

## Athol Memorial Hospital - FY2016

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### Community Benefits Mission Statement

Athol Hospital's Community Benefit's Program is to encourage healthy lifestyles through outreach, education, and support to the communities we serve. This underlying principle of encouraging healthy lives guides our existing Community benefits activities now and moving forward.

### Target Populations

#### Name of Target Population

#### Basis for Selection

Committed to addressing health disparities that exist in our region and improving access to care and wellness for populations adversely affected by social determinants of health especially populations living in poverty, ethnic and linguistic minorities, disadvantaged youth, veterans, and elders and their caregivers. Priority Health Issues identified are Mental Health and Substance Abuse; Suicide Prevention; Chronic Health Conditions and related risk factors; Nutrition needs including obesity and food insecurity.

2015  
Community Health Needs Assessment quantitative and qualitative data.

### Publication of Target Populations

Marketing Collateral, Website

### Hospital/HMO Web Page Publicizing Target Pop.

[www.atholhospital.org](http://www.atholhospital.org)

### Key Accomplishments of Reporting Year

- Partnered with the Athol Schools to address food insecurity by providing food assistance to 50 low- income and at-risk youth through a weekend backpack food program.
- Promoted healthy summer habits for youth by educating over 225 youth and their families on Lyme disease, benefits of exercise and healthy eating, sun safety and skin cancer detection.
- Provided health information about heart disease and offered free blood pressure screenings to over 50 individuals.
- Promoted wellness by providing flu prevention education in community settings and free flu vaccinations to 75 individuals.
- Promoted mental health awareness and substance use prevention by educating 135 community members and business leaders on recognizing signs and symptoms of substance abuse; sponsoring free disposal of sharps and needles; and supporting men to gain self-care techniques to better manage their behavioral health and/or addiction issues.
- Provided 2 421 individuals with

... 2,121 individuals with counseling on health insurance coverage and financial assistance. Completed 620 health insurance applications and made 367 referrals to reduce barriers to accessing health care and social supports.

- Assisted 149 patients with transportation and as a result were able to follow up with their healthcare and prevented missed appointments.
- Actively participated on community boards and committees including, the North Quabbin Community Coalition, Athol YMCA Diabetes Prevention Advisory Board, Valuing our Children, Franklin Hampshire North Quabbin Opiate Prevention Task Force, and the Regional Behavioral Health Collaborative, to collaboratively address community health needs and gaps in services.

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

In 2017, Athol Hospital remains committed to addressing health disparities that exist in our region, as identified by the 2015 Community Health Needs Assessment. Our community benefit program focuses on improving access for populations adversely affected by socio-economic conditions and abuse and maltreatment, especially low-income individuals and families, school children, elderly, minority, veterans, disabled and vulnerable populations. Priority Health Issues identified are Mental Health and Substance Abuse; Suicide Prevention; Tobacco Use; Chronic Disease; Obesity and Food Insecurity; and Primary Care/ Wellness. We will also initiate planning for a community Health needs assessment to be completed by April 2018.

## **Community Benefits Process**

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### **Select Community Benefits Process**

#### **Community Benefits Leadership/Team**

Athol Hospital's community benefit leadership team is a 13 member Community Investment Committee (CIC), comprised of internal hospital leaders, community members, CHNA 9, MA Department of Public Health and external stakeholders representing the minority community, schools, and local businesses. Meetings are staffed by the VP of External Affairs. The Community Health Needs Assessment and related Community Benefit Plan goals and

activities are shared with the Board of Trustees for approval.

### **Community Benefits Team Meetings**

Formal Meetings of the CIC are held quarterly. Periodic meetings are held between the Community Benefits Manager and the program leads. Updates are provided at the Hospital's senior leadership meetings with feedback incorporated for program expansion and improvement. Members of the management team actively participate in various community agency boards, coalitions, and committees, which assists in identify community needs and facilitates new ideas and community collaborations to address the issues.

### **Community Partners**

Athol Hospital's approach to Community Benefits is to actively participate on and collaborate with cross-sector coalitions, healthcare and behavioral health providers, community, and faith-based organizations and businesses to develop and implement our plan, goals, and strategies. Partners include: North Quabbin Community Coalition; Valuing our Children; Franklin Hampshire North Quabbin Opiate Prevention Task Force; The Regional Behavioral Health Collaborative; Athol and Royalston Boards of Health; Suicide Prevention Task Force; Athol YMCA; Athol Public School District; Athol, Erving, and Winchendon Senior Center; Phillipston Congregational Church; Salvation Army.

### **Community Health Needs Assessment**

#### **Date Last Assessment Completed and Current Status**

During 2015 an updated Community Health Assessment of North Central MA (CHA) was conducted, including the greater Athol and North Quabbin area served by Athol Hospital. The assessment report was released in 2015 and Hospital staff and community partners presented the findings at various venues to community members, stakeholders, and partners. Hospital staff, community partners, and the community benefit's leadership team analyzed the data and identified priority areas and developed a board approved implementation strategy to address the needs. The Assessment and Implementation Plan are posted on the hospital's website at [www.atholhospital.org](http://www.atholhospital.org). The CHNA 9, Athol Hospital, Heywood Hospital, and

Athol Hospital, Heywood Hospital, and Health Alliance Hospital are in the process of developing a Community Health Improvement Plan (CHIP) in response to the CHA. The CHIP will align hospital efforts with other work being done in the region, leverage cross-sector resources and expertise in the community, and maximize the impact on improving population health. The targeted population and priority areas of Athol Hospital's 2016-2018 Community Benefit plan fits within this larger community context.

### Consultants/Other Organizations

Health Assessment partners include Heywood Healthcare (Athol and Heywood Hospitals), Health Alliance Hospital, Community Health Connections FQHC, The Joint Coalition on Health, and the Montachusett Public Health Network. The Center for Health IMPACT (formerly known as the Central Mass. AHEC) was subcontracted with for the quantitative and qualitative data analysis and to prepare the report.

### Data Sources

Community Focus Groups, Hospital, Consumer Group, Interviews, MassCHIP, Public Health Personnel, CHNA

## Select Community Benefits Programs

### Wellness- Influenza Immunizations

<b>Brief Description or Objective</b>	Provide Free influenza immunizations in the community to at risk populations.
<b>Program Type</b>	Direct Services,Prevention
<b>Target Population</b>	<ul style="list-style-type: none"> <li>• <b>Regions Served:</b> Athol, Erving, New Salem, Orange, Petersham, Phillipston, Royalston, Warwick</li> <li>• <b>Health Indicator:</b> Immunization</li> <li>• <b>Sex:</b> All</li> <li>• <b>Age Group:</b> Adult-Elder</li> <li>• <b>Ethnic Group:</b> All</li> <li>• <b>Language:</b> All</li> </ul>

### Goals

**Statewide Priority:** Promoting Wellness of Vulnerable Populations

<b>Goal Description</b>	<b>Goal Status</b>
Offer free influenza shots and flu prevention education in the community to help lower the occurrence of the flu.	Participated in 4 Influenza Clinics held at the Athol Town Hall, Athol Fire Department, Valuing our Children- Patch Office, and the Athol Salvation Army providing 75 flu shots.

### Partners

<b>Partner Name, Description</b>	<b>Partner Web Address</b>
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Town Of Royalston	<a href="http://www.royalston-ma.gov/">http://www.royalston-ma.gov/</a>
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Town of Athol; Council on Aging and Fire Department	<a href="http://www.athol-ma.gov/">http://www.athol-ma.gov/</a>
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Valuing our Children	<a href="http://www.valuingourchildren.org/">http://www.valuingourchildren.org/</a>
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<b>Contact Information</b>	Pam Jobst Outreach Nurse 2033 Main St Athol, MA 01331, <a href="mailto:pjobst@atholhospital.org">pjobst@atholhospital.org</a>
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<b>Detailed Description</b>	Not Specified
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**Wellness- Substance Use, Mental Health**

<b>Brief Description or Objective</b>	Educate the community on substance use prevention and resources. Topics included recognizing the signs and symptoms of substance abuse, safe storage, and handling of medications and sharps and needles. Offer community members with a safe way to dispose of them.
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<b>Program Type</b>	Prevention, Support Group
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<b>Target Population</b>	<ul style="list-style-type: none"> <li>• <b>Regions Served:</b> Athol, Erving, New Salem, Orange, Petersham, Phillipston, Warwick</li> <li>• <b>Health Indicator:</b> Other: Public Safety, Substance Abuse</li> <li>• <b>Sex:</b> All</li> <li>• <b>Age Group:</b> All</li> <li>• <b>Ethnic Group:</b> All</li> <li>• <b>Language:</b> All</li> </ul>
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**Goals**

**Statewide Priority:** Promoting Wellness of Vulnerable Populations

<b>Goal Description</b>	<b>Goal Status</b>
Sharps Disposal Program- Athol Hospital offers a sharps disposal program at no cost to help community members safely dispose of used medical “sharps” such as needles, syringes, and lancets, reducing risk to families and waste management and landfill staff.	Laboratory accepted full biohazard sharps containers from community members and gave them a new empty container for sharps disposal. This program provided a community benefit by reducing the possible injury or exposure to disease from medical sharps used at home; especially the most vulnerable groups at the greatest risk including sanitation and sewage treatment workers, janitors and housekeepers, and children.

Substance Use Prevention and Education- Provide training on recognizing the signs and symptoms of substance abuse and awareness of treatment and prevention resources.	Training on substance use prevention was provided for 28 managers at two local businesses and to 30 local veterans and community members at the Orange Armory. Participated in the National Night Event in Petersham providing information and resources to approximately 75 youth and parents.
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MENders- Men’s support group promoting healthv	6 men participated in the MENders support program that
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living and offering coping skills for managing symptoms associated with mental illness and substance use. met twice a month for a year. Through this support group, men became connected to resources; gained confidence and learned coping skills to better manage their behavioral health and/or addiction issues.

**Partners**

Partner Name, Description	Partner Web Address
Orange Armory	<a href="http://www.townoforange.org/armory-commission">http://www.townoforange.org/armory-commission</a>
North Quabbin Community Coalition	<a href="http://www.nqcc.org/">http://www.nqcc.org/</a>

**Contact Information** Daniel French, Technical Supervisor Pam Jobst, RN, Outreach Nurse ,  
 Daniel.french@heywood.org pjobst@atholhospital.org

**Detailed Description** Not Specified

**Chronic Disease Management**

**Brief Description or Objective** Participation in community health fairs and events to educate the community about heart disease and diabetes and offer blood pressure screenings to help residents identify and monitor risk factors.

**Program Type** Community Education, Direct Services, Health Screening

- Target Population**
- **Regions Served:** Athol, Erving, New Salem, Orange, Petersham, Phillipston, Royalston, Warwick
  - **Health Indicator:** Other: Cardiac Disease, Other: Diabetes, Other: Stroke
  - **Sex:** All
  - **Age Group:** Adult, Adult-Elder
  - **Ethnic Group:** All
  - **Language:** All

**Goals**

**Statewide Priority:** Chronic Disease Management in Disadvantage Populations

Goal Description	Goal Status
Participate in community health and wellness events targeting elderly and those with chronic conditions. Provide health education and screenings on risk factors for chronic conditions.	Provided health education and free blood pressure screenings for 50 individuals at community events including the Petersham Farmers Market, Lakeside apartments, and Athol YMCA.

**Partners**

Partner Name, Description	Partner Web Address
Petersham Farmers Market	<a href="http://www.petershamcommon.com/fridaymarket.htm">http://www.petershamcommon.com/fridaymarket.htm</a>
Athol Orange Housing Authority	<a href="http://www.atholorangehousing.com/">http://www.atholorangehousing.com/</a>
Athol	<a href="http://vmcaathol.org/">http://vmcaathol.org/</a>

YMCA

**Contact Information** Pam Jobst RN Outreach Nurse 2033 Main St Athol, MA 01331 , pjobst@atholhospital.org

**Detailed Description** Not Specified

#### Nutrition

**Brief Description or Objective** In conjunction with area schools and community partners, provide education to youth and families on wellness and healthy behaviors. Support a backpack food program to foster good health in and out of school time by supplementing low-income at risk students with food on the weekend.

**Program Type** Community Education,School/Health Center Partnership

**Target Population**

- **Regions Served:** Athol, Erving, New Salem, Orange, Petersham, Phillipston, Royalston, Warwick, Wendell
- **Health Indicator:** Other: Nutrition, Other: Safety, Physical Activity
- **Sex:** All
- **Age Group:** All Children
- **Ethnic Group:** All
- **Language:** All

#### Goals

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Reducing Health Disparity

Goal Description	Goal Status
Youth wellness education: Education to youth and their parents to encourage healthy behaviors.	Provided education on healthy summer habits for youth and families at 10 community events sponsored by the Elementary Schools, Petersham Farmers Market, North Quabbin Community Coalition, Athol Parks and Recreation, and Local Boards of Health. Over 225 youth and families increased understanding of Lyme disease, exercise, healthy eating, sun safety and skin cancer detection.

Weekend Backpack Food Program: A backpack of kid-friendly and healthy food items is given out on Friday for the weekend when kids are likely to be most hungry. The food is discreetly and conveniently distributed at the school.	50 low income third and fourth-grade students that attend the Athol Public Elementary School benefited from the backpack program. 2,000 bags were distributed. In addition to helping children with having enough food on the weekend and not coming to school hungry on Monday, the school administration expressed it building a connection between the families and the school.
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#### Partners

Partner Name, Description	Partner Web Address
Athol	<a href="http://www.arrsd.org/">http://www.arrsd.org/</a>

Royalston  
School  
District

Petersham Farmers  
Market <http://www.petershamcommon.com/fridaymarket.htm>

North Quabbin  
Community  
Coalition <http://www.nqcc.org/>

Town of Athol-  
Parks and  
Rec Dept.  
and Board  
Health <http://www.athol-ma.gov/>

**Contact Information** Pam Jobst, RN Outreach Nurse Dawn Casavant, VP External Affairs, [pjobst@atholhospital.org](mailto:pjobst@atholhospital.org)  
[dawn.casavant@heywoodhospital.org](mailto:dawn.casavant@heywoodhospital.org)

**Detailed Description** Not Specified

### Social Determinants of Health- Access to Health Care and Community Services

**Brief Description or Objective** Provide psychosocial supports and financial counseling for individuals and families to address needs and overcome barriers to accessing healthcare. Direct support included health coverage enrollments and information and referral.

**Program Type** Direct Services

**Target Population**

- **Regions Served:** Athol, Erving, New Salem, Orange, Petersham, Phillipston, Royalston, Warwick
- **Health Indicator:** Access to Health Care
- **Sex:** All
- **Age Group:** All
- **Ethnic Group:** All
- **Language:** All

### Goals

**Statewide Priority:** Supporting Healthcare Reform

**Goal Description**  
Provide uninsured or underinsured patients with information and enrollment assistance with health care

**Goal Status**  
Provided 2,421 individuals with counseling on health insurance coverage and financial assistance. Completed 620 health insurance applications and made 367 referrals to reduce barriers to accessing health care and social supports.

Arrange for transportation for individuals who do not have transportation and it would be a financial burden to go to their medical appointments. 149 patients assisted with transportation and as a result were able to follow up with their healthcare and prevented missed appointments.

Assist vulnerable individuals with information and referrals to community programs that could address their needs. Assisted 12 community members which either phoned in or walked in, with psychosocial services to overcome barriers to accessing needed health care. Many of



the individuals served were elder caretakers, veterans, individuals with HIV or homeless. Provided information and referrals on issues related to housing, food, transportation, behavioral health, substance abuse.

**Partners**

**Partner Name, Description**      **Partner Web Address**

Not Specified

**Contact Information**

Barbara Nealon, Director of Social Services Terry Hibbert, Director Patient Financial Services  
Bonnie Frank-Hume Social Worker 2033 Main St Athol, MA 01331,  
Barbara.nealon@heywood.org terry.hibbert@heywood.org

**Detailed Description**

Not Specified

**Social Determinants of Health- Community Participation**

**Brief Description or Objective**

Athol hospital staff actively participates in and take leadership roles on a number of organization boards and committees. The objective is to collaboratively plan and implement strategies to reduce identified health needs and gaps in services.

**Program Type**

Community Participation/Capacity Building Initiative

**Target Population**

- **Regions Served:** Athol, Erving, New Salem, Orange, Petersham, Phillipston, Royalston, Warwick
- **Health Indicator:** Mental Health, Other: Diabetes, Other: Nutrition, Substance Abuse
- **Sex:** All
- **Age Group:** All
- **Ethnic Group:** All
- **Language:** All

**Goals**

**Statewide Priority:** Promoting Wellness of Vulnerable Populations, Supporting Healthcare Reform

**Goal Description**

Participation in community-based coalitions and committees.

**Goal Status**

Athol staff actively participated on the North Quabbin Community Coalition, Athol YMCA Diabetes Prevention Advisory Board, Valuing our Children, Franklin Hampshire North Quabbin Opiate Prevention Task Force, Greater Gardner Religious Council, and the Regional Behavioral Health Collaborative. Issues addressed by these committees include mental health and substance abuse, nutrition and child health and wellness.

**Partners**

**Partner Name, Description**

**Partner Web Address**

North Quabbin Community Coalition-  
The North Quabbin

<http://www.nqcc.org/>

THE NORTH QUABBIN

Community Coalition is a community-wide alliance committed to improving the quality of life for all those living and working in the North Quabbin region.

Athol Area Young Men's Christian Association (YMCA) is committed to strengthening and enriching the lives of all individuals, families and our community through quality programs and services that build healthy spirit, mind and body. <http://ymcaathol.org/>

Valuing Our Children addresses the needs of children in the area by providing primary prevention of child abuse through family support, parenting education, and community development. <http://www.valuingourchildren.org/>

Franklin Hampshire North Quabbin Opiate Prevention Task Force works collaboratively region wide to help reduce opioid and heroin addiction, prevent overdose deaths, and improve the quality of life in our community. <http://opioidtaskforce.org/>

Regional Behavioral Health Collaborative provides a forum for dialogue across the North Central and North Quabbin communities to discuss and develop best practices to improve early identification of mental illness and to increase access to behavioral health care.

**Contact Information** Pam Jobst, RN Outreach Nurse 2033 Main St Athol, MA 01331 , [pam.jobst@atholhospital.org](mailto:pam.jobst@atholhospital.org)

**Detailed Description** Not Specified

Expenditures

Program Type	Estimated Total Expenditures for FY2016	Approved Program Budget for 2016
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<a href="#">Community Benefits Programs</a>	<a href="#">Direct Expenses</a> \$393,395 <a href="#">Associated Expenses</a> Not Specified <a href="#">Determination of Need Expenditures</a> Not Specified <a href="#">Employee Volunteerism</a> Not Specified <a href="#">Other Leveraged Resources</a> \$41,378	\$200,000 *Excluding expenditures that cannot be projected at the time of the report.
<a href="#">Net Charity Care</a>	<a href="#">HSN Assessment</a> \$147,524 <a href="#">HSN Denied Claims</a> Not Specified <a href="#">Free/Discount Care</a> \$217,146 <a href="#">Total Net Charity Care</a> \$364,670	
<a href="#">Corporate Sponsorships</a>	\$13,517	
	<b>Total Expenditures</b> \$812,960	
<b>Total Patient Care-Related Expenses for FY2016</b>		\$22,222,138
<b>Comments:</b> None		

### Optional Information

Expenditures	Amount	
<a href="#">Community Service Programs</a>	<a href="#">Direct Expenses</a> Not Specified <a href="#">Associated Expenses</a> Not Specified <a href="#">Determination of Need Expenditures</a> Not Specified <a href="#">Employee Volunteerism</a> Not Specified <a href="#">Other Leveraged Resources</a> Not Specified	
<b>Total Community Service Programs</b>	Not Specified	
<b>Bad Debt:</b>	Not Specified	Not Specified
<b>IRS 990:</b>	Not Specified	