

## **Martha's Vineyard Hospital - FY2008**

---

### **Summary Narratives**

#### **Community Benefits Mission Statement**

Martha's Vineyard Hospital's Community Benefit mission is to develop, in concert with other providers and social service agencies, comprehensive community-based primary and preventive health care programs that come from a needs assessment of major health issues for the people who live on and visit Martha's Vineyard.

#### **Program Organization and Management**

Senior Management Team of the Hospital works collaboratively on determining Community Benefits initiatives that meet stated community benefits goals by interacting and meeting with a variety health care providers, social service agencies and other community organization throughout the Vineyard. The Senior Management team works with all hospital departments in planning, implementing, and publicizing community benefits programs and assists in evaluating their effectiveness.

Information about the Community Benefit mission and programs are shared, as necessary and appropriate, at the regular monthly meetings of the department directors and in internal memoranda and the employee newsletter.

#### **Key Collaborations and Partnerships**

American Red Cross  
Continuum of Care Committee (Island-wide)Dukes County Health Council  
Dukes County Public Health Committee  
Dukes County Veteran's Agency  
Elder Services of Cape Cod and The Islands  
Family Planning of Martha's Vineyard  
Hospice of Martha's Vineyard  
Island Pharmacies  
Martha's Vineyard Association of EMTs  
Martha's Vineyard Chamber of Commerce  
Martha's Vineyard Community Services  
Martha's Vineyard Regional High School  
Martha's Vineyard Vision Fellowship  
Martha's Vineyard Whole Health Alliance  
Massachusetts General Hospital  
· Telemedicine  
· Stroke Protocol  
Municipal Health Officers (six island towns)  
Oak Bluffs Police Officers Association  
Plum TV  
Towns of Oak Bluffs, Tisbury & Edgartown Ambulance Services  
Tri-town Ambulance  
Vineyard Health Care Access Program  
Vineyard Nursing Association  
Wampanoag Tribe of Gay Head (Aquinnah)  
Windemere Nursing and Rehabilitation Center

#### **Community Health Needs Assessment**

Hospital leadership evaluates/responds to community health needs on ongoing basis. Needs/priorities identified through data collection/analysis from sources including:

- Mass. DPH Rural Health Advisory Council
- Dukes County Health Council – includes variety of consumers, provider agencies. Two MVH Senior Managers sit on Council and participate in various working groups, including Primary Care and Mental Health & Substance Abuse Working Groups.
- Dukes County Public Health Committee and MVH with input from providers, consumers, institutions, local opinion leaders - evaluates efficiency/effectiveness of local health system, service gaps and still-needed linkages between providers.
- Patients who use the Emergency, Ambulatory Surgery, Acute Care, and Rehabilitation and Wellness Departments complete Press Ganey surveys.

### Community Benefits Plan

Martha's Vineyard Hospital's target population can be defined as visitors, seasonal and year-round residents of Martha's Vineyard.

The goal of Martha's Vineyard Hospital's Community Benefits Program is to help safeguard the health of the Martha's Vineyard Community. The hospital's short-term goal is to continue to respond to the needs of the community by providing programs focused on prevalent health risks on the island such as tick-borne illnesses. In the long-term, the hospital will strive to continue adapting its programs to the changing needs of the community.

Outcomes and effectiveness are evaluated by community participation in the various programs, the change in statistical data resulting from the programs, and community feedback.

### **Key Accomplishments of Reporting Year**

In FY08 MVH began construction for a new 90,000 sq. ft. facility. Expected completion date January 2010.

MVH continued to work with MA Dept of Public Health to secure license to re-open dental center.

Developed public education programs: childhood vaccinations, proper sharps and medication disposal.

Continued public awareness programs: tick-borne illnesses, breast cancer, lead screening.

### **Plans for Next Reporting Year**

The following are just some of community benefit initiatives underway for the next reporting year:

- Improving access to primary care and reopening dental health center for the Vineyard community will continue to be a priority.
- A significant focus will be the construction of the new 90,000 sq ft facility
- Continue to develop website to make it more relevant for current and prospective patients.
- Expand public involvement in and awareness of public health issues through various media (tv, screenings, forums)-

---

### **Select Community Benefits Programs**

#### **Community Benefits Programs**

No community benefits programs identified.

Program Type	Estimated Total Expenditures for FY2008		Approved Program Budget for 2009
Community Benefits Programs	<a href="#">Direct Expenses</a> <a href="#">Associated Expenses</a> <a href="#">Determination of Need Expenditures</a> <a href="#">Employee Volunteerism</a> <a href="#">Other Leveraged Resources</a>	\$600,000 Not Specified Not Specified Not Specified Not Specified	Not Specified  * Excluding expenditures that cannot be projected at the time of the report.
Community Service Programs	<a href="#">Direct Expenses</a> <a href="#">Associated Expenses</a> <a href="#">Determination of Need Expenditures</a> <a href="#">Employee Volunteerism</a> <a href="#">Other Leveraged Resources</a>	Not Specified Not Specified Not Specified Not Specified Not Specified	
Net Charity Care		\$407,558	
Corporate Sponsorships		Not Specified	
	<b>Total Expenditures</b>	\$1,007,558	

<b>Total Patient Care-Related Expenses for FY2008</b>	<b>\$39,000,000</b>
---	---------------------

- Comments: 1. All numbers are rounded except for the Net Charity Care figure, which, as required, is reported as the actual amount.
2. Where Not Specified is reported, it should be noted that although amounts are not available for reporting, Partners hospitals, health centers, and physicians provide substantial contributions.
3. Health Safety Net amounts reported in hospital summaries are as reported by the Division of Health Care Finance and Policy (DHCFP). In the full text reports of the hospitals, Health Safety Net amounts are also as reported from the hospitals' financial systems.
4. Corporate Sponsorships: Partners hospitals make a number of donations to community organizations.
5. Total Patient Care-Related Expenses for FY2008: These are as reported to the Division of Health Care Finance and Policy (DHCFP) on Schedule 18 of the 403 Cost Report. When community benefit spending is expressed as a percent of total patient care-related expenses, doctors' community benefit spending is removed, since their expenses are not included in the 403 patient care-related expenses. As of February 2009, final 403 reports for FY2008 had not been filed by the hospitals, so amounts were estimated by inflating FY2007 numbers by 4.7%.
6. Approved Program Budget for FY2009: Resources allocated to community benefit programs will be commensurate with the previous years.
7. Prior to FY2006, amounts for Grants for Community Health Centers (included in Direct Expenses) represented only certain types of grants to health centers.