Marlborough Hospital
A Member of UMass Memorial Health Care

2009 COMMUNITY BENEFITS NARRATIVE

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Overview

Marlborough Hospital, a member of UMass Memorial Health Care, Inc., is a valued member of the communities it serves. For nearly 119 years, it has provided health services for the City of Marlborough and the surrounding communities of Berlin, Bolton, Hudson, Northborough, Stow, Southborough, Sudbury and Westborough. Marlborough Hospital joined the UMass Health System in 1995, and became part of the UMass Memorial system in 1998. This affiliation assures top quality medical services are provided locally in the community, within an integrated health care system offering advanced quaternary and tertiary care, medical research, education and community outreach.

The hospital is currently licensed to operate 79 beds and is fully accredited by the Joint Commission of Accreditation of Healthcare Organizations. Following a highly successful unannounced Joint Commission Survey in August of 2009, it was noted by the Joint Commission Auditor that we were the only community hospital he knew of that had no negative findings on the ten National Patient Safety Goals.

Our annual patient volume includes over 4,200 admissions, 61,100 emergency and outpatient visits and 17,500 patient days with an average length of stay of 4.15 days. The hospital’s service area has an estimated population of 160,000.

Marlborough Hospital provides a full range of inpatient and outpatient acute care services. The current patient services include a 35-bed inpatient medical/surgical unit, a 10-bed special care unit (SCU), a 22-bed inpatient locked psychiatric unit, a 24-hour Emergency Department, outpatient day surgery unit, rehabilitation services, and a state-of-the-art Diagnostic Imaging department with a full range of digital diagnostic and therapeutic services. The hospital also provides diabetes education, outpatient oncology services and a center for pain management.

In 2009, we began a collaboration with Southborough Medical Group which will expand our services in our communities to the south and east. We will move our Women’s Health, Endoscopy, and Occupational Health Departments to Southborough. This brand new, state of the art facility will ensure that we continue the best care for our current patients and allow us to serve patients who may not have previously traveled to Marlborough Hospital.

As a member of UMass Memorial Health Care, Marlborough Hospital is positioned for long-term stability and growth. The hospital continues to maintain its identity as a locally governed acute care, nonprofit community hospital. With the support of UMass Memorial, Marlborough Hospital is able to provide enhanced services, superior quality and lower health care costs to all people living within the service area.

Marlborough Hospital recognizes the new challenges facing health care and the needs of the community members it serves. These include the growth of the non-English speaking population, the introduction of the state mandated MassHealth Reform Insurance Program for the uninsured, need for both preventative and comprehensive health care regardless of economic means and the support of individuals to live healthier lifestyles.
I. Community Benefit Mission Statement

A. Summary
With guidance and interaction with our Community Benefits Advisory Committee, we chose to revise our mission statement to better reflect our commitment to our community.

*Marlborough Hospital is committed to improving the health status of all those it serves, reducing health disparities, and promoting wellness of vulnerable populations in collaboration with our community partners.*

B. Approval of Governing body

This report highlights Community Benefits, a formal plan developed in accordance with the principles of the Community Benefit Guidelines. The plan was developed with appropriate community participation, engagement and approval by the hospital’s Board of Trustees.

II. Internal Oversight and Management of Community Benefit Program

A. Management Structure

Marlborough Hospital’s values include being a responsible partner within our community. This responsiveness is led by the CEO as the Chief Community Benefits Liaison. The CEO serves as the liaison for the Community Benefit programs and activities and works closely with hospital staff, community-based organizations and agencies, and other acute care hospitals. Members of our management team participate on various community agency boards, coalitions and committees. Together with these agencies, we define the needs, generate ideas, and create services, benefits and programs to aid our communities.

The Community Benefit Program goals encompass many aspects of community health, such as:

- Improving the health status and quality of life for all those in the hospital’s service area
- Recognizing that universal access to health care is a human right and that our mission is to provide that care
- Becoming the major health education resource in the community
- Creating community awareness that each of us plays a role in our own health and well-being.

B. Internal Communication of Community Benefit Mission and Programs

Information is disseminated system-wide to all Marlborough Hospital staff in a variety of ways, including:

- *Reflections*, our employee newsletter
- Monthly Management Team meetings
- E-mail communications
- Publication and open availability of the annual *UMass Memorial Health Care, Inc. Community Benefit Report*
- Yearly presentation to the Board of Trustees
III. Community Health Needs Assessments

A. Process, Including Participants

The Community Benefit programs are based on community needs assessments, collaboration with community members and input from formal and informal community leaders. The hospital utilizes additional assessments to provide programmatic guidance.

In 2009, the hospital based its Community Benefit activities on the recommendation of members of the Community Benefits Advisory Committee and community needs assessment findings. Consistent with our holistic approach to Community Benefits, the hospital also relies on community-based health and social service organizations, foundations and schools to identify community needs as we plan, design and implement our programs and initiatives. One of our goals for the 2009 program was to establish a new Community Benefits Advisory Committee to provide input and feedback regarding our program. Our community partners enthusiastically stepped up to participate in our committee and we continue to add partners to every meeting. In addition, several members of our Board of Trustees, themselves respected members of community organizations, participate on our committee.

B. Information Sources

- We are actively updating the Needs Assessment for 2010. The Community Benefits Advisory Committee is meeting to develop the plan and strategy for implementation.

- MetroWest Health Data Book, MetroWest Community Health Care Foundation, 2001-2002
- Detailed Reports gathered from the Mass CHIP site have also guided our Community Benefits activities.

IV. Community Participation

A. Process and Mechanism

We have taken the necessary steps to engage active members of the community in the CBAC. Our activities have included:

- Assisting residents in enrollment for health insurance coverage. We are the primary location in the area for all residents looking to enroll in the Commonwealth Connector
- Offering assistance and connections to primary care services, which includes partnering with local PCP’s and dentists through the hospital and surrounding communities.
- “To Your Health” programs aired on the local cable channels. Topics included: Sleep Disorders, Boards on Board, My Medication and Me, Stroke and Ways to Minimize Your Risk, No Diversion, and Making the Choice for Senior Living.
- Educational seminars for residents within our demographic service area on such topics as diabetes, high blood pressure, stroke prevention, cholesterol control, sleep disorders,
prostate health, restoring continence, treatment for the arthritic knee, understanding MRSA, snoring & sleep apnea, heart failure, and healthy eating.

- Young Adult Initiative Board which was designed to provide support and opportunities to increase young people’s ability in the Metro West area to succeed in the labor market. The program targets low income youth at 200% of the poverty level who are in school and those youth not engaged in school.

B. Identification of Community Participants

Through this process, the following list of Community Benefits Advisory Committee members and agencies have been identified: Marlborough Hospital, Marlborough Mayor’s Office, the United Way of Central Massachusetts, the Superintendent of Marlborough Public Schools, Assabet Valley Regional Technical High School, Marlborough Boys & Girls Clubs of MetroWest, SMOC and Employment Options. These agencies will work with us as we identify the current needs of the community and identify strategies to meet those needs.

C. Community Role in Review of Community Benefit Plan and Annual Reports

The new Community Benefits Advisory Committee will meet on a quarterly basis to discuss, plan, advise and assist in the implementation of the many various community benefit efforts based on community identified needs. The public can access this information through the state Attorney General's web site (www.ago.state.ma.us).

V. Community Benefits Plan

A. Process of Development of Plan

Marlborough’s Community Benefit activities are developed based on previously noted community assessments and existing board member recommendations. This year, through the input of the new members of the CBAC, we will review previous assessments as well as more current needs assessments such as the Metrowest Community Health Care Foundation reports. We will review and compare current practices to emerging needs, and programs will be adjusted and added based on the most current information available. We have engaged an outside firm to assist us with our upcoming Community Needs Assessment.

The target populations for our outreach efforts continue to be people who are uninsured, underinsured and have limited access to medical care and preventative information. The hospital works closely with the local school systems because children are the entry point into working with the entire family.

B. Choice of Target Population(s)/Identification of Priorities

Based on the information gathered from prior community needs assessments, the following priorities were established:

- Relative to MetroWest overall, Marlborough and Hudson have high rates of teen births and allegations of child maltreatment. We have representation from the Marlborough school
system as well as Assabet Valley Regional Technical School on our CBAC to assist us in working on communication and outreach programs for the youth in our communities.

- MetroWest indicators for insufficient physical activity are at or below state averages. Working with the school systems, we will determine ways to communicate the benefits of increased physical activity. We participate in Marlborough’s Wellness Committee meetings to devise programs and solutions to increase physical activity not only in the schools but also with the adult population.

- Work to reduce language barriers with patients from the non-English speaking communities and work to communicate across cultural boundaries with people of all ages. The members of our Interpreter Services Department are a constant source of ideas and recommendations to ensure that we make our hospital as accessible as possible to our patients and their family members. In addition, we train all employees on sensitivity to the differences of the cultures we serve.

- Access to and enrollment in medical and dental care and insurance for uninsured/immigrant youth age 18 and younger in partnership with local schools, the Boys and Girls Clubs of MetroWest and other community partners.

C. Short-term (One to Two Years) and Long-term (Three to Five Years) Strategies and Goals

Short-term goals:

- Actively enroll the uninsured citizens of our communities in the MassHealth Reform Program. Provide ongoing assistance to families enrolling in MassHealth through our financial counselors. We have added to the staff of this department in addition to extending the hours of operation. In addition, we will spend more time enrolling community members by going out into the community to address this need. We have also begun to assist families in enrollment in the SNAP Program (previously known as the Food Stamps Program).

- Continue work with local churches (Hudson and Sudbury) that have opened free walk-in medical programs.

- Work with the local Boards of Health to ensure that the children and adults in need of flu vaccinations receive them in a timely manner.

- Focus on our changing community (elder, non-English speaking) and create programs to assist with issues of health.

- Work with the school systems to communicate healthy lifestyle information to the growing teen population in our service area.

- Continue to publish “Be Well” which is a newsletter sent to 21,000 of our community member households covering various topics that give information on how to maintain a lifestyle which allows them to “Be Well”.

- Complete an updated Community Needs Assessment for the coming year.

Long-term goals:

- Through targeted outreach, expand access to health care for those where traditional access is difficult.
• Continue to conduct outreach activities that support insurance enrollment. Assist eligible citizens with enrollment into the Commonwealth Connector Health Insurance Program.
• Develop a preventative care agenda with our community members thereby improving the health and wellness of our community.
• Based on Analysis of the Community Needs Assessment, create programs to meet the identified needs and measure our results.

D. Process for Measuring Outcomes and Evaluating Effectiveness of Programs

• Continue outreach and track the total number of residents enrolled through the insurance enrollment outreach program.
• Total number of residents assisted at free walk-in clinics
• Total number of residents attending information and training sessions offered by Marlborough Hospital professionals
• Total number of vaccinations delivered to community members

E. Process and Considerations for Determining a Budget

A report is made to the Board of Trustees once per year regarding community outreach and community benefit activities, including existing and proposed programs and outcomes. Priority is given to maintain levels of community benefit funding within the Marlborough Hospital operating budget, even within the current fiscally constraining environment.

F. Process for Reviewing, Evaluating and Updating the Plan

The CBAC reviews Community Benefit activities and outcomes and is also responsible for continuous updating and revision of the Community Benefit Plan. The CBAC reviews emerging community needs. In response to the changing environment, programs are modified or implemented to assure the plan is current and addressing identified needs challenging our communities.
VI. Progress Report: Activity During Reporting Year

A. Expenditures for Marlborough Hospital

COMMUNITY BENEFIT EXPENDITURE
According to the Massachusetts Attorney General Guidelines

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<tr>
<th>TYPE</th>
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<th>APPROVED PROGRAM BUDGET FOR FY 2010</th>
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<tr>
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<tr>
<td>TOTAL</td>
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<td>$901,655</td>
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TOTAL PATIENT CARE-RELATED EXPENSES FOR FY 2009: $60,830,160

NET CHARITY CARE as defined by the Massachusetts Attorney General Office. Health Care Finance and Policy, 403 Reports (includes payments to HSN).

Broader Definition Expenditures

The following Community Benefit Expenditures include the Massachusetts Attorney General Guidelines Expenditures from above plus additional expenditures that play an important role in the delivery of care.

Community Benefits Program

Direct Program Expenses $57,640
Other Leveraged Resources $0

Community Service Direct Expenses $92,906
Other Leveraged Resources $0

Other Contributions $10,855
Charity Care HSN – Marlborough Hospital $ 740,254
Unreimbursed HSN Services (UC Cost) $ 769,864
Payment/Hospital’s Operation Assessment of DHCFP $ 56,708
Hospital Bad Debt/Non-Emergency Care $ 355,248
Medicare Shortfall $ 3,200,000

Broader Definition Total Expenses $ 5,283,475

Total Charity Care at a Glance

A) Unreimbursed Medicare Services $3,200,000
B) Unreimbursed MassHealth Services N/A
C) Unreimbursed Health Safety Net Services (UC Cost) $ 769,864
D) Services/Internal Financial Assistance Program N/A
E) Total Payment Made to Fund Health Safety Net $ 740,254
F) Payment of Hospital’s Operational Assessment of DHCFP $ 56,708

Total Charity Care $4,766,826

B. Major Programs and Initiatives

1. Insurance Enrollment and Outreach, Increasing Access to Care

Financial Counselors have been busy at the hospital and working closely with community organizations encouraging and assisting uninsured residents with the insurance enrollment process. Several insurance enrollment events were planned and held in order to increase enrollment of our community members. The hospital has initiated an Open House for all area residents to come in to sign up and ask questions regarding insurance enrollment and eligibility. In addition, communication and a follow-up process has been implemented to reach out to all of self pay patients inviting them to get assistance in completing forms or to go to our website to learn more about the programs. We have also extended the hours of the Financial Counseling Department and hired staff who speak either Portuguese or Spanish. Other strategies include disseminating information in all areas of the hospital urging patients and visitors to contact Financial Counseling for assistance.

2. To Your Health and Be Well Community Newsletter
We are proud to be able to offer the residents of our community the opportunity to learn about staying healthy topics from the comfort of their own home. During the course of 2009, we taped, for airing on public access, six information sessions. These sessions were hosted by our COO and included several doctors and nurses presenting. The topics included: Sleep Disorders, Boards on Board co-hosted by the Chairman of our Board of Trustees, My Medications and Me, Stroke and Ways to Minimize Your Risk, and No Diversion. We plan to continue these very popular sessions during 2010 as data from the local station supports that this is a useful and interesting program.

3. Safe Summer Fun Day

Safe Summer Fun Day is an annual health and education fair community based effort sponsored by Marlborough Hospital where all members of the community are invited to enjoy educational booths and hands on exhibits. These booths and exhibits are meant to teach children and their families about health and safety. As part of this day, the hospital gives away and fits free bicycle helmets for the children. We also work with the Marlborough Police Department for free fingerprinting.

C. Community Services

1. Interpreter Services

UMass Memorial’s commitment to meet the linguistic needs of the diverse population goes beyond the legal mandates of providing interpreter services in the Emergency Department and the acute psychiatric setting.

The Assabet Valley area has over (26) different cultures; Albanian, Brazilian, Chinese, Colombian, Dominican Republic, Egyptian, Guatemalan, Hong Kong, Chinese, Japanese, Korean, Mexican, Peruvian, Polish, Puerto Rican, Russian, Shanghais, Vietnamese, Bolivian, Chilean, Ecuadorian, El Salvadorian, Greek, Honduran, Indian and European Portuguese. Some of the defined needs include increased access to hospital services, increased cultural awareness and sensitivity of the hospital staff, how to utilize the health care system and increased interpreter and translation services.

In fiscal year 2009, the Interpreter Services Office (ISO) assisted and worked with 13,127 patients, an 8.00% decrease from the year before. The ISO Coordinator has implemented many services to meet community needs: a trilingual patient flyer to educate patients and their families about Interpreter Services and its benefits; a diabetes workshop to educate the Portuguese community, and active membership in the Marlborough Community Partnership Committee dedicated to the cultural issues within the community.

2. Other Community Activities

Marlborough Hospital is also involved in a number of other activities that directly impact our community that include: Senior Fairs held in the various community settings; blood pressure, cholesterol screening and stroke education; dissemination of health education materials focusing on General Dietary Guidelines for Diabetes, Treating Hypoglycemia, Seasoning Alternatives to
Salt, and Reducing Fat and Cholesterol; programs and support groups focusing on Nutrition for Diabetes; and participating in the Annual Marlborough Community Heritage Festival.

D. Notable Challenges, Accomplishments and Outcomes

We are working with challenges such as diminishing resources, and escalating health care costs which cause financial challenges. We endeavor to continue to work within our communities to address their major needs and develop innovative solutions. Our employees remain committed to ensuring that our community members receive the respect and compassionate care they deserve. We promise to strengthen the community ties we currently enjoy and to seek additional opportunities to collaborate effectively with new partners. We will look to maximize resources, broaden our community benefits program and to completely engage the community in our goals and objectives.

VII. Next Reporting Year

A. Approved Budget/Projected Expenditures

In addition to our Community Benefit contributions, we will continue to seek and leverage additional funding from private foundations, federal opportunities and through new collaborative efforts. We recently were approved for a grant that will allow us to educate our community on the risk factors of stroke.

B. Program Initiatives

While facing many local and statewide challenges, we at Marlborough Hospital are also fortunate to have a wealth of community resources and assets as we move forward in our goals and mission.

Programs that will be continued or expanded next year include:

- Insurance Enrollment and Outreach
- Expansion of Culturally Diverse Diabetes Services
- A series of at least three two-hour educational seminars on specific health-related topics presented in the primary language of the audience. Seminars will include diabetes, cholesterol and high blood pressure screenings, and will be held at various locations within our demographic service area to accommodate our population.
- Patient Satisfaction Hot Line for patients whose primary language is not English.

C. Conclusion

Marlborough Hospital continues to make great strides in working collaboratively with others to address the English and non-English speaking populations in the Marlborough area. One of our strengths is based upon relationship building. The hospital seeks out innovative and creative opportunities to bring a variety of health and wellness programs to the community, with a focus on prevention, education and self-development addressing the whole person. Marlborough
Hospital’s Community Benefit approach prides itself in giving back to the local people in order to create healthy communities.
VIII. Primary Contact

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