

UMass Memorial Health Care - FY2003

Summary Narratives

Community Benefits Mission Statement

UMass Memorial Health Care is committed to improving the health status of all those it serves and to addressing the health problems of the poor and other medically underserved populations. In addition, non-medical conditions that negatively impact the health and wellness of our community are addressed.

Program Organization and Management

The overall mission is recommended by the Community Benefit Advisory Committee and approved by the senior management and members of the board of trustees of UMass Memorial Health Care.

UMass Memorial Health Care, Vice President for Community Relations, works with internal staff, community members and agencies, as well as the system hospitals, and serves as liaison for all community outreach and benefit activities.

There exists an active and dedicated Community Benefit Advisory Committee. Its work is a collaborative effort with the community and it is responsible for recommending the mission and scope of community benefit initiatives based on identified needs.

Key Collaborations and Partnerships

Input in planning was obtained from the following convening groups: Worcester Wellness Coalition (CHNA 8), Worcester Youth Promise Initiatives (United Way), Success By 6 (United Way), Bell Hill Neighborhood Association, the Belmont Community School, the Worcester East Side Community Development Corporation (CDC), Lakeside Tenant's Association, Infant Mortality Reduction Task Force, the Neighborhood Forum, the UMass Memorial Ronald McDonald Care Mobile Advisory Group, the city of Worcester HOPE Coalition, and the UMass Memorial Community Benefits Advisory Committee. The Community Access Program, City of Worcester Department of Public Health & the Senior Center.

Community Health Needs Assessment

The major area of focus in the 2003 Community Benefit Plan continues to be directed at addressing health care issues in the city of Worcester affecting the underserved and underinsured youth population, a targeted group identified as most at-risk. A review of the plan will demonstrate that the vast majority of services are being provided to youth most at-risk because of their cultural, social and economic status. These services are also being provided where those with the greatest need most easily access them.

Critical issues identified by the Community Indicators Task Force are:

- Affordable housing
- After school programs
- Public transportation
- Education
- Civic participation
- Children's mental health
- Unemployment

The HOPE Coalition Worcester youth survey identified the following areas of need:

- Teen pregnancy and sexually transmitted disease prevention
- Violence prevention
- Mental health services

Getting into college
Transportation
Reduction in substance abuse
Elderly Care
The Community Access Program Identified:
Access to care for the uninsured & specialty care

Community Benefits Plan

Based on the multiple priorities of the numerous groups of community agencies and residents, the following were selected as focus areas:

Doherty High School Health Clinic services
Literacy programs
Plumley Village Health Center
Healthy Communities initiatives undertaken in three inner-city neighborhoods
Support for at-risk adolescents through the Worcester Youth Center and HOPE Coalition
Mobile medical, dental and health educational services and access to dental care

Major initiatives and programs have data gathering and tracking mechanisms in place. They allow for analysis of provision of services, compilation of demographic and self-evaluation data from participants, as well as reporting on program accomplishments and any unmet needs within the community. Results of the ongoing data collection and analysis are used continuously to modify existing programs. All collaborators are becoming increasingly involved in the design and implementation of proper statistical tools and processes to more effectively evaluate outcomes.

Access to care for the uninsured.

Access to care for the elderly.

Key Accomplishments of Reporting Year

The Healthy Community model continues to blossom in Bell Hill and Lakeside Apartments with residents working to improve quality of life and has been integrated in the South County with a focus on adolescents and their families.

The Care Mobile provided access and connection to on-going care to approximately 3000 individuals. Youth from Worcester, working in a youth-adult partnership known as the HOPE coalition completed a video on teen sexuality & was effective in helping to shut down a bar near the Worcester Youth Center.

The Plumley Village Health Center continues to reach out to many of the city's least advantaged residents. The Worcester Youth Center completed its 3rd year without any of the youth who attend leaving school before graduation. The literacy program is operating in 3 low-income neighborhoods, schools & the YWCA.

Plans for Next Reporting Year

Working in partnership with community planning initiatives and neighborhood residents, UMass Memorial will implement, refine and maintain community benefit programs that positively affect the communities we serve.

Programs that will be continued in the next reporting year are:

Doherty High School Health Clinic (a school-based health clinic)
Insurance and primary care expansion efforts
Interpreter services
Literacy programs
Mobile dental and medical services
Plumley Village Health Center – and close collaboration with other regional health centers
Healthy Communities Initiatives
Worcester Youth Center
HOPE Coalition
Injury Prevention Coalition
Access to care for the uninsured; including specialty care
Elder Care

Select Community Benefits Programs

Community Benefits Programs

No community benefits programs identified.

Program Type	Estimated Total Expenditures for FY2003	Approved Program Budget for 2004
Community Benefits Programs	Direct Expenses \$18,974,387 Associated Expenses Not Specified Determination of Need Expenditures Not Specified Employee Volunteerism Not Specified Other Leveraged Resources \$4,484,250	\$18,974,387 * Excluding expenditures that cannot be projected at the time of the report.
Community Service Programs	Direct Expenses \$460,081 Associated Expenses Not Specified Determination of Need Expenditures Not Specified Employee Volunteerism Not Specified Other Leveraged Resources \$28,000	
Net Charity Care	\$18,464,927	
Corporate Sponsorships	\$252,925	
	Total Expenditures \$42,664,570	
Total Patient Care-Related Expenses for FY2003		\$636,193,810
Comments: None		