COMMUNITY HEALTH IMPLEMENTATION STRATEGY

Strategies to Address Community Health Needs

Milford Regional Medical Center developed an Implementation Strategy to illustrate the hospital's specific programs and resources that support ongoing efforts to address the identified community health priorities. This work is supported by community-wide efforts and leadership from the Community Benefits Leadership & Advisory Committee and endorsed by the Board of Trustees. The goal statements, suggested strategies, metrics and inventory of existing community assets for each of the priority areas are listed in the grid below.

Priority Area #1: Access to Healthcare and Missing Services

Overarching Goal: Increase provider availability and access to appointments, insurance and reduce wait times.

Access to Healthcare and Missing Services			
Strategies	**Metrics**	**Resources/Potential Partner Organization**	
Continue with Transitions in Care Clinic to reduce readmission rates to provide short-term care and try to pair patients with primary care physicians	• Reduction of readmissions • Number of patients treated at the TIC Clinic	• UMass Memorial - Milford Regional hospitalists	
Research and identify potential resources for intervention for immediate care needs and follow-up and to coordinate care within service area	• Establish solution • Number of cases assisted	• UMass Memorial – Milford Regional social workers • Community social work agencies	
Continue to work with the Physician Recruitment Committee with a focus on additional primary care and mental health providers	• Number of additional PCP and mental health providers reported in annual Community Benefits Report	• Milford Regional Physician Group	
Educate community on navigating care alternatives and appropriate settings to receive care vs. going to the ER for non-emergent care. (Urgent Care, Telehealth, Minute Clinics)	• Reductions in non-emergent visits in ER	• Frankin Department of Public Health • Convenient MD	

Priority Area #2: Affordability: Income and Housing

Overarching Goal: Reduce food insecurity, increase access to healthy foods.

Affordability: Income and Housing			
Strategies	**Metrics**	**Resources/Potential Partner Organization**	
Develop partnerships with local agencies within the hospital's service region to provide case management to help those facing housing and food insecurity navigate the system.	• Number of partnerships developed	• Blackstone Valley Emergency Shelter • Pathways to a Better Life • YMCA • New England Chapel • Advocates • CMHA	
Support collaboration among organizations to meet unmet needs and eliminate barriers, such as food preparation	• Number of partnerships developed	• Community kitchens • Senior centers • Dean College • Youth centers	
Because food and housing insecurities are often linked, establish a network of organizations that can pool resources and streamline assistance in a collaborative effort to increase resources in the service area	• Number of "Hope for the Homeless" Cards distributed • Hits on website	• Local Police Departments • Town of Franklin (Website) • Blackstone Valley Partnership for Public Health	
Connect with community churches and other local nonprofits to communicate resources to immigrant and non-English speaking populations	• Number of people requesting assistance from organizations	• Local churches • Food pantries • EMK • Salvation Army	
Because food and housing insecurities are often linked, connect resources for homelessness and medical care facilities mapping project.	• Number of "Hope for the Homeless" Cards distributed • Hits on website.	• Milford Regional Physician Group • Franklin Health Dept.	

Identify opportunities for food rescue and collaborate with food panty efforts to regions within our service area	• Number of clients served • Volunteer hours	• Metz Culinary Management • Dean College	
Establish connections with farms, grocery stores to increase food donations	• Number of connections made	• Grocery stores • Local farms	

Priority Area #3: Mental Health/Behavioral Health and Substance Use

Overarching Goal: Increase access to mental health and substance use providers and availability of mental health services for inpatient, outpatient and emergency mental health services for youth and elderly.

Mental Health/ Behavioral Health and Substance Use			
Strategies	**Metrics**	**Resources/Potential Partner Organization**	
Provide mental health services bedside through MACT and increase awareness to outside organizations to promote smooth transitions in the community	• Number of patients served by the MACT Team • Measure follow up mental health care outside of the hospital	• Riverside • Spectrum • EMK • Tri-Valley Elder Services	
Promote awareness of mental health needs of elderly through the "Dementia Experience" Program	• Number of attendees • Surveys to attendees	• Cornerstone of Milford • Tri-Valley Elder Services • Senior centers • Libraries	
Reduce substance use across the region and increase access to mental health services for all ages through partnerships,	• Establishment of partnerships	• SAFE Coalition • Riverside • Mental Health Collaborative • Wayside • Advocates	
Increase collaboration between hospital, advocates, and community organizations to assist patients with mental health and/or substance use issues upon discharge.	• Number of reoccurring appts. after discharge • Track mental/behavioral appts outside of hospital	• UMass Memorial – Milford Regional • Advocates • Wayside • Riverside Community Care • Mental Health Collaborative	

		• Chris' Corner • No One Walks Alone (NOWA)	
Collaborate with schools and after school programs to address behavioral/mental health issues with school-aged children	• Number of collaborations	• Local schools • After school programs	
Increase networking opportunities for community organizations to foster collaboration and efficient use of resources, as well as share best practices.	• Number of networking events	• Mental health agencies • Community centers	
Increase access to bilingual resources and cultural sensitivity awareness for immigrant populations.	• Number of resources available	• EMK • UMass Memorial – Milford Regional Interpreter Services • Riverside Community Care • Local places of worship • Community outreach workers	

Priority Area #4: Worcester County Health Outcomes

Overarching Goal: Continue to improve health outcomes for patients who reside in Worcester County.

Worcester County Health Outcomes		
Strategies	**Metrics**	**Resources/Potential Partner Organization**
Facilitate networking and collaboration among external organizations to help improve health outcomes	• Number of networking events • Number of collaborations	• EMK • American Heart Association • Red Cross • Milford Regional Physician Group

Provide educational opportunities in the community on the importance of screenings and preventative health measures	• Number of patients in Heart Failure Clinic • Number of mammograms • Number of other screenings	• UMass Memorial - Milford Regional Heart Failure Clinic • Commission on Cancer • Milford Regional Physician Group
Continue to promote and refer patients to Heart Failure Clinic	• Number of patients seen	• UMass Memorial - Milford Regional Heart Failure Clinic
Develop community partnerships to grow resources at libraries, senior centers, to provide items (scales, health logs) to assist patients with disease management	• Number of items checked out • Distribution of health logs	• American Heart Association • Libraries • Senior centers • MR Heart Failure Clinic