COMMUNITY BENEFITS PLAN
2020-2023
UMASS MEMORIAL - MARLBOROUGH HOSPITAL

I. Executive Summary

UMass Memorial – Marlborough Hospital 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, as well as nonmedical conditions that negatively impact the health and wellness of our community.

Community Benefits Program

Target populations for Marlborough Hospital's Community Benefits initiatives are identified through a needs assessment that is conducted every three years. The 2022 needs assessment was done in conjunction with a variety of community partners, including: Hudson Board of Health, Marlborough Board of Health, Human Service Coalitions and other stakeholders. Our process included gathering community input, as well as the analysis of general data collected from the hospital and publicly available data sources. The process also incorporated a survey component that was available online and hardcopy in English, Spanish and Portuguese, key informant interviews and focus groups. The 2022 Community Health Needs Assessment (CHA) and subsequent Community Health Improvement Plan (CHIP) for Marlborough Hospital will focus mainly on the communities of Marlborough and Hudson.

Our target populations are the medically-underserved, uninsured and vulnerable groups of all ages.

The Community Benefits Plan

During the assessment process, the Marlborough/Hudson community identified the following areas of concern:

- Alcohol and Substance Use Disorder
- Mental Health
- Aging problems
- Access to health care
    - Primary Care
    - Insurance
- The impact of Covid
- Overweight/obesity

Based on this input, Marlborough Hospital's Community Benefit plan includes the following priorities and goals:

Community Benefit Priority	Goal
Priority 1: **Increase Awareness of Substance Use Disorder**	**Goal 1:** Collaborate with local agencies and government officials to address the growing impact of substance use disorder in the region. Focus on alcohol and opioids.
Priority 2: **Mental Health**	**Goal 2:** Support programs and develop collaborative efforts that will increase awareness and address mental health needs in the community.
Priority 3: **Promote Healthy Aging**	**Goal 3:** Support efforts that promote healthy aging among seniors in the region.
Priority 4: **Increase Access to Health Care**	**Goal 4:** Support programs and policies that promote health equity and reduce health disparities.
Priority 5: **The Impact of Covid**	**Goal 5:** Support programs and policies addressing the economic, social, behavioral health that resulted from the pandemic.
Priority 6: **Promote Health and Wellness, specifically obesity**	**Goal 5:** Support efforts that promote healthy weight and lifestyles among youth, adults and seniors.

II. Community Benefits Mission

The Community Benefits Mission incorporates the World Health Organization's broad definition of health defined as "a state of complete physical, mental and social well-being and not merely the absence of disease." Marlborough Hospital's Community Benefits Mission was developed and recommended by the Community Benefits Advisory Committee and approved by Marlborough Hospital's Board of Trustees.

III. Targeted Geography and Vulnerable Populations

Marlborough Hospital aims to address both the letter and the spirit of the IRS Community Health Needs Assessment (CHA) regulation in that it will be addressing the health needs and concerns of the region's most underserved populations. The IRS mandate gives hospitals flexibility in how they define the community discussed in the CHA. The community could be defined by a specific geographic area or target populations (e.g., children, seniors), as long as the definition still captures the interests of more vulnerable groups such as the underserved, low income, or minority populations.

Geography

Marlborough Hospital serves the Massachusetts MetroWest region which consists of cities and towns that span east to west from Framingham to Westborough and north to south from Bolton to Hopkinton. These four cities and towns as well as cities and towns that fall inside the radius they make up, such as Marlborough, Hudson, Northborough, Southborough, Stow, Berlin, Sudbury, Westborough and parts of Framingham have aggregate populations that exceed 200,000. During 2019-2022, 34.5% of the hospital's patient encounters were residents of Marlborough, 15.9% were from Hudson. The remaining 49.6% of patient encounters were from surrounding towns, with the majority within a 15-mile radius of Marlborough. The Marlborough Hospital service area encompasses primarily Middlesex County residents so for comparison purposes, demographic data was used for Middlesex County.

Vulnerable Populations

Our target populations focus on medically underserved and vulnerable groups of all ages, as follows:

- Seniors
- Youth at risk
- Underinsured and Uninsured
- Individuals suffering from mental illness and/or substance use disorder

IV. Background

Marlborough Hospital's Community Benefits Program strives to meet and exceed the Schedule H/Form 990 IRS mandate to "promote health for a class of persons sufficiently large so the community as a whole benefits." Our programs mirror the five core principles outlined by the Public Health Institute in terms of the "emphasis on communities with disproportionate unmet health-related needs; emphasis on primary prevention; building a seamless continuum of care; building community capacity; and collaborative governance."

We adhere to the Affordable Care Act requirements to conduct community health needs assessments and create community health improvement plans. Marlborough Hospital along with Public Health and Public Education representatives are leading a collaborative, comprehensive community health planning effort to measurably improve the health of area residents. Our planning process is data-led, evidence-based and demonstrates true community partnerships.

Target populations for Marlborough Hospital's Community Benefits initiatives are identified through a needs assessment that is conducted every three years. The process used to complete this assessment is described in detail in the Methods section below.

Marlborough Hospital's Community Benefits Program works closely with: medically underserved populations; neighborhood groups; local and state government officials; local and state Health Department staff and other city departments; faith-based organizations; advocacy groups; schools and other community-based organizations.

V. Methods

The recently completed Community Health Improvement Planning process included two major components:

1. A Community Health Needs Assessment (CHA) to identify the health-related needs and strengths of the community
2. A Community Health Improvement Plan (CHIP) to determine major health priorities, overarching goals, and specific objectives and strategies that can be implemented in a coordinated way.

The assessment and planning process for the Marlborough/Hudson area aimed to serve multiple purposes, including to:

1) serve as the community health needs assessment for the hospital's Schedule H/Form 990 IRS mandate
2) engage the community in a collaborative health planning process to identify shared priorities, goals, objectives, and strategies for moving forward in a coordinated way.

To develop a shared vision and plan for improved community health, and help sustain implementation efforts, the Marlborough/Hudson planning process engaged multi-sector community organizations, community members, and partners through different avenues:

This CHA aims to identify the health-related needs and strengths of the MetroWest region by defining health in the broadest sense and recognizing numerous factors – from employment to housing to access to care – that have an impact on the community's health. Social, economic, and health data were drawn from existing data sources, such as the Massachusetts (MA) Department of Public Health, the U.S. Census Bureau, the U.S. Bureau of Labor Statistics, Centers for Disease Control and Prevention, 495/MetroWest Partnership, MetroWest Health Foundation, National Cancer Institute, UMass Memorial Health Center of Clinical Integration and UMass Memorial Health – Marlborough Hospital (complete list of references are included in the

Appendix). In addition surveys and focus groups representing area residents, community stakeholders, and multi-sector organizations, participated to gather feedback on community strengths, challenges, priority health concerns, and opportunities for the future. The component are listed below:

- Health profile and demographics
- Data assessment
- Key informant survey
- Focused interviews

Summary of Community Needs

Through this process, the community identified Substance and Alcohol Use and Abuse, Mental Health, Access to Health Care, Healthy Aging, The Impact of Covid and Overweight/Obesity as major areas of concern.

The Community Benefits Plan

The summary of Marlborough Hospital's Priorities and Goals are listed below, followed by the detailed Community Benefit Action Plan. Marlborough Hospital's strategy is to understand what programs are being developed within the community organizations with which we partner, and to augment their efforts with hospital resources rather than develop programs on our own. Detailed action plans will be developed annually and tracked throughout the course of the year to monitor and evaluate progress and determine priorities for the next year. This plan is meant to be reviewed annually and adjusted to accommodate revisions that merit attention.

VI. Priority Areas and Goals

Community Benefit Priority	Goal
Priority 1: **Increase Awareness of Substance Use Disorder**	**Goal 1:** Collaborate with local agencies and government officials to address the growing impact of substance use disorder in the region. Focus on alcohol and opioids.
Priority 2: **Mental Health**	**Goal 2:** Support programs and develop collaborative efforts that will increase awareness and address mental health needs in the community.
Priority 4: **Increase Access to Health Care**	**Goal 4:** Support programs and policies that promote health equity and reduce health disparities.
Priority 4: **Promote Healthy Aging**	**Goal 3:** Support efforts that promote healthy aging among seniors in the region.
Priority 5: **The Impact of Covid**	**Goal 5:** Support programs and policies addressing the economic, social, behavioral health that resulted from the pandemic.
Priority 5: **Promote Health and Wellness, specifically obesity**	**Goal 5:** Support efforts that promote healthy weight and lifestyles among youth, adults and seniors.

Priority 1: Increase Awareness of Substance Use Disorder

Priority 1: Increase Awareness of Substance Use Disorder Collaborate with local agencies and government officials to address the growing impact of substance use disorder in the region. Focus on alcohol and opioids.			
Objective 1.1: Assist those with substance use disorder			
Outcome Indicators: Threshold		**Target**	**Stretch**
• Programs offered		6 (2 per year)	
• Number of support group utilizing conference rooms		2	
Strategies:	**Timeline: Year 1,2,3**		
1.1.1: Educate community on substance use disorder • Develop educational programs with community partners • Offer 2 programs per year for students and parents • Participate in community initiatives/coalitions which focus on substance use disorder	1,2,3		
1.1.2: Provide facilities for support groups to meet • Monthly meetings for groups suffering from substance use disorder			
1.1.3: Offer programs to educate public school students • Deliver presentations to be offered in collaboration with Marlborough/Hudson public schools			
Monitoring/Evaluation Approach: • Tracking attendees • Evaluation tools for programs			

Priority 2: Mental Health

Priority 2: Mental Health Support programs and develop collaborative efforts that will increase awareness and address mental health needs in the community.			
Objective 1.1: Assist those with mental health issues			
Outcome Indicators: Threshold		**Target**	**Stretch**
• Develop with community partners education programs to be offered		3 (1 per year)	
• Identify programs where we can philanthropically support local agencies		3 (1 per year)	
Strategies:	**Timeline: Year 1,2,3**		
1.1.1: Develop with community partners education programs to be offered • Senior centers • Youth at risk • Outpatients	1,2,3		
1.1.2: Identify programs where we can philanthropically support local agencies	1,2,3		
1.1.2: Provide conference room space for NAMI training and educational programs.			
Monitoring/Evaluation Approach: • Tracking attendees • Program reports			

Priority 3: Increase Access to Health Care

Priority 3: Access to Care Support programs and policies that promote health equity and reduce health disparities.		
Objective 1. 1: Provide access to community-based medical and preventive services for vulnerable populations and ethnic/linguistic minorities.		
Outcome Indicators: Threshold	**Target**	**Stretch**
• Percentage increase in community members enrolled in services	3%	
• Number of seniors receiving screenings	100	
• Conduct community health fairs	2	

Priority 3: Access to Care Support programs and policies that promote health equity and reduce health disparities.	
Objective 1. 1: Provide access to community-based medical and preventive services for vulnerable populations and ethnic/linguistic minorities.	
Strategies:	**Timeline: Year 1,2,3**
1.1.1: Increase coverage by assisting community members looking to enroll in Mass Healthcare • Provide staff and services at hospital for Commonwealth Connector and SNAP programs	1,2,3
1.1.2: Improve access to care by providing medical services to seniors. • Participate in annual health fair by providing screenings	1,2,3
1.1.3: Conduct Community Health Fairs	2,3
Monitoring/Evaluation Approach: • Tracking/ reporting/ patient services • End of year reports	

Priority 4: Promote Healthy Aging

Priority 4: Promote Healthy Aging Support efforts that promote healthy aging among seniors in the region.		
Objective 1. 1: Educate community members regarding health issues facing seniors and their families		
Outcome Indicators: Threshold	**Target**	**Stretch**
• Present programs of interest to seniors	3 (1 per year)	
• Provide expertise to help with dementia-friendly communities (serve on local community committees)	2 (communities)	
Strategies:	**Timeline: Year 1,2,3**	
1.1.1: Present topics of interest to senior community • Offer presentations on Medication Reconciliation • Hold sessions on the application of Speech Therapy particularly for those with Parkinson's	1,2,3	

Priority 4: Promote Healthy Aging Support efforts that promote healthy aging among seniors in the region.	
Objective 1. 1: Educate community members regarding health issues facing seniors and their families	
1.1.2: Assist senior centers in developing programs • Provide expertise to help with Dementia-friendly communities	1,2,3
Monitoring/Evaluation Approach: • Tracking/ reporting/ patient services • End of year reports	

Priority 5: Address the Impact of Covid

Hospital Priority 5: Address the Impact of Covid Support programs and policies addressing the economic, social, behavioral health that resulted from the pandemic..		
Objective 1. 1: Educate community members regarding the impact of healthy eating and exercise on their risk of disease.		
Outcome Indicators: Threshold	**Target**	**Stretch**
• Collaborate with local businesses and organizations to present programming to the community	1	
• Number of attendees	50	
Strategies:	**Timeline: Year 1,2,3**	
1.1.1: Present topics in the forefront of pandemic recovery • Economic recovery • Labor shortage	1	

Priority 5: Promote Health and Wellness, particularly obesity

Hospital Priority 5: Promote Health and Wellness, particularly obesity Support efforts that promote healthy weight and lifestyles among youth, adults and seniors.		
Objective 1. 1: Educate community members regarding the impact of healthy eating and exercise on their risk of disease.		
Outcome Indicators: Threshold	**Target**	**Stretch**
• Annual Safe Summer Fun Day	2 (1 per year)	

Hospital Priority 5: Promote Health and Wellness, particularly obesity

Support efforts that promote healthy weight and lifestyles among youth, adults and seniors.

Objective 1. 1: Educate community members regarding the impact of healthy eating and exercise on their risk of disease.

• Number of attendees	1500 (per year)	
• Percentage increase in number of helmets distributed	2%	

Strategies:	**Timeline: Year 1,2,3**
1.1.1: Present topics in the forefront of patient education • Offer Community Education sessions • Develop and distribute information that discusses and reviews recent health trends in local publications	2,3
1.1.2: Demonstrate the basics of healthy diet including foods to choose, amounts to be eaten, cooking techniques and importance of physical activity • Participate in local events at high schools and as requested • Facilitate discussion group on food and drug interactions	1,2,3
1.1.3: Participate in elementary school physical activity and nutrition programs • Partner with schools during “walk to school” events	1,2,3
1.1.4: Organize and host injury prevention program targeted at children • Provide health screenings and fun, interactive instruction to children and their families • Distribute free bike helmets to every child who attends • Car seat safety education booth and provide car seats via raffle	1,2,3
1.1.5: Provide assistance for disadvantaged youth to participate in healthy programs • Provide camp scholarship to Metrowest Boys and Girls Clubs • Sponsor basketball team at Metrowest Boys and Girls Clubs	1,2,3

Monitoring/Evaluation Approach:

- Tracking/ reporting/patient services
- End of year reports

Appendix: Data Sources

Secondary Data Sources

Analysis of existing social, economic, and health data from secondary sources was used in this report. These sources are listed below. The assessment aimed to gather data at the community level, including from Marlborough and Hudson, although in some instances only county level data were available.

495/MetroWest Partnership. Retrieved from https://www.495partnership.org/service-area;%20www.495partnership.org/reports-and-data

Centers for Disease Control and Prevention. *Youth Risk Behavior Survey Data Summary & Trends Report 2011-2021.* Retrieved from www.cdc.gov/nchs/fastats/state-and-territorial-data.htm

Centers for Disease Control and Prevention National Center for Health Statistics. Retrieved from www.cdc.gov/nchs/fastats/state-and-territorial-data.htm

City of Marlborough, MA Retrieved from https://www.marlborough-ma.gov/

Commonwealth of Massachusetts. Retrieved from https://www.mass.gov/orgs/executive-office-of-health-and-human-services

IProperty Management. Retrieved from https://ipropertymanagement.com/research/homeownership-rate-by-state

Massachusetts Association of Realtors Retrieved from https://www.marealtor.com/market-data/

Massachusetts Crime Statistics. Retrieved from https://ma.beyond2020.com/ma_tops

Massachusetts (MA) Department of Public Health. Retrieved from https://www.mass.gov/orgs/executive-office-of-health-and-human-services

Marlborough Economic Development Corporation. Retrieved from https://marlboroughedc.com/

MetroWest Health Foundation. Retrieved from mwhealth.org/knowledge-center/health-data; mwhealth.org/knowledge-center/foundation-publications

National Low Income Housing Initiative. Retrieved from https://www.nlihc.org/

National Cancer Institute State Cancer Profiles. https://statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=massachusetts

Town of Hudson, MA https://www.townofhudson.org/

UMass Memorial Health

UMass Memorial Health Center of Clinical Integration

UMass Memorial Health – Marlborough Hospital

U.S. Census Bureau. Retrieved from www.census.gov/data

World Health Organization Retrieved from www.who.int/news/item/27-04-2020-who-timeline---covid-19

Appendix C: Community Input, Key Informant Interviews, Focus Groups, and Community Dialogues

Community Input

Requests were made to the community to provide input by completing a survey. Surveys were made available online and hardcopy in English, Spanish and Portuguese.

Key Informant Interviews

Numerous key informant interviews were conducted by the MetroWest Health Foundation, Marlborough Hospital augmented this listing by reaching out to a variety of community leaders in the Marlborough area. They each answered a specific set of questions designed to uncover a high level view.

The interviews explored community leaders' perspectives of the health needs and strengths (including assets and resources), challenges and successes of working in these communities, and perceived opportunities to address these needs.

In total, the key stakeholder interviewees were from a range of sectors and agencies: government, hospital, medical, health centers, secondary education, higher education, business, faith community, philanthropic and community organizations that focus on specific populations (e.g., youth, homeless, immigrant communities, ethnic/cultural groups, disabled community).

Focus Groups

While a wide variety of focus groups were conducted by the MetroWest Health Foundation and its partners, the following focus groups were conducted by Marlborough Hospital:

- Community Benefit Advisory Committee
- Patient Family Advisory Council
- Faith-based leaders
- Seniors