

**Hospital:** Rumford Hospital

**Health Priority:** Social Determinants of Health

**Goal 1:** Improve the integration of Adverse Childhood Experiences (ACEs) supports in the Rumford Hospital service area

**Outcome Measure:** ACEs screening tool into Primary Care and Emergency Department implemented

Strategies	Description	Measures	Partners
<b>Strategy 1:</b> Embed ACEs screening tool into Primary Care and the Emergency Department	<ul style="list-style-type: none"> <li>• Work with ACEs Steering Committee to finalize screening tool (Y1-2)</li> <li>• Finalize referral hand-off for patients who score 2+ on ACEs screening (Y1-3)</li> <li>• Resume ACEs 101 trainings with providers (Y2-3)</li> </ul>	<ul style="list-style-type: none"> <li>• Screening tool embedded into EMR</li> <li>• Referral workflow finalized</li> <li>• # referrals made</li> <li>• # providers trained</li> </ul>	HPC, ACEs Steering Committee, Oxford County Wellness Collaborative, Oxford County Mental Health Services, IS
<b>Strategy 2:</b> Educate patients and community on ACEs, resiliency, protective and risk factors	<ul style="list-style-type: none"> <li>• Integrate Resilience Matters to ME program in the River Valley (Y1-3)</li> <li>• Create and maintain Rumford Hospital Community Events Calendar of region-specific events related to ACEs (Y1-3)</li> <li>• Maintain and expand connection to the community through events around ACEs (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>• # materials distributed</li> <li>• Calendar created</li> <li>• # events</li> <li>• # social media posts</li> <li>• # community connections made</li> <li>• # community events supported</li> </ul>	HPC, Oxford County Wellness Collaborative, Marketing, Communications, Resilient ME, Community Organizations TBD

**Goal 2:** Improve the integration of food insecurity supports within the Rumford Hospital service area

**Outcome Measure:** Use of Hunger Vital Signs screening and local program resources increased

Strategies	Description	Measures	Partners
<b>Strategy 1:</b> Increase the number of food insecure patients served through the Hunger Vital Signs program at Rumford Hospital and Primary Care Practices	<ul style="list-style-type: none"> <li>• Increase Hunger Vital Signs (HVS) screening with patients (Y1-3)</li> <li>• Onboard a department at Rumford Hospital to HVS (Y2-3)</li> </ul>	<ul style="list-style-type: none"> <li>• # patients screened</li> <li>• # food bags distributed</li> <li>• # pantry lists distributed</li> <li>• New site identified</li> <li>• New site onboarded</li> </ul>	HPC, Good Shepherd Food Bank Community Health & Hunger Staff, Accountable Care Organization, Practice Manager, Director or Regional Practices, VP of Nursing
<b>Strategy 2:</b> Support existing community organizations providing education, resources and prevention related to food insecurity	<ul style="list-style-type: none"> <li>• Assist in fundraising, item collection, packing and/or delivering for RVHCC backpack drive for February and April school breaks (Y1-3)</li> <li>• Engage in conversations around food access in the River Valley (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>• # units of food donated</li> <li>• \$ amount of money raised</li> <li>• # conversations participated in</li> </ul>	HPC, Rumford Hospital Leadership Team, River Valley Healthy Community Coalition, Western Foothills Food Forum, Marketing, Communications

**Health Priority:** Substance Use Disorder**Goal 1:** Increase awareness and education of substance use disorder treatment in Rumford Hospital service area**Outcome Measure:** Trainings for staff and community on substance use and harm reduction implemented

Strategies	Description	Measures	Partners
<b>Strategy 1:</b> Assess team members' attitudes around substance use disorder and harm reduction	<ul style="list-style-type: none"> <li>• Create a survey to identify opinions, beliefs and attitudes of patient facing staff on mental health, substance use disorder and harm reduction (Y1-2)</li> </ul>	<ul style="list-style-type: none"> <li>• Survey identified or created</li> <li>• Survey administered</li> </ul>	HPC, Oxford County Mental Health Services, OPTIONS Liaisons, River Valley Healthy Community Coalition, The Opportunity Alliance
<b>Strategy 2:</b> Increase education and prevention of substance use disorder	<ul style="list-style-type: none"> <li>• Create a training for staff from results of survey (Y2-3)</li> <li>• Support all non-clinical staff in completing the Naloxone iCare yearly (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>• Training created</li> <li>• # staff trained</li> <li>• iCare implemented</li> <li>• # staff completed iCare</li> </ul>	HPC, VP of Nursing, Dir. of Regional Practices, Practice Manager, ED Nurse Manager, Clinical Educator, The Opportunity Alliance, Oxford County Mental Health Services, River Valley Healthy Community Coalition, OPTIONS Liaison(s)

**Goal 2:** Improve access and resources for substance use disorder**Outcome Measure:** Trainings for Naloxone availability and distribution implemented

Strategies	Description	Measures	Partners
<b>Strategy 1:</b> Improve accessibility of harm reduction and treatment of substance use disorder	<ul style="list-style-type: none"> <li>• Train ED providers in suboxone induction (Y1-2)</li> <li>• Begin distribution of Naloxone in the ED (Y1-3)</li> <li>• Develop training materials and guides on the Emergency Cart and Emergency Plan on Naloxone for Primary Care staff (Y1-2)</li> <li>• Create materials for staff, patients and families on local resources to access Naloxone in the community, and SUD education (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>• # providers who can induct in ED</li> <li>• # Naloxone distributed</li> <li>• Training developed</li> <li>• # staff trained</li> <li>• Materials created</li> <li>• Materials distributed</li> </ul>	HPC, VP of Nursing, ED Nurse Manager, Practice Manager, Dir. of Regional Practices, Legal, Pharmacy, OPTIONS liaison
<b>Strategy 2:</b> Support existing community partners providing education, resources and prevention related to substance use disorder	<ul style="list-style-type: none"> <li>• Create a workflow to connect ER patients with OPTIONS liaison for recovery supports (Y1-2)</li> <li>• Maintain and expand connection to community (Drug Take Back Days, Annual Recovery Rally, Maine West activities, Black Balloon Day) (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>• Workflow created</li> <li>• Staff training on workflow created</li> <li>• # staff trained</li> <li>• # social media posts</li> <li>• # community connections made</li> <li>• # community events supported</li> <li>• # pounds of meds collected</li> </ul>	HPC, OPTIONS liaison, ED Nurse Manager, Marketing, Western Maine Addiction Recovery Initiative, River Valley Healthy Community Coalition, Maine West, Maine Sheriff Dept

**Health Priority:** Diversity, Equity, Inclusion, and Belonging (DEIB)

**Goal:** Improve the health outcomes for populations experiencing health disparities

**Outcome Measure:** Develop a Diversity, Equity, and Inclusion vision and action plan.

Strategies	Description	Measures	Partners
<p><b>Strategy 1:</b> Convene a team to develop a plan to address diversity, equity, inclusion and belonging</p>	<ul style="list-style-type: none"> <li>Identify an organizational leader to convene a DEIB committee -members including people from the LGBTQ, ECBO, veterans, low income, and rural communities (Y1-3)</li> <li>Create a timeline for the development of the action plan (Y2)</li> </ul>	<ul style="list-style-type: none"> <li>Leader Identified</li> <li>Committee formed</li> <li>Timeline developed</li> <li>Plan developed</li> </ul>	<p>Senior Leadership Team, Human Resources, Marketing, Community Partners Representing marginalized populations (LGBTQ, ECBO, Homeless, Poverty, Veterans etc.), Residency DEIB Committee</p>
<p><b>Strategy 2:</b> Solidify partnerships with community allies to support the DEIB action plan</p>	<ul style="list-style-type: none"> <li>Identify partners representing marginalized groups (Y1)</li> <li>Conduct interviews/focus groups to understand needs/gaps and opportunities for engaging in a planning process (Y1)</li> <li>Conduct internal survey of staff to better understand how they experience and recognize DEIB in their roles to identify opportunities for support and education (Y1)</li> </ul>	<ul style="list-style-type: none"> <li>Partners identified</li> <li>Interviews/focus groups completed</li> <li>Needs prioritized and implementation plan developed</li> <li>Staff survey completed</li> </ul>	<p>Senior Leadership Team, Human Resources, Marketing, Community Partners Representing marginalized populations (LGBTQ, ECBO, Homeless, Poverty, Veterans etc.), Residency DEIB Committee</p>
<p><b>Strategy 3:</b> Increase awareness of DEIB activities and progress</p>	<ul style="list-style-type: none"> <li>Create an annual report outlining activities and progress on action plan goals to be disseminated to all RH staff (Y1-3)</li> <li>Highlight activities of DEIB committee through OnPoint newsletter quarterly (Y1-3)</li> </ul>	<ul style="list-style-type: none"> <li>Annual report created</li> <li>Quarterly highlight disseminated</li> </ul>	<p>Senior Leadership Team, Human Resources, Marketing, Community Partners Representing marginalized populations (LGBTQ, ECBO, Homeless, Poverty, Veterans etc.), Residency DEIB Committee</p>

<b>Central Maine Healthcare/Affiliate Hospital:</b>	Rumford Hospital
<b>County:</b>	Oxford
<b>Health Priority:</b>	PRIORITIES NOT SELECTED
<b>Goal of Health Priority:</b>	N/A

Priority	Why We Did Not Choose This Priority	Organizations That Are Addressing This Strategy
Priority: Access to Care	Community stakeholders voted on the top health priorities for their communities. The Community Health Coalition (CHC) then chose two priorities to pursue. The CHC did not choose Access to Care as there are a variety of other organizations in the area addressing this need. The CHC felt Substance Use and Social Determinants of Health were more tangible health priorities to address given the scope and limited resources of the project.	<ul style="list-style-type: none"> <li>• Western Maine Transportation</li> <li>• Western Maine Canter Center</li> <li>• Stephen’s Memorial Hospital</li> <li>• Rumford Hospital</li> <li>• Telehealth</li> <li>• Western Maine Addiction Recovery Initiative – Project Save ME</li> </ul>
Priority: Mental Health	Community stakeholders voted on the top health priorities for their communities. The Community Health Coalition (CHC) then chose two priorities to pursue. The CHC did not choose Mental Health as there are a variety of other organizations in the area addressing this need. The CHC felt Substance Use and Social Determinants of Health were more tangible health priorities to address given the scope and limited resources of the project.	<ul style="list-style-type: none"> <li>• Overdose Prevention Through Intensive Outreach, Naloxone and Safety (OPTIONS) Program</li> <li>• Oxford County Mental Health Services</li> <li>• Oxford County Resiliency Project</li> <li>• Tri-County Mental Health Services</li> <li>• Community work towards addressing stigma</li> <li>• Trauma informed education in schools</li> <li>• Common Ground Counseling</li> </ul>