
Monadnock Community Hospital

Community Health Needs Assessment

Implementation Plan: 2016-2018



*Working with, and
for, our community
to address today's
healthcare needs*

Background - Compliance

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

- In addition, the Affordable Care Act of 2010 requires a CHNA and IP to be done every three years.
- In 2015-2016, Monadnock Community Hospital (MCH) completed its Community Health Needs Assessment with the goals to identify and prioritize service gaps and to identify ways that it can help improve community health – in addition to meeting state and federal regulations.
- The following IP indicates which of the prioritized needs the hospital will address (and how) and which ones it will not address (and why not).

Requirements

The CHNA and the IP are separate but linked requirements

➤ CHNA Requirements

- 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
- Activities conducted since the prior CHNA conducted in order to address the identified needs
- Prioritize the list of community health needs to be included in the Implementation Plan

➤ Implementation Plan (IP) Requirements

- Identify which community needs the hospital will address (and how)
- Identify which community needs the hospital will not address (and why not)

This document summarizes the CHNA and provides details about the IP

IP Approach

The CHNA Leadership Team was comprised of hospital and community leaders (including those with public health knowledge). The Team was heavily engaged and represents a strong, devoted group of community stakeholders. In order to create a smooth transition to the IP (and subsequent outreach activities), the IP Team included many of the same individuals and organizations. The IP approach included the following tasks:

- Evaluating perceptions regarding the impact of the success of existing programs to meet prioritized needs; the categorization of short-term, intermediate-term, and long-term projects required to address community needs; and, MCH's role for each of the 46 CHNA-identified needs
- Conducting working sessions with Leadership Team members to chronologically map activities needed to address needs (in conjunction with other community organizations, where possible)
- Finalizing the IP document

Defined Needs

- A “need” was defined as a service gap – or, an inadequately met health issue – that could benefit from additional support from MCH or affiliated organizations
- For this reason, many chronic disease states such as heart disease, diabetes, cancer, and others – while highly important community health issues – are not listed as unmet needs because the hospital and others are already highly engaged in these critically important areas.

Implementation Focus Areas

“A key to meeting the INTENT of the Community Health Needs Assessment [regulation] is help hospitals refine or strengthen what they are already doing, engage in new initiatives where it makes sense, help others where others have a strength, and discontinue things that they don’t need to do.”

Focus areas are broad categories of needs that each encompass several of the health needs identified in the CHNA.

- Links with the CHNA
- Provides MCH with latitude to simultaneously address multiple issues
- Help align with the “INTENT” (above)

Implementation Focus Areas

Focus Area A	Focus Area B	Focus Area C	Focus Area D
<ul style="list-style-type: none">• Improve mental health education, detection, and care services	<ul style="list-style-type: none">• Support or provide drug and alcohol education, detection, and care	<ul style="list-style-type: none">• Support or expand access to dental care	<ul style="list-style-type: none">• Support better access to transportation

- For each Focus Area, the following pages show ...
- List current MCH initiatives
 - List of prioritized needs (or, “gaps”)
 - The mechanism by which needs will be (or are already being) addressed

Focus Area A: Improve Mental Health Education, Detection, and Care Services

This is an ongoing challenge in the services area. Current MCH programs have addressed the need. Additional focus is needed.

➤ Current initiatives

- Monadnock Behavioral Health
- Support Group Guide
- 24/7 Crisis Prevention Team on-call
- ED room outfitted with a bathroom and shower for 24 hour crisis care (in process)

Focus Area A Gaps: Improve mental health education, detection, and care services

Prioritized Need	Hospital Action to Address the Need
Behavioral health care for adult social, emotional, and organically-based illnesses (e.g., schizophrenia, bipolar disorders, etc.)	Monadnock Behavioral Health, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care
Behavioral health – early detection and intervention	Monadnock Behavioral Health and Social Services present in all practices, Support group guide continually distributed
Counseling or intervention services to deal with home violence	Monadnock Behavioral Health and Social Services present in all practices, Support group guide continually distributed
Other youth-oriented programs (example: wellness, mentoring, lifestyle and goal setting)	Be The Change Task Force present in all local school districts, MCH offers internships to local students, MCH has representatives partake in local community events such as Camp Quest, Career Fair, Wellness Festival, etc.
Behavioral health for senior population	Monadnock Behavioral Health, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care
Teen suicide	Monadnock Behavioral Health works closely with the school district, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care.
Support groups for people suffering from depression or anxiety	Support group guide is continually distributed; Support groups are provided space here on MCH campus. NAMI support group is held here once a month

Focus Area B: Support or Provide Drug and Alcohol Education, Detection, and Care

Over the past three years, growth in the needs have increased rapidly; some now require urgent attention.

➤ Current initiatives

- Be the Change Task Force (Educational events, Narcan training/disbursement)
- Support Group Guide
- School based Substance Use Task Forces
- FASTER Support Group
- Prescription drug take-back opportunities

Focus Area B Gaps: Support or provide drug and alcohol education, detection, and care

Prioritized Need	Hospital Action to Address the Need
Drug and alcohol abuse treatment	Prescription drug take-back programs, Be The Change Task Force educational events, Narran training/disbursement, referrals to treatment facilities, Controlled Substance Management Policy in place, Monadnock Behavioral Health Counseling
Drug and alcohol education and early intervention	Be The Change Task Force present in all local school districts, other school based substance use task forces are supported and partnered with and hold monthly community forums to educate the public
Smoking or tobacco prevention and education	Be The Change Task Force present in all local school districts, other school based substance use task forces are supported and partnered with and we have a Quit to be Fit program here at MCH in our Pulmonary Fitness Department for people trying to quit.

Focus Area C: Support or Expand Access to Dental Care

Current resources in this area expand the hospital's ability to support needs.

➤ Current initiatives

- Referrals to Greater Nashua Dental Connection (GNDC)
- Pay for x-rays and initial screening and cleaning (If on MCH FAP)
- Sliding scale assistance (GNDC)
- Get GNDC in our Primary Service Area

Focus Area C Gaps: Support or Expand Access to Dental Care

Prioritized Need	Hospital Action to Address the Need
Affordable Dental services for adults	MCH provides referrals to the Greater Nashua Dental Connection, MCH Financial Assistance Program will pay for x-rays and initial screening/cleaning, MCH is working to get the Greater Nashua Dental Connection into our service area
Affordable Dental services for children	Healthy Teeth To Toes in all schools in service area and referrals are made to Greater Nashua Dental Connection
More dentists	MCH Refers patients to Greater Nashua Dental Connection in addition to local providers

Focus Area D: Support Better Access to Transportation and Other Needs to be Addressed

Transportation is historically a large impediment to access to care – especially for seniors, those in more remote parts of the service area, and other vulnerable or underserved populations.

- Current transportation initiatives
 - Contoocook Valley Transportation Company referrals
 - Free coffee to CVTC drivers
 - Annual CVTC events (hosting)

Focus Area D Gap: Support Better Access to Transportation

Prioritized Need	Hospital Action to Address the Need
Services that provide transportation to medical appointments and the pharmacy	MCH refers patients with transportation issues to Contoocook Valley Transportation Company and supports CVTC in various ways

Other Community Needs Identified in the CHNA Needs 1 through 5 (of 22)

Monadnock Community Hospital is already addressing several other prioritized community needs, as identified in the recent CHNA

➤ The following 22 needs will also be, or are currently being, addressed:

Prioritized Need	Hospital Action to Address the Need
Availability of affordable healthcare, prescriptions, and related services	MCH Financial Assistance Program and Medication Bridge Program in place, work with insurance companies to be a part of the Affordable Care Act and extend the services so our community can receive care at MCH. Intent to Affiliate with CMC to offer more services at MCH, such as rheumatology and dermatology.
Affordable medical care	MCH Financial Assistance Program and our Medication Bridge Program works with patients with demonstrated financial needs
Homeless services (healthcare for the homeless)	Depending on the person's income, patients get up to a 100% discount on MCH's services with MCH's Financial Assistance Program. They are counseled on how to sign up for the ACA. Social Workers refer patients to local shelters and long term transitional housing.
Affordable prescription drugs	MCH's Medication Bridge Program works with patients with demonstrated financial need.
Coordination of care between provider organizations	MCH is piloting care coordinator program.

Other Community Needs Identified in the CHNA

Needs 6 through 13 (of 22)

Prioritized Need	Hospital Action to Address the Need
Communication between community service providers regarding the breadth of services available	MCH's Community Relations Department is constantly in touch with local service agencies regarding new programs and initiatives to work on in the community. They are part of the Public Health Advisory Council and Council for Healthier Community which meets quarterly to exchange thoughts and community initiatives.
Coordination of care	MCH is piloting care coordinator program
Lack of insurance coverage	MCH Financial Assistance Program works with patients with demonstrated financial need and their first step is to try and get those individuals/families on insurance
More doctors that provide routine medical care (family doctor, pediatrician, primary care)	MCH is constantly working to maintain the necessary number of PCPs needed to support our service area
Urgent care	MCH is currently researching urgent care options/viability in the area
Obesity education and care	Exercise is Medicine program is now underway at MCH
Home health services such as Visiting Nurses or other in-home care	Social Services will refer patients and their families to local Home Health agencies when needed
Exercise programs for adults and seniors	Exercise is Medicine program is now underway at MCH and The Bond Wellness Center is available for all community members and at a reduced rate for people that have been accepted into the Financial Assistance Program

Other Community Needs Identified in the CHNA

Needs 15 through 23 (of 23)

Prioritized Need	Hospital Action to Address the Need
Nutrition education and services	We offer a smart weigh program quarterly for the community and offer nutritional advice for all inpatients as well as having 2 Dietitians onsite and a diabetes program
Availability of specialists and treatments	MCH is intending to affiliate with CMC in the coming year and this will bring more services to the Peterborough area, such as dermatology and rheumatology
Pain management	MCH has a pain management specialist at MCH, Dr. Terrence McNamara, who works with the social services department and the PCP of the patient to use a wraparound care approach. For alternative medicine, Dr. McNamara offers injections to help pain as well as acupuncture
More doctors that provide specialized care for cancer, diabetes, asthma, and other conditions	Pending affiliation with CMC will likely lead to the provision of additional specialty services on the MCH campus
Hospice or end-of-life care	Social Services will refer patients and their families to local Home Health agencies when needed and we have a hospice room here at MCH.
Care for heart disease or heart conditions	MCH offers Cardiology services here at MCH
Access to pulmonary specialties/all specialty care access	MCH Has a pulmonary Fitness program here at MCH with access to the Bond Wellness Center
Diabetes care and education	MCH offers a diabetes program with access to the Bond Wellness Center
Multi-lingual health services	MCH Offers an interpreter service for all patients if needed.

Community Needs NOT to be Directly Addressed by MCH

There are several issues that MCH will not directly address because they are either embedded into other programs, better addressed by other organizations, or out of scope. They are listed below:

- Affordable medical care (embedded into other programs)
- Exercise programs for children (better addressed by other organizations)
- Food security (better addressed by other organizations)
- Senior health services (embedded into other programs)
- Lack of employer support (out of scope)
- Women's healthcare (embedded into other programs)
- Preventive health services, such as flu shots, mammograms, and other screenings (embedded into other programs)
- Breast care and cancer screening (embedded into other programs)
- Chronic disease screening (embedded into other programs)
- Diabetes (embedded into other programs)
- Migrant health services (embedded into other programs)

Further Contact and Questions

Contact for additional information

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Appendices: Prioritized Needs

Focus Area, Address Status, and Action

Monadnock Community Hospital Implementation Plan Summary Grid

Rank	Topic	Focus Area (A through D)	Will be addressed	If so, how?
1	Behavioral health care for adult social, emotional, and organically-based illnesses (e.g., schizophrenia, bipolar disorders, etc.)	A	Y	Monadnock Behavioral Health, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care
3	Behavioral health – early detection and intervention	A	Y	Monadnock Behavioral Health and Social Services present in all practices, Support group guide continually distributed
7	Counseling or intervention services to deal with home violence	A	Y	Monadnock Behavioral Health and Social Services present in all practices, Support group guide continually distributed
11	Other youth-oriented programs (example: wellness, mentoring, life style and goal setting)	A	Y	Be The Change Task Force present in all local school districts, MCH offers internships to local students, MCH has representatives partake in local community events such as Camp Quest, Career Fair, Wellness Festival, etc.
14	Behavioral health for senior population	A	Y	Monadnock Behavioral Health, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care
17	Teen suicide	A	Y	Monadnock Behavioral Health works closely with the school district, 24/7 Crisis prevention team on call and plans in place to renovate an ED room outfitted with bathroom and shower for 24/7 crisis care.
18	Support groups for people suffering from depression or anxiety	A	Y	Support group guide is continually distributed; Support groups are provided space here on MCH campus. NAMI support group is held here once a month
2	Drug and alcohol abuse treatment	B	Y	Prescription drug take-back programs, Be The Change Task Force educational events, Narcan training/dispbursement, referrals to treatment facilities, Controlled Substance Management Policy in place, Monadnock Behavioral Health Counseling

Appendices: Prioritized Needs

Focus Area Topic, Address Status, and Action

Monadnock Community Hospital Implementation Plan Summary Grid

Rank	Topic	Focus Area (A through D)	Will be addressed	If so, how?
4	Drug and alcohol education and early intervention	B	Y	Be The Change Task Force present in all local school districts, other school based substance use task forces are supported and partnered with and hold monthly community forums to educate the public
22	Smoking or tobacco prevention and education	B	Y	Be The Change Task Force present in all local school districts, other school based substance use task forces are supported and partnered with and we have a Quit to be Fit program here at MCH in our Pulmonary Fitness Department for people trying to quit.
6	Affordable Dental services for adults	C	Y	MCH provides referrals to the Greater Nashua Dental Connection, MCH Financial Assistance Program will pay for x-rays and initial screening/cleaning, MCH is working to get the Greater Nashua Dental Connection into our service area
19	Affordable Dental services for children	C	Y	Healthy Teeth To Toes in all schools in service area and referrals are made to Greater Nashua Dental Connection
36	More dentists	C	Y	MCH Refers patients to Greater Nashua Dental Connection in addition to local providers
8	Services that provide transportation to medical appointments and the pharmacy	D	Y	MCH refers patients with transportation issues to Contoocook Valley Transportation Company and supports CVTC in various ways
5	Availability of affordable healthcare, prescriptions, and related services	Other	Y	MCH Financial Assistance Program and Medication Bridge Program in place, work with insurance companies to be a part of the Affordable Care Act and extend the services so our community can receive care at MCH. Intent to Affiliate with CMC to offer more services at MCH, such as rheumatology and dermatology
8	Affordable medical care	Other		MCH Financial Assistance Program and our Medication Bridge Program works with patients with demonstrated financial needs

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Focus Area Topic, Address Status, and Action

Monadnock Community Hospital Implementation Plan Summary Grid

Rank	Topic	Focus Area (A through D)	Will be addressed	If so, how?
10	Homeless services (healthcare for the homeless)	Other	Y	Depending on the person's income they can get up to a 100% discount on MCH's services with MCH's Financial Assistance Program and also will be counseled on how to sign up for the ACA. Social Workers will refer patients to local shelters and long term transitional housing options.
12	Affordable prescription drugs	Other	Y	MCH's Medication Bridge Program works with patients with demonstrated financial need
13	Coordination of care between provider organizations	Other	Y	MCH is piloting care coordinator program
15	Communication between community service providers regarding the breadth of services available	Other	Y	MCH's Community Relations Department is constantly in touch with local service agencies regarding new programs and initiatives to work on in the community. They are part of the Public Health Advisory Council and Council for Healthier Community which meets quarterly to exchange thoughts and community initiatives. This can definitely be worked on, and streamlined to work better.
16	Coordination of care	Other	Y	MCH is piloting care coordinator program
20	Lack of insurance coverage	Other	Y	MCH Financial Assistance Program works with patients with demonstrated financial need and their first step is to try and get those individuals/families on insurance
21	More doctors that provide routine medical care (family doctor, pediatrician, primary care)	Other	Y	MCH is constantly working to maintain the necessary number of PCPs needed to support our service area
23	Urgent care	Other	Y	MCH is currently researching urgent care options/viability in the area
24	Exercise programs for children	Other	N	
25	Obesity education and care	Other	Y	Exercise is Medicine program is now underway at MCH
26	Food security	Other	N	
26	Senior health services	Other	N	

Appendices: Prioritized Needs

Focus Area Topic, Address Status, and Action

Monadnock Community Hospital Implementation Plan Summary Grid

Rank	Topic	Focus Area (A through D)	Will be addressed	If so, how?
28	Lack of employer support (causes people to go to work sick)	Other	N	
29	Home health services such as Visiting Nurses or other in- home care	Other	Y	Social Services will refer patients and their families to local Home Health agencies when needed
30	Exercise programs for adults and seniors	Other	Y	Exercise is Medicine program is now underway at MCH and The Bond Wellness Center is available for all community members and at a reduced rate for people that have been accepted into the Financial Assistance Program
31	Nutrition education and services	Other	Y	We offer a smart weigh program quarterly for the community and offer nutritional advice for all inpatients as well as having 2 Dietitians onsite and a diabetes program
32	Women's healthcare	Other	N	
33	Preventive health services, such as flu shots, mammograms, and other screenings	Other	N	
34	Availability of specialists and treatments	Other	Y	MCH is intending to affiliate with CMC in the coming year and this will bring more services to the Peterborough area, such as dermatology and rheumatology
35	Pain management	Other	Y	MCH has a pain management specialist at MCH, Dr. Terrence McNamara, who works with the social services department and the PCP of the patient to use a wraparound care approach. For alternative medicine, Dr. McNamara offers injections to help pain as well as acupuncture
36	More doctors that provide specialized care for cancer, diabetes, asthma, and other conditions	Other	Y	Pending affiliation with CMC will likely lead to the provision of additional specialty services on the MCH campus

Appendices: Prioritized Needs

Focus Area Topic, Address Status, and Action

Monadnock Community Hospital Implementation Plan Summary Grid

Rank	Topic	Focus Area (A through D)	Will be addressed	If so, how?
38	Hospice or end-of-life care	Other	Y	Social Services will refer patients and their families to local Home Health agencies when needed and we have a hospice room here at MCH.
39	Breast care and cancer screening	Other	N	
40	Care for heart disease or heart conditions	Other	Y	MCH offers Cardiology services here at MCH
41	Access to pulmonary specialties/all specialty care access	Other	Y	MCH Has a pulmonary Fitness program here at MCH with access to the Bond Wellness Center
42	Diabetes care and education	Other	Y	MCH offers a diabetes program with access to the Bond Wellness Center
43	Chronic disease screening	Other	N	
44	Diabetes	Other	N	
45	Multilingual health services	Other	Y	MCH Offers an interpreter service for all patients if needed.
46	Migrant health services	Other	N	