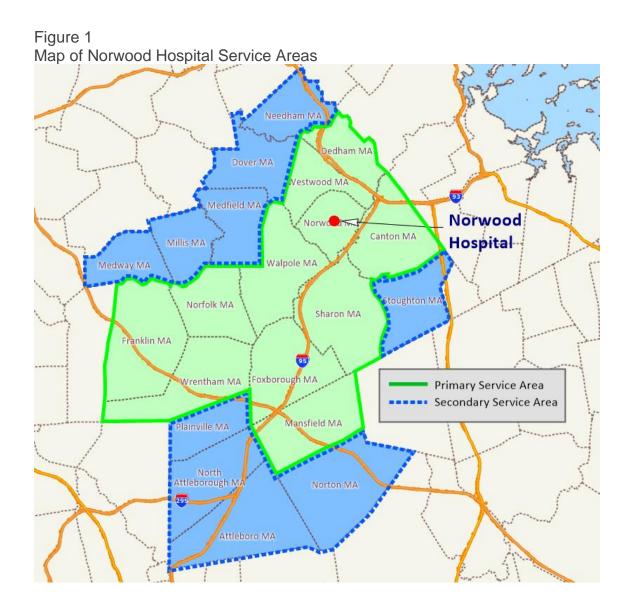
# Norwood Hospital Community Benefits COMMUNITY HEALTH IMPLEMENTATION STRATEGY



# **Overview of Norwood Hospital Service Area**

Norwood Hospital is located less than 30 miles from the center of Boston in the town of Norwood, Massachusetts. In total, there are 21 cities and towns in the Hospital's service area spanning from Attleboro in the south to Needham in the north. Of the 21 municipalities in the region, 11 are in the primary service area (PSA) and 10 are in the secondary service area (SSA) as shown in Figure 1.

The region spans two counties—Norfolk (17 communities) and Bristol (4 communities)—and six Community Health Network Areas. In Fiscal Year 2019, the last full fiscal year prior to Norwood Hospital's storm and flood damage, the Hospital provided services to 126,497 patients. The majority of the Hospital's patients resided in Norwood, followed by Walpole, Canton, Foxborough, Wrentham and Sharon.



## **Service Area:**

- Attleboro
- Canton
- Dedham
- Dover
- Foxborough
- Franklin
- Mansfield
- Medfield
- Medway
- Millis
- Needham

- Norfolk
- North Attleborough
- Norton
- Norwood
- Plainville
- Sharon
- Stoughton
- Walpole
- Westwood
- Wrentham

## **Hospital System:**

Steward Health Care Norwood Hospital, A Steward Family Hospital 800 Washington St Norwood MA, 02062

### **Norwood Hospital Administrator:**

Salvatore Perla, DrPH President

#### **Hospital Centers:**

Norwood Hospital Cancer Center Foxboro

SMG Primary Care
 Attleboro, Canton, Dedham, Sharon, Norwood

Walpole, Wrentham

SMG Women's Health
 SMG Cardiology
 Foxboro, Norwood
 Wrentham, Norwood

SMG Pulmonary & Sleep Medicine
 SMG Gastroenterology
 SMG Urology
 SMG Neurology
 Steward Orthopedics
 Norwood
 Norwood
 Norwood

### **Local Health Department:**

Norwood Department of Health, Norwood MA 02062

#### **Community Health Implementation Strategy Contact Person:**

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Melanie Franco

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# **Executive Summary**

Norwood Hospital's Community Health Implementation Plan (CHIP) for 2022-2024 outlines the health and wellness priorities for communities within Norwood Hospital's service area. The CHIP builds upon findings and key recommendations of the 2021 Community Health Needs Assessment, and outlines plans to promote and maximize the health and wellness of our community.

Norwood Hospital is in a unique position to focus primarily on partnering with community organizations and agencies to influence factors vital to the overall health and wellbeing of our community members. Through strategic partnerships, collaboration, and community involvement we can enhance our community's capacity to address trends across the social determinates of health as identified in *The Attorney General's Community Benefits Guideline for Non-Profit Hospitals*.

During the term of this plan in partnership with other organizations, Norwood Hospital will focus on preventative health initiatives and programs. In strong collaboration with our community partners, these programs will be planned, implemented, and evaluated using evidence-based or evidence-informed practices.



# Mission Statement

# Steward

Steward Health Care is committed to providing the highest quality care with compassion and respect.

#### We dedicate ourselves to:

- Delivering affordable health care to all in the communities we serve
- Being responsible partners in the communities we serve
- Serving as advocates for the poor and underserved in the communities we serve

# Values

# Compassion:

Providing care with empathy in such a way that the person experiences acceptance, concern, hopefulness and sensitivity

# Accountability:

Accepting responsibility for continuous performance improvement, embracing change and seeking new opportunities to serve

## Respect:

Honoring the dignity of each person

## -xcellence:

Exceeding expectations through teamwork and innovation

# Stewardship:

Managing our financial and human resources responsibly in caring for those entrusted to us.

## Introduction

Steward Health Care is the largest physician-owned private for-profit health care network in the United States. Its system operates 39 community hospitals across nine states and 5 internationally, serving over 800 communities with 5,500 providers and 43,000 health care professionals caring for 12.3 million patients annually. Norwood Hospital, part of the Steward network, was founded in 1919 and at one time was a full-service, 215-bed acute care community hospital located in Norwood, Massachusetts. The hospital's major clinical services included advanced surgical services, obstetrics, cardiology, neurology, orthopedics, gastroenterology, behavioral health, cancer care, and pediatrics.

Norwood Hospital, including its Emergency Department, temporarily closed on June 28, 2020 due to a catastrophic weather event in which flooding from severe storms inundated parts of the facility and caused widespread damage. In partnership with emergency services from the surrounding communities, Norwood Hospital was able to complete a safe and injury-free evacuation of 133 patients. The hospital continues to offer outpatient services to the community at its existing satellites located in Foxboro and Norwood. The hospital plans to demolish the existing structure and rebuild in the same location, with construction to begin in 2022.

# **Community Benefits Mission Statement**

At Norwood Hospital, we reach beyond hospital walls, into the surrounding communities, to address the most prevalent health- and wellness-related needs of our community members. Guided by a careful analysis of community need, Norwood Hospital's community health program aims to help the most vulnerable make life-changing improvements in health and address social and economic factors that impact overall well-being.

Along with improving the health status of our community, our mission is to also provide access to comprehensive, high quality, compassionate and efficient health care service in the community setting. Norwood Hospital's community health program accomplishes this by:

- Assessing the unmet health needs of our community
- Participating on local action committees
- Funding community-based public health and health care initiatives

- Encouraging community members to engage in healthy lifestyle choices by actively participating in their health care and education of risks associated with less-than-optimal health behaviors
- In addition, Norwood Hospital aims to provide culturally sensitive, linguisticallyappropriate, accessible health care services to address the cultural needs of the communities we serve

# **Community Health Needs Assessment 2021**

In accordance with the Massachusetts Attorney General's Community Benefits Guidelines, Norwood Hospital conducts a Community Health Needs Assessment (CHNA) every three years that identifies the key health issues and unmet community needs in its service region, particularly among the region's most vulnerable populations. The overarching goal of this effort is to inform data-driven goals, objectives, and strategies that can be implemented by Norwood Hospital to improve the health of the people it serves. The 2021 CHNA represents a collaborative community-wide approach that incorporates socioeconomic and health data along with community input to identify the region's top health priorities, as shown in figure 2. The major components of this analysis include:

- <u>Socioeconomic Profile:</u> Understanding the community by describing its residents in terms of population, age, gender, and other demographic indicators. The analysis strives, where possible, to present these data in the context of social determinants of health by highlighting disparities in terms of income, education, and race, all of which are factors that affect health outcomes.
- <u>Health Data Assessment:</u> Identifying major health issues and needs by presenting a variety of health indicators from sources such as the Massachusetts Department of Public Health, U.S. Centers for Disease Control and Prevention, and Norwood Hospital.
- <u>Qualitative Activities:</u> Engaging key informants and community members through surveys, interviews, and focus groups to add context to the health data and refine our understanding of the region's primary health issues and challenges.

The 2021 Community Health Needs Assessment assessed the following elements

## **Demographics**

- Population
- Racial and Ethnic Diversity
- Educational Attainment
- Income, poverty and employment

## **Social And Physical Environment**

- Physical and Built Environment
- Social Environment
- Housing and Housing Stability
- Transportation
- Food Access
- Environmental Health
- Crime and Safety

#### **Health Behaviors and Outcomes**

- Perceived Community and Individual Health Status
- Leading Causes of Mortality
- Chronic Disease
- Infectious Disease
- Healthy Eating, Physical Activity, Overweight, Obesity
- Substance Use
- Mental Health

#### **Health Care Access and Utilization**

- Resources and Use of Health care services
- Challenges to accessing health care services

Figure 2 Identifying the Health Priority Issues Includes Five Main Components



# **Identifying Priority Health Issues**

The primary goal of the CHNA is to prioritize the region's health issues through a holistic approach that analyzes health data, leverages the expertise of key informants, and incorporates the views of the community. These activities are employed to prioritize health issues based on the following criteria:

- The health issue impacts a large number or high percentage of people, particularly the region's most vulnerable at-risk populations,
- There is existing momentum to build upon and community programs are already in place,
- Addressing the health issue will substantially address health disparities or inequities, and
- Short- and long-term outcomes can be measured and tracked.

Results of the key informant survey show that issues related to mental and behavioral health are among the top priorities; 93% or respondents report that mental and behavioral health issues are the most concerning issues, followed by alcohol use disorder (92%) and opioid use disorder (82%). High percentages of respondents also reported suicide (73%) and intimate partner violence (68%) as highly concerning issues. These results are strongly supported by open-end survey comments and key informant interviews, with key informants cautioning that mental and behavioral health issues are likely to worsen as the economic and health fallout of the COVID-19 pandemic continues to be addressed.

Results of the community survey also show that mental and behavioral health is a priority, with 51% choosing mental and behavioral health as one of the most important issues. Respondents chose age-related health problems as the top health issue overall, with 64% of respondents selecting it as one of their top five issues. Other health issues linked to aging were also identified by respondents, particularly those related to chronic disease such as obesity/overweight (50%), cancer (49%), and heart disease/stroke (41%). The relatively high ranking of these choices related to chronic disease is partly the result of older residents being over-represented in the survey results. However, these results, coupled with the available health data, indicate that age-related health issues experienced by older residents are indeed a priority in the service region.

In addition to the primary issues of behavioral health and age-related health issues identified above, key informants identified other concerning issues in open-end survey comments and during interviews. One evident issue for key informants and community members is housing, particularly with regard to housing affordability. This is also supported by open-end survey comments provided by community members. As one community member noted, "I don't know how my kids are going to be able to afford to live here."

Applying the four criteria described at the beginning of this section to the results of the qualitative activities undertaken for this project results in four health priority issues: Behavioral Health (which encompasses mental health and substance use disorder), Wellness and Chronic Disease, Housing Stability, and Health Access and Equity. Overall, these four areas represent issues where Norwood Hospital can make a positive impact because the hospital is already addressing these issues and has existing partnerships and collaborations with local service providers.

| Priority Issue             | Sub-Categories                                                                      |
|----------------------------|-------------------------------------------------------------------------------------|
| Behavioral Health          | Mental Health, Substance Use Disorder                                               |
| Wellness & Chronic Disease | Unhealthy Behaviors, Health Conditions, Health Outcomes, Food Insecurity, Nutrition |
| Housing Stability          | Affordability, Stability, Homelessness                                              |
| Health Access and Equity   | Underserved Populations, Obstacle to Care, Health Literacy                          |

## **Priority Area 1: Behavioral Health**

Behavioral health examines how a person's habits affect their mental and physical wellbeing. This included behaviors related to nutrition, exercise, nicotine use, sleep, and stress. Behavioral health is a term for the inclusion of mental health conditions and substance use disorders.

| Summary | Mental Health and Substance Use Disorders emerged as the two most prominent health issues in the service area. Community stakeholders identified mental health as the most pressing and immediate health issue overall within the service area.                                          |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Goal    | Increase awareness of available resources to stabilize and improve behavioral health outcomes.                                                                                                                                                                                           |
| Impact  | <ul> <li>Increased referrals to mental health and substance use services for community residents.</li> <li>Decreased stigmatization of mental health care and substance use treatment.</li> <li>Decreased cases of drug dependency, abuse, and death among community members.</li> </ul> |

- Support Mental Health outreach, education, and prevention programs.
- Increase awareness of community-based services and programs for Mental Health services.
- Increase awareness of community-based substance use disorder treatment services and programs.
- Support awareness of Naloxone education and distribution classes and programs.
- Increase awareness of Steward Health Care comprehensive addiction program locations.
- Decrease drug dependency or abuse through community awareness campaigns
- Educate community on substance use issues and trends.
- Support and/or participate in task forces and community collaborations that offer education on the risks, protective factors, and impacts of substance misuse.
- Reduce mental health stigma by supporting and promoting mental health first-aid and dementia awareness trainings.
- Support implementation of school-based social and emotional wellness planning to improve youth social- and emotional resiliency and mental wellbeing.
- Support preventative mental health and resiliency education and awareness opportunities.
- Reduce mental health stigma by promoting mental health as a component of primary health-care.
- Support students seeking careers in Behavioral Health through scholarship opportunities.

## **Priority Area 2: Wellness and Chronic Disease Prevention**

As noted in the 2021 community health needs assessment, one key informant noted, "Many of the health problems I see are a result of people not taking care of themselves. The pandemic has only made that worse, many times worse." As such, chronic disease prevention with a focus on overall wellness remains a continued priority health issue for Norwood Hospital.

| Summary | The CHNA found that community members would like to see more efforts dedicated to preventive care services and ways to expand nutrition and health related education to help keep community members healthy.                             |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Goal    | Stabilize and improve management of chronic diseases and encourage community members to engage in healthy behaviors and reduce risks as it relates to chronic diseases.                                                                  |
| Impact  | <ul> <li>Increased screening, prevention, and referrals to treatment for chronic diseases</li> <li>Increased choices for engaging in healthy lifestyle choices</li> <li>Decreased new diagnosis of Chronic Disease Conditions</li> </ul> |

- Increase awareness of prediabetes, and other early chronic disease symptoms and signs.
- Support community programs and activities that refer, educate, or support individuals around better managing their chronic disease conditions.
- Support increased fruit and vegetable consumption by supporting community-based initiatives and increasing awareness of local farmers markets.
- Increase awareness of nutrition and food access assistance programs.
- Support community-based initiatives to offer free or low-cost physical activity.
- Support increased physical activity through by promoting community-based activities and creating an inventory of trails, bike paths, parks, and swimming areas.
- Support community partners activities that increase physical activity and engagement of healthy behaviors.
- Increase awareness of opportunities and requirements for preventative screenings.
- Increase awareness and education on impact of sleep and sleep conditions on health and chronic disease prevention.
- Support opportunities for subject matter experts to provide education and outreach to community members.
- Utilize social media platforms to provide health and wellness education opportunities.

## **Priority Area 3: Housing Stability and Homelessness**

The 2021 community health needs assessment found that community survey and stakeholder interviews clearly indicate housing as an issue of concern in the region. Nearly every person interviewed spoke at length about urgent housing challenges and ways in which housing affects other basic needs, including the ways in which a lack of affordable housing contributes to housing instability and homelessness, both of which are strong predictors of health outcomes.

| Summary | Lack of housing stability and homelessness contribute to an increase in poor health outcomes. Working to increase housing stability is a social determinate of health in which several areas intersect with efforts of health care systems. |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Goal    | Collaborate with and support community partners to address contributing risk factors associated with housing instability and homelessness.                                                                                                  |
| Impact  | Decrease conditions that lead to housing instability and homelessness.                                                                                                                                                                      |

- Increase awareness of rent-stabilization and rent-assistance programs.
- Increase awareness of affordable housing inventory listings.
- Support community organizations to reduce food insecurity a known risk factor associated with housing instability.
- Increase awareness of parameters for and opportunities to apply for food and nutrition assistance programs such as SNAP and WIC benefits.
- Increase awareness community level social services referral programs.
- Support community partners that educated and raise awareness about public assistance programs to help individuals and families identify and enroll in appropriate health insurance plans to reduce their financial burden.

## **Priority Area 4: Health Access and Equity**

People who do not have access to health care are at a greater risk of having poor overall health and negative health outcomes. This includes access to a wide variety of health services such as preventative care, mental health services, and emergency services. Regular access to health services is essential in managing health conditions, preventing new conditions from arising, and promoting and maintaining overall good health.

| Summary | Community stakeholders identifies a myriad of access issues such as health literacy, insurance coverage and cost, transportation, and the need for more culturally competent care. |  |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Goal    | Reduce barriers to care through collaborative efforts with community partners.                                                                                                     |  |
| Impact  | <ul> <li>Increased health literacy to improve patient's health related knowledge.</li> <li>Improved health outcomes.</li> </ul>                                                    |  |

- Increase awareness of health care providers that provide service in languages other than English.
- Provide language/interpreter support for patient and family encounters.
- Ensure patients are aware of language and disability assistant support during patient-provider interactions.
- Incorporate CDC Plain Language Standards into external health education and awareness outreach.
- Incorporate use of images along with written communication.
- Support community partners that educate and raise awareness about public assistance programs that help individuals and families enroll in appropriate health insurance plans.
- Partner with Office of Diversity, Equity, and Inclusion to educate staff and health care providers about diverse cultural health care practices.
- Partner with Office of Diversity, Equity, and Inclusion to educate staff and health care providers on ways to improve health literacy for patients.

## **Community Benefits Advisory Committee**

- George Usevich, Committee Chairman, Norwood Hospital Director
- Charles Doody, Fire Chief, Canton Fire Department
- Caitlin Gibbs, Senior Director of Health Innovation, Hockomock Area YMCA
- Joan Jacobs, Norwood Hospital Director, Chairwoman, Norwood Board of Health
- Mary Jean McDermott, Executive Director, HESSCO Elder Services
- Katharine Touafek, Director, Schools to Careers Partnership
- Kerri McCarthy, Executive Director, Norwood Senior Center
- Jennifer Levine-Knight, Executive Director, SAFE Coalition
- Aubrey Ciol, Program Director, Impact Norwood
- Melanie Franco, Norwood Hospital Representative, Marketing and Communications Director
- Nikki Poulin, Norwood Hospital Representative, Community Benefits Program Manager

The Community Benefits Advisory Committee will meet quarterly in 2022 during the following months: **January**, **April**, **July**, **and November**.