

Community Health Needs Assessment

Implementation Plan

2021 - 2024

February 2022



Monadnock
COMMUNITY HOSPITAL

YOUR LIFE. YOUR CAREER. YOUR HOSPITAL.

Background and Compliance

The Community Health Needs Assessment (CHNA) and the Implementation Plan (IP) are required by federal agencies.

- **The Affordable Care Act of 2010 requires all U.S. not-for-profit hospitals to complete a CHNA and Implementation Plan every three years.**
- **In 2021, Monadnock Community Hospital (MCH) worked with community service leaders, underserved populations, and others to complete its CHNA research and identify community health-related needs or service gaps.**
- **MCH prioritized the list of needs using qualitative and quantitative approaches.**

Requirements

The CHNA and the IP are separate but linked requirements.

CHNA requirements include – but are not limited to – the following:

- Define the community served by MCH.
- Describe the quantitative and qualitative methodology used to identify and prioritize community needs.
- Include a comprehensive list of community health or health-related resources.
- List the activities conducted since the prior CHNA to address the prioritized needs.
- Prioritize the list of community health needs to be included in the Implementation Plan.

IP:

- Identify which community needs the hospital will address and “how?”
- Identify which community needs the hospital will not address and “why not?”

IP Approach

Implementation Plan activities (i.e., actions taken to identify which community health needs will be addressed and how) included the following:

- **Conducting in-depth discussions with the MCH CHNA Leadership Team, who are all community leaders identified in the CHNA, to review the list of 28 community needs and identify which, if any, are outside of MCH's purview.**
- **Developing a matrix that identified existing programs or activities that positively impact one or more of the identified and prioritized community needs.**
- **Working with the CHNA Leadership Team to define for each of the needs the "degree of control that MCH has to enact change" and a "potential timeline on which positive change could reasonably be made to address the need."**
- **Creating this summary document that addresses the project requirements including clear recognition of activities within the hospital's purview to address and (if so), how the hospital can best address the needs.**

The full list of 28 community needs considered during prioritization from the CHNA is included on the next slide.

Identified Community Needs

The “Rank” refers to the results of the CHNA prioritization of community needs.

CHNA Rank		CHNA Rank	
1	Housing For All Incomes/Ages	15	Transportation Services
2	Behavioral Health Crisis Care & Emergency Services	16	Primary Care Services (Such As A Family Doctor Or Other Provider Of Routine Care)
3	Affordable Healthcare Services For People Or Families With Low Income	17	Job Readiness
4	Behavioral Health Services For Adolescents And Children	18	Programs For Diabetes And/Or Obesity
5	Behavioral Health Services For Depression Or Anxiety	19	Transportation For People Needing To Go To Doctor’s Appointments Or The Hospital
6	Affordable Quality Childcare	20	Specialty Care Services: Dermatology
7	Post-addictions Treatment Support Programs	21	Secure Sources For Affordable, Nutritious Food
8	Early Intervention / Community Health Education For Substance Use Disorders	22	Specialty Care Services (Cancer Care)
9	Medical Assisted Treatment (MAT) For Opioid Addiction	23	Heart Health Or Cardiovascular Health
10	Caring For Aging Parents And Resources To Help	24	Specialty Care Services: Cardiology
11	Dental / Specialty Services	25	Parenting Classes
12	Prescription Assistance	26	Long-term Care Or Dementia Care
13	Homelessness	27	Emergency Care And Trauma Services
14	Domestic Violence Resources	28	HIV AIDS Testing

The Top 15 of 28 Needs were Selected for More In-depth Focus in the Implementation Plan Process

MCH currently addresses all, or most, of the 28 community needs identified in the CHNA in some way. However, the highest priority 15 were selected for more in-depth focus and analysis in the IP process.

- **Evaluation Process:** For each of the top 15 needs identified in the CHNA, MCH examined its current programs, outreach efforts and collaborations, as well as consideration for new initiatives such that each of the needs was assigned to one of the following groups:
 - Needs that are not part of MCH's purview (e.g., better addressed by other organizations). In this case, MCH will support and advocate for addressing the need but are not able to address the need directly.
 - Needs that MCH will address through collaboration with community partners.
 - Needs for which MCH will enhance existing programs or establish new ones. The hospital has current activities that may be able to be modified or expanded to address the community health need, or newly created activities or initiatives may be required to do so.

List of Highest Priority Community Needs

1. **Housing For Income and Ages**
2. **Behavioral Health Crisis Care & Emergency Services**
3. **Affordable Healthcare Services For Low-income Individuals and Families**
4. **Behavioral Health Services For Adolescents And Children**
5. **Behavioral Health Services For Depression Or Anxiety**
6. **Affordable Quality Childcare**
7. **Post Addiction Treatment Support Programs**
8. **Early Intervention / Community Health Education For Substance Use Disorders**
9. **Medical Assisted Treatment (MAT) For Opioid Use Disorder**
10. **Care For Aging Parents and Additional Resources**
11. **Dental / Specialty Services**
12. **Prescription Assistance**
13. **Homelessness**
14. **Resources For Domestic Violence**
15. **Transportation Services**

Additional Needs That Will NOT be Addressed (and “Why not?”)

MCH’s detailed Implementation Plan activities focused on the 15 highest priority community needs of the total of 28 needs identified in the CHNA.

- **Of the 13 NOT selected for in-depth focus, MCH currently supports, and will continue to address, every one of them through existing collaborations, community support, and/or direct care.**
- **The 13 needs were not included for additional focus because they represent lower service gaps within the community, and MCH is already providing some level of support to address them.**
- **A list of the 13 needs not selected for additional focus is contained in Appendix D.**

Categorization of Community Needs to be Addressed through Collaboration or Additional Focus

CHNA Leadership Team reviewed the identified needs and organized the highest-priority needs, into six categories.

1. Access to Affordable Housing.
2. Case Management and Care Coordination.
3. Behavioral Health and Substance Use.
4. Access to Services.
5. Specialty Care Populations.
6. Preventive Care.

Note: Throughout the Community Health Needs Assessment and Implementation Plan, the impact of the COVID-19 Pandemic has been and continues to be a critical factor to both identifying the needs and the ability to address the needs.



IP Activities Categories

To gain further insight into the community needs, the CHNA Leadership Team organized the 15 highest-priority needs into six categories.

Access to Affordable Housing

Housing For All Incomes & Ages
Homelessness

Case Management / Care Coordination

Domestic Violence Resources

Mental Health & Substance Use Disorder

Behavioral Health Crisis Care & Emergency Services
Behavioral Health Services For Adolescents And Children
Behavioral Health Services For Depression Or Anxiety
Post-addictions Treatment Support Programs
Medical Assisted Treatment For Opioid Use Disorder

Access to Services

Affordable Healthcare Services For People Or Families With Low-income
Prescription Assistance
Transportation Services

Specialty Care / Populations

Affordable Quality Childcare
Care For Aging Parents And Additional Resources
Dental / Specialty Care

Preventive Care

Early Intervention / Community Health Education For Substance Use Disorders





Of the 15 Needs Identified for Additional Focus, Impact Varies

MCH's ability and approach to addressing the 15 highest priority CHNA needs vary.

- Five are outside of MCH's purview.
- Five will be addressed through community partnerships.
- Seven will be addressed through continuing or enhancing existing programs.

Each group is described below.





Within the Top 15 Needs, Five are Out of MCH's Purview

Within the list of the 15 highest priority needs, several are largely outside of the hospital's purview. However, as noted above, some MCH programs already support community efforts to address the needs. Additionally, MCH will advocate and support community activities, where appropriate, to address the need.

Category	Community Need
Specialty Care / Populations	Affordable Quality Childcare
Specialty Care / Populations	Dental / Specialty Services
Access To Affordable Housing	Homelessness
Access To Affordable Housing	Housing For All Incomes & Ages
Mental Health & Substance Use Disorder	Post-addictions Treatment Support Programs



For High-priority Needs Within MCH's Purview, an In-depth Focus was Conducted

The CHNA Leadership Team members reviewed each of the 10 remaining needs for which MCH has, or may establish, programs to address on two scales:

1. **Locus of Control**: The degree of local control (i.e., the amount of influence MCH may possess to affect needs).
2. **Timeline**: The expected amount of time it would take to impact the need.

Based on the analysis, the CHNA Leadership Team and MCH's Community Relations Team identified a highly concentrated list of program focus areas that does the following:

- Addresses the highest priority needs (e.g., from the CHNA)
- Are within MCH's ability to control (i.e., "Locus of Control")
- Are expected to provide a positive impact in the "within 1-year," "one to three years," and "more than three years" time frames (i.e., "Timeline")

Needs For Which MCH Will Address Through Community Partnerships

MCH will address these needs through collaboration with community partners.

- Early intervention / educating the community on substance use disorders and transportation services were identified as needs for which MCH could make an impact within one year.
- Providing resources for domestic violence prevention and victims was identified as a need MCH could impact within one to three years.

Category	Community Need
Case Management / Care Coordination	Domestic Violence Resources
Preventive Care	Early Intervention / Community Health Education For Substance Use Disorders
Access To Services	Transportation Services



Needs For Which MCH Will Continue to Address or Enhance Through Existing Programs Within One Year

MCH has current activities that may be modified or expanded to address the following community health needs within one year.

Needs Group	Community Health Need
Access To Services	Affordable Healthcare Services For People Or Families With Low Income
Access To Services	Prescription Assistance
Mental Health & Substance Use Disorder	Behavioral Health Crisis Care & Emergency Services
Mental Health & Substance Use Disorder	Behavioral Health Services For Adolescents And Children
Mental Health & Substance Use Disorder	Behavioral Health Services For Depression Or Anxiety
Mental Health & Substance Use Disorder	Medical Assisted Treatment For Opioid Use Disorder
Specialty Care / Populations	Care For Aging Parents And Additional Resources

Note: Caring for aging parents, as well Behavioral Health Services For Adolescents And Children / for depression and anxiety were identified as needs MCH could lead in addressing and addressing through community partnerships with organizations and key stakeholders.





Examples Of Existing Programs & Activities That Are Currently Addressing High Priority Needs

As mentioned previously, MCH has existing established programming that could be expanded to meet the health needs of the community. **For a comprehensive detailed matrix of the current activities, MCH already has in place to address the needs, see the appendices.**

Needs Category	Programs
<p>Affordable Healthcare Services For Low-income Individuals and Families</p>	<p>MCH offers Financial Assistance to all patients. Qualifications are based on their household income, some assets, and health insurance. We also refer to partner agencies to help with applying for insurance. MCH accepts both Medicare and Medicaid insurance. We also subsidize many programs and departments to allow access to healthcare for all.</p>
<p>Behavioral Health Services For Adolescents And Children Including Crisis Care & Emergency Services</p>	<p>Specifically the need is listed as "crisis care programs for mental health" and MCH is looking at the feasibility of creating a separate space to care for patients having a behavioral health crisis. The space would be adjacent to the Emergency Department. We also have an outpatient Behavioral Health department for our community to address mental health needs for our patients and are in the process of recruiting more providers.</p>
<p>Prescription Assistance</p>	<p>MCH's Medication Bridge Program has personnel to assist patients with applying to pharmaceutical companies that have patient assistance programs.</p>



IP Activity Summary

Monadnock Community Hospital actively supports community health by providing direct care services and through community collaboration.

With this Implementation Plan, MCH has done the following:

- **Reviewed the prioritized list of needs from the recent CHNA.**
- **Identified needs that the hospital will not address and provided rationale “why not?”**
- **Identified needs which the hospital WILL address and described pathways to address them in terms of the locus of control (e.g., community collaboration, development of new or existing programs, etc.) and timing (e.g., “Year 1” areas of focus).**

Appendix

Appendix A – Prioritized Needs, 2021 – 2024

**Appendix B – Existing Programs & Activities That
Are Currently Addressing High Priority Needs**

Appendix C – Needs Matrix

**Appendix D – Community Needs Not to be
Addressed**



Appendix A: Prioritized Needs, 2021-2024

		Locus of Control	Timeline
1	Affordable healthcare services for people or families with low income (revisit dental care concerns / include within healthcare definition)	2	2
2	Affordable quality childcare	3	1.5
3	Caring for aging parents and resources to help	1.5	1.5
4	Behavioral Health Services For Adolescents And Children	1.5	1
5	Behavioral Health Services For Depression Or Anxiety	1.5	1
6	Behavioral Health Crisis Care & Emergency Services	2	2
7	Domestic violence resources	2	1
8	Early Intervention / Community Health Education For Substance Use Disorders	2	1.5
9	Homelessness	3	1.5
10	Housing for all incomes and ages	3	3
11	Dental / Specialty Services	3	3
12	Medical Assisted Treatment (MAT) for opioid addiction	1	1
13	Post-addictions treatment support programs	3	2
14	Prescription assistance (more information needed)	1	1
15	Transportation Services	2	1.5

Timeline:

- 1 = “Impact within Year 1”
- 2 = “Impact in Year 2 or Year 3”
- 3 = “Impact would be long-term, 3+ years”

Locus of Control:

- 1 = Lead
- 2 = Collaboration or Partnership
- 3 = Support or Advocate





Appendix B: Existing Programs & Activities That Are Currently Addressing High Priority Needs

Needs Category	Current Program or Activity
Affordable Healthcare Services For Low-income Individuals and Families	<p>MCH offers Financial Assistance to all patients. Qualifications are based on their household income, some assets, and health insurance. We also refer to partner agencies to help with applying for insurance. MCH accepts both Medicare and Medicaid insurance. We also subsidize many programs and departments to allow access to healthcare for all.</p>
Behavioral Health Services For Adolescents And Children Including Crisis Care & Emergency Services	<p>Specifically the need is listed as "crisis care programs for mental health" and MCH is looking at the feasibility of creating a separate space to care for patients having a behavioral health crisis. The space would be adjacent to the Emergency Department. We also have an outpatient Behavioral Health department for our community to address mental health needs for our patients and are in the process of recruiting more providers.</p>
Prescription Assistance	<p>MCH's Medication Bridge Program has personnel to assist patients with applying to pharmaceutical companies that have patient assistance programs.</p>
Medical Assisted Treatment (MAT) For Opioid Use Disorder	<p>We are working on having a more established Medicated Assisted Treatment program in our outpatient Behavioral Health Program. MCH also is a leading member of a Behavioral Health Task Force called Be the Change that puts out a support group and resource guide to the community at least once a year with times and locations of recovery meetings such as AA, NA and OA.</p>
Resources For Domestic Violence	<p>MCH has a 24/7 crisis team in our Emergency Department, outpatient Behavioral Health department, and partnerships with local transitional housing and violence prevention organizations.</p>





Appendix B: Existing Programs & Activities That Are Currently Addressing High Priority Needs

Needs Category	Current Program or Activity
Transportation Services	MCH makes an annual donation to our community non-profit transportation agency and has a representative from the hospital sitting on the board of this organization. MCH also assists with rides for patients that were brought into the Emergency Department via ambulance and need help with a ride home.
Care For Aging Parents and Additional Resources	MCH employs an APRN who is dedicated to our aging populations within our three community assisted living/nursing home facilities. In April 2020, MCH deployed a Mobile Integrated Health initiative to serve our most fragile patients in the community within their homes. In February 2022, MCH hired a full-time community paramedic lead for this department.
Dental/Specialty Services	Due to the pandemic, we have not been able to We can assist parents of pediatric patients with enrolling in NH Medicaid. For adult patients who do not have dental insurance or are on Medicaid which offers very minimal dental benefits, we refer patients to the Greater Nashua Dental Connection. MCH will pay for the patient's first two visits; 1st visit being a dental exam and x-rays and 2nd visit is for a cleaning or comparable dental service.
Behavioral Health Services For Depression Or Anxiety	This identified need is specifically focused on funding for patients suffering from anxiety and depression, whether inpatient or outpatient. MCH offers subsidized services in our outpatient Behavioral Health Department, and also financial assistance, medication bridge, and referrals to community-based services for patients in need.
Early Intervention / Community Health Education For Substance Use Disorders	MCH has a great partnership with both the Doorway Keene and Reality Check in Jaffrey to refer patients to that are seeking substance use support services. We also have a community Behavioral Health Task Force called Be the Change to educate and provide resources to our community.





Appendix C: Needs Matrix

This Needs Matrix was completed by CHNA Leadership Team, and identifies specific programs and activities MCH can implement to address the needs.

Locus of Control:
 1 = Lead
 2 = Collaboration or Partnership
 3 = Support or Advocate

Needs	Be the Change - Behavioral Health Task Force	Monetary and in-kind donations to organizations	Provide Work opportunities for disabled individuals through our volunteer program	Management and executive level employees who sit on boards and committees	Offer 24/7 social services and psychiatric care	Work with local partners to offer Support groups and Recovery Coaches for SUD	Subsidize the outpatient behavioral health department roughly \$500k per year	Offer financial assistance to eligible patients who are 400% above poverty level as well as a Medication Bridge program	Training EMTs using our Sim Lab at no cost	Offer PALS and First Aid Training to community	Work with the public health network and the state of NH to administer COVID-19 vaccines and testing	Offer a wide range of healthcare services to our community with no patient being turned away due to cost.	Offer the community and MCH employees scholarships to further their education
Housing for all incomes/ages				1									
Behavioral Health Crisis Care & Emergency Services	3			1	2	3	1	1				1	
Affordable healthcare services for people or families with low income				1	1			1				1	
Behavioral Health Services For Adolescents And Children	3			1	1	3	1	1				1	
Behavioral Health Services For Depression Or Anxiety	3			1	1	3	1	1				1	
Affordable quality childcare				1									



Needs Matrix Continued

Locus of Control:
 1 = Lead
 2 = Collaboration or Partnership
 3 = Support or Advocate

Needs	Be the Change - Behavioral Health Task Force	Monetary and inkind donation to organizations	Provide Work opportunities for disabled individuals through our volunteer program	Management and executive level employees who sit on boards and committees	Offer 24/7 social services and psychiatric care	Work with local partners to offer Support groups and Recovery Coaches for SUD	Subsidize the outpatient behavioral health department roughly \$500k per year	Offer financial assistance to eligible patients who are 400% above poverty level as well as a Medication Bridge program	Training EMTs using our Sim Lab at no cost	Offer PALS and First Aid Training to community	Work with the public health network and the state of NH to administer COVID-19 vaccines and testing	Offer a wide range of healthcare services to our community with no patient being turned away due to cost.	Offer the community and MCH employees scholarships to further their education
Post-addictions treatment support programs	2	1		1	2	3							
Early Intervention / Community Health Education For Substance Use Disorders	3			1	1	3	1	1				1	
Medical Assisted Treatment (MAT) for opioid addiction	3			1	2			1				1	
Caring for aging parents and resources to help						3							
Long-term care or dementia care						3							
Prescription assistance	3	1						1				1	





Needs Matrix Continued

Locus of Control:
 1 = Lead
 2 = Collaboration or Partnership
 3 = Support or Advocate

Needs	Be the Change - Behavioral Health Task Force	Monetary and in-kind donation to organizations	Provide Work opportunities for disabled individuals through our volunteer program	Management and executive level employees who sit on boards and committees	Offer 24/7 social services and psychiatric care	Work with local partners to offer Support groups and Recovery Coaches for SUD	Subsidize the outpatient behavioral health department roughly \$500k per year	Offer financial assistance to eligible patients who are 400% above poverty level as well as a Medication Bridge program	Training EMTs using our Sim Lab at no cost	Offer PALS and First Aid Training to community	Work with the public health network and the state of NH to administer COVID-19 vaccines and testing	Offer a wide range of healthcare services to our community with no patient being turned away due to cost.	Offer the community and MCH employees scholarships to further their education
Transportation Services		1		1									
Primary care services (such as a family doctor or other provider of routine care)								1			1	1	
Job readiness			2						1	1			1
Programs for diabetes and/or obesity						2		1					
Secure sources for affordable, nutritious food		1											
Specialty care services: Cancer care								3				1	





Needs Matrix Continued

Locus of Control:
 1 = Lead
 2 = Collaboration or Partnership
 3 = Support or Advocate

Needs	Be the Change - Behavioral Health Task Force	Monetary and inkind donation to organizations	Provide Work opportunities for disabled individuals through our volunteer program	Management and executive level employees who sit on boards and committees	Offer 24/7 social services and psychiatric care	Work with local partners to offer Support groups and Recovery Coaches for SUD	Subsidize the outpatient behavioral health department roughly \$500k per year	Offer financial assistance to eligible patients who are 400% above poverty level as well as a Medication Bridge program	Training EMTs using our Sim Lab at no cost	Offer PALS and First Aid Training to community	Work with the public health network and the state of NH to administer COVID-19 vaccines and testing	Offer a wide range of healthcare services to our community with no patient being turned away due to cost.	Offer the community and MCH employees scholarships to further their education
Heart health or cardiovascular health								3				1	
Specialty care services: Cardiology								3				1	
Parenting classes						3				1			
Dental / Specialty Services				1				3					
Emergency care and trauma services					1			1		1		1	
HIV / AIDS testing								1				1	





Appendix D: Community Needs Not to be Addressed

While MCH recognizes the high importance of all 28 needs captured through the CHNA, 13 were identified as lower priority or not in the scope of Monadnock Community Hospital's work - apart from the normal provision of inpatient and outpatient medical care services.

Survey Rank	
16	Primary care services (such as a family doctor or other provider of routine care)
17	Job readiness
18	Programs for diabetes and/or obesity
19	Primary care services (such as a family doctor or other provider of routine care)
20	Specialty care services, Dermatology care
21	Secure sources for affordable, nutritious food
22	Specialty care services, Cancer care
23	Heart health or cardiovascular health
24	Specialty care services: Cardiology
25	Parenting classes
26	Long-term care or dementia care
27	Emergency care and trauma services
28	HIV AIDS testing

