

Rumford Hospital Implementation Plan for Community Health Needs Assessment 2019-2021

Central Maine Healthcare		Rumford Hospital				
Country:		Oxford				
Priority #2:		Behavioral Health				
Year	Goal	Strategies	Supporting Activities	Metrics/What are we measuring?	Partners/External Organizations	Year of Work 1-3
Behavioral Health	To improve the integration of Mental Health education and support Rumford hospital processes	Strategy 1: Educate clinical providers and staff about Adverse Childhood Experiences (ACES) and their health effects	Embed Care videos from Oxford County Mental Health Services (OCMHS) into required Provider and staff training	# and % of Providers and staff trained	Re Health Promotion Coordinator, Oxford County Mental Health Services (OCMHS) and the Community Health Network (CHN)	Year 1 through 3
		Strategy 2: Once ACES screening tool is integrated into ACES Priority Workplans, create a workflow to do a warm hand-off to community support services for patients who have a ACES score above 2	Connect partners from Behavioral Health team to lead process of developing proposed workflow	# and % of referrals made to community support services	Tri-County Mental Health (TCMH) and OCMHS and Behavioral Health Home partners	Year 1
		Strategy 3: Investigate models for sustainably integrating social workers into primary care	Research models and develop plan	# models investigated	OCMHS, Rumford Hospital, Central Maine Medical Group, Tri County Mental Health	Year 3
	Increase awareness in the Rumford hospital service area about mental and behavioral health	Strategy 1: Educate community on Mental Health First Aid and Suicide Prevention Strategy 2: Evaluate Program	Hold quarterly education sessions Work with Professional Evaluator to assess how strategies are increasing the number of referrals to appropriate trauma-informed resources	# of people trained in Mental Health First Aid # of people trained in Suicide Prevention techniques Evaluation plan developed and implemented	National Alliance for Mental Illness (NAMI) and Rumford Hospital, KSU 33 and RSU 56 Professional Evaluation Consultant	Year 1 and 2 Year 1 through 3

Central Maine Healthcare		Rumford Hospital					
Country:		Oxford					
Priority #2:		ACES - Adverse Childhood Experiences					
Month Priority	Goal	Strategies	Supporting Activities	Metrics/What are we measuring?	Partners/External Organizations	Year of Work 1-3	
Adverse Childhood Experiences (ACES)	Increase awareness in the Rumford hospital service area about ACES	Strategy 1: Increase awareness for Rumford Hospital staff of Adverse Childhood Experiences and support services available	Embed Care videos from Oxford County Mental Health Services (OCMHS) into required Provider and staff training	# and % of Providers and staff trained	Resources and staff time from Oxford County Mental Health Services (OCMHS) and Oxford County Resiliency Project (OCRP) Health Promotion Coordinator (HPC)	Year 1	
		Strategy 2: Educate Patients about ACES	Implement train the trainer educational sessions for RH departments	# and % of Providers and staff trained # Departments trained	Resources and staff time from Oxford County Mental Health Services (OCMHS) and Oxford County Resiliency Project (OCRP) Health Promotion Coordinator (HPC)	Year 1	
			Compile ACES educational materials	# of Educational Materials Identified for Diverse Patient Audiences	Resources and materials from SAMHSA (Substance Abuse and Mental Health Administration), Oxford County Resiliency Project (OCRP)	Year 1	
		To improve the integration of ACES support into Rumford Hospital processes	Strategy 3: Embed ACES screening in Primary care Electronic Health Record	Create and implement plan for distribution of educational materials which may include making resource available electronically, e.g. on YouTube, Social Media, Waiting Rooms	# Patients educated, # of Views	Health Promotion Coordinator	Year 1
	Strategy 4: Embed ACES screening in ED (Emergency Department)		Identify ACES screening tool	ACES screening tool identified	Staff Elumora Oxford Family Medicine (DFM) and Swift River Family Medicine (SRFM), Oxford County Resiliency Project (OCRP), Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening)	Year 1	
			Develop workflow for ACES screening	ACES screening workflow completed	Oxford County Resiliency Project (OCRP), Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening)	Year 1	
			Embed ACES screening tool into EMR	Screening tool embedded; 40% of patient screenings completed	Oxford County Resiliency Project (OCRP), IT, Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening)	Year 2	
	Strategy 5: Evaluate Program		Educate clinical and support staff on new workflow	Educate clinical and support staff on new workflow	% practices educated	Oxford County Resiliency Project (OCRP), IT, Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening)	Year 3
			Develop workflow for ACES screening	Develop workflow for ACES screening	ACES screening workflow completed	Oxford County Resiliency Project (OCRP), Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening), Oxford County Crisis workers	Year 1
		Embed ACES screening tool into EMR	Embed ACES screening tool into EMR	Screening tool embedded	Oxford County Resiliency Project (OCRP), IT, Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening)	Year 2	
Educate clinical and support staff on new workflow	Educate clinical and support staff on new workflow	% staff and practices educated	Oxford County Resiliency Project (OCRP), IT, Julia Bergquist (experience with this model at Maine Health and with similar Hunger Vital Signs screening), Oxford County Crisis workers	Year 3			
Work with the professional Evaluator to assess how strategies are increasing the number of patients positive for trauma who are then referred to appropriate trauma-informed resources	Work with the professional Evaluator to assess how strategies are increasing the number of patients positive for trauma who are then referred to appropriate trauma-informed resources	Evaluation plan developed and implemented # and % patients screened and # and % patients referred to community resources	Professional Evaluator Consultant	Year 1 through 3			

Central Maine Healthcare		Rumford Hospital				
Country:		Oxford				
Priority #2:		Capacity Building				
Year	Goal	Strategies	Supporting Activities	Metrics/What are we measuring?	Partners/External Organizations	Year of Work 1-3
Community Health Capacity Building	To build community capacity for conducting evidence-based community health approaches and support projects and programs that address community health needs	Strategy 1: Create new community engagement connections with River Valley partners	The Health Promotion Coordinator will direct this effort including coordinating partner round table discussions to determine challenges, opportunities and resources. The HPC will work with partners to align and support collaborative efforts	# of new connections made and evidence of formalization of collaborations (e.g. Memorandum of Understanding, collaborative workflow)	OCMHS, Community Health Network, Rumford staff, other community partners as appropriate	Year 1 through 3
		Strategy 2: Coordinate community-based public relations opportunities that support the priorities of the CHNA	Work with PR and Marketing to identify and attend public relations and community engagement opportunities	# and reach of press releases, advertisements, # events that support the priorities of the CHNA	OCMHS, Community Health Network, Rumford staff, CHN Marketing and other community partners as appropriate	Year 1 through 3