



RFGH Community Health

2022-2025 Work Plan

Community Health Needs Assessment Priority Area: **ACCESS TO CARE**

Healthy People 2030 identified several Access to Care objectives, such as:

- Reduce proportion of people who can't get medical care when they need it.
- Increase the proportion of people with Substance Use Disorder who got treatment in the past year.
- Increase the proportion of adults who receive appropriate evidence-based clinical prevention.
- Reduce proportion of people who can't get dental care when they need it.
- Reduce the number of diabetes cases diagnosed yearly.
- Increase the proportion of persons with diagnosed diabetes who receive formal diabetes education.
- Increase proportion of eligible persons completing CDC's recognized lifestyle change program.
- Increase the proportion of people who get the flu vaccine every year.
- Reduce the rate of deaths in children and adolescents ages 1-19 years.
- Reduce the proportion of deaths of car passengers who weren't buckled in.

The 2022 Maine Shared CHNA for Somerset County reported:

- The lack of providers in rural areas directly impacts individual's access to care.
- Between 2015-2019, there were 1,935 individuals per 1 primary care physician.
- 36% of patients need to travel more than 30 miles from their home in 2019 to receive care.
- 8% of adults in Somerset County reported that between 2015-2017 there was at least one time within a 12-month period that they needed medical care but could not receive it due to the cost.
- 9.4% of individuals living in Somerset County between 2015-2019 were uninsured.

Rank #	Goal & Sub Tasks	Collaboration and Resource Needs	Anticipated Barrier(s)	Solution	2023 Update
1.	Increase proportion of adults at risk of developing type 2 diabetes who participate in the National Diabetes Prevention Program (NDPP). Community Health will offer the NDPP once per year to adults 18+ who live in Maine and are at risk for developing type 2 diabetes, for free.	Education budget for NDPP materials.	All programming has been via Zoom due to the COVID-19 pandemic. We have been unable to reach many individuals in Somerset County due to this. Starting January 2024, all of our classes must be in person, as	Begin offering programming in person again.	A new Cohort started in May 2023 via Zoom. Efforts to increase provider referrals expanded and we sometimes receive referrals from RFGH providers. A new Cohort will start in October 2023 and will be held in-person.

			communicated by the CDC.		
2.	Increase the number of child safety seat inspections and child safety seat distribution to Maine families.	State of Maine Bureau of Highway Safety.	At this time, we have a low number of Certified Child Passenger Safety Technicians (CPST) at RFGH.	Train more staff to be CPST. Host one of the State's trainings at RFGH.	Two RFGH staff have been trained to become CPSTs in 2023. More staff have expressed interest but the training dates offered by the State of Maine did not work with their schedules. The CHE also received her Safe Travels for All Children (STAC) Certification, which focuses on adaptive car seats and safe travel for children with special needs.
3.	Increase the number of individuals living in Somerset County who get the flu vaccine each year by: <ul style="list-style-type: none"> Offering annual community flu vaccine clinics. Offering school-based flu vaccine clinics to school districts in Somerset County. 	Education budget for flu clinic materials. Partner with RFGH Pharmacy and State of Maine for vaccines. Partner with schools in Somerset County.	Due to staffing needs throughout and following the COVID-19 pandemic, RFGH may see a decrease in number of vaccines administered.	No solution at this time.	Annual flu vaccine clinics will be offered in the fall of 2023.
4.	Increase training in proper child-care skills to reduce preventable child and infant deaths through the Safe Sitter program.	Education budget for Safe Sitter materials. Partner with local organizations to utilize training spaces as needed, such as: Skowhegan Community Center, Madison Old Point Ave Meeting Room, etc.	At this time, we only have 1 Safe Sitter instructor. This creates a barrier for how often we can offer the Safe Sitter program.	Train more staff to be Safe Sitter instructors.	Three Safe Sitter classes have been offered in 2023, with a fourth class scheduled for the end of August 2023. We have had some staff interested in becoming trained to teach Safe Sitter. Training plans will be discussed soon.
5.	Increase the number of children in Somerset County who have access to dental health education and dental	State of Maine Oral Health Initiative (Katelyn Christiansen).	Potential barrier of schools being receptive to	Continue outreach efforts to local schools.	The Smile Smarts program is continually available to schools. RFGH established a partnership

	care. Community Health will offer Smile Smarts Dental Health Education and other dental health resources to schools in Somerset County.	Education budget for dental health education and dental health items.	programming and resources.		with the Maine CDC to help connect schools to free dental services.
6.	Increase number of individuals accessing SUD/ODU treatment and recovery services.	<p>Kennebec Behavioral Health's Opioid Health Home, Recovery Coaching Program, and Recovery Peer Support Groups</p> <p>RFGH PCPs with X-Waivered status to prescribe Buprenorphine</p> <p>Patient Navigation for all available services</p>	<p>Insufficient or unclear referral pathways; awareness of treatment and recovery options.</p> <p>Lack of engagement and comfort among RFGH PCPs in treating patients with SUD/ODU.</p> <p>Secure funding for long-term patient navigation services.</p>	<p>Collaboration with KBH on developing clear referrals and increasing awareness of available supports.</p> <p>Education and promotion of SUD/ODU treatment; Support and encouragement by RFGH Administration</p> <p>Identify billable services for targeted case management with a variety of payers.</p>	<p>Referral pathways have been established. Promotion and awareness of the pathways needs to increase.</p> <p>Some education has been done by the Medical Director to support PCPs in providing this treatment.</p> <p>No approach has been identified yet.</p>
7.	<i>Defer DSME programming to RFGH Diabetes Education.</i>				

Community Health Needs Assessment Priority Area: **MENTAL HEALTH**

Healthy People 2030 identified several Mental Health objectives, such as:

- Increase the proportion of people with substance use and mental health disorders who get treatment for both.
- Increase the proportion of primary care visits where adolescents and adults are screened for depression.
- Increase the proportion of adults with depression who get treatment.
- Increase the proportion of adolescents who have an adult they can talk to about serious problems.
- Reduce suicide attempts by adolescents.
- Increase the quality of life (physical and mental health) for cancer survivors.

The 2022 Maine Shared CHNA for Somerset County reported:

- The lack of mental health providers in Somerset County has directly impacted this health concern.
- 11.3% of adults in Somerset County report current symptoms of depression.
- 21.4% of adults in Somerset County report having symptoms of depression sometime in their life.
- In 2015, 20.8% of adults in Somerset County reported having symptoms of anxiety sometime in their life.
- In 2019, 34.5% of high school students and 23.2% of middle school students in Somerset County reported feeling sad or hopeless for two or more weeks in a row.
- Youth with disabilities who experience mental health issues are a particularly vulnerable population.
- Emergency department overuse or misuse for mental health issues is directly related to the lack of providers and service options.

Rank #	Goal & Sub Tasks	Collaboration and Resource Needs	Anticipated Barrier(s)	Solution	2023 Update
1.	Increase the number of RFGH staff who are trained in Adult and/or Youth Mental Health First Aid.	Education budget for staff training.	Due to staffing needs, it is expected that staff will have less time to participate in optional learning opportunities.	Continue to provide learning opportunities to staff.	2 Adult Mental Health First Aid (MHFA) classes were offered to staff in 2023, and 2 Youth Mental Health First Aid classes were offered to staff in 2023. The last class offered to staff for both the Adult and Youth programs were also opened up to area service providers. This has increased our student numbers.

2.	Increase the number of community members who are trained in Adult and/or Youth Mental Health First Aid.	Education budget for CHE's time and mileage. Collaboration and partnerships with local organizations and groups.	Potential barrier of schools and organizations being receptive to the program.	Continue outreach efforts to organizations.	Local service provider agencies have been very receptive to the program and many have scheduled private trainings.
3.	Increase the number of middle school and high school staff in Somerset County who are trained in Youth Mental Health First Aid.	Education budget for school trainings, CHE's time and mileage.	There is potential for low interest among community members, resulting in a canceled class. Another potential barrier of schools not being receptive to the program.	Continue to provide learning opportunities to the community. Continue outreach efforts to community members on the importance and the benefits of the program.	CHE has experienced some barriers with schools not being interested, but it is outweighed by the schools who are interested.
4.	Offer Circle of Strength support group to community members living in Somerset County.	Ongoing collaboration and partnership with Oncology.	Establishing a good number of participants due to the support group being on hold for so long throughout the COVID-19 pandemic.	Offer programming in person. Identify facilitator schedule with Oncology staff.	The support program will start back up in September 2023 in-person at RFGH. Oncology staff have identified a facilitator schedule.

Community Health Needs Assessment Priority Area: SOCIAL DETERMINANTS OF HEALTH

Healthy People 2030 identified several Social Determinants of Health objectives, such as:

- Increase the proportion of children and adolescents who receive evidence-based preventative mental health interventions in school and early childhood care and education programs.
- Reduce the household food insecurity and hunger.
- Eliminate very low food security in children.
- Decrease the proportion of adults who report poor communication with their healthcare provider.
- Reduce fatal injuries.

The 2022 Maine Shared CHNA for Somerset County reported:

- Lack of transportation options due to rurality of Somerset County was a barrier for individuals.
- Poverty was frequently mentioned as a contributor to health.
- Adverse Childhood Experiences (ACEs) are known to impact outcomes later in life.
- In 2019, 27% of high school students in Somerset County reported having four or more ACEs. This percentage is higher than Maine overall, at 21.3%.
- From 2015-2019, the median household income in Somerset County was \$44,256. This income is lower than Maine overall, at \$57,918.
- In 2020, the unemployment rate in Somerset County was 6.6%. This percentage is higher than Maine overall, at 5.4%.

Rank #	Goal & Sub Tasks	Collaboration and Resource Needs	Anticipated Barrier(s)	Solution	2023 Update
1.	Offer Stop the Bleed Training to RFGH staff and community organizations.	Education budget for staff and community trainings.	Funding for this program could be a barrier in the future. Due to staffing needs, it is expected that staff will have less time to participate in optional learning opportunities.	Identify more ongoing funding for the program. Continue to provide learning opportunities to staff.	Regular Stop the Bleed classes have been offered to staff. Community classes are made available on an as needed basis, when requested. We have recently trained two new instructors.
2.	Offer Domestic Violence for Healthcare Providers training to RFGH staff.	Continue close partnership with the Family Violence Project.	Due to staffing needs, it is expected that staff will have less time to	Continue to provide learning opportunities to staff.	Classes have been offered monthly in 2023. There has been a positive response from

			participate in optional learning opportunities.		RFGH as well as community members who attend.
3.	<p>Implement a revised Patient Education Review Committee to address health literacy within RFGH.</p> <p><i><u>Update:</u> The Patient Education Committee was reformed in the early months of 2022.</i></p>	Receive support and approval from RFGH administration and partner with identified staff to form the committee.	The Committee is anticipating that there is a lot of outdated patient education circulating RFGH, as well as contradictory patient education between departments and offices.	The Patient Education Committee and other appropriate staff will need to identify a work plan to inventory all patient education at RFGH.	The CHE and Outpatient Clinical Nurse Educator received their Health Literacy Specialist Certification. The Patient Education Committee has been formed again and a new process will be implemented and announced to all departments.
4.	<p>Increase the number of individuals who are screened at their annual visit for food insecurity.</p> <ul style="list-style-type: none"> Provide provider offices with resources to provide to patients and their families to address the food insecurity. 	Education budget for school trainings.	Potential barrier of provider offices being receptive to a screening process.	Continue education efforts to provider offices and administration.	CHE began gathering information and other programs to model after. The project had been on hold due to MediTech but CHE will begin outreach and discussions again.
5.	Increase the amount of patient education that aligns with the health literacy standards for RFGH.	Receive support and approval from RFGH administration and partner with identified staff to form the committee.	The Committee is anticipating that there is a lot of outdated patient education circulating RFGH, as well as contradictory patient education between departments and offices.	The Patient Education Committee and other appropriate staff will need to identify a work plan to inventory all patient education at RFGH.	The Patient Education Committee has been reformed and currently meets on an as-needed basis. The two Health Literacy Specialists and the Director of Education are closely reviewing all new patient education requests that are being submitted.
6.	Improve the ability of the food security system to provide nutritious foods to those in need throughout Somerset County.	<p>Work with local food security organizations to source healthy foods.</p> <p>Establish collaborations between organizations to share resources that meet the specific needs of the communities they serve.</p>	<p>Lack of formal governance at food security organizations.</p> <p>Lack of volunteers.</p> <p>Lack of equipment and the purchase price of new equipment.</p>	<p>Hold meetings with food security organizations to share policies and best practices.</p> <p>Work with external funders to increase capacity of food security organizations.</p>	<p>Regular meetings held by SPH to share best practices and provide supportive technical assistance.</p> <p>SPH worked with Good Shepherd Food Bank to provide \$100,000 in financial support to Somerset County food security organizations.</p>

		Build capacity of food security organizations to store nutritious, fresh food.			CHE is working closely with local leaders to restart the Skowhegan Community Fridge.
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Community Health Needs Assessment Priority Area: SUBSTANCE AND ALCOHOL USE

Healthy People 2030 identified several Substance and Alcohol Use objectives, such as:

- Reduce the proportion of adults who used drugs in the past month.
- Reduce the proportion of adults who use marijuana daily or almost daily.
- Reduce the proportion of people who misused prescription drugs in the past year.
- Reduce overdose deaths involving opioids.
- Increase the proportion of people with a substance use disorder who got treatment in the past year.
- Reduce the proportion of people who had opioid use disorder in the past year.
- Reduce the proportion of adolescents who drank alcohol and used drugs in the past month.

The 2022 Maine Shared CHNA for Somerset County reported:

- Overdose deaths is a primary concern for individuals living in Somerset County.
- From 2013-2017, 0.9% of adults in Somerset County misused prescription medication.
- Between 2015-2019, 11 Somerset County residents per 100,000 died of alcohol induced deaths.
- The rate of drug-affected infant reports per 1,000 births in Somerset County was 140.5 from 2018-2019. This rate is higher than Maine overall, at 73.7.
- A common barrier to addressing substance use and substance use disorders in Somerset County is the lack of education and providers who offer Medication-Assisted Treatment (MAT).

Rank #	Goal & Sub Tasks	Collaboration and Resource Needs	Anticipated Barrier(s)	Solution	2023 Update
1.	Increase access to harm reduction services and resources.	<p>Increase the number of organizations and individuals with access to naloxone.</p> <p>Provide information and materials for the safe storage of prescription drugs</p>	<p>Cost of naloxone; negative community perception of naloxone use.</p> <p>Difficulty in making people aware of take back services.</p> <p>Identifying people who use drugs.</p>	<p>Work with state funding to lower overall cost of accessing naloxone. Provide training to community groups, fire depts., EMS, etc. on how to use.</p> <p>Use social media, mass media, and word of mouth.</p>	SPH has trained other community organizations to be secondary suppliers of naloxone. In addition SPH is supplying naloxone kits that are left behind at EMS calls. There are kits available at the Common Unity Place, Skowhegan Library, and First Congregational Church of Norridgewock. The Mercer

		<p>Promote the use of prescription take back services and locations.</p> <p>Connect people who use drugs to medical care and screening services.</p>		<p>Use Patient Navigator services for people who are accessing treatment to connect to necessary supportive services.</p>	<p>EMS Director is distributing them at events around Mercer. There is a naloxbox now located at the public restroom at Christie's gas station. SPH provided 62 trainings to 160 people throughout Somerset County on naloxone use.</p> <p>Distributed 406 Narcan kits to community members.</p> <p>SPH promoted prescription take back on social media, radio, through newsletters and in-person at community events. SPH Patient Navigator has worked with 100 SUD/ODD patients to connect them to supportive health services.</p>
2.	<p>Increase the number of substance use prevention messages in the community.</p>	<p>Provide positive social norming messages (alternative drug free lifestyle choices) to youth and adults.</p> <p>Discourage social hosting/access for youth for drugging and drinking</p> <p>Promote parental role modeling for youth.</p>	None		<p>SPH provided over 600 messages on safe storage (cannabis, alcohol, and prescription drugs), 40 messages on positive social norming/alternative drug-free choices, 20 social hosting messages, and 20 messages to promote parental role modeling in the form of flyers, rack cards, newsletter articles, and social media posts.</p>

					Worked with cannabis retailers to promote safe storage of cannabis in their customers.
3.	Address youth protective factors that prevent substance use	<p>Foster practices that improve adult and youth relationships.</p> <p>Develop trauma informed practices that promote healthy brain development and healing.</p> <p>Improve self-awareness, self-management, social awareness, relationships skills, and responsible decision-making</p> <p>Increase positive messaging and promote inclusion</p> <p>Establish a youth advisory board</p>	<p>Youth and adult attitudes toward one another.</p> <p>Resistance to new initiatives in the school and community.</p> <p>Lack of family support and knowledge of modeling these skills.</p> <p>Exclusionary practices toward youth by adults in schools and community</p> <p>Lack of engaged students.</p>	<p>Develop systems that allow youth and adults to share experiences.</p> <p>Provide supportive training and TA for school's staff.</p> <p>Work with school staff to develop opportunities to increase student voice.</p>	<p>In June, MSAD #54 passed a policy allowing two student seats on the School Board and Education Program & Policy Committee.</p> <p>A Community of Practice was planned and convened monthly for high school teachers and staff. SPH staff co-facilitated these meetings and provided brief information sessions, they experienced an activity that was often translatable to the classroom and problem solved a case study offered by a group member.</p> <p>27 high school students attended a Student Leadership Summit was held on a Teacher Workshop day. They were introduced to a panel of youth and youth serving organizations from across the state to learn from and be inspired by.</p> <p>Four high school students attended the Maine Youth Action Network</p>
4.	Reduce tobacco use.	Provide education to youth and adults about youth vaping use to prevent nicotine use initiation.	Schools have limited time to have additional instruction focused on vaping.	Offer presentations to clubs, special services, afterschool programs and other places where youth are served.	SPH has provided vaping education and awareness presentations for youth and adults.

		<p>Improve policies to reduce use of tobacco and second hand smoke exposure.</p> <p>Connect adults who use tobacco to quitting services.</p>	<p>Lack of interest by businesses and organizations to address tobacco use.</p> <p>Lack of local quitting resources and tobacco treatment.</p>	<p>Provide mini-grants to businesses to promote new policies and provide free signage.</p> <p>Connect tobacco users to the Maine QuitLink, a phone/online treatment support service.</p>	<p>SPH is working with schools to explore restorative practices that serve as an alternative to suspension for tobacco use and possession violations.</p> <p>SPH has trained multiple organizations to connect their clientele to the Maine QuitLink. Continuing to work with PCPs to promote quitting and connection to the QuitLink.</p>
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