



# Community Benefits Report

## Fiscal Year 2019

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## **EXECUTIVE SUMMARY**

As a not-for-profit health system, Southcoast Health significantly invests in community benefit programs and services that provide care for the region's most vulnerable residents and help improve the health of our communities. Last year, Southcoast Hospital's Group invested almost \$22.8 million in community benefits initiatives including charity care, hospital-based programs, collaboration with federally qualified community health centers, regional health and human service partnerships and support of community health programs designed to address pressing health issues across our region.

Through our latest community health needs assessment, we identified five priorities in accordance with our mission to improve population health and reduce health disparities in the regions we serve. To address these priorities, we collaborate with hundreds of community partners to plan, implement, monitor, and evaluate our Community Benefits programs.

Southcoast Health's community benefits activities in FY 2019 included the following:

### **Community Health Needs Assessment**

We facilitated four discussion groups with community partners to gather feedback regarding the findings of our 2016 health needs assessment. We utilized this information to create a strategic plan for our 2019 assessment process and will be working with community partners to develop a regional health improvement plan based on the findings to address main issues of concern and health disparities.

### **Community Impact Grants**

Southcoast Health completed its fourth Community Benefits Impact Opportunity grant program. This is a competitive grant process focused on addressing unmet health needs on the South Coast. The grant proposals aligned with the nine priority areas, previously identified through the 2016 Community Health Needs Assessment. We received 45 applications and awarded 18 grants for a total of \$150,000 plus in-kind donations. The awards ranged from the minimum request of \$2,500 to the maximum request for funding of up to \$20,000. An awards ceremony was held for grantees which provided an opportunity for networking and collaboration.

### **Collaboration & Coalition Building**

Coalition building is an important activity that promotes coordination and collaboration through the effective use of limited community resources. In FY19, Southcoast staff led and participated in more than 30 community coalitions across the region. These coalitions are comprised of various stakeholders from the community including health providers, teachers, law enforcement, businesses, religious leaders, and others who come together with a shared goal to make our communities safer, healthier and drug-free.

### **Community Benefits Programs**

Throughout the year, Southcoast collaborates with a number of community partners to implement our community benefits programs. During FY 2019 Southcoast administered 10 programs that addressed the following issues in our region: youth risk behaviors, smoking cessation and prevention, health equity, maternal/child health, health access, behavioral health and substance use, healthy system and environment change, food security, chronic disease and homelessness.

## **MISSION STATEMENT**

Southcoast Health System, a not-for-profit charitable organization, is a leading provider of healthcare services in Southeastern Massachusetts and East Bay, Rhode Island. The organization includes the three hospitals that compose the Southcoast Hospitals Group — Charlton Memorial Hospital in Fall River, St. Luke's Hospital in New Bedford, and Tobey Hospital in Wareham.

Southcoast Hospitals Group is committed to improving the health and wellness of the communities we serve, by identifying pressing health needs and collaborating with community partners to prioritize and meet those needs.

We are accomplishing this through:

- Identifying the unmet health needs of the community through a needs assessment process that includes collaboration with relevant community health coalitions and networks and other community representatives and providers.
- Prioritizing health needs and identifying which needs can most effectively be met through the resources of Southcoast Hospitals Group and its affiliated corporations, particularly the needs of the uninsured and the medically underserved who require enhanced access to care.
- Collaborating with local health providers, human services agencies, advocacy groups and others to develop cooperative plans and programs to address pressing community health needs.
- Developing community benefits plans that incorporate the social determinants of health framework, including environmental, social and other demographic factors that may influence health status.
- Working with the Southcoast Health Board of Trustees the adoption of meaningful programs and services to address unmet needs and to improve the health of all members of our community.

## **INTERNAL OVERSIGHT OF COMMUNITY BENEFITS**

The Southcoast Health Community Benefits Program is under the overall direction of the Community Benefits Advisory Council (CBAC). The CBAC oversees and guides Community Benefits programming and focused efforts.

The CBAC includes representatives from the various communities served by Southcoast Health and represent the diversity of our region, with members who are active leaders in minority communities including the Cape Verdean, Hispanic and Portuguese communities. The CBAC meets six times annually to review, plan and advise on activities and expenditures related to community benefits activities. Our community members have expertise in matters concerning the health and welfare of the community and are active members of local and regional coalitions.

An internal Community Benefits Committee meets bi-monthly to plan and coordinate community benefit projects and activities as guided by the CBAC. This team consists of representatives from departments that regularly engage in outreach in the community including staff from our Southcoast Health Van, Social Services, Stroke Outreach, Diabetes Management, Behavioral Health Services, Patient Access Services, Cancer Outreach, Smoking Cessation, Worksite Wellness, Youth Risk Behaviors program, Urgent Care, and Southcoast's Visiting Nurse Association, Physicians Group and Southcoast Health Network.

Senior management responsibility for the Community Benefits Program rests with Southcoast's Senior Vice President of Brand and Strategy, who also serves as a member of the CBAC. The Director of Community Benefits, who reports to the Director of Government and Community Affairs, manages the day-to-day community benefit activities and leads the internal Community Benefits Committee.

We provide regular updates and presentations on community benefit activities to Southcoast leadership at Vice President, Director and Manager level meetings. Regular messaging of these activities are delivered to all employees through an internal e-newsletter, Southcoast Weekly.

### **FY 2019 Members of the CBAC:**

Helena DaSilva Hughes, Executive Director, Immigrants Assistance Center, CBAC Chair and Trustee, Southcoast Health

Rev. David Lima, Executive Director, Greater New Bedford Interchurch Council

Michelle Loranger, Executive Director, Children's Advocacy Center of Bristol County

Robert Mendes, Executive Director, Boys and Girls Club of Greater New Bedford & Wareham

Dennis Demarinis, Chairperson, The Commission for Citizens with Disabilities in New Bedford

Jamie Berberena, Community Health Worker, City of New Bedford

Lisa Alves, Community Coordinator, Fall River WIC Nutrition Program

Jeffrey Pelletier, Executive Director, Junior Achievement of SEMA

Rachel Davis, Director of Community Benefits, Southcoast Health

Alison Bettencourt, Community Benefits Specialist, Southcoast Health

Stephen Canessa, Senior Vice President of Brand and Strategy, Southcoast Health

William Burns, Director of Government and Community Relations, Southcoast Health

## COMMUNITY BENEFITS PLAN AND ACTIVITIES

### Community Benefits Plan

Southcoast's Community Benefits Strategic Action Plan was first formulated in 1998 as the result of an extensive needs assessment and since is updated annually. Our current plan is based on the 2016 community health needs assessment. Through the needs assessment process, Southcoast identified nine priorities for addressing the most pressing health needs of the community. These priorities are:

1. **Reduction of the high rate of chronic disease** (including diabetes, asthma, cancer and other diseases) in our region.
2. **Reducing Health Disparities** including racial and ethnic disparities, income-based disparities, and education-based disparities. One other aspect of this is increasing access to health care for vulnerable populations through insurance enrollment and outreach.
3. The development of programs and services that support **the reduction of homelessness** in our region including strategies for increased collaboration among agencies serving homeless residents.
4. **Innovative approaches to population health**, i.e. improving health and wellness for defined populations such as specific demographic or geographic groups.
5. **Reduction in the incidence of youth risk behaviors** such as teen violence, high rates of teen pregnancy and substance abuse.
6. **Behavioral health issues that include substance abuse and mental health**, including improved coordination of behavioral health providers and systems.
7. **Development of healthy "System and Environment" change**, including healthy food options, increased access to free and low-cost opportunities for active living, such as public parks, bike trails etc., and reduction in the high rate of smoking in our communities.
8. **Maternal and Children's Health**, including fetal and infant health, abuse and neglect, hospitalizations, substance abuse, healthy weight, and mortality.
9. **Increasing Emergency Preparedness** in our cities and towns, including basic infrastructure equipment.

The activities of Community Benefits are completed in accordance with these priorities. These activities are: conducting ongoing community health needs assessments, awarding Community Benefits Impact Opportunity Grants to community organizations working on projects aligned with our priorities, and coalition-building and collaborating with community partners in the planning, implementing, monitoring and evaluating of the Community Benefits programs described below.

## Target Populations

Target populations are determined by our comprehensive health needs assessment and are reviewed on an annual basis.

Our target populations include:

- South Coast residents who suffer disproportionately from chronic disease such as cardiovascular disease, diabetes, cancer and respiratory disease. Particular focus is given to residents who experience barriers to care due to language, culture, race, income or education.
- Area youth who are at high risk for problems such as teen pregnancy, violence, substance abuse, lack of educational attainment and other risky behaviors that affect health and wellbeing. This includes Gay/Lesbian/Bisexual/Transgender (GLBT) youth.
- Residents who lack access to regular primary health care due to lack of health insurance or other barriers.
- Residents and their families who are impacted by mental/behavioral health issues, including substance use disorder, particularly those who experience barriers to or breaks in care and are forced to rely on the Southcoast Emergency Department for regular care.
- Area Boards of Health, Emergency Medical Services and other municipal agencies whose programs impact a number of aspects of health for their residents, and who have experienced severe budget cuts that have impacted these programs. This may include smoking cessation and prevention, chronic disease management and emergency preparedness.
- Public housing residents, who suffer disproportionately from health disparities and have high rates of unhealthy risk factors including smoking, obesity and hypertension.
- Homeless residents on the South Coast, particularly in the town of Wareham, where the rate of unsheltered homeless exceeds other towns in the region and approaches South Coast cities that have five times the population.
- Those in our communities who experience health disparities due to racial, ethnic or economic factors. These include residents for whom English is not a first language, especially undocumented immigrants. In FY 2019, we continued outreach to residents who are at risk for or suffer from disparities in cancer prevention and treatment.
- The fishing community in New Bedford, who experience higher rates of chronic health issues due to barriers to health access and care.

## **COMMUNITY HEALTH NEEDS ASSESSMENT**

As a community-based health delivery system, Southcoast Health System continually strives to identify the priority health needs of the community and to ensure that its services align with these needs. Every three years we conduct a Community Health Needs Assessment that assists with this goal by documenting the major demographic, socioeconomic and health trends among South Coast residents and by engaging the community to develop information-driven priorities and strategies that can be implemented to improve the overall health of South Coast residents. We worked with the Public Policy Center at the University of Massachusetts, Dartmouth, to conduct our FY 2016 community needs assessment that included three primary activities:

- 1. Demographic and Socioeconomic Analysis:** Understanding the community by examining the region's people in terms of population, race, education, income, poverty, wages, and employment.
- 2. Health Assessment:** Identifying major health issues and needs by analyzing a variety of health indicators, with a focus on health outcomes and disparities.
- 3. Key Informant Interviews and Focus Groups:** Engaging stakeholders to provide qualitative analysis that enriches the primary data.

The geographic definition of the South Coast Region for this report includes the 13 towns and cities served by the Southcoast Health System. Data are reported and compared by city (Fall River and New Bedford), by town when available or relevant (e.g., Wareham), by Community Health Network Area or CHNA (CHNA 25 is reported as Greater Fall River and CHNA 26 is reported as Greater New Bedford), and by region overall (all 13 towns/cities). Data are compared to Massachusetts averages and/or with past years to examine trends.

Overall, Fall River and New Bedford continue to lag the region in most socioeconomic metrics, including lower levels of educational attainment, higher poverty levels, and higher unemployment, although many of the region's towns also struggle with these issues, particularly in comparison to state averages.

Residents also trail their counterparts statewide on many health metrics, particularly in terms of health outcomes. The following results represent the most significant findings based on the five categories included in the health assessment analysis: clinical care, physical environment, health behavior, health outcomes, and children's health, with a focus on health disparities.

The community needs assessment presents data on a variety of health indicators. However, the analysis goes a step further by presenting this data in the context of social determinants of health by highlighting disparities in terms of income, education, and race, all of which are factors that affect health outcomes. The combination of highlighting disparities and identifying census tracts with vulnerable populations allows Southcoast Health System to direct policies and programs to the areas in which they are most needed. The assessment also provides context and validation to the health data through key informant interviews and focus groups.

The complete 2016 Southcoast Health Community Needs Assessment is available by request or for viewing online: [www.southcoast.org/communitybenefits/programs](http://www.southcoast.org/communitybenefits/programs).

## **COMMUNITY BENEFITS IMPACT OPPORTUNITY GRANT PROGRAM**

Southcoast Health completed its fourth Community Benefits Impact Opportunity grant program. This is a competitive grant process focused on addressing unmet health needs on the South Coast. The grant proposals aligned with the nine priority areas, previously identified through the 2016 Community Health Needs Assessment. We received 45 applications and awarded 18 grants for a total of \$150,000 plus in-kind donations. The awards ranged from the minimum request of \$2,500 to the maximum request for funding of up to \$20,000. An awards ceremony was held for grantees which provided an opportunity for networking and collaboration.

The selected grantees for 2019 represented a variety of programs that positively impact communities across the South Coast. The proposals ranged from a program providing outreach, care coordination and support groups for residents impacted by the opioid crisis to mindfulness education in local schools. Other projects promote wellness through programs that promote healthy eating and opportunities for physical activity.

### 2019 Grant recipients:

- Acushnet Council on Aging
- Boy's & Girl's Club of Fall River
- Boy's & Girl's Club of New Bedford
- City of New Bedford: Community Services Department
- Community Economic Development Center of SE MA
- Father Bill's & Mainspring in Collaboration with Wareham Area Committee for the Homeless
- Grace Church
- Greater New Bedford Community Health Center
- Immigrants Assistance Center
- Inter-Church Council of Greater New Bedford: Drug Free NB
- Junior Achievement of Southeastern MA
- Our Sister's School
- People Inc: Diabetes Association, Inc
- SSTAR: Family Health Center
- Steppingstone Incorporated
- United Neighbors of Fall River
- YMCA Southcoast: Gleason
- Youth Opportunities Unlimited

## **COLLABORATION AND COALITIONS**

Coalition building is an important activity that promotes coordination and collaboration through the effective use of limited community resources and every year Southcoast Health staff lead and participate in a number of community coalitions across the region. These coalitions are comprised of various stakeholders from the community including health providers, teachers, law enforcement, businesses, religious leaders, and others who come together with a shared goal to make our communities safer, healthier and drug-free.

During FY 2019, Southcoast Health participated in the following community coalitions across the region:

- Age Friendly Coalition in New Bedford
- BOLD Coalition
- Bristol County Regional Alliance to End the Opioid Crisis
- Bristol County District Attorney's Youth Substance Use Prevention Task Force
- Bristol County Suicide Prevention Coalition
- Community Health Network Areas (CHNAs) in Fall River and New Bedford
- ERASE – Human Trafficking Coalition
- Fall River Opiate Task Force
- GNB Suicide Prevention Coalition
- Healthy Families Advisory Council
- Healthy Tri-Town
- Infant Mental Health Task Force
- SE MA Community Health Worker Collaborative
- Mental Health Providers Network
- New Bedford Homeless Service Providers Network
- New Bedford Human Trafficking Task Force
- New Bedford Opioid Task Force
- New Bedford Resilience Committee
- New Bedford Youth Alliance
- Plymouth County Substance Abuse Task Force
- Plymouth County Suicide Prevention Coalition
- South Coast Regional Network to End Homelessness
- South East Community Health Worker Collaborative
- Substance Exposed Newborn Committee of Southeast Massachusetts
- United Neighbors Community Coalition
- Wareham Community Services Collaborative
- Wareham Fighting Against Addiction
- Wareham Homeless Coalition
- Worksite Wellness Collaborative

## **COMMUNITY BENEFITS PROGRAMS**

### **Program: Responsible Attitudes toward Pregnancy, Prevention, and Parenting (RAPPP)**

Documented health need: High rates of teenage pregnancy in the communities of Fall River and New Bedford, racial/ethnic health disparities in teenage pregnancy rates, high rates of violence and substance abuse among youth in Bristol County, and low educational attainment in Fall River and New Bedford (compared to state averages.)

#### Services offered:

- Reproductive health education and pregnancy prevention programming in middle and high schools.
- Youth drop-in center/after school programming to provide organized activities and tutoring.
- PRIDE 2.0 (Personal Responsibility through Intentional Development and Engagement) pregnancy prevention education, career preparation training and mentoring services including education and college preparation support targeting minority young men.
- Youth Drop In Center at Temple Landing Housing Development in New Bedford.
- Collaboration with the MA Dept. of Developmental Services to provide reproductive health education to teens and young adults with disabilities.
- After school programming in conjunction with the YWCA in New Bedford to provide reproductive health education to New Bedford Middle School youth.
- Asset training for youth serving organizations and adults who interact with youth at any level
- Youth advocacy in schools, organizations and in the community.

Populations served: Middle and high school students, particularly those in communities with high rates of teen pregnancy, youth violence, and other youth risk behaviors. Parents and community members who work with teens.

#### FY 2019 goals:

- Expand services to include underserved populations such as youth with disabilities.
- In collaboration with other youth serving organizations, identify and develop at least one additional location for “drop in satellites” that will offer drop in services/activities and tutoring to populations unable to utilize the west end location(s).
- Conduct at least five trainings the Search Institute’s 40 Developmental Models including, “Everyone’s An Asset Builder,” “Sharing the Asset Builder,” or “Building Assets in School Communities” (4, 4, and 6 hour trainings respectively) in the South Coast region, with a focus on new populations such as disability serving organizations and parents.

#### FY 2019 outcomes:

- Due to unfortunate circumstances this program has been canceled and there are no outcomes to report for FY19.

#### FY 2020 goals:

- Due to unfortunate circumstances this program has been canceled and there are no goals to be measured for FY20.

Community partners:

- Boys and Girls Club of New Bedford
- Dennison Memorial Club
- Fairhaven High School
- Fairhaven Middle School
- Girls Scouts of Southeastern Massachusetts
- Greater New Bedford Regional Vocational Technical High School
- Greater New Bedford Youth Alliance
- MA Department of Developmental Services
- MA Department of Public Health
- Massachusetts Alliance on Teen Pregnancy
- Massachusetts Service Alliance
- Nativity Preparatory School
- New Bedford Child and Family Services
- New Bedford Global Charter School
- New Bedford Public Schools Wraparound Services
- Norfolk County Agricultural High School
- Old Colony Regional Vocational High School
- Our Sisters School
- Partners for a Healthier Community (CHNA 25)
- Temple Landing Housing Development
- Trinity Alternative Junior and Senior High Schools
- Wareham High School
- Whaling City Alternative High School
- YWCA of Southeastern Massachusetts

**Program: Smoking Cessation & Prevention**

Documented health need: The South Coast region has a smoking rate that is close to double the state average, particularly in the region's cities, Fall River and New Bedford and in the town of Wareham.

Services offered:

- QuitWorks referral program (to patients and public housing residents).
- Smoking cessation education for prenatal education program participants, based on survey results from the same population.
- Advocacy for smoking restrictions (bans of cigarette sales in pharmacies, raising the minimum tobacco purchase age to 21, vaping, and smoke-free regulations in public housing), including public service announcement video campaign regarding harmful advertising practices.
- Smoke free campus along with cessation classes for employees, families, and the public.
- Smoking cessation services for residents through the Southcoast Health Wellness Van.

Populations served: Smokers and those at risk for smoking, particularly youth. Other audiences include Southcoast employees, inpatients and outpatients who smoke.

FY 2019 goals:

- Support smoke-free public housing initiatives in Fall River, New Bedford and Wareham with at least three smoking cessation activities through the Southcoast Health Wellness Van.

- Provide smoking cessation education and resources at two community events focused on underserved or at-risk populations.
- Increase Quitworks referrals across the system by 2% (832 referrals).

FY 2019 outcomes:

- The Southcoast Health Wellness Van provided over three smoking cessation activities in partnership with the Fall River, New Bedford and Wareham Housing Authorities.
- Smoking cessation education and resources were provided at over 30 community events
- The number of QuitWorks referrals decreased by 19.96% in FY19 (666 referrals).

FY 2020 goals:

- Increase the number of community events where smoking cessation education and resources are provided by 10% in FY20.
- Investigate cause of decrease in referrals. Aim to increase referrals by 5% (700 referrals).

Community partners:

- Fall River Health Department
- Fall River Housing Authority
- Greater New Bedford Community Health Center
- Massachusetts Tobacco Cessation Program
- New Bedford Board of Health
- New Bedford Housing Authority
- QuitWorks
- Seven Hills Behavioral Health Tobacco-Free Community Partnership
- Wareham Board of Health
- Wareham Housing Authority
- YMCA Southcoast

**Program: Community Health Worker Projects**

Documented health need: Health status indicators demonstrate a number of significant health disparities in our region, both by racial and ethnic segmentation and by income. Financial insecurity poses a major barrier to obtaining needed health services and achieving better health. There are also perceived language barriers to care faced by residents with low levels of English proficiency.

Services offered:

- Professional Development Forums (PDFs) for Community Health Workers (CHWs): Southcoast, in collaboration with regional and statewide groups, played a leadership role in establishing ongoing PDFs for CHWs on the South Coast.
- Fishing Partnership: Southcoast continues to work with the regional Fishing Partnership in efforts to reach out to local fishing families, who suffer from a high rate of chronic disease and sometimes have difficulty maintaining health insurance and accessing care. The Southcoast Health Van works with a CHW at the Fishing Partnership to coordinate regular health screenings and health insurance outreach with Southcoast's Patient Financial Services Department.
- Southcoast participates in the South East Community Health Worker Collaborative, which works to plan CHW trainings and promotes individual and team skill development for CHWs in Southeastern Massachusetts.

Populations served: Those in our community who experience ethnic, racial and socioeconomic health disparities. These include ethnic groups such as Portuguese, Hispanic, Brazilian and Mayan and Cambodian Khmer communities, African-American residents, and the large percentage of residents in our region who live near the poverty level or below.

FY 2019 goals:

- Continue to work with Greater New Bedford Allies for Health: Health Equity Committee to identify and facilitate at least one opportunity for local CHW trainings.
- Support the Southeast Community Health Worker Alliance to provide at least two PDFs in the South Coast region.

FY 2019 outcomes:

- Greater New Bedford Allies for Health: Health Equity Committee facilitated one opportunity for local CHW trainings.
- Southcoast Health supported the SE CHW Alliance in providing two local CHW trainings.

FY 2020 goals:

- Continue to work with Greater New Bedford Allies for Health to identify and facilitate at least two more opportunities for local CHW trainings in FY20.
- Create a new job role on the Southcoast Health Wellness Van for a Community Health Worker to assist and meet the needs of the vulnerable population that we serve in FY20.

Community partners:

- The Fishing Partnership
- Greater New Bedford Allies for Health and Wellness Health Equity Committee
- Greater New Bedford Allies for Health and Wellness
- Partners for a Healthier Community
- Greater New Bedford Community Health Center
- Health First Family Health Center
- Immigrants Assistance Center
- Community Economic Development Center
- SER Jobs for Progress
- Health Access Collaborative
- South East Community Health Worker Collaborative
- Stanley Street Treatment and Recovery (SSTAR)
- City of New Bedford Health Department
- YWCA of Southeastern Massachusetts

**Program: Maternal Child Health Education and Outreach**

Documented health need: Many segments of Southcoast Hospital Group's service region have high rates of smoking among pregnant women and low breastfeeding rates compared to state averages. Furthermore, despite recent declines, teenage pregnancy rates in New Bedford and Fall River are still above the state average.

Services offered:

- Smoking cessation education among this target population (*as described in Smoking Cessation program section above*).
- Referral program for pregnant people who smoke through QuitWorks.

- Weekly Baby Cafés (in partnership with Baby Café USA) led by Southcoast Health Obstetrician/Gynecologist and lactation consultants.
- Subsidized lactation classes at all three Southcoast hospitals.
- Early pregnancy education programming, including targeted expansion of childbirth education enrollment among BMC HealthNet enrollees.
- Parenting support through partnership with People Inc.'s, Healthy Families program.
- Collaboration with GNB Allies for Health Access Committee, including distribution of resource information to community stakeholders, increasing awareness of postpartum depression through community events, and pre-implementation planning for support groups that will target socioemotional issues faced by postpartum parents.

Populations served: Families, including pregnant women, fathers, siblings and new parents, particularly teen mothers and mothers who smoke.

FY 2019 goals:

- In collaboration with GNB Allies for Health: Health Access Committee, work to develop and market a second postpartum maternal mental health support group facilitated by leaders fluent in Spanish and that is located in a more accessible location in the community.
- Continue community education on the benefits of breastfeeding and support at least one community project focused on promoting and/or creating an environment conducive for breastfeeding.

FY 2019 outcomes:

- Southcoast Health collaborated with GNB Allies for Health: Health Access Committee to develop a second postpartum mental health support group that is facilitated by leaders fluent in Spanish at the Greater New Bedford Community Health Center.
- Southcoast Health explored opportunities to install a lactation pod at the Buttonwood Zoo after discovering a need for breastfeeding mothers to have a private place to nurse their babies. Due to change in leadership at the Zoo and construction, this project has been postponed.

FY 2020 goals:

- Increase the number of individuals who enroll in the postpartum support group by 2.5% in FY20.
- Increase the number of women breastfeeding upon discharge by 2% in FY20.

Community partners:

- Boston Medical Center HealthNet Plan
- Greater New Bedford Alliance for Health and Wellness
- Greater New Bedford Community Health Center
- Health First Family Health Center
- Kennedy Donovan Center
- Marion Public Health Nurse
- Meeting Street
- People Incorporated
- South Bay Community Services

## **Program: Health Access Outreach**

Documented health need: High unemployment rates in the South Coast region have led to loss of insurance coverage for many area residents. Additionally, many area residents who have state-subsidized health insurance are not aware of the renewal process. As a result, the South Coast has a higher rate of uninsured residents than the state as a whole.

### Services offered:

- Provide insurance application assistance through Patient Financial Services (at Southcoast Hospitals, community outreach events and on the Health Van) to our patients that are uninsured, underinsured, or denied coverage by a government healthcare program.
- Provide culturally sensitive outreach and education to families, local schools and other community entities, including outreach to public housing residents in Fall River and New Bedford.
- Provide free interpreter services for non-English speaking patients across the Southcoast Health system and during community outreach events as needed.

Populations served: Residents who lack health insurance or need to renew public insurance plans. Residents who have lost their employment and as a result, their health insurance.

### FY 2019 goals:

- Participate in at least 40 community outreach events.
- Continue partnership with New Bedford Housing to hold at least two onsite drop-in events.

### FY 2019 outcomes:

- Patient Financial Services participated in 48 community outreach events, which is 41% increase over FY18.
- Patient Financial Services assisted 15,858 patients, which is a 20% increase over FY18.

### FY 2020 goals:

- Expand community outreach through participation in at least 50 community outreach events in FY20.
- Conduct research to better understand cultural barriers to care including communicating with our Spanish speaking communities.
  - Conduct no less than 4 focus groups
  - Administer no less than 250 surveys

### Community partners:

- Boston Medical Center HealthNet
- Citizens for Citizens
- Area Councils on Aging (for senior health insurance assistance)
- Fall River Health Department and Housing Authority
- Greater New Bedford Community Health Center
- New Bedford Health Department and Housing Authority
- PACE
- Partners for a Healthier Community
- Stanley Street Treatment and Recovery (SSTAR)
- Wareham Social Services Department
- Immigrants Assistance Center
- Community Economic Development Center

## **Program: Behavioral Health/Substance Use Intervention**

Documented health need: Over the last several years, the South Coast region has seen a steady increase in the number of admissions for substance use treatment and greater than state averages for hospitalization rates due to opioid related injuries and neonatal abstinence syndrome (NAS). Additionally, South Coast residents also report higher numbers of days of “poor mental health” than the state average.

### Services offered:

- Behavioral Health Connect (BHC), a comprehensive online database offering information on regional behavioral health services and community resources. The database includes over 1,000 pages of searchable information on hundreds of clinical and community behavioral health and social service agencies. Located on our public web site, BHC is available for use by Southcoast staff, other behavioral health providers and consumers and updated regularly by Southcoast staff based on input from community partners.
- Members of our staff participate in 11 local community coalitions to address various behavioral health issues including, the misuse of prescription drugs, underage substance use, risk behaviors in youth, maternal mental health, substance-exposed newborns, suicide prevention, and overdose prevention/intervention.
- Southcoast facilities host a variety of behavioral health support groups open to the community across the South Coast region. Included in these are weekly groups aimed to support those struggling with issues relating to addiction such as a women-only meeting of Narcotics Anonymous and “Learn to Cope,” a peer run group for families of those suffering with an opioid addiction. Together, these groups serve an average of 80 or more individuals per week. In addition to providing peer support, Learn to Cope offers attendees the opportunity to be trained in the use of Narcan (opioid overdose reversal drug) and supplies those who are trained with kits to take home.
- New Beginnings Program, created through a philanthropic donation, this program provides support to opiate exposed newborns and their mothers with the goal of improving long-term outcomes. This program includes referral to medication treatment programs, education on NAS, assistance developing a plan of safe care for discharge and referral to community agencies as needed to address social determinant and health needs. The program’s primary goals are to increase newborn/mother visitation (frequency and duration), decrease length of stay for newborns and newborn foster placements, and decrease postnatal opioid overdoses.

Populations served: South Coast residents who experience behavioral health issues such as substance use disorders, mental health diagnosis (e.g. major depressive disorder), or dual diagnosis with both substance use and mental health disorders.

### FY 2019 goals:

- Complete rebranding of Behavioral Health Connect and launch a strategic communication campaign to providers and the general public to increase general awareness of the database and engage at least 10 providers in utilizing the new provider portal.
- Continue to expand clinical to community linkages for pregnant women with substance use disorder (active and in recovery) and their families through targeted outreach to community partners and through involvement in SENSE. Work with SENSE to increase referrals for infants born with SEN/NAS and develop recommendations for best practices in referring and engaging families in early intervention services.

#### FY 2019 outcomes:

- Decision was made to integrate the Behavioral Health Connect portal with a new platform called Aunt Bertha. The new database is in development and will be called South Coast Resource Connect.
- Through effective collaboration and messaging, more than 67 Moms were referred to the New Beginnings Program. Southcoast worked with SENSE to hold a conference with 350 participants focused on NAS/SEN, best practices and shared experiences.

#### FY 2020 goals:

- Increase the number of moms and substance exposed newborns referred to the New Beginnings program by 15% in FY20.
- Through the New Beginnings program, continue to decrease the length of stay for moms and babies who have been diagnosed with NAS by 2% in FY20.
- Implement new social determinant of health screening tool in primary care offices and the Southcoast Wellness Van engaging at least 60% of patients offered in screening. Launch South Coast Resource Connect to assist with community linkages and referrals if a patient screens positive for a social determinants of health need.

#### Community partners:

- AdCare North Dartmouth
- City of New Bedford Opioid Task Force
- Community Counseling of Bristol County
- Fall River Health Department
- Fall River, Taunton and Dighton MOAPC and SAPC Coalitions
- GNB Suicide Prevention Coalition
- Greater New Bedford Interchurch Council
- High Point Addiction and Treatment Center
- Massachusetts Department of Children and Families
- New Bedford Health Department
- New Bedford Mental Health Providers Network
- Partners Substance Abuse Committee
- Positive Action Against Chemical Addiction (PAACA)
- Seven Hills Behavioral Health
- Stanley Street Treatment and Resources (SSTAR) Health Center
- Substance Exposed Newborn Committee of Southeast MA (SENSE)
- Turning Point Wareham
- University of Massachusetts Dartmouth

### **Program: Healthy System and Environment Change**

Documented health need: Creating healthier communities depends a great deal on the environment that people live in, which include their homes, neighborhoods and wider communities. We recognize that many chronic diseases and health problems that afflict area residents relate to risk factors such as sedentary lifestyles and high rates of smoking. Significant health disparities exist in our region, evident in chronic disease and mortality rates. Residents in several of our communities, namely Fall River and New Bedford, often lack access to healthy nutrition such as fresh fruits and vegetables and safe and inexpensive exercise options. These communities also have extremely high rates of smoking.

#### Services provided:

- Southcoast annually collaborates with the Fall River and New Bedford Fitness Challenges, which engage more than 800 residents each year in a low-cost program over several weeks to promote physical activity. Southcoast provides all health screenings at kickoff events and helps provide ongoing events and education for participants.
- “Be Well Wareham,” program, a once a month event offering participants the opportunity to walk with a Southcoast physician and then join Southcoast staff in healthy activities such as chair yoga. This program is in collaboration with YMCA Southcoast.
- Southcoast supports various wellness events that targets vulnerable neighborhoods including Homeless Connect.
- Southcoast engages in many efforts to expand food security and food rescue programs.

#### Projects include:

- A food rescue program conducted in our hospital cafeterias that provided 3,476lbs of food to local food pantries. This program is in collaboration with the regional Hunger Commission of the United Way of Greater New Bedford.
- Southcoast hosted over 60 Farm Stands at the three hospital sites once a week from early July through October. Southcoast staff and community members attend the markets, improving direct access to healthy and locally grown vegetables and fruits.
- Southcoast in partnership with AD Makepeace held over 18 farmers markets that resulted in over \$2,000 of donations to local food pantries.
- Southcoast provided weekly donations to the United Way Mobile Markets which provided over 2,000lbs of fresh produce to be available during the markets.
- Southcoast staff regularly participate on a number of coalitions focused on addressing social determinants that impact health including food insecurity, housing and homelessness, opportunities for active living, and access to education and employment opportunities.

Populations served: South Coast residents who experience food insecurity and have low rates of physical activity, particularly low-income residents in the cities of Fall River and New Bedford, where data show these risk factors to be higher than the region as a whole.

#### FY 2019 goals:

- Work with the Near North End Alliance to develop at least one wellness event that targets one of New Bedford’s most vulnerable neighborhoods.
- Identify at least one new opportunity to expand food security, food rescue and nutrition education in collaboration with Southcoast Food Services and community partners.

#### FY 2019 outcomes:

- Southcoast supported the Near North End Alliance in promoting a wellness event targeting vulnerable residents, including undocumented immigrants and their families. The Near North End Healthy Community Day event provided attendees with identifying available resources through a resource tables, a lunch was served followed by a cooking demo, and activities were on-going.
- Expanded the food rescue program through Southcoast Food and Nutrition services and community partners by donating \$5,874 worth of food to local food pantries.

#### FY 2020 goals:

- Implement a CSA pilot program in partnership with local farmers that has at least 25 participants to increase access to affordable locally grown produce.

- Expand “Be Well Wareham” programming to include health screenings and a nutritional component in FY20.

Community partners:

- American Heart Association
- Catholic Social Services
- City of New Bedford Health Department
- City of New Bedford Office of Planning
- City of New Bedford Parks and Recreation
- Coastal FoodShed
- Fall River Community Recreation Department
- Fall River Health Department
- Hunger Commission of Southeastern Massachusetts
- Immigrants Assistance Center
- New Bedford Economic Development Council
- New Bedford Well
- Partners for a Healthier Community
- Southeastern Massachusetts Agricultural Partnership (SEMAP)
- Southeastern Massachusetts Food Security Network
- United Way of Greater New Bedford
- Wareham Health Department
- YMCA Southcoast

**Program: Southcoast Health Van**

*(Licensed by the Massachusetts Department of Public Health)*

Documented health need: Many South Coast residents lack access to regular primary and preventive health care. There is a low rate of recommended colorectal screening in our region, due to cultural and health access barriers.

Services offered:

- Focused outreach on vulnerable populations in public housing, senior centers, the fishing community, soup kitchens and ESOL programs.
- Health screenings, including cholesterol, blood pressure, blood sugar, body mass index, bone sonometry, oral cancer, colon cancer, pregnancy, and sexually transmitted disease (STI) testing at a number of teen clinics at local high schools.
- Health information for stroke prevention and cancer education on breast, skin, cervical, prostate, lung and colon cancers.
- Referrals for primary care and other health services including access to health insurance.
- Outreach and screening to commercial fishermen and their families, who often lack access to regular primary health care and have a higher incidence of health risk factors and chronic disease.
- Monthly screenings and education at a number of housing sites throughout New Bedford, Fall River and Wareham.
- ESL Program (English as a Second Language) in New Bedford, which serves a diverse group of immigrants. Van staff also collaborates with the Adult Learning Programs and the Immigrant Assistance Center in New Bedford.

- Community outreach, screenings and education as part of the annual Fall River and New Bedford Fitness Challenges and monthly New Bedford Well program, a free exercise, nutrition and education program for New Bedford residents.
- Collaboration with local family planning agencies to offer counseling on sexually transmitted diseases, pregnancy prevention and confidential pregnancy testing at several high schools in the South Coast region.
- Continued collaboration with the City of New Bedford, Board of Health and New Bedford Public Schools to provide vaccinations to Middle and High School students for school entry, most are homeless or have recently entered the country.

Populations served: South Coast residents who lack access to regular primary and preventive health care, particularly populations who have language, income or geographic barriers to accessing care. The Southcoast Health Van serves an ethnically diverse population including Portuguese, Brazilian, Hispanic, Mayan Kichie and Cambodian immigrants.

FY 2019 goals:

- Continue the collaboration with New Bedford Public Schools to offer vaccinations at least once per month to decrease the number of school age children that are under immunized by 25%.
- Work with the Southcoast Information Technology team to upgrade the Wellness Van's data systems and integrate into EPIC (Southcoast's electronic medical record system) in order to develop a process by which data can be collected and analyzed. Use this information to develop baseline measurements for future outcome evaluations and to inform strategic planning and to perform system and quality checks.

FY 2019 outcomes:

- 13 pediatric clinics were held in collaboration with New Bedford Public Schools and the New Bedford Health Department. 178 students received vaccinations for a total number of vaccinations given of 456.
- The Wellness Van was equipped with Wi-Fi to promote access to information and referrals to community resources. Work to integrate into EPIC (Southcoast's electronic medical record system) is underway.

FY 2020 goals:

- Develop a strategic plan for the Southcoast Wellness Van that will increase visibility in the business community and continue to provide health screenings to underserved and vulnerable populations in the South Coast region. Increase overall reach by 3%.
- Continue to participate in pediatric vaccinations clinics as needed increasing students vaccinated by 5% in FY20.

Community partners:

- Adult Learning Programs on the South Coast
- Church of the Good Shepard
- City of New Bedford Fire, Police and municipal staff
- Fall River Public Schools
- Greater New Bedford Allies For Health
- Greater New Bedford Regional Vocational High School
- Local colleges including Bristol Community College and UMass Dartmouth
- New Bedford Housing Authority
- New Bedford Public Schools

- New Bedford/Wareham Family Planning
- Old Colony High School in Rochester
- Partners for a Healthier Community
- Sister Rose House
- St. Anthony of Padua
- The ESL Program (English as a Second Language) in New Bedford and Taunton
- The Immigrant Assistance Center
- The United Way of Greater New Bedford
- Wareham Public Schools
- YMCA Southcoast

### **Program: Cancer Outreach**

Documented health need: The South Coast region generally has higher rates of cancer than state averages in almost all categories of cancer, with the top three highest incidences being in breast cancer, prostate cancer and lung cancer.

#### Services offered:

- Breast cancer: Provided breast cancer education to more than 1,000 women at a number of events including multiple health fairs geared toward women, a senior health fair at Dartmouth COA and free mammograms to uninsured individuals during the month of October.
- Colorectal cancer: Assisted vulnerable residents overcome barriers to preventative and comprehensive care for colorectal cancer, utilizing community health workers to provide education and navigation.
- Prostate cancer: Through the Health Van, we distributed educational materials in both English and Spanish.
- Skin cancer: In addition to free skin cancer screenings, we provided skin safety and prevention information at a variety of venues with a focus on local schools to emphasize sun safety and the risks associated with tanning beds.
- Lung Cancer: The Lung Cancer Screening program has now become an open referral process. This will allow for necessary candidates to get into the program more efficiently.
- Cancer prevention outreach: In collaboration with the Community Economic Development Center, a Southcoast Oncologist conducted a discussion and prevention education activity to over 60 non-English speaking individuals in their primary language of Spanish.
- Relay for Life: We reached over 3000 people during our participation at four Relay for Life celebrations in New Bedford, Fall River, Tri-Town and Wareham. Sun safety and skin cancer awareness was the focus.
- Shine a Light on Lung Cancer: Over 125 guests and Southcoast staff filled the Fairhaven Cancer Center to provide our community with hope, inspiration and support for those impacted by lung cancer and those at risk.
- Celebration of Hope: Over 700 survivors and guests attended an event meant to pause and honor individuals who are living with a cancer diagnosis and their families. Creative activities, live entertainment, refreshments and an inspirational one-hour formal presentation was given by Southcoast providers.
- Every year, Southcoast Centers for Cancer Care Physicians and Nurse Navigators donate their time by offering free lectures in the community on a variety of subjects.

Populations served: General public and particularly racial, ethnic and other groups who are at higher risk of a particular type of cancer or who get cancer at a rate higher than the rest of the population.

#### FY 2019 goals:

- Host at least one free cancer screening in the community, targeting underserved populations.
- Develop and implement a new program within the Cancer Center for patients and families that focuses on overall wellness.

#### FY 2019 outcomes:

- During the month of October, Southcoast offered free mammograms to anyone that did not have insurance coverage.
- The Oncology Outreach Coordinator position was eliminated midway in FY19 resulting in a delay in developing and implementing a new wellness program.

#### FY 2020 goals:

- Increase referrals to the lung cancer screening program by 5% in FY20.
- Continue Cancer outreach and prevention education by attending two additional community events with those who are underserved in our region during FY20. Provide the necessary materials in the appropriate languages to address the needs and additional services these individuals may need.

#### Community partners:

- American Cancer Society
- Community Economic Development Center
- Fall River Health Department
- Fishing Partnership
- Fly Foundation
- Gloria Gemma Foundation
- Greater New Bedford Community Health Center
- Health First Family Health Center
- Immigrants Assistance Center
- Inter-Church Council
- New Bedford Board of Health
- Partners for a Healthier Community
- Sailing Heals
- Wareham Board of Health

### **Program: Coalitions to End and Prevent Homelessness**

Documented health need: Homelessness is a problem throughout our region, particularly in the town of Wareham where the rate of unsheltered homeless residents approach numbers in our larger cities where there is more than triple the population.

#### Services offered:

- The Wareham Homeless Committee (WHC) in collaboration with Father Bill's and Mainspring and Turning Point, works to identify needs and provide a range of services for homeless individuals. Together with the WHC, Father Bill's, the Town of Wareham, the Buzzards Bay Coalition and the Wareham Land Trust, an innovative housing program was created that combines housing for the homeless with land preservation.
- Memorandums of Understanding (MOUs) among all WHC members allow continued focus on a working list of chronically homeless residents in Wareham. Homeless residents are interviewed

to determine if they qualify for various federal and state housing programs and that information is used to create a prioritized housing list.

- Southcoast GNBCHC Wareham is an active participant and maintains a leadership role in the Greater New Bedford Homeless Service Providers Network and supports initiatives such as Rise up for Homes and Homeless Connect.
- Oskar's Closet was created at the Charlton Memorial Hospital within the Emergency Department. This program was created by a nurse within the Emergency Department and provides donated items to patients who identify as homeless and are in-need. Items that have been provided include hats, gloves, basic toiletries, socks, etc.

Populations served: Individuals in the region served by Southcoast Health who are currently homeless or at risk of becoming homeless or individuals who were previously homeless and recently housed.

FY 2019 goals:

- Work with community partners to determine a system for collecting and sharing data related to the number of homeless residents across the region, and to identify their most pressing health and social needs.
- Continue to work with the region's homeless shelters to expand accessible medical services and better support shelter staff caring for individuals with low to moderate medical needs.

FY 2019 outcomes:

- Southcoast implemented a standardized process for screening patients in the emergency room and primary care for needs relating to housing and homelessness and is able to share this data to inform collaborative work with the Homeless Service Providers Network.
- Southcoast supported community projects that expanded medical services at the First Step Inn, Fall River and the Nights of Hospitality, Wareham, through the Community Benefit Impact grant program. The Southcoast Wellness Van provided health screenings and immunizations regularly at the Sister Rose House in New Bedford.

FY 2020 goals:

- Expand Oskar's Closet to an additional Hospital Emergency Department in FY20.
- Continue to support community coalitions and homeless shelters to provide medical services to those in need.

Community Partners:

- Catholic Social Services
- City of New Bedford
- Father Bill's/Mainspring
- Greater New Bedford Community Health Center
- New Bedford Homeless Service Providers Network
- South Coast Regional Network to End Homelessness
- Stepping Stone Incorporated
- Town of Wareham
- Turning Point
- United Way of Greater New Bedford
- Partners for a Healthier Community Fall River
- United Neighbors Coalition
- PAACA
- PACE
- Citizens for Citizens
- The Women's Center

**EXPENDITURES DURING THE REPORTING YEAR**

In FY 2019, Southcoast contributed almost \$22.8 million in community benefit programs that reached the disadvantaged, underserved and those at-risk, and provided services they otherwise would not have been able to access. Our major initiatives concerning health access, health equity, behavioral health and youth risk behavior all had significant impact, with growing programs that reached large numbers of South Coast residents.

		<b>FY 2017</b>	<b>FY 2018</b>	<b>FY 2019</b>	<b>FY20 Approve</b>
Community Benefits Programs	Direct Expenses	\$11,459,744	\$13,663,225	\$13,923,379	\$14,000,000
	Determination of Need Expenditure	\$0	\$0	\$0	
	Other Leveraged Resources	\$692,128	\$1,245,184	\$537,095	
	Volunteerism	-----	-----	(\$151,155*)	<i>*not included in total expenditure</i>
Net Charity Care		\$6,750,771	\$7,183,943	\$8,310,708	
Corporate Sponsorships		\$85,000	\$105,000	\$125,964*	<i>*included in Direct Expenses \$125,000</i>
	Total Expenditures	\$18,987,643	\$22,197,352	\$22,771,182	
	Total Patient Care Expenses	\$678,880,034	\$704,153,311	\$747,642,844	

*\*Please note: This represents the number of hours that Southcoast Health staff participated in the community volunteerism on their own time and is not counted in the total expenditures.*

## **CONTACT INFORMATION**

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### Public Access to This Report:

This report, along with those of other not-for-profit hospitals in Massachusetts, is available online from the Massachusetts Office of the Attorney General.

<[www.mass.gov/ago/](http://www.mass.gov/ago/)>

Southcoast also makes its annual Community Benefits Report available on its own Website, along with an archive of reports from prior years.

<[www.southcoast.org/communitybenefits/](http://www.southcoast.org/communitybenefits/) >