

**Mary Washington Healthcare Community Benefit Implementation Strategy  
2016-2019**

*Mary Washington Healthcare, in compliance with the Internal Revenue Service regulations related to section 501(r) of the Affordable Care Act, created the following document to provide a road map on how it will use the findings of the Rappahannock Region Health Needs Assessment to ensure it is meeting the needs of the communities it serves.*

**Community Health Needs Assessment Summary**

Mary Washington Healthcare and the Rappahannock Area Health District launched the Rappahannock Region Community Health Needs Assessment in January 2015. The Rappahannock Region was charged with completing a Community Health Needs Assessment to identify high priority healthcare needs within the regional Mary Washington Healthcare service area. The Rappahannock Region is financially supported by Mary Washington Healthcare, the Rappahannock United Way, the Rappahannock Area Community Services Board, GEICO, Rappahannock Area Health District, Mary Washington Hospital Foundation, and Spotsylvania Regional Medical Center. The Health Communities Institute out of Stanford University was contracted to facilitate planning meetings, gather and analyze related data, and manage project timelines and schedules.

The Rappahannock Region established two committees: Advisory and Steering. The Rappahannock Region Advisory Committee comprises 40 community volunteers representing regional hospitals, health departments and insurers, private businesses, community-based organizations, and healthcare and mental health services providers. The Rappahannock Region Steering Committee includes representatives from Mary Washington Healthcare, the United Way, GEICO, the Moss Free Clinic, the University of Mary Washington, Spotsylvania Regional Medical Center, and the Rappahannock Area Health District.

Data Collection for the Rappahannock Region Community Health Needs Assessment focused on the following areas: community input, vital statistics, reasons for doctor and clinic visits, risk factors for common illness, lifestyle improvements, and localities where residents were not meeting established health targets. Some data is available only on the countywide level but still provides valuable information. Both qualitative and quantitative data were collected between April and August 2015.

*Qualitative primary research:*

The qualitative primary research for the 2015 Community Health Needs Assessment was conducted by key informant interviews with community leaders from public and private organizations selected for the Rappahannock Region Advisory Committee and engagement of Mary Washington Healthcare's Citizen Advisory Council, along with solicited community input.

*Secondary data and information sources:*

Information was obtained from a number of different sources such as the Healthy Communities Institute's Community Health Information Resource tool (CHIR), the Virginia Department of Health, the American Community Survey, the Urban Institute, Healthy People 2020, and information supplied directly from a sample of healthcare service providers within the defined community.

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**Prioritizing Health Needs**

The Steering Committee of the Rappahannock Region reviewed and established decision-making criteria to guide their discussions regarding identification of the region's highest priority healthcare needs. The criteria that follow are not listed in order of priority:

1. Magnitude of the identified priority
2. Severity of the problem – the risk of morbidity and mortality associated with the problem
3. Alignment of the priority with the community's strengths and health priorities
4. Impact of the identified priority on vulnerable populations – health care disparity
5. Importance of the priority to the community
6. Existing resources addressing the identified priority
7. Relationship of the priority to other community issues
8. Affordability of intervention strategies
9. Potential for short-term and long-term impact on the community

The criteria yielded The Top Five Health Priorities identified through the Rappahannock Region Community Health Needs Assessment:

1. Obesity (including Childhood Obesity, poor nutrition and physical inactivity)
2. Access to Health Services
3. Substance Abuse (with emphasis on Tobacco and Illicit drug use and Teen & Adolescents)
4. Behavioral Health (with emphasis on Teen & Young Adults and Seniors)
5. Cancer (Breast, Lung, and Prostate Cancer)

**Addressing the Top Five Health Needs**

Mary Washington Hospital and Stafford Hospital organized its implementation strategy around Mary Washington Healthcare's core Community Benefit objectives established for years 2016-2019. Utilizing the resources of Mary Washington Hospital and Mary Washington Healthcare's Centers of Excellence, all Top Five Health Needs will be addressed during the three-year time period. The Mary Washington Hospital Implementation Strategy will target persons living in the City of Fredericksburg and the counties of southern Stafford, Spotsylvania, Caroline, King George, Westmoreland and eastern Orange. Not all Community Benefit Programs listed in the implementation strategy will be held on the campus of Mary Washington Hospital. Promotion of activities and data collection will reflect the targeted communities described above and may result in the development of new sites based upon interest and need.

Internal and external strategies (See Note) along with related anticipated outcomes, identified community partnerships, and specific programs/activities for each Community Benefit outcome describe how the health needs are being addressed. The utilization of the Community Health Information Resource (CHIR) tool is encouraged to provide the ability to benchmark those specific diseases and conditions where a measurement or comparison is available to objectively evaluate the effectiveness of these strategies.

The implementation strategy is reviewed by the Mary Washington Healthcare Board of Trustees. Findings from formal evaluations of each Community Benefit program and continuous engagement of community

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stakeholders influence modifications to the implementation strategy. The implementation strategy is approved annually by the Mary Washington Healthcare's Board of Trustees.

Note: Mary Washington Healthcare considers efforts to support its patients and Associates part of its commitment to the community. Therefore, while programs/activities that are open to the broader community (external strategies) are only reportable to the Internal Revenue Service, Mary Washington Healthcare includes internal strategies targeting only its patients and Associates in addition to reportable external strategies.

*Mary Washington Hospital Community Benefit Objectives*

Create, promote, and make available educational programs to community groups. These presentations will specifically address health needs identified in the Rappahannock Region Community Health Needs Assessment.

1. Facilitate **access** to health-related services for uninsured/underinsured, while supporting a stronger community referral process.
2. Increase focus on **obesity (including Childhood Obesity, poor nutrition and physical inactivity)** improving and maintaining health. Increase diabetes education and screening opportunities targeting both pre-diabetes/diabetes populations with a focus on programming that addresses nutrition and obesity from birth through adulthood.
3. **Substance Abuse** (with emphasis on Tobacco and Illicit drug use and Teen & Adolescents).
4. Improve access to **behavioral health services**, both directly and in providing support for community initiatives. Inform seniors and their caregivers of relevant issues including understanding of mental changes associated with aging, end-of-life decisions, and community resources. Support the initiatives of youth programs that address behavioral health in youth and young adults.
5. Increase **cancer education and screening opportunities**, while emphasizing the benefits of early detection and proper treatment for breast, lung and prostate cancers specifically.

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**Community Benefit Objective 1: Facilitate access to health-related services for uninsured/underinsured, while supporting a stronger community referral process and population management.**

Top Health Need:

Objective 1 will specifically explore ways to improve access to primary care providers in the Mary Washington Hospital community as well as develop processes to improve the coordination of care for uninsured and/or underinsured patients.

Internal Strategies:

1. Explore opportunities to partner with local primary care physicians and safety net providers to establish referral patterns for all unassigned patients being discharged from the emergency and inpatient departments at Mary Washington Hospital.
2. Provide community resources information to all identified, uninsured/underinsured MWHC patients.

External Strategies:

1. Collaborate with various community service groups and safety-net providers to streamline enrollment processes for financial assistance programs taking into consideration current criteria for various social service programs
2. Host information sessions for community groups and advocates to raise awareness of MWHC's Patient Financial Assistance Programs (PFAP).
3. Raise awareness of community resources, including education related to insurance access

Anticipated Primary Outcomes:

- Improve health status of patients by establishing medical homes resulting in reduced readmission rates for patients seeking primary care follow-up in emergency departments.
- Better understanding of community health-related services in the community and appropriate use of medical services
- Increased participation in MWHC's Patient Financial Assistance Programs as compared to last year.
- Increased coordination of care for uninsured/underinsured patients navigating various free or reduced-fee community services.

**Community Benefit Tactic(s) 2016-2019**

1. Develop a Community Navigator Program; a partnership between MWHC, key safety-net providers, willing community physicians, and other community partners that will encourage a coordinated continuum of care for uninsured/underinsured. (MWHC Access Workgroup, Safety-net providers' network)

**Community Benefit Objective 2: Increase diabetes education and screening opportunities targeting both pre-diabetes/diabetes population with a focus on programming that addresses nutrition and obesity from birth through adulthood.**

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Objective 2 will address both diabetes and obesity through its strategies and programs. Resources from MWHC's Diabetes Management Program will be critical in implementing the following strategies.

Internal Strategies:

1. Provide referrals to Community Benefit programs that address diabetes and obesity prevention to pediatric patients and families identified as "at-risk"
2. Provide referrals to Community Benefit programs that address diabetes and obesity prevention to/management to adult patients
3. Promotion of Health & Wellness initiatives related to nutrition and fitness for MWHC Associates

External Strategies:

1. Conduct diabetes-related health screenings in the community
2. Provide diabetes and obesity related support
3. Raise awareness of healthy foods and organizational aids
4. Advocate for area-wide "health living" campaign
5. Supply educational training related to nutrition counseling for healthcare professionals
6. Explore funding opportunities for uninsured patients with an emphasis on higher-risk populations for pre-diabetes and diabetes education and awareness
7. Raise awareness and funds to promote research and support related to diabetes health

Anticipated Primary Outcomes:

- Improved understanding of nutritional needs to reduce on-set of diabetes, as measured by pre- and post-test analysis with Community Benefit program participants.
- Increased knowledge of new and healthy foods to low-income youths and their families using access to free fruits and vegetables, recipe/cooking tips and social media reminders.
- Improved self-efficacy of diabetes management for adolescents, as measured by pre/post-test analysis

**Community Benefit Tactics 2016-2019:**

1. Continue to host "Kids for a Cure Diabetes" Summer Camp in order to promote healthy management of diabetes and provide educational resources to help children manage their health. (MWHC Diabetes Management Program and Diabetes and Obesity work group)

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2. Develop a series of hands-on cooking/nutrition/education classes called the “Fun Food Academy” which will target low-income preschoolers and their families. (Dr. Yum's Project and the Food Service Director of Fredericksburg City Schools, Fredericksburg Head Start)
3. Participate in the “Balanced Living with Diabetes” program. (Virginia Cooperative Extension program, Diabetes and obesity workgroup, MWHC Diabetes management Program)
4. Work with the area YMCA to partner the Y-Change Diabetes and Exercise program

**Community Benefit Objective 3: Increase focus on improving and maintaining cardiovascular health, with an emphasis on addressing heart disease and stroke, illicit drug use, and tobacco use.**

Top Ten Health Needs being addressed:

Cardiovascular health issues and illicit drug/ tobacco use will be addressed under Community Benefit Objective 3. It is expected that topics related to obesity, diabetes and access will also be explored. Resources at Mary Washington Hospital related to the Virginia Heart and Vascular Institute will play a critical role in addressing this objective.

Internal Strategies:

1. Provide referrals to Community Benefit programs as part of discharge planning
2. Work with Wellness Committee programs targeting cardiopulmonary and cardiovascular health coaching to incorporate Community Benefit programming
3. Continuous research and identification of heart-healthy best practices at work places to improve Associate health

External Strategies:

1. Provide cardiopulmonary, cardiovascular and stroke health screenings to improve early detection
2. Provide cardiopulmonary, cardiovascular and stroke support groups that provide education to both caregivers and patients
3. Supply educational training for healthcare professionals to improve recognition and treatment of cardiopulmonary, cardiovascular, and stroke conditions
4. Promote access to and participation in cardiopulmonary, cardiovascular and stroke-related research studies
5. Address tobacco /substance abuse prevention strategies for elementary school aged children through school health nurse education
6. Develop substance abuse program designed for youth – including psycho-social support

Anticipated Primary Outcomes:

1. Better understanding of risk factors, disease process, warning signs, and services available will result in patients seeking effective treatment and management sooner
2. Mary Washington Hospital Associates will have the support and direction to engage in cardiovascular wellness
3. The community will have increased access to opportunities to receive health screenings, education, and referral to increase knowledge and encourage appropriate action

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4. Increased training for healthcare professionals related to cardio-health problems and tool kit related to lifestyle/behavioral counseling will improve patient's self-efficacy on managing risks and disease, if diagnosed

**Community Benefit Objective 4: Improve access to behavioral health services, both directly as well as in providing support for community initiatives.**

Top Health Need:

Mental health and substance abuse will be addressed in Objective 4. Resources at Mary Washington Hospital related to the Brain Health Center and Snowden at Fredericksburg will play a critical role in addressing this objective.

Internal Strategies:

1. Increase capacity and services provided to promote access at Snowden of Fredericksburg to reduce referrals to other facilities due to the lack of beds or specialty services.
2. Continued mental health assessment and physician-requested consultations for disposition with referrals for appropriate services
3. Provide expertise and references to other Workgroups as they address specific mental health concerns

External Strategies:

1. Continue community-based collaborations with such organizations as the Rappahannock Area Community Services Board, regional utilization management teams, and Mental Health of America and to improve coordination of care and increase access to behavioral health services
2. Continue to provide free mental health assessments and screenings to individuals in the community with appropriate referrals to services offered in the community
3. Provide in-kind support to community behavioral support groups, such as Alcoholics Anonymous and Narcotics Anonymous.
4. Continued support 24-hour Crisis Hotline with professional therapists to address immediate, behavioral health needs of community, including referrals to appropriate programs.
5. Explore bilingual programming led by mental health professionals
6. Support the development of a strong mental health workforce with trainings and internships

Anticipated Primary Outcomes:

- Reduction of referrals out-of-area for behavioral services as compared to last year
- Community members will have increased knowledge and awareness of key mental health signs and symptoms as well as a better understanding of services available.

**Community Benefit Objective 5: Increase cancer education and screening opportunities, while emphasizing the benefits of early detection and proper treatment.**

Top Ten Health Needs being addressed:

Cancer, specifically prostate, lung and breast, will be addressed through Community Benefit Objective 5. In addition, issues related to access to expensive cancer treatments and medications as well as mental health

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support for cancer patients and their caregivers will be considered. Resources at Mary Washington Hospital related to the Regional Cancer Center will play a critical role in addressing this objective.

**Internal Strategies:**

1. Special counseling on the MWHC Financial Assistance Policy and improve access for Mary Washington Hospital cancer patient population.
2. Increased access for Mary Washington Hospital cancer patient to clinical trials.
3. To increase the number of Mary Washington Hospital cancer patients that participate in opportunities for complimentary therapies in their cancer care plan.

**External Strategies:**

1. Provide low-cost or free prostate and breast cancer screenings
2. Continue providing support groups and education for those undergoing cancer treatments, those that have completed treatment and their loved ones/caregivers.
3. Identify ongoing cancer research and awareness activities open to the community
4. Increase knowledge of diagnosis, treatment and best practices related to cancer for health care professionals
5. Foster support groups in the community of “trusted” individuals such as faith-based organizations, barbers/hair salons, etc

**Anticipated Primary Outcomes:**

- Through active management, increased access to financial assistance for our most vulnerable cancer patients.
- Cancer support group participants will acquire additional knowledge regarding resources and self-care following participation, as measured by pre- and post-test analyses.
- There will be an increased likelihood of identifying cancer cases at earlier stages.
- The community will be educated on cancer prevention and risk factors, treatment options and insurance information, as measured by pre- and post-test analyses to measure self-efficacy (patients' confidence in their ability to perform certain health behaviors) rates in patients and the connection with their health outcomes.
- Increase opportunities to have an integrated medicine approach to treating cancer.

**Community Benefit Tactics 2016-2019**

1. Continue to provide access to Cancer Integrative Medicine therapies through community awareness and referral programs. (MWHC Regional Cancer Center)
2. Develop and implement a new process to provide our Cancer patients timely access to financial assistance that will not delay necessary cancer treatment (Regional Cancer Center, Patient Financial Assistance Workgroup)
3. Provide free transportation for Cancer patients to increase access to cancer treatments (Regional Cancer Center)
4. Expand pediatric cancer services by partnering with VCU, Ellie's Angels and the MWHC OP Infusion center to provide pediatric patients additional cancer care services. (Regional Cancer Center, Ellie's Angels, MWHC OP Infusion)

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5. Host the Power of Pink Breast Cancer Walk to promote education and awareness about breast cancer in our community. (Regional Cancer Center)
6. Promote Health Professionals Cancer Weekly Conferences (Regional Cancer Center)