder health/healthy aging will fall within the “access” and “social determinants of health” community health priority.
Conclusion

Northern Light Maine Coast Hospital is thankful for the participation and support of our community members and many area organizations in the Shared CHNA process and for contributing their knowledge of local community health needs. Through existing and future partnerships, collaborative efforts will be essential in addressing the identified community health strategies prioritized within.

Northern Light Maine Coast Hospital will engage in another Shared CHNA in 2022 and looks forward to ongoing community participation in these important efforts.
Appendix

Evaluation of Impact

Progress report on selected priorities from Northern Light Maine Coast Hospital’s last (2016) Community Health Needs Assessment.

Northern Light Health and Northern Light Maine Coast Hospital are committed to promoting a culture of community stewardship, and partnering together with community stakeholders to address high priority health issues. In order to do so effectively, we regularly monitor the impact of our community health efforts, and make this information widely available to our communities in the form of annual Community Benefit statements, and this triennial Community Health Strategy report. The following annual Progress Report to Our Community provides a summary evaluation of impact of the actions taken by Northern Light Maine Coast Hospital to address community health priorities adopted in 2016.

Measuring and reporting on progress is critical to making a difference in the communities we serve, and in the lives of those we care for. The following annual Progress Reports to Our Community are provided for:

- Progress Report to Our Community FY17
- Progress Report to Our Community FY18
- Progress Report to Our Community FY19

For additional information, visit https://northernlighthealth.org/Community-Health-Needs-Assessment/2016-CHNA-Reports/Community-Health-Strategy
<table>
<thead>
<tr>
<th>Objective</th>
<th>Suboxone - By 9/30/2017 80% of primary care physicians will be trained and licensed to prescribe Suboxone.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>In Progress</td>
</tr>
<tr>
<td>Approaches taken and resources used</td>
<td>In fiscal year 2017 (FY17) Main Coast Memorial Hospital’s (MCMH) medical staff leaders worked with providers to receive education, through training modules, related to suboxone prescribing protocols/access to medication assisted treatment (MAT). MAT programs, in partnership with counseling, are shown to be a best practice in reducing opiate use. MCMH, as part of the Down East Substance Abuse Network worked to establish a Hub and Spoke model of treatment in Hancock County. Licensing of providers is one of the first steps.</td>
</tr>
</tbody>
</table>
| Partners engaged | MCMH engaged with the following partners on this priority:  
- Down East Substance Treatment Network members continue to engage with the community and medical professionals to ensure successful launch of the HUB program.  
- MDI Hospital, Blue Hill Memorial Hospital, Healthy Acadia, local law enforcement, key community stakeholders, business leaders, etc. |
| Highlights | See “Approaches taken and resources used” section. |
| Outcome Measure | One physician is licensed to prescribe and three are currently in training. |
| Project lead | John Ronan, President and Sheena Whittaker, MD |
| Next Steps | In fiscal year 2018 (FY18), MCMH will continue its work to develop a Hub and Spoke approach to support the licensing of providers to prescribe medication assisted treatment (MAT). |
## FY 2017 Progress Report

### Priority 2: Physical Activity, Nutrition, and Obesity - Diabetes Prevention Program

<table>
<thead>
<tr>
<th>Objective</th>
<th>Diabetes Prevention Program - By September 30, 2017, the number of graduate level diabetes prevention group registrations will increase from 0 to 20.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>Complete</td>
</tr>
<tr>
<td>Approaches taken and resources used</td>
<td>In FY17, MCMH patients in our diabetes prevention group lose weight and maintain weight while engaged in quarterly meetings, extending this support program to graduates of the initial group will provide further support and guidance and keep patients engaged in healthy activities. The diabetes prevention program manager designed the program curriculum and registered 72 people through the year.</td>
</tr>
<tr>
<td>Partners engaged</td>
<td>MCMH relied on internal staff to develop and conduct this program. No other partners were engaged.</td>
</tr>
<tr>
<td>Highlights</td>
<td>See “Approaches taken and resources used” section.</td>
</tr>
<tr>
<td>Outcome Measure</td>
<td>72 participated in the program</td>
</tr>
<tr>
<td>Project lead</td>
<td>Amy Henderson, Nutrition Services Supervisor</td>
</tr>
<tr>
<td>Next Steps</td>
<td>This community health improvement plan is complete, and while the work to increase the number of graduate level diabetes prevention group registrations continues, it will not be captured in a community health improvement plan (CHIP) for FY18 as it is part of the day-to-day approach. MCMH will instead focus on offering physical activity events to the general population.</td>
</tr>
</tbody>
</table>
### Priority 3: Mental Health - Community Health Counseling Services

<table>
<thead>
<tr>
<th>Objective</th>
<th>Primary Care offices will schedule intake appointments with Community Health and Counseling Services prior to patients leaving their primary care appointment. By 9/30/2017, Maine Coast Memorial Hospital will increase the number of patients referred to Community Health and Counseling Services by their provider, who immediately initiate an appointment prior to leaving their primary care appointment from 0-75%.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>Complete</td>
</tr>
<tr>
<td>Approaches taken and resources used</td>
<td>Immediate scheduling for intake appointments leads to better patient compliance and increased access to behavioral health services. Making appointments while in the office decreasing phone wait time, confusion, and decreases decline rate of referrals. In FY17, MCMH worked diligently to refer patients to Community Health and Counseling Services (CHCS) prior to the conclusion of their primary care appointment.</td>
</tr>
</tbody>
</table>
| Partners engaged | MCMH engaged the following partners on this priority:  
  - Community Health and Counseling Services |
| Highlights | See “Approaches taken and resources used” section. |
| Outcome Measure | 344 patients were referred to CHCS and 127 patients scheduled and attended appointments and received therapy services. |
| Project lead | Jen Hubbard, PhD, Director of Primary Care and Referrals |
| Next Steps | This community health improvement plan is complete, and while the work increase the number of patients referred to Community Health and Counseling Services by their provider, who immediately initiate an appointment prior to leaving their primary care appointment continues, it will not be captured in a community health improvement plan (CHIP) for FY18 as it is part of the day-to-day approach. |
**FY 2017 Progress Report**  
**Priority 3: Mental Health - Provider Education**

<table>
<thead>
<tr>
<th><strong>Objective</strong></th>
<th>By September 30, 2017, 95% of providers and staff will attend staff education with Crisis Response and Community Health and Counseling Services regarding their referral processes, as well as the diagnoses and prevention of depression and suicide.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Status</strong></td>
<td>In Progress</td>
</tr>
<tr>
<td><strong>Approaches taken and resources used</strong></td>
<td>In FY17, MCMH worked closely with behavioral health specialists to improve the care available for all of our patients, and increases the effectiveness of the referral process as well as the utilization of the services available. MCMH scheduled Gate Keeper training with NAMI (National Alliance on Mental Illness) for primary care office management. After this training was conducted, front line staff and providers were provided education. MCMH also hired a psychiatric nurse practitioner embedded in the primary care practice to assist with this ongoing behavioral health need.</td>
</tr>
</tbody>
</table>
| **Partners engaged** | MCMH engaged the following partners on this priority:  
- NAMI (National Alliance on Mental Illness) |
| **Highlights** | See “Approaches taken and resources used” section. |
| **Outcome Measure** | All providers, nurses, and staff have been exposed to this education and information. |
| **Project lead** | Jen Hubbard, PhD, Director of Primary Care and Referrals |
| **Next Steps** | In FY18, MCMH plans to continue working collaboratively with others to adapt the Joint Commission’s preferred standardized, outcome tools for Suicide Prevention. |
### FY 2017 Progress Report
#### Priority 4: Health Literacy - Know Your Numbers

<table>
<thead>
<tr>
<th>Objective</th>
<th>Maine Coast Memorial Hospital will host 2 Know Your Numbers Health Fairs before 09/30/2017.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>Complete</td>
</tr>
<tr>
<td>Approaches taken and resources used</td>
<td>In FY17, MCMH hosted a Know Your Number Health Fair to include not only measuring important health indicators such as cholesterol, blood pressure, BMI, and blood sugar but counseling with a health care professional to educate on results, and provide access to referral services.</td>
</tr>
</tbody>
</table>
| Partners engaged | MCMH engaged the following entities on this priority:  
- Eleanor Widener Dixon Memorial Clinic in Gouldsboro clinic committee  
- Gouldsboro police department  
- Cadillac Mountain Sports |
| Highlights | The health fair had a lot of participation from the clinic committee, particularly their president who attended to hand out the bike helmets. |
| Outcome Measure | One health fair conducted |
| Project lead | Doug Keith, Director of Rehabilitation Services |
| Next Steps | This community health improvement plan is complete, and while the work to educate community members about important health indicators continues, it will not be captured in a community health improvement plan (CHIP) for FY18 as it is part of the day-to-day approach. |
| **Objective** | Maine Coast Memorial Hospital will host 14 Community Health Forums/Education events before 09/30/2017. |
| **Status** | Complete |
| **Approaches taken and resources used** | In FY17, MCMH conducted Community Health Forums and community health education events to educate our community about healthcare resources and local treatments. By taking health forums into additional settings (satellite clinic communities and schools) we reached audiences that might not come to the hospital for education. The forums were promoted through a variety of avenues such as press release, print and radio advertising, and social media. Attendance was variable based on topic – nutrition, orthopedic, and arthritis topics draw larger crowds while topics about specific procedures and cancer have low turn-out. |
| **Partners engaged** | No partners were engaged as this was an internal initiative within MCMH. |
| **Highlights** | MCMH was approached by a former nursing director who runs a rheumatoid arthritis support group to do a health forum about Rheumatoid Arthritis with one of our rheumatologists. Dr. Radis was happy to partner with her and attendance for this event was 27 people. The conversations at this event were very moving, and reassuring for the attendees and I am thrilled that we were able to offer this topic. |
| **Outcome Measure** | 14 Health Forums were conducted in FY17 |
| **Project lead** | Patricia Patterson King, Director Marketing and Public Relations |
| **Next Steps** | In FY18, MCMH will continue to host community health forums/education events in order to provide/engage the community in a variety of health focused topics. |
| **Objective** | By September 30, 2017 Maine Coast Memorial Hospital will add two links to provider approved resources for patient education to the patient portal, and increase registered portal users by 10%. |
| **Status** | Complete |
| **Approaches taken and resources used** | In FY17, MCMH provided links for users of the patient online portal access to health information helps patients understand disease and treatment, and engages them in their care. Patients are increasingly accessing health information online, in an effort to ensure that they are accessing accurate resources Maine Coast Memorial Hospital provided reliable options. Links to the Centers for Disease Control website and WebMD website. |
| **Partners engaged** | No partners were engaged as this was an internal initiative within MCMH. |
| **Highlights** | See “Approaches taken and resources used” section |
| **Outcome Measure** | 6859 patient portal users |
| **Project lead** | Jennifer Lee, HIM Director |
| **Next Steps** | This community health improvement plan is complete, and while the work to offer provider approved resources to MCMH patient portal continues, it will not be captured in a community health improvement plan (CHIP) for FY18 as it is part of the day-to-day approach. |
| **Objective** | By 9/30/2017, increase the number of qualified Medication Assisted Treatment (MAT) prescribers from 0% to 80% (7 Providers). |
| **Status** | In Progress |
| **Approaches taken and resources used** | In fiscal year 2017 (FY17) MCMH’s medical staff leaders worked with providers to receive education, through training modules, related to suboxone prescribing protocols/access to medication assisted treatment (MAT). MAT programs, in partnership with counseling, are shown to be a best practice in reducing opiate use. MCMH, as part of the Down East Substance Abuse Network worked to establish a Hub and Spoke model of treatment in Hancock County. Licensing of providers is one of the first steps. |
| **Partners engaged** | MCMH engaged the following partners on this priority:  
• Down East Substance Treatment Network members engaged with the community and medical professionals to ensure successful launch of the HUB program  
• MDI Hospital offered guidance and information as a hub/spoke for providers |
| **Highlights** | See “Approaches taken and resources used” section. |
| **Outcome Measure** | One physician is licensed to prescribe and three are currently in training. |
| **Project lead** | Sheena Whittaker, MD, Chief Medical Officer |
| **Next Steps** | In fiscal year 2018 (FY18), MCMH will continue its work to develop a Hub and Spoke approach to support the licensing of providers to prescribe medication assisted treatment (MAT). |
## FY 2017 Progress Report
### Systemwide Priority: Healthy Food Access - Food Insecurity Screen and Intervene

<table>
<thead>
<tr>
<th>Objective</th>
<th>Increase the percentage of patients screened for food insecurity from 0% to 50% by 9/30/2017.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status</td>
<td>In Progress</td>
</tr>
<tr>
<td>Approaches taken and resources used</td>
<td>In FY17, MCMH Pediatrics served as the pilot to launch this program to screen for food insecurity among its patients.</td>
</tr>
</tbody>
</table>
| Partners engaged | MCMH engaged the following partners on this priority:  
• Healthy Acadia |
| Highlights | Due to the success of this priority, MCMH staff expressed interest in implementing a food box program in FY18. |
| Outcome Measure | 5227 pediatric patients (not unique) were screened during the program, 44 screened positive, and 329 resource guides were provided. |
| Project lead | Terry Leahy, Director of Primary Care |
| Next Steps | This community health improvement plan is complete, and while the work to patients for food insecurity continues, it will not be captured in a community health improvement plan (CHIP) for FY18 as it is part of the day-to-day approach. |
Fiscal Year 2018

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Northern Light Maine Coast Hospital

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FY 2018 Progress Report
Priority #1: Substance use disorders; Systemwide priority: Opioid harm reduction – access to medication assisted treatment

**Objective:** By September 30, 2018, increase the number of qualified Medication Assisted Treatment (MAT) prescribers from one to four.

**Status:** In progress

**Approaches taken and resources used:** In fiscal year 2018 (FY18), Northern Light Maine Coast Hospital engaged in the following activities:

- The Hub and Spoke team came to our medical staff meeting in July to review how the process works. A 30-minute presentation was provided. This helped encourage people to become prescribers, but also helped them understand the referral process to the Hub.
- We had three providers who were qualified to prescribe suboxone; one person has left our employ, leaving two.
- Clinical directors are going to discuss the Hub and Spoke process with doctors in their clinic.
- Due to limited patient experience coming out of the Hub, it has been hard to recruit doctors to complete the training.

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

- Healthy Acadia
- Downeast Substance Treatment Network
- Ellsworth Police Department
- Hancock County Sheriff’s office
- Northern Light Blue Hill Hospital
- Mount Desert Island Hospital

**Highlights:** A number of providers received education on the Hub and Spoke model inclusive of the infrastructure and processes for accepting referrals as developed by the initiative. Three providers were trained in MAT therapy. As the new Hub and Spoke model is implemented, patients will benefit.

**Outcome Measure:** In FY18, the outcome measure for this objective achieved by Northern Light Maine Coast Hospital was to increase the MAT trained providers from one to four. This is still in progress as three MAT providers were trained. Additional MAT candidates are being identified. Due to this foundational work, Northern Light Maine Coast Hospital is prepared to accept referrals from the Hub and Spoke model.

**Project Lead:** Sheena Whittaker, MD, Northern Light Maine Coast Hospital, vice president, senior physician executive

**Next Steps:** In fiscal year 2019 (FY19), Northern Light Maine Coast Hospital provider turnover prevented us from achieving the FY18 goal of having four trained MAT providers. New applicants are being recruited at this time. The opioid Hub and Spoke model will initiate patient referrals to the MAT program in FY19.
FY 2018 Progress Report
Priority #2: Physical activity, nutrition, and obesity

Objective: Host two physical activity events per quarter by September 30, 2018.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Maine Coast Hospital provided 23 events, at four sites, with more than 200 participants receiving services utilizing the staff of the Diabetes Self-Management and Training team.

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

- Eleanor Widener Dixon medical clinic
- Special Children’s Friends

Highlights: In FY18, Northern Light Maine Coast Hospital:
1. 23 Events total held.
2. Four individual sites.
3. Greater than 200 participants.
4. Developing/initiating activities with Northern Light Blue Hill Hospital.

Outcome Measure: In FY18, the outcome measure for this objective achieved by Northern Light Maine Coast Hospital was exceeded the goal of two events per quarter, for a total of eight events. During the year 23 events were held at three different sites, with over 200 participants attending.

Project Lead: Doug Keith, director of Rehabilitation Services

Next Steps: In fiscal year 2019, Northern Light Maine Coast Hospital will host four physical activity events per quarter, at five different sites, and increase participation to 250.
FY 2018 Progress Report
Priority #3: Mental health

Objective: Adapt The Joint Commission’s preferred, standardized, outcome tools for suicide prevention.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Maine Coast Hospital:

1. Organization-wide suicide prevention policy approved and in place
2. Unit specific suicide prevention guidelines in place
3. Screening tools in place and in use
4. Assessment tools for those identified by screening in place and in use
5. Intervention activity identified and in place, as indicated by assessment score

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

- The Columbia University Suicide Prevention Program
- All member organization (MCH) staff and providers
- Community Health & Counseling
- Northern Light Acadia Hospital telehealth

Highlights: In FY18, Northern Light Maine Coast Hospital:

1. Developed and adopted policies to support suicide assessment and prevention
2. Identified and adopted screening and assessment tools
3. Staff Education regarding the new policies and practices
4. Screening and assessment of all inpatients and outpatients is in place

Outcome Measure: In FY18, the outcome measure for this objective achieved by Northern Light Maine Coast Hospital was to adopt a Joint Commission approved, standardized, outcome based suicide assessment and prevention tool. This has been accomplished and the assessment and prevention tools are built into the electronic medical record.

Project Lead: Sheena Whittaker, MD, chief medical officer; and Terry Leahy, director, MCPA PCP

Next Steps: In fiscal year 2019, Northern Light Maine Coast Hospital will perform audits of a sample of inpatient and outpatient charts to ensure that suicide assessment and intervention practices follow policy and are effective.
**FY 2018 Progress Report**  
**Priority #4: Health literacy**

**Objective:** Host four health literacy events per quarter by September 30, 2018.

**Status:** Completed

**Approaches taken and resources used:** In FY18, Northern Light Maine Coast Hospital developed presentations, identified subject expert presenters, and scheduled presentations.

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

- Downeast Public Health Council
- Healthy Acadia
- Eastern Area Agency on Aging
- Township of Sullivan

**Highlights:** In FY18, Northern Light Maine Coast Hospital:

2. Held three pelvic health educational forums. Attendance – 60
3. Neck and back pain – two sessions on mechanical treatment program. Attendance 62
4. A-Fib Treatment Options – 16
5. Balance screenings – Sullivan – 2 sessions, Attendance 32
6. Matter of Balance classes – Ellsworth Northern Light Maine Coast Hospital, Tuesdays and Thursdays. Six classes held, Attendance total 72

Northern Light Maine Coast Hospital offered a total of eight different health literacy educational topics and presented education directly to 338 community members.

**Outcome Measure:** In FY18, the outcome measure for this objective achieved by Northern Light Maine Coast Hospital was to host four health literacy events per quarter. This was exceeded, hosting more than four events per quarter for a total of 18 events.

**Project Lead:** Doug Keith, director of Rehabilitation Services

**Next Steps:** In fiscal year 2019, Northern Light Maine Coast Hospital will build on the successes of FY18 by holding six events per quarter, with two events offsite at non-traditional healthcare venues.
FY 2018 Progress Report
Systemwide priority: Healthy food access – healthy hospital food

Objective: Northern Light Maine Coast Hospital will reformulate recipes to improve the nutritional content of food options offered at foodservice venues (cafeteria, vending, catering), United States Department of Health and Human Services and Centers for Disease Control and Prevention’s Health and Sustainability Guidelines for Federal Concessions and Vending Operations Guidelines by September 30, 2018.

Status: Completed

Approaches taken and resources used: In FY18, Northern Light Maine Coast Hospital completed uploading all Café/Patient menus to the Computrition system. Wherever possible all sauces have been replaced with a light sauce.

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

- Northern Light Health and all member organizations

Highlights: In FY18, Northern Light Maine Coast Hospital:
- Participated in organization wide planning for use of Computrition program
- Developed program materials
- Trained staff in program requirements
- Dietary Team Leader has been assigned to oversee development of program
- All café and patient menus are loaded into the Computrition program
- Production sheets completed
- All sauces have been upgraded to light wherever possible

Outcome Measure: In FY18, the outcome measure for this objective achieved by Northern Light Maine Coast Hospital was met. Applicable café items are now formulated for optimal nutritional content.

Project Lead: April Hartford, manager, Foodservice

Next Steps: In fiscal year 2019, Northern Light Maine Coast Hospital will define and then removing sugary beverages. Success will be measured by the decrease in the percentage of sugary beverages served. Assisting in a positive cultural change to accept and seek out healthy beverage alternatives.
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FY 2019 Progress Report
Priority #1: Substance use disorders; Systemwide priority: Opioid harm reduction – access to medication assisted treatment

Objective: Northern Light Maine Coast Hospital will increase the number of referrals to the Downeast Treatment Center, a treatment hub where people dealing with opiate use disorder could get stabilized and then move out into the community for maintenance and counseling, by five per quarter (20 per year) by September 30, 2019.

Status: In progress

Approaches taken and resources used: In fiscal year 2019 (FY19) Northern Light Maine Coast Hospital implemented a referral template to facilitate referrals of individuals with substance use disorders to the Downeast Treatment Center. In addition, Maine Coast Hospital worked to establish a mechanism to track and report referrals by providers quarterly and established a procedure to examine trends identified in referral patterns to address issues as identified.

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

Healthy Acadia, Downeast Substance Treatment Network, Hancock County Sherriff’s Office, Northern Light Blue Hill Hospital, Mount Desert Island Hospital, and Maine Coast Hospital Primary Care Providers

Highlights: In FY19, Northern Light Maine Coast Hospital was successful in creating a referral template, and engaging providers in opioid best practices. However, efforts to develop an accurate referral tracking system to the Downeast Treatment Center experienced unexpected challenges related to our patient’s episodic nature of care. Many of these patients do not have a primary care provider or the ability to follow-up on referrals. Recognizing these challenges will help our team identify alternative referral patterns in the future.

Outcome Measure: In FY19, the outcome measure for this priority work by Northern Light Maine Coast Hospital was ultimately determined to be unmeasurable due to technical factors.

Project Lead: Dr. Sheena Whittaker, VP Senior Medical Executive and Dr. Kathryn Rensenbrink, Primary Care Medical Director

Next Steps: In fiscal year 2020 (FY20), Northern Light Maine Coast Hospital plans to continue efforts to identify alternative referral patterns for patients in need of accessing the Downeast Treatment Center and other appropriate treatment providers and partnering with other organizations to address substance use outside of this reporting. During the next three-years, Maine Coast Hospital plans to focus on our chosen priority areas of work within our 2019 Community Health Strategy.
Priority #2: Physical activity, nutrition, and obesity

Objective: Northern Light Maine Coast Hospital will offer three nutrition and activity classes (six sessions each, one each trimester, at two different sites) by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Maine Coast Hospital provided education and support to attendees in our diabetes prevention classes, obesity prevention classes, and balance improvement classes.

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

- Healthy Acadia, Downeast YMCA, Northern Light Bone Health Program, Special Children’s Friends, and Northern Light Blue Hill Hospital

Highlights: In FY19, Northern Light Maine Coast Hospital expanded the number of programs, sites, and participants taking part in obesity improvement activities. In addition, we were successful in integrating the programs and staff of Maine Coast Hospital and Northern Light Blue Hill Hospital medical nutrition and diabetes services.

Outcome Measure: In FY19, the outcome measures for this priority work achieved by Northern Light Maine Coast Hospital exceeded our goals. We finished the year with a total of 60 courses offered at four sites, engaging over 575 community members.

Project Lead: Amy Henderson, Clinical Supervisor of Medical Nutrition Therapy.

Next Steps: In FY19, Northern Light Maine Coast Hospital operationalized our obesity awareness and intervention efforts. This program will continue outside of this priority reporting. During the next three-years, we plan to focus on our chosen priority areas of work within our 2019 Community Health Strategy.
Priority #3: Mental health

Objective: Northern Light Maine Coast Hospital will establish one full time onsite mental health clinician by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Maine Coast Hospital committed to adding staff and providing mental health services to patients at all Maine Coast Hospital sites, in person at Ellsworth, Internal Medicine and via Telemedicine at other sites.

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

- Northern Light Acadia Hospital
- The Downeast Treatment Center
- Northern Light Blue Hill Hospital
- Mount Desert Island Hospital
- Bucksport Regional Health Center
- Healthy Acadia

Highlights: In FY19, Northern Light Maine Coast Hospital successfully recruited and hired a full-time mental health professional. Services are now available to patients from all Maine Coast Hospital clinics. This service is available on site at the Ellsworth Internal Medicine clinic and via telehealth from other sites. Provider and patient satisfaction as measured by surveys and comments to staff site and manager are positive. An accurate, efficient electronic report is now in place.

Outcome Measure: In FY19, the outcome measure for this priority work was achieved by Northern Light Maine Coast Hospital with a total of four sites, 223 total patients, and 1,188 community members consisting of patient family members and friends were engaged in this service offering.

Project Lead: Terry Leahy Director of Physician Practices

Next Steps: In FY19, Northern Light Maine Coast Hospital completed the establishment of this program. We will continue this work on this priority outside this reporting. During the next three-years, we plan to focus on our chosen priority areas of work within our 2019 Community Health Strategy.
Objective: Northern Light Maine Coast Hospital will host five health literacy events per quarter for a total of 20 events held by September 30, 2019.

Status: Completed

Approaches taken and resources used: In FY19, Northern Light Maine Coast Hospital held a variety of health literacy events including:
- Patient Portal Workshops
- Breast Cancer Awareness
- Congestive Heart Failure education
- New Mother education
- Breastfeeding workshops
- Pelvic Health workshop
- Cancer Rehabilitation Awareness
- Staffed the Northern Light Blue Hill Hospital wellness fair

During these events subject matter experts discussed the topics and language used and handed out printed brochures and materials to assist community members.

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

- Patient Advisory council
- Healthy Acadia
- WABI TV
- Southwest Harbor Library
- Northern Light Blue Hill Hospital
- Beth C Wright Cancer Center

Highlights: In FY19, Northern Light Maine Coast Hospital expanded the number of topics, partners, sites and participants in our health literacy efforts.

Outcome Measure: In FY19, Northern Light Maine Coast Hospital was able to exceed our goals increasing our programs offered to 22 events, partners to six, and participants to 240.

Project Lead: Terry Leahy, Director of Physician Practices

Next Steps: In FY20, Northern Light Maine Coast Hospital has operationalized this work and will continue efforts related to this priority outside of this reporting. During the next three-years, we plan to focus on our chosen priority areas of work within our 2019 Community Health Strategy.
Objective: Improve the nutritional content of our hospital’s food offerings.

Status: In progress

Approaches taken and resources used: In FY19, Northern Light Maine Coast Hospital uploaded all menus to the Computrition software program aimed at increasing efficiency and productivity efforts with a focus on customer satisfaction. Maine Coast Hospital also prepared the groundwork for the rollout of the “real.easy.good.” program to help our consumers understand which foods are most consistent with eating a balanced diet based on the Dietary Guidelines for Americans.

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

- Northern Light Health-Food Service committee consisting of all Northern Light Health Member Organization Dietary Departments

Highlights: In FY19, Northern Light Maine Coast Hospital improved dietary options, reduced costs, prepared for the rollout of the “real.easy.good.” program, and implemented a full-time dietician, to improve services to our patients and employees.

Outcome Measure: Computrition – all diets uploaded into the software and prepared for the rollout of the “real.easy.good.” program.

Project Lead: April Hartford, Food Service Director

Next Steps: In FY20, Northern Light Maine Coast Hospital, having set the foundation and culture for improvement in organization nutrition, will continue this work outside of this priority reporting. During the next three-years, we plan to focus on our chosen priority areas of work within our 2019 Community Health Strategy.
Conclusion

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