Southcoast Hospitals Community Benefits Implementation Plan FY 2013



Southcoast Hospitals Group 363 Highland Avenue

Fall River, MA 02720 Serving the region of Southeastern Massachusetts

www.southcoast.org

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Section I: Demographics and Target Populations:

Our target populations are determined by our comprehensive health needs assessment and are reviewed on an annual basis. Our target populations include:

- South Coast residents who suffer disproportionately from chronic disease such as cardiovascular disease, diabetes, cancer and respiratory disease. Particular focus is give to residents who experience barriers to care due to language, culture, race, income or education.
- Area youth who are at high risk for problems such as teen pregnancy, violence, substance abuse and other risky behaviors that impact health and wellbeing. This includes Gay/Lesbian/Bisexual/Transgender youth.
- Residents who lack access to regular primary health care due to lack of health insurance or other barriers.
- Residents and their families who are affected by substance abuse.
- Area Boards of Health and other municipal agencies whose programs impact a number of aspects of health for their residents, and who have experienced severe budget cuts that have impacted these programs, which may include smoking cessation and prevention, chronic disease management and emergency preparedness.
- Public Housing residents, who suffer disproportionately from health disparities and have high rates of unhealthy risk factors including smoking, obesity, hypertension, etc.
- Homeless residents in the town of Wareham, where the rate of unsheltered homelessness exceeds other towns in the region and approaches Southcoast cities that have five times the population.
- Those in our communities who experience health disparities due to racial, ethnic or economic factors. These include residents for whom English is not a first language, especially undocumented immigrants.
- The fishing community in New Bedford, who experience higher rates of chronic health issues due to barriers to health access.

SECTION II: Community Health Needs Assessment

Southcoast completed its first comprehensive community health needs assessment in 1998 and this has been updated and expanded upon on an annual basis through regular analysis of public health data, primary disease rate data available through our health system, and periodic focus groups, interviews and needs assessment meetings with collaborative partners. For Fiscal year 2013, these include:

- A comprehensive review and analysis of regional health data, with the assistance of the University of Massachusetts-Dartmouth, Center for Policy Analysis.
- Ethnic focus groups in collaboration with the Immigrants Assistance Center, which works with immigrant populations throughout the South Coast region, and the Greater New Bedford Community Health Center, the major primary health provider for Hispanic residents in our region. These focus groups highlighted language and cultural barriers that ethnic residents encounter when accessing health services in our region.
- Needs assessment meetings with the Massachusetts Fishing Partnership
- Focus groups and key informant interviews conducted in collaboration with Voices for a Healthy Southcoast concerning cancer disparities.
- Survey data on health habits of public housing residents in New Bedford, Fall River and Wareham, including smoking, nutrition and exercise habits. Conducted in partnership with Voices for a Healthy Southcoast and the Southcoast Healthy Housing and Workplace Initiative.
- Survey of drug and alcohol habits of 18 to 24 year olds at Bristol Community College. Conducted as part of a prescription drug education program through the BOLD Coalition.
- Focus groups with parents of students involved in Southcoast RAPPP youth risk behaviors project
- Developmental Assets survey data conducted in 11 middle and high schools on the South Coast
- Youth Risk Factor Behavior Survey Fall River
- Key Informant interviews and Focus Groups conducted as part of a regional needs assessment through the Greater New Bedford Allies for Health and Wellness.
- Key informant interviews conducted by Partners for a Healthier Community, Fall River.

In Fiscal Year 2012-2013, our needs assessment data was shared with and utilized by:

- Greater New Bedford Allies for Health and Wellness (CHNA 26).
- Partners for a Healthier Community (CHNA25).
- Wareham Community Services Collaborative.
- Voices for a Health SouthCoast.
- Wareham Boys and Girls Club.
- New Bedford Health Department.
- New Bedford Housing Authority.
- Wareham Health Department.
- Wareham Public Schools' Family Council project.
- YMCA Southcoast.

Our needs assessment is posted on the Southcoast website and community members are encouraged to engage in dialogue concerning the findings.

<www.southcoast.org/news/benefits/#needsassessment>

Highlights of our needs assessment include:

The South Coast has significant demographic issues that impact residents' health, particularly in the two major urban communities in the region, Fall River and New Bedford and also the large town of Wareham. Residents in these communities have lower incomes, a lower educational level and higher unemployment than both the state and the region.

Residents also have worse health indicators in a number of areas, particularly chronic diseases such as cardiovascular disease, diabetes and asthma and maternal/child health issues including high rates of teen pregnancy. High rates of chronic disease are related to risk factors such as an extremely high rate of obesity and one of the highest smoking rates in the state, particularly in the city of New Bedford.

The majority of key informant interviews and focus group participants expressed the opinion that health issues in the region are directly related to socio-economic issues and that health disparities exist among residents who experience poverty, lack of education and cultural differences.

A number of other factors also impact health on the South Coast.

Access to Care:

Access to health care is a major issue in our region. Several of our communities have suffered disproportionately with the economic downturn and unemployment in communities like Fall River and New Bedford is much higher than the rest of the state (12.5 percent verses 8 percent for the state). This has resulted in a number of residents losing their health insurance. Close to 12 percent of the population in our region lack health insurance, verses 7.5 percent for the state.

Although access to primary care physicians has risen in recent years, due to significant recruitment of primary care physicians, data from the Behavioral Risk Factor Statewide Survey (BFRSS) also indicates that a higher percentage of residents report they could not see a physician due to cost (10 percent verses 7.7 percent for the state).

Substance Abuse:

The South Coast region has a higher admission rate for substance abuse than the rest of the state, particularly in our urban areas of Fall River and New Bedford. Fall River has one of the highest rates in Massachusetts.

Fall River	New Bedford	Massachusetts	
4,023	2,673	1,621	

Substance Abuse: Rate per 100,000 population

(Source: Massachusetts Department of Public Health)

The South Coast region also has a higher proportion of opioid-related ER visits and fatal overdoses than the state of Massachusetts as a whole. Specifically, the South Coast region reports a rate of 195.7 per 100,000 population for opioid-related emergency department visits, a rate significantly higher than the state's (181.1 per 100,000 population). In terms of race and ethnicity, white non-Hispanic residents in the South Coast are more likely than those in the state overall to have an opioid-related ER visit.

Our region has a much higher rate of smoking than the state — 22.8 percent of residents smoke verses 15.8 for Massachusetts as a whole. The city of New Bedford reports an even higher percentage at 28.4

percent. This results in high rates of lung and smoking-related cancers and also chronic respiratory disease. Also, a high percentage of women smoke while pregnant, impacting the health of their infants.

Chronic Disease:

Residents on the South Coast report higher rates of a number of chronic diseases and also the risk factors that cause them, particularly in the cities of Fall River and New Bedford.

referred bisedents who keport enrome Diseases						
	Diabetes	Asthma	Heart disease	High blood pressure		
Fall River	9.4	17.7	9	32.6		
New Bedford	9.7	17.4	9.8	32.1		
Massachusetts	6.5	14.8	7	25.6		

Percent of Residents Who Report Chronic Diseases

Source: Massachusetts Department of Public Health BFRSS survey 2009.

Risk Factors for Chronic Disease

	Overweight	Obese	Regular Physical	5-plus Servings
			Activity	of
				Fruits/Vegetables
Fall River	64	22.9	50.4	24.4
New Bedford	63.7	25.1	52.4	26.3
Fall River (city)	66.4	31.4	48.4	24.1
New	67.9	30.5	45.5	23.1
Bedford(city)				
Massachusetts	56	19.8	52.8	29.3

SECTION III: Prioritized Health Needs/Community Benefits Plan

Southcoast's Community Benefits Strategic Action Plan was first formulated in 1998 as a result of our extensive needs assessment and is updated annually. Our implementation plan is presented and formally adopted each year by the Southcoast Community Benefits Committee, a board level committee that includes hospital trustees, administration and consumers and key leaders from our communities.

Our implementation plan focuses on a number of key health priorities

- Reduction of the high rate of cardiovascular disease in our region, as well as other chronic diseases, such as diabetes and asthma. In conjunction with this our focus is reducing the high rate of risk factors for these diseases including an extremely high rate of tobacco use, a high rate of obestity and lack of physical activity.
- Reduction in the incidence of youth risk behaviors such as high rates of teen pregnancy, teen violence, and substance abuse.
- Improving access to health insurance, primary health care and preventive health screenings.
- Expanding cancer screenings and education
- Addressing health disparities that exist in our region among certain racial, ethnic and demographic groups.
- Advocacy and program development that addresses "system and environment change," both at our hospitals and in the community, that is designed to increase healthy lifestyle options and decrease risk factors, such as a high rate of smoking, lack of access to healthy foods and physical inactivity. Our efforts focus on vulnerable populations that face considerable barriers to adopting a healthy lifestyle.
- Addressing homelessness in one of our major towns, Wareham, where the counts of unsheltered homeless approach those in the much larger cities in our region.
- Playing a leadership role in regional emergency preparedness, assisting local cities and towns who have had significant budget cuts in their emergency preparedness services. This includes planning and conducting drills, supporting equipment and technology and public health programs such as flu immunizations.

Programs that are part of our community benefits implementation plan include:

- Health access outreach.
- Health advocates (intervention for substance abuse.)
- Cardiac prevention and stroke outreach.
- Diabetes education and outreach.
- Smoking cessation and prevention.
- RAPPP (Responsible Attitudes Toward Pregnancy, Parenting and Prevention) and associated youth outreach programs.
- Maternal/child health outreach.
- Southcoast Health Van.
- Health Equity Project.
- Voices for a Healthy SouthCoast.
- Cancer screenings and outreach.
- Emergency preparedness.
- Wareham Leadership Council to End and Prevent Homelessness.
- Southcoast Healthy Housing and Workplace Initiative.

1. Program: Responsible Attitudes Toward Pregnancy Prevention and Parenting (RAPPP)

Target Audience:

Middle and high school students, particularly those in communities with high rates of teen pregnancy, youth violence and other youth risk behaviors. Parents and community members who work with teens.

Documented Health Need:

High rates of teen pregnancy, particularly in the communities of Fall River and New Bedford.

Other documented youth risk behaviors including high rates of violence and substance abuse.

Collaborations:

Greater New Bedford Vocational Technical High School, Fairhaven High School, Nativity Preparatory School, Norfolk Agricultural School, Old Colony Regional Vocational High School, Our Sisters School, New Bedford Global Charter School, Trinity and Whaling City Alternative High Schools, Friends Academy, Wareham High School, Bristol County Sheriff's Department, Greater New Bedford Allies for Health and Wellness (CHNA 26), Partners for a Healthier Community (CHNA 25), Boys and Girls Club, YMCA Southcoast, Girls Scouts of Southeastern Massachusetts, Katie Brown Foundation.

Goals for 2013:

- Introduce RAPPP programming as an after-school pilot project in at least one public housing development
- Expand participation in RAPPP Afterschool program
- Expand afterschool programming for youth
- Train staff in youth crisis response and serve as a resource in a youth crisis response coalition.
- Expand parenting classes for at-risk parents in local prison systems.
- Produce peer-to-peer education to address youth risk behaviors.

Benchmarks and Accomplishments:

The RAPPP program is a 14-hour abstinence-based, comprehensive education program targeted at high school youth. This past year, the program served more than 1,896 junior and senior high school students at 12 area schools – a 23 percent increase over last year.

Since its inception RAPPP and its related programs have served more than 87,000 young people, their parents and other community members through programming, education, youth development and mentoring.

During this past year, RAPPP programs reached 7031 people in the Greater Fall River, New Bedford and Wareham communities. The RAPPP program is totally funded through grants and by Southcoast Hospitals Group. The community is strongly represented in our RAPPP Program Steering Committee made up of business leaders, educators, private citizens and youth from the Greater New Bedford.

RAPPP participants, including peer leaders and youth council members, reflect the diversity of our region. RAPPP participants' ethnic, racial and social background information is obtained and results are tabulated and retained by the Massachusetts Department of Public Health.

We also conducted several summer camps for local youth including a "Survivor Camp", which focused on skills such as CPR and first aid training and certification and information on coping skills during natural disasters; and a camp for developing leadership skills. The camps were attended by over 30 youth.

The RAPPP program involves local youth in planning and delivering our programs and messages. Our youth involvement includes work by a RAPPP youth council and a youth media group. Our youth stage a series of weekly Teen Nights for six months, which reached over 100 teens on a regular basis with safe and fun recreational opportunities.

We are the lead agency each year in organizing a community-wide teen night, June Jump-off, which reached over 150 middle and high school youth with messages about minimizing youth risk behaviors while coming together for a night of games and music.

Our youth media group creates a videos and public services announcements on topics that include increase awareness of youth risk behaviors and how to address them. This year they are working on a Youth Bill of Rights in the city of New Bedford.

RAPPP youth are also engaged as an 84.org group, one of 79 registered youth groups in Massachusetts who work to make schools and communities healthier by fighting the influence of tobacco. The 84 represents the 84 percent of youth in Massachusetts who choose to do positive things and NOT smoke. The 84.org youth has assisted in efforts to ban tobacco sales in local pharmacies and testified at public hearings in New Bedford, where the Board of Health enacted a tobacco pharmacy ban. The group also participated in a statewide "Kick Butts" day and had the opportunity to meet the U.S. Surgeon General at a rally at the state house.

This year, our 84.org group will undertake a project to survey the sale of alternative tobacco products that target local youth. They also will become involved in a smoke-free public housing initiative. Twelve RAPPP youth received special training from the Department of Public Health on tobacco conducting tobacco compliance checks and will continue to assist local enforcement agencies in conducting actual checks in local stores.

RAPPP staff collaborate with community partners on a number of coalitions that work together to address youth risk behaviors in our region. They include:

- The Greater New Bedford Health and Human Services Coalition.
- Healthy Families New Bedford Collaborative.
- Healthy Families Fall River Collaborative.
- The Children's Trust Fund Fathers & Families Network.
- The New Bedford School Superintendent's Roundtable

Parenting programming:

RAPPP staff offers bi-monthly community trainings for new and expectant fathers. Much of our programming targets "at risk" parents through a partnership with the Bristol County House of Correction. Included in our fatherhood programming is:

• "Basic Training" for incarcerated fathers, along with parenting workshops for these dads.

• "Basic Training for Young Dads" (teen new or expectant fathers aged 13 to 21).

In addition, fathers' support groups are run on a regular basis, both in the community and at the Bristol County House of Correction, which targets parents who are particularly at risk. RAPPP staff, reached 3084 people — both dads and moms — at parenting workshops for incarcerated parents this past year. This was double the number that we served last year.

Literacy:

Each year RAPPP staff distributes books to over to pre-school, elementary and middle school students as part of a project to promote literacy among under-served children and youth. This year our team distributed over 2600 books. A special audience for this literacy project was parents who are part of our educational groups at the Bristol County House of Correction.

Youth Drop-in Center/After School Programming:

Our RAPPP program this year re-located to a site that is highly accessible to local youth – near a New Bedford middle school and adjacent to a large regional, vocational school. Research has shown that the after-school hours are a time when many unsupervised teens engage in risky behaviors, so we began a formal afterschool program this past spring, providing organized activities and snacks and tutoring with trained educators. We expanded our services this year and had 621 teens and tweens participating in the first six months of opening. By the end of the 2012-2013 school year, we averaged over 30 teens on a daily basis.

In response to a number of teen suicides in the city of New Bedford this past year, our RAPPP educators received training as youth crisis counselors and our Youth Drop-in Center will be a designated site for crisis counseling following events that occur in our communities. This summer, the drop-in center served a number of youth following a teen suicide in the City of New Bedford.

2. Program: Youth Developmental Assets Training:

Target Audience:

Adults who interact with teens including teachers and other school personnel, youth coaches, youth workers and parents.

Needs Assessment: This program is designed to address high rates of youth risk behaviors such as substance abuse, teen violence and teen pregnancy through supporting local youth with community assets that help youth with goal setting and achievement. Research has shown that the more community assets youth have, there is a reduction in risky behaviors (source: SEARCH Institute)

Our program this year conducted surveys and created data bases of youth in all of our RAPPP schools related to developmental assets.

Collaborations: Greater New Bedford Vocational Technical High School, Fairhaven High School, Bristol County Sheriff's Department, Greater New Bedford Allies for Health and Wellness (CHNA 26), Partners for a Healthier Community (CHNA 25), Boys and Girls Club, YWCA Southeastern Massachusetts, Girls Scouts of Southeastern Massachusetts, People Inc., Fall River.

Goals for 2013:

Conduct at least four asset trainings targeting school personnel and personnel in agencies that work with youth. These trainings prepare the trainees to integrate and spread the asset message within their schools or organizations.

Benchmarks and Accomplishments:

Our youth staff to date has provided training for 190 community members as part of a "Healthy Youth Initiative." This program is based on a national model created by the nonprofit Search Institute, currently being implemented in high-risk communities across the country. Our local program aims to create a stronger community for young adults by emphasizing positive developmental assets, which are experiences and qualities that have a positive influence on teen's development, including self-esteem, encouragement, decision making, conflict resolution and setting future goals. Our regional program focuses on reinforcing young people's assets consistently throughout all of the organizations that interact with the city's adolescents — this includes at home, schools, through municipal organizations and youth outreach workers.

Southcoast is the major sponsor of a regional Youth Summit, which involves over 300 teens each year in Greater New Bedford. We also sponsor after school youth programs as part of youth services at the CD Recreation Department in the city of Fall River. This agency serves a number of low income, at-risk youth. Fall River and New Bedford this past year were designated as one of the nation's 100 Best Communities for Youth as a result of collaborative efforts of a number of partners. Southcoast is also a collaborative partner on a large grant the city received to provide a community-wide intervention program to reduce youth violence among proven risk teens. Part of this collaboration is sponsorship of an annual "Piece by Peace" summit for youth that focuses on violence prevention.

3. Program: Smoking Cessation and Prevention

Target Audience:

Smokers and those at risk for smoking, including youth.

Documented Health Need:

The Southcoast region has a smoking rate that is close to double the state average, particularly in the region's cities, Fall River and New Bedford and in the town of Wareham. This impacts chronic diseases such as asthma, chronic obstructive pulmonary disease and lung cancer.

	Percent smokers	Pregnant smokers	Lung cancer mortality (per100,000 population)
Fall River	22.8%	19.9%	51.2
New Bedford	28.4%	17.3%	43.9
Wareham	22.1%	20.3%	70
Massachusetts	15.8%	7.4%	50.8

Source: Mass Department of Public Health Mass CHIP

Collaborations:

Seven Hills Behavioral Health Tobacco-Free Community Partnership, Massachusetts Tobacco Cessation Program, QuitWorks, New Bedford Board of Health, Wareham Board of Health, Fall River Health Department, Voices for a Healthy SouthCoast, Greater New Bedford Community Health Center, BOLD Coalition, 84.org, YMCA Southcoast, Cape Cod Regional Tobacco Partnership.

Goals for 2013:

- Reach youth with prevention messages through smoking prevention programs.
- Partnership in the Southcoast Healthy Housing and Workplace Initiative, which advocates for smoke free public and subsidized housing in Fall River, New Bedford and Wareham and promotion of healthy workplace initiatives throughout the South Coast.
- Continue system-wide referral program for Quitworks, the Massachusetts Department of Public Health smoking cessation program.

Benchmarks and Accomplishments:

QuitWorks:

Southcoast last year continued to be among the highest health care provider referrers to the state's QuitWorks program, referring over 500 patients who are smokers.

Southcoast continued a program in our Emergency Departments that uses "brief negotiated interview" techniques to provide intervention and referrals for patients who may be at risk for any type of substance abuse, including QuitWorks referrals for smoking. This program last year referred over 300 outpatients to QuitWorks.

Southcoast also collaborated with the Greater New Bedford Community Health Center's Wellness program to offer coordinated referrals to QuitWorks and cessation programs for residents who receive care at both the hospital and health center.

Advocacy for Smoking Restrictions:

Southcoast staff continued to play a leadership role in advocacy for the ban of cigarette sales in pharmacies in a number of local cities and towns To date, seven cities and towns have either adopted this bylaw or are working on it.

Southcoast will also assist the City of New Bedford with signage for smoke-free buffer restrictions within 25 feet of all public buildings and all public parks and beaches. New Bedford is the first city in the region to enact buffer regulations for smoking in public buildings and outdoor spaces.

Tar Wars:

Tar Wars is a smoking prevention program, developed by the American Academy of Pediatrics, that targets anti-smoking messages to middle school students and fifth graders at a number of local schools. Southcoast staff use graphic models to illustrate the effects of smoking on lungs and other organs and also engage the students in creating anti-smoking messages. In many cases, Tar Wars is the only smoking prevention education in our local school systems, since health classes have often been cut due to budget constraints in local cities and towns.

Working with Partners for Healthier Community, we expanded the Tar Wars program in Fall River schools, integrating it with education programs that include tobacco, nutrition and fitness. Tar Wars is also offered in Wareham public schools.

We continue to expand Tar Wars to schools in New Bedford, which has one of the highest smoking rates in the state (28.4%). This included additional middle schools and several charter schools.

BOLD Coalition

Southcoast also targets youth with smoking prevention and cessation messages through involvement in the BOLD Coalition, an organization that is part of Partners for a Healthier Community. (CHNA 25) The Mission of the BOLD Coalition is to prevent and reduce alcohol and drug abuse among youth by

collaborating with the community to initiate policy change, raise awareness, modify social norms, educate youth and adults, and promote healthy activities.

Southcoast Healthy Housing and Workplace Initiative:

Southcoast is the major partner, with YMCA Southcoast, in the Voices for a Healthy SouthCoast coalition, which works to address high smoking rates in our region, along with other healthy system and environment improvements. This past year, we developed a project to support smoke free public housing initiatives in our three largest communities, Fall River, New Bedford and Wareham, where smoking rates are close to double the state average. The project promotes policy change through the creation of completely smoke-free public housing, and supports this by utilizing the community health outreach worker model, with CHWs dedicated to public housing. Many health risk factors, including high smoking rates, are more prevalent among public housing residents in our region. This project is one of just 40 nationwide funded with a \$1 million award through the CDC small community transformation grant program. Southcoast is part of the leadership team that will supervise the project over the next two years.

Southcoast works with wellness advisers, who are embedded in public housing in all three communities. Southcoast will also provide on-site smoking cessation services for public housing residents who wish to quit.

4. Program: Cardiac Prevention

Target Audience:

Youth and adults who are at risk for heart disease, including ethnic populations and low-income populations, with a particular focus on middle school students and workplace wellness initiatives. Our program targets cities where heart disease rates are higher than the rest of the region and also targets businesses with high immigrant and lower income populations, such as local manufacturing plants.

Documented Health Need:

High rate of cardiovascular disease. The Southcoast region reports a significantly higher percentage of heart disease than the state of Massachusetts as a whole.

Heart Disease data	Greater Fall River	Greater New Bedford	Massachusetts
Incidence (hospitalizations)	478	511	419
Mortality rate	130	142	109
Heart Attack (MI)	226	230	194
By ethnicity:			
White	131.8	136.9	111.9
African-American	(Note: Numbers too	427.9	114
Hispanic	small for comparison)	113.2	56.8

Note: Geographic areas are based on CHNA regions — Partners for a Healthier Community for Greater Fall River and Greater New Bedford Alliance for Health and Wellness for New Bedford. These areas encompass the entire primary Southcoast geographic region.

Note: Rates are estimated by 100,000 population. Source: Massachusetts Department of Public Health, MassCHIP.

Behavioral risk factor data from the state indicate that both CHNA regions have higher than normal risk factors including rates of smoking, diabetes, high blood pressure and high cholesterol.

Collaborations:

American Heart Association, Fall River School Department, New Bedford School Department, Wareham School Department, Old Rochester Regional School District, Dighton Rehoboth Regional School District, Boys and Girls Clubs, YMCA, YWCA, Joseph Abboud Manufacturing, Duro Finishing, Councils on Aging, Greater Fall River Partners for a Healthier Community, Voices for a Healthy SouthCoast, Greater New Bedford Allies for Health and Wellness, Mass in Motion (Fall River and New Bedford), Mercy Meals and More, Fall River Housing Authority, New Bedford Housing Authority, Wareham Boys and Girls Club, Partners for a Heart Healthy and Stroke Free Massachusetts.

Goals for 2013

- Create pilot programs in mixed-aged, public housing in New Bedford working through the New Bedford Housing Authority.
- Create reports utilizing updated Cardiac Prevention database comparing results at screening sites in schools and workplaces.
- Continue involvement in "systemic" regional efforts on minimizing heart disease risk factors through involvement in regional coalitions such as Voices for a Healthy SouthCoast, Mass in Motion Fall River and New Bedford and Partners for a Heart Healthy and Stroke Free Massachusetts.

Benchmarks and Accomplishments:

Cardiac Screenings and Education:

This past year the Cardiac Prevention Program (CPP) provided screenings for 5,425 individuals— and our team performed more than 12,300 procedures including BMI screenings for 1,580 individuals during and the majority of these were not at goal. For example, 68 percent of workers at a local manufacturing plant were either overweight or obese. Work in area middle schools this year involved screening of 2,259 students in 12 middle schools in our region.

Our Cardiac Prevention program is staffed with a comprehensive health team that includes a full-time registered nurse trained in risk factor assessments including lipids, tobacco abuse, hypertension, diabetes, stress, obesity and obtaining family history, and a full-time registered dietician who performs cholesterol and lipid screening as well as dietary instruction. Screenings include blood pressure and blood sugar, cholesterol and BMI. In addition to screenings, the program includes an educational component. Screenings and education are repeated with the same audiences at six-month intervals. The program also has several long-term audiences, mainly at local manufacturers, and many of these residents have been followed over a number of years. All screening data is entered into a comprehensive database for future reference.

This year our Cardiac Prevention Team provided screenings and education for children and their families at a number of Family Nights at local schools. Many of these families were low income. Screening results indicated:

	Blood Pressure	Cholesterol	Weight
At goal	95%	78%	45%
Not at goal	5%	28%	55%

We target many at-risk youth and families through after school programs at the YMCA in New Bedford, the Fall River Kids Day, The Fall River Fitness Challenge and the Boys and Girls Club in Wareham. Education included the Food Guide Pyramid, how to read nutrition facts labels and the need for 60 minutes of physical activity daily.

We also provided education on the relationship between high consumption of sugar-sweetened beverages and heart disease at a number of venues including Family Days at several public housing complexes in New Bedford.

Our program continues to screen the underserved and immigrant population through workplace wellness initiatives such as one at Joseph Aboud Manufacturing in New Bedford. This textile plant has a primary female immigrant Portuguese, Spanish and Khmer workforce. We also serve Duro Finishing in Fall River, with a primary male immigrant Portuguese workforce, and Ashley Park Senior Center frequented by retired immigrant Portuguese men. This year we added several new companies including the local public transit company, Southeast Regional Transit Authority, where workers are at increased risk for chronic disease due to high stress and low rates of physical activity. We also provide screenings for Police and Fire Department staff in Fall River and New Bedford.

We continue to provide services to low income and reduced income housing such as public housing complexes in Fall River, Village Court in Mattapoisett complexes at the New Bedford Housing Authority and other assisted living facilities in the communities.

Policy Initiatives:

Our Cardiac Prevention Program actively participates in methods to achieve policy changes that will positively impact the living environment on the South Coast with a focus on promoting more active lifestyles, better nutrition and smoking cessation.

We play a large role in a number of initiatives including Healthy City Fall River, which is an effort to promote systemic changes in the city that focus on improving health and promoting wellness. Each year, we provide all screening health risk assessments and extensive education to more than 600 participants in the Fall River Fitness Challenge, an annual city-wide event that enrolls residents in a four-month weight loss and exercise program. Organizers have demonstrated that over the past four years, participants have lost four tons of weight.

Our Cardiac Prevention Team Leader continues to serve as the co-coach for the regional coalition, Voices for a Healthy SouthCoast.

Working with both Mass in Motion Fall River and New Bedford and Voices for a Healthy SouthCoast, our Cardiac Prevention team is assisting in the development of school wellness programs, safe routes to school and school and community gardens in the greater New Bedford, Fall River and Wareham areas. Both members of our Cardiac Prevention team sit on school wellness councils in Fall River, New Bedford, Dighton Rehoboth and also Old Rochester Regional School District.

Stroke Outreach

Goals for 2013:

- In partnership with the Health Disparities Division of the American Heart Association, continue to build a blood pressure monitoring and education program that targets residents of public housing in the city of New Bedford. This program involved the training of local "blood pressure mentors" by the Heart Association, who work with public housing residents to track blood pressure and provide education on blood pressure management.
- Recruit membership for a regional task force with leaders of the African-American community to address cardiovascular health disparities among African-American residents, particularly in New Bedford and Wareham.

Stroke is a leading cause of death and disability in cities and towns on the South Coast and research demonstrates that patients wait a number of hours after the onset of symptoms, which often eliminates treatment options such as administration of the clot-busting drug, TPA. Research also shows that residents in our region suffer from hypertension at a rate that is higher than the state average. Southcoast staff provide extensive education on recognizing the signs and symptoms of stroke

Our stroke outreach team provides extensive outreach in the community, including Southcoast Health Van visits to malls, shopping centers and other community settings, health fairs and events at local churches and other civic organizations.

Education is also provided regularly to local Emergency Medical Services groups.

The Stroke Outreach team distributes educational materials based on the Massachusetts Department of Public Health's FAST campaign, which is designed to help people recognize the signs and symptoms of stroke and act FAST. Materials include a refrigerator magnet with the signs and symptoms and a wallet card that allows residents to record and track their blood pressure. These materials were translated into both Portuguese and Spanish. To date, during the past several years, more than 20,000 cards and magnets have been distributed.

We also conduct monthly stroke support groups for the public at the Heritage Assisted Living Center in North Dartmouth.

The South Coast region has a significant African-American and Cape Verdean population who suffer from stroke at a rate higher than the rest of the population. This past year, we once agin targeted members of the African-American community through community events, such as a gospel festival and Cape Verdean festival.

5. Program: Health Disparities

Target Audience:

Those in our community who experience health disparities due to ethnic, racial and economic factors. These include ethnic groups such as Portuguese, Hispanic, Brazilian and Mayan and Cambodian Khmer communities, African-American residents and the large percentage of residents in our region who are either at or near the poverty level in terms of income.

Documented Health Need:

Socio-economic factors:

Health status indicators demonstrate a number of significant health disparities in our region:

Disease risk factors:

- Hispanic residents are significantly more likely than white non-Hispanic to be obese (27.0 percent v. 22.9 percent), a finding comparable to the state overall (33.5 percent v.22.7 percent). African American residents have even higher rates of obesity 42.5% of black residents in New Bedford are obese. These rates are almost double that of Hispanics and black residents statewide.
- The region's Hispanic population is disproportionately affected by high cholesterol, with 49 % of Hispanic residents in Fall River and 47 % in New Bedford reporting high cholesterol, compared with 37 % of residents statewide.

- Both black non-Hispanic and Hispanic residents have higher hypertension hospital discharge rates than white non-Hispanic residents (160.9 and 88.3, respectively v. 31.2 per 100,000 population).
- Hispanic residents are less likely than white non-Hispanic residents in the region to have had a clinical breast exam in the past two years (68.6 percent v. 87.1 percent), proportions similar to those of the state as a whole (78.4 percent v. 87.9 percent).
- Hispanic teens have a higher rate of teen births.

Chronic disease rates:

- Black non-Hispanic residents and Hispanic residents have a higher diabetes mortality rate than white non-Hispanic residents in the region (38.7 and 21.4, respectively v.17.6 per 100,000 population).
- Black non-Hispanic residents report almost four times the rate of heart disease than white and Hispanic residents (a rate of 644.6 per 100,000 population verses 187 for white residents.)
- Hispanic residents report a higher teen birth rate than others (66.4 v. 17.9 per 100,000 population white non-Hispanic, 33.8 black non-Hispanic, and 27.1 Asian non-Hispanic), though this rate is lower than Hispanic residents statewide (66.4 v. 73.2 in Massachusetts).
- Cancer incidence is three times higher among black residents in both Fall River and New Bedford (323.7 and 409.7 respectively, verses a rate of 190 for white residents in both cities.)
- Focus Groups of Hispanic and Portuguese residents revealed a number of concerns about health disparities and how they affect residents' abilities to access needed health services.

Economic and other disparities:

According to the 2010 U.S. Census, 13.1 percent of families in New Bedford and 12.8 percent of families in Fall River are below the poverty level, compared with 9.3 percent of families in the U.S. Our Focus Group participants felt that financial insecurity contributes to a host of health problems, as well posing a major barrier to obtaining needed health services and achieving better health. Many respondents in our focus group research believe that financial insecurity is the underlying cause behind the poor diet and exercise, smoking, alcohol and drug abuse, and stress, which constitute the community's major perceived health problems. They also believe a lack of financial resources is the primary barrier to accessing needed health services.

This is borne out by BFRSS data that shows that more residents in our region are unable to see a physician due to cost (12 percent for the South Coast region verses 8 percent for the state as a whole). Although the rate is higher on the South Coast, it has declined over the past decade while the statewide rate has risen.

There are also perceived language barriers to care. Many of our focus group participants believed that local hospitals do not have enough interpreters, which results in very long waits for care and rushed appointments. As one key informant explained, "That's still a big problem, having enough available translators and interpreters in providers' offices. ... They are rushing from patient to patient, and adding that layer, of language, [having to] coordinate getting someone into the appointment and then translating both ways. It just adds another layer of fear or mistrust of the health system."

Collaborations:

American Heart Association, Greater New Bedford Allies for Health and Wellness Health Equity Committee, Greater New Bedford Community Health Center, Health First Family Health Center, Immigrants Assistance Center, Catholic Social Services, SER Jobs for Progress, Partners for a Healthier Community, Health Access Collaborative, Roosevelt Middle School in New Bedford, New Bedford Boys and Girls Club, Mercy Meals and More, Wareham Homeless Coalition and the New City of New Bedford Bedford Health Department.

Goals for 2013:

- Provide training and technical assistance for Community Health Workers involved in Health Equity grant project, along with other community CHWs.
- Develop a regional Health Equity Resolution, which will map healthy equity goals for Southcoast communities.
- Conduct a second regional health equity summit.
- Conduct a regional healthy equity data analysis as part of our comprehensive health needs assessment.
- Play a leadership role in the organization of a regional community health worker task force, with a focus on expanding CHW training and job opportunities for CHWs on the South Coast.
- Explore new links between community-based CHWs and Southcoast Health System clinical staff including Southcoast Physician Group (SPG) practitioners.

Benchmarks and Accomplishments:

Interpreter Services:

The South Coast is a very diverse region, with residents representing a number of languages and cultures. As an illustration of this, our Emergency Departments at our three hospitals annually have requests for more than 15,000 interpreter encounters in 25 different languages. Our Emergency Departments, which serve some 200,000 patients each year, are often the only health care option for the many undocumented immigrants in our region. Even within languages such as Spanish and Portuguese, which are the predominant second languages in our region, there are many subcultures representing highly different dialects and customs.

Our Interpreter Services Department also provides translation services to residents who need assistance at physician appointments, and also assists with health education programs sponsored by the hospital and in the community.

Health Access Collaborative:

Southcoast Hospitals Group is a founding member and contributor to Health Access Collaborative, a greater Fall River/New Bedford Collaborative to achieve cultural competency within and among health care member organizations and for the clients they serve. Specific goals include cultural competency training, interpreter training, and development of monitoring procedures for interpreter services and cultural competency for member organizations.

The group regularly creates and presents a range of training materials for local medical interpreters. The collaborative has also adopted a Cultural Competency Plan for its members.

Health Equity Project:

This project is a joint effort of Southcoast, the Greater New Bedford Allies for Health & Wellness (CHNA 26) and the regional office of the Massachusetts Department of Public Health. Major funding includes five-year, \$375,000 funding from Southcoast that is part of Determination of Need community linkage funds, along with a commitment of an additional \$40,000 for the first two years of the project. The initiative is designed to address health inequities in the Greater New Bedford region, including access to health care, health literacy, disease prevention and chronic disease management and social justice issues, through expansion of the health outreach worker model. The initiative is primarily designed to address and expand to address other health disparities as well.

In addition to funding this project, Southcoast's community benefits manager serves as co-chair of the GNB Allies Health Equity Committee which oversees the work of the grant and other regional health equity projects.

The Health Equity Committee awarded grants to three pilot projects that have expanded community health outreach workers at the regional Immigrants Assistance Center, the YWCA of Southeastern Massachusetts and Coastline Elderly Services. The Healthy Equity Committee also began work with the regional Fishermen's Partnership in efforts to reach out to local fishing families. The committee also held a regional health equity summit that was attended by over 75 people. The summit examined issues such as transportation, education, immigration and social and environmental justice.

The Health Equity Committee created a regional health equity resolution that will be introduced at a second Health Equity summit planned for this fall.

6. Program: Maternal Child Health outreach

Target Audience:

Families, including pregnant women, fathers, siblings and new parents, particularly teen mothers and mothers who smoke.

Documented Health Need:

Our programs address:

- The high rate of smoking among pregnant women in our region (19.9 percent, 17.3 percent and 20.3 percent respectively in our largest communities of Fall River, New Bedford and Wareham as compared to 7.4 percent in Massachusetts overall).
- Low birth weight and low breastfeeding rates. The low birth weight rate (less than 2,500 grams) is 9.4 percent in Fall River and 11.1 percent in New Bedford compared to 7.8 percent for the state. Fall River and New Bedford are two of the three Massachusetts communities with the lowest proportions of breastfeeding mothers (44.7 percent and 54.5 percent as compared to 79.3 percent statewide).
- High rates of teen pregnancy.

Collaborations:

Greater New Bedford Alliance for Health and Wellness, Greater New Bedford Community Health Center, Boston Medical Center HealthNet (health insurance company).

Goals for 2013

- Continue to provide educational support for smoking cessation and breastfeeding among pregnant women.
- Work with GNB Allies Health Access committee to begin postpartum depression support groups.

Benchmarks and Accomplishments:

Smoking Survey

We continued our partnership with the Greater New Bedford Community Health Center to refer pregnant moms who smoke to a new smoking cessation program at the health center. We work with the Wellness Director at the Health Center to distribute information about this specialized program and to refer our clients who smoke.

Breastfeeding Initiative

We partner with BMC HealthNet, the largest provider of health insurance to MassHealth and Commonwealth Care residents in our region of childbearing age, to expand childbirth education enrollment among BMC HealthNet enrollees. We also introduced a more extensive component on breastfeeding, with certified lactation consultants on staff at our hospital. Mothers who take these classes are more prepared to breastfeed following delivery and can again receive support in the hospital from our lactation consultants. We also conduct regular breastfeeding support groups targeting underserved women. We subsidize these programs so there is not a financial barrier for low-income women. **Post-partum Depression Education:**

Southcoast is part of a regional Health Access Committee that is focusing on post-partum depression and is working to establish support groups for local women. This past year Southcoast hosted a regional conference on post-partum depression, attended by over 100 practitioners and the goal is to establish support groups during 2014.

7. Program: Health Access Outreach/Patient Financial Services

Target Audience:

Residents who lack health insurance or may need to renew public insurance plans. Residents who have lost their employment and as a result, their health insurance.

Documented Health Need:

Due to extremely high unemployment rates in the South Coast region (New Bedford has one of the highest rates in the state at 12 percent and Fall River is close behind at 11 percent), we have experienced high numbers of residents who have lost their health insurance or lack insurance.

Contributing to this is the lack of awareness among residents who have state-subsidized health insurance for the first time and needed to complete renewal papers. As a result, many local residents lose their health insurance and are not aware of this.

As a result, the South Coast has a higher rate of uninsured residents than the state as a whole (11.6 percent for our region verses an estimated three percent for the state).

Collaborations:

Councils on Aging (for senior health insurance assistance), Boston Medical Center HealthNet, Neighborhood Health Plan, PACE, Citizens for Citizens, Healthcare for All, St. Anthony of Padua Soup Kitchen, New Bedford, Greater New Bedford Community Health Center, Wareham Social Services Department, Stanley Street (SSTAR) and Partners for a Healthier Community.

Goals for 2013

- Continue to work with public housing and other at risk residents who still lack, or have lost their health insurance.
- Work with the Fishing Partnership to enroll fishing families who often lose health insurance due to the uncertain economics of the fishing industry.

Benchmarks and Accomplishments:

Outreach for Health Insurance:

Our Patient Financial Services Department provides outreach and support for area families who lack health insurance, signing them up for appropriate policies and also helping them renew policies annually. Our patient outreach specialists provide outreach services at events throughout the region that target the underserved and also participate on our Southcoast Health Van at regular health insurance enrollment programs at public housing, soup kitchens and other sites throughout the region. Specialists also work with local homeless service agencies, such as Turning Point in Wareham, to assist homeless residents in obtaining and most importantly retaining their health insurance.

Patient Financial Services processed in 2012:

- 3207 Virtual Gateway applications, a six percent increase over last year.
- 4001 manual MassHealth applications, a three percent increase over last year.
- 64 disability applications.
- 73 long-term care applications and 782 medical security applications (BMSP). These are applications by unemployed residents who have lost their health insurance. Although this number declined slightly over previous years, it still is about 50 percent higher than normal, due to a high unemployment rate in our region.

To help address the educational need for families who need to renew their insurance each year, our staff contacted 1503 households from June to September to offer assistance in filing redeterminations to avoid potential termination of benefits for Masshealth & Health Safety Net. This was double the number of families that we contacted last year.

Senior Whole Health letters were mailed to 2143 elders to encourage Senior Care Options enrollment.

8. Program: Health Advocates: Substance Abuse Intervention

Target Audience:

Emergency Department patients who abuse, or are at risk for abusing drugs, alcohol tobacco or other substances.

Documented Health Need:

The South Coast region has a higher rate of admissions than the state overall with regard to substance abuse treatment programs. Our Emergency Departments (ED) are some of the busiest in the state, with volumes approaching 200,000 patients annually at our three EDs combined.

Substance abuse admissions	Southcoast	State
Fall River (CHNA 25)	4,023	1,621
New Bedford (CHNA 26)	2,673	1,621

Note: Rate is per 100,000 population. Source: MassCHIP.

The South Coast region has a higher proportion of opioid-related ER visits and fatal overdoses than the state of Massachusetts as a whole. Specifically, the South Coast region reports a rate of 195.7 for opioid-related emergency department visits, a rate significantly higher than the state's (181.1). In terms of race

and ethnicity, white non-Hispanic residents in the South Coast are more likely than those in the state overall to have an opioid-related ER visit (200.6 v. 186.8 in state overall).

The South Coast region also reports a higher rate of opioid-related fatal overdoses than the state as a whole (10.1 v. 8.1).

Local providers also report a high rate of prescription drug abuse on the South Coast, and advocate for the need for education for the general public about the dangers of the improper use of prescription drugs and the risk of abuse by youth and others in families where prescription drugs are not properly stored or disposed.

Collaborations:

Fall River Health Department, Positive Action Against Chemical Addiction (PAACA), Stanley Street Treatment and Resources (SSTAR) Health Center, BOLD Coalition, Interchurch Council, Massachusetts Department of Children and Families, High Point Addiction and Treatment Center, AdCare, University of Massachusetts, Dartmouth.

Goals for 2013:

- Expand numbers of patients served with our Emergency Department programs by 10 percent.
- Continue to collaborate with the BOLD Coalition on a community and provider education program targeting prescription drug misuse.
- Coordinate an educational program on prescription drug misuse for Southcoast physicians and other providers.

Benchmarks and Accomplishments:

Our program is based on a nationwide intervention program, which studies have shown to be effective in inducing patients to seek help for substance abuse issues. Emergency Department (ED) Staff receive training in how to interview ED patients about their substance use and talking with them about how to reduce harmful patterns and provide referrals for substance abuse treatment. Referrals include treatment for drug or alcohol abuse or smoking. Our staff also has follow-up phone conversations with patients who have received referrals.

The program is well utilized in all three of our Emergency Departments and staff also provided extensive community outreach. We have expanded the program from three to five health advocate staff and partnered with SSTAR to provided screenings in our Emergency Department at Charlton in Fall River, in association with Project Assist. This is part of a grant that SSTAR received to provide screenings and interventions for families who may be at risk for substance abuse.

Our team also presented a number of community programs on substance abuse issues to local schools and police departments. We also serve as a resource for the University of Massachusetts Dartmouth's student health office and we are regular participants in a monthly Massachusetts Department of Child & Family Services Substance Abuse Task Force. Services provided through this task force included screening and referral intervention for DCF clients.

During this past year, the Health Advocates team:

- Assessed 3,022 patients.
- Conducted 1,178 brief negotiated interviews.
- Made 258 inpatient referrals and 428 outpatient referrals for substance abuse treatment, a 200 percent increase over the previous year.

- Made 41 referrals to QuitWorks for smoking cessation.
- Helped facilitate 100 referrals for patients who lacked a primary care physician.

Many of these patients are frequent visitors to our Emergency Departments, with some visiting over 10 times in the past year and several visiting over 30 times. With intervention by the Health Advocates, care for these patients was better coordinated, including referral to appropriate treatment facilities and community-based programs and follow-up.

This program is funded by Southcoast and also receives grant support from community partners, including PAACA, SSTAR and the City of Fall River.

Prescription Drug Education:

Members of our Health Advocates team were part of a project organized by the BOLD Coalition in Fall River to educate key segments of the public about the misuse of prescription drugs. Southcoast helped fund, and participated in an educational campaign that features video and educational programs that target seniors and youth.

9. Program: Voices for a Healthy Southcoast

Creating healthier communities depends a great deal on the environment that people live in — their homes, neighborhoods and wider communities. Southcoast is leading, or collaborating with community partners on a number of initiatives that promote active lifestyles and healthier nutrition and pollution-free environments for all residents in our region — helping to make healthy choices the easy choices no matter where you may live.

Voices for a Healthy SouthCoast is a regional coalition whose mission is to build and support healthy lifestyles in South Coast communities. The coalition aims to achieve this by working together and advocating for policy, practice and environmental change in order to sustain vibrant communities that are conducive to healthy living. Southcoast is the co-leader in this effort with YMCA Southcoast.

We recognize that many chronic diseases and health problems that afflict area residents are related to significant risk factors such as obesity, sedentary lifestyles and high rates of smoking.

In collaboration with community partners, we have introduced a number of initiatives to address these risk factors. These programs focus not only on educational efforts, but also efforts to influence policy and environment changes that aim to make healthy lifestyle choices the easiest lifestyle choices for the majority of local residents. Residents in several of our cities, namely Fall River and New Bedford, often lack access to healthy nutrition such as fresh fruits and vegetables and safe and inexpensive exercise options. These communities also have extremely high rates of smoking.

Significant health disparities exist in our region, evident both in chronic disease rates and mortality and also in the risk factors that contribute to these problems.

Southcoast has assumed a leadership role in several regional coalitions to address these issues, including Voices for a Healthy SouthCoast, Mass in Motion and a Health Equity initiative in Greater Bedford. Our initiatives often target specific populations on the South Coast, such as ethnic and other minorities and low-income residents, under- or uninsured, those without access to care, those at risk for heart disease and "at risk" youth.

Target Audience:

South Coast residents who have high rates of obesity or smoke and have low rates of exercise — particularly at-risk populations of schoolchildren and low-income residents in the cities of Fall River and New Bedford — where data show these risk factors to be higher that the region as a whole.

	Overweight	Obese	Regular exercise	Fruits and vegetables	Smoking
Fall River	62%	25%	47%	22%	26.5%
New Bedford	61%	23%	49%	24%	22%
Massachusetts	55%	19%	52%	29%	18%

Collaborations:

YMCA Southcoast, Acushnet Company, American Heart Association, Catholic Social Services, Healthy Cities Fall River, Hunger Commission of Southeastern Massachusetts, National Park Service, City of New Bedford Office of Planning, City of New Bedford Health Department, Seven Hills Behavioral Health, Massachusetts Department of Public Health, Immigrants Assistance Center, Southcoast Regional Pathways Coalition, New Bedford Economic Development and Planning Authority.

Goals for 2013:

- Continue to increase awareness of local bike path development and connection, including work with local physician groups to promote wellness messages to patients including development and use of a "wellness prescription pad" and distribution of exercise and healthy food options in the community.
- Help lead the efforts to create smoke-free housing through the Voices community transformation grant.
- Expand Farmers Markets to provide SNAP as well as WIC benefits for low-income residents.

Benchmarks and Accomplishments:

Promote community prevention through partnerships and policy change.

The major goal for Voices for a Healthy Southcoast is to help enact environmental and policy change that helps promote healthy lifestyles and disease prevention in a sustainable wa. During the past year, the coalition engaged in a number of activities in advocacy for this goal and also to increase awareness of its mission.

Advocacy:

- Our Voices Coalition was recognized this year by the Massachusetts Public Health Council with the Council's community leadership award for promoting community prevention through partnerships and policy change.
- Voices actively advocated through local Boards of Health and other regulating bodies for new smoking regulations in cities and towns on the South Coast and also for municipal support for new bicycle paths.
- Several Southcoast staff, who are also part of Voices, actively participate in a number of school wellness councils helped school departments develop nutrition policies for school cafeterias.

Awareness:

- The Voices Coalition helped form and actively participate in a regional community bike and walking pathways committee that now meets monthly.
- Through work on the Voices Cancer Prevention project, the group worked to assist local workplaces and schools in health vending machine policies and practices and conducted a healthy vending machine training that was attended over 25 people. The group actively solicited local companies to adopt healthy vending practices.
- Sugar-Free Beverage Challenge: Southcoast and Voices actively participated in a regional sugarfree beverage challenge that engaged youth and families throughout the region during the summer of 2012. There was a particular focus on youth in public housing. Several thousand youth were reached and educated with graphic illustrations of the amount of sugar in soda servings and a "taste test" of water with sugar.

The Fall River Fitness Challenge:

Southcoast annually collaborates with the Fall River Fitness Challenge, which engages more than 600 residents each year in a four-month program to lose weight and get fit. The Challenge involves weekly programs and offers residents discounts and low cost options to get active and improve nutrition. Southcoast provides biometric screenings for participants and assists with some challenges. To date, participants have literally lost tons of weight.

Walking Programs:

In partnership with the American Heart Association and the Massachusetts Department of Conservation and Recreation, Southcoast sponsors a well-used walking path in the city of Fall River at Heritage State Park. As part of this sponsorship, Southcoast is providing walking maps and information in the park center and sponsors regular programs for local families, including a KidFit program this past year.

The dual purpose of this program is to link our physicians with opportunities for wellness and prevention, and also highlight the benefits of walking and the many opportunities for doing this on the South Coast. We partner monthly with outdoor, historic, parks and community groups to highlight great recreation spots. This program is extremely population, with an average of 70 walkers attending each month. The program will be expanded to include a walking newsletter and social media efforts to promote a walking community.

Farmers Markets:

Southcoast introduced Farmers Markets in 2012 at all of our hospital and business sites, giving employees and the community the opportunity to sample fresh vegetables and fruits from local farmers. This year the Farmers Markets expanded to include a community agriculture share program along with weekly markets at four Southcoast sites throughout the Southcoast. The markets and CSA shares are open to the general public as well as employees and WIC coupons (for low income women and children) are accepted at each market.

10. Program: Southcoast Health Van

Target Audience:

South Coast residents who lack access to regular primary and preventive health care, particularly populations who have language, income or geographic barriers to accessing care.

Documented Health Need:

Lack of access to regular primary and preventive health care.

Collaborations:

The ESL Program (English as a Second Language) in New Bedford and Taunton, which serves a diverse group of immigrants, Adult Learning Programs on the South Coast and the Immigrant Assistance Center in New Bedford, YWCA Women's Health Program and the local YMCA of New Bedford and Middleboro, The Cambodian Center in Fall River, PYCO (Portuguese Youth Center Organization), Bristol Elder Services, and local colleges. Also, Diman Vocational High School in Fall River, Somerset High School, Westport High School, Old Colony High School in Rochester, Wareham High School including the alternative high school, and Apponoquet High School in Lakeville.

Goals for 2013:

- Continue efforts to target residents most at need including additional visits to homeless shelters and food programs.
- Establish an ongoing program with the New Bedford Housing Authority to provide monthly screenings and education at three mixed housing complexes.
- Expand teen clinics in collaboration with the Southcoast RAPPP program.

Benchmarks and Accomplishments:

The Southcoast Health Van continued to play a major role in health outreach in our region, Some 2,669 residents visited the van this past year, benefiting from more than 7,619 health screenings including Cholesterol, blood pressure, blood sugar, BMI, bone sonometry, oral cancer, pregnancy testing. Health information was provided for stroke prevention and cancer education on breast, skin, cervical, prostate, lung, colon cancers. Van staff also made referrals for health services and insurance.

The Southcoast Health Van is licensed by the Massachusetts Department of Public Health and provides free health screenings and education in a number of highly visible and accessible sites though the region offering services including blood pressure, blood sugar and cholesterol, colorectal and vision screening, bone density screenings, pregnancy testing and extensive health education. We also make regular referrals for primary care and for residents who lack health insurance.

Our annual data shows that approximately 26 percent of residents screened have abnormal blood pressure and 29 percent have abnormal cholesterol levels. Seven percent have abnormal blood sugar levels. Our van staff provides extensive education on these risk factors along with referrals for ongoing primary care services.

The van also offers a range of cancer screenings and education on cancer prevention, including distribution of colorectal cancer screening kits. There is a low rate of recommended colorectal screening in our region, due to cultural and health access barriers. Kits distributed on the van are processed free of charge at the Southcoast Hospitals lab and provide a basic level of screening that is accessible to all residents.

The Southcoast Health Van also distributes Stroke Awareness kits, in conjunction with the FAST campaign by the Massachusetts Department of Public Health. This campaign is designed to help residents recognize the signs and symptoms of stroke and act FAST in obtaining treatment. The van targets African-American residents, who have a high incidence of stroke, at several annual community events, including a Gospel Festival and a regional Cape Verdean festival in Wareham. In addition to English, materials are also distributed in Portuguese and Spanish.

Reaching the Underserved:

The Southcoast Health Van serves an ethnically diverse population including Portuguese, Brazilian, Hispanic, Mayan Kichie and Cambodian immigrants. Health Van staff also work closely with cultural organizations, churches and other community groups such as soup kitchens, to conduct outreach to

diverse populations in order to develop culturally sensitive programs. During the past year we made regular visits to local food programs for homeless residents in Fall River, New Bedford and Wareham. Often, the health van is the only health prevention related encounter for these residents.

The Southcoast Health Van began an active partnership this year with the New Bedford Housing Authority, providing monthly screenings and education at a number of housing sites throughout New Bedford. Many public housing residents lack regular primary health care and the van has served as an important link for other needed health services for these residents. Van staff provide language appropriate communication and services since many residents do not speak English.

Van staff also formed an active collaboration with the Massachusetts Fishing Partnership, which serves over 5,000 local fishermen and their families in the Greater New Bedford region. Fisherman have difficulty accessing regular preventive health care because their working lives often take them away unexpectedly. So working with community health outreach workers who are part of the partnership, the van was able to provide essential preventive care to large numbers of fishermen, including screenings and flu shots.

Other initiatives on the van include services to the ESL Program (English as a Second Language) in New Bedford and Taunton, which serves a diverse group of immigrants, a population with significant risk factors for a variety of diseases as well as educational, cultural and other barriers that limit access to routine primary health care. Van staff also collaborates with the Adult Learning Programs and the Immigrant Assistance Center in New Bedford. Health Van staff has also worked in collaboration with the YWCA Women's Health Program and the local YMCA of New Bedford and Middleboro. In Fall River, the Health Van works in conjunction with the Cambodian Center, PYCO (Portuguese Youth Center Organization), Bristol Elder Services, and local colleges. During the past year the Van also worked with the Fall River, New Bedford, and Wareham Business Associations to target business communities in the South Coast. The Van also works closely with Catholic Social Services on outreach efforts.

The Southcoast Health Van offers a Teen Program at several high schools in the South Coast region, providing adolescents with a range of health screenings and health information. Local family planning agencies work with van staff to provide counseling on sexually transmitted diseases (STD) and pregnancy prevention and confidential pregnancy testing. This information and education to teens has resulted in improved follow up rates and reduced rates of repeat pregnancy tests. Southcoast Health Van staff work with teachers to reach students with health educational material and health screenings.

This year, van staff began an additional clinic at our RAPPP program offices in New Bedford, serving a large teen population at both Greater New Bedford Regional Vocational School and also New Bedford High School. This is in collaboration with Child and Family Services of New Bedford.

11. Program: Cancer Outreach

Target audience:

General public and particularly racial, ethnic and other groups who are at higher risk for certain type of cancer or who get cancer at a rate higher than the rest of the population.

Documented Health Need: Cancer Incidence

Cancer	Fall River (CHNA 25)	New Bedford (CHNA 26)	Massachusetts
Lung	101.6	94.8	83.4

Colon	64.4	61.4	60.3
Prostate	143.9	173.2	165.1
Breast	112.3	117.6	132.3

Note: Rate is per 100,000 population.

Lung and colon cancer rates are for males. Rates for females are below or at the state average.

Collaborations:

American Cancer Society, Fall River Health Department, Partners for a Healthier Community, New Bedford Board of Health, Wareham Board of Health, Greater New Bedford Community Health Center, Health First Family Health Center, Inter-Church Council, Fisherman's Cooperative, New Bedford, O'Jornal, Radio Voice of the Immigrant (WHTB).

Goals for 2013:

- Expand screenings targeting at-risk residents who may lack access to health screenings, particularly in public housing and through the Fishermen's Partnership.
- Continue a survivorship event focusing on issues faced by cancer survivors.
- Develop cancer education kits for distribution on the Southcoast Health van, which reaches many underserved in our region.
- Collaborate with the Greater New Bedford Allies community health outreach worker (CHW) project on cancer prevention outreach through CHWs.

Benchmarks and Accomplishments:

Skin Cancer:

We provide skin cancer education and screening events in Fall River and New Bedford. We screened more than 200 residents and referred a number for follow up treatment. We also provided education in collaboration with the American Cancer Society, utilizing a special machine that graphically demonstrates skin damage caused by sun exposure.

Breast Cancer:

We provide breast cancer education annually at a number of events including a health fair for women, a senior health fair and a women's health day at our main Breast Health Center. We also offer free mammograms for uninsured women during October, which is breast health month.

Lung Cancer:

We provide extensive information and programming on smoking cessation and prevention.

Head and Neck Cancer:

We provide annual head and neck cancer screenings on the Southcoast Health Van in an attempt to reach underserved residents who may be at higher risk for this type of cancer due to a history of smoking and other risk factors. This past year we started a screening program on the van which targets fishermen working in the port of New Bedford. We did this in collaboration with the Fishing Partnership and provided the screenings with the van located on the main fishing pier in New Bedford.

Survivor Event:

More than 200 cancer patients and their families attend a regional cancer survivor event held annually. Those attending have the opportunity to celebrate their survivorship and to attend a variety of lectures

meet support staff from our Cancer Center and from a range of community agencies that work with cancer patients.

12. Wareham Leadership Council to Prevent and End Homelessness

Documented Need:

Research indicates that the there is a high number of unsheltered homeless resident in the town of Wareham, as reported during the annual national homeless count undertaken each winter on the South Coast and nationally. Estimates are there are as many as 50 unsheltered homeless in town, including a number of homeless youth. The annual count revealed that the numbers of unsheltered homeless in Wareham approach the count in New Bedford, which has almost quadruple the population.

Collaborations:

Turning Point, Wareham Area Clergy Council, Massachusetts Department of Mental Health, South Shore Housing, Wareham Housing Authority, Wareham Police Department, Wareham Board of Selectmen, Wareham District Court, A.D. Makepeace Co., Canal Region Chamber of Commerce, Massachusetts State Representative Susan Williams Gifford,

Benchmarks and Accomplishments:

Southcoast staff have taken leadership roles in a coalition that has created a comprehensive plan to end and prevent homelessness in town. The plan will be introduced to the community this year and includes a series of working groups which will meet to better coordinate care and expand both housing and services for homeless residents

Benchmarks for this upcoming year include increasing housing for homeless residents by two units and creating formal Memorandums of Agreement to formalize collaboration in the areas of Housing, Interventional Services, Employment and Income and Prevention.

13. Emergency Preparedness:

Need:

South Coast cities and towns have faced significant budget cuts in recent years due to the economic recession and have turned to Southcoast Health System for assistance with emergency preparedness needs, including equipment and technology, training, regional drills and flu preparedness.

Goals for 2013:

Collaborations:

Boards of Health, Police, Fire and Emergency Medical Services Departments in cities and towns on the Southcoast.

Benchmarks and Accomplishments:

Southcoast has assisted with purchase of equipment and technology including technology to allow the town of Rochester to upgrade emergency medical services to the paramedic level and the donation of an small emergency vehicle for the City of New Bedford to be used at events with large crowds.

Southcoast plays a leadership role in a number of regional emergency preparedness drills.

Southcoast also provides extensive assistance in flu vaccination, providing free flu immunizations on the Southcoast Health Van, in public housing and in collaboration with local Boards of Health.

Southcoast also makes its annual Community Benefits Report available on its own Website, along with an archive of reports from prior years.

14. Diabetes Education and Outreach:

Documented Need:

The Southcoast has a high rate of diabetes and also diabetes hospitalizations, particularly in the cities of Fall River and New Bedford. Diabetes contributes to high rates of other chronic diseases such as heart attack and stroke. Diabetes relates to excessive rates for contributing risk factors such as obesity, lack of exercise and poor nutrition.

Collaborations:

People Inc./Diabetes Association, Fall River. New Bedford Housing Authority. Mercy Meals and More.

Goals for 2013:

• Increase targeted outreach to the Hispanic population in our region, which has a higher rate of diabetes than both the state and the non-Hispanic population on the South Coast.

Benchmarks and Accomplishments:

Southcoast this year, with funding from a demonstration grant through the Blue Cross Foundation, began a program that links community health workers (CHWs) who are embedded in Southcoast communities, with the Southcoast Diabetes Management team and Southcoast primary care physicians in an effort to better manage targeted diabetes patients. Those patients chosen have language or other barriers that make it difficult to adhere to the best standards of care.

CHWs, most of whom are bi or tri-lingual in English, Spanish and Portuguese, will spend time weekly with selected patients and become part of a diabetes management team with the patient's physician and certified diabetes educators. The goal of the project is to help patients reduce their A1C levels by one percent during the course of the program. Another goal is to increase physician knowledge about the role of the CHW as part of a patient care team.