Beth Israel Deaconess Hospital
Plymouth

Community Benefits Report to the Attorney General

Fiscal Year 2018

Beth Israel Deaconess Hospital
Plymouth

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Section I: Community Benefits Mission Statement

Summary

Beth Israel Deaconess Hospital-Plymouth (BID-Plymouth) seeks to improve the health and wellbeing of our patients and community by providing a full continuum of healthcare services with excellence and compassion. Serving the Greater Plymouth region, the hospital collaborates with community leaders, public and private agencies, and businesses. Together, we provide health promotion, health protection and preventive services to meet the broad range of our community's health and wellness needs, identified through community feedback and formal community needs assessments. As part of its mission to support community health, BID-Plymouth is committed to assessing root causes of health disparities and to assisting in improving health care for the disadvantaged and underserved.

BID-Plymouth collaborates with community leaders, public and private agencies and businesses across all sectors to implement a broad range of community health improvement initiatives, which are geared towards meeting the community's diverse health and wellness needs, including the underlying social determinants. These initiatives make up BID-Plymouth's Community Benefits Implementation Strategy, and serve all in need across the demographic and socio-economic spectrum, with special emphasis on those who are underserved, vulnerable and most at-risk. These initiatives are varied and include initiatives aimed at: 1) Community outreach; screening, and prevention; 2) Health promotion and education; 3) Enhancing access to services, 4) Integrating services and coordinating patient care across the continuum, and 5) managing chronic disease. BID-Plymouth's Implementation Strategy was informed by a robust community health needs assessment and community engagement process that periodically gathered all available quantitative health-related data from federal, Commonwealth, and local sources as well as vital qualitative information through community interviews, focus groups, surveys and community forums. BID-Plymouth is committed to a data-driven approach as well as one that is informed by a robust, inclusive community process that engages all stakeholders, including community residents. Both of these efforts are crucial to identifying community health priorities, understanding the root causes of poor health status, and fully appreciating the underlying social determinants that are at the heart of the disparities in access and health outcomes that exist in its service area.

BID Plymouth's community benefits mission is fulfilled by:

- **Involving the Medical Center's staff**, including its leadership, and dozens of community partners in the community health assessment process, as well as in the development, implementation, and oversight of the implementation strategy;

- **Engaging residents** throughout the Hospital's service areas in all aspects of the community benefits process, including assessment, planning, implementation, and evaluation. In this regard, special attention is given to engaging diverse perspectives from those who are often left out of these assessments, planning activities, and program implementation processes, as well as from patients and non-patients alike;
- **Assessing unmet community need** by collecting primary and secondary data (both quantitative and qualitative) to identify unmet health-related needs and to characterize those in the community who are most vulnerable and face disparities in access and outcomes;
- **Implementing community health programs and services** in BID-Plymouth's service area geared toward improving current and future health status of individuals, families, and communities by removing barriers to care, addressing social determinants of health, strengthening the healthcare system, and working to decrease the burden of the leading health issues;
- **Promoting health equity** by addressing social and institutional inequities, racism, and bigotry, as well as ensuring that all patients are welcomed and receive care that is respectful and culturally responsive; and
- **Facilitating collaboration and partnership within and across sectors** (e.g., state/local public health agencies, health care providers, social service organizations, businesses, academic institutions, community health collaboratives, and other community health organizations) to advocate for, support, and implement effective health policies, community programs, and services.

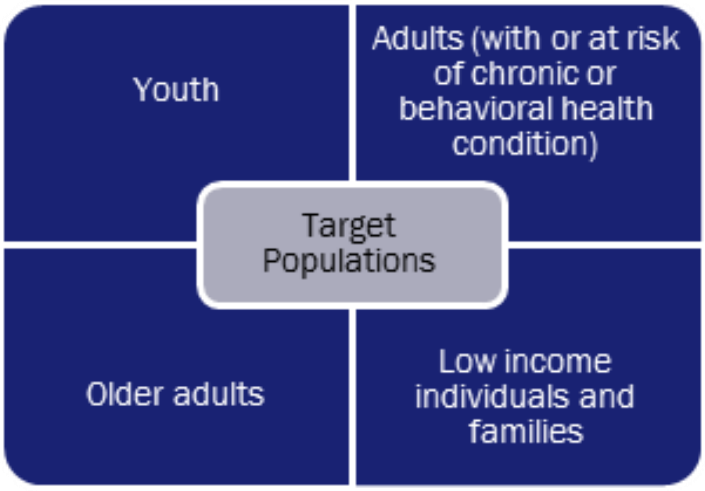
Name of Target Populations

BID-Plymouth's community benefits primary service area includes Carver, Duxbury, Kingston, and Plymouth. This primary service area encompasses a population of 101,093 with Plymouth accounting for over half of the population (59,885). The CHNA analysis focuses on this primary service area but also includes secondary service area comparisons. BID-Plymouth's secondary service area includes Bourne, Halifax, Marshfield, Middleborough, Pembroke, Plympton, Sandwich, and Wareham.

Findings from BID-Plymouth's FY 2016 Community Health Needs Assessment (CHNA), on which this report is based, showed that there were pockets of vulnerable and underserved segments throughout the service area. The Hospital is committed to improving the health status and well-being of those living throughout this area. However, the assessment also clearly showed that the low income and racially/ethnically diverse populations living in Plymouth were the

most at-risk segments in the service area and, as a result, the Town of Plymouth is the focal point of the Hospital's community benefits Implementation Strategy.

BID-Plymouth's Implementation Strategy, summarized in section VI of this report, includes numerous initiatives that support residents throughout the service area to live healthy, active, independent, and fulfilling lives. However, based on the quantitative and qualitative findings from the FY 2016 CHNA, including an extensive range of community engagement activities, there was broad agreement that BID-Plymouth's Implementation Strategy should prioritize youth, adults with or at risk of chronic physical or behavioral health conditions, low-income individuals and families, and older adults. These demographic and socio-economic segments are more likely to have complex needs and face barriers to care, service gaps, and other adverse social determinants of health. These factors put them at greater risk and limit their access to needed services, which in turn leads to disparities in health outcomes.



Basis for Selection

BID-Plymouth selected the target populations for its community benefits programs based on regional data collected through FY 2016 CHNA, our extensive, ongoing community engagement and outreach efforts, as well as our work with the Healthy Plymouth Initiative.

Publication of Target Population

Hospital Website: www.bidplymouth.org

Prioritizing Program Decisions Based on Target Population, Resources and Impact

BID-Plymouth evaluates program initiatives and selects activities carefully. As a not-for-profit hospital, our decisions reflect our mission to serve our community, a mission we have embraced for more than a century. Throughout our history, we have moved forward with the understanding that our ability to meet our community's health needs and our community benefits mission must be balanced by our ability to sustain ourselves and provide the highest quality, most accessible acute, hospital-based and outpatient services possible, which is our core mission. The Hospital's Board of Directors, the senior leadership team, and the Hospital's

other community-focused committees are committed to addressing the needs of the residents in its service area. These entities are also committed to implementing programs that will have an impact on both current health status as well as the underlying social and environmental issues that impact overall health and well-being in the long-term. BID-Plymouth's Community Benefits team, along with the senior leadership and its other advisory structures, conducted extensive internal and external engagement activities to evaluate and prioritize its community benefits target populations and the leading community health needs. The Hospital then works collaboratively with its community partners to develop, implement, and evaluate its Implementation Strategy with an eye towards what is feasible, sustainable, and what will have the greatest impact. See Section III: Community Health Needs Assessment for more background on the hospital's research into our community's healthcare needs.

Key Accomplishments of Reporting Year

As discussed above, BID-Plymouth's FY 2018 Implementation Strategy includes a comprehensive range of initiatives geared toward outreach, screening and identification, health promotion, access to care, and disease management. Periodically, surveys were distributed to the managers of these initiatives to track progress, outcomes, and impact with the goal of describing what is being done and assessing the ongoing value of the Implementation Strategy's components.

The following are brief descriptions of BID-Plymouth's core community benefits initiatives along with a listing of some of the key accomplishments. A more detailed description of these initiatives along with specific information on the priority area and target population that the program addresses, the community partners involved, program goals, and goal status are included in Section IV of this report below.

Initiative Name and Description	Key Accomplishments
Healthy Plymouth Initiative. BID-Plymouth, with the Town of Plymouth and Plymouth Public Schools, has brought together more than 60 community partners—from city officials to local farmers—to envision and build a more health-sustaining community. This community coalition meets periodically and works collaboratively to implement community health improvement programs that foster better health in our community, in the long-term, and at a lower cost.	▪ Organized six Coffee House events aimed at building community cohesion and youth empowerment. Four held at Plymouth high schools and two at Plymouth middle schools ▪ Engaged five income-eligible teens to participate in summer educational and employment opportunities at Colchester Farm and provided 40 low income households from Algonquin Heights Housing complex with $20 worth of fresh produce ▪ Thirty-four (34) teams of four participated in the Amazing Race fundraiser, engaging physical, educational and mental challenges in locations throughout Plymouth and raising over $27,000 through fees, donors, sponsors and an online auction. Net funds will support the hire of part time multi-school garden coordinators to enhance garden programs across all subjects and the launch an after school Peer Helper pilot for grades 6 and 7 at Plymouth South Middle School ▪ 190 6th, 7th, and 8th graders participated in an April Vacation Week school enrichment program, up from 145 in FY17 ▪ 150 students participated in the Permaculture School Garden Club, an after school program operating in eight elementary schools ▪ 121 fifth grade students participated in mentoring activities with elementary school children ▪ Four healthy markets were maintained in Plymouth in FY18. Healthy Options were updated monthly. New healthy recipe cards were printed and put out on counters for the public to use when deciding which products to buy
Access Program. The AIDS Comprehensive, Care, Education, and Support Services Program (ACCESS Program) provides HIV testing, medical care, prevention education, and support services to people living with HIV/AIDS in Plymouth and surrounding towns.	▪ Enrolled and provided important support to 12 new clients during FY 18 ▪ Offered free and anonymous HIV testing to 30 people. Of the 30, no one tested for HIV/AIDS ▪ Maintained 95% of viral suppression for our clients
HouseCalls Program. HouseCalls is a free educational	▪ More than 190 area residents participated in BID-Plymouth's HouseCalls

lecture series that links BID-Plymouth physicians and other health care providers at the Hospital with community groups who want to learn about a particular health issue.	▪ Lectures included total knee replacement, back pain management, causes and solutions for back pain, hernias and when surgery is necessary, migraine treatment options, and sleep apnea
Cancer Patient Support Program. This program identifies cancer patients with extreme emotional and financial hardship and matches them with counseling and financial supports when possible. This program is free to cancer patients whenever sources of support are available.	▪ Screened nearly 450 community residents/patients to evaluate any psychosocial and financial support needed by families and to help them complete forms for grants. 250 people were provided funds from a variety of organizations ▪ Provided peer support and counseling to cancer patients weekly. Twenty (20) attendees went through various support groups ▪ Provided free skin cancer screening and sun exposure awareness to 100 community members ▪ Evaluated 450 patients for distress and provided them with a list of services to meet the needs of this group ▪ Offered a total of 48 free women's health screenings every other month (mammograms/Pap smears) ▪ Hosted 400 women at the bi-annual Women's Health Symposium to educate and inform women on the latest in breast health. Event was free and dinner was included
Pediatric Palliative Care. The Fragile Footprints Pediatric Palliative Care Program is part of the Massachusetts Pediatric Care Network, administered by the Massachusetts Department of Public Health, Division for Perinatal, Early Childhood, and Special Health Needs. Through this program, BID-Plymouth provides medical case management and support services for children with potentially life-limiting illnesses and their families.	▪ Increased our outreach to serve 77 families and reduced the waiting list to 14 families ▪ Expanded scope of services to include an expressive therapist who provides music and art therapy and a certified aroma therapist (RN) to provide comfort and relaxation services ▪ Secured private donations from St. Mary's Church of Scituate, Duxbury Senior Center, The Village of Duxbury, Hope Floats Healing and Wellness Center, and the Yawkey Foundation to make family and group programs more accessible
Behavioral Health Integration Initiative. In response to overwhelming need in BID-Plymouth's Community	▪ Provided access and treatment of depression in outpatient PCP and specialty practices. Patients completed a health questionnaire (PHQ-9) and scores decreased by 42% from intake to discharge

Benefits Service Area (CBSA), the Hospital works in close partnership with local mental health and substance use providers to integrate behavioral health services into primary care, medical specialty care, and hospital emergency department settings. More specifically, the initiative places mental health specialists (e.g., licensed clinical social workers, advanced practice nurses, and other licensed mental health and substance use professionals) in medical settings to work alongside their medical counterparts. This clinical team then works to provide evidence-based integrated behavioral health screening, assessment, and treatment services to those with mental health and substance use issues. This initiative also supports public agencies as well as other community-based organizations to reach out to those with behavioral health challenges and helps them to address barriers to access, and expand the availability of behavioral health services.	▪ 77 individuals who experienced an overdose received follow up through Plymouth County Outreach
EMS Medical Control and Affiliation. Since 2003, BID-Plymouth has supported police departments and other local town offices throughout BID-Plymouth's service area with medical direction, training, and reporting support for the use of life-saving emergency procedures such as the use of Semi-Automatic or Automatic External Defibrillators (AEDs),	▪ Continuing with quality assurance and quality initiative program as well as continuing education with nine towns

Epinephrine Auto-Injectors, and Intranasal Naloxone. This initiative also provides a broad array of other services and supports to enhance the capacity and performance of the regions emergency medical service (EMS) providers.	
Smoking Cessation Program. From offering education on the dangers of tobacco use, to enhancing and promoting the Quit-line to the Hospital's smoke free campus, BID-Plymouth has long been a leader in tobacco prevention. Since 2013, the Hospital has taken prevention to a new level by developing a formalized system-wide approach by connecting with tobacco users who want to quit, and making it easier for them to reach their goals.	▪ Three percent (9 out of 352) patients referred to the Tobacco Treatment Specialist enrolled in Quit Sessions. This number is a decrease from 2017, where 5% (16 of 328) patients enrolled ▪ 20% of patients assessed by the Respiratory Therapist requested contact from a Tobacco Treatment Specialist (TTS) ▪ 1500 brochures were provided to patients in primary care settings and 1800 brochures were distributed to patients in the inpatient setting
Access to Care—Uninsured and Underinsured. BID-Plymouth worked with the State to communicate new health coverage plans for the uninsured and enroll those who qualify. Financial counselors screened and enrolled patients for MassHealth, Health Safety Net, Medical Hardship and Commonwealth Care.	▪ Staff enrolled 9,152 patients into entitlement programs
The Transportation Pilot Program (TPP). The TPP was developed in FY18 by a group of community agencies in Plymouth to address the tremendous transportation barriers experienced by their low-income clients. The program, modeled after a successful pilot serving residents	▪ In FY2018, BID-Plymouth made a financial contribution of $1,000 to help start up the program ▪ BID-Plymouth Staff participated on TPP Steering Committee

of Greater Attleboro, pays for Uber and Lyft rides for eligible clients in need. Funds donated by organizations to the program are matched through a state grant (up to 40K limit).	

Leveraged Resources for Community Health Initiatives

BID-Plymouth's community benefits activities are supported by an additional $1,836,674 in grants that facilitate the development of the initiatives that are part of the Hospital's Implementation Strategy, including those addressing AIDS/HIV and pediatric palliative care. Other successful grants supported hospital-based clinical and patient care improvements.

Plans for Next Reporting Year

In FY 2016, BID-Plymouth conducted a comprehensive and inclusive CHNA that included qualitative and quantitative data collection, robust community engagement activities, and an inclusive prioritization process. These activities were in full compliance with the Commonwealth's FY 2018 Community Benefits requirements and were well aligned with the updated Community Benefits Guidelines for FY 2019. In response to the FY16 CHNA, BID-Plymouth focused its FY 17-FY 19 Implementation Strategy on the following three priority areas. Based on our ongoing assessment and engagement activities, these priority areas continue to address the broad range of health and social issues facing residents living in BID-Plymouth's CBSA. These three priority areas are: 1) Heath risk factors, 2) Physical disease management and prevention, and 3) Behavioral health (mental health and substance use).

It should also be noted that these priority areas are aligned with the statewide health priorities identified by the Executive Office of Health and Human Services (EOHHS) in 2017 (i.e., Chronic Disease, Housing Stability/Homelessness, Mental Illness and Mental Health, and Substance Use Disorders.).

The FY 16 CHNA provided new guidance and invaluable insight on quantitative trends and community perceptions that have greatly informed and refined BID-Plymouth's efforts over the past three years. In completing the FY 2016 CHNA and FY 2017-FY 2019 Implementation Strategy, the Hospital, along with its other health, public health, social service, and community health partners, showed its commitment to improving the health status and well-being of all residents living throughout its CBSA, with an emphasis on low income, youth, older adult, and complex patients. In the coming reporting year, the Hospital's efforts will continue to draw on the FY 16 CHNA and work to implement its FY 2017-2019 Implementation Strategy. BID-

Plymouth will continue to work with dozens of community partners to execute its implementation strategy, including public agencies, social service providers, community health organizations, academic organizations, and businesses.

The Hospital is in the process of developing its FY 2019 CHNA and FY 2020-2021 CHIP through a robust assessment and community engagement process. The FY 2019 CHNA will be completed in June 2019 and will allow the Hospital to engage its community, refine its priorities, and sharpen its Implementation Strategy. This will allow the Hospital to continue to meet the CBSA's unmet community health needs, including the social and environmental issues that impact health, with the goal of improving health status and reducing health disparities for those deemed most at-risk.

BID-Plymouth will also continue to play a leadership role in educating, facilitating and empowering our community, including disadvantaged populations, on how to live a healthy lifestyle. Our outreach will continue to support student education and awareness of health and wellness issues.

BID-Plymouth will continue to offer its current roster of community education programs at little or no charge to the public with grants and other funding sources.

As BID-Plymouth and its community partners identify policy changes that underpin successful, sustainable changes in the Plymouth area, these successful models and programs will be shared throughout the larger region and across the state.

Section II: Community Benefits Process

Community Benefits Leadership Team

BID-Plymouth understands the importance of having the Hospital's leadership at the highest levels involved and engaged in all aspects of the development, implementation, evaluation, and oversight of the community benefits Implementation Strategy. With this in mind, a group of senior staff, called the Senior Leadership Team (SLT), and BID-Plymouth's Board of Directors oversee all aspects of the Hospital's Implementation Strategy. Below is a listing of the Senior Leadership Team members, which meets periodically to discuss progress and oversee the progress of the Implementation Strategy. In addition, the Board of Directors is kept abreast of activities at its monthly meetings.

In addition to overseeing the Implementation Strategy, the SLT and the Board of Directors oversees and are periodically involved in community engagement activities, the implementation of the CHNA, and the creation of the three-year Implementation Strategy, along with its annual updates.

BID-Plymouth Senior Leadership Team

- Kevin Coughlin, President and Chief Executive Officer
- Lisa Berry Barbosa, Vice President of Human Resources
- Mary Chapin, Vice President Ambulatory Services & Process Improvement
- Donna Doherty, Vice President of Nursing & CNO
- Andrea Holleran, Vice President of Strategic Planning & External Affairs
- Cynthia Outhouse, Vice President of Philanthropy
- Jason Radzevich, Vice President of Finance & CFO
- Ronald Rutherford, Vice President & CIO

BID-Plymouth Board of Directors

Board Member	Initial	Term Expires	Principal Affiliation
Michael Babini	1998	2019	Real Estate Services Consultant
Lyle Bazzinotti, Chair	1990	2019	Retired
John Carnuccio	2003	2018	Semi Retired
Kenneth Fosdick	1997	2019	Retired
William Gagnon	2013	2018	Tax Consultant
Charles Hewitt	2018	2021	Retired
Clark Hinkley	2004	2019	Retired
Mary Ellen Lawrence	2015	2020	Retired
Peter Muncey, Esq.	2005	2019	Lawyer (**Term ended 6/2018)**
Dennis Primavera	2018	2021	Retired
Kimberly Scheub, M.D.	2010	2020	Emergency Medicine
Keelas Small	2005	2020	Owner, Comfort Inn
Cynthia Stiglitz	2015	2020	Banking (**Term ended 8/2018)**
Stephen Trehu, M.D.	2007	2018	Radiologist
Stephen Fischer			
Stanley Lewis, M.D.			
Kevin Tabb, M.D.			

Ex-Officio Directors

Kevin Coughlin	President and CEO, BID-Plymouth, Inc.
Joshua Stuhlfaut, M.D.	President of Medical-Dental Staff

Senior Leadership Team and Patient Family Advisory Council

Senior Leadership Team. The Hospital's Senior Leadership Team (SLT) meets weekly to address Hospital business. The agenda for this meeting regularly includes topics relevant to the

Hospital's Implementation Strategy, including issues related to assessment of need, community outreach/engagement, partner development/collaboration, community benefits program operations, and evaluation of outcomes/impact. The SLT is dedicated to prioritizing, planning and tracking the Hospital's Implementation Strategy to address the findings of its community health needs assessment.

Patient Family Advisory Council. In addition to the SLT, the Vice President for External Affairs and her Hospital colleagues work to engage and involve the Hospital's Patient Family Advisory Council (PFAC) in developing, implementing, and evaluating the Implementation Strategy. Periodically, the Hospital's Community Benefits staff present to the PFAC to seek their input and engage them in important and targeted ways that help to ensure the success of the Implementation Strategy. In FY 2018, the PFAC worked on community education events related to End of Life Care; met with the Superintendent of Plymouth Schools to discuss leading health concerns for youth; and met with the Plymouth Director of Public Health to better understand the health needs in the community, just to name a few. The PFAC made important contributions to refining these initiatives.

Community Partners

BID-Plymouth collaborates with a wide range of community leaders and local groups to improve the health status of the people living in our communities and to provide the care they need at the right place and right time. Hospital leaders, clinical and administrative staff, and volunteers meet regularly with leaders from our community including elected officials, business owners, community service providers, emergency personnel, school administrators, media representatives and others with insight into the community's health needs. Beyond its walls, BID-Plymouth plays an active role in coalition building, working to empower a range of community leaders to foster sustainable, healthy lifestyles that lead to better health for all members of the community.

BID-Plymouth's Community Benefits staff regularly engages its community partners in the development, implementation, and evaluation of the Hospital's Implementation Strategy. These engagement efforts are conducted by soliciting feedback at community events, workshops, and community coalition meetings. In addition, community benefits staff and other Hospital staff members meet with key partners on a one-on-one basis to discuss needs and potential partnerships, such as with the Plymouth Public Health Department, the Healthy Plymouth Collaborative, Superintendent of Plymouth Schools, Plymouth Youth Development Council and the Transportation Pilot program staff. Hospital staff serve on numerous health-related committees, coalitions, and Boards. In addition, representatives from BID-Plymouth's partner organizations and community residents serve on Hospital committees (e.g., Board of

Directors, Patient Family Advisory Council, and the Patient Care Assessment Committee), providing important feedback and working with staff to improve service operations and community health care initiatives. Outside of BID-Plymouth's Implementation Strategy, Hospital clinicians and staff regularly collaborate with dozens and dozens of community partners throughout the region as part of efforts to perfect regular hospital operations and other community-focused activities. These activities are instrumental and help to inform the development and execution of the hospital's Implementation Strategy.

In support of the identified health priorities and the initiatives that are part of the Implementation Strategy, BID-Plymouth collaborates with nearly 50 community organizations. BID-Plymouth's Community Partners (see list below) work side-by-side with the Hospital and are actively engaged in health initiatives throughout the year that foster community health and wellness. The Hospital has collaborated with the Community Business Partners to bring issues of health and wellness to the forefront of this group. Finally, BID-Plymouth works with its Educational Partners to enhance its workforce, provide opportunities for learning, and broaden the Hospital's preventive reach throughout the CBSA and beyond.

Community Partners

- AD Makepeace
- American Heart Association
- Anchor House, Inc.
- Bayside Runners
- Bay State Community Services, Inc.
- Beth Israel Deaconess Medical Center
- BID-Plymouth Community Business Partners (approximately 69 businesses)
- Boston Public Health Commission—Ryan White Part A
- Cape Cod Canal Region Chamber of Commerce
- CleanSlate Centers
- Community Health Education Network Area 23 (CHNA 23)
- Duxbury Council on Aging
- Father Bill's and Mainspring
- Gosnold
- Greater Attleboro-Taunton Regional Transit Authority (GATRA)
- Greater Plymouth AIDS Consortium
- Greater Plymouth Food Warehouse
- Habilitation Assistance
- Harbor Community Health Center
- Health Imperatives, Inc.

- Health Resource & Service Administration (HRSA)—Ryan White Part C
- Healthy Plymouth
- High Point Treatment Center
- Loring Library
- Massachusetts Department of Public Health
- Massachusetts Department of Public Health Pediatric Palliative Care Network
- McLean Hospital
- National Alliance on Mental Illness of Massachusetts (NAMI Mass)
- Old Colony Elder Services
- Old Colony Planning Council
- Old Colony YMCA
- Pinehills LLC
- Plimoth Plantation
- Plymouth Area Chamber of Commerce
- Plymouth Area Community Television (PACTV)
- Plymouth Board of Selectmen
- Plymouth Conservation Commission
- Plymouth Council on Aging
- Plymouth County District Attorney's Office
- Plymouth County Outreach
- Plymouth County Outreach HOPE
- Plymouth Department of Public Works (DPW)
- Plymouth Family Network
- Plymouth Lions Club
- Plymouth Public Library
- Plymouth Public Schools
- Plymouth Resource Center
- Plymouth Youth Development Collaborative (PYDC)
- Red Cross Blood Drive
- Region V Massachusetts DPH Bio-Terrorism Committee
- Rotary Club of Plymouth
- Schwartz Center Rounds
- Sodexo
- South Shore Community Action Council
- Terra Cura, Inc.
- The Bridge
- The Herren Project

- The Parent Connection of Duxbury
- Thorbahn
- Town of Plymouth
- Town of Plymouth Open Space Comm.
- United Way of Greater Plymouth County
- Village at Duxbury
- Wildlands Trust
- Zion Lutheran Church Associates
- Boys & Girls Club of Plymouth
- Boys & Girls Club of Brockton
- Colchester Neighborhood Farms
- Kiwanis Club of Plymouth
- League of Women Voters
- Office of Adolescent Health and Youth Development
- Signature Healthcare / Brockton Hospital
- South Shore Chamber of Commerce
- Soule Homestead Education Center
- Southeastern Massachusetts Agricultural Partnership, Inc. (SEMAP)
- Southeastern Regional Office of Developmental Disabilities

Educational Partners

- Bay State College
- Bethel University
- Boston College
- Boston University School of Medicine
- Bridgewater State University
- Bristol Community College
- Bunker Hill Community College
- Cape Cod Community College
- Chamberlain College of Nursing
- Coastal Carolina University
- Curry College
- Drexel University
- Eastern Nazarene College
- Edward Via College of Osteopathic Medicine
- EMS Academy
- First Response Emergency Medical Education Program
- Fisher College
- Framingham State University
- Frontier Nursing University

- George Washington University
- Georgetown University
- Harvard Medical School
- Johnson and Wales University
- Laboure College
- Lesley University
- Massachusetts Bay Community College
- Massachusetts College of Pharmacy & Allied Health Sciences
- Massasoit Community College
- Medical Professional Institute
- Medical University of South Carolina
- MGH Institute of Health Professions, Inc.
- New England Institute of Technology
- Northern Essex Community College
- Northeastern University
- Nova Southeastern University
- Oregon Health & Science University
- Philadelphia College of Osteopathic Medicine
- Philadelphia University
- Priority Nutrition Care, LLC
- Providence College
- Quincy College
- Regis College
- Salem State University
- Signature Healthcare
- Simmons College
- Springfield College
- St. Anselm College
- Stonehill College
- Tufts University School of Medicine
- University of Buffalo
- University of Connecticut School of Pharmacy
- University of Massachusetts
- University of Massachusetts Dartmouth
- University of New England
- University of New Hampshire
- University of North Alabama
- University of Rhode Island
- University of South Alabama
- University of St. Joseph
- Upper Cape Cod Regional Technical School
- Utah State University

- Westfield State University
- Wingate University
- Yale School of Nursing

Section III: Community Health Needs Assessment

Date of Last Assessment Completed and Current Status

In 2013, BID-Plymouth engaged The Institute for Community Health to conduct a community health needs assessment to understand the community's unmet health needs. The needs assessment was conducted by professionals with advanced degrees (MD, PhD, MPH, MSW and ScD) in public health, epidemiology, and research and evaluation. In 2016, BID-Plymouth engaged John Snow, Inc. to conduct a similar CHNA, which can be found at the following link: http://www.bidplymouth.org/community-benefits. Our most recent Community Health Needs Assessment has allowed us to continue to address emerging needs in the community.

This needs assessment supports BID-Plymouth's efforts to improve the health of the regional population we serve. This assessment used archival and qualitative data gathered from BID-Plymouth's catchment areas, which include 12 local towns. More specifically, as stated above, BID-Plymouth's community benefits primary service area includes Carver, Duxbury, Kingston, and Plymouth. The CHNA analysis focused primarily on this primary service area but also included secondary service area comparisons. BID-Plymouth's secondary service area includes Bourne, Halifax, Marshfield, Middleborough, Pembroke, Plympton, Sandwich, and Wareham.

The assessment evaluated the health needs of disadvantaged populations, among other community health needs.

The 2016 CHNA was conducted in a three-phased process.

- Phase I involved a rigorous and comprehensive review of existing quantitative data along with qualitative data collection primarily through a survey of 190 partners to characterize community needs. Other data sources included:
    - Vital statistics, Cancer registry, Communicable disease registry (MA DPH)
    - Behavioral Risk Factor Surveillance Survey (MA DPH)
    - American Community Survey (US Census)
- Phase II involved a more targeted assessment of need and broader community engagement activities that included listening sessions with health, social service, and public health service providers as well as forums that included the community at-large. Other data sources included claims data for hospital inpatient and emergency

department discharges (CHIA) and resource inventory. Analyses included comparative benchmarking and mapping of health indicator data.

- Phase III involved a series of strategic planning and reporting activities that involved a broad range of internal and external stakeholders. This phase also included a range of community forums, whereby BID-Plymouth communicated the results of the CHNA and outlined the core elements of its current and revised CHIP.

Broad community representation included:

- Key informant interviews with the Vice President, Medical Affairs; Chief, Emergency Services; Chief Psychiatric Services; Director of Social Work; Volunteer Community Liaison and the Executive Director of the Plymouth Council on Aging. In addition, Community Forums included the Patient and Family Advisory Council; CHNA 23 General Meeting; Plymouth Youth Development Collaborative and BID-Plymouth Cancer Committee Meeting. Meetings were held between December 2015 and January 2016.

In collecting this data, BID-Plymouth sought to determine where community programs are already meeting health and wellness needs and determine which community health needs remain unmet. In addition, the prioritization criteria that were used focused on health risk factors; most prevalent physical health and chronic diseases and most at risk target populations. Our 2016 analyses identified the following key health-related opportunities:

- Decreasing alcohol and substance use, including opioid use
- Increasing access to healthy food and physical activity
- Better managing mental illness
- Addressing the community's high prevalence of chronic disease and cancer
- Increasing support for older adults
- Addressing concerns around Lyme disease and pneumonia

The hospital facility has made a commitment to address health needs through the development of targeted programming. These programs are outlined below.

The hospital has committed 3,549 hours of professional and clinical staff to addressing the priority health needs with the programs below. In addition, the hospital has committed $1,992,514 in non-labor expenses to support the work of the programs.

The hospital collaborates with the parent company and other affiliates in the system in identifying the health needs and developing the implementation plan. Further, the hospital partners with many community organizations to implement programs described in the CHIP.

These organizations are:

- BID-Plymouth Community Business Partners
- Brewster
- Child and Family Services
- CleanSlate Centers
- Community Health Education Network Area 23 (CHNA 23)
- Department of Developmental Services
- Department of Mental Health
- Duxbury Council on Aging
- Greater Attleboro-Taunton Regional Transit Authority (GATRA)
- Harbor Community Health Center
- Healthy Plymouth
- Greater Plymouth Council of Human Services Agencies
- Learn to Cope
- McLean Hospital
- Old Colony Elder Services
- Plymouth Council on Aging
- Plymouth County District Attorney's Office
- Plymouth Country Outreach
- PCO Hope
- Plymouth Board of Health
- Plymouth Lions Club
- Plymouth Police Department
- Plymouth Public Schools
- Plymouth Recovery Center
- Plymouth Rotary
- Plymouth Youth Development Collaborative (PYDC)
- South Shore Behavioral Health Collaboration
- South Shore Community Action Council
- Town of Plymouth
- United Way of Greater Plymouth County

Section IV: Community Benefits Programs

Healthy Plymouth Initiative	
Program Description	BID-Plymouth, with the Town of Plymouth and Plymouth Public Schools, has brought together more than 60 community partners—from city officials to local farmers—to envision and build a more health-sustaining community where the healthy choice is the easy choice. Because of the collaborative work initiated by BID-Plymouth, the Town of Plymouth, Plymouth Public Schools and other community partners are finding new ways to foster better health in our community, long-term, and at a lower cost, through the Healthy Plymouth Initiative. Supported by BID-Plymouth's Vice President of External Affairs, the Hospital has made a community-wide commitment to the shared goal of developing policy level changes that will expand the breadth and impact of health initiatives in the region. This program began as a population health initiative focused on education and community wide facilitation of healthy eating and active living. In FY2015, the statewide priority and local crisis of substance abuse and inadequate behavioral health access became the most pressing concern. Today, several of the initiatives activities are focused on these key issues. In FY 18, the Healthy Plymouth Initiative conducted a broad range of activities in school and in community-based settings geared towards youth including: • Middle school and high school enrichment activities • Food access, healthy eating, and active living activities • Health education and health promotion activities • Employment and job readiness activities
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors • Behavioral Health
Statewide Priority	• Chronic Disease Management in Disadvantaged Populations • Promoting Wellness of Vulnerable Populations • Reducing Health Disparity
Program Type	• Community Education • Community Participation/Capacity Building Initiative • Healthy Communities Partnership • Outreach to Underserved, Prevention

	• School/Health Center Partnership
Target Population	**Regions Served:** County - Plymouth Towns - Plymouth **Target Populations:** Medically Underserved, the Poor, Youth at Risk **Health Indicator:** Obesity, Heart Disease, Lung Disease, Cancer, Diabetes, Nutrition **Sex:** All **Age Group:** Youth at risk **Ethnic Group:** All **Language:** English
Partners	Terra Cura, Inc. Plymouth Public Schools Zion Lutheran Church Loring Library New England Villages Algonquin Heights Housing Complex Colchester Farm Plymouth Area Department of Developmental Services
Contact Information	Malissa Kenney 617-595-6770 wmakenney@msn.com

Goal Description	**Goal Status**
Goal 1: PPS/VPA Coffee House: To create a welcoming environment and public forum for Plymouth middle and high school students to perform for peers and the public in six scheduled events throughout the school year. The primary aims of these activities are to promote talent and develop confidence and self-awareness.	▪ Organized and presented six Coffee House events; four held at the high schools and two at the middle schools
Goal 2: Algonquin Heights/Colchester Farm Market Program: To develop a collaborative, multi-agency program that promotes summer education and employment opportunities for income eligible teens at a local inclusive farm while at the same time creating a subsidized farmer's market for low income residents in Plymouth's public housing complex. The project was conducted in partnership with Terra Cura, Inc., Algonquin Heights Housing Complex, New England Villages/Colchester Farm, and the Plymouth Area Department of	▪ Engaged five income-eligible teens to participate in summer educational and employment opportunities at Colchester farm and provided 40 low income households from Algonquin Heights Housing complex with $20 worth of fresh produce

Developmental Services.	
Goal 3: Amazing Race: To launch an annual fundraiser that promotes healthy activities, teamwork, education and local culture, while raising funds to support school garden initiative and the Peer Helper Mentorship program.	▪ Thirty-four (34) teams of four participated in the Amazing Race fundraiser, engaging physical, educational and mental challenges in locations throughout Plymouth. They raised over $27,000 through fees, donors, sponsors and an online auction. Net funds will support the hire of part time multi-school garden coordinators to enhance garden programs across all subjects and the launch of an after school Peer Helper pilot for grades 6 and 7 at Plymouth South Middle School
Goal 4: April Vacation Week Enrichment Activities: To create positive enrichment activities for 6th, 7th, and 8th graders in Plymouth by implementing a full roster of physical, creative, educational and self-awareness activities. The program took place at Zion Lutheran Church and Loring Library, Monday-Friday from 10am to 4pm, during April Vacation week. 25 volunteers helped to organize and manage activities throughout the week, including music, art, craft, fitness, mindfulness and cooking activities. Youth also explored career choices and received education related to risky behaviors and positive coping skills. Working parents/guardians benefit from active free programming rather than having children engage in alone at home or with paid providers.	• 190 6th, 7th, and 8th graders participated in the program, up from 145 in FY 2017
Goal 5: Permaculture School Garden Clubs: To promote after school enrichment activities and promote engagement in the school community by providing opportunities for students to experience nature and learn about growing, harvesting and consuming food. Activities also prevented students from engaging in risky behaviors after school. Gardens are located in every Plymouth Public School	• 150 students attended the Permaculture School Garden Club after school program in eight elementary schools

and the Plymouth Early Childhood Center.	
Goal 6: Peer Helper Program: To develop a mentorship program that promotes positive inter-generational interactions, respect and tolerance between middle school and elementary school children. Middle school children were linked to kindergarteners through second graders and assisted them with reading and math skills via an after-school program. Older students developed leadership skills and became role models for younger students. Younger students benefited from tutoring.	• 121 middle school students participated in mentoring activities with elementary school children
Goal 7: Healthy Markets. To continue to support four healthy markets in Plymouth by routinely checking their inventory and labeling for healthy options	• Four (4) healthy markets were maintained in Plymouth. Healthy Options were updated monthly. New healthy recipe cards were printed and placed on the counters for the public to take when deciding on which products to purchase

Access Program	
Program Description	The AIDS Comprehensive, Care, Education, and Support Services Program (ACCESS Program) provides free and anonymous HIV testing, medical care, prevention education, and support services to people living with HIV/AIDS in Plymouth and surrounding towns. Patients may receive primary care services, including physical examinations; treatment services and planning; laboratory testing; immunizations and screening; antiviral medications; referrals to specialty care and clinical trials; and medical case management. The federal Ryan White CARE Act (Title III) grant for Early Intervention Services provides funding for these services. The CARE Act is funded through the AIDS Bureau of the U.S. Health Resources and Services Administration (HRSA).
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors
Statewide Priority	• Chronic Disease Management in Disadvantaged Populations • Promoting Wellness of Vulnerable Populations
Program Type	Direct Service
Target Population	**Regions Served:** Counties – Plymouth, Barnstable Cities/Towns – Abington, Bourne, Braintree, Bridgewater, Buzzards Bay, Carver, Dartmouth, Duxbury, Halifax, Holliston, Hyannis, Kingston, Lakeville, Marion, Marshfield, Mashpee, Middleboro, New Bedford, Pembroke, Plymouth, Plympton, Rockland, Sandwich, Salem, Scituate, Truro **Target Populations:** The poor, elderly, LGBT, men who have sex with men (MSM), intravenous drug users, heterosexuals, youth, HIV+ not in care, low-income, newly infected with HIV **Health Indicator:** Other (HIV/AIDS) **Sex:** All **Age Group:** Adult **Ethnic Group:** All **Language:** English
Partners	Plymouth Resource Center BID-Plymouth Behavioral Health Team BPHC Dental Health Program Clean State Harbor Health High Point Outpatient Treatment Services Plymouth Family Planning

	Father Bill's and Mainspring The Bridge Habilitation Assistance
Contact Information	Marcia Richards mrichards@bidplymouth.org 508-732-8983 Ruth Cooper rcooper@bidplymouth.org 508-732-8981

Goal Description	**Goal Status**
Goal 1: To enroll at least five clients into care during the grant year.	• Enrolled 12 new clients providing them with free and anonymous HIV testing, medical care, prevention education, and support services to people living with HIV/AIDS in Plymouth and surrounding towns
Goal 2: Increase number of people tested for HIV	• Tested 30 people in 2018 and of the 30, not one had HIV
Goal 3: Maintain viral suppression in 95% of our client	• Maintained viral suppression in 95% of our clients

Cancer Patient Support Program	
Program Description	A cancer diagnosis often creates financial and emotional stress for patients and families. The Cancer Patient Support Program identifies cancer patients with extreme emotional and financial hardship and matches them with counseling and financial support when possible. This program is free to cancer patients whenever sources of support are available. BID-Plymouth provides support for patients and families through a social worker, resource nurse, and nurse navigator. This team provides counseling, support, and works to find resources to help alleviate out-of-pocket expenses typically not covered by insurance. The team may also help to find funding sources to cover the cost of household expenses (e.g., groceries, car payments, heating, and electric). Finally, this program finds resources to promote cancer screenings and education about wellness and prevention to help keep the community healthier and decrease risk factors that are associated with a cancer diagnosis.
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors
Statewide Priority	Chronic Disease Management in Disadvantaged Populations
Program Type	Direct Service
Target Population	**Regions Served:** Counties – Plymouth, Barnstable, Norfolk, Dukes, Bristol Cities/Towns – 50 unspecified towns **Target Populations:** Other (People with or at risk for cancer) **Health Indicator:** Other (Cancer) **Sex:** All **Age Group:** All **Ethnic Group:** All **Language:** English
Partners	Joe Andruzzi Foundation Elli Fund Cabbies Keville Foundation Score for a Cure Rally for a Cause Duxbury Gridiron Club

Contact Information	Lesley Cunningham, BSN, MHM, RN, OCN Senior Director of Cancer Services lcunningham@bidplymouth.org 508-830-3293

Goal Description	Goal Status
Goal 1: Continue to use a screening tool to evaluate need for psychosocial and financial support, and help families fill out forms for grants from our financial support partners	• Screened 450 patients/families; 250 of those screened were provided funds through our partners
Goal 2: Provide annual free skin cancer screenings and sun exposure awareness to 100 people	• Screened 100 people. 23 out of the 100 were referred to their primary care physician and of the 23, 15 were referred for a biopsy
Goal 3: Offer a total of 30 free screenings to women every other month, including Pap smears and mammograms	• Screened 48 people
Goal 4: Continue to provide weekly support groups to patients, with 10 attendees each week	• Provided support groups for over 20 attendees each week through various support groups
Goal 5: Evaluate the factors of distress in our patient population and review services available to meet the needs of this group	• Evaluated 450 patients and provided them a list of services available to help meet their needs.
Goal 6: Host 4th biannual Women's Health Symposium to educate and inform women on the latest in breast health. Provide a dinner. Event will be free and open to the public.	• Hosted the biannual Women's Health Symposium with 400 women in attendance

Pediatric Palliative Care	
Program Description	The Fragile Footprints Pediatric Palliative Care Program is part of the Massachusetts Pediatric Care Network, administered by the Massachusetts Department of Public Health, Division for Perinatal, Early Childhood, and Special Health Needs. Through this program, BID-Plymouth provides medical case management and support services for children with potentially life-limiting illnesses and their families. An interdisciplinary team of nurses, social workers, child life specialists, spiritual care, complementary therapy, expressive arts practitioners, and trained volunteers collaborate to design care plans that coordinate and augment existing services being received. Through this collaborative approach, Fragile Footprints works to address the issues commonly experienced by families of medically fragile children, including stress, anxiety, isolation, financial hardship, relationship issues, and interruption of daily routines.
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors
Statewide Priority	• Chronic Disease Management in Disadvantaged Populations
Program Type	Direct service
Target Population	***Regions Served*:** Counties – Plymouth, Bristol, Barnstable, Dukes Cities/Towns – 48 unspecified towns ***Target Populations:*** Medically underserved ***Health Indicator:*** Child care, Bereavement, Hospice ***Sex:*** All ***Age Group:*** Prenatal to 19 years old ***Ethnic Group:*** All ***Language:*** English
Partners	Massachusetts Department of Public Health Pediatric Palliative Care Network
Contact Information	Deborah Dolaway, LICSW Administrator, Cranberry Hospice & Palliative Care ddolaway@bidplymouth.org 508-746-0215
Goal Description	**Goal Status**

Goal 1: Increase outreach to 75 families and reduce waiting list from 30 to 20 in FY18	• Increased outreach to serve 77 families and reduced waiting list from 30 to 14
Goal 2: Expand scope of services to include music therapy and aroma touch for very young and significantly impaired populations and their caregivers	• Expanded scope of services to include an expressive therapist who provides music and art therapy and a certified aroma therapist (RN) to provide comfort and relaxation services (in addition to contracts with South Shore Conservatory and Sound Journey)
Goal 3: Expand community collaborations to make family and group programs (e.g., Red Sox outings, bowling, summer program, Mother's Day event, holiday party, trips to zoo and farm) more accessible throughout the service area	• Secured private donations to make family and group programs more accessible. Donations were a result of collaborations with the St. Mary's Church of Scituate, Duxbury Senior Center, The Village of Duxbury, Hope Floats Healing and Wellness Center, and the Yawkey Foundation

Smoking Cessation	
Program Description	From offering education on the dangers of tobacco use, to its smoke free campus, BID-Plymouth has long been a leader in tobacco prevention. Since 2013, the Hospital has taken prevention to a new level by developing a formalized system-wide approach to connecting with tobacco users who want to quit, and making it easier for them to reach their goals. This system establishes consistent methods to screen for smoking status or chronic obstructive pulmonary disease (COPD), a leading cause of hospitalizations in the region. Throughout FY18, BID-Plymouth and community partners worked with patients in the community to reduce smoking. Providers have encouraged the use of pharmacologic and non-pharmacologic options to assist with smoking cessation. Anecdotal reports suggest the trend of prescribing cessation aids appears to have increased. The clinical Pathways Committee is working with industry partners to collect year-over-year data to support this process. BID-Plymouth expanded its efforts to inform physicians about the Quitter's Tobacco Treatment program, making the enrollment process easier for patients. The successful Quitters Program is facilitated by a certified Tobacco Treatment Specialist (TTS). The 6-week course introduces interactive techniques, relaxation, visualization, and education to help participants learn why they smoke, what happens when they quit, how to handle cravings and withdrawal, and how to avoid relapse. Sessions are available in one-to-one or group settings. Research shows this multifaceted approach to be highly effective in helping users kick the habit. The program represents the hospital's commitment to better healthcare for everyone – standardizing an approach to address key health concerns and ensuring patients across Plymouth County receive reliable, effective treatment. This program provides one example of BID-Plymouth's commitment to finding new ways to manage resources and improve care communitywide, while controlling healthcare costs.
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors
Statewide Priority	• Chronic Disease Management
Program Type	• Community Education • Direct Service

Target Population	**Regions Served:** Counties – Plymouth, Barnstable Cities/Towns – Bourne, Carver, Duxbury, Halifax, Kingston, Lakeville, Pembroke, Plymouth, Plympton, Marshfield, Middleboro, Sandwich, Wareham **Target Populations:** Adults, Low income, Other (People who smoke) **Health Indicator:** (other) cancer **Sex:** All **Age Group:** Adults **Ethnic Group:** All **Language:** English
Partners	Affiliated Physician Group (2018 and 2019) Plymouth Bay Medical Associates (2018 and 2019) PMG Associates, Atrius Health Group (2019)
Contact Information	James Berghelli jberghelli@bidplymouth.org 617-667-3458

Goal Description	Goal Status
Goal 1 (FY18): Encourage and increase the number of patients to enroll in Quitter's Smoking Cessation Program by 2%	▪ Three percent (9 out of 352) of patients were referred to the Tobacco Treatment Specialist and enrolled in Quit Sessions. This number is a decrease from 2017, where 5% (16 of 328) patients enrolled
Goal 2 (FY18): Respiratory therapists will assess 95% of smokers with intent to quit to increase the number of patients who would like to be contacted by the TTS to join the Quitter's Program	▪ 92% of inpatient smokers were assessed by a Respiratory Therapist; 20% of patients assessed by the Respiratory Therapist requested contact from a TTS
Goal 3 (FY18): Provide Quitter's Program brochures to primary care offices affiliated with BID-Plymouth and inpatients assessed by Respiratory Therapists. Providers should explain the benefit of the Quitter's Program and encourage cessation	▪ 1500 brochures were provided to primary care affiliates and 1800 brochures were distributed to inpatients

Access to Care – Uninsured and Underinsured	
Program Description	BID-Plymouth worked with the State to communicate new health coverage plans for the uninsured and enroll those who qualify. Financial counselors screened and enrolled patients for MassHealth, Health Safety Net, Medical Hardship and Commonwealth Care.
Hospital Priority	• Physical Disease Management and Prevention • Health Risk Factors • Behavioral Health
Statewide Priority	• Chronic Disease Management
Program Type	Direct service
Target Population	**Regions Served:** Counties – Plymouth, Bristol, Barnstable, Dukes Cities/Towns – 48 unspecified towns **Target Populations:** Medically underserved **Health Indicator:** Child care, Bereavement, Hospice **Sex:** All **Age Group:** Prenatal to 19 years old **Ethnic Group:** All **Language:** English
Partners	Massachusetts Department of Public Health MassHealth Executive Office of Health and Human Services
Contact Information	Richard Ray Patient Financial Services 508-830-2040 rray@bidplymouth.org

Goal Description	Goal Status
Goal 1: Provide free financial assistance counseling to uninsured and underinsured residents and enroll them in entitlement programs.	• Staff enrolled 9,152 patients into entitlement programs

BID-Plymouth HouseCalls	
Program Description	BID-Plymouth launched HouseCalls in 2005 as an educational speaker series that brings important health and prevention information to the community. BID-Plymouth physicians and other health care providers provide regular health information seminars at various locations throughout the 12-town BID-Plymouth service area. All HouseCalls events are one hour and allow attendees to ask questions. The Community Benefits staff collects data through an evaluation that attendees complete at the end of each lecture. The evaluation includes questions probing on what they thought about the lecture, what other topics they are interested in, and how they heard about the lecture. All HouseCalls events are FREE and open to the public. Pre-registration is required. Register at 508-210-5911.
Hospital Priority	• Physical Disease Management and Prevention
Statewide Priority	• Address Unmet Needs of the Underserved, Promoting Wellness of Vulnerable Populations
Program Type	• Community Education
Target Population	**Regions Served:** County-Plymouth **Towns Served:** All towns in between Pembroke to the Cape **Target Populations: Elderly, Chronically Ill** **Health Indicator:** Other: Arthritis, Other: Back Pain, Other: Migraine treatment; Other: Nutrition, Other: Sleep Apnea, Other: Knee Pain, Other: Hernia and Sports Injury Prevention **Sex:** All **Age Group:** Adult **Ethnic Group:** All **Language:** English
Partners	Not Specified
Contact Information	Deb Schopperle dschopperle@bidplymouth.org 508-830-2499 BID-Plymouth, Marketing
Goal Description	**Goal Status**

Goal 1: To educate community residents on health topics relevant to them in a location close to their home at no cost. These events help to ensure that community residents have the most up-to-date health information available on issues critical to their health and well-being, including information on health promotion and wellness, chronic disease management, mental health and substance use.	▪ More than 190 area residents participated in BID-Plymouth's HouseCalls ▪ FY 2018 lectures included sessions on total knee replacement, back pain management, causes and solutions for back pain, hernias and when surgery is necessary, migraine treatment options, and sleep apnea

Behavioral Health Integration	
Program Description	In 2013, the Hospital conducted a behavioral health assessment to identify behavioral health needs in the community—assessing current services, identifying service gaps, and identifying potential service opportunities for the Hospital. In 2016, as part of the FY 2016 CHNA, further quantitative and qualitative information was compiled confirming community need, provider shortages, and other challenges. With this information, Hospital administrators, in partnership with local mental health and substance use providers, developed the Family Behavioral Health Integrated Care Initiative. **<u>The Family Behavioral Health Integrated Care Initiative</u>** This initiative is a co-located behavioral health model that embeds licensed clinical social workers in primary care and specialty care settings. They work with the practices primary care providers, an advanced practice Nurse practitioner with mental health training, and a psychiatrist to integrate behavioral health screening, assessment, and treatment services into the practices' operations. This team has also worked with other community-based organizations to address barriers to access and expand the availability of behavioral health services. BID-Plymouth currently has three social workers and one nurse practitioner, all of whom work under a psychiatrist. BID-Plymouth continued this work in FY 2018 and embedded behavioral health clinicians in a growing number of primary care and specialty care practices. In response to the opioid crisis, BID-Plymouth has added substance abuse clinicians and a full-time nurse practitioner to its overall initiative and collaborated with Gosnold for Recovery Specialists to provide integrated services in the emergency department. These clinicians collaborate with community treatment providers to address the high number of substance abuse related cases and provide the right level of care in the emergency setting. With behavioral health services available in the emergency department, patients may begin treatment in this setting rather than delaying treatment until psychiatric beds are available. This immediate care often decreases the level of intervention required. With the Hospital's fully integrated system, patients can address medical and behavioral health needs in one location. Medical staff in primary care, specialty care, and emergency department settings have on-site access to behavioral health support so that they can provide comprehensive healthcare in a convenient, efficient and cost-effective manner. In addition, the Hospitals behavioral health clinicians collaborate with local

	high schools, law enforcement, and other community-based organizations to coordinate care and ensure that the community is able to access the needed breadth of educational, outreach, and treatment services to address the ever-increasing substance use issue in BID-Plymouth CBSA. **PreVenture Addiction Prevention Program** In an effort to address the addiction crisis, BID-Plymouth partnered with Plymouth middle schools to fund the PreVenture program. PreVenture is a research-based addiction prevention program targeting personality traits that correlate with increased risk of developing substance use issues. Brief coping skill interventions that target personality risk factors have been tested in randomized controlled trials and have demonstrated benefits that last up to three years. Students that screened for high-risk personality profiles were identified to participate in two 90-minute group workshops. Workshops focused on developing specialized coping skills relevant to: Sensation Seeking; Impulsivity; Anxiety Sensitivity; Negative Thinking. The intervention included psycho-educational approaches, motivational interviewing, and cognitive behavioral components. Students learn how their personality style leads to certain emotional and behavioral reactions. Students received manuals that illustrate scenarios designed by similar teens to promote relevance. The program has proven both feasible and effective when delivered by trained school staff. **Plymouth County Outreach (PCO)** PCO is a county-wide initiative reaching 27 communities. PCO is a collaboration of Public Safety Agencies, healthcare providers, and treatment organizations to provide community follow-up after an opioid overdose. Providers created this program to respond to the ever-growing number of opiate overdoses by conducting follow-up visits within 12-24 hours after an overdose with an outreach team (a plain clothed police officer and a behavioral health professional) to discuss treatment options with the individual and help them get into treatment as soon as possible. Note: this program is not limited to those addicted to opiates, but rather everyone impacted by addiction. BID-Plymouth's Director of Social Work provides triage for this program, routing the appropriate care responder to each call. PCO holds drop-in centers twice a month for anyone needing help and/or information about drug and alcohol addiction. Representatives from local treatment centers as well as counselors, including BID-Plymouth's Director of Social Work, are on site at the drop-in centers.
Hospital Priority	• Behavioral Health
Statewide Priority	• Mental health • Substance use

Program Type	• Community Education • Direct Service
Target Population	**Regions Served:** Plymouth, Barnstable **Towns Served:** Plymouth, Kingston, Carver, Pembroke, Duxbury, Marshfield, Halifax, Hanson, Sandwich, Wareham, Bourne **Target Populations:** Medically Underserved, Victims of Domestic Violence, Uninsured, Elderly, The Poor, People of Color, LGBT, people with substance abuse issues, people who need behavioral health services **Health Indicator:** provider shortages, screening rates, referral rates, disease prevalence, level of service integration **Sex:** All **Age Group:** All **Ethnic Group:** All **Language:** English
Partners	Gosnold (www.gosnold.org) PCO (otf.plymouthda.com/project-outreach) PCO HOPE (www.ebhopes.net) Plymouth Public Schools (www.plymouth.k12.ma.us/)
Contact Information	Sarah Cloud 774-454-1201 scloud@bidplymouth.org

Goal Description	**Goal Status**
Goal 1: Provide access and treatment of depression in outpatient PCP and specialty practices.	▪ Through a Patient Health Questionnaire (PHQ-9) the scores decreased by 42% from intake to discharge
Goal 2: Continue to provide follow up through Plymouth County Outreach initiative to individuals who experienced an overdose and encourage them to get help.	▪ PCO expanded county-wide to 27 towns and cities. Five hospitals in the area joined the initiative. Out of the 736 attempted follow-up visits, 14% (105) ended with the individual accepting treatment from the outreach team. Another 16% (115) declined treatment options, 8% (59) were already seeking treatment, 8% (61) outcomes were recorded as "Other", 47% (342) of the visits did not result in contact with anyone, and 7% (54) of the records did not provide an outcome.

Emergency Medical Services (EMS) Medical Control and Defibrillation	
Program Description	Since 2003, BID-Plymouth has supported police departments and other local town offices throughout BID-Plymouth's service area with medical direction/education for their Semi-Automatic or Automatic Externals Defibrillators (AEDs). The AEDs are purchased and maintained by the towns themselves. A town-level Medical Director who is designated by BID-Plymouth oversees operation of the AEDs. These Medical Directors oversee town-level activities related to the AEDs and ensure the clinical competency of the personnel employed by the town who use the AEDs. The education activities include training and authorization to use the device, remedial education to those EMS personnel found to be deficient in clinical practice, and notification to department within 48 hours of any instance in which authorization is suspended, revoked or restricted in any manner. The Hospital also reviews and reports on the AEDs as well as the use of Epinephrine Auto-Injectors and use of the Intranasal Naloxone for quality assurance and continuous improvement purposes. The Hospital also approves training programs for the use of Epinephrine Auto-Injectors and Intranasal Naloxone, maintains a system-wide database of cardiac arrest trip records filed by First Responders, and submits summary reports to Massachusetts DPH upon request. This initiative also provides a broad array of other services and supports to enhance the capacity and performance of the regions emergency medical service (EMS) providers. ▪ First, a follow-up program has been developed that provides EMS staff with almost real time feedback from the Hospital regarding their patient's diagnosis, clinical course, and outcome following admission. These cases are also reviewed in a peer review format each month. ▪ Second, the Hospital in partnership with EMS providers have instituted a training request program that allows EMS providers to request continuing education training with specialty services from the hospital (e.g., Anesthesia, pediatrics, OB, neuro and cardiology). ▪ Third, BID-Plymouth provides real time follow up on ST-Elevation Myocardial Infarction (STEMI) cases and all cardiac related cases that originate in the pre-hospital setting. ▪ Fourth, the Hospital has developed a program whereby the Hospital will host paramedic students in the Emergency Department for their clinical rotations. ▪ Fifth, the Hospital hosts educational opportunities with outside agencies (e.g., Boston Medflight) to explore critical care transport and pre-hospital patient care.

	In FY 2018, the program served EMS providers throughout the region and the following town offices: Carver Police, Carver Fire, Carver School System, Halifax Police, Kingston Police, Marshfield Fire, Plympton Police, Plympton Public Schools, Plymouth Fire, Plymouth Public Schools, Town of Pembroke, Town of Plymouth - Administration Offices, Town of Plymouth - Harbormaster, & Rising Tide Charter School.
Hospital Priority///	• Physical Disease Management and Prevention • Health Risk Factors • Behavioral Health
Statewide Priority	• Chronic disease • Substance use
Program Type	• Community education
Target Population	**Regions Served:** Plymouth, Barnstable **Towns Served:** Carver, Duxbury, Halifax, Kingston, Lakeville, Marshfield, Middleboro, Plymouth, Pembroke, Plympton, Sandwich **Target Populations:** Medically Underserved, Victims of Domestic Violence, Uninsured, Elderly, Victims to pre-hospital environmental trauma, industrial and accidental. Patients with substance abuse, obstetric, respiratory, cardiovascular, gastrointestinal, and psychiatric conditions/diseases. Acutely ill cerebral vascular accident and coronary artery disease, (STEMI) patients. **Health Indicator: (other) Education** **Sex:** All **Age Group:** All **Ethnic Group:** All **Language:** English
Partners	BID-Plymouth Emergency Department All affiliated public safety agencies Plymouth Operating Room/Anesthesia Boston Medflight BIDMC Emergency Department BID Plymouth Marketing/ Senior Leadership, Labor and delivery/The Birthplace
Contact Information	Kevin Kilduff 508-830-2812 kkilduff@bidplymouth.org

Goal Description	**Goal Status**
Goal 1: Continue to provide medical control and oversight to affiliated EMS agencies	▪ Continued the ongoing quality assurance and quality initiative program and continuing education with nine towns

Section V. Expenditures

Community Benefits Programs

Expenditures	Amount
Direct Expenses	$ 754,246
Associated Expenses	$ 90,510
Determination of Need Expenditures	-
Employee Volunteerism	$ 167,647
Other Leveraged Resources	$ 1,836,674

Net Charity Care

Expenditures	Amount
HSN Assessment	$ 1,447,659
HSN Denied Claims	-
Free/Discount Care	$ 633,953
Total Net Charity Care	$ 2,081,612

Corporate Sponsorships	$ 33,200
Total Expenditures	$ 4,963,889
Total Revenue for FY 2018	$ 269,010,158
Total Patient Care-related Expenses for FY 2018	$ 243,870,730
Approved Program Budget for FY 2019 (*Excluding expenditures that cannot be projected at the time of the report.)	$ 2,004,568

Optional Financial Information

Bad Debt	$5,326.311
IRS 990 Schedule H – FY 2017	$31,928,494

Section VI: Summary Community Health Improvement Plan (CHIP)

The Community Health Improvement Plan (CHIP) outlines BID-Plymouth's goals for addressing the needs identified during the needs assessment process. The following is a summary of the goals for each of these priority areas.

Priority Area 1: Health Risk Factors

Goal 1: Increase awareness and educate public on health risk factors
Goal 2: Encourage physical activity
Goal 3: Promote healthy food choices
Goal 4: Support reduced tobacco use among adults
Goal 5: Assist in reducing number of individuals who are uninsured
Goal 6: Reduce barriers to accessing primary care

Priority Area 2: Physical Health and Chronic Disease Management and Prevention

Goal 1: Improve chronic disease management
Goal 2: Improve care transitions for those with chronic health conditions
Goal 3: Provide education to community on cancer prevention
Goal 4: Increase incidence of cancer detection
Goal 5: Support cancer patients and caregivers
Goal 6: Support older adults and caregivers
Goal 7: Increase access to palliative care

Priority Area 3: Behavioral Health

Goal 1: Promote reduction of youth substance use and support improvements in mental and emotional well-being
Goal 2: Promote behavioral health/primary care integration
Goal 3: Provide access to appropriate treatment for patients with substance use disorders.
Goal 4: Identify those with or at risk of behavioral health condition(s) and provide enhanced care management
Goal 5: Increase community awareness of community health needs
Goal 6: Strengthen community partnerships

Section VII: Contact Information

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