Norwood Hospital Community Benefits

COMMUNITY HEALTH IMPLEMENTATION STRATEGY
**Service Area:**
- Attleboro
- Canton
- Dedham
- Dover
- Foxborough
- Franklin
- Mansfield
- Medfield
- Medway
- Millis
- Needham
- Norfolk
- North Attleboro
- 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
- SMG Primary Care
- SMG Women’s Health
- SMG Cardiology
- SMG Pulmonary & Sleep Medicine
- SMG Gastroenterology
- SMG Urology
- SMG Neurology
- Steward Orthopedics
- Foxboro
- Attleboro, Canton, Dedham, Needham, Sharon, Norwood, Walpole, Wrentham
- Foxboro, Norwood
- Wrentham, Norwood
- Norwood
- Norwood
- Norwood
- Norwood
- Norwood

**Local Health Department:**
Norwood Department of Health, Norwood MA 02062

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# Table of Contents

- Executive Summary  
  Page 3  
- Message From the President  
  Page 3  
- Steward Mission Statement  
  Page 4  
- Introduction & Community Benefits Mission  
  Page 5  
- Community Health Need Assessment  
  Page 6  
- Findings, Priority Areas and Goals  
  Page 7  
- Priority Area 1  
  Page 8  
- Priority Area 2  
  Page 12  
- Priority Area 3  
  Page 14  
- Priority Area 4  
  Page 15  
- Community Benefits Committee Members  
  Page 16
Executive Summary

Norwood Hospital’s Community Health Implementation Plan (CHIP) for 2020 outlines the health and wellness priorities for communities within Norwood Hospital’s service area. The CHIP builds upon findings and key recommendations of the 2018 Community Health Needs Assessment, and outlines plans to promote and maximize the health and wellness of our community.

Norwood Hospital is well positioned to partner with community organizations and agencies to influence factors vital to the overall health and wellbeing of our community members. Through strategic partnerships, increased collaboration, and community involvement we can enhance our community’s capacity to identify and address trends across the social determinates of health as identified in The Attorney General’s Community Benefits Guideline for Non-Profit Hospitals released in February, 2018.

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

Message from the President

In 2019, we at Norwood Hospital celebrated our 100th anniversary. Over the past century, our hospital has evolved, sometimes dramatically, to reflect the amazing advances in health, wellness and the practice of medicine. However, despite the incorporation of advanced medical practices, our core commitment to our friends, family and neighbors in the more than 20 communities we serve remains the same. Our mission since 1919 has been to support the overall health and wellbeing of our patients and the community at large.

In addition to providing exceptional health care, we also are compelled by our mission to uncover opportunities to help those that are underserved, including many whom we may not realize could benefit from the support offered through preventative health programs. The Community Health Implementation Plan is a culmination of many months of asking questions, collecting data, collaborating with community health partners, and discussing how we can best deliver the services our community needs.

As we reflect on our values of Compassion, Accountability, Respect, Excellence and Stewardship, we also uphold our initial promise, made 100 years ago, to put the health and well-being of the communities we serve first.

Sincerely,

Salvatore Perla, DrPH
President, Norwood Hospital
Mission Statement

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

Excellence:
Exceeding expectations through teamwork and innovation

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

Norwood Hospital (Norwood) is a member of Steward Health Care, the largest private, for-profit physician-led health care network in the United States. Headquartered in Dallas, Texas, Steward operates 36 hospitals in the U.S. and the country of Malta that regularly receive top awards for quality and safety. The company employs approximately 40,000 health care professionals and is recognized as one of the world’s leading accountable care organizations. The Steward Health Care Network includes thousands of physicians who help to provide more than 12 million patient encounters per year. Steward Medical Group, the company’s employed physician group, provides more than 4 million patient encounters per year. The Steward Hospital Group operates hospitals in Malta and states across the U.S. including Arizona, Arkansas, Florida, Louisiana, Massachusetts, Ohio, Pennsylvania, Texas, and Utah.

Norwood Hospital, founded in 1919, is a full-service, 215-bed acute care community hospital located in Norwood, Massachusetts with a focus on delivering world-class health care with the latest state-of-the-art advances in medical technology and treatment options. Norwood’s highly-skilled staff provides the highest quality care and compassion to all members of the community. The hospital’s major clinical services include advanced surgical services, obstetrics, cardiology, neurology, orthopedics, gastroenterology, behavioral health, cancer care, and pediatrics.

To learn about community health programs, follow the Norwood Hospital Facebook page at https://www.facebook.com/NorwoodHosp. Further information is available at http://steward.org/Norwood-Hospital.

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 healthcare 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 healthcare initiatives
- Encouraging community members to engage in healthy lifestyle choices by actively participating in their healthcare and education of risks associated with less than optimal health behaviors
- In addition, Norwood Hospital aims to provide culturally-sensitive, linguistically-appropriate, accessible health care services to address the cultural needs of the communities we serve
The 2018 Norwood Hospital Community Health Needs Assessment (CHNA) was developed in full compliance of the Commonwealth of Massachusetts Office of Attorney General's Community Benefits Guidelines for Non-Profit Hospitals released in February 2018. Norwood Hospital engaged various community partners to ensure that varying perspectives on health and social topics were taken into account in order to complete this CHNA.

Data was gathered from publicly available sources as well as from the community through a focus group and surveying the community. A review of published literature was conducted to identify key health indicators for those living in the Norwood Hospital primary service area, counties and/or state. The information contained within the 2018 Community Health Needs Assessment (CHNA) may be used to target high priority needs within the community and be used to help develop targeted population health improvement strategies.

A key takeaway from the CHNA is that collaboration on health promotion and chronic disease prevention among health and social services organizations is critical to the success of community health improvement strategies. The results and recommendations in the CHNA provide a basis for strategic actions for Norwood Hospital and its community partners to consider.

The following is a list of actions that were taken to gather community data from primary and secondary sources for the Community Health Needs Assessment:

- **Health Indicators and Demographics / Data Analysis** -- Demographic data was collected using publicly available databases maintained by the U.S. Census Bureau, the MA Department of Early and Secondary Education with some cross-referencing of Center for Disease Control and Prevention (CDC) databases.

- **Key Informant Survey** -- An online survey was designed and distributed by Norwood Hospital to approximately 350 community stakeholders. These stakeholders included, but were not limited to, health and human services agency directors, school administrators, nurses, psychologists, law enforcement, fire departments, CHNA 7 and CHNA 20 members, church leaders, community health advisory committees, hospital frontline leadership staff, veteran organizations, senior centers, and food pantry directors. The survey was also made available to the community via the Norwood Hospital Facebook page.

- **Focus Group** -- A focus group was conducted by the Norwood Hospital team in September 2018. The focus group was conducted to improve local engagement and gather additional information on community attitudes towards health and wellness. All participants either worked or resided within the hospital’s service area.

- **Literature Review** -- A literature review was conducted in order to gather information from recent governmental, public policy, and academic works. The relevant information was summarized and synthesized into a comprehensive literature review addressing the priority areas for community benefits.
Findings of Community Health Needs Assessment

Chronic Disease- When looking at chronic disease, four service area communities had a higher percentage of all mortality due to chronic disease than the state average. Of these communities, Westwood had the highest percentage of all mortality due to chronic disease at 57 percent. Cancer remains the leading cause of mortality in both Norfolk and Bristol counties, as well as in Massachusetts as a whole.

Obesity- Obesity remains a prevalent issue for both children and adults in Massachusetts. Overweight/obesity disproportionately affects underserved populations that do not have the same opportunities to prevent obesity as other populations. This includes access to healthy foods, access to safe activity spaces, and other factors. Franklin had the highest percentage of overweight or obese children in grades (1,4, 7 and 10), at 43.2 percent which is 11 percent higher than the State average.

Mental Health- Given their early age of onset and poor recognition and treatment rates, mental health conditions are arguably among the most chronic of illnesses. For the purposes of this report, the prevalence of mental health and substance abuse disorders in the region is determined by the hospitalization count related to mental health and substance abuse disorders. In data collected through the Key Informant Survey and focus group, respondents indicated that substance abuse treatment/education and mental/behavioral health services were of very high concern to health care professionals and community members in the Norwood Hospital service area.

Norwood Hospital Community Health Priority Areas and Goals

Norwood Hospital (NWH) has aligned with the most current guidance provided in 2018’s The Attorney General’s Community Benefits Guideline for Non-Profit Hospitals, which highlights the Massachusetts Department of Public Health’s (DPH) six priority areas for community health planning:

- Built Environment
- Social Environment
- Housing
- Violence
- Education
- Employment

Based on the findings and key recommendations from the 2018 Community Health Needs Assessment conducted by NWH, and with consideration of DPH’s six priorities in Community Benefits planning, NWH has identified the following priority areas and goals for 2020 and 2021.

| Chronic Disease Prevention | • Provide access to activities and programs that address risk factors  
|                          | • Address social determinates of health |
| Mental Health            | • Decrease stigma associated with Mental Health  
|                          | • Promote Mental Health as a component of Primary Care |
| Substance Use Disorders  | • Decrease substance abuse related deaths |
| Housing Stability        | • Partner with community organizations to address contributing factors associated with increasing housing instability |
NWH Priority Area 1: Chronic Disease Prevention and Management

GOAL 1: Increase engagement with community partners to reinforce accessible chronic disease prevention and management care in clinical and community settings with a focus on cancer, diabetes, heart disease, and obesity.

Objective 1.1 By December 31, 2020 provide preventative chronic disease education, chronic disease management, and screenings to community members within Norwood Hospital’s service area

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Number of Education and Management Programs</td>
<td>5</td>
<td>All, with a focus on at-risk individuals and underserved populations</td>
</tr>
<tr>
<td>• Number of Total Participants</td>
<td>150</td>
<td></td>
</tr>
<tr>
<td>• Number of Cancer Screenings</td>
<td>2</td>
<td>All, with a focus on at-risk individuals and underserved populations</td>
</tr>
<tr>
<td>• Number of Patients Screened</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Strategies 1.1

Conduct Hospital-based educational programs and events in partnership with community organizations with subject matter expertise including but not limited to:

- Diabetes Prevention and Management
- Nicotine Cessation
- Alzheimer’s Awareness and Management
- Youth & Adolescent Health

Certified Diabetes Educator
Registered Dietitian
ACS Fresh Start Facilitator

Alzheimer’s Association
American Cancer Society
American Diabetes Association
Hockomock YMCA
Town of Norwood

Conduct Cancer Screenings for at-risk and underserved populations.

- Engage with community partners to identify at-risk communities, and methods to increase participation

Norwood Hospital Clinical Staff
Steward Medical Group Providers
Steward Health Care Network Providers

American Cancer Society
Hockomock YMCA
Norwood Department of Health
HESSCO
**Objective 1.2** By December 31, 2020 increase participation by five percent, in chronic disease prevention and management programs available to community members within Norwood Hospitals service area

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Number of referrals to partner organizations (Livestrong, YMCA Diabetes Program)</td>
<td>• 75</td>
<td>At-risk or newly diagnosed individuals with chronic diseases or conditions</td>
</tr>
<tr>
<td>• Number of participants in hospital education and support programs</td>
<td>• 50</td>
<td>Any, with a focus At-risk or newly diagnosed individuals with chronic diseases or conditions</td>
</tr>
</tbody>
</table>

**Strategies 1.2**

**Engage with Community Organizations**
- Provide at-risk or newly diagnosed individuals referrals to community programs and hospital-based programs
- Partner with organizations to increase engagement with at-risk community members in service area

Norwood Hospital Clinical Staff
Community Benefits Coordinator

**Promote Hospital-based programs to include but not limited to**
- Pre-natal yoga
- Diabetes Support

Certified Diabetes Educator
Registered Dietitian
Yoga Instructor

**Goal 2:** Partner with community organizations to provide access to activities and programs that address common modifiable contributing risk factors associated with chronic disease, with a focus on impacting the health of at-risk and underserved populations.

**Objective 2.1** By December 31, 2020 increase awareness of resources available to community members that address modifiable contributing risk factors associated with Chronic Diseases.

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of community health fairs/outreach events</td>
<td>3</td>
<td>All</td>
</tr>
</tbody>
</table>

**Strategies 2.1**

**Promote healthy eating, accessibility to**
Cardiac Rehabilitation
Community Gardens
### Healthy foods, active living, and nicotine and tobacco cessation
- Support initiatives and activities that contribute to increased healthy eating and access to healthy and affordable food.
- Provide Healthy Cooking Demonstrations.
- Build and strengthen partnerships with organizations/agencies that promote active living and healthy eating.
- Support and promote partner-led opportunities for increased physical activity (community fitness events, road races, and fitness challenges).

### Goal 3: Establish new program activity or initiative that addresses one of six priority areas that impact health as identified by the Massachusetts Department of Public Health

#### Objective 3.1 Work with community partner to identify methods for addressing and improving social determinates of health

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementation of activity/initiative that addresses chronic disease prevention</td>
<td>1</td>
<td>Community Partners</td>
</tr>
</tbody>
</table>

#### Strategies 3.1

- Build and strengthen partnerships, connect and engage with new community agencies that address social determinates of health, and work towards solutions:
  - Consult with community organizations to identify best practices for engaging with at-
risk community members and methods for reducing barriers to accessing care.

- Partner with community organizations to research and address root causes of chronic diseases in underserved communities within service area.
- Partner with community organizations to identify best practices in service area that focus on youth and family chronic disease prevention strategies.

Continue to expose and inspire youth in Healthcare careers by partnering with Health Care Explorers Program for High School students.

Contribute to post-high school educational attainment of graduating high school seniors by offering scholarship opportunities.

Partner and provide support to organizations the focus on violence and injury prevention.

Partner with organizations that work on improving built environmental factors.

Schools to Careers Partnership
Department of Transitional Assistance
Norwood High School
Walpole High School
Local Public Health Departments
**NWH Priority Area 2: Mental Health**

**GOAL:** Collaborate with community partners to destigmatize mental health and increase acceptance of mental health as a primary component of individual health care.

**Objective 1.1** Throughout 2020 support community organizations whose mission is to increase access to available mental health resources and reduce stigma associated with utilization of mental health resources.

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Unique Referrals to mental health services</td>
<td>• 150</td>
<td>• Any individual with a risk, need, or desire to seek mental health services</td>
</tr>
</tbody>
</table>

**Strategies 1.1**

Partner with community coalitions to:
- Connect community members to mental health services
- Support utilization of William James Interface Referral services

<table>
<thead>
<tr>
<th>Internal Resources</th>
<th></th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Community Benefits Coordinator</td>
<td>Medfield Suicide Prevention Coalition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Minds Matter Coalition</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Impact Norwood</td>
<td></td>
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</tbody>
</table>

**Objective 1.2** By December 31, 2020, increase utilization of Norwood Hospital based programs that increase protective factors, coping skills, and resilience in individuals, couples, and families by 5 percent.

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Number of participants utilizing hospital-based programs</td>
<td>• 5 percent increase</td>
<td>Any</td>
</tr>
</tbody>
</table>

**Strategies 1.2**

Market and Promote the use of hospital-based programs that increase protective factors and resilience in individuals, couples, and families to include but not limited to:
- Mended Hearts Cardiac Support Group
- Happiest Baby on the Block
- Newborn care
- Childbirth preparation

<table>
<thead>
<tr>
<th>Internal Resources</th>
<th></th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marketing Department Community Benefits Cardiac Rehab Maternity</td>
<td>All community Partners</td>
<td></td>
</tr>
</tbody>
</table>

**Objective 1.3** During 2020 donate meeting spaces for community organizations that address topics and issues surrounding mental health.
<table>
<thead>
<tr>
<th><strong>Outcome Indicator</strong></th>
<th><strong>Target</strong></th>
<th><strong>Target Population</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Fulfilled Meeting Space</td>
<td>• 5</td>
<td>Community Organizations</td>
</tr>
<tr>
<td>Reservations Requests</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Strategies 1.3**

<table>
<thead>
<tr>
<th><strong>Internal Resources</strong></th>
<th><strong>Partners</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Benefits Coordinator</td>
<td>DOVE</td>
</tr>
<tr>
<td>Environmental Services</td>
<td>National Alliance on Mental Illness</td>
</tr>
<tr>
<td></td>
<td>Family Connections</td>
</tr>
</tbody>
</table>
### NWH Priority Area 3: Substance Use Disorders

**Goal:** Collaborate with community partners to reduce substance abuse related deaths by 5 percent

#### Objective 1.1 Support community organizations to provide NARCAN training

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community NARCAN Trainings</td>
<td>1</td>
<td>All individuals with an interest</td>
</tr>
<tr>
<td>Number of individuals trained</td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>

**Strategies 1.1**

- Partner with community organizations to host community NARCAN trainings

**Internal Resources**

Norwood Hospital Clinical Staff

**Partners**

Canton Fire Department

#### Objective 1.2 Provide access to organizations that support individuals in recovery and maintenance phases of addiction

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fulfilled Meeting Space Reservations</td>
<td>4</td>
<td>Individuals in support groups for addiction recovery and maintenance</td>
</tr>
</tbody>
</table>

**Strategies 1.2**

- Continue to provide donated space for organizations (AA)

**Internal Resources**

Community Benefits Coordinator

**Partners**

Environmental Services

Alcoholics Anonymous

#### Objective 1.3 Prevent and reduce youth substance abuse

<table>
<thead>
<tr>
<th>Strategies 1.3</th>
<th>Internal Resources</th>
<th>Partners</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Impact Norwood</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Impact Norwood Youth Ambassadors</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Medfield Health Advisory Board</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Local Recreation Departments</td>
</tr>
</tbody>
</table>

- Collaborate with schools and organizations addressing youth and adolescent substance use prevention

- Collaborate with organizations to advocate for age-appropriate youth activities in communities.
### NWH Priority Area 4: Housing Stability and Homelessness

**Goal:** Collaborate with and support community partners to address contributing risk factors associated with housing instability and homelessness.

**Objective 1.1** Support community organizations to reduce food insecurity a known risk factor associated with housing instability.

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Number of Individuals screened for SNAP and WIC benefits</td>
<td>50</td>
<td>Any</td>
</tr>
<tr>
<td>• Number of qualified individuals served senior suppers</td>
<td>100</td>
<td>Individuals aged 55 and older</td>
</tr>
</tbody>
</table>

#### Strategies 1.1
- Develop new partnerships with organizations that address food security.
- Support current partnerships to expanded opportunities for SNAP and WIC benefit screenings.
- Partner and support organizations that provide meals, fresh produce, or grocery items to at-risk community members.
- Work with community partners to increase participation in senior supper programs.

**Internal Resources**
- Community Benefits Coordinator

**Partners**
- HESSCO
- Hockomock YMCA
- Canton Fire Department
- Local Food Pantry
- Massachusetts Farmers Market Association
- Department of Transitional Assistance

**Objective 1.2** Support community organizations that provide access to violence prevention resources.

<table>
<thead>
<tr>
<th>Outcome Indicator</th>
<th>Target</th>
<th>Target Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of community health fairs/events that provide violence prevention resources</td>
<td>4</td>
<td>All</td>
</tr>
</tbody>
</table>

#### Strategies 1.2
- Partner with community coalitions to:
  - Connect community members to domestic violence prevention

**Internal Resources**
- Community Benefits Coordinator

**Partners**
- Dove
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
- Sigalle Reiss, MPH, RS/REHS, Superintendent/Director of Public Health, Town of Norwood
- Katharine Touafek, Director, Schools to Careers Partnership
- Kerri McCarthy, Executive Director, Norwood Senior Center
- Melanie Franco, Norwood Hospital Representative, Marketing and Communications Director
- Nikki Poulain, MPH, Norwood Hospital Representative, Community Benefits Program Manager

The Community Benefits Advisory Committee will meet quarterly in 2020 on the following dates:

*February 4th, May 5th, August 4th, and November 3rd.*