



Health and Healthcare on the Southcoast

Leadership Southcoast

Wednesday, June 10, 2015



Southcoast Health





Health and the Community: Community Benefits

- Voluntary guidelines that foster cooperation and collaboration between health care institutions and the communities they serve.
- An important part of not-for-profit hospitals charitable mission.
- Almost 20 years old. Revisions adopted in 2010.
- Health plans and hospitals have used innovative approaches to address difficult public health issues and significant unmet community health needs.



Community Benefits Focus

Statewide

- Support healthcare reform
- Chronic disease management
- Reducing health disparities
- Promoting wellness in vulnerable populations

In each community and hospital

- Mission driven
- Investment at all levels of the organization
- Extensive community input and collaboration
- Driven by needs assessment
- Targeted populations
- Short and long term goals that are evidence based.



Health and the Community: Community Benefits

Mission

Southcoast Health System's mission is to promote the **optimal health and well-being of individuals in the communities** we serve.

Community Benefits Mission:

Southcoast Hospitals Group, including Charlton Memorial Hospital, St. Luke's Hospital and Tobey Hospital, is committed to **improving the health status of the communities we serve**, by identifying pressing health needs and collaborating with community partners to prioritize and meet those needs.



Community Impact

- Directly reached close to 500,000 residents
- Reached vulnerable residents with over 21,000 health screenings and education for more than 3,300 people
- Targeted outreach helped over 9,000 residents obtain or keep their health insurance
- Work to address youth risk behaviors was recognized with the receipt of a competitive \$500,000, three-year federal grant targeting minority young males
- Innovating community-clinical connection with addition of community health workers to clinical teams



Financial Contribution

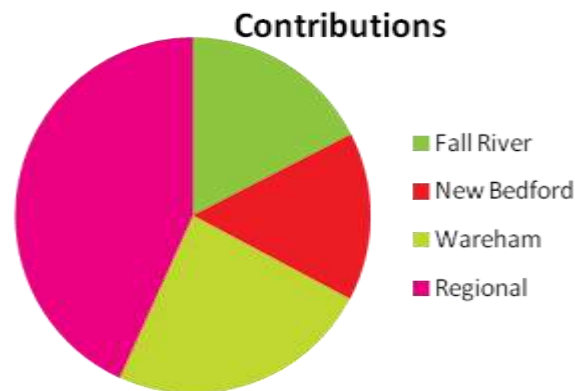
Program	FY 2013 expenditures	FY 2014 expenditures
Community Benefits Programs	\$13,953,256	\$10,847,447
Other leveraged resources	\$995,981	\$568,529
Net Charity Care	\$8,206,540	\$9,854,576
DON Linkage	\$95,000	\$95,000
TOTAL	\$23,376,553 (3.4%)	\$21,435,727 (3.2%)



Community Benefits Grants

Over \$435,000 to community agencies and programs.

Supported various projects aligned with community benefits goals including CHW projects, youth risk behaviors, emergency preparedness, chronic disease management, health and wellness initiatives.





[www.southcoast.org/ communitybenefits](http://www.southcoast.org/communitybenefits)

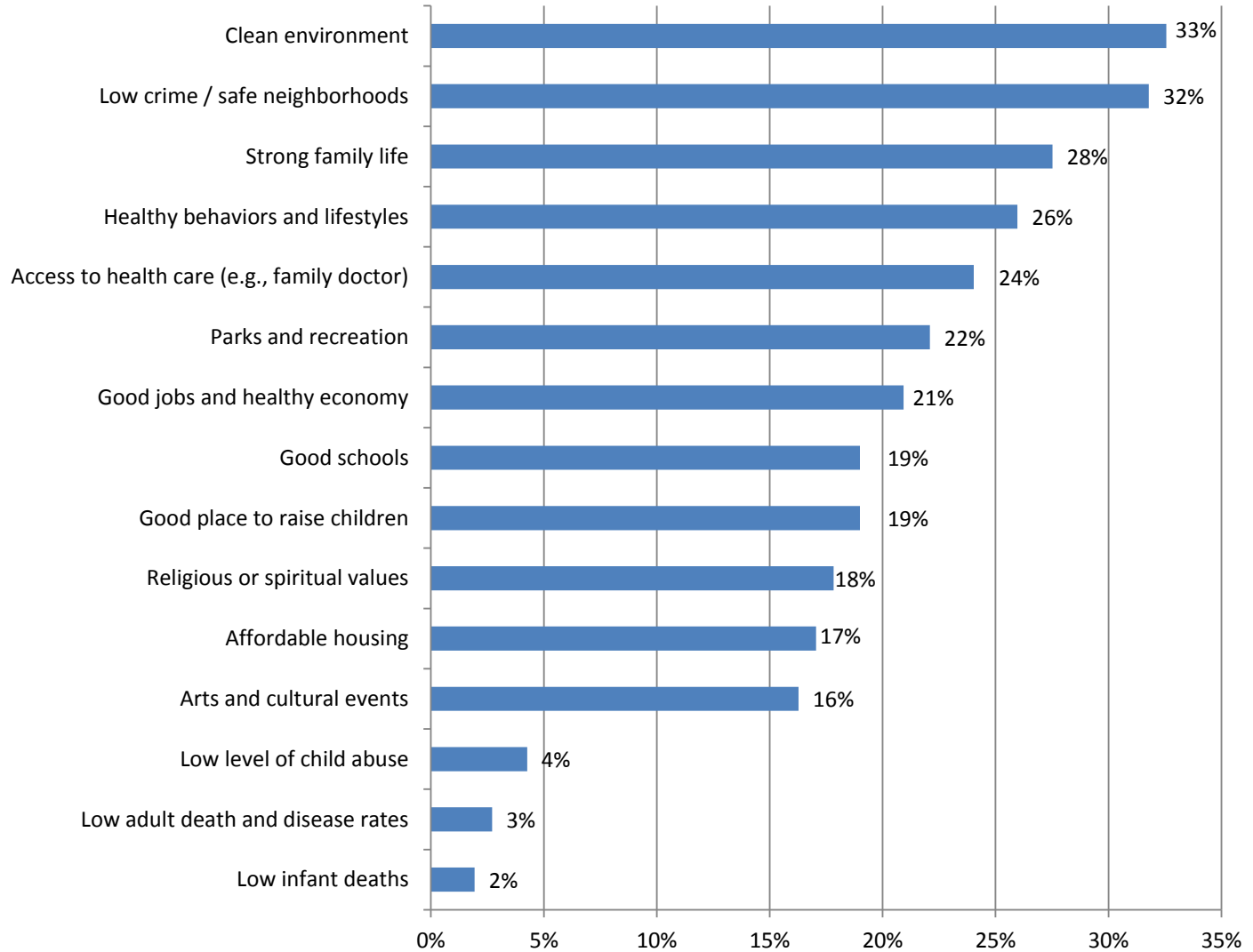
Smoke Free Park



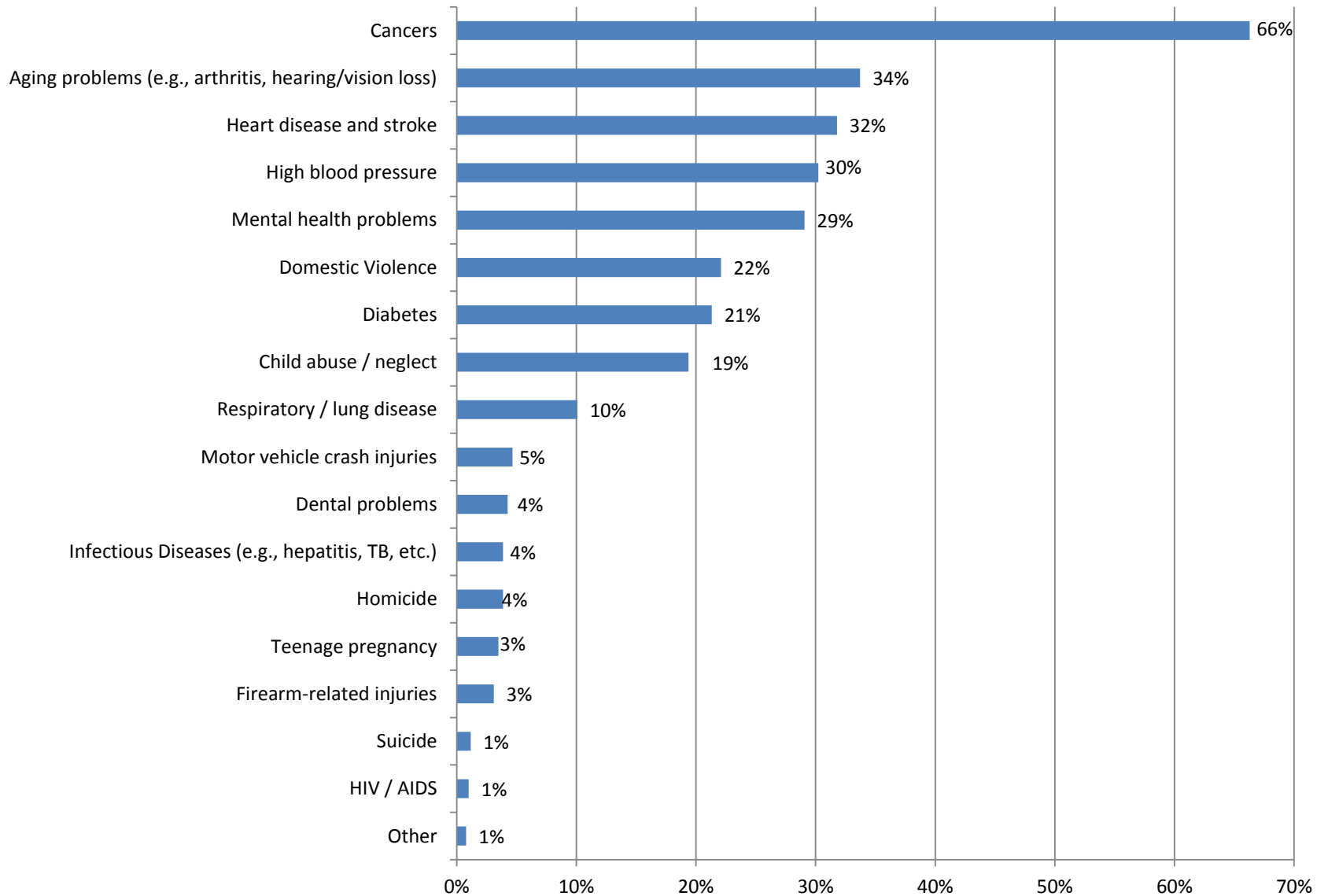
take a step
toward a healthy heart



In the following list, what do you think are the three most important factors for a “Healthy Community?” (Those factors which most improve the quality of life in a community).



In the following list, what do you think are the three most important “health problems” in our community?
(Those problems which have the greatest impact on overall community health).





Health Challenges

	Smoker	Overweight	Obese
Fall River	33	63.3	28.4
New Bedford	20	65.3	28.1
Massachusetts	17	57.3	19.4
U.S.	18	63.1	34.9

Other Health Challenges

Cardiovascular Disease Mortality per 100,000

	All Causes	Coronary
Fall River	96.6	63.2
New Bedford	95.7	59.4
Massachusetts	60.7	35.6

Source: BRFSS, via MassCHIP, 2005-2013

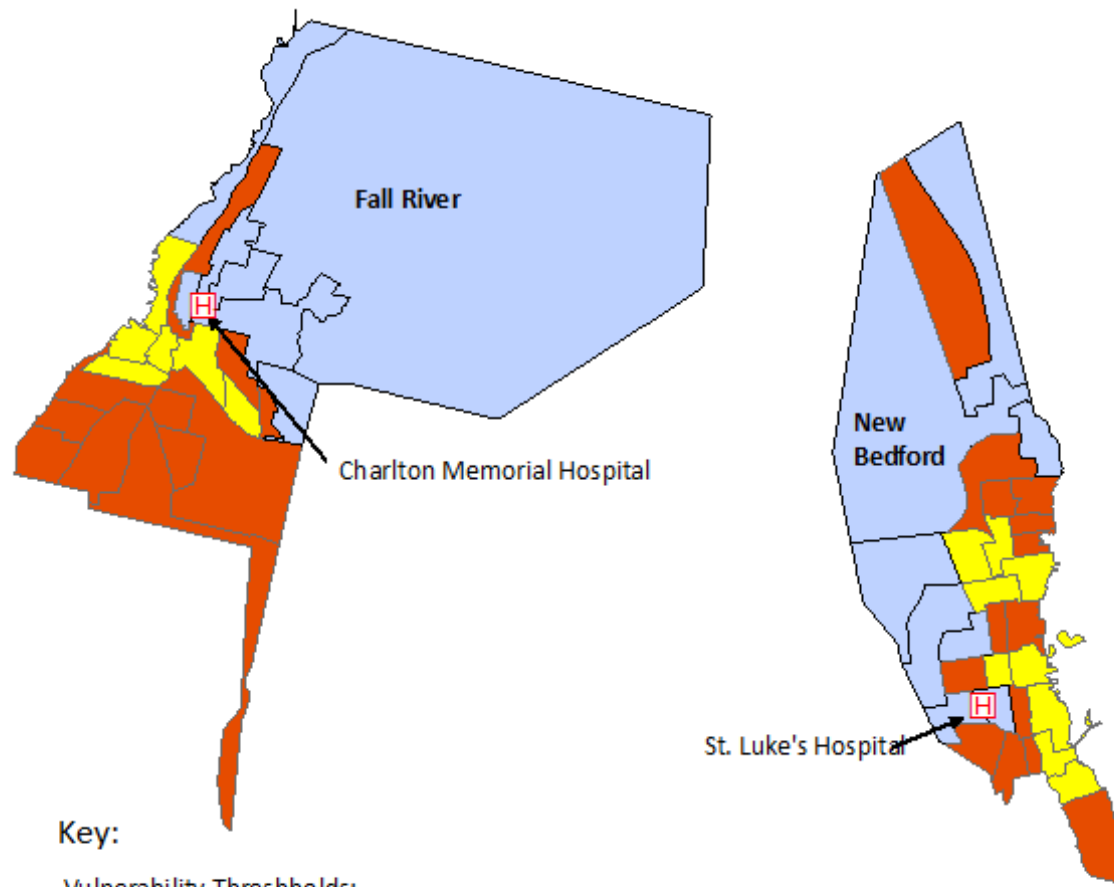
Other Health Challenges

Prevalence of Diabetes

	Overall	Over 65
Fall River	10.2%	21.2%
New Bedford	10.7%	24.7%
Massachusetts	7.5%	17.9%

Source: BRFSS, via MassCHIP, 2005-2013

Vulnerable Populations



Key:

Vulnerability Thresholds:

- % Population Below Poverty Level: 30% or Greater
- % Population < High School Diploma: 25% or Greater
- Areas Above Both Thresholds
- Meets Neither Threshold

Source: U.S. Census American
Community Survey, 2007-2011 Estimates



Health INEQUITY

We knew health disparities existed and we needed to reach out to our communities to develop a plan address them.

By addressing health disparities we could promote
HEALTH EQUITY

Clinical Care												
	Cannot See a Doctor Due to Cost			Colorectal Cancer Screening			Mammogram Within Last Two Years			Pap Smear Within Last Three Years		
	White	Black	Hispanic	White	Black	Hispanic	White	Black	Hispanic	White	Black	Hispanic
Greater Fall River	7.4%	NA	21.3%	65.5%	NA	60.7%	87.1%	NA	79.9%	81.8%	NA	70.2%
Greater New Bedford	8.0%	NA	19.4%	66.4%	68.5%	57.8%	87.8%	84.7%	69.9%	80.9%	84.9%	79.0%
Massachusetts	5.4%	10.9%	16.7%	74.6%	71.2%	63.5%	84.3%	87.1%	84.4%	84.1%	87.0%	83.9%

Source: BRFSS, via MassCHIP Instant Topics (2010-2013)

Health challenges are related to a number of population factors

- Second highest rate of premature deaths statewide
- Higher percentage of families w/children in poverty
- High rates of unemployment
- Higher life stress levels related to economic status
- Lower rates of school completion
- Steady high rates of immigration and resultant language and cultural barriers that decrease the comprehension of health promotion messages.



Challenges by Race/Ethnicity

	Current Smoker			Overweight			Obese		
	White	Black	Hispanic	White	Black	Hispanic	White	Black	Hispanic
Greater Fall River	23.2%	42.3%	25.5%	60.3%	72.8%	70.4%	23.5%	30.9%	32.3%
Greater New Bedford	21.5%	20.0%	25.8%	61.2%	64.6%	66/6%	21.3%	26.4%	29.3%
Massachusetts	15.1%	17.5%	14.8%	55.2%	67.3%	61.1%	19.0%	29.7%	24.1%

Source: BRFSS, via MassCHIP Instant Topics (2002-2007)



Targeting those most at-risk



Identified barriers to health

1. Transportation
2. Psycho-social and family issues.
3. Health literacy
4. Financial issues
5. Knowledge Deficits
6. Complex treatment



Improving access to healthcare



- Two new health clinics
- Work with immigrant populations
- Dental care access for children
- Healthcare enrollment





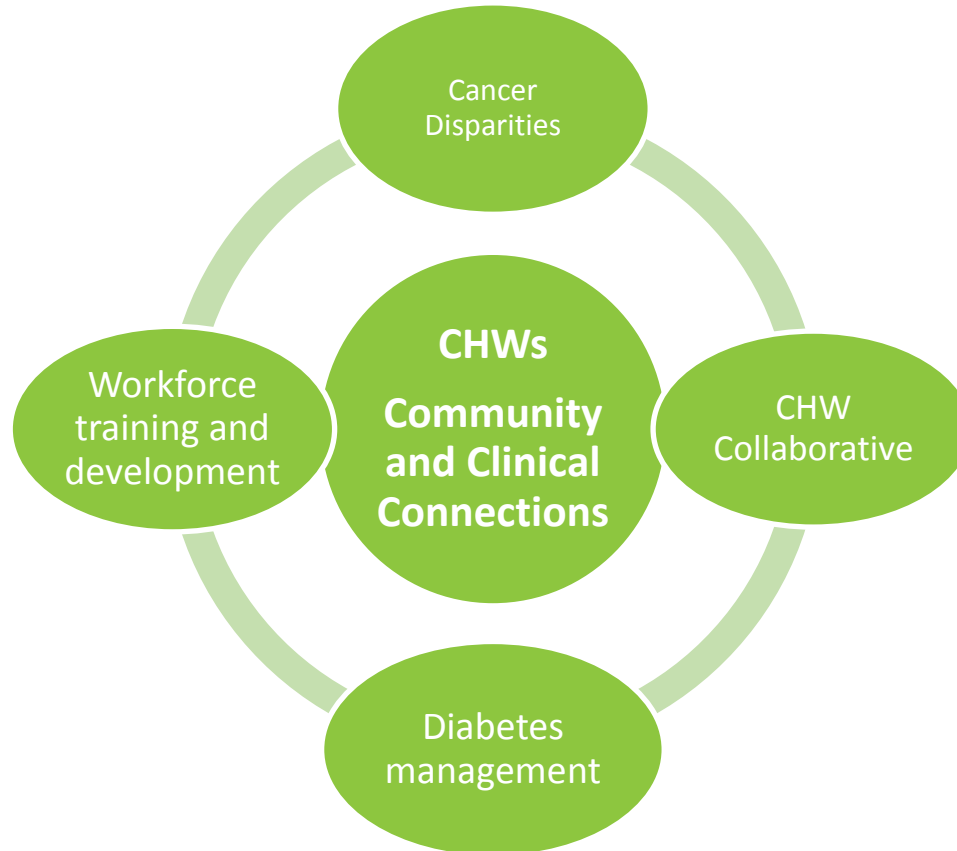
Improving access, transforming care

- Our interactions and collaborations with the community have helped us begin to transform care within Southcoast.





Transforming Communities: CHWs and the health of our region





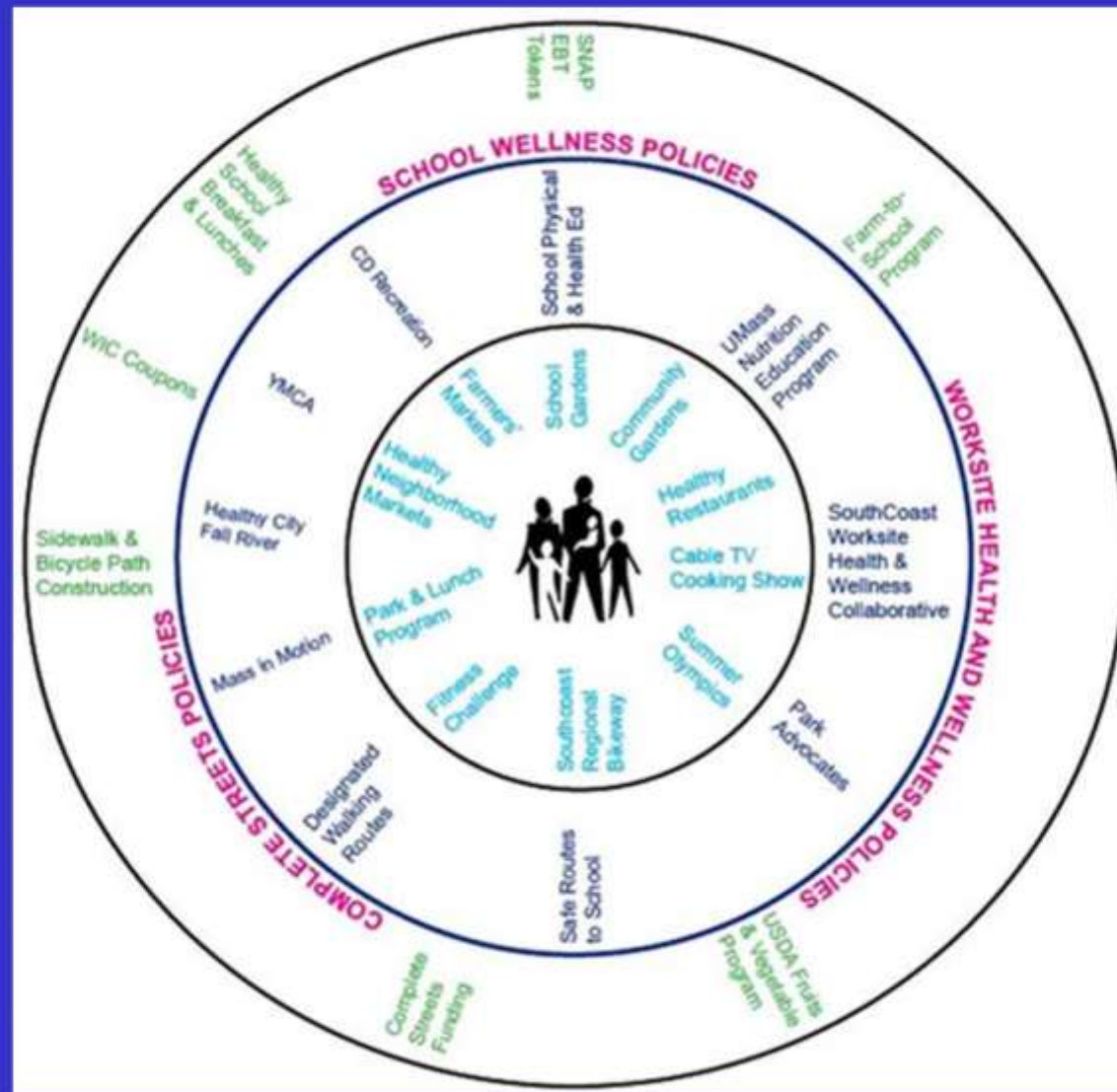
Collective Impact

*Made important connections
between community and clinical
resources with great results!*



Policy, System & Environment Change

PS&E changes occur in the context of programs and activities that involve and educate people on the need to make changes in their personal and collective environment



Some policies change as the result of changes in individual and collective behavior, and some behaviors change in the context of altered policies, systems and environments



Eight Factors That Affect Health

- 1: Diet & Exercise (poor diet, inactivity, knowledge of and access to healthy food)
- 2: Tobacco, Alcohol and Other Drug Use Prevention (smoking, prescription and illegal drug use)
- 3: Sexual Activity and Infectious Diseases (STDs, HIV, teen pregnancy)
- 4: Access to Quality Dental, Health, Mental Health and Substance Abuse Care (Insurance coverage, waiting times, lack of support outside medical settings)
- 5: Education, Employment, Income and Disability (graduation rates, job creation, adult education)
- 6: Community Safety and Violence Prevention (crime, abuse, bullying)
- 7: Family, Cultural and Social Support, and Housing (language, race, ethnicity, cultural values, maternal care, single parent households, homelessness)
- 8: Environment and Infrastructure (transportation, infrastructure, park development)



Making the healthier choice the EASIER choice on the Southcoast

- Cigarette sales bans
- Promoting and linking bikeways
- Education and advocacy for healthy vending
- Surveys on food habits
- Collaborations resulted in a \$1.2 M community transformation grant





Impact on smoking

Highest rates in Massachusetts;
One of biggest contributors to high health costs.

Results of collective work:

- **Smoke free housing and worksites.**
- **Pharmacy Ban on cigarette sales**
- **Smoke free hospital campus**
- **Ban in public places in New Bedford and Fall River**
- **Smoking cessation through Quitworks and Wellness Van**

Thousands have quit; 10 point reduction in smoking rate in New Bedford!

Smoke Free Park



Reducing crime & youth violence



- Instituted community policing city-wide
- Targeted gang suppression among youth
- Reduced youth violence 37% over four years through education, jobs and social support
- Engaged youth in prevention

Improving the local food supply



- Farmers' markets and veggie-mobiles
- Healthy restaurants and markets
- School and community gardens
- Hunger network

Changing Alcohol Sales/Use Laws



- Alcohol sales education and warnings with the Sticker Shock program
- Social host ordinance passed by City Government
- Beverage server training now required

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Increasing adult physical fitness



- Fitness Challenge brings in 800+ people per year



- Cycling groups now very active
- Staircase gallery



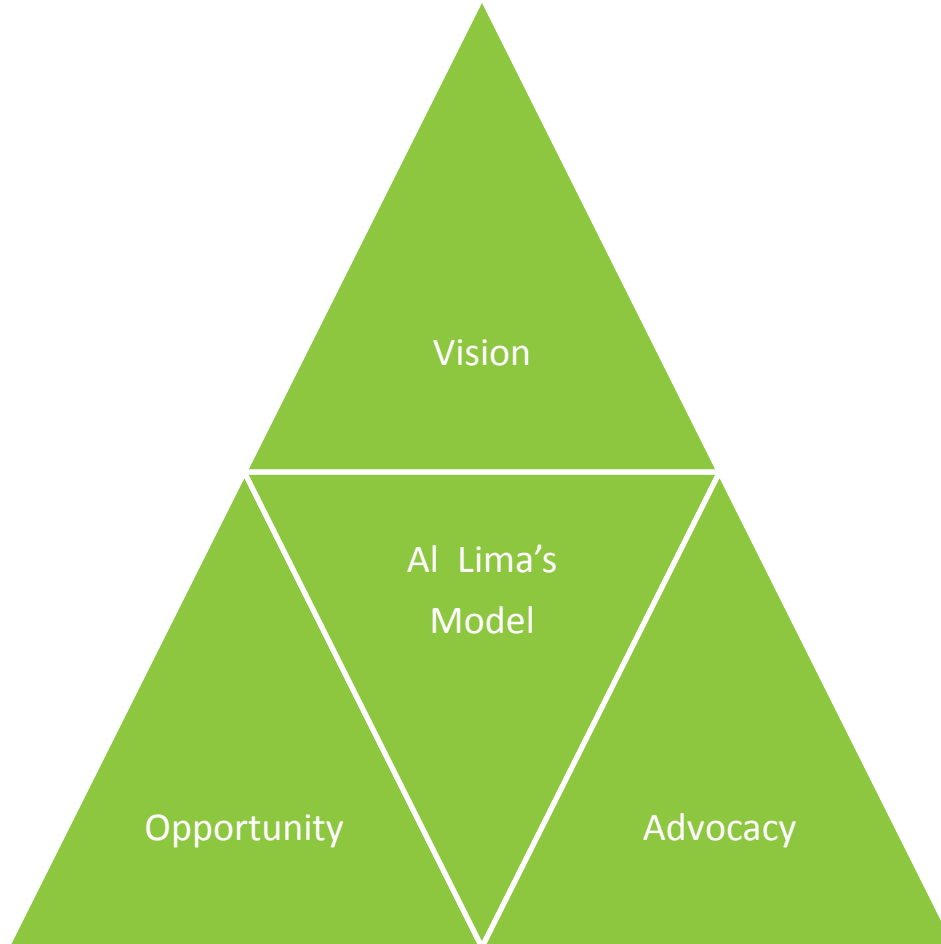
- Walks with a hospital doctor

Change!

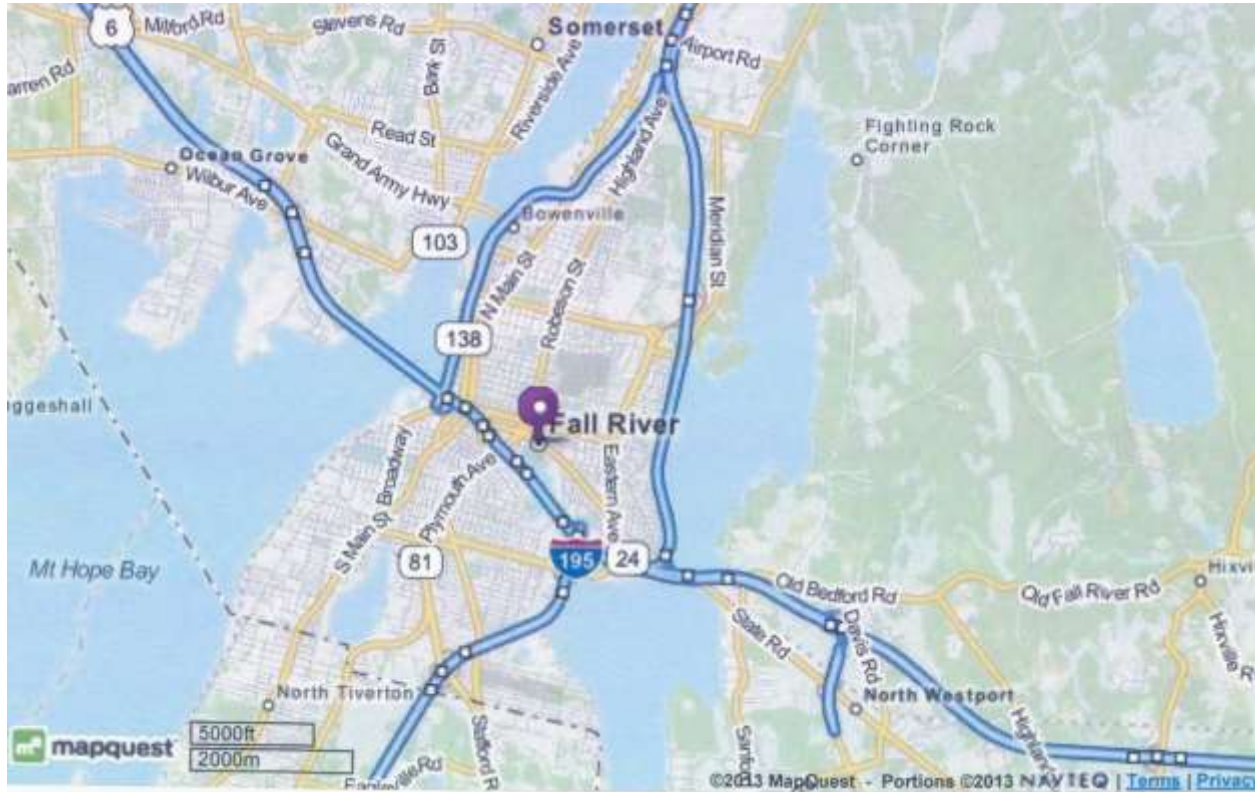
Policy, Systems, Environments



How do you begin?



The Asphalt Necklace



Abandoned Open Space



Parks In Disrepair



Imagine a park in the middle of the river



Opportunity



Advocacy



Engage the community



Engage City Department Heads



Urban Conservation Council



Engage Like-Minded Organizations



The Trustees of Reservations Youth Conservation Corps

Auditing

- 6 Audits with Senior Champions (summer '14)



improvements

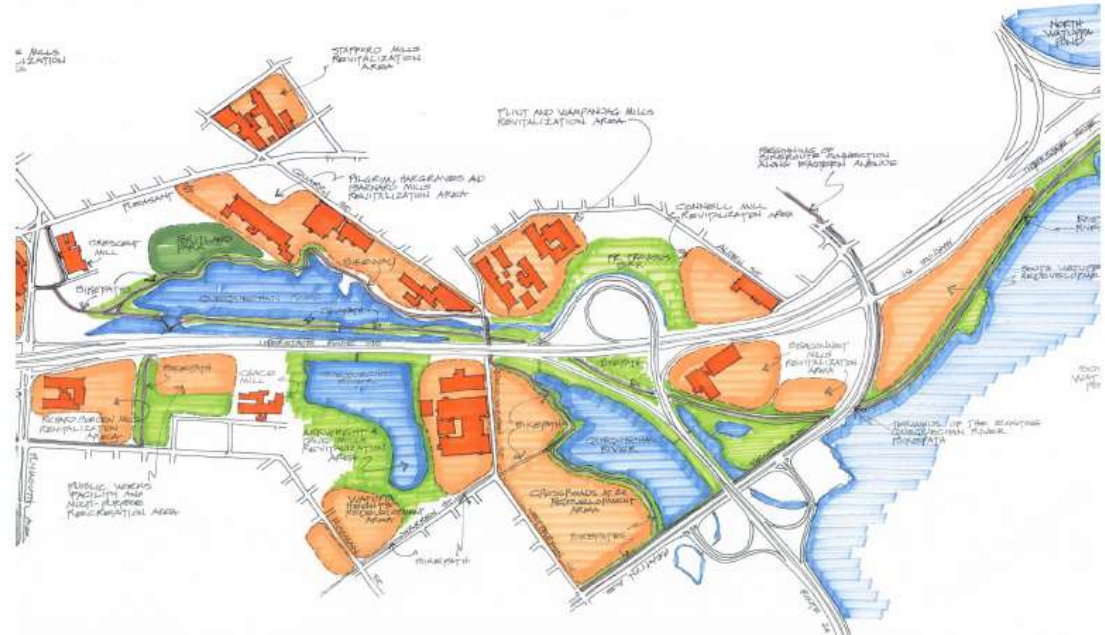
- Alden Street / Everett Street



Bike Safety Day



Quequechan River Rail Trail



The Quequechan River Rail Trail

Fall River, Massachusetts

A plan for bike/pedestrian paths, greenways, and economic development.

Prepared for the City of Fall River and Mass in Motion
Prepared by Alfred J. Lima, July, 2010. Scale: 1 inch = 400 feet

For more information call Julie Kelly, Coordinator, Mass in Motion-Fall River, 508-324-2405 or jkelly@fallriverma.org

Fall River passes the CPA
November 2012

